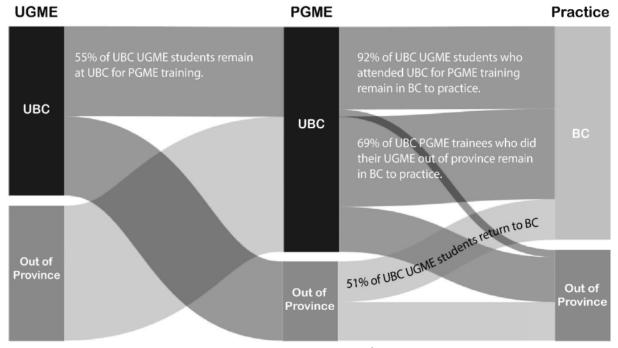


Faculty of Medicine

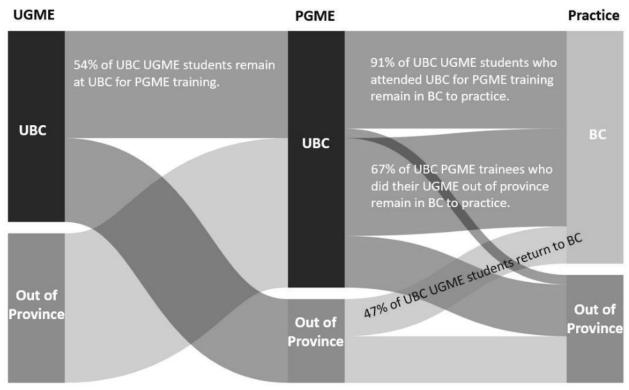
2020/21

Overall, 73% of UBC UGME trainees and 78% of PGME trainees remain in BC to practice.



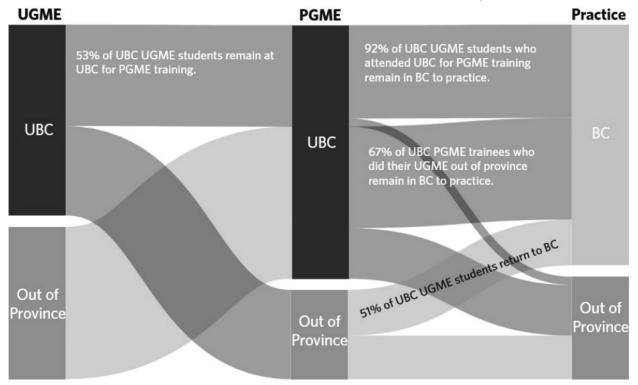
Source: UBC Evaluation Studies Unit Faculty of Medicine - 2020/21 LTO Data Extraction - Trainees who entered UBC between 2000/01 and 2020/21 (inclusive).

Overall, 71% of UBC UGME trainees and 76% of PGME trainees remain in BC to practice.



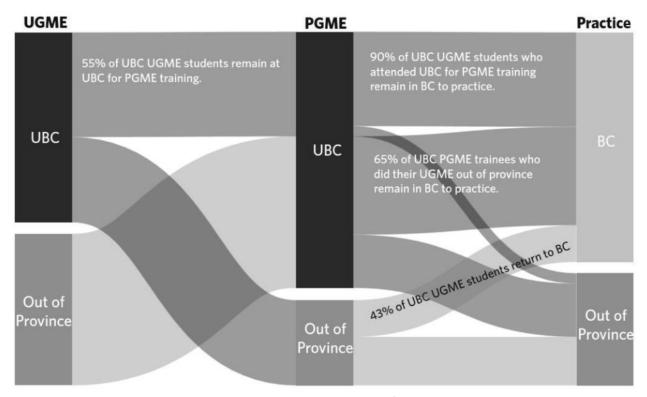
Source: UBC Evaluation Studies Unit Faculty of Medicine - **2019/20 LTO Data Extraction** - Trainees who entered UBC between 2000/01 and 2019/20 (inclusive).

Overall, 73% of UBC UGME trainees and 77% of PGME trainees remain in BC to practice.



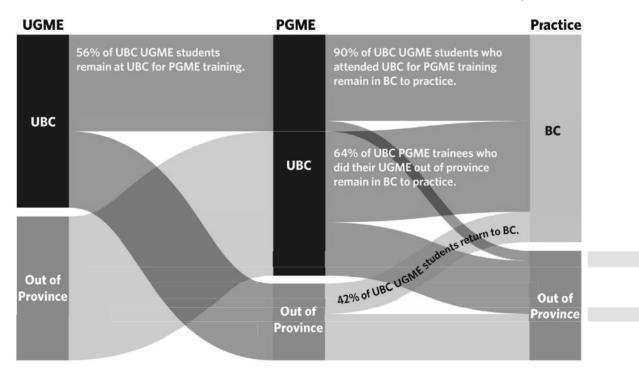
Source: UBC Evaluation Studies Unit Faculty of Medicine - **2018/19 LTO Data Extraction** - Trainees who entered UBC between 2000/01 and 2018/19 (inclusive).

Overall, 2/3 of UBC UGME trainees, and 3/4 of UBC PGME trainees, remain in BC to practice.



Source: UBC Evaluation Studies Unit Faculty of Medicine - **2017/18 LTO Data Extraction** - Trainees who entered UBC between 2000/01 and 2017/18 (inclusive).

Overall, 2/3 of UBC UGME trainees, and 3/4 of UBC PGME trainees, remain in BC to practice.



Source: UBC Evaluation Studies Unit Faculty of Medicine - **2016/17 LTO Data Extraction** - Trainees who entered UBC between 2000/01 and 2016/17 (inclusive).

UGME - Practice locations by program sites and health authority

Number of UBC UGME students practicing in each health authority - by community.

Data notes

Source: 2020/21 LTO Data Extraction - Trainees who entered UBC UGME between 2000/01 and 2020/21 (inclusive).

Included: UGME trainees currently practicing in BC. Formatting: Rural (RSA) communities are displayed in green text.

Summary Table 1						
	Pre-	Post-				
Health Authority	Distribution	Distribution	VFMP	IMP	NMP	SMP
Fraser	88	471	421	21	10	19
Interior	35	207	103	19	66	18
Northern	11	108	29	7	69	3
Vancouver Coastal	140	595	510	44	25	16
Vancouver Island	59	316	151	112	38	15
Out of Province	138	598	460	65	60	13
Total	471	2294	1674	268	268	84

Summary Table 2	Pre	e-Distribution		Post-Distribution						
	Family			Family						
Health Authority	Medicine	Generalist	Specialist	Medicine	Generalist	Specialist				
Fraser	34	13	41	249	55	167				
Interior	19	2	14	125	19	62				
Northern	6	1	4	84	5	19				
Vancouver Coastal	47	16	77	241	103	251				
Vancouver Island	25	4	30	183	40	93				
Out of Province	42	11	85	292	78	228				
Total	173	47	251	1174	300	820				

	Pre-	Post-				
Fraser HA	Distribution	Distribution	VFMP	IMP	NMP	SMP
Abbotsford	4	40	34	2	1	3
Burnaby	12	83	75	3	2	3
Chilliwack	4	19	16	1		2
Coquitlam	2	22	22			
Delta	2	17	15			2
Fort Langley		1		1		
Harrison Hot Springs		1			1	
Норе	2	2	2			
Langley	6	24	21	1		2
Maple Ridge	2	14	13			1
Mission		5	3	1		1
New Westminster	21	84	79	2	2	1
Port Coquitlam	1	10	8	2		
Port Moody	4	9	8	1		
Surrey	26	130	116	7	3	4
White Rock	2	10	9		1	
Total	88	471	421	21	10	19

	Pre-	Post-				
Interior	Distribution	Distribution	VFMP	IMP	NMP	SMP
100 Mile House		2		1	1	
Armstrong	1					
Castlegar		2	2			
Chase		1	1			
Christina Lake	1					
Cranbrook		12	2	4	5	1
Creston		1	1			
Elkford	1					
Fernie		2			2	
Fruitvale		1			1	
Golden		3			2	1
Grand Forks		1	1			
Kamloops	10	36	22	2	5	7
Kaslo		1	1			
Kelowna	4	58	38	3	12	4
Keremeos		1				1
Merritt		1	1			
Nakusp		2	1		1	
Nelson	1	9	5		4	
Okanagan Falls		2			1	1
Oliver		3		1	2	
Osoyoos		1			1	
Peachland		1	1			
Penticton	2	15	7	3	5	
Princeton		1			1	
Revelstoke		3		1	1	1
Rossland	1	2	2			
Salmon Arm	5	8	3		5	
Sorrento	1					
Sparwood		1			1	
Sun Peaks		1	1			
Trail		10	4	3	3	
Vernon	7	18	9	1	8	
West Kelowna		2	1		1	
Williams Lake	1	6			4	2
Total	35	207	103	19	66	18

	_					
	Pre-	Post-				
Northern	Distribution	Distribution	VFMP	IMP	NMP	SMP
Burns Lake		1				1
Dawson Creek		1	1			
Fort Nelson	1					
Fort St. James		1	1			
Fort St. John		4		2	2	
Fraser Lake		2			2	
Hazelton	1	2			2	
Kitimat		1	1			

Mackenzie		3	2	1		
Masset		3	2	1		
Moberly Lake		1			1	
New Aiyansh		1	1			
Prince George	6	63	9	1	52	1
Prince Rupert		1			1	
Queen Charlotte		1			1	
Quesnel		3			3	
Smithers	1	6	3	2	1	
Terrace	2	12	8		3	1
Valemount		1			1	
Vanderhoof		1	1			
Total	11	108	29	7	69	3

	Pre-	Post-				
Vancouver Coastal	Distribution	Distribution	VFMP	IMP	NMP	IMP
Bella Bella		3	2	1		1
Bella Coola	1	1	1			
Gibsons		2	1	1		
North Vancouver	18	50	39	5	5	1
Powell River	3	5	4		1	
Richmond	15	59	53	1	2	3
Sechelt		3	2	1		
Squamish		7	6		1	
Vancouver	100	452	391	35	15	11
West Vancouver	1	6	6			
Whistler	1	7	5	1	1	
Wilson Creek	1					
Total	140	595	510	44	25	16

	Pre-	Post-				
Vancouver Island	Distribution	Distribution	VFMP	IMP	NMP	SMP
Alert Bay		1		1		
Brentwood Bay	1	2		2		
Campbell River	3	9	3	3	2	1
Comox	4	9	5	2	2	
Courtenay	3	24	11	9	3	1
Duncan	2	16	6	4	4	2
Galiano		1			1	
Gold River		1		1		
Ladysmith		3	1		1	1
Langford		1		1		
Mill Bay		1	1			
Nanaimo	11	69	32	16	17	4
Parksville	1	2		2		
Pender Island		1	1			
Port Alberni		2				2
Port Hardy		1	1			
Saanichton	1	7	1	6		
Salt Spring Island		1		1		
Shawnigan Lake		1		1		
Sidney	1	5	2	3		
Sooke		2	1	1		
Tofino	1	2		1	1	
Victoria	31	155	86	58	7	4
Total	59	316	151	112	38	15

Family Physician Return of Service Retention Rates

November 22, 2018

The Return of Service (ROS) program is an important component of British Columbia's physician resource strategy. Timely access to medical care has been a problem for years for British Columbians living in rural areas. In 2006, the ROS program was established in an effort to help address access to care issues in BC. The Ministry of Health funded 18 International Medical Graduate (IMG) residency positions in exchange for a two-year ROS in an identified community of need in BC, upon graduation. IMGs were offered a tremendous opportunity to complete their medical training in BC, while the ROS attracted new practicing physicians to communities of need throughout the province. In 2012, the UBC IMG residency program underwent a huge expansion, as did the ROS Program. The UBC medical program expansion helped get many of the resident physicians out of downtown Vancouver and into rural areas by establishing distributed medical education (DME) sites throughout the province. Residents were linked through the Canadian Resident Matching Service (CaRMS) to DME sites, and the Ministry of Health's ROS policy linked ROS placements with the health authority in which the DME site was located.

While DME is considered a recruitment strategy which places family medicine residents at distributed sites for two years, the ROS is a retention strategy used to keep the licensed practicing physician in that geographic area for an additional two years (2-year ROS). Some health authorities consider the ROS a success if the physician grows roots, becomes integrated into the community, and chooses to remain in the community after the ROS is complete. Other health authorities consider the ROS a success if they are able to attract a physician for the 2-year ROS; if they stay longer it is a bonus, if not, at least the population had timely access to care for two years, with the hope that another ROS physician will fill the void.

Over the years the health authorities have come to rely on the ROS Program to help meet their physician resource needs. When the ROS Program began virtually all ROS placements were rural, but with DME site expansion, over time the number of ROS placements in urban communities has increased slightly but the majority of ROS placements have remained rural or semi-rural.

The table below shows the ROS retention rates of family physicians since the ROS program began in 2006. The numbers speak to the importance of the ROS program and the impact it has on patient access to care in rural communities in BC. Nearly half (47%) of IMGs participating in the Family Medicine ROS program remain in the ROS community upon completing the program. Two thirds of the participants who remained are in rural communities, providing vital long-term physician services.

34% of the participants leave a rural ROS community in favour of an urban community after the completion of their ROS. To date, only one participant has moved from an urban ROS community to a rural community, so a continued influx of participants is needed to ensure rural BC communities continue to gain valuable physician services. In total, 64% of family medicine ROS participants practice in an urban community after completing their ROS, and 34% practice in a rural community.

Table: Family Physician Return of Service Retention Rates

CaRMS Year	AA	АВ	ВА	ВВ	вс	BD	BE	СВ	Total Retained Post ROS	Total Moved Post ROS	Total Urban Post ROS	Total Rural Post ROS	Total Rural ROS Placements	Total Participants
2006		2	7	3					2	10	10	2	9	12
2007	1	1	5	4			1		2	10	10	1	6	12
2008	2	2	7					1	4	7	10	2	9	12
2009		6	3	2				1	6	5	6	6	9	12
2010	2	4	4			1	1		6	6	6	5	9	12
2011	1	3	8						4	8	9	3	11	12
2012	2	4	8	1		2		2	6	11	13	6	14	19
2013	7	10	5	3	1	1		1	17	10	16	12	16	28
2014	8	13	2	1				2	21	3	13	13	15	26
Total #	23	45	49	14	1	4	2	7	68	70	93	50	98	145
Total %	16%	31%	34%	10%	1%	3%	1%	5%	47%	48%	64%	34%	68%	84%

	Legend
Table	ROS Retention
Α	Retained in same ROS community
AA	Retained in urban BC
AB	Retained in rural BC
В	Moved to another community
BA	Rural to BC urban
BB	Urban to BC urban
ВС	Urban to BC rural
BD	Rural to BC rural
BE	Moved out-of-province
СВ	Breach of Contract

Data sourced from ROS Master Tracking Sheet, Ministry of Health, updated:

CaRMS 2006: May 18, 2018
CaRMS 2007: July 14, 2018
CaRMS 2008: July 24, 2018
CaRMS 2009: August 17, 2018
CaRMS 2010: August 17, 2018
CaRMS 2011: August 28, 2018
CaRMS 2012: September 13, 2018
CaRMS 2013: August 10, 2018
CaRMS 2014: September 17, 2018

"Rural" is defined as communities included in the Rural Subsidiary Agreement: https://rccbc.ca/wp-content/uploads/2018/09/RSA-communities_2018.pdf

Retention of IMG-BC Participants by Postgraduate Medical Education Cohort – Family and Speciality Medicine

	Retention of IMG-B	C Parti	cipan	ts by Po	stgra	duate M	[edica	l Educa	tion	Coho	rt – F	amily	and	Speci	ality I	Medici	ine			
	Location Post ROS				Ü									Ĥ						
	AA		AB		1	ВА	I	3B	ВС		В	D		BE	C	В	СС		D	
Cohort Year	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
2006	4	1%	2	1%	7	2%	2	1%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
2007	3	1%	1	0%	7	2%	4	1%	0	0%	0	0%	1	0%	0	0%	0	0%	0	0%
2008	1	0%	1	0%	10	3%	4	1%	0	0%	0	0%	1	0%	1	0%	0	0%	0	0%
2009	3	1%	2	1%	6	2%	3	1%	0	0%	1	0%	1	0%	1	0%	0	0%	0	0%
2010	4	1%	2	1%	5	2%	1	0%	0	0%	2	1%	1	0%	1	0%	0	0%	0	0%
2011	3	1%	4	1%	8	2%	1	0%	0	0%	0	0%	0	0%	1	0%	0	0%	0	0%
2012	2	1%	5	2%	11	3%	3	1%	0	0%	0	0%	0	0%	2	1%	0	0%	0	0%
2013	9	3%	7	2%	10	3%	2	1%	1	0%	1	0%	0	0%	1	0%	0	0%	0	0%
2014	13	4%	9	3%	9	3%	3	1%	0	0%	3	1%	0	0%	2	1%	0	0%	1	0%
2015	6	2%	10	3%	11	3%	7	2%	0	0%	0	0%	1	0%	6	2%	0	0%	3	1%
2016	19	6%	12	4%	8	2%	3	1%	0	0%	3	1%	0	0%	2	1%	1	0%	0	0%
2017	14	4%	15	5%	5	2%	3	1%	0	0%	1	0%	0	0%	3	1%	1	0%	0	0%
2018	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	1	0%	0	0%
Grand																				
Total	81	25%	70	21%	97	30%	36	11%	1	0%	11	3%	5	2%	20	6%	3	1%	4	1%

^{*}Data sourced from ROS Master Tracking Sheet, Ministry of Health. Data retrieved Dec 2, 2021.

	Legend
Α	Retained in same ROS community
AA	Same urban
AB	Same rural
В	Moved to another community
ВА	Rural to urban
ВВ	urban to urban
ВС	urban to rural
BD	rural to rural
BE	Moved out-of-province
С	Breached
CA	Practicing in BC rural
СВ	Practicing in BC urban
CC	Practicing out-of-province
D	Not Practising

Contextual information for FOI HTH-2021-14394 due to incomplete information and data quality issues:

- Practice location is determined using the College of Physicians and Surgeons (CPSBC) registrant directory. The business address in the CPSBC registrant director is self-reported by physicians in accordance with CPSBC Bylaws. The Ministry cannot confirm whether this self-reported information is accurate or up to date. On occasion, and as needed, practice location validation may be completed through Ministry data sources.
- Practice location is reviewed intermittently and only for past IMG-BC participants who have not already been marked as moved. Therefore, this data does not capture the longitudinal history of those who have changed practice locations on several occasions or who may be practicing in multiple locations. As such, this data is point-in-time and should not be relied upon due to data quality issues.
- In summary, the Ministry cannot confirm the accuracy or completeness of this data and, therefore, does not recommend use for analysis or reference purposes.
- Rural is defined based on the RSA Community List that can be found on the Ministry of Health Website:

https://www2.gov.bc.ca/assets/gov/health/practitioner-pro/rrp_points.pdf

Table 1: IMG-BC Return of Service – Family Physicians Placed in Communities by Year November 1, 2021

Contextual information for FOI HTH-2021-14394:

This data relates to the request for retention of IMG-BC Participants (completed residency training and stayed to practice in British
Columbia) as it represents the communities where physicians practiced within BC for the 2 year (family medicine) or 3 year (specialty
medicine) return of service (ROS) period upon completion of residency. Rural communities can be determined by referring to the RSA
Community List that can be found on the Ministry of Health Website: https://www2.gov.bc.ca/assets/gov/health/practitioner-pro/rrp_points.pdf.

ROS Start Year	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021*	Total
FHA	1	1	1	1	2	1	6	10	12	11	14	12	10	14	96
Abbotsford								1	1	2	1	1	1	2	9
Agassiz				1		1		1			1				4
Burnaby								1	2	2	2	1	1	2	11
Chilliwack							1					1	1		3
Coquitlam		1						1					1		3
Delta									1		1				2
Норе			1		1		2	1	1	1					7
Ladner														1	1
Langley					1		1		1		2	1	1	2	9
Maple Ridge											1	2		2	5
Maple Ridge/Port Coquitlam								1							1
Maple Ridge/Surrey										1					1
Mission							2		1					1	4
New Westminster									1		1		1	1	4
Port Coquitlam								1		2	2	2	1		8
Surrey								3	4	3	3	4	3	3	23
White Rock	1														1
IHA		2	4	3	3	4	1	1	2	5	13	7	13	10	68
100 Mile House													1		1
Armstrong				1										1	2
Barriere										1		1		1	3

Castlegar			1					1			1		2		5
Chase				1	1										2
Clearwater													1		1
Cranbrook		1			1						1		1	1	5
Creston													1		1
Enderby			1			1	1								3
Kamloops									1		2	1	2	2	8
Kamloops & Barriere											2				2
Kelowna			1								1	1	1		4
Keremeos											1				1
Lake Country											1			1	2
Lillooet		1				1						1			3
Lumby										1			1		2
Nakusp					1										1
Nelson				1											1
Oliver										1		1			2
Oliver & Osoyoos											1				1
Osoyoos														1	1
Penticton												1	1		2
Princeton			1			1									2
Salmon Arm													1		1
Sicamous														1	1
Trail						1				1				1	3
Vernon													1		1
West Kelowna									1		2				3
Williams Lake										1	1	1		1	4
NHA	1		2	2	1	2	3	6	5	6	5	7	3	7	51
Dawson Creek				1				1		1					3
Fort Nelson	1														1
Fort St. John							1	4	2	1	1	2	2	3	16
Hazelton						1									1
Mackenzie														1	1

McBride										1					1
Prince George				1	1	1	2		1	1	2	4		3	16
Prince Rupert			1											1	2
Quesnel									2		1	1			4
Smithers											1				1
Terrace			1					1		2					4
Vanderhoof													1		1
VCHA	6	3	3	2	2	3	1	3	6	6	7	9	7	9	67
Bella Bella		1							1		1				3
Bella Coola													1		1
Bowen Island			1												1
Gibsons	1													1	2
North Vancouver									1				1	1	3
Pemberton										1					1
Powell River	1					1	1	1	1	2	1			1	9
Richmond											1	1	1	1	4
Sechelt					1	2		1	2		1	2	3		12
Sechelt/Burnaby	1														1
Squamish	1														1
Vancouver									1	3	2	6	1	4	17
Vancouver/Richmond											1				1
Vancouver DTES	2	2	2	2	1			1							10
West Vancouver														1	1
VIHA	4	3	3	3	2	1	4	8	8	8	12	13	10	12	91
Campbell River								2	2	1	3	4		2	14
Central Saanich													1		1
Chemainus													1		1
Comox	2							1	1		1				5
Courtenay				1						4	3	2			10
Cumberland/Port McNeil											1				1
Duncan	1		2	1				1	2	2	1	4		2	16
Ladysmith	1											1			1
Lauysiiiitii							<u> </u>								

Total	12	9	13	11_	10	11	15	28	33	36	51	48	43	52	373
Victoria													4	5	9
Sooke													1	1	2
Sidney													1		1
Salt Spring Island		1					1		2						4
Qualicum Beach			1		1									1	3
Port McNeill								3							3
Port Hardy					1	1						1	1	1	5
Port Alberni	1										1		1		3
Pender Island							1								1
Parksville		2		1					1	1					5
Oyster River								1							1
Mill Bay											1	1			2
Lake Cowichan							2				1				3

^{*2021} ROS placements are typically expected to start between July 1, 2021 and September 30, 2021. Note, the 52 reported placements reflect ROS participants committed to a community and specific start date within 2021. Please see Table 2 for the full number of placements expected to begin in 2021.

Table 2: IMG-BC Return of Service – Total Family Medicine and Specialist Placements

September 9, 2021

	Family Medicine	Specialist	Total
Total Placements Started to 2020	320	53	373
Total Placements Expected to Start in 2021	55	6	61
Total	375	59	434

Table 3: IMG-BC Return of Service – Total ROS Communities with Placements

November 1, 2021

	Total
ROS communities with placements	89

Table 4: BC IMG Return of Service – Specialists Placed in Communities by Year November 1, 2021

ROS Start Year	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021*	Total
FHA			1	2	1		4	1	3	1	1	14
Abbotsford											1	1
Chilliwack				2			4		1	1		8
Delta								1				1
Langley					1							1
Surrey			1						2			3
IHA	2	2	2	1		5		1		3	1	17
Kamloops			2	1		2				2		7
Kelowna	1							1			1	3
Nelson		1								1		2
Penticton		1				2						3
Vancouver/ Kelowna						1						1
Vernon	1											1
NHA								1			1	2
Prince George								1			1	2
VCHA	1	1	1				2	1	2	1		9
Powell River	1											1
Richmond									1			1
Sechelt		1										1
Vancouver			1				1		1	1		4
Vancouver DTES							1	1				2
VIHA	1	1		1	1	1	1	3	2	3	1	15
Campbell River				1		1				1		3
Comox								1	1	1		3
Duncan	1											1
Nanaimo					1		1	2	1	1	1	7
Victoria		1										1
Total	4	4	4	4	2	6	7	7	7	8	4	57

^{*2021} ROS placements are typically expected to start between July 1, 2021 and September 30, 2021. Note, the 4 reported placements reflect ROS participants committed to a community and specific start date within 2021. Please see Table 2 for the full number of. placements expected to begin in 2021.