Desperately seeking doctors

Barbara Sibbald

In brief

DEER AREN’T THE ONLY TARGETS WHEN HUNTING SEASON BEGINS in Ontario each fall. Physician shortages throughout the province mean fall job fairs that bring recruiters and soon-to-be practising physicians together are growing in popularity, with some communities offering incentives to would-be recruits as competition increases. Barbara Sibbald reports on a fair organized by the University of Ottawa.

En bref

LE CHEVREUIL N’EST PAS LA SEULE CIBLE VISÉE AU DÉBUT DE LA SAISON automnale de la chasse en Ontario. Comme il y a pénurie de médecins dans toute la province, les salons de l’emploi qui réunissent recruteurs et futurs médecins sont de plus en plus populaires. La concurrence étant de plus en plus vive, des localités offrent des incitatifs à des recrues éventuelles. Barbara Sibbald présente un compte rendu sur le salon organisé à l’Université d’Ottawa.

In Ontario, the fall marks the start of hunting season for both deer and doctors. That is when communities with physician shortages begin staking out places at job fairs across the province, hoping to capture the interest of some soon-to-be-practising residents. During November there is a flurry of job fairs in the province, traditionally at Queen’s University, the University of Toronto and University of Western Ontario. This year, the University of Ottawa was added to the list.

Dr. Daniel Way, a community physician and director of postgraduate education in the U of O’s Department of Family Medicine, organized the late November fair in an attempt to meet a growing need. “It is important that medical schools work to ensure that all communities can recruit the doctors best suited to their needs,” he said.

The need obviously exists. Way, who originally slotted space for 20 exhibitors, ended up with 28 and had to turn 15 away. Most were from Eastern Ontario, although the Department of National Defence and Baffin Island were also represented. About 100 residents and 25 fourth-year students attended the 3-hour event. Way described it as an unqualified success, although he did not know how many connections were actually made.

“This is a real trend in recruitment,” says Kurt Pristanski of the Glengarry Memorial Hospital in Alexandria, Ont. In his quest to attract 2 new physicians, he attended 9 fairs last fall, including the 4 university events and a 5-stop tour sponsored by the Ministry of Health.

Many of the communities represented at the Ottawa fair already have a full complement of doctors but fear for the future. A recent survey at the University of Toronto, which indicated that 40% of new family physicians graduating from that school intend to head south, is causing particular concern.

The concern felt in Deep River, a small town in the upper Ottawa Valley, is a case in point. Its 18-bed hospital isn’t underserviced yet, but townspeople are anxious. “With half the U of T class going to the US, you wonder where it will leave communities like ours,” said Dr. Henry Gasmann, a past president of the Ontario Medical Association, as he handed brochures to students.
Way says that less than 5% of Ottawa graduates move to the US. “I think the geographical billing restrictions are a huge pressure,” he added. Under the new restrictions, novice doctors who set up in any of 4 major centres can be penalized up to 30% of the normal billing fee. Way said he encourages his students to consider all the options. The job fairs allow students and residents to learn about these options and to talk to people in need so that they can tailor their education, beefing up their training in areas such as obstetrics, mental health, geriatrics, emergency medicine and anesthesia. Residents can also take the first step toward negotiating a contract.

The job fairs allow students and residents to learn about these options and to talk to people in need so that they can tailor their education, beefing up their training in areas such as obstetrics, mental health, geriatrics, emergency medicine and anesthesia. Residents can also take the first step toward negotiating a contract. Many of the residents and students attending the Ottawa fair said they are attracted by the rural lifestyle and the broader scope of practice available away from large urban areas. “As a family physician working outside the city you get to offer broader-based care,” said second-year resident Mike Horsey. “In the city every time something interesting comes up you have to refer it.”

Many communities offer special incentives to lure doctors. Seeley’s Bay, east of Kingston, needs 2 physicians for its new medical centre. It is offering free secretarial help and office space for a year. Recruiters even offered to knit sweaters for new doctors.

“We can’t compete with the US but we do have a lot to offer,” said volunteer recruiter Deborah McCann. “If you ask me they shouldn’t be allowed to leave — we are subsidizing their education.”

Marathon, a community of 5500 on the north shore of Lake Superior, offers a somewhat different incentive: a balanced lifestyle. Since 1995, recruiter Dr. Mike Sylvester has shared responsibilities with 6 other physicians, allowing everyone to balance work and leisure, and avoid burn-out (see OReilly M. Medical recruitment in rural Canada: Marathon breaks the cycle. Can Med Assoc J 1997;156:1593-6).

“Most small towns expect doctors to work more than average, [but] we offer a good lifestyle,” said Sylvester. Marathon is seeking 2 or 3 more doctors so that existing staff can take sabbaticals and work fewer hours.

Renfrew, a town of 9000 located 100 km west of Ottawa, needs 2 or 3 physicians and offers a ready-made practice and subsidized office space. The Ottawa job fair was a first for the community. “It’s hard to compete with the US,” admitted Dr. John Collins, “but if people do go south I think they will return. They’re just scared by the health care environment and the Harris government.”

Recruitment fairs are nothing new. Queen’s held Ontario’s first university-sponsored job fair in 1993, and the province has been hosting a tour for underserviced communities for 19 years. During Ontario’s 1997 tour, representative from 43 designated underserviced areas visited 5 medical schools.

[Interestingly, the province for the first time has more underserviced communities in the south (37) than the north (31).] The province offers a range of incentives to doctors who relocate, including grants of up to $40 000 over 4 years, salaried positions and guaranteed leave. But the Professional Association of Internes and Residents of Ontario (PAIRO) says the provincial program misses many needy communities because its definition of underserviced — which is based primarily on the ratio of billing physicians to population — is too simplistic. PAIRO, which wants the province to adopt a more realistic definition, created it’s own registry of needy communities in 1996. The list, which contained the names of 70 communities in 1997, is distributed to registry members and posted on the Internet (www.pairo.org).

Although the provincial government, universities and PAIRO are all involved in recruitment, no one has comprehensive data on the number of physicians recruited or required. It seems, though, that the need isn’t diminishing. In 1995, 63 designated underserviced communities were seeking 88 doctors; in 1997, 68 communities sought 116 physicians.

Collins, chief of staff at the Renfrew Victoria Hospital, says small towns are desperate. “It’s hard to get people to do cradle-to-grave practice,” he said. “Even a few concrete leads are worth the effort.”