

IDENTIFYING INFORMATION	
<b>Name:</b>	<b>Consistent use of the same family doctor (doctor continuity)</b>
<b>Short/Other Names:</b>	n/a
BACKGROUND, INTERPRETATION AND BENCHMARKS	
<b>Description:</b>	The percentage of all visits to family doctors that are to the same family doctor.
<b>Rationale:</b>	<p>This measure provides an opportunity to assess the impact of relational continuity on different outcomes and more specifically chronic disease management, and preventive service delivery. Hence, this measure provides a means to understand how patients' continuity to a family doctor may be associated with health service utilization and other measures.</p> <p>Continuity to a family doctor substantially impacts healthcare services utilization, patient outcomes, patient experience with care, and cost. In general, the greater the continuity, the more positive the outcomes.</p>
<b>Interpretation:</b>	A lower value indicates that patients see other family doctors who are not their primary family doctor. A higher value is desirable.
<b>Target/Benchmark:</b>	No benchmarks have been identified.
INDICATOR CALCULATION	
<b>Calculation:</b>	<p><b>Description</b></p> <p>Sum of all individual patients' continuity to a family doctor, divided by the total number of patients across a zone or PCN.</p> <p>Average Continuity =</p> $\frac{\text{Sum of all individual patients' family doctor continuity}}{\text{Total number of patients in zone or PCN}}$ <p><b>Type of Measure:</b> Average</p> <p><b>Adjustment Applied:</b> None</p>
<b>Denominator:</b>	<p><b>Description</b></p> <p>The number of patients in a given zone or PCN. Patients are assigned based on attachment to a family physician.</p> <p><b>Inclusion Criteria</b></p> <ul style="list-style-type: none"> <li>▪ Patient list specifically submitted by physician.</li> </ul>

	<ul style="list-style-type: none"> <li>Patients assigned to a physician based on the HQCA algorithm (Proxy panel).</li> </ul> <p><b>Exclusions</b></p> <ul style="list-style-type: none"> <li>Duplicate family physician visits based on Patient Health Number (PHN), date, procedure and diagnostic codes, and physician identification are removed.</li> <li>Patients who were seen by the physician but not assigned to them.</li> </ul> <p><b>Limitations &amp; Technical Notes</b></p> <ul style="list-style-type: none"> <li>Panel prediction is most accurate for practices in a single stable location over the past 3 fiscal years and for regular full-time work schedule.</li> <li>Family physician visits include visits within a 3 fiscal year period.</li> </ul>
<b>Numerator:</b>	<p><b>Description</b></p> <p>Sum of individual patients' physician continuity in a zone or PCN. Individual patients' physician continuity is the percentage of time(s) a patient sees their primary physician compared to other family physician visits.</p> <p><b>Inclusion Criteria</b></p> <ul style="list-style-type: none"> <li>Patient list specifically submitted by physician.</li> <li>Patients assigned to a physician based on the HQCA algorithm (Proxy panel).</li> </ul> <p><b>Exclusions</b></p> <ul style="list-style-type: none"> <li>None</li> </ul> <p><b>Limitations &amp; Technical Notes</b></p> <ul style="list-style-type: none"> <li>Physician continuity is most accurate for practices in a single stable location over the past 3 fiscal years and for regular full-time work schedule.</li> <li>Family physician visits include visits within a 3 fiscal year period.</li> </ul>
<b>DATA DETAILS</b>	
<b>Data Sources:</b>	Alberta Health Physician Claims.
<b>Available Data Years:</b>	<p><b>Type of Year:</b> Fiscal year [starts April 1, ends March 31]</p> <p><b>First Available Year:</b> 2013/14</p> <p><b>Last Available Year:</b> 2021/22</p>
<b>Geographic Coverage:</b>	The province of Alberta excluding the military and prisoners.
<b>Reporting Levels:</b>	Zone, PCN

Quality Statement	
Limitations:	<ul style="list-style-type: none"> <li>▪ About 18% of Albertans do not visit a General Practitioner in a year.</li> <li>▪ Patients are excluded in the physician panel assignment if they do not visit a physician in 3 years (the current fiscal year, plus the 2 preceding fiscal years).</li> <li>▪ The physician claims dataset consists of Fee-for-service and shadow billing. The data submitted based on shadow billing may not be entirely accurate. As a result, this might affect the accuracy of the results of this measure.</li> <li>▪ Only Alberta data is available. As such, any visits by Alberta patients outside of the province are not included.</li> </ul>