

Integrating information and data into your proposal

The comments highlighted in purple italics reflect the thoughtful questions and ideas brought forward by the Ottawa West Four Rivers Lived Experience Council members. We are offering these insights for proposal development and understanding what may matter to people in our communities with respect to their primary care.

Section C. Proposal Summary and Rationale for Need

Select one type of geographic unit for the proposed service rea(s): Forward Sortation Areas (FSAs), Aggregate Dissemination Areas (ADAs), or Census Sub-divisions (CSDs). Use the selected unit consistently throughout the proposal. Keep in mind that additional local data can supplement the referenced PCAT data – this is encouraged.

Describe the primary care attachment need within the OHT geographic area(s) identified and explain why this geography was selected for the proposed expansion or new interprofessional primary care team.

- The PCAT data on unattached rates is available in the Neighbourhood Proposal Support Tool, please review this data to ensure the proposal is in alignment with this provincial data
- [Neighbourhood Proposal Support Tool \(includes PCAT Data Package\)](#) (includes PCAT data package detail as well as select ONS neighbourhood level data)
- [Kanata Stittsville Taskforce Overview and Recommendations](#) and [Kanata-Stittsville-OHT-Profile](#) (if applicable for your proposal) provides a comparison to the city overall and specific needs within these neighbourhoods for consideration as well as city of Ottawa population projections by ward
- [Ottawa Neighbourhood Study link](#) (provides in-depth data on social and environmental factors influencing health and well-being in neighbourhoods across Ottawa. We have partnered with ONS so if your are looking for specific information or to better understand this data, please join a drop-in session or reach out to our OHT team and we can coordinate that support)

How are the participating organizations best positioned to address the identified attachment need, and how will the proposal complement existing primary care capacity?

- [OWFR Primary Care Network Practices](#) (an overview of current primary care practices locally)
- [Primary Care Attachment Patterns by OHT](#) (compares IPCT models and attachment across the province)

Section D. Proposed Model and Attachment Approach

Description:	Attachment volume and description of how the expanded/new team will enable net new patient attachment in the identified geographies.
OWFR Suggested Resources to Consider	Use the data package resources from Section C along with attachment capacity by your proposal partners to identify your attachment target. Describe and provide data on the roles and responsibilities of team members and how their scope of practice will be leveraged in your model • IPCT-Expansion-Toolkit (Alliance for Healthier Communities provided this toolkit to support proposal development and includes a section on scope of practice considerations for team-based care) • Team Care Concept Paper

Section E. Primary Care Objectives and Expected Outcomes

These objectives describe a long-term, aspirational vision for primary care. Describe how the team will meet them over time through specific programs and services. Specific expectations and outcomes will be reflected in funding accountabilities and deliverables.

Objective 1:	Province wide
Description:	Ontarians across the Province should have the opportunity to have a documented and ongoing relationship with a primary care clinician or team.
Proposed Approach:	How will the team work towards 100% ongoing <i>meaningful</i> attachment to a <i>regular</i> primary care. Describe how you will work with the OHT/PCN and HCC Lead Organization to support attachment processes as well as other sources of unattached patients that will be incorporated into your intake model.
OWFR Suggested Resources to Consider	See Section C for geographic data resources. OWFR OHT has implemented a supportive attachment process with our OHT's Lead Organization along with regular check-ins with our HCC Care Connector. Please describe how your partners will participate in this established process and/or implement this model in support of your neighbourhood attachment plan. Consider other sources of identifying patients for meaningful attachment and how partnerships with the OHT and PCN may be leveraged to ensure a coordinated intake process. <i>Describe how the team will ensure that patient attachment goes beyond mere assignment to support meaningful, consistent relationships with primary care providers</i> <i>Consider what meaningful attachment means to community members and how your model meets this: patient has a regular primary care provider who knows their health history, listens to them, provides care that fits their needs, and helps coordinate any extra services they need. This relationship can happen in person or online and helps the patient stay healthier and feel supported.</i> <i>Members of poorly served, marginalized, diverse communities need to build relationships with providers where they feel safer and where they don't have to repeat their story.</i> <i>It is very important to communicate with patients before rostering them whether the care will be provided by a team or by a single provider, provided via in-person or virtual or both, etc. so that the patient can make an informed decision about attaching. Describe how this will be explained to patients as they consider rostering with your practice.</i>
Objective 2:	Connected
Description:	Ontarians should have the opportunity to receive primary care services that are co-ordinated with existing health and social services.
Proposed Approach:	How will the team enable coordinated, comprehensive primary care, intended workflows, connections and partnerships and how the proposed approach with compliment rather than duplicate.

OWFR Suggested Resources to Consider	Ottawa Neighbourhood Study Link (includes health outcomes page) • Connect to Services (consider OHT partners and/or local services available and how these will be connected to your model, where relevant). <i>Describe how the team will reach out for additional services that are needed for the patients of their primary care home (ie. social services, specialty consults)</i> Primary care and psychiatry identified their barriers to providing MHAUSH services for patients and what the recommended actions to address these would be. Consider including these solutions in your team model. • Infographic recommendations • Summary report
Objective 3:	Convenient
Description:	Ontarians should have access to timely primary care services.
Proposed Approach:	What strategies will the team implement to ensure timely access to primary care services including after-hours on evenings and weekend. What strategies will the team implement for patients who face transportation, geographic, technology, language, mobility or other access barriers?
OWFR Suggested Resources to Consider	Consider including information about wait times for appointments, after-hours service utilization, and patient satisfaction with access to care. <i>Describe how the team will ensure that patients using after-hours or virtual services experience seamless follow-up, with feedback and care information reliably shared with their primary care provider to support continuity and coordination of care?</i> Consider access to community resources and amenities, physical environment and transportation • OC Transpo Route Mapper • Transportation services AccessCSS • Neighbourhood Maps Ottawa Neighbourhood Study (recognizing this study covers only the City of Ottawa boundaries; see IPCT proposal tool for expanded OWFR geographies) • Languages supported by clinicians that are part of the care team, translation services available, connections and pathways to existing programs and services to support patients Consider electronic tools that improve access for patients (i.e. Patient Portals, Online Appointment Booking, etc.) <i>How will the team design appointment scheduling practices that consider the specific needs and routines of rural seniors, caregivers, and adults with complex or physical disabilities, for example, by reserving mid-morning and early-afternoon appointment times?</i> <i>How will the team monitor and report on the geographic distribution of patient attachments to ensure patients have access to local primary care providers and reduce the need for long-distance travel?</i>

Objective 4:	Inclusive
Description:	Ontarians should have the opportunity to receive primary care services that are free from barriers and free from discrimination prohibited by the Human Rights Code or the Canadian Charter of Rights and Freedoms.
Proposed Approach:	Describe how the proposal will support equitable access and attachment for priority populations. Review prompts in the proposal template to address priority populations identified.
OWFR Suggested Resources to Consider	Review local data to identify the priority populations identified for your proposal. The resources shared below may help to inform how primary care teams can deliver care that is culturally and linguistically appropriate and safe and considers the communities being served. • Neighbourhood Maps Ottawa Neighbourhood Study • French Unattached from Neighbourhood Study • Francophone Cultural Awareness in Primary Care Sector • Winning Strategies for serving Francophone clients • A Black Health Plan for Ontario • Guidance for the Collection and Use of Sociodemographic Data for Equity Analytics • OHRC Policy Preventing Discrimination Because of Gender Identity and Gender Expression • Ontario Marginalization Index (ON-Marg) Public Health Ontario <i>How will the team identify, and address barriers faced by rural seniors, caregivers, and adults (18+) with complex or physical care needs to ensure equitable access to primary care services?</i> <i>How will the team ensure that all public-facing staff receive training and have access to telephone interpretation and translation services to support communication with patients of all language backgrounds?</i> <i>How will the team ensure access to French-language services, including the use of interpretation supports when bilingual staff are not available, to meet the needs of Francophone patients and comply with language accessibility requirements?</i> <i>How will the team encourage providers to understand and address access barriers from the patient's perspective to improve equity and patient experience?</i> <i>How does the team plan to ensure ALL staff and clinicians are trained to manage and respect gender diversity: at the registration desk, in the waiting room, in the treatment room and in the medical record according to ON Human Rights Code.</i> <i>How will the team ensure that patients whose primary care providers will not meet all their health needs, such as providing gender affirming care to trans patients, receive coordinated access to appropriate services and resources?</i> <i>How will the team identify and address barriers faced by youth and young adults who have grown up without regular access to a family doctor, and what strategies will be implemented to encourage them to engage with primary care services to support their ongoing health and wellbeing?</i>



Objective 5:	Empowered
Description:	Ontarians should have the opportunity to access their personal health information through a digitally integrated primary care system that connects insured persons to primary care clinicians or teams involved in their care.
Proposed Approach:	How will the team leverage and expand the use of digital solutions? What infrastructure, connectivity or geographic factors could limit the team's use and integration of digital solutions, and how will these challenges be managed? How will the team address barriers for patients accessing digital technology?
OWFR Suggested Resources to Consider	A summary of digital tools and services to consider for patients and clinicians • Patient Portals • Patients before Paperwork • Overview of OMD Services for OHTs • AI Inbox Assistants: What Ontario Clinicians Should Know Provincial digital health strategy has the new MOH approved strategy and associated elements • Digital First for Health Strategy (pg.6) • Expanding access to virtual care modalities (pgs.9-10) • AI Considerations: Amplify Care • Optimize EMR use to help with administrative burden as teams grow: Amplify Care <i>How will the team identify and accommodate patients without online access to ensure they receive appointment reminders and other essential communications in alternative formats?</i> <i>How will the team ensure that telephone appointments are available for seniors who face challenges attending in-person appointments and do not have access to the technology required for virtual visits (e.g., cell phones or internet)?</i> <i>How will the team develop and implement an outreach plan to ensure staff make direct contact with patients to communicate test results?</i> <i>How will the team ensure their digital technology recognizes and holds space for information about diverse bodies and gender identities?</i>
Objective 6:	Responsive
Description:	The primary care system should respond to the needs of the communities it serves, and Ontarians should have access to information about how the system is performing and adapting.
Proposed Approach:	How will the team use population data to create responsive strategies to increase attachment for populations experiencing health disparities? What indicators will the team use to monitor implementation and progress toward its attachment targets, and how will the findings support continuous quality improvement and learning?



	What sociodemographic data will the team collect to understand who is being served and identify gaps in access and attachment? Who will be responsible for data collection and evaluation? How will the team include patients in the design and delivery of services? How will the team adapt its model in response to implementation challenges, patient and community feedback, and emerging population needs?
OWFR Suggested Resources to Consider	• CIHR Summary Report offers key domains to evaluate team-based care (pg5) and includes draft indicators along with potential data sources and metrics (pg6-9). • Ontario's Primary Care Action Plan, January 2025 ontario.ca outlines 5 key performance indicators (KPIs) and the "impact of primary care: by the numbers" • Patient Reported Indicator Survey – Patient Questionnaire is an example of an evidence-based primary care performance focused survey (PREMS & PROMS). • Patient, Family and Caregiver Declaration of Values for Ontario describes the five values and expectations laid out for each • Guidance for the Collection and Use of Sociodemographic Data for Equity Analytics <i>How will the team gather, review, and share patient experience feedback to ensure continuous improvement and transparency in primary care service delivery? It is very important that these health teams have a clear, easy to access weblink/form for feedback so issues can be followed up.</i> <i>How will the team monitor and publicly report attachment process to ensure continued improvement? Transparent reporting builds trust.</i> <i>How will the team ensure transparent and consistent public reporting on governance, performance, and community outcomes, such as annual reports?</i>