



# Module 15:

## Staffing And Human Resources



MD Physician Services acknowledges the significant contributions of the author of this resource document, as well as the efforts of the MD Physician Services team.

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## Key Learning Points

- ▶ Assessing your staff requirements
- ▶ The hiring process
- ▶ Interviewing and making a staffing decision
- ▶ Being a conscientious employer
- ▶ Your responsibilities as an employer
- ▶ Terminating an employment contract

## INTRODUCTION

The success or failure of a medical practice more often depends on the quality and performance of the office/clinic staff than on the quality and performance of the physicians. Your staff members are the most expensive—but most important—resource in managing your practice.

According to findings from the Canadian Medical Association's Physician Resource Questionnaire, staff account for approximately 45% of the average physician's overhead costs. This will vary, obviously, among medical specialties, with the physician:staff ratio ranging from as little as 1:0.25 to as high as 1:3 or more. A solo psychiatrist may have only a part-time typist, while procedural specialists, such as radiologists and ophthalmologists, will require both administrative and technical staff.

Even so, some residents believe that human resource issues will be of little interest to them. We have heard statements like the following countless times since we started to offer Practice Management seminars to residents across the country in 1997.

*"I plan to be a physician working on salary and will not be responsible for hiring or managing my staff. Therefore, staffing issues are not a concern of mine."*

*"I am joining a group practice, where my staff will be provided for me."*

*"I have no experience or interest in human resource issues and plan to delegate this to others."*

These are common opinions, but they do not reflect the realities of the medical workplace. During the seminars, we ask residents the following:

*"Who has gone through medical school or residency without ever having a conflict with a nurse, ward clerk or administrative person?"*

Invariably, every participant can readily remember someone they didn't enjoy working with, or whose performance didn't measure up. We then ask them to try the following exercise:

Envisage the person(s) you least enjoyed working with during your training. Now imagine how much you would enjoy working with the same person(s) for the next 10 years.

Does this happen? Absolutely. Many Canadian physicians have called the MD Physician Services Hotline, asking for help in firing employees whose performance has been unsatisfactory for years, but whom the doctors have failed to let go.

Regardless of practice profile, all physicians have a vested interest in human resources issues. This includes having significant influence on the decisions about who is hired to work with us, their job description, how they are evaluated, and whether they should continue in a particular position or be let go.

### Key Message

*All physicians, regardless of their practice environment, have a vested interest in having excellent staff support, and should understand essential human resources issues.*

## EVALUATING YOUR STAFFING REQUIREMENTS

As physicians, we have a vested interest—personal, professional and financial—in surrounding ourselves with skilled staff members who will maximize our time seeing patients and minimize our time doing inappropriate tasks and administration. In an efficient clinic, staff members handle the vast majority of related tasks, enabling the physicians to concentrate on clinical encounters. Not only should the ideal employees be cost effective for the practice, they should have great interpersonal skills, communicate well and create a pleasant environment for everyone.

In analyzing your staffing requirements, it is important to consider several variables:

- ▶ Your specialty-specific requirements (e.g., consultations, procedures and follow-up visits)
- ▶ Patient volume
- ▶ Clinic office hours (for seeing patients)
- ▶ Phone reception hours
- ▶ Phone volume
- ▶ Level of medical technology and diagnostics required in the practice
- ▶ Requirements for trained technicians (e.g., radiology, audiology)
- ▶ Opportunity to delegate clinical procedures
- ▶ Computer and related technology support
- ▶ Practice location
- ▶ Practice style (i.e., some physicians require more/less staff support than others)
- ▶ Need for chaperone for examinations
- ▶ Solo or group practice
- ▶ The practice's requirement for nursing and/or nursing triage
- ▶ Level of staff interaction with patients
- ▶ Level of delegation of administrative and other non-clinical tasks
- ▶ Examination room preparation
- ▶ Patient flow requirements (e.g., reception to exam room to diagnostics, etc.)
- ▶ Administrative support (including the need for a group administrator or manager)
- ▶ Spoken or written language requirements
- ▶ Cultural profile of patient base
- ▶ Layout of clinic space (e.g., a central switchboard receptionist or a triage nurse may be needed in a large office with an atrium)

Frequently, a medical office cannot afford the 'ideal' staffing arrangement because of the manner in which physician and medical services are funded. While employees must be able to multi-task, they should be hired primarily to perform the duties that they are trained and qualified to do. If you don't require nursing expertise, then you should not hire a nurse to do the tasks that a good medical receptionist could do at a lower pay scale. If you do require a nurse, however, consider whether the right person could function as a nurse-receptionist. It may also be practical for technicians to triage patients.

Because the lifeline to most medical practices is the telephone, you need employees who demonstrate efficient and effective phone skills to manage the stress and volume of incoming calls, plus register patients as they arrive. In family practice and general pediatrics offices that offer continuity of care, the phone volume may at times be overwhelming. In a general surgeon's office, on the other hand, telephones may be answered at certain times only, and the surgeon may be in the office only three or four half-days per week.

If you don't use an automated telephone triage system, you may require an extra receptionist. Then consider who brings the patient to the exam room: the physician, the receptionist, another staff member, or perhaps a nurse?

You will also need to consider the work flow in the office. Do you use paper or electronic medical records? Do you have an integrated electronic lab results system? What will your clerical needs be? How many charts are handled daily? Do you write, type or dictate your notes and reports? How many referrals do you make each day? How much lab work do you order, receive and review daily?

The most common staffing requirements include:

- ▶ Receptionist
- ▶ File clerk
- ▶ Procedural technician
- ▶ Nurse
- ▶ Secretary and/or dictation typist
- ▶ Bookkeeper
- ▶ Billing clerk
- ▶ Bill collector
- ▶ Banking coordinator
- ▶ Librarian
- ▶ Patient advisor
- ▶ Office manager (to handle inventory and service providers)
- ▶ Office cleaner and maintenance

There are many issues to consider. Can the equivalent of one full-time employee handle all of these functions if you are in solo practice? Should you consider creating an administrative position to be job-shared? Can you share staff members with group colleagues to minimize costs, especially when you are not in the office? Is your clinic best served by several part-time employees, who are on-site only when their services are required? Can staff generate practice income by doing certain procedures?

While you are still in training, you can learn a lot about what happens behind the scenes in an office or clinic. Talk to the receptionists, clinic managers, technicians and nurses. How were they hired? What are their job descriptions and responsibilities? How are they evaluated? Who do they report to? How much are they paid, and by whom? If possible, obtain copies of job descriptions, office policies and procedural manuals for the staff positions you think you will need in the future.

## HOW TO FIND GOOD, QUALIFIED EMPLOYEES

Word of mouth is still a valuable resource for staffing medical offices, because people in the medical service community know each other and are constantly networking through their professional interactions. Receptionists, secretaries, nurses and other physicians frequently know excellent, qualified individuals who are looking for positions. Hospitals and clinics are also good places to look for medical staff.

Advertising electronically in the professional employment classifieds of a local newspaper will also attract qualified applicants. You may find it useful to contact business schools (e.g., for a medical receptionist) or technical schools (e.g., for radiology technicians). Other staffing resources include placement agencies and federal employment centres operated by Human Resources and Skills Development Canada.

### Key Message

*There are many variables to consider when determining your staffing needs. Learn how other medical practices operate, and do the appropriate research to clarify your staffing requirements.*

## THE HIRING PROCESS

Regardless of where you find your applicants, it is essential to have and to follow a detailed, rigorous hiring process. Your objective is to hire the right employees for the long term, so you need to invest time and effort in finding them. This includes preparing or updating job descriptions, selecting and interviewing candidates, checking references, setting out work objectives and evaluating performance against measurable criteria.

Employment Standards legislation is a provincial responsibility, and most provincial governments maintain excellent websites that describe their regulations in detail, often with interpretative examples. You can also contact your provincial Department of Labour to learn more about human rights legislation, minimum employment terms and your responsibilities as an employer.

Before you advertise, you should prepare or update the following:

- ▶ Detailed job descriptions
- ▶ A statement of office policies and working conditions
- ▶ Telephone interview questions to screen applicants
- ▶ Face-to-face interview questions for selected candidates
- ▶ Questions for future performance evaluations
- ▶ Salary levels or ranges

Be sure to research the market to understand the range of hourly rates you should expect to pay for the position you are advertising. Only when you have clearly established the hiring terms and a protocol to choose the right applicant should you advertise the position.

### Advertising

A working knowledge and comfort level with computers is essential for all staff members who work in a medical environment. Therefore, it is recommended that you use electronic media to advertise. The ability of the applicants to respond electronically helps to ensure that they have some basic computer skills. What electronic media does not offer, on the other hand, is the chance to evaluate the legibility of a prospective staff member's handwriting, but this test can be incorporated later on.

Your advertisement should describe the available position, including whether it is full- or part-time, what specific skills are required, and experience, if required. Request that applicants provide a covering letter along with their résumé, as well as two or three references, at least one of whom was a previous employer or supervisor. You may also indicate that only selected candidates will be contacted. Stating salary within the advertisement is optional; some employers ask applicants to state their salary expectations instead.

Some medical practices serve specific patient populations. Women requesting abortions, specific ethnic groups or patients with AIDS often require sensitive attention, and the practice potentially will conflict with some people's personal opinions or religious beliefs. Outline the patient population when you describe the practice to ensure that you attract appropriate applicants. If you are in a larger urban centre, you should also include a general geographic reference for the location of your practice.

We recommend that you do not give your office phone number, address, fax number or personal email address within the advertisement. The number of applicants can overwhelm your phones, fax lines and email, or applicants may deliver their application in person to try to gain an advantage and request an interview. Your options include using a fax number that is less critical than the one you use in the office, setting up a separate website or email address to receive applications, or arranging for a post office box.

Consider posting the advertisement in hospital and clinic staff rooms, sharing it with colleagues and sending it to other contacts before advertising in the online newspaper. If the local newspaper turns out to be your best option, however, then determine which are the traditional job advertising days (often Wednesdays and Saturdays), when job seekers expect to find a robust section of classified ads. File your advertisement with the newspaper and verify the pre-publication proof that is prepared for you. Ads should be posted on the newspaper's website.

### **Reviewing Applications**

Review all applications and rate them *definite yes*, *possible* or *no*. Then you (and, if applicable, your associates) should select about 10 applicants for a pre-interview telephone call. This enables you to evaluate candidates' rapport on the phone—which is extremely important for any staff member who will be handling the phones. Establish a protocol for these questions, such as:

- ▶ Briefly review their résumé.
- ▶ Ask them why they are interested in this position.
- ▶ Encourage them to ask questions to clarify their understanding about the position.
- ▶ Rate their answers.
- ▶ Rate their comfort, confidence and rapport on the phone.
- ▶ Ask about their salary expectations.
- ▶ Ask when they would be available for an interview.
- ▶ If they are presently employed, ask why they are interested in leaving their present job and whether their employer is aware that they are looking for other employment.
- ▶ Ask when they would be available to start work, if offered the position.

As a matter of courtesy, advise all of the applicants interviewed by telephone that you will get back to them, whether or not they will be offered an interview. Once you have selected between three and five applicants to interview in person, send these candidates a detailed job description and a statement of your office policies to help them prepare for their interview. You should also encourage them to visit your practice website, if you have one. Consider keeping the résumés of applicants to whom you have not offered an interview, in the event that another position becomes available in the future.

### **Interviewing And Making A Staffing Decision**

Dedicating time to interview well is an excellent investment. Failing to hire the right person will cost you and your associates much more time, money and stress than the clinical income lost by setting aside two or three hours for interviews.

Because you want to be fresh for this task, try not to schedule interviews at the end of a busy clinical day, and never interview between patients. It's best to dedicate a full morning or afternoon, and schedule several interviews. Don't overdo it, either—too many interviews scheduled consecutively can prove very tiring and may affect your judgment regarding who might be the best candidate. To ensure that emergencies don't force you and your colleagues to cancel at the last minute, do not interview when you are on call.

You should interview candidates alone if the person to be hired will be dedicated to you. If the employee will be assisting colleagues, however, at least two (but, ideally, all) of the physicians involved should interview together and agree on the most suitable candidate.

Provincial human rights legislation protects individuals against discrimination, so be aware of the kinds of questions you may and may not ask. It is unacceptable to ask about family responsibilities, age, marital status, health, religion, national or ethnic origin, nor can an employer request a photograph of a candidate prior to the interview. Only after you hire a candidate can relevant inquiries be made for payroll requirements.

While most residents have interview experience as job seekers, not everyone has experienced the employer's perspective. Here are some suggestions to help you manage an effective interview.

### **Interview Checklist:**

- ▶ Set an agenda by preparing an interview template. This will ensure that you ask all applicants the same questions, and will cue you to be thorough.
- ▶ Establish rapport by creating a relaxed but professional interview environment.
- ▶ Note and rate first impressions of the candidate's bearing, confidence, attire, etc.
- ▶ Start with a brief overview of the position, and sell the job without embellishment. Be candid about the work required in a typical day, your expectations of staff members, the working environment and the importance of good staff relations and team spirit.
- ▶ Briefly describe the staff and doctors, and explain how the applicant would be expected to work and interact with the office or clinic team.
- ▶ Now ask questions and let the candidate do the talking. Start by reviewing points from the applicant's letter; e.g., experience, education, most recent positions.
- ▶ Referring to a list of all office/medical equipment and systems that your clinic uses, learn about the candidate's skill and familiarity with communication devices, computer systems and medical software. Also assess their experience with all of the office and medical administration procedures they will need to perform. While you may not know how to program the message tree on the phone system, change the toner on your photocopier or free a paper jam on the fax machine, your staff members must attend to technical troubleshooting tasks daily.
- ▶ If transcription skills are required, ask candidates to type a short dictation you have prepared.
- ▶ Ask applicants to write out a short paragraph in longhand. Your writing may be terrible, but your staff members should have legible handwriting. Computers have not yet eliminated the need for handwritten notes and instructions in most medical offices.
- ▶ Ask specific questions to evaluate the prospect's ability to problem-solve and work under pressure. For example, *"Can you describe a time when you had to work independently to reschedule a lot of patients because the doctor was sick? How did you handle the unhappy patients?"*
- ▶ If a candidate hesitates over an answer, always wait at least 30 seconds before commenting or talking. It is better for a candidate to say *"I don't know"* or *"Could you clarify that for me?"* than not respond. You will learn much more if you wait for candidates to speak than if you try to help them answer.
- ▶ Consider asking the candidates to describe their strengths, as well as areas where they feel they could improve. Ask how they would improve their skills (e.g., night courses) and when they plan to do so.

- ▶ Ask if and how they improved procedures or policies at previous places of employment. This encourages applicants to sell themselves.
- ▶ Frame questions to assess how they would handle stressful situations. For example, *“How would you handle a confrontational patient in a packed waiting room who is annoyed about waiting more than an hour to see the doctor?”* or *“What would you say to a patient who is upset about receiving a bill for missing an appointment?”* These types of questions also offer you the opportunity to educate the candidate regarding how you want these type of situations handled, and how you will back them up when they follow your procedures.
- ▶ For a nursing candidate, consider a scenario, such as *“How would you handle parents who refuse to hold their 18-month-child safely for their immunization?”* The desired answer here is that all shots are to be given in a controlled and safe manner; therefore, if the parents don’t comply, then you would instruct the nurse to request safe restraint of the child for their shot from another staff member or, ideally the physician, with documented parental approval.
- ▶ Invite questions about the job description and office policies, to ensure that candidates have reviewed, understand and agree to both. Remember that the applicant is interviewing you too.
- ▶ An important question: *“Will it be difficult for you if we sometimes have to work late?”* This question is framed so that the applicant can inform you if their schedule at day’s end does not allow for flexibility to be late. Remember, you cannot directly ask if they are married or have young children who need to be picked up at a certain time from daycare. However, there will be times when you will be behind and in need of staff support and chaperone duties. If an excellent candidate is not able to stay late, there can often be some means of accommodating them—especially when additional staff members are available who may be interested in staggered office hours.
- ▶ Ask the candidate if you may contact previous employers who have not been used as references. If the answer is *“No”*, ask *“Why not?”*.
- ▶ Rate your comfort level with the applicant.

### **Observe Interview Problems**

Remember that first impressions are important. Red flags include poor eye contact, uncomfortable posture, poor or excessive grooming, no enthusiasm or coming on too strong. Be cautious of the candidate who starts the interview by immediately asking about salary, hours, benefits, holidays and sick leave.

### **Review And Clarify Office Policies**

All short-list candidates must be fully aware of and agree to your office policy statement, which should include:

- ▶ Patient confidentiality and the employee’s obligation to understand and adhere to your strict code of health information protection
- ▶ Regular work hours
- ▶ Fixed salary and overtime pay policies
- ▶ Sick leave policy and prompt reporting of illness
- ▶ Personal conduct
- ▶ Personal appearance and office dress code
- ▶ Employee-patient relationships
- ▶ No-smoking policy
- ▶ Personal calls at work
- ▶ Vacation policies
- ▶ Periodic salary review
- ▶ Performance evaluations
- ▶ Probationary period
- ▶ Training

## **Always Check References**

Before calling references, prepare a phone questionnaire to ensure that you ask the same questions for each candidate and reference called. Examples include:

- ▶ What was the applicant's work attitude?
- ▶ Did the individual show initiative? Ask for an example.
- ▶ How was his/her attendance record?
- ▶ Was this a competent employee?
- ▶ How did the individual interact with the other staff and physicians?  
Ask for examples of good and poor behaviour.
- ▶ Why did the applicant leave the previous employer?
- ▶ Would you hire this person again?

Because many applicants will not have notified present employers that they are planning to leave, they will not offer them as a reference. It is still important, however, to obtain an evaluation from someone the candidate reported to or worked for. You should require applicants to provide a reference from at least one previous employer or supervisor.

Rate each applicant, based on the information provided by the referees. Encourage reference sources to tell you as much as possible, but be non-committal about your own impression of the candidate. Chances are, the applicant will hear an account of the reference call.

It should be noted that employment law has evolved to the point that previous employers are often hesitant to offer any evaluation of previous employees. You may be able to simply get confirmation that the person did work there, and for how long.

## **Making A Decision**

Once all candidates have been interviewed, review the ratings of each candidate with your colleagues and establish a final ranking.

## **Offer Of Employment, Employee Contract And Letter Of Employment Offer**

Verbal agreement and a handshake are not enough when engaging a staff person. A written contract that clearly states the terms and conditions of employment, signed by you and the employee before the first day of work, protects both parties.

Prepare an offer of employment, in which you specify all of the terms of employment: the start date, hours of work, salary, overtime policy, holiday policy, sick leave provisions etc. Clarify the probationary period and your office policy for performance reviews. You should also specify the terms under which employment would end, also known as the termination clause. Include copies of the job description and office policies for signature. Before you present it to the new employee, review the entire package with your lawyer to verify that you have observed all legal obligations.

Telephone the successful candidate, advise him/her of the general terms, and invite a verbal acceptance of your offer. Then advise that you will courier or drop off two copies of the written offer of employment, already signed by you, for signature. One copy is for the new employee, one copy is for you. The offer of employment should be open for a specific number of days, by which time you expect the candidate to return one signed copy to you. This becomes part of your employee contract.

## Key Message

*Invest time and effort to be sure that you hire good employees. Your objective should be to hire the right person for the long term.*

Once the successful candidate has signed and returned his/her written acceptance of the offer, call the other candidates to thank them for their consideration and time. Ask good candidates if you can keep their files for future reference—you may have met some wonderful people who you would consider if another position opens up, or who you would recommend to a colleague. While you should consider the interviews to be confidential, keep all notes and evaluations in the event that an unsuccessful candidate contests your hiring decision.

## EMPLOYER RESPONSIBILITIES AND STAFF MANAGEMENT

### Be A Conscientious And Appreciative Employer

As a good employer, you should encourage ongoing two-way communication with your staff. Because they know more about the details of the daily operation of your practice than you do, encourage employees to improve procedures and provide constructive feedback and suggestions.

Also acknowledge on a regular basis the hard work that employees do. Medical office and clinic staff members are often underpaid relative to their peers, because physicians are hard-pressed to compete with the salary/benefit packages offered by hospitals and institutions. Don't underestimate how much your staff value vocational satisfaction and a pleasant work environment, but reinforce those rewards by expressing your genuine appreciation for their efforts.

A good employer will facilitate employee motivation by addressing five key variables:

- ▶ **Skill variety.** Ensure that the position allows and encourages employees to use multiple skills and talents.
- ▶ **Task identity.** Specify the degree to which a job requires completion of clearly identifiable pieces of work.
- ▶ **Task significance.** Ensure that the employee is aware of the impact and importance that their work and performance have on the work and lives of others—patients, fellow staff members and physicians alike.
- ▶ **Autonomy.** The job should provide freedom, independence and discretionary decision-making for each individual.
- ▶ **Feedback.** Ensure that your employees are motivated by ongoing feedback regarding their job performance.

### Every Day, Thank Your Employees For A Job Well Done

Studies show that, in most service industries, staff are rarely thanked by their supervisors and employers. On the other hand, physicians are frequently thanked by appreciative patients, and this approval contributes significantly to our vocational satisfaction. Do the same for your staff. If they enjoy working with and for you, they will make your life much less stressful—and the office or clinic will run more effectively and efficiently.

### Probationary Period For New Employees

A typical probation period for a new employee is three months, although it can be longer if you wish. New employees should be offered performance evaluations, formal and informal, on a frequent basis—perhaps weekly at first, then monthly. During a three-month probationary period, there should be at least three constructive performance evaluations that offer positive feedback for improvement. Each performance evaluation should address the issues of concern that pertain from the last one. You can also invite the new employee to self-evaluate what has improved and what still needs work, prior to your meeting.

Performance evaluations should be documented and dated. Any concerns raised by the staff member should be documented and addressed as soon as possible.

If repeated performance evaluations reveal that an individual is not meeting expectations, you have two options:

- ▶ Extend the traditional three-month probationary period for one, two or three more months; or,
- ▶ Let the employee go.

Staff dismissal is discussed in detail at the end of this module.

### **Regular Performance Evaluations For Long-Term Staff**

Performance evaluations don't stop at the end of the probation period, and are critically important for staff members who have been with you for awhile. Every employee should have a job appraisal at least once per year. You and your staff should address the performance evaluation in a positive light, not as a meeting to be dreaded. It is a time to step aside from the daily routine, talk about work, give and get constructive feedback, and look at how to make the future even better.

Each performance evaluation should emphasize preferred workplace behaviours and attitudes, and address any issues of concern from the last one. It can be quite instructive to ask your long-time employees to do a self-evaluation of their achievements, strengths and potential areas for improvement, prior to your meeting. Annual performance evaluations should also document any concerns raised by the staff member.

The performance review also presents an opportunity to set work objectives for the coming evaluation period. Perhaps you need the filing system overhauled, or you require staff members to have additional training. If you document this in a job plan, achievement of the objectives becomes part of the evaluation cycle. You should also offer individuals who are weak in certain areas the resources or opportunity to upgrade their skills. Remember that you have a vested interest in helping staff members to improve their skills and performance.

The performance review should have a section where employees can write comments if they wish. It is also advisable to have the employee sign the evaluation. Staff members may find this intimidating, particularly if the performance evaluation is critical, but if you maintain this practice from the outset, your employees should trust that this is a reasonable reflection of your annual "chat", constructive feedback and good intention to nurture a positive working relationship.

Performance reviews are typically a factor in the annual wage review, although many physicians hold them at distinctly different times (e.g., performance reviews in December and wage reviews in February). Because any discussion about money has emotional overtones, separation of the performance and wage reviews permits a more objective discussion between employer and employee. Good appraisals should not lead to unrealistically high wage expectations; nor should negative appraisals lead to bitterness or recrimination.

While remuneration is tied to performance, ideally, wages are reassessed at reasonable intervals, so that employers also can consider changes in employee responsibilities and changing circumstances (e.g., fluctuations in the Consumer Price Index, general wage levels of medical personnel, or the financial success of the organization).

#### **Key Message**

*Performance evaluations are essential for both new employees on probation and long-time staff members.*

## Managing Payroll

Medical residents are very accustomed to receiving a bi-weekly cheque from the hospital. The cheque stub indicates your net take-home pay, tax deducted at source, employment insurance premiums and Canada Pension Plan contributions. Deductions for a benefit plan will also be noted.

As an employer, you will be responsible for paying your staff and managing payroll documentation, but it is probably not worth your time to manage payroll directly. For a reasonable fee, you can delegate the task to one of many payroll and bookkeeping services, including accounting firms and professional bookkeeping services. You should know and understand what you are delegating, however, because you are ultimately responsible—financially and legally—even when you are part of a large group.

The best way to get started is to contact the Canada Revenue Agency (1 800 959-5525) for a payroll kit, and to register to obtain a business number. If you are joining an existing medical group, speak to whomever is responsible for payroll about how it is managed and whether a group practice employer number pertains. As you will be contributing to employee salaries, seek your accountant's advice.

## Employer Responsibilities

Employers are required to do the following:

- ▶ Agree to a payment schedule with staff (traditionally, every two weeks or bi-monthly).
- ▶ Collect employee deductions and remit these, along with your required employer contributions on behalf of staff, to the Canada Revenue Agency on the 15th of each month following the month of withholding:
  - Canada Pension Plan (CPP)
  - Employment Insurance (EI)
  - Provincial and federal income tax
- ▶ Pay employer contributions and remit these to the Canada Revenue Agency on the 15th of each month:
  - Dollar-for-dollar matching of each employee's CPP deduction
  - 1.4 times each employee's EI deduction
- ▶ Collect any employee benefit contributions (dental, health) and corresponding employer contributions, as well as group RRSP withholdings, and submit to the group insurer as required.

Individual provinces may require other statutory employer contributions. Be sure to confirm what is required in your jurisdiction. Your accountant is often an excellent resource.

At the end of the year, the employer must also provide:

- ▶ T4 Supplementary for each employee, summarizing the employee's gross pay and all employee deductions during the year
- ▶ T4 Summary of each employee's gross salaries, deductions and employer contributions

You can prepare these yourself, delegate the task to an office or clinic administrator, or outsource the work to your payroll provider.

In general, employer contributions cost approximately an additional 8% of gross salary. You must budget funds for this additional expense.

### **Case Example: What It Really Costs**

You hire a receptionist and offer to pay a salary of \$30,000 per year (approximately \$15.35 per hour). When employer contributions are calculated, you will actually be paying about \$32,100 per year for that staff member.

### **By The Hour, Or Salary?**

Should you pay your staff by the hour, or by salary? Salary (based on an average hourly wage) is generally advised. Once agreed upon, the bi-weekly pay and payroll calculations will be the same for the entire year. If you pay your staff by the actual hours they work each week, you will need to do payroll calculations every pay period. This is not only tedious, but is also more expensive in terms of bookkeeping. Furthermore, employees appreciate a guaranteed bi-weekly salary.

The signed offer of employment contract should state how employees will be compensated for overtime that you have requested; options include paying for overtime or offering equal amounts of time off. If staff members are routinely obliged to work more than the agreed numbers of hours per week, then it is advisable to adjust their bi-weekly pay to reflect the additional hours worked.

### **Employee Benefits**

Common full-time employee benefits include:

- ▶ Medical, dental and prescription drug plans
- ▶ Short-term sick leave
- ▶ Long-term disability leave
- ▶ RRSP contribution or pension plans

You are not obliged to offer benefits to your employees. There are benefit packages that physicians can purchase, but most are expensive. You and your accountant should review the pros and cons of buying coverage for yourself, as well as offering benefits to employees. Before you choose a plan, check to see what programs are available through your provincial medical association, as they may be more cost effective than those available privately.

Benefits, including sick leave and vacation, are not generally extended to employees during the probationary period. When drafting an employment contract for a new employee, state when he/she will be eligible for benefits (e.g., *Commencing three months from your start date you will be eligible to participate in the benefit package available to current, full-time employees.*) and clarify your policy about absenteeism during the probationary period (e.g., *Any absenteeism that occurs in the first three months of employment is without pay.*).

### **Vacations And Statutory Holidays**

Physicians are obliged, in most provinces and territories, to offer employees two weeks of paid vacation per year, or 4% of gross salary in lieu of time off, and in some provinces, this percentage increases after five years' employment. Employees must also be given statutory holidays off work with pay.

After a staff person has worked with you for some time, it is appropriate to give them more vacation days, in compliance with provincial regulations for paid holidays based on years of service. It is recommended, however, that physician clinics set a policy regarding the maximum vacation time that an employee may earn over their years of employment.

### **Key Message**

*If you need to terminate an employment contract, have your lawyer review your documentation and the severance arrangement you have planned, to ensure that you are protected and that you are being reasonable with your severance award.*

### **Maternity Leave**

It is important for physicians to acquaint themselves with provincial regulations regarding maternity and parental leave, because the combination can extend up to a year and the law requires you to keep the position available for the returning employee. In most cases, the physician employer hires temporary staff until the employee returns from maternity leave. The employee on maternity leave will receive Employment Insurance benefits from the federal government. Physician employers are not obliged to pay additional maternity benefits, unless this is part of an additional benefit package that has been offered to all employees.

### **Absence Due To Illness Or Sick Leave**

We recommend that you, as an employer, offer paid sick leave to your full-time employees, even though you are not obliged to do so. You should clarify your policy right from the start, however, to avoid any criticism or challenge. A formal policy is equitable to all employees and gives the physician something to fall back on, particularly in the case of excessive absence.

It is common to grant full-time employees sick leave credits with pay on the basis of, for example, one half-day per month, cumulative to a maximum of 10 days. Employees would be paid from the first day of illness in accordance with the following terms:

- ▶ Sick leave with pay is granted only due to illness, and employees may be requested to provide a certificate from their family physician.
- ▶ No sick leave benefits will be provided to an employee during the period she is entitled to maternity leave.
- ▶ All sick leave credits will be cancelled upon termination of employment.
- ▶ Sick leave credits are not subject to any payout provision.

Having employees who job-share gives you some assurance that experienced part-time workers are available to cover for employees who are ill.

### **Workplace Injury And Workers' Compensation**

Depending on the size of your clinic/practice and the services offered, you may be required to provide workplace injury coverage from your provincial Workers' Compensation Board. It is not expensive, is a valuable benefit for staff, and reduces the physician's personal liability if employees are injured at work. In the common case of repetitive strain injury, for example, your staff would be eligible for physiotherapy that will help them to continue work. Absent staff may easily cost you more than the WCB premiums, which are based on an employee's salary and paid once per year. Contact your provincial Workers' Compensation Board for details.

### **Letting Staff Go**

Your primary objective is to hire staff for the long term. Frequent changes in staff cost time and money, in addition to being very stressful for you and other staff members. Things don't always work out, however, and it is more important to have an efficient, pleasant medical practice than to put up with an untenable situation. If you need to dismiss an individual, analyze what went wrong, so you can avoid repeating the situation.

Contact your lawyer in advance of giving any employee notice, to verify that you have met all of the criteria for terminating the contract.

## SUMMARY

Great staff members are essential if you want to provide your patients with effective and efficient care. Taking time to establish and implement good hiring procedures will pay dividends. The more duties you can delegate to trusted staff, the more you can focus on patient care—a win-win scenario. Never forget that your staff work very hard: not only do they triage patients for you, they also handle the vast majority of patient concerns and complaints. Let them know how much you appreciate their hard work and commitment. Thank them every day.

## ACTION PLAN

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- ▶ **When hiring staff, dedicate time to do it right.**
- ▶ **Develop a standardized interview protocol.**
- ▶ **Draw up a comprehensive contract for every employee.**
- ▶ **Conduct regular performance evaluations.**
- ▶ **Consult your lawyer before terminating any employment contract.**
- ▶ **Never hesitate to thank staff for a job well done.**
- ▶ **Be a good employer.**

## RESOURCES

- ▶ **Employment standards legislation in your province**
  - Most provincial labour departments post comprehensive online information about employment standards.
- ▶ **Workers' Compensation Board in your province**
  - Contact your provincial WCB regarding workplace injury coverage for your practice.

## APPENDIX 1: GENERIC FAMILY PRACTICE STAFFING PLAN AND JOB DESCRIPTIONS

### **Practice Staffing Objective:**

Hire staff who work well together, are capable and happy to cover for each other, and who are committed to the effective and efficient operation of our practice.

We, as physicians, appreciate that our staff members work very hard. We will continually strive to treat all of our staff with respect, appreciation and consideration. To this end, regular staff meetings and performance evaluations will be booked. Constructive feedback from staff will be welcomed.

### **Staffing Requirements:**

Reception/administration/office management/nursing/dictation/filing

### **Primary Receptionist**

The receptionist manages the reception area. Due to the volume of calls and patients seen in the office, the receptionist must ensure that s/he, or the administrative staff, are always available to receive patients and receive incoming calls. When the receptionist requires assistance of the nurse or physician, s/he is to page them. If they do not answer, then the administrative staff is to assist to relay the message. The receptionist is to ask the admin staff or nurse to cover for her when away from the reception area.

### **Primary Duties**

- ▶ Opens office
  - Reviews phone messages
  - Daily open and closing of active phone lines
  - Starts up and shuts down computer systems
  - Unlocks waiting room and verifies that it is presentable in a.m., and locks waiting room door at end of patient-hour days
  - Opens and triages all new mail
- ▶ Handles and triages all incoming calls to appropriate personnel (physician or staff)
  - Appointments
  - Pharmacy requests—pulls chart and clarifies with specific physician
  - Patient callbacks—responds or triages to nurse or admin
  - Diagnostic callbacks—offers appointment for education or triage to nurse
  - Consultant office callbacks—triage to admin or nurse
  - Calls triaged to nurse or doctor
  - Responsible for making sure that all logged phone calls are addressed and tasks are completed by end of day
- ▶ Handles and triages all daily faxes
- ▶ Receives all incoming patients to reception
  - Verifies and updates MOH (Ministry of Health) and patient information
  - Verifies that charts are prepared and placed in appointment in-basket of appropriate doctor
- ▶ Handles all outgoing patient tasks
  - Makes follow-up appointments
  - Addresses any outgoing patient inquiries
  - Handles all non-insured billings/receipts and discharges all patients at reception desk
- ▶ Billing

- Prepares and updates daysheets
  - Submits completed daysheets to MOH
  - Reconciles all non-insured billings
  - Keeps cash books updated
  - Cues the senior administrative assistants monthly regarding outstanding debts
  - Responsible for ensuring that the cash drawer is locked and secure
  - Responsible for documenting and transferring cash to each physician at the end of each work week that exceeds the \$30 float per physician for change
- ▶ IT and communications system responsibilities
    - Oversees operation of the fax machine and photocopier
    - Oversees operation of the debit machine
    - Oversees operation of the phone system
    - Responsible for keeping the procedure manual re: operation of all of these systems, updated and filed in a common/dedicated area, available to all staff

### **Senior Administrative Position**

Note:

- ▶ Two staff members will work full-time in this role.
- ▶ Each will have full knowledge of all of the reception and administrative tasks required to support all of the administrative team.
- ▶ Each of the two senior administrative staff members will be assigned primary responsibility for a subset of higher-level administrative tasks.
- ▶ Both of these staff members will spend 50% of their time supporting the reception at the front desk and 50% of their time at the senior admin desk.

### **Primary Responsibilities:**

This staffing position is intended to complement and bridge reception and nursing areas and functions in the office. Additional management duties will, ideally, be assigned based on skill set and experience. The skill set required for this position includes full capabilities as the receptionist, as well as management skills. Initiative, problem-solving and leadership skills are essential.

Key duties are summarized as follows:

- ▶ Addresses staffing in-basket
  - Consultation and diagnostic bookings
  - Patient callbacks that do not require nursing
  - Delegate to nursing callbacks when medical knowledge is indicated
  - Doctor-requested chart pulls
- ▶ Manages all in-office patient flow after patients have been registered by the receptionist
  - Monitor individual baskets of files of patients waiting to be seen
  - Assist doctors whenever possible to bring next patient in
  - Prepare room for next patient whenever possible
  - Prepare patient for visit whenever possible
  - Cue and assist doctors and nurses for patient prep
    - Adult check-ups, weight and height
    - Prenatal visits, weight, and place Doppler in room
    - Well-baby visits—advise parents to undress baby to dry diaper (See procedures for patient preparation.)
- ▶ Liases between reception and nursing area

- ▶ Office management duties
  - This administrative position will eventually include office accounting, bill payment, billing reconciliation, office inventory management; potentially, banking duties and other administrative duties that would fall under the duties of an office manager
  - Scheduling and prep of agendas for regular staff meetings
- ▶ Reception back-up
  - The admin/manager is to be capable of doing all of the tasks of the receptionist
  - Back-up reception when phone lines are busy or receptionist is indisposed
  - Assist reception to receive patients when reception area is busy
  - Be able to perform all reception tasks and duties
    - Holiday and illness coverage
    - Weekly switch day, where receptionist and admin assumes the other's role
      - Objective: to provide variety, avoid burnout, guarantee cross-coverage
- ▶ IT responsibilities
  - Responsible for trouble-shooting any problems with the computer system, and communicate with software support resources; keep a log of all calls/contact names and the reasons for contact, as well as advice given
- ▶ Responsible for keeping the procedure manual re: the operation of all of these systems, updated and filed in a common/dedicated area, available to all staff

### ***Clerical/Reception/Administrative Assistant***

#### ***Primary Responsibilities:***

This staffing position is intended to complement the two other administrative positions. This staff person will take primary responsibility for all medical record management and assist the receptionist with management of all incoming phone calls, as well as patient reception. In fact, this staff person will be our medical record manager and co-receptionist.

Duties will include:

- ▶ Medical record procedures
  - Responsible for pulling and preparing all charts for appointments, based on reason for visit
  - Prepares appropriate forms/lab requisitions for the visit (biopsy, Pap requisitions and labels, etc.)
  - Charts to be pulled three days in advance of appointment
  - Pulls and prepares same-day visit charts
  - Doctor-requested charts pulled for review
- ▶ Filing
  - Opening all daily lab, consults, etc., as received
  - Proactive chart pull for abnormal results, as per physician guidelines
  - Place all incoming lab reports, etc., in doctors' in-baskets
  - File all initialled lab reports, etc., that do not require secondary action

This staff person is expected to become proficient in all of the duties listed under the primary receptionist section above. This staff person is also expected to assist the administrative management staff person in any way possible. Therefore, familiarity with the skills and proficiencies listed in the appropriate section above is expected.

### **Nursing Position**

Two job-sharing nurses will work out of the nursing station in the office. The traditional skills of a comprehensive family practice nurse/receptionist are essential. The nurses are to be able to back up the receptionist and admin staff for their essential duties, including making appointments, debit machine use, fax and phone use, etc.

The nurse will be primarily located in the nurses' area and responsible for overseeing this area, as well as the outfitting and upkeep and re-stocking of the examination rooms.

The primary duties of this position are as follows:

- ▶ Nursing procedures:
  - All immunizations: adult and child/infant
  - All allergy shots and IM shots
  - TB testing
  - Glucometer use and patient education
  - Urinalysis for UTI, prenatal and pregnancy tests
  - Suture removal
  - Ear syringing
  - Dressing and packing (abscess) changes
  - Potential N2 Rx of warts
  - Well-baby prep for weight, height, HC exams
  - PFT testing, using a spirometer
  - Prenatal visit: BP, measurements of weight, FHR, SF height (training will be done)
  - Assist the physician whenever requested, or chaperone exams when requested
  
- ▶ Patient flow
  - Assist the physicians and admin staff in preparing patients for examinations when clinical prep is required
  - Review the appointment books of each doctor in advance to assist in effective patient flow during the workday
  
- ▶ Nursing phone responsibilities
  - Phone triage upon request of patient whose chief complaint is vague, or to assess urgency of visit
  - Phone management of patient requests for nursing advice (note this is not encouraged as a rule; patients are to be offered a visit first)
  - Patient callbacks regarding abnormal tests, as directed by physician
  
- ▶ Nursing area management
  - Responsible for monitoring vaccines and injectables, as per MOH and local health department guidelines
  - Review and read, along with physicians, all health department bulletins, to advise docs and staff of any guideline updates
  - Staff and patient protection re: instruments and needles
  - Temperature monitoring and documentation of refrigerator and contents
  - Responsible for upkeep of N2
  - Instrument cleaning and autoclave
    - Ensure that speculums and surgical instruments are placed in exam room soak buckets daily
    - Daily change and cleaning of instrument soak buckets

- Monitoring and upkeep of wet trays in procedure rooms, autoclave and all wet soak instruments, monthly, even if not used
- Clean and dirty laundry management
- Inventory of all medical supplies (provided by labs, MOH or purchased by office)
- ▶ Examination rooms
  - Restocking, inventory for all exam and procedure rooms
  - Assist physicians in keeping exam rooms safe and clean
  - Reception/Admin duties
    - Nursing staff must learn how to manage all of the communication systems, so that they can cross-cover reception staff when needed
    - A working knowledge of all office IT and communication systems is essential

### ***Medical Transcriptionist***

A part-time medical transcriptionist position is required.

Primary duties include:

- ▶ Typing daily progress notes, with a maximum turnaround time of two working days
- ▶ File completed charts that do not require additional physician attention, such as:
  - Consults to be signed
  - Medical reports to be signed and reviewed
- ▶ Transcription is to be done on-site
- ▶ Additional filing duties may be assigned

## APPENDIX 2: GENERIC NURSING STAFF INTERVIEW TEMPLATE

### SAMPLE INTERVIEW QUESTIONS FOR JOB-SHARING NURSING POSITIONS

Ensure that the candidate has received a job description and a list of office policies prior to interview.

#### General Introduction To Interview

##### *Introductions*

- ▶ We have reviewed your CV. Is there anything you would like to add to it?
- ▶ Clarify any questions from CV.
- ▶ May we call your references? (Get phone numbers.)
- ▶ Do you have any questions from the job description or office policies we have provided?
- ▶ Could you tell us about yourself and your professional experience to date?
- ▶ Have you worked in a family practice office before?
- ▶ If not, what exposure to family medicine and pediatrics did you have during your training?
- ▶ Why do you want to work in a physician's office?

#### Evaluation Of Experience And Office-Based Skills

##### *Nursing Procedures*

- ▶ Chem strips
- ▶ IM, SC and SD injections and immunization protocols
- ▶ Are you experienced and comfortable with giving injections to babies and children?
- ▶ Allergy injections and protocols
- ▶ TB testing
- ▶ Infection/sterile procedures/protocols for instruments/speculums, etc.
- ▶ Using an autoclave
- ▶ Ear syringing
- ▶ Liquid N2 treatment for warts
- ▶ Changing packing for small abscess care
- ▶ Spirometry

##### *Nursing Phone Management*

- ▶ Do you have experience in triaging phone calls from patients, to decide if they should be seen as a same-day patient?
- ▶ Do you have experience with dealing with pediatric problems: fever, rashes, feeding problems?
- ▶ Do you have experience in making callbacks to patients, to give them abnormal lab reports and to offer them a follow-up visit?

##### *Office It And Communications Systems*

- ▶ Computer billing and software, and patient registration
- ▶ If so, what systems?
- ▶ Word processing and typing speed
- ▶ Use of fax machine, photocopier
- ▶ Phone system with intercom
- ▶ Debit machine

### **Experience With Confrontational Patients**

1. You take a call from a patient who is very upset that they have received a bill for missing their pre-booked checkup. They become verbally abusive on the phone. How would you handle this?
2. A patient arrives 10 minutes before their appointment and now has been waiting for 40 minutes in the waiting room. The doctor sees three other patients who arrived after they did, but have been shown in for their appointments. The patient gets angry and demands to be seen now. The patient becomes agitated and noisy in the waiting room and verbally abusive to you and the receptionist. What would you do?
3. A parent will not hold their screaming child appropriately for you to give a shot. Another parent persists in trying to negotiate with their crying 2-year-old so you can give the shot. We are behind, the child is screaming. What should you do?

### **Initiative And Leadership**

- ▶ Can you tell us about the tasks that you disliked most in your previous job?
- ▶ What did you like most about your present or previous job?
- ▶ Did you improve any procedures in your last job?

### **General Questions**

- ▶ What was your last employer like?
- ▶ What was the pace of the day and patient load in your previous workplace?
- ▶ May we ask why you are looking for a new job?
- ▶ Can you work under pressure? (Our day is unpredictable.)
- ▶ Can you remember names and faces?
- ▶ Can you multi-task? Please explain.
- ▶ Will it be difficult for you if we need to run late/overtime?
- ▶ May we ask, where do you see yourself professionally in three years?