

Ep #81: Getting Paid What You're Worth (Part 2)



Full Episode Transcript

With Your Host

Heather Branscombe

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Welcome to *Clinicians Creating Impact*, a show for physical therapists, occupational therapists, and speech-language pathologists looking to take the next step in their careers and make a real difference in the lives of their clients. If you're looking to improve the lives of neurodiverse children and families with neurological-based challenges, grow your own business, or simply show up to help clients, this is the show for you.

I'm Heather Branscombe, Therapist, Certified Coach, Clinical Director, and Owner of Abilities Neurological Rehabilitation. I have over 25 years of experience in both the public and private sectors, and I'm here to help you become the therapist you want to be, supporting people to work towards their dreams and live their best lives. You ready to dive in? Let's go.

Hello there friend. Nice to be with you again here today. Again, this week, it's a new week. I'm really excited about the second part of this podcast. I feel even more excited about it because I'm literally in this amazing hiring season for us. Again, I'm talking to so many new grads. I'm actually hiring a few new grads. We're in the final interview processes, the compensation conversations, and it is so much fun.

I hope I'm creating a really fun experience for those clinicians. But either way, I know I'm creating an amazing experience for myself as well. So I'm really excited to dive a little more into this today. So again, I love working with new grads. I love working with all clinicians, whether you're a new grad or not.

So if you are somebody who is looking to work with children and adults with neurodiversities or neurological-based challenges, and you are interested in working in the Fraser Valley area, which I happen to live and work in, let me woo you. I'd love to have a conversation about that.

If you're interested, please send me a DM on Instagram, which is [HeatherBranscombe.Coaching](#), or you can look us up on our website, which is [abilitiesrehabilitation.com](#). You can get my contact information to send me an email there. Let's have a casual confidential conversation.

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With that, let's talk more about compensation. So if you heard the podcast last week, maybe you're just coming out of that podcast, maybe you've been waiting for a week. Last week, I talked about the challenges that we have when we think about getting paid what we're worth as a clinician. I really challenged you to really decide on a goal, irrespective of the how to get there to really consciously and deliberately decide how much you actually want to get paid as a clinician.

So next, here we are today. I want to talk to you about some actual tactics and strategies to help you to feel amazing about your compensation, and to help you to get what you actually want. Are you ready? Then let's dive in.

Now, first, I want to acknowledge I am a private practice clinic owner. I understand that I'm going to have some bias around that. I just want to say I think that there are some concepts that no matter whether you work in a private practice, you work for a private practice, you own a private practice, or you work in a public practice. I think these strategies and these tactics can apply to you. You get to decide how you can make them apply to your unique situation.

So, again, I'm gonna use abilities just as an example. It's a template, and I'm going to kind of move the curtain. Let you see behind the curtain a little bit in terms of our own business model. Not just for show, but more to see that as an example of how this concept is possible. If it's possible at Abilities, I guarantee you it is possible everywhere else.

So when I think about Abilities as a private practice and just as an organization, what I'm always trying to look at as the CEO of this organization is about serving the needs of the clients that we serve, the staff that work with us, and the organization as a whole. Now, the thing that is unique in private practice than in other areas, maybe a public practice or a government run organization is all of the money that's coming in that needs to serve all of those needs that I just talked about, come in exclusively from the services we provide.

So because we know there are no other funding sources, this is the source of our funding, we need to have a model of how we're going to use that funding to best serve the needs of all the people that are required to run an amazing organization. Which, again, includes staff, clients, and the organization itself.

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So that's when people talk about business models. I think some of us that may have never been in an MBA class or have been even interested in models. But really, a business model is really just deciding in advance what we will allocate our resources to in each kind of distinct areas or buckets of allocation of using that.

It's kind of like when you get your salary, you decide how much is going to be allocated to rent. You might decide how much is allocated to food, how much you want to allocate to clothing, or something else. Or maybe you don't decide in advance. But notice when people have some kind of understanding, maybe a more detailed understanding, or less detailed understanding how that affects how the money is actually spent.

As a side note, if this is maybe bringing up some thoughts and feelings of maybe why you feel broke as a clinician, I'd invite you Episode 16, which talks about three ways why you might feel broke as a clinician really can help you to understand on that kind of individual level. When we choose not to decide in advance, what the potential problems are in terms of deciding what and how we want to spend our money.

So most organizations, at least when they've reached a certain size, have already decided in advance, we do budgeting as part of normal business operations. Really what that budgeting is, is just deciding in advance what and how you want to spend your money on. So what I notice in compensation meetings is that there's usually a couple of different thought process that come when people are coming and talking to me about their compensation.

First, sometimes there's this us versus them mentality. Or I like to think of it as the scarcity mentality. That's the kind of mentality that means if you get more, I get less. So they're saying hey, I understand that there's a certain amount of revenue that's coming in, but I'm really looking to get the most amount per hour. If I don't get the most amount per hour in my pocket, then I'm getting less, and you're getting more.

Now I get that. That is how I worked for a lot of my career before I was as well. It does make sense. But if we look at this from a slightly different perspective,

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instead of this kind of win-lose mentality of I need to, as an employer, how am I going to nickel and dime you and get you as cheap as possible? Or if I'm an employee or somebody who's looking to get compensated for my services, trying to think about this magical. I always like the TikToks. The magical TikTok thing that I can say that can unlock another \$10,000 in compensation. That's that win-lose mentality.

There is another way of thinking about it, and that's the win-win mentality. The win-win mentality basically asks the question, how can we all win here? So how can we all win when it comes to compensation? I love answering that question. I just want to say there is no one right way to answer that question. Because what is a win for one kind of clinician isn't the same as another part of clinician.

Winning, to people, are individual. It's based on what you value. How much vacation you value, how much education amount you value, how much of the dollars in your pocket pre- or post-tax value that you have. All of these things are really important.

So for us at Abilities, again, I mentioned, we do have a business model. We have decided to allocate a certain amount of the percentage of revenue that comes in to pay. So, again, for us At abilities, we don't just pay clinicians. We also have an amazing administrative and support team that we are paying as well. So we've decided in advance how much we want to allocate to this pay.

When we are thinking about allocating pay to our clinicians, we allocate a certain amount of pay that's different to an employee versus a contractor. So sometimes, as a clinician, you might decide you want to work as a contractor. Other times you might decide that you might want to work as an employee. There are pros and cons to both. There's, again, not one right answer for each of it, but there's a risk and reward principle that we commonly use in business and in compensation that I think is important for you to think about.

So generally, what happens is in an exchange of value between two people, the person who is bearing the most risk will generally bear the greatest reward. So if I am being employed by an organization as an employee, I have less risk because my pay is coming to me no matter what happens. So I might be paid

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less than someone who's working as an independent contractor who might be waiting to get paid until the organization gets paid. So that shared risk means that they're going to get a higher percentage of the revenue that's coming in, which means that their higher level of risk means they get a higher amount of reward.

So again, it means nothing. As an employer myself, I care much less of whether you choose to be an employee or whether you choose to be a contractor. What's most important for me is that the compensation is aligned with what you value. So one of the questions that you can ask yourself is how much risk do I feel comfortable being able to tolerate? So there may be some times of your life that you feel like you are more tolerant to risk. If you are, you get to decide if that increased risk is worth the reward that you are willing to negotiate for.

Conversely, there are definitely times in my life where I have been a little less risk tolerant. I've wanted a lot more safety where a salaried position was exactly what I wanted. I did not want to have to guess how much I was going to be paid on an ongoing basis. I was willing to forego some of that reward for the benefit of having a much more "stable" or risk adverse compensation plan. So that's something that you can think about.

But beyond that, there is definitely ways that you can be creative. There are several ways that we've done that at Abilities. If you want to know, this is a little outside of this topic itself. But if you are interested in it, I'm more than willing to share. I just don't know for this space of the podcast, whether this is the time to share about it. Feel free, again, to DM me or email me, and I'm more than happy to share.

As an employer myself, I love it when somebody comes in during a compensation meeting, and they say I want to make X amount per year. Because that is a problem that I want to solve together with you. It is something that is good for the organization as well as good for you. Because this is the kind of problem that we can solve together.

When I say that we can solve together, it's how can we help you to create this X amount of dollars a year that you want to create for you in a, I'm assuming, a

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sustainable way where we can maintain the quality of service that we're looking to maintain for our clients, and maintain the quality of life for a clinician. We don't always want to trade dollars for hours. So it's not always about just working more hours, but how can we work with that together?

I love that question because I'm very confident in our business model and where we have some creativity in that business model that can help you to create the kind of compensation that you want to create. But again, if somebody is just saying I just want to make this amount of hours, and they don't come with that creative win-win energy, then it does become a lot more challenging for us to create a win-win solution.

So again, the number one tactic that I would suggest for you to do in any kind of strategic compensation negotiation is to come in with a win-win mentality. How can I create a win-win for both myself and the organization?

Now, again, some of you might be working in a public practice, which typically means that you are government funded. They're unionized positions, and you're not typically involved in the negotiation. The choice isn't, at that point, how do you want to be compensated, and what are the creative ways we can do? You're really just being offered an option of this as the offer. Do you choose to take it, or do you choose not to take it?

I always want to offer you can ask what is negotiable. The worst they could say is nothing, but it never hurts to ask. So I always say ask what is negotiable no matter whether you're working in a public practice physician or a private practice. Ask what is negotiable. Then you can ask yourself how can I use this contract to meet my needs?

So some of it might actually, because when you've decided ahead of time how much you want to be compensated then you can take a look at this contract and look at the contract language and decide how you can use that to meet your needs. Instead of deciding in advance that you're just going to be content or not content with what has been offered to you in the contract.

If there's any shortfall, be it a shortfall in education amount, in the overall compensation, in the vacation, you can think about how can I solve for the

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shortfall. Now you can solve for that shortfall using some of the money that you're being offered in that current contract. You can do it in terms of value of the other portions of the contract, or you can decide that maybe this contract isn't going to provide all of the value that you're looking for in the compensation plan.

You can decide in advance that you want to change your circumstances. So whether that is creating a side hustle on the side or choosing a new position. But you can do that deciding in advance that this is in service of your long term goal.

So I want to just leave you here at the end with some more concrete strategy/tactics in any negotiation that you have. A lot of these are going to be questions that you can ask to help to solve for the problem that you have of how to create a win-win opportunity faster.

So some of the questions that I find useful is number one, how can I create more value for the organization? From my point of view, often how can I create more value for the clinician? What does my client or my boss or my organization, depending on what the relationship is and where you're negotiating, what does my client value most? If you don't know that, that's an amazing question to ask your client or your boss or your organization to find out more.

Because what I notice is the higher amount of value that you offer, then the higher the percentage of the fees, I know as an organizational leader I am willing to give. I'm much more willing to spend less in one area, and I will allocate more to compensation if I know. Say for example, I will take from my marketing budget, and I will add it to compensation because I know that we have an agreement in advance of the value that they're going to create, and that they have shown me that they are actually able to create it.

So your mileage may vary for what value looks like in terms of what you're negotiating for, but I know for myself as the organization, when somebody offers more time with us. So maybe they are working with us two days a week, and now they're interested in working with us full time. I know for us, there's a certain amount of fixed cost that comes to us whether an employee or a clinician,

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whether they're employee or a contractor, whether they work with us one day a week, or five days a week.

So if I can create a same amount of income with one person that I can with three people, then that means that that one person is generating more value, and I can allocate some of those fixed costs that I would have been allocating to those two other people that would have created that shortfall. I can now create to that one maybe full time position. So more time is often more valuable to organizations.

Secondly, what skills do you have that clients are actually asking for? So one, you can go to our course. Maybe you love the course, and you think that's amazing, and I love that for you. But is that course giving you skills that clients are actually looking for? If they are, then that helps me as a business owner because that helps me to be able to solve the problem for my clients that they're looking for a certain set of clinical services that you now provide. So that means that I need to pay less in marketing, and I can take that marketing allocation, and then I can allocate it to your compensation.

So third, using other resources in your treatment plan. So again, obviously, you want to make sure that this is ethical, and that it serves the client as well as the organization. If you ever have to choose, of course, always choose the client first.

But if you were using clinical assistants in your treatment plan, or other providers in your treatment plan, again, ethically, or groups for example. All of that in an ethical way, it means that there is, again, less of a load for the clinic to be able to create that kind of work for the assistants or the other practitioners that are in that group. Which, again, means that the organization can use some of that marketing dollars and allocate that to your compensation.

Then finally, think about your client retention and satisfaction statistics. So the longer that you're able to retain your clients, again ethically and in a way that is in alignment with what a typical treatment plan would be, and the more satisfied they are, that is also going to help an organization potentially lessen their marketing budget. Because they're not necessarily going to need to find as

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many clients for the same amount of revenue, and happy clients tell other people and that helps to bring more clients into the clinic.

So, again, this is not an exhaustive list. If you have anything else, I'd love to hear what your ideas are. If you want to brainstorm, I'm happy to brainstorm with you offline. But what I want to do is just notice all of these things is what you're doing is you're creating a win-win environment for both you and the organization or the person that you're working for.

So finally, I know I've spent a lot of time here talking about clinicians working with an organization, and so many times that's often what's happening. But I just want to acknowledge that you always have the opportunity to create that compensation plan for yourself. So the question could be how can you create the compensation plan that you're looking for on your own?

Ultimately, you are the only one responsible for your compensation. You can obviously delegate that out to your organization, to your union members, to other people who are offering you a job offer. And that can be easy because then it's easy to blame those people for your compensation instead of taking full and complete responsibility for yourself.

But what if you took full and complete responsibility for your own compensation plan? Think about some of these questions that you could answer. As you answer them and as you learn from the failures and the successes in trying to figure out the answers to these questions for yourself, think about the catalyst, the impact that that will have both for yourself and for your clients.

I hope that that can be inspirational for you. Good luck on your compensation plan, and I cannot wait to see what you create with that. Thank you so much for listening, and I will talk to you next week. Bye for now.

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Thanks for joining me this week on the *Clinicians Creating Impact* podcast. Want to learn more about the work I'm doing with Abilities Rehabilitation? Head on over to abilitiesrehabilitation.com. See you next week.