Why Doctors Joined the Great Resignation – and How Hospitals Can Bring Them Back

According to research highlighted by the American Medical Association, doctors are leaving or planning to leave their jobs at alarming rates. As a result, many hospitals are cutting services, draining them of needed revenue and leaving communities without access to local medical care.

Why is This Happening, and What Can Hospitals Do to Attract and Retain Top Physician Talent in This Environment?

The solution to bringing these doctors back to work in hospitals where they’re needed is simpler than it might appear. Here's why doctors are leaving now, when we need them the most—and how embracing new staffing models is the way to bring them back.

The Why: Burnout is an Old Problem, and Workforce Expectations Have Changed

There are a number of reasons why doctors are joining the Great Resignation. Many of these factors were in place before 2020, and COVID-19 simply exacerbated the problem.
In May 2022, the U.S. Surgeon General issued a *first-ever advisory* on healthcare worker burnout and resignations. This was a much needed recognition of a problem that has been growing for a long time. Even before the pandemic, experts were predicting a shortage of physicians due to burnout, pointing to an alarming physician suicide rate much higher than the general public’s, even exceeding combat veterans. For many qualified, experienced doctors, balancing the administrative burdens of running a practice along with on-call duties is unsustainable long-term.

Like other industries, the expectations of our medical workforce have changed. After putting their lives on the line every day, many doctors felt that the only way to gain control and have a personal life was to leave their jobs. This can be a painful choice as they may not want to leave the clinical career they worked so hard to build but may see it as their only escape.

> But what if there were an option that helped doctors live their best lives now — allowing them to be productive in their clinical career while enjoying predictable time off?

Hospital leaders are frequently told that they need to create a better culture in order to retain physician talent. In the hospital setting, “culture” means something very different than the typical workplace. Doctors may enjoy gym memberships and free pizza, but what they crave are transparency, competitive pay, and set work hours and give them real time off.

**The How: Embrace New Healthcare Staffing Models to Build a Better Culture**

The good news is that there are transformational staffing models that work well for the growing number of doctors who want to balance quality of life with quantity of work—and they have *major benefits* for hospitals, as well, boosting revenue and aligning clinician, hospital and patient goals. One of these options is *The Surgicalist Model*, evolved by orthopedic surgeon visionaries Rand Schleusner, MD, and John D. Campbell, MD.

Surgicalists function as a clinical team, all of whom are assigned coordinated shifts covering emergency department on-call needs or who support a full surgical program for emergent, elective, and inpatient consult needs. Unlike locums physicians, these surgicalists are dedicated to their hospital facility, serve on committees, engage with the community at large and work side-by-side with the hospital’s other medical staff physicians and employees as a true team member.
This specialized model gives the Surgicalist the flexibility to work seven to ten consecutive days per month, allowing for predictable blocks of time off. It also lets the private practice surgeons they are supporting care for their patients with limited or no emergency department on-call responsibilities, which eliminates care conflict. As a result, both the private practice physician and the surgicalist get to do the type of work they want while achieving greater work-life balance.

The When: For Successful Hospital Leaders, Recovery Starts Now

For the hospital facility, surgery is one of the top specialties that drives the most revenue. The Surgicalist Model has been proven to increase surgical volume, as well as decrease patient wait times, improve patient throughput, increase elective surgeries, curb outmigration, and decrease unnecessary readmissions. All of this supports downstream revenue growth, which is important because hospitals need to be profitable like any other business.

While health systems are starting to recover from the financial shock of the pandemic, the Great Resignation continues to hit hospital bottom lines hard. It may be 2-3 years before most hospitals return to profitability unless they rethink their approach to staffing.

Quickly evolving a culture that embraces innovation and working with supportive and specialized staffing partners can play a big role in attracting and retaining top physician talent — putting hospitals back on track now and positioning them well for the future.

Learn more about the Surgicalist Staffing Model

www.Synergy-HP.com