YOUR WORK COUNTS

Dr Luke Bradford
Medical Director

Project aims

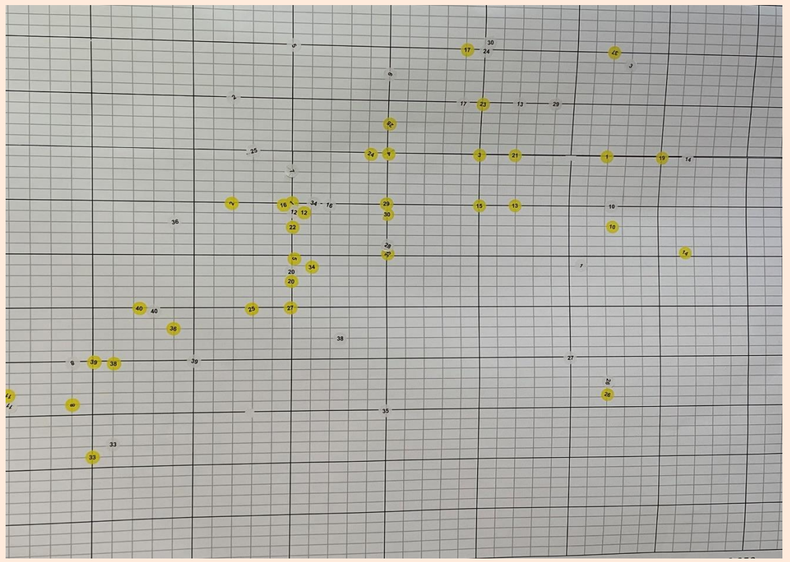
1. What a fair and reasonable 40-hour week looks like.

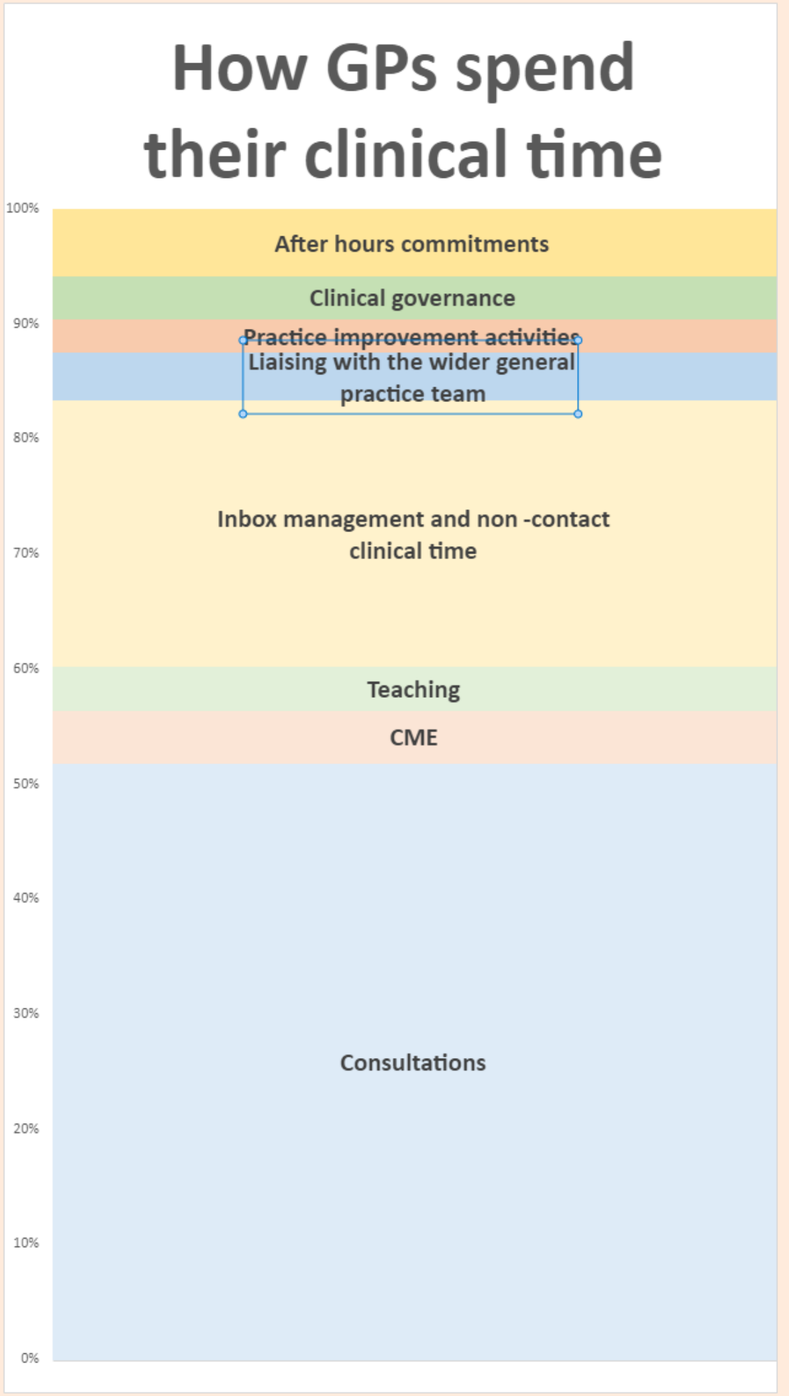
2. Safe and sustainable patient loads.

3. Ratios for how many GPs per 100,000 patients each region, and the country, needs.

Why we’re doing this

Data collection - GP23





Data collection – diary studies

Two diary studies:

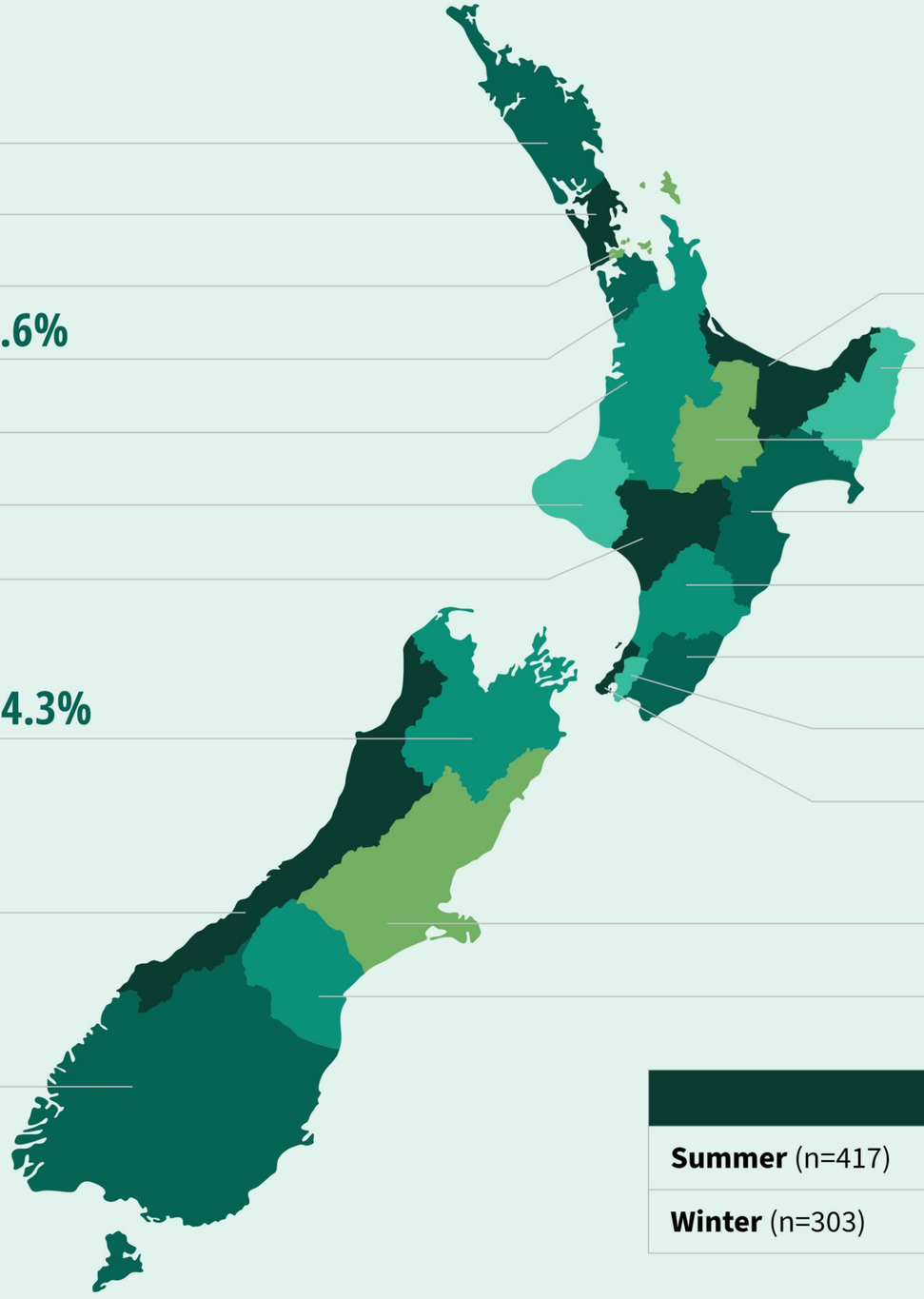
- Summer, December 2023, 14 days
- Winter, June 2024, 7 days

Participants asked to record the time they spent on key tasks every day, including weekends:

1. Contact time (patient consultations)
2. Non-contact clinical time
3. Training and education
4. Clinical governance and practice improvement
5. Management (running the practice)

- Over 650 members have contributed and completed at least one diary study
- 154 members have completed both studies.
- Summer n= 417 Winter n = 303

Demographics



Northland **4.8%**

Waitematā **3.4%**

Auckland **16.3%**

Counties Manukau **3.6%**

Waikato **5.5%**

Taranaki **2.4%**

Whanganui **0%**

Nelson Marlborough **4.3%**

West Coast **0.2%**

Southern **11.0%**

Bay of Plenty **11.8%**

Tairāwhiti **0.7%**

Lakes **2.2%**

Hawke's Bay **3.1%**

MidCentral **2.4%**

Wairarapa **1.0%**

Hutt **1.9%**

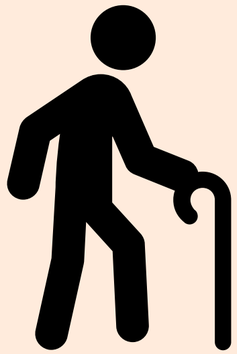
Capital and Coast **9.1%**

Canterbury (incl. Chatham Islands) **16.1%**

South Canterbury **0.2%**

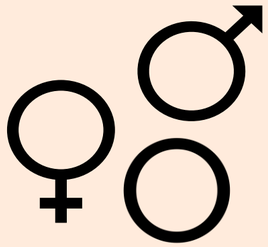
	Urban	Rural	Unclear
Summer (n=417)	79.6%	11.5%	8.9%
Winter (n=303)	78.6%	12.9%	8.6%

Demographics



Summer:
- 28 - 73 years
- *Mdn* = 45, *SD* = 10.6

Winter:
- 28 - 71 years
- *Mdn* = 46, *SD* = 10.7

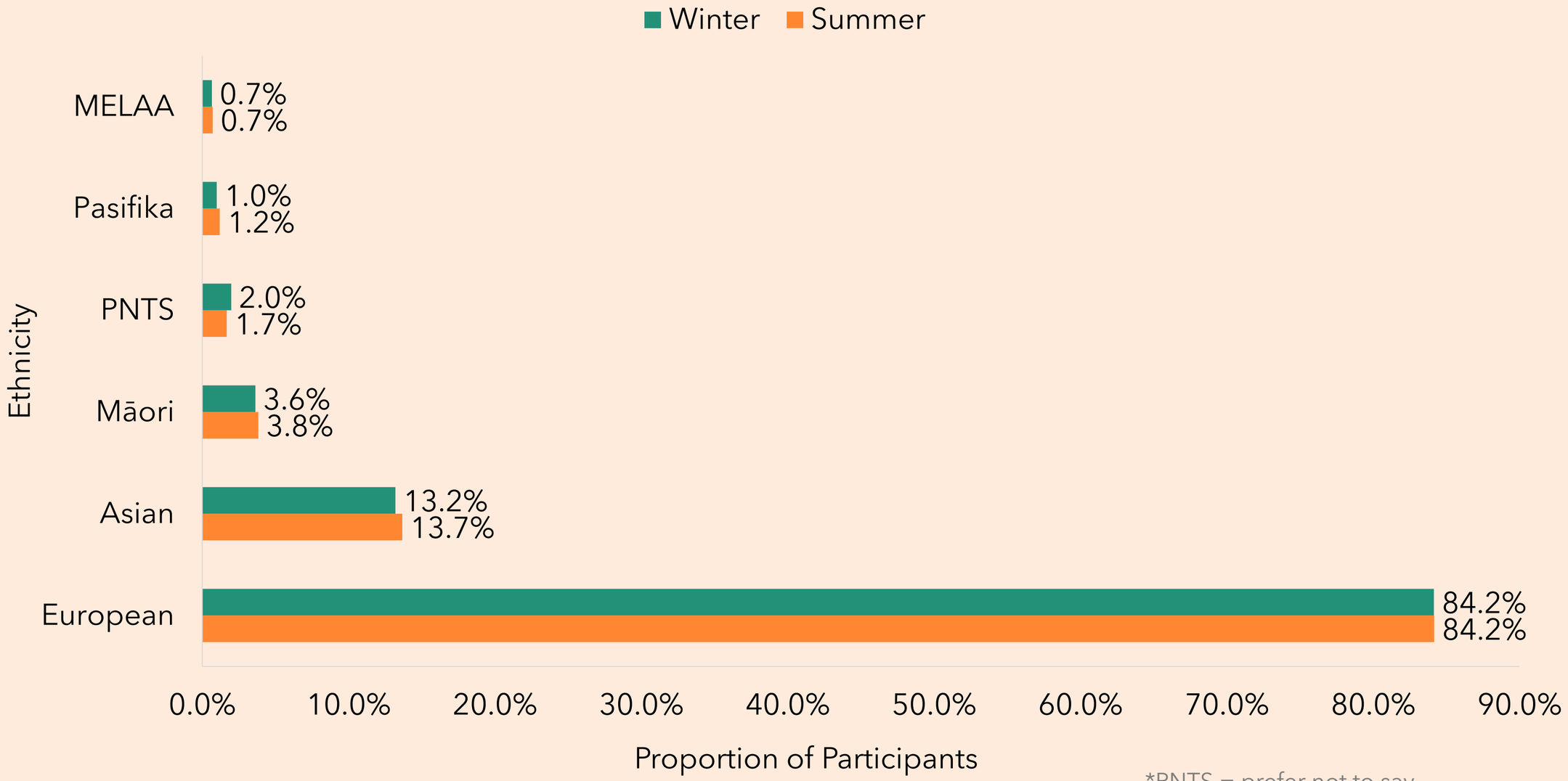


Summer:
- Women: 74.8%
- Men: 24.5%
- PNTS: 0.5%
- Non-binary: 0.2%

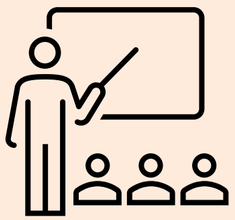
Winter:
- Women: 72.9%
- Men: 27.1%
- PNTS*: ----
- Non-binary: ----

*PNTS = prefer not to say
**excludes rural hospital doctors

Ethnicity

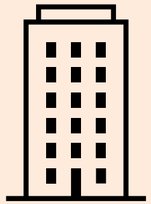


*PNTS = prefer not to say
**MELAA = Middle Eastern, Latin American, African



Teaching

	Summer	Winter
Teaching:	30.5%	34.7%
- GPEP teacher:	51%	52%
- GPEP medical educator:	22%	22%
- GPEP mentor:	48%	43%
- PGY1/2 teacher:	24%	21%



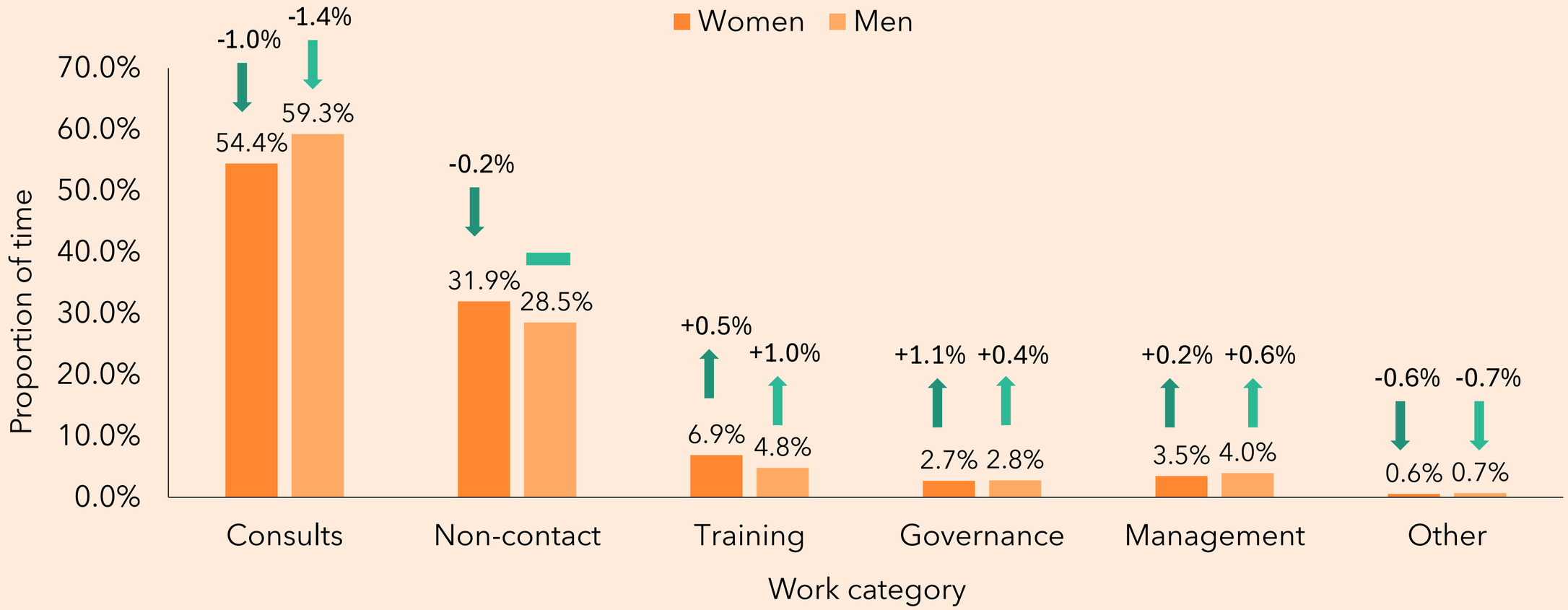
Ownership

	Summer	Winter
GP:	75.3%	72.9%
Corporate:	16.6%	14.2%
Trust/charity/community:	5.5%	8.3%
PHO/GP org:	3.6%	4.3%
Iwi:	1.0%	1.0%
Te Whatu Ora:	0.2%	----
University:	0.5%	----
Other:	2.6%	4.6%

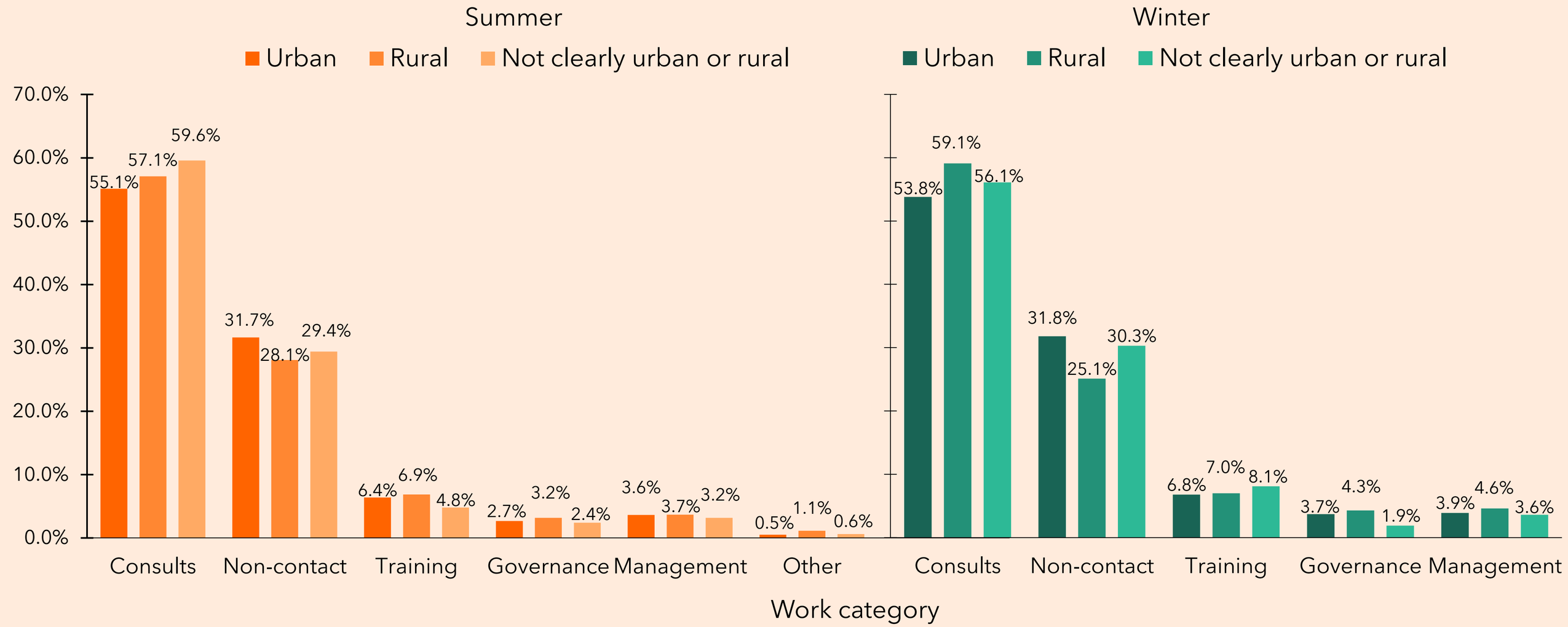
*excludes rural hospital doctors

Hours worked - comparisons

Tasks by Gender



Tasks by Urban/Rural



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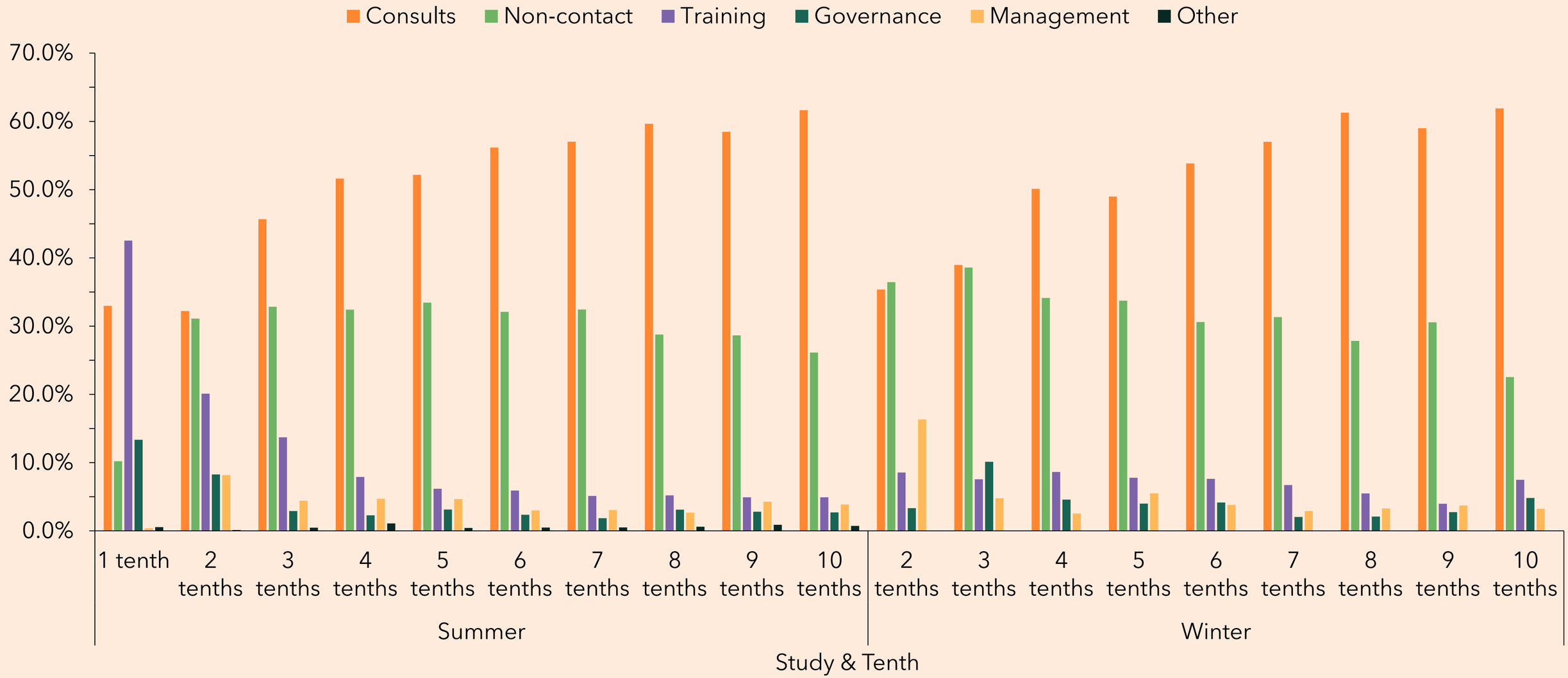
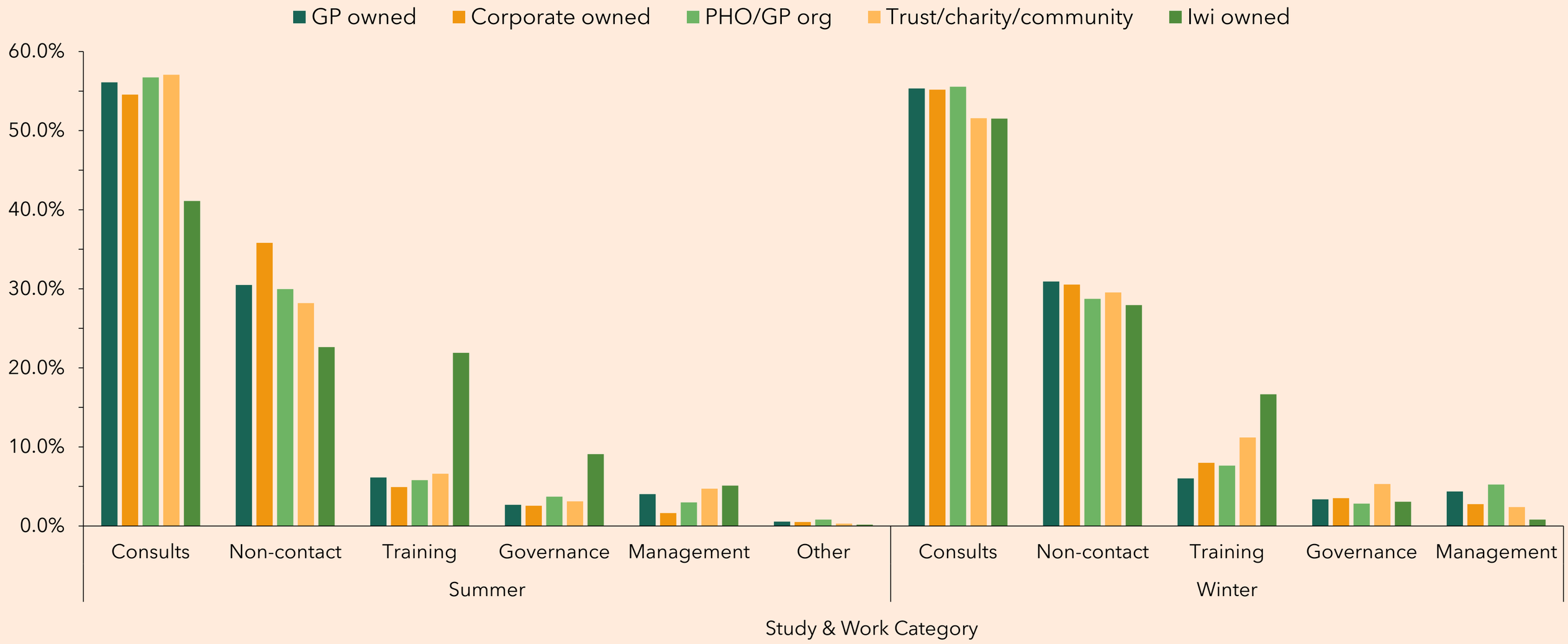
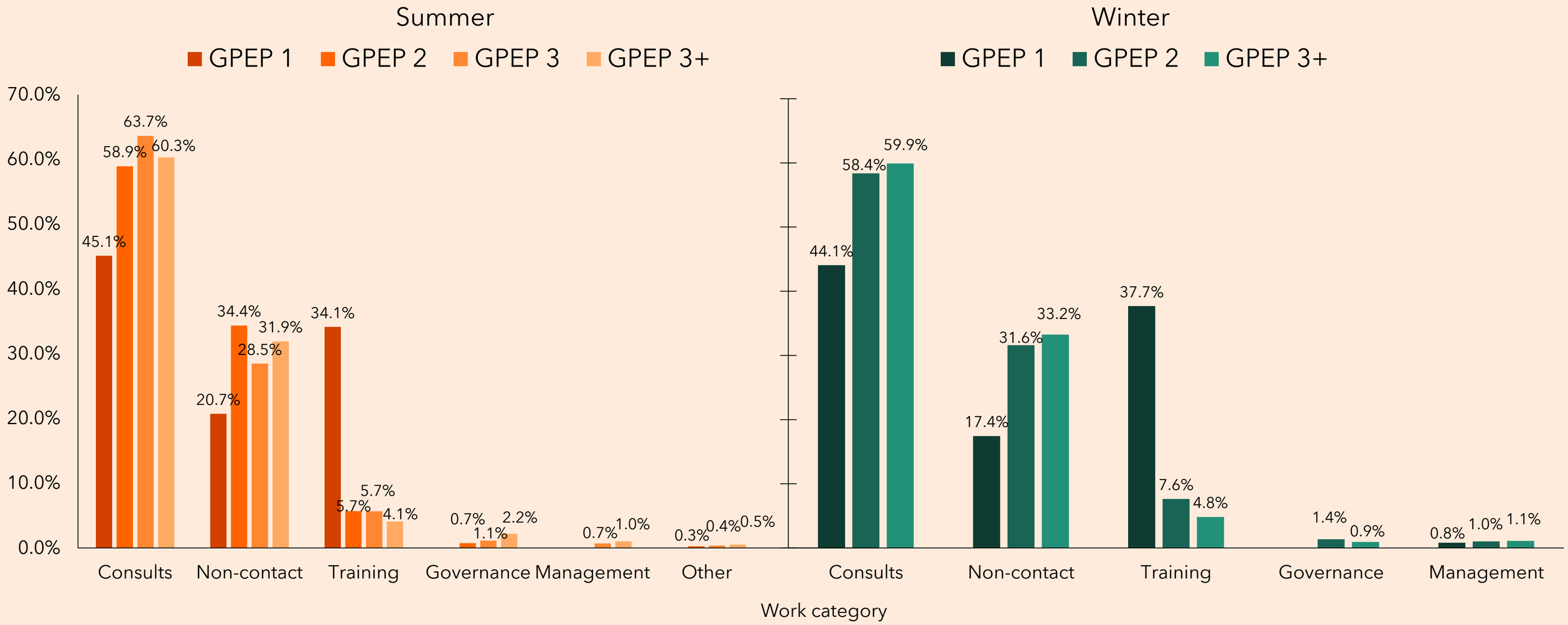
Tasks by Tenths



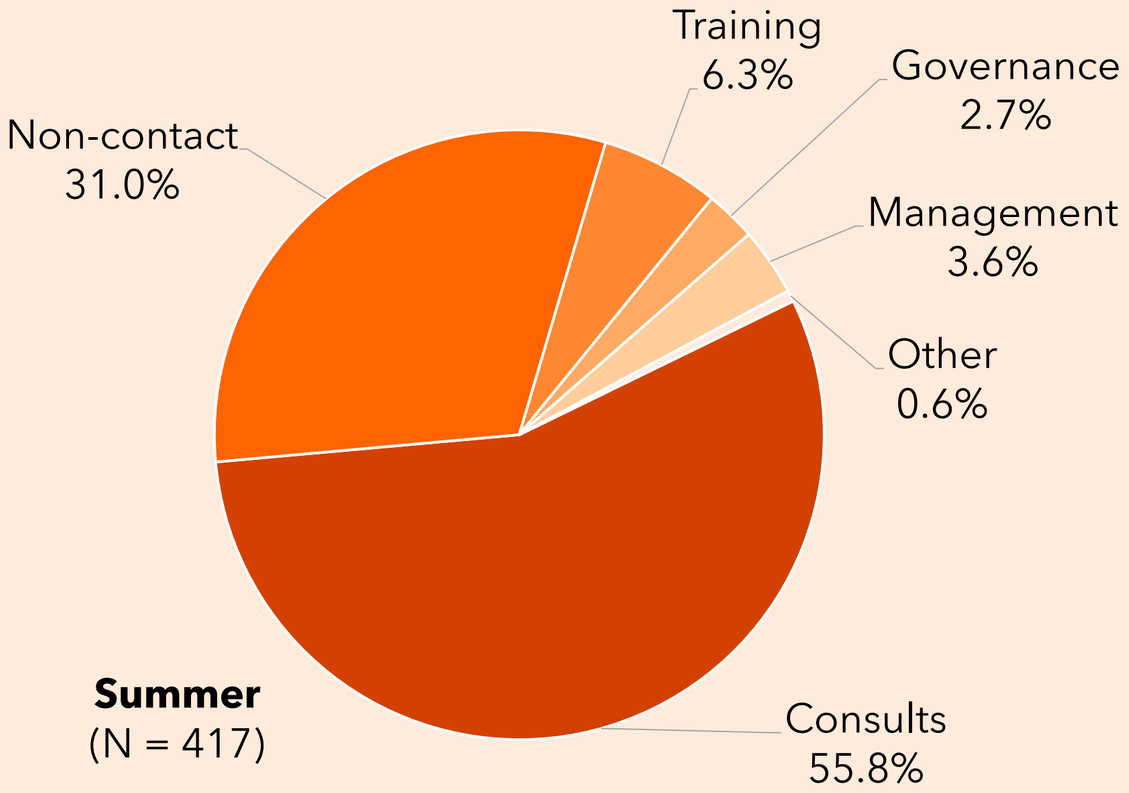
Tasks by Ownership

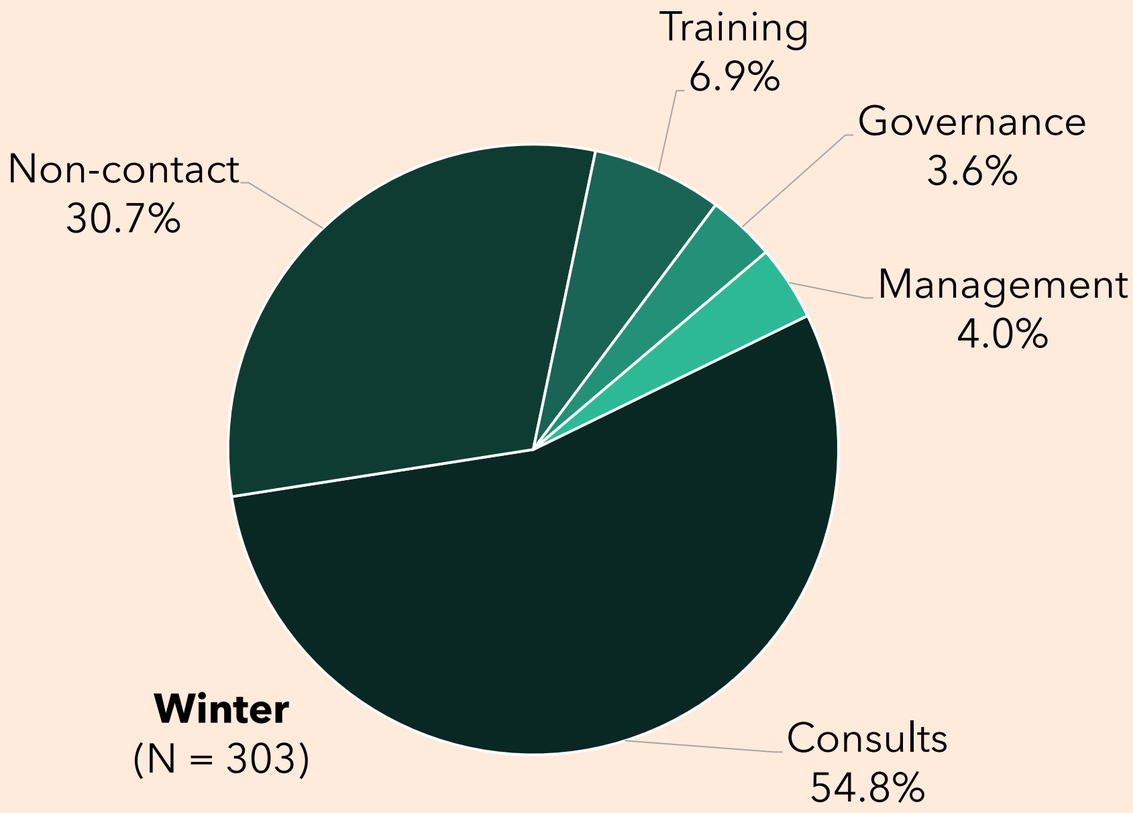


Tasks by GPEP Registrars



Time across tasks

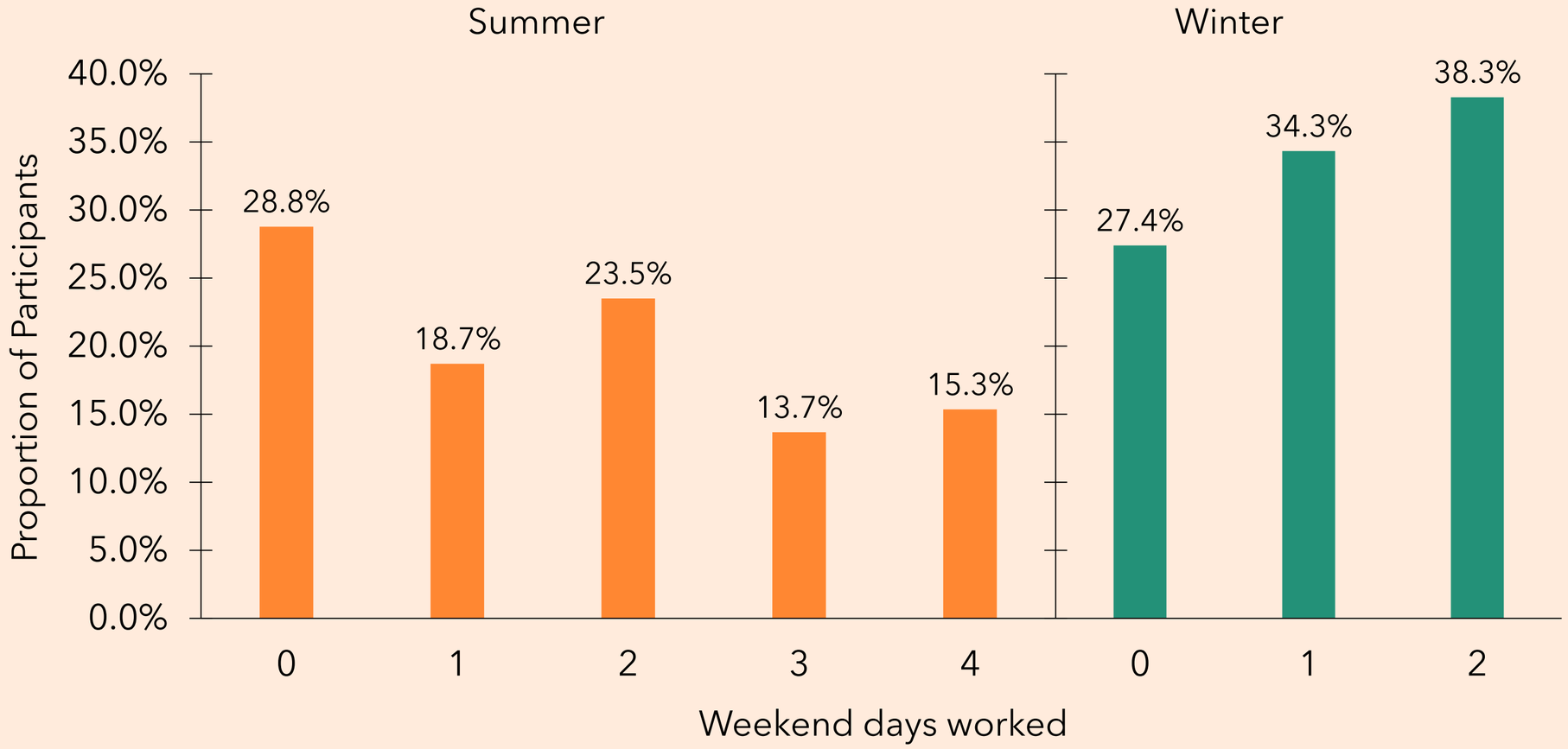




*excludes rural hospital doctors

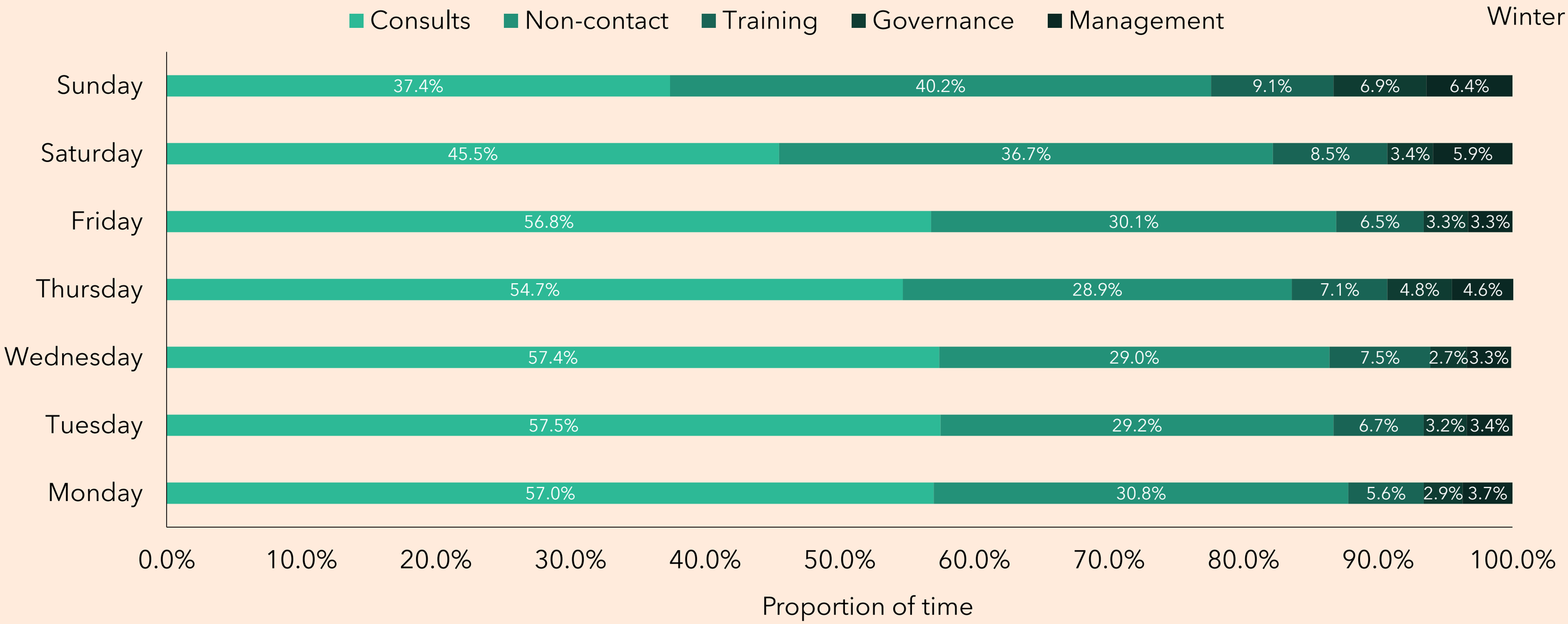
Weekend work

Weekend work



**excludes rural hospital doctors
*Summer study occurred over 14 days, winter over 7

Weekday vs Weekend Tasks



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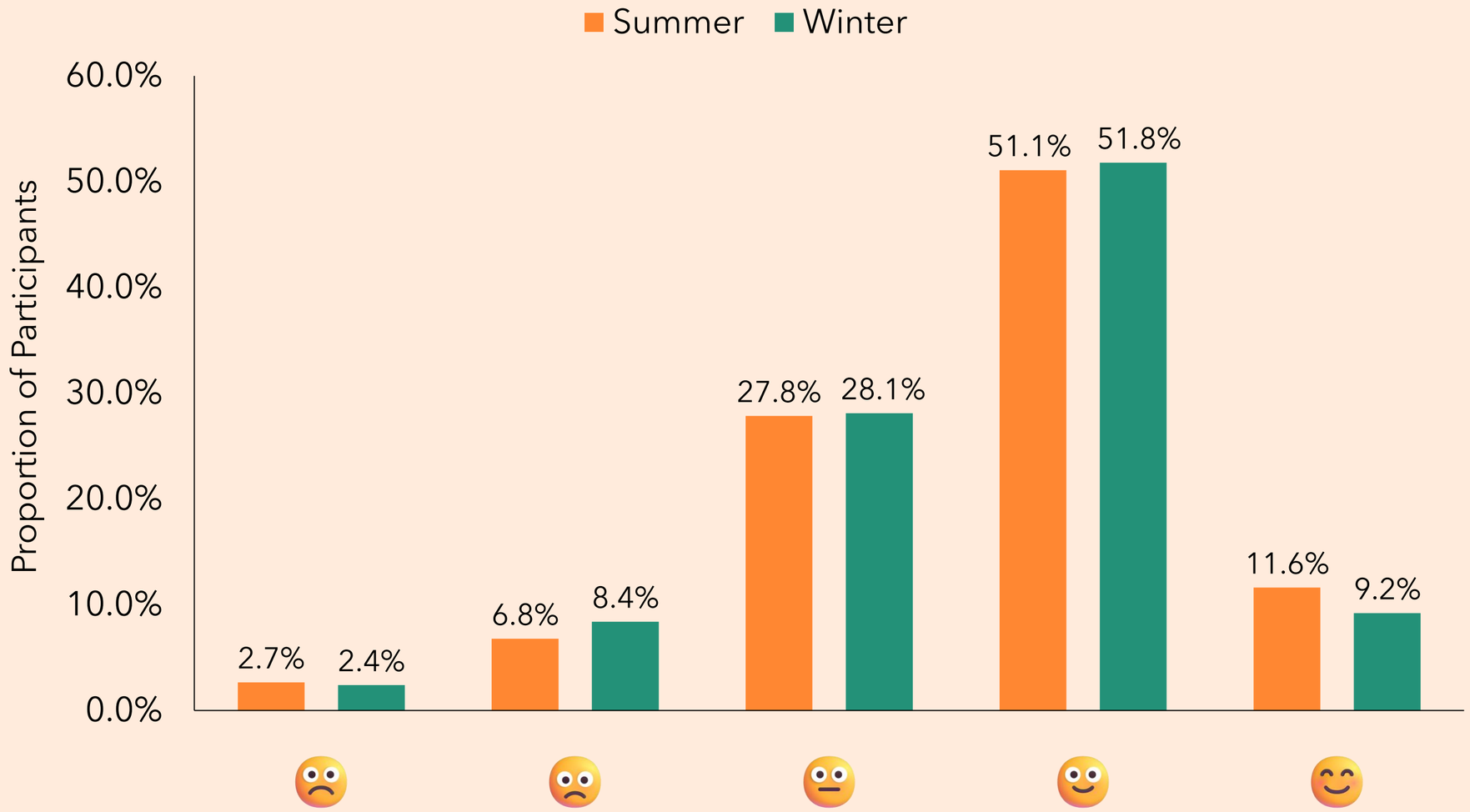
How we're feeling

Mood of participants



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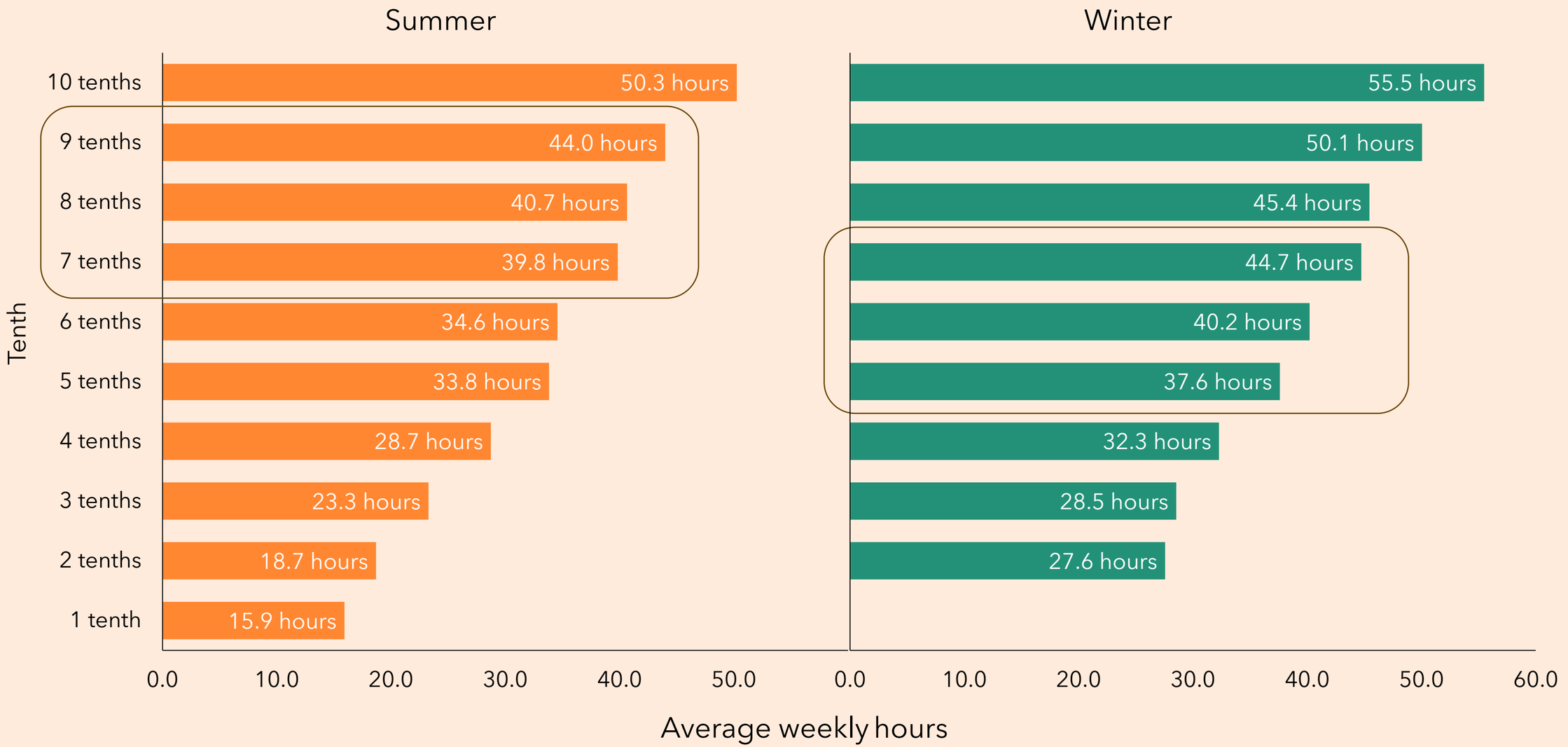
"Part time" vs. "Full time"

Weekly Hours across Tenths



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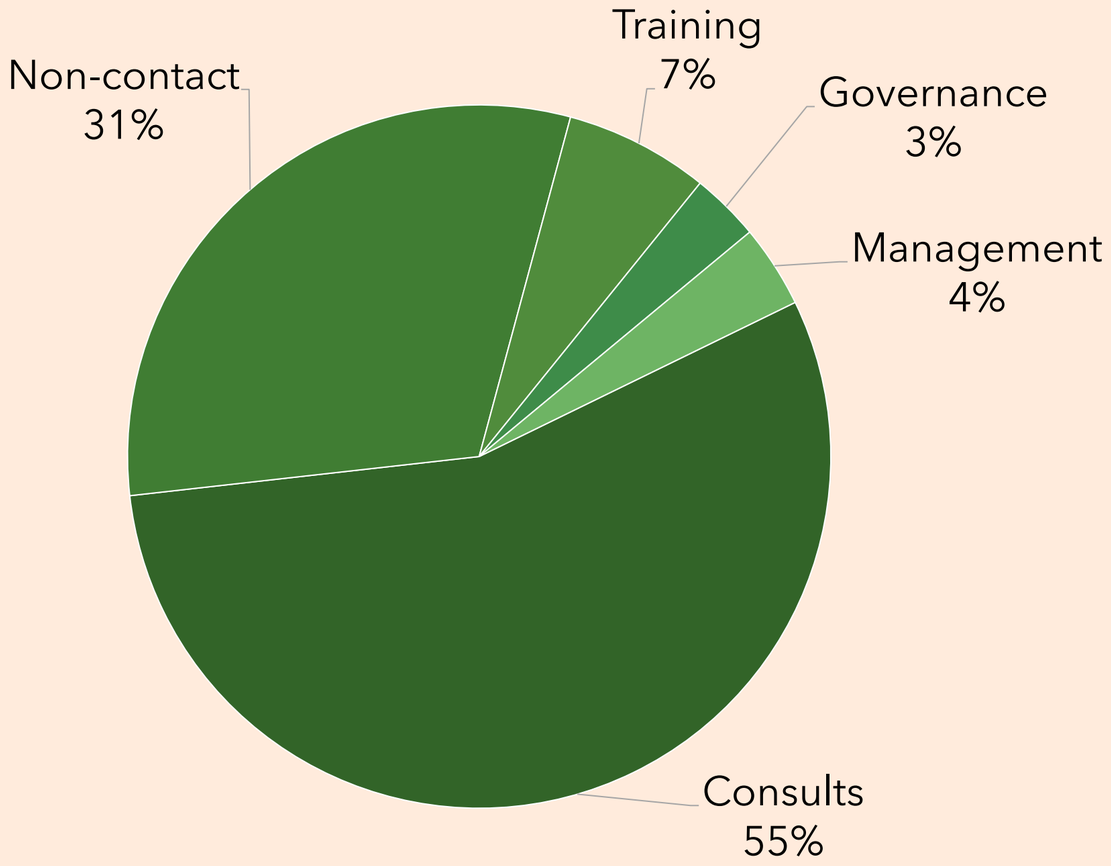
What a fair and reasonable 40-hour week looks like

What we are doing



Consults:	22 hours
Non-contact:	12 hours
Training:	3 hours
Management:	2 hours
Governance:	1 hour

Safe and sustainable patient loads

- Current utilisation data based on General Practice Qualifying Encounter Data (GPQED) though Health New Zealand
- A measure of enrolled patients' consultations with GPs/nurses.
- Or PHO reporting of GP consults, most based off billing data/accessing of NHI
- Nil robust data on patient utilisation of General Practice in New Zealand. The National Primary Care Dataset remains aspirational.
- How do we assign time value to new models of care?

Case study – Fifth Avenue Family Practice

- GP Owned
- Large urban practice
- 16 GPs
- 1-2 GPEP1s
- 1 PGY2
- 2 NPs
- 9 nurses, HIP, Health Coach, 2 HCAs, Clinical Pharmacist

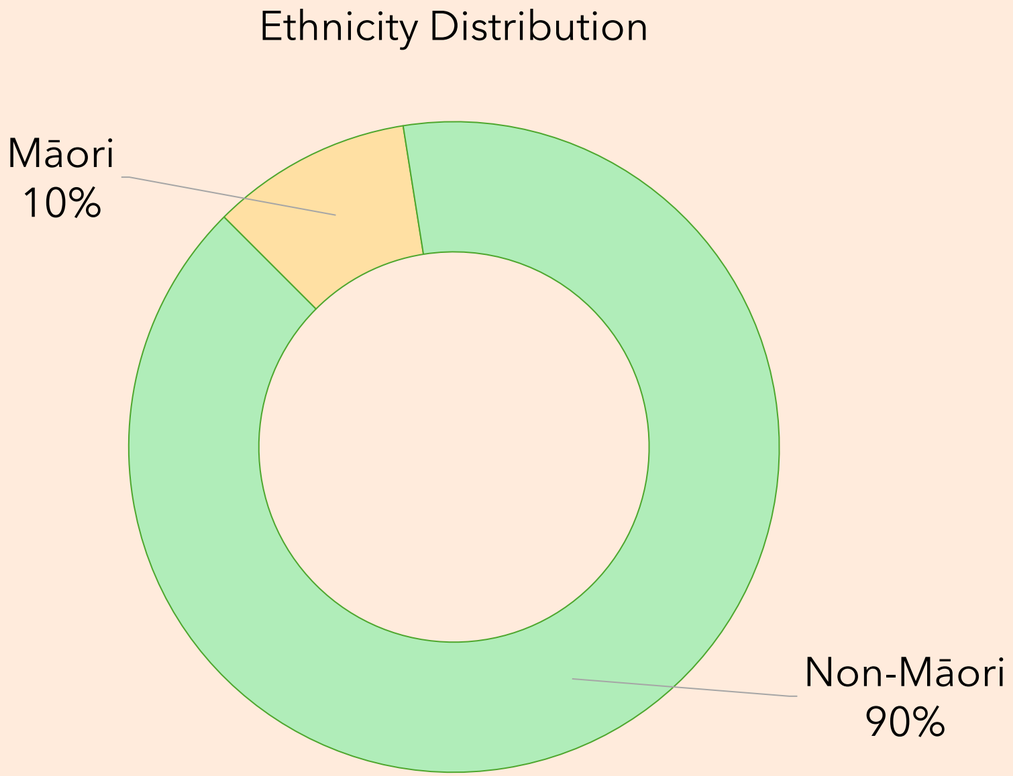
Design

Random sample of 300 patients (~2% overall) enrolled in Fifth Avenue Family Practice

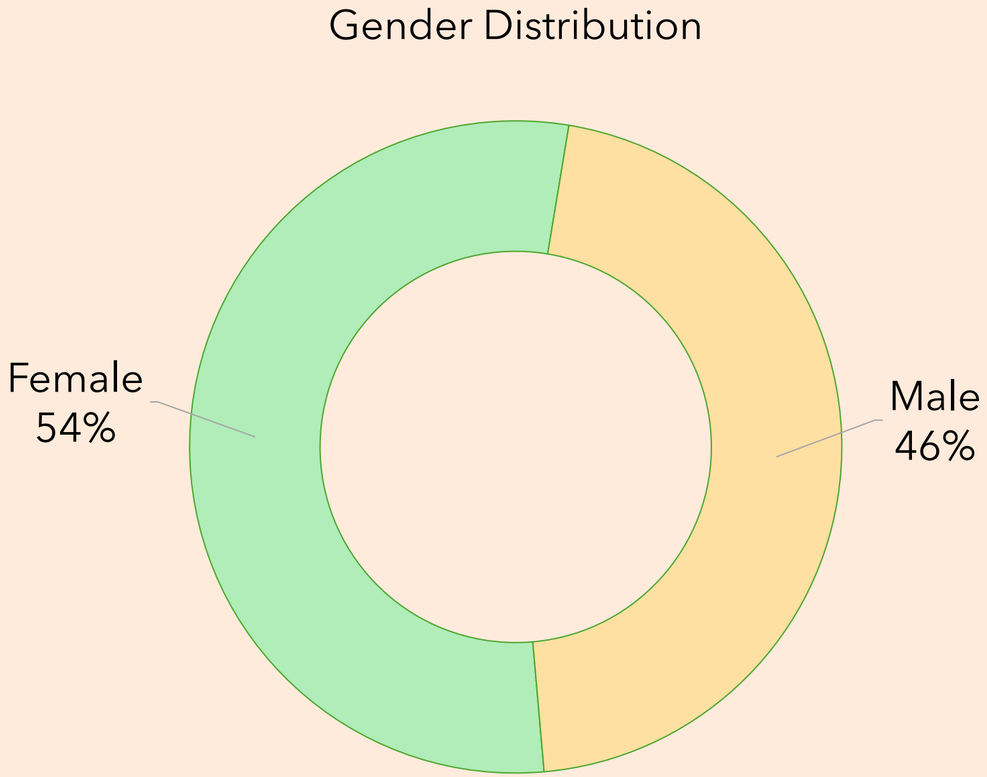
Weighted to capture Māori patients' engagement

Exclusion of patients who had transferred in or out of the practice during the year (n=15)

Sample demographics



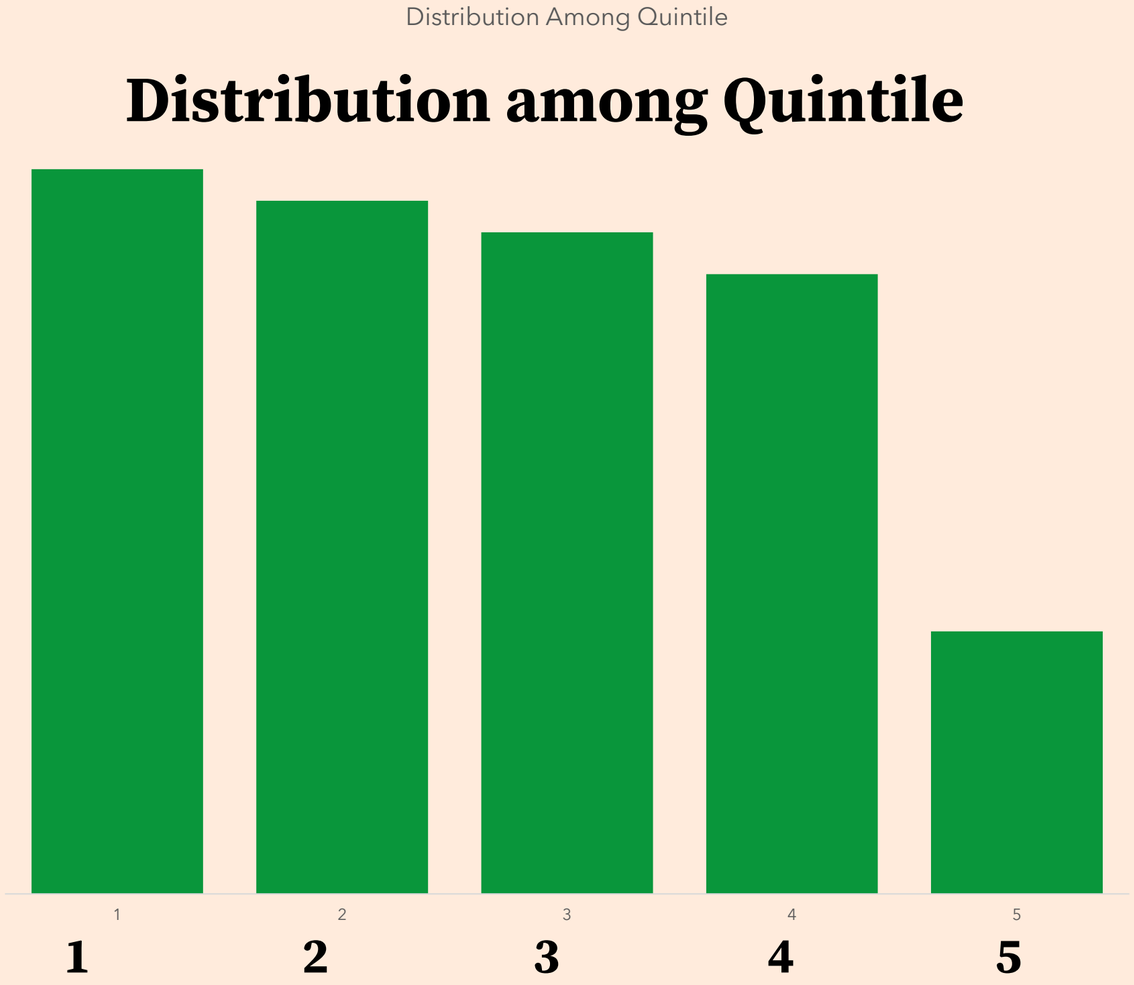
Practice: 11% Māori vs. 89% non-Māori



Practice: 53% Female vs. 47% Male

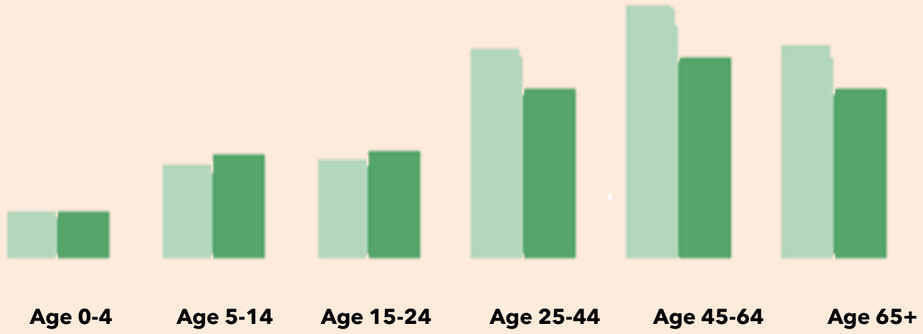
Sample demographics

Distribution Among Quintile

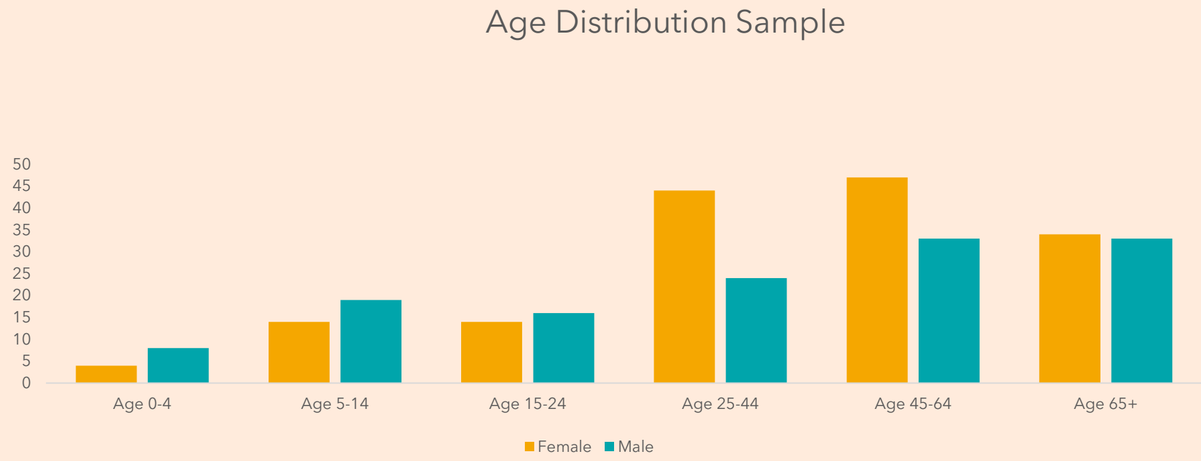


Sample demographics

PHO data age distribution



PHO data



Capturing engagement

Contact

- Number of appointments with GP, NP or Allied Health
- Phone calls recorded separately
- Surgical appointments recorded separately
- Whether appointment is with regular GP, other GP, registrar or house officer
- Online consults

Non-contact

- Script sent outside of appointments
- Referrals
- Communications from OOH, secondary/tertiary services
- Emails to patients
- Lab requests
- Lab results
- Radiology requests
- Radiology results
- Texts from patients
- ACC documentation

Average engagement

CONTACT		NON-CONTACT	
Doctor's appointment	2.64	Script	1.5
Nurse Practitioner's appointment	0.10	Phone call from doctor	0.19
Allied Health appointment	1.56	Communications from secondary	2.42
Surgical appointment	0.07	Email to patient	0.28
Online consultation	1.97	Text from doctor	0.50
		Recall text	0.30
		Referral	0.57
		Lab request	1.57
		Lab result	1.86
		Radiology request	0.27
		Radiology result	0.53
		ACC documentation	0.27
		Text from patient	0.52
	6.34		**10.78**

So what?

- 22 hours of contact time week
- ~ 40weeks of clinical work a year
  (Matches SMO MECA)
- 15 minutes per contact*
- 22 x 4 x 40 = **3,520 consult per year per FTE**

Doctor appointment 2.64 + surgical (0.07 x 2) + online consult (1.97 / 3)

= 3.44 15-minute blocks per patient per year in contact time

3520 / 3.44

= 1,023 patients per FTE GP

Checking our workings

- Our doctors including trainees currently work 100 nominal 10ths
- If 7/10ths = 1 FTE
- We have 14.3 FTE of GPs for 15,000 patients in an HCH, MDT based clinic

= 1,049 patients per FTE

Next steps

- Use FTE data in workforce planning and capitation modelling; sharing with HNZ, MH
- Test utilisation data methodology across different practices
- Compare to Health New Zealand modelling utilisation and agree method
- Calculate safe FTE and workforce need

Thank you

Tom Broadhead, Simon Wright, Jordan Schulde,
Maureen Gillon, Simone White and Dr Dane Kritzinger

Your work counted.
Thank you.

Any questions?