



Medical Council

Supplementary Report 2023

Doctors Leaving The Medical Register



Comhairle na nDochtúirí Leighis
Medical Council

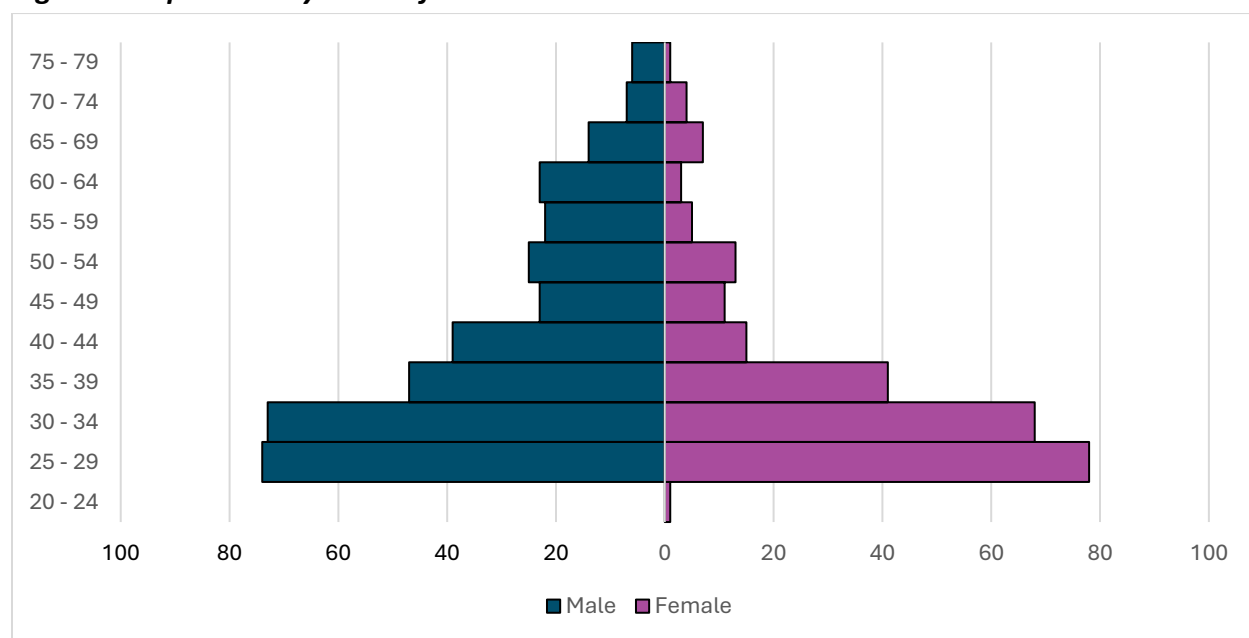
Introduction

This supplementary report focuses on doctors who left the Register in 2023, due to being removed from Register (as the result of not renewing their registration) or due to voluntarily withdrawing their name from the Register. These two cohorts, which can be categorised as “leavers”, comprise a total of 1,618 doctors.

Doctors Removed from the Register in 2023

In 2023, 600 doctors were removed from the Register as a result of not renewing their registration. The gender breakdown of this cohort was 353 males (58.8%) and 247 females (41.2%). The average age was 39.5 years (SD = 12.8 years), and almost half (49.0%, $n = 294$) were 34 years of age and younger. More information on age and gender is shown in Figure 1.

Figure 1. Population Pyramid of Removed Doctors



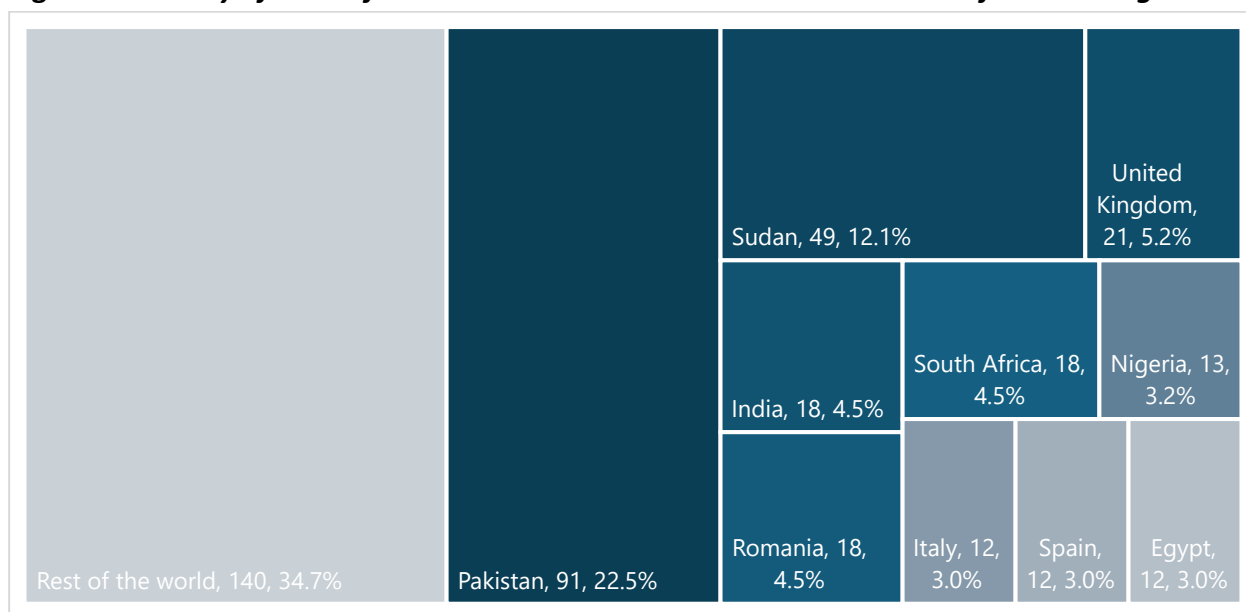
Almost a third of doctors (32.5%, $n = 195$) had obtained their basic medical qualifications in Ireland (Table 1).

Table 1. Basic Medical Qualification Category of Removed Doctors

Qualification Category	n	%
Category 1 - Graduates of Irish medical schools	195	32.5
Category 2 - Graduated in a medical school in the EU and are EU Nationals	136	22.7
Category 3 - Graduated in a medical school in the EU (not EU National)	34	5.7
Category 4 - International graduates from a medical school outside the EU, UK and Ireland	233	38.8
Category 4 (UK) -International graduates from a medical school in the UK	2	0.3
Total	600	100.0

In terms of removed doctors who received their basic medical qualification outside of Ireland (international graduates, $n = 405$), 22.5% ($n = 91$) were born in Pakistan.

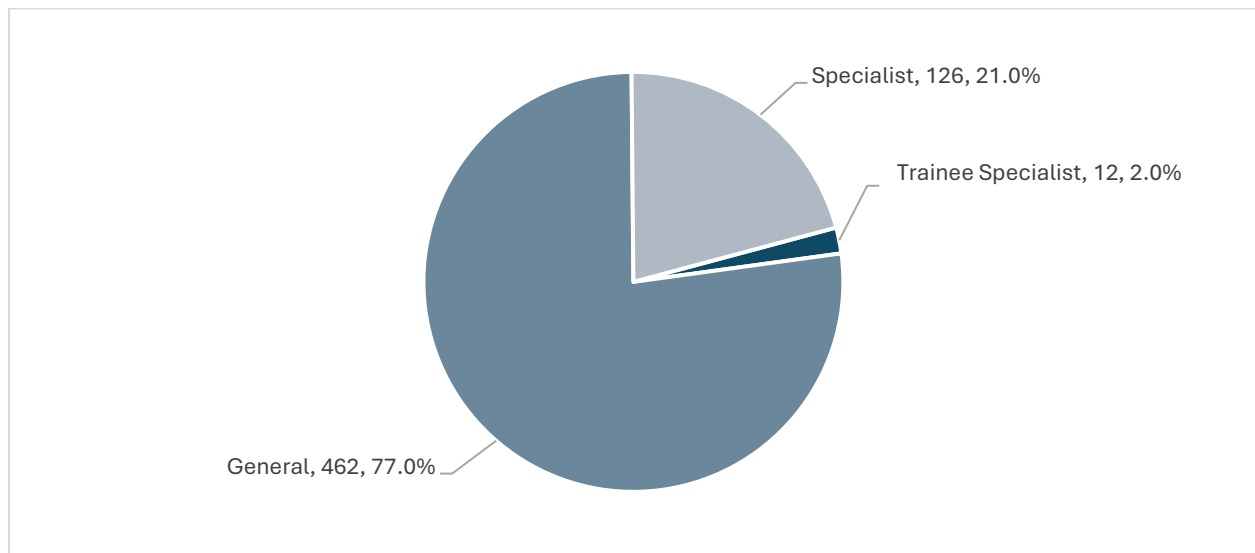
Figure 2. Country of Birth of International Graduates who were Removed from the Register



Note. Information on birth country was not available for one doctor and is excluded from this figure.

Slightly over three quarters of doctors removed (77.0%, $n = 462$) were registered on the General Division (Figure 3).

Figure 3. *Division of the Register*

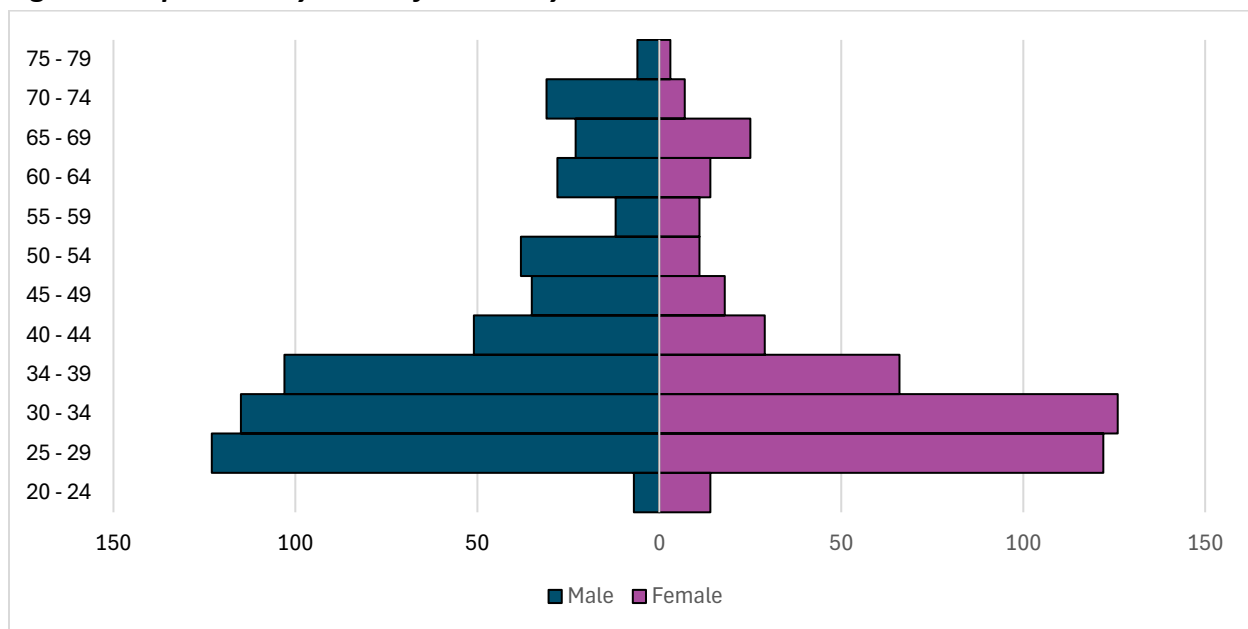


Voluntary Withdrawals 2023

Demographic Overview

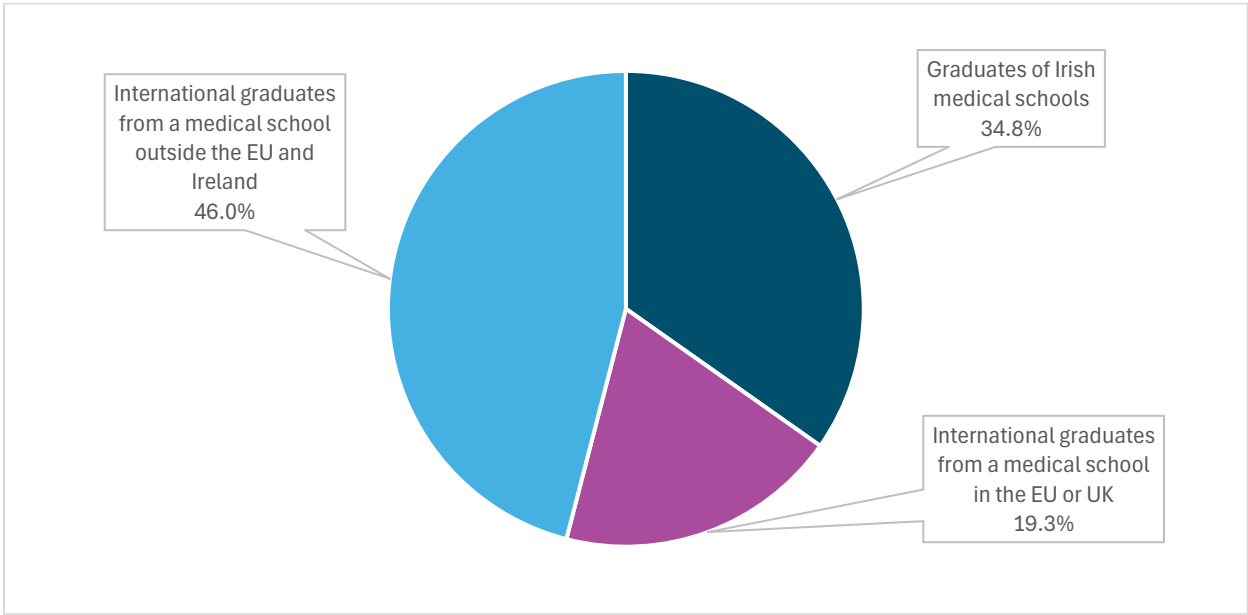
In 2023, 1,018 doctors voluntarily withdrew their registration from the Medical Council. Within this cohort, 56.2% ($n = 572$) were male, and 43.8% ($n = 446$) were female. The mean age of this cohort was 39.2 years ($SD = 13.4$ years) and nearly half of this cohort were aged 34 and younger (49.8%, $n = 507$). A more detailed breakdown of age and gender is shown below in Figure 4.

Figure 4. Population Pyramid of Voluntary Withdrawals



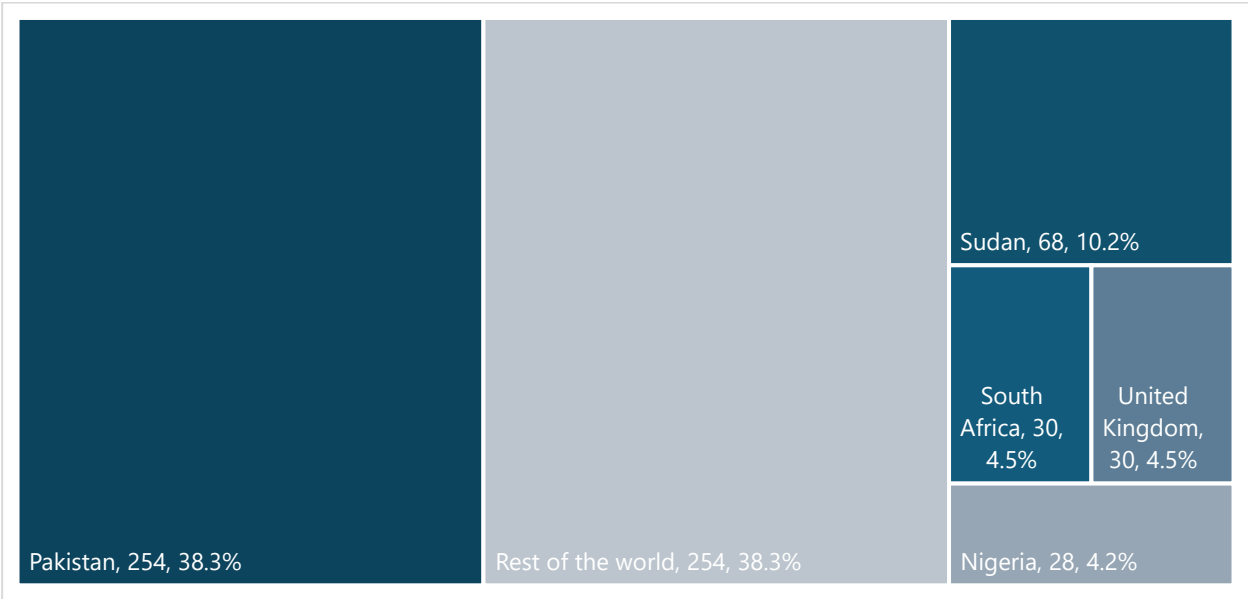
Of those who voluntarily withdrew, 354 (34.8%) obtained their basic medical qualification in Ireland, whereas 196 (19.3%) were graduates from medical schools in the EU or UK and 468 (46.0%) were international medical graduates from a medical school outside the EU, UK or Ireland (see Figure 5).

Figure 5. Basic Medical Qualification Category of Doctors Voluntarily Withdrawing



Of those who received their basic medical qualification outside of Ireland (international graduates, $n = 664$), 38.3% ($n = 254$) of doctors were born in Pakistan, and a further 10.2% ($n = 68$) were born in Sudan (Figure 6).

Figure 6. Country of Birth of International Graduates who Voluntarily Withdrew



In terms of the division from which they voluntarily withdrew their registration, the majority were registered on the General Division (65.4%, $n = 666$), and 24.9% ($n = 253$) were registered on the Specialist Division (Table 2).

Table 2. Division of the Register of Doctors who Voluntarily Withdrew

Division	n	%
Intern	55	5.4
Trainee Specialist	25	2.5
Supervised	19	1.9
General	666	65.4
Specialist	253	24.9
Total	1,018	100

Reason for Withdrawal

When asked about the reason for their voluntary withdrawal request, 657 doctors (64.5%) indicated that they wished to practise medicine in another country, 115 (11.3%) wished to stop practising medicine and 246 (24.2%) reported having some other reason for voluntarily withdrawing.

Doctors were then given the opportunity to provide more details on their withdrawal reason and a breakdown can be observed in Table 3 below. Among doctors wishing to practise medicine in another country the most common choices, as indicated by the darker shades of green were having some other reason for making a voluntary withdrawal, family or personal reasons and limited career progression opportunities. Among those who wished to stop practising medicine the primary additional detail provided was retirement. For those who indicated having some other reason for voluntarily withdrawing, over half selected this again and over one third indicated that family and personal reasons impacted their decision.

Table 3. Withdrawal Request Reason by Additional Options Breakdown

Reason	You wish to practice medicine in another country		You wish to stop practicing medicine		You have some other reason for voluntarily withdrawing		Total	
	n	%	n	%	n	%	n	%
I am changing to a role that doesn't require me to be registered	46	7.3	3	2.7	7	2.9	56	5.7
I am expected to carry out too many non-core tasks	2	0.3	0	0.0	0	0.0	2	0.2
I am not respected by senior colleagues	2	0.3	0	0.0	1	0.4	3	0.3
I am retiring	2	0.3	97	86.6	9	3.7	108	11.0
I do not have flexible training options	17	2.7	2	1.8	2	0.8	21	2.1
I feel I can earn more abroad	47	7.5	0	0.0	1	0.4	48	4.9
I have family/personal reasons for making a voluntary withdrawal	171	27.2	4	3.6	83	34.0	258	26.2
My employer does not support me in my work	7	1.1	1	0.9	0	0.0	8	0.8
My workplace is understaffed	14	2.2	0	0.0	1	0.4	15	1.5
The quality of training available to me here is poor	10	1.6	0	0.0	1	0.4	11	1.1
The working hours expected of me here are too long	22	3.5	0	0.0	0	0.0	22	2.2
There are limited career progression opportunities available	113	18.0	2	1.8	10	4.1	125	12.7
I have some other reason for making a voluntary withdrawal	175	27.9	3	2.7	129	52.9	307	31.2
Total	628	100.0	112	100.0	244	100.0	984	100.0

Note. To facilitate comparison of values, columns with percentages are shaded with gradations. The darker the tone, the higher the value within the column.

Note. 34 doctors did not provide additional detail and are excluded from this table.

All doctors who voluntarily withdrew had the option to provide additional qualitative detail in an open text box as part of the request and over half of all doctors who voluntarily withdrew provided some detail here (51.6%, $n = 525$). Table 4 below provides an overview of the number of responses by division. Interns were less likely to provide additional comments, while just under

half of doctors on the Specialist Division and over half of doctors on the General Division voluntarily withdrawing provided this detail.

Table 4. Number of Doctors on Each Division Providing Additional Details

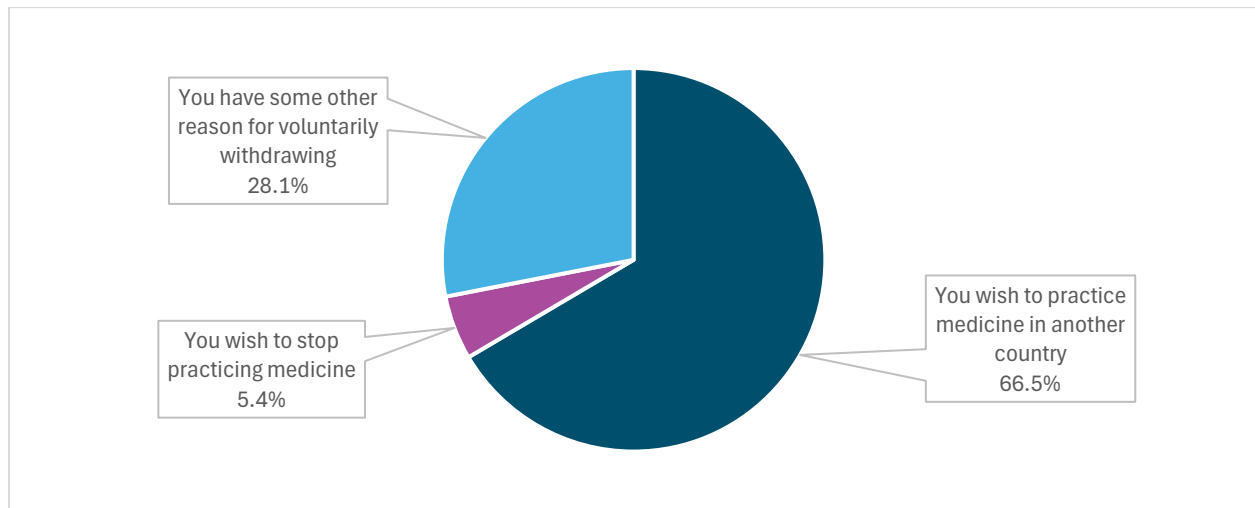
Division	Additional Comments		No Additional Comments		Total
	n	%	n	%	n
Intern	15	27.3	40	72.7	55
Trainee Specialist	16	64.0	9	36.0	25
Supervised	12	63.2	7	36.8	19
General	357	53.6	309	46.4	666
Specialist	125	49.4	128	50.6	253

While some themes are common among doctors on each division, there also are some unique factors that come through depending on the division of registration. A qualitative analysis of this additional detail for each division can be found below.

Doctors who Voluntarily Withdrew from the General Division

The majority of doctors on the General Division stated that they wished to practise medicine abroad (66.5%, $n = 443$) and this comes across very strongly in the themes generated from the qualitative feedback (Figure 7). The themes generated included practising abroad, limited career progression and training opportunities, unfavourable training conditions, poor working conditions, limited job opportunities and economic constraints, and personal or family reasons. Many of the themes are strongly linked and in some cases one theme may be a motivating factor for another. Each theme is discussed individually in detail below.

Figure 7. Primary Reason for Voluntary Withdrawal Request Among Doctors on the General Division



Practising Abroad

Many doctors voluntarily withdrawing from the General Division of the Register were pursuing post-graduate training, fellowships or practising medicine abroad. The locations varied but the most commonly mentioned location by far was the UK, followed by Australia. Some doctors had already been practising abroad for some time, while others were planning relocate temporarily or on a long-term basis.

“I have been working abroad for long time and difficult to maintain registration but in future if I decide to practice in Ireland then I will apply for restoration of registration.”

“I have chosen to voluntarily withdraw from the register as I am currently practicing medicine outside of Ireland. It's my intention to reactivate my registration when I make plans to return and practice in Ireland”

Many doctors were now returning home to practise after working in Ireland for a period of time.

“Dear Council. I am withdrawing from the register because I am moving back to my homeland. I came to work in HSE for experience and a bit of change. I enjoyed the visit and now I am ready to go back home.”

Limited Career Progression and Training Opportunities

Many doctors, especially international medical graduates shared their experiences with limited career progression and training opportunities. This was often very frustrating and disheartening as many of these doctors wanted to stay in Ireland but could not access training despite numerous attempts.

“As an “international medical graduate” it has become increasingly difficult to secure a training position, the job application process is also not transparent and centralised.”

“I am an Irish Medical School Graduate but a non-EU- I wish I had better opportunities and support in the field I am passionate about as my peers do. I care strongly about Ireland and this has definitely been a difficult decision. I hope to come back one day, soon.”

“The time I spent in Ireland was the best time in my life. Lovely people and lovely country. I love HSE hospitals. The only issue that let me to leave Ireland that is training posts are limited and very competitive.”

Unfavourable Training Conditions

A strong motivating factor for pursuing training schemes abroad was the supportive and flexible environments available in comparison to some of the poorer quality options described here. Doctors often characterised training here as inflexible, especially for families with unfavourable hours and rotations, understaffed hospitals, limited senior support and instances where service provision is prioritised and training is reduced to this.

“We found the training schemes to be restrictive and inflexible for families. It’s not appropriate or inclusive to treat parent doctors this way . As a result we have moved abroad to pursue medicine in a country that values the overall well-being of their doctors.”

“My employer was unable to allow me to work my contracted hours. As I have newborn twins it was too difficult to manage a career in Ireland.”

“Training in gynae surgery is poor Hours are long in Ireland - moving to a country that does not require on calls of 24 hours Workplace is understaffed meaning training is reduced to service provision”

Poor Working Conditions

In addition to unfavourable training conditions, working conditions more generally were also a factor impacting doctors who voluntarily withdrew from the Register. Doctors wanted a better work-life balance and shared that the current conditions have a negative impact. In many cases this motivated doctors to seek work abroad, retire early and also practise outside of direct patient care.

“The working conditions in the HSE have taken a toll on me over the last few years and I have taken a position abroad. I may return in the future.”

A small number of doctors also shared instances of bias, and racism that contributed to them having a negative experience in the healthcare system.

“There is prevalent racism in the healthcare fraternity. There is too much patronage which means bad behaviour by white Irish doctors against other races are accepted and no action taken.”

The capacity in the current healthcare system, especially around systems was suggested as a potential threat to patient safety and working under these conditions was another motivating factor for voluntarily withdrawing.

“Irish hospitals need to stop using paper-based systems and if using a computer system it needs to be one system covering all tasks and not 4 different ones from which one is from the year 1973 etc. Low capacity in the hospitals threatens patient safety - the problem is outflow of patients - not enough beds in hospitals and in nursing homes while the population is growing.”

Lack of Job Opportunities and Economic Constraints

Two closely related themes were around doctors from overseas not being able to find work and subsequently struggling with the registration requirement of paying the yearly fee. Many of these doctors were working and applying from abroad, and two of the commonly mentioned countries were Pakistan and Sudan. There was a sense that it was unfair to allow them to join the Register and not support them to secure employment.

“I have been registered with Irish Medical Council for around a year now. Even after applying at multiple jobs from my home country, I am unable to secure a job. Currently, I am living in Pakistan, where I hardly made 5000 Irish pounds in last year. So, it is very difficult for me to pay the yearly retention fee again. Its really sad that I have to voluntarily withdraw my registration but unfortunately, I am forced to do so. Council should also help doctors like me in securing a job.”

These doctors were often very motivated and in some cases shared that they were working to improve their experience and CV before applying for more jobs in the future.

“I was registered for one year with the council. However I was not able to secure a job even though I applied for lots of openings. I will consider joining the register again in the near future with a better CV.”

Doctors working and applying from Sudan were struggling due to the civil unrest in their country, and this often prevented them from paying their fees.

“Due to the war in Sudan I am currently unable to pay the registration fees and I wish to resume the registration once the situations are stable”

Personal or Family Reasons

Many doctors on the General Division shared that they were leaving for personal or family reasons. This was sometimes linked to the previous theme where they needed to go abroad for these reasons. Some doctors shared that they were going on maternity leave and the fees were too high to maintain. This is despite reduced annual retention fee for doctors on maternity leave. Other doctors shared that they were taking temporary breaks for study and in some cases were retiring after spending their life practising medicine.

“I am 66 years old and have been a doctor for 43 years. I’ve done my bit”

Doctors also shared their caring responsibilities for their children, as well as other family members such as their parents which was preventing them from currently practising medicine.

“I have 2 toddlers, that I have to take care of and it is really difficult to find child care. I will be able to join as soon as they start school”

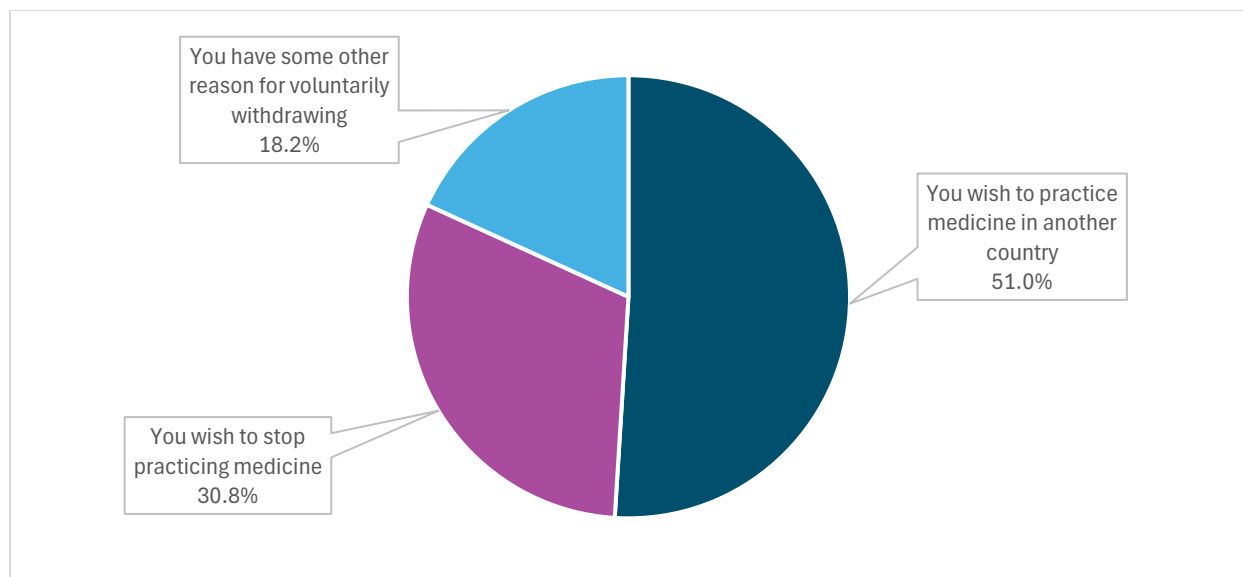
“I am having to care for my parents, which currently crucially impacts my availability to work in Ireland”

Some doctors also shared their own health issues that led to them voluntarily withdrawing until recovered.

Doctors who Voluntarily Withdrew from the Specialist Division

Just over half of specialists wished to practise medicine in another country (51.0%, $n = 129$) while almost one-third wished to stop practising medicine (30.8%, $n = 78$). This came across strongly in the thematic analysis of the additional comments (Figure 8).

Figure 8. Primary Reason for Voluntary Withdrawal Request Among Doctors on the Specialist Division



There were some similar themes among specialists with many practising abroad. Other themes generated which impacted specialists voluntarily withdrawing included personal and family reasons and economic constraints. Each of these themes and their associated sub-themes are discussed in more detail below.

Practising Abroad

There were two sub-themes among doctors on the Specialist Division practising abroad which were professional opportunities and better work conditions. Many specialists were relocating abroad or returning home after a period of working in Ireland. As with doctors on the General Division the UK, followed by Australia were the most commonly cited locations.

Practising Abroad - Professional Opportunities

Many doctors indicated that they were moving abroad to pursue fellowships to further their careers. Beyond this a number of doctors shared that they were unable to get consultant roles here in Ireland and that they had been offered these roles overseas. The process of gaining this employment was also more transparent and favourable abroad.

"I'm living in Australia. My colleagues here are constantly encouraging me to stay long term. Work life is incredible here. I tried to get a consultant post in Ireland with an excellent CV and references as well as a highly sought after fellowship. The process of applying and interviewing for consultant posts in Ireland is arduous, and lacks transparency. I am staying in Australia."

"Offered consultant position overseas, not offered consultant position in Ireland"

Practising Abroad – Better Conditions and Support

A number of doctors were returning home after a period of time or moving to be closer to family. However, more favourable work conditions at home, as opposed to risk of burnout here were shared as an additional incentive to return.

"I am Australian, and am returning to Australia for family reasons. As an additional reason, General Practice in Australia is a much more sustainable career option for me, I worry if I had continued working in Ireland in the long term I would have experienced burn out."

Some doctors had also made the decision to relocate abroad, and in certain cases this was related to more favourable terms of employment.

"I have relocated to the UK to work with the NHS. An important consideration for me was the provision of sick pay for GPs in the NHS if needed. I was disappointed to learn of the lack of provision of sick leave for Irish GPs."

Personal and Family Reasons

Personal and family reasons was a strong theme among specialists who were voluntarily withdrawing from the Register. Three main sub-themes came under personal and family reasons which were temporary leave, retirement and health and wellbeing.

Personal and Family Reasons – Temporary Leave

Several doctors were on maternity leave, sick leave or taking a career break. All of these doctors intended on returning after a period of time off.

“I am taking a career break and will come back later in few years.”

“I am taking 12 months maternity leave due to lack of childcare in my area”

Some doctors also shared that they had caring responsibilities, wanted to spend more time with their family and would not be practising medicine this year as a result.

“taking time to reassess and be with my young children.”

Personal and Family Reasons – Retirement

Many doctors were retiring from medical practise after dedicating their working life to medicine. This was often with a sense of pride.

“I have been on the medical register for 45 years and in general practice for 40 years, I now feel its time to retire.”

“I have dedicated my life to general practice. I feel it is time to retire and begin to live a normal life.”

However, some doctors also shared a sense of apprehension and felt that registration requirements prevented them from continuing to work at a lower level.

“I’m retiring with sadness and a sense of apprehension.”

“I am retiring reluctantly. I love my work/profession and would love to continue clinical work at a lower level, but indemnity insurance is prohibitive if I only wished to work 2 days per week.”

Personal and Family Reasons – Health and Wellbeing

Health issues and wellbeing were other reasons that doctors were voluntarily withdrawing. Some doctors were dealing with health problems including recent cancer diagnoses. Other doctors shared that they were struggling with stress and burnout and in some cases doctors experienced bullying and a toxic culture at work.

“I have become severely burned out and depressed in the course of my work through the pandemic and have grave misgivings over the direction in which general practice in Ireland is going along with long term frustration over the management of, and communication from the HSE areas of responsibility in the primary care system.”

“toxic culture at work, with bullying leading to me having an occupational injury and fear for my team and patients safety.”

Economic Constraints

Finally, although it was not as prominent as some of the other themes there was a sense that fees and additional costs such as insurance were very high and prohibitive, especially if doctors were only practising here some of the time.

“I am primarily based in the UK but usually work a couple of weeks a year in Ireland. The cost of registering plus the difficulty getting indemnity for a short period (Uk now has a national indemnity scheme making it much cheaper) means I lose money by coming to work in Ireland”

Doctors who Voluntarily Withdrew from the Trainee Specialist Division

The themes emerging from doctors in training, either at the intern level or as a trainee specialist were very similar to some of the themes discussed by doctors on the General and Specialist Division. Doctors were often moving abroad for new and different experiences as well as professional opportunities. Many shared their intention to return, however some also shared that there was not enough work-life balance here in Ireland, and working at that level would be unsustainable long term.

Interns

All interns who voluntarily withdrew from the Register, and provided qualitative feedback, were moving abroad, usually to Australia, for experience, to expand their clinical knowledge and to travel. Some shared that they enjoyed their internship and their intention to return.

“I would like to work abroad and gain experience before coming back to Ireland and applying to a scheme. I thoroughly enjoyed my intern year and am looking forward to working as an SHO and also to joining a scheme. However, I am not 100% sure what I want to specialise in yet and I feel I need more experience in order to decide.”

However, one doctor did share that beyond wanting to experience a different healthcare system that the work here was unsustainable, impacted patient safety and did not allow for a good work life balance. Themes that were common to doctors on other divisions discussed above.

“There are a lot of reasons why I have opted to move abroad and work in a different healthcare setting. In my current role, I work more than 100 hours in a week and my team is incredibly short staffed, so I ultimately am forced to do the work of 3 doctors in order to ensure my patients get the care they deserve. I did not feel supported by my other team members. Working like this is not sustainable and I had little time for anything in my life beyond work.”

Trainee Specialists

Many of the trainee specialists were currently working abroad and cited taking a break in training or moving to pursue a fellowship. Some doctors also shared being on leave, which included sick leave and maternity leave and their plans to restore at a later date. Issues with work-life balance also emerged as a motivating factor for leaving the Register.

“We are increasingly burnt out from long hours and shouldering the workload of at least double our numbers. I have no hobbies or interests outside of work since coming to work in Ireland as the EWTD is not respected and mandatory overtime seems to be the pervasive culture. The lack of flexibility will push others away.”

Doctors who Voluntarily Withdrew from the Supervised Division

Doctors voluntarily withdrawing from the Supervised Division shared that they had completed their fellowship or sponsored training and that they were moving home.

“I was doing a fellowship through Royal College of Physicians of Ireland and I finished my 2 years post. Unfortunately as per the rules I have to practice medicine in my country as I was sponsored by them.”

Conclusion

In summary, 1,618 doctors left the Medical Council’s Register in 2023. These doctors were either removed for not renewing their registration or submitted a request to voluntarily withdraw their registration. Doctors who voluntarily withdraw are a rich source of information on the reasons why doctors leave the Register, and the majority of this cohort were leaving as they wished to practise medicine abroad. Of those voluntarily withdrawing, and providing qualitative comments, the most frequently cited destination for these doctors was the UK, followed by Australia.

For queries please contact research@mcirl.ie



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