

PHYSICIAN BURDENS

Identify.
Understand.
Inform.

WHAT WE HEARD

What was the goal of this member engagement?

We know physicians are frustrated by mounting demands. For many, the volume and pace of these demands has become burdensome, and this can have serious consequences for physicians and the health care system. A dedicated, long-term approach that focuses on systemic change is needed.

We wanted to understand if and how mounting demands impact BC physicians so that Doctors of BC can advocate for policy solutions that reflect your experience and meet your needs.

How did we seek member input?

Representative Assembly

18 small-group discussions with 100+ members to confirm and refine literature review findings on identified burden areas and inform outreach to all members.

All-member engagement

Interactive online engagement with members to understand if and how these burden areas impact you.

What did we ask?

Our online engagement had three sections for members to provide their input using **3 tools**:



A comment board to identify the specific demands that are burdening your practice



Survey questions to understand the impacts of the burden areas



An ideas board to inform our solutions

Who participated?

631

 registered members

GP or Specialist

GP/Family physician: 59%
Specialist: 39%
Other: 2%

Practice setting

Community-based: 36%
Facility-based: 23%
Both: 41%

Geographic setting

Urban: 63%
Semi-urban: 17%
Rural: 20%

WHAT DID WE LEARN?

Physicians confirmed they are frustrated by varied and mounting demands in their practice. They shared specific examples, experiences, and ideas that enable us to demonstrate what these demands look like, their compound impact and resulting outcomes.

Key demands/challenges

- #1 item is paperwork; charting and EMR-related tasks are also significant burdens as these are often unpaid, inefficient or repetitive, or do not require physician expertise
- Maintaining high patient loads to ensure adequate compensation in a volume-based fee structure, in addition to other financial pressures (rising overhead costs, rent, etc.)
- Increasing rules and regulations developed without physician input that do not consider physician workflow or reflect appropriate evidence
- Unrealistic expectations of patients and administrators re: physician capacity
- System-wide resource constraints (drug costs, access to providers, etc.) are a key challenge to adequate provision of care

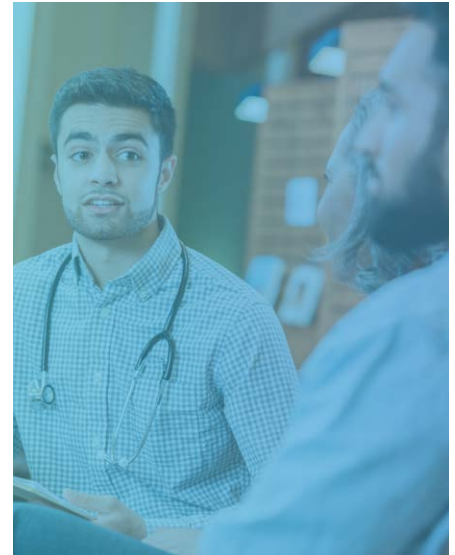
See what your colleagues shared on our [Physician Burdens online engagement page here: www.haveyoursaydoctorsofbc.ca/physicianburdens](https://www.haveyoursaydoctorsofbc.ca/physicianburdens)

Impact/outcomes

- Unmanageable workloads and loss of work-life balance
- Decreased job satisfaction and joy in practice
- Physicians feeling disengaged and unable to influence change
- Physicians reducing work hours or services, changing specialties, even leaving the profession entirely

Solutions

- Address the volume of tasks that are unpaid, inefficient or repetitive, or do not require physician expertise
- Acknowledge the value of physician time and expertise through multiple channels, including appropriate compensation
- Promote opportunities for meaningful physician engagement in systems-level decision-making while respecting physician time and expertise
- Prioritize physician health and wellness beyond individual resiliency by advocating for systems-level change



WHAT'S NEXT?

Doctors of BC will use these findings to inform actionable policy commitments and recommendations specific to the BC context and to advocate for a dedicated, long-term approach focused on systemic change. We will share the final policy paper later this year.

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