Practice Trends



MANAGING YOUR DERMATOLOGY PRACTICE

Hiring Guidelines

I've often mentioned that poor and marginal employees are the single biggest efficiency killer in most medical prac-

tices. And it's far from a rare problem.

I get a lot of questions about poor employee performance—what constitutes it, how to deal with it, the steps one can take to minimize it. Very often, the best remedy is to prevent it entirely by hiring top-flight employees to begin with.

Good hiring techniques are yet another in a long line of basic business skills never taught to the vast majority of physicians.

Martin Yate, in "Hiring the Best" (Avon, Mass.: Adams Media Corp., 1997), lists the common mistakes that often result in a "bad hire."

They include poor analysis of job functions, resulting in a cloudy vision of what the job entails and an incomplete (or

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nonexistent) written job description; inadequate initial screening of prospective employees; inadequate assessment of the prospective employee's personality, resulting in poor matching of employee with job skills; poor in-

terviewing technique; superficial (or nonexistent) checking of references; and overselling of expectations regarding financial compensation and potential career advancement.

Therefore, Mr. Yate recommends, when a job vacancy occurs in your office, first reevaluate your written job description for that position. Does it meet your office's needs? Does it describe, accurately and in detail, exactly what you expect from the employee you will hire to perform that job? If not, revise it before you do anything else.

A good job description lists the major responsibilities of the position, with the relative importance of each duty and the critical knowledge, skills, and education level that are necessary to perform each function.

Once you have clearly defined the position you have available, take the time to find the best possible match for it. My longtime friend Jim Del Rosso, M.D., speaking at a practice management meeting last month, outlined the most important considerations (and the most common mistakes to avoid): Know what you are looking for, *carefully* screen your candidates, and avoid lowering your expectations—resist the temptation to settle for a marginal candidate or to hire someone you vaguely "like" and then try to mold the job to that person.

As Jim pointed out, the natural tendency is to "wing it"—to hire the candidate you have the "best feeling" about. Don't!

As every physician knows, hunches are no substitute for hard data. Know your job description and hiring criteria, carefully review resumes, check references, and conduct thorough but efficient interviews.

Be alert for resume red flags: significant time gaps between jobs; positions at companies no longer in business, or otherwise impossible to verify; job titles that don't make sense, given the applicant's history and qualifications.

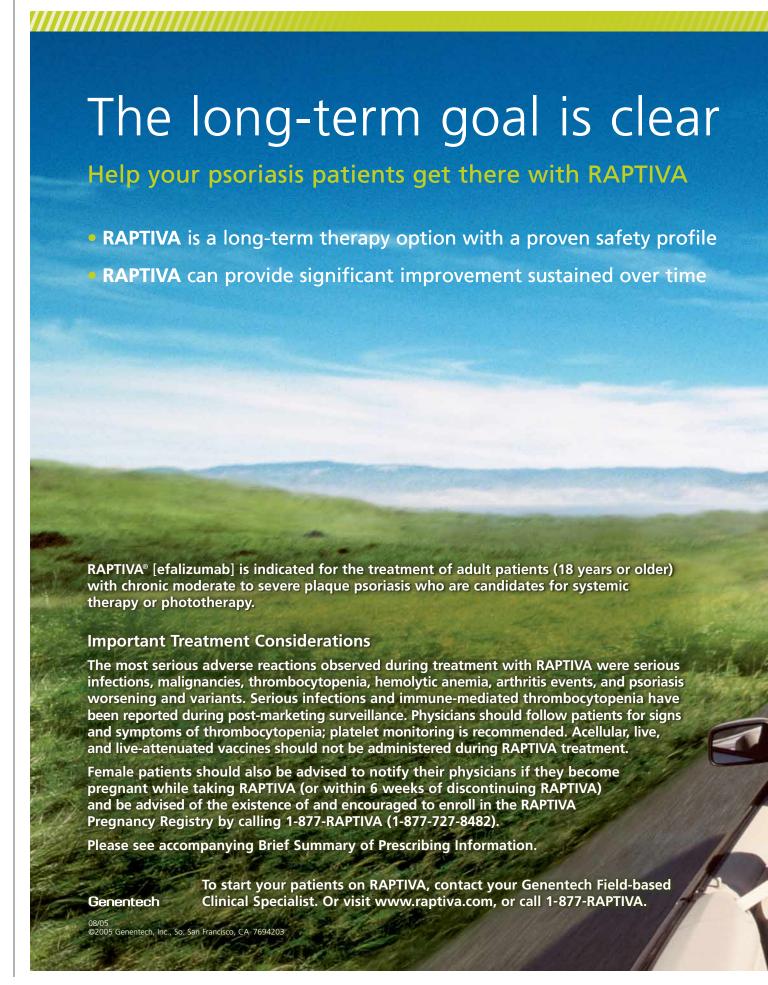
Background checks are a dicey subject, but publicly available information can be found easily on Web sites such as knowx.com. (As always, I have no financial interest in any enterprise discussed in this column.)

Make sure applicants know you will be

verifying facts in their resumes, and get their consent to do so.

Too many physicians skip the essential step of calling references. You'd be amazed what some old bosses *really* think of employees they write of so glowingly in their letters of recommendation.

Interviews often get short shrift as well. As Jim Del Rosso said, "The importance of quality interviewing cannot be overemphasized."



"There is no such thing as a casual interview," he added. "But it should be relaxed."

Most of us tend to talk too much during an interview, when it is the candidate who should be talking. Jim suggests the "2-to-1 rule": Listen twice as much as you talk. "Didn't your mother tell you," he asked, "why we have two ears and only one mouth?"

Important interview topics include educational background, skills, relevant experience and training, and unrelated job history.

By law, some questions are forbidden during an employment interview. You

cannot ask an applicant's age or date of birth. You cannot ask about gender, creed, color, religion, or national origin.

The subject of disabilities is a no-no, as is marital status, date or type of military discharge, number of children (or who cares for them), addiction history, citizenship, arrest record, psychiatric history, past absenteeism due to illness, or whether workmen's compensation has ever been collected.

There are, however, acceptable alternatives to some of these questions. You can't ask about marriage or maiden names, for example, but you can ask if an applicant has ever gone by another name

for your background review. Instead of asking about citizenship, ask if applicants are legally authorized to work in the United States.

You can't ask if someone is disabled, but it is permissible to ask if he or she will be physically able to perform the job's essential functions. Past addictions are off-limits, but you do have a right to know about *current* addictions to illegal drugs.

Once you have made your decision, Jim Del Rosso says, practice fairness, not favoritism. Be objective, fair, and consistent.

Reward achievers and challenge slack-

ers, but once you have made performance expectations clear, sit back and allow everyone an equal opportunity to succeed

"The best executive," Theodore Roosevelt once wrote, "is the one who has sense enough to pick good people to do what he [or she] wants done, and self-restraint enough to keep from meddling with them while they do it."

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