

What We Heard: Community Conversations About Collaborative Family Practice Teams

Nova Scotians manage their health and wellness every day. When they need help with managing their health, they receive most of their care through their family practice. Family practices are part of the primary health care system; it's where you go first and regularly to access the care you need. Primary care is the advice and services you receive from family doctors, nurse practitioners, family practice nurses and other health care providers in your community.

The demands on the health care system are changing in our province, and we need to change with it. There is more chronic disease, our population is growing as well as aging, and health care professionals are retiring. Accessing a family practice can sometimes be a challenge. It is time to do things differently.

Nova Scotia Health Authority is working to create more collaborative family practice teams and strengthen existing teams across the province. There are close to 80 collaborative family practice teams in various stages of development. We know that many newer doctors, nurse practitioners, and other primary health care providers have been trained in team-based care. Having these teams in Nova Scotia helps us to recruit new primary health care providers. It also encourages them to stay in our communities.

There is strong evidence for team-based primary health care.* Collaborative family practice teams are designed to meet the health needs of a practice's patients, from birth to end of life. Teams have been shown to provide a full range of ongoing and coordinated care for individuals and families that is accessible and community-focused.

You can find more information about collaborative family practice teams in the appendix section of this report, as well as on our website: www.nshealth.ca/collaborative-family-practice-teams.



Community Conversations About Collaborative Family Practice Teams

Between February and November 2018, Nova Scotia Health Authority hosted 25 community conversations about collaborative family practice teams. These conversations were held in each county across the province. More than 600 Nova Scotians attended.

The purpose of the community conversations was to hear from Nova Scotians about collaborative family practice teams. We also wanted to find out what we need to know about communities to help support teams to be successful. During the sessions, we provided a short presentation about collaborative family practice teams; most of the two hours was spent in small group discussions.

During the presentation, we showed a video that explained team-based care. We then read a story that described a patient's experience as part of a collaborative family practice team. Information on the roles of various team members and how teams can improve access to care was shared. We also shared information on the number of primary care providers in the area, along with the number of people on the Need a Family Practice Registry.

In small groups, participants were asked to discuss and then share:

1. What they liked about collaborative family practice teams,
2. Their concerns about collaborative family practice teams, and
3. What they would like us to know about their community to help inform these teams.

This is a summary report of what we heard during the community conversations, and from those who participated online. A snapshot of what participants shared, by community, is also available on talkaboutfamilypracticeteams.ca.

Online Participation

For those who could not take part in person, there was an option to contribute online in English, French and Arabic. There were three videos to watch; written information was also available for those who are hearing impaired. Over five thousand people visited the talkaboutfamilypracticeteams.ca website, with 165 people taking part in the online conversation.

* From the front cover: See Strengthening the Primary Health Care System in Nova Scotia, available at www.nshealth.ca/primary-health-care-resources

"We moved here from Ontario. They never had community meetings about health care there. I really like that you are doing this."



Even more conversations

What we heard from Nova Scotians during the community conversations aligns with other discussions and meetings that have taken place across the province over the past three years.

In the fall of 2016, Nova Scotia Health Authority's Department of Family Practice held 14 network meetings and a webinar on the collaborative family practice team model. Approximately 200 family doctors attended in person, and another 60 participated online. At the same time, discussions began with staff who work in Primary Health Care, along with others in the health care system.

Between November 2017 and January 2018, municipal, town and First Nations elected leaders were invited to conversations about collaborative family practice teams. A total of 95 participants attended 11 sessions. Similar one-on-one conversations with MLAs have occurred.

Conversations with family practices, health system partners, and elected leaders about collaborative family practice teams and access to primary care are ongoing.

How the community conversations were promoted

We used several methods to invite Nova Scotians to participate in the community conversations about collaborative family practice teams:

- Print advertisements were placed in community newspapers
- Geo-targeted (county-wide) advertisements appeared on Facebook
- Public service announcements were sent to local media (radio, newspaper, TV)
- Information was sent to elected leaders, community health boards, and community groups to share in their communities
- Posters were distributed in community locations such as:
 - collaborative family practice team locations and health care sites
 - community centres
 - fire halls
 - libraries
 - pharmacies
 - places of worship
 - post offices
 - schools

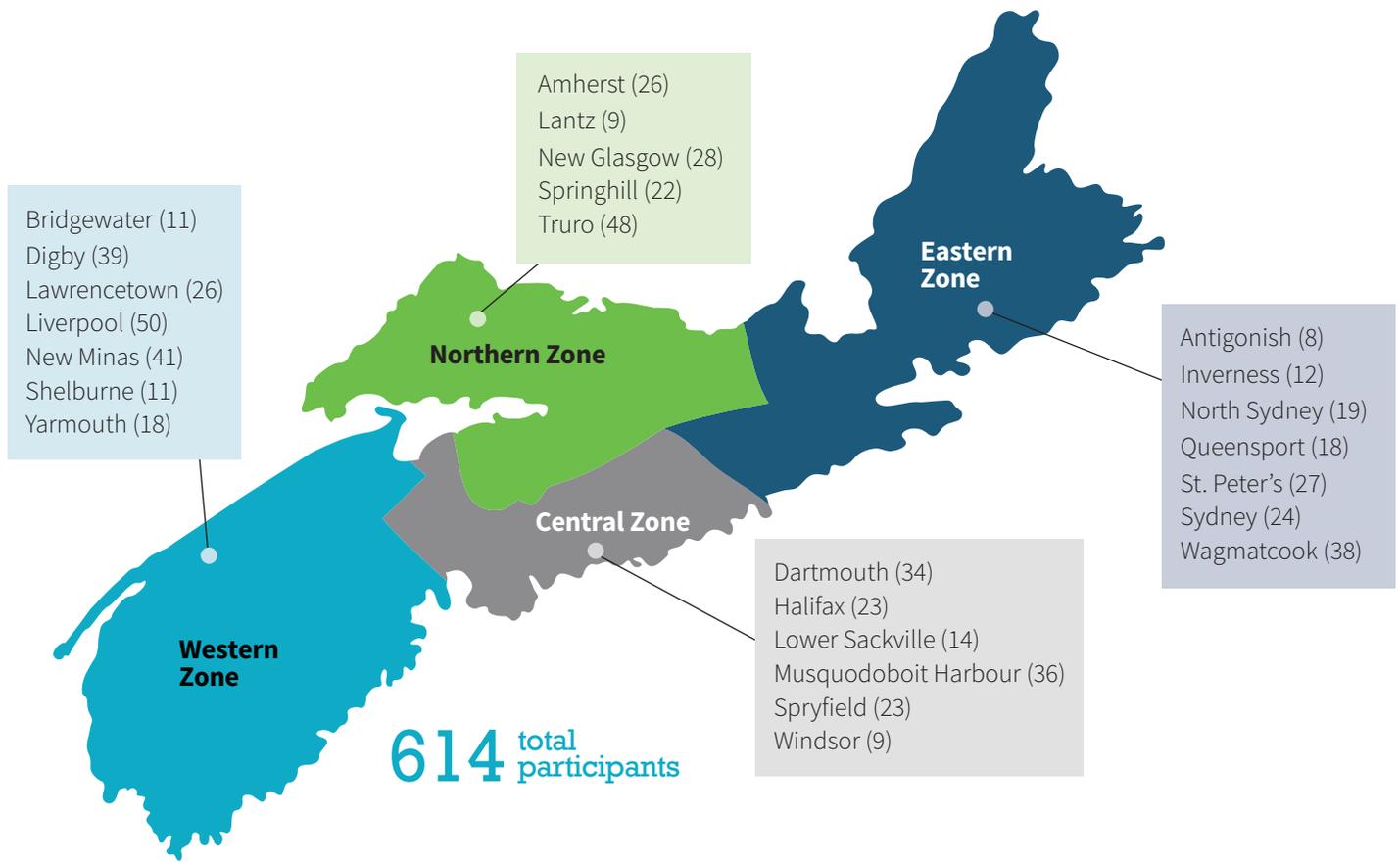
"The number one thing is that we are here together addressing the issue of access – this is a positive direction."

"I'm hopeful that this will work in this area, and that my family practice will participate."

"What can we do as citizens to help the health care situation in our community?"

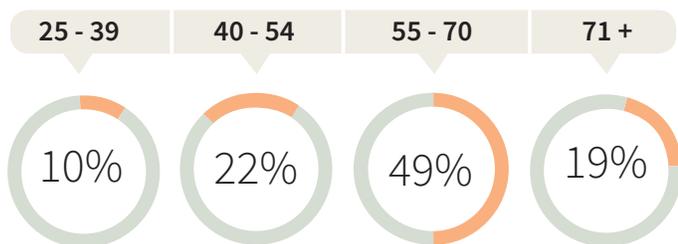
Community Conversations Snapshot

Locations and participation

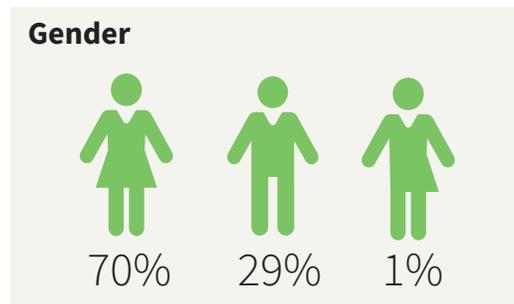


Participant overview

Age

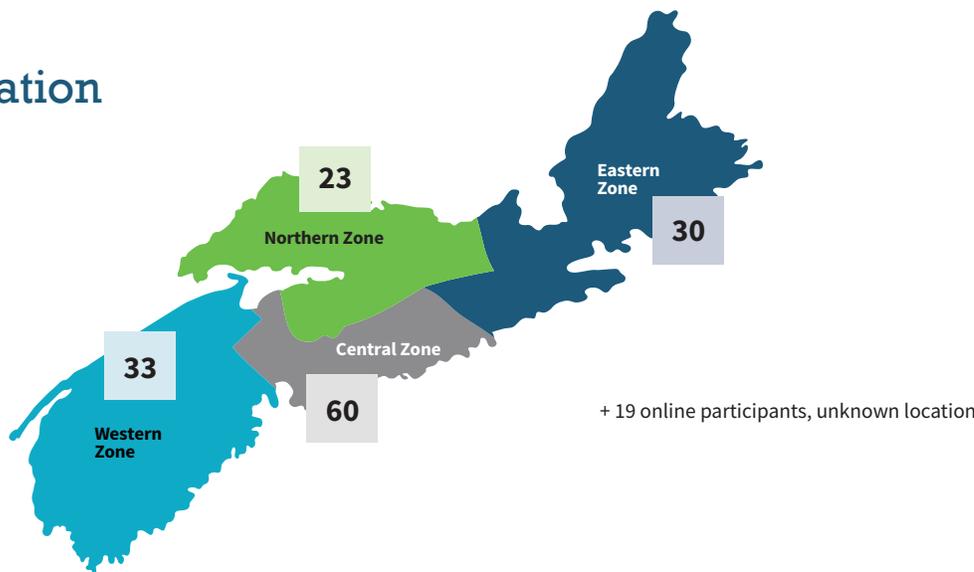


Gender



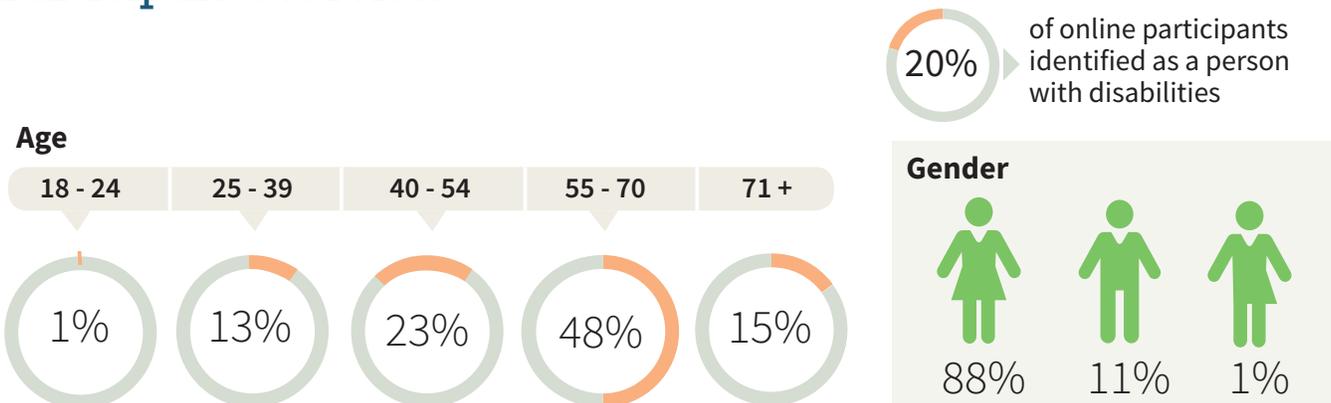
Online participation

165 total online participants



5,216 website visits	The talkaboutfamilypracticeteams.ca website was visited more than 5,000 times. This included 95 visits to the French version of the website and 68 visits to the Arabic version of the website.
701 downloads	The snapshots of what we heard from participants during each community conversation were downloaded approximately 700 times.
343 views	Three videos on the website were watched almost 350 times.
165 online participants	We received submissions from 165 Nova Scotians who participated online to share their thoughts on collaborative family practice teams. Two of the submissions were completed in French.

Participant overview



What We Heard

The following is a summary of what we heard from participants through small group discussions during the community conversations. This summary also includes what we heard from those who participated online.

What you liked about collaborative family practice teams

- **Receiving care from a team.** You liked the idea of primary care providers working together, and being able to see the right provider for your health needs. You said this could free up the doctor to see patients with more serious health concerns who need their level of expertise. You also thought it made a lot of sense that when your regular primary care provider was not available (such as when they are on vacation), you would be able to see someone else on the team.
- **Access to different types of health care providers.** You're excited to have access to a variety of different health professionals who could be part of a collaborative family practice team. You liked that they would be located all in one place where possible, and that each provider brings a unique expertise to the team. Many people talked about the mental health needs in their community, and liked the potential of a social worker being part of a team.
- **Availability of appointment times.** There was a lot of interest in the potential for teams to offer same day, evening and weekend appointments. You also felt that seeing the most appropriate team member for your health care needs could shorten the amount of time you would wait for an appointment.
- **Having an electronic medical record.** You liked the idea of an electronic medical record that is shared by the team. That way, all the team members you have appointments with know your health information and are up to date on your care.
- **Providers working together creates job satisfaction.** You felt health care providers would have a greater sense of job satisfaction when working as part of a team and providing support to each other. You said that team members could take a vacation or go on maternity leave and not have to worry about coverage for their patients. Many agreed that this should help with recruitment and retention.

"The family practice becomes an anchor for the patients. Individual practitioners come and go. I have confidence in the future of teams."

"This sounds like the most efficient use of doctors' and nurses' time. This will help with reducing physician burnout."

"I like the idea of providers working together and having access to a shared medical record."

Concerns you had about collaborative family practice teams

- **Recruitment and retention of family doctors.** You expressed concern about our province's ability to attract the family doctors that we need. You felt that since doctors in Nova Scotia are one of the lowest paid in Canada, this is a deterrent to attracting doctors to come and stay in our province. Similarly, you wanted to know how we plan to recruit and keep the other primary health care providers who are part of a collaborative family practice team, such as nurse practitioners.
- **Understanding collaborative care.** You want to see more public education on collaborative family practice teams and on the roles of different providers. You want to learn more about the advantages of being a patient of a team. Many people are used to only going to see their doctor, and you said the public needs to know what to expect if they have an appointment with another member of the team. You said some people may not be very comfortable with this at first. You also said we should encourage patients of teams to share their firsthand experiences.
- **Amount of communication.** You want to see more communication about the process to create collaborative family practice teams. You also want updates on what is happening – both the progress and the challenges. You said there needs to be open conversations between decision makers in the province.
- **Need a Family Practice Registry information.** You don't think the information on the number of people who need a family practice reflects the actual need in many of the communities. You said more needs to be done to get the word out for people to register if they don't have a family doctor or nurse practitioner.
- **Privacy of health information.** Many of you expressed concern about the privacy of your personal health information in an electronic medical record. Specifically, you want to know who is able to look at the information, and what measures are in place to ensure privacy.
- **Timelines and cost.** Many of you expressed concern about how long it will take to set up collaborative family practice teams. Since there are many Nova Scotians without a primary care provider, you want to know what will be done in the meantime so that people can access the care they need. You also shared concerns about how much it might cost to create teams.

"This is a slow process - we need better access now."

"Where do we get more providers to fill all the vacancies? We need more doctors and nurses."

"More education is needed for people to understand who they might see as a patient of one of these teams, and that they can ask to see the nurse for some things."

What you wanted us to know to help make collaborative family practice teams successful in your community

Participants told us that collaborative family practice teams should:

- **Promote wellness.** Provide support for people to stay healthy (physically and mentally). Teams need to become more focused on health and wellness rather than on illness.
- **Consider all the factors that impact health.** Many factors affect a person's ability to access health care: where they live, their income and education levels, social support networks, types of employment, and their age and gender.
- **Help with navigating the health system.** People need help with finding the right resources to support their health. You said teams should explore the role of a health navigator.
- **Be flexible, collaborate with existing services, and understand community needs.** Make sure that collaborative family practice teams don't duplicate services that are already available in the community. Teams need to build their knowledge of resources and make connections. Teams also need to stay current and connected to community needs, learning and understanding the strengths, needs and culture of the community it serves.
- **Consider geography and available transportation.** You said that transportation is an identified issue, especially in rural areas. Make sure the collaborative family practice teams are located where they need to be and are sustainable for the long term. Offer outreach services to smaller communities in the area.
- **Involve the community in recruitment.** You want to be more involved in welcoming new health care providers to your community, and showing them the benefits of living here. You want to know more about what is being done to recruit family doctors and other providers who will be part of these teams. You want to know how you can help.
- **Rely on community leaders.** Local leaders can help get buy-in from the community about team-based care, and can share information about collaborative family practice teams.
- **Stay connected with the community and share the plan.** Share the challenges and the successes. Have a process for regular updates and opportunities for community input.

"Make sure that it is always evolving — always re-evaluating the services based on the changing needs of the community."

"You are on the right track. We are looking forward to positive changes."

"Preventative health care needs to be part of the team."

One Word Summary

At the end of each session, everyone was asked to share one word that described how they felt after participating in the community conversation. Participants shared the following words:



Evaluation Summary

Participants were invited to complete an evaluation at the end of each community conversation. 360 evaluations were completed – a response rate of 59 per cent. You can find more information from the evaluations in the appendix section of this report, including the online evaluation information.

Of those who responded:

- 89%** felt they had a better understanding of a collaborative family practice team
- 94%** were satisfied that their thoughts were heard and understood
- 85%** felt confident that their thoughts and ideas would influence decisions

“I can’t imagine a rural community without collaborative care, it’s what we need for sustainability.”

“There should be same day care, so you don’t have to go to emergency for things that are urgent.”

Next Steps

Nova Scotia Health Authority is sharing what we heard during these community conversations with:

- participants who attended the sessions
- collaborative family practice teams
- health authority employees
- family doctors
- the Department of Health and Wellness
- community leaders
- community health boards, and
- key stakeholders

Conversations are ongoing with all of these groups on efforts to create more and strengthen existing collaborative family practice teams in Nova Scotia.

We know we need to communicate more information, and more often. We are working to do this. Visit www.nshealth.ca/collaborative-family-practice-teams for information about collaborative family practice teams and the roles of primary care providers. Locations of teams supported by Nova Scotia Health Authority are listed on this website, as are a few videos about teams. In addition, we have been sharing information on Nova Scotia Health Authority's website and through our social media channels on our recruitment efforts. We are also creating a toolkit to support communities to participate in recruitment.

At every community conversation we heard that we need to provide education for the public about collaborative family practice teams. We are exploring the option of a public education campaign to increase understanding of collaborative family practice teams and to explain what to expect from the various primary care providers as a patient of a team.

As well, we continue to promote the Need a Family Practice Registry for those who are without a family doctor or nurse practitioner. We share a monthly report on our website with information about Nova Scotians who have found a primary care provider, and those who still need a family practice. We are also sharing first voice stories on social media and our website about people who have found a family practice through the registry.

Thank You

A sincere thank you to those who attended community conversations as well as those who participated online. We appreciate that you took the time to provide us with feedback on collaborative family practice teams. We look forward to future conversations about the primary health care system, and how we can work together.

Appendix A

Participation Summary

Community Conversations		
Date	Location	Participants
February 21	New Glasgow – Pictou County Wellness Centre	28
February 22	St. Peter’s – St. Peter’s and Area Lions Club	27
March 6	Lantz – East Hants Sportsplex	9
March 7	Digby – Digby Fire Hall	39
March 19	Sydney – Grand Lake Road Fire Hall	24
March 21	New Minas – Louis Millet Community Complex	41
April 12	Yarmouth – Mariners Centre	18
April 12	Dartmouth – East Dartmouth Community Centre	34
April 12	Amherst – Community Credit Union Business Innovation Centre	26
April 18	Queensport – Chedabucto Fire Hall	18
April 18	Liverpool – Queens Place Emera Centre	50
April 25	Spryfield – Captain William Spry Community Centre	23
May 1	Wagmatcook – Wagmatcook Culture and Heritage Centre	38
May 10	Musquodoboit Harbour – Old School Community Gathering Place	36
May 17	Bridgewater – Bridgewater Fire Hall	11
June 6	Truro – Rath Eastlink Wellness Centre	48
June 6	North Sydney – North Sydney Fire Hall	19
June 6	Lawrencetown – Lawrencetown and District Fire Hall	26
June 14	Shelburne – Shelburne and District Fire Hall	11
June 21	Springhill – Dr. Carson and Marion Murray Community Centre	22
September 18	Halifax – Halifax Forum	23
October 18	Inverness – Inverness Fire Hall	12
October 25	Lower Sackville – Knox United Church	14
November 7	Antigonish – The People’s Place Antigonish Town and County Library	8
November 21	Windsor – Hants County War Memorial Community Centre	9
	Total	614

Online Participation		
Area	Counties	Participants
Western NS	Annapolis, Digby, Kings, Lunenburg, Queens, Shelburne, and Yarmouth	33
Northern NS	Colchester, Cumberland, East Hants, and Pictou	23
Eastern NS	Antigonish, Cape Breton Regional Municipality, Guysborough, Inverness, and Richmond	30
Central NS	Halifax Regional Municipality and West Hants	60
Unknown location		19
	Total	165

Appendix B

Results of Participant Evaluations

Community Conversations Participant Evaluations

360 of the 614 people who attended community conversations completed an evaluation form, for a response rate of 59 per cent.

Question	Strongly Agree / Agree	Neither Agree or Disagree	Disagree / Strongly Disagree
The purpose of the conversation was clearly explained.	97%	3%	0%
I had enough information to contribute to the topic being discussed.	90%	8%	2%
I was able to express my views freely.	97%	3%	0%
I feel that my views were heard.	94%	6%	0%
I feel that the input provided through this conversation will be considered by the organizers.	85%	14%	1%
I understand how the input from this conversation will be used.	68%	26%	6%
I think this conversation will make a difference.	62%	35%	3%
As a result of my participation in this conversation, I am better informed about Collaborative Family Practice Teams.	89%	9%	2%
As a result of my participation in this conversation, I have greater trust in being part of conversations with Nova Scotia Health Authority.	64%	31%	5%
Overall, I was satisfied with this conversation.	90%	9%	1%
This conversation was a good use of my time.	92%	7%	1%

Online Participant Evaluations

165 of 490 participants who visited the 'join the conversation' section of talkaboutfamilypracticeteams.ca contributed online, for a response rate of 34 per cent.

Question	Strongly Agree / Agree	Neither Agree or Disagree	Disagree / Strongly Disagree
The purpose of the conversation was clearly explained.	84%	8%	8%
I had enough information to contribute to the topic being discussed.	79%	9%	12%
I understand how the input from this conversation will be used.	55%	25%	20%
I think this conversation will make a difference.	39%	38%	23%
As a result of my participation in this conversation, I am better informed about Collaborative Family Practice Teams.	51%	28%	21%
As a result of my participation in this conversation, I have greater trust in being part of conversations with Nova Scotia Health Authority.	41%	38%	21%
This conversation was a good use of my time.	65%	24%	11%

Appendix C: Frequently Asked Questions about Collaborative Family Practice Teams

What is a collaborative family practice team?

A collaborative family practice team includes family doctors, nurse practitioners, family practice nurses, and health professionals such as social workers, dietitians and others working together to provide comprehensive care for patients, based on the size and health needs of a community. A collaborative family practice team provides:

- *Comprehensive care* – a full range of health care services, from basic wellness check-ups to managing complex conditions.
- *Accessible care* – appointments are offered at various times (day, evening, and weekend), and in ways that best meet the needs of patients.
- *Coordinated care* – patients see the right health care provider for their needs.
- *Continuity of care* – patients see the same team of providers throughout their life, building a medical history and trusting relationship over time.
- *Community-oriented care* – the team works to meet the specific health needs of patients, and of the community.

Collaborative Family Practice Team Definition:

Nova Scotia Health Authority considers a collaborative family practice team, at a minimum, to have at least three primary health care providers with two or more professional disciplines (e.g. two family doctors and a nurse practitioner or family practice nurse).

Will my community get a collaborative family practice team?

Our plan is for Nova Scotians to have access to a collaborative family practice team. We are talking with existing family practices and groups across the province who are interested in working in a team-based approach to primary care. Working with communities and existing practices to create teams depends on a variety of factors, such as the number of family practices and providers in a community, family doctors' interest in working as part of a team, the size of the community, available infrastructure, and more.

How do I become a patient of a collaborative family practice team?

As we work with an existing family practice to add primary care providers, such as nurse practitioners, family practice nurses, social workers, and others to create or strengthen a collaborative family practice team, the patients of that practice will become patients of a team. As well, when a collaborative family practice team is accepting new patients, a list of names from the Need a Family Practice registry can be provided to the practice, and people are then contacted about becoming a patient of that team.

What is being done to recruit more family doctors?

We are recruiting every day for family doctors, as well as the other health professionals who work as part of a collaborative family practice team. Family doctors, like many medical professionals, are in high demand everywhere. Nova Scotia competes nationally and internationally for family doctors, just like other areas.

It's important that we showcase what makes Nova Scotia a great place to live and work. We hear from family doctors who have relocated here that they are attracted to our province's lifestyle and natural beauty. Recruitment requires all of us to work together: communities, family doctors, the health authority, and government. It's about showing how our communities are welcoming and a great place to live and raise a family. Practice opportunities and community fit are very important in attracting and retaining family doctors. We also know that many family doctors are interested in working as part of a team. That's why we are focused on creating more collaborative family practice teams.

What is a nurse practitioner?

A nurse practitioner is a registered nurse with advanced knowledge and education in primary health care. A nurse practitioner can be your main primary care provider who diagnoses and treats health issues, orders and interprets medical tests, prescribes medications, and performs exams and procedures. Nurse practitioners also provide health screening clinics, teach patients how to manage ongoing health conditions, offer healthy lifestyle education, and can refer patients to a specialist or other health care provider.

What is a family practice nurse?

A family practice nurse is a registered nurse with special training in primary health care. A family practice nurse can help manage health issues such as high blood pressure and diabetes, provide immunizations, review medications, provide well baby visits, perform pap tests, and much more.

What if I don't have a family practice?

People who do not have a family doctor or nurse practitioner should add their name to the Need a Family Practice Registry. This can be done online at needafamilypractice.nshealth.ca or by calling 811, Monday through Friday, between 10 a.m. and 6 p.m. There are also a number of options to access care.

For routine health care:

- call 811 to speak with a registered nurse for health care advice, available 24 hours a day
- visit a local walk-in clinic

For mental health concerns:

- call the 24-hour mental health crisis line at 1-888-429-8167

For emergency health services:

- call 911 or
- visit the nearest hospital emergency department

Shaping our system
together

A conversation with Nova Scotians
about Collaborative Family Practice Teams

