

The 'Brokenness' of postgraduate medical education

Peter Hutten-Czapowski,
MD¹

¹Scientific Editor, CJRM,
Haileybury, ON, Canada

Correspondence to:
Peter Hutten-Czapowski,
phc@srpc.ca

There is a disconnection in all Canadian postgraduate programmes, from both the medical school mission and community needs' standpoint. On the one hand, we have Canadian grads not getting matched to a residency programme, and on the other hand, we are training more orthopaedic surgeons than we have OR time to give them. Vacancies in rural practice continue, despite a near doubling of Canadian medical school enrolment to 2836 students.¹ Postgraduate training needs reform. The number of spots needs to better match the number of matriculating students, and the mix needs to better reflect the needs of Canadians. For CaRM ranking, we should stack the deck, and all family medicine programmes should be weighing the undergraduate factors that promote rural careers (especially rural origin which has a prevalence odds ratio of 2.9).²

The medical school variable loading for rural practice is well known. In a recent article³ yet again, rural origin, older age, prior postgraduate training, a rural role model, social orientation, interest in generalism and tolerance for uncertainty were all significantly associated with rural practice. These factors and others have females, francophones and rural and even

indigenous students (12% this year at the Northern Ontario School of Medicine [NOSM] yes!)⁴ admitted in favourable proportions. At NOSM, all of them are exposed to rural communities early in the curriculum and spend their entire 3rd-year training alongside rural generalist physicians in a longitudinal clerkship.

We need more and expanded access to longitudinal rural postgraduate programmes than already exist. Not surprisingly, a longitudinal residency that takes place entirely, or mostly, in rural generalist settings (typically between 4000 and 30,000 population and 150–1000 km distant from a city of over 100,000) is associated with rural practice at an odds ratio of 3.9.²

There is also a need to find new approaches to improve social fairness. Increasing medical school admissions for lower socioeconomic students is important. Innovation such as the proposed rural generalist pathway at NOSM has the potential to increase both the status and rigour of rural training that is 'fit for purpose'.⁴

On his recent tour of Northern Ontario, Dr Denis Lennox, who has been a champion of Rural Generalism in Australia, highlighted the importance of creating a career path that has, as the goal, a rewarding rural generalist and academic career

Received: 11-10-2019 Revised: 11-10-2019 Accepted: 22-10-2019 Published: 19-12-2019

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

How to cite this article: Hutten-Czapowski P. The 'Brokenness' of postgraduate medical education. *Can J Rural Med* 2020;25:3-6.

Access this article online

Quick Response Code:



Website:
www.cjrm.ca

DOI:
10.4103/CJRM.CJRM_85_19

'joined up' with other rural generalists in a resilient community of practice. If residents can see an inspiring, supported, rewarding career goal, they will be more likely to enter into rural practice, equipped with the right generalist training.

REFERENCES

1. Association of Faculties of Medicine of Canada. In Canadian Medical Education Statistics 2018. Vol. 40. Ottawa, ON: Association of Faculties of Medicine of Canada; 2019. p. 12-4.
2. Woolley T, Sen Gupta T, Murray R, Hays R. Predictors of rural practice location for James cook university MBBS graduates at postgraduate year 5. Aust J Rural Health 2014;22:165-71.
3. Mitra G, Gowans M, Wright B, Brenneis F, Scott I. Predictors of rural family medicine practice in Canada. Can Fam Physician 2018;64:588-96.
4. Leslie C. New NOSM Dean Vows to Introduce A Rural Generalist Pathway for Family. Medicine Medical Post; 28 August, 2019. Available from: <http://www.canadianhealthcarenetwork.ca/physicians/news/new-nosm-dean-vows-to-introduce-a-rural-generalist-pathway-for-family-medicine-56859>. [Last accessed on 2019 Oct 09].



Now Available

2020 CAEP MEMBERSHIPS

NEW MEMBER BENEFITS



MEMBERSHIP YEAR

Jan 1- Dec 31, 2020

PURCHASE LINK

caep.ca/membership/