American Academy of Pediatrics
New York 1 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, New York 1 respondents spent over 75% of their time in direct patient care. Nearly 60% 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 27% had increased the number of hours devoted to direct patient care.

Location of Medical School

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 15% said that the wait time would be 1-2 days, and less than 20% said that the wait time could be 3-6 days. Approximately 70% 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 20% 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 18% 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 24. Almost 40% of the respondents are in a single specialty group practice. The next highest categories were self-employed solo practice and hospital inpatient. Each was reported by approximately 12% 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 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 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 38% 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 35% 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](http://www.aap.org/en-us/professional-resources/Research/research-resources/Pages/Mapping-Health-Care-Delivery-for-Americas-Children.aspx)


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Hours Spent in Direct Patient Care

In a typical work week, New York 2 respondents spent over 65% 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 over 20% had increased the number of hours devoted to direct patient care.

Location of Medical School

Typical Waiting Time for a Non-Emergency Appointment

Approximately 38% 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 under 10% said it was shorter and just over 10% said the wait time was now longer than it had been 3 years ago. For new patients, wait times were longer. Only about 30% of practices reported that a new patient could be seen on the same day, and nearly 20% 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 85% 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 25% of the respondents are in a hospital outpatient/ambulatory site. The next highest categories were hospital inpatient and single specialty group practice. Each was reported by approximately 25% 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 33% 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 15% 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 respondents rated the current number of pediatric medical subspecialists/surgical specialists in their area as “fair” or “poor.” Nearly 35% of 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.”

Workload Capacity with Respect to Patient Panel

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
American Academy of Pediatrics  
New York 3 Chapter

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Hours Spent in Direct Patient Care
In a typical work week, New York 3 respondents spent over 65% of their time in direct patient care. Nearly 48% 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

Location of Residency Training

Typical Waiting Time for a Non-Emergency Appointment
Approximately 30% 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 20% said that the wait time could be 3-6 days. Approximately 58% 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 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 15% 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 85% 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 25% of respondents are in a hospital outpatient/ambulatory site. The next highest categories were hospital inpatient and single specialty group practice. Each was reported by approximately 15% of respondents.

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

Approximately 20% of respondents rated the current number of pediatric medical subspecialists/surgical specialists in their area as “fair” or “poor.” Nearly 25% of 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.”

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 40% said they would be “very likely” or “somewhat likely” to see more patients. Just over 12% 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.

Additional Resources:

