

Demand for physicians and their services

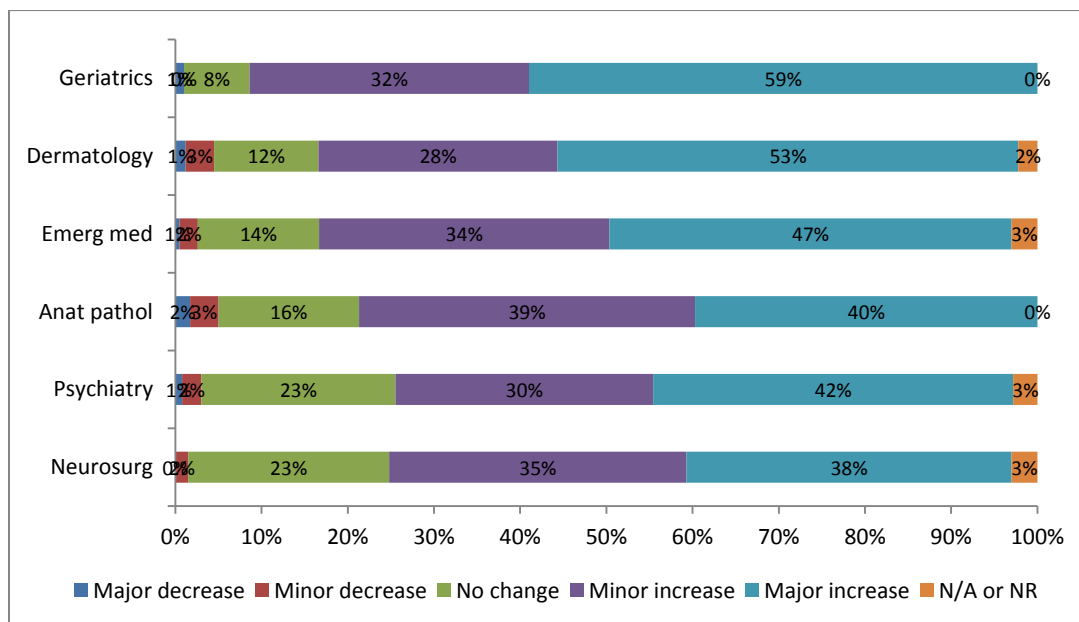
The 2013 National Physician Survey focused on employment issues and among surgeons in particular there was some concern about underemployment ¹. The vast majority of physicians, however, were either employed to their satisfaction (59%) or felt they were overworked in their discipline (32%).

Of those who were overworked, 11% reported there had been a major decrease in supply of physicians in their specialty within the last two years whereas only 4% reported a major increase. Interestingly, the proportion reporting minor decreases (22%) or minor increases (26%) was similar and 35% reported no change.

Two thirds of all physician respondents indicated that the need for the services they provide had increased over the last two years, either in a major or minor way. This was particularly true in Newfoundland & Labrador and Quebec where 73% of physicians indicated an increase in demand.

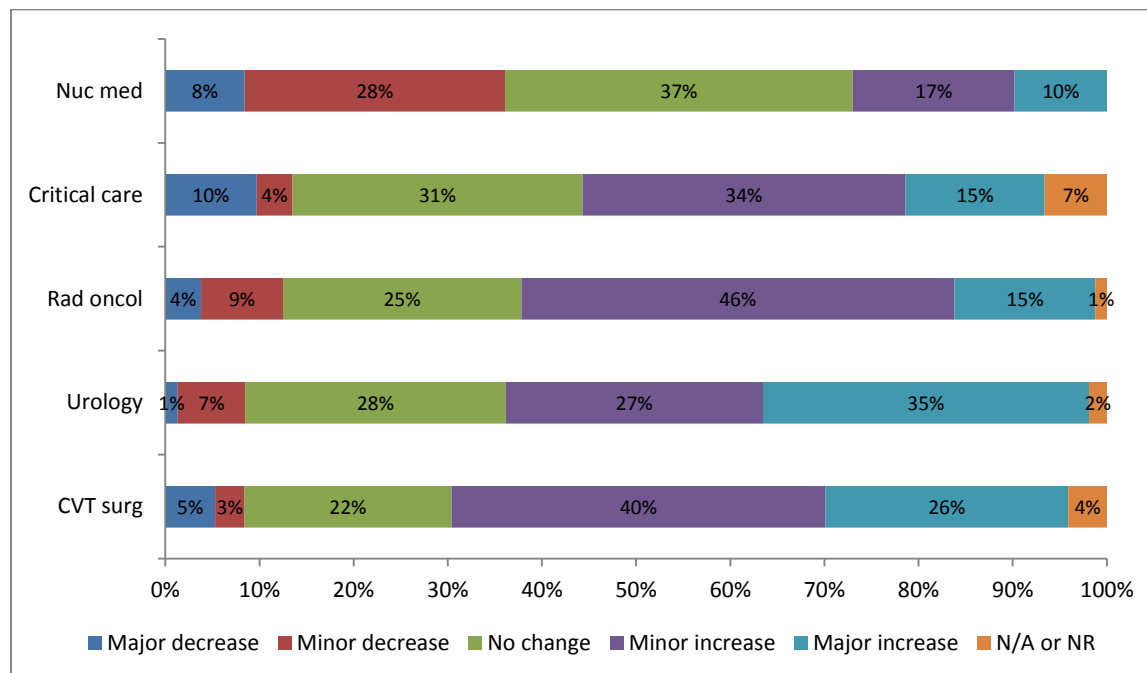
There is no surprise given our aging population, that geriatric medicine leads the list with nine out of ten physicians (91%) indicating an increase in the need for their services. Selected specialties of note are dermatology (81%), emergency medicine (80%), anatomical pathology (79%), psychiatry (72%), and neurosurgery (71%). For the physicians who indicated at least a 10% decrease in the need for their services, most were in diagnostic related specialties with nuclear medicine the highest with 36% reporting decreased demand. See Graph 1 and 2.

Graph 1: Change in need for their specialty in last two years – specialties with high increased need



¹ Through the lens of underemployed surgeons. Bulletin of CMA Canadian Collaborative Centre for Physician Resources. November 2013. http://www.cma.ca/multimedia/CMA/Content/Images/Policy_Advocacy/Policy_Research/36-NPSSurgeonEmployment.pdf

Graph 2: Change in need for their specialty in last two years – specialties with decreased need



Physicians were also asked if there had been a change recently in restrictive policies or privileges. This might encompass such things as billing number restrictions, mobility, hospital privileges, etc. Overall, most (60%) reported no change within the last two years; however a not insignificant proportion percentage (22%) indicated there had been a minor or major increase. This was most noticeable in New Brunswick with 30% reporting increases compared to 16% in Quebec.

Others working in the same domain

Almost two thirds of family physicians indicated some activities within their domain are carried out by other health professionals. When asked to list three health professionals that did so, many FP respondents (42%) indicated that nurse practitioners carried out some of the same activities as they did, followed by 25% indicating pharmacists, 18% for registered nurses, and 17% for diabetes educators/nurses. The least likely health professionals to be included in their list were audiologists, massage therapists and speech language pathologists at less than 1% of mentions, and acupuncturists and dentists/dental surgeons at just over 1%.

Almost four out of five ophthalmologists (78%) reported that other health professionals are providing services within their domain of practice. Geriatrics physicians were also quite likely to report this at 73% as were obstetricians/gynecologists at 64%.

Almost all of the ophthalmologists (98%) indicated optometrists as the primary group that provide some components of their specialty domain. For obstetrician and gynecologists, two thirds reported that midwives are providing services within their domain of practice.

British Columbia are less satisfied with their access to hospital beds (34%). Emergency physicians experience the highest rate of dissatisfaction with 88%.

Over half of family physicians reported unsatisfactory access to hospital beds (57%) and MRI scans (53%). Access to PET scans rated even worse with 60% unsatisfied. Of the family physicians that provide endoscopy, 40% were unsatisfied with their access to endoscopy suites.

Among other specialists providing endoscopy, about 30% were dissatisfied with their access to operating rooms and endoscopy suites. The ratings were the worst among the younger age groups. Just over 40% of those under 35 years old considered their access to operating rooms to be unsatisfactory compared to 27% for those 55 or older. Likewise with endoscopy suites, 44% of the younger specialists were less satisfied with their access to endoscopy suites compared to about one quarter of the oldest age groups.

Summary

Depending on the specialty, physicians are experiencing both increased and decreased need for their specialty. However, increased demand may not result in increased provision of services in a timely fashion if access to resources such as hospital beds is viewed as less than optimal; this will not only vary by specialty but by province as well. There is clearly overlap of physician activities being carried out by other health professionals, especially in the area of primary care. Some of these activities have always been within the scope of the providers but others are relatively new such as pharmacist prescribing.

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