



Health Authority	
Name of Community	
Vacancy (Specialty, i.e. GP, General Surgery)	Amount Requested
Justification for Request (i.e. Impact on Service Delivery, Waitlists, etc.)	
Indicate Link to HA Health Service Plan and Physician Supply Plan	
Expenditure Plan (itemized)	

We hereby confirm that the information provided above is correct.

AREA MEDICAL OFFICER OR APPROPRIATE MEDICAL LEADERSHIP PERSONNEL	CHAIR OF LOCAL MAC	SUBMITTED BY: (Health Authority Personnel)
Signature	Signature	Signature
Name (please print)	Name (please print)	Name (please print)
Telephone Number	Telephone Number	Telephone Number
Date	Date	Date

Health Authorities must complete this form and submit it to Rural Health using the Secure File Transfer Program (SFTP).

RURAL RECRUITMENT CONTINGENCY FUND GUIDELINES

REVISED JULY 2021

1. PURPOSE

The Rural Recruitment Contingency Fund is intended to provide additional assistance to eligible communities/physicians covered by the *Subsidiary Agreement for Physicians in Rural Practice (RSA)* with recruiting expenses, where the difficulty in filling a vacancy is or is expected to be especially severe and where the failure to fill the vacancy in a timely manner would have a significant impact on the delivery of medical care required by the physician supply plan.

2. FUNDING

The Subsidiary Agreement for Physicians in Rural Practice (RSA) provides \$300,000 annually for the recruitment contingency fund.

The Subsidiary Agreement for Physicians in Rural Practice may be viewed at:

https://www2.gov.bc.ca/assets/gov/health/practitioner-pro/appendix_c_rural_subsidary_agreement.pdf

3. AMOUNT OF ASSISTANCE AVAILABLE

Grants of up to \$25,000 may be obtained from the Rural Recruitment Contingency Fund. These grants may only be used to:

- (i) help defray additional recruiting expenses that may be incurred, and /or
- (ii) increase the rural recruitment incentive amount payable to recruited physicians.

4. ALLOWABLE EXPENSES

- A maximum of \$10,000 may be claimed for candidate visits and advertising.
- Candidate visits (one per candidate) to the community per vacancy to a maximum of \$3,500.00 per candidate (including spouse but not children). Expenses include travel, food and accommodation and one dinner with community physicians. Community physician dinner maximum is \$50 per person, no alcohol, to a maximum of \$750 per visit (15 guests)
- Advertising: \$5,000 maximum per vacancy. Note: Positions must be advertised through Health Match BC (HMBC), CMAJ, and the BCMJ before using other journals or newspaper ads. Up to two advertisements may be placed in relevant journals and qualify for reimbursement. Health Match BC offers discounted rates for ads in CMAJ and BCMJ.
- Relocation stipends up to \$15,000 per recruit, dependent upon where the physician is relocating from.
 - \$15,000 relocating from outside of Canada; \$12,000 outside BC but within Canada; \$9,000 within BC.
 - A physician may receive the relocation stipend a maximum of three times.

5. APPLICATION

Applications for this funding are administered by Rural Practice Programs, Physician Compensation, Ministry of Health, on behalf of the JSC.

A physician (or group of physicians), or Health Authorities (HA's) on behalf of physicians may apply for a grant from the fund to support their recruitment expenditure plans. Applications must provide an explanation of why the money is needed, a specific plan of how it will be spent and include the following information:

- (a) A copy of the Health Authority's (HA) physician resource plans must be submitted showing the vacancy for which this additional recruiting support is being requested.
- (b) A written description by the Health Authority must be attached clearly articulating how the recruitment of this position fits with the Health Authority's objectives and health care delivery priorities in accordance with their approved Physician Supply and Health Service Plans.
- (c) For recruitment of specialists, a specific impact analysis must also be prepared and submitted by the Health Authority as part of the application for funding.

6. APPROVAL PROCESS

Applications are to be forwarded to the Ministry of Health, Rural Programs, using the Secure File Transfer Program (SFTP).

Applications that do not meet criteria guidelines will be brought forward to the JSC for review at the first meeting following the receipt of the application (must be received two weeks prior to the next JSC meeting).

The JSC and the Ministry of Health accept no responsibility for expenditure commitments that are entered into prior to approval being granted by the Ministry of Health, Rural Practice Programs on behalf of the JSC.