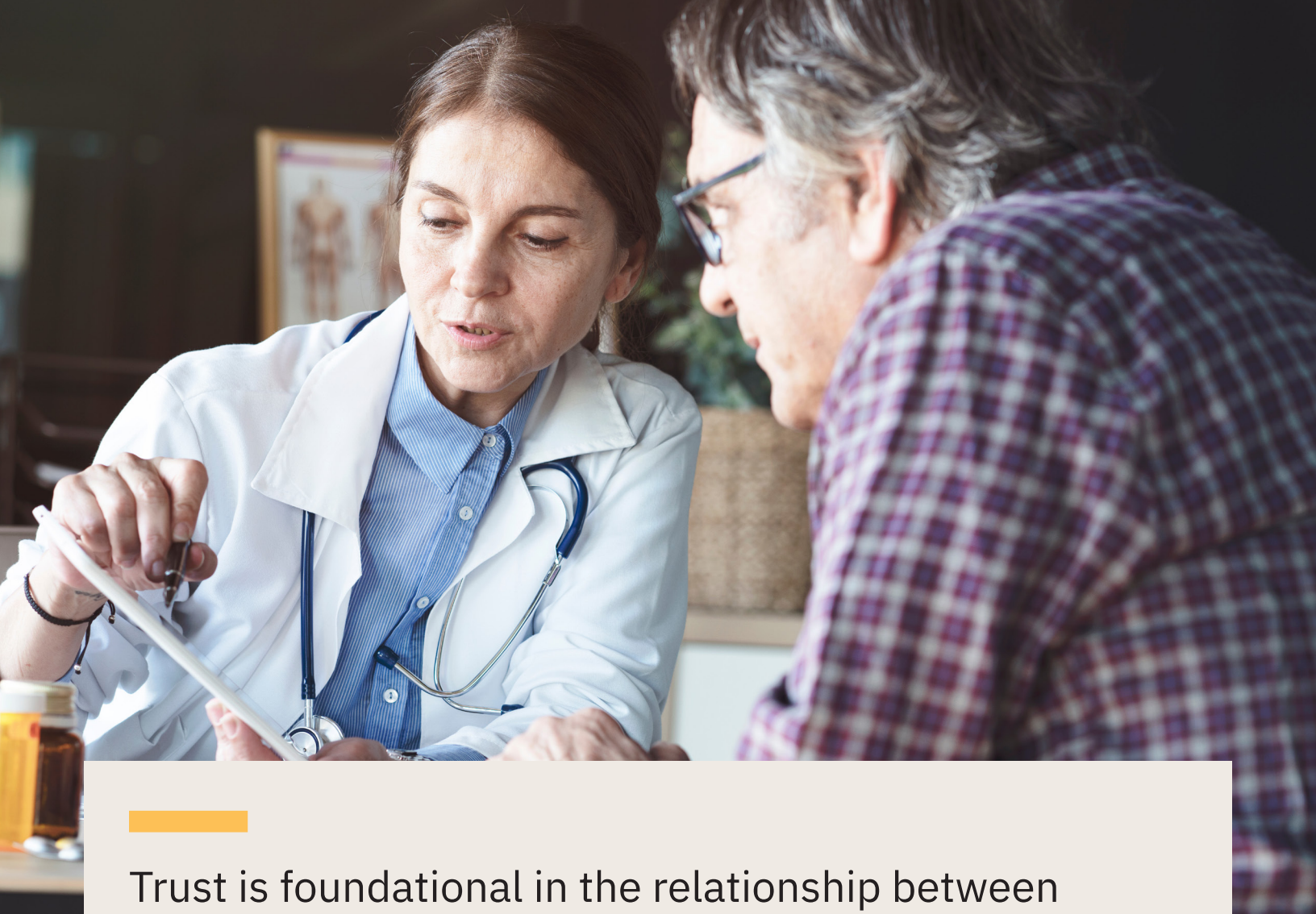


**Association of Family Health Teams of Ontario (AFHTO)
2023 Budget Submission**

Primary Care

The Foundation of
the Healthcare System

#ItTakesATeam



Trust is foundational in the relationship between primary care providers and their patients, caregivers, families, and communities.

Patients want to receive care from their primary care provider and be supported by a team of connected interprofessional healthcare providers (IHPs) who can provide a range of health and social services.

Team-based primary care is proven to offer more timely access to comprehensive, coordinated, and continuous care to patients while leading to cost savings for our health system. Team-based primary care is also a key aspect of health transformation to bring together coordinated and integrated care for Ontarians.

Team-based primary care is core to the Ontario Health Teams (OHT) model as you cannot create integrated population health models of care without primary care as the foundation. We know an investment in team-based primary care will lead to a higher performing health system, better patient outcomes and lower costs, while improving and mitigating burnout of physicians, nurse practitioners and all those that work in primary care.^{1 2 3 4}

The ability of primary care providers to access and coordinate care for their patients is vital to ensuring people receive the health care they need without slipping through the cracks.

The **Association of Family Health Teams of Ontario** (AFHTO) is a not-for-profit association that supports interprofessional primary health care. We envision a healthcare system where every Ontarian will have access to high-quality, comprehensive, well-integrated interprofessional primary care, leading to better health outcomes for patients and the communities in which they live.

To support this vision, we are proposing four recommendations that will be essential to delivering care to Ontarians:



RECOMMENDATION 1

Make team-based primary care available to more Ontarians through an investment of an additional \$75 million per year for 10 years

Recommendation provided in partnership with the Primary Care Collaborative



RECOMMENDATION 2

Address the health human resource (HHR) crisis in primary care through the creation of a primary care HHR table

Recommendation provided in partnership with the Primary Care Collaborative



RECOMMENDATION 3

Provide mental health and addictions services and home and community care in coordination with primary care



RECOMMENDATION 4

Provide resources to support the implementation of primary care networks (PCNs) and recognize PCNs as the organizing model for primary care.

RECOMMENDATION 1

Make team-based primary care available to more Ontarians through an investment of an additional \$75 million per year for 10 years

Recommendation provided in partnership with the Primary Care Collaborative



Only one-in-four Ontarians have access to interprofessional, team-based primary care, which is proven to offer more timely access to comprehensive health care, better coordination of care for patients, and cost savings for our health system.

With the increasingly complex needs of Ontario's aging patient population, and the residual impacts of COVID-19, we need to ensure that every Ontarian has access to an interprofessional team if they need one.

Team-based primary care is family doctors, nurse practitioners, nurses, social workers, pharmacists, dietitians, and other professionals, all working collaboratively to support a patient and their needs.⁵

RECOMMENDATION 1



We know that primary care physicians would need 26.7 hours a day to provide comprehensive care for patients – obviously, this is not possible. ^{6 7} With a team, this can be cut to 9.3 hours a day ensuring patients are getting the care they need.

A commitment to a 10-year, \$750-million funding strategy will ensure every Ontarian has access to team-based primary care when needed. With this funding, within five years, access would be expanded to half the population with priority for people who need it the most, such as those with complex and chronic illnesses, those with mental health and addiction challenges, and regions that are underserved by primary care teams such as Scarborough, Brampton and rural/northern communities. Within 10 years, every Ontarian who needs team-based primary care would have access to it.

In addition, interprofessional primary care teams have also not seen an increase in sustainable funding to ensure capacity and continuity in over 10 years. To help ensure access to teams, base funding needs to be increased by 8% to manage overhead costs. We would welcome an opportunity to work with the Ministry of Finance to determine how this increased funding can become a reality to recognize inflation and cost of living increases.

Every Ontarian deserves access to comprehensive and equitable care where and when they need it. It's time for Ontario to commit to ensuring access to a comprehensive interprofessional primary care team for every person who needs it. This would be achievable with a commitment to invest \$75 million per year for the next 10 years in team-based care.

RECOMMENDATION 2

Address the health human resource (HHR) crisis in primary care through the creation of a primary care HHR table

Recommendation provided in partnership with the Primary Care Collaborative



Healthcare workers are at the center of primary care. We need to invest in retaining the skilled healthcare providers we have. In addition, we need to attract healthcare providers to care for our aging and increasingly complex patients. The retention and attraction of healthcare workers in primary care is a challenge we cannot face alone. **We are proposing to create a primary care HHR table for future HHR and capacity planning that includes all PCC partners, the Ministry of Health and Ontario Health.**

RECOMMENDATION 2



Recruitment and retention are a challenge across the system, but it is hardest in primary and community care because of lower funding and salary limits. In addition, while Bill 124 was in effect, it capped healthcare workers' salary increases at one per cent, which was in direct opposition of the need to increase salaries of those working in primary and community care.

An HHR table solely focused on addressing the HHR crisis in primary care will be critical to address key issues to support the recruitment and retention of healthcare workers. The findings from a comprehensive salary market review that is underway will inform discussions with this table on key issues, including wage disparities. It will be essential in helping retain the passionate healthcare providers we have and to recruit new and emerging health professionals to support the health of many Ontarians.

In addition, building primary care teams and maintaining staff will attract physicians and healthcare providers back to family medicine. Today, more than 1.8 million Ontarians say they do not have access to a family physician, with projections as high as three million by 2025.

The shortage of family doctors providing ongoing comprehensive care is leaving Ontarians without timely access to medical attention and treatment. This lack of access increases patients' risk of developing more serious and costly health problems.

It is also placing further pressure on other areas of our overworked healthcare system, including hospitals, emergency departments and long-term care homes. More people need attachment to a primary care provider and interprofessional team, and we need a primary care workforce that is valued for providing comprehensive care.

Nurse Practitioners work within all corners of health care across Ontario, including hospitals, community-based clinics, family health teams and Nurse Practitioner-Led Clinics (NPLCs) and work in partnership with physicians, nurses, social workers, mental health professionals, and pharmacists. All primary care providers should be considered in the government's efforts to expand access to primary care.

A clear and comprehensive HHR plan co-developed between PCC, MOH and OH and informed by the comprehensive salary market review led by AFHTO, Alliance, IPHCC, and NPLCA will attract and retain interprofessional healthcare providers and keep building strong teams.

RECOMMENDATION 3

Provide mental health and addictions services and home and community care in coordination with primary care



Primary care is often the first point of contact for patients experiencing health and social care difficulties, especially those related to their mental health. Roughly three-quarters of Canadians rely on their primary care provider to address their mental health needs.⁸

Primary care providers deliver comprehensive services to these patients, including care coordination, referrals, prescribing medication to treat their illness and providing care for multiple physical conditions. They also provide psychotherapy and counselling support when their patients cannot access services in their community in a timely manner.

RECOMMENDATION 3



Comprehensive mental health resources are best coordinated by the patient’s trusted family physician or nurse practitioner. We have heard from primary care providers that supporting patients’ mental health is their biggest challenge – there are not enough resources to support patients and wait times for community services are too long. Team-based primary care plays a valuable role in the OHT model by delivering comprehensive care to help patients struggling with mental health and addictions navigate the health system and ensure smooth transitions in care. It is critical that we take decisive action now to better integrate mental health and addictions supports in primary care. People’s lives depend on it.

In the last few years, we have seen some improvement integrating home and community care in primary care, but change has been slow and sporadic. **High quality, integrated home and community care that is embedded in primary care improves the patient experience** and helps Ontarians remain healthy and safe at home —where they want to be — while relieving pressure on hospitals and long-term care homes.

We need a health system that is truly integrated. Care coordination and system navigation is a key function of primary care and should be foundational in realizing the vision of OHTs. To be most effective, critical mental health and addictions and home and community care supports must be embedded in primary care—the most effective setting to facilitate seamless transitions in care and offer patients a single point of contact in their health care journey.

RECOMMENDATION 4

Provide resources to support the implementation of primary care networks (PCNs) and recognize PCNs as the organizing model for primary care



Primary care networks (PCNs) are critical in the continued development of OHTs. Structures and processes in place have amplified the important role of primary care expertise and have proven most valuable in coordinating responses to COVID-19 within OHTs over the past two years. This has resulted in primary care physicians forming – most often through grassroots efforts – highly effective PCNs that enabled efficient communication and facilitated the execution of public health strategies.

We recommend the Ontario government dedicate funding to continue the implementation of PCNs as the driving force for an integrated primary care model and as key partners leading coordinated health care within OHTs.

RECOMMENDATION 4



As we move to a system recovery focus, many PCNs continue to engage with their local OHTs. PCNs are focused on system planning initiatives, facilitating access to much-needed supports for primary care practices, creating efficient communication channels with community partners, and advocating for the needs of primary care physicians, nurse practitioners and their patients.

PCNs will enable horizontal integration, enhancing the capacity of primary care physicians and nurse practitioners to support each other and their patients while facilitating local care planning with their respective OHTs. PCNs will benefit all primary care physicians and nurse practitioners practising under all funding models by streamlining supports and available resources.

Funding PCNs will:

- Improve patient experiences through forums for patients and providers;
- Support patient outcomes through coordinated and connected care across all health systems partners and areas of primary care;
- Lower costs by leveraging existing resources, services, and shared learnings in primary care approaches;
- Support clinician well-being by sharing information across primary care networks, supporting leadership, and promoting best practices in primary care; and
- Improve equitable and patient-centered primary care delivery, including equitable access to team-based care for all Ontarians.



Primary care providers across Ontario continue to deliver high-quality care to their patients, families, and their communities.

Additional funding and investments in coordinated primary care efforts will enable the expansion of team-based primary care to any Ontarian who needs it.

This will improve health outcomes for patients across Ontario, improve working conditions for providers, relieve strain on hospitals, and it will be critical in helping ensure we have a stable healthcare system that can provide care in a timely manner for anyone who needs it.

For patients to be supported and receive the care they need close to home, the government of Ontario needs to invest in interprofessional team-based primary care. For OHTs to succeed, investments and engagements with primary care are required. On behalf of our interprofessional primary care teams, AFHTO is calling on the government of Ontario to support team-based primary care and invest in the first place of access for many Ontarians.

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