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Maximizing Your Pediatric Radiology Recruitment

Trying to hire a pediatric radiologist? You are not alone. A recent review of jobs indicated there are over 125 open positions for pediatric radiologists in the United States. These jobs vary from full-time pediatric focus to partial pediatric focus in a general radiology practice.

One of the reasons for the increased demand is the increased construction of pediatric hospitals as well as the growth of existing children's hospitals (over 160) in the United States. Another reason is that referring physicians want to ensure that their pediatric patients receive quality care from experts trained in the unique pediatric conditions – their disease progression and treatment options. Parents and physicians also prefer that children be cared for in a pediatric environment, which has resulted in the growth of free-standing and academic children's hospitals.

The American Medical Association (AMA) tracks all U.S. physicians, and while they show over 34,000 radiologists, only 623 are pediatric radiologists (those who declare it as their primary specialty). Of those, only 494 are in office-based or hospital practices and are age 60 or younger, meaning the rest are in a stage of life where they may be considering a part-time schedule or even retirement.

To compound the problem, the Accreditation Council for Graduate Medical Education (ACGME) reports that for the 2009–2010 fellowship year, only 76 of the 113 pediatric radiology training slots were filled (67.2%). Of 46 approved programs, 14 did not fill any of their slots (30.4%). So, in addition to an aging workforce, there is a very small group of graduating fellows each year.

As you can see, there are few pediatric radiologists available to fill the 125 current open positions! So, if you are recruiting a pediatric radiologist, is your financial package competitive? We work with most of the graduating fellows in the specialty each year, and in the past three years, we have seen more pediatric radiology fellows join private radiology groups because they can earn a first year salary of up to \$400,000, which goes a long way towards paying back their educational loans. Some of these practices offer partnership at low or no cost, plus productivity incentives, even in the first year of practice.

Unless your practice offers a competitive financial package, unfortunately, the chances of your opportunity standing out are slim. (Exceptions would be if a pediatric radiologist has a tie to your community or you provide a specific academic or research component of interest to a candidate.) Even then, if you are going to compete for some of the finest graduating fellows, your minimum salary needs to be in the \$350,000+ range.

Since the competition for pediatric radiologists is so fierce, here are several tips on how you can successfully recruit a pediatric radiologist to your institution:

- **Become invested in the recruitment effort.**
In order to successfully recruit, enthusiasm must come from the top on down. Be proactive with your team and ask them for referrals of physicians they know.
- **Make the practice as attractive as possible.**
An overworked pediatric radiologist will not only be unhappy, but can become a liability. If needed, invest in an overnight teleradiology service or other call sharing arrangements, or even locum tenens, so your physicians will remain fresh and vital.

- **Consider the benefits of retaining a professional search firm with experience in the subspecialty of pediatric radiology.**
The right firm will be able to provide a solid track record of placements in a variety of practice settings. They will save you time and expense because the candidates they present to you will possess the criteria you have defined and will already be well-acquainted with your practice before you speak with them.
- **Make the interview visit the most important agenda item on your calendar.**
Your professional search consultant will be able to guide you through the proper interview itinerary that will result in a successful visit. If there is a spouse or significant other, it is vital that you invite him or her as well. A recent survey we did indicates the practice location and family/lifestyle issues influence 90% of the physician's decision-making.
- **Be prepared to make a competitive offer shortly after the candidate visits.**
Remember, pediatric radiologists are in high demand so you cannot delay if you decide you want a particular candidate. These physicians have countless job options, including lucrative teleradiology contracts and locum tenens work. If you are concerned about the finances, take the time to consider what a radiologist with pediatric radiology expertise can bring to your patient care services and also consider what the loss of income may be due to decreased referrals. If you are a hospital, consider the loss of revenue from surgery, pathology, lab, and inpatient care that will result, as well as the loss of confidence by referring physicians or community members.

In short, recruiting in pediatric radiology is a highly competitive and challenging undertaking. Do not leave anything to chance or luck. Take whatever actions are necessary to maximize your likelihood for success.

To learn more about how to successfully recruit a pediatric radiologist, please contact us.

Top 10 Ways to Lose a Candidate

1. Do not contact the candidate promptly when you receive the CV or resumé. This will highlight your lack of interest and allow another medical group to hire him or her before you.
Instead, make it a priority to review CVs and resúmes upon receipt. Respond to the candidate within 48 hours so he or she is aware of your interest.
2. In your first conversation with the candidate, discuss the negative rather than the positive aspects of the position.
It is important to stay focused on the benefits of the position for your organization and for the candidate's career growth.
3. Do not schedule a prompt interview and do not pay for the candidate's interview expenses.
Act promptly to keep the candidate's interest and make him or her feel important. Your competition will reimburse for interview expenses and so should you.
4. Ignore the needs of the candidate's spouse or significant other.
Instead, include this key person in the process; it will be appreciated and may be exactly what it takes to recruit the candidate.
5. Allow the candidate to eat dinner and tour the community alone.
A dinner with future colleagues or community members with similar interests and a community tour with a knowledgeable resident of the area will help the candidate get connected and able to envision life in your community.

6. Make sure the candidate does not have an opportunity to meet all the members of the practice or department members.

Instead, provide opportunities for the candidate to meet and greet, such as a luncheon with the department or group members.

7. Be lax in deciding on your interest in and follow-up with the candidate after the interview.

Your delay will allow another practice time to recruit the candidate. It will also leave the candidate feeling unsure about your level of interest.

8. Fail to promptly provide the candidate with a complete offer/contract when promised and let the candidate have as long as he or she wants to commit or decline.

At this stage in the recruitment process, it is critical that you deliver on your promises. Give the candidate a reasonable but established deadline to reply to your contract offer.

9. Renege on promises made – orally or in writing.

Instead, be diligent in recording the specific conditions to be met by the hospital or practice, and ensure they are included in contractual language.

10. Do everything you can to leave out that personal touch when working with the candidate.

Everyone has a need to be wanted. If you go the extra mile for your candidate, you have a greater chance of filling your open position and retaining that physician for the long run.

For more tips on how to successfully recruit a candidate, please contact us.

Increasing Future Reimbursement via Patient Centered Medical Homes

The latest buzz in primary care is the development of the Patient Centered Medical Home (PCMH). What is a Medical Home? The American College of Physicians, the American Academy of Family Physicians, the American Academy of Pediatrics and the American Osteopathic Association have jointly defined the medical home as:

"model of care where each patient has an ongoing relationship with a personal physician who leads a team that takes collective responsibility for patient care. The physician-led care team is responsible for providing all the patient's health care needs and, when needed, arranges for appropriate care with other qualified physicians. A medical home also emphasizes enhanced care through open scheduling, expanded hours and communication between patients, physicians and staff."

How can your practice be part of the NCQA Recognition Program and receive the designation of PCMH? The National Committee for Quality Assurance provides survey tools for practices to determine if they are appropriate candidates for inclusion in the Medical Home and Physician Practice Connections (PPC) programs. Application for recognition in these programs has strict requirements in the following areas:

- Access and Communication
- Patient tracking and registry functions
- Care management
- Patient self-management support
- Electronic prescribing
- Test tracking
- Referral tracking
- Performance reporting and improvement
- Advanced electronic communications

Applications are made to and recognition is awarded by the NCQA. Many private and public health plans and employers are considering projects to recognize and compensate practices as PCMHs. Practices earning this PPC-PCMH recognition may be eligible for additional payment in the future. NCQA's Physician Recognition Programs have recognized nearly 10,000 physicians nationwide for excellence. The NCQA is broadly promoting practices and health plans that have attained recognition as PPC or PPC-PCMH practices.

For more information about Patient Centered Medical Home, visit www.ncqa.org or www.acponline.org or www.aafp.org.

Compensation Corner

2009 Mean Compensation for Pediatric Hospitalists (based on 2008 data)

Overall: \$170,000
Academic: \$125,000

By Region

East: \$165,000
Midwest: \$145,000
South: \$195,000
West: \$170,000

In the next issue of Passion 4 Pediatrics, we'll discuss Medical Manpower Planning.

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