



# Key Performance Indicators

Related to the 2003 – 2004  
Annual Report of the Alberta  
Rural Physician Action Plan



*This is the first annual report on key performance data for selected programs of the Alberta Rural Physician Action Plan (RPAP)*



## About the Rural Physician Action Plan

The RPAP was established in early 1991 by the Alberta Government as a comprehensive action plan for the education, recruitment and retention of rural physicians.

Since the Plan's inception, an integrated and comprehensive series of initiatives have been implemented on the basis of influencing physicians' decisions about moving to and remaining in a rural Alberta community. To achieve its vision of "having the right number of physicians in the right places, offering the right services in Rural Alberta," the organization works in collaborative partnerships to offer a sequential series of initiatives in rural medical education, recruitment and retention. Please see the RPAP website at [www.rpap.ab.ca](http://www.rpap.ab.ca) for information related to RPAP programming.

RPAP focuses its programming on three target audiences:

- Medical students and residents,
- Currently practicing rural physicians and their families, and
- Regional Health Authorities (RHAs) and their partner rural communities.

### Key Performance Indicators

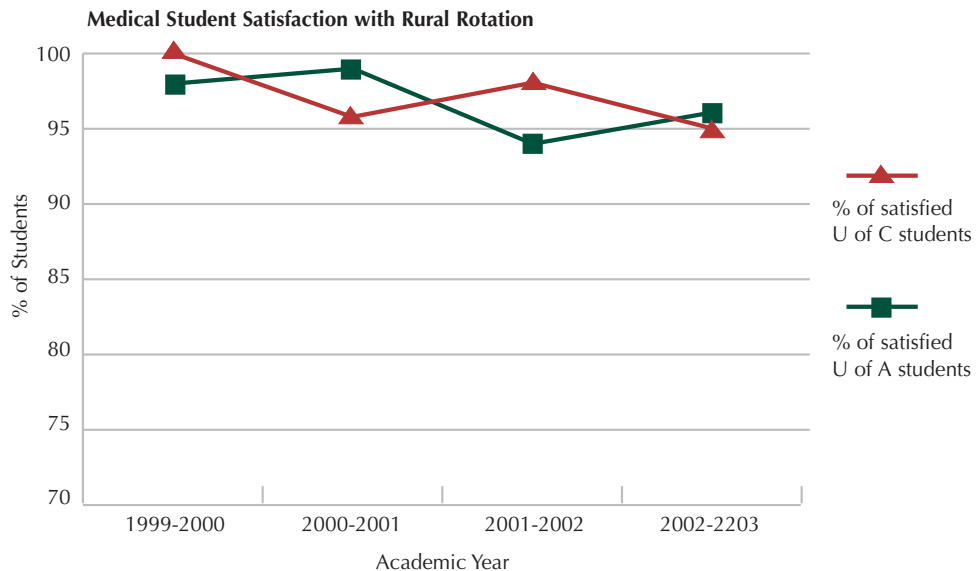
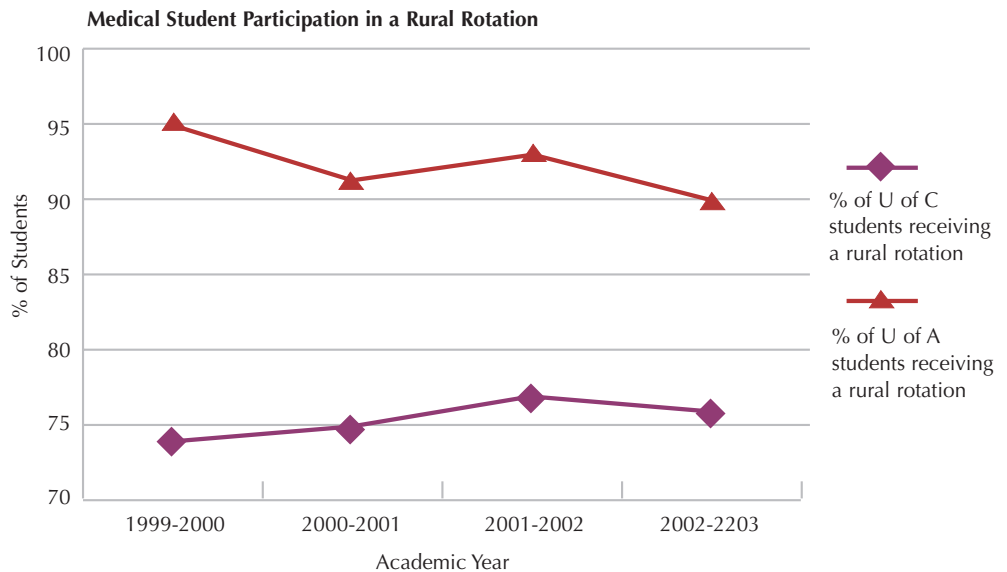
For each of the programs undertaken by the RPAP, key performance indicators (KPIs) are set which are used to determine the success or progress of the program. KPIs are simply quantitative outcomes based on the overall goal and the specific objectives of a program. KPI data is used to help fine tune programming and to determine program effectiveness. Following are data related to selected programs focused on each of RPAP's three major target audiences.

## Supports for Medical Students & Residents

In order to encourage rural practice and to provide a positive experience in rural Alberta, the RPAP has several programs aimed at the physician-in-training. The success of these programs, including the rural rotations program, rural residency training, additional skills training, and the matching signing bonus are carefully monitored using KPIs.

### The Rural Rotations Initiative

Over the past four years, most medical students at the University of Calgary and University of Alberta have been exposed to rural medical practice through rural medical rotations. These students were overwhelmingly satisfied with their rural experience.



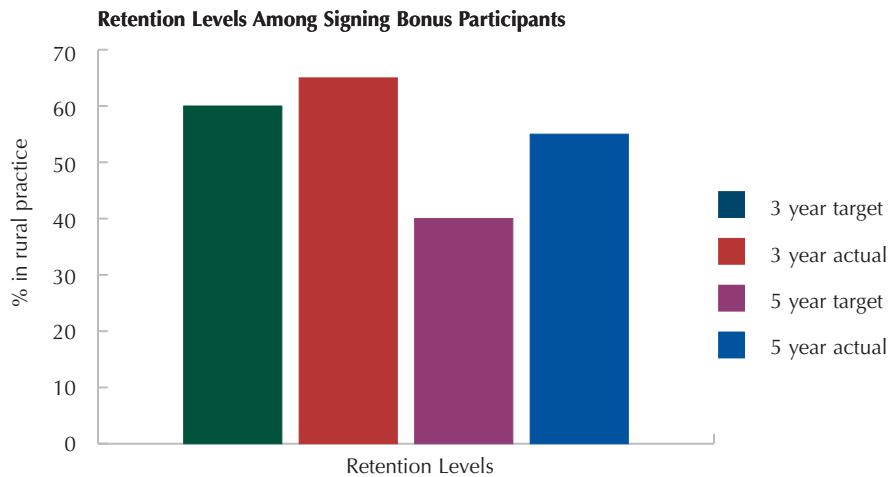
## Additional Skills Training

The low number of Additional Skills Training (AST) participants in practice one year after their training is due primarily to the number of AST participants who participate in the rural locum program upon graduation rather than setting up their own practice in a community.

Academic Year of AST	% that setup a practice 1 year post AST	% in practice 3 years post AST
2001-2002	11%	N/A
2000-2001	33%	17%

## Matching RHA Signing Bonuses

The Matching Signing Bonus for Rural Practice Program has been a success. The targets of 60% retention after three years and 40% after five years have been exceeded. The first long-term data is available and will continue to be followed.



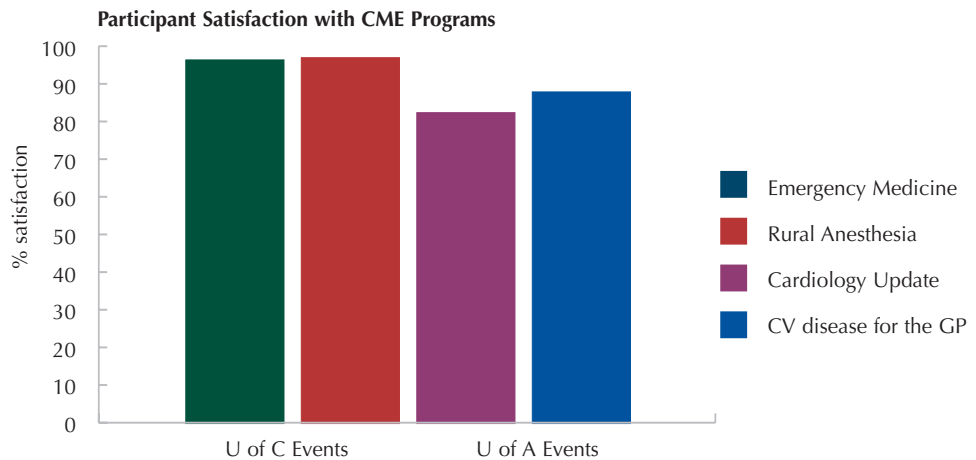
## Supports for Practicing Physicians

In order to assist practicing rural physicians in maintaining their skills and continuing to practice in rural Alberta, the RPAP launched several programs: Continuing Medical Education (CME) events, Enrichment Training, Royal College Re-entry positions and Rural Locum Programs. KPIs are also currently being developed for more recent programs such as the new General Emergency Medicine Skills (GEMS) Program.

### Continuing Medical Education

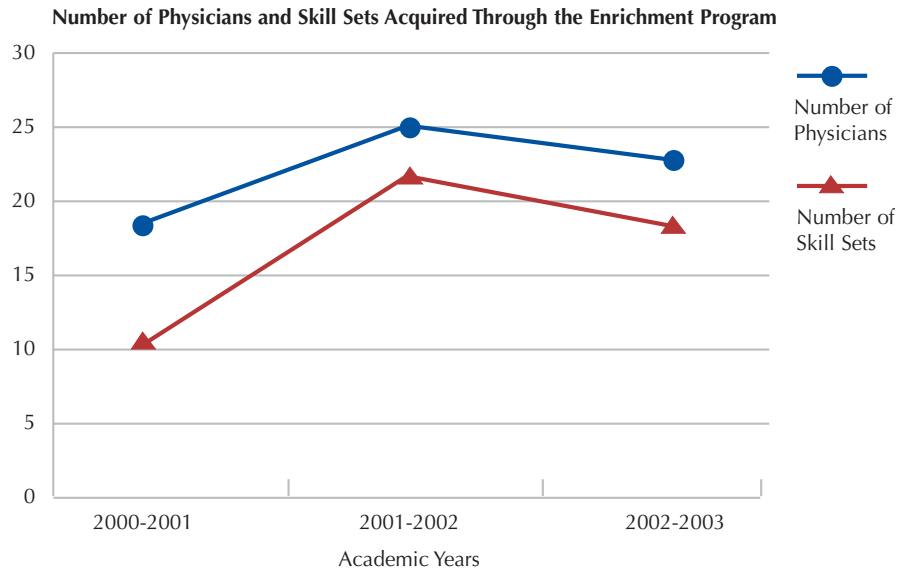
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The Universities of Calgary and Alberta develop continuing medical education (CME) programs that target the rural physician. For all participating physicians, satisfaction with RPAP-supported CME programs is very high.



## Enrichment Program

The Enrichment Program enables practicing physicians in rural Alberta to upgrade or to gain new skills. There are a variety of different skills the Enrichment physicians have acquired, including obstetrical, psychiatric, diagnostic imaging and emergency medicine skills. With the exception of the first reporting year which coincided with the introduction of the RPAP Skills Brokers, the number of physicians who participate in the Enrichment Program has been increasing over the past three years.



## Weekend Locum Program

For the past four years that data has been collected for the Weekend Locum Program, the satisfaction levels among participating community physicians has been very high. All physicians who have participated in the program have indicated satisfaction while most have been very satisfied.

## Supports for the Regional Health Authorities and Communities

RPAP has instituted many programs to foster collaborative relationships among medical students, residents, practising physicians, regional health authorities and rural communities. Positive, supportive relationships with regional health authorities and communities encourage medical students and residents to consider rural practice and practicing physicians and their families to remain there.

Many RPAP programs promote the recruitment and retention of physicians in rural Alberta. Recruitment Fairs, the Shadowing Program, and Rural Tours provide opportunities for medical students and residents to start building relationships and to learn about future practice opportunities. The Rural Physician Spousal Network (RPSN) provides supportive activities and networking for physician spouses and their families. KPIs have recently been developed for many of these areas and measurement is in progress. Information on these initiatives will be available in 2005.

