

| IDENTIFYING INFORMATION | |
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| Name: | Consistent use of the same family doctor (doctor continuity) |
| Short/Other Names: | n/a |
| BACKGROUND, INTERPRETATION AND BENCHMARKS | |
| Description: | The percentage of all visits to family doctors that are to the same family doctor. |
| Rationale: | 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. |
| | 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. |
| Interpretation: | A lower value indicates that patients see other family doctors who are not their primary family doctor. A higher value is desirable. |
| Target/Benchmark: | No benchmarks have been identified. |
| INDICATOR CALCULATION | |
| Calculation: | Description |
| | Sum of all individual patients' continuity to a family doctor, divided by the total number of patients across a zone or PCN. |
| | Average Continuity = |
| | Sum of all individual patients' family doctor continuity |
| | Total number of patients in zone or PCN |
| | Type of Measure: Average |
| | Adjustment Applied: None |
| Denominator: | Description |
| | The number of patients in a given zone or PCN. Patients are assigned based on attachment to a family physician. |
| | Inclusion Criteria |
| | Patient list specifically submitted by physician. |



| | Patients assigned to a physician based on the HQCA algorithm (Proxy panel). | |
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| | Exclusions | |
| | Duplicate family physician visits based on Patient Health Number (PHN), date, procedure and diagnostic codes, and physician identification are removed. | |
| | Patients who were seen by the physician but not assigned to them. | |
| | Limitations & Technical Notes | |
| | 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. | |
| | ■ Family physician visits include visits within a 3 fiscal year period. | |
| Numerator: | Description | |
| | 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. | |
| | Inclusion Criteria | |
| | Patient list specifically submitted by physician. | |
| | Patients assigned to a physician based on the HQCA algorithm (Proxy panel). | |
| | Exclusions | |
| | ■ None | |
| | Limitations & Technical Notes | |
| | 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. | |
| | Family physician visits include visits within a 3 fiscal year period. | |
| DATA DETAILS | | |
| Data Sources: | Alberta Health Physician Claims. | |
| Available Data Years: | Type of Year: Fiscal year [starts April 1, ends March 31] | |
| | First Available Year: 2018/19 | |
| | Last Available Year: 2022/23 | |
| Geographic Coverage: | The province of Alberta excluding the military and prisoners. | |
| Reporting Levels: | Zone, PCN | |



Limitations: About 18% of Albertans do not visit a General Practitioner in a year. 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). 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. Only Alberta data is available. As such, any visits by Alberta patients outside of the province are not included.