Subject : Bulletin 230 issue

TEMPLATE LETTER TO LOBBY YOUR FEDERAL MEMBER OF PARLIAMENT REGARDING THE VISA TRAINEE ISSUE, ALSO KNOWN AS THE SAUDI ISSUE. THIS TEMPLATE LETTER COULD ALSO BE USED TO LOBBY ALL FEDERAL CANDIDATES IN YOUR RIDING FOR THE NEXT ELECTION.)

Subject : Bulletin 230 issue

Dear xxx:

I am writing to you both as a constituent, and as a member of the Society of Canadians Studying Medicine Abroad (SOCASMA).

As the (student, parent, or friend) of a Canadian studying medicine abroad who hopes to return to practice medicine in Canada in the near future, I am very concerned by the Saudi medical resident crisis this past August 2018.

(IT’S ALWAYS BETTER IF YOU CAN PERSONALIZE YOUR LETTER. TELL YOUR STORY, YOUR STRUGGLES, ETC.)

As a result of the press reporting around this issue, I was very distressed to learn that while 1,119 Canadian and permanent resident IMGs were unable to obtain residency positions this year, we have over 1,000 Saudi visa trainees utilizing valuable and limited training resources that could be available to Canadians like my (myself, my daughter, my son, my friend) for residency training.

According to a recent report from CAPER, the Canadian Post-MD Education Registry, Canadian Universities currently train more Visa doctors (2,301) than Canadian/Permanent Resident IMG doctors (2,214). This is shocking!

Recently, there have been several articles noting the destructive impact of this visa trainee program, including:

<https://www.google.com/amp/s/ottawacitizen.com/opinion/columnists/stewart-saudi-arabian-medical-trainees-in-canada-mask-a-problem-we-should-correct/amp>

<https://deptmed.queensu.ca/deptmed/dept-blog/why-canada-should-fund-its-own-medical-education-system>

This massive influx of visa trainee residents is enabled by the Labour Market Opinion Exemption Operational Bulletin 230 which determines that Foreign Medical Residents do not take away employment or training opportunities from Canadians <https://www.canada.ca/en/immigration-refugees-citizenship/corporate/publications-manuals/operational-bulletins-manuals/bulletins-2010/230-september-1-2010.html>

Based on the recent Saudi medical crisis, this determination is no longer valid, if it ever was.  SOCASMA has recently been in correspondence with both Hon. Ahmed D. Hussen, Minister of Citizenship and Immigration and Hon. Jean-Yves Duclos of Employment and Social Development Canada asking them to review this decision and the Labour exemption.

I am personally very disappointed in the lack of responsiveness to SOCASMA's concerns to date from both of these Ministers. A copy of SOCASMA's correspondence is reproduced below.

I would like to request that you approach Ministers Duclos and Hussen on my behalf and indicate to them that this is an important matter to your constituents and to ask them to respond to SOCASMA's legitimate concerns and to take steps to address them in a meaningful way.

I believe with an election looming and with a major focus in this election being health care accessibility, this issue would have the support of a majority of Canadians.

I thank you for your assistance with this important issue, and look forward to receiving a positive response from your intervention.

Sincerely,

XXXX

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 Letter to Minister Hussen

**Sent:**Wednesday, March 13, 2019 11:02:03 AM
**Subject:**Request for reconsideration of Bulletin 230

The Honourable Ahmed D. Hussen, MP
Minister of Citizenship and Immigration
365 Laurier Ave W.
Ottawa Ontario
K1A 1L1

Re:  Operational Bulletin 230, September 1, 2010

Dear Minister Hussen:

        We are writing to you to ask for your cooperation in reviewing the current appropriateness of Operational Bulletin 230 which documents a Labour Market Opinion Exemption to the effect that Foreign Medical Residents do not take away employment or training opportunities from Canadians.

        The Society of Canadian’s Studying Medicine Abroad (SOCASMA) submits that given the events and concerns raised by the recent Saudi medical resident crisis in August of 2018, it is now clear that these medical residency positions are not supernumerary as suggested by HRSDC, but in fact are crucial medical positions that should properly be available to Canadian citizens who’s intention is to train in Canada and to remain in Canada to practice medicine.

        SOCASMA would like to point out that there is currently a shortage of medical residency spaces for Canadian Medical Graduates as well as for Canadian’s who have studied medicine abroad (CSAs) and International Medical Graduates (IMGs).  According to the Canadian Residency Matching System data for 2018, there were 172 unmatched CMGs and 1,360 unmatched IMGs (including CSAs) who are all Canadian citizens or permanent residents.   While these Canadian citizens and permanent residents are unable to obtain training necessary to become fully accredited as physicians, we have an estimated 1,053 Saudi medical residents (according to figures in the Globe and Mail) occupying valuable residency training spaces.

        While these visa trainee positions may be paid for by Middle Eastern governments, and therefore are not formal employment positions unavailable to Canadian residents, they are training programs that are unavailable to Canadian citizens.  Canada has limited training resources available, and these training resources are being used to train individuals who ultimately leave the country and are not available as a patient care resource.

         Further, while this training is being paid for by groups like the Saudi government, we have evidence that there are municipalities, institutions, individuals and corporations in Canada that are prepared to fund residency positions for Canadians on the same, or similar terms, to those of Middle East countries; this includes the Department of Defense.  This willingness to fund arises as a result of difficulty attracting physicians to remote communities.  Rather than relying on medical resources that are subject ro revocation during a political crisis, having these parties fund available residency training programs would create employment for Canadian citizens and increase the stability and reliability of medical care for all Canadians.

         Unfortunately, Universities and training institutions have been reluctant to end this lucrative and reliable source of Middle Eastern funding and open these residency training positions to Canadian funded applicants.   If these funded international visa residency positions were not available to provincial governments, universities, and hospitals, then these organizations would be required to fund these positions or open them to other Canadian funded applicants to provide needed and critical medical capacity, thereby creating 1,053 paid positions for Canadians.  This article from the Ottawa Citizen by Dr. John Stewart, Emeritus Professor, McGill University summarizes these issues:  <https://ottawacitizen.com/opinion/columnists/stewart-saudi-arabian-medical-trainees-in-canada-mask-a-problem-we-should-correct>

        SOCASMA believes in light of the Saudi medical crisis, the evidence is clear that the Labour Market Opinion Exemption in Operational Bulletin 230 is no longer valid.  We respectfully request your cooperation in reviewing and removing this Labour Market Exemption and opening these valuable residency training and employment positions to the Canadian citizens and permanent residents who deserve them.

        Thank you for your cooperation in this matter.  We look forward to receiving a positive response to our request in the near future.

Sincerely yours,

Rosemary Pawliuk
(604-541-4747)
Carole Lafrenière
(613-523-0776)

Executive Directors of
Society for Canadians Studying Medicine Abroad
22879-29B Avenue
Langley, British Columbia V2Z 3B1

Cc Jean-Yves Duclos

Response from Minister Hussan:

2019-01039451

Dear Rosemary Pawliuk and Carole Lafreniere:

Thank you for your correspondence of March 13, 2019, addressed to the Honourable Ahmed Hussen, Minister of Immigration, Refugees and Citizenship, concerning the Labour Market Impact Assessment (LMIA) process, and foreign national medical residents and medical research fellows completing their training or research in Canada.  I have been asked to respond to your concerns.

Immigration, Refugees and Citizenship Canada (IRCC) appreciates your concerns and values your feedback.  I would first like to clarify that the LMIA process, including the request to waive the LMIA requirement for certain occupations or individuals, is largely the responsibility of Employment and Social Development Canada (ESDC).   ESDC requested that IRCC waive the requirement for employers of foreign national medical residents and fellows to be issued positive or neutral labour market opinions, prior to the issuance of a work permit to a foreign national seeking to occupy one of these positions in Canada.

ESDC determined that foreign medical residents and fellows do not take away employment or training opportunities from Canadians as these positions are specifically created for and funded entirely by foreign governments, in the case of residents.  Foreign fellows support medical faculties with advanced clinical and research training due to ongoing shortages of Canadians available and interested in occupying such clinical or research positions.  As such, ESDC determined that Canadians cannot be negatively impacted by these offers to foreign medical residents and fellows.  Furthermore, ESDC determined that the transfer of skills and knowledge relating to foreign fellows employed in such positions is a significant benefit to Canadian universities and the medical field.

Foreign medical residents are holders of a medical degree equivalent to that of a Canadian Medical Doctorate who are coming to Canada to complete a residency at a Canadian hospital or in a clinical setting as part of their medical training.  These positions have a duration of approximately 2–7 years or more depending on the area of medical specialization.  Positions occupied by these foreign nationals are non-ministry (not publicly) funded places that have been created by Canadian medical faculties with financial support from the country sponsoring the training of the foreign resident.

Foreign medical fellows are holders of a medical degree equivalent to that of a Canadian Medical Doctorate, and recognized medical specialists who have completed residency training and accept to continue specializing in some highly specific field of study to advance clinical or medical research.  Foreign medical fellows doing clinical work/research are typically performing very specific clinical/research work for a one or two year period, in a hospital, clinical or research setting.

Further information can be found on the following Websites: <https://www.canada.ca/en/immigration-refugees-citizenship/corporate/publications-manuals/operational-bulletins-manuals/temporary-residents/foreign-workers/exemption-codes/public-policy-competitiveness-economy.html> and <https://www.canada.ca/en/immigration-refugees-citizenship/corporate/publications-manuals/operational-bulletins-manuals/bulletins-2010/230-september-1-2010.html>.

Information regarding the LMIA assessment process as well as contact information for ESDC can be found on the following Website: <https://www.canada.ca/en/employment-social-development/services/foreign-workers.html>.

Thank you for expressing your concerns.

Sincerely,

P. Rivard

Ministerial Enquiries Division

**This electronic address is not available for reply.**

Followup reminder to Minister Duclos, who was copied on above:

Dear Honourable Minister Duclos,

When might we expect a response to our correspondence below.

We look forward to hearing from you.

Rosemary Pawliuk

604-541-4747

**From:** Rosemary Pawliuk <rosemarypawliuk@shaw.ca>
**Sent:** April 3, 2019 12:22 AM
**To:** 'Jean-Yves.Duclos@parl.gc.ca' <Jean-Yves.Duclos@parl.gc.ca>
**Subject:** Request for reconsideration of Bulletin 230

Dear Honourable Minister Duclos,

We copied you with the correspondence below to Minister Hussen.  The purpose of our correspondence was to seek a reconsideration of Bulletin 230 which exempts medical trainees from requiring an HMIA.

The reconsideration is sought due to changed circumstances.

Today we received a response from Minister Hussen’s office advising us that Bulletin 230 is under the ESDC jurisdiction.  We realize from his correspondence that we should have directed this letter to you.  So we are hereby asking you for a response to this letter.

Our letter is below for your ease of reference.

We would appreciate an opportunity to meet with you or someone from your department in respect to this matter to discuss this further.

The underpinnings of the decision to exempt under Bulletin 230 are no longer true.

These foreign residents and fellows are displacing Canadians, are interfering with Canada’s ability to address the physician shortage we currently face, and have made delivery of healthcare vulnerable to the whim of a despotic leader who has shown himself hostile to Canada.

Residents in particular do not bring advanced knowledge to Canada.  They are medical graduates who sometimes have studied in the same classrooms at the same time as Canadians who studied medicine abroad.  They have less knowledge and expertise than many immigrant physicians who are now citizens or permanent residents.

Further, there are Canadian municipalities, corporations, and other sponsors who are prepared to fund training positions for Canadians under the same or similar terms as these foreign sponsors.  Indeed we put forth an offer on behalf of one Canadian sponsor and were flatly rejected on the basis that the university does not provide these sponsored positions to Canadians.

Universities claim they lack the training resources to train more residents.  They are currently training hundreds of residents from Saudi Arabia, using scarce Canadian resources and depriving Canadian sponsors who are prepared to fund the training of resident physicians for their region to provide desperately needed physicians.  Without physicians these corporations and communities are economically thwarted as they cannot attract the necessary skilled labour.  Further, it is contrary to the public interest to be training physicians that must leave the country when we lack the resources to train the number of physicians this country requires.

We look forward to hearing from you in respect to this request for a reconsideration of Bulletin 230 and for a meeting to discuss this matter further.

Sincerely yours,

Rosemary Pawliuk
(604-541-4747)
Carole Lafrenière
(613-523-0776)

Executive Directors of
Society for Canadians Studying Medicine Abroad
22879-29B Avenue
Langley, British Columbia V2Z 3B1

Response from Minister Duclos:

**From:** EDSC.MIN.FEDS-FCSD.MIN.ESDC@hrsdc-rhdcc.gc.ca <EDSC.MIN.FEDS-FCSD.MIN.ESDC@hrsdc-rhdcc.gc.ca>
**Sent:** June 5, 2019 10:27 AM
**To:** rosemarypawliuk@shaw.ca
**Subject:** Request meeting to discuss Bulletin 230

Dear Ms. Pawliuk and Ms. Lafrenière:

On behalf of the Honourable Jean-Yves Duclos, Minister of Families, Children and Social Development, I am responding to your emails of March 13 and April 3, 2019. You wrote to request a meeting with him to discuss Bulletin 230. I regret the delay in replying.

Your correspondence has been brought to the Minister’s attention, and he appreciates your courtesy in extending this invitation. Unfortunately, he is unable to meet with you at this time.

Thank you for writing to the Minister, and please accept his best wishes.

Yours sincerely,

Marjorie Michel

Director

Parliamentary Affairs

Office of the Minister of Families, Children and Social Development

Further followup request by SOCASMA for issues to be addressed:

**From:** Rosemary Pawliuk <rosemarypawliuk@shaw.ca>
**Sent:** June 10, 2019 1:37 PM
**To:** 'EDSC.MIN.FEDS-FCSD.MIN.ESDC@hrsdc-rhdcc.gc.ca' <EDSC.MIN.FEDS-FCSD.MIN.ESDC@hrsdc-rhdcc.gc.ca>
**Cc:** 'Working Group SOCASMA' <socasma.working@gmail.com>
**Subject:** RE: Request meeting to discuss Bulletin 230

Dear Ms. Michel,

We understand from your correspondence that Minister Duclos is unprepared to meet with us.

However, the issue we wrote him about is an important one that relates directly to the public interest and the purpose of LMIAs.  This issue requires the attention of those who are authorized to address the substantive purpose of immigration laws in this country.  It is clear that circumstances have changed such that Bulletin 230 is operating contrary to legislative intent of protection of the interests of Canadians.

We expect that our government is aware that our concern regarding the impact of Bulletin 230 is shared by various organizations including health care administrators, the public, and even those within the universities which lobbied for Bulletin 230 are becoming vocal about the harm that is being caused.  <https://deptmed.queensu.ca/index.php/dept-blog/why-canada-should-fund-its-own-medical-education-system>

Please advise us who is in a position of authority who we can speak to about this important issue.  We are happy to converse via telephone conference.

We look forward to your response.

Rosemary Pawliuk

Carole Lafreniere