



If Primary Care Falls and There's No One Around to Hear It.....Does It Make a Sound?

By Duff Sprague, CEO

But we are around and it is making a sound. It's the sound of 32,000 area residents without a family doctor, a figure that the Ontario College of Family Physicians projects to grow to 63,000 by 2026.

How did we get here? It has taken years of neglect of primary care by successive governments, be it benign or intentional.

The number of Canadians supporting more privately funded healthcare services is growing. We are being convinced it is the single payer model of healthcare that is failing. Is it failing us or are we failing it? Is the care we were once so proud of suddenly malfunctioning because of a lack of corporate interest? I agree that our healthcare is in trouble but I believe that it's not the car, it's the driver. It is being mismanaged at the most senior levels.

Family medicine is the canary in the mineshaft. Millions of Ontarians are without a primary care provider. Family physicians and primary care nurse practitioners are an endangered species. Their value and the value of other clinicians in primary care has not been respected. All have many other better compensated employment opportunities. Family physicians with a well-established practice are retiring, closing the clinic doors with no replacement. This leaves thousands of area residents seeking a new provider. Fewer and fewer new family physicians are choosing to open comprehensive care practices, fewer nurse practitioners are wanting to practice on a primary care team.

There's a lesson to the south - the United States turns more and more public services over to the for profit sector - primary care, hospitals, prisons, even child protection agencies. Increasingly in the U.S. citizens are being categorized as either a shareholder or a commodity.

Family medicine supports a wide range of patients from prenatal care to end-of-life care, whether the patient has a specific health problem or managing chronic disease – it is undeniable that primary care providers have an extensive role in our health system. The breadth of care extends beyond physical health and encompasses mental and socioeconomic health, all of which influence a person's overall well-being. This is managed by a person's primary care team. In essence, this level of care is the grassroots of medicine.

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The current investments are not solution focused. Announcing more primary care teams in a province with a shrinking number of family physicians and nurse practitioners will not have the impact we need. The creation of more primary care teams will only work if primary care becomes a desirable practice choice for new graduates. Right now it isn't and the building of a medical school dedicated to family medicine will not provide a solution if those graduates choose, like many others, to be emergency physicians or hospitalists or specialize in areas like palliative care or sports medicine. Currently there are 108 vacancies in family medicine residences, further evidence that each year family medicine becomes less appealing.

Competitive compensation, reduced administrative tasks and team-based support will bring new graduates to primary care.

Our Family Health Team, with no base budget increase in 10 years and no wage increases in four years, is doing what we can with what we have. We run clinics for people without a family doctor through the *PFHT Health Clinic* dedicating some valuable nurse practitioner time and by supporting our community physicians to use even a small part of their limited time to the clinic.

Access for all Ontarians to family physicians and primary care teams, through our once cherished public system, will go a long way to help cure what ails us.