

Frequently Asked Questions

Rural General Practitioner and Specialist Locum Programs

1. What consultation was undertaken for the development of the changes to the rural locum programs (Rural GP Locum Program (RGPLP) and Rural Specialist Locum Program (RSLP))?

Through the fall of 2007 and winter/spring 2008, the Joint Standing Committee on Rural Issues (JSC) conducted a comprehensive consultation process on changes that might further strengthen the attractiveness of living and practicing medicine in rural communities throughout BC. A provincial Rural Practice Visioning Day was conducted in Vancouver in January 2008 with more than 80 attendees representing rural physicians and mayors of small rural communities. Also considered were the ongoing opinions and views expressed to the JSC, which is made up of the British Columbia Medical Association (BCMA), the Ministry of Health Services (MoHS) and Health Authorities.

2. How does a community qualify for locum assistance?

For assistance through the RGPLP, the community must be a Rural Subsidiary Agreement (RSA) community with 7 or less general practitioners practicing in the community. For assistance through the RSLP, the community must be a designated RSLP community.

3. Why are the numbers of days of locum coverage available to host physicians and the daily rates payable to GP Locums stratified by community under the RGPLP?

The intent is to encourage physicians providing GP locum services to give a higher priority to supporting rural physicians living and practicing in the most vulnerable rural communities in accordance with Article 7.3 of the RSA negotiated between the MOHS and the BCMA.

	Max Days Locum Coverage for Host Physicians	Income Guarantee to Locums
A Communities =	43 days per year	\$900 per day
B Communities =	38 days per year	\$850 per day
C Communities =	33 days per year	\$800 per day
D Communities =	28 days per year	\$750 per day

4. How do I find out which communities are grouped into categories A, B, C or D?

You can access the community list in PDF format on the BCMA website:

www.bcma.org/files/RSA_Community_Designation_RGPLP-22AUG08.pdf or the MoHS website:
www.health.gov.bc.ca/pcb/pdf/rsa_community.pdf

5. Why are additional amounts only paid to GP locums who provide locum relief to host GPs providing General Surgery, Anaesthesia, ER, Obstetric services in rural hospitals? Were GP locums with other enhanced skills considered?

Feedback from rural physicians, communities and health authorities indicated that general surgery, anaesthesia, ER, and obstetrics are essential core services required to maintain the operational viability of small rural hospitals. The JSC focussed on these core skills at this point in time in order to support the operation of hospitals in rural communities. The JSC is planning to

investigate the feasibility of potential future changes within its available funding envelope that might include GPs with other enhanced skills that may be required in rural communities.

6. I am a GP locum with one or more of the specified enhanced skills (general surgery, anaesthesia, ER, OB), but the rural community hospital does not require that I provide these services. Do I receive the enhanced skill premium?

To receive the enhanced skill premium, the GP Locum must be filling in for a host physician GP who is providing those specific services (general surgery, anaesthesia, ER, Obstetrics) to a rural hospital in a RSA community.

7. I am a specialist, but my specialty is not included in the list of eligible specialties for the RSLP.

No change at this time was made to the list of eligible specialties for the RSLP. The JSC will, however, continue to revisit the possibility of including more specialties in the future.

8. I am a specialist, but my community is not included in the list of communities eligible for the RSLP.

At this time no decision has been made to change the communities eligible for the RSLP. The JSC is however, actively looking at ways in which the RSLP might be revised to better support health care service delivery in rural areas.

9. I am a locum and I have already booked my locum coverage through the Rural GP Locum Program for a period after the October 1, 2008 implementation date for the program enhancements. What rate will I receive?

You will receive the new rates.

10. If I do a general practice locum assignment that requires more than one of the core skills sets identified and I am able to provide all of those skill sets, what would my daily rate be after October 1, 2008?

The maximum rate for general surgery and/or anaesthesia skills is \$100 per day. The maximum rate for ER and/or OB skills is \$50 per day. The maximum daily rate, regardless of the number of skills (i.e. general surgery, ER and OB), is \$100.

11. How do I become a locum?

You can review the program requirements for both the RGPLP and RSLP and access the Application to Provide Rural GP Locum Services or Specialist Locum Services by visiting the Ministry of Health Services website www.health.gov.bc.ca/pcb/rural.html

12. Who can I contact if I have any questions?

If you have detailed questions, you can contact Physician Compensation, Rural Practice Program at the BC Ministry of Health Services by telephone at 250-952-1104. General information is available from the MoHS website: www.health.gov.bc.ca/pcb/rural.html