

Nova Scotia Federation of Municipalities

June 18th 2018

What is Doctors Nova Scotia and how
can we support communities?

Doctors Nova Scotia Act

Statutorily the legal representative of physicians in Nova Scotia.

Doctors Nova Scotia is governed by an Act of the Provincial Legislature and is the representative of physicians in Nova Scotia.

Primary Care in Nova Scotia

- The Province's Physician Resource Plan identifies that Nova Scotia will need to recruit 1,069.6 full time equivalent physician positions over the next ten years, both to replace physicians that retire and leave the province, as well as to respond to greater health challenges.
- Of the 1,069.6 full time equivalent positions, almost half, 505.8, are in family medicine; essentially we need to recruit 50 family physicians a year over the next ten years to meet the needs of Nova Scotian's. (The plan does already factor in a collaborative care model)

Primary Care in NS; The Physician Workforce

(Source: Doctors Nova Scotia)

AGE	Zone 1	Zone 2	Zone 3	Zone 4	
25 - 35 yrs	33	6	27	85	151
36 - 50 yrs	77	42	47	207	373
51 - 55 yrs	32	28	24	87	171
56 - 60 yrs	32	22	31	91	176
61 - 65 yrs	27	19	17	58	121
66+ yrs	21	18	32	60	131
as of Jan 23_18	222	135	178	588	1123

The Physician Workforce in Nova Scotia

- 428 family physicians are over the age of fifty six
- Of those, 252 are sixty one or older
- Of those 131 are over sixty six

Remuneration is Important. But is it everything?

Doctors Nova Scotia is just completing a community tour, speaking to physicians in their community.

We have visited almost 40 communities, from Pugwash to Port Hawkesbury, Meteghan to Musquodoboit.

We certainly need to try and be competitive in terms of remuneration; demand for physicians seems to outstrip supply, so we need to be able to both retain our current physicians, and recruit needed new physicians.

While we work on negotiations, what else is important?

Remuneration is Important, but is it everything?

- A new payment model for family physicians, utilizing rostering and blending capitation with fee for service.
- Collaborative Care Teams
- Succession Planning. Transition into Practice, Transition out of Practice (TIPTOP)
- Distributed Medical Education, put learners in communities.
- Electronic Medical Records, MyHealthNS
- Flexibility / Creativity

The College of Family Physicians- First Five Years In Practice Survey.

Early career

1 – What are they most interested in

- Group practices and salary, want to walk into an established practice and join a team
- Mentorship programs provincially are helping create some great programs for transitioning into practice
- Establishing a network and a feeling of belonging
- Looking for balance and quality of life
- CPD opportunities for early career
- Practice management tools and resources
- Strategies for life long learning – learning early in practice how to keep up with the most current information
- Tuition Relief
- Feeling confident in their transition from residency into practice
- Guidance to navigate the various paths in family medicine - added competencies, CPFM groups etc.

So Ultimately, What Can Local Communities Do?

No one entity can successfully recruit on its own, everyone needs to pitch in.

At the learner level, communities can work with local physicians and organizations such as Dal, to introduce learners to their community. The strongest link to recruitment is familiarity with the community.

Now Lunenburg County has written to the Dean about establishing a Longitudinal Integrated Clerkship (LIC) in the Lunenburg County area.

At the practicing physician level, be a partner with the NSHA in recruiting. Meet prospective physicians and sell them on your community. Recruiting is often a high touch low tech process. Work with government and the NSHA on Return of Service opportunities. Support physicians through the new Practice Ready Assessment program. (Both support physicians in under serviced areas). Engage with local medical staff associations; work together.

The Family Physician Workforce in NS

Every area of the province, every community, will need to recruit family physicians over the next decade!

This need is not necessarily unique to Nova Scotia, but will be a national challenge.

We all need to work together in a very disciplined way, to recruit family physicians to communities.

While there are many structural needs (a new payment model, increased funding, more distributed medical education), communities, can, and need to, create a welcoming culture that will recruit, and retain, physician resources.

Doctors Nova Scotia

Thank You!