Survey shows physicians are overworked and want more time with patients.

Mitigating risk when using locum tenens physicians.

by Morris Jensby

Nurse practitioners’ awareness and perception of locum tenens.

How to write an effective job description for the web.

Why you should pay attention to culture.

What different generations are looking for in a job.

Preparing your 2017 staffing plan.

Since founding the nation’s first locum tenens company in 1979, CompHealth has grown into one of America’s largest healthcare staffing firms. Our more than 700 recruiters and consultants are expertly trained to provide temporary and permanent staffing of physicians, nurse practitioners, physician assistants, therapists, medical lab professionals, and other healthcare positions in hospitals, private practice groups, and government facilities across the country.
Survey shows physicians are overworked and want more time with patients.

Physicians’ lives are out of balance, according to a recent study by locumstory.com.

To better understand how physicians feel about their jobs, including their workload and communication with patients, locumstory.com surveyed nearly 1,000 physicians across multiple specialties and practice types, including private practice, hospital-based practice, group practice, and others (health maintenance organization [HMO], locum tenens, etc.).

The survey found that due to the growing amount of paperwork, physicians are spending more time at work, but less time with patients. In addition to working longer hours, physicians are also taking secondary jobs to supplement their incomes.

Here are the key findings from the survey.

**Physicians feel overworked.**

According to the survey, nearly two-thirds of physicians (65 percent) feel more overworked now compared to when they first started their careers. In contrast, only 13 percent say they are less overworked now than at the beginning of their careers. Overexertion is felt strongly across practice types.

**Physicians have poor work/life balance.**

Many physicians feel their jobs don’t afford them well-balanced lives. Thirty-nine percent of physicians do not think their facility supports a healthy work/life balance. The results are consistent across all practice types, including private practice (35 percent), hospital-based (41 percent), and group practice (39 percent).

**Free time is declining.**

This lack of balance comes in part from physicians feeling like they have less free time outside of work. According to the survey, 64 percent of physicians think they have less free time now than when they began their careers. They are also spending more time doing paperwork and entering information into electronic health records, with 22 percent spending more than an hour each day on paperwork alone.

**Not satisfied with time communicating with patients.**

More than half of doctors (58 percent) report spending less time with patients now than they did when they started their career.

Fifty-nine percent want more time to communicate with patients and they prefer that communication happen in person. Sixty-two percent do not want to text with their patients and 53 percent believe digital communications distracts from patient care.

If physicians cannot meet with patients in person, they prefer phone (47 percent) and patient portal email (37 percent). Only 5 percent were interested in texting or using personal email accounts to communicate with patients.

Many healthcare facilities (53 percent) now give patients the ability to connect with physicians via patient portal email (86 percent), phone (67 percent), personal email (19 percent), and text message (18 percent).
More physicians are considering leaving medicine. More than half of physicians (55 percent) indicated they had considered quitting or leaving the medical field in the past few years. Of those who have thought about quitting medicine, the majority indicated it was due to spending too much time entering data into electronic health records (68 percent), being overworked (62 percent), and spending too much time on paperwork (59 percent).

Physicians taking secondary jobs. More than one-third of responding physicians (41 percent) have taken additional jobs to supplement their income in the last few years. Respondents named three major reasons for working a second job: A decrease in their primary income (49 percent), wanting to support their preferred lifestyle (35 percent), and paying off debt (31 percent). Physicians in private practice are the most likely to take a second job because of reduced income in their primary job than any other practice type (45 percent).

More than 40,000 physicians work locum tenens assignments each year across all 50 states, and 90 percent of U.S. healthcare facilities use locum tenens physicians.*

Methodology
An email survey polled 993 doctors across the United States to determine physician attitudes about their workload, and how their workload affects their overall well-being and their opinion of the medical profession. The survey was conducted in December 2015 by Hanover Research on behalf of locumstory.com. This report presents overall findings and findings segmented by practice type, including private practice, hospital-based practice, group practice, and other (health maintenance [HMO], locum tenens, or other).

*Source: 2015 Survey of Temporary Physician Staffing Trends
Mitigating risk when using locum tenens physicians.

By Morris Jensby

Managing risk within any healthcare organization is, by necessity, a high priority and an ongoing process. One malpractice claim—or even the threat of a claim—can cost a hospital or medical practice dearly in dollars, time, and reputation. The following suggestions can help ensure using locum tenens physicians doesn’t increase your risk of liability.

The right doctor for your needs.

As soon as you know you will need a locum tenens physician, whether for a week, a month, or longer, think carefully about the role that doctor needs to fill and what skills he or she should bring to the table.

Some key points to cover in a new physician orientation include: a tour of the facility, including location of equipment, supplies, forms, and sample meds; an introduction to the medical records system; a quick course in how diagnostic studies are ordered and how results are returned to the doctor; and information on obtaining specialty consultations and referral of patients outside the facility for services not offered internally.

In addition, new locum tenens physicians should be introduced to both their physician colleagues and to key support staff such as nurses, managers, and department directors. If possible, assign the doctor one “go-to” person who they can rely on to answer questions and make further introductions as needed.

This might be the physician’s medical assistant or the office manager in an outpatient setting, or a charge nurse or unit secretary in the hospital.

Taking a little extra time at the outset of each new locum tenens engagement will pay dividends in the form of reduced risk and peace of mind knowing that you have the right doctor on board and that he or she is well prepared to practice effectively in your facility.

Open lines of communication.

To further reduce risk, stay in close communication with the locum tenens physician (especially during the first several days of his or her engagement) and also with your agency recruiter. Being available to the doctor allows for questions and discussion about policies or procedures that might need clarification and to address concerns that might crop up during the early days.

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Key considerations include:

- Specialty
- Skills
- Schedule and case load
- Support staff
- Availability of specialists

Starting on the right foot.

Locum tenens physicians are accustomed to being the “the new doctor” again and again. By and large, they’re fairly autonomous, flexible, and adaptable. That said, it’s not reasonable to simply point them in the direction of their office when they arrive and wish them luck. A proper orientation—even if it’s just a couple of well-planned hours—will go a long way toward reducing the risk of problems and errors later.
There are approximately 189,000 nurse practitioners (NPs) in the U.S. Each year, they provide care to more than 600 million Americans. Not only do NPs provide high-quality care in all types of practice settings, they also take locum tenens assignments across the country.

CompHealth recently surveyed nearly 1,400 nurse practitioners to understand their opinions and experiences with locum NP jobs. We asked approximately 44 questions, 20 of which related to their understanding of locum tenens, if and why they take locums assignments, and how they feel about particular aspects of locum tenens. Also included in this survey were questions about NPs’ awareness and perception of staffing agencies and what facts help them choose a locum tenens staffing agency.

Here are some of the highlights:

- Of the 1,398 NPs who participated in the survey, 21 percent said they had taken locums work. Of the remainder, 33 percent said they knew someone who had, and 46 percent said they did not know someone who had.

- When we asked how familiar they were with locum tenens and the services they provide to hospitals and medical facilities, 33 percent reported being very familiar and 44 percent somewhat familiar.

- One crucial question we asked was what each NP’s impression was of locum tenens. Twenty-six percent said very positive and 28 percent said somewhat positive. An additional 42 percent were neutral, meaning 96 percent of NPs had an either positive or neutral impression of locums.
When it came to reasons for working locum tenens, one-third of NPs surveyed take locums assignments to fill the gap between permanent positions, while more than one-quarter work locums in addition to a full-time position. Only 16 percent work locums exclusively. Of the 14 percent who chose the “other” option, their statements varied but include: not wanting a long-term commitment, avoiding monotony, having something to do in retirement, and gaining exposure to various areas of specialty before deciding on a long-term job.

And of the 288 NPs who had worked locums, 89 percent had at least a somewhat positive experience. Some of the top reasons they reported enjoying locums were:

- Compensation
- Working at various locations
- Paid travel
- Paid housing
- Skill-set expansion
- Paid malpractice insurance
- The opportunity to practice in underserved areas

There are some less favorable aspects of locums work that were also cited by some of the respondents. About 25 percent actually said there isn’t anything about locum tenens they don’t enjoy. The second-most popular response (23 percent) said locums are often not treated well by staff employees. Other reasons included working locum tenens doesn’t build a strong CV, the need to constantly move between locations, and low compensation.

The top reason NPs who had worked locums previously stopped working locums was that they had accepted a permanent position. This accounted for 65 percent of the responses.

When we asked how likely they were to work locums again in the future, 66 percent reported they were at least somewhat likely to do it again. And 95 percent of NPs surveyed said they would recommend locum tenens to their friends.
It's no secret hiring a physician can take months. In fact, it can take on average more than 200 days to fill a single position, at a potential revenue loss of $1.4 million. With a typical facility handling 23 searches per year, each unfilled position represents an immense amount of time, work, and money.

While there are many areas of opportunity for streamlining the job search process, one seemingly small but powerful place to put some focus is the job description.

The job posting is the first thing prospective physicians will see and it will help them make judgments about the job, your facility, and whether or not they want to pursue the position.

Providing the right details up front gives candidates and staffing agencies the information they need to minimize additional questions while improving your chances for getting a great physician in the door more quickly.

When creating your next job posting or providing staffing requests to a staffing agency, try implementing the following tips.

**Focus on the job title.**

This is the first introduction to your job and is often the reason someone clicks to read more. Make it enticing, short, and relevant.

1. **Important elements: Specialty + location + best feature**
2. **Length: 65 characters or less; list the most important info first**
3. **Avoid punctuation in the title; it causes display problems on the web**

**Building up the job description.**

The job description is what convinces people to apply. Make it appealing by giving details about key facts like the following:

- Specific skills or certifications required
- Unique benefits offered
- Highlights about your facility
- Highlights about your community (especially for significant others and children)
- Organization of support team

*Be sure to state clearly how a person can apply or get more details about the job.*
The words you use matter.

› Include keywords that help your job show up in searches
› Make your description 700-2,000 characters, not including spaces
› Avoid abbreviations unless they are well known in the specialty
› Keep it conversational and friendly

Do

› Be accurate and as detailed as possible
› Show your facility’s personality
› Use proper grammar

Don’t

› Copy and paste from another website (i.e., Chamber website)
› Use exclamation points or all capital letters

Did You Know?

Job descriptions with 700–2,000 characters increase applications by 30 percent.

Final Checklist.

☐ Does your job description appeal to you?
☐ Check your character count
☐ Check your spelling
☐ Review the job description once it’s posted

Sources:
2012 ASPR In-House Physician Recruitment Benchmarking Report
Merritt Hawkins’ 2013 Survey of Physician Inpatient/Outpatient Revenue
http://www.nejmcareercenter.org
Why you should pay attention to culture.

The rise of companies and brand ambassadors referencing a company’s “culture” can almost make it feel like a bit of a corporate buzzword. We can assure you it is anything but.

A strong company culture has both short- and long-term benefits. Organizations that cultivate and nourish great company cultures enjoy significantly lower turnover and better financial performance. With a projected physician shortage of as many as 90,000 by 2025, the market will get even more competitive. Having a culture that job seekers want to be a part of will help you retain current competitive advantage.

Cultivating a great culture.

Although compensation and location are top priorities when physicians or other providers consider a job offer, culture still plays a prominent role in their final decision. Here are a few of the areas that will help you get started on cultivating a strong culture:

1. It starts with leadership.

Have you heard the saying, “People leave managers, not companies?” It’s true. The relationship between employees and their leaders plays a critical role in employee engagement. Ultimately, leaders drive culture. Without their buy-in and participation, your culture efforts will go nowhere.

That’s why the first step toward cultivating a strong culture needs to start with your leadership team. At CompHealth, we have a dedicated leadership training program that is heavily focused on our core values and culture. This helps leaders understand not only what our culture is, but also why it’s important and how it can be incorporated into their daily lives.


The workplace climate is changing. Gone are the days where employees make their jobs their only focus. Instead, employees are putting an emphasis on creating a balance between their personal lives and their work lives. This goes for physicians, too.

CompHealth physician Dr. Johnny Shen chose to work locum tenens full time because he didn’t want to sign a contract with a facility that would have control over his vacation days and personal
time. Instead, locum tenens assignments give him the chance to be his own boss and be in control of his work/life balance. Something that is extremely important to Dr. Shen and other new grads.

To incorporate a culture focused on work/life balance, consider implementing job-sharing options for your staff and adding more NPs, PAs, or locum tenens physicians to help cover the patient load. Encouraging your team to have a better work/life balance will reduce their stress, increase their happiness, and help stem burnout—all of which benefits your facility and patients.

3

Use clear communication.

Clear, transparent communication is important to building a culture that people can trust. Methods may include internal communications, internal newsletters, road shows, town halls, or one-on-one meetings.

Remember to be upfront and openly communicate not only the what, but the why behind your decisions. Also, continuously communicate your values and culture to help your staff understand what your culture is and why it’s important.

4

Hire for culture fit.

Hiring for culture fit from the top down is extremely important to the validity and sustainability of your culture. We incorporate culture-related questions throughout our interview process to help us determine if the candidate is the right fit.

Equally important is being completely honest with the candidate about your culture from the beginning. The interview process is a chance to determine if the job is the right fit for both of you. Be transparent about your culture, the job requirements and expectations, and avoid anything that might be considered a misrepresentation. You’ll only end up breaking the candidate’s trust, which will have a negative effect on your culture.

There are many things that contribute to a strong culture, but these four areas are a great place to start. Remember, creating a culture that works doesn’t happen overnight. It takes effort and tenacity, and forces many of us to step outside our comfort zone and do business in a new way. But the return on your effort will always be worth it.
Every physician is looking for something different in a job. Though individual preference plays the largest role, a doctor’s age can be a factor in what he or she wants in a position.

When you hire a younger provider, you’ll likely get someone who is tech savvy. Those who have grown up with technology have no problems with electronic health records, data entry, or digital scheduling.

With fingers that were made for smart phones, they can help you reach out to patients in ways you may have never tried before—whether that’s texting appointment reminders, sharing test results electronically, or answering questions via email.

On the flipside, an older employee can bring a wealth of experience to your staff. They often understand the importance of relationships and can be a strong asset to your team.

A CompHealth survey of 1,000 U.S. physicians reveals that a majority of respondents, who are either at retirement age or nearing it, want to continue to work after reaching retirement age.

These seasoned physicians have no desire to trade in their stethoscopes for shuffleboard paddles any time soon, which is a good thing considering the current doctor shortage. We could all benefit from having more doctors in the workforce, and particularly from this group’s vast knowledge and experience.

Here’s a quick look at different generations in today’s workforce, including common challenges, skills, values, and what engages them in their work.

**Baby Boomers (Born 1946–1964)**

Though this generation is now the oldest in the workforce today, Baby Boomers resent being told they’re old or thought of in that way. However, electronic health records, confusing hospital computer systems and even new continuing education courses can be overwhelming for a seasoned nurse or technician who isn’t as comfortable with new technology.

Make Baby Boomers happy by ensuring they have plenty of hands-on training with new systems and time to understand them—and choose intuitive systems, where possible, that will be familiar to your staff. Additionally, give Baby Boomers the opportunity to mentor new employees and younger staff members, helping them feel empowered and important at work.

**Breakdown of workforce:**

- **97,751** Millennials
- **314,198** Generation X
- **499,115** Baby Boomers

*2014 FSMB Census of Licensed Physicians*
Generation X (Born 1965–1980)

Also known as “latchkey kids” because both parents worked outside the home, Generation X-ers make up a large percentage of the workforce and are known for being entrepreneurial. They work hard and adapt well to change, but they’re also “afraid to upset the apple cart” and let leaders know when things at work upset them or when they think they deserve a promotion. Generation X-ers are raising young children and also taking care of aging parents, so they desire flexibility with schedules and work/life balance.

Satisfy the Generation X-ers by frequently asking for their feedback in one-on-one settings or anonymous surveys to find out what your facility can improve. Where possible, give them flexibility with their shifts so they can come in later or leave early to care for children and parents. Offer them the opportunity to progress into leadership roles and implement new ideas within your organization.

Millennials (Born 1981–2000)

Having grown up with personal computers, cell phones, and the Internet, Millennials are often called “the entitled generation.” Millennials expect their workplaces to use up-to-date technology, give concrete reasons why seemingly outdated processes are in place, and show how they make the world a better place. Members of this generation are willing to work hard but crave balance and perks that allow them to bring their best selves to work (e.g., on-site childcare, paid time to volunteer). They are independent and often would rather get to work on their own than be part of a team.

Motivate your Millennials by giving them a chance to share their opinions about the workplace, implement environmentally friendly policies, and ensure they have up-to-date tools to make their jobs simpler. Pair them with Baby Boomers so they can help them with new technology and, in turn, gain wisdom and leadership skills from tenured staff members.

With these tips on interacting with different generations at your facility, you’ll be better able to tailor your leadership approach and find opportunities for change that can make everyone happy.
The rate of physician turnover is extremely high, with many observers predicting it to increase even more. Add to that the diverse impacts of the physician shortage, and you’ve got a challenging landscape that will require careful planning to navigate. For this reason, a staffing plan is an essential element of your success.

### Identify needs and challenges.

By engaging in early dialogue with your various departments, you’ll know whether they’re expecting growth or downsizing in the coming year. You can also identify which specialties are most difficult to staff and how upcoming retirements might affect your teams.

You should then map out a needs assessment (there are needs assessment tools available online) with each department stakeholder and determine your replacement or growth needs for the next 12 months.

### Research the market.

By taking the time to evaluate your staffing outlook, you can identify upcoming needs and possible threats to your success. This will improve your execution and long-term achievements. A good place to start is evaluating the resident/fellow outlook by specialty. You should also look at the other side of the spectrum, with trends in late-career physicians.

Another important aspect of research is determining what a competitive benefits package looks like. Evaluate your in-house resources and staffing partners to ensure you’re offering an enticing package.

Preventing your 2017 staffing plan.
Leverage multiple solutions.

The physician shortage may affect your facility in some areas more than others. Don’t underestimate the value of retired and semi-retired physicians, as you can consider re-engaging them for part-time work.

Advanced practitioners offer another solution that may help you fill gaps and meet evolving needs. More and more facilities are turning to them as a cost-effective way to meet demand.

There are also times when an outside staffing resource makes sense. Locum tenens can provide a reliable and flexible solution, especially in times of unexpected staffing gaps.

Involve your staff.

Talk to your physicians to get their opinions on the process. Specifically, gauge their level of burnout and how that might affect your plan. This is important to note, because specialties like emergency medicine, family medicine, critical care, and urology report burnout rates up to 54 percent.

The top three reported causes of burnout among all specialties are bureaucratic tasks, excessive work hours, and computerization, so you can help to address the first two by including your physicians in the discussion of workload.

Create a flexible plan.

Even the best plans need to accommodate the inevitability of change. While your facility may experience growth, there may also be things like unanticipated retirements or staff departures.

For this reason, constant reevaluation is critical. If you’ve included physicians and other staff members in the conversation, you’ll often have a better view of the future.

By considering all angles of the staffing puzzle, such as retaining current staff, re-engaging physicians who are experiencing burnout, and leveraging locum tenens, you can better prepare for the future.