

HOW TO GIVE GREAT *Performance* REVIEWS



BY CINDY MURPHY McMAHON

Year-round communication, clear job descriptions, and the right tone are vital to job evaluations. What you need to know and why your office manager shouldn't do them.

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"You have to talk face-to-face and it has to be the doctor. You can hide behind the office manager or the nurse manager, but it's much better when it comes from the doctor." —Janie Mikuls, MD, is a pediatrician in Omaha, Nebraska.

EMPLOYEE NUMBER 1 ALWAYS ARRIVES FOR work on time, assists fellow staff members without being asked, and is especially good at having patient files ordered and ready to go for the following day.

Employee Number 2 is frequently 10 to 15 minutes late for work, sometimes as much as a half an hour, and makes too many personal telephone calls at the office. Other staff members have complained that this employee is occasionally difficult to work with.

One might assume that a physician preparing to conduct annual performance reviews with these two employees might be tempted to skip the review with Employee

Number 1—ascribing to the proverbial "Why fix it if it's not broken?"—while having to gear up for a dreaded meeting with Employee Number 2. After all, Number 2 will have to be told that the tardiness and other less-than-ideal behaviors are not acceptable and disciplinary measures will have to be decided and discussed.

But the first approach presumes good workers don't need to be told how valuable they are. The second is based on the faulty premise that the employee performance review is a primary source of supervisor-to-employee communication. And both approaches bypass important groundwork that sets the stage for objective, streamlined performance appraisals that can meet both the physician's and the employ-

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ee's goals, contributing to a more motivated and patient-focused staff.

Laying the groundwork

Human resource consultants say if a manager takes only a few steps during the course of the year, an employee's annual performance review can become merely a formality that requires little prep time, but one that serves an important administrative function. It also offers an opportunity for a supervisor and employee to discuss mutual goals that will enhance the office and patient care.

Underlying any discussion of performance reviews, is, of course, the importance of hiring the right personnel in the first place.

"People who don't fit into a practice cost so much time and money," says human resource consultant Carol Losee, of [Workplace Dimensions, Inc.](#), in Richmond, Virginia. "If the person doing the interviewing simply would know just what the office is looking for, and ask the right questions to find that information, the productivity of the whole office goes up and morale is enhanced. From the start, it's who you hire. If you hire right, your job becomes so much easier. One bad apple costs too much time and money."

The second building block to simplifying the performance review process is making sure communication with employees about their workplace performance is ongoing and doesn't occur just once a year.

"You have to talk face-to-face and it has to be the doctor," says Janie Mikuls, MD, a pediatrician in Omaha, Nebraska. "You can hide behind the office manager or the nurse manager, but it's much better when it comes from the doctor." In her Children's Physicians group of five physicians and one nurse practitioner, Mikuls is responsible for performance reviews with her nurses, a receptionist, an office manager, and occasionally students and residents.

"The performance review forces your hand," says Mikuls. "When you're filling one out and you realize you haven't talked to someone about a problem, you put the paper down and go talk to the employee."

How physicians set expectations day to day and give feedback is what's important, says Bill Macey, Ph.D., of Personnel Research Associates, Inc., located in Arlington Heights, Illinois, a suburb of Chicago. He is the president of the Society for Industrial and Organizational Psychology. "What's most important is having an ongoing discussion all year long," Macey explains.

In other words, there should be no surprises for an employee during a performance review.

"The key is communication all along," Losee agrees. "The better the ongoing exchange of ideas and comments, the better able employees will be to monitor themselves, because they'll know what they're doing right or not doing right."

She admits this is often difficult in a busy medical office, so she advocates a six-month mid-cycle "chat," in addition to the annual performance review, to make sure everything is on track. "This could be just a 10-minute chat in which you simply ask the employee, 'How's everything going on your end? Do you need anything from me?'"

Although an annual performance review is not mandated by governmental workplace regulations, individual health systems or unions may have such a requirement, and it is definitely customary in the American workplace. Sometimes small-business owners feel it's not necessary; others attempt to go longer than one year or on a less structured, more flexible schedule. None of these practices is recommended by business consultants, who say at least once a year, an employer and employee should sit down and discuss the employee's performance and mutual expectations.

Before a physician prepares to review an

employee's on-the-job performance, two additional elements should be in place that will not only simplify the process, but also assure that any eventual disciplinary action is legally sound: a written job description and an employee handbook.

Employees should have up-to-date job descriptions because it is vital to set standards and define expectations. "This lets an employee know exactly what his or her responsibilities are and assists the manager in identifying whether or not the employee is doing the job," Losee says. "There should be specific performance measures, skills and behaviors required for successful performance in the job. You and the employee should both know what's expected." For example, employees in a physician's office could be rated on communication, teamwork, patient service, and the quality of their work.

A current employee handbook is also critical. A handbook should state which behaviors can result in disciplinary action. "It's important to follow the practices in your handbook, which should be reviewed by counsel before printing," Losee recommends. "It should specifically state what type of actions can result in a verbal warning, what actions can result in automatic firing, and so on. People can sue for wrongful termination, saying, 'I didn't know,' or 'They didn't tell me.'" She suggests always using the words "can result" to allow flexibility on the part of management. Having a handbook eliminates the performance review as the setting for delivering the news that a certain behavior is against the rules.

Losee points out the importance of appropriate documentation and recommends keeping an incident log to make a physician's job easier when reviewing an employee's performance. This works hand-in-hand with ongoing communication because when a doctor notices an employee taking initiation, helping a co-worker, or writing a sloppy report, he or she should not only say some-

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thing, but also jot it down in a log. It only takes a few seconds to do and makes recalling a specific employee's performance much easier when it comes time for a review. Make sure both positive and negative comments are reflected for objective balance.

Mikuls finds it helpful to take the personal edge off employee criticism. "I try not to make it personal. Our number one goal is what is best for the patient. I tell employees I'm just trying to do what's right for my patients."

Industrial and organizational psychologist Macey stresses that commenting on employees' positive behavior can't be emphasized enough. "Many people wouldn't comment on an employee who comes to work on time every day, but it is entirely appropriate to say, 'I appreciate how you are here promptly by 7:30 every morning,'" he notes. "All people want to feel valued and recognized for what we do well. That's an important part of job satisfaction."

How, when, and where

Once the groundwork is in place and it's time for an employee's annual review, what's the best way to go about it?

No one would argue that the conversation should take place in private, at an agreed upon time and place such as an office or conference room. But Macey says it's also important that the discussion be uninterrupted, even by the telephone. "Most physicians are pretty busy people, so that might be tough. But it's important not to appear distracted."

If the medical office is not part of a larger health system that has printed forms for employee performance reviews, have one designed. The standardized form should have areas for specific comments articulating an employee's strengths and areas for improvement. The comments should be written out before the physician sits down with the employee.

Mikuls says the forms she and her fellow

Human resource experts agree that poor performance should always be confronted—preferably at the time it occurs. But how that conversation is conducted can affect the outcome.

Constructive feedback shouldn't just focus on what the employee did wrong, according to industrial and organizational psychologist Bill Macey, Ph.D., with Personnel Research Associates, Inc., in Arlington Heights, Illinois. "You should let employees know you value them, how what they do helps you. Then, give them a specific description of what needs to be changed. If you want them to accept your feedback, you need to express your confidence in them."

A reminder: Always give feedback in private. People accept praise in public, but criticism should always be given in private. "Standing at a counter in the office would not be appropriate," Macey says.

Think of yourself as a coach, recommends consultant Carol Losee of Workplace Dimensions, Inc., in Richmond, Virginia. "Managers sometimes believe employees ought to improve on their own. They don't see

themselves as helping employees better their performance and capabilities."

Put yourself in the employee's shoes and don't jump to rash conclusions or lose emotional control in a "coaching" situation. Fairness, enthusiasm, and flexibility from a supervisor go a long way in helping an employee improve.

Tone is important. "Harsh criticism tends to deflate morale and reduce respect for the supervisor, in this case the physician, which leads to production and quality problems such as errors, waste, down time, and turnover," Losee says.

Think it through before approaching an employee, says the Society for Human Resource Management's Kristin Bowl. Sometimes you may think a mistake was made, but was it really wrong? Could it be an employee just came up with a different solution than you would have? Diversity in thought is important in the workplace.

Solicit the employee's input in assessing and correcting the problem. Discuss specific goals for fixing the problem, then follow up later and provide more feedback if necessary. ■

physicians used were repetitive and too long at one time, but they have been trimmed and now are only two sides of one sheet of paper. "The basic questions we are most concerned with are an employee's reliability and the ability to get along with patients, families, and each other. Our office falls apart if we don't work together. We can't be little islands. Everyone has to help each other out."

Losee likes to see space for the employee to write comments on the evaluation. "It's a good-faith effort to have employees comment on their evaluations," she says.

Tell employees in advance what to expect from the meeting. Macey points out, "Performance reviews can be stressful for everyone involved. It helps if you tell an employee: 'We're going to talk about the expectations for your job and where you've met or exceeded them, and where we need to talk about moving forward. We'll also talk about goals for your job in the next year.' Then they can think about it."

Some employers give employees a copy of the review a few days before the meeting so that when they sit down together, the employee can give more input.

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Losee suggests even giving employees a self-appraisal form before the physician begins writing the evaluation. "Employees are usually tracking their own performance through the cycle. This says to the employee, 'We want your feedback, what you feel you've accomplished.' This helps employees buy into the whole process and more actively participate in the appraisal." She says it also helps the doctor remember better something the person did perhaps two months earlier.

While self-appraisals undoubtedly could lead to over-inflating of achievements, Losee feels this is a small price to pay. "The whole concept of communication is so critical and this is one way to get their input. It starts communication and identifies areas of disconnect."

Should other people's input ever be sought on an employee's performance? "Sometimes it's helpful to have another set of eyes, another administrator or manager who has a good feeling for how the staff operates, take a look before finalizing the review," according to Losee. A physician who is in the dark on an employee's performance could talk to an office or nurse manager for input and then make a point to improve communication with that employee.

A trend to seek comments from a variety of sources, such as co-workers and customers, would be difficult to do in a medical office. Macey says, "That can be useful information, but if you have a collaborative team effort, people feel free to give feedback to each other anyway, and you want to encourage that in your office."

"No-surprises" performance reviews that leave employees feeling valued, recognized for specific achievements, and appreciated for the challenges they face, produce employees that are satisfied with their jobs and renewed to help physicians focus on patient care.

"As physicians, we haven't learned much about managing people," Mikuls concludes. "The temptation is to go in your office and

ignore it, but this hurts the rest of the office and everyone suffers." ■

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