Healthcare Excellence Canada

The Five Central Pillars of Contemporary Advanced Access

What is Advanced Access?

Advanced Access is a widely endorsed quality improvement (QI) model that enables patients to access primary care services when they need it, considering urgency of care needs, while ensuring continuity of care. It achieves this by creating efficiencies and optimizing team functioning in primary care settings.

The Advanced Access model was developed more than 20 years ago and has been implemented in several countries, including Canada. However, primary care practice has evolved since then, particularly with the adoption of Electronic Medical Records (EMRs) and the increase in interdisciplinary team-based care.

What are the five central pillars?

The contemporary Advanced Access model includes five central pillars, based on work led by Gaboury, Breton and others, as well as the "Increasing efficiency to improve access to care learning collaborative" by the Alliance for Healthier Communities Ontario.

Each pillar identifies an area of work necessary for the successful implementation of Advanced Access in primary care practices today. What remains the same in the contemporary Advanced Access model is that patients are at the centre and supported by the primary care team.

The Contemporary Advanced Access Pillars
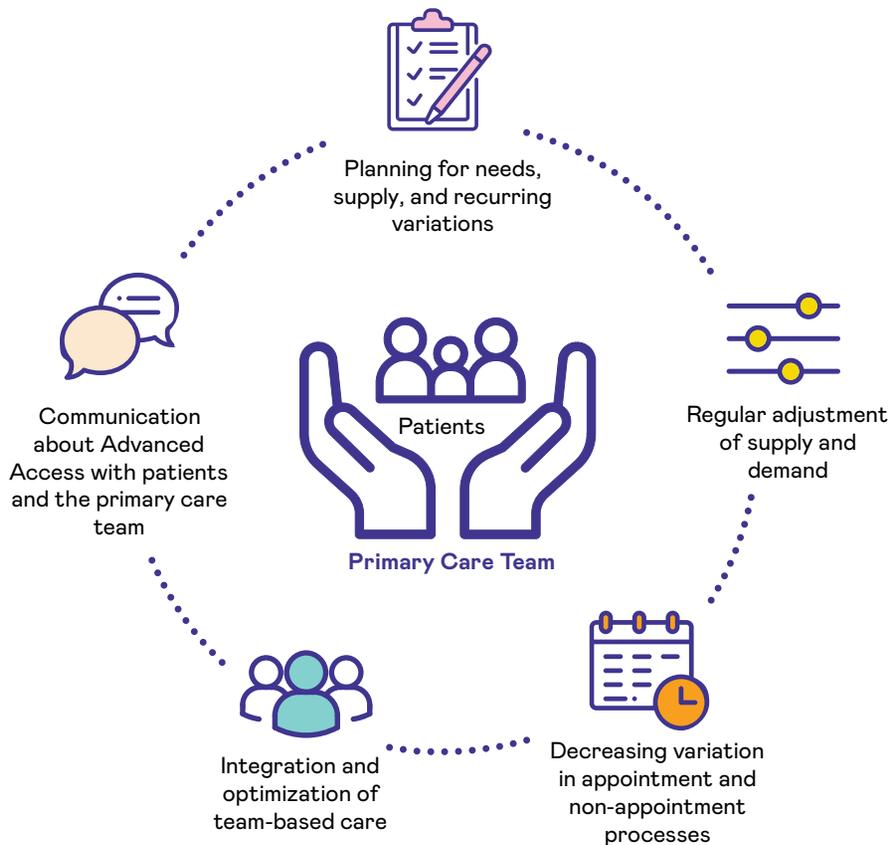
Planning for needs, supply, and recurring variations

Regular adjustment of supply and demand

Communication about Advanced Access with patients and the primary care team

Patients

Primary Care Team

Integration and optimization of team-based care

Decreasing variation in appointment and non-appointment processes

1. **Planning for needs, supply and recurring variations.** The primary care team plans ahead to understand the needs and characteristics of registered patients, so that they can estimate the number of appointments required. The team also considers changes that can be expected in supply and demand, like flu season or vacation time.

2. **Regular adjustment of supply and demand.** The primary care team regularly checks how many appointments are needed to match and modify their schedule accordingly. They determine peaks in appointments required (demand) and ensure that each provider is meeting those needs in the number of appointments in a timely manner (supply).

3. **Decreasing variation in appointment and non-appointment processes.** This means, for example, reviewing the appointment system to plan schedules and allow for keeping time slots open for urgent visits. It also means making non-appointment work (e.g., referral management) more consistent and efficient.

4. **Integration and optimization of team-based care.** The primary care team works together to give patients the care they need, based on each team member's role and skills. The goal is for patients to see the right provider in the most timely manner.

5. **Communication about Advanced Access with patients and the care team.** Patients and the primary care team are given clear information about how Advanced Access works, especially when organizational changes happen. Feedback is collected to make sure these changes meet the needs of both patients and providers.