

Four Moments in Fit-for-Purpose Physician Human Resources (PHR) Planning

1 Frame the Question

Assess the current state and desired future state, in order to define the question(s) to be answered or the decision(s) to be made.

Example Questions:

- What decision do you have to make?
- What resources are available?
- What is the timeline?

2 Define the Needs

Assess current needs and future needs in order to assess the demand for physician human resources and health care services.

Example Questions:

- Who are your patients?
- What types of care do they need?
- What providers or resources does the clinic/community need?

4 Map out the Infrastructure

Identify the gap between what you have and what you need, both now, and in the future.

Example Questions:

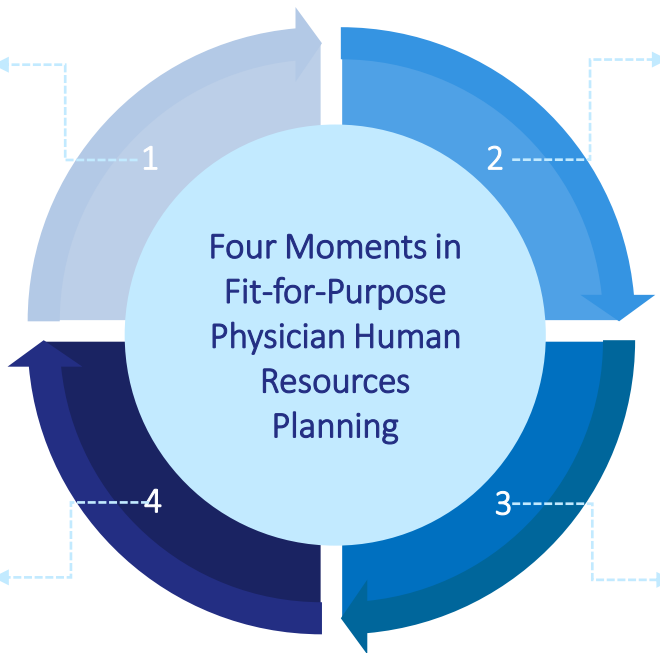
- What is the gap you need to fill? Care, workforce resources, funding, infrastructure, etc.?
- What lever(s) do you have?

3 Assess the Capacity

Assess the current resources to understand the supply available, and the capacity requirements to meet future demand.

Example Questions:

- Who is in the workforce?
- What service(s) do they provide?
- What service(s) *could* they provide if properly resourced and supported?



Practical Considerations to Guide Physician Human Resources and Workforce Planning



A) Recognition of Patient and System Health Care Needs

- Consideration of Patient Perspective and Experience within the System
- Appreciation of Equity, Diversity and Inclusion (EDI)
- Sustainability



B) Use of Evidence Based Approach to Physician Human Resources Planning

- Evidence-Based Planning
- Data capture in accordance with Minimum Data Standards
- Use Scenario Analysis to Future-Proof the Workforce



C) Optimization of the Scope and Nature of Physician Practice

- Integrated Decision-Making
- Working to Full Scope of Practice
- Consideration of Full Career Trajectory
- Provider Wellness



D) Optimization of the Training Pathway

- Sharing Intelligence Generated from Planning with Medical Trainees
- Provide Support for Decisions Related to Allocation of Training Positions

Using Best Practices

Promoting a Sustainable Workforce: Issues & Best Practices

✓ Workforce Sustainability

Optimization Does the group/team/dept/service have a balance of early-, mid-, and late-career physicians?

Management Has transparent policy-making, decision-making, and scheduling been made a priority?

Wellness Is there a commitment to acknowledge, support, and prioritize physician wellness?

✓ Scheduling

Equity Is scheduling equitable?

Autonomy How much control over scheduling do physicians in my group/team/dept/service have?

Flexibility Is there a process to change the schedule or exchange shifts?

✓ Protected Time

Do physicians have regularly scheduled protected non-clinical time?

Do physicians have protected time for leadership and administrative activities?

Do physicians have protected “creative professional” time?

✓ Back-Up Systems

Is a system in place (2nd call or back-up call) to manage workforce emergencies and unforeseen circumstances?

Is “twinning” with another community, group, service, or department to provide cross-coverage an option?

✓ Work-Life Balance

Is physician work-life balance prioritized?

Do physicians have formal, regularly scheduled vacation time?

Does my group/team/department/service have regular locums to cover leaves?

Is job-sharing an option?

✓ Formalized Processes

Does my group/team/department/service formally engage in:

- Succession planning?
- Mentoring?
- Peer support?
- Transition-to-practice support?

✓ Administration

Is administrative support available to physicians?

Are leadership and administrative activities remunerated or compensated?