



Comhairle na nDochtúirí Leighis  
Medical Council

# Medical Workforce Intelligence Report





# Background

- Maintaining the register of medical practitioners is the cornerstone of the role of the Medical Council.
- Each year doctors enter, are retained on and leave the register. The Medical Council oversees registration to protect the public and ensure good practice.
- In 2012, the registration retention process was revised to collect supplementary information about current practice.





# Background

- Registration inflows and outflows have never been comprehensively analysed and reported.
- This intelligence better enables the Medical Council to strategically and operationally plan its work.
- Workforce intelligence supports effective healthcare planning; this enables good practice among doctors.





# Methods

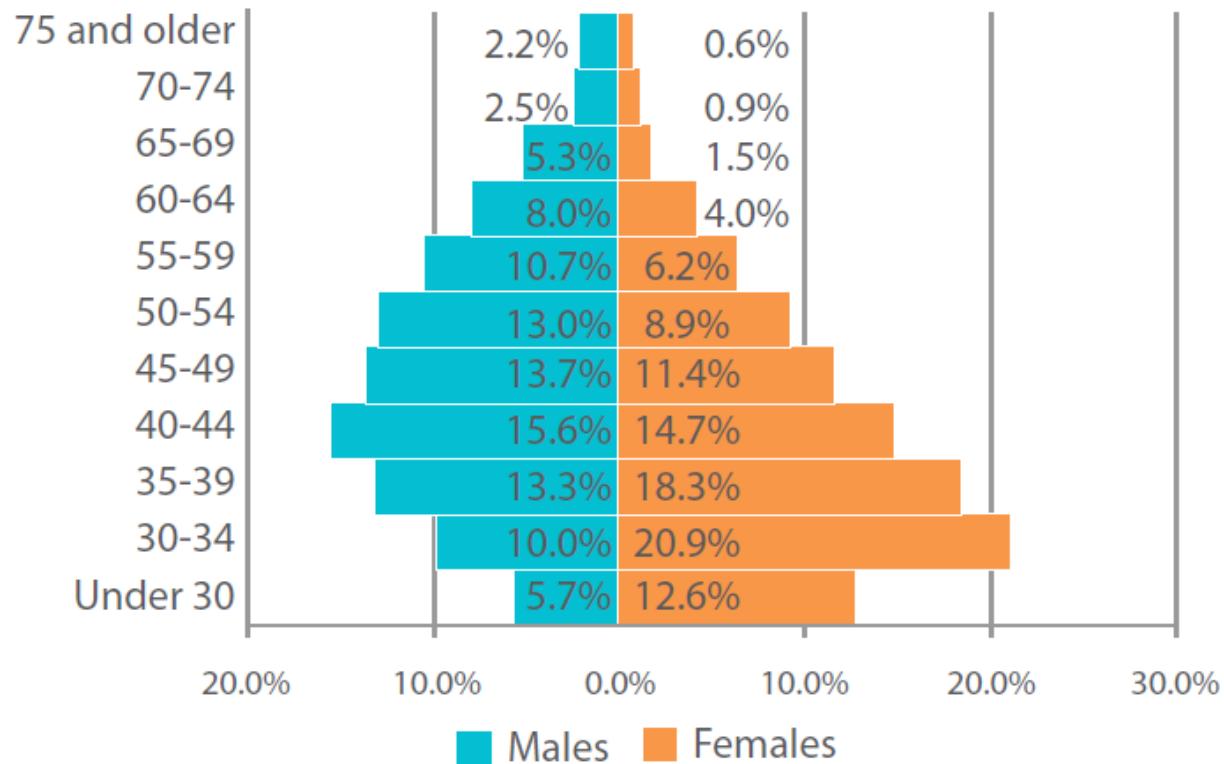
- The report is based on secondary analysis of the Medical Council's register.
- Some variables and analyses are based on responses received to the 2012 annual retention application form. These responses were linked with registration data.
- Some analyses are trends in end-of-year registration data over the last 5 years.





# Findings – Doctors retained

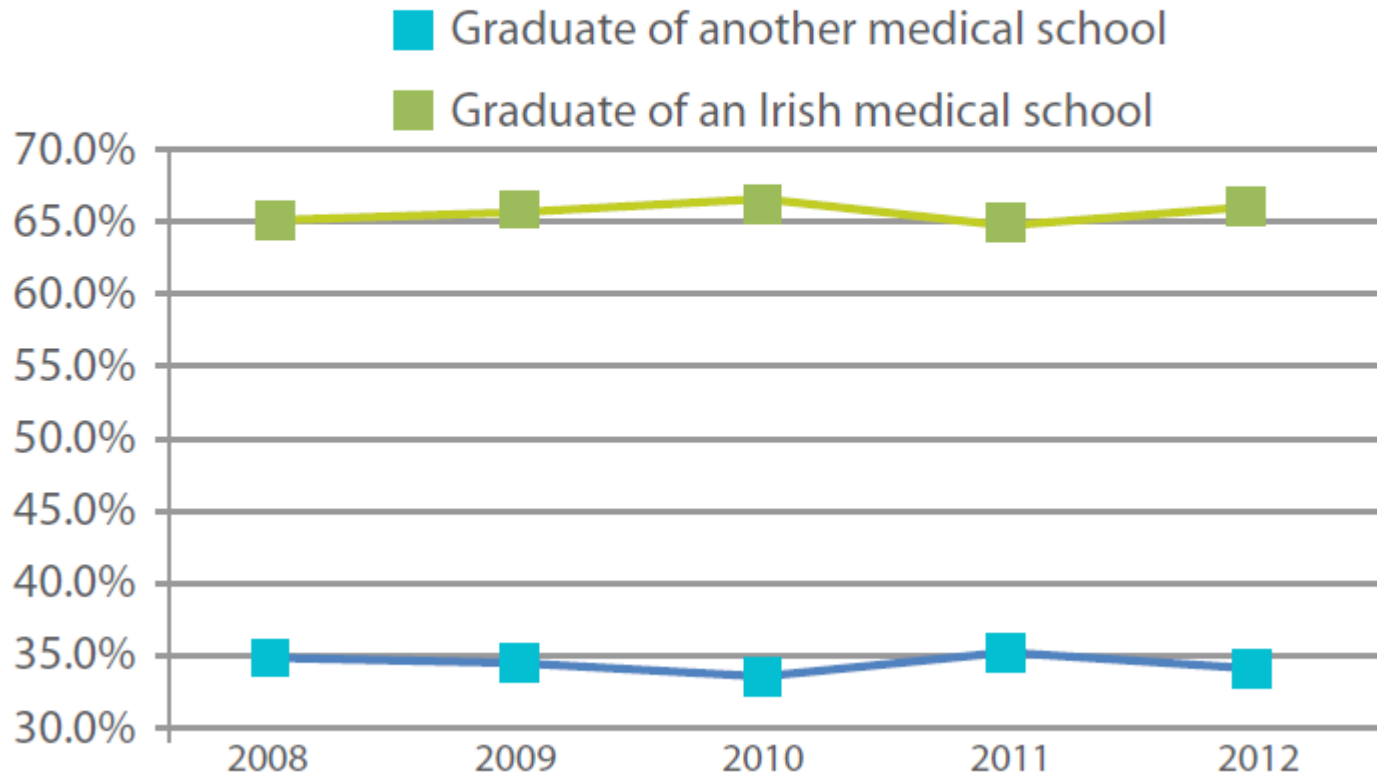
Figure 4: Population pyramid, all doctors retained in the register, 2012





# Findings – Doctors retained

Figure 7: Trend in proportion of doctors who graduated from a medical school in Ireland, 2008-2012





# Findings – Doctors retained

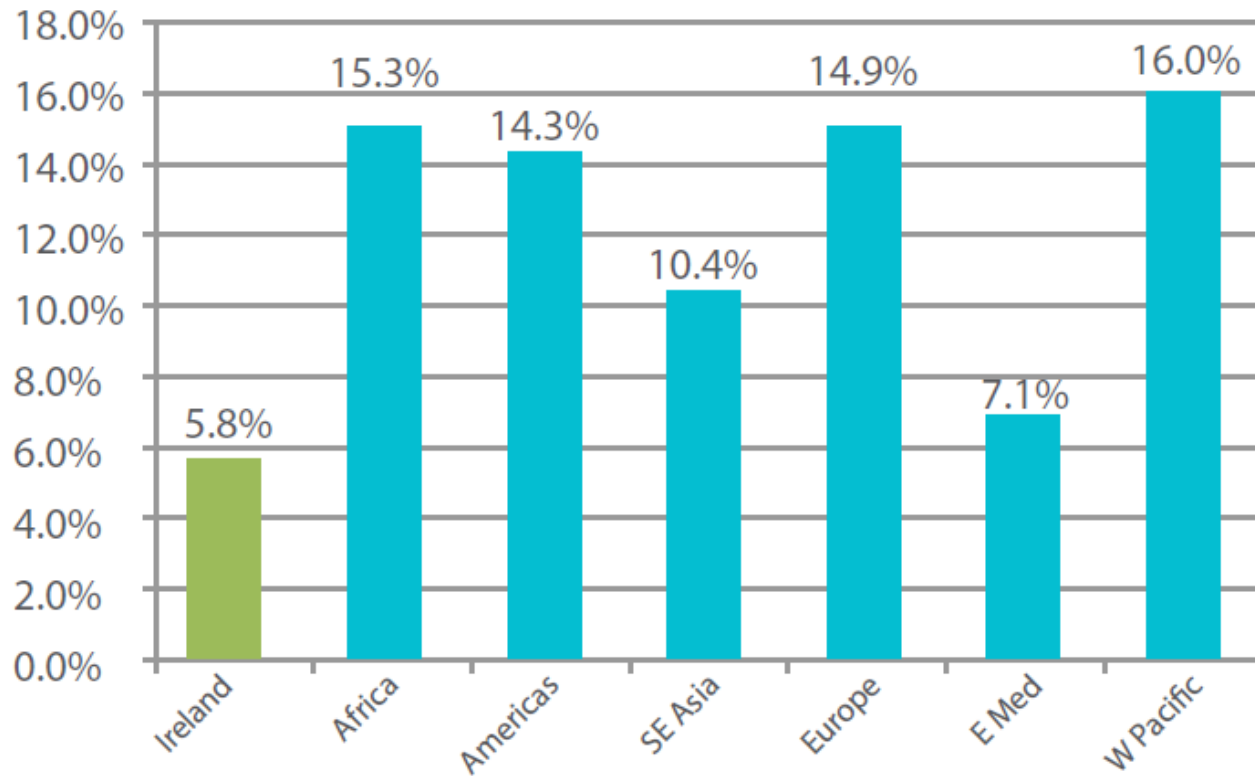
- We have analysed and reported the current area of practice for doctors retaining registration – where a response was provided.
- This is the first time this level and currency of practice information has been available.
- The skills mix (specialist to non-specialist) ratio varied across areas of practice.
- Estimates of medical practitioner density (doctors per head of population) are provided.





# Findings – Doctors exiting

Figure 11: Exit rate 2012 by world region of basic medical qualification

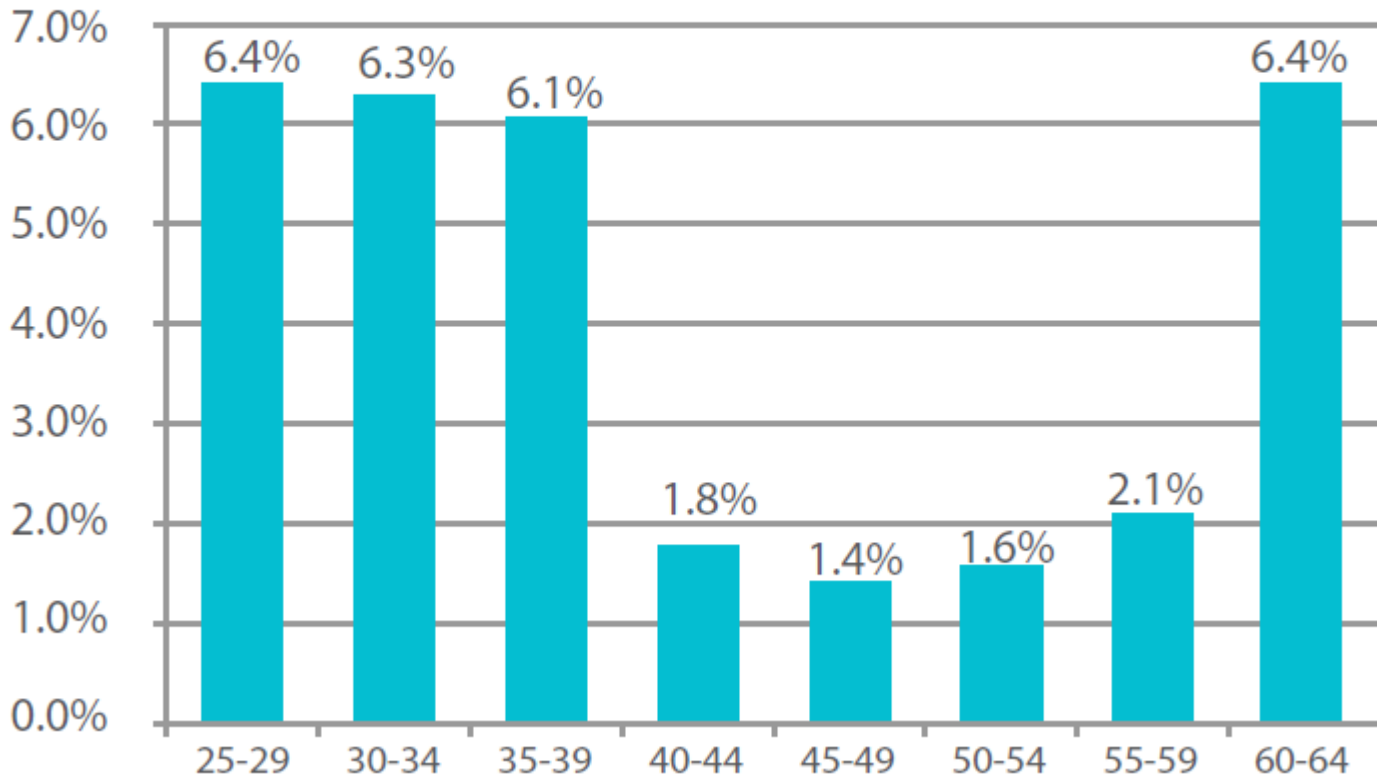






# Findings – Doctors exiting

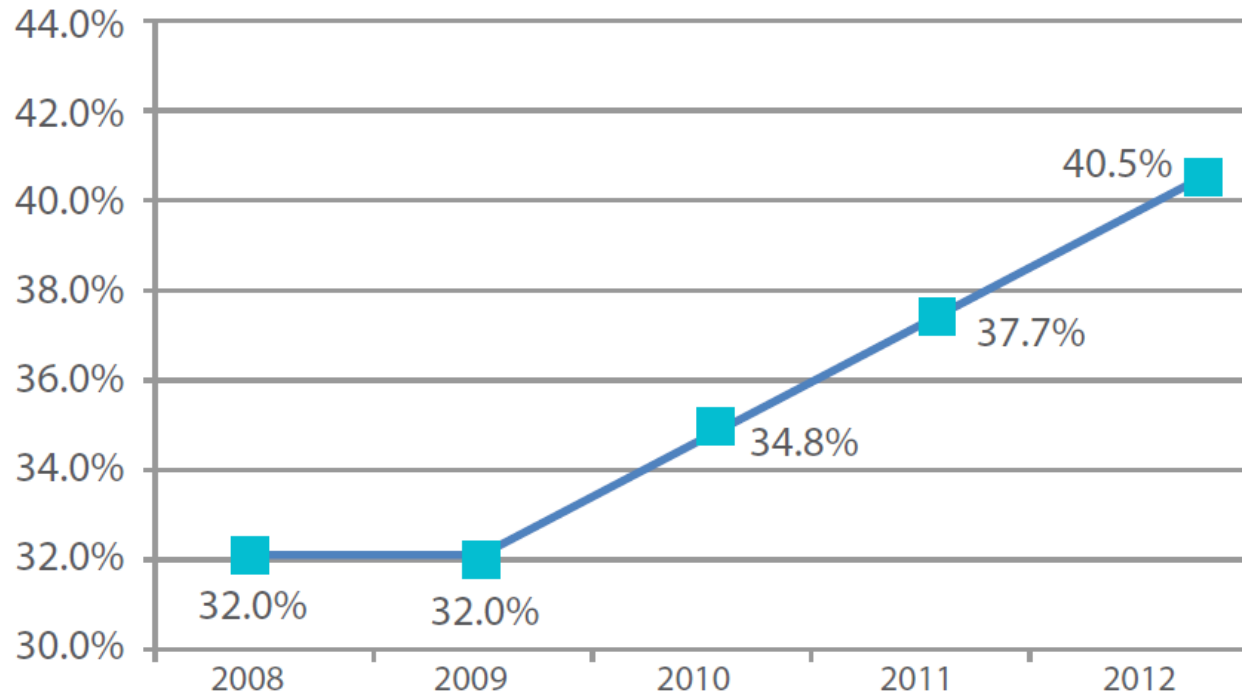
Figure 10: Exit rate 2012 per age group (doctors who graduated from Irish medical schools only)





# Findings – Doctors entering

Figure 13: Proportion of doctors registered in the specialist division at year end, 2008-2012



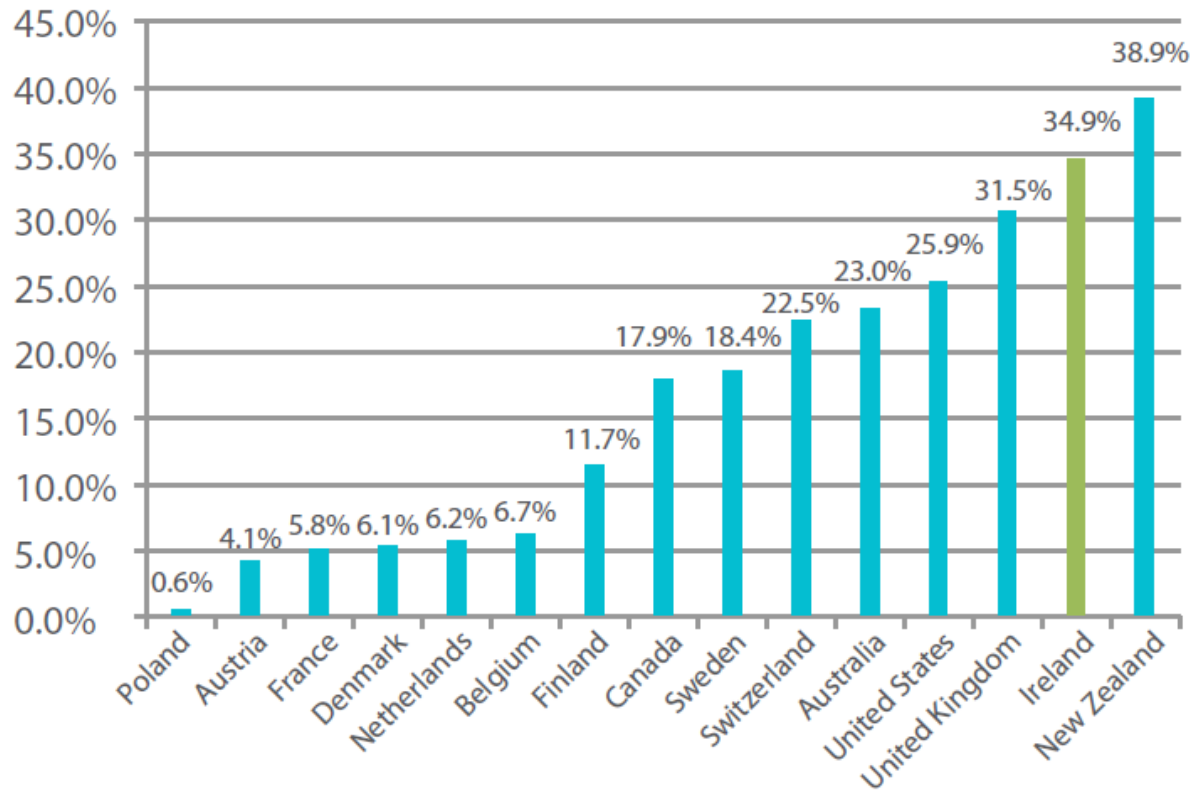
**Rate of growth across individual specialties was variable**





# Findings - Globalisation

Figure 14: Proportion of internationally-trained doctors across OECD countries





# Findings - Globalisation

Figure 15: Age distribution of doctors and area of qualification





# Findings - Globalisation

Table 22: Country of qualification and division of the register

|                                 | Irish medical school |       | Other medical school |       | Proportion of division who graduated outside Ireland |
|---------------------------------|----------------------|-------|----------------------|-------|--|
|                                 | n                    | %     | n                    | %     | %  |
| General Registration            | 3404                 | 31.7% | 3482                 | 61.5% | 50.6%  |
| Specialist Registration         | 5799                 | 54.1% | 1468                 | 25.9% | 20.2%  |
| Supervised                      |                      | 0.0%  | 234                  | 4.1%  | 100.0%   |
| Trainee Specialist Registration | 1523                 | 14.2% | 482                  | 8.5%  | 24.0%  |

Table 23: Practice arrangement by country of qualification

| Practice arrangement               | Irish medical school | Other medical school |
|------------------------------------|----------------------|----------------------|
| Not practising medicine            | 6.9%                 | 6.6%                 |
| Not practising medicine in Ireland | 8.8%                 | 24.4%                |





# Findings – Practice arrangements

Table 25: Proportion of inactive doctors, by gender, age group, division

| Characteristic     | Inactive (%) |
|--------------------|--------------|
| Gender             |              |
| Male               | 6.9%         |
| Female             | 7.7%         |
| Age category       |              |
| 25-34 years        | 7.0%         |
| 35-44 years        | 6.8%         |
| 45-54 years        | 5.6%         |
| 55-64 years        | 4.9%         |
| 65 years and older | 20.2%        |
| Division           |              |
| Supervised         | 7.7%         |
| General            | 9.5%         |
| Trainee Specialist | 6.2%         |
| Specialist         | 5.4%         |





# Findings – Practice arrangements

Table 29: Proportion of doctors practising full-time and part-time, by gender, age, division

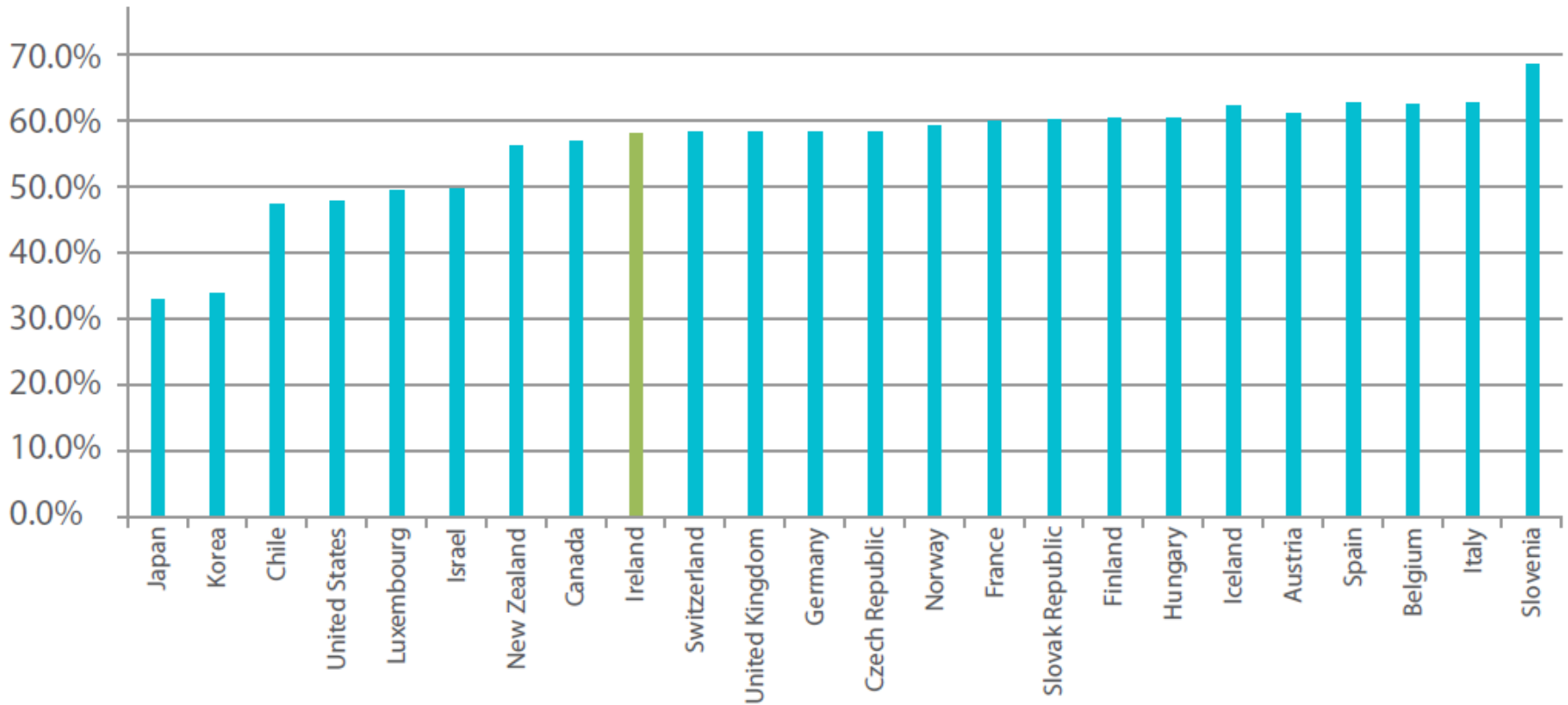
| Characteristic       | Full time | Part time | Other |
|----------------------|-----------|-----------|-------|
| Total                | 83.0%     | 13.8%     | 3.2%  |
| Gender               |           |           |       |
| Male                 | 87.5%     | 9.5%      | 3.1%  |
| Female               | 76.1%     | 20.4%     | 3.5%  |
| Age category         |           |           |       |
| 24 years and younger | 100.0%    | 0.0%      | 0.0%  |
| 25 to 34 years       | 90.4%     | 6.8%      | 2.8%  |
| 35 to 44 years       | 86.2%     | 12.3%     | 1.5%  |
| 45 to 54 years       | 86.3%     | 12.0%     | 1.7%  |
| 55 to 64 years       | 79.6%     | 17.1%     | 3.4%  |
| 65 years and older   | 38.8%     | 43.3%     | 17.8% |
| Division             |           |           |       |
| Supervised           | 99.5%     | 0.0%      | 0.5%  |
| General              | 79.8%     | 15.9%     | 4.3%  |
| Trainee Specialist   | 95.8%     | 2.1%      | 2.1%  |
| Specialist           | 82.0%     | 15.4%     | 2.7%  |





# Women's participation

Figure 20: Proportion of doctors aged less than 35 years who are female, comparison across OECD countries

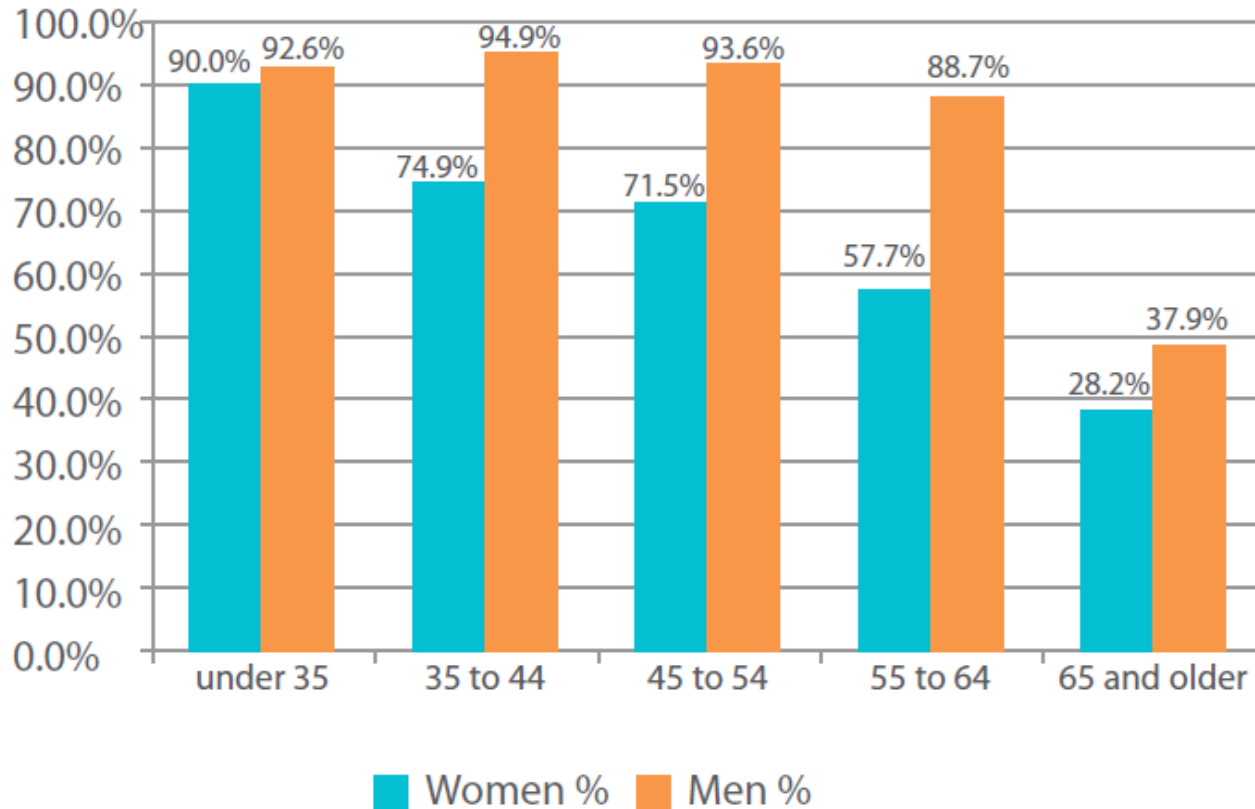






# Women's participation

Figure 21: Comparison of proportion of female and male doctors who work full time by age group





# Points of note

- Supply of doctors appears comparable with other systems.
- Growing specialisation of doctors.
- Detail for the first time on inflows, outflows and current practice arrangements.
- Valuable intelligence to plan, develop and maintain medical workforce.
- Information will be shared with policy makers, employers and educators to inform future planning.
- Data provides a baseline for future research.

