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2011 In-House Physician Recruitment Benchmarking Report

The Association of Staff Physician Recruiters (ASPR) is a professional organization exclusively for in-house physician recruitment professionals. The ASPR is the leading authority on physician recruitment and retention. The organization's focus is to support and enhance the careers of in-house physician recruitment professionals.

The Association of Staff Physician Recruiters (ASPR) is pleased to present the 2011 ASPR In-House Physician Recruitment Benchmarking *Report.* The report provides credible industry data for the in-house physician recruitment profession. This data and the final report will help an individual organization see national industry trends, understand how they compare to others in similar organizations or geography with respect to recruiter compensation, services offered, and overall performance as they move forward within the industry to improve processes and outcomes. Benchmarks are critical for our industry as we constantly strive for improved processes and results within our organizations to meet the health care needs within our communities.

The benchmarking report is an annual study published by ASPR, a professional organization exclusively for in-house physician recruitment professionals. ASPR is the leading authority on physician recruitment and retention. The organization's focus is to support and enhance the careers of in-house physician recruitment professionals. ASPR is comprised of more than 1,100 in-house physician recruitment professionals employed directly by hospitals, clinics, physician practices, academic medical centers, and managed care organizations from across the United States and Canada.

The 2011 ASPR In-House Physician Recruitment Benchmarking Report was compiled, tabulated, and analyzed by Industry Insights Inc. (www.industryinsights.com), an independent professional research and consulting firm that specializes in conducting benchmarking surveys, market assessments, customer satisfaction research, educational programs, and other forms of customized research.

This year ASPR offers not only a written report of the survey findings, but also provides a unique Organization Benchmarking Report (OBR) that compares participant results to similar organizations nationally. In collaboration with Industry Insights, ASPR has arranged to have all reported data placed into a web-based database, which allows users to analyze national data and is accessible to all who participate or purchase results.

Background

The 2011 ASPR In-House Physician Recruitment Benchmarking Report provides a detailed analysis of key statistics experienced by in-house physician recruiters during calendar year 2010. Based on confidential surveys submitted by 159 organizations (providing data for 346 in-house physician recruiters and 5,331 active searches) between December 2010 and March 2011, the 2011 Benchmarking Report includes a compilation and analysis of: organizations by which in-house physician recruiters are employed; active searches performed during 2010; in-house physician recruiter profile statistics; and compensation data of in-house physician recruiters.

In order to enhance the validity of the compensation data, responding in-house recruiters were unable to self report their compensation figures. Instead, the survey

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program required that a member of their organization's human resources (HR) department report the compensation values. Though some participants' HR department could not report their compensation data, 94 HR departments did complete the requested information, providing compensation values for a total of 210 in-house physician recruiters.

Summary of Findings

Demographics Overview

The typical reporting organization is situated in a Metropolitan area of 100,000 to 250,000 people, and approximately 40% of the organizations are based in the Midwest region. For the typical organization, fewer than 24 physicians participated in site visits/interviews during the year. Also, 15 offers were extended to physicians per organization, and, of those, 10 were accepted. The data appear to reveal that the larger organizations were considerably more likely to have their offers accepted.

The typical organization had four physicians leave during the year. On a percentage basis, approximately 6% of physicians left their organization during the year. No consistent trend was observed between the size of organization and its physician turnover.

Reporting organizations employed a median of 1 physician recruiter (2.1 physician recruiters on average), and the typical in-house physician recruiter performed 13 active searches during calendar year 2010. It is noteworthy that the number of searches per recruiter grew sizably for larger organizations. Of those organizations that employed more than 3 physician recruiters, their recruiters were responsible for 23.4 active searches (on average) during the year.

This year's study also reviews the number of physicians employed by each organization in relation to its count of in-house physician recruiters. In general terms, there were 52 employed physicians for each in-house

physician recruiter. As was the case for the number of searches per recruiter, the ratio of physicians per recruiter was much higher than average for the largest organizations.

Searches Overview

Approximately two-thirds of the reported searches were for multispecialty practices, and 28% were for single specialty practices. When reviewing the searches by primary work site, ambulatory practices accounted for the largest single portion with 33% of the searches. Over 60% of searches were for practices owned by Hospitals or integrated delivery systems and over three-fourths of all reported searches were for Not-For-Profit organizations. Of the searches conducted, 36% were to replace a departing provider. Approximately 8% of the searches used Locum Tenens. The total cost of search was tracked for 30% of the active searches, and the median cost reported was approximately \$2,800. Total cost of search as defined for this survey includes cost of travel, lodging, meals, entertainment, advertising and search firm fees for all candidates.

The most common specialties for which searches were performed during 2010 included Family Medicine (13%), Hospitalist (11%), Internal Medicine (8%), Nurse Practitioner (5%), and Physician Assistant (5%). There was a noted predominance of primary care searches during this time period. The most common sub-specialties and surgical specialty searches were Emergency Medicine, OB/GYN, Neurology, Psychiatry, and General Surgery. Of the reported searches that were active at some point during 2010: 60% were filled during the year; 36% remained open as of December 31; 3% were cancelled; and 1% were put on hold.

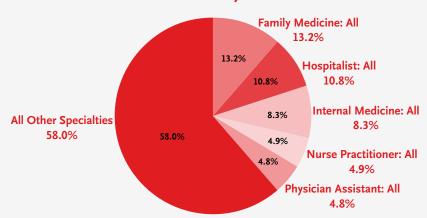
The median search filled during 2010 lasted 115 days, and it typically involved 4 applicants, 2 interviews, and 1 offer. Median days to fill for family medicine and internal medicine positions were 150 days and 130 days respectively. The two specialties with the longest days to fill were rheumatology and

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MARKET WATCH—

Most Common Primary Care Searches



Source: 2011 ASPR In-House Physician Recruitment Benchmarking Report

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orthopedic surgery: subspecialties. Internet job boards and referrals were the most frequently cited source types used to fill positions, and cold calling was the least used source type.

Recruiter Profile Overview

The most frequently cited position title, "Physician Recruiter," matched 34% of responding recruiters. Over 75% of the recruiters hold a Bachelor's degree or higher (22% hold a Master's degree or higher). When reviewing recruiters by their ASPR Designations, 13% are AASPR-Associates, 11% are FASPR-Fellows, and 5% are DASPR-Diplomats (71% do not hold an ASPR designation).

The typical responding in-house physician recruiter has 6 years of recruitment experience. Less than one-third of responding recruiters supervise staff, and approximately half have provider retention responsibilities.

Recruiter Compensation Overview

In-house recruiters were unable to selfreport their compensation figures. All compensation values were reported by a member of their organization's HR department. On average, in-house physician recruiters earned a base compensation of \$71,123 and received a bonus of \$3,426, equaling \$74,549 in total compensation. Approximately 40% of all physician recruiters receive a bonus. (A median recruiter's total compensation was \$67,066.)

To further aid the analysis of the compensation data, the recruiters were grouped into three compensation bands: those who earned less than \$60,000, those earning between \$60,000–\$80,000, and those earning more than \$80,000. These groupings are indicative of some key differences between the highest income earners and the lower groups. Higher income earners are more likely to have earned upper-level degrees, to be an ASPR member, to hold ASPR designations and other certifications, are more experienced, and are much more likely to supervise staff and have provider retention responsibilities.

Access the Full Report

If you're interested in purchasing the full report and access to the analyzable data, visit www.aspr.org and select the Benchmarking tab.

What's New at NEJM?

THE QUICK APPLY

Applying for jobs on the NEJM CareerCenter has never been easier. A great feature on the new NEJM CareerCenter site is the ability for jobseekers to "quick apply" to jobs.

When physicians are ready to apply for a job they can create or sign in to their NEJM Career-Center profile, but now they have the additional option of the quick apply. By simply filling out their contact information and attaching their resumé, physicians are able to apply for jobs without having to go through the longer process of creating a profile. With a few clicks of the mouse physician jobseekers are able to quickly send you their information. The easier and quicker it is for physicians to apply, the less likely they are to drop out of the application process, resulting in more leads for your jobs.



UPCOMING RECRUITER MEETINGS AND MEDICAL CONVENTIONS

American College of Cardiology* March 24-26, 2012 Chicago, IL www.cardiosource.org/acc

Society of Hospital Medicine* April 2-3, 2012 San Diego, CA www.hospitalmedicine.org

> American College of Physicians* April 19-21, 2012 New Orleans, LA www.acponline.org

Association of Program
Directors in IM*
April 22-24, 2012
Atlanta, GA
www.im.org

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Don't miss out on the opportunity to receive free bonus distribution of your recruitment ad in these two special issues. Simply run a paid print (line or display) ad of *any* size in the selected NEJM issues below and your ad will automatically get reprinted and mailed to the target audience for that issue. Maximize your reach and run your ad in both issues!

Additionally, you may opt to have your ad posted at NEJMCareerCenter.org, the heavily trafficked companion website of the *New England Journal of Medicine*.[‡] And we'll send targeted emails to registered physicians whose search criteria match your ad. PDFs of each booklet will also be posted to the home page of NEJM CareerCenter.

Reserve your space today! Contact us at (800) 635-6991 or at ads@nejmcareercenter.org.

SPECIAL ISSUE: February Resident Reach*

NEJM ISSUE: February 16, 2012 CLOSING DATE: January 27, 2012

AUDIENCE: Final-year residents and fellows

SPECIALTIES: All specialties — over 100!

BONUS REACH: 30,000[†]

SPECIAL ISSUE: In Practice 2–3 Years*

NEJM ISSUE: March 22, 2012

CLOSING DATE: March 2, 2012

AUDIENCE: Physicians in practice 2 to 3 years

SPECIALTIES: Over 50 specialties!

BONUS REACH: 30,000[†]

*Contact us at (800) 635-6991 or ads@nejmcareercenter.org for a complete list of specialties and to reserve your ad space for these special issues.

 † Specialty and direct mail list are estimates only and are subject to change based on data collected by the AMA.

^{*}Processing fees may apply to have your ad posted on the searchable part of the website.