Physician Demographics

- On a head count basis, there are approximately 510 family physicians practicing in Newfoundland and Labrador, excluding locum physicians. Of this number, 239 physicians (46.9%) are graduates of Memorial University, 65 physicians (12.7%) are graduates of other Canadian Universities and 206 physicians (40.4%) are considered International Medical Graduates (IMG).

- Of the 510 listed above, some of these physicians work full-time or more than full-time, some work part-time, some are semi-retired, some are on maternity/paternity leave, some may be sick and some may be involved in academic and/or research activities, etc.

- Therefore, from a full-time equivalent (FTE) perspective, Newfoundland and Labrador functionally has about 390 FTE family physicians. Of this number, approximately 122 (a conservative estimate) are required to staff the province’s ERs. This leaves 268 FTE family physicians to provide primary care to the 508,925 residents of Newfoundland and Labrador - or roughly 1900 patients per physician on average. This is far in excess of the national rate of 1250 to 1500 patients per clinical FTE physician.

- The NLMA estimates that between 100-150 additional family physicians are needed to meet the current needs of the province’s population.

- Family physicians in Newfoundland and Labrador work an average of 53.5 hours per week, the longest in Atlantic Canada and the second longest in the country (second only to Alberta at 53.9 hours). Family physicians in Newfoundland and Labrador also work more hours that are dedicated to direct patient care than any other province in the country. Physicians in the province spend about 36.2 hours directly caring for patients, while the national average is 33.3 hours. About 66 per cent of family physicians in the province do additional on-call work with 19 per cent working more than 240 hours of call each month, the second highest of all provinces in Canada.

- Many physicians in the province are also approaching retirement eligibility. Of the 510 family physicians, 157 (30.8%) are over the age of 55. Most of these physicians (94) are older than 60 years of age.

- When these physicians retire, a replacement will either take over their practice or the retiring doctor will simply close their practice. Patients left without family doctors are forced to rely on walk-in clinics or emergency departments.

- The fact that more than a quarter of our family doctors are approaching retirement age is of great concern given that it takes an average of two family doctors to replace each retiree. According to the 2007 National Physician Survey, new graduates do not typically work the long hours of their predecessors. When asked which factors would be most important to having a satisfying and successful medical practice, 93 per cent of medical students and 80 per cent of residents stated the “ability to achieve a balance between work and personal life.”
Access to Care

- Newfoundland and Labrador has the highest percentage of residents in Atlantic Canada who do not have a family doctor. According to the most recent data available from Statistics Canada, nearly 13 per cent (12.7%) of people in the province over the age of 12 do not have a family doctor. That compares to 10.1 per cent in PEI, 6.6 per cent in New Brunswick and 5.4 per cent in Nova Scotia.\(^{vii}\)

- According to the latest National Physician Survey, roughly 26 per cent of family physicians in the province have either closed or partially closed their practices to new patients.\(^{viii}\)

- The College of Family Physicians of Canada (CFPC) reports that patients in Canada who have family physicians may still encounter problems accessing primary care. According to a 2006 CFPC discussion paper, physician and/or service availability are the top reasons for difficulties in accessing “routine” and “immediate” care.\(^{ix}\)

- The CFPC also reports that a further analysis by Sanmartin and Ross, showed that Canadians with regular family physicians are just as likely to experience difficulties in accessing “immediate” care as those without a regular physician. Similar findings have been found by Love et al (1999), Periera et al (2003), and Mathews et al (2003).\(^{x}\)

- A joint report released in 2009 by the College of Family Physicians of Canada and the Canadian Medical Association titled *The Wait Starts Here: Primary Care Wait Time Partnership*, contained a survey which found that 84 per cent of respondents were either “very” or “somewhat concerned” that many Canadians do not have a family doctor. Among the 82 per cent of survey respondents who said they had a family doctor, 51 per cent said they were concerned about the wait to get an appointment with their doctor and they expressed fears that their family doctor may retire or move away.\(^{xi}\)

- According to the 2007 National Physician Survey, the top five factors that family physicians reported as being major impediments to the delivery of their care to patients were paperwork, system funding, bureaucracy, availability of personnel and external demands on their time.\(^{xii}\)

- The top five factors increasing demand on physicians’ time were the increasing complexity of the patient caseload, the management of patients with chronic diseases, increasing patient expectations, the aging population and the lack of availability of other local health care professional services.\(^{xiii}\)

- The Fraser Institute waiting list survey found that Canada-wide waiting times decreased in 2009. However, while the total waiting time between referral from a general practitioner to treatment decreased nationally, the wait actually increased in Newfoundland and Labrador. Among all the provinces, Newfoundland and Labrador had the longest median wait at 27.3 weeks or more than six months. The national average is 16.1 weeks or about four months.\(^{xiv}\)

- Moreover, since 1993, the medical wait times from a GP referral to a specialist increased by 352 per cent in Newfoundland and Labrador.\(^{ xv}\)
Recruitment and Retention

- The 2007 National Physician Survey reported that 13 per cent of all physicians in Newfoundland and Labrador planned to move to another province, compared to 3 per cent in Ontario and BC.\textsuperscript{xvi}

- Newfoundland and Labrador has a difficult time recruiting doctors, especially in rural communities. The province also has a difficult time retaining medical graduates from Memorial University. Each year, the province loses about half of its medical graduates to other jurisdictions. Of the 59 new graduates in 2008, 29 have since left the province. Of the 58 grads in 2007, 25 left the province; 25 of the 56 grads left in 2006 and 35 of 63 grads left in 2005.\textsuperscript{xvii}

- A 2006 Memorial University research paper examined 1,322 Memorial medical students who graduated between 1973 and 1998 and found that while 86.8 per cent were working in Canada as of 2004, only 30.7 per cent were working in Newfoundland and Labrador.\textsuperscript{xviii}

- In 2008, Memorial University published another study that identified family physicians who began their practice in the province between 1997–2000 and determined where they were located in 2004. The study found that the overall retention of newly-licensed family physicians was 13.4 per cent. Of the 157 physicians in the sample, 21 stayed in the province.\textsuperscript{xix}

- The same study found that fewer than 1 in 7 newly-licensed family physicians remained in the province up to 7 years after obtaining their license. Half of them had left after roughly two years, although locally trained physicians remained in the province twice as long as IMGs and graduates of other Canadian medical schools.\textsuperscript{xx}

- Approximately 28 per cent of the graduating medical students at Memorial University in 2007 were from the Family Medicine Program. In 2008, about 24 per cent were family medicine graduates.\textsuperscript{xxi} In order to maintain the goal of a 50/50 balance between family physicians and other specialists in practice, we need at least 45 per cent of the graduates of our medical schools and 45 per cent of the post graduate entry positions to be committed to family medicine.\textsuperscript{xxii}

- Encouraging new graduates to choose family medicine as a career choice is becoming a challenge. The image of family physicians has become tarnished by heavy workloads and the increasing responsibility for a growing number of acute and complex patients. Many no longer see the continuation of the solo practitioner as a viable career option, especially in rural areas of the province.

- Provincial licensure allows IMGs to practice in under-serviced and rural communities while they complete their licensing requirements to practice medicine anywhere Canada. Provisional licensing accounts for the largest proportion of new primary care physicians in Newfoundland and Labrador, but does not lead to long-term retention for the province.\textsuperscript{xxiii}

- In 2008, Memorial University reported that IMGs make up roughly 44.5 per cent of the family physician workforce in the province, as compared with 23 per cent in Canada. Although IMGs make up a large proportion of newly-licensed physicians in the province, relatively few remain in the province longer than one year after earning full licensure. The medium retention time for both international graduates and graduates of other Canadian schools was 22 months.\textsuperscript{xxiv}

- In its January 11, 2005 issue, the \textit{Medical Post} estimated that tuition and living expenses for four years of medical school can cost up to $125,000. Medical students and residents have
indicated that incentives can attract them to new regions, communities or hospitals that differ from those in which they have trained. The 2007 National Physician Survey reported that among family medicine residents anticipating debt upon completion of their residency, 46 per cent said they would practice where they are offered a financial incentive.\textsuperscript{xxv}