



# Physician Workload Funding Application 2026/27

## ***Background and Objective***

This application is for physicians providing services to a Health Authority or Agency through an existing Service Contract or Salary Agreement who are experiencing significant and sustained growth in their workload that can be addressed by hiring/contracting additional physician resources. Prior to completing this application, please ensure you have reviewed the “Form User Guide and Advice” document that is a companion to this form.

## ***Incorporating Data to Demonstrate Measurable Workload Pressures***

Priority will be given to applications that effectively incorporate objective, reliable data on physician workload demonstrating measurable growth in hours, volume, complexity of services, and/or other workload characteristics. Data and analysis incorporated into the application should be measures of real-world service delivery, patient access, and available physician resources and not primarily derived from workload models. Please see *Physician Workload Funding 2026/27 User Guide and Application Advice* for recommendations on how to incorporate data.

## ***Key Dates and Reminders***

Physician applicants must complete all of Section 1 in the template provided and electronically submit the application to their contracting health authority by **July 29, 2026**.

Section 1 is to be completed by physician applicants without disproportionate support or input from their contracting agency. Section 2 will be completed by health authorities to solicit their operational input on the application and any additional data they deem relevant.

Health authorities will internally review and submit all applications to the Ministry of Health by October 15, 2026. The Ministry will communicate its funding decisions to the health authorities and Doctors of BC by March 1, 2027.

## ***Applicant Attestations***

I understand that...

- Workload Funding is available to add additional contracted FTE under the same terms and conditions as the existing Service Contract or Salary Agreement, which includes the same scope of service deliverables and the same FTE definition.
- Only one application may be submitted for each contracted clinical program. Additional submissions for the same program will be removed from review.
- A complete compensation review of all contracted physicians clinical earnings applying for Workload Funding under all payment models will be conducted by Ministry staff.
- Clinical programs compensated through Sessional Contracts are not eligible to apply for Workload Funding.
- Service Contracts require Physicians to co-operate with the Health Authority and make all reasonable efforts to provide it with the information it requires in order to submit encounter reporting.

## SECTION 1

*To be completed by Contracted Physicians / Medical Program Director*

Complete Section 1 in the template provided and electronically submit your application to your contracting health authority by **July 29, 2026**.

### ***Program Description (1800 character limit)***

Provide a summary of the current services provided by the program's physicians and the program's target population (e.g. program's existing scope of services, sociodemographic characteristics of patient group, catchment area/ communities covered).

### ***Service Complexity (1650 character limit)***

Describe how service complexity contributes to physician workload.

***Service Trends (2100 character limit)***

Describe demand for the program's services and how it has changed over time relative to the available resourcing under contract.

***Projected Demand and Complexity (1500 character limit)***

How, if at all, is demand for the program's services expected to change in the next three calendar years?

How, if at all, is service complexity anticipated to change in the next three calendar years? ***(650 character limit)***

***Workload Impacts (2000 character limit)***

How are the following aspects of care impacted by physicians' current workload?

- Accessibility to the program's target population
- Quality of services
- Volume of services delivered

***Physician Coverage and Human Resource Supply (1300 character limit)***

Describe the current physician coverage the program as a whole provides and the current ability of the program's physicians to provide coverage for one another.

How, if at all, is physician recruitment and retention impacted by the current workload? ***(650 character limit)***



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## Section 1

*Note: Health Authorities will provide input on the relative clinical value and operational viability of proposed additional or partial Full-Time Equivalent (FTEs) in their section of the funding application. For applications that do not receive additional funding, health authority endorsement is not a commitment to provide additional health authority funding for more contracted physician resources.*

### **Workload Funding Goals (2200 character limit)**

How does your program's current contract define an FTE? \_\_\_\_\_ hours (if range, please indicate)

What is an ideal number of additional physician FTEs that will have major impacts on managing workload growth? \_\_\_\_\_

What is the minimal number of additional physician FTEs that will be operationally viable and have a significant impact on managing workload growth? \_\_\_\_\_

How would the respective additional FTE(s) requested address the challenges from current workload pressures described in the sections above?

### **Additional Resources (1300 character limit)**

Please describe any additional resources necessary to support more physician FTEs in this program (e.g. equipment, human resources, clinical/office space).

## SECTION 2

### ***Health Authority Review and Recommendation (to be completed by the Health Authority)***

Incorporate any additional data or analysis available to the health authority that further characterizes physician workload for this service. The additional data and analysis provided can support Section 1 and/or provide an alternative interpretation of the workload pressures in the service. Health authorities are encouraged to conduct their own analysis of the operational requirements of the program per workload relative to available physician resourcing and only request additional FTE where they are confident in their management of the existing contract and the operational value is clear.

*An endorsement of additional FTE(s) by a health authority only indicates their support for the improved operational goals of this funding application. It is not a commitment to provide additional health authority funding for physician resources.*

**Please complete Section 2 and electronically submit this application to the Ministry of Health by **October 15, 2026** in the template provided.**

#### ***Health Authority Review (3200 character limit)***

Describe the objective operational value of the funding proposal from the health authority's perspective, **referencing the workload issues cited by the applicants and providing additional data and analyses to illustrate trends in service demand relative to available physician resources.**

**Health Authority Recommendation (950 character limit)**

What is the maximum number of additional FTEs requested the health authority sees operational value in? \_\_\_\_\_

What is the minimal operationally viable number of additional FTE the health authority can implement to respond to workload growth in the program? \_\_\_\_\_

Factoring in known trends in recruitment and retention, how many additional FTE does the health authority expect it can contract in the program by FYE 2027/28? \_\_\_\_\_

*If the health authority supports a different number of additional FTEs than the physicians, please explain.*

*If a partial FTE allocation poses a challenge to operationalizing additional funding, ensure it is noted in your response.*

Regardless of funding source:

*How many temporary FTEs have been added to the program in the previous 3 fiscal years? \_\_\_\_\_*

*How many permanent FTEs have been added to the program in the previous 3 fiscal years? \_\_\_\_\_*

**Resource Considerations (1600 character limit)**

Describe any alternative and/or additional administrative, technological, human resource, and/or policy changes that your health authority is planning or able to institute to address the workload issues identified in the application, and the timeframe for implementing these changes or potential changes.

Describe any ongoing program vacancies or potential recruitment challenges (e.g. scarcity of physicians with the necessary training, credentials). **(825 character limit)**