

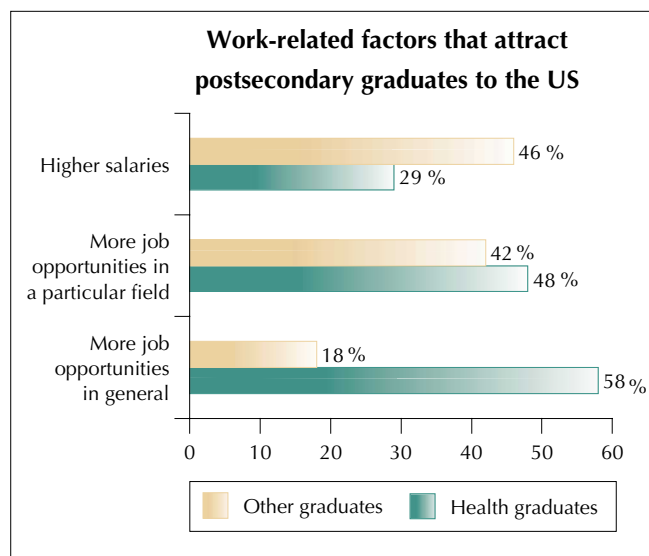
## Pulse

### The brain drain: a statistical snapshot

A Statistics Canada and Human Resources Development Canada study of postsecondary school graduates who moved to the US has determined that 1.5% of members of the 1995 graduating class had emigrated to the US by the summer of 1997.

Of the more than 4600 Canadians who graduated in 1995 and emigrated, 1300 (almost 30%) were graduates of health-related programs. At the university level, graduates of health programs accounted for 20% of those who moved to the US but for only 8% of total graduates remaining in Canada. Within the college-level group, 54% of those who moved to the US were graduates of health-related programs; only 15% of college-level students remaining in Canada were from those programs. The majority of college graduates who moved to the United States were nurses. Texas and Florida were favoured destinations, claiming 47% of emigrating health graduates.

The study found that graduates in health fields were highly likely to have relocated to the US for work-related reasons (87%, compared with 57% of all graduates who relocated). Greater job opportunities, both in general and in a particular field, were the factors most likely to attract health graduates to the US. Graduates in health fields were less likely than graduates of other programs to mention



higher salaries as a major factor in their decision to relocate. The vast majority of health graduates who moved to the US (87%) began work immediately, compared with only 57% of all graduates who moved. — *Shelley Martin, CMA, martis@cma.ca*

### NS radiation oncologists opt for salary

It's bye-bye fee for service and hello salary for Nova Scotia's 9 radiation oncologists. The move to "fixed payments" is part of the health department's efforts to increase the number of cancer specialists practising in the province. "Cancer specialists are in high demand across Canada and throughout North America," says Health Minister Jamie Muir. "Moving from fee for service will help us attract and retain radiation oncologists, enabling us to provide high quality cancer care to patients. The agreement enhances the working environment for these doctors by allowing them to spend more time with patients and involved in research and academic interests."

The proposal to put radiation oncol-

ogists on salary was originally brought forward last spring by Dr. Paul Joseph, the provincial head of radiation oncology. He says the new method of payment means that the province can now offer the specialists a competitive compensation package — an important factor in recruiting. On average, Nova Scotia's radiation oncologists were making 20% less than their Canadian counterparts. The new payment method "frees us from the yoke of fee for service," says Dr. Andrew Padmos, Nova Scotia's Cancer Care Commissioner. "We're in a position to match or better salaries paid for medical oncologists in other parts of Canada."

The strategy has worked. Last year there were only 6 oncologists on staff at

the Queen Elizabeth II Health Sciences Centre, and several vacancies. This fall the last 2 vacancies will be filled, despite stiff competition across the country, where there are more than 20 vacancies for these specialists. The health department has also approved the addition of 3 new radiation oncologists to the province's cancer care team. These positions will be phased in by October.

But staffing is only the beginning, notes Padmos. "We've plugged the holes in the roof. Now we're going to start on serious renovations. We have an organizational structure and mandate to make cancer care better. We're poised to do a lot of change in the system in a short period." — *Donalee Moulton, Halifax*