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# What Happened to Professionalism?

Customer Service is not just a department.

BY LYNN HOMISAK, PRT

y column this month is not in response to anyone's particular question; rather it is a personal look at a management topic that has become concerning to me. That topic? Professionalism. And the question I struggle with...

#### What Happened to the So-Called "Professionals"?

I have spent much of my career in podiatry as a consultant visiting offices and observing operational protocols, including the overall professionalism of the practice. If some staff members did not initially appear as positive representations of their office, I learned it was either because they were never trained properly or were simply not happy in their job. That being said, the cooperation extended to me by most of the staff made my coaching efforts easy. While change was challenging at times, it was not met with resistance.

Of course, having good employees starts with the hiring process—finding that star employee with a star personality. However, the role that professionalism plays in meeting patient expectations and customer service should not be minimized. Because its impact is so instrumental in achieving patient acceptance, all healthcare practices should make professionalism a priority in their staff training program. Sadly, many do not.

Unfortunately, my consultation hat does not come off when exposed to other medical offices—specifically, those relating to my own personal health. Even though I am not hired by these practices in a practice management capacity, I can't help but mentally critique the service I receive.

As a new patient, I've been acutely aware of action, activity, and personality shortcoming, not to mention the general incompetence demonstrated by many of the medical staff I've encountered. Feeling somewhat disheartened, insignificant, and even ignored at times, I couldn't help but think...is the practice aware that their patients are being treated so callously? And if aware, are they okay with it?

Which brings me to the point of this commentary and the bigger question. Is professionalism something

#### patients should no longer come to expect?

Case in point is this short list of what I have witnessed just in the past few months and what can clearly be characterized as "unprofessional behaviors":

- Receptionist eating her lunch at the patient registration window;
- Ignoring the patient standing at the window on arrival waiting to be checked in (or even recognized);
  - Short, uninformative responses to patient inquiries;
- Greetings such as "Hello, welcome!" are replaced with shoving a clipboard through the window (which oth-

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erwise remains closed), giving no further direction except to "Fill these out.";

- Does not address patients by their name, smile, or make eye contact;
- Appropriate dress code replaced with unflattering, ill-fitting street clothes (someone should tell them!);
- Leaving patient in the treatment room for over an hour with zero contact or updates on doctor's arrival;
- Staff complaining of personal (irrelevant) medical complaints to patients instead of focusing on the *patient's* chief complaints or progress;
- Unkempt rooms with empty literature racks and handwritten "Do not use" notes scotch-taped to broken equipment;
- Shirking of HIPAA regulations—e.g., open treatment room doors, patients overhearing other patient conversations.

Thankfully, it's not just negativity I've encountered. There ARE absolutely those in the healthcare profession

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### CustomerService

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who enjoy what they do—and it shows. It's refreshing to see that the more attentive ones check all the professional boxes by extending courtesy, a positive, caring attitude, and a strong sense of knowledge. I think patients find these attributes reassuring and appreciated. I know I do.



It is difficult to find one agreed-upon list of essential components that defines the true professional. Believe me, I've looked. Google-recommended sites offer plenty of opinions; however, none were able to present a coordinated, consistent set of elements that could be used as a standardized guideline across the board.

### Have policy regarding how patients are expected to treat staff and vice versa.

While the following components can be seen as just another opinion (this one of my own design), it highlights those qualities that I would expect a standardized guideline to include.

#### **♦** Knowledge & Competence

- The understanding that what employees hope to achieve within their profession rests in their own hands
- Informed assistants make better assistants because they have an understanding of how to practically apply the information they are given
- With acquired knowledge (knowing how and why to perform a task), assistants can focus on the quality and performance of patient care as opposed to merely getting it done.
- Means of increasing staff education include proper training, in-house programs, educational seminars, performance reviews, relevant literature, and staff meetings. All are critical to the learning process

#### **♦** Respect Others

- Respect must be earned—for ourselves, our patients, their families, other professional colleagues, etc.
  - Influence...don't manipulate
  - Walk the talk
  - Be real; treat everyone equally
  - Show empathy
  - Address patients by their names
  - Always be polite—say please and thank you
  - Back up opinions with facts
- Have policy regarding how patients are expected to treat staff and vice versa



- Document ANY abusive, abrasive, sarcastic, or rude behavior
  - Live the Golden Rule

#### **♦** Image/Appearance

- Dress is a nonverbal communication that stimulates judgmental responses from others.
- Practice should have and follow a written dress code policy
- Defined "appropriate" dress symbolizes role identity, authority, professional

image, competence, and confidence

- Defined "inappropriate" dress and behaviors send a negative message.
- Name badges (or embroidered names on scrubs/jackets) should be worn at all times
  - First Impressions are lasting impressions

#### **♦** Ethics

- Follow the practice's code of ethics (should be included in Employee/Office Manual)
- Understand what influences our moral, ethical decisions
- Employees should perform only what they are trained to do
- Acquire patient's informed consent prior to any procedure
- Encourage additional opinions, referrals or consultations requested by the patient
- Unnecessary surgery is an extremely serious ethical violation
- Treatment recommendations should NOT be based on insurance plan reimbursements
- Post operative care should be provided until full recovery
  - Always aim to do the right thing
- When in doubt about a certain action you are about to take, ask yourself..."If this was my practice...would I do this/spend this/act this way?"

#### **♦** Positive Attitude

- Try to see the glass half full
- Put others first
- Exhibit high energy
- Flexible; Open to new ideas, practice good human relations/communications
  - Let cheerfulness be a mirror for others
  - Appreciate new challenges and experiences
  - Genuine pleasure being with and helping people
  - Hold no prejudices
  - Allow others to be right (whether or not they are)

#### **♦** Teamwork and Communication

• Our #1 PRIORITY IS OUR PATIENT!

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#### THE CONSULTANT IS IN

Professionalism (from page 38)

- Share the practice philosophy: Everyone works together for the good of the patient
  - Help one another
- Recognize the benefits of teamwork—incites new ideas, helps solve problems, supports one another and builds morale

#### **♦** Responsibility/Accountability—Maintain:

- Office cleanliness environment
- OSHA compliance and proper sterilization
- HIPAA compliance & confidentiality
- Risk Management (documentation, communication, etc.)
  - Office Safety and Precaution: Emergency action plan
  - Patient communication & telephone skills
  - Proper training for patient care
  - Meeting outlined job descriptions
- Staying current with new protocol, procedures, techniques
  - A workable schedule

#### Neither should the recent worker shortage be a green light to unprofessionalism.

My passion has always been to educate and train ALL team members to be the best version of themselves as representatives of their practice. If you agree, share and discuss these with your staff at your next team meeting. You can present them as reminders or consider it a step-by-step achievable practice goal. Better yet, look at it as a late-start New Year's Resolution that begins several months into the New Year. It's never too late to begin new practice protocols.

Professionalism is not limited to healthcare. It all becomes real when you consider how you would prefer to be treated in almost any particular service encounter, i.e., restaurant, traffic ticket, air travel, repair shop, grocery store, and yes, a medical office.

Neither should the recent worker shortage be a green light to unprofessionalism. Customer Service is not just a department. It is kindness and understanding and an enormous business asset. Should we continue to expect it? Why not? How hard is it to be nice? **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.