

# the STANDARD

3rd Quarter 2013 October '12 - September '13



## INDUSTRY PERSPECTIVES

### Behavioral Health: Staying ahead of the shortage

As the demand for behavioral health professionals increases, facilities should consider what implications this may have on facility growth

Marc Bowles, *Vice President of Marketing, Physician Group*

Behavioral health care continues to be a growing demand throughout the nation. Within the last year, psychiatry has moved to the second most requested search for Delta Physician Placement, according to data from this edition's Standard.

This increase in demand is forecasted to continue as the current supply of psychiatrists struggles to support a population in need of mental health care. According to a news release from the American Psychiatric Association, the approximate 50,000 psychiatrists currently practicing within the United States is already an inadequate number to serve all patients in need—particularly in rural areas of the country. The release also states that the number of medical students opting to pursue psychiatry as a specialty has continued to decline over the last six years. This figure, coupled with a blog from the National Institute of Mental Health stating nearly 55 percent of practicing psychiatrists are 55 or older, means that over half of the specialty's professionals are nearing the age for retirement during a time that new students are choosing a different specialty.

All of the above data drives the conclusion that now is the time to consider future behavioral health needs. Developing your behavioral health team may not seem like an immediate priority for your facility, but if you can help predict the growth of your organization and what behavioral health needs may arise, you can avoid running into issues that will surface from the shortage. As the demand continues to rise, facilities will be required to strengthen recruitment efforts to attract top psychiatric talent, meaning greater incentives, higher

compensation, and increased investment from the facility.

The stir in psychiatry placements has not been exclusive to permanent positions. Delta Locum Tenens has seen a 50 percent increase in behavioral health job orders over the last four months.

While drawing on locum tenens coverage for behavioral health needs can be an advantageous practice for temporary relief (i.e. filling in for a doctor's planned absence or utilizing locums coverage while conducting a search for a permanent psychiatrist), relying solely on locum psychiatry should not be a long-term solution.

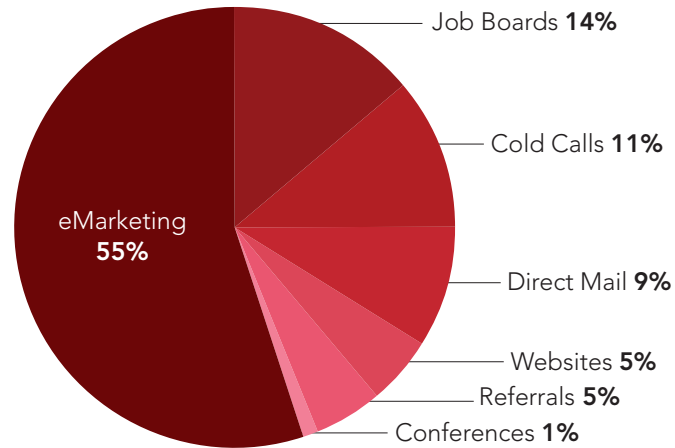
■ The stir in psychiatry placements has not been exclusive to permanent positions. Delta Locum Tenens has seen a 50 percent increase in behavioral health job orders over the last four months. ■

"Psychiatry is unique from other locum opportunities in that the patient-to-doctor relationship plays a role in the treatment process," said Hiram Colon, Delta Locum Tenens Recruiting Director. "When a community has a need, you don't want to let that position go unfilled, or you are cutting off a patient's access to care. This is where facilities can utilize a locum psychiatrist—to fill an absence or provide temporary care. It is the Band-Aid that stops the bleeding; it's not the surgery."

Facility representatives and recruiters that understand the challenges of today's market will be more prepared to face recruitment barriers as they arise, which is an advantage when trying to attract and retain top talent. Staying ahead of your facility's staffing needs could help you to avoid future headaches with these challenges—particularly as they relate to staffing during a behavioral health shortage.

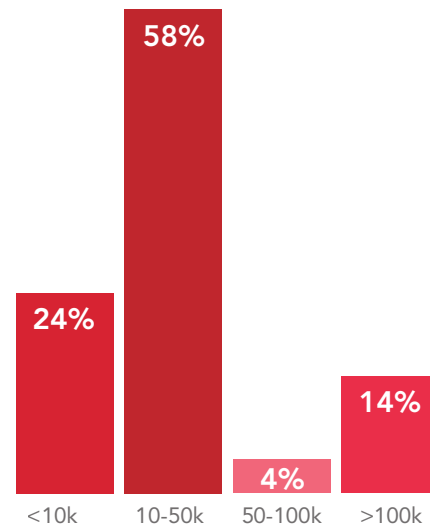
# PLACEMENTS & INTERVIEWS

## Candidate Sources



Data indicates sources of candidates for placements and interviews From October 2012 through September 2013.

## Placements by Population



Data indicates the percentage of placements made from October 2012 through September 2013 by the population of the search facility's metropolitan area.

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 Mary Glover, Vice President of Communications, The Delta Companies at (800) 521-5060 x4144 or [mglover@TDCpeople.com](mailto:mglover@TDCpeople.com)

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# PLACEMENTS & INTERVIEWS

## Placement Data by Specialty

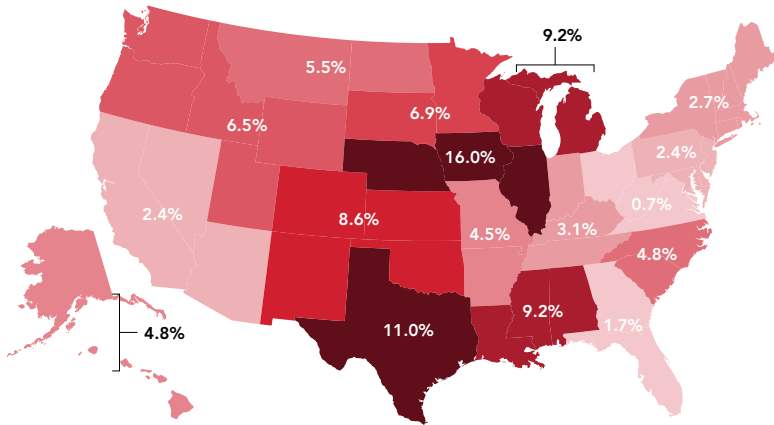
This data represents average statistics of placements and interviews by Delta Physician Placement over the twelve-month survey period. Since these averages only include placements and interviews, the compensation information presented indicates the rate at which candidates are choosing to interview or 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	\$205,221	\$22,487	\$235,031	30	131	3
	Internal Medicine	\$225,568	\$28,750	\$275,000	30	172	74
	Pediatrics	\$196,667	\$37,000	\$237,500	37	184	83
	Psychiatry	\$213,083	\$20,455	\$251,417	27	157	1
	Obstetrics/Gynecology	\$295,000	\$32,500	\$356,250	26	134	78
Surgery	General Surgery	\$365,225	\$32,500	\$422,810	26	126	23
	Orthopedic Surgery	\$471,225	\$51,250	\$587,500	20	155	34
	Otolaryngology	\$436,667	\$46,667	\$426,667	150	150	125
	Urology	\$412,500	\$25,000	\$626,163	46	189	136
Sub-Specialties	Cardiology	\$400,000	\$20,000	\$700,000	70	97	97
	Oncology	\$300,000	\$20,000	\$560,000	15	197	197
	Neurology	\$287,500	\$15,000	\$350,000	15	101	73
	Pulmonary Critical Care	\$357,500	\$22,500	\$400,000	59	200	200
Hospital Based	Gastroenterology	\$450,000	\$45,000	\$500,000	78	180	180
	Anesthesiology	\$475,000	\$20,000	\$525,000	21	26	52
	Radiology	\$350,000	\$25,000	\$700,000	22	53	53
	Hospitalist	\$233,222	\$23,889	\$283,400	28	180	36
	Emergency Medicine	\$290,200	\$24,286	\$324,750	21	183	29

Data reflects averages from placements and interviews by Delta Physician Placement from October 2012 through September 2013. "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.

# MARKET DEMAND

## Nationwide Search Distribution



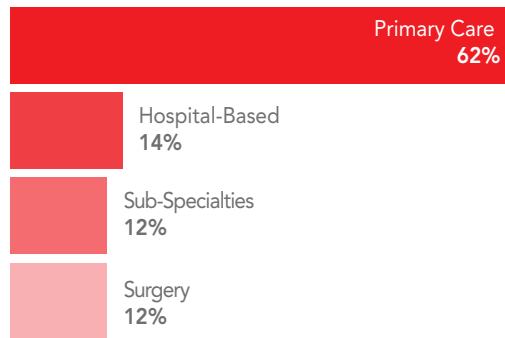
Map represents searches initiated by Delta Physician Placement on behalf of healthcare facilities from October 2012 through September 2013.

## Specialty Demand Comparison

	3 <sup>rd</sup> Quarter 2013	3 <sup>rd</sup> Quarter 2012
1.	Family Medicine	Family Medicine
2.	Psychiatry	Hospitalist
3.	Hospitalist	Psychiatry
4.	Internal Medicine	Emergency Medicine
5.	General Surgery	Family Medicine - Obstetrics
6.	Emergency Medicine	Internal Medicine
7.	Obstetrics and Gynecology	Obstetrics and Gynecology
8.	Dermatology	Pediatrics
9.	Family Medicine - Obstetrics	Gastroenterology
10.	Pediatrics	Neurological Surgery
11.	Urology	Dermatology
12.	Anesthesiology	Hematology / Oncology
13.	Endocrinology	Neurology
14.	General Practice	Ophthalmology
15.	Nephrology	Orthopedic - Total Joints

Data compares the top 15 most requested searches initiated by Delta Physician Placement, comparing the 3<sup>rd</sup> quarters of 2012 and 2013.

## Search Specialty Distribution



Data indicates the percentage of searches initiated by specialty grouping between October 2012 and September 2013.

## Candidate Placements

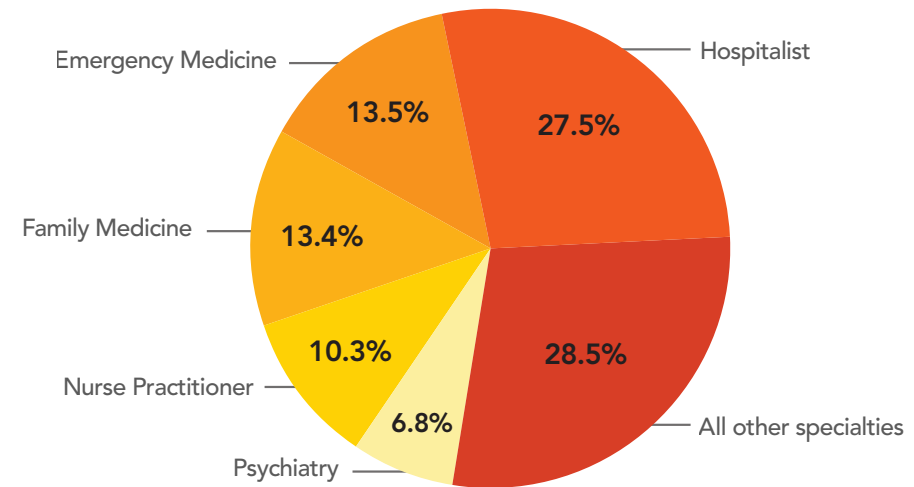
Top 5 States Providers Have Taken New Opportunities	
1.	Texas
2.	Iowa
3.	North Carolina
4.	Wisconsin
5.	Montana

Compares all states for the top 5 candidate placements as initiated by Delta Physician Placement from October 2012 through September 2013.

# LOCUM TENENS

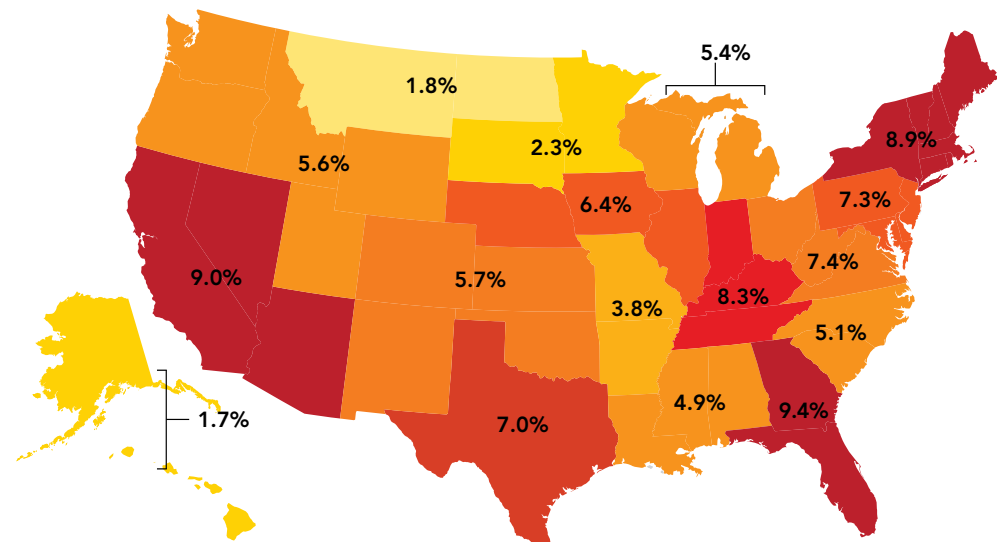


## Days Requested - Top Specialites



Data indicates the top specialties by days requested from October 2012 through September 2013.

## Nationwide Physician Distribution



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

# INDUSTRY PERSPECTIVES

## Increasing your reach: Marketing on a national scale

A discussion about advertising efforts for allied opportunities as they relate to recruitment and retention

Trey Smith, *Marketing Director, Delta Healthcare Providers*

When it comes to developing a marketing strategy for an open opportunity, many successful placements are with providers from out of state, or even across the country. Tailoring advertising efforts to reflect this reach can help give facilities the competitive advantage they need in recruiting for allied opportunities.

In a recent survey by Delta Healthcare Providers, 68 percent of all allied, rehabilitation, and extenders placed by the company over an 18-month period opted to relocate out of state for a permanent opportunity. Although reasoning for relocation varied on a case-by-case basis, this data enforces the fact that the candidate pool for permanent allied opportunities is nation-wide. Therefore, in order for a facility to have a presence with the optimum distribution of candidates, their opportunity must be presented and marketed from a national scale.

When developing marketing strategy for opportunities in rural communities, facility representatives should consider the true scale of their opportunity, and how it compares with competition nation-wide. In today's market of instant,

to an audience that would not be reached through local advertising. In fact, 67 percent of Delta Healthcare Provider's permanent placements from October 2012 to September 2013 were made in communities with less than 50,000 residents, as noted in the Placements and Interviews section of the next page.

In a previous edition of The Standard, we discussed the importance of presenting a nationally competitive compensation and incentive package for an open opportunity. This paired with an effective, national-reaching marketing strategy, is imperative in the recruitment process and can be extended toward retention initiatives. In an article published by the Journal of Rural Health, researchers found that loan forgiveness and rural training programs were important factors toward recruitment; financial incentives, professional opportunity, and desirability of the locations were key factors in retention.

While a good marketing strategy may be enough to get a provider in the door, screening the candidate pool for the right fit is what makes the difference between filling a job and finding a long-term solution for a community. The best way to ensure clarity between facility and provider is to provide thorough and transparent information about an opportunity and the community it represents. Smart marketing serves as an extension of a facility's name, and should convey its values, mission, and intent. When this message reaches the right provider, whether they reside in the neighboring county or across the nation, a foundation is created for a lasting partnership that will ultimately benefit both the hiring facility and compatible provider—as well as a patient population in need of stable, quality healthcare.

barriers eliminating proximity as an incentive in the recruitment process. With these barriers disintegrated, rural communities have the opportunity to target providers that are willing to relocate, by presenting their opportunity

■ In order for a facility to have a presence with the optimum distribution of candidates, their opportunity must be presented and marketed from a national scale. ■

When it comes to developing a marketing strategy for an open opportunity, many successful placements are with providers from out of state, or even across the country. Tailoring advertising efforts to reflect this reach can help give facilities the competitive advantage they need in recruiting for allied opportunities.

# MARKET DEMAND



## Nationwide Search Distribution



Map represents searches initiated by Delta Healthcare Providers on behalf of healthcare facilities from October 2012 through September 2013.

## Specialty Demand Comparison

	3 <sup>rd</sup> Quarter 2013	3 <sup>rd</sup> Quarter 2012
1.	Physical Therapist	Physical Therapist
2.	Nurse Practitioner	Nurse Practitioner
3.	Registered Nurse	Occupational Therapist
4.	Occupational Therapist	Registered Nurse
5.	Physician Assistant	Physician Assistant

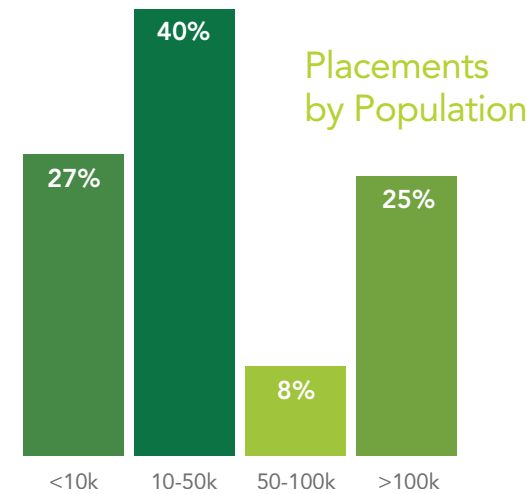
Data compares the top 5 most requested searches initiated by Delta Healthcare Providers in the 3<sup>rd</sup> quarters of 2012 and 2013.

Top 5 States Providers Have Taken New Opportunities	
1. Texas	4. Oregon
2. Alaska	5. New Mexico
3. Iowa	

## Candidate Placements

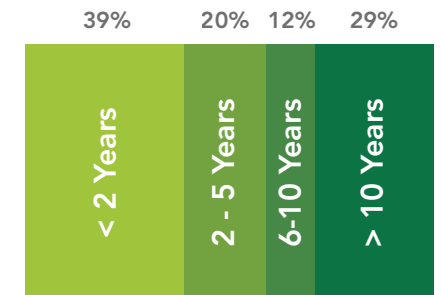
Compares all states for the top 5 candidate placements as initiated by Delta Healthcare Providers from October 2012 through September 2013.

# PLACEMENTS & INTERVIEWS



Data indicates the percentage of placements made from October 2012 through September 2013 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 2012 through September 2013.

# 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	PT	\$81,907	\$7,788	\$35,813	\$3,519	10	79	1
	OT	\$76,785	\$9,089	\$10,063	\$4,220	11	99	9
	SLP	\$75,246	\$7,667	-	\$5,750	3	16	7
Extenders	NP	\$99,816	\$6,995	\$35,545	\$6,786	13	81	3
	PA	\$107,429	\$6,600	\$71,500	\$4,600	10	80	19
Allied/Other	RN	\$68,711	\$7,000	\$11,667	\$5,281	9	69	15
	MT	\$52,720	\$2,000	-	\$2,667	8	52	19

Data reflects averages from placements and interviews by Delta Healthcare Providers from October 2012 through September 2013. "Average Compensation" data reflects average yearly compensation for each position listed above. "Average Days" data does not include off-contract placements.

# STAFFING

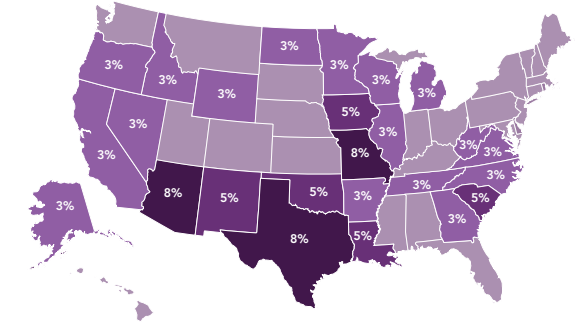


## Assignments by Specialty

Specialty	Average Length Contract to Start Date	Average Length of Assignment
Occupational Therapist	5 Weeks	10 Weeks
Occupational Therapy Assistant	1 Week	13 Weeks
Physical Therapist	5 Weeks	10 Weeks
Physical Therapy Assistant	3 Weeks	11 Weeks
Speech Language Pathologist	4 Weeks	11 Weeks

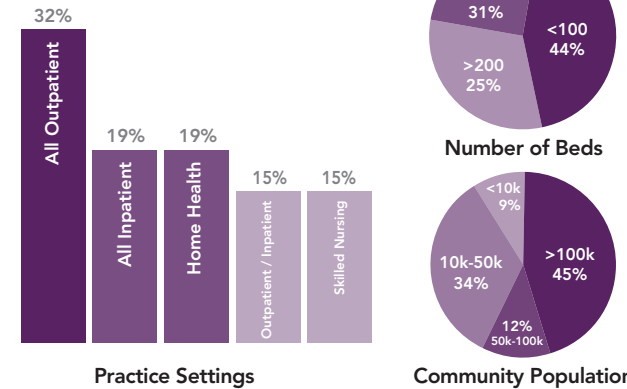
Data is compiled from assignments placed by Delta Healthcare Providers from July 2013 through September 2013.

## Top Licensure States

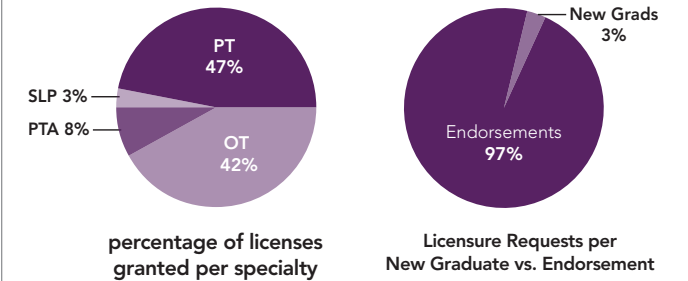


Map represents top licensure states by Delta Healthcare Providers on behalf of healthcare facilities from July 2013 through September 2013.

## Facility Demographics



## Licenses Per Quarter



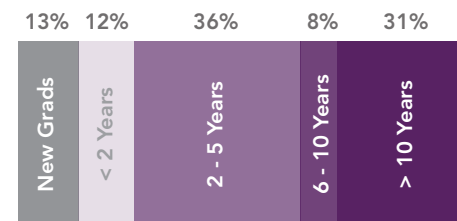
Data is compiled from assignments placed by Delta Healthcare Providers from July 2013 through September 2013.

## Licensure Cost

Specialty	Avg. Cost of Licensure
Physical Therapist	\$296.24
Physical Therapy Assistant	\$247.00
Occupational Therapist	\$262.93
Occupational Therapy Assistant	\$205.00
Speech Language Pathologist	\$185.00

Data is compiled from assignments placed by Delta Healthcare Providers from July 2013 through September 2013.

## Years of Experience



Data is compiled from assignments placed by Delta Healthcare Providers from July 2013 through September 2013.