

Summary of the 2014 ASPHO Workforce Survey Results

What are the most significant findings from the survey (and the ABP data)?

1. The clinical pediatric hematology/oncology workforce today is made up of 55% physicians and 45% APPs.
2. Of the graduating residents who are entering PHO fellowships, 70% are female.
3. The distribution of PHO physicians varies widely across the United States and is an area for further study.
4. Evidence suggests that in the next 3 years the supply of graduating PHO fellows ($n = 450$) will exceed the demand, because only 340 positions are expected to become available (3 times the number reported by survey respondents because this survey was only completed by one-third of the programs). The difference may actually be even greater, however, because the number of graduates is fairly certain while the number of expected openings is less certain. The number of projected openings is what division directors anticipate needing, but they may not all be approved at the administrative level.
5. "Why has the number of PHO fellows more than doubled in the past 14 years?" is a question that deserves further study.
6. A 1.0 clinical FTE PHO physician is expected to attend inpatient service 12 weeks per year, see patients in the clinic for 6 half-day sessions per week, and generate 3,100 wRVU's per year
7. On average, programs have one clinical FTE PHO physician for every 18 new oncology patients diagnosed annually. Because the average PHO physician is 60% clinical, the average program would have one PHO physician per 11 new oncology diagnoses per year. The number of hematology patients followed in a practice does not seem to alter this ratio much.

Who responded to the survey?

- Division directors from 202 institutions were invited to complete the online survey in March 2014. Sixty-five division directors from 32 states and two centers in Canada completed the survey for a response rate of 32.2%. The group of responding centers appear to be representative of pediatric hematology oncology centers in the United States:
 - Two-thirds of centers ($n = 41$) perform bone marrow transplants
 - Sixty-three percent of the centers were described as university/academic centers ($n = 41$).
 - Twenty-three percent of the centers were described as hospital-based programs ($n = 15$).
 - Median number of new oncology diagnoses per year at each center is 85.
 - Median number of hemoglobinopathy patients followed at each center is 150.
 - Median number of bleeding disorder patients followed at each center is 100.

What did we learn about fellowship programs?

- Thirty-two of the 65 programs reported having an ACGME-accredited PHO fellowship program. These training programs constitute 46% (32 of 70) of all accredited fellowship programs in the United States. The median number of fellows (all levels) at each program was 6.
 - Twenty-six of the programs reported on how quickly 2013 graduates secured a job, and 51 of 53 graduates secured a job within 6 months of fellowship

completion (the types of jobs obtained or if they were within the subspecialty was not reported).

- Currently, within these 32 training programs, there are approximately 192 fellows in training. If these centers are representative of all 70 accredited programs, there are approximately 420 PHO fellows currently in training.
 - According to the ABP, in 2012 there were 496 PHO fellows at all levels, which is an increase from 230 in 1998

What did we learn about PHO physicians today and their work?

- PHO physicians (in 65 programs)
 - Though we did not ask about the gender or ethnicity of the providers at each center, the ABP reports that among 124 first-time PHO boards test takers in 2012, 89 were female (72%) and 35 were male (28%). In 2001, the gender distribution was 50% male and 50% female.
 - 661 Full-time/ 75 Part-time/ 431.8 Clinical FTE's[AU: MISSING WORDS? IS THIS THE DISTRIBUTION OF STAFF AT THE 65 PROGRAMS?]
 - The average center had 10–11 physicians and 6.6 physician clinical FTEs with 2.5 of the physicians having additional degrees beyond MD/DO.
 - Eight of the 65 programs (12.3%) had hospitalists making up 25.3 clinical FTEs.
 - Work characteristics of the PHO physician
 - A typical 1.0 clinical FTE PHO attending spends 12 weeks (median) covering the inpatient clinical service each year.
 - On average, a 1.0 clinical FTE spends 6 half-days seeing patients in the clinic each week.
 - The typical clinical physician spends 70% of his or her time providing out-patient care and 30% providing in-patient care.
 - Annual wRVU target/goal for 1.0 clinical FTE PHO physicians is 3,100 (median)
 - 1.0 clinical FTE physician for every 18.5 new oncology patients

What did we learn about advanced practice providers within PHO practices?

- Advance practice providers (in 56 programs)
 - 330 full time/ 79 part time/ 350.9 clinical FTEs (29% in patient/ 71% out patient)
- 44.8% of all PHO clinical FTEs in 2013 were APPs. Though our workforce surveys have only been conducted the past 3 years, the taskforce members believe this proportion has increased dramatically in the past decade. Although APPs do perform some tasks that were previously performed by physicians, many are taking on tasks that house officers completed in the past.
 - One of the survey respondents included this comment: "...80% of our clinical work can be done extremely well by APPs at less cost. As the field of PHO hires more and more APPs, we will need to train fewer and fewer fellows."
- 1.0 clinical FTE (physician and APP combined) for every 9.4 new oncology patients

What changes have occurred in the physician and APP workforce in the past 3 years, and what changes are anticipated in the next 3 year?

- Changes in the PHO workforce both past and future
 - Physicians
 - Between 2011 and 2013, 80 physicians left 63 programs.

- Between 2011 and 2013, 146 physicians were hired within 64 programs.
 - Among new hires, 61 were graduating fellows who remained at training programs.
 - Seventy-eight percent of new hires completed training within previous 5 years.
- Net gain of 66 physicians within these programs in past 3 years
 - What has been the justification for adding providers if the overall number of patients has remained stable? There is a feeling [AU: AMONG PHYSICIANS?] that the providers work has become more complex, such as by working with—electronic health records, facilitating [AU: OK AS EDITED?] pre-authorizations, and providing care that may have been provided in part by house officers who are no longer available. There has been conjecture that a new graduate will not be willing to put the same amount of time into the job as a retiring physician might have, resulting in more than one new hire being needed to replace a retiree.
 - One survey respondent commented, “The trend has been that it takes more work to accomplish the same amount of patient care. Over time, changes in the system (EMR, insurance calls, etc.) have steadily decreased my productivity.”
- Between 2014 and 2016, 64 programs plan to hire a total of 112 physicians.
- APPs
 - Between 2011 and 2013 (64 programs), 71 APPs were reported to have left their position. [AU: OK AS EDITED?]
 - Between 2011 and 2013, 64 programs hired 126 APPs.
 - In the past 3 years, there was a net gain of 55 APPs within these programs.
 - Between 2014 and 2016, 64 programs plan to hire about 52 additional APPs.

How are PHO physicians distributed throughout the country?

Division directors and fellowship program directors have observed that fellowship graduates find it most difficult to find faculty positions in large metropolitan areas in the Northeast, Midwest, and California. The distribution of providers was not addressed in this survey. The ABP has reported that distribution of PHO physicians is uneven, ranging from 384,794 children per one PHO physician in West Virginia to 7,022 children per one PHO physician in Washington, DC. The average is 43,440 children per PHO physician. The four states with fewest PHO physicians for the population are West Virginia, Montana (222,354 per one PHO physician), Mississippi (150,048 per one PHO physician), and Nevada (110,629 per one PHO physician). The areas with the highest density of PHO physicians are Washington, DC, Massachusetts (15,272 per one PHO physician), and Maryland (15,659 per one PHO physician).

Have we observed any trends?

In this third year of the ASPHO Workforce Survey, it was hoped that we could start analyzing trends. As we reviewed the results, we realized that only 26 centers had responded to the survey during all 3 years. The results from these 26 centers were analyzed for trends, but no significant trends were identified.

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