Canada's Faculties of Medicine by the Numbers

2011 CAPER-ORIS Forum

Steve Slade, Vice President Research and Analysis CAPER-ORIS

Canadian Post-MD Education Registry – Office of Research and Information Services

Association of Faculties of Medicine of Canada (AFMC)

Canadian Conference on Medical Education May 10, 2011 Toronto, Ontario, Canada

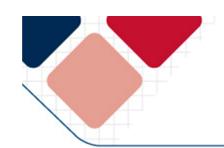






Overview

- Office of Research and Information Services (ORIS)
 - Office of the AFMC supported by Canadian faculties of medicine
- Canadian Post-M.D. Education Registry (CAPER)
 - Partnership of AFMC, CAIR, CFPC, MCC, RCPSC, F/P/T governments
- Together, CAPER-ORIS provide wealth of data on academic medicine in Canada



DataSource!

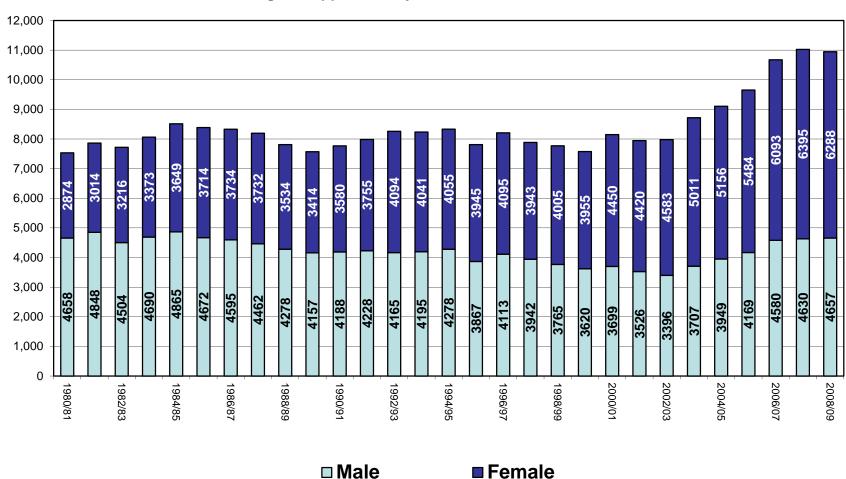
Support for informed health care decision-making



Data on all MD program applications and applicants:

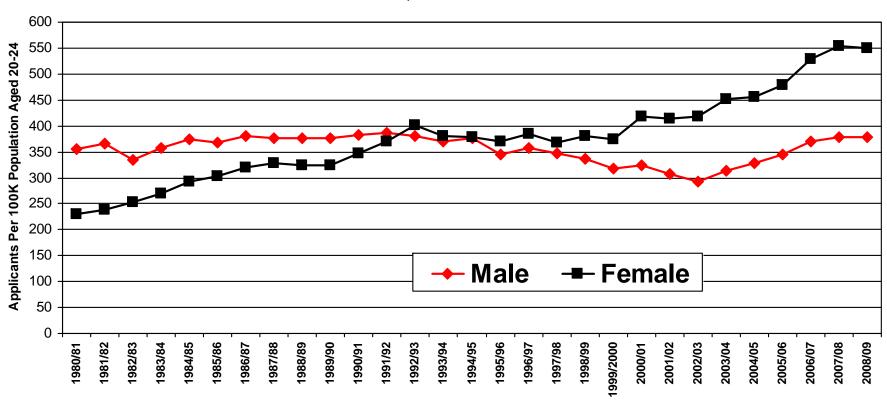
- What are the numbers and demographics of people applying to MD programs?
- How many applications do they submit?
- What are their chances of success?
- For how many years do unsuccessful applicants continue to apply?

MD Program Applicants by Sex, 1980-81 - 2008-09



Source: ORIS, AFMC, 2011.

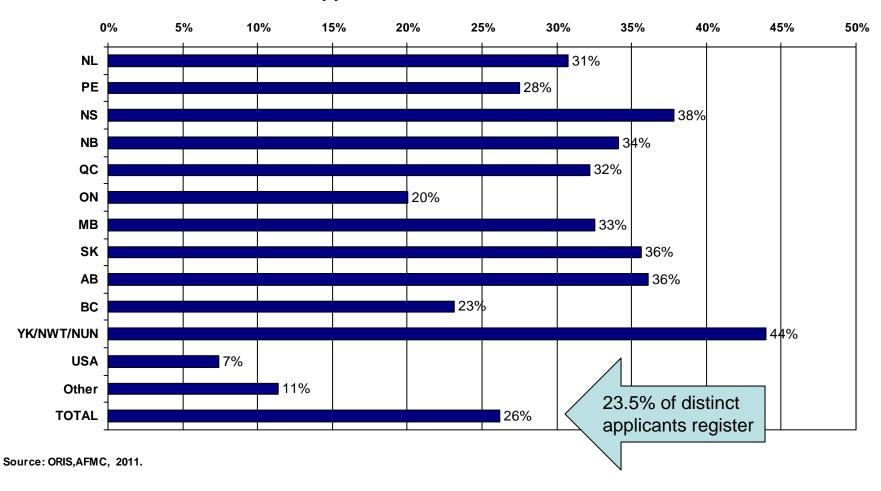
MD Program Applicants Per 100,000 Population Aged 20-24 Years, by Sex, Canada, 1980/81-2008/09



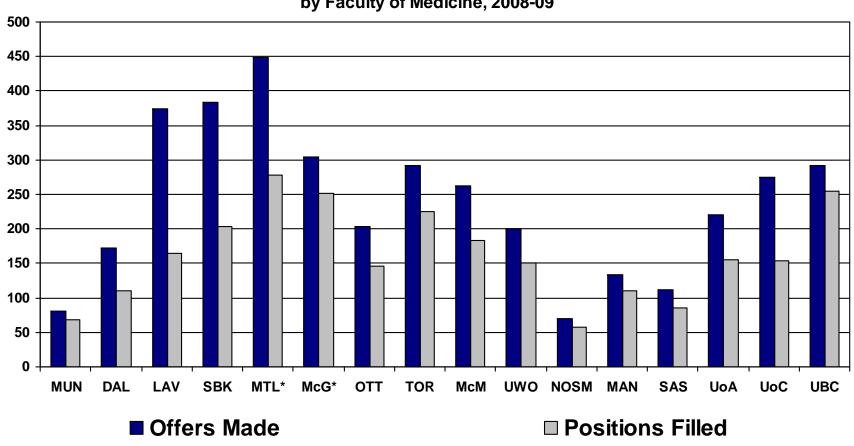
Source: ORIS, AFMC, 2011.

Note: Male and female applicant rates are expressed in relation to the male and female population.

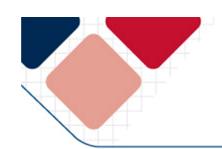
MD Program Offer of Admission Rates by Province/Country of Residence of Applicants, Canada, 2008-09



Number of MD Program Admission Offers Made and Places Filled, by Faculty of Medicine, 2008-09



^{*} Includes positions filled in annee prep. / pre-med. Source: ORIS, AFMC, 2011.



DataSource!

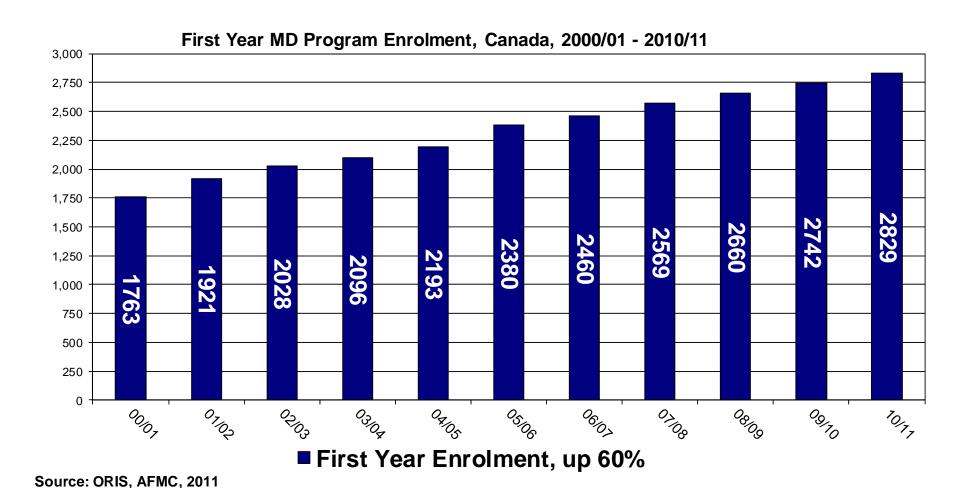
Support for informed health care decision-making

Undergraduate Medical Education Database AFMC's UGME database contains data on MID program students registered at faculties of medicine in Canada over time. Data elements permit analysis of socio-demographic trends among medical students, leaves of absence and attrition as well as enrolment growth at regional and satellife campuses. The UGME database measures changes in the size of the national cohort of medical students, the most significant predictor of Canada's future physician supply. Source and frequency of data collection: . Socio-demographic: gender, age, province or country of residence, legal status in Canada, country of citizenship. . 17 Canadian faculties of medicine . UGME details: medical faculty providing education, campus . Updated data is submitted in September of each year. (>2005/06), year of study, enrolment status (i.e. repeating year, prolonged program, leave of absence), program sought (MD/ PhD, MD/MSc...), quota type (regular, foreign contract) and Data Level and Availability . 2003/04 to 2010/11: Individual level records for all enrolment years per UGME students. Reporting Schedule 1978/79 to 2002/03: Aggregate level records. · Advance enrolment and MD graduation tables are published in March at www.afmc.ca. · Detailed UGME report and historical trends are published in the fall in AFMC's Canadian Medical Education Statistics report. available at www.afmc.ca. **Total UGME Enrolment by Gender** 7000 5600 4200 2800 1400 1976/77 1984/85 1992/93 2000/01 Tal: (513) 730-1204 axt. 227 E: Braslav@atric.ca WWW.AFMC.CA 265 Carring Asonus, Suito 800, Ottowa, Ontario K1S 261 Printed: May 201

Data on all UGME students in Canada:

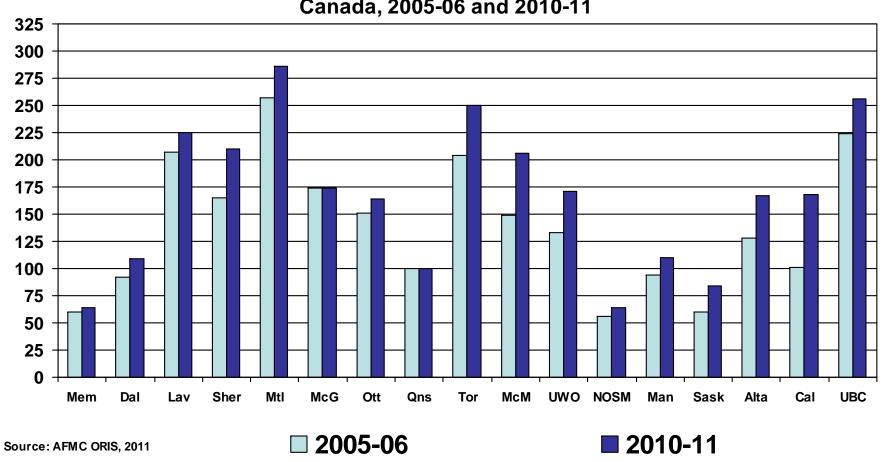
- How many medical students are on their way to becoming doctors?
- What are their demographic characteristics?
- Where are they studying?
- How are enrolment numbers changing?
- How long does it take to graduate?

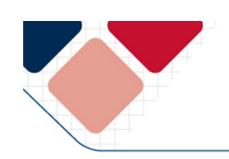




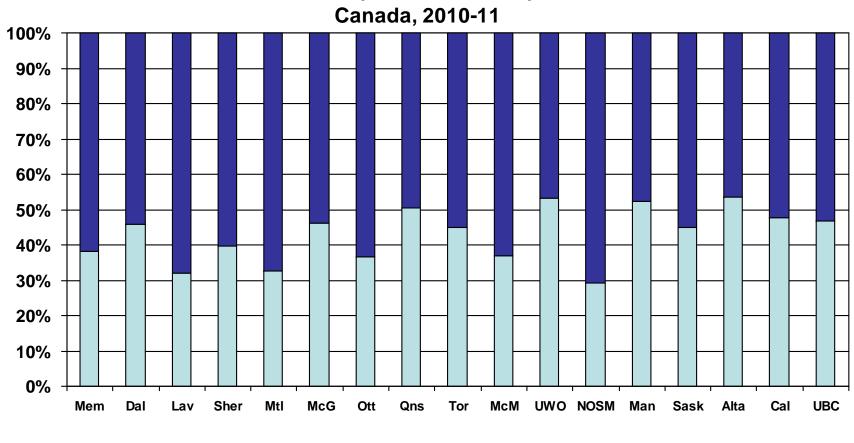


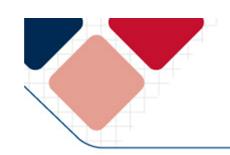
First Year MD Program Enrolment by Faculty of Medicine, Canada, 2005-06 and 2010-11



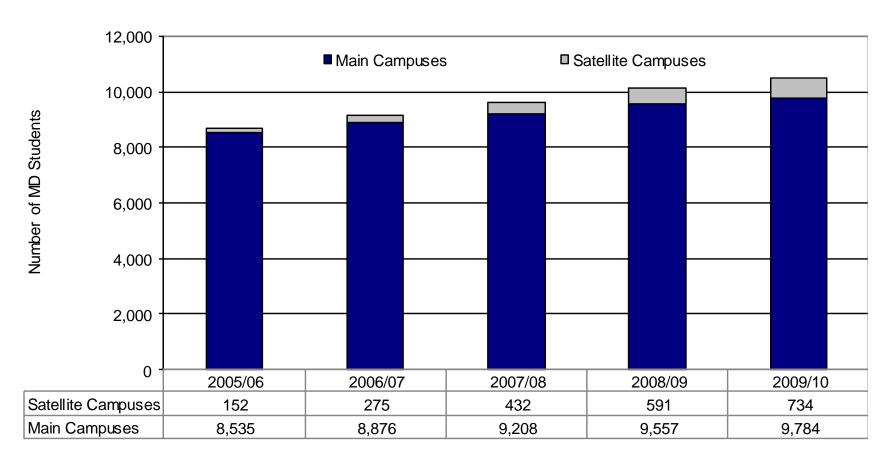


UGME Enrolment by Sex and Faculty of Medicine,

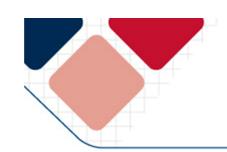




MD Program Enrolment by Site, Canada, 2005/06 - 2009/10

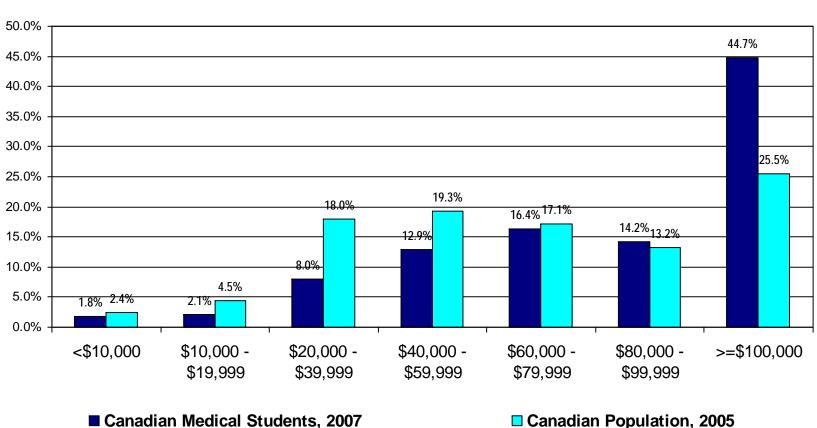


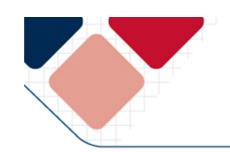
Source: ORIS, AFMC, 2010.



Not the UGME Database

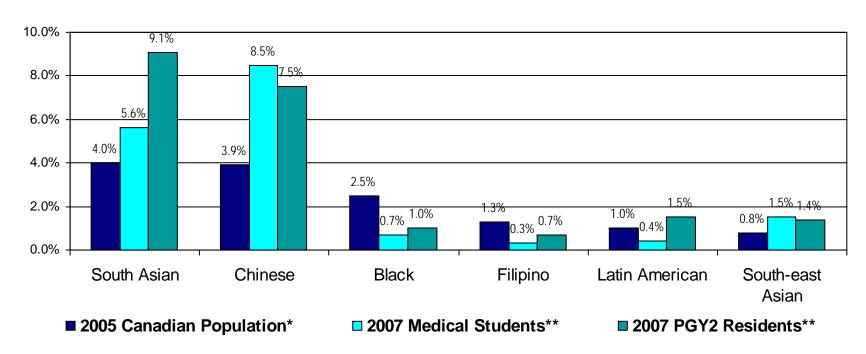
Annual Income Distribution of Canadian Families and the **Families of Canadian Medical Students**





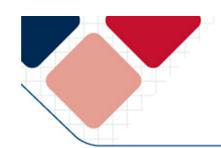
Not the UGME Database

Visible Minority Groups Among Medical Students, Year 2 Postgraduate Medical Trainees and the General Population, Canada



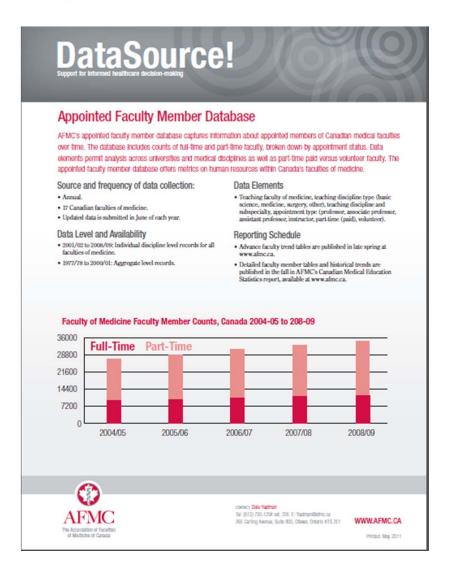
^{*} Statistics Canada, censuses of population, 2006; ** 2007 National Physician Survey. The College of Family Physicians of Canada, Canadian Medical Association, The Royal College of Physicians and Surgeons of Canada.

Note: The Employment Equity Act defines visible minorities as 'persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour.' South Asian includes, for example, 'East Indian,' 'Pakistani,' 'Sri Lankan,' etc. South-east Asian includes, ror example, 'Vietnamese,' 'Cambodian,' 'Malaysian,' 'Laotian,' etc.



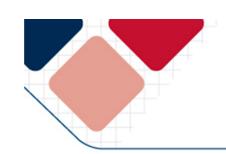
DataSource!

Support for informed health care decision-making

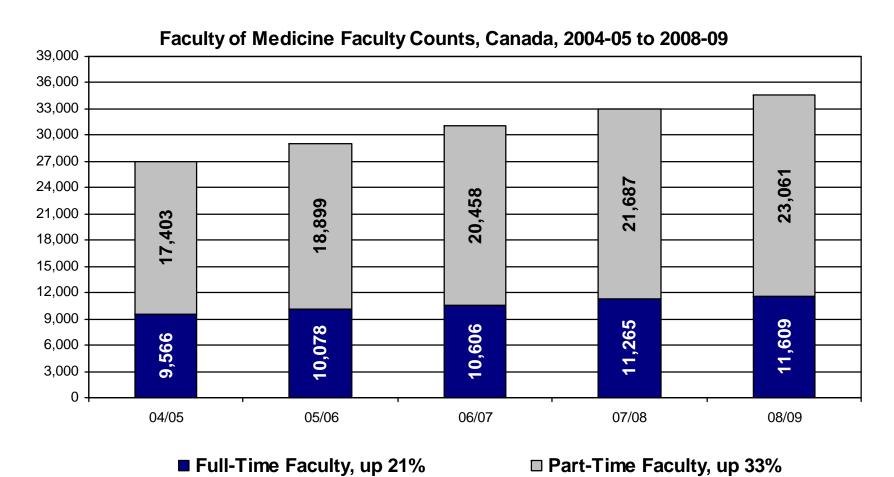


Aggregate data on appointed faculty members and teaching facilities:

- How many appointed faculty members are there?
- What is their appointment status?
- Among part-timers, how many are paid vs voluntary?
- What departments are they appointed to?
- Where does medical education take place?

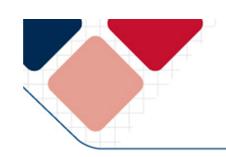


Faculty Member Database



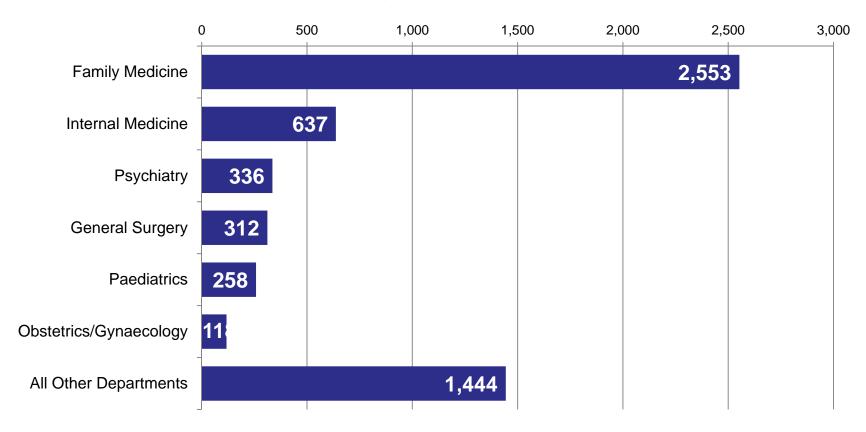
Source: AFM CORIS, 2010.

Note: Full-time faculty include professors, associate and assistant professors, instructors and other faculty. Part-time faculty includes paid and volunteer faculty members.



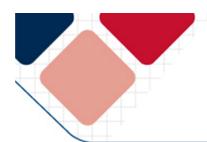
Faculty Member Database

Growth in the Number of Part-Time Faculty of Medicine Faculty Members, Canada, 2004/05 to 2008/09

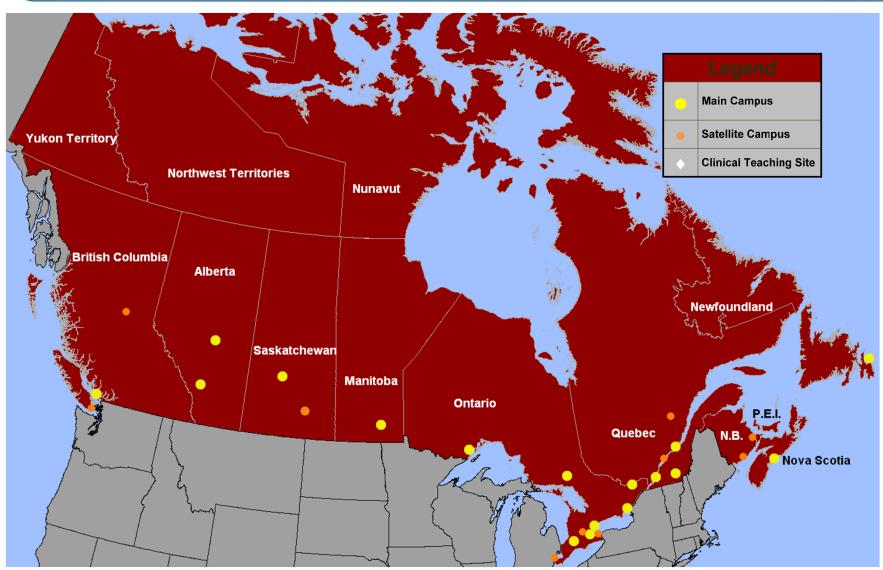


Source: AFMC, ORIS, 2011.

Note: Part-Time faculty includes paid and volunteer faculty members.



Medical Teaching Facilities





Medical Teaching Facilities





DataSource!

Support for informed health care decision-making

DataSource! Canadian Post-M.D. Education Registry The Canadian Post-M.D. Education Registry (CAPER) is the central repository for statistical information on postgraduate medical education in Canada, CAPER maintains individual-level data for all postgraduate medical residents and fellows. Data elements permit analysis across universities and trainee characteristics, such as place of MD graduation, legal status, age-sex and field of training. Data is captured longitudinally, from the time of entry to training, to the year of exit to practice location following post-M.D. training. The CAPER Database is a resource for informed healthcare planning with respect to the size and composition of Canada's physician workforce. · Training details: training faculty, training specialty, rank level, Source and frequency of data collection: M.D. school, M.D. country, M.D. year, source of funding, type · Annual of funder, contract start/stop dates, participation in dinician • 17 Canadian faculties of medicine. investigator programs, CaRMS R-1 Match Program (-2008/09), re-entry status, exit year, RCPSC certification status, year and · Updated data is submitted in November of each year Medical practice details: 2, 5, 10, 15 and 20 year practice loca-Data Level and Availability • 1988/89 to 2010/11: Individual level records for all trainees. Data Elements · Detailed postgraduate trainee charts, tables and trends are · Socio-demographic: gender, DOB, legal status, country of published each spring in CAPER's Annual Census of Post-M.D. Trainees, Provincial Reports and the Individual Field of Training First Year Post-MD Trainees by Place of MD Graduation, Canada, 1990/91 - 2010/11 Canada 2400 1800 1200 CAPER • Tel: (613) 730-1204 ext. 250 E: Parward@efms.ca 255 Carling Avenue, Sulfa 900, Ottawa, Ontario K15 2E1 Printed: May 2011

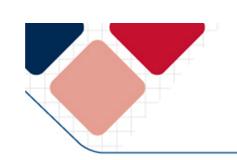
CAPER established in mid-1980's to:

- provide accurate information regarding the size, nature and distribution of post-M.D. programs
- develop a common classification system of post-M.D. trainee categories
- to assist medical schools, participating organizations and others by developing information tables regarding post-M.D. programs and trainees
- to provide a basis for research including longitudinal studies dealing with health care issues in Canada



CAPER's Core Data

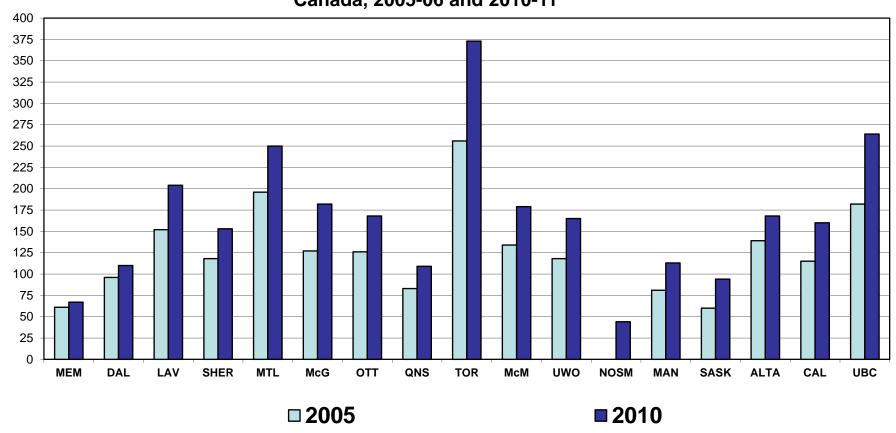
- CAPER #ID
- Age, sex, legal status
- School/Year of MD graduation
- PGME training faculty
- Field of training (CaRMS R1 program)
- Rank level (R1, R2...Fellow)
- Source of funding
- Clinical investigator
- Ongoing practice location (2yr, 5yr, 10yr, etc.)



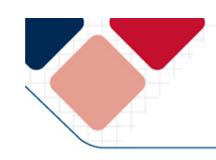
Example Questions

- How does growth at my faculty compare with other faculties?
- Where do our MD grads go for PGME?
- What health care needs are we meeting through our specialty allocation?
- Is it taking longer for trainees to complete their programs?
- How many physicians will come out of our medical education system in the future?
- Where do our grads set up practice?

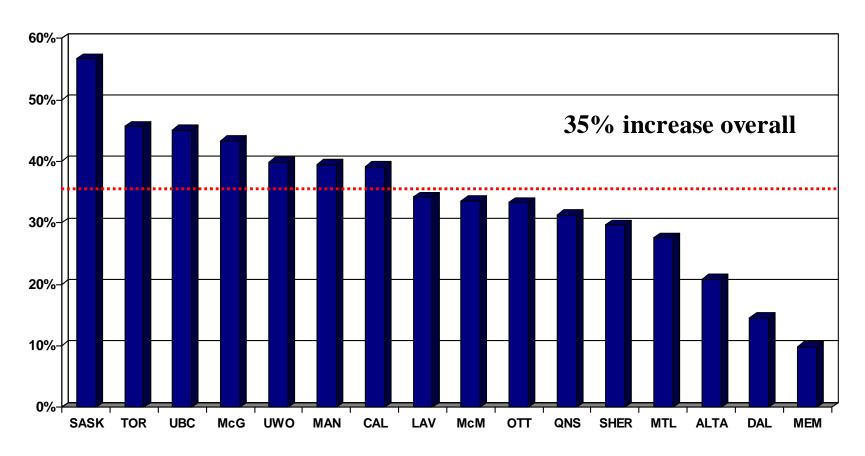
First Year Post-MD Enrolment by Faculty of Medicine, Canada, 2005-06 and 2010-11



Source: CAPER, 2011. Note: Ministry-funded trainees only.

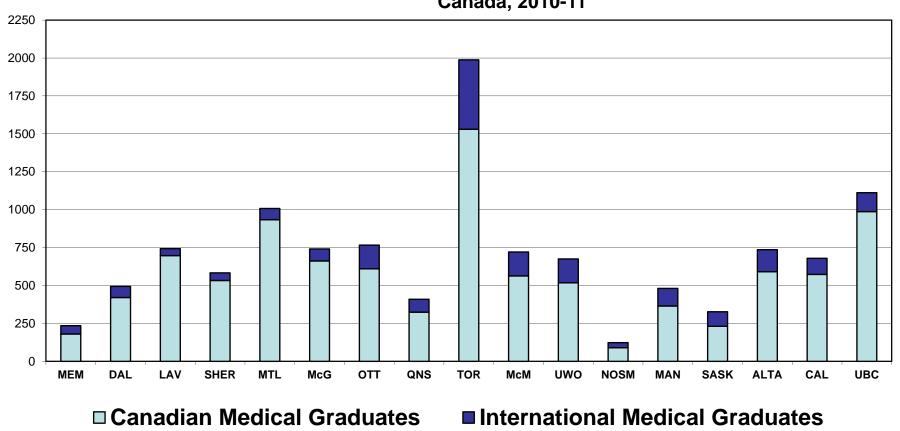


Percent Increase in First Year Post-MD Enrolment by Faculty of Medicine, Canada, 2005-06 to 2010-11



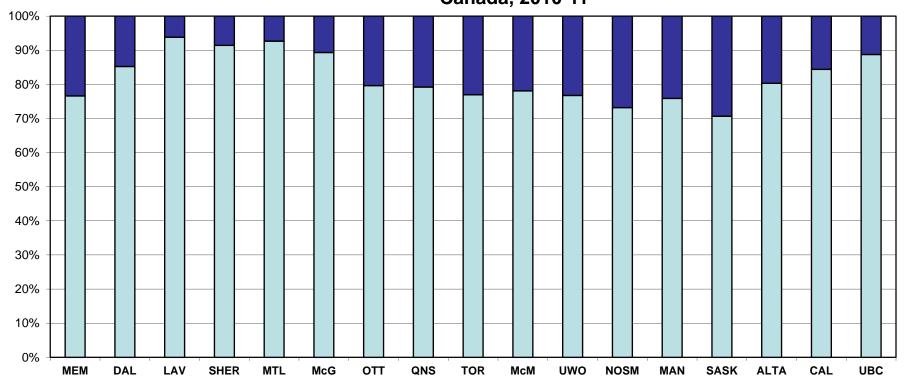
Source: CAPER, 2010. Note: Ministry-funded trainees only.

Post-MD Enrolment by Faculty of Medicine and Place of MD Graduation, Canada, 2010-11



Source: CAPER, 2011. Note: Canadian citizens / Permanent residents only.

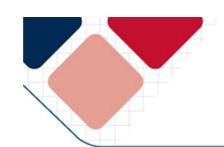
Post-MD Enrolment by Faculty of Medicine and Place of MD Graduation, Canada, 2010-11



□ Canadian Medical Graduates

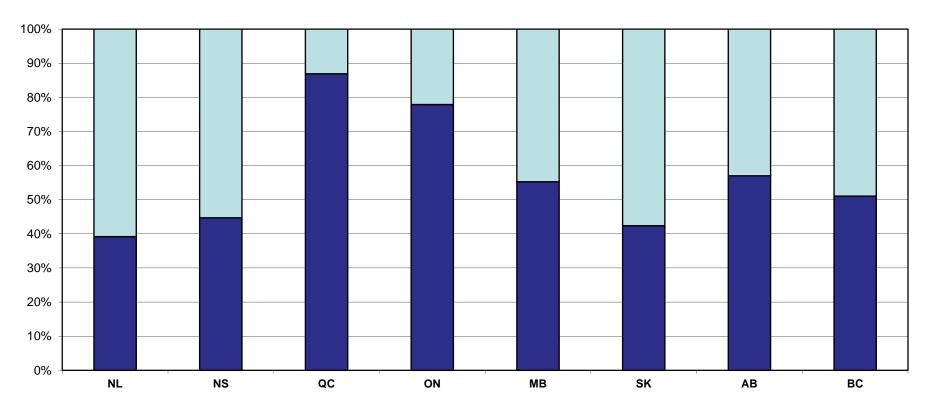
■ International Medical Graduates

Source: CAPER, 2011. Note: Canadian citizens / Permanent residents only.



Where do our MD grads go for PGME?

Province of Post-MD Training by Province of MD Graduation, Canada, 2010-11



■ MD Grads Enrolled in PGME Within Province

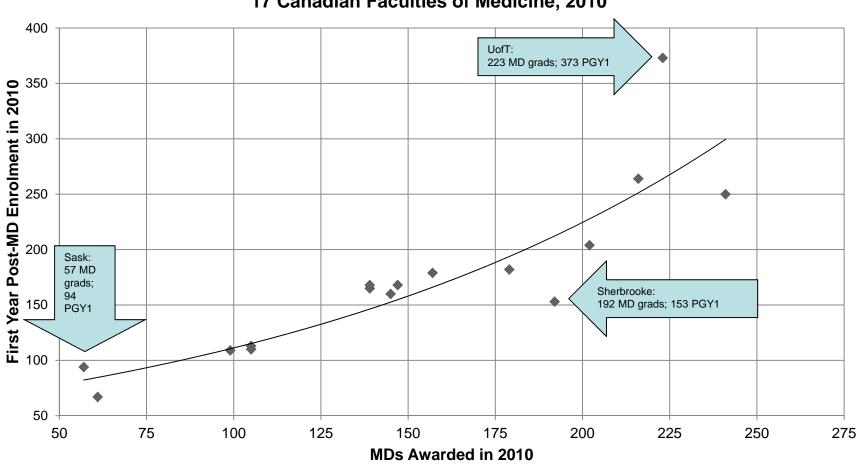
■ MD Grads Enrolled in PGME Outside Province

Source: CAPER, 2011. Note: Canadian citizens / Permanent residents only.



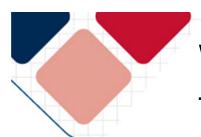
Where do our MD grads go for PGME?

MDs Awarded and First Year Post-MD Enrolment, 17 Canadian Faculties of Medicine, 2010

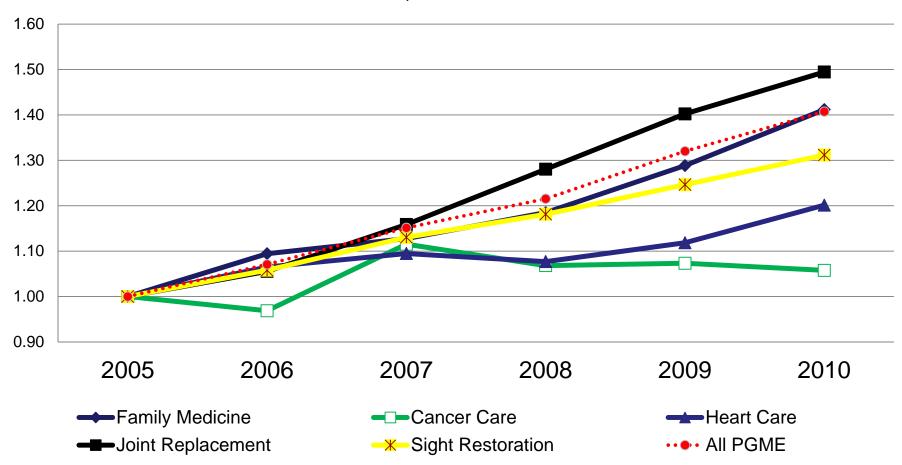


PGME training fields relate to stated health care priority areas. For example:

- Family Doctors (Family Medicine)
- Cancer Care (Radiation Oncology, Medical Oncology, Surgical Oncology, Gynecological Oncology)
- Heart Care (Cardiology, Cardiac Surgery)
- Joint Replacement (Orthopedic Surgery)
- Sight Restoration (Ophthalmology)

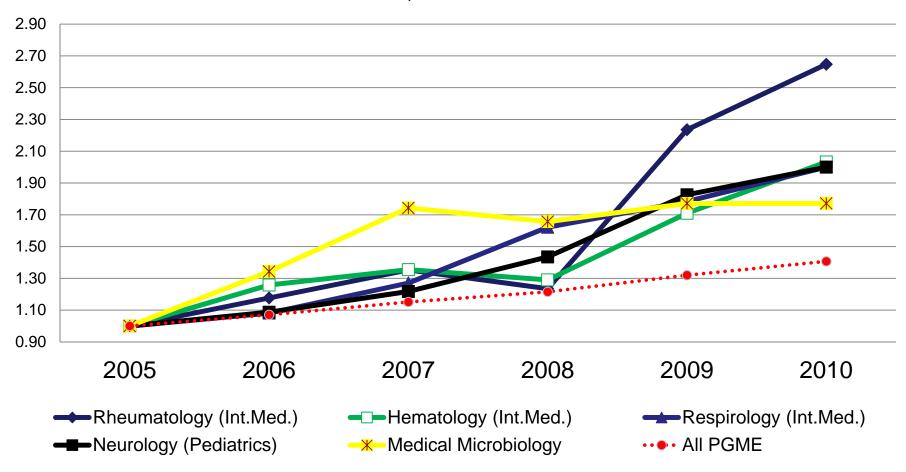


Indexed PGME Enrolment in Health Care Priority Areas, Canada, 2005-06 to 2010-11



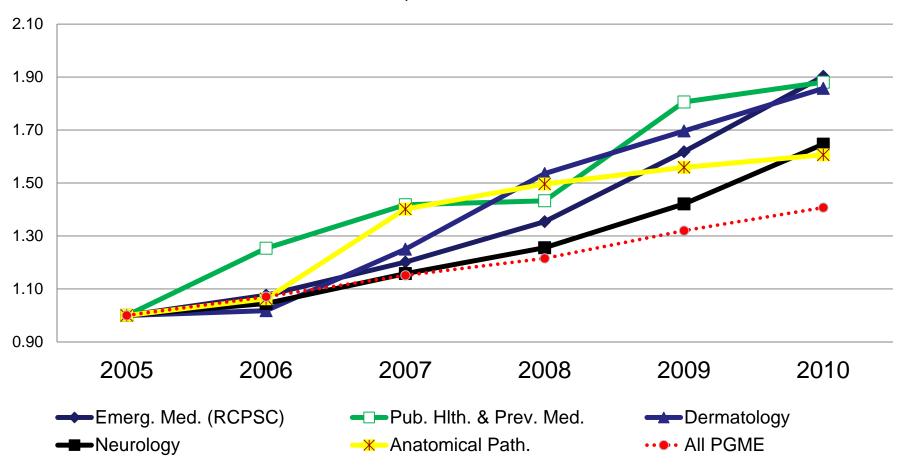


Indexed PGME Enrolment in Selected High Growth Disciplines, Canada, 2005-06 to 2010-11





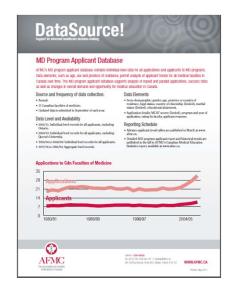
Indexed PGME Enrolment in Selected High Growth Disciplines, Canada, 2005-06 to 2010-11

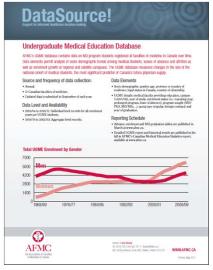




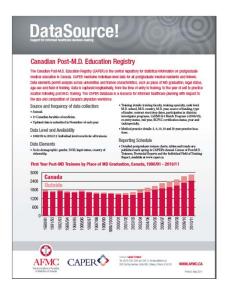
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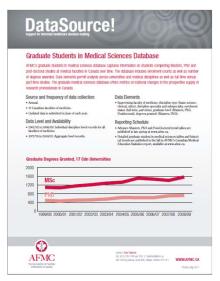
Support for informed health care decision-making

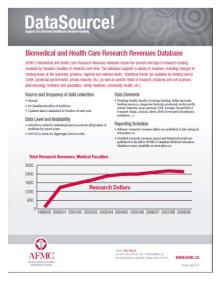










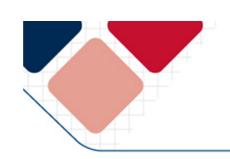




Grad Students

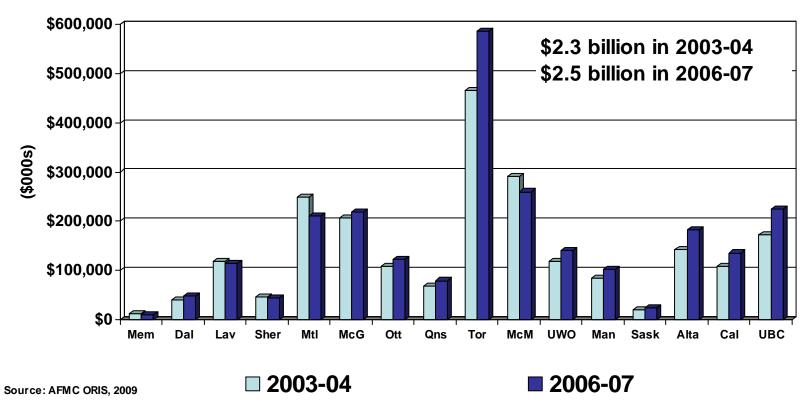
Research

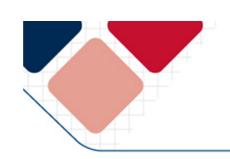
National IMG Database



Research Revenues

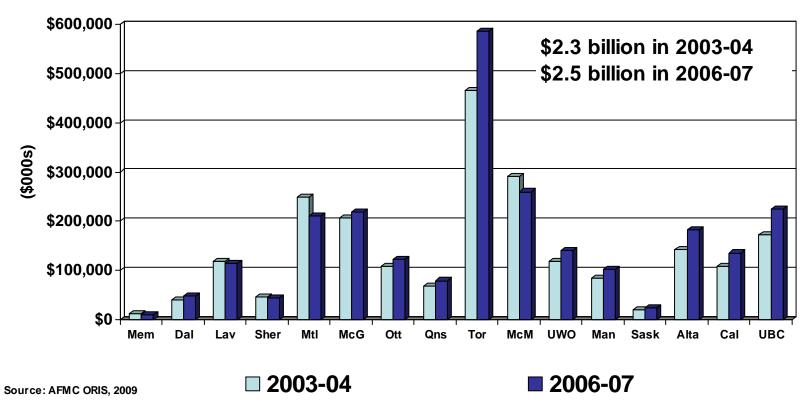
Biomedical and Health Care Research Revenues by Faculty of Medicine, Canada, 2003-04 and 2006-07

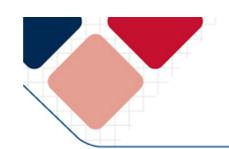




Research Revenues

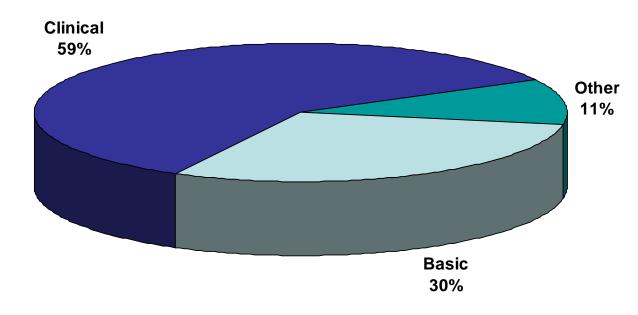
Biomedical and Health Care Research Revenues by Faculty of Medicine, Canada, 2003-04 and 2006-07





Research Revenues

Distribution of Reseach Revenues Across Broad Research Fields, Canada, 2006-07



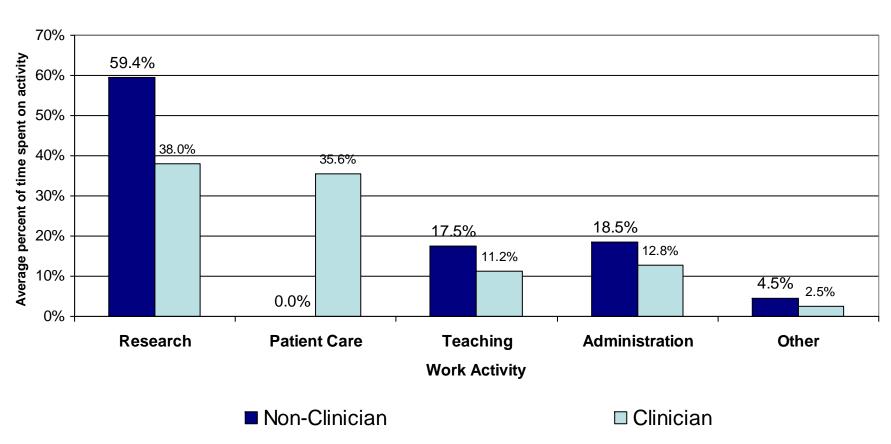
Source: AFMC ORIS, 2009.

Examples: Clinical includes IM, peds, etc.; Basic includes biochem, genetics, etc.; Other includes community health, etc..



Research Careers

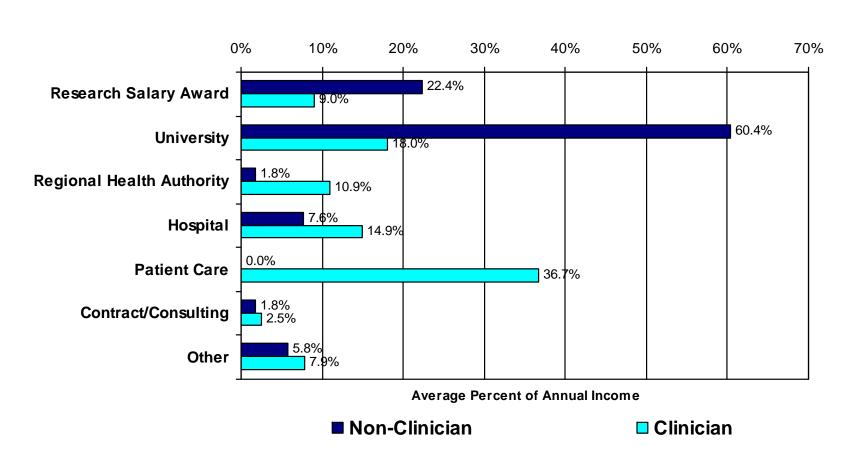
Time Distribution of Clinician and Non-Clinician Health Researchers, Canada, 2010

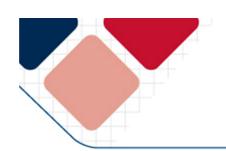




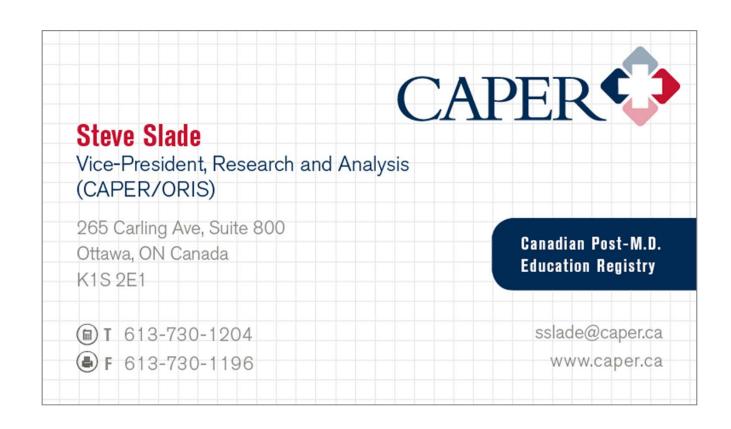
Research Careers

Income Source Distribution of Clinician and Non-Clinician Health Researchers, Canada, 2010





Questions or Suggestions?



THANK YOU!