IMPLEMENTING RETENTION STRATEGIES TO NAVIGATE CHALLENGES OF PHYSICIAN SHORTAGE IN HEALTH CARE

by

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Abstract

The purpose of the abstract is to provide a concise and accurate synopsis of key elements of your capstone project. Set the abstract as a single block-style paragraph with no initial indent. Address the following topics (400 words maximum). **Research topic summary (1-5 sentences):** a concise summary of your capstone research topic. Explain the rationale for your study and the need for the study the capstone addresses. Indicate your research questions, matching the wording used in your capstone sections. **Research methodology (1-2 sentences).** Summarize the research methodology used in the study. **Population and sample (1-2 sentences).** Describe the population and sample, including high-level demographic information regarding your participant pool. If secondary data were used, describe the data set. **Data analysis (1-2 sentences)** provides a concise summary of your data analysis. **Findings (1-3 sentences)** provide a concise summary of your research findings and conclusion(s). Describe the practical implications of your project and the deliverable you created.

Tips for Developing a Quality Abstract. (a) The abstract is representative of your work. Researchers will review your abstract to determine whether your manuscript is worthy of reading and relevant to their literature review. Those in your field will review your abstract to learn more about the nature and quality of your doctoral work. Thus, the abstract stands as a record of your doctoral-level work. (b) Additional guidelines for development of an abstract are in section 3.3 of the *APA Publication Manual*, 7th edition, or on Campus at Academic Writer, https://academicwriter-apa-org.library.capella.edu/learn/browse/QG-59?group=All&view=list&term=abstract&sort=asc (c) References are generally not used in the abstract, as the focus is the study, the research, and the findings.

Formatting for the Abstract. Format the abstract as one double-spaced block-style

paragraph (i.e., do not indent the first line). Set the text flush left, ragged right. Do not justify the right margin. Do not use headings, bullets, or bold. The Abstract page is not numbered, and "Abstract" does not appear in the Table of Contents.

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Acknowledgments

This acknowledgments page is optional. The acknowledgments differ from the dedication in that they recognize individuals who have supported your scholarly efforts related to the advanced doctoral manuscript or who have held a role in your academic career as it relates to the research of the advanced doctoral manuscript. This might mean a mentor and committee members, advisor, online or colloquia faculty, and other support people from Capella or other organizations. If you received financial support from fellowships, grants, or other organizational support, note it in this section. The acknowledgments are also appropriate for thanking statisticians, transcriptions, those who have provided permission to use an instrument, and the like.

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SECTION 1. PROJECT DESCRIPTION

Overview of the Project

In the United States, the growing health care needs have increased the workload on health care staff, leading to physician shortages and burnout (Zhang et al., 2020). The shortage of physicians significantly undermined the effectiveness of health care delivery and affected patient safety and health outcomes (Feng et al., 2022). According to the World Health Organization (2022), the projected health care workforce shortage will be 10 million by 2030. The Association of American Medical Colleges (AAMC) reported that projected shortages of physicians in the United States will be between 54,100 and 139,000 by the end of 2033 (Boyle, 2020). DeVries et al. (2023) noted that physician shortages and turnover rates in the health care sector negatively impact health care delivery and care quality standards. Zhang et al. (2020) indicated that insufficient staffing levels hamper hospitals from providing patient care, compromising patient safety and health outcomes.

The shortage of the healthcare workforce affects the care delivery process. Zhang et al. (2020) reported that higher turnover rates lowered physician availability in hospitals, hindering organizations from meeting patient health care needs. In post-COVID-19, the hospital underwent a healthcare workforce shortage of 91,500, affecting care quality standards (Zhang et al., 2020). The lack of retention strategies impacts physicians' ability to continue their jobs during the pandemic and, thus, organizational performance (Zhang et al., 2020). One of the main reasons for turnover was the conflict between the expectations of physicians and organizational norms (Feng et al., 2022). Physician turnover impacts the healthcare delivery process in the organization and brings financial issues. For instance, hiring and training physicians to address the shortage requires funds, which is a source of economic pressure on the organization.

Reducing physician burnout is vital in enhancing the quality of care in healthcare facilities (Mok et al., 2020). Shin et al. (2023) mentioned that there are a number of physical, psychological, and social determinants that affect the workplace setting and lead to physician burnout. As an example, the pandemic increased the quantity of work that resulted in burnout among physicians and their physical and mental health. Furthermore, emotional exhaustion increased the burnout rate among physicians from 37.5% to 61.7% after the COVID-19 outbreak. The symptom of burnout of the physician impacted the performance of the organization in terms of its operational effectiveness and impacted financial issues. Sinsky et al. (2022) stated that $979 million per year is required to manage the burnout-related turnover. Intangible costs due to physician turnover also affect the organization's financial stability. Nonetheless, the recruiting and training of new physicians also require funds, implying a financial burden on the organization (Pappas et al., 2022). The increased cost of healthcare owing to physician turnover meant that retention strategies were to be adopted to eliminate physician burnout.

Retention of proper physicians is vital in the long-term sustainability and strategic innovation of an organization. The doctors are at the center stage in the provision of health care services since it is through them that the patients are given good service. The retention strategy needs to be implemented to address the problem of staff shortage in the healthcare sector (Vries et al., 2023). By aligning retention programs with physicians' professional interests and well-being through competitive compensation and career growth opportunities, organizations can create an atmosphere of innovation (Weintraub & McKee, 2019). Physician retention programs are beneficial because they enable organizations to enhance excellence when it comes to quality standards of care delivery, which enhances patient safety and health outcomes (Vries et al., 2023). The strategic emphasis on retention strategies by the leaders of healthcare ultimately serves as a

strategic impetus towards enhancing the healthcare delivery process. The project's aim is to empower healthcare leaders so that they can adopt retention strategies to address the issue of physician shortages in the healthcare sector.

Problem Statement and Purpose

Problem of Practice

The overall business issue is that hospitals face the problem of retaining physicians, this increased the expenses of recruiting additional physicians, diminishes business performance, and reduces the stability of the organization (Han et al., 2019). These problems have impacts on the sustainability of healthcare organizations as the expenses are increased, the efficiency of the employees is reduced, and the prospect of the organization achieving its objectives is compromised. As an example, Pappas et al. (2022) showed that the replacement of physician turnover costs between $ 500,000 and $ 1,000,000 per physician, depending on the specialty.

The business issue at hand is poor retention practices to retain doctors within the U.S. health care organization, leading to an 11% turnover rate in U.S. hospitals and lower staff morale and care quality standards (Raman et al., 2024). The increased rate of turnover of the physicians also affects the financial cost of the organization. According to Filipek (2023), the cost of turnover of physicians caused by burnout is estimated to be between 2.6 and 6.3 billion each year. Additionally, burnout costs around $7600 per employed physician yearly, affecting the organization's financial stability (Han et al., 2019). The price of physician burnout and turnover revealed that ineffective retention strategies cause a financial burden to the health care organization (Pappas et al., 2022). It is essential to reduce the particular business issue to enhance the quality of care and financial viability of the organization.

Alignment with the Program

The project would be in line with the doctorate in business administration (DBA) program specialization in strategy and innovation. The project will impact healthcare leaders to apply retention strategies to prevent burnout and turnover of physicians in the hospital (Vries et al., 2023). The specialization program of DBA deals with the investigation of the effects of the retention strategies to avoid burnout and turnover of physicians. Such a practice issue is the ineffective methods to keep the physician and, as a result, the increased turnover and the quality of care (Raman et al., 2024). The subject of the project is in line with the DBA course that aims at handling the issue of increased turnover in the healthcare sector. The choice of the topic to be used in implementing the retention strategies with the strategy and innovation specialization program will offer an understanding of how to handle the issue of physician turnover.

Purpose Statement

The qualitative research project aims to understand the views of the healthcare leaders from the perspective of the retention strategies to address the problem of the shortage of physicians in the healthcare industry, and to enhance the turnover and morale of the staff. The project discusses the issue of retention strategies in averting the problem of physician turnover. Using retention strategies can assist healthcare leaders in avoiding physician turnover and burnout, which would enhance the quality of care in the healthcare sector.

Gap in Practice

The gap in practice is that health care leaders lack the knowledge or ability to develop and implement effective retention strategies (Raman et al., 2024). This gap results in an 11% turnover rate in U.S. hospitals and decreased staff morale (Raman et al., 2024). Without specific retention

policies, leaders do not solve the issues that may lead to physicians' dissatisfaction in their careers, including miscommunication of expectations, insufficient professional development, and inadequate financial motivation (Pappas et al., 2022). Altogether, the absence of various retention approaches contributes to low levels of physician satisfaction and, vice versa, creates additional financial loads for the organization due to high turnover rates that entail increased recruitment and training costs (Han et al., 2019). For instance, Abid and Salzman (2021) pointed out that the absence of optimal retention policies leads to several effects, such as a higher workload on the few retained employees, implying dissatisfaction and quitting employees. The expected result scenario for this project is to assist the health care leaders in facilitating the use of organizational goals in the retention of staff morale and reduction of turnover rates. Using targeted strategies increases organizational performance, reduces financial loss, and sustains the overall viability of an organization in the health care industry.

Theoretical Framework

This is done on the basis of the two-factor theory of motivation proposed by Herzberg. It dwells on a relevant issue of physicians' retention in healthcare organizations created by Frederick Herzberg in the 1950s. According to this theory, there are two types of factors that influence job satisfaction and dissatisfaction: motivators and hygiene factors (Erben and Büyuktaş, 2020). According to Herzberg, the factors that help to drive motivation and also result in long-term job satisfaction and commitment to the organization include things such as recognition, achievement, and growth. Conversely, the hygiene factors like the salary system, working conditions, and company policies are the main cause of dissatisfaction if their needs are not met. But these hygienic factors are critical to making sure that dissatisfaction is nonexistent. (Erben & Büyüktaş, 2020). The dual-factored approach is still applicable in solving the issues

associated with employee retention in the healthcare sector, which has high turnover rates and cases of burnout. Since the theory was created over decades, more recent research has supported the usefulness of the theory as an invaluable means of studying motivation at the workplace, including the healthcare sector. Such Herzberg constructs have massively guided the comprehension of concepts that satisfaction of employee needs is not an issue of lack of dissatisfaction, but rather a strategic positive stimulus. These concepts are quite applicable in describing the phenomenon of physician burnout, which can be initiated by physician turnover due to a lack of fulfillment of hygiene needs like remuneration or work-life balance, lack of motivators like career advancement or appreciation.

The framework can be used specifically for the problem of low retention rates in medical centers (Erben & Büyuktaş, 2020). Such resignations are not only destined to leave the care of patients and create chaos within the organization but also lead to ensuing losses. With the help of Herzberg theory, this project is supposed to identify which of the hygiene factors are desired and how the current shortcomings can be negated to reduce discontent. At the same time, it looks to uncover factors that will help promote satisfaction and longevity in healthcare workers' careers.

This theory was developed by Frederick Herzberg, a clinical psychologist, and contained later modifications that implied that variations depended on the particular work and the nature of the work itself, as proposed by organizational behavior researchers. (Lee et al., 2022). These have contributed to its use in more complex situations, thus making it a viable tool to examine physician turnover and involvement.

In this very project, the dual-basket model created by Herzberg will come in handy when creating the questions aimed at the leaders of healthcare organizations to obtain their opinions on retention policies. To illustrate, questions will aim at establishing how different issues of what

can be termed hygiene concerns to organizational members are being addressed, including competitive remuneration, moderate workload, and a good working environment. Also, the framework will be implemented on organizational practices in order to define the shortage of motivators, such as the career progression map or any other award scheme. In order to have a holistic picture of the phenomenon of physician retention, the current study will emphasize some of the major concepts in the Herzberg framework. First, it will discuss job satisfaction and the association between job satisfaction and intrinsic motivation (recognition and career development) and their role in physician retention. Secondly, the research will examine the problem of burnout reduction, and it will examine how the management of workload, as well as psychological support, may affect retention. Finally, it will put into focus the workplace environment and how organizational culture, leadership, and physical work environment positively influence physicians' intention to stay in their job (Sarkar, 2023).

The project will elaborate on the elements of the two-factor theory on burnout by Herzberg in treating the problem of physician burnout, making the distinction between hygiene factors and motivators that can provide a focused approach to reducing dissatisfaction in health care. Hygiene variables like bureaucratic hurdles and work overloads can also play a big role in causing dissatisfaction among physicians and make them feel exhausted (Alrawahi et al., 2020). The ways these stressors are dealt with by using streamlined processes and fair workloads are in line with Herzberg, who considered hygiene factors as issues that can be dealt with. On the other hand, motivators, which include recognition, competitive pay, and significant contributions, are also necessary to develop job satisfaction. With these factors at the center, medical institutions will be able to change the dynamics at the workplace to be tolerable, let alone be rewarding. Such a two-fold strategy would facilitate theoretical intervention and promote practical responses

to curb burnout and promote long-term satisfaction in physicians (Alrawahi et al., 2020). When this qualitative research employs the factor theory as put forward by Herzberg, the project will assist healthcare producers to realize how to enhance job satisfaction, prevent turnover, and develop a stable workforce. This concept squares up with the overall vision of developing a flexible and sustainable healthcare infrastructure. Thus, the current study proved the Two-Factor Theory created by Herzberg to be a powerful tool to analyse and manage the turnover of physicians in terms of hygiene and motivation factors. Such an analysis can be employed to determine useful retention interventions that can specifically make jobs more satisfying and reduce turnover across the healthcare workforce, resulting in improved patient care and organizational stability.

Project Context

The project can be applied to the business sector and in the DBA specialization course of strategy and innovation. Healthcare organizations need to change to address the issue of physician retention that exacerbates performance and profitability, and reduces the quality of care delivered. The strategic plan suggested is either to decrease the medical staff turnover, which is expected to decrease by 11% in U.S. hospitals, which is in line with the idea of enhancing staff retention and improving patient care outcomes (Raman et al., 2024). The problem lies in the fact that the different retention strategies are inefficient, leading to high turnover, high cost of hiring, and low employee pride (Pappas et al., 2022). In like manner, the practice gap implies that healthcare executives lack awareness of the ideal practices or even the resources at hand to develop an effective physician retention plan, which results in dissatisfaction among physicians and an organizational disruptor (Raman et al., 2024). The project discusses and puts into action strategic retention programs to overcome the challenges of fit.

Using the two-factor model of motivation that was proposed by Herzberg, the project endeavors to introduce innovation in the organizational development in order to boost the career expectations and the environment of the physicians. The need analysis was used to determine the viability of the project, as it pointed out the losses that the organization suffered as a result of physician turnover, which was approximated to have cost the organization approximately 979 million dollars (Sinsky et al., 2022). The project need could be justified by the literature based on the essentiality of retention strategies in improving the performance of organisations and patient care outcomes (Vries et al., 2023). Pappas et al. (2022) state that the skills of making strategic decisions with the help of technology usage are combined with the establishment of a positive organizational climate. Nevertheless, the issues of physician burnout and the turnover rates that are likely to deteriorate the quality of care and the organizational climate as a whole will be left unresolved (Zhang et al., 2020) without such change. The project will potentially guarantee the sustainability of the project and high-quality healthcare provision.

Nature of the Project

The project aims to increase the turnover of physicians, as well as the morale of staff among the healthcare professionals. The problem of physician turnover has been worsened by a number of factors: organizational objectives do not correlate with the expectations of physicians, the absence of professional opportunities, and financial motivation in the given field of work (Pappas et al., 2022). Such obstacles undermine retention of the workforce and result in inefficiencies in the way business is undertaken. The shortage of physicians is projected in the healthcare sector to be 54,100 to 139,000 by 2033, which will have a direct effect on the morale of the staff, quality of care, and stability of the organization (Boyle, 2020). The workload and stress experienced by remaining physicians with the shortage worsen and further demoralize the

remaining physicians, leading to the burnout-turnover cycle. It is also interesting to note that emotional fatigue in physicians, which had significantly increased during the COVID-19 pandemic, increased to 61.7 per cent (as compared to 37.5 per cent) (Shin et al., 2023). These are problems that should be solved as a remedy towards establishing a sustainable and conducive environment where physicians would want to practice.

The problem of physician shortages is complex and needs creative and strategic solutions to break systemic obstacles. As well, the absence of retention measures and dissatisfaction at work have undermined the morale of staff (Raman et al., 2024). The lack of alignment of existing organizational norms with the professional objectives of physicians also leads to a high turnover, which negatively affects the long-term sustainability of the sector. The fact that after the pandemic, the shortage of healthcare professionals is 91,500 people indicates another particular situation when the change is urgently needed (Zhang et al., 2020). The lack of retention-oriented measures may further contribute to the problems of higher turnover rates, decreased employee morale, operational and financial inefficiency, as well as reduced quality of care and increased financial pressure on health care organizations. The nature of the project is viable in the healthcare sector as the project aims at systemic solution gaps using evidence-based retention strategies. The project follows the strategy and innovation specialization program of the DBA, offering an idea of how workforce challenges can be managed in an innovative and sustainable manner.

Scope

The project scope, scale, and range will be based on retention strategies to alleviate physician shortages in the healthcare industry and enhance turnover and staff morale (Yang et al., 2022). The suggested measure of introducing retention programs is aimed at harmonizing the

organizational objectives with the professional ambitions of physicians, as well as their needs in the workplace (Raman et al., 2024). The gap analysis revealed that the healthcare leaders lack the knowledge and abilities to introduce effective retention systems, which leads to high turnover rates and declines in morale (Raman et al., 2024). Insufficient retention remedies have dire operational, economic, and overall patient care consequences in the healthcare field (Raman et al., 2024). Therefore, the project falls within the main field of alleviating burnout and turnover among physicians by using the two-factor theory of motivation presented by Herzberg to discover what motivates or discourages physicians to remain with the employer organization (Erben & Büyuktaş, 2020). Conversing with the leaders of healthcare companies in the United States will lead to ground-level principles of creating an environment to be optimized within the industry (Vries et al., 2023). The project is also designed to fill the given gap in practice and the business issue of turnover, providing practical solutions to healthcare organizations (Vries et al., 2023). The findings of projects can be used to work out evidence-based measures to enhance the level of physician satisfaction, decrease financial burdens, and guarantee the sustainability of the sector in the long term (Weintraub & McKee, 2019).

Significance of the Project

The project is crucial to the healthcare leaders in the U.S. since the project will give valuable insights into how healthcare organizations can implement the best practices to deal with physician turnover and polarization (Zhang et al., 2020). The problem of physician shortage and burnout identified is crucial to tackle in order to maintain the quality of provided care and efficiency (Zhang et al., 2020). The failure to retain employees leads to an increase in the level of turnover; therefore, the high cost of recruitment leads to low morale, and ultimately, endangered patient safety (Raman et al., 2024). Moreover, a lack of goal congruence with the physicians

leads to dissatisfaction and augments the turnover crisis (Misra et al., 2024). Physician turnover is important because it can destabilize operations, quality of care, and the finances of healthcare organizations. Some of the problems that have led to this problem are mismatched organizational aims and physician expectations, a lack of sufficient professional development options, a lack of effective retention techniques, and financial motivators (Pappas et al., 2022). All these are contributing to a lack of morale, burnout, and a high turnover rate among physicians.

These issues directly impact healthcare leaders, who have the responsibility to achieve a stable workforce, financial resources, and high-quality patient care (Feng et al., 2022). The resolution of these problems will provide leaders with evidence-based interventions, i.e., increased professional development plans, specific financial incentives, and alignment strategies that allow for enhancing the satisfaction and retention of physicians (Misra et al., 2024). Through such interventions, healthcare organizations have the ability to create a positive working atmosphere, enhance the morale of employees, and harmonize professional ambitions. The outcomes will not only positively influence the healthcare leaders but also the organization as a whole since they will improve patient care, operational efficiencies, and financial productivity (Zhang et al., 2020). This project's results can be applied in real life to overcome systemic gaps and create sustainable staff retention strategies to make the healthcare sector successful and innovative in the long-run, and to increase staff morale (Yang et al., 2022).

Historical Background and Current Trends

The healthcare sector has evolved over the past years in terms of emergent needs, technology, and human resources (Junaid et al., 2022). The historical context is a better explanation of the reason why over-reliance on conventional methods of workforce management leads to such issues as the shortage of physicians and burnout (Zhang et al., 2020). Historically, healthcare providers addressed the issue of workforce shortages by making small-scale adjustments to staffing ratios without any thought of instituting systemic changes to facilitate retention and staff satisfaction (Raman et al., 2024). Trends in 2023 indicated that post-COVID-19, problems with the workforce are more acute (Shin et al., 2023). Health workforce turnover and fatigue rates, as well as dissatisfaction, primarily among physicians, have a considerable impact on the quality of care and organizational productivity (Zhang et al., 2020). Healthcare organizations enhance leaders' workflow to enhance operational efficiency, leading to the organization's sustainable workforce development (Mok et al., 2020). The development of trust in patients in the health care service is based on the stability of the workforce and motivation to provide high-quality care to the patients on a consistent basis (Bhati et al., 2023). The study involved in the project entails examining the perception of U.S. healthcare leaders with respect to implementing retention interventions aimed at reducing staffing turnover and morale in the workplace (Pappas et al., 2022). Practical solutions for the challenges will help the project to support the sustainability and growth of the healthcare sector and meet future patients' and organizational demands (Junaid et al., 2022).

Historical Background

The healthcare sector has experienced a lot of technological, social, and demographic changes in the last few decades. But the issue of workforce, including shortages of doctors and burnout, has remained and negatively affects the quality of care and organizational sustainability. The past reliance on reactive methods to curb the issues caused by workforce gaps has been inadequate, and a strategic method of retention and workforce stability is required. General practitioners had long-term relationships with their communities, and in the mid-20th century, the medical profession was predominantly made up of general practitioners (Institute of Medicine, 2019). The shift of specialization in medicine between the 1970s and 1980s found the specialization becoming more dynamic, with specialists moving in and out of different medical centers, as well as general practitioners being less prone to leaving the place than specialists, hence the higher turnover rates among specialists (Institute of Medicine, 2019). The expansion of managed care and HMOs brought in additional limitations, which brought about dissatisfaction and high turnover of physicians. Doctors documented that practice in managed care has had considerable and, to a great extent, unpleasant impacts on diverse medical practices such as physician-patient relations, clinical decision-making, conditions of work, and general contentment.

The Association of American Medical Colleges estimates that between 54,100 and 139,000 physicians will be in short supply in 2033 (Boyle, 2020). This understaffing disrupts care provision, patient outcomes, and operational effectiveness. To resolve this problem, they need to come up with new strategies for ensuring retention in order to have stable employees to assure the stability and sustainability of health systems. One of the deficits in healthcare leadership that is very critical today is a physician retention strategy. Without specific initiatives, healthcare organizations are more likely to experience increased turnover, burnout, and financial pressures. Among these aspects are the organizational culture and climate as perceived by the physicians, expectations of fit among the physicians, and unfair distributions of rewards among others, which bring about dissatisfaction. Physician practice patterns have been affected significantly by managed care (Pappas et al., 2022). Out-of-pocket contracts with more managed care plans have increased the amount of time spent by physicians with patients, but it has also introduced increased amounts of administrative work and the feeling of not having enough time to spend with patients. It consequently has an influence on physician satisfaction and retention.

Historical Development

In the past, the healthcare sector has responded inadequately to workforce issues, which focused on using short-term workforce solutions (Misra et al., 2024). According to Herzberg, two factor theory, which was proposed in the 1950s, claimed that, in addition to the two groups of factors of intrinsic motivation, such as professional development, and extrinsic hygienic factors, such as pay and workplace, determine job satisfaction (Erben and Buyuksata, 2020). Nonetheless, Hertzberg's precepts have not been utilized to a considerable extent in workforce management initiatives for a long time until recently (Erben & Büyüktaş, 2020). Key milestones, such as the Affordable Care Act (ACA), made dramatic investments in activities related to

improving the employment and retention of staff as more patients were targeted with access to needed care (Kominski et al., 2020). The vulnerability of the health workforce has been further exposed by COVID-19; the pandemic has resulted in about 91,500 shortages in the health workforce (Zhang et al., 2020). The era indicates a shift, with the importance of having sustainable approaches to the workforce, avoiding burnout, and enhancing retention (Zhang et al., 2020).

Social and Economic Influences

There are chronic issues of workforce retention and turnover in the healthcare industry, largely brought about by various social, cultural, and economic aspects. These variables play a crucial role in effective strategies to address the problem of physician shortages and to guarantee job satisfaction. The population of older adults in the U.S. has already placed much strain on the healthcare system since it is urging more specialized healthcare services (Jones & Dolsten, 2024). Such a demographic transition has already increased the number of physicians, which ultimately contributes to burnout and dissatisfaction. The mobility of physicians has impacted workforce dynamics culturally. Communication and transportation have changed, which has enabled physicians to cross borders in pursuit of superior career opportunities, work-life balance, and personal growth. Mobility brings about health care talent redistribution (Mohammadiaghdam et al., 2020). This means that there will be a shortage in certain areas, whereas some areas will get extra practitioners.

Physically, the compensation of the physicians had always been pegged on the number of patients attended to; that is, high levels of patients were promoted. This approach, however, has been altered by the introduction of managed care and health reform, in which there is emphasis on fixed payments and cost control. This shift caused an income loss and dissatisfaction among

the physicians and finally resulted in turnover. Physician turnover is a very costly issue. Burnout-related turnover expenses the healthcare sector in the United States about 979 million every year (Sinsky et al., 2022). This cost highlights the necessity to employ preventative workforce management practices to reduce turnover and its cost.

Historically, the healthcare industry has relied on short-term solutions to deal with the workforce issue, such as filling available positions and filling available openings through recruitment. These have been insufficient in bringing about long-term stability. The two-factor theory of Herzberg would be relevant to categorize intrinsic motivators-what motivates employees, including job development-and extrinsic hygiene factors-working conditions, remuneration, and other job-related factors (Alrawahi et al., 2020). The tendency to integrate the retention strategies based on the theory of Herzberg is growing. The point is that this method considers not only motivators but also hygienic factors, thus allowing healthcare leaders to provide the environment that will facilitate job satisfaction, professional development, and long-term sustainability of organizations.

The issue of physician retention is historical, social, and economic and has been approached and impacted by these phases (Jones & Dolsten, 2024). The most crucial concerns of physician shortage, turnover, and workforce are signs that the new, successful, evidence-based solutions are being created (Tamata, 2022). The project seeks to bridge the gap in practice and provide the much-needed knowledge from the extant literature to support the retention initiatives of healthcare leaders to enhance quality and sustainable care delivery (Junaid et al., 2022).

Current Trends

The last 10 years have seen widening discrepancies in the physician workforce along with rising burnout rates, which have led the healthcare sector to focus more on physician

retention than ever (Zhang & Saltman, 2021). The existing tendencies suggest that the recruitment approaches are to be reversed to passive employee retention practices to raise the job satisfaction levels and reduce the turnover rates (Yang et al., 2022). As the community continues to experience negative impacts of COVID-19, the trends have proved to be critical as health facilities seek to tackle health workforce instability whilst delivering quality and affordable care (Shin et al., 2023). An emerging pattern is deflecting preventive control measures focusing on eliminating the sources of the reasons for physicians' discontent (Pappas et al., 2022). According to a study by Pappas et al. (2022), healthcare organizations continue to be aware of the emerging need to address organizational values with physicians' expectations. It has also been identified that the alignment increases the level of job satisfaction and reduces the turnover rates in the organization (Tamata, 2022). As an example, the companies that have devoted efforts towards other areas, including the mentorship scheme and professional growth of their workers, have witnessed a twenty-five percent decline in the turnover rate (Wikström et al., 2023). Career development and support enhance the work satisfaction of employees and provide them with positive work environments (Wikström et al., 2023).

Emphasis on Work-Life Balance

Another tendency is that the need for work-life balance seems to be one of the most critical variables of physician turnover (Adriano & Callaghan, 2020). Tanios et al. (2021) observed that 42 percent of physicians emphasized that they are experiencing burnout, which contributed to the impact of the decision to remain in the jobs they are in. To avoid the challenge, healthcare organizations tend to offer adjustable working conditions like telehealth and work fewer hours (Kominski et al., 2020). According to a survey by Payerchin (2022), out of physicians who complete medical practice, 70 percent would seek alternative employers in order

to achieve a better work-life balance. The reality is that healthcare leaders need to work on the development of policies that would support work-life balance in order to retain talent.

Leveraging Technology for Efficiency

The other major trend that has come up as a factor that will impact operations in the area of retention is the application of technology to conduct healthcare operations (Junaid et al., 2022). The implementation of telehealth and electronic health record systems and the daily routine of patients and workloads of staff became significantly less cumbersome and time-saving due to the COVID-19 pandemic (Zhang and Saltman, 2021). According to a report by the McKinsey Health Institute (2022), using technology in healthcare organizations can help cut down clinician burnout by 30 percent. In addition, optimization of EHR, adoption of interfaces that are user-friendly in the US, and reducing administrative workload to ensure physicians dedicate most time to the patient side to enhance job satisfaction.

Monetary Rewards and Pay System

Payments and compensation packages play an important role in the recruitment of physicians (Adriano & Callaghan, 2020). Recent studies have been able to propose that the competitive pay system is an important element in the retention of the health workforce. As reported by Wikström et al. (2023), compensation was noted to be a key factor in the job satisfaction of 61% of physicians. Secondly, firms with performance-based incentive schemes have realized a 15% improvement in employee turnover rate (Raman et al., 2024). The trend also connects pay to performance and to organizational goals and objectives to enhance work satisfaction (Raman et al., 2024).

Cultural Competence and Diversity

The other up-and-coming trend in physician retention in relation to healthcare facilities

involves the issues of cultural competence and diversity (Jones & Dolsten, 2024). Having diversity can increase job satisfaction rates and patient care outcomes among healthcare professionals (Fox, 2020). Tanios et al. (2021) stated that firms that have diverse executives have a performance that is 35% improved. An inclusive workplace environment can greatly reduce turnover rates since individuals feel valued and appreciated as members of the team (Kominski et al., 2020). Medical workers have grown picky in their choice of career and are very attentive to the surrounding. So, the culture cannot afford to ignore the need to embrace diversity to attract and nurture the talented personnel they need to achieve their goals and objectives (Kominski et al., 2020).

The collaboration has brought back the representatives of various industries to share effective interventions and policies in support of the clinician (Fox, 2020). Modern tendencies on healthcare workforce retention are concerned with the problem on the individual level and presuppose job satisfaction, work-life balance, and the appropriate use of technology (Feng et al., 2022). The increasing attention to aggression retention policies, high competitive pay, and diversity initiatives indicates that a number of workforce concerns should be taken into consideration by healthcare leaders (Mok et al., 2020). By knowing the trends and the impacts, healthcare organizations will be in a position to extend the specific strategies to curb turnover and develop a healthy workforce to deliver quality care solutions in the long run (Zhang et al., 2020). Therefore, additional research and experience will be of utmost importance in establishing trends in physician retention in the future (Zhang et al., 2020).

Theoretical synthesis of the Scholarly Literature

The academic source on physician retention in healthcare organizations portrays a complicated and multi-faceted environment that has developed worldwide during the past years, as the research has shown that the conventional methods of retention, which were mainly monetary-based, have developed into more intricate and all-inclusive retention strategies. This development is indicative of a better comprehension of the complex nature of the interrelation between factors that affect the satisfaction, engagement, and commitment to healthcare organizations by physicians. Recent research has demonstrated consistently that the measures of successful retention need to be multi-dimensional approaches that consider at once such dimensions as professional development, work-life integration, organizational culture, and systemic supports (Lin et al., 2024). The COVID-19 pandemic has left a specific impact on research, as it has never been more evident that healthcare organizations will rely on the stability of their physician workforce as its members become increasingly vital to the organization.

The interdependence of physician burnout and retention has become one of the prevalent topics of modern studies, and the literature indicates that there are alarming tendencies in the exhaustion of healthcare workers and its contribution to organizational stability. Shin et al. (2023) observed that there were dramatic changes in emotional exhaustion rates among physicians, with the rate becoming 62.8% in the aftermath of the pandemic and increasing to 38.2% immediately before it. This considerable growth gains a certain significance in the context of a study by Sinsky et al. (2022), who determined a positive correlation between the burnout rates and the organizational expenses and estimated the annual burnout-associated turnover costs within the scope of the healthcare sector (between 2.6 billion and 6.3 billion). Financial consequences of physician turnover are also described in in-depth research by DeChant et al.

(2019), who discovered it can cost between $ 500,000 and $ 1,000,000 in the case of one physician replacement, depending on the specialty. The results can be supported by other studies conducted by Pappas et al. (2022), who constructed complex models for estimating the overall organizational costs of physician turnover, such as direct replacement costs and indirect costs in terms of productivity decline, quality of care decline, and team morale decline. The overall evidence indicates that burnout has not only personal impacts on physicians but also has significant implications on the entire healthcare organization, including the quality of patient care and financial viability.

The imperative importance of organizational culture in the retention of physicians has become another core theme of modern literature, as research has shown that cultural aspects of satisfaction, as well as commitment to the healthcare organization, in the short and long term, depend on it. Kumra et al. (2020) have built a fully detailed framework that directly reflects the impact of organizational culture on physician satisfaction and retention, and their study revealed that healthcare institutions that practice productive leadership cultures and have a well-defined pathway towards professional development have much lower turnover rates. The given finding is further supported by the research by Lyons et al. (2020), as their systematic literature review provided evidence that evidence-based leadership development programs do have a positive effect on retaining and engaging physicians. The significance of organizational culture is further highlighted in a study conducted by Subramaniam et al. (2024), who studied the contribution of organizational practices to physician well-being and retention but with no particular effects on long-term commitment, identifying supportive cultural elements as key factors to success. All these studies seem to lead to the conclusion that cultural factors are substantially contributing to

retention more than it was ever understood before, with organizational culture as a cornerstone to which other retention strategies can be established successfully.

The concept of work-life integration has become a highly important element of retention strategies, and the recent literature highlights its increased relevance in terms of a stable workforce of physicians. A comprehensive study by Ramas et al. (2021) demonstrated that companies that have a well-established wellness program and flexible working policies have a high retention of physicians, and their results revealed that the traditional methods, which focus on remuneration and other benefits alone, are ineffective in meeting the diverse needs of the new healthcare practitioners. The current study is complemented with elaborate work done by Adams et al. (2021), who considered resources in mental health support and stress management an essential component of effective retention strategies. Their evidence shows that the percentage of burnout is low in the organizations that focus on the health and well-being of the physicians by providing them with well-organized support systems. The significance of work-life integration is also backed by the studies conducted by Moortezagholli (2020), who, in particular, analyzed the views of millennial healthcare leaders on job satisfaction and retention and concluded that younger generations of physicians place a high priority on work-life balance and flexible working schedules. All these studies indicate that in the future, medical organizations should devise more advanced solutions to the work-life balance in case they want to retain a stable workforce of physicians.

The effects of the implementation of technology on the satisfaction and retention of physicians are a particularly complicated phenomenon in recent studies, as research has shown both a possibility and a problem in implementing healthcare technology. Jedwab et al. (2023) made extensive studies of the impact of health technology integration on physician workflow and

satisfaction and concluded that, although technology could positively influence the care delivery process, it causes a lot of new administrative work that negatively impacts retention. This observation can be further elaborated by specific research of Gellert et al. (2023), who reported that optimized technological arrangements and simplified workflows can greatly enhance the level of physician satisfaction and retention. Literature indicates that the implementation strategies and support systems are critical to the success of the technology utilized and that technology solutions with weak implementation might prove to be a contributor to burnout and turnover, whereas a well-designed one may facilitate the increased satisfaction and efficiency of physicians (Albozabdah, 2023). This is especially topical due to the growing digitalization of healthcare services and the growing significance of technological competence in medicine.

The opportunities of professional development and career advancement are highlighted as one of the key elements in the retention strategy of various studies, and research shows that organizations that offer the opportunities of professional growth have better retention outcomes. A rapid evidence review by Chang and Busser (2020) showed that ongoing professional development has a big effect on physician satisfaction and retention, and their study shows that organizations that offer structured growth opportunities have superior retention rates. The result is consistent with extensive studies conducted by Nguyen et al. (2021), who discovered leadership training and development of specialized skills to be essential in retaining physicians in the long run. Their systematic review indicated that organizations with visible career development prospects have a higher retention rate and better involvement of the physicians. Professional development is also highlighted in the study by Scott et al. (2020), who examined the role of the workforce demographic changes and their impact on the retention strategies by

realizing that organizations should have more adaptable and personalized professional development practices that should address the varying career stages and professional objectives. The literature on the significance of systemic approaches to retention is increasingly growing, and recent studies show that a set of separate interventions cannot be as effective as an integrated approach that has all components. In Ghani et al. (2022), an extensive systematic review of the literature revealed a variety of interrelated factors that significantly influence retention among physicians in hospitals, and their study showed that the most effective retention approaches should focus on individual and institutional factors at once. The latter finding is substantiated by the in-depth research conducted by Moloney et al. (2020), who created a complex model of improving the sense of belonging and longevity of healthcare professionals to organizations. They note that developing integrated support systems that consider several factors of physician satisfaction and engagement is important, and organizations need to be holistic in their thinking towards their retention and not to focus on one intervention or solution to a single factor.

The importance of leadership in retention strategies is the topic of considerable attention in recent studies, with research having shown that leadership approaches and behaviors can impact physician satisfaction and organizational commitment. Davenport et al. (2022) performed a comprehensive study that underlines the role of leadership strategies in developing sustainable working settings that would facilitate retention of physicians and found that effective leadership strategies that are effective would make a significant difference in burnout rates and job satisfaction. The given research is supported by the research conducted by Shanafelt et al. (2020) that reported the effects of particular leadership behaviors on physician well-being and commitment to an organization. All these studies lead to one proposed idea: development and support of leadership should be viewed as part of overall retention plans, and that good

leadership is an important factor in designing an environment that facilitates long-term physician involvement and commitment.

External influences on strategies of retention have been discussed in detail in the recent literature, with researchers investigating the effects of outside influences and the community on retention patterns of physicians. Mohammadiaghdam et al. (2020) have done an extensive study investigating the impact of various factors on physician retention, including geographic location, the characteristics of a community, and regional healthcare requirements, and their results imply that effective retention strategies should be based on both internal and external influences. The study is complemented by an extensive study by Lin et al. (2022), who established evidence-based solutions to retention issues in different healthcare facilities, and their results prove that it is essential to take into account contextual factors when establishing retention strategies. All these studies imply that the organizations need to come up with retention efforts that consider their operating environment and community settings, and not the one-size-fits-all solutions.

The new focus on data-driven methods of retention is a notable change in the literature, and recent research examines how novel techniques of advanced analytics and predictive modeling can improve retention policies. Fallucchi et al. (2020) made a groundbreaking study on predictive analytics usage regarding the risk of turnover identification, and Papa et al. (2020) explored the role of Integrated management systems on retention outcomes. The research indicates that the focus on evidence-based and technology-enabled retention interventions is increasing, although the research implies that the latter are still at an early stage of their development and application (Brown et al., 2020). This potential of data-driven approaches is especially high in light of the complexity of the topic of physician retention and the necessity to

employ more advanced ways of recognizing and addressing retention risks prior to their manifestation into turnover.

The psychological contract between physicians and healthcare organizations comes up as an essential defining variable in retention results, and recent research delves into the impact of unmet expectations and perceived organizational support on turnover intentions. A study by Tawfik et al. (2021) performed a thorough review of the constructions and transformations in psychological contracts over the career of a doctor, discovering that breaches of such implicit contracts are a major factor raising the risk of turnover. Their study reported how incongruencies between organizational commitments and real-life experiences leave deep levels of dissatisfaction, which the usual retention techniques do not solve. This observation is further reinforced by the extensive research conducted by Larsman et al. (2024), who examined the interactions between various elements of the psychological contract, such as professional autonomy, resource accessibility and organizational support in relation to affecting physician satisfaction and retention. Their study showed that firms that uphold a good psychological contract by providing regular support and effective communication have much lower turnover rates, and that consideration of such implicit contracts should be one of the core retention policies.

Organizational justice and retention of physicians, or rather the intersection of both concepts, is a theme of another important area of the recent literature, as the results of the studies indicate that attitudes towards fairness affect long-term commitment to healthcare organizations. Mengstie (2020) carried out an in-depth study that investigated the influence of various types of organizational justice, such as distributive, procedural, and interactional, on physician retention and satisfaction. Their results showed that procedural justice, especially in matters involving the

physician's work-life in decision-making processes were more relevant in retention than ever before. The work by Correia and Almeida (2020), who examined the effect of the organizational justice perceptions on the physician engagement and development of professional identity, complements this research. Their results indicated that those organizations that promote clear and equitable procedures and decision-making processes have a much lower turnover rate and increased physician commitment, even amidst the change or stressful times in the organization. Mentorship and professional relationships as factors of physician retention have gained more attention in the recent literature, with the research showing the immense effects of social relationships on career and organizational commitment. Feshbach et al. (2024), in their extensive study, looked at the role of formal and informal mentorship relations on physician retention in early career, and the results showed that formal mentorship relations led to a significant decrease in the likelihood of turnover in the first several years of practice. The work by Capone et al. (2022), who examined the impact of professional relationships and social support networks in healthcare organizations on the well-being of physicians and their career choices, provides further context to this study. Their results revealed that organizations that have positive professional relationships and positive peer networks with staff have much better retention results, and social capital development should be viewed as an important aspect of retention strategies.

The effect of organizational learning culture on physician retention turns out to be another important theme of recent studies, and the research studies show that the possibilities of continuous learning and development of the professionals impact long-term commitment. The works of Lock and Carrieri (2022) are a comprehensive research focused on the impact that organizational learning environments have on the levels of physician satisfaction and retention,

and identified that a considerably lower rate of turnover is observed in organizations that have established the culture of continuous improvement and learning. Their research is backed by comprehensive studies by Naqshbandi et al. (2022), who examined the role of various attributes of the organizational learning culture, such as knowledge sharing, innovation support, and continuous improvement practices, in enhancing physician engagement and retention. All these studies indicate that the establishment of strong learning environments to enable the development of individuals and organizations is important in ensuring a stable supply of physicians.

The influence of physician autonomy on physician retention is a dynamic issue in current literature, and the studies have shown that the impact of altering healthcare delivery models on professional autonomy and job satisfaction. A large-scale study by Martinussen et al. (2020), which investigated the effects of organizational structures and policies on physician autonomy and retention, presented evidence that perceived losses of professional independence are a significant risk factor for turnover. The study is supported by an in-depth report by Sinsky et al. (2021), who examined the balancing of various organizational models in the necessity of standardized care processes and the autonomy of physicians. Their results indicated that when organizations manage to keep this balance by means of collaborative governance structures and common decision-making processes, the retention outcomes are improved, which means that it is essential to retain certain modulations of professional autonomy in the required organizational structures.

The recent academic literature indicates that there are new aspects to the strategies of retaining physicians in the current healthcare workforce shortages. An innovative study conducted by Karim et al. (2024) revealed that healthcare facilities that used AI-supported workload-distribution solutions cut down on physician burnout, physician turnover, and enhanced

physician retention rates relative to conventional scheduling strategies. This retention technology aspect can be matched to research by Siva et al. (2024), who reported that hospitals with predictive workforce analytics had a decrease in unexpected physician turnover. The significance of tailored retention strategies was discovered in a full-scale study by Bashar et al. (2022), which discovered that retention rates of physicians in organizations with rural-specific incentives, such as housing allowances and educational debt repayment, were higher than those with the standard retention strategies in urban settings. These results were further supported by studies discovering that institutions with customized career development tracks minimized early-career physician turnover relative to the standardized development patterns (Kwon and Cordova et al., 2020). The financial effects of the innovative retention proposals were reported by Fraser and Peckham et al. (2022), who discovered that institutions investing in physician-led quality improvement projects experienced a decrease in turnover and an improvement in patient satisfaction rates. These authors determined a previously understudied relationship between physician autonomy in clinical decision-making and retention in long-term physician-employers, where healthcare systems that were characterized by greater physician discretion in treatment regimens had lower turnover rates than highly standardized systems (Russell et al., 2021). A new strategy in retention was developed as Malek (2024) researched the effectiveness of the so-called micro-sabbaticals - two- to four-week professional development/research paid leaves - and found that organizations that implemented the concept of micro-sabbaticals not only reduced the burnout rates among physicians but also increased their job satisfaction rates.

The scientific literature, therefore, provides an articulate and in-depth insight into the understanding of physician retention in medical institutions, considering that multi-faceted, multi-dimensional strategies should be used to rejuvenate physician satisfaction and

involvement. The study conclusively shows that effective retention plans cannot be made without looking at well-established factors like compensation and benefits, but also less obvious ones like organizational learning capability, workplace relationships, decision-making process, effectiveness of communication, and work environment. Moreover, literature indicates that companies should be flexible in their strategies of retention and constantly track and change their strategies according to the feedback provided by physicians and evolving healthcare conditions. This extensive research can equip healthcare leaders with a set of insights on how to create an effective retention strategy and suggest areas that need further research and knowledge.

Synthesis of the Practitioner Literature

Alignment of the Project With the Literature and Discipline

SECTION 2. PROCESS

Project Questions

Project Design/Method

Stakeholders, Participants, and Target Audience

Role of the Researcher

Project Study Protocol

Sample

Data Collection

Ethical Considerations

Data Analysis

Figure 1

Types of Garbage

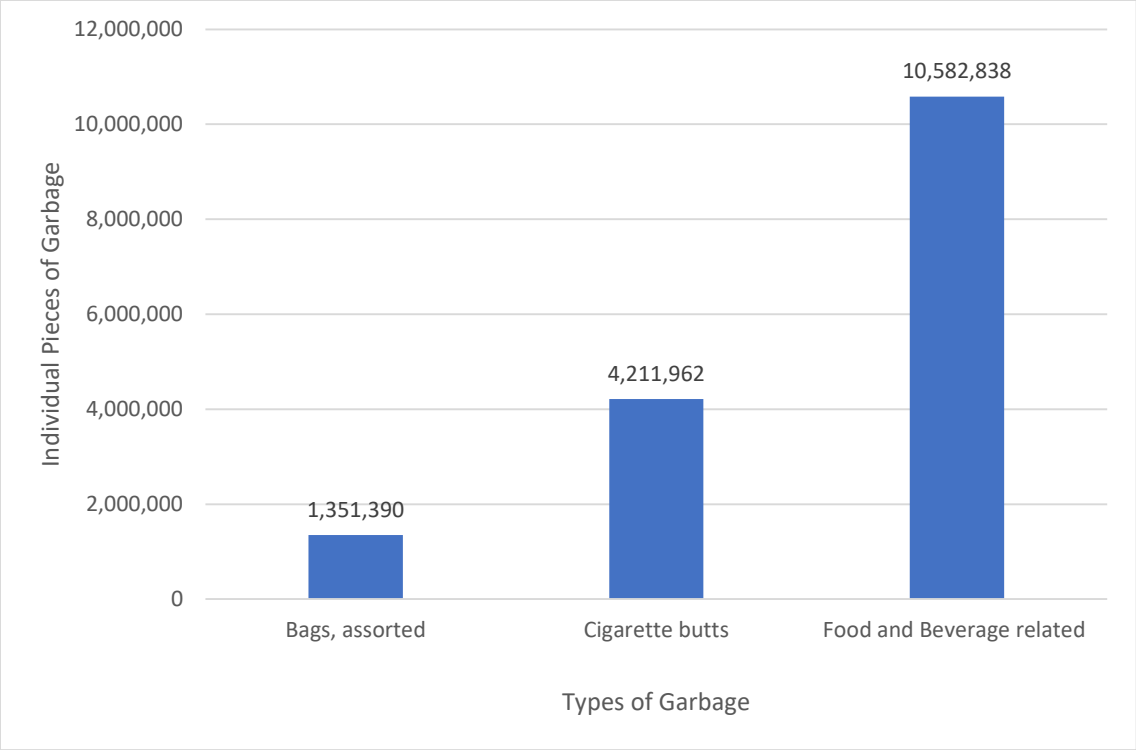

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Table 1

Demographic Information

Participant	Age	Sex	Position	Years in position
P1	25-30	Male	Chairman	10-15
P2	41-45	Female	CEO	6-10

Note. Potential participants under age 16 were omitted from the sample. Only essential notes need to be included. See Table setup (apa.org) and https://academicwriter-apa-

org.library.capella.edu/learn/browse/QG-44?group=All&view=list&term=tables&sort=asc. The Doctoral Publications Guidebook also addresses tables and figures.

SECTION 3. FINDINGS AND APPLICATION

Relevant Outcomes and Findings

Application and Benefits

Implications

Recommendations for Policy

Recommendations for Practice

Recommendations for Future Work

Conclusion

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APPENDIX A. TITLE OF APPENDIX A

The titles of the format are indicated here. Not to include recruitment flyers, permission correspondence, invitation to subject matter experts, and informed consent forms. They ought to be cleared out before handing them over to the committee for review of doctoral publications.

Put tables and figures in the areas where they are expounded.

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