

## Improving Access To Health Care

### *McGuinty Government Helps Recruit More Doctors*

**NEWS**March 5, 2010  
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Ontario is improving access to health care with two new programs that will help communities that have traditionally had the hardest time recruiting doctors.

The province is introducing:

- The Northern and Rural Recruitment and Retention Initiative, which will provide grants to doctors and new doctor graduates who agree to practise in a northern or highly rural community
- The Postgraduate Return of Service Program, in which international medical graduates agree to practise for five years in any Ontario community, except the Toronto area and Ottawa, in exchange for postgraduate training opportunities. Previously, these doctors were restricted to practising in rural and northern communities for five years, following graduation.

These two programs are designed to help northern and rural communities with their unique challenges in recruiting and retaining doctors, while increasing access to doctors throughout the province.

Ontario is also increasing access to family health care for all by adding 50 Family Health Teams and 25 Nurse Practitioner-Led Clinics across the province by 2011.

**QUOTES**

“Our government continues to look for ways for more Ontarians to receive health care closer to home. These initiatives provide immediate benefits to northern and rural communities, as well as to other areas of the province where there are also doctor shortages.”

- Deb Matthews, Minister of Health and Long-Term Care

"A lack of health human resources is a key challenge for rural and northern communities. These new initiatives will help rural and northern communities recruit and retain doctors, improve access to health care and complement the work of the Rural and Northern Panel."

- Hal Fjeldsted, Chair of Ontario's Rural and Northern Health Care Panel

**QUICK FACTS**

- It is expected that 175 new international medical graduates will begin practising each year through return-of-service programs this year and in 2011 and 2012. After that 185 will start practising annually
- Since 2003, the number of doctors in Ontario has increased by close to 2,300 (10.7 per cent).

**LEARN MORE**

Find out more about the [Underserviced Area Program](#).

Learn more about the government's move to create more [Family Health Teams](#).

Learn more about the government's move to create more [Nurse Practitioner-Led Clinics](#).

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## **Increasing The Availability Of Doctors In Ontario**

March 5, 2010

The Ontario government is introducing two new initiatives, the Northern and Rural Recruitment and Retention Initiative and the Postgraduate Return of Service Program, which will attract doctors to communities where they are needed.

These initiatives were created as a result of the changes made to the government's Underserved Area Program (UAP). They have been designed to help northern and rural communities with their unique challenges in recruiting and retaining doctors, while increasing access to doctors throughout the province.

### **Northern and Rural Recruitment and Retention Initiative (NRRR Initiative)**

The NRRR Initiative will provide grants to doctors and new doctor graduates who agree to practise in a northern or highly rural community or in one of the five major northern urban referral centres (Thunder Bay, Sudbury, North Bay, Sault Ste. Marie and Timmins).

### **Rurality Index for Ontario (RIO)**

Communities are determined to be eligible based on their Rurality Index for Ontario (RIO) score – which will be used to ensure funding is specifically targeted to northern and highly rural communities. The RIO score (which is used for a range of programs in Ontario) is based on three factors: population (count and density), travel time to a centre offering doctor care, and travel time to a centre that offers advanced specialty care.

Doctors who practise in communities with a RIO score of 40 or more will be eligible for this incentive fund. These communities face long-standing and complex challenges due to their geographic isolation and have difficulties recruiting and retaining health care providers.

The values of the grants provided to physicians are based on the community's RIO score – the higher the RIO score, the larger the grant provided to doctors.

The doctors will be required to practise full-time comprehensive care for four years in the community, holding hospital privileges and working in a primary care model (i.e. Family Health Team) where available and appropriate.

The incentive grants will be available to family doctors and specialist doctors.

### **Northern Urban Referral Centres**

Doctors can also receive grants to set up practice in the five northern urban referral centres (even though they have RIO scores below 40) because they play a vital role in providing health care services in northern Ontario and face significant recruitment and retention challenges.

## **Postgraduate Return of Service (ROS) Program**

This program will enable all communities in Ontario, other than the Toronto area and Ottawa, to recruit international medical graduates (who received medical training outside Canada) who have to fulfill return of service (ROS) commitments. Under ROS commitments, doctors agree to work for a designated period of time in a particular location in exchange for a postgraduate training opportunity in Ontario.

The Toronto area is defined as the City of Toronto as well as Mississauga, Brampton, Vaughan, Markham and Pickering. With the previous policy, medical graduates were required to fulfill their ROS in communities designated as underserved under the Ministry's Underserved Area Program.

The medical graduates commit to five years of service in a community. After graduating, the new graduates will be able to choose among eligible communities, and the terms of the working arrangements are then negotiated between the community and the physician.

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## Doctor Recruitment And Retention Program Consultations

March 5, 2010

The Ontario government held consultations on the proposed redesign of doctor recruitment and retention initiatives over the summer of 2009 and included stakeholders, communities and other partners.

The consultations included a series of community consultation sessions. MPP David Oraziatti (Sault Ste Marie) led sessions in Brantford, Drayton, Kitchener, Sault Ste Marie, Windsor, Chatham and Sudbury. MPP Jean-Marc Lalonde (Glengarry-Prescott-Russell) led sessions in Casselman, Brockville, Bradford and Pembroke. There were other sessions, such as in Thunder Bay, that local MPPs organized.

Feedback was also collected through letters, email and a survey on the ministry website. More than 200 written responses were received.

A consultation paper entitled Ontario's New Physician Recruitment and Retention Programs - Bringing the Underserved Area Program Into the 21st Century was posted on the ministry website and offered to consultation session attendees.

Based on what was heard during the consultations, the following recommendations were made by David Oraziatti and Jean-Marc Lalonde for redesigning the doctor recruitment and retention elements of the Underserved Area Program (UAP):

- The UAP needs to return to its original mandate and focus dollars on the most rural and northern communities
- A mechanism is needed to ensure the program is reviewed on a more regular basis (such as every five years)
- Unique doctor recruitment and retention issues pertaining to the north should be well communicated along with implementation of the proposed changes
- Alternative options to address community need for doctors should be well communicated with implementation of the proposed changes, including information about initiatives like Family Health Teams, Nurse Practitioner-led Clinics, Health Care Connect, and the Community Partnership Program of HealthForceOntario's Marketing and Recruitment Agency
- New doctor recruitment and retention incentive fund values available to communities should be well-defined and communicated along with the program change implementation.