2018 Vancouver Coastal Health Department of Family and Community Medicine Reappointment Survey

This online survey was delivered to all active department members as an email link. Data was collected using the survey tool available in REDCAP. Therefore the content below has a very different visual appearance than what was seen by those responding to the survey.

Table of Contents

CECTION 1. Introduction latter for the comment

SECTIO	N 1: Introduction letter for the survey	3
SECTION	N 2: Introduction questions for ALL DOCTORS	4
2.1	Name and Year of Graduation	
2.2	Additional Privileges	4
2.3	Language Ability	4
2.4	Work Week	
2.5	Locum Availability for Vacation/Illness Coverage	
2.6	UBC Faculty Appointment	6
SECTION	N 3: Defining Practice Style	
SECTION	N 4: LOCUM Questions	8
4.1	Locum Work Description	8
SECTION	N 5: HOSPITAL/RESIDENTIAL FACILITY PRACTICE Questions	10
5.1	Counting and describing work locations	10
SECTION	N 6: COMMUNITY-BASED FAMILY DOCTOR Questions	12
6.1	Focused versus General Practice	12
6.2	Counting and describing work locations	13
6.3	Panel Size	13
6.4	Access - # issues/appt, same day and after hours appts	14
6.5	Maternity care	
6.6	Special skills for special populations	
6.7	Special Visit Types and Services	
6.8	Electronic Medical Record and technology	
6.9	New Patients/"Attachments"	16
SECTION	N 7: NON CLINICAL MEMBERS	
7.1	Year Left Clinical Practice and scope of work	18
SECTION	N 8: ALL DOCTORS End of Survey Questions	19
JRVEY		

 $2018\,V ancouver\,Coastal\,Health\,Department\,of\,Family\,and\,Community\,Medicine\,Reappointment\,Survey$

Supplemental Materials for journal article "What family doctors actually want in a job: a cross-sectional survey of primary care reform priorities" by Lindsay Hedden, Setareh Banihosseini⁴, Nardia Strydom, Rita McCracken

8.1	ADDITIONAL QUESTIONS	. 19
8.2	Future Research	.21
83	Any additional comments you would like us to hear	21

SURVEY 2

SECTION 1: Introduction letter for the survey

This introduction was on the first page of the survey which was sent as a link in an email inviting all current department members to renew their annual privileges.

This year, the Department of Family and Community Medicine is collecting your practice information using this online tool. Once we have completed the data collection, we will anonymize the results and be able to very accurately describe the practice patterns of our members.

[...] The data will support primary care workforce planning efforts within and beyond Vancouver Coastal Health, and to share insights about our workforce with primary care leadership and stakeholders across the province.

We will NOT use the data to conduct any individual investigations or evaluations of your activity or practice patterns.

We appreciate all the contributions you make to our department and are grateful that you can share the details of how you work to help guide the future strategic direction of the department, and of primary care in BC more broadly.

Sincerely,

[Signed by Department Head]

SURVEY 3

SECTION 2: Introduction questions for ALL DOCTORS

The first set of questions was asked of all survey respondents.

2.1 Name and Year of Graduation

- 2.1.1.1 LAST NAME: Please provide your legal LAST name as it appears on your CPSBC registration
- 2.1.1.2 FIRST NAMES: Please provide your legal first name(s) as it(they) appear(s) on your CPSBC registration
- 2.1.1.3 What year did you graduate from medical school?
- 2.1.1.4 Did you attend medical school in Canada? Yes, No

2.2 Additional Privileges

- 2.2.1.1 Please check off all of the regions/areas in which you currently have or are applying for privileges?
 - BC Women's & Children's
 - VCH Vancouver (includes VGH, UBC Hospital, GF Strong, Community Health Services)
 - VCH Coastal
 - VCH Richmond
 - VCH Powell River
 - VCH (??? Double check if there are others, NARDIA should be last word on this):
 - VCH North Vancouver
 - VCH West Vancouver Bowen Island
 - VCH Sunshine Coast
 - VCH Howe Sound
 - VCH Bella Coola valley
 - VCH Central Coast
 - UBC
 - Fraser Health
 - VIHA
 - Northern health
 - Outside of BC

2.3 Language Ability

- 2.3.1.1 In addition to English what language(s) are you able to provide patient care or conduct non-clinical work?
 - Cantonese

SURVEY 4

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- Mandarin
- French
- Other languages, please specify

2.4 Work Week

2.4.1 Total Work Hours per Week

We understand that most family doctors do work outside of direct patient care and would like to be able to accurately describe ALL of your work.

2.4.1.1 On average, how many hours per week do you work (not including call coverage), in all your current professional capacities?

Allow only an integer

2.4.2 Description of types of professional work

2.4.2.1 We want to describe how your work is divided, please consider the number of hours worked per week (entered in the question above) to encompass 100% of your weekly work, now describe how your time is divided (must add up to 100%)

Direct patient care patients (at any location, in any capacity) (pt care)

Paper work/charting done directly related to seeing patients (pt care)

Business activities needed to run your practice (e.g. scheduling, banking, staff management, etc) (admin)

Clinical supervision of medical trainees (educ)

Classroom teaching of medical trainees (educ)

Medical leadership, e.g. MD lead for clinic, or elected position in SGP, etc (admin)

Committee work (clinic, department, division etc) (admin)

Research (research)

Other

2.4.3 Call Coverage

- 2.4.3.1 In ANY of the settings where you work do you provide call coverage (choose as many as are applicable).
- Yes Call group
- Yes all my own call
- Yes Physician Replacement Services
- Yes other arrangement
- No call

SURVEY 5

2018 Vancouver Coastal Health Department of Family and Community Medicine Reappointment Survey
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- 2.4.3.2 How many hours of call do you provide in a typical month? Integer, not a range
- 2.4.3.3 Do you receive MOCAP for any of your call work? Yes / No

2.5 Locum Availability for Vacation/Illness Coverage

- 2.5.1.1 Have you canceled, delayed vacations, or worked when you are sick, in the last 12 months because you couldn't get the (locum)coverage you needed?
 - Yes
 - No

2.6 <u>UBC Faculty Appointment</u>

- 2.6.1.1 Do you have a UBC clinical faculty appointment?
 - Yes
 - No
 - Don't Know
- 2.6.1.2 If yes, which faculty position do you hold?
 - Clinical Instructor
 - Clinical Assistant Professor
 - Clinical Associate Professor
 - Clinical Professor
 - Other Faculty Appointment
 - Don't Know

SECTION 3: Defining Practice Style

Respondents were forced to choose one answer that best described their practice, and then would answer a set of questions related to that choice.

We know that family medicine is practiced in many ways by our members. Please choose the single best answer that describes your practice.

- COMMUNITY-BASED FAMILY DOCTOR –
 ALL OF or at least A PORTION of my clinical work is COMMUNITY-
- HOSPITAL/FACILITY
 - I ONLY see patients in the HOSPITAL and/or A RESIDENTIAL FACILITY

BASED FAMILY MEDICINE (maybe in one or more clinics/settings)

- LOCUM
 - I ONLY provide LOCUM coverage.
- NON-CLINICAL
 - I <u>do not provide any direct patient care</u> in any setting (i.e. work is exclusively administrative, research, teaching, etc.).

SECTION 4: LOCUM Questions

Questions in this section only answered by those respondents who identified themselves as <u>ONLY providing Locum coverage</u> in Section 3.

4.1 Locum Work Description

4.1.1 Work in Family Practice Clinics

- 4.1.1.1 In the last 12 months, where did you locum? (choose all that apply)
 - Vancouver fee-for-service primary care clinic
 - VCH Community Health Clinic (CHC)
 - Other Vancouver locations
 - Other BC locations
 - Outside BC

4.1.2 Number of Clinics

4.1.2.1 In the last 12 months how many different clinic locations did you locum in?

4.1.3 Hospital-Based Locum Work (also includes residential care)

Please tell us about the hospital/facility-based work that you do.

- Doctor of the Week Inpatient care
- Hospitalist Inpatient care
- Inpatient Specialty consults (e.g. Addictions, palliative care, etc)
- Surgical assists
- Outpatient clinics based at hospitals, e.g. Breast Clinic, IDC
- Emergency Department
- Residential Care/rehabilitation
- Other hospital work, please explain

4.1.4 Months at Work

4.1.4.1 In the last 12 months, how many months did you work?

4.1.5 Motivations to Locum

- 4.1.5.1 Please tell us about your choice to work as a locum.
 - Just graduated, want to check out options
 - Want flexibility
 - Not interested in hassle of running a clinic, but like providing clinical care
 - Nearing retirement, want to scale back, but wish to continue practicing
 - Other, please explain:

4.1.5.2 In the next 12 months will you continue to locum?

Yes

SURVEY 8

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No

SURVEY 9

SECTION 5: HOSPITAL/RESIDENTIAL FACILITY PRACTICE Questions

Questions in this section only answered by those respondents who identified themselves as <u>ONLY</u> seeing patients in the HOSPITAL and/or A RESIDENTIAL FACILITY in Section 3.

5.1 Counting and describing work locations

5.1.1.1 Many family doctors work in more than one setting. How many locations do you work in (provide care to a SEPARATE PATIENT POPULATION) in a typical week? For example:

A family doctor who works 3-4 days a week at one hospital inpatient unit would count ONE location for this question.

A family doctor who works 2 days at a nursing home, 2 days doing surgical assists and a $\frac{1}{2}$ day providing addictions consults, would count THREE locations.

INTEGER ANSWER, pull down menu that has 1,2,3, ≥4

5.1.1.2 Please use the following table to describe each location where you provide care to a SEPARATE PATIENT POPULATION in a typical week.

	Name of clinic/service	Type of location	Patient access	Number hours per week	Type of payment
Location 1	Free text	PULL DOWN MENU Hospital clinic Hospital/facility inpatient unit Emergency department Specialty clinic Health authority clinic Other	PULL DOWN MENU Walk in only Patient books an appointment Patients need a referral to see me Patient is admitted to hospital/facility Other	Accepts an integer only	PULL DOWN MENU FFS only Sessional only Mixed payment Other
Location 2	Repeat of above	Repeat of above	Repeat of above	Repeat of above	Repeat of above
Location 3	Repeat of above	Repeat of above	Repeat of above	Repeat of above	Repeat of above
Location 4	Repeat of above	Repeat of above	Repeat of above	Repeat of above	Repeat of above

5.1.2 Hospital-Based Locum Work (also includes residential care)

Please tell us about the hospital/facility-based work that you do.

- Doctor of the Week Inpatient care
- Hospitalist Inpatient care
- Inpatient Specialty consults (e.g. Addictions, palliative care, etc)
- Surgical assists
- Outpatient clinics based at hospitals, e.g. Breast Clinic, IDC
- Emergency Department
- Residential Care/rehabilitation

SURVEY 10

2018 Vancouver Coastal Health Department of Family and Community Medicine Reappointment Survey

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•	Other hospital work, please explain

SECTION 6: COMMUNITY-BASED FAMILY DOCTOR Questions

Questions in this section answerded by those who chose "ALL OF or at least A PORTION of my clinical work is COMMUNITY-BASED FAMILY MEDICINE (maybe in one or more clinics/settings)" in Section 3.

6.1 Focused versus General Practice

Some family doctors have an area of speciality in which they do some or all of their work, for example, palliative care, substance use treatment, dermatology, emergency medicine, etc). We are interested in being able to count clinicians whom include ONLY FOCUSED practice, a combination of focused and general practice, and those that are ONLY general practice.

6.1.1.1 Please identify which description best describes your practice of family medicine for the last 12 months:

(forced choice)

- ONLY Focused practice
- · A combination of focused and general practice
- ONLY general practice

6.2 Counting and describing work locations

6.2.1.1 Many family doctors work in more than one clinical setting. How many locations do you work in (provide care to a SEPARATE PATIENT POPULATION) in a typical week?

For example:

A family doctor who works 3 days a week in one clinic, and goes and sees her patients, from that practice when they are admitted to hospital, would count ONE location for this question.

A family doctor who works 2 days in a "regular family practice" clinic, 2 days in a separate "walk in clinic" and a ½ day providing care for a hospital-based inpatient group, would count THREE locations.

INTEGER ANSWER, pull down menu that has 1,2,3,≥4

6.2.1.2 Please use the following table to describe each location where you provide care to a SEPARATE PATIENT POPULATION in a typical week.

	Name of clinic/service	Type of location	Patient access	Number hours per week	Type of payment
Location 1	Free text	PULL DOWN MENU Hospital clinic Hospital/facility inpatient unit Solo practice clinic 2-4 doctor clinic >5 doctor clinic Other	PULL DOWN MENU Walk in only Patient books an appointment Patients need a referral to see me Patient is admitted to hospital/facility Other	Accepts an integer only	PULL DOWN MENU FFS only Sessional only Mixed payment Other
Location 2	Repeat of above	Repeat of above	Repeat of above	Repeat of above	Repeat of above
Location 3	Repeat of above	Repeat of above	Repeat of above	Repeat of above	Repeat of above
Location 4	Repeat of above	Repeat of above	Repeat of above	Repeat of above	Repeat of above

6.2.1.3 In general, at your main place of community-based practice, how many patients do you see per hour?

Integer from 1-10 accepted

6.3 Panel Size

- 6.3.1.1 Including ALL of the locations where you work, what is your estimate of how many patients call you their "family doctor"?
 - <100
 - 101-500
 - 500-999
 - 1000-2000
 - >2000

SURVEY 13

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6.4 Access - # issues/appt, same day and after hours appts

- 6.4.1.1 In ANY of the community-based settings where you work do you have a policy that you will only address a limited number of issues per appointment?
 - Yes
 - No
- 6.4.1.2 In ANY of the community-based settings where you work do you provide same day appointments?
- Yes
- No
- 6.4.1.3 In ANY of the community-based settings where you work do you book (or see walkins) patients in evening and/or weekend appointments? (where evening is later than 5pm and weekends include Saturday or Sunday)
- Yes
- No

6.5 Maternity care

- 6.5.1.1 Please select all that apply to describe the clinical care you provide to pregnant women.
 - Pre-natal maternity care (alone or shared) up to 24 weeks
 - Pre-natal maternity care (alone or shared) from 24 weeks until labour
 - Intrapartum care (you deliver babies)
 - Postpartum care (first 6 weeks) (in-office follow-up)

OR

I do not provide any pregnancy-related clinical care

6.6 Special skills for special populations

- 6.6.1.1 Some family doctors have acquired skills and/or training to serve special populations. **Please identify any special populations for whom <u>you consider</u> <u>yourself to have special skills</u>. (select all that apply).**
 - Elders with Frailty
 - Lesbian, Gay, Bisexual or Queer
 - Transgender
 - Refugees/newcomers to Canada
 - People with Chronic Pain
 - Adults with disabilities
 - Palliative/End of Life care
 - People with HIV

SURVEY 14

2018 Vancouver Coastal Health Department of Family and Community Medicine Reappointment Survey
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- People with Active Substance Use Disorders
- People with mental health conditions
- 6.6.1.2 Do you treat substance use disorders (and/or opiate used disorder) in your practice?
 - Yes
 - No

Prescribe methadone?

- Yes
- No

Prescribe buprenorphine/naloxone?

- Yes
- No

6.7 **Special Visit Types and Services**

- 6.7.1.1 Many family doctors provide home visits or other care outside their offices. Please tell us if your practice includes any of the following (select all that apply):
 - House calls: home visits (including palliative)
 - Hospital visits: for your own patients (Supportive care hospital visits or as MRP)
 - Residential care visits
 - Outreach/street services to vulnerable/special populations
 - Care in school(s)
 - Correctional facilities
 - Other, special services offered, please specify

6.8 Electronic Medical Record and technology

- 6.8.1.1 Please check off ALL of the EMR systems that you use in your community-based settings.
 - OSCAR
 - Intrahealth
 - MedAcess
 - Wolfe/Telus
 - Other, EMR, please specify
 - No computer used

6.8.2 Technology Use with Patients

- 6.8.2.1 In any of the community-based settings where you work, do you communicate with patients by, select all that apply.
 - Email

SURVEY 15

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- Phone
- Text
- Skype/Video conference

6.8.3 Using your EMR for quality Improvement and/or research

- 6.8.3.1 Are you a member of CPCSSN (www.CPCSSN.ca) or the
 - Yes
 - No
 - Don't know
- 6.8.3.2 Health Data Collaborative (HDC)?
 - Yes
 - No
 - Don't know
- 5.7.3.3 Do you conduct your own in-clinic Quality Improvement or Research
 - Yes
 - No
 - Don't know

6.9 New Patients/"Attachments"

6.9.1 New Patients in the Last 12 Months

6.9.1.1 In the last 12 months how many new patients have you accepted? Give categorical 1-5, 6-20, 20-100, >100

- 6.9.1.2 Are you currently accepting new patients?
 - Yes
 - No
 - I don't know
- 6.9.1.3 If you are NOT accepting new patients are there exceptions?
 - Family member of current patient
 - Pregnant women
 - Someone who currently has no family doctor
 - Someone who is a frail elder
 - Other patients you might accept, please specify

6.9.2 "Meet and Greet" Screening Appointments

- 6.9.2.1 Do you require a "meet and greet" appointment with new patients?
 - Yes
 - No

SURVEY 16

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SECTION 7: NON CLINICAL MEMBERS

7.1 Year Left Clinical Practice and scope of work 7.1.1.1 What year did you leave clinical practice?

- 7.1.1.2 Please describe your current scope of work

SECTION 8: ALL DOCTORS End of Survey Questions

8.1 ADDITIONAL QUESTIONS

8.1.1 Adaptive Reserve¹

Please answer the following using your experience at your main place of work

8. 1. 1. 1 People in my practice operate as a real team.

Likert - strongly disagree, disagree, neutral, agree, strongly agree

8. 1. 1. 2 When we experience a problem in my practice, we make a serious effort to figure out what's really going on.

Likert - strongly disagree, disagree, neutral, agree, strongly agree

8.1.1.3 Leadership in my practice creates an environment where things can be accomplished.

Likert - strongly disagree, disagree, neutral, agree, strongly agree

8.1.2 Burnout²⁻⁴

8.1.2.1 How often do you feel burned out from your work?

- 0- Never
- 1- A few times a year or less
- 2- Once a month or less
- 3- A few times a month
- 4- Once a week
- 5- A few times a week
- 6- Everyday

8.1.3 Retirement Plans

- 8.1.3.1 When do you plan to retire?
 - Within the next year
 - In 1-2 years
 - In 3-5 years
 - In more than 5 years

SURVEY 19

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8.1.4 BC Primary Care Transformation

Currently 1/6 people who live in BC do not have access to a regular family doctor. The Ministry of Health, health authorities, the BC College of Family Physicians and Doctors of BC want to design effective solutions that would allow more family doctors to provide longitudinal care to larger numbers of people. Please provide your opinions about how this could be done.

8.1.4.1 Do you think we need to make any changes to how primary care is being delievered in BC?

Response options: Yes/No/Unsure

8.1.4.2 An alternative physician payment model, such as capitation or salary, could make it easier for me to provide longitudinal primary care to more people. Yes/No

Response options: Yes/No/Unsure

8.1.4.3 I would prefer to provide primary care in a model where I was an employee of a clinic, rather than a private business owner (e.g. staffing, clinic operations and overhead would be handled by my employer).
Yes/no

Response options: Yes/No/Unsure

8.1.4.4 Please rate the importance of the following options for transforming primary care in British Columbia so that more family doctors can provide longitudinal care to more people.

For each item, responses use scale – Not important, somewhat important, very important or unsure

- The option to practice primary care in a team setting.
- Direct funding for team roles, to expand services offered in a family medicine clinic. (e.g. nurses, social workers, occupational therapists, etc)
- Direct clinic funding, where overhead and staff salary costs are paid by the Ministry of Health.
- Alternative physician payment models, e.g. capitation or salary
- Loan forgiveness program, for debt accumulated during medical training.
- The option to commit to a patient panel for a fixed number of years e.g. 5 years (versus assumption you would be committed for a whole career).
- The option to work part time.
- Ability to take planned vacations and paternal leaves.

SURVEY 20

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- Transparent evaluation program, to ensure new models of care are delivering the services we wish to provide and spending tax dollars effectively.
- 8.1.4.5 Please add any additional comments or ideas that you have regarding primary care transformation in BC.

 Free text.

8.2 <u>Future Research</u>

- 8.2.1.1 Family Practice Departments are keen to increase our collective involvement in health services and clinical research. We would love to have your ideas and possibly participation. May we contact you about future family practice related research?
 - Yes
 - No

8.3 Any additional comments you would like us to hear

8.3.1.1 Please feel free to add any additional comments about your participation in the department and/or this survey here.

References:

- 1. Jaén CR, Crabtree BF, Palmer RF, Ferrer RL, Nutting PA, Miller WL, et al. Methods for Evaluating Practice Change Toward a Patient-Centered Medical Home. Ann Fam Med. 2010 May 1;8(Suppl 1):S9–20.
- 2. West CP, Dyrbye LN, Satele DV, Sloan JA, Shanafelt TD. Concurrent Validity of Single-Item Measures of Emotional Exhaustion and Depersonalization in Burnout Assessment. J Gen Intern Med. 2012 Nov;27(11):1445–52.
- 3. West CP, Dyrbye LN, Sloan JA, Shanafelt TD. Single item measures of emotional exhaustion and depersonalization are useful for assessing burnout in medical professionals. J Gen Intern Med. 2009 Dec;24(12):1318–21.

SURVEY 21

2018 Vancouver Coastal Health Department of Family and Community Medicine Reappointment Survey
Supplemental Materials for journal article "What family doctors actually want in a job: a cross-sectional survey of primary care reform priorities" by Lindsay Hedden,
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4.	Dolan ED, Mohr D, Lempa M, Joos S, Fihn SD, Nelson KM, et al. Using a Single Item to Measure Burnout in Primary Care Staff: A Psychometric Evaluation. J Gen Intern Med. 2015 May;30(5):582–7.