

Nagging worries about rural primary health care

By **Jim Eadie**

There is a noticeable increase in the nervousness and frustration expressed by smaller municipalities to the flagging negotiations between the province's doctors and the Ontario Ministry of Health since last year at this time.

Unable to negotiate an arrangement with the doctors, the provincial government has taken to imposing cutbacks to physicians' services, and additionally restricting the admission of new doctors to family health teams, as well as halting the formation of any new family health teams (FHT).

Family health teams were originally paraded as the province's new concept in delivering primary health care, which put doctors, nurses and social workers all within the same office, and included a doctor reimbursement model that encouraged more time spent with patients who needed it, particularly those with chronic or serious medical conditions.

"I believe the province is knowingly under-funding the health-care system," said Libby Clarke, chairperson of the Central Hastings Family Health Team and councillor for the Township of Tudor and Cashel.

"The physicians are concerned about an almost seven per cent unilateral cut since February to physician services expenditures covering all the care that doctors provide to patients."

Clarke and her council have a deeper worry closer to home as well.

They have a very novel and appreciated nurse practitioner medical clinic conducted one day a week in Gilmour, under the umbrella of the Central Hastings FHT, in a clinic space provided by the municipality. A nurse practitioner practices under a physician within the FHT, and is part of the integral concept of delivering primary health care to rural areas designated as "high needs."

"We are concerned about our little clinic here, I don't know if it will be at risk. My township and I all want this family health clinic to stay here.

"I am worried about the way the province is restricting new doctors going into FHTs. Last year we had a doctor resign from our team, and it was total chaos for a while, trying to find a new doctor. Higher population areas are where doctors go - rural physicians are a long way from resources and have to travel long distances."

Clarke notes that the median age in the Township of Tudor and Cashel is 51, highlighting that rural medical care delivery systems also struggle with increasing and aging populations, requiring increased services.

"The province wanted these FHTs, and they are a good thing, but now they have discovered it costs a bit more money than they thought," said Clarke.

"I don't think most people are aware of this problem - but the FHT is my main concern here."

On Nov. 11, her council passed a resolution calling on the province to reverse its new policy restricting the number of family physicians who can join family health networks, and supporting the Ontario Medical Association's call to ensure a fully funded health-care system that accounts for the demand for care of an aging and growing population.

Tudor and Cashel is not alone in its thinking.

In May 2015, the County of Hastings expressed the same concerns to the province in a lengthy and detailed memorandum to the province of Ontario. In particular the County focused on the potential negative impact on their Family Physician Recruitment Program.

On Dec 7, The Township of Madawaska also passed a resolution calling for many of the same measures.

The Barry's Bay Saint Francis Memorial Hospital is used by residents of Hastings Highlands, and the hospital is financially supported by the Municipality of Hastings Highlands.

"The whole community here is affected by these new policies of the province," said Craig Kelly, municipal CAO, "especially the hospital. Very soon we will have a number of physicians retiring, and new physician recruitment to this area is tough - really tough."

Other North Hastings municipal councils including Wollaston have passed resolutions in support of the Tudor and Cashel resolution, and the Township of Madawaska resolution.

Physician payment for services is a very complicated maze. In addition to physicians practising under a FHT, there are two family practices in Hastings County with a salaried model, as well as a number of independent physicians who work on a fee for service basis.

The latter two models require the new physician to consider the costs associated with starting up a new practice.