



## CORRESPONDENCE

# Improving workplace culture by increasing financial transparency

© The Author(s), under exclusive licence to the International Pediatric Research Foundation, Inc 2022

*Pediatric Research* (2022) 92:1492–1493; <https://doi.org/10.1038/s41390-022-02033-8>

“How would you describe the workplace culture of this hospital?” Although this question may be asked in a variety of ways, the topic of workplace culture inevitably arises during the interview process—and for good reason. Culture in the workplace is an important determinant of employee happiness and success. The goal of the applicant during the interview process is to answer the question: “Is this the best place for me?” While there are many intangibles that influence this answer, there are also important tangible factors that can help candidates decide. For faculty entering academic medicine, some of these tangibles include starting salary, protected time, bonus opportunities, and parental leave. For female physicians, in particular, this list also includes clinical accommodations to support nursing mothers, rates of promotion compared to male colleagues, percentage of women in leadership positions, and the presence of an appointed officer for diversity, equality and inclusion involved in search, hiring, and promotion processes. Lactation policies are of particular importance in pediatrics, given that the pediatric workforce has shifted in its demographic composition to predominantly women in their childbearing ages<sup>1</sup>. These metrics and policies are much less frequently discussed during the hiring process but are an important reflection of workplace culture.

Perhaps one of the best ways to evaluate workplace culture, specifically the emphasis an institution places on gender equity, is through salary compensation. Historically, salaries in academic medicine have had a great deal of variation across the United States and even within institutions, often to the detriment of female physicians<sup>2</sup>. Women are less likely to negotiate salaries and thus, because “they didn’t ask,” are more likely to start at a lower pay grade than their male counterparts<sup>3</sup>. A lower starting salary is particularly impactful for female pediatricians, as pediatrics is already the lowest paying medical specialty<sup>4,5</sup>. In addition, many applicants do not feel comfortable asking about benefits, such as paid family medical leave (PFML), for fear of being viewed as less committed or not a hard worker. However, adequate PFML contributes to the mental health of both new mothers and fathers, and it is an important component of compensation that speaks to an institution’s concern for the wellbeing of its employees<sup>6</sup>.

One way to address gender pay disparity is to create a regularly updated website with job postings that include starting salary, bonus structure, benefits, lactation policies, and start-up packages so that all applicants have access to this information and can participate in meaningful negotiation. For this to happen, we need the help of important stakeholders in the health care system and academic institutions to advocate for workplace transparency. Workplace transparency, particularly financial transparency, has been shown to foster a better work environment and improve employee satisfaction, which ultimately benefits institutions as

well by improving retention and decreasing costs of recruitment and hiring<sup>7</sup>.

Implementing a publicly available website that provides academic institutional data regarding starting salaries, benefits, and start-up packages would be an important step toward workplace transparency and providing a more equitable negotiation field. The COVID-19 pandemic has dramatically highlighted the need for increased flexibility in the workplace and measures to support women in academic medicine with children<sup>8</sup>. The current physician workforce is more cognizant and concerned about work–life balance and values tangibly impactful benefits, including PMFL<sup>9,10</sup>. Increased accessibility to institutional data on compensation, including benefits and start-up packages, and lactation accommodations would allow for easier comparison and identification of best practices that would ultimately benefit employees. The investment in a website as described here has the potential to lead to large gains in workplace retention, productivity, and employee wellbeing.

Given the time, costs, and effort required to recruit a physician, it is in the shared interest of both employers and applicants to have institutions provide as much detail and be fully transparent regarding benefits to ensure that the job will meet the financial needs of the applicant. In addition, workplace transparency increases competition amongst employers to provide better family and health-related benefits that ultimately contribute to employee wellness<sup>11</sup>. On a more individual level, knowledge of these important tangible factors will help applicants have a better sense of institutional culture and develop a more informed answer to the important question, “Is this the right job for me?”

Katherine Bline<sup>1</sup>✉ and Christiane E. L. Dammann<sup>2</sup>

<sup>1</sup>Division of Critical Care Medicine, Department of Pediatrics, Nationwide Children’s Hospital, Ohio State University College of Medicine, Columbus, OH, USA. <sup>2</sup>Division of Newborn Medicine, Department of Pediatrics, Tufts Children’s Hospital, Tufts University School of Medicine, Boston, MA, USA.

✉email: [Katherine.Bline@nationwidechildrens.org](mailto:Katherine.Bline@nationwidechildrens.org)

## REFERENCES

1. Spector, N. D. et al. Gender and generational influences on the pediatric workforce and practice. *Pediatrics* **133**, 1112–1121 (2014).
2. A closer look at the gender pay gap for physicians. *University of Minnesota*. Accessed 4 Aug 2021. <https://twin-cities.umn.edu/news-events/closer-look-gender-pay-gap-physicians>
3. Why women don’t negotiate. *Salary.com*. Accessed 4 Aug 2021. <https://www.salary.com/chronicles/why-women-don-t-negotiate/>
4. Highest and lowest physician salaries by specialty. *Healthgrades*. 2020. Accessed 17 Dec 2021. <https://www.healthgrades.com/pro/highest-and-lowest-physician-salaries-by-specialty>
5. Andrea Parent. Physician compensation still rising in primary care and fast-growing urgent care sector, but flattening is expected. *NEJM CareerCenter*

Received: 14 February 2022 Revised: 18 February 2022 Accepted: 10 March 2022  
 Published online: 30 March 2022

- Resources. 2021. Accessed 17 Dec 2021. <https://resources.nejmcareercenter.org/article/physician-compensation-still-rising-in-primary-care-and-fast-growing-urgent-care-sector-but-flattening-is-expected/>
6. Burtle, A. & Bezruchka, S. Population health and paid parental leave: what the United States can learn from two decades of research. *Healthcare* **4**, 30 (2016).
  7. Lambert, E. G., Lynne Hogan, N. & Barton, S. M. The impact of job satisfaction on turnover intent: a test of a structural measurement model using a national sample of workers. *Soc. Sci. J.* **38**, 233–250 (2001).
  8. Matulevicius, S. A., Kho, K. A., Reisch, J. & Yin, H. Academic medicine faculty perceptions of work-life balance before and since the COVID-19 pandemic. *JAMA Netw. Open* **4**, e2113539 (2021).
  9. Ellevest. Millennials want a healthy work-life balance. Here's what bosses can do. *Forbes*. Accessed 4 Aug 2021. <https://www.forbes.com/sites/ellevest/2020/07/23/millennials-want-a-healthy-work-life-balance-heres-what-bosses-can-do/>
  10. Arnautovic, T. I. & Dammann, C. E. L. The neonatal perspective of paid family medical leave (PFML). *J. Perinatol.* **22**, 216–225 (2022).

11. Rosenfeld, J. & Denice, P. The power of transparency: evidence from a British workplace survey. *Am. Socio. Rev.* **80**, 1045–1068 (2015).

### COMPETING INTERESTS

The authors declare no competing interests.

### ADDITIONAL INFORMATION

**Correspondence** and requests for materials should be addressed to Katherine Bline.

**Reprints and permission information** is available at <http://www.nature.com/reprints>

**Publisher's note** Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.