

HUMAN RESOURCES FOR HEALTH PLANNING AND POST-GRADUATE MEDICAL EDUCATION

Physician human resources planning is not done in isolation. Depending upon the province, it may involve the College of Physician and Surgeons, the Ministries of Health and Education, the Faculty of Medicine, the Medical Society, the Association of Medical Residents and representatives from the Regional Health Authorities. While the Ministry of Education is responsible for undergraduate medical education, with input from the Ministry of Health on needs, the Ministry of Health, because it pays residents salaries directly for providing services in health care institutions as part of their training, negotiates the resident numbers (often annually) with the Faculty of Medicine. Ministries of Health have the capacity to dictate to some degree the number of first year residency training positions in relation to their perception of provincial specialty service needs.

While the planning of residency posts is more of an art than a science, a lot of technical questions are considered during this process. The final answers, however, are not only dependent upon estimates of need, but also upon available funds and resources, system capacity for planning and management and overall political constraints and priorities. Part of the art of this planning process is balancing short-term system demands with emerging long-term population needs.

The following questions are often asked as part of this technical review process.

MEDICAL SPECIALIST HEALTH WORKFORCE

What is the total number of specialists in the province by speciality?

What is their home address? Where is the location of their place of work?

What is their age and sex? What is their citizenship?

What is their employment status? Full-time, Part-Time, Locum, Temporary Visa, Temporary Licence?

How many hours do they work? How many patients do they see? What is their clinical Full-Time Equivalent?

How much time do they spend on research, administration and teaching?

What are their qualifications? Royal College certified? Uncertified generalists working in specialty areas? Restricted licenses?

Where did they receive their undergraduate medical training?

Where did they do their internship or residency training?

What is the current and expected future (retirees, attrition, migration) vacancies by specialist position, by Health Region?

POPULATION HEALTH

What is the total population of the province by age and sex?
What is it expected to be over the next ten to twenty years?
What is the incidence of morbidity and mortality across the province by age and sex?
What has been the pattern of historical utilization of specialist health services of the population by age and sex over the past decade?
What are the top ten diseases and health conditions over that period?
How is the pattern expected to change over the next decade in light of the aging population?
How equitably is the distribution of specialist services throughout the province?
Is there evidence of likely undiagnosed or unmet demand for specialist services in more rural, remote or ethnically diverse communities?
In relation to established treatment protocols, and utilization patterns in other provinces by region, age and sex, is there evidence of practitioner and patient-induced demand leading to an overutilization of specialist services?
What impact will select socio-economic indicators (income, education) and lifestyle factors (smoking, diet, alcohol consumption) likely have on the future demand for specialist services?

HEALTH CARE DELIVERY

What is the Clinical Services Plan for the province?
What are the medical service priority areas where service expansion is expected or required?
Which Regions and Districts of the province have the capacity, i.e. diagnostic, therapeutic and operational services technology to support the provision of specialist medical services?
Which Regions and Districts will offer which specialist diagnostic, therapeutic and operational services?
What is the number of approved and funded specialist positions in the Health Regions and institutions throughout the province?
What is considered an appropriate critical mass of specialists required in the Region to ensure continuity of optimum care?
Has the current specialist staffing complement had the capacity to keep pace with the demand for specialist services?
Have there been budget overruns in this regard?
Have patients had to be transported to other facilities for treatment or services normally provided within that Region or health care institution?
What percent of these services have been on an emergency, priority or elective basis?

TRAINING PROGRAMS

What is the current training capacity of the program, given current resources, faculty and physical space?
What is the minimum critical mass of the program, the minimum number of residents that could be in the program and it still be viable?

Is the program new? Is it sustainable for the longer term?
What proportion of the residents will be returning to their home country when their training is completed?
What are all of the funding sources for the program?
Is the program accredited or able to be accredited? Do we have the capacity and appropriate technology to provide the resident with the appropriate clinical rotation?
What would be the cost and capacity requirements (faculty, space, etc.) to increase the size of the program?
Is there a recognized Centre of Excellence elsewhere in the country with the capacity to train local residents at higher quality and reduced costs?
Could current residents in those programs be recruited to come to the province in need?
Would strengthening the residency program within the province broaden the service capacity in that specialty?
Would strengthening the program attract additional research dollars or foreign students to help sustain the program without disadvantaging local students who wish to enter the program?
If resources have to be taken from existing medical specialty training programs to support the expansion of this one, which ones would they be?

POLITICAL CONTEXT

What are the current patient wait times by Region by specialty service?
Which specialty service areas have the longest wait times in relation to accepted provincial and professional standards?
Which specialty service areas have experienced the highest degree of patient dissatisfaction?
What are the targets that have been set in other provinces, regions and at the national level by both governments and the medical profession regarding the ratio of specialist to population, specialists to family medicine practitioners and sub-specialties to general specialists?
What targets have been set at those levels regarding the ratio of the number of residency positions to the total number of specialists practising in the province, and to the population as a whole?
Which Health Regions are the highest priorities with respect to ensuring an equitable distribution and access to specialist services?
What fiscal and program trade-offs are necessarily to address these specialist service priorities?

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