

- Physicians and nurses in PHC units pay-for-performance exhibit higher productivity and shorter consultation time.

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Productivity and consultation times in Portuguese primary care: trends and payment model variations

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Background: Portugal faces a shortage of primary care workforce resulting in an increase in patients without Family Physician (FP). While expanding the patient list per FP may help, it could also result in excessive workloads, compromising Consultation Times (CT) and quality of care. Furthermore, it is important to study the role of the primary healthcare (PHC) financing model in incentivizing their productivity. This study aims to analyse the productivity and CT in PHC units in Portugal, variation over time, and differences across PHC unit payment models.

Methods: 6,563 PHC units with different payment models (salary at UCSP, salary and group pay-for-performance at USF-A, and salary, capitation, and individual pay-for-performance at USF-B) from 2015 to 2022 were analysed, including the annual numbers of medical and nursing consultations and full-time equivalents (FTE) of physicians and nurses. Weekly productivity (WP) was calculated using the consultations per FTE physician and nurse. CT were determined by dividing each FTE's weekly workload by WP. Multivariate analysis explored differences in CT between PHC units, temporal variations, and the influence of the patient population characteristics.

Results: FTE physicians had a mean WP of 117 consultations (SD 39) lasting 22.4 minutes (SD 7.0). FTE nurses had a mean WP of 56 consultations (SD 18) lasting 41.0 minutes (SD 14.3). Compared to UCSPs, USF-A and USF-B had shorter CT ($p < 0.05$) by 2.48 to 4.05 minutes for medical consultations and by 5.51 to 8.04 minutes for nursing consultations. CT increased over time, decreased with higher PHC age and favorable socio-demographic context, and increased with higher population density and elderly patients' proportion ($p < 0.05$).

Conclusions: USF-B professionals showed higher productivity and shorter CT, suggesting that financial incentives are effective in enhancing productivity but that gains may be obtained with losses in visit duration.

Key messages:

- Effective workforce management is crucial given the current primary care professionals shortages.