

The Role and Value of Family Physicians in British Columbia

Position Paper and Research Results APRIL 2022





We bring everything together: we get to know our patients and their values and goals, then help guide them towards health by empowering them with our advice and care. We use the best available evidence and our clinical expertise to help create a plan that fits their needs. Family physicians look at the whole person and recognize the impact that excellent and poor health has on a person's life and well-being. We also recognize how the context of a person — their world views, their financial status, their responsibilities, their past traumas — impact health. We are the only health care provider who can provide expert, evidence-informed, wholeperson, patient-centred care, across all ages and stages of life, and we are constantly working behind the scenes to improve the health system and the other things that impact health in our communities."

BC family physician

A letter from the British Columbia College of Family Physicians

The British Columbia College of Family Physicians (BCCFP) is a not-for-profit organization that advocates for the future of family medicine. The BCCFP represents more than 6,000 family physicians, residents and medical students.

Family physicians are the bedrock of the health care system and handle the majority of the health care issues that patients may have over their lifetime. Most family physicians enter family medicine because they want to make a difference in their patients' lives, to build a relationship, over time, and provide individualized care to their patients.

The BCCFP and our members recognize that a great deal of work is going into primary care transformation. We believe in the importance of the BCCFP and family physicians' voices being central to that conversation. We want to work in a system that allows family physicians to use their skills, expertise and experience derived from a minimum of 11 years of education and many years of practice, to deliver the highest quality of care to British Columbians.

Change is required so that family physicians can continue to support the health care system at the forefront and help patients with their health care concerns. We are advocating on behalf of our patients, and the almost-one-million British Columbians who do not have, and can't get access to, an ongoing relationship with a family physician. We want to work with government to find ways to better support family physicians in the service of improving access for all BC residents.

We launched My Family Doctor Cares, a campaign to bring attention to the value of having a family physician and the challenge almost one million British Columbians have finding one. There may be enough family physicians in BC, but graduates are choosing not to go into comprehensive family practice because it is so under supported. Forty per cent of British Columbians are concerned they will lose the family doctor they currently have, and as family physicians retire, we have fewer new physicians to replace them. The end result is a shortage of family physicians to take on new patients and undue pressure on the physicians that are providing comprehensive care.

The BCCFP is proud of the role our members play in delivering high quality health care services to communities across British Columbia. Our recent public polling shows that the public values the important role of family physicians within the health care system. Polling amongst our members, however, reveals that family physicians feel undervalued and unsupported by the health care system overall. They are looking for increased support to address rising costs of doing business; equity in the way family doctors are compensated; and acknowledgement of the increasing administrative burden placed on them. There is a lack of recognition by government for the foundational work performed by family physicians.

Our members also believe the conditions under which they currently work are in the way of all British Columbians having access to an ongoing relationship with a family physician. These conditions — the increasing complexity of care and burden of substantial non-clinical work — lead to physician burnout and to fewer doctors entering and remaining in the practice of comprehensive family medicine. Our 2022 public polling research reinforces this position. Nineteen per cent of individuals without a family physician cited the reason as "their doctor closed their practice." This was up from 9 per cent who cited this reason in our 2019 research.

We need family physicians in hospitals, walk-in clinics and urgent care centres, but this should be in addition to, and not instead of British Columbians having an ongoing relationship with a family physician who knows them and can treat them within the context of their life.

We are asking government to ensure every British Columbian that wants an ongoing relationship with a family physician has that choice. We are also asking government to work with family physicians to reduce the time spent in non-clinical work, so we can create more accessible care and spend more of our day providing direct patient care. We need to recruit and retain more family doctors to the practice of comprehensive family medicine.

Now is the time to bring together what the public told us they want, need and deserve, and what the evidence shows is meaningful, high quality care. With this knowledge and support, together with patients, family physicians, and supportive partners in care delivery, we can arrive at a health care system that invests in its foundation and supports family physicians in their pursuit of providing exceptional patient care.

BC College of Family Physicians

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BACKGROUND:

Undertaking research to better understand patients' and family physicians' health care needs and experience

The BC College of Family Physicians (BCCFP) supports family physicians by advocating on behalf of our members so they can provide optimal patient care. The BCCFP is the professional home to more than 6,000 family physicians, residents and medical students that make up our membership. We undertook public polling research in 2019, and then again in 2022, as well as surveying our members, to better understand public perceptions and members' experience of practising family medicine in British Columbia.

A) PUBLIC POLLING

The BCCFP conducted statistically reliable public polling research in 2019, which we updated in 2022 to better understand the public's perception of family physicians and the challenges patients face accessing timely health care.

The BCCFP engaged the services of an independent, third-party, BC-based research company that conducted interviews via an online, web-based survey and in 2022, by telephone interview, with a random sample of BC residents 18 years of age and older.

Researchers distributed interviews across the five geographic health authority areas and weighted the sample to match Statistics Canada census data on the basis of gender, age and region.

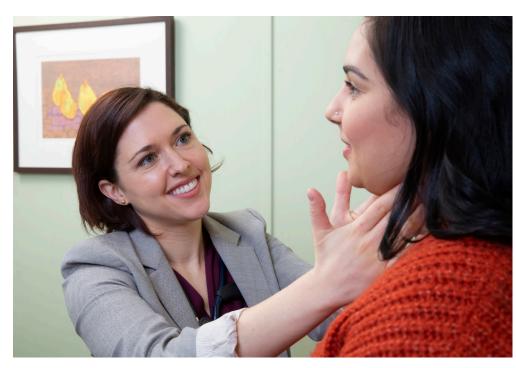
B) FAMILY PHYSICIAN SURVEY

The BCCFP also conducted polling research with BCCFP members. All members received open-ended, online survey questions with response from 814 family physicians. This represents approximately 15 per cent of members.



We handle 90 per cent of the health care issues that a patient may have. We are well-trained professionals that strive to treat the patient as a person with a health care problem and put that problem into the context of the individual's personal life. Health care isn't one-size-fits-all. Family physicians bring the individual context into the equation when it comes to treatment options."

— BC family physician



Dr. Justine Spencer

PART 1:
Patients'
experience with
family physicians

A) AVAILABILITY OF FAMILY PHYSICIANS

Research Highlights

84%

of BC residents have an ongoing relationship with a family physician

92%

of adults 55+ have a family physician

73%

of adults 18 to 34 have a family physician

40%

of BC residents with a family physician are concerned about losing them to retirement or closure of practice

BC's family physicians play a central role in the early identification of disease, improved management of chronic illness and helping people stay well. By developing trusting relationships with individuals and families over time, family physicians provide effective, high quality, continuing care that often spans a patient's lifetime.

Eighty-four per cent of British Columbians have an ongoing relationship with a family physician, similar to Statistics Canada national reporting that 84.7 per cent of Canadians have access to a regular care provider. This ranges from 82 per cent in Vancouver Coastal to 94 per cent in Northern Health. Access also varies by age, with only 73 per cent of those 18 to 34 years having a family physician, while 92 per cent of those 55 years and older have a family physician. Forty per cent of BC residents with a family physician are concerned about losing them to retirement or closure of practice, leaving them with difficulty finding a new one at a time when there are almost one million residents without a family physician.

Of the 16 per cent of British Columbians that do not have a family physician, over two-thirds cite, "Can't find one," as the reason. Nineteen per cent cite the reason for not having a family physician as their doctor closed their practice, up from 9 per cent in 2019.

Nine-in-10 women report having an ongoing relationship with a family physician compared to eight-in-10 men. Among those living in a relationship with a spouse or partner, 94 per cent of women compared to 68 per cent of men report they are the primary health care decision maker in their family and responsible for making health care appointments.

TABLE 1: DISTRIBUTION OF BC RESIDENTS WITH A FAMILY PHYSICIAN			
	Total	84	16
GENDER	Male	81	19
	Female	88	12
AGE	18 - 34	73	27
	35 - 54	83	17
	55+	92	8

Table 1 shows the percentage of BC residents reporting having a family physician that has accepted them as an ongoing patient. Data was collected during public polling in 2022.

B) FIRST POINT OF CONTACT INTO THE HEALTH CARE SYSTEM

Research Highlights

70%

of BC residents identify their family physician as the first point of contact for a health concern

When asked who is their first point of contact for a health concern, 70 per cent responded, "My family doctor who I see on an ongoing basis", 20 per cent identified a "doctor in a walk-in clinic" and 2 per cent a "doctor in telehealth". This is consistent across health regions, gender and ethnicity. However, it is inconsistent across age groups, with 39 per cent of those 18 to 34 seeing a doctor in a walk-in clinic, compared to only 8 per cent of those 55+.

While there is a role for family physicians to play in hospitals, walk-in clinics and urgent care centres, this should not be at the expense of British Columbians having an ongoing relationship with a family doctor who knows them and can treat them in the context of their life.

The continuity of care provided by family physicians helps patients understand, prevent and manage illness; navigate the health care system; and set health goals. Family physicians collect and use data to monitor and manage their patient population and use the best science to prioritize services most likely to benefit health.

According to Vancouver Coastal Health, "Regular medical care, or primary health care, is about keeping you healthy through access to basic, everyday health care

services. We believe in taking a proacvtive approach to your personal health care by encouraging ongoing comprehensive care with a family doctor."

Research shows that family physicians provide a higher level of continuity of care, which is associated with lower mortality rates, improved patient satisfaction and fewer hospitalizations and emergency room visits.

TABLE 2: POINT OF CONTACT FOR A HEALTH CARE CONCERN

		AGE			
	Total %	18 - 34 %	35 - 54 %	55+ %	
My family doctor who I see on an ongoing basis	70	49	73	81	
A doctor in a walk-in clinic	20	39	20	8	
A doctor in an ugent care centre	3	3	1	5	
Telehealth (Babylon, Maple, Medeo Etc.):	2	5	2	1	
Nurse Pracitioner	1	1	1	2	
Other	1	1	-	<1	
I don't know	2	1	2	2	
I don't see anyone for health concerns	1	1	1	1	

Table 2 shows the results to the question, "Which of the following best describes where you go when you have a health concern?" Data was collected during public polling in 2022.

"

We really are doing the best we can within a system that encourages us towards quantity over quality, procedures over time spent dealing with complex issues... We want to take the time to hold a hand, deal with more than one problem, get things organized and deliver excellent care...but we work in a very complex system and the current model makes it exceptionally challenging to do the excellent job that we are more than capable of."

— BC family physician

C) IMPORTANCE OF ROLE OF FAMILY PHYSICIAN IN OVERALL HEALTH

Research Highlights

80%

of BC residents see a family physician regularly

90%

of these say family physicians play an important role

Of the patients who have a family physician, eight-in-10 see them on a regular basis. Of patients who see their physician regularly, nine-in-10 report that their family physician plays an important role in their overall health. This ranges from 88 per cent in Northern Health to 95 per cent in Vancouver Coastal Health and Island Health. The value of a family physician is highest among older residents.

BC residents understand the role their family physician plays in their overall health. Among those with a family physician, they believe continuity of patient care provides better health outcomes. They also appreciate the important role family physicians play in the early identification of disease. As the main point of contact for access into the health care system, family physicians play a central role in enhancing wellness and in diagnosing and managing disease and illness. BC residents see family physicians as the cornerstone of the BC health care system.

Academic research indicates that a higher supply of family physicians is correlated with "better health outcomes, including a higher Health Utilities index (a rating scale used to measure general health status and health-related quality of life); better health after age 40; and better health outcomes for individuals with a diagnosed chronic condition." High primary care physician supply is associated with lower mortality due to heart disease, cancer and stroke, as well as better diabetes care.

TABLE 3: IMPORTANCE PLACED BY BC RESIDENTS ON THE ROLE OF THE FAMILY PHYSICIAN (%)

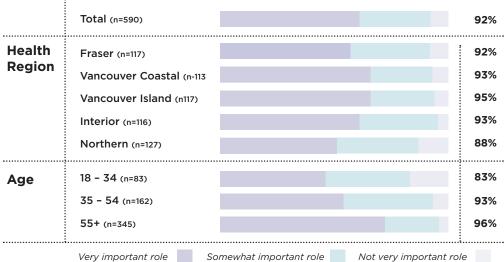


Table 3 provides detail on the importance of the role of the family physician across health authorities, and by age of respondents. Data was collected during public polling in 2019.



Dr. Gordon Stahl

BC residents also appreciate the role family physicians play in advocating on behalf of their patients to ensure they receive the care and services they need from other parts of the health care system, particularly diagnostic testing and access to other medical specialists. The characteristics of family physicians that are most valued by patients are "caring, empathetic, ability to listen and not feeling rushed". Patients also value the family physician's "knowledge and accuracy of judgement", as well as the long-term relationship they have built with their physician and the continuity of care this provides.

D) POSITIVE IMPACT ON HEALTH FROM A LONG-TERM RELATIONSHIP WITH A FAMILY PHYSICIAN

Research Highlights

81%

of BC residents know family physicians improve management of chronic disease

73%

know family physicians decrease emergency room visits

71%

know family physicians decrease hospital admissions

67%

know family physicians increase cancer detection

BC residents are most aware of the impact family physicians have on improving the management of chronic disease, followed by decreasing emergency room visits and hospital admissions. They are least familiar with their role in increased cancer detection, with a low of 56 per cent in Vancouver Coastal to a high of 77 per cent in Northern Health.

It is currently difficult to find a family physician who is accepting new patients. Family physicians report that they receive daily requests from patients without a family physician to join their practice. While it is challenging to continually have to turn patients away, family physicians report that accepting more patients means longer wait times for appointments for their existing patients. Much as they want all patients to receive ongoing care, without more support, they will continue to have to turn patients away.

E) EXPERTISE OF FAMILY PHYSICIANS

Research Highlights

93%

of BC residents believe it is very important to have one health care professional primarily responsible for their care

19%

of BC residents without a family physician cited the reason as their family doctor closed their practice. This is a 100% increase from 2019.

Virtually all respondents believe it is important that there be one health care professional who knows them, their family and their medical history; is aware of ongoing treatment; and who oversees tests and refers them to specialists.

BC residents believe that family physicians are experts in listening and in diagnosing and treating the whole person. A patient-centred approach, where a strong relationship exists between patients and their family physician, has been proven to prevent disease, improve health outcomes

and is one of the most important factors to change health.

According to Dr. Margaret Chan, former Director General of the World Health Organization (WHO), "Family physicians have always been the bedrock of comprehensive, compassionate and people-centred care. The work of a family physician is both difficult and demanding... Their waiting rooms may have patients in every age group, with every imaginable symptom and complaint, with the full spectrum of challenges modern medicine is expected to address." Family physicians also "have the satisfaction of getting to know their patients over time, and watching their lives and health evolve. Family physicians do the detective work that deepens the diagnosis to include the social and environmental causes of ill health."

TABLE 4: IMPACT ON HEALTH

HEALTH REGION

	Total (750) %	Fraser (150) %	Vancouver Coastal (150) %	Vancouver Island (150) %	Interior (150) %	Northern (150) %
Aware of Any	86	86	81	90	91	87
Improve management of chronic disease	81	81	72	86	89	81
Decrease emergency room visits	73	68	72	78	81	75
Decrease hospital admissions	71	69	68	75	80	73
Increase cancer detection	67	67	56	74	72	77
Not Aware of Any	14	14	19	10	9	13

Table 4 shows responses to the question of BC residents' awareness of the impact of family physicians on specific health-related issues. Data was collected during public polling in 2019.



Dr. Tim Hsia

F) PATIENTS' EXPERIENCE WITH BC HEALTH CARE SYSTEM

Research Highlights

7.1/10

Average rating of the BC health care system

7.3/10

Average rating for those who see a family physician on a regular basis

6.5/10

Average rating for those who access health care services at a walk-in clinic

6.7/10

Average rating for those who see a nurse practitioner

5.3/10

Average rating for those using Telehealth to access a family physician

BC residents rate their experience with the health care system an average of 7.1 on a 10-point scale. This is consistent across all health regions. However, residents who see a family physician on a regular basis provide a higher rating of 7.3/10. This rating decreases to 6.5/10 for those that access health care services at a walk-in clinic.

The data shows that of patients that have an ongoing relationship with a family doctor, 56 per cent rate their overall experience as a patient in the health care system between 8 and 10, where 10 represents "excellent." This compares to only 33 per cent of those individuals who rely on a walk-in clinic. The findings indicate that those who use a family physician as their primary care provider have a significantly more positive experience with the health care system overall.

Researchers asked BC residents to identify what changes, if any, they wanted to see in health care. Researchers did not provide choices for responses so the information they collected was unprompted. When asked to identify any changes they would like to see in the health care system, 38 per cent of BC residents identified better access (to family physicians/more family physicians/more doctors). Shorter wait times (to specialists, to diagnostic tests and access to health care) was identified by 30 per cent of respondents.

BC residents (18+) understand that continuity in patient care – seeing the same family physician – provides better health outcomes. For the 84 per cent of British Columbians that have an ongoing relationship with a family physician, this relationship is highly valued, and this relationship increases patients' overall satisfaction with the health care system.

The public views the family physician as their first point of contact into the health care system and as having a critical role in assisting patients in managing their illness and remaining well. The public also trusts these physicians to advocate on their behalf to access diagnostic testing and recommend treatment and/or referrals to other specialists when the occasion warrants.

"

BC residents understand that continuity in patient care – seeing the same family physician – provides better health outcomes. For the 84 per cent of British Columbians that have an ongoing relationship with a family physician, this relationship is highly valued"

- BC family physician

As people age, the role of the family physician in their overall health becomes even more important. Fortunately, people in this age group are most likely to have an ongoing relationship with a family physician. For those 18 to 34, an inability to find a family physician is the reason most provide for being among the 16 per cent of British Columbians without a long-term relationship with a family physician. Their satisfaction with the health care system is also the lowest. Most troubling in our 2022 research is that 40 per cent of patients with a family physician are concerned they will close their practice or retire.

To maintain the status quo — that is 16 per cent of British Columbians without a family physician — new family physicians need to be entering comprehensive family medicine at least at the same rate, or greater, as physicians retire or near retirement. If not, the many seniors who rely on their family physician will not be able to receive the care they need and are familiar with.

While we need family physicians in hospitals, walk-in clinics and urgent care centres, this should not be at the expense of British Columbians having an ongoing relationship with a family doctor who knows them and can treat them within the context of their lives.

The evidence is clear: the continuity of care provided by family physicians is associated with lower mortality rates, improved patient satisfaction and fewer hospitalizations and emergency room visits. Research also indicates that a higher supply of family physicians is correlated with better health outcomes, including a higher Health Utility Index, better health after age 40, and better health outcomes for individuals with a diagnosed chronic condition.

Dr. Lucy Wang



PART 2: Family physicians' experience with the health care system

The BCCFP polled its membership to provide the opportunity for members to comment on what they would want the public and government to understand about the current experience of being a family physician in British Columbia.

More than 800 family physicians responded to the survey and provided a wealth of information through their responses to a series of open-ended questions. Quotes throughout this document have been taken from the responses of BC family physicians.

A) MOTIVATION TO BE A FAMILY PHYSICIAN

Research Highlights

Among other reasons,

66%

to make a difference in their patients' lives

56%

to have the flexibility and autonomy family medicine provides

47%

to create a lifelong relationship with their patients

Family physicians cited many reasons for entering the practice of family medicine, and many members had more than one reason for doing so. Two-thirds of British Columbia's family physicians chose the specialty of family medicine because they wanted to make a difference in their patients' lives, and half of family physicians chose family medicine because they wanted the opportunity to create a lifelong relationship with their patients. Family physicians also wanted to have flexibility and autonomy, and a work/life balance that they initially believed the specialty of family medicine would provide. Their current experience of long days - due in great part to non-clinical work at the end of the day - is getting in the way of family physicians being able to realize the experience that initially drew them to the profession.

TABLE 5: DISTRIBUTION OF RESPONSES: FAMILY PHYSICIANS	TOTAL (814) %
AGE	
<35	16
35-39	14
40-44	15
45-49	11
50-54	10
55-59	12
60-64	7
65-69	8
Over 70	7
HEALTH AUTHORITY	
Vancouver Coastal	30
Fraser	20
Interior	17
Island	26
North	6
YEARS PRACTISING	
A resident	4
1 - 5 yrs	23
6 - 10 yrs	14
10 - 15 yrs	11
15 - 20 yrs	11
+20 yrs	39

Table 6 shows that all age groups, geographies and years of experience, from a family medicine resident to family physicians that have been practising more than 20 years, are represented in the survey responses.

Data was collected during member surveys in 2019.

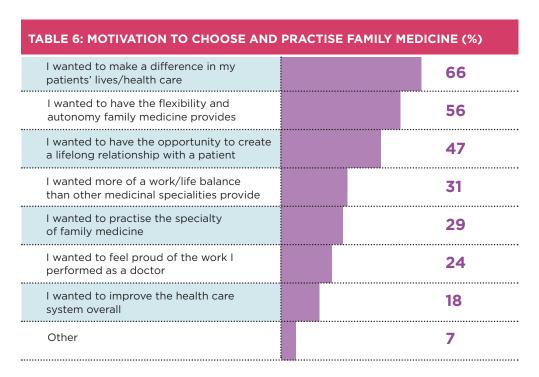


Table 7 shows the reasons family physicians provided for their choice and motivation to practise family medicine. In many cases, physicians provided more than one response. Data was collected during member surveys in 2019.

B) WHAT FAMILY PHYSICIANS WANT THE PUBLIC TO KNOW

Research Highlights

51%

family medicine is the foundation of the health care system/ continuity of care/ patient centred/ evidence-based approach has proven to be beneficial

30%

family medicine is a specialty; family physicians are experts in primary care

27%

complexity of the job and the amount of non-clinical work involved

Family physicians understand, and believe their patients understand, that family physicians are the backbone of the health care system. The specialty of family medicine is a career that individuals choose, and it is vital that medical students continue to make the choice to enter family medicine and to practise comprehensive care to ensure British Columbians have an adequate

supply of family physicians.

Family physicians also want the public to understand that their work doesn't end when the last patient leaves their office. For the majority of family physicians, the increasing amount of non-patient-facing work takes away from time that could be spent with patients.

While family physicians see practising family medicine as a privilege, they also point out that it is a demanding profession and the balance between clinical and non-clinical work is taking its toll.

C) WHAT FAMILY PHYSICIANS
WANT GOVERNMENT TO KNOW
ABOUT THE PRACTICE OF FAMILY
MEDICINE

Research Highlights

36%

current health care model is not sustainable; family doctors are not adequately supported by government

33%

compensation model does not support excellence in patient care; the amount of non-clinical work required is growing at the expense of time with patients

28%

family medicine deserves more recognition and value; other health care options cannot provide equivalent expertise

26%

family medicine is the foundation of the health care system and the most cost-effective method for keeping people healthy

While family physicians generally feel valued by their patients, they feel undervalued and unrecognized by government for the foundational work they do in the specialty of family medicine at the front line of the health care system. They don't believe government representatives understand the current experience of being a family physician in British Columbia – the high stress, increasing complexity and demands on time, and burden of non-clinical work.

Many doctors wrote specifically about the increased volume and time spent on non-clinical, non-patient-facing work – completing forms and sifting through an ever-increasing input of patient data on challenging electronic medical record platforms, as examples. Many feel the amount of this work is now detracting from clinical time or must be done after hours to not detract from the amount of time spent with patients, which is leading to physician burnout.

Others talked about the challenges imposed by a system that doesn't support the complexity of some patients' health issues.

Family physicians are concerned about the future of family medicine and the care patients are receiving in British Columbia. Family physicians want government to know that they are advocates, on behalf of their patients, for improved access to primary care and the need for increased funding and access to integrated allied health care – counselling and physiotherapy as examples.

Family doctors want government to understand that researchers have spent years to determine that the relationship between a family physician and a patient is one of the key factors proven to help prevent disease, change the outcome of disease and prolong life.

Dr. Touktam Bahri Irai



Conclusion

This document is based on the results of province-wide statistically reliable polling research with a random sample of British Columbians conducted in 2019 and updated in 2022; more than 800 responses from family physicians; and the robust medical literature on family medicine.

The BCCFP's research shows that while the public greatly values the care provided by family physicians, the experience of being a family physician in British Columbia is a challenging one. Our research polling with family physicians aligns with Doctors of BC polling research, where "Physicians confirmed they are frustrated by varied and mounting demands in their practice." Of the mounting demands they mentioned, "paperwork, charting and electronic medical records-related tasks" were seen to be "significant burdens as these are often unpaid, inefficient or repetitive or do not require physician expertise."

While it has not been difficult to attract residents to fill the seats to pursue the specialty of family medicine in BC, family physicians, even those who have recently begun to practise, are practising within a system that is leading to burnout, according to our member polling data. System challenges are forcing family physicians to question whether they can continue to provide comprehensive family practice at a time when the public has identified access to care as a primary issue.

Family physicians believe there is a disconnect between what government values, what patients value and what the evidence shows – there is real benefit in having an ongoing relationship with a family physician who is able to take care of the patient over the long-term.

The BCCFP and our members recognize that a great deal of work is going into primary care transformation. It is important that the BCCFP and family physicians' voice be central to that conversation. We want to work in a system that allows family physicians to use their skills, expertise and experience derived from a minimum of 11 years of education and many years of practice, to deliver the highest quality of care to British Columbians.

The BCCFP launched the My Family Doctor Cares campaign to bring attention to the challenges almost one million British Columbians have accessing an ongoing relationship with a family physician, the support family physicians require from government to better meet the needs of their patients, and to build a health care system that values quality and not just quantity.

We ask government to build on what is working – an ongoing long-term relationship with a family physician as a positive indicator of improved health outcomes – and find ways to support and enhance this further. We ask government to ensure all British Columbians have



Family physicians save the system money, keeping patients out of emergency rooms and hospitals, and necessitating fewer specialist visits. Yet the current system limits our ability to do our jobs. So-called costsaving measures are costing a lot more in the long run. When you send the message that family physicians are lesser, it is no wonder that patients believe they have to be seen by specialists to receive proper care, even if the family physician is perfectly capable. Our medical students start to see family medicine as a last resort."

— BC family physician



Dr. Rebekah Eatmon and Dr. Ashish Grover

access to a relationship with a family physician, and family physicians are encouraged and supported to collectively provide full-service comprehensive care.

We ask government to work with family physicians to reduce the amount of time spent in non-clinical work, so we can improve access to family physicians and spend more time with patients.

The public told us clearly that they value their relationship with their family physician and see family physicians as their first point of contact into a system that is complex and, at times, inaccessible. They value longitudinal care that treats the whole person, taking into consideration who they are, their past experience and their ongoing health concerns.

Family physicians have reported that patients are more complex and that the current health care system has not yet evolved to adequately meet the needs of these patients nor the needs of physicians providing their care. Imagine if family physicians were supported and enabled to spend the necessary time with patients

and fully apply their broad training and skills to work with the patient to achieve their health goals.

It is also important to note that patients with access to an ongoing relationship with a family physician are more satisfied with the overall health care system than patients accessing care through a walkin clinic. But 40 per cent are concerned they may lose their family physician and become part of the almost-one-million residents without a family physician.

We have the opportunity to bring together what the public have told us they want, need and deserve, and what the evidence shows is meaningful, high quality care. With this knowledge and support, together with patients' and family physicians' experience and supportive partners in care delivery, we can arrive at a health care system that invests in its foundation and supports family physicians in their pursuit of providing exceptional patient care.

About the BCCFP and family medicine in BC

The BCCFP is a not-for-profit organization that advocates for the future of family medicine. We are the professional home of family medicine in BC, providing leadership, support, advocacy and education for more than 6,000 members from across the province.

The BCCFP celebrates family medicine as a specialty, and family doctors for the excellence in patient care they provide. Our members include family physicians, family medicine residents, and medical students interested in pursuing a career in family medicine.

Family medicine is the main primary care medical specialty in Canada. It focuses on the individual patient within their family and community contexts. Family physicians are the first point of contact for patients when they have health concerns, and act as the central "hub" for managing the health of their patients over time.

As highly skilled generalists, family physicians deal with undifferentiated clinical problems presenting at an early stage. In addition to acute disorders,

which are sometimes life-threatening, family physicians also regularly confront cases of chronic disease, emotional problems and transient illnesses.

The patient-doctor relationship is central to the practice of family medicine. Family physicians get to know their patients, and serve as trusted health advocates, tailoring the care and advice provided to meet each patient's changing needs and stage of life. Family physicians work with specialists and other health care professionals to deliver comprehensive, coordinated, patient-centred care.

Although all health professions provide valuable services to their patients and the health care system as a whole, family physicians fill a unique central leadership role not replicable by other health care professions.



BC College of Family Physicians #330 - 1665 West Broadway Vancouver, BC V6J 1X1

604 736 1877

bccfp.bc.ca