

Breaking Down the Problem: Physician Perspectives

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Institute of Medicine
National Cancer Policy Forum
**Ensuring Quality Cancer Care through the
Oncology Workforce:
Sustaining Research and Care in the 21st Century**



The Future of Oncology Care

Present Challenges

- Accountability & demand for measurable value
- Reimbursement changes influencing systems of cancer care
- Escalating costs of treatment
- Revolution in molecular biology and drug discovery resulting in individualized therapies

Future Challenges

- Predicted workforce shortages

ASCO Workforce Study - Design

- Analyze existing data
- Collect new data
- Assessment of current supply
- Projections of future supply and demand
 - § Med Oncs; Hem/Oncs; GYN Oncs
 - § Controlled for current service use
 - § Visits are the metric
 - § Assessment of Medicare claims data & practitioner survey data
- Developed alternate scenarios to model changes in service use and practice

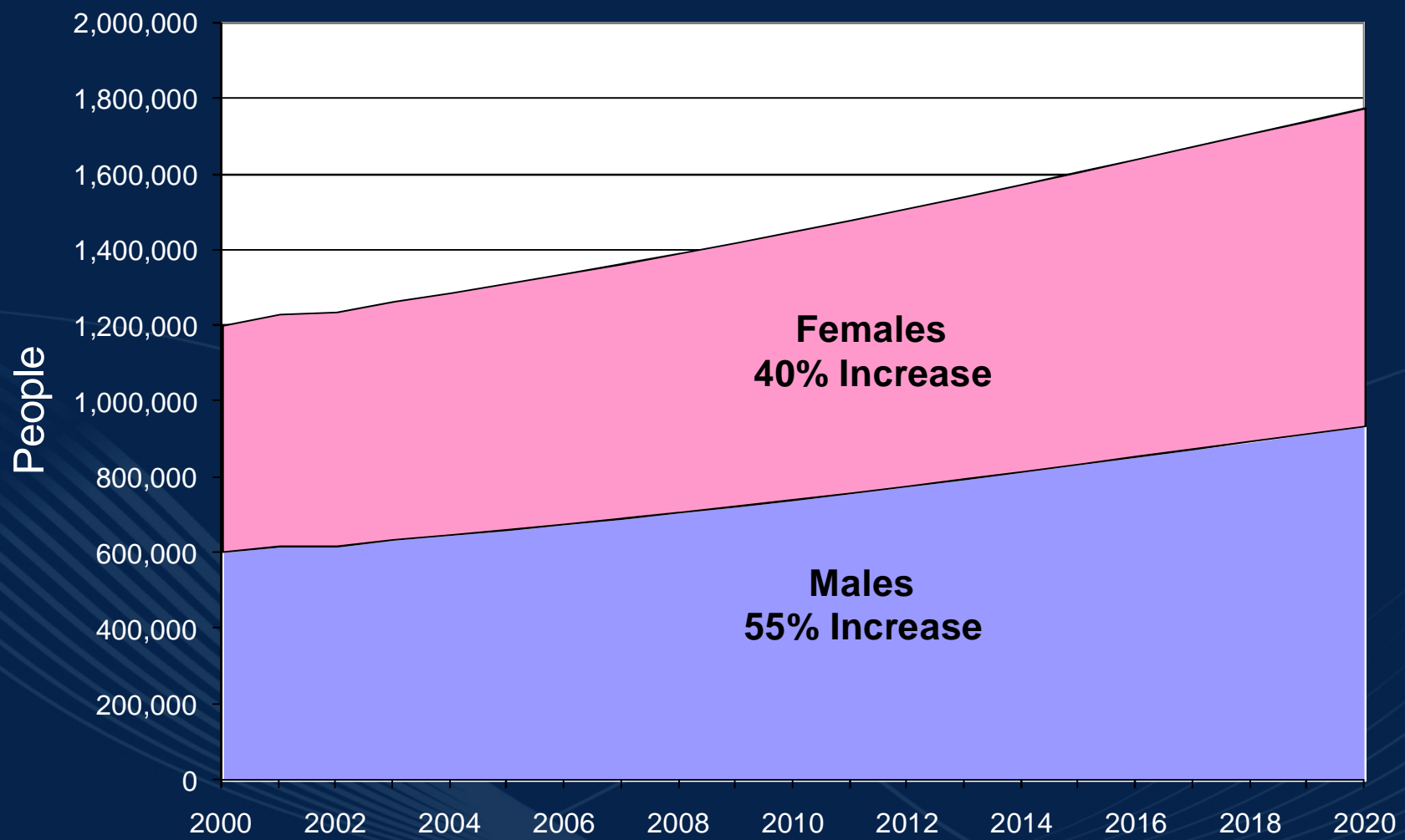
Data Sources

- **Developed and Conducted Surveys**
 - Graduating Fellows (Spring 2005)
 - Entering Fellows (Spring 2006)
 - Program Directors (Fall 2005)
 - Practicing Physicians (Winter 2005-06)
- **Other Data Sources**
 - AMA Physician Masterfile
 - Board Certification
 - ASCO Membership Database
 - Medical School, Residency, and Fellowship Data
 - NCI Incidence & Prevalence Data
 - Medicare Visit Data

Key Findings from the Workforce Study

- Demand for oncology services will significantly exceed supply of oncologists in 2020
 - Demand Increasing
 - Limited Growth in Supply
- Challenge for the entire oncology care delivery team
- Requires multi-faceted approach

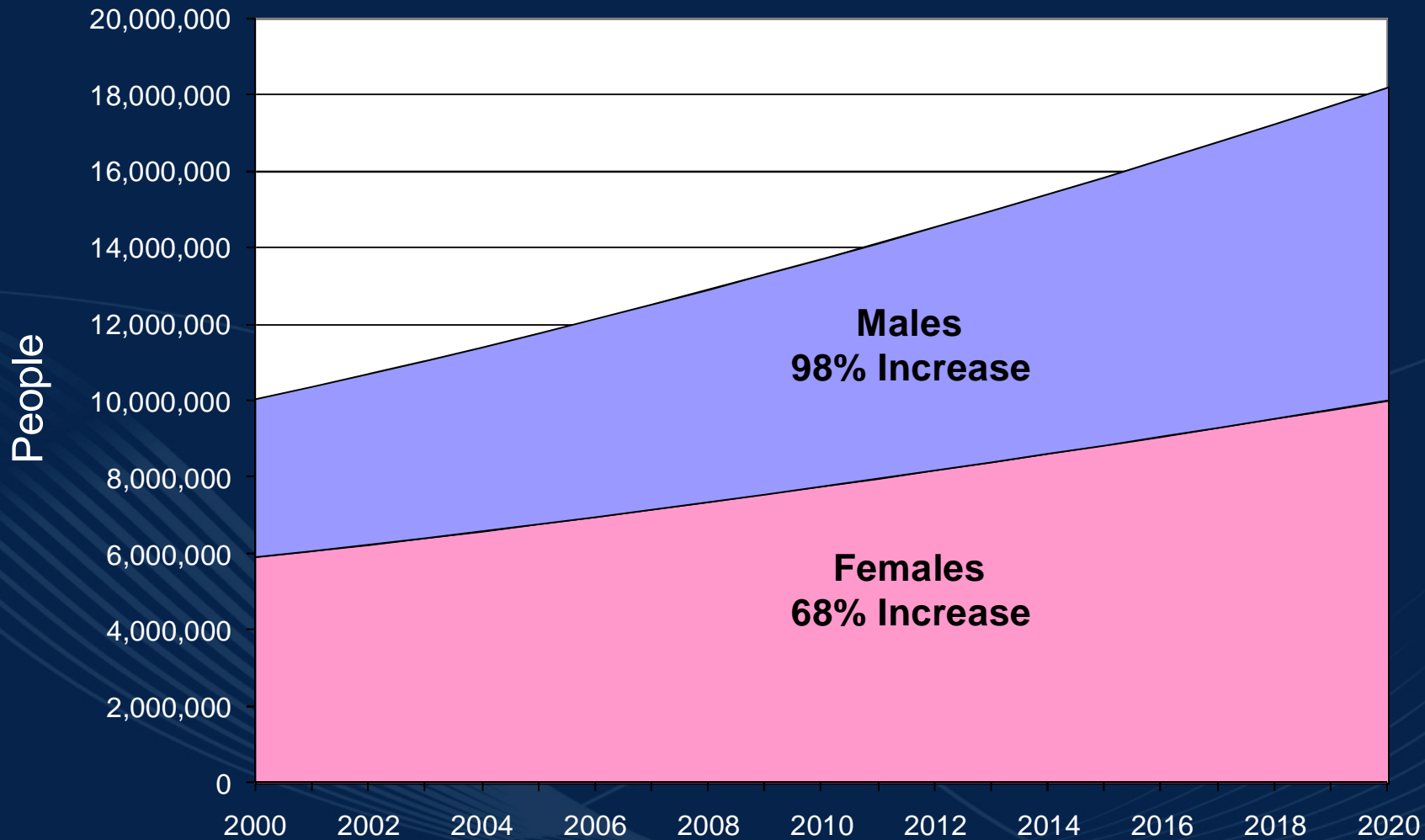
Cancer – Incidence Projections



Source: NCI Incidence Projections, July 2006



Cancer – Prevalence Projections



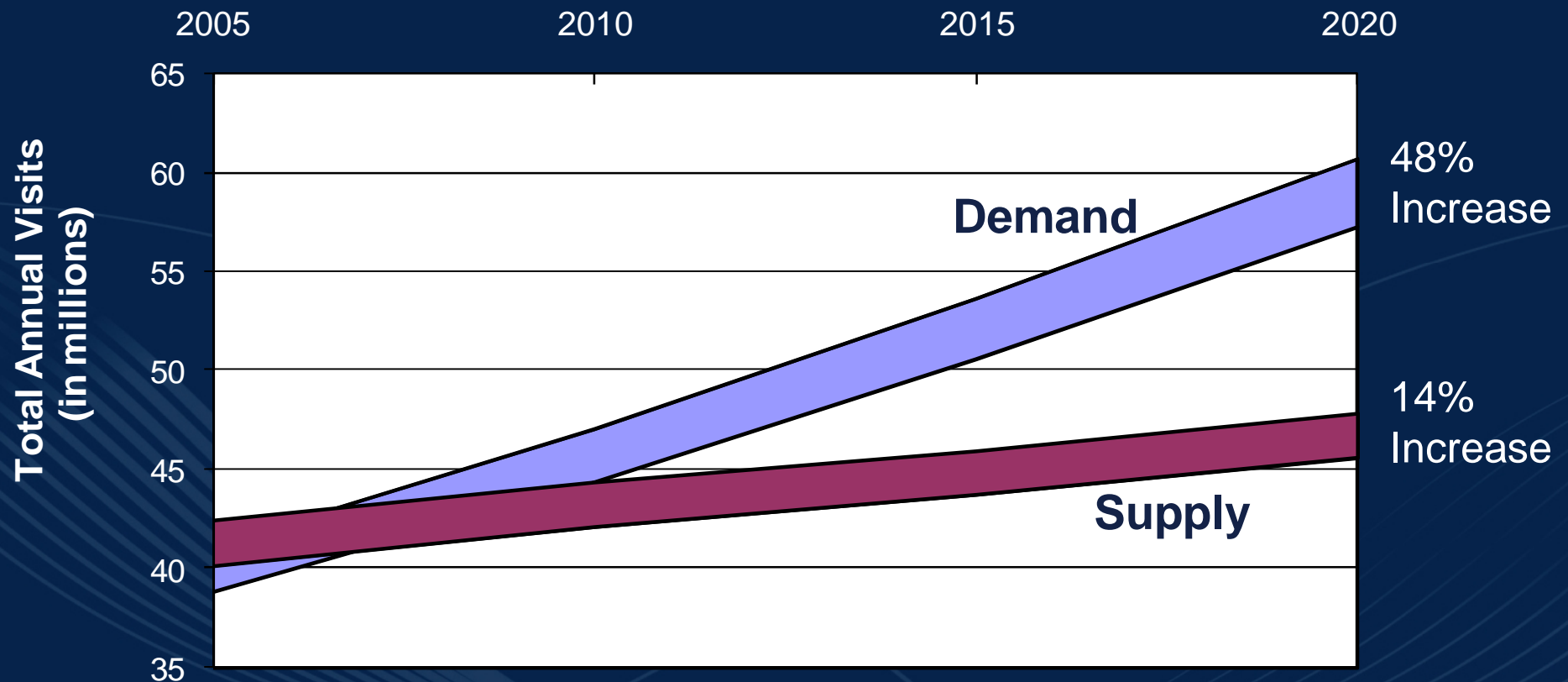
Source: NCI Prevalence Projections, July 2006

Current and Future Supply*

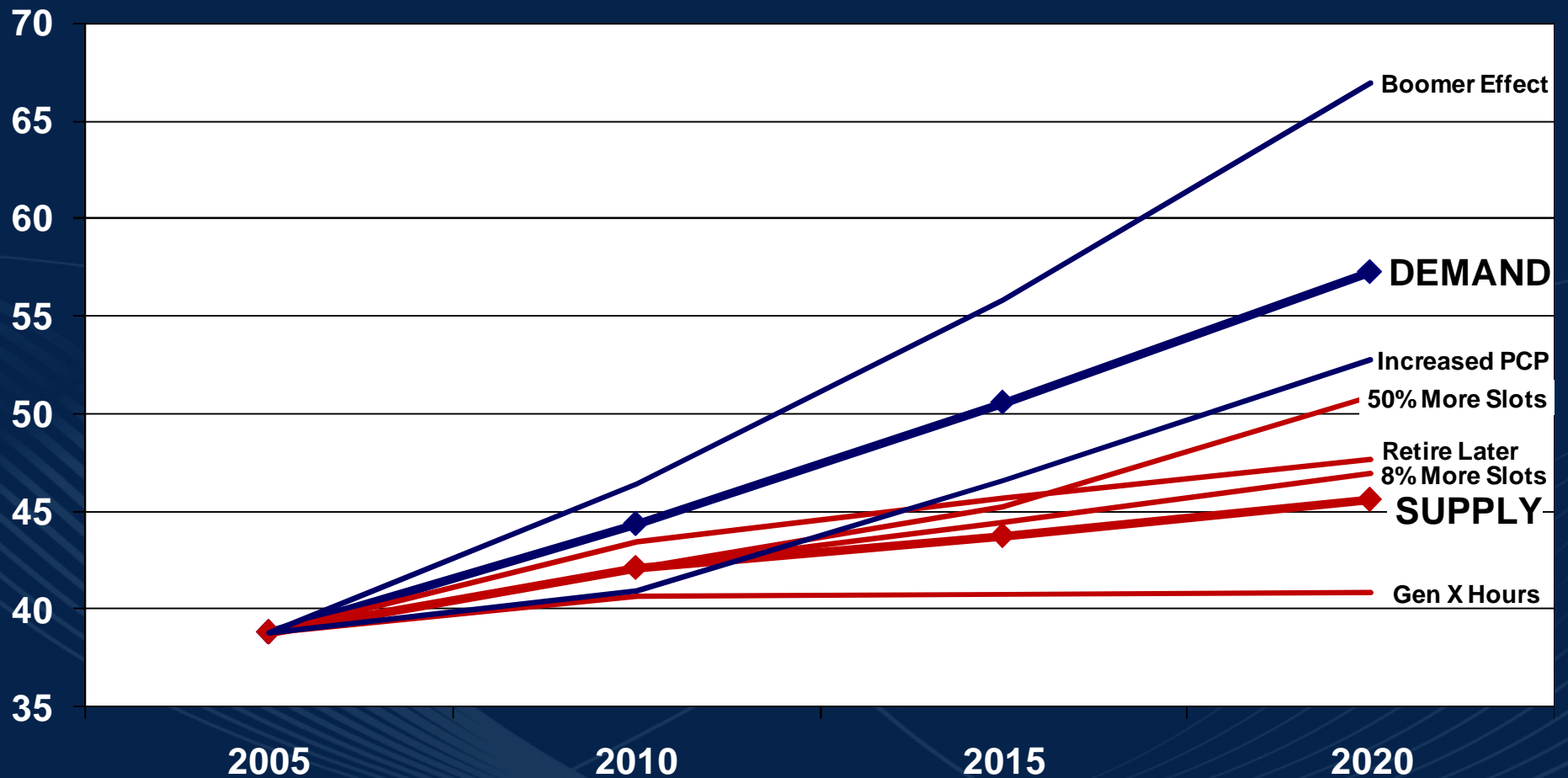
- **Today: 10,422**
- **By 2020: 12,547**

* Represents physicians board-certified in Medical Oncology, Hematology/Oncology, and Gynecologic Oncology

Baseline Projections Reveal Significant Shortages in 2020



Not a Single Solution AND Demand Could Be Even Higher

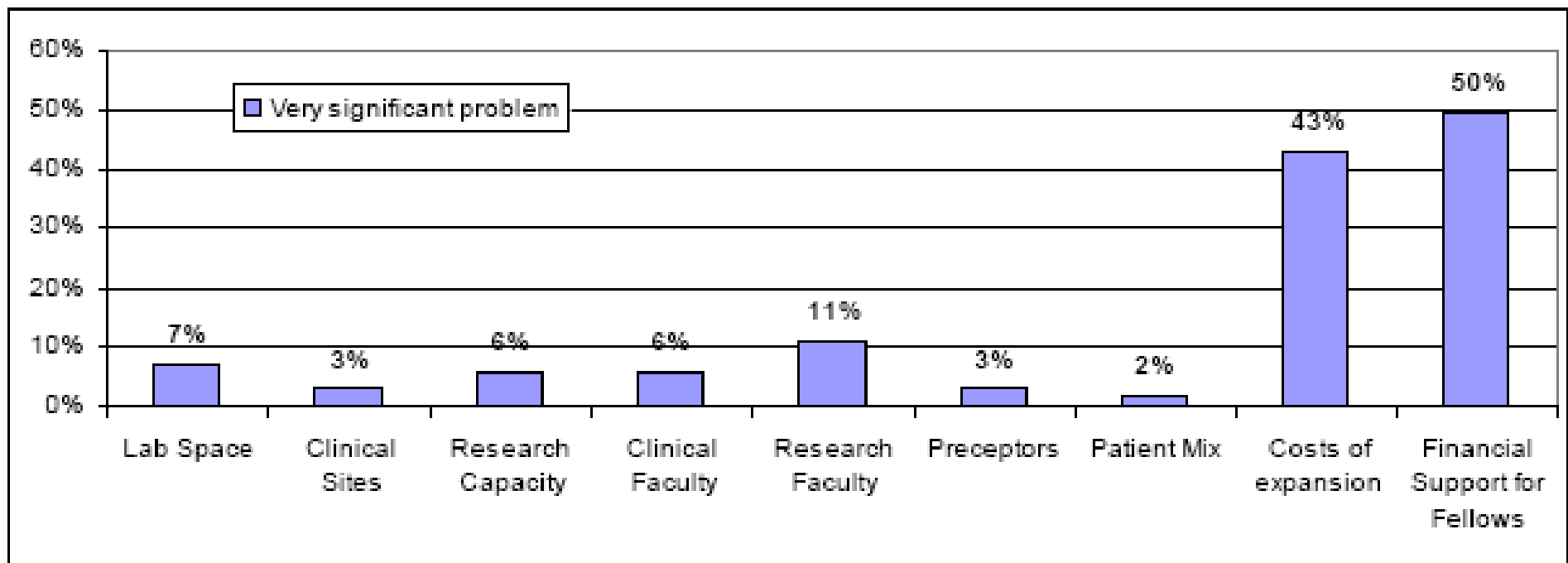


Annual Number of New Oncologists

- 503 fellows completed medical oncology & hematology/oncology training in 2005
- Few programs have plans to increase number of training slots between now and 2010-11 academic year
- Substantial barriers exist in increasing the supply

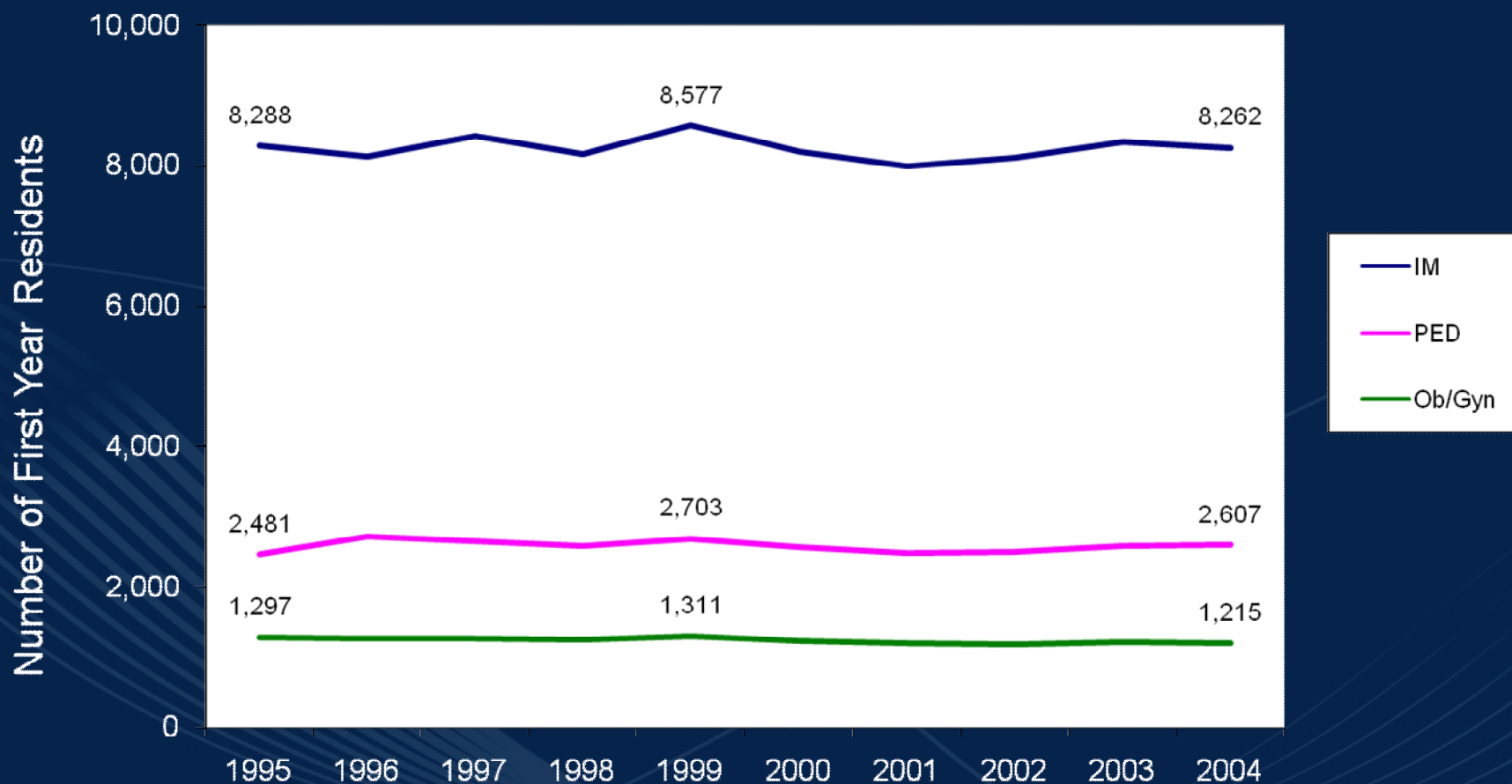
Program Director Surveys

Barriers to Increasing Training Slots



Source: 2005 Survey of Oncology Fellowship Program Directors

A Challenge for Oncology: No Growth in Feeder Specialties



Source: JAMA Med Ed, 1996-2004

Declining Interest in Internal Medicine

- **Survey Results:** Of 1 177 fourth year medical students, 23% planned careers in Internal Medicine but only 2.0% in general Internal Medicine
- **Conclusions:** Medical students report serious reservations about the quality of life and rewards of Internal Medicine compared with other specialties.

Why the Declining Interest in Internal Medicine?

- **Practice environment:** Students perceived paperwork, charting, reimbursement and insurance requirements as greater in IM than other fields. Exposure to hectic primary care clinics with inadequate administrative and technology support entice them toward subspecialties.
- **Patient complexity:** Students dissuaded by their experiences with elderly and chronically ill patients; attitudes about caring for elderly and chronically ill patients decline during training.
- **Lifestyle:** Generation X and Millennium Groups have less emphasis on devotion to work and more on personal satisfaction and fulfillment outside of work.

How can we address the declining interest in Internal Medicine?

- Exposure to effective, interdisciplinary team-based care
- Continuity of care
- Curricular methods for teaching chronic care
- Positive role modeling

Challenges to Oncology Training

Major challenges to increasing number of trainees:

1. No growth in the IM residents entering training
2. Limited plans to increase fellowship slots
3. Minimal exposure to outpatient oncology for medical students & residents to make career decisions

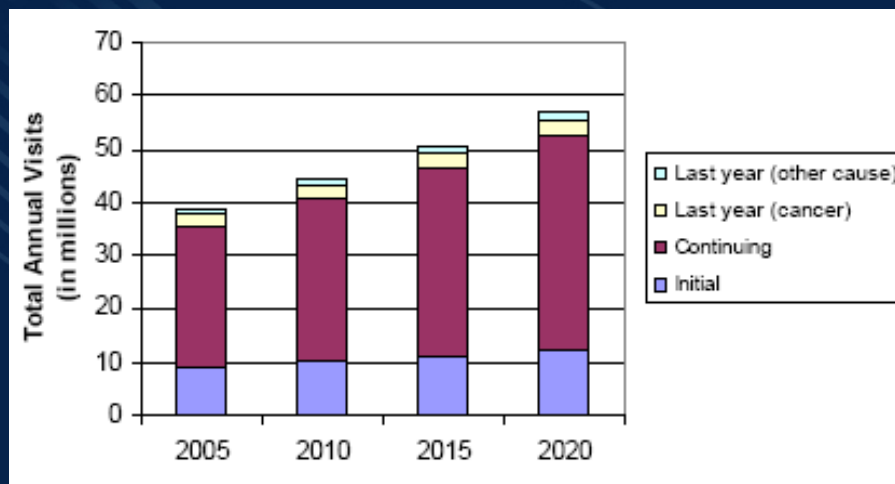
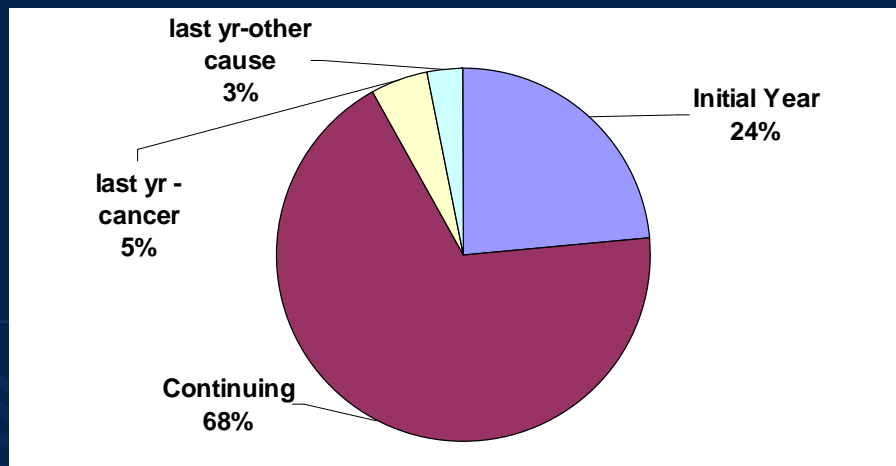
Major challenges to the educational environment:

1. ACGME initiatives seek to reduce workload and work-hours of residents
2. Generational attitudes about work-life balance different for younger physicians
3. Today's environment requires efficient practice and expertise with physician extenders, neither of which is emphasized in training

Training the Oncologist of the Future

- Skills for practicing in an era of shortages:
 - Collaborative care planning
 - Team management
 - Efficiency
 - Business management
 - Productivity
 - Use of technology (EHR)
 - Communication (patient & team)

Survivorship Care



By 2020, 81% increase in cancer survivorship

Oncologists Survey:

- 68% of oncologist visits are for continuing care

Conundrum:

- There are no fellowship programs that provide educational models for collaboration with primary care providers and use of NPs/PAs

And our future researchers?

- **Survey Results:** Of 88,575 US medical graduates who completed the national Association of American Medical Colleges Graduation Questionnaire from 2000-2006, 1833 (2.3%) were from a MD/PhD program
- **Conclusions:** MD/PhD graduation was positively associated with planned training in dermatology, neurology, ophthalmology, pathology, pediatrics, or radiology.

Our Future Researchers.....

- **Gender Concerns:** women comprise ~ 40% of current enrollees in MD/PhD programs. Concerns about combining a physician scientist's career with childbearing & family life and lack of physician-scientist role models are cited as reasons for the ongoing underrepresentation of women among physicians pursuing research careers.
- **Lifestyle:** “Controllable lifestyle specialty choices”, such as dermatology, ophthalmology, and radiology were associated with a greater likelihood of MD/PhD program graduation.

Do Our Future Researchers Seek Careers in Cancer Research?

Specialty choice at graduation	1 [Reference]	
Internal medicine	1 [Reference]	
Dermatology	1.60 (0.73-3.50)	.24
Emergency medicine	0.24 (0.11-0.51)	<.001
Family medicine	0.14 (0.05-0.34)	<.001
Neurology	2.63 (1.07-6.44)	.03
Obstetrics and gynecology	0.58 (0.26-1.29)	.18
Ophthalmology	0.46 (0.24-0.88)	.02
Pathology	1.11 (0.60-2.08)	.74
Pediatrics	0.69 (0.42-1.15)	.16
Psychiatry	0.43 (0.23-0.79)	.006
Radiology	0.40 (0.24-0.68)	.001
Surgery	0.56 (0.35-0.90)	.02
Other	0.63 (0.34-1.14)	.12
No specialty selected	0.27 (0.17-0.44)	<.001

Andriole et al, *JAMA*, Sept 10, 2008

Challenges for Other Specialties

Workforce Challenges to General Surgery and the Surgical Subspecialties

Challenges to Surgical Workforce and affect on Patient Care

- Decreasing physician reimbursement
 - Cannot offset reduction by increasing volume
- Liability Issues
 - Many no longer doing emergency calls
 - Exodus from states with liability problems which increases shortage
- Long hours
- Subspecialization

Creation of *new specialists* acute care surgeons, hospitalists, "nocturnalists," etc -to provide institutional care

Surgical Challenges

- Program directors estimate 50%-70% of physicians who complete general surgery residencies pursue subspecialty fellowships
- 75% of ED directors indicated they have inadequate specialist coverage
- 25% of Americans live in communities with fewer than 50,000 residents, but only 9% to 12% of surgeons practice in non-metropolitan areas.

How to Meet the Challenges Ahead

Workforce Strategic Plan

- **ASCO Board approved a 5-year strategic plan**
- **Goals and Objectives related to:**
 1. **Oncology Care Delivery**
 2. **Training Pipeline for New Oncologists**
 3. **ASCO Structure – Ongoing Advisory Group and Data Collection and Report**
- **Public release of plan and implementation details in a November *Journal of Oncology Practice* article**

Workforce Strategic Goals

Goal 1 – Oncology Care Delivery

ASCO will promote the transformation of oncology care to ensure an environment in which quality cancer care can be accessed by and provided to cancer patients, including those in active treatment, those facing end-of-life, and those who are survivors.

Goal 2 – Training Pipeline for New Oncologists

ASCO will work with fellowship programs to support training the next generation of oncologists to practice in a time of shortage, as well as address structural issues to increase the number of oncologists who are trained.

Goal 3 – ASCO's Workforce Infrastructure

ASCO will establish volunteer, staff, and data collection and reporting mechanisms to implement this strategic plan, evaluate the effectiveness of ASCO workforce initiatives, and track the status of the workforce.



Goal 1 - Oncology Care Delivery

Objectives:

1. Provide competitive grants to identify and study innovative approaches to practice
2. Conduct pilot programs to test model practices to transform oncology care delivery
3. Examine challenges for those reentering clinical practice or considering delayed retirement
4. Partner with other health professionals on survivorship care delivery

Goal 2 – Training Pipeline for New Oncologists

Objectives:

1. Partner with other societies to address overall shortage
2. Assess adequacy of training slots, develop recommendations for expansion, provide materials for program directors seeking funds for program expansion
3. Increase exposure to outpatient oncology throughout education and training
4. Create linkages between private practice and fellowship training
5. Enhance training to help oncologists practice in shortage
6. Build partnerships between oncologist and NP/PA training programs to promote collaborative care
7. Study the training workforce for future investigators/academicians

Goal 3 – ASCO's Workforce Infrastructure

Objectives:

1. Establish a Workforce Advisory Group to advise the Board and guide ASCO workforce activities
2. Implement workforce information database
3. Issue periodic health of the workforce report

Susan G. Komen for the Cure-ASCO Diversity in Oncology Initiative

- Designed to facilitate the recruitment and retention of individuals from populations underrepresented in medicine to cancer careers, with particular attention to the development of clinical practitioners and investigators.
- Hope that increasing diversity in the clinical oncology profession will lead to increased and improved cancer care for underserved populations as well as increased research on health disparities

Susan G. Komen for the Cure-ASCO Diversity in Oncology Initiative

Three programs will be offered for individuals interested or currently practicing in the oncology field:

- Komen/ASCO Loan Repayment Program
- Komen/ASCO Medical Student Rotation
- Komen/ASCO Resident Travel Award

Information available at

www.ascocancerfoundation.org/diversity





For more information, visit

www.asco.org/workforce

or contact:

workforce@asco.org