

STAFFING ISSUES IN PRIVATE PRACTICE

By Dr Desmond Wai

"Without good people, an emperor cannot rule a country well (贤才不备，不足以治)."

- Zhu Yuanzhang, founding emperor of the Ming Dynasty

Most of us doctors have little experience in hiring and firing staff. But when we run our private practices, we have to make many human resource management decisions which we are not trained in. In my experience, finding good clinic staff is much more difficult than finding patients. And keeping your staff happy is harder than keeping your patients happy.

Fundamentals for starting your own clinic

Besides being a respected and a competent doctor yourself, you also need the following basic elements to run your own private practice: a clinic space, a clinic assistant (CA), a clinic manager, a clinic management system, a company secretary and accountant, and a corporate bank. Among all these aspects, I personally feel that finding and keeping good clinic staff is the most important and most difficult.

CAs can make or break your practice

At my gastroenterology clinic, my CA has to carry out the following chain of events for each patient: taking their phone calls for appointments, greeting and registering them when they turn up, keying in their personal data into the system, booking procedures and imaging studies for them, explaining to them when and where to turn up for procedures, dispensing medicines, and collecting payments.

Each of the above tasks is simple to carry out, but executing them in a coordinated manner is not that easy. For example, making an endoscopic retrograde cholangiopancreatogram (ERCP) appointment would require a minimum of four phone calls: to book the nurses and equipment at the endoscopy centre, to book a slot in the fluoroscopy room at the X-ray department, to book a hospital bed at the admission office, and to book a slot with an anaesthetist. For me to be able to do an ERCP as scheduled, all the above appointments must be fulfilled together.

The CA must also be meticulous in collecting payments and dispensing medications. Collecting or giving more or less than the exact amount required will create problems.

I have come across rude and difficult CAs from some clinics, who make me think thrice before referring patients to these clinics. Some CAs would not accept new cases after 4 pm, as they were worried the cases would drag on and cause them to close the clinics late. I found out later that this was done without the knowledge of the doctors in the clinics.

On the other hand, I have also come across many excellent CAs from other clinics. Some CAs would escort patients to various parts of the hospital to ensure that they do not get lost. Others would bring medications from the clinic to patients waiting in the carpark to help them save time.

Hiring new staff

Those who have sat on medical school interview panels should be well aware of the difficulties and

limitations in choosing deserving students via a simple interview. Likewise, the same issues apply when selecting clinic staff.

I have found speaking with prospective employees' personal referees to be useful. Once, a candidate applied to work for me. I made inquiries to her former employer, a senior specialist, who replied, "She is still young." As I was in urgent need for staff, I hired her. She resigned after three weeks, and I agreed that she was really "still young" and not performing.

Interviewing is a two-way process. While I am evaluating if a potential hire would fit into my clinic, she should also judge for herself if my clinic is suitable for her. I would normally inform interviewees what is expected of them. It is not easy for people who have never worked in healthcare, to adjust to working in a clinic.

Remuneration

In the market economy, remuneration is a balance between supply and demand. We ought to pay our staff fairly and competitively. But how much is reasonable and how much is excessive? That is a tough question to answer.

One way is to gauge the market rate by talking to colleagues. The coffee and tea breaks during SMA activities are convenient platforms to do so. Another way is to ask for potential employees' last drawn pay and their expected salaries. Naturally, in order to attract staff, it is important to offer salaries which meet their expectations.

But even if your staff agrees to work for you, it is important to keep your ears and eyes open, as changes in the real world can be drastic. With the recent increase in new healthcare facilities opening, the demand for nurses and CAs has increased tremendously. Clinics or hospitals who are desperate for healthcare workers may just poach your staff with a substantial pay rise.

Creative ways to retain staff

Making your staff happy is essential in keeping them. The most basic way is to offer competitive pay packages (as mentioned above). Paying your staff less than the market rate, even if she is happy about it, would make her easily poachable. To make their employees less poachable or even unpoachable, some clinics use the strategy of paying them higher than the market rate.

Another way is to show appreciation and basic courtesy to your staff. For example, some doctors share gifts they receive from patients (usually fruits or other foodstuff) with their staff.

But not all humans are motivated by money and material items. So you can consider offering non-financial incentives to keep staff:

Flexible working hours

Some staff prefer to enjoy time off once a week to pursue their personal interests, like attending part-time courses.

Fixed working hours

Allow staff to leave the clinic by a certain time, even if the clinic is still busy beyond the usual working hours.

Clinic-sponsored volunteer work

Such activities, which include running charity clinics, are particularly attractive to the younger generation, as corporate social responsibility is important to them.

Regular training sessions

For example, you can engage external consultants to educate staff on customer service, or sponsor staff to attend nursing courses (with a bond upon graduation). This appeals to ambitious people who want to upgrade themselves. Such courses could be partially funded by government grants so the cost to the clinic is manageable.

To sum up, we ought to exercise creativity in making our staff happy.

Discipline

Although it is crucial to retain your staff, disciplining becomes necessary if they are not performing – like continuously losing medicines, misplacing money from the cash box, coming to work late, being engrossed with personal things, or treating patients rudely.

Screaming, using harsh words, or throwing tantrums at your staff may lead to their immediate resignation and retaliation, which is bad for your clinic. But being too tolerant and gentle in disciplining may not correct their misdeeds either. With regard to disciplining staff, it is hard to strike the right balance between being firm and assertive, and being thoughtful and considerate.

I will normally ask my clinic manager to speak with the staff behind closed doors and explain the clinic's concerns to her. If you have to discipline a particular staff often, it is probably time to let her go and look for a better one.

Doing personal things during office hours

One of my former CAs was always playing with her mobile phone. She sent SMSes even when she was receiving payments from patients. To me, that is unprofessional. She later confessed that she was actually running an online business so she needed to message her clients regularly. Another past CA of mine watched online movies while I was not in the clinic, leaving lots of clinic paperwork undone.

So I decided not to allow my staff to do personal things in the clinic during working hours. Of course, making occasional urgent phone calls or SMSes is all right. But by and large, I want them to be focused on their jobs during operating hours, and distracted staff are more likely to make mistakes.

Mistakes in cash collection and drug dispensation

My accountant recommends that

my clinic does a cash count daily, and stock check regularly, to ensure there are no mistakes in cash collection and drugs dispensation. A shortfall in cash or drug stocks may be genuine mistakes. But it may also mean fraud.

I have worked with many CAs over the past three years, and I can say that meticulous ones hardly make mistakes in this area. Some clinics make their CAs pay for the missing cash or drugs, but I am not sure that is a good idea, as it may not be easy to prove that it was the CAs' fault, and it will also upset them. If a CA keeps making mistakes in such matters, it is probably better to let her go.

Staff dismissal

The Ministry of Manpower (MOM) has guidelines on staff dismissal, a must-read for all clinics. Obviously, if a CA commits a dishonest act, you can dismiss her on the spot without notice or compensation.

But staff who feel that they were dismissed unfairly or without proper procedures may lodge a complaint to MOM against you for unlawful dismissal, and seek compensation. So if you want to sack your staff, you need to follow some proper procedures.

Prior to firing a staff, you need to document her misdeeds and communicate this to her officially. The problem is that once your CA has received the first warning, she may start looking for jobs elsewhere and tender her resignation unexpectedly.

So you ought to find a replacement before you officially notify your current CA of her unsatisfactory work performance. However, it does become obvious to your first CA, if you bring in a second staff while she is being disciplined.

Once a decision is made to terminate a CA, most clinics would give at least one month's notice. During this period, you will not be certain if your CA will continue to serve the interests of the clinic. I have heard horror stories of while CAs

who created problems for their clinics while they were serving termination notice.

If your staff's performance is so unsatisfactory that she deserves termination, it is better to sack her amicably and let her go on the spot (with one month's salary of course).

Final advice

New world economy

When I was still working at a public hospital many years ago, most of the office and clinic staff had been employed there for decades. But in the new economy, such long-serving staff are hard to come by. So be prepared that no matter how well you treat your staff, many will still leave and look for greener pastures elsewhere.

Have redundancy

Many clinics hire two or more CAs even though they are not that busy. One of the reasons is that we must always be prepared for unexpected events like sudden staff resignation, or emergencies. If your sole CA resigns or goes on urgent leave/long medical leave, your clinic may descend into chaos. So it is best to have at least two staff. However, I have also come across instances where both CAs at a clinic tendered their resignation on the same day.

Prepare backup

I was fortunate that when my CA resigned, my clinic manager (who is my wife) helped fill the gap, till I found a new CA. It is important to have backups in case emergencies happen. Some clinics maintain contacts of part-time staff to help fill any unexpected gap. The clinic doctor should also be the last resort. The other day when both my CA and my wife could not come to work, I did everything myself, including booking scans, dispensing medicines, and swiping patients' credit cards.

Beware of big trends

Major trends in society affect

everybody and we ought to be mindful of them. Currently, many new hospitals (private and public included) will be obtaining their Temporary Occupation Permits soon, and they will need staff to run. Foreign worker numbers are being tightened. Unemployment is at a historic low of 2%. These factors mean that the labour market is tight and will continue to be so in foreseeable future.

What can SMA do?

SMA, the biggest professional body for local doctors, has always been helpful in improving our practice. The following are some things that SMA can do to help us further:

Organising both formal or informal meetings

Attending SMA activities is important, as I often learn a lot about clinic and staff management over lunch or coffee. I am never shy to ask experienced and senior doctors how they solve their clinic problems. It is through such sharing and exchanges that we can gain knowledge of many good practices in handling difficult situations from each other.

Business or management classes

We have more than enough continuing medical education activities throughout the year. But maybe SMA can plan more business or management classes, like talent management, interviewing skills, and customer service. Senior doctors, GPs and private specialists alike, will be a rich source of resources.

Standard employment contract

When I hired my first CA, I had to search high and low for an employment contract template. How long should the probation period be? How much annual and sick leave should a CA be given? What would the recommended duration of termination notice for staff be? SMA can suggest standard staff benefits and providing sample employment contracts.

Guidelines for compensation packages

It is always difficult to decide how much to compensate our staff, including the monthly pay, year-end bonus, sick leave, and health benefits. How much should we pay for a 19-year-old fresh graduate of the Institute of Technical Education, a 25-year-old staff nurse with four years of clinical experience, and a 60-year-old CA with 30 years' clinic experience? SMA can assist by drafting some salary guidelines, based on candidates' duration of experience, skill level, and educational background.

Blacklist

Fraud is not uncommon in private clinics. Upon encountering fraudulent staff, many doctors would just sack them, instead of taking them to the police. And the same staff can look for jobs elsewhere and repeat the same tricks. SMA can set up a clinic staff blacklist so that affected parties could record their experience with such staff onto the list, in order to warn other clinics.

Conclusion

Running your own practice is exciting, rewarding and satisfying. But there are many teething issues that ought to be taken care of. To me, staff/talent management is the most difficult challenge to tackle. Before thinking of how to attract new patients, and how to sharpen our medical knowledge, we also ought to ensure we are keeping our good staff. Without reliable and dedicated staff, it is difficult to run a successful clinic. ■



Desmond is a gastroenterologist in private practice. Like other medical colleagues, he is still struggling to balance family and work. Desmond believes sharing our thoughts and experience are important in moving our profession forward.