On September 21, the College of Family Physicians of Canada released A Vision for Canada. Family Practice—the Patient’s Medical Home¹ (available at www.cfpc.ca). We hope this document will form the blueprint for the next generation of family practice in Canada.

The Patient’s Medical Home (PMH) is a family practice defined by its patients as the place they feel most comfortable—most at home—to present their medical concerns. It is where patients, their families, and their personal caregivers are active participants in the decision making and provision of their ongoing care. It is the home-base for the continuous interaction between patients and their personal family physicians, who are the most responsible providers of their medical care. It is where a team of caregivers, including nurses, physician assistants, and other health professionals—located at the same physical site or linked virtually from different practice sites throughout the local or extended community—work together with patients’ personal family physicians to provide and coordinate a range of health care services. The PMH is where patient-doctor, patient-nurse, and other therapeutic relationships are developed and strengthened over time, enabling the best possible health outcomes for patients, the practice population, and the community it serves.

The vision of family practices serving as PMHs is intended for the consideration of all who are concerned about the health of Canadians and the health care they receive. This includes family physicians, the health professionals and staff who work with them in their practices, and other stakeholders (eg, medical specialists, governments, medical schools, and health care organizations) whose responsibilities intersect with those delivering family practice services. Most important, this vision is intended for the people of Canada, 30 million of whom are currently cared for by family physicians in urban and rural family practices throughout the nation and 4 to 5 million of whom do not have personal family physicians.¹

While there are some shared elements with other international medical home models, ours is a made-in-Canada vision, one that embraces Canadian values of equality, fairness, and access to care for all people. It is intended to build on the long-standing historical contribution of family physicians and other health providers to the health and well-being of Canadians, as well as the recent models of family practice and primary care that are being introduced across the country, such as Alberta’s Primary Care Networks, which have embraced “the concept of the patient-centred medical home as a strong starting point”; Ontario’s family health teams, which are already achieving considerable positive outcomes for 2.5 to 3 million people in Ontario and are probably the “largest experiment of the patient-centred medical home anywhere in North America”; and Quebec’s family medicine groups, which have been found to have a “positive impact on the accessibility, coordination, and comprehensiveness of care and patient knowledge.”¹

The PMH is intended to strengthen, not replace, family practices in rural and urban Canada. It will enable family practices to incorporate the best of all experiences into their individual realms, while remaining focused on the unique needs of their own province or territory and local community. The PMH recognizes both the changing needs of Canadians and the evolution that is unfolding in the way family physicians and other health professionals provide care. It is focused on enhancing patient-centredness through the collaboration of patients’ family physicians and other health professionals.

Unfortunately, recent studies show that compared with people in other developed nations, Canadians today are less satisfied with their access to and quality of care and that there are poorer health outcomes in Canada for several medical conditions.¹ The vision of the PMH is to see levels of satisfaction and the health outcomes of Canada’s population once again ranked among the world’s best.

The goals and recommendations of the PMH, therefore, can serve as indicators, enabling us to evaluate the effectiveness of any and all models of family practice throughout Canada. Those family practices that meet these goals and follow these recommendations will have become PMHs. Every family practice across Canada should be encouraged and supported by our health system to achieve this objective. Every person in Canada seeking the best possible care deserves to see the vision of the PMH fulfilled.

Reference