



**Backgrounder Embargoed until April 28, 2008 – 5:00 a.m. EST**

## **Medical Student and Resident Data Backgrounder of the 2007 National Physician Survey (NPS)**

The National Physician Survey (NPS) is a major ongoing research project that gathers the opinions of medical students, 2<sup>nd</sup> year residents and physicians from across the country. It is the largest census survey of its kind and is an important barometer of where the country's present and future doctors are on a wide range of critical issues.

- The College of Family Physicians of Canada, Canadian Medical Association and Royal College of Physicians and Surgeons of Canada work collaboratively to manage this important research.
- The 2007 Survey expands and builds on the 2004 Survey. Nearly 20,000 physicians, 730 2<sup>nd</sup> year residents and 2,800 medical students from across the country completed the 2007 Survey. On April 28th, 2008, the third phase of the NPS results is being released. This includes data from all medical students and 2<sup>nd</sup> year residents training in medical schools across Canada. Later in the spring, more physician research results will be released by specialty-specific breakdowns.

### **Today's health systems must plan for the expectations of tomorrow's physicians.**

Medical students and residents identified a satisfactory balance between professional and personal aspects of life as a key priority. Future medical practitioners want to work collaboratively with other health professionals using technology to enhance practice. Health authorities interested in recruiting new physicians to their region, community or hospital must ensure that work environments support these priorities and plans.

- When asked which factors would be important to have a satisfying and successful medical practice, 93% of medical students and 88% of residents stated the "ability to achieve balance between work and personal life". In fact, 60% of students and 52% of residents identified balance between work and personal life as the most important factor in determining a satisfying and successful medical practice.
- Sixty-four percent of medical students, 74% of FM<sup>1</sup> residents and 41% of SM residents intend to practice in the province where they are currently training.
- Solo practice preferences are nearly non-existent with only 1.5% of all residents identifying it as their preference. 65% of FM and 49% of SM residents intend to be part of a medical group and/or inter-professional practice, and an additional 25% of residents have yet to decide how they want to organize their practice.
- Seventy-five percent of all 2<sup>nd</sup> year medical residents expect to use electronic medical records (EMRs) in practice. This contrasts to the current reality (from the NPS 2007) indicating that only about one quarter of practicing physicians in Canada use EMRs.

<sup>1</sup> "FM" is the abbreviation used in the Backgrounder to represent family medicine. "SM" is the abbreviation used to represent all other medical specialties.

### Debt and finances can impact career choice in different ways.

- Trainees often enter medical practice with high levels of debt. Students and residents have indicated that incentives can attract them to new regions, communities or hospitals that differ from those in which they have trained.
  - Over one third (36%) of medical students who responded to the 2007 NPS expect their debt load directly related to attending medical school to be in excess of \$80K.
  - 25% of residents report having entered training with direct medical school debt in excess of \$80K. 29% estimate that upon completion of their training, their debt load will exceed \$80K (an increase from 21% in 2004).
- Among medical students carrying debt, 34% said that to pay off their debts they would practice where they are offered a financial incentive. Among residents anticipating debt upon completion of their residency, 46% of FM residents and 37% of SM residents said they would practice where they are offered a financial incentive.
- Among medical students with debt, 23% said that they would select a specialty they believed would have a high earning potential. Given current levels of pay, this could adversely influence students wanting to choose family medicine as a career. On the other hand, 16% of medical students said they would select a shorter residency program and 20% of FM residents said they purposely chose a short residency as a result of their debt and desire to use the higher earnings of practice to pay it down.

### The way future physicians want to practice will impact proposed solutions to more timely access to care.

Timely access to care is affected by physician shortages and will be further influenced by changing patterns of physician practice. While future physicians are part of the solution, the way they want to practice and their priorities must be considered in ongoing efforts to improve timely access.

- In order to maintain the goal of a 50/50 balance between family physicians and other specialists in practice across Canada, we need a minimum of 45% of the graduates of our medical schools<sup>2</sup> and 45% of the post graduate entry positions to be committed to family medicine. Approximately 40% of 1<sup>st</sup> year trainees are in FM programs and 60% are in other SM programs (Source: CAPER, 2007).
- Sixty-five percent of medical students and 63% of residents responding to the 2007 NPS were women. The growing proportion of females is especially noticeable in family medicine, where in 2006-07, 66% of physicians graduating from family medicine programs were women while 44% of those graduating from medical, surgical and laboratory programs were women (Source: CAPER, 2007). Both the 2004 and 2007 NPS demonstrate different patterns of practice for women physicians, e.g. fewer hours and patients per week while in their reproductive and child-rearing years and spending longer with each patient than their male counterparts.
- Thirty-three percent of FM residents indicated their intention to specialize within an area of FM (the most frequently specified areas being emergency medicine, obstetrics, palliative care and sports medicine). This number is on par with 2007 NPS results released earlier this year indicating that 30% of all family physicians describe themselves as having a special focus in their practice.
- A significant proportion of SM residents are also choosing to sub-specialize in highly focused areas. While 41% of SM residents intend to sub-specialize within an area of their current specialty, an additional 43% of SM residents in their 2<sup>nd</sup> year are yet unsure. (Examples of SM residents pursuing a subspecialty include those residents choosing pediatric cardiology within pediatrics or hematology within internal medicine.)
- Among medical students, career interests in research and teaching grew during the course of their education to 40% and 77% respectively, of final year students wanting to be involved in these areas after they graduate.

<sup>2</sup> *Social Accountability: A Vision for Medical Schools* (Health Canada: 2001) names medical schools as playing the key role in producing a well trained and appropriate mix of family physicians and other specialists. Since the early 1990s, Canada has been committed to a physician practice population that is 50% family physicians and 50% other specialists. To maintain this will require at least 45% of all medical school graduates to enter family practice.

### **The professional values of medical students and residents will produce the kinds of physicians who can meet the needs of Canadians.**

- Canadians can be assured that medical students and residents are being well educated and will provide competent care. Medical students and residents take preparation for their future careers very seriously. 91% of students, 82% of FM residents and 77% of SM residents identified sufficient medical competence to respond to the health care needs of their patients as a high priority. Wanting to maintain competence through continuing education was identified as an additional priority by 70% of students, 72% of FM residents and 64% of SM residents. Of assurance, 82% of 2<sup>nd</sup> year residents are satisfied to very satisfied with their training and approximately 4 out of 5 think their training has prepared or will prepare them for practice.
- For students, intellectual stimulation / challenge (93%) and professional relationships caring for patients (83%) were the most frequently cited factors attracting them to careers in medicine. Earning potential was a factor for less than half of medical students.
- In later years, 2<sup>nd</sup> year FM residents rated their professional relationships with patients most highly (85%) with workload flexibility / predictability (79%) and intellectual stimulation / challenge (65%) as additional factors that led them to select family medicine. Most family physicians would confirm the great importance of all three factors in practice.
- In contrast, intellectual stimulation / challenge was the most frequently cited factor for 2<sup>nd</sup> year SM residents (88%) followed by professional relationships with patients (54%) and workload flexibility / predictability (50%). This is in keeping with their training and practice choices in more highly specialized areas of medicine.
- For practicing physicians in all medical disciplines responding to the 2007 NPS, the highest level of satisfaction was also found in their professional relationships with their patients (84%).

### **Methodology**

The National Physician Survey (NPS) is a total census survey. The NPS is made possible through the financial contributions of the Canadian Medical Association (CMA), The College of Family Physicians of Canada (CFPC), The Royal College of Physicians and Surgeons of Canada (RCPSC), the Canadian Institute for Health Information (CIHI) and Health Canada. The NPS has received cash and in-kind contributions for a total budget of \$1.2 Million over 3 years (2007-2009).

- The 2007 edition of the NPS was carried out as a self-reported online survey of all second year residents and medical students training in Canada. Residents and students were contacted on four separate occasions. The email invitations to complete the NPS questionnaire were forwarded by the undergraduate and postgraduate medical offices at each of the 17 medical schools to their students and second year residents respectively, on behalf of the NPS. This was done in order to ensure that all students and residents would be invited to participate, and to protect student and resident confidentiality.
- The NPS-related emails started in late February 2007 with an advanced notification, followed one week later with an invitation containing the http link to the questionnaire, followed by a reminder message again containing the link a week and a half later, and a final invitation two weeks later. The questionnaire completion phase ended April 13<sup>th</sup>, 2007. All responses were captured directly into two separate databases, one for student responses and one for residents.
- Of the 9,162 students invited to complete the 2007 NPS, 2,819 replied to the survey for an overall study response rate of 30.8%. Of the 2,627 second year residents invited to complete the 2007 NPS, 733 replied to the survey for an overall study response rate of 27.9% (28.8% among family medicine residents and 27.4% among residents in all other specialty programs).
- National level estimates based on the 2007 student NPS study results are considered accurate within +/- 1.8%, 19 times out of 20.
- National level estimates based on the 2007 resident NPS study results are considered accurate within +/- 3.6%, 19 times out of 20.

For more information and to see the NPS 2004 and 2007 results, please go to [www.nationalphysiciansurvey.ca](http://www.nationalphysiciansurvey.ca).

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