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## BETTER METHODS FOR HIRING STAFF WITH DR. MIKE NEAL

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### **David Mandell:**

Hello, this is David Mandell, host of the podcast. Thanks for being with us today. We have an interesting guest and I think a subject that is one that all physicians, practice owners, and even those who don't own their practice, but at some point might become more entrepreneurial and have to face hiring somebody. If that becomes in front of, or on a to-do list for anybody listening to this or watching, this is an important subject today. So before we formally welcome to the program, let me tell you about Michael Neal. Dr. Neal is a practicing optometrist alongside his wife, Dr. Amy. Together they founded Lakeside Vision in Hawley, Pennsylvania, where they have practiced for 20 years. Their experience in making hiring mistakes repeatedly led Mike to launch Build My Team, which for those of you seeing his background here on Zoom, he's got, and we'll talk all about that in a minute, which helps medical practices with staffing challenges. Mike's a graduate of the University of Alberta and the Pennsylvania College of Optometry. And with that, Mike, welcome to the program.

### **Dr. Mike Neal:**

Thank you so much, David. Thanks for having me. I'm looking forward to our conversation today.

### **David Mandell:**

Excellent. Yeah, before we came on, we were just talking a little about, it's freezing cold as we record this and we're happy to be inside and recording a podcast today, so that's good for both of us. So I want to start with your story. It is kind of unique. There aren't that many docs of any kind of practice who find something, although I will say with some of the entrepreneurs that we've had on and folks who guide entrepreneurs, this is often how it happens. They uncover an issue or they learn how to solve an issue and they say, "Hey, I'm not the only one who's got this problem, and



maybe there is actually a business out there in the marketplace." So I want to start with that first and then we'll start to talk about different hiring tips and challenges and things to be aware of all of that. So let's start with you. You're an optometrist, sounds like your wife is also. Before you got into hiring issues, just tell us about the practice, where you're at and what you guys have done for a long time.

**Dr. Mike Neal:**

Absolutely. So I think the first thing I wanted to mention is why an optometrist? Why are you having an optometrist on the program when you deal with so many physicians and otherwise? Pretty much every story I'm going to tell today, I think that anybody in private practice who wants to be in private practice can relate to and hopefully we can have a couple good laughs over all of this as well. Because some of this stuff, all you can do is laugh. So that's kind of where I'm coming from with this discussion. Now to get things started, I've been in private practice for years in... I graduated in 2001, so many, many moons ago. And private practice essentially the whole time with my wife. She started in... well, we graduated the same year. So we have committed every conceivable mistake that there is to make in a private practice over those years.

And the main thing that was happening early on is that we were hiring wrong. Oh, boy. So many docs that are really empathetic and that describes her to a T. When she's in an interview or when she's having any type of hiring scenario, it's very difficult to not be taken advantage of by some candidates in that particular position. And so we discovered that, discovered it the hard way. And the more empathetic and essentially the more wonderful a doc you are, I would argue that the further away from hiring you should stay because the skill set that makes you an incredible doctor is really something very challenging when you're in an HR type role.



**David Mandell:**

Yeah, that's interesting. It makes sense to me that if you sit and listen to people and can relate to them and on some kind of bond with them, it's going to be hard to evaluate them in a personal way.

**Dr. Mike Neal:**

By all means. And we see that. We saw evidence of that year after year after year. So I kind of pivoted after being in some executive coaching classes through a company called Strategic Coach. Some of you guys might've heard of them. A lot of healthcare professionals and financial folks in-

**David Mandell:**

Yeah, A lot of financial people who've been in that system that's helped them organize their business, achieve goals, all that kind of thing.

**Dr. Mike Neal:**

Yeah, exactly. And so I looked at how they were doing their hiring, because they had a very large group of people in as far as their team and their team was wonderful. Is wonderful. I mean, they're terrific folks. So I took a look at how they were hiring, also simultaneously looked at how Disney and the Four Seasons, how they were doing their hiring. And by the way, I mean, Disney gets an amazing reputation that's extremely well-deserved with regards to their hiring. But also don't forget to take a look at things like the Four Seasons. I would encourage anybody, although I don't own a piece of the stock or otherwise, but if you ever get a chance, stay at one and you, you'll have a completely different level of customer service understanding than you do now. It's remarkable. So I took a look at all of that and said, how do they deliver this level of customer service?

Like it or not, in healthcare, we are all in the customer service game, except with what we do, it's a little bit less forgiving. We have to make incredibly accurate decisions over and over again, lickety-split within health care and the penalty for being wrong



is quite high. So when I looked at how they were doing things, what was remarkable about their entire hiring process is that they did it essentially exactly backwards from how we were doing our hiring. Almost completely upside down in fact. If you imagine a pyramid, instead of starting off with resumes, they did that last. And what I mean by that is they started with assessments. Now I didn't even know if such a thing... there wasn't even... I had no idea that assessments existed for hiring people when I first started this.

And it turns out that there's a whole entire science behind this. Psychometrics is the name of it. And they can determine through different assessments what a person's good at, what they're not good at, et cetera. So we started to take a look at that, and I essentially built a system that allows our team to determine what a person's natural talents and strengths are, from using assessments. And we did so in a manner that initially it was via email, it was a disaster. A little pro-tip for everybody. If you're using email for hiring, you are going to get nowhere. It has to be done via text, unless you're in some type of corporate hiring environment where that's not allowed. But for any type of private practice, just skip straight to texting. It simply doesn't work on the email side of things.

**David Mandell:**

So actually, let me jump in there for a second because before we get, and we know we will get into tips and where you came out, I'm curious, give us maybe a story or two of how you were doing it wrong. Because I think the docs listening may say, "Oh, that's something that we were doing," or maybe give us a horror story or something that happened that was just frustrating. How are you doing it before you went down the road to understand Disney and Four Seasons? Take us back to-

**Dr. Mike Neal:**

Yeah, fair enough. So horror story number one, we were using resumes. Now everybody listening to this is scratching their head and saying, "Well, how the heck else would you do it?" That's the problem. That is the absolute core problem with



using resumes is that there really isn't much of a different way to do things. The issue with the resumes is that they are chock-full of garbage. And I say that with all due respect to the garbage people, but a resume is full of inaccurate information about the person. They're self-representing. They will have all kinds of gaps in them that don't discuss what they were doing. They are as good as the previous job that they had. And what I mean by that is if they were fantastic at the job that they had prior, they would, chances are, be still working in that position, barring transfers, things like that.

We've referred to resumes as a fictional failure file. They just basically list what people aren't good at. Nowhere on a resume will it ever tell you what the person's strengths and talents are. It's not part of what the resume discusses. The resume just talks about what they've been employed at, the timeframes, et cetera. So when you're looking at a resume, and again, prior to the assessment business, there hasn't been the ability to do this. They will not tell you what a person's good at. What they will tell you simply is their work history and that's it. And then the physician side of things, we were making all of our hiring decisions based upon a resume and an interview that was really truly not very great. And so you end up with a-

**David Mandell:**

You would get people that there was a lot of turnover or you had difficulty with one staff member with another. What were the problems that were creeping up, that kind of identified for you that there was an issue?

**Dr. Mike Neal:**

Turnover. That's the easiest way because of the count. I mean you have to actually count people. And each person you bring in and then let go costs thousands of dollars. In fact, we did a study in our practice for Build My Team that was done to simply quantify how much it costs at an absolute bare minimum to bring somebody in and fire them. It was about 4,500 bucks. That was done about three years ago, so it's obviously gone up since then. And that was the minimum dollar amount if you



could fire that person within two weeks, which has virtually never happened in the history of healthcare.

**David Mandell:**

You give people time to really... they say slow to hire, quick to fire. That's what they say, right? That's supposed to be the device, but not always easy to implement.

**Dr. Mike Neal:**

And now that you brought that up-

**David Mandell:**

You have a need, so it's like how long are you going to wait? Right?

**Dr. Mike Neal:**

Exactly.

**David Mandell:**

You need to fit the position. And then you get somebody in there, you're like, "Oh, finally I'm done with the hiring process. We got to give them a runway." Even though you might see some things that are some real clues or kind of a bad red flag early on.

**Dr. Mike Neal:**

Exactly. And what we noticed... I mean you read my mind there. The next thing was we were slow to hire and that's a massive problem. COVID came around. Now all of a sudden the entire work environment changed. I mean, not overnight, but within a matter of a couple of weeks, it just got turned upside down and on its head. And so the unemployment change and the reduction in the amount of people who actually wanted to work in the first place, so I think there's a term for that, like the workforce reduction or something along those lines. As we all know, a gazillion people just up and decided they didn't want to work anymore. And some of them didn't have to



work because they were being funded by all kinds of sources. So now you're in a position where the candidate pool decreased. If you are slowly hiring now... and by the way, I'm not talking about physicians, I'm talking about team members.

If you're slowly hiring your team members, you are not going to get A players. And this is what happened to us, and it was quite dramatic. We would have two to three interviews. It was almost a consensus was required before we brought on a team member. And those days are simply gone. That person that's looking for a job, A players in particular, they will make their decisions extremely quickly. And if as we found out, if you're not making decisions quickly, you'll simply be unable to attract that level of talent. And when I say quickly, I mean for our practice, we'll offer positions within a couple of hours after the person runs, through the Build My Team process. It's that fast. We don't wait days or weeks or otherwise because those people are gone. They've accepted another job already.

**David Mandell:**

Interesting. So, before we get into the specifics like tips or ideas for hiring, how did you, when you were running your optometry practice, come to the decision to say, "There's enough here to create a separate business, and I'm going to spend my time doing that."

**Dr. Mike Neal:**

Yeah, well, I didn't-

**David Mandell:**

That's not an easy decision to make. Not what you've been trained for. I've been doing it for decades. And a lot of the docs who listen, they probably have an instinct of there's something they have nothing to do with hiring, might not be a service, might be some kind of medical equipment or medical device, whatever, but they're in that position like, "Hey, I'm doing well, being a ex surgeon,-cardiologist, whatever. I have this business idea. I think it's been working for me." How did you get the



confidence or how did you kind of test out, is there really a market here because I'm going to be spending time doing things like having to get on a podcast with Dave Mandell rather than seeing patients. How do you know that's worth it? So give us your thinking just from an entrepreneurial point of view of how you went down that decision process. What'd you do to verify?

**Dr. Mike Neal:**

Well, boy, that's an interesting question. So, first of all, I never started this in terms of it being a company. This was done for the sole purpose of solving my problem. Mike Neal's problem only. I didn't want to solve it a little bit. I wanted to slam the door shut, nail it shut, drywall over it. So, I never had this problem again as much as technology and science and everything else could deliver for me. That essentially became, hey, a couple friends wanted me to do that for them. So, I did it for a couple of friends. A retinal surgeon initially, a dentist, all friends of mine. And next thing you know, that turned into more and more and more. And now we're in somewhere-

**David Mandell:**

With them saying, "Hey, I used to have these complaints or whatever," you know them from hockey or other things that you do. And you say, "Yeah, kind of solved that problem. I've hired good people, now they're staying around. They're good." Hey, could you help me with that? I mean, that kind of thing, that's the way-

**Dr. Mike Neal:**

Yeah, the main thing was my excitement surrounding the problems that we didn't have anymore. It's a little bit of subtraction. With BNC players, you have to have a completely different level of your guard up. You have to babysit, you have to... oh my goodness, you're now a babysitter for a good chunk of your day. With an A player, you define the outcome that you want, you give them some bonus and stretch goals, why not, to challenge the heck out. And then you get out of their way and ask them occasionally what resources they need or they're going to come to you with, "Hey, I need X, Y, Z." But you got to get out of the way. And that was a big learning





experience. And when I started talking to my friends about that, that grew to, well, we want that too. And now we're in approximately, I think it's around 40 different states with eight different healthcare professions.

And you say, well, how's an eye doctor doing all this stuff in eight different healthcare professions and how does he do all this? I'm not doing it. I have a team. I'm practicing what I preach. We've got amazing team members that are specialists in what they do and that's their job is they're A players and they take what they do and they run with it. They're solving these problems for practices because essentially... and this is one of the key critical points. My optometry practice has a front desk person and we have a biller, and we have technicians and we have scribes. Well, those positions are functionally identical to your practice, whomever is listening.

So you have a biller, you have a front desk person. You may or may not have a scribe, you have some type of technician, you can call them different names, but a doctor's assistant if you will. I don't like that term, but that's essentially the role they fill. And so each of these different roles are algorithmic. We know exactly what makes a terrific medical receptionist. We know what makes a terrific biller. It doesn't matter if you're billing eye care, dental, audiology, dermatology, plastics, none of that stuff matters. It's all very, very similar. There are some extremely specific niche, things that are specific to that particular type of practice, but those are taught.

What we stopped doing was bringing in people with experience as well. That's another critical point. Now, this really rocks the boat when I say stuff like this because you say, "Well, how else are they going to do..." The way that our build my team process works is we have identified people with natural strengths and talents for the position. So, a medical biller brings different strengths and talents on a front desk person different than an assistant. So, we can all agree on that. What we've been able to do is isolate how to find those in a person and then put them into those types of roles.

So, by doing that, we end up with people who are just naturally talented and strong in their roles. And that's what we've been able to demonstrate in our practice. And that's one of the foundational reasons why I was able to do all of the Build My Team side of



things in addition to still practicing. So I get a tremendous amount of feedback that folks say they don't know how I'm able to do it all. Well, the fact of the matter is they're right. If I had to do, I don't have to do much of it because I have amazing a player team members who are terrific at their jobs, and I simply paint the picture of what I want them to accomplish and get out of the way. That's how it kind of came into play.

**David Mandell:**

So, it leads me to say a couple of things. One is for those of you watching or listening who are intrigued by this subject and clicked on this to make sure that you would learn, I encourage you also to go to season two of the podcast. And this is of course when it was audio only. We're just a couple of video episodes in here in 2024. But season two, which a couple of years ago, and you'll have to look up what episode it was, we had Frank Maselli on. And Frank also advises businesses on a lot of HR hiring management issues. And if you listen to my interview with him, he actually worked with my firm back in the day and there was a particular test that he had used since the military.

He came out of the military. It echoes a little bit of what you were saying, Mike, in that it goes to... I think it was the Colby a test and is unlike some other tests or intelligence tests where it goes to your true nature in some ways. And I won't repeat everything we went through in that conversation, but what was interesting, we did it on our own team, is we had so many people scoring similarly on that test, which isn't surprising because we manage money.

So, we've got to be responsible. We're a certain kind of person, we're not great. Let's say most of us it's saying as being completely creative. We're out of the blue thinkers or something like that. Some of us had a little more than others, but we all had most of us on the team was kind of the responsible, diligent, maybe conservative mindset doesn't mean politics, conservative, but just I got to see evidence before I make a decision, which is probably what you want your investment manager to be, right? So, it gets into who you are. And I think that's sort of saying what you're saying, is it

doesn't matter what you've done so much before is who you are. That's going to be a huge success factor if you can do this job well, because you might've done the similar things, but you're not the right fit for that job and you might probably not great at it even though you've done it before. And certainly, I think there is a tension there, and I get what you're saying. It's interesting.

**Dr. Mike Neal:**

So specific to Colby, I'm certified in that. I was certified by Kathy Colby herself. And what that addresses is something that you've now seen. You've seen the power of one particular assessment. So, imagine if you strung together a whole bunch of them. Colby is extraordinarily specific. And that was the first assessment I ever took. I know my Colby score, it explained a million things about how I operate and what I'm strong at, what I'm not. But again, imagine that's one instrument in a symphony. So, you've got one instrument, can they play music? Absolutely. But imagine if you had 30 of them or 40 of them or whatever that number might be. Now all of a sudden you've got something that you just can't imagine how impactful it is. And that's what we've been able to set up with a whole battery of assessments that are done via cell phone, just text messaging.

And it takes right around 15, 20 minutes total. So at the end of that, we know whether or not a person could do the job. And that's critical, because when you're looking at a resume and in an interview, you have no clue if they can do the job. They're telling you they can, that car payment needs to be made, David, they have to make their mortgage payment. They're going to tell you whatever the heck you need to hear in order to check that box that they're hired. A whole bunch of them are going to do their best to figure out how to do the job in the month or two or three before you fire them. And a lot of them are successful. That's how the process works. Now in the healthcare side of things, during the time that you're short staff, during the time that you're training, that has an impact on the practice, you a lot of times have to reduce patient flow, which means revenue decreases, et cetera, et cetera.



If you bring somebody in that's naturally talented and strong in the job, and by the way, we also measure how fast they learn. So we know they learn quickly, we know that they have the strengths and talents, now all of a sudden they can perform at a level within a couple of weeks that usually exceeds the person who's been there before with the experience. And by the way, if you've ever tried to do something next to impossible, you try and get a person who's been doing the same thing over and over again, also called experience to stop doing it that way, transition to doing it your way and jettison all of their old bad habits. Good luck.

I have never figured out how to do that successfully. I would much, much rather spend time getting the person with the natural talents and strengths and training them from scratch because at the end of that, I know that I've got a superstar that will be able to perform the job within what I'm looking to have them do, or my managerial team is looking to have them do. And we don't have to worry about these bad habits.

**David Mandell:**

I have three dogs, as I think some of the listeners and viewers may know. So, there's an old adage about old dogs and new tricks, something like that. I've heard that before. So, Mike, what do you see as medical professionals include physician practices of course in that genre? What do you think the biggest challenges are for them in staffing and they go through that process?

**Dr. Mike Neal:**

Yeah, right now we're seeing that not nearly as many people as used to apply for medical jobs are actually applying. The applicant count is down dramatically. And Build My Team puts job applications out to 22 different job boards. So, we're trying to cast the widest possible net. And even with a net that wide, the applicants are still down. So, I would say that's number one. Number two is that folks want the stay-at-home jobs, so that might be contributing to the reduction in applicant count, but they're not excited about show up for work jobs anymore. And a lot of healthcare



hires younger people who seem to think that they can get out of school and land a \$70,000 a year job providing very little value to society.

I'm sorry, guys, but if you can snag one of those, knock yourself out, you should snag that job. But that's not really how the world works at this point. And in healthcare, the stay-at-home jobs are tough. This is a show up for work type position. And some people love that. And identifying those people, do you like to get out of the house? Do you want to escape your children? Those types of questions, I don't know if you can ask those on an interview, but that's the type of thing we're looking for. So I'd say that right now, those are the top two.

**David Mandell:**

Yeah, that makes sense. I mean, obviously in our business it's a little bit different. Most of our firm is part-time in the office and part-time remote coming out of COVID. But we're not in medicine, right? We're not seeing patients in person. It's a different thing. And I can see that being a separate challenge. It definitely lowers the pool, but it gets back, I think, into personality and the right person because for some folks like my father who was 81 and still practicing, he can't stand to be home. He wants to put on a tie and be in an office regardless. Even if he could work from home, which he could as a radiologist, he could do it just like we're doing here. That's just not who he is.

And there's enough people out there, and if you can find them, then that's not an issue. It actually becomes a plus. Makes sense to me. So last question as we wrap, where do you see... you just answered it really specific in medicine, but in general, where do you think the staffing and hiring process is changing? Is AI going to have an impact? Are there changes just like that you see coming that folks here should be thinking about over the coming year or two?

**Dr. Mike Neal:**

Well, AI already is having an impact, and there's a website in particular that I was shown a couple of months ago. So, it's been a while, a while in AI timeframe, where a person could upload a resume and apply with one click to 4,000 jobs. Now, God bless



America for that type of product, but I'm telling you from an employer standpoint, it's a nightmare. It's a categorical nightmare. The person who applied does not know what job they applied for. Now, you on an employer side of things have no clue that they've been through this process. Your assumption is that they've read the job description, that they have a clue what they're applying for. Well, in that particular example, the person got interviews for 0.15% of the jobs that they applied for 0.15%. So, they went on interviews-

**David Mandell:**

That's 60.

**Dr. Mike Neal:**

They went on interviews. It was tremendous for the person because they had all of these interviews, they had no clue what job they applied for. They would show up and basically, they just have to flip through some papers and see if they wanted to be an X. Think of the inefficiencies and the absolute Draconian use of time management or the employer side of things. You've got somebody coming through your doors, who's going to with 100% certainty waste your time. Now you contrast that type of AI approach to the Build My Team approach is to simply do that all for you so that you have none of those types of people walking through your door. And AI is going to build up a tsunami of that type of approach because that's what the job applicants want. So, these are people who are flocking to those types of systems because it makes their application process much, much easier.

So, you've got that kind of working against you on an employer side, but on the other hand, you've got a service like Build My Team, which handles that all for you and mitigates it. And our system is automated so we can handle that type of flow. But from a person doing a standard interview type process, imagine you take time away from patient care or your practice manager who's got exactly one million things to do on any given day, has to take their time out to deal with this type of person who's just a complete waste of time and resources. That's what AI is doing, and that's one



of the things we're seeing out of a category of a whole bunch of them, that are changing in the job market. That simply did not exist a couple of years ago.

**David Mandell:**

Right. Yeah, that's interesting. And more of that to come, I'm guessing. Mike, it was really interesting. For all the obviously viewers and listeners, we will put in the show notes, links to Mike's Build My team company.

**Dr. Mike Neal:**

Thank you.

**David Mandell:**

Obviously, he's talking about the challenges. He's got some solutions that can help folks. And I think what's interesting to me and why I wanted Mike on is coming from a hiring deficit, making mistakes, doing it wrong, and then figuring out, hey, there's another way to do this. And especially doing it in medicine and then being able to leverage that. So, a lot of the docs listening, who may have to hire someone, they've got a resource that maybe is a better fit for them than what they've heard before. So, Mike, I really appreciate you being on. We'll have the-

**Dr. Mike Neal:**

Thank you, David.

**David Mandell:**

... links on the show notes and thanks to everybody listening. Thank you, Mike.

**Dr. Mike Neal:**

Thank you all.



**David Mandell:**

And yeah, to everybody listening and watching, as I've been instructed to by my marketing people, if you like this, please follow us now on YouTube and give us a five-star review and follow us on the audio platforms. Tell your colleagues about us, and if you're a physician who has an interesting story, something you think your colleagues would appreciate in finance or career or entrepreneurship, feel free to reach out to me. We're almost done recording for season four, but there'll be another season five coming around the pike. So, with that, look for another episode from us in another two weeks. Thanks for tuning in.