A View into Access and Intraprofessionalism: Findings from the 2010 NPS
Carole Jacob, MCS; Danielle Fréchette, MPA; Galina Babitskaya, BSc
The Royal College of Physicians and Surgeons of Canada

OBJECTIVE
Given that timely access, professional satisfaction and higher quality care can accrue from good communication & collegial relations among physicians, the 2010 NPS was expanded to gauge the state of physician relations and examine the factors that facilitate or hinder good intraprofessional relationships, notably the effects of the referral and consultation processes.

BACKGROUND
- The National Physician Survey 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, Canadian Medical Association, and Royal College of Physicians and Surgeons of Canada.
- It provides a window into the profession, how it responds to societal needs, and the personal and professional interests of current and future doctors.

FINDINGS
- More than half of family physicians (FPs) (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.
- 31% of referrals to other specialists by FPs contain sufficient information while 35% sometimes contain sufficient information and 18% of referrals rarely do.
- Key areas for improvement: providing additional information about specific problem to be addressed, clinical question(s) to be answered, relevant investigations and/or treatments already tried.

METHODOLOGY
- Questions developed from 2007 NPS, with broad consultations and a review of the peer and grey literature to refine topics.
- NPS uses a modified Dillman methodology with weighted results.
- Intraprofessionalism questions developed from work done by the Collaborative Action Committee on Intraprofessionalism (CACI) and documented as part of the “Guide to Enhancing Referrals and Consultations between Physicians”.
- Family physicians were asked to rate accessibility to other specialists from poor to excellent.
- Other specialists were asked to rate access to family physicians.
- Other specialists were also asked to rate the quality of information received in referrals and to highlight the elements that could be enhanced.

CONCLUSIONS
While access to other specialists by FPs deemed to be relatively good, the survey indicates that other specialists are having difficulty transferring their patient back to primary care.

In addition, there are significant enhancements that could be done to improve the referral/consultation process which would not only add to provider and patient satisfaction, but reduce the number of repeated tests and ultimately improve access/wait times.

The NPS provides insights on areas of practice enhancement that could optimize use of medical resources, and patient and provider satisfaction.