



Report of the President
Presented at the Annual Meeting of Members
by Dr. Glenn Brown, BSc, CCFP(EM), FCFP, MPHCCFP, FCFP
on November 23, 2017

As family physicians, we play a vital role in the delivery of primary care to millions of Ontario patients. Their care and wellbeing are our responsibility, and the foundation of what it means to practice family medicine.

As I complete my first year as OCFP President, I have had the pleasure of meeting many members practising across the province. Whether as teachers, researchers, health system leaders, community family physicians or the countless other ways you work to deliver compassionate, patient-centered care, it is a privilege to see first-hand the abundant skills and talents within our profession. I have appreciated hearing your perspectives on the daily pressures you face in our health system, and where you see opportunities to enhance family practice for the benefit of your patients.

What is clear is this: while there is great pride and satisfaction in our work, we practise in an increasingly challenging environment. Our population is getting older and the patients we see have more complex needs; there are gaps in effectively servicing certain communities, especially indigenous peoples and those living in poverty or who are marginalized; system-level obstacles impede our ability to meet the health needs of some patients, particularly in mental health, addictions and pain, and there are gaps in access to community-based palliative and end-of-life care. And we continue to operate within a policy environment that remains in flux.

Despite the challenges, I see a profession that remains steadfastly focused and united in our vow to deliver the highest level of patient care possible. Now more than ever, we have an opportunity to drive the vision of what primary care should look like – based on the needs of our population, ensuring patients who need care can access it in a timely way, grounded in the caring and collective wisdom of family physicians, and supported by appropriate models and funding. As family physicians, we can and indeed are well equipped to help shape the changing landscape of family medicine to ensure every Ontarian receives high-quality, coordinated, comprehensive and continuing care. This is central to the vision of the Ontario College of Family Physicians.

Your College – the OCFP – has a mandate to support you, and ultimately your patients, anchored by our strategic pillars in Education, Leadership, Research and Advocacy. The Board of Directors provides strategic direction, financial stewardship and organizational oversight for the OCFP and it is you, our members that are central to the work we do. 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.

Delivering Practical and High-Quality Programs

OCFP programs are designed to support members in delivering high-quality primary care, and it has been a year of progress on a number of important fronts. Most notably was the tremendous boost provided to an important and unique OCFP initiative – the Collaborative Mentoring Networks.

In late August, we received the good news that the Ministry of Health and Long-Term Care (MOHLTC) was expanding its long-standing support for the OCFP's mentoring networks in primary care. The total three-year commitment is just over \$4.7 million to expand our work with the Collaborative Mental Health Network (CMHN) and Medical Mentoring for Addictions and Pain (MMAP), and establish new networks for Medical Assistance in Dying/Palliative and End-of-Life Care, Early Years in Practice, Leadership and Rural Medicine.

For more than 15 years, the Collaborative Mentoring Networks have helped address identified needs in the health system by linking family physician mentees with mentors to enhance the delivery of care. We are grateful to our partners and for the new funding enabling us to expand this meaningful program, which has been shown to improve the capacity and confidence of family physicians in managing increasingly complex patients in primary care.

In addition to the upcoming network for Early Years in Practice (EYP), the OCFP launched a new committee this year focused on identifying ways to better support the clinical and practice-driven needs of EYP physicians. As with other OCFP committees, we greatly appreciate the insights and contributions of these committee members on how best to support family physicians in the delivery of excellent patient care.

Continuing education for family physicians is an important function of the OCFP and, as further detailed in the *Report of the CEO*, the organization works hard to ensure our programs support your learning needs. The popular *Practicing Wisely* program is a compelling example of the value-add educational offerings provided by our College. Aligned closely with the *Choosing Wisely Canada* campaign, it is focused on reducing unnecessary testing and treatment using the latest evidence and tools from diverse sources. We are grateful for the two-year funding from College of Family Physicians of Canada which, along with OCFP leadership, has enabled the program to expand to an additional five provinces.

Whether focused on mentorship in complex areas, treating poverty, musculoskeletal joint assessment, osteoporosis 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 them and to all of you who support these programs by taking our courses.

Strategic Planning Underway

What you as family physicians tell us shapes our work for your College, across the four pillars of our strategic focus: Education; Leadership; Research; and Advocacy.

We are in the midst of strategic planning for 2018, informed through a number of key activities such as member research completed earlier this year and stakeholder consultation conducted this fall. From issues and opportunities affecting family medicine and health care more broadly, to how the OCFP can best support you in your evolving role as a family physician, the input we are gathering is invaluable as we work to best meet your needs and those of your patients.

The board will finalize and approve the new strategic plan for April 1, 2018, and we look forward to sharing this with the membership at that time

Leading the Change in Primary Care

As the OCFP collaboratively builds its next strategic plan, a key imperative is ensuring family physicians have a voice and help lead the needed change efforts in primary care.

Over the past year, we continued to advocate for the importance of family physicians in an evolving health system, and also collaborate with other primary care organizations to advance the vision of the Patient's Medical Home. In this vision, every family practice across Canada offers the medical care that Canadians want — seamless care that is centred on individual patients' needs, within their community, throughout every stage of life, and integrated with other health services. Through this vision, the discipline of family medicine is strengthened.

It is encouraging to see that the concept of the Patient's Medical Home is gaining traction in Ontario, and the OCFP is a key partner in this primary care transformation effort. As the focus on system transformation intensifies nationwide, the focus here in Ontario is the ongoing devolution of health care to the LHINs, with sub-regions now focusing on population-based approaches for smaller geographies.

Over the past year, working collaboratively with organizations such as the Ontario Medical Association's Section on General and Family Practice and the Association of Family Health Teams of Ontario, we have had input at appropriate tables to ensure the PMH vision is at the forefront of planning and delivery. Experience from other jurisdictions, both in Canada and internationally, shows that successful primary care transformation requires family physician engagement, and it is gratifying to see that many of our colleagues are taking on critical leadership positions.

Collaborating to Improve Practice

In addition to informing and guiding policy and planning for primary care transformation initiatives, OCFP staff and Board members are actively engaging our primary care partners to foster greater collaboration and coordination of high-quality, integrated health care.

Our engagement activity, outlined further in the *Report of the CEO*, includes:

- Working on a joint table with other partners, led by Health Quality Ontario, to ensure supports and resources are available to family physicians caring for patients with chronic pain, and providing input into HQO's pending release of opioid-specific Primary Care Practice Reports. Key among the supports is the OCFP's mentoring networks in Medical Mentoring in Addictions and Pain.
- Discussing shared priorities through ongoing meetings with the Association of Family Health Teams of Ontario and the OMA's Section on General and Family Practice. The SGFP, AFHTO and the OCFP were invited to present to the OMA Negotiations Committee and I was very pleased to see a shared and constructive voice on many issues of common interest. Our discussions have also included raising awareness of the programs and tools available to family physicians in managing their patients' chronic pain (as above), and strengthening the potential value of the new Primary Care Practice Reports that support practice improvement for learning.
- Participating in the 'Family Medicine: Council of Ontario Faculties of Medicine' meetings, which bring together the Chairs of Ontario's six medical schools with the OCFP to discuss priority issues

in family medicine and more broadly, health policy issues affecting family medicine and primary care.

- Discussing with the Ontario Ministry of Health and Long-Term Care better resourcing and supports for family physicians working in the Sioux Lookout Zone and Weeneebayko Area Health Authority, based on a needs assessment among family physicians working in the area.

While we continue to work collaboratively to support the needs of our membership, we are also acutely aware that uncertainty in our practice environment remains. Ontario doctors are still without a physician services agreement, and any further contract disputes with the government will now lead to binding arbitration. This provides for a fair, independent process and is a positive first step towards renewed discussions for a new physician services agreement.

In our communications and meetings with primary care partners, the OCFP consistently presents the need for the Ministry of Health and Long-Term Care and the Ontario Medical Association, through their negotiations mandates, to reach a negotiated agreement.

It is through productive, respectful partnerships and collaborations with our colleagues, our patients, and our partners including the LHINs and the Ministry of Health and Long-Term Care that we can move forward and achieve what is best for patients and physicians. That is and will continue to be a focus across our work.

Governance Renewal and New CEO

As a result of the OCFP's revised bylaws approved in 2015, I am the first President of the organization to sit for two consecutive years. At the time the bylaws were approved, we agreed to monitor the effect of this change on the College and on the role. Over the coming year, the Board of Directors will assess this impact and determine whether the two-year Presidency should continue.

A key role of the Board is to select its leadership, both for the Board itself and also for the organization. I am pleased to share that changes made through the governance renewal process and subsequent policies are yielding positive results. As one example, we now have a more sophisticated recruitment process to select/elect new Directors, and the Governance Committee will look forward to reporting on recent and successful recruitment efforts as part of its update today. Our Board members represent our broader membership, bringing a diverse set of skills and abilities, practice models, years of practice, and geographies.

While the Governance Committee was tasked with recruiting new Directors this year, the Executive Committee was recruiting a new CEO. Jessica Hill announced her retirement in March of this year. I want to express my gratitude to Ms. Hill for her leadership and contributions to the College over the last four years. She was a tireless champion for the role of family physicians in primary care and committed to ensuring a strong foundation for the organization to deliver on its mandate to members. The Executive Committee, along with Dr. Nelson Chan, formed a Hiring Committee responsible for recruiting her replacement. The recruitment process was comprehensive, open and transparent, and a number of strong candidates were interviewed. The Hiring Committee recommended and the Board approved Ms. Leanne Clarke's appointment as the OCFP's new CEO. Ms. Clarke officially assumed the leadership of the College on July 17, 2017, and we are fortunate to have someone with her experience leading the OCFP team as they work to serve and deliver value to the membership.

Moving Forward

Despite the challenges we face as family physicians in Ontario today, I am excited about the work ahead, and embracing the new opportunities before us to lead the changes we need in family medicine and in primary care. As your College President, and along with our Board and staff, we will continue to listen to your concerns and ideas, and share your experiences in ways that will enrich conversations at the system level. We will find new ways to engage with you, to celebrate your successes and to share innovative initiatives. Together, we will enhance the system for our patients and for all of us as family physicians who are working to address their needs and coordinate their care.

With Gratitude

I am proud to be a family physician and to stand among colleagues who inspire me with their commitment to family medicine. We must not lose sight of the countless contributions, both big and small, that family physicians make every day to improve compassionate care and to fulfill our CanMEDS role well beyond the Family Medicine Expert. As this first year of my presidency draws to a close, I would like to thank the Board for your wisdom and insights. We are able to function effectively thanks to our staff support.

I would also like to recognize the numerous family physicians who work with the OCFP as faculty, mentors, committee members and advisors. The old adage of 'if you want something done, get a busy person to do it' rings true given the many hats I see most of you wearing. In particular, I want to thank Dr. Sarah-Lynn Newbery who will be stepping down from the OCFP Board after this meeting. Like the Past Presidents before her, Dr. Newbery has made a significant impact on the OCFP, and I look forward to her continuing to provide her wisdom to our College.

With gratitude,

A handwritten signature in blue ink, appearing to read "Glenn Brown", enclosed in a thin black rectangular border.

Glenn Brown, BSc, CCFP (EM), FCFP, MPH
President