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patientsmedicalhome.ca/evidence

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INTRODUCTION

The Patient's Medical Home (PMH) is the College of Family Physicians of Canada (CFPC)'s vision for the future of family practice in Canada. To assess how aligning with the PMH vision affects the provision of care in family practices, a comprehensive literature review was performed using various databases such as PubMed, MEDLINE, and Global Health covering September 2000 through September 2019.*

For this literature review, the search used both general terms related to interprofessional health care reform in Canada and specific terms about proximal measures of health – such as visits to the emergency department, access to care, quality of care, and health care costs – to narrow the search results. A hand search of references cited in the studies was also conducted.

The results indicate that aligning with PMH principles enhances access to care and increases patient and provider satisfaction without raising health care costs.¹⁻³

*The full list of references the literature review produced is available upon request.

ENHANCED ACCESS TO AND COORDINATION OF CARE

Team based care models enhance patient access to primary care through:



OPEN/SAME-DAY SCHEDULING



EXTENDED HOURS



TECHNOLOGICAL INNOVATION INCLUDING TELEMEDICINE^{1 5}

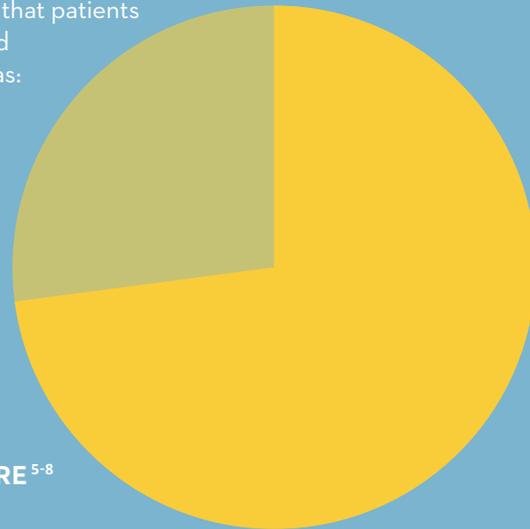
In the review, 73 per cent of the relevant articles (22 out of 30) found that patients cared for by a team reported benefits of team care, such as:

GREATER ACCESS TO CARE

REDUCED WAIT TIMES

ENHANCED CARE COORDINATION

BETTER DELIVERY OF PATIENT CENTRED CARE⁵⁻⁸



79%

of Ontario Family Health Team patients surveyed reported they would probably or definitely be able to schedule same day appointments.⁸

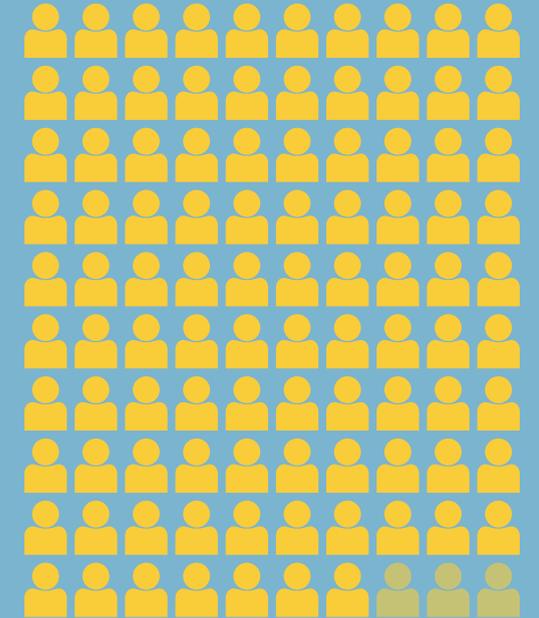
In a study of TIP Telemedicine IMPACT (Interprofessional Model of Practice for Aging and Complex Treatments) Plus in Toronto, Ontario:

97%

of patient survey participants reported that active collaboration with physicians made them hopeful that their chronic conditions would improve.

97%

of team members surveyed said the collaborative approach provided an effective way to develop care plans for patients with complex needs.⁵



DATA FOR CANADA FROM THE 2019 COMMONWEALTH FUND INTERNATIONAL HEALTH POLICY SURVEY OF PRIMARY CARE PHYSICIANS FOUND THAT COMPARED WITH SOLO PRACTICES,

GROUP PRACTICES ARE MORE LIKELY TO:



Offer weekend appointments



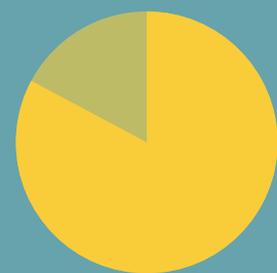
Have interprofessional teams manage patients with chronic conditions



Allow patients to book appointments online⁹

INCREASED PATIENT AND PROVIDER SATISFACTION

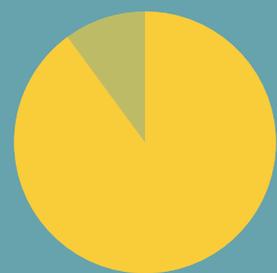
In team based care, physicians can shift tasks to other health professionals to optimize a team's capacity and produce greater satisfaction for both care providers and patients.^{6,8,10-14}



SATISFIED WITH CARE COORDINATION:

83%

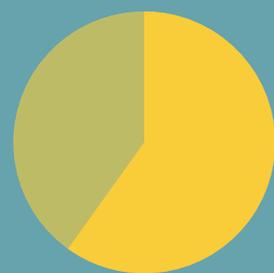
of the articles (40 out of 48 relevant studies) reported high levels of patient and provider satisfaction with the coordination of care in an interprofessional health care model.^{6,10,15}



RECEIVED CONSISTENT CARE FROM DIFFERENT PROVIDERS:

89%

of patients in an Ontario survey reported receiving consistent information from different providers within the interprofessional team and 96 per cent felt their medical records would probably or definitely be available to their providers for review during appointments.⁸



VIEWED PRACTICE TRANSFORMATIONS POSITIVELY:

60%

of community based physicians in a New York survey reported being somewhat or very satisfied with their practice transformations that were designed to align with PMH principles.¹⁶

TOP FOUR BENEFITS OF TEAM-BASED CARE

DESCRIBED BY PATIENTS IN A SURVEY CONDUCTED IN FIVE FAMILY MEDICINE ACADEMIC TEACHING CLINICS IN ALBERTA:



Having access to a wide range of health professionals

(72 per cent)



Gaining a better understanding of their medical conditions

(68 per cent)



Improving their ability to manage their own conditions

(64 per cent)



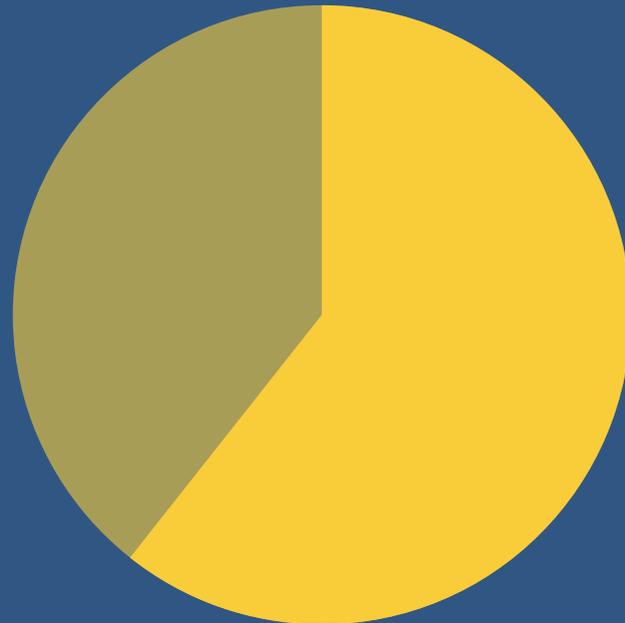
Having enough time with their providers to discuss health questions during their visits

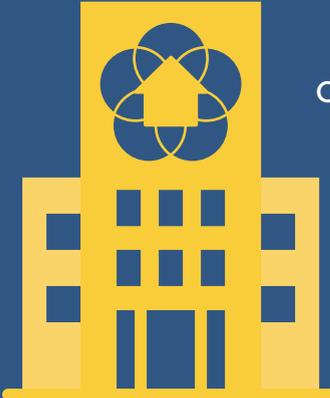
(55 per cent)⁶

REDUCED HEALTH CARE COSTS

In 61 per cent of the articles (19 out of 31 relevant studies), PMH aligned practices were found to lower health care costs. This is achieved by:

-  PROVIDING HIGHER QUALITY OF CARE WITHOUT INCREASING COSTS
-  SUPPORTING PATIENT SELF MANAGEMENT
-  REDUCING EMERGENCY DEPARTMENT VISITS AND HOSPITAL READMISSIONS ^{5,6,17 20}

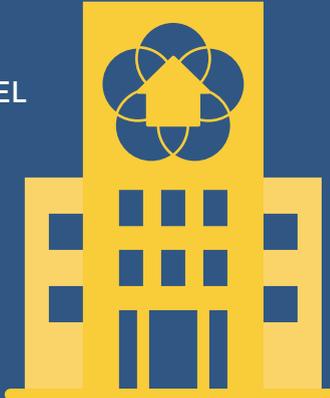




TWO PMH-ALIGNED CLINICS USING A MOSTLY CAPITATION-BASED ALTERNATIVE FUNDING MODEL

SAVED THE ALBERTA HEALTH CARE SYSTEM \$120 MILLION

OVER THE PAST 10 YEARS ²⁰



INTERPROFESSIONAL TEAMS

PATIENTS REPORTED THAT RECEIVING CARE FROM PHYSICIANS AFFILIATED WITH INTERPROFESSIONAL TEAMS IN ALBERTA LED TO FEWER:



The average cost for 40 patients in the TIP intervention in Toronto was 22 per cent less than a one day hospital admission of one patient (\$854 versus \$1,088).⁵

Patient interactions with family physicians working in Patient Centered Medical Home settings in Connecticut (43 physicians) resulted in four fewer patient visits to the emergency room per year on average, compared with peers working in control practices (24 physicians), which saved the health care system about USD \$1,900 in lower emergency department costs, per physician, per year.¹⁹

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