

# NUMBER & TYPE OF SERVICES BY PROVIDER AGE (%)

SERVICES OFFERED	≤39	40-49	50-59	≥60
Care for an emergent but minor problem	100	98.1	98	100
Non-urgent care	100	100	98.6	98.9
Rehabilitation services	18.9	26.7	30.8	31.1
Minor office procedures	91.9	88.6	78.1	87.8
Prenatal maternity care (alone or shared)	77	81	73.3	62.2
Intrapartum care (attending deliveries)	14.9	16.2	15.8	7.8
Postpartum care (in-office follow-up)	90.5	88.6	80.8	72.2
Behaviour change counselling—tobacco use	97.3	97.1	96.6	96.6
Behaviour change counselling—healthy eating	98.7	97.1	95.9	93.3
Behaviour change counselling—physical activity	98.7	96.2	95.9	94.4
Other Health Promotion	90.5	94.3	89	86.7
Mental health services	85.1	84.8	89.7	82.2
Psychosocial services	79.7	82.9	83.6	82.2
Liaison with home care services	86.5	90.5	92.5	94.4
Provision of home visits	81.1	76.2	91.1	87.8
Outreach services to vulnerable/special populations	29.7	34.3	29	34.4
Specialized programs (other than outreach services) for vulnerable or special needs population groups	17.6	21.9	31.7	27.8
End-of-life home care	56.8	69.5	63.5	66.3
Primary care in long-term care facility	37.8	37.1	39.3	57.3
Community Outreach	28.4	26.7	11	13.5
Emergency Department	20.3	23.8	16.6	13.5
Collaborative Emergency Centres	10.8	10.5	9	7.9
Inpatient Care	17.6	27.9	29	28.1



NAME GOESHERE  
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Month, Day, Year

Dear Dr. Last Name (or First Name Last Name)

We are back again with the third Practice Profile sharing data from the Models and Access Atlas of Primary Care – Nova Scotia (MAAP-NS) study. In the last two rounds, we shared information about accessibility and availability at the provincial, Management Zone, Community Health Network, and individual level, personalized to each recipient. Thanks to you, the first two rounds were an enormous success – we have response of 21% and 30% for the first two Practice Profile surveys, respectively, to date. We are so pleased with these responses and your continued support. Thank you.

We've learned many things from your responses to the surveys. For example, you told us that the patient populations that are the most challenging to accept into your practices are those who require opioid prescriptions, those with complex multimorbidity, those with mental health concerns, and prenatal patients. We heard that you are challenged by lack of time and compensation, lack of resources and referral services for mental illness and addictions, plus challenging patient behaviour. We are working on analyzing your responses and will share these findings in some upcoming presentations and in future Practice Profiles.

Here, you will find the third Practice Profile. In it, you will find the results of your responses to several MAAP-NS questions about service comprehensiveness, along with the rates of these responses in your Management Zone, and the entire province of Nova Scotia.

As a reminder, funding to create these Practice Profiles was provided by the Nova Scotia Health Research Foundation, the Canadian Institutes of Health Research (CIHR), plus some additional funds from the Nova Scotia Health Authority. **We have not shared individual level information about you or your practice with anyone outside of the MAAP Study team. No one from NSHA or NSDHW has, or will, see your data. This document is just for you!**

We have again included a short questionnaire where you can tell us about your experience. We want to capture this data as accurately as possible. Please take a moment to give us your feedback. We plan to collect MAAP data again over time and we want to make the best use of your time while ensuring that we are collecting the most appropriate and accurate data. A panel of family doctors and a nurse practitioner provided feedback on these to ensure relevance.

It is also not too late to send back the questionnaires from the first two Practice Profile surveys! If you would like a blank copy re-sent to you of any previous questionnaires, please email or fax the contact numbers below.

Receiving the future Practice Profiles is not dependent on answering any of the questions in the questionnaire. We would be delighted for you to complete it and send it back to us by fax at 902.473.4760.

If you have further thoughts, or, if you do not want to receive any future Practice Profiles, please contact me, Emily Gard Marshall, the Principal Investigator for MAAP by email at [Emily.Marshall@dal.ca](mailto:Emily.Marshall@dal.ca) or by phone 902.473.4155.

With gratitude,

Emily Gard Marshall, PhD  
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#tracking

## By the number:

### OUT-OF-OFFICE SERVICES, Average Number, By Zone

Zone 1: Western ..... 3.76  
Zone 2: Northern ..... 3.63  
Zone 3: Eastern ..... **4.05**  
Zone 4: Central ..... 2.63


### PRIMARY CARE SERVICES, Average Number, By Zone


Zone 1: Western ..... 15.9  
Zone 2: Northern ..... **16.2**  
Zone 3: Eastern ..... 15.8  
Zone 4: Central ..... 14.4

## FAST FACTS:

The number and type of primary health care services offered in Nova Scotia varies by Management Zone. The lower average number of services offered in the Central Zone may be due to the proximity to specialists (eg. obstetricians, geriatricians, hospitalists) who would offer some of the same services.

The number and type of services offered is also influenced by provider and practice characteristics.

 Female providers are more likely to offer prenatal, intrapartum and post-natal care and are more likely to do home visits and community outreach.

 Providers who work with a nurse are more likely to offer outreach programs, end-of-life home-care, primary care in LTCF and psychosocial services.

Compared to providers who trained outside of Canada, Canadian-trained providers are more likely to do provide mental health and psychosocial services and are also more likely to do home visits, liaise with home care services and provide EOL home care. Mental health services are more likely to be offered in practices that have 6 or more providers.



# Primary Health Care Provider & Practice Surveys

## PROGRAM OVERVIEW

We conducted two surveys in 2014 and 2015:

1. Telephone survey of all primary health care practices in Nova Scotia.  
*If your practice completed this survey, it was likely completed by your receptionist or practice manager.*
2. Fax survey that family physicians and nurse practitioners completed directly.

Practices and Providers in Nova Scotia were surveyed to ascertain measures of:

- + provider accessibility
- + provider availability
- + comprehensiveness of services
- + organization of practice



**WESTERN ZONE:** 3 Networks: Annapolis/Kings, Lunenburg/Queens, Yarmouth/Digby/Shelburne  
**NORTHERN ZONE:** 3 Networks: Colchester/East Hants, Cumberland, Pictou  
**EASTERN ZONE:** 3 Networks: Antigonish/Guysborough, Cape Breton County, Inverness/Victoria/Richmond  
**CENTRAL ZONE:** 5 Networks: Bedford/Sackville, Dartmouth/Southeastern, Eastern Shore/Musquodoboit, Halifax Peninsula/Chebucto, West Hants

We invite you to complete the enclosed 2-page survey.

Your time and information is valuable to us and we want to make sure we are doing all we can to ask the right questions, interpret the findings accurately, and provide relevant context so that we can work together to improve the experiences of Nova Scotians and their health care providers.

Receiving the future *Practice Profiles* is not dependent on answering any of the questions in the feedback form.

Please return the survey by fax to 902.473.4760.

## OUR FINDINGS

Our findings are on the following pages. Enclosed is also a 2-page survey. Please fill it out and return it so we can provide more useful insights like these.

We have compiled the information from the survey and can now provide you with individualized, confidential **PRACTICE PROFILES** broken down by Management Zone and Network.

The response rates for these surveys were noteworthy:

- + The telephone Practice Survey had a response rate of 85%.
- + The Provider Survey was conducted by fax and the response rate was 60%.

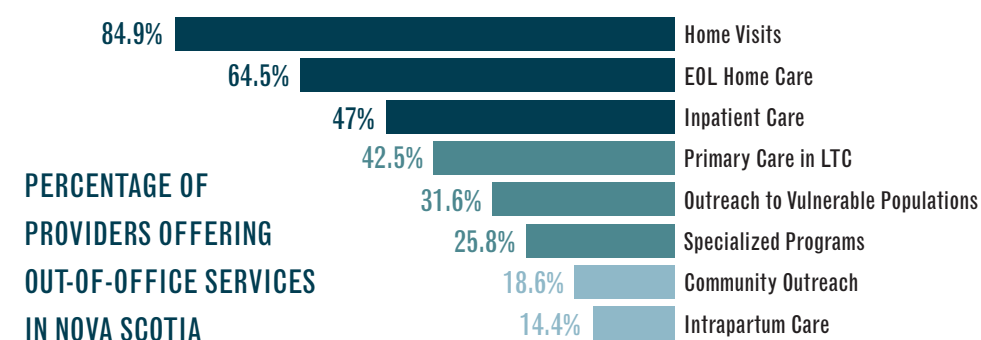
Your Zone:

ZONE NAME GOES HERE

# COMPREHENSIVENESS OF SERVICES



SERVICES OFFERED	% NS	% YOUR ZONE	YOUR PRACTICE
Care for an emergent but minor problem (e.g. sprained ankle, unexplained rash)	98.8	00.0	Y/N
Non-urgent care (e.g. well-woman care, episodic care, continuous care of chronic disease)	99.3	00.0	Y/N
Rehabilitation services (e.g. specialized injury follow-up such as sport medicine)	27.9	00.0	Y/N
Minor office procedures (e.g. sutures, skin biopsy)	85.4	00.0	Y/N
Prenatal maternity care (alone or shared)	73.6	00.0	Y/N
Intrapartum care (attending deliveries)	14.4	00.0	Y/N
Postpartum care (in-office follow-up)	82.7	00.0	Y/N
Behaviour change counselling—tobacco use	96.9	00.0	Y/N
Behaviour change counselling—healthy eating	96.1	00.0	Y/N
Behaviour change counselling—physical activity	96.2	00.0	Y/N
Other Health Promotion	90.2	00.0	Y/N
Mental health services	85.8	00.0	Y/N
Psychosocial services (e.g. counselling advice for physical, emotional, financial problems)	82.5	00.0	Y/N
Liaison with home care services	91.3	00.0	Y/N
Provision of home visits	84.9	00.0	Y/N
Outreach services to vulnerable/special populations	31.6	00.0	Y/N
Specialized programs (other than outreach services) for vulnerable or special needs population groups (e.g. seniors, adults with disabilities)	25.8	00.0	Y/N
End-of-life home care	64.5	00.0	Y/N
Primary care in long-term care facility	42.5	00.0	Y/N
Community Outreach (e.g. school youth health centres, mental health clinics, correctional facilities, well-women clinics)	18.6	00.0	Y/N
Emergency Department	18.6	00.0	Y/N
Collaborative Emergency Centres	9.7	00.0	Y/N
Inpatient Care (for your patients in a hospital)	47	00.0	Y/N



**73%**

of the province's primary care providers offer between 2 and 5 out-of-office services to patients.