



News Release

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ONTARIO-FUNDED AND -TRAINED MEDICAL SPECIALIST GRADUATES LEAVING PROVINCE TO PRACTISE ELSEWHERE, AUDITOR GENERAL SAYS

(TORONTO) Many Ontario-funded and -trained medical specialist graduates leave the province for employment opportunities, at the same time as there are often lengthy waiting lists for the very surgical services they've been trained to perform, Auditor General Bonnie Lysyk says in her *2013 Annual Report*.

"It costs the province \$780,000 on average to train a medical specialist, including up to five years of postgraduate residency training. But about a third of Ontario-funded graduates with surgical specialties—neurosurgeons and cardiac, orthopaedic, paediatric and general surgeons—don't stay and practise here," Lysyk said today following release of the Report.

In the meantime, waits for some orthopaedic surgeries, for example, are as long as 326 days (forefoot) and 263 days (cervical disc) following a specialist's assessment. The Ministry of Health and Long-Term Care (Ministry) and the Ministry of Training, Colleges and Universities developed the HealthForceOntario Strategy in 2005/06 to address concerns over shortages of physicians and nurses, and long wait times. The Strategy was created to ensure that Ontario maintains the right number, mix and distribution of qualified health-care providers. Total expenditures for the Strategy in 2012/13 were \$738.5 million, and the Ministry has spent \$3.5 billion on it over the last six years.

Overall, however, Ontario has not met its goal of having the right number, mix and distribution of health-care professionals to meet its health-care needs, despite the fact there in 2012 there were 18% more physicians than in 2005, and 10% more nurses than in 2006.

Following are some of the Auditor General's significant findings:

- While the province was able to increase the number of physicians, access to health care is still a problem for some, especially in northern, rural and remote areas of the province. As of 2011, only 5% of Ontario physicians practised in rural areas, but 14% of the population lived in rural areas.
- Locum programs, which are meant to cover short-term physician vacancies in eligible communities, particularly in Northern Ontario, are instead being used for long periods of time. At the time of the audit, there were about 200 specialist vacancies in Northern Ontario, and a third of the hospitals had been using temporary physician services continuously since 2007.
- The Nursing Graduate Guarantee Program provides organizations with funding for up to six months with the expectation that they will offer permanent, full-time jobs to participating new graduate nurses. However, only about a quarter of these new graduate nurses in 2010/11 and a third in 2011/12 were offered permanent full-time jobs.

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