Physician Workload Funding Application 2023/24

Background and Objective

This application is for all physicians providing services to a Health Authority or Agency through a Service Contract or Salary Agreement who are experiencing significant and sustained growth in their workload and are seeking Workload Funding to hire/contract additional physician resources. For the remainder of this application, 'Service Contracts' refer to Salary Agreements and 'Health Authority' includes Agencies contracting health services.

Workload Funding is an allocation negotiated in the 2022 Physician Master Agreement that provides for increases in program budgets for existing Service Contracts in order to hire additional physician resources. The goal of Workload Funding is to improve the quality and availability of care for patients by addressing significant and sustained workload growth experienced by contracted and salaried physicians. **Sessional contracts are not eligible.**

Physician applicants must complete all of Section 1 in the template provided and electronically submit the application to their contracting health authority / agency by January 31, 2023

Incorporating Data to Demonstrate Measurable Workload Pressures

Priority will be given to applications that effectively incorporate objective, reliable data regarding physician workload that demonstrate measurable growth in hours, volume, complexity of services, and/or other characteristics of workload. Data and analysis incorporated into the application should be measures of real-world service delivery, patient access, and available physician resources and not exclusively derived from workload models.

Examples of measurable data include, but are not limited to:

- increased patient volume
- growing waitlists / wait times
- increase in number of visits / consultations / procedures
- inability to complete work in allotted time
- excessive hours of work without relief
- patient and procedure complexity measures

Change in workload over time is most effectively demonstrated when measures are expressed in physician-weighted terms that account for FTEs/hours utilized. Applicants are encouraged to use the application template to provide a summary of the key issues and measures demonstrating workload burden. **Additional detail can be provided in appendices submitted with the template and referenced in the core application.**

Wherever objective, reliable data is not available to support their submission, applicants should acknowledge the absence of data and/or measures and briefly describe any limitations in data collection or accessibility that prevent objective and measurable demonstration of the workload impacts described. Please see *Physician Workload Funding 2023/24 Application Advice* for recommendations on how to incorporate data.

Note: Section 1 is to be completed by physician applicants without disproportionate support or input from their contracting agency. Section 2 is available for health authorities to provide their input on the application.

Application Review

Your contracting health authority will review your application, offer to meet with you to discuss it, and complete Section 2 with additional data and measures available to it. The Ministry of Health will assess all applications, consider input from a Workload Advisory Committee comprised of 4 physicians appointed by the Doctors of BC that will also review the applications, and decide which Service Contracts will receive additional Workload Funding. The Ministry will also use any data available to it to assess workload burden (e.g., service encounters and hours worked).

SECTION 1

To be completed by Contracted Physicians / Medical Program Director

Complete Section 1 in the template provided and electronically submit your application to your contracting health authority by January 31, 2023.

A recommendation from the health authority for additional FTE(s) only indicates their support for this funding application. For unsuccessful or partially funded applications, a recommendation is not a commitment to provide additional health authority funding for physician resources.

Program Description *(1800 character limit)*

Provide a summary of the current services provided by the program's physicians and the program's target populatio (e.g. program's existing scope of services, sociodemographic characteristics of patient group, catchment area/ communities covered).

Service Complexity *(1650 character limit)*

Describe how service complexity contributes to physician workload.

Service Demand *(2100 character limit)*

Describe the current demand for the program's services and how it differs from previous years.

Projected Demand and Complexity *(1500 character limit)*

How, if at all, is demand for the program's services expected to change in coming years?

How, if at all, is service complexity anticipated to change in coming years? ***(650 character limit)***

Workload Impacts (2000 character limit)

How are the following aspects of care impacted by physicians' current workload?

- Accessibility to the program's target population
- Availability and quality of services
- Volume of services delivered

Physician Coverage and Human Resource Supply (1300 character limit)

Describe the current physician coverage the program as a whole provides and the current ability of the program's physicians to provide coverage for one another.

How, if at all, is physician recruitment and retention impacted by the current workload? *(650 character limit)*

Workload Funding Goals *(2200 character limit)*

How many additional physician FTEs are being requested? _____

How would the additional FTE(s) requested address the challenges created by current workload pressures described in the sections above?

Additional Resources *(1300 character limit)*

Please describe any additional resources necessary to support more physician FTEs in this program (e.g. equipment, human resources, clinical/office space).

SECTION 2

Health Authority Review and Recommendation *(to be completed by the Health Authority)*

Incorporate any additional data or analysis available to the health authority that further characterizes physician workload for this service. The additional data and analysis provided can support Section 1 and/or provide an alternative interpretation of the workload pressures in the service.

A recommendation from the health authority for additional FTE(s) only indicates their support for this funding application. It is not a commitment to provide additional health authority funding for physician resources.

Please complete Section 2 and electronically submit this application to the Ministry of Health by March 15, 2023 in the template provided.

Health Authority Review *(3200 character limit)*

Describe why the health authority does or does not support the funding proposal, **referencing the workload issues cited by the applicants and providing any additional data and analyses available to it.**

Health Authority Recommendation (950 character limit)

How many additional FTEs does the health authority recommend adding to this program? _____

If the health authority supports a different number of additional FTEs than the physicians, please explain.

If a partial FTE allocation poses a challenge to operationalizing additional funding, ensure it is noted in your response.

Regardless of funding source:

How many temporary FTEs have been added to the program in the previous 3 fiscal years? _____

How many permanent FTEs have been added to the program in the previous 3 fiscal years? _____

Resource Considerations (1600 character limit)

Describe any alternative and/or additional administrative, technological, human resource, and/or policy changes that your health authority is planning or able to institute to address the workload issues identified in the application, and the timeframe for implementing these changes or potential changes.

Describe any ongoing program vacancies or potential recruitment challenges (e.g. scarcity of physicians with the necessary training, credentials). *(825 character limit)*

Program Information and Documentation

Complete information for all of the following fields is required. Complete information may also be provided in an Excel spreadsheet.

Program Area Name (Per SCRUBS)	

FTE Summary

Funded FTEs of Program (all funding sources)	
Current Contracted FTEs (i.e. filled positions)	
Section 1 - Physician Requested FTEs	
Section 2 - HA Recommended FTEs	

Physician Compensation Funding Information

Contracted Physician Resource Planner IDs (CPRP IDs) for <u>ALL</u> physician funding in the Program Area	
Primary CPRP ID to Receive Additional Funding	
Program Area Teleplan Payee Number	
MSP Funding Target for Program Area	
Global Operating Funding for Program Area	
Other Funding for Physician Compensation (note both source and amount)	

Contracted Physician Information as of Date: _____

Last Name	First Name	Practitioner #	HEABC Contract ID #	FTE	Contract term