

# A checkup on CLINICAL TOOLS:

## Results of a Needs Assessment of Primary Care Providers in Ontario



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### CONTEXT

The Centre for Effective Practice (CEP) is collaborating with the Ontario College of Family Physicians (OCFP) and the Nurse Practitioners' Association of Ontario (NPAO) on the Knowledge Translation in Primary Care Initiative. The purpose of the Initiative is to improve engagement and enhance communication with primary care providers across Ontario.

As a first step in this Initiative, a needs assessment was conducted with primary care providers (PCPs). For this Initiative, PCPs are defined as family physicians and primary health care nurse practitioners. The needs assessment was conducted with PCPs in Ontario to determine their information needs and communication preferences. This information and data will provide CEP with the knowledge to communicate with and engage PCPs more effectively, and will inform future directions of the Initiative.

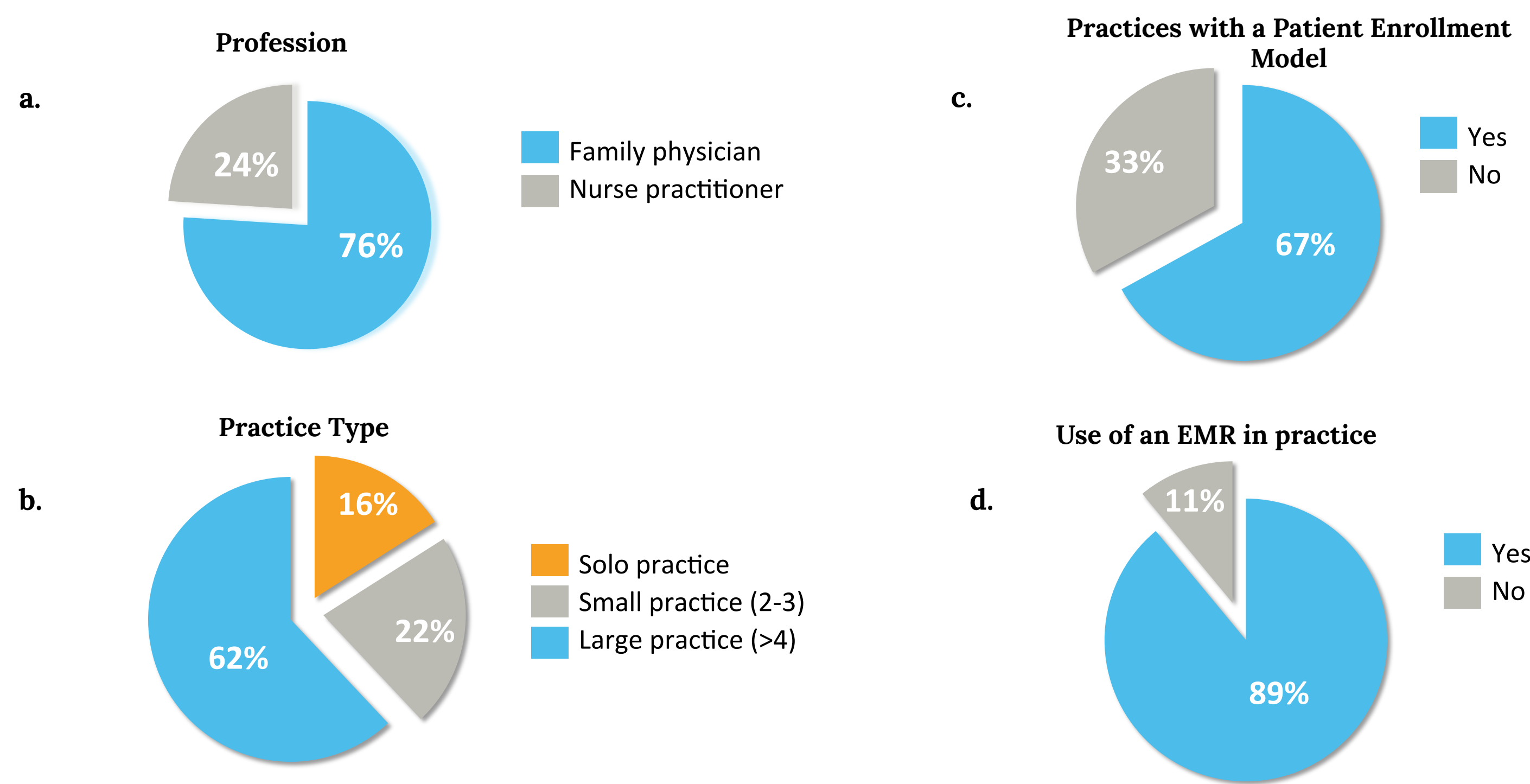
### OBJECTIVES

The objectives of this needs assessment are to better understand the perspective of PCPs on:

1. Key elements of clinical tools;
2. Clinical topic prioritization from a pre-determined list; and
3. How to best communicate with and engage PCPs.

### METHODS

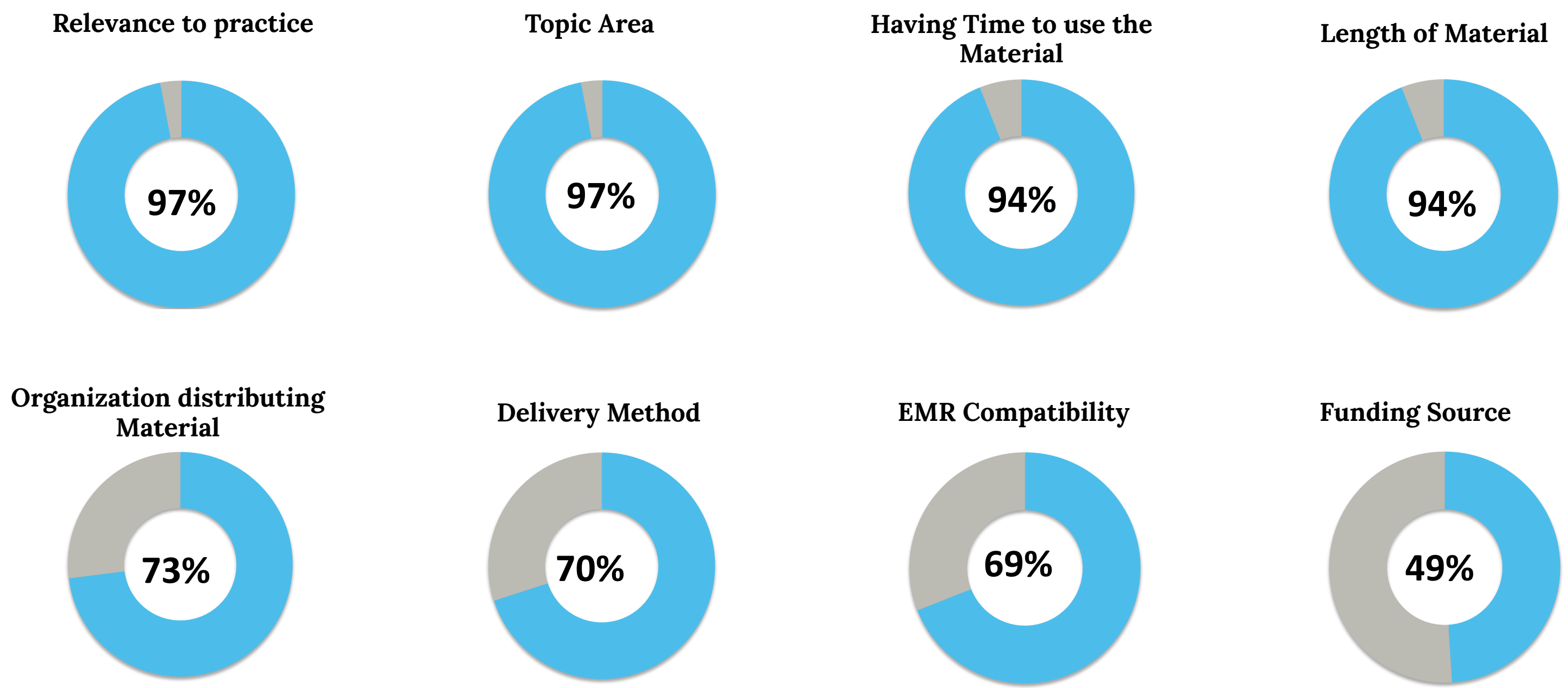
An online survey was developed in order to gain input from PCPs across the province in a cost effective and timely manner. The survey was developed, pilot tested and distributed to family physicians (via OCFP) and primary health care nurse practitioners (via NPAO) to target over 12,000 family physicians (FPs), and 1,500 primary health care nurse practitioners (NPs). Over a 10 week period, 810 responses were received. After excluding invalid responses, 755 responses resulted, representing a response rate of 5.4% (755/14,060 PCPs: 12,300 FPs & 1,760 NPs who received the survey link). Only valid responses (n=640) were included in the final analysis.



**Figure 1. Respondent Demographics.**

Demographics of survey respondents by (a) profession, where the majority of survey respondents were family physicians (76%); (b) practice type, where 62% of survey respondents practice in a large practice setting; (c) practice in a patient enrollment model (PEM), reflects about two-thirds (67%) of survey respondents, and (d) practices using an Electronic Medical Record (EMR), indicating that the majority of survey respondents use an EMR in their practices.

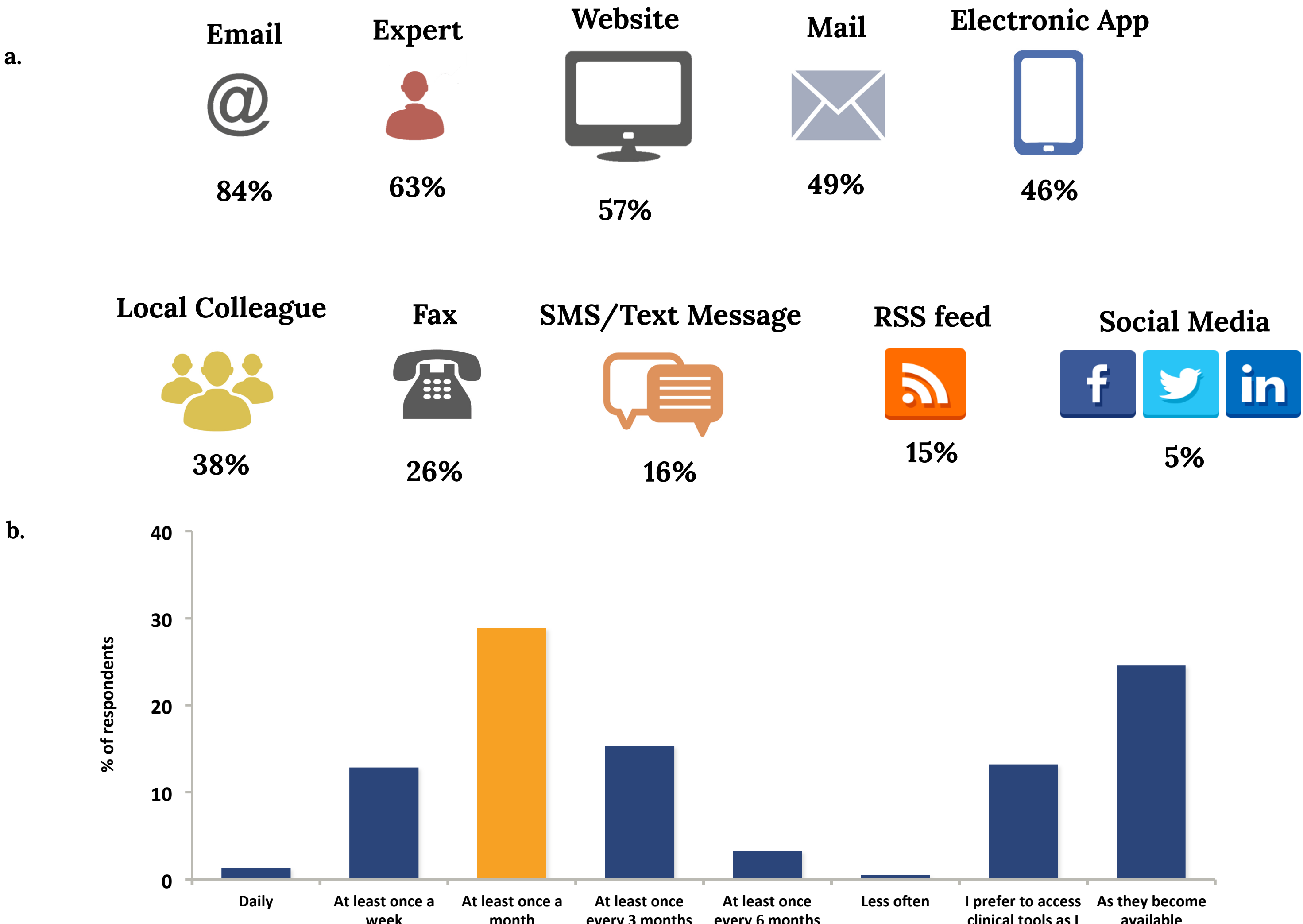
### RESULTS



**Figure 2. Factors Influencing the Use of Clinical Tools.**

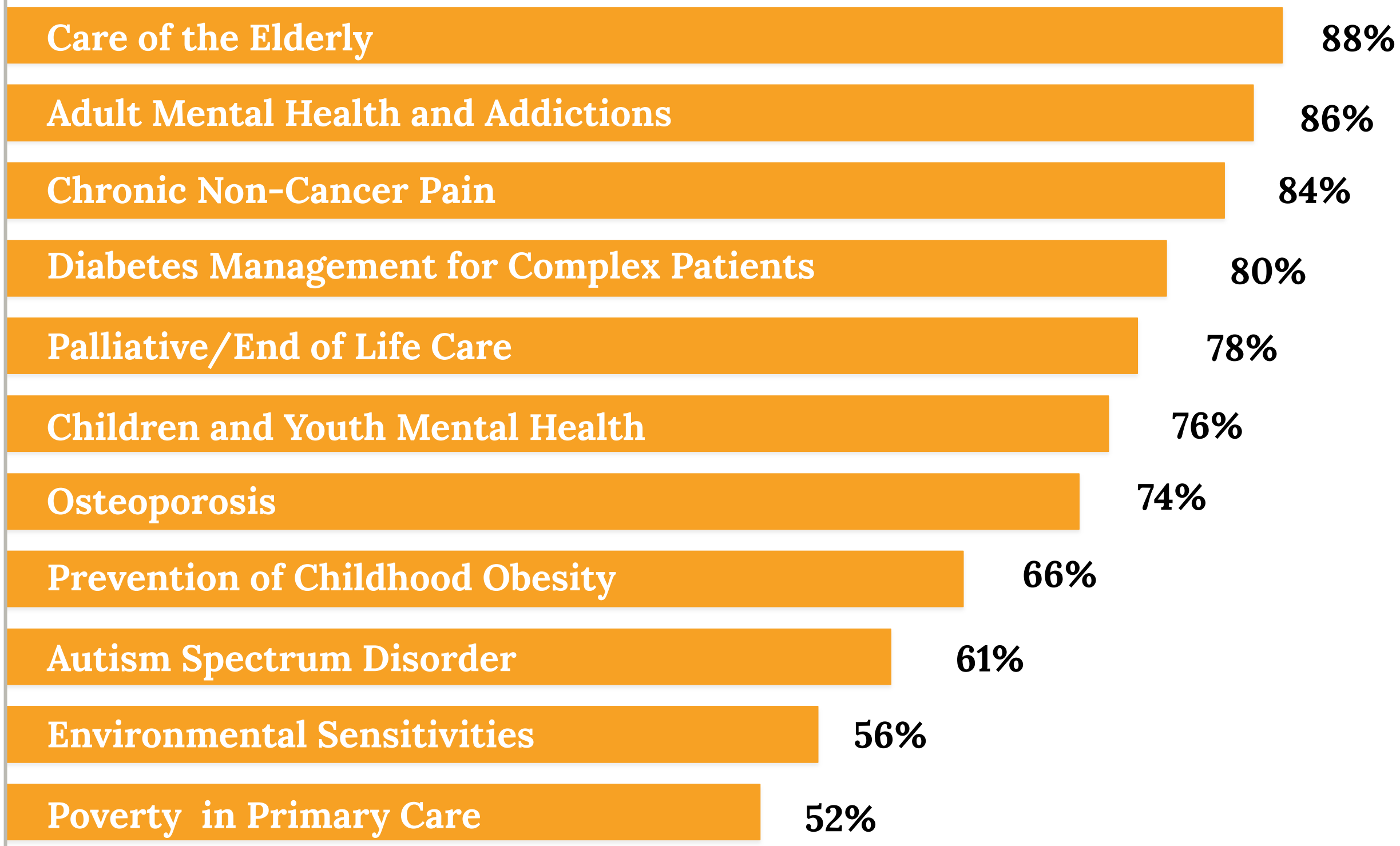
Respondents were asked to rate the importance of a number of factors that would determine whether they would utilize a clinical tool. The four factors most frequently identified by respondents as being important to them were: *relevance to their practice* (97%), *topic area* (97%), *length of material* (94%) and having the time available to utilize the material (94%).

Displayed above are the percentages of survey respondents who indicated factors were *very important* or *somewhat important*. Factors were pre-determined and provided to survey respondents in a list on a 5-point Likert scale.



**Figure 3. Preferred Method and Frequency of Delivery.**

a) Primary care provider respondents indicated that they preferred clinical tools to be communicated via *email* (84%), from a *recognized expert* (63%) or *posted on a website* (57%). Other methods of delivery such as RSS feed alerts (15%) or social media (5%) rated low. b) Survey respondents most often indicated that they would like to receive clinical tools at *least once a month* (29%), as they *become available* (25%) or at *least every 3 months* (15%). Displayed above are the percentages of survey respondents who indicated they *strongly preferred* or *agreed* in the preferred method and frequency of delivery. Factors were pre-determined and provided to survey respondents in a list on a 5-point Likert scale.



**Figure 4. Interest in Receiving Clinical Tools by Clinical Topic Area.**

Some of the most highly rated clinical topic areas identified by survey respondents were **Care of the Elderly** (88%) and **Adult Mental Health and Addictions** (86%). Importantly, no clinical topic area was rated below 50%.

Displayed above are the percentages of survey respondents who indicated they were *very interested* or *somewhat interested* in receiving tools on the clinical areas listed above. Clinical areas were pre-determined by Ministry of Health and Long-Term Care and other key stakeholders, and provided to survey respondents in a list on a 5-point Likert scale; respondents were also provided the opportunity to identify a clinical topic area not already listed.

### CONCLUSIONS & FUTURE CONSIDERATIONS

The findings will be used to inform activities for the Knowledge Translation in Primary Care Initiative. These results will help to ensure that the development and communication of clinical tools for PCPs are reflective of their needs and preferences.

A Topic Selection Advisory Panel (TSAP) was established, comprised of key stakeholder organizations and primary care providers in Ontario (as identified by primary care providers in the needs assessment survey). The TSAP assisted in confirming the priority clinical topic areas for the Knowledge Translation in Primary Care Initiative, 2015/2016. The rated clinical areas above (Figure 4) were presented to the TSAP for consideration.

Through this topic selection process, the clinical topic areas that have been confirmed for 2015/2016 are:

**Adult Mental Health & Addictions**  
**Care of the Elderly**  
**Children & Youth Mental Health**  
**Chronic Non-cancer Pain**  
**Poverty in Primary Care**  
**Prevention of Childhood Obesity**

#### Next Steps:

CEP is currently undertaking clinical tool development for several of the above topics, including *Poverty in Primary Care* and *Prevention of Childhood Obesity*. The Topic Selection Advisory Panel will reconvene in early 2016 to assist in selecting future clinical tool topics, with the engagement of primary care providers and key stakeholders.

[www.effectivepractice.org/ktinitiative](http://www.effectivepractice.org/ktinitiative)

