

# Integrated primary care workforce planning in the City of Toronto: Co-development and operationalization of a fit-for-purpose planning toolkit



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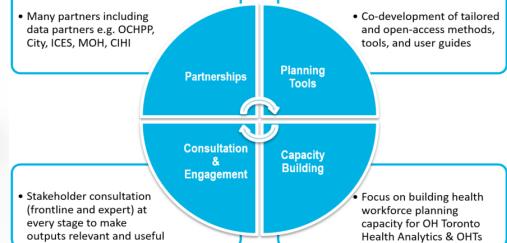
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## OBJECTIVES

To address disparities in access to integrated primary care in the City of Toronto, Ontario Health Toronto and the Canadian Health Workforce Network co-developed a comprehensive regional-level workforce planning process.

The goal was to design and operationalize an **evidence-informed toolkit for integrated, multi-professional, needs-based primary care workforce planning** tailored to Toronto's unique core needs and challenges of population mobility, population growth and physician retirement.

## FACILITATORS



Broad consultation and engagement with a focus on building partnerships and capacity

## APPROACH

### Phase 1 – Toolkit Development (2017-2018)



### Phase 2 – Toolkit Operationalization (2019-Present)

Operationalizing a first cycle of integrated, interprofessional, needs-based primary care workforce planning

## TOOLKIT

### Modules

### Maps, Tables & Charts

### Neighbourhood Profiles

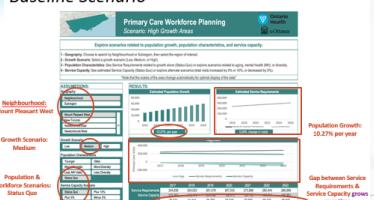
### Service Requirement Dashboard

### Service Capacity Dashboard

### Interactive Dashboards

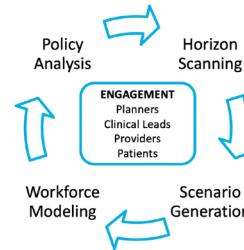


Interactive Population Growth Dashboard  
Baseline Scenario



## METHODOLOGY

### Overview of the Planning Process



Workforce modeling uses data from multiple sources to assess alignment of population health needs with workforce service capacity for each neighborhood from 2016 to 2026.

## IMPACT

The approach will help OHTs, providers, planners, stakeholders:

- Understand about the **patients they are serving, where they come from, and their primary care needs**
- Estimate the **primary care resources needed** for their patients
- Identify **future emerging needs that could be addressed by OHTs**, considering population growth, demographic shifts, provider retirement, and changing practice patterns
- Inform strategies to transform care** by testing a range of relevant scenarios
- Build capacity for primary care planning**

## ACKNOWLEDGMENTS

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