# ANNUAL REPORT 2023 - 2024

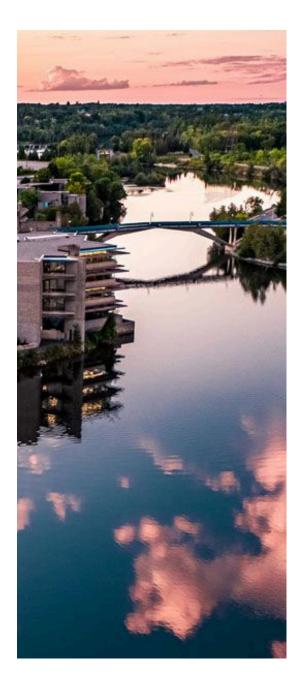




# LAND ACKNOWLEDGEMENT

We respectfully acknowledge that we are located in the traditional territory of the Michi Saagiig and Chippewa Nations, collectively known as the Williams Treaties First Nations, which include: Curve Lake, Hiawatha, Alderville, Scugog Island, Rama, Beausoleil, and Georgina Island First Nations. We respectfully acknowledge that the Williams Treaties First Nations are the stewards and caretakers of these lands and waters in perpetuity, and that they continue to maintain this responsibility to ensure their health and integrity for generations to come.

We recognize the unique history, culture and traditions of the many Indigenous Peoples with whom we share this time and space. We thank the Métis, the Inuit, and the many other First Nations people for their contributions and we commit to strengthen ties, serve your communities and responsibly honour all our relations.



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### LETTER FROM CHIEF EXECUTIVE OFFICER

When you have the pleasure, as I do, of working alongside a dedicated team of clinical and administrative staff, a visionary Board of Directors, and have an affiliation with a committed community of family physicians there should only be optimism for the years ahead. Unfortunately, even the best can only thrive in an environment that recognizes its value.

Our Board of Directors and Family Health Team staff are doing what we can to provide solutions despite years of underfunding in primary care. Family physicians are delaying retirements and despite years of no budget increase our Board and staff remain solution focused. This is evidenced by creatively developing two sites dedicated to serving those without a family physician or nurse practitioner and through team efforts, despite battling inflationary costs, to maintain a high standard of programs and services for our community. At every opportunity we advocate for all residents of our community, and as such we support the physicians who have started up Peterborough Street Medicine, provide space to the Peterborough Newcomer Health Clinic, engage with the new Community Health Centre and partner with the City and County in physician recruitment efforts. The physicians from Peterborough Street Medicine now have a representative on our Board of Directors.

In 2024, we will finalize our three-year Board of Directors Strategic Plan. The participation of physicians, Family Health Team staff and community partners has been overwhelming.

The Family Health Team and our partnership with family physicians is critical to the care of our community. The Ministry of Health must take responsibility for years of ignoring the crisis of the shrinking number of physicians



prepared to open a family practice. Freezing Family Health Team salaries for more than four years - and our base budgets for even longer has made us less and less appealing as a career to all clinical disciplines. This neglect has forced primary care to the precipice of collapsing.

The inconvenient truth is that 32,000 Peterborough and area residents are without a family doctor; a figure that the Ontario College of Family Physicians projects to grow to 63,000 by 2026. The Family Health Team is struggling to keep up with community needs.

The front door to health care in Ontario is broken and needs to be fixed. Hospitals are steadily becoming the first access point to healthcare for millions of Ontarians. This is an expensive and unacceptable way to manage healthcare.



It does not and cannot replace the continuity of care provided by a known and trusted provider. Access to comprehensive care with a family physician and a Family Health Team delivers less expensive, more compassionate care and keeps Ontarians out of hospital longer.

Family Health Teams are the canary in the coal mine. Millions of Ontarians are without a primary care provider with nothing but bandage solutions in sight. Family physicians and primary care teams are being left unsupported and behind all of the empty rhetoric from the province that is the reality. The promise of new primary care teams is meaningless without family physicians, nurse practitioners and other clinicians such as registered nurses, registered practical nurses, mental health professionals, pharmacists, dietitians and others prepared to join them.

Family physicians with a well-established practice are retiring and replacements cannot be found. Fewer and fewer new family medicine graduates are choosing to open comprehensive care practices, and fewer nurse practitioners, nurses, mental health, pharmacy and nutrition professionals are wanting to join a Family Health Team. With 25 years in the primary care sector, these are the most discouraging times I have seen. The good news is that it is possible for the government to reverse this trend. Some of the brightest minds in healthcare have provided the roadmap. Follow it.

The breadth of care we provide extends beyond physical health and encompasses mental and socioeconomic health, all of which influence a person's overall well-being. This is managed by a person's primary care team. In essence, this level of care is the grassroots of medicine.

The current investments are not solution focused. Announcing more primary care teams in a province with a shrinking number of family physicians and nurse practitioners will only be successful if primary care becomes a desirable practice choice for health professionals. The building of a new medical school dedicated to family medicine will not provide a solution if those graduates keep the current trend and become emergency physicians or hospitalists or specialize in areas like palliative care or sports medicine. The same holds true for increasing education opportunities for nurse practitioners and nurses.

Competitive compensation, reduced administrative tasks and team-based support will bring new graduates to primary care. This will encourage family physicians to practice longer, recent graduates to open a practice and other clinical professionals will make, once again, Family Health Teams an employer of choice.

Action has to be taken to support the alarming number of unattached patients in this community. Our citizens can no longer wait for the Ministry of Health to recognize the seriousness of the crisis in family medicine and primary care. We are using our limited resources to do as much as we can to offer support to the many thousands of area residents who need access to high-quality, in-person care from a family physician, nurse practitioner and a Family Health Team.

I want to be optimistic that it will not be necessary to highlight these issues again next year. We cannot continue to expect primary care to rely on just those who embody such a strong passion for family medicine and primary care that they ultimately disadvantage themselves. There will come a time when even those most passionate will leave primary care.



CHIEF EXECUTIVE OFFICER

### **THE BOARD OF** DIRECTORS



**Dr. Robert Neville** Chair Family Physician The Medical Centre FHO



Dr. William Shannon Family Physician Chemong FHO



**Dr. Michelle Fraser** Family Physician Partners in Pregnancy Clinic



Jane McDonald Vice-Chair Patient & Family Advisory Council



Dr. Vanita Lokanathan Family Physician Greater Peterborough FHO



Dr. John Beamish Non-Voting Family Physician Peterborough Street Medicine



**Duff Sprague** Non-Voting Chief Executive Officer PFHT



**Aaron Anderson** Legal Expertise Community Member



**Dr. Lucas Bowley** Family Physician Peterborough Community FHO



**Shannon Hinton** Non-Voting Pharmacist | Employee **Council Representative** PFHT



Larry Stinson Treasurer Peterborough Public Health



Dr. Alex Atfield Family Physician The Peterborough Clinic FHO



Maria O'Grady Non-Voting Recorder PFHT



Mike VandenBroek Non-Voting **Director of Operations** PFHT



PETERBOROUGH FAMILY HEALTH TEAM | ANNUAL REPORT 2023-24

# **STRATEGIC PLANNING**

Over the last six months, the Peterborough Family Health Team has collaborated with local consultants to create the next three-year Board of Directors Strategic Plan. The aim of this document is to cultivate a strategy that supports family physicians and our interprofessional healthcare providers to deliver the best care possible. While no base budget increase in over a decade requires that we give priority to partnering with family physicians and their patients, we have and will continue to use ingenuity in finding ways to serve the broader community within our limited resources.

Primary healthcare encompasses all elements of ones health and well-being; therefore, it is imperative to prioritize the highest needs of the community, as well as Peterborough's primary care providers and family physicians. This will contribute to improved health outcomes as a whole.

The upcoming Strategic Plan is the culmination of thorough research and stakeholder engagement that will articulate the highest demands in our city and county. The strategy will assist to mitigate the lack off access to care, support the family physicians and their patients, and advocate for the primary healthcare teams.

We look forward to seeing the completion of the process in September, 2024.



### MISSION, VISION, & VALUES

The Mission, Vision, and Values perpetually capture the core essence of primary healthcare; however, with an evolving health system and exacerbated healthcare crisis, the new Strategic Plan will reflect a more current mission, vision, and values.

As it stands, our current mission, vision and values are as follows:

#### Mission

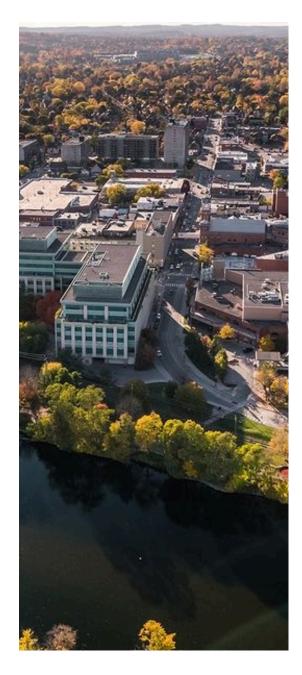
Together with our residents and partners, our team delivers and facilitates inclusive primary care services to heal, empower, and support those we care for.

#### Vision

A healthy and thriving Peterborough and surrounding community

#### Values

- Respect
- Integrity
- Compassion
- Trust
- Teamwork
- Innovation



### THE FAMILY HEALTH ORGANIZATIONS

The Family Health Organization (FHO) is a structured approach to the delivery of primary healthcare. Family physicians within this model of care efficiently manage their practice of patients while receiving support from both the FHO and Family Health Team. These supports vary within each of the five FHOs, making Peterborough an optimum community to open a practice that best suits the physician.

#### **Chemong FHO**

- Locations: Lakefield & Bridgenorth
- Number of Physicians: 11

#### **Greater Peterborough FHO**

- Locations: City of Peterborough, Norwood, Curve Lake, Buckhorn, Millbrook, & Apsley.
- Number of Physicians: 25

#### Peterborough Community FHO

- Location: City of Peterborough
- Number of Physicians: 12

#### The Peterborough Clinic FHO

- Location: City of Peterborough
- Number of Physicians: 19

#### The Medical Centre FHO

- Location: City of Peterborough
- Number of Physicians: 21

#### **Partners in Pregnancy Clinic**

- Location: City of Peterborough
- Number of Physicians: 12



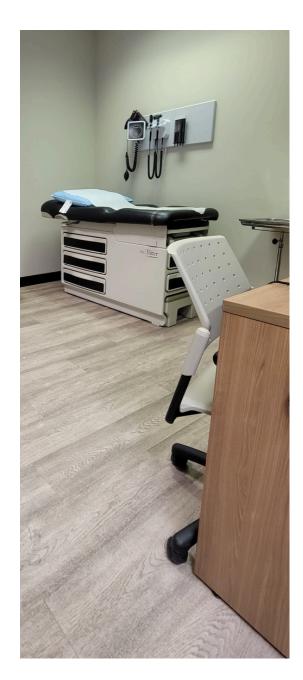
# SUPPORTING THOSE WITHOUT A DOCTOR

The healthcare crisis is no secret.

The number of residents in Peterborough without a family doctor or nurse practitioner is growing at an alarming rate. The Ontario College of Family Physicians published figures that indicate by 2026, approximately 50 per cent of the Peterborough and surrounding area population will be considered "unattached" or "orphaned" patients.

Our Family Health Team - with no base budget increase in over a decade - has managed to support unattached patients by providing primary healthcare through the *PFHT Health Clinic*.

This is one of the only options in Peterborough to receive in-person care from a local clinician (outside of the hospital). Through same day/next day appointments, we have supported patients through different means.



# SUPPORTING THOSE WITHOUT A DOCTOR

Over the last year, the clinic provided the following:

- 1,331 patients served
- 3,614 encounters

Who provides the care?

- 68% encounters by NPs
- 22% encounters by a FFS Physicians
- 9% encounters by RPNs

Where was care provided?

- 76% encounters in person
- 24% encounters by phone

The PFHT Health Clinic assisted in 702 potential diversions from the ER department with an estimated cost savings of \$226,746<sup>\*</sup> to the health system

\*The cost savings is based on \$323.00 per ER visit. Only includes nursing, diagnostics and therapeutic services, administration and over costs.



# SUPPORTING THOSE WITHOUT A DOCTOR

Primary care continues to be the front door to the healthcare system. Numerous residents who visited the PFHT Health Clinic have continued their health journey to other services, such as:

- 662 referrals for lab services
- 323 referrals to specialists
- 314 referrals for diagnostic imaging
- 61 referrals for home and community care
- **15** referrals to community mental health services

Family physicians and other primary care providers conduct routine cancer screenings. It is known that early detection for most cancers can be easier to treat.

Our clinic provided the following to unattached patients:

- 26 people screened for breast cancer
- 73 people screened for cervical cancer
- 49 people screened for colorectal cancer
- **7** people screened for lung cancer



# **SPECIALTY CLINICS**

The Well Baby Clinic is a pilot service through the Peterborough Family Health Team. It provides routine check-up care to babies who do not have a family physician or nurse practitioner in Peterborough and surrounding area.

The creation of the clinic is in response to a community need to improve access to "well baby" care. It provides routine well-baby visits from 2 months to 18 months of age.

### Little Patients' Served: 320 Little Patient Encounters: 821

The Well Baby Clinic was presented at the Association of Family Health Teams of Ontario in October 2023 as a means to teach other FHTs how to support the unattached babies in their communities.



# PATIENTS & ENCOUNTERS

The PFHT Interprofessional Healthcare Providers (IHPs) serve patients who are attached to (or rostered with) the FHO family physicians.

In today's climate, these patients are very fortunate to have a family physician and access to our IHPs.

The knowledge and skills our IHPs have attained and bring to our primary care system allow for patients to receive support from an expert, while increasing capacity for family physicians to see other patients.

### Patients Served: 25,601 Encounters: 61,936

The Interprofessional Healthcare Providers within our Family Health Team include:

- Nurse Practitioners
- Nurses/RPNs
- Mental Health Clinicians
- Registered Dietitians
- Pharmacists



# PARTNERS IN PREGNANCY CLINIC

The team at the Partners in Pregnancy Clinic continue to support expecting families throughout the gestational period and for six-weeks post partum.

PIPC is a great example of how team-based care is the solution for primary healthcare. The family physicians seamlessly handoff the IHP when specific support is required in the pregnancy.

### Patients Served: 1,461 Encounters: 10,726

The PIPC Team also provides programming to expecting parents.



Footsteps to Parenting

- 2 multi-week sessions
- 23 participants



Not What I Expected

- 2 multi-week sessions
- 22 participants



# PFHT PROGRAMMING

The following is an overview of our multi-week programs that we ran over the last year.



### **Mindful Eating**

- 5 multi-week sessions: 1 in-person & 4 virtual
- 31 participants
- 91% satisfaction rate



### Mindfulness

- 9 multi-week sessions: 5 in-person
  & 4 virtual
- 105 participants
- 90% satisfaction rate



Classes include: Mindfulness for Anxiety & Depression, Mindfulness for Stress, and Mindfulness Tools for Daily Living.



### Understanding Sleep &

### Insomnia

- 3 multi-week sessions: 2 in-person & 1 virtual
- 16 participants
- 100% satisfaction rate



# PFHT PROGRAMMING

The following is an overview of our workshops that we ran over the last year.



#### **Blood Sugar Basics**

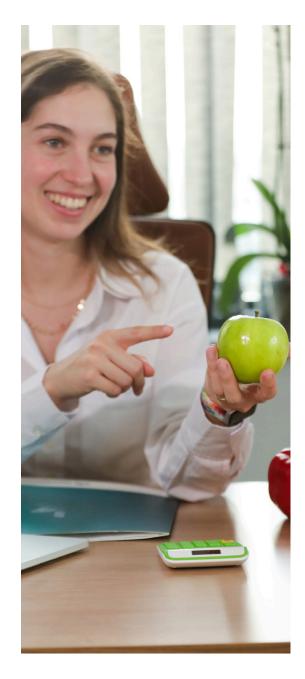
- **11** workshops: 8 in-person & 3 virtual
- 134 participants
- 100% satisfaction rate

#### Intro to Sleep & Insomnia

- **14** workshops: 7 in-person & 7 virtual
- 110 participants
- 91% satisfaction rate

### **Heart Health**

- **7** workshops: 6 in-person & 1 virtual
- 63 participants
- 100% satisfaction rate



# PFHT PROGRAMMING

The following is an overview of our pilot program and workshops that we ran over the last year.

#### **Anxiety Workshop**

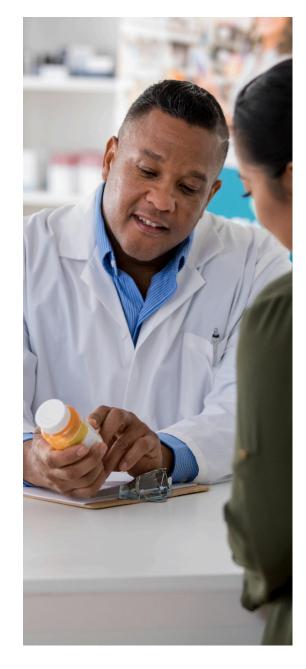
- **10** workshops: 5 in-person & 5 virtual
- 56 participants
- 88% satisfaction rate

#### **Being with Chronic Pain**

- 2 sessions: 2 in-person
- **21** participants
- 88% satisfaction rate

### **Talking About Medications**

- 3 workshops: 3 in-person
- 28 participants
- 100% satisfaction rate



### PFHT WELLNESS SERVICES

Wellness services are a collaboration between the family physician and the PFHT IHP to support the patients' health and well-being.



### INR (Anticoagulation) Clinic

- **759** patients served
- 6,887 encounters



### **Clinical Support Services**

- 246 patients served
- 2,980 encounters



### **Deprescribing Service**

- 51 patients served
- 256 encounters



### FHT to Quit Smoking Cessation

- 157 patients served
- 663 encounters

#### Abstinence rates:

- 3 month = 38%
- 6 month = 28%
- 12 month = 25%



### HEALTH HUMAN RESOURCES



**11.2 M** Annual Budget



**85%** to Direct Staffing



**71.76 FTE** Interprofessional Healthcare Providers



### 21.23 FTE

Administrative Program Support Personnel



9.17 FTE Head Office Personnel



### FINANCIAL STATEMENT

Peterborough Family Health Team Statement of Financial Position March 31	2024	2023
Assets Current Cash Investments Accounts receivable Prepaid expenses	\$ 1,050,561 \$ 600,000 257,576 138,084	1,177,071 300,000 186,766 106,718
	\$ 2,046,221 \$	1,770,555
Liabilities Current Accounts payable and accrued liabilities Government remittances payable Deferred revenue Amounts refundable to the Ministry of Health/Ontario Health	\$ 684,208 \$ 191,709 38,813 <u>280,939</u> 1,195,669	580,933 - 125,616 <u>279,585</u> 986,134
Fund balances Unrestricted Internally restricted	\$ 773,364 77,188 850,552 2,046,221 \$	705,001 79,420 784,421 1,770,555

Operating lease commitments

### FINANCIAL STATEMENT

Peterborough Family Health Team Statement of Operations			
Year ended March 31		2024	2023
Revenues Ontario Health Other funding Interest income	\$	11,427,937 666,211 25,040 12,119,188	\$ 11,467,091 467,306 11,298 11,945,695
Expenditures Human resources Clinical Management and administrative Specialist sessional fees	_	7,515,906 2,175,634 <u>48,064</u> 9,739,604	 7,514,907 1,966,927 63,439 9,545,273
Operational overhead Premises costs Office, supplies and IT Consulting, audit and legal Travel Training and development Insurance Recruitment and retention One time costs		875,865 591,331 73,440 68,085 55,916 47,731 1,005 - 1,713,373	 876,394 528,110 210,744 54,235 51,740 43,710 183 168,000 1,933,116
Other project expenses	_	600,080 12,053,057	 374,188 11,852,577
Excess of revenues over expenditures	\$	66,131	\$ 93,118