

Interactive Staff Meetings: *A New Concept in Education*



“You don’t have to train all your staff... just the ones you want to keep!”

Congratulations on completing SOS’s Staff Training Workshop! What you have learned in the classroom will benefit yourself, your doctor and your patients. The fundamental principles learned in class are a great start...but don’t think that staff education stops with the training phase. Take these new training skills you have learned today to the next level - sign up for SOS’s Interactive Staff Meetings—a follow up learning tool that is sure to hit the training ball out of the park!

What is the Interactive Staff Meeting?

Before you leave the Workshop, you will be given the opportunity to develop your own personal action plans to help create specific goals that you will want to implement when you get back to your practice, based on what you learned here today. Let Lynn Homisak, PRT help guide and direct you during this critical phase to ensure that these plans can and will materialize through a regular follow up program. Keep the momentum going by participating in bi-monthly private staff meetings. Invite your entire staff to participate along with you at no extra charge. One hour sessions will be held twice a month. Lynn will moderate discussions with staff (and doctors) who may use this time to follow up with plans, ask questions or just as an open forum for unique or general problem solving and advice.

How do I take advantage of this?
My interactive staff meetings are computer video generated through a free download program called Skype. After you sign your office up, we will make arrangements for a set date and time twice a month to conduct our one hour sessions and through the wonder of VOIP technology, we will interact as a group, just as if we are all sitting in the same room together.

Staff Workshop Attendees:

\$99.95/mo.

(reg. \$149.95)

Offer includes:

Two 45 minute meetings per month.

The only charge to you is your video camera. But, if you sign up today and pay in advance for 6 months...

I’LL SEND YOU A VIDEO CAMERA, FREE!

This offer is only available to participants of my Workshops, so take advantage now!

Practice Name _____

Address _____

City _____

State _____ Zip _____

Ph# _____ Fax# _____

PAYMENT OPTIONS:

Check (payable to SOSHMS) Visa MasterCard

Name on Card _____

Credit Card # _____

Exp. (mm/yy) _____ CVV # (on back of card) _____

Billing Address [must match address on statement]: Same as above

If different:

City _____

State _____ Zip _____

Ph# _____ Signature _____



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