



Beyond Boundaries: Embracing team-based primary care for all

2022-2023 ANNUAL REPORT

afhto association of family
health teams of ontario



President's Message



DURING MY TENURE AS BOARD CHAIR, there has been significant change within the AFHTO team, across membership and amongst the board. As people embark on different opportunities, let us

take the time to celebrate their contributions and look forward to the possibilities that lie ahead of us. While the changes we face may seem daunting at times, they can initiate transformation that team-based care is more than capable of leading. Change gives us all a chance to adopt a growth mindset and explore the possibilities that will encourage innovation and develop skills that will help us adapt to new circumstances.

Thank you to the AFHTO team for your commitment to our membership. Thank you for your patience, support and understanding as the board works towards recruiting a permanent CEO. While our interim was excellent at keeping us afloat, the board certainly appreciates the importance of recruiting a CEO that will lead on a more permanent basis. This CEO will spearhead the development of a new strategic plan that will define a bold vision to drive change and transformation.

As I approach my ninth and final year on the board, I must thank each board member for their tremendous effort and dedication in stewarding AFHTO's capabilities and maximizing its impact through their effective governance. Through their oversight, we have maintained

strong accountability and clear direction. We have three outgoing board members that have served for nine years who have played an instrumental role in helping AFHTO fulfill its mission through their strong leadership. Thank you for your service, Allan, Clarys, and Rob. You will be missed, and we wish you all the best.

Finally to our members. Thank you for pushing through the very many challenges we have endured in primary care. Thank you for believing in team-based care and dedicating your time, skills, and efforts to helping it flourish as we continue to work in a strained healthcare system.

Your commitment has made a difference. AFHTO is recognized as being the leader in team-based care and that is attributed to your efforts.

Let us continue to band together and advocate for more investment in our models as we are leaders in comprehensive team-based primary care. Our insight and experience are what set us apart from other models and we can continue to build on what we do best through alignment with the provincial healthcare vision.

Thank you again to all teams and individual team members for all that you do! Finally, thank you for letting me serve as board chair; it has been an honour.

Wishing you all well,

A handwritten signature in white ink on a dark blue background. The signature is cursive and reads "Sara Dalo".

Sara Dalo

United for Ontarians: Enhancing the impact of interprofessional team-based primary care



▲ Dufferin Area FHT social workers, who collaborate with North Peel & Dufferin Community Legal Services on an ODSP clinic, where they assist patients with their application forms. In 2022, 85 per cent were successful in their applications.

Breaking barriers, healing minds: Innovative approaches to mental health and addictions care

In early 2023, AFHTO members received one-time mental health and addictions (MHA) funding from the Ministry of Health. AFHTO participated in a province-wide evaluation of the impact of the funding and determined that the funding led to key improvements in outcomes and care, at a time when Ontarians were facing high levels of anxiety, depression, eating disorders, substance use and the ongoing epidemic of opioid overdoses.

Those outcomes included:

- Reduced wait times for community-based MHA services;
- Reduced need for emergency department or secondary/specialty services;
- Improved equity in access to team-based MHA care for more people living

in Ontario, including those experiencing marginalization, without prior access to team services, or previously unattached to primary care;

- Improved integration and reduced barriers in navigation to needed services;
- A more comprehensive spectrum of culturally appropriate interventions in the safe and trusted setting of patients' medical home.

To support knowledge sharing and to build a business case around sustainable MHA funding, AFHTO reached out to members and facilitated the knowledge transfer of ideas and strategies across regions. While a remarkable amount of progress was achieved through this one-time allocation, it quickly became clear that the outcomes would not be sustainable without reliable and ongoing funding.



Example Clinic

On March 7, 2023, the Cambridge North Dumfries Ontario Health Team (CND OHT) launched an eight-week Community Mental Health and Addictions Clinic. This walk-in clinic addressed a key need identified by the CND OHT Mental Health & Addictions Working Group, and the clinic improved access to mental health and addictions treatment and supported the patient experience in navigating care pathways.

◀ *Cambridge North Dumfries OHT's Community Mental Health & Addictions Clinic (C-MAC) Pilot Project mitigated ER visits and removed barriers to accessing timely care.*

AFHTO advocated directly with the Ministry of Health and Ontario Health to make the case for sustainable MHA funding in primary care.

AFHTO presented three key recommendations to the Ministry of Health:

1. Provide permanent increased base funding for primary care teams, so teams are able to effectively plan and address the ongoing volume and spectrum of unmet MHA needs in Ontario;
2. Develop a primary care health human resources strategy that incorporates wage parity with the acute and private sectors, to allow retention and recruitment of the health professionals who deliver needed MHA services;
3. Ground MHA pathways and investments in primary care teams to ensure integration of care by design.

“It can be very difficult for people who need help with mental health or addictions in Cambridge to get help. Long wait lists and fragmented services are familiar problems for patients, and for health providers trying to help. A clinic like this provides faster and more concrete connections to existing people and services, especially when people have urgent concerns and are sitting on waiting lists.”

DR. CRAIG ALBRECHT, LEAD
COMMUNITY MENTAL HEALTH AND
ADDICTIONS CLINIC PILOT PROJECT

A united IDEA: AFHTO's equity audit

In Summer 2023, AFHTO completed an inclusion, diversity, equity, and accessibility (IDEA) audit to ensure AFHTO is using leading practices approaches for issues of equity and inclusion.

The IDEA audit involved a review of AFHTO's policies, programs and practices that directly or indirectly affect staff, volunteers, and the organization's reputation. It focused on anything that may be inequitable or may be perceived as being inequitable in relation to race, ethnicity, gender, national origin, abilities, identity, and other socio-cultural factors.

AFHTO will receive and action recommendations that come out of the IDEA audit starting Fall 2023.

Primary care team involvement in the COVID-19 vaccination rollout strategy

AFHTO has collaborated with researchers from the University of Toronto to produce a qualitative study delineating the experiences of Ontario primary care teams in distributing COVID-19 vaccines during the various stages of the province's vaccine rollout. Specifically, the study considers the facilitators and the barriers experienced by teams during mass vaccination efforts.

The experiences described in this publication will help health system stakeholders understand the important role primary care can play in future mass vaccination initiatives. This study, with AFHTO co-authorship, is expected to be published in Spring 2024.



▲ *East Elgin FHT nurse practitioners have stepped up to provide care for unattached patients, from newborns to seniors, through various programs.*

AFHTO Attendance at the 2023 NEOFHT Meeting to Learn about Issues Facing Rural and Remote Primary Care Teams

In May 2023, AFHTO attended the Northeastern Ontario Family Health Team (NEOFHT) Directors Network annual meeting at the Laurentian Lodge in Elliot Lake. The NEOFHT consists of 29 FHTs from Ontario's northeast. At the meeting, the network shared common challenges and opportunities with AFHTO staff. AFHTO provided strategic updates on the organization's work as it related to rural and remote priorities in the north.

Some of the topics discussed included digital health, cyber security, recruitment and retention, and electronic medical records.

AFHTO will continue to work directly with the NEOFHT network to support teams in northern Ontario as they tackle unique challenges.

Showcasing a QIDSS

AFHTO continues to provide provincial support to quality improvement efforts across Ontario's primary care teams. AFHTO works directly with Quality Improvement Decision Support Specialists (QIDSSs) to bring quality improvement to life.



Lisa Hawkins (shown left) is a 6-year QIDSS veteran at the Petawawa Centennial Family Health Centre (PCFHC) and is one of three in the Champlain region supporting 23

FHTs. AFHTO has supported Lisa and her team on the PCFHC's Integrated Virtual Care project to create a system where unattached patients can be attached to a primary care physician who is off-site by leveraging the capable team at PCFHC.

During the early stages of the initiative, Lisa worked on program development, workflow elements, privacy considerations, and patient and provider experience project components. Using ingenuity and resources from the AFHTO community, Lisa was able to leverage existing workflows to onboard patients quickly, including the development and use of electronic documentation.

AFHTO staff have worked closely with QIDSSs across the province to help establish short- and long-term metrics to measure program success, and these efforts include the development of a data collection plan to ensure continuous measurement is sustainable and standardized.

Knowledge Translation & Exchange (KTE) Webinars

Over the past year, AFHTO promoted and hosted several important webinars for members.

Below is a list of some of the key webinars.

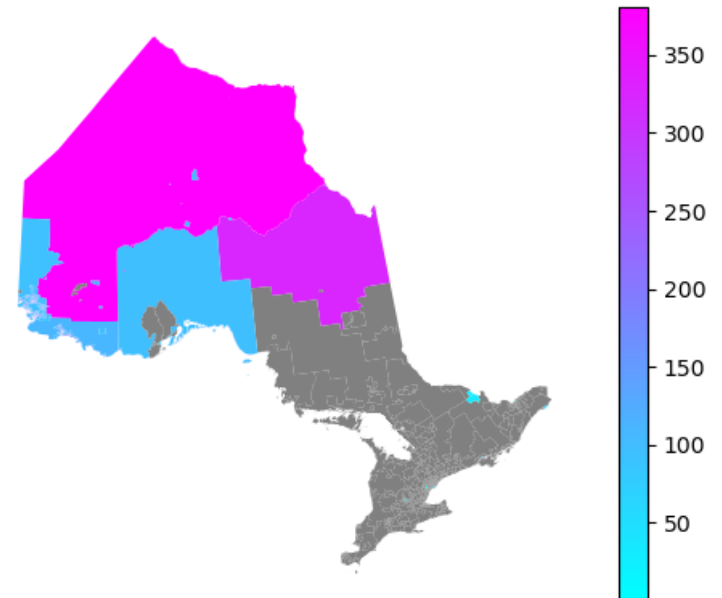
- [Ontario Fall Prevention Collaborative – An Ontario System-Based Approach to Fall Prevention Among Older Adults](#) - June 2022
- [Wellness Check: Dealing with Transitions and Managing Stress](#) - Sep 2022
- [Supporting Caregivers Supports Patients- The Critical Role of Primary Care in Preventing Caregiver Burnout](#) - Nov 2022
- [Climate Conscious Inhaler Prescribing](#) - Dec 2022

Staying Connected on QI

The Quality Improvement (QI) in Action eBulletin is a resource to share innovations, tools, stories, and dates of KTE webinars. Highlighting the breadth and quality of work across AFHTO's membership and the primary care sector continues to be the driving force behind this communication.

Individuals and organizations can sign up by emailing info@afhto.ca.

Charting the Course: Leadership in organizing primary care



▲ Average distance (km) from team location to postal code centroid for areas with high uncertain attachment.

Articulating the need for investment: mapping attachment and population vulnerability across Ontario

In Summer 2023, AFHTO conducted an analysis of the needs of patient populations from around the province based on data from INSPIRE-PHC, On-Marg, and Statistics Canada. This analysis sought to inform primary care team funding applications and advocacy. The quantitative component of the analysis was driven by uncertain attachment and measures of socioeconomic status and material deprivation.

AFHTO used this analysis to support member applications for Ontario Health's call for Expressions of Interest and engaged in direct advocacy for additional funding. This work was completed in collaboration with the Alliance for Healthier Communities to ensure that AFHTO's approach was aligned with partners in Ontario's primary care sector.

Pushing towards parity: understanding remuneration gaps to support recruitment and retention

In Summer 2023, AFHTO joined with nine other provincial associations to complete the Ontario Community Health Compensation Market study. The purpose of the study was to conduct a market review of total compensation for clinical and nonclinical roles across health care sectors. 362 organizations participated.

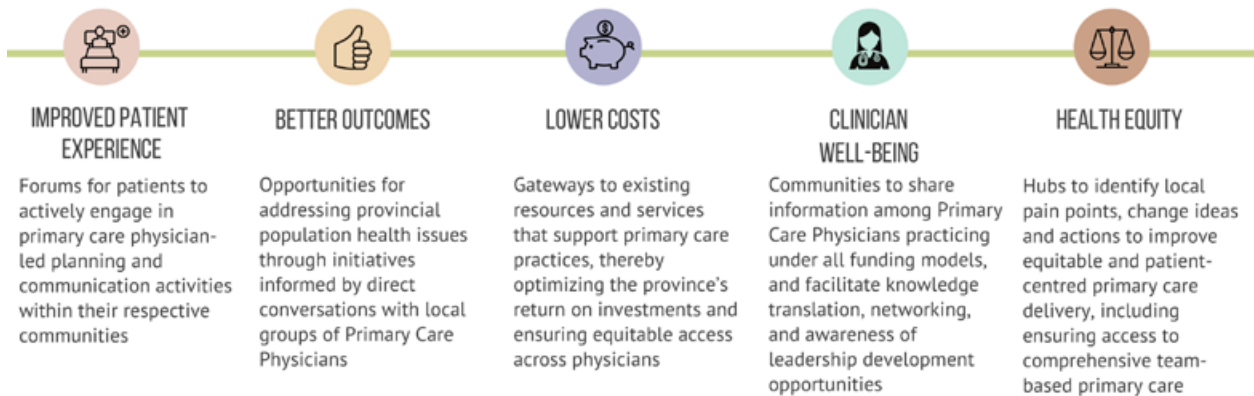
The ten partner associations will share the findings with the Ministry of Health to advocate for updated and improved compensation grids to support recruitment and retention of primary care staff. AFHTO will also release the final report, including survey findings and recommendations, to all members in Fall 2023.

Excerpt from *Primary Care Networks in Ontario: A Primer, November 2022*:

THE PROS OF PCNS

Primary Care Networks or PCNs are distinct structures comprised of Primary Care Physicians that function as organizing bodies for primary care and hubs for collaboration within their respective OHT regions. At maturity, PCNs will be:

- Primary Care Physician-led or co-led, depending on the region’s context (e.g., certain PCNs in Ontario, given their primary care provider makeup, may wish for instance to include NPs in PCNs and regional planning activity)
 - Note: the term “Primary Care Physicians” includes family doctors and community-based specialists such as Geriatricians and Pediatricians
- Hubs for information and tools exchange, where the voices of those in all practice models are amplified
- Connected with each other, enabling close collaboration between Primary Care Physicians with the Ministry and OH on longer-term transformation initiatives such as ensuring more equitable access to interprofessional team-based care resources among all Ontarians
- Gateways to access valuable resources to assist primary care practices (e.g., quality improvement & practice facilitation, data collection and analytics, coaching, evaluation, and digital and clinical supports to support automation, IT, procurement, and other important administrative functions)



Consultation for Physician Services Agreement Input

AFHTO completed a robust consultation process to provide feedback to the 2024 Physician Services Agreement (PSA) task force. AFHTO engaged in consultation and dialogue with physician leaders and provided a summary of their feedback and recommendations for consideration by the task force. The recommendations are applicable to physicians affiliated with FHTs but could also apply to any of the patient enrolment models in Ontario.

On May 24, 2023, AFHTO submitted a comprehensive set of recommendations in response to the Ontario Medical Association (OMA)'s Negotiations Task Force survey.

AFHTO is pleased to highlight the following key priorities and proposed solutions from physician leaders:

1. Stabilize the family physician workforce;
2. Reduce the administrative burden and red tape experienced by family doctors; and
3. Increase access to team-based

AFHTO presented on these priority areas, along with recommended solutions to both the OMA and the MOH to inform future PSA negotiations.



▲ *Markham FHT's Seniors Home Support Program provides homebound seniors with a much needed continuum of routine preventative care, in-house geriatric counsel, urgent chronic disease management, and palliative care.*

A new way of working: supporting the shift towards streamlined contract management.

In the past year, the Ministry of Health announced plans to transfer FHT contract management and oversight to Ontario Health effective October 1, 2023. To provide AFHTO members with additional information as well as opportunities to ask questions, AFHTO hosted two webinars with Ontario Health. AFHTO continues to work with members on the outstanding barriers and questions related to the contract management transfer to Ontario Health.

Social prescribing at Windsor FHT

AFHTO is working to leverage lessons learned from Windsor FHT's robust Social Prescribing program.

A social prescription is an effective approach to integrating clinical and social care that is person-centred, strength-based, co-created, and community-led. Social prescribing requires a commitment to health equity and an understanding that the social determinants of health directly influence individuals' quality of life in their communities.

AFHTO will be providing a social prescribing webinar in Fall 2023 that will introduce members to the fundamentals of social prescribing and will discuss lessons learned from Windsor FHT's experience to date.

Voice for change: Advocating on behalf of patients and teams



Advocating for team-based primary care and reduced administrative burden

In Spring 2023 AFHTO facilitated site visits with MPPs, focusing on the importance of reducing administrative burden and increasing access to team-based care. In May, Parliamentary Assistants Dawn Gallagher Murphy and Robin Martin visited family health teams in North York and Newmarket to receive tours and to discuss administrative burden in primary care and the family doctor shortage.

Four recommended solutions were proposed to government during these site visits:

1. **Eliminate the requirement of Sick Notes:**
 - Amend the *Employment Standards Act* to prohibit employers in Ontario from requiring sick notes.
2. **Reform Insurance Forms:**
 - Prohibit insurance companies from requiring a prescription for health services.
 - Require all companies to use standardized forms for disability claims.
3. **Establish an Administrative Burden Stabilization Fund:**
 - Create a fund to compensate family doctors for unpaid administrative work and support change management for new technology.
4. **Reduce Government Forms:**
 - Commit to a 20% reduction in unnecessary administrative burden by streamlining and reducing duplicative government forms.

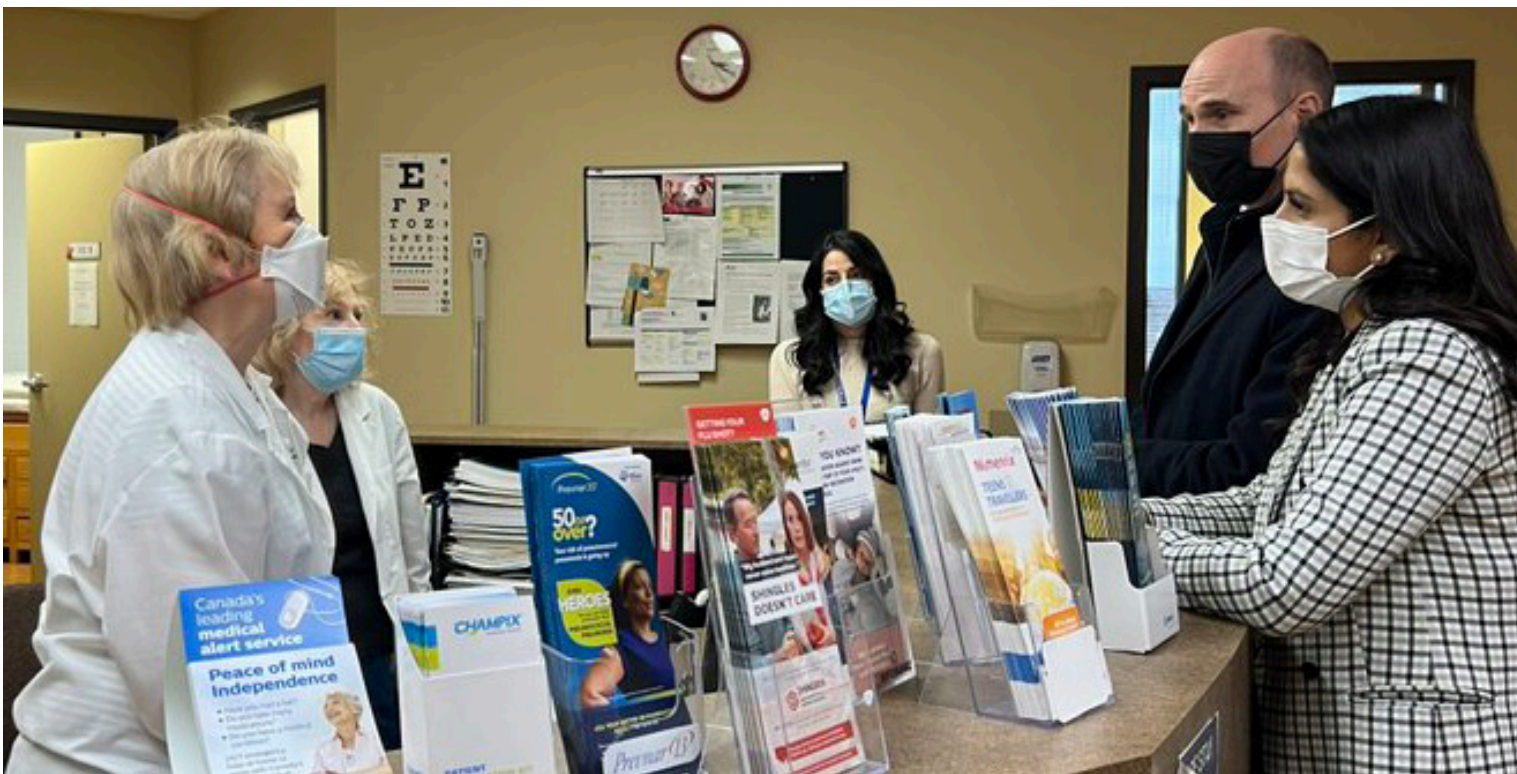


▲ *Top: MPP Dawn Gallagher Murphy visited Aurora-Newmarket FHT to discuss how to cut red tape and reduce administrative burden.*

Below: Staff at Summerville FHT, which initiated Preventative Care Clinics with the goal of increasing the proportion of eligible patients with up-to-date cancer screening tests.

Minister Duclos visit

▲ Federal ministers Jean-Yves Duclos and Kamal Khara visited Summerville FHT to discuss the importance of primary care as the foundation of a high performing health system.



AFHTO and PCC advocacy - 2023 pre-budget submission

AFHTO is proud to continue its work with the [Primary Care Collaborative](#), a coalition of primary care organizations collectively representing 14,000 family doctors, 1,000+ primary care nurse practitioners, 286 primary care teams, 28 Indigenous primary care teams, including northern, rural, and remote teams. PCC's advocacy focuses on important areas of common interest, such as AFHTO's [2023 pre-budget submission](#) to the Ontario government.

AFHTO's key recommendations through this collaboration include:

1. Make team-based primary care available to more Ontarians through additional investment
2. Address the health human resource crisis in primary care
3. Provide mental health and addictions services and home and community care in coordination with primary care.
4. Provide resources to support the implementation of primary care networks (PCNs) and recognize PCNs as the organizing model for primary care.

AFHTO remains committed to advocating for sustained investment in team-based primary care.

Better data delivery where it matters:

Ontario Health has formed an initiative examining improved reporting standards. This [Primary Care Integrated Reporting \(PCIR\)](#) initiative has both short- and long-term objectives, including the integration of Ontario Health primary care data reports into a single offering, and the integration of primary care reporting into EMRs to improve data access.

Short-term goals are specifically examining existing primary care reports, including [MyPractice](#) and the [Screening Activity Report \(SAR\)](#). AFHTO is at this table to ensure the needs of primary care teams are considered throughout all phases of the PCIR initiative.



▲ *When it comes to providing care that is timely, accessible, and comprehensive, it takes a team. [Learn more online.](#)*

Quantitative research on administrative burden via pilot study in Kingston

AFHTO understands the diverse challenges that primary care teams face, including the problem of administrative burden, and is leveraging lessons learned from a small pilot project co-led by members of Maple FHT in Kingston. AFHTO has been developing methodologies to capture the workflow elements of daily practice that contribute to inefficient time expenditure and reduced availability for direct patient care.

The project is expanding to multiple clinics in Fall 2023, and this work will inform improved technology supports and advocacy efforts to aid providers in returning to the work they love – patient-facing care.

What's next for AFHTO?

As AFHTO continues to serve its members and the wider community the organization will be introducing new board members and a new CEO in Fall 2023. The first order of business will be to work with the membership to establish AFHTO's next strategic plan.



▲ Burlington FHT's physiotherapists connect with a member of the public at their Community Wellness Hub for seniors in affordable housing.



▲ With specialty clinics for Long COVID patients over two hours away, Owen Sound FHT created a Post COVID clinic with an interdisciplinary model of care to provide local support for patients. Of the over 70 patients that have been served by this clinic, 100% reported symptom improvement.



▲ Family First FHT's Mobile Diagnostic Unit is improving access to primary care services to their most vulnerable and complex patients in their home.

Thank You

AFHTO would like to thank the many members who were critical in supporting our work this year. Thank you to all who have taken the time to send in comments, respond to consultations, partake in advocacy efforts, participate in communities of practice and working groups, and contribute to the ongoing efforts of ensuring comprehensive team-based primary care is at the forefront of health system reform. A special thank you to everyone who shared stories and pictures for this report, and to all members and fellow stakeholders who have been active in advisory groups over the past year.

AFHTO Leadership Council

Chair: Adam Steacie, Upper Canada

FHT Members: Gary Gurbin, Kincardine FHT; Alice Ordean, St. Joseph's Urban FHT; Birgitte Robertson, Trent Hills FHT; Matt Orava, Barrie and Community FHT; Robyn Brow, Maple FHT; David Schieck, Guelph FHT; Brian McKenna, Hamilton FHT; Elliot Halparin, Halton Hills FHT; Shannon Wiebe, Sunset Country FHT; Camille Lemieux, Toronto Western FHT; André Villeux, Équipe de santé familiale académique Montfort; Jennifer Smith, Six Nations of the Grand River FHT; Vela Tadic, Bruyère Academic FHT; Lynn Laidler, Rapids FHT; Stephanie Nevins, Ingersoll NPLC; Margo Reilly, Windsor FHT; Mike McMahon, Thames Valley FHT; Jennifer Willis, New Vision FHT; Anthony DiValentino, Central Brampton FHT; Andrea Stevens, Summerville FHT; Janine van den Heuvel, Algonquin FHT; Andrea Groff, Health for All FHT; Stephen Beckwith, South East Toronto FHT; Aasif Khakoo, City of Kawartha Lakes FHT; Dinny Mathew, Prescott FHT; Nancy Ewen, Elliot Lake FHT; Mary Lynn Dingwell, North Shore FHT

Thanks and farewell:

Tabitha Kearneu, North Renfrew FHT; Jill Berridge, McMaster FHT; Karen Simpson, Arnprior and District FHT

IHP Advisory Council

Chair: Kaela Hilderley; Elliot Lake FHT **Members:** Chantal Simms, Women's College Academic FHT; Jane Colella, Windsor FHT; Crystal Wasney, Équipe de santé familiale académique Montfort; Katherine Koroluk, Thames Valley FHT; Gisele Barlow, Chapleau and District FHT; Tiffany Ng, North York FHT; Tara Blake, Powassan and Area FHT; Kathleen Homiak, Health for All FHT; Natalie Bazely, New Vision FHT; Cailin Hill, Minto Mapleton FHT

ED Mentors

Alejandra Priego, St Joseph's Urban FHT; Anna Gibson-Olajos, Powassan and Area FHT; Jenny Lane, Leeds & Grenville Community FHT; Judy Miller, Northeastern Manitoulin FHT; Marie LaRose, Georgian Bay FHT; Mary-Jane Rodgers, Aurora-Newmarket FHT; Sandy Scapillati, Etobicoke Medical Centre FHT; Suzanne Trivers, Mount Forest FHT; Pamela Loughlean, Peninsula FHT; Marina Hodson, Kawartha North FHT; Andrew Shantz, North Simcoe FHT; Jill Berridge, McMaster FHT; Judy Hill, Petawawa Centennial FHT; Andrea Stevens, Summerville FHT; Mike McMahon, Thames Valley FHT; Janine van den Heuvel, Algonquin FHT; Neil Shah, North York FHT;

AFHTO Board of Directors: (L-R) Rakib Mohammed (Executive Director, Credit Valley FHT); Neil Shah (Executive Director, North York FHT); Crystal Holly, Treasurer (Psychologist, ESF académique Montfort); Pam Delgaty (Clinical Lead, Lakehead NPLC); Clarys Tirel, Past President (former Executive Director, Mount Sinai Academic FHT); Rob Annis (Family Physician, North Perth–North Huron FHT); Kaela Hilderley (Registered Respiratory Therapist, Elliot Lake FHT); Kevin Samson, Vice-Chair (Family Physician, East Wellington FHT); Allan Grill (Lead Physician, Markham FHT)

Absent: Sara Dalo, President (Executive Director, Tilbury District FHT); Diana Noel, Secretary (former Executive Director, Village FHT); Nora Conostas (President and CEO, Boost Child and Youth Advocacy Centre & Board Member, Georgina NPLC); Jenny Lane (Executive Director, Leeds and Grenville Community FHT); Adam Steacie (Lead Physician, Upper Canada FHT)



AFHTO Staff: Taryn Jacquard, Executive Assistant and Programs Coordinator; Alexander Christy, Operations and Office Administrator; Veronica Jiang, Manager, Finance and Corporate Affairs; Paula Myers, Manager, Membership and Communications; Michael Scarpitti, Director of Strategic Communications and Government Relations; Connor Kemp, Project Manager and KTE Specialist



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The Association of Family Health Teams of Ontario (AFHTO) is a not-for-profit association representing Ontario's primary care teams, which includes family health teams, nurse practitioner-led clinics, and others who provide interprofessional comprehensive primary care. AFHTO works to support the implementation and growth of primary care teams by promoting best practices, sharing lessons learned, and advocating on behalf of all primary care teams. Evidence and experience show that team-based comprehensive primary care is delivering better health and better value to patients.