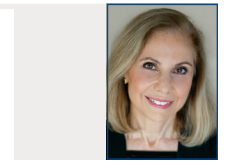


By Cynthia Matossian, MD



Cynthia Matossian, MD, FACS, is the founder of Matossian Eye Associates. Her e-mail is [cmatossian@matossianeye.com](mailto:cmatossian@matossianeye.com)

# It takes a practice

Training our tech assistants involves most of our staff.

Last month, we discussed the importance of making our front desk staff the practice's "key" business developers. How else could you describe those responsible for turning prospective phone calls into patients and ensuring that all physician-suggested elective products be sold?

This month, we'll discuss training our technical staff. It's impossible to provide superior patient care without a staff instructed to strive for constant accuracy and efficiency, the two benchmarks of any successful practice.

## FINDING GOOD HELP

As our specialty relies increasingly on diagnostic testing, ophthalmologists need well-trained assistants to help them. Unfortunately, trained ophthalmic assistants do not apply for jobs: too few are out there.

So, regardless of where our tech assistants come from, whether from the front desk or, like our front desk folks, from the hospitality field with no previous medical background, the responsibility and cost for training our technicians fall on the practice.

## A NEW CAREER

Our techs will tell you that mastering our learning curve

requires wearing cleats.

After their formal orientation, new ophthalmic assistants are assigned to shadow a head technician. They observe, take notes and ask questions between patients. After one or two weeks, depending upon how quickly they learn this part of their job, they begin work on our EMR, mastering entry processes. The next step is performing basic tests including visual acuity checks and visual fields; their assigned mentors double-check them all.

After these new techs master these tasks, we gradually increase their responsibilities with one-on-one practice sessions. Additional training on more complex diagnostic equipment is paced over months.

The next step: They learn how to screen patients. Then, a three-month minimum rotation ensues within the subspecialties such as glaucoma, retina, cataract, oculoplastics and contact lenses.

## CONTINUOUS TRAINING

We've spoken before of our weekly training sessions, and are doing so again. These required-attendance sessions bring together our front desk and technical staff. They follow a formal agenda and cover topics including ophthalmic terminology, insurance infor-

mation, customer service tips and HIPAA guidelines. The managing physician, practice administrator and office manager attend, and staff is called upon randomly to read bullet points or answer questions. All new ophthalmic techs are required to complete and pass 25 selected modules, created by BSM Consulting.

## ON THEIR OWN

After at least one year, the techs learn to become scribes. Initially they shadow a more senior tech; then this process is reversed; and when they feel confident, they work on their own.

The techs learn to set up for retinal injections and minor plastics procedures. Our practice also sends two assistants per year to a national meeting for additional training. We encourage staff to attend local courses when possible or available; the practice pays for the courses.

We encourage staff to become certified ophthalmic assistants by officially sponsoring them and holding after-hours study sessions.

A well-trained staff impacts the patient's experience — and that converts patients into ambassadors of goodwill with continued referrals, which ensures thriving success. **OM**