

# Canadian Association of Staff Physician Recruiters (CASPR) 2013 Members Survey Final Report



## CASPR 2013 Members Survey

- Objective: To understand the impact of electronic medical record (EMR) systems on the recruitment, retention and transition of physicians in community-based primary care settings from the perspective of staff physician recruiters across Canada.
- Methodology: Online quantitative survey administered to CASPR members and other staff physician recruiters in Canada (March, 2013).

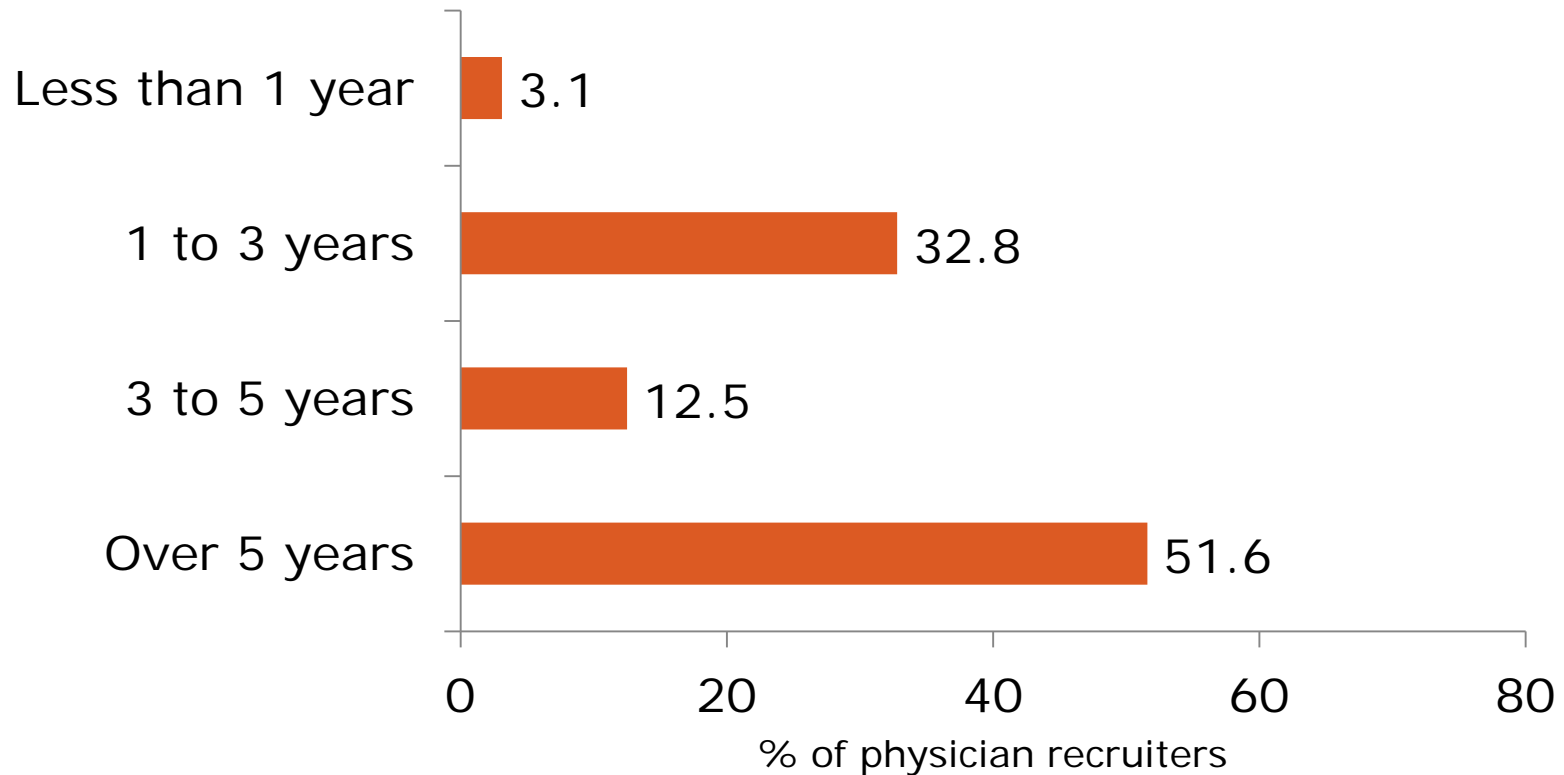


## Response Summary

- A total of 64 surveys were completed by physician recruiters (49% response rate). CASPR members comprise 98% of the sample.
- The majority of responses were from Ontario (56.3%); British Columbia (14.1%); and Alberta and Saskatchewan (10.9%, respectively).
  - Nova Scotia, PEI, Yukon and Manitoba also were represented.
- A small proportion of physician recruiters (3%) report supporting recruitment cross jurisdictionally.



## Years in practice as a physician recruiter



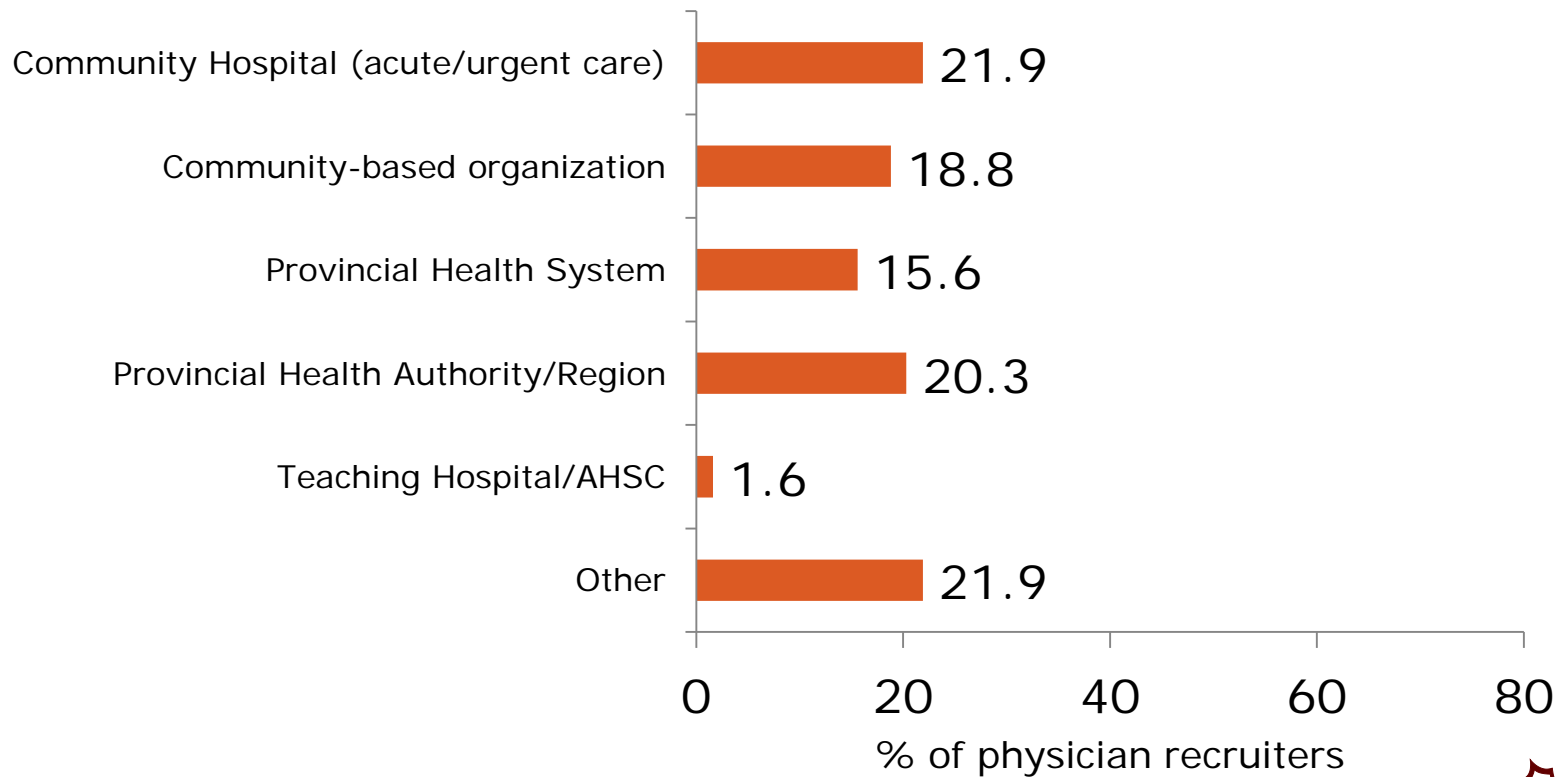
*Q. How many years have you been a physician recruiter?*

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# Organizational Affiliation

Physician recruiters are employed by a variety of organizations



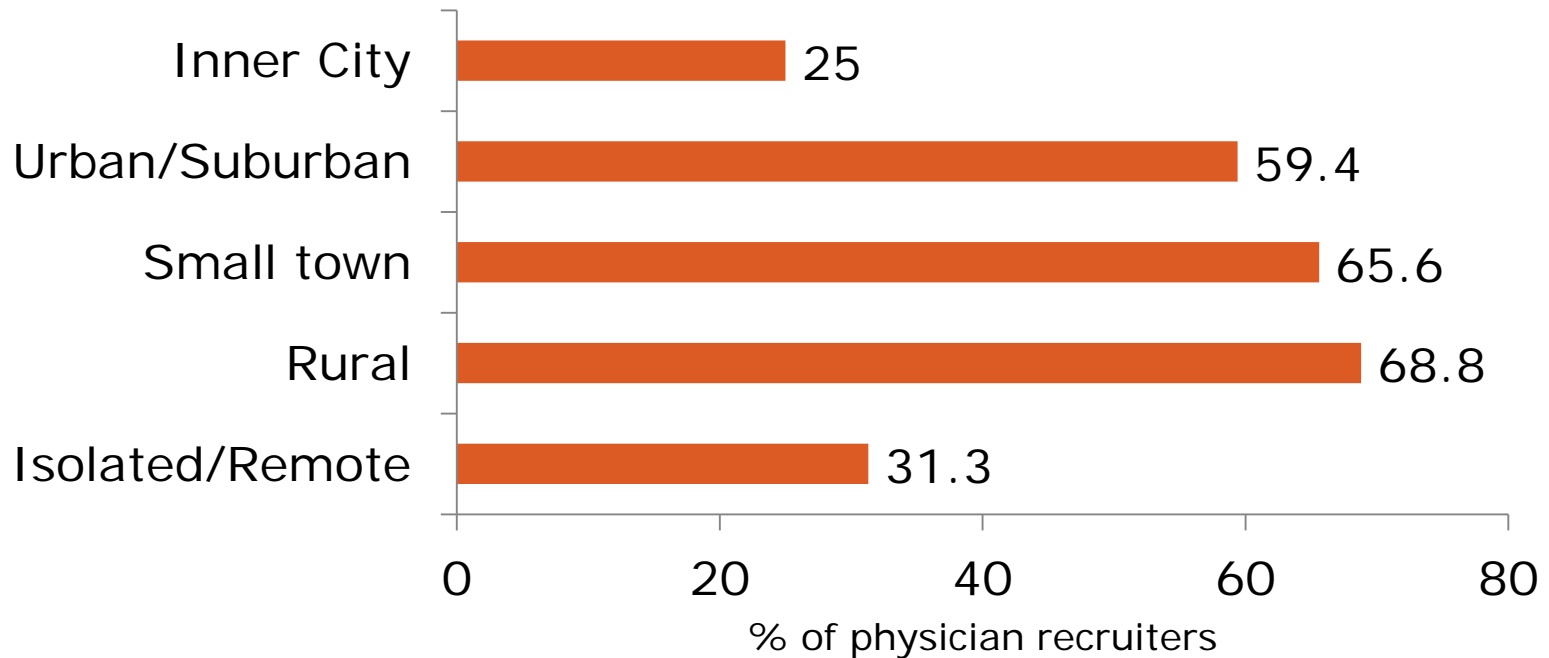
\*Other includes: Federal organization, University, Group of municipalities, DND

Q. Who is your employer?



# Geographic areas supported

Physician recruiters support a variety of geographic areas

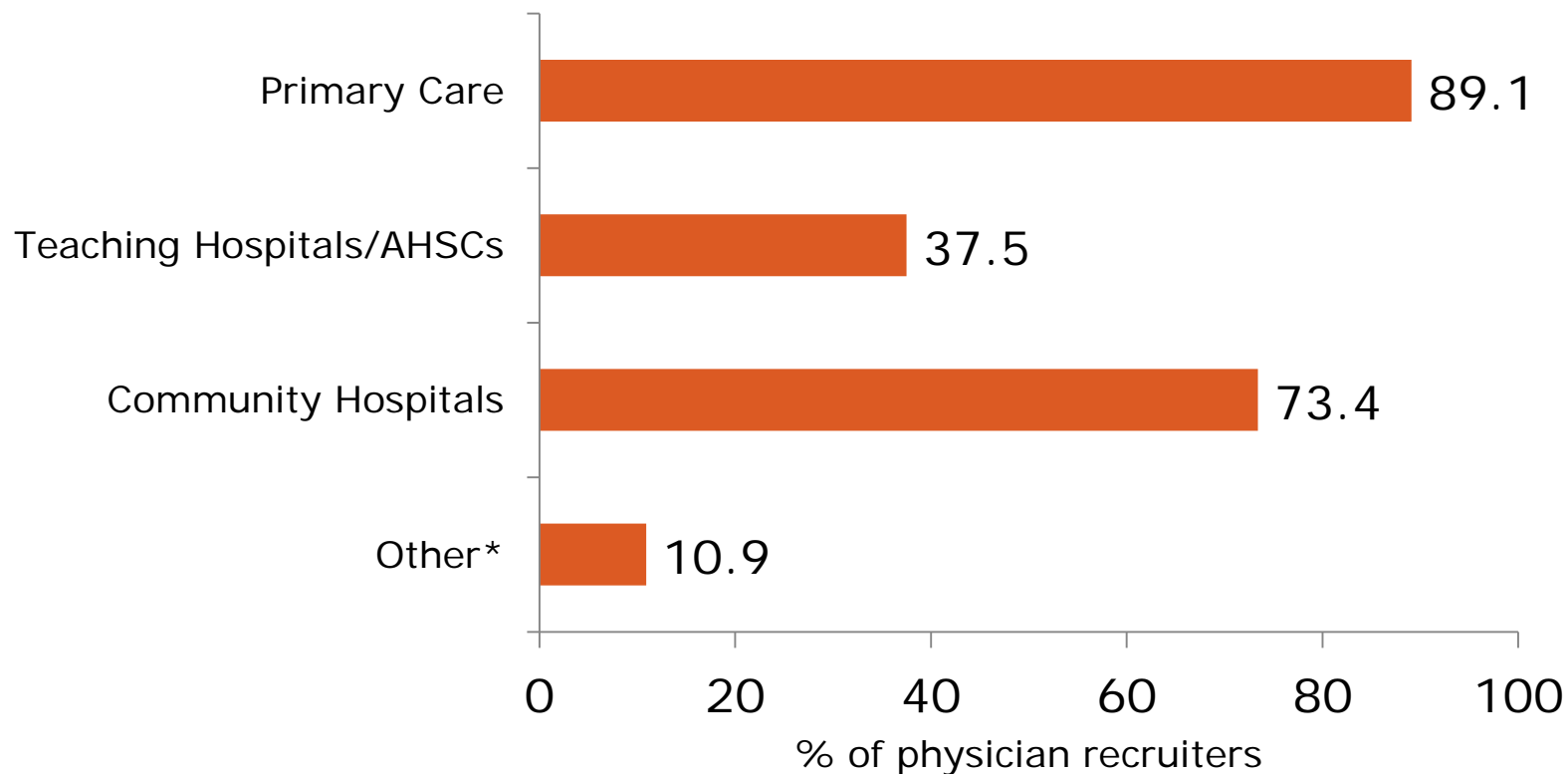


*Q. Which best describes the geographic areas where you support physician recruitment?*

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## Healthcare settings supported by recruiters



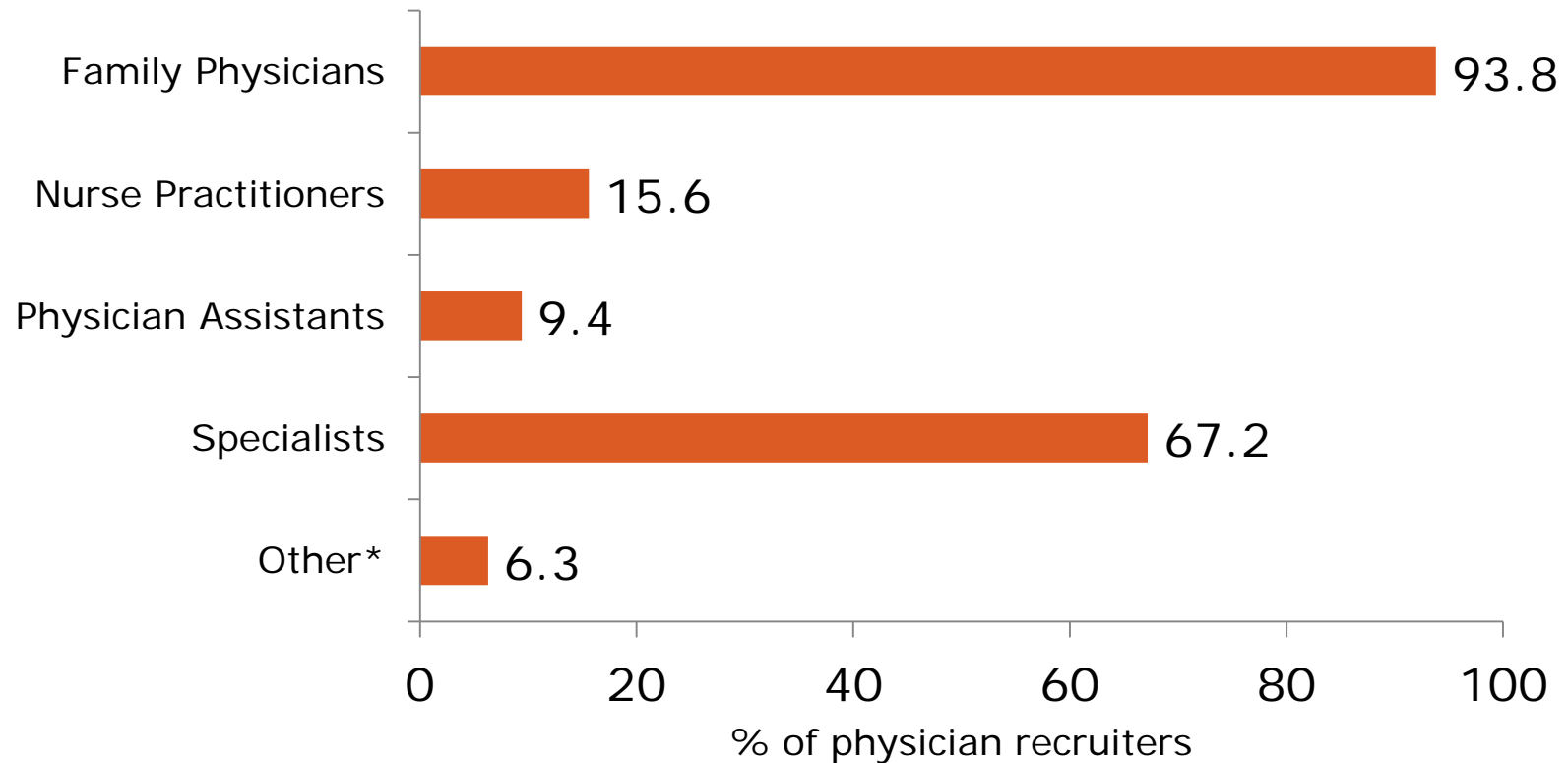
\*Other settings include: community-based specialists, mental health, Community health centres.

*Q. In which healthcare settings do you currently support physician recruitment?*

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## Focus of clinical professionals recruited



\*Other clinical professionals include: Academic clinicians, other health professions, clinical administrative leadership

*Q. Who do you recruit/what type of physicians do you recruit?*

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## Physician Recruitment – In practice

- Physician recruiters support placement of full-time and part-time/locum physicians in community-based practice and academic/teaching positions - as well as transition to retirement; and migration to other areas of the country.
- Placement of full-time family physicians in group vs. solo practice was 10:1 in the past year; and 9:1 (group vs. solo) for placement of part-time/locum physicians.
- Among those surveyed, a total of 57 physicians were supported in their transition to retirement; and 33 were supported in their migration to another practice location.



## % of Communities EMR-enabled

- On average physician recruiters estimate that approximately 63% of community-based primary care practices in communities they serve are EMR-enabled (March 2013).
- Physician recruiters estimate that 28% of community-based primary care practices in communities they serve are paper-based.
- *9% were unsure.*

*Q. Thinking of the communities you serve, what is your best estimate of the proportion of community-based primary care practices that currently use an EMR versus paper-based medical record system?*



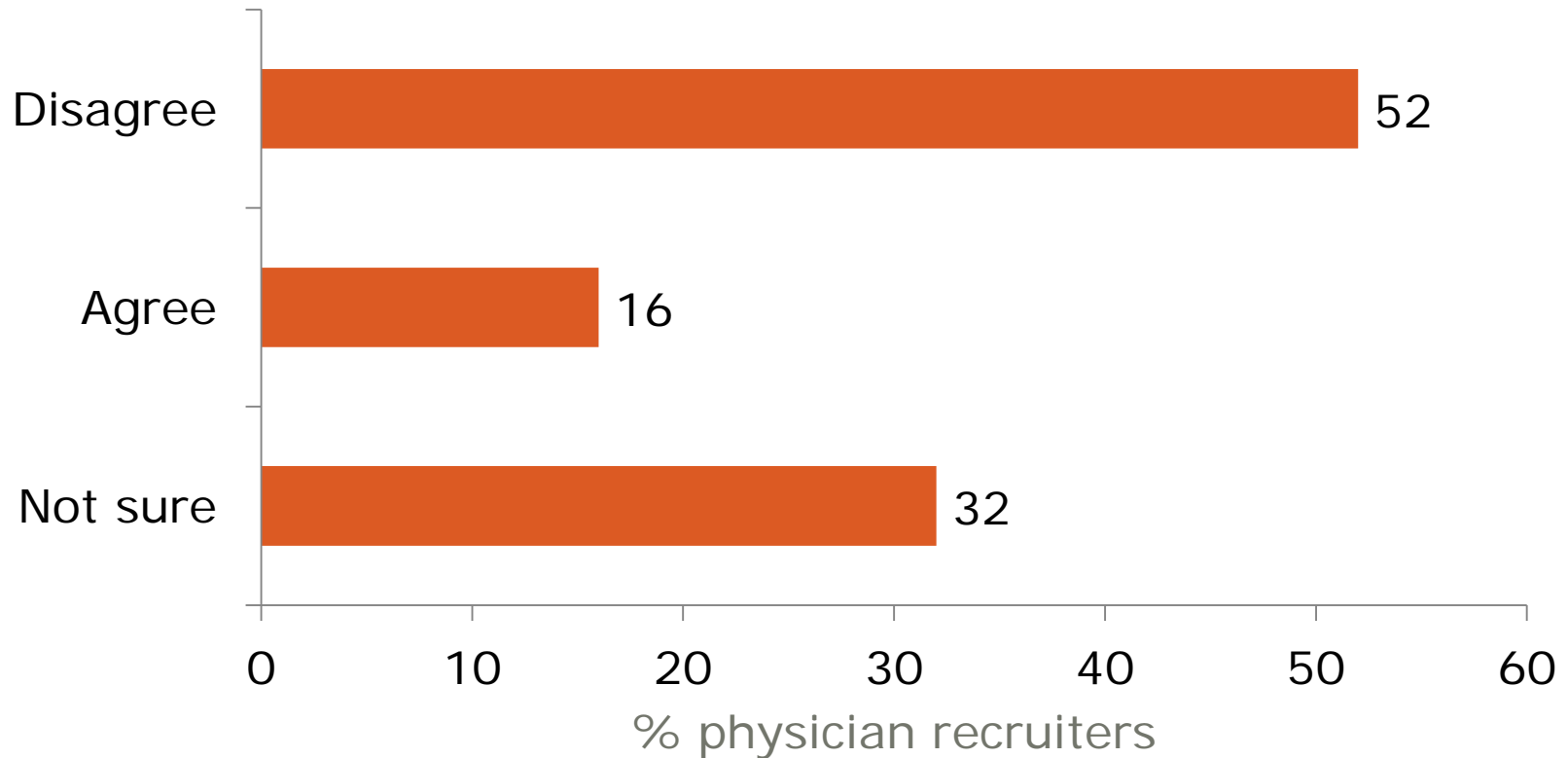
# Impact of EMRs on physician recruitment



- 95% of physician recruiters report **an EMR is an 'important or essential' factor for most residents** when they decide to tour/visit a practice.
- 19% report that in the past year physicians could not be placed in communities of interest because available practices were not EMR-enabled (**26** physicians in 2012).

- 92% report that an EMR-enabled practice is **'more valuable'** than a paper-based practice to a FP/GP considering passing on, handing over or selling an existing practice.

## Patients are orphaned because practice is not using an EMR



*Q. Patients are orphaned in the communities I serve because the physician practice is not using an EMR*

## Practice Potential Value

- **80% of physician recruiters report that an EMR is 'Very important' or 'Essential' to Practice Potential Value.**
- Other factors contributing to practice potential value include:
  - Income potential
  - Practice structure/Primary care model
  - EMR in use
  - Manageable practice/roster size (#pts)
  - Mentorship and fit with local collaborative medical culture
  - Clinic culture – staff consistency/stability



## Why paper-based practices have not adopted

### Physician recruiters perceive that paper-based practices have not adopted an EMR because:

- Physician is close to retirement (age)
- Physician is change adverse (tech capacity of physician and time or clinic staff support to manage the change)
- Cost of EMR/Implementation
- System or technology is distant from future state (e.g. connectivity to laboratory information)
- Other mentions include: *Lagging consensus among practice group members, small practice size (solo)*



## Top reasons to adopt EMR

### **Physician recruiters perceive that EMRs facilitate:**

- Practice collaboration and continuity of care
- Practice efficiency – workflow, space, etc.
- Attracting new generation of physicians to local practice
- Patient benefits – proactive care/management and privacy/security
- Enhanced communication and integration of patient information from other points of care



## Summary of Key Findings

- Recruiters report a similar proportion of EMR-enabled primary care practices in the communities they serve compared to the provincial representation in this sample and that of the CWF 2012.
- High levels of perceived impact of EMR use to support practice capacity to deliver quality of care; and a key factor in promotional efforts to family practice residents.
- A small proportion of recruiters (23%) report that physicians who were placed in communities they serve adopted (purchased) an EMR when taking over a paper-based practice. 19% reported they could not place an interested physician because no practice(s) with an EMR were available in the communities they serve. When asked, a total of 26 physicians could not be placed for this reason in the past year.
- Recruiters report that an EMR is among the most important factors to practice potential value to most family physicians.
- 92% report that an EMR-enabled practice is 'more valuable' than a paper-based practice to a FP/GP considering passing on, handing over or selling an existing practice.





# Appendix

## Perceptions of EMRs

% Strongly/ Moderately Agree	<i>Q. Please indicate your level of agreement or disagreement with each of the following statements below.</i>
96%	An EMR enhances clinician and care team capacity to coordinate the continuity of care.
95%	An EMR improves inter-professional collaboration amongst providers.
93%	An EMR improves clinician and care team productivity .
93%	An EMR improves the quality of care clinicians and care teams can provide.
84%	An EMR-enabled practice makes my job easier to recruit physicians to the communities I serve.
74%	An EMR-enabled practice enhances sustainability of health human resources in primary care for the communities I serve.
65%	An EMR-enabled practice makes my job easier to transition physicians from active patient care to retirement.





Thank you