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## **KINCARDINE SAUGEEN SHORES HEALTHCARE PARTNERSHIP**

### **3 YEAR PILOT PROGRAM OUTLINE**

#### **INTRODUCTION**

Staff in Kincardine and Saugeen Shores undertook a gap analysis to determine the needs in each municipality. The gap analysis for each was then combined to form a partnership that addressed underserved areas in healthcare across the two communities.

Current resourcing for the physician recruitment file is limited in each community and consists of the following:

Kincardine - Municipal staff position combination of 21 hours per week dedicated to recruitment and retention of physicians and 14 hours a week allocated to the Clinic Manager role. The 14 hours is paid for by the Kincardine Family Health Organization (FHO). The physician recruiter being primarily based out of the Hawthorne Community Clinic has allowed for greater relationship development and a strategic alignment for a recruitment strategy.

Saugeen Shores - Manager of Strategic Initiatives, portfolio includes advancing strategic initiatives set by mayor and council and the CAO and including indigenous relations, advocacy, communications, and engagement. Additionally, currently supervise Economic Development and Community Development Officers and seasonal staff. The Customer Service Coordinator acts as admin support to file including the booking of condos, facility cleaning and turnover, follow-up correspondence and managing lead database.

#### **THE PROGRAM**

The following outlines two programs to address the gap areas. One to support local emergency departments so they are never at risk of closure and remain open 24/7. The other addresses the current service gaps across these two communities.

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## 1. EMERGENCY DEPARTMENT SUPPORT PROGRAM

**Goal – Local Emergency Departments** are never at risk of closure and are **open 24/7**

**Program details** – This program provides a \$500/shift stipend to locums or physicians completing their third year of residency to work shifts in the Kincardine or the Southampton emergency departments (ER).

**Cost - \$50,000 annually for 3 years** (\$25,000 each Municipality)

## 2. KINCARDINE AND SAUGEEN SHORES HEALTHCARE PARTNERSHIP PROGRAM

**Goal -** Communities are resourced so **every resident** has access to a **General Practice Physician**.

**Program details** - There are four areas of focus to this program. The first two are immediate (2024 – 2027), the third is medium term (2028 – 2030) and the fourth is longer term (2031+) as population growth continues.

**Cost - \$100,000 annually for 3 years** (\$50,000 each Municipality)

The areas of focus for this program are outlined below:

### IMMEDIATE TERM (2024 – 2027)

#### 1. Recruitment

The first priority is emergency department stability through ER physician recruitment. The second is sustained clinic support through family physician recruitment. While we know that a fully supported system includes nurses and other healthcare professionals, we will focus attention first on the physician. The program could evolve to also include other healthcare workers.

ER focused physician support is the first pillar and the grounding element from which all other activities stem from. Municipalities do not have the required resources to fully advance a comprehensive recruitment program. Working together to advance the activities outlined in this focused area will build the framework on which to build a sustainable locally advanced healthcare framework.

Activities under this focus area are:

- development and execution of a marketing plan with tactics
- lead generation tactics

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- CRM system to support continual follow-up and relationship building.
  - Medical conference trade show attendance

## **2. Marketing and Promotion**

Selling the community and the work opportunity is paramount. People move where they want to live and then find work. We are competing with municipalities across Ontario. Many have the same assets we have and while we think life along the lakeshore region of Bruce County is the best, we have to convince prospective healthcare workers this is true.

A well-developed marketing plan with specific tactics to gain prospective physician leads is integral to recruitment. Municipalities alone don't have the required resources to build such a plan. Together we can put in place the required bandwidth to make this happen.

Activities under this focus area include:

- A well-developed marketing campaign with associated tactics specifically targeted to medical students, residents and practicing physicians.
- Well-developed digital and print promotional material / items for media placement and distribution.
- Updated videos that illustrate the work/life opportunity in the lakeshore region of Bruce County.
- Capacity to create a welcoming and professional exhibit booth that draws participants in and illustrates the work/life opportunity in the lakeshore region of Bruce County.

## **MID-TERM (2028 – 2030)**

### **3. Concierge Service**

One of the most difficult pieces for rural doctors transitioning into communities and remaining in those communities really is a multitude of small problems. A lot of small problems together become big, stressful problems. These are things like finding daycare, knowing who to call for internet services, finding housing, a dentist or knowing how to set up a system for billing and working within the Ministry of Health framework for getting paid.

This may seem like everyday annoyances but to those who are saving lives it is a lot to manage. It is recommended that a Concierge Service be resourced through personnel support to assist in the day-to-day aspects of supporting physicians. Since we sell quality of life, we need to deliver it!

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Activities under this focus area include:

- Increase capacity of concierge services to ensure newly recruited physicians are transitioned into practice seamlessly.
- One point of contact to help with transitioning both work and home. Examples include contacts for real estate, daycare, dentist, finding dog sitter, accommodations etc.
- Interface with the Ministry of Health on administrative details and other practice associated matters.

## **LONGER TERM (2031 PLUS)**

### **4. Bricks and Mortar**

Space for practicing physicians is limited in both communities and will be a focus as we continue to grow.

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## HOW WE MEASURE SUCCESS

### Projected Outcomes (Key Performance Indicators)

The outcomes listed below will be reviewed annually and updated for the full 10 years. This highlights the immediate needs.

Physicians Recruited	2026	2028	2030	2032	TOTAL
ER	2	2	3	4	12
Clinic	2	2	3	4	10

\*ER numbers are full time equivalent coverage in either community hospital

\*Clinic represents the number of general practice physicians recruited