



**City of Kingston
Report to Council
Report Number 25-230**

To: Mayor and Members of Council
From: Craig Desjardins, Director, Office of Strategy, Innovation & Partnerships
Resource Staff: Dajana Turkovic, Workforce Development Analyst
Date of Meeting: October 7, 2025
Subject: Mid-Year Update Family Physician Recruitment

Council Strategic Plan Alignment:

Theme: 4. Foster a Caring and Inclusive Community

Goal: 4.3 Increase access to healthcare professionals and services.

Executive Summary:

The purpose of this report is to provide Council with a mid-year update highlighting the significant progress made in attracting and retaining family physicians since the last Council [Report Number 25-119](#) in April.

The City's Family Physician Recruitment Program has exceeded expectations and nearly exhausted the budget approved by Council in [Report Number 25-119](#). This summer, the community welcomed eight new family physicians, with three more expected this fall. Since the program's launch in 2022, a total of 33 new family physicians have been successfully recruited-including recent medical graduates, international physicians, and those relocating from other provinces.

Primary care in Kingston will see significant shifts when it comes to universal access over the next year. Upcoming changes in 2026 to nurse practitioner funding – part of a new interpretation of the Canada Health Act taking effect on April 1, 2026 – will enable NPs to bill OHIP directly. In addition, we expect that rostering of patients will continue at the Midtown Kingston Health Home as well as additional initiatives from the regional Ontario Health Team (OHT).

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As a result, the City can begin shifting its focus from active recruitment to a succession strategy centered on retirement and replacement planning. This approach will help prepare for anticipated retirements over the next five years, while gradually returning responsibility for primary care to the Province and the OHT.

With funds provided by Council in April substantially spent, staff recommend Council approve an additional \$400,000 to sustain momentum and implement this transition strategy over the next year.

Recommendation:

That Council approve the allocation of \$400,000 from the Working Fund Reserve to support the continued delivery of the Kingston Family Physician Recruitment Program over the next year; and

That Council direct staff to begin transitioning the family physician recruitment program to a retiring physician recruitment focus, designed to stabilize access to care by ensuring practice succession, while reducing the City's long-term role in direct physician recruitment.

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Authorizing Signatures:

ORIGINAL SIGNED BY DIRECTOR

**Craig Desjardins, Director, Office
of Strategy, Innovation &
Partnerships**

ORIGINAL SIGNED BY CHIEF

ADMINISTRATIVE OFFICER

**Lanie Hurdle, Chief
Administrative Officer**

Consultation with the following Members of the Corporate Management Team:

Paige Agnew, Commissioner, Growth & Development Services	Not required
Jennifer Campbell, Commissioner, Community Services	Not required
Neil Carbone, Commissioner, Corporate & Emergency Services	Not required
David Fell, President & CEO, Utilities Kingston	Not required
Desirée Kennedy, Chief Financial Officer & City Treasurer	
Jenna Morley, City Solicitor	Not required
Ian Semple, Commissioner, Transportation & Infrastructure Services	Not required

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Options/Discussion:

The City's Family Physician Recruitment Program has proven highly effective over the past three years:

- 33 physicians recruited (including new and replacement positions), with another three anticipated this fall.
- Development and delivery of the Primary Care Clinic Innovation Grant Program that supported local clinics in the hiring of additional support staff, adoption of new technologies, and expansion of physical facilities.
- Support for innovative care models such as Midtown Kingston Health Home, Ontario's provincial pilot for team-based, interdisciplinary care with a focus on accessibility through geographic rostering.
- Establishment of strong recruitment partnerships with Queen's University, Southeastern Ontario Academic Medical Organization (SEAMO), KFL&A Public Health, Kingston Accommodation Partners, and the Eastern Ontario Physician Recruitment Alliance (EOPRA).

Reasons for Program Success:

Several factors have contributed to Kingston's success in recruiting and retaining family physicians compared with other municipalities:

- **Community-Based Recruitment Model:** While financial incentives such as the \$100,000 over five years offered by the City remain important, they have become standard across many communities. Kingston's true advantage lies in its community-driven, non-commission-based recruitment team, supported by local partners including KFL&A Public Health, the Kingston Chamber of Commerce, local clinics, and Kingston Accommodation Partners. This collaborative approach fosters trust and long-term engagement with physicians, avoiding the transactional pitfalls often seen in other jurisdictions.
- **Supportive Environment for Physicians:** Kingston offers professional flexibility, allowing physicians to maintain a family practice while pursuing academic or specialized interests. The presence of Queen's University and SEAMO supports the integration of teaching, research, and clinical practice, further enhancing Kingston's appeal as a destination for family physicians.
- **Work-Life Balance and Quality of Life:** Most recruited physicians are between the ages of 28 and 45 and many are starting or raising families. Kingston's relatively affordable housing, diverse educational options (including English, French, and private schools), and accessible community and recreational amenities make relocation especially appealing. Over the past two years, recruitment events have played a key role in the City's strategy, featuring experiences such as golf at the Cataraqui Golf and Country

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Club, a performance at the Grand Theatre, an afternoon of sailing at the Kingston Yacht Club, and a Ghost Trolley Tour paired with trivia at a local microbrewery.

- **Alignment with Modern Care Models:** Kingston supports a wide range of practice models, including the recently launched Health Home model, which is particularly appealing to younger physicians trained in team-based care. The City's leadership in implementing this model has positioned Kingston as a provincial innovator. Offering a spectrum of care models allows physicians to choose the approach that best suits their professional goals and lifestyle. These models include:
 - **Family Health Organization (FHO):** A group-based model (minimum six physicians) using blended capitation payments based on patient enrollment. Physicians must offer extended hours and have access to some multidisciplinary support.
 - **Family Health Network (FHN):** Similar to FHOs, FHNs require a minimum of six physicians and use blended capitation with patient enrollment. Extended hours and limited multidisciplinary support are also part of the model.
 - **Fee for Service (FFS):** Solo physicians under the Fee-for-Service (FFS) model are paid per service, with no requirement for patient enrollment or extended hours. While this model offers flexibility and independence, it lacks team-based support and is less popular among new graduates. However, a significant number of established Ontario physicians continue to practice under FFS, and international physicians often prefer it for its autonomy and flexibility.
 - **Community Health Clinics and Health Homes:** Physicians are salaried and work in varied group sizes with required patient enrollment and extended hours. These clinics offer extensive multidisciplinary support for comprehensive care.
 - **Family Health Group (FHG):** A minimum of three physicians operate under a fee-for-service model with added incentives. Patient enrollment and extended hours are required, but there is no team-based support.
- **Early Engagement with Medical Residents:** Kingston actively engages medical residents from Queen's University throughout their training by hosting events that foster connections with local physicians, showcase the city, and help build lasting professional and personal relationships.
- **Welcoming Community Integration:** Interviews with family physicians highlight the importance of social integration and professional support networks. Kingston's community-driven approach provides relocation assistance, mentorship, and opportunities to connect with peers, reducing barriers to entry and fostering long-term retention.

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Analysis

Transition Strategy: Retiring Physician Recruitment Focus

As Kingston nears the milestone of rostering all unattached patients, the next phase of the Family Physician Recruitment Program must shift toward succession planning. Like many communities across Ontario, a significant portion of Kingston's physicians are nearing retirement, and without structured support for practice transitions, thousands of patients risk becoming unattached once again. Provincial data reinforces the urgency of this shift: over 28% of Kingston's 114 rostering family physicians are aged 60 or older, collectively caring for more than 22,000 patients. Without a proactive succession strategy, these retirements could undo the progress made in recent years. The City will therefore prioritize recruitment incentives for physicians willing to assume the practices of retiring doctors. This approach not only secures continuity of care for patients but also reduces the disruption that occurs when long-standing family practices close.

A second key focus of the strategy is strengthening partnerships with the regional Ontario Health Team (OHT) and the Ministry of Health. Primary care is a provincial responsibility, and Kingston's temporary leadership in recruitment was a response to an urgent local need. With the Province investing \$2.1 billion into primary care, investments which include initiatives like the Health Home model, it's essential that funding and operational responsibility for recruitment transition back to the OHTs and the Ministry of Health. By working collaboratively, Kingston can ensure the systems and networks built over the past three years are embedded within the regional physician recruitment framework, while gradually reducing the need for municipal funding.

The third pillar of Kingston's transition strategy focuses on a data-driven approach to monitoring physician supply and patient demand. With tools like Ontario rostering data, GIS mapping, and Health Home planning resources, the City and its partners can better anticipate retirements and identify potential gaps before they emerge. Proactive monitoring will enable targeted recruitment, ensuring incentives are directed to high-priority areas and patient access is protected.

In terms of timing, the City will gradually reduce its direct role in recruitment. This includes scaling back municipal funding and staff involvement as responsibility shifts to the FLA OHT and the Ministry of Health.

Over time, the City's role will evolve into a supportive, facilitative one as we advocate for community needs, maintaining local partnerships, and providing strategic data insights. This measured exit strategy will safeguard recent gains while respecting provincial jurisdiction over primary care.

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Indigenization, Inclusion, Diversity, Equity & Accessibility (IIDEA) Considerations

Staff continue to collaborate with project partners, including the OHT, primary care clinics, and family physicians to address access barriers faced by underserved populations, including Francophone, Indigenous, senior, and high-risk health groups.

Financial Considerations

Staff are recommending that up to \$400,000 be allocated from the Working Fund Reserve to support the ongoing family physicians and clinic improvements initiatives to reduce unattached patients. The Working Fund Reserve is recommended as a funding source, as health care services are not a municipal responsibility and should not be funded as an ongoing municipal expenditure.

Contacts:

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Other City of Kingston Staff Consulted:

Dajana Turkovic, Workforce Development Analyst, Strategy, Innovation & Partnerships Department

Exhibits Attached:

None