Medical Workforce Intelligence Report

Comhairle na nDochtúirí Leighis
Medical Council

August 2016

A Report on the 2015 Annual Registration Retention Survey

ACKNOWLEDGEMENTS

This report was prepared by Simon O'Hare, Research, Monitoring and Evaluation Manager at the Medical Council of Ireland.

Philip Brady, Head of Registration, led the Medical Council team that managed the annual application retention process. This is a significant annual undertaking and everyone's contribution to that process is appreciated. Regarding the production of this report, thanks go to Eoin Keehan for providing key administrative data upon which the report relies, Davinia O'Donnell for developing the Annual Retention data capture form, Charla Paul for data visualisation and verification, and to Ailbhe Enright, Niamh Manning, Amanda Lyons and Barbara O'Neill for finalising and launching this report.

Finally, this report could not have been produced without the participation of the 17,571 doctors who retained registration with the Medical Council in 2015.

We hope that through each individual's contribution, this report can help further strengthen the medical workforce in Ireland.

PRESIDENT'S FOREWORD

At the Medical Council patient safety and protection of the public is at the heart of our role.

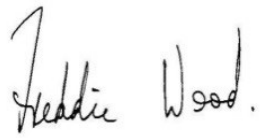
Two vital components of this work include ensuring the highest standards of medical training and education in Ireland and promoting good medical practice while overseeing doctors' continuing professional development.

Although this work is absolutely crucial in contributing to high standards of care, safe and appropriate care requires more than high standards and competent doctors; it requires a well-resourced and well-equipped workforce in order for effective and safe care to be provided to every patient, every day.

That is why I am very pleased to present the fourth *Medical Workforce Intelligence* report, which highlights information collected through our annual registration retention process and gives us a comprehensive insight into the ever-changing medical workforce in Ireland. The information detailed within this report, and the three previous reports before enables us to share vital data on the makeup of the medical workforce to those who need it most, with the fundamental aim of ensuring safe and good a quality care to members of the public.

We are proud to take the lead in providing intelligence to planners, employers and policy makers because without an informed approach to medical workforce planning, a strong health system simply won't be maintained and developed. With this data, we have the power to alert the relevant bodies to potential challenges, shortfalls or deficits in the workforce and in my opinion that really is priceless.

We will continue to monitor the profile, work practices and skills mix of doctors registered in Ireland in order to work effectively with our partner organisations in the health sector to maintain a robust and sustainable medical workforce that responds to a changing healthcare landscape and better enables doctors to fulfil their potential to meet the public's needs.



Prof Freddie Wood
President

CHIEF EXECUTIVE'S FOREWORD

I am very pleased to introduce the fourth Medical Workforce Intelligence Report. This report highlights information gathered by the Medical Council during the annual retention of registration process. Having access to this data enables us to lead a discussion on the future direction of the medical profession from a regulatory perspective in a way that encompasses the importance of a range of factors which contribute to safe, holistic and appropriate healthcare.

2015 saw the highest ever number of doctors on the medical register; this is of course very positive news. However, it must be noted that although it is encouraging to have this number of capable and competent doctors on the register, the significance of other factors cannot be underestimated. We need motivated healthcare teams in the right place at the right time as well as strategic policy frameworks which support and foster the patient-doctor relationship.

I also found it particularly interesting that although males continue to dominate the medical profession as a whole, since we began collating this data, there have been more Irish female graduates entering the medical profession than their male counterparts. The majority of those on the register between the ages of 30 – 44 are female; however from 44 years and on the number of females on the register begins to decrease. Data from our Your Training Counts report also found that 40% of female trainees - or tomorrow's specialists - want to work less than full-time which definitely poses some questions for the health sector. We need to ask ourselves why this is the case and how are we responding to the changing needs and demographic of the workforce?

Another valuable aspect of this report is that it gives a very detailed account of the density of doctors in Ireland by county, including the number of GPs for the under 5s and adults aged 70 and over which is absolutely vital from a planning point of view. The report also provides us with doctor exit rates and therefore complements the Your Training Counts report which gives us an insight into the reasons why certain doctors are planning to leave. As part of our continuous drive to understand more about retention and migration, next year (which will be the fifth Medical Workforce Intelligence Report) we plan to collate and release information on doctors who have withdrawn from the register, to find out why they are making this decision.

At the Medical Council we are in a very unique position which gives us the opportunity to share this high-quality medical workforce intelligence with policy-makers, health planners, representative groups and all those involved in the future planning of Ireland's healthcare service. Through this we aim to enhance the capacity and capability to effectively plan, develop and maintain a strong and sustainable medical workforce which responds to a changing healthcare landscape and better enables doctors to fulfil their potential to meet the public's needs.

Mr William Prasifka
Chief Executive

ABOUT THE MEDICAL COUNCIL

Through the regulation of doctors, the Medical Council enhances patient safety in Ireland. In operation since 1979, it is an independent statutory organisation, charged with fostering and ensuring good medical practice. It ensures high standards of education, training and practice among doctors, and acts in the public interest at all times. The Medical Council is noteworthy among medical regulators worldwide in having a non-medical majority. It comprises of 13 non-medical members and 12 medical members, and has a staff of approximately 70.

The Medical Council's role focuses on four areas:

Maintaining the register of doctors

The Medical Council reviews the qualifications and good standing of all doctors and makes decisions about who can enter the Register of medical practitioners. In December 2015, approximately 20,000 doctors were registered, allowing them to practise medicine in Ireland.

Safeguarding education quality for doctors

The Medical Council is responsible for setting and monitoring standards for education and training throughout the professional life of a doctor: undergraduate medical education, intern and postgraduate training and lifelong learning. It can take action to safeguard quality where standards are not met.

Setting standards for doctors' practice

The Medical Council is the independent body responsible for setting the standards for doctors on matters related to professional conduct and ethics. These standards are the basis for good professional practice and ensure a strong and effective patient-doctor relationship.

Responding to concerns about doctors

Where a patient, their family, employer, team member or any other person has a concern about a doctor's practice, the Medical Council can investigate a complaint. When necessary, it can take appropriate action following its investigation to safeguard the public and support the doctor in maintaining good practice.

Through its work across these four areas, the Medical Council provides leadership to doctors in enhancing good professional practice in the interests of patient safety. You can find out more about the Medical Council at www.medicalcouncil.ie

TABLE OF CONTENTS

MEDICAL WORKFORCE - AT A GLANCE

	Indicator	2012	2013	2014	2015
1	Total number of doctors registered at year-end (annual % change)	18,184 (-3.3%)	18,160 (-0.1%)	19,049 (+4.9%)	20,473 (+7.5%)
2	% retaining registration who are female	40.3%	41.3%	41.2%	41.1%
3	% retaining registration aged 55 years and older	22.5%	21.4%	23.3%	22.7%
4	Specialist Division: General Division: Trainee Specialist Division ratio	3.6: 3.4: 1	3.9: 3.5: 1	4.0: 3.6: 1	4.1: 3.7: 1
5	Exit rate, all doctors	8.0%	6.8%	5.6%	6.4%
6	Exit rate, graduates of Irish medical schools (aged under 30 years)	6.4%	7.9%	5.5%	6.4%
7	Total number of new entrants	+1,256	+1,576	+1,958	+2576
8	Annual % change in number of specialists	+7.4%	+2.8%	+2.6%	+6.6%
9	% of register who are international medical graduates	34.9%	34.3%	35.7%	37.9%
10	% who are clinically inactive doctors	7.2%	4.0%	2.9%	2.9%
11	% practising in Ireland only	74.4%	79.8%	78.9%	77.3%
12	% practising less than full-time	17.0%	16.1%	16.7%	14.7%

INTRODUCTION

KEY POINTS

- The Medical Council oversees standards for good professional practice among doctors in Ireland;
- It establishes and maintains a register of doctors who may, under law, practise medicine in Ireland;
- Each year it invites doctors to retain registration and, since 2012, to complete a survey which gathers up-to-date information about practice arrangements;
- This information is used to develop the Medical Workforce Intelligence Report;
- Medical workforce intelligence underpins the work of the Medical Council in setting and monitoring standards for doctors; and,
- The Medical Council shares this report to enhance understanding of the makeup of the medical workforce and to enhance the capacity and capability of the sector to plan, develop and maintain a strong and sustainable medical workforce that responds to a changing healthcare landscape.

BETTER UNDERSTANDING THE MEDICAL WORKFORCE IN IRELAND

The cornerstone of the Medical Council's work in protecting the public is establishing and maintaining a register of doctors. Under Irish law, nobody can practise medicine in Ireland unless they are registered as a doctor with the Medical Council.

Doctors register in one of five Divisions of the Register, depending on the training they have completed, or are currently undertaking, and their status within the workforce. The five Divisions of the Register are the Trainee Specialist Division (which includes internship registration and trainee specialist registration), the Specialist Division, the General Division, the Supervised Division and the visiting EEA Practitioners Division (See **Figure 1)**. To achieve and maintain registration as a doctor, standards set by the Medical Council must be met and upheld on an ongoing basis. Throughout the year, doctors enter and leave the Medical Council's register.

Figure 1: Structure of the Medical Council Register

Because the Medical Council's register is a valid and complete list of doctors who are permitted under Irish law to practise medicine in the State, it is a comprehensive source of medical workforce intelligence.

Since 2012 the Medical Council posed additional questions to doctors seeking to retain their registration, to allow data to be gathered on their work practices. This data has been analysed against basic information about the doctors' age, gender, graduating medical school and specialist credentials. Under its *Statement of Strategy 2014-2018*, the Medical Council seeks to enhance patient safety through the generation of better research evidence, the provision of information and effective communication with patients, doctors and partner organisations (Strategic Objective 4).[1] This fourth Medical Workforce Intelligence Report is presented in line with that objective.

[1] Medical Council Statement of Strategy 2014 -2018. https://www.medicalcouncil.ie/News-and-Publications/Publications/Strategy-/Statement-of-Strategy-2014-2018/Statement-of-Strategy-2014-2018-.pdf

METHODS

This report is based on analysis of data gathered by the Medical Council through its annual retention of registration process, carried out in June 2015.

Each year, the Medical Council invites registered doctors to retain registration. Doctors seeking retention of registration complete a statutory declaration regarding their current professional standing and pay the appropriate fee.

While most doctors retain registration with the Medical Council each year, a small proportion do not and may voluntarily withdraw from the Register; others are removed or in some cases a doctor's registration is not retained due to unforeseen circumstances such as death or illness.

This report also draws on existing registration data to provide a cross sectional overview of the registered doctors at the end of 2015 and new entrants during 2015. Totals taken at year-end differ slightly from the 'retention of registration' data, which was collected in June. Year-end totals reflect any registration activity – doctors entering or leaving the Register – between June and the end of the year. The annual retention process does not include doctors who have just completed their first year of postgraduate training or 'internship' year, since these doctors apply to the Medical Council to transfer registration rather than retain existing registration. Doctors who hold Visiting EEA registration are similarly not required to apply to retain registration with the Medical Council.

The Register of medical practitioners is a "living" database. Each working day at the Medical Council offices, doctors are entered in the Register, are removed from the Register and transferred between its divisions. Comparison between reports based on registration data must take account of this "living" nature of the database, which means that reports produced can refer to different totals. Nevertheless, overall trends and themes that emerge from analysis of registration data remain generally robust and stable.

For this fourth Medical Workforce Report some comparisons between 2012, 2013, 2014 and 2015 data are presented. However, the Medical Council does not present these as trends and urges caution against over-interpretation of year-on-year changes in information.

PURPOSE OF THIS REPORT

The purpose of this report is to provide intelligence about the medical workforce in Ireland to enhance patient safety and better support good professional practice among doctors.

Strong, sustainable and fair health systems, responsive to the needs and expectations of the public, are essential to the health and wellbeing of a population. Through this report, high quality medical workforce intelligence is shared with policy-makers, health planners, healthcare providers, medical education and training bodies, doctors and their representative groups, and the public and patient representative groups. In this way, the Medical Council aims to enhance the capacity and capability to effectively plan, develop and maintain a strong and sustainable medical workforce that responds to a changing healthcare landscape and better enables doctors to fulfil their potential to meet the public's health needs.

STRUCTURE OF THIS REPORT

The findings of the report are presented under eight thematic headings:

- Profile of Doctors Retained on the Medical Council Register 2015;
- Medical Practitioner Density in Ireland;
- Doctors Exiting the Register 2015;
- Doctors Entering the Register 2015;
- Globalisation of the Medical Practice in Ireland;
- Skill-mix and models of care;
- Doctors' Participation in Practice in Ireland; and,
- Women's Participation in Medical Practice.

PROFILE OF DOCTORS RETAINED ON THE MEDICAL COUNCIL REGISTER 2015

KEY POINTS

- 18,766 doctors were invited to retain registration for the period July 2015 to June 2016;
- 17,571 (94%) of doctors retained registration;
- 23% of doctors who retained registration were aged 55 years and older;
- 31% of specialists were aged 55 years and older;
- The proportion of older doctors varied across specialties - with Public Health Medicine (57%), Occupational Medicine (54%), Psychiatry (38%), General Surgery (35%) and General Practice (34%) among the larger specialities with higher than average proportions of older doctors;
- 62% of doctors retaining registration with the Medical Council graduated from an Irish medical school;
- The Specialist: General: Trainee Specialist Division ratio among doctors retaining registration was 4.1: 3.7: 1; and,
- The three most common areas of practice were General Practice (25%), General (Internal) Medicine (7%), and Anaesthesia (7%).

NUMBER OF DOCTORS REGISTERED

In June 2015 the Medical Council invited 18,766 doctors to retain registration for the period July 2015 to June 2016.

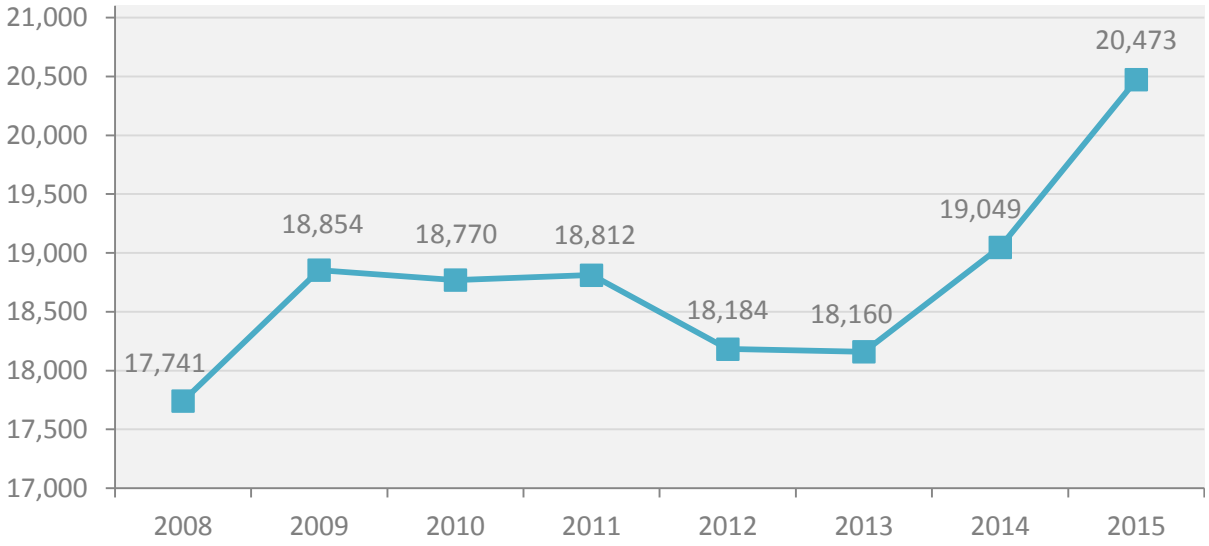
17,571 doctors retained registration, 1,195 doctors did not, constituting an exit rate of 6.4% from the Register.

In total, 16,587 doctors returned non-statutory declaration questions regarding their current practice arrangements (i.e. 98.3% of all that retained registration).

The year-end calculation for the total numbers of doctors registered differs slightly from the 'retention of registration' data, which was collected in June. Year-end totals reflect any registration activity – doctors entering or leaving the Register – between June and the end of the year.

At the year-end 2015, 20,473 doctors were registered with the Medical Council. The trend in total number of doctors registered at year-end for the last eight years is shown in **Figure 2**.

Figure 2: Trend in total number of doctors registered at year end, 2008-2015



GENDER AND AGE CHARACTERISTICS OF DOCTORS RETAINED ON THE REGISTER

Table 1: Gender and age profile of doctors retained in the Register, 2015

Characteristic	%
Gender	
Female	41.1%
Male	58.9%
Age Category	
Under 25	0.1%
25-34	25.6%
35-44	28.2%
45-54	23.4%
55-64	15.7%
65 and over	7.0%

Figure 3: Gender of doctors retained in the Register, 2015

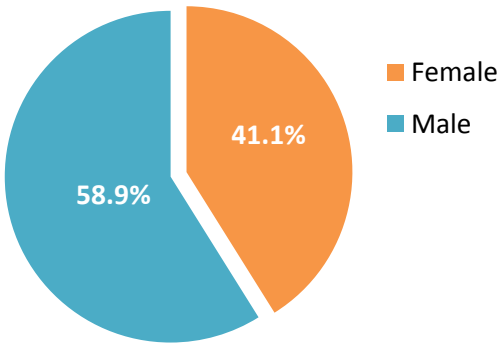


Figure 4: Age profile of doctors retained in the Register, 2015

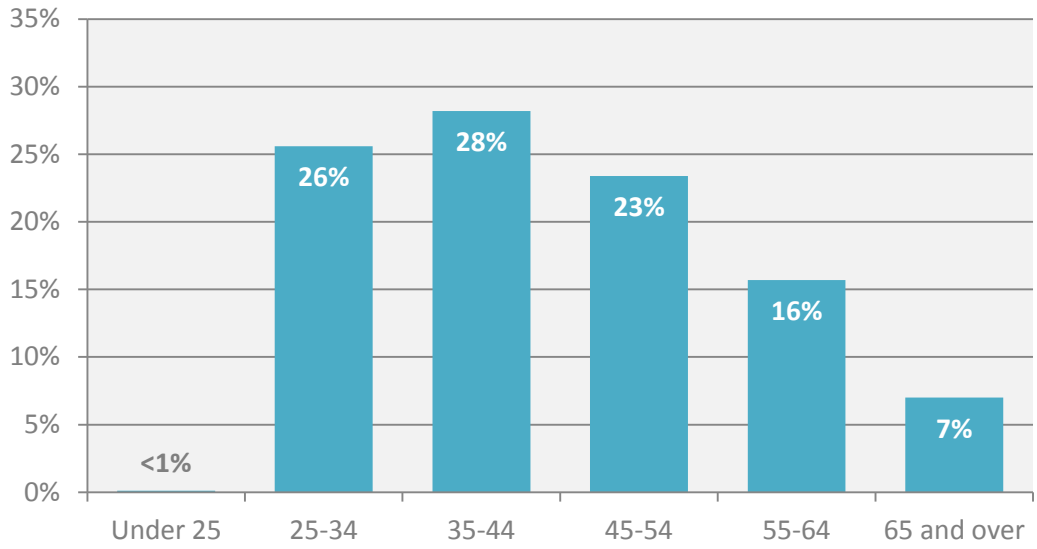


Figure 5: Population pyramid, all doctors retained in the Register, 2015

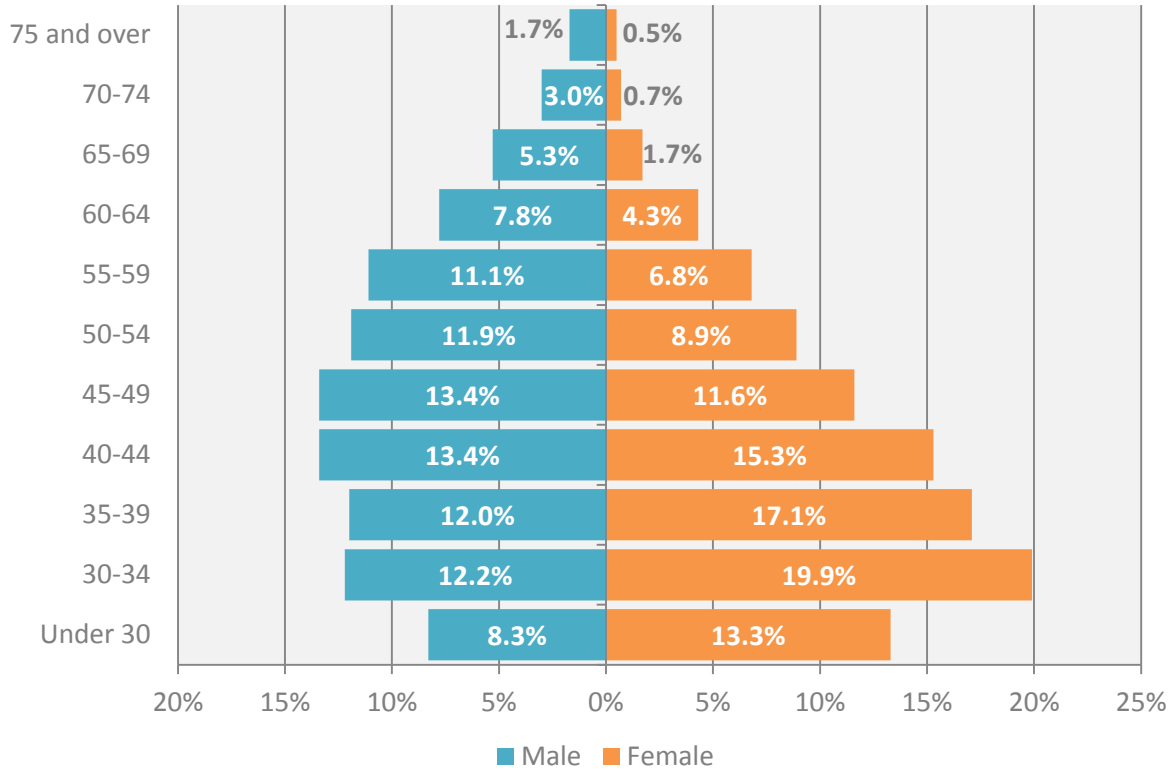


Figure 6: Population pyramid, all doctors who graduated from Irish medical schools (Basic Medical Qualification) retained in the Register, 2015

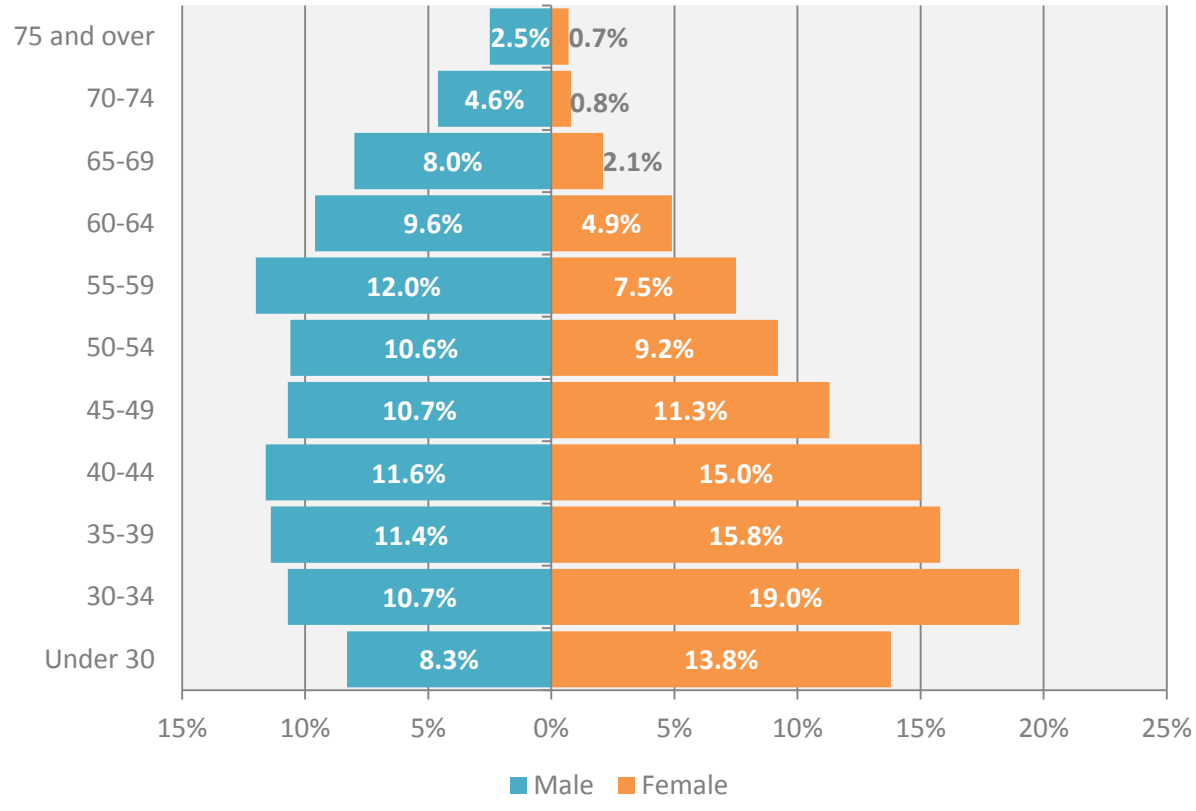


Figure 7: Comparing numbers of doctors within age groups, by gender, for all Irish qualified doctors retained in the Register 2015

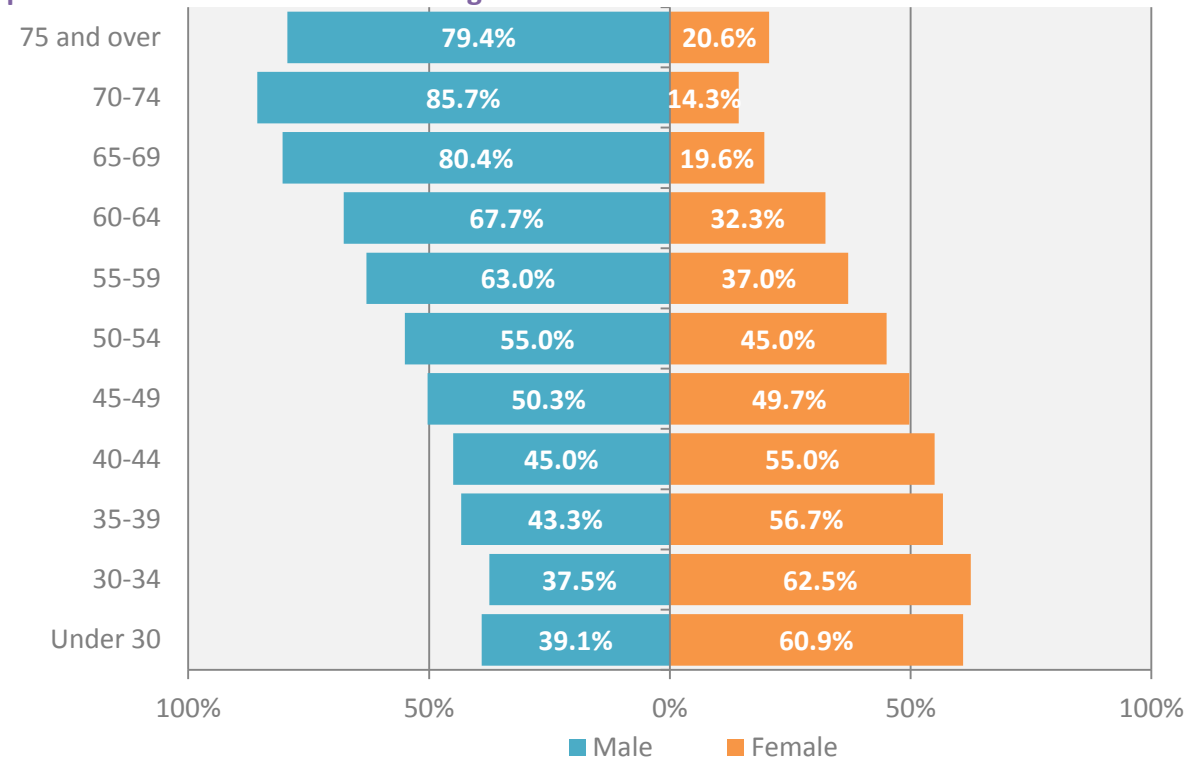


Table 2: Proportions of doctors aged 55 and over by specialty*

Specialty	No. of specialists who are 55 and over	% of speciality 55 and over
Anaesthesia	169	28.2%
Cardiology	25	23.1%
Cardiothoracic Surgery	5	11.9%
Chemical Pathology	4	36.4%
Child and Adolescent Psychiatry	33	27.3%
Clinical Genetics	4	66.7%
Clinical Neurophysiology	2	20.0%
Clinical Pharmacology and Therapeutics	2	25.0%
Dermatology	14	21.9%
Emergency Medicine	18	17.8%
Endocrinology and Diabetes Mellitus	4	7.4%
Gastroenterology	21	28.8%
General (Internal) Medicine	80	20.7%
General Practice	1072	34.2%
General Surgery	111	35.2%
Genito-Urinary Medicine	3	42.9%
Geriatric Medicine	14	22.2%
Haematology	0	0.0%
Haematology (Clinical and Laboratory)	22	28.6%
Histopathology	62	33.3%
Immunology (Clinical and Laboratory)	2	22.2%
Infectious Diseases	1	5.9%
Medical Oncology	10	17.5%

Specialty (cont'd)	No. of specialists who are 55 and over	% of speciality 55 and over
Microbiology	26	31.7%
Nephrology	9	23.1%
Neurology	9	14.3%
Neuropathology	3	60.0%
Neurosurgery	9	34.6%
Obstetrics and Gynaecology	87	33.5%
Occupational Medicine	47	54.0%
Ophthalmic Surgery	25	32.5%
Ophthalmology	44	32.6%
Oral and Maxillo-Facial Surgery	7	46.7%
Otolaryngology	28	32.2%
Paediatric Cardiology	2	50.0%
Paediatric Surgery	6	35.3%
Paediatrics	77	23.8%
Palliative Medicine	11	22.9%
Pharmaceutical Medicine	4	40.0%
Plastic, Reconstructive and Aesthetic Surgery	18	27.3%
Psychiatry	162	38.2%
Psychiatry of Learning Disability	12	54.5%
Psychiatry of Old Age	11	20.8%
Public Health Medicine	56	57.1%
Radiation Oncology	16	32.0%
Radiology	97	26.5%
Rehabilitation Medicine	3	23.1%
Respiratory Medicine	25	41.0%
Rheumatology	13	31.0%
Sports and Exercise Medicine	9	39.1%
Trauma and Orthopaedic Surgery	61	31.4%
Urology	22	32.4%

**Specialties with less than average proportions of doctors aged 55+ within them are highlighted in green;*

Specialities with higher than average proportions of doctors aged 55+ within them are highlighted in orange.

WORLD REGION OF GRADUATION OF REGISTERED DOCTORS

Figure 8: World region[2] of graduation (Basic Medical Qualification) for doctors who retained registration, 2015

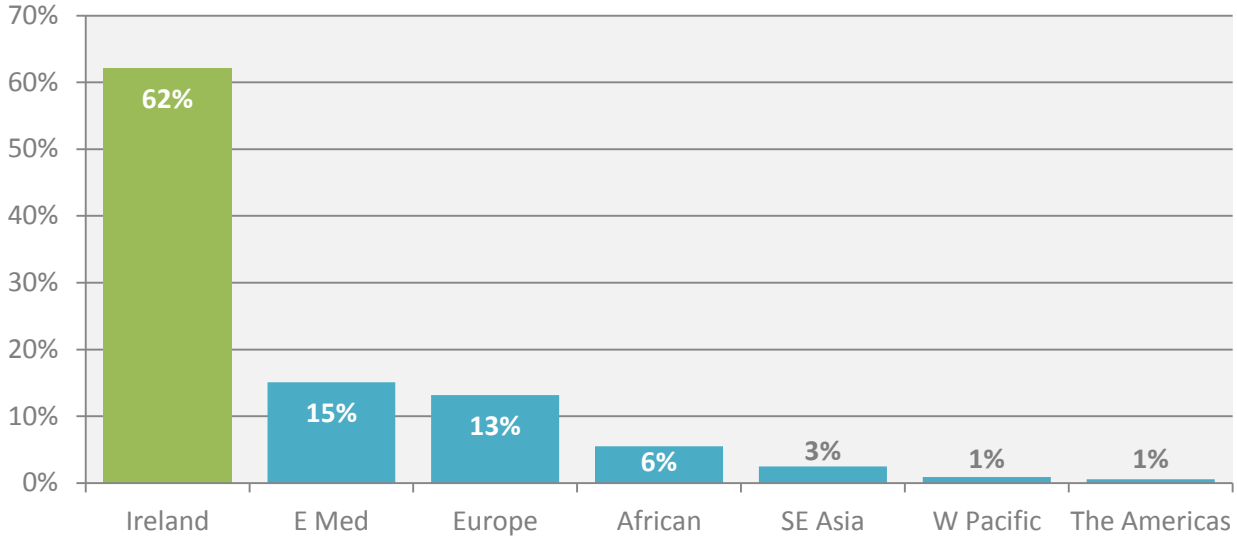
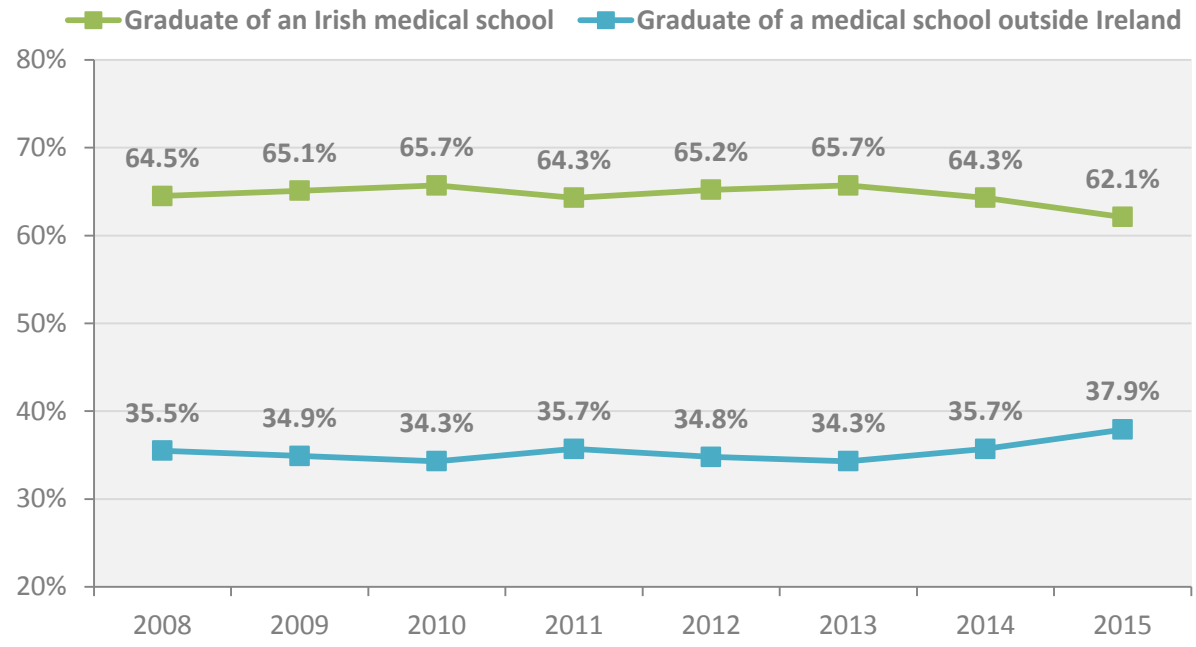


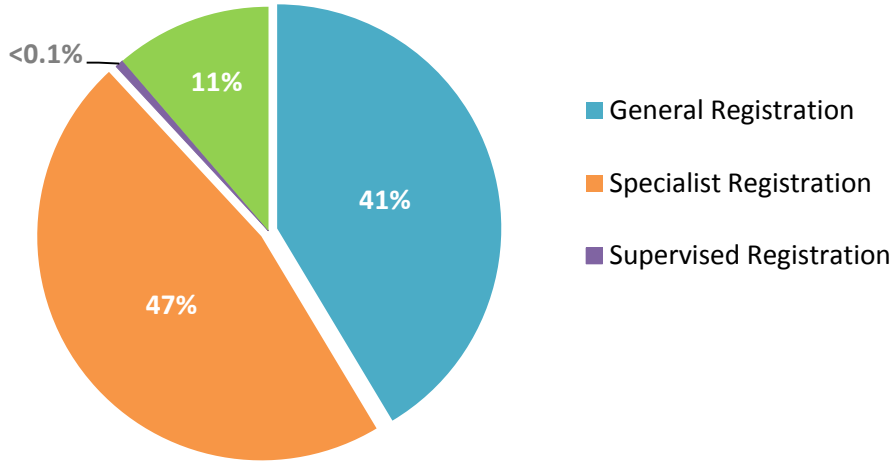
Figure 9: Trend in proportion of doctors by country of qualification (2008-2015)



[2] This report uses World Health Organisation world region classification which can be found here: http://www.who.int/about/regions/en/index.html

DIVISION STATUS OF DOCTORS ON THE REGISTER

Figure 10: Division of registration for doctors who retained registration, 2015



SPECIALTY AREAS OF DOCTORS ON THE REGISTER

Table 3: Area of practice* for doctors who retained registration, 2015

Area of practice	N	%
Anaesthesia	1173	6.9%
Emergency Medicine	712	4.2%
General Practice	4479	26.2%
Medicine	3570	20.9%
Obstetrics and Gynaecology	695	4.1%
Psychiatry	1312	7.7%
Occupational Medicine	151	0.9%
Ophthalmology**	176	1.0%
Paediatrics	952	5.6%
Pathology	583	3.4%
Public Health Medicine	254	1.5%
Radiology	640	3.7%
Sports and Exercise Medicine	40	0.2%
Surgery	2354	13.8%
Total	**17091**	**100%**

**Registered doctors are asked to identify one area of practice so total equals total number of respondents. 97.3% of doctors retaining registration responded to this question.*

*** Ophthalmic surgeons are included in the "Surgery" Area of Practice*

Table 4: Recognised specialisations of Specialist Division doctors retaining registration, 2015

Specialism	N	%
Anaesthesia	600	6.6%
Cardiology	133	1.5%
Cardiothoracic Surgery	41	0.5%
Chemical Pathology	11	0.1%
Child and Adolescent Psychiatry	125	1.4%
Clinical Genetics	8	0.1%
Clinical Neurophysiology	12	0.1%
Clinical Pharmacology and Therapeutics	14	0.2%
Dermatology	65	0.7%
Emergency Medicine	105	1.2%
Endocrinology and Diabetes Mellitus	88	1.0%
Gastroenterology	130	1.4%
General (Internal) Medicine	678	7.5%
General Practice	3179	35.1%
General Surgery	319	3.5%
Genito-Urinary Medicine	9	0.1%
Geriatric Medicine	112	1.2%
Haematology	6	0.1%
Haematology (Clinical and Laboratory)	80	0.9%
Histopathology	189	2.1%
Immunology (Clinical and Laboratory)	10	0.1%
Infectious Diseases	31	0.3%
Medical Oncology	59	0.7%
Microbiology	85	0.9%
Nephrology	58	0.6%
Neurology	69	0.8%
Neuropathology	6	0.1%
Neurosurgery	26	0.3%
Obstetrics and Gynaecology	260	2.9%
Occupational Medicine	102	1.1%
Ophthalmic Surgery	108	1.2%
Ophthalmology	150	1.7%
Oral and Maxillo-Facial Surgery	15	0.2%
Otolaryngology	87	1.0%
Paediatric Cardiology	4	0.0%
Paediatric Surgery	18	0.2%
Paediatrics	328	3.6%
Palliative Medicine	48	0.5%
Pharmaceutical Medicine	11	0.1%
Plastic, Reconstructive and Aesthetic Surgery	66	0.7%
Psychiatry	488	5.4%
Psychiatry of Learning Disability	33	0.4%
Psychiatry of Old Age	83	0.9%
Public Health Medicine	107	1.2%
Radiation Oncology	51	0.6%
Radiology	366	4.0%

Specialism (cont'd)	N	%
Rehabilitation Medicine	15	0.2%
Respiratory Medicine	114	1.3%
Rheumatology	67	0.7%
Sports and Exercise Medicine	28	0.3%
Trauma and Orthopaedic Surgery	194	2.1%
Tropical Medicine	1	0.0%
Urology	68	0.8%

**Registered doctors may have more than one specialty so occurrences exceed total number of specialists.*

MEDICAL PRACTITIONER DENSITY IN IRELAND

KEY POINTS

- At the end of 2015 there were 441.7 doctors for every 100,000 people in Ireland;
- There were 379.1 specialists, who retained registration in 2015, per 100,000 population;
- Taking only those who retained registration and were working only in Ireland, there were 285.2 specialists per 100,000 population;
- Areas of practice with the highest density of specialists were General Practice (with 68.6 specialists per 100,000 population), General Internal Medicine (14.6), Anaesthesia (12.9), Psychiatry (10.5) and Radiology (7.9);
- Estimates for licensed to practise and professionally active doctors in Ireland are compared with data from OECD countries; and,
- The density of General Practitioners varied significantly between counties. Galway, Westmeath and Waterford had the highest density of General Practitioners per 100,000 of the population with Meath, Kilkenny and Leitrim having the lowest.

DENSITY OF MEDICAL PRACTITIONERS

Table 5: General & specialty-specific estimates of medical practitioner density in Ireland[3]

Specialty Area	Per 100,000 population – all doctors	Per 100,000 population – doctors who practise only in Ireland
Density of medical practitioners, year-end 2015	441.7	-
Density of retained medical practitioners 2015	379.1	285.2
Density of retained specialists, by specialty 2015		
Anaesthesia	12.9	9.7
Cardiology	2.9	2.1
Cardiothoracic Surgery	0.9	0.5
Chemical Pathology	0.2	0.2
Child and Adolescent Psychiatry	2.7	2.5
Clinical Genetics	0.2	0.1
Clinical Neurophysiology	0.3	0.3
Clinical Pharmacology and Therapeutics	0.3	0.2
Dermatology	1.4	1.2
Emergency Medicine	2.3	1.7
Endocrinology and Diabetes Mellitus	1.9	1.3
Gastroenterology	2.8	2.0
General (Internal) Medicine	14.6	11.0
General Practice	68.6	63.1
General Surgery	6.9	4.9
Genito-Urinary Medicine	0.2	0.2
Geriatric Medicine	2.4	2.2
Haematology	0.1	0.1
Haematology (Clinical and Laboratory)	1.7	1.4
Histopathology	4.1	2.9
Immunology (Clinical and Laboratory)	0.2	0.1
Infectious Diseases	0.7	0.5
Medical Oncology	1.3	1.0
Microbiology	1.8	1.4
Nephrology	1.3	0.8
Neurology	1.5	1.2
Neuropathology	0.1	0.1
Neurosurgery	0.6	0.4
Obstetrics and Gynaecology	5.6	4.1
Occupational Medicine	2.2	1.7
Ophthalmic Surgery	2.3	1.7
Ophthalmology	3.2	2.3
Oral and Maxillo-Facial Surgery	0.3	0.2
Otolaryngology	1.9	1.3
Paediatric Cardiology	0.1	0.1
Paediatric Surgery	0.4	0.3
Paediatrics	7.1	4.8
Palliative Medicine	1.0	0.9

[3] based on estimates of the population of Ireland in 2015 - taken from: http://www.cso.ie/en/releasesandpublications/er/pme/populationandmigrationestimatesapril2015/

Specialty Area (cont'd)	Per 100,000 population – all retained	Per 100,000 population – doctors who practise only in Ireland
Pharmaceutical Medicine	0.2	0.2
Plastic, Reconstructive and Aesthetic Surgery	1.4	0.8
Psychiatry	10.5	8.8
Psychiatry of Learning Disability	0.7	0.7
Psychiatry of Old Age	1.8	1.6
Public Health Medicine	2.3	2.0
Radiation Oncology	1.1	0.8
Radiology	7.9	5.8
Rehabilitation Medicine	0.3	0.3
Respiratory Medicine	2.5	2.0
Rheumatology	1.4	1.2
Sports and Exercise Medicine	0.6	0.5
Trauma and Orthopaedic Surgery	4.2	3.3
Tropical Medicine	0.0	0.0
Urology	1.5	1.0

Table 6: Estimates of medical practitioner density in Ireland by area of practice, 2015

Area of practice	Per 100,000 population – all retained doctors*	Per 100,000 population– retained doctors practising only in Ireland**
Anaesthesia	25.3	18.7
Emergency Medicine	15.4	10.1
General Practice	96.6	82.4
Medicine	77.0	57.3
Obstetrics and Gynaecology	15.0	10.8
Psychiatry	28.3	23.3
Occupational Medicine	3.3	2.4
Ophthalmology	3.8	2.9
Paediatrics	20.5	15.5
Pathology	12.6	9.5
Public Health Medicine	5.5	4.7
Radiology	13.8	9.2
Sports and Exercise Medicine	0.9	0.6
Surgery	50.8	34.3
Total	**368.7**	**281.6**

**All doctors who retained registration*
*** Estimate of doctors who retained registration and who are currently in practice in Ireland only.*

Table 7: Estimates* of medical practitioner density in Ireland by county, 2015[4]**

County	Density of all doctors who retained registration per 100,000 population	Density of GP specialists that retained registration per 100,000 population	Density of specialists that retained registration per 100,000 population
Carlow	91	58	61
Cavan	298	45	113
Clare	91	47	60
Cork	280	61	145
Donegal	216	60	111
Dublin	393	55	195
Galway	382	68	187
Kerry	222	58	110
Kildare	121	41	63
Kilkenny	243	37	102
Laois	207	51	93
Leitrim	75	34	44
Limerick	329	61	155
Longford	72	44	44
Louth	312	54	147
Mayo	226	56	95
Meath	102	38	56
Monaghan	91	40	57
Offaly	240	44	103
Roscommon	128	55	76
Sligo	453	56	188
Tipperary	172	52	77
Waterford	362	61	178
Westmeath	283	61	121
Wexford	142	43	67
Wicklow	90	45	53
Total	274	54	134

**Based on a response rate of 95% of all retained doctors who worked in Ireland*
***Population data is from preliminary 2016 census figures, available here:*
http://www.cso.ie/en/statistics/population/populationofeachprovincecountyandcity2011/

Data highlighted in orange denotes counties in which doctor density was in the lowest 20% of all counties.
Data highlighted in green denotes counties in which doctor density was in the highest 20% of all counties.

[4] Only doctors who retained registration and who worked in Ireland were included in doctor density calculations. Whole Time Equivalents (WTE) were estimated using data collected on doctors' practice arrangements; with each doctor who worked less than full-time being counted as 0.5 of a WTE.

Table 8: Estimates* of medical practitioner density[5] in Ireland by county, ** for the under 5s and adults aged 70 and over, 2015

County	Density of all doctors who retained registration per 10,000 population		Density of GP specialists that retained registration per 10,000 population	
	For children under 5	For adults 70 and over	For children under 5	For adults 70 and over
Carlow	119	123	76	79
Cavan	367	368	56	56
Clare	121	113	63	58
Cork	377	358	82	78
Donegal	270	237	75	66
Dublin	567	553	80	78
Galway	521	502	92	89
Kerry	327	233	86	61
Kildare	142	261	48	89
Kilkenny	321	307	49	47
Laois	232	322	58	80
Leitrim	98	73	45	33
Limerick	453	412	84	76
Longford	91	91	56	55
Louth	385	446	67	77
Mayo	320	218	80	54
Meath	113	190	42	71
Monaghan	114	109	50	48
Offaly	301	310	54	56
Roscommon	178	126	76	54
Sligo	644	476	79	59
Tipperary	231	190	70	57
Waterford	488	423	82	71
Westmeath	363	373	78	80
Wexford	184	174	56	53
Wicklow	111	132	56	66

**Based on a response rate of 95% of all retained doctors who worked in Ireland*
***Population data is from 2011 census, available here:*
http://www.cso.ie/en/statistics/population/populationofeachprovincecountyandcity2011/

Data highlighted in orange denotes counties in which doctor density was in the lowest 20% of all counties.
Data highlighted in green denotes counties in which doctor density was in the highest 20% of all counties.

[5] Only doctors who retained registration and who worked in Ireland were included in doctor density calculations. Whole Time Equivalents (WTE) were estimated using data collected on doctors' practice arrangements; with each doctor who worked less than full-time being counted as 0.5 of a WTE.

Figure 11: Density of GP specialists who retained registration per 100,000 population

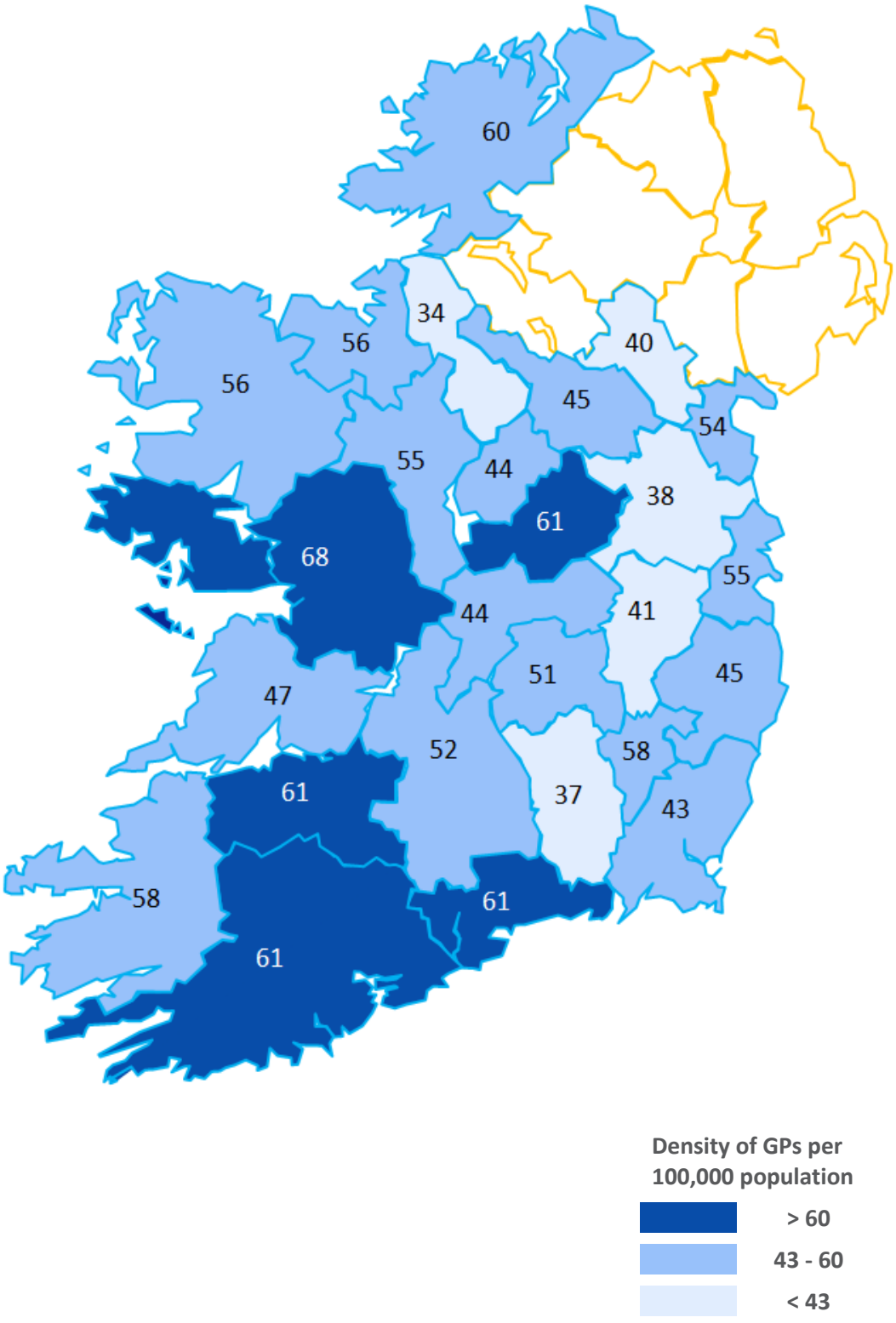


Figure 12: Density of all specialists who retained registration per 100,000 population

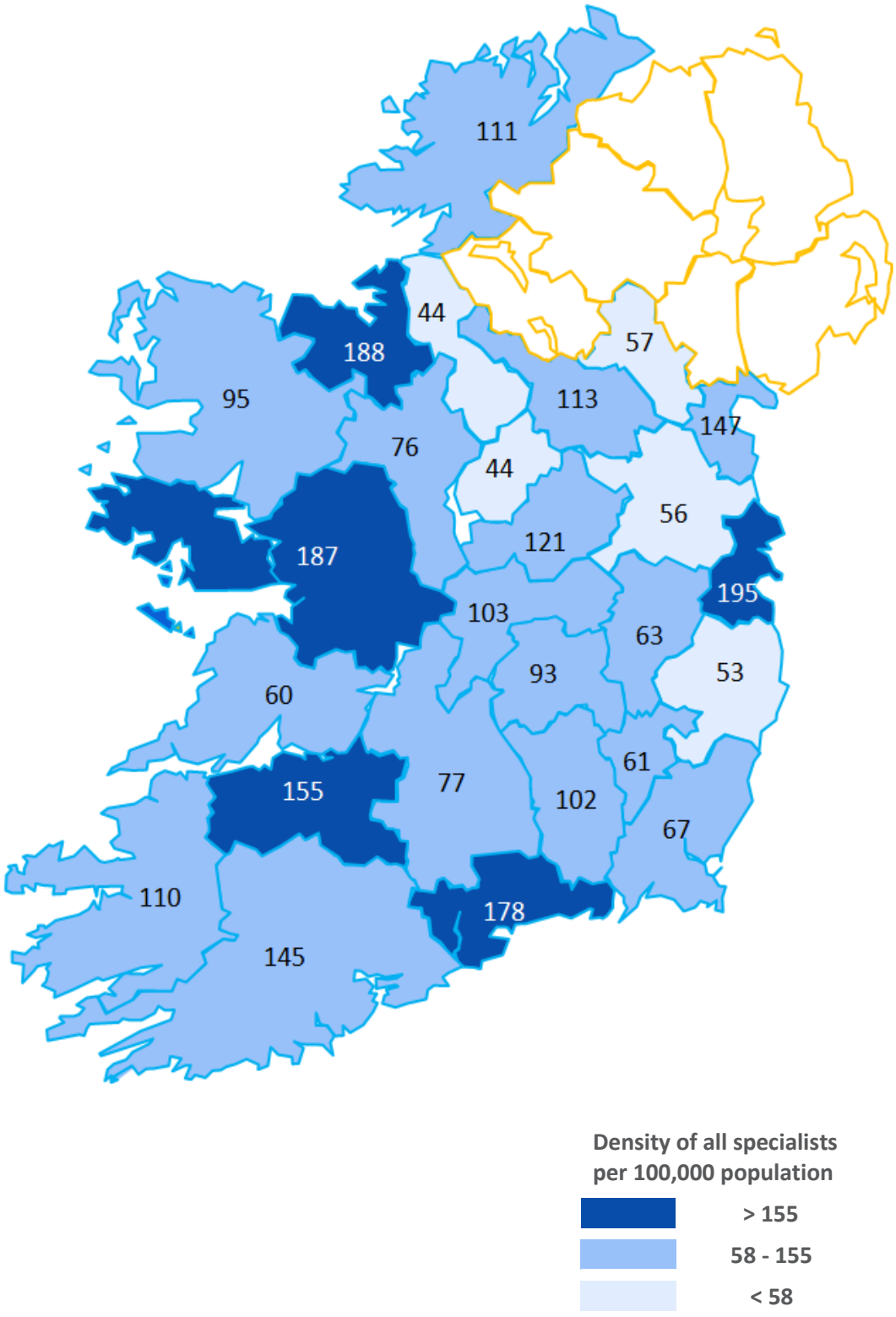


Table 9: Estimates of density of licensed to practise[6] doctors from OECD countries, 2015.

Country	Density per 1000 population of all licensed to practise physicians
Chile	2.15
Korea	2.67*
Canada	2.78*
United States	3.3**
New Zealand	3.31
United Kingdom	3.62
Poland	3.72*
Finland	3.98*
Australia	4.21*
Israel	4.24
Netherlands	4.27*
Ireland	4.42
Luxembourg	4.42
Portugal	4.43*
Estonia	4.79*
Spain	5.13*
Belgium	5.34
Hungary	5.36*
Latvia	5.66*
Norway	5.82*
Denmark	5.87**
Germany	5.92*
Sweden	6.28*
Greece	6.32*
Italy	6.33*
Iceland	7.49

***2013 data*
**2014 data*

[6] Definition of 'licensed to practise doctors' and values for OECD Counties other than Ireland were taken from http://stats.oecd.org/
Licensed to practise physicians are practising and other (non-practising) physicians who are registered and entitled to practise as health care professionals, including:

- Physicians who provide services directly to patients;
- Physicians for whom their medical education is a prerequisite for the execution of the job;
- Physicians for whom their medical education is NOT a prerequisite for the execution of the job;
- Physicians licensed to practise but who due to various reasons are not economically active (e.g. unemployed or retired); and,
- Physicians working abroad.

Table 10: Estimates of density of professionally active[7] doctors from OECD countries 2015.

Country	Density per 1000 population of all professionally active physicians
Turkey	1.76*
Japan	2.42*
Poland	2.51*
Canada	2.61*
United States	2.7**
Slovenia	2.79*
New Zealand	3.03
Israel	3.13
Luxembourg	3.15
Ireland	3.16
France	3.35
Netherlands	3.35*
Latvia	3.38*
Finland	3.39*
Slovak Republic	3.43*
Australia	3.64*
Iceland	3.8
Denmark	3.92**
Spain	4.1*
Switzerland	4.19*
Italy	4.22*
Sweden	4.34**
Germany	4.49*
Norway	5.06*

***2013 data*
**2014 data*

[7] Definition of 'professionally active physicians' and data for OECD countries was taken from http://stats.oecd.org/
Inclusion - Physicians who provide services directly to patients - Physicians working in administration and management positions requiring a medical education - Physicians conducting research into human disorders and illness and preventive and curative methods - Physicians participating in the development and implementation of health promotion and public health laws and regulations - Physicians preparing scientific papers and reports. Exclusion - Dentists and stomatologists/dental surgeons - Physicians who hold a post / job under which medical education is not required - Unemployed physicians and retired physicians - Physician working abroad (there are variations in how countries interpret these conditions)

DOCTORS EXITING THE REGISTER 2015

KEY POINTS

- 6.4% of doctors exited the Register at the time of the annual retention process in 2015; the exit rate for graduates of Irish medical schools was 4.4%;
- The exit rate for males was higher than that for females (6.7% compared to 5.9%);
- Of the under 65s, exit rates were higher among younger doctors - with an exit rate of 6.4% for doctors aged 25-34 years who were graduates of Irish medical schools;
- Among graduates of Irish medical schools aged 25-29, there was a relative increase of 16% in the exit rate between 2014 and 2015;
- Across the divisions of the Register, the highest exit rate was observed in the General Division (10.5%); and,
- A relatively low exit rate was observed among doctors registered in the Specialist Division (3.7%). However, a higher than average exit rate was observed among some specialties including Otolaryngology (9.4%) and Obstetrics and Gynaecology (7.5%).

CHARACTERISTICS OF DOCTORS EXITING THE REGISTER

Table 11: Exit rate 2015, across key demographic characteristics

Characteristic	Exit Rate (all doctors)	Exit Rate (graduates of Irish medical schools)
All doctors	6.4%	4.4 %
Gender		
Male	6.7%	4.7%
Female	5.9%	4.1%
Age category		
Under 25	6.3%	8.3%
25-34	8.7%	6.4%
35-44	6.4%	3.5%
45-54	3.2%	1.1%
55-64	4.5%	2.6%
65 and over	11.6%	10.9%

Figure 13: Exit rate 2015 per age group (all doctors)

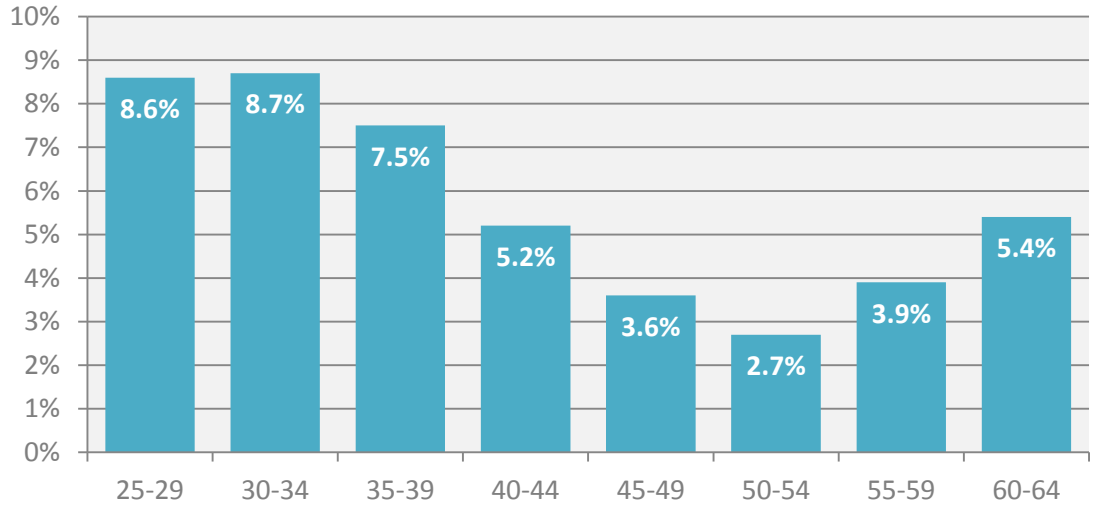


Figure 14: Exit rate 2015 per age group (graduates from Irish medical schools)

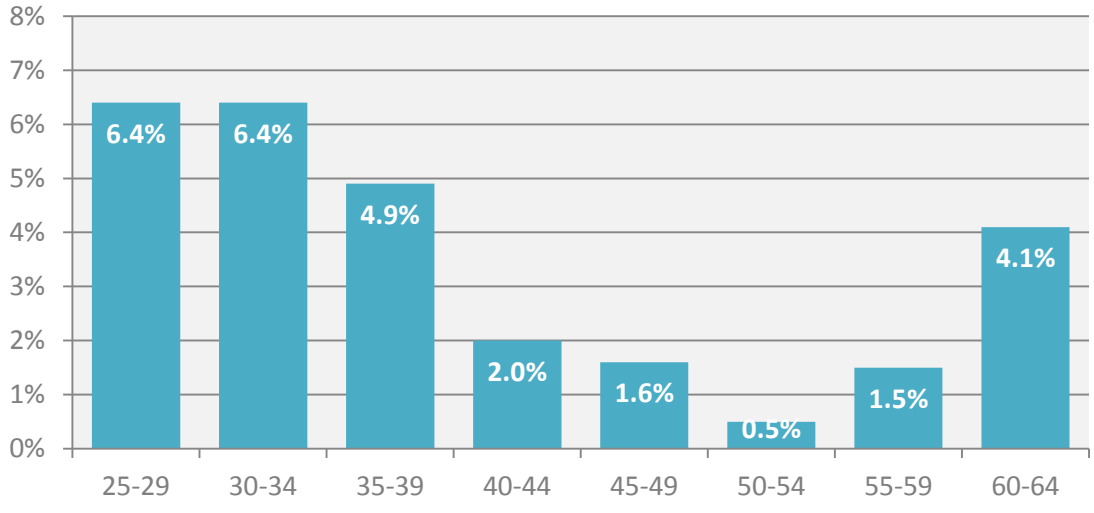


Figure 15: Exit rates for 2014 and 2015 per age group (graduates of Irish medical schools)

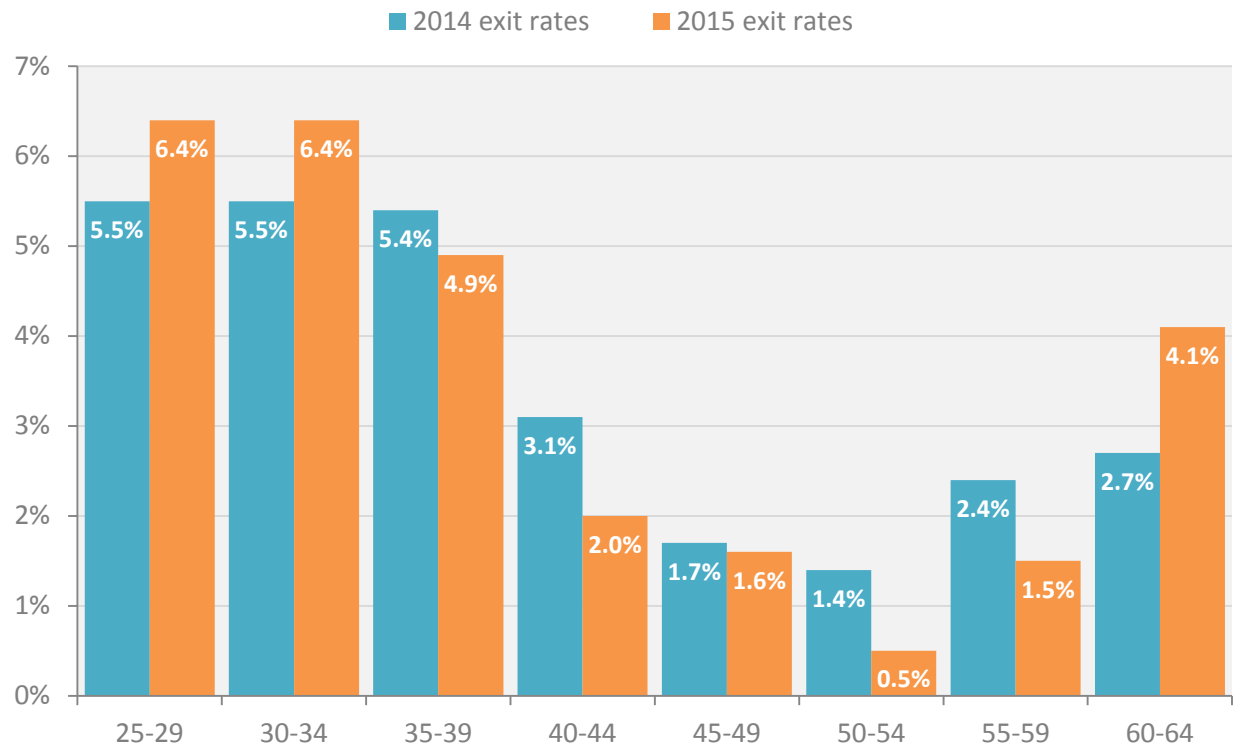
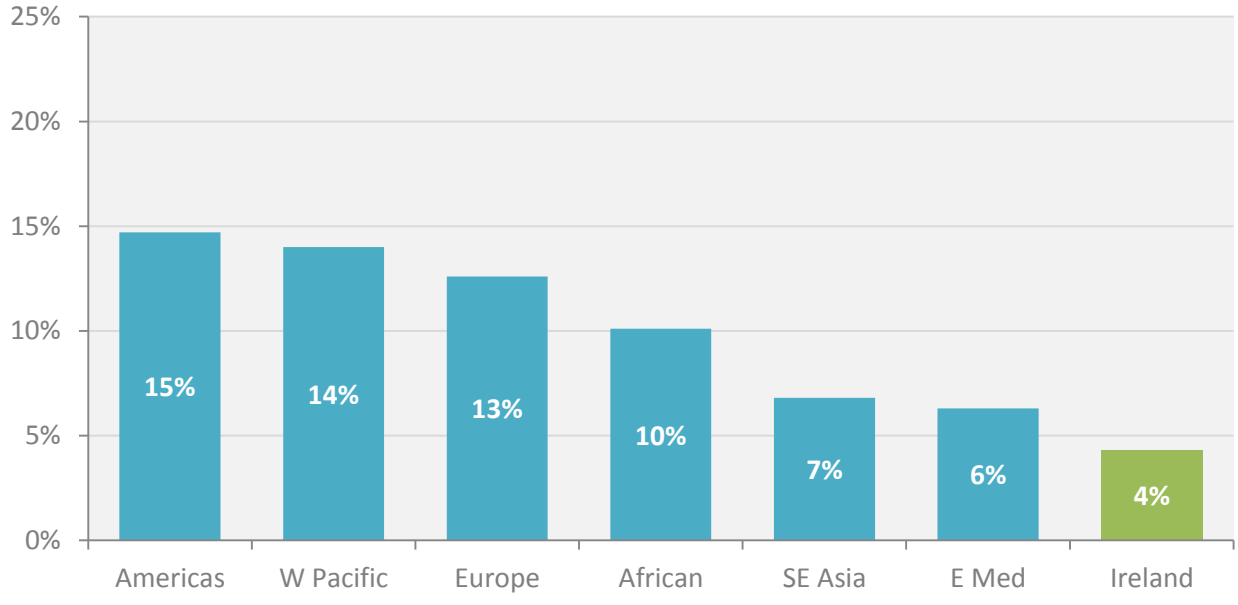


Figure 16: Exit rate 2015 by world region of basic medical qualification



EXIT RATES AND DIVISION OF REGISTRATION

Figure 17: Exit rate 2015 by registration division

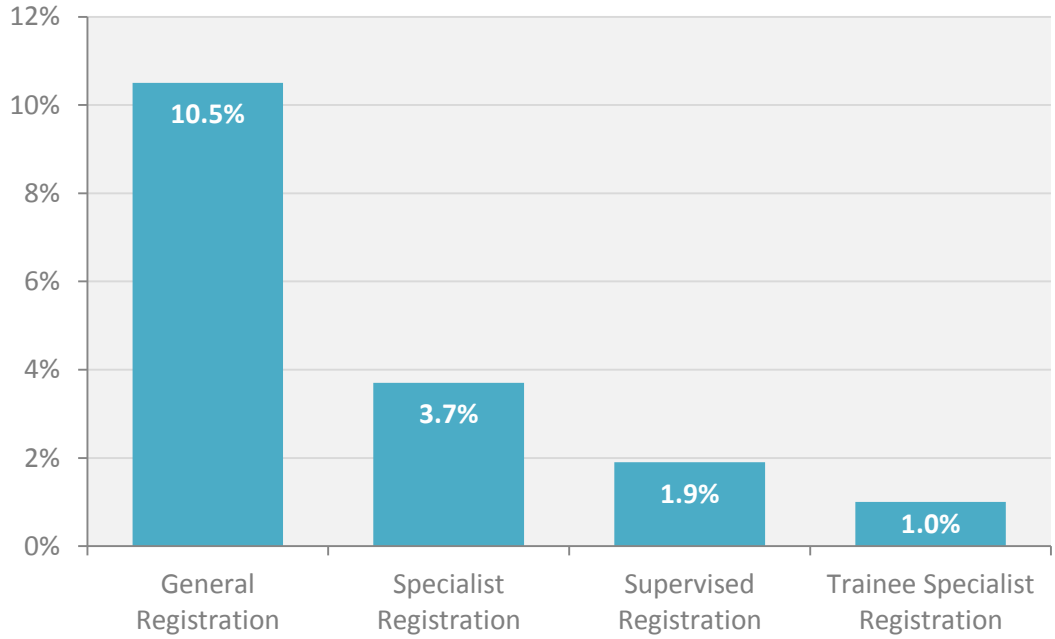


Table 12: Exit rate by specialty, specialists only*

Specialty	No. of doctors that exited the register	% of speciality who exited the register in 2015
Anaesthesia	29	4.6%
Cardiology	6	5.3%
Child and Adolescent Psychiatry	8	6.2%
General (Internal) Medicine	15	3.7%
General Practice	75	2.3%
General Surgery	10	3.1%
Histopathology	8	4.1%
Neurology	5	7.4%
Obstetrics and Gynaecology	21	7.5%
Ophthalmology	6	4.3%
Otolaryngology	9	9.4%
Paediatrics	21	6.1%
Psychiatry	18	4.1%
Radiology	17	4.4%
Urology	5	6.8%

**This table is limited to specialties in which ≥5 doctors exited.*

DOCTORS ENTERING THE REGISTER 2015

Key points

- During 2015, 2,576 doctors entered the Register for the first time;
- Over half of new entrants (51%) were under 30;
- During 2015, 737 doctors entered the Specialist Division for the first time, bringing the proportion of doctors registered with the Medical Council at the year-end who were specialist to 40.9%;
- 61.9% of new specialists were aged 40 or under - the age profile of new specialists varied across specialties;
- 52.8% of new specialists were graduates of an Irish medical school and 53.4% of new specialists had completed an Irish training programme;
- The relative growth in the number of specialists from 2014-2015 was 6% and varied by specialty; and,
- Eight specialties experienced a relative reduction in the number of specialists who retained registration in 2015.

PROFILE OF DOCTORS ENTERING THE REGISTER

During 2015, 2576 doctors entered the Register for the first time.

Figure 18: Gender of doctors entering the Register in 2015

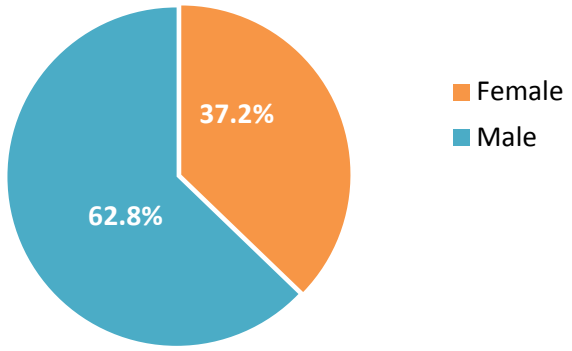


Figure 19: Age of doctors entering the Register in 2015

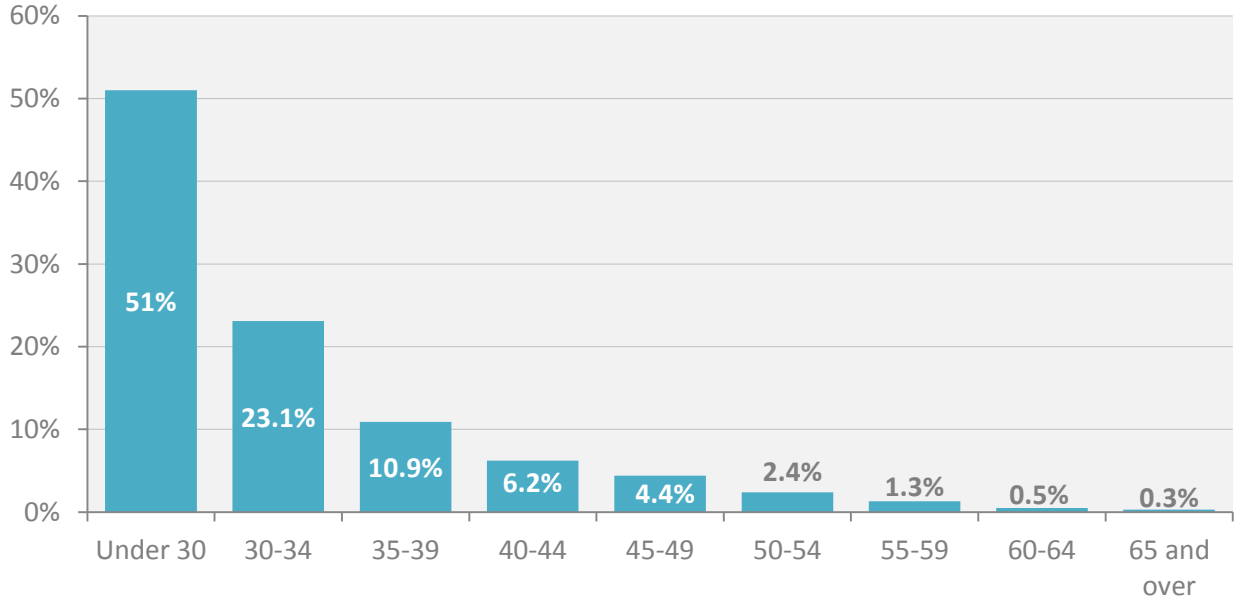
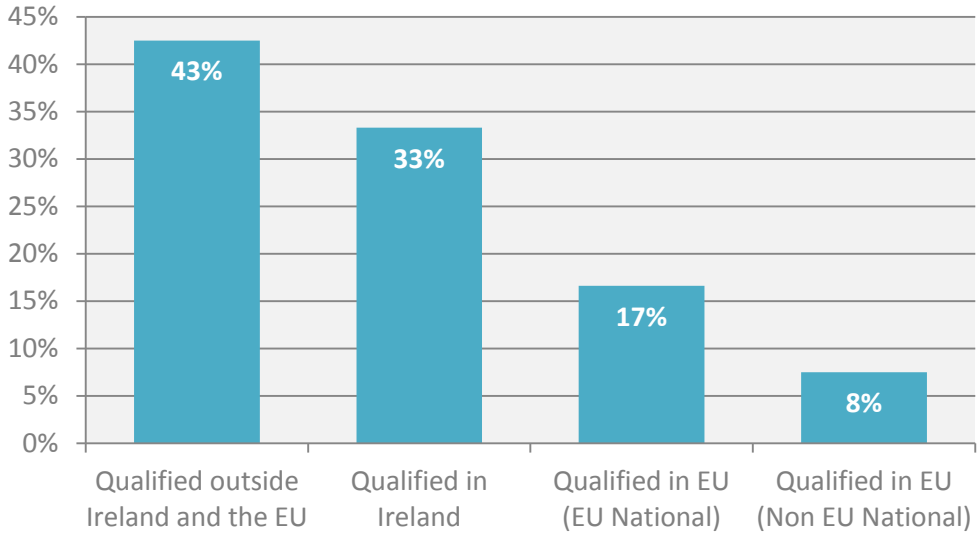


Figure 20: Region of qualification for new entrants to the Register



NEW SPECIALISTS

In 2015, 737 doctors entered the Specialist Division for the first time.

Figure 21: Proportion of doctors registered in the Specialist Division year-end, 2008-2015

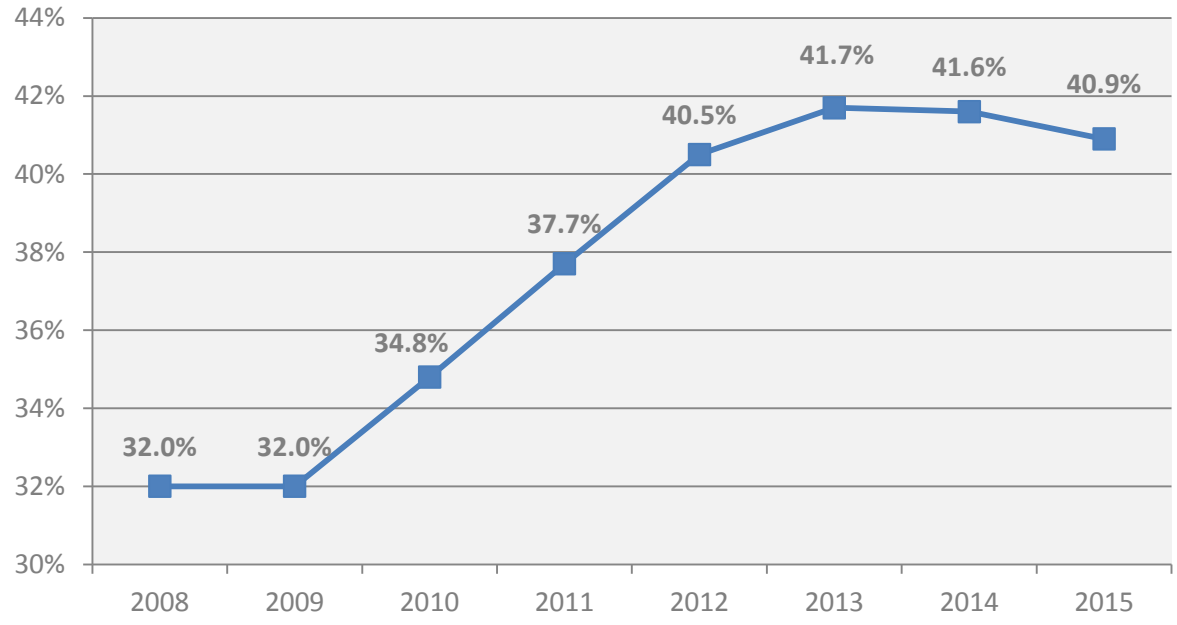


Table 13: Gender, Region of qualification and age of new specialists in 2015

Characteristic	N	%
Gender		
Female	354	48%
Male	383	52%
Region in which Basic Medical Qualification was awarded		
An Irish medical school	389	52.8%
An EU medical school (EU National)	217	29.4%
An EU medical school (Non EU National)	6	0.8%
A medical school in the rest of the world	125	17%
Age Group		
Under 30	10	1.4%
30-34	186	25.2%
35-39	232	31.5%
40-44	123	16.7%
45-49	91	12.3%
50-54	45	6.1%
55-59	31	4.2%
60-64	12	1.6%
65 and over	7	0.9%
Total	**737**	**100%**

Table 14: New specialists in 2015 by specialty area and proportion of these who were less than 40 years of age

Specialty	New specialists (N)	New specialists aged under 40 (N)	(%)
Anaesthesia	66	32	49%
Cardiology	13	9	69%
Cardiothoracic Surgery	9	8	89%
Child and Adolescent Psychiatry	11	4	36%
Clinical Genetics	1	0	0%
Dermatology	4	3	75%
Emergency Medicine	13	6	46%
Endocrinology and Diabetes Mellitus	13	5	39%
Gastroenterology	13	10	77%
General (Internal) Medicine	66	36	55%
General Practice	273	188	69%
General Surgery	27	11	41%
Genito-Urinary Medicine	2	2	100%
Geriatric Medicine	7	5	71%
Haematology	6	3	50%
Haematology (Clinical and Laboratory)	1	0	0%
Histopathology	10	7	70%
Immunology (Clinical and Laboratory)	2	0	0%
Infectious Diseases	4	4	100%
Medical Oncology	7	4	57%
Microbiology	11	5	46%
Nephrology	6	4	67%
Neurology	6	4	67%
Neuropathology	1	1	100%
Neurosurgery	1	1	100%
Obstetrics and Gynaecology	32	10	31%
Occupational Medicine	5	2	40%
Ophthalmic Surgery	7	4	57%
Ophthalmology	10	8	80%
Oral and Maxillo-Facial Surgery	2	0	0%
Otolaryngology	7	4	57%
Paediatric Surgery	4	1	25%
Paediatrics	33	18	55%
Palliative Medicine	4	3	75%
Pharmaceutical Medicine	1	0	0%
Plastic, Reconstructive and Aesthetic Surgery	6	3	50%
Psychiatry	29	11	38%
Psychiatry of Learning Disability	2	0	0%
Psychiatry of Old Age	8	2	25%
Public Health Medicine	4	2	50%
Radiation Oncology	1	1	100%
Radiology	38	22	58%
Rehabilitation Medicine	1	0	0%
Respiratory Medicine	11	7	64%
Rheumatology	6	4	67%
Trauma and Orthopaedic Surgery	9	3	33%
Urology	8	4	50%
Total	**801***	**461**	**58%**

* A doctor may be entered to the Specialist Division with more than one specialty; hence the total in Table 14 is greater than the total in Table 13.

Table 15: Irish training status of new specialists in 2015, by specialty area

Specialty	New Specialties	Irish Medical School Graduates		Completed an Irish training programme	
	N	N	%	N	%
Anaesthesia	66	18	27%	25	38%
Cardiology	10	4	40%	3	30%
Cardiothoracic Surgery	8	2	25%	2	25%
Child and Adolescent Psychiatry	10	4	40%	8	80%
Clinical Genetics	1	1	100%	1	100%
Dermatology	4	2	50%	3	75%
Emergency Medicine	12	9	75%	7	58%
Endocrinology and Diabetes Mellitus	9	3	33%	1	11%
Gastroenterology	10	3	30%	3	30%
General (Internal) Medicine	40	15	38%	16	40%
General Practice	268	200	75%	194	72%
General Surgery	27	9	33%	7	26%
Genito-Urinary Medicine	2	1	50%	1	50%
Geriatric Medicine	5	5	100%	5	100%
Haematology	5	2	40%	1	20%
Haematology (Clinical and Laboratory)	1	1	100%	1	100%
Histopathology	10	5	50%	7	70%
Immunology (Clinical and Laboratory)	1	0	0%	0	0%
Infectious Diseases	2	2	100%	2	100%
Medical Oncology	7	4	57%	3	43%
Microbiology	11	7	64%	5	45%
Nephrology	5	2	40%	2	40%
Neurology	6	3	50%	4	67%
Neuropathology	1	1	100%	1	100%
Neurosurgery	1	1	100%	1	100%
Obstetrics and Gynaecology	32	6	19%	6	19%
Occupational Medicine	5	3	60%	3	60%
Ophthalmic Surgery	7	2	29%	1	14%
Ophthalmology	9	6	67%	6	67%
Oral and Maxillo-Facial Surgery	2	1	50%	0	0%
Otolaryngology	7	4	57%	3	43%
Paediatric Surgery	4	0	0%	1	25%
Paediatrics	33	13	39%	13	39%
Palliative Medicine	4	3	75%	4	100%
Pharmaceutical Medicine	1	1	100%	0	0%
Plastic, Reconstructive and Aesthetic Surgery	6	2	33%	1	17%
Psychiatry	25	12	48%	15	60%
Psychiatry of Learning Disability	2	1	50%	1	50%
Psychiatry of Old Age	8	3	38%	6	75%
Public Health Medicine	3	2	67%	2	67%
Radiation Oncology	1	0	0%	0	0%
Radiology	37	13	35%	15	41%
Rehabilitation Medicine	1	0	0%	1	100%
Respiratory Medicine	7	3	43%	3	43%
Rheumatology	4	2	50%	3	75%
Trauma and Orthopaedic Surgery	9	4	44%	4	44%
Urology	8	4	50%	3	38%
Total	**737**	**389**	**53%**	**394**	**53%**

Table 16: Percentage change in number of specialists by specialty, 2014-2015

Specialty	% Change 2014-2015
Anaesthesia	8.5%
Cardiology	3.8%
Cardiothoracic Surgery	23.5%
Chemical Pathology	0.0%
Child and Adolescent Psychiatry	4.3%
Clinical Genetics	0.0%
Clinical Neurophysiology	0.0%
Clinical Pharmacology and Therapeutics	0.0%
Dermatology	8.5%
Emergency Medicine	13.5%
Endocrinology and Diabetes Mellitus	12.5%
Gastroenterology	2.8%
General (Internal) Medicine	5.2%
General Practice	8.3%
General Surgery	8.2%
Genito-Urinary Medicine	16.7%
Geriatric Medicine	-1.6%
Haematology (Clinical and Laboratory)	2.7%
Histopathology	5.7%
Immunology (Clinical and Laboratory)	12.5%
Infectious Diseases	13.3%
Medical Oncology	9.6%
Microbiology	6.5%
Nephrology	11.4%
Neurology	8.6%
Neuropathology	0.0%
Neurosurgery	-3.7%
Obstetrics and Gynaecology	4.0%
Occupational Medicine	6.1%
Ophthalmic Surgery	-2.5%
Ophthalmology	6.3%
Oral and Maxillo-Facial Surgery	7.1%
Otolaryngology	1.2%
Paediatric Cardiology	0.0%
Paediatric Surgery	30.8%
Paediatrics	6.3%
Palliative Medicine	0.0%
Pharmaceutical Medicine	11.1%
Plastic, Reconstructive and Aesthetic Su	0.0%
Psychiatry	3.7%
Psychiatry of Learning Disability	-4.3%
Psychiatry of Old Age	6.0%
Public Health Medicine	-1.0%
Radiation Oncology	-2.0%
Radiology	4.0%
Rehabilitation Medicine	8.3%
Respiratory Medicine	7.0%
Rheumatology	-4.5%
Sports and Exercise Medicine	-8.0%
Trauma and Orthopaedic Surgery	4.9%
Urology	9.7%

Rows highlighted in green have annual percentage growth ≥5%;
Rows highlighted in orange have annual percentage growth ≤0%.

GLOBALISATION OF MEDICAL PRACTICE IN IRELAND

KEY POINTS

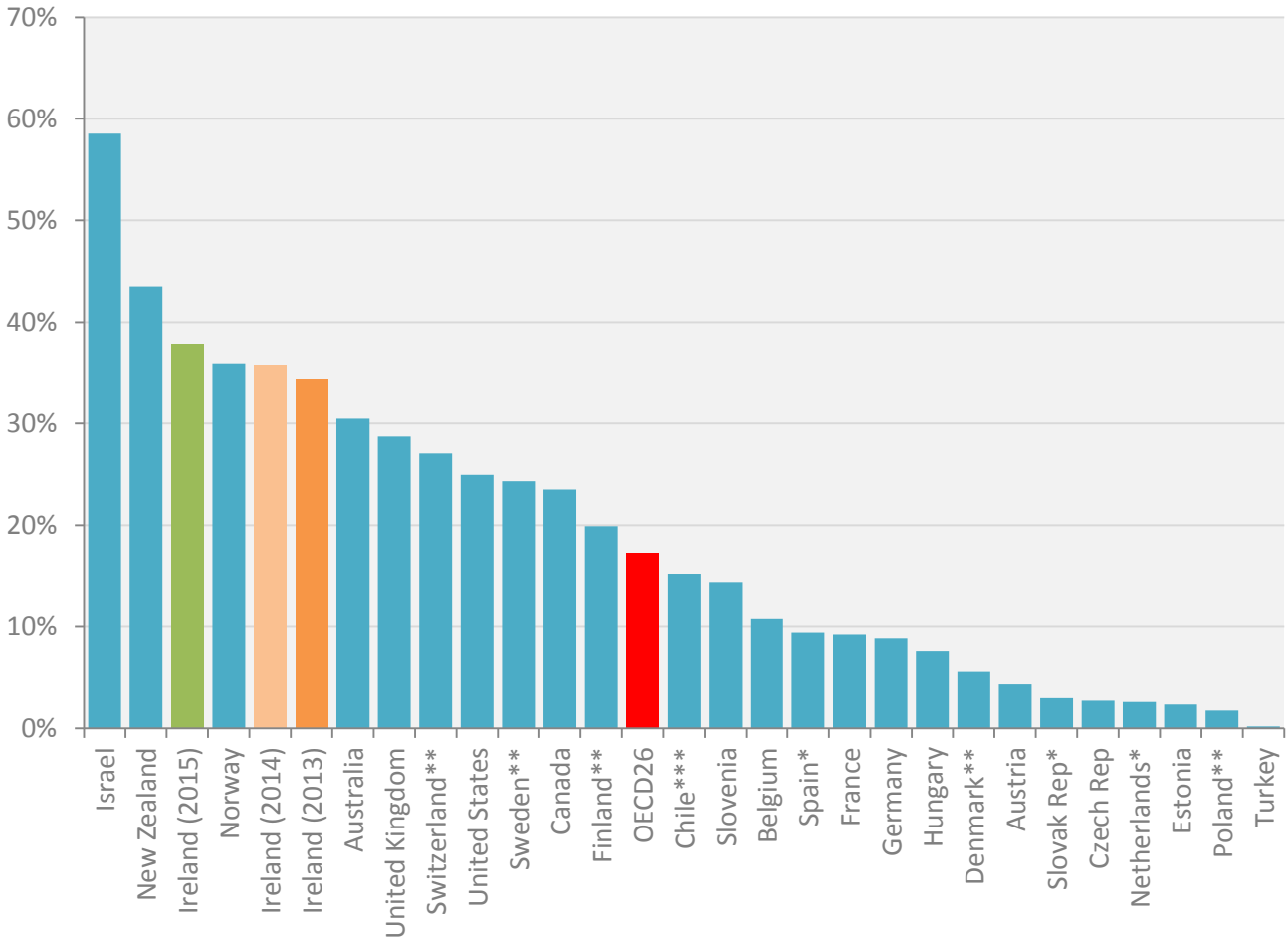
- In 2015, 37.9% of doctors retaining registration with the Medical Council graduated with a basic medical qualification from a medical school outside Ireland; this compares with 35.7% in 2014;
- Ireland's reliance on international medical graduates is among the highest of OECD countries;
- The five leading countries of qualification for doctors who did not qualify in Ireland were Pakistan, Sudan, the United Kingdom, South Africa and Romania;
- The skill mix and roles of international medical school graduates were different to Irish medical school graduates. 27.5% of doctors who graduated from Irish medial schools were registered in the General Division, compared with 64.2% of international medical graduates;
- 76.8% of doctors who worked as non-consultant hospital doctors (not in training) were international medical graduates; and,
- The proportion of international graduates in the medical workforce varied across areas of practice; the areas of practice with high proportions of international medical graduates were Obstetrics and Gynaecology (58%), Emergency Medicine (56%) and Surgery (53%).

INTERNATIONALLY-QUALIFIED DOCTORS RETAINING REGISTRATION

Table 17: World region of basic medical qualification for doctors retaining registration

World region	N	%
Ireland	10906	62.1%
Eastern Mediterranean	2656	15.1%
Europe	2325	13.2%
African	969	5.5%
South East Asia	438	2.5%
Western Pacific	166	0.9%
The Americas	99	0.6%

Figure 22: Proportion of international medical graduates in the workforce, OECD 2013[8]



*2011
**2012
***2014

[8] OECD (2015), "Foreign-trained physicians", in Health at a Glance 2015: OECD Indicators, OECD Publishing. http://www.oecd-ilibrary.org/social-issues-migration-health/health-at-a-glance-2015/share-of-foreign-trained-doctors-in-oecd-countries-2013-or-nearest-year_health_glance-2015-graph54-en

Table 18: Country of basic medical qualification for doctors retained in the Register, 2015

Country	N	% of total
Pakistan	1481	22.3%
Sudan	679	10.2%
United Kingdom	630	9.5%
South Africa	607	9.1%
Romania	488	7.3%
India	412	6.2%
Nigeria	337	5.1%
Egypt	233	3.5%
Hungary	210	3.2%
Poland	211	3.2%
Australia	102	1.5%
Czech Republic	101	1.5%
Iraq	100	1.5%
Germany	88	1.3%
Libyan Arab Jamahiriya	77	1.2%
Bulgaria	71	1.1%
Latvia	73	1.1%
Italy	67	1.0%
Slovakia	55	0.8%
Spain	44	0.7%
Croatia	42	0.6%
Lithuania	38	0.6%
Syrian Arab Republic	34	0.5%
Netherlands	27	0.4%
New Zealand	26	0.4%
Russian Federation	26	0.4%
United States of America	27	0.4%
Bangladesh	20	0.3%
China	21	0.3%
France	17	0.3%
Greece	18	0.3%
Ukraine	22	0.3%
Belarus	14	0.2%
Belgium	13	0.2%
Haiti	10	0.2%
Oman	13	0.2%
Philippines	11	0.2%
Republic of Moldova	11	0.2%

Doctors from the following countries also retained registration in Ireland; in each case the number represents 0.1% or fewer of the total number of doctors registered: Albania, Algeria, Argentina, Armenia, Austria, Bahrain, Bolivia, Brazil, Cameroon, Canada, Cayman Islands, Colombia, Congo, Costa Rica, Cuba, Democratic Republic of the Congo, Denmark, Dominican Republic, Ecuador, El Salvador, Ethiopia, Finland, Georgia, Ghana, Grenada, Iceland, Iran, Islamic Republic of, Jordan, Kazakhstan, Kenya, Kyrgyzstan, Lebanon, Malaysia, Malta, Mexico, Morocco, Myanmar, Nepal, Netherlands Antilles, Northern Ireland, Palestinian Territory, Panama, Peru, Portugal, Saudi Arabia, Serbia, Slovenia, Sri Lanka, Sweden, Switzerland, The Republic of Macedonia, Trinidad and Tobago, Turkey, Uganda, United Arab Emirates, United Republic of Tanzania, Uruguay, Uzbekistan, Venezuela (Bolivarian Republic of), Yemen, Yugoslavia, Zambia and Zimbabwe.

DIVISION STATUS AND ROLE OF DOCTORS WHO QUALIFIED OUTSIDE IRELAND

Table 19: Country of qualification and division on the Register, all retained 2015

Division	Graduates of Irish medical schools		Graduates of a medical school outside Ireland		% of division who graduated outside Ireland
	N	%	N	%	%
General Registration	2998	27.5%	4273	64.2%	58.8%
Specialist Registration	6319	57.9%	1880	28.3%	22.9%
Supervised Registration	0	0.0%	103	1.5%	100.0%
Trainee Specialist Registration	1589	14.6%	397	6.0%	20.0%

Table 20: Country of qualification and role, all retained 2015

Role	Graduates of Irish medical schools		Graduates of a medical school outside Ireland		% of role graduating outside Ireland
	N	%	N	%	%
Community Health Doctor	176	1.7%	18	0.3%	9.3%
General Practitioner	3569	33.7%	965	14.8%	21.3%
Healthcare related management and admin	80	0.8%	24	0.4%	23.1%
Hospital Consultant	2908	27.4%	1464	22.4%	33.5%
Non-consultant hospital doctor, in training	2287	21.6%	1141	17.5%	33.3%
Non-consultant hospital doctor, not in training	701	6.6%	2325	35.6%	76.8%
Other	284	2.7%	116	1.8%	29.0%
Other Consultant or Specialist	478	4.5%	467	7.2%	49.4%
Public Health Doctor	122	1.2%	11	0.2%	8.3%

AREA OF PRACTICE

Table 21: Area of practice and proportion of international graduates, all retained

Area of practice	% of doctors who graduated outside Ireland
Anaesthesia	50.7%
Emergency Medicine	55.9%
General Practice	19.8%
Medicine	40.8%
Obstetrics and Gynaecology	57.8%
Psychiatry	40.3%
Occupational Medicine	25.2%
Ophthalmology	33.5%
Paediatrics	47.4%
Pathology	31.2%
Public Health Medicine	9.8%
Radiology	34.1%
Sports and Exercise Medicine	32.5%
Surgery	52.9%

*Specialities where the proportion of international medical graduates is greater than average are highlighted.

SKILL MIX AND MODELS OF CARE

KEY POINTS

- The three most common roles held by doctors who retained registration in 2015 were General Practitioner (26%), Hospital Consultant (26%) and Non-Consultant Hospital Doctor in Training (20%);
- Among doctors registered in the Specialist Division, the most common role was Hospital Consultant (47%) followed by General Practitioner (36%);
- 47% of doctors who retained registration were registered in the Specialist Division;
- The ratio of specialists to non-specialists varied across areas of practice. While some areas were predominantly delivered by specialists (e.g. 68% of doctors working in Medical Ophthalmology were specialists), other areas were predominantly delivered by non-specialists (e.g. 17% of doctors working in Emergency Medicine were specialists); and,
- The blend of roles also varied across areas of practice; with some areas, such as Emergency Medicine (51%), Surgery (30%), Paediatrics 27%), and Obstetrics and Gynaecology (27%) having a higher than average proportion of Non-Consultant Hospital Doctors Not in Training.

ROLES OF DOCTORS RETAINING REGISTRATION

Table 22: Current roles of retained doctors[9]

Role	N	%
Community Health Doctor	194	1.1%
General Practitioner	4535	26.4%
Healthcare related management and administration	104	0.6%
Hospital Consultant	4373	25.5%
Non-consultant hospital doctor, in training	3432	20.0%
Non-consultant hospital doctor, not in training	3032	17.7%
Other	400	2.3%
Other Consultant or Specialist	945	5.5%
Public Health Doctor	133	0.8%
Total	**17148**	**100%**

DIVISIONAL STATUS AND ROLE

Table 23: Distribution of retained doctors by role for each registration division

Role	Specialist	Non-Specialist			Total
	Specialist Division	General	Training Specialist	Supervised	
Community Health Doctor	0.7%	2.0%	0.0%	0.0%	1.1%
General Practitioner	36.3%	21.5%	5.6%	0.0%	26.4%
Healthcare related management & admin	0.5%	0.8%	0.2%	0.0%	0.6%
Hospital Consultant	47.3%	8.1%	0.0%	0.0%	25.5%
Non-consultant hospital doctor, in training	2.7%	21.3%	83.0%	76.3%	20.0%
Non-consultant hospital doctor, not in training	2.4%	37.1%	10.4%	23.7%	17.7%
Other	1.7%	3.6%	0.5%	0.0%	2.3%
Other Consultant or Specialist	7.3%	5.1%	0.1%	0.0%	5.5%
Public Health Doctor	1.1%	0.6%	0.3%	0.0%	0.8%
Total	**100%**	**100%**	**100%**	**100%**	**100%**

[9] 97.6% of retained doctors answered this question on current role

DIVISIONAL STATUS AND AREA OF PRACTICE

Table 24: Distribution of doctors who retained registration by division of registration for each area of practice*

Area of Practice	Specialist	Non-Specialist		
	Specialist Registration	General Registration	Trainee Specialist Registration	Supervised Registration
Anaesthesia	50.2%	34.6%	14.2%	1.0%
Emergency Medicine	17.3%	64.6%	17.3%	0.8%
General Practice	62.8%	32.2%	5.0%	0.0%
Medicine	34.4%	48.9%	15.7%	1.0%
Obstetrics and Gynaecology	36.8%	47.1%	15.3%	0.9%
Psychiatry	47.7%	36.9%	15.2%	0.2%
Occupational Medicine	62.3%	35.8%	2.0%	0.0%
Ophthalmology	68.2%	27.8%	4.0%	0.0%
Paediatrics	35.0%	46.1%	17.3%	1.6%
Pathology	64.3%	22.8%	12.0%	0.9%
Public Health Medicine	51.2%	44.5%	4.3%	0.0%
Radiology	63.6%	25.8%	10.6%	0.0%
Sports and Exercise	52.5%	47.5%	0.0%	0.0%
Surgery	38.4%	49.7%	11.2%	0.7%
Total	**46.9%**	**41.0%**	**11.5%**	**0.6%**

**Areas of practice in which 50% and over of doctors are registered in the Specialist Division are highlighted in green; areas of practice in which 40% and fewer doctors are registered in the Specialist Division are highlighted in orange; and areas of practice where less than 20% of doctors are registered in the Specialist Division are highlighted in red.*

ROLE AND AREA OF PRACTICE

Table 25: Distribution of doctors who retained registration by role for each area of practice*

Area of Practice	Current Role								
	Community Health Doctor	General practitioner	Healthcare related management & admin	Hospital Consultant	Non-consultant hospital doctor, in training	Non-consultant hospital doctor, not in training	Other	Other Consultant or Specialist	Public Health Doctor
Anaesthesia	0.0%	0.2%	0.1%	48.9%	26.1%	21.0%	0.4%	3.4%	0.0%
Emergency Medicine	0.0%	2.7%	0.4%	18.7%	23.7%	51.0%	2.1%	1.4%	0.0%
General Practice	0.5%	92.7%	0.3%	0.0%	4.4%	0.5%	1.5%	0.1%	0.0%
Medicine	0.3%	4.8%	1.1%	31.1%	30.8%	24.9%	3.3%	3.5%	0.2%
Obstetrics and Gynaecology	0.0%	1.8%	0.1%	31.0%	28.8%	26.6%	2.3%	9.2%	0.0%
Psychiatry	0.1%	0.5%	0.2%	34.9%	25.1%	21.2%	1.9%	16.2%	0.0%
Occupational Medicine	0.0%	7.5%	7.5%	6.2%	2.7%	0.7%	25.3%	50.0%	0.0%
Ophthalmology	4.0%	1.7%	0.6%	19.5%	13.8%	12.1%	6.3%	41.4%	0.6%
Paediatrics	8.2%	1.2%	0.2%	28.4%	29.4%	26.8%	2.5%	3.4%	0.0%
Pathology	0.2%	0.3%	0.0%	58.1%	24.0%	6.4%	2.1%	8.5%	0.3%
Public Health Medicine	30.0%	0.4%	5.8%	0.0%	4.1%	0.4%	2.9%	6.6%	49.8%
Radiology	0.0%	0.5%	0.3%	64.5%	20.2%	3.5%	0.3%	10.7%	0.0%
Sports and Exercise Medicine	0.0%	27.5%	5.0%	10.0%	0.0%	5.0%	12.5%	40.0%	0.0%
Surgery	0.0%	1.1%	0.3%	36.1%	23.8%	30.4%	1.5%	6.9%	0.0%
Total	**1.1%**	**26.0%**	**0.6%**	**25.8%**	**20.2%**	**17.8%**	**2.2%**	**5.5%**	**0.8%**

**Areas of practice in which a greater than 15% of doctors hold the role of Non-Consultant Hospital Doctor, not in training are highlighted in orange; and areas of practice greater than 40% of doctors hold the role of Non-Consultant Hospital Doctor, not in training are highlighted in red.*

DOCTORS' PARTICIPATION IN PRACTICE IN IRELAND

KEY POINTS

- 2.9% of doctors who retained registration in 2015 had not practised medicine in the previous 12 months;
- Among doctors aged 65 years and older, 13% reported that they had not practised medicine in the last year;
- 77% of doctors who retained registration in 2015 practised medicine only in Ireland;
- Compared with graduates from an Irish medical school (90%), a lower proportion of international medical graduates reported that they practised medicine in Ireland only (56%);
- The proportion of doctors who practised medicine only in Ireland varied across area of practice. Rates for practising only in Ireland were higher than average in Public Health Medicine (90%), General Practice (86%) and Psychiatry (83%) and lower than average in Surgery (68%), Radiology (67%) and Emergency Medicine (66%);
- Almost 15% of doctors who retained registration reported that they practised medicine on a part-time basis. Compared with men, a higher proportion of women practised medicine part-time (11% and 20% respectively);
- The proportion of doctors practising medicine part-time is greater among older doctors;
- Part-time practice of medicine was more common in some areas of practice, for example Sports and Exercise Medicine (45%) Public Health Medicine (31%) Ophthalmology (30%) and General Practice (26%); and,
- Among doctors registered in the Specialist Division, 4.9% reported that they were practising in an area which was different to their registered specialties.

Doctors who retained registration were invited to identify if they had practised medicine in the previous 12 months, and if so, if they had practised in Ireland and if they had practised on a full-time basis. 97.4% of doctors who retained registration told us this information about their practice.

INACTIVE DOCTORS

In total, 505 (2.9%) of respondents said that they had not practised medicine in the previous 12 months.

Table 26: Proportion of inactive doctors, by gender, age group, and division.

Characteristic	% Inactive
Gender	
Male	2.5%
Female	3.4%
Age Category	
25-34 years	1.2%
35-44 years	2.2%
45-54 years	2.4%
55-64 years	3.3%
65 years and older	13.0%
Division	
Supervised	1.0%
General	3.7%
Trainee Specialist	0.4%
Specialist	2.8%
Total	**2.9%**

Table 27: Proportion of inactive doctors by area of practice

Area of Practice	% Inactive
Anaesthesia	2.0%
Emergency Medicine	0.8%
General Practice	1.7%
Medicine	2.6%
Obstetrics and Gynaecology	3.2%
Psychiatry	2.0%
Occupational Medicine	6.0%
Ophthalmology	2.3%
Paediatrics	2.6%
Pathology	3.3%
Public Health Medicine	6.7%
Radiology	1.4%
Sports and Exercise Medicine	0.0%
Surgery	2.1%

COUNTRY OF MEDICAL PRACTICE

In total, 77.3% of respondents said that they practised medicine in Ireland only in the last year.

Table 28: Proportion of doctors practising inside and outside Ireland, by gender, age, division and WHO region of basic medical qualification

	In Ireland only	Both in and outside Ireland	Outside Ireland only
Gender			
Male	71.8%	11.3%	16.9%
Female	85.2%	6.1%	8.7%
Age			
Under 25	78.6%	7.1%	14.3%
25-34	79.8%	9.9%	10.3%
35-44	75.5%	9.3%	15.2%
45-54	74.4%	9.6%	16.0%
55-64	78.7%	8.3%	13.0%
65 and over	82.1%	5.9%	12.0%
Division			
General Registration	64.9%	12.2%	23.0%
Specialist Registration	83.8%	7.7%	8.6%
Supervised Registration	74.2%	22.7%	3.1%
Trainee Specialist Registration	95.1%	3.9%	1.0%
WHO region of Basic Medical Qualification			
African	35.0%	18.4%	46.6%
The Americas	52.0%	20.4%	27.6%
South East Asia	72.1%	11.4%	16.5%
Europe	62.0%	21.5%	16.5%
Eastern Mediterranean	58.5%	16.9%	24.6%
Western Pacific	28.5%	12.7%	58.8%
Ireland	90.2%	3.5%	6.3%
Total	**77.3%**	**9.2%**	**13.6%**

Table 29: Proportion of doctors practising inside and outside Ireland, by area of practice

Area of practice	In Ireland only	Both in and outside Ireland	Outside Ireland only
Anaesthesia	74.6%	12.0%	13.4%
Emergency Medicine	65.9%	16.4%	17.8%
General Practice	86.3%	4.5%	9.2%
Medicine	75.5%	9.7%	14.7%
Obstetrics and Gynaecology	73.5%	13.2%	13.3%
Psychiatry	83.3%	6.8%	9.9%
Occupational Medicine	76.7%	10.3%	13.0%
Ophthalmology	76.4%	8.6%	14.9%
Paediatrics	76.9%	11.4%	11.7%
Pathology	77.1%	10.1%	12.8%
Public Health Medicine	90.4%	2.5%	7.1%
Radiology	67.4%	9.9%	22.7%
Sports and Exercise Medicine	70.0%	15.0%	15.0%
Surgery	68.4%	12.9%	18.7%
Totals	**77.4%**	**9.2%**	**13.4%**

FULL-TIME / PART-TIME WORKING

In total, 85.3% of respondents said that they practised medicine full-time[10].

Table 30: Proportion of doctors practising full-time and part-time, by gender, age, division and country of basic medical qualification, all retained

Characteristic	Full-time	Part-time
Gender		
Male	89.1%	10.9%
Female	79.8%	20.2%
Age		
Under 25	92.9%	7.1%
25-34	93.5%	6.5%
35-44	86.6%	13.4%
45-54	87.5%	12.5%
55-64	83.6%	16.4%
65 and over	42.7%	57.3%
Division		
General Registration	85.3%	14.7%
Specialist Registration	82.2%	17.8%
Supervised Registration	100.0%	0.0%
Trainee Specialist Registration	97.4%	2.6%
WHO region of Basic Medical Qualification		
African	92.7%	7.3%
The Americas	80.6%	19.4%
South East Asia	92.8%	7.2%
Europe	86.0%	14.0%
Eastern Mediterranean	93.6%	6.4%
Western Pacific	90.2%	9.8%
Ireland	82.1%	17.9%
Total	85.3%	14.7%

[10] 97.5% of doctors who retained registration in 2015 answered this question.

Table 31: Proportion of doctors practising full-time and part-time by area of practice, all retained

Area of Practice	Full-time	Part-time
Anaesthesia	93.9%	6.1%
Emergency Medicine	91.4%	8.6%
General Practice	74.2%	25.8%
Medicine	89.3%	10.7%
Obstetrics and Gynaecology	90.8%	9.2%
Psychiatry	87.8%	12.2%
Occupational Medicine	74.7%	25.3%
Ophthalmology	70.1%	29.9%
Paediatrics	89.0%	11.0%
Pathology	88.3%	11.7%
Public Health Medicine	69.2%	30.8%
Radiology	92.6%	7.4%
Sports and Exercise Medicine	55.0%	45.0%
Surgery	92.2%	7.8%
Total	**85.5%**	**14.5%**

CHANGING SCOPE OF PRACTICE

In total, 391 doctors (4.9%) registered in the Specialist Division were practising in an area of practice that was not their specialty.

Table 32: Proportion of doctors changing scope of practice by gender, age-group, and practice arrangements

Characteristic	% working in an area of practice in which they were not a specialist	% working in area of practice in which they were a specialist
Gender		
Female	5.9%	94.1%
Male	4.2%	95.8%
Age		
25-34	6.5%	93.5%
35-44	4.9%	95.1%
45-54	3.8%	96.2%
55-64	5.0%	95.0%
65 and over	7.2%	92.8%
Practice Arrangements		
Full-time	8.0%	92.0%
Part-time	4.2%	95.8%
Total	**4.9%**	**95.1%**

WOMEN'S PARTICIPATION IN MEDICAL PRACTICE

KEY POINTS

- In total, at the end of 2015, 41% of registered doctors were female;
- 56% of doctors who retained registered in the Trainee Specialist Division were female;
- Among graduates from Irish medical schools, aged less than 35 years, 73% of doctors retaining registered in the Specialist Division were female;
- The proportion of women working in different roles varied: 80% of Community Health doctors were women compared with 30% of Hospital Consultants;
- Among Hospital Consultants who graduated from an Irish medical school and were aged less than 35 years, 62% were female;
- Among specialists, gender patterning of specialisation was evident. In some specialties there was a higher than average proportion of women practising: Public Health Medicine (71%), Psychiatry of Learning Disability (70%), and Genito-Urinary Medicine (67%), while in other specialties there was a lower than average proportion of women practising: Neurosurgery (8%), Oral and Maxillo-Facial Surgery (6%) and Trauma and Orthopaedic Surgery (6%);
- Practice arrangements reported by female doctors were different to those of males; with women being more likely than men to work less than full-time across all age categories.

PROFILE OF FEMALE DOCTORS

Figure 23: Trend in proportion of females registered with the Medical Council at year-end, 2008-2015

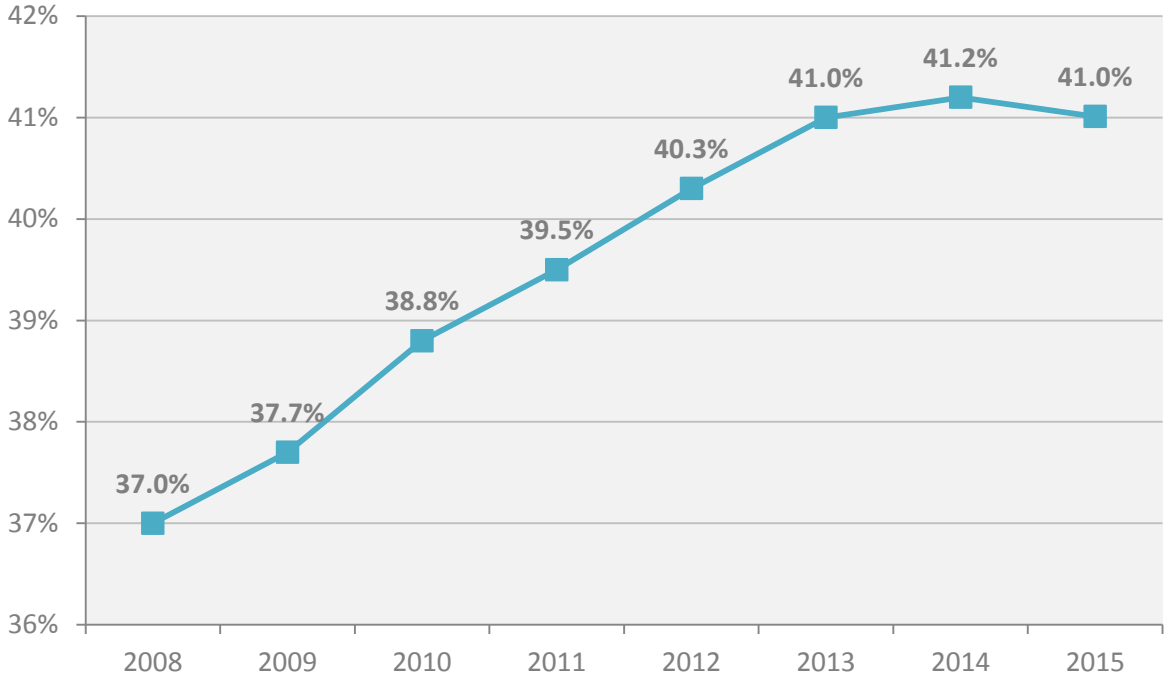


Figure 24: Proportion of doctors in each age group who are female

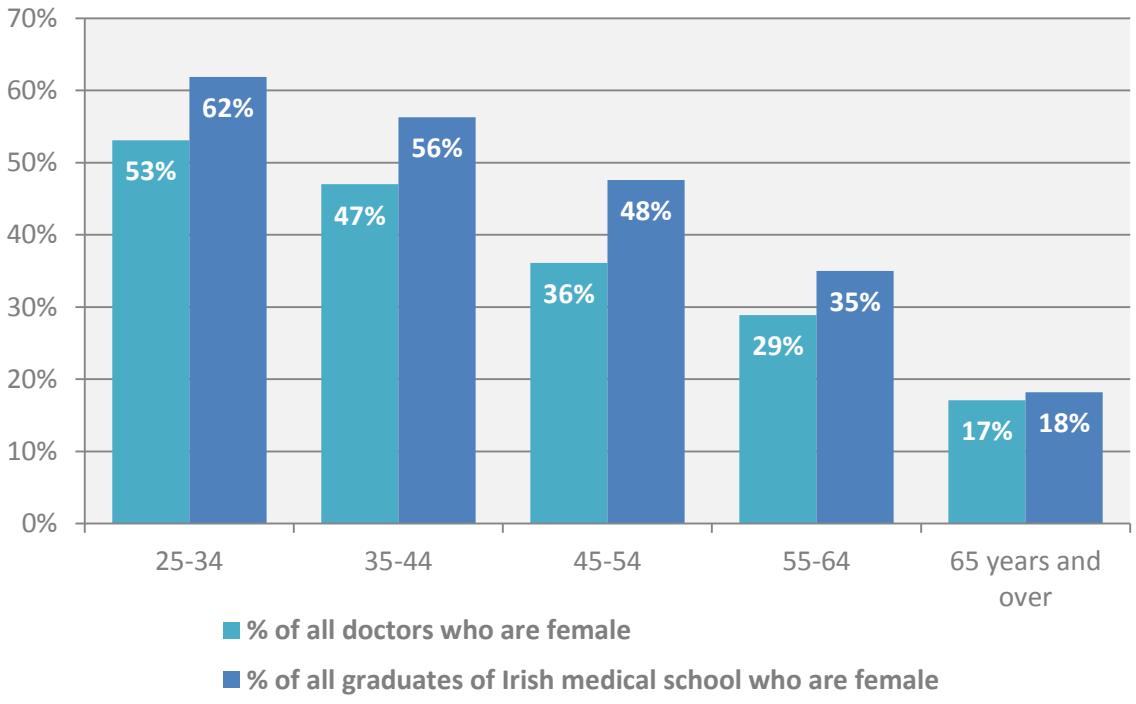


Table 33: Proportion of female doctors by division of the Register

Division	% Female	% Female *	% Female **
General Registration	37.6%	51.6%	60.5%
Specialist Registration	40.8%	44.9%	72.5%
Supervised Registration	23.3%	-	-
Trainee Specialist Registration	55.7%	58.1%	59.8%
Total	**41.1%**	**48.6%**	**61.9%**

* Graduates of Irish medical schools only
**Graduates of Irish medical schools under the age of 35 years only

Table 34: Proportion of female doctors by role

Role	% Female	% Female*	% Female**
Community Health Doctor	79.9%	83.0%	100%
General Practitioner	46.1%	48.9%	77.7%
Healthcare related management and admin	39.4%	37.5%	55.6%
Hospital Consultant	29.5%	36.8%	61.5%
Non-consultant hospital doctor, in training	52.1%	57.7%	59.6%
Non-consultant hospital doctor, not in training	33.4%	52.9%	54.9%
Other	48.5%	53.5%	73.2%
Other Consultant or Specialist	37.2%	49.0%	60.0%
Public Health Doctor	67.7%	71.3%	75.0%
Total	**40.9%**	**48.6%**	**61.9%**

* Graduates of Irish medical schools only
**Graduates of Irish medical schools under the age of 35 years only.

FEMALE SPECIALISTS AND AREAS OF PRACTICE

Table 35: Proportion of specialists who are female, for each specialty

Specialty	% Female	% Female*	% Female**	% Female ***
Anaesthesia	31.7%	38.8%	50.0%	39.0%
Cardiology	12.0%	14.1%	-	14.6%
Cardiothoracic Surgery	14.3%	15.8%	-	7.7%
Chemical Pathology	18.2%	22.2%	-	28.6%
Child and Adolescent Psychiatry	66.4%	70.4%	50.0%	72.3%
Clinical Genetics	50.0%	50.0%	-	66.7%
Clinical Neurophysiology	25.0%	27.3%	-	27.3%
Clinical Pharmacology and Therapeutics	50.0%	50.0%	-	50.0%
Dermatology	63.1%	67.3%	-	66.7%
Emergency Medicine	20.0%	20.7%	100.0%	20.8%
Endocrinology and Diabetes Mellitus	29.5%	32.3%	50.0%	37.5%
Gastroenterology	27.7%	36.8%	66.7%	39.0%
General (Internal) Medicine	28.6%	35.1%	57.1%	36.2%
General Practice	50.5%	50.8%	74.6%	50.9%
General Surgery	9.1%	11.9%	-	12.9%
Genito-Urinary Medicine	66.7%	75.0%	-	85.7%
Geriatric Medicine	42.9%	44.8%	50.0%	46.4%
Haematology	50.0%	50.0%	-	66.7%
Haematology (Clinical and Laboratory)	43.8%	50.8%	-	50.9%
Histopathology	45.0%	51.1%	80.0%	54.9%
Immunology (Clinical and Laboratory)	30.0%	50.0%	-	60.0%
Infectious Diseases	58.1%	63.0%	100.0%	63.6%
Medical Oncology	39.0%	41.9%	100.0%	37.8%
Microbiology	61.2%	65.6%	100.0%	63.2%
Nephrology	32.2%	34.9%	0.0%	34.4%
Neurology	30.4%	31.5%	0.0%	30.0%
Neuropathology	66.7%	80.0%	-	80.0%
Neurosurgery	7.7%	11.8%	-	7.1%
Obstetrics and Gynaecology	40.4%	45.4%	-	46.6%
Occupational Medicine	33.3%	37.6%	100.0%	37.8%
Ophthalmic Surgery	26.9%	32.5%	-	32.4%
Ophthalmology	46.0%	55.1%	33.3%	59.5%
Oral and Maxillo-Facial Surgery	6.7%	8.3%	-	9.1%
Otolaryngology	19.5%	22.4%	-	22.4%
Paediatric Cardiology	25.0%	25.0%	-	33.3%
Paediatric Surgery	11.1%	0.0%	-	0.0%
Paediatrics	47.0%	59.5%	75.0%	61.2%
Palliative Medicine	64.6%	69.0%	100.0%	69.2%
Pharmaceutical Medicine	27.3%	33.3%	-	37.5%
Plastic, Reconstructive and Aesthetic Surgery	24.2%	30.2%	-	25.8%
Psychiatry	48.8%	52.5%	66.7%	55.3%
Psychiatry of Learning Disability	69.7%	74.1%	-	74.1%
Psychiatry of Old Age	60.2%	64.9%	100.0%	67.1%
Public Health Medicine	71.0%	72.0%	-	70.5%
Radiation Oncology	31.4%	44.4%	-	40.9%

Specialty	% Female	% Female*	% Female**	% Female ***
Radiology	32.2%	34.6%	57.1%	32.6%
Rehabilitation Medicine	53.3%	50.0%	-	54.5%
Respiratory Medicine	18.4%	21.1%	-	17.7%
Rheumatology	35.8%	36.0%	0.0%	36.4%
Sports and Exercise Medicine	10.7%	13.0%	-	15.8%
Trauma and Orthopaedic Surgery	6.2%	6.9%	100.0%	5.7%
Tropical Medicine	0.0%	0.0%	-	0.0%
Urology	8.8%	10.0%	0.0%	7.7%
Total	**40.2%**	**44.3%**	**72.2%**	**45.3%**

* Graduates of Irish medical schools only
**Graduates of Irish medical schools under the age of 35 years only
*** Graduates of Irish medical schools working in Ireland only
Specialties with greater than average proportions of women doctors are highlighted in green.

Table 36: Proportion of doctors in each area of practice who are female

Area of Practice	% who are Female	% Female*	% Female**
Anaesthesia	33.5%	42.2%	42.3%
Emergency Medicine	28.5%	36.9%	37.6%
General Practice	48.1%	50.6%	51.4%
Medicine	39.3%	48.2%	48.6%
Obstetrics and Gynaecology	56.5%	63.1%	65.4%
Occupational Medicine	37.7%	43.4%	45.0%
Ophthalmology	52.3%	59.8%	62.5%
Paediatrics	56.1%	68.4%	70.7%
Pathology	52.7%	59.1%	60.3%
Psychiatry	50.0%	57.6%	59.9%
Public Health Medicine	73.6%	76.0%	76.6%
Radiology	33.4%	39.1%	37.6%
Sports and Exercise Medicine	10.0%	11.1%	12.5%
Surgery	17.8%	25.6%	26.0%
Total	**41.1%**	**48.7%**	**49.7%**

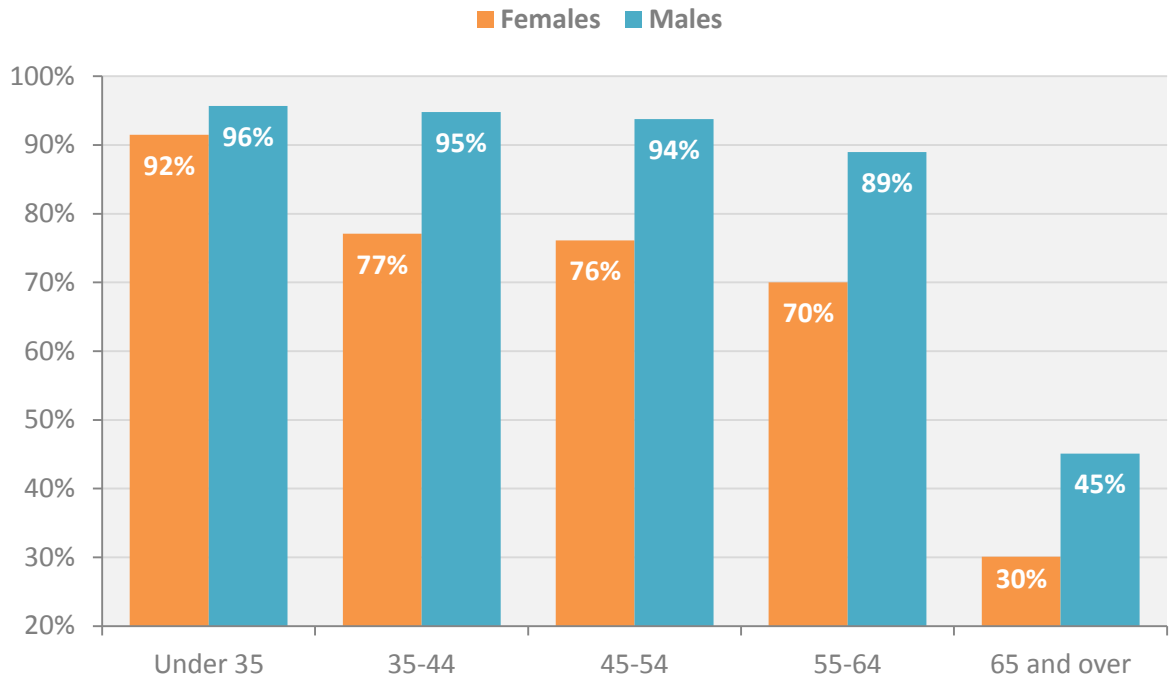
* Graduates of Irish medical schools only
** Graduates of Irish medical schools working in Ireland only
Areas with greater than average proportions of women doctors are highlighted in green.

PRACTICE ARRANGEMENTS OF FEMALE DOCTORS

Table 37: Comparison of female and male doctors' working arrangements by age group, all retained

Age categories	Female		Male	
	Full Time	Part Time	Full Time	Part Time
Under 35	91.5%	8.5%	95.7%	4.3%
35-44	77.1%	22.9%	94.8%	5.2%
45-54	76.1%	23.9%	93.8%	6.2%
55-64	70.0%	30.0%	89.0%	11.0%
65 and over	30.1%	69.9%	45.1%	54.9%
Total	**79.8%**	**20.2%**	**89.1%**	**10.9%**

Figure 25: % of female and male doctors who work full time by age group, all retained



Comhairle na nDochtúirí Leighis
Medical Council