



# CVDFP PHYSICIAN SURVEY COMPARISONS

Years 2011, 2015, 2022 (longitudinal and non-  
longitudinal physicians)



Sheri Fielding  
CVDFP Project Manager

## Contents

Introduction .....	4
Completion rate .....	4
Demographics .....	4
Physician Demographics .....	4
Age .....	4
Years in Practice .....	5
Medical School Attended .....	5
Retirement .....	6
Physician Full Time Equivalency .....	6
Completion of San'yas Anti-Racism Indigenous Cultural Safety Training Program .....	7
Patient Demographics .....	7
Estimated Patient Panel Size .....	7
How Quickly a Patient can Book a Routine Appointment (Business Days) – 2022 Longitudinal .....	8
Services Provided .....	8
Physician Geographical Practice Location .....	8
2022 Longitudinal Physicians Start/End Office as Scheduled .....	9
After Hours Work .....	9
How After-Hours Care Provided – 2022 Longitudinal Physicians .....	9
2022 Longitudinal Physicians Hours Spent on Charting, Paperwork, Referrals, Forms, etc. ....	10
Out of Office Work .....	10
Patient Care Related Non-Office Work (e.g. inpatients, LTC, etc.) .....	10
Average Hours Spent per Week Doing Non-Clinical Work (e.g. meetings, teaching prep, etc) .....	11
Other Areas of Practice in Addition to Office Care – 2022 Longitudinal .....	11
Hospital Care .....	12
Active Hospital Privileges .....	12
Inpatient Care .....	12
How Inpatient Care is Provided – 2022 Longitudinal Physicians .....	13
Plans to Give up Hospital Work in the next 6 Months .....	13
Long Term Care .....	14
Part of Long Term Care After-Hours Call Group: Duncan Facilities .....	14
Sign out to the After-Hours Long Term Care Call Group .....	14
Accept New, Previously Unattached Long Term Care Patients .....	15
Find it Difficult to find Locum Coverage – 2022 Longitudinal .....	15

Walk-in Patients .....	16
Physician Remuneration Type.....	16
Capacity/Satisfaction .....	16
Regular Absences .....	16
Past Absences .....	16
Significant Time off in the Next Three Years.....	17
Changes in Practice .....	17
Top Reasons for Reducing Office Work (2022 respondents).....	17
Longitudinal Physicians.....	17
Non-Longitudinal Physicians.....	17
Planning.....	<b>Error! Bookmark not defined.</b>
Increased Capacity .....	<b>Error! Bookmark not defined.</b>
Increased Efficiency .....	<b>Error! Bookmark not defined.</b>
Future Vision .....	<b>Error! Bookmark not defined.</b>
Other Clinical Setting .....	<b>Error! Bookmark not defined.</b>
Non-clinical Work.....	<b>Error! Bookmark not defined.</b>
Learners in Primary Care Office .....	18
Interest in Learners .....	18
• Integrated Community Clerkship (ICC) Student Preceptor .....	18
• Willing to Service as Preceptor for Cowichan Family Practice Residency Site .....	19
• Help to Develop a Family Practice Residency Site for Cowichan .....	19
Office Space .....	20
How many Physicians Work in your Office Space – 2022 Longitudinal .....	20
Office and Physician Hours .....	<b>Error! Bookmark not defined.</b>
New Patients .....	<b>Error! Bookmark not defined.</b>
Office Space .....	<b>Error! Bookmark not defined.</b>
Multi-disciplinary Team Members.....	20
Accepting New Patients .....	21
Feeling Rushed .....	21
Level of Burnout in Last 6 Months .....	22
Joy in Work.....	22
Satisfaction with Care Provided to Patients .....	23
Recruitment .....	23
Currently in the Process of Trying to Recruit a New Physician to Clinic – 2022 Longitudinal .....	23
Physician Recruitment Methods.....	24

Recruiting Regions – 2022 Longitudinal..... 24

Months Recruiting – 2022 Longitudinal..... 25

Recruiting other Primary Care Providers – 2022 Longitudinal ..... 25

Future of Primary Care..... 26

    Concern about Future of Primary Care in Cowichan Valley..... 26

    Consider Shifting to a Different Model, Developed Locally and run by Physicians – 2022 Longitudinal ..... 26

    Interest in being involved in the Development of New Cowichan-made Clinic Model – 2022 Longitudinal ..... 27

    Ideas around Alternate Models of Primary Care that would Work for Community..... 27

    What are you most Proud of about Your Practice? ..... 27

2022 Longitudinal Physicians - Ideally, How Many:..... 28

- Days per week would like to Work ..... 28
- Hours per week would like to work ..... 29
- Like Day Structured ..... 29

Additional Resources to Help Mange Practice..... 29

How Confident CVDFP will Represent Interests – 2022 Longitudinal..... 30

What might the CVDFP consider doing/providing to help family physicians – 2022 Longitudinal ..... 30

DRAFT

## Introduction

The Cowichan Valley Division of Family Practice (CVDFP) conducted family physician surveys in 2011, 2015 and 2022. In 2022 two surveys were administered to physicians who identified as either a longitudinal or non-longitudinal family practice. This report compares (where possible) the survey results over the 2011, 2015 and 2022 time period. Some cohort comparisons are missing in this report because the questions were not asked/reported in the four mentioned reports.

## Completion rate

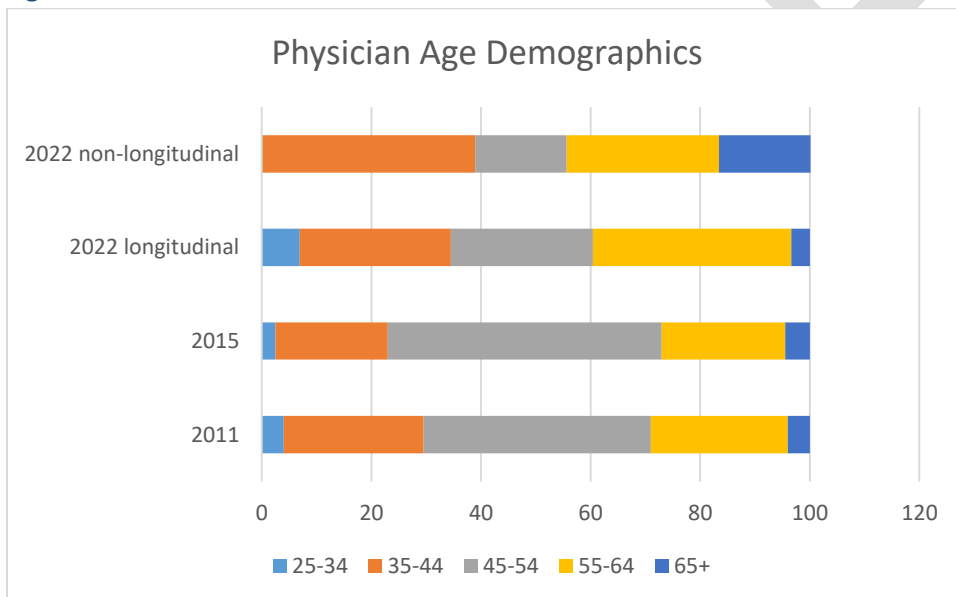
The survey completion rates are as follows:

- 2011: 62 responses; 83% completion rate
- 2015: 41 responses; 48% completion rate
- 2022 longitudinal: 58 responses; 98.3% completion rate
- 2022 non-longitudinal: 18 responses; 88.9% completion rate

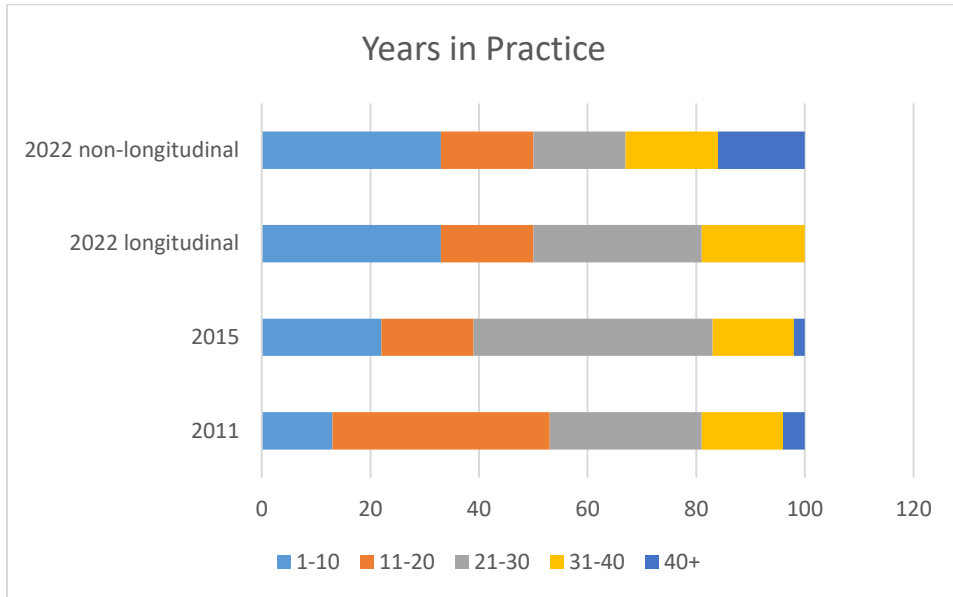
## Demographics

### Physician Demographics

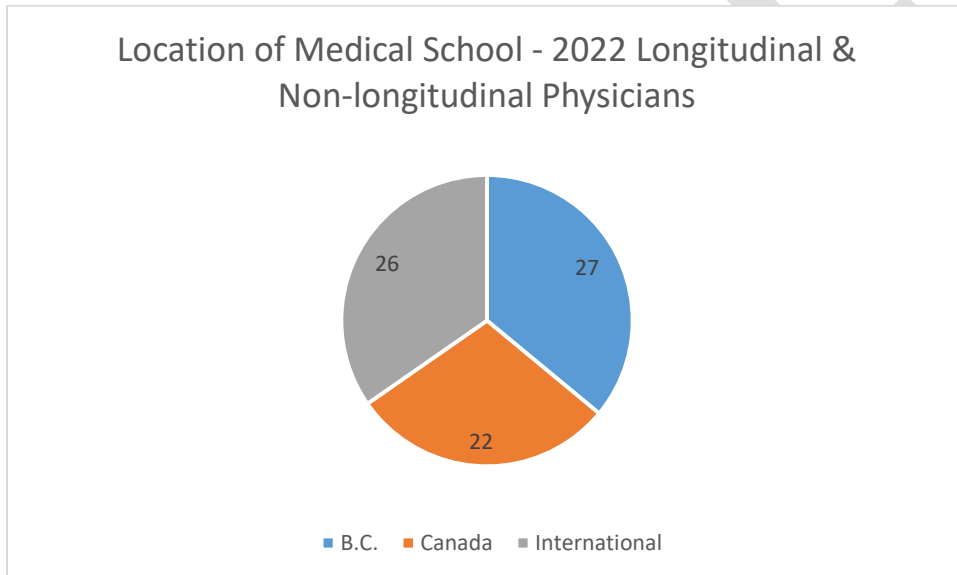
#### Age



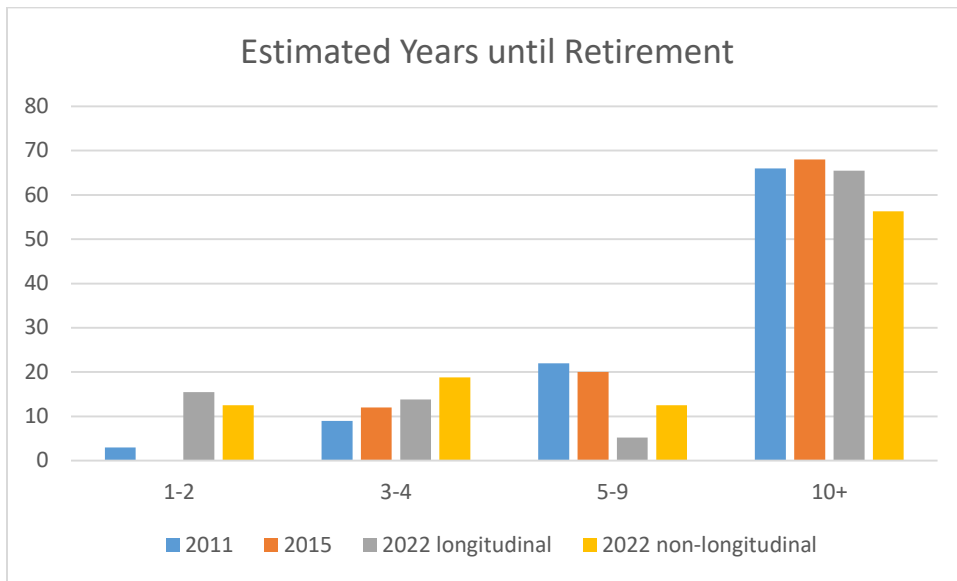
## Years in Practice



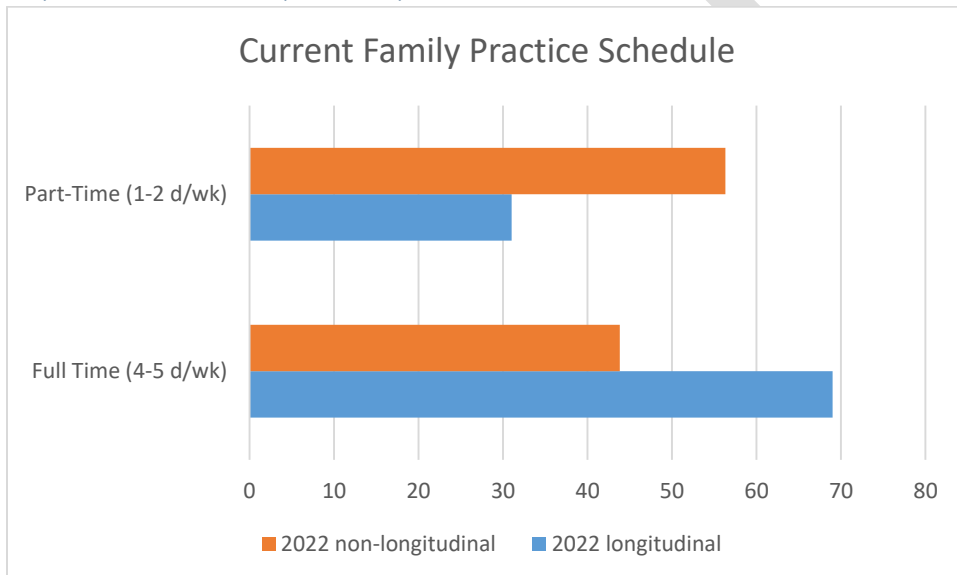
## Medical School Attended



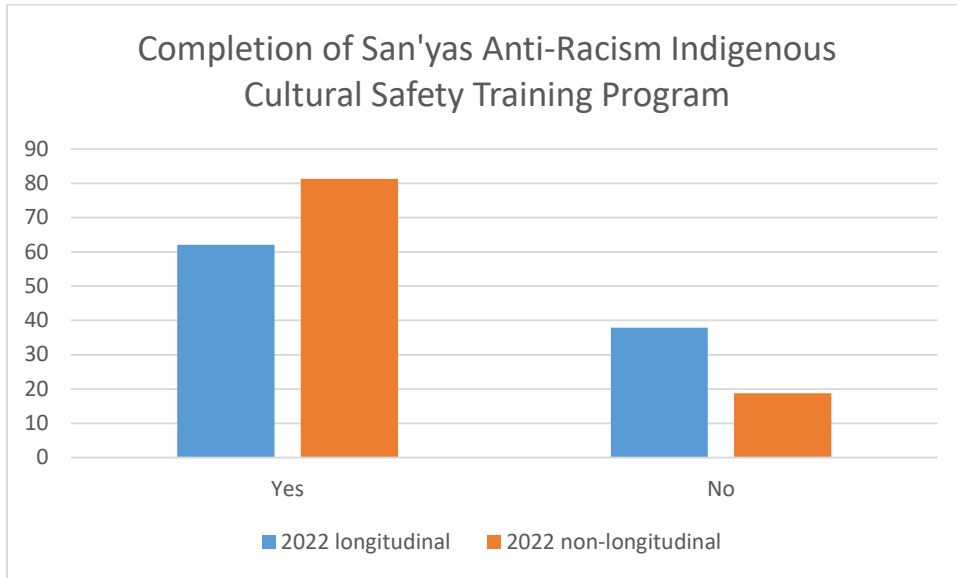
## Retirement



## Physician Full Time Equivalency

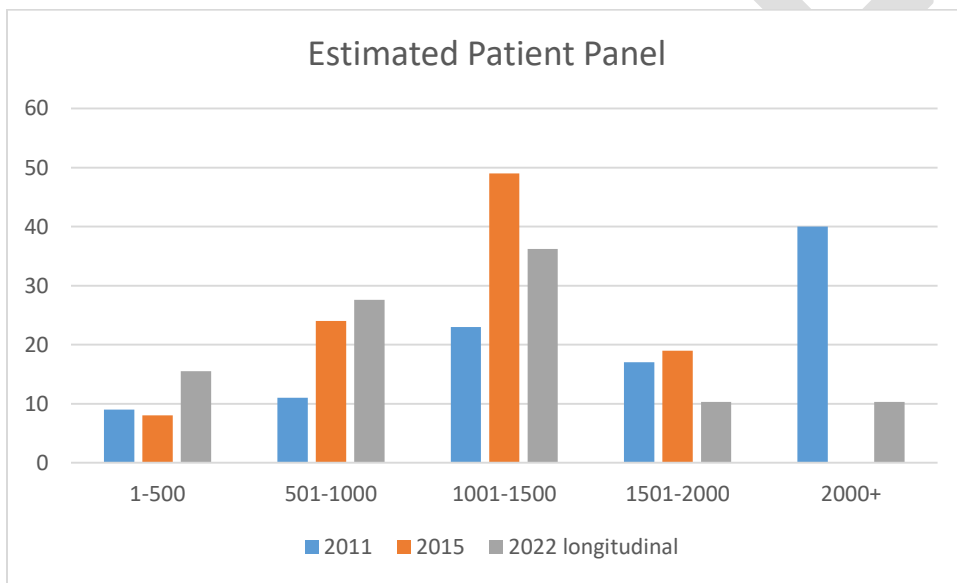


## Completion of San'yas Anti-Racism Indigenous Cultural Safety Training Program



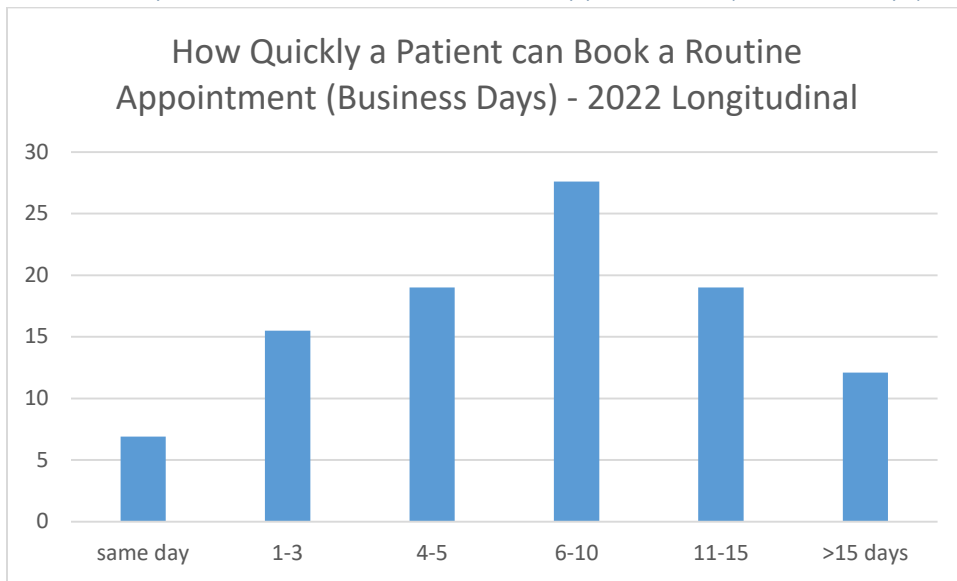
## Patient Demographics

### Estimated Patient Panel Size



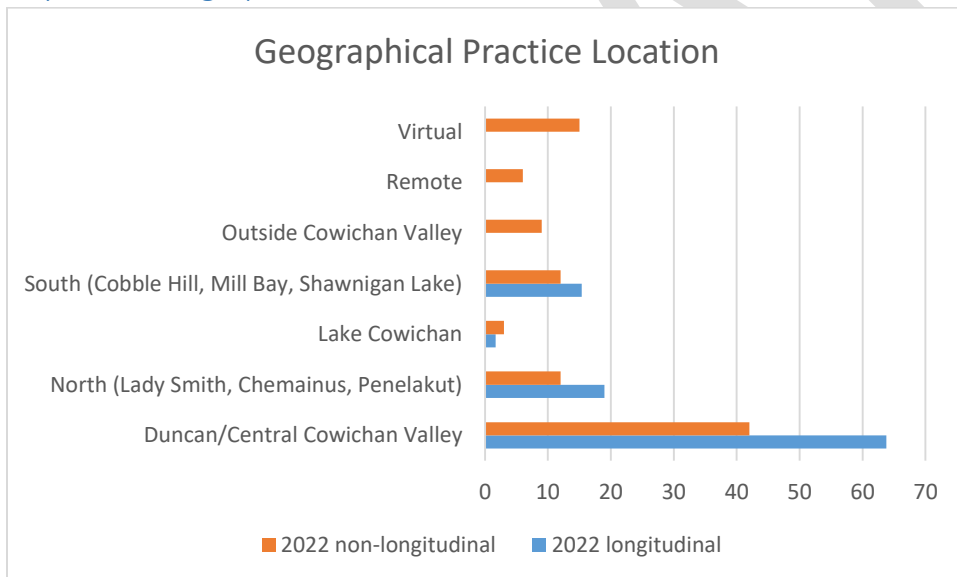


## How Quickly a Patient can Book a Routine Appointment (Business Days) – 2022 Longitudinal

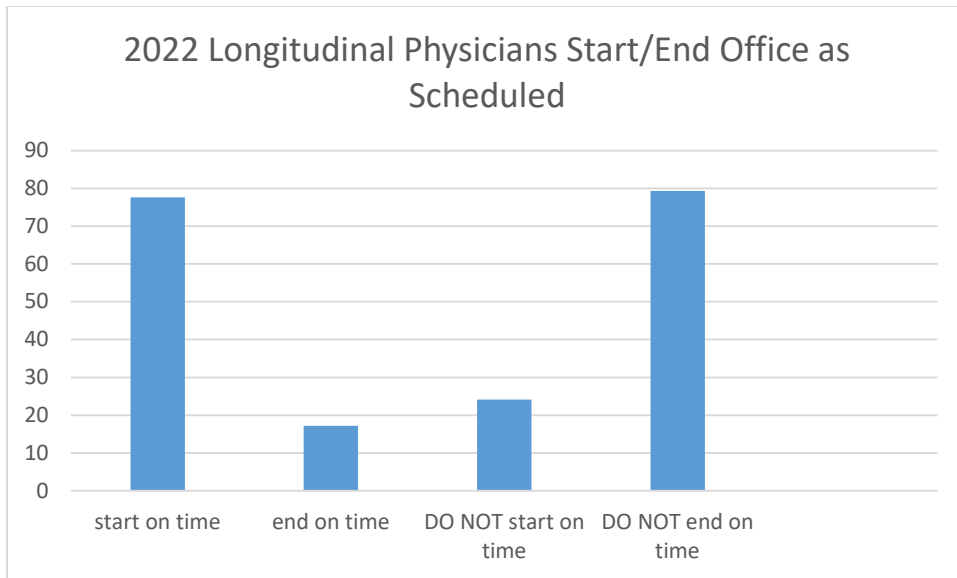


## Services Provided

### Physician Geographical Practice Location

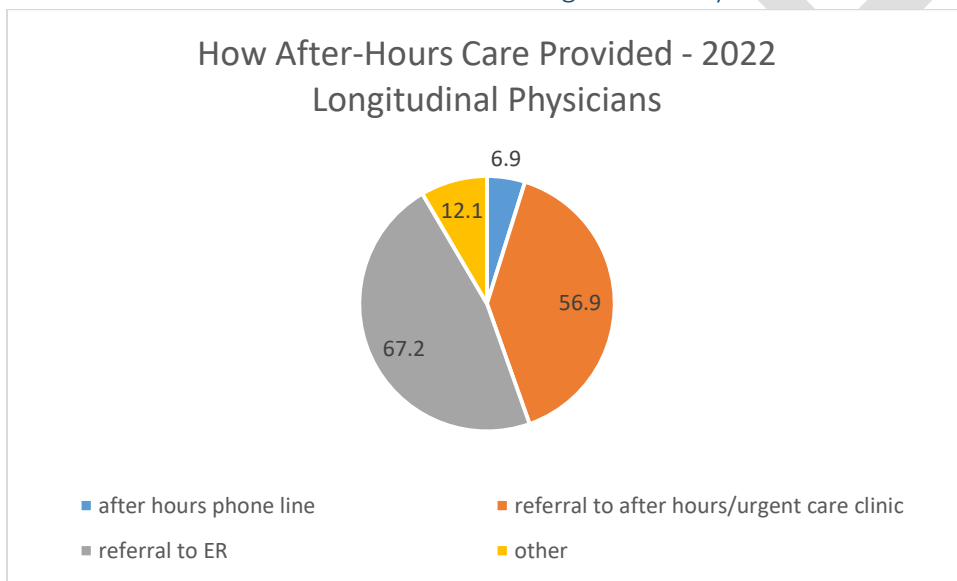


## 2022 Longitudinal Physicians Start/End Office as Scheduled



## After Hours Work

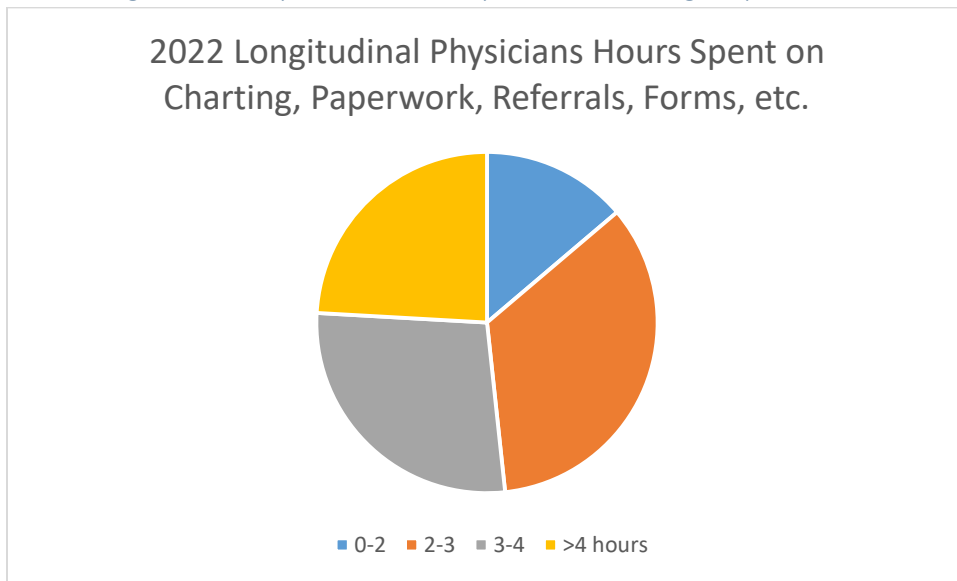
### How After-Hours Care Provided – 2022 Longitudinal Physicians



Other reasons listed included:

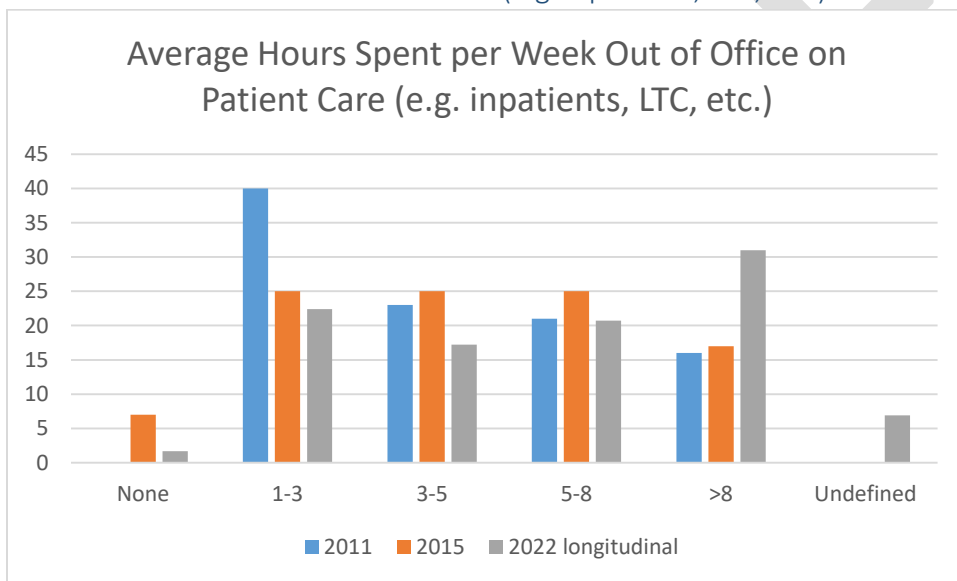
- Clinic covers call for our inpatients
- Covers own calls

## 2022 Longitudinal Physicians Hours Spent on Charting, Paperwork, Referrals, Forms, etc.

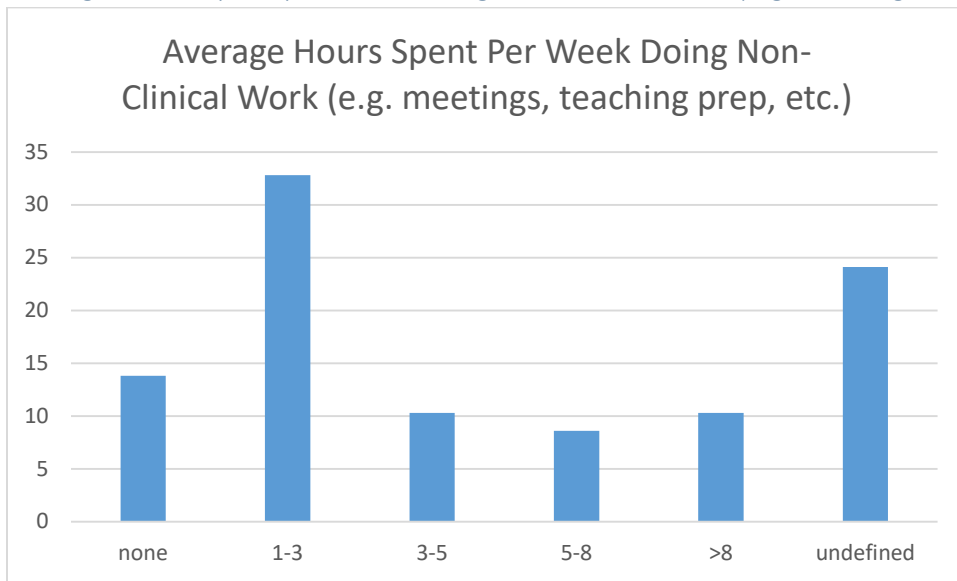


## Out of Office Work

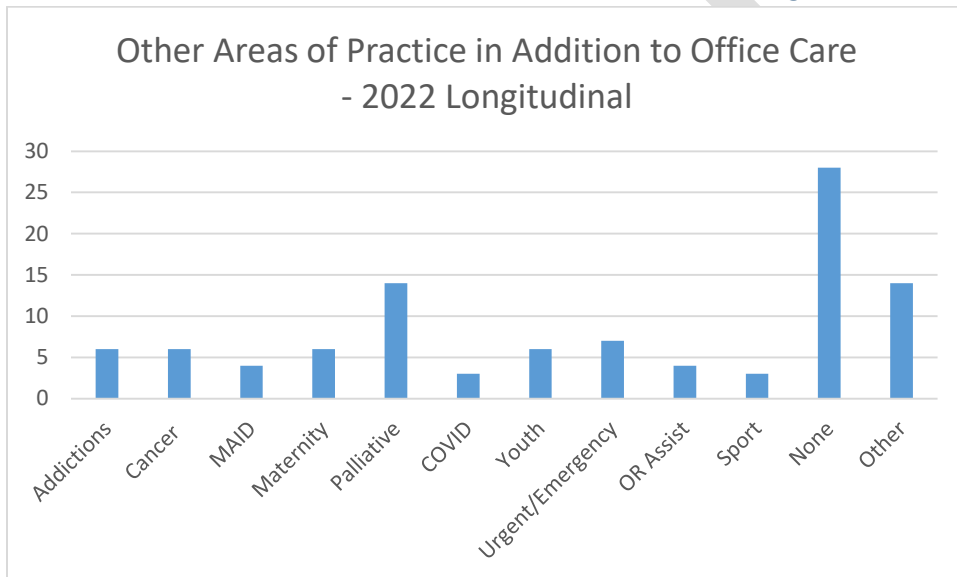
Patient Care Related Non-Office Work (e.g. inpatients, LTC, etc.)



Average Hours Spent per Week Doing Non-Clinical Work (e.g. meetings, teaching prep, etc.)



Other Areas of Practice in Addition to Office Care – 2022 Longitudinal

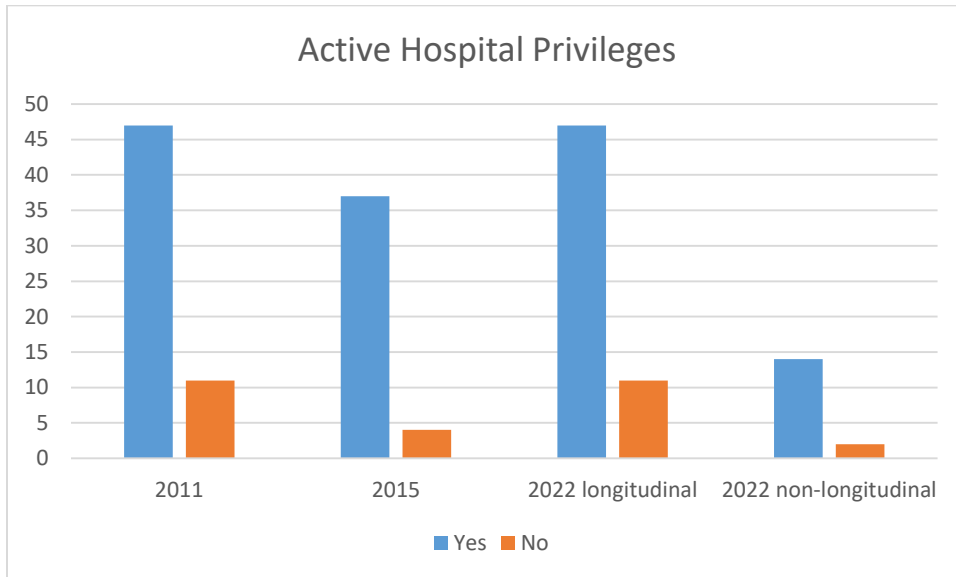


“Other” areas included:

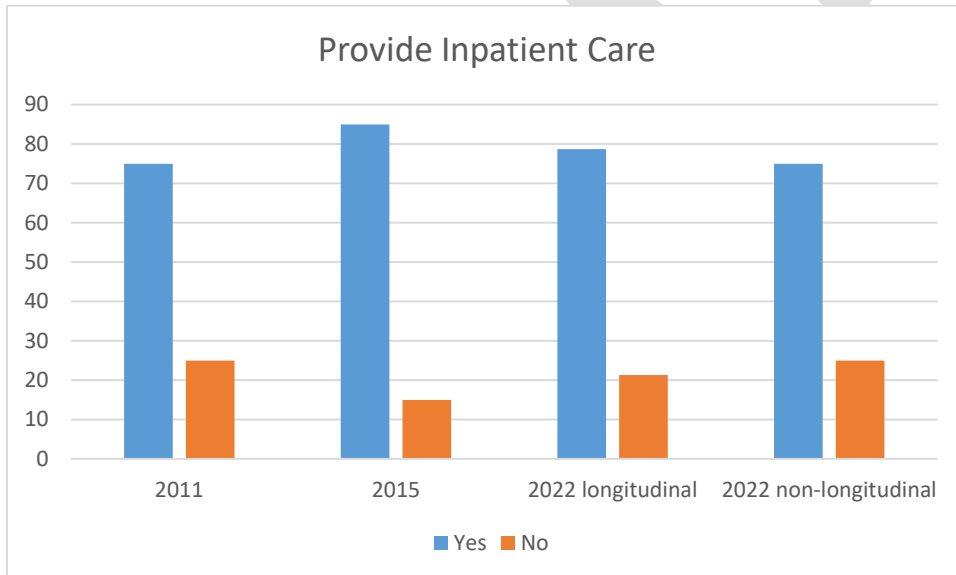
- Gender affirming
- Overdose prevention site
- Homeless
- Indigenous
- Lifestyle
- Minor skin procedures
- UNIT
- Home visits
- Leadership
- Teaching

## Hospital Care

### Active Hospital Privileges

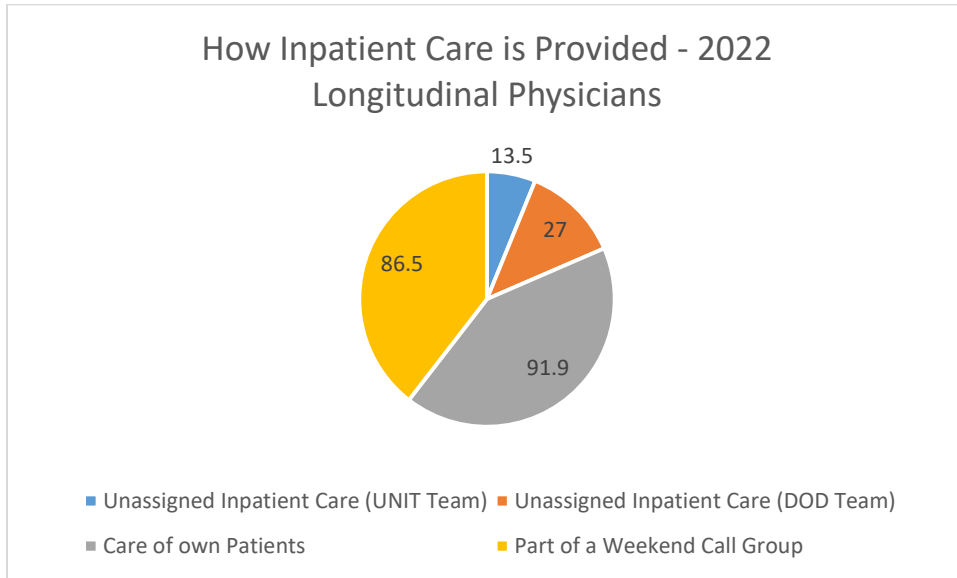


### Inpatient Care

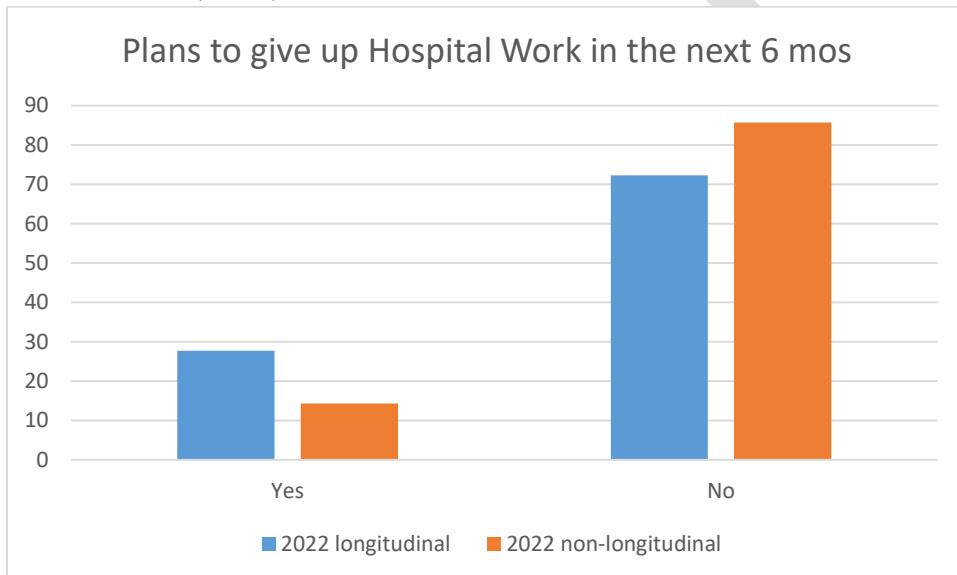


\*Note: 14 non-longitudinal respondents have active privileges at Cowichan District Hospital. 12 (75%) non-longitudinal respondents provide inpatient care.

## How Inpatient Care is Provided – 2022 Longitudinal Physicians

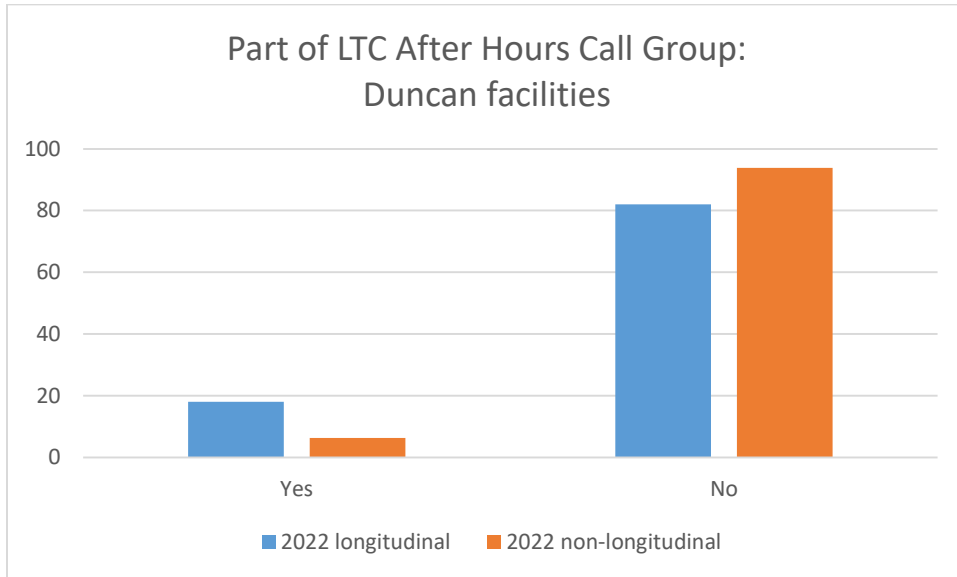


## Plans to Give up Hospital Work in the next 6 Months

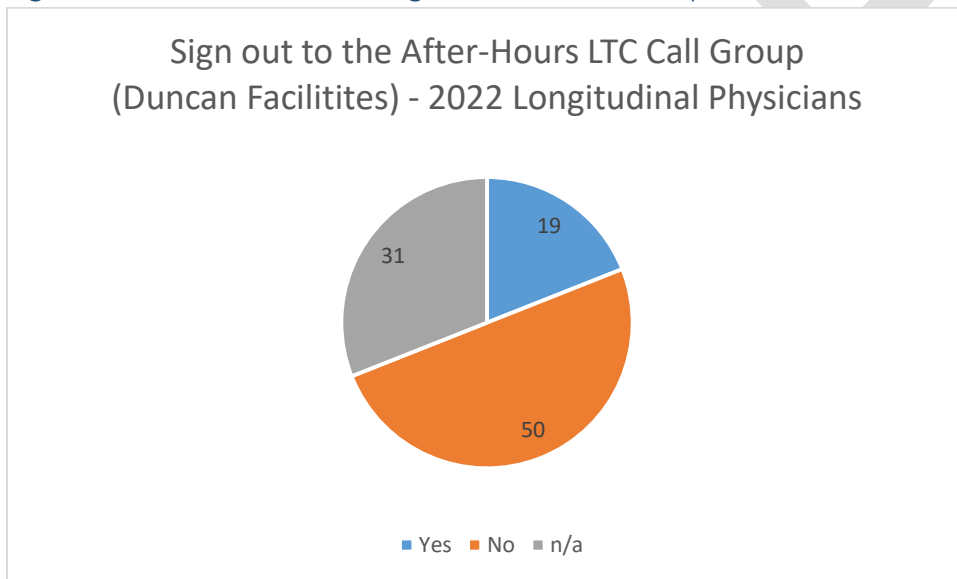


## Long Term Care

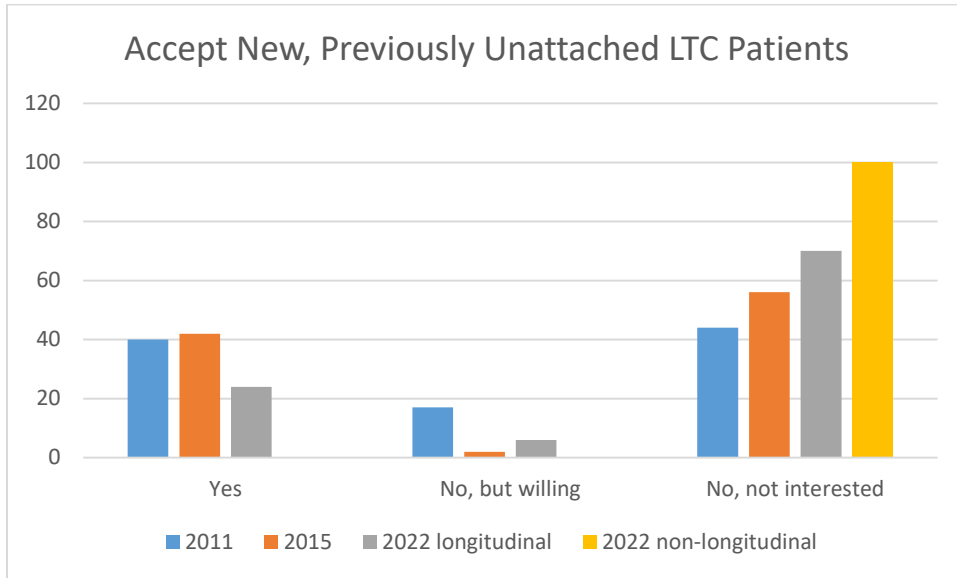
### Part of Long Term Care After-Hours Call Group: Duncan Facilities



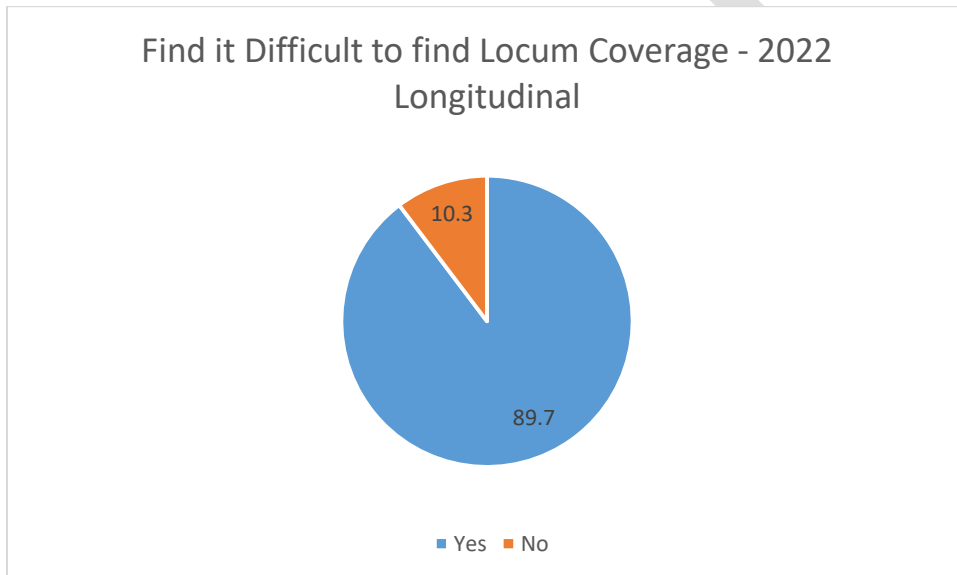
### Sign out to the After-Hours Long Term Care Call Group



## Accept New, Previously Unattached Long Term Care Patients



## Find it Difficult to find Locum Coverage – 2022 Longitudinal

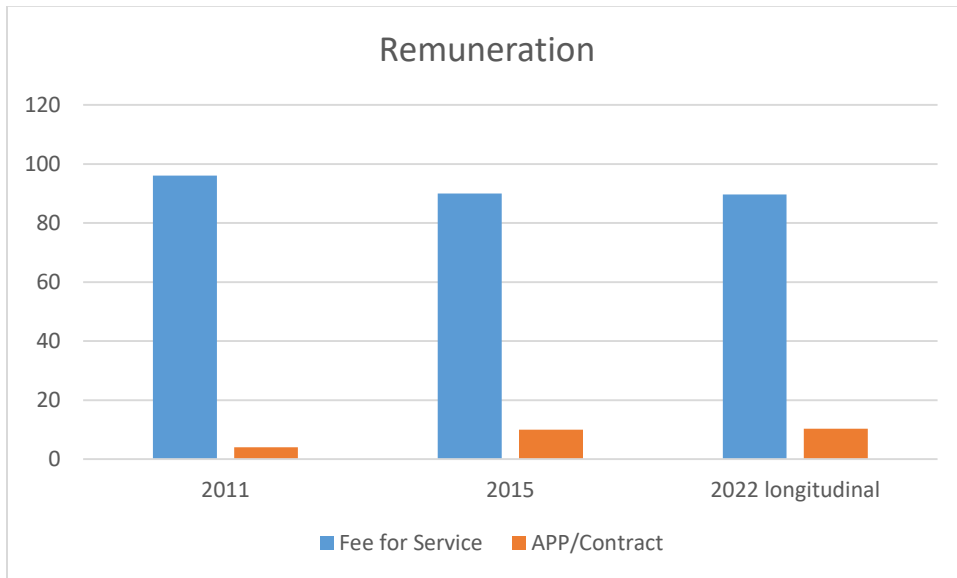


## Physicians find locums from the following locations:

1. Colleague referrals – 29.3%
2. Other – 37.9%
  - a. Rural Locum Program
  - b. No locum access
  - c. Semi-retired physicians
  - d. Former students/residents
  - e. In-clinic coverage by physician peers
3. CVDFP locum list – 29.3%
4. I have a regular locum(s) I use – 29.3%

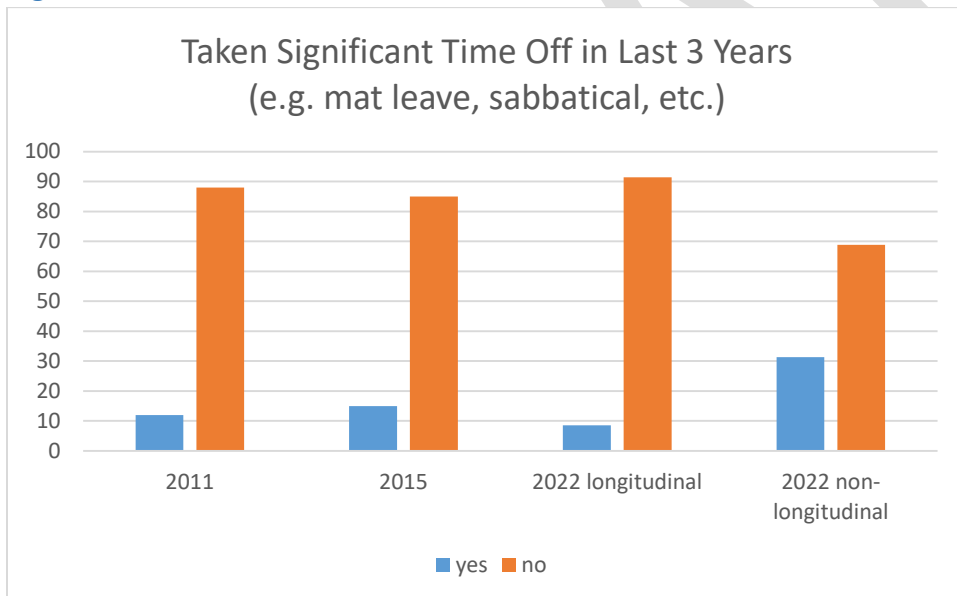


## Physician Remuneration Type

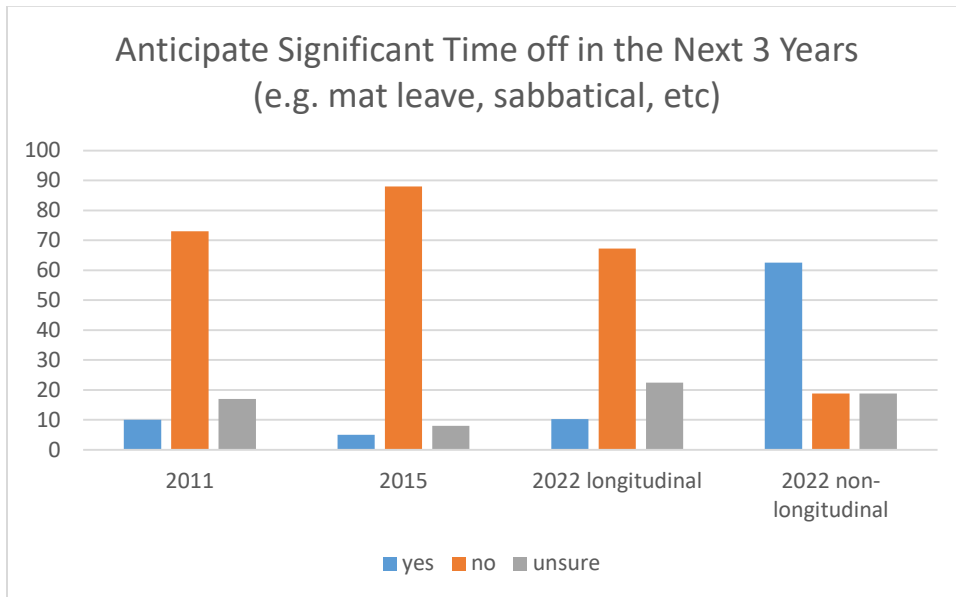


## Capacity/Satisfaction

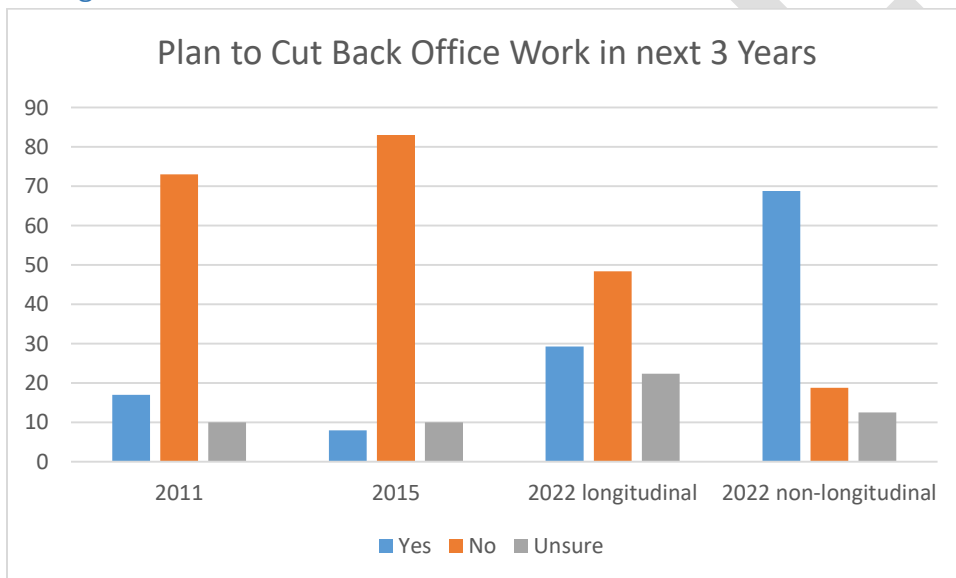
### Significant Time off in the Last Three Years



## Significant Time off in the Next Three Years



## Changes in Practice



## Top Reasons for Reducing Office Work (2022 respondents)

### Longitudinal Physicians

The top reasons for longitudinal Family Physicians reducing office work are:

1. Leaving current work for other opportunities in healthcare including research and locum
2. Leaving healthcare/Reducing Office Hours/Reducing Hospital work

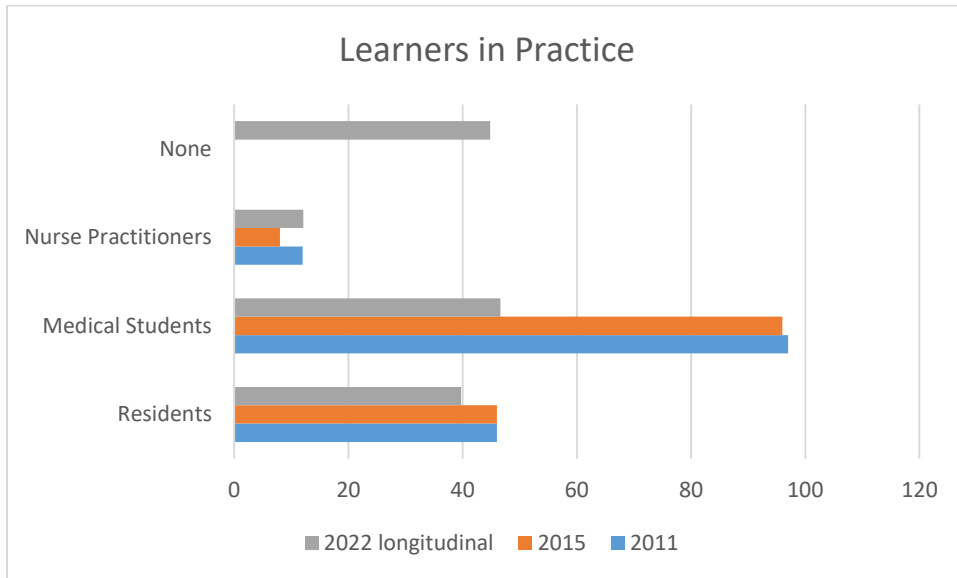
### Non-Longitudinal Physicians

The top reasons for non-longitudinal Family Physicians reducing office work are:

1. Reducing office hours
2. Various reasons including reducing:
  - a. Specialty practice
  - b. Hospital

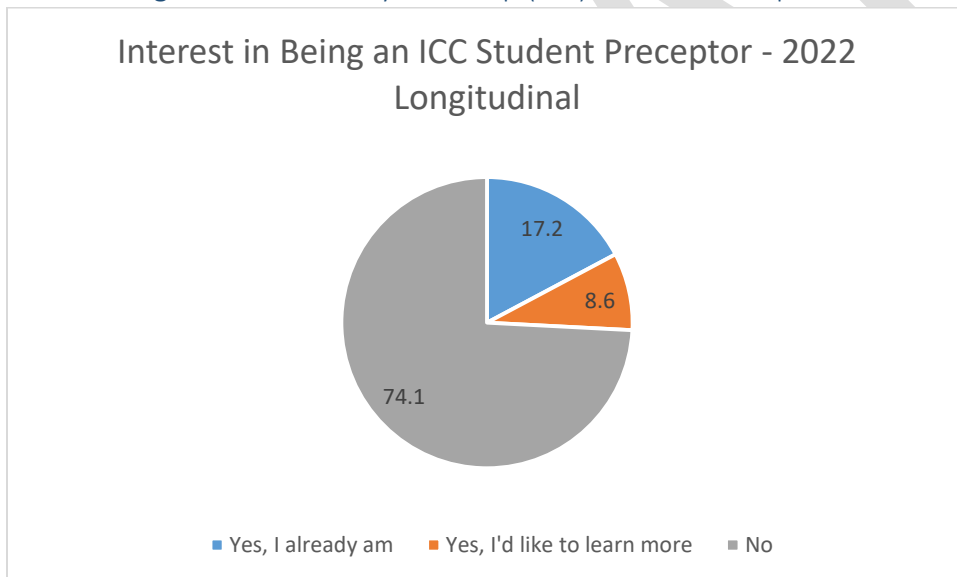
- c. Taking year off
- d. Research

### Learners in Primary Care Office



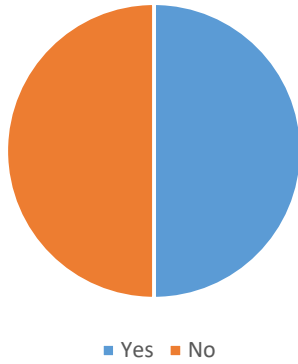
### Interest in Learners

- Integrated Community Clerkship (ICC) Student Preceptor



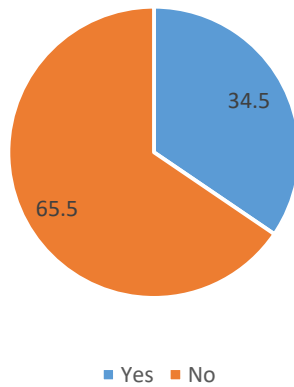
- Willing to Service as Preceptor for Cowichan Family Practice Residency Site

Interest in Serving as a Preceptor if Cowichan able to Secure its own Family Practice Residency Training Site - 2022 Longitudinal



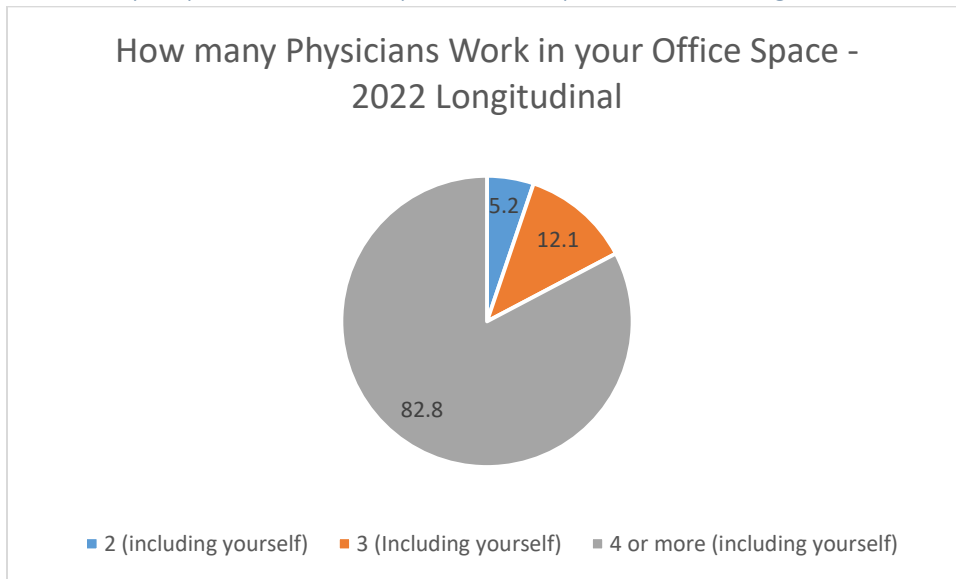
- Help to Develop a Family Practice Residency Site for Cowichan

Interest in Helping Develop a Family Practice Residency site for Cowichan - 2022 Longitudinal

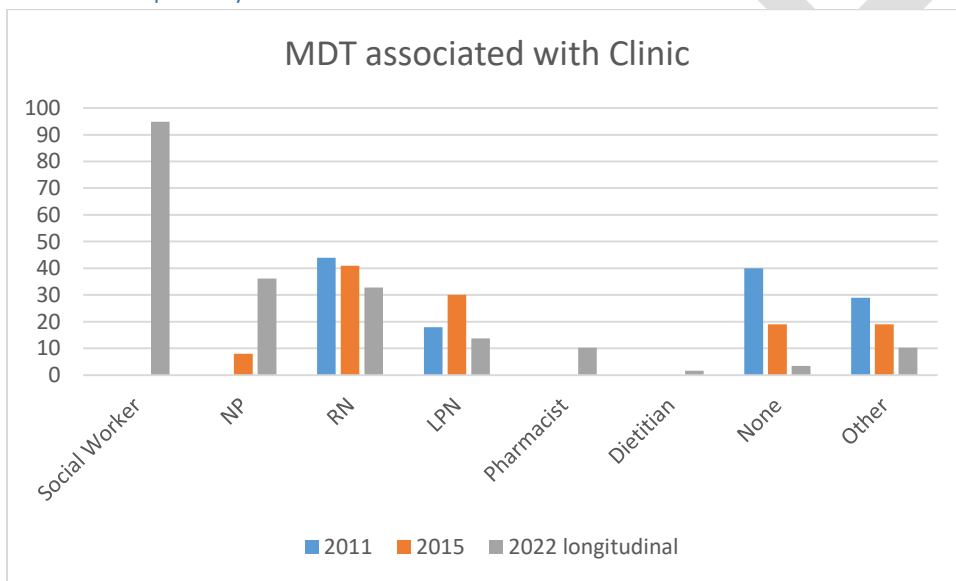


## Office Space

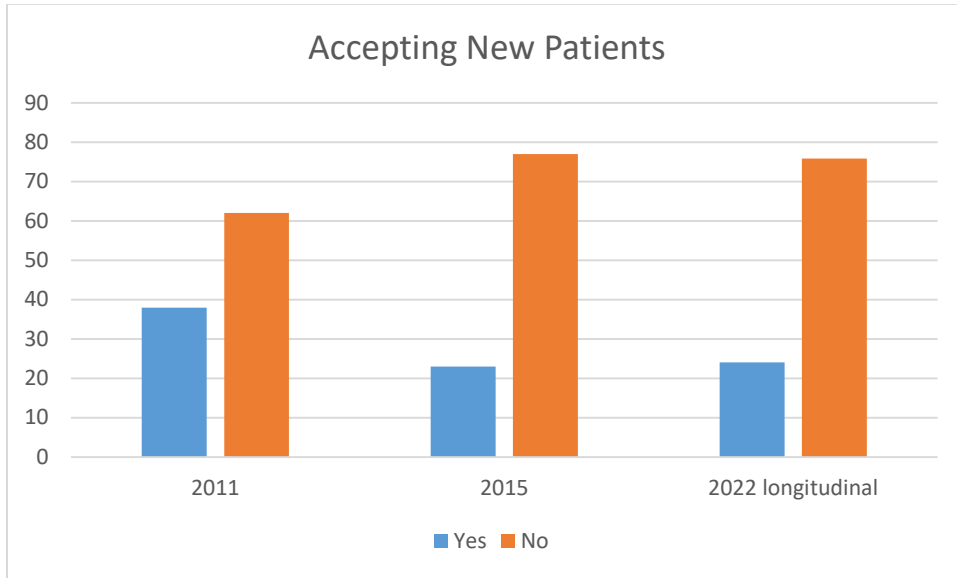
How many Physicians Work in your Office Space – 2022 Longitudinal



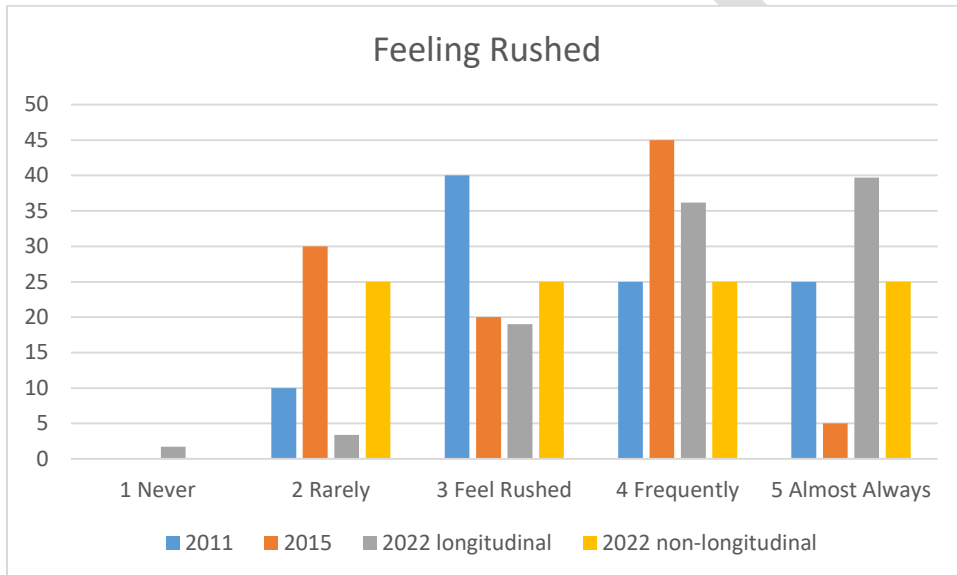
## Multi-disciplinary Team Members



## Accepting New Patients

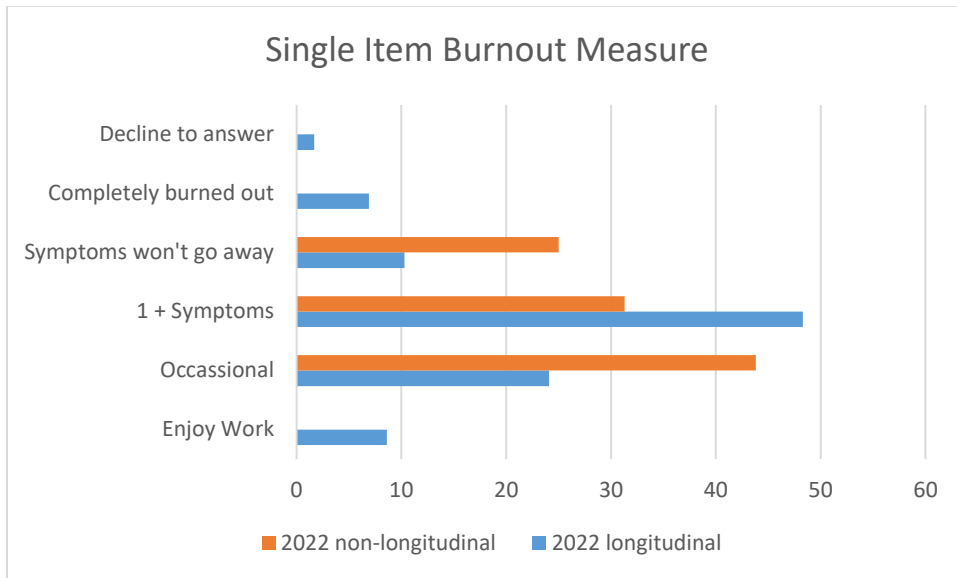


## Feeling Rushed

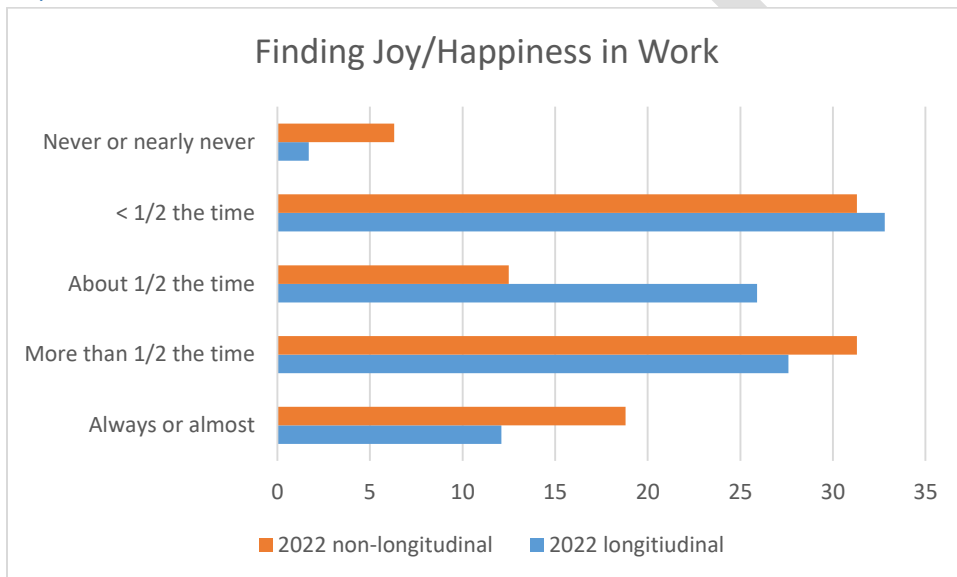


\*took some liberties in comparing 2011/2015 w/ 2022 – same scale not used\*

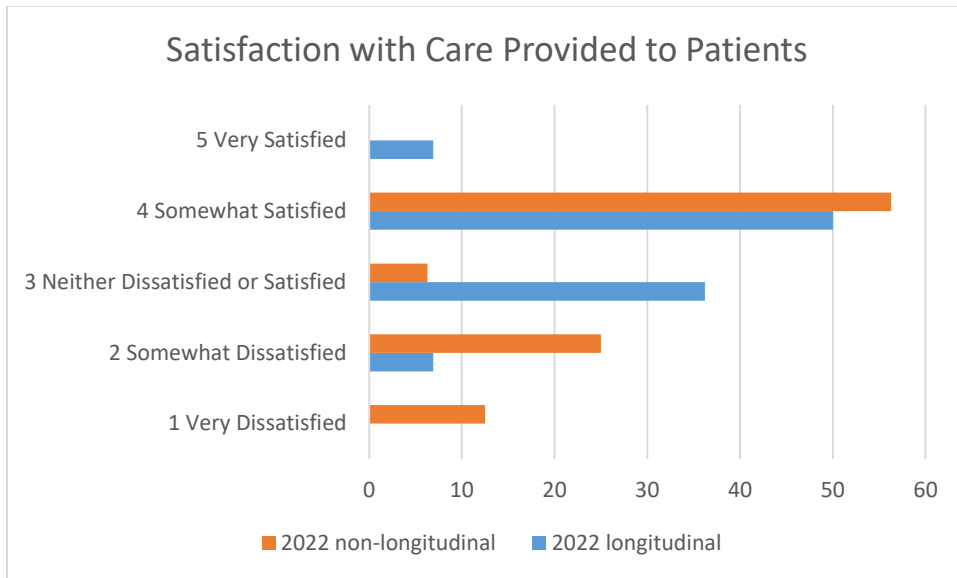
## Level of Burnout in Last 6 Months



## Joy in Work



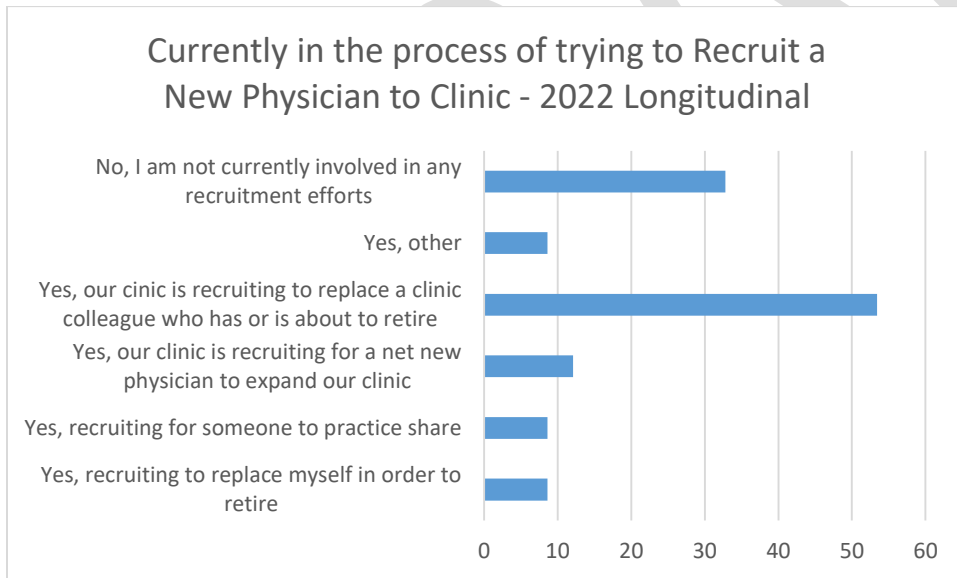
## Satisfaction with Care Provided to Patients



\*2011/2015 scales markedly different so excluded\*

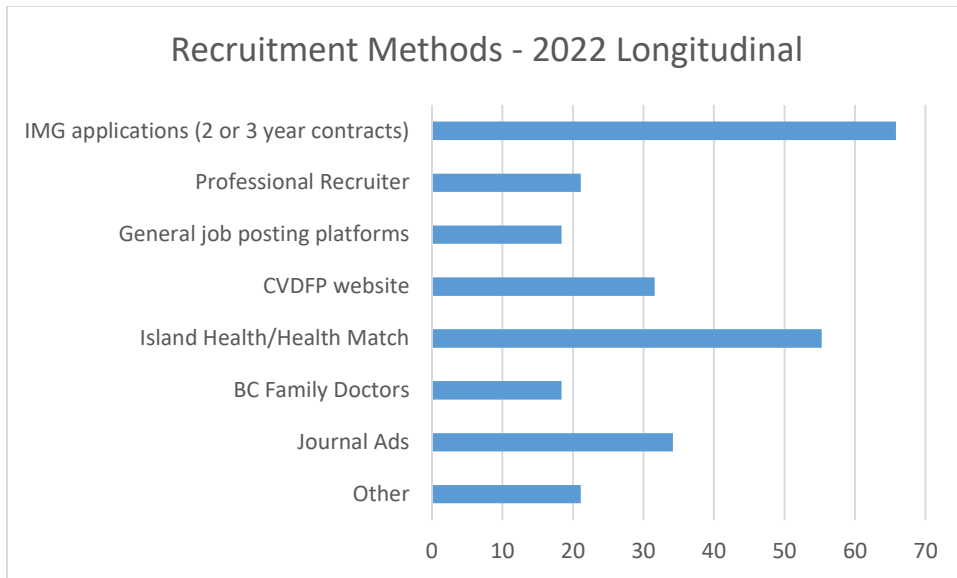
## Recruitment

Currently in the Process of Trying to Recruit a New Physician to Clinic – 2022 Longitudinal

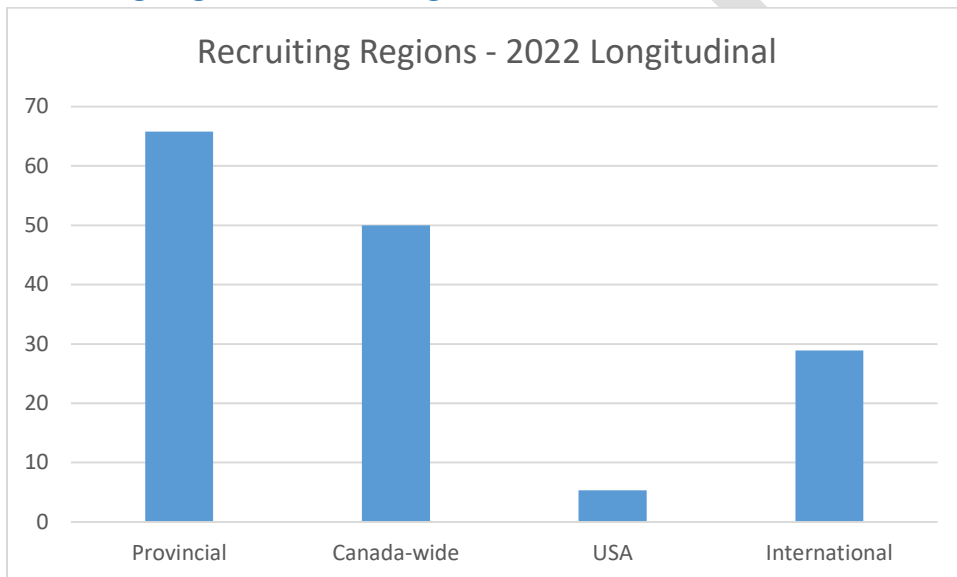




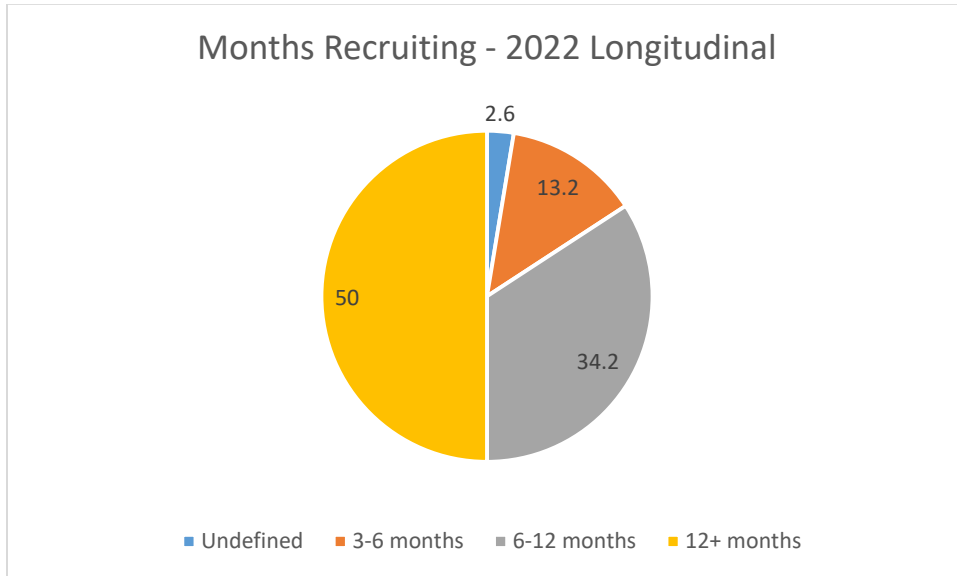
## Physician Recruitment Methods



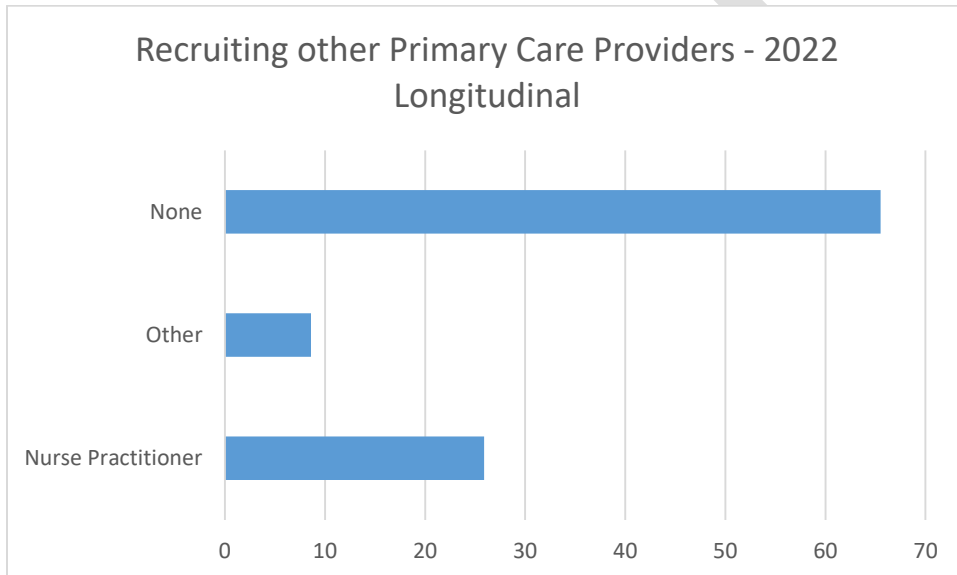
## Recruiting Regions – 2022 Longitudinal



## Months Recruiting – 2022 Longitudinal

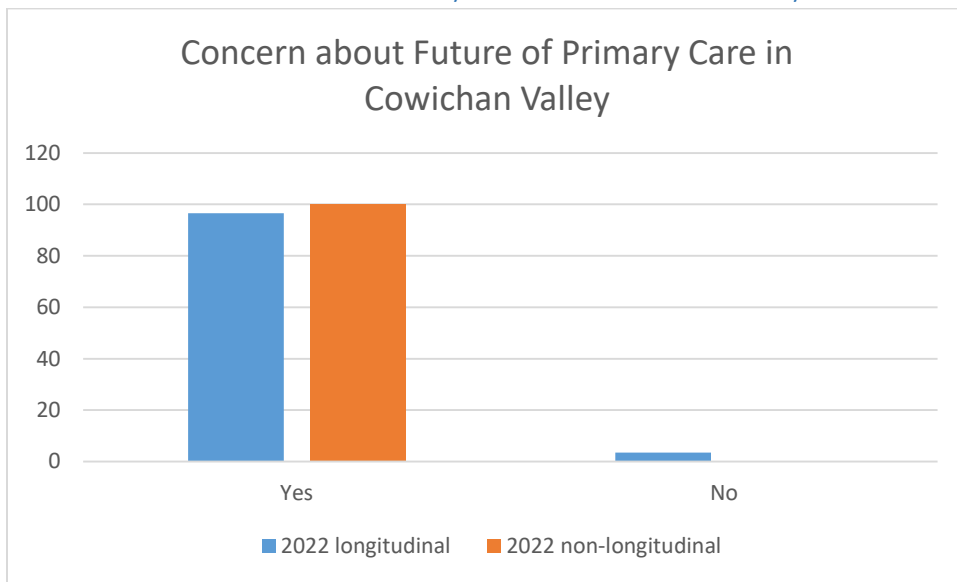


## Recruiting other Primary Care Providers – 2022 Longitudinal

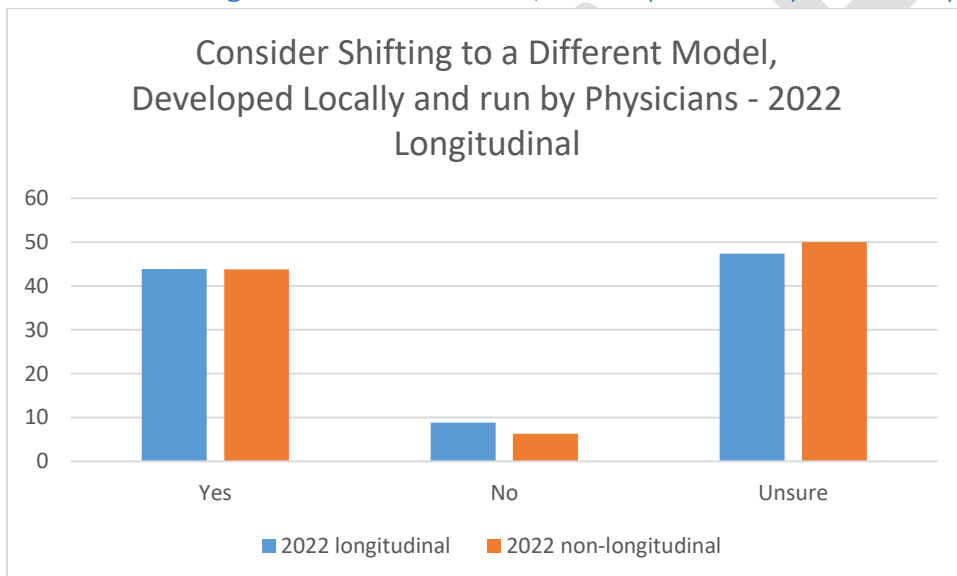


## Future of Primary Care

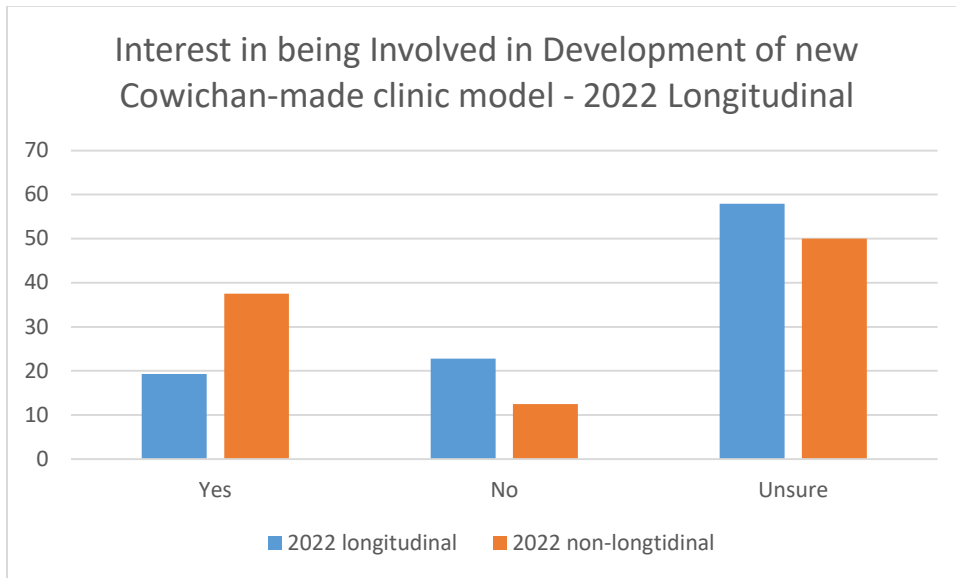
### Concern about Future of Primary Care in Cowichan Valley



### Consider Shifting to a Different Model, Developed Locally and run by Physicians – 2022 Longitudinal



## Interest in being involved in the Development of New Cowichan-made Clinic Model – 2022 Longitudinal



## Ideas around Alternate Models of Primary Care that would Work for Community

The following themes (in order of frequency) were identified to this open ended question:

- CHC (6)
- Hospitalists for inpatient care (3)
- CHC with charitable status (2)
- Combination between contract and fee for service (2)
- Subsidized overhead and staff (2)
- Undefined (2)
- None (12)

The following ideas were mentioned once:

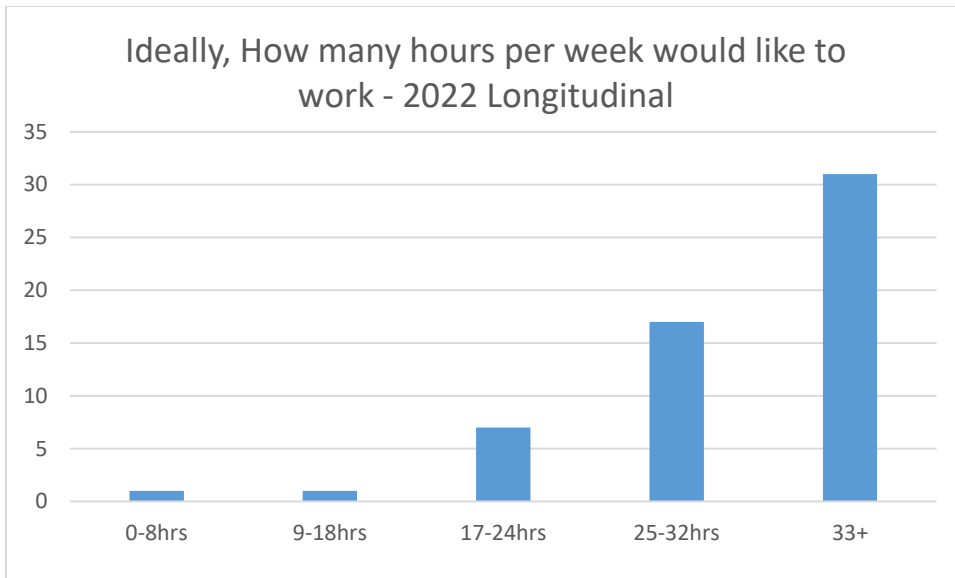
- CHC integrated with UPCC
- Shared building and overhead, housing individual/independent clinics
- Sessional Rate for protected time
- Sessional rate for inpatient care
- UPCC
- LTC – cluster care
- Physician Assistants

## What are you most Proud of about Your Practice?

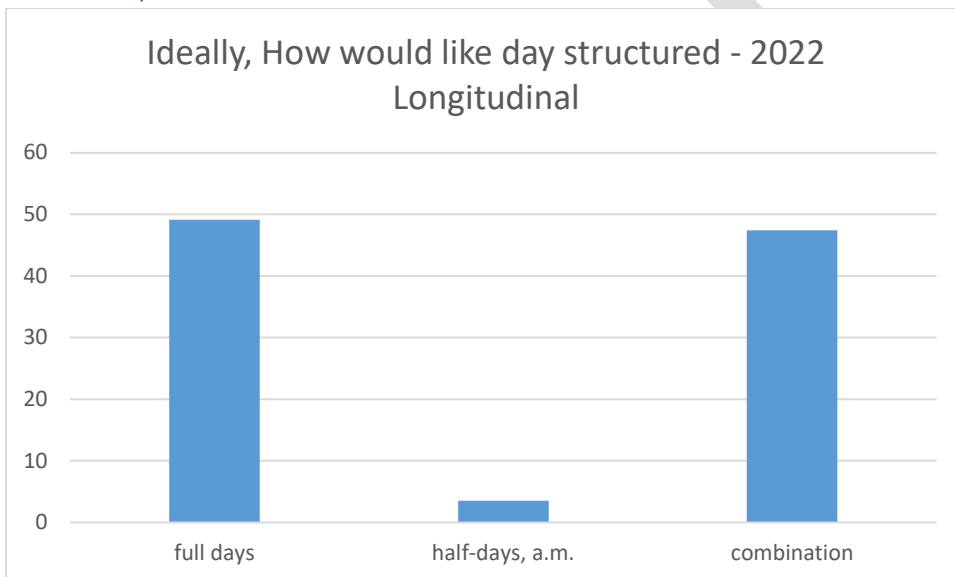
Respondents were asked what you are most proud of about your practice. The short-answers are reflected in the following word cloud, with the most frequent reflected by size (larger) of word.



- Hours per week would like to work



- Day Structure



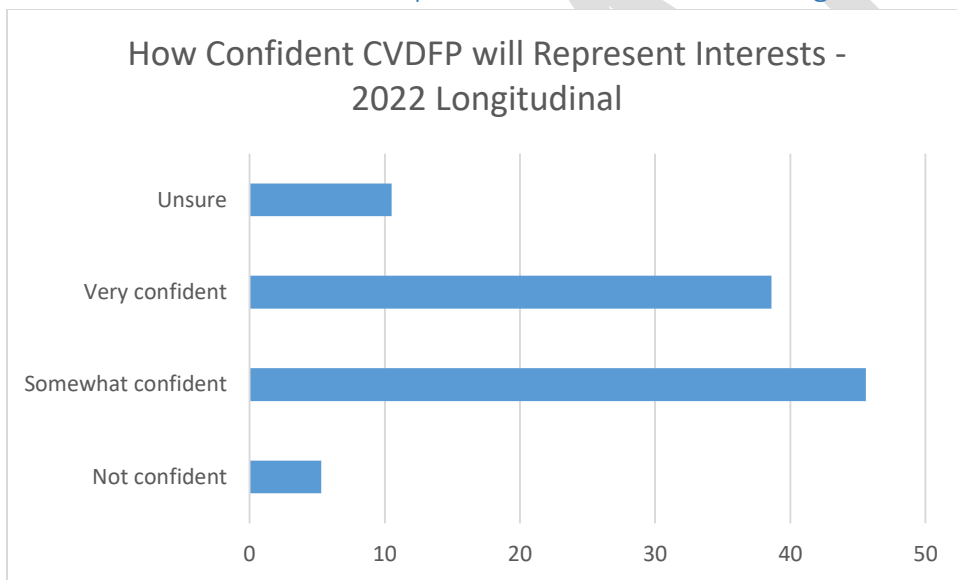
### Additional Resources to Help Manage Practice

Physicians were asked for an open-ended response to what additional resources could help manage their practice. The following are the responses with frequency in brackets:

- For Physician/Practice
  1. Coverage/Locum support (15)
  2. Financial support (15)
    - Overhead
    - Pay for non-appointment work (e.g. paperwork)
    - Increase in pay
  3. HR/Management support (6)
  4. Alternative model (3)
  5. Hospitalists (2)
  6. CME (1)

- 7. Scribe (1)
- 8. Benefits (1)
- 9. LTC (1)
- 10. EMR (1)
- For Patients
  - 1. Mental Health/Counselling (8)
  - 2. Social Work (7)
  - 3. Registered Nurse (7)
  - 4. Dietitian (4)
  - 5. Specialist Access (4)
  - 6. Urgent Care (3)
  - 7. Community supports (3)
  - 8. Team (2)
  - 9. Physician Assistant (2)
  - 10. Youth (1)
  - 11. Pain clinic (1)
  - 12. Dealing with difficult patients (1)
  - 13. Walk-in (1)
  - 14. In-office ultrasound (1)

#### How Confident CVDFP will Represent Interests – 2022 Longitudinal



#### What might the CVDFP consider doing/providing to help family physicians – 2022 Longitudinal

1. Advocate (23) for:
  - a. Recruitment of physicians/locums
  - b. Improved remuneration and/or overhead costs
  - c. Shift to hospitalists
2. Explore new care models (e.g. CHC) (11)
3. Provide CME (3)