HFO

RADIUS

Putting evidence at the centre of health human resources planning.

HealthForceOntario

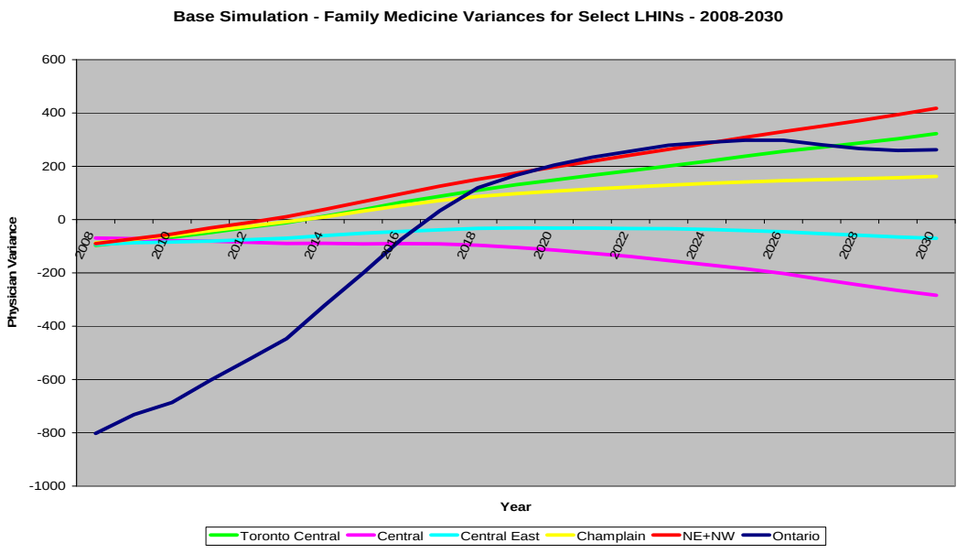
The Ontario Ministry of Health and Long-Term Care (MOHLTC) in partnership with the Ontario Medical Association (OMA) hired the Conference Board of Canada to develop a needs-based simulation model to project future supply of and need for physicians in Ontario. It compares the supply of physician services to the population's need for health services to quantify a gap in services and translate the gap into a physician requirement.

This model is able to improve understanding of the impact of policy interventions on physician supply and its appropriateness measured through population health needs. Need for physician services are based on how various socio-economic and lifestyle risk factors in the population (e.g. smoking) will contribute to the incidence and prevalence of various conditions in the future (e.g. lung cancer). Supply of physician services are based on the flow of physicians from the education system to practice and physician survey response data regarding how much time each practising physician specialty spends treating these conditions. The model development is complete and more details are available at http://www.healthforceontario.ca/WhatIsHFO/evidence_hhr/physician_simulation_model.aspx.

Key Findings

The model uses a variety of data sources in conjunction with specially formed expert panels and a survey of physicians in Ontario specifically designed for this project.

- The survey results reported that 'Mental and Behavioural Disorders' is the condition treated most frequently by Ontario physicians.
- Expert panel results suggest that the incorporation of nurse practitioners into family physicians' practices can increase the total number of patients treated by the practice.
- Base case simulation results indicate that need for physician services vary by specialty and Local Health Integration Network (LHIN) over time.



- The base simulation projects the provincial shortage of family physicians to end by 2013.
- However certain LHINs are projected to continue to experience a shortage of family physicians.

The Limitations

- It is important to note that the model does not measure patient outcomes or the quality and effectiveness of care delivered.
- This model is one of many pieces of evidence available to support HHR planning and the results should always be combined with other evidence (both qualitative and quantitative) when developing policies.

Next Steps

The MOHLTC and the OMA will consult with experts to:

- Review certain data and assumptions in the model.
- Examine alternate simulations and work with health system experts to further understand results and implications for workforce planning.

Health Human Resources Policy Branch

Forecasting and Modelling Unit