

CFPC Federal Forms Survey: Results

October 2023

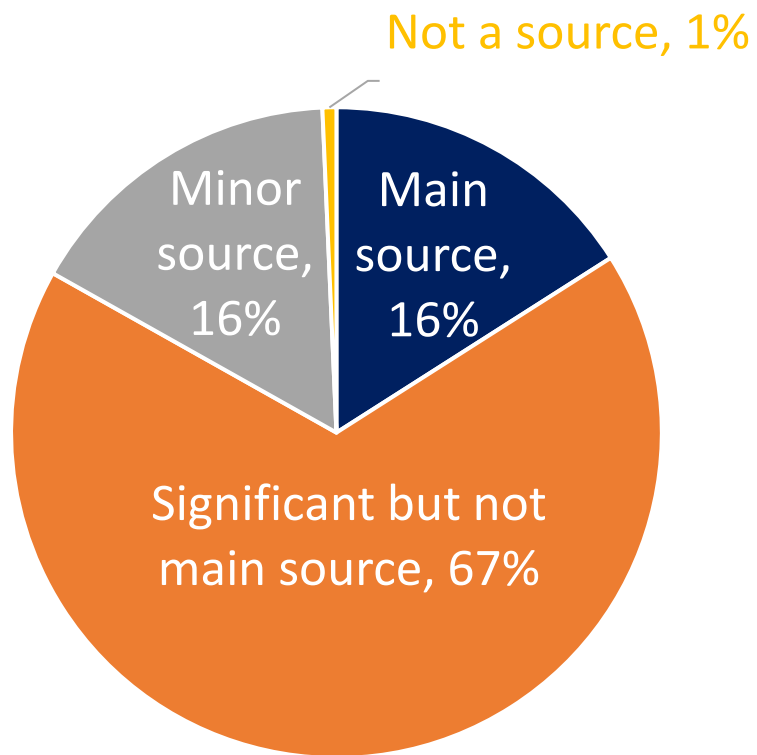
Data Collection

- October 2023
- Survey emailed to ~32,000 CFPC members
- 5416 respondents
- 17% response rate

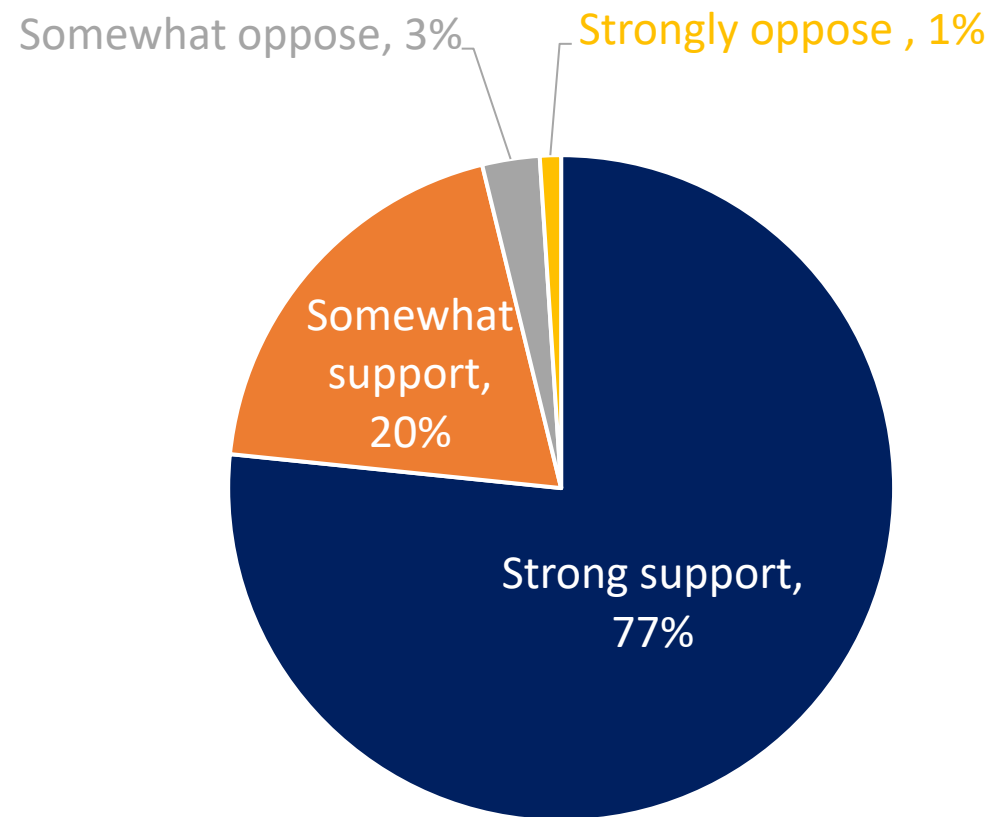
Highlights

- Over 99% of family physicians in Canada complete federal forms **personally**.
- For 83% of family physicians, these forms are a **significant or main source of administrative burden**.
- 96% support the federal government **re-assessing** the federal forms
- **Younger family physicians** tend to be affected by forms more negatively than older physicians, are more likely to rate value of information as “Low” and remuneration as “Insufficient”

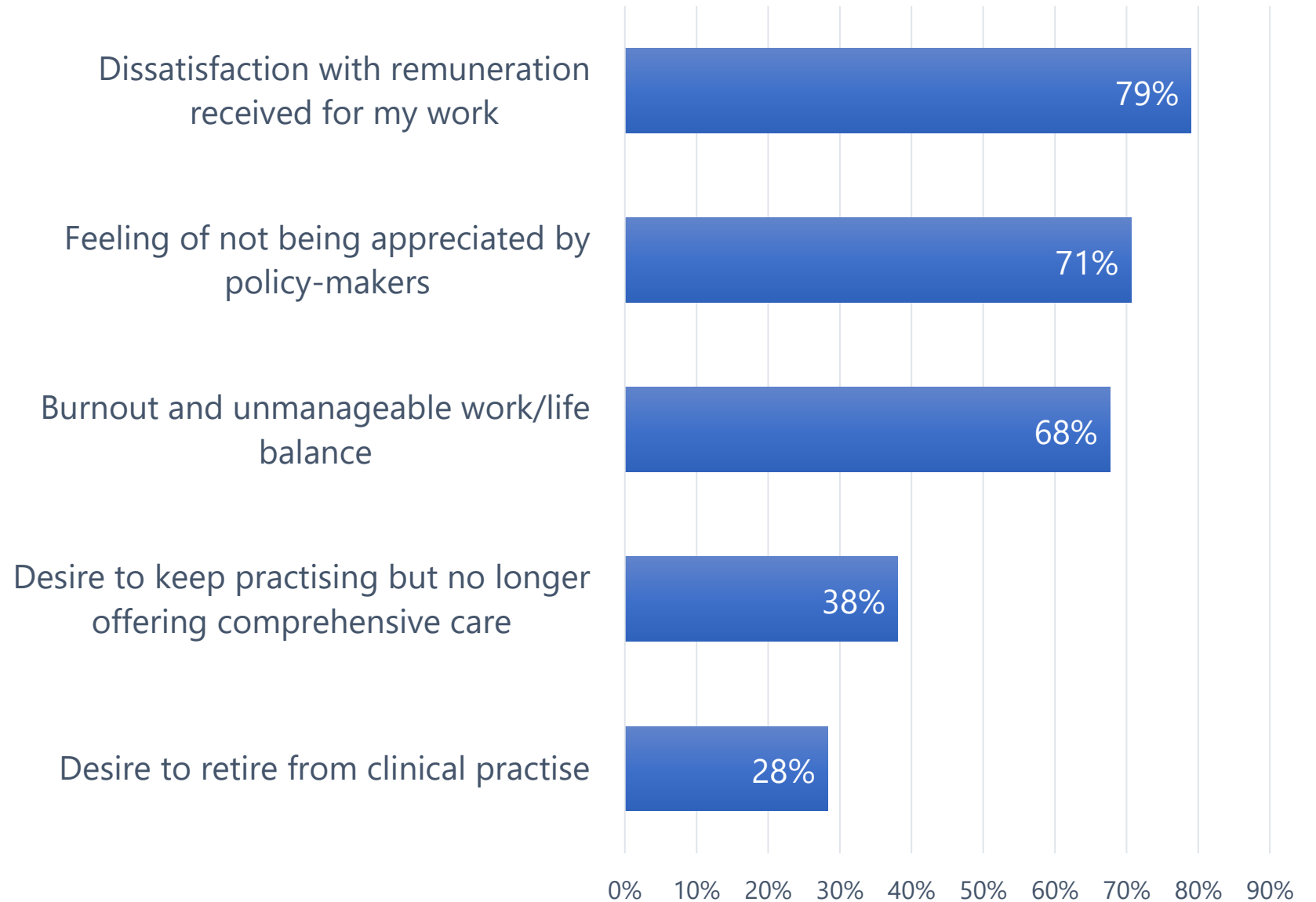
To what extent do medical forms for federal institutions contribute to your **overall administrative burden**?



To what extent do you **support the federal government re-assessing** the federal forms?



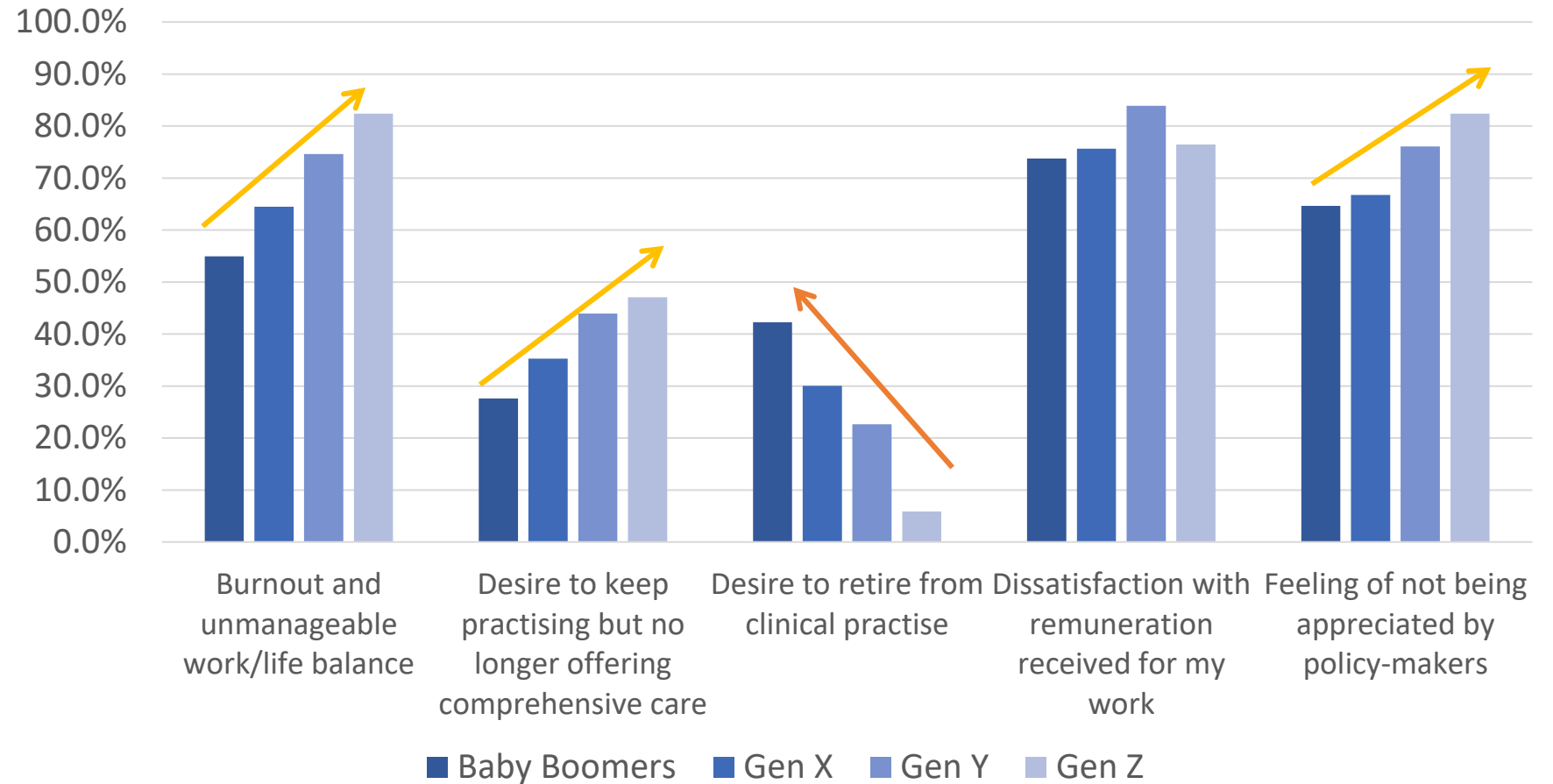
Percentage who reported completing forms contributes to...



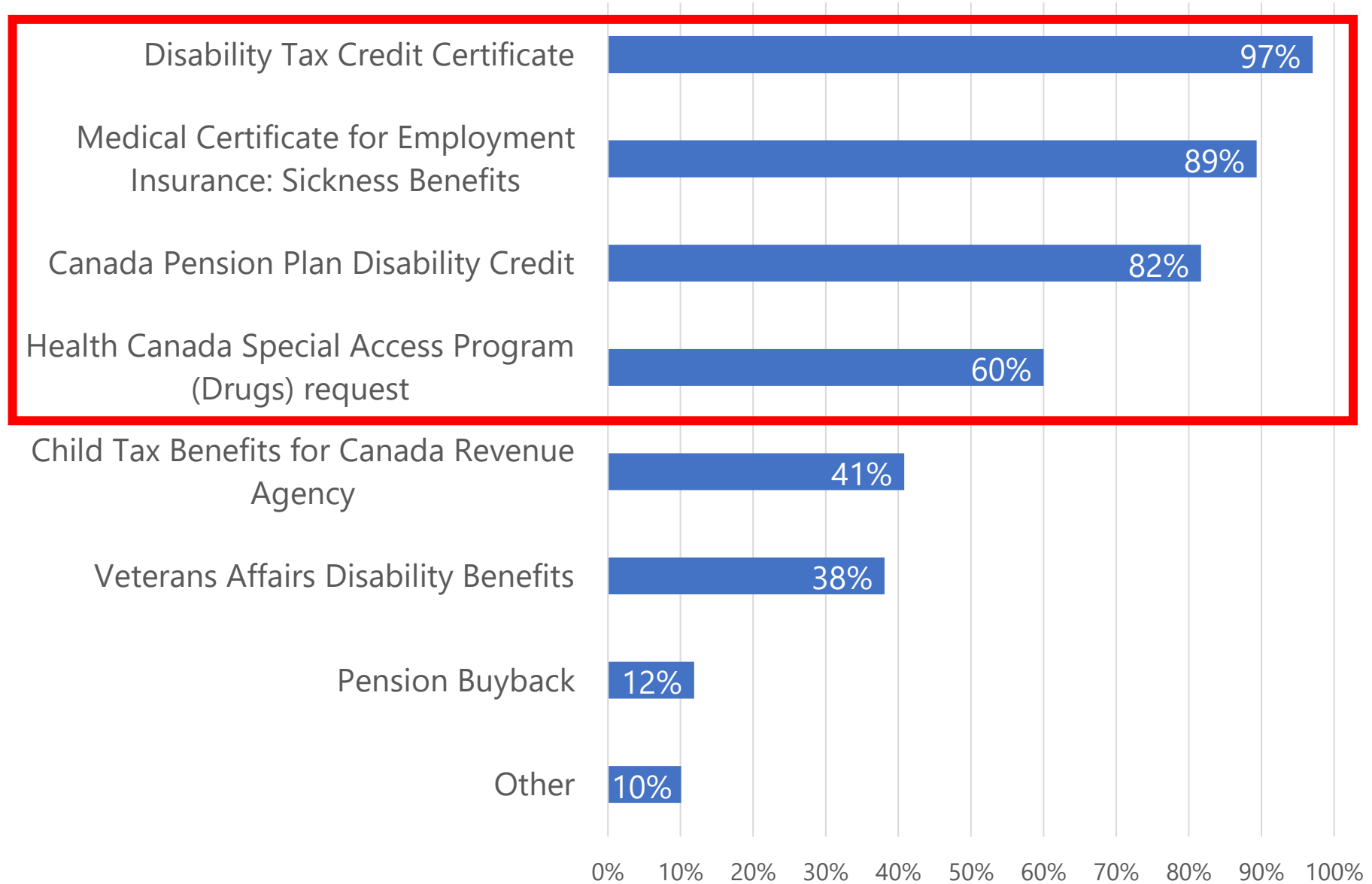
Forms are more likely to contribute to a desire to retire among **older** family physicians.

Forms tend to negatively affect **younger** family physicians in most other career areas.

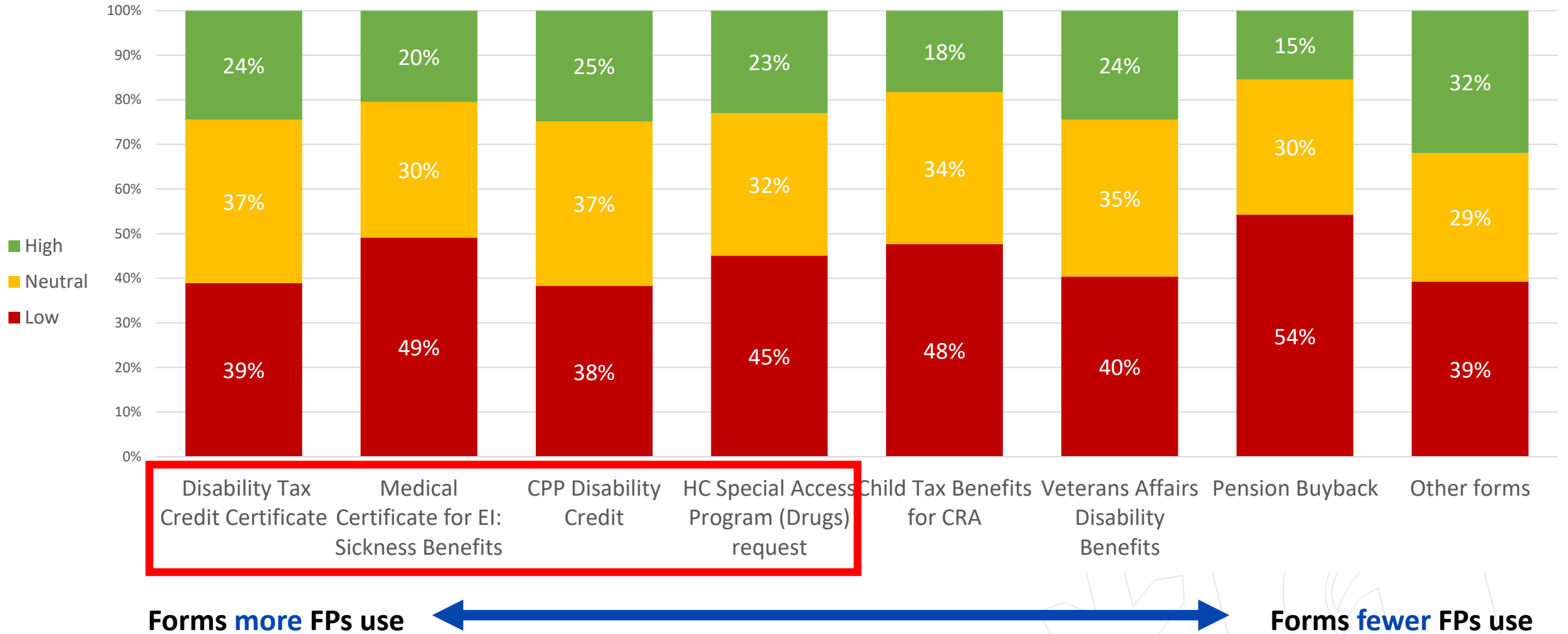
Percentage of family physicians who report completing federal forms contributes to certain aspects of their career, by generation



Percentage who reported using forms

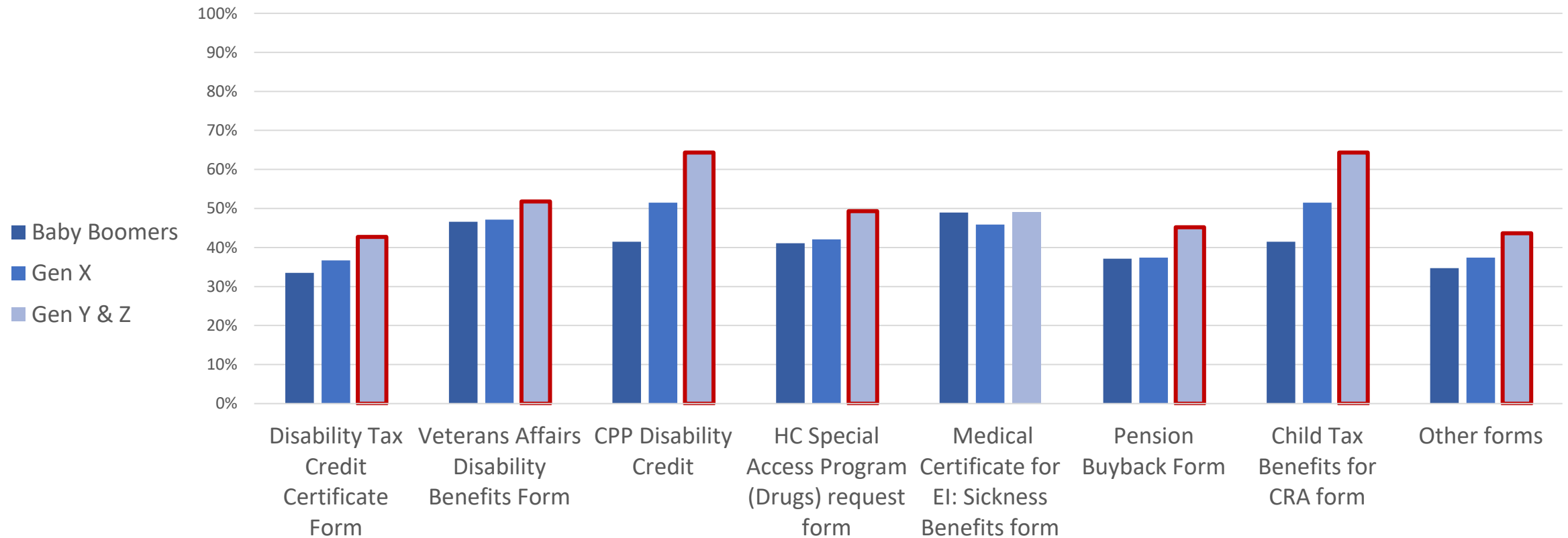


Value of Forms



Gen Y & Z most likely to rate value of forms "Low"

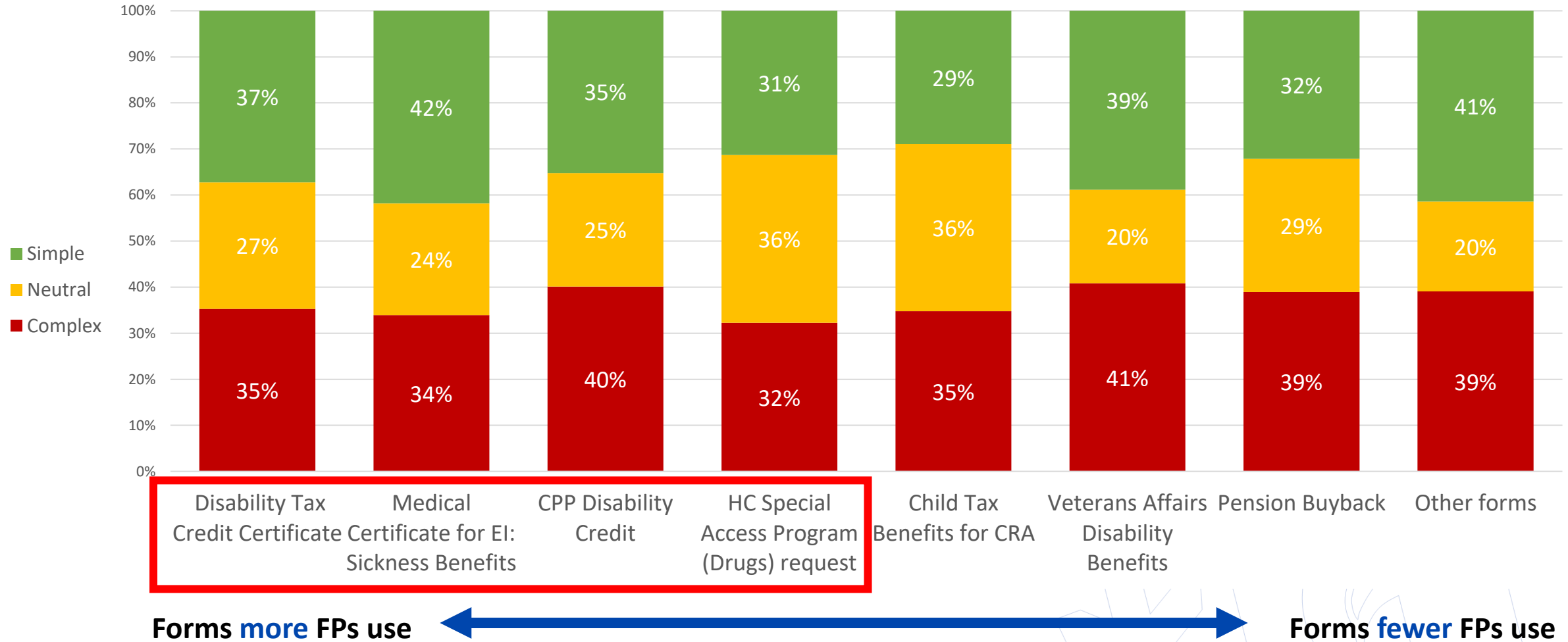
Value of information of forms reported as "LOW," by generation



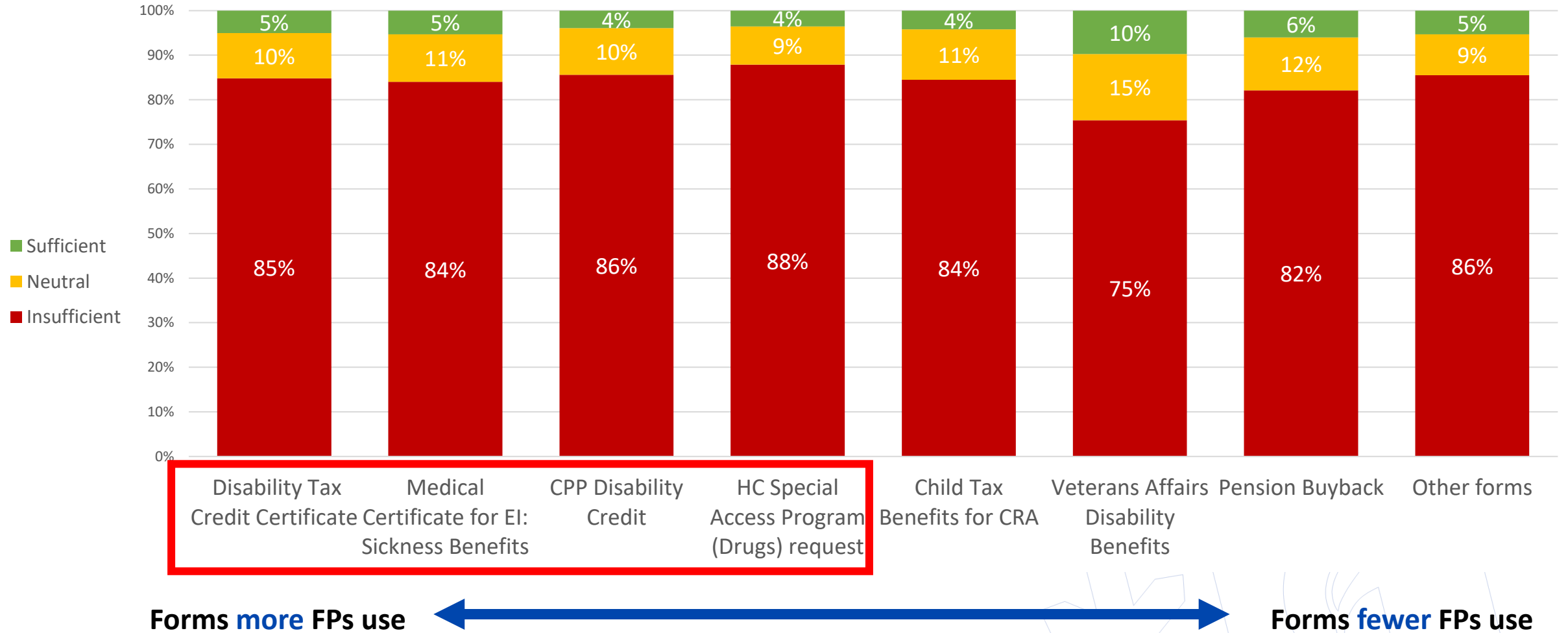
Forms **more** FPs use ←

→ Forms **fewer** FPs use

Complexity of Forms

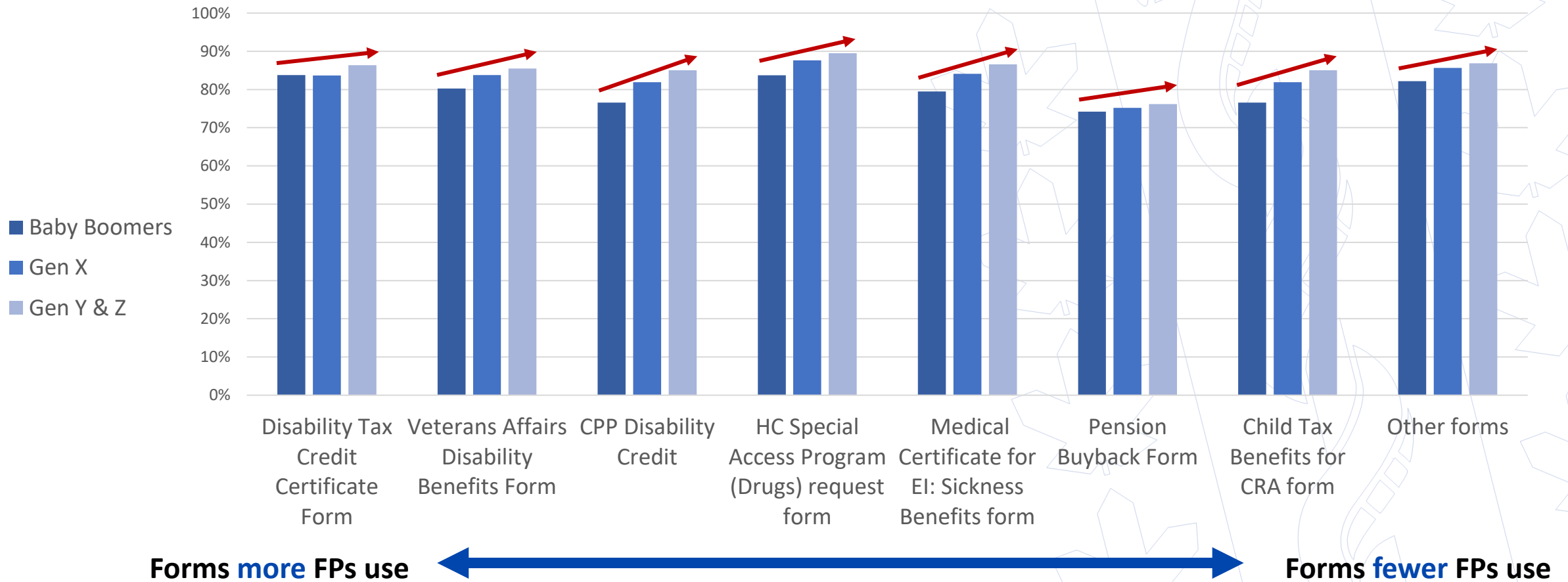


Remuneration of Forms



Younger physicians more likely to rate remuneration as "Insufficient."

Remuneration for forms reported as "INSUFFICIENT," by generation

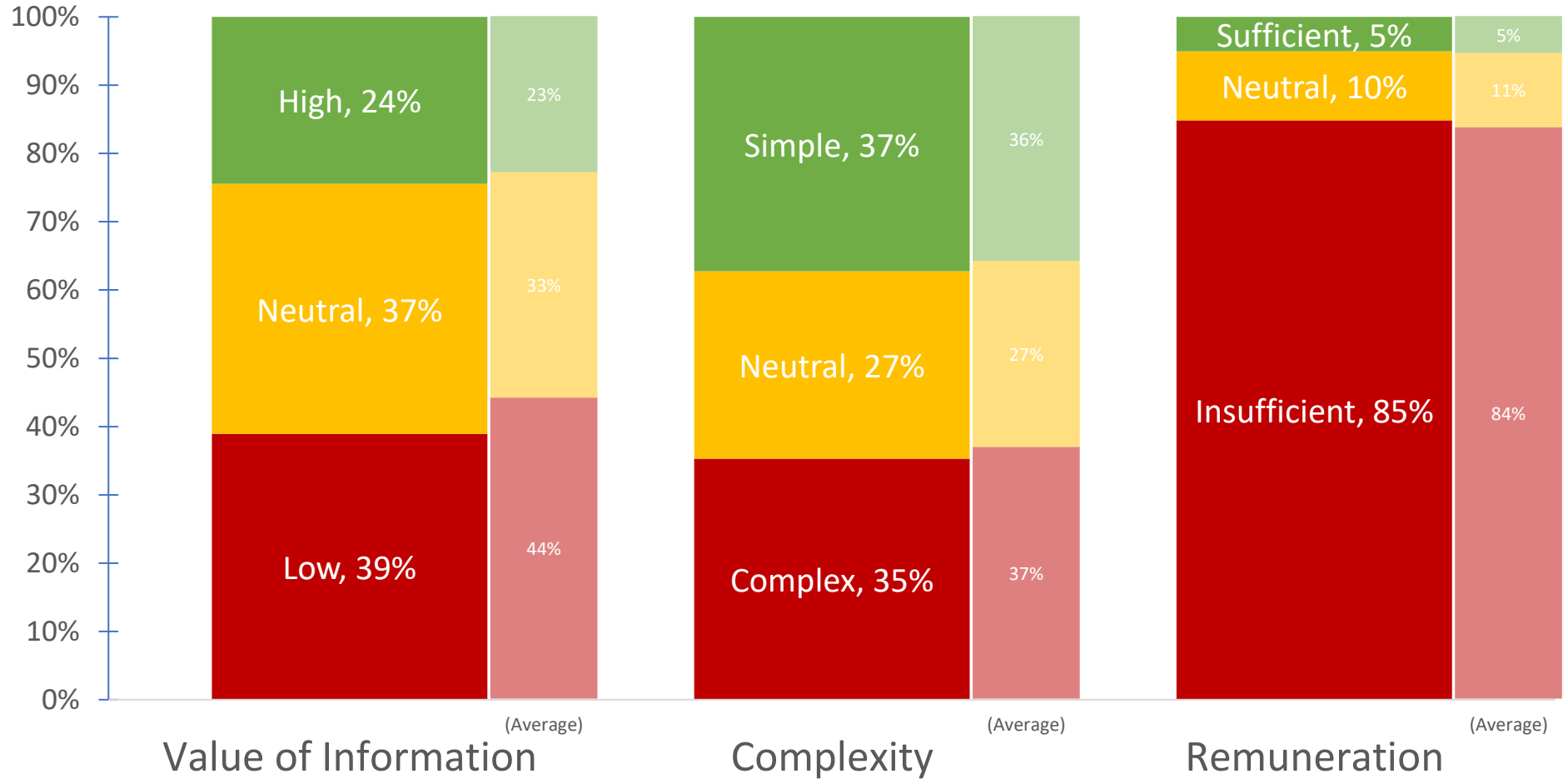


Analyses of Individual Forms

- Presented in order of most frequently reported used
- Compares responses for three categories to average responses for all forms:
 - Value of information
 - Complexity
 - Remuneration

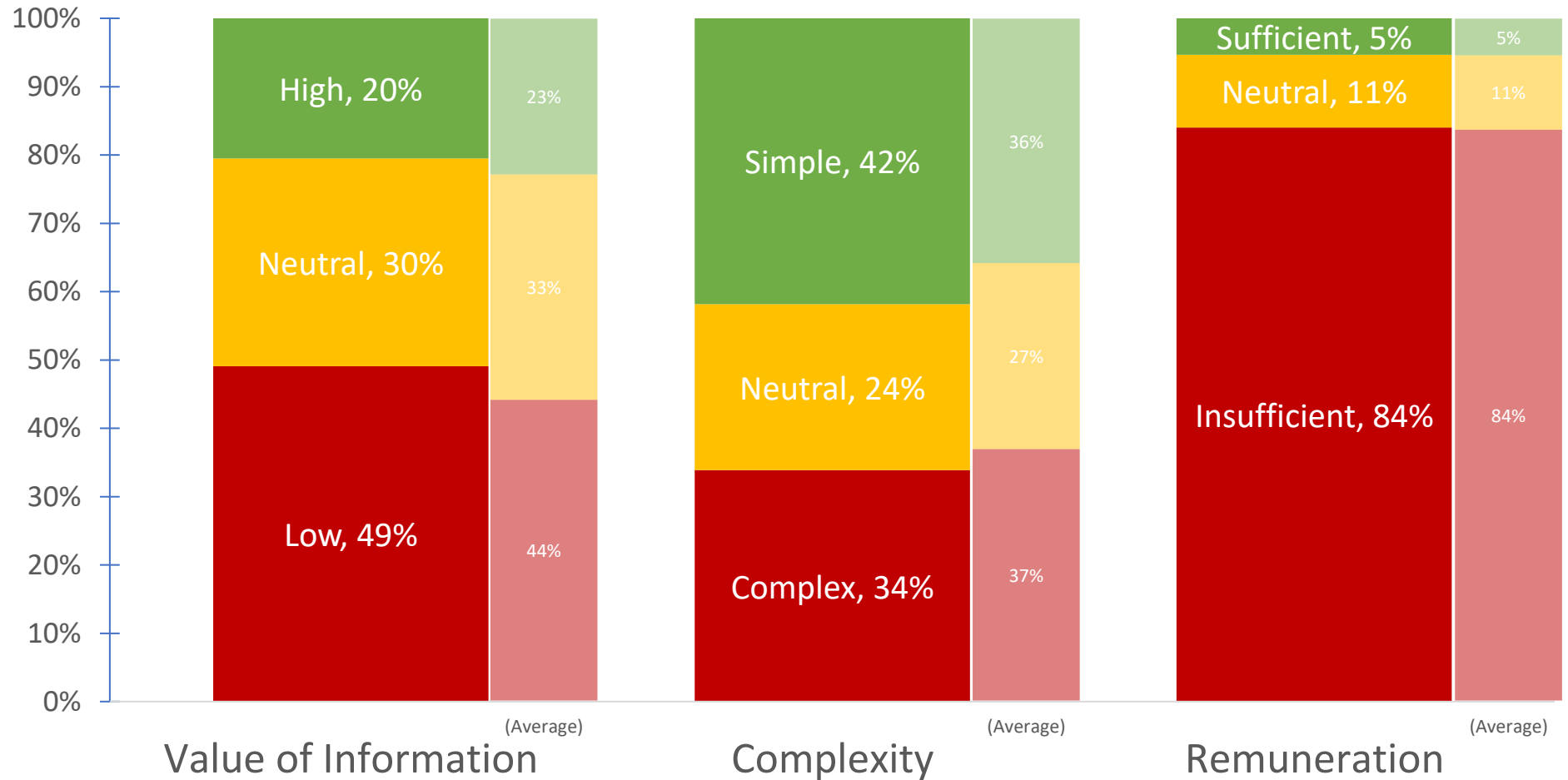
Disability Tax Credit Certificate

Percentage who reported using this form:
97%



Medical Certificate for EI: Sickness Benefits

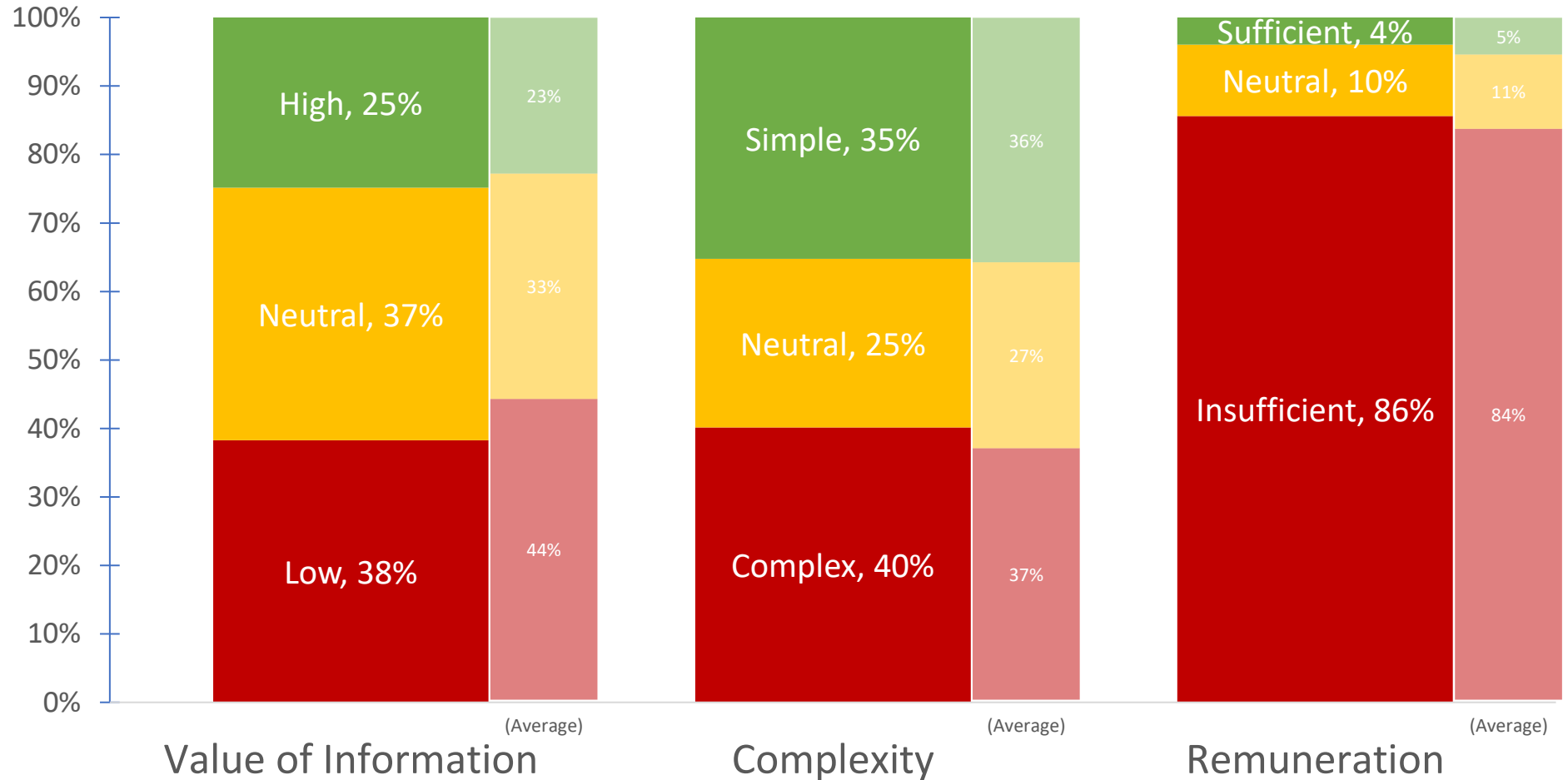
Percentage who reported using this form:
89%



CPP Disability Credit

Percentage who reported using this form: **82%**

Notable usage
- QC: 50%

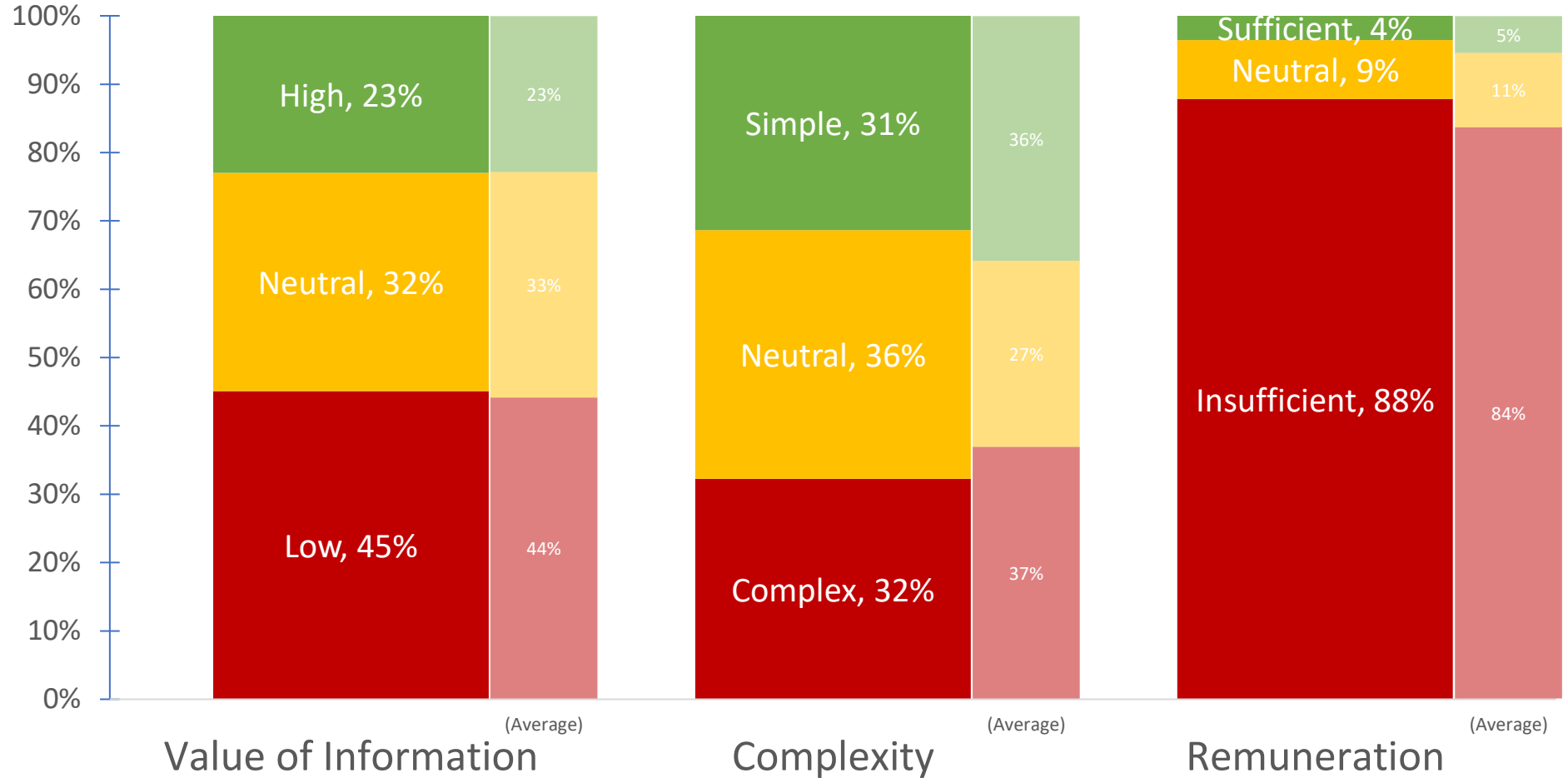


HC Special Access Program (Drugs) request

Percentage who reported using this form: **60%**

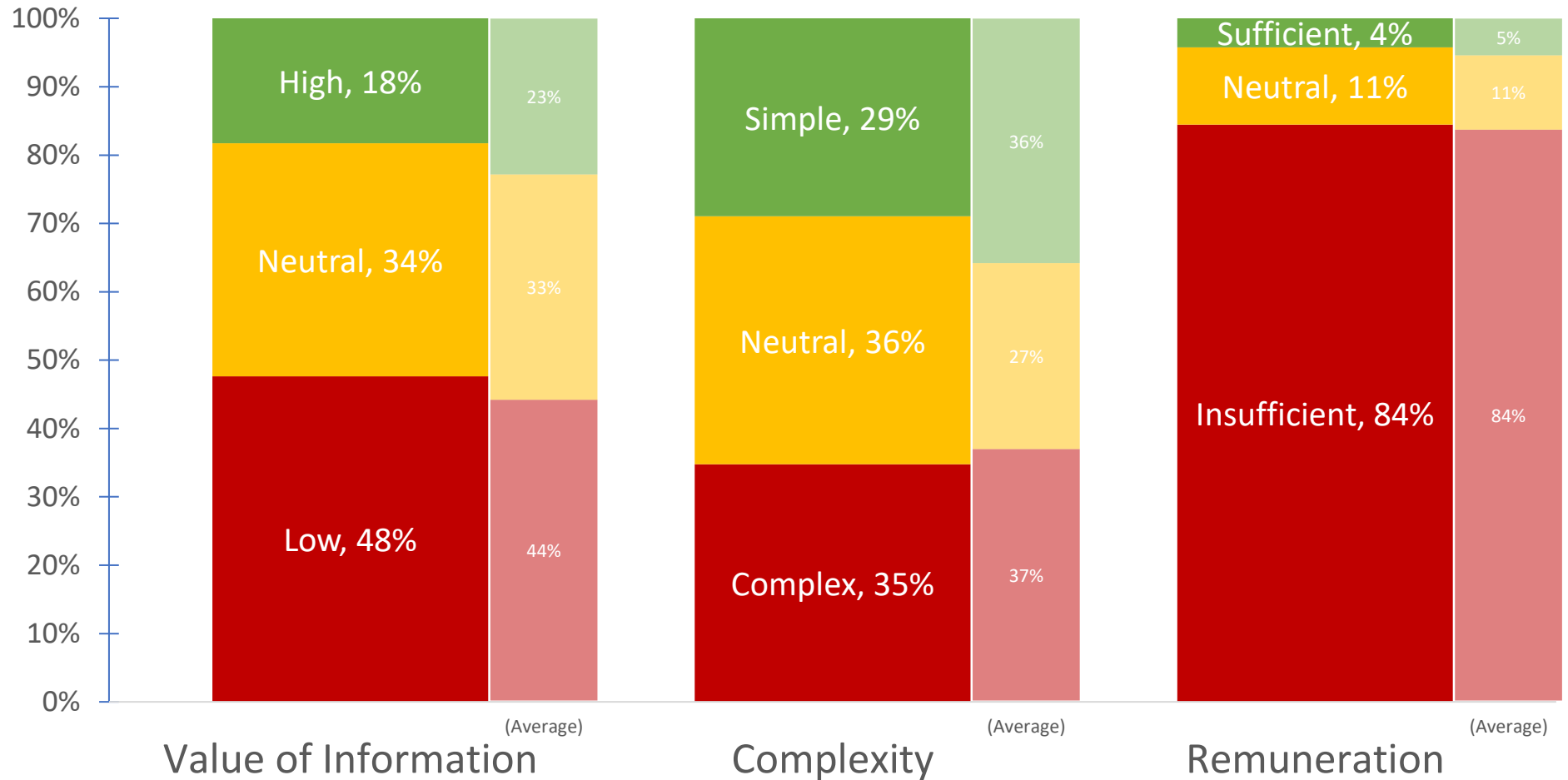
Notable usage

- QC: 32%
- TER: 39%
- ON: 73%



Child Tax Benefits for CRA

Percentage who reported using this form:
41%

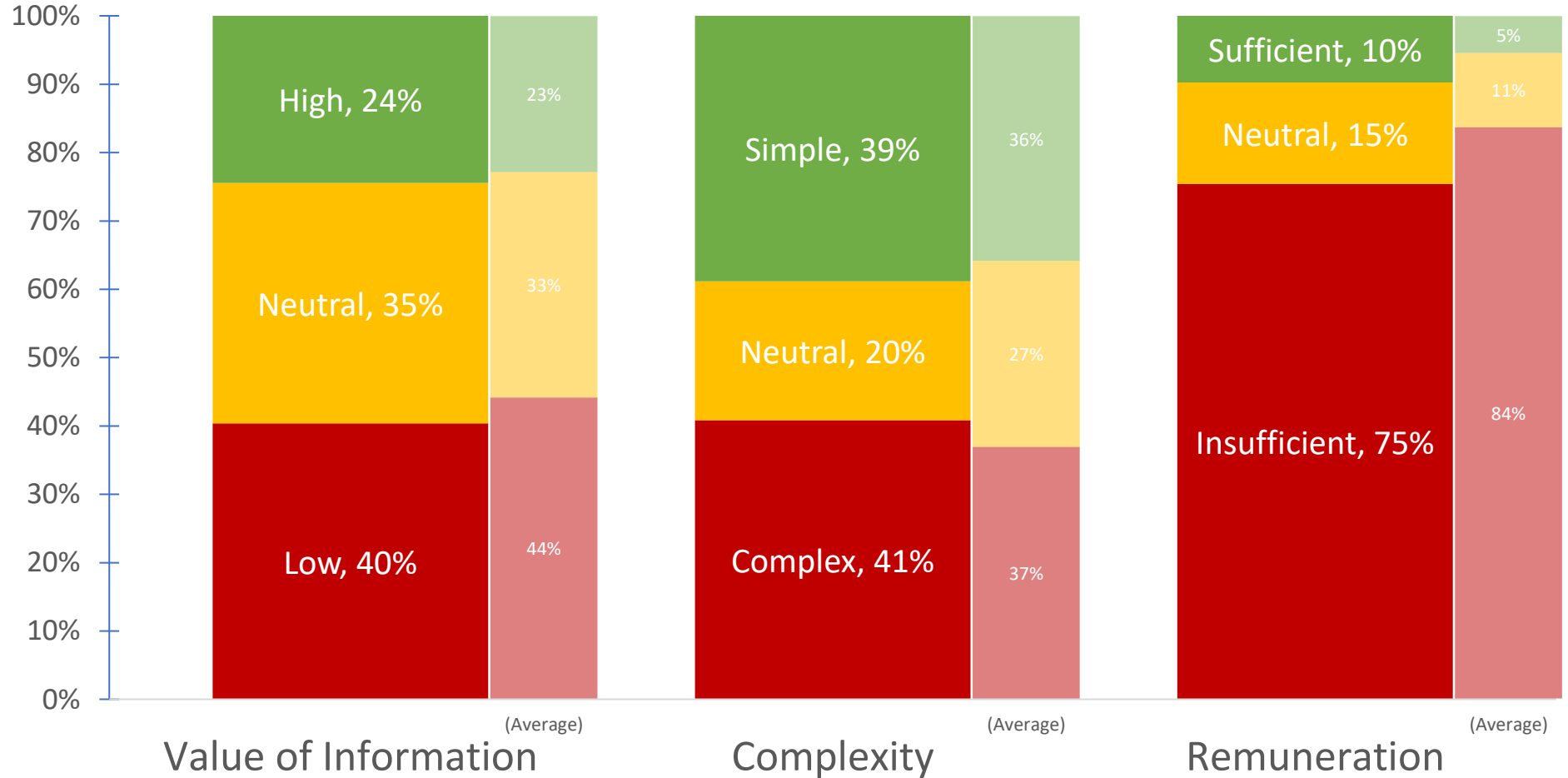


Veterans Affairs Disability Benefits

Percentage who reported using this form: **38%**

Notable usage

- QC: 27%
- TER: 28%
- ATL: 69%

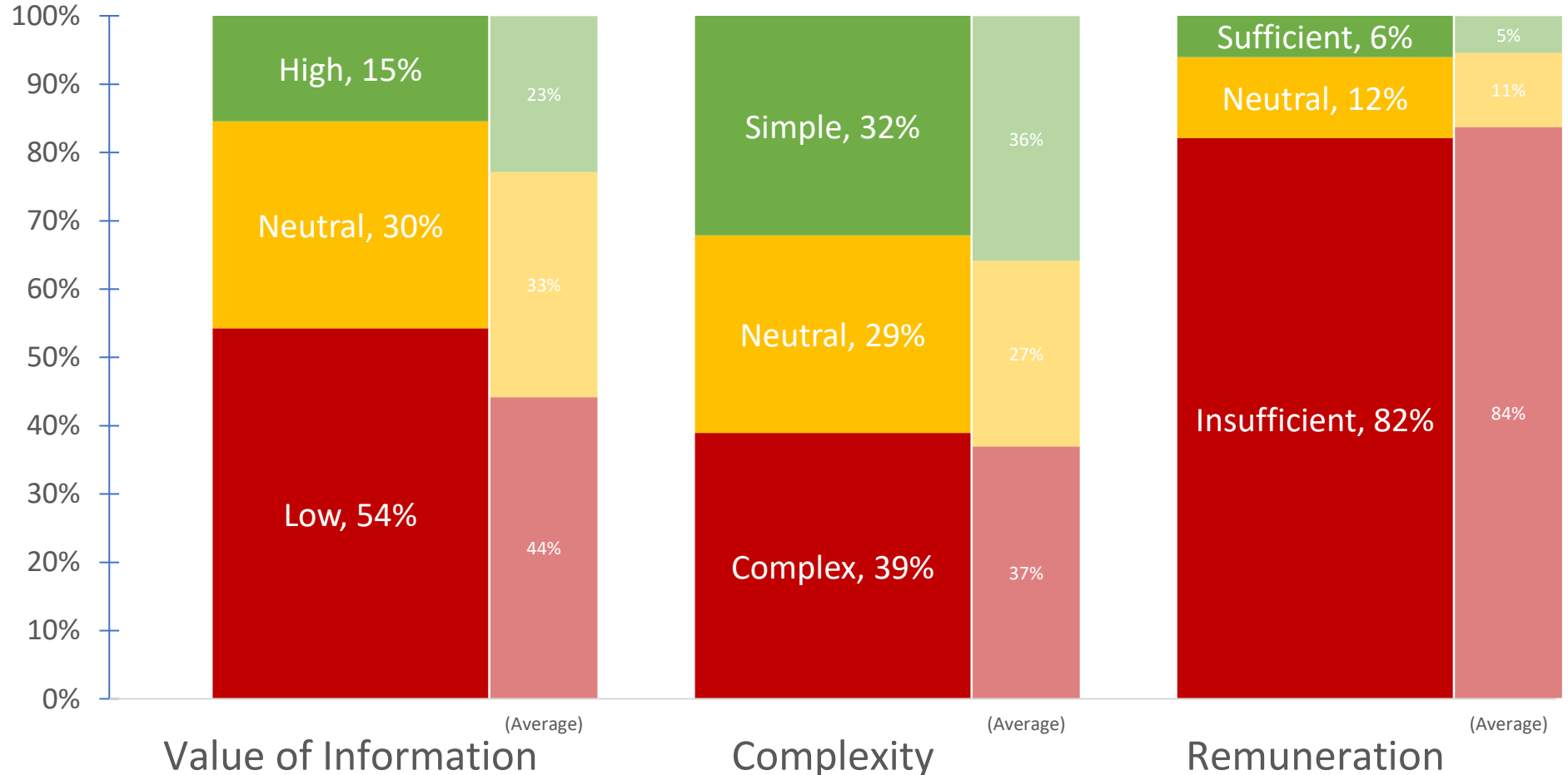


Pension Buyback

Percentage who reported using this form: **12%**

Notable usage

- ATL: 23%
- TER usage: 50%



Summary

Federal medical forms are a **significant or main source of administrative burden** for most family physicians.

Almost all family physicians support federal forms being re-assessed, especially **younger physicians** who are more likely to report that forms contribute to **burnout**, a desire to **no longer offer comprehensive care**, and feeling **unappreciated** by policy-makers.

Federal forms contribute to 2 out of 5 of Baby Boomer physicians' **desire to retire**.

Recommendations

Focus on federal forms is critical to reduce the overwhelming administrative burden on family physicians. Their time could be allocated to **direct patient care** to help improve access and outcomes. Improved remuneration for the forms could reduce associated stress and lead to **improved work-life balance** to prevent burnout—especially among younger family physicians:

- 1. Provide central federally-funded pool of physicians or other qualified health care workers to review and process applications.** The expectation of these services being provided by community-based physicians detracts from their ability to provide timely access to care and take on new patients. This change will remove the responsibility of gatekeeping of various federal programs by community-based family physicians
 - Alternatively, task-shift responsibility for forms completion to other members of interprofessional teams to foster collaboration and increase available physician time for direct patient care.
- 2. In the short term – commit to simplifying/streamlining forms and provide enhanced compensation to family physicians through dedicated federal funding.** Patients should not be required to pay out-of-pocket for insufficiently compensated forms.
- 3. Institute a federally-funded Task Force (including representative sample of family physicians compensated for their time) to guide the streamlining of frequently used forms:**
 - Disability Tax Credit Certificate
 - Medical Certificate for EI: Sickness Benefits
 - CPP Disability Credit
 - HC Special Access Program (Drugs) request
- 4. Eliminate the need for forms to be filled out by family physicians wherever possible.** This will reduce administrative burden and lift the need for patients to gather onerous documentation to support core well-being.