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Title

Pandemic Reflection: Significant change is needed to tap into the power of primary care during times of crisis

Priority 1 (Research Category)

COVID-19

Presenters

Deirdre Snelgrove, Steve Slade, BA, Elena Dias

Abstract

Context: As a front-line resource, primary care could function as an indispensable health system resource during pandemic crises. However, throughout COVID-19, Canada's primary care providers expressed concern over their ability to respond. This study investigates factors related to these concerns, suggesting key areas for future primary care system development.

Objective: Assess specific areas where robust, well-supported primary care could contribute significantly to the health system's pandemic response, & factors that may have prevented it from doing so.

Study Design: Online, self-report survey administered over 3 weeks, April-May, 2021. Survey invitations sent via email, with three reminders following initial contact.

Setting or Dataset: The College of Family Physicians of Canada (CFPC) membership list was used to reach family physicians in diverse practice settings in all Canadian provinces and territories.

Population studied: All active CFPC family physician (FP) members were included. Most FPs in Canada are CFPC members; 39,991 FPs received survey invitations; 3,409 replied, for an overall response rate of 9%.

Outcome Measures: Percent of FP engaged in systems level, pandemic response measures, including: 1) reporting COVID-19 cases to public health authorities, 2) identifying priority patients for vaccination, 3) participating in COVID-19 task forces, & 4) contributing to COVID-19 research/clinical studies.

Results: Overall, one-third (34%) of FPs say that family practices in their region report COVID-19 cases to public health authorities. Most FPs (55%) say that their practices have not been asked to identify priority cases for COVID-19 vaccination. Less than 1-in-5 (19%) FPs have been involved in COVID-19 advisory/planning committees, task forces or groups. Very few FPs (6%) contribute to COVID-19 research/clinical studies. Half of FPs (50%) are highly concerned about the lack of clarity from government regarding FP response to the pandemic. These findings vary across jurisdictions and practice/remuneration models.

Conclusions: Canada's primary care system has not been adequately engaged in important COVID-19 response measures, including monitoring viral spread in the population, pandemic planning, vaccination roll out, and therapeutic research. Practice models and remuneration arrangements are related to primary care's responsiveness to the COVID-19 pandemic, & should be considered in future primary care health system development.