

TRANSITIONING FROM GRADUATE TRAINING TO PRACTICE: WHERE DO GRADUATES GO?

Komal Kochhar, MBBS, MHA; Peter Nalin, MD; Terrell W. Zollinger, DrPH

OBJECTIVES

To plan effective healthcare workforce initiatives, this study identified factors affecting graduates' decisions to practice in specific locations as they transition from training into practice.

QUESTIONS

- Where do graduates from IU School of Medicine residency programs go to practice?
- Why do they choose that location?
- Why do they choose not to practice in our state?

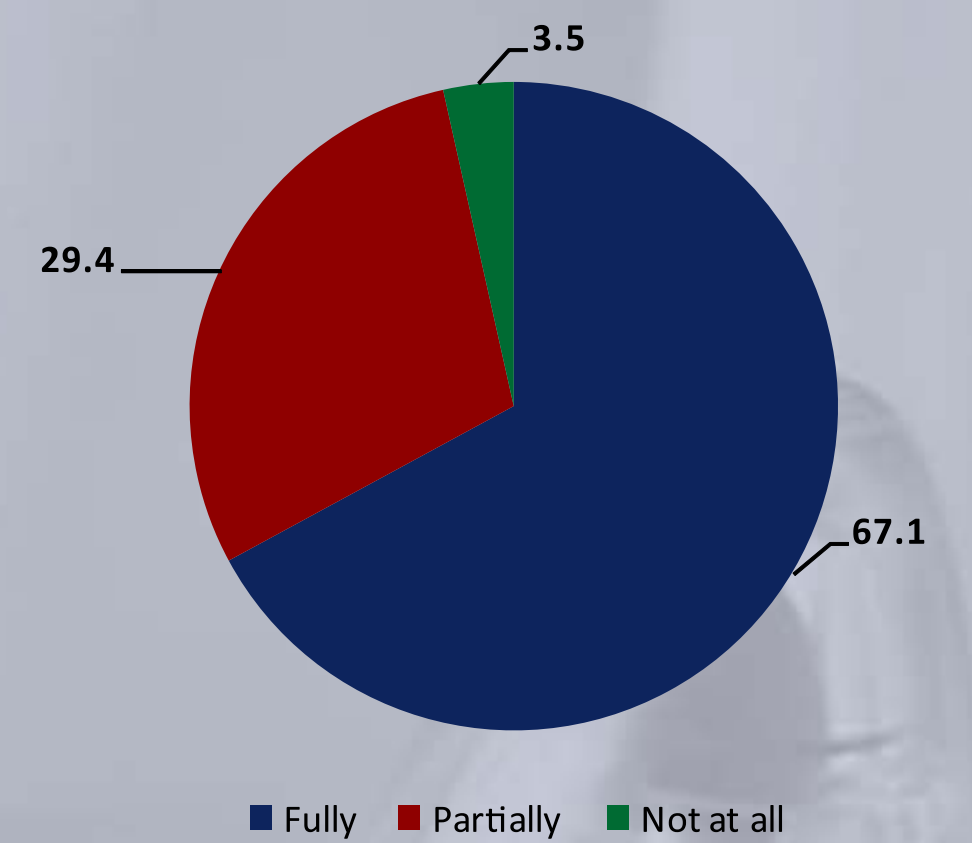
METHODS

- Survey of graduates completing IU School of Medicine residency and fellowship programs
- All 352 graduate program completers were asked to fill out the questionnaire as part of the exit process
- 225 participated in survey (64% response rate)

RESULTS

- Three-fifths (59%) of the respondents were females
- 67% felt "fully" prepared for the Board exams after their training
- 100.0% felt "fully" or "partially" competent in medical knowledge and professionalism competency areas
- 61% plan to be primarily clinical practitioners; 31% plan to start a fellowship; 3% plan to be primarily researchers
- 61% have \$100,000 or more in student debt; 15% have \$200,000 or more in student debt
- 7% of the respondents were from another country. Of those from within United States, 40% considered Indiana to be their home state prior to training
- 46% plan to practice outside of Indiana; 54% plan to practice within the state

How well did your training program prepare you for your board exam?



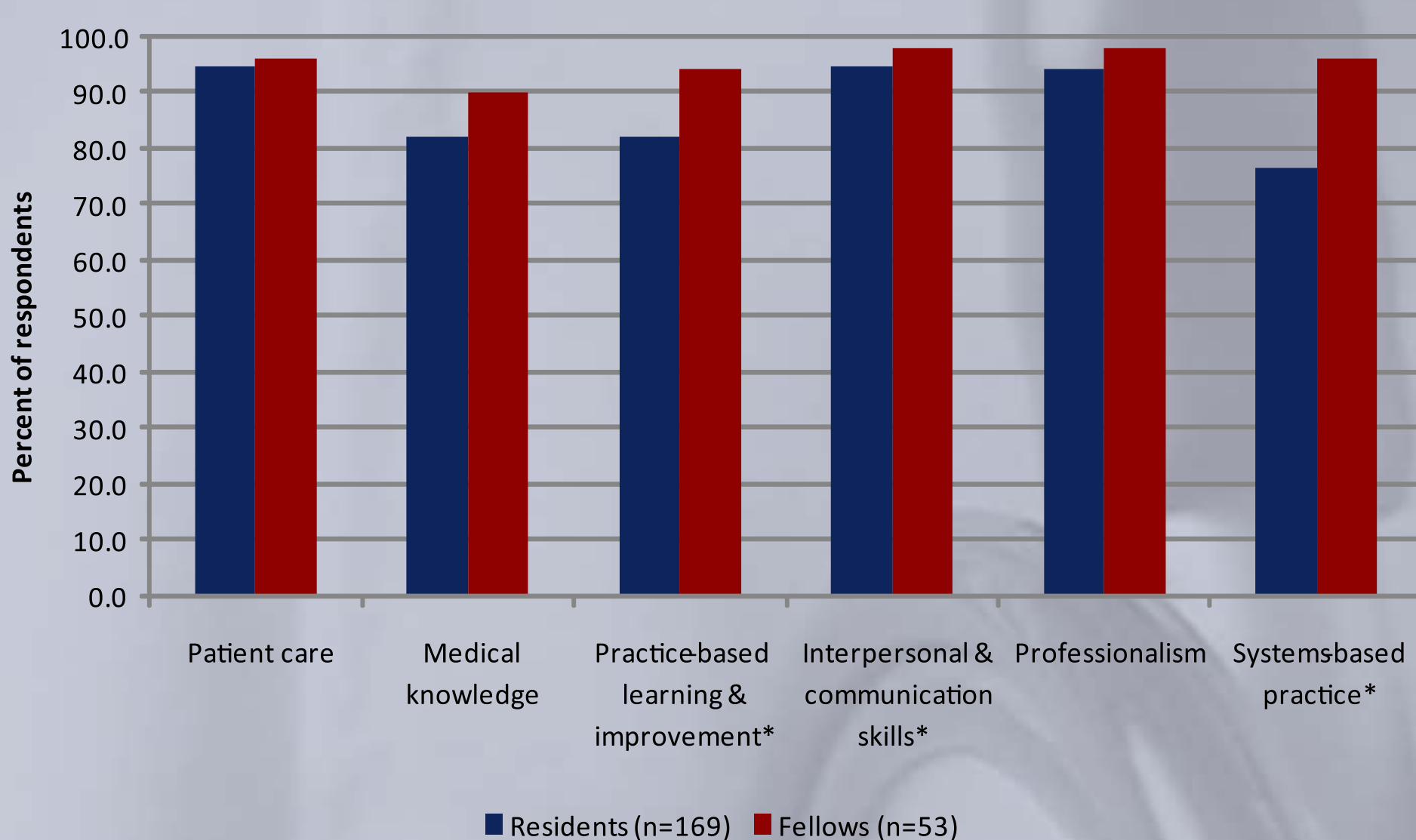
Residents versus Fellows

- The following three ACGME competency areas were significantly different between the two groups:
 - practice-based learning and improvement (94% fellows vs 82% residents)
 - interpersonal and communication skills (98% fellows vs 95% residents)
 - systems-based practice (96% fellows vs 76% residents)

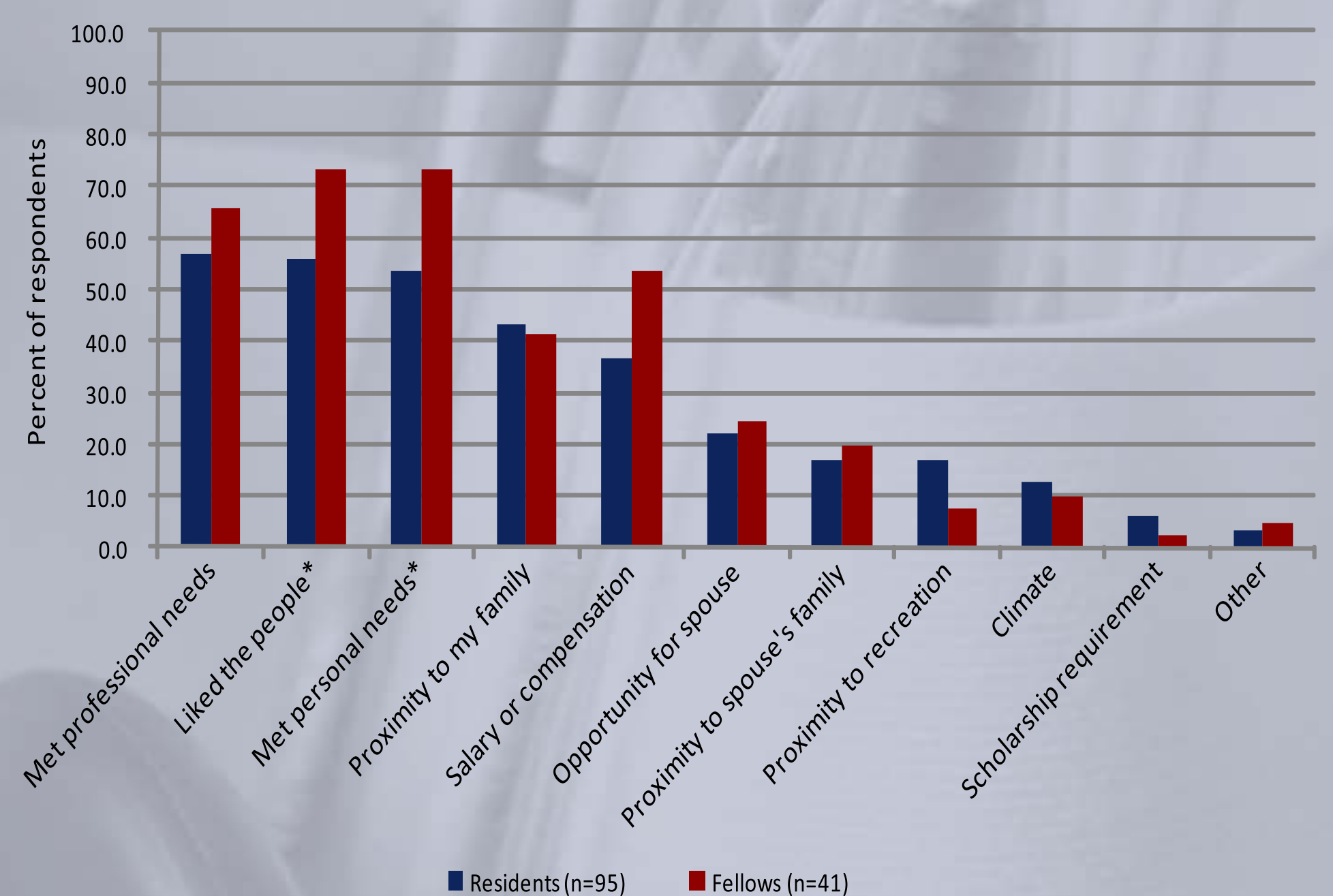
Top 3 reasons given by residents & fellows for their choice of practice location:

- Met my professional needs/preferences (57% residents; 66% fellows)
- Liked the people (56% residents; 73% fellows)
- Met my personal needs/preferences (54% residents; 73% fellows)

Graduates felt "fully" competent in the following ACGME competency areas



Main reasons to practice at this location

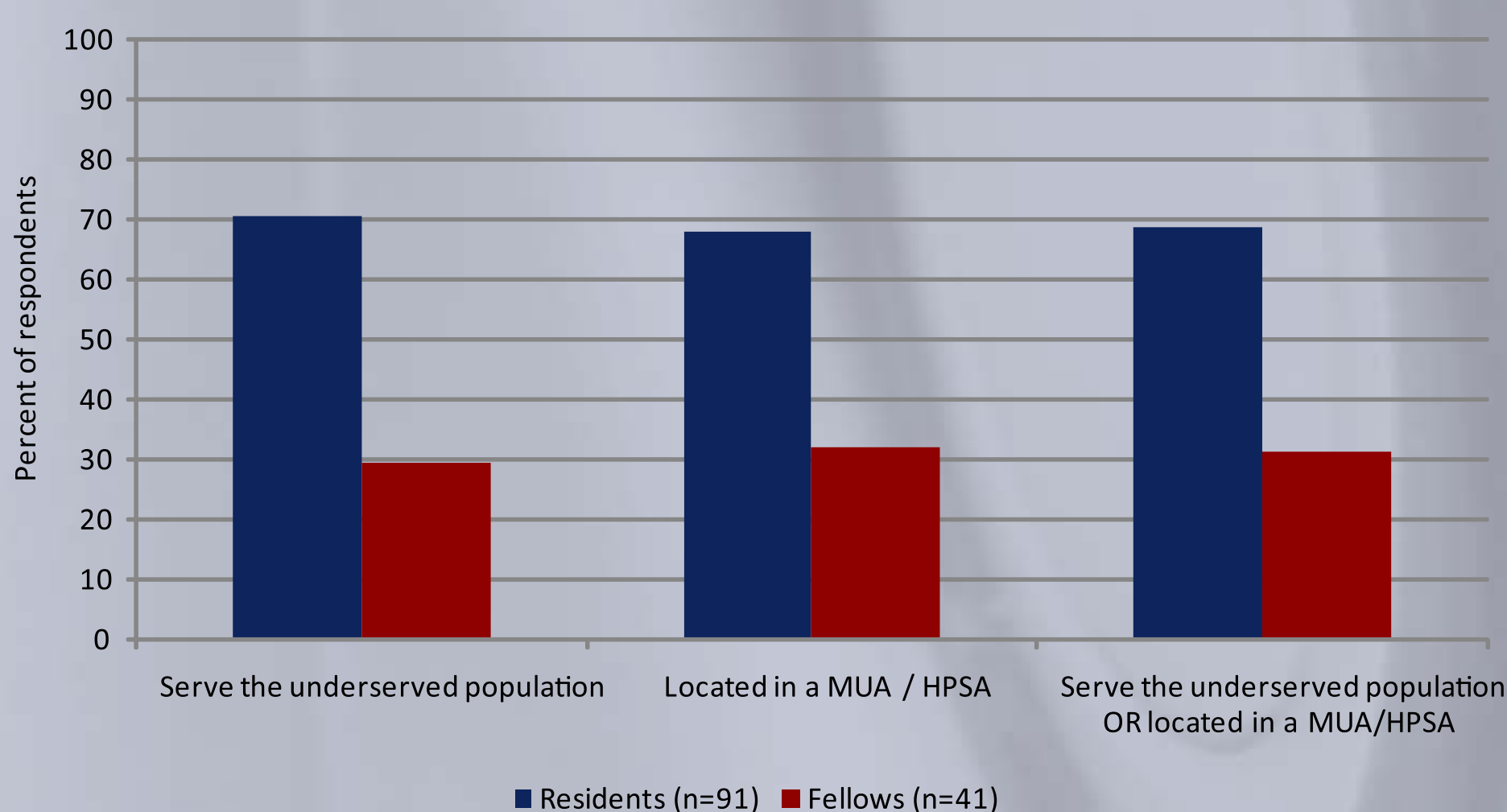


- 27% of the residents received "3 or more job offers in Indiana" compared to 38% of fellows
- 69% of residents indicated they were either located in a designated Medically Underserved Area (MUA)/Health Professions Shortage Area (HPSA) or expecting to serve a substantial proportion of patients from underserved populations in their new practice compared to 31% of fellows

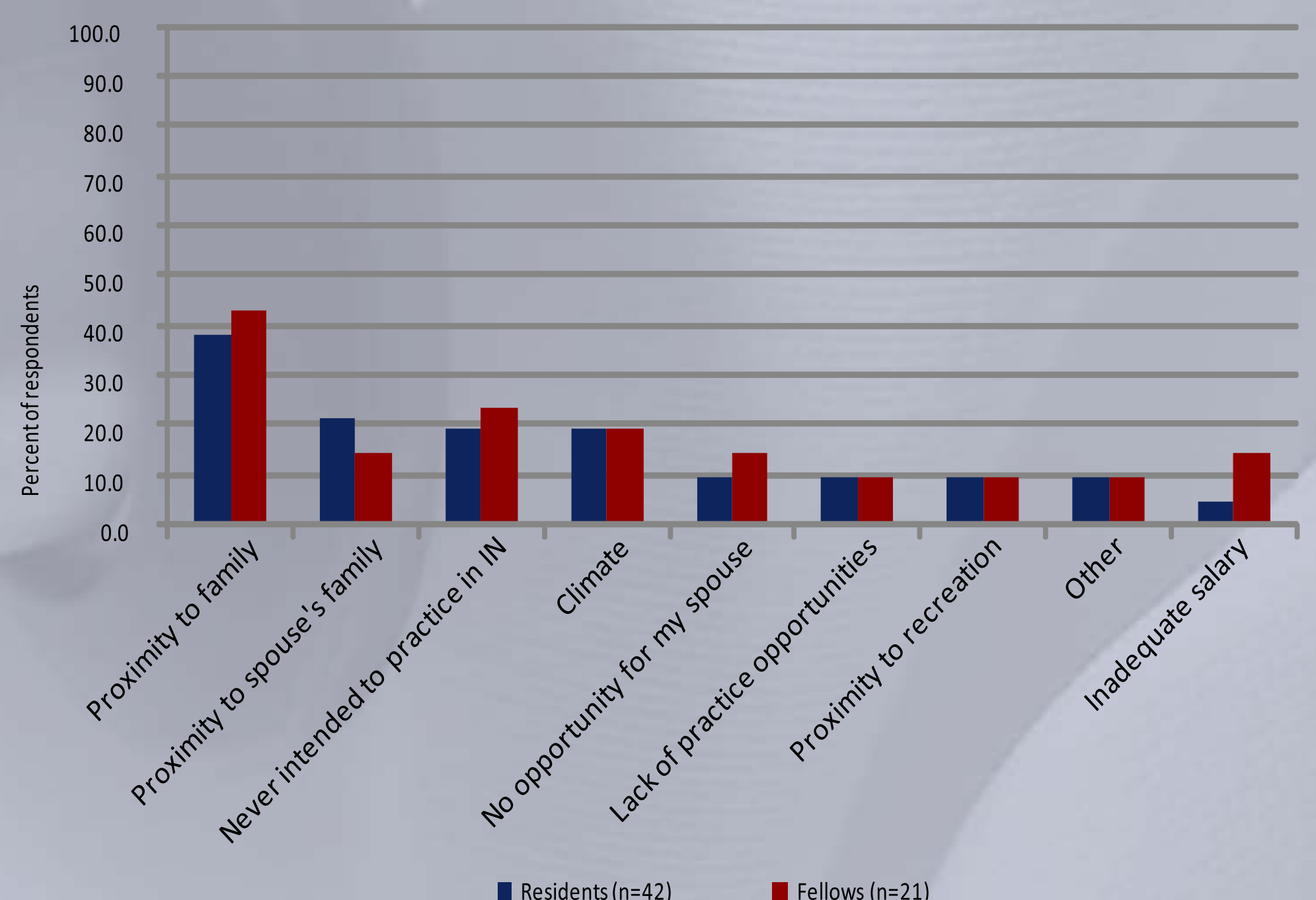
Top 3 reasons given by residents and fellows for not practicing in the state:

- Proximity to my family (38% residents; 43% fellows)
- Proximity to my spouse's/ partner's family (21% residents; 14% fellows)
- Never intended to practice in state (19% residents; 24% fellows)

Graduates expecting to provide care to underserved population OR located in a MUA/HPSA



Main reasons not to practice in Indiana



CONCLUSION

About one-half of Indiana University residency and fellowship graduates settle in Indiana to practice. Our GME programs could better meet the physician shortage in Indiana by enrolling individuals most likely to settle in Indiana and by ensuring that their needs, both professional and personal, are being met. One of the main reasons given for practicing in the state is "met their needs/preferences" and the main reason for not practicing in the state is "proximity to family"; however, many never intended to practice in our state.

