

BRINGING OUT YOUR BEST A MENTORING ROAD MAP

WEEK ONE—Orientation and Onboarding

	<u>PRACTICE</u>		<u>PERSONAL</u>
1.	Getting to know the team, the practice, the systems, etc.	A.	Welcome to the practice staff meeting
2.	Understand practices vision, mission, and core values and culture	B.	Developing Respect and trust
3.	Share Standards of Care	C.	Weekly check in with mentoring team (WHO?)-- Schedule meeting with all three mentors and the mentee: WHEN, WHAT TIME, WHERE
4.	Assign Technician as right-hand person (try to ensure they are scheduled concurrently for the first three months)	D.	Focus on professionalism in appearance and communication
5.	Shadow a doctor (WHO?) when not going through the onboarding and orientation	E.	Apply for DEA License
6.	Review pharmacy for dispensing medications	F.	Ensure state license(s) are in effect
7.	Review all OTC products	G.	Ensure malpractice insurance is in effect
8.	Review treatment area for injectable medications	H.	Uniforms, name badges, etc. Understand dress code
9.	Learn anesthetic protocols and monitoring for all ages, breeds, conditions, etc.	I.	Make sure all initial paperwork, W2, I9, etc. is complete. Including reading and signing off on Employee Policy Manual
10.	Learn pain management protocols	J.	Memberships—get signed up for all relevant memberships.
11.	Learn how to enter medical records	K.	Practice Information Management Training
12.	HELP—where to go for help	L.	Know and understand when are pay periods and how you will be paid.
13.	RESOURCES—learn where learning libraries and other medical reference resources are located.		
14.	The CLIENT EXPERIENCE-what it is from start to finish		

Details for Week One PRACTICE

1. Getting to Know the Practice
A detailed walk through of the physical plant.
Identify a doctor's work area and place to put personal belongings
Discuss best places to park
Point out restrooms
2. Vision Mission Values Culture
The practice's mission statement, vision statement and core values should be discussed with the practice manager and chief of staff. Corporate vision, mission and values should be discussed as well. A written or digital version MUST be shared.
3. Standards of Care
Provide all written standards of care—wellness and sickness for review and discussion. Any 'unwritten' standards, now is a good time to write them down.
4. Assign Technician
The new doctor should be assigned a credentialed veterinary technician that will be their right-hand person every day. Optimally, this person works the same schedule, or you may need two of them. The goal here is to help the new doctor to learn WHERE everything is; HOW protocols and procedures operate in the different parts of the practice; WHO is accountable for what; WHO has what technical or practical skills. It is up to both parties to <u>grow</u> the necessary trust between each other.
5. Doctor to shadow
Identify a DOCTOR for the young associate to shadow all week. Exam rooms; surgery; treatment; etc. It is up to the DOCTOR to introduce the new associate to all clients, vendors, friends, staff, etc.
6. Review pharmacy for dispensing meds
Open the unlocked cabinets and look at the drugs on the shelves. Do you know them? What are they used for? Do you know the dosages? What drugs that you are used to using are not there. Reserve controlled substances or other locked drugs for another time. Take notes and ask questions. Make a list of drugs you would 'potentially' like to see. And also learn what products are in inventory that are equivalent.
7. Review all OTC products
Shampoos, nutraceuticals, etc. Do you know them? What are they used for? Do you know what is appropriate and when? Take notes and ask questions
8. Review treatment area for injectable meds
Same approach as for prescription meds
9. Anesthetic protocols and monitoring
Watch anesthetic procedures from start to finish with the shadow doctor and technicians. What is different from what you learned or have used before. Take notes ask questions.
10. Pain management protocols

Talk to shadow DOCTOR about pain medication protocols. What is used and when.
11. Entering medical records, creating estimates, invoice
Working with shadow DOCTOR and Technician, observe the practice information management software. If there is a formal training program for the staff, new DVM should go through it. If not, observe, take notes. Get password for access.
12. Where to go for help
There are internal resources for assistance in inventory, IT, internal medicine cases, surgeries, local specialist, client issues, etc. Provide a list of people to reach out to, email, cell phone, when a problem arises. Make appropriate introductions as well.
13. Resources
Books, CDs, DVDs, online educational resources. Know where the clinical library is located and how to access information that might be needed
14. Client Experience
There is a series of steps that every client goes through from initial contact with the hospital to follow up communications and care. A new DOCTOR may influence many of these steps. Knowing what the client experience looks like and how it may be impacted positively and negatively is imperative in truly providing world class service AND care.

Details for Week One

PERSONAL

A. STAFF MEETING—time to introduce the new person and each other
SCHEDULE a staff meeting to introduce the new doctor to the team. And vice versa
B. DEVELOPING RESPECT AND TRUST
SCHEDULE the new doctor to spend a few hours in each non-clinical area of the hospital. Observe kennels and animal handling. Observe client service and client handling. Observe manager and business handling. This could be one full day during the first week. The new DOCTOR must earn respect and keep their ego in check
C. Check up from the neck up
Meeting with all mentoring team to discuss the first week. Should be done the same day each week. A series of the same or similar questions should be asked. AND there should be plenty of time for the new DOCTOR to ask questions.
D. Professionalism
Dress code for exams and front of practice. Dress code for treatment and room and surgery. How to address staff and doctors. How to introduce oneself to clients; vendors; etc. Terminology NOT to use in the practice. Use of curse words. Social media rules and regulations.
E. Apply for DEA license
Practice manager or shadow DOCTOR help the new DVM apply for DEA license
F. Ensure state license(s) are in effect
Practice manager to frame and post state license with other DVMs
G. Ensure malpractice insurance is in effect
Make sure that the young DVM has their own professional liability insurance, and it is in force
H. Name Badge/Uniforms
a. Order name badge(s)
b. Order uniforms if there is one
c. What is the dress code for exam rooms; treatment area; surgery; etc.
I. Paperwork
Meet with manager and corporate team to ensure all required paperwork is complete.
J. Memberships
Help get the new DOCTOR signed up for relevant memberships including VIN, Plumbs, etc.
K. PIMS Training
In addition to invoicing and estimates, it is important for all staff to understand how to access and use the PIMS. Whether via virtual recordings or live training, ensure the new DOCTOR is PIMS capable.
L. Know and understand when pay periods are and how you will be paid.
Arrange direct deposit or understand when you will receive a check. If there is a production component, how is that paid.

TASK CHECKLIST AND STATUS REVIEW FOR WEEK ONE

X= Complete. *= started but not proficient O=carryover, not started

PRACTICE		PERSONAL	
Task	Status	Task	Status
Getting to know the team, the practice, the systems, etc.		Welcome to the practice staff meeting	
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Share Standards of Care		Weekly check in with mentoring team (WHO?) -- Schedule meeting with all three mentors and the mentee: WHEN, WHAT TIME, WHERE	
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Learn anesthetic protocols and monitoring for all ages, breeds, conditions, etc.		Make sure all initial paperwork, W2, I9, etc. is complete Employee policy manual	
Learn pain management protocols		Memberships—get signed up for all relevant memberships.	
Learn how to enter medical records		Practice Information Management Training	
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The CLIENT EXPERIENCE-what it is from start to finish			

Sample questions to ask at Mentoring Meetings

COMPLETED: What have you accomplished this week that you feel competent in?

CARRYOVER: What do you still feel you could use some mentoring with?

ADD: is there anything you want to take on next week besides what is already scheduled?

Is there anything we could have done better from a mentoring standpoint this week?

How do you feel about yourself so far into the program?

NOTES ON WEEK ONE:

A large empty rectangular box intended for taking notes on the first week of the program.