

# Family Health Teams Experience in Ontario

## **LEGISLATIVE BRIEFING** **Medical Home Model** Hartford, CT



**Presented by**

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# Primary Care Reform in Ontario

- In 2004 Government of Ontario
  - **Change** of primary care delivery:
    - Wait Times
    - **10%** no consistent access to a family physician
    - Health **promotion** and illness prevention
    - **Chronic disease** management
    - Single **discipline**
- **Innovative delivery**

# Family Health Teams: History

- **Family Health Networks (FHNs)**
- **Family Health Groups (FHGs)**
- **Family Health Teams (FHTs)**

# Family Health Teams: History

- **Family Health Networks (FHNs)**

Groups of family physicians with other healthcare professionals.

- **ENROLMENT,**

- After-hours telephone health advisory service to make advice **24 hours** a day.
- The payment model is primarily based on **CAPITATION**
- Incentives
  - **preventative** services: immunizations, mammograms
  - comprehensive care such as house calls and hospital care.

# Family Health Teams: History

- **Family Health Groups (FHGs)**
  - Introduced 2003, attract to FHNs
  - **Payment** model
    - Enhanced fee-for-service system
    - Premiums and bonuses
    - Fewer doctors (3) were required to form an FHG.

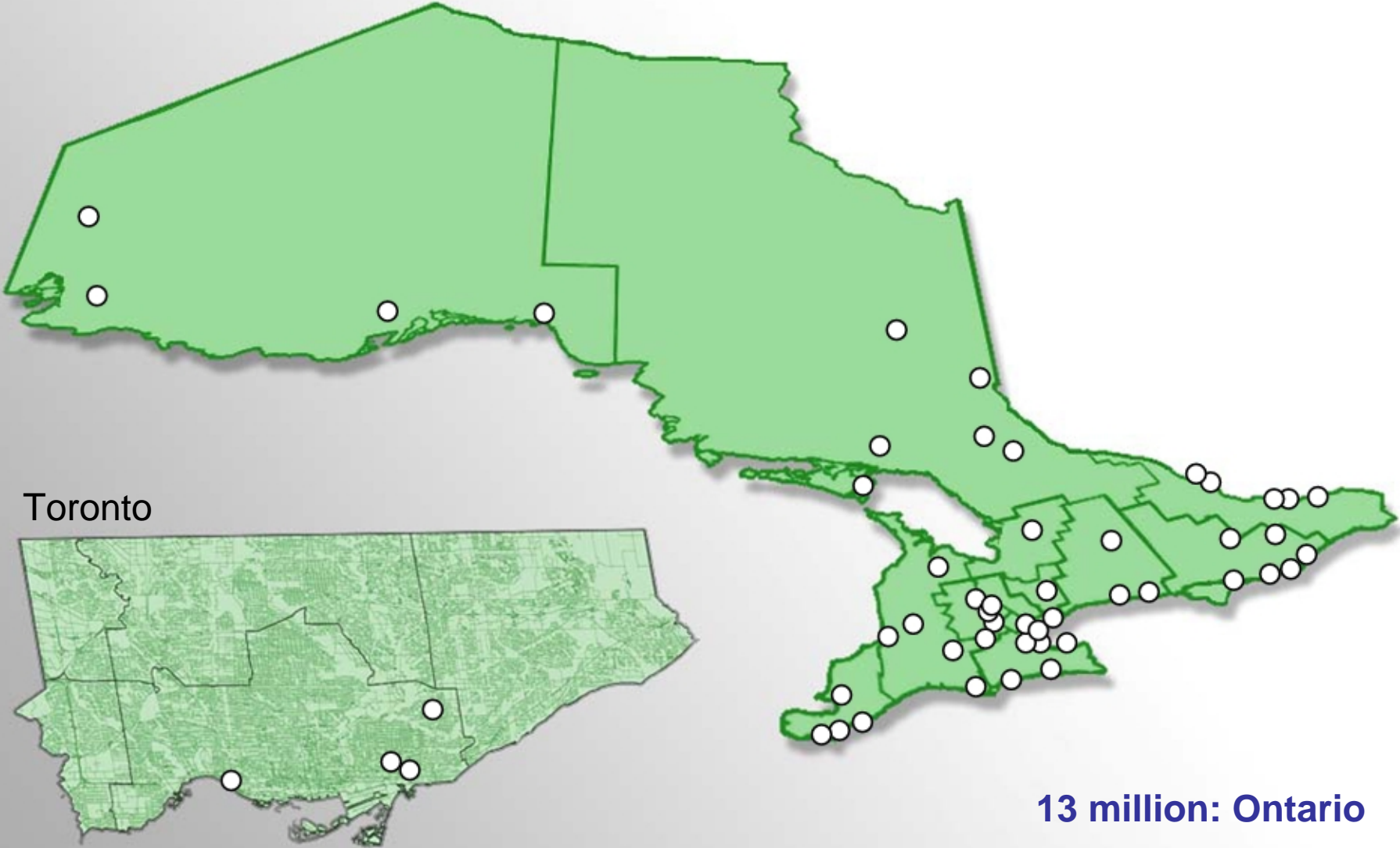
# Family Health Teams: History

- **Family Health Teams (FHTs)**
  - More **INTERDISCIPLINARY**
    - wider **range** of services
      - Nurse, nurse practitioner, dietician, social worker, pharmacist counsellor, psychologist, respiratory therapist, diabetic educator, chiropody,
    - payment model
    - Chronic Pain
    - Women's Healthcare

# Family Health Teams: Implementation

- In April 2005
  - challenges in primary care delivery
  - created **150** Family Health Teams
    - urban and rural
- 2009
  - Family Health Teams **200** total

# Family Health Teams: Phase 1



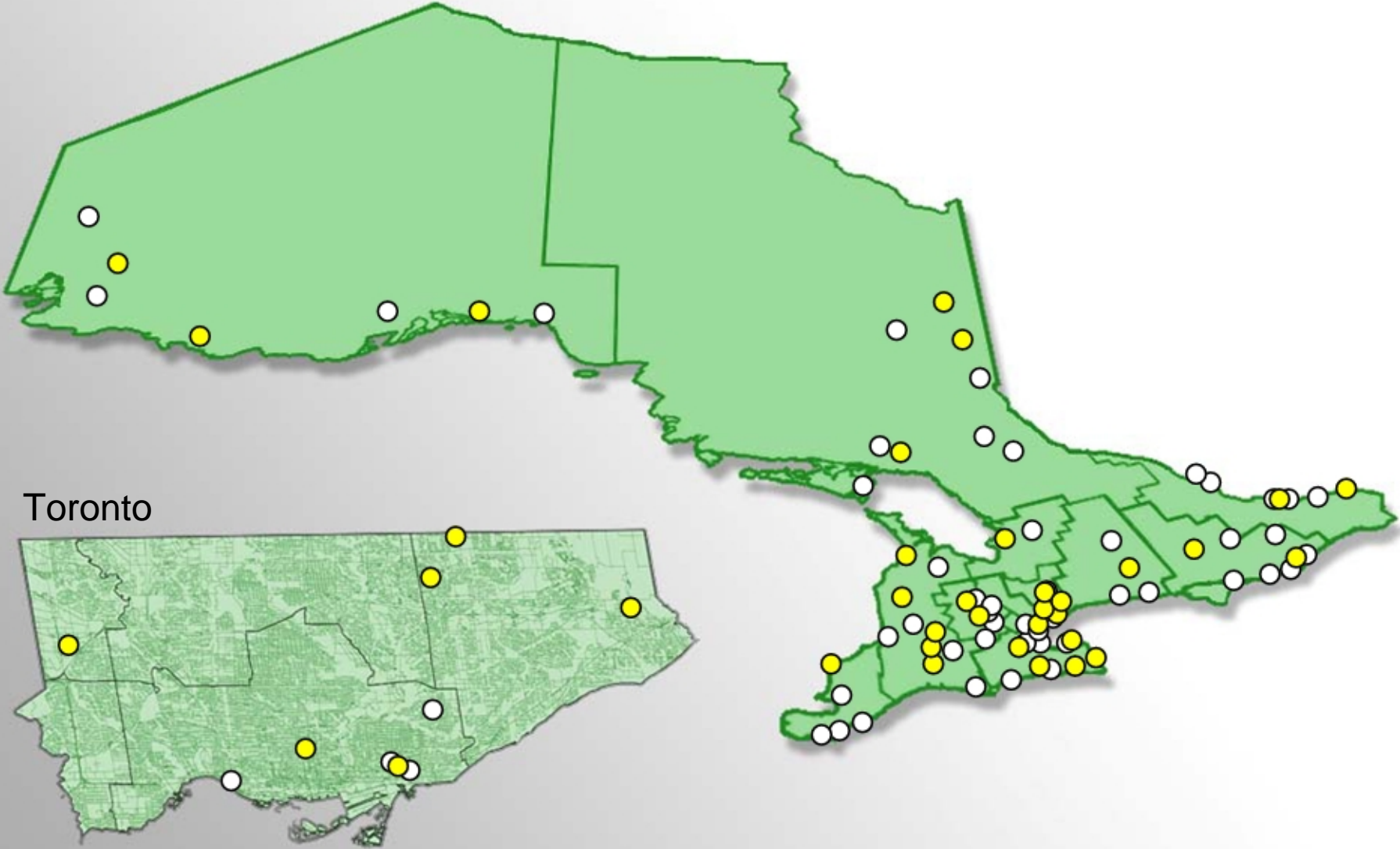
Toronto

**13 million: Ontario**

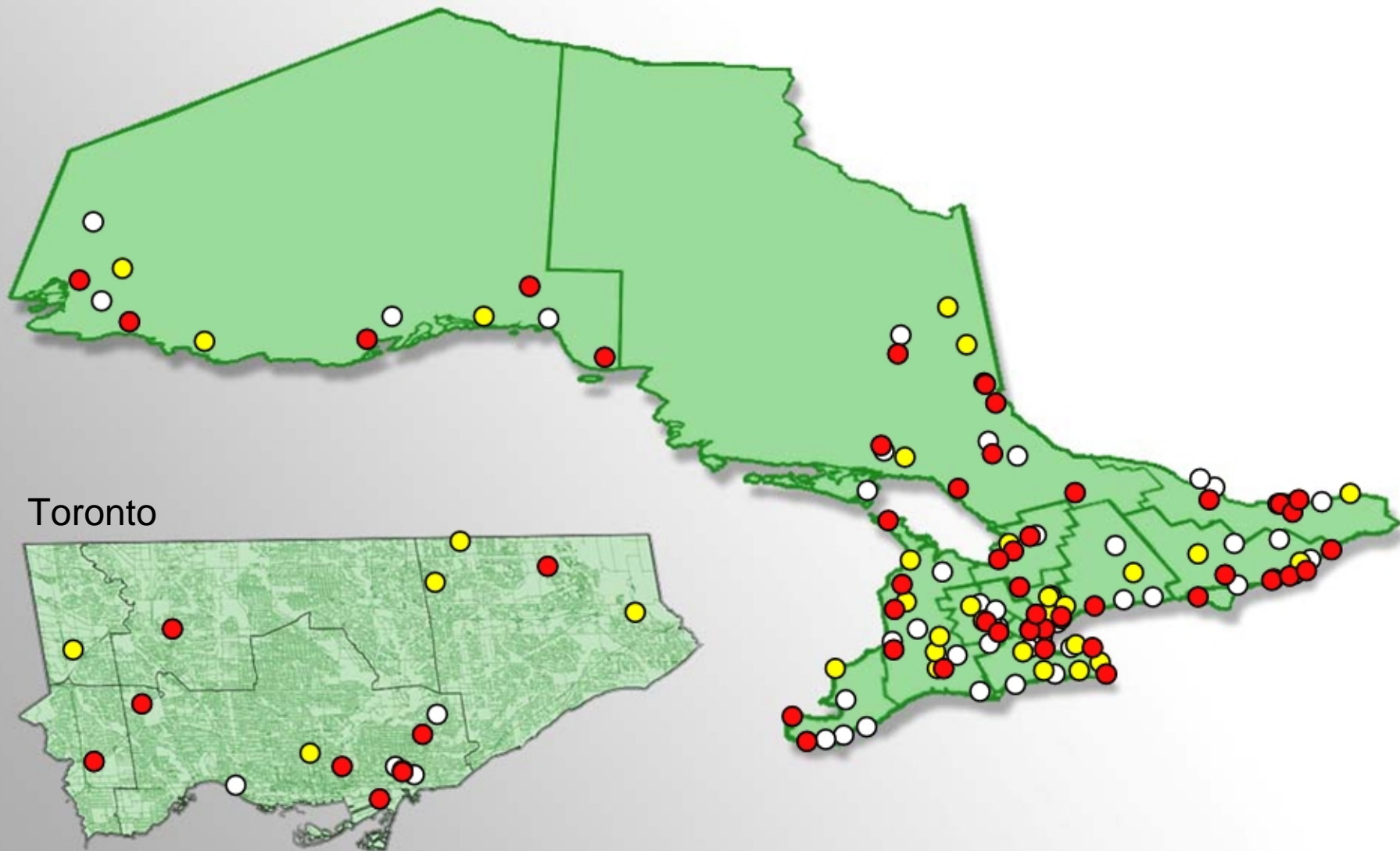
**3 million: Toronto**



# Family Health Teams: Phase 2



# Family Health Teams: Phase 3



# Family Health Teams: Where Are They?

- Family Health Teams
  - urban and rural communities
  - half in underserved communities.
- 200 Family Health Teams
  - **2.5 million** people in 120 communities.

# Family Health Teams: What Do They Do?

- Family Health Teams will:
  - better **access** to care, closer to home.
  - **Interdisciplinary** team to keep patients healthy.
  - extended **hours** and after hours access
  - help patients **navigate** the health care system.
  - provide **primary health care**, **chronic** disease management and **self-help** tools
  - **information technology** giving providers access to patient information and test results.

# Family Health Teams: What Do They Do?

- Family Health Teams
  - core set of comprehensive primary health care services
  - enroled to individual physician or groups of physicians.
  
- Family Health Teams
  - health assessments
  - diagnosis and treatment
  - primary reproductive care
  - primary mental health care
  - primary palliative care
  - patient education
  - preventive care

# Family Health Teams: Composition

- A Family Health Team: **Interdisciplinary**
- Other **professionals**
  - Nurses and Nurse Practitioners
  - Pharmacists
  - Mental Health Workers
  - Social Workers
  - Dieticians
  - Educators
- Some include **specialists**

# Family Health Teams: Division of Responsibilities

- Team Leader Role:
  - organizing the team
  - recruiting staff,
  - setting clinical care guidelines
  - **Quality Assurance**
- Ontario Ministry of Health and Long-Term Care
  - **Guidelines**
    - to assist practitioners in determining the roles and responsibilities for each practitioner, regulated scopes of practice
    - ([http://www.health.gov.on.ca/transformation/fht/guides/fht\\_inter\\_team.pdf](http://www.health.gov.on.ca/transformation/fht/guides/fht_inter_team.pdf))

# Family Health Teams: Why Join One?

## The shared responsibilities of the FHT

- doctors retired
- part-time basis
- sharing costs with other doctors
- vacation without abandoning their patients.<sup>[2]</sup> Finally,
- earn **30% more** than fee-for-service sole practitioners
  
- Young doctors: FHTs

[1] Sam Solomon, "Solo practice becoming less profitable," *National Review of Medicine* 5 (April 2008). Internet site at [http://www.nationalreviewofmedicine.com/issue/special\\_sections/2008/practice\\_management/5\\_our\\_practice\\_4.html](http://www.nationalreviewofmedicine.com/issue/special_sections/2008/practice_management/5_our_practice_4.html), accessed 3 June 2009.

[2] Randall Denley, "Family health teams need a checkup," *Ottawa Citizen*, 29 April 2008.

[3] Ibid.

[4] Solomon, "Solo practice becoming less profitable," and Denley, "Family health teams need a checkup."



# Family Health Teams: Compensation Schemes

- Family physicians in Family Health Teams are compensated using one of the following funding models:
- **Blended Capitation Model:**
  - Physicians receive a capitation payment (base payment per patient)
  - **PLUS** fee-for-service for non-enrolled patients
  - Premiums and Bonus incentives
- **Blended Salary Model:**
  - base salary (linked to patient enrolment) for the provision of comprehensive care, plus incentives, premiums and special payments
- **Blended Complement Model** (Rural and Northern Physician Group Agreement)
  - Isolated regions.
  - Based on the number of physicians in the group.
  - Incentives, premiums and special payments

# Family Health Teams: Electronic Medical Records Support

- The Ontario Ministry of Health and Long-Term Care and the Ontario Medical Association
- **Physician IT Program**
  - a comprehensive program of information technology
- FHT physicians are eligible to access an **investment fund** of **\$150 million** for information technology.

# Family Health Teams: Benefits from a Patient's Perspective

- Enrolment FHT
  - **access** to primary health care treatment on an **around-the-clock** basis.
- Regular office **hours** are provided
- Extended hours Monday through Thursday
- Nurse-staffed **Telephone Health Advisory Service**, advice outside of regular hours.
- **Access** to nurses and nurse practitioners, other health care professionals.
- **Compensation** scheme
  - preventative health care
  - chronic disease management
  - comprehensive services such as hospital and palliative care.

# Family Health Teams: Evaluation

- Family Health Teams appear to be, in **general**, quite popular and successful.
- The Ontario Medical Association is in **favour** of their continued use. [\[1\]](#)
- Health Council of Canada: **collaborative** primary health teams (such as FHTs) have demonstrated good results in the treatment of individuals with **chronic conditions**. [\[2\]](#)

[\[1\]](#) “Ontario’s Doctors Support Collaborative Care to Keep Patients Front and Centre.” *News Release*. 22 January 2009.

[\[2\]](#) Health Council of Canada, *Teams in Action: Primary Health Care Teams for Canadians*, April 2009.  
<http://www.healthcouncilcanada.ca/teamsinaction.pdf>.

# Family Health Teams Experience in Ontario

*Thank you.*

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