



Interior Health

Guide to Successful Long-term Physician Recruitment and Retention

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INTRODUCTION

The intention of this handbook is to provide a guide, that when considered throughout the physician recruitment process, can support a strategic and thoughtful way of enhancing the physician complement working in your community. We believe that this guide can be used by anybody involved in physician recruitment such as physicians, community representatives, recruiters, Health Authority staff and other stakeholders, all of whom can be the general “you” we refer to in the document.

Interior Health’s Physician Recruitment and Physician Compensation Planning and Initiatives teams have worked collaboratively to support successful recruitment into a number of difficult to fill physician vacancies. We realized that our combined approach was proving to be successful and believed that if we could document the steps we were taking to support recruitment and retention, both pre and post physician acceptance of the position, then we could build overall capacity with the hundreds of people in Interior Health’s region who are involved in physician recruitment.

Our experience is that this approach supports successful long-term recruitment and retention of physicians because it often leads to recruitment of new physicians who are a good match for both the vacant position and the community and who are better supported in both professional and personal areas when they arrive. Consequently, it leads to improvements in access and medical services to patients living in communities within the Interior Health region. This guide is intended to share our informally developed approach to support the efforts of anyone involved in physician recruitment within Interior Health, and we hope it will be useful to others.

DEFINITION

Physician recruitment includes the process of identifying the need for a physician within a practice and community, summarizing the practice description and requirements for the role, advertising the vacancy, choosing the most appropriate candidate for the position, and making all of the preparations required to enable the new physician to begin work. Retention actually begins on day one when the new physician starts working.

IDENTIFYING THE NEED

In some cases, the need for a physician may not be obvious at first and is not necessarily a simple replacement of the services provided by the departing physician. Some questions to consider when identifying your need:

- What physician services and coverage do you need provided?

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- Is the need in one community only or does it include support / outreach to nearby rural communities?
- Use this opportunity to plan for short and long term service and coverage needs; is this a good time to make changes to how services are delivered and by whom?
- Does this position align with Interior Health’s Physician Resource Plan? Do you know how to find this out, and how to recommend a change to the Plan if necessary?
- Good forums for discussion with Interior Health and the physicians in your community are your local Chief of Staff office and/or Division of Family Practice. They may bring applicable discussion topics forward to other groups such as the Local Medical Advisory Committee.

WHEN DO I START RECRUITING?

Ideally, recruitment planning begins as soon as you anticipate that there will be a future change in the physician complement in your community or an increase in need due to expanding population, aging population, etc. For example, conversations to Identify the Need can begin as soon as a physician begins talking about retiring in the next 1 to 2 years, and definitely when the physician announces his/her retirement date.

WHAT DOES “FULL TIME” MEAN?

The definition of “part time” or “full time” is unique to the physician group’s practice and the services required in the community. It is relative to other physicians in the community or practice group and should consider the overall coverage needs and what the other physicians in the group are providing.

You should anticipate both short-term and long-term needs. For example will another physician in the group want to reduce his/her hours in the near future as he/she approaches retirement or parenthood?

When advertising for the vacant position, a robust practice description (see below for more details) is what supports the “part time” or “full time” requirement. This includes the number of physicians in the practice group, service locations and hours of coverage at each location, on-call requirements, and any other factors describing the amount of service required. Be as specific as you can, and keep in mind that a full time position can be described as FTE (Full Time Equivalent), percentage, or total hours per week, month, or year. Practice descriptions can change over time, so it is important to review the description even if it has been previously done.

WHY IS THERE A NEED?

Providing the “story” of your community’s vacancy to candidates during the recruitment process can support recruitment by reducing uncertainty about the position. It is important to describe why the vacancy exists in a way that candidates will understand. (e.g. retirement after 20 years in this practice)

ABOUT THE PRACTICE

DEFINING THE PRACTICE

The details of the position or medical practice should be determined before recruitment efforts begin. This includes the following types of factors:

- Description of clinical services provided (for some types of Specialists, this may include identifying specific procedures that will be performed)
- Service locations such as clinic, hospital and any others
- Scheduled access to specialty equipment or operating room (if relevant)
- On-call expectations and required skills to participate in on-call schedule
- Vacation coverage amongst the practice group
- Work-hour flexibility
- Working relationships with inter-disciplinary team members
- Working relationships with other physician groups (e.g. participation in collaborative care)
- Access to eligible physician compensation programs (e.g. Rural Locum Program, Rural Retention, Medical On Call Availability Program)
- Clinic overhead arrangements or office agreements including responsibility for management of clinic staff
- Description of local hospital and community services available to patients (e.g. ER, Surgical, Hospice, Community Mental Health, other types of Specialist programs)
- Description of travel distances between primary service locations such as clinic and hospital

For all Specialist Physician positions, a Physician Impact Analysis with Interior Health is required to ensure the physician practice description complements the rest of the medical team in the present as well as for the long-term. The practice description is written after the Physician Impact Analysis has been completed and approved by Interior Health. Please contact your Executive Medical Director to determine if a Physician Impact Analysis is required and to provide support through the process.

PRACTICE DESCRIPTION DETAILS

Writing a clear and accurate practice description is an important first step to recruiting the candidate best suited to your community's identified need. It should outline the clinical service delivery details of the practice and summarize the skills and abilities that are required for the position.

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The most important section of the practice description is the “Practice details” section because it provides a snapshot of the role and the practice. Given how competitive the physician market is, it is critical to describe the positive aspects of the practice such as highly collegial group, inter-disciplinary team approach, new equipment, electronic medical record, etc. so that potential candidates can accurately picture what it would be like to work in your practice.

An accurate practice description is important to attract the right potential candidates, ensure that they understand the responsibilities of the role, and make certain that precise and appealing information is included in the job posting, ad and marketing campaign.

PRACTICE DESCRIPTION COMPENSATION

Compensation information is another important detail to provide in the practice description. When you can provide accurate and realistic compensation information upfront to potential candidates, it could save you significant time and effort over the recruitment process with candidates who are not a match with your practice from the financial perspective.

Compensation information included in the job posting could be summarized as a range, an approximate dollar value or could be a specific dollar value if the compensation is contract-based. Where fee for service is the compensation model, we have demonstrated success when we have separately provided potential candidates with a detailed compensation projection in one-page or less that matches up the service requirements of the position with the compensation per service. This type of projection provides a significant amount of assurance to potential candidates that they will be able to meet their target level of compensation within your practice and community. If the position has potential for growth, it is important to identify this opportunity since some candidates may be looking for this.

In designated rural communities where physicians are eligible for additional compensation and support on an annual basis through Rural Programs, these should be identified within the Compensation section of the posting since this can enhance the attractiveness of the position. This may include a set number of days support through the Rural Locum Program and additional financial incentives such as Rural Retention % Premium and Flat Fee, and Rural Continuing Medical Education (RCME) Fund, as well as others.

If there are any additional one-time financial incentives to facilitate recruitment, including this information can enhance the number of candidates interested in the position.

COMMUNITY DESCRIPTION

The majority of physicians consider the lifestyle opportunities in a new community in their decision to move to that community. Therefore, the marketing of the lifestyle opportunities available in your BC Interior community plays a critical role in the overall marketing of your physician vacancy. Keep in

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mind that many candidates who are searching physician vacancy postings are not currently living in BC and therefore do not know the great things about living in your area.

In addition to promoting their practice, physicians can be fantastic community ambassadors. Consider why you and your family choose to live, work, and stay in your community, and be ready to share your experiences with candidates and their families.

Communities that get actively involved in “selling” their advantages, and who maintain communication with both their recruiting physicians and Interior Health (e.g. Local Health Administrators), are often more successful in their long-term physician recruitment efforts.

To find out how your community can be an active partner in physician recruitment, explore our ideas under Section 4 “Getting Started”, in the Community Engagement Manual posted on www.betterhere.ca.

IDENTIFY YOUR RESOURCES

Identify the resource strengths and challenges within your group’s practice and your community before beginning your recruitment efforts (see sample below). If you can do this, then you can create a plan to market your strengths and address your weaknesses before launching your physician recruitment campaign. This type of planning and strategy can be instrumental in the success of your recruitment campaign.

Example:

| Strengths | |
|---|-------------------------------------|
| Practice | Community |
| Group Practice | Lifestyle Benefits |
| Earning Potential | Housing |
| New Equipment /Electronic Medical Record System | Educational / Child Care Facilities |
| ER and Specialist Support | Economy |
| Infrequent Call | Job Opportunities for Spouse |

| Challenges | |
|---|---|
| Practice | Community |
| Inadequate Space | Lack of Housing |
| Old Equipment /Electronic Medical Record System | Slow Economy |
| Potential for too much or too little work | Small Population Base |
| Frequent Call | Infrastructure |
| No Specialist Support | Lack of Educational / Child Care Facilities |

MARKETING

GENERATE INTEREST

To generate interest in your position you need to:

- Communicate that there is an opportunity to residents and practicing physicians
- Create a marketing plan that includes:
 - Advertising the position on the Interior Health Better Here and Health Match BC websites
 - Placing ads in Medical Journals (including online Journal Websites)
 - Email blasts to Medical Schools and your physician network
 - Working with the Division of Family Practice in your area
 - Working with Interior Health Physician Marketing Recruitment Leaders in relation to International Medical Graduates (IMG's) to ensure that:
 1. Immigration Canada requirements for advertising are met, and
 2. Interior Health requirements for sponsoring IMG's are understood
- Reach out to interested physicians

CONNECT WITH CANDIDATES

Most physician candidates consider multiple communities in their job search with a number of reasons that influence why a physician will choose one community over another. Reasons can include: responsiveness of the physician group in the communities, lifestyle reasons, and career path opportunities such as being involved in teaching or preceptorships.

Candidates connect best to their colleagues who get back to them quickly and who convey a genuine interest in their personal and practice needs. Physicians can significantly enhance recruitment by developing a relationship with a candidate throughout the recruitment process. This relationship may involve direct contact with the physician, responding to queries, conducting the site visit, helping their families connect in the community, and being involved in candidate follow-up. The availability of the type of practice the physician is most interested in pursuing will also successfully generate an interest that moves beyond a preliminary inquiry.

Finally, because physicians understand that they will work hard in almost any practice setting – it is the lifestyle opportunities in the time after work that will also attract a physician. By connecting with the candidate, recruiting physicians are also more likely to be able to support this kind of interest.

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EXTERNAL MARKETING

It is important to ensure you have up to date marketing materials to reinforce your community's lifestyle benefits and opportunities to physicians and to address any challenges prior to launching the recruitment process. Check that your community's existing promotional materials are up to date including:

- Current physician vacancy postings on Better Here and Health Match BC websites
- Community Profile on Better Here website
- Community, Municipality and/or Regional District websites
- Other promotional materials such as community brochures

In addition, marketing in physician or community specific advertising mediums such as journals or associations should be considered. An advertising firm may be consulted regarding advertising in:

- BC Medical Journal and online
- Canadian Medical Association Journal and online at drcareers.ca
- Canadian Journal of Rural Medicine
- Specialty specific associations/journals

RECRUITMENT

Be prepared prior to the first candidate's initial contact with your detailed practice description and have a candidate profile in mind, for example, what does the ideal candidate need in skills, what are the performance objectives and are there expectations around timelines?

- Are you informed and ready to answer questions the candidates are likely to ask about the practice details – both clinical and financial?
- Have you considered what those questions may be?
- What would you (the recruiting physician) want to know if the roles were reversed?
- Do you have up to date community information ready for distribution on request?
- Do you know where to find resources and tools that will support you in the recruitment?

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ELIGIBILITY

The important first step is to determine the candidate's eligibility for a license through the College of Physicians and Surgeons of BC. To assist with this process we connect candidates with our provincially funded partners, Health Match BC.

Information about moving to BC and licensing requirements are available at:

<http://www.healthmatchbc.org/Moving-to-BC.aspx>

Physician candidates can also register directly with Health Match BC and upload a current copy of their CV at: <http://healthmatchbc.org/Register.aspx>

PERSONAL CONNECTION

- Quickly connect with all physician candidates to explore their interest; this is best done through a phone conversation.
- In your initial contact with the physician connect with the purpose of discovering more detail about his/her family dynamic, career path goals, and other factors that will have an impact on their decision to accept the position and relocate to your community.
- Don't provide all of the details about the position in an email, it is much more effective to schedule a time for a conversation.
- As soon as you understand the candidate's family needs (both personal and professional) this will form the basis for identifying if the candidate may be a potential long-term match for the position and your community

COMMUNITY VISIT

A Recruitment Visit to the community and the practice is the next step after you have: personally connected with the candidate, identified that they may be a good long-term match, reviewed the candidate's CV and checked references. Consider the Recruitment Visit as a welcome for the candidate's whole family from the community and plan for the visit using a customized red carpet type of approach.

Some best practices in planning Recruitment Visits are to:

- When planning consider what can be done to welcome not only the physician but the entire family? What would they be interested in seeing and doing? Plan a visit with an itinerary that includes all of the clinical stakeholders
- Utilize community resources to welcome the physician and to aid in providing the very best experience to the candidate and their family during the recruitment visit.
- Delegate tasks to community ambassadors to ensure the applicant has the best experience possible while visiting the community and to act as "hosts".

PROCESS TO HIRE

SELECTING THE RIGHT CANDIDATE

The ideal recruitment is one that has long-term retention because it is the right fit for all parties, not necessarily the “first fit”. A good question to ask a candidate is where they see themselves five years from now. Often the applicant will give a very frank answer that will enable you to assess the potential for long term recruitment.

Take a step back and look objectively at the candidate’s progression through the different stages of the recruitment process. The “match” needs to be evident at each interval of the recruitment for it to succeed.

The selection team, stakeholders and the candidate should all feel confident that while there may be some compromise required, concessions on either side do not alter the original vacancy by too great a degree or the candidate’s vision of himself/herself in the role. If significant concessions are requested, the candidate is likely not the right fit to support long-term retention.

Once all stakeholders have agreed upon the selection of a candidate that is the right fit, in instances where the candidate will require privileges with the Health Authority, an offer letter will be provided to the candidate by Interior Health. Contact the Physician Marketing Recruitment Leader who will coordinate the preparation of the offer letter with the Executive Medical Director’s office.

CREDENTIALING AND PRIVILEGING

Once the candidate has signed their offer letter from Interior Health, the next step is to apply for credentialing and privileging at the relevant Hospital facilities. The ideal time to start this process is immediately after the candidate has signed and accepted their offer letter.

The new physician will likely require some support to ensure that this process is seamless. It is best to designate someone from your office to be the link between Interior Health and the new physician related to credentialing and privileging to ensure that this step is completed before the new physician starts.

UNDERSTANDING BILLING IN BC

For new grads and physicians new to BC, MSP fee for service billing can be overwhelming. Lack of confidence in billing can lead to reduced physician income and dissatisfaction with the practice, and can ultimately result in poor working practices or the physician leaving the practice.

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To support your new physician related to billing in BC be sure to:

- “Recruit” a physician in your office, community, or area to be a mentor for the new physician
- Connect your new physician with the billing expert in your office as part of your office orientation (see below for details) to assist in learning about the basics as well as other incentives that might be available
- Request any available billing tools or guides from Doctors of BC (Society of General Practice or Specialty sections)
- Ensure that the new physician understands billing and the relevant fee codes prior to starting work
- Complete, sign & submit MSP forms so the new physician is able to bill properly on day one

If the physician compensation model involves a contract, be sure that the new physician connects with Interior Health’s Physician Compensation department prior to their start date to clarify all service, reporting and payment details of the contract. Most often, Interior Health’s Physician Compensation team will review all of these details with the new physician during their contract review prior to the physician signing it. The Physician Marketing Recruitment Leader can also provide you with the appropriate contact information.

PREPARATION TO START WORK

Ensuring success from the first day in a new community and practice requires pre-planning and a structured approach. Knowing what to expect, what is expected and who to connect with for assistance can make this transition significantly easier for the new physician.

Now that you have successfully recruited the new physician, getting prepared for him/her to start work is your first active step of retention. By actively preparing for the new physician, you will ensure that the practice is setup in a way that supports the new doctor in your community so he/she is able to start working and make an adequate income right from their first day of work. In the sections below, we’ve described some methods that are guaranteed to enhance your recruitment and retention efforts.

PROFESSIONAL

- **Provide information regarding what to expect in the office**
 - Having a quick conversation regarding what to expect on the first day in a new practice can go a long way to ensuring the new physician comes into the building feeling prepared and leaves it feeling satisfied. Consider providing information about when to arrive, parking, anticipated caseload, and anticipated contact with administrators or support staff etc.

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- **Plan for integration of the new physician into the practice**
 - Ensure that the new physician has a clear understanding of what is expected. If certain hours of practice are essential, make this clear prior to the start date. Consider, as well, any other work expectations that might be assumed but not expressed. How could these be communicated clearly? Are there any specific training or clinical skills that need to be obtained prior to starting work?

- **Develop a Collaborative Practice Relationship**
 - It is important to create a Collaborative Practice Relationship and supporting agreement amongst the physician group that identifies how the group will make decisions, processes and ensure equity amongst allocation of patient roster, coverage and holiday schedule, financial contributions to clinic overhead costs etc.

- **How will the new physician get patients?**
 - Will the new physician be assuming the practice of a departing physician or is the new physician filling a vacancy that other physicians or locums have been covering?
 - In either situation it is important to determine if there is an already existing roster of patients or whether the current physicians will need to adjust their own patient rosters to support the new physician.
 - If an adjustment is needed, work with all of the physicians in the practice to determine the most reasonable and equitable way to achieve this.
 - Advertise the arrival of the new physician in the newspaper, send the information to the hospital, pharmacies, community health centers, etc and explain how patients can be connected with the new physician and do this well in advance of the physician's start-date
 - For Specialists, arrange for a mail-out to all referring physician offices with details of how to make a referral
 - Communication about the new physician is key!
 - Be sure to communicate information about the new physician to the patients who are currently attached to the departing physician. They will want to be reassured that they will receive consistent care from the new physician.
 - Post information about the new physician throughout your office indicating when the new physician is starting and that he/she is accepting new patients, or that a referral from their GP is required if it is a specialist practice.

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- **When will the office begin booking/referring patients?**
 - Be sure to involve your whole office in this process so that everyone understands the goal of having the new doctor booked with patients from their first day.
 - Set the date from which you will start booking/referring patients to the new doctor
 - Be clear about how full the new physician’s schedule should be from day one. Do they want to be fully booked, or do they want a slower-paced introductory week to allow time for orientation to the practice and Interior Health facilities in the community?
 - For Specialists, ask the physician how much time they need for a new consult and how much for a follow-up visit. For Family Physicians, ask the physician how much time they would like to have with each new patient and each type of visit.
 - This should be determined in collaboration with the new physician
 - To maximize bookings, consider if there is a “best start date” for the new physician:
 - When one of the other physicians is on holidays or during a time when you would otherwise need to bring in a locum might be a good time to start – now you might not need that locum and it might be quieter in your office.
 - If you have a Resident in your office who might take some of the patients of the new physician, you might want to try to delay the start date by a couple of weeks.
- **Other relevant information**

Ensure you consider what other relevant information is required to practice in the area and share this information with the new physician:

- Hospital hours of operation and services provided, phone number and location of medical equipment
- Community health care supports and programs including those provided through partner organizations
- Hospital or health center Administrator and Medical Leader’s names, roles and contact information

PERSONAL

A new physician’s first few weeks in a community can have a significant impact on their long term success and likelihood to stay. Ensuring a proper orientation to the practice and the community is essential.

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- **Prior to starting**

What information would assist the new physician and his/her family in preparing for their move to your community?

- Housing?
- Schools?
- Leisure time and activities?
- Business and social contacts? (i.e.: accountant, lawyer, real estate agent, church)
- Travel and transportation options?

- **Determining start date**

Determining the most appropriate start date with the new physician will often involve a variety of professional and personal considerations such as:

- When does the vacancy begin?
- What is the desired start date based on clinical need?
- Is this an appropriate expected start date based on the new physician's family situation and needs such as schools?
- Is there flexibility with this start date?

CUSTOMIZED TO POSITION AND DOCTOR

The professional practice orientation and personal orientation to the community should have components that occur prior to the new physician's move and within their first two weeks of beginning work. Determine who will be the lead for the professional orientation and any questions as well as for the personal orientation to the community. Finding two people in the community who can act in the "professional mentor" and "personal mentor" roles to the new physician and his/her family can be highly effective to support the new family to settle into the community.

ORIENTATION

It is important to ensure that the new physician feels welcomed in his/her new community on a professional level from other physicians and staff, and also that the physician's whole family feels welcomed on a personal level within the community. This can result in the difference between a physician working in the community for 1 to 2 years or remaining there long-term.

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PROFESSIONAL

- Make arrangements for the new physician to complete the required Hospital Orientation through the Chief of Staff's office
- Which service locations and facilities will the new physician require a tour of? Who can best provide this tour?
- Who should the new physician be introduced to? What information is required? (i.e.: specialties, interests etc.)
- Will referral patterns change and if so, who needs to be informed?
- When should introductions be made? Some will require an introduction prior to the new physician beginning his/her practice and others will be once they begin. Consider timing.
- Is it appropriate to host a welcome meeting/ event? Who should be included and what would be relevant to discuss? What special touches might make it more appealing to the new physician?

PERSONAL

- Personal introductions can add significant stability for a new physician coming to town. Consider key people in your community who may ease the tension for a new physician. (i.e.: lawyer, church leader, mayor, organizer of relevant clubs etc).
- Consider the key people whom the physician's family might appreciate being connected to (e.g. school, children's sports leagues, daycare etc.)
- Is there an opportunity to host a welcome event in the community for the whole family? Who should be included and what activities would be appropriate?
- Educate the community on how to treat the physician and his/her family as people, not as sources of medical information when they meet outside of the physician's practice.

International Medical Graduates often face many cultural and unique lifestyle challenges in their new community such as:

- How to bank in Canada
- How to get credit to buy necessities at the time of arrival (e.g. car) without having to wait until a credit record has been established in Canada.
- How to buy a car – do they need snow tires in Canada all year round?
- What are some of our Canadian customs for their children attending school
- How to use home appliances and home electronics
- What's a fishing license?

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- What's a block heater? Where do they get one and how does it plug into the car?

Connecting the new physician and their spouse with an individual in their community who can help “mentor” the new family through these types of situations which immigrants may be embarrassed to ask about, can be quite rewarding in the long-run to support the new physician’s whole family’s adjustment to their new community.

The “Welcome Pack” is a useful resource for new immigrants to Canada and provides information about many of the above considerations. It is available at www.welcomemap.ca

Training for individuals who wish to improve their skills in welcoming and integrating new immigrants to their community and workplace is also available at www.welcomemat.ca

RETENTION

Physician recruitment can be a lengthy process but the reward is a successful recruitment. The challenge then becomes how to keep the physician engaged to achieve long term recruitment and retention.

By considering how you plan to actively retain your new recruits you will build a strong, cohesive team of physicians in your community. This will help you to recruit other new physicians because of the strong reputation of being a supportive community for physicians to live and work.

FACILITATE RELATIONSHIPS

You can help facilitate the establishment of good working relationships for the new physician with other physicians, staff and Interior Health.

- Most new physicians have been trained to work in a collaborative model where the doctor is one member of the team, and there is support available from other physicians and other types of interdisciplinary health care providers. By facilitating this kind of relationship in your office and community, this can foster increased satisfaction from your new physician in the practice (see section on establishing a Collaborative Practice Relationship).
- Ensure that the new physician knows who the people are within Interior Health Administration and Medical Leadership and when to contact them.
- Encourage this relationship right from the start by introducing your new physician to the key stakeholders in Interior Health and your community as soon as he/she arrives.

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LOCAL MENTORSHIP AND NETWORKING

In addition to the practice group, professional support can be achieved through a number of different ways such as:

- For those physicians working on Provisional Licensure a clinical supervisor is required by the College of Physicians and Surgeons of BC.
- Applying for Credentialing and Privileges with Interior Health to enable the physician to provide services at their local hospital facility, which will also provide the opportunity to interact with other physicians practicing in the region
- Connect the new physician with a mentor in your community to whom the new physician can ask day to day clinical questions such as local protocols, referral processes etc. This may be facilitated in conjunction with your local Division of Family Practice
- Continuing Medical Education (CME) events

Communities have great success when they partner a physician with long standing roots in the community with a physician who is newly arrived.

PERSONAL

When a physician and his/her family feel that they are a part of the community and their needs are being met both professionally and personally, it is much more likely that the family will stay attached to the community. Focusing on this personal attachment is worth all the time and energy spent to retain a local physician as a part of the medical community.

SUMMARY

We hope that this Guide has provided you with some useful and relevant information to support you through the Physician Recruitment process. We are available to answer any other recruitment-related questions you may have.

CURRENT DEPARTMENT CONTACT INFORMATION

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