



P R I N C E E D W A R D FAMILY HEALTH TEAM

Prince Edward Family Health Team Seeking Council Support to Develop New Healthcare Centre

Introduction

The Prince Edward Family Health Team is seeking the support of the Municipal Council for Prince Edward County in the development of a 25,000 sq. ft. healthcare centre. It is our belief that the contribution of serviced land from the municipality when combined with the financial commitment we have from ten of our community family physicians that we will be successful in accessing the Ministry of Health funding necessary to complete the construction of a brand new primary health care centre for Prince Edward County.

While the past 12 months have seen numerous accomplishments – more health professionals, increased patient enrolment, increased health programs and specialist services, outreach to military families and a brand new website, there remain many challenges facing the Prince Edward Family Health Team. The most daunting continues to be the securing of appropriate space where physicians and allied health professionals can work together in a true team environment.

Primary healthcare professionals working as partners in a team approach results in better health outcomes, improved access to services, improved use of resources, and greater satisfaction for both patients and providers. Teams are better positioned to focus on health promotion and improve the management of chronic diseases. Through this approach, and supported by our electronic medical records, all aspects of personal care are brought together in a coordinated way.

We are a Community which delivers primary health care services that are the envy of many Ontario communities. Prince Edward County's reputation for dedicated family physicians with competent and caring office personnel pre-dates the creation of the Family Health Team but that standing has now been enhanced by the inclusion on the team of new highly trained health care providers. We have also developed a reputation as one of the "go to" teams in Ontario who are prepared to pilot new programs for innovative family health care and to work collaboratively with other providers.

We continue to be contacted by health professionals and medical specialists who want to be part of this experience – it is people and places that draw these professionals and we benefit from having the best of both.

Background

In September of 2007 the PEFHT was approved by the Family Health Team Branch of the Ministry to hire 9 additional allied health professionals (AHPs). Also in 2007 we were one of six Family Health Teams selected to participate in a Telehomecare Project with funding from the Ontario Telehealth Network which allowed us to hire an additional 2 RNs. These 2007 approvals when



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added to our 2006 approvals of 9 AHPs and the 2 AHPs funded through the Ministry's Diabetes Education program means we are now eligible to hire a total of 22 allied health professionals. To date we have filled 13 of these positions.

Many of the 9 vacant positions – most notably for nurse practitioners and registered nurses - remain unfilled while we seek suitable space for a collaborative team-based approach with family physicians. All of our health professionals are negatively impacted by the absence of clinical space from which we can provide team-based care.

While this remains our biggest deficit, we can now boast two locations where family physicians and AHPs are working together through one door and one waiting room: Sandbanks Medical Centre in Wellington, home to our Diabetes Education Program and also where a nurse practitioner and a new Social Worker work in close collaboration with three physicians and their office professionals; and our temporary location at Harbourview Clinic in Picton, where a nurse practitioner and an RN work alongside two physicians.

We currently have six specialist physicians who have been drawn to the Family Health Team and Prince Edward County. They came here to work as a team with family physicians and other health professionals – only in Wellington can we provide that opportunity. We have had inquiries from four other specialists interested in working with our Team, however, until we have suitable clinical space in Picton we are unable to provide them with the team setting they seek.

Current FHT and Physician Space

The PEFHT and member physicians currently occupy approximately 14000 sq. ft. in Picton, 4000 sq. ft. in Wellington and 900 sq. ft. in Rossmore (administrative only). In Picton only 1300 sq. ft., less than 10%, can be used for family physicians and other health professionals to work collaboratively in a shared work environment. In Wellington all 4000 sq. ft. have been designed and built for team based delivery of primary health care services.

Our evaluation of space needs recently submitted to the Ministry of Health indicates that Family Health Team professionals alone, when all vacant positions have been filled, will require over 13,000 sq. ft. of team space in Picton. We are intending that 11,000 sq. ft. of that space will be in the new Picton medical centre. The remaining space in the 25000 sq. ft. healthcare centre will be leased by family physicians and some of our community healthcare partners.

PEFHT Patients

As at the end of May 2008, the Family Health Team and its 22 family physicians were providing services for more than 22,000¹ patients. There has been an increase of close to 5,000 patients over the two year existence of the Family Health Team.

¹ Includes both rostered and non-rostered figures.

Future Building

Ministry Opportunity

The MOHLTC has supported Family Health Teams in other communities in the development of new clinical space. MOHLTC may support this where lack of space is hampering service delivery as it is in Prince Edward County. The Ministry does not consider this to be capital funding for this purpose. What they have done for other communities is front-ended Family Health Team lease payments and permitted these funds to be used for new construction. We anticipate that we are eligible for funding in excess of \$2M under this plan. This funding, when combined with long-term leases at market rents signed by ten family physicians, will successfully finance the construction of appropriate medical space.

In other communities, the most difficult part of financing the project has usually been in the acquisition of serviced land. This is where the contribution of a serviced lot by Sandbanks Homes Inc. was so crucial to the financing of the Wellington satellite clinic. In most other Ontario communities it has been necessary to seek local support for at least the purchase of serviced land, although additional financial contributions have also been required in a number of cases.

Since the Ministry of Health has no intention of owning or operating these facilities, an important requirement has been that ownership rest with a stable not-for-profit (NFP) entity to ensure long term availability of the service. In order to provide that stability the Ministry has made municipal involvement an essential component of the package. In addition to the provision of serviced land (in some cases including an existing building) the involvement of municipalities has been to create an ongoing linkage with the facility through the participation of municipal nominees on the NFP board. (We know of five other Ontario communities where the municipal commitment has ranged from \$800,000 up to \$5M in funding, land and servicing for projects not dissimilar in scale and in some cases smaller than the one we are proposing.) It is worth noting that, while the Ministry supports assigning the ownership of the facility to the contributing municipality in the event that it ceases to be used for its original purpose, it does not ask municipalities to undertake financial guarantees for the performance of the NFP.

Our urgency to secure similar commitments in Prince Edward County comes through our knowledge that the Ministry, understandably, will not invest large amounts of money in a community where there is no evidence that the initiative will be successful. We are also aware that a number of other Family Health Teams and their communities are currently seeking the same front ending of FHT rent from the Ministry. The Ministry's capacity to provide this funding is finite. The sooner we are ready, the greater the likelihood that the Ministry funding will be available to our community.

Physicians

Thus far the only funding commitment that this project can count on is the financial support of the participating ten family physicians. This funding support will come in the form of long term leases under which family physicians will pay rents (estimated to be on average 25% greater than current rents) for the space used by the family physicians and their staff.

Request to Council

At a minimum, we are asking Council to provide the physicians and Family Health Team with a long term low cost lease for serviced land upon which we can build a multi-million dollar healthcare centre for our County. We are asking that this land be of sufficient size to allow for immediate construction of a two story 25,000 sq. ft. medical clinic with potential for future growth to 40,000 sq. ft. to accommodate more family physicians and future growth of the Family Health Team as well as our partnerships with the Community Care Access Centre, Public Health, Hospice Prince Edward and other community healthcare partners. In addition, we would like to be able to support the future development of a 3000 sq. ft. 8 bed palliative care hospice within the lands provided. Three acres is required for immediate and future development.

For over a year family physicians and the FHT have exhausted many avenues of private partnership for this project with no resolution. In April of this year we became aware of the Ministry funding opportunity and since that time have spent countless hours in the dogged pursuit of no less than nine different property plans, six of which have been on land adjacent to the Picton Hospital, with the other three in the immediate vicinity. Cost and/or time pressures have been the most critical limitations in selecting from among these opportunities.

Building Ownership/Governance

We are currently pursuing the establishment of a not for profit corporation to oversee the building and operating of the facility. We invite the Municipality to appoint two community representatives to the board of this entity.

Community Benefits from Deal

- Strengthened Family Health Team with more health professionals, additional specialist services in County and the potential for clinical service expansion to North County.
- Continued physician leadership of recruitment of new physicians, and proven enticements to new medical graduates through availability of excellent clinical space in a collaborative, team-based environment.
- Sufficient capacity to off-set negative impact to patients of future physician retirements or departures.
- Improved capacity to serve locally the increasing complexity of health care demands of our aging patient population.
- Better access and improved coordination of multiple scheduled appointments. Same day access to multiple services.

Community Risks from No Deal

- No capacity to grow Family Health Team services or increase specialists, physicians and other health professionals.
- Family Health Team ceases to be employer of choice for health professionals; and, physician commitment to Team wanes in face of increased uncompensated obligations coupled with minimal rewards.
- In most other communities where these events occur, physician recruitment and costs fall to the municipality.
- Departure/retirement of family physician(s) can leave thousands of residents without primary healthcare provider.
- PEC moves from healthcare “have” to “have not” community with serious implications for overall community vitality and growth.