



# **RPAP | Health Workforce for Alberta**

2014 — 2015 Key Performance Indicators: Section Two



**RPAP | Health Workforce for Alberta is the  
Alberta Rural Physician Action Plan**

**Our Vision**

Having the right number of health practitioners in the right places,  
offering the right services.

**Our Mission**

To support Alberta's rural/regional health practitioners, their families  
and communities in having access to quality health care by offering  
comprehensive, integrated initiatives to enhance health services  
training, attraction, recruitment and retention.

**R P A P**

**2014-2015**

**Key Performance Indicators (KPI) Report**

Published by RPAP | Health Workforce for Alberta

# Contents

- KPI 13. University of Alberta and University of Calgary Rural Rotations
- KPI 14. Alberta Rural Family Medicine Network
- KPI 15. Continuing Medical Education / Continuous Professional Learning

2014-2015

# Key Performance Indicators Report Section Two

This is the tenth report on key performance data for RPAP | Health Workforce for Alberta.

## Key Performance Indicators

Key performance indicators (KPI) are a set of measurements based on the overall goals of an organization. They are used to help manage, control and achieve program effectiveness and results.

The RPAP has developed KPI for each of its programs and major target audiences:

- High School students in rural Alberta
- Post-secondary students considering careers in rural medicine
- Medical students
- Resident physicians
- Physicians who are currently practicing in rural Alberta
- Alberta Health Services/Other Operators
- Alberta's rural communities

Derived from the current business plan (2014-2017), RPAP key performance indicators have evolved from the indicators that were first developed for the 1999-2002 business plan. The RPAP Board has established a variety of strategies to reach the RPAP's vision, mission, and related goals. Each goal yields a set of KPI that are systematically measured, monitored and reviewed.

Section 1 of the KPI report includes information related to RPAP-specific key performance indicators for the 2014-2015 fiscal year (April to March).

**Section 2 of the KPI report includes information related to RPAP-funded and supported initiatives delivered by the University of Alberta and the University of Calgary. Section 2 follows the academic year and is normally published by January.**

## **Performance of the University of Alberta and the University of Calgary for the 2014-2015 Academic Year**

This section of the report presents information related to Key Performance Indicators (KPI) associated with RPAP I Health Workforce for Alberta (RPAP) funded and supported initiatives, provided by the University of Alberta (U of A) and the University of Calgary (U of C), that are designed to expose medical students and resident physicians to rural-based practice. The KPI in this section of the document relate to two of the three RPAP goals.

The data in this section were submitted by the respective universities at the end of October 2015. The data covers the academic year rather than fiscal year.

## 13. U OF A AND U OF C RURAL ROTATIONS

In collaboration with the U of A and U of C, RPAP provides funding and support to encourage medical students and resident physicians to do mandatory and elective rotations with rural and regional preceptors. Alberta medical students and resident physicians receive funding for travel and accommodations, and preceptors receive an honorarium directly from the RPAP. The preceptors in each of the training sites also have a direct link to the university they are affiliated with and are supported through RPAP-funded faculty development initiatives and faculty on-site visits.

### SEE ALSO

Goal 1: To Support the Attraction of a Competent Physician Workforce

### Objective

To encourage rural practice and provide medical students and resident physicians with a positive experience of rural Alberta.

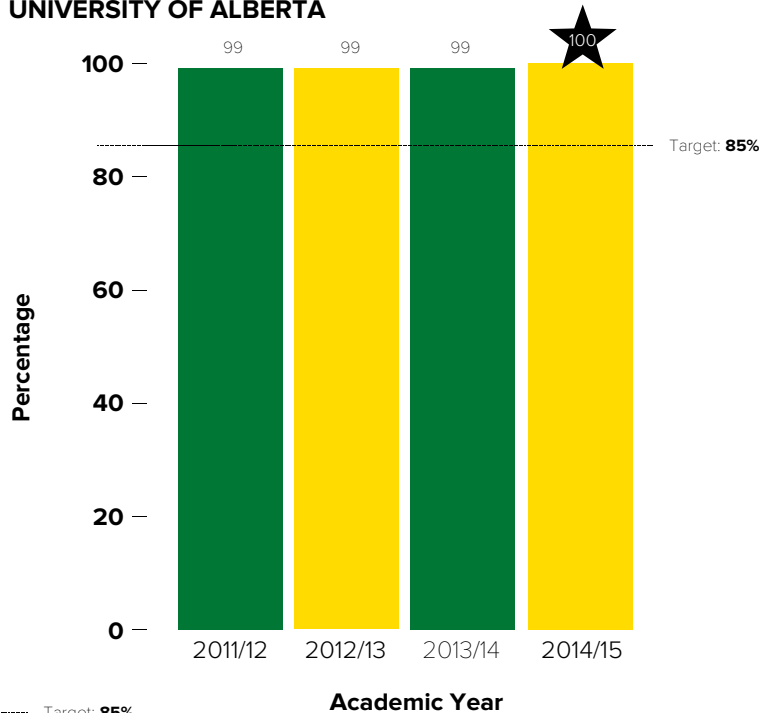
### 13.1/Percentage of all third-year medical students who received a rural/regional rotation

#### U of A Results

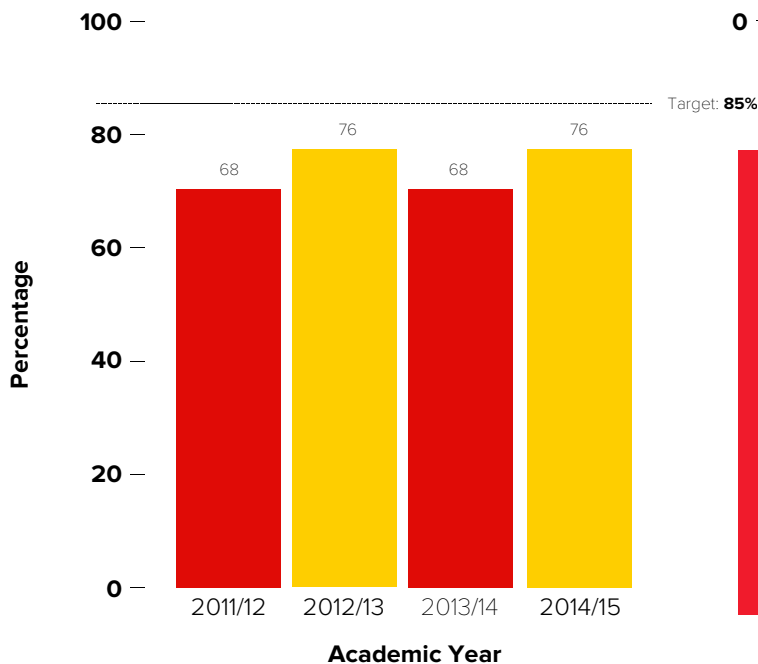
During the 2014-2015 academic year, 100% (138/138) of U of A third-year medical students completed at least one rural or regional rotation. This compares to 99% (144/145) during the 2013-2014 academic year and 99% (154/156) during the 2012-2013 academic year.

*The target for this KPI is 85%.*

#### UNIVERSITY OF ALBERTA



#### UNIVERSITY OF CALGARY



#### U of C Results

During the 2014-2015 academic year, 76% (132/174) of third-year medical students completed at least one rural or regional rotation. This compares to 68% (120/177) during the 2013-2014 academic year and 76% (126/165) during the 2012-2013 academic year.

*The target for this KPI is 85%.*

**13.2/Percentage of those third-year medical students (clerks) who received a rural/regional rotation and indicated an overall satisfaction with their rural experience**

**U of A Results:**

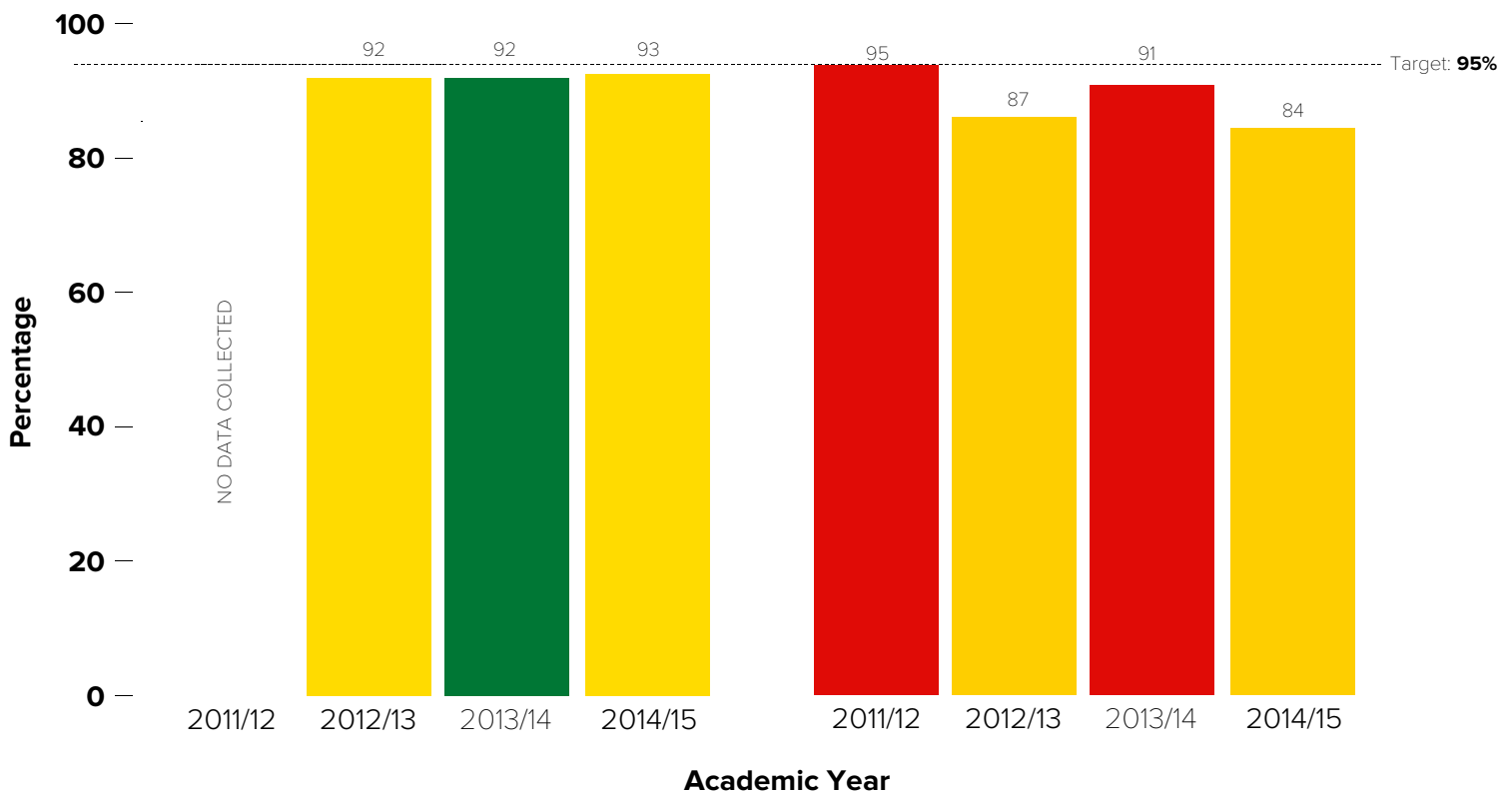
During the 2014-2015 academic year, 93% (128/138) of the third-year U of A medical students who received a rural/regional rotation and responded to the survey indicated an overall satisfaction with their rural experience. This compares to 92% (132/144) for the 2013-2014 academic year and 92% (120/131) for the 2012-2013 academic year. (Data for the 2011-2012 academic year was not collected)

**U of C Results:**

During the 2014-2015 academic year, 84% (146/174) of the third-year U of C medical students who received a rural/regional rotation and responded to the survey indicated an overall satisfaction with their rural experience. This compares to 91% (109/120) for the 2013-2014 academic year and 87% (68/78) for the 2012-2013 academic year.

**UNIVERSITY OF ALBERTA**

**UNIVERSITY OF CALGARY**



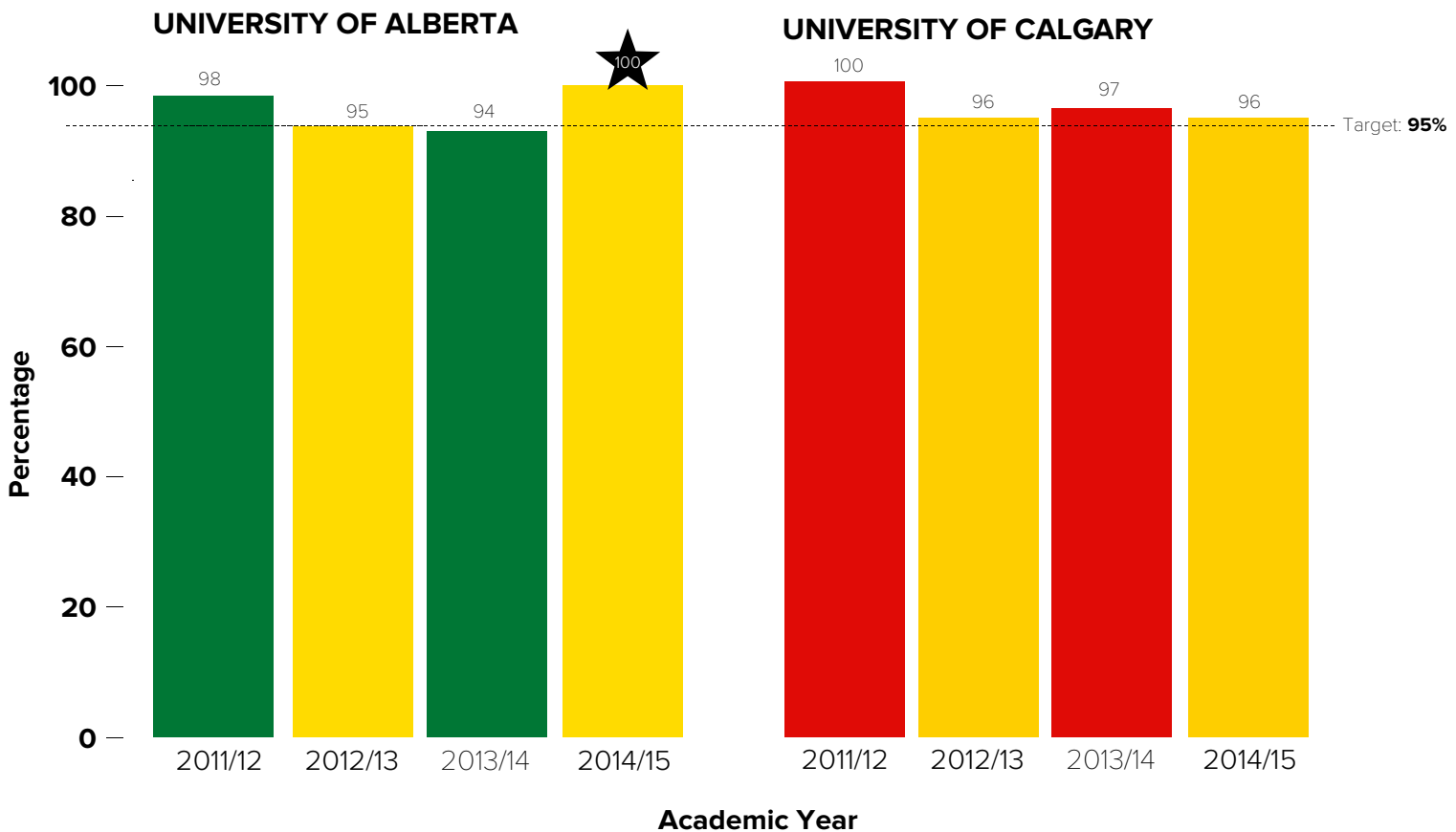
**13.3/Percentage of those Family Medicine residents who received a rural/regional rotation and who indicated an overall satisfaction with that experience**

**U of A Results:**

During the 2014-2015 academic year, 100% (70/70) of the traditional Family Medicine residents at the U of A who received a rural/regional rotation and responded to the survey indicated an overall satisfaction with their rural experience. This compares to 94% (51/54) during the 2013-2014 academic year and 95% (59/62) during the 2012-2013 academic year.

**U of C Results:**

During the 2014-2015 academic year, 96% (67/70) of the traditional Family Medicine residents at the U of C who received a rural/regional rotation and responded to the survey indicated an overall satisfaction with their rural experience. This compares to 97% (58/60) during the 2013-2014 academic year and 96% (45/47) during the 2012-2013 academic year.





**13.4/Percentage of third-year clerkship rural preceptors or “primary site” coordinators who indicated an overall satisfaction with the program**

**U of A Results:**

During the 2014–2015 academic year, 95% (20/21) of U of A clerkship preceptor respondents reported an overall satisfaction with the program. This compares to 100% (9/9) during the 2013–2014 academic year and 100% (15/15) during the 2012–2013 academic year.

**U of C Results:**

During the 2014–2015 academic year, 100% (19/19) of U of C clerkship preceptor respondents reported an overall satisfaction with the program. This compares to 85% (17/20) during the 2013–2014 academic year and 100% (23/23) during the 2012–2013 academic year.

*The target for this KPI is 95%.*

**13.5/Percentage of post-graduate or medical resident preceptors or “primary site” coordinators who indicated an overall satisfaction with the program**

**U of A Results:**

During the 2014–2015 academic year, 93% (13/14) of U of A post-graduate preceptor respondents reported overall satisfaction. This compares to 100% (10/10) during the 2013–2014 academic year and 93% (14/15) during the 2012–2013 academic year.

**U of C Results:**

During the 2014–2015 academic year, 96% (25/26) of U of C post-graduate preceptor respondents reported overall satisfaction. This compares to 90% (18/20) during the 2013–2014 academic year and 94% (17/18) during the 2012–2013 academic year.

*The target for this KPI is 95%.*

**13.6/Number of weeks of undergraduate medical education being performed in Alberta outside Edmonton/Calgary by community per year**

**U of A Results:**

U of A results for this KPI were not reported.

**U of C Results:**

During the 2014–2015 academic year, 875 weeks of undergraduate medical education were performed in 40 communities outside Calgary. This compares to 869 weeks in 40 communities during the 2013–2014 academic year and 1010 weeks in 37 communities during the 2012–2013 academic year.

*There is no target for this KPI.*

**13.7/Number of weeks of post-graduate medical education being performed in Alberta outside Edmonton/Calgary by community per year**

**U of A Results:**

U of A results for this KPI were not reported.

**U of C Results:**

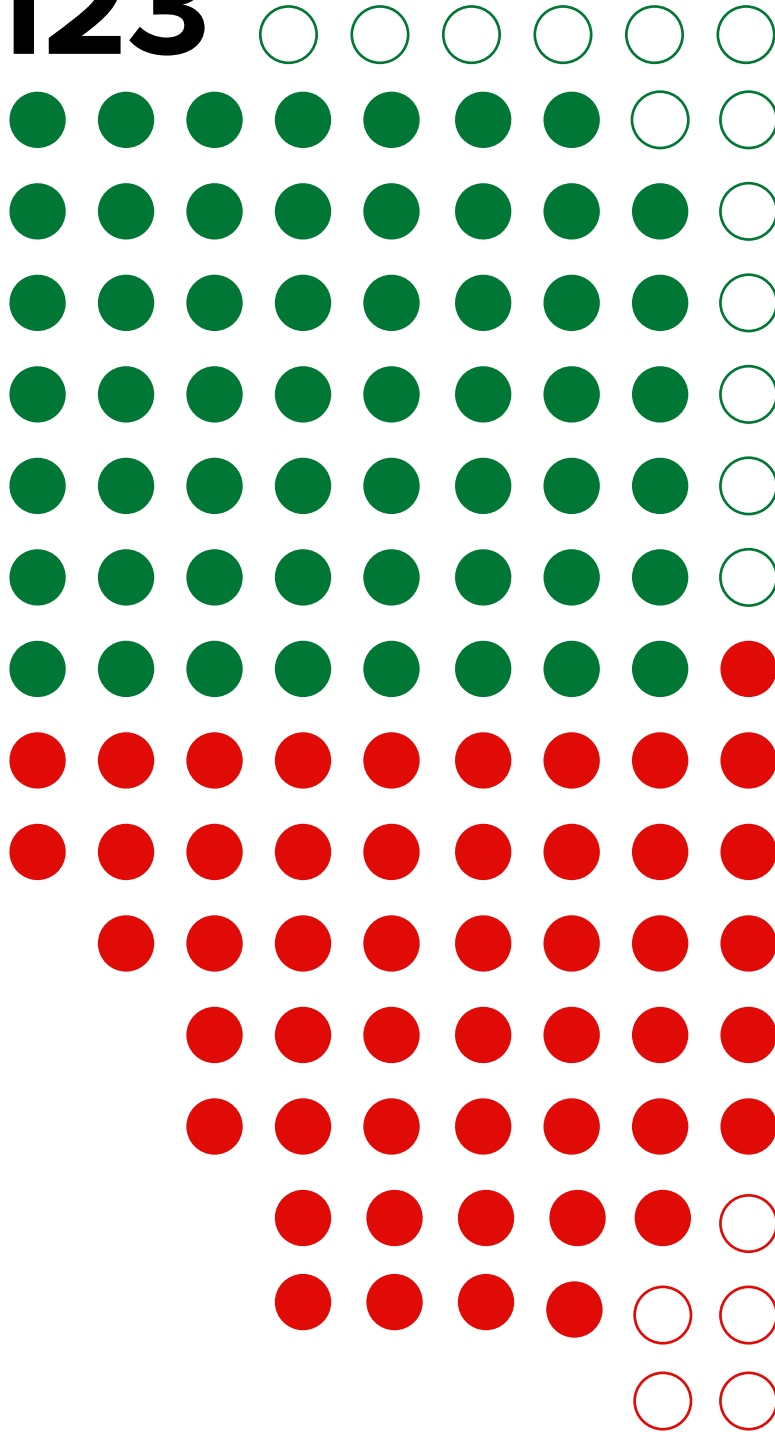
During the 2014–2015 academic year, 1620 weeks of post-graduate medical education were performed in 28 communities outside Calgary. This compares to 1667 weeks in 28 communities during the 2013–2014 academic year and 1580 weeks in 28 communities during the 2012–2013 academic year.

*There is no target for this KPI.*

**13.8/Percentage of Family Medicine graduates in the traditional program who are practicing in rural/regional communities in Alberta three years after graduation**

family medicine graduates since 2012

**123**



3-year retention (U of A)

**19%**

**U of A Results:**

Of the 68 Family Medicine students who graduated from the U of A traditional program in 2012, 13 are practicing in an Alberta rural/regional community after three years (in 2015). This represents a 19% retention rate (13/68). This compares to a 19% three-year retention rate (15/79) for the students having graduated from the U of A traditional program in 2010.

**U of C Results:**

Of the 55 Family Medicine students who graduated from the U of C traditional program in 2012, five are practicing in an Alberta rural/regional community after three years (in 2015). This represents a 9% retention rate (5/55). This compares to a 5% retention rate (5/50) for the students having graduated from the U of C traditional program in 2011.

*The target for this KPI is 25%.*

3-year retention (U of C)

**5%**

## 14. ALBERTA RURAL FAMILY MEDICINE NETWORK

The Alberta Rural Family Medicine Network (ARFMN) offers a two-year rural-based Family Medicine residency training program that focuses mainly on rural and regional community and hospital practices within rural Alberta. The program is offered collaboratively through the University of Alberta and University of Calgary Family Medicine residency programs, Rural Alberta North (RAN), and Rural Alberta South (RAS), respectively.

Rural Alberta North and Rural Alberta South each accept 10 to 20 resident physicians per year through the Canadian Resident Matching Service (CaRMS). The curriculum is taught largely by rural-based family physicians and specialists attached to the Family Medicine and Royal College specialty departments of both universities.

The Network is a collaborative venture of the RPAP, the Family Medicine departments of the Universities of Alberta and Calgary, Alberta's rural physicians, Alberta Health Services and Covenant Health.

The RPAP provides extensive support to the Network's residents, both financial and infrastructural, and it also supports ongoing faculty development to preceptors through its Practical Prof webpages.

### **Objective**

To offer dedicated family medicine residency training to prepare competent physicians for the broad demands of rural practice and to help the attraction and retention of physicians in rural Alberta.

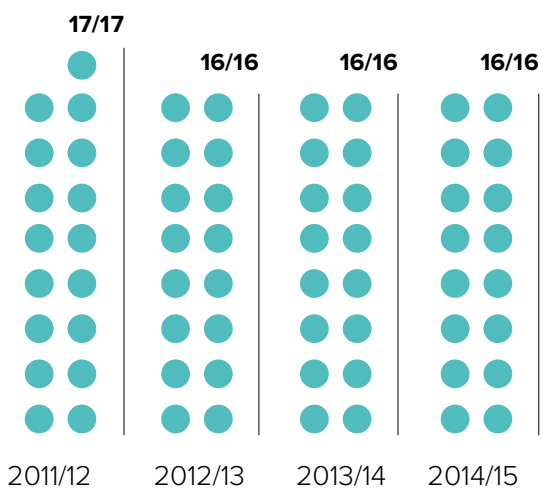
### 14.1/Percentage of RAN/RAS first year resident (PGY1) positions filled per year

Rural Alberta North (RAN) Results: During the 2014-2015 academic year, 100% (16/16) of the RAN PGY1 positions were filled in the first CARMS iteration. This compares to 100% (16/16) for 2013-2014 and 100% (16/16) for 2012-2013.

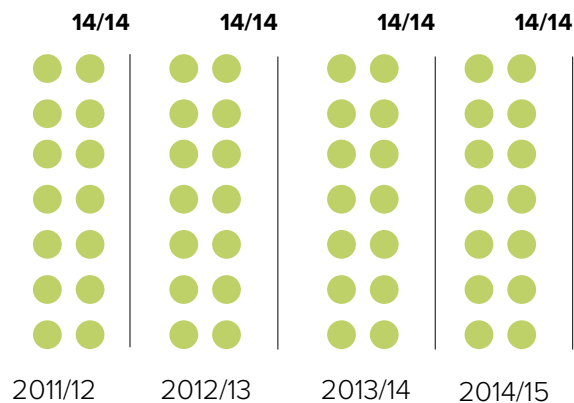
Rural Alberta South (RAS) Results: During the 2014-2015 academic year, 100% (14/14) of the RAS PGY1 positions were filled in the first CARMS iteration. This compares to 100% (14/14) for each of the two prior academic years.

*The target for this KPI is 100%.*

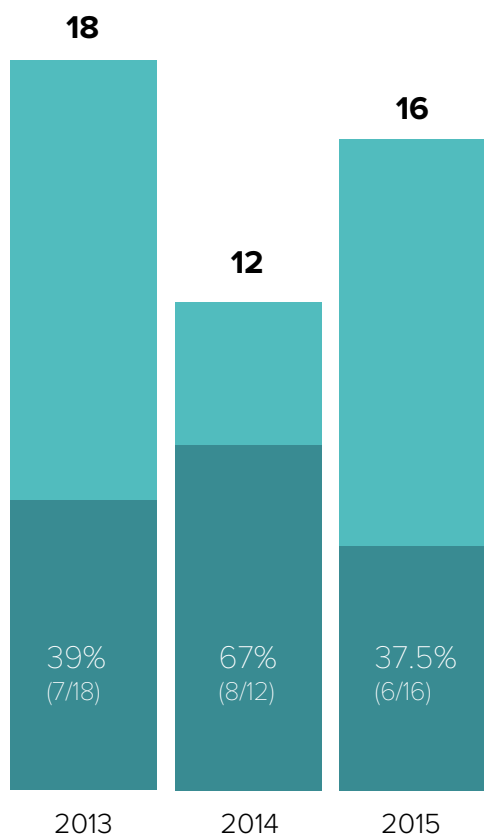
#### Rural Alberta North (RAN)



#### Rural Alberta South (RAS)



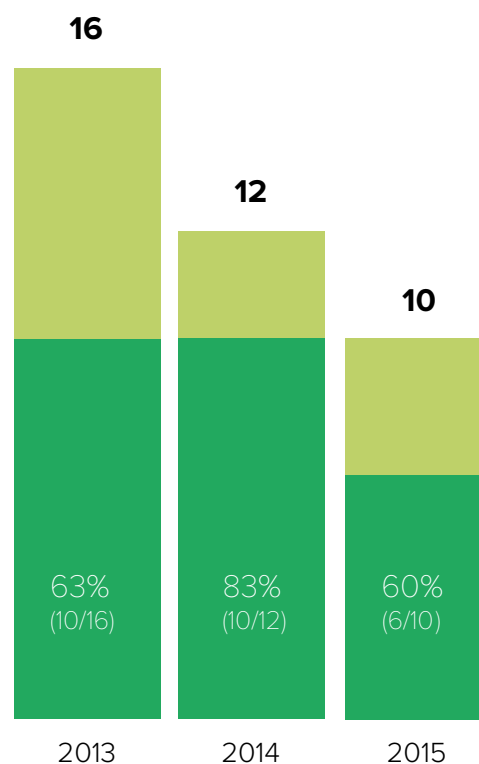
**14.2/Percentage of RAN/RAS graduates who are practicing in rural or regional communities in Alberta three years after graduation**



**Rural Alberta North (RAN) Results**

Of the 16 residents who completed the ARFMN (RAN) program in 2012, six were still practicing in an Alberta rural/regional community after three years (in 2015). This represents a 37.5% retention rate (6/16). In 2014 and 2013, the three year retention rates were respectively 67% (8/12) and 39% (7/18).

*The target for this KPI is 75%.*



**Rural Alberta South (RAS) Results**

Of the 10 residents who completed the ARFMN (RAS) program in 2012, 6 were still practicing in an Alberta rural/regional community after three years (in 2015). This represents a 60% retention rate (6/10). In 2014, the three year retention rate was 63% (10/16) and 83% (10/12) in 2013.

*The target for this KPI is 75%.*

The recent decrease in this KPI is a concern. We are investigating the cause to determine if any adjustments can be made to ensure the rates return to their previous levels.

**14.3/Number of rural/regional preceptors who attended the annual Alberta Rural Family Medicine Network (ARFMN) Cabin Fever faculty development conference**

69 rural/regional preceptors attended the 2014 Cabin Fever conference. 87% (60/69) of the rural/regional preceptors were family physicians, 13% (9/69) of the rural/regional preceptors were specialists.

53 rural/regional preceptors attended the 2013 Cabin Fever conference. 85% (45/53) of the rural/regional preceptors were family physicians, 15% (8/53) of the rural/regional preceptors were specialists.

*There is no target set for this KPI.*

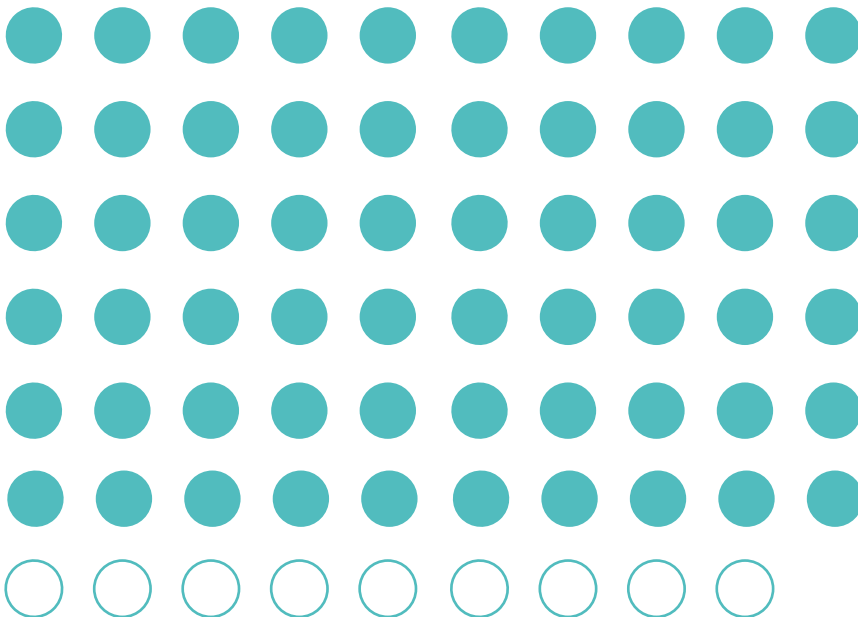
**14.4/Number of first year rural/regional preceptors who attended the annual ARFMN faculty development conference**

In 2015, 13 of the 69 rural/regional preceptors were first time conference attendees.

This compares to 18/53 in 2014 and 29/92 in 2013.

*There is no target set for this KPI.*

▶ **2014 Cabin Fever Attendance**



**60** Family physician

**9** Specialists

**+30%** Increase from 2013

**69** 2014 Cabin Fever Attendance

## SEE ALSO

Goal 3: To Support the Physician and Family and Positively Affect the Factors that Influence Recruitment and Retention

## 15. CONTINUING MEDICAL EDUCATION / CONTINUOUS PROFESSIONAL LEARNING

RPAP provides funding to the University of Calgary Continuing Medical Education/ Continuous Professional Learning (CME/CPL) office to work with rural physicians to provide high quality CME/CPL to meet the needs of rural Alberta.

RPAP-sponsored initiatives and partnerships with UofC include the video-teleconferencing program for rural physicians, and Clinical Ubiquitous Rural Informed Online Services (CURIOS), a multifaceted method for pushing Continuing Professional Development (CPD) through digital means to busy clinicians across Alberta and beyond.

### Objective

To support professional learning opportunities for practicing rural physicians.

#### 15.1/Number of videoconference sessions and average number of attendees

During the 2014-2015 academic year, a total of 28 videoconference sessions were held with participation from 65 rural/regional sites (58 in Alberta, 3 in British Columbia and 5 in the Northern Territories). Average attendance was 160 (4480/28). This compares to a total of 30 videoconference sessions and 59 rural/regional sites in 2013-2014, with an average attendance of 160 (4800/30).

The program was previously run separately by both U of C and U of A. During the 2012-2013 academic year U of C held 30 sessions in 34 rural/regional sites for an average attendance of 125 (3750/30). The U of A held 30 sessions in 30 rural/regional sites, for an average attendance of 57 (1710/30).

*There is no target set for this KPI.*

#### 15.2/Percentage of participants attending videoconference sessions who indicated an overall satisfaction with the presentations.

Due to issues with collecting the surveys, data could not be separated between participants. The average response indicates high overall satisfaction, though it is not possible to compare to previous years. Measures will be taken to ensure that the data is collected for the next KPI report.

Of the health professionals who attended the videoconference sessions during the 2013–2014 academic year, 93% indicated an overall satisfaction with the presentations. This compares to 96% at U of C and 98% at U of A during the 2012-2013 academic year and 92% at U of C and 98% at U of A during the 2011-2012 academic year.

*The target set for this KPI is 75%.*

**RPAP | Health Workforce for Alberta**

2801 Telus House  
10020 – 100 Street NW  
Edmonton, Alberta T5J 0N3

Toll-free: 1-866-423-9911

Telephone: 780-423-9911

Fax: 780-423-9917

Email: [info@rpap.ab.ca](mailto:info@rpap.ab.ca)

**Websites**

[rpap.ab.ca](http://rpap.ab.ca)

[APLJobs.ca](http://APLJobs.ca)

[AlbertaRuralHealth.ab.ca](http://AlbertaRuralHealth.ab.ca)

[PracticalDoc.ca](http://PracticalDoc.ca)

[BeADoctor.ca](http://BeADoctor.ca)



**RPAP**