

Patient's Medical Home update

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In 2011, the CFPC released its Patient's Medical Home (PMH) as a vision for the future of family medicine in Canada. Currently, the CFPC is refreshing the PMH to reflect changes within the health care system and to recognize the progress made within several provinces.

The CFPC had several objectives on launching the PMH: support family physicians in providing the best care to their patients; support recruitment and retention by improving practice conditions; improve efficiency within primary and other levels of care through the use of interdisciplinary teams; and improve relationships among physicians, their patients, and other health care providers by responding to changing health care needs within their communities.

Practices aligned with the PMH principles have been shown to produce increased satisfaction in both patients and health care professionals,^{1,2} decreased use of emergency care,³⁻⁵ and better management of chronic conditions.^{6,7} A 2015 Commonwealth Fund survey found that primary care teams supported by public funds provided better coordination of care and follow-up to their patients.⁸

By refreshing the PMH vision, the CFPC wants to see greater integration between family physician practices and other health care providers, which would support the health care system and its ability to provide improved patient services. Another important objective is to place greater emphasis on the community served by a practice and to tailor the services provided to that community. Close attention will also be paid to improving data gathering and the quality of evidence to ensure that progress is being measured and recognized.

The CFPC continues to request that the federal government better supports and improves the quality of primary care. Unfortunately, there is no structured approach to implementing coordinated reforms right across Canada that are in line with the vision of the PMH. However, several provinces are making progress in realizing their own visions of the model of care proposed by the PMH.


In 2012, I founded a family medicine group (the type of practice in Quebec that is PMH-aligned) in my own community. Our progress since then has been incredible. We have hired several health care professionals and have learned how to manage and work with them. We have adopted electronic medical records and learned how to use them to better communicate among ourselves. We began by first working individually—as we had in the

past—and then by increasingly working as a team to provide better group accessibility.

We now have a more efficient organization that is also more complete in its ability to provide primary care. To achieve a high-functioning PMH practice, we need family physicians with strong management skills who are ready to assume leadership. We also need support from our governments and medical organizations.

I also recognize that many communities throughout Canada do not currently benefit from the added value of a PMH. Many provinces are still in the early stages of developing their own model of interprofessional care, while other provinces with well established models do not make them available to all citizens.

During my year as President of the CFPC, I have noticed that some provinces attempting to create primary care teams do not always consider all elements of the PMH's vision. Specifically, while promoting teamwork governments must not forget that every patient must have his or her own family physician, because a family doctor provides continuous, comprehensive medical care and connects the patient to other parts of the health care system, such as other medical specialists. We have the opportunity to emphasize the essential elements of the PMH vision when meeting with health ministers.

In reviewing the PMH vision and meeting with federal and provincial governments, the goal of the CFPC and its Chapters is to support your practices, remind elected leaders of the unique value of family physicians, and provide all in Canada with the best primary care. 

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