Career Intentions Following Residency Training

March 2019

The findings presented here are based on an online member survey conducted by Resident Doctors of Canada (RDoC) in April 2018. The survey was in the field from April 2 to April 30, 2018. A total of 833 RDoC members participated in the survey, resulting in an overall response rate of 8.3%.

The questions were based on three comprehensive dimensions: residency training, wellness, and medical practice. These three sections included a broad array of relevant and timely issues for postgraduate medical education, including topics such as the importance of generalism, entry routes, medical assistance in dying (MAiD), duty hours, the transition to competency-based medical education (CBME), program transfers, resiliency, mental health, and career intentions following residency training.

Primary motivating factor for selecting a location of practice
The leading reason given for selecting a place to practice medicine was proximity to family.

Preferred province or territory to practice following residency training
The majority of residents intend to stay and practice in their current training province, which they also considered to be their home province. Of the respondents who plan to return to their home province or territory following training, the top three provinces to return to were British Columbia (27.2%), Ontario (21.2%), and Alberta (21%).

Intention to Locum if Additional License Requirements Were Not an Issue
When asked about their intention to locum, a lower percentage of respondents indicated that it is in their plans to locum outside their future province or territory of primary practice. However, of the 81.5% of residents who are not sure or do not plan to locum, a significant proportion, 52.0%, stated that they would locum outside if no additional license applications were required.
Key Insights

Canada’s 13 provincial and territorial medical regulatory authorities license physicians who want to practice within their jurisdiction. If a physician wishes to practice in more than one province or territory, the current process requires them to submit separate licensure applications to each provincial/territorial medical regulatory authority.

The high numbers of respondents who would locum outside the province or territory of primary practice if no additional license applications were required is a critical finding.

A pan-Canadian licensure system would eliminate measures that restrict or impair labour mobility within Canada, and:

- Provide physicians with an opportunity for short-term exposure to clinical care in areas of need and to patients who need care.
- Provide coverage for urgent and semi-urgent practice care.
- Encourage physicians to provide coverage in underserved areas that differ from their primary region of practice.
- Increase time and resource efficiencies.
- Increase patient safety by having a centralized criminal record check for all provinces.