The AAP Committee on Pediatric Workforce (COPW) over a year ago launched the State Physician Workforce Survey through AAP chapters. In addition to learning more about workforce issues at the local level, the COPW hoped to identify state and regional trends that can be compared with national trends to get a better understanding of specific issues as well as the pediatrician workforce overall. The COPW has reviewed and assembled the most relevant and robust responses for your chapter. We hope these results will provide valuable information that can assist you in your efforts to advocate for the pediatric physician workforce and help ensure that children in your communities have access to pediatricians, pediatric medical subspecialists, and pediatric surgical specialists.

**Hours Spent in Direct Patient Care**

In a typical work week, Kentucky respondents spent over 75% of their time in direct patient care. Nearly 50% said that the number of patient care hours had remained the same over the past 3 years. Approximately 28% had decreased their patient care hours, while just under 30% had increased the number of hours devoted to direct patient care.

**Location of Medical School**

- **Kentucky**
- **Ohio**
- **Texas**
- **Illinois**
- **Indiana**
- **Other**

**Typical Waiting Time for a Non-Emergency Appointment**

Approximately 45% of respondents said that they could see an established patient for a non-emergency appointment the same day. About 22% said that the wait time would be 1-2 days, and less than 15% said that the wait time could be 3-6 days. Approximately 60% of the respondents reported that the wait time had remained about the same over the past 3 years, while just under 20% said it was shorter and just under 10% said the wait time was now longer than it had been 3 years ago. For new patients, the wait times were longer. Only about 30% of practices reported that a new patient could be seen on the same day, and nearly 25% reported that a new patient could be seen in 1-2 days. Approximately 10% reported that the wait time for new patients was longer than it had been 3 years ago.
Practice Type

Over 90% of respondents said that they are currently in clinical practice, and the average number of years that they have been in practice is just over 15. Almost 45% of the respondents are in a single specialty group practice. The next highest categories were hospital inpatient and hospital outpatient/ambulatory site. Each was reported by approximately 15% of respondents.

Experiences Referring Patients to Medical Subspecialists/Surgical Specialists over the Past Year

Approximately 43% of the respondents rated the current number of pediatric medical subspecialists/surgical specialists in their area as “fair” or “poor.” Nearly 32% of the respondents rated the current number as “good,” and the remainder rated the current number as “very good” or “excellent.” However, just over 10% rated wait times as “very good” or “excellent,” and about 70% rated wait times as “poor” or “fair.”

Effect of Technology (e.g., Use of Optimized EHR) on Practice

Survey participants were asked to consider what changes they might make if a new office system, such as the use of optimized electronic health records, increased their practice efficiency. They were given a range of options, such as changing their work hours, seeing more patients, or hiring additional staff. Close to 35% of respondents reported that they would be “very likely” or “somewhat likely” to reduce their hours, and approximately 53% said they would be “very likely” or “somewhat likely” to see more patients. Just over 30% reported that they would be “very likely” or “somewhat likely” to hire nurse practitioners, and approximately 40% reported that they would hire more support staff.

Additional Resources:
AAP Child Health Mapping Project.
Providing national and state-specific data on pediatric health care delivery.
http://www.aap.org/en-us/professional-resources/Research/research-resources/Pages/Mapping-Health-Care-Delivery-for-Americas-Children.aspx

Association of American Medical Colleges, Center for Workforce Studies. 2013 State Physician Workforce Data Book
A biennial report on physician supply, medical school enrollment, and GME for each state, the District of Columbia, and Puerto Rico.

Current data available about the physician workforce across specialties in a series of figures and tables.
American Academy of Pediatrics
North Carolina Chapter

Committee on Pediatric Workforce State Pediatrician Workforce Survey

The AAP Committee on Pediatric Workforce (COPW) over a year ago launched the State Physician Workforce Survey through AAP chapters. In addition to learning more about workforce issues at the local level, the COPW hoped to identify state and regional trends that can be compared with national trends to get a better understanding of specific issues as well as the pediatrician workforce overall. The COPW has reviewed and assembled the most relevant and robust responses for your chapter. We hope these results will provide valuable information that can assist you in your efforts to advocate for the pediatric physician workforce and help ensure that children in your communities have access to pediatricians, pediatric medical subspecialists, and pediatric surgical specialists.

Hours Spent in Direct Patient Care

In a typical work week, respondents from North Carolina spent over 75% of their time in direct patient care. Nearly 55% said that the number of patient care hours had remained the same over the past 3 years. Approximately 15% had decreased their patient care hours, while just under 30% had increased the number of hours devoted to direct patient care.

Location of Medical School

The majority of the state's physicians completed their medical education out of state.

- North Carolina
- Pennsylvania
- New York
- Virginia
- Florida
- Other

Typical Waiting Time for a Non-Emergency Appointment

Approximately 45% respondents said that they could see an established patient for a non-emergency appointment the same day. About 15% said that the wait time would be 1-2 days, and less than 10% said that the wait time could be 3-6 days. Approximately 55% of the respondents reported that the wait time had remained about the same over the past 3 years, while just under 15% said it was shorter and just under 18% said the wait time was now longer than it had been 3 years ago. For new patients, the wait times were longer. Only about 25% of practices reported that a new patient could be seen on the same day, and nearly 23% reported that a new patient could be seen in 1-2 days. Approximately 25% reported that the wait time for new patients was longer than it had been 3 years ago.
Practice Type

Over 90% of respondents said that they are currently in clinical practice, and the average number of years that they have been in practice is just under 20. Almost 45% of the respondents are in a single specialty group practice. The next highest categories were hospital inpatient and hospital outpatient/ambulatory site. Each was reported by approximately 18% of respondents.

Effect of Technology (e.g., Use of Optimized EHR) on Practice

Survey participants were asked to consider what changes they might make if a new office system, such as the use of optimized electronic health records, increased their practice efficiency. They were given a range of options, such as changing their work hours, seeing more patients, or hiring additional staff. Close to 40% of respondents reported that they would be “very likely” or “somewhat likely” to reduce their hours, and approximately 52% said they would be “very likely” or “somewhat likely” to see more patients. Just over 20% reported that they would be “very likely” or “somewhat likely” to hire nurse practitioners, and approximately 35% reported that they would hire more support staff.

Experiences Referring Patients to Medical Subspecialists/Surgical Specialists over the Past Year

Approximately 25% of the respondents rated the current number of pediatric medical subspecialists/surgical specialists in their area as “fair” or “poor.” Nearly 25% of the respondents rated the current number as “good,” and the remainder rated the current number as “very good” or “excellent.” However, just under 20% rated wait times as “very good” or “excellent,” and about 45% rated wait times as “poor” or “fair.”
American Academy of Pediatrics
South Carolina Chapter

Committee on Pediatric Workforce State Pediatrician Workforce Survey

The AAP Committee on Pediatric Workforce (COPW) over a year ago launched the State Physician Workforce Survey through AAP chapters. In addition to learning more about workforce issues at the local level, the COPW hoped to identify state and regional trends that can be compared with national trends to get a better understanding of specific issues as well as the pediatrician workforce overall. The COPW has reviewed and assembled the most relevant and robust responses for your chapter. We hope these results will provide valuable information that can assist you in your efforts to advocate for the pediatric physician workforce and help ensure that children in your communities have access to pediatricians, pediatric medical subspecialists, and pediatric surgical specialists.

Hours Spent in Direct Patient Care

In a typical work week, respondents from South Carolina spent over 70% of their time in direct patient care. Nearly 55% said that the number of patient care hours had remained the same over the past 3 years. Approximately 25% had decreased their patient care hours, while just under 30% had increased the number of hours devoted to direct patient care.

Location of Medical School

The majority of the state’s physicians completed their medical education out of state.
- South Carolina
- Georgia
- North Carolina
- Texas
- Virginia
- Other

Typical Waiting Time for a Non-Emergency Appointment

Approximately 53% of respondents said that they could see an established patient for a non-emergency appointment the same day. About 15% said that the wait time would be 1-2 days, and less than 10% said that the wait time could be 3-6 days. Approximately 50% of the respondents reported that the wait time had remained about the same over the past 3 years, while just under 15% said it was shorter and just under 12% said the wait time was now longer than it had been 3 years ago. For new patients, the wait times were longer. Only about 25% of practices reported that a new patient could be seen on the same day, and nearly 25% reported that a new patient could be seen in 1-2 days. Approximately 15% reported that the wait time for new patients was longer than it had been 3 years ago.
**Practice Type**

Over 93% of the respondents said that they are currently in clinical practice, and the average number of years that they have been in practice is just under 20. Almost 45% of the respondents are in a single specialty group practice. The next highest categories were hospital outpatient/ambulatory site and hospital inpatient; each was reported by approximately 20% of respondents.

**Experiences Referring Patients to Medical Subspecialists/Surgical Specialists over the Past Year**

Approximately 30% of the respondents rated the current number of pediatric medical subspecialists/surgical specialists in their area as “fair” or “poor.” Nearly 30% of the respondents rated the current number as “good,” and the remainder rated the current number as “very good” or “excellent.” However, just under 15% rated wait times as “very good” or “excellent,” and about 70% rated wait times as “poor” or “fair.”

**Effect of Technology (e.g., Use of Optimized EHR) on Practice**

Survey participants were asked to consider what changes they might make if a new office system, such as the use of optimized electronic health records, increased their practice efficiency. They were given a range of options, such as changing their work hours, seeing more patients, or hiring additional staff. Close to 45% of respondents reported that they would be “very likely” or “somewhat likely” to reduce their hours, and approximately 55% said they would be “very likely” or “somewhat likely” to see more patients. Just under 30% reported that they would be “very likely” or “somewhat likely” to hire nurse practitioners, and approximately 25% reported that they would hire more support staff.

**Additional Resources:**


American Academy of Pediatrics
Tennessee Chapter

Committee on Pediatric Workforce State Pediatrician Workforce Survey

The AAP Committee on Pediatric Workforce (COPW) over a year ago launched the State Physician Workforce Survey through AAP chapters. In addition to learning more about workforce issues at the local level, the COPW hoped to identify state and regional trends that can be compared with national trends to get a better understanding of specific issues as well as the pediatrician workforce overall. The COPW has reviewed and assembled the most relevant and robust responses for your chapter. We hope these results will provide valuable information that can assist you in your efforts to advocate for the pediatric physician workforce and help ensure that children in your communities have access to pediatricians, pediatric medical subspecialists, and pediatric surgical specialists.

Hours Spent in Direct Patient Care

In a typical work week, Tennessee respondents spent over 80% of their time in direct patient care. Nearly 58% said that the number of patient care hours had remained the same over the past 3 years. Approximately 18% had decreased their patient care hours, while just under 30% had increased the number of hours devoted to direct patient care.

Location of Medical School

The majority of the state’s physicians completed their medical education out of state.

- Tennessee
- Texas
- Georgia
- Missouri
- Alabama
- Other

Typical Waiting Time for a Non-Emergency Appointment

Approximately 53% of respondents said that they could see an established patient for a non-emergency appointment the same day. About 18% said that the wait time would be 1-2 days, and less than 10% said that the wait time could be 3-6 days. Approximately 65% of the respondents reported that the wait time had remained about the same over the past 3 years while just under 13% said it was shorter and just under 13% said the wait time was now longer than it had been 3 years ago. For new patients, the wait times were longer. Only about 33% of practices reported that a new patient could be seen on the same day, and nearly 26% reported that a new patient could be seen in 1-2 days. Approximately 15% reported that the wait time for new patients was longer than it had been 3 years ago.
Practice Type

Over 90% of respondents said that they are currently in clinical practice, and the average number of years that they have been in practice is just over 15. Almost 55% of the respondents are in a single specialty group practice. The next highest categories were hospital inpatient and hospital outpatient/ambulatory site. Each was reported by approximately 15% of respondents.

Experiences Referring Patients to Medical Subspecialists/Surgical Specialists over the Past Year

Approximately 35% of the respondents rated the current number of pediatric medical subspecialists/surgical specialists in their area as “fair” or “poor.” Nearly 25% of the respondents rated the current number as “good,” and the remainder rated the current number as “very good” or “excellent.” However, just under 10% rated wait times as “very good” or “excellent,” and about 60% rated wait times as “poor” or “fair.”

Effect of Technology (e.g., Use of Optimized EHR) on Practice

Survey participants were asked to consider what changes they might make if a new office system, such as the use of optimized electronic health records, increased their practice efficiency. They were given a range of options, such as changing their work hours, seeing more patients, or hiring additional staff. Close to 40% of respondents reported that they would be “very likely” or “somewhat likely” to reduce their hours, and approximately 50% said they would be “very likely” or “somewhat likely” to see more patients. Just under 30% reported that they would be “very likely” or “somewhat likely” to hire nurse practitioners, and approximately 40% reported that they would hire more support staff.

Additional Resources:
AAP Child Health Mapping Project.
Providing national and state-specific data on pediatric health care delivery.
http://www.aap.org/en-us/professional-resources/Research/research-resources/Pages/Mapping-Health-Care-Delivery-for-Americas-Children.aspx

Association of American Medical Colleges, Center for Workforce Studies. 2013 State Physician Workforce Data Book
A biennial report on physician supply, medical school enrollment, and GME for each state, the District of Columbia, and Puerto Rico.

Current data available about the physician workforce across specialties in a series of figures and tables.
https://members.aamc.org/eweb/upload/14-086%20Specialty%20Databook%202014_711.pdf

Workload Capacity with Respect to Patient Panel
American Academy of Pediatrics
Virginia Chapter

Committee on Pediatric Workforce State Pediatrician Workforce Survey

The AAP Committee on Pediatric Workforce (COPW) over a year ago launched the State Physician Workforce Survey through AAP chapters. In addition to learning more about workforce issues at the local level, the COPW hoped to identify state and regional trends that can be compared with national trends to get a better understanding of specific issues as well as the pediatrician workforce overall. The COPW has reviewed and assembled the most relevant and robust responses for your chapter. We hope these results will provide valuable information that can assist you in your efforts to advocate for the pediatric physician workforce and help ensure that children in your communities have access to pediatricians, pediatric medical subspecialists, and pediatric surgical specialists.

Hours Spent in Direct Patient Care

In a typical work week, Virginia respondents spent over 78% of their time in direct patient care. Nearly 55% said that the number of patient care hours had remained the same over the past 3 years. Approximately 24% had decreased their patient care hours, while just under 25% had increased the number of hours devoted to direct patient care.

Location of Medical School

The majority of the state's physicians completed their medical education out of state.

- Virginia
- District of Columbia
- Pennsylvania
- North Carolina
- New York
- Maryland
- Other

Typical Waiting Time for a Non-Emergency Appointment

Approximately 45% of respondents said that they could see an established patient for a non-emergency appointment the same day. About 20% said that the wait time would be 1-2 days, and less than 15% said that the wait time could be 3-6 days. Approximately 65% of the respondents reported that the wait time had remained about the same over the past 3 years, while just over 15% said it was shorter and just under 12% said the wait time was now longer than it had been 3 years ago. For new patients, the wait times were longer. Only about 27% of practices reported that a new patient could be seen on the same day, and nearly 15% reported that a new patient could be seen in 1-2 days. Approximately 16% reported that the wait time for new patients was longer than it had been 3 years ago.
Practice Type

Over 93% of the Virginia respondents said that they are currently in clinical practice, and the average number of years that they have been in practice is just under 20. Almost half of the respondents are in a single specialty group practice. The next highest categories were hospital inpatient and hospital outpatient/ambulatory site, and each was reported by approximately 18% of respondents.

Effect of Technology (e.g., Use of Optimized EHR) on Practice

Survey participants were asked to consider what changes they might make if a new office system, such as the use of optimized electronic health records, increased their practice efficiency. They were given a range of options, such as changing their work hours, seeing more patients, or hiring additional staff. Close to 48% of respondents reported that they would be “very likely” or “somewhat likely” to reduce their hours, and approximately 55% said they would be “very likely” or “somewhat likely” to see more patients. Just over 30% reported that they would be “very likely” or “somewhat likely” to hire nurse practitioners, and approximately 38% reported that they would hire more support staff.

Experiences Referring Patients to Medical Subspecialists/Surgical Specialists over the Past Year

Approximately 23% of the respondents rated the current number of pediatric medical subspecialists/surgical specialists in their area as “fair” or “poor.” Nearly 34% of the respondents rated the current number as “good,” and the remainder rated the current number as “very good” or “excellent.” However, just under 20% rated wait times as “very good” or “excellent,” and about 55% rated wait times as “poor” or “fair.”

Additional Resources:
AAP Child Health Mapping Project.
Providing national and state-specific data on pediatric health care delivery.
http://www.aap.org/en-us/professional-resources/Research/research-resources/Pages/Mapping-Health-Care-Delivery-for-Americas-Children.aspx

Association of American Medical Colleges, Center for Workforce Studies. 2013 State Physician Workforce Data Book
A biennial report on physician supply, medical school enrollment, and GME for each state, the District of Columbia, and Puerto Rico.

Current data available about the physician workforce across specialties in a series of figures and tables.
https://members.aamc.org/eweb/upload/14-086%20Specialty%20DataBook%202014_711.pdf