

Ontario IMG Clearinghouse – History & Context

- I offer a short history of Ontario's IMG policy and process leading to the current developments at the Clearinghouse – apologies for dates and perhaps some details
- The Olden Days – the period prior to c. 1986
 - IMGs (aka GOFMs and FMGs) were left to their own devices with respective program directors – little if any order to the process
 - The general lack of order, however, also applied to domestic graduates
 - re-entry was common
 - funding for trainee salary and benefits – including government funding - was relatively unrestricted
 - Postgraduate clinical and/or research fellows could – and often did - remain fellows for long periods, e.g., the 8-10 year fellowship
 - Notwithstanding this general lack of order, in the early 1980s the Ministry of Health began taking notice of medical education – especially postgraduate medical education – for the purposes of physician human resource policy and planning – the theory being that if we managed the production of physicians we could manage the supply of physicians

Ontario IMG Clearinghouse – History & Context cont'd

- c. 1986 - an IMG policy watershed – establishment of the Pre-Internship Program (PIP) – precursor to today's Ontario IMG Program
 - PIP was the first such program in Canada
 - PIP offered 24 entry positions at the clerkship level
 - Graduates of the program were then eligible to complete a Family Medicine residency program
 - Who was selected? And How?
 - All candidates met some basic eligibility criteria, e.g., language proficiency, citizenship, undergraduate medical degree
 - All eligible candidates sat a multiple choice question written examination (MCQ)
 - The top performers on the MCQ were invited to participate in an Objective Structured Clinical Examination (OSCE)
 - The top 24 performers were selected for a Clerkship entry
 - Watershed moment but still a small policy puddle – applications far exceeded the total number of positions available, e.g., some years saw 300-400 applications for the 24 positions

Ontario IMG Clearinghouse- History & Context cont'd

- In c. 1993 the Regulated Health Professions Act (RHPA) was established – profound impact on the medical profession
 - The internship effectively disappeared
 - Medical graduates were expected to complete a residency program in either family medicine or in a specialty – accredited and certified by the College of Family Physicians of Canada or the Royal College of Physicians and Surgeons of Canada
 - They were also required to complete the Medical Council of Canada qualifying examinations – Parts I and II
 - The pressure to increase the number of postgraduate residency positions was astonishing
 - MOHLTC began to engage in micro-analysis, e.g., length of specialty programs, parental leave policy, the PAIRO/OCOTH Agreement

Ontario IMG Clearinghouse – History & Context

- What did the new rules actually mean for PG education
 - It meant that all physicians in Ontario needed a minimum of two years residency, i.e., the need to fund more resident salaries and benefits at a time when government was already convinced that there were too many positions in the system
 - Funding was scarce (recall Expenditure Control Plan and the Social Contract)
 - led to a gradual disappearance of re-entry positions
 - Regulations for funding sources more strictly enforced
 - In the midst of the confusion the Council of Ontario Faculties of Medicine (COFM) introduced a management framework for postgraduate medical education – the Pools Framework
 - The Pools Framework classified all PG medical trainees according to a few basic variables, e.g., source of MD, legal status, source of funding
 - IMGs were classified into one of three categories:
 - Pool B – Canadian or Permanent Resident IMGs in a residency program
 - Pool C – Visa IMGs in a residency program
 - Pool E – Visa Fellows in a fellowship program

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- Pool B (Ontario based IMGs), therefore, was designated as the policy home for PIP graduates and experienced a number of changes
 - The size of the class was expanded from 24 to 36 to 40 to 50 – the current enrollment size for the program
 - Somewhere along the way graduates were deemed eligible to enter specialty programs
 - The PIP was renamed the Ontario IMG Program
- Pool C (Visa Residents) also experienced a few rule changes
 - Ministry of Health funding for their salaries and benefits was phased out
 - Candidates were required to pass a Pre-Entry Assessment Program
 - Candidates were asked to sign a statement that indicated they would return to their country of origin at the completion of their residency program
- Some order was put in place for Pool E trainees, i.e., Visa Fellows
 - MOHLTC instituted a program for reviewing the length of fellowships and for approving their renewals

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- C. 2001 the government introduced the Assessment Program for IMGs – another watershed moment
 - Housed at the Council of Ontario Universities (parent organization for COFM) in the Office of Health Sciences
 - 40 candidates per year were selected for assessment
 - Specialists in another jurisdiction
 - Language proficiency
 - Clinical skills assessment
 - Interview with program directors
 - The top 40 candidates would be assessed for up to six months in a supervised clinical setting
 - Suitable for certification exams
 - Need for more training (maximum of 2 years)
 - Dismissed from the program

Ontario IMG Clearinghouse – Immediate Context

- With the OIMGP and the APIMG there were effectively two programs available for IMGs – at opposite ends of the educational continuum
 - The OIMGP entered folks at the beginning of their clinical education
 - The APIMG assessed folks at the end of their clinical education
 - The two programs certainly knew about each other but an official referral mechanism between programs simply did and could not exist
 - Accordingly there was a gap between the two programs – for example:
 - What about someone who had completed some postgraduate education but not all?
 - What about someone who had completed all of their training in another jurisdiction but still did not meet the Ontario standards because of regional differences? E.g. a two year surgical internship
 - What about the candidate from the APIMG who was dismissed because two years simply wasn't enough to bring them up to the Ontario standard?
 - The answer in each case was, no slight intended but they were out of luck
 - the programs simply couldn't accommodate them

Ontario IMG Clearinghouse – Start of a Solution

- With the announcement of the Clearinghouse – another watershed moment - merge the two existing programs and add a couple more programs
 - One application process for all IMGs pursuing licensure in Ontario through the educational system
 - Creation of two additional entry points
 - Double the enrollment
 - Creation of a resource centre for IMGs to help them understand the complexities and nuances of Ontario's and Canada's physician credentialling system
 - Creation of a single forum where the provincial sponsors, i.e., the medical schools, the government and the College of Physicians and Surgeons could meet and resolve the challenging policy issues that arise
 - The single forum would also allow for more coordinated and formal consultation with the critical national organizations, e.g., the College of Family Physicians, the Royal College, the Medical Council of Canada

Ontario IMG Clearinghouse

How does it work?

- All IMGs come to the Clearinghouse and file one application
 - Clearinghouse staff review the files for basic eligibility criteria
 - MD from an acceptable medical school
 - English or French language proficiency (all programs offered in English nonetheless)
 - Medical Council of Canada Examinations – Evaluating Exam or the Qualifying Exam Part I
 - Citizenship
 - Canadian Citizen or Permanent Resident IMGs residing in Ontario are given preference
 - Non-Canadians may apply but they are warned in advance that Canadian Citizens and Permanent Residents will be given preference
 - On the basis of the eligibility criteria candidates are slotted into one of two streams

Ontario IMG Clearinghouse

How does it work?

- Undifferentiated Stream
 - Modelled after the existing OIMG Program, i.e., clerkship entry (50 positions)
 - This stream also now allows for a second entry point – the postgraduate year one level or PGY1 (25 positions)
 - All candidates for this stream write the Undifferentiated MCQ
 - The top performers from the MCQ are invited to sit the Undifferentiated Objective Structured Clinical Examination
 - The top 75 performers in the OSCE are awarded positions 25 and 50 in order of their performance

Ontario IMG Clearinghouse

How does it work?

- Differentiated Stream
 - Includes the existing APIMG but renamed the Specialist Assessment Program – a 6 month assessment for 50 candidates
 - This stream, however, allows for a second entry point – Advanced Level Postgraduate Training Program – residency positions for up to 75 candidates
 - All candidates for this stream write the Differentiated MCQ, i.e., an exam tailored to the specialty
 - The top performers in each discipline are invited to participate in a Differentiated Clinical Skills Assessment, i.e., an assessment tailored to the specialty
 - The top 125 candidates , based on exam results and their educational and professional background, are placed in positions – assessment and advanced postgraduate training accordingly

Ontario IMG Clearinghouse Summary

- Then: 24 entry positions in the PIP in 1986
- Now: 200 entry positions in the OIMGC in 2004

- Then : Clerkship Entry followed many years later by Specialist Assessment
- Now: A process that matches qualified candidates sensitively to the assessment and/or training they need

- Then: Multiple processes and confusion for candidates
- Now: One process and a resource centre in a single location to help minimize confusion for IMGs