

BERMUDA MEDICAL COUNCIL PHYSICIAN SURVEY ON REGULATION

SUMMARY

October 2018



1

PREFACE

This report presents the summary results of an on-line survey of registered medical practitioners in Bermuda conducted by the Bermuda Medical Council in March 2018.

2 INTRODUCTION

The Bermuda Medical Council's (BMC) legislated remit is, "to secure high levels of professional competence and conduct in the practice of medicine and surgery in Bermuda, and to have such other functions as may be assigned to the Council by this Act or any other statutory provision" (Medical Practitioners Act 1950 (2016), section 5). It has been the "widely held belief" that legislation from 1950 cannot serve the complex needs of the 21st Century health system, and so this survey aimed to gather information on the topic, by collecting feedback from physicians on the legislative requirements for assuring high professional competence and conduct.

The BMC requested candid and constructive feedback from the physician community to assist in making appropriate recommendations for legislative changes to the Act and for updating the Standards of Practice for Medical Practitioners (2013).

The survey was brief (estimated time to complete was 10-15 minutes), and responses were kept anonymous. The survey platform on Google remained opened from March 1st -March 31st. The results were shared with the physician community in September 2018. This report shares the demographic information on respondents and summarizes the highlights of the survey findings. It omits verbatim comments of the respondents.

Conclusions from this physician feedback will be considered, along with health system information and experiences, to make recommendations to the Minister of Health for legislative changes to improve health system outcomes.

Bermuda Medical Council, October 2018

3 DEMOGRAPHICS

3.1 AGE

(42 Reponses)

Listed below in Table one (1) are the age ranges with the corresponding percentiles. There are 42 total responses.

Age Range of Physician (Years)	Percentile (%)
35-44	35.7
45-54	33.3
55-64	19
65-74	11.9

3.2 GENDER

(42 Reponses)

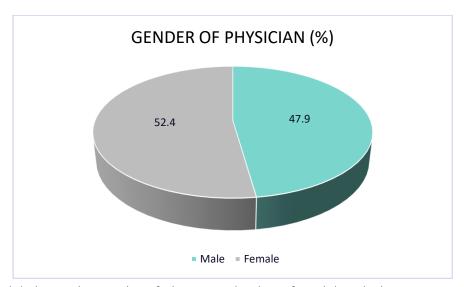


Figure one (1) shows the gender of physicians (male or female) with the percentages.

3.3 IMMIGRATION STATUS

(42 Reponses)

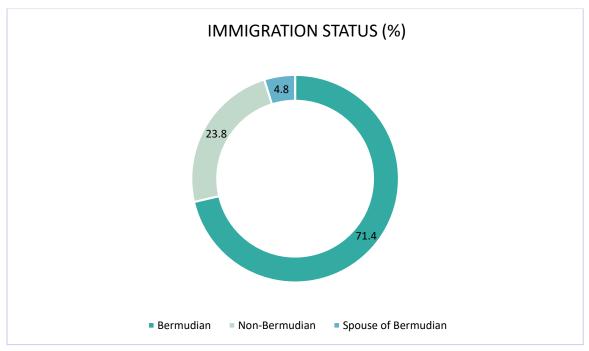


Figure two (2) shows the immigration status of physicians.

3.4 WORK STATUS

(41 Responses)



Figure three (3) shows the work status of physicians.

3.5 AREA OF SPECIALTY

(41 Reponses)

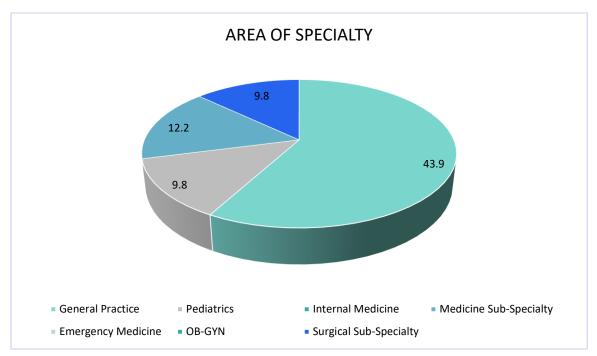


Figure four (4) shows the physicians' area of specialty.

3.6 CURRENT PRACTICE SETTING

(42 Responses)

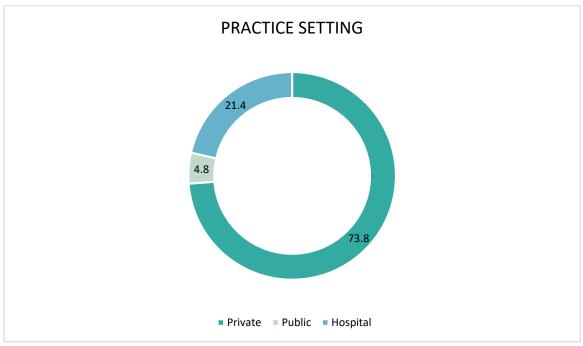


Figure five (5) shows the physicians practice setting.

4 SUMMARY AND NEXT STEPS

The online BMC Physician Survey on Regulation was sent to approximately 200 registered physicians in March 2018. In total, 42 participated, providing a 21% response rate. The results and interpretation are summarized below; results are in bold, followed by next steps intended. While the results are treated with caution due to the small sample size, the responses provide useful feedback to inform and influence policy developments in physician regulation.

- 1- All physicians are not familiar with the regulatory instrument governing medical practice in Bermuda, the Medical Practitioners Act 1950, amended 2016 (the Act). Efforts will be made to increase awareness of the legal authority of the Act, of the Bermuda Medical Council (BMC) remit, the procedures of the Medical Practitioners Professional Conduct Committee and of the regulations and policies which exist to implement the legislation.
- 2- A majority of respondents feel the current level of regulation of physicians is sub-optimal (58.5%). Amendments to the Act are being proposed to enhance regulation of medical practice and confer adequate authority to the BMC to better protect public safety and wellbeing.
- 3- A slim majority feel that patient safety is at risk with the current level of regulation (52.5%).
- **4- Respondents want increased regulation of physicians and broader regulatory authority for the BMC.** Areas noted to pose risk to the public include overuse of technology, questionable adherence to scope of practice, non-evidence based medical practices, irregular use of current clinical care guidelines and poor communication between providers. Updates to the *Standards of Practice for Medical Practitioners (2013)* is being undertaken to address some of these areas of vulnerability.
- 5- Health and financial risk to patients due to over-diagnosis, self-interested diagnostic referrals, unregulated procedures, and care by non-regulated healthcare practitioners were identified as safety risks. BMC will collaborate with the Bermuda Medical Doctors Association (BMDA), insurers and the Bermuda Health Council to protect against such practices. BMC will also spearhead a public education campaign to better inform the community of perceived health risks and threats, and to increase health literacy.
- 6- Multiple health system risks were mentioned including questionable qualifications of physicians to perform special procedures, outdated clinical practices, home childbirth, non-vaccination, inadequate clinical audits and absent peer review. Multi-sector collaboration will need to occur to address these areas. BMC will work alongside BMDA, Department of Health, physician leaders, Quality and Risk at Bermuda Hospitals Board, and patient advocacy groups to address these areas in the coming months.

- 7- A large majority of respondents felt that BMC should have authority to make medical workforce planning decisions for the island (81%). However, some felt this was entirely an Immigration decision and that immigration status should not factor in health workforce planning. The BMC recognizes that medical workforce planning is an extremely complex matter that involves ongoing assessment of local and global economic factors, cultural preferences, specialized training needs, timing and interpersonal factors, to name a few. Efforts will continue to obtain accurate data on health workforce needs, and intentions of Bermudian students and newly qualified physicians. A multi-disciplinary Health Workforce Planning Steering Committee continues to work in this area to gather accurate information on health professions and share it. A *Human Resources for Health Strategic Plan, Bermuda, 2018-2020* was created by this group and can be found on the Bermuda Government website under Health Reports (https://www.gov.bm/reports).
- 8- A large majority of respondents were in favor of clinical guidelines being widely adopted (81%) as a means of improving patient outcomes. BMC supports BMDA spearheading this effort, which will require close buy-in from private sector physicians.
- 9- A majority of respondents felt that physicians should not have a financial interest in diagnostic equipment so that there was no risk of financial incentive to diagnostic testing.
- 10-A large majority of respondents felt that non-physicians should be able to employ physicians (73.8%). However, a similar majority felt that non-physicians should <u>not</u> be able to own medical practices (78.6%).

In all survey answers there were variations of opinion, and pros and cons offered. The variety of answers reflect the complexity of the issues, as well as the wide range of perspectives in the medical community. Caution is used in generalizing the results given to the small (21%) sample size.

Healthcare regulation will need to be addressed further in ongoing discussions within the BMC, BMDA and throughout the health system. Health regulation that is appropriate and effective is the vision of the BMC. To achieve this vision will require a level of mature consultation over time, and enhancements will occur gradually. In the coming months, the efforts of the BMC will focus on the areas indicated above, with particular priority given to amending the Act and updating the *Standards of Practice for Medical Practitioners*.

