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Canada's top doctor groups launch super survey

Joint effort designed to affect government policy

By Matt Borsellino

OTTAWA – Three national medical groups are plowing money and resources into an historic effort to develop the most detailed data ever on physician practice patterns and their future plans.

The unprecedented initiative will hopefully produce a comprehensive database of what Canadian Medical Association president Dr. Sunil Patel says will be "balanced, credible and impartial" physician manpower information to help influence and improve policymaking.

The CMA, College of Family Physicians of Canada and Royal College of Physicians and Surgeons of Canada are sending 16-page questionnaires to 70,000 practising doctors, clinical teachers, administrators, residents and students across the country.

The survey builds on previous independent efforts by the three groups. Senior officials of the three groups hope their members will also see the benefit in reducing the number of surveys they're asked to complete.

The Canadian Institute for Health Information and Health Canada are also participating in the project that's likely to cost between \$800,000 and \$1 million over the next several years, the *Medical Post* has learned.

Response rates

The most immediate deadline, though, is May. That will be the first indication of how Canadian doctors respond to the effort. They're being encouraged by senior officials of all three groups to spend nearly half an hour completing the survey either online or by mail. If response is light, renewed efforts will be made this summer to get more participation.

Information produced by the National Physician Survey (NPS) is described in a group news release as "critical to developing a clearer understanding of many of the access and waiting time problems experienced by patients across Canada."

Analysis of the results will help medical lobby groups become better informed about the realities of practice and facilitate discussions with various levels of government.

The survey—one for family doctors and one for specialists—seeks the usual

demographic and geographic information. The NPS will give the groups a rare opportunity to analyse results by province, regions and individual specialties. They will also help create a profile of the kinds of service each is providing.

The survey also asks about such sensitive, controversial issues as work and patient care setting, practice profile, extent of on-call, funding mechanisms, information technology, views of access to care and professional satisfaction. Results will hopefully be available by fall.

"These (government) decisions are having a profound effect on the accessibility, not to mention quality of patient care," said CFPC president Dr. Robert Wedel.

"Why not make them with sound research and an understanding of what doctors do and plan to do in the next few years to provide highest quality care in a timely fashion to our patients?"

The new survey will enhance the CFPC's previous Janus polls, Dr. Wedel added, and the trends established by polling done in 1997, 2001 and this year will be as important as data collected in developing needed support policies.

"Data we're looking to generate here is used by health ministers and their deputies to influence some important decisions," he said. "Clearly, we're looking for good participation."

Canada's specialists and their patients face accessibility problems every day, said Royal College president Dr. John McDonald, who says such information can only help to develop better strategies to deal with those problems.

Dr. McDonald was asked what results he's particularly interested in seeing.

He plans to look closely at information about early retirees and why they're leaving practice as well as changing practices to see if there are things that can be done to improve professional satisfaction.

"There have been some very unwise policies put in place over the years that we now have to try to reverse," he added. "It will be easier to advocate for such change when you have good data. . . . It will be an important document for planning and looking at factors influencing decisions physicians are now making."

The CMA's Dr. Patel believes the effort bringing three national organizations together shows the kind of leadership governments respond to and is "the kind of thing we need more of in a national health system marked by discord between the federal and provincial governments.

"Governments have been known to cherry pick survey results in planning their policies," he added. "That's why we need survey information that's balanced, credible and impartial.

"We've tried to make it as easy as possible to complete the survey. We don't plan to be coming back to them for information again for another two or three years."

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