HealthForceOntario

HealthForceOntario Year-End Report 2007/08

Opening Doors

Ontario

The Importance of Opening Doors to Secure Ontario Health Human Resources' Future

HealthForceOntario is a multi-year, collaborative strategy to provide Ontario with the right number and mix of qualified health care providers, working in communities across the province to meet our health needs—now and in the future.

We report here on our second year of this strategy; a strategy that requires new thinking and innovative solutions. Keeping and attracting health professionals in Ontario requires numerous complex strategies, all working in tandem. It's about education, career opportunities, great communities in which to live, jobs that offer the right balance between work and life, and the chance to work as part of a team in a healthy work environment.

Perhaps, most importantly, HealthForceOntario is about the sustained co-operation and effort by all parties in health care.

That's why we've chosen "Opening Doors" as the theme for this year's Year-End Report. Over the past year, the entire health care community—from government, to educators, researchers, and to all types of health care providers and their organizations—have worked extremely hard to open Ontario's health care doors to new graduates, new roles, new practice models, new policies and new opportunities. In the process, we are transforming Ontario's health care system.

Health care delivery in Ontario is changing. Interprofessional care teams are growing, providers are collaborating more closely, and new team-based roles are being introduced.

One significant initiative this year was the launch of The Nursing Graduate Guarantee, a program that is opening the door for new nurses. The Guarantee's aim is to ensure that every new nursing graduate (RN and RPN) who wishes to work full-time in Ontario will have that opportunity. And it is working. Over 2,660 nursing graduates (RNs and RPNs) had taken a job opportunity in an Ontario hospital or long-term care facility through the Nursing Graduate Guarantee as of March 2008.

Ontario's doors have also been opened to internationally educated doctors through record investments in International Medical Graduates (IMGs). A total of 235 new training and assessment positions were offered to IMGs in 2007 alone; the IMG program has essentially added the capacity equal to a new medical school.

I also recognize and thank the remarkable group of individuals—across divisions, ministries and the health system—for their work in helping HealthForceOntario succeed in the past year. Looking forward, we will continue working in partnership with innovators from across the health system to ensure the people of Ontario have access to health care, when and where needed.

I invite you to read about these and many other exciting initiatives of the last year inside this Year-End Report. As always, I look forward to your support and welcome any and all communication.

Respectfully submitted,

Joshua Tepper
Assistant Deputy Minister, Health Human Resources
j.tepper@HealthForceOntario.ca

TABLE OF CONTENTS

Opening the Door for New Nurses

Ontario's new nursing graduates have said yes to the Nursing Graduate Guarantee and seized the opportunity to get a full-time, six-month placement, plus benefits, paid for by Ontario.

The program takes the nursing graduate at the start of their career and brings them into their profession to gain the kind of valuable experience they need. Research shows that it's this substantial orientation period offered by the program that's key to retaining new staff and establishing them into a full-time nursing career.

The Nursing Graduate Guarantee initiative helps to ensure new nurses are comfortable working in their unit—with their colleagues, physicians and allied heath professionals. Experienced nurses also benefit from the addition of having a graduate as a member of the team.

In the words of Doris Grinspun, Executive Director of the Registered Nurses Association of Ontario, "The Nursing Graduate Guarantee is filling a critical void in the health care system. In fact, I predict if Ontario continues on the path it has set for itself, we'll be the first province to solve the nursing shortage."

"These results are spectacular. By working together with employers, we are bringing new nursing graduates into the workforce rather than leaving them to search for jobs elsewhere. Together, we're helping make Ontario the employer-of-choice."

Vanessa Burkoski
Nursing Secretariat,
Provincial Chief Nursing Officer

The Nursing Graduate Guarantee

Starting nursing careers on the right foot

The Nursing Graduate Guarantee is a part of HealthForceOntario's strategy to ensure Ontarians have access to the right number and mix of qualified health care providers, now and in the future.

The Nursing Graduate Guarantee is a program aimed at ensuring that every new nursing graduate (RN and RPN) who wishes to work full-time in Ontario will have that opportunity. Employment opportunities for Ontario's nursing graduates are in Ontario's hospitals, as well as the province's long-term care, home care, mental heath, public health, and primary health care sectors.

Here's how it works…

- Ontario pays the salary for the first six months of a nursing graduate's full-time placement and the employer picks up the next six weeks.
- The Nursing Graduate Guarantee uses a simple, automated and confidential online employment portal (www.HealthForceOntario.ca) and matching process to link new graduates with employers seeking to hire graduates into full-time bridging positions.
- The program provides each graduate with a guaranteed, seven-and-a-half months of hands-on work placement—with an opportunity to transition into a full-time permanent position.
- Employers assign experienced nurses to mentor the nursing graduates during the six-month Nursing Graduate Guarantee placement.

The Benefits

The Nursing Graduate Guarantee helps create stability in the nursing workforce, improve work environments, and increase opportunities for Ontario's nurses. Specifically:

Nurse Benefits

- The Nursing Graduate Guarantee offers **employment opportunity across all sectors** and opens doors to nursing as a profession.
- New graduates gain access to invaluable employment opportunities and **a good chance to gain permanent full-time employment** that they might not have access to otherwise.
- The extended orientation supports **a more effective transition to practice for new graduates**, thereby allowing them to become fully engaged as key members of the health care team.

Health Care Team Benefits

- Experienced nurses benefit from the addition of confident and well-prepared new graduates as members of the team, **providing some relief for the workload pressures** they recently experience.
- The initiative also **provides leadership opportunities** for staff to mentor the next generation of nurses.
- If employers are able to bridge new graduates into full-time permanent positions before the end of the six-month funding period, all nurses will benefit from the **re-investment of remaining salary dollars into other front line nursing priorities**.

Employer Benefits

- The Nursing Graduate Guarantee offers 100% salary dollars and benefits, along with other resources, to **support employers' recruitment and retention efforts**.
- It levels the playing field for all organizations, regardless of size, and **helps with recruitment to rural and northern areas**.

HealthForceOntario Year 2007 in Review

$89 million Initial investment by Ontario to launch the Nursing Graduate Guarantee program in February 2007. The program is ongoing.

86% Percentage of RNs and RPNs who found full-time jobs after graduation from the Nursing Graduate Guarantee program. Preliminary data indicates that 86% of new graduates who completed the program have secured full-time jobs in Ontario. Before the Nursing Graduate Guarantee program implementation, only 40% of RNs found full-time jobs after graduation.

2,660+ Number of new nursing graduates (RNs and RPNs) who have taken advantage of a job opportunity in a provincial hospital or long-term care facility through the Nursing Graduate Guarantee as of March 2008.

242 Number of facilities across Ontario which have participated in and benefited from the Nursing Graduate Guarantee.

$2.5 million Awarded by the **Nursing Research Fund** to nine projects focused on the management, organization and effectiveness of nursing human resources and services.

2,650 Number of nurses who are participating in the **Late Career Nurse** initiative, in more than 115 hospitals and 165 long-term care homes. This initiative helps keep late career nurses in the workforce longer by offering alternate, less physically demanding roles.

The International Medical Graduates (IMG) Experience

When Joan Hatcher joined the Niagara Health System (NHS) in 2001 as a specialist physician recruiter, she considered the options and decided that IMGs would be a valuable resource in helping to alleviate staffing shortages. At the time, the Ministry of Health and Long-Term Care's IMG program was just being introduced.

Since then, Hatcher has recruited 120 specialists, 40% of whom are IMGs. Many of the recruited IMGs are completing five years of service in an under-serviced community in return for the training they have received. "IMGs form the backbone of our staff and have been a fantastic addition," says Hatcher. "They're people who bring with them all manner of relevant experience."

The NHS is Ontario's largest multi-site hospital amalgamation comprised of six hospital sites (including Welland, St. Catharines and Niagara Falls), and an ambulatory care centre serving 434,000 residents across the 12 municipalities, making up the Regional Municipality of Niagara.

"The IMG experience has been very positive," says Dr. Mark Jany, Chief of Medicine in the Department of Medicine at NHS. "All of the IMGs did a vigorous six-month mini-residency at a teaching centre prior to coming to our communities." He added, "Most have subsequently passed their RCPSC fellowship exams in internal medicine."

Ontario's Health Human Resources

Meeting health care needs today and tomorrow

Health care delivery in Ontario is changing. Interprofessional care teams are growing, providers are collaborating more closely, and new team-based roles are being introduced to teams in new settings.

The introduction of new, team-based roles—like the physician assistant and others—will alleviate some of the pressure on our health force, from better use of clinical resources and lower rates of staff turnover. Ultimately, new team-based roles will help keep our frontline providers working here in Ontario.

The HealthForceOntario strategy talks a lot about the benefits of teamwork and collaboration among frontline health care providers. But patients also benefit when government and associations work as a team to introduce these new ideas. The patients of Ontario benefit from better access to health care and improved outcomes, while their providers experience less conflict and tension.

Ontario Champions International Medical Graduates

Internationally educated doctors are an essential way to supplement Ontario's supply of doctors, particularly in areas where they are most needed. Ontario is making investments in IMGs, making Ontario the leader in Canada when it comes to providing individuals the support and assessment they need to get into practice in Ontario.

- A total of **883 new training and assessment positions were offered to IMGs** between 2003 and 2007.
- Ontario absorbs more IMGs than all other provinces in the country combined. **In 2007, 235 positions were offered to IMGs**, 96 in Family Medicine.

Ontario has essentially added the capacity equal to a new medical school. IMGs are better able to make the most of their abilities, and Ontarians benefit by having increased access to care.

Introducing a New Role in 2007: Physician Assistants (PAs)

While PAs have worked for decades in the United States, the Canadian Forces and elsewhere, the PA is a newcomer to the interprofessional health care team in Ontario. No matter how great the promise of the end benefit, a change like this one requires hard work, flexibility and leadership to implement.

Much of the credit for the success of the PA Initiative must be attributed to the Ontario Medical Association, the Ontario Hospital Association and the Association of Ontario Health Centres. These key partners have worked in collaboration with the ministry to implement PA Demonstration Projects.

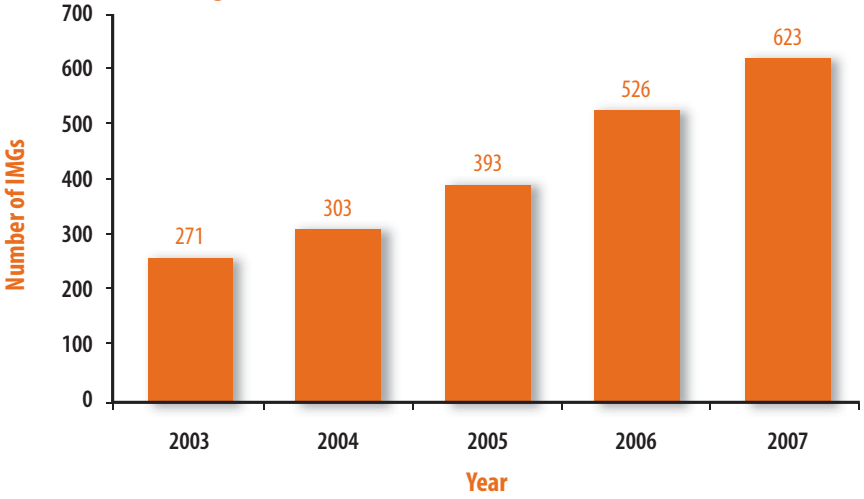
As a result, PAs are now working in the interprofessional health care teams of hospitals, community health centres and physician-employed diabetes and long-term care settings across the province.

The projects are on track for success.

"We believe the addition of PAs has already helped us reduce wait times and increase patient satisfaction. I also believe the PAs will help reduce the workload for physicians and nurses."

Dr. Mark Spiller
Chief of Staff and Chief of ER at Kirkland District Hospital

Total Number of IMGs in Ministry-Funded Training and Assessment Positions



Physician Planning

Working with Ontario's medical schools, we have made great strides in expanding our capacity to produce physicians so that Ontario has the right mix of qualified health care providers, now and in the future.

Ontario is increasing its capacity to train physicians.

- More physicians are starting their post-graduate education in the province than ever before.
- In April 2007, the **Centre for the Evaluation of Health Professionals Educated Abroad (CEHPEA)** opened, providing standardized evaluation and orientation services for international medical graduates, allowing them to compare their clinical competencies with those of Canadian medical graduates and improve their chances of obtaining residency positions.
- Ontario has implemented a change to the process by which IMGs may compete for entry-level training positions. **IMGs who applied to first year residency positions for the 2007/08 academic year competed in a dedicated IMG matching process administered through the Canadian Resident Matching Service (CaRMS).**

Ontario's Health Human Resources CONTINUED

New Roles

- In September 2007, the first cohort of IMGs began the **Physician Assistant Initiative's Integration Program**. IMGs completed the didactic and clinical phases of the program and became fully qualified to begin work as PAs in the hospital Demonstration Project.
- Four new health care roles were introduced in 2007 to Ontario in high need areas: **physician assistant**, **registered nurse performed flexible sigmoidoscopy**, **surgical first assist** and **clinical specialist radiation therapist**. All were very successful and great progress was made in integrating all of these roles, thanks to good partnerships with health leadership.

Allied Health HR Policy & Planning

Ontarians are looking for access to a wider variety of health providers. Ontarians want safe, quality care, including complementary and alternative care.

- In September 2007, respiratory therapists and registered nurses began classes in the **Anaesthesia Assistant Program**, being offered for the second year, at the Michener Institute for Applied Health Sciences. Upon graduation, they will take on the advanced practice role and work as part of an interprofessional Anaesthesia Care Team.
- The **Allied Health Professional Development Fund** has been expanded to include dietitians, pharmacists and respiratory therapists. The Fund continues to support skill and knowledge development opportunities for medical laboratory technologists, physiotherapists, medical radiation technologists, occupational therapists, speech-language pathologists and audiologists. **4,303 applicants received funding. 5,745 professional development activities were funded**.

Forecasting and Modelling

We are accountable today for the health care needs of tomorrow. Data modeling, evidence gathering and analysis are required to build accurate needs-based forecasting models to predict Ontario's health human resources.

- In February 2008, a long-term strategy was launched to bring the **Allied Health Human Resources Database** into full operation, including the annual collection of data from all 21 allied health regulatory colleges in Ontario.
- In May 2007, the **Health Human Resources Toolkit**, a resource for understanding how the health workforce in Ontario is organized and governed, was published for LHINs and other interested parties.
- In January 2008, the Council of Ontario Universities selected **McMaster University to establish Ontario's permanently endowed Research Chair in Health Human Resources**. The ministry-funded Chair will help ensure Ontario has the right number and mix of health professionals by increasing health human resources research capacity and supporting evidence-based policy and planning.
- Also in January 2008, a project to develop a **needs-based forecasting model to predict supply and need for physician human resources** was undertaken, in partnership with the OMA. The contract to develop the model was awarded to the Conference Board of Canada.

"Everyone in the health community has a role to play to make sure Ontario has the skilled health professionals to expand and strengthen Ontario's health care system."

Jeff Goodyear
Director, Health Human Resources Policy Branch

HealthForceOntario Year 2007 in Review

2.5 million Number of Ontarians in over 112 communities who will receive improved access to primary care via 150 Family Health Teams.

951 Number of first-year residents who began training in 2007; the largest group ever trained in a single year.

574 Number of **primary health care nurse practitioners** who are part of the interprofessional team practice in Community Health Centres, Family Health Teams and long-term care facilities, and hospitals.

5 Number of **clinical specialist radiation therapists** hired by two cancer centres in July 2007 as part of a new health care provider role Demonstration Project.

64 Number of physician assistants hired to work in Ontario hospitals, community health centres, diabetes care clinics and long-term care facilities, under the direction and supervision of registered physicians since the announced launch of the **Hospital Physician Assistant Demonstration Project** in May 2007.

27 Number of organizations participating in the **Surgical First Assist** initiative. In total, 41.1 Surgical First Assist positions have been filled across the province.

SUCCESS STORY

South East Toronto Family Health Team

A patient of South East Toronto Family Health Team (SETFHT) finds that an interdisciplinary practice means they have access to social workers, dietitians, nurses, nurse practitioners, mental health addiction counselor, chiropodist, care navigator and pharmacist as part of their care team. Dr. Marcus Law, the lead physician of SETFHT, says, "Through the Family Health Team (FHT), our goal is to improve patient access, satisfaction, quality of care, and increase our providers' job satisfaction, all in a very collaborative and team-based environment."

SETFHT is also proud to be launching its first obesity prevention clinic. As the first primary care partners to ever work with Toronto Parks, Forestry and Recreation Program, patients that enroll in SETFHT's Healthy Weights Program will work one-one-one with recreation staff to learn how to develop personal strategies to incorporate daily physical activity into their lifestyles. A strong emphasis will be placed on long-term lifestyle changes that are important for maintaining optimal health.

Education is a constant part of SETFHT's mission. As an academic FHT, there is ongoing encouragement to build and maintain an effective interprofessional environment. A working group from within the FHT is charged with looking at options and developing interprofessional education programs and opportunities modeled on the Interprofessional Education (IPE) program developed at the University of Toronto. The goal is to have other health care disciplines use SETFHT as a clinical placement of choice.

Dr. Geordie Fallis, Chair of Family Medicine at Toronto East General Hospital and a physician at SETFHT, defines the mission of the FHT like this: "We're a leading academic family health team that improves the health of our East York community. At the same time, through our partnership with Toronto East General Hospital, we're a facility committed to excellence in training health care professionals of the future."

Interprofessional Care in Ontario

Transforming Ontario's health care system

Demands on the health care system are increasing. Chronic diseases such as cardiovascular disease, diabetes, respiratory disease and mental illness are on the rise. Patients and their families want to be actively engaged in managing their health conditions—expecting the right care at the right time.

Health care organizations are feeling pressured to provide more timely services, while at the same time working with finite human and financial resources. For these reasons, new ways of approaching care are needed and different solutions are required to meet future demand.

A collaborative, team-based approach to care is an enabler for improving patient care in Ontario, while meeting the demands that the system in Ontario is facing.

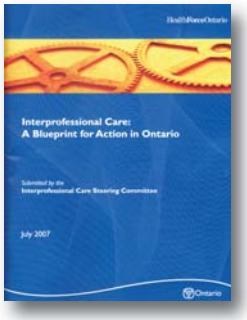
Interprofessional Care*

The concept of a collaborative, team-based approach to care has been endorsed by governments throughout Canada and around the world. In Ontario, the health care system is gradually being transformed to ensure that the patient is at the centre, delivery is timely, care is safe, continuity is maintained and access is guaranteed.

- The creation of Family Health Teams is making it easier for patients to gain access to primary care services.
- Team-based models to reduce wait times for surgeries is another innovative approach to care.
- Organizations and care delivery agencies and settings are being held accountable for service delivery and performance.
- Local Health Integration Networks (LHINs) are working with agencies to integrate and manage care within their communities.

The Benefits of Interprofessional Care include:

- Increased access to health care
- Improved outcomes for people with chronic diseases
- Improvements in patient morbidity and mortality
- Improved communication reduces medical errors, in one study lowering emergency department clinical error rates from 30.0% to 4.4%
- Increased patient satisfaction
- Less tension and conflict among caregivers
- Better use of clinical resources
- Easier recruitment of caregivers
- Lower rates of staff turnover



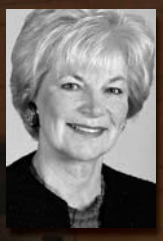
* Source: *Interprofessional Care: A Blueprint for Action in Ontario*, July 2007

HealthForceOntario Year 2007 in Review

- In July 2007, ***Interprofessional Care: A Blueprint for Action in Ontario*** was released. The Blueprint contains an action plan to effectively implement interprofessional care in Ontario. The recommendations focus on the need for partnership, integration, shared responsibility, communication, foundation-building and supporting change.
- In August 2007, HealthForceOntario's **Interprofessional Care/Education Fund (ICEF)**, jointly administered with the Ministry of Training, Colleges and Universities, sought proposals from the health education and health delivery sectors for projects that will build and foster teams to deliver innovative, collaborative interprofessional health services. In December, the $6.1 million ICEF funded 48 projects across Ontario.
- In December 2007, the Ministry formed an **Interprofessional Care Strategic Implementation Committee** comprised of experts in the fields of policy, education, practice and regulation. The Committee is responsible for implementing the recommendations in the document, ***Interprofessional Care: A Blueprint for Action in Ontario***. The Committee, working with Local Health Integration Networks (LHINs), health care delivery organizations, health professional groups, regulators, educators, and their patients and their family, will help implement the blueprint over the next two years.

SUCCESS STORY

Emergency Department Coverage Demonstration Project



"Northumberland Hills Hospital in Cobourg is grateful to HealthForceOntario for its assistance in securing temporary physician resources for our emergency department during this period of acute physician shortages."

Joan Ross
CEO, Northumberland Hills Hospital

The Emergency Department Coverage Demonstration Project (EDCDP) provides a locum pool of qualified physicians who are committed to assisting designated, high-need Ontario Hospitals cover shifts in their Emergency Departments.

The EDCP was created in October 2006 by the OMA and the MOHLTC, and is now operated by the HealthForceOntario Marketing and Recruitment Agency.

Working closely with the OMA, the MOHLTC, the OHA and the Local Health Integration Networks (LHINs), the Agency has developed and implemented a common credentialing process for hospitals and ED physicians. In addition to overseeing the portal that physicians use to match their availability to ED needs, the Agency is also responsible for recruiting eligible physicians and ensuring they receive monthly payments.

In one year, EDCDP physicians have provided more than 12,000 hours of additional ED coverage to 25 hospitals—and no emergency department in Ontario has closed due to physician staffing shortages.

Marketing and Recruitment Agency

Presenting Ontario as the employer-of-choice

The HealthForceOntario Marketing and Recruitment Agency focuses on recruiting health professionals to Ontario, as well as retaining the health care professionals we now have in Ontario. An essential focus of their work is to sell Ontario as the employer-of-choice to physicians and physicians-in-training in Ontario, Canada and the USA. They also offer relocation services.

The Agency reaches out to health care professionals through its Marketing and Recruitment Group, the Recruitment and Relocation Group, the Access Centre, and the Ontario Physician Locum program which includes the Emergency Department Coverage Demonstration Project.

Agency representatives travel throughout the year to promote Ontario at provincial, national and international conferences and career fairs, and are registered to attend a number of career fairs and conferences in 2008.

"A truly coordinated health professional recruitment approach is required to open Ontario's doors to physicians and other health care professionals. We're counting on all our partners—College of Physicians and Surgeons of Ontario, Ontario Medical Association, Registered Nurses Association of Ontario, Association of Municipalities of Ontario and the Local Health Integration Networks—to be there with us in promoting Ontario as a desirable place to work and live."

Brad Sinclair
Executive Director, HealthForceOntario Marketing and Recruitment Agency

On the Road With HealthForceOntario

The Marketing and Recruitment Agency has strategically targeted physicians and physician assistants through a multi-faceted campaign that includes relationship-building and partnerships, conferences, receptions, job fairs and direct mail.

A primary focus in 2007 was to reach Canadians who are practicing outside of the country. "When we exhibit, we use an interactive display to showcase Ontario's job opportunities, innovation, diversity, practice flexibility and social progressiveness," Lynn Bury, Director of Marketing and Recruitment explains. "We use an integrated customer relationship management approach with health care professionals who are interested in finding out more about relocation to Ontario."

Bury's team also travels extensively within the province to meet with community recruiters, employers and health care organizations. They exchange information about ways they can work together to bring more health professionals to work in Ontario.

HFOJobs on www.HealthForceOntario.ca

The HFOJobs portal is the Agency's number one tool when it comes to recruiting physicians and other health care professionals to Ontario. With more than 10,000 posted job opportunities, it is the most comprehensive health care job portal in Ontario.

- Employers and communities create and manage customized websites on the portal to advertise job opportunities and promote their communities.
- The HFOJobs support team is on hand to help employers develop their postings or, if they're pressed for time, create the posting on the employer's behalf.
- The portal also answers questions about communities and practice opportunities, allowing job seekers to narrow their searches and effectively find positions that are the best match for their practice and lifestyle preference.

HealthForceOntario Year 2007 in Review

6,500 Number of nurses registered as HFOJobs users; 2,500+ physicians are also registered. Thousands more visit the site each month to search the opportunities posted.

87,000 Number of visits, as of the end of March 2007, to the HealthForceOntario web site since its launch in December 2006.

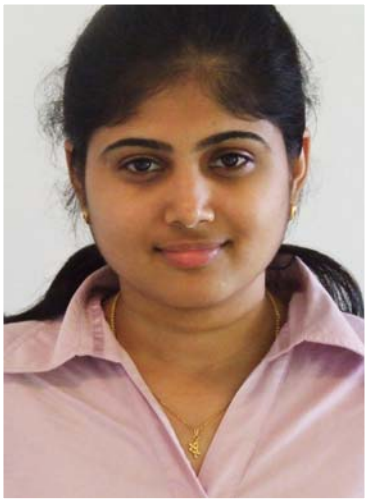
8,241 Number of physicians living outside of Ontario who were targeted in November via a direct mail campaign to practice in Ontario.

620+ Number of clients who expressed an interest in practicing in Ontario as of February 2007. The number of expressions of interest gathered at conferences throughout the United States was 500.

35 Number of physicians who have already been successfully recruited and are working in Ontario.

100% Percentage of emergency departments that have remained open since 2006.

4,200 Number of additional emergency departments coverage hours that were provided at 31 hospitals through the **Summer Shift Premium Program** of 2007.



Meet Meenatchi Ranganathan, International Medical Graduate

"I emigrated from India in 2005 and I am starting my residency training in Pediatrics at McMaster University Medical Centre.

Coming to Ontario has been a really different experience for me. I had never been outside of India in my whole life. Coming here and going through the exams was a little bit difficult initially, but then, when I saw people getting into the profession here, I became even more motivated. I didn't lose hope.

The HealthForceOntario Access Centre has helped me prepare for the residency program selection process. I registered with the Access Centre and they started sending me e-mails regarding the information sessions that were available. I met with my advisor at the Access Centre. She arranged to hold some mock interviews for me because interviews are very important in the selection process.

After I was accepted to the pediatric residency program, the Access Centre gave me some suggestions on how I should prepare for the exams—and what I should expect from the IMG program. They also have guided me to have a successful career later on.

What's next for me? I would like to work in a rural, under-serviced area where doctors are very much in need. I plan to stay in Ontario; I would like to provide health care to the people of Ontario."

Marketing and Recruitment Agency Access Centre

Opening doors for health professionals who want to work in Ontario

Internationally Educated Health Professionals (IEHPs) are an important—indeed essential—way to complement Ontario's supply of health care practitioners, particularly in areas where they are most needed.

Opening its doors in December 2006, the Access Centre, part of the HealthForceOntario Marketing and Recruitment Agency, helps internationally educated health professionals work in Ontario's health care system.

"We're in the business of helping clients find the best path to professional practice. Our knowledgeable advisors work one-on-one to review our clients' experience, fully explain requirements and assess their future opportunities."

Wayne Oake
Director, The Access Centre for Internationally Educated Health Professionals

Information Programs

The Access Centre has developed comprehensive programs to support IEHPs.

IMG Program Orientation

Orientation sessions have been developed to support IMGs as they move through the process of receiving an invitation for an interview for a residency training position. The program includes:

- Information on the Medical Council of Canada Examinations
- Orientation and exam preparation workshops focused on the CEHPEA CE1 exam
- Interview skills development workshops and other Access Centre programs/services

Career Options Program

This is a program for those IEHPs who will not be able to obtain registration in their original health profession but are interested in re-training or direct entry into an alternative career in the health sector.

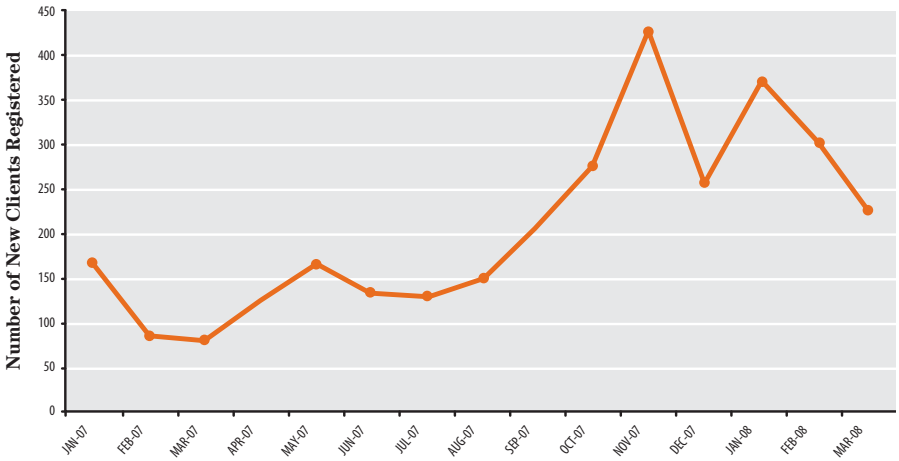
Professional-Specific Information Sessions

In partnership with stakeholders, regulatory bodies and bridging programs, the Access Centre has developed information sessions for the physician, pharmacist and medical laboratory technologist.

Orientation to the Canadian Health Care System

The Access Centre has partnered with the University of Toronto and Ryerson University to pilot a 30-hour interactive course on Canadian culture and context for IEHPs.

Access Centre Use



HealthForceOntario Year 2007 in Review

23 Number of regulated health professions serviced by the Access Centre, including: Medicine, Nursing, Pharmacy, Medical Radiation Technology, Physiotherapy and Occupational Therapy.

3,109 Number of IEHPs registered with the Access Centre as of March 2008.

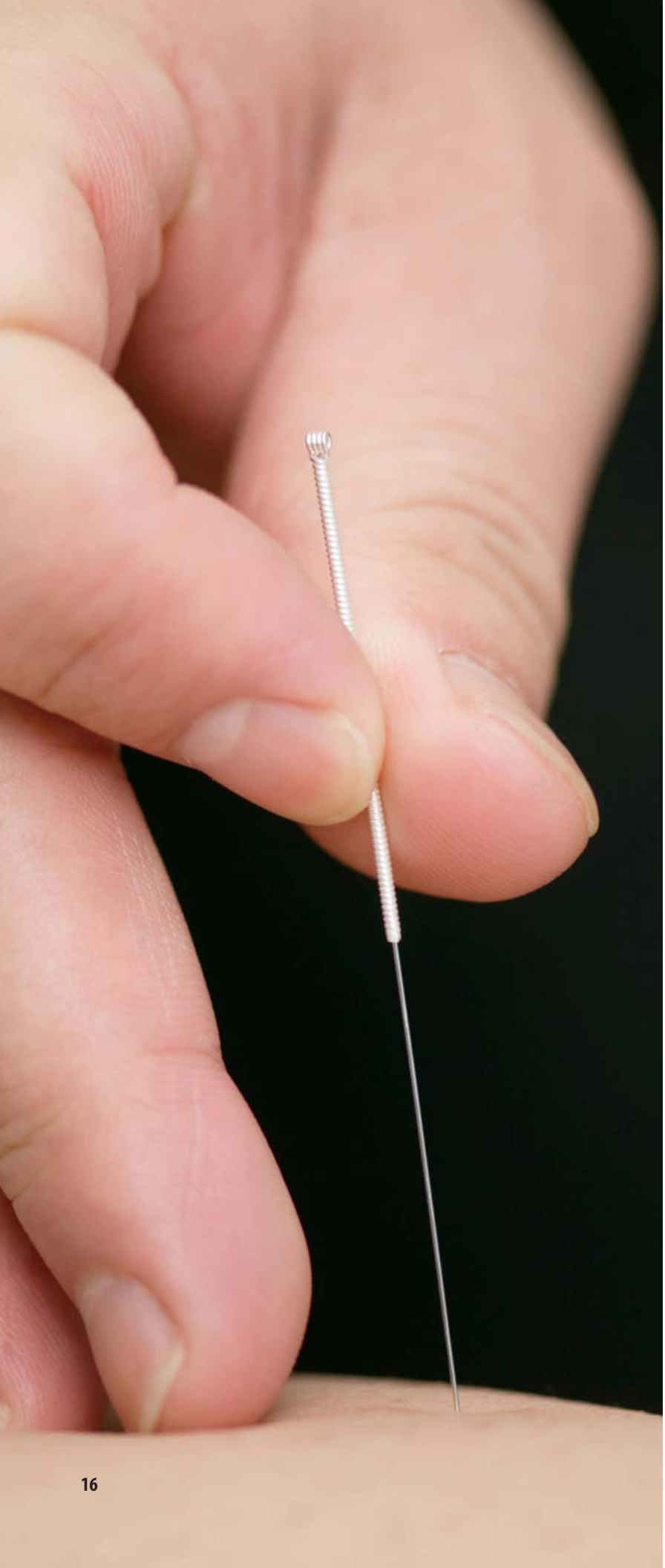
75% Percentage of the Access Centre clients who are physicians.

150+ Number of countries from which the Access Centre clients have originated, with the top five countries of origin being: India, Pakistan, China, Philippines and Iran.

200% Percentage of increase in awareness of the Access Centre's services through an extensive marketing campaign that included newspaper, television, radio and internet banner ads, as well as a 10-minute DVD for distribution to referral sources and key stakeholders.

100 Number of clients who attended an Interview Skills Workshop designed for IMGs registered for the 2008 CaRMS match.

9,500 Number of client encounters the Access Centre has had since its launch, three times more than targeted.



Traditional Chinese Medicine

Traditional Chinese medicine will be the first profession to be regulated since the *Regulated Health Professions Act, 1991* (RHPA) was proclaimed in 1993. In doing this, Ontarians will be provided with a more disciplined approach to ensuring the treatment they receive from traditional Chinese medicine practitioners or Acupuncturists is safe.

The Transitional Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (CTCMPAO) was established in 2008 by the Ontario government to assess and determine who is qualified to practice traditional Chinese medicine in Ontario. The Transitional Council will develop the necessary tools to ensure safe practice of traditional Chinese medicine under the *Regulated Health Professions Act, 1991* and the *Traditional Chinese Medicine Act, 2006*.

During this past year, the Registrar of the College has worked closely with the HealthForceOntario strategy to create the infrastructure that will allow the Transitional Council to quickly develop registration requirements and practice standards (including what are considered to be acts of professional misconduct), and other necessary work that will allow the CTCMPAO to fully operate as a college.

The Registrar has also been busy developing the College's website and meeting practitioners to inform them that if a practitioner wants to use the title of Traditional Chinese Medicine Practitioner or Acupuncturist in Ontario, he or she MUST be registered with the CTCMPAO when the Act is fully proclaimed.

Transitional Councils Expand in Number in 2008

In March 2008, the HealthForceOntario strategy began advertising for appointees to the Transitional Councils of the four new health regulatory colleges—Naturopathy, Homeopathy, Kinesiology and Psychotherapy.

Regulating Health Professionals

Affecting the way health care is delivered in Ontario

Regulating a health profession ensures Ontarians have access to health professionals of their choice who have met high standards of education and are practicing to high-quality professional standards, as set by their health regulatory college. In addition, regulation provides a framework for a formalized complaints mechanism in the event the patient is harmed by the health services provided.

In June 2007, the **Health System Improvements Act** received Royal Assent to advance the scope of practice for several regulated professions. In addition, four professions (Naturopathy, Homeopathy, Kinesiology and Psychotherapy) have received Royal Assent to be self-regulated under the Regulated Health Professions Act (RHPA).

"The people of Ontario are looking for access to a wider variety of health providers. Ontarians want and deserve safe, quality care, including complementary and alternative care."

Marilyn Wang
Director, Health Professions Regulatory Policy & Programs Branch

Health System Improvements Act

The Health System Improvements Act answers public concerns and improves Ontario's health profession regulatory system by:

- Amending the **Regulated Health Professions Act, 1991 (RHPA)** to improve the efficiency and effectiveness of the regulatory framework for health professions in Ontario.
- Amending the RHPA to require regulatory colleges to collect and submit data to the Ministry for the purpose of health human resources planning.
- Amending the **Dental Hygiene Act, 1991** to permit dental hygienists to clean teeth, in accordance with regulation and in the absence of contra-indications.
- Amending the **Optometry Act, 1991** to permit optometrists to prescribe certain drugs for eye conditions.
- Amending the **Pharmacy Act, 1991** to support the regulation of "pharmacy technicians".
- Creating four new Acts to regulate four additional health professions under the RHPA: Naturopathy, Homeopathy, Kinesiology and Psychotherapy.

Subsequent amendments in policy in 2007 include:

July 2007

- Amendments were made to the *Professional Misconduct Regulation* under the **Occupational Therapy Act**. The regulations help protect the public by identifying activities outside the boundaries of acceptable professional conduct that would result in disciplinary measures.
- Amendments to the *General Regulation* under the **Nursing Act** were made to update the list of drugs Registered Nurse – Extended Class (Nurse Practitioners) may prescribe.

August 2007

- Amendments to the *Registration Regulation* under the **Dentistry Act** gave Ontarians better access to oral health care **by recognizing internationally trained Dental Specialists and creating a specialty certificate for Dental Anaesthesia**.
- Amendments to the *General Regulation* under the **Nursing Act** expanded the existing Registered Nurse – Extended Class **by creating four streams: Primary Care, Acute – Pediatrics, Acute – Anaesthesia, Acute – Adult**. Amendments were also made with respect to the registration of applicants to the Registered Nurse – Extended Class who are already registered in another Canadian province and international applicants.
- Amendments to the *Registration Regulation* under the **Medicine Act** protects the public **by making professional liability protection mandatory for physicians practising in Ontario**. It also improves capacity for physician human resource planning by allowing for the mandatory collection of information through the College of Physicians and Surgeons of Ontario annual renewal form.

January 2008

- Amendments were made to the *Notice of Open Meetings and Hearings Regulations* under the **Optometry Act**, **Dietetics Act**, **Respiratory Therapy Act** and **Dental Hygiene Act** to ensure the public is informed about discipline hearings of these professional colleges.
- A new regulation under the **Dental Hygiene Act** established records management standards for the members of the College of Dental Hygienists of Ontario.

Ontario's Midwifery Program

The government of Ontario is making sure that Ontarians have access to the health services they need by creating more training spots for midwives.

In August 2007, as result of a $2.3 million investment, the MOHLTC and the MTCU announced an expansion of the Ontario Midwifery Education Program (MEP).

Twenty more students were admitted to the MEP (for a total of 80 students) in September 2007, with an additional 10 seats to be added in 2008. With this year's new graduates joining the pool of practicing midwives, there are now over 400 registered midwives practicing in Ontario.

What does this mean to Ontarians? More seats mean more graduates. Approximately 1,200 additional women in Ontario per year will be able to choose a midwife to deliver their baby when new graduates enter the profession by 2012.

Education, Training and HealthForceOntario

Opening doors through the cooperation of two ministries

HealthForceOntario is an important government initiative that is shared by two ministries—the Ministry of Health and the Ministry of Training, Colleges and Universities (MTCU). We work together to develop the plans to expand the enrolment in health care programs and increase the supply of highly educated health care professionals in Ontario.

Our work ensures that Ontario's colleges, universities and medical schools have the capacity and the right mix of health sciences programs to support HealthForceOntario's mandate of providing Ontarians with access to the right number and mix of qualified health care providers.

"Working closely with the MOH, our ministry will continue to play a big role in making certain the health human resources needs are met."

Frances Lamb
Manager of University Accountability, The Ministry of Training, Colleges and Universities

Better Access to Physicians

The Canadian Institute of Health Information has warned Ontario has one of the lowest rates of family doctors in the country; 84 per 100,000 residents, compared to a high of 203 in the Yukon. Premier Dalton McGuinty promised to provide another 500,000 Ontarians with access to a family doctor during last fall's election.

To ensure Ontarians have better access to qualified family doctors and other health care professionals, many steps have been taken in 2007 to expand and improve health care education in the province.

- The enrolment expansion includes **the creation of 4 new undergraduate medical campuses**: St. Catharines in the Niagara Region, Kitchener/Waterloo (McMaster), Windsor (UWO), and Mississauga (University of Toronto).
- Additionally we are **investing nearly $6 million annually to support the graduate enrolment** in nursing programs to ensure an adequate supply of nursing faculty.
- In 2007-08, the McGuinty government provided colleges and universities with **over $81 million to support nursing degree programs** in Ontario.
- The government is investing $24.5 million to **create 80 additional training spots and to increase access to midwives and nurse practitioners**. MTCU negotiated the midwifery agreement with the institutions in which the training will take place, as well as the capital plans for both midwifery and nurse practitioners.

HealthForceOntario Year 2007 in Review

20 Number of MRI students added to the Michener Institute's fast-track program.

$100 million Invested in operating funding to support undergraduate medical education in 2007-08. This includes $40.9 million for expansions, $50 million to support medical enrolment, and $9.6 million for the Northern Ontario School of Medicine.

$2.3 million Invested to expand enrollment in the Midwifery Education Program; from 60 to 80 starting this fall, then 10 seats the following year, for a total of 90.

$5 million Invested for another 50-seat expansion of the Nurse Practitioner Education Program over four years, to a total of 200 seats. This 12 month full-time post baccalaureate certificate program is currently offered at 10 Ontario universities.

$12.2 million Invested in August 2007 to increase access to midwifery services by funding up to 67 new graduates this year.

$5 million Provided in salary and benefits to immediately support the recruitment and retention of nurse practitioners.

$8 million Pledged to open a new health science hub at the University of Waterloo, including a satellite campus of McMaster University's Michael G. DeGroote School of Medicine and a pharmacy school.

Northern Ontario School of Medicine (NOSM)

Northern Ontario School of Medicine

Ontario's newest school of medicine is an outstanding international centre of excellence which draws the brightest and the best staff and faculty from around the world and students from northern and rural Ontario.

The School's goal is to graduate medical generalists who are innovative, resourceful, self-reliant, culturally and emotionally sensitive, and who are fully acquainted with the rigors and rewards of medical practice in northern, remote and culturally diverse settings.

NOSM: A School of Firsts

- First new medical school in Canada to open in over 30 years.
- First Canadian medical school hosted by two universities, some 1,200 kilometers apart.
- NOSM announced a 3D iAnatomy collaboration with Stanford University School of Medicine in California. This unprecedented collaboration uses advanced networking technology and Stanford's vast collection of stereoscopic images to allow students to view and manipulate three-dimensional anatomical representations.
- The four-year Undergraduate Medical Education curriculum emphasizes the extensive use of broadband technology to bridge the distance between campuses.

Distributed Community-Engaged Education

Opening doors in Northern Ontario

The Northern Ontario School of Medicine (NOSM) is a pioneering faculty of medicine. The school is a joint initiative of Lakehead University and Laurentian University, with main campuses in Thunder Bay and Sudbury, and multiple teaching and research sites distributed across Northern Ontario.

NOSM was established with a social accountability mandate to the cultural diversity it serves, including: Aboriginals, Francophones, remote communities, small rural towns, large rural communities and urban centres.

Evidence of this mandate can be found in the School's curriculum, administrative structure and research programs.

From its community-based Board of Directors to its extensive reliance on Northern communities to act as hosts for its students, NOSM is committed to engaging Northerners in the education process.

"I'm immensely proud of the staff, faculty and students here at NOSM—and of the people of Northern Ontario—for helping to make Canada's first new Medical School for the 21st century a place that is already garnering so much recognition on the global stage of medical education."

Dr. Roger Strasser
Founding Dean, Northern Ontario School of Medicine (NOSM)

World Recognition

By educating skilled physicians and undertaking health research suited to community needs, NOSM has become a cornerstone of community health care and contributes to improving the health of people in Northern Ontario.

"You have been able to implement in a relatively short period of time a school of medicine that puts in practice most of the recent and future trends of medical education for the 21st century. Lessons for our school and our curriculum are numerous."

Dr. Paul Grand 'Maison, University of Sherbrooke's Vice Dean for Undergraduate Medical Education. November 2007.

"[I am] *seeing for the first time concretely implemented ideas which I have talked about for years and years, particularly around the medical school focusing on making a difference to people's health."*

Dr. Charles Boelen, considered to be the father of the social accountability concept of medical education; associated with World Health Organization, and Harvard, Stanford and McGill Universities. October 2007

"NOSM's inter-dependent community partnership model, which relies heavily on the commitment and active participation of communities across the North, could be the very element that's lacking in our approach, and one reason that our graduates opt to remain in larger urban centres."

Concluded by a delegation from Norway's National Centre for Rural Medicine. October 2007.

NOSM by Numbers

91% Percentage of entry Class of 2007 who were from northern and rural Ontario.

9% Percentage of entry Class of 2007 who identified themselves as Aboriginals.

27% Percentage of entry Class of 2007 who identified themselves as Francophones.

30 Number of inaugural participants in NOSM's first Family Medicine Residents program.

70 Number of health centres and hospitals across Northern Ontario who, through their affiliations with the North East and North West LHINs, have collaboration agreements with NOSM. These agreements allow students, faculty and staff to become immersed in the culturally diverse region they are serving.

40% Percentage of time a NOSM student will have spent studying in Aboriginal, small northern or larger urban northern communities by the time the MD program is completed.

18,000 Number of square kilometers encompassed by NOSM. Faculty, staff and students do not function in a traditional medical school building. Rather, the walls of the School are the boundaries of Northern Ontario, with two main campuses and countless communities that are linked in some way to the School.

700+ Number of part-time faculty located across Northern Ontario.

12 Number of **Comprehensive Community Clerkship** communities that support the learning objectives of NOSM by hosting all third-year NOSM students for an eight month period.

SUCCESS STORY

Oakville-Trafalgar Memorial Hospital Launches Kailo

When a hospital is made safer and healthier for the people who work there, it also becomes a better facility for the people who are being treated or who are recovering there. The health and safety of patients and health care personnel are two sides of the same coin.

Kailo (pronounced "ky-lo") began more than 10 years ago as a workplace wellness initiative at Mercy Medical Centre in North Iowa. Since then, it has received international recognition as one of the most progressive health promotion efforts in North America.

Kailo is an integrated set of workplace programs and services that were developed in a hospital environment and designed specifically to help staff survive—and even thrive—amidst the unique challenges, stresses and strains of working in a high pressure, 24/7 health care environment.

Since Kailo's launch at Halton Healthcare Services (HHS), more than 1,600 staff, physicians and volunteers have enjoyed activities that include: yoga, tai chi, other relaxation sessions, and Lunch & Learns. A one-on-one counseling program designed to help employees cope with stress, anxiety and relationship problems is so popular it has a waiting list.

> Kailo recognizes that, as caregivers, we have to take time to look after ourselves so we can reach out to others.

Definition: Healthy Work Environment (HWE)

It's a work setting that takes a strategic and comprehensive approach to providing the physical, cultural, social and job design conditions that maximize the health and well-being of health providers, the quality of patient outcomes and organizational performance.

Healthy Work Environments (HWEs)

"Caring for ourselves as well as we care for our patients"

One of the goals of HealthForceOntario is for Ontario to become the employer-of-choice in health care. By ensuring that Ontario's work environments are safe and healthy, and that workers have the support required to be able to concentrate on their patients, working in health care in Ontario can become even more appealing.

The benefits of a healthier workplace are well documented. A healthier workplace:

- Motivates health workers
- Enhances morale
- Reduces absenteeism
- Leads to better patient outcomes
- Increases overall efficiency
- Improves organizational performance, competitiveness and public image

HWEs will have a positive impact on the retention and attraction of health care workers. Patients will benefit too. Research shows that HWEs may also improve patient outcomes and quality of care.

Creating a healthy work environment is a large and complex task. Health care organizations require commitment from senior leadership to implement HWEs. We are supporting the development of the frameworks and tools that organizations and individuals need to make HWEs a reality.

"HWE has many inter-related factors. Policy, structure, social, cultural, professional, occupational—HealthForceOntario brings people together to make all these factors work for us, not against us."

John Amodeo
Director, Health Sector Labour Market Policy Branch

HWE Programs 2007

- **Occupational Health and Safety Management System** (in partnership with the Ontario Safety Association for Community and Healthcare) provides hospitals, long-term care homes and home care organizations with a step-by-step approach to achieve improved organizational safety and wellness.
- **Inter-Professional Collegiality Project** (in partnership with the Registered Nurses' Association of Ontario and the Faculty of Wellness at the University of Ottawa's Faculty of Medicine) develops assessment and intervention strategies to strengthen inter-professional team relationships.
- **E-Curriculum Project** (in partnership with the Faculty of Wellness, University of Ottawa's Faculty of Medicine) provides web-based information to health care providers on issues of workplace health, interdisciplinary professionalism, codes of conduct and standards of behaviour.
- **Kailo Wellness Program** (in partnership with Halton Healthcare Services) has been expanded to the Georgetown Hospital site of Halton Healthcare, Trillium Health Centre, and the Post Inn Village Long-Term Care home.
- **Communication/Safety Devices project** (in partnership with Toronto East General Hospital) tests voice-activated devices that enable workers to communicate with colleagues and instantly contact security staff in the event of a violent or potentially violent incident.

A second phase of initiatives delivered in partnership with the Ontario Safety Association for Community and Healthcare includes:

- Education sessions on workplace violence and safety-engineered needles
- A teleconference on workplace violence prevention involving more than 1,500 organizations
- A video on workplace violence prevention

HealthForceOntario Year 2007 in Review

1.5 Average number of days of work lost due to illness or disability; number is at least 1.5 times greater for workers in health care than in any other sector.

1,600 Number of staff, physicians and volunteers who have enjoyed Kailo workplace wellness programs at Halton Healthcare Services (HHS) since 2006.

63.8% Percentage of overall staff satisfaction at Halton Healthcare Services after Kailo, up almost 3% from 2004 despite significant staff changes due to the amalgamation of three hospitals.

33,000 Estimated number of Ontario health care workers who receive needle-stick injuries each year. The enactment of the **Occupational Health and Safety Act Regulation 474/07**, which makes safety engineered needles or needle-less systems mandatory in all hospitals, as of September 1, 2008, will reduce this number.

33% Percentage of Ontario nurses who are experiencing high "job strain".

43% Percentage of all lost-time injuries in Ontario that occur in health care as a result of musculoskeletal disorders.

5th Health care has the fifth highest lost-time injury frequency among the province's industry sectors.

Milestones

A list of achievements 2007-08

HealthForceOntario is a multi-year, collaborative strategy to provide Ontario with the right number and mix of health care providers, working in communities across the province to meet our health needs—now and in the future.

These initiatives will help Ontario identify its health human resource needs, develop new provider roles to meet our changing health needs, work closely with the education system to develop people with the right knowledge, skills and attitudes, and compete effectively for health care professionals.

Listed are some of the things we have accomplished in the past year…

January 2007

- The **first physician assistant outside of the Canadian Forces begins practicing in Ontario.** Five physician assistants, five nurse practitioners and one acute care nurse specialist are introduced to emergency department (ED) teams as part of a one-year pilot project between January and March 2007.

February 2007

- **The Nursing Graduate Guarantee portal** is launched, which matches new nursing graduates with Ontario employers. The program ensures that every new nursing graduate who wishes to work full-time in Ontario has that opportunity.
- **120 expressions of interest** of working in Ontario are gathered from Quebec medical residents at the FMRQ (Fédération des médecins résidents du Québec) Career Days. Another 500 expressions of interest are gathered at conferences throughout the U.S. before the end of the year.
- **The Access Centre for Internationally Educated Health Professionals** of the HealthForceOntario Marketing and Recruitment Agency partners with the College of Physicians and Surgeons of Ontario, the College of Nurses of Ontario, the Centre for Internationally Educated Nurses, and the College of Pharmacists of Ontario to create a coordinated approach to serving common clients.
- For the first time, **IMGs can apply directly** to residency positions.

March 2007

- **The HealthForceOntario campaign wins** best on-line physician recruitment campaign for 2007 from Healthcare Solutions.
- **Amendments are made to the Professional Misconduct Regulation** under the *Occupational Therapy Act*. The regulations help protect the public by identifying activities outside the boundaries of acceptable professional conduct and providing for disciplinary measures. Amendments to the Professional Misconduct Regulations under the *Dentistry Act*, *Denturism Act* and *Massage Therapy Act* follow throughout the year.
- **The Nursing Research Fund awards $2.5 million** to nine projects focused on the management, organization, and effectiveness of nursing human resources and services.

April 2007

- **The Centre for the Evaluation of Health Professionals Educated Abroad (CEHPEA) opens,** providing standardized evaluation and orientation services for international medical graduates, allowing them to compare their clinical competencies with those of Canadian medical graduates and improve their chances of obtaining residency positions. Several of CEHPEA's services were formerly provided by IMG-Ontario.

May 2007

- **117 employers, educators and professionals** join representatives from Local Health Integration Networks, aboriginal organizations and provincial and federal government attend *"Challenges and Solutions for Aboriginal Health".* Forum participants discuss ways to improve the retention of health providers serving First Nations, Métis, and Inuit peoples, as well as Aboriginal participation in health careers and the cultural competency of non-Aboriginal health providers.
- The Ontario Hospital Association announces the **launch of the Hospital Physician Assistant Demonstration Project** on behalf of the Ministry. 69 physician assistants and more than 20 hospitals are expected to participate.
- The ***Health Human Resources Toolkit***, a resource for understanding how the health workforce in Ontario is organized and governed, is published for LHINs and other interested parties.
- **HealthForceOntario.ca wins gold** in the category *Public Service/Non-Profit Website* from Portfolios.com Creative Awards.

June 2007

- **HealthForceOntario Marketing and Recruitment Agency is formalized** through regulation 247/06. The Agency encourages health care providers to practise in the province and fosters integration and coordination of recruitment efforts provincially and nationally. The Agency's responsibilities include recruitment and relocation services for health professionals, the HFOJobs portal, the Access Centre for Internationally Educated Health Professionals and the Emergency Department Coverage Demonstration Project.

- The ***Health System Improvements Act, 2007*** receives Royal Assent. The Act improves access and safety for Ontarians by:
  - amending the *Regulated Health Professions Act, 1991* (RHPA) to improve the efficiency and effectiveness of the regulatory framework for health professions in Ontario;
  - amending the RHPA to require regulatory colleges to collect and submit data to the Ministry for the purpose of health human resources planning;
  - amending the *Dental Hygiene Act, 1991* to permit dental hygienists to clean teeth in accordance with regulation and in the absence of contraindications;
  - amending the *Optometry Act, 1991* to permit optometrists to prescribe certain drugs for eye conditions;
  - amending the *Pharmacy Act, 1991* to support the regulation of "pharmacy technicians"; and,
  - creating **four new Acts** to regulate four additional health professions under the RHPA: Naturopathy, Homeopathy, Kinesiology, and Psychotherapy.
- The HealthForceOntario Marketing and Recruitment Agency holds **a reception in New York City for Canadian expatriate and U.S. physicians**. Dr. Sandy Buchman, President of the Ontario College of Family Physicians and George Smitherman, Minister of Health and Long-Term Care are on-hand to speak with the physicians.

July 2007

- Amendments to the ***General Regulation*** under the *Nursing Act* were made to update the list of **drugs Registered Nurse – Extended Class (Nurse Practitioners) may prescribe**.
- ***Interprofessional Care: A Blueprint for Action in Ontario*** **is released.** The recommendations contained in the Blueprint focus on the need for partnership, integration, shared responsibility, communication, foundation-building and supporting change.
- **More physicians** start their post-graduate education in the province than ever before. 352 are in training to become family physicians.
- Another new health care provider role Demonstration Project moves forward with the **hiring of five clinical specialist radiation therapists** by two cancer centres.
- A **record-breaking 235 residency positions** are offered to International Medical Graduate doctors.
- The ***Emergency Department Staffing Reference Guide*** is published and posted on the Ontario Hospital Association and HealthForceOntario websites. The guide provides information about available programs and incentives to assist with ED staffing challenges.
- The "Dashboard", a weekly indicator by hospital of the status of emergency department physician coverage, is designed and monitored by the Emergency Department Coverage Demonstration Project (EDCDP) and completed by the LHINs. **The EDCDP provides a locum pool of qualified physicians** who are committed to assisting designated, high-need Ontario hospitals cover shifts in their Emergency Departments.

August 2007

- Amendments to the ***Registration Regulation*** of the *Dentistry Act* **give Ontarians better access to oral health care** by recognizing internationally trained Dental Specialists and creating a specialty certificate for Dental Anaesthesia.
- Amendments to the ***General Regulation*** under the *Nursing Act* to **expand the existing Registered Nurse – Extended Class (Nurse Practitioners) by creating four streams**: Primary Care, Acute – Pediatrics, Acute – Anaesthesia, Acute – Adult. Amendments were also made with respect to the registration of applicants to the Registered Nurse – Extended Class who are already registered in another Canadian province and international applicants.
- Amendments to the Registration Regulation under the *Medicine Act* **protect the public** by making professional liability protection mandatory for physicians practising in Ontario and improve capacity for physician human resource planning by allowing for the mandatory collection of information through the College of Physicians and Surgeons of Ontario annual renewal form.
- HealthForceOntario's **Interprofessional Care/ Education Fund (ICEF)**, jointly administered with the Ministry of Training, Colleges and Universities, seeks proposals from the health education and health delivery sectors for projects that will build and foster teams to deliver innovative, collaborative interprofessional health services.
- The **Physician Assistant Initiative** expands to include Demonstration Projects in community health centres, long-term care facilities and diabetes clinics.
- **20 seats are added to the Midwifery Education Program** for 2007/08. Another 10 are added for 2008/09.
- The Ministry of Health and Long-Term Care, and the Ministry of Labour, introduce a new regulation under the *Occupational Health and Safety Act* to **mandate the use of safety-engineered needles or needle-less systems in all hospitals as of September 1, 2008**. The government also announced its intent to extend coverage to long-term care homes, psychiatric facilities, laboratories and specimen collection centres in 2009, and to other health care workplaces like home care, doctors' offices and ambulances in 2010.
- A **four-year, 50-seat expansion of the Primary Health Care Nurse Practitioner education program** is announced. Seats previously doubled from 75 to 150 by the fall 2006, one year ahead of schedule.
- A newspaper and Internet **advertising campaign promoting the services of the Access Centre** at the HealthForceOntario Marketing and Recruitment Agency is launched.

Milestones

CONTINUED

September 2007

- The board of directors of the HealthForceOntario Marketing and Recruitment Agency meets for the first time.
- Third-year medical students from the Northern Ontario School of Medicine start clerkships in Timmins, Sault Ste. Marie and Kenora and other communities across the North.
- More than 115 hospitals, 165 long-term care homes and 2,650 nurses are participating in the **Late Career Nurse Initiative**. The initiative helps keep late career nurses in hospitals and long-term care homes in the workforce by offering alternate, less physically-demanding roles.
- **4,200 hours of additional emergency department coverage** are provided at 31 hospitals through the Summer Shift Premium Program. The program helps keep emergency departments open by paying an hourly premium to emergency doctors for time worked above a regular work week during the busy summer months.
- Amendments to the *Dental Hygiene Act* made through the *Health System Improvements Act* allowing dental hygienists to clean teeth without an order from a dentist in the absence of contraindications came into effect.
- The first of two cohorts of International Medical Graduates (IMGs) hired for physician assistant positions **begin the Integration Program**. Over the next four months, the IMGs will complete the didactic and clinical phases of the program and become fully-qualified to begin work as physician assistants in the Demonstration Project.
- Respiratory therapists and registered nurses **begin classes in the Anaesthesia Assistant program** being offered for the second year at the Michener Institute for Applied Health Sciences. On graduation they will work as part of an interprofessional Anaesthesia Care Team at selected demonstration sites.
- **The Allied Health Professional Development Fund** is increased and the program is expanded to include dietitians, pharmacists and respiratory therapists. The Fund continues to support skill and knowledge development opportunities for medical laboratory technologists, physiotherapists, medical radiation technologists, occupational therapists, speech-language pathologists and audiologists.
- The Ministry sponsors a forum led by Colleges Ontario and the Council of Ontario Universities and the Michener Institute for Applied Health Sciences to **work towards the creation of a centralized clinical placement system**. The system would help address the shortage of clinical placements for Ontario students in the health professions.
- A Career Scientist Award is bestowed on **Dr. Michel Landry, University of Toronto**, to pursue work in the area of "Forecasting Supply and Demand for Rehabilitation Health Human Resources".
- Registrar of the Transitional Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario is appointed and tasked with preparing the administrative structures to support the **Transitional Council**, which will determine the appropriate entry to practice requirements for the profession. In addition, the Registrar is tasked to provide outreach and information meetings to traditional Chinese medicine practitioners and patients, completing nine well-attended meetings.

October 2007

- **Joshua Tepper, Assistant Deputy Minister for the HealthForceOntario strategy**, presents on Ontario's New Health Care Provider Roles and Physician Assistant Initiatives at the Canadian Association of Physician Assistants annual meeting in Ottawa.
- Acting on recommendations of the MRI & CT Expert Panel, **the Ministry funds the Michener Institute to add 20 MRI students** in a fast-track program. Program graduates will operate the increasing number of scanners in the province over extended hours of service.
- **In partnership with employer organizations,** a minimum data set for human resources in the home care and community care sectors is developed. The data will allow for health human resource planning in the sector.
- The HealthForceOntario **Healthy Work Environments Strategy is launched** and includes the following initiatives:
  - the **Occupational Health and Safety Management System** (in partnership with the Ontario Safety Association for Community and Healthcare), will provide hospitals, long-term care homes and home care organizations with a step-by-step approach to achieve improved organizational safety and wellness;
  - the **Inter-Professional Collegiality Project** (in partnership with the Registered Nurses' Association of Ontario and the Faculty of Wellness at the University of Ottawa's Faculty of Medicine), will develop assessment and intervention strategies to strengthen inter-professional team relationships;
  - the **E-Curriculum Project** (in partnership with the Faculty of Wellness at the University of Ottawa's Faculty of Medicine), which will provide web-based information to health care providers on issues of workplace health, interdisciplinary professionalism, codes of conduct and standards of behaviour;
  - the **Kailo** holistic staff wellness program (in partnership with Halton Healthcare Services) is expanded for the Georgetown Hospital site of Halton Healthcare, Trillium Health Centre, and the Post Inn Village Long-Term Care home; and
  - a **Communication/Safety Devices Project** (in partnership with Toronto East General Hospital) to test voice-activated devices that enable workers to instantly contact security staff in the event of a violent or potentially violent incident.
- Posters, television, radio and web advertisements placed across the GTA result in a **significant increase of clients at the Access Centre for Internationally Educated Health Professionals** at the HealthForceOntario Marketing and Recruitment Agency.

November 2007

- The HealthForceOntario Marketing and Recruitment Agency launches a **direct mail campaign targeting 8,241 physicians** who are registered to practice in Ontario or have another Canadian connection but are living elsewhere.

December 2007

- Building on the ***Blueprint for Interprofessional Care***, the Ministry forms an **Interprofessional Care Strategic Implementation Committee** that includes experts in the fields of policy, education, practice and regulation.
- The $6.1 million **Interprofessional Care/Education Fund** funds 48 projects province-wide. The successful projects link the health education and health care delivery sectors, involve two or more health professional roles and advance the principles of interprofessional care.
- The **Waterloo Regional Campus** of McMaster University's Michael G. DeGroote School of Medicine welcomes its first fifteen students.
- The **Allied Health Human Resources Database Project** and the **Primary Care Forecasting Model** are presented at the Health Human Resources Conference hosted by the Canadian Institute for Health Information.
- An **Interview Skills Workshop for IMGs** registered for the 2008 CaRMS match is held at the Access Centre for Internationally Educated Health Professionals; more than 100 clients attend.

January 2008

- **HealthForceOntario.ca** receives 87,000 visits since its launch in December 2006.
- Amendments are made to the ***Notice of Open Meetings and Hearings Regulations*** under the *Optometry Act*, *Dietetics Act*, *Respiratory Therapy Act* and *Dental Hygiene Act* to ensure the public is informed about discipline hearings of these professional colleges.
- A new regulation under the *Dental Hygiene Act* establishes records management standards for the members of the College of Dental Hygienists of Ontario to ensure that patients' personal information and financial information are appropriately collected, as well as ensuring equipment servicing information is maintained.
- The one-year pilot to introduce physician assistants and nurses to emergency department teams winds down. The project evaluation finds that the introduction of these provider roles resulted in shorter wait times, shorter stays in EDs and fewer patients leaving without being seen. The project positions are extended in light of the project's success.
- The Research Chair Selection Panel selects **McMaster University to establish Ontario's permanently endowed Research Chair in Health Human Resources**. The ministry-funded Chair will help ensure Ontario has the right number and mix of health professionals by increasing health human resources research capacity and supporting evidence-based policy and planning.
- **A project to develop a needs-based forecasting model** to predict supply and need for physician human resources is undertaken in partnership with the Ontario Medical Association. The Conference Board of Canada is engaged to develop the model.
- **20 LHIN and Ministry representatives receive tools** for evidence-informed HHR planning at the *Evidence for HHR Planning* workshop, hosted by the Forecasting and Modelling unit at the Health Human Resources Strategy Division.
- The Access Centre of the HealthForceOntario Marketing and Recruitment Agency, with the University of Toronto and Ryerson University, pilots **a 30-hour course for Internationally Educated Health Professionals** entitled, *"Orientation to Canadian Health Care Systems, Culture and Context"*.

February 2008

- A long-term strategy is launched to bring the Allied Health Human Resources Database into full operation, including the annual collection of data from all allied health regulatory colleges.
- The Healthy Work Environments strategy launches a second phase of initiatives, including:
  - A partnership with the Ontario Safety Association for Community and Healthcare to deliver:
    - **education sessions on workplace violence and safety-engineered needles** for staff in the acute, long-term and home care sectors at 14 locations across the province.
    - **a teleconference on workplace violence prevention** involving more than 2,000 participants from over 400 organizations.
    - **a video on workplace violence prevention** to address the four types of workplace violence, and provide an overview of the supports and infrastructure available to address them.
  - A partnership with the Ontario Hospital Association to deliver:
    - **a series of conferences on the forms of workplace violence**, and the resources needed to develop an effective workplace violence prevention program.
    - **a series of video-conferences and site visits** on addressing disruptive physician behaviour.
  - A partnership with Accreditation Canada to explore ways to **improve violence prevention in the workplace** and investigate the inclusion of standards that address workplace violence into its Qmentum accreditation program.

March 2008

- **More than 2,600 Ontario nursing graduates have matched with employers** through the Nursing Graduate Guarantee, a program to give every graduating nurse who wishes to work full time in Ontario the opportunity. Preliminary data from more than 165 employers indicate that 86 per cent of those who completed the program have secured permanent full time employment.
- The Access Centre of the HealthForceOntario Marketing and Recruitment Agency **surpasses its target of 3,250 registered clients**. Since its launch, the Centre has had more than 9,500 encounters with clients and 1,000 encounters with stakeholders. More than 500 clients have participated in the International Medical Graduate Program.
- **64 physician assistants have been hired** as part of the Physician Assistant Demonstration Project to work in 21 hospitals, five community health centres, three diabetes care clinics and three long-term care facilities.
- **12,000 hours of ED physician coverage have been provided** through the Emergency Department Coverage Demonstration Project since October 27, 2007. 62 hospitals have received locum assistance and/or advice on emergency department staffing.
- **717 undergraduate medical students** at the province's southern medical schools have completed clerkships in a rural Ontario community.

HealthForceOntario

12th Floor, 56 Wellesley Street West,
Toronto, Ontario M5S 2S3
j.tepper@HealthForceOntario.ca

Ontario