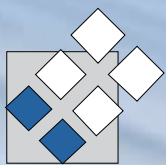




BEST PRACTICE SURVEY RESULTS



bpac^{nz}
better medicine

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Summary of Survey Results

In November 2009 bpac^{nz} surveyed 6700 general practitioners, practice nurses and pharmacists who receive bpac^{nz} material. The purpose of this survey was to seek opinions about the volume, frequency and usefulness of bpac^{nz} publications. Over 2000 people responded and their opinions are set out and summarised in this document.

Volume of material about right

It is good to know that 82% of respondents think that we should have no change to the current volume and frequency of material. Smaller publications, more often were favoured by 11% and larger publications less often favoured by 8%.

15% were leaning towards “too much” and only 3% thought it was nearing “too little.”

Our material is trusted...

Out of a score of 1 to 5 (where 5 is very high), bpac^{nz} resources received an average of 4.5 for quality and 4.2 for trustworthiness.

...and found useful

On average, Best Practice Journal was rated 4.5 out of 5 for usefulness and Best Tests 4.2 out of 5.

GPs rated both personalised reports and clinical audits an average of 3.8 out of 5 for usefulness. Some commented on the frustration of the data not appearing to accurately reflect their clinical practice. We would like to improve on this and will be investigating ways in which we can present data even more usefully.

CME quizzes were rated an average of 3.9 out of 5 and patient information 4.0.

Why are our publications read?

The overwhelming majority of respondents read bpac^{nz} publications to keep their medical knowledge up to date (98%) and for continuing professional development (91%).

No barriers to reading bpac^{nz} publications for most

Most respondents do not have any barriers to reading bpac material. Of those who cited barriers, finding time to read the publications was the most common.

Wish list

We received some great suggestions for products or services that bpac may consider providing in the future, including:

Seminars, CDs, podcasts, electronic newsletters, online peer support group, software for adverse reaction reporting, audit of professional standards, New Zealand formulary, pharmacist and nurse versions of BPJ, complementary medicine section, case scenarios, downloadable patient resources, query service for medical questions.



Survey respondents representative of General Practice

Of the 6704 surveys bpac^{nz} sent out to general practitioners, practice nurses and pharmacists, 2041 responses were received. Although the survey was anonymous only 105 respondents chose not to provide their names and addresses.

Table 1: Response rate by respondent type.

	Number received	Number sent	% received
GP	1216	3938	30.9%
Nurse	507	1693	29.9%
Pharmacist	213	1073	19.9%
Unknown	105		
Total	2041	6704	30.4%

Figure 1: Comparison of prescription volumes between survey respondents and non-respondents

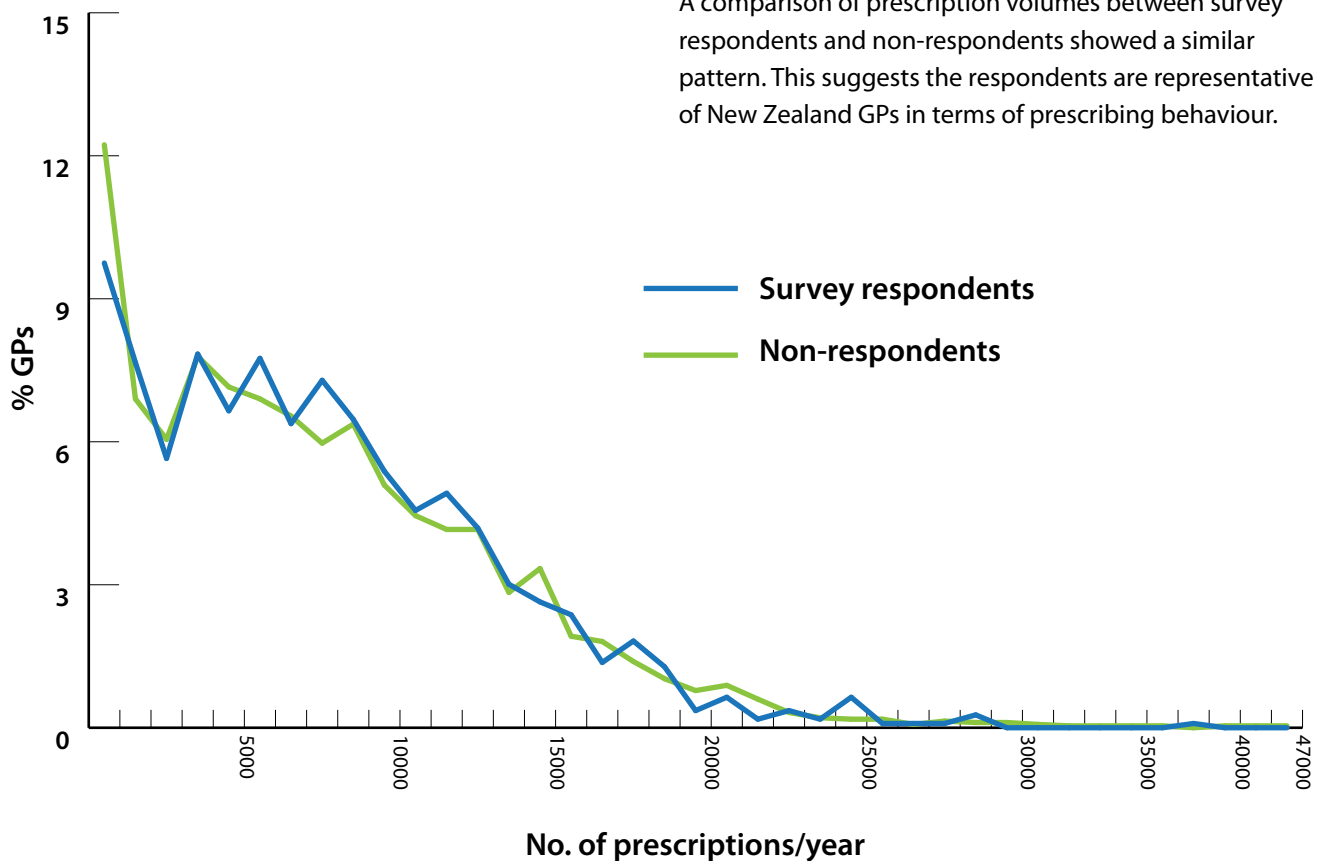
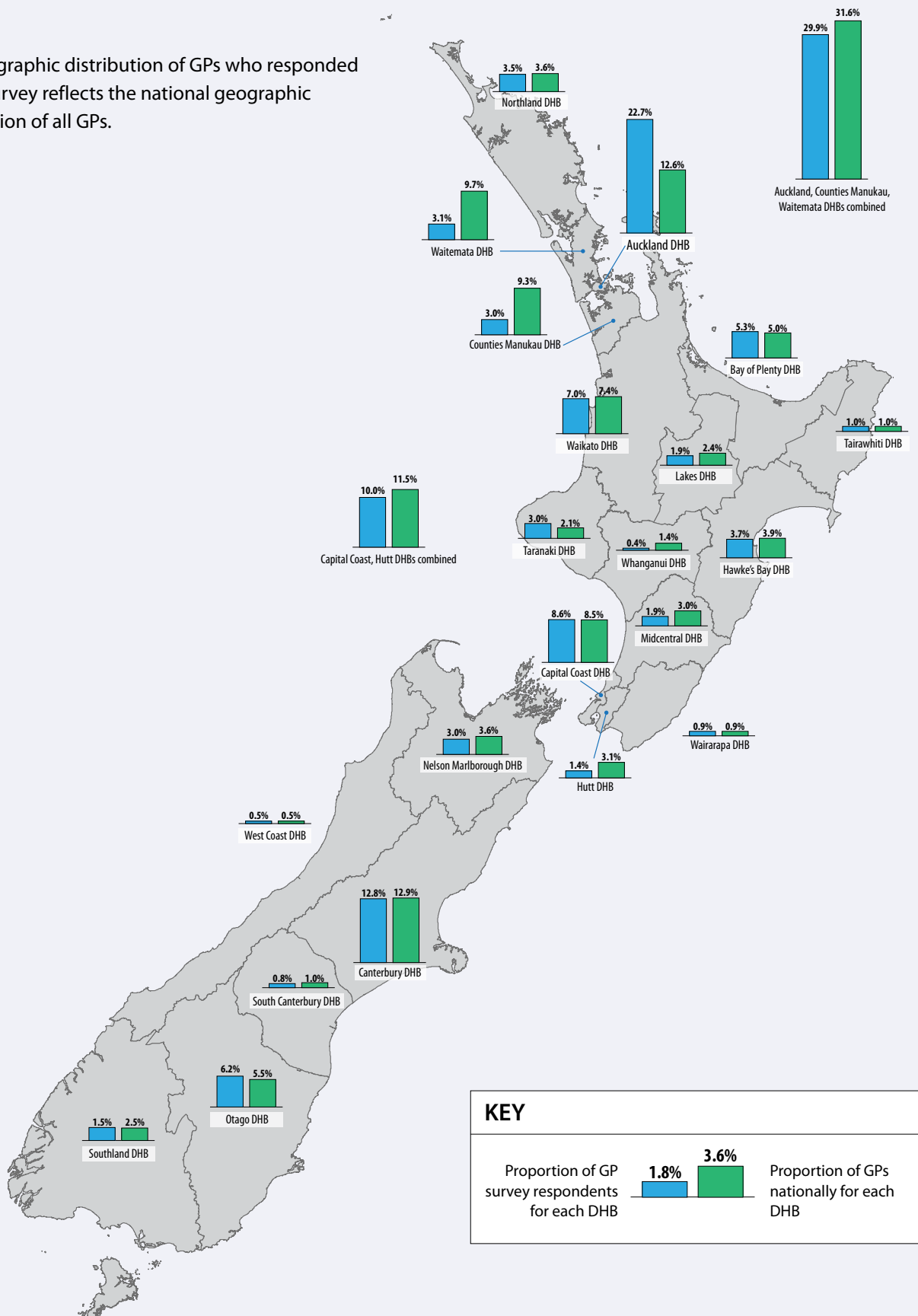


Figure 2: Geographical distribution of GPs survey response rate.

The geographic distribution of GPs who responded to the survey reflects the national geographic distribution of all GPs.



KEY

Proportion of GP survey respondents for each DHB: 1.8% (blue bar)

Proportion of GPs nationally for each DHB: 3.6% (green bar)

1. The volume of material published by bpac^{nz} is about right

Q1. How would you describe the overall volume of material bpac sends you?



Figure 3: Number of respondents for each volume ranking.

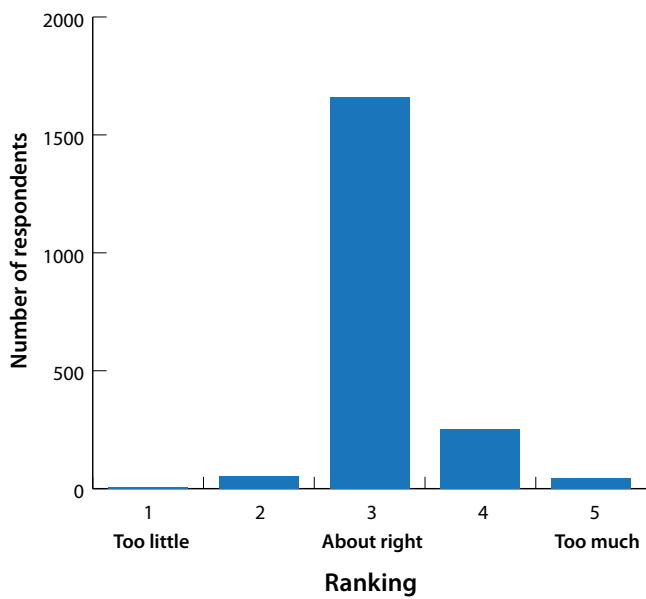


Table 2: Percentage responses for each rank by respondent type.

	Too little		About Right		Too Much
	1	2	3	4	5
GP	0.5%	3.1%	79.8%	14%	2.6%
Nurse	0.2%	1.2%	87.1%	10.65%	1%
Pharmacist	0%	5.2%	85%	8.5%	1.4%
Total	0.3%	2.7%	82.4%	12.4%	2.1%

2. Quality and trustworthiness rate as very high

Q2. How do you rate the quality/trustworthiness of bpac resources?

	Very low				Very high
1 Quality	①	②	③	④	⑤
2 Trustworthiness	①	②	③	④	⑤

Figure 4: Percentage responses for each rank for quality

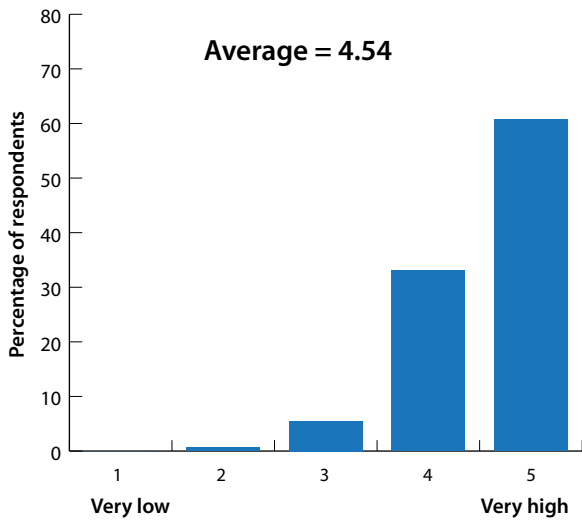


Figure 5: Percentage responses for each rank for trustworthiness

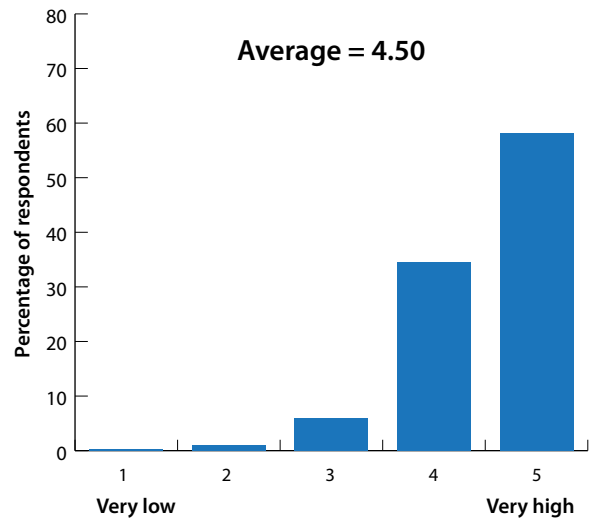


Table 3: Percentage responses for each rank by respondent type.

1. Quality of bpac^{nz} resources

	Very Low			Very High		
	1	2	3	4	5	Average
GP	0%	0.8%	5.3%	33.3%	60.6%	4.54
Nurse	0%	0.2%	5.9%	31.5%	62.4%	4.56
Pharmacist	0.5%	0.9%	5.7%	36.0%	56.9%	4.48

2. Trustworthiness of bpac^{nz} resources

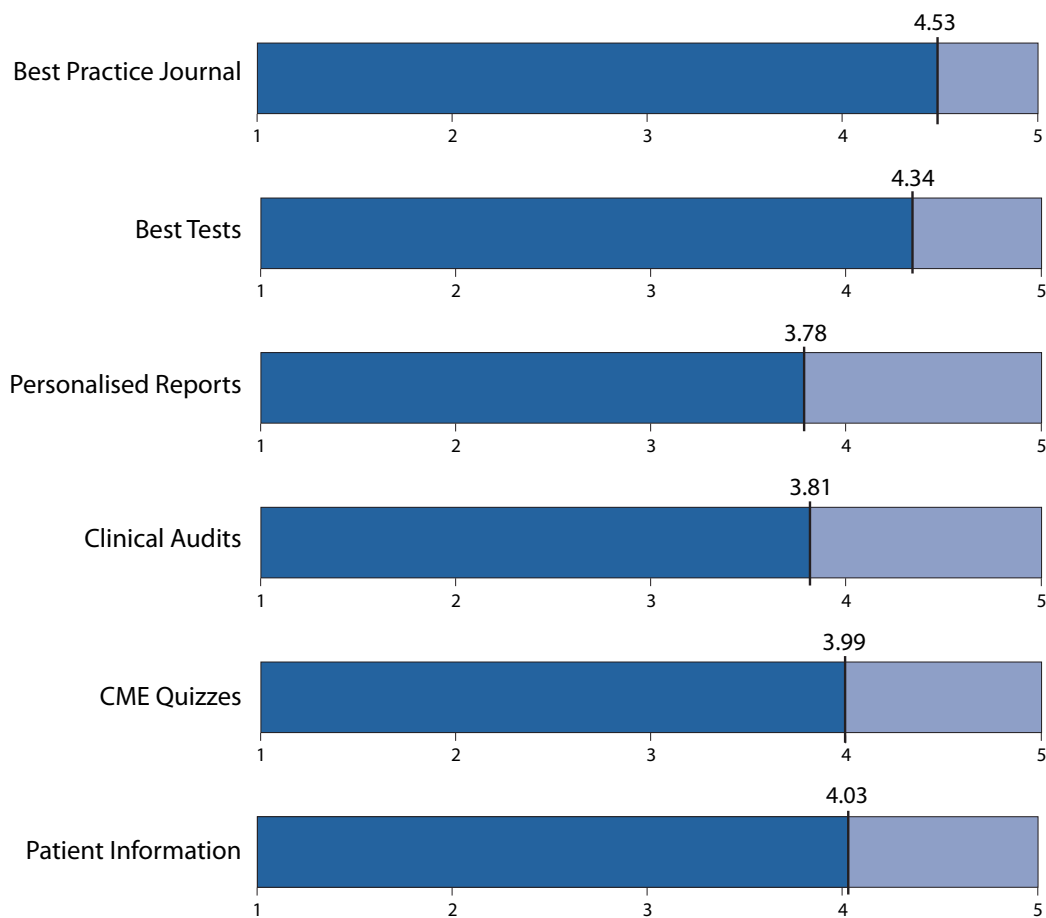
	Very Low			Very High		
	1	2	3	4	5	Average
GP	0.2%	1.1%	6.3%	34.7%	57.8%	4.49
Nurse	0%	0.2%	6.4%	34.5%	58.9%	4.52
Pharmacist	0.5%	2.5%	4.4%	34.4%	57.8%	4.47

3. bpac^{nz} publications are considered very useful

Q3. Please rate how useful you find the following bpac publications:

		Not at all useful			Very useful	
1	Best Practice Journal	①	②	③	④	⑤
2	Best Tests (GPs)	①	②	③	④	⑤
3	Personalised Reports (GPs)	①	②	③	④	⑤
4	Clinical Audits (GPs)	①	②	③	④	⑤
5	CME Quizzes	①	②	③	④	⑤
6	Patient Information	①	②	③	④	⑤

Figure 6: Average rating by publication type.



All the bpac^{nz} resources rated highly for usefulness, particularly the patient information, Best Tests and the Best Practice Journal.

"It's my bible." – Hastings

"Extremely useful, concise, accurate and topical." – Blenheim

"BPAC info is the most useful in day to day real GP work thanks. – Levin

"For me personally, bpac presents the most clearly presented and easily absorbed material from a care/best practice perspective." – Auckland

"Out of all the magazines and publications I receive the Best Practice Journal is the one I would rate the best. I also find your patient information brochures very good and easy to understand and I use them frequently." – Timaru

"When I worked in the UK my colleagues were stunned at the quality of information provided by bpac, included registrar teacher + local coordinator of registrar teaching." – Katikati

"I think bpac is an excellent resource. I always look forward to receiving the journal and find it relevant to my day to day practice." – Manukau

"bpac has shaped my daily practice. They provide me with the incentives to make adjustments to meet best practice standards". – Glendowie

"While not a GP I do hear very positive reports from our GPs on the personalised reports. I also want to acknowledge the value of the PHO level reports. Very useful." – Whangarei

"Personalised reports limited by unequal volume of patients seen and by particular types of patients predominately seen".

In general locum general practitioners and those working part time or in a number of different practices tended to rate the personalised reports lower. Their comments indicate that they consider the reports to be a reflection of the prescribing patterns of those they work for rather than their own preferences.

"I find all your publications excellent but the value of the personalised reports and patient information is slightly compromised for me as I work as a locum".

While still being rated as "more than useful" bpac^{nz} personalised prescribing reports received the lowest overall rating and the largest number of suggestions for improvement. The majority of these suggestions focused on perceived issues with the accuracy of the data reported and the need to include better denominators on reports, particularly related to patient demographics and workload.

"Personalised reports don't take into account consultation rates or practice variants".

"The size of a practice and the consultation numbers need to be considered in personalised reports".

4. Keeping medical knowledge up to date

Q4. Why do you read bpac publications? (tick all that apply)

1	<input type="checkbox"/>	To keep medical knowledge up to date
2	<input type="checkbox"/>	To support practice audits and continuous quality improvement
3	<input type="checkbox"/>	For continuing professional development
4	<input type="checkbox"/>	For discussion at peer support group
5	<input type="checkbox"/>	Don't read
6	<input type="checkbox"/>	Other (please state):

Table 4: Percentage responses for each question by respondent type.

	GP	Nurse	Pharmacist
To keep medical knowledge up to date	97.4%	97.4%	98.6%
To support practice audits and continuous quality improvement	89.6%	95.3%	89.7%
For continuing professional development	60.9%	51.6%	36.6%
For discussion at peer support group	40.7%	43.5%	27.2%
Don't read	0.8%	0.2%	0%
Other	5.9%	6.7%	9.9%

The overwhelming majority of respondents read bpac^{nz} publications to keep their medical knowledge up to date (98%) and for continuing professional development (91%).

"Interesting and pitched at an easy to read level. So quick to read" – GP, Christchurch

"Good quality, reliable information, usually relevant to my nursing practice." – Nurse, Wellington

"It's interesting and easy to read and understand. Great colour and design. Keeps the other side of the brain interested too." – GP, Christchurch

I use as a reference in my day to day practice (internet access). " – GP, Paraparaumu

5. What are barriers to reading bpac^{nz} publications?

Q5. Do you find any of the following a barrier to reading bpac publications? (tick all that apply)

1	<input type="checkbox"/>	Size of publications
2	<input type="checkbox"/>	Frequency with which they are received
3	<input type="checkbox"/>	Relevance of content
4	<input type="checkbox"/>	Tone /language used
5	<input type="checkbox"/>	Other (please state):

Table 5: Percentage responses for each question as a proportion of all respondents.

	GP	Nurse	Pharmacist
Size	10.9%	4.1%	4.7%
Frequency	13.2%	6.1%	6.1%
Relevance	5.7%	6.7%	11.7%
Tone	2.0%	1.8%	2.4%
Other	7.3%	4.9%	3.8%

A total of 76% of survey respondents find no barrier in reading bpac^{nz} publications. While 24% indicated that they found one or more of the above factors a barrier.

The size of the publications and the frequency with which they are received were the most common barriers selected.

Of the 99 respondents that selected an “other” barrier, 80 (91%) indicated that this barrier was not having enough time to read the publications. Some noted that this was especially due to the volume of other reading material they also have.

Other barriers included the physical appearance of publications (4), perceived information bias (3), length

or information content of individual articles (3), a preference for an electronic copy (2), lack of case studies (1), inaccurate prescribing data (1) and laziness (1). Four respondents indicated that they found barriers to reading bpac^{nz} publications only occasionally.

NB: 28 respondents selected the “other” option but indicated that they had “no barrier” and therefore were not included in these results.

“The only problem is not having time to read everything, this publication comes high up on the list though”

“Why change a winning format”

6. Most people want no change to frequency and volume

Q6. In terms of the frequency with which you receive bpac publications and the volume of material contained in them, would you prefer to:

- | | | |
|---|--------------------------|---|
| 1 | <input type="checkbox"/> | Have no change to the current frequency and volume of material |
| 2 | <input type="checkbox"/> | Receive publications more frequently but with fewer pages in each publication |
| 3 | <input type="checkbox"/> | Receive publications less frequently but with more pages in each publication |

Table 6: Percentage responses for each question.

	GP	Nurse	Pharmacist
No change	76.8%	87.5%	81.9%
More frequently, fewer pages	12.7%	6.4%	14.3%
Less frequently, more pages	8.5%	5.4%	3.8%

The majority (over 80%) of the survey respondents selected no change to the frequency and volume of bpac^{nz} publications. While some respondents commented that they do feel overwhelmed by the volume of medical material they receive, many recognised the importance of bpac^{nz} material. Some selected comments are:

“Would like publications more frequently with same number of pages.” – GP, Auckland

“I liked the way bpac used to send smaller one topic booklets. That way I could easily find it when I wanted to refer to it later, and I could discard the booklets that didn’t interest me.” – GP, Invercargill

“Very relevant, well resourced publication, that I would read more of if volume or frequency increased.” – GP, Hamilton

“Just keep it as it is.” – GP, Wellington

“We are bombarded daily with so many potential resources that it is necessary to be selective. I find the bpac resources among the most useful and relevant to my practice in NZ.”
– GP, Christchurch

7. There are a wide variety of other sources of information

Q7. What other sources of medical information do you use regularly?

Top 10 other sources of clinical information:

- PHARMAC
- New Zealand Doctor
- Kai Tiaki
- Peers
- MIMMs
- UpToDate
- BMJ
- GPNotebook
- RNZCGP
- Guidelines

The BMJ was the single most cited source of other medical information used regularly by survey respondents. This possibly reflects not only the quality of the publication but also a strong preference for the journal/magazine style of publication. The top 10 sources of medical information reflect the practical needs of daily practice, in particular the need for prescribing information.

When looking at all the responses to this question there was a strong preference for sources of information which provide concise content and 'how to' type summaries; however the majority of these sources are not New Zealand based.

Over half the respondents to this question mentioned sources of information that are only available online.

8. What is the most efficient way to keep up to date?

Q8. In your opinion what is the most efficient way of keeping your medical knowledge up to date? (tick all that apply)

1	<input type="checkbox"/>	Reading articles
2	<input type="checkbox"/>	Talking to colleagues
3	<input type="checkbox"/>	CME meetings
4	<input type="checkbox"/>	Peer support groups
5	<input type="checkbox"/>	Participation in quizzes, case studies and clinical audits
6	<input type="checkbox"/>	Other (please state):

Table 7: Percentage responses for each question.

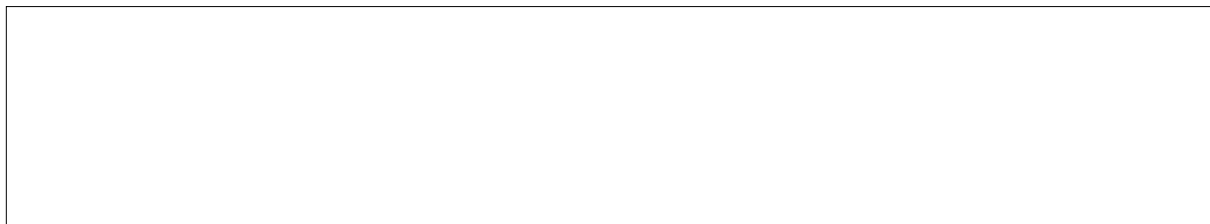
	GP	Nurse	Pharmacist	Total Combined
Reading articles	85.2%	96.1%	95.3%	89.1%
CME meetings	80.8%	49.3%	56.8%	69.7%
Talking to colleagues	64.1%	79.7%	62%	68.1%
Peer support groups	65.6%	61.3%	36.2%	61.2%
Participation in quizzes etc	51.8%	30%	34.7%	43.9%
Other	10.8%	13.8%	5.6%	10.8%

Reading articles continues to be an important source of medical knowledge. CME meetings are also rated highly by GPs.

For respondents who ticked "Other" popular suggestions were: "all of the above", conferences, advice from specialists especially from referral letters, postgraduate study, the internet, email updates, case based learning, quizzes and specific questions arising from individual patient care.

9. What else should bpac be doing?

Q9. Are there any other products or services you think bpac should provide? Do you have any further comments?



There were a wide range of suggestions for other products or services that bpac^{nz} could provide. A sample of these are provide below:

"I think having available an audio podcast would be great. Would not be able to cover all the material but could summarise main messages and then busy practitioners could refer to the paper or on-line copy for articles that interest them." – GP, Opotiki

"Internet summaries." – GP, Auckland

"One time per year a large summary quiz to check what has been retained." – GP, Auckland

"The meeting on use of generic medications earlier this year was good. Maybe more things like this would be beneficial." – Pharmacist, Christchurch

"A NZ formulary." – GP, Otago

"Your own mini conference(s)/video link? What about another medical programme on tv." – GP, Morrinsville

"I would value a series on doctor-patient communication, both in the GP practice and with patients at the end of life. Also some guidelines on managing the time pressures in general practice and 'difficult' patients." – GP, Wanganui

Many respondents also provided further comments which were, for the most part very positive. A sample of these is given below.

"Bpac publications are great, generally focused on clinical usefulness rather than esoteric academia. Keep up the good work." – GP, Dunedin

"I think the services and products provided by bpac are all very useful. I like how the articles from the journal are also available online; very handy for when I need to refer to them." – Pharmacist, Opotiki

"Great work in keeping us up to date." – GP, Upper Hutt

"Excellent magazine, which I pass onto my peers once I've finished." – Nurse, Wakefield

"Really appreciate the patient info leaflets – accurate, practical and info available for patients at their level." – Nurse, Wakefield

"I believe bpac provides an excellent service. There are limitations but you cant be all things. This service should be expanded to hospital clinicians." – GP, Temuka

"It is nice to have a paper reference copy. Since the NZMJ went electronic I have hardly read it because it is not easily accessible. Getting quiz results electronically from bpac is ok." – GP, Katikati

"I keep bpac journal above my desk and refer to them regularly." – GP, Gore

"More of the same please, it is fantastic." – GP, Manurewa

