

Globalization of medical education: Educational Commission for Foreign Medical Graduates (ECFMG) concerns and initiatives

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Abstract

The Educational Commission for Foreign Medical Graduates (ECFMG) certifies international medical graduates (IMGs) for entry into United States graduate medical education. It also promotes medical education through programmatic and research activities. Physician migration is changing and the ECFMG responds to the needs of IMGs coming to the United States to study and to those searching for training opportunities in other countries. It seeks to provide information about national and international medical schools' accreditation status and other similar data. For ECFMG purposes, accreditation of an international medical school by an agency recognized by the Federation for Medical Education (WFME) will meet its new requirement for certification, effective in 2023.

Introduction

The mission of the Educational Commission for Foreign Medical Graduates (ECFMG) states that "the ECFMG promotes quality health care for the public by certifying international medical graduates for entry into United States graduate medical education, and by participating in the evaluation and certification of other physicians and health care professionals nationally and internationally. In conjunction with its Foundation for Advancement of International Medical Education (FAIMER) and other partners, it actively seeks opportunities to promote medical education through programmatic and research activities."

Many are familiar with the first part of the above statement, ECFMG's traditional mission. However, as stated above, our mission also calls for our participating in the evaluation and the certification of other physicians and health care professionals nationally and internationally. It urges us to seek opportunities to promote medical education through programmatic and research activities.

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The shift of physician migration

In the context of carrying out the latter part of our mission, we gather data and conduct research on all aspects of international medical education to include the global migration of physicians. One of the things that we have observed in recent years is that the number of physicians coming to the United States from certain countries, mainly India, has decreased somewhat. But that decrease has been partially compensated for by increased numbers of United States International Medical Graduates (IMGs), Canadian IMGs and others coming mostly from the Caribbean.

The number of IMGs emigrating to countries other than the United States, however, appears to be increasing, based on data from some of the services that we offer, such as the ECFMG International Credentials Service (EICS) and other sources. Accordingly, we at the ECFMG are faced with two IMG populations, both of which come to us asking for support and help in different areas. One population is coming to the United States and the other is going to Australia, Canada, South Africa and the United Kingdom, among other countries.

At the ECFMG, we have been studying and asking ourselves questions about this shift in physician migration during the past few years. As medical education globalizes, one major question is, what new initiatives we, as medical regulators, should consider, while focusing primarily on whether or not licensing bodies are likely to recognize multinational training; and what certification and other multinational assessment tools, if any, they will need.

In response to the question posed by the conference organizers, i.e. whether we can create multinational medical schools and residency training programs, it should be evident that, if by multinational we mean schools and programs that recruit students from and then send students on to many countries, the answer is "yes." Many such schools already exist. A concern, however, that needs to be, and, in some measure has already been, raised is whether all multinational and other international medical schools are legitimate. Specifically, where are these schools located? Are they recognized by the appropriate authority in the country where they are located?

Are existing multinational schools accredited? If yes, by whom and on the basis of what standards? And finally, as students seek training opportunities around the world, how can they become familiar with existing multinational and/or international schools?

Medical schools around the world

Until about twelve years ago, the World Health Organization (WHO) maintained and published a hard copy world directory of medical schools. When they stopped publishing this directory, we at the ECFMG had to create our own International Medical Education Directory (IMED) in order to do our work. IMED was developed and is maintained by FAIMER and currently lists over 2200 medical schools worldwide [Figure 1]. About six years ago, WHO passed its medical school databases on to the World Federation for Medical Education (WFME), which then established the Avicenna Directories. Soon thereafter, it rapidly became clear that there were parts of the world where we were able to obtain more detailed data, and there were other parts where Avicenna had better access to information. Since we both had good information sources in different parts of the world, we thought it best to attempt to pool our resources and develop one new, integrated directory of world medical schools.

We have, indeed, come to such an agreement with the WFME and we are currently working on the new World Directory of Medical Schools, which is a partnership of FAIMER and the World Federation for Medical Education, in collaboration with WHO and the University of Copenhagen. Major sponsors include the Australian Medical Council, the General Medical Council in the United Kingdom, the Medical Council of Canada, as well as the ECFMG. The Korean Institute of Medical Education and Evaluation and the University of Copenhagen are also sponsors.

The plan is for the new world directory to incorporate Avicenna and IMED databases. They are presently being merged and the new directory is expected to be launched in early 2014. However, we plan to keep both IMED and Avicenna functional for at least a year beyond the launch of the new directory, in order to ensure that there is adequate support for the international organizations that rely on them and to provide time for a smooth transition to the one new, integrated directory.

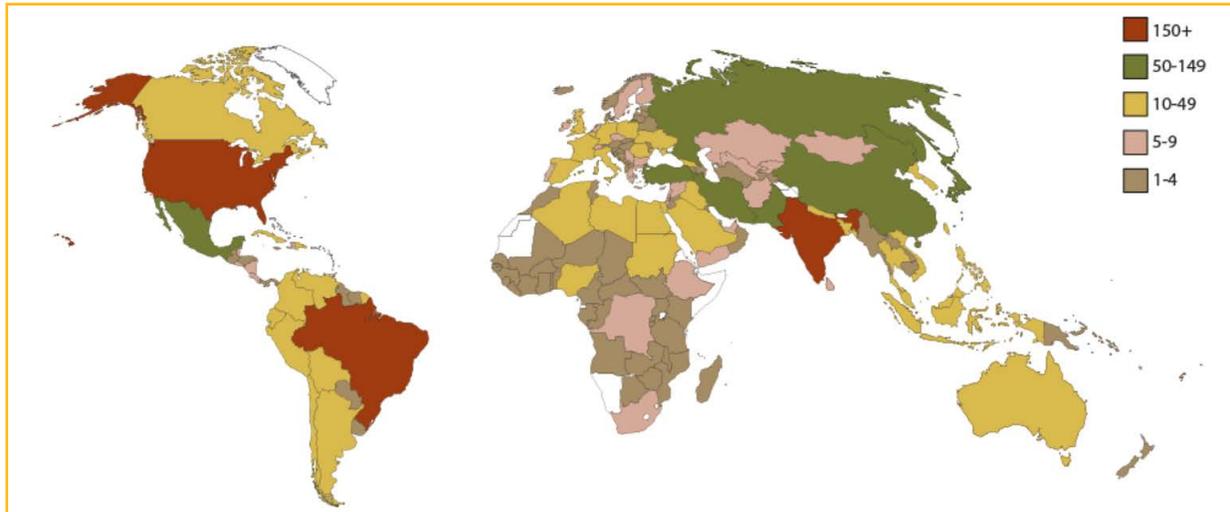


Figure 1. IMED lists over 2,200 medical schools worldwide.

Our vision for the new directory is that it will specifically provide information about schools' accreditation status and other similar data required or desired by international regulatory bodies as they seek to determine eligibility of the schools' graduates to pursue graduate medical education and/or licensure in their countries or states of jurisdiction. This will help medical schools, accrediting bodies and regulatory authorities around the world.

Screening and credentialing medical graduates

The issue of screening and ultimately credentialing medical graduates who wish to practice in a country or jurisdiction away from the one where they trained is, of course, an old one. In the United States, prior to the establishment of the ECFMG, many physicians and medical organizations struggled with this issue and initially considered establishing a mechanism to evaluate the different international medical schools from which physicians came to the United States. That approach was eventually abandoned as too difficult to implement, and the decision was made to evaluate NOT the international schools but, rather, their graduates, through the establishment of a central screening agency. That screening agency, the ECFMG, was then established and has been successfully carrying out its traditional mission of "promoting quality health care for the public by

certifying international medical graduates for entry into United States graduate medical education." Concerns about the quality of international medical schools have not entirely disappeared, however, and a few of the United States state licensing boards are still attempting to evaluate international schools with the goal of distinguishing acceptable from unacceptable ones.

Evaluating medical education

Today, the optimal way to evaluate medical schools is clearly through accreditation, as has been demonstrated for many years in the United States by the Liaison Council on Medical Education (LCME) and in Canada by The Committee on Accreditation of Canadian Medical Schools (CACMS). Recognizing this and wishing to promote high quality medical education around the world, in September 2011, the ECFMG board established a new requirement, effective in 2023, for certifying an IMG for entry into United States graduate medical education. The requirement is that an IMG must graduate from an accredited international medical school. The effective date recognizes that implementing systems of accreditation around the world, especially in regions where none currently exist, will be difficult and require many years; but also that an implementation date longer than twelve years would probably be ignored and would accordingly be ineffective.

The new requirement further stipulates that the standards utilized in the accreditation of international medical schools by accrediting agencies need to be comparable to those of the Liaison Committee on Medical Education (LCME) or be consistent with established global standards, such as those put forth by the World Federation. The LCME (www.lcme.org) describes accreditation as “a process of quality assurance in postsecondary education that determines whether an institution or program meets established standards for function, structure, and performance. The accreditation process also fosters institutional and program improvement.”

According to LCME materials on LCME.org, “The U.S. Department of Education recognizes the Liaison Committee on Medical Education for accreditation of programs of medical education leading to the M.D. degree in the United States. For Canadian medical education programs, the LCME engages in accreditation in collaboration with the Committee on Accreditation of Canadian Medical Schools (CACMS). The LCME is recognized as the reliable accreditation authority for M.D. programs by the nation’s medical schools and their parent universities. It also is recognized for this purpose by the Congress in various health-related laws, and by state, provincial (Canada), and territorial medical licensing boards.”

The World Federation has had for some time now a trilogy of standards for undergraduate, graduate, and continuing medical education that provide a basic level for accreditation and quality improvement. These standards can be modified, if needed, for different countries or regions to suit local or regional needs. The plan, arrived at after much discussion and collaboration with the World Federation, is that WFME will review and recognize regional or national accrediting agencies for compliance with its standards. The expectation is that regional and national agencies that have been recognized by WFME will accredit individual schools. For ECFMG purposes, accreditation of an international medical school by an agency recognized by the WFME will meet our new requirement for certification.

A pilot recognition program that we supported focused on the Caribbean Accreditation Authority for Medicine (CAAM), and was completed in May of 2012. CAAM is now officially recognized by the World Federation as meeting its standards. Next

to be reviewed are the LCME and CACMS, whose leadership has set an example for the rest of the world by asking WFME to review, evaluate and recognize their standards, policies, and procedures.

Global medical exchange

As I already mentioned, with so many training opportunities becoming increasingly available worldwide, resources need to be developed to assist students in becoming familiar with educational/training options available to them. At the ECFMG we are establishing a Global Medical Exchange (GEMx) program, which will utilize our extensive relationship with medical schools, physicians, regulatory agencies, health care organizations, and other entities to understand challenges, innovate solutions and ensure that GEMx meets the real-world needs of medical schools and students engaging in global exchanges. GEMx will ultimately facilitate and promote international exchanges in medical education, providing medical schools and students with access to the two most essential components of effective exchange programs — information and community.

A pilot study involving some twenty international medical schools is currently underway.

The question that looms large before us is whether or not licensing bodies will recognize multinational training and certification.

Licensing is presently national at best. In the United States, no national licensing exists, as licensing is done on a state-by-state basis by state medical boards, and there are massive obstacles to developing a national, much less international, license. However, in evaluating individuals for licensing, regulatory bodies may consider legitimate international credentials issued on the basis of established international standards. At ECFMG, we believe that the essential element for credentials’ validation is primary source verification. The related concern is how the credentials of international students seeking graduate medical education or licensing in any country are validated, and whether students’ credentials are primary source verified, which, again, we consider the gold standard.

The ECFMG is offering two solutions to this challenge. The first, our International Credentials Service

(EICS), was established twelve years ago to assist international medical regulatory authorities in evaluating credentials of applicants' educations within their jurisdictions. As shown in Figure 2, in 2011 EICS certified a variety of credentials, including medical school transcripts, certificates of license, medical school diplomas, and certificates of post-graduate medical training. Our current clients include the Australian Medical Council, the Medical Council of Canada, the Federation of State Medical Boards in the United States and similar regulatory agencies in Namibia, Norway, and South Africa, among others.

The second solution, in response to multiple requests from individual physicians and medical students, launched in early 2013, is our Electronic Portfolio of International Credentials (EPIC). It provides individuals with a secure repository of primary source verified medical credentials, available to them online 24 hours a day/7 days a week.

Finally, we recognize that moving to a new country to study or practice is difficult and challenging. IMGs often request assistance with acculturation issues

after arriving in the United States. In response, we have established the ECFMG Certificate Holders Office (ECHO), which provides information and services to ECFMG certified physicians and those nearing certification, as they plan their careers. ECHO helps physicians certified by the ECFMG to stay connected with us and access our resources, and it provides ongoing communication with our organization through survey and feedback pages.

Conclusion

In summary, as we pursue our mission, we at the ECFMG are particularly mindful of the following questions:

1. Which are the medical schools operating around the world and where are they? Are they all legitimate?
2. Are medical schools around the globe accredited and, if so, by whom, and on the basis of what standards?

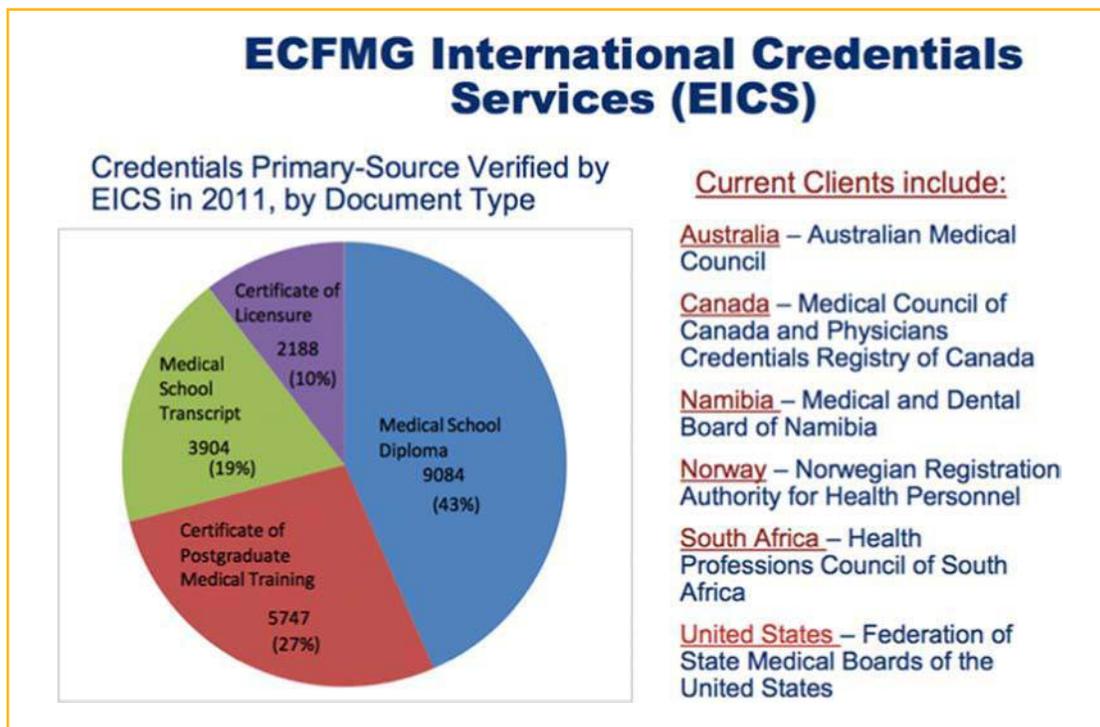


Figure 2. ECFMG International Credentials Services (EICS).

3. As students seek training opportunities around the world, how can they become familiar with what is available to them globally?
 4. How are credentials of international students seeking GME and/or licensure in any country validated? Are they primary source verified?
 5. What guidance/support is available for students/physicians seeking training and professional opportunities internationally or in the United States?
- The ECFMG Primary Source Credentials Verification Programs:
 - ECFMG International Credentials Service (EICS).
 - Electronic Portfolio of International Credentials (EPIC).
 - The ECFMG Certificate Holders' Office (ECHO).

Because of our profound belief in the importance of global accreditation, we at the ECFMG have put forth creative new initiatives to address these issues. Though there is currently no specific movement to establish an international license through an international association of medical regulatory authorities, the national regulatory agencies of 34 countries, thus far, have been meeting every two years to look at commonalities. They have discovered that they have far more in common than not. Future generations of students, physicians, and health care providers will want to cross borders in steadily increasing numbers, and this will challenge regulatory authorities to develop new solutions for accreditation and licensure. As more countries interact and find common ground, I believe that there will be more exciting initiatives to report on in the years to come.

Endnotes

Summary of Initiatives Launched or Supported by ECFMG in Response to Identified Globalization Concerns:

- The World Directory of Medical Schools (incorporating Avicenna and IMED).
- The ECFMG Accreditation Requirement and the WFME Recognition of Accreditors Initiative.
- The ECFMG Global Education in Medicine Exchange (GEMx) Program.

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