



# Health Human Resource Challenges in North Simcoe Muskoka

Michelle Hunter, MSc

Rural Ontario Medical Program



# HHR in NSM LHIN: The Basics

---

- **Why** is this an issue?
- **Who** do we need?
- **Where** do we need them?
- **What** do we need them for?
- **When** do we need them?
- **How** will we get there?



Without appropriate healthcare human resources (HHR), the North Simcoe Muskoka region cannot provide the services and level of care required by the system. Developing a comprehensive Human Resources Plan is needed to continue health professional development.

Current human resource planning facilitated by individual organizations and agencies strives to promote themselves as 'employers of choice'. This often makes the impact of scarce resources even greater in such a competitive environment.

Individual organizations need to continue to improve working environments and recognize the needs of employees. Collaborative approaches are more likely to provide long-term system wide solutions.



## Why? Fast Facts: NSM LHIN HHR 2007

### Population of 417, 586



Total Vacancies for Health Professionals in NSM LHIN 2007: **446**



Total Vacancies for Health Professionals in NSM LHIN 2006: **352**



The **94** additional vacancies from the 2006 Report represents a **21%** increase in overall vacancies for Health Professionals in the NSM LHIN in 2007.



Total Current Staffing for Health Professionals in NSM LHIN 2007: **7,634**



Rural Ontario  
Medical Program

*Rural Ontario Medical Program*

Discover what the  
Rural Ontario Medical Program  
can do for you!

**Who do we need?**



## Top Four Needs for Nursing in the NSM LHIN:

<b>Nursing:</b>	<b>Vacancies:</b>
1) RN Part Time	<b>91</b>
2) RN Full Time	<b>86</b>
3) Registered Practical Nurse	<b>50</b>
4) RN Casual	<b>28</b>



## Top Four Needs for Health Professionals in the NSM LHIN:

Health Care Professional:	Vacancies:
1) HCA/PSW PTE	<b>88</b>
2) Pharmacy	<b>8</b>
3) Social Worker	<b>6</b>
4) Physiotherapist/Recreational Therapist/Registered Dietician/Speech Language Pathologist	<b>3</b>



## Top Four Needs for Health Professionals in the NSM LHIN:

Physicians:	Vacancies:
Family Physicians	40
Specialists	45
**661 physicians practice in the LHIN 385 Family & 265 Specialty physicians	85



## Physician Family and Specialty Vacancies:

Community	Designation	Number of Family Physicians Needed	Number of Specialist Needed
Barrie (including Elmvale/ Springwater)	UAP with Support	18	Cardiology (2), Dermatology (1), Diagnostic Radiology (1), Emergency Medicine GP/FRCP (1), Endocrinology (1), Geriatrics/ Gerontology (1), Infectious Disease (1), Internal Medicine (2), Neurology (1), Oncology – Medical (2), Paediatrics (2), Physiatry (1), Physical Medicine/Rehab (1), Plastic Surgery (1), Psychiatry (1), Respiratory Medicine (1)
Bracebridge/ Gravenhurst	UAP with Support	4	Anaesthesia (1), Diagnostic Radiology (1), Emergency Medicine GP/FRCP (1), General Surgery (1)
Collingwood (including Stayner & Creemore)	Non UAP or in Process	1	Emergency Medicine GP/FRCP (2), Internal Medicine (1)
Huntsville	Non UAP or in Process		General Surgery (1)
Midland/ Penetanguishene	UAP with Support	4	Emergency Medicine GP/FRCP (1), Psychiatry (4)
Orillia	UAP with Support	8	Diagnostic Radiology (2), Internal Medicine (1), Internal Medicine (1), Pathology (1), Psychiatry (3)



*Rural Ontario  
Medical Program*

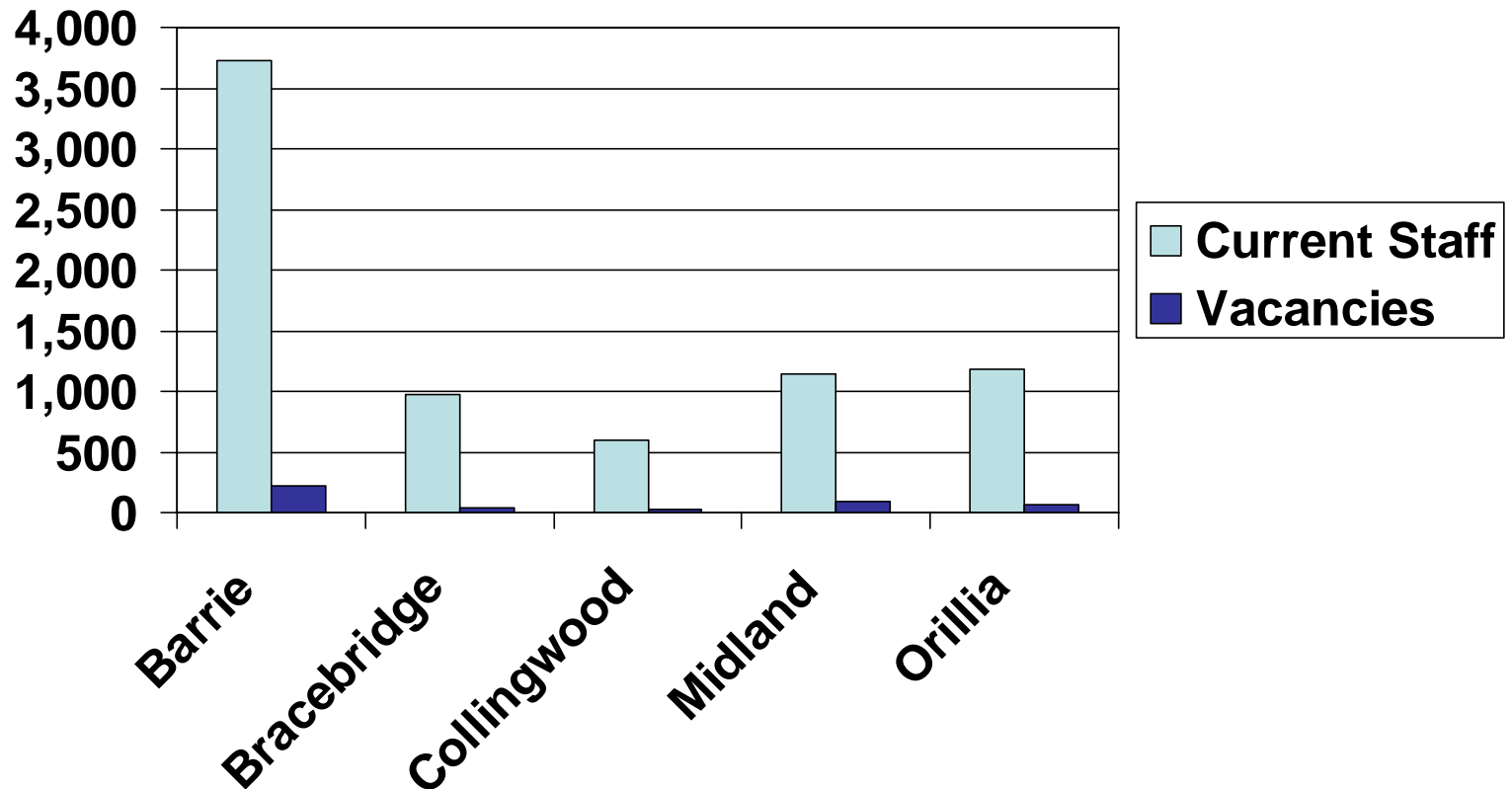
*Rural Ontario Medical Program*

*Discover what the  
Rural Ontario Medical Program  
can do for you!*

**Where do we need them?  
Which community?**



## Current Staffing & Vacancies by Community:





## Current Staffing and Vacancies by Community:

Community:	Current Staff:	Vacancies:	
Barrie:	<b>3,732</b>	<b>224</b>	<b>6%</b>
Bracebridge/ Huntsville/ Gravenhurst	<b>974</b>	<b>38</b>	<b>4%</b>
Collingwood & Area	<b>595</b>	<b>25</b>	<b>4%</b>
Midland/ Penetanguishene	<b>1,147</b>	<b>96</b>	<b><u>8%</u></b>
Orillia	<b>1,186</b>	<b>63</b>	<b>5%</b>



## Community Vacancies and Current Staffing:

Health Human Resources are the largest employment sector in the NSM LHIN employing an estimated 7600 within its borders

The major HHR needs are difficult to compare between communities, due to population and service delivery discrepancies.

The greatest need across all communities is within the nursing specialty.

The Barrie community clearly has the greatest number of vacancies for Nursing and Health Professionals with 224.

The Barrie employs over half of the professionals with current Health Professionals and Nursing, totally 3,732.



*Rural Ontario  
Medical Program*

*Discover what the  
Rural Ontario Medical Program  
can do for you!*

*Rural Ontario Medical Program*

**What do we need them for?  
Which type of care?**



## Vacancies by Type of Care:



The need for FT, PT and Casual RNs are consistent across the spectrum of health services offered in the North Simcoe Muskoka LHIN.



There is also a large need for Surgical/Medical RNs.



LTC vacancies are focused particularly on FT, PT, Casual RNs and RPN's LTC due to the fact that their RNs are performing multiple roles within LTC facilities.

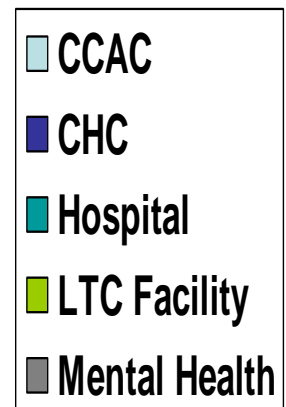
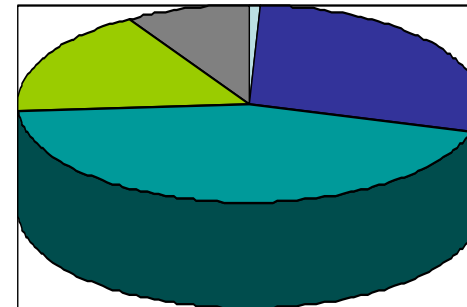


In total there are 198 hospital-based vacancies, 38 mental health organization vacancies, 79 LTC facility based vacancies, 127 community based vacancies and 4 CCAC vacancies.



## Vacancies by Type of Care:

Type of Care:	Vacancies:
CCACs (Community Care Access Centre):	<b>4</b>
CHCs (Community Health Centre)	<b>127</b>
Hospitals	<b>198</b>
Long Term Care (LTC) Facilities	<b>79</b>
Mental Health	<b>38</b>





*Rural Ontario  
Medical Program*

*Rural Ontario Medical Program*

*Discover what the  
Rural Ontario Medical Program  
can do for you!*

**When do we need them for?  
Which year will it be critical?**



## When = Now!

2006 Total vacancies = 352

- 73 Health Professionals
- 279 Nursing

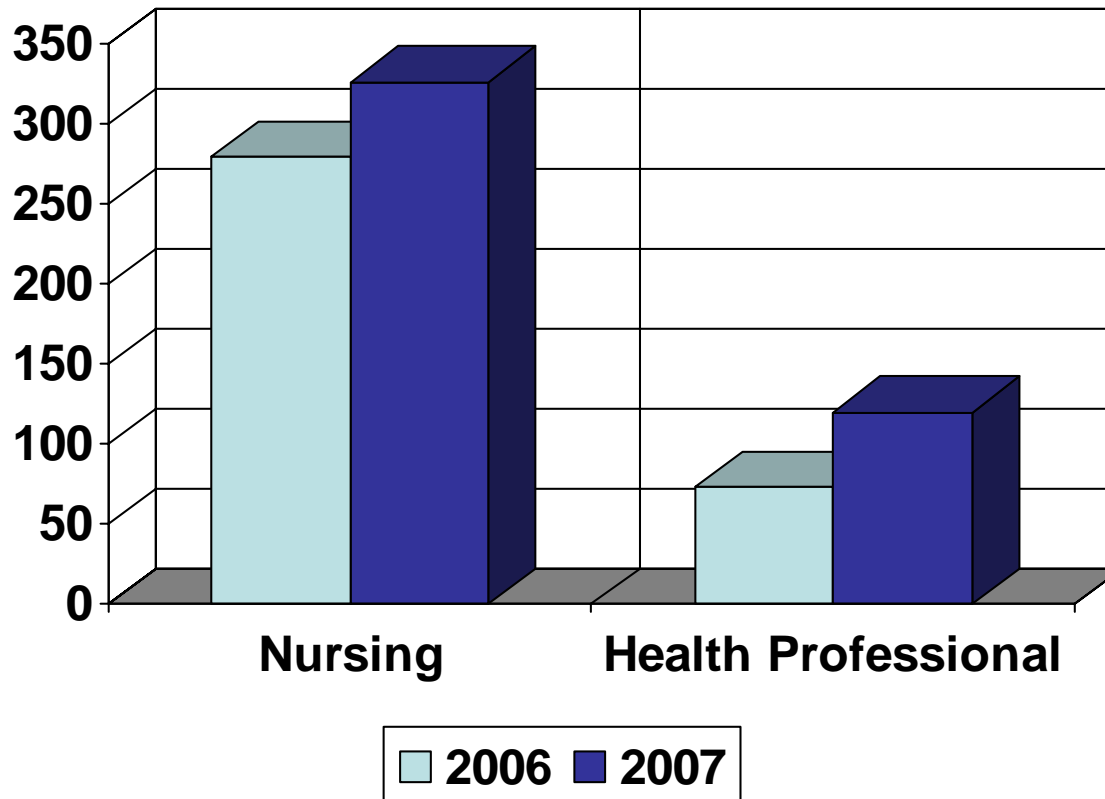
2007 Total Vacancies = 446

- 120 Health Care professionals
- 326 Nursing

\*\*Note an additional 12 TPAs in the April 2007 Report

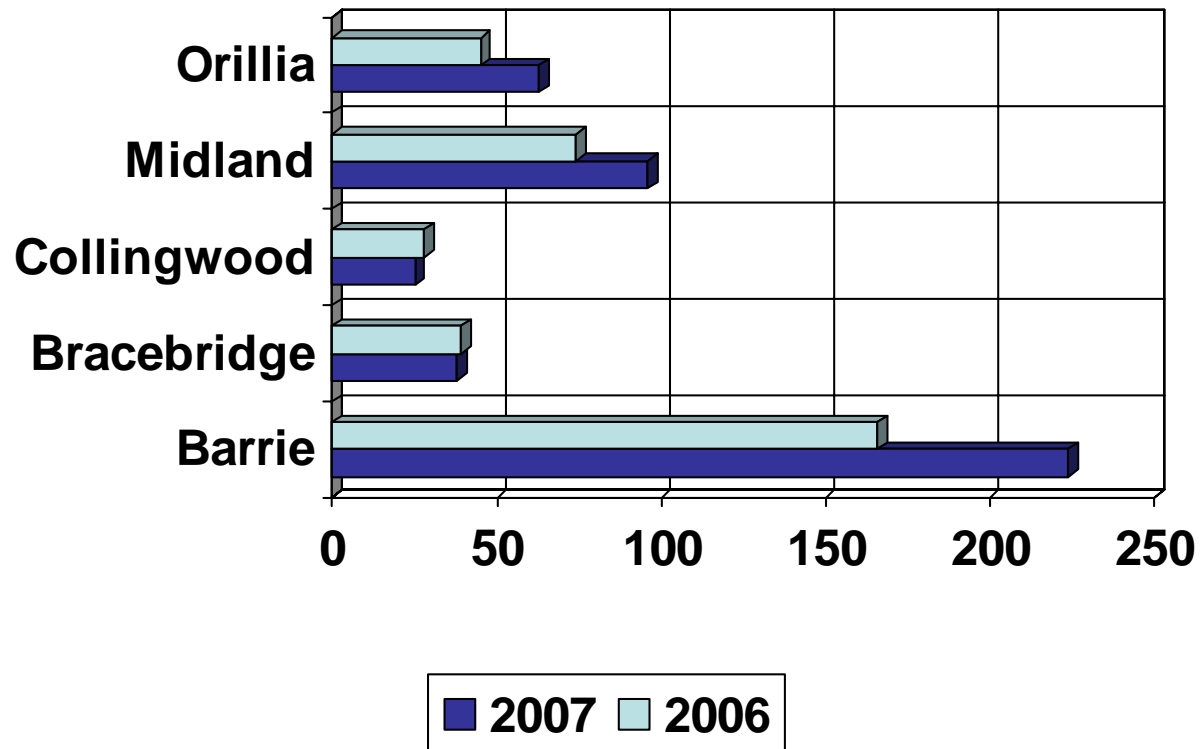


## 2006 vs. 2007 Vacancies: Nursing vs. Health Professionals





## 2006 vs. 2007 Vacancies: By Community Comparison





*Rural Ontario  
Medical Program*

*Discover what the  
Rural Ontario Medical Program  
can do for you!*

*Rural Ontario Medical Program*

**How can we find them?**



# Overcoming the challenges

---

- Health Human Resources is the largest employment sector in the North Simcoe Muskoka LHIN
  - Is there economic recognition of health care as the largest employment sector?
  - Do municipal and business development agencies and associations recognize and support this sector?
  - What training agencies/schools support this sector?
  - Importance of HHR data collection and planning?
  - **Are you doing HHR projections for your agency?**
- Hospitals and LTC facilities have the most need
- Greatest overall needs are in Nursing and PSW & HSW
- Population changes in growth and aging require an increase in
  - Overall quantity required
  - Seasonal care
  - Complex care
  - Rural, Aboriginal and Francophone considerations
  - **What are the projections for your community/agency?**



# Retention

---

- All in all, there is a lot more governments can do to support retention efforts. For instance, agreements between government and the medical professional could include incentives to keep older physicians in the workforce longer. Current efforts are mostly aimed at increasing physician supply and recruitment. But for most communities, their best chance of having a doctor tomorrow is to keep the one they have today.

(Physician Retirement in Canada: What is known and what needs to be done. Pong, Lemire & Tepper, 2007)



# Retention Plan

---

- Who has a concrete retention plan?
  - Formal with objectives
  - Clear vision with definitions
- Why a retention plan?

Improved retention has proven to decrease turnover while increasing morale and efficiency, which can significantly improve the quality and continuity of patient care.



# Predicting who will leave?

---

Who are the most vulnerable groups?

- Early careerists

“47% of all physicians leaving did so within the first three years and 60% who left did so within the first five years.” (American Medical Group Association (AMGA) and Cejka Search, Physician Retention Survey, 2006)

- Late careerists

“Although there is a lot of talk about possible shortages of physicians in Canada, not much has been done to date to encourage older physicians to remain in practice.” (Pong, Lemire, Tepper, 2007)



# Early Careerists:

## Primary Reasons for Voluntary Separations

---

- Practice Issues-44%
- Compensation-27%
- Location-25%
- Spouse-4%

What do your exit surveys say?



# Late Careerists: What happens?

---

- Increased Retirement
- Reduction in Workload
- Scope of Practice changes
  
- So what can we do?
  - Retain more older clinicians
  - Older providers who continue to practice remain clinically competent



# Overcoming the challenges

---

- Retention - Providers are changing
  - #1 for HHR strategies is “to keep”
  - Establish a healthcare culture that values people at the local “primary” level
  - Early careerists = increased flexibility and part time hours
  - Late careerists = changes in scope and style of practice
  - Retirements
  - Practitioners based in the community, not working in TPAs – **How can we collaborate/utilize them?**
  - Empower providers with opportunities for career enhancement
  - **What is your retention rate? What are your projections?**



# Overcoming the challenges

---

- Education
  - Education of current employees (Retention!)
    - Specialized & updated skills/technology for aging Healthcare workforce
    - Specialized skills required for the aging; chronic disease management
  - Greatest pool of candidates comes from the education system
  - List of training/clinical opportunities within the LHIN for Health Care professionals and match it with the vacancies list
  - Where are the education sites for our most needed professionals in the LHIN and region
    - Nursing? PSW?
    - What other professionals will we require to train in the region? New education programs available?
    - International students and practitioners – are we set up to accommodate when opportunities present
  - Can you match your needs with where local or regional training occurs for that program? Do you offer clinical placements?



# Overcoming the challenges

---

- New Models of Care – MOHLTC
  - FHT's (Family Health Teams) were not operational at the time of this report
  - Needs in HHR will increase with FHT
  - Team based = increased efficiency in use of all HHR at primary care level
  - #1 Contributor to population health = Primary Care
- New Models of Recruitment and Retention
  - Healthforce Ontario
  - New Health Professionals Network
  - International/National recruitment
- Employer/Union/Regulatory bodies; policy and procedure
  - Importance of LHIN work for HHR data collection and projections
  - Restrictions placed by unions on releasing information for collection of LHIN HHR vacancies and current staffing encountered by ROMP
  - Collaboration with regulatory bodies for comprehension of scope of practice for increased efficiency in the deployment of HHR



# Overcoming the challenges

- Community Gaps and Provider ratios
  - Identify and work with communities that have significant growth in vacancy gap ie significant changes in North Simcoe
  - Formulas for the number of healthcare professionals employed/required per physician/client in a community could be constructed
- HHR Administration
  - Information collected is not complete resulting from organizations not having administrative support and staff resources to provide information regarding their Health Human Resources inventory and plans
  - LHIN wide education on HHR data collection and importance of the data



# Recommendations: Getting Started

- HHR Framework – developing a road map
  - current health care professionals
  - needed and future HHR
  - What are your current needs?
  - Have you defined your projected needs in HR?
  - How can we help you define those needs?
- Retention is single largest factor in health human resources planning
  - Establishment of performance indicators to measure retention
  - What is being done for retention?
  - Early and Late Careerists are critical
- Best practices & Collaboration
  - Knowledge Transfer = Sharing Best practices
  - Share best practices in the region for HHR planning and resourcing
  - LHIN open house on Resourcing - What is working well?
  - Research and share to identify existing integrated Human Resources strategies locally, provincially and nationally



# Special Thanks

---

- NSM LHIN communities and agencies for their cooperation in completion of surveys and information provided for the study
- ROMP team, Matthew Kirkham and Ashley Colter for data collection
- Vic Sahai and the NSM LHIN team for their collaboration
- Looking forward to continued successful partnerships!



# Questions/Comments?

Michelle Hunter

Rural Ontario Medical Program

459 Hume St.

Collingwood, ON L9Y 1W9

705.445.7667

[romp@romponline.com](mailto:romp@romponline.com)



## Total Current Staffing & Vacancies NSM LHIN:

Organization	Total Staff - FTE	Current Number of Positions	Number of Vacancies
Alzheimer Society of Greater Simcoe County	1	1	0
Alzheimer Society of Muskoka	N/A	N/A	N/A
Alzheimer Society of North East Simcoe County	N/A	N/A	N/A
Barrie Area Native Advisory Circle	N/A	N/A	N/A
Barrie Community Health Centre	21	21	0
BayHaven Nursing Home	89	64	5
Bayshore Home Health	161	161	0
Beechwood Private Hospital	8	6	2
Brain Injury Service of Simcoe County	N/A	N/A	N/A
Breaking Down Barriers	N/A	N/A	N/A
Canadian Mental Health Association, Barrie-Simcoe Branch	29	29	0
Canadian Red Cross - Muskoka District Branch	76	76	5
Canadian Red Cross - Simcoe County Branch	264	234	30
Caregivers Muskoka Parry Sound	N/A	N/A	N/A
CCAC Muskoka East Parry Sound	See MAHC	See MAHC	See MAHC
CCAC Simcoe County	135	131	4
Chippewas of Mnjikaning	43	43	0
CNIB - Simcoe	N/A	N/A	N/A
Coleman Care Centre			
Collingwood General and Marine Hospital	434.2	418.2	16
Collingwood Nursing Home	48	48	0
Community Mental Health Services Collingwood	15	15	0
Community Mental Health Services, Orillia Soldiers Memorial Hospital			8
Fairview Nursing Home	64	64	6
Georgian Manor			
Grove Park Home For Senior Citizens	116.4	116.4	0
Helping Hands Orillia	46	45	1
Hillcrest Village Care Centre	89	72	17
Huntsville Centennial Seniors Centre	N/A	N/A	N/A
Huntsville District Memorial Hospital (including South Haven - chronic unit)	343	337	6
Huron District Hospital	397	363	34
Huron Transition Homes	N/A	N/A	N/A
I. O. O. F. Senior Citizen Home	163	161	2



# Rural Ontario Medical Program

www.romponline.com

Leacock Care Centre	129	126	3
Leisureworld Caregiving Centre, Creemore	24	21	3
Leisureworld Caregiving Centre, Barrie	34	30	4
Leisureworld Caregiving Centre, Muskoka	115	98	17
Mental Health & Addiction Services, Royal Victoria Hospital of Barrie	43	39	4
Mental Health Centre Penetanguishene (including Oak Ridges)	516.4	488.4	28
Mental Health Consumer Survivor Project	N/A	N/A	N/A
Muskoka Algonquin Healthcare (MAHC)	623	614	9
Muskoka Landing			
Muskoka-Parry Sound Community Mental Health Service	12	11	1
Muskoka Seniors Home Assistance	N/A	N/A	N/A
District Hospital)	532	496	46
Oak Terrace	86	77	9
Orillia Soldier's Memorial	943	895	48
Parkview Seniors Centre	2	2	0
Penetanguishene General Hospital	125	113	12
Pines	111	110	1
Roberta Place	122	116	6
Royal Victoria Hospital	1429	1352	77
Saint Elizabeth Health Care	1193	1102	91
Sara Vista Nursing Centre	31	31	0
South Haven Huntsville District Hospital *See Huntsville District Memorial Hospital			
South Muskoka Memorial Hospital	280	277	3
Stayner Nursing Home	38	37	1
Sunset Manor Home for Senior Citizens			
Trillium Manor Home for the Aged			
Villa Care Centre - Nursing Home	82	82	0
Villa Care Retirement Lodge	13	13	0
Wendat Community Psychiatric Support Program	13	10	3
Woods Park Care Centre	126	120	6
Victoria Village	87 (5 contract)	87 (5 contract)	0
N/A = not applicable			

Total Staffing Numbers and Vacancies



## Definitions:

### **Geography:**

**Barrie:** Covers the Barrie area, including Elmvale

**Bracebridge:** Covers Bracebridge, Huntsville and Gravenhurst

**Collingwood:** Covers Collingwood and area, including Wasaga Beach, Stayner and Creemore

**Midland:** Covers Midland and Penetanguishene

**Orillia:** Covers the Orillia area

### **TPAs:**

**CHC:** Community Health Centre – includes Red Cross, Helping Hands and other community based healthcare providers

**CCAC:** Community Care Access Centre

**LTC:** Long Term Care Facilities

