Creating an onboarding plan for the elusive new associate

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Hypothetical situation: you are a tired DVM who would like more doctor power to grow your practice and take care of your clients. Maybe even build in some better time off! Before you start the hiring process, let’s make a plan! I will take you through my on-boarding process and share tips and ideas to get you started. The focus of this talk will be on integrating a new associate into the practice and setting them up for long term success. What does mentorship look like? How will this investment of your time and energy pay off in retention? Join me for a talk designed to give you some tools to customize for your practice.

Key words: onboarding, hiring, culture, associate veterinarian, retention, mentor

Let’s fast forward to a future where you have crafted a culture that you enjoy and fulfills you. You are actively using your core values, mission statement and developing your team. Now, you are looking to add an associate veterinarian to your thriving team. You are looking for the mythical associate veterinarian of your dreams.

You are sure that this fairy tale creature is out there somewhere, but the elusive associate can be hard to track down. This person fits in well with your team, wants to work any schedule that you put them into, will work for any salary offered, loves emergency calls and overrun schedules. They will say: “Triple book me! Yes please! Want to go on vacation? Leave me your practice, I don’t mind at all. Stay away as long as you need. In fact, because I am new, I will take all the call because you seem tired and I need to work my way through the hazing process of emergency work like you did.” They will never want to spend time with their family, get sick, have children, or have medical or family emergencies.

Does this sound like your fairytale associate? If so, I think you may be looking for a workaholic robot with artificial intelligence. This human does not exist. If someone feels that this fits their description, please, take a break and reconnect with someone close to you outside of veterinary medicine. This type of unrealistic mindset and expectation is driving away good people from our profession. Right now, our hospitals are full, our schedules are packed, and animals are being turned away from veterinary care because there are not enough veterinarians to see patients. Our colleagues in emergency medicine are swamped every night and on the verge of mental breakdowns. We need to have a wake-up call. We need to do better for our associates, ourselves and our profession. We can do this through on-boarding, communication, and long-term planning. First, we have to find and attract the associate who is the right fit.

Before you start advertising, you need to have a clear goal of who you are searching for. What role do they need to fill? What kind of scheduling needs do you have? What will their caseload be? Even in a practice that is just “large animal” or solely “small animal,” there is variation in the scope of practice. Let’s work through a large animal practice.

• Does your large animal DVM need to be able to work on horses?
  ◆ Yes
• What type of horses?
  ◆ Ranch horses, a few 4-H animals
• What do these horse owners want?
  ◆ Vaccinations, emergency coverage, wellness exams, and floats
    □ Can this new associate do all these things?
      ◆ No, you want to retain all the dental work
• Is this work seasonal?
  ◆ Yes
    □ What portion of the work will they do? What about the rest of the year?
• Does your large animal DVM need to be able to work on cattle?
  ◆ Yes
    □ What is the scope of your cattle work?
      ◆ Beef only, cow-calf
        □ Will your associate be able to do your herd checks this fall?
          ◆ No. My clients only want me to do them. They will need to establish their own herds.

Conversely, you could say that your new associate needs to be able to see any and all patients in your practice. Are your standards of care written down? How will you maintain consistency between your exams and those of your associates? Regardless of how many years, months or days they have been in practice, your new associate will need some time to adjust to a new location, staff, charging structure and call area. There are a lot of details to consider and write down so that you have a honest description of what the job will look like.

Once you have the details of the job documented, you can begin to put together an advertisement. Highlight the important parts of the job more than the area you live in. If you state the location, then people have the ability to look up the geographical data for themselves. Please do not waste your words describing about the area rather than the job and practice itself. Another red flag is not including your contact information or email address in the ad. You should want applicants to reach out with questions and be able to view your website. The better the applicant is able to research the position, the less time you will spend interviewing the wrong person for the job. I know we are all desperate for more help right now, but hiring the wrong person is far worse than being short-handed and having to set boundaries with your clients.

Once you have someone reach out to you about your ad, I recommend sending them a fact sheet with more information about the position you are offering. At this time, having them fill out a pre-interview questionnaire will be a good fact-finding...
mission about their potential interest and fit. We send 6 ques-
tions to our potential candidates. These questions ask them
things like:

- How do you see yourself fitting into a small rural town in
  Montana? Do you have any reservations about living in a
  small town?
- Our employees live anywhere from 10 minutes away to 60
  minutes away. Sometimes winter driving can be a chal-
  lenge. Tell us about your familiarity with winter driving
  and commuting.
- We do see our own small animal and large animal emergen-
cies. The closest small animal emergency clinic is an hour
  and a half away. Are you willing to do emergency work? Tell
  us about your experience with emergency medicine.
- Teaching is an important part of our clinic culture. Tell us
  about a time that you have educated someone or a group of
  people.

Our goal is to have them think about real challenges and as-
pects of the job that may affect their overall job satisfaction be-
fore they are offered an interview. Some people may step away
at this point. That is okay. Remember, we are trying to find the
right fit for our clinic, not just a human to see patients.

Once we have results back from candidates, we remove all per-
sonal information and have our associates all rank the answers.
We then compile a composite score from all the DVM and man-
agement scores and then offer phone interviews based on the
composite scores. Once we have our top candidates from the
phone interviews, in-person interviews are offered.

During our in-person interviews, we want to make sure that the
candidate is a good fit for the scope of practice offered in the
position as well as ensure that they are a good fit with our core
values. This core value fit is very important and will greatly
determine the foundation of any future working relationship.
If teaching is important to us and this candidate is petrified of
Teaching or cannot communicate well with clients, they will not
last long in our practice. Not only is this disappointing for both
the practice and candidate, but it is extremely costly when you
consider training time, missed charges and the inefficiencies
that happen over the first few months.

Once you have offered a position to the right candidate and they
accept, your work is not complete. This is the time to dive into
questioning and planning mode. Find out what they need to
make their transition to your team successful. Ask open ended
questions like: “What does support look like to you?” If you
haven’t discussed mentorship and what it means to both of you
by now, please start. Create an on-boarding plan that provides
some structure for their first few weeks. Trust me, throwing
associates into appointments on Day 1 backfires every time…I
have made this mistake plenty of times.

Now Day 1 of our on-boarding schedule for all staff is pretty
boring. We want to have time to review our handbook guide-
lines, office policy, payroll and computer software. No cases are
worked up on Day 1. We review safety and core values. It’s a lot
of computer time mixed in with a few scavenger hunts designed
to familiarize the person with the clinic.

The rest of the first week is designed to pair the new associate
with each DVM in the practice so that they can learn about sur-
gery flow, appointment flow, charging structures and charting
expectations. Each person had a targeted learning goal to teach
on their day. This worked well to ensure that we were hitting
the highlights of each area of our practice.

Week 2 kicked off independent appointments. However, this
does not mean that they are regularly scheduled. We scheduled
3 appointments in the morning and 3 in the afternoon so that
there was plenty of time to work through charges, client com-
munication and records. We also paired our most experienced
technicians with our new associate so that they could answer
questions from a technician standpoint and aid with appoint-
ment flow and control. Throughout the first 2 weeks, there was
a constant line of communication about what was going well,
what questions were coming up, and how we could best support
our new hire.

Week 3 commenced with extended appointment times, based
on the comfort level of our new DVM. We had a scheduling
 guideline for our support staff that outlines how much time
each DVM needs for each type of appointment. Our new DVM
helped us develop her timelines prior to starting. We need to
give our new hires the time to do each appointment well. Putting
them into high-cortisol situations every day and not allowing
them to feel successful is the quickest way to help them implode.
I know a lot of us were placed in these situations and survived,
but is that really a badge of honor? I think it may more likely be a
badge of trauma. It’s time to break the cycle. Not because anyone
is weak, but because if we know better, we can do better.

At this point, how do we know how on boarding is going for our
new hire? We ask them. Schedule time for regular check-ins. Be
available when they take their first call shifts (if you have call
shifts). Pair them with experienced staff members so that you
can set them up for success. And please stop giving all the holi-
days and call shifts to the new team member. Again, badge of
honor or badge of trauma? Be available after hours if they need
you. We talk to our new associate and tell them who is most
available and plan to have someone from our team who is able
to respond in person if needed. Give them the support that they
need, not the support that you need.

Communication is vital throughout any employment relation-
ship. As an employer, you need to be willing to listen – even if
you don’t like what you are hearing. When we hit roadblocks
and periods of high stress, long call days, etc. we sit down with
our associates and ask them what they need. Sometimes it is as
simple as blocking off a few hours in the morning to catch up on
charts and client phone calls. Sometimes, there is something
bigger going on at home and they need a day off to recharge.
When the call schedule has been a stressor, we made a list of
everyone’s pros and cons and adjusted a schedule to give each
person what they needed most. All these things are doable and
lend themselves to employee satisfaction and retention.

Big life events are also important to have open communication
about. I am fortunate to know as early as possible when my
associates have been pregnant. Why? Because we have a high
level of trust and they know that the more time I have to plan
for maternity leaves and potential changes with return to work,
the better. I ask them to tell me as soon as they are comfort-
able so that I can support them and keep them safe. We have
to be more supportive of working mothers. Why? Not only is it
illegal to discriminate, it is also the right thing to do. Wouldn’t
it be better to modify a schedule than to completely lose an as-

strate? I’m not advocating letting someone show up randomly
throughout the day or call off incessantly. Rather, if there is a
way to modify a schedule to allow someone to show up to work
as their best, isn’t that worth exploring?
Aside from big life events, we also found that it was very helpful to set up mentor meetings where I would go have coffee or breakfast once a month with our newest associate. They bring tough cases, worries, or types of cases that they would like to review. This has been invaluable to both of us as we can talk through set up of equipment, record keeping, charting, etc. and answer any question whether related to clinic functions or medicine. Whatever you decide to do, please choose something new that you can do to support your new associate.

Think back to when you first joined your practice. Was it awesome? If so, keep doing those things. If it was less than ideal, improve upon your experience. Open communication and respecting boundaries on both sides goes a long way toward long term satisfaction. Keep talking about goals and long-term planning even after your employees have been on your team for a long time. Make sure that you are still fostering an environment for growth. Get creative with CE budgets and planning to help people learn new skills. The more we allow for growth, the more satisfied we will all be.

We all worked tirelessly to join this profession because of our love for animals. However, we cannot care for the animals without caring for the humans – those on our teams as well as our clients. Our university colleagues keep asking themselves what they can do better to recruit veterinarians who will stay in the profession. I do not think this is their job. Their job is to recruit people who will be good veterinarians: compassionate, bright, innovative, good clinicians. Our job as employers and colleagues is to create an environment that retains these bright, compassionate humans. We need to integrate them into a role in our profession that they can grow and succeed within. Let’s on-board better, train better and create roles where people can grow and succeed.