## A Profession in Crisis

The survival of family medicine in Ontario



## **Executive Summary**

- This report should be viewed as a wake-up call to all who are involved in supporting family medicine
- Family doctors have the lowest Net Promoter Score for any profession that the researchers who conducted this survey have ever seen
  - This NPS issue has clear and objective root causes, and it is clearly and objectively causing a:
    - Supply issue of family physicians in Ontario
    - Negative impact to the quality of patient care
- There are 5 clear, priority causes of their dissatisfaction; 4 of them are admin burden/systemic in nature.
- +1,300 family doctors were surveyed

This report is a call-to-action from professionals who desperately need support, advocacy and empathy.

# Quantitative Research on the Impact of Administrative Burden on Family Medicine 2023: Detailed Results

## **Critical Challenges**

These are prevailing pain points with widespread agreement and should be addressed across the board.

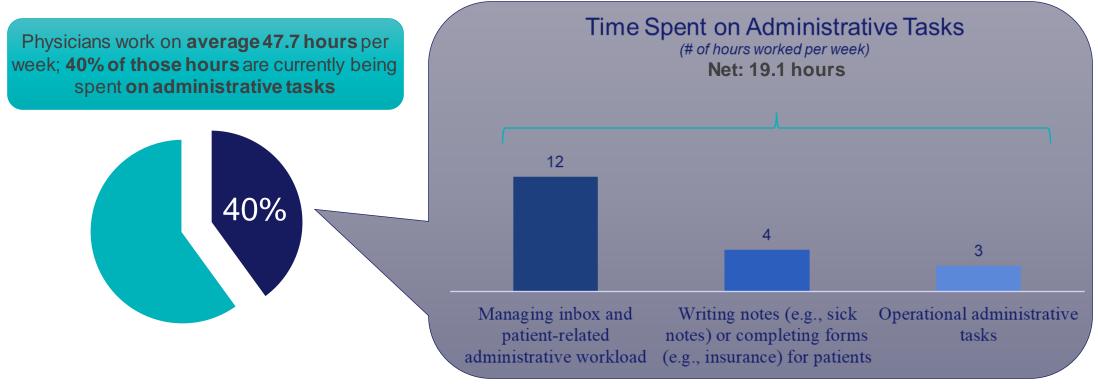
Challenge	Theme	Challenges Magnitude (Strongly/Somewhat Agree %)	Challenges Ranking (% of times selected in Top 3)
Other parts of the health care system often place unnecessary and/or inappropriate burden back onto me/my practice.	Burden/Stress	98	56
I am overwhelmed with administrative burden and paperwork related to the care requirements of my patients.	Burden/Stress	94	57
It is difficult to access specialist care for patients.	Access/Referrals	93	35
I spend a burdensome amount of time filling out patient forms.	Burden/Stress	92	22
It is difficult to manage patient expectations.	Burden/Stress	92	33

Q24. Below is a list of opinions we have heard from physicians about the challenges they face as a family physician. Please indicate the extent to which you agree or disagree these statements reflect significant pain points for you/your practice. Q25.Below are the statements you agreed with as they relate to challenges you face as a family physician. What would you say are the biggest pain points you experience at the practice level? Please rank the top THREE (3) things you find most challenging, with ONE (1) being the most challenging. Base: Total Sample (n=1,343)

Burden/Stress	Access/Referrals	
System Challenges & Mandates	Obligations	

## Largest Critical Challenges need priority focus.

Administrative burden is the largest challenge impacting family doctors' day-to-day work life: two-fifths of their working hours are dedicated to administrative tasks.



Q14. On average, how many hours do you work each week? Please consider all hours you spend on your practice, including the time you actively see patients as well as the time you are not seeing patients but conducting tasks related to being a family physician.

Q15. Out of that total number of w ork hours, on average how many hours per w eek do you spend on: Base: Total Sample (n=1.343)

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## Manageable Time on Administrative Tasks

In an ideal world, family doctors envision spending HALF the time they do now on administrative tasks.

Time Spent on Administrative Tasks (# of hours worked per week)



Ideally, Family Physicians expect to spend about HALF that on admin tasks, or 18% of their time.

- Managing inbox and patient-related administrative workload
- Writing notes (e.g., sick notes) or completing forms (e.g., insurance) for patients
- Operational administrative tasks

Q14. On average, how many hours do you work each week? Please consider all hours you spend on your practice, including the time you actively see patients as well as the time you are not seeing patients but conducting tasks related to being a family physician.

Q15. Out of that total number of work hours, on average how many hours per week do you spend on:

Q16. And in an average week, what would realistically be the ideal number of hours you would spend on:

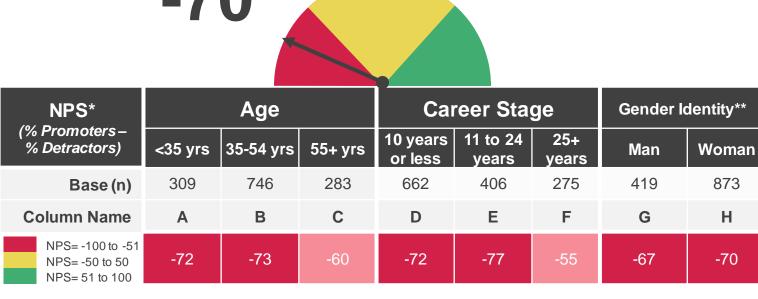
Base: Total Sample (n=1,343)

## Most concerning, this has led to a crisis situation for the future of the family physician profession: family physicians are feeling VERY unlikely to recommend a career in family medicine.

This crisis is present across <u>ALL</u> Family Physicians: regardless of age, tenure, patient type, location.

NPS for practice model also shows consistent discontent. Those working in FHT-FHNs are slightly higher than average at -62. FHT-FHOs are -70 (though a very small sample size). Neither is an NPS reflective of satisfaction.

NPS\* (Net Promoter Score) for the Family Physician Profession



Q17. On a scale of 0 to 10, where 0 is "I definitely will not recommend" and 10 is "I definitely will recommend", how likely are you to recommend a career as a family physician to other people, if asked? Base: Total Sample (n=1,343)

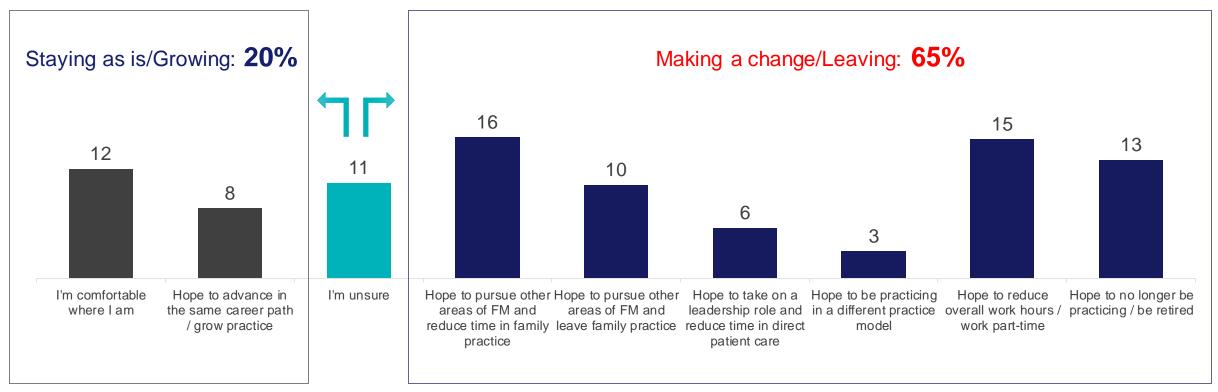
<sup>\*</sup>NPS (Net Promoter Score) is a representation of positivity and enthusiasm felt about a brand/service ranging from -100 to 100. It is calculated as follows: % of Promoters (likelihood to recommend=9-10) minus % of Detractors (likelihood to recommend=1-6), \*\*Sample size too small to report Non-binary/Nonconforming (n=9)

#### **Future Looks Dire**

Specifically, two-thirds of family doctors are planning to make a change or leave the career in the next 5 years.

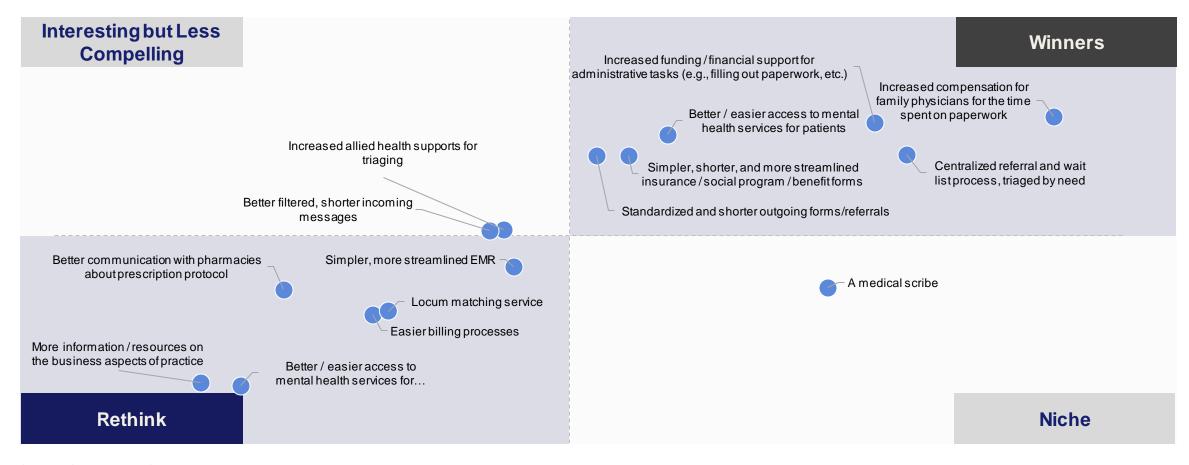
#### Next 5 years of career

(% selected)



Q19. Where do you envision your career to be within the next five years? Base: Total Sample (n=1,343)

## **Quadrant Map – Potential Solutions**

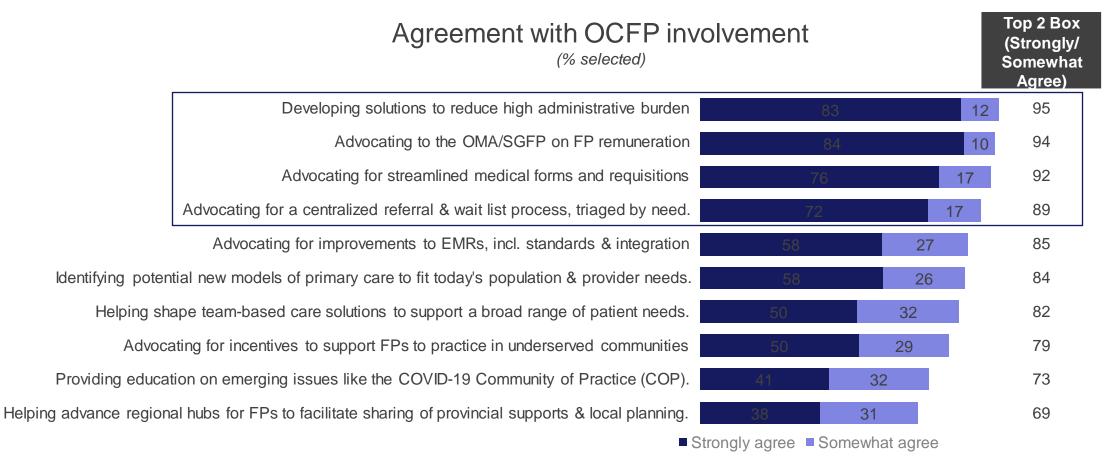


Q30. Idea Screening task: On the next few screens we are going to show you some ideas for potential solutions and would like to know which solutions, if implemented, would help you to excelled thrive in your practice. If the idea presented would immediately improve your practice, select the X or swipe left. After you select two ideas that would immediately improve your practice, you will be asked to tell us which ONE would have the most immediate impact.

Base: Total Sample (n=1,343)

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### Family Physicians WANT OCFP to be involved in advocating for them. They STRONGLY agree OCFP should be advocating on their behalf and helping develop solutions to the burden they are facing.



Q33. How much do you agree or disagree that the OCFP should be involved in the following? Base: Total Sample (n=1,343)