

## In Reply to: "Practical Application of Pediatric Hospital Medicine Workforce Data: In Reference to 'Pediatric Hospitalist Workload and Sustainability in University-Based Programs: Results from a National Interview-Based Survey'"

H Barrett Fromme, MD, MHPE<sup>1\*</sup>; Christina O Chen, MD<sup>2</sup>; Bryan R Fine, MD, MPH<sup>3</sup>; Craig Gosdin, MD, MSHA<sup>4</sup>; Erin E Shaughnessy, MD, MSHCM<sup>5</sup>

<sup>1</sup>Department of Pediatrics, University of Chicago Pritzker School of Medicine, Chicago, Illinois; <sup>2</sup>Department of Pediatrics, Rush University, Chicago, Illinois; <sup>3</sup>Children's Hospital of the King's Daughters, Norfolk, Virginia; <sup>4</sup>Department of Pediatrics, University of Cincinnati, Cincinnati Children's Hospital Medical Center, Cincinnati, Ohio; <sup>5</sup>Phoenix Children's Hospital, Phoenix, Arizona.

**W**e appreciate the query by Drs. Douglas and Wilson. We hereby supply additional information that is critical for creating and administering sustainable staffing models.

For programs with a census cap, the majority cited 16 or fewer patients as the trigger for that cap. Nearly all programs with back-up used a census of 16 or fewer. Over 80% of programs cited a "safe 7 AM census" as 16 or fewer. These data suggest that a census over 16 is appropriate to trigger additional clinical support.

Regarding clinical weighting of nights, nighttime shifts were often more heavily weighted than day shifts, but approaches

to weighting varied and have not been validated. Alternate staffing models for overnight pager calls varied greatly by individual program.

This is a time of significant growth for pediatric hospital medicine, and national workforce data are essential to hospitalists, administrators, and most importantly, patients. Our study<sup>1</sup> provides pediatric hospital medicine leaders with data for discussions regarding appropriate FTE and staffing model considerations. The insights generated by our study are particularly relevant in expanding programs and solving problems related to recruitment and retention.

Disclosures: The authors have nothing to disclose.

**Corresponding Author:** H. Barrett Fromme, MD, MHPE; E-mail: hfromme@peds.bsd.uchicago.edu; Telephone: 773-834-9043.

**Received:** November 20, 2018; **Revised:** December 20, 2018;

**Accepted:** December 22, 2018

© 2019 Society of Hospital Medicine DOI 10.12788/jhm.3156

### Reference

1. Fromme HB, Chen C, Fine B, Gosdin C, Shaughnessy E. Pediatric hospitalist workload and sustainability in university-based programs: Results from a national interview-based survey. *J Hosp Med.* 2018;13(10):702-705. doi: 10.12788/jhm.2977.