Helping physicians maintain health, knowledge, and skills as they age and transition to retirement

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Purpose: The purpose of this collaborative study was to explore the health, wellness, and educational needs of Newfoundland and Labrador (NL) and Saskatchewan (SK) physicians age 55 and older. The literature suggests physicians tend to delay retirement, but few studies have explored the implications of this delay for physicians, health organizations, and patients. Methods: Literature review/environmental scan; telephone interviews with stakeholders representing physicians age 55+, government/associations; online survey-questionnaire with physicians age 55+; follow-up consultations with stakeholder groups. Results: Fourteen (n=14) interviews (8 NL; 6 SK), n=199 survey respondents (n=76 NL; n=123 SK). Interview respondents reported personal wellness and inflexible work environments as influencing retirement; ability to tailor practice or job share and reduced call could influence retention. Survey respondents reported similar findings, with personal wellness (NL 80.3%; 74.0% SK) and excessive clinical demands (72.0% NL; 63.4% SK) influencing retirement. Limiting the number of patients (74.3% NL; 73.6% SK), eliminating/limiting mandatory call (77.3% NL; 68.3% SK), and tailoring practice options to specific interests (82.7% NL; 77.0% SK) were cited as influencing retention. Conclusions: Findings suggest NL and SK physicians 55+ and stakeholders are in agreement regarding factors influencing practice retention or pre-retirement intentions. Results suggest a desire to continue to contribute to the profession while reducing mandatory demands as one way to maintain health and wellness. In two provinces with aging physician workforces, the findings could have significant implications for provision of medical services, suggesting a need for retention efforts directed at helping older physicians find a greater degree of work-life balance.