

**PROJECT STATUS REPORT**

# **Reducing Physician Administrative Burden**



Office of Regulatory Affairs and Service Effectiveness

November 2020

# Background

Physicians everywhere, including in Nova Scotia, have raised unnecessary administrative burden as an issue impacting patients, patient care, professional practice and the effectiveness of the health care system overall.

Given the experience of the Office of Regulatory Affairs and Service Effectiveness (the Office), along with its demonstrable and quantifiable success in reducing unnecessary regulatory burden, the Department of Health and Wellness asked the Office to partner and lead a pilot project to identify and implement concrete actions to reduce unnecessary physician administrative burden to make it easier for physicians to do what they do best – care for their patients.

Throughout summer and fall 2019, the Office met with dozens of physicians who detailed the toll of unnecessary administrative burden. In addition to articulating the issue and its impact, physicians provided many ideas to reduce this burden. These thoughtful and candid discussions informed a draft workplan for the pilot project which was provided to key stakeholders, including Doctors NS, the Nova Scotia Health Authority and the Department of Health and Wellness for additional input and feedback.

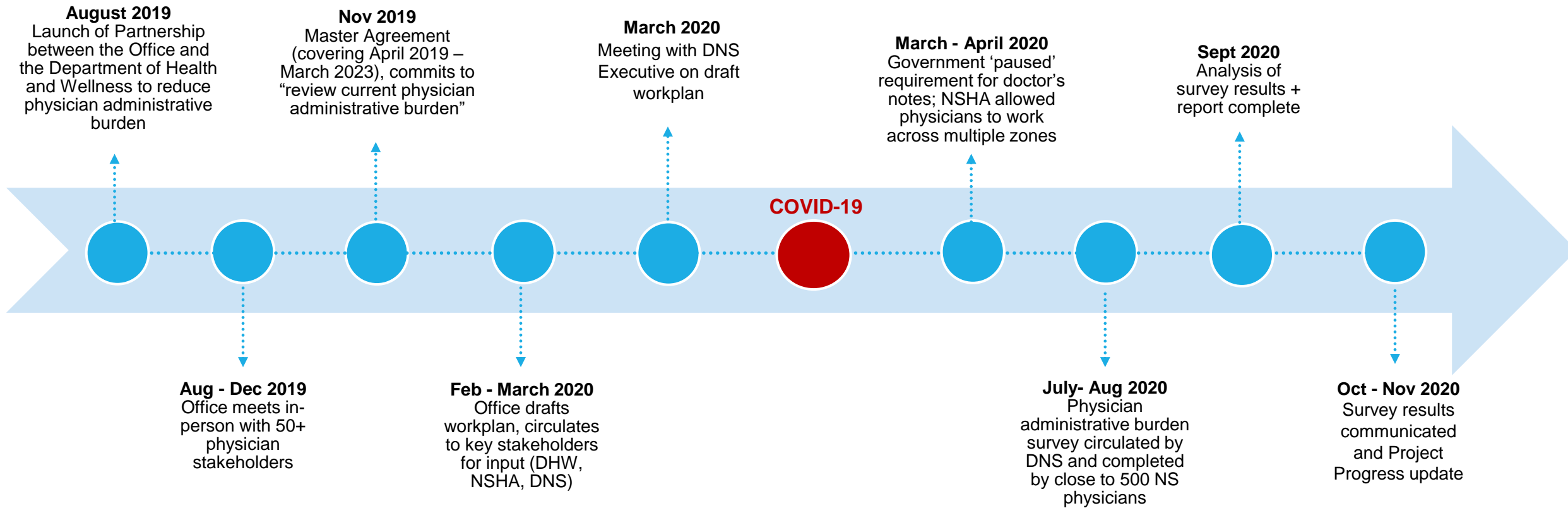
The workplan is separated into three areas:

- A. **Short-term actions:** actions with the potential to be achieved and implemented by end of 2020
- B. **Pilot projects:** More complex projects where pilot projects can be initiated before the end of 2020; and
- C. **Foundational work:** Work with longer term impact, for example, measuring physician administrative burden.

In Spring 2020, just as this work was to get underway, the pandemic hit. While the Office temporarily paused proactive outreach to allow its healthcare partners to focus on the crisis at hand, the Nova Scotia Health Authority and the Department of Health and Wellness used the pandemic to advance some of the actions. In Summer 2020, the Office formally re-started this work. Given the unique circumstances, timeframes to complete some actions may require adjustment.

The following is a progress update for the project.

# Timeline



# Workplan Overview + Status

## Workplan items

## Status

### A. Short-term actions

To be achieved and implemented by end of 2020\*

Improve 2-3 of the following forms:

- **The “Blue Form”**: Completion of the ‘blue form’ is required by physician for income assistance.
- **Continuing Care referral form**
- **Foreign physician applications with the Office of Immigration**
- **Pap test form**
- **Maternal Serum Screening form**
- **Exception forms**: Physicians must complete an “exception form” and have it approved before Pharmacare will consider covering exception status drugs.

### UNDERWAY

- The Office surveyed physicians to determine how much time they spend on each identified form.
- The Office has secured a partnership with the Department of Community Services to improve the **blue form**; form improvement expertise at Service Nova Scotia and Internal Services is also supporting this work.
- The anticipated delivery date for a first draft of form to ‘test’ with stakeholders is by December 2020.
- We will take the learnings from this initiative and apply to other forms.

\*some implementation timeframes to be adjusted due to pandemic impact

Work with HRM to determine whether and how the use of a pre-approved condition (such as the Disability Tax Credit) can allow easier and simpler access to Access-A-Bus for disabled Nova Scotians and to make the process more streamlined for physicians.

### UNDERWAY

- The Office has held initial discussions with HRM to assess willingness and ability to partner.

Support the NSHA and IWK as they move physician reappointment and its performance review systems online.

### UNDERWAY

- Work between NSHA, IWK, and College is underway to improve information sharing and align timing.

Expand the window for physicians to complete death certificates for patients who pass in long-term care facilities.

### UNDERWAY

- In discussions with DHW and MSI, and further physician discussions, the issue appears not be with window to complete death certificate but billing and payment.
- Additional discussions required.

# Workplan Overview + Status

Workplan items	Status
<b>B. Pilot Projects</b>  Pilot projects that can be initiated before the end of 2020	<b>COMPLETE</b> <ul style="list-style-type: none"><li>• To free capacity in health care system, in March 2020, the provincial government announced employers cannot require a doctor's notes for employees who were off work.</li><li>• The Office surveyed physicians to determine how much time they spend on doctor's notes, the impact and of this time and assess the impact of the March announcement banning doctor's notes.</li><li>• The Office will be providing this analysis to key stakeholders in October 2020 and will work with stakeholders to determine how / whether to make this change permanent.</li></ul>
In partnership with relevant stakeholders, pilot a program for Province-wide (multi-zone) appointments for a specific specialty (opt-out approach for E. R. doctors), respecting scope of practice and tiering of hospitals and emergency rooms.	<b>COMPLETE</b> <ul style="list-style-type: none"><li>• In an effort to be prepared for the pandemic, all qualified Emergency Department (ED) physicians, critical care and ICU physicians in Nova Scotia were privileged in all zones.</li><li>• The privileges last up to a maximum of three years.</li><li>• The Office will work to determine if this should be adopted permanently.</li><li>• Work is also underway by the NSHA to review the bylaws to determine if there are more efficient and effective approaches to provincial privileging.</li></ul>
Pilot a physician navigator to assist new physicians in Nova Scotia and could include support navigating the licensing and privileging process and/or supporting new physicians setting up a practice.	<b>UNDERWAY</b> <ul style="list-style-type: none"><li>• The Office surveyed physicians to determine if physicians would support/ use such a resource; overwhelmingly they indicated they would.</li><li>• The Office will be providing this information to key stakeholders in October 2020 and will begin work to understand other physician supports and how to ensure this resource supports and complements existing resources.</li></ul>

# Workplan Overview + Status

	Workplan items	Status
<p><b>C. Foundational Work</b></p> <p>Work with longer term impact, for example, measuring physician administrative burden</p>	<p>Benchmark physician administrative burden and develop a methodology for measuring burden and improvements. This work will take the form of a physician survey conducted in partnership with Doctors Nova Scotia.</p>	<p><b>COMPLETE</b></p> <ul style="list-style-type: none"><li>• In July 2020, the Office – with the support of DNS,IWK, DHW and NSHA – surveyed close to 500 physicians to quantify and better understand the impact of physician administrative burden.</li><li>• Results have been analyzed and will be provided to key stakeholders in October and November 2020.</li><li>• Next steps will be to determine what additional actions to take to address survey findings – outlined in following pages.</li></ul>