





# News Release

# Steps to improving rural health care in Canada

(February 23, 2017, Mississauga, ON) Individuals living in rural communities in Canada have long faced challenges in obtaining equitable access to health care services. They constitute 18% of the Canadian population but are served by only 8% of the physicians in Canada.\* Improving the recruitment and retention of skilled family physicians in rural communities is needed to improve access to and equity of health care.

Addressing these issues is the focus of a collaboration of the Society of Rural Physicians of Canada (SRPC) and the College of Family Physicians of Canada (CFPC) through Advancing Rural Family Medicine: The Canadian Collaborative Taskforce (the Taskforce). Yesterday the Taskforce hosted the Summit to Improve Health Care Access and Equity for Rural Communities in Canada. Attendees included leaders from health care organizations and government including The Honourable Dr. Jane Philpott, Minister of Health and representatives from rural communities and Indigenous organizations. Discussions focused on how best to implement a series of recommendations from the Taskforce's Rural Road Map for Action—a comprehensive and long-term strategy to improve access to health care in rural communities. The report builds on successful recruitment and retention of family physicians working in rural Canada, and informed by research evidence.

The Rural Road Map for Action aims to provide ways to: support Canadian medical schools in developing physicians who are equipped for and interested in working in rural communities; link medical learners with family physicians who are well-entrenched in their rural communities; enable family physicians and other specialists to provide patient care and mentor learners; and strengthen integrated networks of specialists and other care providers to ensure that physicians can provide high-quality health care for their patients and communities despite geographical challenges.

"Recruiting and retaining family physicians in rural areas through financial incentives alone is not enough," says Dr Trina Larsen Soles, SRPC Co-chair of the Taskforce. "We need a coordinated and thoughtful alignment of education, practice policies, community involvement, and government support. Family medicine residents who are educated in rural training sites, who immerse themselves in the communities and who see themselves supported by peers, specialists, health care providers, and evolving distance technologies, are more likely to choose rural and stay rural."

<sup>\*</sup> Canadian Institute for Health Information. Supply, Distribution and Migration of Canadian Physicians, 2012. Ottawa, ON: Canadian Institute for Health Information; 2013.







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"We need the necessary infrastructure to support primary care providers in rural communities on a sustainable basis," adds Dr Ruth Wilson, CFPC Co-chair of the Taskforce. "The Rural Road Map for Action provides a strategy that builds on successes in innovations and interventions in medical education, practice, and policy. Sustaining these successes will require research, government support, and a strong commitment to the fact that improving rural access to care is a shared responsibility."

The changes made to the training of family physicians are starting to make a difference, with many now spending extended periods of time in rural communities immersed in rural ways of life and obtaining rural competencies specifically needed to work in these isolated locations. The CFPC's 2016 Family Medicine Longitudinal Survey indicates that 51.3% of family medicine residents are somewhat or highly likely to provide care in rural populations in their first three years of practice as family physicians.

ABOUT ADVANCING RURAL FAMILY MEDICINE: THE CANADIAN COLLABORATIVE TASKFORCE

In 2014, the CFPC and the SRPC embarked on a joint initiative to develop a pan-Canadian framework to strengthen the rural physician workforce, provide high-quality culturally safe care, and improve access for all people living in rural communities across Canada. In 2015 the Taskforce conducted a focused review of rural training and practice at the education and health system levels and published their findings in a background document titled <u>Review of Family Medicine Within Rural and Remote Canada: Education, Practice, and Policy.</u>

More information about the Taskforce is available online.

#### ABOUT THE SOCIETY OF RURAL PHYSICIANS OF CANADA

Founded in 1992, the SRPC is the lead advocate and representative for over 3,000 rural physicians practicing in Canada. Its mission is to provide leadership for rural physicians and to promote sustainable conditions and equitable health care for rural communities. The SRPC performs a wide variety of functions, such as developing and advocating health delivery mechanisms, supporting rural doctors and communities in crisis, promoting and delivering continuing rural medical education, encouraging and facilitating research into rural health issues, and fostering communication among rural physicians and other groups with an interest in rural health care.







### ABOUT THE COLLEGE OF FAMILY PHYSICIANS OF CANADA

The CFPC represents more than 35,000 members across the country. It is the professional organization responsible for establishing standards for the training and certification of family physicians. The CFPC reviews and accredits continuing professional development programs and materials that enable family physicians to meet certification and licensing requirements and lifelong learning interests. It also accredits postgraduate family medicine training in Canada's 17 medical schools. The College provides quality services, supports family medicine teaching and research, and advocates on behalf of family physicians and the specialty of family medicine.

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