

Retention and Return on Investment in a Physician Assistant Postgraduate Emergency Medicine Program

L. Swiatczak¹, J. Knox², C. Ellingsen¹, B. LeClair¹, P. Coogan¹, K. Kinderman³, MJ. Wiemiller²

1. Advocate Health – Midwest Region – Milwaukee, WI and Chicago, IL
2. Marquette University – Milwaukee, WI
3. Children's Wisconsin – Milwaukee, WI

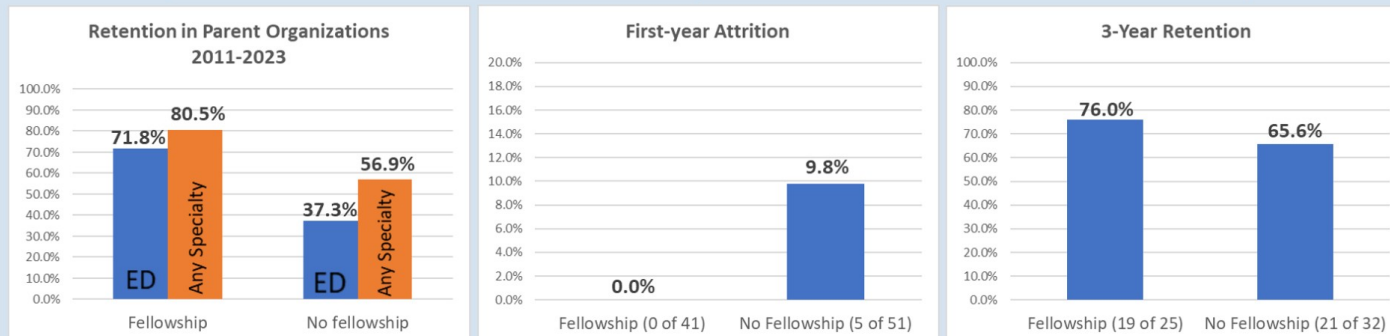
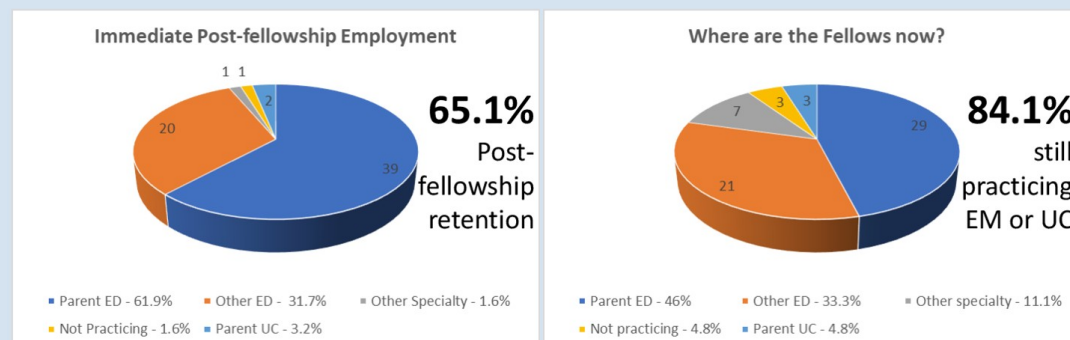
INTRODUCTION

Newly graduated physician assistants (PA) benefit from programs that support their transition to the workforce as professionals.¹ Postgraduate PA (PGPA) training programs (fellowships) have existed for more than 50 years for this purpose.² Purported benefits to the PGPAs and their employers include increased clinical productivity, improved autonomy, greater job satisfaction, and reduced turnover.³⁻⁴ However, literature on the benefits and outcomes of these programs is lacking.³

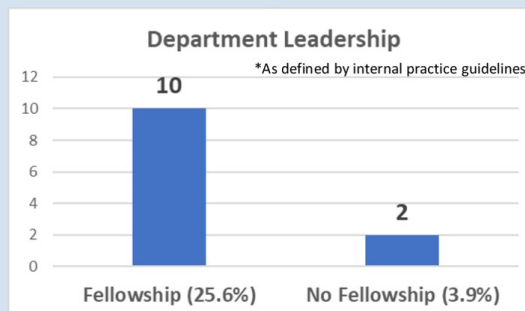
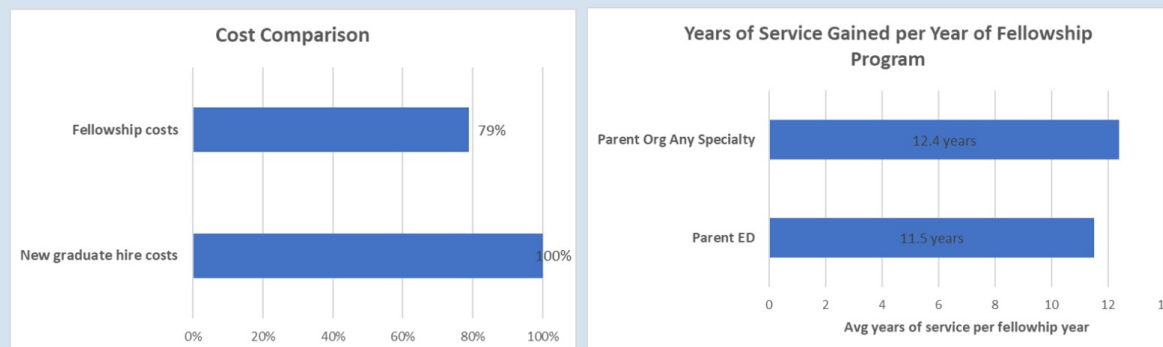
This report aims to describe the organizational retention rates and return on investment (ROI) of a single Midwest academic/community-based emergency medicine (EM) postgraduate PA training program. A secondary aim was to identify nonmonetary contributions to ROI through APC leadership and top of license practice.

RESULTS

RETENTION



RETURN ON INVESTMENT



RESULTS CONT.

Fellowship-trained PAs have provided 149 total years of service post-fellowship to the organization, divided by 12 fellowship years = average 12.4 YOS/year of fellowship. Fellows who have remained in the parent EM departments have provided 138.5 total years of service/12 fellowship years= 11.5 YOS/year of fellowship.

Average ED YOS per retained fellow was 3.85 years, compared to an average of 2.89 YOS per non-fellowship-trained APPs.

CONCLUSION

Retention was markedly better for internally fellowship-trained PAs hired into full-time Emergency Medicine positions at 71.8%, compared to 37.3% for non-fellowship-trained APPs. Fellowship-trained PAs demonstrated longevity in Emergency Medicine, with 76% of the retained fellows having greater than three years of service to the parent organizations. First-year attrition was 0.0% in the fellowship group, compared to 9.8% in the no fellowship group.

The parent emergency departments gained 11.5 years of service, on average, per year of investment in the fellowship program, which is remarkable in the current employment retention environment.⁵

Total fellowship costs for salary, benefits, and program administration per trainee was 21% less than the onboarding costs for new graduate hires.

The estimated cost of APP turnover is \$85,832 - \$114,919.⁶ The significant reduction in turnover in the fellowship-trained group provides additional cost savings to the organization.

When considering nonmonetary return on investment, fellowship trained PAs were six times more likely to develop into clinical leaders, and 40/41 (97.5%) were practicing top of license within one year after program completion, as defined by internal practice guidelines.

Limitations include a single training location and a lack of root cause analysis for retention and turnover.

Employers and leaders should consider the benefits of emergency medicine fellowship training on retention and reduction in onboarding costs when making hiring and budgetary decisions.

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Left to right: Joanna (Kelley) Crouse, PA-C; Lian Mleziva, PA-C; Darin Lash, PA-C; Adam Erickson, PA-C; Megan Marcou, PA-C; Elina (Litinskaya) Yegoroff, PA-C

METHODS

Advocate IRB reported that IRB approval was not needed for this study. The sample included all graduates from the PGPA EM Fellowship since its inception in 2010, N=63. The PGPA group was compared to a group of APPs who were hired into the same organization without any prior EM experience, N=51, during the same reference period (2011-2023). Post-fellowship years of service (YOS) were calculated from the individual's hire date through separation of employment date, FTE <0.5, or through the study reference date of 12/31/2023 for PAs still employed by the parent organizations. All post-fellowship YOS were divided by 12 fellowship years to obtain the average YOS to the organization per fellowship year. Costs of the fellowship program and onboarding costs for non-fellowship-trained APPs were calculated using internal data.