

# Private Professional Practice

[www.professionalpracticeinstitute.com](http://www.professionalpracticeinstitute.com)

This assessment is divided into three phases. Foundations includes things a professional can do before they open their practice. It's even a good idea to complete many of the Phase 1 tasks before opening the practice doors.

Phase 2 looks at what helps you grow your practice to the next level of size and/or excellence.

Phase 3 is for the seasoned professional who has grown their practice and work and is ready for a new focus.

Of course this is not a linear process nor does it cover ALL of the tasks and requirements for every professional in every state or commonwealth. Folks may find there are items in Phase 1 they haven't completed even though they are actively practicing and need to go back and update their situation. Or, someone is visioning their ideal practice and already sees what they want in Phase 3, that's wonderful, they have a focus for their journey.

If there is a question you don't understand and can't answer, simply skip it and we'll go over it when we talk.

I'll review your answers and schedule a complimentary 30 minute consultation to see how I can be of help to you. When we identify a day ad time, we'll both call into a conference line. Here is the information:

Telephone Number - 1-218-548 9481 Pin number 706904#

Once completed you can get them to me via:

FAX - 707-380-8938

E.Mail - [linda@LawlessCo.com](mailto:linda@LawlessCo.com)

Snail Mail USPS - Linda Lawless, 1350 Hayes St., Ste. A-3, Benicia CA  
94510

# Phase 1 - Foundations

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Assess the basics of your new or current practice. Score the following from 1-5. 1= No or low, 5=Yes or high. Some ask for a Yes or No answer, those do not receive a numbered score.

## Developmental Level

Y N I'm an Associate or Intern and thinking about creating a professional practice.

Y N I've completed my training and in the licensing stage. Private practice appeals to me.

Y N I'm licensed and working in a job and am thinking of being in private practice.

Y N I'm licensed, in private practice, and have specialties for myself.

Y N I'm licensed, have a private practice, and want to upgrade my practice.

Y N I'm licensed, have a private practice and am ready to move into other arenas, write a book and/or create workshops.

## You & Your Office

\_\_\_\_\_ I'm clear about my personal values. (ASS)

\_\_\_\_\_ I know what my personal preferences are (MBTI). (ASS)

\_\_\_\_\_ I have a clear vision of what my successful professional practice looks like. (CS)

\_\_\_\_\_ I can articulate my theoretical orientation. (CI)

\_\_\_\_\_ I know my best Work Relationship Style. (ASS)

\_\_\_\_\_ I know where I want to have my office (geographic or virtual).

Y N I have/or want an external office

Y N I have/or want an office in my home

*If Yes:*

Y N It has its own bathroom

Y N It has a separate entrance and exit

Y N Clients have to walk through your home to enter your office

*If you already have an office you practice you work out of. Assess the following:*

## Confidentiality/Privacy

- My office soundproofed enough that others outside of it cannot hear what is discussed in session.
- My office has a separate entrance and exit.
- All client records are kept behind two locks (this includes electronic records)
- My Voicemail is secure.
- My FAX system is secure
- My E.Mail system is secure.
- Other messaging systems are secure.
- I have a HIPAA statement that I give to my clients (if you're a Covered Entity)

## Safety/Access

- My office is wheelchair accessible.
- Parking is well lit and safe for evening clients.
- There is public transportation available to reach my office.
- The waiting area is safe for children.

## Business Essentials

- Y N I've decided to not take insurance payments for client treatment.
- Y N I've decided to take insurance payments for client treatment.  
*If Yes complete the Managed Care Readiness Assessment that follows.*
- I have in place the following record keeping forms:
  - Intake form
  - New Client Information (Consent Form)
  - Y N Includes a Social Media policy
  - Release of Information form
  - A HIPAA information form
  - Termination of treatment letter
- I have a copy of my Legal and Ethical Statutes for my state or commonwealth
- Y N I use a DBA (Doing Business As) for my practice
  - If Yes
    - I include an explanation of my business relationship to the DBA in my New Client Information document.
  - I have a local Business License

\_\_\_\_\_ I know about local emergency and referral resources for my regular and my specialty clients.

## Practice Management

Y N I keep paper client records/progress notes.

Y N I use a computer based client record system.

Y N I use a cloud based client record system.

Y N I use an online scheduling system.

Y N I do my own insurance billing.

Y N I use an insurance billing service.

If Yes

\_\_\_\_\_ I've verified that they are HIPAA compliant

\_\_\_\_\_ I have an adequate bookkeeping and tax reporting system.

\_\_\_\_\_ I maintain malpractice insurance.

\_\_\_\_\_ I maintain physical liability insurance for the office site.

Y N I have a Collections Service I use for past due accounts.

\_\_\_\_\_ I have business budgets in place.

\_\_\_\_\_ I save for my retirement.

\_\_\_\_\_ I have clear emergency procedures for Danger to Self or Others.

\_\_\_\_\_ I maintain a clinical supervisor.

\_\_\_\_\_ Clients know how to contact me between sessions.

\_\_\_\_\_ I complete a Practice Analysis every year.

\_\_\_\_\_ I practice extreme selfcare to avoid burnout.

\_\_\_\_\_ I have a method for measuring treatment outcomes.

\_\_\_\_\_ I have a professional support system I stay connected with.

\_\_\_\_\_ I've evaluated my specialties/niches in terms of their best Return On Investment of time and money.

## Practice Marketing

Y N I have a practice marketing plan in place.

If Yes

\_\_\_\_\_ I update my marketing plan yearly.

\_\_\_\_\_ I keep a marketing journal to track my outreach efforts.

\_\_\_\_\_ I have business cards for my practice.

\_\_\_\_\_ I have a business brochure.

\_\_\_\_\_ I've clearly identified my "Ideal Client."

\_\_\_\_\_ I connect with other professionals in my community.

\_\_\_\_\_ I have a Business Plan for my practice.

## TeleHealth

Y N I provide TeleHealth Services

If Yes

\_\_\_\_\_ I have copies of my state or commonwealth's statutes re TeleHealth.

\_\_\_\_\_ I have a written consent and information document for my  
TeleHealth clients which includes risks and limitations.

\_\_\_\_\_ I have determined a process for identifying emergency services for  
distance TeleHealth clients.

\_\_\_\_\_ I verify the location of my TeleHealth clients every session.

\_\_\_\_\_ I have a check off list that I use at the beginning of each TeleHealth  
session.

\_\_\_\_\_ I have a Business Associate Agreement with my TeleHealth  
provider.

Anything you scored low needs to be addressed. Check out the program offerings on the Professional Practice Institute's webpage.

The total score is 270 (deduct 30 (240) if you are not doing TeleHealth), how do you rate? \_\_\_\_\_

If you were to choose three items you want to focus on, what would they be?

1.

2.

3.

## Phase Two - Growing Your Practice

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Score the following from 1-5. 1= No or low, 5=Yes or high

- I revisit my Mission Statement yearly.
- I have asked myself if my niche/specialty is still a good match for me.
- I have changed or expanded my specialities or niches.
- I have upgraded any of my office systems that broke down or were less effective?
- Y N Have you considered hiring more help?
- Y N Have you developed any strategic partnerships?
- I have chosen a web Domaine Name?
- I have a website?
- Have you reviewed your insurance coverage?
- Are you making more money than last year?
- I have an annual Continuing Education plan?
- Do you have, or are pursuing more training or certification in areas in which you declare a specialization?
- Are you comfortable with your Authentic Marketing statement (elevator speech)?
- Have you expanded your marketing practices?
- I complete an annual practice assessment.
- My Self-Management system keeps me on top of my schedule and tasks.
- I have taken training to administer the assessments/tests I use with my identified specialties.
- I belong to my Professional Association.
- I have created self-help programs or packages of services.
- I have a plan in place that covers me if I should die or become incapacitated.

The total score is 90, how do you rate? \_\_\_\_\_

If you were to choose three items you want to focus on, what would they be?

- 1.
- 2.
- 3.

## Phase Three - Mature Practice & Beyond

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Score the following from 1-5. 1= No or low, 5=Yes or high

- \_\_\_\_\_ I have a retirement plan in place.
- \_\_\_\_\_ There has been an Annual increase in income.
- \_\_\_\_\_ Quarterly Practice assessments are and completed and Expansion of Services continue.
- \_\_\_\_\_ I have created products for passive income.
- \_\_\_\_\_ Further expansion of Marketing Activities continues.
- \_\_\_\_\_ I'm considered an expert in my field in my community.
- \_\_\_\_\_ I explore ways to apply your expertise in other areas.
- \_\_\_\_\_ I remember to do self care on a regular basis.
- \_\_\_\_\_ I continue to love my work.
- \_\_\_\_\_ I have or am ready to write a book about my work.
- \_\_\_\_\_ I have or am ready to create wellness workshops for my community.

The total score can be 55. How do you rate? \_\_\_\_\_

# Managed Care Readiness Assessment

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Managed care is a complex and specialized marketplace. You can save you a lot of time considering it as a market niche by taking the following self-assessment. Record your readiness in each of the following areas. Score on a scale from 1-5, 1 = not ready, 5 = ready, 2,3,4, being degrees in between.

- \_\_\_ I return telephone calls promptly
- \_\_\_ I am a team player
- \_\_\_ I have coverage for my practice when I am not available, i.e., vacation, emergencies or business travel
- \_\_\_ My emergency backups have access to my records when I am away
- \_\_\_ I have psychopharm consultants I can refer to
- \_\_\_ I manage my tasks well and can get reports in on time
- \_\_\_ I keep good clinical records
- \_\_\_ I do my billing promptly and accurately
- \_\_\_ I write goal oriented treatment plans
- \_\_\_ I track my clients progress with clear and measurable progress steps
- \_\_\_ I can verbally conceptualize a case and discuss it with colleagues
- \_\_\_ I use informed consent and information release forms regularly
- \_\_\_ I carry maximum malpractice insurance
- \_\_\_ I manage my cases to include community and other self help resources in the overall treatment plan
- \_\_\_ I understand and can use the DSM 5
- \_\_\_ I have short-term treatment skills
- \_\_\_ I have formal training in my specialty areas
- \_\_\_ My office is client friendly
- \_\_\_ I have a practice management system that tracks treatment authorizations and billings
- \_\_\_ I keep accurate and timely financial records
- \_\_\_ I have at least three years of post master's experience
- \_\_\_ I can clearly and concisely describe my treatment philosophy
- \_\_\_ I obtain a consent for treatment from every client
- \_\_\_ I have access to and use the internet
- \_\_\_ I am informed in HIPAA compliance and follow HIPAA guidelines
- \_\_\_ I have an NPI number
- \_\_\_ I'm registered with CAQH
  
- \_\_\_ Total Score

If you scored less than 135, you are not ready to work with managed care. We highly recommend getting these things in place before taking on this niche market. (Adapted from *How to Get Referrals*, Lawless & Wright. J. Wiley & Sons. 2000)