

## NEWFOUNDLAND AND LABRADOR MEDICAL ASSOCIATION

## Health Accord will not fix physician crisis in rural communities; doctors call for immediate rescue plan

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**St. John's, NL** – The NLMA is calling on the provincial government to immediately implement a plan to rescue rural health centres that are in crisis.

Rural health centres are designed to have physicians on-call and available in-person 24 hours a day to provide emergency care. These doctors also provide family medicine and treat patients in long-term care. This is the standard of care for people who live in rural regions. However, many rural health centres throughout the province can no longer deliver sustainable medical services because the physician workforce has become so destabilized.

"The situation is not sustainable. The number of vacancies is now at crisis proportions and getting worse," said NLMA President Dr. Susan MacDonald.

"The situation in the Central region is particularly desperate with multiple sites reduced to one doctor. We anticipate that within the next 1-3 months, several of these sites will have no doctors at all. If the government does not step in immediately with a plan to rescue these sites, it will be too late. For some communities it may already be too late."

Central Health has responded by creating virtual emergency services where doctors in Grand Falls-Windsor or Gander are available by video-link to nurses in smaller sites when a patient arrives at the ER. This is a short-term fix and partial substitute for the proper standard of care. Central Health has confirmed that sometimes not even virtual ERs are available, and they use the "last resort" which is to divert patients by ambulance to Grand Falls-Windsor or Gander. These measures take physician resources away from patients in the larger towns and is now threatening to destabilize these sites as well where multiple physicians have already departed.

"That is the state of rural health care right now – using the last resort," said Dr. MacDonald. "This crisis is made worse by the shortage of family doctors. If patients had access to a regular family doctor to manage their diabetes, treat their cancer pain or address their mental health needs, they would not be forced to rely on the ER to treat a preventable illness."

When Premier Andrew Furey was asked in the House of Assembly on April 5 about the reduced emergency services and lack of physicians in the health centres in Fogo, St. Albans, Twillingate, Springdale, Baie Verte, Buchans, Harbour Breton, New-Wes-Valley, Bell Island and other sites, he replied "that's exactly why we put the Health Accord in place."

"The Health Accord is not a solution for the physician shortages in these health centres. The Health Accord is a 5-10 year plan for re-orienting the health system. It cannot work if the physician workforce is missing. This problem must be solved first," said Dr. MacDonald.

"The NLMA calls on the provincial government to develop a rescue plan to staff these rural sites with physicians. Virtual care ERs and diversions must become the exception, rather than the norm. We cannot wait 12-24 months for new recruitment plans to be implemented to address the immediate needs of these communities. We need a solution now."