**Title: How Did You Get That Job? Workshop: Interview Strategies for Private Practice Positions  
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**Moderator:** Welcome to today's *How Did You Get That Job Workshop.* These workshops are geared toward providing you with the knowledge and skills needed to find, secure, and keep a job. Today's workshop will last 60 minutes and include a presentation on interview strategies for private practice positions. After the presentation, we'll spend the remaining time answering some of your questions. You can submit a question by using the questions box located in the webinar control panel.

Our presenter today is psychologist, Dr. Jeff Zimmerman, co-founder of the Practice Institute, LLC. Zimmerman has over 35 years of professional experience, having been in independent practice virtually his entire career. He was a founding and managing partner in a group practice that grew to seven offices and 20 professional staff. Dr. Zimmerman frequently mentors and consults to early career professionals who are looking to join a practice. He also consults on practice development and on management and building niche practices. He is the co-author of *If You Build It They Will Come*, *The* *Handbook of Private Practice*, *The Ethics of Private Practice*, and *Finance Management for Your Mental Health Practice*. Dr. Zimmerman recently received Division 42's 2019 Mentoring Award. Welcome, Dr. Zimmerman.

**Dr. Zimmerman:** Thank you. It's great to be here and to be back on this webinar series, *How Did You Get That Job?* I love the title of it. Many people want to know, to begin with, what's the best practice. We'll be talking about that in a moment, but let me begin by saying that interviewing certainly can be daunting and anxiety-producing. At the same time, though, it's a great opportunity to hopefully find a position that's a good fit for you. Perhaps, it's a fit for two years or five years or even your entire career. It's really important to make sure, and we'll talk about this as we go through today, to make sure that you're interviewing them and realize that you need to assess your organization as much as they need to assess you.

The first step is really being attentive to what you're looking for and what you need. People say private practice and they have a thought in their mind about what that means, but really, there are many different types of practices and they're very different from one another. I won't go into them in great detail here, but just to give you a sense of some of the different structures. One structure for private practice is a co-op model, where the people in the suite or in the number of offices are all tenants and they share the common expenses like secretary, marketing, office supplies, that sort of thing. It's almost like roommates in an apartment.

Another is a single-owner where you have one person who owns 100% of the practice and everybody else works for them. There are also multi-owner practices; it's like a law firm where you would have people that work as associates to those people who are the partners or the owners. The owners may or may not be equal owners; there may be some owners that are junior partners and senior partners and that sort of thing depending on how large it is.

You also have integrated practices where a mental health practice might reside in a suite where there's a medical practice and both of those practices work together to help their common patients. You could actually physically be in a practice that is co-located with a medical practice, then you have hybrids of these. For example, the integrative practice could be multi-owner or it could be a co-op with only some of the people co-located with the medical practice. Part of the challenge is figuring first out what you're looking for because that's going to be crucial in how you interview and where you decide to interview.

Next slide, please. Finding a practice means that you need to first look at it as a process. Who do I interview with? How do I interview? How do I negotiate? What do I do once I get an offer? We're going to focus mostly on the process of interviewing, both in terms of the initial interview and what happens often in a second interview when you begin to discuss terms of the position. Many people are often asked me, "How do I know how to do that? What's the salary? What percentage should I be asking for if there's a percentage?" I'll give you some ideas about how to figure that out and how to prepare practices as we go along today.

The first thing is to recognize that it's a process and to really do your homework. Nowadays, it's pretty easy to understand many aspects of the practice you're going to be interviewing for. Make sure that you really have done your homework to say, "Where are the practices? What are the practices I want to perhaps interview for? How do I then get known to these practices?" Many positions, as I mentioned in the slide, aren't advertised. Many times, the practice owners find somebody or come in contact with somebody and they're interested in that person and they say, "Wow, that person is really smart, really energetic, really great in some way they can complement our practice. Maybe we should talk to them about joining us." That's not a formal interview process. What you're really doing at the front end, in your networking, is looking to build a relationship and many relationships.

Many interviews don't happen because the relationships falter right from the start. We have a phone call about a common patient and you maybe start talking with me about the practice because you don't know about it. When we hang up, I'm really interested in maybe talking with you further about it and then I never hear from you again. You don't send me a little email that says, "Hey, thanks. It was great speaking with you." I never hear from you again and I may just move on. As opposed to, you send me an email that says, "It was great speaking with you about our common patient." Then I write back and say, "It was, I felt the same way. I was just wondering, would you ever have an interest in maybe having a cup of coffee?" I'm not even inviting you to interview. I'm inviting you to have a cup of coffee. We'll talk more about that in a few minutes as well.

It's also really important to know what you have a value to the practice. Part of that is also knowing what they need and being able to clearly, in your own mind, have some good guesses as to what they need. When you do get a chance to have coffee informally or formally come in for an interview, you're better able to assess that.

Next slide, please. The process I mentioned a moment ago includes you being in an initial pool of applicants, where you begin to set yourself apart. That continues through the first and usually a second formal interview, where you continue to want to narrow the field until you get an offer. If the practice has 50 applications, you want yours to be in the top five. Then you want yours to be in the top two. Then you want yours to be in the top one as you go through this process.

Setting yourself apart from the initial pool is really important. You can do that in your cover letter, which we won't talk about much today, but you can do that on lots of different ways where you become unique. Whether you do it at a conference when you meet the practice owners, whether you do it by an email such as I suggested, or what you say in your cover letter, how your resume looks, you want to set yourself apart in a useful positive way so that you can get that first formal interview. Then you can narrow this field for the second one.

Sometimes a lot of time passes and it's important to be patient but also important to reach out and maintain the connection without bugging the practice owner. It can say that you're somebody who follows through and that you're maintaining the relationship as you go along even if there's time that is passing from interview one to interview two. They may be interviewing other people, you may not be their ultimate first choice that they think about it, but you still could rise to the top and get an offer as time grows on unless you back out or you somehow fracture that relationship with them.

Let's start talking about tips for interviewing. Before we do that, though, I want to mention that the interview does not begin at the first formal meeting. Rather, it begins at the first contact. That's when you have an opportunity to create that value. All of those opportunities that I was mentioning a few minutes ago, all of those contacts, these are all opportunities to demonstrate your value. The overarching concept I’d like you to be thinking about is that you want the practice owner or owners to say to themselves, “Wow, we really want this person to work here.” We want to get those wows.

Next slide, please. Let's shift now to talking about the point for that first interview. Long before the interview, as I said, do your homework. Understand, who you're interviewing with. Understand the individual or individuals, many times you'll meet with a number of people, and understand the practice itself. What are their values? What do you see when you look at their website? Who works there? What services do they provide? What’s glaringly missing from the picture. It's not only what's there, but what's not there, especially in the community that they're in. What services, if you are owning that practice, would you want to be providing to that community that you don't see anywhere on their website? What are the challenges that you expect they are facing? What are the challenges today and given the coronavirus? What are the challenges they're facing in terms of their relationship with the community? What are the challenges they're facing, if it looks like the practice is very heavily into managed care? Or, if it looks like it's not at all into managed care, what are the challenges they're facing?

Be clear about those in your own mind because those are entrance points in the interview process for you to ask carefully thought about questions in a way that's not harsh or confrontational, but yet can provide you very useful information. Can you tell from their website, how they're structured? Sometimes you can tell by the titles that go beyond their clinical designations. It might say owner, it might say director of this or director of that. You want to get a sense of how they're structured and perhaps who you'll be working for because that may also tell you the other people that are going to be in the interview.

Next slide, please. As I said at the beginning, understand what you bring of value. What do you want them to know about you? What can you offer that they may need? Think about your answers to their difficult questions when they say, "What's your weakness?" Even when they say, "What's your strength?" I can't tell you when I used to interview people, how often I would hear to the strength question, "My strength is I really care and I'm very dedicated." That's not a differentiating answer because of 10 people. I asked 10 people that question and eight of them or nine of them tell me the same thing. Okay everybody cares. [chuckles] I get that, everybody is really dedicated, I get that. Even the question about strengths becomes a difficult question because you want to set yourself apart again. What are your strengths that are likely to set yourself apart from the other candidates? What are your weaknesses?

One question for me that was very much of a differentiating question is I would say, "Tell me about a case." I would say, "I don't care if the case was successful or it wasn't successful, I don't care what therapeutic modalities you used or approaches you came from, just tell me about the case." What I'd be listening to is the organization, the thoughtfulness, the ethics around how they approached the case, how they conceptualized the case. Not which school it was, but how they conceptualized it, and how well they could present that to me in a succinct format. If they couldn't articulate it to me, then, I’d be really concerned about how they would work with our referral partners, the people they’re referring the cases in, and how they would work with staff and how they would even participate in supervision and mentoring.

Be sure to focus on how you're standing out from those other applicants and do that with a lot of careful thought. Given though the devastating impact of the virus, there are many interviews-- Next slide, please. The virtual interview slide, please. There are many interviews that may not occur in the practice’s office. This is, of course, a rather new and unexpected thing that's occurring. We are now in a situation where you may actually do this interview locally, from home.

If you could go to the next slide, please. Thank you. I don't know if anybody else is using this term but tele-hygiene is probably an appropriate term in some way to address this new challenge. There are many times you're going to be interviewed from wherever you are doing, you’re sheltering in place and your preparation is essential to this. Some things to consider, lighting, making sure that you're well lit and not backlit. If you’re backlit you'll be really dark in the image. You don't want to have too much front lighting because you don't want to be all shiny in the image. Often, it's best if you can have natural lighting from the side. To have the lighting appropriate so that you get the best image looking in the camera or the camera so that it shows up nicely on the other end.

You want to make sure that you dress fully for the interview. This may seem a little silly, but there are people that wear shorts, pajamas or other things on the bottom and they look great on top. If you drop your pen and have to lean over, you want to make sure that you're dressed appropriately head to toe including your shoes for the interview. The other aspect of that, because I think we approach the interview differently when we are dressed accordingly, even down to wearing dress shoes for the interview. Whatever that would be that you would wear if you actually went in, it changes how you are presenting yourself. If I was laying down on my couch right now, I think you would hear me differently than if I'm sitting up straight and really focused on this presentation.

Pay attention to your background, this is a real challenge in doing an interview through a video means. Many people don't have an office at home. I was speaking to somebody recently on a call, an attorney, and she said, "I'm in my bedroom." She was in her bedroom because her family was in the common area of the house. She doesn't have an office in her home and she was in her bedroom. I said, "I couldn't tell." Because she very carefully positioned her camera so behind her was just a painting- was the picture, you couldn't see her bed that was right near her because of how she positioned herself.

Be sure about the camera placement. Wear earphones because that helps you really focus just on what you're hearing from the other side and not on the ambient noise in your environment. It also gives you privacy, you don't have to worry that other people can hear you and that focus on can be very, very important.

You also want to make sure that you've done your best to limit distractions which can be, as we were talking about earlier before the presentation, the delivery person, it can be a repair person coming to your home, it can be a food delivery or a knock on the door, it can be the dog or the cat or what have you. I was on a video call and somebody's cat walked across their laptop. We had a chuckle but you don't want that chuckle to be at the expense of your interview, that you're not controlling your environment.

Which, by the way, one of the challenges today is that the interviewer is actually seeing you in your office, if you're going to be performing services via tele-health. Usually, you go to their office and you look at their office and where you're going to be working. They are now looking at your office. One of the things they’re going to be assessing is how professional does your "office" look to them. Really, pay attention to that as you're setting up to do the interview.

Absolutely, rehearse the technology. You may have heard of Murphy's Law. Murphy is not really a friend of mine but he comes with me a lot wherever I go. I get on a call like this a half-hour in advance because Murphy is usually present. Expect Murphy to be present. Learn the platform that you're using, rehearse it with a friend or a family member in advance. Perhaps even shut down your computer well in advance to the day of the interview, so when you turn it on, if you had a problem and had to reboot the computer, and it was in the midst of a operating system update, you don't want that reboot to take 37 minutes and you miss your interview. Make sure you've done everything you can to be fully in control of your technology and not have this fellow, Murphy, hanging around you so that it leads to technical glitches.

Next slide, please. Regardless of whether the interview is on video or in person, it's really important to be personable, show your strengths. As I was talking about caring and dedicated earlier, I was also thinking, show them that you're caring and dedicated. Don't tell them. You want them to say, "Wow, this person, really, is unbelievable. He or she really cares and are dedicated or they're really unbelievable. They really care about what they're doing."

Be clear if you want the position and it's your top choice. Don't lie. There's nothing wrong with saying, "Wow, I'm really excited about this interview and this position sounds great. I would really like to talk about it more." You never know where they're at. You could be the only viable candidate and they've been searching for four or five months. They don't tell you that. If they hear that from you, that can be important. There can be other viable candidates and they think you're the best but they're afraid you're not going to take the position they've offered to you. It can be really important to say to them that, "You're my top choice. I'd really like to talk about this more." You don't need to play hard to get especially if that backfires.

Next slide, please. Part of the challenges I was mentioning earlier was, how can you increase your value to them? What gaps can you fill? Think about in advance what unique knowledge you have. What specialties can you feed into that the practice was already offering? Even perhaps more importantly, what specialties could you develop if you were working there, so that they have more opportunities to serve the public? What programs even within a specialty could they offer?

They're doing a lot of work with ADD kids, but you don't see anything about groups for parents. You might, and that's something you can do when you've had experience with. That's certainly something you want to somehow feed in the interview where you're dropping these little seeds that'll hopefully turn into beautiful flowers, where they hear that you can create a program that they were not already doing.

You might even just be able to give them value by being willing to work weekends or nights. There are many practices that are very successful because they offer weekend hours, when one or the other parent can bring the child or they can bring themselves and they're not in the midst of all the things that happen Monday to Friday. A practice that is able to offer expanded hours to evenings, sometimes early in the morning, sometimes on weekends, can really add richness to the community, and you can then add that value to the practice.

Okay, next slide, please. Let's shift gears and talk about compensation and approaches to usually what happens in the second interview. At some point, they're going to want to start talking about the structure of the position. This can be a soft discussion around the initial terms of a contract, and could be a good sign that they have some initial interest.

To begin with, you need to understand how the compensation system is structured. Here are a few ways that they usually are structured. Some practices will offer a straight salary, and they have an expectation for what you'll be doing, and then they're going to pay you a straight salary.

Other practices will offer what might be called a cost-based approach, where they will say, like, for example, in co-op practice, "It costs X dollars a year, a month a week to run the practice. You need to cover your share of the costs. Once you cover your share of the cost, all the rest is yours."

Most practices today are what could be called a production or production-based model, where they offer a certain percentage of what you bring in and then the practice keeps the rest, and you get your percentage. We're going to talk more about that in just a moment.

Some practices will also have incentive programs. If you do better than you or they thought, you can actually earn more income, and they also can have an opportunity for you to get equity or ownership in the practice. Usually, that's after maybe three, four, five years, unless you're already bringing in a practice and you're really folding your practice into theirs.

Next slide, please. The compensation packages are more than your routine compensation. You really need to understand all of the elements of the compensation package. Those include employee benefits, health insurance, malpractice insurance, possibly retirement plans, even on Fridays we get lunch for everybody here in an office-based practice. Well, that's a benefit, they buy lunch for everybody on Fridays.

Vacation time, if you're an employer, if it's a straight compensation model, how much vacations they offer that's paid, even vacation time in a production model, how much vacation can you take. You don't want them necessarily curtailing your vacation time or only expecting that you're going to take a certain amount of vacation time that is either more or less than you want to take. Understanding that even as an employee benefits what incentives, what long-term prospects are for you working there, and the opportunities you have for learning. Most people ignore this last point.

I, years and years ago, interviewed for a job, and the first interview was by phone. Towards the end of it, I said, "Tell me about your peer supervision." The person said, "We don't do peer supervision because I just hire good people." Even though it sounded a little flattering because he was trying to recruit me to come in for an interview, it somehow didn't ring well to me. I was fairly new at the time, it said to me I wasn't going to learn much there because I was just coming in to be a workhorse, do my job, see my patients, go home. I never went in for the face to face. I didn't accept their offer for a face to face interview.

I think it's really important to find yourself in a culture that fosters learning and development. This is really hard work that we do, and it's life-changing work for our clients or our patients, and it changes us as well. You want a place that's going to help you grow and help you develop at whatever stage you are in your career. That would be my suggestion.

Next slide, please. One question that I'd like to ask is, is 60%, more or less than 50%? Yes, I did take statistics in graduate school, and yes, it generally seems that 60% is more than 50%, but not necessarily when it comes to compensation.

Next slide, please. It's really important to do the math. I apologize that this slide is a little tight and the type is a little small, but hopefully, you can see it. The first set of columns marked 60% would be one scenario where you're being offered compensation at 50% in the productivity model. The three columns to the right are the 50% model. I look at two years, first year being not licensed for those of you that are early career psychologists, and the second column being that you got licensed in that year. The first set of columns also has you working more cases per week than the second set of columns and both have you working a 46-week year because of vacation, time off, and that sort of thing.

I won't go into it in great depth, but you can actually see there's a big difference in your total direct compensation, where the 50% model puns out much better for you than the 60% model. It's really important to do the math and to really look at it. By the way, the bottom half of this table, you can see that they offer more mentorship in the second practice as well, so that's hard to put a dollar amount on but you get

that value as well. You can't just say your friend who says, "Well, I'm getting paid 65%." That may be great, but it's 65% compared to what you're getting paid. The other piece of it- next slide, please- relates to whether or not you're a 1099 or a W-2 employee, that if you're a 1099 employee, then you may also have extra payroll taxes, matching payroll taxes to pay. You may also have your own benefits to buy like health insurance, and retirement funding, and those sorts of things.

Who classifies it as 1099 or W-2? Actually, the IRS does. The IRS has about 20-some odd criteria that they use across three separate dimensions. Basically, the more that the employer has control over you and how you do your work, the more likely it is that you're a W-2 employee, not a 1099, even if that's what the employer is saying you are. The IRS has audited mental health practices. I often get the frantic call that says, "We're being audited. What do I do now?" because everybody is a 1099.

I'm often saying, "Talk to your accountant. Make sure they're really 1099s and not W-2 employees that are-- or not 1099s that are camouflaged as W-2 employees." I think I said that backwards, but that they're not truly W-2 employees in 1099 clothing, so to speak. Okay, let's look at another element of the terms of your agreement. Next slide, please. That's non-compete clauses. Many people ask questions about these. They can be present while you're employed by the practice and they can be present after you leave the practice.

You really need to be clear about what the terms of these agreements are. Some are geographical, some relate to current patients, future patients, diagnoses, certain activities, not others. Is it okay if you're an eating disorder specialist and working in the practice to work at the hospital on the other side of town that also has an eating disorder program? It may or may not be okay. Don't assume it unless we talk about it. Even if we talk about it, make sure it's written in the contract if you're thinking of having a part-time position someplace else, whether it's teaching or whether it's something that might be or might not be considered more or less competitive.

Next slide, please. With regard to the specifics about non-compete clauses, I often wonder what's the practice worried about? What are they so fearful about if you leave the practice three years from now and your caseload comes with you? Ethically, can they stop people from seeking treatment with you? Do you want to say to patients that you've been in the midst of treatment? "I have to stop working with you because I'm moving three miles away and I have a non-compete clause. You'll have to stay here and go see somebody else." Is that ethical treatment of a patient with a complex, serious condition? Who can enforce this and how enforceable is the non-compete clause?

Next slide, please. A couple of other ideas. Make sure that you ask questions. Don't be passive. One of the ways to ruin an interview is at the end when you have 5 or 10 minutes left to ask questions, usually, the interviewers take up the bulk of the interview time asking you questions and you have 5 or 10 minutes left to ask questions, I think one of the worst things to do is to say, "No, I'm okay. I don't have any questions." You want to show that you're thoughtful, you understand the seriousness of what you're doing in terms of joining forces with the practice and interviewing them, and show them that you have thoughtful questions, as I said at the outset, you're prepared in advance.

Try to interview with multiple people. That helps you learn about the culture. Other things can help you learn about the culture, too, especially if you're on-site and you can walk around and look at the office. Maybe they will even give you a tour of the office if they're in the office but you're not, and they can give you a virtual tour of the office. You want to pay attention to all the things that you can see and you can gather about how they work. You're also free to ask them a question, or two, about the vision for the practice, what are they looking for for the next three to five years, what are the challenges they face as a practice- you're certainly free to go ahead and do that- and how have they addressed the challenges that they face. That may give you some ideas about their own culture and approach to doing this work.

Next slide, please. This is the final tip slide just to make sure we're all in the same place. Be wary if it's too easy or too difficult. A job interview that immediately, as soon as you sit down, they want you, that may not work out so well, as will the job interview that seems like you're slogging through mud to make that work. Be careful about that as well. Can you all still hear me?

**Moderator:** Yes, we can hear you loud and clear.

**Dr. Zimmerman:** Okay. Something popped up that said my connection was lost. If you can hear me, I can see my slides even our connection is problematic on my end. Thank you. Make sure that you're assessing is this the place that you want to work. You're going to be there for a while, and you're probably going to be working 40, 50 hours a week. You want to make sure this is an organization that you feel good about. Next slide.

It's important to understand also how the office space and office sharing works, especially with telehealth now. They may say, "You're going to share an office with somebody, and you're going to be in here Monday, Wednesday, and Friday, and they're going to be here Tuesday and Thursday." Is it the same office that I'm in every Monday, Wednesday, and Friday, or am I going to different offices? You want to make sure you ask all of those questions so you know what it's going to feel like to work there. How are decisions made in the practice? How are they viewing this position, not only their practice for the long-term but this position for the long-term? Be sure you have the information you need.

Next slide. In response to COVID-19, how are they handling office space? Are they open for patients to be seen in the office? What protocols do they follow? What protocols do they expect you to follow? What happens if you do evening appointments and you're the only one in the office? Are you responsible for cleaning the bathroom in the office between appointments? You may be fine with that, you may not be fine with it. Make sure that you know what they're expecting of you in terms of protocols with regard to your safety and the safety of patients and other people that may be in the office.

Also, what platforms do they use if you're going to use telehealthmeans? If those platforms have to be bought, do they pay for your participation on the platforms? Do they pay for hardware that you may need if you have an ancient laptop or an ancient computer and you do most of your work on your cell phone, but your cell phone, the quality of the cell phone may not be good for this kind of work and they want an upgrade? Do you have to buy the laptop or do they?

Let's shift for a moment to vocabulary. We've touched on some of these before, but just so you understand in case you hear them what some keywords are. Compensation we spoke about. Those are the tangible and intangible benefits, the incentives. The benefits are things beyond the base pay. We'll go to the next slide, please. I'm just going to move through this quickly.

Productivity is a measure of what you produce for the practice, dollars collected, billable hours, that sort of thing. The term ramp-up, this is a really important one. If you're coming into a practice that's productivity-based, you get paid a percentage of what you bring in, you need to know the time it takes for your caseload to build and what they expect of you in that regard.

The term origination refers to the referrals into the practice that you generate. That often can be pertinent when it comes to incentive programs. If you know that term and they're talking about an incentive program, you don't have a blank look when they talk about origination. Restrictive covenant has to do with those restrictions to practice that I was talking about a few minutes ago.

Next slide. Some things to say. I've given you some of these earlier, but here's a short list and- next slide, please- a little bit longer list. What flexibility is there related to my scheduling? Working evenings, weekends, taking mornings off, that sort of thing. If you're planning on having a child in the near future, what flexibility is there around my working full-time, or perhaps less if my family situation, my personal situation changes?

You don't have to tell them you're planning on having a child, but you could say, over the years, if my personal situation changes, what flexibility is there. What options are there for varying your practice, starting a niche practice, ordering pertinent equipment, for example, if you do testing? What financial support do they provide for marketing your service?

They may not pay you for doing marketing, but are they able to do brochures, to give you a special page on their website for a program that you're doing? That sort of thing. Sometimes when you join a practice with no caseload, you can start two or three months out, and they can actually build a waiting list for you while you're getting your insurance credentials going, and that sort of thing, so that when you have done that in advance, so on the day one, you maybe already have a handful, or a couple of handfuls, of patients because they've created this waiting list who are already credentialed with the insurers.

You can ask them what their process is for getting you on board, also called onboarding, what their process is for that. A few things not to say. "I'm in negotiations with another practice." I might say, "I don't want to deal with a bidding war. Forget it." All of a sudden, you went from perhaps getting an offer to not getting an offer. You don't want to criticize their offer, "That's what you're offering me?" You don't want to criticize their offer or say, "I would never sign an agreement that says this."

It's much better to talk about what you need changed in the agreement rather than criticize the agreement or tell them what your friends, your partner, your professor, your colleagues say. If you get an offer- just a couple of thoughts about that- it's really still part of the interview process because if they're not happy in this part of the discussion, they can pull the offer. You are interviewing all the way up until the time you sign a contract. The first point is there has to be a contract. You don't take a position in private practice based on a handshake and a verbal offer.

In fact, if it's promised verbally, and it's not written into the contract, it doesn't exist. It needs to be in the contract and you should have an attorney read the contract from a legal perspective as well as have a practice consultant review the contract because that person can speak to the nuts and bolts and how the contract functions rather than the legality of the contract. It's likely the first draft you see is going to be one-sided because it's written by the practice's attorney and the practice owners.

I happen to like it when a contract is mutual or the language is mutually beneficial in the contract and recognizes both parties in the contract equally. I don't see that too often, but I think that's a really important message if you do see it. If you see a one-sided contract, don't despair, it means there's still a lot open for negotiation and you can speak to what wording is problematic and what you'd like them to change. In order to do that, you have to read it very, very carefully. Be sure to do that, and to do the math, both when things are good and also when things aren't okay.

If they say to you, "You start on day one, and that's when we're going to sign you up for insurance companies, and that's when we begin creating a waiting list for you, and you really aren't going to be full until three or four months in," do the math, "Can I survive that three or four-month ramp-up in this practice when in the other practice, the ramp-up might be two weeks or not at all? You want to make sure that you've really done the math and know what the implications are so that you're not three or four months out and getting a very small take-home check because you're waiting for all these other things to fall into place.

Lastly, make sure that you are clear about what happens when you leave the practice. On a productivity-based compensation model, you want to know what happens to the dollars that haven't yet come into the practice and how you get them after you leave. You want to make sure you really look at the contract from the day you start until a while after it's actually terminated. Make sure that you really understand the whole process and what's available to you.

To close, I'd like to say that the overall aspect of this process of interviewing, the overall concept, is that it's a very multifaceted process and you need to make sure that they see what you have to offer and you see what they have to offer and how they're allowing you to grow, and thrive, and feel good about the work you do and where you're working. Thank you. I'll conclude here, and hopefully, we still have some time for some questions.

**Moderator:** Thank you, Dr. Zimmerman. That was a great presentation and a great way to get people thinking about interviewing. Yes, we do have time for some questions. We do have a question about how to contain nervousness during an interview. Of course, everybody wants to seem cool, calm, and collected, but it's a very high-pressure situation. What do you recommend?

**Dr. Zimmerman:** The first thing I recommend is do the homework that I spoke about earlier, is to really prepare. The worst that can happen is that they don't like, and you don't like them, and you go on as if you never had the interview, you'll go on to other things, and they will go on to other things. If you're prepared, then you're ready for those difficult questions.

I actually love for my mentees to be ready for the difficult questions because when that question comes up, instead of getting tense, and having sweaty palms, and all the rest, they can smile to themselves because they can say, "I knew this was coming, and here it is. Wait until you hear my answer, I'm going to knock your socks off." They can then go ahead and calmly deliver their answer. One thing is to really prepare, and even be over-prepared.

If you have a colleague that can ask you the hard questions and let you stumble with your answers and then work with you, or a mentor who can do this and then work with you to refine your answers so that they seem natural- not rehearsed, but they seem natural- and really address the question in an effective way, that can be very helpful. Also, to try to figure out what's behind the question, because sometimes the difficult question is not about the content of the question, but something else.

Sometimes a difficult question, like when I would say, "Just tell me about a case," that was the most important question, the most difficult question, and I would just very casually say, "Can you tell me about a case you had?" Really be prepared. I think also, there's no shame in acknowledging, especially in a job that's important to you, this particular interview is important to you, I think you could say, and it could make you feel real and authentic to the interviewer, to say, "I'm really a little nervous of being here. This job, I've been looking forward to this interview, and I'm excited, and I'm also a little nervous about being here."

I think if you can marshal that with authenticity and not just anxiety, I think that can help as well. Also, to use your strategies that we have all learned and that are tried and true in terms of breathing and relaxation, also giving yourself enough time before the interview to be ready. The interview's at ten o'clock in the morning. Don't expect to get there at 10:10, plan to get there at 9:15. Go to a coffee shop down the street, have decaf if you're nervous instead of caf.

Know that you're right there, know that your technology is all set up. Look what happened today. We had some technological difficulties in spite of our best effort. Know that your technology is set up. If you're calling from your phone, make sure you have a plan B. If you're calling from your laptop, my phone was sitting right by my side to call in when we had the audio issues today. Make sure that you've given yourself plenty-- The last thing you want to be doing is rushing either inside your own home or rushing in the parking lot to the interview. Give yourself plenty of time to relax.

I've sometimes gone on difficult meetings where I've been tense, and I've gotten-- Two blocks away, there's a little park, and I sit in the park for 20 minutes, just watching people go by, not looking at my notes, not doing anything, just calming, and have a soft meditation with my eyes open. Use the strategies that work.

Remember, this is not a live-or-die interview. You will go on and you'll find the right position. Sometimes you're nervous because of how they're coming across to you. They're coming across in a very authoritarian, autocratic, perhaps not culturally-friendly way, and you're picking up on those cues, and that's what's leading you to be nervous. Pay attention to what's underneath it for you, and also in your environment.

**Moderator:** Well, a question kind of along the same lines of being nervous is being overly enthusiastic. What counts as showing interest and what's annoying?

**Dr. Zimmerman:** [laughs] That's a wonderful question. Let me think for a second. I think that there's a balance between the, "I'm enthusiastic and energetic, I want to work here," and the smiling- effusely, I think is the right word- effusively to everything they ask you, and nodding with wide eyes to everything they ask you, and saying yes to everything they ask you. That can seem really disingenuous and it can get annoying. If there's a time between interview one and interview two and you reach out every second day and say, "I'm just wondering if you're scheduling the interview yet because I'm so excited about the position," now you're annoying me.

If you asked at the end of the interview, "What's your next steps?" which is a good thing to ask at the end of interview one, and they say, "Well, in the next two weeks, we'll be making a decision, we'll be reaching out," I may calendar to send an email right away after I leave that day and then maybe three weeks later to say, "Just checking in, wondering how the interview process was going." If they don't respond, or they respond three days later, I may wait a while rather than hound them. Hounding can also be a little too enthusiastic, if you get my drift.

You don't want to have too much laughter, too much yeses, too much hounding. I think it's better to be softer, thoughtful, but yet very interested at the same time, is a nice balance. The thoughtfulness comes through in the way that you answer questions, you're not giving general answers like, "I really care about my patients." I had one person say-- I said, "What's the role of the clinician in doing psychotherapy?" They said, "I walk beside my patients." That, I thought, was a really poor answer. I understand what it means to walk beside or sit beside a patient who is hurting, and breathing, and been traumatized, but I think we do more than that.

A more thoughtful answer to me would show interest rather than an off-the-cuff answer of, "I walk beside--" I had another off-the-cuff answer, by the way. I'm drifting from your question, but just to tell you another answer that exploded the interview. I said, "What's your strength?" The person said to me, "I can keep people in treatment a really long time."

Now, you may think that private practices want to do that, but my private practice, we didn't want to do that. That was not part of our vision, goal, cultural imperative, or anything like that. We wanted to right fit the treatment for the patient. As soon as he said that to me, we were done, interview was essentially over. I waited a few moments and the interview was then completed. You really want to have that thoughtful approach, and too enthusiastic was not thoughtful either.

**Moderator:** Okay. We are running out of time, but we're going to just spend a few extra minutes because of our technical issue. If you can stay on with us, audience, please do. How about this question? You did talk about strengths. Any suggestions on how to disclose weaknesses in a light or positive spin?

**Dr. Zimmerman:** I think I have a couple. One- and this is often recommended- is that you pick a weakness that also is a strength. Sometimes I tend to work really hard or too hard and I don't always set the limit so that I don't get overly fatigued. That can sometimes be a weakness and a strength at the same time. A weakness might be a weakness that's obvious for where you are in your career.

For me, I would think when I was interviewing an early-career psychologist that maybe had a little experience in the specialty area but not a lot, when they would acknowledge, "I'm really interested in working with people with substance abuse disorders. I did have a rotation on my internship or my postdoc, but I really haven't had the kind of experience that I want to have, and that I really want to grow into, and I'm hoping to get that here."

The weakness was really my lack of experience, but at the same time, that got just turned around into my enthusiasm for doing this work since this practice focuses on that. It could've been on trauma work, or whatever their content was, and that I'm hoping that I can get that here because of your expertise in this specialty.

I've taken my weakness, which really isn't a weakness. At this stage of my career, I couldn't have all that flight time, if you will, doing this work while I'm at this point in my career. The interviewer is not going to expect somebody with one, two, three, five years of experience to have the same experience as somebody with 20 years of experience.

They know they're interviewing you with that experience, you're acknowledging you only have that much experience, but you're then turning it into the opportunity for you to grow here and that you're really interested in growing here and getting that mentoring and peer supervision so that you can be more competent and more well-rounded in this particular specialty area.

**Moderator:** Okay. We have gotten a lot of questions about salary and salary negotiation. I wish we had more time. Maybe we can have you back and we can have an entire workshop just on the salary aspect of all of this, but I'll try and get one question in. What is the best way to negotiate salary when you have no other offers on the table to negotiate with?

**Dr. Zimmerman:** Well, having the other offers-- Again, you don't want to be in a bidding war, and the percentages don't necessarily, as we were talking about earlier, indicate what you're going to take home and net from the position. One idea is to think about the risk that you're asking the practice to take on you. You're asking them to usually cover a lot of your overhead, to take a risk with their reputation in bringing you on, to take a risk in terms of the time and energy to give you that peer supervision and mentoring.

You're taking a risk because you're entering an environment that you don't know and because, on day one, they're offering to pay you something that perhaps is less than you were hoping for. One thing you can do is you can negotiate with them not just about your starting rate but what are the things that will lead to an increase in salary. You don't want to be in the position of every year or every six months having to renegotiate, renegotiate, renegotiate. That's a difficult, stressful time for you. I'd much rather, when I had my large practice, hear somebody say to me, "I understand that's what you're paying now. What are the benchmarks that have to be reached to get an increase?"

For example, "When I get licensed, what kind of increase might I expect if you're not licensed? When I'm at full load in terms of your productivity expectation, what might I be able to expect, or when might I be able to expect an increase, and what might that increase look like?" You can do some advanced negotiation now and recognize that it may be hard for them to pay you more sight unseen, but that if everything's working out, what does that mean in terms of salary, in terms of other kinds of compensation, and even in terms of the possibility of being compensated with some equity in the practice down the road?

**Moderator:** Okay. Well, these were great questions and excellent answers. Dr. Zimmerman, we are unfortunately out of time. Sorry we couldn't get to more questions. I do think we should have you back to maybe do a workshop on salary. I think there's just a lot of interest in that area, and I think our audience would really benefit from that. Thank you again, Dr. Zimmerman, for your presentation, and thank you to all our listeners for your participation.

**Dr. Zimmerman:** My pleasure.

**Moderator:** Yes. Your participation and your questions. We appreciate all of them. Just to let you know, today's workshop is a complementary offering to our long-running *How Did You Get That Job* webinar series where we interview individuals with psychology degrees and learn about what skills they use on a daily basis in their job and how they got to their current position. If you're new to *How Did You Get That Job* or would like to review some of our previous talks, you can find them all on the Membership section of apa.org.

If you are interested in attending our next *How Did You Get That Job* webinar, it will take place on July 14th. Our guest will be Rebekah Layton. She's the Director of Professional Development Programs at the University of North Carolina at Chapel Hill. Dr. Layton provides individual career coaching and leadership mentoring for trainees and is a certified mentor coach and a professional certified coach. Be on the lookout for that.

Recording of this presentation, along with the slides, will be emailed to everyone watching later today. As soon as this workshop has ended, a short survey will appear on your screen. We hope you take a few minutes to fill in the survey and give us feedback on how we did and how we can improve. We thank you for your time, we hope you have a great day and a great weekend.

**[01:00:40] [END OF AUDIO]**