Psychiatry Profile
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GENERAL INFORMATION

Psychiatry is the medical specialty that deals with the diseases of the mind. Psychiatric patients manifest illnesses and problems that require a comprehensive biological, psychological and social evaluation to understand their illnesses and their needs. Central to the psychiatrist’s role is a comprehensive assessment, leading to a diagnosis and a treatment plan for the care and rehabilitation of patients with mental illness, and emotional and behavioural disorders.

Psychiatrists use a combination of biological, psychological and social treatment modalities. They must be comfortable in working with the patient, as opposed to working on the patient. To do this successfully, they must possess the skills and comfort level to work and lead a team that includes the patient, their family and other mental health professionals and agencies.
GENERAL INFORMATION

Most psychiatrists work in multiple settings and their role may vary somewhat in these different settings, including:

- In a general hospital, they are responsible for the care and treatment of psychiatric inpatients, as well as providing consultation and liaison to the medical/surgical units and patients.
- In community outpatient clinics, the psychiatrist works as a member of a community-based multidisciplinary mental health team. The psychiatrist will usually work in close liaison with (or indeed share care) with the community family physician.
- In a specialized psychiatric hospital, they would lead a multidisciplinary team in the assessment, care and treatment of the hospital’s inpatients, outpatients or a combination of both. Most specialized hospitals are outreach and community-focused, providing a wide range of programs to their patients.
- In community office practice, their emphasis would be on working individually with a patient using a variety of management, rehabilitative and psychotherapeutic techniques.

Source: Pathway evaluation program
GENERAL INFORMATION

As a full- or part-time academic, psychiatrists would combine education or research responsibilities with their clinical practice. The majority of psychiatrists work as general psychiatrists and others subspecialize in areas including:

- child/adolescent psychiatry;
- geriatric psychiatry;
- or forensic psychiatry.

Others specialize in a specific area of practice such as addictions and substance abuse disorders, mood and anxiety disorders, schizophrenia or eating disorders. Other areas of interest include Aboriginal mental health, women’s mental health, gender issues, cross-cultural psychiatry, sleep medicine, or psychosomatic medicine and the care of patients with cancer, heart disease and diabetes.

Upon completion of medical school, to become certified in psychiatry requires an additional 5 years of Royal College-approved residency training.

Source: Pathway evaluation program
GENERAL INFORMATION

This training includes:

- 1 year of basic clinical training that must include: broadly based medical experience relevant to psychiatry with core elements in medicine, pediatrics, family medicine, neurology (neuroimaging is strongly recommended), emergency medicine and psychiatry;
- 2 years of junior residency that must encompass basic and foundational training with a focus on the role of the psychiatrist practicing across the life span in a variety of practice settings. Patients with developmental delay across the life span, with or without comorbid psychiatric disorder, must be included. The settings must include accredited hospital-based and ambulatory care placements;
- 2 years of senior residency: during this period the resident assumes more leadership in the education and supervision of junior colleagues while consolidating and further developing career track interest through electives and selectives, including research electives and selectives that must be acceptable to the psychiatry residency program and to the Royal College.

Source: Pathway evaluation program
GENERAL INFORMATION

The American Board of Psychiatry and Neurology (ABPN) and the Royal College have created an agreement that accepts the credentials of applicants to each other’s examinations.

For further details on training requirements please go to:

Royal College of Physicians and Surgeons of Canada

Canadian Psychiatric Association

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>53</td>
<td>10.0</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>10</td>
<td>6.8</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>140</td>
<td>14.8</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>45</td>
<td>6.0</td>
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<tr>
<td>Quebec</td>
<td>1114</td>
<td>13.4</td>
</tr>
<tr>
<td>Ontario</td>
<td>1879</td>
<td>13.5</td>
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<tr>
<td>Manitoba</td>
<td>174</td>
<td>13.3</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>82</td>
<td>7.2</td>
</tr>
<tr>
<td>Alberta</td>
<td>385</td>
<td>9.1</td>
</tr>
<tr>
<td>British Columbia</td>
<td>711</td>
<td>15.1</td>
</tr>
<tr>
<td>Territories</td>
<td>2</td>
<td>1.7</td>
</tr>
<tr>
<td><strong>CANADA</strong></td>
<td><strong>4595</strong></td>
<td><strong>12.7</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: 55%
- Female: 45%

Age Group

- <35: 4%
- 35 - 44: 21%
- 45 - 54: 23%
- 55 - 64: 29%
- 65+: 23%

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

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>65+</td>
<td>263</td>
<td>757</td>
</tr>
<tr>
<td>55-64</td>
<td>551</td>
<td>736</td>
</tr>
<tr>
<td>45-54</td>
<td>528</td>
<td>502</td>
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<tr>
<td>35-44</td>
<td>547</td>
<td>395</td>
</tr>
<tr>
<td>&lt;35</td>
<td>124</td>
<td>76</td>
</tr>
</tbody>
</table>

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

- Private Office/Clinic: 32%
- Academic Health Sciences Centre: 27%
- Community Clinic/Health-centre: 13%
- Community Hospital: 11%
- Non-AHSC Teaching Hospital: 10%
- Admin/Corp office: 3%
- Nursing home/long term care facility/seniors’ residence: 2%

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

Solo Practice: 50%
Group Practice: 5%
Interprofessional Practice: 28%
Hospital-based Practice: 16%
NR: 5%

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>
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</thead>
<tbody>
<tr>
<td>Direct patient care without teaching component</td>
<td>23.8</td>
</tr>
<tr>
<td>Direct patient care with teaching component</td>
<td>5.4</td>
</tr>
<tr>
<td>Teaching without patient care</td>
<td>1.5</td>
</tr>
<tr>
<td>Indirect patient care</td>
<td>6.5</td>
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<tr>
<td>Health facility committees</td>
<td>0.9</td>
</tr>
<tr>
<td>Administration</td>
<td>1.9</td>
</tr>
<tr>
<td>Research</td>
<td>1.0</td>
</tr>
<tr>
<td>Managing practice</td>
<td>1.4</td>
</tr>
<tr>
<td>Continued professional development</td>
<td>3.1</td>
</tr>
<tr>
<td>Other</td>
<td>0.7</td>
</tr>
<tr>
<td><strong>TOTAL HOURS PER WEEK</strong></td>
<td><strong>46.2</strong></td>
</tr>
</tbody>
</table>

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

- 86% up to 120 hrs/month
- 5% more than 120, up to 180 hrs/month
- 1% more than 180, up to 240 hrs/month
- 5% more than 240 hrs/month
- 3% no response

Time spent on call in direct patient care = 19 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**: 32%
- **90% + salary**: 51%
- **90% + other\(^*\)**: 8%
- **Blended**: 5%
- **NR**: 5%

\(^*\) Other includes capitation, sessional, contract and other methods

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Average gross fee-for-service payment per physician for Psychiatry in 2014/15 (those earning at least $60,000) = $255,745\(^2\)

Average percent overhead reported by all medical specialists in 2010 = 20\(^3\)

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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
- Dissatisfied or very dissatisfied: 8%
- Neutral: 24%
- Satisfied or very satisfied: 15%
- NR: 53%

Current professional life
- Dissatisfied or very dissatisfied: 8%
- Neutral: 10%
- Satisfied or very satisfied: 9%
- NR: 73%

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>
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</thead>
<tbody>
<tr>
<td>MUN</td>
<td>30</td>
<td>31</td>
<td>McMaster U</td>
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<tr>
<td>Dalhousie U</td>
<td>37</td>
<td>41</td>
<td>UWO</td>
<td>34</td>
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<tr>
<td>U Laval</td>
<td>62</td>
<td>62</td>
<td>NOSM</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>U Sherbrooke</td>
<td>46</td>
<td>47</td>
<td>U Manitoba</td>
<td>49</td>
<td>49</td>
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<tr>
<td>U Montréal</td>
<td>70</td>
<td>70</td>
<td>U Sask</td>
<td>24</td>
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<tr>
<td>McGill U</td>
<td>54</td>
<td>61</td>
<td>U Alberta</td>
<td>48</td>
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<tr>
<td>U Ottawa</td>
<td>54</td>
<td>55</td>
<td>U Calgary</td>
<td>41</td>
<td>42</td>
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<tr>
<td>Queens U</td>
<td>28</td>
<td>32</td>
<td>UBC</td>
<td>111</td>
<td>119</td>
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<td>U Toronto</td>
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<td>Canada</td>
<td>912</td>
<td>1007</td>
</tr>
</tbody>
</table>

* Includes child and adolescent psychiatry, forensic psychiatry and geriatric psychiatry

Source: 2014/15 Annual Census of Post-MD Trainees, CAPER
First year & 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 185 first year Psychiatry trainees representing 20% of all Psychiatry trainees.
- Total of 912 Psychiatry trainees representing 7% of all Ministry funded trainees.
- Total of 65 visa trainees in Psychiatry.
- Total of 153 Psychiatry trainees completed postgraduate training in 2014.

Source: 2014/15 Annual Census of Post-MD Trainees, CAPER
Of the 159 exits in 2013, 142 (89%) were known to be practising in Canada.

Source: 2014/15 Annual Census of Post-MD Trainees, CAPER
Stress associated with finding employment at end of residency

- **FM resident**
  - Not stressful: 43%
  - Somewhat stressful: 42%
  - Very stressful: 8%
  - NR/NA: 7%

- **Other spec res**
  - Not stressful: 20%
  - Somewhat stressful: 50%
  - Very stressful: 25%
  - NR/NA: 6%

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