



Who's in Charge Here?

Both doctors and office managers can be guilty of micromanagement.

BY LYNN HOMISAK, PRT

To Our Readers: *There are no foolish questions. Chances are that if you have a question or concern in your practice, others are experiencing a similar situation. We're here to help. PM [doctor and staff] readers are encouraged to submit questions to lynn@soshms.com which will be printed and answered in this column anonymously.*

Re: Reference Checks

Dear Lynn,

Is it legal to contact previous employers when applicants list their prior work places?

Absolutely do a reference check on applicants...in fact, always contact a former employer concerning a probable hire. At the very least, vet the one you are considering that shows the most promise. That said, understand you may not get the answers you seek. A former employer's (or their manager's) refusal to cooperate often tells its own story. Almost as if the unwritten law is that if the employer WANTS to say good things

about their former employee, they will. And if they fear negative comments could be troublesome or misinterpreted they will stay quiet. Some employers already have in place policies to offer only name, rank, and

However, new regulation is pending in some states to exclude income history questions, as it may lead to gender inequality. Going forward, you would be wise to check with state/city regulations.

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serial number of former employees.

Bottom line, likely you will get responses to questions like, "did the employee work for you? Dates of their employment?" (Then, maybe) "What was their job title and tasks?" After that, it's usually closed lip. That doesn't mean you shouldn't try to get answers. It doesn't hurt to ask. Current or former employers are certainly not required to disclose salary, though they can if they wish.

Up until recently, you might ask the employee about present salary during the face-to-face interview.

Use every tool to attract and qualify the best applicant and good luck with your hiring process!

Re: Who's in Charge?

Dear Lynn,

I am a new employee in my current practice. I was hired with lots of experience in billing, and I know I can handle the entirety of my job, if only I was given the opportunity. I like my doctor, the problem is our office manager. She is such a micro-

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manager. I cannot do or say anything without her breathing down my neck and adding her two cents. I honestly believe she thinks I cannot do anything right. Our doctor does not interfere, although I wish he would because I have had just about all I can take! My next step is out the door.

Complaints of micromanagement come up all the time. Sometimes, fingers point to the doctors. In this case, the office manager is the offender. Good managers believe that staff have great potential; that they are self-directed and (under the right circumstances) can achieve beyond their capabilities. It doesn't sound like that's the case in your situation. Your office manager may be good at assigning responsibility; however, her all-too common interfering behaviors and actions are far from supportive.

One additional point, though. Employees, if you are on the verge of leaving the practice because you feel overwhelmed by an unrelenting manager, don't avoid speaking to your doctor. And doctors, if you learn that your manager is one whose controlling management style intimidates your employees, please step in. You are still the one in charge. This is still YOUR practice. If you don't realize what is happening around you, consider a random, anonymous management survey every now and then to take the pulse of your staff.

Good managers actually encourage these as a way to sharpen their skills, so if she balks at this idea, it's likely a red flag. (Email me at lynn@soshms.com for a complimentary survey.) Too many offices lose employees because of a territorial manager. From local scout troops to sports teams, little league to professional, and large corporations, sometimes it is that long-time manager who needs to go.

The advice presented a few years ago in a 2014 column to an individual with a similar question (about her doctor) bears repeating for you and other newcomers to this column. To directly address your concerns, replace "doctor" with "manager":

Sadly, many micromanagers do

not realize they micromanage nor do they think that looking over their staffs' shoulders isn't done so "in the best interest" of their practice, so it's doubtful that he'll get it from your anonymous post. But let's address micromanaging anyway as it is more common than you might think.

Why do employers micromanage? Mostly because they don't trust that their employees can competently perform the tasks (perhaps in the exact way that they can). It's that simple. This could be due to getting burned in the past, or because they

ing habits or 3) Move on and find another job.

I recommend #2. Begin to help him build his trust in you by offering to take on a small task, one you know you can competently accomplish. Ask him to explain how he wants it done. Discuss specific time elements, expectations or details you need to know up front. It's especially important to have him clearly define his ultimate outcome. Then explain that you'd like the opportunity to prove to him that you can do this on your own, without his help, and

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personally have a hard time letting go of tasks that they've always done themselves. Micromanaging can start very innocently, as in wanting to genuinely provide guidance to their employees; however, their actions go beyond guiding or mentoring to (as Webster defines it) "managing with excessive control" or scrutinizing every minutia detail, whether it directly concerns them or not. What they don't realize is it continues to chip away at employee morale until, like you, the employee gives up and wants out.

The truth is, unless your doctor is able to place enough confidence in you, he'll likely not change. So what's a skillful, ambitious, responsible employee to do? The way I see it, you have 3 choices. 1) You can accept his behavior, continue complaining and be miserable or 2) Take some intentional baby steps to show him you can be trusted and help him overcome some of his micromanag-



present him with your finished product. If he has complaints that you did it slightly differently, justify your approach and remind him that the outcome is the same. Once this task is finished, take on another.

This reminds me of one office I visited where the doctor requested bilateral AP and LAT views on his new patient. The assistant was one step ahead of him. She knew the protocol and ran to get the x-rays set up, positioning the lateral views first. Before she knew it, the doctor was right on top of her. "No, no, change that" he said. "I always take the AP views

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THE CONSULTANT IS IN

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first so reposition the patient and do it the right way.” In the assistant’s embarrassment, she pulled her doc-

your next patient and I’ll call you when the x-rays are ready.” This convinced the doctor he could let go for he knew that his patient was clearly in good hands.

Better to spend your efforts working to build his confidence in you so that, in time, he’ll no longer feel the need to hover over “every little thing” you do.

tor aside, looked him straight in the eye and said, “Doctor, this is not a matter of right and wrong. Regardless of what view I take first, when I am finished you will have a perfect set of AP and lateral views on your patient. Isn’t that the outcome you want?” The doctor backed off, but not before the assistant added, “Now, there’s no sense in both of us being here. Let me take care of this. Your time will be spent more valuably by seeing

My advice is, if you truly love your job, don’t give up on your doctor so easily. Communicate with him and explain how his actions make you feel. If you discover that the reason he tends to micromanage is due to his previous bad experience with an incompetent employee, help him understand that you are not that person. Better to spend your efforts working to build his confidence in you so that, in time, he’ll no longer

feel the need to hover over “every little thing” you do. If all this seems like too much work and you still choose to leave, it would be beneficial to at least fill out an exit survey, so he knows the real reason for your departure. If he hears it enough, maybe then he’ll get the message and want to try to change for his own sake. **PM**



Ms. Lynn Homisak, President of SOS Healthcare Management Solutions, carries a Certificate in Human Resource Studies from Cornell University School of Industry and Labor Relations. She is the 2010 recipient of Podiatry Management’s Lifetime Achievement Award and was inducted into the PM Hall of Fame. She is also an Editorial Advisor for Podiatry Management Magazine and is recognized nationwide as a speaker, writer, and expert in staff and human resource management.