Address Alberta’s Rural Physician Shortage

**Issue**
Alberta continues to face a chronic shortage of physicians, specifically in the rural areas of the province. Having access to family physicians is a basic need of any Albertan and a driving factor in the ability of a community to attract business. Although some gains have been made, factors such as pending physician retirement, aging populations, and timeworn infrastructure may nullify these gains. To ensure that all Albertans have timely and meaningful access to health care, action is needed to improve the distribution and availability of medical practitioners within the province.

**Background**
As of December 2011, 8,045 physicians were fully registered on the in-province registers in Alberta. Of these physicians, 2147 (19 per cent) are practising outside of Edmonton and Calgary. Using these figures and census data from the 2011 provincial census, there are 591 individuals per physician in rural Alberta and 212 individuals per doctor in urban Alberta.

In 2011, Alberta experienced a net increase of 332 physicians. At 10-per-cent attrition per year and without population growth, Alberta needs over 500 physicians annually. The ability of rural residents to access health care is further exacerbated by the greater distance needed to travel to access services and specialists, who are typically located in urban zones. Access to adequate health care among the growing Aboriginal population residing in non-metropolitan-influenced zones of the province is of particular concern.

Geographic isolation and problems with access to and shortage of providers and services are multidimensional problems. For instance, poor road quality, combined with greater periods spent on the road, not only contributes directly to higher incidence of injury, but also compromise access to health care.

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5. Rural Alberta Profile- A Fifteen-year census analysis
services. Moreover, difficult economic circumstances, travelling time to the city, and the lack of car
ownership can affect access to and demand for health services. 

Impacting economic development
Studies show that rural physicians’ economic contributions can be as important to a community as their
medical contributions. With the growing physician shortage, rural communities are at risk of losing much
more than the opportunity to receive local medical care.

Physician shortages negatively impact the business community’s ability to recruit and retain employees;
people want and need accessible health care for their families. In addition, employers in underserviced
areas report lost productivity and increased absenteeism because employees need to invest their time,
and by default their employer’s time, accessing medical services for themselves and their families
through hospital emergency departments, walk-in clinics and out-of-town health facilities.

The increased costs of staff recruitment and lower productivity due to inadequate access to medical
care can be a significant factor in location decisions for business. This may influence companies to locate
in other areas, resulting in negative economic effects for Alberta and Canada that will impact our
competitive advantage in the world economy.

The province also faces increased costs to transport rural patients to health facilities in urban centres
when basic care is not available in the rural hospital. Relocating rural patients to urban centres
ultimately results in fewer available beds for residents of these large centres.

Recruitment and retention challenges
Recruitment efforts in rural and northern areas face significant challenges due to:

- An inadequate supply of graduates trained in Alberta and Canada.
- High costs of recruitment and retention.
- Unwillingness of graduates to undertake a rural practice – the 70/70 rule referred to by
  researchers states that 70 per cent of graduates tend to stay within 70 miles of where they were
  trained.
- Difficulties of recruitment due to diverse and demanding practices. Rural physicians typically
  carry a greater practice burden than their urban colleagues. They have greater population-to-
  physician ratios, broader scopes of practice, and less support than a typical urban practice.
- Aging infrastructure. Thirty-three per cent of health facilities and equipment in Alberta were
  rated as fair or poor physical condition in 2008. With many of Alberta’s infrastructure assets
  entering the last one-third of their life expectancy, many will require major renovations, repair
  or replacement. 

Traditionally, recruiting doctors from other nations solved rural physician shortages in Canada. Currently
in Alberta, there are 2,523 physicians who were trained outside of Canada. This represents 31 per cent

6 How Healthy Are Rural Canadians: An Assessment Of Their Health Status And Health Determinants
http://www.phac-aspc.gc.ca/publicat/rural06
7 Alberta’s 20-year Strategic Capital Plan to Address Alberta’s Infrastructure Needs
www.infrastructure.alberta.ca/6.htm
8 College of Physicians and Surgeons of Alberta, Quarterly report, October 2011-December 2011
www.cpsa.ab.ca/Services/Registration_Department/Physician_Resource_Statistics.aspx
of Alberta’s doctors. However, for a privileged nation to recruit doctors from developing countries only serves to worsen the shortage of skilled health-care workers in those countries, and raises ethical questions. The existing and proposed solutions to physician shortages in Alberta are a step in the right direction, but insufficient to meet the needs of the province, particularly in rural Alberta. Simply adding new seats to the current programs without other changes will not address the problem.

**Rural physician training in rural areas – a proven model**
Research, including that of the Canadian Medical Association, and experience in other provinces, such as Ontario and British Columbia, indicates that medical education in rural areas is an effective model for addressing the rural physician shortage. Programs such as those developed by the Alberta Rural Physician Action Plan, are not only alleviating the overall shortage of family physicians in their provinces, but are targeting both the physician needs and community needs in rural areas.

**The Alberta Chambers of Commerce recommends that the Government of Alberta:**

1. Direct the departments of Enterprise and Advanced Education and Health to continue to address the shortage of family physicians, especially in rural regions, by enhancing the present medical training structure and introducing a new model. This new training model will:
   a. Collaborate with a present accredited medical training university.
   b. Focus on the training of family physicians.
   c. Be delivered in rural Alberta.

2. Ensure health infrastructure adequately supports the training and retention of physicians in rural Alberta communities.