



**Ontario Health**  
Toronto

# Toronto Region Primary Care Workforce Planning Toolkit User Guide

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# Introduction

This document is an accompaniment of the Toronto Region Primary Care Workforce Planning Toolkit. The different outputs of this toolkit build on each other to provide a comprehensive overview of primary care workforce needs. The User Guide outlines the steps to undertake when conducting this type of analysis.

For questions, assistance or more information, please contact Ontario Health Toronto, Health Analytics [OH-TorontoHealthAnalytics@ontariohealth.ca](mailto:OH-TorontoHealthAnalytics@ontariohealth.ca)

## User Guide

The Toronto Region Primary Care Workforce Planning Toolkit synthesizes evidence to inform workforce planning. The toolkit includes a suite of data and resources that build upon one another to provide a comprehensive overview of the primary care landscape in Toronto. The most granular information is at the neighbourhood level, but since neighbourhood boundaries were not expressly drawn with health workforce planning in mind, we recommend that the information be interpreted in the context of the broader community. Toolkit users can look at information in individual neighbourhoods before conducting an integrated analysis of all the neighbourhoods within a sub-region or Ontario Health Team with a view to identifying specific neighbourhoods with high needs that may require additional attention and resources. The information in the toolkit should be supplemented with additional local knowledge to build a fulsome picture of the primary care landscape.

Here are the steps to undertake when conducting a workforce analysis:

### Step 1: Understand Community Characteristics

In this step, you can examine a variety of population-based indicators to understand specific features of each neighbourhood. Examples of questions that may be asked about community characteristics include:

- What is the population size in this neighbourhood?
- What is the age structure?
- What is the projected population growth?
- What is the prevalence of chronic conditions?
- How marginalized is this neighborhood?
- How diverse is this neighborhood?
- What is the primary care attachment rate?
- How does this neighbourhood compare with the rest of the City on these metrics?

Once you have a good grasp of the characteristics of your community, you can move on to examining primary care service requirements.

### Step 2: Understand Service Requirements

In this step, you can examine who accesses primary care services in each neighbourhood and how many visits to a primary care physician are required. Service requirements depend on the needs of the

residents of the neighbourhood and the needs of residents of other neighbourhoods, as well as the needs of patients from outside Toronto who use services in the neighborhood. Service requirement estimates are adjusted for patient mobility and estimates of future service requirements are based on expected population growth. Examples of questions that may be asked about service requirements include:

- How many people live in this neighbourhood?
- How many primary care visits do they need?
- What proportion of care do residents access in their home neighbourhood?
- How many visits are expected for patients from outside Toronto?
- How many visits are expected for residents of other neighbourhoods?
- How are service requirements expected to change over time?
- Are current patterns of care seeking being influenced by a shortage or concentration of service capacity within the neighbourhood? Could residents be enabled to access a greater proportion of care closer to home if additional resources were available?

Having explored primary care service requirements, the next step is to examine service capacity.

### **Step 3: Understand Service Capacity**

Primary care services are provided by different types of primary care physicians as well as by interprofessional health practitioners. In this step, you can examine the primary care workforce resources available in each neighbourhood. Examples of questions that may be asked about service capacity include:

- How many physicians practice in this neighbourhood?
- What is the average age of the physician workforce?
- Which interprofessional health practitioners are (and are not) available in the neighbourhood?
- How many hours of care from interprofessional health practitioners are available?
- How many visits do physicians working in walk-in clinics and other episodic care settings contribute to service capacity in the neighbourhood (Non-Comprehensive Care)?
- How many visits are provided by comprehensive primary care physicians who are not expected to retire (Safe Service Capacity)?
- How many comprehensive primary care physician visits are considered to be at risk of loss due to retirement (Care At Risk)?

Having explored service capacity, the next step is to examine the alignment between service requirements and primary care service capacity.

### **Step 4: Assess Alignment**

In this step, you can examine how current and future service requirements and service capacity align. Assessment of alignment will allow you to identify communities with large gaps that may require additional primary care resources, both now and in the future. Examples of questions that may be asked about alignment include:

- Are the requirements for service in this neighbourhood increasing or decreasing?
- Is workforce service capacity increasing or decreasing?
- Is there a gap between service requirements and service capacity? Does this gap represent a surplus or a deficit of primary care visits?
- What is the magnitude of the gap? How is it expected to change over time?

Note that physicians who newly join the workforce (after the base year) are not accounted for in this analysis. However, you can explore scenarios that address the impact of additions to the workforce. For example, a deficit of 3000 visits, could be addressed by many possible workforce configurations, including:

- 1 additional physician providing 3000 visits per year, or
- 2 additional physicians each providing 1500 visits per year, or
- 1 additional physician providing 2000 visits and 1 additional nurse practitioner providing 1000 visits per year

Once you understand how service requirements and service capacity match up, the next step is to examine the factors that influence alignment as well as the primary care landscape more broadly.

### **Step 5: Explore Factors at Play**

A variety of factors influence service requirements, service capacity, and alignment. The fifth step in a workforce analysis allows you to examine these factors more closely, with a view to having a fulsome and well-rounded understanding of the primary care landscape.

Given that the factors that are most relevant will vary from context to context, this step allows for customization of the toolkit and the analyses.

### **Step 6: Put It All Together**

The final step of the workforce analysis process offers a synthesis of indicators and evidence that will help you to identify the strongest drivers of the observations and trends that emerged in previous steps. Data about population characteristics, patient mobility, growth, marginalization, workforce characteristics, and alignment between service requirements and service capacity are compiled in this step.

You can explore which factors are most likely to account for gaps between primary care needs and capacity. For example, you can assess whether a projected future gap is likely to be related to population growth, to physician retirement, to both of these, or to something else.

Observations in one neighbourhood may be related to the situation in another. It is important, therefore, to take a holistic view of the various factors at play in a particular geography.

At this stage, you can supplement the information in this toolkit with additional local knowledge, data, and information to build a more complete picture of the primary care landscape. Engage frontline providers, local health leaders, and other relevant stakeholders to validate results. You can ask:

- Do the results resonate with your current observations of primary care in your community?
- What factors could account for the patterns that you are seeing?
- Is a loss of physicians and other providers anticipated?
- What other future changes do you anticipate?
  - For example: new physicians, new interprofessional health practitioners, new housing developments, immigration, aging population, etc.
- What are the biggest issues in the community and what levers are available to address them?

Leverage the strengths and opportunities identified in this exercise:

- Take all observations into consideration.
- Examine the evidence and contextualize the findings within local realities.

- Use thresholds to help identify neighbourhoods that are of particular interest and target these for further investigation and potential intervention:
  - For example, you could flag neighbourhoods where 100% of the physician visits are at risk due to retirement, or where the population is expected to double in the course of the next 10 years
- Brainstorm the actions that you could take to address the issues that you have identified.
- Use scenarios to explore workforce- and population-level solutions that are flexible and locally relevant to address anticipated gaps between service requirements and service capacity.
- Identify priorities planning and levers for change.
- Use what you have learned in the workforce analysis to advocate for additional resources.

Although this is the final step in a workforce analysis, it represents the beginning of identifying areas of focus as well as challenges and potential solutions, and moving toward data-driven decision-making for the primary care workforce.

## Additional Information

### Technical Notes

If you require additional information on the data, indicators and limitations of information in the outputs, please refer to the Technical Notes.

### Other Resources

For more information, please explore other resources, such as the [How-To Playbook for Planning](#).

## Contact

For more Information, please contact:

Ontario Health Toronto, Health Analytics [OH-TorontoHealthAnalytics@ontariohealth.ca](mailto:OH-TorontoHealthAnalytics@ontariohealth.ca)

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