

Expanded Duties for Ambitious Staff

Satisfy your employees' desire to grow while improving your practice.



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.*

Dear Lynn,

Besides the usual roles that front desk and back office staff have, are there any other responsibilities to add to their job descriptions that would satisfy their ambitions to grow and prove beneficial to the practice? My staff seems interested in expanding their roles.

If members of your staff have indicated that they feel stifled and are looking to accept a little more responsibility within the practice, here are four support positions to consider that will augment the "traditional role" of the clinical or front desk podiatric medical employee. The bonus of delegating tasks that have a positive impact on the practice is that they take some weighty responsibilities off your plate, leaving you more time for patient care or however you choose to use it.

Two recommendations to start with are: OSHA Compliance Officer and HIPAA Compliance Officer.

Every office is expected have a

designated individual for both HIPAA and OSHA. This 'Compliance Officer' can be the same person or handled by two different people. Sometimes, it's the doctor who unenthusiastically assumes the role; sometimes, the office manager or practice administrator, and sometimes, it is handed down (willingly or unwillingly) to a front or back office staffer. Believe it or not, sometimes no one is designated and, in all cases, the doctor is accountable.

The following blog excerpt related to this was taken from Medsafe.com¹, which also references osha.gov and hhs.gov:

Does OSHA/HIPAA training need to be conducted annually?

Yes, annual OSHA training for all employees is mandatory, and training for new-hire employees must be completed within ten days of hire.

OSHA failure to train citations can be issued if just one employee

HIPAA requires organizations to provide training for all employees, new workforce members, and periodic refresher training.

The required manuals are generally on site, but rarely, if ever, opened, reviewed, or updated. New employees in some instances are not even aware these manuals exist and if questioned re: who the compliance officers are, a common response is shrugged shoulders and blank stares. If these positions are in name only or if necessary, ongoing training is disregarded, non-compliance is an issue. You should take this information seriously. The United States Department of Labor and the Department of Health and Human Services do. Penalties are rigid and not something you want to incur.

missed training. OSHA penalties can range from \$0-\$70,000, depending upon how serious the violation.

HIPAA requires organizations to provide training for all employees, new workforce members, and periodic refresher training. The definition of "periodic" is not defined and can be left open to interpretation. However, most organizations train all employees on HIPAA annually. This is considered to be a best practice. Regulations are updated yearly, so it can be difficult for practices to stay current. Failure to comply can result in fines

Continued on page 54

Ambitious Staff (from page 53)

or other consequences.

HIPAA issues penalties up to \$1.5 million depending on the provision of HIPAA violated. Some HIPAA violations can lead to civil or criminal

ratios, monthly gross billing, appeal outcomes, claim errors, etc. (working in cooperation with your biller).

- Overhead.
- Supply inventory and management.
- Patient/New Patient numbers.

involved in the practice or are looking for new challenges, talk with them. Maybe, timing will only allow them to perform one or two additional tasks. That's okay too. Learn their level of interest, where their strengths lie, and if they have skills that are under-utilized.

Final thought. Remember, if employees take on responsibilities/duties over and above their original job description, they should be in line for a wage increase or bonus reward directly linked to their increased work load—and their success. Don't begrudge this because when all is said and done, not only will their professional maturity be

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penalties for employees. If employees weren't provided adequate training, it could cause a greater risk of litigation in the event of such termination. Doctors and nurses can also be charged with ethical violations and might risk sanction or loss of license.

Another valued position/title you can create is that of a Director of Quality Control, or QA Project Manager.

Wouldn't it be useful to have someone keep tabs on your practice data? Monitor your trends? Show where the practice is potentially lacking, where it could do better? Sure, your computer could probably process this raw data, but someone must compile the information and do something WITH that data that could turn things around.

• Orthotic, Shoe, DME dispenses.

• Patient Referrals—who is referring?; most referred foot conditions; no guesswork—real data.

Finally, consider an in-house marketing professional. This individual could focus on some fundamental (still very effective; lost?) internal marketing strategies, e.g.:

- Patient communications (thank



a win for them, it will be a win for the practice as well! **PM**

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An assigned Director of Quality Control would be responsible to actively monitor tracking information, compare it on a monthly or annual basis and take (or recommend) the necessary steps that can improve your practice and even increase your revenue stream. It's almost like having your own management consultant!

Some areas of focus could be:

- Patient wait times—how long are patients waiting; why are they waiting?
- Percentage of no shows, reasons for no shows.
- Financial benchmarking, including days in receivables, net collection

you for your referrals, welcome to our office, sympathy, congratulatory cards, educational tip of the month, etc.).

- Website management and upkeep.
- Blogs.
- Social media and patient engagement; contests; photos.
- Patient recall.
- Visit and educate referring (and non-referring) offices.
- Patient satisfaction surveys.

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Reference

¹ You can read more at <https://www.medsafe.com/blog/compliance-topics/7-common-questions-regarding-osa-and-hipaa-training-requirements-for-dental-and-medical-offices>.



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

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