

Creating Affinity with Front Line Staff

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Urgent care is a service business whose long-term viability depends on patient loyalty and word-of-mouth. That's why urgent care entrepreneurs spend tens of thousands of dollars in selecting the right locations, equipping them with the latest technology, and then devising creative marketing campaigns to bring new patients through the door. But while these investments all contribute to business success, they're still minor compared to the one that makes the greatest impression on patients—the front-line staff.

The “front-line” includes any staff member who regularly interacts with patients—in an urgent care center this typically refers to front office specialists, medical assistants and technicians who support physicians and other providers. The following points demonstrate why the attitude, efficiency, competence, sense of urgency, attention to detail, and communication of the front-line staff impact a patient's willingness to return to the center and tell others to do likewise:

- The majority of a patient's interactions are with the front-line staff, not medical providers.
- Front-line staff enables the medical services for which the center exists.
- Front-line staff assures the center gets paid for the services it provides.
- Front-line staff controls communication between patients and providers.
- Front-line staff controls patient flow and documentation.
- Front-line staff knows most intimately patient expectations, impressions, and satisfaction.
- Front-line staff is typically the largest expense item on the center's profit and loss statement, after medical providers.

Consider how a registration specialist greeting a patient walking through the door contributes to that patient's lasting “first impression.” No matter how well clinicians treat a patient—a disengaged or disgruntled registration specialist can still undermine the entire operation. Because most urgent care visits are reimbursed by insurance, errors or shortcuts in benefits verification and data entry at registration can result in costly re-work by the billing function, patient frustration with the collections process, and ultimately, in the center going unpaid for services administered. Yet despite their obvious importance, all too often registration specialists are viewed as an expense to be “controlled.” Because they're typically the center's least educated and lowest paid employees, they're often excluded from center meetings, their opinions on how to improve operations are frequently overlooked, and in extreme cases, they may be treated as “disposable” and easily replaced.

Anyone who debates the value of the front-line staff should consider the operational impact of a practice manager taking a day off—the operation will continue without a supervisor—but when a center is short-staffed, everything can spiral into chaos. Moreover, when the needs of front line staff are ignored, consequences include:

- Frequent turnover—contributing to periods of short-staffing, high unemployment premiums, and increased recruiting and training costs.
- Poor quality service—contributing to patient hostility and negative word of mouth.
- Non-compliance with internal policies and external regulations—contributing to mistakes and legal liability.
- Conflict and power struggles between staff members, staff and managers, and staff and patients—contributing to the development of subversive subcultures.

Subcultures Develop When Staff is Neglected

Ideally, urgent care providers and staff will be unified by shared values of delivering excellent patient care and assuring business success. But unlike medical professionals who typically find stimulation and satisfaction from the challenges and variety of their *work*, front-line staff often finds the nature of their work repetitive, dealing with patient and provider demands stressful, and instead look for stimulation and satisfaction in their *workplace relationships*.

In a small operation consisting of one provider, one medical assistant, and one front office specialist, unity is easily achieved through interpersonal contact and common experiences. But the larger and more departmentalized an operation becomes, the more likely staff will consider the needs of their job function over those of the organization as a whole. They'll also begin to identify more with their immediate co-workers than with managers and owners.

By definition, a *subculture* occurs when like-minded individuals who feel neglected by the dominant behavior, attitudes and values of an organization develop a sense of solidarity with *one another*—typically in rebellion *against* the “powers that be.” In an urgent care center, such solidarity may pit staff against management, staff against providers, staff against patients, front office staff against back office staff, or operations staff against the business office.

Just as there are formal standards for behavior in the workplace—driven by an organization’s mission and reflecting the leader’s values—subcultures develop their own, alternative standards. These standards are called “codes” because they’re widely known among members of the subculture but they’re never documented, trained or even formally acknowledged. Table 1 illustrates common “codes” governing behavior in workplace subcultures.

Table 1: Common codes of behavior in workplace subcultures.

Behavioral Code	Staff Manifestations	Urgent Care Example	Management Remedies
Secrecy code	Staff does not report others for infringement of rules or abuse or neglect of their responsibilities. Staff loyalty is more to each other than to the organization or management.	To avoid corrective action on sub-par patient satisfaction scores, the registration staff coordinates to manipulate the patient survey process. As a result, management reporting fails to identify delivery problems in the front office.	To get loyalty <i>from</i> the staff, management must show loyalty <i>to</i> the staff. Let staff know “ <i>I will do all I can to fix what is stressful, difficult or broken, so I need you to report it to me. Give me a chance to make it right.</i> ”
Productivity code	Staff manages productivity and dictates that there will be no overly ambitious staff members who out-produce others.	Staff members gossip about, and alienate from social interaction, a co-worker who has taken on a special project to help raise the visibility of the center in the community. They dismiss her efforts as “kissing up” to management.	Provide opportunities for all staff members to engage in activities above and beyond their normal duties. Go out of your way to notice, comment on, help and show appreciation to everyone who takes initiative to build a new culture of patient and co-worker service.
Cover me code	Staff facilitates or fails to report malfeasance, errors or violations by co-workers such as manipulating timecards, covering a coworker's tardiness, long breaks, or work left undone.	One team member, a single mother, feels empathy for another team member in the same predicament who must miss work to tend to a sick child but who cannot afford lost pay. She agrees to “clock out” her friend two hours later.	Monitor operational processes, tune in to what is going on with the staff outside the workplace, and ask questions if needed. Accommodate legitimate needs for time off to take care of personal or family business.

Us versus them code	Staff shows a lack of open-mindedness, teamwork and cooperation. Staff may also make fun of, mock, or imitate a co-worker, manager, or patient.	Staff members decide to put an angry, aggressive patient “in her place” by treating her rudely, failing to provide updates regarding her care, and extending her wait by putting her at the end of the service queue.	Create empathy in the staff for the needs of others—essentially “golden rule” thinking. Listen, acknowledge, intervene, inform, advise and protect staff from anything or anyone they see as threatening, harmful or hurtful.
Ownership code	Territory is kept clearly defined by department or job function and is not to be infringed upon. Staff may refuse to help someone who is “not their problem.”	Front office staff, dealing with patients in the center, ignores requests from the central billing office to retrieve charts and scan physician notes needed for insurance reimbursement.	Create an inclusive environment in which all team members understand how their roles interact in the success of the operation. Say “we” and “us,” and recognize many in every success so all staff are proud of the collective as well as individual performance.

Adapted from Strategies for Understanding and Supporting Frontline Staff by Linda LaPointe.

Just because staff is “engaged” and has “high morale” doesn’t mean subcultures and their behavioral codes don’t exist—in fact it’s possible for staff members to thoroughly enjoy their relationships with like-minded peers. Some may even find “purpose” in their solidarity against patients or management. Identifying the presence of subcultures and their behavioral codes can be difficult unless the urgent care operator constantly monitors operations, observes staff interactions, and dialogues with staff. But doing so as a “police state” only further polarizes staff and reinforces the subculture—understanding cultural dynamics takes developing personal relationships with the staff and genuinely caring about them.

Two Mechanisms to Establish Authority

As an urgent care leader, there are two mechanisms to engage staff around the center’s mission and values and to get staff members to enthusiastically follow:

- First is authority by title—“I am your boss and therefore you must do what I say.” Such managers derive power from their ability to scrutinize, question, punish, harass or even terminate an employee. The result is staff who questions the manager’s competence, resents the manager’s interference in their work, ignores the manager’s commands, goes over the manager’s head, or who simply does the minimum work required to avoid the manager’s scrutiny. Staff rarely trusts a manager whose authority comes by title.
- The second mechanism involves “winning the hearts and minds” of the staff. If you want to motivate someone to act, you have to establish affinity with that person. Affinity is a liking, agreement, or resemblance to another person that is the basis of becoming “real” to somebody. Until you establish affinity, being “non-real” is the same as being “non-human.” And one cannot effectively lead if he is an “object” and not a “person.” Is there any wonder why surveys show that up to two-thirds of American workers do not trust their bosses? Affinity establishes a leader’s “personhood” and thus willingness for staff to follow.

In order to establish affinity with front-line staff, urgent care operators cannot be wishy-washy leaders. They must have a firm understanding of the values that guide the center and be personally committed to those values. Managers get exactly what they focus on. So if an urgent care operator believes, for instance, that patients are human beings who are invaluable to the center’s success—he will develop staff that treats patients with respect, compassion, and understanding. However, if the operator believes that patients are merely a means to an end—such as the center

meeting its financial objectives—staff will begin to treat patients as “objects” to be “processed” or in extreme cases, “annoyances to be dealt with.”

Fortunately, unlike other service industries like retail and hospitality where front-staff “happens upon” employment without thought to their values and beliefs—many individuals choose health care professions because they sincerely want to “help” people. A successful urgent care manager will tap into the staff’s innate desire to provide a welcoming, compassionate, and skillful experience to every patient served.

Establishing Affinity with Front-line Staff

“Winning the hearts and minds” of staff entails helping them feel that they are important to leader and to the organization. Through the leader’s authentic communication, staff comes to understand the humanity of the leader, realizes that they actually do share the same values, and believes that the leader has everyone’s best interests at heart. By contrast, activities that limit communication, rely on formal structure for authority, or puts staff “in its place” results in attitudes that the manager is self-centered, is without feeling, and is undeserving of the staff’s energy and passion.

Which of the following multi-unit urgent care operators do you think is more effective in motivating staff to deliver a first-rate patient experience?

- When one operations director arrives at the center, he spends most of his time cloistered away with the center’s supervisors discussing staff-related issues. He paces the hallway with his cell phone, text messaging and talking with his superiors, and when he does look up at staff members, he neither acknowledges them nor calls them by name. After his departure, the center’s supervisor “slams down” the staff for everything the director observed that was wrong.
- Another operations director makes it a point to spend one day a month at every center, to memorize every employee’s name, and to actively listen to employee concerns and suggestions. She purchased a portable charcoal grill to personally make hot dogs and hamburgers for the hurried staff. As staff members take their breaks to grab a bite, the director learns their names, hobbies, interests, and workplace concerns. The act of humility of not only buying—but actually preparing and serving—lunch to the staff creates a strong affinity between the staff and the leader.

In order to create an emotional connection with the center’s front-line staff—to get the staff to like and trust you as a leader—consider the following activities in Table 2.

Table 2: Suggestions for establishing affinity with front-line staff.

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| <ul style="list-style-type: none">• Know and use the first name of every staff member.• Make eye contact with staff members and acknowledge them by name when passing.• Smile and be happy to see staff members. Ask how their day is going or how their weekend was.• When choosing between helping an employee and finishing a report, choose to help the employee.• When choosing between answering an employee’s question and socializing with a superior, choose the employee.• When meeting with staff members, give your full attention and do not rush. You are investing in your staff.• Protect staff from abuse from providers, patients, vendors, injuries and overwork at every turn.• Get to know employees and the people around them, e.g. family and children. Remember to ask about what you know is important to your staff members but ask for permission before asking a personal question.• Respect personal space and working territory. Keep the staff restroom and break room clean and well-attended.• Treat staff equally and courteously. Stay person-centered not task-centered. |
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- Listen when staff speaks. Do not discount what they say or how they feel, and never speak down to them or correct them in front of others.
- Know staff's assigned schedule. Invite the return of staff after a maternity or paternity leave with encouragement and flexible schedules.
- Jump in to help with any task when needed in a crisis or when short-staffed. (This is different than solving others' problems or taking over because no one else knows how or does it well enough.)
- Allow and expect staff to solve problems, allow them to improve processes, and allow them to suggest solutions.
- Recognize staff achievement—both individually and collectively—through verbal recognition and tangible rewards that are visible to everyone associated with the center. Make staff look good in front of others, e.g. other staff, their families and patients.
- “Surprise” staff by providing lunch on busy days, with spot bonuses, or unexpected recognition activities.

Conclusion

An engaged and happy front-line staff is essential to a well-run and sustainable urgent care operation. Urgent care operators who dismiss, overlook, or neglect their front-line staff will experience dissatisfied patients, negative word of mouth, increased operating costs, instability in operations, and increased risk. In extreme cases, subcultures may develop that completely undermine management's ability to control the operation. The best remedy in “winning the hearts and minds” of the front-line staff is to create affinity—that is, through communication, to become “real” to them by realizing shared values, demonstrating humility, and emphasizing their importance to the operation.