

In This Issue

Grading and Evaluating Employees

The Golden Triangle - Patient - Payer - Provider

Scaling Up a Surgical Practice

Healthcare's Next Killer App

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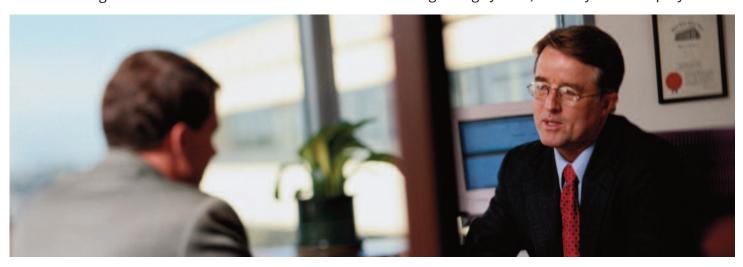
Grading and Evaluating Employees

New Ideas on an Old Practice

Most companies evaluate employees but more often than not they don't actually grade them. Giving employees a grade to go along with an evaluation is a new concept that can be beneficial in the long-run. With that being said, how can you go about structuring a grading system that is both fair and advantageous? evaluating system in place and now would be a perfect time to

implement one. Executing an evaluation system will take time and effort, but it is worth it especially if you want to retain employees.

Employers are apprehensive of confrontation which is why a lot of evaluation tactics do not always work. With a grading system, not only is the employee



First and foremost, consider your options. You might have to use a multi-level approach for your evaluating system. Ask yourself: What type of evaluating system do you have in place now, and is there room for improvements? In some cases there might be no

being evaluating but they are being shown using a scale if their performance is up to par. But what does that look like?

Creating an evaluation system must start with setting guidelines; the people that are doing the evaluation must know how to give balanced feedback. Giving balanced feedback means that you're not ignoring deficiencies and only focus on strengths. Understanding weaknesses is underrated. If you are able to listen to what is not working and take ownership of those deficiencies, that is actually more helpful and empowering than only focusing on strengths.

Using evaluations is beneficial to both new graduates and seasoned employees because there are always ways to improve performance.

Healthcare rapidly changes and what employees are graded and evaluated on will change too. You may implement a new EMR system or add ancillaries to your practice; because of this your evaluations must be able to reflect changes in your practice.

Findings

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SpineSearch LLC 55 Cherry Lane Suite 101 Carle Place, New York 11514 Phone: 516-333-5050 You may also want to take into consideration how well employees adapt to changes. There might be one physician, nurse, medical assistant etc. who can't or won't adhere to changes and this could potentially affect the rest of the practice.



Be proactive and take note of which employees adjust well to changes and which employees do not. Adaptability should be a focal point on your evaluations, because adaptable employees are successful employees.

Assigning a grade during an evaluation should be done on a scale; instead of giving a letter grade, it might be better to do a number range from 1-5, where 1 is underperforming and 5 is exceeding expectations.

Employees that exceed expectations are the ones that deserve raises and promotions.

In situations where an employee is terminated having clear documentation will help you. Look at it as you're protecting your business from wrongful termination lawsuits and hostile employees.



After you have evaluated and graded employees consider how you can use the information for the betterment of your employees and your business. How can you motivate employees more?

When you have the evaluation and grade in front of you, you can tailor the work environment to fit those employees' needs. A Physician's Assistant will obviously have different needs and motivations than a receptionist, so it is important to make adjustments that are suited for each person. If you're making the work environment a pleasant one employees will have a positive moral that will trickle down to your patients.

Grading and evaluating employees will build a strong dynamic between employees and employers. Not only will you be able to see improvements but employees can use their grades to track their performance and progression.





The Golden Triangle

In today's healthcare system the relationship between patient, payer and provider is one that needs to be in alignment. How do payers and providers work and interact with each other? How has the relationship changed? What can you do to maintain balance in your practice? If you are unsure then you are not alone.

Provider
Treatment
Clinical
Planning

Patient
Informed
Decisions
Reponsibility
Care

Payer
Transparency
Collaboration

Previously, patients went to a healthcare provider to be treated; today, people use other means or technology and research to treat their ailments. Whether patients are using the internet, Apps or books to make their own decisions about their healthcare, the information is readily available making the patient all three stakeholders at once. This is vastly different from how the patient consumed healthcare in the past. There was a divide between patients and providers that made the provider more influential in decisions made by the patient. Now, the patient has more control, options and literature to make informed decisions. More patients have access to care and these patients will also have choices regarding which provider they would like to see (depending on insurance acceptance). Technology can easily link a

The relationship between patient, payer and provider is one that needs to be in alignment.

physician to a patient more easily than ever before. EMR systems as well as patient portals make communication and payment a smooth process.

Payer-Provider Transparency

Payers have embraced the idea that patients who are engaged in their care are ultimately healthier than those who are not. In recent years, insurers have worked to boost patient engagement by creating incentive programs, social media campaigns and targeted education that encourages healthier lifestyles, regular wellness visits and chronic disease management. The underlying goal is to educate beneficiaries on the critical role they play in preserving their own health.Payers and providers need a plan for ensuring transparency. How providers and others are performing against targeted measures must be made available to many stakeholders. This availability helps ensure that targets are hit consistently and that everyone gets paid appropriately.

Clinical Improvement

Once payers and providers have combined data they can visualize trends in the data and jointly establish informed objectives for their population. Providers and payers will benefit most by targeting areas with high variation and those that can be improved by evidence based practices.

A sophisticated platform delivers tools to help organizations identify these areas with the greatest potential for cost and quality improvement.

Understanding the relationship between patient, payer and provider means being able to acknowledge the evolution of patient's involvement in healthcare; many of these areas will require a multi-year approach to attain the level of improvement needed, but starting now is important.

Events





Team Spine Foundation at the Chicago Marathon Building Quality of Life Chicago, Illinois







October 14-17 North American Spine Society McCormick Place West Chicago, Illinois



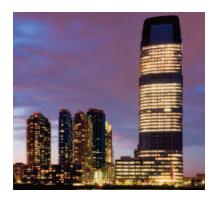


October 24

Booth 1190

New York State PeriAnesthesia Nurses Association Crowne Plaza White Plains, New York





Nov 5 - 8 NY NJSIPP

Pain Medicine Symposium Hyatt Regency on the Hudson Jersey City, NJ







To arrange a meeting with the SpineSearch team at any of the above events. Call Us:

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Scaling up a Surgical Practice

Adding more doctors to your practice might be a smart move for smaller practices. Yes, the added cost can be expensive but for most doctors it is well worth it. Smaller practices have struggled more and more recently. It is harder to keep doctors in smaller practices when the payoffs are not as big but the responsibilities are greater. You might be stuck deciding what path to take to grow your practice; here are four ways to scale up:

1) Satellite Offices

Scaling up the practices can occur a few different ways. One way would be opening satellite offices as a means to create more revenue and patient volume. Making the practice more accessible to patients will help you build up your new patient demographic you wouldn't have seen otherwise, as well as utilizing more doctors.

Life at a larger practice is more varied. In a big practice, physicians might spend time pursuing special interests or research. Options for part-time work are made more available at a larger practice where responsibilities aren't piled on between one or two physicians. The larger practice setting can also provide economic benefits for the physician.

2) Updating Technology

Utilizing EMR systems and updating software regularly will help with patient flow and wait times. The more organized the practice is, especially a larger office, the more patients can be seen.

Implementing new technology can be stressful but if you are dedicated to growing the practice you and your staff must be able to adapt. Practices that are most successful are the most adaptable to change.

3) Adding Ancillary Services

Are you commonly outsourcing an ancillary service that fits with your current and potential patient population? Integrating services needed by your inbound and out-

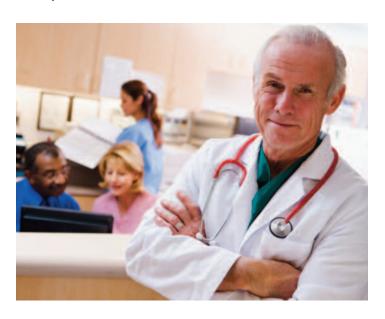


bound referrals provides you with a patient-centered continuum of care with the goal of improving continuity of care, compliance and outcomes.

4) Broaden the Types of Specialists in the Practice

Thinking outside the box will help the practice achieve success. Giving patients the option of alternative treatment plans is becoming more popular as patients have greater access to knowledge about treatment options from online resources.

Whatever route you choose to scale up your practice, remember it is important to know that these changes take time. Whether you plan to add more physician, satellite offices or ancillary services each step to grow the practice will ultimately make your practice stronger and more profitable for the future.



Healthcare's Next Killer App

The abundance of health information at patients' fingertips will only increase as patients become more involved in their treatment plans.

Medical practices have adopted more technology throughout the years and currently more practices have been adopting Electronic Health Records systems (EHR). However, patients have been using technology to track their health, while health care providers have been using it to keep track of their patients; Medical Apps are growing steadily. Patients can track their own health and wellness, while doctors can view a patient's x-rays on their mobile device.



One major concern is privacy. The FDA has made efforts to regulate mobile apps by overseeing the safety and effectiveness and they ask for feedback from health care providers, but is this enough? More than 50 percent of doctors use a smartphone for work purposes.



A doctor in a hospital or medical practice can use their phone to receive pages or to access EMR/EHR systems. Since the use of EHR/EMR systems is on the rise medical practices will need to make adjustments to accommodate the new technology.

Maintaining patient privacy needs to be the number one priority. In order for medical apps to be effective both patients and doctors need to become mindful of pros and cons.

Doctors, Nurse Practitioners and Physician Assistants should make patients aware that although some medical apps can help them stay on track with diet and health, they should only be supplementary to care they receive from a doctor.

Give hospital professionals - marketers, clinicians, administrators - the power to prototype, test, and launch their own apps without having to go to developers.

App requirements can get "lost in translation", and the end result may not meet expectations. A solution: multiple, targeted, branded apps created by actual hospital stakeholders. These people know best what their patients need in a mobile app.





SpineSearch Sightings



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