Team Building – A Personal Experience

Team building is a buzz word that often relies on catch phrases such as "tribes" or "culture" to express the end-result: a successful team. Good companies (and medical practices) are assumed to have mastered this process, simply stated as hire good staff and you will have a good team and you will prosper! The reality isn't always that easy.

In my practice, it took 14 years to create a fully functional team. Though we had many outstanding employees during that time, something was missing. It is hard even now to describe what was needed, but it was obvious when the team ultimately gelled.

The gel occurred during one of the toughest times employeewise that I ever experienced. In 2007, we had a crew of nurses that were remarkably close, but the crew didn't get along with the office manager or any of the other staff. They were good nurses but not team players. En masse they quit, leaving us with only two nurses, both of whom were seasoned but not able to handle the daily load alone.

Going into damage control after the initial shock, we asked one of our previous head nurses, who was now 150 miles away, to come in on a temp basis to help out. Amazingly, she agreed, and we posted ads and waited. One nurse answered the ad and came to interview. While she was perfect, we worried that she would see we were grossly understaffed and decline our offer. Improbably, she accepted and we went on to gather a new crew. Our new nurse member became the attraction for a new team of nurses who joined us based on her charisma and her trust in us. Since that time, we haven't lost a single nurse, and the team has worked together flawlessly. Coming to the office has gone from a nearly negative experience to a joyful one, with nurses and office staff who are best friends both in and out of work.

This experience changed our hiring practices. The difference between our hiring before and after is summed up in a few simple and translatable truths:

- 1. Wait for the right person when hiring. Before this experience, we hired based on the pressures of need and would often accept individuals hoping they would work out but not sure of that. Invariably, our questionable hires didn't become successes, and we ended up causing ourselves much more grief in the hiring/firing/quitting process than we would have experienced working "lean" for a few weeks or even months until the right person who was a good fit for the team appeared.
- 2. Terminate someone when they aren't working out instead of hoping they will work out. We now have a 90-day policy for hires that is no-fault. By this, I mean that they can choose to quit and we can choose to terminate them at any point in the first 90 days. I make a decision on each hire at the 90-day point. Most of the time it is abundantly clear whether they fit within our culture.



- 3. Allow your staff to help train new hires to the culture. My staff takes great pride in the culture that has evolved in our workspace. They often will deselect individuals who aren't a good fit or take the time to coach them if they feel they are trainable. The good news is that they are much more adept at spotting potential issues than I ever was, and they do a much better (and nicer) job of instructing new hires on the dos and don'ts of how to work with us.
- 4. Have fun! Watch, rather than interfere. When I tried to counsel a new hire to be like us or to change in order to accomplish that, it never worked out. Relaxing and letting my staff do their magic (if the right staff had been chosen) was the best change I could have made in my procedures.

Our current front office and nursing staff has been in place for 10 years now and we have seen marvelous changes in their lives, including marriages, births, and other significant events. The one nurse who started it all has now returned to school to be a nurse practitioner and is excited to enter a new phase in her life.

Significant credit also must go to our Director of Human Resources who came on during this episode and who singlehandedly helped us recruit great talent and to forge a true strategy for hiring that put individuals in places they could succeed and contribute to the team. Her vision was essential to the final composition of staff for the clinic.

Additionally, we sent our managers, including me, to training courses at the Gallup Organization on how to be a good manager. And equally importantly, our PA stepped up to manage the floor, allowing for a more orderly management style and less friction among the nursing staff.

This is just one example of good outcomes from what might have, at the outset, seemed an impossible situation. While not all practices will fail as we did or succeed as we did, I hope that with good fortune, good timing, and hard work on the part of everyone on your team, the magic will happen. Good luck!

> —Joel Schlessinger, MD, FAAD, Chief Cosmetic Surgery Editor