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Title

Exploring the Longitudinal Work Patterns of Family Physicians from 2005-2019 - An Ontario Alberta Collaboration

Priority 1 (Research Category)

Healthcare Services, Delivery, and Financing

Presenters

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Abstract

Context: There is growing concern about the supply and distribution of Family Physicians (FPs) in Canada. With an aging FP workforce and preference for part-time practice, securing access to care for remains a dilemma for patients and funders of health care in many parts of the country. Survey data suggests physicians are working in less in recent decades. Our study highlights the actual trend in health services provided by FPs and aims to inform policy discussions on FP supply.

Objective: To determine the trend in service provision among 12,000 FPs in Ontario and 3500 in Alberta.

Study Design and Analysis: This was a descriptive observational study. We calculated the number of service days provided by FPs for each year in Ontario and Alberta using our previously published method. One service day is defined as 10 or more clinic visits per day valued at >20\$.

Dataset: De-identified linked FP claims from Alberta Health and the Ontario Health Insurance Program for 2005-2019 inclusive.

Population Studied: All FPs in Ontario and Alberta were included if they had evidence of 10 or more billings 3 days per week for at least 46 weeks.

FPs with no billings and Alberta FPs with shadow-billings were excluded.

Intervention/Instrument: n/a.

Outcome Measures: Average service days provided by FPs, and FP practice characteristics.

Results: In both Ontario and Alberta, the average service days per provider decreased over time among both male and female providers, and across all levels of experience. The decline in service days per provider was most pronounced in those most experienced (30+ years). From 2005 to 2018, in Ontario and Alberta, respectively, female FPs on average reduced service days by 16.8 and 45.44; male providers reduced service days by 9.5 and 27 service days per year. The next most pronounced decline was among

those with 10-19 years in practice in Ontario (25.6 male, 13.3 female) and those with 20-29 years experience in Alberta (8.56 male, 10.3 female). The smallest declines were found in new graduates (0-9 years in practice).

Conclusions: Service days provided by FPs in Ontario and Alberta appear to be declining differentially across FP subgroups. These results highlight important implications for accessing care and FP supply planning.

Learning Objectives:

1. To understand the trend in primary care provider work supply based on service provision.
2. To understand the utility of a service day definition to calculate physician supply.