

Medical Workforce Intelligence Report



Comhairle na nDochtúirí Leighis
Medical Council

A Report on the 2014 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, to Kevin Collins for helping with data visualisation, and to Ailbhe Enright, Michelle Navan and Hannah McCarthy for proof reading and editing.

Finally, this report could not have been produced without the participation of the 17,668 doctors who were invited to retain registration with the Medical Council in 2014. We hope that through each individual's contribution, this report can help further strengthen the medical workforce in Ireland.

PRESIDENT'S FOREWORD

Healthcare is about people. It is patient-centred, and it is about making sure that the right people are in the right place to deliver the care that patients need. It is important to remember that a *major* component of quality *healthcare* is *patient satisfaction*. Resourcing is crucial and the appropriate care can only be provided by properly resourced, organised and managed systems of healthcare. Healthcare policy and workforce planning must be focusing on aligning the available resources to best effect.

I am pleased, with my fellow Medical Council members, to present this third Medical Workforce Intelligence Report. Put simply, this report outlines who the doctors are within our health system and where they are working. This valuable data assists us in our work in registering doctors to allow them to practise in Ireland and also enables us to make informed decisions in relation to our role in education and training across the continuum from undergraduate to retirement.

The data in this report should be of interest to doctors at all stages of their careers. Medical students at undergraduate level can see what specialties have a high proportion of medics over 55 and where job opportunities may shortly arise. Qualified doctors will be interested in the data on the skill mix and specialties where care is driven by generalists as compared with those specialties which are consultant led, and also the differing practice arrangements throughout the system.

Crucially though, the information contained in this report will support the planning and delivery of healthcare at all levels, from employers to policy makers. This report highlights data relating to the entry and exit of doctors, practice arrangements and the models of care provided. This report shows that the number of doctors registered to practise in Ireland is at a ten year high. By sharing this data, we wish to work with our partner organisations to strengthen this workforce and retain our talented doctors so that patients receive the high quality of care they deserve.



Prof. Freddie Wood
President

CHIEF EXECUTIVE'S FOREWORD

I am delighted to introduce the third Medical Workforce Intelligence Report which is based on information collected by the Medical Council through our annual registration retention process. This comprehensive report provides a detailed description of doctors' practice in Ireland presenting data on the number, age, gender and specialist qualifications of doctors registered to practise in Ireland and on their working arrangements, day-to-day practice and region of qualification.

The type of information we have gathered is important for those working within the healthcare landscape - from those involved in medical education, policy making or strategic planning to training bodies, doctors, patients and their representative groups as it allows for strategic planning and enables evidence-based, informed decisions to be made.

This year, we have enhanced our information by inviting doctors to respond to new questions and can now provide details of the general and specialty-specific estimates of doctor rates in Ireland in addition to the estimated number of doctors by county in Ireland.

As this is the third Medical Workforce Report, some comparisons between data can of course be made. However, we do not present these as 'trends' as such and urge caution of over-interpretation of year-on-year changes in information. A 5-year trend will be presented once consecutive years' data is available.

This Workforce Intelligence Report complements a range of research undertaken by the Medical Council, particularly the Your Training Counts survey. It is extremely important not to overlook the healthcare professionals at the heart of the health system as we require motivated, skilled and content doctors in order to expect patient care of the highest quality. As a health system we need to make it our priority to retain talented doctors and plan effectively for the future. The Workforce Intelligence Report details the exit rate of doctors and the Your Training Counts report explores the reasons why trainee doctors are planning to leave. Both reports provide information which support and enable succession planning within the Irish health system and have also demonstrated the type of working environments needed to retain doctors.

Ultimately the purpose of collating this information is to develop and maintain a strong medical workforce that responds to a changing healthcare landscape and better enables doctors to fulfil their potential to meet the public's health needs. I am very confident that the Medical Workforce Intelligence Report will contribute to the accomplishment of these desired outcomes.

I would like to express my sincere thanks to Dr Paul Kavanagh, Director of Professional Development and Practice and Simon O'Hare, Research Monitoring and Evaluation Manager, for carrying out this valuable research to better inform our work and the work of the wider health system.



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 2014, approximately 19,000 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 to 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 doctors' 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

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MEDICAL WORKFORCE AT A GLANCE

Indicator		2012	2013	2014
1	Total number of doctors registered at year end (annual % change)	18,184 (-3.3% per annum)	18,160 (-0.1% per annum)	19,049 (4.9% per annum)
2	% women doctors (annual % change)	40.3% (2.0% per annum)	41.3% (2.5% per annum)	41.2% (<-1% per annum)
3	% doctors aged 55 years and older	22.5%	21.4%	23.3%
4	Specialist Division: General Division: Trainee Specialist Division ratio	3.6: 3.4: 1	3.9: 3.5: 1	4.0: 3.6: 1
5	Exit rate, all doctors	8.0%	6.8%	5.6%
6	Exit rate, graduates of Irish medical schools aged under 30 years	6.4%	7.9%	5.5%
7	Total number of new entrants	+1,256	+1,576	+1,958
8	Annual % change in proportion of specialists	7.4% per annum	2.8% per annum	2.6% per annum
9	% of international medical graduates	34.9%	34.3%	35.7%
10	% clinically inactive doctors	7.2%	4.0%	2.9%
11	% practising in Ireland only	74.4%	79.8%	78.9%
12	% practising less than full time	17.0%	16.1%	16.7%

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, has invited doctors to complete a survey which gathers up-to-date information about their 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.
- The Medical Council shares this report 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

BETTER UNDERSTANDING THE MEDICAL WORKFORCE IN IRELAND

The Medical Council sets standards for good professional practice among doctors in Ireland. It monitors standards of practice and can take action if proper standards are not met.

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 practice 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 the single definitive 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. The 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 third 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 2014.

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.

Since 2012, the Medical Council has invited doctors to respond to additional questions about their current practice arrangements; in 2014, the workforce survey included questions asked in the previous year and some new questions (e.g. about the geographical distribution of doctors) which were designed in consultation with key stakeholders. The responses to these questions were reconciled by the Medical Council to the doctor's unique registration records, which contained basic information about the doctor such as age, gender, graduating medical school and specialist credentials. Most doctors responded to the invitation to provide additional information through the annual retention of registration process. Percentages quoted in the report are based on response rates for each individual question, as some doctors omitted to respond to some of the additional non-statutory declaration questions; however, the proportion was small and only impacts significantly on the overall quality of the data analysed where data is presented for small numbers of doctors.

The report also draws on existing registration data to provide a cross sectional overview of the registered doctors at the end of 2014 and new entrants during 2014. 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 third Medical Workforce Report some comparisons between 2012, 2013 and 2014 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. A 5-year trend will be presented once consecutive years' data is available. At that stage, valid commentary on trends can and will be made.

PURPOSE OF THIS REPORT

The purpose of this report is to enhance patient safety and better support good professional practice among doctors through generating and providing intelligence about the medical workforce in Ireland. This information underpins the work of the Medical Council in setting and monitoring standards for 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 the Medical Workforce: Doctors Retained in the Medical Council Register 2014
- Medical Practitioner Density in Ireland – Estimates and Comparisons
- Doctors Exiting the Register 2014
- Doctors Entering the Register 2014
- Globalisation of the Medical Practice in Ireland
- Skill-mix and models of care
- Doctors' Participation in Practice in Ireland
- Women's Participation in Medical Practice

PROFILE OF THE MEDICAL WORKFORCE: DOCTORS RETAINED IN THE MEDICAL COUNCIL REGISTER 2014

Key points

- 17,688 doctors were invited to retain registration for the period July 2014 to June 2015.
- 16,673 (94.4%) of doctors retained registration.
- The female: male ratio among doctors retaining registration was 4.1:5.9 and 23.3% of doctors who retained registration were aged 55 years and older.
- 31.9% of specialists were aged 55 years and older; the proportion of older doctors varied across specialty with Public Health Medicine (54.5%), Occupational Medicine (51.2%), Psychiatry (39.9%), General Surgery (37.8%) and General Practice (35.7%) among the larger specialities with higher than average proportions of older doctors.
- 64.3% 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 4.0:3.6:1
- The top three areas most commonly reported by doctors as their current area of practice were General Practice, General (Internal) Medicine, and Anaesthesia.

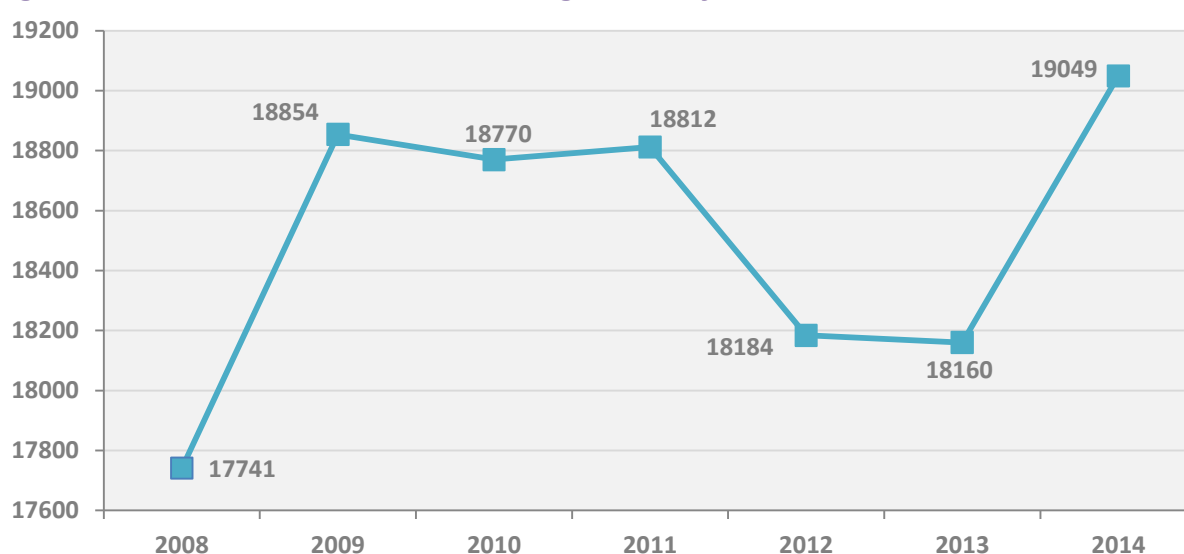
NUMBER OF DOCTORS REGISTERED

In June 2014 the Medical Council invited 17,668 doctors to retain registration for the period July 2014 to June 2015. Of these, 16,673 doctors retained registration, 995 doctors did not, constituting an exit rate of 5.6% from the Register. In total, 16,587 doctors returned non-statutory declaration questions regarding their current practice arrangements (i.e. 99.5% of all doctors 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 2014, 19,049 doctors were registered with the Medical Council.

The trend in total number of doctors registered at year-end for the last seven years is shown in Figure 2.

Figure 2: Trend in total number of doctors registered at year end, 2008-2014



GENDER AND AGE CHARACTERISTICS OF DOCTORS RETAINED ON THE REGISTER

Table 1: Gender and age profile of doctors retained in the Register, 2014

Characteristic	%
Gender	
Female	40.8%
Male	59.2%
Age Category	
Under 25	0.1%
25-34	23.7%
35-44	29.0%
45-54	23.9%
55-64	16.0%
65 and over	7.3%

Figure 3: Gender of doctors retained in the Register, 2014

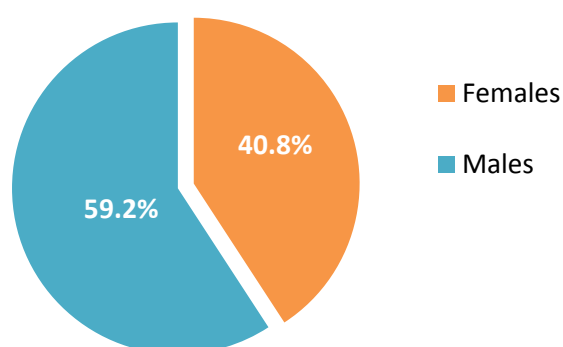


Figure 4: Age profile of doctors retained in the Register, 2014

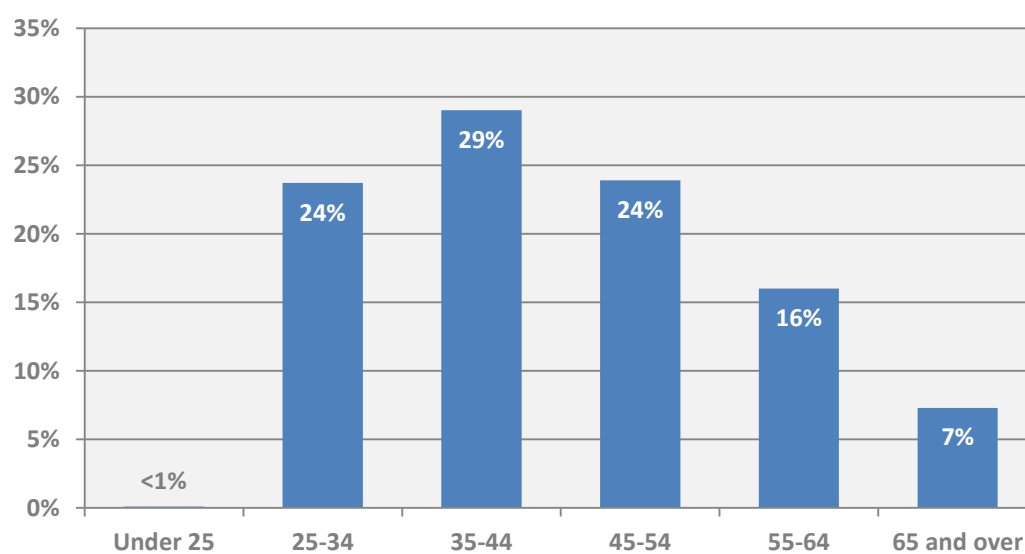


Figure 5: Population pyramid, all doctors retained in the Register, 2014

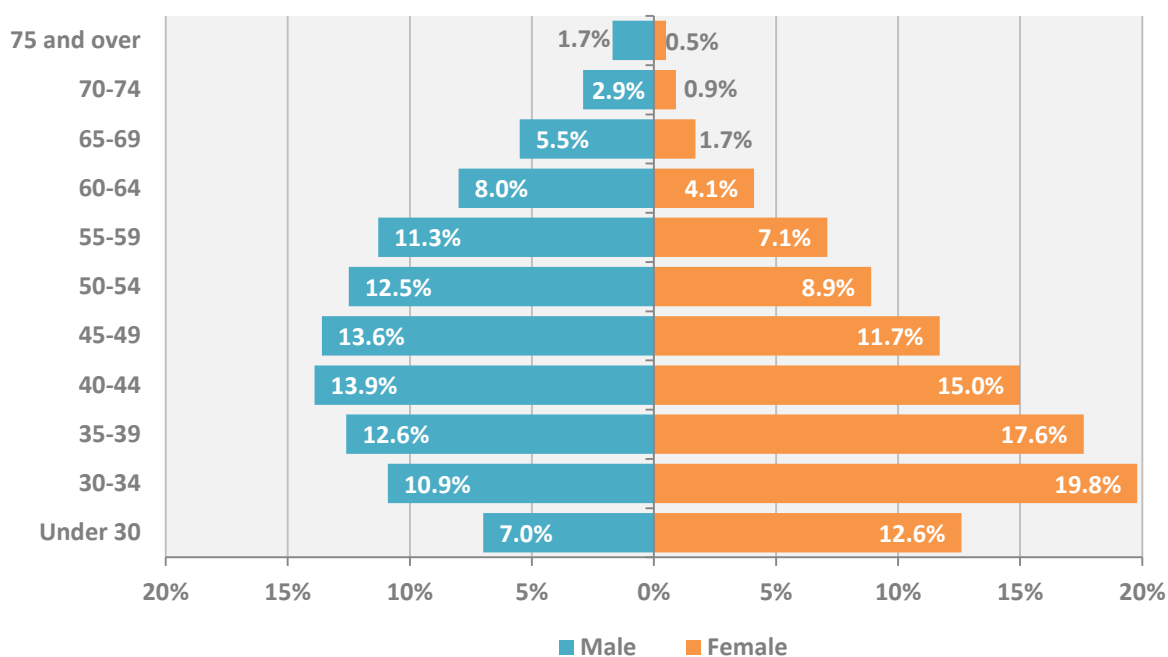


Figure 6: Population pyramid, all doctors who graduated (basic medical qualification) from Irish medical schools retained in the Register, 2014

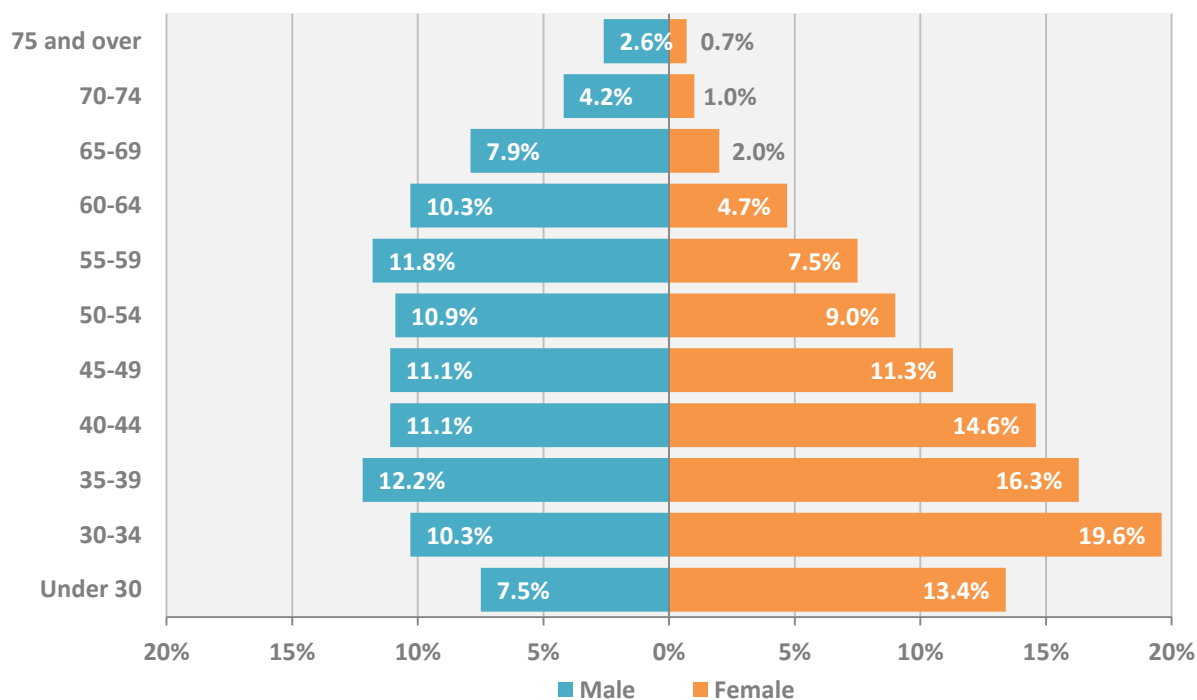


Figure 7: Comparing numbers of doctors within age groups, by gender, for all Irish qualified doctors retained in the Register 2014

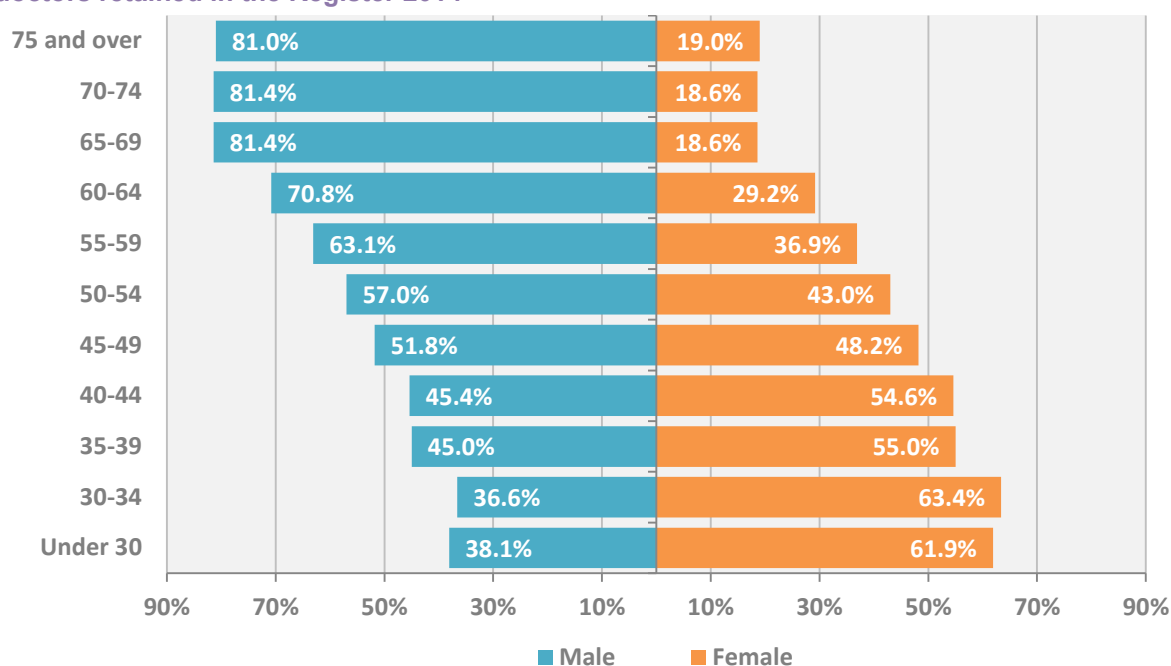


Table 2: Proportions of doctors aged 55 and over by specialty*

Specialty	No. of specialists who are 55 and over	% of speciality 55 and over
Anaesthesia	151	27.4%
Cardiology	25	24.0%
Cardiothoracic Surgery	4	11.8%
Chemical Pathology	3	27.3%
Child and Adolescent Psychiatry	31	26.7%
Clinical Genetics	1	16.7%
Clinical Neurophysiology	1	10.0%
Clinical Pharmacology and Therapeutics	1	12.5%
Dermatology	14	23.7%
Emergency Medicine	15	16.9%
Endocrinology and Diabetes Mellitus	4	8.3%
Gastroenterology	19	26.8%
General (Internal) Medicine	75	20.4%
General Practice	1031	35.7%
General Surgery	110	37.8%
Genito-Urinary Medicine	3	50.0%
Geriatric Medicine	13	20.3%
Haematology	0	0.0%
Haematology (Clinical and Laboratory)	19	25.3%
Histopathology	58	33.0%
Immunology (Clinical and Laboratory)	1	12.5%
Infectious Diseases	1	6.7%
Medical Oncology	8	15.4%
Microbiology	25	32.5%
Nephrology	8	22.9%
Neurology	10	17.2%
Neuropathology	2	40.0%
Neurosurgery	11	40.7%
Obstetrics and Gynaecology	83	33.2%
Occupational Medicine	42	51.2%

Specialty	No. of specialists who are 55 and over	% of speciality that are 55 and over
Ophthalmic Surgery	26	32.9%
Ophthalmology	42	33.1%
Oral and Maxillo-Facial Surgery	6	42.9%
Otolaryngology	25	29.1%
Paediatric Cardiology	2	50.0%
Paediatric Surgery	6	46.2%
Paediatrics	75	24.7%
Palliative Medicine	11	22.9%
Pharmaceutical Medicine	4	44.4%
Plastic, Reconstructive and Aesthetic Surgery	18	27.3%
Psychiatry	163	39.9%
Psychiatry of Learning Disability	14	60.9%
Psychiatry of Old Age	8	16.0%
Public Health Medicine	54	54.5%
Radiation Oncology	14	27.5%
Radiology	90	25.6%
Rehabilitation Medicine	3	25.0%
Respiratory Medicine	20	35.1%
Rheumatology	14	31.8%
Sports and Exercise Medicine	7	28.0%
Trauma and Orthopaedic Surgery	57	30.8%
Tropical Medicine	1	100.0%
Urology	19	30.6%

*Specialties with *less than average* proportions of doctors aged 55+ within them are highlighted in *green*;
Specialties with *higher than average* proportions of doctors aged 55+ within them are highlighted in *orange*.
31.9% of all specialists are aged 55+

WORLD REGION OF GRADUATION OF REGISTERED DOCTORS

Figure 8: World region² of graduation (basic medical qualification) for doctors who retained registration, 2014

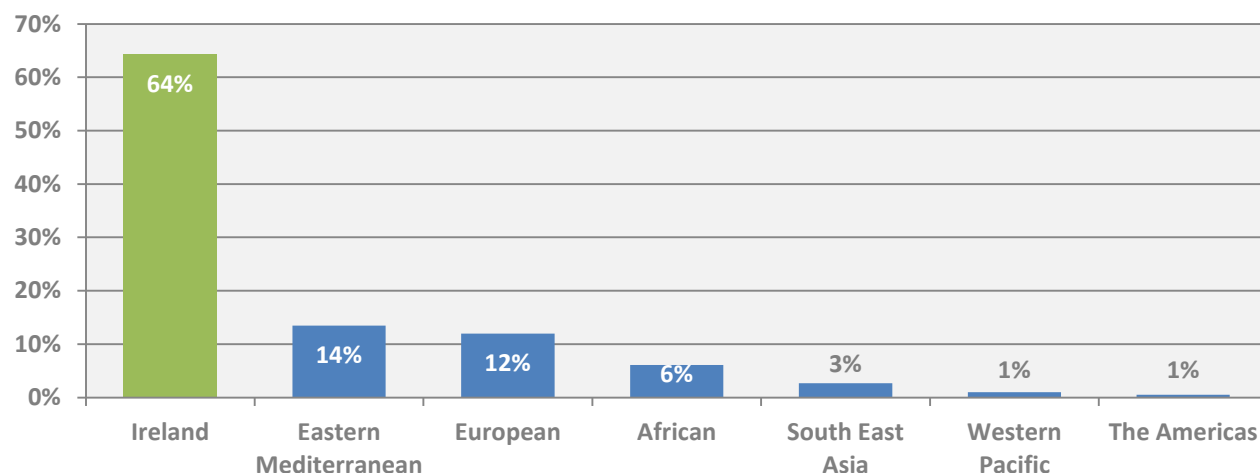
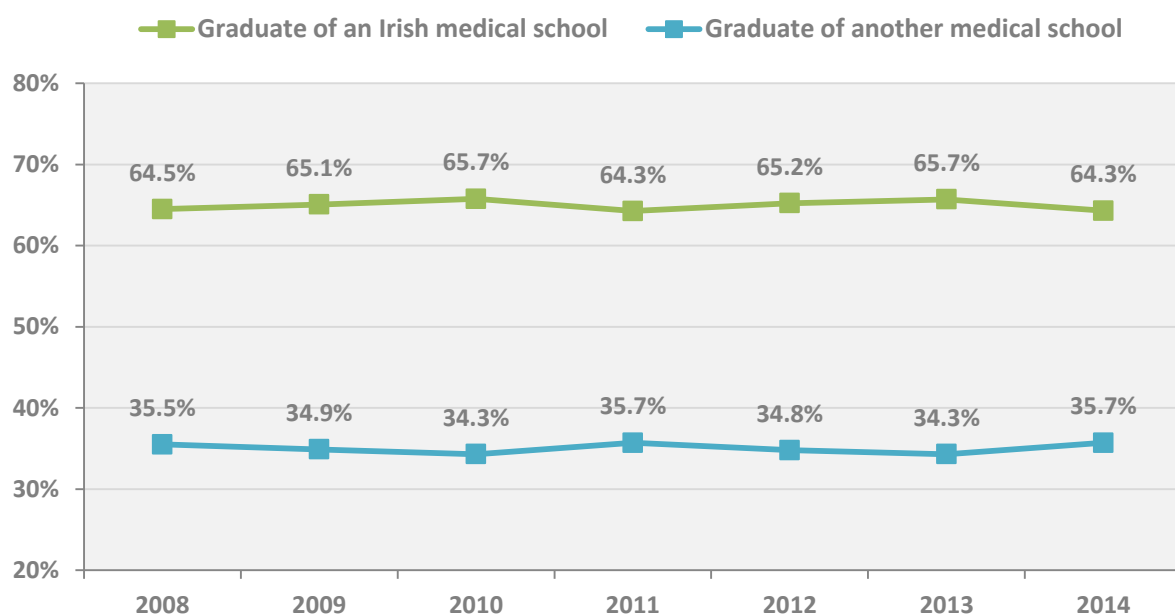


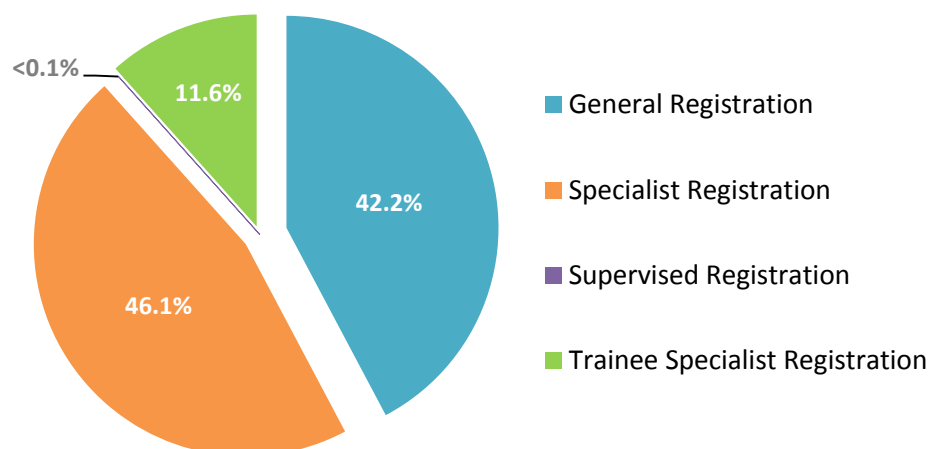
Figure 9: Trend in proportion of doctors by country of qualification (2008-2014)



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, 2014



SPECIALTY AREAS OF DOCTORS ON THE REGISTER

Table 3: Recognised specialisations* of Specialist Division doctors retaining registration, 2014

Specialty Area	N	%
Anaesthesia	553	6.5%
Cardiology	129	1.5%
Cardiothoracic Surgery	34	0.4%
Chemical Pathology	11	0.1%
Child and Adolescent Psychiatry	121	1.4%
Clinical Genetics	8	0.1%
Clinical Neurophysiology	12	0.1%
Clinical Pharmacology and Therapeutics	14	0.2%
Dermatology	60	0.7%
Emergency Medicine	92	1.1%
Endocrinology and Diabetes Mellitus	78	0.9%
Gastroenterology	126	1.5%
General (Internal) Medicine	659	7.7%
General Practice	2948	34.5%
General Surgery	295	3.5%
Genito-Urinary Medicine	8	0.1%
Geriatric Medicine	110	1.3%
Haematology	3	0.0%
Haematology (Clinical and Laboratory)	78	0.9%
Histopathology	180	2.1%
Immunology (Clinical and Laboratory)	8	0.1%
Infectious Diseases	28	0.3%
Medical Oncology	55	0.6%
Microbiology	80	0.9%
Nephrology	58	0.7%
Neurology	64	0.7%
Neuropathology	6	0.1%
Neurosurgery	27	0.3%
Obstetrics and Gynaecology	250	2.9%
Occupational Medicine	98	1.1%
Ophthalmic Surgery	102	1.2%
Ophthalmology	143	1.7%
Oral and Maxillo-Facial Surgery	14	0.2%
Otolaryngology	86	1.0%
Paediatric Cardiology	4	0.0%
Paediatric Surgery	14	0.2%
Paediatrics	311	3.6%
Palliative Medicine	48	0.6%
Pharmaceutical Medicine	10	0.1%
Plastic, Reconstructive and Aesthetic Surgery	66	0.8%
Psychiatry	471	5.5%
Psychiatry of Learning Disability	33	0.4%
Psychiatry of Old Age	77	0.9%
Public Health Medicine	107	1.3%
Radiation Oncology	52	0.6%
Radiology	352	4.1%
Rehabilitation Medicine	15	0.2%
Respiratory Medicine	105	1.2%
Rheumatology	65	0.8%
Sports and Exercise Medicine	30	0.4%
Trauma and Orthopaedic Surgery	186	2.2%
Tropical Medicine	2	0.0%
Urology	62	0.7%

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

Table 4: Area of practice* for doctors who retained registration, 2014

Area of practice	N	%
Anaesthesia	1089	6.7%
Medicine	3259	20.2%
Emergency Medicine	651	4%
General Practice	4353	27%
Obstetrics & Gynaecology	653	4%
Occupational Medicine	133	0.8%
Ophthalmology	175	1.1%
Public Health Medicine	270	1.7%
Sports & Exercise Medicine	40	0.2%
Surgery	2201	13.6%
Pathology	550	3.4%
Paediatrics	862	5.3%
Psychiatry	1276	7.9%
Radiology	626	3.9%
Total	16138	100%

**Registered doctors are asked to identify one area of practice so total equals total number of respondents.
96.8% of doctors retaining registration responded to this question.*

MEDICAL PRACTITIONER DENSITY IN IRELAND

Key points

- At the end of 2014, there were 413.3 doctors per 100,000 people in Ireland. Taking only those who were working in Ireland, there were 361.7 doctors per 100,000 people in Ireland.
- Areas of practice with the highest density of specialists were General Practice (64.0 specialists per 100,000 population), General Internal Medicine (14.3 specialists per 100,000 population), Anaesthesia (12.0 specialists per 100,000 population), Psychiatry (10.2 specialists per 100,000 population) and Radiology (7.6 specialists per 100,000 population).
- Estimates for licensed to practise and professionally active doctors in Ireland are compared with a selection of OECD countries.
- The density of General Practitioners varied significantly between counties. Galway, Cork, Waterford and Westmeath had the highest density of General Practitioners per 100,000 of the population, with Longford, Kilkenny and Monaghan having the lowest.

DENSITY OF MEDICAL PRACTITIONERS

Table 5: General & specialty-specific estimates of medical practitioner density in Ireland, 2014³

Specialty Area	Per 100,000 population – all doctors	Per 100,000 population – doctors who practise only in Ireland
Density of retained medical practitioners	361.7	275.5
Density of medical practitioners, end 2014	413.3	314.8
Density of retained specialists, by specialty		
Anaesthesia	12.0	9.3
Cardiology	2.8	2.0
Cardiothoracic Surgery	0.7	0.4
Chemical Pathology	0.2	0.1
Child and Adolescent Psychiatry	2.6	2.4
Clinical Genetics	0.2	0.1
Clinical Neurophysiology	0.3	0.2
Clinical Pharmacology and Therapeutics	0.3	0.2
Dermatology	1.3	1.1
Emergency Medicine	2.0	1.6
Endocrinology and Diabetes Mellitus	1.7	1.2
Gastroenterology	2.7	2.0
General (Internal) Medicine	14.3	10.7
General Practice	64.0	58.4
General Surgery	6.4	4.8
Genito-Urinary Medicine	0.2	0.2
Geriatric Medicine	2.4	2.0
Haematology	0.1	0.0
Haematology (Clinical and Laboratory)	1.7	1.5
Histopathology	3.9	2.9
Immunology (Clinical and Laboratory)	0.2	0.1
Infectious Diseases	0.6	0.5
Medical Oncology	1.2	0.9
Microbiology	1.7	1.3
Nephrology	1.3	0.9
Neurology	1.4	1.1
Neuropathology	0.1	0.1
Neurosurgery	0.6	0.5
Obstetrics and Gynaecology	5.4	4.0
Occupational Medicine	2.1	1.6
Ophthalmic Surgery	2.2	1.6
Ophthalmology	3.1	2.2
Oral and Maxillo-Facial Surgery	0.3	0.2
Otolaryngology	1.9	1.3
Paediatric Cardiology	0.1	0.0
Paediatric Surgery	0.3	0.2
Paediatrics	6.7	4.7
Palliative Medicine	1.0	0.8
Pharmaceutical Medicine	0.2	0.2
Plastic, Reconstructive and Aesthetic Surgery	1.4	0.8
Psychiatry	10.2	8.6
Psychiatry of Learning Disability	0.7	0.7
Psychiatry of Old Age	1.7	1.5
Public Health Medicine	2.3	2.0
Radiation Oncology	1.1	0.8

³Estimates for the population of Ireland in 2014 were taken from

<http://www.cso.ie/en/releasesandpublications/er/pme/populationandmigrationestimatesapril2014>

Specialty Area	Per 100,000 population – all doctors	Per 100,000 population – doctors who practise only in Ireland
Radiology	7.6	5.8
Rehabilitation Medicine	0.3	0.2
Respiratory Medicine	2.3	1.8
Rheumatology	1.4	1.2
Sports and Exercise Medicine	0.7	0.4
Trauma and Orthopaedic Surgery	4.0	3.1
Tropical Medicine	0.0	0.0
Urology	1.3	1.0

Table 6: Estimates of medical practitioner density in Ireland by area of practice, 2014

Area of practice	Per 100,000 population – all retained doctors*	Per 100,000 population – retained doctors practising only in Ireland**
Anaesthesia	23.6	17.9
Medicine	70.7	53.7
Emergency Medicine	14.1	9.8
General Practice	94.4	80.7
Obstetrics & Gynaecology	14.2	10.4
Occupational Medicine	2.9	2.2
Ophthalmology	3.8	2.9
Public Health Medicine	5.9	4.9
Sports & Exercise Medicine	0.9	0.5
Surgery	47.7	33.5
Pathology	11.9	9.1
Paediatrics	18.7	14.4
Psychiatry	27.7	23.0
Radiology	13.6	9.2
Total	350.1	272.1

*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**, 2014⁴

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	96	52	65
Cavan	260	43	105
Clare	84	39	55
Cork	272	57	143
Donegal	194	50	99
Dublin	396	48	191
Galway	386	60	188
Kerry	204	49	104
Kildare	116	33	56
Kilkenny	226	31	102
Laois	212	49	96
Leitrim	63	35	41
Limerick	315	50	149
Longford	64	32	36
Louth	299	50	135
Mayo	215	44	91
Meath	107	36	56
Monaghan	84	31	47
Offaly	222	38	107
Roscommon	126	51	74
Sligo	426	34	165
Tipperary	157	46	77
Waterford	357	57	167
Westmeath	256	57	113
Wexford	145	39	68
Wicklow	91	45	53
Total	268	47	130

*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.

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 density⁵ in Ireland by county, ** for the under 5s and adults aged 70 and over, 2014

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	121	126	66	68
Cavan	308	310	51	51
Clare	110	102	51	48
Cork	352	334	73	69
Donegal	245	216	64	56
Dublin	542	528	66	64
Galway	510	491	79	76
Kerry	297	211	71	51
Kildare	129	236	36	67
Kilkenny	288	275	40	38
Laois	227	315	52	73
Leitrim	81	61	45	33
Limerick	425	386	68	61
Longford	77	77	39	38
Louth	353	409	60	69
Mayo	305	208	63	43
Meath	112	189	38	64
Monaghan	103	99	38	36
Offaly	272	282	47	49
Roscommon	174	124	70	50
Sligo	606	448	48	35
Tipperary	209	172	62	51
Waterford	470	408	75	65
Westmeath	321	330	71	73
Wexford	182	173	49	47
Wicklow	109	130	54	64

*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.

Table 9: Estimates of density of licensed to practise doctors from OECD countries.⁶

Country	Density per 1000 population of all licensed to practise physicians
Chile*	1.74
Korea*	2.56
Canada*	2.68
New Zealand**	3.26
Poland*	3.56
United Kingdom**	3.74
Luxembourg**	3.97
Australia*	4.03
Portugal*	4.10
Ireland***	4.13
Israel**	4.16
Finland*	4.87
Spain*	4.89
Belgium*	5.00
Hungary*	5.00
Norway*	5.55
Germany*	5.71
Sweden*	6.01
Italy*	6.38
Iceland**	7.25

*2012 data

** 2013 data

***2014 data

⁶ Definition of 'licensed to practise doctors' and values for OECD Countries 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 doctors from OECD countries.⁷

Country	Density per 1000 population of all professionally active physicians
Turkey*	1.73
Japan*	2.36
Poland*	2.41
Canada*	2.50
Slovenia*	2.64
New Zealand**	2.82
Ireland***	3.04
Luxembourg**	3.13
Israel**	3.14
Finland*	3.29
France*	3.32
Slovak Republic*	3.36
Australia*	3.51
Iceland**	3.65
Switzerland*	3.98
Spain*	4.08
Italy*	4.14
Germany*	4.34
Norway*	4.87

*2012 data

** 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 2014

Key points

- 5.6% of doctors exited the Register at the time of the annual retention process in 2014; the exit rate for graduates of Irish medical schools was 4.2%.
- The exit rate among males was higher than the exit rate among females (5.9% compared to 5.2%).
- For doctors aged under 65, the exit rate was higher among younger doctors, 7.2% and 5.9% for doctors aged 25-29 years and 30-34 years respectively (all doctors); and an exit rate of 5.5% and 4.3% for doctors aged 25-29 years and 30-34 years respectively (graduates of Irish medical schools).
- Among graduates of Irish medical schools aged 25-29, there was a relative decrease of 44% in the exit rate between 2013 and 2014 (7.9% in 2013 to 5.5% in 2014).
- Across the divisions of the Register, the highest exit rate was observed in the Supervised Division. Since registration in this Division is limited under law to a 2 year period, the high exit rate among doctors registered in the Supervised Division is expected.
- A relatively low exit rate was observed among doctors registered in the Specialist Division (3.5%). However, a higher than average exit rate was observed among some specialties including Cardiology (8%), Child and Adolescent Psychiatry (7.2%) and Histopathology (6.9%).

CHARACTERISTICS OF DOCTORS EXITING THE REGISTER

Table 11: Exit rate 2014, across key demographic characteristics

Characteristic	Exit Rate (all doctors)	Exit Rate (graduates of Irish medical schools)
All doctors	5.6%	4.2%
Gender		
Male	5.9%	4.4%
Female	5.2%	4.0%
Age category		
Under 25	0%	0%
25-34	7.2%	5.5%
35-44	5.9%	4.3%
45-54	3.8%	1.6%
55-64	3.9%	2.5%
65 and over	9.0%	8.5%

Figure 11: Exit rate 2014 per age group (all doctors)

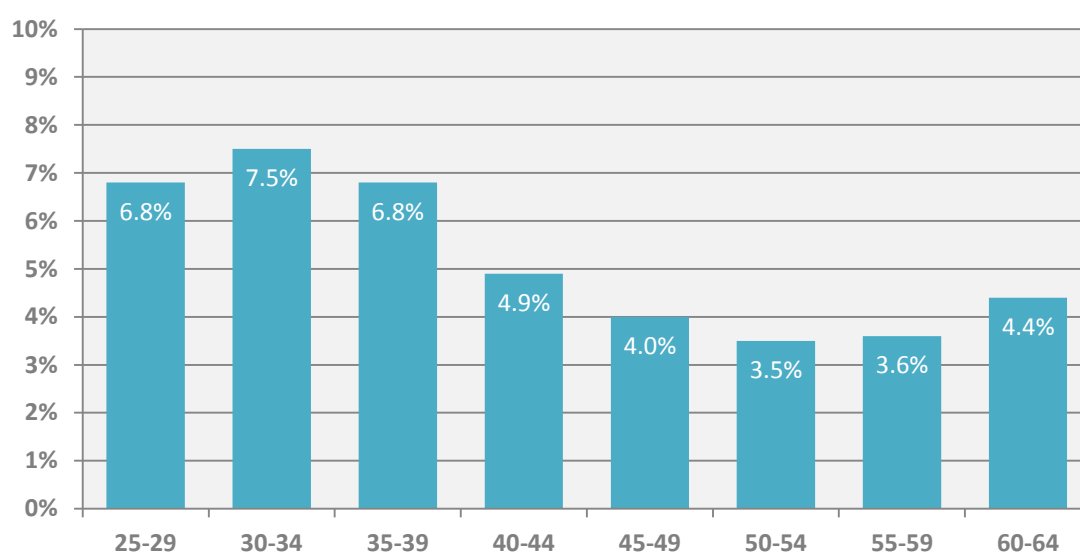


Figure 12: Exit rate 2014 per age group (doctors who graduated from Irish medical schools)

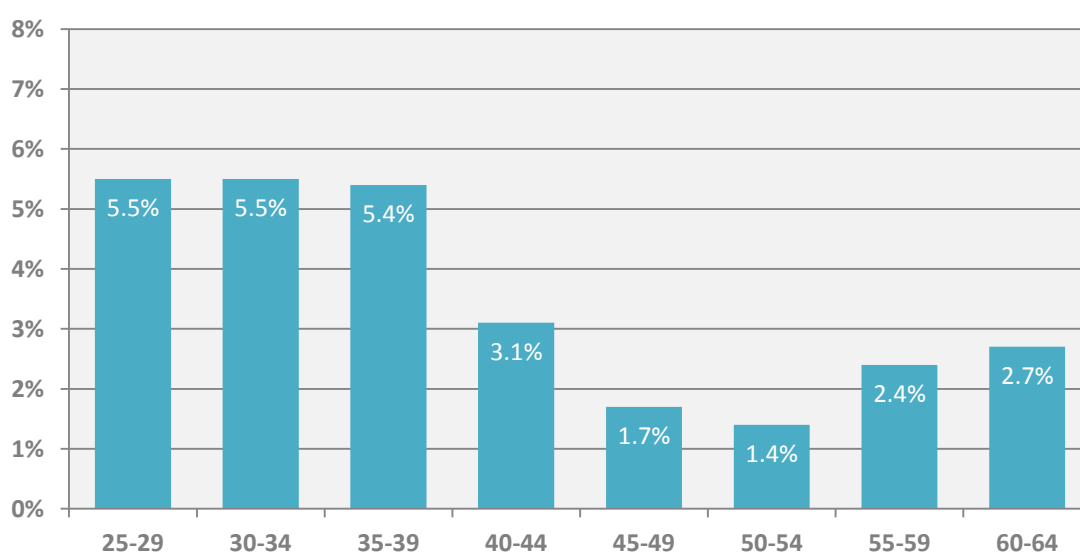


Figure 13: Exit rates for 2013 and 2014 per age group (graduates from Irish medical schools)

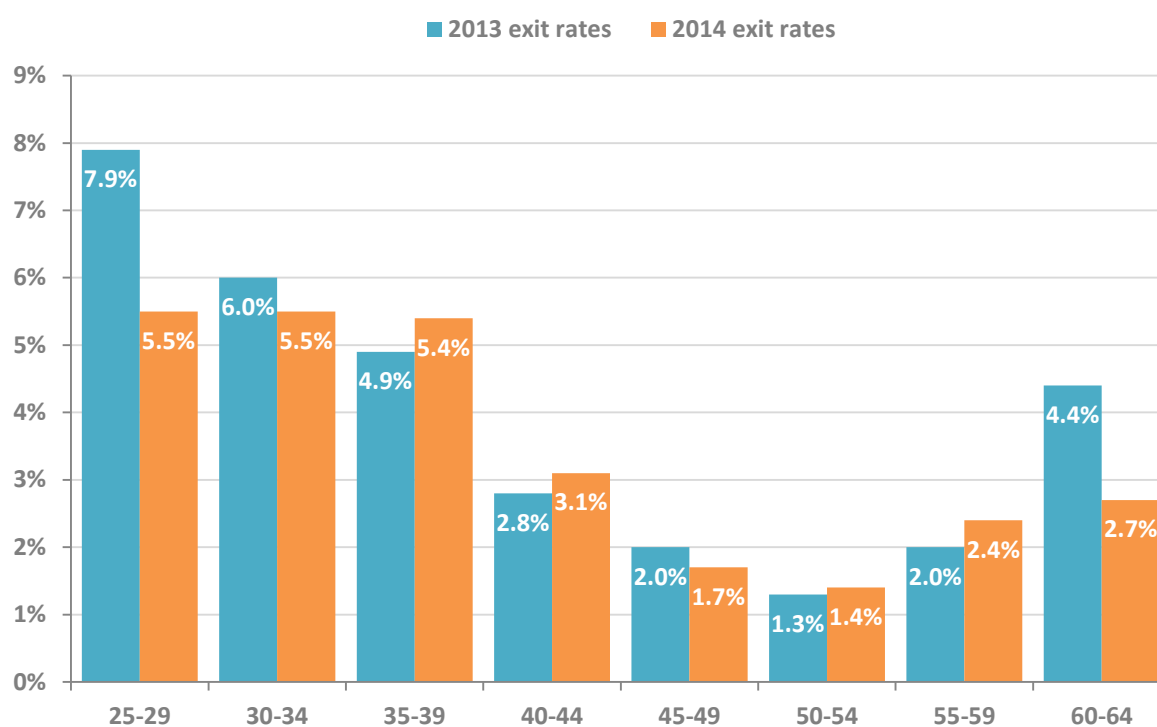
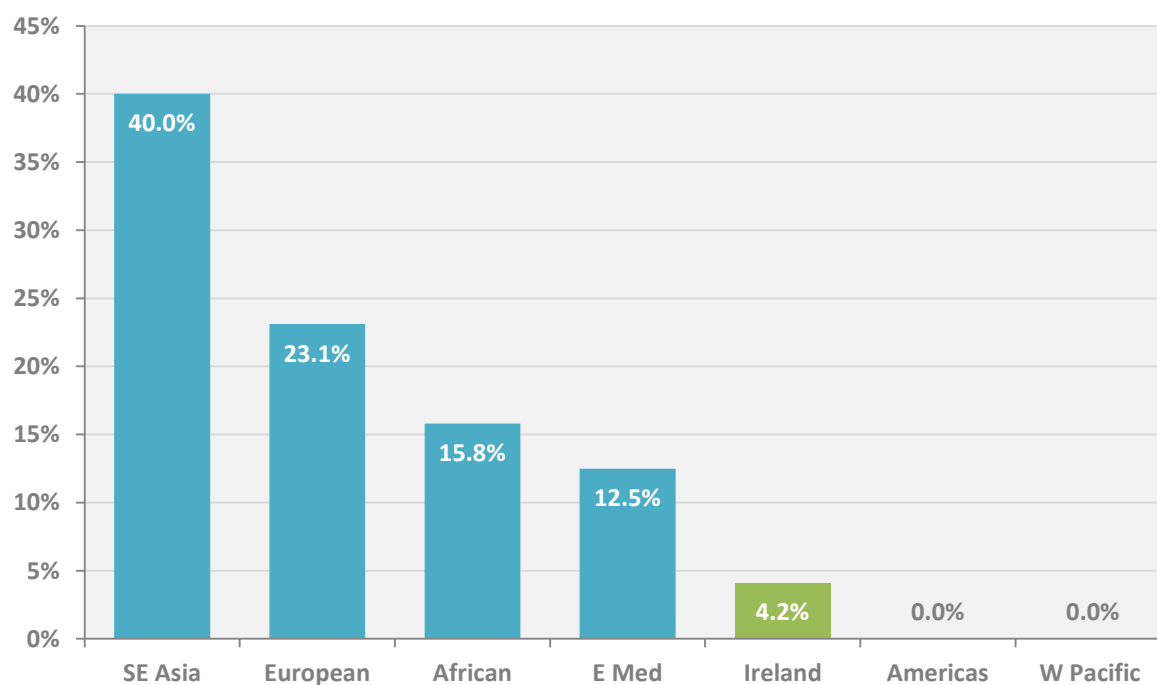


Figure 14: Exit rate 2014 by world region of basic medical qualification



EXIT RATES AND DIVISION OF REGISTRATION

Figure 15: Exit rate 2014 by registration division

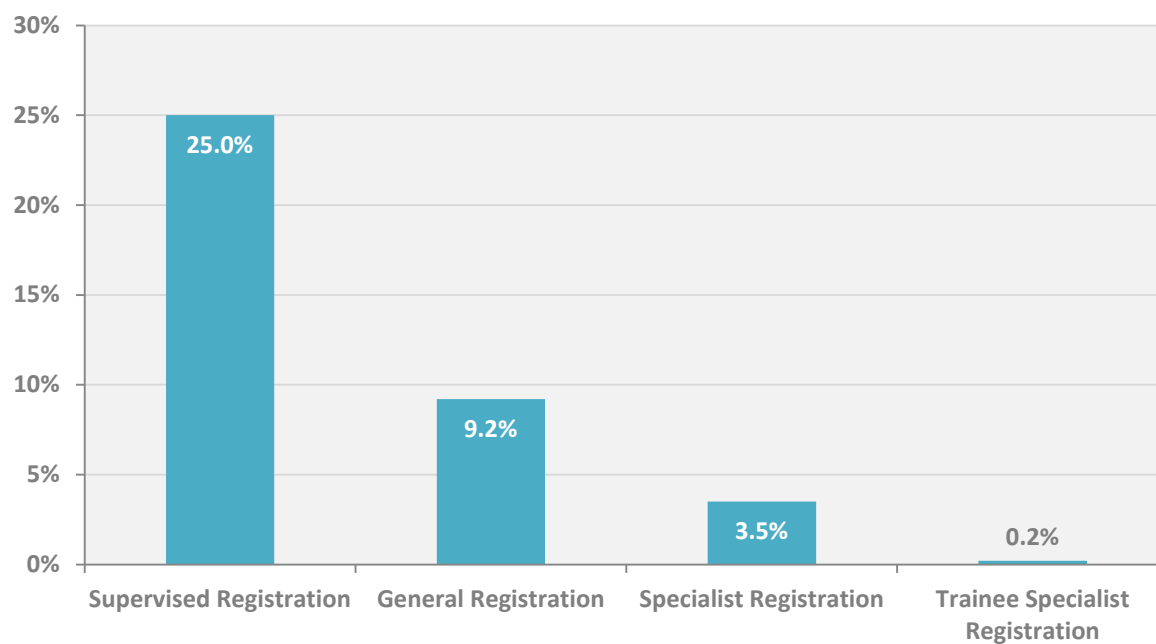


Table 12: Exit rate by specialty, specialists only*

Specialty	No. Exited	% of specialty
Anaesthesia	28	4.8%
Cardiology	9	8.0%
Child and Adolescent Psychiatry	9	7.2%
General (Internal) Medicine	14	3.7%
General Practice	65	2.2%
General Surgery	13	4.3%
Histopathology	13	6.9%
Obstetrics and Gynaecology	13	4.9%
Ophthalmology	8	6.0%
Paediatrics	15	4.7%
Psychiatry	22	5.1%
Radiology	15	4.1%
Trauma and Orthopaedic Surgery	6	3.2%

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

DOCTORS ENTERING THE REGISTER 2014

Key points

- During 2014, 1,958 doctors entered the Register for the first time.
- Over half (53.7%) of new entrants were aged under 30 years.
- During 2014, 666 doctors entered the Specialist Division for the first time, bringing the proportion of doctors registered with the Medical Council who were specialist to 41.6%.
- 63.8% of new specialists were aged 40 years or under at the time of entry to the Specialist Division; the age profile of new specialists varied across specialties.
- 49.9% of doctors with a new specialty were graduates of an Irish medical school and 43.5% had completed an Irish training programme.
- The relative growth in specialists from 2013-2014 was, on average, 2.6% and varied by specialty; eleven specialties, experienced a relative reduction in the number of specialists in this period, with Oral and Maxillo-Facial Surgery Cardiology and Occupational Medicine experiencing the largest relative reduction.

PROFILE OF DOCTORS ENTERING THE REGISTER

During 2014, 1,958 doctors entered the Register for the first time.

Figure 16: Gender of doctors entering the Register in 2014

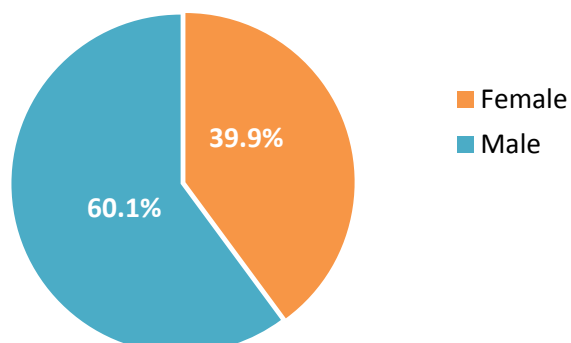


Figure 17: Age of doctors entering the Register in 2014

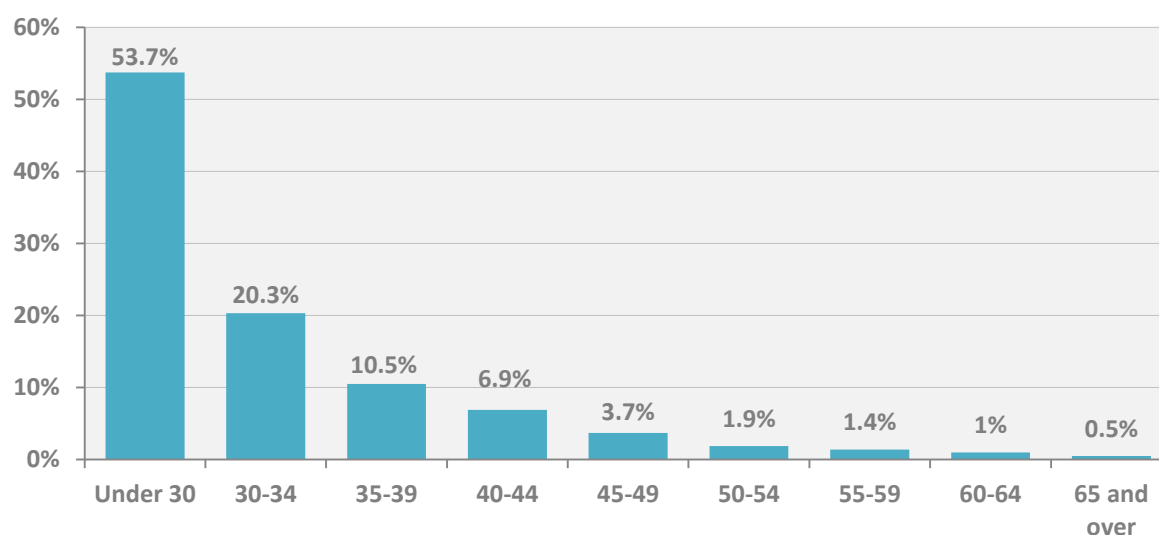
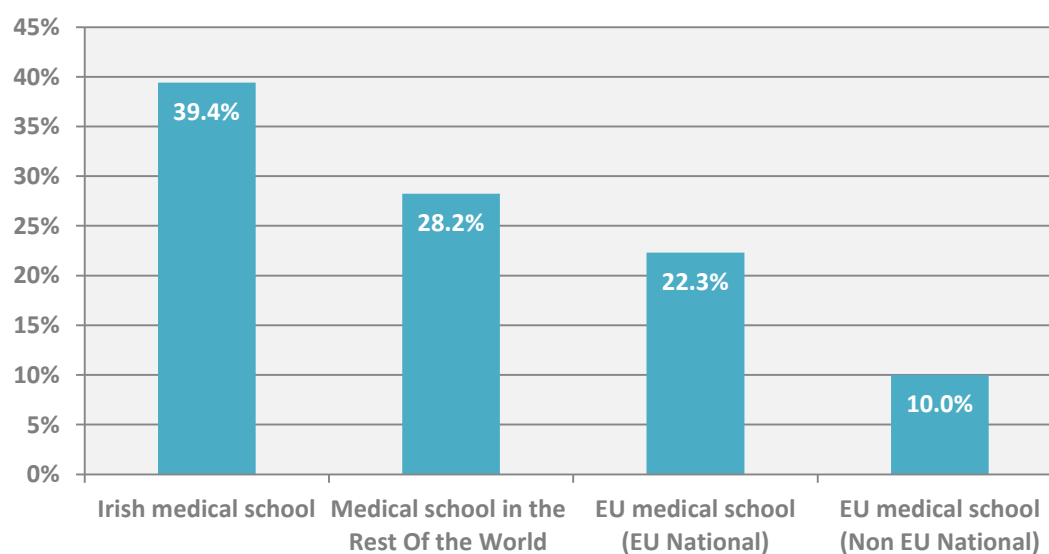


Figure 18: Region of qualification for new entrants to the Register



NEW SPECIALISTS

In 2014, 666 doctors entered the Specialist Division for the first time.

Figure 19: Proportion of doctors registered in the Specialist Division at year end, 2009-2014

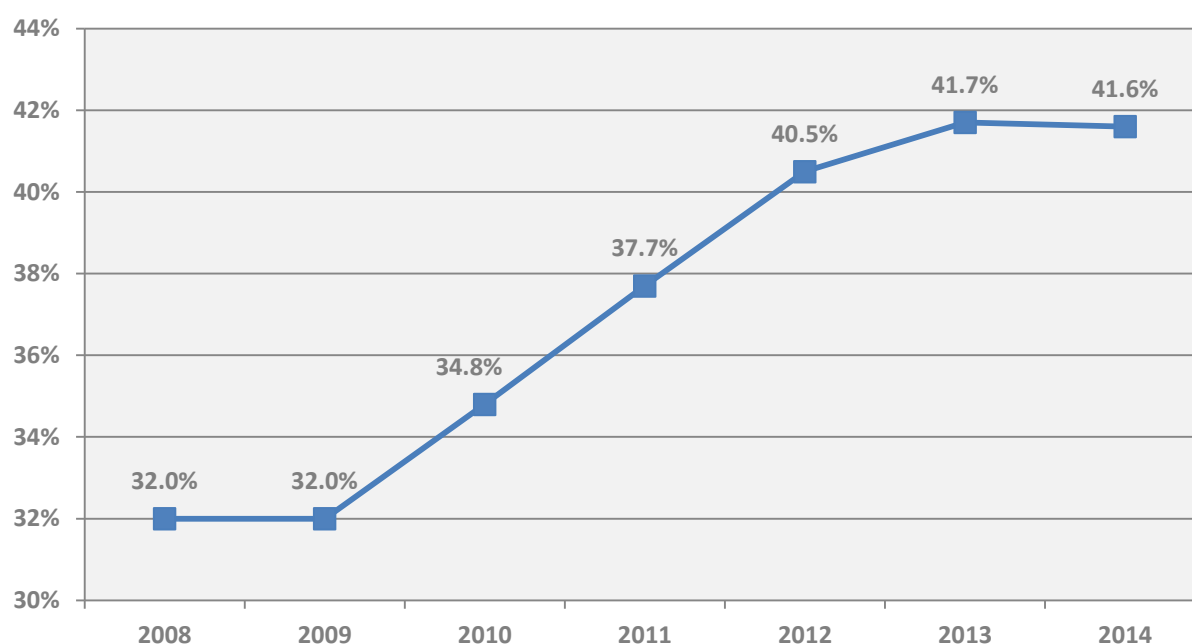


Table 13: Gender, Region of qualification and age of new specialists in 2014

Characteristic	N	%
Gender		
Female	300	45%
Male	366	55%
Region in which Basic Medical Qualification was awarded		
An Irish medical school	333	50%
An EU medical school (EU National)	208	31%
An EU medical school (Non EU National)	7	1%
A medical school in the rest of the world	118	18%
Age Group		
Under 30	5	0.8%
30-34	171	25.7%
35-39	204	30.6%
40-44	121	18.2%
45-49	79	11.9%
50-54	39	5.9%
55-59	28	4.2%
60-64	12	1.8%
65 and over	7	1.1%
Total	666	100%

Table 14: New specialists in 2014 by specialty area and proportion of these who were less than 40 years of age*

Specialty	New specialists	New specialists aged under 40	
	N	N	%
Anaesthesia	53	30	57%
Cardiology	5	3	60%
Cardiothoracic Surgery	6	1	17%
Chemical Pathology	2	1	50%
Child and Adolescent Psychiatry	10	4	40%
Dermatology	4	2	50%
Emergency Medicine	6	3	50%
Endocrinology and Diabetes Mellitus	6	4	67%
Gastroenterology	11	9	82%
General (Internal) Medicine	46	28	61%
General Practice	244	150	62%
General Surgery	35	19	54%
Geriatric Medicine	2	2	100%
Haematology	2	2	100%
Haematology (Clinical and Laboratory)	3	0	0.0%
Histopathology	15	11	73%
Immunology (Clinical and Laboratory)	1	1	100%
Infectious Diseases	1	0	0%
Medical Oncology	4	3	75%
Microbiology	3	1	33%
Nephrology	4	2	50%
Neurology	10	5	50%
Neurosurgery	1	0	0%
Obstetrics and Gynaecology	33	15	46%
Occupational Medicine	6	3	50%
Ophthalmic Surgery	6	3	50%
Ophthalmology	9	6	67%
Oral and Maxillo-Facial Surgery	3	0	0%
Otolaryngology	4	3	75%
Paediatric Cardiology	1	1	100%
Paediatric Surgery	3	0	0%
Paediatrics	38	25	66%
Palliative Medicine	2	2	100%
Pharmaceutical Medicine	2	1	50%
Plastic, Reconstructive and Aesthetic Surgery	7	3	43%
Psychiatry	25	9	36%
Psychiatry of Learning Disability	3	0	0%
Psychiatry of Old Age	4	2	50%
Public Health Medicine	4	0	0%
Radiation Oncology	8	5	63%
Radiology	30	15	50%
Rehabilitation Medicine	1	0	0%
Respiratory Medicine	8	5	63%
Rheumatology	5	5	100%
Sports and Exercise Medicine	1	0	0%
Trauma and Orthopaedic Surgery	20	16	80%
Urology	7	4	57%
Grand Total	704	404	57%

*Table 13 refers to specialties. A doctor may be entered to the Specialist Division with more than one specialty; hence the total in Table 13 is greater than the total in Table 12.

Table 15: Irish training status of new specialists in 2014, by specialty area.

Specialty	New Specialties	Irish Medical School Graduates		Completed an Irish training programme	
	N	N	%	N	%
Anaesthesia	53	10	19%	12	23%
Cardiology	4	1	25%	1	25%
Cardiothoracic Surgery	6	0	0%	0	0%
Chemical Pathology	2	2	100%	1	50%
Child and Adolescent Psychiatry	10	6	60%	7	70%
Dermatology	4	2	50%	2	50%
Emergency Medicine	5	3	60%	2	40%
Endocrinology and Diabetes Mellitus	6	3	50%	3	50%
Gastroenterology	7	4	57%	4	57%
General (Internal) Medicine	29	12	41%	13	45%
General Practice	241	176	73%	139	58%
General Surgery	35	11	31%	10	29%
Geriatric Medicine	1	1	100%	1	100%
Haematology	2	0	0%	0	0%
Haematology (Clinical and Laboratory)	3	2	67%	1	33%
Histopathology	15	7	47%	8	53%
Immunology (Clinical and Laboratory)	1	0	0%	1	100%
Infectious Diseases	1	0	0%	0	0%
Medical Oncology	4	1	25%	1	25%
Microbiology	3	1	33%	2	67%
Nephrology	2	1	50%	1	50%
Neurology	10	4	40%	5	50%
Neurosurgery	1	0	0%	0	0%
Obstetrics and Gynaecology	33	7	21%	5	15%
Occupational Medicine	6	4	67%	3	50%
Ophthalmic Surgery	6	5	83%	3	50%
Ophthalmology	9	2	22%	4	44%
Oral and Maxillo-Facial Surgery	3	0	0.0%	0	0%
Otolaryngology	4	1	25%	1	25%
Paediatric Cardiology	1	1	100%	0	0%
Paediatric Surgery	3	1	33%	0	0%
Paediatrics	38	7	18%	9	24%
Palliative Medicine	2	2	100%	2	100%
Pharmaceutical Medicine	2	1	50%	0	0%
Plastic, Reconstructive and Aesthetic Surgery	7	4	57%	4	57%
Psychiatry	21	8	38%	9	43%
Psychiatry of Learning Disability	2	2	100%	0	0%
Psychiatry of Old Age	3	3	100%	2	67%
Public Health Medicine	4	3	75%	1	25%
Radiation Oncology	8	5	63%	6	75%
Radiology	30	9	30%	7	23%
Rehabilitation Medicine	1	1	100%	0	0%
Respiratory Medicine	6	3	50%	3	50%
Rheumatology	4	3	75%	3	75%
Sports and Exercise Medicine	1	1	100%	0	0%
Trauma and Orthopaedic Surgery	20	9	45%	10	50%
Urology	7	4	57%	4	57%
Total	666	333	50%	290	44%

Table 16: Percentage change in number of specialists by specialty, 2013-2014

Specialty	% Change 2013-2014
Anaesthesia	0.4%
Cardiology	-5.9%
Cardiothoracic Surgery	-2.9%
Chemical Pathology	11.1%
Child and Adolescent Psychiatry	-2.5%
Clinical Genetics	42.9%
Clinical Neurophysiology	0.0%
Clinical Pharmacology and Therapeutics	0.0%
Dermatology	3.4%
Emergency Medicine	0.0%
Endocrinology and Diabetes Mellitus	6.9%
Gastroenterology	7.0%
General (Internal) Medicine	2.1%
General Practice	4.1%
General Surgery	3.1%
Genito-Urinary Medicine	0.0%
Geriatric Medicine	4.3%
Haematology	0.0%
Haematology (Clinical and Laboratory)	-2.5%
Histopathology	0.5%
Immunology (Clinical and Laboratory)	0.0%
Infectious Diseases	0.0%
Medical Oncology	3.7%
Microbiology	5.3%
Nephrology	-1.6%
Neurology	4.6%
Neuropathology	0.0%
Neurosurgery	0.0%
Obstetrics and Gynaecology	4.6%
Occupational Medicine	-5.5%
Ophthalmic Surgery	0.9%
Ophthalmology	0.8%
Oral and Maxillo-Facial Surgery	-6.7%
Otolaryngology	-2.3%
Paediatric Cardiology	0.0%
Paediatric Surgery	-6.3%
Paediatrics	4.4%
Palliative Medicine	2.4%
Pharmaceutical Medicine	22.2%
Plastic, Reconstructive and Aesthetic Surgery	10.0%
Psychiatry	-0.6%
Psychiatry of Learning Disability	-4.0%
Psychiatry of Old Age	3.1%
Public Health Medicine	2.9%
Radiation Oncology	10.9%
Radiology	1.1%
Rehabilitation Medicine	0.0%

Specialty	% Change 2013-2014
Respiratory Medicine	8.2%
Rheumatology	0.0%
Sports and Exercise Medicine	-3.3%
Trauma and Orthopaedic Surgery	3.9%
Tropical Medicine	0.0%
Urology	1.7%

*Rows highlighted in green have annual percentage growth $\geq 5\%$;
rows highlighted in orange have annual percentage growth $\leq 0\%$.

GLOBALISATION OF MEDICAL PRACTICE IN IRELAND

Key points

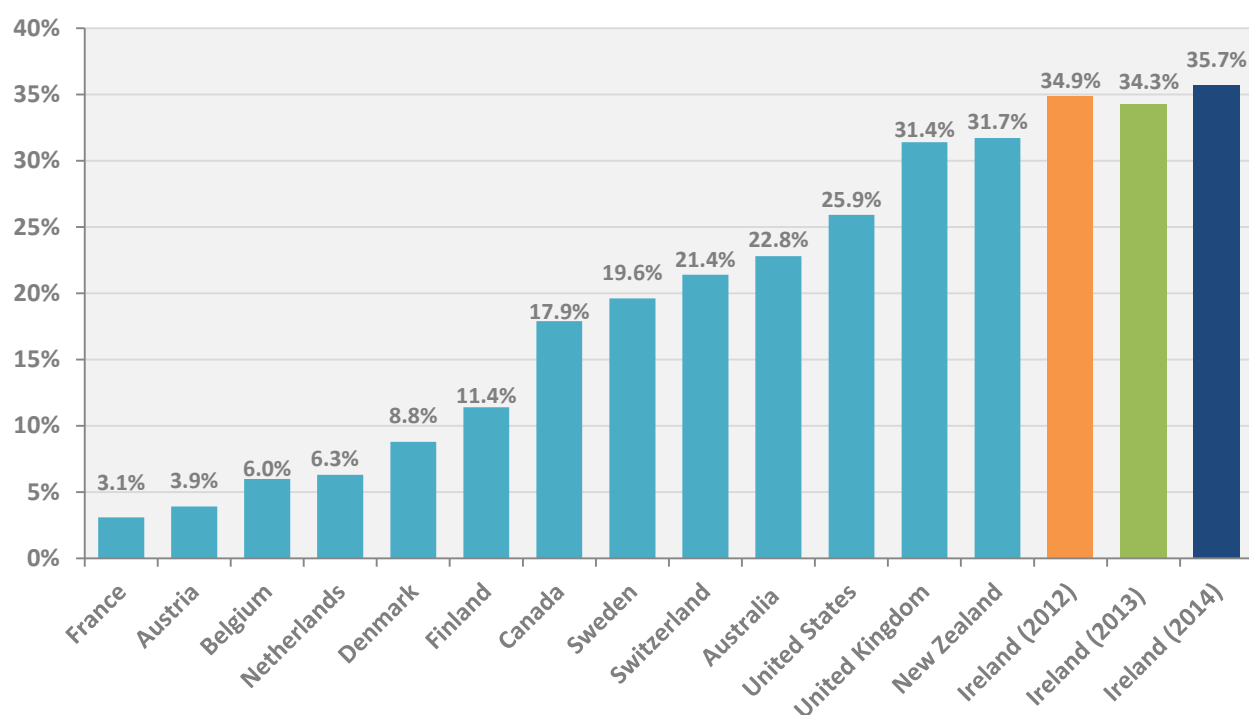
- In 2014, 35.7% of doctors retaining registration with the Medical Council graduated with a basic medical qualification from a medical school outside Ireland; this compares with 34.3% in 2013. Ireland's reliance on international medical graduates is among the highest compared with other OECD countries.
- The five leading countries of qualification for doctors who did not qualify in Ireland were Pakistan, South Africa, the United Kingdom, Sudan and India.
- The skill mix and roles of international medical graduates were different to Irish medical graduates. 29.7% of doctors who graduated from Irish medical schools are registered in the General Division, compared with 65% of international medical graduates; 74.8% of doctors who work as non-consultant hospital doctors and who were not in training were international medical graduates.
- The proportion of international graduates in the medical workforce varied across areas of practice; the leading areas of practice with high proportions of international medical graduates were Obstetrics and Gynaecology (55%), Emergency Medicine (52.5%) and Surgery (50.6%).

INTERNATIONALLY-QUALIFIED DOCTORS RETAINING REGISTRATION

Table 17: World region of basic medical qualification for doctors retaining registration, 2014

World region	N	%
Ireland	10715	64.3%
Eastern Mediterranean region	2242	13.5%
European region	1993	12.0%
African region	1022	6.1%
South East Asia region	446	2.7%
Western Pacific region	159	1.0%
The Americas region	85	0.5%

Figure 20: Proportion of international medical graduates in the workforce, OECD 2009⁸



⁸ OECD (2009), "Foreign-trained physicians", in Health at a Glance 2009: OECD Indicators, OECD Publishing.
http://dx.doi.org/10.1787/health_glance-2009-27-en

PROFILE OF INTERNATIONALLY-QUALIFIED DOCTORS

Table 18: Country of basic medical qualification for doctors retained in the Register, 2014

Country	N	% of total
Pakistan	1238	20.8%
South Africa	642	10.8%
United Kingdom	603	10.1%
Sudan	571	9.6%
India	421	7.1%
Nigeria	356	6%
Romania	355	6%
Egypt	208	3.5%
Poland	197	3.3%
Hungary	174	2.9%
Australia	106	1.8%
Czech Republic	97	1.6%
Germany	95	1.6%
Iraq	91	1.5%
Libyan Arab Jamahiriya	72	1.2%
Latvia	65	1.1%
Bulgaria	55	0.9%
Slovakia	54	0.9%
Italy	49	0.8%
Spain	35	0.6%
Lithuania	29	0.5%
New Zealand	31	0.5%
Syrian Arab Republic	28	0.5%
United States of America	27	0.5%
Netherlands	22	0.4%
Russian Federation	23	0.4%
Bangladesh	20	0.3%
France	16	0.3%
Ukraine	18	0.3%
Belarus	13	0.2%
Belgium	13	0.2%
Croatia	11	0.2%
Greece	13	0.2%
Haiti	10	0.2%
Jordan	9	0.2%
Philippines	11	0.2%
Republic of Moldova	10	0.2%
Total	5788	97.4%

Doctors from the following countries were also employed in Ireland; in each case the number represents 0.1%, or less, of the total number of doctors registered: Albania, Algeria, Argentina, Armenia, Austria, Bahrain, Bolivia, Brazil, Cameroon, Canada, Cayman Islands, China, Colombia, Congo, Costa Rica, Cuba, Denmark, Ethiopia, Finland, Georgia, Ghana, Grenada, Islamic Republic of Iran, Kazakhstan, Kenya, Kuwait, Kyrgyzstan, Lebanon, Malaysia, Malta, Mexico, Morocco, Myanmar, Northern Ireland, Oman, Palestinian Territory, Panama, Peru, Portugal, Saudi Arabia, Slovenia, Sri Lanka, Sweden, Switzerland, The Republic of Macedonia, Trinidad and Tobago, Turkey, United Arab Emirates, United Republic of Tanzania, Uruguay, Uzbekistan, Yemen, Yugoslavia, Zambia, and Zimbabwe.

DIVISION STATUS AND ROLE OF DOCTORS WHO QUALIFIED OUTSIDE IRELAND

Table 19: Country of qualification and division of the Register

Division	Graduates of Irish medical schools		Graduates of a medical school outside Ireland		% of division who graduated outside Ireland
	N	%	N	%	
General Registration	3197	29.7%	3836	65.0%	54.5%
Specialist Registration	6047	56.2%	1642	27.8%	21.4%
Supervised Registration	0	0.0%	6	0.1%	100.0%
Trainee Specialist Registration	1525	14.2%	417	7.1%	21.5%

Table 20: Country of qualification and role

Role	Graduates of Irish medical schools		Graduates of a medical school outside Ireland		% of role graduating outside Ireland
	N	%	N	%	
Community Health Doctor	178	1.7%	33	0.6%	15.6%
General Practitioner	3468	33.4%	880	15.2%	20.2%
Healthcare Related Management and Admin	52	0.5%	23	0.4%	30.7%
Hospital Consultant	2833	27.3%	1291	22.3%	31.3%
Non-Consultant Hospital Doctor, in Training	2302	22.2%	1082	18.7%	32.0%
Non-Consultant Hospital Doctor, not Training	637	6.1%	1895	32.8%	74.8%
Other	327	3.2%	129	2.2%	28.3%
Other Consultant or Specialist	452	4.4%	437	7.6%	49.2%
Public Health Doctor	127	1.2%	15	0.3%	10.6%

AREA OF PRACTICE

Table 21: Area of practice and proportion of international graduates

Area of practice	% of doctors who graduated outside Ireland
Anaesthesia	49.0%
Medicine	37.3%
Emergency Medicine	52.5%
General Practice	19.2%
Obstetrics & Gynaecology	55.0%
Occupational Medicine	24.8%
Ophthalmology	30.9%
Public Health Medicine	11.1%
Sports & Exercise Medicine	27.5%
Surgery	50.6%
Pathology	29.6%
Paediatrics	44.1%
Psychiatry	38.3%
Radiology	33.2%

*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 identified by doctors who retained registration in 2014 were General Practitioner (26.9%), Hospital Consultant (25.5%) and Non-Consultant Hospital Doctor in Training (20.9%).
- Among doctors registered in the Specialist Division, the most common role was Hospital Consultant (48.2%) followed by General Practitioner (36%); among doctors registered in the General Division, the most common role was Non-Consultant Hospital Doctor Not in Training (32.8%) followed by Non-Consultant Hospital Doctor, in Training (23.4%).
- 46.1% of doctors 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. 68.6% of doctors working in Ophthalmology were specialists), other areas were predominantly delivered by non-specialists (e.g. only 15.5% of doctors working in Emergency Medicine were specialists).
- The blend of roles also varied across areas of practice with some areas, such as Emergency Medicine, Surgery, Paediatrics, and Obstetrics and Gynaecology 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 doctors⁹

Role	N	%
Community Health Doctor	211	1.3%
General Practitioner	4349	26.9%
Healthcare Related Management and Admin	75	0.5%
Hospital Consultant	4125	25.5%
Non-Consultant Hospital Doctor, in Training	3384	20.9%
Non-Consultant Hospital Doctor, not in Training	2533	15.7%
Other	456	2.8%
Other Consultant or Specialist	889	5.5%
Public Health Doctor	142	0.9%
Total	16164	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	
Community Health Doctor	0.8%	2.2%	0.0%	1.3%
General Practitioner	36.0%	23.3%	4.3%	26.9%
Healthcare Related Management and Admin	0.4%	0.6%	0.1%	0.5%
Hospital Consultant	48.2%	7.7%	0.0%	25.5%
Non-Consultant Hospital Doctor, in Training	2.1%	23.4%	85.2%	20.9%
Non-Consultant Hospital Doctor, Not Training	1.8%	32.8%	9.2%	15.7%
Other	2.0%	4.3%	1.0%	2.8%
Other Consultant or Specialist	7.5%	4.9%	0.0%	5.5%
Public Health Doctor	1.2%	0.8%	0.2%	0.9%
Totals	100%	100%	100%	100%

*Doctors registered in the Supervised Division were excluded since all these doctors are legally required to work in non-training posts in the HSE. These doctors are excluded from this and subsequent analyses.

⁹ 96.9% 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	49.6%	35.0%	15.4%	
Medicine	35.2%	49.1%	15.7%	
Emergency Medicine	15.5%	67.9%	16.4%	0.2%
General Practice	59.5%	34.9%	5.6%	
Obstetrics & Gynaecology	36.8%	47.0%	16.1%	0.2%
Occupational Medicine	62.4%	35.3%	2.3%	
Ophthalmology	68.6%	26.9%	4.6%	
Public Health Medicine	48.1%	50.4%	1.5%	
Sports & Exercise Medicine	57.5%	42.5%		
Surgery	38.1%	49.3%	12.6%	
Pathology	63.3%	27.1%	9.6%	
Paediatrics	35.0%	44.8%	20.2%	
Psychiatry	46.8%	36.4%	16.8%	0.1%
Radiology	63.6%	27.2%	9.3%	
Total	46.2%	41.8%	11.9%	0.0%

*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	Role (for all doctors who retained registration)								
	Community Health Doctor	General practitioner	Healthcare related management and administration	Hospital Consultant	Non-consultant hospital doctor, in training	Non-consultant hospital doctor, not in training	Other	Other Consultant or Specialist	Public Health Doctor
Anaesthesia	-	0.4%	0.2%	49.6%	26.0%	19.3%	1.1%	3.4%	-
Medicine	0.4%	5.4%	0.8%	31.9%	33.0%	20.0%	4.1%	4.0%	0.3%
Emergency Medicine	-	3.1%	0.2%	17.8%	26.7%	48.7%	2.0%	1.4%	0.2%
General Practice	0.4%	91.6%	0.4%	0.0%	5.1%	0.3%	2.0%	0.2%	0.1%
Obstetrics & Gynaecology	0.2%	1.3%	0.2%	31.6%	29.2%	25.3%	2.0%	10.3%	-
Occupational Medicine	1.6%	5.4%	2.3%	7.0%	3.9%	-	31.8%	48.1%	-
Ophthalmology	7.0%	0.6%	-	22.8%	17.0%	5.8%	4.1%	42.1%	0.6%
Public Health Medicine	35.3%	0.8%	3.6%	-	2.0%	0.8%	4.8%	3.2%	49.6%
Sports & Exercise Medicine	-	17.5%	2.5%	10.0%	2.5%	-	25.0%	42.5%	-
Surgery	0.0%	0.8%	0.1%	36.3%	25.5%	29.2%	2.0%	6.0%	-
Pathology	-	0.2%	0.2%	59.1%	23.5%	6.3%	2.4%	8.2%	-
Paediatrics	7.7%	0.8%	0.1%	28.8%	31.3%	25.0%	2.1%	4.0%	0.1%
Psychiatry	0.4%	0.2%	0.2%	35.0%	26.1%	20.2%	2.0%	15.8%	-
Radiology	-	0.5%	-	62.8%	21.0%	3.7%	0.5%	11.3%	0.2%
Total	1.3%	26.4%	0.4%	25.8%	21.1%	15.8%	2.7%	5.5%	0.9%

*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 did not practise medicine in the previous 12 months; among doctors 65 years and older, 13.2% reported that they had not practised medicine in the last year.
- 78.9% of doctors who retained registration practised medicine in Ireland only; compared with doctors who graduated from an Irish medical school (90%), a lower proportion of international medical graduates reported that they practised medicine in Ireland only (59%).
- The proportion of doctors who reported that they practised medicine only in Ireland varied across area of practice. Rates for practising only in Ireland were higher than average in Public Health Medicine (92%), General Practice (86%) and Psychiatry (85%) and lower than average in Sports and Exercise Medicine (63%), Radiology (69%) and Emergency Medicine (70%).
- 13.7% of doctors who retained registration reported that they practised medicine part-time. Compared with men, a higher proportion of women practised medicine part-time (9.2% versus 20.3%) and 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 Public Health Medicine (31%) Ophthalmology (26.3%) and General Practice (22.8%).
- Among doctors registered in the Specialist Division, 4.7% reported that they were practising in an area which was different to their registered specialty.

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. 98.9% of doctors who retained registration with the Medical Council responded to this question.

INACTIVE DOCTORS

In total, 481 (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	2.4%
Female	3.6%
Age Category	
25-34 years	1.6%
35-44 years	2.1%
45-54 years	1.9%
55-64 years	3.4%
65 years and older	13.2%
Division	
Supervised	0%
General	4.0%
Trainee Specialist	0.7%
Specialist	2.5%
Total	2.9%

Table 27: Proportion of inactive doctors by area of practice

Area of Practice	% Inactive
Anaesthesia	1.5%
Medicine	2.4%
Emergency Medicine	2.2%
General Practice	1.4%
Obstetrics & Gynaecology	3.5%
Occupational Medicine	3.0%
Ophthalmology	2.9%
Public Health Medicine	9.3%
Sports & Exercise Medicine	0.0%
Surgery	2.3%
Pathology	3.5%
Paediatrics	2.2%
Psychiatry	2.1%
Radiology	1.6%

COUNTRY OF MEDICAL PRACTICE

In total, 78.9% of respondents said that they practised medicine in Ireland only.

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

	In Ireland only	Outside Ireland only	Both in and outside Ireland
Gender			
Male	73.6%	15.2%	11.3%
Female	86.6%	8.1%	5.3%
Age			
Under 25	81.8%	9.1%	9.1%
25-34	82.4%	8.3%	9.2%
35-44	77.5%	13.7%	8.8%
45-54	75.5%	15.0%	9.5%
55-64	80.0%	11.7%	8.4%
65 and over	81.6%	12.7%	5.7%
Division			
General Registration	67.7%	20.4%	11.9%
Specialist Registration	84.6%	7.8%	7.6%
Supervised Registration	66.7%	0.0%	33.3%
Trainee Specialist Registration	95.8%	1.3%	2.9%
WHO region of Basic Medical Qualification			
European region	65.5%	14.8%	19.7%
African region	36.4%	44.7%	18.9%
South East Asia region	72.7%	15.1%	12.2%
The Americas region	51.8%	28.2%	20.0%
Eastern Mediterranean region	63.7%	19.2%	17.1%
Western Pacific region	30.3%	56.8%	12.9%
Ireland	90.0%	6.3%	3.7%
Total	78.9%	12.3%	8.8%

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

Area of practice	In Ireland only	Outside Ireland only	Both in and outside Ireland
Anaesthesia	76.6%	13.3%	10.1%
Medicine	77.3%	13.7%	9.0%
Emergency Medicine	70.4%	14.4%	15.3%
General Practice	86.4%	8.5%	5.1%
Obstetrics & Gynaecology	75.4%	12.7%	11.9%
Occupational Medicine	78.1%	14.8%	7.0%
Ophthalmology	77.2%	15.2%	7.6%
Public Health Medicine	91.5%	6.5%	2.0%
Sports & Exercise Medicine	62.5%	15.0%	22.5%
Surgery	71.1%	16.0%	12.9%
Pathology	78.1%	11.4%	10.5%
Paediatrics	77.7%	11.1%	11.1%
Psychiatry	84.5%	8.6%	6.9%
Radiology	68.6%	22.7%	8.8%
Totals	79.0%	12.2%	8.8%

FULL-TIME / PART-TIME WORKING

In total, 83.3% of respondents said that they practised medicine full-time¹⁰.

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

Characteristic	Full-time	Part-time	Other
Gender			
Male	87.7%	9.2%	3.1%
Female	76.9%	20.3%	2.8%
Age			
Under 25	95.5%	-	4.5%
25-34	92.2%	5.9%	1.9%
35-44	84.7%	13.0%	2.3%
45-54	85.0%	12.2%	2.8%
55-64	81.2%	15.6%	3.3%
65 and over	42.0%	48.1%	9.8%
Division			
General Registration	81.6%	14.4%	4.0%
Specialist Registration	81.4%	16.1%	2.6%
Supervised Registration	100.0%	-	-
Trainee Specialist Registration	96.7%	2.4%	0.9%
WHO region of Basic Medical Qualification			
European region	83.7%	11.4%	4.9%
African region	89.1%	7.9%	3.0%
South East Asia region	89.5%	6.9%	3.7%
The Americas region	76.5%	21.2%	2.4%
Eastern Mediterranean region	90.1%	6.5%	3.3%
Western Pacific region	85.8%	13.5%	0.6%
Ireland	81.0%	16.5%	2.5%
Total	83.3%	13.7%	3.0%

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

Area of Practice	Full-time	Part-time	Other
Anaesthesia	92.1%	5.7%	2.2%
Medicine	86.2%	10.7%	3.1%
Emergency Medicine	86.3%	8.2%	5.4%
General Practice	74.6%	22.8%	2.5%
Obstetrics & Gynaecology	89.6%	7.9%	2.5%
Occupational Medicine	83.7%	11.6%	4.7%
Ophthalmology	70.2%	26.3%	3.5%
Public Health Medicine	63.1%	31.0%	6.0%
Sports & Exercise Medicine	62.5%	22.5%	15.0%
Surgery	90.0%	7.5%	2.4%
Pathology	87.7%	10.4%	1.9%
Paediatrics	84.4%	12.7%	2.9%
Psychiatry	84.6%	12.6%	2.8%
Radiology	89.5%	8.9%	1.6%
Total	83.5%	13.7%	2.8%

¹⁰ 96.9% of doctors who retained registration in 2104 answered this question.

CHANGING SCOPE OF PRACTICE

In total, 327 doctors (4.7%) 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	% changed scope of practice	% scope stayed same
Gender		
Female	5.8%	94.2%
Male	4.0%	96.0%
Age		
25-34	6.1%	93.9%
35-44	4.6%	95.4%
45-54	3.6%	96.4%
55-64	4.7%	95.3%
65 and over	7.8%	92.2%
Practice Arrangements		
Full-time	3.9%	96.1%
Part-time	7.7%	92.3%
Other	10.9%	89.1%
Total	4.7%	95.3%

WOMEN'S PARTICIPATION IN MEDICAL PRACTICE

Key points

- In total, at the end of 2014, 41.2% of registered doctors were female.
- 57.9% of doctors registered in the Trainee Specialist Division were women. Among doctors aged less than 35 years, who graduated from an Irish medical school, 70.9% registered in the Specialist Division were women.
- The proportion of women working in different roles varied: 75.8% of Community Health doctors were women compared with 29.4% of Hospital Consultants; among Hospital Consultants, aged less than 35 years and who graduated from an Irish medical school, 63.6% were women.
- Among specialists, gender patterning of specialisation was evident. In some specialties there was a higher than average proportion of women practising (e.g. Genito-Urinary Medicine (75%), Public Health Medicine (72%), and Psychiatry of Learning Disability (70%)) while in other specialties there was a lower than average proportion of women practising (for example, Neurosurgery (4%), Trauma and Orthopaedic Surgery (5%) and Oral and Maxillo-Facial Surgery (7%).
- The practice arrangements reported by women doctors were different to those of men.

PROFILE OF FEMALE DOCTORS

Figure 21: Trend in proportion of females registered with the Medical Council, 2008-2014

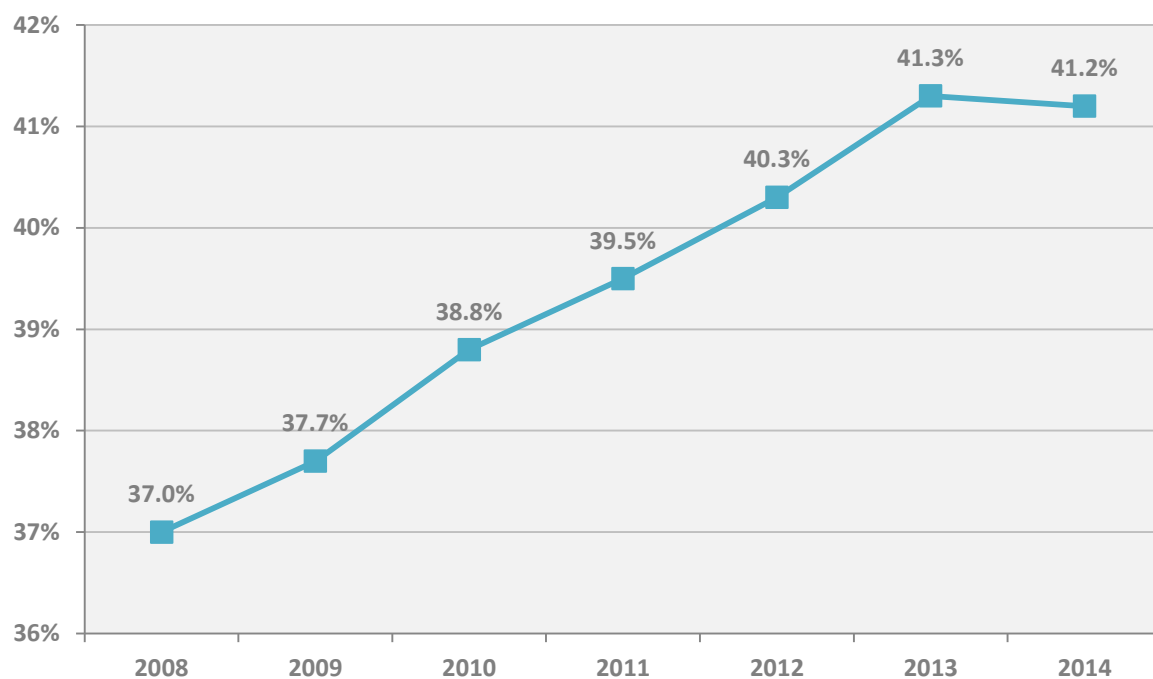


Figure 22: Proportion of doctors in each age group who are female

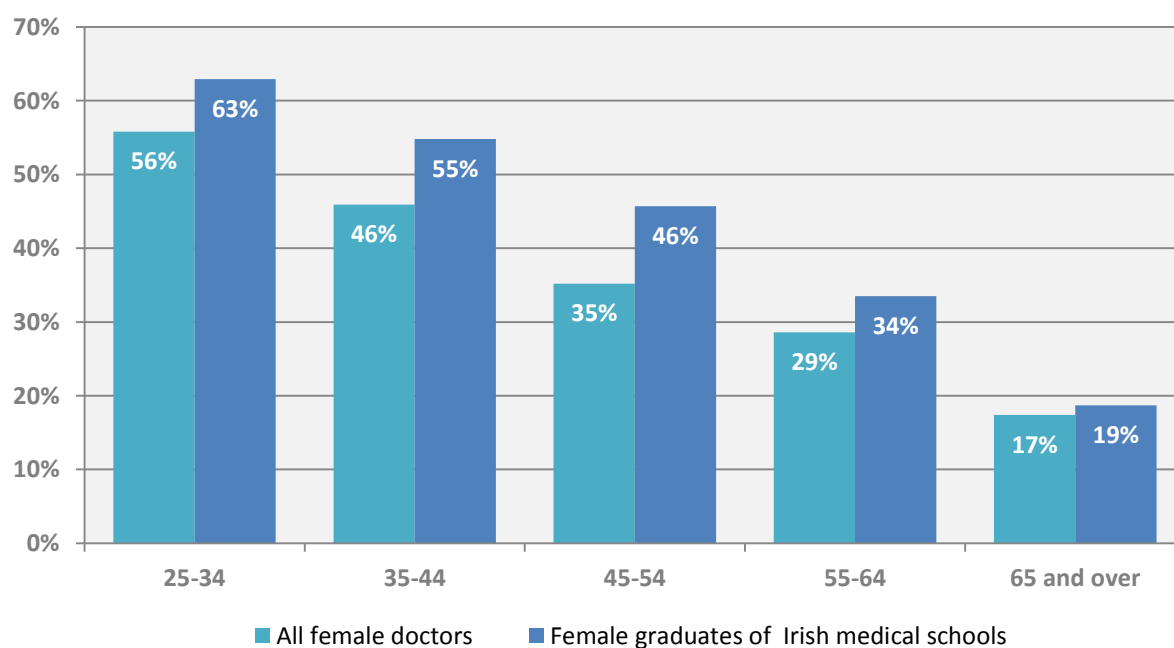


Table 33: Proportion of female doctors by division of the Register

Division	% Female	% Female *	% Female **
General Registration	37.6%	50.4%	60.2%
Specialist Registration	39.4%	43.2%	70.9%
Supervised Registration	16.7%	-	-
Trainee Specialist Registration	57.9%	60.1%	62.6%
Total	40.8%	47.8%	62.9%

* 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	75.8%	81.5%	N/A
General Practitioner	44.8%	47.5%	75.6%
Healthcare Related Management and Admin	26.7%	26.9%	50.0%
Hospital Consultant	29.4%	36.2%	63.6%
Non-Consultant Hospital Doctor, in Training	52.4%	57.9%	61.5%
Non-Consultant Hospital Doctor, Not in Training	32.5%	50.7%	54.3%
Other	50.0%	53.5%	75.0%
Other Consultant or Specialist	35.5%	46.7%	83.3%
Public Health Doctor	69.0%	74.0%	33.3%
Total	40.7%	47.9%	62.9%

* 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	31.1%	38.0%	50.0%	37.6%
Cardiology	10.9%	12.5%	100.0%	11.8%
Cardiothoracic Surgery	14.7%	11.8%	-	8.3%
Chemical Pathology	18.2%	22.2%	-	20.0%
Child and Adolescent Psychiatry	67.8%	72.2%	100.0%	74.2%
Clinical Genetics	50.0%	40.0%	-	66.7%
Clinical Neurophysiology	25.0%	27.3%	-	33.3%
Clinical Pharmacology and Therapeutics	50.0%	50.0%	-	50.0%
Dermatology	60.0%	65.3%	-	64.4%
Emergency Medicine	18.5%	18.8%	-	19.7%
Endocrinology and Diabetes Mellitus	30.8%	33.3%	50.0%	35.4%
Gastroenterology	26.2%	35.5%	66.7%	37.7%
General (Internal) Medicine	28.5%	34.9%	62.5%	35.3%
General Practice	48.3%	48.6%	71.8%	48.8%
General Surgery	7.5%	10.2%	0.0%	10.7%
Genito-Urinary Medicine	75.0%	85.7%	100.0%	85.7%
Geriatric Medicine	41.8%	44.1%	60.0%	45.1%
Haematology	40.0%	66.7%	75.0%	100.0%
Haematology (Clinical and Laboratory)	42.1%	48.3%	-	50.9%
Histopathology	43.3%	49.2%	-	51.8%
Immunology (Clinical and Laboratory)	37.5%	50.0%	-	50.0%
Infectious Diseases	50.0%	52.0%	100%	55.6%
Medical Oncology	40.0%	40.0%	-	34.3%
Microbiology	57.5%	62.7%	100%	62.7%
Nephrology	34.5%	38.6%	100%	32.4%
Neurology	26.6%	27.5%	33.3%	26.7%
Neuropathology	66.7%	75.0%	-	66.7%
Neurosurgery	3.7%	6.3%	-	7.1%
Obstetrics and Gynaecology	40.0%	43.6%	-	44.8%
Occupational Medicine	31.6%	34.6%	100%	33.8%
Ophthalmic Surgery	25.5%	32.0%	-	33.3%
Ophthalmology	44.8%	55.3%	-	59.0%
Oral and Maxillo-Facial Surgery	7.1%	8.3%	-	9.1%
Otolaryngology	15.1%	16.1%	-	15.2%
Paediatric Cardiology	25.0%	25.0%	-	50.0%
Paediatric Surgery	7.1%	0.0%	-	0.0%
Paediatrics	45.3%	57.1%	0.0%	58.7%
Palliative Medicine	62.5%	68.3%	100%	69.4%
Pharmaceutical Medicine	20.0%	25.0%	-	16.7%
Plastic, Reconstructive and Aesthetic Surgery	24.2%	28.6%	-	21.4%
Psychiatry	49.0%	52.4%	100%	54.6%
Psychiatry of Learning Disability	69.7%	72.4%	-	72.4%
Psychiatry of Old Age	62.3%	65.3%	-	69.1%
Public Health Medicine	72.0%	73.0%	100%	72.7%
Radiation Oncology	32.7%	46.4%	100%	40.9%
Radiology	32.1%	33.1%	50.0%	32.2%
Rehabilitation Medicine	43.8%	46.2%	100%	66.7%
Respiratory Medicine	19.2%	20.7%	-	17.6%
Rheumatology	36.9%	36.5%	33.3%	37.8%
Sports and Exercise Medicine	10.0%	13.0%	-	12.5%
Trauma and Orthopaedic Surgery	5.4%	6.3%	100%	5.1%
Tropical Medicine	0.0%	0.0%	-	0.0%

Speciality	% Female	% Female*	% Female**	% Female***
Urology	8.1%	8.9%	100%	10.3%
Total	38.9%	42.8%	75.0%	43.7%

* 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	32.3%	41.4%	41.3%
Medicine	39.5%	47.5%	48.7%
Emergency Medicine	30.4%	36.9%	38.2%
General Practice	46.4%	49.0%	49.4%
Obstetrics & Gynaecology	57.3%	63.9%	65.4%
Occupational Medicine	36.1%	41.0%	42.7%
Ophthalmology	48.0%	55.4%	56.6%
Public Health Medicine	75.2%	77.5%	78.4%
Sports & Exercise Medicine	15.0%	17.2%	18.2%
Surgery	17.4%	24.4%	24.9%
Pathology	52.4%	59.7%	60.9%
Paediatrics	56.7%	68.7%	70.9%
Psychiatry	49.8%	55.8%	58.3%
Radiology	33.9%	39.2%	39.1%
Total	40.8%	47.8%	48.9%

* Graduates of Irish medical schools only

** Graduates of Irish medical schools working in Ireland only

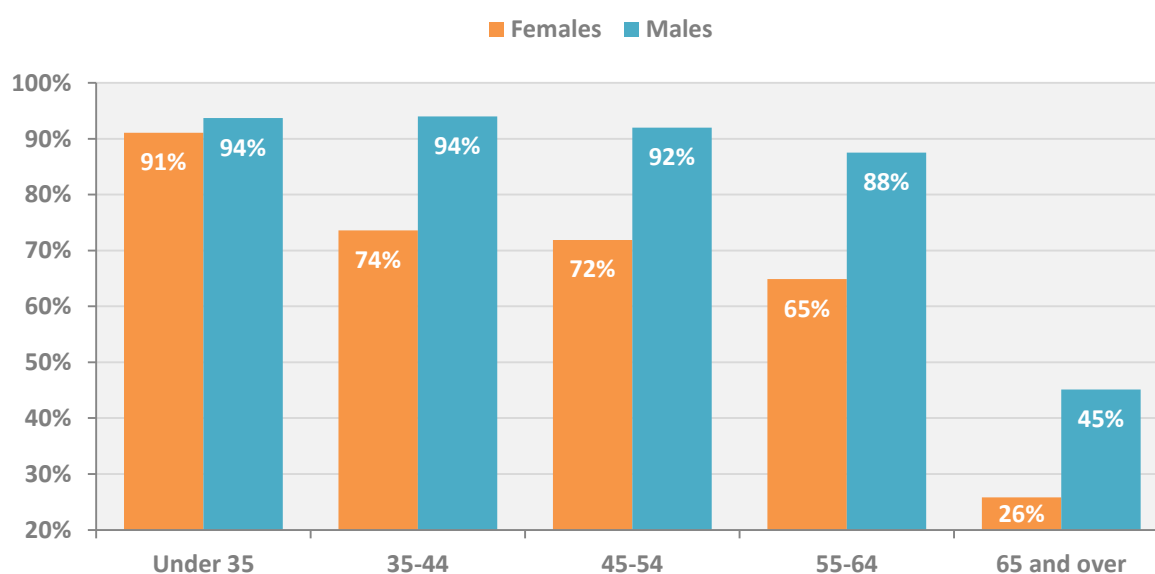
Areas with greater than average proportions of women doctors are highlighted in green.

PRACTICE ARRANGEMENTS OF FEMALE DOCTORS

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

Age categories	Female			Male		
	Full Time	Other	Part Time	Full Time	Other	Part Time
Under 35	91.1%	2.0%	7.0%	93.7%	1.8%	4.4%
35-44	73.6%	2.6%	23.8%	94.0%	2.0%	3.9%
45-54	71.9%	2.7%	25.4%	92.0%	2.9%	5.2%
55-64	64.9%	3.8%	31.4%	87.5%	3.1%	9.4%
65 and over	25.8%	14.7%	59.5%	45.1%	8.9%	46.0%
Total	76.9%	2.8%	20.3%	87.7%	3.1%	9.2%

Figure 23: Comparison of % of female and male doctors who work full time by age group





Comhairle na nDochtúirí Leighis
Medical Council

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