

Snapshots from the webinar: Is retaining HPSA physicians about satisfaction with their jobs or their communities?

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This webinar used PRISM data to test how physicians' satisfaction with various aspects of their work and communities predicts whether they anticipate still to be working in their HPSA practices in four years, and to test if these predictions are the same for physicians in urban HPSAs and rural HPSAs.

Survey data from about 2,000 physicians who completed questionnaires at the end of an initial NHSC federal loan repayment program obligation, from 2014 through early 2024

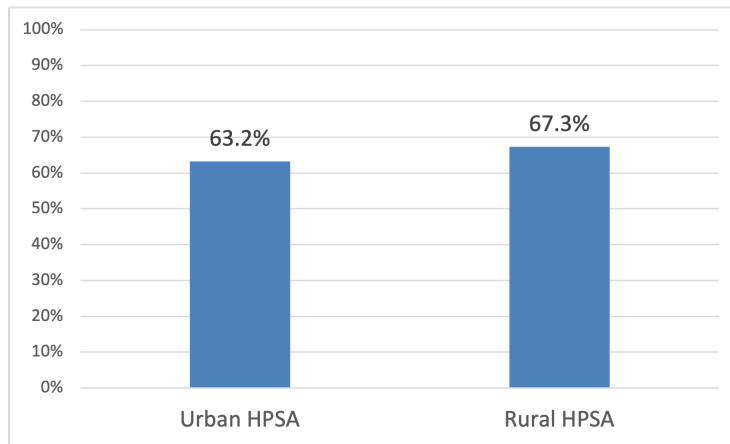
Respondents were:

- From 37 states
- 1,102 questionnaires completed (55% participation)
- All 1,102 worked in HPSAs
 - 747 in urban HPSAs
 - 355 in rural HPSAs
- Average age: 41 years (range: 31 - 68)
- Average years since medical school: 11 (range: 5 - 33)
- Number of years working in their practices: 5 years (range: 0.5 to 22)

Types of practices within urban HPSAs and rural HPSAs

	Urban HPSA (n=747)	Rural HPSA (n=355)
FQHC	65%	28%
Rural Health Clinic	3%	27%
Hospital-based	7%	10%
IHS or tribal site	5%	12%
Other practice types	20%	22%

Percentages of urban and rural HPSA physicians that anticipate they will still be working in their practices in four years



p , not significant

Adjusted¹ correlates of 4-year anticipated retention for physicians in urban HPSA practices

Yes/no	Urban HPSAs (comparative odds)
Satisfied with community	2.8*
Finds work meaningful	1.9*
Has good administration	1.9*
Can practice full scope	1.7*
Feels connected and supported	1.5*
Has a good work-life balance	1.1
Feels well compensated	1.0

This means that physicians in urban HPSA practices who are satisfied with their communities, compared to those not satisfied with their communities, have 2.8 times the odds of anticipating they will still be working in their practices in 4 years

¹ Adjusted for satisfaction with community, satisfaction with all six aspects of the practice, physician demographics and county demographics

* statistically significant

Adjusted¹ correlates of 4-year anticipated retention for physicians in rural HPSA practices

Yes/no	Rural HPSAs (comparative odds)
Satisfied with community	3.9*
Finds work meaningful	3.0*
Has good administration	1.9*
Can practice full scope	1.7*
Feels connected and supported	2.5*
Has a good work-life balance	1.9*
Feels well compensated	1.0

¹ Adjusted for satisfaction with community, satisfaction with all six aspects of the practice, physician demographics and county demographics

* statistically significant

What We Learned

1. About two-thirds of physicians in HPSA practices who have already worked there an average of 5 years anticipate they will still be working in their practices in another four years.
2. Anticipated retention rates are similar for physicians in urban and rural HPSAs.
3. For physicians in both urban and rural HPSA practices, anticipated retention is associated with:
 - Satisfaction with the community
 - Finding work meaningful
 - Having good administration
 - Being able to practice the full scope desired
 - Feeling connected and supported
4. Only for physicians in rural HPSAs is anticipated retention associated with having a work-life balance.
5. Feeling well compensated is not associated with anticipated retention for physicians in either urban or rural HPSAs

About PRISM

PRISM is a collaborative of state Primary Care Offices and other state offices in 37 states. Since 2012, PRISM participating states have partnered to collect data to identify issues, document outcomes, and learn how to strengthen loan repayment and related programs and support participating clinicians.

PRISM regularly sends questionnaires when clinicians begin, annually, and when they end loan repayment contracts and every second year thereafter. PRISM currently holds data from more than 75,000 completed questionnaires.

More information about Provider Retention & Information System Management (PRISM), a program provided by 3RNET, including this and other PRISM publications can be found at <https://3rnet.org/Prism/Resources>

Source

The source of this snapshot is the PRISM webinar held on February 19, 2025 of the same title, which can be found on the PRISM publications web page listed above, or here: https://youtu.be/ITwEgkg2sr0?si=r_787qAXFFyuYfmV

