



CORPORATION OF THE TOWNSHIP OF ESQUIMALT

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REQUEST FOR DECISION

DATE: September 23, 2022

Report No. DEV-22-093

TO: Laurie Hurst, Chief Administrative Officer

FROM: Mikaila Montgomery, Planner and James Davison, Manager of Development Services

SUBJECT:

Family Doctor Shortage - Municipal Strategies

RECOMMENDATION:

That Council receive Report No. DEV-22-093 for information.

RELEVANT POLICY:

Official Community Plan Bylaw, 2018, No. 2922

Zoning Bylaw, 1992, No. 2050

Local Government Act

Community Charter

Municipal Act

Hospital Act

STRATEGIC RELEVANCE:

Healthy, Livable and Diverse Community: Support community growth, housing, and development consistent with our Official Community Plan

BACKGROUND:

Context

Doctors of BC estimates that approximately 100,000 patients in the Greater Victoria Area are without a Family Physician. Patients without a Family Physician rely on walk-in clinics and Urgent Primary Care Centres to provide care. Recent clinic closures in the Greater Victoria Area have further exacerbated the issue, limiting access to the population's primary care needs. A recent survey by the South Island Division Family Practice indicates that an additional 15 Family Physicians in the South Island intend to retire in the next 5 years which will leave an additional 22,500 patients without primary care. Esquimalt presently has one Urgent and Primary Care Centre and one walk-in clinic.

Urgent and Primary Care Centres, intended to provide additional access to primary care, have received over \$8 million in funding from the CRD in the last two years. While these centres are helpful, they are not able to meet the demand of the community and continue to suffer from healthcare staff shortages. Shortages are also causing long wait times that are double the national average (2.5 hours according to Medimap.ca, an online service which estimates wait times for walk-in medical clinics in real-time).

Reasons for the Family Physician shortages and clinic closures include but are not limited to:

- Outdated fee-for-service billing resulting in low take-home earnings and hours of unpaid work
- Physicians retiring who are unable to recruit others to take over their practice
- Family practice overhead costs of 30-40% including rent
- Administrative burdens of running a business
- Little to no vacation, 70-hour work weeks, and no benefits, resulting in burnout
- Licensing challenges (long processing times, high fees) that make it difficult for out-of-province Physicians to work in British Columbia

These issues are primarily within the jurisdiction of the Provincial and Federal Governments. The Ministry of Health and Doctors of BC are in discussion about these system-wide issues and the Provincial Government has asked for more funding from the Federal Government for healthcare.

Summary

The South Island Division of Family Practice intends to embark upon an aggressive recruitment strategy and has asked municipalities to consider how they may assist with Physician recruitment and retention. Municipalities are asked to consider the following strategies:

- Contributing to a community fund to share costs for the recruitment of Family Physicians
- Low/no rent community spaces to house Family practices
- Some form of rent and/or tax relief
- Accommodation for visiting Physicians and Family Medicine Residents
- Bulk purchasing for office and medical equipment and supplies
- Group benefits for Physicians and their staff
- Human Resources support

Potential Strategies for the Township of Esquimalt

Support for Non-profits

The Community Charter generally prohibits municipalities from providing support to businesses. In

British Columbia, since most family doctor clinics are considered privately-owned businesses, municipalities are not allowed to provide them financial assistance. However, municipalities are allowed to aid not-for-profits. Therefore, a not-for-profit organization, such as a Community Health Centre, could receive financial and other support from the Township.

Community Health Centres (CHCs) are community governed, not-for-profit organizations which bring a multi-disciplinary approach to providing team-based primary health care. There are at least two successful examples in the CRD:

1. The Westshore Community Health Centre (WSCHC) is a new multidisciplinary primary care centre operated by Pacific Centre Family Services Association (PCFSA) which is designed to bring low-barrier, trauma-informed coordinated care to the underserved populations of the Westshore. PCFSA has been operating for 50 years.
2. In Sidney, Shoreline Medical is owned and operated by a charitable non-profit called Shoreline Medical Society since 2016. The Society receives funding from the Saanich Peninsula Hospital and Healthcare Foundation, providing support for clinic space, equipment, and infrastructure. Sidney Council provided the Society with an initial \$190,000 loan to get started.

Township of Esquimalt Grants / Exemptions

1. Grants

The Township could support a not-for-profit organization through existing community funds, density bonusing contribution at time of rezoning for new developments, and/or tax exemptions. Local Grant Policy states that "...funding is intended for the purpose of facilitating programs, projects, and events. The following are not eligible for grant funding: Activities and costs considered the responsibility of other governments."

Staff believes that it is in the public benefit for the residents of Esquimalt to have adequate health care options.

2. Permissive Tax Exemption

A permissive tax exemption is a means for Council to support community organizations which further Council's objectives of enhancing quality of life (economic, social, cultural) and delivering services economically.

Eligibility: Not for profit corporation OR exempt in the *Community Charter* - Section 220 Statutory Exemptions (k) land and improvements for future hospital requirements that are

- (i) designated for the purposes of this section by the minister responsible for the *Hospital Act*, and
- (ii) vested in, or held by, a society or corporation that is not operated for profit and that has as an object the operation of a hospital.

3. Housing

The housing crisis has further impacted the Physician shortage on Vancouver Island and across BC. Local Doctors are struggling to find housing and stay in housing (especially renters). The community of Princeton has leased a townhouse that is available for doctors (locums) to stay in while they work in the community. The Town of Nakusp bought a \$28,000 home in the hopes of enticing a doctor to relocate. The Township could consider support for housing Doctors in Esquimalt through:

- (a) short term housing for locums and/or transition housing while longer term housing is found, and
- (b) Long term housing for Residents and Physicians wanting to stay in the community.

Note that units could be provided within new developments at the time of rezoning as a density bonusing provision secured through a housing agreement bylaw.

4. Clinic Space

It is not clear whether space is an issue in Esquimalt. However, the Township could provide support by finding and securing clinic space:

- (a) Township-owned buildings/spaces - explore town-owned properties for potential.
- (b) New private commercial spaces are in development. The Township cannot help with rent but can prioritize zoning uses for medical practice.
- (c) Clinic space could be provided in new developments at the time of rezoning.

Regarding the other suggestions from the South Island Division of Family Practice, the provision of bulk purchasing for office and medical equipment and supplies, group benefits for physicians and their staff, and human resources support, there is likely little that the Township can realistically provide.

ISSUES:

1. Rationale for Selected Option

There are concrete things a local government may provide to increase the access to family doctors and medical care in the municipality, which is reaching crisis level here and across the province.

2. Organizational Implications

This request for decision has no organizational implications.

3. Financial Implications

The proposed options may lead to funds being directed from other municipal initiatives and grant recipients in order to fund local health care facilities.

4. Sustainability & Environmental Implications

The provision of health care for residents increases the community's sustainability.

5. Communication & Engagement

Staff reached out to some local family physicians who echoed the South Island Division of Family Practice strategies.

ALTERNATIVES:

- 1) That Council receive Report No. DEV-22-093 for information.
- 2) That Council request additional information from staff.
- 3) That Council provide alternate direction to staff.