

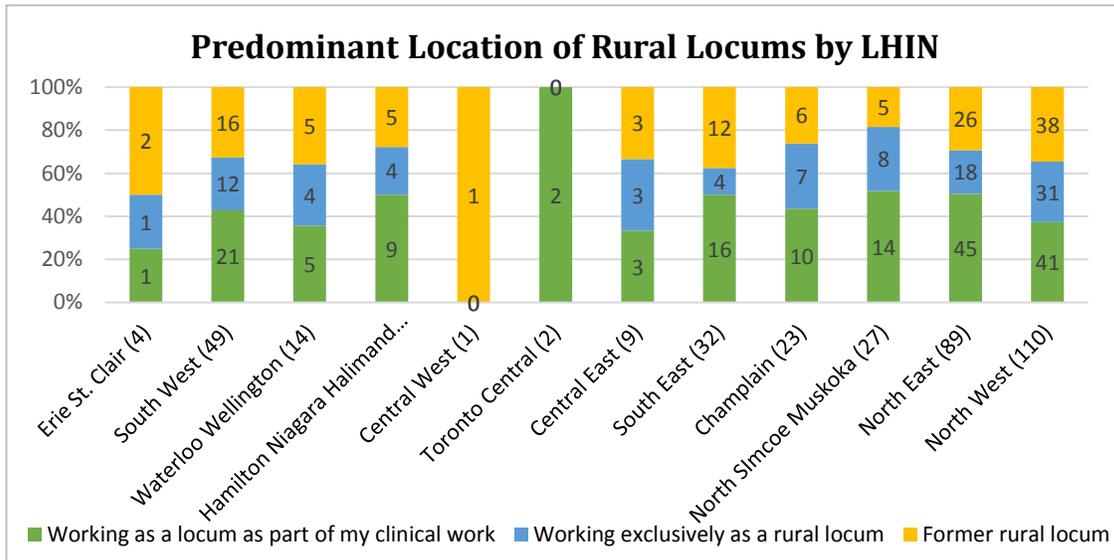
OCFP Rural Locum Needs Assessment – Snapshot

The OCFP distributed the Needs Assessment to approximately **14,000 family physicians** in Ontario in February 2018 and held **10 key informant interviews** in February and March 2018. The **601 survey respondents** included current and former locums, those interested in working as locums, and rural physicians.

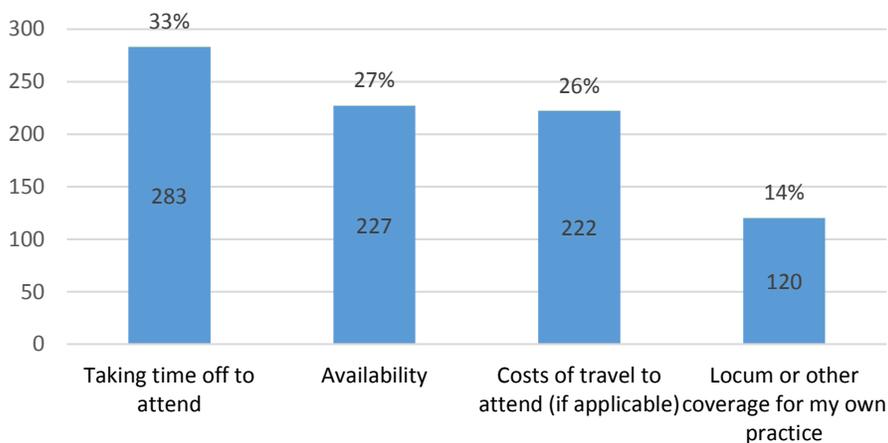
62% of **former locum** respondents were female, 38% male.

Of those interested in working as locums, 61% were female, 39% male.

Most former and current locums were in the role for **five years or less**.



Barriers to Attending CPD



Reasons rural locums stopped

- 1) "Family reasons" topped the list of reasons why former locums stopped locum work.
- 2) Settling in the rural community was another common reason ... then there were the **challenges of the work and setting**:
- 3) Providing emergency services with limited support and resources;
- 4) Residing in rural and remote communities;
- 5) Lack of support and resources for emergency and family practice services

The most pressing **EMERGING ISSUES** for rural locums and rural medicine were identified as **aging population**; more complex patients need greater and complex care; **decrease in rural physicians**, generalists and other health-care professionals; and budget/**funding constraints**.

The top three suggested solutions were:

- Improved Telehealth/OTN/E-consults/technology
- Access to specialists
- Greater financial incentives for rural health professionals



Ideas for resources and **supports** for **improving confidence** in delivering rural emergency services include:

- ❖ Traditional continuing professional development tailored for rural emergency physicians/locums
- ❖ Pairing locums with experienced local physicians in the rural community
- ❖ Real-time telephone or online support
- ❖ Co-deployment of locums – two locums to the same community
- ❖ One-on-one mentorship program with more experienced locums/rural physicians