



The Grey Bruce Ontario Health Team

“**Working** toward a better
healthcare experience for **you**
close to **home.**”



WWW.GREYBRUCEOHT.CA



HOSPITALS AND ACUTE CARE ARE THE ROOF AND STRUCTURAL BEAMS

Essential and highly visible components that provide protection and intensive support when things get serious. But they rely on the foundation (OHT) and walls (other providers) to function well.



PRIMARY CARE, COMMUNITY SERVICES, HOME CARE, MENTAL HEALTH, AND SOCIAL SUPPORTS ARE THE WALLS, WINDOWS, AND DOORS

They provide day-to-day comfort, accessibility, and protection, and they're where most people enter, live, and interact with the system.



PATIENTS AND CAREGIVERS ARE THE PEOPLE LIVING IN THE HOUSE

Their needs determine how the house should be built, maintained, and improved.



THE OHT IS THE FOUNDATION OF THE HOUSE

it supports and connects everything, ensuring the entire structure (health system) is strong, stable, and coordinated.

Analogy emphasizes that while hospitals are essential, the OHT provides the structure that makes integrated, seamless care possible, ensuring all the parts work together to support the individual health experience.

Partners and Affiliates

Alzheimer Society



Brockton and Area Family Health Team



CarePartners



Closing the Gap[®] Healthcare



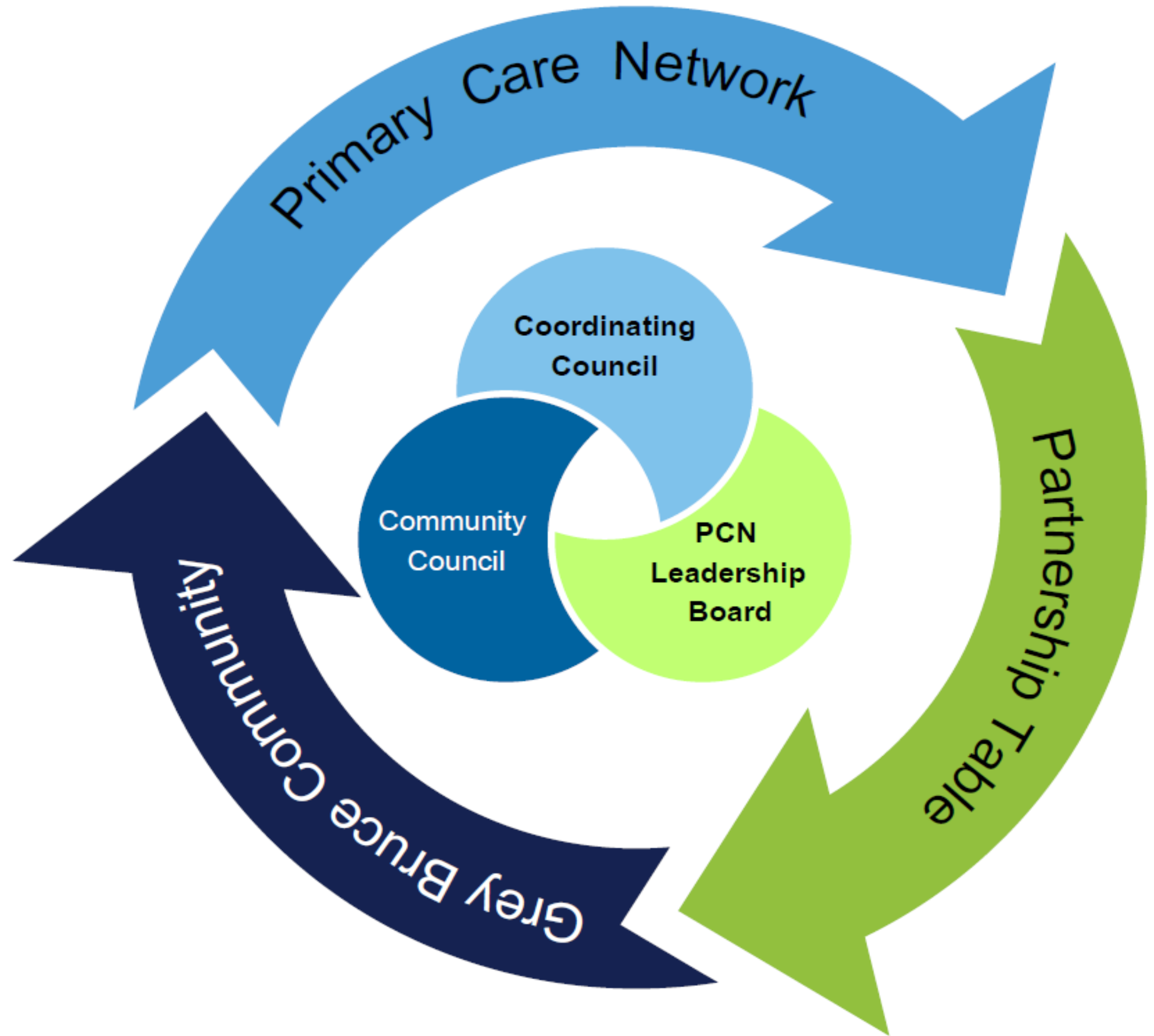
Governance Structure

Decision Making Groups

- Coordinating Council
- Primary Care Network Leadership Board
- Community Council

Collaborating Groups

- Partnership Table
- Primary Care Network



GBOHT Strategic Priorities



GREY BRUCE OHT 2025/26 STRATEGY

Mission: Through the power of our **partnerships, collaboration,** and **consensus-building,** we will be able to bring about meaningful change in our community.

Accountability
Diversity, Equity & Inclusion
High Quality
Kindness

Strategic Priority 1: Primary Care Access and Attachment

- County and Municipality Engagement Strategy
- IPCT 24/25
- IPCT 25/26
- Health Care Connect Draw Down
- Supported Attachment
- Primary Care Provider Engagement
- SCOPE
- Recruitment, Retention, and Wellness

% HCC Waitlist Reduction
 % Attachment to Primary Care
 #HCC Patients Referred
 Breast Cancer Screening Rate
 Cervical Screening Rate
 Colorectal Screening Rate

Strategic Priority 2: Integrated Clinical Priorities

- Best Care Expansion
- Palliative Care Transformation Lead
- Regional Geriatrics Program
- FREEDCAN Eating Disorders Project
- Mental Health & Addiction Service Pathways
- Hypercare
- Palliative Care Remote Monitoring
- Improving Equity and Access to Palliative Care

CHF Admissions per 100
 COPD Admissions per 100
 ASCS Admissions per 100

Strategic Priority 3: OHT Capacity Building

- OHT Governance Document Revision
- OHT Indigenous Engagement Strategy
- PFAC Capacity Building and Recruitment
- County and Municipality Engagement Strategy
- Patient Experience Survey

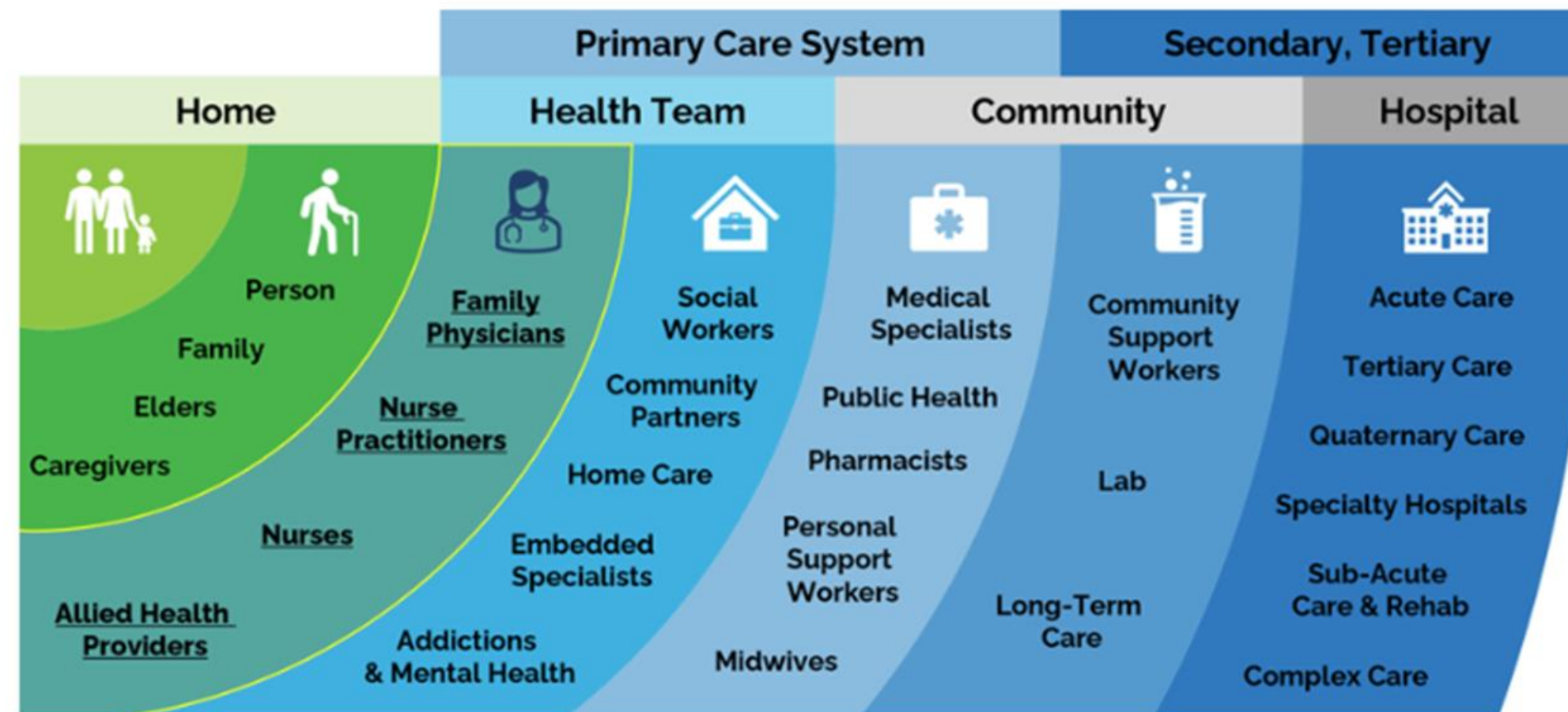


Ontario's Primary Care Action Plan



Connecting every person in Ontario to primary care

Mandate: 100% of people in Ontario are attached to a family doctor or a primary care nurse practitioner working in a publicly funded team, where they receive ongoing, comprehensive, and convenient care.



Ontario's Primary Care Action Plan



Primary care: right care, right place, right time

- Primary care is the model of care that supports first-contact, comprehensive, coordinated, convenient, and person-focused care.
- Health systems with robust primary care systems have **better health outcomes, lower health care costs, and more equity.**
- By providing care in the community, primary care **reduces reliance on costly parts of the system** such as emergency departments and hospitals

Ontario's Primary Care Action Team, led by Dr. Jane Philpott, will implement a **Primary Care Action Plan** supported by the government's historic investment of \$1.8 billion to connect two million more people to a publicly funded family doctor or primary care team within four years, which will achieve the government's goal of connecting everyone in the province to a family doctor or primary care team

Impact of primary care: by the numbers

- **Primary care visits are 33% of the cost** of a visit to an emergency department (Ontario)
- **36% fewer emergency visits** when connected to primary care (Quebec)
- **29% more likely to be hospitalized** when poor access to primary care (Alberta)

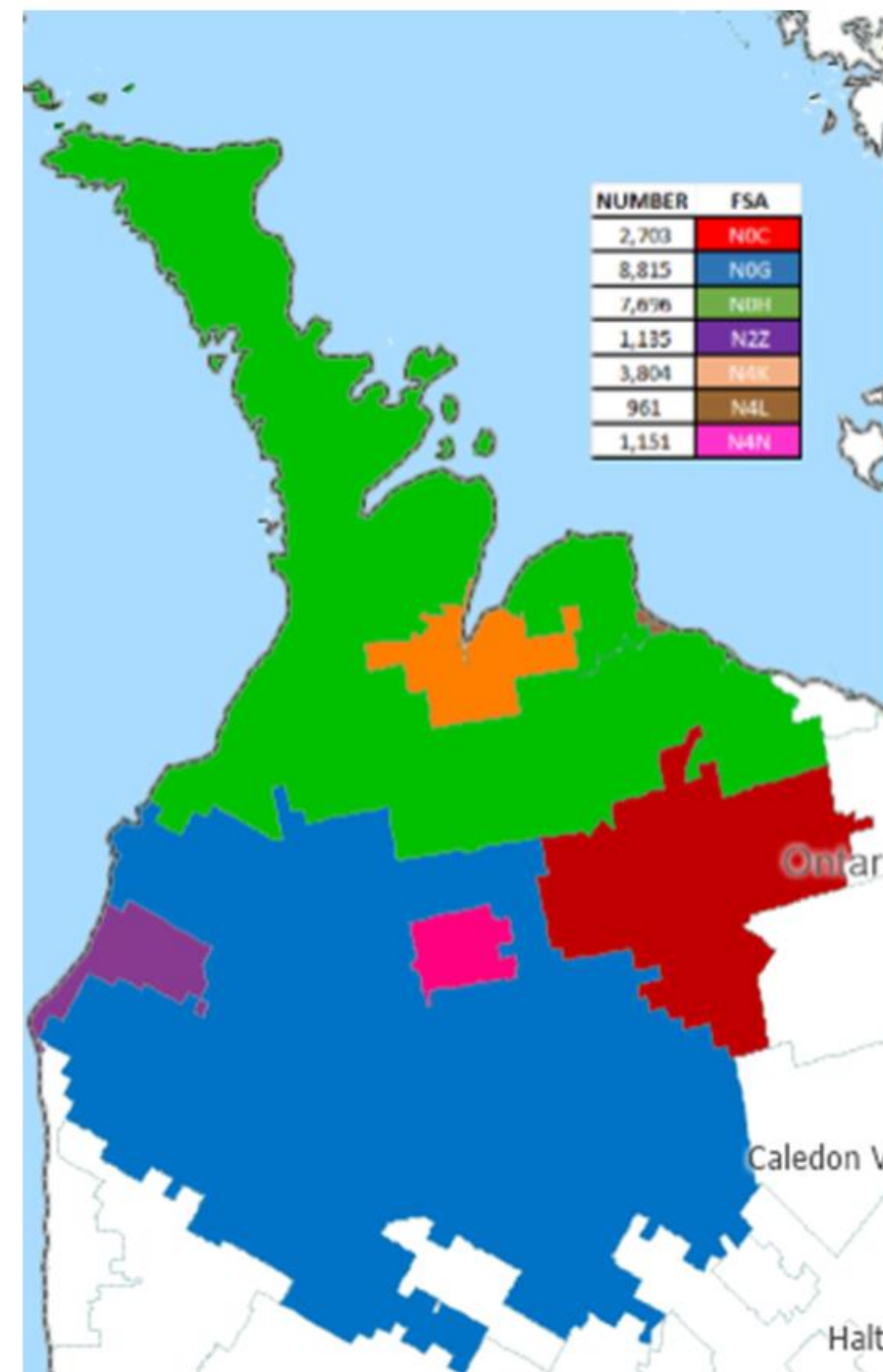
The Action Plan will help implement a broad series of initiatives in collaboration with primary care leaders and health system partners across **three pillars:**

- Connecting You to a Primary Care Team
- Making Primary Care More Connected and Convenient
- Supporting Primary Care Providers

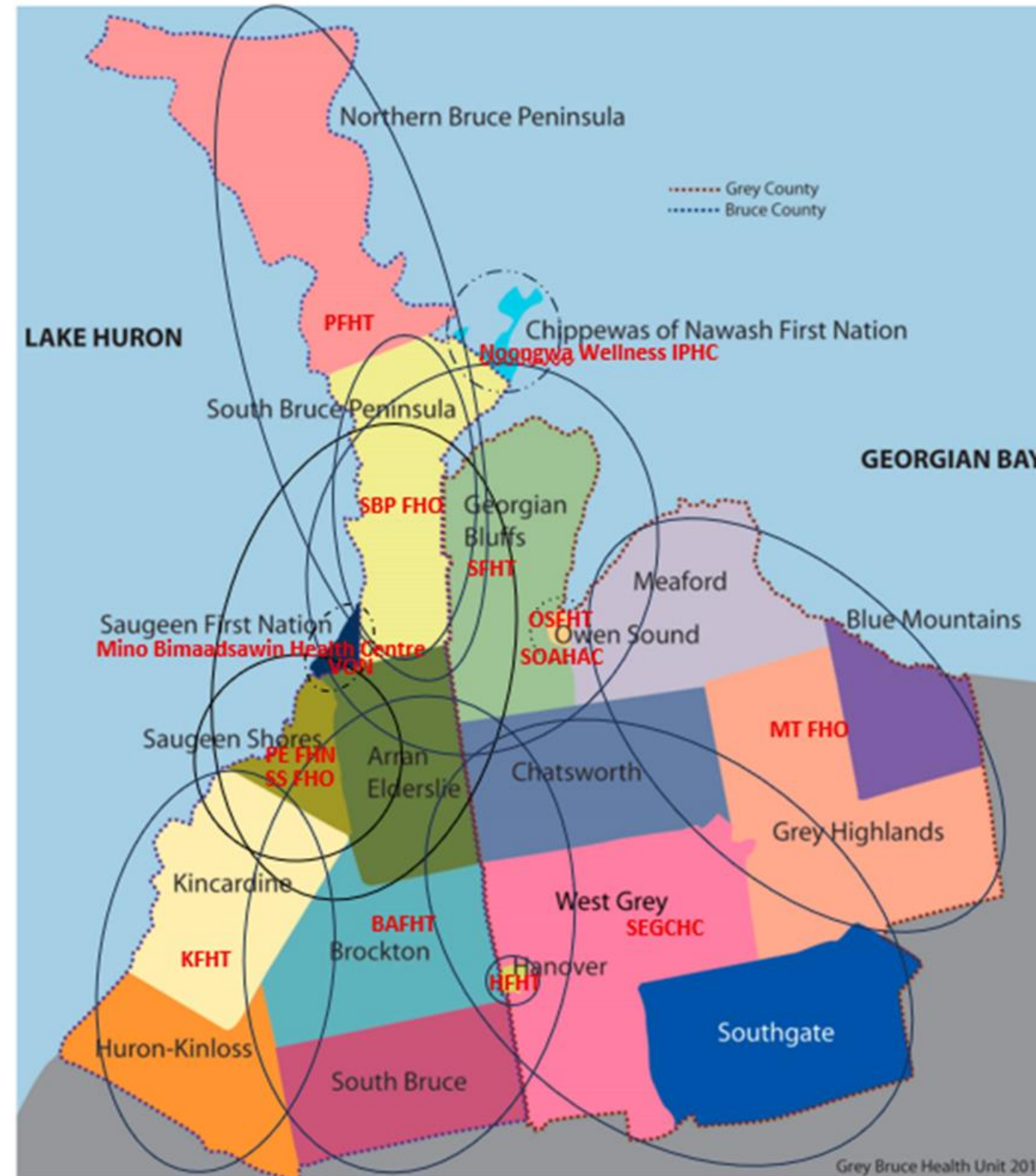
Grey Bruce Primary Care Landscape



- Total Attributed Population 234,713
- Number of Unattached 21509 (10.7%)
- Number on Health Care Connect 3765
- 7 FSAs
- 108 Family Doctors , 28 Nurse Practitioners Associated with Primary Care
- 72% Family Doctors Associated with Team Based Care*
- 6 Family Health Teams (FHTs), 1 Community Health Centre (CHC), 1 Aboriginal Health Centre, 1 Indigenous Primary Care Health Organization, 1 NPLC



Grey Bruce Primary Care Landscape



2025/2026 Interprofessional Primary Care Teams Funding Progress

As of October 31, 2025



Overall Progress in Grey Bruce:

- Attached **1540** patients to primary care (from postal code areas - N0H and N0G).
- Reduced Health Care Connect waitlist by **2735** patients (63%).

N0G Postal Code – Primary Care Team Expansion Update

Total Funding Received: \$1,143,200

Goal: Connect 2,225–2,450 more patients to primary care by August 2026.

New Healthcare Staff Hired Through this Funding:

- Brockton & Area Family Health Team: 2.0 Nurse Practitioners, 1.0 Medical Office Assistant, 2.0 Registered Nurses.
- Kincardine Family Health Team: 1.2 Nurse Practitioners, 1.2 Medical Office Assistants, 1.0 Registered Practical Nurse, 0.4 Kinesiologist.
- Listowel-Wingham and Area Family Health Team: 0.2 Nurse Practitioner, 0.4 Medical Office Assistant, 0.2 Registered Practical Nurse.

Progress So Far:

- ✓ 670 new patients (30% of the goal) are now attached to primary care.
- ✓ All new staff positions have been hired, and teams will be fully staffed by January 2026.

N0H Postal Code – Primary Care Team Expansion Update

Total Funding Received: \$1,009,500

Goal: Connect 2,175–2,400 more patients to primary care by August 2026.

New Healthcare Staff Hired Through This Funding:

- Port Elgin Family Health Network: 0.8 Nurse Practitioner, 0.3 Medical Office Assistant, 0.4 Dietitian, 0.4 Social Worker
- Saugeen Shores Family Health Organization: 1.0 Nurse Practitioner, 0.5 Medical Office Assistant, 0.5 Registered Practical Nurse
- Meaford Thornbury Family Health Organization: 1.0 Nurse Practitioner, 0.9 Medical Office Assistant
- Peninsula Family Health Team/South Bruce Peninsula Family Health Organization: 0.6 Medical Office Assistant, 0.5 Registered Nurse
- Kincardine Family Health Team: 0.2 Finance Manager, 0.4 Data Management Coordinator, 0.4 Executive Assistant

Progress So Far:

- ✓ 763 new patients (35% of the goal) are now attached to primary care.
- ✓ 6 positions have been filled.
- ✓ 5 positions are still being hired, including 3 Nurse Practitioners positions.



Grey Bruce Primary Care Master Plan 2026-2029



Goal: Attach 100% of Grey Bruce residents to longitudinal primary care by 2029 and expand access to interdisciplinary, team-based care (Family Health Teams, Community Health Centres, Nurse Practitioner-Led Clinics).

Phases

Phase 1 (26/27): Attachment Expansion

Phase 2 (27/28): Attachment and Team-Based Care Expansion

Phase 3 (28/29): Final Attachment, Integration & Resilience



Attachment Target

To attach **23,562** patients by April 2029.

Partners

Team-Based Care Partners: Kincardine Family Health Team, Peninsula Family Health Team, Hanover Family Health Team, Sauble Family Health Team, Owen Sound Family Health Team, South East Grey Community Health Centre, Victorian Order of Nurses Nurse Practitioner-Led Clinics, Brockton and Area Family Health Team.



Family Physician Groups: Kincardine, Saugeen Shores, South Bruce Peninsula, Hanover, Owen Sound, Brockton and Area, Chesley, and Meaford and Thornbury Family Health Organizations, as well as the Port Elgin, Peninsula, and West Grey Family Health Networks.

Human Resources Expansion

82.9 Total New FTEs:

- Primary Care Providers: 16.8 FTE (Nurse Practitioners 15.8 FTE + Salaried Medical Doctors 1.0 FTE)
- Interdisciplinary Providers: 38.6 FTE
- Admin/Management: 27.5 FTE

Total Requested Budget



\$10,760,812

GBOHT 26/27 IPCT Proposal - Collaborative Primary Care Master Plan Phase 1



Goal: Expand local team-based cared organizations to increase attachment equitably throughout Grey Bruce and decrease the number of unattached patients in the region by 60% in 2026/2027.

Phased Approach

Phase 1 (26/27): Attachment Expansion

Phase 2 (27/28): Attachment and Team-Based Care Expansion

Phase 3 (28/29): Final Attachment, Integration & Resilience



Attachment Target

To attach **12,500 – 14,915** unattached patients by April 2027, if fully funded.

Partners

Team-Based Care Partners: Kincardine Family Health Team, Peninsula Family Health Team, Hanover Family Health Team, Sauble Family Health Team, Owen Sound Family Health Team, South East Grey Community Health Centre, Victorian Order of Nurses Nurse Practitioner-Led Clinics, Brockton and Area Family Health Team.



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Expand Team-Based Model of Care

Continue to expand current team-based care organizations to support Meaford, Town of Blue Mountains, Wiarton, Grey Highlands, and Saugeen Shores.

Cumulative Staffing Complement

Nurse Practitioners – 12.8 FTE
Interprofessional Health Providers – 20.7 FTE
Administration – 17.8 FTE
Management – 3.5 FTE

Cumulative Budget

\$6,310,736





**Thank you.
Merci.
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To learn more about the Grey-Bruce OHT or how your organization can become involved, please contact lajohnston@Brightshores.ca