



Locum Tenens: A Costly Prescription for Physician Shortages

Read any report on the current state of medical care and the data on hospitals will be grim. While the pandemic exacerbated issues like staffing and specialty physician shortages, the reality is the current challenges hospitals are facing were there long before the pandemic and haven't gone away. For example, **The Joint Commission** reported the number of sentinel events in 2022 increased by 19% compared to 2021. **Time Magazine** said "After several decades of creating a safety culture in health care, this is a chilling statistic. Staffing with temporary workers may play a significant and expanding role in this negative trend." Locum Tenens, the practice of using temporary contract physicians, nurses, and other staff, is a contributing factor to the concerning rise in quality-of-care statistics like the sentinel event data.

The Joint Commission said, "When analyzing the root cause of sentinel events, communication breakdowns (e.g., not establishing a shared understanding or mental model across care team members, or no or inadequate staff-to-staff communication of critical information) continue to be the leading factor contributing to sentinel events."

When hospitals use contract workers for short-term relief, there is no opportunity or incentive to nurture team relationships or do a deep dive into a particular health care system's operational policies.

The High Cost of Locum Tenens

Using locum tenens as staffing support takes its toll in several ways, in health care quality, staff morale and the bottom line:



Inconsistent Care. Hospitals have protocols for emergent care, boarding, response times and other quality-of-care criteria. When a locum tenens provider temporarily joins the hospital there likely is no in-depth knowledge of these protocols. It can lead to a lack of consistent care and affect patient outcomes.



Insufficient Operational Knowledge. The turnover of locum tenens physicians leads to another inconsistency: lack of familiarity with EMR, radiology and other technology and equipment in use at the hospital. Since temporary staff must be onboarded and begin working as soon as possible, hospitals have to shorten the learning process, as they face coverage gaps and an immediate need for more staff help on the ground.



Changeable Assignments. As Time mentions, 'gig economy processes' do not transfer to health care. An 'intrinsic team dynamic' does not exist when a temporary worker joins a hospital operation. It is difficult to fit in to an established culture of providing care in a particular hospital system, and the hospital staff does not have the time or resources to collaborate with locum tenens hires on the nuances of the hospital operations. Some of it, what is termed the 'mental model,' is staff incorporating this learned model over time and using it as a guide to make care decisions. Locum tenens providers may not be on site long enough to gain much deep insight into a hospital's unique environment since they likely will be moving to another assignment in a short time.



Lack of Commitment. Understandably, temporary workers have no incentive to become deeply committed to a particular hospital. They are being paid by the clock and, while permanent staff may be inclined to work extra hours when patient load necessitates it, temporary workers expect to be done when their agreed upon shift is over. It adds to staff morale issues if there is a patient surge or emergent event and no additional support is readily available.



Cost Concerns. "A primary care physician working as a locum tenens full-time can easily generate \$180,000- \$200,000 a year in income, and with overtime shifts, they can earn considerably more," according to Jeff Decker of AMN Healthcare. Hospitals competing to recruit staff physicians are up against larger locum tenens income levels plus added tax advantages physicians receive from travel expenses. The higher pay scales add more financial burden to hospitals already struggling with thin margins and the overall increasing cost of care.

From Temporary to Long-Term Support

Eagle Telemedicine offers hospitals a sustainable solution for accessing additional care support with the stability of a dedicated team of physicians. Rather than seeing a revolving door of physicians, hospital staff communicates with physicians who become part of the hospital's operations and provide high-value care as part of the team. It nurtures on-site morale as staff becomes comfortable with Eagle physicians and feel they know, understand and adhere hospital processes. As one Eagle Telemedicine specialist said, there is no 'punch-a-clock mentality' at Eagle. When needed, a physician will help past their shift's end, in true team spirit.

In addition to improved quality of care and morale, Eagle Telemedicine provides cost efficiencies for the hospital, helping to avoid high locum tenens expenses. With dedicated specialists hospitals can reduce transfers and realize more revenue, a critical need in this era of rising healthcare costs.

To learn more about implementing a telemedicine program and begin your hospital's savings,

Contact Eagle today.