

Unmatched Canadian Medical Graduates

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DISCUSSION PAPER

Summary of Discussion Paper

Since 2018, the number of uCMG's has declined because of advocacy work done by individuals and organizations, such as the AFMC and CFMS. However, 79 uCMG's in 2020 is still too many. The Ontario government and CAF's work to provide supernumerary positions has helped provide time for implementing long-term solutions, but that time is limited. The CoVID-19 pandemic offers the opportunity to test two drastic changes to the residency matching process. The 2021 changes are the cancellation of all visiting electives and the implementation of virtual interviews, which will reduce the barriers to students applying and interviewing broadly. Future work will likely focus on increasing the ratio of residency positions to CMG's, supporting unmatched students, reviewing entry-level disciplines, evaluating the effects of the AFMC Elective Diversification Policy and changes in application trends, unblending 2nd iteration CMG positions, pan-Canadian HHRP, and developing a pan-Canadian resident transfer system.

Introduction

This year, 79 Canadian medical graduates (CMG's) did not match to a Canadian residency position and are therefore unable to practice as physicians.¹⁻² While this is lower than the 2018 peak of 123, there is concern that this decrease was primarily due to temporary rather than lasting changes, such as the one-time increase in Ontario residency positions in 2018.^{1,3-5} As a result of the relatively high unmatched rates, compared to 25 in 2009, considerable pressure is put on students to tailor their education towards matching rather than personal development.^{1,6-8} This pressure can lead to “high dive” strategies where students spend all their elective time in one discipline, limiting their ability to parallel plan.⁹ Going unmatched can be a devastating and life-changing experience that places significant emotional and financial stress on students as they attempt to reapply against worse odds in future years.¹⁰⁻¹² This paper aims to discuss the unmatched CMG (uCMG) problem and where work may focus in the future.

Analysis

The following components should be considered when discussing this topic:

Residency Positions

- The ratio of residency positions to CMG's dropped from 1.13 in 2009 to 1.04 in 2020.¹ When exclusively considering English-speaking positions; the ratio falls below 1.0.⁸ The AFMC and CFMS advocate for a 1.1 and 1.2 ratio respectively.^{6,8}
- Increasing residency positions without considering specialty competitiveness, pan-Canadian Health Human Resource Planning (HHRP), and application trends may not address the problem.^{5,8,13-15}
- Residents are eligible to participate in the 2nd iteration R-1 match and increasingly utilize it to transfer between programs, with 25 residents matching to new programs in 2020 displacing current CMG's.^{1,8,16}
- In 2018, the Ontario government created 53 supernumerary return-of-service residency positions for the 2019 match cycle to reduce the number of uCMG's.³ The Canadian Armed Forces (CAF) have also created additional positions with return-of-service contracts every year since 2018.¹⁷ Both initiatives provided short-term relief by reducing uCMG build-up, which peaked in 2018.^{2,4,18}
- In 2019, Ontario, Manitoba, and Calgary unblended 2nd iteration R-1 match positions to maintain unfilled CMG positions for CMG's rather than allowing International Medical Graduates (IMG's) to apply, after a recommendation by the AFMC.^{4,8} This decision is made collaboratively between medical faculties and their provincial governments.

Selection

- ~2/3 of uCMG's would match if a position were available to them.⁸
- The 2013 *Best Practices in Applications and Selection* (BPAS) report outlined recommendations for residency programs to improve transparency, equity and diversity, and the quality of their selection processes.¹⁹⁻²⁰ The CFMS and the AFMC have advocated for the implementation of BPAS and evidence-based selection processes, with the Canadian Residency Matching Service (CaRMS) operationalizing changes beginning with the 2020 R-1 match.^{6,8,21}
- In 2020, the AFMC Elective Diversification policy took effect, restricting students to 8-weeks of electives in any entry-level discipline to ensure students are well-rounded and parallel planning.²² This policy will impact students applying to highly competitive specialties most, such as those Zeng et al.⁵ described in Cluster C, who reported an average of 14.0 elective weeks and lower rates of parallel planning compared to other clusters.

Regional Trends

- Each year, more students leave Quebec than enter, leading to a net efflux of students, 50 in 2020, further reducing the number of English-speaking positions.¹ Interestingly, in 2020 31 of 56 unfilled residency positions were from the 3 Francophone universities.¹
- Residency positions are funded by provincial governments, meaning local policy decisions can impact the Match nationally. For example, current restrictions on Family Physicians in Quebec may contribute to the efflux of CMG's.^{4,8,15}
- Canadian US medical graduates (USMG's) have equivalent rights to CMG's, and each year there is a net influx of ~12 with a total of 28 USMG's entering Canadian residency programs in 2020.^{1,8,16}

Supports

- In 2017, the CFMS passed a position paper titled *Support for Unmatched Canadian Medical Students* to advocate for increased support for uCMG's, including standardized extension to clerkship curricula, career planning resources, and comprehensive wellness and mental health resources.⁶
- The CFMS annually organizes the Unmatched Peer Mentorship Network, to match current and past uCMG's for one-on-one mentorship and peer support, and the *Matchbook*, a publication to educate students about the Match, which includes *The Unmatched Scenario*.²³⁻²⁴
- Outside of Quebec, most schools allow unmatched students to delay graduation with extension-to-clerkship programs that facilitate research, delay repayment of loans, and maintain insurance to complete electives. Many schools also offer master's degree programs students utilize to increase their chances of matching.^{6,24} The CFMS and the AFMC have advocated for this and additional supports for students, such as career counselling, application feedback for uCMG's, a national peer mentorship network led by the medical faculties, and a pan-Canadian resident transfer system.^{6,8}

Advocacy

- In 2018 and 2019, the CFMS and Ontario Medical Student Association independently held Lobby Days with Federal and Provincial government officials to discuss uCMG's and physician services planning.²⁵⁻²⁷ In 2019, the UBC Medical Undergraduate Society similarly lobbied Provincial government officials to increase residency positions by 10%.²⁸
- In 2020, the CFMS created a group called the *uCMG Think Tank* led by the Director of Education to bring together various CFMS stakeholders to coordinate future uCMG advocacy efforts.

Future Directions

The following are areas where future work may focus:

Residency Positions

- Increasing the ratio of residency positions to CMG's to at least 1.1 with consideration of HHRP and application trends.^{5-6,8,13-15}
- Maintaining unfilled CMG positions for CMG's during the 2nd iteration of the R-1 Match across Canada, rather than allowing IMG's to apply for those positions.^{8,29}
- Developing a pan-Canadian resident transfer system to prevent the displacement of current CMG's while allowing current residents to pursue alternate careers.^{4,8}
- Reviewing and reducing the number of direct-entry residency disciplines to ensure they align with societal needs by supporting physician generalism and allowing for adjustment of career trajectory.^{4,14}

Selection

- De-emphasizing electives "as auditions and more as opportunities for learning."⁷ This has been discussed widely and will be tested with the decision to cancel 2020-2021 visiting electives.^{5,8,19-20,30} Evaluation of 2021 application and selection patterns may provide valuable information and inform future practices.
- Evaluating the AFMC Elective Diversification policy impact on the application, parallel planning, and selection practices will be necessary but will be less applicable to the 2021 R-1 match due to the cancellation of visiting electives.^{5,21,30}
- Further implementing the BPAS recommendations through increased collaboration between UME and PGME leadership and valuing diverse experiences, all CanMEDs competencies, diverse applicants, and not overemphasizing discipline- or site-specific electives.^{8,19-20}
- Reducing applicant costs by reducing application fees, using centralized or virtual interviews, and de-emphasizing the need for local electives to allow students to apply and interview more broadly.^{7-8,31} Virtual interviews will be trialed in 2021, presenting an opportunity to examine this in-detail.³²

Regional Trends

- Committing to pan-Canadian HHRP through the Physician Resource Planning Advisory Committee (PRPAC) to ensure local circumstances do not impact the integrity of the R-1 Match nationally and available positions meet population needs.^{8,14-15}

Supports

- Implementing a formalized feedback system for uCMG's after the 2nd iteration of the R-1 Match upon request, including composite application section scores and anonymous aggregate narrative comments.^{6,31}
- Organizing a national peer mentorship network, led by the AFMC and medical faculties, for past uCMG's to provide support and mentorship for current uCMG's.⁶

Summary

Since 2018, the number of uCMG's has declined because of advocacy work done by individuals and organizations, such as the AFMC and CFMS. However, 79 uCMG's in 2020 is still too many. The Ontario government and CAF's work to provide supernumerary positions has helped provide time for implementing long-term solutions, but that time is limited. The CoVID-19 pandemic offers the opportunity to test two drastic changes to the residency matching process. The 2021 changes are the cancellation of all visiting electives and the implementation of virtual interviews, which will reduce the barriers to students applying and interviewing broadly. Future work will likely focus on increasing the ratio of residency positions to CMG's, supporting unmatched students, reviewing entry-level disciplines, evaluating the effects of the AFMC Elective Diversification Policy and changes in application trends, unblending 2nd iteration CMG positions, pan-Canadian HHRP, and developing a pan-Canadian resident transfer system.

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