Productivity

The most effective evaluation of a practice’s overall productivity is the utilization of its physical capacity. An obstetrician’s schedule has some unique considerations due to the unpredictability of obstetric events. The traditional model where each physician sees and delivers his or her own patients is becoming less acceptable to both patients and physicians. The ideal obstetric physician-staffing model includes a hospitalist who covers labor and delivery, which allows physicians in the office to run on time. A hybrid between the traditional model and the ideal model, using a full-time hospitalist who never comes to the office, can maximize physician and patient satisfaction. Groups who use the hybrid model have reported significant improvements in physician, staff, and patient satisfaction, higher provider retention, reduction in overtime pay for clinic staff covering clinic days that are running late, and no decrease in productivity.

Key tips:

• The hybrid model uses one or more of the physician group’s own physicians to act as a hospitalist one day per week, balancing the obstetrician’s desire to perform deliveries and serve in the hospital, the patient’s desire to be delivered by a physician with whom she is familiar, and the realities of running the office efficiently

• A typical office scheduling template places patient appointments in 15-minute intervals, with the ability to double book to allow approximately five patients per hour

• As staffing allows, patient and physician satisfaction may be greatly improved by extending office hours

• Dedicated time for non-billable work and time off post-call should be scheduled into the provider’s calendar

• Efficiently designed space is necessary for optimal time utilization

• Each team member should work at the top of his or her license

• Technology, including an electronic medical record, can optimize time utilization

There is no greater honor than supporting a woman during pregnancy and childbirth. It can be a time wrought with anxiety, but also great joy. To ensure that patients receive the highest quality of care and service, HCA Physician Services Group (PSG) developed a playbook that outlines best-documented practices across a variety of operational metrics.

The proceeding content is a snapshot of the key insights housed within the playbook.
Growth

A typical obstetrician’s practice will mature through a several-year growth period followed by a long period of stability and often a period of intentional reduction in obstetric numbers as a larger gynecologic patient base develops. Since physicians generally prefer to see their own established patients when those patients are pregnant, it may become appropriate for an individual physician to stop accepting new patients or transfers and funnel them to newer physicians. This, in turn, fosters the growth of newer physician practices.

Key tips:

• Depending on the age and mix of providers in different stages of this continuum, carefully planned strategies should be developed to maximize efficiency, revenue, and provider satisfaction throughout the provider practice life span

• For those physicians in the middle or “stable” phase of their obstetrics career, it is helpful for the group to establish an ideal number of deliveries per physician and to formulate strategies to make these numbers as even as possible between physicians

• Carefully studying the obstetrics calendar and noting trends will help to establish the best time to make important business decisions

• Optimal use of a patient portal and communication platforms can be effective in maximizing patient satisfaction and driving practice growth

Service

One of the most unique aspects of an obstetrics practice is the age of the patient population, ranging from late teens to early 40s. There is an inherent challenge in meeting the changing demands of this age group. And, because most referrals to an obstetrics practice occur by word-of-mouth, it is vital that a practice has a customer-service delivery program that includes establishing expectations of the staff, a survey or feedback mechanism, and a process for making changes based on patient feedback.

Key tips:

• The first point of contact with the patient at the time of scheduling offers an important opportunity to educate the patient about the practice and ensure that the patient and practice are a good fit

• Once the patient has established a relationship with the practice, maximizing opportunities to create an exceptional patient experience should be the overarching practice goal

• It is important that a practice’s culture fosters effective communication between staff and providers, particularly as it relates to each patient’s specific circumstances

• All staff should be trained on service recovery

• Staff should rapidly address negative feedback or issues identified within patient satisfaction surveys

• Websites should be easy to use and easy to find

• Managing social media and public information requires both proactive and reactive strategies

• Many practices implement a comprehensive digital marketing strategy to complement traditional marketing efforts: pay-per-click (PPC) and search engine optimization (SEO) are examples