



Report of the President
Presented at the Annual Meeting of Members
by Dr. Glenn Brown, BSc, CCFP(EM), FCFP, MPHCCFP, FCFP
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During my tenure as OCFP president for the past two years, I had the privilege of meeting many members at conferences, around planning tables, or through email. Whether working in primary care, hospitals, long-term care, home and community care, or in research and academia, you shared your ideas for better meeting the needs of Ontario's patients and populations. Regardless of the forum or circumstance, my interaction with members has been a constant reminder of the dedication, generous spirit and vital work done within our profession.

At the same time, you shared that these are trying times for family medicine. Members are feeling the weight of growing expectations, with inequitable access to the resources and services needed to optimally manage your most complex and vulnerable patients; particularly, those living with mental illness, addictions and pain. This is coupled with the uncertainty that remains in our policy environment.

While we continued to work collaboratively to support the needs of our members, once again we did so in the absence of a physician services agreement. The lack of a negotiated settlement between the OMA and the Ministry of Health and Long-Term Care has led to binding arbitration. While the OCFP does not hold the negotiations mandate, we have and will continue our work to ensure the full scope and breadth of your role in caring for patients and families in the health system is recognized the way it should be. Ontario's family physicians deserve to be highly valued in the health system for delivering and leading collaborative care that improves patient outcomes, based on trusted and long-standing relationships.

The Board of Directors provides strategic direction, financial stewardship and organizational oversight to the OCFP's work. In that regard, it is my pleasure as President to share the following overview of key governance-related activities over the past year that we have undertaken on your behalf.

Our New Blueprint

In 2017, we widely consulted with members and stakeholders to inform the development of our new strategic plan. What we heard is that we need to stay true to our decades of strength in education, leadership, and research. And that we should intensify our advocacy focus – in particular, to assert the value of the family physician role in our health system.

The Board of Directors listened and incorporated these priorities in the OCFP's [*Strategic Plan 2018-2021*](#). The refreshed vision that guides our College is clear: *Family Physicians – Leaders for a Health Ontario*. To get there, we have committed to three broad priorities, grounded in our strengths of Education, Advocacy, Leadership and Research.

Whether that entails delivering relevant and practical continuing professional development, clinical tools and resources, promoting the value and rewards of family medicine, or advocating for your central

role in health reform, the OCFP's *Strategic Plan 2018-2021* builds on our tradition and commitment to ensuring we are delivering value to you throughout your years in practice.

I extend my sincere thanks to all of you who shared your views while at meetings or conferences, in emails, and through our member research. The input we gathered was invaluable as we considered our strategic directions and how best to meet your needs and provide value in tangible ways.

Please take a moment to read our three-year [strategic plan](#). It is our North Star and guides our work on your behalf for the next few years.

Shaping Policies that Impact Practice

These are challenging times for our profession. We are confronted with immediate issues that need different solutions – among them, timely access and after-hours care, and more paperwork, reports, and administration to keep our practices running. For many, it feels overwhelming. Particularly for our colleagues in rural and remote practices who have geographic and resource constraints.

As is often the case, policies meant to improve care can bring unintended consequences. Our profession is committed to the highest standards in the practice of medicine and to delivering the optimal care to our patients, yet we increasingly face more demands and expectations, all within stretched resources.

This past year, the OCFP worked with key partners to ensure that emerging policies impacting our work, whether stemming from regulatory agencies or government, were as effective as possible. With our members as our guide, we were active on several advocacy fronts, ensuring that you were best supported in your roles and able to deliver the highest quality care to your patients. Two cases in point:

- Along with the College of Family Physicians of Canada (CFPC) and the Society of Rural Physicians of Canada (SRPC), we worked with the College of Physicians and Surgeons of Ontario (CPSO) to amend their expectations document for family physicians intending to incorporate emergency medicine into their rural or remote practice. Although developed to provide more consistent guidance and support to physicians, the framework in fact added unnecessary hurdles to already challenging physician recruitment efforts in rural and remote areas. The revised framework reduced those hurdles, and now recognizes the experience family physicians receive in urban emergency departments as meeting the necessary criteria for emergency medicine in a rural practice. It also includes new graduates of a family medicine residency program as meeting the necessary criteria.
- The CPSO developed a draft policy to minimize the potential for breakdowns in continuity of care that may negatively impact patient outcomes. Family physicians are drivers of cohesion and continuity in our health system; given the potential impact of this policy on your day-to-day practice, the OCFP led its own consultation with members in September and October. Your feedback is shaping our organizational response to the CPSO, which will reflect your practice realities and offer suggestions for improvement. We are working closely with the Ontario Medical Association and the OMA's Section on General and Family Practice to identify areas of alignment in developing our response.

It is through productive and respectful collaboration with our colleagues, patients and partners that we can achieve the best outcomes from new policies. That is and will continue to be a focus of the OCFP's work.

Leading the Change in Primary Care

How do family physicians continue to lead as primary care evolves and is being delivered by more and more providers?

Our line of sight continues to be focused on driving awareness and adoption of the Patient's Medical Home (PMH), based on the principles developed by our national College. Simply put, in the PMH vision, family physicians have more access to team-based care and are able to provide more coordinated, comprehensive and accessible service to their patients.

Although gaining some traction, the PMH concept for primary care delivery remains largely misunderstood by providers and decision-makers alike. While many family doctors provide continuity and comprehensive care regardless of their practice model, the PMH model can help to enhance care through its key features.

Our efforts this past year focused on ways to make the PMH concept more of a reality. First, by creating tools to support family physicians wishing to move towards the PMH principles of care. And second, by beginning work – initiated at our stakeholder symposium – that sets out the case with government for more systematic PMH implementation in Ontario. Key to this will be using the right measures to showcase the clear benefits of team-based care, for health providers, patients and our health system.

Advocating for Your Vital Role

The election of a new government in Ontario was arguably the most significant development in health care this past year. Much of the election spotlight was on important issues, such as hallway medicine, long-term care beds, mental health support, and the long-awaited physician services agreement. Noticeably absent, however, was any meaningful discussion about primary care and family medicine.

It is well documented that a robust primary care sector, anchored by family physicians, supports stronger front-line care, a better patient experience, and creates efficiencies in the system. Despite this, our role as family doctor is shifting and, at times, is not being valued as the backbone of a well-functioning health system.

In the lead-up to the election, CEO Leanne Clarke and I met with MPPs from all political parties to underscore the importance of family physician leadership in well-functioning health systems. We also discussed the need for more supports to help you manage your complex and vulnerable patients, and to engage in practice improvement. And we conveyed the need to ensure family physicians can practice in models that include features of the Patient's Medical Home, such as equitable access to team-based resources.

We also put the political parties to the test, asking how they would support family physicians, if elected. The Leaders Health Care Debate we co-hosted with the Ontario Medical Association, Association of Family Health Teams of Ontario and other partners, and our online Election Snapshot outlining the healthcare platforms, were informative exercises and further highlighted the need to ensure your vital role in our health system is properly recognized and supported.

For decades, the OCFP has served as a trusted advisor to Ontario governments of all political stripes. While still early days, what is clear is that this government is looking to front-line providers for ideas on delivering high-quality care to patients and families, in an efficient and sustainable system. We welcome this focus, which aligns with our mission and vision for a health system responsive to the needs of patients and families, delivered through a medical home where there is continuity of care.

We know from our Board and members that changes are needed; many family physicians are in leadership roles and ready to work on solutions. We began that work in earnest this past September at our stakeholder symposium we called 'OCFP Renew'. Among the guest speakers was Dr. Rueben Devlin, Chair & Special Advisor of the Premier's Council on Improving Healthcare & Ending Hallway Medicine, who shared insights on the government's health agenda.

Our symposium marked the beginning of a series of OCFP-facilitated conversations that will identify the central ways family medicine can advance health reform for the citizens of Ontario. We look forward to continued dialogue with Dr. Devlin, as well as our upcoming meetings with elected and non-elected officials. In those meetings, we will reinforce our support for reforms that refocus attention to the patient's journey and the essential role family physicians play in that process.

Maintaining our Collaborative Mindset

In addition to informing and guiding policy and health system planning, the OCFP is committed to its traditional role as an honest broker and effective voice representing family physicians at provincial and regional planning tables. Staff and Board members continued to actively engage our primary care partners to foster greater collaboration and coordination of high-quality, integrated health care.

Of note, it was a year in which we strengthened collaboration with key partner organizations – such as the OMA's Section on General and Family Practice and the Association of Family Health Teams of Ontario – to provide a more cohesive voice for members on areas of shared priority.

Our activities also included:

- Attending regular meetings as part of the Council of Ontario Faculties of Medicine: Family Medicine. This is an essential forum for keeping connected to Ontario's medical schools and for sharing updates about policies affecting family medicine – from medical students to residents to practice. I want to thank the Chairs for their ongoing engagement with the OCFP. This is an essential partnership for the College.
- Holding regular calls with the Chair of the LHIN CEOs for primary care to share updates in family medicine and more broadly, health policy issues affecting family medicine and primary care.

This spirit of collaboration will continue to be a driving force throughout all of the OCFP's work, ensuring we are maximizing impact through joint efforts.

Delivering Practical and High-Quality Programs

At the core of our work is ensuring you have the tools, resources and supports you need to lead and practice high-quality medicine in a healthy profession.

In addition to our long-standing networks focused on mental health, and pain and addictions, the OCFP's Collaborative Mentoring Networks took a big step forward this year with expanded funding from the Ministry of Health and Long-Term Care to grow our existing networks and create new ones. The OCFP now has new networks and online communities of practice for palliative/end-of-life care and medical assistance in dying (MAiD), as well as those geared to physicians seeking support in rural medicine, leadership development and in their early years of practice.

Our members' ability to manage complex patient care issues by building capacity in primary care is good for patients, providers and the health system. Equally important is that you do so within a profession that is rewarding – because your wellbeing is essential, and it impacts your patients too. That is why, starting with the Early Years in Practice (EYP) network, we focused on identifying ways to better support the practice-driven needs of younger physicians. Our first initiative was a podcast series, covering topics such as wellness and financial management, with more than 1,000 members downloading the series to date.

With the CFPC's Family Medicine Forum in Toronto, and thus an off year for our Annual Scientific Assembly, we decided to support members with an Ontario conference option in 2018. In June, we held the OCFP's inaugural STEP (Sharing Tools for Excellence in Practice) conference, modelled after the Alberta College of Family Physicians' successful PEIP (Practical Evidence for Informed Practice) conference. Thanks to the in-kind webcast technology support provided by the Ontario Telemedicine Network, our first-ever live-streaming option drew in a significant number of attendees and is a cost-effective offering for us to consider moving forward – both for the OCFP and members.

Whether focused on clinical and practice-driven mentorship, adolescent addictions, mood disorders and more, we benefit tremendously from our very capable OCFP faculty and committee members who develop and lead our conferences, small group workshops and self-learning online. We extend our appreciation to all of our education partners, and to all of you who support these offerings.

Results of our Governance Renewal

When the OCFP's revised bylaws were approved in 2015, I became the first President of the organization to sit for two consecutive years. At that time, we agreed to monitor the effect of this change on the College and on the role. Over the last year, the Board of Directors assessed this impact and determined that the two-year Presidency should continue, given the benefits it provides in terms of relationship building, continuity and momentum.

While the new Board composition brings a diverse set of skills and abilities, practice models, years of practice and geographies, we are mindful of ensuring we can benefit from organizational perspectives as well. Our symposium 'OCFP Renew' and impending series of conversations is a key avenue for stakeholder input. As noted earlier in this Report, I also participated in several ongoing meetings with our key partners in primary care as OCFP President.

Moving Forward

The OCFP is dedicated to supporting you so you can thrive in your profession, best care for your patients and play a leading role in shaping the future of Ontario's healthcare system. While there will be challenges ahead, we have a golden opportunity to continue to lead through the uncertainty. Indeed, we can draw strength from the fact that many key reforms in years past have been led by family

physicians. With a new government in place, we are faced with another critical moment to bring forth our expertise and experience as leaders on the frontlines of care, contributing to solutions and being part of needed change.

With our new strategic plan as our guide, we will advocate for your vital role in delivering comprehensive and collaborative care. We will be a strong and influential organizational voice so that your work and impact is valued and well supported. And we will foster your leadership as contributors to practice, community and system level change.

We look forward to staying connected as together we build an even stronger, more rewarding profession. Equipped with a solid foundation, the OCFP will continue to be a champion for our family physician members in Ontario.

With Gratitude

I have sincerely appreciated the privilege of being your president these past two years. As I enter the ranks of past presidents, I wish to extend my gratitude to the many individuals who made my tenure such an enjoyable and rewarding experience: to my colleagues on the OCFP Board for your invaluable contributions and the wisdom you shared in every interaction; to the remarkable and dedicated OCFP staff for your hard work and shared passion for members; to our faculty and committee members, mentors and advisors for the generosity of your time and expert insights in shaping the OCFP's offerings; to our partners in primary care for your energy and collaborative spirit. And most importantly, to you, our members, who remind us daily how fortunate we are to work within the profession of family medicine, and on your behalf.

I also want to take this opportunity to recognize Ms. Leanne Clarke, CEO, for the valuable work she does every day on behalf of members, and for her ongoing support to staff and the OCFP Board. She is a tremendous asset to the organization and we are grateful for her leadership.

To my Board colleague Dr. Jennifer Young, I wish you the very best as our 62nd President. Your passion for the profession of family medicine is evident and will serve you well in guiding the organization's important work on behalf of our 13,500 members.

With gratitude,



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President