

**Ottawa West
Four Rivers**
ONTARIO HEALTH TEAM



ÉQUIPE SANTÉ ONTARIO
**Ottawa Ouest
Quatre Rivières**

**Together,
Building Healthier Communities**



**Interprofessional Primary Care Team (IPCT)
Expansion**

INFORMATION SESSION

**October 13, 2026
12:00 – 1:00 pm
Virtual – MS Teams**

TERRITORY ACKNOWLEDGEMENT

We would like to acknowledge the Algonquin nation, on whose traditional and unceded territory we are gathered today.

As we strive for equal partnership in this OHT, we acknowledge the need for reconciliation and will actively work to understand and address the individual and systemic harm that impacts Indigenous Peoples.



Nous tenons à remercier la nation algonquine et reconnaissons son territoire traditionnel et non cédé sur lequel nous sommes réunis aujourd'hui.

En cherchant à établir un partenariat égal dans le cadre de cette ÉSO, nous reconnaissons la nécessité d'une réconciliation et travaillerons activement à comprendre et à traiter les préjudices individuels et systémiques qui touchent les peuples autochtones.

We acknowledge and respect the rights and self-determination of First Nations, Inuit, Métis, and urban Indigenous communities. We are dedicated to building and sustaining meaningful partnerships grounded in respect, accountability, and trust, collaborating to advance health equity in ways that honour their traditional, cultural, social, and health priorities.

AGENDA

- session goals and objectives
- IPCT proposal background – round 3
- OWFR data overview
- roles, responsibilities, and decision-making process
- roundtable discussion, questions
- review timeline and next steps

TODAY'S GOALS

1. Share information to support successful proposals via OWFR OHT
2. Understand OWFR OHT process and timelines
3. Know how/who to contact with questions or where to find information
4. Provide opportunity for partners to connect and ask questions

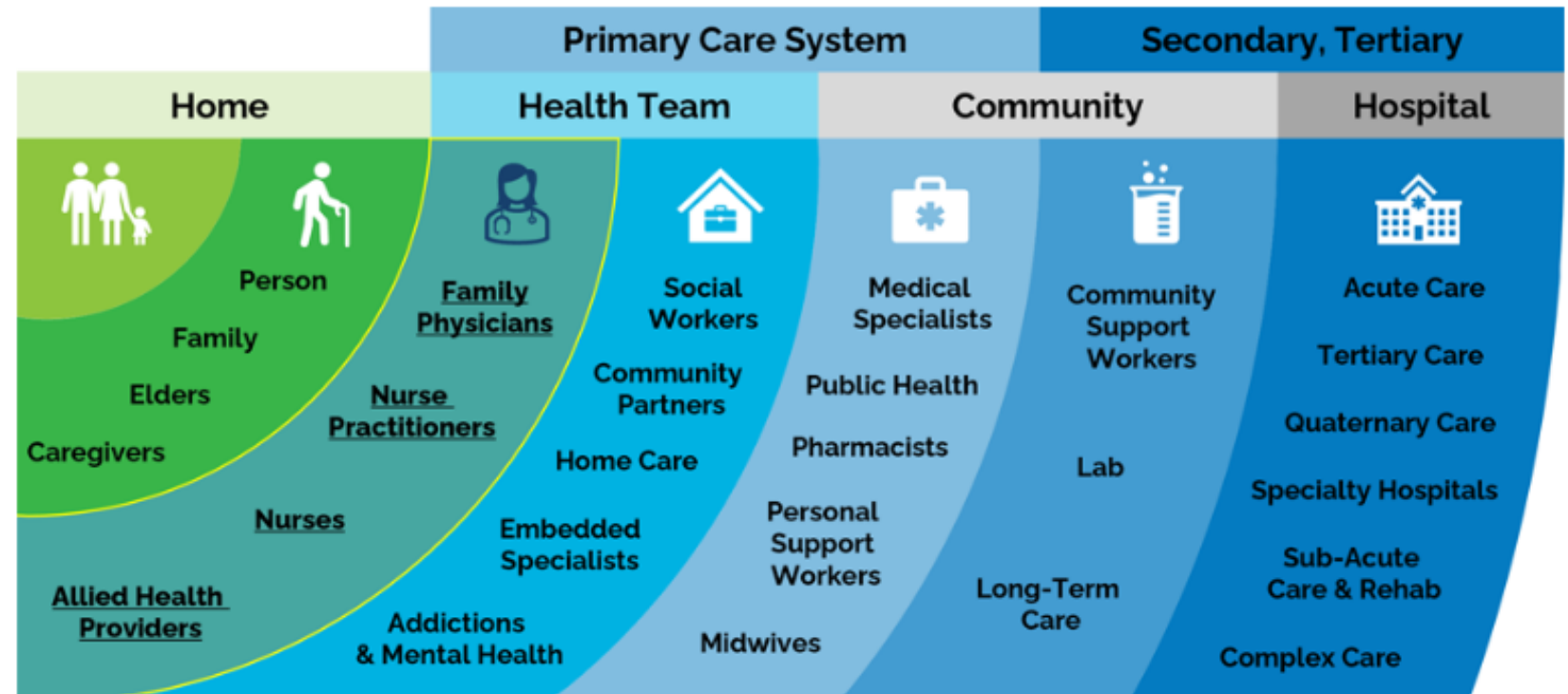
Primary Care Action Plan

January 2025

Connecting every person in Ontario to primary care

Mandate: 100% of people in Ontario are attached to a family doctor or a primary care nurse practitioner working in a publicly funded team, where they receive ongoing, comprehensive, and convenient care.

BACKGROUND



IPCT Call for Proposals

September 2026

ROUND 3

- **\$250M** announced and **third call for proposals** to create and expand up to **~78 primary care teams, connecting 600,000** more people to care

	FY 25/26	FY 26/27	FY 27/28	FY 28/29	Total
New People Attached	300,000	+500,000	+600,000	+600,000	2,000,000
New and Expanded Primary Care Teams	75 proposals 130+ teams	124 proposals 190+ teams	+78	+78	305

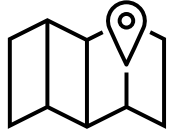
- **Fall 2026:** confirmed a 4th round will be opened for 2028-29 proposals – this is not the last round to achieve the aim of full attachment by 2029

IPCT Call for Proposals

September 2026

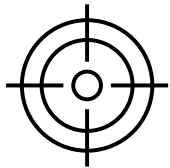
ROUND 3

- **Open call:** communities across the province are eligible to apply
 - No limit to the number of proposals an OHT/PCN can submit
 - Strong emphasis on broad engagement by OHT/PCN to develop collaborative and data-informed proposals
 - OH/MOH scheduling midpoint check-ins with OHT/PCN leads to ensure alignment of plans with provincial objectives
 - OHT/PCN will submit a Context and Endorsement Form to how the proposal aligns with the broader approach to primary care attachment
- **Proposal are due Friday, November 20th by 5pm** to Ontario Health



GEOGRAPHIC PRIMARY CARE ATTACHMENT

New and expanded IPCTs will work toward ongoing attachment of 100% of people within identified communities to a regular family physician, physician group, or primary care nurse practitioner. This includes attaching people on the Health Care Connect referral list (*reduced emphasis in this round*) as well as other methods for identifying unattached patients.



ROLE OF ONTARIO HEALTH TEAMS (OHTs)

OHTs and their Primary Care Networks (PCNs) will **lead local efforts** to support clinicians and partners **to identify attachment gaps** and **coordinate proposal submissions** that will help achieve ongoing 100% attachment over time.

CRITERIA

Primary Care Attachment

Prioritize **net new, ongoing attachment** to primary care

Priority to communities with high **rates of unattachment**

Readiness to Implement

Able to **begin attachment spring 2027** and achieve targets by spring 2028

Demonstrate operational feasibility

Demonstrate readiness: recruitment, infrastructure, partnerships

Support Geographic Coverage

Reflect **unique local community needs**

Support comprehensive **coverage for the attributed population** across the OHT

Meeting Primary Care Objectives

Community-wide attachment

Connected

Convenient

Inclusive

Empowered

Responsive

OHT ROLE

BACKBONE OHT TEAM

- Distribute proposal packages
- Ensure broad, fair and transparent engagement and support
- Ensure information and resources are available consistently to all partners
- Provide OHT data packages and local data to support proposal development and prioritize communities identified and/or those with high unattachment rates
- Support local providers and partners to collaborate and submit strategically aligned proposals
- Encourage and facilitate collaboration across primary care and other health and social service partners to strengthen proposals and/or coordinate letters of support

PARTNER ROLES

- Work with OHT and PCN to identify opportunities to collaborate with other primary care practices and clinicians
- Involve community partners
- Lead proposal development and define the model of care
- Write proposal content, complete forms
- Determine budget for proposal
- Submit completed proposal package to OHT

COLLABORATIVE LEADERSHIP COMMITTEE & PRIMARY CARE EXECUTIVE LEADERSHIP

OHT ROLE

- Review and support proposals for submission using Collaborative Decision-Making Arrangement (CDMA) and consensus decision-making model
- Refine and communicate OWFR OHT evaluation criteria in alignment with round 3 (with lessons from round 1 and 2)
- Identify evaluation panel following conflict-of-interest declarations (5-7 members)
- Exercise care and diligence as reasonably expected
- Sign and submit (1) OHT attestation form along with the supported proposals by November 20th at 5:00pm



ACCESS PROPOSAL INFORMATION IN ONE SPOT

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IPCT Updates



**Ottawa West
Four Rivers**
ONTARIO HEALTH TEAM

The current call for proposals for Interprofessional Primary Care Teams opened September 29, 2026 as part of the province's \$3.4 billion plan to connect every person in the province to primary care by 2029.

Please be advised that these updates are intended for OWFR partners and not members of the public. Thank you for your understanding!

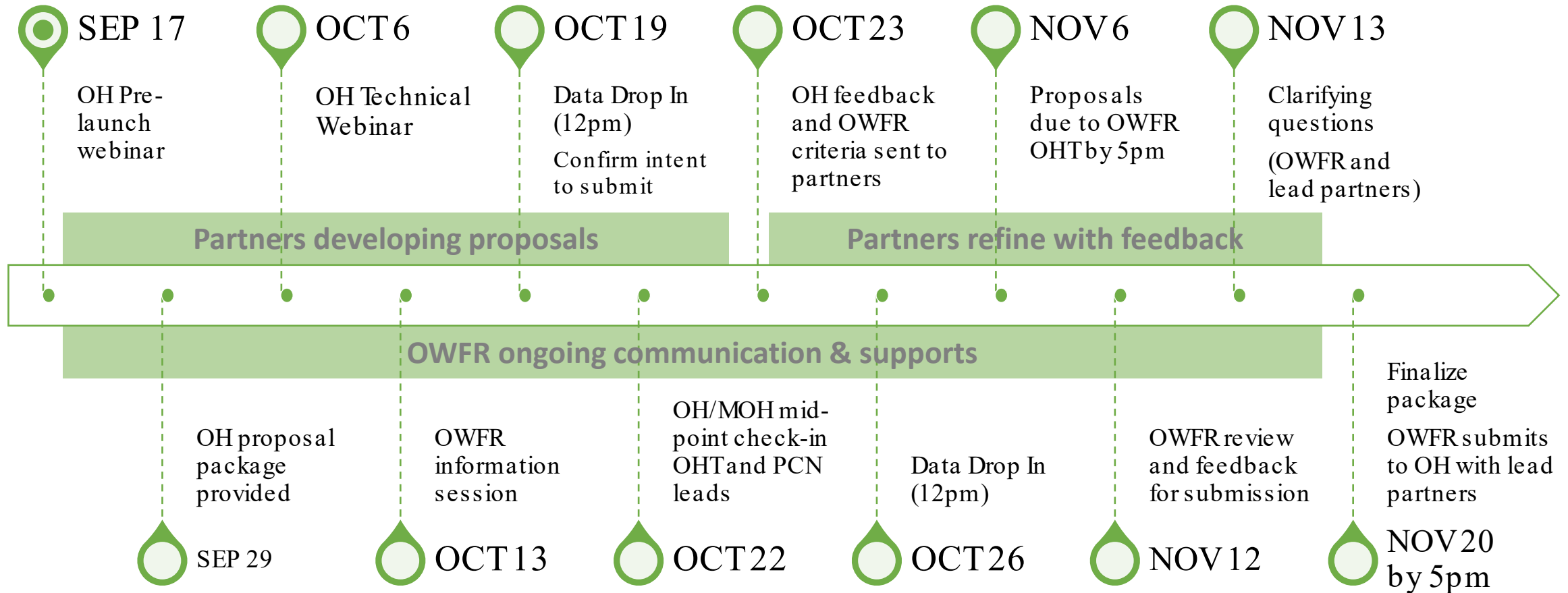
[Register for Updates](#)

Current Status: OPEN

Proposals must be submitted by OHTs and PCNs by November 20, 2026.

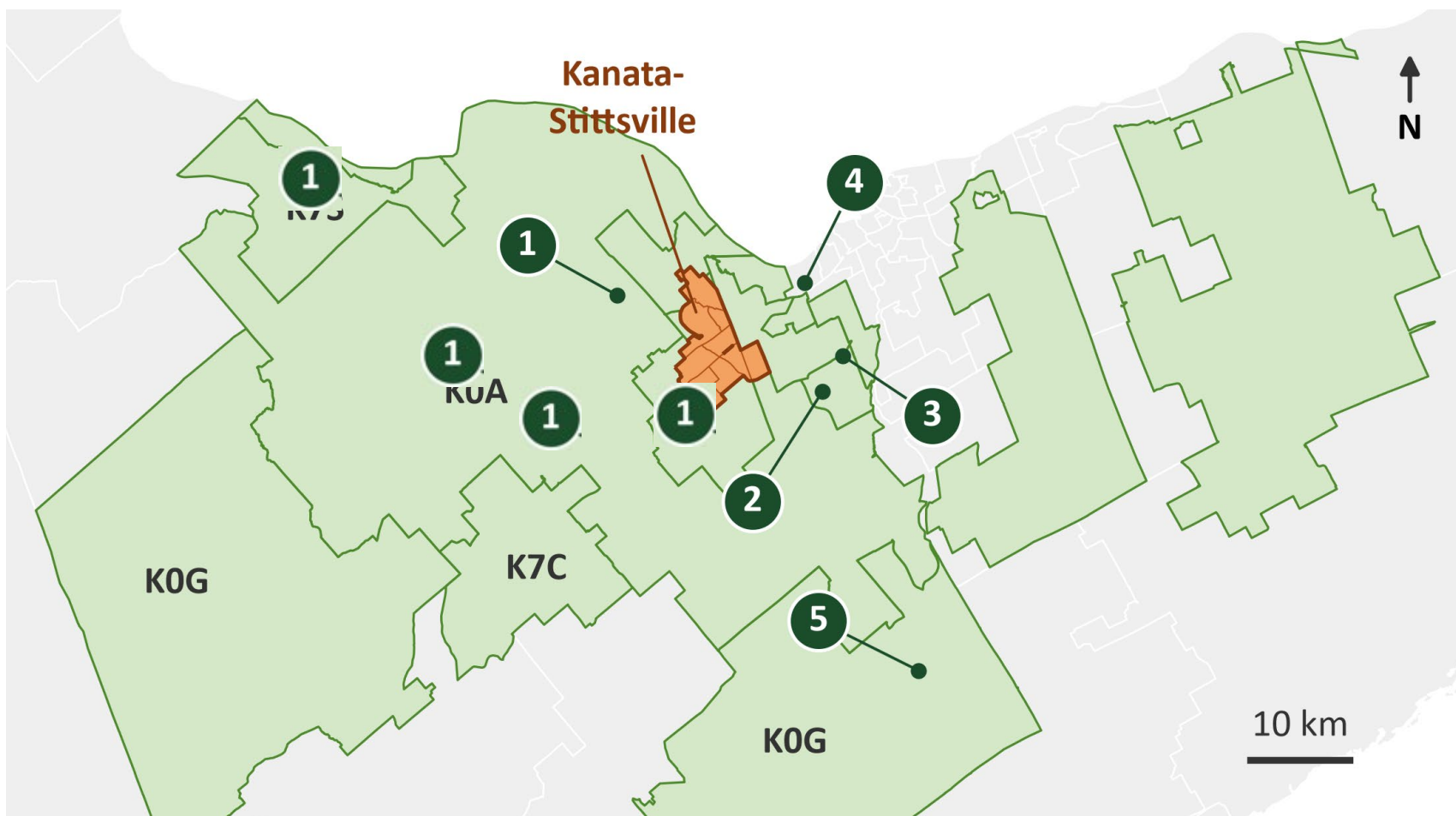


IPCT 2027-28 Proposal Timeline - OWFR



IPCT investment already in place across OWFR

Round 1 & 2: \$9.06M approved
29,470 new attachments



 Kanata-Stittsville (9 ONS neighbourhoods): no IPCT investment yet

 FSAs

- 1** West Carleton FHT + Partners
\$1.86M, 4,550 attachment
- 2** Pinecrest-Queensway CHC
\$1.15M, 2,175 attachment
- 3** Greenbelt FHT
\$1.09M, 9,850 attachment
- 4** Montfort Ottawa West Community FHT
\$2.53M, 6,725 attachment
- 5** Kemptville NPLC and primary care hub
\$2.43M, 6,170 attachment

OWFR Primary Care Organizations Map

[Link](#)



Dark Green – Family Health Team (FHT)



Light Green – Family Health Organization (FHO) associated with FHT



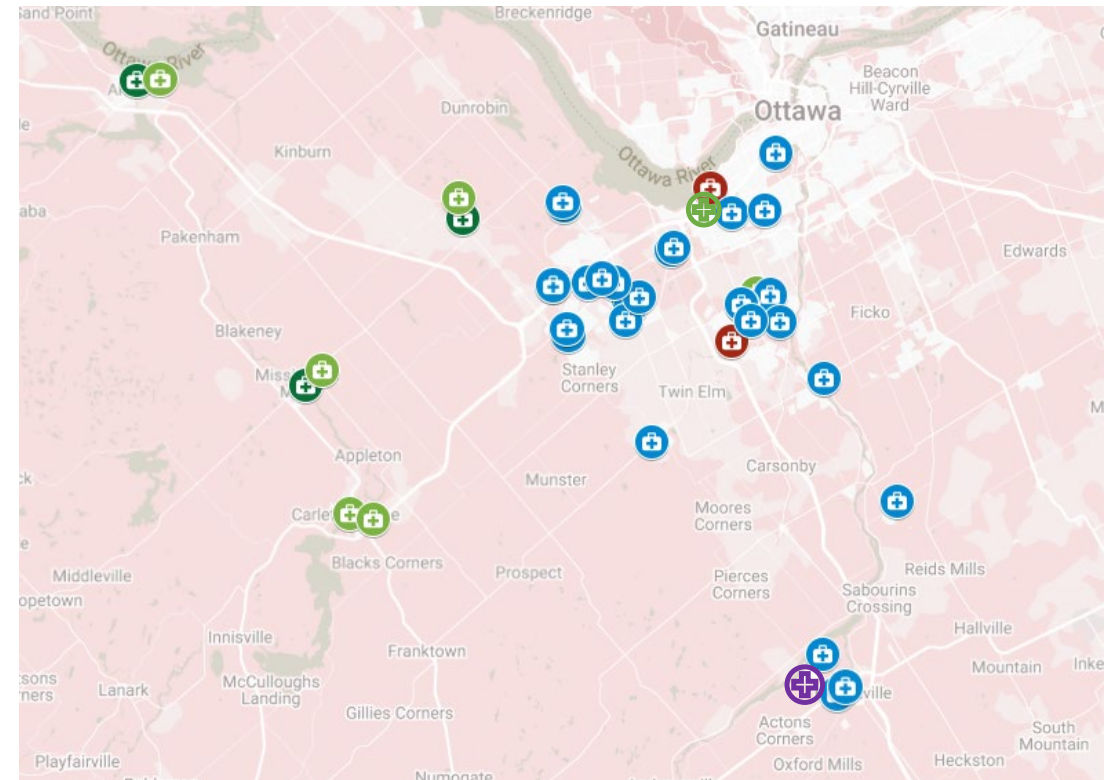
Red – Community Health Centre (CHC)



Blue – Family Health Organization/Group (FHO/FHG), Solo practices



Purple – Nurse Practitioner Led Clinic



OWFR OHT Overall Attachment Indicators

PCAT Data Package (March 2025)

Total Population	489,514
Unattached (N)	58,155
Unattached (%)	11.9%
HCC Pending Referral (N)	13,293

- Uses 2019-20 OHT Attribution Model (OHTAM)
- Includes Jan 2025 data from Health Care Connect (HCC)

PCAT Data Package (Sept 2025)

Total Population	491,555
Unattached (N)	54,963
Unattached (%)	11.2%
HCC Pending Referral (N)	9,985

- Updated 2023-24 OHT Attribution Model (OHTAM)
- Health Care Connect data updated August 1, 2025

PCAT Data Package (May 2026)

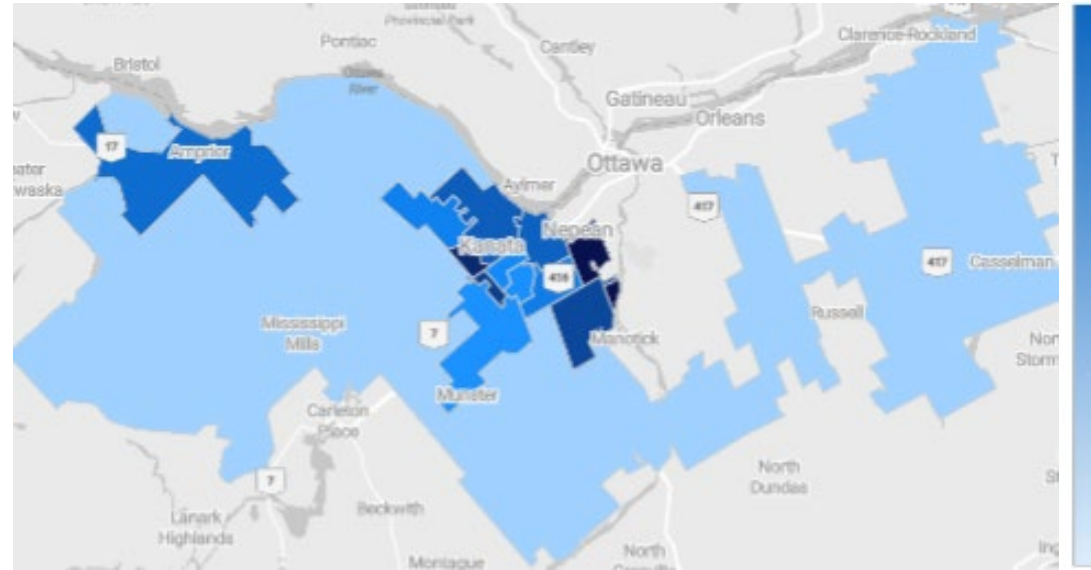
Total Population	503,020
Unattached (N)	49,567
Unattached (%)	9.9%
HCC Pending Referral (Pre-Jan 1, 2025)	0
HCC Pending Referral (Post-Jan 1, 2025)	3,940

- Updated January 2026 OHT Attribution Model (OHTAM)
- Health Care Connect data updated June 1, 2026

PCAT Data Package Methodology: Each forward sortation area (FSA) is assigned to the OHT with the highest proportion of attributed residents. This method continues to leverage the OHT Attribution Model (OHTAM) to quantify each OHT's population "market share" within each FSA.

Breakdown by FSA - 2026

OWFR PCAT assigned FSAs mapped by Number of Unattached
(Darker blue = higher rates of unattachment)



	K0A	K2G	K2J	K7S	K2W	K2K	K2T	K2L	K2H	K2V	K2M	K2R	K2S
Total Population	128,534	53,577	104,134	16,826	10,578	27,888	15,460	19,941	28,608	15,136	31,223	1,337	49,778
Unattached (N)	9,279	6,549	11,593	1,745	1,051	2,977	1,815	1,947	3,030	1,715	2,992	134	4,740
Unattached (%)	7.2%	12.2%	11.1%	10.4 %	9.9 %	10.7 %	11.7 %	9.8 %	10.6 %	11.3 %	9.6 %	10.0 %	9.5 %
# Pending HCC Referral (Post-Jan 1, 2025)	1,577	20	55	212	180	398	284	172	10	258	217	suppressed	557
% Pending HCC Referral (Post-Jan 1, 2025)	1.2%	0.0%	0.1%	1.3%	1.7%	1.4%	1.8%	0.9%	0.0%	1.7%	0.7%	suppressed	1.1%

Kanata Stittsville Taskforce Process

April

CLC and PCN Leadership agree to support a Kanata Stittsville taskforce to address IPCT gap and information gathering to inform approach

May

OHT Kanata Stittsville Taskforce Guidelines established and shared with local practices and Primary Care Council with invitation to participate

June - August

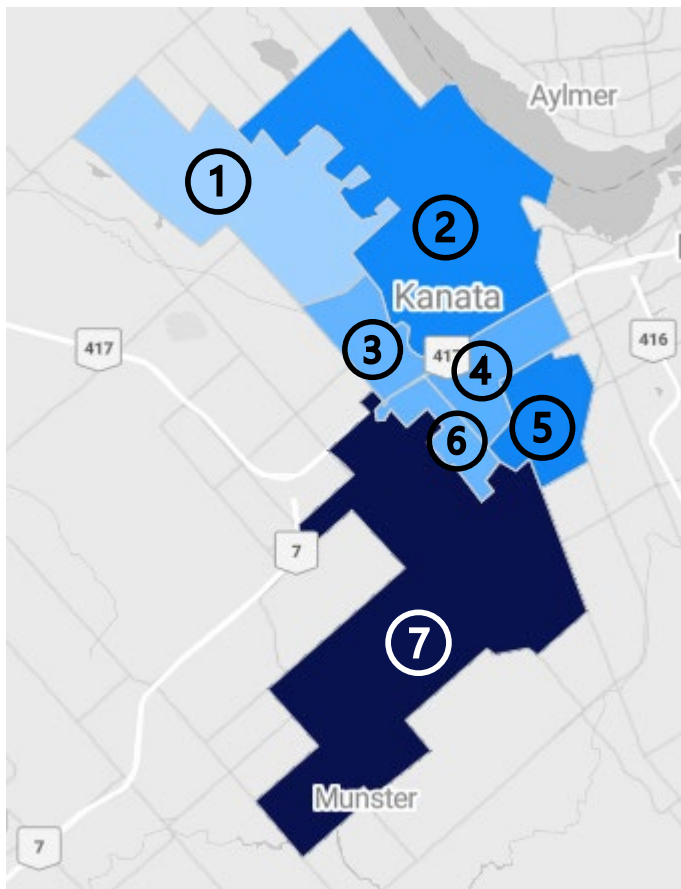
In-person sessions (2), survey, and asynchronous contributions to gather information for capacity assessment and model co-design

Current

Draft recommendations circulated to taskforce contributors to confirm prior to request for CLC and PCN leadership endorsement

The seven FSAs (forward sortation areas)

PCAT boundaries, shown against the rest of the OWFR OHT in grey



	FSA - Description	Total Attributed Population	Total Unattached Population
1	K2W - Ottawa (North March)	10,578	1,051
2	K2K - Ottawa (Beaverbrook / South March)	27,888	2,977
3	K2T - Kanata (Marchwood)	15,460	1,815
4	K2L - Ottawa (Katimavik-Hazeldean / Glen Cairn)	19,941	1,947
5	K2M - Ottawa (Bridlewood)	31,223	2,992
6	K2V - Kanata (Terry Fox / Palladium)	15,136	1,715
7	K2S - Ottawa (Stittsville)	49,778	4,740
Seven FSAs together		170,004 (34%)	17,237 (35%)
Ottawa West Four Rivers OHT		503,020	49,567

*The seven cover **34%** of our OHT's attributed population and **35%** of our unattached population
11,866 patients on the HCC waitlist (**51%** of our OHT's total HCC waitlist)*

Sociodemographic and Access to Care Breakdown – Kanata/Stitsville

Key sociodemographics

- **A diverse population, outside the core** - 28.3% of residents are immigrants and 33.1% are racialized, both a little above the city figures. Some neighbourhoods are much more diverse than others.
- **Fewer francophone residents** - 3.8% speak French most often at home, compared with 10.7% across Ottawa. About 0.4% know French but not English, compared with 1.4%.
- **More families with children** - 19.8% of residents are children, compared with 16.7% across Ottawa, and 52.1% of couple families have children at home, compared with 44.3%. Fewer people live on their own here: 6.5% versus 11.6%.

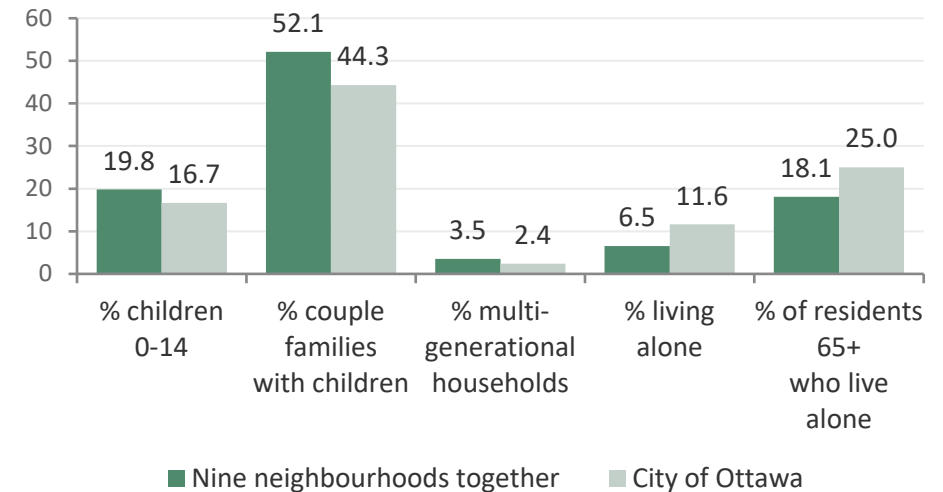
Access to services

5.7%

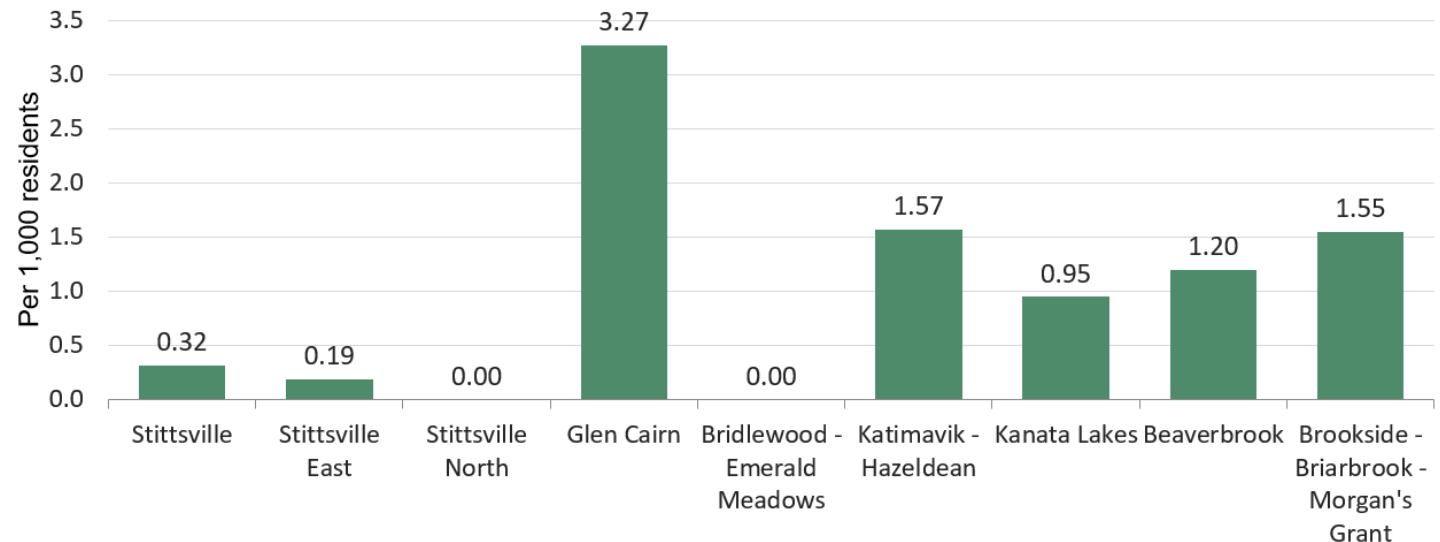
Live within a 15-minute walk of a community health or resource centre

Across Ottawa the figure is 17.5%.
In seven of the nine neighbourhoods, no one does.

Family and household structure (%)



Est. number of family doctors per 1,000 residents, Sept 2026



Taskforce Recommendations – OHT/PCN Endorsed

1

Investment in team-based primary care in Kanata-Stittsville is a recognized priority of the OWFR OHT and grounded in the data shared in April and reconfirmed through this process

2

Core components for a preferred IPCT model for Kanata-Stittsville include:

1. Attachment first
2. Timely access in communities where people live (including identified services and supports)
3. Build on what exists
4. Neighbourhood-based and equitable
5. Collaborative approach
6. Readiness

3

Leverage existing capacity and learnings from previous submissions endorsed by the OHT – consultations identified one backbone group with capacity to lead and coordinate a round 3 collaborative proposal

1. **Short term:** WOCRC will continue convening efforts with local primary care clinics on a collaborative CHC model offering team-based hub supports to local practices (and in alignment with components above)
2. **Moderate term:** continue exploration and planning with Stittsville Health Hub group as they navigate municipal land acquisition and capital site build – well positioned to support growth underway in Stittsville and future expected IPCT call

4

OHT leadership will support coordinated advocacy for local health investment with provincial decision makers for net new IPCT investment during the call and proposal review process

UNDERSTANDING OUR DATA AT A NEIGHBOURHOOD LEVEL

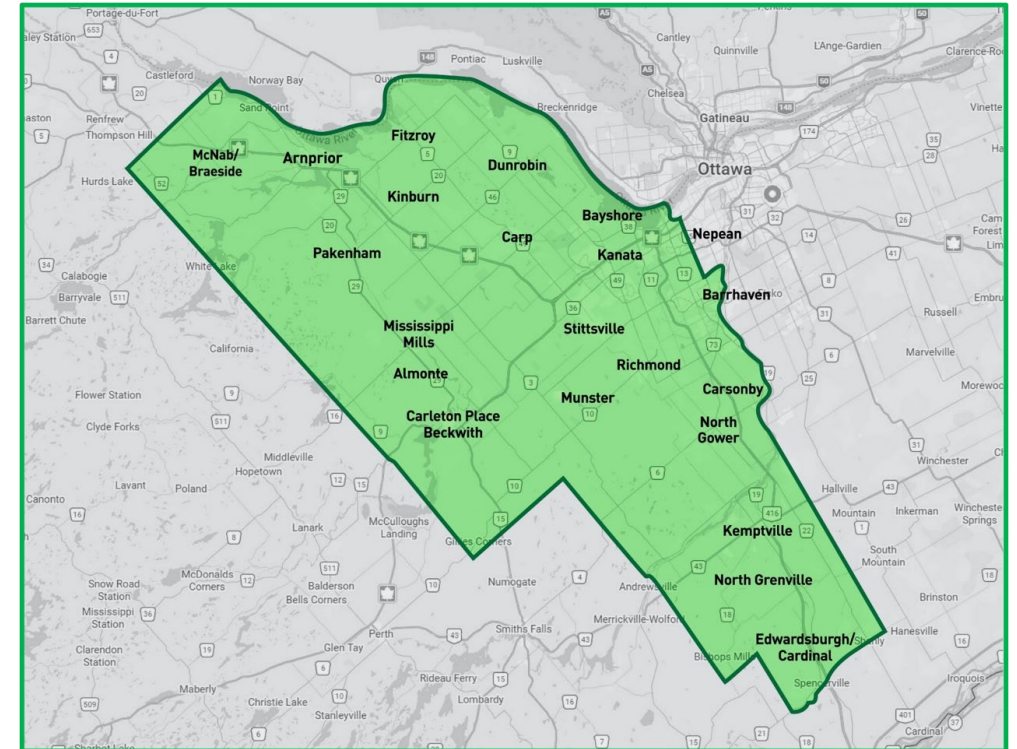
ROUND 3 DATA SUPPORT

OH PRIORITY

Develop proposals that prioritize communities with highest rates of unattachment and ensure underserved populations have access to services that meet their needs

OWFR PRIORITY

Focus data exploration and use available data to support how you will achieve the strategic priorities in the proposal package



The Ottawa Neighbourhood Study (ONS): A place-based framework for equitable health service delivery

- It's a research and data platform that brings together neighbourhood-level data on health and social determinants.
- Housed at Bruyère Health Research Institute; PI: Dr. Claire Kendall
- Helps to prioritize the needs of underserved communities, plan services, and address disparities in Ottawa's neighbourhoods.



Natural
neighbourhoods



Cross-sectoral
data



Resource for
collaborative
action

ONS: 'Natural' neighbourhoods



- Neighbourhood boundaries are drawn with community and service providers
- Not based off standard geographies (FSAs, ADAs, CSDs etc.)
- Evolve with the community (periodically revised)
- Neighbourhoods reflect lived realities of residents and better represent the distinct needs of naturally formed communities



ONS: Cross-sectoral data



Health data

- ❖ OH via INSPIRE-PHC
- ❖ Ontario Community Health Profiles Partnership
- ❖ Health System Performance Network
- ❖ College of Physicians and Surgeons of Ontario
- ❖ Ottawa Paramedic Service
- ❖ Ottawa Public Health



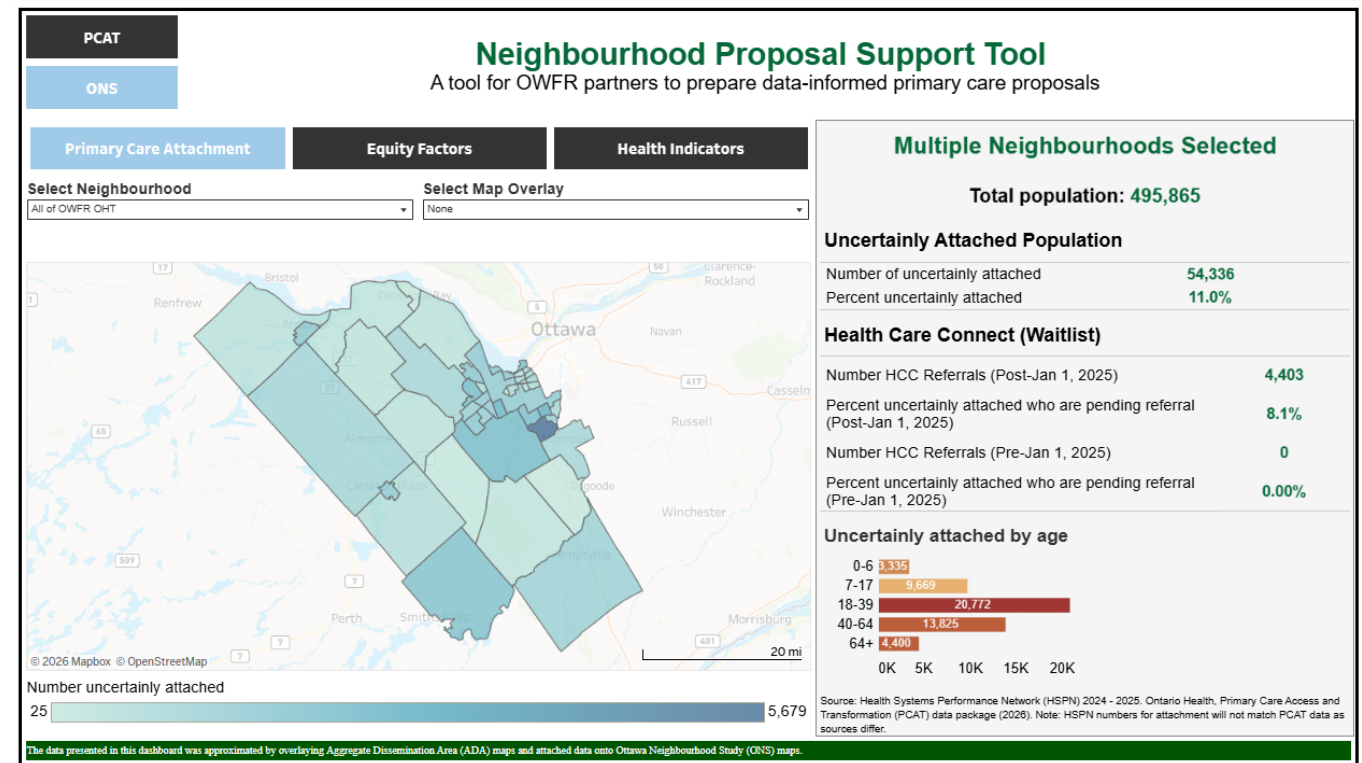
Cross-sectoral data

- Demographic
- Socioeconomic
- Community services
- Transportation
- Public safety
- Housing
- Environment



Neighbourhood Proposal support tool

- **ONS data** – select by neighbourhood or group of neighbourhoods:
 - Neighbourhood unattachment (*note this is not as up-to-date as the PCAT data*)
 - Demographics
 - Health outcomes/services use
 - Socioeconomic status (SES)
- **PCAT data** – select by the unit of interest (FSA/CDS/ADA)
 - Unattachment
 - Demographics
 - Health outcomes/services use
 - Marginalization indexes (PCAT)
- Locations of OWFR FHTs, CHCs, FHOs/FHGs





DATA ACCESS & INFO

OWFR and ONS hosting 2 data DROP-IN sessions:

Use these links to join:

- [Monday, October 19th 12:05 pm – 1:00 pm](#)
- [Monday, October 26th 12:05 pm – 1:00 pm](#)

How to access available data:

- ONS proposal support tool – updated release with PCAT data included – October 13th
- For questions, reach out to our OHT Team who can connect you with mor data or our data support team with ONS
 - Matthew Graveline mgraveline@owfr.ca

ROUNDTABLE

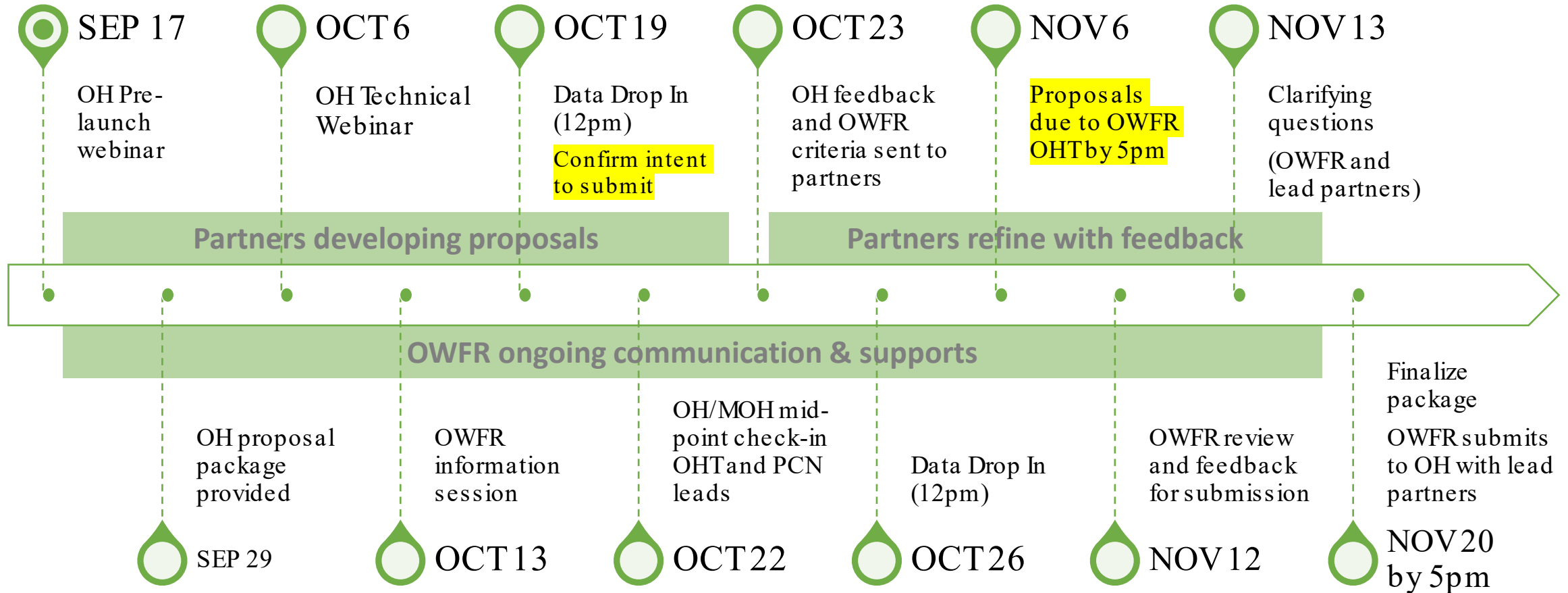


How is *collaborative proposal development* progressing from your perspective?

What *barriers are you facing* or what supports does your group need?

What *questions* do you have?

IPCT 2027-28 Proposal Timeline - OWFR



KEY CONTACTS

Ontario Health Key Contacts	Email
Director Integrated Care (OHT)	laurel.hoard@ontariohealth.ca oh-east-ohts@ontariohealth.ca
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Questions about submissions	primarycareexpansion@ontariohealth.ca

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Matthew Graveline, Primary Care Engagement Lead	mgraveline@owfr.ca



Merci!

Miigwetch!

Thank you!