

Intelligence MEMOS



From: Don Drummond and David Jones
To: Canada's Healthcare Observers
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Re: **IMPROVING ACCESS TO PRIMARY HEALTHCARE**

A 2022 [survey](#) suggests that 22 percent of Canadians 18 years of age and over do not have a family physician or nurse practitioner they can see regularly for care. Extrapolating across the Canadian population, roughly 6.5 million adults are [uncovered](#).

Let us examine how we can boost primary care coverage to Canadian adults from 78 to 85 percent.

The average annual growth rate in the number of Canadian family medicine physicians was 1.4 percent over the three years 2019 to 2021 inclusive. Even if this growth rate were sustained, it would not by itself increase the percentage of Canadians covered, as the population is [forecast](#) to grow at a similar pace. Furthermore, sustaining annual staffing growth at 1.4 percent might be a challenge, given the dwindling interest of medical students in family medicine, combined with [signs](#) of increasing retirement rates amongst family physicians. Population ageing [increases](#) healthcare needs, making it a challenge simply to maintain the number of people cared for by each physician. Offsetting this pressure however is the [younger age profile](#) of the Canadians currently without a primary care giver.

With population growth matching the recent pace of increase in family medicine specialists, boosting the covered population to 85 percent would require increasing the average number of people rostered by each physician by almost 10 percent. Complementary measures would be necessary to support such expansion, especially considering the burnout reported by many family doctors.

Nurse practitioners can and should play a key role in this. In 2021 there [were](#) only 7,400 nurse practitioners in Canada, just one-sixth the number of family medicine physicians and not even one nurse practitioner per 5,000 Canadians. But the number of nurse practitioners has been growing rapidly, including a 10.7-percent increase in 2021. The average annual growth rate of family medicine physicians and nurse practitioners combined was 2.3 percent over the three years 2019 to 2021 inclusive. Appropriate use of nurse practitioners, with [fuller scope of practice](#), would increase the portion of Canadians with regular access to primary care. These scopes of practice vary widely across provinces and territories. Ontario has had nurse-led clinics since 2007. Nova Scotia is piloting walk-in clinics with nurse practitioners in pharmacies. And a growing number of provinces have granted them permission to prescribe certain medications.

If, for illustration, nurse practitioners were used as effectively as family physicians in increasing primary care coverage, continuation of the combined 2.3-percent growth in numbers could take the portion of Canadian adults with regular access to primary care from 78 to 83 percent by 2028.

Meanwhile, reducing the administrative burden on primary care providers would free up time to directly serve health needs. In a recent Ontario College of Family Physicians [survey](#) of more than 1,300 family doctors, 94 per cent said they are overwhelmed with administrative/clerical tasks. Survey work by [Doctors Nova Scotia](#) found physicians in that province spent 10.6 hours per week on administrative tasks, 38 percent of which was deemed unnecessary because others could perform those tasks (24 percent) or eliminated entirely (14 percent). Results are likely similar in other provinces and the territories. Adding four hours per week (38 percent of 10.6 hours) could facilitate a 10-percent expansion in patient rosters and would deliver the aforementioned increase in primary care coverage from 78 percent to 85 percent. While achieving efficiencies of this magnitude is challenging, [emerging technological advances](#) offer significant opportunity, for example, using artificial intelligence and speech recognition to automate patient notetaking.

Urgent action is needed to improve access to primary care. This requires workforce growth and productivity gains, such as those discussed above, supported by funding growth to pay for the increase in health services. A near-term target to be achieved no later than 2028 would be to increase the percentage of Canadian adults with regular access to primary care from 78 to 85 percent. With anticipated population growth, that would still leave almost 5 million Canadians 18 years of age and older uncovered in 2028, little reduced from the current 6.5 million. A welcome improvement, but clearly more progress would be required.

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