

Start the Year Fresh: Miss the Mess

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Urgent care operators pride themselves on providing high quality medical care and an outstanding patient experience, delivered by skilled team members exhibiting the highest levels of professionalism, in a culture of trust and mutual respect. But despite an operator's best intentions, lurking beneath the surface of tight-knit people-driven environments like urgent care centers can sometimes be an axis of "workplace evils" that can completely undermine a center's success if left unchecked. As we head into the New Year, now is the perfect time to "clean house" by purging your center of these destructive influences.

What Are The Three "Workplace Evils?"

Urgent care centers provide services that are delivered "for people, by people" and the work is often done behind closed doors. Very often urgent care centers are small- to mid-sized physician-owned and operated businesses that do not have the knowledge base of a large human resources department to guide them. As a result, owner/operators often think that they have created a "Southwest Airlines-type" culture even as management is being undermined by conflict of varying degrees.

The three workplace "evils" that often manifest in urgent care environments are malicious gossip, workplace bullying, and sexual harassment:

- **Malicious Gossip:** Gossip may appear to be harmless chatter or a form of stress relief but it can have devastating consequences for its victims. Malicious gossip is a weapon that creates or advances conflict as perpetrators vent their hostilities and frustrations by spreading lies and half-truths about their victims or by revealing sensitive personal information. It does not matter if the gossip is true or not, gossip can hurt and embarrass victims and undermine trust and morale in the workplace.
http://www.alanayersurgentcare.com/Linked_Files/JUCM_June_2012_Workplace_Gossip.pdf
- **Workplace Bullying:** Managers—not co-workers—are typically the ones who instigate bullying in the workplace. The targets are usually competent subordinate employees, who are seen as threats to insecure bosses. They harass their victims directly, manipulate other employees to alienate victims, or spread gossip that undermines the victim's confidence, reputation, feelings of security or otherwise makes their workdays miserable. Workplace bullying is four times more prevalent than illegal types of harassment—including sexual harassment—and its consequences are just as destructive.
http://www.alanayersurgentcare.com/Linked_Files/JUCM_March_2012_Workplace_Bullying.pdf
- **Sexual Harassment:** Regardless of gender or sexual orientation, anyone can be the victim of unwanted sexual attention. It is either in return for favors quid pro quo or, more broadly, as suffering under a hostile or offensive work environment. Sexual harassment may be by a manager or co-worker. When management does not effectively deal with sexual harassment, the result can be court-awarded damages large enough to shutter a small- to medium-size business like an urgent care center.
http://www.alanayersurgentcare.com/Linked_Files/JUCM_2010_April_Sexual_Harassment.pdf

Although your initial reaction to these workplace toxins may be "certainly not in our center"—how can you be sure? People are people and odds are some of these behaviors have manifested in your center to varying degrees and if not, your center may still be at risk.

Why Are Urgent Care Centers So Vulnerable?

In urgent care centers, there are significant power differentials between management and supporting staff. Not only is the doctor the “bottleneck” in patient-facing processes, but doctors make significantly more money and have significantly greater education than front-line staff. In addition, the healthcare industry at large has a history of hierarchical structures commanding unquestioning obedience as well as cut-throat competitiveness. Long hours and periods of heavy workloads and high stress interspersed with periods of low activity and boredom can lead to a “pressure cooker” environment of crossed relationships and territorial jealousies.

Unresolved conflicts can fester, hostilities bubbling with resentment, and truth usurped by rumor. Hurt feelings lead to factional alignments, interrupting normal work activities. Tense exchanges between staff do not go unnoticed by patients who often choose to go elsewhere in the future. The worst part is that dissatisfied patients never tell the center, they tell all of their friends (including their “friends” on social media) instead.

A Remedy to Fight the Evil Axis

As we move into the New Year, there is no better time to make a fresh start and implement a program to reinvigorate your corporate culture and take steps to break up the “axis of evil” before trouble starts. Or, if problems already exist, to defuse them before their risk to the center escalates.

Three changes will go a long way to counteracting the corrosive forces of gossip, bullying and harassment and will send a symbolic message in support of lasting change at the roots of your center’s culture. They are:

1. *Have clear policies in place;*
2. *Communicate the policies in a way that staff understands;*
3. *Set a strong management example; and*
4. *Enforce a zero tolerance policy toward misbehavior.*

First, every urgent care center should have an employee handbook of policies and procedures that gives clear advice to employees and creates a culture in which problems are dealt with fairly and consistently. The handbook should address head-on malicious gossip, workplace bullying, and sexual harassment—policies that outline acceptable behavior and the consequences of unacceptable behavior.

But having a policy manual is not enough—so second, the policies need to be communicated and employees must clearly understand what is expected of them. Because of the professional and financial liability associated with sexual harassment, in particular, all managers should have formal training in identifying and addressing harassment because the courts can hold owners liable for manager’s actions.

Third, a center’s owners, operators and physicians must understand that, because they hold positions of “power,” they have to “walk-the-walk.” They cannot allow themselves to indulge in any gossip—they must be prepared to confront gossip mongering as soon as it comes to their attention and stop the poison at its source. Likewise, management must no longer chose to ignore bullying or harassment in the workplace, figuring employees will “work it out among themselves.”

Last, management must communicate that going forward there will be “zero tolerance” of any untoward behavior. Make it a standard that employees report harassment. Every effort must be made to handle reports confidentially, with assurance of thorough investigation and follow-through, and without retaliation. If there are individuals engaged in these behaviors, address the problem immediately through personalized corrective action plans.