Promising Practices for Strengthening Primary Care

Integrated Virtual Care (IVC)

Healthcare Excellence Canada / Excellence en santé Canada

The challenge

Renfrew County, Ontario has a shortage of family doctors, leaving about 20 percent of residents without access to primary care, or their own family doctor.

The promising practice

Patients enrolled in Integrated Virtual Care (IVC) are given their own family doctor. Through IVC, patients have access to comprehensive, team-based primary care. The family doctor manages and provides the patient's care (primarily virtually), and connects the patient with other IVC family health team members who can provide in-person care as needed.

More about the promising practice

What services can be provided for IVC patients?

- A team of allied health professionals support a range of primary care services.
- Community paramedicine partnerships can enable at-home care for vulnerable people.

What are the benefits for doctors?

- Flexible, part-time hours.
- Provide longitudinal, comprehensive primary care virtually, from any location as permitted by provincial/territorial licensing and regulations.
- Administrative support provided by the family health team.
- Paid vacation time and sick benefits (available in some settings).

What are the benefits for the primary care team?

- Empower providers to work at full scope of practice and fosters team collaboration to provide safe, high quality team-based care.
- Enrol people who do not have their own family doctor without increasing workload for existing team doctors.
- Bring in additional doctors, allowing the team to provide more equitable access to primary care in their community.

How are the doctors paid?

- Funding models most conducive to IVC include blended salary and capitation models, as well as community health centres.

> **"In the past year after encountering emergency, palliative and routine health care through virtual contact with a physician, I do think if rural and remote communities are going to have continuous health care then virtual care is the way to go."**
>
> - IVC patient

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Example impacts

- Since 2021, the IVC program is in 3 team-based primary care clinics.
- 20 family doctors enrolled about 6,500 patients who did not have their own family doctor (as of June 30, 2024).
- 20 percent of IVC patients who self identified as smokers enrolled in a smoking cessation program.
- Patients have access to team-based primary care to address their care needs (e.g., health promotion and disease prevention).
- Improved provider and patient experiences.
- Reductions in avoidable emergency department visits and hospital readmissions.

Keys to success

- Leadership support (including Board, medical lead, admin lead and other staff).
- Work with the IVC family health team to identify people who do not have a family doctor.
- Establish a plan to recruit and enrol patients in IVC.
- Ensure there is at least one primary care doctor or nurse practitioner available to see patients in person when required.

Lessons learned

- Guide patients to understand and navigate IVC.
- Recruit physicians who are well suited to this type of work.
- Seek community, regional, and provincial partners to ensure that IVC meets patient and provider needs.
- Develop processes to support clinic administration (e.g., scheduling appointments).
- Use data on key performance indicators to track progress and indicate where improvements are needed.

How can I learn more?

Contact the organization.

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"IVC rivals in-person clinics in helping me provide top-tier healthcare access to my patients."

- IVC provider

Why was this summary created?

The Petawawa Centennial Family Health Centre participated in **Healthcare Excellence Canada's (HEC's) Strengthening Primary Care (SPC)** program.

SPC brought together 20 primary care organizations from across Canada to advance practices to improve access to safe, including culturally safe, team-based primary care.

This promising practice summary was co-produced with Petawawa Centennial Family Health Centre to help others learn about their work and generate discussion about how similar approaches could be adapted and applied elsewhere.

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