



**February 20, 2013**

**A Message from the ACFP President to Alberta Family Doctors**

Dear Colleagues:

**The Patient Voice**

On January 22 2013 the Health Quality Council of Alberta, released its 2012 survey ***Satisfaction and Experience with Health Care Services: A Survey Of Albertans***. In this survey, Albertans reported high levels of satisfaction with the interactions with their family physicians and in fact, was one of the highest ratings within the report looking at the health system in Alberta. This is something that family physicians should be proud of.

Our patients tend to be our strongest advocates and we should stop and listen to them. In the words of Sir William Osler, "*Listen to your patient, he is telling you the diagnosis.*" This does not just apply to our everyday encounters; it applies to the transformation of primary health care that is occurring in the province right now. Our patients, their families and the communities in which we live and serve, have a wealth of ideas and suggestions on what they see as important in their health care system, and it is important that we hear them.

The ACFP recently participated in the AMA's Primary Care Summit and had the opportunity to listen to patient needs and wishes. The discussions were reassuring. The consensus of the group —both physicians and patients— was that they not only want a system that addresses access, but also continuity and comprehensive care.

Patients value the relationship that they have with their family physician and the team that works with them. What is needed is a system that allows patients and physicians to navigate, track and trace relevant information. The system should provide the right member of the health care team at the right time, and integrate both with community services and our speciality services in a smooth and integrated fashion.

Most agreed that at the end of the day, what we call the model of care is not critical. What is critical is that the models in place are effectively designed, understood, resourced, evaluated and refined as needed over time. Successful models currently exist. Successful practices and systems within models exist. Alberta needs to expedite the change process by recognizing successes and building from there.

**The ACFP, Primary Health Care, FCCs and the PCN Evolution in Alberta**

Alberta Health seems to have refocused their work in Primary Health Care to include a Primary Care Network Evolution (PCNE) or PCN 2.0. In a meeting with the Ministry of Health, Primary Care Alliance (a committee of the AMA), PCN Leads, the ACFP and AHS on January 16, the Minister tasked the physician based group to come up with a project charter and a detailed plan to move the Primary Care Networks forward.

Guiding principles are being discussed that will support the PCN Evolution. The task is daunting but necessary and this group is ready and willing to make it happen. This is an opportunity to inject physician input into the plan to formalize an efficient evolution of Primary Care Networks. As we meet with multiple organizations and thought leaders, it has become clear that the common goal of all stakeholder groups is to provide a home for all Albertans in primary health care. The key to the success of the evolution is the engagement physicians and other stakeholders in the process. Please get engaged, stay informed and advocate locally for positive change as the process unfolds.

In addition to the PCN Evolution to support improved access to quality care, the Family Care Clinic Application Kit (Wave 1) focuses on high needs areas where a community or AHS-led model would be appropriate. The kit was released in late December to stakeholder groups for input. The ACFP provided a comprehensive response ([ACFP Response to Proposed FCC Application Kit](#)) to the kit, citing areas where the requirements of the community and AHS FCCs aligned with the medical home model and also where it fell short.

Though the premise and goals and objectives of the Family Care Clinics seem very similar to CFPC PMH, there will be challenges with the implementation schedule; governance structure; accountability; remuneration issues for all providers; as well, there is a lack of understanding of the fundamental, longitudinal relationship between family physicians and patients. A new draft of the kit will be released in the weeks ahead and it is hoped that the input that was received will have been considered.

And finally, as we move on in a time of great uncertainty in the development of primary care, it is important to reflect on the importance of our work as family physicians and the future of family medicine. In Sir William Osler's words:

*"It cannot be too often or too forcibly brought home to us that the hope of the profession is with the men (and women) who do its daily work in general practice"*

The contributions that you make to the health of your communities every day is noteworthy and is the bedrock of the health care system. Our patients know this and want us to preserve this. The time is now to be leaders in the evolution of primary health care and to protect what is valued in family practice.

Sincerely,



Cathy Scrimshaw, MD, CCFP, FCFP  
President  
Alberta College of Family Physicians