Guideline for the Ethiopian Residency Matching Program

National Medical School Council
February 2018 Revised and Approved

This guideline is subject to revision at least every year and can be amended as deemed necessary by the SSG
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Acronyms

**ERMP**: Ethiopian Residency Matching Program

**EBRMP**: Exam Board for Residency Matching Program

**FMOH**: Federal Ministry of Health

**FMOE**: Federal Ministry of Education

**SSG**: Strategic Steering Group

I. **Background**

The Government of Ethiopia recognizes that healthcare is one of the crucial components of basic social services with direct linkage to growth and development of the country as well as to the welfare of the society. Accordingly, Ministry of Health is committed to reduce morbidity, mortality, and disability and to improve the health status of the Ethiopian people through accessing basic health services. (FMOH, 2011)

Attainment of the sustainable development goal targets depends partly on ensuring universal access to health through enhancing quality and quantity of health workforce who can provide ranges of health care services including advanced and specialized care. Hence, the Federal Ministry of Health has rightly identified strengthening advanced training of health workers as one of the strategic priorities of the national human resources for health. Among the strategic plans are to:
- Expand residency training programs through increasing the enrollment capacity of training institutions
- Increase the number and capacity of faculty at the training institutions through availing fellowship opportunities

The rise in public needs for advanced and better quality care, the epidemiological transition, rapid urbanization, rising health literacy, and broader social and economic changes occurring in the country necessitate increased quality and number of medical specialists. However, the existing health care service is not meeting those needs and changes. The country is not producing highly trained health professionals in enough quantity though there has been an increase in medical specialty training programs opening in past few years. Enrollment and output has been persistently low failing to match the supply of specialist doctors to population needs.

Existing training capacity is not fully utilized, with only a handful of universities running residency programs and graduating a small number of specialists. There is a tendency on part of some physicians to want to be trained only in a certain institution even though there are other institutions with comparable training capacity.

To address these challenges, the Federal Ministry of Health launched a national residency matching program which caters coordination, recruitment, testing, and matching of applicants for residency training programs centrally.

II. Objectives of ERMP

The program is intended to create a well-functioning and efficient system of residency matching under the leadership of the ministry to have well trained specialists in adequate number and quality so as to meet the health needs of the people. The program is also intended to assure all schools with residency program to have enrolled to their full capacity, applicants get accepted to their preferred program and institution, schools with residency program to meet the minimum requirement and aspire for quality and most sought after program and strive to be and remain competitive to attract the best applicants.
III. Definitions

- **Candidate:** An eligible applicant to the residency matching program
- **Eligible applicant:** A medical doctor with or without sponsorship. However, those self-sponsored applicants MUST produce evidence proving that they are free from any government obligation as General Practitioner. They are also required to produce evidence that they have means of financial support during their education.
- **Sponsor:** an institution (public, private or charity organizations) that supports the resident as per the FMOH requirement
- **Resident:** A candidate who is accepted to clinical residency program, registered and started education
- **Matching:** Applicant’s choice of specialties and institutions are matched with candidates’ performance in centrally administered written entrance exam and interview
- **Standardization of institutions:** supporting, encouraging, and enforcing institutions to meet the minimum requirement to start and or run residency programs in terms of infrastructure, human resource, residency well-being, vaccines, learning environment, housing, offices, duty room, laundry, patient load and mix as set by the professional associations. Standardization tool shall be endorsed by committee nominated by SSG

Roles and Responsibility of stakeholders

**ERMP-SSG**

- Set action plan for the SSG with detailed budget
- Produce guideline for the national residency matching program
- Define membership, mandates and accountability of the EBRMP
- Finalize draft guideline document on residency matching program for endorsement
- Develop a detailed implementation plan for national residency matching
- Organize awareness creation and advocacy activities
- Support implementation of ERMP
- Monitor, evaluate and improve ERMP
- Quality control and assessment of the residency matching program
- Approve the minutes of the last meeting with input from board members
• Centrally manage the recruitment, examination and placement of residents to the universities
• Follow, direct and execute the process of guideline preparation and implementation
• Organize a consultative workshop with broader group of stakeholders
• Can establish various committees as needed
• Support quality assurance offices of universities on development of standardization tools

FMOH
• Communicate meetings
• Facilitate financing of SSG
• Prepare and distribute minute to board members
• Presents the SSG recommendations to higher bodies in written form
• Collect and disseminate relevant documents that are approved by the Chairperson
• Keep copy of documents and records of the SSG and the examination board
• Chair meetings in the absence of the Chairperson
• Communicate agendas two weeks prior to the meeting

MOSHE
• Responsible with all communication and follow-up of the universities
• Chair the board
• Call regular and extraordinary meetings
• Draft meeting agendas and announce the meeting date and venue
• Communicate with other stakeholders as needed on technical issues
• Maintain all data and records together with FMOH
Members’ responsibilities

- Participate in SSG meetings
- Provide technical inputs and resources in the SSG
- Complete individual assignments on time
- Follow standard meeting procedures and activities
- Propose an agenda for a meeting
- Each member has one vote

IV. Training Institutions

These are either university-based or hospital-based medical schools which are recognized to run clinical medicine graduate program in specific discipline after being evaluated as per the agreed upon standard and fulfilled the minimum requirement (accredited). These schools / institutions can be publicly owned or privately owned.
V. Recruitment

Who can apply?

- A Medical Doctor (MD) graduated from MOSHE recognized institution or any accredited medical schools abroad and recognized by FMHACA. **Non-MD degree holders are not eligible.**
- One who secured sponsorship stating up to three specialty areas that the candidate chooses to apply for.
- Any certified and licensed medical doctor can apply for residency whether she/he has sponsorship or not. However, the following quota allocation will apply during matching.
  - 90% is dedicated for candidates sponsored by government
  - 5% is dedicated for candidates sponsored by private and charity institutions
  - 3% is dedicated for neighboring countries (requested by Ministry of Foreign Affairs)
  - 2% is dedicated for those who want to join residency, but, do not have sponsorship (self-sponsored). However, these candidates MUST produce evidence proving that they are free from any government obligation as General Practitioner. This group should support themselves during the period of residency as they will not get salary.
- Sponsored applicants are advised to apply only for programs they secured sponsorship

How can they apply?

- The first step is to apply to sit for the written entrance exam. This is done through the online registration system on the dedicated website. The following should be included:
  - Filled Application form
  - Sponsorship letter: Sponsored applicants should discuss/negotiate with the sponsor on the fields of choice. The applicant MUST upload scanned sponsorship letter during application.
  - Declaration of health status as per the attached check list. However, applicants must know that respective departments will do physical examination to attest it. Applicants are advised thorough medical to avoid latter discomfort.
  - For those who are applying for self-sponsored quota, they have to upload evidence of financial support.
After processing the application, the SSG announces:

- The eligible candidates list with allocated exam centers
- The MCQ and Interview exam dates.

The candidate is allowed to bring any supporting document to the exam center during the interview if he/she believes that it might help, and present it to interviewers whenever it’s needed.

**What do they apply for?**

- The candidate could apply for a maximum of three specialties and rank these based on applicant’s and sponsor’s agreed upon interest. If the candidate doesn’t get accepted for her first choice, she would get her second, if not the second, gets her third.
- The programs the candidate applies for should be included in the sponsorship letter.
- The candidate should rank all the programs and institutions as to his/her and the sponsor’s preference.

**When do they apply?**

- Within a period of one month of notice (during the registration period)
- Screening one month
- Examination after screening (to be decided accordingly)

**How frequent can they apply?**

- As long as the candidate has a sponsor or decided to support self during the training years, he/she can apply every year, but in one year an applicant is able to register only once; Those who register multiple times using different accounts will be disqualified from the competition;

**Who can take this examination?**

- An applicant whose eligibility has been verified and listed to sit for the exam.
- Applicants who properly submitted their application (draft applicants are not eligible to sit for examination)
- Candidates with duplicate applications will not be allowed to sit for examination
About the entrance exam

The entrance exam has two components (MCQ format and Interview). All applicants (including foreign candidates) should take both exams.

1. MCQ
   - The objective of the MCQ exam is to assess the applicant’s knowledge and practice in general medicine; it consists all medical disciplines based on the blue print
   - The MCQ exam will be administered for all candidates at the same time
   - The MCQ (200 questions) accounts for 80% of the total
   - 1.5 minute is allotted for each question

2. Interview:

   2.1. Who can sit for interview?
   - All candidates who took the MCQ can seat for interview.
   - The Interview accounts for 20% of the total mark

   2.2. Some important notes about the interview
   - The interview is done by panel of interviewers established by SSG and is meant to explore candidates interest, attitude, desire, communication skills and contribution (past and future) on the field.
   - The candidate’s fitness for the training is also determined by the panel. The candidate should be physically and mentally fit for the training, as per the tool prepared by the department and approved by SSG evidences for fitness may be requested if deemed necessary (medical certificate)
   - Please note that the interview is only once whether you chose three fields or one.
   - While asked about fields you chose, your response should be to all the fields you chose in order of your priority (choice). Eg. I chose Surgery first because…., Radiology second because….. and so on.
   - As the interview lasts in 15 minutes, be concise and precise while you are answering the questions
   - The interviewers are a panel of three seniors from different specialties

   2.3. Where does the interview take place?
   - The interview center and the schedule will be announced to the candidates through the ERMP website.
How are candidates notified about exam dates?

- Exam (MCQ and Interview) dates will be notified one week ahead to candidates through the website and/or mass media.

How is the pass mark determined?

- There will be no cut off score, rather the available spots for a specific program and institution/school determines placement.

How much weight does the MCQ and interview carry?

- MCQ accounts for 80% and interview accounts for 20% of the total score.

Affirmative action

- Female candidates will get additional 3% of their total mark.

Result Notification

- Result of the MCQ and interview will be posted on the ERMP website a week before matching.

VI. Matching and Assignment

- Matching is not simply placement of applicants for a program and place of study; it is rather valuing the merit of good performers so that quality is maintained.

- Applicants preference for field of study is considered first to do the matching followed by institution choice. Those candidates with high score are given their preference first and then next the rest gets their choices based on their score. Those with highest scores are likely to get their preferred specialty and school.

- In case of tie;
  - Female candidate will be given priority
  - If they are same sex, ranking order of field of study and then place of study will be considered.
  - In cases where the order of field and place of study choice is the same, lottery method (software matching) will be used.

- It must be noted that some applicants might not be matched as the available residency spots are less than the number of applicants.
• Some tips to improve chance of matching:
  o Choose a sizable number of residency programs and place of study on your Rank Order List. The more residency programs and place of study you choose, the more likely you are to match. Choosing too few, and you may find yourself unmatched. However, securing sponsorship is a must.
  o Choose programs where you know you will be happy. Consider geographic location, competitiveness of program, and your true interest in a specialty. If you aren’t honest with yourself in your selection, then you’ll end up in a residency program which will fail to meet your professional needs.

• Unmatched candidates have the following options;
  1. Based on their total score, they can be listed in reserves for their first field of choice only. Please NOTE that candidates who are already matched (even with their 2nd or 3rd choice) cannot be considered in the reserve list.
  2. “Scramble”: when the NRMP announces vacant spots, they can apply for those spots even if they were not their choice during registration. However, securing sponsorship or declaration to support self is a must.
  3. For fields where there are no enough reserves, unmatched candidates will be invited to apply
  4. Remained unmatched for the academic year

Post matching procedures

• Matching result of all institutions including all fields and available vacant spots will be posted. Candidates will be notified about their assignment through the website.
• E-mail will be sent to every candidate stating his/her status
• Official letter will be written to the institution including the names of trainees in their respective specialties.
• Sponsorship change: if the primary sponsoring institution while applying and the current sponsor showed agreement in written, swap-up is possible. However, one sided evidence is not acceptable.
• Any transfer request from one program to the other or from one institution to the other will not be entertained before registration and starting training. However, after registration and starting residency training, the respective college/school academic rules and regulations apply for all in all matters.

• Remunerated posts/stipendiary positions refer to contractual service positions and would include internship, residency and higher specialist training.

Post matching special scenarios

• Candidates will not be matched to a program they did not apply and sponsored for. Those candidates who do not get matched to any of the three specialties they applied for has the following options.
  o Can scramble for any vacant positions announced
  o Based on their merit can be considered in the reserve list for their first field choice
  o Waiting for another year to take the exam again if they have a new sponsorship letter or try self-sponsor quota.

• A candidate cannot refuse the matching if he/she doesn’t get his/her first choice. If the candidate does not want the matching, he should wait another year and will go through all the process as a new applicant including a new sponsorship letter.

• Exchange/ transfer among matched candidates (both field or place of study) before registration and starting education is not allowed.

Appeals

• Appeal on the result is made to the medical education team in MOH either by email or in written with in one week of result notification

• Appeal on matching is made to the medical education team in MOH either by email or in written with in two weeks of matching notification
Special considerations to appeal to change institutions:

Candidates should now that these special considerations are not right, rather, they are privilege.

1. Couple matching: Married couples can appeal to be placed in the same institution as long as they produce marriage certificate and application letter stating institution they want to be placed in. The institution they request shall be in either of the institutions where one of the spouses has matched for.

2. Special health conditions: Candidates can be placed in a specific institution if they have health conditions that require special medical attention and is available in that specific area alone. The candidate should produce a board medical certificate stating the individual has the condition and the care he requires and that is the place he can get the medical service.

Note:

- After all matching results are announced, those candidates who did not match can be considered for vacant or unfilled residency spots in different institutions.

Admission time
From 2012 Ethiopian academic year on, all colleges/schools will admit candidates during the months of Meskerem – Tikmit

Post Registration scenarios
After registration and starting residency training, the respective college/school rules and regulations apply for all.
**Declaration by applicants:** We advise applicants to undergo meticulous medical (general, ophthalmologic) examination before completing this declaration.

1. I am solely responsible for the ranked choices of specialties and institutions and for the match outcome based on these choices
2. I understand that I should report to the program and institution I am matched to within the deadline and failing to report might affect my result in being unmatched for the academic year
3. I understand that both the residency program and myself as an applicant are bound by the result of the Match. However, I also understand that my actual entry into the training program is contingent upon satisfactory completion of the medical fitness prerequisites set by the program. e.g. for Ophthalmology: No visual impairment, intact color vision, normal stereopsis, and no neurological problems that affect gross and fine movements of the hands.
4. I understand that the ERMP cannot guarantee my continuation of training in the residency program rather this is contingent upon my performance as a resident based on the curricular requirements of that specific program.
5. I declare that I have no medical conditions that can hinder my performance in any of the residency programs I have listed for matching.
6. I declare that I have no obligations that prevent me from accepting the matched institution or program.
7. I authorize the use of any information I provided in any study approved by the ERMP provided that the information is kept anonymous and unique identifiers are not revealed.