



ENHANCING PRIMARY CARE AND GENERAL PRACTICE AS A CAREER CHOICE: THE CANADIAN EXPERIENCE

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POLICY CONTEXT

Workforce projections suggest a fall in the number of full-time equivalent general practitioners/family physicians over the next decade unless more doctors choose general practice as a career. Canada is having similar problems to Australia in this respect. This paper explores the ways in which Canada is trying to overcome this problem in order to offer recommendations for Australia. In particular there is a move towards more team-based interprofessional care delivery in Canada, with new models of funding. It is important to find out whether health professionals are more or less attracted to a career in primary care and community settings because of this reform in health care provision.

KEY FINDINGS

- Recruitment into rural areas of Canada is difficult and initiatives to increase the rural workforce include rural placements for students, the establishment of rural medical schools and inducements for rural practice.
- Family medicine is recognised increasingly as being concerned with team-led.
- Practitioners recognised that team models of care will require a change in the remuneration system for health professionals.
- Family health teams provide a new model of care in Ontario and exist in different forms with varying numbers and types of health professionals.
- The role of nurse practitioners is evolving and they are involved in various aspects of care.
- For medical and other health professional students suburban and rural practice attachments give a better indication of the possible scope of practice and are more likely to give students an experience of collaborative care provision.
- The amount and consequent impact of interprofessional education and learning about teamwork varied across programs and schools, but was recognised as an important component of modern healthcare education.
- Important factors relating to choice of family medicine are the age that medical students qualify and then the length of time of a residency. The family medicine residency is only two years compared to five or more for other specialties, making it highly attractive to some newly qualified doctors.
- Other positive factors relating to family medicine are the flexibility, lifestyle and variety of the work, with remuneration being less important.
- Interprofessional practice, or team-based care, is a factor relating to choice for many professionals.

For more details, go to the [three page report](#).

The research reported in this paper is a project of the Australian Primary Health Care Research Institute, which is supported by a grant from the Australian Government Department of Health and Ageing under the Primary Health Care Research, Evaluation and Development Strategy. The information and opinions contained in it do not necessarily reflect the views or policies of the Australian Government Department of Health and Ageing.