

UNMATCHED CANADIAN MEDICAL GRADUATES

May 29th, 2018

Ottawa, ON

Canadian Federation of Medical Students

Fédération des étudiants et des étudiantes en médecine du Canada

EXECUTIVE SUMMARY

This year, 115 new graduates from Canadian medical schools did not match to a Canadian residency position and therefore are unable to practice as physicians. The number of Canadian medical graduates (CMGs) that are unsuccessful in matching to a residency program has risen sharply in the last decade. According to a report by the Association of Faculties of Medicine of Canada, this number is projected to increase to over 140 by 2021 unless urgent and purposeful action is taken.

The most significant contributing factor to the unmatched Canadian medical graduate (uCMG) crisis is the decreasing ratio of available residency positions to Canadian medical student applicants per given year. Residency positions are provincially funded, hosted by universities and delivered in hospitals and clinics. However, medical students apply to residency positions through an integrated Canada-wide system facilitated by the Canadian Resident Matching Service (CaRMS), thus creating significant flow across provincial borders. The uCMG crisis is therefore a Canada-wide problem requiring a Pan-Canadian solution.

In response to the current uCMG crisis, the Canadian Federation of Medical Students (CFMS) calls on the federal government and provincial and territorial governments to:

1. Work with the provinces and territories to create and fund residency positions to achieve a ratio of 120 Canadian residency seats for every 100 Canadian medical graduates.
2. Commit to a Pan-Canadian strategy for effective and socially-responsible physician and health workforce resource planning that is evidence-based and transparent to both medical trainees and the public.
3. Discuss the issue of unmatched Canadian medical graduates and proper physician resource planning at a federal provincial-territorial health ministers meeting.

MEDICAL EDUCATION AND RESIDENCY

Completing a residency is the only way that medical school graduates can practice as independent physicians in any jurisdiction in Canada. While residency is salaried employment, it is the second half of necessary medical training. The process of matching graduates to residency positions is carried out by the Canadian Resident Matching Service (CaRMS) – an independent third-party steward. In their final year of medical school, medical students apply to residency programs across the country through CaRMS and are subsequently interviewed by programs. Residency programs then rank applicants while applicants in turn rank programs. The CaRMS algorithm matches students to residency programs based on these rank order lists. Students are legally bound to complete residency in the program to which they have matched. Students who do not secure a position in the first iteration of the CaRMS match have an opportunity to apply to unfilled seats in a second iteration that follows a similar process.

HOW DID WE GET HERE?

The number of uCMGs has increased six-fold in the less than a decade. In 2009, there were 11 current year uCMGs, rising to 69 in 2018. When students who did not participate in the second iteration of the 2018 CaRMS match are taken into account, there were 115 current year CMGs left without a residency position in 2018. These numbers still do not account for

prior year uCMGs who were unsuccessful in their subsequent attempts to

match. Without intervention, the number of uCMGs is expected to rise to 141 by 2021, according to a report by the Association of Faculties of Medicine of Canada. **The single most significant contributing factor to the current crisis is the decrease in the ratio of residency positions to CMGs** – dropping from 112 for every 100 CMG applicants in 2009 to 101 positions for every 100 CMG applicants in 2018. This a product of increasing prior-year uCMGs participating in subsequent matches and some jurisdictions actually reducing the number of residency seats. When language differences in the number of available residency positions is accounted for, the ratio of Anglophone positions to Anglophone-only applicants may actually drop to less than 0.986 spots for every one participant in the first iteration of the match. Furthermore, one must also consider the disproportionately high number of international medical graduates (IMGs) also competing for CMG residency positions, particularly in the second iteration.

The vast majority of uCMGs are fit and ready for clinical practice. **In the 2018 CaRMS match, 78% of uCMGs would have matched into a residency program had there been a position available to them.** Both the Canadian Federation of Medical Students (CFMS) and the Canadian Medical Association (CMA) propose that for every 100 Canadian medical

graduates there should be 120 Canadian residency positions available. This ratio is recommended in order to accommodate CMGs’ training needs, as well as those of the re-entry cohort and IMGs. Moreover, there is evidence to suggest that the match algorithm works best with more degrees of freedom, which a 1:1.2 ratio would provide.

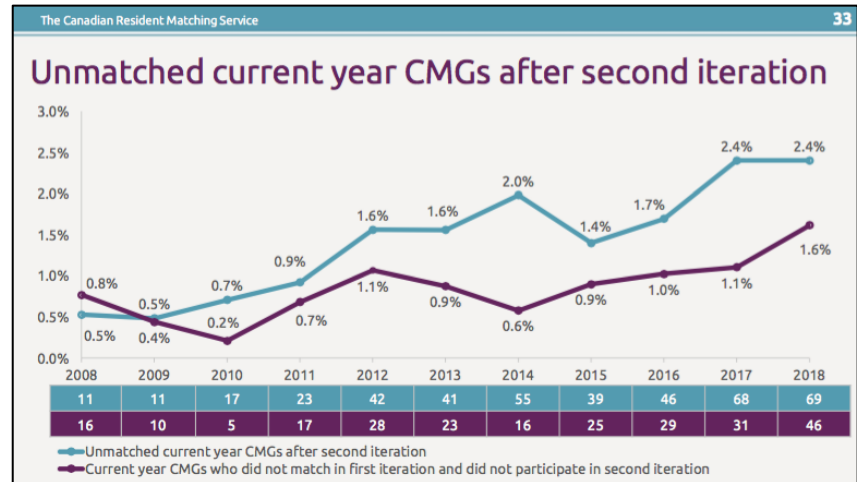


Figure Source: CaRMS 2018

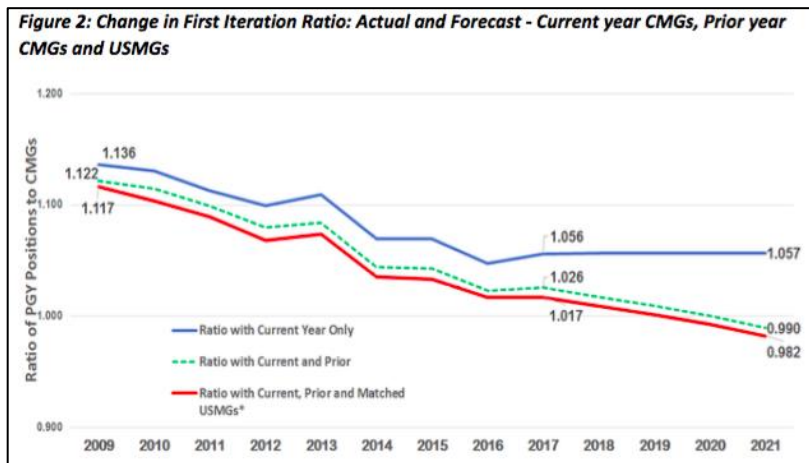


Figure Source: AFMC 2018

IMPACT ON UNMATCHED GRADUATES

Not securing a residency position after completing medical school is an unfavourable outcome of the CaRMS match. These students are often left in a state of limbo. Some medical faculties allow their unmatched students to take an additional year of medical school and defer graduation. Other uCMGs may pursue graduate degrees or transitional programs.

Most uCMGs re-apply to the match in the following year's cycle but with increasingly unsuccessful rates. Some opt to complete residency outside Canada with little hope of returning and many sadly leave medicine altogether. *There is a significant emotional and financial toll associated with going unmatched.* Along with often feeling isolated and anxious about their futures, many uCMGs are required to begin paying back their student loans and lines of credit often amounting to over \$100,000. Yet, unlike their matched peers, uCMGs do not make an income. In fact, students are often required to pay an additional year of tuition for an enrichment year to allow them to apply for residency in the next year's cycle, further incurring significant expenses. Unmatched students are thus a vulnerable population on their own, unfairly impacted by an increasingly failing system.

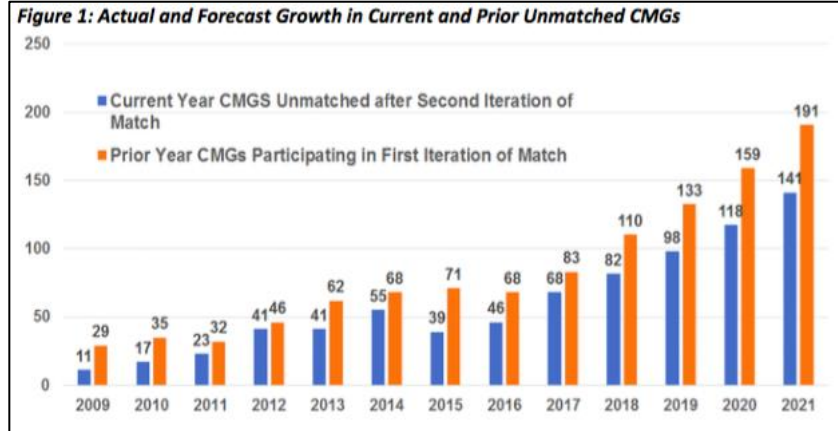


Figure Source: AFMC 2018

WHY THIS MATTERS TO CANADIANS

The rising number of uCMGs poses significant risk to physician resource planning in Canada. *Medical education is heavily subsidized by the Canadian taxpayer* – to the tune of an estimated \$200,000

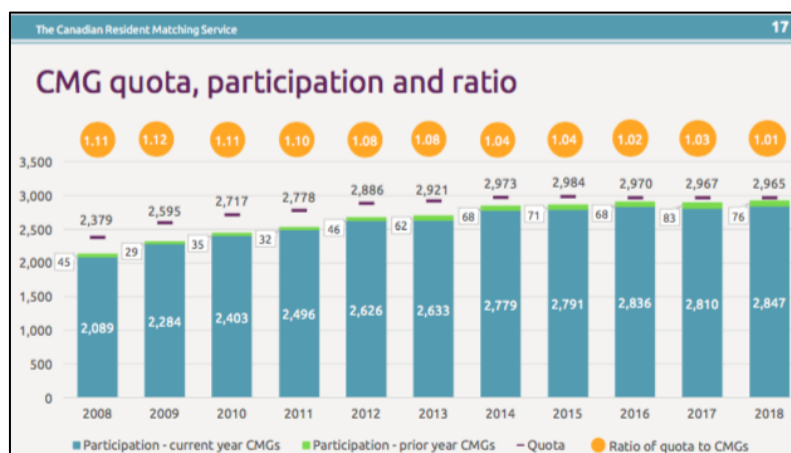


Figure Source: CaRMS 2018

health care needs of the population are growing. Having large cohorts of ready-for-practice medical graduates unable to complete their training and enter the Canadian health workforce is itself a barrier to ensuring quality healthcare delivery to Canadians.

per medical student – in recognition of how critical the need for future physicians is to the function of Canada. Students who do not match and are now unable to practice as physicians and serve Canadian society *represent millions in wasted taxpayer dollars.* Many Canadians still experience barriers to specialist and generalist care; the number of physicians per capita in this country is well below the OECD average, and the

RECOMMENDATIONS

The rise in unmatched medical graduates diminishes the number of medical personnel available to serve patients across the country. *As a complex, inter-provincial system, tackling this issue requires collective action on the part of our parliamentarians, ministries and medical faculties.* The matching system is Canada-wide, with hundreds of students moving across provincial lines to complete residency. There is a strong need for coordinated action and health human resource planning in order to solve this crisis; without provincial coordination, such issues will continue to grow.

The Canadian Federation of Medical Students (CFMS) calls on the federal and provincial and territorial governments to:

1. Work with the provinces and territories to create and fund residency positions to achieve a ratio of 120 Canadian residency seats for every 100 Canadian medical graduates.

The number of uCMGs has increased consistently each year for the last decade. The compounding number of unmatched students should be resolved immediately through an increase in residency positions. Specific funds to support the creation of these seats distributed across the country will restore the system's ability to adequately match students to residency positions. The need for a buffer of 120 residency positions for every 100 CMG applicants is needed to allow for the best chance for students to match to residency programs.

2. Commit to a Pan-Canadian strategy for effective and socially-responsible physician and health workforce resource planning that is evidence-based and transparent to both medical trainees and the public.

With the anticipated culmination of the Physician Resource Planning Advisory Committee (PRPAC) 2-sided physician supply & public need model, Canadian health human resource leaders will have a more accurate tool to guide physician resource planning. Federal and provincial and territorial governments should commit to using this evidence-based tool in making decisions about physician resource planning including the allocation of residency positions.

3. Discuss the issue of unmatched Canadian medical graduates and proper physician resource planning at a federal provincial-territorial health ministers meeting.

The provision and distribution of residency positions across the country is a federal issue that requires inter-provincial coordination. Given the migration of students between provinces for residency, an integrated approach is necessary to successfully develop health human resource planning to benefit all Canadians. Such a meeting should consult key stakeholders in the medical community such as the CFMS, AFMC, CMA and CaRMS, as well as jurisdictional representatives.

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CONTACT US

For more information, please contact the Canadian Federation of Medical Students:

Henry Annan, President

president@cfms.org

Yipeng Ge, VP Government Affairs

vpgovtaffairs@cfms.org

Kaylynn Purdy, VP Education

vpeducation@cfms.org

Christina Schweitzer, VP Communications

vpcommunication@cfms.org