

Patients First Act: Opportunity to strengthen primary care

Can I trust Ontario's health system to take care of me and my family? This question looms as people hear about serious flaws in our health system: trouble accessing timely appointments when you are sick; community care poorly connected and inequitably delivered; soul-sucking long waits in emergency rooms.

As a family physician in this province for more than 20 years I have witnessed the introduction of many "fixes" – and their varying results. The Ontario government is now introducing the *Patients First Act*: here's what I see in store for users of health care.

The legislation brings together all of the key health system players at a local level to focus on the unique health needs of people in communities across the province. Local Health Integration Networks (LHINs), working with primary care, home and community care, public health and hospitals, will be better able to strengthen communication within the "circle of care" for patients. They'll also be better positioned to distribute resources and monitor health system performance to ensure people get the appropriate care and support they need where and when they need it.

Why do we need this change? While LHINs were set up to plan health services at a regional level, the cornerstone to accessing health care – primary care – was left off the LHIN's mandate. *Patients First* makes primary care a focal point of the health system.

Primary care – the long-term relationship each person has with their family doctor or nurse practitioner – is key to keeping people healthy, and to keeping health system costs in check. Research has proven this. The ability of primary care providers to access and coordinate care for their patients is vital to ensuring people get the right care at the right time and don't slip through the cracks. Health resources are used more efficiently when people don't have to wind up in the hospital or emergency room unnecessarily.

The exclusion of primary care from LHIN planning has been an obstacle to effective care coordination. Community Care Access Centres (CCACs) were created to provide necessary home care. But a recent report from Health Quality Ontario revealed we have a very low rate of home care and community services communicating with family doctors when compared to other parts of Canada and 10 other countries. It shows family doctors are experiencing many barriers when

coordinating care for patients in home and community services. This causes negative experiences for patients and caregivers.

Patients First hopes to change that by eliminating CCACs and transferring their function to LHINs. But the critical task of care coordination must not languish in a bureaucracy – this key system navigation role must find a new home within the groups and teams of primary care providers to help organize care for their patients.

Electronic connectivity – among care providers, patients and their families – is another critical piece for putting “patients first”. Bringing all health care players to the LHIN table, and creating Patient and Family Advisory Committees, will sharpen focus to put in place the capacity to share vital information among those who need to know.

To really work, *Patients First* will have to go further than what is currently proposed. Ontario must expand comprehensive team-based primary care. Family health teams, nurse practitioner led clinics and other team-based models provide an enhanced medical home for patients. Teams incorporate many other health disciplines like mental health, nursing and specialized programs focusing on chronic disease management. Evidence is increasingly showing that these primary care teams can provide the highest quality of care and reduce overall health system costs. Yet only 25% of Ontarians have access to these enhanced teams. This is not fair nor is it equitable.

Patients First also requires the LHINs to work with primary care to monitor and improve performance. Family doctors and nurse practitioners, whether or not they practice as members of groups, teams or solo, need to be held accountable to an acceptable standard of care. The people I work with pride themselves on delivering great care. Most providers do. Help can come to those who fall short by sharing best practices. Public posting of select metrics could help develop transparency of performance. Ongoing measurement of meaningful indicators can help foster a new culture of continuous quality improvement.

Patients First gives LHINs the authority to plan and monitor the full spectrum of care. A strong primary care foundation is critical to ensuring Ontarians have equitable access to a consistent, comprehensive and fully integrated health system. Greater investments in expansion of primary care teams will lead to savings in other parts of the health system. *Patients First* creates the potential.

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