Collaborative Statement on Canadian Portable Locum Licensure

BACKGROUND

There are currently thirteen provincial / territorial medical regulatory authorities that separately license physicians. The similarities in licensure application processes and required documentation between provinces provides an opportunity to institute a pathway to licensure that enables physicians to more easily and flexibly deliver care to patients in need.

The current process requires separate licensure applications to each provincial / territorial medical regulatory authority. This format poses challenges to various stakeholders:

Patients: Patients, especially those in rural and remote regions, may rely heavily on locum physicians for access to care. Barriers to timely and geographically flexible licensure may have a negative impact on these patients and communities. The ability to more readily identify clinicians with a history of practice limitations or regulatory college misconduct in other jurisdictions may also enhance patient safety.

Rural / Remote Communities: Exposure to rural medicine increases the likelihood physicians will practice in these environments. Rural and remote communities often struggle to recruit physicians to these regions; the opportunity for short-term exposure is limited by the time and financial resources inherent to the licensure process.

Rural / Remote Physicians: Physicians working in rural and remote regions often rely on locum colleagues for respite and coverage. At times, these physicians will require urgent or semi-urgent practice coverage (i.e. personal health issue, death or health issues within family members). An applicant for licensure is unlikely to gain certification to practice within that region within the short timeframe required to assist his or her colleague.

New in Practice Physicians: It is not unusual for newly graduated physicians to locum in various regions before deciding where to settle for long-term practice. The time and financial barriers to licensure in a variety of provinces may limit this exposure to a variety of practice models and dissuade physicians from practicing in underserved areas that differ from the region of their training (often urban or tertiary environments).

Applicant Physicians: Physicians at any stage in the career cycle and from any geographic region may apply for licensure in any province or territory. An application for licensure includes the gathering, submission, and review of various documents certifying the physician’s credentials and suitability to practice within a particular region. This necessary process protects patients and is crucial to responsible self-regulation of the profession. When physicians apply for licensure in multiple regions, the process is often duplicated, thereby risking inefficient use of time and financial resources.

A portable locum license would facilitate the ability to provide care for a specified, limited period of time and would be portable and applicable across provinces and territories. This may enhance flexibility in physicians’ ability to practice between regions, thereby helping to deliver timely locum coverage in underserved regions. A portable license may involve a central repository to house physicians’ documents and credentials, thereby reducing redundancies in the application process and helping various provincial / territorial medical regulatory authorities to identify professionalism concerns that may have occurred in another region. A portable locum license system in Canada would not be entirely unprecedented; Australia developed a system of fully portable national licensure from the previously independent state licensure processes. As a nation with similar disparities in access to care in rural compared to urban regions, it is encouraging to observe successful implementation of a national portable locum licensure.

PRINCIPLES

1. A robust and thorough licensure process is necessary for the protection of patients and ethical self-regulation of the profession.
2. Patients across all regions of Canada have a right to high-quality care.
3. The ability to access timely clinical coverage support for respite and assistance is crucial to the recruitment, retention, and well-being of physicians working in rural and remote regions.
4. Exposure to different models of care in a variety of regions fosters the development of well-rounded physicians comfortable functioning in diverse practice environments.

RECOMMENDATIONS

1. Canadian National Medical Organizations, Provincial / Territorial Medical Regulatory Authorities, and groups representing patients and communities collaborate to assess the feasibility of a portable locum license.
2. A portable locum license would allow for the provision of care for a specified, limited period of time and would be applicable across provinces and territories.