

## Locum tenens: what is patient mortality rate?



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"Locum tenens" physicians are those hired by hospitals to temporarily take the place of regular doctors who, for one reason or another, are unable to perform their duties. However, due to current physician staffing shortages and shifting employment patterns, demand for temporary or substitute docs has increased.

But do these temps provide the same level of care as the doctors they are filling in for? The answer appears to be "yes," at least when it comes to death rates in the month following treatment, according to research led by Harvard Medical School published in JAMA.

The findings are based on a review of 1.8 million Medicare hospital admissions that took place between 2009 and 2014. Nearly 40,000 of the 1.8 million admissions received care by substitute doctors. In that time frame, one of 10 physicians was replaced by a substitute doctor.

Notably, the Harvard study showed that patients who received care by substitute physicians were no more likely to die within a month of hospital admission – 8.8 percent of those patients died – than those who received care by regular staff physicians – 8.7 percent died in that group.

Yet, the researchers caution, there were some small but statistically significant differences in other measures. Patients treated by substitute physicians had somewhat higher spending and slightly longer hospitalisations.

"Our findings so far are reassuring, but some of the trends we found demand that we look more closely at how the system works in a more granular way," said study senior author Anupam Jena, the Ruth L. Newhouse Associate Professor of Healthcare Policy at Harvard Medical School.

Temporary docs might pick up shifts at a number of different hospitals around a single metropolitan area or they might travel across the country to work in a rural hospital far from their home, Jena explained.

Given the nature of their employment, substitute doctors generally do not have any relationship with their patients, are not familiar with the local community, and may never have worked with the hospital's electronic health records system, hospital staff or local network of facilities where patients may be discharged to after hospitalisation, the researchers noted.

However, when the researchers analysed various sub-groups within the overall sample, they noticed some concerning trends: Hospitals that used substitute physicians less often had somewhat worse patient mortality outcomes. The finding could be due several factors, including the geographic remoteness of these hospitals, limited financial resources or a lack of robust support systems to help temporary doctors plug in to the hospitals' systems, according to first author Daniel Blumenthal, Harvard Medical School instructor in medicine at Massachusetts General Hospital.

"As the market place shifts and employment patterns fluctuate, we owe it to our patients to make sure that the way we cover for doctors who are out of the office is safe and effective," Blumenthal said.

Source: Harvard Medical School

Published on : Tue, 12 Dec 2017