

# 356 An LNC Entrepreneur's Path Anne Meyer

Pat:

This is Pat Iyer with Legal Nurse Podcast, and today I have the pleasure of speaking with an experienced legal nurse consultant whom I brought on the show to share her stories of being a legal nurse consultant: how she got started and some of the aspects of legal nurse consulting that she has learned and would like to share with you.

Anne Meyer is the President of Med-Law Connection. She started her firm in 2005. She's based in Iowa, and she has 28 years of professional nursing experience that she brings to being a consultant and being an expert witness. Anne is board-certified, and she was past chair of the American Legal Nurse Consultant Certification Board. That group makes up those exams that we take in order to become certified as an LNCC. She has lectured and published on several clinical topics, and she just completed what I might call an arduous term as the co-chair of the 4th Edition of the textbook *Legal Nurse Consulting Principles and Practices*.

Anne, welcome to the show.

**Anne:** Thank you, Pat.

Pat: I'd like to take you back to when you first found out about legal nurse

consulting. What was the piece of information that you got at that

point that made you interested in this field?

Anne: That's a really good question. I've been a nurse for 30 years. But I had

jumped in and haven't looked back since, so I enjoy it a lot.

done a variety of different things as a clinician, and I was looking for something that allowed me to do something entrepreneurial. I also looked at going to law school as a totally separate career. At the time I had two kids that were in school, one in college, one in high school, and timing really panned out for that. And so, I was working with another nurse who had started legal nurse consulting and I delved into finding out a little bit more about that. It was very intriguing to me. I

**Pat:** And how did you get your first case?

Anne:

Anne: I had another nurse friend who was doing legal nurse consulting and we partnered up together and shared some of our experiences. I went locally to talk with different attorneys that I knew outside of nursing, some attorneys that I went to school with. And one of them was nice enough to give me my first case, and it went from there.

Pat: And did this attorney explain to you very clearly what he was looking for, or she was looking for, or were you trying to figure it out as you went along?

Anne: It was more figuring out as I went along. The particular attorney hadn't really used a nurse before. And so, we figured it out together. I obviously didn't have a lot of experience with some of the legal terminology and the processes. So, he was very helpful in that part of it, but it was a matter of getting the medical records, looking through them, and identifying that we were missing pieces of medical records. That sparked the initial process, and then from there we learned together how we were going to approach what he needed.

And initially I looked at the case from the perspective of the nurse as opposed to from the plaintiff perspective, that of the lawyer. It was a learning process to identify the standard of care and then look at it from both sides, which was most helpful to him.

Pat: And I'm assuming from the way you're describing your entry into the field that you didn't go through any type of LNC program. You used your nursing background to start working with attorneys right away, or am I incorrect?

I did go through the Vickie Milazzo Institute initially back in 2004, and from there, I started talking with different attorneys that I knew personally. And that helped me get a feel for what some of them were looking for and get over that initial jitters of talking to somebody about what I could do.

Pat: You entered legal nurse consulting in 2005. There are many nurses who are intrigued with legal nurse consulting, and certainly there's a great deal more awareness of the field now in 2019 than there was in

2005. What advice would you give somebody who is in a clinical role and thinking about becoming a legal nurse consultant?

Anne:

I think the first thing to do is talk to some people that are doing legal nurse consulting to identify what's involved in the process and what it all involves. I would never recommend to somebody to quit their day job and go into legal nurse consulting. I think it would be best to do some consulting on the side to see if it's even something that they like.

I think talking to people that are in the role of legal nurse consulting is very helpful. Maybe do some research in regards to some of the different programs that are out there. The American Association for Legal Nurse Consultants, the AALNC, is a great organization. Look at their website and do some research to find out information about legal nurse consulting.

There's a variety of listservs out there that are very helpful to nurses that you don't even really need to participate in. You can just be a voyeur and learn some of the ins and outs of what people are doing and talking about. The role of legal nurse consulting is vast and there are a lot of different hats that a legal nurse consultant can wear. And so, I think finding out about that and some of the different roles that legal nurse consultants can do is very helpful identify what the individual nurse might be interested in.

Pat:

We've had on our show a nurse who works for a toxicology company who analyzes what happens with accidents and people who are exposed to chemicals. We've had expert witnesses. We've had nurses who've worked in law firms. We've had independent consultants, a whole variety of roles. At first, it may seem like everyone thinks of legal nurse consulting as working for an attorney as an independent contractor and yet, as you're pointing out, there are so many different options that are available. Nurses who do consulting with Boards of Nursing to make determinations on whether somebody's license should be suspended or revoked is another interesting role. We have a guest coming up who will be in that position who will be talking about her experiences.

I think the biggest question that I get on a frequent basis from inexperienced people is "How do I get started? How do I get my first case? How do I get my

foot in the door?" What advice do you give people when they present that to you?

Anne:

A couple of different things. One would be first doing something similar to what I did. See if you know of any attorneys out there that do any type of medically related cases like personal injury. Medical malpractice is something that not everybody does. A lot more people do personal injuries, so that might be an easier avenue to go as far as finding an attorney that does that type of work. Talking with friends and family that may know of attorneys that also do legal work can be helpful as well for that initial introduction.

The other thing could be to talk to other nurses who do legal nurse consulting. See about maybe finding a mentor or maybe working on a case with someone else to get your feet wet and get into the door that way to initially identify what's involved in the process, and seeing if that's something that they want to do.

And I think that's a key point, "Something that you want to do." The Pat: other component is, is it something that you have the skills to do?

Anne: That's true, yes. That's true too, yes.

Pat: We come out of nursing school almost knowing how to take care of patients, almost. And we get put into a clinical environment where hopefully we've got good mentoring and support. But when we come out of nursing school, we know how to chart, we know how to assess, we know how to observe, we know how to teach patients. What I find many young, inexperienced legal nurse consultants struggle with is "How do I create a work product? How do I analyze information? How do I write reports that are what the attorney is looking for?"

What skills do you see in terms of the legal nurse consulting role doing the work? And I'm not talking about the marketing but doing the work. What kinds of skills have you seen to be essential? And the other part of that is have you met legal nurse consultants who really wanted to do the work, but they couldn't do the work?

Anne: Yes, definitely. I think some of the skillsets that really set people apart are typically people that are very detail-oriented and able to review information. And again, you mentioned analyzing, so not only reading

the information but analyzing the information for its contents and how it will fit into the big picture of the case. The first thing would be identifying what are the issues at hand and then, for example, if it was a slip and fall case or a wound case or a misdiagnosis or something like that. Identify what the issues are at hand, but then also be able to have the skillset to dissect the records.

- I find a lot of people now, especially with the electronic medical records, really haven't had the experience of going in and finding information in different places within the EMR. And it's interesting to me because I'm an old school nurse, and I charted back when we were doing everything on paper. And it seemed that we did a lot more of reviewing of information as clinicians back when we were doing that versus now where the EMR is very segregated, and there's a lot of different screens that you have to jump back and forth between to find particular information.
- And while some people may do that to a certain extent, it seems that they're finding something very specific versus looking at the whole record. So, I think that is an interesting aspect for some people when they're getting into the role: that they have never done that before where they've done record review.
- So, being very detailed oriented, having the experience of looking through a medical record and knowing the different components of a medical record is crucial. Surprisingly, when I have hired subcontractors, I thought that it would be pretty commonplace to know the different parts of the medical record. And a lot of people don't. So, I think having that experience or the willingness to learn that is very helpful. Having an open mind, I think, is very key in regards to looking at it, not only from the nursing perspective but also from the plaintiff perspective. One needs to look at it with an open mind and not one that's hypercritical of certain issues or events.
- Also, you need good communication skills. I think that is so important in regards to communicating with whoever is hiring you. Identify what it is that they want so that you're not doing too little, and you're not doing too much. You don't want to create this huge work product when the attorney wanted you to simply review the records and give them a phone call and talk about what you saw. I've seen where people will

want to bill for 20 hours of work when really it should have only taken four hours because the attorney didn't want this large chronology or something like that. So, having that communication and really identifying what it is that the attorney wants and needs is needed. And then allow for that open communication of what you're seeing and how to move forward within the case workup is, I think, really important as well.

Running a successful independent legal nurse consulting practice is a challenge. I work with LNCs who are committed to building their businesses. Let's talk to see if this is the right step for you.

### Here's what a coaching program can give you

### 1. Fresh perspective

An LNC coach gives you a fresh perspective. I have an objective view. You only see things from within. I see things from without your blinders. I also know how other LNCs have tackled the same issues as well as how I succeeded with the same challenges.

### 2. A hand between your shoulder blades

There are going to be tough times and that's when you get pushed. That's when your LNC coach says, "Here's how to do it." I remember how anxious I was the first time I had to tackle doing a budget. My coach made it easy and led me through the steps.

# 3. Accountability

A coach gives you accountability. You have somebody you have to answer to. And anytime you have somebody who you respect, you're going to get more work done -- plain and simple -- just because you don't want to let them down. If I had my way, I would not have prepared a budget.

### 4. Breaking habits

An LNC coach also gives you a chance to break habits because she challenges your habits. I ask, "Why do you do things this way?" You say, "I don't know. I just do them that way." "Let's try it this way instead." And I help you recognize unproductive habits.

### 5. Insight

A coach also gives you insight you can't get anywhere else. We have specific issues working within the LNC field. I give you advice to deal with situations, which is super valuable.

### 6. A safe person for venting

A coach lets you vent your frustration, meaning sometimes all you need to do is complain for a little bit. Then when you're done, you're able to go back out there and get on with it. But if you don't have anybody to do that to, you don't get that value.

### 7. Safety net

You get peace of mind that whatever you do, if you go out there and mess up, you can turn to your coach and she'll help me figure out what to do next. That's another value.

There you have it -- what to know before joining a coaching program and hiring an LNC coach.

I coach LNCs through <u>LNCAcademy</u>. Want to talk to me for free? Set up a call with me, Pat Iyer, at <a href="http://LNC.tips/gethelp">http://LNC.tips/gethelp</a>

Pat: As you were going through the issues, I thought about the many expert witnesses who I hired and trained in terms of all of the above issues, particularly spending too much time on analysis of a case, going into too much detail.

One of the people in my coaching program at LNC Academy had an experience recently with a case involving an air embolism. She went through the records before giving them to her subcontractor. And she spent a couple of hours and she located the incident, which was right before the code and the death of the patient. And she told her subcontractor, "Don't spend any more than four hours on this case," thinking she would be generous, and the expert witness spent seven hours going through the records. She was supposedly a person with some experience.

I think you're pointing out that we have to use critical thinking skills, and yet there's a learning curve. What frustrates legal nurse consultants who are new to either the particular type of case review or new to the field is that they want to be thorough. They want to be detailed oriented, but they don't have a sense of what's too much time. So, that is a problem, especially when they want to bill for their time, and then they don't get paid, and they feel bitter because they're not paid.

Anne:

Exactly, and it's really important to realize up front is that it's very nice to think that you can go and bill these high dollar per hour to spend a few hours and make a lot of money or not work any weekends or holidays or things like that. And I think it's vital to realize that that's not necessarily the case. And that's why I think, again, it's necessary to talk with a nurse that does legal nurse consulting in their research to identify if it's something that they want to venture into. Because there are pros and cons obviously and good and bad, and dealing with attorneys is a lot of times like dealing with physicians, good and bad.

It's really good to have a clear understanding and talk with more than one person so that you go in with your eyes open as opposed to having this grandiose idea, for example, of again billing hundreds of dollars per hour for something. But obviously, like you said, there is a steep learning curve for it. And many times when I'm training people, I will say, "This would take me about this many hours to do, and that's what we're going to bill for. If you go above and beyond that, that's something that we have to talk about in regards to that learning curve."

You can't expect not to have that learning curve, and sometimes you need to do it for yourself as well to make sure that you're not missing anything. But have the understanding that as you get more experienced, you'll have that feeling of confidence. And you'll be able to do things in a shorter timeframe, and you won't be having so much of that learning curve time.

But even still now after I've been doing this for 15 years, I always review my bill before I send it out and identify if perhaps there were maybe a couple hours extra spent here or there. And I shave some of that off the time that I bill for just to make sure that it's appropriate for what we want to do. You have to be very careful. You don't want to overbill, but you don't want to underbill either. You don't want to undervalue yourself. But in at the same time, we don't want to bill for something that the attorney didn't even want. If you do that, it's very likely they're not going to utilize your services again. So, it's something to be very cautious of.

Pat: You're right. I had an experience with an attorney who asked me for a detailed chronology of the first week of an admission, and we gave them the detailed chronology that was 25 or 30 pages long. He said detailed and we gave him detail. And he got this, and he said, "I was expecting something that was five or six pages long and no, I'm not going to pay your \$3,000 bill that you've sent me." And we ended up not getting paid the full amount and he ended up not using us again.

This happened to me as an experienced legal nurse consultant where I thought it was very clear what he was asking for. I went back over my notes, and I said, "Perhaps when we work together next time, do you have an example of a chronology that you're looking for in terms of depth that would be helpful?" Despite me planting the seed, "When we work together next time," there was no next time. And that was okay because I didn't want to work with someone who was going to fight me over a communication issue.

Tell us about the most, or one of the most, memorable cases that you worked on. What stands out in your mind when you think about the multiple stories that have flowed in and out of your office? What's one that really makes you think about what happened to a person?

Anne:

When I thought about that ahead of us speaking today, I had a difficulty just finding a couple of things that really stood out. Because there are so many and it really identifies that we are needed, and that this role that we portray, and that we fill, is very needed and necessary. And one of the things that I thought about when I was getting into legal nurse consulting was how much I really, really liked being a bedside nurse. And I was afraid of getting into legal nurse consulting because I was fearful of getting away from that thing that I really liked. But what I found was that this really fills a lot of those boxes as well. I still feel that I'm helping patients, and I also still feel that I'm being a good team player for other nurses as well.

So, in that, I think one of the cases that stands out the most to me ... There were a couple of them that were oddly back-to-back. They were mental health patients that were in long-term care facilities. One came in from a behavioral health hospital that had closed, and so they needed to find placement for these residents that were in this hospital. A long-term care facility was where they went. And unfortunately, while the long-term care facility touted that they managed a lot of patients with dementia, they really didn't manage patients with mental health issues.

It was devastating, and every time I would review the records or my report, or things like that, as we were working up the case, my stomach would just turn in regards to this poor person that really wasn't being managed the way that he should have been managed as a resident of this facility and a person with these issues of mental health that he had. And the nursing staff wasn't equipped to handle a patient like this. And it was very unfortunate that the facility accepted the patient and that they didn't identify that they weren't equipped to manage the care.

And so, unfortunately, the patient died and there were a lot of issues throughout the course of that case. It really almost hit every aspect of things that you look at in long-term care type cases in regards to mismanagement of the health conditions of the patient and the medications, development of wounds and malnutrition, and dehydration. And just really, it just went throughout the whole gamut. And it was really interesting to see this unfold as I reviewed the records and the fact that there was never

anything they identified that meant they weren't appropriately caring for this person.

So that was one of the cases, and another one on the other side of it was a hospital case where a nurse was being blamed basically for the mismanagement of the patient and the lack of care of the patient. And one of the things that we bring to the table as clinicians having experience in different types of settings is knowing the inner workings and the processes of the facility and how things work, and knowing when we call physicians and when we don't call physicians, or when we call physicians and they don't call us back.

And it was very interesting to read between the lines, if you will, of what the nurse was saying. The nurse was trying to get ahold of the physician. The nurse went up the chain of command, and basically it was being thrown under the bus by the facility as far as the person that was holding the bag, so to speak, versus the physician or the entity in itself. So that was eye opening as well and exciting to work on in regards to the fact of identifying those other issues and helping to absolve the issues of the nurse.

I think people listening will identify with that awful feeling of trying Pat: to reach a physician and not getting a response back and starting to feel a level of desperation.

For a good legal nurse consultant to have that strong clinical Anne: background is very important. You may get cases that are across the spectrum of care as far as adults to older adult, pediatric, etc. You need to identify what you're really appropriate to review and what you're not and to have the strong clinical skills of knowing what labs are, what medications are. You need to know what resources you have available to you and be willing to research to find the correct references that you need to help with your case.

You've highlighted, Anne, a lot of the analytical skills in understanding how the medical record is organized. I would echo putting in having strong writing skills. Any tips as we wind up the show on working with attorneys other than the fact that they are a lot like doctors?

Pat:

Anne:

Again, I think communication is very important. Maintaining professionalism, I think, is really important. Some attorneys will be very friendly and very open, and I think it's very easy to get into a relaxed conversation or a relationship. And I think while that's all well and good, it's still really important to maintain professionalism. The thing that I've benefited from the most is word of mouth referrals from one attorney to another. And I think a lot of that goes back to obviously being very conscientious with my work that I do, but also maintaining that professionalism and being very cognizant of their time and, again, having that open communication.

Pat:

Excellent. I appreciate the words of wisdom that you've shared with our audience. How can they find out more about your business?

Anne:

Well, I have a website. It's... my company again is Med-Law Connection and my website is <a href="www.medlawconnection.com">www.medlawconnection.com</a>. That's all one word, no hyphens. I am also available by email or phone and that information is on my website.

Pat:

Perfect. Thank you, Anne, for sharing your expertise with our audience. I appreciate that. I appreciate you being a guest on the show.

Anne:

Thank you, Pat, for having me. I really appreciate it.

Pat:

You are welcome, and I appreciate you the listener. You are either watching this podcast on our app called Biz.Edu, which you can get at legalnursebusiness.com/bizedu, or you're watching it on YouTube, or you're listening on one of the audio platforms. I appreciate you paying attention and I hope that Anne has given you some tips that will help you in your legal nurse consulting business. We'll be back again next week with a new show, and thanks for being part of this show.

I recognize that what you just listened to can be overwhelming and stimulate some questions in your mind. My LNC business coaching service is designed to help you answer those questions and establish a firm foundation for moving forward.

Want to talk about what YOU can do to move your business forward? Set up a time to talk to me at this link: http://LNC.tips/gethelp.

Do you have lots of questions about being a legal nurse consultant? Are you wondering how to get clients, grow and manage a business, and dig into medical records? Do you feel a bit lost?

I've got a phenomenal resource for you just waiting on LegalNurseBusiness.com. My online training and books are designed to help you discover ways to strengthen your skills and businesses. Check them out at legalnursebusiness.com. Could you use a monthly boost of knowledge to keep your skills sharp? Are you a lifelong learner who enjoys the chance to keep expanding your knowledge? LNCEU.com gives you two online trainings every month to build your LNC business. Look at the options at LNCEU.com and start right away in the comfort of your home.

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