



Physician Age and Gender vs. Work Ethic and Retention



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Are younger physicians really lazy? The commonly held idea that older and male physicians are willing to work harder than younger and female physicians is simply not accurate today, if it ever was. All physicians today, regardless of age and gender, demand quality of life and organizational support. This has translated directly to working less hours and seeing fewer patients.

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Summary

A random sample of U.S. physicians were surveyed in early 2006 to determine if there are gender and age differences among practicing physicians regarding their work ethic and their desire to leave existing employers.

Differences among age were found regarding desire to leave the present employer. No significant differences were found regarding work ethic by age. Additionally, no significant differences were found by gender for neither desire to change employers nor work ethic.

Roughly one-third of physicians are highly dissatisfied with their present organizations and are motivated to leave. This is bad news for healthcare provider organizations since projections indicate a significant shortage of physicians (as many as 200,000) by 2020¹. Accordingly, turnover potential in a “seller’s market” for physicians and reduction in work by physicians creates a potential problem for administrators in the near future.

Methodology

The survey, conducted by Delta Physician Placement and Drury University, compared responses of 264 physicians from a national random sample. The responses obtained a statistical certainty of 99% with a variance of $\pm 1\%$.

Purpose

Today’s young physicians, as reported by researchers, place emphasis upon a positive quality of life in addition to a fulfilling career in medicine^{4, 12, 13}. Accordingly, new physicians—both men and women—want a better balance between work and home. In turn, physicians are now working less hours than physicians who, in the 1970’s and 80’s, typically worked 60 to 80 hours per week^{6, 13}.

According to a Medical Economics 2004 survey report, physicians of all age groups worked an estimated 50 hours per week. At the same time,

the number of patients seen during those hours dropped to 108 in 2004, down from 112 in 2003. Women physicians, who are a growing share of the physician population, reportedly work less hours than their male counterparts.¹³

The focus on for lifestyle has also impacted choice of specialty by U.S. Medical Students; some specialties, such as radiology, dermatology

and orthopedics are considered to be “lifestyle friendly” when compared to “lifestyle killers” such as general surgery and OB/GYN^{4, 12}.

Key Findings

In contrast to popular thought, the study found no difference in work ethic across age or gender. Generally, all physicians practicing today want quality of life, not just women and young physicians. Only sixty percent of those surveyed believe physicians should schedule at least 4.5 days of patient contact per week, and roughly one-third (32%) prefer not to work with patients continuously during each week.

Two open-ended questions were asked. First, what would keep physicians at their present practice location? Second, what would aid the decision to

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leave their present practice location? Physicians reported workload was a major factor concerning intent to change positions. Forty participants (15%) listed workload as a reason to stay while thirty-nine (15%) listed workload as a reason to leave. Eighty-four (32%) listed compensation while thirty-nine (15%) indicated family time as factors influencing their decision to leave.

Although there is no significant difference in gender with intent to change positions, there is a significant difference in age. Physicians in the middle of their career—between 35 and 50 years old—are the highest retention risk by a significant amount. Forty-six percent of physicians in this group described themselves as “highly motivated” to change positions, compared to thirty-two percent overall. Results indicate that the early and mid-career physicians of both genders are motivated to change positions, a large majority of which are “highly motivated.”

The most important factor to retain physicians is organizational leadership. Sixty-five (25%) of the physicians responding to questions concerning factors that influence staying or leaving the present employer listed organizational support as a reason to stay. Forty-seven (18%) listed lack of support as a reason to leave. Over one-third (36%) of all physicians responding to the survey said their present employer “falls far short of expectations,” further supporting the importance of organizational leadership in physician retention.

Implications

The most important factor extracted from the data, both in the statistical analysis and the free-response items, was organizational culture and administrative leadership. Previous research in healthcare and retention strongly supports the idea that the administration is the biggest influence on job satisfaction and subsequent retention or turnover^{9, 10, 11}.

Past research and the implications of this study clearly indicate that to increase retention, healthcare administrators need to ensure all physicians achieve personal satisfaction from their practice at the organizational level. Given that one-third of physicians in this survey are “highly motivated” to leave their employer, combined with the impending physician shortage crisis, a provider organization’s ability to survive would be seriously jeopardized by the potential loss of one-third of its physicians.

Ensuring that physicians are satisfied with their practice location will require that administrators of provider organizations must institute

positive, consistent communications at a higher level than present. This will also require careful consideration of needs and wants, as well as managing physicians’ expectations on a proactive basis by administrators. This is not a new idea^{2, 3, 5, 7, 8} although, as this study indicates, it has not been widely instituted. Healthcare management must make leadership their first priority, above their administrative responsibilities, in order to ensure physician retention.

The findings of this study show the need for provider organizations to market internally to their stakeholders, and this is supported by tangible evidence. For example, Al Stubblefield, President of Baptist Health Care, one of *Fortune’s* “100 Best Companies to Work For in America,” has clearly declared success to be derived from happy and engaged employees. This includes physicians. In 1995, Baptist Healthcare was at the bottom: terrible patient satisfaction scores, serious employee morale problems and turnover throughout the hospital system. In 2004, evidence of the organization’s turnaround was clear when it won the Malcolm Baldrige National Quality Award in Healthcare. Stubblefield writes, “We quickly realized that the satisfaction of our patients was directly related to the satisfaction of our employees”¹⁴.

Action is the key to success for any organization. Like Baptist Healthcare, organizations that support employees enjoy low employee turnover, excellence in performance, delighted patients and financial success.

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Delta Physician Placement, formerly Delta Medical Consulting, is the nation’s second-largest physician placement firm. The Delta Companies offer permanent and locum tenens staffing solutions nationwide for physicians and allied healthcare professionals through four companies: Delta Physician Placement, Delta Locum Placement, Delta Locum Tenens, and Liquid Medical Recruiting.

Drury University has taken the lead among private universities in the Midwest in truly integrating a liberal arts education with comprehensive professional programs. At Drury, the power of intensive faculty and staff mentoring in small-class settings creates an atmosphere of high academic expectation grounded in a supportive learning community, an ideal combination which produces leaders ready to serve in a global community.

For information about this survey please contact Marc Bowles, Vice President, The Delta Companies at 800-521-5060 or mbowles@thedeltadifference.com.



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