



**Locums:
Making Them
“Work” for You and
Your Community!**

Physician Locum Guidelines

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What Is a Locum?

Locum, short for the Latin phrase **locum tenens** (lit. “place-holder,”), is a physician who, on a temporary basis, fulfills the duties of a doctor who is absent, or who fills a role required by a hospital or practice that is short-staffed.

For new physicians, these placements provide diverse clinical experiences in different locations. For established physicians, locums offer the opportunity to explore new ways of practising or to hone specific skills. Some physicians may use locums as the start of a shift towards retirement.

Placements may be as short as a few hours or as long as a year. They may occur in any geographic region in the province or in any practice specialty.

Locum placements are an important component of your community’s recruitment and retention program and can provide the necessary support for practising physicians in communities with limited health human resources. As such, they are a valuable component of the physician workforce.

Whether you’re helping a physician new to Ontario explore his/her practice options, assisting an established physician relocate to your community, or helping to find temporary relief for a community physician, a locum placement offers a means of satisfying temporary health-care needs in your community.

This module will share best practices to assist you with finding locum physicians and to provide a positive experience for your locum physicians and your hospital or community. Included are tips and suggestions for both Family Medicine and specialty medicine locum recruitment, but especially Emergency Medicine, as Emergency Department staffing continues to be a challenge across the province.

Purpose of Locums for a Hospital or Practice

- To maintain services while a permanent physician is absent.
- To provide services that are otherwise unavailable due to lack of physician human resources.
- To showcase the hospital/practice/community directly to the locum physician and also indirectly to the physicians in the locum's network, with an eye to long-term physician recruitment.
- To provide insight and feedback to determine what is attractive as well as what could be improved about the practice from a physician recruitment standpoint.
- To access and share best practices, innovation, and specialized knowledge within the medical community.

Purpose of Locums for a Physician

- To explore different communities and practice settings when transitioning into practice from a training program or from another region.
- To supplement income.
- To remain clinically active while working in a research/administrative position or while transitioning towards retirement.
- To diversify experience with different practice settings, visit a variety of regions, treat different patient groups and explore clinical specializations/areas of interest that are not part of the physician's permanent practice.
- A means of accessing and sharing best practices, innovation and specialized knowledge within the medical community.

When a Locum is Needed

Writing a Locum advertisement

- In general, provide as much detailed information as possible. Physicians like to see everything up front and do not always have the time to follow up and ask questions.
 - Duration and context (Why is there a need for a locum?)
 - Practice expectations and on-call duties
 - Compensation, including overhead split and on-call stipends and/or daily guarantees
 - Practice patterns, patient volume (daily and on-call)
 - Arrangements for travel and accommodation
 - Attractions in the community/area that showcase how the locum assignment can be combined with tourist pursuits
 - Flexibility to meet locum physician needs (if applicable)
 - Access to diagnostic and treatment resources, i.e. physician specialists, diagnostic imaging equipment
- Keep your HFOJobs posting current and respond to inquiries immediately. If the person who answers locum inquiries is going to be away for more than a day, assign someone else as a back up to respond. If a physician does not hear from you in a day or so, he/she will move on to the next opportunity.
- If possible, include a picture of your community, hospital and/or clinic in your advertisement. This will grab the attention of the job seekers and help make your opportunity stand out amongst the hundreds of locum advertisements that are published.

How to find locum physicians

- HealthForceOntario Marketing and Recruitment Agency (HFO MRA) – Regional Advisors (RAs) can help you! Keep them up to date with your locum needs.
- HFO MRA Recruitment and Retention Programs (RRP). Your hospital or practice may be eligible for:
 - The Northern Specialist Locum Programs
 - The Rural Family Medicine Locum Program
- HFOJobs web site – Keep your locum postings up-to-date.
- Professional Association of Residents of Ontario (PARO) through Restricted Registration.
- Medical schools – Advertise on university post-graduate web sites.
- Social media – Facebook, LinkedIn, Twitter, etc. See our Social Media module.
- Word of mouth – Ask physicians in your community if they know of anyone who might want to provide locum services on a regular basis. Physicians attend CME events and conferences where they can spread the word. Send them with locum information to provide to their colleagues.

Remember, word of mouth travels fast (meaning, if locum physicians do not have a good experience, they will not return and the word will spread quickly).
- If you are looking specifically for a locum for your Emergency Department:
 - Check with neighbouring hospitals – They may have a locum pool of physicians available. If they do not, look into creating a locum pool for your hospital or even for your area in collaboration with neighbouring hospitals.
 - Emergency Department LHIN Leads – Contact your regional Local Health Integration Network (LHIN) to find out your local contact.
 - Post all ED-related locum opportunities on HFOJobs.
 - Contact PARO's transition to practice office to highlight opportunities in your ED to new grads or through the Restricted Registration program.
 - Contact HFO MRA Emergency Department Coverage Demonstration Project (EDCDP) to determine if you are eligible for the program at emerg@healthforceontario.ca.

Creating a Positive Experience for Your Locum Physician

As a recruiter, there are a questions you might want to ask the physician to help make a locum placement a successful and enjoyable one.

Questions for the Family Medicine Physician seeking an incoming locum

- What dates do you require coverage?
- Will accommodation and/or travel expenses be covered?
- What is the compensation/split for an incoming physician?
- Do you have hospital privileges? Will the locum be expected to cover your in-patients?
- Is on-call required? If so, for what services, and for what hours?
- Are there any other types of coverage required of the locum physician (i.e. OB/GYN, LTC facility, Anesthesia, Emergency Department, etc.)?
- Are there any funding opportunities related to locum coverage available through your primary care model (i.e. FHN, FHO, RNPGA, FFS, etc.)?
- Is there any overhead cost?
- Is your practice located in a community eligible for support through the [Rural Family Medicine Locum Program \(RFMLP\)](#)?
- Are applicable passwords for computers/security systems information ready for the incoming physician?
Will the locum physician be trained on any of the IT systems?
- Are there staffing issues to be aware of?
- Referrals to specialists – Is specialist contact information listed for easy reference for the incoming physician?
- Do you have any particularly difficult or complex patients that the locum physician needs to be aware of?
- Have you posted the locum opportunity on [HFOJobs](#)?

Questions for the specialist seeking an incoming locum physician

- What dates do you require coverage?
- What are the specific hours for coverage? i.e. 0800 hrs through to the next morning at 0800 hrs, or other?
- Are weekday hours included in the on-call coverage or does each physician cover his/her own patients during the day?
- What is the remuneration being offered? What is the payment/split for the incoming physician?
- What is the overhead cost, if any?
- Does the remuneration include OHIP fees or are they "clawed back" by the hospital or physician being covered?
- Is there accommodation available? Who will book this? Will this be billed directly to the hospital or will the locum specialist pay this cost and then be reimbursed?
- Are travel/meals going to be covered?
- Will hospital privileges be required? What credentialing documentation needs to be submitted and how long does this take? **Note:** Hospital privileges are usually required for a specialist, though there are a number of exceptions for some community-based physicians.
- Are passwords for computers/security systems information ready for the incoming physician? Will the locum physician be trained on any of the IT systems?
- Are there any staffing issues to be aware of?
- What is the process to refer patients back to their Family Medicine physician?
- How is follow-up care of patients arranged? i.e. Will they go back to another specialist for follow up in the case of post surgery or post ICU, for example?
- Do you have any particularly difficult or complex patients that the locum physician needs to be aware of?
- If you are located in a Northern Ontario community, is your specialty eligible for locum coverage through the [Northern Specialist Locum Programs](#)?
- Have you posted your locum opportunity on [HFOJobs](#)?

Questions for locum physicians

- Can you please provide a copy of your CV, along with three recent references?
- Are you fully licensed in the province of Ontario by CPSO, and in good standing? Please provide your license number.
- Is your CMPA up-to-date?
- Are you either CCFP or RCPSC designated?
- What are your expectations in regard to accommodation and travel?
- Are there any patient care issues or procedures you would like to avoid? i.e. In the case of a Family Medicine physician, does he/she do OB/GYN?
- Will you be bringing your spouse/partner or any family members with you for the locum period?
- Are you interested in Emergency Department shifts? **Note:** In the case of Family Medicine, confirm the incoming physician has up-to-date ACLS, ATLS and PALS, as may be required by the community hospital.
- Are you willing to provide in-patient and/or long-term care services?
- Have you discussed the overhead/income split with the host physician?
- Are you doing locums as a means to explore full-time practice opportunities/locations?
- Would you like a tour of the community while you are there?
- Would you like a list of the leisure/athletic/cultural amenities in the community?
- Do you have any special needs or interests you would like information on?

Note: Make a point of meeting with the physician covering the locum while he/she is in your community. Treat the locum visit as though it is a site visit opportunity. Be diligent about arrangements so the locum has an excellent experience. Regardless of whether the locum physician is eventually recruited or not, he/she will relay positive feedback to colleagues, who may also be interested in a locum or permanent opportunity in your community.

Best practices for recruiting ED locums

There are many reasons why physicians may choose to locum and pick up ED shifts instead of working in a full-time practice:

- Older physicians may want to work less but are not ready to retire.
- Residents just finishing their training program want to keep up their ED skills and/or have not yet decided on a permanent position.
- Physicians who have completed their PGY3 EM year or who may not have been able to get into the program but would still like to include EM in their practice.
- Mid-career physicians who want to pursue other interests and view ED locums as a financial safety net or a way of testing out new locations for possible relocation.
- Physicians that have a Family Medicine practice and would still like to keep up their EM skills.
- Physicians who simply enjoy travel and want to experience communities throughout the province.

Find out the reason your locum physician is coming to your community, and let this guide you in your efforts to recruit the physician or make sure he/she returns to locum on a regular basis.

Most importantly, as mentioned previously, remember **word of mouth** through personal interactions and social media are the most effective ways to spread the word of a positive ED locum experience at your hospital.

Here are some **tips and suggestions** to help create a great ED locum experience and increase your chances of positive word of mouth.

- Refer to the [2013 ED Toolkit](#) which has been developed to assist any person/organization looking to improve the recruitment and retention value of their Emergency Department. There are numerous strategies identified that can assist with attracting and retaining locum physicians.
- Streamline the credentialing process to facilitate quick and easy occasional/locum coverage. Strategies include common credentialing by LHIN and also the Locum Credentialing Application Program (LCAP). This allows a physician to do multiple locums in different hospitals without the administrative burden and cost of applying for privileges every time.
- Many hospitals have developed an orientation manual or checklist for new locums which can be stored at the ED nursing station. This book may contain information such as hospital staff contact information, ED protocols/medical directives, access to diagnostics, specialist consults, etc.
- Provide the locum physician with an idea of how many patients he/she might expect to see in the ED on a busy day and a slow day. If the ED locum physician is the only one working in the ED, make sure he/she has someone to call for back-up.
- If possible, pay for a locum physician's travel costs to and from the community and have accommodation for the locum physician close to the hospital, especially if he/she is doing night shifts.
- Have an equitable schedule for your ED locums (i.e. do not give the locum physician all of the night and weekend shifts) and allow locums to book well in advance of a shift before they make commitments to other sites.
- Let your local [Regional Advisor \(RA\)](#) know about the locum physician coming to your community so the RA can send the locum a brief e-mail.
- Conduct a follow-up survey. Ask the locum about his/her experience in the community and hospital. Act on the feedback you receive to improve your next locum's experience. [See Appendix A for a sample.](#)
- [Develop a Client Relationship Management \(CRM\)](#) plan – Keep in touch on a regular basis with your locum physicians. (For example, send out holiday cards or let them know about upcoming ED locums, etc.). Refer to the [CRM module](#) for some helpful tips on how to stay connected with your locum.

Guidelines for Return of Service (ROS) through Locum Work

Physicians who have signed a post-graduate Return of Service (ROS) Agreement are allowed to locum in an eligible community at the start of their ROS term.

Participants may return service for up to six months as a locum in one or more eligible communities and in one or more facilities. Locum work is acceptable, provided it is a full-time arrangement in an eligible community.

ROS as a locum has to be agreed to in advance and in writing. If you have any questions, please contact ROS@healthforceontario.ca.

Locums are a valuable resource to hospitals and communities. Some physicians may not be the right fit for your community or hospital for various reasons, including practice interests. If a good locum isn't the right fit for your community, consider referring him/her to a neighbouring community. Also, remember your local [Regional Advisors \(RAs\)](#) are here to help you as well.

Appendix A:

Locum Evaluation Template

The following list of questions may be used to help develop your own follow-up survey to assess the locum physician's experience in your hospital or community.

We hope you had a pleasant and enjoyable locum experience at [insert clinic/hospital name here]. We would greatly appreciate your feedback, which will be used to help future locum physicians have a positive locum experience in [insert community].

1. How did you hear about this locum opportunity?
2. Was the orientation adequate? Is there anything we should do to improve the orientation?
3. Did you feel well supported and welcomed by other physicians and the clinic staff during your locum?
4. Were the accommodations suitable? YES NO
5. What was good/enjoyable/satisfying for you during your time with us?
6. Are there any issues or concerns you would like to share with us?
7. What could we have done better to have increased your satisfaction with the locum?
8. Would you consider returning at a later date to do another locum? If so, what dates are you available?
9. Other comments/suggestions

Thank you and we hope to see you again in the near future!

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Generic locum contract template

Insert Practice Name here

LOCUM - RESIDENT PHYSICIAN AGREEMENT

THIS AGREEMENT made as of the _____ day of _____, 20__

BETWEEN:

(Staff physician's name)

(the "Resident Physician")

- and -

(Locum physician's name)

(the "Locum Physician")

WHEREAS the Resident Physician requires temporary substitute Physician Services (as defined in this Agreement) for the medical practice of the Resident Physician;

AND WHEREAS the Locum Physician wishes to enter into an agreement with the Resident Physician to perform such Physician Services.

THEREFORE, in consideration of the covenants and agreements hereinafter contained, the parties here to agree as follow:

1. DEFINITIONS

- (a) "Act" means the Health Insurance Act, being R.S.O. 1990, Chapter H.6;
- (b) "Billing Number" means the Physician Billing Number assigned by OHIP;
- (c) "Insured Billings" means billings rendered by the Locum Physician which are eligible for payment by OHIP;
- (d) "Locum Physician Compensation" means all monies payable to the Locum Physician under this Agreement;

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- (e) "OHIP" means the Ontario Health Insurance Plan;
- (f) "Physician" means a physician as defined in the Act who is licensed and registered to practice medicine in the Province of Ontario;
- (g) "Physician Services" means the provision of medical advice, examinations, treatment and medical services generally, whether or not such services are insured services pursuant to the Act;
- (h) "Resident Physician Compensation" means the portion of Insured and Uninsured Billings payable to the Resident Physician;
- (i) "Schedule "A"" means the description of the Resident Physician's Practice attached to and forming part of this Agreement;
- (j) "Uninsured Billings" means billings rendered by the Locum Physician which are not eligible for payment by OHIP.

2. PURPOSE AND TERM OF THE AGREEMENT

- 2.1 This Agreement is intended to set out the basis on which the Resident Physician has retained the services of the Locum Physician. The nature of the medical practice for which the Locum Physician is to provide such services is that described in Schedule "A".
- 2.2 The term of this Agreement shall be for the period commencing at 12 am on the XX day of MonthX and ending on the XX day of MonthX, 20XX.
- 2.3 Upon execution of the Agreement, an executed copy shall be provided to each party.
- 2.4 The Resident Physician and Locum Physician shall extend the term of the Agreement only by the written approval of both.

3. OBLIGATIONS OF THE RESIDENT PHYSICIAN

- 3.1 In consideration of the performance of the Physician Services by the Locum Physician on behalf of the Resident Physician, the Resident Physician agrees as follows:
 - (a) to permit the Locum Physician to perform Physician Services for the patients of the Resident Physician during the term of the Agreement;
 - (b) to grant to the Locum Physician a right to use the medical offices and related facilities of the Resident Physician located at (insert clinic name and address here).
 - (c) to provide all the usual and necessary equipment, materials, examination rooms and drugs which are necessary or desirable to provide the Physician Services to the patients of the Resident Physician;
 - (d) to provide reception and office staff including nursing assistants at the levels equal to or better than those normally available to the Resident Physician;

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- (e) to provide access to patient records and related information as is necessary or desirable to permit the Locum Physician to perform Physician Services for the patients of the Resident Physician;
 - (f) to maintain and keep in force a policy or policies of insurance respecting liability for personal injury or property loss and name the Locum Physician as an additional named insured on such policy; provided however, that the policy shall not include coverage with respect to medical malpractice which insurance must be maintained by the Locum Physician.
- 3.2 The Resident Physician shall provide all the services and facilities described in Paragraph 3.1 at his own costs and expense. In particular, the Resident Physician warrants that all rents and charges payable with respect to the medical offices, medical equipment, materials and supplies are fully paid for, or if leased, such leases are in good standing.
- With respect to office and administrative staff, the Resident Physician represents and warrants that the employees are those of the Resident Physician and all costs of such staff shall be paid by the Resident Physician including wages, benefits, statutory deductions or income tax, Canada Pension, Workers Compensation, employer health tax and all similar costs and expenses. It is acknowledged and agreed that the Locum Physician is not responsible for any such amounts and that the Resident Physician will indemnify and save harmless the Locum Physician from any claims, costs or damages which may be claimed against or incurred by the Locum Physician.
- 3.3 The Resident Physician or his designate will provide an orientation period to the Locum Physician, which orientation shall include:
- (a) review of patient records where Physician Services are likely to be required;
 - (b) an explanation of how the Locum Physician shall keep records of Physician Services performed under the Agreement;
 - (c) review of office and billing procedures with administrative staff and the Locum Physician;
 - (d) a tour of the medical offices and, if applicable, clinic and hospital facilities to be used by the Locum Physician in performance of the Physician Services;
 - (e) a review of a schedule for performance of Physician Services including "on call" periods at hospitals or clinics, and other services outside normal office hours;
 - (f) clarification of those Physician Services, if any, for which the Locum Physician shall not be responsible and the arrangements for performance of such services by others, if at all.
- 3.4 The Resident Physician agrees that the Physician Services will be provided by the Locum Physician through the Resident Physician Billing Number. Both the Resident Physician and Locum Physician agree that they shall be entitled to compensation only as described in Paragraph 5 of this Agreement and waives a right to any further compensation or payment.

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4. LOCUM PHYSICIAN DUTIES

- 4.1 The Locum Physician agrees to provide Physician Services to the patients of the Resident Physician during the term of this Agreement. The Locum Physician agrees that he shall use the usual care and skill of a physician licensed to practice medicine in the Province of Ontario in performing such services. The Locum Physician acknowledges reviewing the requirements for the practice of the Resident Physician as described in Schedule "A" and that he shall provide those services except as otherwise excluded by agreement of the parties.
- 4.2 The Locum Physician hereby represents and warrants to the Resident Physician that:
- (a) he is now and will remain during the term of this Agreement a licensed and registered physician lawfully entitled to practice medicine in the Province of Ontario;
 - (b) he is now and will remain a member in good standing in the Canadian Medical Protective Association;
 - (c) his entering into this Agreement will not now nor will it in the future breach or offend any agreement, document or law which he may be a party to or bound by;
 - (d) he will execute and deliver such documents and consents as the Resident Physician may request to verify the accuracy of the warranties, representations and covenants made herein;
 - (e) any statements made in the application for the Locum Physician position are true.
- 4.3 The Locum Physician agrees to comply with the usual office procedures of the Resident Physician including procedures with respect to billing and accounting practices.
- 4.4 The parties agree that all Insured and Uninsured Billings shall be paid to the Locum Physician and agree to the distribution of such billings in accordance with the distribution described in Paragraph 5 of this Agreement. The Locum Physician, at his option, may arrange for Insured and Uninsured Billings to be rendered through any of the following:
- (a) the Locum Physician's computer billing system;
 - (b) the Resident Physician's computer billing system; or
 - (c) a physician billing service bureau designated by the Locum Physician.
- 4.5 The parties are entering into this Agreement on their mutual understanding that no Goods and Services Tax (HST) is payable with respect to any aspect of the arrangement between them. In the event HST is payable by either of the parties, they agree to co-operate with each other to establish the minimum amount payable.

Each agrees to remit to the other or to the Excise Tax Branch, Revenue Canada such reports, calculations and moneys as may be determined to be payable. Each agrees to indemnify the other with respect to any obligation either may incur with respect to such payments to the extent such obligations are the responsibility of the other. Such amounts may be dealt with as a Billing Adjustment.

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5. PAYMENT AND DISTRIBUTION OF BILLINGS

- 5.1 Locum Physician and Resident Physician agree that the Resident Physician will pay the Locum Physician a sessional rate of \$XXX per day or \$XXX per half day. The regular daily hours are as follows:
 - 9 a.m. – 5 p.m. Mondays, Tuesdays, Thursdays
 - 9 a.m. – 12 p.m. Wednesdays
 - 9 a.m. – 4 p.m. Fridays
- 5.2 The Locum Physician and Resident Physician agree that the Locum Physician is entitled to bill and retain all of the following uninsured fees:
 - (a) WSIB
 - (b) Private patient services (sick notes, forms, etc.)
 - (c) Legal and insurance forms (less any dictation costs)
- 5.3 The Locum Physician is entitled to XX% of all OHIP billings.

6. RELATIONSHIP OF THE RESIDENT AND LOCUM PHYSICIAN

- 6.1 The Resident and Locum Physicians acknowledge that this Agreement does not constitute a partnership arrangement or joint venture and that neither has the right to contract in the name of the other and that liabilities incurred by one shall not be assumed by the other.
- 6.2 The Locum Physician agrees that he is not an employee of the Resident Physician and that he is acting as an independent contractor for purposes of the services provided on behalf of the Resident Physician.

7. NUMBER AND GENDER

- 7.1 It is agreed that unless the context of this agreement requires otherwise, the singular number shall include the plural and vice versa, the number of the verb shall be construed as agreeing with the word so substituted, words importing the masculine gender shall include the feminine and neuter genders, and words importing persons shall include firms and corporations and vice versa.

IN WITNESS WHEREOF the parties hereto have executed this Agreement.

Witness

RESIDENT PHYSICIAN

Witness

LOCUM PHYSICIAN

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SCHEDULE "A"

DESCRIPTION OF RESIDENT PHYSICIAN'S PRACTICE

(Insert staff physician's name here) practices out of a medical building located at (insert clinic address here) in (Hamilton, Ontario). He works with (#) other family physicians, nurse practitioners, registered nurses and various administrative staff. His practice is comprised of an older population which numbers about (# of rostered and # of unrostered patients) in total. (Insert staff physician's name here) works out of (#) exam rooms in the lower level of the building along with his full-time nurse, (insert name of nurse/nurse practitioner). The clinic is paperless and uses (software name) for its electronic medical records. There are a full range of allied health providers available at (insert practice name) such as social workers, a pharmacist consultant and a registered dietitian. (Insert practice name) is part of the larger (Hamilton Family Team).

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For more information or questions,
please contact your local Regional Advisor:

www.healthforceontario.ca/ra