

**FACTORS INFLUENCING PHYSICIAN ENGAGEMENT
IN PRIVATE HOSPITALS**



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entitled
**FACTORS INFLUENCING PHYSICIAN ENGAGEMENT
IN PRIVATE HOSPITALS**

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PORNKASEM KANTAMARA, Ed.D., ASST. PROF. ASTRID KAINZBAUER, Ph.D.,**ABSTRACT**

This research aimed to investigate factors affecting physician engagement at private hospitals in Thailand. Both qualitative and quantitative analyses were carried out to determine the important factors for physician engagement, and data were collected through a questionnaire survey and in-depth interviews to best understand the physicians' points of view.

Results revealed that factors affecting physician engagement included multi-specialty services in the hospital, physician autonomy, ethical business conduct, flexible work schedules, good work relationships, an effective risk management system, and the support of the nurses.

Physician engagement factors were similar for male and female physicians but differed in part-time and full-time employment. Full-time physicians focused on how management listened to their comments, management team and strategies, opportunities to learn, self-development, and rewards and recognition systems. Part-time physicians were most concerned about nursing abilities. Hospital management teams must also be concerned with other related factors.

KEY WORDS: Factors/ Engagement/ Physician/ Private Hospital

38 pages

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CHAPTER I

INTRODUCTION

Currently, sports have gained popularity because it is a fun past time. Track, for In Thailand, aside from government hospitals, private hospitals are considered as an important part of healthcare services. Private can be a choice of treatment for both Thai and foreigners, especially for Medical Tourism. The success of private hospitals can also increase foreign exchange income for the country.

Nowadays, all businesses face continual changes and the healthcare industry is no exception. Factors to help organizations achieve optimum business results rely heavily on their workforce. Therefore, it is very important to entice, develop and retain talented staff who have both engagement and commitment to company success. Successful and sustainable hospital development requires engagement and input from both physicians and employees.

To increase the competitiveness of private hospitals, physician engagement is very important because physicians play a vital role in the healthcare delivery process. High-quality physician engagement can create obvious improvements in organizational achievements (Guthrie, 2005). The engaged physicians are willing to accept and apply all roles which can increase their confident to plan and deliver services some part of their responsibilities for some essential service improvements, the re-design process with high performance is possible to achieve.

A physician has specific and diverse work responsibilities from other professions; therefore, factors that affect physician satisfaction and engagement with the organization may be different.

The aim of this research was to study factors that affected the engagement of physicians who worked in private hospitals to understand their perspectives and help private hospital management teams comprehend the concept of a physician's engagement with the organization.

1.1 Research Question

The study intention was to analyze and understand the following question:
What are the factors that affect physician engagement in private hospitals in Bangkok?

1.2 Research Scope

This study addressed the factors that affected the engagement of physicians in private hospitals in Bangkok. Physician engagement impacts on organizational effectiveness. The study was divided into two parts. First, questionnaires were sent to 150 multi-specialty full-time and part-time physicians who worked in at least 10 private hospitals. The information was gathered and analyzed. Second, interviews were conducted with 12 physicians; six worked as full-time in private hospitals and six worked as part-time. Conclusions were drawn and recommendations were made after analyzing all the qualitative and quantitative data.

1.3 Research Objectives

1. To investigate the factors that affected the engagement of physicians in private hospitals in Bangkok from the physicians' perspectives.
2. To understand the causes and concepts of these factors from the physicians' perspectives.

1.4 Expected benefits

Physician engagement affects hospital performance, therefore, understanding the important factors relating to engagement can assist hospital management teams to understand the best ways to attract physicians to work at hospitals. Results will identify the key factors that affect physician engagement from the physicians' perspectives and understand how each important factor affects physicians.

CHAPTER II

LITERATURE REVIEW

Employee engagement is important for all organizations worldwide to survive in this modern competitive market and tough economic situation.

Over the last few years, medical professional engagement has become more important for all healthcare facilities to drive improvements in healthcare services. The term “medical engagement” however, has not been satisfactorily defined.

2.1 Definition

There is no clear definition of the term ‘employee engagement’ which has been interpreted in various ways. Hewitt (2012) described engagement as how employees do their work effectively, smartly and creatively which can influence their working outcome and better performance.

Kahn (1990) explained that ‘personal engagement’ is the way employees apply organization control methods to their work roles. People or employees present and express engagement in three main ways as physical, cognitive and emotional. On the contrary, he explained that ‘disengagement’ is when people disjoin themselves from all work roles. Kahn defined engagement as “the harnessing of organization members' selves to their work roles; in engagement, people employ and express themselves physically, cognitively, and emotionally during role performances”. Kahn (1990) also classified three dimensions of engagement comprising perceptions of meaningful work, availability of personal and organizational resources, and psychological safety.

According to Schaufeli, ‘engagement’ is a positive accomplishment as an emotional state to work which is defined by vigor, faithfulness and assimilation (Schaufeli, 2002). Engagement indicates an extensive intellectual state which is not concentrated on any objects, events, individuals or behaviors. While working, vigor refers to high levels of power and mental flexibility. People who are willing to work have high energy

and are ambitious. Dedication is described as enthusiasm, delight and inspiration in working. Absorption means that people will concentrate, pay attention and engage fully in their work.

Leiter (2008) believed that engagement is how people participate in some activities which can increase efficiency and effectiveness. Moreover, Rice (2012) noted that full employee engagement demonstrated individual satisfaction along with organizational satisfaction.

From the physicians' point of view, engagement means involvement in all activities such as planning, delivering and transforming services. It also refers to the sophistication that physicians have more engagement with the healthcare facility that they work for (Hamilton, 2008).

Spurgeon (2008) believed that physician engagement was the active and positive contribution of physicians in their usual role of work to maintain and increase both individual and organizational performance. This commitment supports, stimulates and boosts high-quality care and services in the organization which is delivered to the patients.

2.2 The Importance of Engagement

Leiter (2007) suggested clear evidence of a positive relationship between employee engagement and attitudes toward their workplace, such as higher levels of job satisfaction. Harter (2002) added that good individual performance enhanced patient care, especially in the healthcare industry. Emotional involvement potential can build sustainable organizations. Sustainability is now important for all organizations and not only for the healthcare industry. Salanova (2005) determined a powerful connection between work engagement and performance of the organization.

In the healthcare industry, clinical engagement is not a new concept. It is necessary to manage and run the business. It is very important to organizational effectiveness. Clinical engagement can be defined as “the degree to which clinicians are an important part of delivering for this purpose, in addition to their responsibilities as a contractor or employee”. (Thallon, 2008).

Berwick (1994) identified the concept of clinical engagement as essential for implementing quality continuation and quality improvement activities in specific areas such as the patient care delivery process.

Ham and Dickinson (2008) showed the relationship between a physician's engagement in leadership and quality improvement. Guthrie (2005) opined that hospital chief executives should be concerned with physician engagement because this was a key priority and also led to better-performing hospitals. Toto (2005) argued that participated and engaged physicians can directly affect day-to-day results on a financial basis. Lack of physician participation is one of the major hindrances to effective healthcare reform (Walston, 1997).

Hamilton (2008) interviewed leaders from mutual funds who were performing well and those who were performed poorly as defined by the Healthcare Commission 2006. He identified high performing organizations as having on average 44 percent of engaged physicians, with bad performers at an average of 17 percent.

Lavis (2010) emphasized the importance of physician engagement in strengthening primary health care in Canada.

Medical involvement seems to be a key factor in making the transition to a well-planned and effective service change. Hospitals where physicians are involved in strategic planning and decision making, do better than hospitals where clinical staff are not involved in the changing process (Goldstein, 2004).

Not only engagement but also physician satisfaction can affect an organization. Nixon (2003) found significant and positive correlations between physician satisfaction and reduced turnover rate. The consequences of dissatisfaction included reduced continuity of patient care, increased costs of medical systems, increased physician turnover, and increased patient dissatisfaction (Murray, 2000). The turnover rate of physicians is very important, not only because it can affect the quality of medical care or deliver services to the patient, but also as a result of patient loyalty.

Taitz (2011) suggested that the engagement of physicians can be described as “The physician who knows the best way to take care of health delivers that service to ensure a smooth, seamless, effective and successful outcome for the patient,” Atkinson (2011) also confirmed that the sharing of clinical and administrative staff is essential

for an organization to deliver value to customers consistently and improve high-quality care.

Mache (2014) suggested that hospital management should be concerned about work engagement because strengthening this would contribute a sustainable workplace and improve hospital performance.

2.3 Physician Engagement Factors

Factors that enhance physician engagement may be different from hospital to hospital, but there are many elements that can encourage physicians to become more involved.

Conrad (2005) surveyed 114 physicians and discovered that the top four motivation factors were interesting work, appreciation of work done, autonomy, and work-life balance. Thus, most physicians were driven by intrinsic motivators.

Research revealed that high-quality communication between physicians and hospital administrators regarding physicians' perceptions of empowerment had positive benefits to the organization in terms of more satisfied physicians, greater quality of care, and lower turnover rates (Loughman, 2009).

Bååthe (2013) suggested that managers who wished to engage physicians in organizational work improvement should try to remove all barriers and offer administrative support. There are several ways to express support including providing learning and training opportunities as well as helping physicians with their work identities. Hospital managers must learn to understand and appreciate physician identity. Studies have shown that if a physician is inexperienced in perceiving limited responses, ignoring from others when commenting specifically from the managers and being left out of the change will continually absolutely reduce their engagement (Bååthe, 2013).

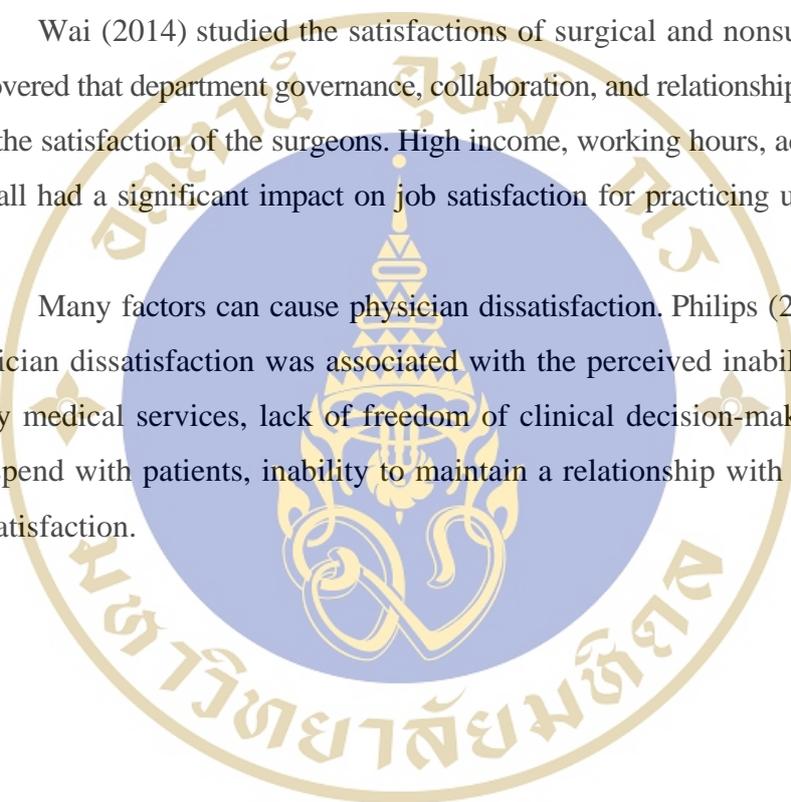
Research indicated that most physicians were satisfied with good relationships with both patients and colleagues, but they were dissatisfied with administration work and personal time constraints (O'Leary, 2009). Qian (2008) found that physicians in Singapore were satisfied with their independence in patient treatment and their relationships with patients; however, they were not happy with their working schedules and career growth.

Duffy (2006) studied the factors of job satisfaction among six major specialized physicians and found that caring of the patient, the feeling of success, caring constantly, autonomy, and individual private time were important factors for satisfaction. Shanafelt (2008) found results suggesting that physicians needed autonomy, work-life balance, a flexible schedule, and a culture that encouraged life outside of work.

Grimes (2012) identified major factors that influenced physician engagement including positive behavior leadership, management training, work-life balance, strong teamwork and communication styles.

Wai (2014) studied the satisfactions of surgical and nonsurgical clinicians and discovered that department governance, collaboration, and relationship with supervisors affected the satisfaction of the surgeons. High income, working hours, academic practice, and age all had a significant impact on job satisfaction for practicing urologists (Pruthi, 2016).

Many factors can cause physician dissatisfaction. Philips (2002) commented the physician dissatisfaction was associated with the perceived inability to obtain the necessary medical services, lack of freedom of clinical decision-making, insufficient time to spend with patients, inability to maintain a relationship with a physician, and patient satisfaction.



CHAPTER III

RESEARCH METHODOLOGY

3.1 Research design

Mixed methods combining both quantitative and qualitative research techniques were used to determine the factors that influenced the engagement of physicians in private hospitals in Bangkok. A questionnaire was developed using information from the engagement survey form and the findings of previous studies to collect quantitative data and in-depth interviews were conducted to elicit qualitative data.

3.2 Sampling

The target population for quantitative data collection included 150 physicians who worked both full-time and part-time in at least 10 private hospitals in Bangkok. These 150 participants completed the two-part questionnaire. The first part consisted of demographic information including age, gender, specialty and work experiences. The second part covered aspects that affected physician engagement. Participants were asked to rate the importance of each statement regarding engagement.

Six physicians who worked full-time and another six who worked part-time were selected from seven private hospitals for in-depth interviews to determine the key factors of physician engagement. The 12 interviewees were specifically chosen to ensure that the sample was credible and covered all the main information. The pattern of the interviews was more conversational than formal to create a comfortable atmosphere for participants to answer questions freely and easily.

3.3 Data collection

A questionnaire and in-depth interview methods were used to determine the level of importance of each factor that influenced physicians in terms of engagement. These methods can provide evidence-based models among large populations. Qualitative interview information frequently provides insight into attitudes, thoughts and actions of participants.

3.3.1 The quantitative part

There was no standard form to evaluate the importance of factors that influenced physician engagement; therefore, a questionnaire was developed. Common topics from the physician engagement survey were applied as statements and findings from the literature reviews were added to the questionnaire. Questions included issues that correlated with the work of physicians such as the hospital environment, management team, physician autonomy, quality management, relationships, compensation and benefits. The last section of the questionnaires was reserved for optional additional comments.

Table 3.1 The questions for the survey

Topic	1	2	3	4	5
The reputation of the hospital					
The location of the hospital					
The quality accreditation of the hospital such as JCI, HA					
The hospital's executive team					
The hospital's strategic plan and direction					
The overall hospital environment (cleanliness, decoration)					
The hospital conducts business in an ethical manner					
The hospital system serves physician autonomy and professionalism					
The hospital values your opinions and ideas					
The hospital provides multi-specialty services					
The flexibility of the work schedule					
The working relationships among the physicians in the hospital					
The effectiveness of nurses and nurse assistants					
The effectiveness of pharmacists					
The effectiveness of other clinical support such as Rehabilitation, Radiology staff					
The non-clinical support department or back office such as marketing, interpreter, insurance, cashier					

Table 3.1 The questions for the survey (cont.)

Topic	1	2	3	4	5
The hospital has new medical technology/equipment/innovations					
The number of patients					
The income (Doctor fee)					
The benefits from the hospital. For example; health benefits, Doctor's lounge					
The opportunities to develop your clinical skills/learning new skills					
The hospital supports education systems such as E learning and in-house academic meetings					
Rewards and recognition systems for physicians					
Effective risk management systems such as lawsuit, complaint management					
The hospital has an effective electronic health system					
The hospital's internal communication system					

1 = Not at all important, 2 = Not very important, 3 = Somewhat important, 4 = Very important, 5 = Extremely important

3.3.2 The qualitative part

Interviews are useful to elicit detailed information concerning a person's ideas or rationale, or some point in depth. The interview offers a complete picture of what happened and why. For this reason, rich data can be obtained from interviews using open-ended questions. After gathering all the data from the questionnaire, the interview questions were set to explore for more detailed information. Each interview lasted 30 minutes. During the interview, probing techniques were used to gather more information using why and how questions. Twelve physicians were interviewed who worked both full-time and part-time at seven private hospitals in Bangkok.

Interview Questions

1. Why did you apply for a job with this hospital?
2. What keeps you at this hospital?
3. Can you share your impressions toward the hospital during the last two years?
4. From the survey results, I found some significant findings and I want to explore these topics more in detail, could you please give your opinion on these questions.

- Most of the doctors prefer to work at a hospital which has multiple specialties.

Do you agree with that and why?

- Doctors want to work with autonomy. How do you define this term?

- Do you agree that the hospital management should value your ideas?

What do you want from them?

- Is the work schedule important for you? If yes, How/Why?
- What about physician relationships, what is the effect of relationships to your engagement?
- How do you regard the effective of nurses to your engagement?
- What do you think about the risk management system in the hospital?

What do you think about? Is it important? Why?

- The reputation of the hospital
- The hospital has got an accreditation from the international quality institute, is that important?
- The rewards and recognition systems for physicians

5. Could you please suggest additional recommendations to the hospital executives that would increase the engagement of physicians?

3.4 Data Analysis

Two types of data analysis as descriptive statistics and coding analysis were applied to the information from the questionnaire survey and interviews.

3.4.1 Descriptive statistics

These can explain the elemental characteristics of collected data. They present an understandable summary about samples and measures. Percentage and means were used to present quantitative findings from the questionnaire.

3.4.2 Coding analysis

Coding is the process of organizing data. It is a systematic way to shorten a broader set of data into smaller units even if categories and concepts are created. Data in the groups were summarized, synthesized and linked. Verbal data were converted to variable categories and made more concise.

CHAPTER IV

DATA ANALYSIS

Data from both the questionnaire and the interviews were analyzed and diagrams and tables were presented. Data were collected by sending questionnaires to 152 physicians who worked in private hospitals in Bangkok. Twelve full-time and part-time physicians were selected for interview on specific topics.

4.1 Finding from the questionnaire and discussion

The questionnaire was separated into three parts. Statistical results were presented as tables and diagrams.

4.1.1 Demographic characteristics

Demographic characteristics were presented as gender, current working condition, medical specialty, age and work experience in private hospitals in Bangkok. The samples were 152 physicians as 74 males (48.68%) and 78 females (51.32%). Mean age was 40 years old. Over 64% worked only in private hospitals. The participants worked in different kinds of medical specialties. The mean length of work experience in private hospitals was 9 years (Tables 4.1 and 4.2).

Table 4.1 Demographic characteristics of participants classified by gender, current working condition and medical specialty

Variable	Number	Percentage
Gender		
Male	74	48.68
Female	78	51.32
Current working condition		
Private hospital	98	64.47
Both public and private hospital	54	35.53

Table 4.1 Demographic characteristics of participants classified by gender, current working condition and medical specialty (cont.)

Variable	Number	Percentage
Medical specialty		
Anesthesiology	6	3.95
Dermatology	5	3.29
Emergency Medicine	6	3.95
General Practitioner	10	6.58
Medicine	36	23.68
Obstetrics and Gynecology	18	11.80
Ophthalmology	5	3.29
Orthopedic	13	8.55
Otolaryngology	5	3.29
Pediatric	20	13.16
Radiology	4	2.63
Surgery	17	11.18
Other	7	4.16

Table 4.2 Demographic characteristics of participants classified by age and work experience in private hospitals

Variable	Mean	SD
Age (years)	40.67	7.48
Work experience in private hospital (years)	9.05	6.51

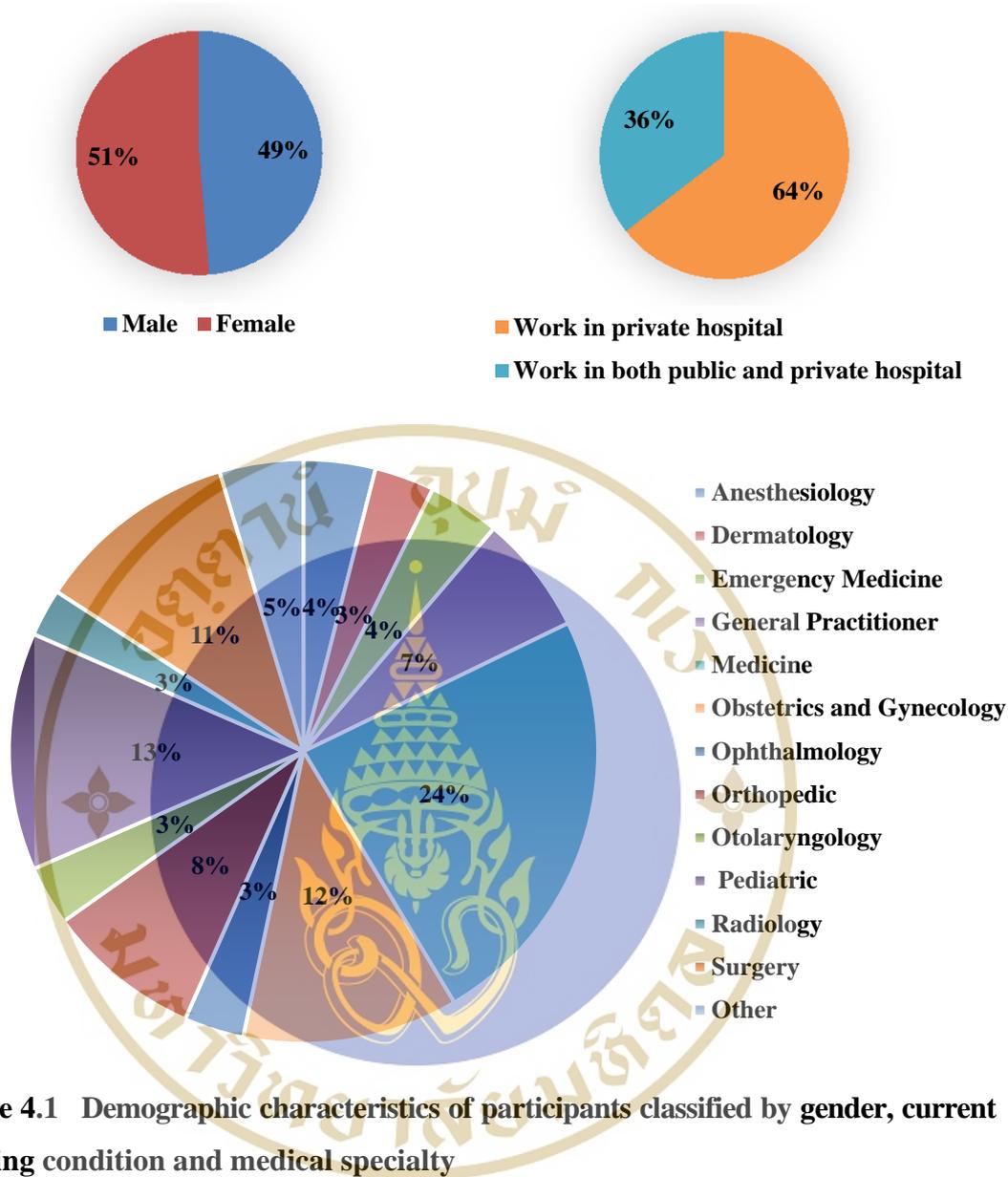


Figure 4.1 Demographic characteristics of participants classified by gender, current working condition and medical specialty

4.1.2 Factors affecting the level of physician engagement at private hospitals in Bangkok

Mean and standard deviation results from the questionnaire are shown in Table 4.3.

Table 4.3 The importance level of engagement factors for physicians who worked in private hospitals in Bangkok

The importance of engagement factors	Mean	SD
The reputation of the hospital	3.24	1.42
The location of the hospital	3.79	1.32
The quality accreditation of the hospital such as JCI, HA	2.90	1.53
The hospital's executive team	3.61	1.34
The hospital's strategic plan and direction	3.61	1.39
The overall hospital environment (cleanliness, decoration)	3.88	1.20
The hospital conducts business in an ethical manner	4.18	0.81
The hospital system serves physician autonomy and professionalism	4.22	0.73
The hospital values your opinions and ideas	4.13	0.87
The hospital provides multi-specialty services	4.26	0.84
The flexibility of the work schedule	4.14	0.92
The working relationships among the physicians in the hospital	4.13	0.92
The effectiveness of nurses and nurse assistants	4.13	1.09
The effectiveness of pharmacists	3.59	1.34
The effectiveness of other clinical support such as Rehabilitation, Radiology staff	3.61	1.39
The non-clinical support department or back office such as marketing, interpreter, insurance, cashier	3.30	1.45
The hospital has new medical technology/equipment/innovations	3.76	1.26
The number of patients	3.94	1.10
The income (Doctor fee)	4.03	1.01
The benefits from the hospital. For example; health benefits, Doctor's lounge.	3.60	1.22
The opportunities to develop your clinical skills/learning new skills	3.61	1.37
The hospital supports education systems such as E learning and in-house academic meetings	3.32	1.47
The rewards and recognition system for physicians	3.34	1.52

Table 4.3 The importance level of engagement factors for physicians who worked in private hospitals in Bangkok (cont.)

The importance of engagement factors	Mean	SD
The effective risk management system such as lawsuit, complaint management	4.12	0.93
The hospital has an effective electronic health system	3.41	1.46
The hospital internal communication system	3.88	1.25

No significant differences were detected in the scores between male and female physicians. Comparison between part-time and full-time physicians found that there were some significant differences (Table 4.4).

Table 4.4 Comparison of full-time vs part-time physicians; the importance of engagement factors

The importance of engagement factors	Full-time		Part-time		t-test	Sig.
	Mean	SD	Mean	SD		
The reputation of the hospital	3.39	1.36	2.98	1.51	1.694	.090
The location of the hospital	4.00	1.25	3.41	1.35	2.714	.007*
The quality accreditation of the hospital such as JCI, HA	3.11	1.48	2.52	1.58	2.316	.022*
The hospital's executive team	3.83	1.18	3.22	1.51	2.538	.013*
The hospital's strategic plan and direction	3.92	1.20	3.04	1.54	3.910	.000*
The overall hospital environment (cleanliness, decoration)	4.03	1.11	3.61	1.31	1.990	.049*
The hospital conducts business in an ethical manner	4.23	0.80	4.09	0.83	1.037	.302
The hospital system serves physician autonomy and professionalism	4.31	0.69	4.07	0.77	1.892	.060
The hospital values your opinions and ideas	4.23	0.83	3.93	0.91	2.115	.036*
The hospital provides multi-specialty services	4.32	0.83	4.15	0.83	1.262	.209
The flexibility of the work schedule	4.18	0.83	4.07	0.83	0.704	.482
The working relationships among the physicians in the hospital	4.20	0.91	3.98	0.92	1.439	.152
The effectiveness of nurses and nurse assistants	4.07	1.06	4.24	1.15	-.916	.361

Table 4.4 Comparison of full-time vs part-time physicians; the importance of engagement factors (cont.)

The importance of engagement factors	Full-time		Part-time		t-test	Sig.
	Mean	SD	Mean	SD		
The effectiveness of pharmacists	3.76	1.32	3.30	1.33	2.043	.043*
The effectiveness of other clinical support such as Rehabilitation, Radiology staff	3.87	1.24	3.15	1.53	3.139	.002*
The non-clinical support department or back office such as marketing, interpreter, insurance, cashier	3.55	1.39	2.85	1.45	2.922	.004*
The hospital has new medical technology/equipment/innovations	3.81	1.21	3.67	1.35	0.700	.485
The number of patients	3.91	1.06	4.00	1.12	-.492	.624
The income (Doctor fee)	4.05	1.04	3.98	0.96	0.405	.686
The benefits from the hospital. For example; health benefits, Doctor's lounge	3.70	1.14	3.41	1.35	1.434	.154
The opportunities to develop your clinical skills/learning new skills	3.98	1.14	2.93	1.50	4.490	.000*
The hospital supports education systems such as E learning and in-house academic meetings	3.78	1.29	2.48	1.42	5.707	.000*
Rewards and recognition systems for physicians	3.67	1.41	2.72	1.52	3.865	.000*
Effective risk management systems such as lawsuit, complaint management	4.20	0.90	3.96	0.99	1.529	.128
The hospital has an effective electronic health system	3.63	1.40	3.00	1.50	2.602	.010*
The hospital's internal communication system	3.99	1.22	3.67	1.29	1.530	.128

* Correlation is significant at the 0.05 level (2-tailed).

Both full-time and part-time physicians paid attention to multi-specialty services, autonomy, organizations which conducted business in an ethical manner, flexible work hours, risk management systems, and the effectiveness of nurses. Nurses' abilities were regarded as very important, especially by part-time physicians. Full-time physicians gave higher scores on the hospital executive team, the strategy, listening to their comments, opportunities to learn and self-development, and rewards and recognition compared to

part-time physicians. The topics that were considered important by both full-time and part-time physicians are listed in Tables 4.5 and 4.6.

Table 4.5 The top five important factors influencing full-time physician engagement

Full-time physicians	Mean
1 The hospital provides multi-specialty services	4.32
2 The hospital system serves physician autonomy and professionalism	4.31
3 The hospital conducts business in an ethical manner	4.23
4 The hospital values the physicians' opinions and ideas	4.23
5 The working relationships among the physicians in the hospital	4.20

Table 4.6 The top five important factors influencing part-time physician engagement

Part-time physicians	Mean
1 The effectiveness of nurses and nurse assistants	4.24
2 The hospital provides multi-specialty services	4.15
3 The hospital conducts business in an ethical manner	4.09
4 The hospital system serves physician autonomy and professionalism	4.07
5 The flexibility of the work schedule	4.07

4.1.3 Comments from physicians

Results indicated that the physicians wanted a highly competent team with good relationships. Collaborative work with other physicians and other professionals as well as nurses was important. The hospital executive team, especially the chief medical officer, should have a high level of management skill. The physicians felt that a good management team could help them in a critical situation. The work environment and health welfare were also regarded as important by some physicians.

4.1.4 Discussion

The information obtained from the surveys was drawn from a variety of fields which were considered to be reliable. Nine years working in private hospitals was also long enough to understand all the systems and provide useful information. Quantitative

data showed no significant difference between male and female physicians in terms of engagement. It is possible that physicians' manners between male and female are similar. Social changes in lifestyle now see women out working while men take care of the family, and daily lifestyles of men and women have also become similar.

Full-time and part-time physicians had many differences including the time spent with patients, especially in patients. Part-time physicians were not always in the hospital and only visited patients occasionally; they felt less a part of the hospital than full-time physicians. Part-time physicians always attended learning and development courses at government hospitals, especially medical schools. Therefore, they viewed these factors differently.

All physicians were trained in ethics. Physicians have high values regarding ethics so hospitals that demonstrate a fair business can attract physician engagement. Physician autonomy is important for physicians because they are professionals with specialized learning from medical school. Most physicians are taught to be clinical leaders with authority and autonomy to decide on patient care based on professional standards. Hospital operational processes should help physicians to take care of patients. Nowadays, specialized medical educations are focusing on more in-depth information and physicians are confident to treat specific diseases in which they specialize. However, they have less confidence to treat diseases in which they have no specialized knowledge. The number of medical lawsuits is also increasing and physicians have to be more careful when treating patients. Having multiple specialists for counseling will make physicians feel comfortable and the treatment of patients will improve.

Full-time physicians are concerned more about how their coworkers value their ideas. Physicians are most knowledgeable about caring for patients, so they would like to opine beneficial suggestions. The relationship between physicians is very important in private hospitals because one physician cannot treat all the diseases and teamwork is essential. Good relationships between physicians can create easy communication and improve the final outcome of treatment. Good work relationships in the organization will cause physicians happiness and encourage engagement.

Part-time physicians spend less time with patients and require nurses to assist and coordinate with patient care. Therefore, if nurses can work effectively, part-time physicians will have more confidence and be comfortable to work in that hospital.

Part-time physicians also work in medical schools and government hospitals with many responsibilities; they prefer to choose working hours that correspond to their lifestyles.

Topics that are less important for physicians are the quality accreditation of the hospital, hospitals' reputations and reward and recognition systems. Quality accreditation of the hospital is mainly done for the benefit of the patient; it does not affect organizational commitment. Hospitals' reputations do not greatly affect physicians as they focus on working systems. Reward and recognition systems also got a low score, possibly because physicians take pride in curing patients, they are not interested in earning rewards or recognition from the hospital. Receiving rewards and recognition may cause good feeling for physicians, but it does not affect their organizational commitment.

4.2 Findings from the interviews and discussion

Twelve physicians who worked in seven private hospitals were interviewed to discover factors affecting physician engagement in private hospitals. The 12 physicians worked both full-time and part-time in the different fields of pediatrician, medicine, obstetrician-gynecologist, surgeon, and dermatologist. Results from the interviews are detailed below:

Physicians worked in private hospitals for many reasons including income, the variety of patients as both Thais and foreigners, and more time to take care of patients. Patients in private hospitals also have no financial limitations regarding medical expenses and can afford the cost of treatment, therefore physicians can treat patients to high standards.

The interview results and analysis of 14 major topics are shown in Figure 4.2.



Figure 4.2 Factors influencing Physician engagement

4.2.1 Multi-specialty services

This statement achieved the highest scores in the survey, with the agreement of all 12 physicians. They thought that patients would receive better treatment if multi-specialty services were available. All physicians feel proud if they can treat patients effectively to improve their clinical condition.

Nowadays, the number of medical lawsuits is increasing dramatically. As a result, physicians do not want to treat diseases that are beyond their specialties, because if some incident or unexpected situation occurs, then they are responsible. Therefore, if the hospital can provide specialists in every field, physicians will feel more comfortable at work with the confidence to take care of patients.

Multidisciplinary team approaches are used in private hospitals; one patient will be attended by many specialists because the best outcome is the main concern of the physicians. According to their nature, physicians will not treat a patient if they are unsure of the diagnosis. If there is no specialist available, then the physician has to treat diseases that they are not familiar with and thus may cause unease. Therefore, having a specialist to consult is important and can keep the physician happy to work in the hospital for a long time.

4.2.2 Physician autonomy

Most physicians understand the term ‘Autonomy’, as meaning that physicians should provide the best patient treatment independent of judgments. All thought that it was very important for private hospitals not to intervene in the diagnosis or treatment processes if that treatment followed the standard. Moreover, physicians should be free to care for and treat their patients. However, all physicians realized that there are rules and regulations in each hospital which may differ from others. It is a physician’s responsibility to respect all rules. Furthermore, almost all physicians thought that it was acceptable for hospitals to have a process or system to check whether their work met professional standards. The important point was that the system or process should be transparent and fair. Private hospitals should be careful and always bear in mind that using business to intervene in physicians’ medical treatments will decrease their engagement.

“Private hospitals should have a system to monitor professional ethics and standards. In case a physician does something wrong, he or she should be punished appropriately. This will reflect the organization’s leadership image in terms of ethics and make physicians work better.” (Obstetrician and Gynecologist)

Most previous studies found that physician autonomy was a key factor for engagement (Conrad, 2005; Qian, 2008; Duffy, 2006; Shanafelt, 2008). The lack of freedom to make clinical decisions can cause dissatisfaction (Philips, 2002). Private hospitals are businesses which rely on monetary income and costs may affect patient treatment processes. If that situation occurs, it will adversely affect the quality of the treatment and make the physicians feel uncomfortable. Doctors were taught to help patients; they will always choose the best for their patients according to professional standards. If they have to lower standards because of a lack of financial resources this will also create disengagement.

4.2.3 Flexible working hours

Work-life balance is very important for physicians. This is one reason why they choose to work in private hospitals because they think that they can manage their time better and take care of their families. Part-time physicians who work in government hospitals have a fixed schedule; therefore, they prefer to choose their working hours in

private hospitals. Conrad (2005) and Shanafelt (2008) also noted that work-life balance was a high motivation factor for physicians.

“Physicians think that working life is important. However, having time with family or personal free time for hobbies is also necessary.” (Internal Medicine)

Social lifestyles and changing generation outlooks cause people, including physicians, to pay more attention to work-life balance. Hard work without any time off is no longer the norm and physicians require more flexible working hours to participate in other activities.

4.2.4 Physicians’ opinions and ideas

All physicians thought that it was very important for the hospital management to value their ideas and listen to them, especially the full-time physicians. The main hospital business is to provide care and treatment for patients. Physicians know about diseases, patients and treatment plans. More than half of the physicians felt that private hospital management teams rarely listened to their opinions even though they were well-informed. Physicians prefer to work in hospitals as ‘partners’ not as employees and they should be given a chance to comment and discuss patients’ issues. The hospital management may not decide to accept their suggestions, but at least they have listened. This is very important.

“In my point of view, I think communication between management and physicians is very necessary. Although we have a different view, we should be open-minded and respect the decision from both parties, especially regarding issues that involve the patients.” (Pediatrician)

“I admit that the medical line of work is an independent profession with high self-confidence; however, I prefer not to work with organizations that do not respect and listen to my suggestions. I believe that most physicians are taught to be clinical leaders. Physicians should have the right to provide feedback to the hospital.” (Obstetrician and Gynecologist)

Most physicians have high self-confidence and are very knowledgeable regarding diagnostic and treatment processes. Physicians are close to patients; therefore, they know their thoughts, needs and feelings. Furthermore, physicians work in a field of continuous improvement as medical information and technologies are always updated.

To achieve the highest goal of treatment as a patient's recovery which is recorded as a successful case, physicians would like to participate in giving opinions or planning for patient care policies, specifically the full-time physicians. Part-time physicians have less ownership and regard this issue as less important.

4.2.5 Relationship among physicians

Relationships among physicians are important as hospitals are their second home, so working environment is also important. In addition, having good relationships at work affects patient care. Physicians can consult others for complicated cases and feel free to talk and work as a team. In cases of emergency, when one physician is not at the hospital, another can take their place. Part-time physicians in some fields think that it is not necessary to consult others; they do not rate this matter highly. However, in more complicated fields, they feel that cooperation with others is very important.

“The hospital is my second home, it is more than a workplace. The interpersonal relationship between physicians makes me work here because I feel happy to work.”
(Dermatologist)

Physicians are satisfied with good relationships among their colleagues (O'Leary, 2009). Relationships at work are important; it is a mandatory factor to create happiness and motivation while working. In the medical profession, knowledge and collaboration are both important for success. Physicians spend at least one-third of the day at work. Good relationships between physicians can build a good working environment which will affect their satisfaction and engagement.

4.2.6 Nursing abilities

Nursing abilities are very important because physicians have to leave their patients with nurses, especially part-time physicians. Therefore, hospitals with good nurses will make doctors feel confident and comfortable when relaying treatment instructions. On the contrary, without good nurses, physicians have to monitor everything themselves and this makes them more tired and stressed. The risk of prosecution also increases. However, what physicians require from nurses is not advanced medical knowledge, but only basic nursing care, understanding instructions and knowing when

they have to consult doctors. Nurses have to open their minds to learn. Most physicians are willing to teach nurses some specialized knowledge.

“I understand that to be a nurse in private hospitals requires less experience than in government hospitals. What I want is only basic nursing care and willingness to learn.” (Surgeon)

Six out of the 12 physicians said that in critical areas or specific services such as the intensive care unit, labor room and emergency room they wanted highly competent nurses because patients' lives were at risk. If physicians cannot trust the nurses they do not want to work in that organization.

Physicians are clinical leaders with nurses as part of a team that puts treatment plans into action. Nurses also possess the professional knowledge to take care of patients. Physicians need a reliable team to ensure that the treatment plans in place follow the standards. Work between physicians and nurses relies on high trust levels, so nursing abilities seriously affect patient outcome, especially for part-time physicians who cannot always come to visit their patients.

4.2.7 Risk management system

The number of medical lawsuits is increasing and risk management systems are very important, especially for private hospitals. Effective risk teams will enhance physician's trust. They will feel that they do not have to handle cases alone but have professional backup as support.

This factor is important because physicians are not taught to deal with risk, adverse events or complaints. If an incident occurs, physicians may not feel confident to solve the problem, and sometimes trying to solve the issue may cause more aggravation. Complaints or medical lawsuits are very serious from the physician's point of view. Having a specialist team to help, assist and solve these problems can make physicians feel comfortable, and result in more commitment and engagement with the organization.

4.2.8 Income

Undeniably, income is a major factor that attracts physicians to work in a private hospital; however, income does not have much impact on organizational engagement. A questionable payroll process for physicians can lead to disengagement.

4.2.9 Electronic health system

Three out of the 12 physicians agreed that using electronic health systems speeds up processes, decreases waiting time and reduces paper usage, but they did not feel that it affected their engagement. Besides, an unfriendly system can cause more complications and increase dissatisfaction.

Electronics health systems do not affect physician engagement because they are not core functions of a physician. The main responsibility of a physician is to treat the patient, so activities rarely associated with patient treatment are less likely to affect commitment to the organization. Generally, using IT systems is more beneficial to hospitals in terms of cost reduction and waiting time. However, if the system affects physicians' working processes through difficult operation or slowness, then this may cause rejection and physicians will not want to work in that hospital.

4.2.10 Rewards and recognition system

Physicians felt that rewards and recognition were good, especially for the person who received the award which can also give inspiration. However, those who did not win may wonder why. Most physicians have scientific thinking, therefore, any award system should be transparent, fair, and accountable. Rewards and recognition systems do not have much impact on engagement because most physicians take pride in the outcome of treatment and their acceptance by colleagues.

“I feel impressed that the hospital sees and recognizes my value. One day my critically ill patient who will not survive came back to me on the appointment day with a smile on his face. This made me feel happy.” (Internal Medicine)

For other professionals, rewards and recognition may influence engagement but for physicians, rewards and recognition are only an additional factors that make them feel proud; they do not affect organizational engagement.

4.2.11 Hospital's reputation

The hospital's reputation is also important because if the hospital has a good reputation this will increase patient numbers and of course affect physician's income. A good hospital reputation also makes physicians proud to tell people where they work. However, hospital reputation has little effect on the working environment. An interesting

point is that a hospital with a good reputation does not noticeably promote engagement, but if the hospital has a bad reputation, then disengagement will increase.

“Personally, I think that a hospital’s reputation may not have much effect on whether I work there. But if the hospital has a bad reputation, especially concerning ethics, I will resign because it may mean that the physicians who work there are also unethical.” (Orthopedics physician)

There are various opinions on this matter. Questionnaire results found that hospital reputation did not greatly affect engagement. Physicians who care about this issue may also think about income. A good hospital reputation is like a magnet drawing patients to use the hospital services. Most physicians will be more concerned about their own health rather than the environment; therefore, if a physician is working in a comfortable manner with sufficient income, time can be customized. Physicians often overlook other areas. One last interesting point was that at high reputation hospitals most patients also had high expectations. Some physicians felt more pressure as a result of this and did not want to work there.

4.2.12 Quality accreditation

Nine out of the 12 physicians felt that quality accreditation did not contribute to organizational engagement because the job of physicians is to take care of patients according to the standard. It did not matter whether quality accreditation was present or not. Quality accreditation might cause difficulty because paperwork increased. Two physicians felt that hospital accreditation was important as the more systematic working style helped physicians to operate happily and comfortably.

“To have a quality system in the hospital is good but it should be practical. Do not forget that taking care of patients is the primary task for both physicians and nurses. Sometimes we spend almost all our time doing paperwork and we have little left to take care of our patients, especially for physicians. The main task of being a physician is to treat patients.” (Pediatrician)

Surprisingly, physicians were not greatly concerned about this factor, because quality accreditation can increase patient safety and quality. In fact, good quality systems can reduce the risk and discrepancies that occur in patient treatment processes. However, the research results indicated that physicians did not feel that good quality systems

were any benefit, possibly because they did not participate or truly understand. Physicians who do their own quality activities feel more important.

4.2.13 Executive team and hospital strategy

This topic had more impact on full-time physicians as five out of six paid attention to the hospital executive team regarding vision and working processes, especially concerning ethics. Physicians understood that private hospital management was a business; however, because it involved patient care the hospital executive should operate by applying ethics and professional standards. Physicians believed that a good outcome of treatment can create a good reputation and gain revenue for the hospital.

Ten out of 12 physicians commented that internal communication was crucial, especially for physicians who treat patients. Mostly, private hospitals have only limited communication with physicians.

“Many times I come to work and do not know what changes the hospital has made. Sometimes I feel that I am an outsider and do not feel any engagement with the organization.” (Surgeon)

On the strategy issue, physicians thought that they should be aware of the hospital’s strategic plan or at least they should know what the hospital was going to do. Therefore, communication between the management team and physicians is very important.

Physicians are key success factors of the hospital and understanding and collaborating with the hospital management can increase hospital performance. Results showed that more communication was required between doctors and executive members. Less communication may indicate that the management considers physicians to have different ideas and high egos, or maybe they do not want physicians to get involved in hospital management. The outcome is that only important issues are communicated to the physicians.

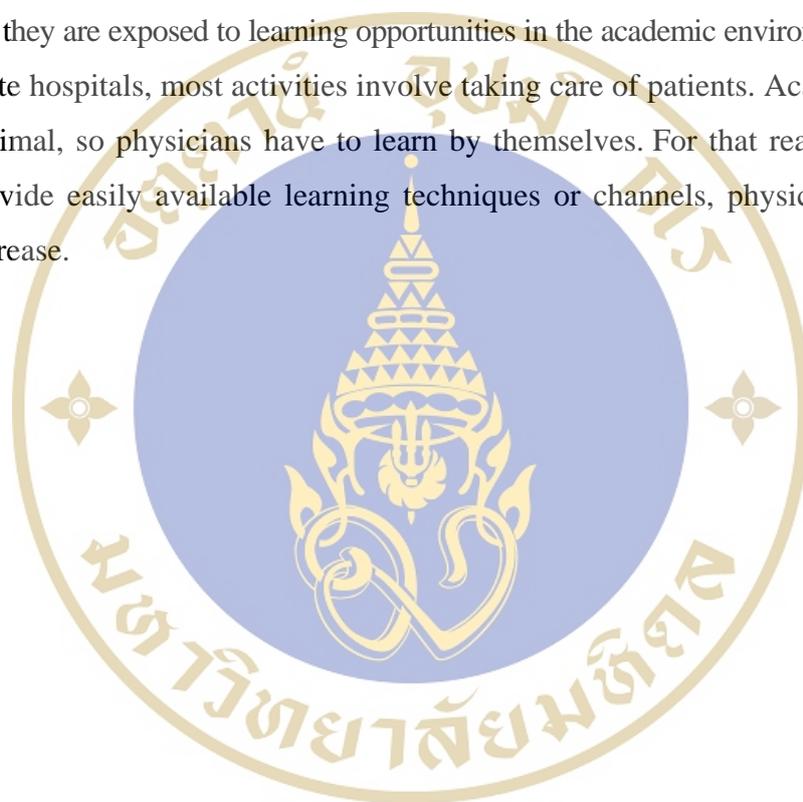
4.2.14 Learning and development

Medical professionals need to learn and update themselves continuously. Many part-time physicians work in medical schools and can continue their learning. Full-time physicians have few chances to learn. Private hospitals should offer knowledge

and skill development courses for physicians through a variety of channels. Learning can help physicians maintain high medical standards. Standard treatment practices are most effective with fewer complications.

“Human development is very important, not only for physicians but also for other staff and professionals in the hospital. Medical technology and knowledge are always changing, so I would choose to work with a hospital that focuses on its human assets.” (Obstetrician and Gynecologist)

This factor does not affect part-time physicians who work in medical schools because they are exposed to learning opportunities in the academic environment. However, in private hospitals, most activities involve taking care of patients. Academic activities are minimal, so physicians have to learn by themselves. For that reason, if hospitals can provide easily available learning techniques or channels, physician engagement will increase.



CHAPTER V

CONCLUSIONS AND RECOMMENDATIONS

This chapter summarizes the factors that affect physician engagement in private hospitals in Bangkok. Hopefully, this paper will be beneficial for executives of private hospitals to better understand physicians' reasonings and thoughts and enable organizations to implement suitable policies to increase physician engagement.

5.1 Conclusions

Many factors affect physician engagement with some differences between full-time and part-time doctors. The main factor to make engagement in hospitals more attractive is by providing multi-specialty services which can lead to a more confident and comfortable work environment and allow physicians to consult with other specialists. Physician autonomy also plays an important role, because physicians are experts with advanced knowledge in investigating and treating patients. Therefore, physicians should plan for patient treatment freely, without taking business aspects into consideration. Hospitals that operate good ethical procedures can attract more engagement, as physicians are molded to pay extra attention to ethics which are part of their intrinsic values. Good risk management systems also make physicians feel more confident in working in hospitals because a good system helps to solve problems and reduces the risk of hospital errors and medical lawsuits. Flexible working time also attracts physicians, because today people focus more on work-life balance. Physicians require time to participate in other activities apart from work such as taking care of families, playing sports or hobbies. Hospital executive teams and hospital policies greatly affect the work of full-time physicians, who prefer to work in hospitals where administrators have aligned visions. A hospital management team that listens to suggestions or comments also encourages engagement, because physicians are clinical leaders who work closely with patients and understand their requirements while keeping abreast of medical knowledge and new treatment

trends. Thus, physicians prefer to participate in healthcare delivery processes. Rewards and recognition systems enhance physicians' inspiration to work; however, the system should be transparent. Learning and improvement opportunities also influence full-time physician engagement because medical professionals need to be constantly learning. Nursing abilities affect part-time physician engagement more than full-time physicians because part-time physicians have less time with patients and trustworthy nurses can help in taking care of their patients.

5.2 Recommendations

Physician engagement directly affects the success of hospitals, and hospital management teams should pay attention and try to understand all the factors that influence the employment of doctors. This is an important issue for management. The topics listed below increase physician engagement.

Ethics: Healthcare is a business involving patient treatment and ethics is most important in this field. Leadership should pay serious attention to this issue and show its value in the organization. Most physicians consider ethics to have intrinsic value and organizations should reflect this. Using benefits and business to intervene in medical treatment will create a bad image for the organization and negatively affect physician engagement.

Physician autonomy: Physicians must be free to plan treatment according to the standard without any business aspects involved. Nevertheless, hospitals should create a transparent system to monitor ethics and professional standards of all physicians. This transparent system can improve physician working environment, create a clear image of the position of the hospital management team in terms of ethics, lessen bad reputations and lawsuits, and reduce medical errors. There are several ways to control and monitor the work of physicians such as giving privileges, feedback from recorded clinical data, suggestions from quality perspectives or evaluations as appropriate.

Communication: Communication is an important issue that needs to be addressed. Hospital executive teams should treat physicians as partners, not employees. Listening to physicians' concerns and giving them a chance to participate in policies related to treatment processes can make doctors feel more recognized and engaged

with the organization. Communication with physicians is also essential. The hospital should provide a variety of communication channels to create clear understanding regarding all policies, and working instructions to eliminate misunderstandings. Physicians appreciate positive responses and they are concerned about the loss of respect among colleagues. Information communicated to physicians should be accurate. Physicians have scientific thinking, and unclear or incorrect information will reduce trust especially regarding feedback. One additional suggestion was made that physicians want all other staff to treat them with respect. Communication, especially for important issues or problems related to professional standards should be through acceptable people only, without criticism from other professions. Communication with physicians can be both official and unofficial. Physicians should be given the chance to discuss issues with top management to recognize the management approach of the organization.

Multi-specialty services are also important and the hospital should pay attention to these. Hospitals should provide specialized physicians for medical advice. Physicians expect private hospitals, especially some huge facilities, to have fully specialized physicians in every field. It is not necessary to have full-time specialists; part-timers or consultants are acceptable. Good consultants involved in patient care processes result in better treatment outcomes and physicians will have more confidence to work in these organizations.

Physician relationship: Relationship between coworkers is important to enhance engagement, especially for full-time physicians. Therefore, the working system should facilitate collaboration and avoid conflicts. Hospital management should focus on creating activities to promote frequent interpersonal relationships to make physicians work better together. A good medical society increases communication efficiency and conveys positive attitudes among medical team members.

Rewards and Recognition system: Reward and recognition systems have a great impact on full-time physicians; however, the system should be systematic, fair and transparent. Awards should be proven and measurable and should not involve any emotion or feelings. A good system should explain what the prize is for and where it comes from. If the rewards and recognition system is not clearly explained it may make good physicians feel dissatisfied. If possible, this system should be linked with the work of physicians, such as taking care of patients, as this will make physicians feel proud.

Learning and Development: The hospital should offer a wide-ranging and easily accessible learning and development system. Physicians have to continually update themselves, so providing learning opportunities is very important, especially in private hospitals. Opportunities to continue academic study and in-house academic activities of each field through other media such as International Journals or textbooks is a crucial service. Providing scholarships, visits abroad or other self-development opportunities, in addition to the medical profession for interested physicians can build more engagement. Providing training is considered as a reward for physicians. The hospital should also arrange learning and development programs for all hospital staff, especially nurses who are vital components, to assist the work of physicians.

Quality development and risk management systems: Some groups of physicians do not see any importance in organization quality development. This may result from reduced collaboration. Management teams should communicate and present the benefits that the physicians will receive from quality development. Hospital executives should create a better understanding regarding the benefits of quality improvement and explain this so that physicians can cooperate more at work and increase the chance of success through quality improvement. High-quality hospitals are factors that will influence engagement if the physicians are aware of the benefits. Hospitals should have a standard and effective risk management system to assist all physicians. The risk management administrator must be a knowledgeable person who works fast and can protect physicians. However, risk management systems should encourage quality development and organizations should avoid blame culture.

Work schedule: Work-life balance is now more important. Hospitals should manage physicians' working schedules with concern for their daily activities and daily living. Physicians will then be happy to work in hospitals for a long period of time. Part-time physicians who work in many hospitals will prefer to choose convenient working hours. However, the choice may be limited by size, number of hospital examination rooms and policy.

The factors affecting physician engagement are quite specific and different from other professions. If the hospital management team understands and applies these factors, then this will help to increase physician engagement and hospital effectiveness.

5.3 Limitations and suggestions for future research

This study was conducted on a group of twelve physicians who worked in 10 private hospitals in Bangkok and results may reveal only a specific point of view. Interview questions were selected from factors that had high and low scores which may lead to incompleteness in other areas. Furthermore, no comparison was made between specialties that may have different opinions.

For future research, the population could be expanded to cover all private hospitals in Thailand. The interview questions should also be broadened to other points and comparisons made between specialties to achieve enhanced in-depth information.



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