Final Report

IMG Pathways in Canada

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We would like to thank the many people who provided their time to share information and speak frankly and constructively with us. This environmental scan is very much the product of the consultation that preceded it. We especially want to express our appreciation to the international medical graduates who shared their stories and perspectives and to the immigrant serving organizations and agencies who described and provided information about their programs, challenges and future goals. We are very grateful to the Medical Council of Canada, Federation of Medical Regulatory Authorities of Canada, CaRMS and the Collège des Médecins du Québec for their invaluable time and effort assisting us in understanding the path that IMGs take to licensure, as well as our numerous data requests.

We would like to note that the interpretations contained herein are those of the authors (Health HR Group) and do not necessarily reflect the views of the Canadian Post-M.D. Education Registry (CAPER), the Association of Faculties of Medicine in Canada (AFMC), and the experts we consulted with or the organizations they represent. As authors of the report, we acknowledge that CAPER, AFMC, the people we consulted with and the organizations they represent are not responsible for any possible errors, omissions or misrepresentations contained herein.
EXECUTIVE SUMMARY

Canada is home to a growing number of International Medical Graduates (IMGs). IMGs can generally be considered in two categories: Canadian citizens who have completed undergraduate medical education (UGME) outside of Canada (IMG Canadians - IMGCs) and immigrants from other countries who have completed at least undergraduate medical education outside of Canada (immigrant IMGs - IIMGs). For both of these categories, licensure to practice medicine in Canada is a multi-stage and multi-year process. At any of the steps, IMGs may take on an alternative career and may see this as a temporary or permanent departure from the practice of medicine.

The Canadian Post-M.D. Education Registry (CAPER), the central repository for statistical information on postgraduate medical education in Canada, embarked on a pan-Canadian project sponsored by Human Resources and Skills Development Canada (HRSDC) to consolidate data and information on IMGs to support a community of researchers and stakeholders in this area of research. One component of the project is to identify the alternative career options IMGs consider if they do not follow the path to work as a physician in Canada. The Health HR Group was retained to review the regulatory framework and statistical overview for IMGs in Canada; identify the alternative career options IMGs pursue if they do not work as a physician in Canada; compile the evidence on alternative pathways for IMGs; and, create an inventory of career support for IMGs with a focus on alternative pathways.

Quantitative and qualitative methods were used to explore four research questions over two stages. The methods included a comprehensive review of the literature and data, key informant interviews, interviews with selected immigrant serving organizations and agencies across Canada, and interviews and focus groups with IMGs. Organizations and agencies supporting IMGs were identified by an extensive internet search and an online survey to create an inventory of career support for IMGs. Several limitations are cited and include time and budget impacting the sample size and mode of the key informant interviews; challenges in identifying and engaging with IMGs and IMGCs; and, the paucity of data and literature related to alternative careers for IMGs.

This environmental scan highlights key observations and themes and is a start to shedding light on an essentially invisible cohort of IMGs - those who are not licensed or on the path to licensure. Quantifying this cohort was a challenge given the fragmentation and variability in reporting of IMG data. Through a combination of databases and sources, it is estimated that a minimum of 3,908 IMGs are not in the pipeline to licensure in Canada. This represents an important resource that may not be optimally engaged to the benefit of Canada. For the most part, IMGs seek alternative careers in healthcare. This alternative career is initially considered a side-step on the road to medical practice. Consideration of permanent alternative careers is difficult for IMGs as it signals “giving up their dream”. Even when an IMG is prepared to consider an alternative career they face obstacles - need for specific retraining, limited training positions, requirements for Canadian references and/or

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1 The authors acknowledge that the language used to describe IMGs is evolving and may still be imperfect. For greater clarity, IMGCs are individuals who were Canadian citizens prior to undertaking medical studies abroad; they are commonly referred to as “Canadians studying abroad”, or “IMGCs”. In contrast, IMGs are individuals who complete the medical degree before becoming Canadian citizens/permanent residents.

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experience, duration and cost of training, lack of mentorship. Immigrant supporting organizations provide some direction for alternative careers but acknowledge that they have limited resources for IMGs who would consider such careers.

Recognition of the relatively invisible population of IMGs who will not be licensed in Canada and acknowledgement of the importance of programs and services for meaningful alternative careers is an essential step. This will assure that IMGs who have made considerable sacrifices to come to Canada can have fulfilling careers in Canada. It also allows the population of Canada to benefit from the resources that IMGs bring to this country.

This environmental scan provides preliminary information on the scope of the issue and potential directions for change. Governmental and non-governmental organizations, educators and regulators have an opportunity to develop a pan-Canadian approach that can be applied locally to address this concern.
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1.0 INTRODUCTION

Canada is home to a growing number of International Medical Graduates (IMGs). There are expanded approaches to assess and recognize foreign credentials as well as prepare IMGs for licensed practice in Canada.

The Medical Council of Canada provides the following definition for IMG:

*An individual who has graduated from a medical school not accredited in Canada or in the United States (U.S.) (by the Committee on Accreditation of Canadian Medical Schools (CACMS) or by the Liaison Committee on Medical Education (LCME) in the U.S.).*

The term ‘international medical graduate’ can refer to physicians who come from a wide range of backgrounds. For example, an IMG may:

- have several years of independent practice experience in his/her country;
- have just recently completed medical school;
- have completed a residency training program;
- have gone directly into practice with no requirement for a residency;
- be from a country with a medical education system similar to Canada’s; and,
- be from a country whose medical education system is very different from Canada’s.

For the purpose of this environmental scan, an IMG is defined as an individual who completed their education for an MD degree at a medical school that is not LCME/CACMS accredited and is outside of Canada. These individuals may have also completed residency training and practiced as physicians outside of Canada. The IMG is now returning to or entering Canada with the intent of obtaining a license to practice medicine in Canada. This definition includes those individuals who lived in and completed undergraduate studies in Canada (previously referred to as Canadians studying abroad). It also includes those individuals who have entered Canada as new immigrants. For the purpose of this report, this study excludes those individuals who completed their MD degree outside Canada and are in Canada for postgraduate medical training (residency or fellowship) sponsored by another country and with the plan to return to their sponsoring country.

IMGs can generally be considered in two categories: Canadian citizens who have completed undergraduate medical education (UGME) outside of Canada (IMG Canadians-IMGCs) and immigrants from other countries who have completed at least undergraduate medical education outside of Canada (immigrant IMGs-IIMGs). For both of these categories, licensure to practice medicine in Canada requires a number of steps. These include some or all of the following:

1. verification of credentials
2. successful completion of the Medical Council of Canada examination relevant to their status

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c) evaluation for an orientation program

d) participation in an orientation program

e) assessment of clinical skills for residency or practice readiness

f) successful completion of all or a portion of a residency (PGME) program and/or supervised practice

g) application for licensure (either restricted or unrestricted)

This multi-stage and multi-year process is daunting. At any of the steps listed above, IMGs may take on an alternative career. The IMG may see this as a temporary or permanent departure from the practice of medicine.

In 2005, the National IMG Database was created based on two recommendations stipulating the need to develop a national research agenda, and the capacity to track and recruit IMGs. This pan-Canadian database provides a picture of internationally trained physicians who have formally entered the evaluation and preparation process.

As the central repository for statistical information on postgraduate medical education in Canada, the Canadian Post-M.D. Education Registry (CAPER) manages the IMG Database. In its continued efforts to generate knowledge about IMGs, CAPER embarked on a pan-Canadian project funded by Human Resources and Skills Development Canada (HRSDC). The goal is to consolidate data and information on IMGs to support a community of researchers and stakeholders in this area of research by: a) gathering data to allow the assessment of policies and legislation relating to IMGs in Canada and b) transferring knowledge to develop and implement a collaborative analysis agenda that facilitates and supports meaningful knowledge transfer activities. One component of the project is to identify the alternative career options IMGs consider if they do not follow the path to work as a physician in Canada.

The Health HR Group consulting firm was retained to provide information about IMGs who do not follow the path to work as a physician in Canada. Specifically, the objectives set out are to:

- provide a brief review of the regulatory framework and statistical overview for IMGs in Canada;
- identify the alternative career options IMGs pursue if they do not work as a physician in Canada;
- compile the evidence on alternative pathways for IMGs by completing primary (interviews, focus groups, etc.) and secondary research (peer-reviewed and grey literature); and,
- create an inventory of career support for IMGs with a focus on alternative pathways.

This report is an environmental scan that highlights key observations and themes. It is not an exhaustive compilation of information but rather, a start on shedding light on an essentially invisible cohort of IMGs. It is anticipated that this report, while not offering specific recommendations will identify gaps and directions for consideration.
2.0 APPROACH AND METHODS

The research set out to address four questions:
1. What are the processes, policies and paths to licensure for IMGs?
2. What sources of data exist that identify the number of IMGs who do not achieve licensure to practice medicine in Canada and at what stage do they leave that path?
3. What alternative careers are IMGs pursuing in Canada?
4. What support is provided to IMGs pursuing alternative careers?

Quantitative and qualitative methods were used to explore these four questions over two stages. The first stage involved gathering data from key informant interviews and a comprehensive review of the literature. PubMed and ERIC were consulted to search and access peer-reviewed literature. The search terms employed included: “international medical graduates”, “foreign medical graduates, Canada”, “alternate/alternative career”, “alternate/alternative job”, and, “alternate/alternative work”. The grey literature was accessed by a) searching the federal and provincial government websites related to immigration, education and healthcare; b) reviewing the websites of key stakeholder organizations; and, c) internet search using search terms that included: “foreign medical graduates”, “international medical graduates, Canada”, “alternate careers”, and, “internationally educated health professionals”. A comprehensive internet search of organizations in Canada serving immigrants and specifically IMGs was conducted. The terms employed for this search included: “immigrant serving agencies”, “IMG support and services”, “immigrant support”, and, “foreign medical graduate support”. Data was accessed from CAPER, the Medical Council of Canada (MCC), Federation of Medical Regulatory Authorities of Canada (FMRAC) and Canadian Resident Matching Service (CaRMS) to calculate the number of IMGs not licensed or on the path to licensure.

Preliminary key informant interviews with seven organizations across Canada were completed to collect information about the type of data that is available and that can be accessed, as well as to identify organizations that serve and support IMGs across Canada. Appendix A provides a copy of the interview guide and Appendix B is a list of the organizations consulted. In total, the researchers spoke to 17 informants that were invited to the interview by the primary contact of the organization.

The second stage of interviews was conducted with selected immigrant serving organizations and agencies across Canada to explore the services and support provided to IMGs, the successes and challenges of these services and to identify unmet needs. Appendix C outlines the questions discussed. Immigrant serving organizations that specifically provide support for IMGs were identified by internet search, through an online survey of potentially relevant organizations and through interviews with key informants. Once a comprehensive list of immigrant serving organizations was identified, (Appendix H), those whose website information indicated potential involvement with healthcare professionals were invited to participate in an on-line survey (Appendix D). The survey was distributed to 59 organizations across Canada. Seventeen organizations completed the survey, while an additional eight started it but did not complete the entire survey. The total completed represents a 29% response rate. Representatives of 12 organizations were interviewed by telephone between February and March, 2013. Appendix E lists these organizations.
IMGs pursuing alternative careers were sought and invited for interviews. Five were interviewed by telephone in March 2013 and one focus group of three additional IMGs was also conducted by telephone in that time period. Two IMGs submitted their input to the questions electronically to accommodate their time constraints and interests. In total, ten IMGs pursuing alternative careers were consulted. None of these IMGs were IMGCs. Appendix F lists the questions explored in the focus group and interviews with IMGs. Four organizations interviewed in stage 2 assisted in identifying the IMGs for the focus groups.

**Limitations**

Time and budget limitations dictated the sample size and mode of the key informant interviews. The research could have benefitted from a larger sample of IMGs and organizations interviewed. Additional exploration of the interface between IMGs and immigrant serving organizations including site visits could have added an important dimension to this work.

Identifying and engaging with IMGs that are in alternative careers was a challenge. There are no organizations/associations that specifically represent this group. Provincial IMG organizations’ primary objective is assisting IMGs to achieve licensure and practice. Therefore, individuals seeking or engaged in alternative careers are not a focus. At the same time, immigrant serving organizations do not have a systematic method for continued contact with IMGs not following the path to licensure. A number of key stakeholder organizations were approached to assist in contacting IMGs. One of the organizations that assisted in outreach used social media to invite IMGs to participate. This resulted in a large volume of interested IMGs the great majority of whom were working towards their license and were not interested in pursuing an alternative career. A number of those who were in alternative careers as an interim measure misunderstood the request and assumed that participation equated support and help along the licensure pathway. Some of the other potential interviewees thought that the focus group sessions would provide career opportunities. Thus the number of interviewees committed to alternative careers was limited. This reflects both the commitment to achieving a medical license and the importance of tracking those individuals who are not directly in the pipeline for medical licensure (i.e., those IMGs in Canada who are not successful at any stage in the path to licensure from failure on the Medical Council of Canada Evaluating Examination (MCCEE) forward).

A further limitation was the difficulty in identifying IMGCs considering alternative careers. Most of the organizations consulted in the stage 2 interviews rarely if at all provided service to IMGCs. There is no database of IMGCs, making it a challenge to identify this group of IMGs. Anecdotally, it appears that recently graduated IMGCs are not considering alternative careers except as an interim step to the path to licensure. Thus this report does not provide information on the IMGC perspective on alternative careers.

There is a paucity of data and literature related to alternative careers for IMGs. PubMed and ERIC searches conducted at the start and end of the project identified a significant number of articles related to IMGs but the focus of these articles was orientation, preparation, training and assessment of IMGs on the path to licensure. There is also literature comparing IMGs to Canadian graduates.
both in training and practice. While this literature provides some information about the reasons for lack of success of some IMGs it does not shed light on their alternative careers. A number of reports, particularly the Thompson report and the FMEC report on IMGs did provide an important context for this report. Appendix G describes the search strategy and results of the peer reviewed literature review.

3.0 WHAT WE LEARNED – FINDINGS

Processes, policies and paths to licensure for IMGs and IMGCs

Licensure and registration for practice is the responsibility of the medical regulatory authorities (13 provincial and territorial). For Canadian graduates of Canadian medical schools the requirements for unrestricted licensure are graduation from a Canadian medical school, successful completion of the MCC Part 1 and 2 examinations, and success on examinations of either the College of Family Physicians of Canada (CFPC) or Royal College of Physicians and Surgeons of Canada (RCPSC)/Collège des médecins du Québec (CMQ). In Quebec there is also the requirement for French language knowledge and completion of ALDO (Les aspects légaux, déontologiques et organisationnels de la pratique médicale au Québec).

“Limited” licensure or full licensure may be an option for IMGs. “Limited” licensure is also called provisional, restricted, or conditional depending on the jurisdiction. This licensure allows IMGs to work (usually under some type of supervision and in underserved communities) without completing all standard licensing requirements. IMGs eligible for provisional licensure must have completed all their training and, in general, practiced for a number of years in another country. These provisional licenses are usually issued with an expectation that the IMG will successfully complete the MCC Part 1 and 2 and requisite CFPC or the RCPSC examinations or equivalent assessment within a predetermined time period. The IMG will become eligible for a full license on meeting specific provincial requirements (successful completion of supervised practice requirements and/or passing necessary examinations).

IMGs who move directly to a path for full licensure must meet similar requirements as those for Canadian graduates. Instead of two MCC examinations the IMG must pass the MCCEE as well as MCC Part 1 and 2. IMGs must meet residency training requirements for eligibility for the CFPC or RCPSC examinations and then successfully pass these examinations. Where required, they must also pass language proficiency examinations. The RCPSC and CFPC have alternative routes to certification that do not involve examinations. The CFPC grants Certification in Family Medicine (CCFP) without examination to physicians from outside Canada under certain conditions and criteria. IMGs who are already licensed and practising as specialists in Canada including those practising with restricted licenses, can seek certification through the RCPSC’s “In-Practice Assessment Route B” of the newly created Practice Eligibility Route for Certification. Foreign credentials verification is a prerequisite


4 Royal College of Physicians and Surgeons of Canada. Practice Eligibility Route for Certification for Specialists (PER).
for all IMGs. This may be required as part of CIC requirements or prior to entry to evaluation, orientation or matching programs.

Table 1 - IMG Pathway Data Collection

<table>
<thead>
<tr>
<th>STAGE OF PROCESS</th>
<th>DATA SOURCE</th>
<th>DURATION</th>
<th>COMMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>IMMIGRATION TO CANADA</td>
<td>• Citizenship and Immigration Canada (CIC)</td>
<td>Once applicant is accepted and enters Canada, no further tracking.</td>
<td>• As of April, 2013, the MCC now offers Medical Educational Credential Assessment report for physicians seeking to immigrate to Canada under the Federal Skilled Worker Program.</td>
</tr>
<tr>
<td></td>
<td>• MCC</td>
<td>Once applicant has passed examination, tracking through completion of all other required MCC examinations.</td>
<td>• Applicants who fail examination are not tracked.</td>
</tr>
<tr>
<td>MCCEE</td>
<td>• Provincial Ministry of Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Provincial medical regulatory authority (MRA)</td>
<td>Monitoring for success in clinical supervision, MCC examinations, application and success in examinations of the CFPC /RCPSC, where applicable. Tracking throughout period of restricted licensure.</td>
<td>• Successful IMGs obtain unrestricted licenses based on meeting provincial criteria. Once obtain unrestricted license, tracking is by MRA and same for all licensed physicians. \n• Those IMGs who are not successful in obtaining unrestricted licenses and leave the program are not tracked.</td>
</tr>
<tr>
<td>RESTRICTED LICENSURE</td>
<td>• National Assessment Collaborative (NAC)</td>
<td>IMGs applying to NAC will be tracked from registration until completion of assessment.</td>
<td>• It has not yet been determined if IMGs successful in NAC will be tracked longitudinally. IMGs not successful on NAC assessment will only be tracked as they reapply.</td>
</tr>
</tbody>
</table>

Table 1 continues on the next page.


5 Until recently assessment and orientation programs were often combined. The NAC allows for central administration and disseminated assessment (i.e. provinces can carry out assessment locally).
Sources of data identifying the number of IMGs

The path of IMGs to licensure and practice has a number of steps and brings them into contact with governmental (federal and provincial) and non-governmental agencies and authorities. Table 1 outlines the path and how data is collected at each stage. As the table demonstrates, there is no overarching data repository for IMG data. As a result, at each stage, there is a “snapshot” of the pool of IMGs. Thus, it is currently impossible to accurately track IMGs who enter Canada in a given year and do not complete the path to licensure and practice. There is also no mechanism to accurately determine the IMGC pool of IMGs. This gap makes it difficult to accurately determine the number of IMGs who are in Canada but not licensed to practice.

CIC identifies those IMGs who enter through the skilled foreign worker program but does not collect information on IMGs if they are not the primary applicant (i.e., the IMG may be the spouse of an engineer who is the primary applicant). CIC does not collect any data on IMGs once they have entered Canada. Provincial orientation/assessment programs have data on people entering their program but do not have systematic data on subsequent success in completion of the residency program. There is no tracking of IMGs who do not enter/continue in the “system”. IMGs who are not successful in the CaRMS match are not tracked except if they reapply. There is no data on alternative

<table>
<thead>
<tr>
<th>STAGE OF PROCESS</th>
<th>DATA SOURCE</th>
<th>DURATION</th>
<th>COMMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>RESIDENCY APPLICATION</td>
<td>• CaRMS</td>
<td>Data collected as part of application process and retained according to requirements.</td>
<td>• CaRMS provides yearly statistics on number and demographics of applicants as well as information on match results. • CaRMS has also surveyed IMGCs and IIMGs to gather further information on these cohorts.</td>
</tr>
<tr>
<td>RESIDENCY PROGRAMS</td>
<td>• Provincial ministry of health • Faculties of Medicine • MRAs • CAPER</td>
<td>IMGs are tracked through residency and to completion of training.</td>
<td>• IMGs are tracked by Faculty of Medicine for success on CFPC and/or RCPSC but not for subsequent location of practice. • Provincial ministry of health tracks successful IMGs for location of practice if their residency position is linked to a return of service contract. Once the contract obligation is met there is no further tracking. • MRAs track licensed practitioners throughout Canada. • Individuals who are unsuccessful in the examinations are not tracked. • Individuals who leave practice are not tracked. • Individuals who leave Canada are not tracked.</td>
</tr>
</tbody>
</table>

- CAPER tracks cohorts of IMGs and tracks individuals as they move through residency and fellowship programs as well as their ongoing practice location following completion of post-M.D. training.
career paths. All of the immigrant serving agencies and organizations consulted collect some data about their clients but this data is inconsistent and is no longer collected once the client leaves the program.

**Quantifying IMG pool**

Determining the precise number of IMGs in Canada who are not on the path to licensure is difficult in the absence of an acceptable method to quantify. That is, there is no comprehensive information on the number of IMGs entering Canada and there is no validated method to track those IMGs in Canada. While there are a number of data sources, these may not be directly comparable and at times represent potentially overlapping populations. Data from the MCC, CaRMS, MRAs and the CAPER IMG database were analyzed for the purpose of this scan.

The **MCC** provides information on individuals who take the MCCEE which is a prerequisite for IMGs (both Canadians studying abroad and immigrant IMGs) entering residency training and/or practice in Canada. **CaRMS** provides information on individuals applying for residency positions as well as those matched to residency slots. The **MRAs** provide data by province on individuals who receive full and provisional licensure. Usually IMGs entering restricted practice will be granted provisional licensure. The **CAPER IMG** database allows tracking of unique individuals who pass the EE, and are accepted into residency and/or receive licensure. Each of these databases provides a slightly different perspective on IMGs who are not on the path to licensure since each tracks data for slightly different purposes and lengths of time.

The initial step in calculating the number of IMGs not on the path to licensure is confirming the number of IMGs who are entering/returning to Canada. While we cannot accurately determine this number, we can use passing the MCCEE examination as a proxy. This is a reasonable proxy since success on this examination is a prerequisite for all IMGs to further steps on the path to licensure. We can also assume that anyone taking the MCCEE examination is intending to follow a path to licensure (the MCCEE is not useful in applying for licensure in other countries and the cost of the examination makes it unlikely it would be taken for frivolous reasons).

Table 2 on the following page, summarizes the calculations for the number of IMGs in Canada not on the path to licensure using different data sources available. More detailed information on the calculations is provided in tables 3 - 6.
TABLE 2 - Summary of calculations of IMGs not on the path to licensure in Canada

<table>
<thead>
<tr>
<th>DATA SOURCE</th>
<th>POTENTIAL IMG CANDIDATES FOR RESIDENCY OR PROVISIONAL LICENSURE</th>
<th>NUMBER OF IMG CANDIDATES ON PATH TO LICENSURE/RESIDENCY</th>
<th>NUMBER OF IMG NOT ON THE PATH TO LICENSURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>A 1. CaRMS (2009-2012)</td>
<td>9,219 (active candidates for residency match- maximum no.)</td>
<td>1,624 (matched into residency position)</td>
<td>7,595 (active candidates maximum no.)</td>
</tr>
<tr>
<td>B 2. MCC - (CaRMS + MRA)</td>
<td>5,532 (active candidates for residency match-assuming 50% reapplication rate)</td>
<td>3,585**</td>
<td>3,908 (active candidates assuming 50% reapplication rate)</td>
</tr>
<tr>
<td>3. CAPER IMG Data Tracking (2005-2012)</td>
<td>9,380*</td>
<td>3,498</td>
<td>5,978***</td>
</tr>
</tbody>
</table>

*MCCEE data; first time pass from 2009 – 2012 (See Table 2).
**Total is calculated as follows: 1,624 (CaRMs data) + 1,961 (CAPER MRA data for provisional licensure for this period [excluding Quebec and the Territories] indicates that 1,961 provisional licenses were granted).
***Estimate is based on 46% of IMGs not born in Canada and not a Canadian citizen who passed the MCCEE took the exam in a centre in Canada and are not in residency or in PGME (See Table 6).

According to the different data sources, we can assume that since 2005 there are between 3,908 and 7,595 IMGs who are currently not on the path to licensure. These individuals may be continuing to apply for training and/or provisional licensure, may have left Canada, or may be considering alternative careers. To improve our ability to accurately determine the number of IMGs in Canada requires:

- an accurate census of Canadians Studying Abroad who have returned to Canada to enter the path to licensure; and,
- comprehensive data on immigrants to Canada with credentials that allow them to pursue the path to medical licensure in Canada. Citizenship and Immigration Canada (CIC) admits IMGs through skilled worker programs or other comparable programs. However, a number of IMGs enter as spouses, so their qualifications are not considered at time of entry. In addition IMGs may enter through other immigration categories.

The CAPER IMG database can then provide an ongoing picture of IMGs on and not on the path to licensure in Canada.

The following is a brief description of how the estimates of IMGs not on the path to licensure were calculated from each of the data sources. To facilitate the calculations, a number of assumptions were required.
**CaRMS and MCC data**

Table 3 illustrates MCC data for MCCEE first time takers (both IIMGs and IMGCs) for 2009 - 2012. There were a total of 9,380 IMGs who passed the MCCEE and who could be on the path to licensure (eligible to apply to either residency or for provisional licensure) in Canada for this time period. Of note, 54% of these candidates passed the examination in a centre outside of Canada. This 54% may represent IMGCs who take the examination in the country where they are studying or IIMGs who take the examination in anticipation of entry into Canada.

**TABLE 3 - MCC data for MCCEE first time taker IMG candidates (IIMGs and IMGCs) 2009 – 2012**

<table>
<thead>
<tr>
<th></th>
<th>IIMGs</th>
<th>IMGCs</th>
<th><strong>TOTAL</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PASS</strong></td>
<td>7,550</td>
<td>1,830</td>
<td><strong>9,380</strong></td>
</tr>
<tr>
<td><strong>FAIL</strong></td>
<td>1,458</td>
<td>70</td>
<td><strong>1,528</strong></td>
</tr>
</tbody>
</table>

Source: Personal communication MCC.

Table 4 shows CaRMS data for 2009 - 2012 which can be used to calculate the potential pool of IMGs on/not on the path to licensure through residency training. This data is for both IIMGs and IMGCs.

**TABLE 4 - IMGs application and matching in CaRMS matches (1st and 2nd iterations)**

<table>
<thead>
<tr>
<th>YEAR</th>
<th>ACTIVE ENROLMENT</th>
<th>MATCHED</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>1,844**</td>
<td></td>
</tr>
<tr>
<td>2010</td>
<td>2,232</td>
<td>340</td>
</tr>
<tr>
<td>2011</td>
<td>2,464</td>
<td>380</td>
</tr>
<tr>
<td>2012</td>
<td>2,679</td>
<td>406</td>
</tr>
<tr>
<td>2013</td>
<td>–</td>
<td>498</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>9,219</strong></td>
<td><strong>1,624</strong></td>
</tr>
</tbody>
</table>

*These numbers include Canadians studying abroad and immigrant IMGs.

**Those actively enrolled in 2009 will match in 2010; active enrolment in 2010 will match in 2011 and so forth.

Source: Personal communication CaRMS.

Assuming an active enrolment of 9,219 and a total of 1,624 matched, the result is 7,595 IMGs are eligible but are not in residency. However, CaRMS data indicate that there is approximately a 50% reapplication rate. Thus if we start with a 100% initial cohort in 2009 and assume 50% of the active enrolment of each consecutive year (2010 – 2012) are repeat applicants, the active new enrollment for 2009-2012 is now 5,532 (Table 5).
Table 5 - Calculation of Total Active Enrollment with 50% reapplication rate

<table>
<thead>
<tr>
<th>YEAR</th>
<th>REVISED ACTIVE ENROLMENT</th>
<th>MATCHED</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>1,844</td>
<td></td>
</tr>
<tr>
<td>2010</td>
<td>1,116</td>
<td>340</td>
</tr>
<tr>
<td>2011</td>
<td>1,232</td>
<td>380</td>
</tr>
<tr>
<td>2012</td>
<td>1,340</td>
<td>406</td>
</tr>
<tr>
<td>2013</td>
<td>--</td>
<td>498</td>
</tr>
<tr>
<td>TOTAL</td>
<td>5,532</td>
<td>1,624</td>
</tr>
</tbody>
</table>

Assuming 5,532 as the active enrollment and a total of 1,624 matched, there are 3,908 IMGs not on the path to licensure. It should be noted that the IMGs reapply to the CaRMS match for a number of years and thus some of the 3,908 will not be considering alternative careers.

CAPER IMG data

Another estimate of IMGs not on the path to licensure can be calculated using CAPER IMG data. Table 6 summarizes CAPER data for IMGs passing the MCCEE between 2005 - 2011.

Table 6 - CAPER IMG data

<table>
<thead>
<tr>
<th>Number passing MCCEE</th>
<th>IMGC (BORN IN CANADA)</th>
<th>IIMG (CDN CITIZEN - NOT BORN IN CANADA)</th>
<th>OTHER IMG (NOT BORN IN CANADA - NOT CDN CITIZEN)</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Found in just Post-MD Training file</td>
<td>1,856</td>
<td>1,995</td>
<td>9,225</td>
<td>13,076</td>
</tr>
<tr>
<td>Found in just MRA file</td>
<td>370</td>
<td>224</td>
<td>1,156</td>
<td>1,750</td>
</tr>
<tr>
<td>Found in both Post-MD Training file and MRA file</td>
<td>48</td>
<td>55</td>
<td>1,100</td>
<td>1,203</td>
</tr>
<tr>
<td>TOTAL</td>
<td>584</td>
<td>356</td>
<td>2,558</td>
<td>3,498</td>
</tr>
</tbody>
</table>

Note: only individuals with complete information were selected for these statistics; 752 individuals who passed the exam from 2005 to 2011 were removed from the statistics since information about their country of birth or citizenship were missing.
Source: Personal communication CAPER.
Individuals in the Post MD training file achieved a residency training position and are thus on the path to licensure. Individuals who are just in the MRA file have achieved licensure. It is assumed that those in this category have provisional licensure. Those in both the Post-MD and MRA file have likely achieved licensure following residency training. Using these figures, it is estimated that 3,498 IMGs are licensed or in post-graduate medical education.

Table 7 provides the estimates of the number of IMGs not on the path to licensure using the figures resulting from the preceding analysis of CAPER data.

### TABLE 7 - Number of IMGs estimated to not be on the path to licensure

<table>
<thead>
<tr>
<th></th>
<th>IMGC (BORN IN CANADA)</th>
<th>IIMG (CDN CITIZEN NOT BORN IN CANADA)</th>
<th>OTHER IMG (NOT BORN IN CANADA - NOT CDN CITIZEN)</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number passing MCCEE</td>
<td>1,856</td>
<td>1,995</td>
<td>9,225</td>
<td>13,076</td>
</tr>
<tr>
<td>Number already licensed or in PGME</td>
<td>584</td>
<td>356</td>
<td>2,558</td>
<td>3,498</td>
</tr>
<tr>
<td>Number of IMGs not on the path to licensure (#. not licensed, #. not in PGME)</td>
<td>1,272*</td>
<td>1,639*</td>
<td>3,067</td>
<td>5,978</td>
</tr>
</tbody>
</table>

*Number of physicians – number licensed or in PGME

The estimate of 3,067 for the “other IMGs” who are not born in Canada and are not Canadian citizens, represents 46% of the “other IMGs” who passed the MCCEE and are not in residency or in PGME; that is, 46% of 6,667 (9,225 – 2,558). The assumption is that those IMGs who took the MCCEE in Canada are most likely to remain in Canada.

There has been little formal analysis of the trajectory of IMGs seeking training positions. The Thomson report published in 2011 reports CaRMS data which shows that in Ontario following the first and second iteration of the CaRMS match there were 1,282 IMG applicants unmatched (269 IMGCs and 1,013 IMGs). In 2012, Jan Jablonski published an MSc (Epidemiology) thesis titled “Employment status and professional integration outcomes of IMGs in Ontario”. His work examines a sample of IMGs registered between 2007 and 2011 at the Access Center for Internationally Educated Health Professionals in Ontario. In his analysis, the time to securing a residency position

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was 51 months (confidence interval 51 - 60 months) and of 4,536 applicants, 87.8 % did not secure a position in that time frame (i.e., 3,983 IMGs).

**Alternative careers IMGs are pursuing in Canada**

There is a dearth of information about alternative career paths for IMGs in Canada. The little gleaned from the literature together with the results of the interviews with IMGs identify the following categories of alternative paths:

- Healthcare delivery - training and work as surgical assistant, nurse, other healthcare professional
- Research - formal or informal training and work as research assistant/technician in academics, industry
- Government - work in regulatory, policy activities
- Alternative professional careers - retraining for alternative professional career-education, social work, etc.
- Transitional jobs taken to support IMG during their application period - in general these are minimum wage and low skill jobs
- Volunteer activities
- Unemployed

Interviews with IMGs revealed that the majority had experience with “working at any job in order to support their families”. These jobs paid minimum wage, were low skilled but necessary to pay the bills. One IMG who had been a senior surgeon in his country of origin noted that he initially was able to get a minimum wage job at a gas station and subsequently a better job as a cashier at a large retail store. Another IMG sought a job at a local convenience store for income while still pursuing his license.

All IMGs anticipated working as physicians in Canada when they immigrated to Canada. For the majority, an alternative career was considered a step on the road to medical practice. All of the IMGs interviewed desired activities that keep them in contact with healthcare. The immigrant supporting organizations also encourages this. Wherever possible, the majority of IMGs participate in volunteer activities in healthcare settings, as for example, assisting the public at information desks or volunteering time at a breast cancer clinic. This activity is quite different from "observerships" which are directly related to the path to licensure.

In general, paid work options in healthcare fall into regulated or non-regulated jobs. Regulated jobs require specific training and credentialing. This category includes physician assistant and anesthesia assistant. Several provinces have programs for training of physician assistants. Such programs were initially seen as an opportunity for alterative careers for IMGs, however there are limited spaces available, competition with a wider candidate pool for those slots and, at present, limited job opportunities. Also, initial enthusiasm for this alternative career route for IMGs has been impacted by IMGs leaving the program if/when they are offered residency positions. The physician assistant

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programs take at least two years and tuition can be a limiting factor. Alberta Health Services has established a surgical assistant program\(^\text{9}\) which has been helpful as a potential alternative career route again with limitations including availability of positions.

In an article published in December 2012 by Poss.ca\(^\text{10}\) (a Toronto magazine for job seekers) provides the following suggestions of non-regulated healthcare positions: medical assistant, clinical research, health promoter/educator, medical interpreter and medical administrative assistant. Other non-regulated professions include pathology technicians and sleep lab technicians.

Several websites provide information about regulated and non-regulated professions. IMGs are regularly referred to such sites, usually in the context of interim work while preparing for licensure, although it appears that “transition planning” is becoming a more accepted option.

Several of the IMGs interviewed noted that entry into non-regulated professions as well as courses for both regulated and non-regulated professions frequently requires evidence of Canadian experience and/or Canadian references. For example, a pediatrician currently working as a child care provider in a daycare centre is interested in becoming a sonographer but cannot get into a training program. This can prove to be a stumbling block for many. A number of interviewees commented that “knowing someone” was very important to entry.

Where IMGs are accepted into courses for regulated and non-regulated health professions they find that at least part of the course is a reprise of their medical training. In view of the time and cost of such courses they are disappointed that their prior education cannot be considered for “advanced placement”. Consideration for alternative careers in government and industry are location dependent and very reliant on prior experiences and mentorship. Some IMGs, as was pointed out in the interviews, are also considering careers in non-traditional medicine including homeopathy.

Overall, consideration of alternative careers is difficult for IMGs as it signals “giving up their dream”. Even when IMGs are prepared to consider an alternative career they face obstacles - need for specific training, limited training positions, need for Canadian references and/or experience, duration and cost of training, and lack of mentorship. The IMGs interviewed recommend that internationally trained physicians have a “plan B” when considering coming to Canada, recognizing the lengthy process to licensure.


Support provided to IMGs seeking alternative careers

An inventory of the services and supports available to immigrants and refugees in Canada is provided in Appendix H. This is not an exhaustive list, as there are a number of community-based organizations that provide support specific to their geographic area (e.g., Peel Multicultural Council). Most immigrant-serving agencies provide employment counselling and planning as well as language skills development. The mandate of the majority of these organizations and agencies is to assist the immigrant or refugee to integrate into Canadian society. There are a number of women-focused organizations established to support the settlement of immigrant women into Canadian society. Some of the programs/services provided include language skills, health awareness and wellness, and community outreach. Some of these organizations also offer career and employment counselling. All of these organizations are available to assist IMGs but do not necessarily have the expertise and resources to provide optimal assistance.

In addition to immigrant supporting organizations, most provinces have associations that represent IMGs only. They are often established by IMGs to support and advocate for IMGs. For the most part, these associations' primary focus is on assisting IMGs to obtain a license to practice in Canada. Twelve organizations are identified in the table as having some relevancy for IMGs based on the information provided from the websites and in some cases, from interviews. A formal assessment of all of these organizations is beyond the scope of this scan. Of these, six organizations in addition to their role to assist on the path to licensure and practice also provide some support to IMGs who consider an alternative career and are highlighted below. These are Bredin Institute (Alberta), Bow Valley College's Directions for Immigrants (Alberta), Catholic Immigration Centre of Ottawa (Ontario), Career Transitions for International Medical Doctors (Ontario), Centre d'évaluation des diplômés internationaux en santé (CÉDIS) (Quebec), and Immigrant Settlement and Integration Services (ISIS) (Nova Scotia).

BREDIN CENTRE FOR LEARNING (BREDIN INSTITUTE)

Founded in 1976, Alberta’s Bredin Institute offers employment assistance, training and career planning programs to newcomers to Canada, youth, and adults. The institute’s head office is in Edmonton with another office in Calgary, Alberta. The Centre for Skilled and Internationally Trained Professionals opened in the last 12 years to assist internationally trained professionals navigate the licensure process and secure employment in their field of expertise. IMGs have been clients of the centre for the past 7.5 years as the centre recognized a need by these immigrants (Personal communication, March 7, 2013). Only a few IMGs are seen at the centre. The staff member interviewed estimates a total current caseload of more than 350 IMGs (Ibid). Some of these are new clients while others are being followed for three years or more.

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Career coaching, study groups, and occupation specific support, seminars and referrals are offered to skilled and internationally trained professionals. The institute’s employment and training programs are funded by Alberta Employment & Immigration, Service Canada, and CIC. The services provided to IMGs are free and IMGs enter a three year contract with the institute. Some IMGs have been with the institute for more than three years awaiting a residency match. Most clients are advised about alternative career options at the initial meeting given the highly competitive and lengthy licensure process. However, the majority of IMGs are interested only in practising medicine in Canada when first enrolled with the institute. The institute liaises with other immigrant serving organizations on an informal basis. When asked what the institute needs to better help IMGs seeking alternative careers, the respondent listed more information about other health professions and their credentialing, job database geared for IMGs, stable and enhanced funding and better access to retraining. The latter need was identified by a majority of IMGs interviewed, many of who were frustrated with the challenges to access retraining for another profession. IMG clients and government provide input to the institute to inform any changes, additions and enhancements to its services.

DIRECTIONS FOR IMMIGRANTS (BOW VALLEY COLLEGE)
Established in 2008, Directions for Immigrants in Alberta helps internationally trained professions learn about the accreditation process for their profession and how to find employment in Alberta. Directions for Immigrants is operated by Bow Valley College and funded by the provincial and federal government. The service is at no cost to the IMG. The majority of the IMG clients are IIMGs and not IMGCs. Over 100 IMGs are seen each year since 2009 – 2010. In 2012 – 2013, 203 IMGs came to Directions for Immigrants for a service needs determination. Some of these IMGs move into study groups. Others may move to some employment and reappear at some point. Clients register and have the option to receive assistance indefinitely. An increasing number of new clients are entering the program earlier after their arrival in Canada. This trend may reflect greater awareness of the program and the need for assistance to achieve the goal of licensure. Although the program’s focus is to inform clients of their profession’s accreditation process, some counselling pertaining to alternative careers for IMGs is provided.

Staff reviews the client’s background, understanding of the licensure process and plan for achieving licensure, including the challenges and duration of the process. Information and counselling is provided depending on identified needs (e.g., language skills, information on examination dates). Clients are made aware of the practice ready route and support is provided to prepare qualified candidates for assessment. Clients who pursue the residency training route are assisted to prepare for assessment. The centre also researches alternative careers for IMGs if they are not successful in the licensure process. The goal in 2014 is to encourage more IMGs to consider alternative careers early into their entry to Canada given the length of time and challenges with getting a license to

13 Personal communication, April 10, 2013.
practice medicine in Alberta. Feedback from IMGs, Fellows and staff for the review of clinical material informs enhancements and changes to the program.

CATHOLIC IMMIGRATION CENTRE OF OTTAWA
The Catholic Immigration Centre of Ottawa came into existence as a community based non-profit organization in 1985. In 2010, the Centre started to provide some services to foreign trained medical doctors in response to a number of inquiries by these clients (Personal communication, March 8, 2013). The Centre created its own library of information and established study groups to support IMGs pursuing licensure in Canada. Of note, this Centre refers to clients as International medical doctors (IMDs), rather than IMGs as a sign of respect for their qualifications.

Between 150 – 200 IMDs are received at the Centre each year (Ibid). IMGCs are also received but are not accepted into any of the orientation or assistance programs offered. The length of time remaining with the Centre varies as some IMDs continue to seek residency training even after multiple failed attempts. Some data about IMDs is collected and has been shared with CAPER in the past. Provincial and federal governments fund the Centre usually on a three year cycle, although recently the funding cycle has shortened. Like most similar organizations across Canada, accessing funding was an issue in the last year and accessing consistent funding will continue to be a concern.

Staff at the Centre counsel IMGs about licensure and also alternative careers. Most IMDs seek alternative careers as a stepping stone to licensure and in some cases, as a means to generate income for the interim. The Centre delivers its programs in collaboration with LASI World Skills and the Career Transitions Program for IMGs. Clients provide most of the feedback which the Centre considers to continuously improve its services.

CAREER TRANSITIONS FOR INTERNATIONAL MEDICAL DOCTORS
The Career Transitions for IMDs program provides sector-specific employment preparation and counseling services and employer outreach specific to internationally trained physicians. These services assist IMDs in accessing alternative employment in the health sector that makes effective use of their skills. LASI World Skills and the Catholic Immigration Centre support and administer the program.

Sector-specific employment preparation offers information that helps IMDs become aware of their options for alternative employment in the healthcare sector. Counselling services involve one-on-one counseling to IMDs to assist them in refining their portfolio and in developing their individual career action plans. Project partners and health sector employers in Ottawa, Toronto and Hamilton work together to explore the possibilities for full- and part-time positions, co-op placements, volunteering and mentoring as part of employer outreach. A variety of IMD resources are offered and include a Career Transitions Employment Readiness Self-Assessment tool. The online tool helps the IMD

determine how ready they are to undertake an intensive job search for a skilled position. Questions are asked about the IMD’s skills background, commitment to learning, motivation, expectations, and level of understanding of job search techniques. This process is meant to provide realistic perspectives and expectations for the candidate. Ten online self-study workshops are offered as part of the overall program. Each module covers critical concepts that all IMDs should be familiar with prior to starting their job search and each are structured as a self-study tutorial taking between one to two hours to complete. Healthcare labour market and job information and fact sheets are also sourced at Career Transitions for IMDs. A Summary Healthcare Job Information Chart maps out an overview of the requirements including average hourly wages of 50+ healthcare related jobs. The job information sheets highlight various healthcare jobs in regulated fields and the associated non-regulated jobs within that particular sector.

CENTRE D’ÉVALUATION DES DIPLOMÉS INTERNATIONAUX EN SANTE (CÉDIS)
CÉDIS is an independently incorporated non-profit organization funded by Québec’s Ministère de la Santé et des Services Sociaux and funding from Health Canada as part of a contribution agreement for the Québec government’s initiative to integrate internationally educated health professionals into the province’s healthcare system. CÉDIS offers advice and administers a free program to IMGs. To be eligible, physicians must reside in Québec, must have been granted recognition of equivalence of their medical degree by the Collège des médecins du Québec (CMQ), and have been denied entry into a residency program at a Québec medical faculty after applying at least once.

The program helps to better assess IMGs’ clinical skills and guide them towards solutions best suited for them. IMGs that are successful in the assessment are directed into a four-month clinical bridging internship (or rotation) and are supported with an $8,000 CÉDIS scholarship. This internship prepares IMGs to obtain and succeed in postgraduate training. Others are guided, on a voluntary basis, in preparing for a career transition with assistance from an agency reporting to the Montréal office of Emploi-Québec. CÉDIS does not provide any services but refers to agencies with respect to alternative career support. About 65% of IMGs move to the rotation while 20% are recommended for an alternative career (Personal communication, April 11, 2013). One hundred and twenty clients have been seen since the inception of the program in 2010. Last year, 12 IMGs went through the rotation and applied to CaRMS. Nine of these 12 were successfully matched. Those IMGs who are not successfully assessed by the program typically try again.

IMMIGRANT SETTLEMENT AND INTEGRATION SERVICES (ISIS)
The ISIS organization in Nova Scotia has seen over 500 IMGs in the past five years and currently has 184 active IMGs (i.e., IMGs receiving services from ISIS) (Personal communication, March 4, 2013). ISIS is a community organization offering services and creating opportunities to help immigrants to participate fully in Canadian life. The organization is funded by multiple groups including federal and provincial governments and United Way. ISIS provides a range of services: professional

programs (e.g., outline of pathways to licensure, orientation and communication skills for healthcare professionals), pre-employment workshops, work placements, professional mentors, and ongoing employment counselling and coaching. Employment Specialists assist the newcomer in their search for employment throughout the time the newcomer is involved with ISIS. As part of the initial and ongoing counselling, the Employment Specialist provides the IMG a realistic picture of the pathway to licensure including the length of time required each step of the way. Early on IMGs are advised of possibly considering an alternative career related to healthcare.

Issues and gaps
IMGs come to Canada with the expectation that they will practice medicine here. In reality, a minority of them will achieve this goal. The mismatch between expectation and reality results from a number of factors. These include the lack of clarity regarding the process to achieve licensure for medical practice in Canada and the duration and likelihood of success in the process.

Consideration of an alternative career is inhibited by:

- **IMGs “eternal dream” to practice medicine.** All IMGs worked very hard to achieve their MD degree, have a passion for medicine and chose to come to Canada to practice medicine despite, for many of them, major sacrifice. To not achieve this goal is difficult to accept.

- **Difficulty providing and assimilating realistic information on timelines and success in the process to licensure.** While government and other information sources indicate that the licensure process can take a number of years, this in most cases underestimates the time frame. Meeting language requirements, queuing for available assessment examinations, and if successful, orientation programs are merely a prelude to residency training. The reality of the time and resources required may not be adequately reflected in formal information documents. For couples immigrating to Canada frequently one must delay their entry into the licensure path to provide support for the family. The literature suggests that this delay may decrease chances of success. 

- **A lack of a structured approach to the decision tree regarding alternative careers.** It was the rare individual interviewed who indicated that they had thought about an alternative career prior to coming to Canada or had recognized rapidly that an alternative career should be seriously considered. The multistage process to licensure leads to ongoing hope that once that stage is completed “things will get easier”. Immigrant serving organizations are mandated to help IMGs achieve licensure and practice in Canada. Thus it is difficult for them to introduce alternative career options as a primary goal. Alternative careers may be introduced as a stop gap or transition, rather than a true career option.

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When IMGs do seek alternative careers, lack of Canadian experience and references limits their options. They are asked to complete full training programs where their medical qualifications may make it realistic for them to complete only a truncated program. The need to complete full programs takes additional time and funds and may be demoralizing. Immigrant supporting organizations provide some direction for alternative careers but acknowledge that they have limited resources for IMGs who would consider such careers.

4.0 OBSERVATIONS FOR CONSIDERATION
These observations reflect a synthesis of information obtained from multiple sources accessed in this project. They are not specific recommendations but rather, are meant to be considered in further discussions in the area of IMGs and alternative careers.

1. A considerable number of IMGs are likely to not complete the path to licensure and medical practice in Canada according to the limited data available. A key finding of this scan is that there is a significant challenge to accessing good data to determine the number of IMGs in Canada who do not achieve licensure. Based on available data, there are 3,908 - 7,595 IMGs that are not licensed and/or practising their profession in Canada. Anecdotally, this number will increase in the coming years, as residency positions continue to be competitive and the number of IMGCs continues to rise.

2. IMGs who are not successful in receiving their license and practicing medicine in Canada are a valuable potential resource for healthcare and the wider community of Canada.

3. The requirements (i.e., credentials, costs), timelines and likelihood of success at multiple stages of the licensure process are not clearly and realistically defined for IMGs when they first consider or come to Canada. IMGs come to Canada with an intense commitment to practice medicine. All of the IMGs interviewed commented that they were aware that the pathway to licensure and practice in Canada was challenging but did not fully appreciate the difficulty of the process. Government and other websites provide information on steps to licensure but the importance of the sequence, timing, and availability of positions is not clear. Orientation programs may require evidence of success on language proficiency examinations before the IMG can participate in their programs.

4. Orientation programs may have limitations on enrollment and/or accept applicants only after passing assessment examinations. In addition, these programs can only accept candidates at set intervals. Assessment and qualifying examinations are held at set intervals and registration is expensive. The CaRMS match for entry into residency programs takes place once yearly and the number of available positions, while increasing, does not equal the demand. Several sources indicate that time from graduation and time from practice relate to success in completion of additional training and examinations. Thus, with each delay in the path the IMG’s chances of success may diminish. Despite this, the majority of IMGs will continue to engage in the process for years.

5. Introducing the option of an alternative career to IMGs formally and positively early in their life in Canada would be beneficial. This option should be supported with access to specific resources.
6. The immigrant supporting organizations have limited resources and conflicting demands when asked to provide direction regarding alternative careers. Where these supports are provided it is on a relatively ad hoc basis. To minimize time in transitional jobs and allow IMGs to use their time most productively, resources (e.g., mentors, websites, programs, rotations in different healthcare settings) for alternative careers should be considered as an integral component of the organization’s repertory. Information and resources for alternative careers can also be supplied to the CFPC, the RCPSC, CaRMS, and other regulatory bodies so that unsuccessful candidates can be directed to these resources in a positive manner.

7. A single hub or portal providing information to potential IMGs about the requirements, timelines and likelihood of success of the licensure process and also, of alternative careers is of value to IMGs considering immigrating to Canada. In addition, a central portal could provide IMGs in Canada one stop to source information about the support and services they can access as newcomers.

8. Consistent tracking of IMGs facilitates health human resources planning. Collecting consistent human resources data across Canada has long been an issue discussed by many. Employing IMGs has been considered as an approach to addressing the physician shortages across the country. Currently there is very little data available on IMGs and limited consistent data to inform and improve planning for health human resources.

9. Technology can be better used to communicate to IMGs. The majority of the IMGs consulted in the research used the internet to get their information about Canada either before coming or shortly upon arriving in the country. Some commented on the challenges of locating and accessing the right information implying that technology can be better and more effectively used to communicate.

10. Other regulated health professions and healthcare in general will greatly benefit if they consider an IMGs credentials and experience when IMGs apply to those profession. All of the IMGs interviewed who were considering another regulated healthcare profession in Canada faced the same challenges of having institutions recognize their credentials and previous experience when applying for additional training. This results in IMGs not being fast tracked and permitted to focus on acquiring missing knowledge and training. Fast tracking IMGs applying to other regulated health professions where appropriate, will supply other health professions with skilled and competent professionals.

11. An interprovincial forum or body of immigrant serving agencies would be of value to immigrant serving organizations and IMGs. Such a forum would offer immigrant serving organizations the opportunity to share and exchange knowledge and information. All of the organizations interviewed for the scan were keen to learn of other programs and suggested that a place to share and exchange information would be of great value.
5.0 CONCLUSION
While IMGs immigrate (or return, as in the case of IMGCs) to Canada with the intention of practicing medicine in Canada, a significant number will not achieve this goal. There are a number of explanations for this failure and these have been reviewed in some detail in the literature\textsuperscript{19} and in this report. It is very difficult for IMGs to relinquish their dream of practicing medicine in Canada, however it is important that when this occurs there are appropriate alternative career opportunities available. Currently, there is no systematic approach to redirecting IMGs into alternative careers that make use of their education and expertise. The paucity of data on IMGs not achieving licensure makes planning for support for alternative careers difficult. Across Canada, there are organizations with programs to assist IMGs in exploring and achieving satisfying alternative careers but siloing of data and resources makes expansion of such services difficult.

Recognition of the relatively invisible population of IMGs who will not be licensed in Canada and acknowledgement of the importance of programs and services for meaningful alternative careers is an essential step. This will assure that IMGs who have made considerable sacrifices to come to this country can have fulfilling careers in Canada. It also allows the population of Canada to benefit from the resources that IMGs bring to this country.

This environmental scan provides preliminary information on the scope of the issue and potential directions for change. Going forward, governmental and non-governmental organizations, educators and regulators have an opportunity to develop a pan-Canadian approach that can be applied locally to address this concern.

\textsuperscript{19} Walsh A, Banner S et al.(2011) International Medical Graduates-Current Issues in The Future of Medical Education in Canada http://www.afmc.ca/FMECPG.
6.0 REFERENCES


Personal communication. April 10, 2013.


APPENDIX A: Preliminary interviews – Interview guide

IMGS IN CANADA PROJECT: INFORMING OUR CAPACITY TO INTEGRATE INTERNATIONAL MEDICAL GRADUATES IN CANADA

PRELIMINARY INTERVIEWS – INTERVIEW GUIDE

In its continued efforts to generate knowledge about International medical graduates (IMGs), CAPER embarked on a pan-Canadian project sponsored by Human Resources and Skills Development Canada (HRSDC). The goal is to consolidate data and information on IMGs to support a community of researchers and stakeholders by:

1. gathering data to allow the assessment of policies and legislations relating to IMGs in Canada; and,
2. transferring knowledge to develop and implement a collaborative analysis agenda that facilitates and supports meaningful knowledge transfer activities.

One component of the project is to identify the alternative career options IMGs pursue if they do not to follow the path to work as a physician in Canada. IMGs can generally be considered in two categories: Canadian citizens who have completed undergraduate medical education (UGME) outside of Canada (IMGCs) and immigrants from other countries who have completed at least undergraduate medical education outside of Canada (IMGs).

Anecdotally, IMG alternative career paths can be considered in the following categories:

- a. Healthcare delivery—training and work as surgical assistant, nurse, other healthcare professional
- b. Research—formal or informal training and work as research assistant/technician in academics, industry
- c. Government—work in regulatory, policy activities
- d. Alternative professional careers—retraining for alternative professional career-education, social work, etc.
- e. Alternative other “jobs”—lower wage work to “pay the bills”
- f. Volunteer activities
- g. Unemployed
The purpose of this interview is to better understand the process from entry to final career (licensure to practice medicine or other career) including facilitators and inhibitors as well as identify data sources to address:

a. # IMGC and IMG entering Canada
b. # Successfully credentialed
c. # Successfully entering orientation program
d. # Successfully entering residency or supervised practice
e. # Successfully licensed

This data will provide a framework to identify “alternative career” points and individuals or groups to provide information on these careers.

We would also like to talk to you about the published and unpublished literature relevant to the project. We have allotted about one (1) hour for the interview. Is this still a good time?

Your responses will remain confidential. We will consolidate all the responses for the purposes of reporting.

Do you have any questions?

**QUESTIONS**

1. Describe your organization’s level of interaction with IMGS and IMGCs
2. Following are the steps we have identified to licensure and practice. Is this an accurate description of the process? At what step does your organization interact with the IMGs and IMGCs?
   - Verification of credentials
   - Successful completion of the Medical Council of Canada examination relevant to their status
   - Evaluation for an orientation program
   - Participation in an orientation program
   - Successful completion of a residency (PGME) program and/or supervised practice
   - Application for licensure (either restricted or unrestricted)
   a. What is the objective with respect to IMGs?
   b. What is the desired outcome?
3. What information do you collect with respect to IMGs (incl. IMGCs) entering your program?
   a. Suggest where we can find this information.
4. What information do you collect with respect to IMGs (incl. IMGCs) who do not go on to practise medicine in Canada?
   a. Suggest where we can find this information.
   b. If you think that an IMG (or IMGC) will not be able to get licensed, what are your next steps?
5. What is your or your organization’s experience with IMGs (incl. IMGCs) who enter Canada but do not become licensed in Canada? Do you have any information or suggestions on where we can retrieve information about this cohort?

6. Describe the successes of the IMGs pathways in Canada. Are IMGs/IMGCs targeted by international recruiters?

7. Describe the challenges of the IMGs pathways in Canada. Probe: at what point do IMGs/IMGCs think about leaving Canada to return home or to pursue medical practice in another country?

8. We plan to conduct further interviews and focus groups with various organizations involved in this area. Do you have any recommendations of who we should consider talking to?

9. Are there any issues we did not ask that you would like to discuss?

THANK YOU FOR YOUR TIME.
APPENDIX B: List of organizations - Preliminary interviews

Alberta International Medical Graduates Association

Canadian Resident Matching Service (CaRMS)

Centre for the Evaluation of Health Professionals Educated Abroad (CEHPEA)

Citizenship and Immigration Canada

Collège des Médecins du Québec (CMQ)

Faculty of Medicine, University of British Columbia/IMG-BC

Medical Council of Canada (MCC)

Ministry of Health & Longterm Care
APPENDIX C: Discussion questions

IMGS IN CANADA PROJECT: INFORMING OUR CAPACITY TO INTEGRATE INTERNATIONAL MEDICAL GRADUATES IN CANADA

1. How long have you worked with IMGS? Do you also see Canadians studying abroad?
2. Approximately how many do you see in a year?
3. Do you collect data about the IMGS (e.g. demographics and what they end up doing)?
4. What made you start working with IMGS (e.g. our mandate, they began coming and we realized they needed assistance etc.)?
5. We are specifically interested in IMGS who do not end up with licenses to practice, does your organization help IMGS to learn about and find alternative career/jobs?
6. From your organization’s perspective, what are IMGS major concerns and major needs?
7. What programs and services do you provide and for how long?
8. Who provides input as you develop your programs and services (e.g. prior IMGS, industry, government, etc.)?
9. Who funds your organization?
10. Do IMGS pay to participate in your programs?
11. What are your organizations’ needs to better help IMGS seeking alternative careers?
12. Do you discuss your programs with other groups, the government etc.?
13. Do you have a general comment regarding IMGS seeking alternative careers in Canada?
14. Can you suggest other organizations we should speak with regarding IMGS in alternative careers?
15. Do you know IMGS with alternative careers that we could talk with?
16. Any other comments?
APPENDIX D: Online survey questions (English and French)

IMGs in Canada Project

INFORMING OUR CAPACITY TO INTEGRATE INTERNATIONAL MEDICAL GRADUATES IN CANADA

Immigrants who qualify for an MD license in their originating country do not all practice medicine in Canada. CAPER embarked on a pan-Canadian project sponsored by Human Resources and Skills Development Canada (HRSDC) of which one component is to investigate the alternative careers options IMGs pursue and the support they receive if they do not to follow the path to work as a physician in Canada. The Health HR Group has been retained to complete the research. IMGs can generally be considered in two categories: Canadian citizens who have completed undergraduate medical education outside of Canada (IMGCs) and immigrants from other countries who have completed at least undergraduate medical education outside of Canada (IMGs). Your organization has been identified as an immigrant serving organization and we invite you to complete this short online survey. The survey should take you no more than five (5) minutes of your time. All responses will be confidential and information will only be used in aggregate format. If you have any questions regarding this survey please contact Jody Layer by e-mail at jody@hhrgroup.ca. We hope that you will find some time to assist us in this important initiative.

Name of your organization

Geographical location of your organization

- Alberta
- British Columbia
- Manitoba
- New Brunswick
- Newfoundland and Labrador
- Northwest Territories
- Nova Scotia
- Nunavut
- Ontario
Do you serve International medical graduates (IMGs)?

- Yes
- No
- I don't know

What services do you provide for IMGs? (check all that apply)

- Same services as for other clients
- Language skills
- Counselling to get into residency
- Counselling to get a license
- Counselling regarding other careers
- Other (please specify) __________________________

If you counsel for careers other than MD practice, which of the following do you provide? (check all that apply)

- CV review
- Referral to specific training for alternative careers
- Referral to specific available jobs
- Job/career fair
- Mentorship activities
- Meeting with IMGs in careers other than MD practice
- Do not counsel for careers other than MD practice
- Other (please specify) __________________________
Can we contact you for additional information?

- Yes
- No

Can you recommend an alternate contact we can connect with?

- Yes
- No

CONTACT INFORMATION

Contact Name

Organization

Email Address

Telephone Number

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS SURVEY.
Projet sur les DIM au Canada

Les immigrants détenteurs d’un permis de MD dans leur pays d’origine n’exercent pas tous la médecine au Canada. CAPER a entrepris un projet pancanadien parrainé par Ressources humaines et développement des compétences Canada (RHDCC). Une des composantes de ce projet consiste à examiner les autres choix de carrière pour lesquels ils optent et l’appui qu’ils reçoivent s’ils ne suivent pas le cheminement requis pour exercer comme médecins au Canada. Le Health HR Group se chargera de réaliser l’étude. Les DIM peuvent peuvent généralement être classés en deux catégories : les citoyens canadiens ayant effectué leur formation médicale prédoctorale à l’extérieur du Canada (CEME) et les immigrants d’autres pays qui ont complété au moins leur formation médicale prédoctorale à l’extérieur du Canada (DIM). Votre organisme a été identifié comme un organisme d’aide aux immigrants et nous vous invitons à participer à ce bref sondage en ligne. L’exercice ne devrait pas vous prendre plus de 10 minutes. Toutes les réponses demeureront confidentielles et l’information ne sera utilisée que de manière globale. Pour toute question concernant ce sondage, veuillez communiquer par courriel avec Jody Layer à l’adresse suivante : jody@hhrgroup.ca. Nous espérons que vous trouverez le temps de nous aider dans le cadre de cette importante initiative.

Nom de l’organisme

<table>
<thead>
<tr>
<th>Situation géographique</th>
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<tbody>
<tr>
<td>à l’échelle nationale</td>
</tr>
<tr>
<td>Alberta</td>
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<td>Île-du-Prince-Édouard</td>
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<td>Manitoba</td>
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<td>Nouveau-Brunswick</td>
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<td>Nouvelle-Écosse</td>
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<td>Nunavut</td>
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<td>Ontario</td>
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</tbody>
</table>
Les diplômés internationaux en médecine (DIM) comptent-ils parmi vos clients?

- Oui
- Non
- Je l'ignore

Quels services offrez-vous aux DIM? (Choisissez toutes les options pertinentes)

- Les mêmes services qu’aux autres clients
- Des compétences linguistiques
- Des conseils pour accéder à la résidence
- Des conseils pour obtenir un permis d’exercice
- Des conseils au sujet d’autres choix de carrière
- Autre (veuillez préciser) __________________________

Si vous offrez des conseils relativement à des choix de carrière autres que la médecine, lequel des services suivants offrez-vous? (Choisissez toutes les options pertinentes)

- Examen du curriculum vitae
- Orientation vers une formation adaptée à d’autres carrières
- Orientation vers des emplois spécifiques disponibles
- Salon de l’emploi
- Activités de mentorat
- Rencontres avec des DIM qui travaillent dans des secteurs autres que la médecine
- Nous n’offrons pas de conseils sur des carrières autres que médicales
- Autre (veuillez préciser) __________________________
Pouvons-nous communiquer avec vous pour obtenir des renseignements supplémentaires?

○ Oui
○ Non

Pouvez-vous nous fournir le nom d’une deuxième personne-ressource avec qui nous pouvons communiquer?

○ Oui
○ Non

COORDONNÉES

Nom de la personne-ressource

Organisme

Courriel

Numéro de téléphone

NOUS VOUS REMERCIONS D’AVOIR PRIS LE TEMPS DE RÉPONDRE À CE QUESTIONNAIRE.
APPENDIX E: List of organizations - Stage 2 interviews

Access Centre HealthForce Ontario
Alberta Health Services
Bredin Centre for Learning
Catholic Centre for Immigrants – Ottawa
Directions for Immigrants/ Bow Valley College
Health Human Resources at McMaster University
Health Skills Connect
IMG Support Program
Immigrant Settlement and Integration Services (ISIS)
LASI World Skills
Medical Council of Canada
The Immigrant Employment Council of BC
APPENDIX F: Focus Group discussion guide

IMG FOCUS GROUP
DRAFT v1 - DISCUSSION GUIDE

INTRODUCTION

- Provide brief overview of the project, its goals and objectives
- Ensure participants understand that the focus group is discussion session for data collection and not to provide career opportunities or a pathway to licensure
- Conduct roundtable introductions asking participants to introduce themselves, their country of origin, when they arrived in Canada, where they currently reside in Canada and their current employment.

DISCUSSION QUESTIONS/THEMES

1. What was your initial understanding of what was needed (and how long it would take) to be a licensed MD in Canada?
   - Probe: type of media used to get information, type of information available
2. When did you consider an alternative career and what is your alternative career?
   - Probe: reasons for choosing an alternative career and reasons for choosing that career
3. How did you reach this career?
   - Probe: type of services and support accessed; successes; challenges
4. Do you see this as permanent for you?
   - Probe: if not permanent why not
5. What advice would you give to IMGs arriving in Canada or thinking of coming to Canada?
   - Probe: reasons for that advice
6. What advice would you give to organizations trying to assist IMGs?
   - Probe: reasons for that advice
SEARCH STRATEGY AND PEER REVIEWED LITERATURE REVIEW

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<tr>
<th>SEARCH TERM</th>
<th>NUMBER OF ARTICLES CITED</th>
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<tr>
<td>International medical graduates Canada</td>
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</tr>
<tr>
<td>International medical graduates Canada careers</td>
<td>3</td>
</tr>
<tr>
<td>International medical graduates Canada alternative careers</td>
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</tr>
<tr>
<td>International medical trainees</td>
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</tr>
<tr>
<td>International medical trainees Canada</td>
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</tr>
<tr>
<td>Foreign medical graduate(s)</td>
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<tr>
<td>Foreign medical graduate(s) Canada</td>
<td>340</td>
</tr>
<tr>
<td>Foreign medical graduate(s) Canada alternative careers</td>
<td>0</td>
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</table>

All titles were reviewed. Where the title indicated reference to Canadian data, programs or outcomes, the abstract was accessed and reviewed. The full article was accessed and reviewed where any abstract indicated reference to paths or outcomes other than medical licensure. While there is a robust literature on IMGs on the paths for entry to medical practice including preparation for licensure, and barriers and facilitators to entry to medical residency or practice, there are no articles that address the issues of IMGs who leave the licensure to practice path.
APPENDIX H: Inventory of immigrant serving agencies
<table>
<thead>
<tr>
<th>IMMIGRANT SERVING AGENCIES</th>
<th>DESCRIPTION</th>
<th>MANDATE/MISSION</th>
<th>SERVICES</th>
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<tbody>
<tr>
<td>NATIONAL</td>
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<tr>
<td>Canadian Immigrant Settlement Sector Alliance  (link is broken)</td>
<td>An alliance of provincial and national organizations that represent 450 immigrant and refugee settlement agencies from across Canada. Harnesses the expertise of the immigrant settlement sector, and is the sector’s national voice to help build a Canadian society in which all immigrants and refugees are able to participate fully.</td>
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<td>IMMIGRANT SERVING AGENCIES</td>
<td>DESCRIPTION</td>
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<tr>
<td>The Canadian Coalition for Community-Based Employability Training (CCCBET) (<a href="http://www.savie.qc.ca/Ccocde/An/AccueilPublique.asp">http://www.savie.qc.ca/Ccocde/An/AccueilPublique.asp</a>)</td>
<td>National, non-profit organization whose membership is comprised of appointees from provincially chartered community-based training associations. Goal: to help community-based trainers become known world-wide for excellence in client-centred training and employment services.</td>
<td>Provide holistic, collaborative and non-institutional career development opportunities for people who are unemployed and who experience barriers to employment.</td>
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<td>Working in Canada (<a href="http://www.workingincanada.gc.ca/">http://www.workingincanada.gc.ca/</a>)</td>
<td>Launched in 2007, Government of Canada's leading source for jobs and labour market information. It offers users free occupational and career information such as job opportunities, educational requirements, main duties, wage rates and salaries, current employment trends, and outlooks.</td>
<td>The site integrated 7 sources of information in 1 convenient location (mash-up) to help workers make informed decisions. As of 2010, the site had expanded to include 23 sources of learning and labour market information for Canadians and newcomers alike. Can explore the job market and search 60,000 listings daily from Job Bank and external sources.</td>
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<tr>
<td><strong>BRITISH COLUMBIA</strong></td>
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<tr>
<td>AB Association of Immigrant Serving Agencies (<a href="http://aaisa.ca/">http://aaisa.ca/</a>)</td>
<td>Umbrella organization of immigrant-serving agencies in Alberta addressing the needs of immigrants, the agencies that serve them, and the larger community that welcomes them.</td>
<td>Vision to provide an association by and through which its members work towards addressing the needs of Newcomer Canadians, the agencies that serve them, and the communities that welcome them.</td>
<td>Settlement training program: supports practitioners by providing training, professional development, and certification.</td>
</tr>
<tr>
<td>Affiliation of Multicultural Societies and Service Agencies of British Columbia (<a href="http://www.amssa.org/">www.amssa.org/</a>)</td>
<td>AMSSA is the provincial umbrella for community-based immigrant serving agencies in BC - more than 80 multicultural agencies providing immigrant settlement and multicultural services in communities throughout BC.</td>
<td>Facilitates collaborative leadership, knowledge exchange and stakeholder engagement to support member agencies that serve immigrants and build culturally inclusive communities</td>
<td>1) Settlement and integration, 2) Multi-cultural health: promote access to culturally appropriate health information and services and encourage communication and cooperation on multicultural health issues between health care providers, settlement workers and diverse communities; 3) Diversity: safe harbour - respect for all program.</td>
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<td><strong>ALBERTA</strong></td>
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<td>Alberta Clinical and Surgical Assistance Program (ACSAP) (<a href="http://acsap.ca/">http://acsap.ca/</a>)</td>
<td>Program is administered by AB Health Services (AHS) Medical Affairs and is open to IMGs interested to receive Cdn clinical experience within AB.</td>
<td>The goal is to provide a transition program in preparation for acute care coverage roles to address clinical and/or surgical coverage by providing IMG’s an opportunity for clinical assessment and evaluation within a supervised setting</td>
<td>Six month orientation, clinical assessment, and evaluation program within a particular clinical or surgical service located in Calgary or Edmonton. IMGs have the potential to move into career stream positions after completing a Clinical Assistant (CA) or Clinical/Surgical Assistant Program (CSA). Successful completion of the program does not result in full licensure or independent practice. Instead, successful program Candidates are eligible to be contracted to provide after hours patient care under the supervision of independently licensed physicians and surgeons on designated hospital services.</td>
</tr>
<tr>
<td>Alberta IMG Association (<a href="http://aimga.ca/">http://aimga.ca/</a>)</td>
<td>Created in 2001, AIMGA consists of doctors trained or educated in countries other than Canada and also includes individuals and organizations interested in the various challenges facing IMGs in Alberta.</td>
<td>Responsible, informed, and equitable integration of international graduate physicians into the Canadian Healthcare System. AIMGA aims for the recognition of skills and experience gained outside Canada, without compromising current Canadian medical ideals or standards.</td>
<td>Provides support for the licensure process, professional integration support (i.e., observership, mentorship, and professional development support), enhanced language support, and employment readiness support (i.e., career enhancement training, focused training programs, and volunteer opportunities).</td>
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<tr>
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<td>Alberta Network of Immigrant Women (<a href="http://www.aniw.org">www.aniw.org</a>)</td>
<td>The Network is uniquely positioned to understand women’s concerns, and to work across various community and government agencies to encourage effective collaboration in delivering programs and services.</td>
<td>Connect and support immigrant women to build a new life in Canada.</td>
<td>Through Capacity Alberta Initiative provide orientation sessions regarding the accreditation process for dentists, nurses, and engineers; professional education workshops; well-being and personal development workshops; study groups for IMGs, International Educated and Trained (IET) engineers, IET dentists, nurses and dental assistants; and, education and awareness workshops.</td>
</tr>
<tr>
<td>Association of International Medical Doctors of BC (<a href="http://aimdbc.org/">http://aimdbc.org/</a>)</td>
<td>Established in 2003 and through the support of the BC ITPs Network. Has been active in a number of advocacy activities.</td>
<td>Ensure that internationally trained medical doctors are integrated effectively and equitably into British Columbia’s healthcare system.</td>
<td>Provides support to IMGs working towards licensure (i.e., preparation for MCQEE I and OSCE preparation).</td>
</tr>
<tr>
<td>Association of Service Providers for Employability and Career Training - ASPECT (<a href="http://www.aspect.bc.ca">www.aspect.bc.ca</a>)</td>
<td>Non-profit association of community-based trainers in BC with a goal to prepare people for work. Represents more than 175 agencies in more than 100 communities throughout BC. Member agencies are comprised of non-profit and private organizations that provide a variety of services including career assessment, work and life skills training, employment counselling, and job placement. Target group includes new immigrants together with unemployed, persons with disabilities, visible minorities, etc.</td>
<td>Provide leadership, education, advocacy and public awareness in support of its members who provide community-based workforce development services.</td>
<td>Currently delivering IMMPowerBC, the only province-wide program that is designed for skilled immigrants and internationally trained professionals.</td>
</tr>
<tr>
<td>BC Internationally Trained Professionals (ITPs) Network (<a href="http://bcitp.net/">http://bcitp.net/</a>)</td>
<td>Founded in 2002, a partnership of ITPs from around BC, working cooperatively, to improve access to meaningful employment for all immigrant professionals in BC. Primary focus: empowerITPs to enter into constructive dialogue with stakeholders and to act on self identified goals. MOSAIC, ISS and SDISS (Surrey Delta Immigrant Services Society of BC) collaborated to found the network.</td>
<td>Help build associations and networks among ITPs.</td>
<td>Links to local associations and networks of ITPs.</td>
</tr>
<tr>
<td>IMMIGRANT SERVING AGENCIES</td>
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<tr>
<td>Bow Valley College - Directions for Immigrants</td>
<td>No cost career service centre that helps internationally educated professionals secure professional employment and gain accreditation. Operated by Bow Valley College, and funded by the Government of Alberta and the Government of Canada.</td>
<td>Help immigrant professionals work towards accreditation and finding employment in their profession.</td>
<td>In 2008, launched service to help internationally educated health professionals. Clients now have access to a growing number of study groups, career coaches and workshops all developed to help establish a career in the healthcare industry.</td>
</tr>
<tr>
<td>Bredin Learning Centre (Bredin Institute)</td>
<td>Non-profit organization funded by Alberta Employment &amp; Immigration, Service Canada, and Citizenship and Immigration Canada. Offers employment assistance, training and career planning programs to youth, adults and newcomers to Canada.</td>
<td>Successful employment training and development by providing innovative, flexible programs; by treating people with dignity and respect; and by responding to the economic needs of the individual and the community.</td>
<td>The Centre for Skilled and Internationally Trained Professionals is a work search program that helps internationally trained professionals navigate the obstacles of licensure recognition and secure meaningful employment in their field of expertise. The Health Career Centre is a work search program that helps internationally trained health professionals navigate the obstacles of licensure recognition and secure meaningful employment in their field of expertise.</td>
</tr>
<tr>
<td>Calgary Immigrant Women’s Association</td>
<td>Non-profit organization established in 1982, the CIWA is a culturally diverse settlement agency that recognizes, responds to, and focuses on the unique concerns and needs of immigrant and refugee women, girls and their families.</td>
<td>Engage and integrate immigrant women and their families in the community.</td>
<td>CIWA offers 36 programs and projects that use a holistic approach to service delivery in the areas of settlement and integration, literacy and language training, employment support and bridging programs, family violence, parenting, individual counselling, in-home support, civic engagement, health, housing and community development.</td>
</tr>
<tr>
<td>Calgary Region Immigrant Employment Counselling</td>
<td>Builds pathways such as mentoring programs, cultural competency programs and positive relationships between Calgary employers and ITPs that encourage hiring and retention. CRIEC is funded by a number of funders including CIC.</td>
<td>Create seamless and transparent processes that empower ITPs to work in their field and achieve full acceptance by their professional and regulatory bodies.</td>
<td>Connect International Trained Professionals with employers through critical initiatives such as the mentoring program.</td>
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<tr>
<td>IMMIGRANT SERVING AGENCIES</td>
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<tr>
<td>Central Alberta Immigrant Women’s Association (<a href="http://www.caiwa.ca/">http://www.caiwa.ca/</a>)</td>
<td>Incorporated in 1991, the goal of the CAIWA is to empower immigrant women.</td>
<td>Raise the level of awareness of Immigrant Women and their families in all aspect of Canadian life, and to assist them in achieving their full potential as members of Canadian Society.</td>
<td>Programs offered in skill development (computer classes), health awareness and wellness, and community outreach.</td>
</tr>
<tr>
<td>Centre for Newcomers (<a href="http://www.centrefornewcomers.ca/">http://www.centrefornewcomers.ca/</a>)</td>
<td>Non-profit organization established in 1998 to welcome newcomers, and support their adjustment in Canada through services and initiatives that promote diversity, participation and citizenship. Newcomers learn the language, employment skills and cultural practices that characterize life in Canada. Services are delivered by diverse and multicultural professionals in English and in a newcomer’s first language.</td>
<td>Achieve integration of newcomers in the community through services and initiatives that promote diversity, participation and citizenship.</td>
<td>Assist with career and employment planning. Training programs provide opportunities to develop employability and communication skills, while training for a new occupation or further develop professional skill in the previous occupation.</td>
</tr>
<tr>
<td>Edmonton Immigrant Services Association (<a href="http://www.eisa-edmonton.org/">www.eisa-edmonton.org/</a>)</td>
<td>exists in order to provide programs and direct services relating to Integration, Settlement, Adaptation and Education for new immigrants, refugees and first generation Canadians in Edmonton and surrounding areas regardless of age, gender, religion, nationality or ethnic origin to assist them make a smooth transition into Canadian life.</td>
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</tr>
<tr>
<td>Immigrant Employment Council of B.C. (<a href="http://www.iecbc.ca/">http://www.iecbc.ca/</a>)</td>
<td>Started in 2003 to build a more integrated system to better support the needs of skilled immigrants seeking entry into the workforce.</td>
<td></td>
<td>Provides counselling, settlement support and referrals, and its agencies also partner formally and informally with training institutions for specific training services.</td>
</tr>
<tr>
<td>Immigrant Services Calgary (<a href="http://www.immigrantservicescalgary.ca/">www.immigrantservicescalgary.ca/</a>)</td>
<td>provides a variety of services to support the settlement and integration of newcomers in the Calgary community.</td>
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*Agencies highlighted in blue relevant to IMGs in Canada*
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<tr>
<th>IMMIGRANT SERVING AGENCIES</th>
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<th>MANDATE/MISSION</th>
<th>SERVICES</th>
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<tbody>
<tr>
<td>Immigrant Services Society of BC (<a href="http://www.issbc.org/">http://www.issbc.org/</a>)</td>
<td>Incorporated in 1972, ISSofBC is the largest agency of its kind in Western Canada.</td>
<td>Help immigrants start new lives in Canada by: delivering educational, settlement and employment services; developing partnerships with local communities; and, promoting an integrated and equitable community.</td>
<td>Offer programs in career services, settlement services and English Language Services for Adults (ELSA).</td>
</tr>
<tr>
<td>Inter-Cultural Association of Greater Victoria (<a href="http://www.icavictoria.org/">www.icavictoria.org/</a>)</td>
<td>Founded in 1971 ICA helps individuals and organizations to connect across cultures.</td>
<td>Promote cultural understanding and alleviate racism. Information, support and tools to help immigrants reach their goals such as settlement and integration counselling, translation and interpretation, English classes, mentoring, job search assistance and guidance, volunteer matching, and peer support. ICA also provides outreach and education in the community through arts programming, as well as community development workshops on anti-racism, multiculturalism, diversity awareness, immigration, and human rights.</td>
<td></td>
</tr>
<tr>
<td>MOSAIC (<a href="http://www.mosaicbc.com/">http://www.mosaicbc.com/</a>)</td>
<td>A multilingual non-profit organization dedicated to addressing issues that affect immigrants and refugees in the course of their settlement and integration into Canadian society.</td>
<td>Support and to empower immigrant and refugee communities, helping them to address critical issues in their neighborhoods and workplace.</td>
<td>Services include interpretation, translation, English classes, employment programs, community outreach and development programs, family support programs and bilingual and family counselling. Workplace Connections Mentoring Program: designed to complement with one-on-one support from a volunteer mentor. Volunteer mentors can help you learn about Canadian workplace culture, build your professional networks, improve your professional English skills, practice your self-marketing techniques and identify potential employers.</td>
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<tr>
<td>Skills Connect for Immigrants Program Back in Motion (<a href="http://www.skillsconnect.ca/">http://www.skillsconnect.ca/</a>)</td>
<td>Part of the WelcomeBC umbrella of services. Funding from the Government of Canada and B.C. Jointly offered by Back in Motion and MOSAIC in Lower Mainland B.C. and ISSBC in Surrey, B.C.</td>
<td>Help skilled immigrants move more quickly into jobs that match their experience and background.</td>
<td>Skills Connect for Immigrants Program at Back in Motion helps immigrants in B.C. move into careers that match their experience and background. Also offer a free program connecting employers with qualified individuals by posting job opportunities. Services: career counselling, assessment and planning services, access to courses and certification, workplace practice opportunities, job placements, and support to navigate the system, language barriers, credential recognition, and employment networks.</td>
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<tr>
<td>The Edmonton Mennonite Centre for Newcomers (<a href="http://www.emcn.ab.ca/">www.emcn.ab.ca/</a>)</td>
<td>A community agency that seeks to assist immigrants and refugees coming to the Edmonton area in achieving full participation in the community as well as contributing their experiences and skills to strengthen and enrich the lives of all Canadians.</td>
<td>Enhance quality of life for newcomers and all Canadians.</td>
<td>Provides english language services; career and employment services such as: workshops and clinics, employment and career counselling, employment resource centres, job clubs, outreach workshops, and specialized training and bridge programs; and, workshop and exposure courses such as: self-assessment, goal setting, career research and essential skills training to reach short-term careers.</td>
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<tr>
<td>The Immigrant Employment Council of BC (<a href="http://www.iecbc.ca/about-us">http://www.iecbc.ca/about-us</a>)</td>
<td>A provincial non-government organization that stimulates integration of skilled immigrants into B.C.'s workforce. Newcomers are quickly integrated into our labour market at a level that utilizes their skills, training and education.</td>
<td>Integrate immigrants into the labour market builds BC's economy.</td>
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<td>Victoria Immigrants and Refugee Centre Society</td>
<td>Non-profit organization founded in 1989. The Centre helps immigrants, refugees, new Canadian citizens, and visible minorities settle and adapt into new lives in Greater Victoria.</td>
<td>Assist in the settlement and adjustment of immigrants and refugees in Canada, and to provide services designed to increase the newcomer’s participation in Canadian society, by assisting the newcomer to overcome barriers.</td>
<td>Offer services and resources (resume and interview preparation, life skills coaching) to start job searches. Links to SkillsConnect and Work BC Employment Program of BC.</td>
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<td>Immigrant Centre Manitoba (<a href="http://icmanitoba.com/about-immigrant-centre/">http://icmanitoba.com/about-immigrant-centre/</a>)</td>
<td>Established in 1948 to deliver quality, innovative Immigration and Settlement Services.</td>
<td>Allow immigrants to connect, integrate, and fully participate in Canadian Society.</td>
<td>The employment services offered specializes in helping clients with low Canadian Language Benchmarks, and clients with work-permits. Facilitators assess individual and establish a short-term work plan. Job search workshop and assistance is offered as part of the program. Optional information about interviewing skills, and the opportunity to attend a Job Club every week is offered as the third stage in working model.</td>
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<tr>
<td>International Women of Saskatoon (<a href="http://internationalwomenofsaskatoon.org/">http://internationalwomenofsaskatoon.org/</a>)</td>
<td>Non-profit organization dedicated to assisting immigrant and refugee women and their families, residing in Saskatoon and area, through free programs and services designed to support their settlement and integration into their community. Works both independently and in partnership with other community based organizations, both immigrant and mainstream serving agencies, private and government organizations.</td>
<td>Goal: to help improve the status of immigrant and refugee women and their families, residing in Saskatoon and the surrounding region, by assisting them to become full participating members in all aspects of the Canadian society.</td>
<td>Offer language and literacy classes and work readiness program as part of its employment training program. The work-readiness program is designed to assist immigrant/refugee women, skilled and unskilled, in their effort to enter or re-enter the Canadian workforce. The program consists of two intakes each year each intake a 20 week training period for onsite and offsite components: September and February. The onsite and offsite component include: 1) workplace literacy and public speaking sessions; 2) hard/technical skills (food safe, first aid/CPR, WHIMS); 3) Work/Life Skills workshops (cover letter, resume, job search techniques); and, 4) individual case management sessions. Program involves a 6-8 week work-placement whereby the participants are matched with local employers for the opportunity to put into practice the knowledge and skills that they have acquired and hence gain Canadian work experience. They are also linked to real employment opportunities.</td>
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| Manitoba Interfaith Immigration Council  
(http://www.miic.ca/Default.aspx) | Promotes and supports the protection and resettlement of refugees and offers a range of services that welcomes and assists refugee newcomers in their settlement and integration into Canadian society. Strives to enable independence and full participation of newcomers in the community. | Welcome and extend hospitality to all refugees/immigrants and to serve them as brothers and sisters. | Settlement services provided includes facilitating referral and access to language training, employment assistance, and education services. |
| Moose Jaw Multicultural Council  
(http://www.mjmcinc.ca/index.php) | Founded in 1974, the Council is a non-profit charitable organization and acts as an umbrella for other cultural groups in the city of Moose Jaw and area. Welcomes and integrates newcomers to Canada, and develops harmonious relations among Canadians, through programs and activities that recognize, respect and promote the positive aspects of cultural diversity, and that seek to discover, encourage and develop commonalities among people. | Provides a full range of Settlement, Orientation and Language services for newcomers to Moose Jaw and Area. As a part of the Career & Employment Preparation program, participants attend a 12 week Career & Employment Preparation course, which provides a strong basis for successful integration into the labour market. The course includes education on skills development, Canadian workplace culture, resume creation, and job search skills. |
| Regina Immigrant Women  
http://www.reginaiwca.ca/ | Founded in the early 1980s as a non-profit organization providing programming for the education, integration, enrichment and empowerment of immigrant and refugee women and their families. Empower new Canadian women and promote equity and diversity in Regina | | |
| Regina Open Door Society  
http://rods.sk.ca/ | Non-profit organization that provides settlement and integration services to refugees and immigrants in Regina. Meet the needs of newcomers by offering programs and services that enable them to achieve their goals and participate fully in the larger community. | Variety of pre-employment classes and employment counselling to newcomers. | |
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<td>Saskatchewan Association of Immigrant Settlement and Integration Agencies (SAISIA) (<a href="http://saisia.ca/index.php?pageid=about">http://saisia.ca/index.php?pageid=about</a>)</td>
<td>Established in 1987 as an umbrella organization for settlement and integration service agencies in Saskatchewan. Acts as a forum for: 1) networking and information exchange, provincially, interprovincially and nationally; 2) facilitating the identification of shared needs concerning immigrants and refugees; 3) defining collective goals; 4) representing and advocating for common concerns and objectives to the federal, provincial and municipal governments; the community and the public; and, 5) providing quality client centered services along the settlement continuum.</td>
<td>Ensure that all newcomers are welcomed and supported in way that encourages timely settlement, adaptation and integration into the fabric of Saskatchewan life.</td>
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<td>Saskatoon Open Door Society <a href="http://www.sods.sk.ca/Home.aspx">http://www.sods.sk.ca/Home.aspx</a></td>
<td>Established in 1980 as a centre to assist refugees and immigrants moving to Saskatoon.</td>
<td>Welcome and assist refugees and immigrants to become informed and effective participants in Canadian society and to involve the Saskatoon community in their hospitable reception and acceptance.</td>
<td>Employment counselling offered as well as employment programs.</td>
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<td><strong>Access Centre for Internationally Educated Health Professionals (Health Force Ontario)</strong> (<a href="http://www.healthforceontario.ca/en/">http://www.healthforceontario.ca/en/</a>)</td>
<td>Ontario’s strategy to ensure that Ontarians have access to the right number and mix of qualified health care providers, now and in the future. Ministry of Health and Long-Term Care and the Ministry of Training, Colleges and Universities are delivering on the strategy in collaboration with the providers and consumers.</td>
<td>Ensure that Ontarians have access to the right number and mix of qualified health care providers, now and in the future.</td>
<td>Provide services to several different groups of health professionals, including Internationally Educated Health Professionals who need help navigating the licensing process in Ontario, license-eligible physicians in other countries/provinces who wish to relocate and practice in Ontario, and physicians training in Ontario who need help determining their ideal practice location or fulfilling a return of service agreement with the Ministry of Health and Long-term Care. Focus is on helping physicians get their license or a practice in Ontario.</td>
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<tr>
<td><strong>Afghan Women’s Association</strong> (<a href="http://www.afghanwomen.org/home">http://www.afghanwomen.org/home</a>)</td>
<td>Located in North York, Toronto, AWO has been in existence for 20 years. AWO’s commitment is to ameliorating the lives of Afghan women and children in Ontario, as well as in Afghanistan and Pakistan. Future goal is to expand AWO’s projects and programs in Ontario as well as in Afghanistan and Pakistan.</td>
<td><strong>Mandate:</strong> provide settlement services to all newcomers, with a special focus on women, their families, refugees and people who have experienced war and persecution. <strong>Mission:</strong> improve newcomers’ quality of life, to help them live in dignity and reach their full potential, and to prompt social and economic inclusion so that they may be contributing members of society.</td>
<td>LINC (Language Instruction for Newcomers to Canada) program offered in Toronto area. Job Search Workshops are three-to-four days in length, with no cost to the participant, and can be taken during the day, in the evening, or on Saturdays.</td>
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<td>Association of International Physicians and Surgeons of Ontario (AIPSO) (<a href="http://aipso.webs.com/">http://aipso.webs.com/</a>)</td>
<td>Non-profit, independent professional association which represents physicians and surgeons trained and licensed in jurisdictions outside Canada. AIPSO and its local affiliates have more than 2000 registered physicians from 105 countries. AIPSO's members are at various stages of the licensing process in Ontario. Most are not yet licensed to practice medicine in Ontario. Working on a new initiative — in partnership with stakeholders — to develop a program that will help foreign-trained physicians find related employment in other healthcare fields.</td>
<td>Ensure that internationally-trained physicians are integrated effectively and equitably into the Canadian health care system.</td>
<td>Objectives: 1) to facilitate access to the licensing process for internationally trained physicians; 2) to work collaboratively with other stakeholders to identify and develop appropriate assessment, orientation, upgrading and integration programs for IMGs.</td>
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<tr>
<td>Canadian Centre for Language and Cultural Studies (<a href="http://www.cclics.ca/">http://www.cclics.ca/</a>)</td>
<td>In operation since 1992 as a non-profit, charitable organization, located in downtown Toronto. The LINC (Language Instruction for Newcomers to Canada) program is supported by Citizenship and Immigration Canada (CIC).</td>
<td>Provide high quality instruction and practical assistance in a friendly, welcoming environment.</td>
<td>Offer a variety of educational services and programs to individuals and organizations, including: 1) TESL Ontario and TESL Canada recognized programs for teaching English in Canada or abroad; 2) Free LINC English classes for newcomers to Canada (childcare provided); 3) professional development workshops, job announcements, and links to other organizations.</td>
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<tr>
<td>Canadian Ukrainian Immigrant Aid Society (<a href="http://www.cuias.org/">http://www.cuias.org/</a>)</td>
<td>Non-profit community organization for over 30 years. Supported by the federal and provincial governments and charitable donations from the community. Provide some employment services.</td>
<td>Provide settlement assistance to immigrants.</td>
<td>Provides some resources/information on the website pertaining to job interviews, examples of resume and some job listings in the area. Links to credential assessment do not work.</td>
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<td>Career Transitions for International Medical Doctors (IMD) (<a href="http://www.imd-info.ca">http://www.imd-info.ca</a>)</td>
<td>The Career Transitions for IMDs program provides sector-specific employment preparation and counseling services and employer outreach specific to internationally trained physicians. LASI World Skills and Catholic Immigration Centre support and administer Career Transitions. These services assist IMDs in accessing alternative employment in the health sector that makes effective use of their skills.</td>
<td>Goals: 1) ensure that health sector employers are aware of the human resource potential of IMDs; 2) encourage health sector employers to become involved in finding effective ways to use the transferable skills of IMDs to meet their human resource needs; and, 3) provide International Medical Doctors with access to information and support that assists them in directly entering health sector employment or in applying for health-related training programs.</td>
<td>Sector-specific Employment preparation program: provides information that helps IMDs become aware of their options for alternative employment in the health care sector. Counselling services: Provide one-on-one counseling to IMDs to assist them in refining their portfolio and in developing their individual career action plans. Employer outreach: Project partners and health sector employers in Ottawa, Toronto and Hamilton working together to explore possibilities for full- and part-time positions, co-op placements, volunteering and mentoring. IMD resources provided: 1) Career Transitions Employment Readiness Self-Assessment tool; 2) Online self-study workshops; 3) Health care labour market information; and, 4) Health care job information fact sheets.</td>
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<td>Catholic Immigration Centre of Ottawa (<a href="http://www.cic.ca/index-e.php">http://www.cic.ca/index-e.php</a>)</td>
<td>Centre came into existence as a community based non-profit organization in 1985. In past few years became aware that some of their clients who were talented foreign trained medical doctors were lacking information on how to enter their profession in Canada. Three years ago started providing some services to foreign trained medical doctors.</td>
<td>Promote and facilitate the reception of newcomers to Canada; sensitize the community to address newcomers' needs and invites to respond; and assist newcomers in realizing their full potential in Canadian society.</td>
<td>Orientation sessions regarding licensing and non-licensed health-related employment alternatives; study groups, meetings, study resources; and updated information and support to group members through close collaboration with the Association of International Physicians and Surgeons of Ontario. Career Transitions Program funded by the Government of Ontario provides international medical doctors with a comprehensive employment preparation program to support their entry into the health sector. The Centre is the project lead for this program.</td>
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<td>Centre d'évaluation des diplômés internationaux en santé (CÉDIS) (<a href="http://www.cedis.ca/">http://www.cedis.ca/</a>)</td>
<td>Independent incorporated non-profit organization under Part III of the Companies Act (RSQ, c. C-38). Offers advice and administers a program and services in French that are provided for free to IMGs. To be eligible, physicians must reside in Québec, must have been granted a recognition of equivalence of their medical degree by Collège des médecins du Québec (CMQ), and have been denied entry into a residency program at a Québec medical faculty after applying at least once. Funded by Québec's Ministère de la Santé et des Services sociaux and a contribution from Health Canada as part of a contribution agreement for the Québec government's initiative to integrate internationally educated health professionals into the province’s healthcare system.</td>
<td>Mandate: 1) sign necessary agreements with university academic experts and medical faculty members to conduct assessments themselves; 2) generate and analyze service supplier bids and select the best sites and resources for conducting assessments and bridging internships; 3) plan and carry out tasks related to bridging internships and assessments; 4) provide applicants with the results of their assessments and bridging internships, as well as any recommendations, and also handle complaints; 5) make necessary adjustments to assessment tools, drawing on expert assistance as needed; 6) make recommendations to the government about the required services (bridging internships, clerkships, career transition preparation, etc.) and their funding so that IMG assessor guidelines are implemented; 7) administer the budget allocated by the Québec government for funding bridging internships and assessments, and granting the $8,000 scholarship to applicants accepted into these internships; and, 8) periodically report to the Board of Directors and make recommendations to the government on the best ways to improve the program.</td>
<td>Help to better assess participants’ clinical skills and guide them towards solutions best suited for them. Some are directed into a four-month clinical bridging internship and are supported with an $8,000 CÉDIS scholarship. This internship prepares them to obtain and succeed in postgraduate training. Others are guided, on a voluntary basis, into preparing for a career transition with assistance from an agency reporting to the Montréal office of Emploi-Québec.</td>
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<td>COSTI Immigrant Services  (<a href="http://www.costi.org/index.php">http://www.costi.org/index.php</a>)</td>
<td>Multicultural agency that works with all immigrant communities having a shortage of established services. COSTI originated with the amalgamation, in 1981, of two major service agencies, COSTI (formerly Centro Organizzativo Scuole Tecniche Italiane) and the IIAS (Italian Immigrant Aid Society).</td>
<td>Provides educational, social, and employment services to help all immigrants in the Toronto area attain self-sufficiency in Canadian society.</td>
<td>COSTI’s programs encompass orientation, education, training and employment. Employment services: career planning and assessment, employer placement and support, employment programs for newcomers and internationally trained individuals, employment service centres, online services and youth employment. Language training: English courses, specialized English instruction for internationally trained individuals, and Language Training at the Workplace. Skills training: Canadian Adult Achievement Test and Computer Application Training.</td>
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<tr>
<td>Halton Multicultural Council (<a href="http://www.halton-multicultural.org/">http://www.halton-multicultural.org/</a>)</td>
<td>Community-based settlement agency that provides a variety of programs and services to immigrant and refugee communities.</td>
<td>Enable every individual, regardless of race or ethnic origin, to participate as full and active members of the community through fostering mutual respect and understanding of one another.</td>
<td>Offer: 1) language programs (LINC and ELT); and, 2) Labour market access programs - job search workshops and clinics and job mentoring programs.</td>
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<td>LASI World Skills (<a href="http://ottawa-worldskills.org/EN/">http://ottawa-worldskills.org/EN/</a>)</td>
<td>Established in 1997 by Local Agencies Serving Immigrants coalition (LASI). Core belief and dependent on partnerships. Founded to simplify, coordinate and facilitate the delivery of employment services for newcomers in the Ottawa area. Funded by: CIC, Ontario Ministry of Citizenship and Immigration, Ontario Trillium Foundation, United Way and private donors.</td>
<td>Enhance the economic integration of immigrants, refugees and newcomers by: 1) developing and offering programs and services that assist them in increasing their employability in the Canadian job market; and, 2) creating employment opportunities for them through increasing public awareness of their employability, and by forming partnerships with employers in the region.</td>
<td>Programs offered to immigrants: 1) Career Access for Newcomers; 2) International Medical Doctors (Career Transitions program); 3) Job Search Workshop; and, 4) Workplace Language Training. Other services to immigrants: 1) cross-cultural work place training; 2) employment resource centre (use of computers, staff to help refine job search techniques, resource library job search materials); 3) resume clinic; 4) interview roulette; and, 5) suited for success (provision of business suits for interviews). Staff supports the immigrant find work in Ottawa through a number of services such as preparing for interviews, preparing resumes, assessing needs.</td>
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<td>New Canadians’ Centre of Excellence (website under development)</td>
<td>Community based agency in Windsor-Essex region. Website under development. Little information about the organization is available.</td>
<td>Assist, support and promote the full and equitable participation of immigrants and refugees in all aspects of social, cultural and economic life in the Windsor-Essex region.</td>
<td>Information and referral for housing, employment, government services and legal/human rights, assistance filling out government forms, supportive counseling, problem solving, settlement and orientation for immigrants and refugees, translation and interpretation of documents.</td>
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<td>Ontario Council of Agencies Serving Immigrants (OCASI) <a href="http://www.ocasi.org/">http://www.ocasi.org/</a></td>
<td>Established in 1978 to act as a collective voice for immigrant serving agencies and to coordinate responses to shared needs and concerns.</td>
<td>Achieve equality, access and full participation for immigrants and refugees in every aspect of Canadian life.</td>
<td>Programs and research to support immigrant serving agencies.</td>
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<td>Ontario Network for Internationally Trained Professionals Online (<a href="http://www.onip.ca/">http://www.onip.ca/</a>)</td>
<td>ONIP offers international professionals new to Ontario help to find employment and build a career in their professional field. Information on licensing and employment options existing in the relevant fields is provided as well as help in learning the English language terminology used in the professions, and opportunities to network with other professionals.</td>
<td>Continue to strengthen Ontario’s system of community training, which addresses the needs of employment-disadvantaged individuals, through the provision of membership services and advocacy efforts.</td>
<td>Employment information and links to resources is provided for internationally trained physicians new to Ontario. It also provides information about licensing and certification in Ontario and sector specific terminology. Information and resources are all available online. There is no apparent head office or staff.</td>
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<td>Ontario Network of Employment Skills Training Projects, (OneStep)</td>
<td>Province-wide umbrella organization for the community-based training and employment (CBTE) sector. Member agencies provide more than 450 programs; over 250,000 clients served each year. Open to all.</td>
<td>Continue to strengthen Ontario’s system of community training, which addresses the needs of employment-disadvantaged individuals, through the provision of membership services and advocacy efforts.</td>
<td>Services include but are not limited to: career and personal counseling; literacy, ESL and numeracy programs; job-finding clubs; computer courses; sector-specific training (finances, tourism, healthcare) and job placement.</td>
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<td>Ottawa Community Immigrant Services Organization (OCISO) <a href="http://ociso.org/En/">http://ociso.org/En/</a></td>
<td>Non-profit service agency that has been assisting immigrants and refugees with settlement issues since 1978.</td>
<td>Support immigrants through the journey of making Canada their home by providing creative and responsive programs that are culturally and linguistically appropriate, by building community through mutual respect and partnerships, and by fostering healthy and inclusive spaces for open dialogue and healing.</td>
<td>OCISO offers Language Instruction for Newcomers to Canada (LINC), a Settlement to Employment Mentorship (STEP) program, and job search workshops.</td>
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<td>Peel Multicultural Centre (<a href="http://peelmca.ca/">http://peelmca.ca/</a>)</td>
<td>Established in 1997 as an umbrella organization to provide public information, awareness and education programs on equality, race relations and other community issues in the Peel region.</td>
<td>Promote a harmonious multicultural society in Peel by increasing communication and building bridges of understanding between ethno cultural groups, institutions and the community to facilitate the settlement and integration of newcomers to Canada.</td>
<td>Enhanced Language Training (ELT) Coop Program for ITPs (provision of tools to needed to enter the job market and the opportunity to gain work experience in respective field), Job Search Workshops (JSW).</td>
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<td>Settlement.org (<a href="http://www.settlement.org">www.settlement.org</a>)</td>
<td>Website that provides newcomers with information and resources to settle in Ontario.</td>
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<td>Provides resources about a number of employment areas such as: 1) finding a job; 2) planning a career; 3) working in Canada; and, 4) professions and trades.</td>
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<td>Skills for Change (<a href="http://www.skillsforchange.org/">http://www.skillsforchange.org/</a>)</td>
<td>Known for pioneering programs that respond to shifting immigration and workplace trends and lead to employment. Mainly in the Toronto area.</td>
<td>Provide learning and training opportunities for immigrants and refugees to access and fully participate in the workplace and wider community.</td>
<td>Services offered include information and referral, French and English language assessment, English language instruction, integrated language/skills training, employment preparation, business skills, mentoring and settlement services. Offer a one week workshop through Employment Ontario program to provide the internationally trained health professional sector-specific employment preparation to help transition into long-term alternative employment in the non-regulated health sector. The program assists the internationally trained health professional secure an alternative career utilizing their medical expertise.</td>
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<tr>
<td>The Consortium of Agencies Serving Internationally-Trained Professionals (CASIP) <a href="http://www.casip.ca/">http://www.casip.ca/</a></td>
<td>Established in 1998 as a collective of eight agencies serving internationally-trained professionals with the shared vision of improving access for skilled immigrants to employment in their professional occupations. A consortium of independent, community-based agencies and colleges who deliver employment and training services to internationally trained job seekers and employers. Sponsored by CIC.</td>
<td>Drive innovation, advocacy and excellence in employment services for skilled immigrants and employers in the Greater Toronto Area.</td>
<td>CASIP’s focus on building the capacity and skills of the staff of the member organizations. Member organizations deliver services to support skilled immigrants to access their professional fields of expertise in the Greater Toronto Area.</td>
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*Agencies highlighted in blue relevant to IMGs in Canada*
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<tr>
<th>IMMIGRANT SERVING AGENCIES</th>
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<td>Thunder Bay Multicultural Association (<a href="http://www.thunderbay.org/">http://www.thunderbay.org/</a>)</td>
<td>Incorporated in 1976 as a non-profit organization encourage and facilitate co-operation among ethnic organizations in promoting the concept of multiculturalism.</td>
<td>Provide number of settlement support including LINC (language instruction) and information and orientation for job preparation (resume writing, job search).</td>
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<td>Toronto Region Immigrant Employment Council (TRIEC) (<a href="http://triec.ca/">http://triec.ca/</a>)</td>
<td>Multi-stakeholder council founded by Maytree and the Greater Toronto CivicAction Alliance in 2003. TRIEC is taking action on the underutilization of skilled immigrants’ education, talent and experience. Objectives: 1) convene and collaborate with partners, creating opportunities for skilled immigrants to connect to the local labour market; 2) work with key stakeholders, particularly employers, building their awareness and capacity to better integrate skilled immigrants into the workforce; and, 3) work with all levels of government, enhancing coordination and effecting more responsive policy and programs for skilled immigrant employment. Funded by CIC, Ontario government, Maytree and the Ontario Trillium Foundation. TRIEC does not provide direct services to immigrants but rather, connects them to partner organizations.</td>
<td>Create and champion solutions to better integrate skilled immigrants in the Greater Toronto Region labour market.</td>
<td>Brings together stakeholder groups - employers, regulatory bodies, professional associations, educators, labour, community groups, government and immigrants - in a Council to develop local and practical solutions. Help employers by connecting them to programs to help them better recruit and retain immigrants, and by developing and distributing learning tools and curriculum. Help immigrants build professional networks through mentorship and professional immigrant networks. TRIEC Mentoring Partnership program: skilled and professional immigrants need to have the education, experience and language skills necessary to succeed in the labour market. Skilled immigrants are linked with a mentor in an occupation specific mentorship relationship for the purpose of gaining a better understanding of the Canadian workplace and industry trends; developing effective job search strategies; building a local professional network; and identifying ways to leverage their experience and skills.</td>
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<td>Windsor Women Working with Immigrant Women (<a href="http://www.wwwwiw.org/">http://www.wwwwiw.org/</a>)</td>
<td>Non-profit organization established in 1992 in Windsor. Objectives: to: provide welcoming and supportive space for newcomers and first generation Canadians; support the settlement and advancement of newcomers and first generation Canadians; identify and eliminate systemic barriers faced by immigrants and refugees; and, provide culturally sensitive settlement services focusing on the needs of newcomers and first generation Canadians.</td>
<td>Assist immigrant and refugee women and their families to become full and participating members of Canadian Society.</td>
<td>Extensive employment and career development related services offered to unemployed and underemployed individuals in the community.</td>
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<td>Centre d’évaluation des diplômés internationaux en santé (CÉDIS) (<a href="http://www.cedis.ca/">http://www.cedis.ca/</a>)</td>
<td>Independent incorporated non-profit organization under Part III of the Companies Act (RSQ, c. C-38). Offers advice and administers a program and services in French that are provided for free to IMGs. To be eligible, physicians must reside in Québec, must have been granted a recognition of equivalence of their medical degree by Collège des médecins du Québec (CMQ), and have been denied entry into a residency program at a Québec medical faculty after applying at least once. Funded by Québec’s Ministère de la Santé et des Services sociaux and a contribution from Health Canada as part of a contribution agreement for the Québec government’s initiative to integrate internationally educated health professionals into the province’s healthcare system.</td>
<td>Mandate: 1) sign necessary agreements with university academic experts and medical faculty members to conduct assessments themselves; 2) generate and analyze service supplier bids and select the best sites and resources for conducting assessments and bridging internships; 3) plan and carry out tasks related to bridging internships and assessments; 4) provide applicants with the results of their assessments and bridging internships, as well as any recommendations, and also handle complaints; 5) make necessary adjustments to assessment tools, drawing on expert assistance as needed; 6) make recommendations to the government about the required services (bridging internships, clerkships, career transition preparation, etc.) and their funding so that IMG assessor guidelines are implemented; 7) administer the budget allocated by the Québec government for funding bridging internships and assessments, and granting the $8,000 scholarship to applicants accepted into these internships; and, 8) periodically report to the Board of Directors and make recommendations to the government on the best ways to improve the program.</td>
<td>Help to better assess participants’ clinical skills and guide them towards solutions best suited for them. Some are directed into a four-month clinical bridging internship and are supported with an $8,000 CÉDIS scholarship. This internship prepares them to obtain and succeed in postgraduate training. Others are guided, on a voluntary basis, into preparing for a career transition with assistance from an agency reporting to the Montréal office of Emploi-Québec.</td>
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<td>Médecins d'ailleurs (Medecinsdailleurs.com)</td>
<td>Established in 2001 to represent IMGs and ensure equal opportunities for all citizens of Canada.</td>
<td>Vision: allow newcomers to fulfill their dream as did other Canadian before them, by not pitting on their way to the artificial barriers to their economic integration. Mission: 1) help and support-trained doctors abroad in their process of integration to the Quebec and Canadian health sector. 2) help internationally trained physicians to prepare for the exams of equivalence of the Collège des Médecins du Québec and the Canada medical College, in order to obtain their licence to practice medicine. 3) defend the interests of medical graduates abroad to professional corporations, universities and other partners of the Québec/Canada health network. 4) advise and guide newcomers doctors years the steps to be followed for the recognition of diplomas. 5) raise awareness and inform policy makers of the health network, governments, professional societies, universities, media and the Canadian public on the situation of foreign-trained doctors. 6) organize information sessions, public lectures, round tables with all partners in the health network to find innovative and sustainable solutions in the integration of these physicians. 7) organize a mentorship program between foreign-trained doctors and doctors who have completed their medical studies in universities Canadian and Quebec. 8) organize workshops on integration for</td>
<td>Advocacy group.</td>
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<td>Multicultural Association of Fredericton (<a href="http://www.mcaf.nb.ca/">http://www.mcaf.nb.ca/</a>)</td>
<td>Formed in 1974 with the goals to: encourage and promote the concept of diversity and inclusion; provide newcomers to Canada with settlement services, language instruction, employment services, and community networking; and, create an inclusive and welcoming community. Funded by the Government of Canada and the Province of New Brunswick through a labour market agreement.</td>
<td>Establish communication and foster understanding between the community, settled immigrants and newcomers.</td>
<td>Provides newcomers to Canada with settlement services, language instruction, employment services (through links to external organizations providing service), and community networking.</td>
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<td>Multicultural Association of the Greater Moncton Area (<a href="http://www.magma-amgm.org/">http://www.magma-amgm.org/</a>)</td>
<td>Founded in 1980. Umbrella organization of ethno-cultural associations and individuals in the Greater Moncton Area (Moncton, Riverview and Dieppe).</td>
<td>Enrich and enhance the well being of the community by fostering and nurturing respect, understanding, acceptance of and assisting people from all heritages.</td>
<td>Provides language training. Employment services includes: meeting with an employment counsellor to identify newcomer’s strengths and goals. Will create a strategic action plan towards helping the newcomer reach their employment goals. Staff will facilitate on various employment topics such as résumé and cover letter writing, interview strategies, networking and for internationally trained professions, the recognition of foreign credentials.</td>
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<td>PEI Association for Newcomers to Canada (<a href="http://www.peianc.com/">http://www.peianc.com/</a>)</td>
<td>Incorporated in 1993 as a non-profit charitable organization. The Association speaks publicly on immigrant issues and advocates on behalf of newcomers.</td>
<td>Mandate is to provide short-term settlement services, and long-term inclusion and community integration programs for new immigrants in Prince Edward Island.</td>
<td>Internationally Educated Health Professionals (IEHPs) program's goal is to assist IEHPs find their path in the Canadian health care system, and to support them in each step of the process, including the credential review, registration, understanding and complying with regulations, medical exams, licensing, and the employment search.</td>
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<td>Immigrant Settlement &amp; Integration Services ISIS</td>
<td>Community organization offering services and creating opportunities to help immigrants to participate fully in Canadian life. Receives continuing funding from many different government departments, both federal and provincial.</td>
<td>Vision: Integration of new immigrants.</td>
<td>Provide a wide range of services to immigrants, from refugee resettlement to professional programs, from family counselling to English in the Workplace. Provide ongoing employment counselling and coaching, and recommend programs to newcomers. Range of employment support services to newcomers working with an Employment Specialist who assists the newcomers in their search for employment.</td>
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<td><strong>NEWFOUNDLAND AND LABRADOR</strong></td>
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<td>Coalition for Richer Diversity (CORD) (<a href="http://cancord.org/">http://cancord.org/</a>)</td>
<td>Umbrella organization, formed in 2007. Reaches out to organizations and groups of immigrants and those who provide services in the community to collaborate, to offer networking opportunities, and to help them grow to be diversity sensitive.</td>
<td>Increase the capacity and well being of the NL by building relationships and a sense of common purpose.</td>
<td>As an umbrella organization CORD acts as cultural and community brokers by bringing together people and organization to collaborate, share information and build richer community networks.</td>
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