

IHWC Poster Abstract Submission

Title: A View into Access and Intraprofessionalism: Findings from the 2010 National Physician Survey

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Background:

The National Physician Survey (NPS) is Canada's most comprehensive and authoritative survey of physicians, medical students, and residents. It is conducted jointly every 3 years since 2004 by The College of Family Physicians of Canada (CFPC), the Canadian Medical Association (CMA), and The Royal College of Physicians and Surgeons of Canada (Royal College), with a financial contribution from the Canadian Institute for Health Information. The data collected provides a dynamic picture of the profession, how it responds to societal needs, and the personal and professional interests of its members and future members.

Objectives:

Good communication between physicians in the referral-consultation processes not only facilitate timely access to care for patients but can also be exceptionally satisfying to the physicians themselves as they consult with each other about how best to address their patients' needs.ⁱ New to the 2010 survey is an examination of factors that facilitate or hinder good intraprofessional relationships, notably how collegial relationships are impacted by the referral and consultation processes.

Questions relating to access to primary and specialty care and elements of good referrals and consultations reports were added to the 2010 NPS to gauge the current state of physician relationships.

Design:

The 2010 National Physician Survey (NPS) physician questions evolved from questions used on the 2007 NPS. A working group approach was used with participation from a variety of key organizations to ensure relevance of questions. The group strived to identify new areas of focus, with outreach to a wide range of bodies and a review of the peer and grey literature. The survey uses a modified Dillman methodology with weighted results.

The questions related to intraprofessionalism were based on work done by the Collaborative Action Committee on Intraprofessionalism and documented as part of the "Guide to Enhancing Referrals and Consultations between Physicians"ⁱⁱ.

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Results:

Family physicians were asked to rate accessibility to other specialists from poor to excellent. Using the same scale, other specialists were asked to rate access to family physicians. More than half of family physicians (55%) rated access to other specialists as good to excellent. Other specialists rated access to family physicians less positively, with only 39% indicating access as good to excellent).

Other specialists were also asked to rate the quality of information received in referrals and to highlight the elements that could be enhanced. Respondents reported that 32% of referrals contain sufficient information while 35% sometimes contain sufficient information and that 18% of referrals rarely do. Additional information pertaining to the specific problem to be addressed, a clinical question to be answered and the relevant investigations and/or treatments already tried were highlighted as key areas for improvement.

Conclusion:

While access to other specialists seems to be relatively healthy, the survey indicates that other specialists are having difficulty transferring their patient back to primary care.ⁱⁱⁱ In addition, there are significant improvements that could be done to improve the referral/consultation process which would not only add to provider satisfaction but reduce the number of repeated tests^{iv} and ultimately improve wait times^v.

ⁱ College of Family Physicians of Canada. Royal College of Physicians and Surgeons of Canada. Family Physicians and Other Specialists: Working and Learning Together. 1996. P. 20. Retrieved from < http://rcpsc.medical.org/publicpolicy/FamilyPhysicians_and_other_specialists_e.php >

ⁱⁱ Royal College of Physicians and Surgeons of Canada. College of Family Physicians of Canada. Guide to Enhancing Referrals and Consultations Between Physicians. 2009. Retrieved from < <http://rcpsc.medical.org/publicpolicy/caci/index.php> >

ⁱⁱⁱ College of Family Physicians of Canada. Royal College of Physicians and Surgeons of Canada. Family Physicians and Other Specialists: Working and Learning Together. 1996. P. 5,11. Retrieved from < http://rcpsc.medical.org/publicpolicy/FamilyPhysicians_and_other_specialists_e.php >

^{iv} "Currently, it is estimated that for every 1,000 lab tests performed, approximately 150 are wasteful duplicates. This is because when Canadians visit a specialist or a new doctor, the health care provider does not have access to previous test results and medical tests are re-issued." Canada Info Way < <http://www.knowingsbetter.ca/#benefits> >

^v American Medical News (amednews.com), 2011, *Referral silence irks specialists, primary care doctors alike*, Retrieved from < <http://www.ama-assn.org/amednews/2011/01/31/prl20131.htm> >