W.J. Copeman

# The Underserviced Area Program of the Ministry of Health of Ontario

#### **SUMMARY**

The Underserviced Area Program provides financial incentive designed to attract doctors, dentists, physiotherapists, occupational therapists, speech pathologists, audiologists, and chiropodists to Northern Ontario. There are almost 1,000 people working in, or committed to joining, the program on completion of training. It is the largest program of its kind in the world. (*Can Fam Physician* 1987; 33:1683–1685.)

## **RÉSUMÉ**

Le Programme pour régions mal desservies offre des incitatifs financiers destinés à attirer des médecins, dentistes, physiothérapeutes, ergothérapeutes, orthophonistes, audiologistes et podiatres dans le Nord de l'Ontario. Le programme compte près de 1,000 personnes qui y travaillent déjà ou qui se sont engagés à y travailler au terme de leur formation. Il s'agit du plus important programme de ce genre au monde.

Key words: underserviced area program, Ontario

Dr. Copeman practised in solo and group practice in Northern Ontario for twenty years. In 1968, he joined the Ministry of Health and was placed in charge of the **Underserviced Area Program and Northern Ontario Public Health** Service. He now travels over 100,000 kilometres a year, mainly in the North. He has also been involved in studies in telemedicine, the use of nurse practitioners in primary care, visual care services, and a federal/provincial study team concerned with health services to **Indians and Eskimos living along** James and Hudson's Bay. Requests for reprints to: Dr. W.J. Copeman, Manager, Underserviced Area Program, Ontario Ministry of Health, 15 Overlea Blvd., 6th Floor, Toronto, Ont. M4H 1A0

N OCTOBER 1, 1969, the Underserviced Area Program was introduced because many communities in Northern Ontario were experiencing great difficulties in obtaining the services of general practitioners. Shortly thereafter, in response to requests from

residents in Southern Ontario, the program was enlarged to include the whole province.

Basically, the program provides a financial incentive. While it was initially designed to recruit 60 general practitioners and 20 dentists, there are now almost 1,000 people working in or committed to joining the program, which is administered by 12 staff people. The total number of persons employed in the program includes over 575 doctors working in 200 communities. The annual attrition rate for physicians is less than 5%.

Once an application has been approved by the Ministry of Health, a general practitioner who agrees to work in Northern Ontario is eligible to apply for an income-tax-free incentive grant of \$40,000, paid quarterly over four years. The grant is over and above what the doctor earns in the practice.

Each doctor determines the location of his or her practice from a list of communities provided by the Ministry of Health. To assist the doctor in deciding where to locate, the Ministry of Health will pay travel and accommodation expenses for the doctor and spouse to visit one or more areas to assess the practice opportunities available.

In order to meet the needs of the North, over the years a number of different components of the program have been developed.

### **Undergraduate Bursaries**

Based on funds provided by the Ministry of Northern Development and Mines, 36 bursaries of \$5,000 are awarded annually to Ontario residents attending a Canadian medical school. The bursaries are available to students in both of their last two years in college.

In return for each academic year of financial assistance, the student agrees that following completion of internship, he or she will spend one calendar year in general practice in an area designated as underserviced. One half of the bursary is paid in the fall and one half early in the new year to minimize income tax payable. If the student fails to fulfill the commitment, the money is refundable to the Ministry of Health with interest. Over 60% of the recipients fulfill their obligation, and indications are that this figure is significantly

increasing. Sixty-six per cent of bursary recipients in the years 1969-74 continued to practise in underserviced areas following completion of their obligation. This program is considered to offer a good cost benefit to the province.

Following completion of internship/FP residency, the former bursary recipient is eligible for the usual financial incentives of the program, without being subject to any penalty for funds received as an undergraduate.

#### **Locum Tenens**

Situations of acute shortage of physician services can arise from the absence of a physician because of illness, death, or departure from a community. To meet this difficulty, physicians are hired for periods of a few days or months until arrangements can be made to recruit a full-time resident doctor. There are five to 25 locums on the program at any one time.

The locums are paid a minimum salary of \$1,400-\$1,600 per week, depending on where they go and their years of experience. In addition, all their expenses are paid. A number of senior physicians have found the locum program an excellent way to slow down, work part time, earn some money, and retain their skills.

#### Resident Specialists

As more general practitioners were attracted to the North, more doctors began to refer patients to Southern Ontario for specialist consultations. Moving patients such long distances is expensive, time consuming, and productive of many difficulties. For these reasons, the Underserviced Area Program was expanded, in 1978, to attract full-time specialists to Northern Ontario. These specialists were eligible to apply for income-tax-free incentive grants of \$20,000 paid quarterly over four years. They received these grants in addition to the monies they earned from the practice.

The specialists most acutely needed in the North are psychiatrists. The incentive grant for practitioners of this one specialty currently stands at \$40,000.

### **Travelling Specialists**

The recruitment of full-time resident specialists to Northern Ontario can be a time-consuming process. To meet

short-term needs, the program was adapted to include travelling specialists. These are fully qualified specialists residents in Northern or Southern Ontario who undertake to visit one or more Northern communities on a regular basis and to provide consulting services and in-service seminars for hospital and medical staff.

These specialists are reimbursed for all travel, accommodation, and meal expenses. They also receive a daily honorarium of \$300 per day and a per diem rate of \$406 per day, or they can opt for fee-for-service payment. There are about 70 specialists in the program.

#### **Nursing Stations**

In assessing complaints about lack of doctors' services, we identified a number of communities to which, because of isolation or small population, it would be impossible to attract a fulltime resident physician. To cover these situations, 16 nursing stations have been established. These are staffed by a qualified nurse with clerical support. The nurse maintains regular telephone contact with the doctor(s) in the nearest community. A doctor visits the station at least once a week, sees patients, and assists the nurse with any difficulties he/she is experiencing. These stations are administered by the nearest hospital, health unit or medical clinic.

Efforts are made to recruit qualified staff locally. These stations have been very well received in the communities where they are located, and we have had many reports about the outstanding work being done there.

#### **Medical Clinics**

In the medical clinics program it is the responsibility of the community to see that adequate housing and clinic facilities are made available for the doctor at a reasonable rental. New modern clinics usually intended to accommodate two or more doctors and one or more dentists have now been built in 126 communities. Some are located in communities that previously had no resident health-care professionals

The Ministry of Northern Development and Mines provides some capital funds (up to 66%) for these buildings. Other funding comes from federal and provincial governments and the local

communities. The average rent paid for offices in these buildings is less than \$400 per month per professional. The availability of a modern building at such a reasonable rent plays a major part in bringing needed doctors and dentists to a community.

#### **Recruitment Tour**

To assist municipalities in recruiting health-care personnel, the Ministry of Health and the Ministry of Northern Development and Mines conduct a health-personnel recruitment tour each October. Every community in Northern Ontario is invited to send representatives. On five successive nights, local community representatives, along with representatives of the two Ministries, will visit the five Health Science Centres in Ontario: Ottawa, Kingston, London, Hamilton and Toronto.

In a large room on campus or nearby, each community has a table on which it can place any audio-visual display it wishes to attract health personnel to its area. In the centre of the room, the Ministry of Health puts on a wine-and-cheese reception. Students from over 143 health-teaching programs, representing all of the health disciplines, are invited to attend. The list invited includes residents, interns and medical graduates.

As many as 500 people will attend any evening. This tour is very popular. It has increased in size each year and over 50 communities are now participating. This undertaking has successfully recruited many people to the North.

#### Pickle Lake and Armstrong

Pickle Lake and Armstrong are two small remote communities in Northern Ontario. Because of their isolation, it was impossible for their inhabitants to recruit full-time resident physicians. One medical centre was built in each community, and full-time physician services have been maintained for 15 years by rotating locum tenens for a minimum two-week period.

#### Other Health Disciplines

To provide additional health resources in the North, other health disciplines have been added to the program. Financial incentives are now provided for physiotherapists, occupational therapists, speech pathologists,

audiologists, and chiropodists. Members of other health disciplines who are looking for jobs in the North are also given every encouragement and assistance.

#### **Northern Outreach Program**

The University of Western Ontario, under an agreement with the Ontario Ministry of Health, provides assistance and advice to health programs already in operation in Northern Ontario. This assistance takes the form of in-service seminars and a library service with visiting consultants.

#### Physiotherapy Clinics

This program financially supports a physiotherapy clinic in Cochrane, under an agreement with the University of Toronto, as well as a clinic in Beaverton, Ontario.

#### **CNIB Mobile Vision Van**

A mobile vision-van service administered by the CNIB and staffed by private ophthalmologists travels from May to November to isolated communities in Northern Ontario and provides vision care to the local residents.

The administration of the van and the services of the physicians are supported by the Underserviced Area Program.

# Northern Medical Specialist Incentive Program

The Minister of Health has further announced a Northern Medical Specialist Incentive Program which will run concurrently with the Underserviced Area Program. This new program will be designed to attract 50 more resident specialists to Northern Ontario. The program will provide income-tax-free incentive grants of \$40,000 each paid quarterly over four years. In return, recipients must provide outreach satellite services to smaller isolated communities for a minimum of 12 days each year.

For this new program the financial incentives for the travelling specialists will also be increased.

#### Conclusion

The Underserviced Area Program has made a major contribution to the availability of health services in Northern Ontario.



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