

## Supplementary Budget – Briefing Note

## 2021 Budget

## CK Physician Recruitment and Retention Initiatives

**Briefing Note required for:**

- items +/- \$50,000 or more
- changes in FTE
- Council Priority requests

Dept	Division	Business Unit	Item	Base Supp	Amount	FTE Impact
CHS	CALS	CAP	Seed funds for the CK Physician Recruitment and Retention Task Force Committee	B	\$100,000	
			<b>Total:</b>		<b>\$100,000</b>	

**Background:**

On November 5, 2019, Council approved \$100,000 for a CK Physician Recruitment and Retention Strategy. A Physician Recruitment Task Force Committee was formed thereafter, comprising of members from: the CK Family Health Team, Thamesview Family Health Team, Tilbury District Family Health Team, CK Community Health Centre, CK Health Alliance, with resource support from Erie St. Clair LHIN, Health Force Ontario and the Municipality. Council also approved that ongoing funding for this initiative be referred to the 2021 budget process.

The group met several times to finalize initiatives for the year, such as: Attendance at Family Medicine Recruitment Job Fairs, hosting events for local medical students and residents, advertising family physician practice opportunities in CK, hosting visitations for potential family physicians, other promotional opportunities, and enhancements to start-up subsidies for new family physicians.

Due to the COVID pandemic, not all of the initiatives were able to be accomplished, especially with several job fairs being cancelled. The Committee focused primarily on hiring a company to create a website presence, sponsoring a virtual Resident Family Medicine retreat, and providing start-up subsidies for new physicians.

**Comment:**

The new funds will be used to continue with the Task Force Committee's recruitment and retention work, primarily in the areas of advertising, promotions, sponsoring virtual conferences, and start-up subsidies. A presentation is slated for a Council meeting prior to budget deliberations.



**Municipality of Chatham-Kent**  
**Community Human Services**  
**Community Attraction and Leisure Services**

**To:** Mayor and Members of Council

**From:** Evelyn Bish  
Director, Community Attraction and Leisure Services

Audrey Ansell  
Manager, Community Attraction and Promotion

**Date:** October 16, 2019

**Subject:** Physician Recruitment and Retention Initiatives

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**Recommendations**

It is recommended that:

1. Council support a Chatham-Kent Physician Recruitment and Retention Task Force to strategize and take action on initiatives to attract and retain physicians in Chatham-Kent. The Task Force will be an independent community committee, with their own governance structure and operational processes.
2. The \$100,000 in one-time funds approved by Council during 2019 Budget deliberations be placed with the Chatham-Kent Family Health Team as administrator on behalf of the Chatham-Kent Family Health Team, Thamesview Family Health Team, Tilbury District Family Health Team, CK Community Health Centres, and the Chatham-Kent Health Alliance, with resource support from the Erie St. Clair LHIN, HealthForce Ontario and the Municipality (i.e. "The Task Force") for distribution in accordance with the decisions of the Task Force.
3. The funds to be leveraged and distributed, as follows:
  - Attendance at Family Medicine Recruitment Job Fairs by Task Force members
  - Hosting of events for local medical students and residents to tour CK medical facilities and advise on opportunities for opening a family practice in CK
  - Advertising family physician practice opportunities in CK
  - Hosting visitations for potential CK family physicians
  - Other promotional opportunities as related to family medicine
  - Enhancements to start-up subsidies for new family physicians who must be rostering patients to provide primary care as provided by the specific Family Health Team, the CK Community Health Centres and the CK Health Alliance.

4. The Task Force return to Council on a bi-annual basis to provide updates on accomplishments and future initiatives.
5. Ongoing funding for this initiative be referred to the 2021 budget process.

### **Background**

In December, 2018, Council approved the following motion:

“Whereas the rate of general/family physicians in Chatham-Kent is 76.9 per 100,000 population, which is lower than the Eire St. Clair LHIN (92.5 per 100,000), which is lower than the province (109.4/100,000); and Whereas in 2018, Chatham-Kent had approximately 65 primary practice physicians and of these primary practice physicians 25% were between the ages of 55 and 64 and another 17% were 65 and older; and Whereas 62% of primary practice physicians practice in the city of Chatham; and Whereas in 2017 46% of Chatham City Centre and 58.5% of Rural Kent residents reported that their emergency room visit was for a condition that could have been managed by their primary care provider, had that provider been available; and Whereas current data is not available on resident satisfaction with the location of their primary care practitioner in relation to where they live, anecdotal data continues to have residents seeking a primary care practitioner in their local community. Therefore be it resolved that Administration work with the Erie St. Clair LHIN to help fund and reinstate a primary care practitioner recruitment and retention program for Chatham-Kent. And that an upside limit of \$100,000 be submitted to the 2019 budget in support of this program.”

On January 31, 2019, during Budget deliberations, Council approved the following motion:

“That \$100,000 (one time) be added to fund the Primary Care Practitioner and Retention program and that this be funded from the Strategic Development Reserve #17266 and that the use of the money be explained in a report to Council before utilization of the funds.”

Over the spring, summer and fall months, staff met with members of the various health care agencies, as follows:

Denise Waddick, Executive Director, Thamesview Family Health Team (TVFHT)

Dr. Jim Wheeler, Practice Lead Physician, TVFHT

Laura Johnson, Executive Director, Chatham-Kent Family Health Team

Paul Weese, CKFHT Board Chair

Kelly Griffiths, Executive Director, Tilbury District Family Health Team (TDFHT)

Sherri Saunders, Executive Director, Chatham-Kent Community Health Centres (CKCHC)

Jane Tillman, Regional Advisor – South West, Community Supports, HealthForce Ontario Marketing & Recruitment Agency

Shannon Sasseville, Director of Communication, Public Affairs, and Organizational Development, Erie St. Clair Local Health Integration Network (ESC LHIN)

Rachel Stack, Director, LHIN Sub-Region, ESC LHIN

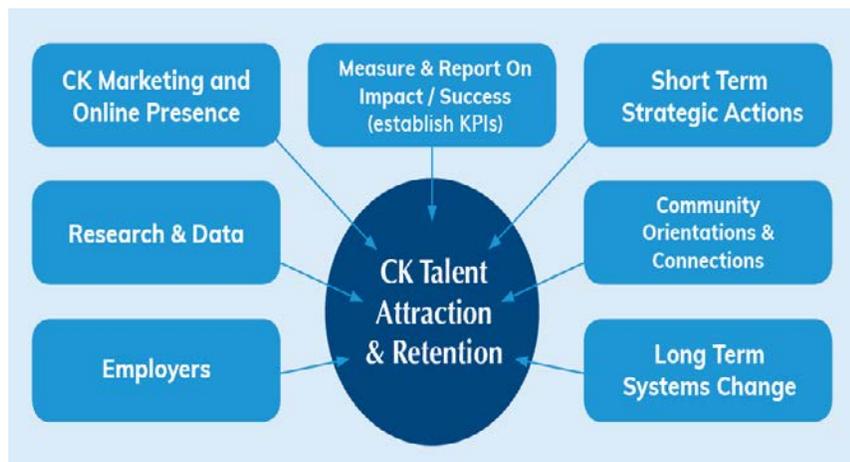
Nancy Kay, Director, Quality, Risk, Professional Practice and Medical Affairs, Chatham-Kent Health Alliance (CKHA)

Fannie Vavoulis, Director, Chief Communications & Community Engagement Officer, CKHA (currently CKHA Lead Physician Recruiter)

Melissa Sharpe-Harrigan, Director, Medical Affairs and Medical Recruitment, CKHA

Information on each group's statistics and comments were attained during these meetings.

The information was then categorized under the Talent Attraction and Retention Framework. This Framework was presented as part of an earlier Report to Council (January 21, 2019) on physician recruitment, has been vetted through the CK Community Leaders' Cabinet, and will be presented to Council in the near future.



The categorized Physician Recruitment and Retention information is as follows:

1) Task Force

The health care providers consulted used to meet on a regular basis to discuss mutual issues and solutions regarding Physician Recruitment and Retention. It was agreed that creating a renewed Task Force for collaborative discussions and decision making would be beneficial for everyone. Although Council directed the \$100,000 to go towards primary care only, this Task Force could also discuss non-financial initiatives that would benefit the entire group.

2) "Employers"/ Partners

The Task Force would be made up of the following partners, with the opportunity to add others in the future:

- Thamesview Family Health Team
- Chatham-Kent Family Health Team
- Tilbury District Family Health Team
- Chatham-Kent Community Health Centres
- Chatham-Kent Health Alliance

Resources members –

- HealthForce Ontario

- Erie St. Clair LHIN
- Community Attraction & Leisure Services Division, Municipality of Chatham-Kent

### 3) Research & Data

The providers offering primary health care through on-site physicians in Chatham-Kent do so under a variety of practice models, including family health teams, independent offices, and community health centres.

The table on the next page sets out the data that was shared as part of the discussions with the three FHT's and the CKCHC. Discussions did not occur with the four independent offices, so data regarding the number of patients serviced is estimated based on typical roster sizes.

<b>Practice</b>	<b># sites</b>	<b>Governance Model</b>	<b># patients</b>	<b># physicians</b>	<b>Current physician capacity</b>	<b>Estimated # of orphaned patients</b>
Chatham-Kent FHT	5	FHT with community board	29,771	22	Space for 8-10 physicians	7,228
Thamesview FHT	3	FHT with a mixed based board	24,000	19	Up to 5 physicians needed at Wheatley (1-2), Emma (1-2) & Grand Site (1)	N/A
Tilbury District FHT	2	FHT with community board	15,000	7	Could potentially have the space to add 2 physicians if considered under-serviced	N/A
<b>Totals for FHTs</b>	<b>10</b>		<b>68,771</b>	<b>48</b>		
Independent family physicians	4	Independently operated offices	10,000 (est.)	4	unknown	N/A
CKCHC	3	Funded by LHIN – serving high-needs clients with community-based board	6,000	5 (2 FT, 3 PT)	At capacity – could add primary care providers with additional permanent base funding	N/A
<b>Total</b>	<b>17</b>		<b>84,771</b>	<b>57*</b>		<b>7,228</b>

\*One physician works at two locations; therefore, there are 56 family physicians servicing the CK population of 102,042 (per Census 2016), making for 5.5 physicians per 10,000 population.

Recognizing that some of the information presented in the table is estimated, approximately 84,771 patients are registered to and receive care from CK-based family physicians. What is unknown from this data is how many of those patients actually reside outside CK, i.e., are former residents who return for care and are not registered to a physician in their new place of residence.

Roster sizes for CK physicians vary greatly and are dependent on a number of factors including the model within which the physician practices and the type of clients served (e.g., CHC physicians roster fewer patients because of their complex care needs) and may be affected by the age of the physician as well.

Roster sizes for full time practices are now considered optimal with 1,200 patients; however, long-practicing physicians typically carry far higher patient rosters, with some as high as 4,000. This means that at least two physicians are typically required to replace each retiring physician. CK data suggests that 34% of patients are rostered to doctors over the age of 60. There are estimated to be up to 9-11 pending physician retirements over the next 5 years; this could mean a need for approximately 20 replacement physicians.

CK FHT has the largest physician and patient capacity among all the FHTs, and currently estimates that following physician departures, there are now 7,228 orphaned patients who were once registered to a physician at one of their five sites. While some of these patients may have found a new family physician - either within or outside CK - (combined data from the Healthcare Connect, a service operated by the LHIN), the lack of physicians currently accepting patients in CK, emergency department volumes, and anecdotal information suggesting that residents are without family physicians, suggests that many of these patients may still be orphaned.

Further, there is uncertainty as to what will happen to the patients rostered to the 4 independent physician offices in CK. Office closures here will likely compound the issues pertaining to the numbers of orphaned patients in CK.

According to Healthcare Connect, there are no doctors to refer patients to in CK. In addition, emergency department volumes (for matters that could be handled in a primary care setting e.g., routine prescription renewals) are up, which has an impact on wait times in the hospital's emergency departments.

There are a number of walk-in clinics offering telemedicine services in Chatham-Kent and they are understood to be very busy.

Data gaps were identified as follows:

- a) Data on Family Physicians -  
It is generally unknown as to what drive family physicians to practice in CK and what their plans are. A confidential Physician Engagement Survey would be helpful.
- b) Data on CK Residents -

Data is required to get a good picture of the needs and wants of CK residents in terms of their primary healthcare needs (e.g. number of orphaned patients, number of patients travelling to physicians outside of Chatham-Kent, etc.) A confidential Resident Engagement Survey would gather this missing data.

#### 4) Marketing & Online Presence

There is a great deal of marketing ongoing presently; however, it was agreed that marketing initiatives could be enhanced through both collaboration and expansion of activities, as follows:

- Consistent messaging to communicate the benefits of living and working (i.e. practicing medicine) in a rural community
- Leveraging connections (i.e. HealthForce Ontario; Physicians; Schulich School of Medicine; Kent Medical Association, etc.)
- More advertising and promotions
- Hosting and attending family medicine recruitment fairs

#### 5) Short Term Strategic Actions

These initiatives were identified as “quick wins”:

- Hire a Nurse Practitioner
- Create and maintain a Primary Care Physician Managed Locum List
- Provide incentives to new physicians (i.e., covering moving expenses, overhead set-up costs, financial incentives for them to stay a set period of time, etc.)

#### 6) Community Orientations & Connections

These initiatives connect new and existing physicians to the community:

- Expand upon offering spousal employment support
- Acclimatize physicians (and their families) to our community and ensure they have upfront and ongoing support and connections
- Providing mentor support by connecting them to other groups

#### 7) Long Term Systems Change

Work on these initiatives can begin now, with a view to effecting long term change:

- Encourage, mentor, incentivize (through variety of measures) and follow CK young people who are going into medicine
- Continue and expand upon connections with local medical students and residents (i.e. engage with them while they participate in CK medical social events, training opportunities, etc.)
- Work with the parties involved in the Ontario Health Team to ensure that physician recruitment and retention is part of the ongoing mandate
- Continue to create a Welcoming Community in which physicians would like to practice

#### 8) Measure and Report on Impact/Success (establish KPIs)

The following are deliverables that the groups identified would be success factors:

- Increase in the size of the pipeline of homegrown and new medical talent
- Increase in the number of people in CK connected to a physician or nurse practitioner through Health Care Connect
- Decline in the number of people who are without a primary care practitioner
- Increase in the number of physicians considering retirement who have succession plans for their patients
- Decline in emergency department volumes for visits best managed elsewhere
- Increase in physician retention and satisfaction rates

On Friday, September 21, 2019, CK staff were asked to attend a meeting with representatives from the CKHFT. The CKFHT presented the following recommendations for consideration by the Municipality:

1. Place the funds with Chatham-Kent Family Health Team as administrator on behalf of the Chatham-Kent Family Health Team, Thamesview Family Health Team, Tilbury District Family Health Team to distribute the funds as directed by the Municipality of Chatham-Kent Council and Administration. The Chatham-Kent Family Health Team would provide periodic reporting of expenditures to Municipality of Chatham-Kent Administration.
2. The funds will be used as follows:
  - Funds be designated for any Family Health Team Representatives to attend Family Recruitment Job Fairs
  - Provide funds to host an event to invite local Medical Students and Residents to attend Chatham-Kent to tour medical facilities including the family health teams, and advise of opportunities for opening a practice in Chatham-Kent.
  - Provide funding for advertising Family Physician practice opportunities in Chatham-Kent
  - Funds be designated to cover the costs for potential Physicians to visit Chatham-Kent
  - Other promotional opportunities that may arise
  - A start-up subsidy for new Physicians if provided by the specific Health Team
3. In order for Family Physician recruitment to be successful, the Chatham-Kent Family Health Team would encourage the Municipality of Chatham-Kent to continue their support by earmarking \$100,000.00 in their future yearly budgets until all residents of Chatham-Kent have a family physician for their primary care.

### **Comments**

On Monday, September 23, 2019 staff met with the group as a whole to discuss findings, options and recommendations.

The group agreed that:

- They would like to meet on a regular basis as a Physician Recruitment and Retention Task Force
- They would like Council's dollars to be spent on Task Force initiatives, as opposed to hiring a recruitment position, as this would take up most of the money without conducting any actual work
- The funds would be placed with the CK FHT as administrator on behalf of the Task Force
- The Task Force would make decisions on the expenditures as a group
- The funds would be leveraged, and spent as follows:
  - Attend Family Medicine Recruitment Job Fairs
  - Host events for local medical students and residents to tour CK medical facilities and advise of opportunities for opening a family practice in CK
  - Advertise family physician practice opportunities in CK
  - Hosting visitations for potential CK family physicians
  - Other promotional opportunities as related to family medicine
  - Enhancements to start-up subsidies for new family physicians who must be rostering patients to provide primary care as provided by the specific FHT, the CKCHC and the CKHA.

## Other Comments:

- It was emphasized that in order for everyone to have “skin in the game”, the group must work jointly to increase leverage and reduce duplication efforts. For example, funds are being leveraged by using the current recruiters for the CKFHT and the CKHA who are dedicated to physician recruitment already instead of hiring a Recruiter. This puts the money directly towards recruitment efforts
- Welcoming physicians needs to be broader than just the medical community. The entire community needs to “wrap their arms around” these prospective physicians and make them feel welcome and get them engaged. For example, CKHA has worked with the Municipality’s Community Attraction and Promotion area to accomplish this. The FHT’s have also offered this level of personal welcome
- A great starting point is getting new physicians connected with other professional youth in CK (e.g. YconneCKt via the CK Chamber; CK<sup>y</sup> Group via Community Attraction & Promotion)
- CKHA remains dedicated to supporting the recruitment of family physicians. By doing so, it means not as many Hospitalists will be required. CKHA has the capacity to train them at the hospital, in addition to the training positions at the FHT’s and the CKCHC
- The TVFHT is the host site of the Schulich School of Medicine Family Medicine Residency training program. In addition, CKHA has many ongoing recruitment activities, such as the Family Medicine Residency Program, Doc Talk and Home for the Holidays. Both the CKFHT and CKHA participate in and support the Discovery Week program that is run out of the Schulich School of Medicine. Many of these activities were in place in the past and some are now being resurrected. In addition, the TVFHT and the CKFHT have established a partnership in their efforts to retain the family medicine residents who are in training in the community of Chatham-Kent.
- The provincial Ministry of Health and Long Term Care has assigned Tilbury the category of “not underserved”. This means that the Tilbury District Family Health Team cannot add additional physicians to their roster, despite the fact that there is a clear and known need for family physicians within Chatham-Kent. This is a community-wide issue. The ESC LHIN believes a data error and boundary lines resulted in Tilbury being included with Lakeshore. The LHIN will advocate to the Ministry to attempt to get this changed for Tilbury / CK to be deemed underserved.

## Future Ideas to be Explored:

- Hire Nurse Practitioners to use across all Family Health teams, especially to fill gaps when one GP retires or leaves Chatham-Kent. NP’s may roster up to 800 – 1,100 patients
- Create a “Chatham-Kent Health Human Resources Plan” that will better understand where physicians are practicing, how many physicians at approaching retirement age, and how the Physician Task Force can assist in succession planning, especially for those solo practitioners who may not have the support of a team structure.
- The Ontario Health Teams

- Currently, the CK OHT mandate does not reference physician recruitment, but it does refer to a Year 1 focus on orphaned patients in the older adult “greater than 55 years of age” population
- The group agreed that there needs to be advocacy to ensure physician recruitment and retention is part of the CK OHT mandate.

The Task Force return to Council on a bi-annual basis to provide updates on accomplishments and future initiatives.

### Areas of Strategic Focus and Critical Success Factors

The recommendations in this report support the following areas of strategic focus:

Economic Prosperity:

Chatham-Kent is an innovative and thriving community with a diversified economy

A Healthy and Safe Community:

Chatham-Kent is a healthy and safe community with sustainable population growth

People and Culture:

Chatham-Kent is recognized as a culturally vibrant, dynamic, and creative community

Environmental Sustainability:

Chatham-Kent is a community that is environmentally sustainable and promotes stewardship of our natural resources

The recommendations in this report support the following critical success factors:

Financial Sustainability:

The Corporation of the Municipality of Chatham-Kent is financially sustainable

Open, Transparent and Effective Governance:

The Corporation of the Municipality of Chatham-Kent is open, transparent and effectively governed with efficient and bold, visionary leadership

Has the potential to support all areas of strategic focus & critical success factors

Neutral issues (does not support negatively or positively)

### Consultation

Various health care agencies were consulted and information on each group’s statistics and comments were attained for this report.

### Financial Implications

The \$100,000 one-time funds for this initiative were approved from the Strategic Development Fund during Budget 2019. As the consultation phase of this project took longer than planned, spending will begin in 2020 pending Council approval of the recommendations in this report.

The group believes that one-time funding is not sustainable as physician recruitment and retention is and will continue to be a community-wide, community economic development issue.

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General Manager,  
Community Human Services

Attachments: none

c.

Denise Waddick, Executive Director, Thamesview Family Health Team

Dr. Jim Wheeler, Practice Lead Physician, Thamesview Family Health Team

Laura Johnson, Executive Director, Chatham-Kent Family Health Team

Paul Weese, Board Chair, Chatham-Kent Family Health Team

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