

Not Enough Time

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Why am I always behind?

AKA

Why MDs fail to provide
recommended services

The Problem

Despite

- Proven effective clinical measures
- National published guidelines
- National implementation strategies

Americans receive about 50% of applicable services for acute, preventive and chronic disease care.

(McGlynn NEJM 2003)

Preventive Services Rates

- Michigan family practice in 2000
- 3% of women 50 and older were UTD on Cancer Screening Tests (Breast, Cervical, Colorectal)
- 5% of men (Colorectal and Prostate)

(Ruffin, JAM Board Family Practice 2000)

Chronic Disease Rates

- 34% of the 50 million Americans with HTN have acceptable blood pressure
- 37% of Diabetics have HgbA1-C at or below 7

(Chobanian, JNC-7 Report, JAMA 2003)

(Saydah, JAMA 2004)

Barriers to Care

- Inadequate insurance reimbursement
- Patient refusal
- Lack of physician expertise in preventive counseling
- Limited orientation to disease monitoring
- Lack of office systems
- Time

Time

- Managed care hasn't decreased time spent with patients during visit.
- Average time per visit (16-20 min.)
- Actually up to 1-2 minutes per patient visit

(Mechanic NEJM 2001)

What's the problem?



How many services are really recommended?

- Study of patients in waiting room of family practice
- 25 preventive services per patient needed

A similar study has not been done for chronic diseases.

(Medder AJPM 1992)

So how long does it really take
to provide the recommended
services to all patients?



Primary Care: Is There Enough Time for Prevention?

Is There Time for Management of Patients with Chronic Diseases in Primary Care?

(Yarnall, AJP 2003)

(Ostbye, Annals of Family Medicine 2005)

Methods:

- Assumed an ideal practice: services needed immediately obvious
- “A typical clinical encounter”
- Only primary care clinician time

Methods

Needed To Calculate Time for Services

1. List of Preventive Services or Chronic Diseases
2. Group of patients (a practice) who need preventive services and have chronic diseases. (Age, Sex distribution and prevalence of Diseases need to be available)

Methods

Needed To Calculate Time for Services

3. A set of guidelines which include time recommendations. (Frequency of visits or testing - time recommendations available in literature.)
4. Amount of Physician Time currently available to compare with recommended time requirements

1. List of Services for Preventive Care

1996 USPSTF *Guide to Clinical Preventive Services*

- Provides target population for each preventive service by age and sex
- Frequency of most services

List of Services for Preventive Care

- Used only A&B recommendations
- Only outpatient services
- Did not include overlaps (Folate – general female population and pregnant woman)

1. List of Services for Chronic Disease

Chronic Disease has no uniform set of guidelines for all Diseases.

List of Services for Chronic Disease

- Most common Chronic Diseases
- Highest morbidity and mortality
- Do not typically have a specialist as primary physician (cancer, pediatric diabetes).
- Available measures of national prevalence
- Published clinical guidelines with reference to time needed to deliver services.

Ten Diseases Chosen

- Hyperlipidemia
 - Hypertension
 - Depression
 - Asthma
 - Diabetes
 - Arthritis
 - Anxiety
 - COPD
 - Osteoporosis
 - CAD
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2. Eligible Population

- 2500 patients in practice
- US Census Bureau Figures
 - Age & sex distribution similar to U.S pop.
- National Vital Statistics Reports
- 1999 Statistical Abstract of the United States
 - Estimate high risk groups

Eligible Population

- Applied age – specific disease rates in the general population (chronic disease)

Time Recommended for Preventive Services

Frequency of performing services

- Used the most conservative USPSTF recommendation
- PAP test recommended every 1-3 years
Annual frequency = .33 (every 3 years)
- Mammograms in women 50-69 years old, recommended every 1-2 years
Annual frequency = .5 (every 2 years)

Time Recommended for Preventive Services

- Published literature
- Where no published time requirements were found we estimated time from similar services
- For a few services where a similar service was not found, we estimated the time needed (usually 15 sec – 1 min.)

Time Recommended for Preventive Services

Published examples

- 1) Tobacco cessation = 3min.
- 2) Clinical breast exam = 6min.
- 3) Counseling problem drinkers = 5min.
- 4) Flex Sig = 17 min.
- 5) Dietary fat and cholesterol reduction = 8.2min.

Time Recommended for Chronic Disease

- No national set of guidelines
- All guidelines recommended number of visits a year based on severity or control of disease
- Minimum number of visits per disease used
- First calculated time required if all patients stable or disease in control or at goal

Time Recommended for Chronic Disease

- Allowed 10 minutes per chronic disease per recommended visit (average office visit 18-21 minutes).
- This allows for co-morbidities (no reliable prevalence).

Calculation of Time Needed for Preventive Services

Multiplied

- Time requirement per service by
- Annual frequency of service by
- Number of eligible patients by
- The proportion of eligible patients who needed the service that year. (Smoking cessation: only smokers counted for counseling)

Calculation of Time Needed for Chronic Disease

- For 10 stable chronic diseases
 - Product of
 - Number of patients in practice with each illness
 - Number of visits recommended per year
 - Time per visit (10 minutes)

Calculation of Time Needed for Chronic Disease

Accounting for Control of Disease

- Calculating time requirements for uncontrolled diseases required control-specific prevalences
- Control specific prevalences available

Hyperlipedemia

Asthma

Hypertension

Diabetes

Depression

Calculation of Time Needed for Chronic Disease

- For 5 chronic diseases where we have population prevalences of disease control
 - Multiplied number of patients in practice accounting for level of control (controlled/uncontrolled)
 - Number of recommended annual visits for controlled & uncontrolled
 - 10 minutes per visit

Calculation of Time Spent for Both Chronic Disease and Prevention

Then we added all the time requirements for all the services.

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4. Physician Time Available

- American Academy of Family Physicians
- 42.9 (41.3) hours a week in patient related services
- 47.9 (47.2) weeks/year
- 2055 (1949) hours per year

Results



Time Needed to Deliver Preventive Services

To a 2500 Person Practice

- Annual total hours 1773
- 7.4 hours per day

Time Needed to Deliver Care for 10 Stable Chronic Diseases in Good Control

- Annual total hours 828
- 3.5 hours per day

Time Needed to Deliver Care for 5 Diseases Accounting for Disease Control

- Annual total hours 1581
- 6.7 hours per day
- Twice as much time as all 10 diseases if Disease is in control
- Factor of Three times more for these 5 diseases if they were in control (528 hours vs. 1581)

Time Needed for 10 Chronic Diseases in Control and Uncontrolled

Adjusting for the 3 fold increase in time when the level of disease control considered

- Annual total hours 2484
- 10.6 hours per day

Total Time Required

- Preventive Services
 - 7.4 hours per day
- 10 Chronic Diseases accounting for level of Disease Control
 - 10.6 hours per day
- Acute care not accounted for in these numbers

Conclusion:

MD's can't do it all



Next Step:

- Admit MD's can't do it all
- Forget “one stop shopping”
- Health care providers need to get comfortable with being part of a team

Suggestions:

- 1) Hire a health educator
- 2) Contract with a dietician
- 3) Refer to community services
- 4) Have a list of web sites
- 5) Have your nurse help with patient education
- 6) Have PA's or NP's do all the preventive care visits
- 7) Use your PA and NP as front line primary care providers and MD become the consultant