The American Academy of Pediatrics
California 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, California 1 respondents spent over 70% of their time in direct patient care and 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 25% had increased the number of hours devoted to direct patient care.

Location of Residency Training

![Pie chart showing the distribution of residency training locations.]

Location of Medical School

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

Typical Waiting Time for a Non-Emergency Appointment

Approximately 35% 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 45% of the respondents reported that the wait time had remained about the same over the past 3 years, while just under 25% 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 23% 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.

Distribution of Workforce

![Bar chart showing the distribution of workforce in rural, suburban, urban, not inner city, and urban, inner city areas.]
Practice Type

Over 85% 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 30% of the respondents are in a single specialty group practice. The next highest categories were hospital inpatient and HMO; each was reported by approximately 15% of respondents.

Experience 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 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 25% rated wait times as "very good" or "excellent," and about 50% 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 40% said they would be "very likely" or "somewhat likely" to see more patients. Just under 20% 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:
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
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American Academy of Pediatrics
California 2 Chapter

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Hours Spent in Direct Patient Care

In a typical work week, California 2 respondents spent over 70% of their time in direct patient care. Nearly 47% said that the number of patient care hours had remained the same over the past 3 years. Approximately 30% 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.

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 15% 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 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 20% 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 20% reported that a new patient could be seen in 1-2 days. Approximately 20% 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 28% of the respondents are in a single specialty group practice. The next highest categories were hospital inpatient and self-employed solo practice; each was reported by approximately 18% 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 over 15% rated wait times as “very good” or “excellent,” and about 58% 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 45% said they would be “very likely” or “somewhat likely” to see more patients. Just under 20% reported that they would be “very likely” or “somewhat likely” to hire nurse practitioners, and approximately 30% reported that they would hire more support staff.

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Workload Capacity with Respect to Patient Panel
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, California 3 respondents spent over 70% of their time in direct patient care, and nearly 60% 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 25% had increased the number of hours devoted to direct patient care.

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

Approximately 40% 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 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 over 15% said it was shorter and just under 20% 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 25% 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 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 40% of the respondents are in a single specialty group practice. The next highest categories were group practice, multispecialty, and hospital inpatient practice; each was reported by approximately 17% of respondents.

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

Approximately 10% of the respondents rated the current number of pediatric medical subspecialists/surgical specialists in their area as “fair” or “poor”. Nearly 40% of the respondents rated the current number as “good,” and the remainder rated the current number as “very good” or “excellent.” However, just over 15% 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 30% 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 under 25% reported that they would be “very likely” or “somewhat likely” to hire nurse practitioners, and approximately 30% reported that they would hire more support staff.

Workload Capacity with Respect to Patient Panel

- Closed to New Patients
- Too Large
- About Right
- Increase “a little”
- Increase “a lot”
- Do not have or control panel

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American Academy of Pediatrics
California 4 Chapter

Committee on Pediatric Workforce State Pediatrician Workforce Survey

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Hours Spent in Direct Patient Care

In a typical work week, California 4 respondents spent over 65% 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 30% had decreased their patient care hours, while just under 20% 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. California was the most common choice, followed by New York, District of Columbia, Illinois, Ohio, Pennsylvania, and Other.

Typical Waiting Time for a Non-Emergency Appointment

Approximately 25% of respondents said that they could see an established patient for a non-emergency appointment the same day. About 30% said that the wait time would be 1-2 days, and less than 5% 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 10% said it was shorter and just under 20% said the wait time was now longer than it had been 3 years ago. For new patients, the wait times were longer. Only about 10% 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 25% 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 22. Almost 35% of the respondents are in a hospital inpatient practice. The next highest categories were single specialty group (just under 22%) and self-employed solo practice and group practice/multispecialty (each reported by approximately 15% of respondents).

Retire if Affordable?

Yes

No

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

Approximately 22% of the respondents rated the current number of pediatric medical subspecialists/surgical specialists in their area as “fair” or “poor.” Nearly 45% 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 65% 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 35% 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 32% reported that they would hire more support staff.

Additional Resources:
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