Geriatric Medicine Profile
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Slide numbers are provided in the right column.
GENERAL INFORMATION

Geriatric Medicine deals with the prevention, diagnosis, treatment, remedial and social aspects of illness in older people, mainly patients 75 years of age or more. Most certified specialists take academic positions in medical schools. A typical day consists of a mix of patient care activities, education/teaching, administration and research.

Specialists in geriatric medicine are expected to be competent consultants, with a well-founded knowledge of geriatrics, who are capable of establishing an effective professional relationship with older patients. Geriatricians work with other members of the health care team to prevent illness and restore an ill, disabled older person to a level of optimal ability and, wherever possible, return the person to an independent life at home.

Source: Pathway evaluation program
GENERAL INFORMATION

Training to be a geriatrician is complex. Residents must demonstrate the knowledge, skills and attitudes relating to gender, culture and ethnicity pertinent to geriatric medicine. In addition, all residents must demonstrate an ability to incorporate gender, cultural and ethnic perspectives in research methodology, data presentation and analysis. Residents must be able to work effectively in acute hospitals, long-term care facilities and the community, including the older patient's home.

Only candidates certified by the Royal College of Physicians and Surgeons of Canada in internal medicine may be eligible for the Certificate of Special Competence in Geriatric Medicine.
GENERAL INFORMATION

Once certified in internal medicine, there is an additional 2 years of approved residency in geriatric medicine. This period must include: 1 year of approved clinical residency in geriatric medicine and 1 year of further residency (which may include 6 or 12 months of approved clinical residency in geriatric medicine or another related specialty); and 6 or 12 months of approved clinical or laboratory research training, relevant to geriatric medicine.

For further details on training requirements please go to:

Royal College of Physicians and Surgeons of Canada

The Canadian Geriatrics Society

Source: Pathway evaluation program
## Total number & number/100,000 population by province, 2016

<table>
<thead>
<tr>
<th>Province/Territory</th>
<th>Physicians</th>
<th>Phys/100k pop’n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newfoundland/Labrador</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>10</td>
<td>1.1</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>7</td>
<td>0.9</td>
</tr>
<tr>
<td>Quebec</td>
<td>73</td>
<td>0.9</td>
</tr>
<tr>
<td>Ontario</td>
<td>117</td>
<td>0.8</td>
</tr>
<tr>
<td>Manitoba</td>
<td>5</td>
<td>0.4</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>1</td>
<td>0.1</td>
</tr>
<tr>
<td>Alberta</td>
<td>20</td>
<td>0.5</td>
</tr>
<tr>
<td>British Columbia</td>
<td>43</td>
<td>0.9</td>
</tr>
<tr>
<td>Territories</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>CANADA</strong></td>
<td><strong>276</strong></td>
<td><strong>0.8</strong></td>
</tr>
</tbody>
</table>

Source: 2016 CMA Masterfile
Number/100,000 population, 1995 to 2016

Source: 2016 CMA Masterfile
Number by gender & year, 1995 to 2016

Source: 2016 CMA Masterfile
Percentage by gender & age, 2016

Gender
- Male: 43%
- Female: 57%

Age Group
- 45 - 54: 33%
- 55 - 64: 32%
- 35 - 44: 18%
- <35: 8%
- 65+: 9%

Source: 2016 CMA Masterfile
Number by gender & age, 2016

<table>
<thead>
<tr>
<th>Age</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;35</td>
<td>13</td>
<td>7</td>
</tr>
<tr>
<td>35-44</td>
<td>36</td>
<td>12</td>
</tr>
<tr>
<td>45-54</td>
<td>52</td>
<td>34</td>
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<tr>
<td>55-64</td>
<td>39</td>
<td>44</td>
</tr>
<tr>
<td>65+</td>
<td>9</td>
<td>16</td>
</tr>
</tbody>
</table>

Source: 2016 CMA Masterfile
Percentage by main work setting, 2014

- Academic Health Sciences Centre: 52%
- Non-AHSC Teaching Hospital: 17%
- Community Hospital: 16%
- Community Clinic/Health-centre: 6%
- Other: 4%
- Free-standing Lab/Diag Clinic: 3%
- Admin/Corp office: 2%

Source: 2014 National Physician Survey. CFPC, CMA, Royal College
Percentage by practice organization, 2014

Source: 2014 National Physician Survey. CFPC, CMA, Royal College
### Hours worked per week (excluding on-call), 2014

<table>
<thead>
<tr>
<th>Activity</th>
<th>Hours worked per week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct patient care without teaching component</td>
<td>16.8</td>
</tr>
<tr>
<td>Direct patient care with teaching component</td>
<td>10.6</td>
</tr>
<tr>
<td>Teaching without patient care</td>
<td>3.7</td>
</tr>
<tr>
<td>Indirect patient care</td>
<td>7.5</td>
</tr>
<tr>
<td>Health facility committees</td>
<td>1.4</td>
</tr>
<tr>
<td>Administration</td>
<td>2.4</td>
</tr>
<tr>
<td>Research</td>
<td>2.4</td>
</tr>
<tr>
<td>Managing practice</td>
<td>0.7</td>
</tr>
<tr>
<td>Continued professional development</td>
<td>2.9</td>
</tr>
<tr>
<td>Other</td>
<td>2.3</td>
</tr>
<tr>
<td><strong>TOTAL HOURS PER WEEK</strong></td>
<td><strong>50.7</strong></td>
</tr>
</tbody>
</table>

Source: 2014 National Physician Survey. CFPC, CMA, Royal College
On-call duty hours per month, 2014

- 66%: Up to 120 hrs/month
- 15%: More than 120, up to 180 hrs/month
- 13%: More than 180, up to 240 hrs/month
- 4%: More than 240 hrs/month
- 2%: No response

Time spent on call in direct patient care = 22 hrs./month

Source: 2014 National Physician Survey. CFPC, CMA, Royal College
Percentage by remuneration method

Primary payment method\(^1\) in 2013

- 90% + fee-for-service: 54%
- 90% + salary: 15%
- 90% + other*: 14%
- Blended: 17%
- NR: 1%

* Other includes capitation, sessional, contract and other methods

Average gross fee-for-service payment per physician for Internal Medicine & subspecialties in 2014/15 (those earning at least $60,000) = $403,485\(^2\)

Average percent overhead reported by Internal Medicine specialists in 2010 = 22%\(^3\)

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1 National Physician Survey, 2013, CFPC, CMA, Royal College
2 National Physician Database, 2014/15, CIHI
3 National Physician Survey, 2010, CFPC, CMA, Royal College
Professional & work-life balance satisfaction, 2013

- Balance of personal & professional commitments:
  - NR: 44%
  - Dissatisfied or very dissatisfied: 17%
  - Neutral: 39%

- Current professional life:
  - NR: 5%
  - Dissatisfied or very dissatisfied: 14%
  - Neutral: 81%

Source: 2013 National Physician Survey. CFPC, CMA, Royal College
Number of retirees during the three year period of 2013-2015

Source: CMA Masterfile – year over year comparisons
Note: “Retired” is based on giving up licence and therefore excludes those who have retired from clinical practice but are still licensed; those younger than 45 may include physicians who have temporarily given up their licence but return to practice at a later date.
Total & Ministry funded postgraduate MD trainees in 2014/15

<table>
<thead>
<tr>
<th>Faculty of Medicine</th>
<th>Ministry funded</th>
<th>Total</th>
<th>Faculty of Medicine</th>
<th>Ministry funded</th>
<th>Total</th>
</tr>
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<tbody>
<tr>
<td>MUN</td>
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<td>0</td>
<td>McMaster U</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Dalhousie U</td>
<td>2</td>
<td>2</td>
<td>UWO</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>U Laval</td>
<td>7</td>
<td>7</td>
<td>NOSM</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>U Sherbrooke</td>
<td>1</td>
<td>1</td>
<td>U Manitoba</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>U Montréal</td>
<td>7</td>
<td>7</td>
<td>U Sask</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>McGill U</td>
<td>0</td>
<td>0</td>
<td>U Alberta</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>U Ottawa</td>
<td>1</td>
<td>1</td>
<td>U Calgary</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Queens U</td>
<td>0</td>
<td>0</td>
<td>UBC</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>U Toronto</td>
<td>9</td>
<td>10</td>
<td>Canada</td>
<td>44</td>
<td>47</td>
</tr>
</tbody>
</table>

Source: 2014/15 Annual Census of Post-MD Trainees, CAPER
PGY-4 & exiting postgraduate-MD trainees in 2014/15

Source: 2014/15 Annual Census of Post-MD Trainees, CAPER

IMG – International Medical Graduates
GCMS – Graduates of Canadian Medical Schools
Postgraduate-MD trainees in 2014/15

- Total of 20 PGY-4 Geriatric Medicine trainees representing 46% of all Geriatric Medicine trainees.
- Total of 44 Geriatric Medicine trainees representing 0.3% of all Ministry funded trainees.
- Total of 2 visa trainees in Geriatric Medicine.
- Total of 14 Geriatric Medicine trainees completed postgraduate training in 2014.

Source: 2014/15 Annual Census of Post-MD Trainees, CAPER
Of the 11 exits in 2013, 10 (91%) were known to be practising in Canada.
Stress associated with finding employment at end of residency

Source: 2012 National Physician Survey of residents. CFPC, CMA, Royal College
Links to the Organizations Supplying Information for this Document

- National Physician Survey
- Canadian Medical Association
- Association of Faculties of Medicine of Canada
- Royal College of Physicians and Surgeons of Canada
- College of Family Physicians of Canada
- Canadian Institute for Health Information