

# THE AESTHETIC GUIDE



## Methods to improve team performance

Mara Shorr, BS, CAC and Jay A. Shorr, BA, MBM-C, CAC | Dec 10, 2019

“There’s no good talent in (insert your city here).”

As national award-winning practice management consultants focusing on the aesthetic and cosmetic industry, we hear the same thing in EVERY market we visit and from every practice leader we meet.

We hate to burst your bubble, but it's not true. There is great talent in every city we have visited, and improving your team's performance can make all the difference in improving the health of your practice.

## **Hire team members**

Begin by selecting the right team member from the start. In our company, Shorr Solutions, we only have team members. When you're choosing your team, looking for key items during the interview process can make all the difference between a "staff member" and a "team member."

Review their resumes for how long they've been employed with each of their former employers to see if they stick around long-term or job-hop every few months. Listen to their excitement and tone of voice in a phone interview. Bring in your existing team during the interview to see how everyone interacts together. Consider a working interview as well, and with every offer letter, we recommend confirming your newest team member is in good standing with their board certifications (if applicable), as well as making sure you review their employment and criminal background check.

## **Lead by example**

Do you expect a hardworking team when they watch you arrive late and clock out early? Yes, you may be the head of the practice, quite possibly even the medical director or owner. But, if you showcase bad habits, your team will begin to think they are acceptable, and treat you, as well as each other and the practice as a whole, the same way. We've seen examples of doctors ignoring their team members, even screaming profanities at them in public when they're having a bad day. We've seen doctors speaking poorly about patients. We've seen it all. Do you know what happens in this environment? The toxicity spreads through the practice until you lose control.

## **Don't be a doormat**

Make sure your team is respecting you. When you first notice an unacceptable behavior amongst your staff, course correct. Have a system in place that you are able to follow from the start. We suggest having the conversation behind closed doors, and if the situation warrants, including a witness (note that not every issue warrants a witness, so seek guidance if you are unsure). Handle the manner in a calm, respectful, firm manner, explaining how the behavior affects the practice, why it is important to change it as soon as possible, and what the proper behavior should look like. We suggest the “kiss-kick-kiss” method of starting with a positive, course correcting and then ending with another positive.

For example: “Sue, as a nurse practitioner, the rest of the team looks up to you, and patients love you. However, by showing up late and taking extended lunches each day, you are sending the message to them that this is acceptable. In order for the practice to continue to run on time, we need everyone to be here, on time, as they’re supposed to be. We value you as part of the team, and know that when you correct this, we’ll be able to grow together.”

## **Regular communication**

Staying in regular communication is key. We suggest our clients schedule regular team meetings, with four meetings per month at a rate of one per week: one with the front office/administrative team, one with the back-office team, one with leadership and then one with the entire team together. Block out other interruptions, set aside time when the phones aren’t ringing and encourage your team to build the agenda together.

In addition, we suggest offering each team member the opportunity to give one thing that is going well in their domain and one thing they need assistance with. For example, the practice may be running on time, but that isn’t leaving time to upsell. The team needs to work together to set aside time to speak to patients about skincare or additional procedures, and an “other areas of concern” spreadsheet needs to be distributed and collected by the front desk while patients are waiting to be roomed.

## About the authors



### **Mara Shorr, B.S., CAC**

Ms. Shorr serves as a partner and the vice president of marketing and business development for Shorr Solutions, assisting medical practices with the operational, financial and administrative health of their business. She is a Certified Aesthetic Consultant and program advisor, utilizing knowledge and experience to help clients achieve their potential. A national speaker and writer, she can be contacted at [marashorr@shorrsolutions.com](mailto:marashorr@shorrsolutions.com).



### **Jay A. Shorr B.A., M.B.M.-C., CAC**

Mr. Shorr is the founder and managing partner of Shorr Solutions. He is also a professional motivational speaker, an advisor to the Certified Aesthetic Consultant program and a certified medical business manager from Florida Atlantic University. He can be reached at [jayshorr@shorrsolutions.com](mailto:jayshorr@shorrsolutions.com).

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