

# the STANDARD

3rd Quarter 2017 October '16 - September '17



## INDUSTRY PERSPECTIVES

### Rural Recruiting: Best Practices for Finding and Retaining the Right Talent

AS THE DEMAND FOR PHYSICIANS IN RURAL LOCATIONS GROWS AT A FAST PACE, THE HEALTHCARE STAFFING INDUSTRY CONTINUES TO REFINE THE PROCESS FOR ATTRACTING, ENGAGING, SECURING, AND RETAINING TALENTED PROVIDERS. THE FOLLOWING ARE TIPS AND BEST PRACTICES FOR SUCCESSFUL RURAL PHYSICIAN PLACEMENT.

#### ATTRACT

A clearly defined mission can be the difference between finding a physician who is the right fit instead of a "quick fix." Healthcare staffing firms work with hospitals and facilities to communicate the mission and vision for the organization, focusing on advertising the organization's strengths (economic, political, growth, enriching, unique, or industry advantages). It's also recommended that the facility establish a timeline for staffing needs to ensure that the positions are filled before the need is critical.

Referrals from the organization's physician networks can produce promising candidates. However, efforts like posting ads on your website or placing local ads usually only work for providers who are already located in the area. Healthcare staffing firms can help organizations by providing resources to get the word out nationwide.

#### ENGAGE

Physicians are approached by recruiters on a daily basis, and the game is competitive. This is why time is always a critical part of recruiting. By having swift, well-defined consideration processes, organizations can retain a prospect's interest and efficiently advance candidates.

Should you work with a contingent firm? That depends. Contingent firms tend to focus their efforts on commonly desired areas or positions with the highest compensations. This approach often leads to high interest—but many of the candidates won't be a true fit. An organized initial screening and thorough onsite interview can validate the candidate's resume.

We also recommend the facility have a physician leader or member of the medical staff available to answer clinical questions and reinforce the organization's vision and strategic healthcare plan.

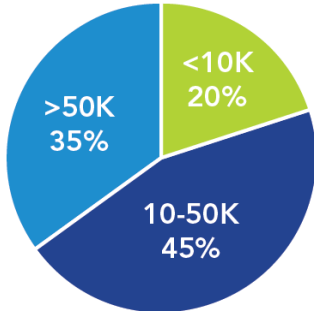
#### SECURE

For many candidates, money isn't the driving force. Quality of life, work-life-balance, opportunities for the family, and ties to an area have become important incentives. Armed with this knowledge, organizations need to have these incentives outlined before the recruitment process begins so they can reach a decision on a candidate and make an offer quickly. A streamlined approach can be the difference between securing the right person—or missing the boat.

#### RETAIN

Retaining a provider is the most difficult part of the process, which is why it's imperative that organizations welcome, support, and engage all new medical staff members. Promoting social interactions among the medical staff and their families can help them become better acquainted and establish a sense of community. Physicians who feel included in the decision-making process for patient access, referrals, and on-call scheduling strategies are the best advocates for improving rural population health.

While there's no way to ensure a long-term retention, following these tips and best practices can help to lay the best foundation for rural physician recruiting success.



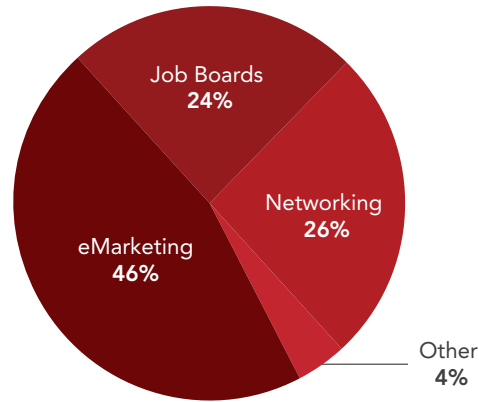
#### PLACEMENTS BY POPULATION

Data indicates the percentage of placements made from October 2016 through September 2017 by the population of the search facility's metropolitan area.

# THE PHYSICIAN RECRUITING STANDARD

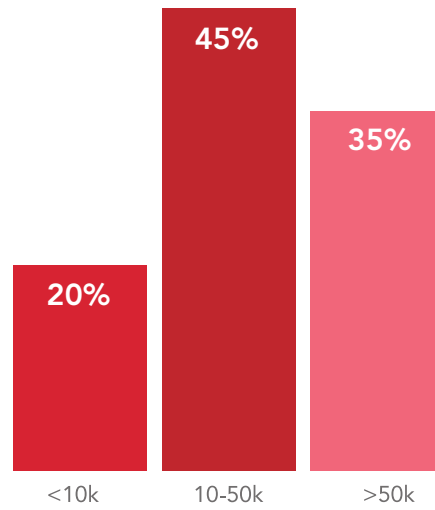
# PLACEMENTS & INTERVIEWS

## Candidate Sources



Data indicates sources of candidates for placements and interviews from October 2016 through September 2017.

## Placements by Population



Data indicates the percentage of placements made from October 2016 through September 2017 by the population of the search facility's metropolitan area.

# PLACEMENTS & INTERVIEWS



## Placement Data by Specialty

This data represents average statistics of placements and interviews by Delta Physician Placement over the twelve-month survey period. Since these averages only include placements and interviews, the compensation information presented indicates the rate at which candidates are choosing to interview or sign. Average days information can be used to forecast a probable timeline for a recruitment effort in a particular specialty.

		Average Compensation			Average Days		
		Starting Compensation	Sign-on Bonus	Potential Compensation	From Interview to Placement	Total Placement	Fastest Days-to-Fill
Primary Care	Family Medicine	\$230,808	\$25,416	\$275,804	25	148	1
	Family Med.- Obstetrics	\$215,278	\$54,000	\$308,248	21	196	10
	Internal Medicine	\$220,714	\$24,285	\$226,285	16	160	63
	Obstetrics/Gynecology	\$291,666	\$24,000	\$328,333	12	116	13
	Pediatrics	\$208,846	\$20,461	\$268,307	14	164	40
	Psychiatry	\$235,489	\$47,671	\$262,384	30	207	10
Surgery	Orthopedic Surgery	\$498,680	\$50,000	\$614,781	42	225	148
	Surgery - General	\$405,455	\$43,889	\$446,364	20	152	24
	Surgery - Vascular	\$350,000	-	\$800,000	47	80	80
	Urology	\$425,000	\$20,000	\$490,000	8	172	155
Sub-Specialties	Gastroenterology	\$635,000	\$55,000	\$735,000	31	181	181
	Neurology	\$325,000	\$50,000	\$275,000	48	344	344
Hospital Based	Emergency Medicine	\$332,717	\$16,667	\$378,457	10	200	5
	Hospitalist	\$261,067	19,429	\$300,600	25	167	4
	Pediatric Hospitalist	\$233,333	\$40,667	\$240,667	21	159	72

Data reflects averages from placements and interviews by Delta Physician Placement from October 2016 through September 2017. "Potential Compensation" data reflects average yearly compensation at full production excluding benefits. "Average Days" data does not include off-contract placements. "Average Days Total Placement" data is calculated from profile to placement.

The information contained herein is of a general nature and is not intended to address the circumstances of any particular individual or entity. No one should act on such information without appropriate counseling and thorough examination of the particular situation. For more information regarding specific specialties, regions, or trends, contact Eric Sasser, VP of Advertising, The Delta Companies at (800) 521-5060 x4600 or [esasser@TheDeltaCompanies.com](mailto:esasser@TheDeltaCompanies.com).

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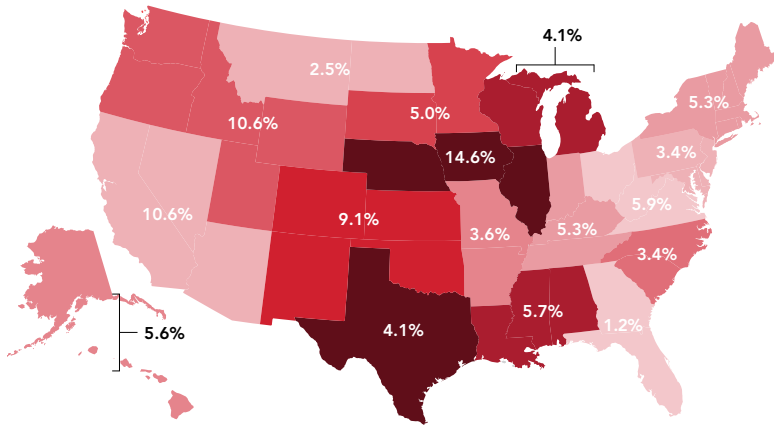
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# MARKET DEMAND

## Nationwide Search Distribution



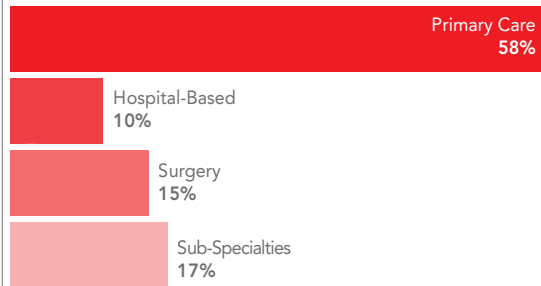
Map represents searches initiated by Delta Physician Placement on behalf of healthcare facilities from October 2016 through September 2017.

## Specialty Demand Comparison

	3 <sup>rd</sup> Quarter 2017	3 <sup>rd</sup> Quarter 2016
1.	Family Medicine	Family Medicine
2.	Obstetrics/Gynecology	Internal Medicine
3.	Urology	Obstetrics/Gynecology
4.	Hospitalist	Psychiatry
5.	Psychiatry	Hospitalist
6.	Neurology	Emergency Medicine
7.	Orthopedic Surgery	Pediatrics
8.	Cardiology - Interventional	Family Medicine - Obstetrics
9.	Dermatology	Surgery - General
10.	Emergency Medicine	Urology
11.	Internal Medicine	Orthopedic Surgery
12.	Pediatrics	Pulmonary Critical Care Medicine
13.	CMO	Gastroenterology
14.	Family Medicine - Obstetrics	Neurology
15.	Pulmonary Critical Care Medicine	Otolaryngology

Data compares the top 15 most requested searches initiated by Delta Physician Placement, comparing the third quarters of 2016 and 2017.

## Search Specialty Distribution



Data indicates the percentage of searches initiated by specialty grouping between October 2016 through September 2017.

## Candidate Placements

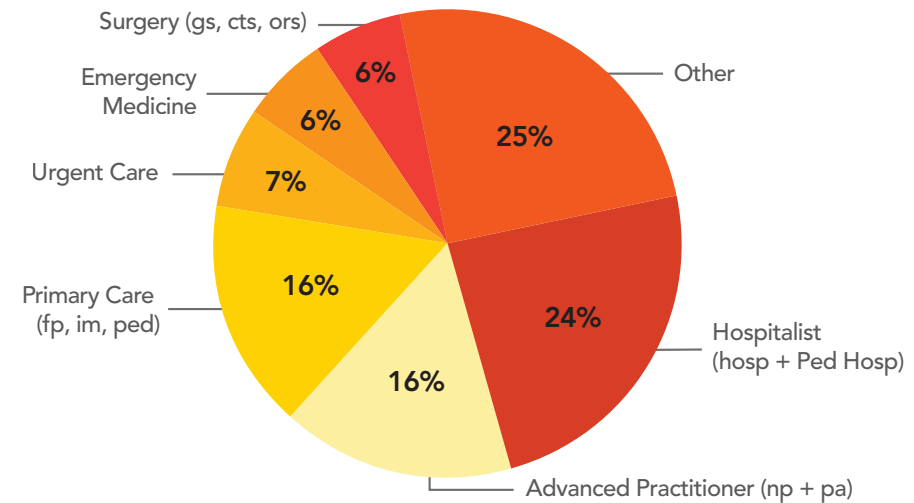
	Top 5 States Providers Have Taken New Opportunities
1.	Texas
2.	Pennsylvania
3.	California
4.	Iowa
5.	Wisconsin

Compares all states for the top 5 candidate placements as initiated by Delta Physician Placement from October 2016 through September 2017.

# LOCUM TENENS

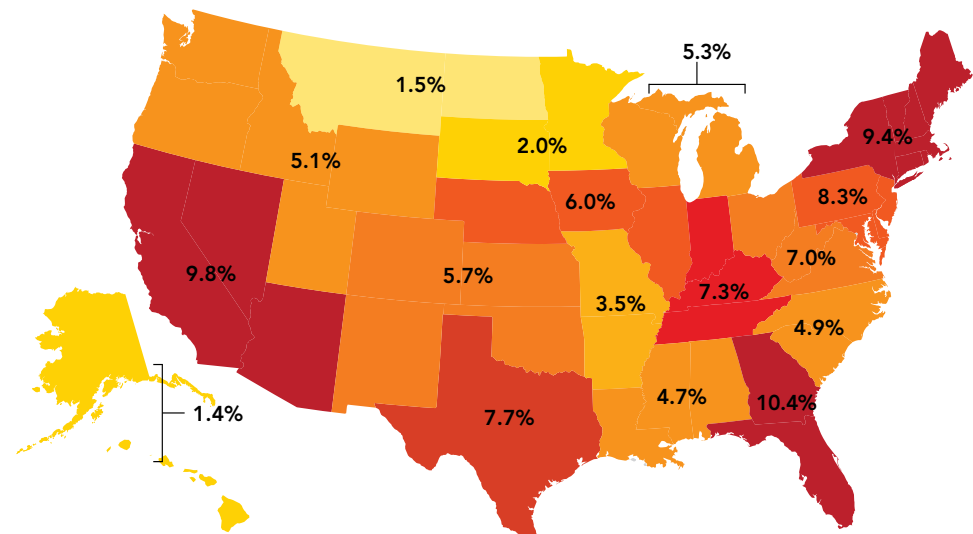


## Days Requested - Top Specialties



Data indicates the top specialties by days requested from October 2016 through September 2017.

## Nationwide Physician Distribution



Map represents the percentage of licensed physicians by region working with Delta Locum Tenens.

# INDUSTRY PERSPECTIVES

## How Artificial Intelligence Will Make Staffing Smarter

**TECHNOLOGY—SPECIFICALLY MACHINE LEARNING AND ARTIFICIAL INTELLIGENCE (AI)—CONTINUES TO PLAY A GROWING ROLE IN HEALTHCARE RECRUITMENT, LENDING AN INNOVATIVE HAND WITH IDENTIFYING JOB NEEDS AND PINPOINTING RECRUITMENT OPPORTUNITIES. AS THE HEALTHCARE INDUSTRY CONTINUES TO ADVANCE, HEALTHCARE STAFFING WILL ALSO EVOLVE, PROMPTING RECRUITERS TO LEVERAGE TECHNOLOGY TO HANDLE A VARIETY OF TASKS, FROM PREDICTING STAFFING NEEDS TO IDENTIFYING CANDIDATES BASED ON SMART ASSUMPTIONS.**

### SEARCH SNAPSHOT

Across most major staffing industries—from industrial and IT to finance and education—the theme of 2017 is big growth. Healthcare staffing has hopped onto this trajectory too, with an expected 8 percent increase in growth, according to research from Staffing Industry Analysts (SIA). Retained search firms are expected to see a 5 percent revenue increase this year—and an even larger one (6 percent) next year, as reported by SIA.

### LEVERAGING AI

As the demand for providers continues to grow, recruiters will have the ability to use innovation such as AI to enhance their search processes. According to [CIO](#), AI can utilize its number crunching prowess to predict the length of time it may take to staff those harder-to-fill positions. Armed with this intel, recruiters can work with their clients more efficiently (and identify what opportunities may be coming up in the near future)—and help facilities to better forecast their staffing resources.

As the [CIO article](#) also explains, AI can be a strong recruitment tool because it can mine data in various ways to identify strong job candidates. This is because, as CIO explains, AI can be used to conduct different types of searches, such as conceptual (results from key words that form a concept), implicit (results based on assumed information), and semantic (results based on intent and context). AI brings deeper productivity to the search function by enabling recruiters to identify possible job candidates based on things other than exact terminology.

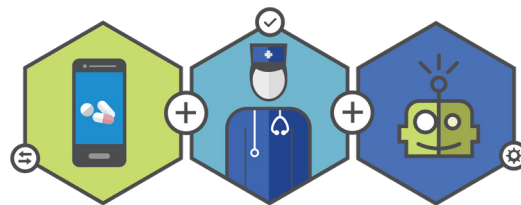
### AI AND PATIENT CARE

The capabilities of robotics, telemedicine, and electronic health records continue to become more refined with innovation. As [machine learning enables computers to become more adept at image and data analyses to help diagnose](#) and offer treatment plans, more providers and patients will rely on technology to deliver and receive sound and accurate healthcare information. AI also offers the promise of treating patients from the comfort of their homes by enabling providers to converse and interact remotely via a smart device. Experts predict that these virtual house calls will be provided by most [large medical companies by 2019](#).

### NEW PLAYERS

As with any disruptive innovation, firms that can get in the game will. [Bullhorn](#) reports that Facebook and Google will continue to focus on recruiting, but just how focused it will be in the healthcare space remains to be seen.

When it comes to technology, the question isn't "if" or "when." It's really, "to what extent?" In the healthcare recruiting space, AI is poised to make placements more productive, and make the industry even smarter.

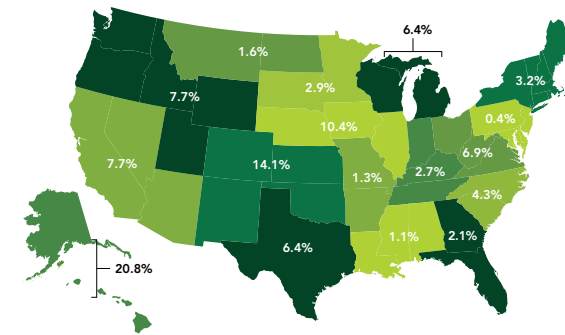


THE HEALTHCARE RECRUITING STANDARD

# MARKET DEMAND



## Nationwide Search Distribution



Map represents searches initiated by Delta Healthcare Providers on behalf of healthcare facilities from October 2016 through September 2017.

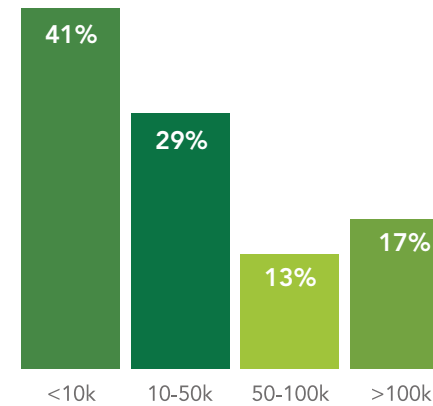
## Specialty Demand Comparison

	3 <sup>rd</sup> Quarter 2017	3 <sup>rd</sup> Quarter 2016
1.	Registered Nurse	Physical Therapist
2.	Physical Therapist	Registered Nurse
3.	Nurse Practitioner	Nurse Practitioner
4.	Licensed Clinical Social Worker	CRNA
5.	Dentist	Dentist

Data compares the top 5 most requested searches initiated by Delta Healthcare Providers in the third quarters of 2016 and 2017.

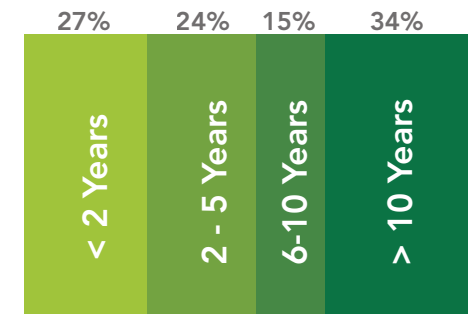
# PLACEMENTS & INTERVIEWS

## Placements by Population



Data indicates the percentage of placements made from October 2016 through September 2017 by the population of the search facility's metropolitan area.

## Years of Experience



Data indicates the average years of experience of candidates for placements and interviews from October 2016 through September 2017.

# PLACEMENTS & INTERVIEWS

## Placement Data by Specialty

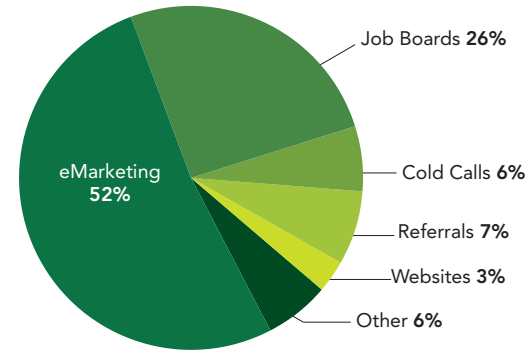
This data represents average statistics of placements and interviews by Delta Healthcare Providers over the twelve-month survey period. Since these averages only include placements and interviews, the compensation information presented is an indicator of the rate at which candidates are choosing to interview or sign. Average days information can be used to forecast a probable timeline for a recruitment effort in a particular specialty.



	Average Compensation				Average Days			
	Starting Compensation	Sign-on Bonus	Student Loan Repayment	Relocation Reimbursement	From Interview to Placement	Total Placement	Fastest Days-to-Fill	
Rehabilitation	Occupational Therapist	\$86,200	\$7,562	\$30,000	\$4,375	5	64	22
	Physical Therapist	\$84,562	\$10,340	\$22,785	\$4,273	7	69	8
	Speech-Language Pathologist	\$82,054	\$7,000	\$15,000	\$3,900	24	91	21
	Physical Therapy Assistant	\$70,000	\$2,500	-	\$2,500	3	83	17
Extenders	Nurse Practitioner	\$144,510	\$18,560	\$41,803	\$10,771	12	79	41
	Physician Assistant	\$111,000	\$7,666	\$28,000	\$5,500	7	52	14
Allied/Other	Dentist	\$161,436	\$21,000	\$52,500	\$9,062	9	61	32
	Diagnostic Medical Sonographer	\$59,280	\$10,000	-	\$10,000	5	98	48
Nursing	Licensed Clinical Social Worker	\$70,871	\$5,000	-	\$3,333	15	97	62
	CRNA	\$156,333	\$31,666	\$25,000	\$5,000	32	92	48
	Registered Nurse	\$77,937	\$8,549	\$19,477	\$8,188	5	88	7
	Case Manager	\$81,500	-	\$20,000	\$4,500	10	50	46
	Nurse Manager of Surgical Services	\$90,000	\$4,500	-	\$2,000	4	40	37

Data reflects averages from placements and interviews by Delta Healthcare Providers from October 2016 through September 2017. "Average Compensation" data reflects average yearly compensation for each position listed above. "Average Days" data does not include off-contract placements.

## Candidate Sources



Data indicates sources of Delta Healthcare Providers permanent candidates for placements and interviews from October 2016 through September 2017.

## Candidate Placements

Compares all states for the top 5 candidate placements as initiated by Delta Healthcare Providers from October 2016 through September 2017.

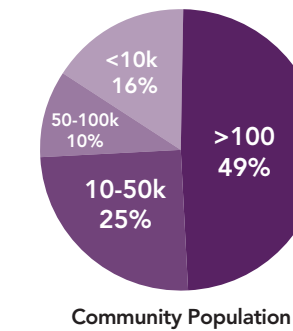
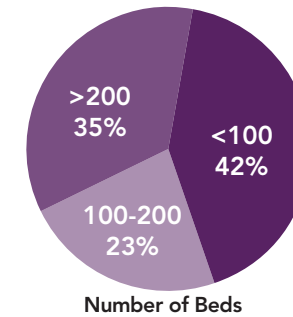
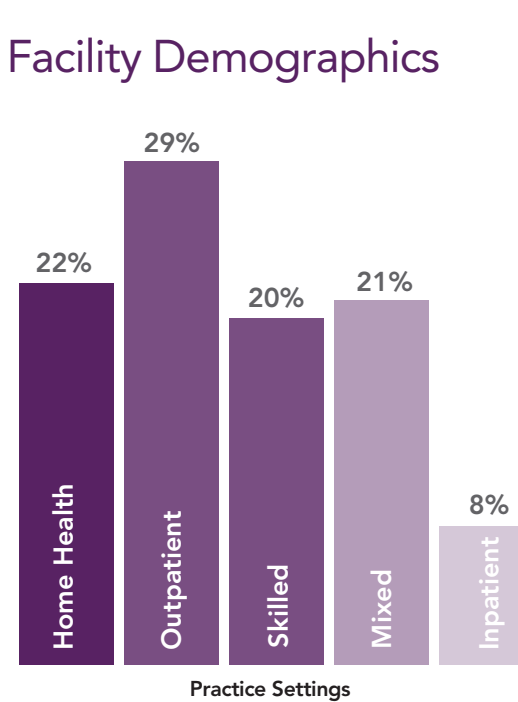
Top 5 States Providers Have Taken New Opportunities			
1.	Alaska	4.	Wisconsin
2.	California	5.	Oregon
3.	Nebraska		

# STAFFING

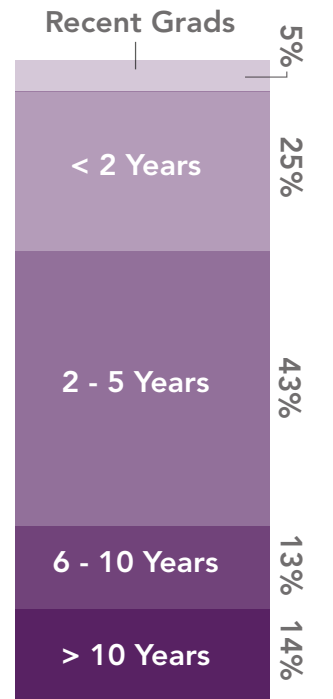
The data below is comprised of travel placements made by Delta Healthcare Providers over a three-month survey period.



## Facility Demographics



## Years of Experience



Data is compiled from assignments placed by Delta Healthcare Providers from July 2017 through September 2017.