



Summary of Insights from Virtual Community April 25, 2019

Background:

The Change Foundation has convened a Primary Care Virtual Community on behalf of the Ontario College of Family Physicians and the Association of Family Health Teams of Ontario. The virtual session held in April 2019, was the first in a 4-part webinar series. This session builds on the momentum from an inaugural webinar on Primary Care and Health System Change that was held in Nov. 2018.

The virtual community reflects participants who work in broadly diverse domains in primary care: Physicians, nurses, administrators (executive directors of FHT's and CHCs), academics, quality improvement experts, and sector organizations like OCFP, and the Section of General and Family Practice, etc.

Several questions were posed to the group and the key messages are captured below.

The priorities for realizing a more integrated “joined up” system, and for advancing primary care in the next 3 years include:

Leadership:

There needs to be:

- Dedicated time for primary care leaders (clinician leaders) to lead system change
- A compelling way of communicating the value proposition of connected care to primary care providers who are not in leadership positions.

Funding:

There needs to be:

- Equitable access to interprofessional resources
- Decrease in funding silos
- an increased portion of the health care budget for primary care (target 13%)
- Funded infrastructure for primary care sector

System planning:

There needs to be:

- Strategic planning that includes both hospital and primary care in order to align priorities, and joint Quality Improvement Plans (QIPs) would ensure movement in same direction
- Support for data analytics as this support does not exist in much of the primary care sector
- Broaden engagement to include patients and caregivers in a meaningful way to co-design, not just validate work
- An approach to planning that anticipates the needs of patients into the future, not just current need

Trust and relationships

There needs to be better:

- Care coordination with improved continuity of care (both relational and informational)
- Shared care with specialists

Care integration:

The future of primary care should include:

- Home care integrated into primary care
- The primary care takes the lead in patient navigation between sectors, access to providers for all citizens,
- A commitment to ensure transitions are seamless - both transitions of patients and of information
- Stronger partnership and collaborations with community and social services

Electronic Medical Record (EMR)

There needs to be:

- Integrated EMR (not just interoperability) / seamless EMR with connection to pharmacy and hospital / EMR should be infrastructure paid for by government
- A pathway to patient access to their own information

Human Resources:

There needs to be a focus on:

- Ensuring that comprehensive primary care practice is attractive to new grads in order to create a sustainable physician resource pool
- The quadruple aim and ensuring provider satisfaction to support sustainability

Moving forward:

Primary care wants to be part of positive health and social change.

Actions that may be helpful to consider in change related to Ontario Health Teams (OHT):

- ❑ To encourage a culture of cooperation/integration locally, Ontario Health could bring together the various sectors provincially, in a collaborative support of the OHT process
 - OHT should be encouraged to equitably share team-based resources, as well as back office support, data analytics, etc.
 - Continue towards an integrated EMR, and patient access to their data
 - In the future, OHTs could develop joint Quality Improvement Plans

- ❑ A call to “listen to front line clinicians” and Helen Bevan’s mantra to “lead from the edge” are both being realized in the myriad of discussions happening around OHT development. This should be celebrated.
 - Organizational development and leadership support may need to be considered for an OHT (or grouping of OHTs), aimed at establishing the vision, culture, systems and capabilities to provide joined-up care for patients. This could be supported by the province-wide primary care leadership network

- ❑ OHT planning should involve primary care: *‘No OHT should “go forward” without Primary Care involvement’*
 - Consideration to the logistical/admin/governance support that Primary Care may need to engage in OHT development

Key messages:

Approximately 65% of participants felt that primary care is ready to lead change in Ontario Health Teams, but there are several required enablers.

Voluntary participation in health transformation efforts should not mean “volunteering”. Resources are required to support effective and meaningful primary care participation in change efforts.

Integration efforts will be much more valuable if primary care is seen as foundational to the health care system.

"Integrated care" ISN'T integrated unless it's built around primary care.