

Prescription for Primary Care 2.0

Every Canadian should have a family doctor. Being a patient of a family physician consistently leads to **better health** and **more effective systems** but right now we do not have enough family doctors in Canada. Canadians **value the expertise, dedication, and care provided by family doctors** and recognize it as irreplaceable and worthy of support.

The time is right to guarantee a strong foundation of health care for all Canadians by encouraging and empowering family doctors and, by extension, creating a robust and thriving system of primary care.

This is the CFPC's Prescription for Primary Care:



Recognize and celebrate the value of family doctors

All decision makers must recognize that there is no substitute for a family doctor and acknowledge the **family physician's foundational role** in health care and primary care, underscoring the importance of patient access to a family physician.



Administrative burden – Family physicians are inundated with many administrative tasks, many of them low-value, from inefficient referrals to excessive forms, amounting to 10 to 19 hours every week. Removing

the gatekeeping role for social supports (e.g., **Disability Tax Credit**) frees up time for nearly 1,000,000 more patient visits per year. Federal and provincial governments must immediately focus on minimizing the number of forms family doctors are asked to complete, while also simplifying or eliminating other forms. Provincial legislation can reduce reliance on unnecessary physician attestation (**Quebec's Bill 68**) and sick notes (**Nova Scotia's Bill 256**). Upscaling proven provincial successes such as the **Pathways BC tool** can enhance the efficiency of referrals.



Team-based care – Primary care is best when delivered by interprofessional teams featuring the clinical leadership of family doctors, as described by the **CFPC's Patient's Medical Home** vision. Every team and every patient should be able to rely on the clinical

expertise of a family physician, even when some of the care is provided by another team member. It is imperative that team-based care be based on principles of collaboration and not substitution. We urge further investment and development of team-based structures to make sure that family doctors are supported in providing high quality primary care and patients receive expanded access and comprehensive care.



Fair and equitable remuneration – New **physician service agreements** signed in multiple jurisdictions have introduced measures improving family physician pay and working conditions and they are bringing

family doctors back to practice. This means that creating dedicated funding for family medicine (including through the **bilateral funding agreements** announced in 2023), which improves financial appeal and sustainability, would contribute to enhancing recruitment and retention of family doctors, growing the workforce, and making care more accessible. All care must be supported and robust funding for virtual care and home care must be reflected to meet patient needs.



Streamlining international certification

International medical graduates (IMGs) support the health workforce to meet the needs of Canadians. The CFPC proposes multiple enhancements to the IMG certification process (collectively known as **Project ReIMGine**), enabling IMGs to be certified in Canada sooner and to contribute while working toward certification, enhancing access to care.



Federal medical student loan repayment deferral

– Family medicine residents typically carry significant student debt while earning a modest salary. We urge additional student loan forgiveness programs for family

physicians who provide comprehensive care. We recommend medical student debt repayment for family medicine residents be deferred until they are five years into full practice. Easing this financial burden will attract more medical graduates to family medicine, growing the workforce and making sure more family physicians will be ready to care for Canadians.

