

Alberta

Implementing Family Care Clinics



December 5th, 2013

From Primary Care to Primary Health Care (PHC)

- Primary Health Care includes Primary Care plus:
 - Health Promotion and Prevention
 - Wellness
 - Social determinants of health
- Making the shift to PHC means that the delivery of care will have to evolve as well
- FCCs are a demonstration of how that shift will happen.

FCCs Will Support a Shift Towards a PHC Focus

FCCs provide an opportunity to:

- target health resources towards communities/population with “higher health needs”
- enhance integration across various sectors of the health and social services system
- provide greater continuity of care within clinics and within the broader health and social service systems.

Primary Health Care Delivery Models

Primary Care Networks	Family Care Clinics
<ul style="list-style-type: none">• Network of independently run family physician clinics funded for additional team members• More than 2,700 family physicians in Alberta are part of 41 PCNs• The top three services provided are complex/chronic conditions care, diabetes care, and health promotion and disease prevention	<ul style="list-style-type: none">• Grant-based primary health care delivery sites, supported by a multi-disciplinary team• Intended to focus on vulnerable communities , with deliberate linkages to social services• 3 Wave 1 FCCs are currently in operation in Edmonton, Calgary and Slave Lake

Goal & Objectives

Goal: To provide Albertans with access to primary health care when they need it, where they need it and from the appropriate service provider(s).

Objectives:

- Plan for services based on population health needs
- Manage timely access to care
- Increase emphasis on health promotion, disease and injury prevention, screening, self management and care of chronic diseases and complex needs
- Leverage a collaborative, interdisciplinary approach
- Improve coordination, continuity and integration across sectors
- Maintain accessible and efficient information systems
- Monitor outcomes and achieve efficient, high quality, care guided by evidence-informed practice

Key Milestones

- **October 2011:** Premier announces FCCs
- **April 2012:** Wave 1 FCCs; three sites open in East Edmonton, East Calgary and Slave Lake
- **June 2013:** 24 communities throughout the province identified for Wave 2 FCCs
- **November 2013:** Proposals for Wave 2 locations under review
- **December 2013:** Business Planning process begins

Wave 1 FCCs: Three Unique Sites

- **East Calgary FCC:**

- Serves all of East Calgary and lower North East Calgary, mainly urban population
- Complex/high needs population without regular PHC
- Significant number of new Canadians in the population served
- Located in existing health centre
- PCN and other relationships



Wave 1 FCCs: Three Unique Sites

- **East Edmonton FCC**
 - Serves inner city and urban Edmonton population, close to city core
 - High health needs and disadvantaged population



Wave 1 FCCs: Three Unique Sites

- **Slave Lake FCC:**

- Serves a rural population with a large First Nations population
- Part of the effort to rebuild the town after the fire of 2011
- A need for more comprehensive PHC services was identified
- Consolidated existing physician clinic with FCC staff
- Recruitment of all providers is an ongoing challenge



FCC Implementation

- After 18 months, a picture is emerging of what is happening at the three sites
- Performance measurement is key; we want to know that the services being provided are:
 - Meeting community needs;
 - Efficient and deliver high quality care; and
 - Deliver the desired outcomes.



Results from Year One

- **Access:**

- All sites seeing improvement in same day and Time to Third Next appointments
- All sites seeing increases in number of visits per week

- **Attachment:**

- Number of attached (informally enrolled) patients increasing over time

Results from Year One

- **Interdisciplinary Teams:**

- All sites have implemented effectiveness measures to help improve team based care
- At one site 7 of 10 of respondents “agreed” or “strongly agreed” that they are “able to work to the full scope of practice for their profession”

Results from Year One

- **Broader System Impacts:**
 - Noticeable change in ED usage in Slave Lake, other impacts being determined
- **Individual and Family Focus:**
 - Patients are involved in care planning, have supports and are happy with the care they receive

Challenges and Risks

- Sufficient time to plan and implement
- Recruitment of providers, especially NPs
- Physical space & location
- Reporting requirements
- Evaluation and access to data
- Determining critical features of new model
- Caseload and enrollment

Success Factors & Lessons Learned

- Leadership and Positive Relationships
- Engagement and Communication
- Recruitment and Workforce Development
- Infrastructure and IT
- Evaluation and Measurement
- Access



Key Successes

- Significant progress toward transformational change in practice and culture
- Inter-professional teams working toward full scope of practice
- Meeting PHC model objectives, including:
 - ✓ comprehensive services across lifespan
 - ✓ team mix and collaborative practice
 - ✓ extended hours

Areas for Additional Work

- Health promotion, disease and injury prevention
- Targeted lifestyle intervention - tobacco use, unhealthy eating, problem drug use, physical inactivity, weight management, unsafe sexual practices
- Patient Reported Outcome Measures (EQ5D or SF12) for complex chronic conditions
- IM/IT infrastructure to support information collection, individual and population health management, and measurement of effectiveness

Progress to Date on Wave 2

- Announcement by the Minister of Health on June 4th of 24 communities targeted for a FCC
- More than 180 groups and individuals expressed early interest in learning more about FCC development
- 21 proposals received from a mix of providers, community leaders and non profit organizations

Development Road Map - Progress



* It is expected that times will vary by each FCC
 ** Includes 2 months to complete Proposal, and 1 month for Alberta Health to review

Services to be Included - Wave 2 FCCs

- FCCs provide comprehensive, team based primary health care services, across the lifespan
- Services are tailored to meet the unique needs of a community, focusing on service gaps and priority needs
- Required services can be wholly or partially delivered through important linkages with other community service providers

Working with Wave 2 Proponents & Communities

- A wide variety of community members have been engaged in providing input into FCC planning for their community
- A need for flexibility has been demonstrated through listening and responding to many of the issues and concerns raised

Next Steps for Moving Forward

- Alberta Health will continue to work with our partners - AHS, providers, other ministries, health and social service organizations and communities
- We anticipate identifying further communities for a FCC

Thank You

