

FAMILY MEDICINE: ROLE IN RURAL...

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FAMILY MEDICINE ROLE IN RURAL

Disclosure

Disclosure of Affiliations, Financial Support, and Mitigating Bias

Speaker Name: James Rourke

Affiliations:

List relationships with for-profit or not-for-profit organizations:

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FAMILY MEDICINE ROLE IN RURAL EVERYTHING... and now COVID-19!

Synopsis

- **Rural family doctors function as rural generalist practitioners responding to the needs of their rural communities as an essential part of rural health care team and supporting network**
- **RFPs/RGPs provide frontline primary care for everything and now Covid-19**
- **RFPs/RGPs also provide secondary care that in large cites is usually provided by specialists & stabilize and manage transfers for tertiary care**

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Learning Objectives

- 1. Participants will define rural medicine and remote medicine context**
- 2. Participants will identify extended family doctor/RGP (rural generalist practitioner) roles to meet the health care needs of rural communities**
- 3. Participants will identify preparation/learning/training pathways for extended family doctor/RGPs role in rural**
- 4. Participants will identify ways that rural health systems could be improved to support the extended role of family medicine/RGP in rural communities**

1. RURAL MEDICINE

Functional definition....

**“Medical care provided where
access to specialist care and specialized resources
is limited or distant”**

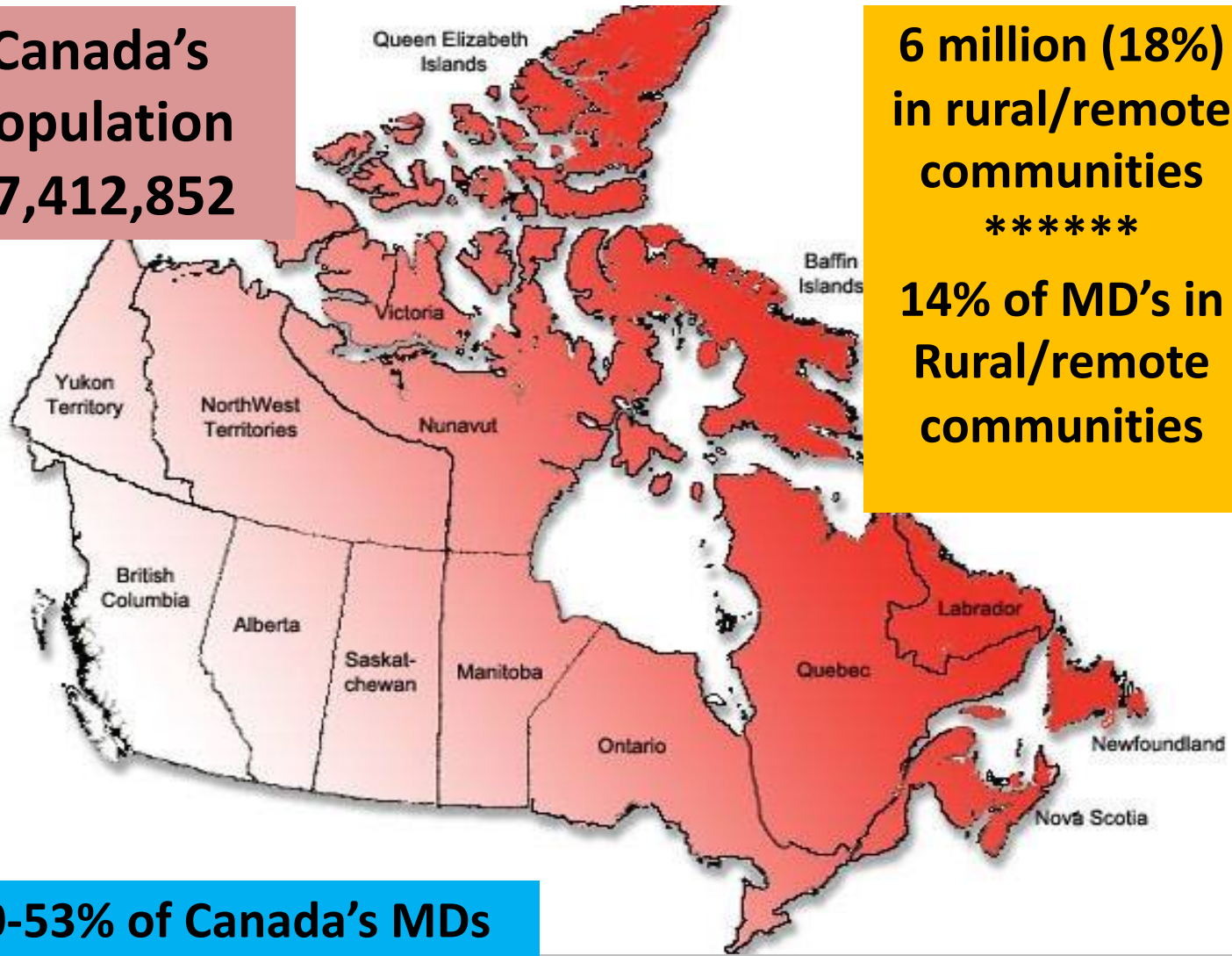
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The one-fifth of Canadians (18%) living in rural and remote communities have difficulties accessing health care services. Many Indigenous people live in rural and remote communities and are a specific demographic affected by the lack of access to health care services

THIS IS SIMILAR TO MANY OTHER COUNTRIES

1. RURAL MEDICINE IN CANADA

**Canada's
Population
37,412,852**



**6 million (18%)
in rural/remote
communities**

**14% of MD's in
Rural/remote
communities**

**50-53% of Canada's MDs
are Family Physicians**

Canadian Institute for Health Information, 2018

1. REMOTE MEDICINE

Functional definition....

**“Medical care provided where/when
transfer access to in-time
specialist care and specialized resources
is high-risk or impossible...”**

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REMOTE MEDICINE EXAMPLES



Nain, NL
(Latitude 56° 33' N, Longitude 61° 41' W)



Happy Valley Goose Bay
Latitude 53° 19' N, Longitude 60° 22' W

2. RURAL GENERALIST PRACTITIONER (EXTENDED FAMILY DOCTOR/GP)

Roles:

- Family medicine has a broad and deep professional profile
- Family doctors provide comprehensive medical care for all people, ages, life stages, and presentations
- Family doctors in health care teams provide a system of front-line health care that is accessible, high-quality, comprehensive, and continuous

College of Family Physicians of Canada. Family Medicine Professional Profile. Mississauga, ON: College of Family Physicians of Canada; 2018

College of Family Physicians of Canada. Patients Medical Home 2019

2. RURAL GENERALIST PRACTITIONER (EXTENDED FAMILY DOCTOR/GP)

Roles:

- The rural setting requires family medicine's role to be more than primary care.

Wilson R. Family Medicine- More than Primary Care. WONCA Global Family Doctor December 2019.

- This needs-based role is driven by the rural community context
 - including its population determinants of health and
 - burden of illness as well as
 - access, time and distance to specialist services.
- Rural generalist practitioners are family doctors/GPs who provide an extended scope and depth of health care to meet the needs of patients in their rural communities.

2. RURAL GENERALIST PRACTITIONER (EXTENDED FAMILY DOCTOR/GP)

Roles:

- **Rural generalist practitioners are family doctors who may require additional skills in areas as diverse as**
 - indigenous cultural competency,
 - intra-partum maternity care,
 - emergency care,
 - transport skills,
 - anaesthesia,
 - hospitalist care,
 - essential surgical services
 - and public health etc. ...

2. RURAL GENERALIST PRACTITIONER (EXTENDED FAMILY DOCTOR/GP)

Rural/remote Medicine Vital Extended Services:

- Rural Generalist Physician (RGP)
- Emergency Medicine (EM)
- Family Practice Anaesthesia (FPA)
- Essential Surgical Skills/Obstetrical Surgical Skills (ESS-OSS)
- Intrapartum Maternity Care (OB)



2. RURAL GENERALIST PRACTITIONER (EXTENDED FAMILY DOCTOR/GP)



Roles:

Rural Practice is excellent preparation for crisis & humanitarian work

Haiti Earthquake

January 12, 2010:
225,000 died,
1.5M homeless



TEAM BROKEN EARTH
HAITI February 2012
AT BERNARD MEVS
HOSPITAL



James Rourke

3. PREPARATION/LEARNING/TRAINING PATHWAYS

For Family Doctor/RGP role in rural:

Rural family doctors/RGPs need to develop

all core family medicine competencies

-for example in Canada, the CFPC Triple C Competency Based Curriculum forms the core of all family postgraduate residency/vocational training programs

+ rural medicine focused competencies

-for example in Canada, the

CFPC Priority Topics for the Assessment of Competency in Rural and Remote Family Medicine

-for example, the Australian College of Rural & Remote Medicine has developed comprehensive rural medicine Curriculum and requirements

3. PREPARATION/LEARNING/TRAINING PATHWAYS

For Family Doctor/RGP role in rural:

All rural family doctors/RGPs need to develop knowledge and skills

- needed to meet their rural community's evolving needs**
- this requires a variety of continuing medical education strategies often including distance learning**

Some rural family doctors/RGPs need to develop

-specific knowledge and skills to do procedures that in large cities are usually done by specialists, for example:

- Family Practice Anaesthesia (FPA),
- Obstetrical Surgical Skills (OSS),
- Enhanced Surgical Skills (ESS)

see CFPC [FPA](#), [OSS](#), [ESS](#) and [Australian College of Rural & Remote Medicine](#)

3. PREPARATION/LEARNING/TRAINING PATHWAYS

For Family Doctor/RGP role in rural:

Key point!

Developing the knowledge, skills and contextual judgement

to be a competent rural generalist practitioner

-> requires rural contextual experiential learning and on-site adaptability

Key point!

Developing competent rural generalist practitioners

-> is best done by co-ordinated rural medical educational programs that recruit students from rural communities, provide rural experiential learning in medical school and rural residency/vocational training, and support rural practice with ongoing mentorship and lifelong learning

Memorial example 1 & 2

4. IMPROVING RURAL HEALTH SYSTEMS AND ROLE OF Rural Generalist Practitioners (Extended Family Doctors/GPs)

GOAL:

Patient-centred team-based care models for rural communities that provide access to

- safe and effective care as close to home as possible**
- the right care in the right place at the right time**

THIS REQUIRES:

- skilled local health care team with appropriate facilities and equipment**
- regional networks of care to support local health services**
- distance technology to enhance and expand local capacity**
- timely transfer of patients requiring specialized care that exceeds local capacity**

4. IMPROVING RURAL HEALTH SYSTEMS AND ROLE OF Rural Generalist Practitioners (Extended Family Doctors/GPs)

Implementation:

Improving rural health systems will vary from country to country and indeed within countries depending on:

- **Determinants of health**
- **Geography and demography**
- **Workforce development**
- **Overall health system structure**
- **Political and economic considerations**

4. IMPROVING RURAL HEALTH SYSTEMS AND ROLE OF Rural Generalist Practitioners (Extended Family Doctors/GPs)

Implementation:

Key Point!

Just as every country needs a pandemic plan (e.g. for COVID-19) , every country needs A RURAL HEALTH CARE PLAN that applies a rural lens to all overall health care planning and specific planning for necessary rural resources, infrastructure and workforce

WHO Fourth Global Forum 2017

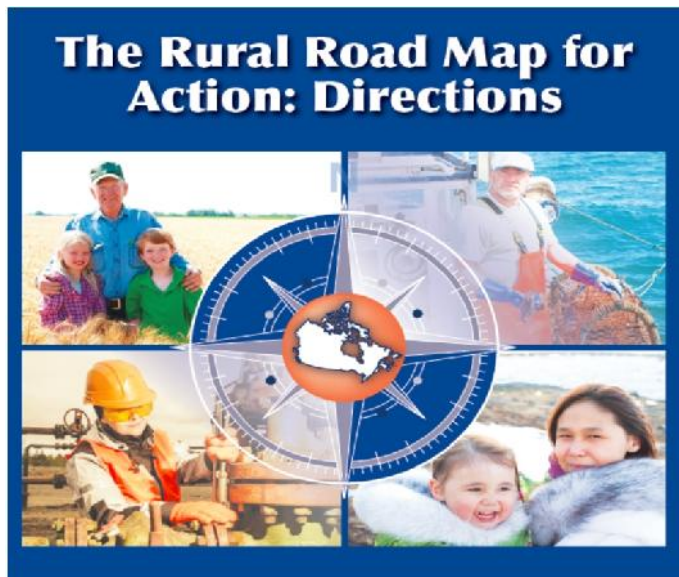
Dublin Declaration on Human Resources for Health: Building the Health Workforce of the Future

“5. Emphasize the fundamental importance of a competent, enabled and optimally organized and distributed health and social workforce, **especially in rural and under-served areas** for the strengthening of health system performance and resilience”

4. IMPROVING RURAL HEALTH SYSTEMS AND ROLE OF Rural Generalist Practitioners (Extended Family Doctors/GPs)

Implementation:

Will require collaborative action of multiple Stakeholders including rural communities, physicians and other healthcare providers, health care organizations and governments at all levels.



The Rural Road Map Implementation Committee is a stakeholder collaborative led by the College of Family Physicians of Canada and the Society of Rural Physicians of Canada.

“Our purpose is to work collaboratively to implement the Rural Road Map for Action that will improve equitable access to safe, quality health care closer to home for rural Canadians.”

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Conclusion

- **Rural family doctors function as rural generalist practitioners responding to the evolving needs of their rural communities as an essential part of rural health care team and supporting network**
- **RFPs/RGPs provide frontline primary care for everything and now Covid-19**
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Conclusion

- **Rural family doctors function as rural generalist practitioners for everything and now Covid-19, and need:**
 - **Comprehensive rural focused medical education and specific training**
 - **A well supported rural health care team with appropriate facilities and equipment**
 - **Regional support to enhance and expand local capacity**
 - **Access for patients to specialized care when exceeds local capabilities**
 - **Multi-stakeholder rural healthcare planning for Covid-19 and everything else**

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Thank you