Challenges Recruiting and Retaining Healthcare Providers

3RNet
Matching healthcare professionals with communities across the nation

www.3rnet.org

The National Rural Recruitment and Retention Network for Healthcare Professionals
A Surplus of Doctors??

For the past 25 years, the AMA and other industry groups have predicted an excess of doctors and worked to limit the number of new physicians.

In 1994, the Journal of the American Medical Association even predicted a surplus of 165,000 doctors by 2000.
Do We Have a Surplus Now??

FACT:
Throughout the US, 340,000 physicians are about to start large-scale retirement. This process began in 2010.
"We're looking at a deficit of approximately 200,000 physicians by 2020... we will still not catch up [to the demand] in the lifetime of anyone in this room or that of our children."

Health Economist Richard Cooper of the University of Pennsylvania at the 14th annual Princeton Conference sponsored by the Robert Wood Johnson Foundation (Health Matters, Congress Daily, July 8, 2007)
THE NATIONAL CHALLENGE

By 2020, a Deficiency of 100,000-200,000 Physicians is Expected in the United States *

- It Takes Time to Recruit a Physician
  - 9 Months to 1 Year
  - 6 Site Visits
- Residents and Fellows Receive Over 100 Solicitations During their Final Year of Training
- Approximately 23,299 Residents and Fellows Graduate Annually **

* Source: Center for Health Workforce Studies, University of New York, Albany
** Source: Practice Match, Inc.
About 68% of physicians in the U.S. today are specialists.

Breakdown:

<table>
<thead>
<tr>
<th>Generalist</th>
<th>Specialist</th>
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<tr>
<td>206,000</td>
<td>405,000</td>
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Primary Care and Health Care Reform

- With Health Care Reform, the demand for Primary Care Providers will increase even more.
Challenges of Rural Recruitment

20% of U.S. population lives rural

...only

9% of physicians practice there

...only

3% of recent med school grads plan to
WHY?

- Medical students who are closest to medical schools and from the most urban areas and who have family with the highest levels of income and education are the most likely to be admitted to medical school.
- These elite students are the least likely to choose rural and underserved locations and family medicine and primary care.
- They are replacing the lower income, middle income, white, and rural born medical students who are most likely to distribute.

(Dr. Bob Bowman, Sept. 2007)
In 2010, a family physician made, on average, $164,000 a year. A radiologist, in contrast, made an average of over $400,000, according to Salary.com.

It is difficult for a physician to come out of medical school with $200,000 in debt and choose a Primary Care specialty that will earn them $164,000 or less, when they could choose a program that could earn them $400,000 plus.
Key factors Influencing the Future Supply of Physicians

- Changing lifestyle choices of physicians (generation X)
- Aging of physician workforce
- Increased use of mid-level providers
- Nearly half of residents are women, who work, on an average 25% fewer hours than male physicians
We need to act!!

- Newspapers have been writing headlines about the upcoming physician shortage for years.

- Share this information with our CEO and our Board of Directors!

- Bring awareness to the US Medical Schools

- Establish an aggressive physician recruitment program as well as a streamlined physician retention plan
Here Is What We Know...

- The rural physician candidate pool is shrinking
- Competition for the reduced pool is HOT!
- Candidates are signing contracts in their second year of residency
- The Age of Technology is now
- Candidates are inundated with contacts from recruiters
- Candidates expect immediate and specific information about the practice opportunity
- Deal breakers/sealers – Call, C-sections, guarantees
We Need to Focus on Retention
Medical Staff Retention

- Recruitment is becoming more costly due to demand and/or distribution and/or specialty issues
- Average costs to recruit $30,000
- Turn over rates are 5% and up
- A well planned retention program reduces costs and turn-over

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Medical Staff Retention

- Causes of Turnover
  - Practice is different than expected or explained
  - Lack of or poor feedback during first months
  - Desire to be closer to family
  - Lack of perceived activities
  - Never joined the community
  - Lack of control over practice
  - Lack of communication
  - Lack of appreciation

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Medical Staff Retention

- Retention is part of the process
  - Strategic planning
  - Needs Assessment
  - Recruitment
  - Interview Process
  - Hiring
  - Orientation and Relocation
  - Retention

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Medical Staff Retention

- Recruiting as Retention
  - Define the criteria and requirements
  - Screen for the best “fit” based on criteria and knowledge of organization and service area
  - Establish common expectations during interview and discuss
  - Offer the significant other support
  - Integrate retention into the interview process

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Medical Staff Retention

- Retention Planning
  - Key is to maintain regular contact with physicians and spouses after recruitment
  - Should focus on physician and family acclimation to community
  - Keep needs of family in mind because physician satisfaction often depends on family adjustment
  - Efforts not wasted – less costly to keep a physician than to recruit another

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Medical Staff Retention

- Orientation is the first step in a retention program
- Professional and personal issues and activities should be addressed
- All retention plans are similar, but variations reflect organizational differences
Medical Staff Retention

- Summary
- Resources

National Rural Recruitment and Retention Network
Welcome
The National Rural Recruitment and Retention Network (3RNet) members are not-for-profit organizations helping health professionals find practice opportunities in rural and underserved areas throughout the country. Some of the health professions we serve:
- Physicians
- Dentists
- Nurse Practitioners
- Physician Assistants
- Registered Nurses
- Mental Health Professionals
- Other Health Care Professionals
- Administrative and Management Professionals
- Allied Health and Support Staff

Featured State
Visit this week's featured state:
North Dakota
Select A Location

Go

VIEW PRINTABLE LIST OF ALL MEMBERS

LOCATIONS

OPPORTUNITIES  ABOUT US  LOCATIONS  CONTACT

Cherokee Nation

US PACIFIC STATES

View the full printable location list for contact information.

Montana
Oregon Healthcare Recruitment

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johnsjo@ohsu.edu
Oregon Office of Rural Health

General Information:
The Oregon Office of Rural Health (ORH) Recruitment and Retention program posts active opportunity information on the 3RNet Oregon Opportunities page - providing you comprehensive practice information and direct HR contact. 3RNet allows registered candidates to view practice opportunities across the state. New information is added as opportunities become available. If there is a particular location you are interested in exploring, please contact Jo Johnson, our recruitment program coordinator, for assistance in determining anticipated practice opportunities. Candidates may contact the listed sites directly, or call Jo Johnson for more information. Jo can also provide additional information on loan repayment options and other incentives to practice in rural Oregon.

Resources
- Oregon Office of Rural Health
- Travel Oregon
- Oregon Wikipedia Page

Current Openings:
- PHYSICIAN
- NURSE PRACTITIONER
- PHYSICIAN ASSISTANT (PA)
- REGISTERED NURSE (RN)
- DENTIST
- PHARMACIST
- OTHER
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To Learn More About the 3R Net

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