

Submission Id: 5418

Title

Virtual Care in the Age of COVID-19: A Longitudinal Study on its Utilization and Perceived Effectiveness by Canadian FPs

Priority 1 (Research Category)

COVID-19

Presenters

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Abstract

Context: The COVID-19 pandemic has brought unprecedented changes in physician practices, especially by transitioning the primary method of care delivery from in-person to virtual. This study investigates the adoption and utilization of virtual care by Canadian family physicians throughout the COVID-19 pandemic. Objective: To evaluate the frequency of use of different virtual care modalities by family physicians during the pandemic, to understand how virtual care has impacted access to, and the quality of at the different pandemic time points. Study Design: Online, self-report survey administrated at the beginning of Covid-19 pandemic in May 2020, a year after and in May and June 2022. Personalized survey invitations and two reminders were sent via email to College of Family Physicians of Canada (CFPC) members. Setting or Dataset: The lists of all active CFPC members were utilized to reach family physicians from diverse practice settings across Canada at each of the three time points. A total of 7,934 family physicians (FPs) completed at least one of the three surveys. Population studied: The study included all active members of the CFPC with primary addresses in Canada. Outcome Measures: The frequency of using video calls, telephone, email, and text messaging in FPs' practice was evaluated via a five-point Likert scale. FPs assessed the impact of virtual care on access and quality of care. They estimated their weekly virtual care usage and compared their current patient care types frequency with their post-pandemic ideals. Results: While the percentage of FPs resorting using often or very frequently video, email, or text messages has been observed to decrease between the second and third survey, the use of telephone contact has seen a slight increase. Additionally, there's increasing belief that virtual care has improved patient access to care, mental health care, and patient interactions and relationships. During the pandemic's onset, 87% of office visits/contacts were managed virtually. A year later, this fell to 50%, and further decreased to 26% another year later. More in-person care (68% to 73%) and less telephone care (29% to 22%) are seen as ideal after the pandemic. Conclusions: Most Canadian FPs intend to continue using virtual care post-pandemic. Despite anticipating in-person care will remain predominant in their practice, FPs perceive potentials of virtual care to improve patient access and enable high-quality care for their patients.