



THE CONSULTANT **IS IN**

Ask Any Chef

Restaurants and practices both require a lot of “behind-the-scenes” cooperation.

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 soslynn@gmail.com which will be printed and answered in this column anonymously.

Topic: Podiatric “Sous Chef”?

Dear Lynn,

Without sounding too frantic, my practice is hitting some real growth snags. I have ten staff people and a healthy load of patients daily. Up until now, I’ve been able survive without someone to manage the day-to-day operational flow. We’ve gotten so busy, and I do not have the time, skill, or inclination to take this on myself. Change is needed to keep us moving forward. Herein lies my question: how and where do I begin? Got any tricks up your sleeve?

I bet if you spoke to an executive chef, he or she would tell you they can absolutely relate to your predicament. At first, that analogy may seem strange, but hear me out. There are valid similarities.

agement, and professional pride can bring a skilled chef to near-breaking point. Theirs is a job of service to a wide range of people, a relentless schedule, and periods of high stress. Sound a little familiar?

Successful chefs learn two things quickly; focus on the skills they have trained for and delegate.

Chefs dedicate a good portion of their lives studying their craft to the point where they develop the confidence and expertise to deliver the most satisfactory (culinary) experience. As their talents expand, the partitioning of their time and energy to perform some of the less demanding, though necessary, tasks in the kitchen become overwhelming. At times, the pressures of high consumer expectations, in-house man-

Successful chefs learn two things quickly; focus on the skills they have trained for and delegate. Producing a memorable and appetizing dining outcome in their restaurant requires enlisting a lot of “behind the scenes” cooperation.

Let us pause here to look at the *Sous-Chef*—top assistant to the master chef and second highest ranking professional in a restaurant kitchen.

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A sous chef is there to directly assist the chef in cooking, planning, and presenting food—essentially, the chef’s second set of hands. Yet that is not their only job. They are also expected to supervise and train all kitchen staff and activities to provide the ultimate customer experience. Sous chefs are even known to take on additional duties and responsibilities when unforeseen issues arise.

Overseeing that nothing goes wrong requires assurance that everyone in the kitchen works as a team. By direction or instinct, staff must pitch in and accomplish those critical, supportive tasks that ultimately make the chef and restaurant successful. And while some chefs prefer to take on some functions themselves, so much efficiency



comes from the sous chefs assigning other kitchen tasks, i.e., washing greens, peeling carrots, and dicing onions. They see to it that someone regulates reser-

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vation numbers, to ensure that the dining area is neither overcrowded nor underserved. Still another task is to make sure the kitchen is clean and efficient, with utensils and dishes readily available. Washing pots and pans and keeping track of supply inventory so there are no unexpected food or equipment shortages. A sous chef’s job is as much about managing people as it is about food prep.

Now, you may be thinking, “what does all this have to do with me?” In a way, medical offices are no different. Podiatrists also need someone to oversee operations on a daily basis so they, too, can focus on their expertise—tending to foot and ankle conditions (and possibly, patient anxiety?)

Well-structured offices also need:

- Someone to manage the schedule to allow appropriate patient flow in and out of the treatment rooms.
- A well-structured front desk with experienced personnel to ensure data organization and customer service.
- Competent clinical staff members familiar with treatment protocols enough to effectively prep rooms and be available to assist in patient care when needed.
- “Runners” who understand that patient traffic needs to keep moving, including the priorities associated with cleaning treatment rooms vs. patient rooming.

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- Someone to take on inventory responsibilities so supplies are readily available.
- A staff who are ALL cross-trained in phone and communication skills so one's absence does not cause a complete breakdown in operations.

Most doctors in general, would love to devote every minute in the office strictly to healing and caring for patients...to do what you love without all the life-sucking management drivel. Unfortunately, avoiding this “drivel” only results in disorganization, inefficiency, and a disappointing lack of productivity. As you pointed out, daily “snags”—although inevitable—should never be part of your growth plan.

It is fundamental management strategies that make the difference between a Michelin Three-Star or James Beard Restaurant and a struggling eatery. They are, in

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fact, an essential element of running a successful practice. And since you admittedly have neither the time, energy, nor inclination to manage every little detail that keeps your practice operational and “moving forward”, someone else needs to take the lead, someone to capably monitor the consistent output of activities.

A physical and emotional break suggests hiring none other than your very own podiatric “sous chef”: an office manager. This person would be responsible for delegating and supervising the many essential non-medical tasks that keep a practice running smoothly so that YOU do not have to.

There are a multitude of necessary tasks. Identify them, then allocate them to the least paid staffer who can best accomplish each one. It is no myth that too many cooks in the kitchen can lead to confusion, unequal workloads, and the dreaded “it's not my job” rhetoric. Having the right number of staff is a strategic judgment call that varies from practice to practice and just maybe, in this case, the “trick” is not adding, it's subtracting.

Typically, a staff to doctor ratio of 10:1 sounds like a lot, but it's hard to say without understanding everyone's unique roles. For starters, doing a brief payroll analysis is recommended (Gross receipts/gross staff payroll—including taxes and benefits). An average go-to number would fall between 22-25%. While some practices work on both the lower and higher ends of this average, it serves as a guideline that can tell a story.

Another method of determining employee output is by (re)assessing your employee's performance and conducting

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individual reviews. In doing so, if you find that one or two do not meet the demands or goals of the practice, even after they have been given several opportunities to improve, discharging

management skills and who would be willing to step into those shoes. Offer him or her the manager position on a temporary basis.

The caveat is that they need to take legit management training courses with the expectation of making it

the necessary workload evenly among staff to ensure that all necessary workstations are covered, and all assigned duties satisfactorily performed.

To sum up, a well-run kitchen is not a single-handed workplace. Neither is your practice. Having someone on board who can inspire your hired team to put forth the vision that you created for your practice is nothing short of a game-changer. Ask any chef. **PM**

Hiring a manager could offer a path to your growth plan.

them to open a more productive office manager position should not be a challenging decision to make.

Hiring a manager could offer a path to your growth plan. The growth should offset the added payroll. You may argue that hiring a manager from the outside is economically implausible right now. If so, take the time to look internally. Your re-assessment may highlight a staffer already in your employ who demonstrates capable

permanent. Yes, proper instruction is that important.

With said suitable training, your new manager may surprise you by stepping up to the task. Taking many of the administrative chores off your plate allows you more time and energy to devote to comprehensive patient care. One of the clearly defined objectives in their job description should outline a review and overall re-definition of staff responsibilities; balancing



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