

Advanced Career Emergency Physician Position Statement

Emergency medicine is tasked with the delivery of immediate and life-saving care to patients facing health crises, and frequently functions as a gateway to the entire healthcare system. Emergency physicians in the advanced stage of their career bring not only a wealth of clinical experience and diagnostic acumen, but also a rich repository of leadership skills, including communication, crisis management, and institutional wisdom. Moreover, with the current critical human resources shortage in emergency medicine, the value of their continued participation in the workforce is even more pronounced.

However, the physical demands of clinical emergency medicine, characterized by long hours, high stress, high cognitive load with multiple competing priorities, shift work and resulting circadian desynchrony, with increasing patient volumes can be especially challenging as physicians age.¹ This has resulted in individual Canadian emergency medicine groups establishing approaches and adaptations to mitigate these challenges and promote career longevity.² By providing advanced career emergency physicians work flexibility, a pathway can be ensured to strategically support their continued workforce engagement, thereby extending their career longevity and impact, while acknowledging and celebrating their contribution to the field of emergency medicine.

Many industries adapt roles in the workplace after a specified age or number of years of service, including first-responders and pilots.^{3,4} The American College of Emergency Physicians recommends workload modifications for physicians in their “pre-retirement years,”⁵ but does not explicitly define this term. It is also important to acknowledge that the timing of “advanced career” may be individual. Career spans can vary depending on factors other than age, including gender⁶, health status, and disability. Emergency groups may need to incorporate a flexible and context-specific approach to optimally defining “advanced career”*.

Advocacy by the Canadian Association of Emergency Physicians (CAEP) for clinical work adaptations for advanced career emergency physicians is underpinned by several important principles, including equity, wellness, and respect. Providing flexibility in clinical work for advanced career emergency physicians not only acknowledges the significant contributions they have made in Emergency Medicine, but also represents a critical component of addressing the human resources shortage in a manner that is both sustainable for them and beneficial to individual groups, patients, and the healthcare system overall.

CAEP recommends emergency physician groups establish a policy to support the clinical work of advanced career emergency physicians, to ensure continued*

participation of these valued and experienced colleagues in the workforce, while supporting the principles of physician wellness and safe patient care. Physician groups should implement policies based on the following adaptations wherever possible, depending on the unique needs of individual advanced career physicians:

- Shift scheduling
 - Option for advanced career emergency physicians to opt out of night shifts and shifts associated with significant disruption of circadian rhythm
 - Consider scheduling additional time off for recovery after night shifts for those who continue to work night shifts

- Shift acuity and complexity
 - Option for advanced career emergency physicians to opt out of shifts identified as high acuity or resuscitation intensive

- Shift duration
 - Where possible, shorten duration of shifts and schedule fewer consecutive clinical shifts
 - Consideration of the creation of a formal “split shift” pool to support EPs interested in working half shifts

Strategies to mitigate group consequences of these adaptations, to achieve satisfaction for group members of all career stages, which may include

- More weekend day shifts in lieu of overnight and/or late evening shifts
- Adjustments in the value/remuneration of resuscitation and complex acuity shifts
- Individual education plans to ensure resuscitation skills and knowledge are maintained by physicians who opt out of high acuity or resuscitation practice

Consider recognizing exceptional career contributions for those few physicians who achieve a high threshold of age + years of service (eg. 90). Groups *could potentially* include one or more of:

- Option to avoid working on a holiday of their choice
- Option for protected vacation time
- Option for a guaranteed annual leave of absence

*The definition of advanced career emergency physicians should rest with individual groups. Reaching agreement on how to define this category requires dedicated group discussions. Factors to consider may include group demographics, local scheduling practices, shift differentials, and shift/site variety.

Some options for this definition are age (eg. age over 55), years of practice (eg. at least 15-20 years) or a combination metric (eg. age + years of practice \geq 70).

REFERENCES

1. Abu-Laban RB, Rose NG, Migneault D, Fukushima E, Walker KE, McEwen J. Clinical adaptations for advanced career emergency physicians: an approach to support practice transition. *Canadian Journal of Emergency Medicine*. 2023 Dec;25(12):931-4.
2. Considerations for emergency physicians in pre-retirement years [Internet]. 2009 [cited 2024 Mar 25]. Available from: <https://www.acep.org/patient-care/policy-statements/considerations-for-emergency-physicians-in-pre-retirement-years>
3. Binder W, Abrahams CO, Fox JM, Nestor E, Baird J. The age-old question: Thematic analysis of focus groups on physician experiences of aging in emergency medicine. *JACEP Open*. 2021; 2:e12499. <https://doi.org/10.1002/emp2.12499>
4. Canadian HR Reporter. <https://www.hrreporter.com/opinion/canadian-hr-law/how-old-is-too-old-to-be-a-pilot/297777>. Accessed March 6, 2024.
5. American College of Emergency Physicians. Considerations for Emergency Physicians in Pre-Retirement Years. <https://www.acep.org/patient-care/policy-statements/considerations-for-emergency-physicians-in-pre-retirement-years> Accessed March 6, 2024.
6. Gettel CJ, Courtney DM, Agrawal P, et al. Emergency medicine physician workforce attrition differences by age and gender. *Acad Emerg Med*. 2023; 30: 1092-1100. doi:[10.1111/acem.14764](https://doi.org/10.1111/acem.14764)
7. Public Services Health & Safety Association. <https://www.pshsa.ca/news/mandatory-retirement-legislation-for-firefighters-passes-third-reading>. Accessed March 6 2024.