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**Quick Response Code:** 



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10.4103/cjrm.cjrm 49 21

## EDITORIAL / ÉDITORIAL

## President's Message. Rural Advocacy

he theme of the cancelled 2020 Rand R conference was 'Rural Physician Advocacy'. Our organisation exists because of the powerful advocacy of rural physicians. Over the years, the SRPC and its members have punched above their weight to improve health care for rural Canadians. Through the difficulties of the pandemic, we have continued to make advancements in some important areas of rural health care. These include national physician licensure, virtual care and rural patient

For several years, the SRPC and our allies have advocated for national physician licensure. Many and remote communities depend on physicians from other jurisdictions to provide virtual care and locum relief. This advocacy has continued through the pandemic. In May 2021, the SRPC and other physician groups circulated a letter to all ministers of health calling for action on a national approach to licensure. We also submitted a brief to the House of Commons Standing Committee on Health. This work appears to be garnering attention from decision-makers. The pandemic may prove to be a tipping point in the ongoing work for a system of national licensure.

Virtual care changed our practises significantly over the past year and a half. Many of the improvements are likely to become permanent parts of how we work. While virtual care has improved access for many patients, the rapid uptake has raised important questions. What conditions are most appropriate for virtual care? What

platforms work best? How can virtual care support continuity of care for rural patients? These need to be answered with a rural lens and in the context of infrastructure and bandwidth deserts that remain widespread across rural Canada. SRPC has been represented on a national Virtual Care Taskforce and at a recent virtual care stakeholder summit.

The need for patient access to COVID-related critical care has highlighted the reliance on and gaps within the transfer systems for many rural and remote communities. The inadequacies of existing medical transportation infrastructure often leave patients waiting in underserved areas for too long and cause stress for patients, families and transferring physicians. 1 Following the release of our joint recommendations for improving patient transfer, 2 the SRPC is planning the next steps in advancing this issue through research and advocacy.

I hope that we can capitalise on the opportunities for change that the pandemic has given us. Canada's post-pandemic rural health care will be better as a result.

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Received: 18-07-2021 Revised: 25-07-2021 Accepted: 26-07-2021 Published: 06-10-2021

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How to cite this article: Woollam G. President's Message. Rural Advocacy. Can J Rural Med 2021;26:149-50.