Family physicians: At the front of the line of primary care in Canada

Better Patient Health and Greater Patient Satisfaction: Care from a family physician

Canada at a glance

17 out of 20 people in Canada have a regular health care provider¹

- Of the population with a regular provider, 19 out of every 20 providers is a family physician²
- The majority in Canada—16 out of 20 people—are satisfied with their provider³

Many people in Canada understand the benefits of a long-term relationship with their health care provider. Canadians are seven times more likely to want care from their own family physician rather than a family physician they do not know.³

Patient health outcomes

Having a family doctor is the best way to ensure access to continuous and comprehensive primary care. Patients with a family doctor consistently show better health outcomes across a variety of indicators.⁴,⁵,⁶

Having a family doctor can lower the risk of rehospitalizations and emergency department use for:

- Patients without a primary care provider experience a high burden in managing their health care (medical history, navigating the health system, time and travel costs).²²

A greater supply of family physicians is associated with:

- Longer life expectancy¹⁴ and fewer preventable hospitalizations and premature deaths¹⁵
- Better health outcomes including reduced mortality,¹⁶,¹⁷ improved health status and quality of life, and better health after age 40
- Improved outcomes for people with chronic conditions¹⁸ and improved maternal and child health outcomes¹⁹,²⁰,²¹

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Family doctors provide high-quality care to patients—family physicians performed better on nine out of 10 quality measures²³ than other primary care providers.*

* Includes average number of patients who received an influenza vaccine, were screened for breast and colon cancers, and patients with diabetes who had good results on an average glucose level test.
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Adaptive During Changing Times: Family physicians during the COVID-19 pandemic

COVID-19 response

During the pandemic, family physicians stepped up to bolster the health system’s response to COVID-19, including staffing assessment centres, assisting in long-term care homes, working in emergency departments and hospitals, and vaccinating the public in their practices and at vaccination clinics.24

1 in 3 family physicians staffed COVID-19 assessment centres

1 in 2 family physicians cared for non-hospitalized patients with COVID-1925

Most family physician offices stayed open during the pandemic,26 providing both virtual and in-person care to patients.

• For example, in Toronto, 19 out of 20 of family physicians were still seeing patients in person and almost all practices were open for either in-person or virtual visits24

Virtual care

Family physicians pivoted rapidly to virtual care delivery at the start of the pandemic. Virtual care has offered a host of benefits to patients, including cost and time savings, patient satisfaction, and improved access to care for many people.27

• Family physicians have maintained high patient satisfaction with care delivery despite the shift to virtual care3,28
Family Physicians as a Key Part of an Efficient Health Care System: Cost savings and improved access to care

**Health care savings**

- Continuity of care with a family physician is associated with **lower costs for the health care system**\(^{29,30}\)
- Recent evidence indicates that **family doctors are more cost-effective than other allied health providers**; health care spending per patient is lower when patients see family doctors\(^{31}\)
- Family doctors see 46 patients for every one person admitted to a hospital\(^{32}\)—and patients who regularly receive primary care are **less likely to be hospitalized**\(^{13}\)
- In Canada, the average visit to a family doctor in a fee-for-service model costs $50\(^{33}\) while the average hospitalization costs approximately $6,350\(^{34}\)—**investing in primary care saves health care dollars**

![Comparison between $50 and $6,350](image)

- Family practices that are aligned with the Patient’s Medical Home vision of care show significant cost savings: two Alberta practice models realized health system savings of $4.3 million and $7.2 million respectively\(^{35}\)

**Access to Care: Family physicians in the Patient’s Medical Home**

- Patients whose family doctors belong to interprofessional primary care teams have more **timely access to care**, including same-day and next-day care, and are less likely to use walk-in clinics\(^{36}\)
- Adopting family physician-led team-based care:
  - Allows family physicians to care for more patients\(^{37}\)
  - Can reduce emergency department use\(^{38}\)
- In rural areas, employing primary care doctors within hospital care has been shown to improve access to care, quality of care, and patient/provider satisfaction\(^{39}\)
Physician health and well-being is an important issue for doctors, patients, and health system sustainability. The COVID-19 pandemic has exacerbated existing issues in the health care system and family physicians are experiencing higher than ever levels of burnout.

- Over half of physicians reported high levels of burnout—physician burnout has almost doubled since before the pandemic.\(^{40}\)
  - Symptoms of burnout are more prevalent among family physicians (57 per cent) compared to physicians in other specialties (40 per cent).\(^ {41}\)

Approximately one in two physicians in Canada are considering decreasing their amount of clinical work in the next two years.

- Fifty-seven per cent of family physicians are likely to reduce their clinical hours in the next 24 months compared to 47 per cent of physicians in other specialties.\(^ {41}\)

Three out of five physicians indicated that their mental health has worsened since the onset of the pandemic and most attribute this decline in mental health to a greater workload and poor work-life balance.\(^ {40}\)

- Much of family physicians’ time is taken up with administrative tasks and paperwork
  - Reduced time spent on the most meaningful facets of clinic (direct patient care) puts physicians at significantly higher risk for burnout and occupational stress.\(^ {62}\)
  - Lower intensity/volume of workload and less administration are the top factors that may incentivize physicians to remain in practice.\(^ {43}\)

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Contact us at healthpolicy@cfpc.ca with questions and comments.


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