



## Chapter Highlights

### Chapter 1: Family Doctor Resourcing

#### Overall Conclusion:

- Department and NSHA not adequately communicating with Nova Scotians on planned changes to delivery of primary care including resourcing of family doctors
- While primary care planning continues, several government committees continue to make decisions on how to address current family doctor vacancies based on need and consultation with stakeholders
- A doctor recruitment strategy was created in 2017 and recruiters are in place, but objectives and successful outcomes need to be defined and monitored

#### Communication

##### Conclusion:

- Draft communication plans not used
- Ongoing discussions between DHW/NSHA
- Communication essential for managing expectations

##### Examples:

- Three communication plans not implemented
- Not enough useful information on websites

##### Recommendations:

- DHW and NSHA - tell Nova Scotians their plans for primary care
- DHW and NSHA - update websites to have clear information on plans

#### Resource Planning

##### Conclusion:

- Long-term decisions about family doctors based on needs
- Moving toward teams versus single-doctor practices
- Registry does not identify those with serious health conditions
- Forecast shows 512 family doctors needed in next 10 years

##### Examples:

- Teams would have doctors, nurses, other practitioners
- 50 teams in place, 70-78 total planned
- Registry said 37,000 need family doctor in Oct 2017
- Doctors may/may not take patients from registry

##### Recommendations:

- DHW and NSHA - identify and help those in the registry with serious health conditions

#### Recruitment

##### Conclusion:

- NSHA developed a recruitment strategy
- NSHA working to improve performance reporting
- DHW/NSHA both administer incentives

##### Examples:

- NSHA not determined how to measure success
- 55 vacancies as of October 2017
- Two organizations managing incentives

##### Recommendations:

- NSHA - measure and report on recruiting performance
- DHW and NSHA - review incentives administration for efficiencies

### 5 Questions Nova Scotians may want to ask:

1. When and how will the department/the health authority communicate the planned changes to primary care?
2. How do the department/the health authority plan to help those listed in the family practice registry who have serious health conditions find a doctor?
3. When will the process be established?
4. When will the health authority inform Nova Scotians about where they are planning to set up collaborative family practice teams?
5. How many doctors has the health authority recruited since the 2017 recruitment strategy was developed?