

# Provincial Integrated Primary Care Profiles: Documenting the integration of primary and community services in Canada

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## MOTIVATION



Comprehensive primary care management of patient populations with complex care needs requires social services, public health services and community supports



Significant public investments and reforms since 2000 resulted in provincial innovations in integration across the health to social care continuum



No cross-jurisdictional description of the governance policy context for integration of social and primary medical care services

## OBJECTIVE AND METHODS

Produce high-level summaries of provincial primary care governance, scope, delivery, integration with other services and reforms in a systematic, harmonized process



Search of the grey and peer-reviewed published literature to populate data collection templates using publicly-available resources



Validation of policy scans by key informants (provincial lead researchers and knowledge users)

## PRELIMINARY RESULTS AND LEARNINGS

### Challenges in documenting policy contexts across jurisdictions



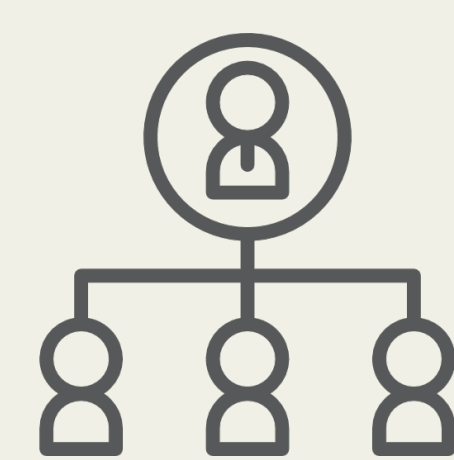
Policy information difficult to locate and information often not up-to-date

**Incomplete or obsolete public information in some provinces**

E.g. Alberta, Nova Scotia: key informant validation highlighted information gaps.

**Rapid pace of organizational change**

E.g. Québec: Internal organizational restructuring in the Ministry of Health and Social Services occurred during data collection. Two new directorates were created, one of which is a primary and emergency care directorate now separate from hospital and specialised services.



Capturing degree of 'shared governance' for primary care and essential services

Challenge of identifying appropriate level of analysis (e.g. Ministry, DM, ADM) in determining governance authority for primary care vs. other priority services.

Key informants warned that shared governance at the Ministry level does not necessarily imply coordination and communication across portfolios.

Formal mandates or accountability agreements for services coordination difficult to identify.



Differences in terminology and scope across provinces

Challenges of operationalizing conceptual distinction between "primary care" and "primary health care" into practice across provinces: Most provinces still anchored around primary care.

Variation in definitions and scope of services included across provinces poses challenges for multi-jurisdictional comparison.

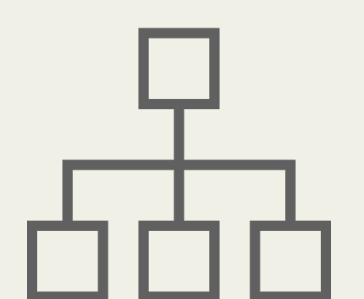
## CONTENT OF PROFILES



Provincial oversight for primary care



Scope of services within primary health care



Entities responsible: governance structure and extent of centralization



Primary care delivery models



Reforms to primary care

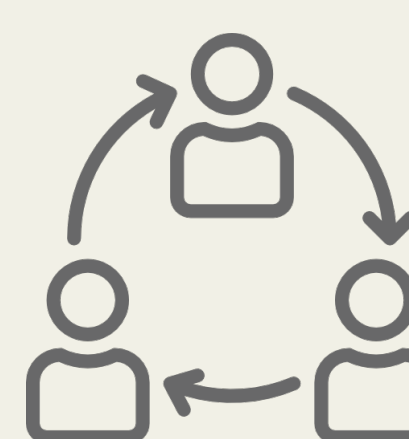
## RELEVANCE AND OPPORTUNITIES



Provincial profiles (n=10) provide essential context for future qualitative and quantitative analyses related to primary health care and integrated care



Need to establish mechanisms for documenting policy context using an evergreen framework



Gaps remain in understanding mechanisms for service coordination and accountability for these mechanisms

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