

Tracking Internationally Trained Family Physician Flows

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INTRODUCTION

- Saskatchewan has low physician to population ratios with increased discrepancies in rural areas (3, 4); hence, International Medical Graduates (IMGs) fill widespread physician vacancies.
- The Saskatchewan International Physician Practice Assessment (SIPPA) program is a practice readiness assessment (PRA), competency evaluation program designed for IMGs starting work in Saskatchewan and seeking alternative licensure.
- Post completion of the SIPPA program a three-year return of service (RoS) is required. Despite the resources invested into SIPPA IMGs there is insufficient research tracking migration trends post RoS fulfillment.

OBJECTIVE

- To investigate the migration patterns of IMGs who participated in the SIPPA program from 2011 to 2021.

METHODS

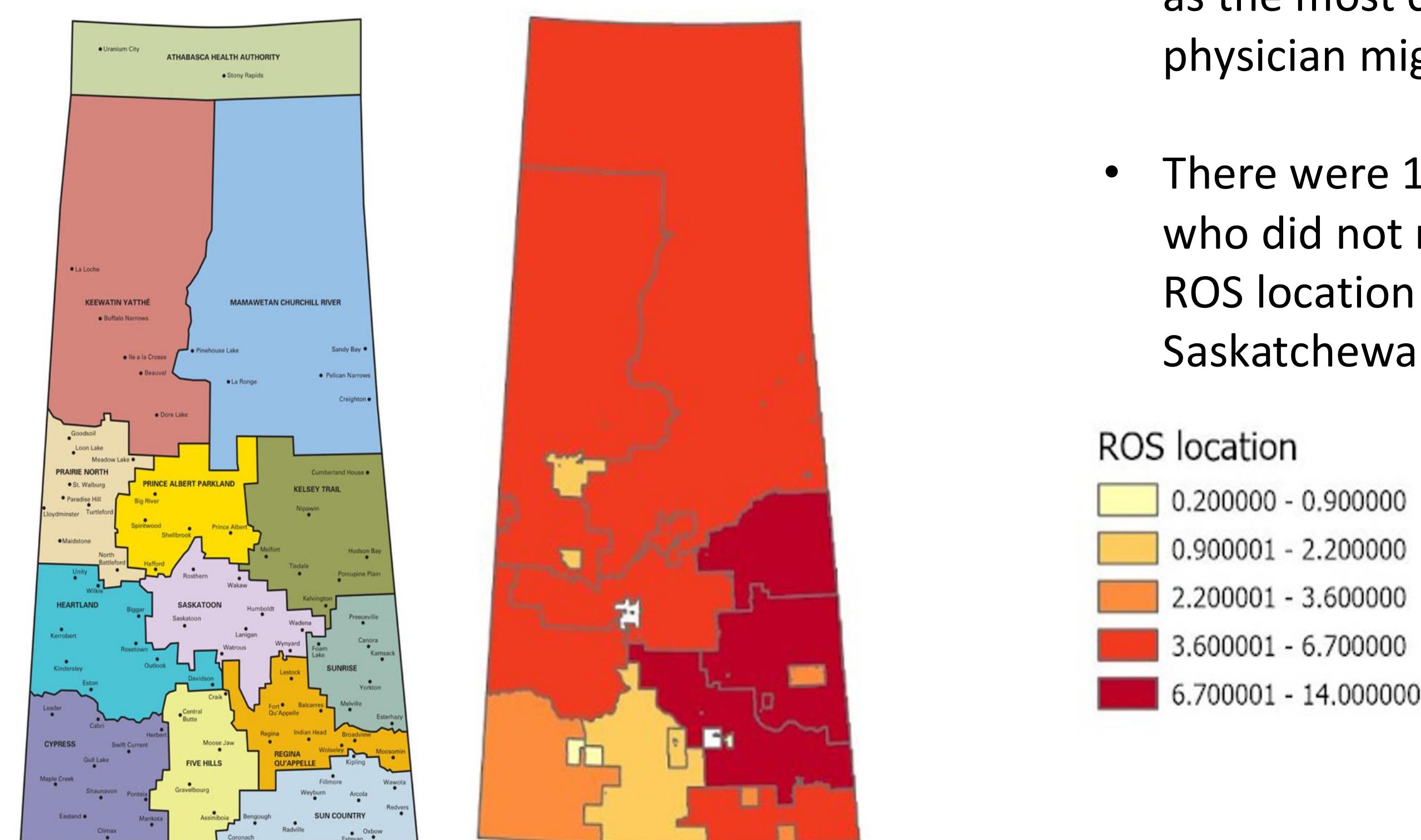
An iterative two-phase study design guided by:

- A rapid review and knowledge synthesis of the current literature on physician migration patterns.
- A retrospective data analysis of SIPPA's database (2011 to 2021) tracking migratory patterns of IMGs.

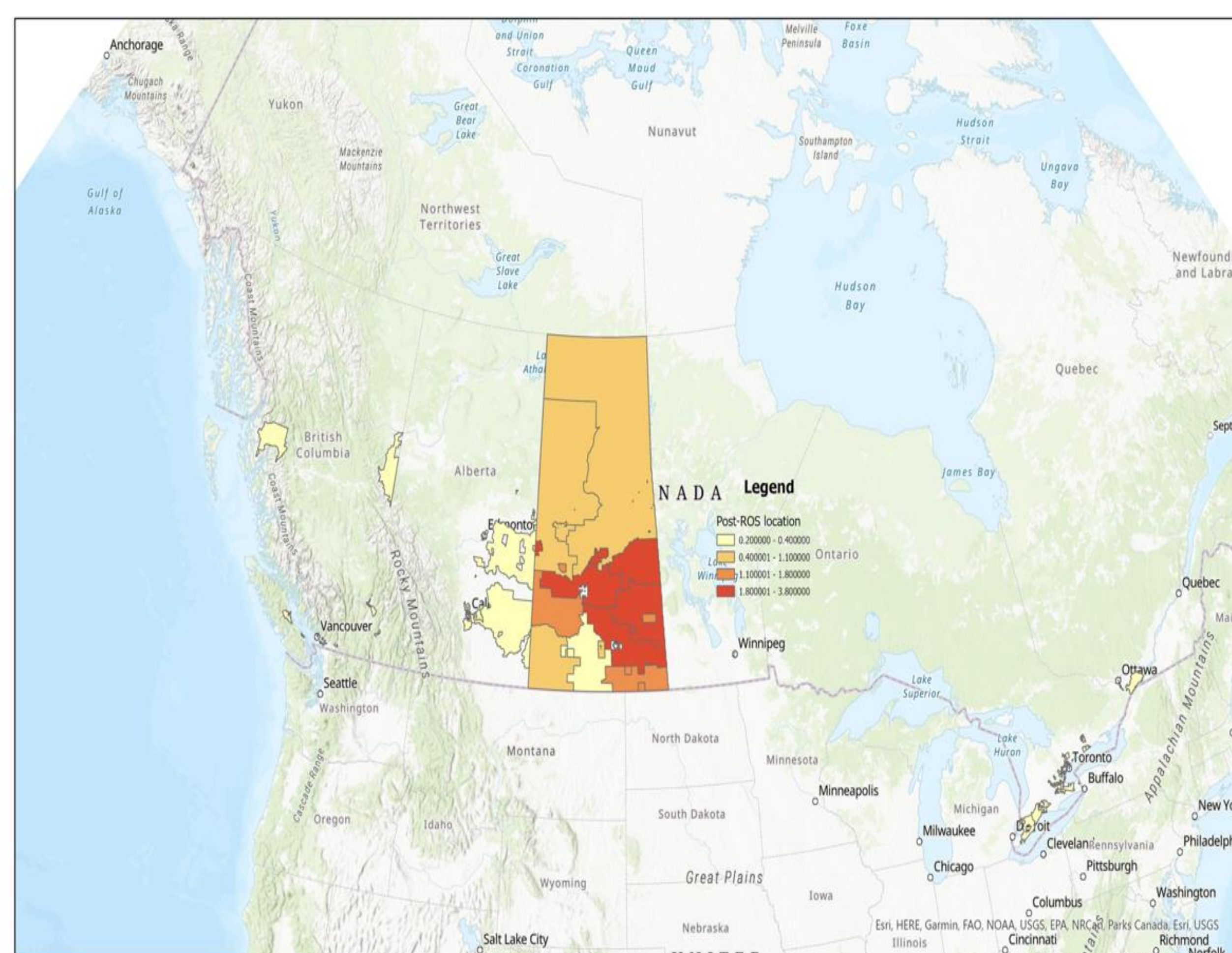
RESULTS

Geographical map showing distribution of physicians in the SIPPA program at location of RoS versus current location (2011-2021)

A. SIPPA IMG RoS Location



B. SIPPA IMG Current Location



- Rapid review study detailed family, community and professional influences as the most common themes linked to physician migration.
- There were 134 (29.77%) participants who did not migrate from their original ROS location and remained in Saskatchewan.

- Rural to urban migration outside of Saskatchewan was the most common outcome with 238 (52.88%) participants.

- Ontario (26%), Alberta (15.33%) and British Columbia (9.77%) were the most common relocation destinations.
- 3% migrated internationally.

DISCUSSION

- Our study indicated that provinces like Ontario, British Columbia, and Alberta benefit from SIPPA IMG migration.
- Current literature found family, community, professional, structural and personal factors attributed to migration.
- Recommendations to mitigate the factors included: 1) Maintaining manageable workloads in rural areas; 2) Funding continued professional development opportunities; 3) Emphasis on community integration strategies.

CONCLUSIONS

- Our study of IMG migration patterns (2011-2021) found that 30% remained in Saskatchewan after completing their RoS.
- Addressing this migration trend is vital for stable healthcare, requiring ongoing research for effective resource allocation and retention strategies in Saskatchewan.

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REFERENCES

- Fleming P, Sinnott M-L. Rural physician supply and retention: factors in the Canadian context. 2018.
- Mathews M, Park A, Rourke JT. Retention of international medical graduates following postgraduate medical training in Newfoundland and Labrador. Health Policy. 2007;31(2):50-7.
- Canadian Institute for Health Information. Supply, Distribution and Migration of Physicians in Canada, 2020 – Methodology Notes. Ottawa, ON: CIHI; 2021 [Available from: chrome-extension://efaidnbmninhpcjpcgclefndmkaj/https://www.cihi.ca/sites/default/files/document/supply-distribution-migration-of-physicians-in-canada-2020-method-notes-en.pdf].
- Ampofo-Addo O, Mou H, Olfert R, Goodridge D. Location decisions of family physicians in Saskatchewan: What really matters? Can J Rural Med. 2016;21(1):7-12. 2960-022-00709-0.