



MINUTES
WORKING GROUP
OF THE
PHYSICIAN RECRUITMENT AND RETENTION STEERING COMMITTEE

Tuesday, April 23, 2019 at 2:30 p.m.
DBHSC
100 Main Street West, Hamilton

Present: Dr. Dennis DiValentino and Dr. Sarah Kinzie

Absent: Councillor T. Whitehead (Chair), Mr. Keanin Loomis

Also Present: Jane Walker, Director, Physician Recruitment & Retention and Julia Hayes, Physician Recruitment Coordinator.

Quorum was not achieved, but the members decided to move ahead with discussion of the items without voting.

1. Management Committee Agenda

1.1. Agenda for April 23, 2019 and minutes of May 23, 2018.

The agenda was reviewed.

2. KPI Report (Key Performance Indicators)

2.1. Annual Report

J. Walker noted that 2018 was a successful year in that 25 family physicians were recruited to Hamilton (17 Permanent and 8 locums). However, with 28 physicians leaving practice (half retired, half moved to other communities), we saw a net drain of 3 physicians and ended the year with 343 family physicians.

A move to the new DBHSC at the end of January 2019 to be closer to residents and to physicians has worked out well (J. Walker worked out a two year contract with DFM and Dr. O'Byrne of Faculty of Health Sciences) and an increase in the number of meetings with residents has already been noted. Two to three requests are coming in weekly by McMaster DFM residents to review contracts for those not staying in Hamilton, adding to our work load but offering a significant benefit to McMaster residents as nothing like this is offered at any other Ontario university.

Many thanks to the Hamilton Academy of Medicine for supporting the program with office space since 2004. J. Walker continues to check-in with the Academy to ensure the program is kept up-to-date with new developments.

Several themes continue to play out with recruitment and retention:

1. Retiring physicians in Hamilton continue to sell their practices while physicians in Niagara and Brantford Regions can take over a practice for free. Prices have decreased in Burlington as a result of increased competition for family physicians.
2. Recruiting in the suburbs or any area outside of the core continues to be challenging as new physicians are not able to set up practices in the payment model (FHO or FHO-FHT) that they were trained in. (Only some of the lower City is designated as high needs by MOHLTC and thus new graduates are eligible to join FHOs. None of the suburbs or upper areas of Hamilton are designated high needs.)
3. Follow-up to a letter sent to then Minister of Health Hoskins (October 13, 2017) was re-sent to Minister Elliott (September 24, 2018). A reply was received by the City November 6, 2018 stating that the Ministry collaborates with the LHIN to determine areas of high need. While J. Walker has had numerous and on-going discussions with Dr. J. Everson at the LHIN surrounding this issue, to date, no new postal codes have been added.
4. Recruiting continues to be a competitive environment with new grads receiving multiple offers of positions.
5. New graduates from Canadian medical schools continue to seek positions in group FHO-FHTs and are less likely to choose solo practices. Of the 17 new permanent physicians in 2018, 6 were solo practices none of which were taken by Canadian graduates. We are very thankful to the IMGs (international medical graduates) who took over these practices. 33% of all practices in Hamilton are solo practices, which disproportionately represent older practices.
6. Currently, 13% of our workforce is 65+ so many retirements are expected over the next few years. However, almost 30% of our workforce is under 40, a huge improvement from 2007 when only 1 in 10 were under 40.

With 389 family physicians needed in our City and 311 permanent physicians practicing, we still have a shortage of 78, primarily on the mountain and in the suburbs. The lower part of the City is still by and large well served. J. Walker expects a minimum of 20 family physicians to leave in 2019.

2.2. Current Statistics

2018 saw our overall number of physicians decline slightly as three more physicians left than started. There has been a steady improvement in the overall distribution of ages of physicians since inception of the program. Given that 45 family physicians over age 65 are still practicing, we can expect many more retirements over the next several years.

2.3. KPI Summary

25 new recruits in 2018 (17 permanent and 8 locum) and 8 (6 perm and 2 locum) so far in 2019. There are many retirements upcoming, with approximately 20 expected by the end of the year.

2.4. Physicians by Community

Updated stats on the number of physicians in each of the six communities making up Hamilton were provided. Ancaster, Flamborough, Glanbrook, Hamilton Mountain and Stoney Creek all continue to experience a shortage of family physicians (78 total).

3. Budget and Cashflow Year 15 2018

3.1. 2018 Cash Flow - Final

Final numbers presented.

3.2. 2017 Budget to Actual Comparison - Final

Final numbers are in. The program spent \$43,630 less than budgeted in 2018 almost entirely in savings for support staff.

3.3. 2019 Cash Flow

The program has spent \$66,337 to the end of February.

3.4. 2019 Budget to Actual Comparison

The program has spent \$66,337 to the end of February, \$3,500 less than budgeted.

4. Conference, Event and Presentation Report for 2019.

A brief review of the conferences and presentations expected in 2019 was provided.

5. Other Business

5.1. Funding

J. Walker reported that she obtained funding from HHS and McMaster for 2018. She also obtained funding from St. Joseph's for 2019. Requests to the Hamilton FHT will be made shortly. S. Kinzie to investigate funding from DFM.

5.2. New Space

J. Walker and J. Hayes moved into their new office space in DBHSC in late January 2019. A revamping of office furniture will be necessary to facilitate productivity and ergonomics.

5.3. Contract

J. Walker noted her contract expires November 23, 2019. Discussion by S. Kinzie and D. DiValentino about the importance of recruitment to the local economy. D. DiValentino stressed the need to have the program exist indefinitely given the number of retirements upcoming over the next several years. He recommends that J. Walker and J. Hayes be permanent employees with the City of Hamilton and not contract employees in recognition of the importance of medical care of its' citizens and to the broader economy.

5.4. Other Business:

5.4.1. Board of Health: Response to Letter from September 24, 2018 to Honourable Christine Elliott, Minister of Health

The Mayor of the City of Hamilton sent a letter to the Honourable Christine Elliott on September 24, 2018 regarding the entry of new physicians into FHOs. A response by MOHLTC received November 6, 2018 suggested that we contact the LHINs should changes in the high needs area be warranted. While the LHINs have been contacted many times in the past, because of restructuring at the LHIN, a discussion to hold off



on contacting the LHIN again regarding the designation until news or announcements are made as to the LHINs role was held.

5.4.2. Resident Engagement

S. Kinzie requested that J. Walker track contributions made to DFM residents, especially those not intending to stay in Hamilton to ensure equity of funding contribution. Are there standard questions that residents ask that can be packaged for an educational piece for them for instance? S. Kinzie is on a national committee developing e-modules to improve practice management education of residents.

5.4.3. HFAM

A new family medicine organization has been formed by Dr. Tammy Packer, Chief HHS and St. Joseph's to represent all family physicians in Hamilton. D. DiValentino is on the board along with 8 or so colleagues including academic and community. The purpose is the re-engage physicians and those working in the hospitals especially in regards to transitional care and as they look toward the formation of Ontario Health Teams.

6. Adjournment

The discussion ended at 3:30 p.m.