

Shafi Bhuiyan^{1,2*}

¹Dalla Lana School (Faculty) of Public Health, U of T ²Faculty of Community Services, Ryerson University, Toronto, Canada

*Corresponding Author: Shafi Bhuiyan, Dalla Lana School (Faculty) of Public Health, U of T, Faculty of Community Services, Ryerson University, Toronto, Canada.

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Abstract

In Canada, there are a high number of internationally trained medical doctors (ITMDs) who are unable to obtain a medical license. Exploring strategies to integrate ITMDs into employment positions that align with their skill level can have substantial benefits. Ryerson University launched its ITMD Bridging Program in 2015, which trains ITMDs through courses and practicums to transition into non-licensed health sector employment. This study evaluated Ryerson University's Bridging Program.

Students from cohorts 1 - 12 (n = 253) completed pre and post-program questions to assess comfort level with skills related to courses, and also self-reported their satisfaction with class and practicum elements of the program.

Students improved between 35 and 46 percentage points in their comfort levels with skills in each course of the ITMD Bridging Program when comparing pre-course to post-course data. As well, between 77%- 97% of students rated course and practicum elements of the program as "excellent", which demonstrates a high degree of student acceptability of the program.

The evaluation demonstrated that the ITMD Bridging Program has the potential to build individual capacity through increasing students' comfort levels with key skills in the health sector. The program also received strong satisfaction ratings from students. Further evaluation of the program using objective metrics of skills and qualitative data should be considered.

Keywords: Evaluation; Employment; Healthcare Sector; Foreign Medical Graduate; Capacity Building

Abbreviations

ITMD: Internationally Trained Medical Doctor; IMG: International Medical Graduate; CKHS 100: Research Methods; CKHS 110: Health Informatics and Data Analysis; CKHS 120: Project Management ; CKHS 140: Health Professional Communication and Leadership Skills; CKHS 150: Multi-Disciplinary Health Research and Management Seminar

Introduction

Internationally Trained Medical Doctors (ITMDs), also known as International Medical Graduates (IMGs) are individuals who obtain their medical license outside of Canada. ITMDs face significant barriers to obtaining a medical license to practice in Canada [1]. Residencies must be completed to obtain a medical license in Canada, yet there are few residency positions available to ITMDs compared to those trained in Canada. In 2011, over 1,800 International Medical Graduates completed for only 191 residency spots that were set aside for ITMD [2]. Thus, many ITMDs must seek other employment opportunities. However, many are unable to find employment commensurate

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with their training, and some are unable to find employment at all [3]. Neiterman., *et al* (2017) [4] noted that when IMGs cannot obtain a license, alternate forms of employment should be considered to provide an opportunity for highly skilled health care professionals to enter the workforce [4].

As a result of the numerous challenges to obtaining a medical license, many ITMDs who planned to recertify as doctors in Canada choose to seek alternative employment. Previous research has shown that employment in non-licensed health sector positions are a desired alternative for ITMDs who are unable to obtain a medical license [5]. An economic analysis that explored the impact on investment in non-licensed health sector training for ITMDs found a 142% return on investment for the government based on taxes on wages earned from ITMDs who transition into employment [6]. Thus, non-licensed health sector employment as an alternative to medical licensing warrants further research.

Bridging Programs, which typically offer in-class and/or workplace training, have been highlighted as a potential strategy to help IT-MDs overcome some challenges they face when transitioning into the labour market in a new country [7]. However, there is a lack of information available about the effectiveness of programs that facilitate integration of IEHPs, including IMGs [8]. In 2015, Ryerson University launched its ITMD Post-Graduate Bridge Training Program. The program offers a course series and an optional practicum to help ITMDs gain experience to transition into non-licensed health sector employment. Since the program began in 2015, 12 cohorts of students have graduated (n = 253). An evaluation was conducted for the first 12 cohorts of the program to assess the program's impact on perceived skill acquisition and student satisfaction.

Materials and Methods

Comfort level with skills

Pre-post surveys from cohorts 1 - 12 (n = 253) were conducted to assess students' comfort level with skills relevant to each of the courses offered in the program: CKHS 100 (Research Methods), CKHS 110 (Health Informatics and Data Analysis), CKHS 120 (Fundamentals of Project Management), CKHS 140 (Health Professional Communication and Leadership Skills), and CKHS 150 (Multi-disciplinary Health Research and Management Seminar). Students self-reported their comfort level for a list of skills related to each course on a Likert scale (1 = "very uncomfortable, 5 = "very comfortable"). The responses were averaged and converted to percentages to provide an overall measure of change in comfort levels with skills for each course. The difference between "entry" and "exit" was considered as the acquired skill level throughout the duration of the program. A weighted average approach was utilized to determine average skill acquisition for all cohorts, for each course.

Course and practicum satisfaction

Anonymous exit surveys collected data on self-reported satisfaction with both course and practicum aspects of the program using a 5-point Likert scale (1= poor, 5= excellent). Students rated the following categories of course programming: overall program management, program scheduling, course curriculum relevance, faculty and class support, and program manager support. Students also rated the following categories of practicums: overall practicum, organizational support and mentor support. Ratings were averaged to provide an overall measure of student satisfaction for all cohorts.

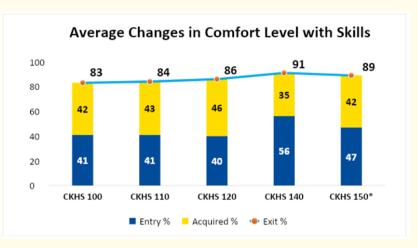
Results and Discussion

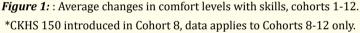
Comfort level with skills

Students from the ITMD Bridging Program demonstrated significant improvement in comfort levels with skills for each course when comparing pre-program and post-program data. Figure 1 shows the average entry, exit, and acquired comfort level for each course. Students acquired an average of 42 percentage points in CKHS 100 (Research Methods), 43 percentage points in CKHS 110 (Health Informatics and Data Analysis), 46 percentage points in CKHS 120 (Project Management), 35 percentage points in CKHS 140 (Health Professional Communication and Leadership Skills) and 42 percentage points in CKHS 150 (Multi-Disciplinary Health Research and Management)

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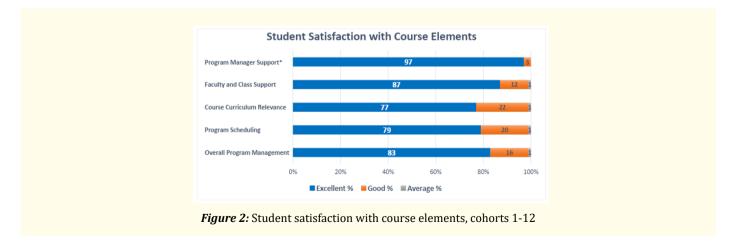
Seminar). Students entered the program with the lowest comfort level for CKHS 100, 110 and CKHS 120, but also made the significant improvements with skills related to these courses. Students reported greatest comfort level with skills in the CKHS 120 course after completion of the courses. Although research on bridging programs for non-licensed employment is limited, there is some evidence to suggest that bridging programs can enhance and strengthen skills of Internationally Educated Health Professionals [7]. A study of international medical graduates in Australia also highlighted providing support for bridging programs as an important factor for integration of IMGs [9]. Data from the pre-post surveys suggest the potential for bridging programs to increase students' comfort level with skills related to the health sector.





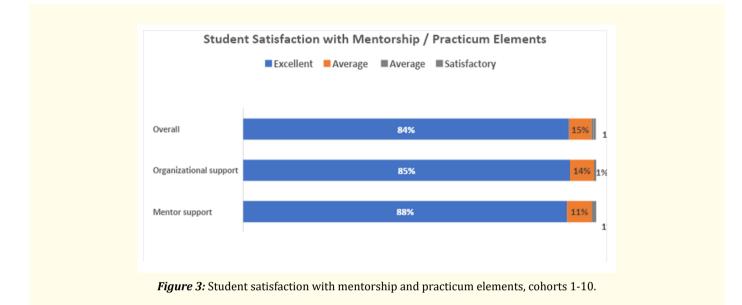
Course and practicum satisfaction

Students reported high satisfaction of all aspects of the course in the exit survey (Figure 2). The course elements that received the highest scores were program manager support (97% of students reported as excellent), faculty support (87% rated as excellent), and class management (83% reported as excellent). Scheduling and curriculum relevance also received positive ratings from students, with 79% and 77% of students rating these aspects as excellent, respectively. Program design has been identified as one of the critical factors for success of a bridging program [10].



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The majority of students reported positive experiences with all aspects of their practicums. In program exit surveys, organizational support was rated as excellent by 85% of students. The practicum overall and mentor support also received high ratings, with 84% and 88% of students rating these aspects as excellent respectively. High scores for all aspects of the program indicate a high degree of satisfaction with the practicum from students.



One of the limitations of this study is the reliance on self-reported data. Self-reported comfort level with skills is based on students' perception of their skill, and does not objectively measure skill increase. Students' comfort level with skills may not be correlated with proficiency in the skills, and may be subject to social desirability bias. Further, self-reported student satisfaction of course and practicum elements may also be subject to bias including recall bias. Data for this evaluation was quantitative, and thus limits the ability to interpret and explain some of the study findings. Additional research is needed to understand the impact of the ITMD Bridging Program on employment opportunities by tracking students' outcomes after graduation over time.

Conclusion

This study conducted an evaluation of the pilot phase of the ITMD Bridging Program, which contributes to the limited literature exploring the effectiveness of bridging programs. Ensuring that ITMDs transition into meaningful employment that is equivalent with their skill level is important for not only ITMDs themselves, but also for the organizations they work in and subsequently the economy. Results from this evaluation demonstrate that the ITMD Bridging Program results in improvements in students' self-reported comfort level with skills related to the health care field, and delivers its courses and practicums in a structure that was widely perceived as excellent by students. Participants in the ITMD Bridging Program reported substantial increases in self-reported skills when comparing pre-course and post-course data, which demonstrates the program's capacity to develop students' confidence in skills relevant to the non-licensed health sector. The high ratings for the course and practicum aspects of the program at Ryerson University show preliminary effectiveness at building individual capacity for non-licensed health sector employment and delivering course and practicum learning opportunities in an effective manner.

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ITMDs Program Participants, ITMDs Program Staff at The G. Raymond Chang School of Continuing Education, Ryerson University.

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