

UF Primary Care Physicians' Satisfaction

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INTRODUCTION

Professional burnout is a syndrome characterized by emotional exhaustion, feelings of cynicism, and decreased sense of personal accomplishment.¹ A 2011 national survey of all physician types found 46% of physicians reported some degree of burnout. Family, internal, and emergency medicine physicians had the highest rates of burnout (>50%). When compared to non-physician, employed population controls groups, physicians worked longer hours and struggled more with work-life balance than their non-physician counterparts, suggesting this is not simply a societal trend.¹ Other studies have found that threats to physicians' clinical autonomy, which includes their ability to provide high-quality patient care, maintain continuing doctor-patient relationships, have adequate time with patients, and freedom to make clinical decisions, were the most consistent and largest deterrent to physician satisfaction.² Physicians in academia are tasked with patient care, research, education, and administrative duties. One survey of medical school faculty found 42% of respondents were "seriously considering leaving academic medicine in the next 5 years" and 40% were not satisfied with their career progression.³ To provide an outstanding academic environment for education, research and clinical practice, it is crucial that we acknowledge and understand the factors that contribute to our physicians' satisfaction.

AIM

The aim of this study was to explore factors, positive and negative, contributing to primary care physician (PCP) job satisfaction in an academic setting.

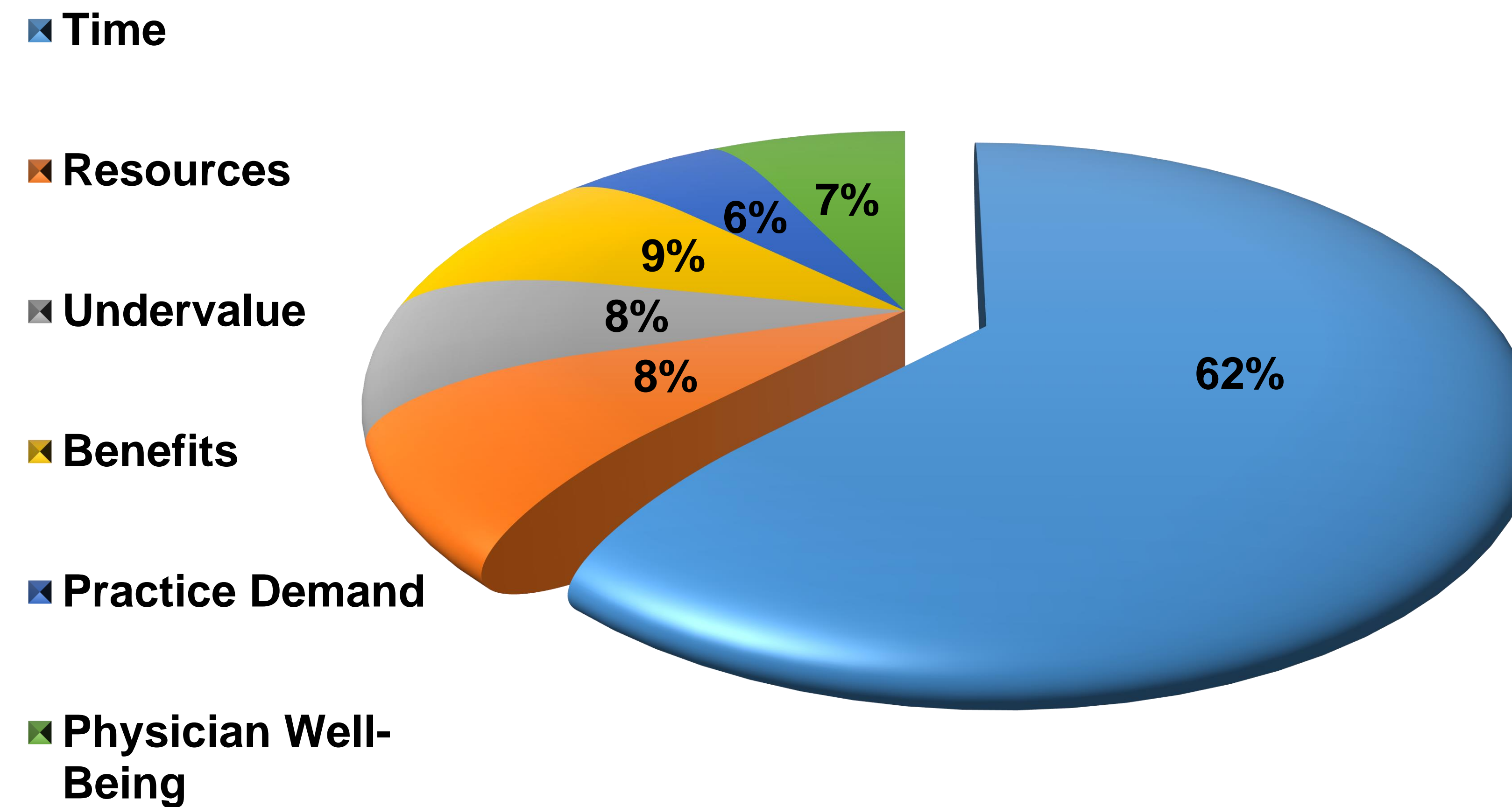
METHODS

Focus groups were conducted at 6 UF primary care clinics between 2014-2015. Transcripts were analyzed in a systematic manner by two independent investigators trained in qualitative research methods.

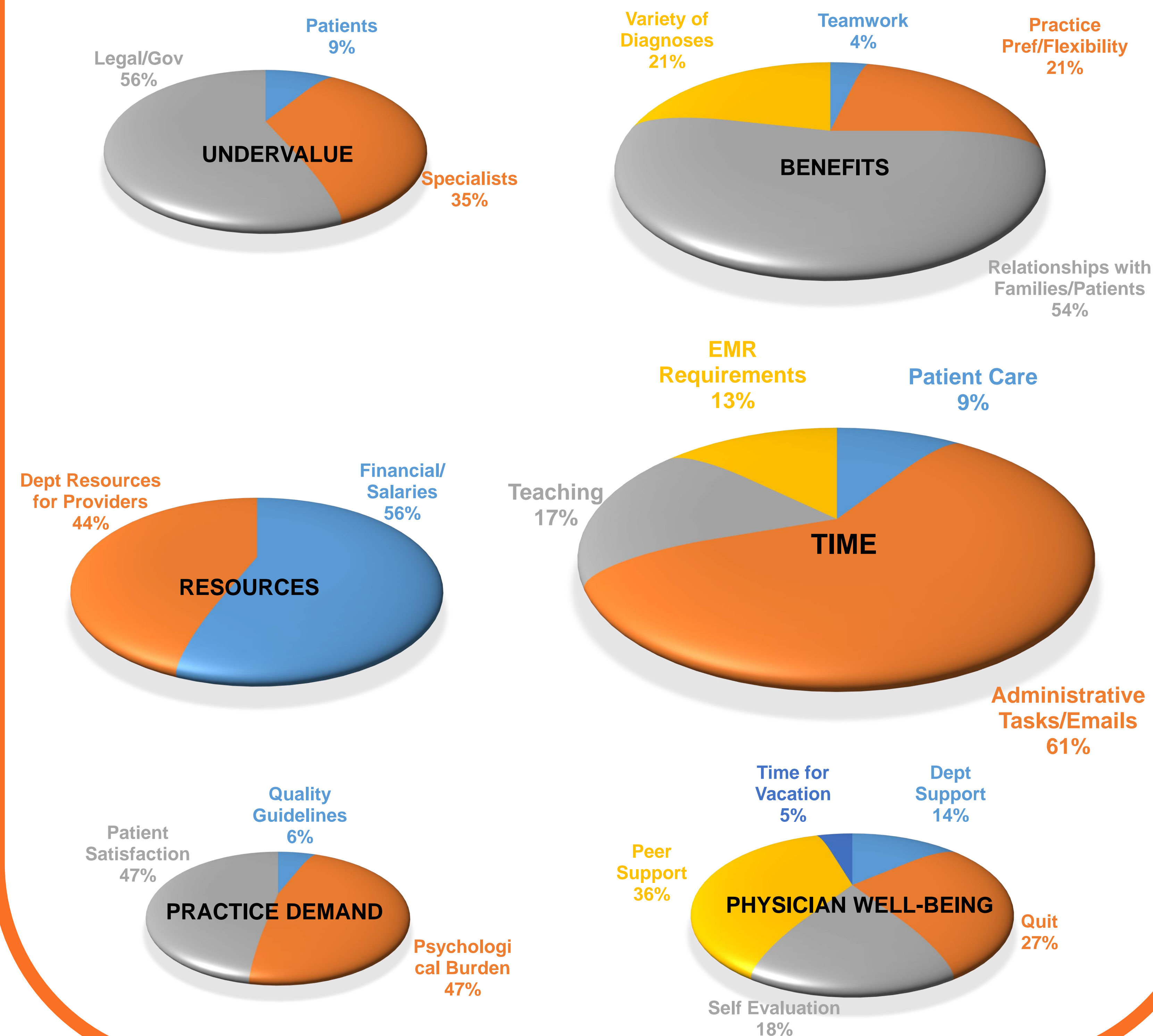
This study is approved as exempt research by the UF IRB.

RESULTS

MAIN THEMES



SUBTHEMES



CONCLUSION

Time was the most common theme discussed in regards to primary care physicians' satisfaction. Within that theme, administrative tasks/emails emerged as a significant contributor to physician dissatisfaction. Patient emails in the EMR, documentation required by insurance companies, forms requested by patients, and daily notes all contributed to the burden felt by PCPs. Teaching also took up excess time but most faculty recognized it as part of the mission of academic medicine and found it to be a positive experience.

Other emerging themes were discussed almost equally among the groups. UF PCPs found satisfaction in caring for entire families, treating a variety of disease, working in teams, ability to tailor practice preference, schedule flexibility, and patient relationships. At times they feel undervalued by the health care system and specialists. They would like more resources, such as staff, to help with increasing work demands. While they acknowledged the burden of increasing student loans, they did not feel under compensated. Overall they enjoy the academic environment.

LIMITATIONS

Data collected was from PCPs at one academic institution and may not be applicable to other institutions. Interviews were conducted through focus groups and some participants might not have felt comfortable sharing other opinions in front of their peers.

FUTURE DIRECTIONS

In-depth study of physicians' time to further explain and understand the dissatisfaction they are experiencing. Quality improvement interventions to decrease the amount of administrative tasks/emails PCPs deal with on a daily basis.

REFERENCES

1. Shanafelt, T. D., et al. (2012). Burnout and Satisfaction with Work-Life Balance Among US Physicians Relative to the General US Population. *Arch Intern Med*, 172 (18), 1377-85.
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