



The Right Physicians in the Right Places

A plan to improve access to
Health Human Resources in Canada

EXECUTIVE SUMMARY

In Budget 2012, the Government of Canada finalized the details of a program to improve access to primary health care in rural and remote regions.¹ The Canadian Federation of Medical Students (CFMS) believes that all Canadians - regardless of location - deserve adequate, quality care. In turn, the CFMS hopes to work with the Government of Canada to strengthen health care in underserved areas across the country.

This year, the CFMS is focusing on measures that could more effectively attract doctors to rural and remote regions, and allow governments to more effectively make future Health Human Resources (HHR) plans. The CFMS thus proposes two courses of action:

- (a) The federal government should defer repayment of the principal of, and interest on, the federal portion of Canada Student Loan Program (CSLP) loans until the end of students' residency training; and,
- (b) The federal government should create a Pan-Canadian study on Health Human Resources, including needs-based projections of physician supply and demand.

DEFERRING LOAN REPAYMENT

This year, the Government of Canada will begin to forgive a fraction of the federal portion of Canada Student Loan Program (CSLP) loans for new family physicians who choose to practice in a rural or remote community - up to \$8,000 per year, to a maximum of \$40,000 over five years¹. This program will provide financial relief for new medical graduates while boosting primary care in underserved areas.

However, the CSLP will still require medical residents to make payments on both the principal of the undergraduate loan and interest accrued during postgraduate residency training. Currently, many residents consolidate their Canadian and provincial-territorial student loans into a private bank line-of-credit with a lower interest rate, or alternatively take part in a provincial-territorial loan-relief program during residency; these physicians would be ineligible for the new CSLP relief program. Consequently, the incentive to practice in a rural or remote community is considerably diminished.

British Columbia, Alberta, Manitoba, Ontario and Prince Edward Island already offer medical residents loan- and interest-relief on the provincial-territorial portion of the Canada Student Loan during residency training. Likewise, it would be advantageous for the federal government to offer the same loan- and -interest relief on the federal portion of the Canada Student Loan for medical trainees. In addition to aligning federal and provincial-territorial policies, this would more effectively attract primary care physicians to rural and remote areas.

The CFMS calls upon the Government of Canada to defer repayment of the principal and interest accrued on the federal portion of medical graduates' Canada Student Loans until the completion of their residency training, so that physicians may take full advantage of existing government incentive programs for rural practice.

PAN-CANADIAN HEALTH HUMAN RESOURCES PROJECTIONS

In order to have a healthcare system that effectively serves the needs of Canadians, some amount of Health Human Resources (HHR) planning is necessary. At present, there is no Pan-Canadian system to monitor or predict the number and specialty mix of physicians that will be needed in the future. Not every province has its own HHR plan or employs its own needs-based physician projections^{2,3}.

Canada is not the only nation to face HHR challenges. Australia and Sweden - two countries that face similar challenges serving a diverse rural and remote population - have both created successful national advisory boards to conduct research and inform health policy at all levels of government. For example, since its inception in 2009 Health Workforce Australia has already produced needs-based physician projections and assisted medical schools and local governments in coordinating training and incentive programs in rural areas⁴.

The federal government is uniquely able to coordinate a Pan-Canadian study on Health Human Resources. Inter-jurisdictional data about physician number, migration, and retirement are already tracked by the Canadian Institute for Health Information (CIHI), and the Canadian Community Health Survey tracks population health data at the regional level⁵. Moreover, the organizational ability required to lead an inter-jurisdictional project is readily available through CIHI and the federal Advisory Committee on Health Delivery and Human Resources.

The CFMS proposes that the federal government support other jurisdictions in Canada through the creation of a Pan-Canadian study on Health Human Resources, including needs-based projections of physician supply and demand. Planning Health Human Resources based on future population health needs will allow for a more responsive health system to serve all Canadians.

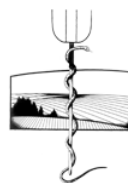
The CFMS calls on the federal government, in conjunction with provincial and medical organizations, to create a Pan-Canadian study on Health Human Resources, including needs-based projections of physician supply and demand.

References

1. Canada Gazette Part II, Vol. 146., No. 26, pp. 2667 - 2679.
2. CMA. Results of Provincial-Territorial Medical Associations Physician Resource Interviews.
3. Ontario Population Needs-Based Physician Projection Model, HealthForceOntario, available online at <http://www.healthforceontario.ca/UserFiles/file/PolcymakersResearchers/needs-based-model-report-oct-2010-en.pdf>
4. Health Workforce Australia Annual Report 2011-2012. Health Workforce Australia, available online at https://www.hwa.gov.au/sites/uploads/HWA-Annual-Report-2011-2012_0.pdf
5. Canadian Community Health Survey, Annual Component. 2012. Statistics Canada.

ENDORSEMENTS

Southwestern Ontario Medical Education Network
SWOMEN



Society of Rural Physicians of Canada
Société de la Médecine Rurale du Canada

**ASSOCIATION
MÉDICALE
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**CANADIAN
MEDICAL
ASSOCIATION**

The Canadian Federation of Medical Students (CFMS) is the representative voice of Canadian medical students to the federal government, to the public, and to the national medical organizations. We are a group representing over 7,500 medical students at 14 Canadian medical schools from coast to coast. It is our mission to provide representation, services and communication within our membership and to the world at large. We are an ever expanding organization which continually strives to meet the needs of Canadian medical students.

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FOR FURTHER INFORMATION

Robin Clouston, *CFMS President*
Thomas McLaughlin, *CFMS Vice-President Advocacy*
Miriam Lerner, *CFMS Vice-President Communications*

president@cfms.org
vpadvocacy@cfms.org
vpcommunications@cfms.org

Canadian Federation of Medical Students
324 Somerset Street West, Suite 300
Ottawa, ON K2P 0J9
Phone: (613) 565-7740
Fax: (613) 288-0524
www.cfms.org

