

ON-BOARDING AN ACQUIRED PRACTICE

By Rennie Ackerman, The Dermatology Group

The trend of single-provider dermatologists joining larger practices has become the norm. Whether it's because a new EMR proves cost prohibitive, or for the increase in insurance benefits, or simply because the provider no longer wants to deal with "office politics" (and why would a busy doctor really want to receive those 5:30am call outs?), we will be seeing this trend continue for a long, long time.

The two basic "practice joiners" are newly minted physicians who are just starting out and want to be part of a larger group; and more established physicians, who may even be approaching-retirement age and who no longer wish to manage the day-to-day business of dermatology. Whatever the cause, the task is to train new recruits into the new group's long established culture. In a larger practice, protocols and consistency is essential to success. With multiple providers and locations, each staff member has to be able to rely on consistent protocols, room set-ups, and even patient interactions. We've all read the recent "Cheesecake Factory" article, <http://nyr.kr/1xTODJ3>, and how uniformity is paramount to their excellence, and how that formula also relates to healthcare.

So the question is – how do you "cheesecake" the formula when dealing with very different personalities and styles, both medically and otherwise?

Obviously there are several steps during any acquisition scenario, including recruitment efforts, legal acquisition components, financial arrangement, and cultural transition. In this article we're going to focus on the cultural elements of a successful dermatologist transition into an existing practice. Creating achievable and consistent goals will unquestionably help "cheesecake" the new providers' consistency and ultimate success at your practice.

1. CREATE AND ENFORCE POLICIES

It stands to reason that before you can expect any newcomers to your practice to adhere to your policies and protocols, that you actually spell out precisely what those policies and protocols are before the newcomers' arrival. Housekeeping items such as dress codes, lateness policies, HR benefits, HIPAA compliance policies should be clearly spelled out in an employee handbook. This step alone will help new recruits understand your culture and clear up a lot of potential confusion as the two cultures merge.

2. TRAIN FIRST

Consider a training period before new recruits are "let loose" with patients. Not only will they observe the clinical protocols that the practice has established, they will observe the behavior and tone of the patient/doctor relationship, and hopefully absorb the attributes of successful transactions. (Of course we hope they don't absorb any less than perfect transactions!) Establish objectives for the training program, as well as a timeframe. Younger recruits are generally very receptive to several weeks of shadowing and training, while more seasoned recruits might be a little more prone to want to continue practicing the way they always have. The first week of training might have the new associate observing the existing derm, and by the last week it's reversed.

3. SUPPORT STAFF

When you acquire a new dermatologist in your practice, you might very well be hiring a few new Medical Assistants to work with them. But, even though the tendency may be to place the new staffers with the new doctor, consider shaking it up a bit by putting the more seasoned MA's with the newer derms. Of course, you might get some backlash from the existing doctors who are very comfortable with

their teams, but explain to them that they are needed to help train the new MA's. Steer clear of putting the new with the new. An experienced MA team can foster the new recruit into your system very nicely.

4. CELEBRATE DIFFERENCES

As much as we all wish that all of our providers were as organized, caring, compassionate and punctual as our very best, the simple truth is that everyone brings different gifts to the table. After all, wouldn't it be dull if all of our providers gave every patient a perfect experience? (Ok, maybe not, but let's focus on reality.) Try to understand the differences so that you can help patients choose the provider who best meets their needs. I know of one particular dermatologist who is an excellent diagnostician but slightly lacking in bedside manner. She might be perfect for someone with a hard-to-diagnose condition, but might not be perfect for a young mother whose toddler has a rash. The key is for management to really understand the strengths and weaknesses of both their new recruits as well as their existing providers.

5. CONSIDER THEIR STAFF

More often than not, alongside the newly acquired dermatologists come their existing staff, who, undoubtedly is "like a family" and whom the provider cannot work without. Your practice may be quite different than this "family" and settling into a new group may in fact be a culture shock for several staffers. Rather than routinely re-hire all staffers of acquisitions, have them go through the interview process as if they're a new hire. That way you can learn about their goals, their flexibility, and help them understand that going forward they're part of a new group. Explain that they may need to be flexible about their hours and locations. You will also need to slowly re-teach them your policies and structure. Chances are that after the initial shock wears off, most of the new staffers will be very happy to be in your practice, especially if you offer additional benefits and amenities. Of course, there might always be a few who don't "cheesecake" over; be wary of those individuals and make the decision about their future with your company before they spread their negativity.

A note about doctors' spouses: several group practices have policies stating that family members cannot be in a reporting situation. If there is a spouse acting as an office manager when you acquire the practice, it makes it very simple to cite your longstanding policy. Of course you can always encourage the spouse to interview with you for another position in the company (and you can guess how often that will happen).

6. MARKET THE NEW

Now that all of the "acquisition ducks" are in a row – policies, training and staffing, it's time to let your new physician loose within your practice. If you are launching a previously single practitioner in his or her original location, do not initially offer this new location and provider to your existing patient base. (You don't need to stop anyone from going, just don't promote it to your patients quite yet.) Like the Hippocratic Oath, your mantra should be "first do no harm" – do everything possible to keep the new providers' existing patients happy, without a huge influx of new patients or schedules. Of course patients will notice the new faces at the front desk; tell them that their doctor is now part of your group, and while you may see a few new faces around the office, the doctor is still giving the same care as he or she has always delivered. After the first year of maintaining the status quo, THEN offer the new location to all of your patients.

Marketing a new recruit into an existing location requires a completely different strategy. Consider extensive online campaigns and print ads in local newspapers as well as a more aggressive strategy of introducing the new provider to as many primary care physicians in the area as possible. You know those invitations to the hospital holiday parties? Send your associate physicians routinely, and with a stack of

business cards. Facebook targeted ads and PPC campaigns have also proven extremely effective at getting the work out.

Good luck with the new derms on board!

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