



Letter to the Editor

Evaluation of locum tenens activity by young anaesthesiologists and intensivists: A national survey



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In France, young anaesthesiologists and intensivists (YAI) have the possibility to practice locums in private structures after validation of 5 residency semesters [1]. The objective was to evaluate the prevalence, type of practice, motivations and knowledge on legal and fiscal aspects of locums among YAIs in France. We have built a national epidemiologic study based on an online questionnaire addressed to residents and fellows in anaesthesiology and intensive care available ($n = 1960$) on the French Association of Young Anaesthesiologists and Intensivists' (AJAR) website (www.ajar-online.fr).

Five hundred YAIs (25.5%) answered the questionnaire between February and March 2015, representing 91.5% residents and 8.5% fellows with a mean age of 27 ± 2.3 years. Two hundred fifty six participants (51%) had validated five semesters, among which 165 (68%) had already practiced locums (Table 1). They had an average number of locums of $1.8 (\pm 1.29)$ days per month. The main motivations were financial for 89 (54%) of them but also training for 61 (37%) respondents (Fig. 1). Indeed, among the 165 YAIs who had

already done locums, 158 (96%) judged this practice useful in their training, 125 (75%) had subscribed to a specific insurance, and 107 (65%) did not systematically sign a contract with the replaced doctor.

The current French law for locum tenens activity has ruled the replacement conditions which are strictly regulated [2]. The validation of five semesters of residency of which at least three in anaesthesiology department and one in an intensive care unit, the obtaining of a replacement license, a replacement authorisation issued by the National Council of the Order doctors, an insurance mandatory and writing a replacement contract with the doctor replaced [1,3,4]. In fact, the offers of locum tenens are more numerous with the increase in care needs related to the aging of the population [5,6]. Our study shows that the practice of replacement as a free or salaried employee is a potential part of a precarious legal framework and is not always declared as such to the administration of the hospital on which the students depend without a contract with the replaced doctor. Yet, these real risks are still difficult to quantify and to determine.

Locums are frequently practiced by YAIs who consider that this activity is greatly beneficial financially but also in their training, complementary to hospital rotations. The growing attraction to this practice must be accompanied by information on the financial and legal aspects inherent to this activity.

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Disclosure of interest

The authors declare that they have no competing interest.

Table 1

Number of respondents per promotion, number and percentage of respondents wishing to replace (≤ 5 th semester) and replacing (> 5 th semester) by promotion.

	Respondents, <i>n</i>	Wish to do locums, <i>n</i> (%)	Have already done locums, <i>n</i> (%)
1st semester	99	92 (93%)	
2nd semester	1	1 (100%)	
3rd semester	72	67 (93%)	
4th semester	5	5 (100%)	
5th semester	79	76 (97%)	
6th semester	9		3 (33%)
7th semester	89		47 (52%)
8th semester	18		15 (83%)
9th semester	59		45 (76%)
10th semester	19		16 (84%)
CCA/assistants	50		38 (76%)
Total	500	241 (95%)	164 (68%)

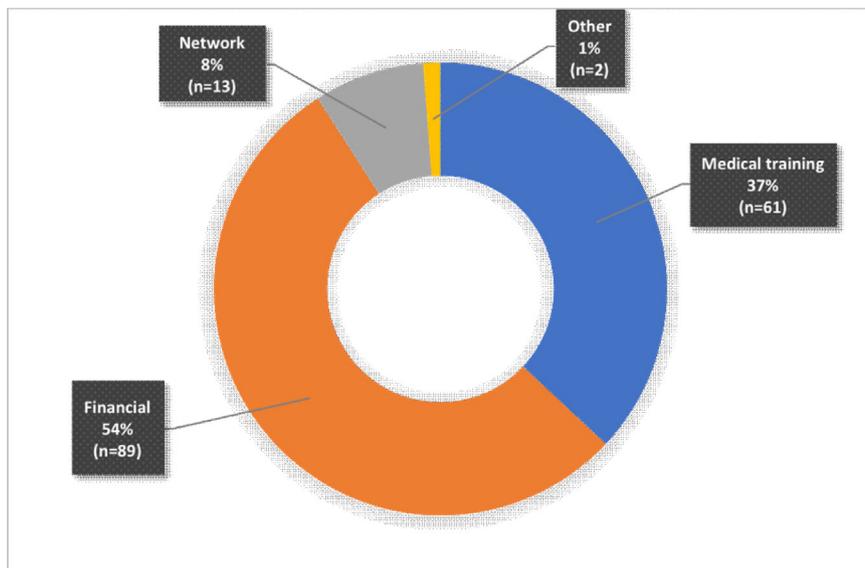


Fig. 1. Main motivation for making replacements (n = 165).

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