

Practice Management

Recognizing Employee Disengagement and Taking Steps to Re-engage

Urgent message: Employee disengagement is pandemic in the American workplace. At urgent care centers, operators have to work especially hard to keep frontline staff members motivated. Re-engaging employees starts with a strong management culture committed to establishing affinity with employees and ensuring that systems and processes support day-to-day operations.

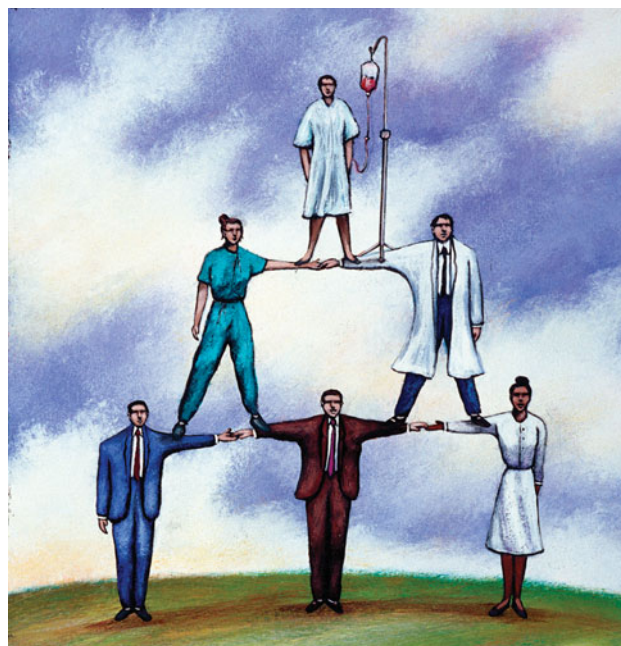
ALAN A. AYERS, MBA, MACC

For many urgent care operators—clinically adept physician-owners who are likely green as entrepreneurs—it can be sobering to realize just how many hats they must wear in support of a thriving clinic. They have to be

- **Aggressive and opportunistic marketers** committed to driving patient volume through a variety of paid and grassroots tactics
- **Gracious, customer-oriented hosts** charged with ensuring that patients feel like welcome guests whose patronage is appreciated
- **Charismatic leaders and managers of people**—in particular, the kind of diverse clinical staff necessary to form an effective urgent care team

Despite their lack of entrepreneurial training, physician-owners do seem to at least recognize the importance of quickly learning basic marketing and customer-

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service concepts for attracting and retaining patients. What they are often painfully slow to realize, however, is how critically important a firm grasp of workplace culture and leadership principles is to a center's long-term

success. Because regardless of patient volumes, a rudderless center with a wayward, fractious, and dysfunctional work culture inevitably results in a disengaged staff. Unchecked employee can bring an urgent care center to its proverbial knees.

Employee Disengagement

Employee disengagement is an enormous problem in the United States of America, with renowned polling company Gallup asserting that 70% of America's workforce is either unengaged or actively disengaged. Translated into dollars, the total economic cost of a vastly disengaged national workforce is estimated to be *\$550 billion* annually in terms of lost productivity.¹ That comes out to about \$3,400 of lost value for every \$10,000 of salary paid. Staggering figures indeed, but they still leave a somewhat cloudy picture. So what is the face of disengagement, then? Human resource experts and workplace psychologists are in consensus regarding these common traits:

- Subpar productivity (especially in comparison to historic benchmarks)

- Shoddy, mistake-prone work
- Frequent tardiness and absenteeism
- Aloof, disinterested, and nonexistent communication (with colleagues, superiors, and customers)
- Noncompliance with internal policies and external regulations (contributing to mistakes and legal liability)
- Incessant complaining
- Excessive gossip (especially malicious)
- Curt and rude behavior toward customers
- Excuse-making
- Shunning of accountability
- Listless, unenthusiastic
- Irresponsible conduct
- Lack of initiative

In short, unengaged employees lack energy and passion toward their jobs and are content to sleepwalk through their days and simply collect a paycheck. Still, those types are at least an improvement over *actively disengaged* employees, because those workers are not only

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unhappy but are even working willfully to undermine the company and the efforts of their more engaged coworkers.

Causes of Employee Disengagement

So what is causing the disengagement of more than two-thirds of America's workforce? Although there can be numerous factors depending on the specific profession and/or company, here are 13 commonly cited causes:

- **Ineffective or problematic manager:** Engagement experts of every stripe cite bad managers or bad direct supervisors as by far the number 1 cause of employee disengagement.
- **Emotional labor:** Having to constantly feign a pleasant, upbeat demeanor, which is something that especially customer-facing—or frontline—employees must do, is said to be engaging in emotional labor.
- **Repetitive work:** Monotonous work devoid of stimulation, variety, or challenge
- **Unclear expectations:** Employees are not sure exactly what is expected from them.
- **Lack of recognition:** Employees are never recognized for their efforts or accomplishments.
- **Poor communication:** Managers do not keep employees in the loop in regard to important company happenings. Managers also talk down to employees in front of coworkers and customers.
- **Insufficient onboarding:** Also known as organization socialization—when training or orientation resources are lacking or inadequate
- **Poor work relationships:** Friction, enmity, disagreement, and conflict with coworkers and managers
- **Broken promises:** When managers promises problem resolution or perks such as raises and promotions that do not actually come to fruition
- **Unheard opinions and suggestions:** According to engagement experts, ignoring employee opinions and suggestions is a top cause of employee disengagement
- **Workplace stress:** Fast-paced, hectic, and chaotic work environments laden with unrelenting mental and physical demands
- **Personal life stress:** Marital, health, financial, and child-care concerns that leave an employee preoccupied and unfocused during working hours
- **System and process issues:** Technology, systems, processes, and procedures that are error-prone, out-



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Table 1. Financial Consequences of Employee Disengagement	
Engagement Level	Return on Salary (%)
Fully engaged	120
Engaged	100
Somewhat engaged	80
Disengaged	60
Data from Employee engagement [Internet]. Albertson, NY: Employer Assistance and Resource Network; 2014 [cited 2015 March 2]. Available from: http://askearn.org/refdesk/Diversity_Goals/Engagement	

dated, or poorly configured (resulting in an inordinate amount of time spent correcting errors)

Although a few of these factors are simply part of the job sometimes, many are manifestations of a dysfunctional workplace culture. And culture always flows from the top.

How Employee Disengagement Affects Urgent Care

Many urgent care centers are independent, physician-led entrepreneurial practices with limited capital. They operate with slim margins, and managers work diligently to control costs and expenses. So how does a disengaged staff hurt an urgent care center's bottom line?

Table 1 breaks down the financial implications of employee engagement versus disengagement. Although physicians can be (and often are) susceptible to disengagement, for an urgent care it is the frontline staff members who are by far the most vulnerable. Urgent care managers, though strong technically and clinically, probably lack training in how to manage a team and create an engaged culture. So the frontline staff members, enduring the daily slings and arrows of patient and provider demands without a strong organizational culture to fall back on, steadily slip toward disengagement. Performance invariably suffers, and the value provided relative to their salary plummets. The trickle-down effect, obvious across many fronts, is that the center directly and indirectly loses money.

Examples of Disengagement in the Urgent Care Setting

Undoubtedly, the frontline staff is the linchpin of an urgent care center and generally comprises the front-office specialists, medical assistants, and technicians who support physicians and other providers. Here is a brief list of the areas they govern:

- Management of communication between patients and providers

- Receipt of payment for services rendered
- Control of clinic and patient documentation of every type
- Managing the tone of the patient experience
- Regulation of patient traffic flow
- Keeping management in the loop regarding important center issues

In fact, frontline staff members are so integral to the smooth functioning of an urgent care center that their performance level can literally make or break a center. Add to their clinic responsibilities the need for a keen focus on the patient experience and customer service, and it becomes obvious that they are by far a center's most valuable resource.

Clearly, an urgent care center cannot afford unengaged frontline staff members. The numbers paint a compelling picture as to why, but a closer look at the anecdotal aspect of urgent care disengagement serves to hammer the point home more succinctly.

Example 1

A registration specialist has ideas for operational improvements, but they are continually ignored, and so she is demoralized. To make matters worse, managers openly treat her position as expendable because it requires the least amount of formal education and pays the lowest salary of all positions at the urgent care center. Thus, her work becomes sloppy and error prone; she has mentally checked out.

She frequently makes careless errors in capturing accurate patient demographics, resulting in the center later receiving numerous "zero EOB" notifications, which of course indicate denied insurance claims. Afterward, the costs in time and labor to go back and correct each error will essentially cancel out the profit realized from the pertinent patient encounters. The billing function is now burdened with rework, and if the registration specialist is eventually let go or quits, the center will incur onboarding, recruiting, and training costs equal to 100% to 150% of her salary. This is just one costly instance of turnover, but there will be many more without an improved workplace culture.

Human resources consulting firm Towers Watson, in a global workplace study,² asserts that disengaged employees make *100 times* more errors than their engaged counterparts.

Example 2

A front-desk team member, disgruntled over being openly belittled by providers over several minor mis-

takes, is fed up. There is also an ongoing issue of unfulfilled promises made by providers concerning a more flexible work schedule. Hence, she is actively seeking different employment, and in the meantime she intends to undermine the urgent care center whenever possible. Typically, this involves being aloof and rude toward patients during check-in and check-out. She barely makes eye contact, and she sighs impatiently when patients ask too many questions or a registration issue arises, for example. In general, she would rather be anywhere else but work, and it shows. Additionally, she does not bother to reassure or update visibly ill and uncomfortable patients that they will be seen shortly. As the unquestioned face of the brand, this frontline employee sends a very negative message about how the center views its patients.

Of course patients will be displeased with this level of service and will not return to the center. They will also take to online review sites to chronicle their negative experiences to an audience of thousands and advise their friends and family to stay away. Not only does the urgent

care center lose future business from each aggrieved patient but also every potential patient is influenced by the negative word of mouth. The two types of losses exponentially increase the financial impact on the center to thousands of dollars in lost revenue.

There are many more disengagement examples, such as the medical assistant who is a single mother working late hours and feeling stressed because she believes she is neglecting her children, or the busy physician assistant buckling under the weight of excessive emotional labor from steady patient interactions. Regardless of the cause of disengagement, if it is left unchecked it will hurt the center's bottom line, either through greatly diminished performance or increased turnover expenses.

What Does Engagement Look Like?

An engaged employee can be defined as one who is fully absorbed by and enthusiastic about their work and so takes positive action to further the organization's reputation and interests. Fully engaged employees are

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Table 2. Engagement ROI in a Nutshell

Employee Engagement	ROI
Increases income growth	By 7 times
Improves productivity	By 18%
Improves performance (such as reduction in errors or downtime)	Equivalent to 1 extra free-of-charge employee to every 8 engaged employees
Improves customer satisfaction/engagement	3.4 times more financially effective
Increases innovation	Results in 58% of engaged employees feeling creative at work, and only 3% of less engaged
Decreases absences and improves well-being	Engaged employees take 2.69 sick days per annum compared with 6.19 sick days for disengaged employees
Increases retention	Reduction in staff turnover of 87%
Increases health and safety	Low engagement results in 62% more accidents
<small>ROI = return on investment. Data from Employee engagement: The most powerful way to create ROI. Hadlow Down, UK: Maria Paviour Company; ©2013 [cited 2015 March 2]. Available from: http://www.mariapaviour.com/userfiles/image/Engagement%20ROI%20with%20MPC.pdf</small>	

extremely powerful allies to a company, as evidenced by the 120% return on salary they provide, according to the talent management company Human Capital Institute.³ **Table 2** further clarifies the workforce-related return on investment (ROI) of time, effort, and capital investment in engagement.

An engaged urgent care team exudes an energy that is irresistible to patients and staff members alike. The personalities of the providers and staff members are magnetic and empathetic, and everyone moves with a purpose. The entire team buys into the center's vision, is enthusiastic about its roles, and makes extra effort without a second thought. A stellar team like this—strongly united in working toward patient satisfaction and clinic success—is possible only when there is a workplace culture in place deliberately crafted to foster a supportive, uplifting work environment.

To illustrate the point further, **Table 3** compares the typical attitudes and behaviors of an engaged versus unengaged urgent care team.

Creating an Engaged Culture

With the causes and symptoms of disengagement now clearly identified, the next step is to recapture and re-engage disengaged staff members. However, this can begin only when there is an understanding that

- The existing workplace culture must be thoroughly examined and, if necessary, overhauled
- It is necessary to put demonstrable time, effort, and capital ROI toward creating an engaged culture
- Culture always flows down from the standards set by clinic managers

There are 3 key elements to creating an engaged urgent care team:

- Implementing the drivers of employee engagement
- Giving managers the keys to being good leaders
- Creating affinity with frontline staff members

Implementing the Drivers of Employee Engagement

Human resource specialists, workplace psychologists, and engagement experts are in nearly unanimous agreement on these drivers of employee engagement:

- **Expectations:** When expectations are unclear or fuzzy, employees focus more on surviving than on making a meaningful contribution to the company. By contrast, when employees know exactly what is expected of them (along with having the proper resources to meet those expectations), their sense of shared accountability is enhanced, which is crucial for long-term engagement.
- **Regular feedback:** Employees love feedback. In fact, they crave it, which is why the annual performance review is so outdated. Employees want to know *right now* where they stand and where they are going, and frequent feedback accomplishes this.
- **Advancement opportunities:** For employees to be fully engaged, they must feel like they have an opportunity to grow and advance within an organization.
- **Meaning:** To be truly engaged, people must feel like their job has meaning, is important, and is making a larger impact on others' lives.
- **Recognition:** The employee-engagement specialists of RedBalloon maintain that a whopping 77% of employees are starved for recognition. They claim that the desire for recognition is so strong is that many employees will forgo a cash bonus for a heartfelt "Thank you—you did a wonderful job"

from management. Additionally, awards and incentives are also appreciated by employees.

- **Relationships:** Employees need good working relationships with their colleagues and supervisors for sustainable engagement.
- **Autonomy:** Companies want results and accountability from their employees, and employees want empowerment and freedom to do their jobs in the ways that they know is most effective. Autonomy is what bridges accountability and empowerment.
- **Soliciting and then implementing employee opinions and suggestions:** Many engagement specialists place this driver atop the list of factors for engaging employees. This technique can include inviting employees to participate in meetings and brainstorming sessions, letting them lead a task force, and sincerely asking, "What do you think about this?"

Giving Managers the Keys to Being Good Leaders

Gallup Chief Executive Officer Jim Clifton is known for

stating that the single most important decision a company can make is who it names as a manager. He goes on to say that if a bad manager is put in place, there is absolutely nothing else that can offset the impending damage that this manager will wreak.

Although most physician-owners simply have not had the management training necessary to build an engaged culture, they can learn and adhere to the basic principles of good management required to lay the foundation for an engaged culture. **Table 4**, based on data gleaned from Google's management initiative Project Oxygen, highlights the qualities of a good manager.

Creating Affinity with Frontline Staff

A big part of being a good urgent care leader is developing a genuine connection with your staff members. This is relatively easy to achieve in smaller organizations, but larger, more departmentalized organizations will require more vigilance. Thus, the suggestions in **Table 5** will help leadership create an emotional connection with their staff members.



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Table 3. Unengaged Versus Engaged Urgent Care Staff Members

Unengaged: Hired Help (“It’s just a job”)	Engaged: Business Partners (“I love my job”)
<ul style="list-style-type: none"> • Negative and bored with their jobs—walk around like zombies, looking forward to quitting time 	<ul style="list-style-type: none"> • Enthusiastic and interested in their jobs—are happy and it shows, and they look forward to each new day
<ul style="list-style-type: none"> • Speak negatively about the center to others and tell friends and family about its shortcomings 	<ul style="list-style-type: none"> • Take pride in telling others where they work and encourage friends and family to use the center
<ul style="list-style-type: none"> • Blame others for their lack of performance and/or failure of the center 	<ul style="list-style-type: none"> • Feel accountable for their performance and the success of the center
<ul style="list-style-type: none"> • Motivated by lower-order needs to provide food, shelter, and other necessities or by fear of losing their jobs or of fear of criticism, punishment, or embarrassment 	<ul style="list-style-type: none"> • Motivation comes from within and from higher-order needs such as esteem and self-actualization
<ul style="list-style-type: none"> • Usually end up being rewarded twice for doing the basics of their job 	<ul style="list-style-type: none"> • Eager to go above and beyond for benefits other than money
<ul style="list-style-type: none"> • Timid with poor self-image—discouraging and bringing down everyone around them 	<ul style="list-style-type: none"> • Confident with high self-esteem—encouraging and building up everyone around them
<ul style="list-style-type: none"> • Not sure what they are supposed to do and/or lack the training, skills, or tools to do their job well—feel like a small part of a big machine 	<ul style="list-style-type: none"> • Know exactly what is expected of them, how their job impacts others, and how their job contributes to the center’s bottom line
<ul style="list-style-type: none"> • Do not feel the need to do anything other than the minimum required for their role; work is sloppy and error-prone 	<ul style="list-style-type: none"> • Eager to do anything they can—or find the best person who can—to help patients and drive the business; conscientious and detail-oriented
<ul style="list-style-type: none"> • Never challenge the status quo, do everything by the book or are restricted by policies and procedures 	<ul style="list-style-type: none"> • Encouraged to find new and creative ways to do their jobs, resulting in improved efficiency and smoother operations
<ul style="list-style-type: none"> • Restricted by their title or position—feel powerless to do anything beyond their narrow area of responsibility; “not my job” or “not my problem” 	<ul style="list-style-type: none"> • Able to work across functions or roles—free to exercise good judgment and common sense in solving problems; “it is my job and I will make it my problem”
<ul style="list-style-type: none"> • Collaborates with colleagues in an adversarial “us versus them” stance against patients and/or management 	<ul style="list-style-type: none"> • Collaborates with colleagues to ensure efficient and smooth patient flow and with management to improve the overall operation.
<ul style="list-style-type: none"> • Managers are distrustful of employees and spend time micromanaging, look over employee shoulders, and make a big deal out of mistakes 	<ul style="list-style-type: none"> • Managers have delegated responsibility to employees and spend time in developing and providing them the resources they need and in celebrating their successes
<ul style="list-style-type: none"> • Disinterested in the center and are secretly undermining its future success—do not plan to be with the center long-term 	<ul style="list-style-type: none"> • Interested in the center—how it started, how it grew, and where it is headed—and vested in seeing it succeed
<ul style="list-style-type: none"> • Employees are responsible for actions but managers are responsible for results 	<ul style="list-style-type: none"> • Employees are responsible for actions, and the entire team is responsible for results
<ul style="list-style-type: none"> • Unaware of what’s going on with the business and furthermore, doesn’t care. 	<ul style="list-style-type: none"> • Aware of how the business is doing—including financial metrics like profitability and cash flow
<ul style="list-style-type: none"> • Pays little attention to the industry and/or believes the “grass is greener” at competitors. 	<ul style="list-style-type: none"> • Understand the competition and evaluate what competitors are doing well and what can be learned from them to woo patients away

From Ayers A. Five activities for cultivating a motivated center team. Newsletter of the Urgent Care Association of America. 2010 July 9.

Addressing Broken Processes

Processes, technology, and systems that are ineffective, cumbersome, and error-prone are also major contribu-

tors to employee disengagement. In urgent care, a staff that has to spend more time on fixing problems, malfunctions, and errors than on providing patient service

Table 4. Qualities of a Good Manager

- 1. Is a good coach:** This was the number 1 factor, after all of the data were crunched, that made a good boss. Being a good coach is key to employees.
- 2. Empowers the team:** This one is obvious and well known, but data showed that empowering the team is a great characteristic of a good manager.
- 3. Treats employees like people:** Getting to know your employees as humans and showing an interest in their personal lives and personal well-being is an important characteristic of a good boss.
- 4. Is results-oriented:** Focus on results and help your team achieve their goals by removing any obstacle.
- 5. Is a good listener:** Listen to your employees and encourage open and free dialogue.
- 6. Encourages career development:** Make your employees aware of how they can advance their careers.
- 7. Has a clear vision:** Help your team understand the vision behind what you're doing.

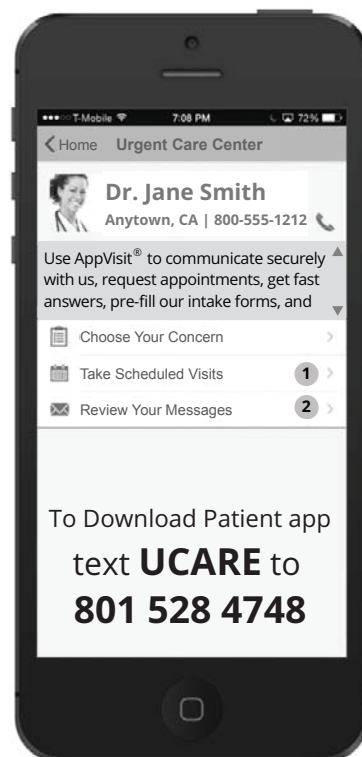
Data from Bryant A. Google's quest to build a better boss. *New York Times*. 2011 March 12. Available from: <http://www.nytimes.com/2011/03/13/business/13hire.html>

will, over time, become demoralized and frustrated. Add to that the patient vitriol related to resulting service failures that customer-facing team members must deal with, and work can morph into a existence straight out of the 1993 movie *Groundhog Day*. Most people who take health-care jobs truly want to serve people, but spending a significant portion of each day battling angry patients over service failures can wear anyone down. That is one reason many frontline staff members are looking to get out of urgent care and into what they perceive as less-stressful health-care practices like primary-care offices.

The difficulty with fixing systemic problems such as these, however, is that they generally involve an expenditure of investment capital, both for analyses done by consultants and for the purchase of updated technology and computer systems. Because many smaller centers may be struggling financially already, the investment capital necessary is likely unavailable.

One possible solution is to place a focus on workplace culture improvements, which if implemented wholeheartedly will indirectly improve the clinic's bottom line. Recall that engagement has a proven, demonstrable ROI, and decreased rates of turnover, onboarding, and error save the center money. Couple that with the increase in happy patients being served by a happier care team, and revenues via subsequent patient volume increases should see an appreciable spike. Clinic revenues should then allow for enough capital investment to make incremental process improvements, and the entire operation will run more smoothly. Eventually, technology like online preregistration, online payment, online medical records, and patient self-scheduling becomes affordable for the center, which will free up staff members to direct even more of their time and energy toward patient care.

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Table 5. Suggestions for Establishing Affinity with Frontline Staff Members

- Know and use the first name of every staff member.
- Make eye contact with staff members and acknowledge them by name when passing
- Smile and be happy to see staff members. Ask how their day is going or how their weekend was.
- When choosing between helping an employee and finishing a report, choose to help the employee.
- When choosing between answering an employee's question and socializing with a superior, choose the employee.
- When meeting with staff members, give your full attention and do not rush. You are investing in your staff.
- Protect staff members from abuse from providers, patients, vendors, injuries, and overwork at every turn.
- Get to know employees and the people around them (e.g., family and children). Remember to ask about what you know is important to your staff members, but ask for permission before asking a personal question.
- Respect personal space and working territory. Keep the staff restroom and breakroom clean and supplied.
- Treat staff members equally and courteously. Stay person-centered, not task centered.
- Listen when staff members speak. Do not discount what they say or how they feel, and never speak down to them or correct them in front of others.
- Know staff members' assigned schedules. Invite the return of staff members after maternity or paternity leave with encouragement and flexible schedules.
- Jump in to help with any task when needed in a crisis or when the center is short-staffed (to be differentiated from solving others' problems or taking over because no one else knows how or does it well enough).
- Allow and expect staff members to solve problems, allow them to improve processes, and allow them to suggest solutions.
- Recognize staff members' achievements—both individually and collectively—through verbal recognition and tangible rewards that are visible to everyone associated with the center. Make staff look good in front of others (e.g., other staff, their families, and patients).
- Surprise staff members by providing lunch on busy days, giving spot bonuses, or providing some other unexpected recognition.

From Ayers A. Five activities for cultivating a motivated center team. Newsletter of the Urgent Care Association of America. 2010 July 9.

Conclusion

“Heart, spirit, mind, and hands”⁴—that is true engagement. If organizations genuinely want it from their employees, a long-overdue paradigm shift must take place. The rigid hierarchal structures of yesterday's workplace that promised little more than salary and benefits must give way to a more collaborative, enriching employment culture, one where employees go from replaceable cogs in a big machine, to indispensable business partners respected and cherished by managers. The numbers are conclusive: Corporations are hemorrhaging billions because they fail to engage their employees, while at the same time they lose their best and brightest to the competition.

An urgent care center, with its late hours, irregular work pace, need for precision and accuracy, and heavy customer/patient emphasis, can become the ideal environment for disengagement to take root and fester. Managerially inexperienced physician-owners might be unwittingly playing a role in disengaging the very staff members whose good performance their clinic depends on. Hence, providers must come to realize that their staff members need a specifically crafted workplace culture that fosters connection on all levels, places respect for the individual at the forefront, and recognizes and celebrates hard work. Moreover, they need a culture where communication and feedback are encouraged, autonomy is supported, and patient service is emphasized in a united effort.

In sum, employee re-engagement is not simply a nice thing to do; its influence profoundly affects the bottom line. When you treat your staff members with the same reverence as you do your patients, your urgent care center will know engagement—and shortly thereafter, it will know sustained success. ■

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