In today’s complex workforce landscape, even the most progressive systems’ guesstimates of physician need can fall out of focus. Facing great change without clear direction, how do health care leaders find a clear answer to “How many?”
Sg2’s comprehensive approach to physician workforce planning paints a clear picture of true need—accounting for the market-specific dynamics of today and a set of factors most likely to impact the workforce needs of tomorrow.
STRATEGIC WORKFORCE PLANNING: Sg2’s 4-PHASE APPROACH

I FORMULATE A BASELINE
Developing a supply/demand ratio baseline can be tough due to flawed supply data and highly variable benchmark literature. But a willingness to accept these imperfections and select a starting point—however challenging—is where the real work in workforce planning begins.

Focus on:
- Finding workarounds for flawed supply estimates
- Exercising caution when referencing physician-to-population ratio studies

2 FIGURE OUT DISTRIBUTION
Refining that initial ratio range requires keen insight into local dynamics. At the core of this effort is an exploration of case mix and service utilization patterns by market. Diving into these data makes clear who exactly is delivering care across which specialties.

Focus on:
Leveraging claims data to dig into practice mix details:
- Procedures where specialist overlap is common
- Clinical areas with blurred primary care physician/specialist boundaries
- Utilization of advanced practitioners (APs)
3 FACTOR IN KEY INDICATORS

Paying skillful attention to local variables is an essential next step in adjusting staffing projections. Nuanced and complex, the process is part art and part science. Yet, done correctly, it brings added clarity to the typically imprecise task of contextualizing physician need.

Focus on:
Determining the impact of key variables across 3 categories:
- **Area indicators** (demographics, geography, market competition/alignment)
- **Institutional drivers** (access/capacity, stakeholder perspectives, growth plans)
- **Medical staff profile** (age/attrition/turnover, productivity)

4 FUTURE PROOF

At this stage, a “today” number—sufficient for recruitment and short-term growth plans—may be nearly in focus. But a willingness to take that number forward to consider what a radically redesigned future state could look like creates the best view of true workforce need.

Focus on:
Gauging the role care redesign levers could have on the trajectory of tomorrow’s physician needs:
- **Change who does the work** (top-of-license work, part-time positions)
- **Do the work more efficiently** (redirection of nonclinical tasks, artificial intelligence)
- **Eliminate the work** (unnecessary care reduction, virtual health)
Sg2’s framework helps health care leaders arrive at a valid, actionable assessment of physician need and optimal deployment. Before diving into the hard work of “how many,” however, organizations must take a step back to ask: How prepared are we to undertake a sophisticated workforce planning approach? Answers can expose gaps in capacity or capabilities to address prior to launch.

Recalibrating Physician Need: Readiness Assessment

**ORGANIZATIONAL REALITIES**
- What is the scope of our workforce plan? Have we synced up with the right stakeholders to ensure our efforts are guided by enterprise-wide strategy?
- Are other recruitment initiatives already underway?
- Do competing enterprise priorities exist that could impact our time frame to start?
- Are we financially prepared to acquire new talent?
- Do we understand legal issues surrounding physician recruitment?

**RISK READINESS**
- What is our market typology (per the Sg2 Accountability Readiness tool): trailing, transitioning or leading?
- What signs (if any) indicate the market is shifting toward more risk (e.g., insurers tiering networks, large employers seeking direct contract bundles for specific procedures)?
- Does our enterprise strategic plan call for the organization to lead the market in the transition to risk?
- Are physicians seeking risk contracts and/or participating in new payment pilots?

**CULTURE**
- How do we utilize APs? Are they credentialed? Do they have a voice in governance?
- Have physicians cited concerns about burnout and the challenges of documentation?
- Are physicians broadly and actively engaged in quality and care standardization efforts?
- Have we assessed/exhausted opportunities to train and develop existing physician staff?
- Are there turf wars among specialists we need to address?

**INFRASTRUCTURE AND INNOVATION**
- Do we have the tools and skill sets needed to gather and analyze essential workforce data?
- Is our organization embracing opportunities to eliminate unnecessary care?
- What active care redesign initiatives are in place?
- Has our organization begun exploring and/or utilizing artificial intelligence or virtual health applications?

Want to learn more? For a detailed look at this topic, see the full report *Strategic Workforce Planning: Finding Focus*. For customized help, contact your Sg2 service team at 847.779.5300.
Anticipate the Impact of Change

Sg2, a Vizient company, is the health care industry’s premier authority on health care trends, insights and market analytics.

Our analytics and expertise help hospitals and health systems achieve sustainable growth and ensure ongoing market relevance through the development of an effective System of CARE.