



regulatory environment

demographic trends

graduate trends

supply trends

Canada's Health Care Providers, 1997 to 2006

A Reference Guide



Canadian Institute
for Health Information
Institut canadien
d'information sur la santé

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The Health Human Resources team at the Canadian Institute for Health Information (CIHI) is pleased to present *Canada's Health Care Providers, 1997 to 2006, A Reference Guide*.

This publication presents the most recent information from the Health Personnel Database (HPDB) at CIHI. The HPDB is the only national database of its kind that maintains information on such a broad scope of different health personnel in Canada.

This year, *Canada's Health Care Providers, 1997 to 2006, A Reference Guide* provides aggregate, supply-based trend information, by province and territory and by year, for 24 health personnel groups. This latest publication maintains the continuity of previous editions, such as *Health Personnel Trends in Canada, 1995–2004*, within a consolidated format and is intended to be used as a reference guide for the professions highlighted. Each chapter is profession-specific and delivers information on regulatory environment, supply and demographic trends and graduate trends that is suitable for baseline information and analysis on the specific health occupation.

Introduction



This publication contains information on 24 health occupational groups in Canada:

- Audiologists
- Chiropractors
- Dental hygienists
- Dentists
- Dietitians
- Environmental public health professionals **NEW!**
- Health information management professionals (formerly known as health record professionals)
- Licensed practical nurses
- Medical laboratory technologists
- Medical physicists
- Medical radiation technologists
- Midwives
- Nurse practitioners
- Occupational therapists
- Optometrists
- Pharmacists
- Physicians
- Physiotherapists
- Psychologists
- Registered nurses
- Registered psychiatric nurses
- Respiratory therapists
- Speech-language pathologists
- Social workers

Regulatory Environment for Selected Health Occupations in Canada, 2006

Occupations	N.L.	PE.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Y.T.	N.W.T.	Nun.
Audiologists				Y	Y	Y	Y	Y	Y				..
Chiropractors	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	..	..
Dental Hygienists	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Dentists	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Dietitians	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	..	..	..
Environmental Public Health Professionals													
Health Information Management Professionals													
Licensed Practical Nurses	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Medical Laboratory Technologists			Y	Y	Y	Y	Y	Y	Y				
Medical Radiation Technologists	Y	Y	Y	Y	Y	Y	Y	Y	Y		..	..	..
Medical Physicists													
Midwives					Y	Y	Y	Y	Y	Y		Y	
Nurse Practitioners	Y		Y	Y	Y	Y	Y	Y	Y	Y		Y	Y
Occupational Therapists	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	..	..	..
Optometrists	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Pharmacists	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Physicians	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Physiotherapists	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		
Psychologists	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		Y	Y
Registered Nurses	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Registered Psychiatric Nurses	n/a	n/a	n/a	n/a	n/a	n/a	Y	Y	Y	Y	n/a	n/a	n/a
Respiratory Therapists					Y	Y	Y		Y		..	..	..
Social Workers	Y	Y	Y	Y	Y	Y			Y				
Speech-Language Pathologists				Y	Y	Y	Y	Y	Y				

Certain health occupations are regulated across the country while others are not. The table on the left summarizes which occupations were regulated and in which province or territory in 2006.

Notes

This list includes only the health care providers presented in this report.

A blank cell indicates that the profession is not regulated.

.. Indicates that the Information is not available.

n/a Indicates that the category is not applicable, that is, registered psychiatric nurses are educated and regulated separately in the four western jurisdictions: Alberta, British Columbia, Manitoba and Saskatchewan.

Source

Health Personnel Database, Canadian Institute for Health Information.

Common Practice Settings for Selected Health Occupations in Canada, 2006

Occupations	COMMUNITY					PRIVATE			
	Hospitals	Community Health Centres	Public Health Facilities	Home Care	Schools and Universities	Nursing Homes/ Long-Term Care	Private Practice	Private Company ¹	Government
Audiologists	Y	Y	Y		Y	Y	Y	Y	
Chiropractors							Y		
Dental Hygienists		Y	Y	Y	Y		Y	Y	Y
Dentists	Y		Y		Y		Y		
Dietitians	Y	Y	Y		Y	Y	Y		Y
Environmental Public Health Professionals					Y			Y	Y
Health Information Management Professionals		Y		Y	Y	Y	Y	Y	Y
Licensed Practical Nurses	Y	Y	Y	Y	Y	Y	Y		Y
Medical Laboratory Technologists	Y		Y				Y		Y
Medical Radiation Technologists									
Medical Physicists	Y				Y	Y		Y	Y
Midwives	Y	Y	Y	Y					
Nurse Practitioners	Y	Y	Y	Y		Y	Y		
Occupational Therapists	Y	Y			Y	Y	Y		Y
Optometrists		Y	Y				Y		
Pharmacists	Y	Y				Y		Y	Y
Physicians	Y	Y	Y		Y	Y	Y		Y
Physiotherapists	Y	Y	Y	Y	Y	Y	Y	Y	Y
Psychologists	Y	Y			Y		Y	Y	Y
Registered Nurses	Y	Y	Y	Y	Y	Y		Y	Y
Registered Psychiatric Nurses	Y	Y	Y	Y	Y	Y	Y	Y	Y
Respiratory Therapists	Y	Y		Y	Y		Y	Y	
Social Workers	Y	Y	Y		Y			Y	Y
Speech-Language Pathologists	Y	Y		Y	Y	Y	Y		

The places of work vary significantly across professions; this table summarizes the most common practice settings among 24 health care occupations in Canada in 2006.

Notes

This list includes only the health care providers presented in this report. A blank cell indicates that the occupations typically does not work in this field.

¹ "Private company" may include, but is not limited to, retail companies, research companies and forensic companies.

Source

Health Personnel Database, Canadian Institute for Health Information.

The Canadian Institute for Health Information would like to acknowledge and thank the many individuals and organizations that have contributed to the development of this report.

The Health Human Resources Department at CIHI appreciates the contributions and support of our data providers and the following organizations that make this publication possible. A complete list of these data providers can be found at the end of each chapter. Without their effort and collaboration, a national health occupational database for Canada could not exist.

We would like to thank the provincial and territorial regulatory bodies, provincial and territorial associations, national professional associations and participating universities and colleges.

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Acknowledgements



Audiologists identify, diagnose (restricted in some provinces), treat and manage individuals with peripheral and central hearing loss, tinnitus and balance problems. They are also engaged in prevention of, counselling for and research into hearing disorders. Audiologists may work alone or as part of an interprofessional team to help individuals of all ages maximize their hearing potential and improve their balance function.

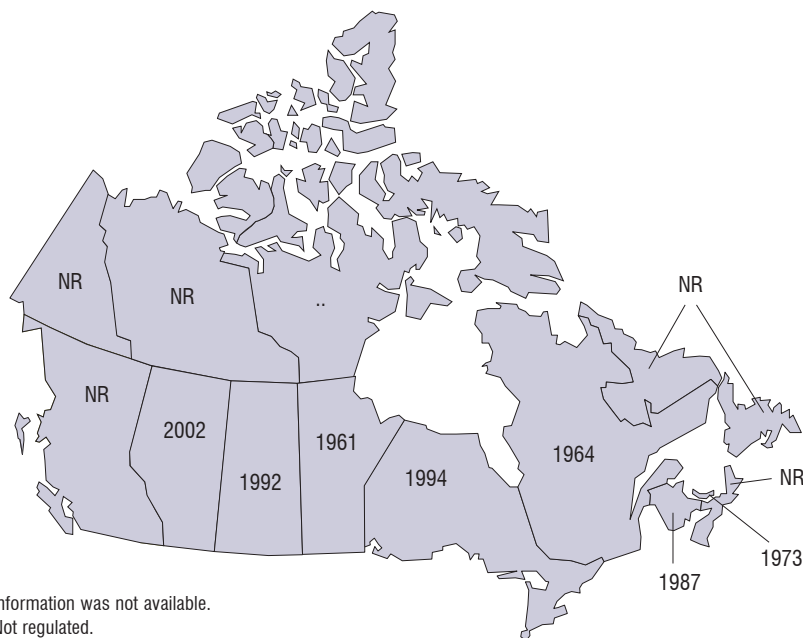
Audiologists

Practice Setting

Audiologists work in a variety of health and education settings including, but not limited to, hospitals, public health units, community health centres, schools, private practice, industrial settings, hearing-aid manufacturers, professional associations and nursing homes.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for audiologists to register with a provincial/territorial regulatory authority as a condition of practice.



Supply Trends

Number of Registered Audiologists¹ by Province/Territory, Canada, 2001 to 2006

TABLE

1

	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador [†]	19	17	19 ⁸	17	16	15
Prince Edward Island [†]	3	3	3 ⁹	4	4 ⁹	4
Nova Scotia [†]	50	..	51 ⁸	54	53 ⁸	58
New Brunswick	41	39	43	49	47 ⁵	46
Quebec ¹⁰	197	203	208	223	239	271
Ontario	406	426	462	464	497	511
Manitoba ⁴	43	43	43	51	58	59
Saskatchewan	..	..	33	35	30	34
Alberta ²	46 [†]	115	115	124	125	121
British Columbia [†]	148	154 ³	167 ³	170
Yukon ^{†, 11}	1	1	1	1	2	2
Northwest Territories [†]	1	1	2	2	3 ⁷	2
Nunavut [†]	1
CANADA[†]	807	848	1,128	1,178	1,241	1,294

Notes

Data in this table may have been revised due to HPDB system enhancements.

† Indicates the presence of voluntary membership data.

.. Information was not available.

1 This table includes voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation that outlines how the information within the publication can be most effectively interpreted, analyzed and used. Information prior to 2001 was not available.

2 Alberta: 2001 Alberta College of Speech-Language Pathologists and Audiologists (ACSLPA) estimate. Membership in the organization was voluntary prior to 2002. In 2002, one member was registered and held both designations and was counted as an SLP. Data for 2004 are as of October 31, 2004; 2005 data as of May 5, 2006; 2006 data as of March 28, 2007.

3 B.C.: 2003 data as of July 1, 2003; 2004 data as of June 29, 2004; 39 audiologists did not indicate their employment status and, therefore, they are not included in numbers. Data for 2005 are as of September 30, 2005.

4 Manitoba: 2001 and 2002 data as of September of the given years; 2003 data as of October 23, 2003, which represents active registered audiologists; 2004 data as of November 10, 2004.

5 New Brunswick: 2005 data as of February 16, 2006. Data for 2005 represent employed active registered audiologists.

6 Newfoundland and Labrador: 2003 data as of November 15, 2003; 2004 data as of May 17, 2005.

7 Northwest Territories: 2003 and 2004 data as of October 31 of the given years; 2005 data as of March 10, 2006.

8 Nova Scotia: 2003 data as of May 21, 2004; 2004 data as of May 17, 2005; 2005 data as of March 10, 2006.

9 Prince Edward Island: 2003 data as of May 7, 2004; 2004 data as of May 17, 2005; 2005 data as of March 10, 2006.

10 Quebec: Data include regular, temporary, associate, student and external audiologists. Data for 2001 as of October 22, 2001; 2002 data as of February 2, 2002; 2003 data as of March 31, 2003; 2005 data as of March 31, 2005.

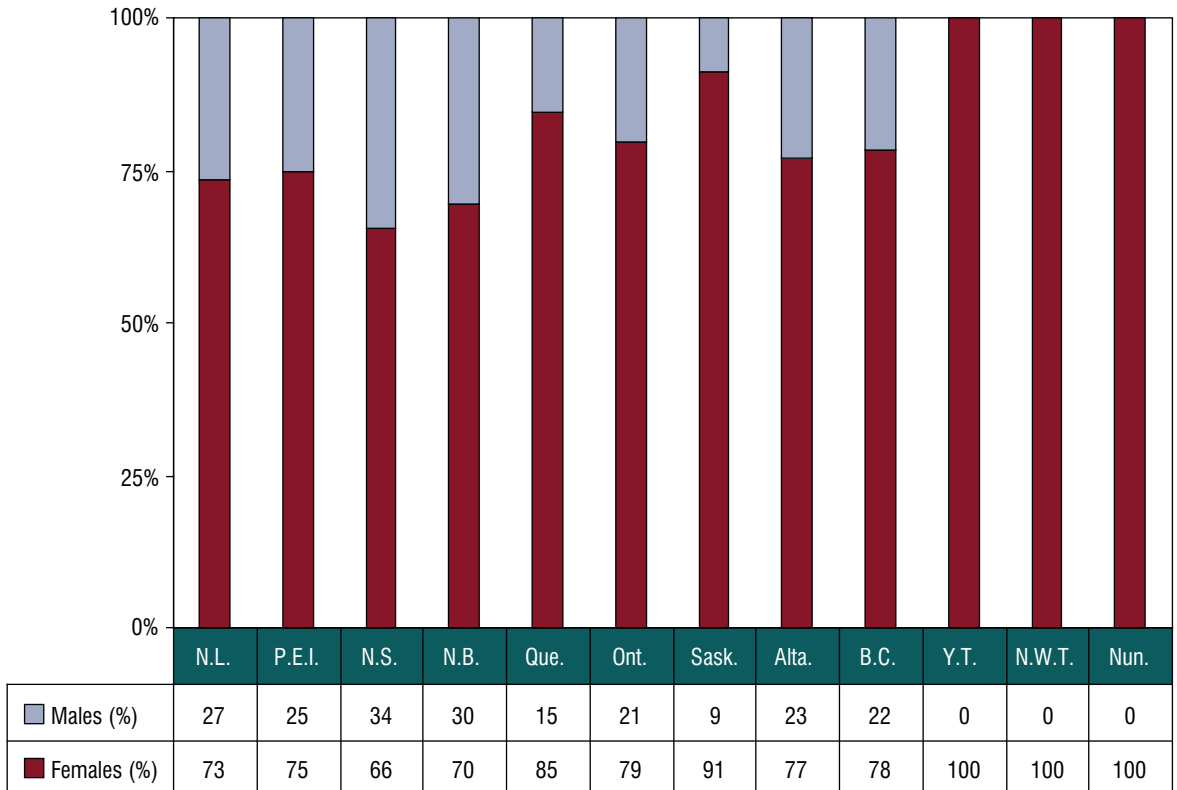
11 Yukon: 2003 data from the Yukon Speech Language Pathology and Audiology Association; 2004 data as of May 14, 2004.

Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1 Percentage Distribution of Audiologists by Sex and Selected Provinces/Territories, 2006



Note

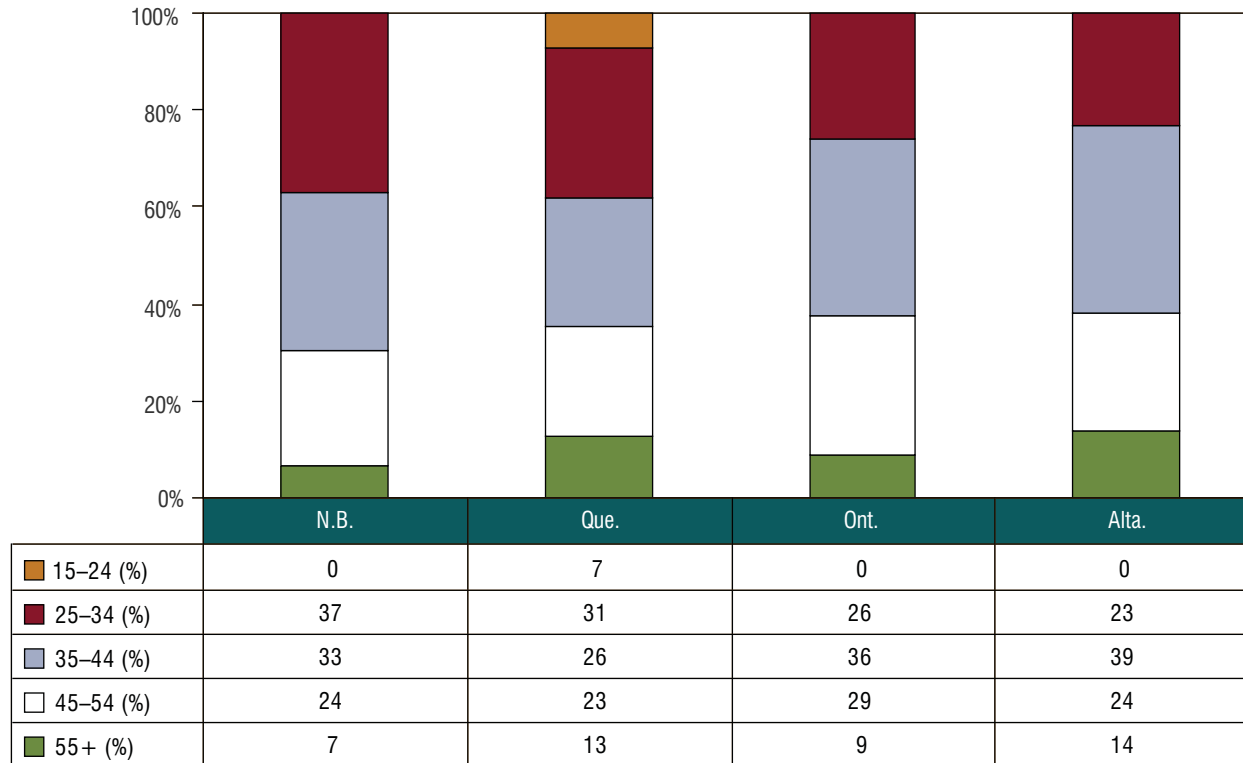
Manitoba information was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

FIGURE 2

Percentage Distribution of Audiologists by 10-Year Age Groups and Selected Provinces, 2006



Notes

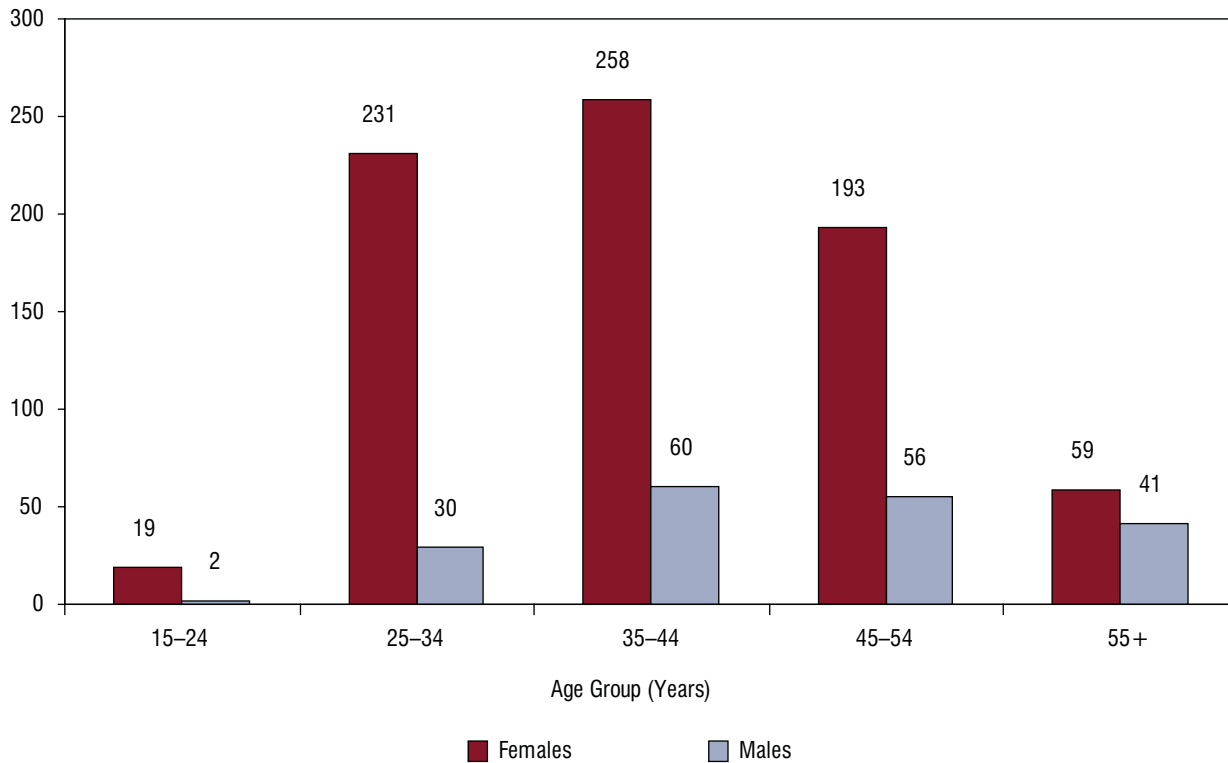
Totals may not sum to 100% due to rounding. Information on the rest of the provinces/territories was not available. Quebec data included regular, temporary, associate, student and external audiologists.

Source

Health Personnel Database, Canadian Institute for Health Information.

FIGURE 3

Number of Audiologists by Sex and 10-Year Age Groups, Selected Provinces, 2006



Notes

Includes only New Brunswick, Quebec, Ontario and Alberta. Information on the rest of the provinces/territories was not available. Quebec data included regular, temporary, associate, student and external audiologists.

Source

Health Personnel Database, Canadian Institute for Health Information.

Graduate Trends

Number of Graduates of Audiology Programs¹ by School of Graduation, Canada, 2003 to 2006

TABLE 2

School	2003	2004	2005	2006
Nova Scotia Dalhousie University ²	28	32	30	27
Quebec Université de Montréal ⁴	16	15	19	18
Ontario University of Ottawa University of Western Ontario	4 11	7 15	6 11	7 16
British Columbia University of British Columbia ³	22	30	7	5
CANADA	81	99	73	73

Notes

Data in this table may have been revised due to HPDB system enhancements.

- ¹ This is a comprehensive list of schools offering master's-degree audiology programs in Canada. Information prior to 2003 was unavailable.
- ² Dalhousie University: Includes graduates from combined audiology and speech-language pathology programs.
- ³ University of British Columbia: 2003 and 2004 data include graduates from combined audiology and speech sciences programs.
- ⁴ Université de Montréal: Of the 15 graduate students in 2004, 12 were from the audiology program and 3 were from the combined audiology and speech-language pathology programs.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

Newfoundland and Labrador Association of Speech-Language Pathologists and Audiologists, Prince Edward Island Speech and Hearing Association, Speech and Hearing Association of Nova Scotia, New Brunswick Association of Speech-Language Pathologists and Audiologists, Ordre des orthophonistes et audiologistes du Québec, College of Audiologists and Speech-Language Pathologists of Ontario, Manitoba Speech and Hearing Association, Saskatchewan Association of Speech-Language Pathologists and Audiologists, Alberta College of Speech-Language Pathologists and Audiologists, British Columbia Association of Speech/Language Pathologists and Audiologists, Association of Northwest Territorial Speech-Language Pathologists and Audiologists and Yukon Speech-Language Pathology and Audiology Association.

Table 2

Individual schools and universities: Dalhousie University, Université de Montréal, University of Ottawa, University of Western Ontario and University of British Columbia.

Figure 1

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Figure 2

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Figure 3

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

C

Chiropractors

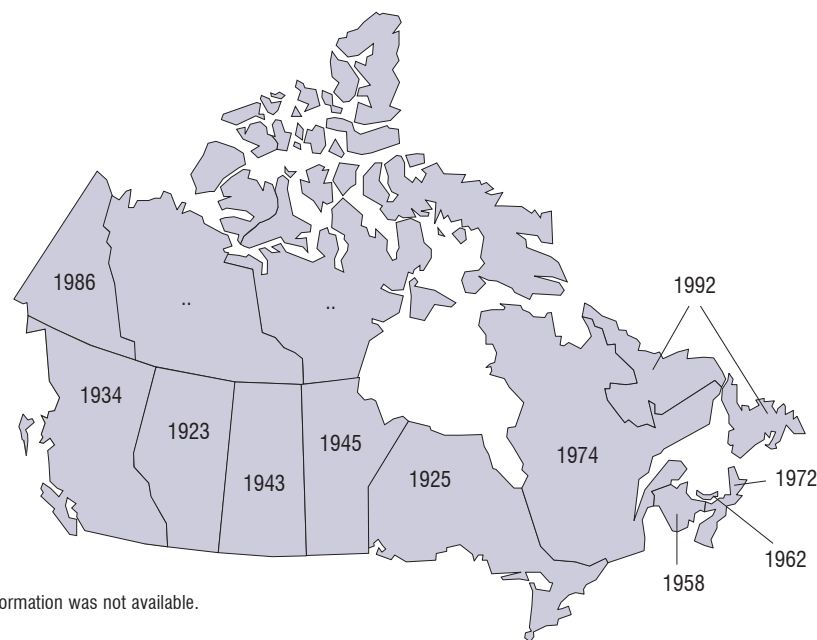
Chiropractors diagnose health disorders involving the body's structure (particularly the spine) and the functioning of the muscle and nervous systems.

Practice Setting

Most chiropractors work in private practice.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for chiropractors to register with a provincial/territorial regulatory authority as a condition of practice.



Supply Trends

Number of Registered Chiropractors¹
by Province/Territory, Canada, 1997 to 2006

TABLE 1

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador ^{5,11}	22	26	33	39	43	46	48	49	49	48
Prince Edward Island ⁷	6	6	7	7	7	8	8	8 ¹⁰	8 ¹⁰	8
Nova Scotia	35 ⁶	45	51	62	73 ⁶	82	92	93	98	103
New Brunswick	40	43	46	48	57	58	60	66	63 ⁴	56
Quebec ⁸	870	918	956	979	1,017	1,053	1,071	1,088	1,112	1,174 ¹⁰
Ontario	2,293	2,424	2,550	2,708	2,884	3,108	3,302	3,456	3,528	3,626
Manitoba ³	184	176	192	202	251	247	236 ¹¹	241 ¹¹	267	245
Saskatchewan ⁹	137	145	155	162	183	183	182	182	184	184
Alberta ¹⁰	524	573	620	682	728	773	794	826	845	874
British Columbia ²	647	685	721	734	826	853	812 ¹⁰	874	946	994
Yukon	4	9	11	9	8	8	9	9	8	6
CANADA[†]	4,762[†]	5,050	5,342	5,632	6,077[†]	6,419	6,614	6,892	7,108	7,318

Notes

Data in this table may have been revised due to HPDB system enhancements.

† Indicates the presence of voluntary membership data.

1 This table includes voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation that outlines how the information within the publication can be most effectively interpreted, analyzed and used.

2 B.C.: 2003 and 2004 data include regular members, new graduates, senior members and special members. Data for 2003 are as of June 29, 2004; 2004 data as of April 4, 2005; 2005 data as of February 17, 2006; 2006 data as of June 13, 2007.

3 Manitoba: 2003 data as of July 21, 2004; 2004 data as of April 4, 2005; 2006 data as of February 20, 2007.

4 New Brunswick: 2005 data as of June 6, 2006.

5 Newfoundland and Labrador: 2003 data as of June 25, 2004; 2004 data as of February 1, 2005; 2005 data as of April 6, 2006.

6 Nova Scotia: Data were provided by the Canadian Chiropractic Association (CCA). Membership in the CCA is voluntary.

7 P.E.I.: 2005 data as of February 15, 2006; 2006 data as of April 19, 2007.

8 Quebec: 2004 data as of January 31, 2005; 2006 data as of September 13, 2007.

9 Saskatchewan: 2005 and 2006 data as of March 31, 2006.

10 Represents active registered chiropractors.

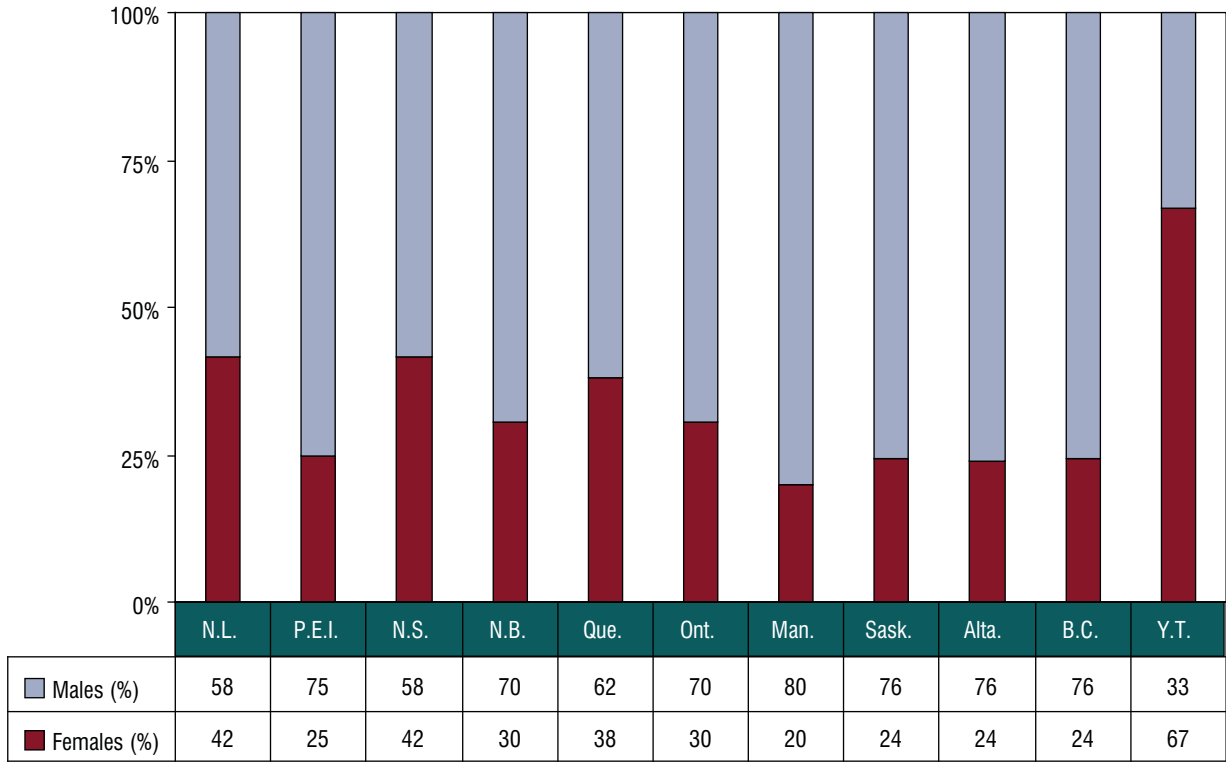
11 Represents employed active registered chiropractors.

Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1 Percentage Distribution of Chiropractors by Sex and Selected Provinces/Territories, 2006



Note
Northwest Territories and Nunavut information was not available.

Source
Health Personnel Database, Canadian Institute for Health Information.

Graduate Trends

Number of Graduates of Chiropractic Schools by School of Graduation and Sex, Canada, 1997 to 2006

TABLE 2

School	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Quebec										
UQTR, Trois-Rivières ²	n/a	45	44	45	42	45	41	40	43	33
Males	n/a	18	21	19	8	12	15	14	13	11
Females	n/a	27	23	26	34	33	26	26	30	22
Ontario										
CMCC, Toronto ¹	152	149	154	152	151	151	152	155	150	155
Males	88	93	101	88	81	82	83	75	75	69
Females	64	56	53	64	70	69	69	80	75	86
CANADA	152	194	198	197	193	196	193	195	193	188
Males	88	111	122	107	89	94	98	89	88	80
Females	64	83	76	90	104	102	95	106	105	108

Notes

n/a Not applicable.

This is a comprehensive list of schools offering chiropractic programs.

- 1 Canadian Memorial Chiropractic College: The CMCC graduates one class per year; the counts represent students who graduated in May of the year indicated.
- 2 Université du Québec à Trois Rivières: The first graduation class occurred in 1998.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

1997: Canadian Chiropractic Association, Newfoundland and Labrador Chiropractic Board, Prince Edward Island Chiropractic Association, New Brunswick Chiropractors' Association, Ordre des chiropraticiens du Québec, College of Chiropractors of Ontario, Manitoba Chiropractors' Association, Chiropractors' Association of Saskatchewan and British Columbia College of Chiropractors.

1998 to 2006: Newfoundland and Labrador Chiropractic Board, Prince Edward Island Chiropractic Association, Nova Scotia College of Chiropractors, New Brunswick Chiropractors' Association, Ordre des chiropraticiens du Québec, College of Chiropractors of Ontario, Manitoba Chiropractors' Association, Chiropractors' Association of Saskatchewan, College of Chiropractors of Alberta, British Columbia College of Chiropractors and the Yukon Government (Department of Community Services).

Table 2

Canadian Memorial Chiropractic College and Université du Québec à Trois Rivières.

Figure 1

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Dental Hygienists

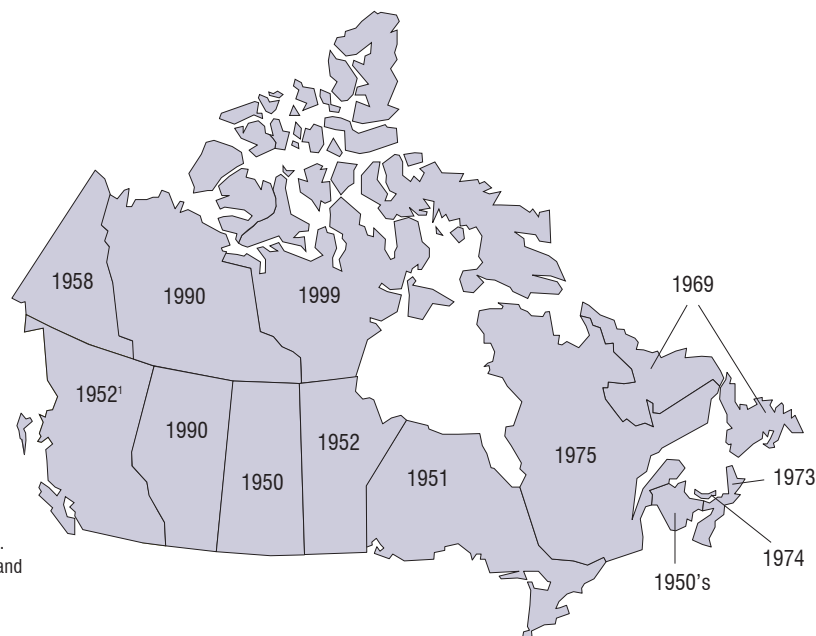
Dental hygienists are involved in oral health promotion, education, clinical therapy, research, administration and client advocacy.

Practice Setting

Dental hygienists are typically found working as part of an oral health care team; however, other employment arrangements are increasingly common, including self-employment. Dental hygiene practice environments include clinical practice, institutions, public health and community health, home care and other outreach programs, primary health care centres, educational institutions, the military, research, industry, consulting firms, regulatory bodies and professional associations, government and forensic laboratories.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for dental hygienists to register with a provincial/territorial regulatory authority as a condition of practice.



Notes

In the territories, the respective territorial governments register and license dental hygienists.

- 1 Dental hygiene has been a regulated profession in B.C. since 1952. The College of Dental Hygienists of British Columbia was formed, and has been self-regulated since March 1, 1995.



Supply Trends

Number of Registered Dental Hygienists¹
by Province/Territory, Canada, 1997 to 2006

TABLE 1

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador	68 ¹³	69	69	69	78	82	80	85	92	92
Prince Edward Island	28	33	38	43	46	44	68	50	58	59 ⁹
Nova Scotia	404	407	420	412	408 ¹³	459	472	492	511	521
New Brunswick	210 ¹³	223	240	247	245	246	269	276	288	291
Quebec ⁸	3,292	3,458	3,565	3,620	3,667	3,691	3,788	3,975	4,145	4,367 ¹³
Ontario	5,637	6,227	6,322	6,540	6,756 ¹¹	7,101 ¹¹	7,500	7,816	8,262 ¹²	8,870
Manitoba ⁵	517	534	550	562	565	591	584	599	603	570
Saskatchewan ⁹	259 ¹³	282	267	273	300	307	334	336	347	355
Alberta ³	1,168 ²	1,213	1,251	1,305	1,541	1,602	1,745	1,770	1,843	1,965
British Columbia ⁴	1,683	1,740	1,777	1,788	1,910	1,974	2,054	2,127	2,224	2,264
Yukon ¹⁰	12	12	12	15	16	14	13	16	16	20
Northwest Territories ⁷	15	15	14	21	21	17	13	11	14	15
CANADA	13,293[†]	14,213	14,525	14,895	15,553[†]	16,128	16,920	17,553	18,403	19,389[†]

Notes

† Indicates the presence of voluntary membership data. Nunavut information was not available.

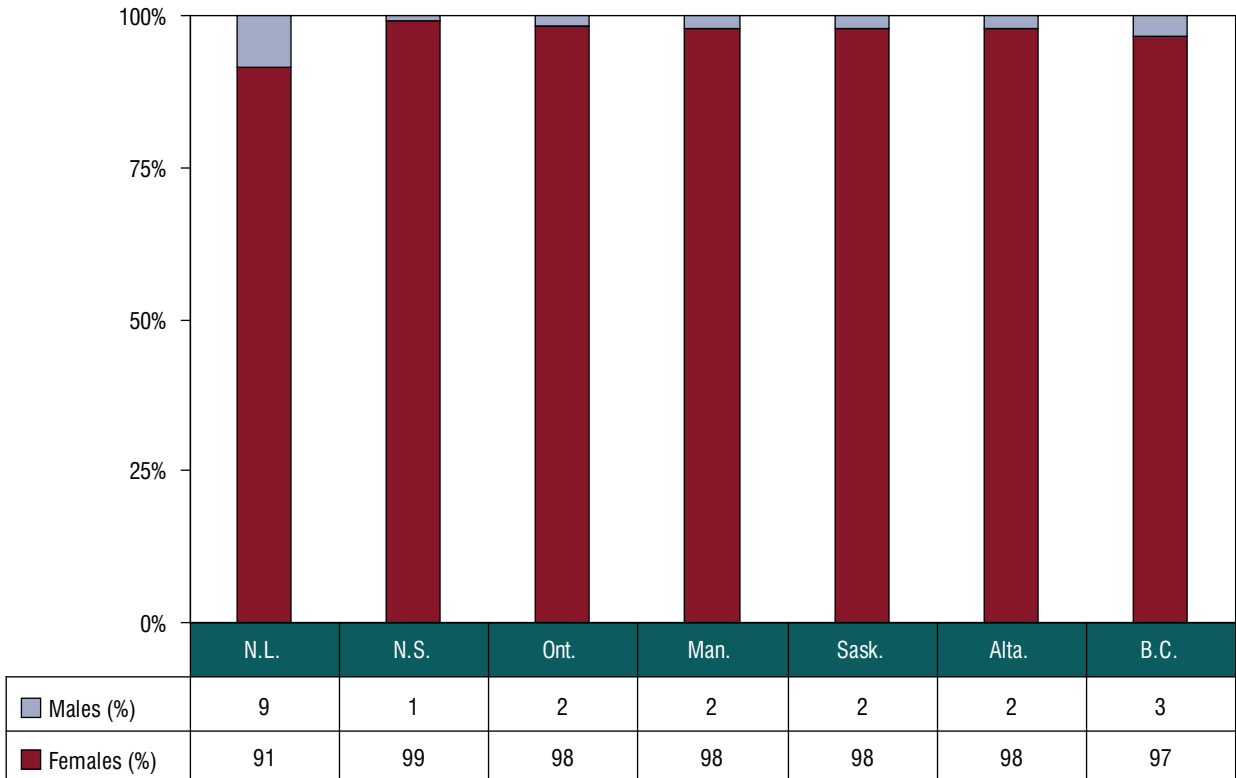
- This table includes voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation that outlines how the information within the publication can be most effectively interpreted, analyzed and used.
- The figure included only those members who were actively practising dental hygiene; it did not include registrants who were out of practice due to maternity or disability leaves during the year.
- Alberta: 1997 to 2005 data as of October 31 of the same year.
- B.C.: 1997 to 2002 data as of August 31 of the same year.
- Manitoba: 2001 and 2002 data as of January 15 of the following year; 2005 data as of July 19, 2006; 2006 data as of February 16, 2007.
- P.E.I.: 2006 data as of February 15, 2007.
- Northwest Territories: 1997 to 2001 data as of March 31 of the same year; 2002 data as of November 12, 2002; 2003 data as of April 2004; 2004 data as of April 2005; 2005 data as of December 1, 2005.
- Quebec: 1997 to 2005 data as of March 31 of the following year.
- Saskatchewan: 2005 data as of July 16, 2006.
- Yukon: 1997 to 2000 data as of March 31 of the following year; 2001 data as of February 14, 2001; 2002 data as of November 14, 2002; 2003 data as of April 14, 2004.
- Data included general, specialty and inactive members. Inactive members are not able to practise; however, they are able to participate in elections.
- The numbers did not include those suspended for non-payment of fees, since they are not considered registered for that particular certificate year.
- CIHI estimate. Please review Methodological Notes for more detailed information regarding estimation.

Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1 Percentage Distribution of Dental Hygienists by Sex and Selected Provinces, 2006



Note
Quebec, P.E.I., New Brunswick, the Yukon, the Northwest Territories and Nunavut were not included as gender information was not available.

Source
Health Personnel Database, Canadian Institute for Health Information.

Graduate Trends

Number of Graduates of Accredited Dental Hygiene Schools¹ by School of Graduation, Canada, 1997 to 2006

TABLE 2

School	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nova Scotia										
Dalhousie University ⁹	40	40	36	38	36	36	41	39	39	41
Quebec										
Cégep de Chicoutimi	29	31	32	30	24	19	21	18	..	..
Cégep de Sainte-Hyacinthe	33	36	29	32	24	24	..	..	14 ¹⁵	22 ¹⁵
Cégep Collège Trois-Rivières ⁷	26	31	35	29	74	22	26	16	16	19
Cégep François-Xavier-Garneau	..	..	..	..	..	..	19	29	24	34
Collège de l'Outaouais	20	20	22	19	14	9	13	5	11	13
Collège Maisonneuve	52	51	53	45	53	45	36	21	36	66
Collège Édouard-Monpetit ⁸	47	48	42	38	39	34	28	19	35	38
John Abbott College	26	30	27	34	24	27	15	26	30	34
Ontario										
Algonquin College of Applied Arts and Technology	43	.. ¹⁶	37	49	50	48	50	50	56	52
Cambrian College of Applied Arts and Technology	23	24	.. ¹⁶	29	25	24	..	..	39	40
Canadian Institute of Dental Hygiene	..	..	..	..	..	71	70	70	74	74
Canadore College of Applied Arts and Technology	15	13	14	14	16	18	18	.. ²	..	..
La Cité collégiale	12	17	.. ²	15	18	11	20	12	24	26
Collège Boréal d'arts appliqués et de technologie ⁵	21	11	1	15	14	20	17	22	26	21
Confederation College of Applied Arts and Technology ⁶	16	18	15	16	18	18	..	22	22	22
Durham College of Applied Arts and Technology ¹⁰	22	17	23	23	22	25	17	23	23	22
Fanshawe College of Applied Arts and Technology	25	22	31	22	33	22	24	24	.. ²	30
George Brown College of Applied Arts and Technology	..	67	65	65	65	66	..	..	65	54
Georgian College of Applied Arts and Technology	17	13	13	14	16	20	27	22	23	33
Niagara College Canada ¹¹	.. ²	76 ³	1	36	38	41	45	39	44	42
St. Clair College of Applied Arts and Technology	..	32	30	26	30	.. ²	27	29	29	30

(continued)

Notes

Data in this table may have been revised due to HPDB system enhancements.

.. Information was not available.

1 This is a comprehensive list of schools offering dental hygiene programs, with the exception of the Canadian Academy of Dental Hygiene, which was accredited in November 2004. The Commission on Dental Accreditation of Canada approves requirements for all dental hygiene programs including those at colleges, universities and private institutions. For more information on these requirements, please visit www.cdha.ca.

2 No graduating class due to a change from the one-year to two-year program length.

3 Represents double student intake in the previous year.

4 Camosun College: 2005 data as of October 28 of the given year; 2006 data as of October 27 of the given year.

5 Collège Boréal d'arts appliqués et de technologie: 2005 and 2006 data as of April 24, 2007.

6 Confederation College of Applied Arts and Technology: 2005–2006 data as of April 17, 2007.

7 Cégep de Trois-Rivières: 2005 and 2006 data as of March 7, 2007.

8 Cégep Édouard-Monpetit, Longueuil: 2005 and 2006 data as of June 5, 2007.

9 Dalhousie University: 2005 and 2006 data as of December 1 of the given years.

10 Durham College of Applied Arts and Technology: 2005 data as of June 17 of the given year; 2006 data as of June 16 of the given year.

11 Niagara College Canada: 2005 and 2006 data as of June 1 of the given years.

12 Saskatchewan Institute of Applied Science and Technology (SIAST): 2005 data as of October 20 of the given year; 2006 data as of October 23 of the given year.

13 University of Alberta: 2005 data as of June 2005; 2006 data as of November 2006.

14 Vancouver Community College: 2005 data as of June 24 of the given year; 2006 data as of June 23 of the given year.

15 Cégep de Sainte-Hyacinthe: 2005 and 2006 data as of September 4 of the given years.

16 There was no graduating class, since the program requirement changed to a two-year direct entry program after the completion of the dental assistant program.

Source

Health Personnel Database, Canadian Institute for Health Information.

TABLE 2

Number of Graduates of Accredited Dental Hygiene Schools¹ by School of Graduation, Canada, 1997 to 2006 (cont'd)

School	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Manitoba										
University of Manitoba	26	24	25	26	25	28	26	26	24	24
Saskatchewan										
Saskatchewan Institute of Applied Science and Technology ¹²	..	..	..	..	24	24	26	26	24	27
Alberta										
University of Alberta ¹³	48	39	38	40	38	41	38	42	40	40
British Columbia										
Camosun College ⁴	24	23	21	22	19	18	19	21	18	18
College of New Caledonia	23	19	20	20	18	19	18	18	17	17
University of British Columbia	1	..	..	..	..	..	5	9	4	9
Vancouver Community College ¹⁴	19	16	19	21	20	18	20	18	20	22
CANADA	608	718	629	718	777	748	666	646	777	880

Notes

Data in this table may have been revised due to HPDB system enhancements.

.. Information was not available.

¹ This is a comprehensive list of schools offering dental hygiene programs, with the exception of the Canadian Academy of Dental Hygiene, which was accredited in November 2004. The Commission on Dental Accreditation of Canada approves requirements for all dental hygiene programs including those at colleges, universities and private institutions. For more information on these requirements, please visit www.cdha.ca.

² No graduating class due to a change from the one-year to two-year program length.

³ Represents double student intake in the previous year.

⁴ Camosun College: 2005 data as of October 28 of the given year; 2006 data as of October 27 of the given year.

⁵ Collège Boréal d'arts appliqués et de technologie: 2005 and 2006 data as of April 24, 2007.

⁶ Confederation College of Applied Arts and Technology: 2005–2006 data as of April 17, 2007.

⁷ Cégep de Trois-Rivières: 2005 and 2006 data as of March 7, 2007.

⁸ Cégep Édouard-Monpetit, Longueuil: 2005 and 2006 data as of June 5, 2007.

⁹ Dalhousie University: 2005 and 2006 data as of December 1 of the given years.

¹⁰ Durham College of Applied Arts and Technology: 2005 data as of June 17 of the given year; 2006 data as of June 16 of the given year.

¹¹ Niagara College Canada: 2005 and 2006 data as of June 1 of the given years.

¹² Saskatchewan Institute of Applied Science and Technology (SIAST): 2005 data as of October 20 of the given year; 2006 data as of October 23 of the given year.

¹³ University of Alberta: 2005 data as of June 2005; 2006 data as of November 2006.

¹⁴ Vancouver Community College: 2005 data as of June 24 of the given year; 2006 data as of June 23 of the given year.

¹⁵ Cégep de Sainte-Hyacinthe: 2005 and 2006 data as of September 4 of the given years.

¹⁶ There was no graduating class, since the program requirement changed to a two-year direct entry program after the completion of the dental assistant program.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

Newfoundland and Labrador Dental Board, Dental Council of Prince Edward Island, Provincial Dental Board of Nova Scotia, New Brunswick Dental Society, Ordre des hygiénistes dentaires du Québec, College of Dental Hygienists of Ontario, Manitoba Dental Association, Saskatchewan Dental Hygienists' Association, College of Registered Dental Hygienists of Alberta, College of Dental Hygienists of British Columbia and the governments of the Yukon, Northwest Territories and Nunavut.

Table 2

Individual colleges and universities: Dalhousie University, Cégep de Chicoutimi, Cégep de Sainte-Hyacinthe, Cégep Collège Trois-Rivières, Cégep François-Xavier-Garneau, Collège de l'Outaouais, Collège Maisonneuve, Collège Édouard-Monpetit, John Abbott College, Algonquin College of Applied Arts and Technology, Cambrian College of Applied Arts and Technology, Canadian Institute of Dental Hygiene, Canadore College of Applied Arts and Technology, La Cité collégiale, Collège Boréal d'arts appliqués et de technologie, Confederation College of Applied Arts and Technology, Durham College of Applied Arts and Technology, Fanshawe College of Applied Arts and Technology, George Brown College of Applied Arts and Technology, Georgian College of Applied Arts and Technology, Niagara College Canada, St. Clair College of Applied Arts and Technology, University of Manitoba, Saskatchewan Institute of Applied Arts and Technology, University of Alberta, Camosun College, College of New Caledonia, University of British Columbia and Vancouver Community College.

Figure 1

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Dentists diagnose, prevent and treat diseases, conditions and disorders of the teeth, mouth and surrounding tissues and structures to contribute to oral health and general well-being.

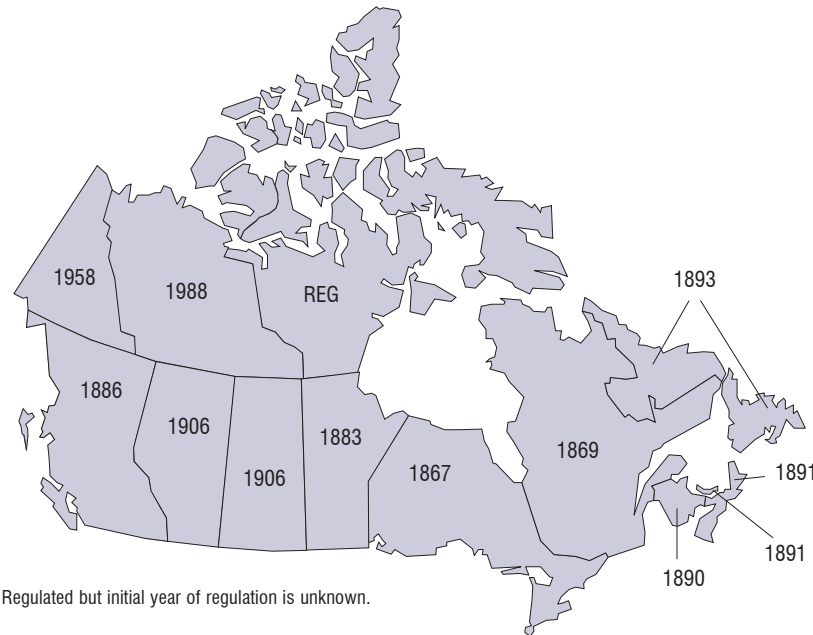
Dentists

Practice Setting

Most dentists work in private-practice clinics, hospitals, universities or public health facilities.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for dentists to register with a provincial/territorial regulatory authority as a condition of practice.



Supply Trends

Number of Active Registered Dentists¹ by Province/Territory, Canada, 1997 to 2006

	1997	1998 ²	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador	150	147	158	164	163	155	163	173	167	162
Prince Edward Island	51	53	57	60	61	62	61	65	62	63
Nova Scotia	430	438	441	449	461	468	498	499	499	511
New Brunswick	252	256	260	264	266	270	272	280	298	289
Quebec	3,815	3,886	3,922	3,981	3,994	4,022	4,055	3,920	4,035	4,120
Ontario	6,553	6,662	6,911	7,095	7,351	7,543	7,679	7,744	7,905	7,943
Manitoba	544	538	553	559	567	565	571	579	581	586
Saskatchewan	345	351	349	348	357	348	378	376	364	368
Alberta	1,549	1,560	1,588	1,640	1,696	1,732	1,760	1,788	1,819	1,890
British Columbia	2,479	2,524	2,586	2,659	2,663	2,721	2,755	2,807	2,857	2,873
Yukon³	13	15	16	18	17	37	24	16	38	20
Northwest Territories⁴	53	56	58	50	35	44	43	29	53	51
Nunavut⁵	..	..	..	..	..	..	..	11	10	49
CANADA	16,234	16,486	16,899	17,287	17,631	17,967	18,259	18,287	18,688	18,925

Notes

Data in this table may have been revised due to HPDB system enhancements.

.. Information was not available.

¹ The CIHI term "active registered dentists" represents licensed general-practice and certified specialist dentists as reported by the Canadian Dental Association.

² Data as of September 30, 1998.

³ Data provided by the Yukon; 1997 to 2000 data as of March 31 of the following years; 2001 data as of February 18, 2002; 2002 data as of November 14, 2002; 2003 data as of April 14, 2004; and 2004 data as of March 24, 2005.

⁴ Data provided by the Northwest Territories; 1997 to 2002 data as of March 31 of the following years; 2003 data as of April 8, 2004; 2004 data as of April 1, 2005.

⁵ On April 1, 2001, Nunavut began its own registration. Some dentists were registered with the Northwest Territories in 2001, but most registered with Nunavut in 2002.

Source

Health Personnel Database, Canadian Institute for Health Information.

TABLE 2

Number of Certified Dental Specialists by Province/Territory, Canada, 1997 to 2006¹

	1997	1998 ²	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador	11	11	12	13	11	12	14	16	17	13
Prince Edward Island	5	6	6	5	5	5	5	5	5	5
Nova Scotia	65	66	70	71	72	72	73	71	71	72
New Brunswick	24	28	28	24	25	25	26	26	28	28
Quebec	377	377	379	372	371	368	377	358	366	365
Ontario	859	873	882	886	884	887	903	909	932	935
Manitoba	74	73	74	76	87	86	86	83	82	88
Saskatchewan	41	43	36	34	38	35	37	36	38	37
Alberta	164	163	161	162	168	163	159	157	153	157
British Columbia	263	247	240	243	242	238	238	237	231	229
Yukon	1	1	..	1	4	4	6	4	4	..
Northwest Territories	..	..	2	..	..	..	1	2	1	..
Nunavut	..	..	..	..	..	..	..	..	1	..
CANADA	1,884	1,888	1,890	1,887	1,907	1,895	1,925	1,904	1,929	1,929

Notes

.. Information was not available.

1 This table represents a summary of dental specialists certified in endodontics, oral and maxillofacial surgery, orthodontics, pediatric dentistry, periodontics, prosthodontics, dental public health, oral pathology and oral radiology.

2 Data as of September 30 of the given year.

Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

Information is not available at this time.

Graduate Trends

Number of Graduates¹ of Dental Schools by School of Graduation, Canada, 1997 to 2006

TABLE 3

School	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nova Scotia										
Dalhousie University	38	35	31	42	51	43	37	37	43	44
Quebec										
McGill University	31	24	26	24	36	36	30	28	29	36
Université de Montréal	92	84	81	87	132	94	12	73	101	87
Université Laval	51	52	45	43	67	53	37	44	47	54
Ontario										
University of Toronto	77	65	78	79	117	95	78	69	95	98
University of Western Ontario	61	53	55	57	65	73	61	54	76	69
Manitoba										
University of Manitoba	25	22	23	26	30	29	23	28	33	34
Saskatchewan										
University of Saskatchewan	20	20	22	22	32	20	48	28	27	28
Alberta										
University of Alberta	35	37	31	33	48	38	34	31	46	35
British Columbia										
University of British Columbia	47	40	43	46	58	49	49	47	55	52
CANADA	477	432	435	459	636	530	409	439	552	537

Note

¹ This is a comprehensive list of schools offering dental programs in Canada.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

The Canadian Dental Association and the governments of the Yukon, Northwest Territories and Nunavut.

Table 2

The Canadian Dental Association.

Table 3

The Canadian Dental Association.

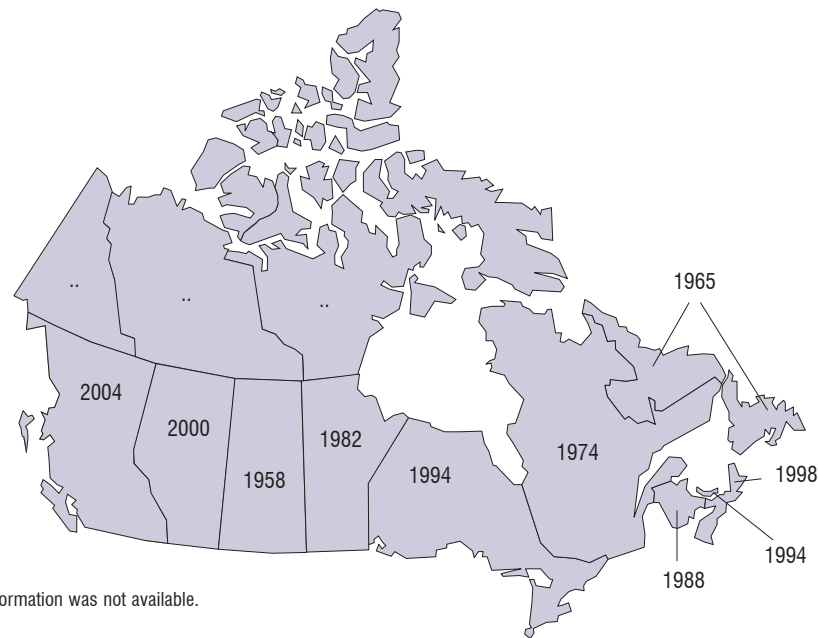
Dietitians plan, implement and manage nutrition and food service programsⁱ in a variety of settings.

Practice Setting

Dietitians are employed in a wide range of settings including educational institutions, hospitals, long-term care facilities, public and community health services, private practice, government and industry.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for dietitians to register with a provincial/territorial regulatory authority as a condition of practice.



Note
.. Information was not available.

i. Programs are directed at encouraging healthy nutrition outcomes and the prevention of nutritional disorders; providing treatment of nutrition-related diseases and conditions; and ensuring high-quality food-service operations.



Supply Trends

Number of Registered Dietitians¹
by Province/Territory, Canada, 1997 to 2006

TABLE 1

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador ⁵	102	115	118	123	123	125	138	142	144	148
Prince Edward Island ⁹	46	49	50	50	54	59	61	61	63	57
Nova Scotia ⁷	316 [†]	380	380	360	365	390	405	429	436	436
New Brunswick ⁵	217	249	259	262	276	278	306	309	318	324
Quebec ¹⁰	1,893	1,848	1,856	1,901	1,916	1,968	1,968	2,090	2,266	2,357
Ontario ⁸	2,145	2,142	2,153	2,202	2,256	2,316	2,488	2,560	2,629	2,691
Manitoba ⁴	275	282	268	265	289	300	320	322	337	375
Saskatchewan ¹¹	191	206	206	222	224	229	242 ¹³	251 ¹³	251	262
Alberta ²	520 [†]	656 [†]	635 [†]	619	625	713	725	718	754	816
British Columbia ³	812 [†]	812 [†]	846 [†]	845 [†]	847 [†]	900 [†]	825 [†]	879	916	956
Y.T., N.W.T. and Nun. ¹²	..	..	..	9	..	14	21	22	21	..
CANADA	6,517[†]	6,739[†]	6,771[†]	6,858[†]	6,975[†]	7,292[†]	7,499[†]	7,783	8,135	8,422

Notes

† Indicates the presence of voluntary membership data.

.. Information was not available.

1 This table includes voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation that outlines how the information within the publication can be most effectively interpreted, analyzed and used.

2 Alberta: 1997 to 2002 and 2004 data as of March 31 of the following year; 2003 data as of June 30, 2004; 2005 data as of March 31, 2006; 2006 data as of April 4, 2007.

3 B.C. uses the title "registered dietitian/nutritionist" while other provinces use the title "registered dietitian"; the College of Dietitians of British Columbia opened on April 1, 2004, and registered dietitians as of that date; 1997 to 2002 data as of April 1 of

the given year; 2000 data include seven dietitians from the Yukon registered in B.C.; 2003 data as of June 8, 2004; 2004 data as of January 25, 2005; 2005 data as of February 21, 2006; 2006 data as of February 26, 2007.

4 Manitoba: 1997 to 2002 data as of April 1 of the given years; 2003 data as of May 1, 2004; 2004 data as of April 13, 2005; As of January 2005, the Manitoba Association of Registered Dietitians became the College of Dietitians of Manitoba; 2005 data as of February 22, 2006.

5 New Brunswick: 1998 data as of September 30, 1998; 1999 data as of June 9, 1999; 2000 data as of September 9, 2000; 2001 data as of July 15, 2002; 2002 data as of November 15, 2002; 2003 data as of April 25, 2004; 2004 data as of February 6, 2005; 2005 data as of February 21, 2006.

6 Newfoundland and Labrador: 1997 to 2002 data as of March 31 of the given years. National exam was not implemented in Newfoundland and Labrador until 1999.

7 Nova Scotia: 1998 and 1999 data as of December 24, 1999; 2000 data as of May 6, 2001; 2001 and 2003 data as of March 31 of the following years; 2002 data as of February 2, 2003; 2004 data as of March 4, 2005; 2006 data as of May 13, 2007.

8 Ontario: 1998 data as of March 31, 1998; 2001 data as of March 31, 2001; 2002 data as of July 1, 2002; 2003 data as of March 31, 2004; 2004 data as of February 3, 2005; 2005 data as of March 8, 2006.

9 P.E.I.: 2004 data as of August 26, 2004; 2005 data as of February 14, 2006.

10 Quebec: Number includes all retired members, associate members, practising and non-practising members; 1997 to 2005 data as of March 31 of the given year.

11 Saskatchewan: 1998 to 2000 as of March 31 of the same year; 2003 data as of September 2, 2004; 2005 data as of March 14, 2006; 2006 data as of March 31, 2007.

12 Territorial data obtained from the Dietitians of Canada, as there are no regulatory bodies. They are active registered members of the Dietitians of Canada. Data for 2000, 2002, 2004 and 2005 as of March 31 of the following years; 2003 data as of June 30, 2004.

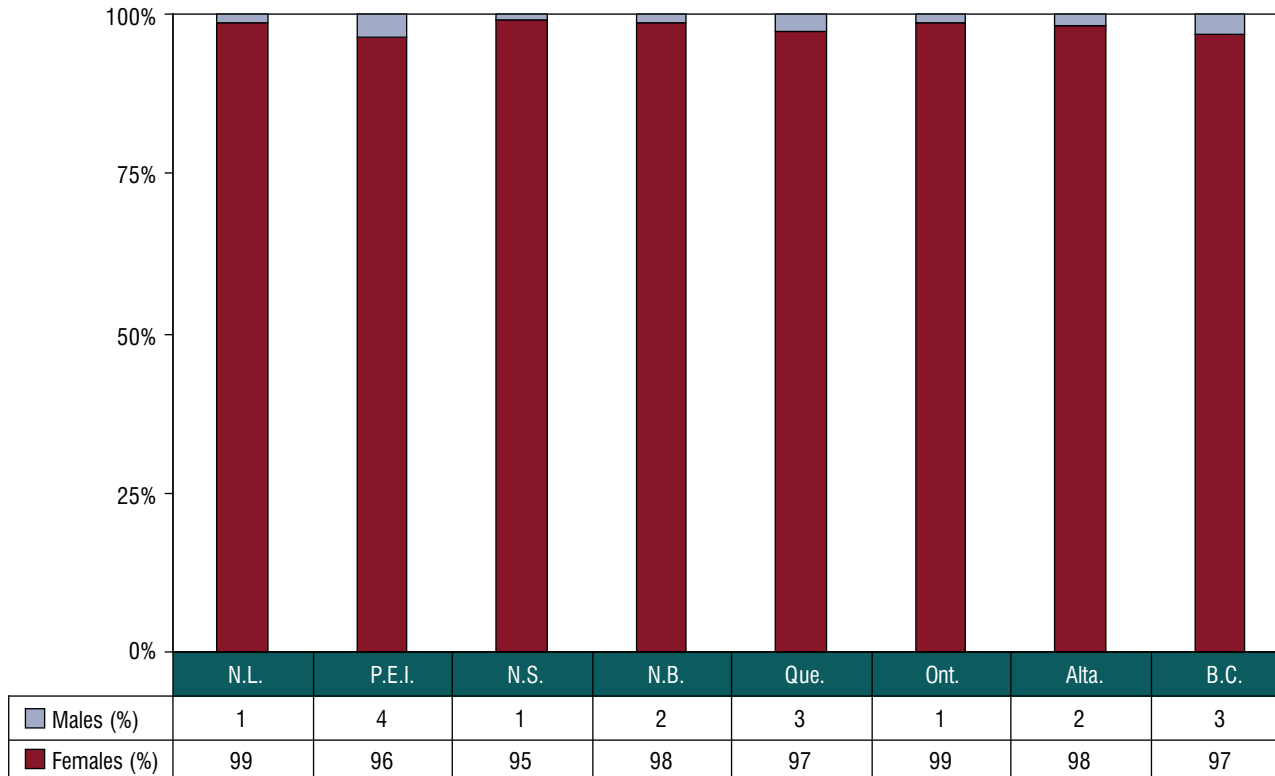
13 Represents active registered dietitians.

Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1 Percentage Distribution of Dietitians by Sex and Selected Provinces, 2006



Notes

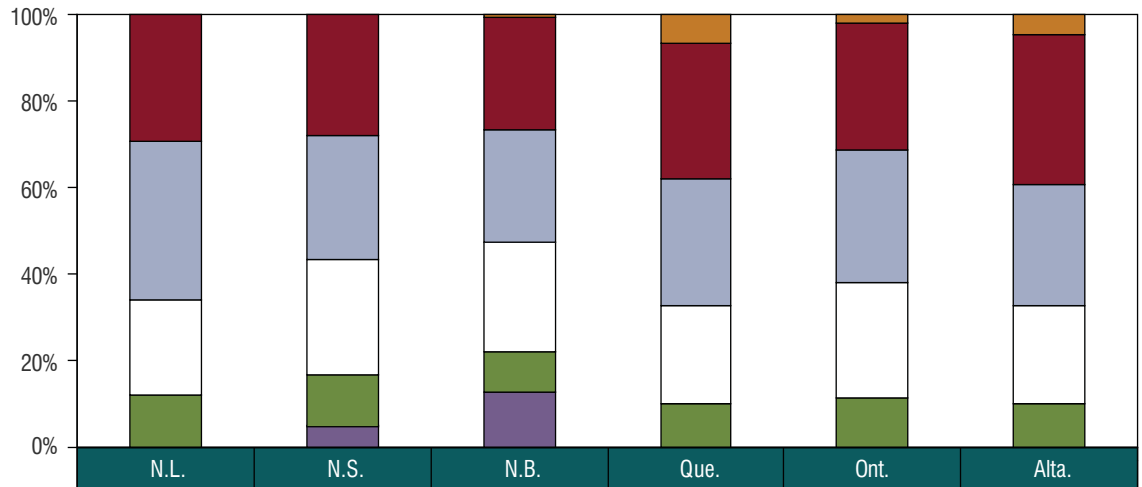
Manitoba and Saskatchewan gender information was not available.
 The territorial information was not available.
 Of Nova Scotia dietitians, 4% did not report gender information.

Source

Health Personnel Database, Canadian Institute for Health Information.

FIGURE 2

Percentage Distribution of Dietitians by 10-Year Age Groups and Selected Provinces, 2006



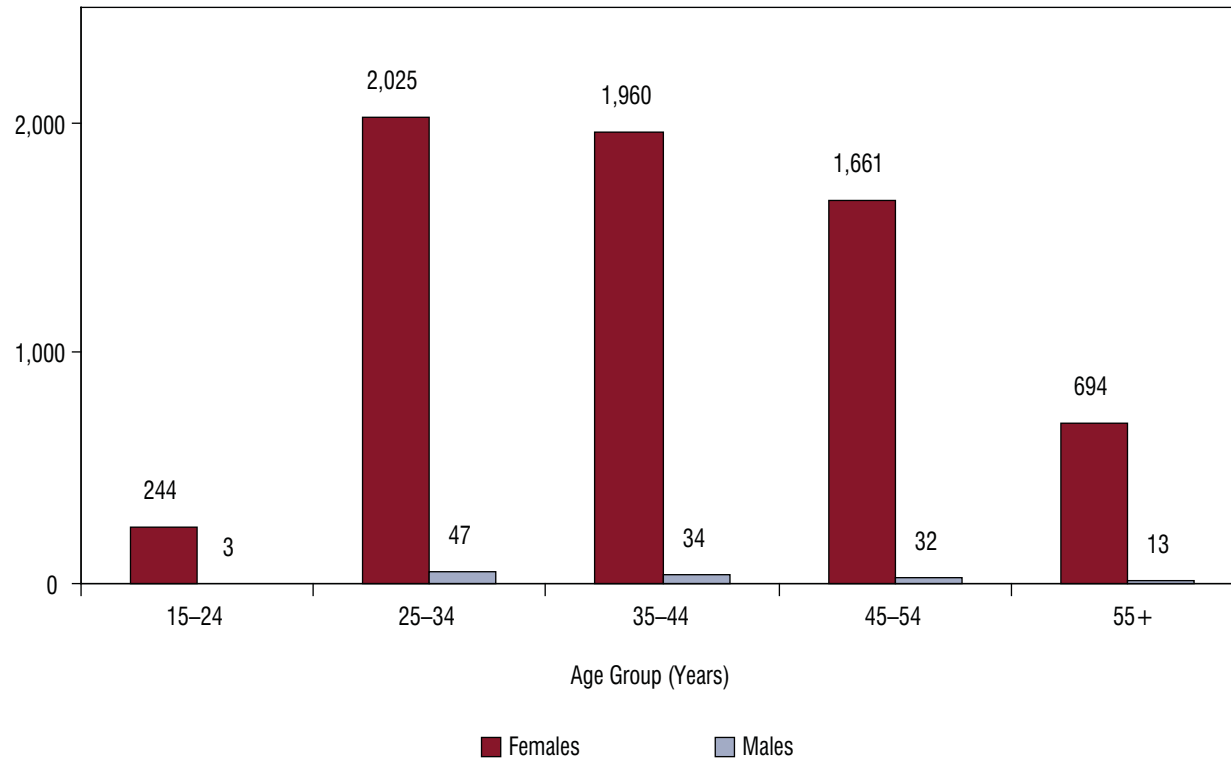
	N.L.	N.S.	N.B.	Que.	Ont.	Alta.
15-24 (%)	0	0	1	7	2	5
25-34 (%)	29	28	26	31	30	35
35-44 (%)	37	28	26	29	31	27
45-54 (%)	22	27	26	23	27	23
55+ (%)	12	12	10	10	11	10
Age Unknown (%)	0	4	12	0	0	0

Notes
 Totals may not sum to 100% due to rounding.
 Information on the rest of the provinces/territories was not available.

Source
 Health Personnel Database, Canadian Institute for Health Information.

FIGURE 3

Number of Dietitians by Sex and 10-Year Age Groups, Selected Provinces, 2006



Notes

Includes only Newfoundland and Labrador, Nova Scotia, New Brunswick, Quebec, Ontario and Alberta. Information on the rest of the provinces/territories was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

Graduate Trends

TABLE 2 Number of Graduates of Dietetics Programs¹ by Province/Territory, Canada, 1998 to 2006

	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador	..	4	5	4	4	4	4	4	4
Prince Edward Island	..	4	4	5	4	2	7	7	9
Nova Scotia	..	26	27	29	28	31	31	30	31
New Brunswick	..	14	14	15	16	13	13	12	11
Quebec	..	125	135	103	113	107	106	106	130
Ontario	..	58	59	65	75	86	89	87	95
Manitoba	..	15	16	14	17	16	17	16	21
Saskatchewan	..	17	18	18	23	27	21	20	26
Alberta	..	36	40	40	38	41	36	38	40
British Columbia	..	18	19	24	25	27	26	26	29
Yukon	2	2	2	1	2	2	2
CANADA	330²	317	339	319	345	355	352	348	398

Notes

- .. Information was not available.
- ¹ Data for 1998 to 2006 from the Dietitians of Canada included post-degree interns, university integrated programs and master's practicum programs. Graduates of master's-level programs that did not include a practicum component were not included.
- ² Provincial breakdown was unavailable.

Source

Health Personnel Database, Canadian Institute for Health Information.

TABLE 3

Number of Graduates of Undergraduate Dietetic Programs¹ by School of Graduation, Canada, 2005 to 2006

School	2005	2006
Newfoundland and Labrador		
Memorial University of Newfoundland	10	6
Prince Edward Island		
University of Prince Edward Island	7	8
Nova Scotia		
Acadia University	17	7
Mount St. Vincent University	23	22
St. Francis Xavier University	25	27
New Brunswick		
Université de Moncton	12	13
Quebec		
McGill University	49	59
Université Laval	45	49
Université de Montréal	64	76
Ontario		
Brescia University College	25	39
Ryerson University	89	88
University of Guelph	43	72
Manitoba		
University of Manitoba	45	57
Saskatchewan		
University of Saskatchewan ²	20	24 ²
Alberta		
University of Alberta	48	71
British Columbia		
University of British Columbia ³	30	3 ³
CANADA	552	621

Notes

- .. Information was not available.
- 1 Please note that this is the first year of reporting on graduates of dietetic programs from schools. Information prior to 2005 was not available. This is a comprehensive list of schools offering programs in dietetic education that are accredited by the Dietitians of Canada. Students may receive a BSc in nutrition or dietetics. The difference between the number of graduates of undergraduate programs (Table 3) and the number of graduates of dietetic programs (Table 2) is caused by the fact that some provinces do not have integrated undergraduate programs that include internships, which is a necessary requirement to practise as a dietitian. Additionally, not all graduates of undergraduate dietetic programs may choose to pursue an internship or are successful in obtaining an internship position due to a shortage of available positions.
- 2 University of Saskatchewan: 2006 data as of May 6, 2007.
- 3 University of British Columbia: The program has changed from a four-year to a five-year program; therefore, there were fewer graduates in 2006.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

Provincial dietitians' associations: Prince Edward Island Dietitians Registration Board, Newfoundland Dietetic Association (1997 to 2004), Newfoundland and Labrador College of Dietitians (2005 to 2006), Nova Scotia Dietetic Association, New Brunswick Association of Dietitians, Ordre professionnel des diététistes du Québec, College of Dietitians of Ontario, Manitoba Association of Registered Dietitians (became the College of Dietitians of Manitoba in January 2005), Saskatchewan Dietitians' Association, College of Dietitians of Alberta, College of Dietitians of British Columbia (2004 to 2006), British Columbia Dietitians' and Nutritionists' Association (1997 to 2003) and Dietitians of Canada (Northwest Territories, Nunavut and Yukon, 2000, 2002 to 2005).

Table 2

Dietitians of Canada.

Table 3

Individual universities: Memorial University of Newfoundland, University of Prince Edward Island, Acadia University, Mount St. Vincent University, St. Francis Xavier University, Université de Moncton, McGill University, Université Laval, Université de Montréal, Brescia University College, Ryerson University, University of Guelph, University of Manitoba, University of Saskatchewan, University of Alberta and University of British Columbia.

Figure 1

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Figure 2

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Figure 3

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Please note that this is the first year of reporting on environmental public health professionals.

Environmental Public Health Professionals

Environmental public health professionals (EHPs) include the working titles of both public health inspector and environmental health officer. They safeguard the environment and health of Canadians by providing health protection services in a variety of regulated and non-regulated areas.ⁱⁱ

Practice Setting

EHPs typically practise in federal, provincial, territorial, municipal or tribal government agencies on interdisciplinary public health teams. A smaller number of them also work in the private sector as technical consultants or as workplace safety and health professionals and in the field of academics, public policy, executive management, research, scientific publication and information management.



Note

Most employers require that EHPs demonstrate competencies for entry to practice by obtaining certification from Public Health Inspection, Canada (CPHI[C]). Mandatory membership requirements of all CPHI(C) holders is expected in 2010. For more information, go to www.cphi.ca.

Regulatory Environment

There are no legislated regulatory requirements for EHPs at this time in Canada.

- ii. Including water quality, air quality, food safety assurance, communicable disease control, infection control, housing standards/conditions, recreational facilities, injury prevention, wastewater management systems, emergency planning and response, land remediation and development issues, institutions and care facilities, public policy development, occupational health and safety, pollution control and solid waste management, tobacco control and quality control/assurance and private consulting services.



Supply Trends

Number of Registered Environmental Public Health Professionals¹
by Province/Territory, Canada, 1999–2006

TABLE 1

	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador	14	14	10	14	18	18	21	25
Prince Edward Island	4	7	7	8	8	6	8	6
Nova Scotia	58	52	57	56	51	56	62	57
New Brunswick	37	40	37	48	42	39	43	51
Quebec	6	8	4	7	7	5	9	8
Ontario	355	433	469	521	494	533	517	581
Manitoba	58	54	64	53	62	70	57	61
Saskatchewan	32	38	47	58	63	63	64	80
Alberta	136	135	136	147	161	157	185	228
British Columbia	205	231	237	204	219	243	241	264
Yukon	4	3	4	5	4	4	2	5
Northwest Territories	4	4	7	7	9	9	9	7
Nunavut	2	2	2	3	3	2	2	2
CANADA	915	1,021	1,081	1,131	1,141	1,205	1,220	1,375

Note

1 This table includes voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation that outlines how the information within the publication can be most effectively interpreted, analyzed and used. Information prior to 1999 was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

Information is not available at this time.

Graduate Trends

Number of Graduates of Environmental Public Health Professional Programs¹ by School of Graduation, Canada, 1997 to 2006

TABLE 2

School	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nova Scotia										
Cape Breton University	..	27	22	15	23	16	28	23	46	28
Ontario										
Ryerson University	64	90	83	85	60	69	73	88	91	90
Saskatchewan										
First Nations University of Canada	..	..	..	..	..	4	1	3	3	0
Alberta										
Concordia University College of Alberta	12	8	9	13	12	15	12	17	15	18
British Columbia										
British Columbia Institute of Technology	11	13	5	27	24	15	15	18	28	27
CANADA	87	138	119	140	119	119	129	149	183	163

Notes

.. Information was not available.

¹ This is a comprehensive list of schools offering EPHP programs in Canada.

Source

Health Personnel Database, Canadian Institute for Health Information

Sources

Table 1

Canadian Institute of Public Health Inspectors.

Table 2

Canadian Institute of Public Health Inspectors.

Health Information Management Professionals

Health information management (HIM) professionals are certified experts in the science and technology of health information management. They possess a unique blend of knowledge and skills encompassing biomedical sciences, information science and technology, legal aspects of health information management and the integration of clinical and financial information.

Practice Setting

Employment opportunities are found in a variety of settings including acute care within the departments of health records, health information management, decision support, quality management, research and statistics, information systems, utilization management and risk management; government agencies; privacy commissioners' offices; educational institutions; community health clinics; pharmaceutical companies; primary care agencies; home care, mental health and outreach programs; and nursing homes and long-term care facilities.

Regulatory Environment

There are no legislated regulatory requirements for health information management professionals at this time.

Note

Membership with CHIMA is mandatory in order to maintain HIM certification. CHIMA is a self-regulating national college. All CHIMA active members must comply with mandatory continuing professional education credits. Some employers require certification with CHIMA as a condition of employment. The Canadian Health Information Management Association and the Canadian College of Health Information Management (CCHIM) (formerly the Canadian College of Health Record Administrators [CCHRA]) operate under two official charters, but they operate jointly under the acronym CHIMA.



Supply Trends

Number of Registered Health Information Management Professionals¹
by Province/Territory, Canada, 1997 to 2006

TABLE 1

	1997	1998	1999	2000	2001	2002	2003	2004	2005 ²	2006
Newfoundland and Labrador	51	49	42	42	38	34	38	33	46	46
Prince Edward Island	15	13	16	17	15	15	14	17	17	17
Nova Scotia	184	180	173	167	155	149	142	143	144	149
New Brunswick	99	99	99	103	94	99	101	102	106	106
Quebec	57	37	28	26	22	18	22	19	21	21
Ontario	1,267	1,153	1,131	1,086	1,094	1,124	1,150	1,188	1,325	1,394
Manitoba	129	120	110	116	87	99	87	82	89	167
Saskatchewan	262	265	259	259	224	214	221	230	246	294
Alberta	442	484	324	308	307	289	279	283	492	519
British Columbia	434	413	388	376	351	342	338	345	366	482
Y.T., N.W.T. and Nun.	25	22	21	22	25	23	22	19	22	21
CANADA	2,965	2,835	2,591	2,522	2,412	2,406	2,414	2,461	2,874	3,216

Notes

Data in this table may have been revised due to HPDB system enhancements.

- ¹ This table includes voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation that outlines how the information within the publication can be most effectively interpreted, analyzed and used. Membership in CHIMA is voluntary across all provinces/territories except New Brunswick and Newfoundland and Labrador, where it is mandatory. For counts prior to 2001, certificant-level HIM professionals' and associate-level HIM professionals' data are combined to facilitate comparisons.
- ² Figures for 2005 exclude out-of-country members as well as students and affiliate members registered with CHIMA.

Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

Information is not available at this time.

Graduate Trends

Number of Health Information Management Professional Graduates¹ by School of Graduation, Canada, 1997 to 2006

School	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nova Scotia										
Dalhousie University	..	.	..	..	..	..	..	.	..	2
Queen Elizabeth II/Health Sciences Centre	9	4	1 ⁴	-	-	-	-	-	-	-
New Brunswick										
New Brunswick Community College	..	..	..	..	..	..	..	..	..	8
Quebec										
Collège Ahuntsic	41	32	24	34	..	..	..	..	..	..
Collège de l'Assomption	1	0	0	..	..	..	..	..	..	..
Collège LaFlèche	27	39	23	14	..	..	..	..	..	..
Ontario										
Algonquin College of Applied Arts and Technology	16	1	0 ⁴	-	-	-	-	-	-	-
Confederation College of Applied Arts and Technology	12	2	2	0	..	..	..	..	..	..
Fanshawe College of Applied Arts and Technology	8	0	-	-	-	-	-	-	-	-
George Brown College of Applied Arts and Technology	33	8	16	8	22	19	15	21	29	35
Niagara College of Applied Arts and Technology	0	0	1	0	..	..	..	..	..	..
Saint Lawrence College of Applied Arts and Technology	..	..	..	..	..	..	..	..	..	13
Sir Sanford Fleming College	..	..	..	..	..	..	..	..	..	19
University of Western Ontario	..	..	..	..	..	..	..	..	1	..
Manitoba										
Red River Community College	0	13	0	16	0 ²	13	0 ²	8	1 ²	12
Saskatchewan										
Saskatchewan Institute of Applied Science and Technology	8	10	15	7	6	10	7	6	8	9
Alberta										
Southern Alberta Institute of Technology	12	9	6	13	..	..	..	..	13	12
British Columbia										
Douglas College	12	12	1	1	2 ²	24	4 ²	17	2 ²	12
Canadian Healthcare Association³	46	41	42	64	57	124	108	101	99	111
CANADA	225	171	131	157	87	190	134	153	153	233

Notes

Data in this table may have been revised due to HPDB system enhancements.

.. Information not available.

¹ This is a comprehensive list of schools offering HIM programs in Canada. Prior to 2001, graduates were classified as HIM certificants (previously referred to as health record administrators or health record practitioners) or HIM associates (previously referred to as health record technicians). Since 2001, these designations are no longer used, and all the graduates are now referred to as "health information management (HIM) professional graduates." Data include only those graduates who applied to CHIMA during the year of graduation and who were accepted as certificants; they are not necessarily equivalent to annual numbers of graduates.

² There are fewer graduates as student enrolment occurs every two years.

³ Canadian Healthcare Association: CHIMA-recognized home-study program.

⁴ Discontinued program.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

Canadian Health Information Management Association.

Table 2

Canadian Health Information Management Association.

Licensed Practical Nurses

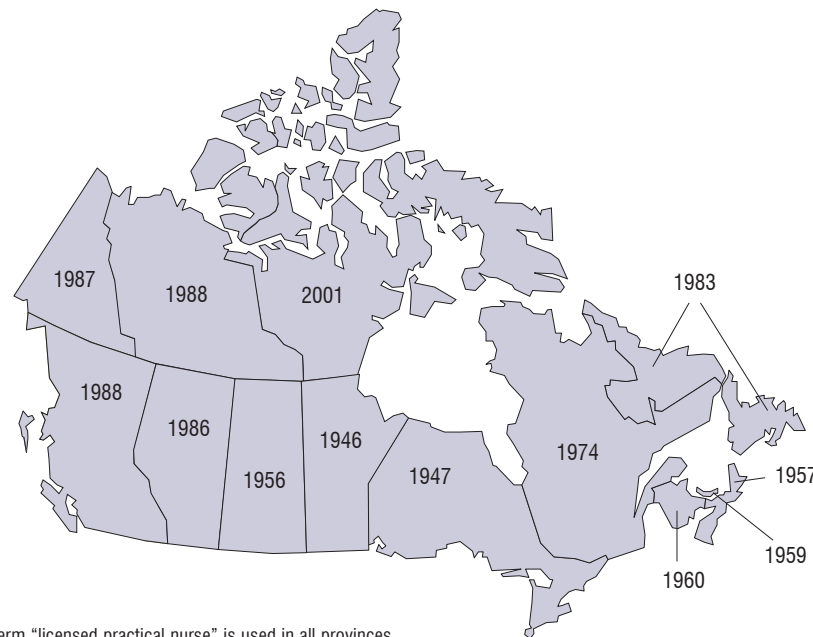
Licensed practical nurses (LPNs) are regulated health professionals who work in partnership with other members of the health care team to provide nursing services to individuals, families and groups of all ages.

Practice Setting

Licensed practical nurses practise in a variety of settings and contexts including, but not limited to, hospitals, homes for the aged, public-health units, community-nursing agencies, private practices, clinics, doctors' offices, industry, schools, adult day-care centres, private homes, community health centres, child-care centres and children's camps.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for LPNs to register with a provincial/territorial regulatory authority as a condition of practice.



Note
The term "licensed practical nurse" is used in all provinces and territories except Ontario, where licensed practical nurses are referred to as "registered practical nurses."



Supply Trends

Number of Licensed Practical Nurses¹
by Province/Territory, Canada, 1997 to 2006

TABLE 1

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador	2,797	2,809	2,859	2,905	2,889	2,759	2,719	2,710	2,696	2,639
Prince Edward Island	631	621	621	634	634	593	619	628	606	599
Nova Scotia	3,220	3,209	3,214	3,266	3,369	2,950	3,022	3,058	3,127	3,174
New Brunswick	2,517	2,575	2,656	2,662	2,743	2,333	2,429	2,556	2,633	2,646
Quebec	18,082	16,617	16,405	16,246	16,203	14,560	14,831	15,472	16,293	17,104
Ontario	34,623	33,781	33,141	33,071	32,513	23,827	25,730	24,467	24,458	25,084
Manitoba	2,488	2,582	2,483	2,540	2,627	2,250	2,417	2,415	2,590	2,652
Saskatchewan	2,187	2,144	2,154	2,057	2,122	2,011	2,056	2,131	2,194	2,224
Alberta	4,723	4,272	4,186	4,358	4,993	4,435	4,766	5,051	5,313	5,614
British Columbia	5,385	4,964	5,092	4,987	5,045	4,262	4,391	4,811	4,884	5,412
Yukon ³	74	66	62	67	69	64	60	53	56	60
Northwest Territories ²	103	111	110	112	99	79	98	91	101	92
Nunavut	..	..	..	..	..	..	..	..	..	..
CANADA	76,830	73,751	72,983	72,905	73,306	60,123	63,138	63,443	64,951	67,300

Series Break



Please refer to *Workforce Trends of Licensed Practical Nurses in Canada, 2006* for more detailed information.

Notes

Please note that the Nursing Database at CIHI is in the process of completing a historical review of the licensed practical nurses data. As a result, data presented here may vary from results previously released by CIHI.

.. Information was not available.

- 1 Data from 1997 to 2001 represent total registered LPNs, regardless of employment status. The data since 2002 represent a data series break and reflect those employed in practical nursing. The 2002 to 2006 data are not directly comparable to the data presented for 1997 to 2001 due to different collection methodologies. CIHI data will differ from provincial data due to the CIHI collection, processing and reporting methodology.
- 2 Northwest Territories 2000 and 2001 data as of March 31 of the given years.
- 3 A Yukon licence is not required if a Canadian licensed practical nurse is eligible for licensure or is licensed elsewhere in Canada.

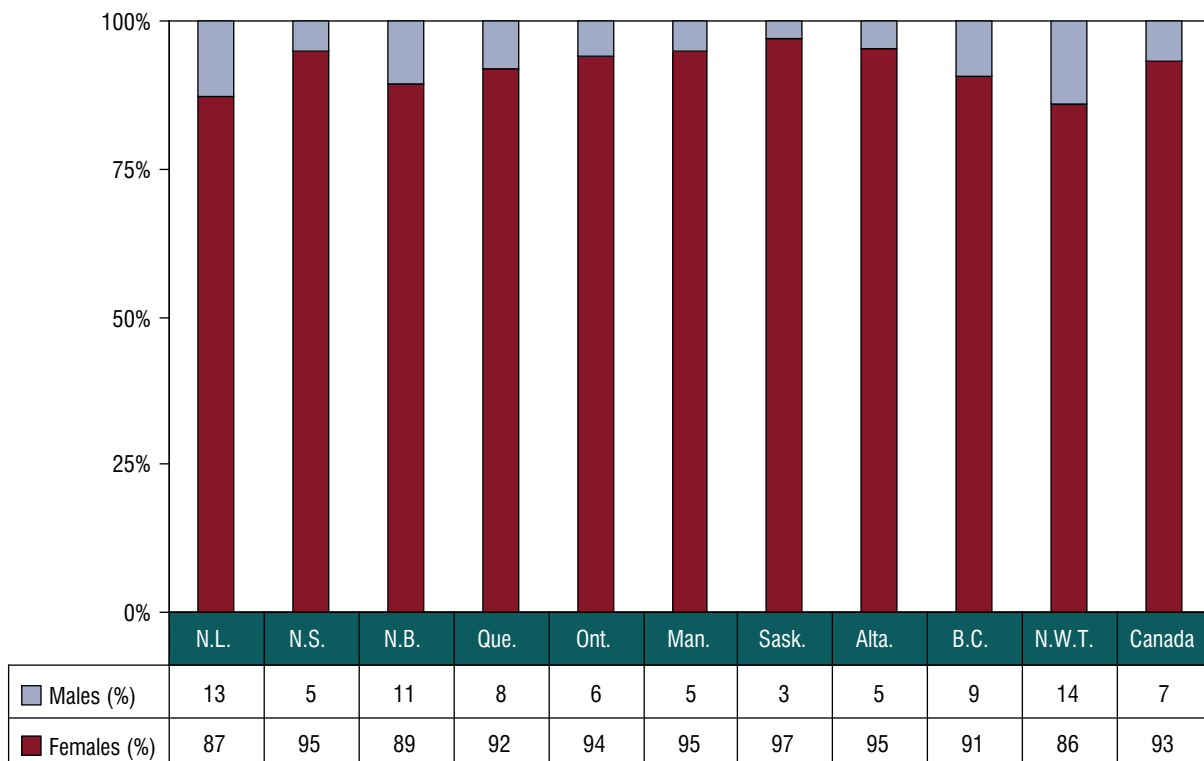
Sources

Health Personnel Database and regulated Nursing Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1

Percentage Distribution of Licensed Practical Nurses by Sex and Province/Territory, Canada, 2006



Notes

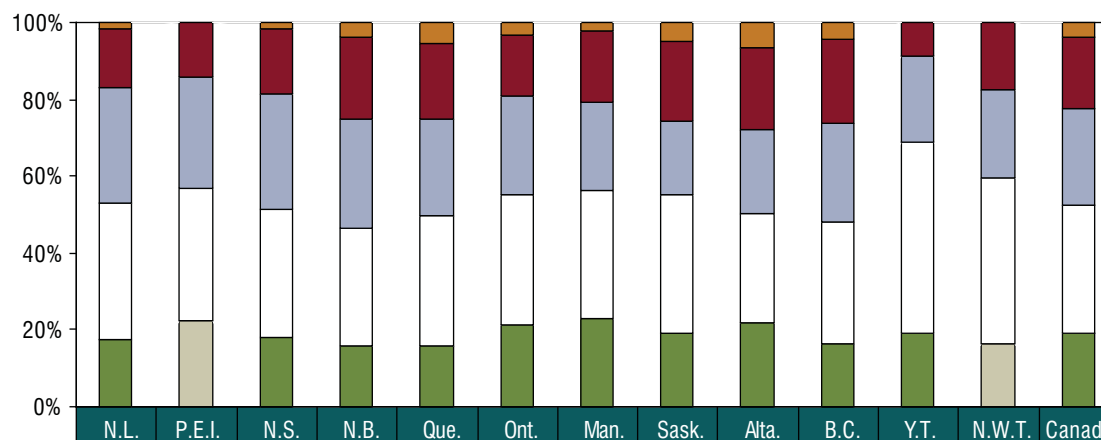
P.E.I. and the Yukon were not included due to the application of value suppression to maintain confidentiality. Nunavut information was not available.

Source

Regulated Nursing Database, Canadian Institute for Health Information.

FIGURE 2

Percentage Distribution of Licensed Practical Nurses by 10-Year Age Groups, Province/Territory and Canada, 2006



	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Y.T.	N.W.T.	Canada
15-24 (%)	2	**	2	4	6	3	2	5	7	4	0	**	4
25-34 (%)	15	14	17	22	20	16	18	20	21	22	9	17	18
35-44 (%)	30	29	30	28	25	26	23	20	22	26	22	23	25
45-54 (%)	36	35	34	30	34	34	33	36	29	32	50	43	33
55+ (%)	17	*	18	16	16	21	23	19	22	16	19	**	19
Age Unknown (%)	0	**	0	0	0	0	0	0	0	0	0	0	**
Value Suppressed (%)	Indicates all categories where cell suppression was applied.												

Notes

Totals may not sum to 100% due to rounding. Two LPNs in the Yukon were not included as age information was unknown. Nunavut information was not available.

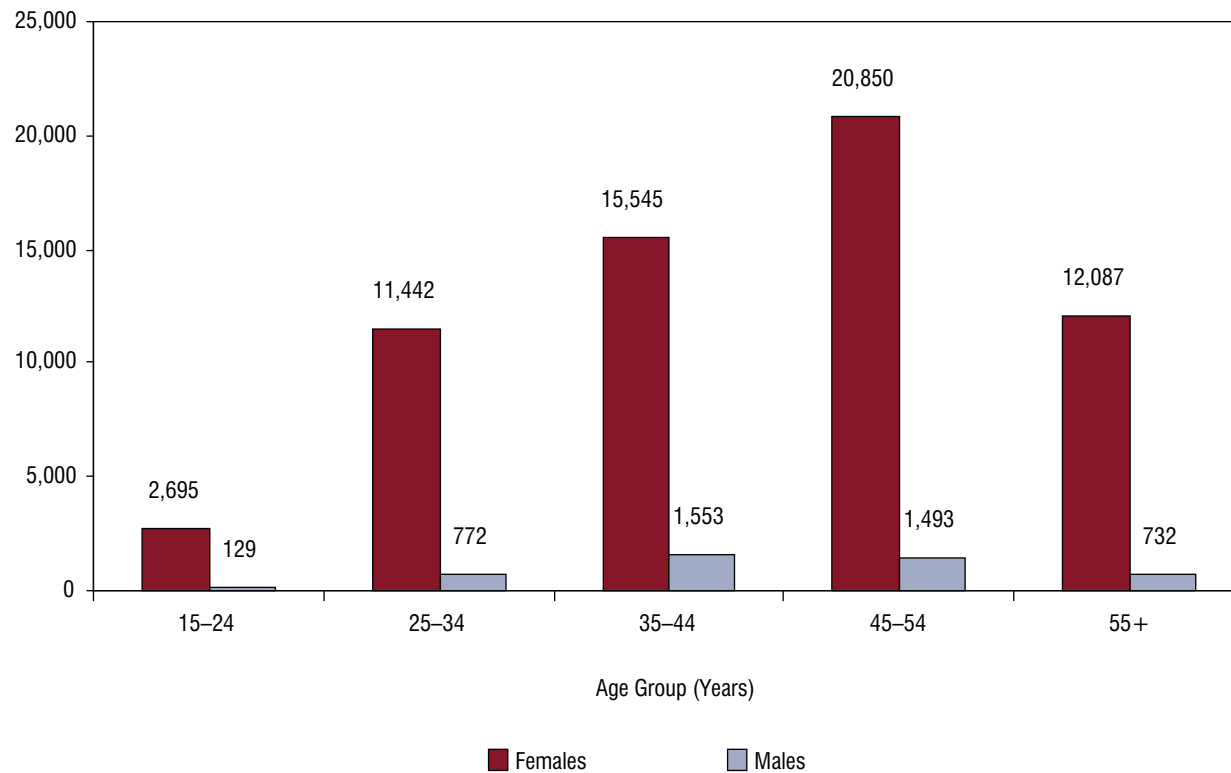
- * Value suppressed in accordance with CIHI privacy policy: cell value is from 1 to 4.
- ** Value suppressed in accordance with CIHI privacy policy: cell value is greater than 5.

Source

Regulated Nursing Database, Canadian Institute for Health Information.

FIGURE 3

Number of Licensed Practical Nurses by Sex and 10-Year Age Groups, Canada, 2006



Notes

Two LPNs in the Yukon were not included as age information was unknown.
 Nunavut information was not available.

Source

Regulated Nursing Database, Canadian Institute for Health Information.

Graduate Trends

Information is not available at this time.

Sources

Table 1

1997 to 2001 data from the Health Personnel Database; 2002 to 2006 data from the regulated Nursing Database, Canadian Institute for Health Information.

Figure 1

Calculated from data in the regulated Nursing Database, Canadian Institute for Health Information.

Figure 2

Calculated from data in the regulated Nursing Database, Canadian Institute for Health Information.

Figure 3

Calculated from data in the regulated Nursing Database, Canadian Institute for Health Information.

Medical Laboratory Technologists

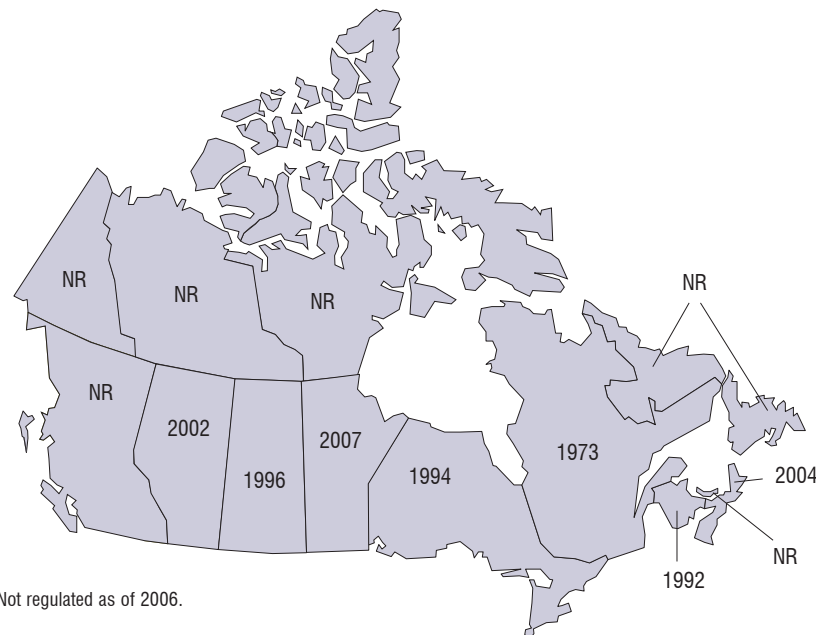
Medical laboratory technologists (MLTs) perform laboratory tests that assist physicians and other health professionals in the diagnosis and treatment of patients.

Practice Setting

Most medical laboratory technologists work in hospitals or government laboratories, private medical clinics, public health clinics or blood transfusion–service labs.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for medical laboratory technologists to register with a provincial/territorial regulatory authority as a condition of practice.



Supply Trends

Number of Active Registered Medical Laboratory Technologists¹ by Province/Territory, Canada, 1997 to 2006

TABLE 1

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador [†]	318	313	329	319	349	358	406	393	415	414
Prince Edward Island [†]	102	104	103	105	102	96	116	103	109	112
Nova Scotia ^{†, 7}	773	750	754	747	792	821	904 ⁸	904 ⁸	947 ⁸	934 ⁸
New Brunswick ³	632	623	623	643	647	650	654	652	654	639
Quebec ⁴	2,469	2,606	2,694	2,724	2,810	2,860	2,931	3,520	3,972	4,139 ⁸
Ontario ⁵	7,684	7,351	7,166	7,023	6,846	6,934	7,215	7,246	7,217	6,980
Manitoba [†]	974	926	938	952	943	952	1,010	960	1,013	985
Saskatchewan ⁶	946	927	954	972	967	962	938	949	984	977
Alberta ^{†, 2}	1,462	1,432	1,450	1,843	1,995	2,149	2,207	2,219	2,267	2,224 ⁸
British Columbia [†]	2,538	2,457	2,409	2,416	2,443	2,437	2,665	2,441	2,482	2,341
Yukon [†]	26	18	19	18
Northwest Territories [†]	20	25	24	21
N.W.T. and Nun. [†]	47	45	48	45	41	40	..	..	..	..
CANADA[†]	17,945	17,534	17,468	17,789	17,935	18,259	19,092	19,430	20,103	19,784

Notes

Data in this table may have been revised due to HPDB system enhancements.

† Indicates the presence of voluntary membership data.

.. Information was not available.

1 This table includes voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation that outlines how the information within the publication can be most effectively interpreted, analyzed and used. Nova Scotia, New Brunswick, Quebec, Ontario, Saskatchewan and Alberta data were from provincial regulatory/licensing authorities; the rest of the provinces' and territories' data were from the Canadian Society of Medical Laboratory Science.

2 Alberta: Prior to 2002, voluntary membership data were provided by the Alberta Society of Medical Laboratory Technologists. As of 2002, data were from the Alberta College of Medical Laboratory Technologists, where licensure is mandatory.

3 New Brunswick: 2003 to 2006 data are provided by the New Brunswick Society of Medical Laboratory Technologists (NBSMLT), a regulatory authority in which licensure is mandatory for practice in New Brunswick; individuals granted registration under a legislative "grandfather" clause are not included in these counts.

4 Quebec data are provided by the Ordre professionnel des technologistes médicaux du Québec (OPTMQ), the provincial regulatory authority since 1973; 1997 to 2001 data as of March 31 of the same year; 2005 data as of February 24, 2006; OPTMQ numbers for Quebec are low as their mandatory registration is still going into effect.

5 Ontario data are provided by the College of Medical Laboratory Technologists of Ontario, a regulatory authority in which licensure is mandatory for practice in Ontario.

6 Saskatchewan data are provided by the Saskatchewan Society of Medical Laboratory Technologists (SSMLT), a regulatory authority in which licensure is mandatory for practice in Saskatchewan.

7 Nova Scotia: 2003 to 2006 data provided by the Nova Scotia College of Medical Laboratory Technologists; 2006 data as of February 3, 2007.

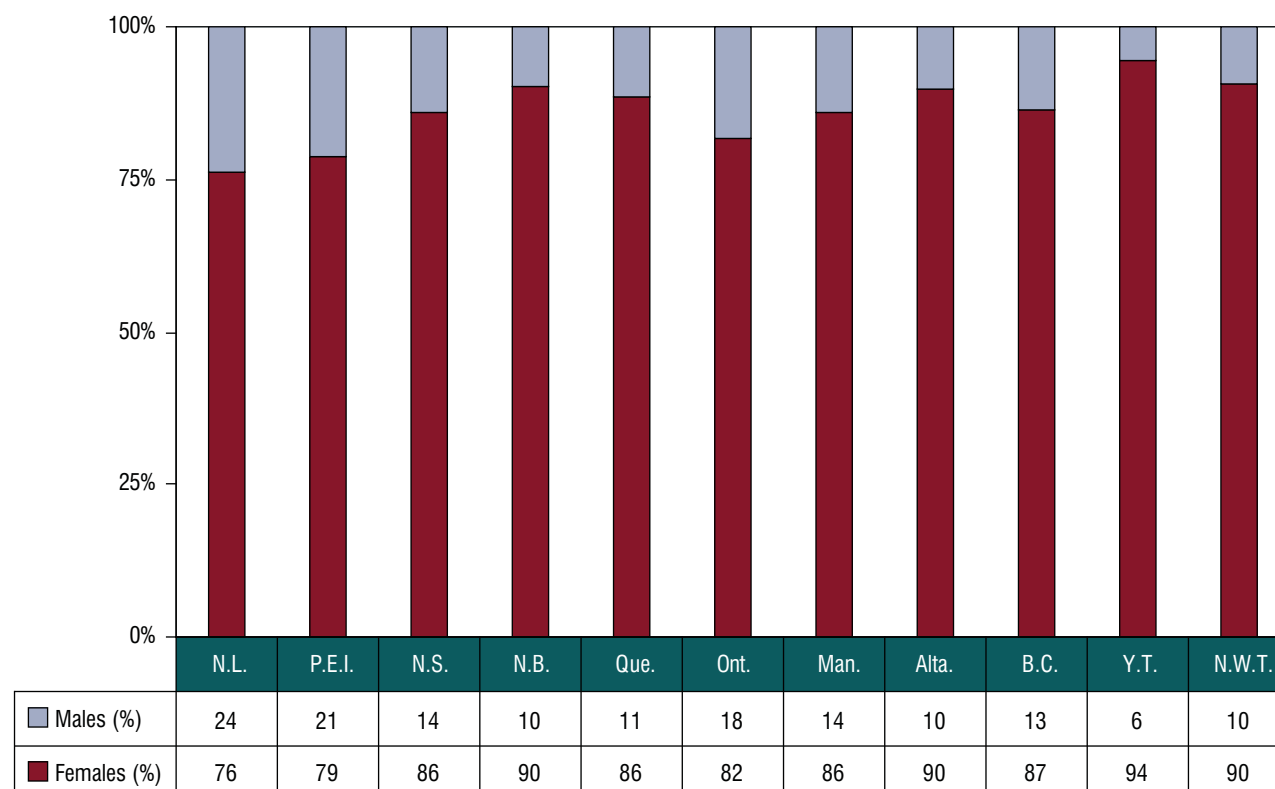
8 Represents registered medical laboratory technologists.

Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1 Percentage Distribution of Medical Laboratory Technologists by Sex and Selected Provinces/Territories, Canada, 2006



Notes

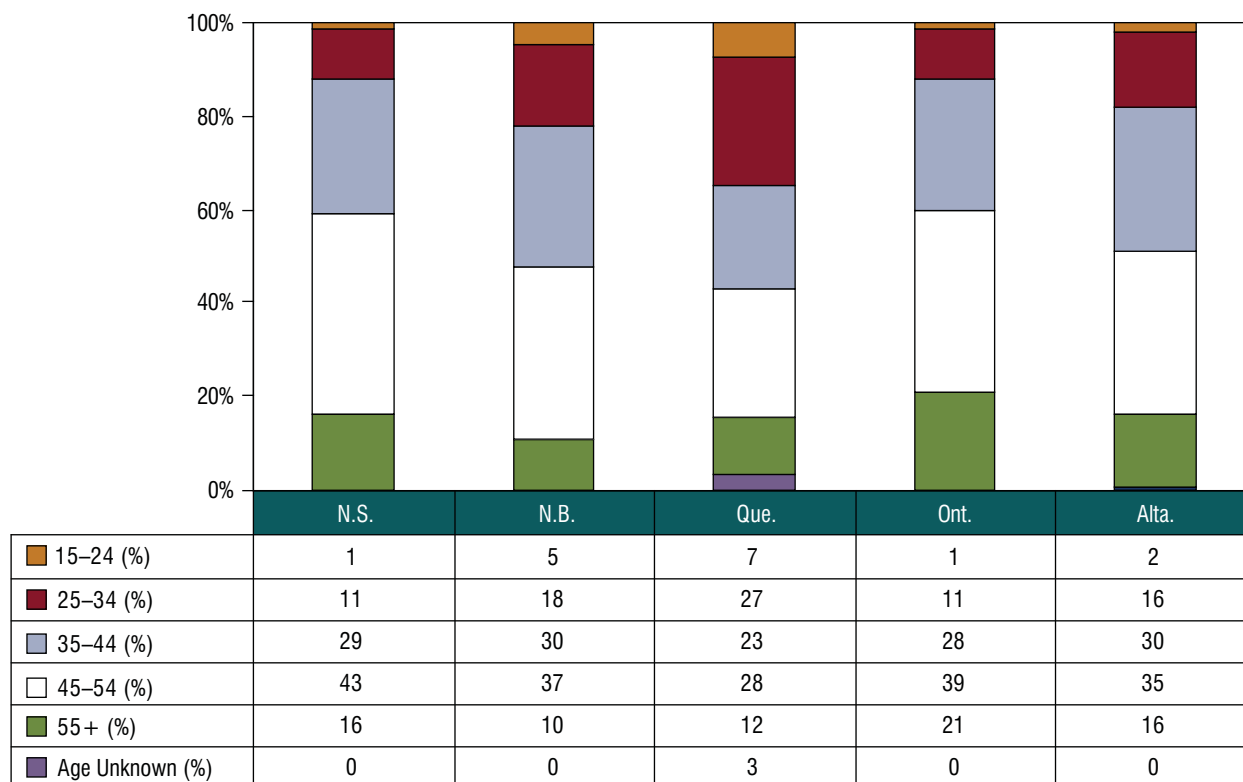
Saskatchewan was not included as gender information was not available.
 Nunavut information was not available.
 Of Quebec medical laboratory technologists, 3% did not report gender information.

Source

Health Personnel Database, Canadian Institute for Health Information.

FIGURE 2

Percentage Distribution of Medical Laboratory Technologists by 10-Year Age Groups and Selected Provinces, 2006



Notes

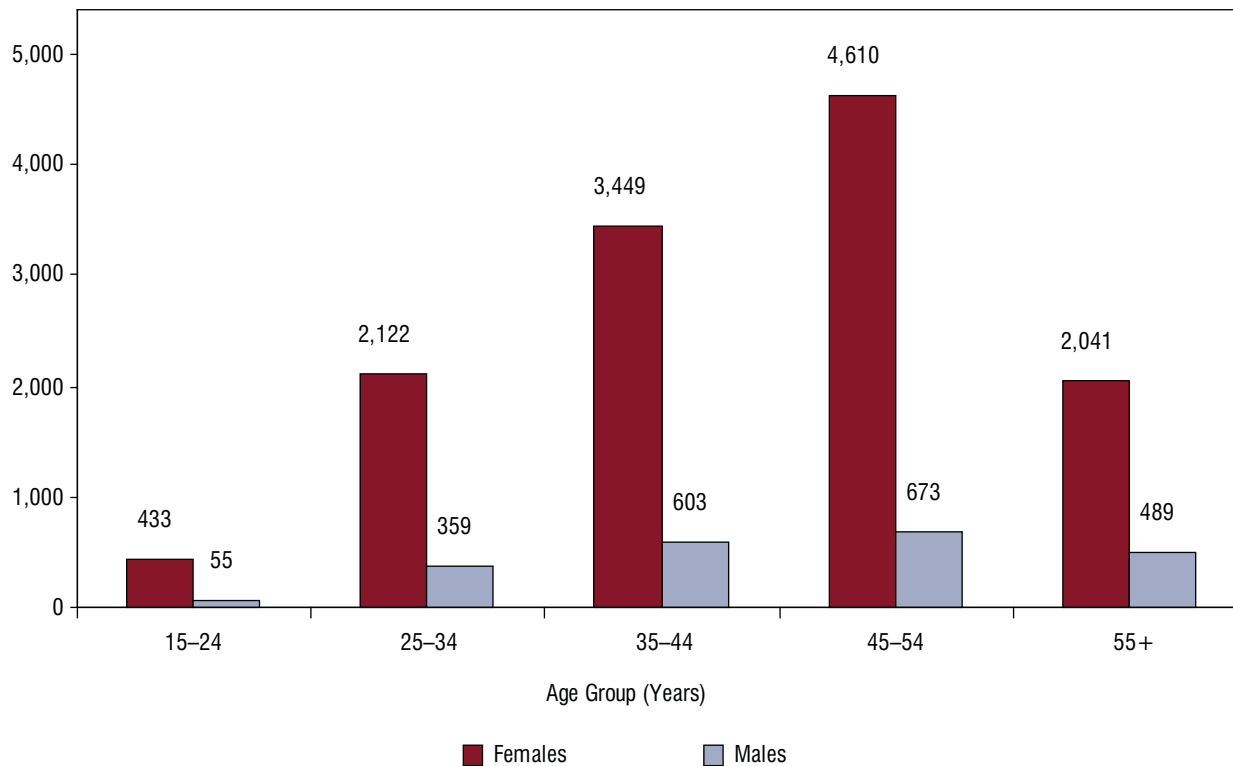
Totals may not sum to 100% due to rounding. Includes only Alberta, New Brunswick, Nova Scotia, Ontario and Quebec data. Information on the other provinces/territories was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

FIGURE 3

Number of Medical Laboratory Technologists by Sex and 10-Year Age Groups, Selected Provinces, 2006



Notes

Includes only Alberta, New Brunswick, Nova Scotia, Ontario and Quebec. Information on the rest of the provinces/territories was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

Graduate Trends

Number of CSMLS General Certificate Exam Candidates Who Obtained General Certification¹ by Province/Territory, Canada, 1997 to 2006

TABLE 2

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador	17	22	21	17	13	18	19	23	24	18
Prince Edward Island	1	1	0	0	1	0	2	4	0	0
Nova Scotia	4	1	2	1	3	4	46	43	0	21
New Brunswick	17	9	7	13	14	14	21	21	18	22
Quebec	187	208	148	152	142	125	173	168	146	136
Ontario	138	85	57	36	56	83	179	262	103	122
Manitoba	19	0	3	1	7	4	31	30	21	15
Saskatchewan	5	0	10	4	15	13	12	16	12	14
Alberta	26	19	25	24	35	47	100	82	60	53
British Columbia	38	17	3	16	52	36	83	75	29	44
Yukon	..	..	..	..	..	..	..	..	0	0
Northwest Territories	..	..	..	..	..	..	..	..	0	0
Nunavut	..	..	..	..	..	..	3	0	0	0
No Formal Program ²	1	1	0	1	1	0	2	1	47	86
CANADA	453	363	276	265	339	344	671	725	460	531

Notes

.. Information was not available.

¹ Statistics consisted of candidates writing the Canadian Society of Medical Laboratory Science (CSMLS) national exam for the first time.

² Included foreign-trained students deemed eligible to write the CSMLS certification exam.

Source

Health Personnel Database, Canadian Institute for Health Information.

TABLE 3

Number of Graduates of Medical Laboratory Technologist Programs¹ by School of Graduation, Canada, 2005 to 2006

School	2005	2006
Newfoundland and Labrador		
College of the North Atlantic	24	20
Nova Scotia		
Nova Scotia Community College (NSCC)	24	23
New Brunswick		
New Brunswick Community College	15	42
Université de Moncton	..	5
Quebec		
Dawson College	22	18
Cégep Saint-Jean-sur-Richelieu	24	24
Cégep de Rimouski	10	16
Cégep de Saint-Jérôme	25	8
Cégep de Saint-Foy	41	47
Cégep de Sherbrooke	..	18
Cégep de Sainte-Hyacinthe	10	4
Ontario		
Cambrian College	21	14
Saint Lawrence College of Applied Arts and Technology	35	38
St. Clair College of Applied Arts and Technology	24	20
The Michener Institute, Applied Health Sciences	28	50
Manitoba		
Red River College	28	20
Saskatchewan		
Saskatchewan Institute of Applied Science and Technology	14	14
Alberta		
Northern Alberta Institute of Technology	19	28
Southern Alberta Institute of Technology	19	22
University of Alberta	17	17
British Columbia		
British Columbia Institute of Technology	28	46
CANADA	428	494

Notes

.. Information was not available.

1 Please note that this is the first year for reporting information on graduates of medical laboratory technologist programs.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

Canadian Society of Medical Laboratory Science, College of Medical Laboratory Technologists of Ontario, Alberta Society of Medical Laboratory Technologists, Alberta College of Medical Laboratory Technologists (2003 to 2006), New Brunswick Society of Medical Laboratory Technologists, Saskatchewan Society of Medical Laboratory Technologists, Ordre professionnel des technologistes médicaux du Québec and Nova Scotia College of Medical Laboratory Technologists (2003 to 2006).

Table 2

The Canadian Society of Medical Laboratory Science.

Table 3

Individual colleges and universities: College of the North Atlantic; Nova Scotia Community College; New Brunswick Community College; Université de Moncton; Dawson College; Cégep Saint-Jean-sur-Richelieu; Cégep de Rimouski; Cégep de Saint-Jérôme; Cégep de Saint-Foy; Cégep de Sherbrooke; Cégep de Sainte-Hyacinthe; Cambrian College; Saint Lawrence College of Applied Arts and Technology; St. Clair College of Applied Arts and Technology; The Michener Institute, Applied Health Sciences; Red River College; Saskatchewan Institute of Applied Science and Technology; Northern Alberta Institute of Technology; Southern Alberta Institute of Technology; University of Alberta; and British Columbia Institute of Technology.

Figure 1

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Figure 2

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Figure 3

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

M

Medical Physicists

Medical physicists have specialized training in the medical applications of physics, which involves the use of physical agents, including X-rays, radioactive materials, ultrasound, magnetic and electric fields, infrared and ultraviolet light, heat and light—in diagnosis and therapy.

Practice Setting

Most medical physicists work in cancer-treatment facilities, hospital diagnostic imaging departments or hospital-based research establishments. Others work in universities, government and industry.

Regulatory Environment

Currently there are no regulatory requirements for medical physicists in Canada.



Note

Currently, a Canadian College of Physicists in Medicine (CCPM) certification is not a requirement to work in Canada; however, in many jurisdictions a CCPM certification is an employer requirement. To acquire CCPM certification, medical physicists need to pass the oral and written examinations, be a member of the Canadian Organization of Medical Physicists (COMP) and maintain practice standing.



Supply Trends

Number of Active Registered Members of the Canadian Organization of Medical Physicists¹ by Province/Territory, Canada, 1997 to 2006²

TABLE 1

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador [†]	2	2	2	2	2	3	3	3	3	5
Prince Edward Island [†]	1	1	1	1	1	1	2	4	4	4
Nova Scotia [†]	8	8	8	9	8	8	11	10	10	10
New Brunswick [†]	6	6	6	6	6	5	7	7	10	9
Quebec [†]	39	41	43	41	44	43	43	43	49	47
Ontario [†]	107	123	117	118	127	121	133	138	147	149
Manitoba [†]	13	13	13	12	15	15	15	16	14	14
Saskatchewan [†]	9	11	11	10	12	10	10	10	9	12
Alberta [†]	21	25	27	27	29	26	27	30	31	33
British Columbia [†]	23	23	25	28	33	35	34	36	36	39
Y.T., N.W.T. and Nun. [†]
CANADA[†]	229	253	253	254	277	267	285	297	313	322

Notes

Data in this table may have been revised due to HPDB system enhancements.

[†] Indicates the presence of voluntary membership data.

.. Information was not available.

¹ This table includes voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation that outlines how the information within the publication can be most effectively interpreted, analyzed and used.

² Data are usually as of August/September of given year. Data represent full members in Canada (exclude retired, student, emeritus and associate). Data for 2006 as of April 20, 2007.

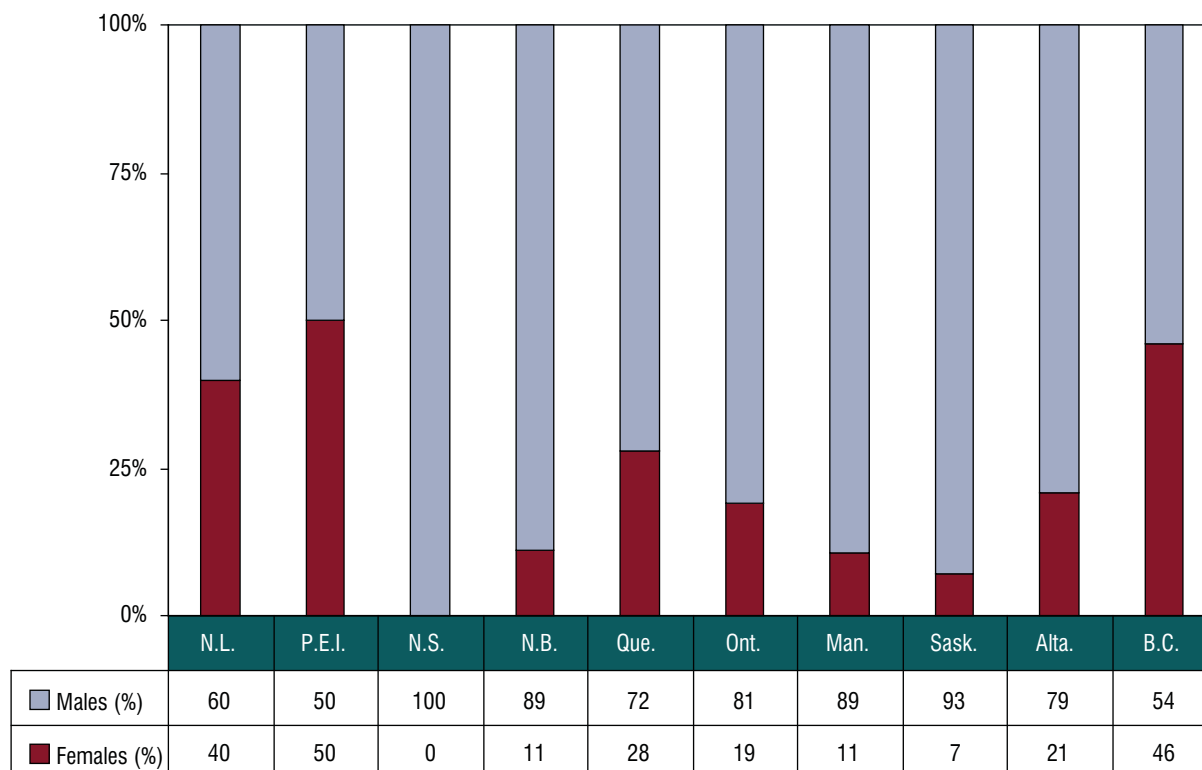
Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1

Percentage Distribution of Registered Medical Physicists¹ by Sex and Province, Canada, 2006



Notes

1 The counts of registered medical physicists included full, retired, emeritus, student, associate and corporate members. Territorial information was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

Graduate Trends

Information is not available at this time.

Sources

Table 1

Canadian Organization of
Medical Physicists.

Figure 1

Calculated from data in the
Health Personnel Database,
Canadian Institute for
Health Information.

M Medical Radiation Technologists

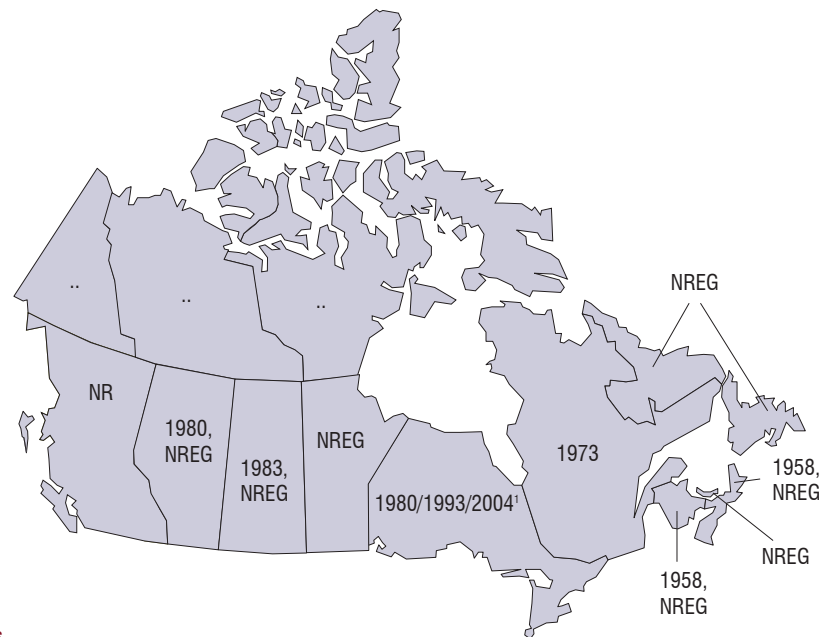
Medical radiation technologists (MRTs) operate diagnostic-imaging and radiation-therapy equipment to determine function of organs and body systems by producing images of body structure and pathology, and to administer radiation treatment. Medical radiation technology encompasses the four disciplines of magnetic resonance, nuclear medicine, radiological technology and radiation therapy.

Practice Setting

Medical radiation technologists may be employed in hospitals, cancer-treatment centres, clinics, research and education facilities and in equipment sales and application.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for medical radiation technologists to register with a provincial/territorial regulatory authority as a condition of practice.



Notes

- .. Information was not available.
- NR Not regulated.
- NREG Not regulated but mandatory registration with CAMRT is required in the province (if without a specific year, then the initial year is unknown).
- 1 Ontario: 1980—radiation therapy, radiography; 1993—nuclear medicine; 2004—magnetic resonance.



Supply Trends

Number of Active Registered Medical Radiation Technologists¹ by Province/Territory, Canada, 1997 to 2006

TABLE

1

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador [†]	265	262	262	262	279	278	293	293	287	303
Prince Edward Island [†]	64	68	68	67	67	70	68	75	72	75
Nova Scotia [†]	515	517	507	502	496	517	528	533	522	551
New Brunswick [†]	445	454	458	460	463	475	473	500	501	502
Quebec ³	3,577	3,569	3,604	3,679	3,679	3,714	3,928	4,028	4,128	4,251
Ontario ²	5,197	5,257	5,263	5,306	5,388	5,476	5,616	5,775	5,939	6,082
Manitoba [†]	616	618	595	586	581	592	603	624	613	628
Saskatchewan [†]	414	420	420	438	450	451	445	429	453	479
Alberta [†]	1,322	1,376	1,383	1,455	1,515	1,528	1,584	1,660	1,665	1,723
British Columbia [†]	1,661	1,623	1,629	1,662	1,675	1,679	1,725	1,750	1,818	1,870
Y.T., N.W.T. and Nun. ^{†,4}	..	..	..	..	..	..	26 ⁵	26 ⁵	25 ⁴	..
CANADA[†]	14,076	14,164	14,189	14,417	14,593	14,780	15,289	15,693	16,023	16,464

Notes

[†] Indicates the presence of voluntary membership data.

.. Information was not available.

¹ This table includes voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation that outlines how the information within the publication can be most effectively interpreted, analyzed and used. Ontario and Quebec data are from each respective provincial authority. All other provincial/territorial data are from the CAMRT.

² Data are provided by the College of Medical Radiation Technologists of Ontario.

³ Data are provided by the Ordre des technologues en radiologie du Québec; 2004 data as of March 31, 2005; 2006 data as of March 31, 2007.

⁴ Territory data for 2005 included 9 MRTs in the Yukon, 14 MRTs in Northwest Territories and 2 MRTs in Nunavut.

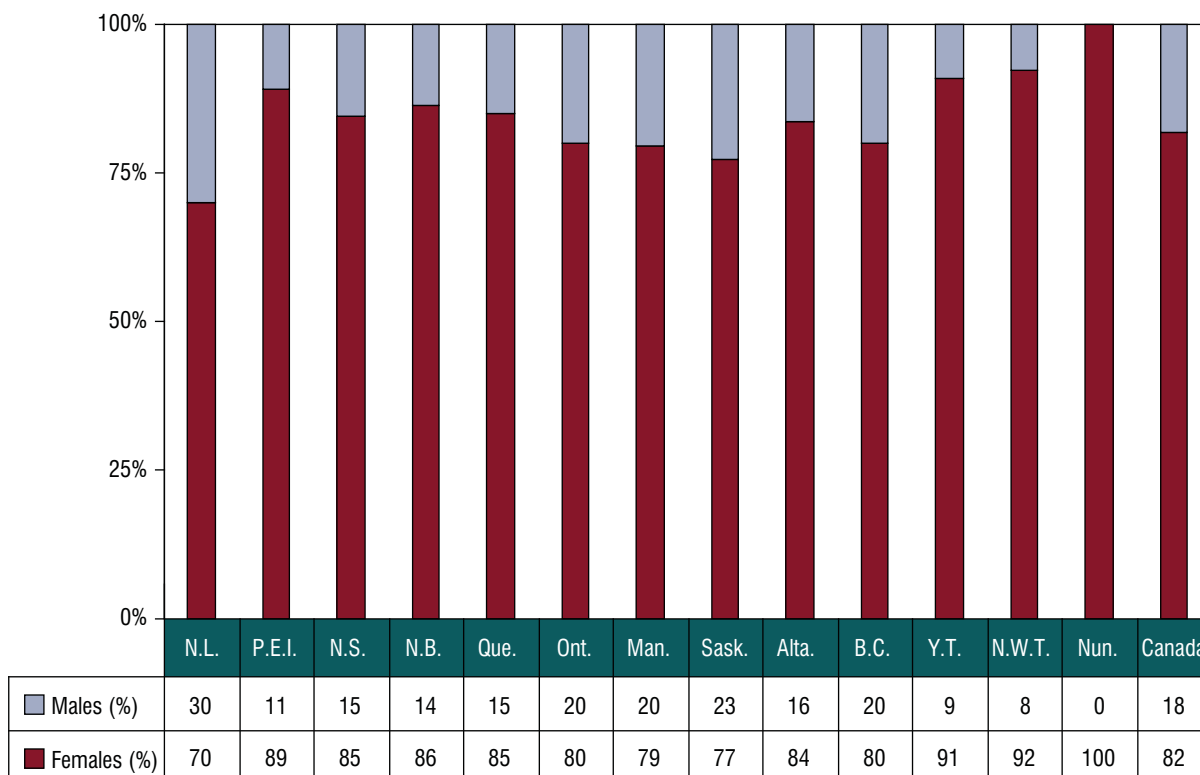
⁵ Represents registered medical radiation technologists.

Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1 Percentage Distribution of Medical Radiation Technologists by Sex, Province/Territory, Canada, 2006



Note

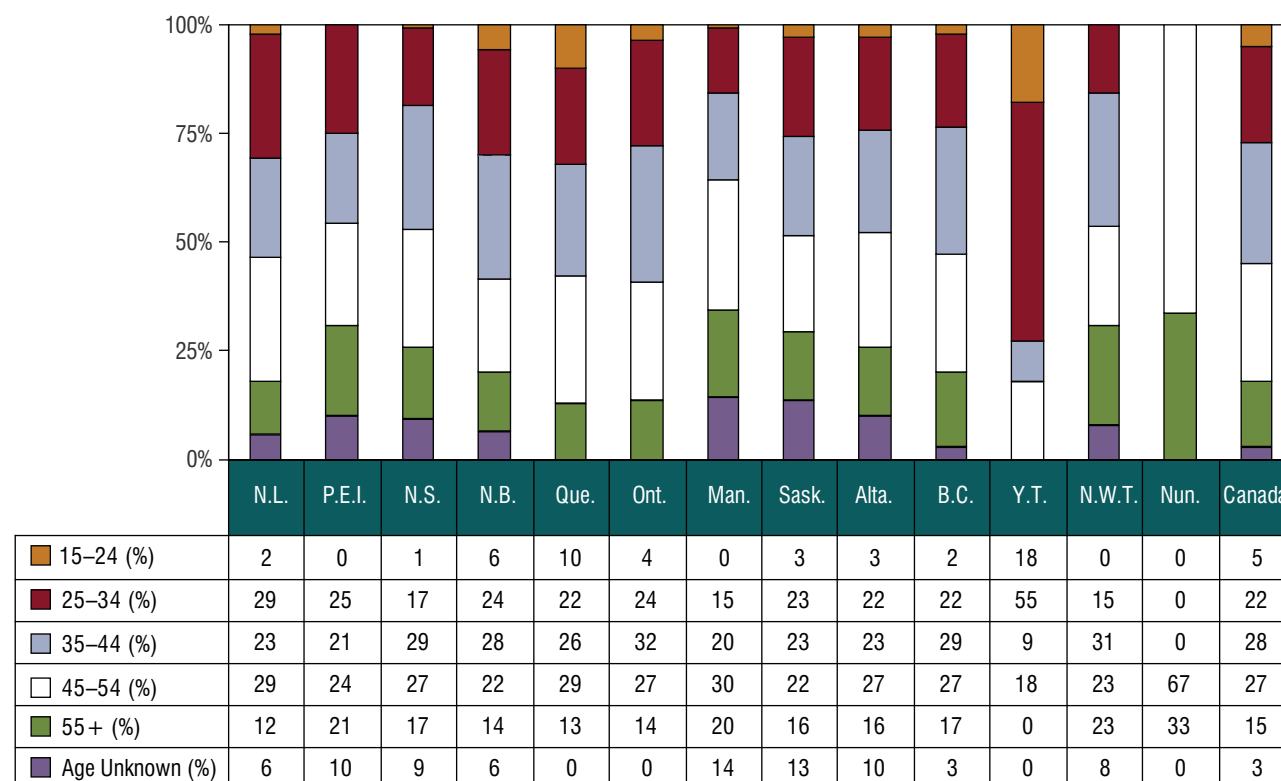
Totals may not sum to 100% due to rounding.

Source

Health Personnel Database, Canadian Institute for Health Information.

FIGURE 2

Percentage Distribution of Medical Radiation Technologists by 10-Year Age Groups, Province/Territory, Canada, 2006



Note
Totals may not sum to 100% due to rounding.

Source
Health Personnel Database, Canadian Institute for Health Information.

Graduate Trends

Number of Medical Radiation Technologist Candidates¹ Who Passed the CAMRT National Certification Exam, by Province, Canada, 1997 to 2006

TABLE 2

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador	14	10	13	13	15	19	19	18	19	21
Prince Edward Island	1	6	0	0	6	6	8	9	0	4
Nova Scotia	11	11	7	10	7	21	16	18	8	30
New Brunswick	15	10	9	22	26	34	19	23	20	29
Quebec ²	144	153	96	110	133	127	193	177	170	185
Ontario	244	253	218	189	246	239	283	350	348	365
Manitoba	28	8	23	22	28	35	25	36	27	36
Saskatchewan	20	13	18	8	21	33	32	29	26	28
Alberta	45	40	45	52	69	87	80	86	82	85
British Columbia	61	57	66	72	71	77	81	83	100	101
Non-Provincial Candidates ³	..	..	10	77	39	49	40	26	17	18
CANADA	583	561	505	575	661	727	796	855	817	902

Notes

- .. Information was not available.
- ¹ Includes graduates from magnetic resonance, nuclear medicine, radiation therapy and radiological technology programs.
- ² Quebec data for 1995 to 2001, 2003 and 2004 from OTRQ; 2002, 2005 and 2006 data are CIHI estimates.
- ³ Candidates that may reside in the territories or out of the country.

Source

Health Personnel Database, Canadian Institute for Health Information

TABLE 3

 Number of Graduates of Medical Radiation Technologist Programs¹
 by School of Graduation and Discipline, Canada, 2005 and 2006

	2005	2006
Newfoundland and Labrador		
College of the North Atlantic Radiological Technology	12 12	13 13
Prince Edward Island		
University of Prince Edward Island Radiological Technology	6 6	5 5
Nova Scotia		
Dalhousie University Nuclear Medicine Radiological Technology	9 7 2	25 9 16
New Brunswick		
New Brunswick Community Colleges Radiation Therapy Radiological Technology	12 6 6	16 8 8
University of New Brunswick Nuclear Medicine Radiological Technology	9 3 6	18 6 12
Université de Moncton Radiation Therapy	6 6	3 3
Quebec		
Cégep de Rimouski Radiological Technology	17 17	24 24
Collège Ahuntsic Nuclear Medicine Radiation Therapy Radiological Technology	97 25 16 56	107 21 14 72

(continued)

Note

1 Please note that this is the first reporting on graduates of medical radiation technologist programs by discipline. Includes graduates from magnetic resonance, nuclear medicine, radiation therapy and radiological technology programs.

Source

Health Personnel Database, Canadian Institute for Health Information.

TABLE 3

 Number of Graduates of Medical Radiation Technologist Programs¹
 by School of Graduation and Discipline, Canada, 2005 and 2006 (cont'd)

	2005	2006
Ontario		
Cambrian College	17	24
Radiological Technology	17	24
Collège Boréal d'arts appliqués et de technologie	17	25
Radiation Therapy	17	25
Confederation College of Applied Arts and Technology	7	7
Radiation Therapy	7	7
Fanshawe College of Applied Arts and Technology	36	43
Nuclear Medicine	36	43
Mohawk College of Applied Arts and Technology	104	124
Radiation Therapy	52	62
Radiological Technology	52	62
Queen's University	13	11
Radiation Therapy	13	11
The Michener Institute, Applied Health Sciences	44	41
Magnetic Resonance	44	41
University of Toronto	125	120
Nuclear Medicine	28	31
Radiation Therapy	67	65
Radiological Technology	30	24
Manitoba		
Red River College	17	24
Radiation Therapy	17	24
Saskatchewan		
Saskatchewan Institute of Applied Science and Technology	17	16
Radiation Therapy	17	16
British Columbia		
British Columbia Institute of Technology	48	54
Radiation Therapy	48	54
CANADA		
Nuclear Medicine	63	67
Radiation Therapy	266	289
Radiological Technology	240	303
Magnetic Resonance	44	41

Note

1 Please note that this is the first reporting on graduates of medical radiation technologist programs by discipline. Includes graduates from magnetic resonance, nuclear medicine, radiation therapy and radiological technology programs.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

Canadian Association of Medical Radiation Technologists (CAMRT), Ordre des technologues en radiologie du Québec and College of Medical Radiation Technologists of Ontario.

Table 2

Canadian Association of Medical Radiation Technologists.

Table 3

Individual colleges and universities: College of the North Atlantic; University of Prince Edward Island; Dalhousie University; New Brunswick Community College; University of New Brunswick; Université de Moncton; Cégep de Rimouski; Collège Ahuntsic; Cambrian College; College Boréal d'arts appliqués et de technologie; Confederation College of Applied Arts and Technology; Fanshawe College of Applied Arts and Technology; Mohawk College of Applied Arts and Technology; Queen's University; The Michener Institute, Applied Health Sciences; University of Toronto; Red River College; Saskatchewan Institute of Applied Science and Technology; and British Columbia Institute of Technology.

Figure 1

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Figure 2

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

M

Midwives

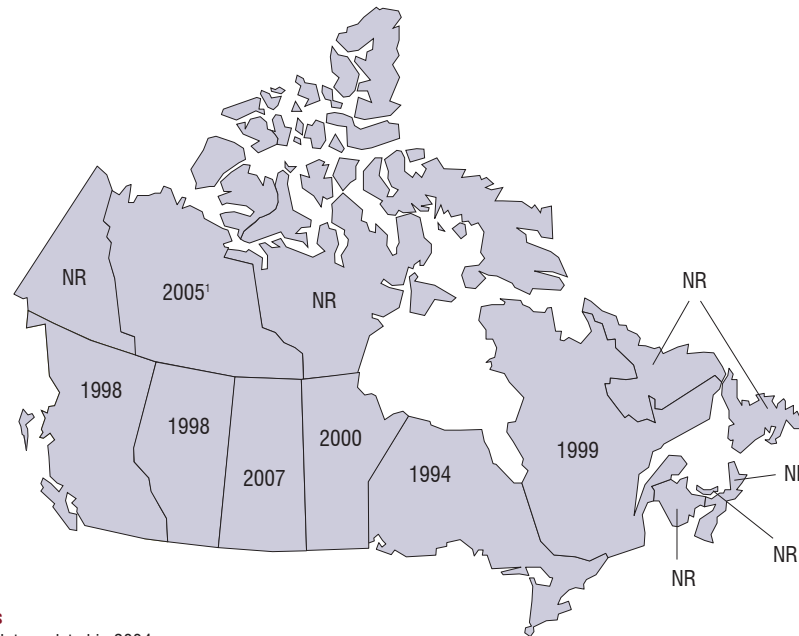
Midwives are primary health care providers who provide a complete course of care to women and their babies and families during pregnancy, labour, birth and the post-natal period.

Practice Setting

A midwife may practise in any setting including home, community, hospitals, clinics, birth centres and health units.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for midwives to register with a provincial/territorial regulatory authority as a condition of practice. The regulatory environment for midwives witnessed considerable change between 1997 and 2006. Although midwifery is regulated in six provinces and one territory, for many years unregulated personnel have practised midwifery in Canada.



Notes

NR Not regulated in 2004.

1 The Government of the Northwest Territories *Midwifery Profession Act* in early 2005 directs the licensing, registration and regulation of registered midwives in the Northwest Territories



Supply Trends

Number of Active Registered Midwives¹ by Province/Territory, Canada, 1997 to 2006

TABLE 1

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador [†]	1	12 ¹³	..	9 ¹³
Prince Edward Island [†]	1 ⁸	..	..	..	4 ⁸
Nova Scotia [†]	15	..	..	2	2	2	8 ¹²	4	10 ^{5, 12}	12 ^{5, 12}
New Brunswick ^{†, 14}	..	..	..	..	..	..	1	n/a	n/a	n/a
Quebec ^{†, 9}	38	43	55	62	56	61	61	77	84	91
Ontario ⁷	115	136	165	177	190	219	239	268	266	329
Manitoba ⁴	5 [†]	7 [†]	7 [†]	25	24	26	37	37	30	32
Saskatchewan ^{†, 10}	6	5	6	5	5	5	5	8 ¹²	10 ¹²	10 ¹²
Alberta ²	27 [†]	24	23	20	22	24	18	16	19	29
British Columbia ³	..	49	53	61	65	69	73	83	94	102
Yukon ^{†, 11}	..	..	..	2 ¹³	2	2	1	..	1	1
N.W.T. and Nun. [†]	1	1	1	2	4	4	1	8 ¹²	6 ⁶	7 ⁶
CANADA[†]	207	265	310	356	370	413	445	513	520	626

Notes

Data in this table may have been revised due to HPDB system enhancements.

† Indicates the presence of voluntary membership data.
 .. Information was not available.

n/a Not applicable.

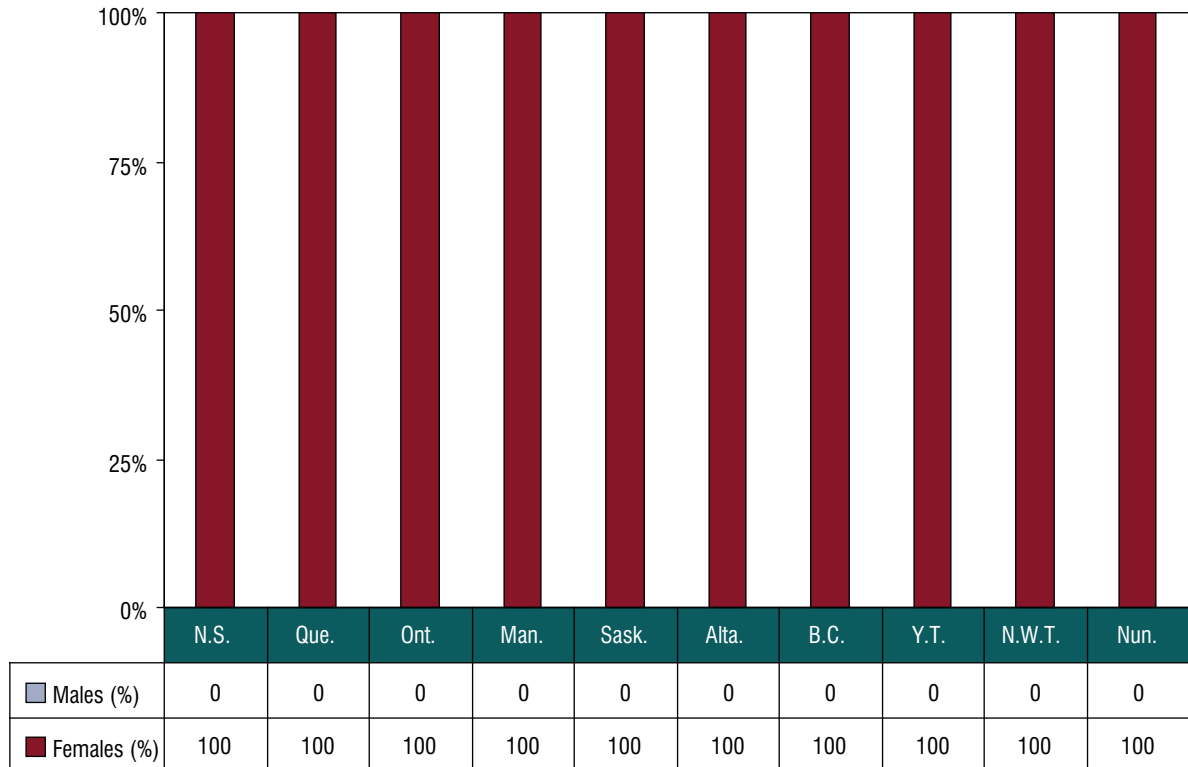
- 1 This table includes voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation that outlines how the information within the publication can be most effectively interpreted, analyzed and used.
- 2 Alberta: 1998 to 2004 data as of April 30 of the following year; Alberta registry opened July 17, 1998; 2005 data as of April 1, 2006.
- 3 B.C.: 1998 to 2002 data included conditional registrants; data as of March 31 of the following years.
- 4 Manitoba: 2000 data as of June 13, 2000; 2001 and 2002 data as of March 31 of the following years; 2003 data as of April 27, 2004; 2004 data as of May 2, 2005; 2006 data as of April 1, 2006.
- 5 Nova Scotia: 2005 data as of March 16, 2006; 2006 data as of March 31, 2007.
- 6 Northwest Territories and Nunavut: 2005 and 2006 data from separate sources included three members each; Nunavut 2005 data as of August 8, 2006, and 2006 data as of April 23, 2007.
- 7 Ontario: 1997 to 2002 data as of January 1 of the following years; 2003 and 2004 data as of March 31 of the following years; 2005 and 2006 data as of March 31 of the given years.
- 8 P.E.I.: 2002 data as of December 4, 2002.
- 9 Quebec: 2001 data as of October 1, 2001; 2002 data as of September 7, 2002; 2006 data as of March 31, 2007.
- 10 Saskatchewan: 2001 and 2002 data as of September of the given years.
- 11 Yukon: 2005 and 2006 data as of February 20 of the following years.
- 12 Represents registered midwives.
- 13 Count is from the Canadian Association of Midwives.
- 14 As of 2004, the Midwives Association of New Brunswick was closed.

Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1 Percentage Distribution of Midwives by Sex and Province, Canada, 2006

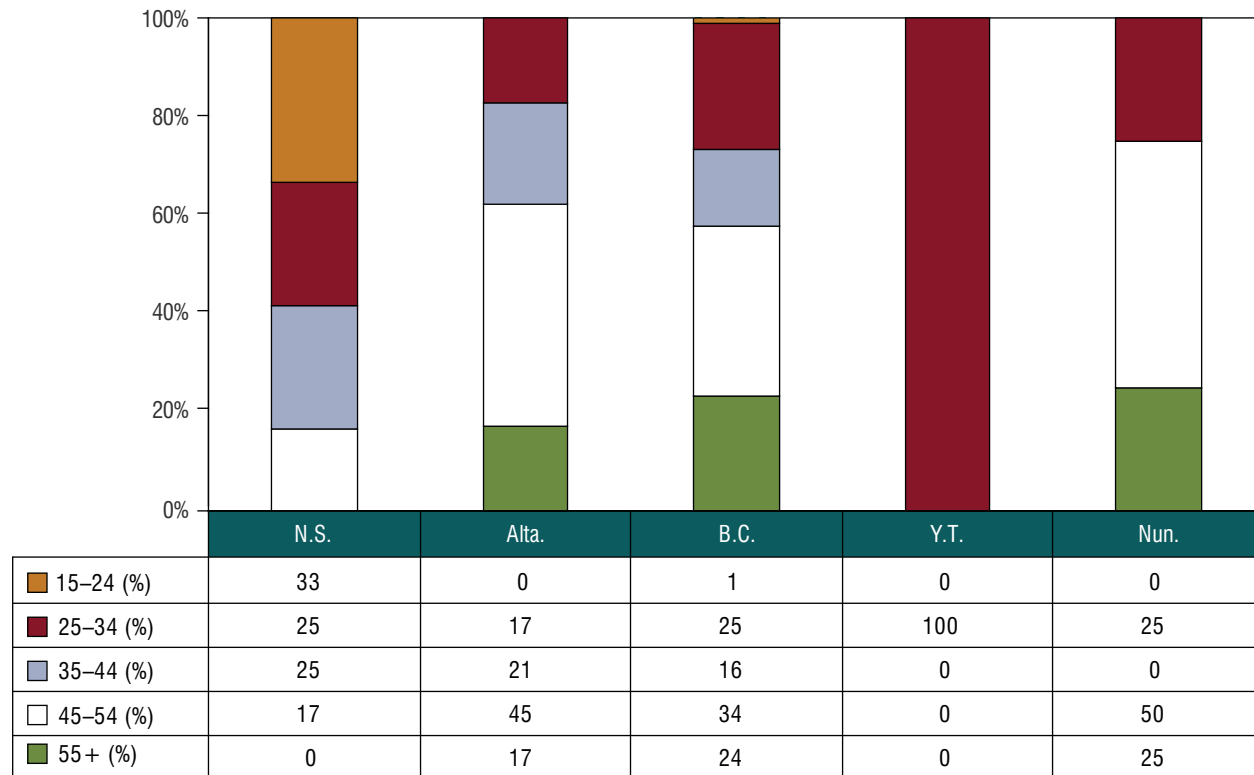


Notes
 Newfoundland and Labrador and P.E.I. were not included as gender information was not available.
 New Brunswick was not included as the Midwives Association of New Brunswick was closed as of 2004.

Source
 Health Personnel Database, Canadian Institute for Health Information.

FIGURE 2

Percentage Distribution of Midwives by 10-Year Age Groups and Selected Provinces/Territories, 2006



Notes

Information on the other provinces/territories was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

Graduate Trends

Number of Graduates of Programs for Midwifery, by School of Graduation, Canada, 1997 to 2006

TABLE 2

School	1997	1998	1999	2000 ¹	2001	2002	2003	2004	2005	2006
Quebec										
Université du Québec à Trois-Rivières	n/a	n/a	n/a	n/a	n/a	n/a	9 ²	10	7	10
Ontario										
Laurentian University ³	6	10	5	1	2	7	5	5	10	15
McMaster University	10	11	11	1	8	18	13	10	16	13
Ryerson University	6	3	12	5	11	8	15	15	9	15
British Columbia										
University of British Columbia	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	7 ⁴	9
CANADA	22	24	28	7	21	33	42	40	49	62

Notes

Data in this table may have been revised due to HPDB system enhancements.

n/a Not applicable.

- 1 There was a decrease in the number of graduates this year due to a change in the length of the program in 1998 from a three-year to a four-year program.
- 2 Program started at the Université du Québec à Trois-Rivières in 1999 and the first class graduated in 2003.
- 3 Laurentian University: 2005 and 2006 data as of May 6 of the given years.
- 4 Program started at the University of British Columbia in 2001 and the first class graduated in 2005.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

Data provided by the Canadian Association of Midwives and provincial associations: Association of Midwives of Newfoundland and Labrador; Prince Edward Island Midwives Association; Association of Nova Scotia Midwives; Ordre des sage-femmes du Québec (1995 to 2003); College of Midwives of Ontario; College of Midwives of Manitoba; Midwives Association of Saskatchewan; Midwifery Health Disciplines—Alberta Health and Wellness; College of Midwives of British Columbia; Midwives Association of Northwest Territories and Nunavut (1997 to 2004); Midwives Association of Northwest Territories (2005 to 2006); and Government of Nunavut, Department of Health and Social Services (2005 to 2006).

Table 2

Individual universities:
 Université du Québec à Trois-Rivières, Laurentian University, McMaster University, Ryerson University and University of British Columbia.

Figure 1

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Figure 2

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

N

Nurse Practitioners

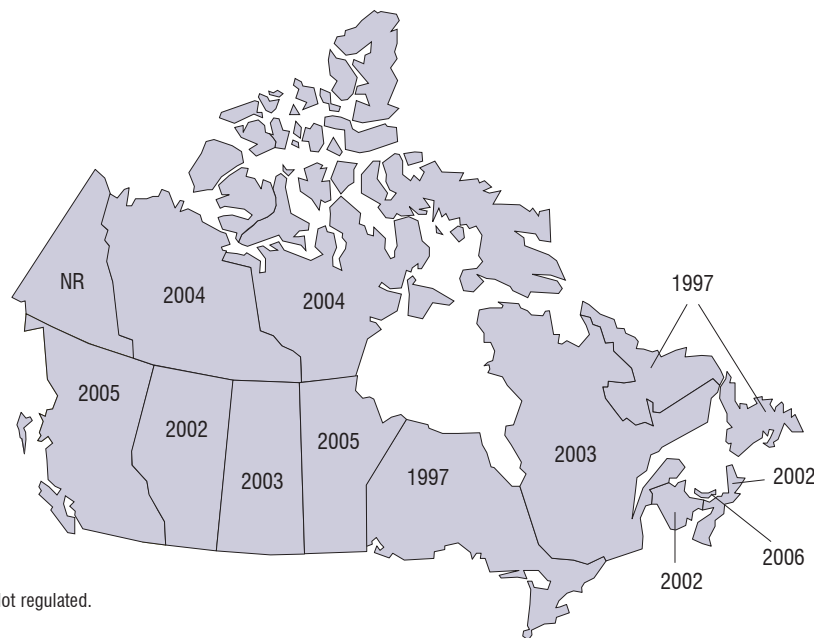
Nurse practitioners (NPs) are registered nurses (RNs) with additional educational preparation and experience who possess and demonstrate the competencies to autonomously diagnose, order and interpret diagnostic tests, prescribe pharmaceuticals and perform specific procedures within the legislated scope of practice.

Practice Setting

Working in collaboration with other health care professionals, nurse practitioners provide care in diverse health settings, from community clinics and health centres to hospitals, medical practices, nursing homes and home-care settings.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for nurse practitioners to register with a provincial/territorial regulatory authority as a condition of practice.



Supply Trends

Number of Active Registered Nurse Practitioners¹
by Province/Territory, Canada, 2003 to 2006

TABLE 1

	2003	2004	2005	2006
Newfoundland and Labrador	57	62	68	91
Prince Edward Island	-	-	-	*
Nova Scotia	29	34	43	73
New Brunswick	6	14	22	32
Quebec	-	-	-	**
Ontario	552	598	653	701
Manitoba	-	-	*	32
Saskatchewan	-	42	75	91
Alberta	76	112	132	190
British Columbia	-	-	**	38
Yukon	-	-	-	-
N.W.T. and Nun.	5	16	22	35
CANADA	725	878	1,026	1,303



Please refer to *Workforce Trends of Registered Nurses in Canada, 2006* for more detailed information.

Notes

- * Value suppressed in accordance with Canadian Institute for Health Information privacy policy; cell value is from 1 to 4.
- ** Value suppressed to ensure confidentiality; cell value is 5 or greater.
- Separate NP licensure did not exist for that registration year.
- 1 Totals in this table include all licensed NPs by December 31 of the given year, regardless of employment status. Data prior to 2003 were not available.

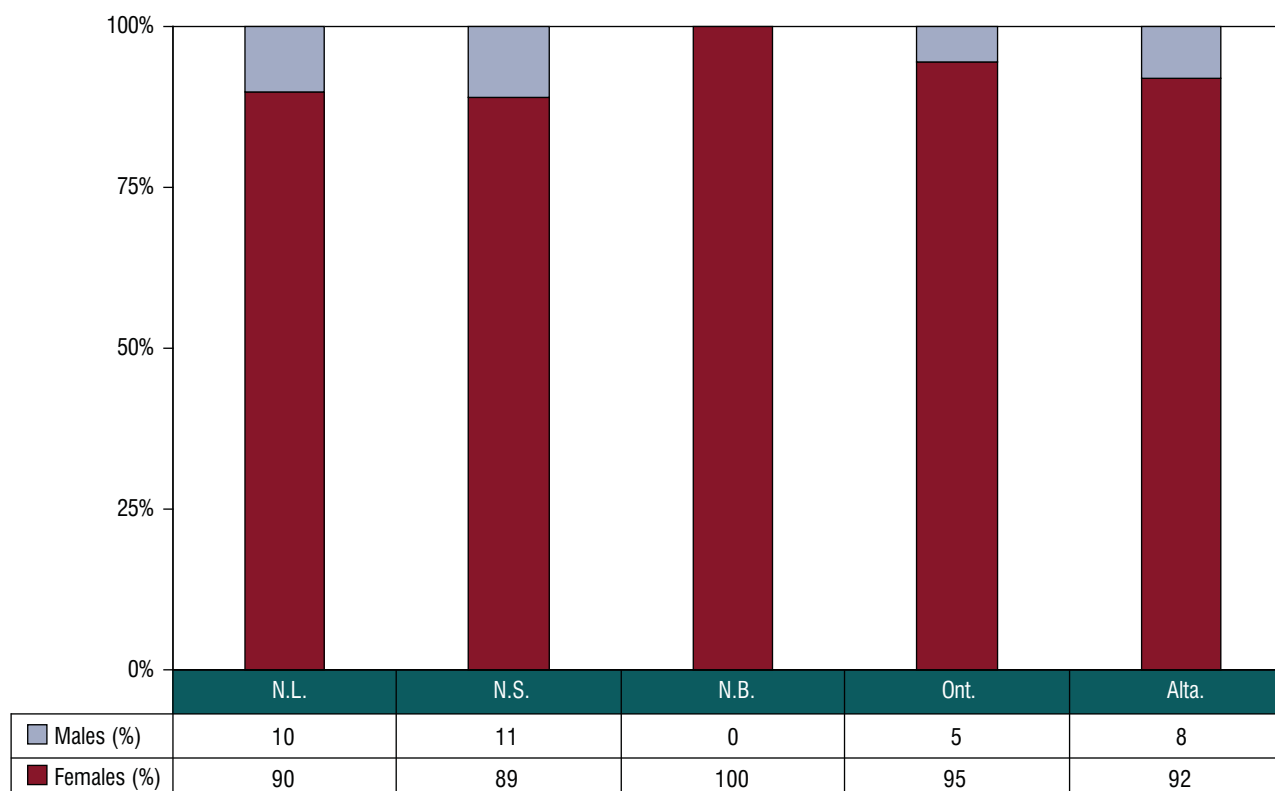
Source

Regulated Nursing Database, Canadian Institute for Health Information, and provincial and territorial RN regulatory authorities.

Demographic Trends

FIGURE 1

Percentage Distribution of Nurse Practitioners by Sex and Selected Provinces, 2006



Notes

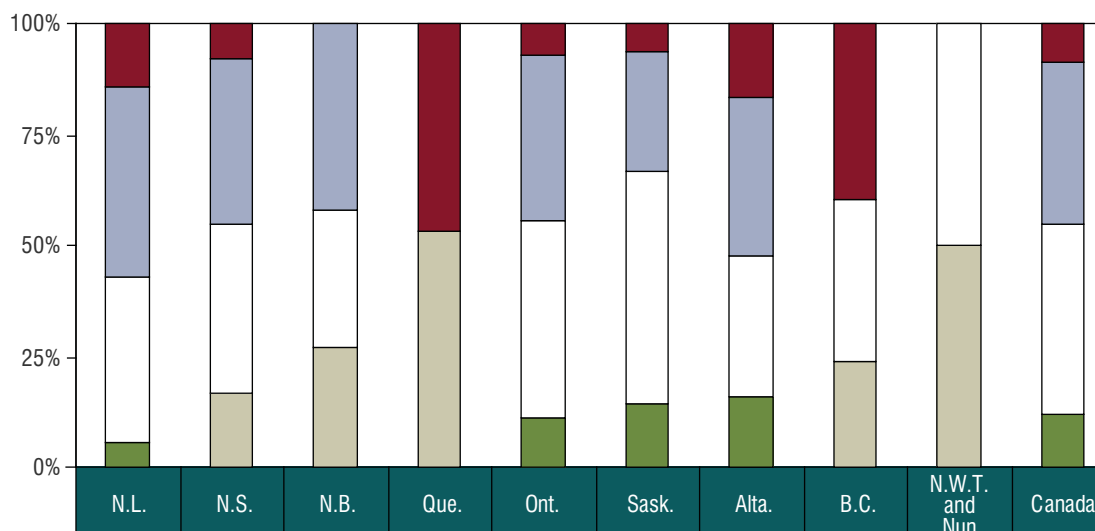
P.E.I., Quebec, Manitoba, B.C. and the Northwest Territories and Nunavut were not included due to value suppression for confidentiality. Saskatchewan was excluded as gender breakdown was not available. The Yukon was not included as separate NP licensure did not exist. Thirty-seven NPs (2 in Newfoundland and Labrador, 6 in New Brunswick and 29 in Alberta) were not included as age was unknown.

Source

Regulated Nursing Database, Canadian Institute for Health Information, and provincial and territorial RN regulatory authorities.

FIGURE 2

Percentage Distribution of Nurse Practitioners by 10-Year Age Groups and Selected Provinces/Territories, 2006



	N.L.	N.S.	N.B.	Que.	Ont.	Sask.	Alta.	B.C.	N.W.T. and Nun.	Canada
15–24 (%)	0	0	0	0	0	0	0	0	0	0
25–34 (%)	15	8	*	47	7	7	17	39	0	9
35–44 (%)	43	37	42	*	38	26	35	*	*	37
45–54 (%)	37	38	31	*	44	53	32	37	50	43
55+ (%)	6	*	*	0	11	14	16	*	*	12
Value Suppressed (%)	Indicates all other categories when cell suppression was applied.									

Notes:

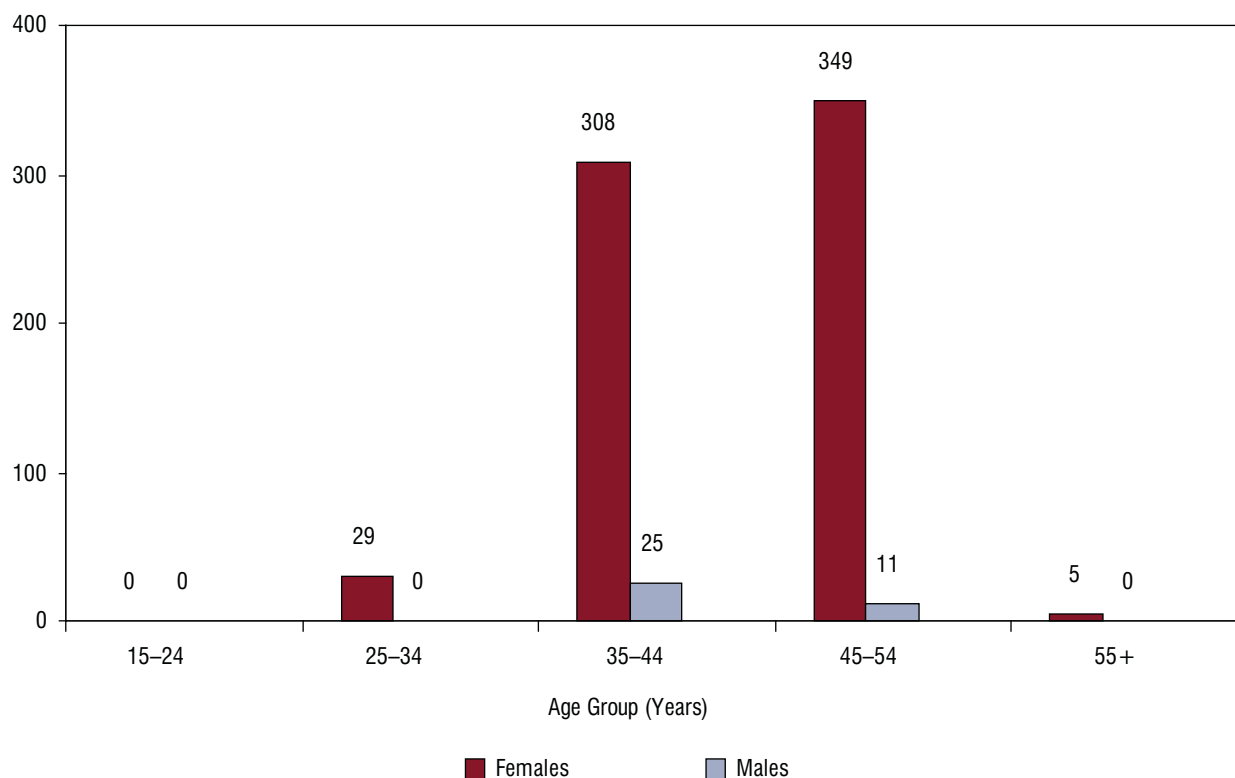
Totals may not sum to 100% due to rounding.
 * Value suppressed in accordance with CIHI privacy policy: cell value is from 1 to 4.
 ** Value suppressed in accordance with CIHI privacy policy: cell value is greater than 5.
 P.E.I. and Manitoba were not included due to value suppression for confidentiality.
 The Yukon was not included as separate NP licensure did not exist.
 Fifty-six NPs (2 in Newfoundland and Labrador, 6 in New Brunswick, 29 in Alberta and 19 in the Northwest Territories) were excluded as age was unknown.

Source

Regulated Nursing Database, Canadian Institute for Health Information, and provincial and territorial RN regulatory authorities.

FIGURE 3

Number of Nurse Practitioners by Sex and 10-Year Age Groups, Selected Provinces/Territories, 2006

**Notes**

Ninety-two NPs were not included as age and gender information was unknown. The Yukon was not included as separate NP licensure did not exist.

Source

Regulated Nursing Database, Canadian Institute for Health Information, and provincial and territorial RN regulatory authorities.

Graduate Trends

Number of Graduates of Nurse Practitioner Programs¹ by Province/Territory, Canada, 2001 to 2006

TABLE 2

	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador	11	9	13	16	4	14
Prince Edward Island	n/a	n/a	n/a	n/a	n/a	n/a
Nova Scotia	*	11	10	20	16	5
New Brunswick	n/a	n/a	8	..	6	**
Quebec	*	41	**	..	8	8
Ontario	45	87	155	46	76	88
Manitoba	n/a	n/a	*	*	9	8
Saskatchewan	n/a	n/a	9	**	9	11
Alberta	11	20	22	55	25	30
British Columbia	n/a	n/a	n/a	..	25	31
Nunavut	..	..	6	0	0	*
CANADA	70	168	231	149	178	204

Notes

.. Information was not available.

n/a Not applicable.

* Value suppressed to ensure confidentiality; cell value is from 1 to 4.

** Value suppressed to ensure confidentiality; cell value is greater than 5.

¹ Information was gathered through a CNA survey. Please note that the information provided in this table should be interpreted with caution, as any variation in the number of graduates of nurse practitioner programs may be caused by differing response rates by year, and thus may not necessarily reflect increases or decreases in the total number of graduates.

Source

Canadian Nursing Association/Canadian Association of Schools of Nursing, National Student and Faculty Survey of Canadian Schools of Nursing.

Sources

Table 1

Regulated Nursing Database, Canadian Institute for Health Information, and provincial and territorial RN regulatory authorities.

Table 2

Canadian Nursing Association/Canadian Association of Schools of Nursing, National Student and Faculty Survey of Canadian Schools of Nursing.

Figure 1

Calculated from data in the regulated Nursing Database, Canadian Institute for Health Information, and provincial and territorial RN regulatory authorities.

Figure 2

Calculated from data in the regulated Nursing Database, Canadian Institute for Health Information, and provincial and territorial RN regulatory authorities.

Figure 3

Calculated from data in the regulated Nursing Database, Canadian Institute for Health Information, and provincial and territorial RN regulatory authorities.

O

Occupational Therapists

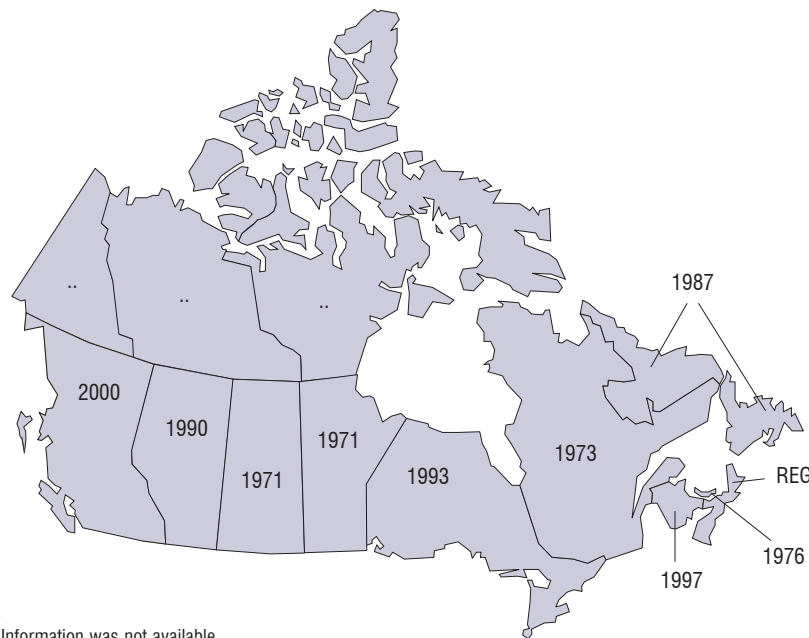
Occupational therapists (OTs) are regulated health care professionals who promote health and well-being by enabling individuals, groups and communities to participate in occupations that give meaning and purpose to their lives. The concept of occupation is wide and refers to “everything that people do during the course of everyday life” such as self-care, play, work, study, volunteerism and leisure.

Practice Setting

Occupational therapists are generally employed in community agencies; health care organizations such as hospitals, chronic care facilities, rehabilitation centres and clinics; schools; social agencies; industry; or are self-employed. Some occupational therapists specialize in working with a specific age group, or with clients who have a specific disability such as arthritis, mental-health problems or spinal-cord injuries.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for occupational therapists to register with a provincial/territorial regulatory authority as a condition of practice.



Notes
.. Information was not available.
REG Regulated in 2006, but initial year of regulation is unknown.



Supply Trends

Number of Occupational Therapists¹
by Province/Territory, Canada, 1997 to 2006

TABLE 1

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador ⁵	108	111	136	137	137	141	145	146	129	140
Prince Edward Island ⁹	27 [†]	26	30	34	35	38	34	35	33	35
Nova Scotia ⁷	185	187	219	214	239	255	276	283	309	317
New Brunswick ⁶	170	169	198	208	204	201	228	239	245	242
Quebec ¹⁰	2,087	2,192	2,348	2,487	2,618	2,749	2,877	3,126	3,288	3,653
Ontario ⁸	2,754	2,854	2,997	3,196	3,375	3,540	3,803	3,905	4,002	3,880
Manitoba ⁴	313	324	357	389	411	428	433	443	456	454
Saskatchewan ¹¹	168	183	184	203	201	202	211	214	217	232
Alberta ²	707	722	787	874	945	1,000	1,126	1,204	1,242	1,403
British Columbia ³	1,040 [†]	1,129 [†]	1,114 [†]	1,234	1,299	1,275	1,309	1,366	1,434	1,410
Y.T., N.W.T. and Nun. ¹²	16	19	19	16	18	22	20	13	13	20
CANADA	7,575	7,916	8,389	8,992	9,482	9,851	10,462	10,984	11,378	11,786

Series Break

Notes

Data in this table may have been revised due to HPDB system enhancements.

† Indicates the presence of voluntary membership data.

1 Data from 1997 to 2005 were from the Health Personnel Database (HPDB), representing active registered occupational therapists. The data include voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation, which outlines how the information within the publication can be most effectively interpreted, analyzed and used.

Please note that the 2006 data were different from previous years as they were from two separate sources: data from HPDB, which represented registered OTs for Quebec; and data from the Occupational Therapist Database, which represented active registered employed OTs as of October 1, 2006, for the rest of provinces and territories. CIHI data will differ from provincial data due to the CIHI collection, processing and reporting methodology. Refer to the Methodological Notes for more detailed information and data quality issues.

2 Alberta: 1997 and 1998 data as of January 31 of the given years; 1999 to 2002 data as of June 30 of the given years; 2003 data as of January 1, 2004; 2004 data as of June 23, 2005; 2005 data as of May 2, 2006.

3 B.C.: 2000 data are from the College of Occupational Therapists of British Columbia, which began registry in July 2000. Data as of June 30, 2001; 2001 data as of June 30, 2002; 2002 data as of February 28, 2003; 2003 and 2004 data as of June 30 of the following years.



Please refer to *Workforce Trends of Occupational Therapists in Canada, 2006* for more detailed information.

- 4 Manitoba: 1997 data as of April 1, 1997; 1998 to 2000 data as of June 1 of the given years; 2001 to 2004 data as of April 1 of the given years; 2005 data as of June 1, 2005.
- 5 Newfoundland and Labrador: 1998 to 2000 data as of February 28 of the given years; 2005 data as of July 14, 2006.
- 6 New Brunswick: 2005 data as of March 6, 2005.
- 7 Nova Scotia: 1998 data as of September 1998; 1999 data as of December 1999; 2000 data as of May 13, 2001; 2001 data as of February 15, 2001; 2002 data as of September 19, 2002; 2003 data as of March 31, 2004.
- 8 Ontario: 1997 to 2000 data as of July 1 of the given years; 2001 and 2002 data as of June 30 of the given years; 2003 and 2004 data as of November 30 of the given years; 2005 data as of April 1, 2005.
- 9 P.E.I.: 1998 and 2000 data as of April 30 of the given years; 2005 data as of July 17, 2006.
- 10 Quebec: Data include registered members only; 1997 to 2004 and 2006 data as of March 31 of the following years; 2005 data as of June 2, 2006.
- 11 Saskatchewan: 1997 to 2002 data as of July 31 of the same year; 2003 data as of May 19, 2004; 2004 data as of March 15, 2005; 2005 data as of October 31, 2005.
- 12 The Yukon, the Northwest Territories and Nunavut: Data include registered members only; 2006 data from the Canadian Association of Occupational Therapists, including only those working and residing in the same territory.

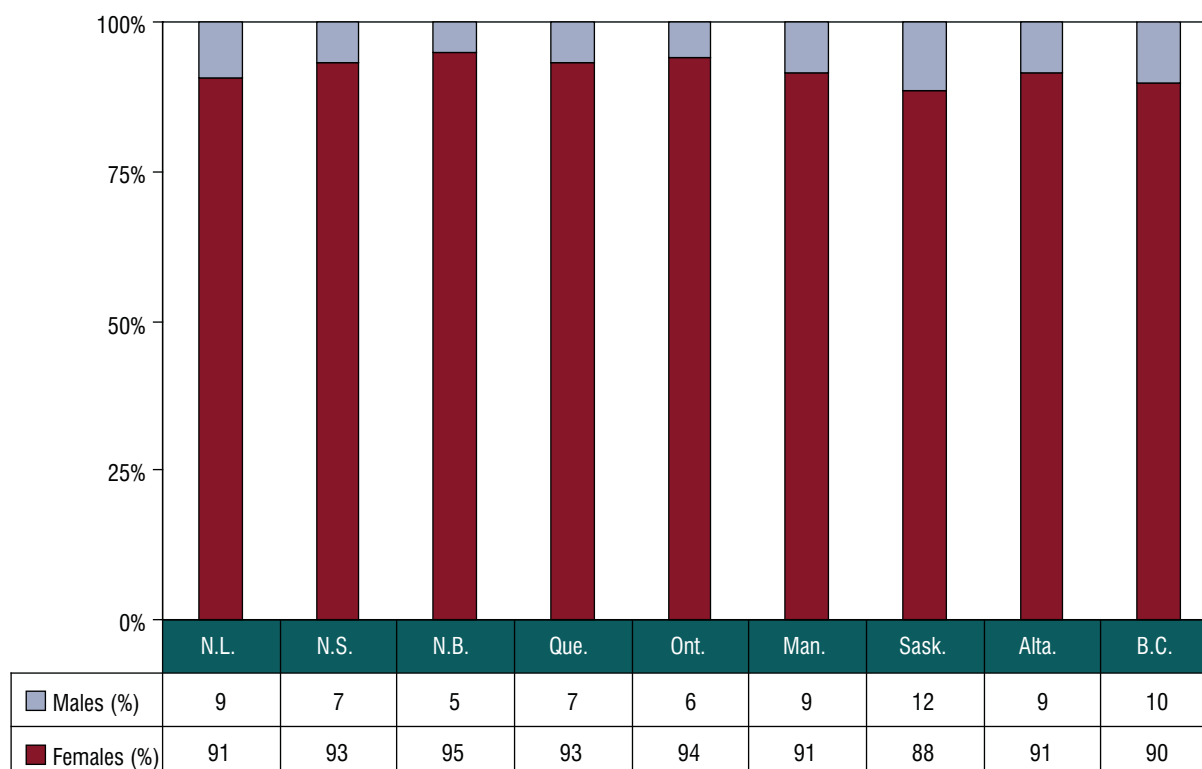
Source

Health Personnel Database, and the Occupational Therapist Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1

Percentage Distribution of Occupational Therapists by Sex and Selected Provinces, 2006



Notes

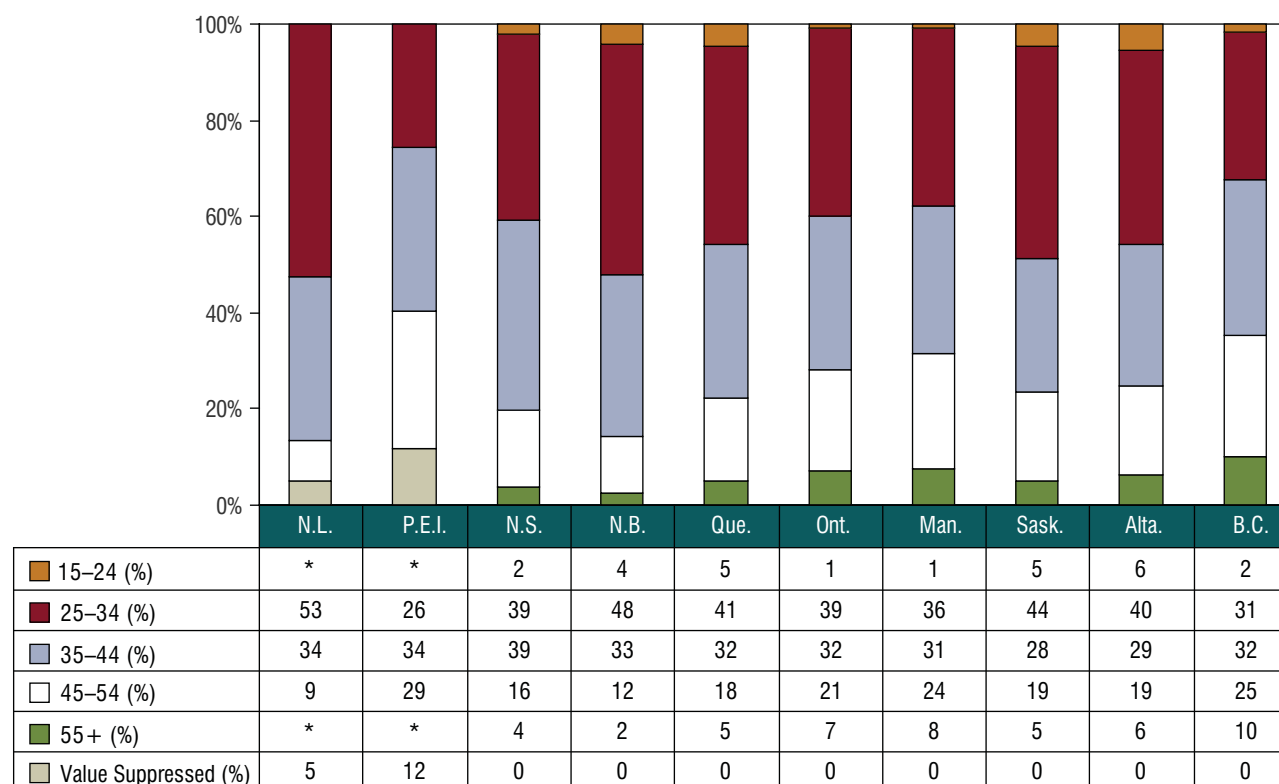
P.E.I., the Yukon, the Northwest Territories and Nunavut not included due to value suppression for confidentiality. Quebec data from HPDB represent registered OTs. Two OTs in Ontario were not included as gender information was unknown. Aggregate totals for the gender of OTs in Manitoba were provided by Manitoba Health.

Sources

Quebec data from the Health Personnel Database and other data from the Occupational Therapist Database, Canadian Institute for Health Information.

FIGURE 2

Percentage Distribution of Occupational Therapists by 10-Year Age Groups and Selected Provinces, 2006

**Note**

Totals may not sum to 100% due to rounding.

* Value suppressed in accordance with CIHI privacy policy: cell value is from 1 to 4.

** Value suppressed in accordance with CIHI privacy policy: cell value is greater than 5.

The Northwest Territories, the Yukon and Nunavut were not included due to value suppression to ensure confidentiality.

Twelve OTs (1 in Newfoundland and Labrador, 2 in Nova Scotia, 5 in Ontario and 4 in Manitoba) were not included as age information was unknown.

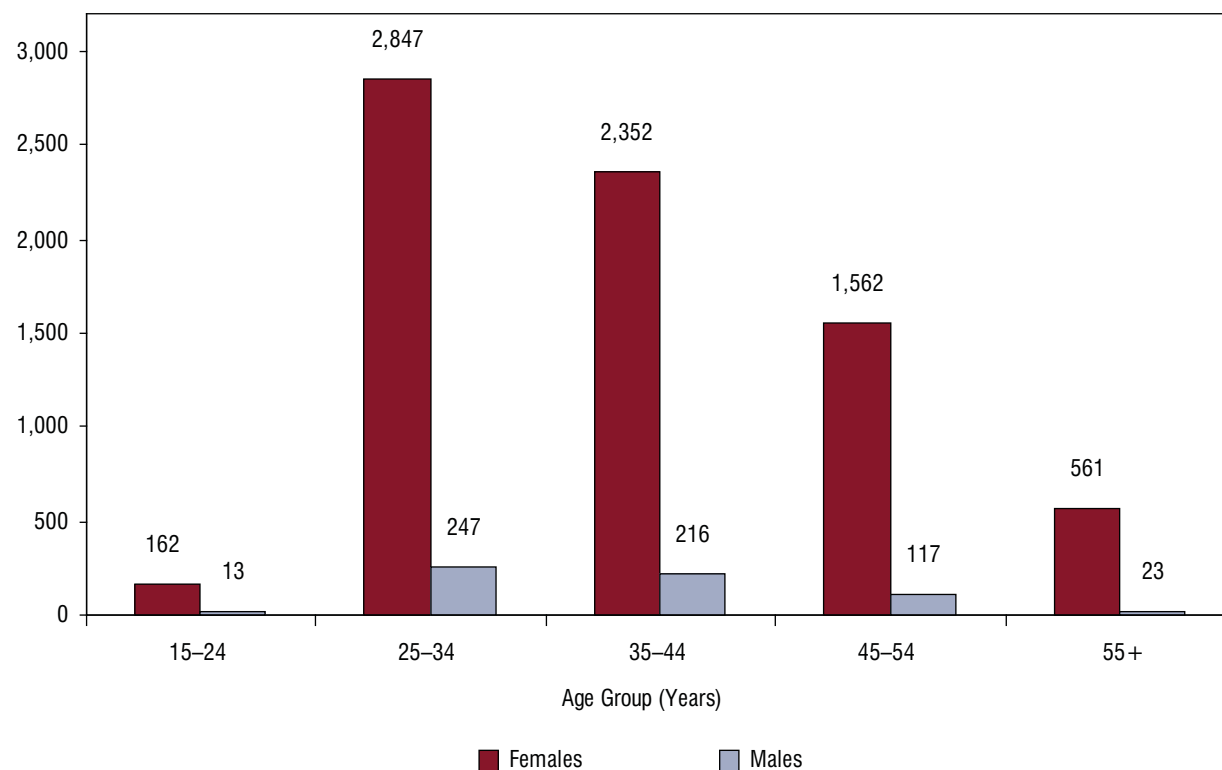
Quebec data from HPDB represent registered OTs. Aggregate totals for age groups were provided by Manitoba Health for OTs in Manitoba.

Source

Quebec data from the Health Personnel Database and other data from the Occupational Therapist Database, Canadian Institute for Health Information.

FIGURE 3

Number of Occupational Therapists by Sex and 10-Year Age Groups, Selected Provinces/Territories, 2006

**Note**

Quebec is not included as combined information for sex and age was not available; 9 OTs in Manitoba were not included as gender information was unknown; 14 OTs were not included as gender and/or age information was unknown.

Source

Occupational Therapist Database, Canadian Institute for Health Information.

Graduate Trends

Number of Graduates of Accredited Occupational Therapy Programs by School¹ of Graduation, Canada, 1997 to 2006

TABLE 2

School	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nova Scotia										
Dalhousie University ⁴	36	36	44	50	50	47	45	42	46	54
Quebec										
McGill University ⁶	69	54	56	47	48	46	44	42	40	57
Université de Montréal	75	64	69	65	68	..	87	79	87	92
Université Laval	56	12 ²	51	53	69	65	49	57	53	54
Ontario										
McMaster University	64	58	57	59	57	50	52	47	48	49
Queen's University ⁷	36	35	37	36	34	42	46	39	35	93
University of Ottawa ⁵	20	33	21	33	28	42	47	21	32	32
University of Toronto	104	63	63	62	67	59	38	52	64	74
University of Western Ontario	43	44	45	43	44	45	44	48	51	50
Manitoba										
University of Manitoba	29	29	31	30	27	30	28	35	22	38
Alberta										
University of Alberta ³	77	70	76	69	78	73	144	91	82	83
British Columbia										
University of British Columbia	31	34	39	37	36	..	32	37	34	37
CANADA	640	532	589	584	606	499	656	590	594	713

Notes

Data in this table may have been revised due to HPDB system enhancements.

.. Information not available.

1 This is a comprehensive list of schools offering occupational therapy programs in 2006. Data include both bachelor's and master's graduates unless otherwise specified.

2 First graduating class from the new 3.5-year program.

3 University of Alberta: Graduated a double cohort in 2003.

4 Dalhousie University: 2005 and 2006 data as of December 1 of the given years.

5 University of Ottawa: 2005 and 2006 data as of May 31, 2007; data include only bachelor's graduates.

6 McGill University: Data include only bachelor's graduates.

7 Queen's University had a double cohort in 2006 (both a master's and bachelor's class); therefore, there was a much larger number of graduates that year. Data prior to 2006 included only bachelor's graduates.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

1997 to 2005 data supplied by provincial associations: Newfoundland and Labrador Occupational Therapy Board, Prince Edward Island Occupational Therapist Registration Board, College of Occupational Therapists of Nova Scotia, New Brunswick Association of Occupational Therapists, Ordre des ergothérapeutes du Québec, College of Occupational Therapists of Ontario, Association of Occupational Therapists of Manitoba, Saskatchewan Society of Occupational Therapists, Alberta Association of Registered Occupational Therapists, College of Occupational Therapists of British Columbia, Association of Yukon Occupational Therapists and Northwest Territories/Nunavut Occupational Therapy Association.

2006 data supplied by the Occupational Therapist Database, Canadian Institute for Health Information and the Ordre des ergothérapeutes du Québec.

Table 2

Data provided by individual universities: Dalhousie University, McGill University, Université de Montréal, Université Laval, University of Ottawa, Queen's University, University of Toronto, McMaster University, University of Western Ontario, University of Manitoba, University of Alberta and University of British Columbia.

Figure 1

Calculated from data in the Health Personnel Database and the Occupational Therapist Database, Canadian Institute for Health Information.

Figure 2

Calculated from data in the Health Personnel Database and the Occupational Therapist Database, Canadian Institute for Health Information.

Figure 3

Calculated from data in the Health Personnel Database and the Occupational Therapist Database, Canadian Institute for Health Information.



Optometrists

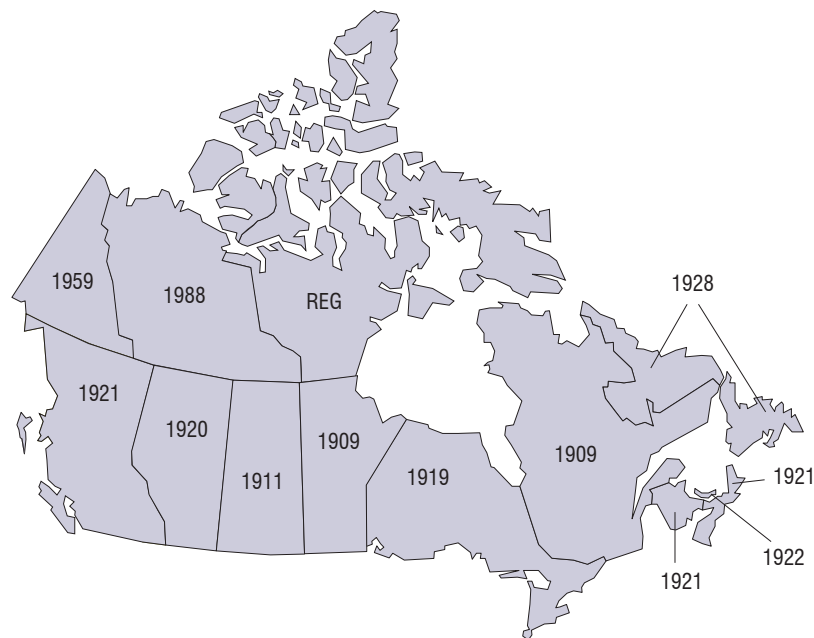
Optometrists frequently serve as the entry point into the eye health care system. They examine patients' eyes, diagnose vision problems and prescribe treatment to conserve, improve and correct vision and other ocular disorders.

Practice Setting

Optometrists work in private practice, in clinics and in community health centres.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for optometrists to register with a provincial/territorial regulatory authority as a condition of practice.



Notes
REG Regulated but initial year of regulation is unknown.
 In the territories, the territorial governments register and license optometrists.



Supply Trends

Number of Active Registered Optometrists
by Province/Territory, Canada, 1997 to 2006

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador⁸	36	35	33	33	35	36	36	39	41	42
Prince Edward Island¹¹	10	11	13	11	12 ¹	14	15	15	18	20
Nova Scotia⁹	68	69	77	70	74	78	82	83	86	92 ¹³
New Brunswick¹²	88 ¹	89	92	92	94	94	99	99	98	102 ¹⁴
Quebec⁴	1,057	1,176	1,186	1,198	1,163 ¹	1,198	1,181	1,199	1,249 ¹³	1,286
Ontario	1,050	1,082	1,130	1,178	1,218	1,258	1,366	1,417	1,386	1,505 ¹⁰
Manitoba⁷	78	80	83	89	92	89	91	97	95	105 ¹⁴
Saskatchewan	108	111	111	109	109 ¹	107	108	113	117	117
Alberta²	261	273	303	310	325	339	360	371	384 ¹³	423 ¹⁴
British Columbia⁶	446	465	476	489	494	485	479	502	521	541
Yukon³	5	4	4	4	4	5	4 ¹³	6 ¹³	4 ¹³	5
Northwest Territories⁵	2	2	1	1	0	0	0	0	0	0
Nunavut	..	..	..	..	..	..	..	..	..	..
CANADA	3,209	3,397	3,509	3,584	3,620	3,703	3,821	3,941	3,999	4,238

Notes

Data in this table may have been revised due to HPDB system enhancements.

.. Information was not available.

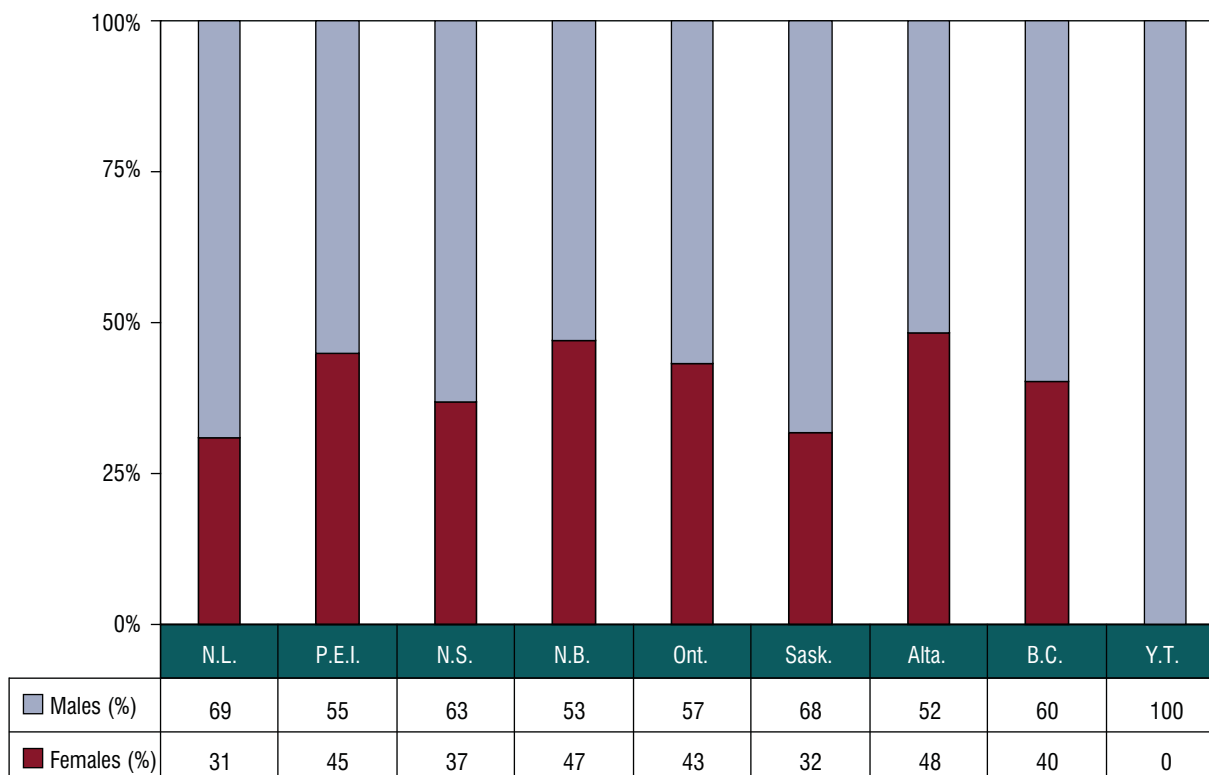
- 1 CIHI estimate. Please review Methodological Notes for more comprehensive information regarding estimation.
- 2 Alberta: 2001 data as of September 5; 2002 data as of August 28; 2003 data as of April 21, 2004; 2005 data as of April 27, 2006; 2006 data as of March 7, 2007.
- 3 Yukon: 1997 to 2000 and 2004 data as of March of the following years; 2001 data as of February 14, 2002; 2002 data as of November 14, 2003; 2003 data as of April 14, 2004.
- 4 Quebec: 2002 data as of November 14, 2003; 2003 data as of March 31, 2004; 2004 data as of February 8, 2005; 2005 data as of March 31, 2006.
- 5 In the Northwest Territories ophthalmologists are responsible for the majority of eye care. Much of primary eye care is delegated by the ophthalmologist to ophthalmic medical assistants who, with supervision, provide refraction services and prescribe corrective lenses/eyewear. Unlike optometrists, ophthalmologists are funded and supported by the territorial health plan.
- 6 B.C.: Represents registered optometrists; 2002 data as of October 31, 2002; 2006 data as of May 5, 2007.
- 7 Manitoba: 1997 to 2005 data as of June of the same year.
- 8 Newfoundland and Labrador: 2005 data as of July 14, 2006; 2006 data as of February 22, 2007.
- 9 Nova Scotia: 2005 data as of December 30, 2005; 2006 data as of February 6, 2007.
- 10 Ontario: 2006 data as of January 4, 2007.
- 11 P.E.I.: 2005 data as of July 17, 2006; 2006 data as of March 15, 2007.
- 12 New Brunswick: 2003 data as of June 30, 2004; 2004 data as of February 10, 2005; 2005 data as of May 1, 2006.
- 13 Represents registered optometrists.
- 14 Represents employed active registered optometrists.

Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1 Percentage Distribution of Optometrists by Sex and Selected Provinces/Territories, 2006



Notes

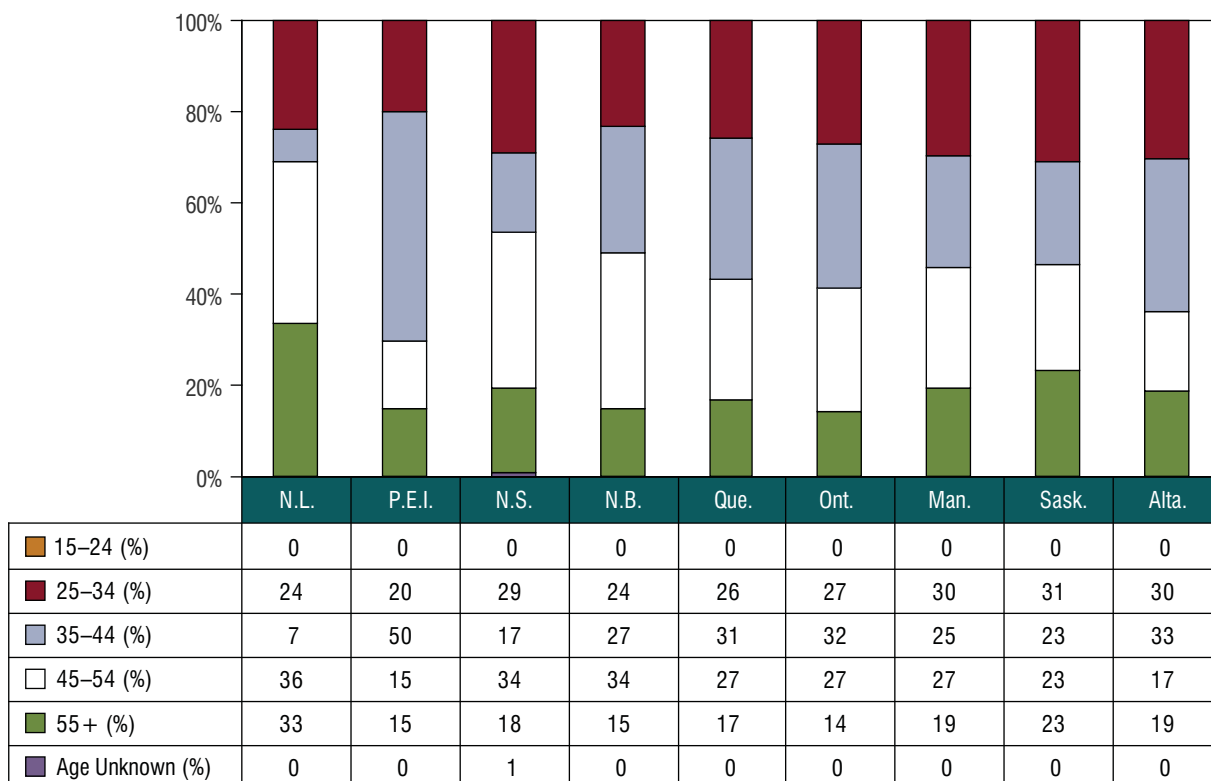
Quebec and Manitoba were not included as gender information was not available. Excludes 97 B.C. optometrists whose sex information was unknown. Nunavut information was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

FIGURE 2

Percentage Distribution of Optometrists by 10-Year Age Groups and Selected Provinces, 2006



Notes

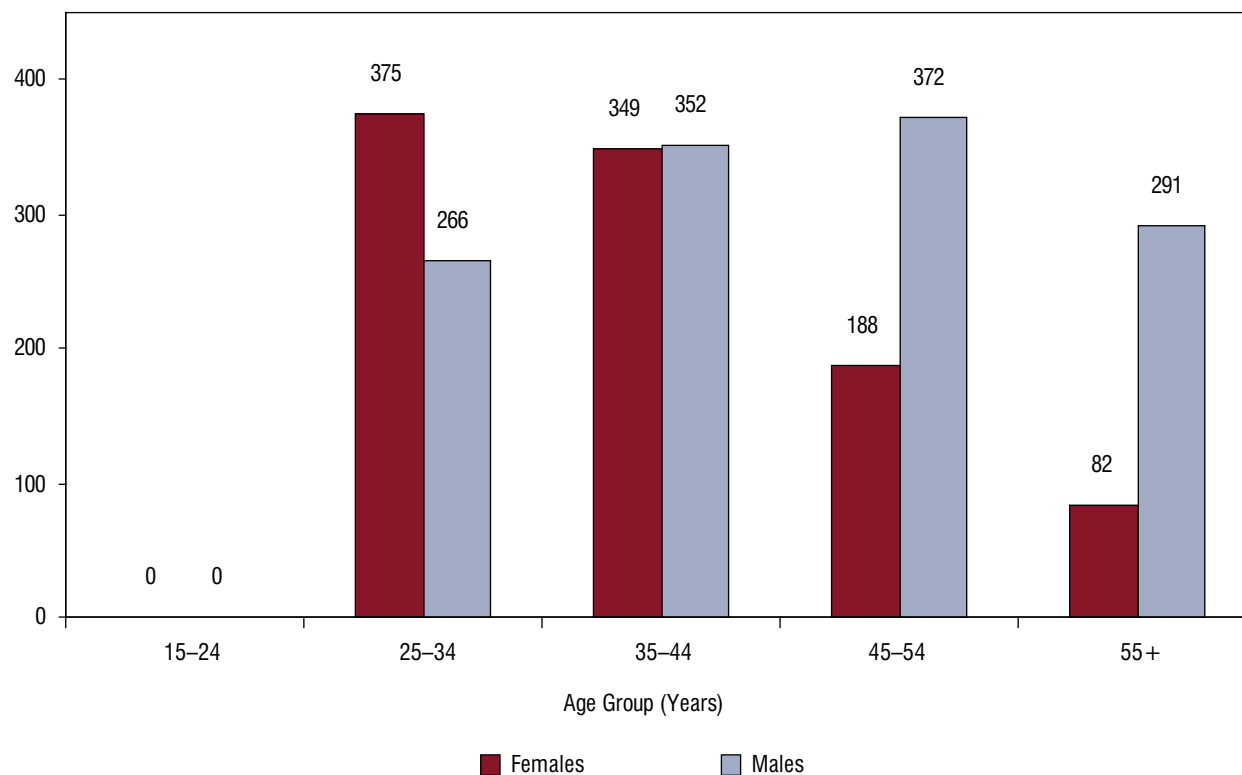
Totals may not sum to 100% due to rounding. B.C. and the Yukon were not included as age information was not available. Nunavut information was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

FIGURE 3

Number of Optometrists by Sex and 10-Year Age Groups, Selected Provinces, 2006



Note
 B.C., Manitoba, the Northwest Territories, Quebec, Nunavut and the Yukon were not included as information was not available.

Source
 Health Personnel Database, Canadian Institute for Health Information.

Graduate Trends

TABLE 2

Number of Graduates of Optometry Programs by School of Graduation, Canada, 1997 to 2006

School	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Université de Montréal										
OD ¹	36	39	39	39	42	39	0 ²	44	43	37
MSc	1	2	4	1	5	6	3	8	12	5
University of Waterloo										
OD ¹	58	61	59	56	64	55	59	56	60	63
MSc	1	5	6	7	4	2	1	7	9	10
PhD	1	2	0	1	1	1	2	0	2	3
CANADA	97	109	108	104	116	103	65	115	126	118

Notes

Data in this table may have been revised due to HPDB system enhancements.

¹ OD means Doctor of Optometry.

² The program length was extended in 2003; therefore, there were no graduates in 2003.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

1997 to 2006 data supplied by provincial organizations: Newfoundland and Labrador Optometric Board; College of Optometrists of Prince Edward Island; Nova Scotia Association of Optometrists; New Brunswick Association of Optometrists; Association des optométristes du Québec (1997); Ordre des optométristes du Québec (1998 to 2006); Ontario Association of Optometrists (1997 to 2002); College of Optometrists of Ontario (2003 to 2006); Manitoba Association of Optometrists; Saskatchewan Association of Optometrists (except 2002); Alberta College of Optometrists; Board of Examiners in Optometry—British Columbia; Government of Yukon Territory, Department of Community Services; and Government of the Northwest Territories, Department of Health and Social Services.

2002 New Brunswick and Saskatchewan data from the Canadian Association of Optometrists.

Table 2

1997: Data provided by Statistics Canada.

1998 to 2006 individual universities and colleges: Université de Montréal and University of Waterloo.

Figure 1

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Figure 2

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Figure 3

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Pharmacists are qualified health professionals who help people to make the best use of their medications and to safely achieve desired health outcomes at home, in the community and in hospitals. Their professional practice emphasizes drug therapy management of diseases and symptoms and the promotion of wellness and disease prevention by incorporating best-care principles that are patient centred, outcome oriented and evidence based. Pharmacists research and work collaboratively with other health care providers to deliver optimal health care solutions through effective use of health care products and services.

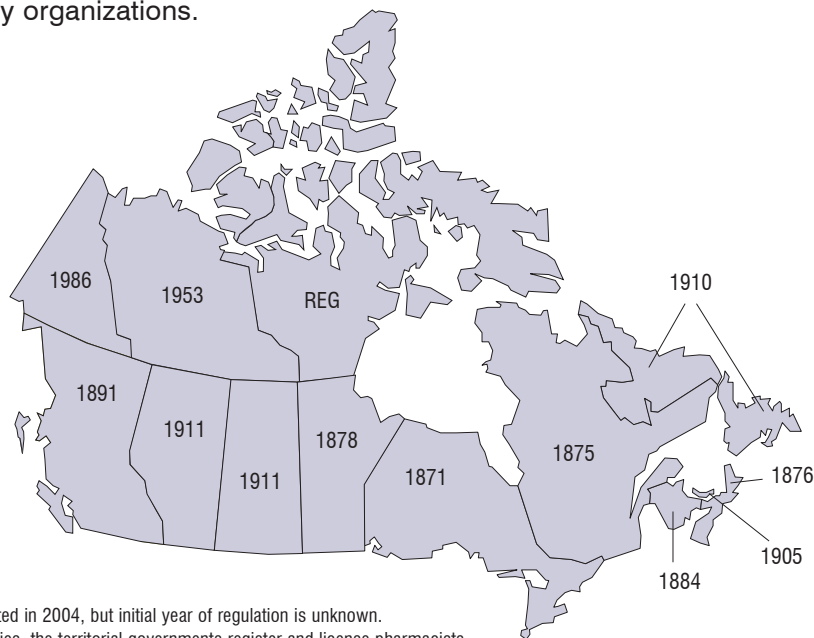
P Pharmacists

Practice Setting

Pharmacists generally work as community, institutional or industrial pharmacists. Community pharmacists own and/or practise in community pharmacies, while institutional pharmacists practise in hospitals, long-term care facilities and other such health care institutions. Both work closely with other health care professionals. Industrial pharmacists participate in the research, development, manufacturing and sales of pharmaceutical products. There are also pharmacists found in a variety of other practice settings such as academics, government and regulatory organizations.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for pharmacists to register with a provincial/territorial regulatory authority as a condition of practice.



Notes
REG Regulated in 2004, but initial year of regulation is unknown.
In the territories, the territorial governments register and license pharmacists.



Supply Trends

Number of Pharmacists¹ by Province/Territory, Canada, 1997 to 2006

TABLE

1

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006 ²
Newfoundland and Labrador	489	491	534	514	526	540	572	585	585	556
Prince Edward Island	113	109	112	119	131	138	149	152	160	141
Nova Scotia	818	907	932	940	931	988	1,011	1,014	1,065	788
New Brunswick	533	539	564	570	554	551	602	613	625	648
Quebec	5,148	5,096	5,457	5,670	6,141	6,238	6,323	6,615	6,790	7,057
Ontario	7,928	8,070	8,238	8,490	8,790	9,023	9,817	10,068	10,395	9,309
Manitoba	906	875	940	899	990	1,086	1,092	1,154	1,155	1,152
Saskatchewan	1,080	1,081	1,100	1,108	1,129	1,080	1,142	1,170	1,177	1,027
Alberta	2,686	2,784	2,816	2,904	2,990	3,086	3,185	3,333	3,504	3,197
British Columbia	3,032	3,147	3,223	3,248	3,406	3,544	3,672	3,766	3,941	3,151
Yukon	30	20	22	26	27	31	27	34	33	29
Northwest Territories	36	45	47	25	23	36	20	23	25	22
Nunavut	..	..	..	5	5	5	..	10	16	17
CANADA	22,799	23,164	23,985	24,518	25,643	26,346	27,612	28,537	29,471	27,094

Series Break



Please refer to *Workforce Trends of Pharmacists for Selected Provinces and Territories in Canada, 2006* for more detailed information.

Notes

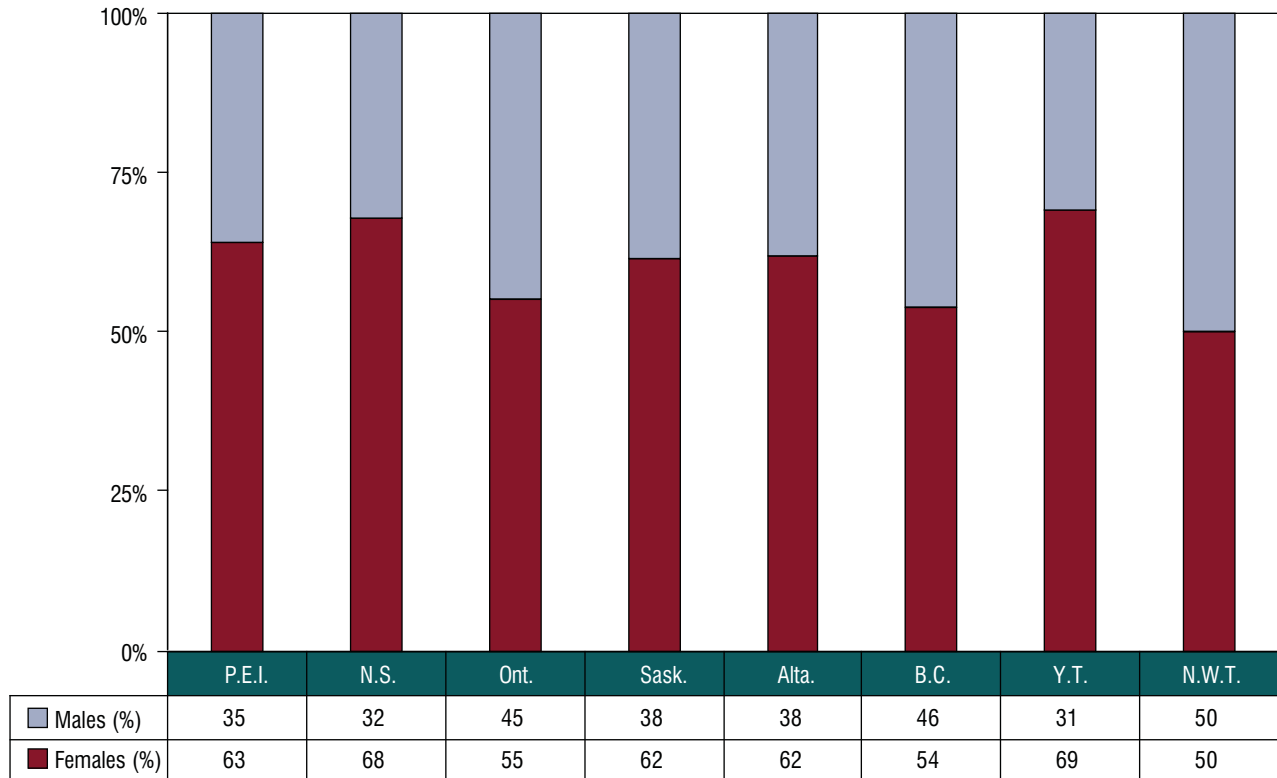
- .. Information was not available.
- 1 Data from 1997 to 2005 were as of January of the following years, representing active registered pharmacists from the National Association of Pharmacy Regulatory Authorities (NAPRA).
- 2 Please note that the 2006 data were different from previous years as they were from two separate sources: data from NAPRA, which represented active registered pharmacists as of January 1, 2007 for Manitoba, New Brunswick, Newfoundland and Labrador, Nunavut and Quebec; and data from the Pharmacist Database, Canadian Institute for Health Information, which represented active registered employed pharmacists, as of October 1, 2006, for P.E.I., Nova Scotia, Ontario, Saskatchewan, Alberta, British Columbia, the Yukon and the Northwest Territories. CIHI data will differ from provincial data due to the CIHI collection, processing and reporting methodology. Refer to the Methodological Notes for more detailed information and data quality issues.

Source

Health Personnel Database, Pharmacist Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1 Percentage Distribution of Pharmacists by Sex and Selected Provinces/Territories, 2006

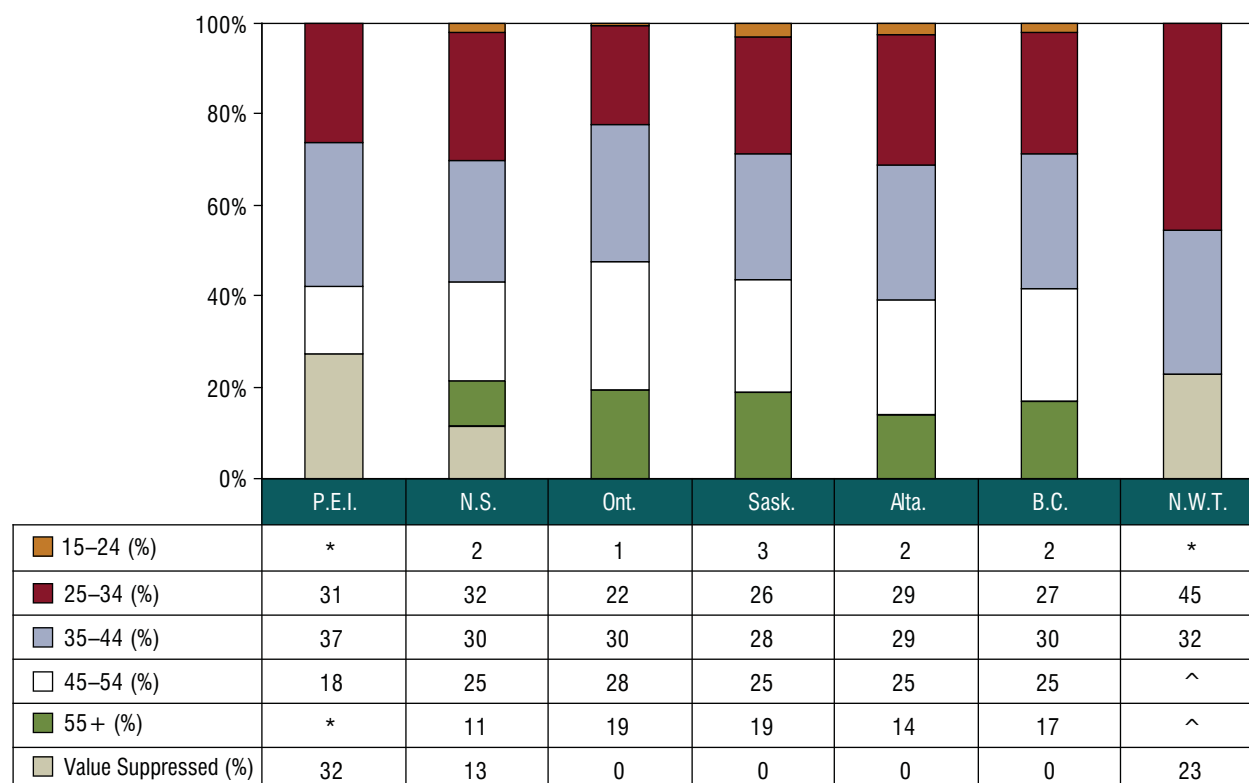


Notes
 Totals may not sum to 100% due to rounding. Newfoundland and Labrador, New Brunswick, Quebec, Manitoba and Nunavut were not included as gender information was not available. Of P.E.I. pharmacists, 1% did not report gender information.

Source
 Pharmacist Database, Canadian Institute for Health Information.

FIGURE 2

Percentage Distribution of Pharmacists by 10-Year Age Groups and Selected Provinces/Territories, 2006

**Notes**

Totals may not sum to 100% due to rounding.

* Value suppressed in accordance with CIHI privacy policy: cell value is from 1 to 4.

** Value suppressed in accordance with CIHI privacy policy: cell value is greater than 5.

The Yukon was not included as age information was unknown.

Newfoundland and Labrador, New Brunswick, Quebec, Manitoba and Nunavut were not included as age information was not available.

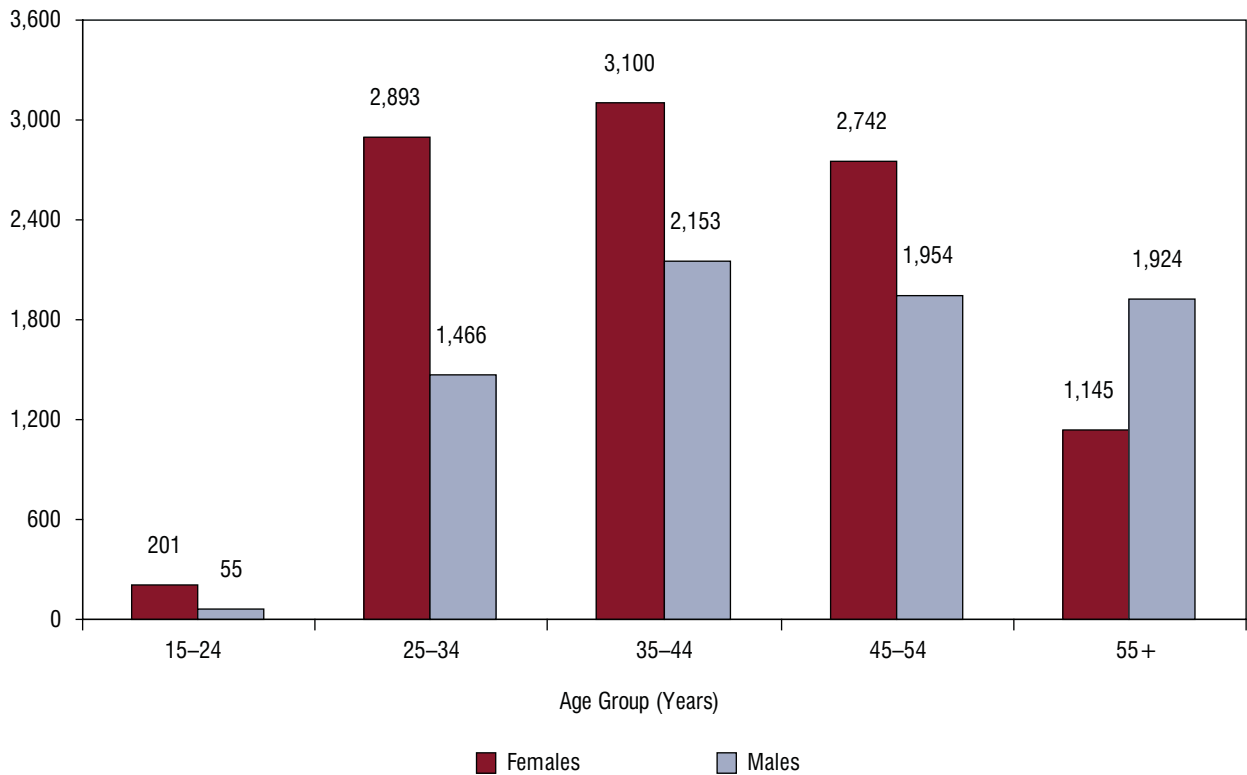
^ Northwest Territories data for those 35 years and older were combined due to small cell sizes.

Source

Pharmacist Database, Canadian Institute for Health Information.

FIGURE 3

Number of Pharmacists by Sex and 10-Year Age Groups, Selected Provinces/Territories, 2006



Notes

Newfoundland and Labrador, New Brunswick, Quebec, Manitoba and Nunavut not included as information was not available. The Yukon was not included as age information was unknown. Two pharmacists in P.E.I. were not included as gender information was unknown.

Source

Pharmacist Database, Canadian Institute for Health Information.

Graduate Trends

Number of Graduates of Pharmacy Schools¹ by School of Graduation and Sex, Canada, 1997 to 2006

TABLE 2

School	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador										
Memorial University of Newfoundland	34	31	36	38	40	35	32	37	35	36
Males	17	13	21	..	..	..	9	7	13	8
Females	17	18	15	..	..	..	23	30	22	28
Nova Scotia										
Dalhousie University ⁵	69	62	62	66	64	62	50	59	88	83
Males	19	21	20	..	19	15	10	14	18	21
Females	50	41	42	..	45	47	40	45	70	62
Quebec										
Université Laval	96	114	120	103	99	97	112	135	138	130
Males	33	37	37	28	28	20	34	26	39	28
Females	63	77	83	75	71	77	78	109	99	102
Université de Montréal ⁶	107	115	123	149	107	94	120	129	185	241
Males	37	39	45	..	..	..	27	23	55	64
Females	70	76	78	..	..	..	93	93	130	177
Ontario										
University of Toronto ³	0	129	109	122	111	117	119	132	165	166
Males	0	38	33	..	..	..	43	95	..	..
Females	0	91	76	..	..	..	76	36	..	..
Manitoba										
University of Manitoba	49	49	46	42	47	48	47	43	45	49
Males	27	20	16	..	..	15	10	18	14	9
Females	22	29	30	..	..	33	37	25	31	40

(continued)

Notes

Data in this table may have been revised due to HPDB system enhancements.

.. Information was not available.

- 1 This is a comprehensive list of schools offering pharmacy programs.
- 2 University of Alberta: 1997 to 2004 data included graduates from master's programs; 2005 and 2006 data include only Bachelor of Pharmacy graduates.
- 3 University of Toronto: There was no graduating class in 1997 due to a change in program length.
- 4 University of British Columbia: 2001 to 2002 data from the College of Pharmacists of British Columbia; in 2005, there was an increase in graduates due to an increase in enrolment numbers; included graduates from the master's degree program.
- 5 Dalhousie University: In 2005 and 2006 there was an increase in the number of graduates due to an increase in annual enrolment.
- 6 Université de Montréal: 2005 and 2006 data include bachelor's, master's and PhD graduates.

Source

Health Personnel Database, Canadian Institute for Health Information.

TABLE 2

Number of Graduates of Pharmacy Schools¹ by School of Graduation and Sex, Canada, 1997 to 2006 (cont'd)

School	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Saskatchewan										
University of Saskatchewan	78	74	71	74	75	65	..	72	80	73
Males	23	21	27	..	..	..	..	8	25	15
Females	55	53	44	..	..	..	..	64	55	58
Alberta										
University of Alberta ²	98	96	99	104	104	95	98	93	97	100
Males	31	35	28	..	..	..	34	20	28	25
Females	67	61	71	..	..	..	64	73	69	75
British Columbia										
University of British Columbia ⁴	119	122	130	135	123	129	127	121	145	136
Males	41	50	49	44	40	43	52	28	2	4
Females	78	72	81	91	83	86	75	93	143	132
CANADA	650	792	796	833	770	742	705	821	978	1,014

Notes

Data in this table may have been revised due to HPDB system enhancements.

.. Information was not available.

- ¹ This is a comprehensive list of schools offering pharmacy programs.
- ² University of Alberta: 1997 to 2004 data included graduates from master's programs; 2005 and 2006 data include only Bachelor of Pharmacy graduates.
- ³ University of Toronto: There was no graduating class in 1997 due to a change in program length.
- ⁴ University of British Columbia: 2001 to 2002 data from the College of Pharmacists of British Columbia; in 2005, there was an increase in graduates due to an increase in enrolment numbers; included graduates from the master's degree program.
- ⁵ Dalhousie University: In 2005 and 2006 there was an increase in the number of graduates due to an increase in annual enrolment.
- ⁶ Université de Montréal: 2005 and 2006 data include bachelor's, master's and PhD graduates.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

National Association of Pharmacy Regulatory Authorities (NAPRA) and the Pharmacists Database (2006), Canadian Institute for Health Information.

Table 2

1997 to 2004: the Pharmacy Examining Board of Canada; 2005 and 2006 individual colleges and universities: Memorial University of Newfoundland, Dalhousie University, Université Laval, Université de Montréal, University of Toronto, University of Manitoba, University of Saskatchewan, University of Alberta and University of British Columbia.

Figure 1

Calculated from data in the Pharmacist Database, Canadian Institute for Health Information.

Figure 2

Calculated from data in the Pharmacist Database, Canadian Institute for Health Information.

Figure 3

Calculated from data in the Pharmacist Database, Canadian Institute for Health Information.

Physicians prevent, diagnose and treat human illness, and assist in rehabilitation after the onset of disease or injury. Physicians obtain medical history from patients, examine, diagnose, order diagnostic procedures, interpret results and consult with other medical practitioners to evaluate patients' health, administer medications and other treatments, including surgery, and advise patients on their health and health care.

P

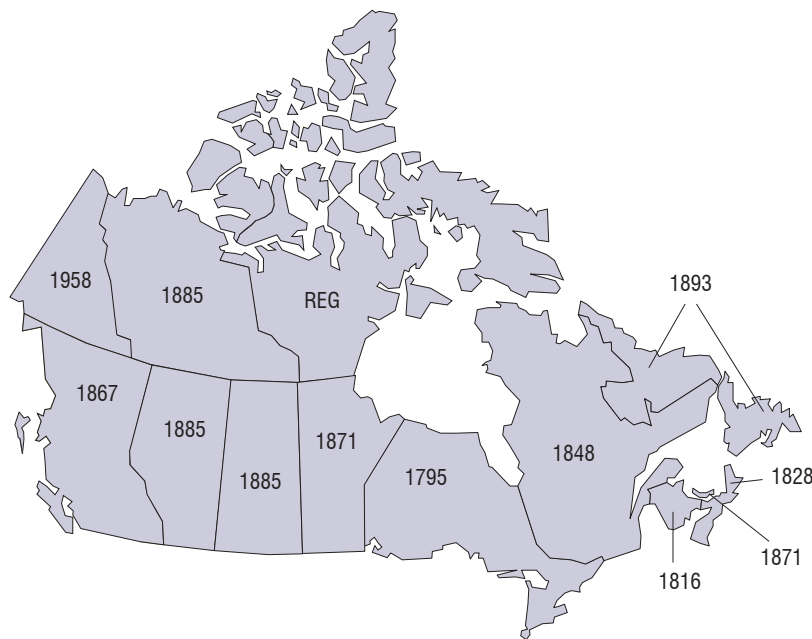
Physicians

Practice Setting

Physicians work in a broad range of settings, including community-based clinics and doctors' offices, hospitals and other institutional health care settings such as nursing homes, laboratories, universities and government.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for physicians to register with a provincial/territorial regulatory authority as a condition of practice.



Notes

REG Regulated in 2006, but initial year of regulation is unknown. Physicians who are certified by the Royal College of Physicians and Surgeons of Canada (RCPSC) or the College of Family Physicians of Canada (CFPC) have portable eligibility for licensure in every jurisdiction. They do not have a national licence, but are able to apply for a licence in each province with no extra exams or training required.



Supply Trends

Number of Active Registered Physicians, Including Residents,¹ by Province/Territory and Specialty, Canada, 1997 to 2006

	1997	1998	1999	2000 ²	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador⁴	1,145	1,125	1,117	1,101	1,117	1,097	1,172	1,195	1,199	1,232
Family Medicine	622	614	604	617	636	614	653	549	547	570
Specialists	523	511	513	484	481	483	519	646	652	662
Prince Edward Island⁵	165	175	180	178	190	191	195	210	199	207
Family Medicine	95	100	103	105	115	119	121	131	123	127
Specialists	70	75	77	73	75	72	74	79	76	80
Nova Scotia	2,113	2,172	2,226	2,268	2,265	2,332	2,351	2,401	2,448	2,455
Family Medicine	1,001	1,025	1,044	1,040	1,043	1,095	1,132	1,181	1,204	1,215
Specialists	1,112	1,147	1,182	1,228	1,222	1,237	1,219	1,220	1,244	1,240
New Brunswick	1,126	1,151	1,162	1,153	1,179	1,185	1,224	1,262	1,295	1,325
Family Medicine	657	675	686	679	699	700	738	755	766	793
Specialists	469	476	476	474	480	485	486	507	529	532
Quebec	17,324	17,549	17,649	17,761	17,799	17,740	17,505⁶	18,267	18,593	18,908
Family Medicine	8,122	8,248	8,272	8,323	8,296	8,363	8,317	8,679	8,861	9,002
Specialists	9,202	9,301	9,377	9,438	9,503	9,377	9,188	9,588	9,732	9,906
Ontario	22,624	22,859	23,075	23,531	23,831	24,173⁷	24,258	24,773	25,107	25,268
Family Medicine	10,314	10,327	10,326	10,496	10,668	10,782	10,948	11,258	11,304	11,392
Specialists	12,310	12,532	12,749	13,035	13,163	13,391	13,310	13,515	13,803	13,876
Manitoba	2,315	2,329	2,359	2,393	2,405	2,399	2,409	2,429	2,470	2,495
Family Medicine	1,062	1,068	1,101	1,119	1,132	1,121	1,130	1,142	1,168	1,162
Specialists	1,253	1,261	1,258	1,274	1,273	1,278	1,279	1,287	1,302	1,333

(continued)

Notes

Data in this table may have been revised due to HPDB system enhancements.

... Information was not available.

- Physician counts reflect the summation of data from two distinct sources: the total of "active" physicians from Scott's Medical Database and resident (post-medical degree [MD] trainee) counts from the Canadian Post-M.D. Education Registry (CAPER). Data as of December 31 of the given year; SMDB data exclude residents and physicians who are not licensed to provide clinical practice and have requested of the Business Information Group (formerly Southam Medical Group) that their data not be published ("active" in SMDB indicates that the physician has an MD and a valid mailing address). The CAPER resident data exclude foreign physicians training in Canada by visa and physician fellows receiving medical training/education beyond initial MD education (P.E.I. and New Brunswick interns and residents are included in Nova Scotia's total for 1997 to 2006); these counts will be an overestimate of the number of physicians. CIHI data will differ from provincial/territorial data due to the CIHI collection, processing and reporting methodology.
- Alberta and Yukon data in 2000 did not reflect the annual update from the College of Physicians and Surgeons of Alberta (see Methodological Notes for details).
- B.C. data in 2004 did not reflect the annual update from the College of Physicians and Surgeons of British Columbia (see Methodological Notes for details).
- Newfoundland and Labrador: 1997 to 2004: as of 2004, "specialists" in Saskatchewan and Newfoundland and Labrador included non-certified specialists.
- 1997 to 2006: P.E.I. and New Brunswick interns and residents are included in Nova Scotia total.
- Caution must be exercised when comparing Northwest Territories data prior to 1999 with Nunavut data after 1998, since some of the change may be attributable to the creation of Nunavut.
- Ontario data in 2002 did not reflect 4 of 12 monthly updates (September to December 2002) from the College of Physicians and Surgeons of Ontario.
- Quebec data in 2003 did not reflect the annual update from the Collège des médecins du Québec (see Methodological Notes for more details).

Sources

Scott's Medical Database, Canadian Institute for Health Information, and the Canadian Post-M.D. Education Registry.

TABLE

1

Number of Active Registered Physicians, Including Residents,¹ by Province/Territory and Specialty, Canada, 1997 to 2006 (cont'd)

	1997	1998	1999	2000 ²	2001	2002	2003	2004	2005	2006
Saskatchewan	1,680	1,734	1,777	1,773	1,754	1,778	1,751	1,745	1,770	1,818
Family Medicine	919	944	992	982	993	1,016	1,007	913	930	952
Specialists	761	790	785	791	761	762	744	832	840	866
Alberta	5,228	5,481	5,693	5,752	5,932	6,448	6,656	6,874	7,205	7,615
Family Medicine	2,544	2,672	2,783	2,765	2,890	3,235	3,368	3,420	3,598	3,804
Specialists	2,684	2,809	2,910	2,987	3,042	3,213	3,288	3,454	3,607	3,811
British Columbia	8,135	8,268	8,321	8,458	8,665	8,838	8,954	8,896³	9,211	9,418
Family Medicine	4,292	4,367	4,365	4,449	4,571	4,679	4,759	4,696	4,907	4,913
Specialists	3,843	3,901	3,956	4,009	4,094	4,159	4,195	4,200	4,304	4,505
Yukon	50	45	41	41	54	52	55	61	64	70
Family Medicine	43	39	35	35	50	48	51	55	57	63
Specialists	7	6	6	6	4	4	4	6	7	7
Northwest Territories⁶	66	62	53	47	37	46	43	51	44	48
Family Medicine	52	47	35	29	24	30	29	37	30	35
Specialists	14	15	18	18	13	16	14	14	14	13
Nunavut	..	..	11	7	7	10	10	7	14	11
Family Medicine	..	..	10	6	7	10	10	7	13	10
Specialists	..	..	1	1	..	..	..	..	1	1
CANADA	61,971	62,950	63,664	64,463	65,235	66,289	66,583	68,171	69,619	70,870
Family Medicine	29,723	30,126	30,356	30,645	31,124	31,812	32,263	32,823	33,508	34,038
Specialists	32,248	32,824	33,308	33,818	34,111	34,477	34,320	35,348	36,111	36,832

Notes

Data in this table may have been revised due to HPDB system enhancements.

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- Caution must be exercised when comparing Northwest Territories data prior to 1999 with Nunavut data after 1998, since some of the change may be attributable to the creation of Nunavut.
- Ontario data in 2002 did not reflect 4 of 12 monthly updates (September to December 2002) from the College of Physicians and Surgeons of Ontario.
- Quebec data in 2003 did not reflect the annual update from the Collège des médecins du Québec (see Methodological Notes for more details).

Sources

Scott's Medical Database, Canadian Institute for Health Information, and the Canadian Post-M.D. Education Registry.

TABLE

2

Number of Active Registered Physicians,¹ Excluding Residents, by Province/Territory and Specialty, Canada, 1997 to 2006

	1997	1998	1999	2000 ²	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador⁴	931	926	925	927	945	929	975	992	994	1,018
Family Medicine	568	560	556	571	599	585	615	513	508	526
Specialists	363	366	369	356	346	344	360	479	486	492
Prince Edward Island⁵	165	175	180	178	190	191	195	210	199	207
Family Medicine	95	100	103	105	115	119	121	131	123	127
Specialists	70	75	77	73	75	72	74	79	76	80
Nova Scotia⁷	1,763	1,828	1,868	1,898	1,885	1,943	1,958	2,000	2,039	2,049
Family Medicine	923	947	955	952	959	1,007	1,038	1,081	1,102	1,120
Specialists	840	881	913	946	926	936	920	919	937	929
New Brunswick⁵	1,126	1,151	1,162	1,153	1,179	1,185	1,224	1,262	1,295	1,325
Family Medicine	657	675	686	679	699	700	738	755	766	793
Specialists	469	476	476	474	480	485	486	507	529	532
Quebec⁹	15,306	15,472	15,582	15,770	15,866	15,800	15,518	16,145	16,354	16,533
Family Medicine	7,554	7,679	7,745	7,821	7,857	7,917	7,844	8,165	8,298	8,390
Specialists	7,752	7,793	7,837	7,949	8,009	7,883	7,674	7,980	8,056	8,143
Ontario⁸	20,194	20,460	20,701	21,176	21,482	21,735	21,738	22,067	22,237	22,141
Family Medicine	9,769	9,796	9,795	9,974	10,155	10,242	10,410	10,659	10,654	10,637
Specialists	10,425	10,664	10,906	11,202	11,327	11,493	11,328	11,408	11,583	11,504
Manitoba	2,008	2,014	2,049	2,082	2,093	2,077	2,063	2,078	2,111	2,125
Family Medicine	1,002	1,011	1,044	1,062	1,081	1,073	1,075	1,079	1,103	1,096
Specialists	1,006	1,003	1,005	1,020	1,012	1,004	988	999	1,008	1,029
Saskatchewan	1,472	1,529	1,568	1,567	1,549	1,564	1,526	1,529	1,545	1,571
Family Medicine	868	896	944	932	944	966	951	868	879	894
Specialists	604	633	624	635	605	598	575	661	666	677

(continued)



Please refer to *Supply, Distribution and Migration of Canadian Physicians, 2006* for more detailed information.

Notes

Data in this table may have been revised due to HPDB system enhancements.

... Information was not available.

1 Physicians counts reflect the summation of data from two distinct sources: The total of "active" physicians from the Scott's Medical Database and resident (post-Medical Degree (M.D.) trainees) counts from the Canadian Post MD Education Registry (CAPER); Data as of December 31 of the given year; SMDB data exclude residents and physicians who are not licensed to provide clinical practice and have requested to the Business Information Group (formerly Southam Medical Group) that their data not be published ("Active" on SMDB indicates that the physician has an M.D. and a valid mailing address); The CAPER resident data exclude foreign physicians training in Canada by visa, and physician fellows receiving medical training/education beyond initial M.D. education (Prince Edward Island and New Brunswick interns and residents are included in Nova Scotia's total for 1997 to 2006); These counts will be an overestimate of the number of physicians. CIHI data will differ from provincial/territorial data due to the CIHI collection, processing and reporting methodology.

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3 British Columbia data in 2004 did not reflect the annual update from the College of Physicians and Surgeons of British Columbia (see Methodological Notes for details).

4 Newfoundland: 1997–2004: As of 2004, "specialists" in Saskatchewan and Newfoundland and Labrador included non-certified specialists.

5 1997 to 2006: Prince Edward Island and New Brunswick interns and residents are included in Nova Scotia's total.

6 Caution must be exercised when comparing Northwest Territories data prior to 1999 with Nunavut data after 1998, since some of the change may be attributable to the creation of Nunavut.

7 Nova Scotia: 1997 to 2006 included both Prince Edward Island and New Brunswick interns and residents.

8 Ontario data in 2002 did not reflect 4 of 12 monthly updates (September to December 2002) from the College of Physicians and Surgeons of Ontario.

9 Quebec data in 2003 did not reflect the annual update from the Collège des médecins du Québec (see Methodological Notes for more details).

Source

Scott's Medical Database, Canadian Institute for Health Information.

TABLE

2

Number of Active Registered Physicians,¹ Excluding Residents, by Province/Territory and Specialty, Canada, 1997 to 2006 (cont'd)

	1997	1998	1999	2000 ²	2001	2002	2003	2004	2005	2006
Alberta	4,509	4,755	4,962	5,014	5,154	5,637	5,801	5,953	6,219	6,574
Family Medicine	2,375	2,511	2,620	2,608	2,692	3,020	3,151	3,200	3,364	3,567
Specialists	2,134	2,244	2,342	2,406	2,462	2,617	2,650	2,753	2,855	3,007
British Columbia	7,617	7,746	7,812	7,943	8,105	8,243	8,348	8,257³	8,507	8,635
Family Medicine	4,186	4,258	4,256	4,339	4,445	4,541	4,629	4,544	4,736	4,731
Specialists	3,431	3,488	3,556	3,604	3,660	3,702	3,719	3,713	3,771	3,904
Yukon	50	45	41	41	54	52	55	61	64	70
Family Medicine	43	39	35	35	50	48	51	55	57	63
Specialists	7	6	6	6	4	4	4	6	7	7
Northwest Territories⁴	66	62	53	47	37	46	43	51	44	48
Family Medicine	52	47	35	29	24	30	29	37	30	35
Specialists	14	15	18	18	13	16	14	14	14	13
Nunavut	..	..	11	7	7	10	10	7	14	11
Family Medicine	..	..	10	6	7	10	10	7	13	10
Specialists	..	..	1	1	..	..	..	..	1	1
CANADA	55,207	56,163	56,914	57,803	58,546	59,412	59,454	60,612	61,622	62,307
Family Medicine	28,092	28,519	28,784	29,113	29,627	30,258	30,662	31,094	31,633	31,989
Specialists	27,115	27,644	28,130	28,690	28,919	29,154	28,792	29,518	29,989	30,318

Notes

Data in this table may have been revised due to HPDB system enhancements.

.. Information was not available.

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4 Newfoundland: 1997–2004: As of 2004, "specialists" in Saskatchewan and Newfoundland and Labrador included non-certified specialists.

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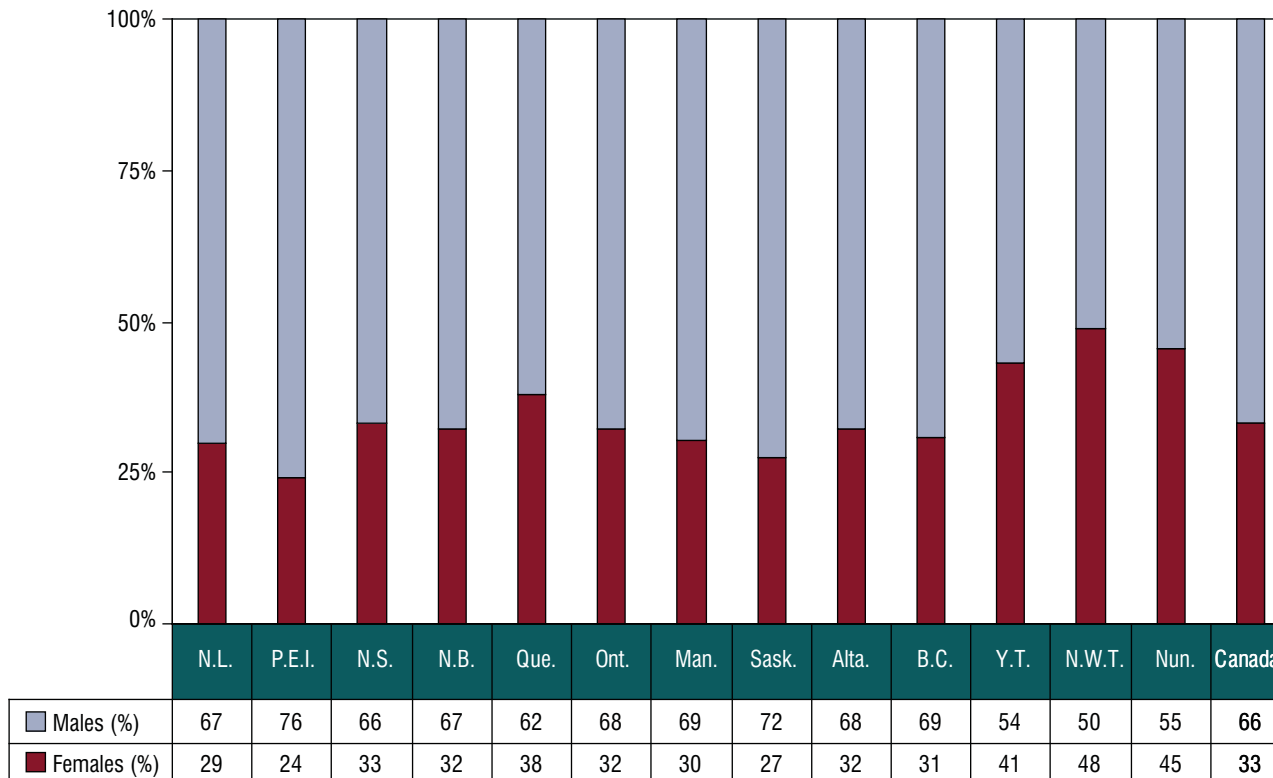
9 Quebec data in 2003 did not reflect the annual update from the Collège des médecins du Québec (see Methodological Notes for more details).

Source

Scott's Medical Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1 Percentage Distribution of Physicians by Sex, Province/Territory and Canada, 2006



Notes

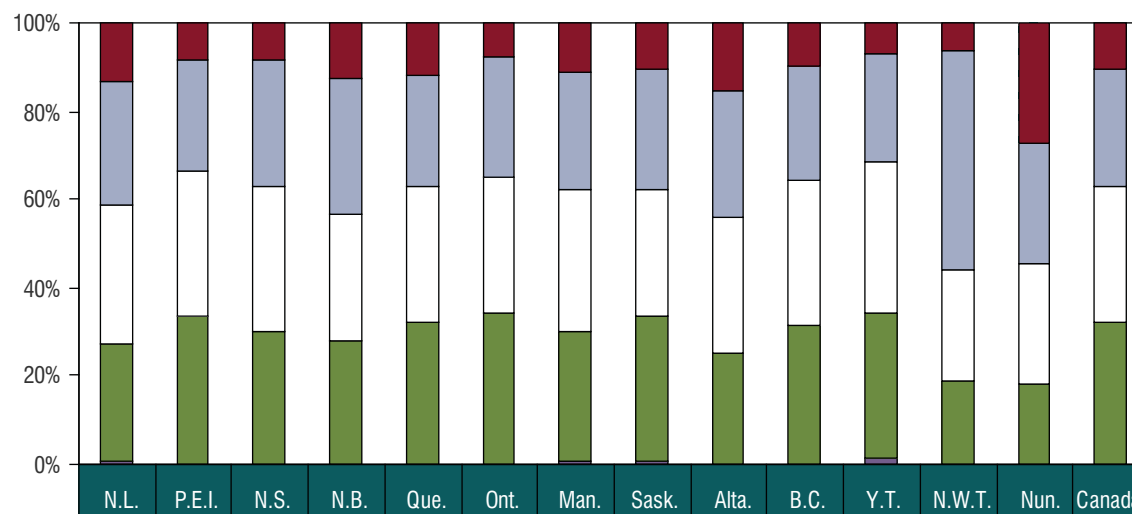
Totals may not sum to 100% due to rounding. Percentage of physicians who did not report gender information: 4% (Newfoundland and Labrador), 2% (Nova Scotia), 2% (New Brunswick), 1% (Manitoba), 1% (Saskatchewan), 1% (Alberta), 1% (B.C.), 4% (Yukon) and 2% (Northwest Territories).

Source

Scott's Medical Database, Canadian Institute for Health Information.

FIGURE 2

Percentage Distribution of Physicians by 10-Year Age Groups, Province/Territory and Canada, 2006



	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Y.T.	N.W.T.	Nun.	Canada
15-24 (%)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25-34 (%)	14	8	8	13	12	8	11	11	15	10	7	6	27	10
35-44 (%)	28	26	28	31	25	27	26	27	29	26	24	50	27	27
45-54 (%)	31	33	33	29	31	31	32	29	31	32	34	25	27	31
55+ (%)	27	33	30	28	32	34	30	33	25	31	33	19	18	32
Age Unknown (%)	1	0	0	0	0	0	0	1	0	0	1	0	0	0

Note

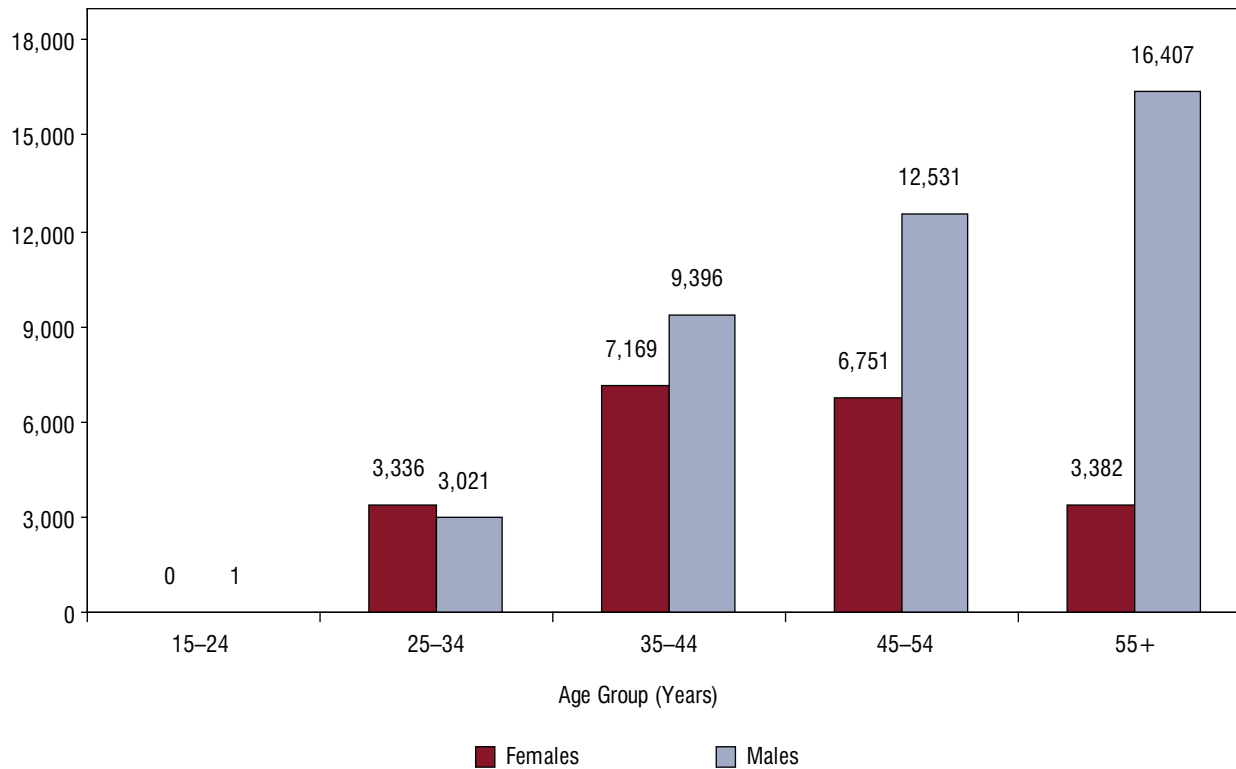
Totals may not sum to 100% due to rounding.

Source

Scott's Medical Database, Canadian Institute for Health Information.

FIGURE 3

Number of Physicians by Sex and 10-Year Age Groups, Canada, 2006



Graduate Trends

Number of Graduates of Canadian Medical Schools¹ by School of Graduation and Sex, Canada, 1997 to 2006

TABLE 3

School	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador										
Memorial University of Newfoundland	55	57	59	60	59	59	62	61	63	56
Males	20	26	29	33	27	31	29	33	23	16
Females	35	31	30	27	32	28	33	28	40	40
Nova Scotia										
Dalhousie University	81	87	81	90	88	87	91	90	89	84
Males	46	42	39	49	43	41	47	43	40	31
Females	35	45	42	41	45	46	44	47	49	53
Quebec										
Université Laval	132	133	148	108	106	117	120	130	139	151
Males	61	59	51	37	37	46	44	53	42	41
Females	71	74	97	71	69	71	76	77	97	110
Université de Sherbrooke	91	96	90	87	84	91	104	98	113	124
Males	27	40	37	40	24	36	40	26	33	31
Females	64	56	53	47	60	55	64	72	80	93
Université de Montréal	161	154	148	160	142	137	153	168	175	187
Males	61	67	53	57	60	44	61	57	42	48
Females	100	87	95	103	82	93	92	111	133	139
McGill University	136	127	114	109	105	112	125	132	135	148
Males	72	61	47	55	52	66	70	76	69	76
Females	64	66	67	54	53	46	55	56	66	72
Ontario										
University of Ottawa	80	87	79	84	84	83	91	95	123	135
Males	42	43	39	37	40	48	39	44	51	62
Females	38	44	40	47	44	35	52	51	72	73
Queen's University	73	78	73	75	75	70	81	78	90	100
Males	35	50	48	46	47	41	49	49	41	52
Females	38	28	25	29	28	29	32	29	49	48
University of Toronto	174	167	181	167	175	164	179	188	189	190
Males	102	102	102	104	99	86	106	99	90	91
Females	72	65	79	63	76	78	73	89	99	99

(continued)

Note

¹ This is a comprehensive list of medical schools, with the exception of the Northern Ontario School of Medicine, which opened its doors in August 2005; it is a joint venture between Laurentian University in Sudbury and Lakehead University in Thunder Bay.

Source

Association of Canadian Medical Colleges.

TABLE 3

Number of Graduates of Canadian Medical Schools¹ by School of Graduation and Sex, Canada, 1997 to 2006 (cont'd)

School	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Ontario (cont'd)										
McMaster University	89	107	97	103	93	101	114	129	135	142
Males	27	45	31	37	28	41	39	40	32	37
Females	62	62	66	66	65	60	75	89	103	105
University of Western Ontario	94	93	98	101	105	98	104	109	125	135
Males	59	62	57	62	64	57	55	62	61	70
Females	35	31	41	39	41	41	49	47	64	65
Manitoba										
University of Manitoba	69	68	71	74	72	69	74	75	82	89
Males	49	45	44	49	48	42	50	40	42	41
Females	20	23	27	25	24	27	24	35	40	48
Saskatchewan										
University of Saskatchewan	55	54	50	58	56	55	54	53	57	56
Males	31	28	23	32	32	33	27	27	26	27
Females	24	26	27	26	24	22	27	26	31	29
Alberta										
University of Alberta	112	103	108	105	108	104	104	122	129	125
Males	61	59	70	58	69	62	54	67	74	72
Females	51	44	38	47	39	42	50	55	55	53
University of Calgary	57	71	72	74	76	77	93	112	101	110
Males	37	35	30	37	36	38	45	49	41	52
Females	20	36	42	37	40	39	48	63	60	58
British Columbia										
University of British Columbia	118	122	125	123	109	119	114	117	131	126
Males	53	64	56	63	60	58	41	53	51	57
Females	65	58	69	60	49	61	73	64	80	69
CANADA										
	1,577	1,604	1,594	1,578	1,537	1,543	1,663	1,757	1,876	1,958
Males	783	828	756	796	766	770	796	818	758	804
Females	794	776	838	782	771	773	867	939	1,118	1,154

Note

¹ This is a comprehensive list of medical schools, with the exception of the Northern Ontario School of Medicine, which opened its doors in August 2005; it is a joint venture between Laurentian University in Sudbury and Lakehead University in Thunder Bay.

Source

Association of Canadian Medical Colleges.

Sources

Table 1

Scott's Medical Database, Canadian Institute for Health Information and the Canadian Post-M.D. Education Registry.

Table 2

Scott's Medical Database, Canadian Institute for Health Information.

Table 3

Association of Canadian Medical Colleges.

Figure 1

Calculated from data in Scott's Medical Database, Canadian Institute for Health Information.

Figure 2

Calculated from data in Scott's Medical Database, Canadian Institute for Health Information.

Figure 3

Calculated from data in Scott's Medical Database, Canadian Institute for Health Information.

Physiotherapists or physical therapists analyze the impact of injury, disease and/or disorders on movement and function and are focused on improving, restoring and maintaining functional independence and physical performance; preventing and managing pain, physical impairments, disabilities and limits to participation; and promoting fitness, health and wellness.

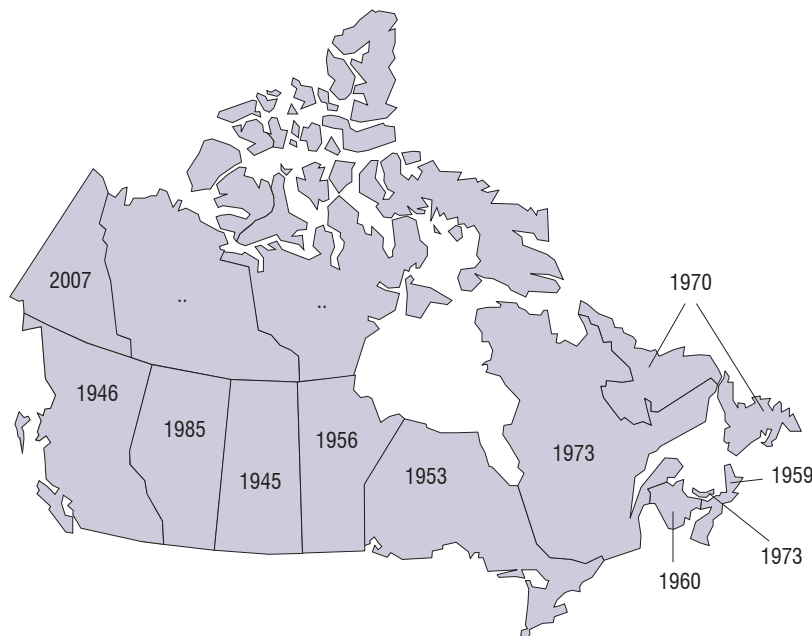
Physiotherapists

Practice Setting

Physiotherapists work in a wide variety of private and public settings including private physiotherapy clinics, public outpatient clinics, hospitals, rehabilitation centres, sports facilities, home-care programs, schools, long-term care facilities, community health centres, industry, government, universities and research facilities. Many physiotherapists are self-employed. The profile of physiotherapy practice continues to evolve within the changing models of health care delivery, as evidenced by the increasing participation of physiotherapists in interprofessional primary health care teams.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for physiotherapists to register with a provincial/territorial regulatory authority as a condition of practice.



Notes

.. Information was not available.
In the Northwest Territories and Nunavut, the government is responsible for evaluating the competence of physiotherapists. Physiotherapists must be registered with a provincial licensing authority as a condition of practice.



Supply Trends

Number of Active Registered Physiotherapists by Province/Territory, Canada, 1997 to 2006

TABLE 1

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador	151	180	187	199	198	192	200	200	198	201
Prince Edward Island	39	47	45	47	50	53	52	51	49	56
Nova Scotia	409	422	409	436	449	485	508	495	529	532
New Brunswick	315	367	361	377	363	397	436	439	428	435
Quebec	2,920	2,964	2,995	3,200	3,210	3,304	3,435	3,606	3,677	3,673
Ontario	4,743 ³	4,953	5,087	5,210	5,223	5,520	5,921	5,494	5,314	5,603
Manitoba¹	458	462	479	519	505	552	578	602	613	594
Saskatchewan²	457	491	504	521	524	516	530	526	534	551
Alberta	1,377	1,430	1,510	1,632	1,643	1,634	1,712	1,813	1,924	1,995
British Columbia	2,238	2,258	2,329	2,321	2,306	2,355	2,343	2,381	2,506	2,468
Y.T., N.W.T. and Nun.	..	..	..	..	..	..	..	..	..	..
CANADA	13,107	13,574	13,906	14,462	14,471	15,008	15,715	15,607	15,772	16,108

Notes

- .. Information was not available.
- 1** All physiotherapists working in Manitoba are residents of the province.
- 2** Prior to 2001, Saskatchewan did not differentiate between active and inactive registered physiotherapists.
- 3** Estimate. Please refer to Methodological Notes for more detailed information and data quality issues.

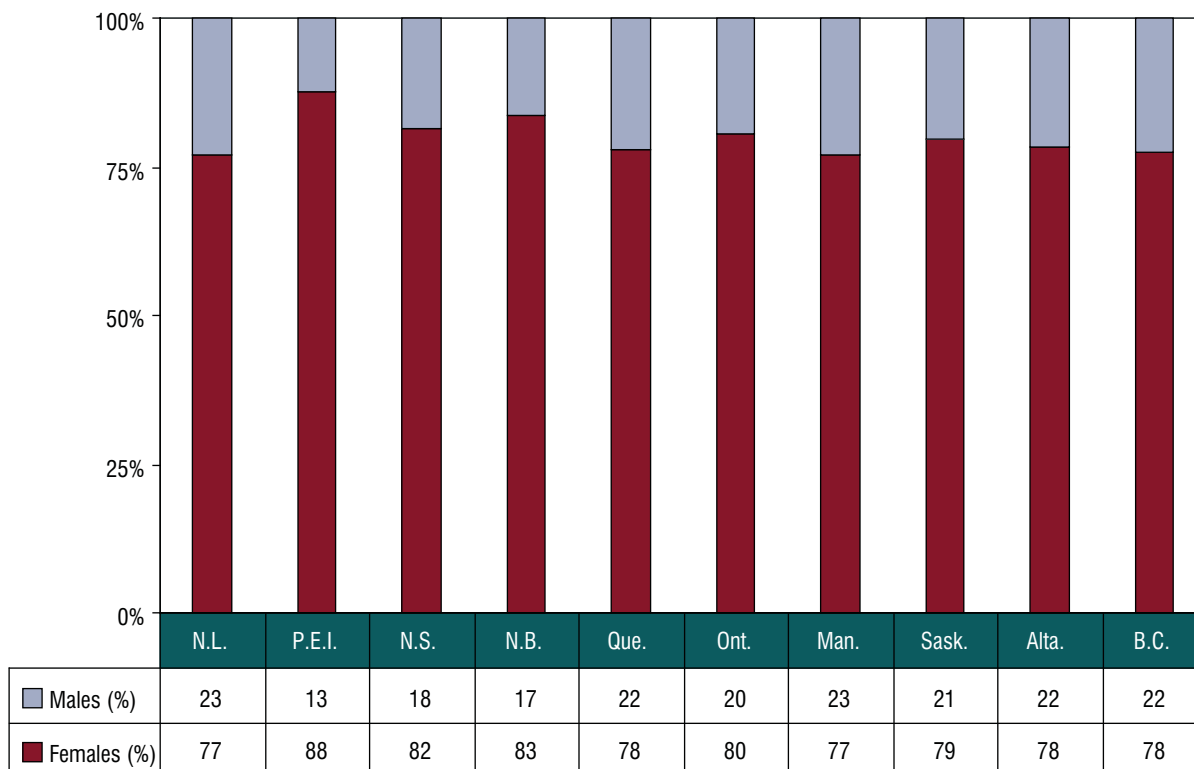
Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1

Percentage Distribution of Physiotherapists by Sex and Province, 2006



Notes

Totals may not sum to 100% due to rounding.
Territorial information was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

Graduate Trends

Number of Graduates of Physiotherapy Programs¹ by School of Graduation, Canada, 1997 to 2006

TABLE 2

School	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nova Scotia										
Dalhousie University ⁴	48	48	48	45	46	49	47	42	50	48
Quebec										
McGill University ⁴	49	48	56	52	53	52	50	52	50	57
Université de Montréal ⁴	56	49	48	58	53	57	79	64	57	52
Université Laval ²	67	8	53	58	66	46	46	58	53	58
Ontario										
McMaster University ⁵	56	60	59	59	56	50	50	52	47	54
Queen's University ⁷	46	40	38	39	39	45	42	42	51	93
University of Ottawa ⁴	36	40	35	36	63	62	47	21	45	60
University of Toronto ³	63	120	63	64	63	62	111	55	77	78
University of Western Ontario ⁶	58	64	58	57	57	63	65	45	50	49
Manitoba										
University of Manitoba ⁴	31	28	33	29	30	34	28	37	48	45
Saskatchewan										
University of Saskatchewan ⁴	29	30	30	32	30	30	30	29	31	30
Alberta										
University of Alberta ⁶	61	62	63	61	67	63	69	68	65	71
British Columbia										
University of British Columbia ⁶	36	36	36	32	41	34	36	38	34	37
CANADA	636	633	620	622	664	647	700	603	658	732

Notes

Data in this table may have been revised due to HPDB system enhancements.

- This is a comprehensive list of schools offering physiotherapy programs. Please also note that the Université de Sherbrooke is expected to enrol its first cohort of students in the fall with an expected graduation in 2011.
- Université Laval: 1998 program credits changed from 96 to 106; data included only bachelor's graduates.
- University of Toronto: In 1998 two classes graduated (one from the classic four-year curriculum and the other from the evidence-based three-year curriculum); 2003 to 2004 experienced a decline in the number of graduates because the Bachelor of Science in Physiotherapy was being phased out; data included both bachelor's and master's graduate counts.
- Data based solely on bachelor's graduate counts.
- McMaster University: 1997 to 2001 data represented bachelor's graduates only; the 2002 to 2006 data represented master's graduates only.
- Data included both bachelor's and master's graduates.
- Queen's University: Data included both bachelor's and master's graduates. In 2006 the BSc program was phased out; therefore, there was a much larger number of graduates that year.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

1997 to 1999: College of Physiotherapists of Manitoba, Newfoundland and Labrador College of Physiotherapists, Prince Edward Island College of Physiotherapists, Nova Scotia College of Physiotherapists, College of Physiotherapists New Brunswick, Ordre professionnel de la physiothérapie du Québec, College of Physiotherapists of Ontario, Saskatchewan College of Physical Therapists, College of Physical Therapists of Alberta and College of Physical Therapists of British Columbia.

2000 to 2006: Canadian Alliance of Physiotherapy Regulators.

Table 2

Individual universities: McGill University, Université de Montréal, Université Laval, University of Ottawa, Queen's University, McMaster University, University of Western Ontario, University of Toronto, University of Manitoba, Dalhousie University, University of British Columbia, University of Alberta and University of Saskatchewan.

Figure 1

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Psychologists study the biological, cognitive, emotional, social, cultural and environmental determinants of behaviour—in other words, how people think, feel and behave in their social and physical environments. Psychologists are licensed provincially and territorially to assess, diagnose and treat psychological problems and mental disorders.

P

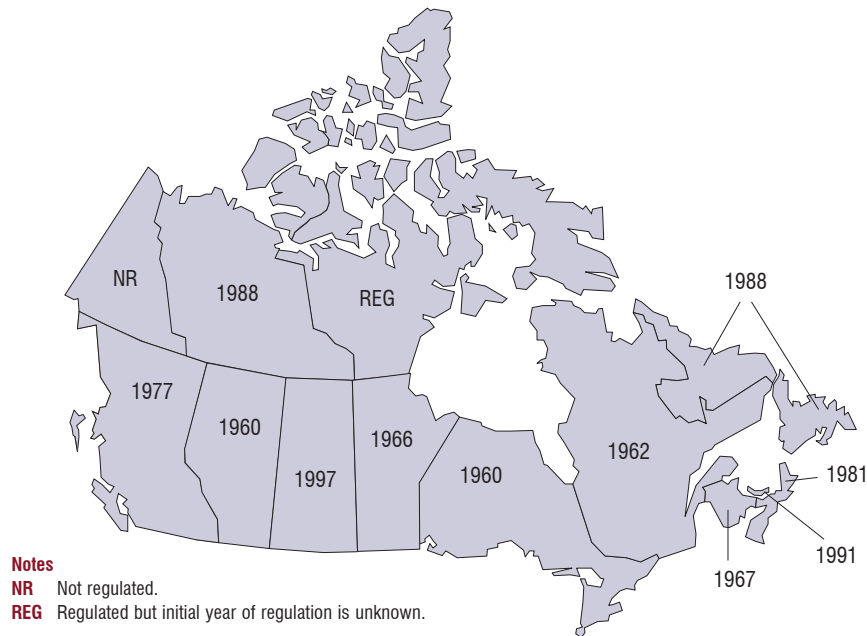
Psychologists

Practice Setting

Psychologists provide services, teach and/or conduct research in settings such as hospitals, community clinics, private practices, universities, schools, criminal-justice settings, social-welfare agencies, workplace employee-assistance programs, rehabilitation programs and workers' compensation boards. Psychological services are provided across the continuum of care, which includes wellness, injury and illness prevention, diagnosis and treatment, rehabilitation and relapse prevention, chronic disease and disability management and palliative care.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for psychologists to register with a provincial/territorial regulatory authority as a condition of practice.



Supply Trends

Number of Active Registered Psychologists¹
by Province/Territory, Canada, 1997 to 2006

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador	..	185	186	195	210	221	203 ¹¹	207	197	194
Prince Edward Island ⁶	15	19	22	21	22	28	27	29	27	25
Nova Scotia ⁵	310	331	350	369	383	414	387	405	414	439
New Brunswick ⁴	219 [†]	241	186	256	213	265 [†]	304	276	265	336 ¹¹
Quebec ⁹	5,671	5,728	5,898	6,076	6,271	6,455	7,554 ⁹	7,690	7,523	8,013 ⁹
Ontario ⁷	2,281	2,369	2,501	2,575	2,665	2,740	2,569	2,748	2,990	3,056
Manitoba ³	153 [†]	140	149	156	156	160	163	181	166	178
Saskatchewan ¹⁰	70 [†]	70	73 [†]	74	73 [†]	387	374	404	418	431
Alberta ²	1,671	1,712	1,768	1,833	1,930	1,892	1,650	1,722	1,693	1,945
British Columbia	1,010	1,043	1,035	1,068	934	939	904	944	933	1,029
Yukon	..	..	..	..	..	..	..	..	..	..
Northwest Territories ^{†, 6}	37	38	45	53	71	74	85 ¹¹	81	89 ⁹	85
Nunavut [†]	20
CANADA[†]	11,437	11,876	12,213	12,676	12,928	13,575	14,220	14,687	14,715	15,751

Notes

Data in this table may have been revised due to HPDB system enhancements.

† Indicates the presence of voluntary membership data.

.. Information was not available.

1 "Active" refers to self-employed or employed by agencies such as hospitals or clinics. Excluded are students, foreign affiliates, retired, abroad and honorary members (exceptions are footnoted). Some psychologists are employed outside the health field. This table includes voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation that outlines how the information within the publication can be most effectively interpreted, analyzed and used.

2 Alberta data for 1997 to 2002 included active and inactive (may or may not be employed) psychologists; 2003 data as of August 17, 2004; 2004 data as of February 10, 2005; 2005 data as of March 31, 2005.

3 Manitoba: 2003 data as of August 16, 2004; 2004 data as of April 30, 2005; 2005 data as of February 23, 2006.

4 New Brunswick: 2003 data as of October 29, 2004; 2004 data as of April 5, 2005; 2005 data as of May 1, 2006.

5 Nova Scotia: Data for 1997 to 2002 include active and inactive (may or may not be employed) psychologists; 2003 data as of May 11, 2004; 2005 data as of December 19, 2005; 2006 data as of May 30, 2007.

6 Northwest Territories: 2005 data as of December 1, 2005.

7 Ontario: 1997 to 1999 data as of September of the given years; 2000 and 2001 data as of October of the given years; 2002 data as of May 31, 2002; 2005 data as of February 28, 2006; 2006 data as of March 30, 2007.

8 P.E.I.: 2001 to 2002 included five people who were employed outside the province; data as of November 1 of the following year.

9 Quebec: 2003 data as of May 31, 2004; 2006 data as of April 10, 2007.

10 Saskatchewan: 1997 to 2001 included only doctoral-level psychologists and may under-count the number of practising psychologists in Saskatchewan; Saskatchewan data for 2002 to 2004 include both master's- and doctoral-level psychologists; 2006 data as of March 19, 2007.

11 Only represents registered psychologists.

Source

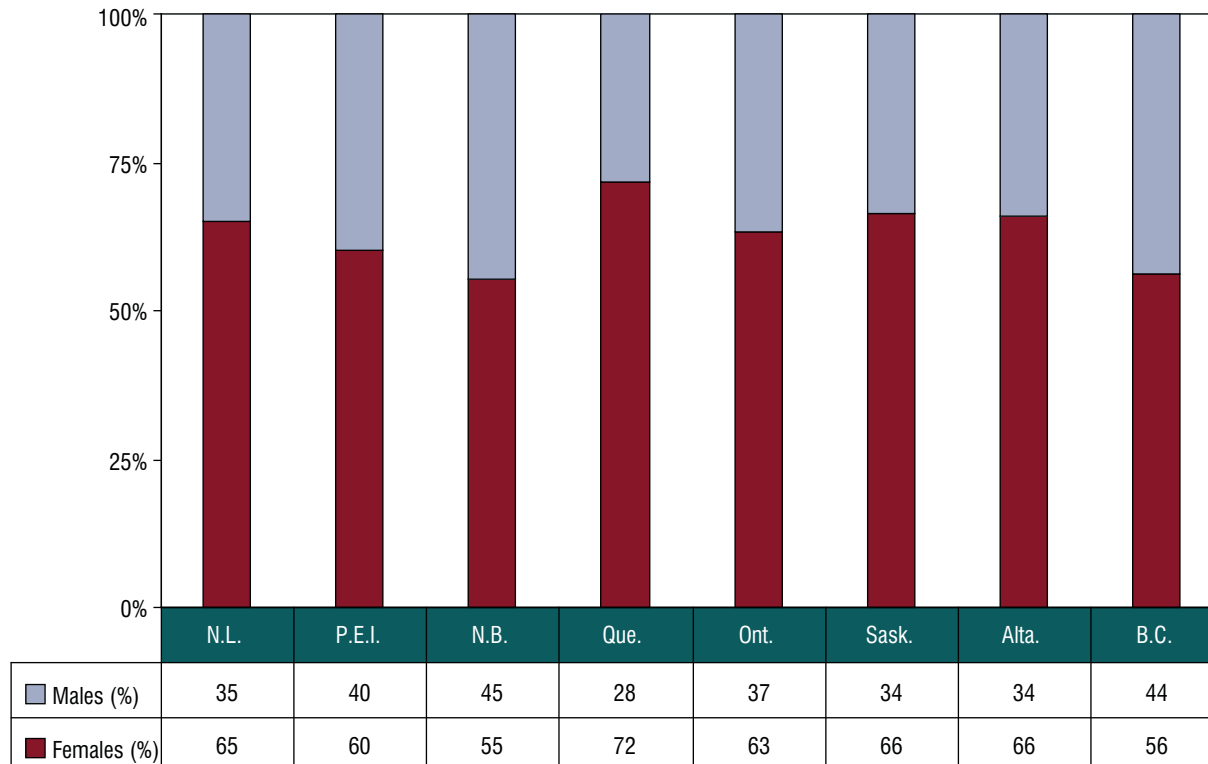
Health Personnel Database, Canadian Institute for Health Information.

TABLE 1

Demographic Trends

Percentage Distribution of Psychologists by Sex and Selected Provinces, 2006

FIGURE 1



Notes

Nova Scotia, the Northwest Territories, Nunavut and Manitoba were not included as gender information was not available.

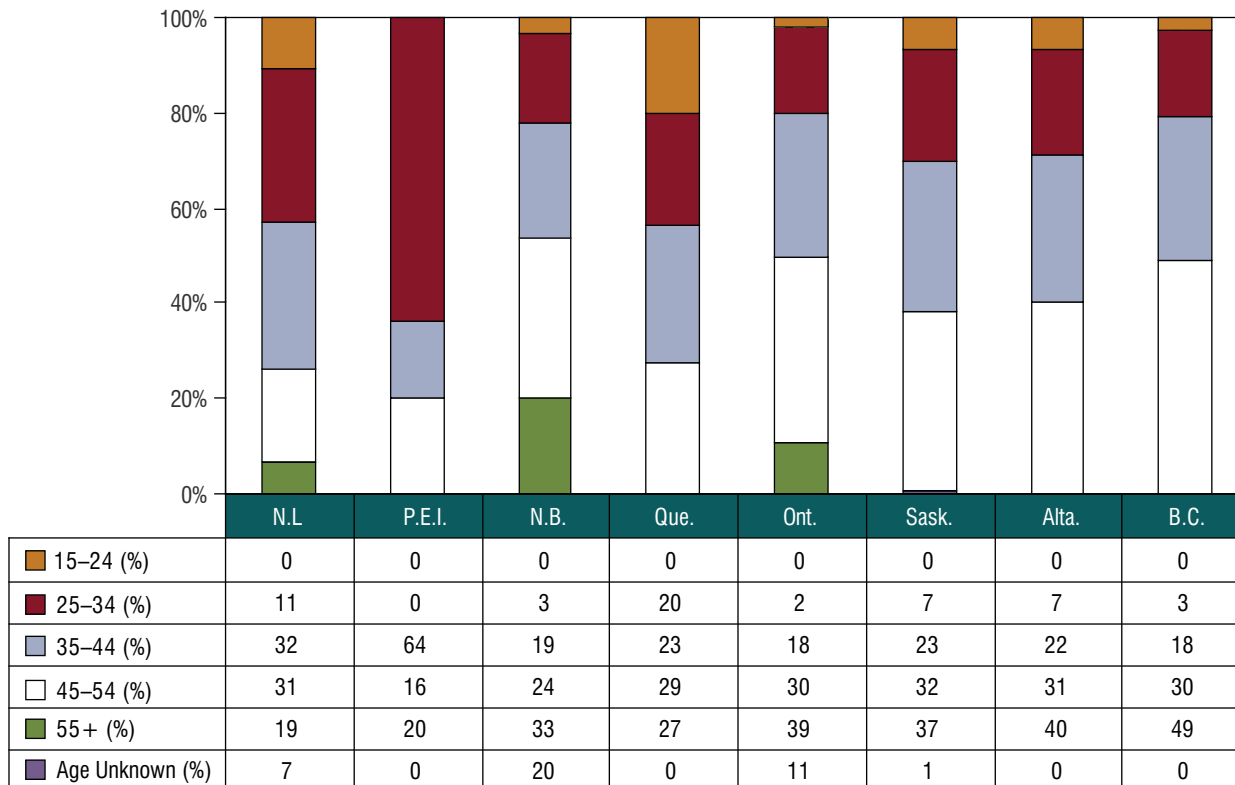
Yukon information was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

FIGURE 2

Percentage Distribution of Psychologists by 10-Year Age Groups and Selected Provinces, 2006

**Notes**

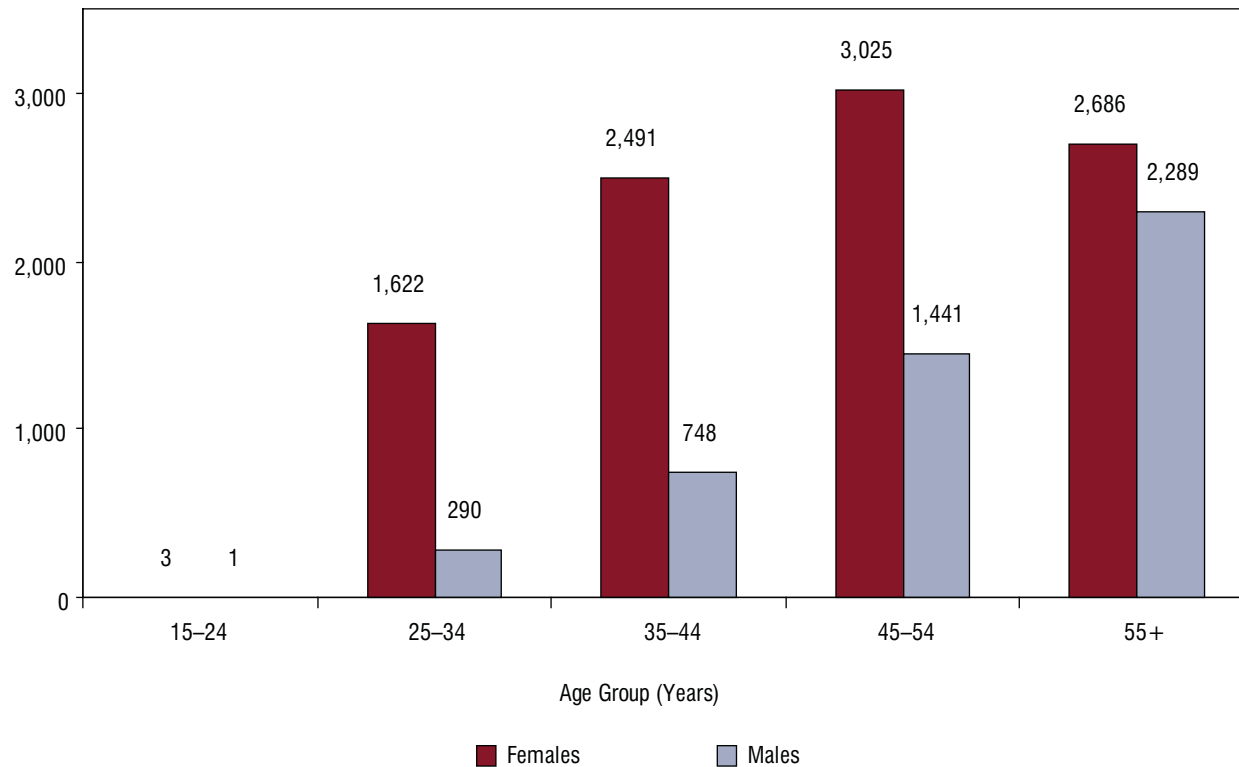
Totals may not sum to 100% due to rounding.
Nova Scotia, the Northwest Territories, Nunavut and Manitoba were not included as age information was not available.
Yukon information was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

FIGURE 3

Number of Psychologists by Sex and 10-Year Age Groups, Selected Provinces, 2006

**Notes**

Nova Scotia, the Northwest Territories, Nunavut and Manitoba were not included as gender and age information was not available. Yukon information was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

Graduate Trends

Number of Graduates of Doctoral Psychology Programs¹ by School of Graduation, Canada, 2005 to 2006

TABLE 2

School	2005	2006
Nova Scotia		
Dalhousie University	3	5
New Brunswick		
University of New Brunswick—Saint John Campus	3	4
Quebec		
Concordia University	7	8
McGill University	5	11
Université Laval	5	7
Université de Montréal	6	20
Ontario		
Queen's University	10	2
University of Guelph	4	4
University of Ottawa	5	10
University of Waterloo	2	2
University of Western Ontario	4	5
University of Windsor	11	13
York University	8	13
Manitoba		
University of Manitoba	5	6
Saskatchewan		
University of Regina	2	3
University of Saskatchewan	4	3
Alberta		
University of Alberta	9	4
University of Calgary	11	3
British Columbia		
Simon Fraser University	3	2
University of British Columbia	18	11
University of Victoria	1	4
CANADA	126	140

Notes

1 Please note that this is the first year of reporting on graduates of psychology programs. This is a comprehensive list of schools offering CPA-accredited doctoral psychology programs in Canada. The Canadian Psychological Association (CPA) only accredits doctoral programs in professional psychology, that is, graduates are specifically trained to practise psychology upon graduation (except those who choose to become university professors), as compared to experimental psychology, which typically leads to lab and research work in psychology. Information prior to 2005 was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

Provincial psychologist associations: Newfoundland Labrador Psychology Board; Prince Edward Island Psychologists Registration Board; Nova Scotia Board of Examiners in Psychology; College of Psychologists of New Brunswick; College of Psychologists of Ontario; Ordre des psychologues du Québec; Psychological Association of Manitoba; College of Alberta Psychologists; College of Psychologists of British Columbia; Government of the Northwest Territories, Department of Health and Social Services; and Saskatchewan College of Psychologists.

Table 2

Canadian Psychological Association.

Figure 1

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Figure 2

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Figure 3

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

R Registered Nurses

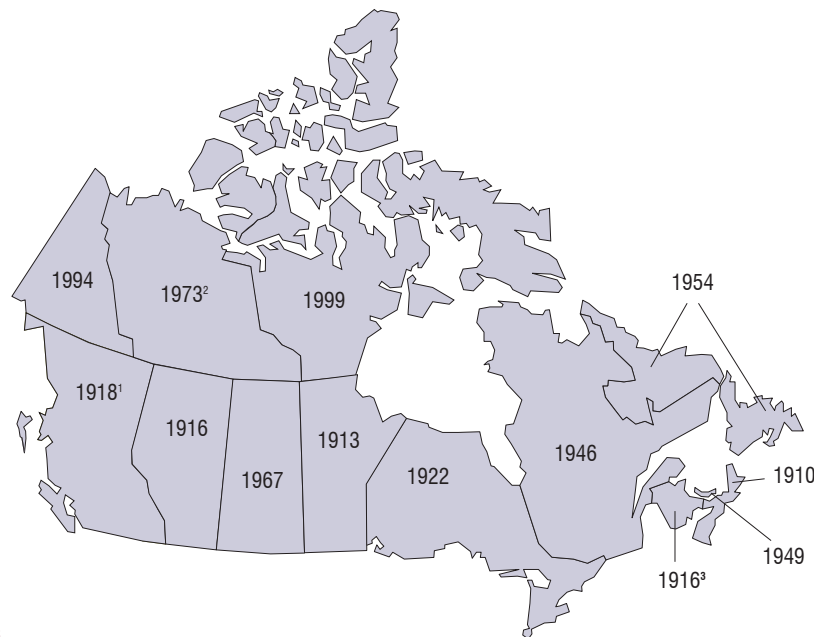
Registered Nurses (RNs) enable individuals, families, groups, communities and populations to achieve their optimal level of health. RNs coordinate health care, deliver direct services and support clients in their self-care decisions and actions in situations of health, illness, injury and disability in all stages of life. RNs contribute to the health care system through their work in direct practice, education, administration, research and policy in a wide array of settings.

Practice Setting

Registered nurses are employed in a variety of practice settings including institution and community-based environments such as hospitals, nursing homes, extended-care facilities, rehabilitation centres, clinics, community health centres, home-care agencies, education and research facilities, private companies, government and doctors' offices. They may also be self-employed.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for registered nurses to register with a provincial/territorial regulatory authority as a condition of practice.



Notes

- ¹ In 1918, the *Registered Nurses Act* was enabled. In 1988, it became mandatory to register with the Registered Nurses Association of British Columbia in order to practise as a registered nurse.
- ² In 1973, registration became mandatory in the Northwest Territories, which included the land area now known as Nunavut. Nunavut was formed in 1999 and adopted the Northwest Territories legislation.
- ³ The first legislation for the regulation of nursing in New Brunswick was the *Registered Nurses Act* (1916). Registration in New Brunswick became mandatory with the enactment of the *Nurses Act* (1984).



Supply Trends

Number of Employed Active Registered Nurses
by Province/Territory,¹ Canada, 1997 to 2006

TABLE

1

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador	5,210	5,340	5,264	5,394	5,439	5,442	5,430	5,452	5,496	5,515
Prince Edward Island	1,281	1,277	1,232	1,255	1,270	1,293	1,373	1,377	1,443	1,428
Nova Scotia	8,587	8,525	8,615	8,699	8,554	8,419	8,498	8,602	8,733	8,790
New Brunswick	7,342	7,404	7,580	7,256	7,385	7,364	7,186	7,375	7,526	7,680
Quebec	59,160	56,825	57,980	58,750	58,482	59,193	62,494	63,455	63,827	64,014
Ontario	78,067	78,825	78,197	81,679	80,590	78,737	85,187	86,099	89,429	90,061
Manitoba	10,473	10,162	10,193	10,051	10,263	9,942	10,034	10,628	10,811	10,902
Saskatchewan	8,456	8,455	8,553	8,543	8,198	8,257	8,503	8,481	8,549	8,480
Alberta	21,238	21,976	22,044	22,172	22,924	23,377	24,037	25,600	26,355	25,881
British Columbia	27,964	28,001	27,911	27,730	27,375	27,901	27,711	28,289	27,814	28,840
Yukon	302	286	283	275	273	272	290	283	302	324
Northwest Territories	633	738	682	762	471	487	414	930	957	1,033
Nunavut	n/a	n/a	n/a	n/a	288	273	258	^	^	^
CANADA	228,713	227,814	228,534	232,566	231,512	230,957	241,415	246,571	251,242	252,948



Please refer to *Workforce Trends of Registered Nurses in Canada, 2006* for more detailed information.

Notes

Data in this table may have been revised due to HPDB system enhancements.

n/a Not applicable.

^ Northwest Territories and Nunavut data are combined.

Prior to 2001, Nunavut did not exist; therefore, Northwest Territories and Nunavut data are combined.

1 Provincial data exclude secondary registrations that do not reflect the primary jurisdiction of employment. These secondary registrations are retained in the territorial data for RNs employed in nursing in the territories. CIHI reports the “employed in nursing” figure in its RN publications, media releases, ad-hoc requests and on the CIHI website. The “employed in nursing” figure included employment in direct care, administration, education and research. Some data between 1997 and 2000 have been revised from figures previously published by Statistics Canada and/or CIHI.

Source

Regulated Nursing Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1

Percentage Distribution of Registered Nurses by Sex and Province/Territory, Canada, 2006

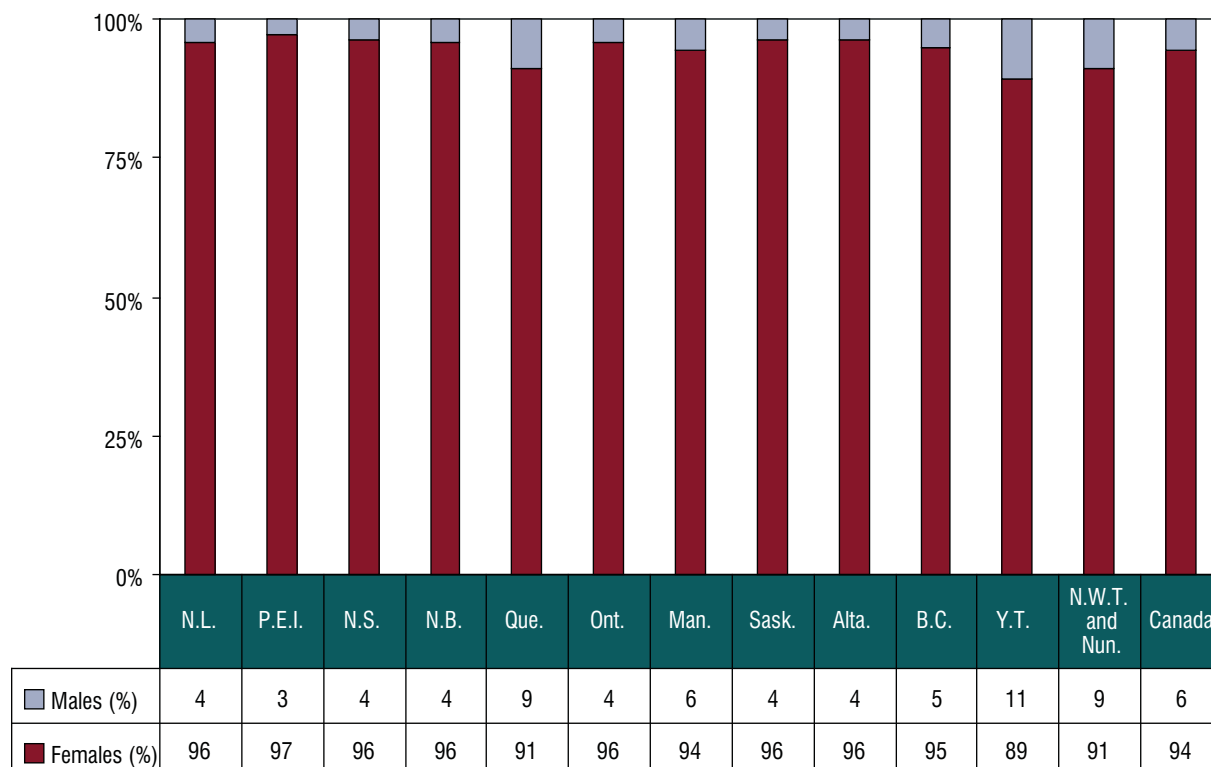
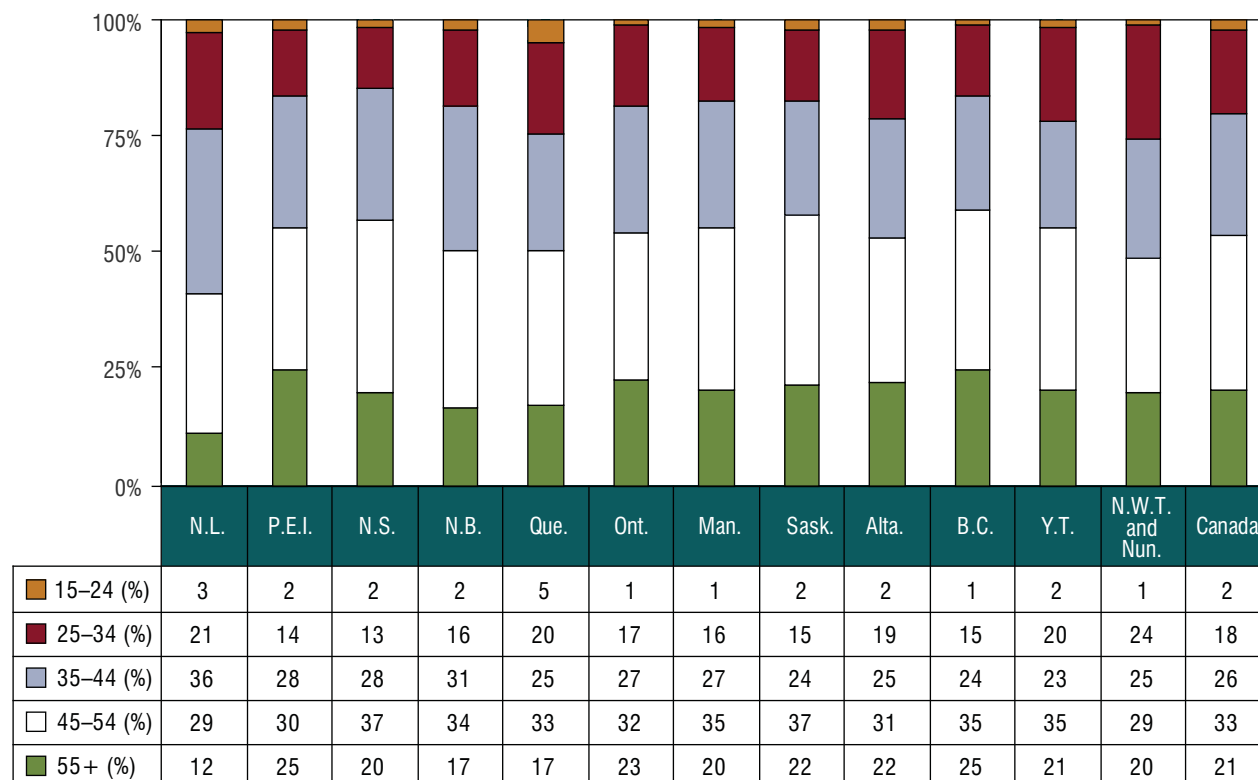


FIGURE 2

Percentage Distribution of Registered Nurses by 10-Year Age Groups and Province/Territory, Canada, 2006

**Note**

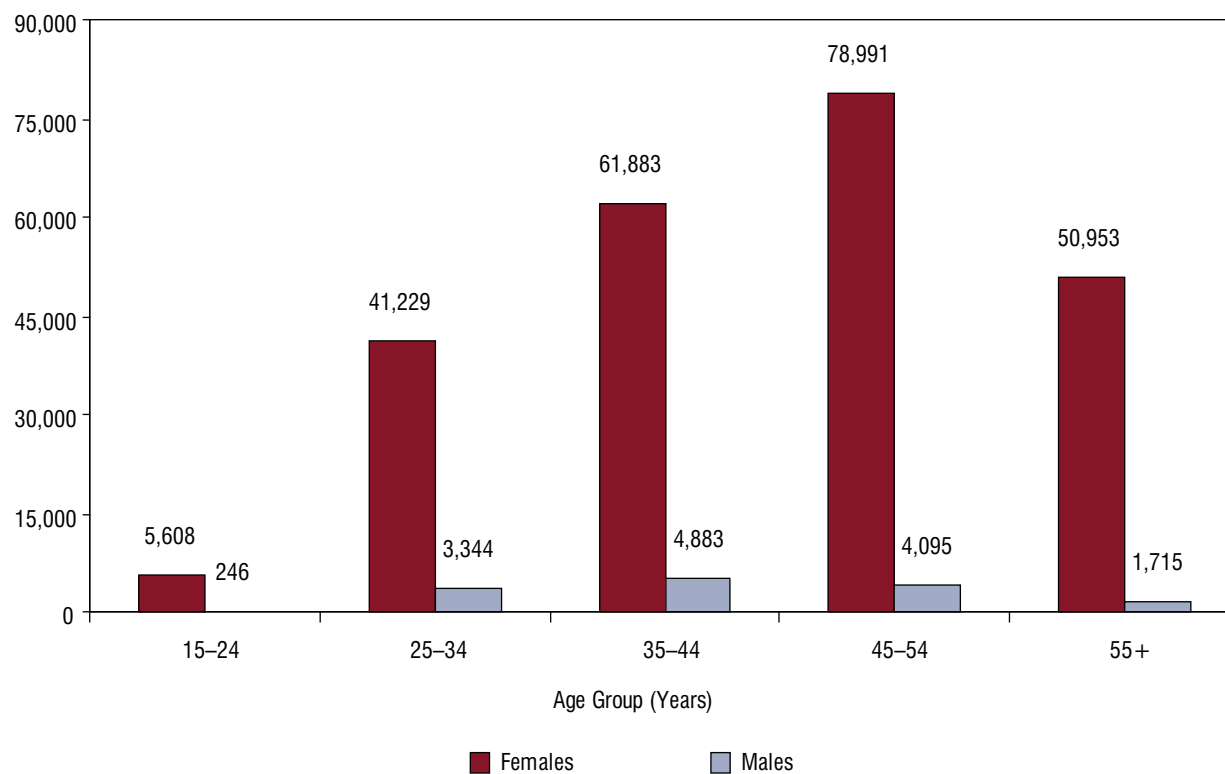
Totals may not sum to 100% due to rounding.

Source

Regulated Nursing Database, Canadian Institute for Health Information.

FIGURE 3

Number of Registered Nurses by Sex and 10-Year Age Groups, Canada, 2006



Graduate Trends

Number of Registered Nurse Graduates
by Program and Province/Territory,¹ Canada, 1997 to 2006

TABLE 2

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador										
Diploma	211	198	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
BSc	45	48	40	170	176	165	191	223	197	188
Prince Edward Island										
BSc	26	17	15	18	25	59	39	51	51	56
Nova Scotia										
BSc	67	82	161	138	148	141	200	254	246	262
New Brunswick										
Diploma	223	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
BSc	88	87	169	134	181	200	226	282	328	375
Quebec										
Diploma	1,742	1,476	1,198	1,424	1,234	2,092	2,359	2,266	2,508	2,457
BSc	241	249	241	105	285	262	356	447	495	508
Ontario										
Diploma	1,776	1,598	1,164	1,038	1,576	1,904	2,095	895	n/a	n/a
BSc	634	514	525	501	515	674	753	891	1,575	1,919
Manitoba										
Diploma	76	7	0	0	0	72	70	**	**	**
BSc	111	101	119	146	205	257	357	338	338	282
Saskatchewan										
Diploma	67	50	14	..	*	n/a	n/a	n/a	n/a	n/a
BSc	63	55	133	138	147	206	192	227	224	214
Alberta										
Diploma	101	70	73	93	142	135	256	271	235	193
BSc	580	385	436	466	469	575	561	883	842	937
British Columbia										
Diploma	309	187	145	169	128	133	128	163	100	n/a
BSc	251	403	400	276	398	367	619	634	792	870
Nunavut										
Diploma	n/a	n/a	n/a	n/a	**	25	27	*	*	*
CANADA	6,611	5,527	4,833	4,816	5,629	7,267	8,429	7,825	7,931	8,261

Notes

.. Data were not available.

n/a Information was not applicable.

* Value suppressed in accordance with Canadian Nursing Association (CNA) privacy policy; cell value is from 1 to 4.

** Value suppressed to ensure confidentiality; cell value is 5 or greater.

1 Information was gathered through a CNA survey. Please note that the information provided in this table should be interpreted with caution, as any variation in the number of graduates of nurse practitioner programs may be caused by differing response rates by year, and thus may not necessarily reflect increases or decreases in the total number of graduates.

Source

Canadian Nursing Association/Canadian Association of Schools of Nursing, National Student and Faculty Survey of Canadian Schools of Nursing.

Sources

Table 1

Regulated Nursing Database,
Canadian Institute for
Health Information.

Table 2

Canadian Nursing Association/
Canadian Association of Schools
of Nursing, National Student and
Faculty Survey of Canadian
Schools of Nursing.

Figure 1

Calculated from data in
the regulated Nursing
Database, Canadian Institute
for Health Information.

Figure 2

Calculated from data in
the regulated Nursing
Database, Canadian Institute
for Health Information.

Figure 3

Calculated from data in
the regulated Nursing
Database, Canadian Institute
for Health Information.

Registered psychiatric nurses (RPNs) provide services to individuals whose primary care needs relate to mental and developmental health. RPNs' duties include planning, implementing and evaluating therapies and programs on the basis of psychiatric nursing assessments.

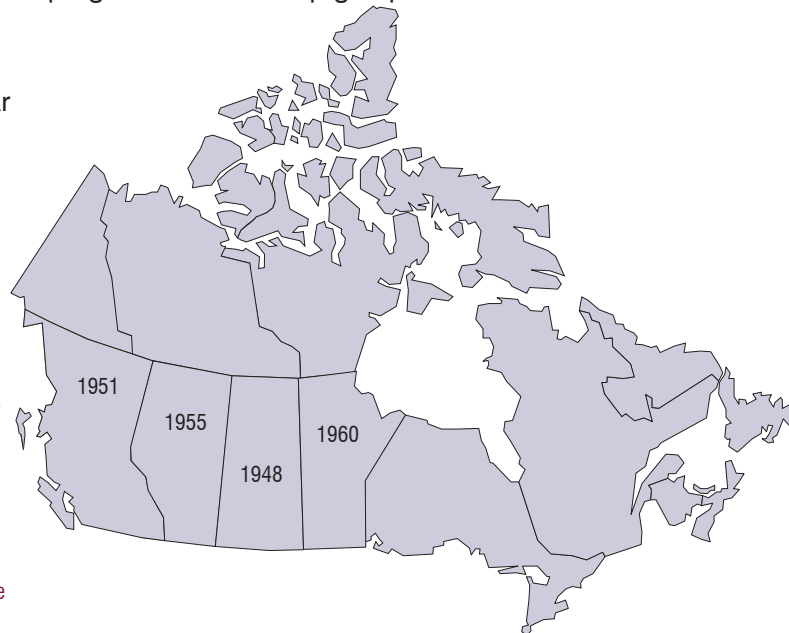
Registered Psychiatric Nurses

Practice Setting

Some of the areas of practice and employment settings where registered psychiatric nurses work include acute psychiatry, long-term geriatric care and home care, residential and community programs for the developmentally handicapped, forensic psychiatry, institutional and community-based corrections, community mental-health programs, primary and secondary special education programs, employee-assistance programs, child guidance and family-therapy clinics, chemical-dependency programs, hospitals and special-care homes, women's shelters and clinics, residential and community adolescent programs, consultation and private practice, psychiatric nursing education programs, sheltered workshops, rehabilitation programs and vocational programs, administration, personnel and staff development programs and self-help groups.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for RPNs to register with a provincial regulatory authority as a condition of practice. Registered psychiatric nursing is a distinct regulated nursing profession; RPNs are educated and regulated separately from other regulated nursing professionals in the four western provinces of Canada (Manitoba, Saskatchewan, Alberta and B.C.).



Supply Trends

Number of Registered Psychiatric Nurses¹
by Province, Western Canada, 1997 to 2006

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Manitoba	1,077	1,055	1,034	1,028	1,011	967	955	963	952	956
Saskatchewan	1,137	1,112	1,089	1,051	1,038	930	939	935	933	900
Alberta	1,158	1,155	1,148	1,136	1,186	1,081	1,128	1,123	1,125	1,144
British Columbia²	2,210	2,200	2,179	2,201	2,181	2,159 ²	2,086	2,100	1,954	2,051
WESTERN CANADA	5,582	5,522	5,450	5,416	5,416	5,137	5,108	5,121	4,964	5,051

Series Break



Please refer to *Workforce Trends of Registered Psychiatric Nurses in Canada, 2006* for more detailed information.

Notes

- Figures from 1997 to 2001 represent total active registered, regardless of employment status. Data from 2002 to 2006 represent a data series break and reflect registered, active practising and employed in registered psychiatric nursing. The 2002 to 2006 data are not directly comparable to the data presented for 1997 to 2001 due to different collection methodologies. CIHI data will differ from provincial data due to the CIHI collection, processing and reporting methodology.
- In 2002, B.C. did not submit information regarding employment status; in that year all registered psychiatric nurses in B.C. are considered to be employed in psychiatric nursing.

Sources

Health Personnel Database and regulated Nursing Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1

Percentage Distribution of Registered Psychiatric Nurses by Sex and Province, Western Canada, 2006

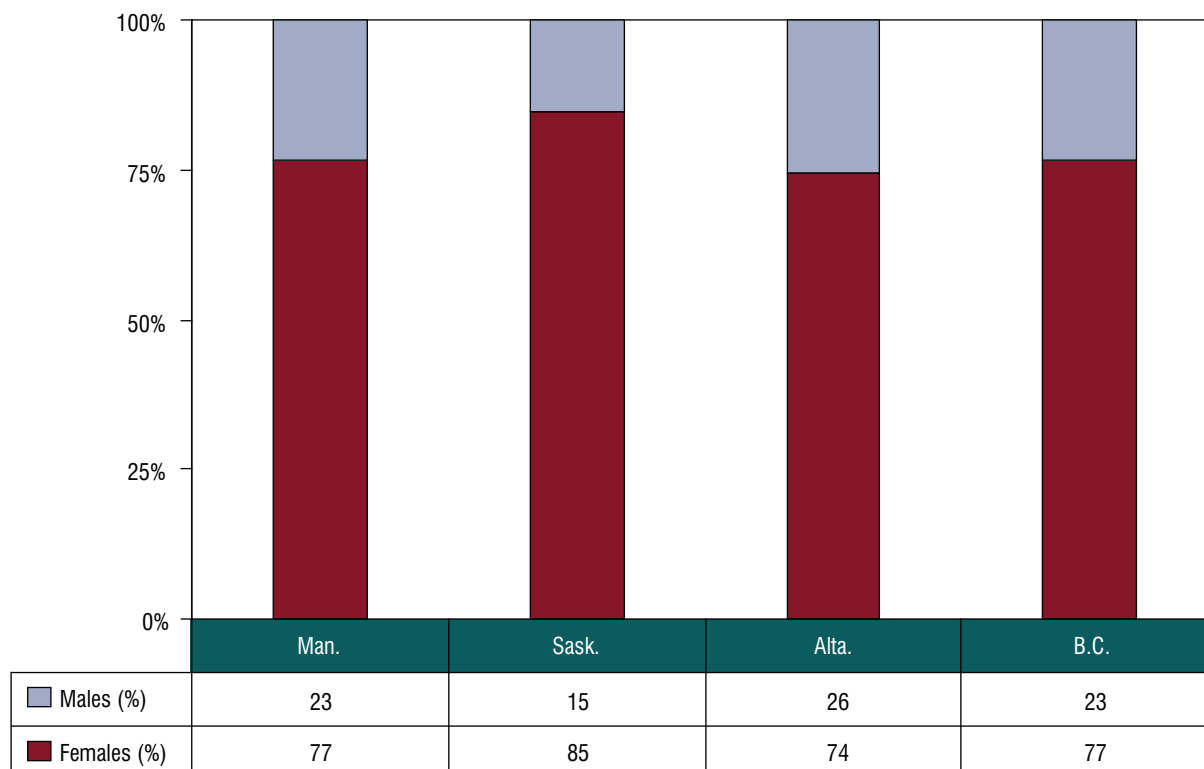
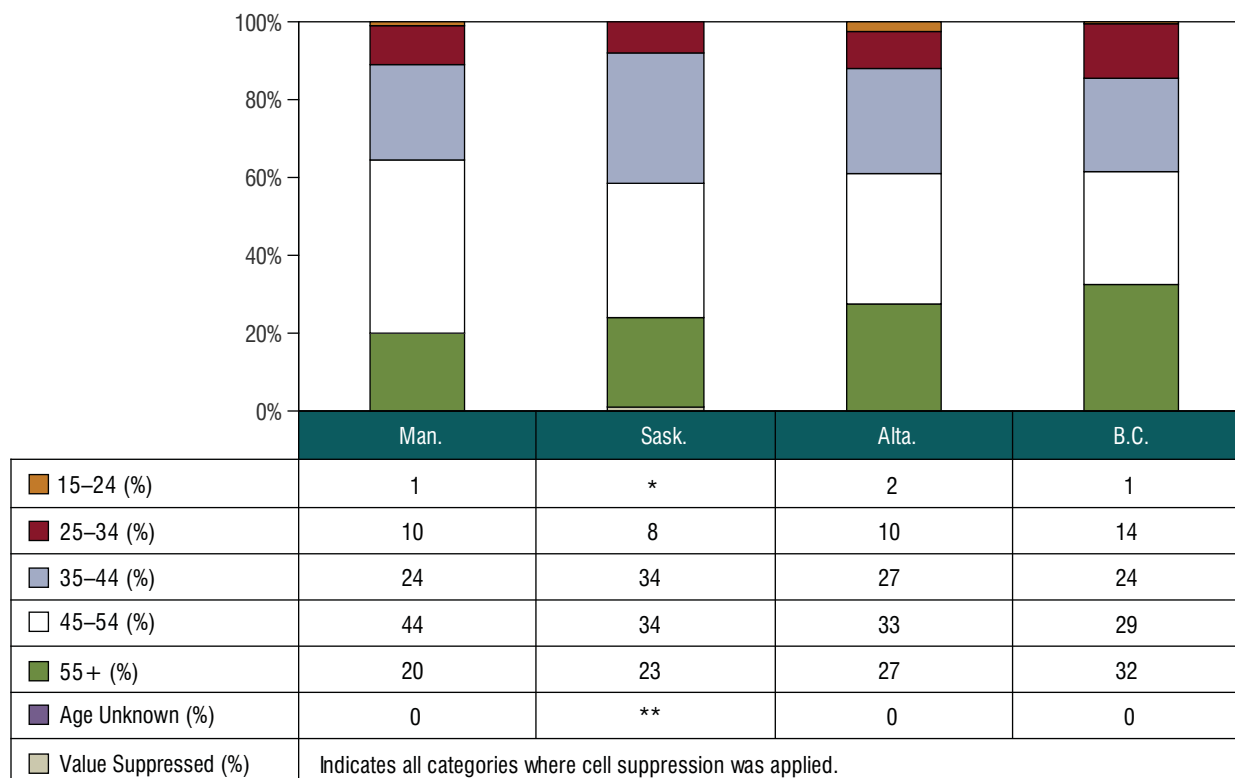


FIGURE 2

Percentage Distribution of Registered Psychiatric Nurses by 10-Year Age Groups and Province, 2006

**Notes**

Totals may not sum to 100% due to rounding. RPNs who did not state their year of birth are excluded from this figure.

* Value suppressed in accordance with CIHI privacy policy: cell value is from 1 to 4.

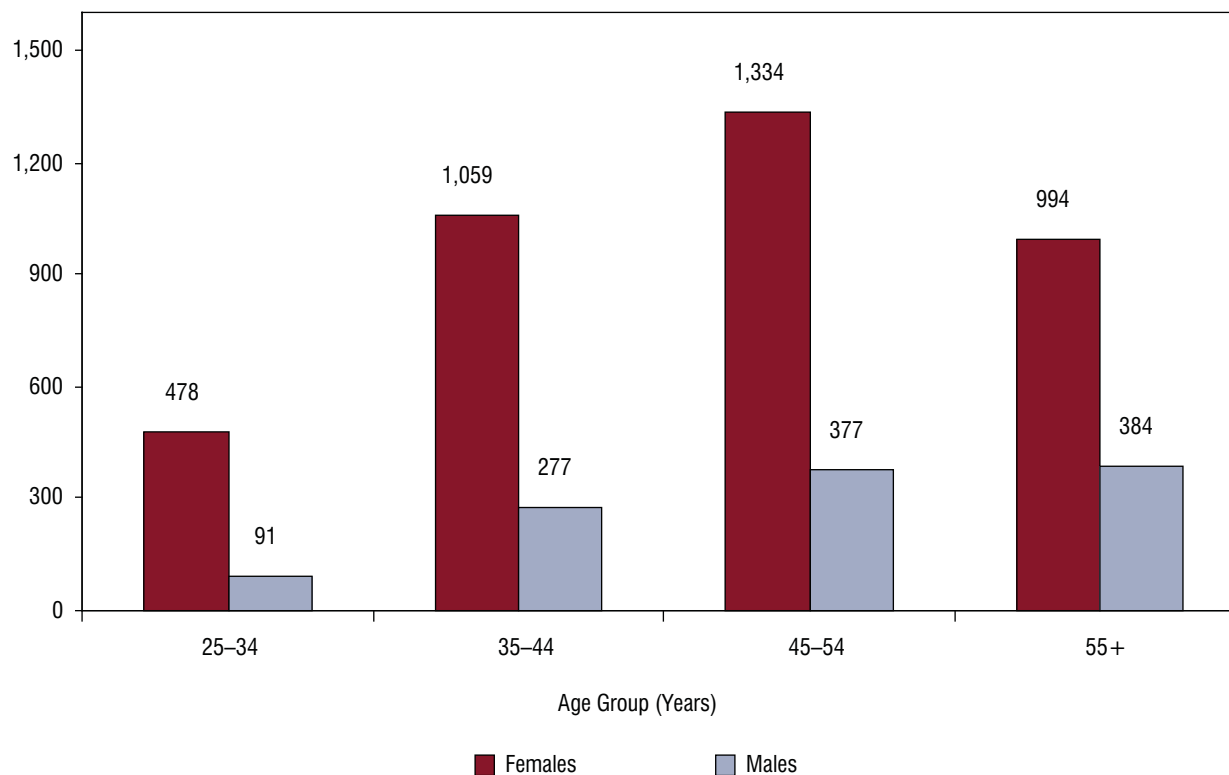
** Value suppressed in accordance with CIHI privacy policy: cell value is greater than 5.

Source

Regulated Nursing Database, Canadian Institute for Health Information.

FIGURE 3

Number of Registered Psychiatric Nurses by Sex and 10-Year Age Groups, Western Canada, 2006

**Notes**

Includes only Manitoba, Saskatchewan, Alberta and B.C. Information on the rest of the provinces/territories was not available.

The age group 15 to 24 was not included due to value suppression to ensure confidentiality.

Source

Regulated Nursing Database, Canadian Institute for Health Information.

Graduate Trends

Number of Graduates of Registered Psychiatric Nursing Programs¹ by School of Graduation, 1997 to 2006

TABLE 2

School	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Manitoba										
Brandon University	n/a	8	7	15	16	16	14	27	17	45
Alberta										
Grant MacEwen College	14	14	16	15	17	27	26	28	56	30
British Columbia										
Douglas College	73	33	63	61	59	63	56	68	85	105
Thompson Rivers College	4	3	2	6	5	6	3	4	4	7
CANADA	91	58	88	97	97	112	99	127	162	187

Notes

n/a Information was not applicable.

¹ Please note that this is the first reporting on graduates of RPN programs. This is a comprehensive list of schools offering registered psychiatric nursing programs, with the exception of Kwantlen University (B.C.), which had its first intake of generic students in May 2006 and will graduate its first class in 2010, and Stenberg College (B.C.), which will graduate its first class in 2008.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

Health Personnel Database and regulated Nursing Database, Canadian Institute for Health Information.

Table 2

Individual universities and colleges: Brandon University, Grant MacEwen College, Douglas College and Thompson Rivers College.

Figure 1

Calculated from data in the regulated Nursing Database, Canadian Institute for Health Information.

Figure 2

Calculated from data in the regulated Nursing Database, Canadian Institute for Health Information.

Figure 3

Calculated from data in the regulated Nursing Database, Canadian Institute for Health Information.

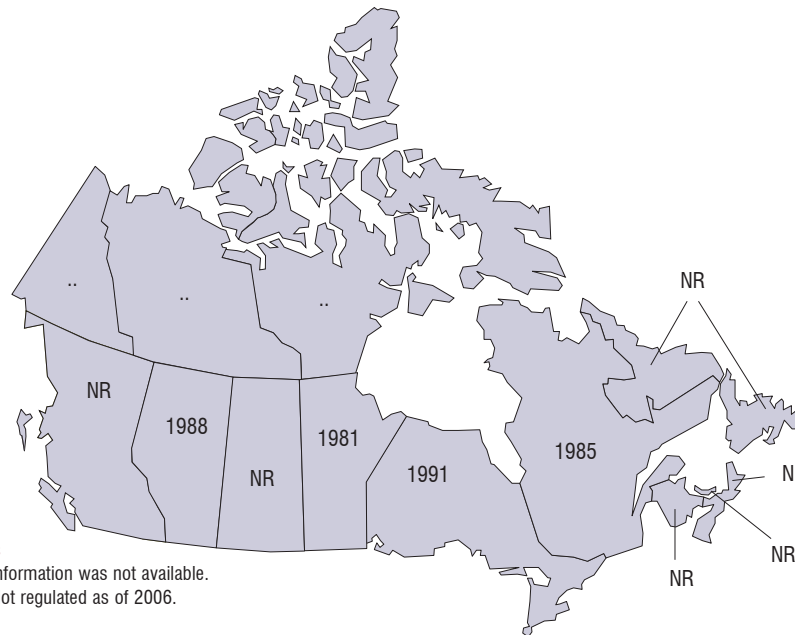
Respiratory therapists (RTs) provide direct patient care by evaluating, treating and maintaining cardiopulmonary function.

Practice Setting

Most respiratory therapists work in hospitals in diverse clinical settings. They also work in home care; clinics; teaching, research, rehabilitation and diagnostic clinics and sleep-disorder laboratories; medical equipment sales and services; and chronic disease and primary care networks.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for respiratory therapists to register with a provincial/territorial regulatory authority as a condition of practice.



Supply Trends

Number of Registered Respiratory Therapists¹
by Province/Territory, Canada, 1997 to 2006

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador ^{†,5}	65	78	50	60	70	64	67	68	74	81
Prince Edward Island [†]	14	17	14	13	14	14	14	14	16 ¹⁰	14
Nova Scotia ^{†,8}	186	223	176	179	152	154	150	184	141	132
New Brunswick ⁶	170	193	177	192	213	168	167	220	221	224
Quebec ¹¹	2,221 [†]	2,457	2,534	2,602	2,651	2,651	2,807	2,925	3,047	3,171
Ontario ⁹	1,658	1,727	1,812	1,816	1,846	1,923	2,083	2,198	2,290	2,374
Manitoba ^{4,14}	195	189	200	201	197	200	233	234	244	212
Saskatchewan ^{†,12}	94	116	95	93	98	99	97	103	97	116
Alberta ²	680	812	812	832	867	895	870	922	982	1,021
British Columbia ^{†,3}	304	540	384	374	373	401	488	402	523	537
Y.T., N.W.T. and Nun. [†]	1	4	4	4	3	3	4	4	1 ⁷	4 ¹³
CANADA[†]	5,588	6,356	6,258	6,366	6,484	6,572	6,980	7,274	7,636	7,886

Notes

- † Indicates the presence of voluntary membership data.
 .. Information not available.
- 1 This table includes voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation that outlines how the information within the publication can be most effectively interpreted, analyzed and used.
- 2 Alberta: 2005 data as of February 26, 2006; 2006 data as of March 31, 2007.
- 3 B.C.: 2005 data as of March 1, 2006.
- 4 Manitoba: 2003 data as of April 29, 2004; 2005 data as of March 31, 2006.
- 5 Newfoundland and Labrador: 2003 data as of November 2, 2003; 2004 data as of November 9, 2004; 2005 and 2006 data as of October of the following years.
- 6 New Brunswick: 2003 data as of April 30, 2004; 2004 data as of December 15, 2004; 2005 data as of October 1, 2005.
- 7 Data only included one RT in the Northwest Territories as of July 6, 2005.
- 8 Nova Scotia: 2003 data as of January 15, 2004; 2005 data as of February 28, 2006; 2006 data as of February 19, 2007.
- 9 Ontario: 2003 data as of February 29, 2004; 2004 data as of February 28, 2005; 2005 data as of March 7, 2006.
- 10 P.E.I.: 2005 data as of July 6, 2005.
- 11 Quebec: Non-practising respiratory therapists are not included in the figures for Quebec; 1998 to 2002 and 2004 to 2006 data as of March of the following years; 2003 data as of May 5, 2004.
- 12 Saskatchewan: 2003 data as of March 31, 2004; 2005 data as of August 2005; 2006 data as of June 7, 2007.
- 13 Data included one RT in the Yukon and three RTs in the Northwest Territories and Nunavut.
- 14 Represents active registered respiratory therapists.

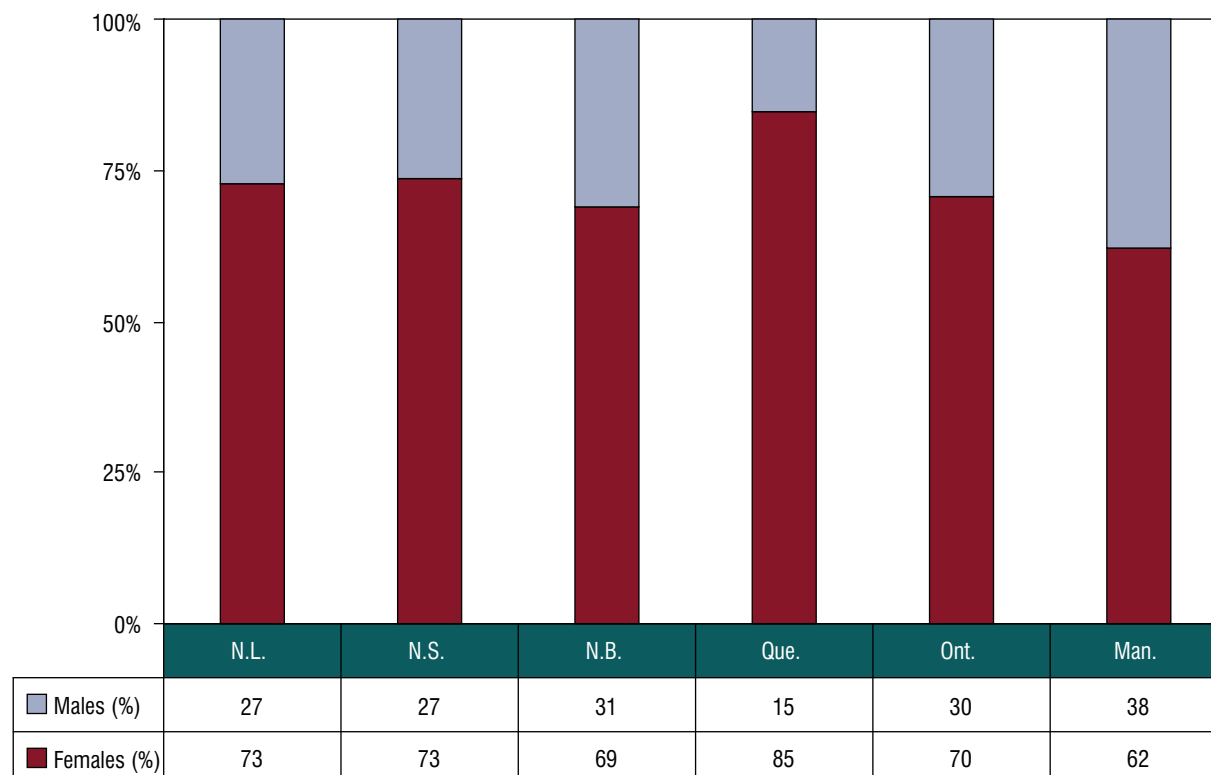
Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1

Percentage Distribution of Respiratory Therapists by Sex and Selected Provinces, 2006



Note

Information on the other provinces/territories was not available.

Source

Health Personnel Database, Canadian Institute for Health Information.

Graduate Trends

Information is not available at this time.

Sources

Table 1

1997: Canadian Society of Respiratory Therapists, Manitoba Association of Registered Respiratory Therapists Inc., College of Respiratory Therapists of Ontario, New Brunswick Association of Respiratory Therapists Inc. and Newfoundland and Labrador Association of Respiratory Therapists.

1998 to 2000: Canadian Society of Respiratory Therapists, Ordre professionnel des inhalothérapeutes du Québec, Manitoba Association of Registered Respiratory Therapists Inc., College and Association of Respiratory Therapists of Alberta, College of Respiratory Therapists of Ontario, New Brunswick Association of Respiratory Therapists Inc. and Newfoundland and Labrador Association of Respiratory Therapists.

2001 to 2006: Ordre professionnel des inhalothérapeutes du Québec, Manitoba Association of Registered Respiratory Therapists Inc., British Columbia Society of Respiratory Therapists, College and Association of Respiratory Therapists of Alberta, College of Respiratory Therapists of Ontario, New Brunswick Association of Respiratory Therapists Inc., Newfoundland and Labrador Association of Respiratory Therapists, Saskatchewan Association of Respiratory Therapists (2003 and 2004) and Respiratory Therapists Society of Nova Scotia (2003 to 2006).

Figure 1

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Social workers promote social changes aimed at improving conditions that affect the health and well-being of individuals, families, groups and communities; they provide counselling, therapy and problem-solving interventions to create functional relationships between the system and those who interact with it.

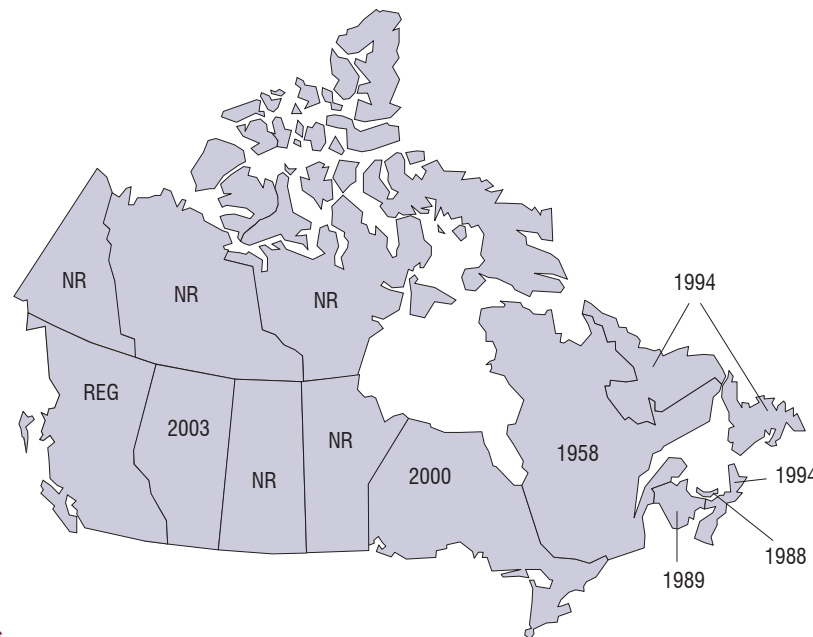
Social Workers

Practice Setting

Social workers are usually employed in hospitals, community health centres, mental-health clinics, schools, advocacy organizations, government departments, social-service agencies, child-welfare settings, family-service agencies, correctional facilities, social housing organizations, family courts, employee-assistance and private counselling programs, school boards and consultation agencies.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for social workers to register with a provincial/territorial regulatory authority as a condition of practice.



Notes

NR Not regulated as of 2004.

REG Regulated in 2004, but year of regulation unknown.



Supply Trends

Number of Registered Social Workers¹
by Province/Territory, Canada, 1997 to 2006

TABLE 1

	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador ⁵	753	838	870	946	973	976	1,036	1,032	1,062	1,133
Prince Edward Island ¹¹	185 [†]	190 [†]	195	195	198	198	204	215	198 ¹⁴	225
Nova Scotia	1,167	1,295	1,392	1,441	1,471	1,496	1,524	1,566	1,531	1,544 ⁸
New Brunswick ⁵	1,208	1,205	1,238	1,243	1,224	1,348	1,367	1,321	1,463	1,487
Quebec ¹²	4,275	4,323	4,564	4,721	4,765	4,748	5,189 ¹⁴	5,608 ¹⁴	6,424 ¹⁵	6,811
Ontario ¹⁰	3,042 [†]	3,038 [†]	3,250 [†]	5,449	6,896	7,980	9,092	10,348	10,189	10,450
Manitoba [†]	504	524	487	487	511	530 ⁴	525	561	591	515
Saskatchewan [†]	453	856	923	930	976	1,050	1,004	1,019	1,161	1,118
Alberta ²	1,631	1,829	2,090	3,108	4,171	4,367	4,817	5,436	5,490 ¹⁴	5,749
British Columbia ³	1,257 [†]	1,270 ⁹	1,277	1,304	1,361	1,383	1,521	1,583	1,732	1,938
Yukon ^{†, 13}	55	54	54	26	16	25	..	..	28	..
Northwest Territories ^{†, 7}	66	85	69	65	76	77	..	..	77	..
Nunavut ^{†, 9}	..	..	..	13	10	14	..	..	20	..
CANADA[†]	14,596	15,507	16,409	19,928	22,648	24,192	26,279	28,689	29,966	30,970

Notes

† Indicates the presence of voluntary membership data.
.. Information was not available.

1 This table includes voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation that outlines how the information within the publication can be most effectively interpreted, analyzed and

used. Please note that the regulatory environment for social workers is complex in Canada. Even in provinces with regulation, not all social workers may be required to register as a condition of practice. The titles "social worker" and "registered social worker" vary by province/territory. For complete information please contact the Canadian Association of Social Workers (CASW).

- 2 Alberta: 2000: increases in Alberta due to mandatory registration and requirement of being a member of the provincial association; regulation came into effect in 2003; 2003 data as of September 14, 2004; 2004 data as of June 6, 2005; 2005 data as of March 31, 2006; 2006 data as of February 26, 2007.
- 3 B.C.: 1997 data are from the British Columbia Association of Social Workers.

- 4 Manitoba: 2002 data as of November 13, 2002.
- 5 New Brunswick: 1998 to 2002 data as of March 31 of the following years; 2005 data as of February 27, 2006; 2006 data as of March 26, 2007.
- 6 Newfoundland and Labrador: 1997 to 2001 data as of February 28 of the following years; 2002 data as of November 14, 2002; 2003 data as of October 12, 2004; 2004 data as of April 6, 2005; 2005 data as of February 28, 2006.
- 7 Northwest Territories: 2000 and 2001 data as of March 31 of the following years; 2002 data as of February 23, 2003; 2005 data as of March 31, 2006.
- 8 Nova Scotia: 2006 data as of April 6, 2007.
- 9 Nunavut: 2000 and 2001 data as of March 31 of the following years; 2002 data as of February 23, 2003; 2005 data as of March 31, 2006.
- 10 Ontario: 2000 to 2002 data do not include the number of social service workers; 2004 data include both social workers and social service workers.
- 11 P.E.I.: 1999 to 2002 data as of March 31 of the following years; 2003 data as of July 2004; 2004 data as of March 31, 2005; 2005 data as of January 31, 2006; 2006 data as of September 14, 2007.
- 12 Quebec: 1997 to 2001 data as of March 31 of the given years; 2002 data as of November 15, 2002; 2005 and 2006 data as of March 31 of the following years.
- 13 Yukon: 2000 and 2001 data as of March 31 of the following years; 2002 data as of February 23, 2003; 2005 data as of March 31, 2006.
- 14 Represents active registered social workers.
- 15 Represents employed active registered social workers.

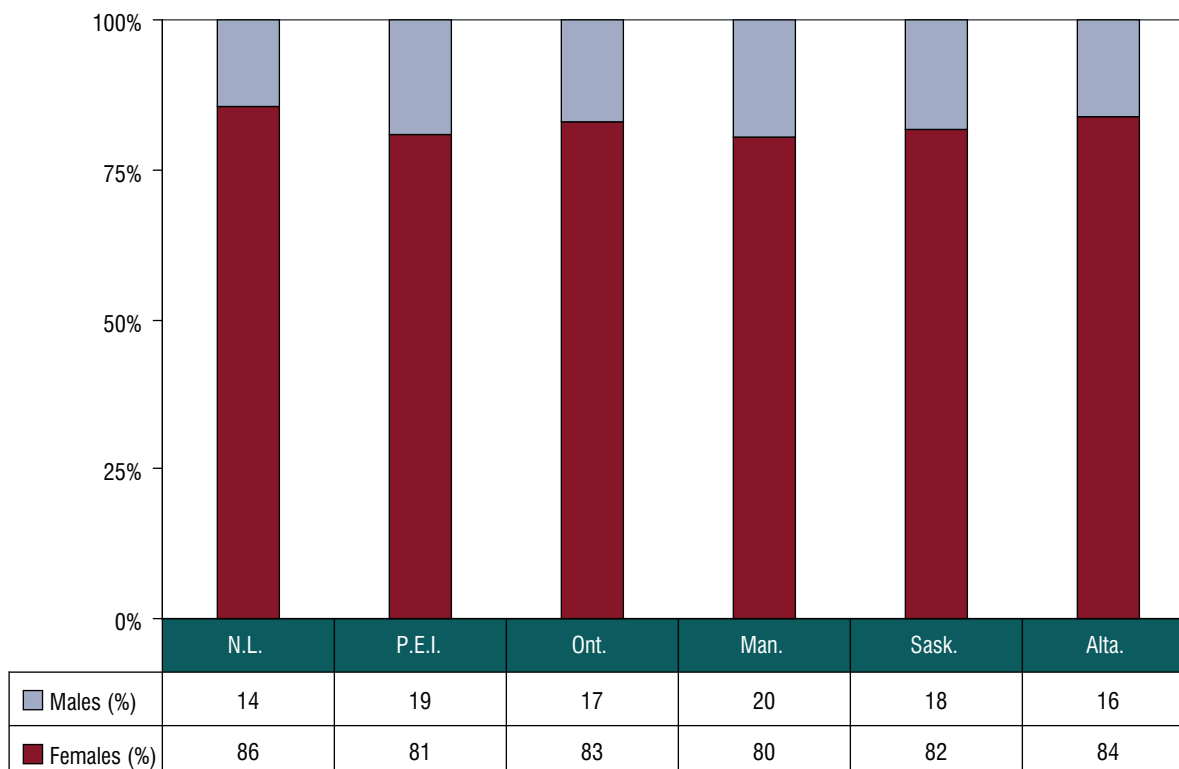
Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1

Percentage Distribution of Social Workers by Sex and Selected Provinces, 2006



Note
Information on the other provinces/territories was not available.

Source
Health Personnel Database, Canadian Institute for Health Information.

Graduate Trends

Number of Graduates of Undergraduate and Graduate Social Work Programs by School of Graduation, Canada, 2003 to 2006

TABLE 2

School	2003	2004	2005	2006
Newfoundland and Labrador				
Memorial University of Newfoundland	61	54	54	58
Nova Scotia				
Dalhousie University	90	115	123	119
New Brunswick				
St. Thomas University	47	46	43	45
Université de Moncton	38	38	44	53
Quebec				
McGill University	210	200	178	160
Université Laval	152	166	143	159
Université de Montréal	92	131	68	59
Université du Québec en Abitibi-Témiscamingue	..	..	..	34
Université du Québec à Chicoutimi	42	64	..	..
Université du Québec en Outaouais ⁴	49	46	94	74
Université du Québec à Montréal	118	121	115	114
Ontario				
Carleton University	110	115	103	116
Lakehead University	54	76	62	62
Laurentian University	22	21	55	44
McMaster University	79	89	64	69
Ryerson University	133	127	151	156
University of Ottawa	29	24	12	21
University of Toronto	161	145	153	151
University of Waterloo	27	28	33	39
University of Western Ontario ²	43	43	41	40
University of Windsor	56	70	63	69
Wilfrid Laurier University	121	104	128	108
York University	132	129	143	232

(continued)

Notes

Data in this table may have been revised due to HPDB system enhancements.

This is a comprehensive list of schools offering social work programs. Information prior to 2003 was not available.

.. Information was not available.

1 University of Regina also has a Master of Aboriginal Social Work (2003: 4 graduates; 2004: 4 graduates) and a Bachelor of Indian Social Work (2003: 47 graduates; 2004: 42 graduates; 2005: 44 graduates; 2006: 50 graduates).

2 King's University College at the University of Western Ontario also offers a part-time Master of Social Work program. The first group of students graduated in fall 2006.

3 University of Victoria: 2005 and 2006 data as of January 23, 2007.

4 Université du Québec en Outaouais: 2005 and 2006 data as of February 6, 2007.

5 The First Nations University of Canada offers a Bachelor of Indian Social Work and a Master of Indian Social Work.

6 Thompson Rivers University was formally inaugurated on April 1, 2005, and is the result of the merger of the University College of the Cariboo and British Columbia Open University.

Source

Health Personnel Database, Canadian Institute for Health Information.

TABLE 2

Number of Graduates of Undergraduate and Graduate Social Work Programs by School of Graduation, Canada, 2003 to 2006 (cont'd)

	2003	2004	2005	2006
Manitoba				
University of Manitoba	159	35	155	204
Saskatchewan				
First Nations University of Canada ⁵	51	46	46	53
University of Regina ¹	185	139	207	230
Alberta				
University of Calgary	261	267	244	234
British Columbia				
Okanagan University College	32	41	41	43
Thompson Rivers University ⁶	46	43	61	57
University College of the Fraser Valley	21	29	22	20
University of British Columbia	102	87	90	81
University of Northern British Columbia	58	34	59	42
University of Victoria ³	156	140	153	131
CANADA	2,937	2,813	2,984	3,077

Notes

Data in this table may have been revised due to HPDB system enhancements.

This is a comprehensive list of schools offering social work programs. Information prior to 2003 was not available.

.. Information was not available.

- 1 University of Regina also has a Master of Aboriginal Social Work (2003: 4 graduates; 2004: 4 graduates) and a Bachelor of Indian Social Work (2003: 47 graduates; 2004: 42 graduates; 2005: 44 graduates; 2006: 50 graduates).
- 2 King's University College at the University of Western Ontario also offers a part-time Master of Social Work program. The first group of students graduated in fall 2006.
- 3 University of Victoria: 2005 and 2006 data as of January 23, 2007.
- 4 Université du Québec en Outaouais: 2005 and 2006 data as of February 6, 2007.
- 5 The First Nations University of Canada offers a Bachelor of Indian Social Work and a Master of Indian Social Work.
- 6 Thompson Rivers University was formally inaugurated on April 1, 2005, and is the result of the merger of the University College of the Cariboo and British Columbia Open University.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

Newfoundland and Labrador Association of Social Workers, Nova Scotia Association of Social Workers, New Brunswick Association of Social Workers, Prince Edward Island Social Work Registration Board, Ordre professionnel des travailleurs sociaux du Québec, Manitoba Association of Social Workers/ Manitoba Institute of Registered Social Workers, Saskatchewan Association of Social Workers, Alberta College of Social Workers, Board of Registration for Social Workers of British Columbia, Association of Social Workers in Northern Canada, Ontario College of Social Workers and Social Service and Canadian Association of Social Workers.

Table 2

Individual schools and universities: Memorial University of Newfoundland, Dalhousie University, St. Thomas University, Université de Moncton, McGill University, Université Laval, Université de Montréal, Université du Québec en Abitibi-Témiscamingue, Université du Québec à Chicoutimi, Université du Québec en Outaouais, Université du Québec à Montréal, Carleton University, Lakehead University, Laurentian University, McMaster University, Ryerson University, University of Ottawa, University of Toronto, University of Waterloo, University of Western Ontario, University of Windsor, Wilfrid Laurier University, York University, University of Manitoba, First Nations University of Canada, University of Regina, King's University College, University of Calgary, Okanagan University College, Thompson Rivers University, University College of the Fraser Valley, University of British Columbia, University of Northern British Columbia and University of Victoria.

Figure 1

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Speech-language pathologists (SLPs) are autonomous professionals who have expertise in the areas of human communication, swallowing and associated disorders. They are engaged in the prevention, identification, assessment, treatment, counselling, research into, management of and education about communication and swallowing disorders. This includes disorders of speech, language, cognition, voice and fluency in individuals from all age groups. Services can be provided directly to the client or to those who interact with the client.

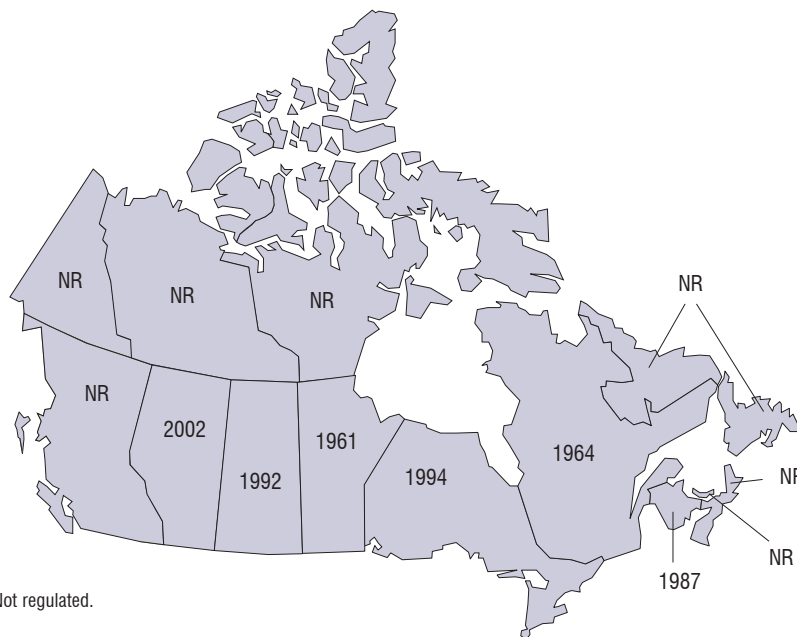
Speech-Language Pathologists

Practice Setting

Speech-language pathologists work independently or on interprofessional teams in various settings such as hospitals, rehabilitation centres, mental health facilities, community health centres, nursing homes, child-care facilities, early intervention programs, schools, universities, research facilities, private and group homes and in private practice.

Regulatory Environment

The map on the right indicates the first year in which it became mandatory for speech-language pathologists to register with a provincial regulatory body as a condition of practice.



Notes
NR Not regulated.



Supply Trends

Number of Registered Speech-Language Pathologists¹
by Province/Territory, Canada, 2001 to 2006

TABLE

1

	2001	2002	2003	2004	2005	2006
Newfoundland and Labrador ^{†,6}	84	86	90	89	96	95
Prince Edward Island [†]	17	16	17 ⁹	22 ⁹	25 ⁹	26
Nova Scotia [†]	156	..	160 ⁸	164 ⁸	171 ⁸	174
New Brunswick ⁵	147	152	157	171	173	179
Quebec ¹⁰	969	1,015	1,112 ¹²	1,218	1,318	1,478
Ontario	1,954	2,051	2,215	2,296	2,385	2,487
Manitoba ⁴	257	268	362 ¹²	295	290	299
Saskatchewan	..	..	213	218	240	234
Alberta ²	665 [†]	831 [†]	846	888	921	936
British Columbia [†]	625 ³	685 ³	696 ³	737
Yukon ^{†,11}	10	9	11	10	10	10
Northwest Territories [†]	6	6	6 ⁷	6 ⁷	6 ⁷	6
CANADA[†]	4,265	4,434	5,814	6,062	6,331	6,661

Notes

Data in this table may have been revised due to HPDB system enhancements.

† Indicates the presence of voluntary membership data.

.. Information was not available.

Nunavut information was not available.

1 This table includes voluntary membership data (mandatory registration with the data provider is not a condition of employment); refer to the *HPDB Technical Report* for a detailed explanation that outlines how the information within the publication can be most effectively interpreted, analyzed and used. Information prior to 2001 was not available.

2 Alberta: In 2002, one member who was registered and held both audiologist and SLP designations counted as an SLP; 2004 data as of October 31, 2004; 2005 data as of May 5, 2006; 2006 data as of March 28, 2007.

3 B.C.: 2003 data as of July 1, 2003; in 2004, 153 speech-language pathologists did not indicate employment status and were not included; data as of June 29, 2004; 2005 data as of September 30, 2005.

4 Manitoba: 2001 and 2002 data as of September 30 of the given years; 2003 data as of October 23, 2003; 2004 data as of November 10, 2004.

5 New Brunswick: 2005 data as of February 16, 2006.

6 Newfoundland and Labrador: 2001 data as of August 2001; 2002 data as of March 1, 2002; 2003 data as of November 15, 2003; 2004 data as of May 17, 2005; 2005 data as of March 10, 2006.

7 Northwest Territories: 2003 data as of October 31, 2003; 2004 data as of October 31, 2004; 2005 data as of March 10, 2006.

8 Nova Scotia: 2003 data as of May 21, 2004; 2004 data as of May 17, 2005; 2005 data as of March 10, 2006.

9 P.E.I.: 2003 data as of May 7, 2004; 2004 data as of May 17, 2005; 2005 data as of March 10, 2006.

10 Quebec: 2001 and 2002 data as of October 22 of the same year; 2003 data as of March 31, 2003; 2005 data as of March 31, 2005.

11 Yukon: 2003 data as of May 14, 2004.

12 Represents active registered speech-language pathologists.

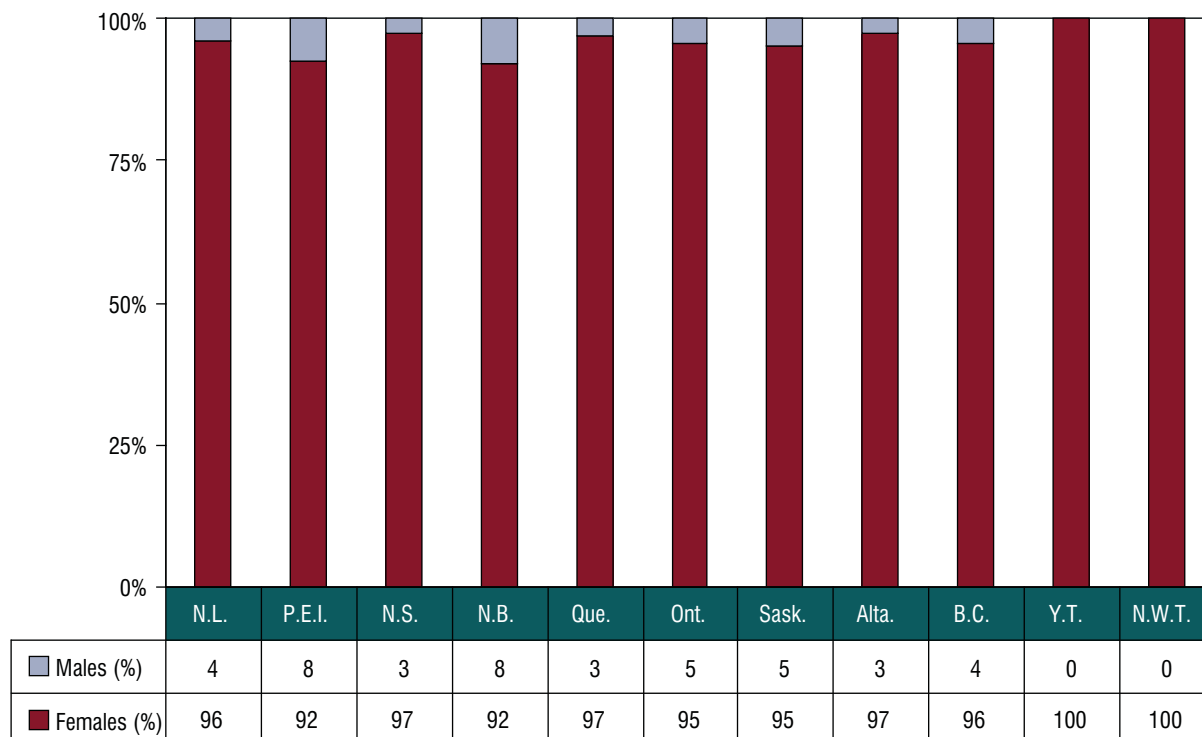
Source

Health Personnel Database, Canadian Institute for Health Information.

Demographic Trends

FIGURE 1

Percentage Distribution of Speech-Language Pathologists by Sex and Selected Provinces/Territories, 2006



Notes

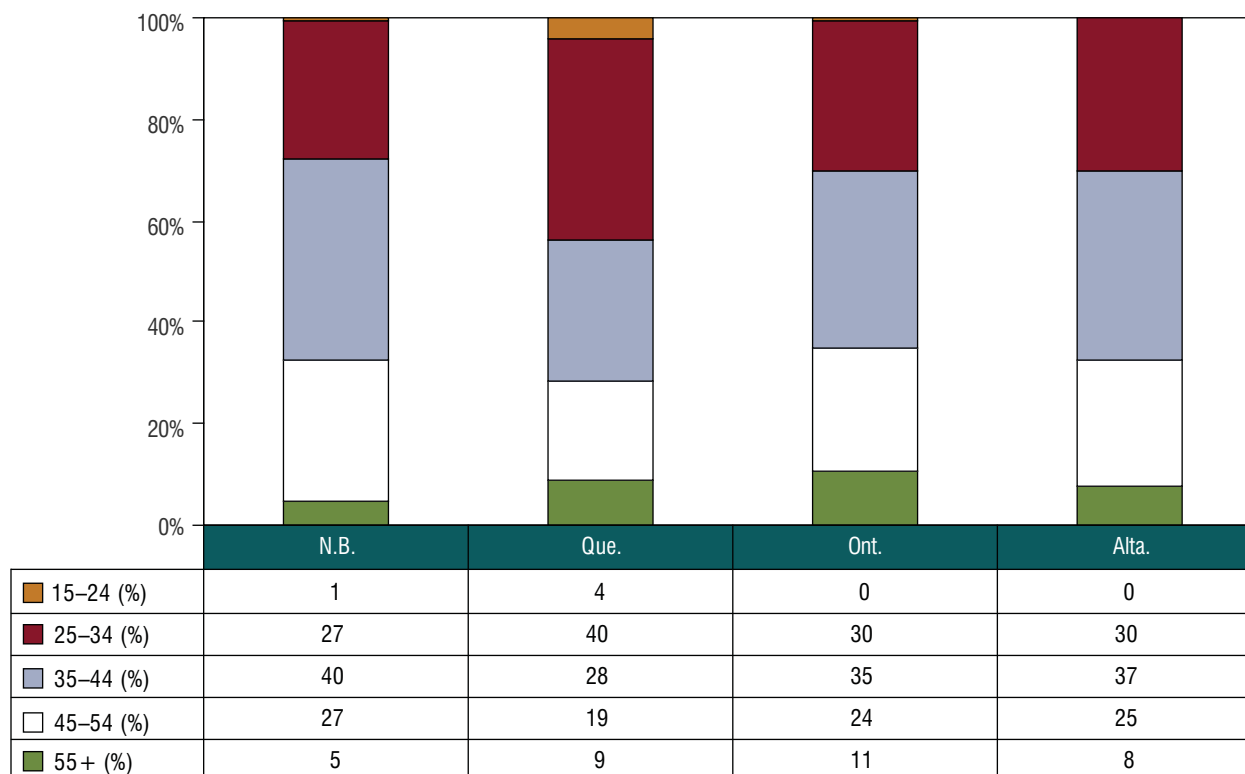
Manitoba was not included as gender information was not available.
 Nunavut information was not available.
 Quebec data included regular, temporary, associate, student and external speech-language pathologists.

Source

Health Personnel Database, Canadian Institute for Health Information.

FIGURE 2

Percentage Distribution of Speech-Language Pathologists by 10-Year Age Groups and Selected Provinces, 2006



Notes

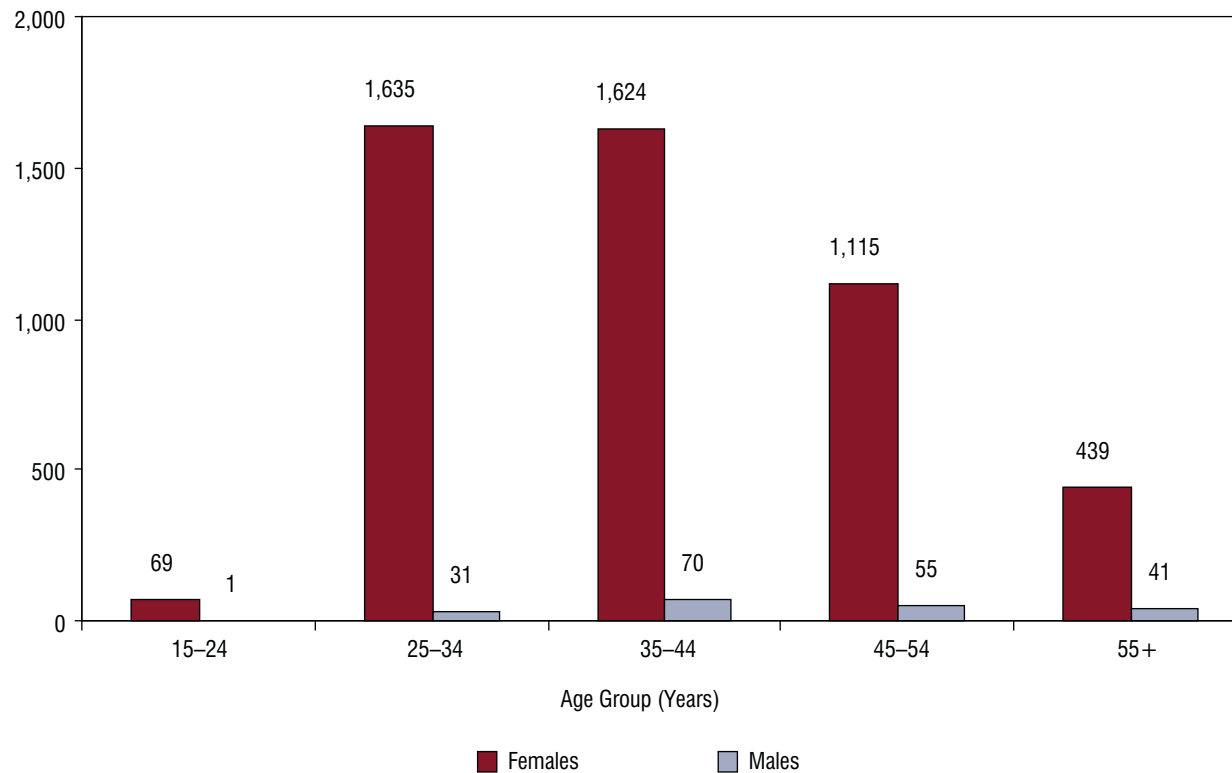
Information on the rest of the provinces/territories was not available. Quebec data included regular, temporary, associate, student and external speech-language pathologists.

Source

Health Personnel Database, Canadian Institute for Health Information.

FIGURE 3

Number of Speech-Language Pathologists by Sex and 10-Year Age Groups, Selected Provinces, 2006



Notes

Only included New Brunswick, Quebec, Ontario and Alberta. Information on the rest of the provinces/territories was not available. Quebec data included regular, temporary, associate, student and external speech-language pathologists.

Source

Health Personnel Database, Canadian Institute for Health Information.

Graduate Trends**Number of Graduates of Master of Speech-Language Pathology Programs¹ by School of Graduation, Canada, 2003 to 2006**TABLE **2**

School	2003	2004	2005	2006
Nova Scotia				
Dalhousie University ⁴	28	32	27	30
Quebec				
McGill University	24	23	21	21
Université de Montréal	50	46 ⁵	49	48
Université Laval ²	19	25	23	22
Ontario				
University of Ottawa	15	18	15	14
University of Toronto	22	31	29	37
University of Western Ontario	30	30	30	30
Alberta				
University of Alberta	38	41	38	37
British Columbia				
University of British Columbia	22 ³	30 ³	18	21
CANADA	248	276	250	260

Notes

Data in this table may have been revised due to HPDB system enhancements.

n/a Not applicable.

- 1** This is a comprehensive list of schools offering programs in speech-language pathology. University of Alberta and McGill University data may include PhD graduates.
- 2** Université Laval: First graduating class was in 2003.
- 3** University of British Columbia: 2003 and 2004 data include graduates from the combined audiology and speech sciences programs.
- 4** Dalhousie University: Includes graduates from combined audiology and speech-language pathology programs.
- 5** Université de Montréal: Among the 46 graduate students in 2004, 43 were from the speech-language pathology program and 3 were from the combined audiology and speech-language pathology programs.

Source

Health Personnel Database, Canadian Institute for Health Information.

Sources

Table 1

Provincial associations: Newfoundland and Labrador Association of Speech-Language Pathologists and Audiologists, Prince Edward Island Speech and Hearing Association, Speech and Hearing Association of Nova Scotia, New Brunswick Association of Speech-Language Pathologists and Audiologists, Ordre des orthophonistes et audiologistes du Québec, College of Audiologists and Speech-Language Pathologists of Ontario, Manitoba Speech and Hearing Association, Saskatchewan Association of Speech-Language Pathologists and Audiologists, Alberta College of Speech-Language Pathologists and Audiologists, British Columbia Association of Speech/Language Pathologists and Audiologists, Association of Northwest Territorial Speech-Language Pathologists and Audiologists and Yukon Speech-Language Pathology and Audiology Association.

Table 2

Individual schools and universities: Dalhousie University, McGill University, Université de Montréal, Université Laval, University of Ottawa, University of Toronto, University of Western Ontario, University of Alberta and University of British Columbia.

Figure 1

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Figure 2

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Figure 3

Calculated from data in the Health Personnel Database, Canadian Institute for Health Information.

Methodological Notes



Data Definitions

The definitions given below are used as mechanisms to standardize data collection and reporting for regulated and unregulated health professions within this report.

Regulated Health Professions	Unregulated Health Professions
<p>A regulated health profession is one that is covered by provincial/territorial and/or federal legislation and governed by a professional organization or regulatory authority.</p> <p>The regulatory authority governing the profession has the authority to set entry requirements, license qualified applicants and ensure that practice requirements are met and/or maintained. Licensure/registration with the regulatory authority is a condition of practice.</p>	<p>An unregulated health profession is one for which there is no legal requirement or restriction on practice with regard to licensure/registration.</p> <p>Registration with a provincial/territorial or national professional organization is voluntary and not a condition of practice.</p>

Type of data requested from data providers

(and subsequently presented in this report, as applicable)

Regulated Health Professions	Unregulated Health Professions
<p>If the health profession is subject to regulation in a specific jurisdiction, the following information was requested from the data provider:</p>	<p>If the health profession is not subject to regulation within a specific jurisdiction, the following information was requested from the data provider:</p>
<p>Total Number of Registered: All individuals who are registered/licensed with the organization. The count may include individuals in all registration categories (active, inactive, honorary, etc.).</p> <p>Total Number of Registered, Active: All registered/licensed individuals who are legally able to work under the title of the specified health profession. Individuals may or may not be currently employed in the profession.</p> <p>Total Number of Registered, Active-Employed: All individuals who are registered/licensed with the organization and currently working in the specified health profession.</p>	<p>Total Number of Registered: All individuals who are registered with the organization. The count may include individuals in all registration categories (active, inactive, honorary, etc.).</p>

Data Sources

The primary data sources for this publication are national professional associations, provincial and territorial regulatory bodies, provincial and territorial professional associations, governments and educational institutions. These organizations provide much of the contextual information and data on the number of personnel and number of graduates.

For the reporting of nursing, occupational therapist (2006), pharmacist (2006) and physician data, the publication utilizes existing data sources at CIHI. This includes the regulated Nursing Databases, Occupational Therapist Database, Pharmacist Database and, for physician data, both Scott's Medical Database (formerly known as the Southam Medical Database) and, for resident information, the Canadian Post-M.D. Education Registry (CAPER). For more information about these data sources, please refer to the corresponding *Health Personnel Technical Guide* at www.cihi.ca.

Methodology Highlights

Data Year

Health Personnel Database (HPDB) data reflect data as of December 31 of the given year, unless otherwise noted under the data tables. As a result, reference periods of the available data are not always uniform and this may influence the comparability of the data.

Northern Territories Data

CIHI attempts to collect data from each province and territory in Canada. On April 1, 1999, the central and eastern portions of the Northwest Territories became the new territory of Nunavut. For some professionals (for example, physicians and registered nurses), Nunavut-specific data are provided in this publication. In many cases, however, data providers have combined Nunavut and Northwest Territories data or data for all three northern territories including the Yukon.

Descriptions of Health Occupations

National associations provided the majority of the professional descriptions. If not, each chapter identifies the sources of the definition. The descriptions for each of the four nursing groups (RN, NP, LPN and RPN) were provided by the Health Human Resources (Nursing) team at CIHI; the descriptions for occupational therapists and pharmacists are from the Health Human Resources (Databases Development Project) team at CIHI; and the descriptions for chiropractors, medical laboratory technologists and psychologists were adopted from Human Resource and Social Development Canada (HRSDC) National Occupational Classification with the permission of the Minister of Public Works and Government Services Canada, 2001.

Estimates

In cases where data were not available, CIHI imputed estimates. See the *HPDB Technical Guide* for formula and further details. In the tables, all estimates are presented with a symbol (†) and footnoted. Summarized data (for example, column totals) that contain estimates (or voluntary membership data) are also presented with a (†) symbol.

Footnotes and Symbols

The footnotes follow a chronological sequence over the years, and are placed from left to right. Where the footnote is beside the province or territory or institutional name, the information applies to all years in that row.

Some of the more commonly used symbols are provided below:

- .. Information was not available.
- * Number in table suppressed in accordance with CIHI privacy policy; value is from 1 to 4.
- ** Number in table suppressed to ensure confidentiality; value is 5 or greater.
- † Indicates the presence of voluntary data or estimated data.
- n/a Not applicable.
- ^ Data are combined.

Data Quality

To ensure a high level of accuracy and usefulness in data dissemination, CIHI has developed a framework for assessing and reporting the quality of data contained in its databases and registries. The framework focuses on five dimensions of data quality—timeliness, accuracy, usability, comparability and relevance—which are explained below. *Canada's Health Care Providers, 1997 to 2006, A Reference Guide* has a variety of data sources with differences in the level of detail available from these sources.

Timeliness, Usability and Relevance

Timeliness

Member data are collected annually by CIHI and graduate data are collected every two years.

Usability

The methodological notes and the detailed notes accompanying all data tables in this publication contribute to usability and the limitations of data interpretation are clearly outlined.

Relevance

Data in this publication are useful for identifying trends in health personnel in Canada. However, it is inappropriate to infer from total numbers or population ratios the adequacy of health personnel resources.

Accuracy

Under-Coverage

Since the purpose of the HPDB is to collect and maintain data on “selected” health personnel groups, data for many professions important to the health system and the health of Canadians are not reflected in the HPDB or this publication.

CIHI collection timelines do not necessarily align with data providers’ year-end data processing. As a result, the data reported may not reflect the total number of registrations for that reference period because more registration may occur after data have already been submitted to CIHI.

When membership in a professional organization is voluntary, a certain percentage of the health personnel in that profession will not register. Therefore, the number of health professionals may be under-represented. All voluntary membership data, including summarized data (for example, column totals) that are found in tables are identified by the symbol (†).

It may not be known whether the provincial/territorial legislation provides for the exclusive provision of services falling within a particular scope of practice, or simply reserves the use of certain titles. If legislation only protects the use of specific titles (for example, registered social worker) then individuals practising under a slightly different title may not be covered by legislation and, as a result, may not be required to register as a condition of practice. Data collected within this regulatory environment would potentially under-count the number of personnel.

For some professions, not all post-secondary institutions provided information regarding programs and graduates.

Over-Coverage

Those professionals temporarily out of the work force, or out of the province or country, may maintain their registration to maintain continuity. Data collection in these circumstances may over-count the number of health personnel actively engaged in the Canadian workforce.

The inability to identify providers consistently and uniquely, at a national level, is a barrier to integration of information across jurisdictions. National yearly totals for the same health personnel group may double-count individuals registered in more than one province or territory or more than one profession. This effect is compounded when health personnel from separate professions are added together.

Collection and Capture

Since data providers do not submit individual record-level data, rigorous edit checks and advanced verification and validation routines cannot be applied by CIHI. Manual data entry may affect the accuracy of the data, as information may not be classified or coded properly. Although quality checks are utilized, the manual entering of data can also introduce errors.

Comparability

Data Collection Standards

CIHI requested that data providers submit data based on standardized definitions (refer to Methodological Notes). While this collection strategy improves comparability, it is important to note that this approach is not equivalent to the submission of data based on standardized minimum data sets.

Before making comparisons between health personnel groups, it is important to review the title of the table or figure and to read the footnotes carefully, as a table including data for all registered members of a health personnel group (for example, active, inactive, retired and honorary) will not be directly comparable to a table that includes only data on employed active registered members. Caution must be exercised when comparing inter-temporal changes at both the provincial/territorial and national levels when tables contain data collected under different regulatory environments or different data sources.

Data Reference Period

Registration periods vary among health personnel regulatory authorities, across jurisdictions and within the same health profession. If the data providers cannot provide data as of December 31 of each year, they are asked to identify the actual point in time reflected by the data. As a result, reference periods of the available data are not always uniform and this may influence the comparability of data.

Comparability With Other Sources

The HPDB data used in CIHI publications, media releases, ad hoc requests and special studies will vary from data released by other provincial and territorial sources of health personnel data, as a result of differences in definitions, the collection period used and editing and processing activities. Additional data-quality questions related to the HPDB can be directed to the Program Lead, Health Personnel Database, at hpdb@cihi.ca.

For a detailed explanation of the strengths and limitations of the data in the HPDB, please refer to the *HPDB Technical Report* (available at www.cihi.ca), which outlines how the information within the publication can be most effectively interpreted, analyzed and used. This information is of particular importance when making comparisons with other data sources, and especially when drawing conclusions regarding changes over time.

For specific data-quality information for nursing, physician, occupational therapist and pharmacist databases, please visit www.cihi.ca.

