



## RURAL CAUCUS

March 7<sup>th</sup>, 2023

Hon. Jean-Yves Duclos  
Minister of Health  
House of Commons  
Ottawa, ON K1A 0A6

### **Subject: Improving access to health care in rural and remote Canada**

Dear Minister,

The Rural Caucus thanks you for the opportunity to raise awareness about health care priorities for people living in rural and remote communities.

Canadians living in rural and remote communities have long had challenges obtaining equitable access to health care services. Regional services are often limited, with fewer physicians and other health care professionals living and working in rural communities. Negotiating bilateral health care agreements with provinces and territories provides a unique opportunity to ensure that, in accordance with your mandate letter, your work “give[s] rural communities greater access to a full suite of health and social services professionals”.

In support of your negotiation, members of the Rural Caucus recommend that the agreements: (1) require that the provinces and territories, in their action plan, provide their specific spending plan for the health care needs of rural and remote communities; and (2) grant the parties the ability to monitor the data reported to ensure improved access to quality health care services in rural and remote communities.

Rural Caucus consulted members of the Society of Rural Physicians of Canada, the “national voice of Canadian rural physicians”. From this discussion, we have compiled in this letter several of their recommendations<sup>1</sup> to improve access to healthcare in rural and remote communities.<sup>2</sup>

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<sup>1</sup> The Society of Rural Physician’s *Rural Road Map* provides more detailed directions on how to improve rural and remote access to health care and have inspired our more detailed recommendations below:

- [The Rural Road Map for Action: Directions,](#)
- [Rural Road Map Implementation Committee Final Update: Summer 2021](#)
- [Rural Road Map: Report Card on Access to Health Care in Rural Canada and Call to Action: An Approach to Patient Transfers for Those Living in Rural and Remote Communities in Canada.](#)
- All documents can be found on the Society of Rural Physicians of Canada website ([srpc.ca](http://srpc.ca)) and on the College of Family Physicians of Canada website ([cfpc.ca](http://cfpc.ca)).

<sup>2</sup> The Society of Rural Physicians, uses the term rural to describe “those communities that are geographically located in rural and remote regions of Canada and are distinctly or partly populated by Indigenous Peoples.” The *Annual*

Dr. Keith MacLellan, founder of the Society of Rural Physicians, has highlighted to us that the trend of specialization in health care, while a good model for urban, causes difficulties in rural and remote communities. Those areas often do not have access to the specialized health services they require and must undergo a patient transfer to receive care and then be transferred back home. The recent closings of hospital departments across rural Canada serves to exacerbate already limited health care access in rural and remote areas.<sup>3</sup>

Rural family practice demands a broad range of skills. We want to stress the importance of having highly skilled family physicians practicing rural generalist medicine to meet the unique challenges faced by rural and remote communities. Rural physicians are often not adequately equipped to offer services beyond basic primary health care, such as emergency care, anesthesia, obstetrics, surgery, palliative care, mental health, and home care.<sup>4</sup>

### **Recommendations to improve access to health care in rural and remote areas<sup>5</sup>**

- (1) Partner with provincial counterparts to explore solutions to help physicians and other healthcare professionals to provide a wider range of healthcare services. For example:
  - implement more flexibility in the standards and policies in specialty care such as obstetrical care, to accommodate the unique conditions in rural and remote areas;<sup>6</sup>
  - establish programs with targeted funding to enable medical students, family medicine residents and rural family physicians to obtain additional or enhanced skills training to improve access to health care services in rural communities.<sup>7</sup>
  - ensure specialist physicians acquire and maintain specific competencies required to provide health care to rural and remote communities.<sup>8</sup>
  
- (2) Leverage technology to assist rural generalists with “just in time” assistance support from specialists in urban centres. For example:
  - develop strategies to guide the implementation of distance technology using a rural lens to enhance and expand local capacity to improve access to care;<sup>9</sup> and
  - encourage investment in appropriate diagnostic imaging and other technological services in rural settings as needed to support more care close to home.<sup>10</sup>

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[demographic estimates, rural and urban areas: interactive dashboard](#) defines “rural” as “all areas that are outside of census metropolitan areas (CMAs) and census agglomeration (CAs), with CMA and CA definitions based on [Statistics Canada's 2016 Standard Geographical Classification \(SGC\)](#).”

<sup>3</sup> The [Call to Action: An Approach to Patient Transfers for Those Living in Rural and Remote Communities in Canada](#) provides a detailed look into the barriers in patient transfers that limit equitable access to health care, and the recommendations to remove these barriers.

<sup>4</sup> Society of Rural Physicians, *National Advanced Skills and Training Program for Rural Practice*.

<sup>5</sup> These are recommendations we have heard from our community members and organisations like the Society of Rural Physicians, doctors and other health care professionals.

<sup>6</sup> Society of Rural Physicians, *Call to Action: An Approach to Patient Transfers for Those Living in Rural and Remote Communities in Canada* and *Rural Road Map: Report Card on Access to Health Care in Rural Canada*, Key Challenges

<sup>7</sup> Society of Rural Physicians, *Rural Road Map: Report Card on Access to Health Care in Rural Canada*, Action 4 and 8.

<sup>8</sup> Society of Rural Physicians, *Rural Road Map: Report Card on Access to Health Care in Rural Canada*, Action 6.

<sup>9</sup> Society of Rural Physicians, *Rural Road Map: Report Card on Access to Health Care in Rural Canada*, Action 13.

<sup>10</sup> Society of Rural Physicians, *Call to Action: An Approach to Patient Transfers for Those Living in Rural and Remote Communities in Canada*, Leadership action/commitment needed, point 4.

- (3) Promote inter-provincial portability for patients, and enable physicians, nurses, and technicians to practise in communities across Canada where they are needed. For example:
- reduce inter-provincial barriers by allowing mutual recognition healthcare workers credentials registered in any province or territories;<sup>11</sup>
  - offer incentives or pathways for physicians, nurses, and technicians to become registered in more than one province and territory, according to regional needs
  - enable the creation of a special national locum licence; and
  - encourage provincial and territorial governments to reassess and expedite the lengthy process of licensure for physicians, nurses, and technicians.
- (4) Expedite assessment and licensing for foreign-trained physicians, nurses, and technicians. For example:
- pilot on-the-job training plans that involve mentorship, assessment, and credentialling to accelerate integration of foreign trained physicians, nurses, and technicians into the workforce as soon as possible after entry into Canada.

We hope that this letter will be of assistance to you in fulfilling your mandate to give rural communities greater access to a full suite of health and social services professionals.

Yours sincerely,

On behalf of the Rural Caucus:

Sophie Chatel, Chair of the Rural Caucus  
Robert Morrissey, Vice-Chair of the Rural Caucus



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<sup>11</sup> Society of Rural Physicians, *Rural Road Map: Report Card on Access to Health Care in Rural Canada*, Action 10.