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Who Moved the Magazines?

And other changes from COVID that we will keep

By Julie Guethler

The other day, the physician owner of our practice approached me and asked what I thought about doing away with magazines in the waiting room. We, like a lot of offices, removed them as part of our COVID cleanliness response. I told him that I'm writing an article, and I'm intrigued by which of our COVID changes will be kept.

So, I went to our staff and got responses that ranged from keeping telehealth to leaving the doors propped open so that the patients can have more of a "non-touch" experience. Extra chairs in the hallway not only help with social distancing, but also provide more seating on busy days.

While none of us ever thought we would experience something like this pandemic in our lifetime, it can, and I would argue, should be a time for self-reflection and for examining all of your office processes to see what is still working and what is now obsolete.

One of my staffers appreciated the cross-training that we stepped up to help accommodate new processes and hopes that it continues. I agree—knowing the challenges that others face daily is a good way to build a team and cut down on the "us vs. them" mentality. A fresh set of eyes working in a new area brings new ideas. The physicians and I are very proud of our staff and how they have continued to work, even in the face of fear and uncertainty.



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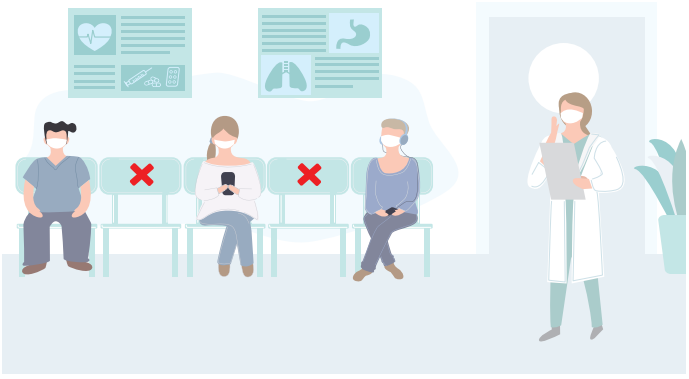
Wearing masks when we are just not feeling well will likely feel more "normal" to us than in the past—even if it is "just a cold." For most of my 30 years in management, I have worked to convince staff to stay home when sick, take care of themselves and save others from their illness. We have talked in-depth about how to create a culture of wellness. One thing our physician owner pointed out to me is that even physicians are often encouraged to come to work sick—keep working at any cost. This, in turn, sets the tone for the practice. Encouraging wellness will continue to be a focus for us.

One area where we have really stepped up our process is utilizing our real-time eligibility system more consistently and effectively. Due to some changes that insurance companies have instituted not allowing the backdating of referrals, identifying patients without active referrals has become a focus. This allows us to always have access to insurance information regarding benefits so we don't have to touch patient insurance cards, thus making patients and staff more comfortable. COVID has increased our awareness of using tools that we have available to us.



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