

Impact of Changes in Canadian Postgraduate Training on the Irish Health Service

Abstract:

Sir,

Over the past year, there have been significant changes in the application for postgraduate medical training in Canada. With over 726 Canadians studying in Irish medical schools in 2012/2013¹ (13% of the Irish medical students), it is of vital importance that we understand how these changes will impact the Irish health system. The changes will impact in several different capacities including: recruitment of new students, training of current students and altering postgraduate training applications in Ireland.

The first step for in acquiring postgraduate training in Canada is completing the Medical Council of Canada's Evaluation Exam (MCCEE), a multiple choice exam covering major areas of clinical medicine and surgery. Recently, the Medical Council of Canada has allowed students to write the MCCEE up to 20 months before they graduate, a change from having to be in their final year of study. This change was made to facilitate the introduction of the National Assessment Collaboration Objective Structured Clinical Exam (NAC-OSCE). The NAC-OSCE is now mandatory for the majority of training positions in Canada. To register for the NAC-OSCE, an applicant must have received a passing result in MCCEE, which was the motive for the recent changes. As a direct result of these changes, students must sit the NAC-OSCE in September of their final year and the MCCEE by early March of their penultimate year in order to be eligible to apply for post-graduate training programs in Canada.

It has long been appreciated that the Irish medical education system relies heavily on income generated by international medical students tuition fees². While creating a self-sustainable system is of the utmost importance³. In the interim it is crucial that the Irish health system adapts to facilitate Canadians studying in Ireland to match to a training program, whether in Canada or Ireland. Failure to do this will lead to sharp drop in Canadian applicants to Irish medical schools, a practice that is already being scrutinized. In addition, these changes directly influence the quality of life of current fourth/fifth year students in Ireland. While historically Irish medical schools have been supportive of students going through this process, the recent changes will require their support more than ever. These students will be writing final year equivalent exams 18 months before they graduate, while completing clinical rotations at the same time, in addition to acting as contributing members of the University and surrounding community. Medical schools need to begin to consider how they can assist and support these students through a very difficult and stressful process.

In conclusion, the recent changes to the Canadian postgraduate training application process will have a direct and immediate effect on over 13% of current medical students in Ireland. These effects coupled with the response from Irish medical faculties will not only be evident at several stages of medical education but will also play a role in the future enrolment numbers of Canadians in the Irish Medical education system.

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