

**Analysis of Parkland Residency Program Graduates' Initial Practice
Locations who completed an Enhanced Skills Program from 1992 - 2017**

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Introduction

The Parkland Residency Program started in 1992 and has graduated 165 residents since its formation with 27 of their residents pursuing an enhanced skills program. University of Manitoba currently offers seven enhanced skills programs for family medicine physicians. The current programs are FP anesthesia, Cancer Care, Emergency Medicine, Care of the Elderly, Obstetrics & Women's Health, Palliative Care, and Sport & Exercise Medicine¹. The programs range from 6 months to 12 months depending on the type of training and needs of the trainee. This analysis focuses on the residents who have graduated from an Enhanced Skills Program and if their initial location of practice was in a rural area in Manitoba or Canada. Rural Manitoba was classified as any area located outside of Winnipeg. Rural Canada was classified as a location with a population less than 20 000 people and not located within 100km of a larger center with a population of 100 000 people or greater. The data was also analyzed based on what Enhanced Skills Program was completed and their initial location of practice.

Applications to the enhanced skills programs for University of Manitoba require applicants to be registered with the College of Physicians and Surgeons of Manitoba and to have successfully completed or be in the process of completing a two-year family medicine residency. Furthermore, applicants require a resume, reference letters, and a letter of intent that outlines their career and learning goals.

In Manitoba, the Office of Rural and Northern Health (ORNH) oversee the disbursement of Family Practice (FP) Anesthesia training program². ORNH currently requires the applicants to receive a job offer from a rural or northern community upon completion of training that includes anesthesia as part of the practice. Furthermore, before the beginning of the FP Anesthesia program, the applicant must sign a Return of Service Agreement equal to the period of time that was funded.

Methods

Data was provided by the Parkland Residency Coordinator. The criteria for inclusion in the study were completion of residency in the Parkland Family Medicine Stream and enrollment of an enhanced skills program directly after completing residency. Initial location of practice and completion of enhanced skills program was determined from the records at the Parkland Residency program. Physicians were not contacted for the current location of practice. Movement of physician's practice or for additional enhanced skills training completed after practicing family medicine for a year were not tracked.

Data

Table 1: Parkland Residency Graduates who completed an Enhanced Skills Training Directly After Graduation and Classification of Initial Practice Location being Urban or Rural in Manitoba and Canada

Year Graduated PGY2	Enhanced Skills Training	Initial Practice Location Rural MB?	Initial Practice in Rural Canada?
1995	ANA	No	No
1995	EM	No	Yes
1995	EM	No	No
1997	ANA	Yes	Yes
1999	ANA	Yes	Yes

2002	ANA	Yes	Yes
2002	EM	No	No
2003	EM & ANA	No	No
2004	EM	No	No
2005	ANA	No	No
2007	ANA	Yes	Yes
2007	ER	No	No
2009	ER	No	No
2009	PC	No	No
2009	ER	No	Yes
2011	ANA	Yes	Yes
2011	ANA	Yes	Yes
2011	ER	Yes	Yes
2012	ANA	Yes	Yes
2012	SEM	No	No
2012	ANA	Yes	Yes
2015	SEM	No	No
2015	SEM	No	No
2015	ER	No	No
2015	ANA	Yes	Yes
2016	ANA	Yes	Yes

Note: ANA = Family Practice Anesthesia, EM = Emergency Medicine, MSK = Sports and Exercise medicine, PC = Palliative Care.

Table 2: Analysis of Parkland Graduates with Enhanced Skills Training of Initial Practice Location being Urban or Rural in Manitoba and Canada

Specialty	Total	Rural Cad	% Rural Cad	Rural MB	% Rural MB
Anesthesia	13	10	76.9%	10	76.9%
Emergency Medicine	10	4	40.0%	1	10.0%
Sports & Exercise Medicine	3	0	0.0%	0	0.0%
Palliative Care	1	0	0.0%	0	0.0%

Discussion

Analyzing the initial practice location of parkland graduates with enhanced skills training shows Family Practice Anesthesia having the highest percentage of rural MB initial practices while Emergency Medicine enhanced skills physicians having a more urban practice in Manitoba and across Canada. Due to smaller sample size, no correlations can be made at this time regarding rural and urban initial practice locations for Sports & Exercise Medicine and for Palliative Care enhanced skills training. However, it worth noting there has been three Parkland residency graduates who completed Sports and Exercise

Medicine enhanced skills training who initially practiced in urban Manitoba and one Parkland residency graduate who completed Palliative Care enhanced skills training who practices in urban Canada.

The 76.9% initial rural practice rate for Family Practice Anesthesia from Parkland residency graduates may be due to multiple factors. Firstly, it is predicted that more opportunities exist for family practice anesthesia in rural areas versus urban centers which would have more anesthesia specialists. As well, the ORNH require a job offer from a rural or northern area in Manitoba to be accepted into the program, making it easier for graduates to initially practice in a rural or northern area.

The 40% rural Canadian retention and 10% rural Manitoba retention for Emergency Medicine enhanced skills graduates is also likely due to multiple factors. Firstly, many rural locations do not require a speciality or additional training in emergency medicine for family physicians. However, emergency medicine in Winnipeg and other large centers across Canada are shifting towards either a speciality in emergency medicine being required or having additional training. Therefore, those who pursue enhanced Emergency Medicine skills may have stronger preference to work urban. As well, except for Winnipeg, there are not many urban options in Manitoba; which may explain the larger increase in cross Canada urban initial practice setup.

Recruitment of primary care physicians and specialists to rural areas is a concern across Canada and within Manitoba. Enhanced skills programs can help fill some of the need of specialized skills required in rural areas. However, some programs including emergency medicine and sports medicine may currently lack rural incentive or rural opportunity.

References

1. University of Manitoba – Faculty of Medicine – Family Medicine – Enhanced Skills Programs. Enhanced Skills Programs.
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2. Manitoba's Office of Rural and Northern Health. Family Practice Anesthesia Program Funding.
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