

Reviewer's report

Title: Overcoming physician shortages in northern Ontario: A study on policy implementation over 35 years

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Reviewer: Jack William

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HRH review 1733002673169381 Williams

Overcoming physician shortages in northern Ontario: a study on policy implementation over 35 years

Raymond Pong

Accessible and universal health services are key principles in the organization and delivery of health care. The geographical distribution of physicians in metropolitan, rural and remote areas is a key issue in addressing these principles. While the geographical distribution of senior health professionals is critical to the health care system, the professional dominance of the medical profession in health systems dictates that the distribution of doctors is of the first order of importance for addressing the principles.

Under the Canada Health Act of 1984, most services are provided under publicly financed and managed health care systems and physicians cannot bill privately for the care they provide as a part of publicly funded care; Canada has a one tier system for most medical services. The Ontario government is in constant negotiations and discussions with organized medicine about coverage for services, payments for services, organization of services - particularly for primary care, and the geographical distribution of physicians. Dr Pong has done a superb job of summarizing the programs and policies of Ontario directed toward the distribution of physicians and coverage for services in rural and remote areas of the province, particularly northern Ontario.

Pong covers 42 programs introduced over 35 years and summarized the policy instruments employed. A few of them were discontinued. Obviously there were some simultaneous uses of strategies in any given year. As Pong notes, all programs and strategies are treated equally, even though they vary in complexity and importance. He excluded programs and strategies that were not focused primarily on Northern Ontario, federally funded programs, and programs by non-governmental agencies.

Minor Essential Revisions

There are three questions that could be addressed briefly in the paper.

1. Over the past 35 years or so, has the numbers of physicians in northern

Ontario increased and has the geographical their distribution changed?

2. Are there particular policies and strategies that have either contributed substantially to the numbers or the redistribution of physicians? For example has the establishment of the Northern Ontario School Medicine had an impact on the recruitment or retention of physicians?

3. What role has organized medicine played in the formulation and implementation of the policies and strategies? Through the Rand formulation of the 1991 agreement between the Ontario Medical Association and the government of Ontario, all physicians must be members of and pay dues to the OMA. Hence the OMA has to mediate the conflicting interests of various interest groups within its membership when negotiating with the Ministry of Health and Long Term Care. Has this made a difference in how the issues of physician resources are addressed in the north?

Discretionary Revision

There is one additional observation, but I am not sure of its relevance to the issues at hand. About 22 percent of the physicians in Ontario are foreign medical graduates, and this percentage has remained relatively stable over the years. The current Ontario government is working to increase the licensing of foreign medical graduates, and in recent years the numbers of foreign medical graduates being licensed to practice in Ontario has been larger than the licenses granted to graduates of Ontario medical schools. Further, some provinces bring in provisionally licensed international medical graduates to address shortages of physicians in their communities while Ontario is much less likely to do so. Foreign medical graduates living in Ontario and Canada are seeking licensure to practice, but the governments and medical organizations are slow to respond. Should the licensing of foreign medical graduates be directed to solving problems in the distribution of physicians?

Declaration of competing interests

I declare that I have no competing interests.

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.