In reference to staffing at urgent care centers, this paper will provide a general overview of the typical urgent care center wherein all urgent care centers have at least one physician with half of these physicians specializing in family medicine, while two-third are emergency medicine physicians and one-third are internal medicine practitioners (Boyle, 2012). Depending on the size of the urgent care center, the location, and the volume of patients, the urgent care center may also employ an orthopedic surgeon, but this only represents a small fraction of urgent care centers. Therefore, the overwhelming majority of urgent care medical centers are staffed with at least one full-time physician and several others medical staff like nurses and technicians (Boyle, 2012). Nevertheless, staffing models at any urgent care clinic will be contingent upon the specific needs faced by the individual urgent care clinic. If the urgent care clinic is small and located in a rural suburb setting, it would be nonsensical to staff multiple full-time physicians as one full-time physician would be sufficed (Solnik, 2014).

Larger clinics located in more populated areas will need to employ multiple full-time physicians because these clinics will be busier. Part-time physicians should also be employed as these physicians can pick up the extra slack when the full-time physicians are unavailable for any reason. These physicians have other positions in hospitals or private practices in the area but “moonlight” at urgent care clinics (Solnik, 2014). To fill foreseeable gaps that occur at any organization as well as to remain open 24 hours and on weekends, the urgent care clinic may also employ locum physician’s to staff their facilities. This is also needed during the busiest business quarters such as a flu season.

The majority of urgent care centers rely heavily upon a staffing model that utilizes the regular staffing of advanced practitioners such as nurse practitioners and physician assistants (Weinick, Bristol & DesRoches, 2009). These healthcare providers are similar to doctors and can work on a locum tenens basis because of their credentials. Some states allow nurse practitioners and physician assistants to possess the autonomy to work without a physician present, and as a result of the increase in urgent care centers over the last three decades, locum tenens such as PAs and NPs have become more common. It has been found that proximately sixty percentages of urgent care clinics use either nurse practitioners or physician assistants, and for urgent care centers that focus on retail medicine, physician assistants and nurse practitioners represent the majority healthcare provider and deliver the majority of care (Weinick, Bristol & DesRoches, 2009).

Staffing is predicated upon ensuring that the urgent care center can meet several necessary requirements. These include the ability to provide quick care in regard to ensuring that patients are seen faster than they would be seen an emergency room as this is the reason that people choose urgent care centers, for their convenience (Ayana, 2012). In addition, the staffing plan must achieve the goals that can ensure that patient needs are met. Therefore, the staffing plan can only keep the quality of care and patient satisfaction high with appropriate staffing levels met, qualified practitioners staffed, and flexibility in regard to scheduling that allows staff the ability to work in unison with staffing resources.

The plan must be in accordance to with individual clinics specific needs wherein numbers of physician’s specialists are needed to cover all patients’ visits with or without predominant treatment disorders that are included in the plan with variables such as ramped up need during cold and flu seasons (Ayana, 2012). Ensuring adequate staffing is a key for urgent care centers as this allows the patient to remain competitive. The only way that the center can provide quality care is to ensure that high quality healthcare professionals are recruited. The urgent care clinic must provide the most optimal benefits and work with an environment that will enable them to recruit nationally to find the most qualified candidates. It is understood that patients choose to go to urgent care clinics instead of an emergency room for short wait times, cost savings and convenience, and extended hours near their homes, but without the appropriate staffing, the clinic will fail to meet patient expectations (Solnik, 2014).

It’s essential for urgent care medical practice centers to keep their trained employees. Because, the main objective of employee retention is to keep it open and keep the running urgent care. According to health system executives, the effect of staffing on the future of urgent cares practice and quality will be very important (Boyle, 2012). Hospitals will continue to incorporate urgent care centers into their business portfolio, which will increase the accessibility to the most qualified practitioners. The ability to create new revenue will continue to drive urgent care centers and allow for hospitals to create new revenue, increase annual savings, and bring in new patients (Weinick, Bristol & DesRoches, 2009). Therefore, staffing levels will be met as a result because the hospitals have more resources, higher staff levels, and other variables that will allow for staffing in future urgent care clinics to be predicated upon better staffing levels to meet the increasing demand of these clinics.

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