

## **Ontario Primary Care Needs, Use of Services, Providers, and Gaps in Care 2015/16**

### Introduction

Increased attention has been focused on primary care in recent years as a key strategy for health systems to achieve the ‘triple aim’ of improving population health and patient experience at reasonable cost.<sup>1,2</sup> Reforms to primary care in Ontario, Canada over the past decade and a half have included formal patient enrolment, blended capitation which has become the most common physician payment model, and the implementation of inter-professional teams.

A more recent development has been the implementation of 76 geographically defined Sub-Regions within Ontario’s 14 Local Health Integration Networks (LHINs) under the Patients’ First Initiative.<sup>4</sup> Under this legislation, the LHINs assumed responsibility for primary care planning and greater integration with public health. These changes created a new imperative for LHINs and sub-regions to understand primary care services and capacity in local areas and the degree to which they address population health needs. Even at the Sub-Region level, the large number and diverse roles of primary care providers and variation in community needs makes planning challenging. Primary care providers include Family Health Teams, Community Health Centres, Nurse Practitioner-Led Clinics, Aboriginal Healing and Wellness Centres, and family physicians and general practitioners, most of whom are organized into a variety of patient enrolment models. Population health needs also vary according to geographic location, demographic factors such as age and sex, health status such as multi-morbidity and frailty, and social determinants of health including socioeconomic status, immigration, ethno racial background, housing, and educational attainment.

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In order to understand and address the diverse needs of Ontario’s varied population, the Toronto Central LHIN requested analyses of primary care access, attachment, continuity and mental health as well as analyses of inter-professional teams.

These analyses are made up of data tables and numerous maps and include data for Neighbourhoods in LHIN 7 (Toronto Central and City of Toronto) and LHIN 8 (Central), Ontario Sub-Regions, Ontario LHINs. Please note: some, but not all analyses are presented for LHIN 8.

The analyses are mainly geographic, which is a valuable approach for understanding access to care. However, additional information on languages spoken, hours of operation, accepting new patients, waiting lists, accommodation of people with disabilities, cultural safety, population growth, provider roles and the availability and integration of services in other sectors is needed in order to use this information for planning, implementing and evaluating initiatives to better meet population health needs.

## Ontario Primary Care Needs, Use of Services, Providers, and Gaps in Care 2015/16: Data Tables and Maps

The data and maps for these analyses are available on a newly created page on the Ontario Community Health Profiles Partnership (OCHPP) website, an open portal site that provides free and accessible health indicator data to users across Ontario.

The Ontario Primary Care Needs, Use of Services, Providers, and Gaps in Care 2015/16 page contains the analyses, maps, data tables, methods, data dictionary and data documents associated with this project. The analyses are derived from wide and comprehensive data sources all of which are defined and included in documentation which will be posted on the site to enable users to understand and utilize the data for local planning.

Data will be posted as it is available and the site updated frequently as new maps and analyses are completed.

A chartbook, which is a report in pdf format that contains all the maps, methods and sources for the project will also be made available and posted on this site. Check back in April 2018 to view and download the report.

If you have any questions about the data posted to date please contact Rick Glazier, Project Lead, at [rick.glazier@ices.on.ca](mailto:rick.glazier@ices.on.ca)

In order to receive regular updates regarding new data and the release of the chartbook, please go to the **CONTACT INFORMATION** section and **Sign up for New Content alerts**.

### References:

1. Starfield B, Lieiyu S, Macinko J. Contribution of primary care to health systems and health. *The Milbank Quarterly*. 2005;83(3):457-502.
2. Institute for Healthcare Improvement. IHI Triple Aim Initiative. <http://www.ihl.org/Engage/Initiatives/TripleAim/Pages/default.aspx>, accessed January 10, 2018.
3. Rudoler D, Laporte A, Barnsley J, Glazier RH, Deber RB. Paying for primary care: A cross-sectional analysis of cost and morbidity distributions across primary care payment models in Ontario Canada. *Social Science & Medicine*. 2015;124:18-28.
4. Patients First. A Proposal to Strengthen Patient-Centred Health Care in Ontario, 2015. [http://www.health.gov.on.ca/en/news/bulletin/2015/docs/discussion\\_paper\\_20151217.pdf](http://www.health.gov.on.ca/en/news/bulletin/2015/docs/discussion_paper_20151217.pdf)