



Q06. Province(s)/territory(ies) of licensure

<https://surveys.cma.ca/en/permalink/survey73>

Survey Date: 2019

Full Question: Q06. In which Canadian jurisdiction(s) do you currently hold an active medical practice licence?

Topic: National licensure

Keywords: Province
Territory
License
Licensure
Practice
Work
Portability

Response Choices: British Columbia
Alberta
Saskatchewan
Manitoba
Ontario
Quebec
New Brunswick
Nova Scotia
Prince Edward Island
Newfoundland & Labrador
Northwest Territories
Yukon
Nunavut

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Q07. Main province/territory of practice

<https://surveys.cma.ca/en/permalink/survey75>

Survey Date: 2019

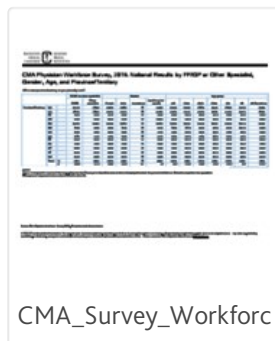
Full Question: Q07. In what province/territory do you primarily work?

Topic: National licensure

Keywords: Province
Territory
Practice
Work

Response Choices: British Columbia
Alberta
Saskatchewan
Manitoba
Ontario
Quebec
New Brunswick
Nova Scotia
Prince Edward Island
Newfoundland & Labrador
Northwest Territories
Yukon
Nunavut

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The table displays national results for the CMA Physician Workforce Survey in 2019, categorized by FPPSP or other specialty, gender, age, and provincial/territorial jurisdiction. It includes columns for various demographic and professional metrics.

Q09. Applying for licensure in another jurisdiction

<https://surveys.cma.ca/en/permalink/survey77>

Survey Date: 2019


Full Question: Q09. Have you ever applied for a licence to practise medicine with a Canadian medical regulatory authority in a province or territory other than where you were first licensed to practise in Canada?

Topic: Access to services
National licensure


Keywords: License
Licensure


Response Choices: Yes
No

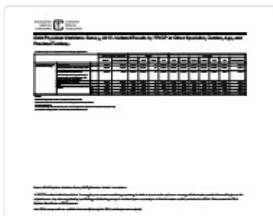
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Q09. Organization of practice (solo, group, etc.)

<https://surveys.cma.ca/en/permalink/survey16>

Survey Date: 2017

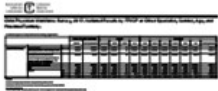
Full Question: Q09. How is your MAIN patient care setting organized? Check ONLY ONE. (Note that a solo or group practice could also include another health professional who does not have her/his own caseload).

Topic: Work setting
Patient care
Hospital setting
Collaborative practice


Keywords: Collaborative practice
Group practice
Hospital setting
Interprofessional
Partner
Patient care setting
Practice setting
Solo practice
Team practice
Work setting


Response Choices: Solo practice
Group practice – community based
Interprofessional practice – community based (physician(s) & other health professional(s) who have their own caseloads)
Hospital-based practice

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Q10. Obstacles to applying for licensure

<https://surveys.cma.ca/en/permalink/survey79>

Survey Date: 2019

Full Question: Q10. What factors did you consider significant obstacles with respect to applying for licensure in another province or territory?

Topic: Access to services
National licensure

Keywords: License
Licensure
Barriers
Practice obstacles

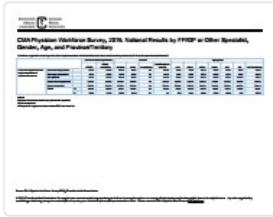
Response Choices: Obtaining credential verification for or from the provincial/territorial regulatory authority
Obtaining letter(s) of good standing from the provincial/territorial regulatory authority
Obtaining reference or character letters
Obtaining police record check
Cost of getting licensed in the other province or territory
Length of the process to obtain a licence in the other province or territory
The overall complexity of the process to obtain a licence
Other, please specify:
There were no significant obstacles

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Thumbnail of a survey results table with columns for 'Province/Territory', 'Number of Respondents', and 'Percentage of Respondents'.

Q11. Support for national licensure

<https://surveys.cma.ca/en/permalink/survey82>

Survey Date: 2019

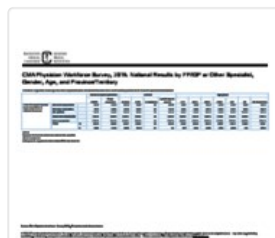
Full Question: Q11. How supportive would you be of the implementation of national licensure that would enable practice in all Canadian provinces/territories?

Topic: Access to services
National licensure

Keywords: License
Licensure

Response Choices: Not at all supportive
Not very supportive
No opinion
Somewhat supportive
Very supportive

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Thumbnail of a PDF document showing a table of survey results.

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Q12. Impact of national licensure on physician practices

<https://surveys.cma.ca/en/permalink/survey83>

Survey Date: 2019

Full Question: Q12. If a national licensure system were implemented today, how likely would you be to:

- Highly unlikely
- Somewhat unlikely
- Unsure
- Somewhat likely
- Highly likely

Topic: Access to services
National licensure
Patient care

Keywords: License
Licensure
Changes
Portability
Locum
Virtual care
Rural practice
Access

Response Choices: Seek out locum opportunities in other provinces/ territories
Practise in multiple provinces/territories on an ongoing basis
Provide virtual care (e.g., telemedicine) to patients in other provinces/territories
Practise temporarily in rural/remote areas in other provinces/territories
Participate in further training in another province or territory

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tional_Licensure-e.pdf

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Q13. Agreement that national licensure will improve access

<https://surveys.cma.ca/en/permalink/survey85>

Survey Date: 2019

Full Question: Q13. To what extent do you agree that national licensure will improve access to care for Canadians?

Topic: Access to services
National licensure
Patient care

Keywords: License
Licensure
Better
Patients
Access

Response Choices: Strongly disagree
Somewhat disagree
Neither agree nor disagree
Somewhat agree
Strongly agree

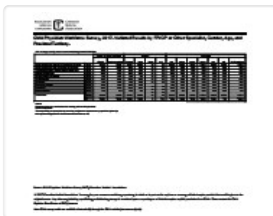
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Q13. Work hours



<https://surveys.cma.ca/en/permalink/survey20>

Survey Date: 2017

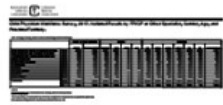
Full Question: Q13. EXCLUDING ON-CALL ACTIVITIES, how many HOURS IN AN AVERAGE WEEK do you usually spend on the following activities? Assume each activity is mutually exclusive for reporting purposes.

Topic: Patient care
On-call activities
Practice management (e.g., overhead costs, paperwork)
Hours of work and workload

Keywords: Administrative duties
Committee work
Indirect patient care
On-call services
Patient care
Practice management
Continuing medication education (CME)
Research
Teaching
Work hours
Oncall
Oncall activities
Workload

Response Choices: Direct patient care without a teaching component, regardless of setting
Direct patient care with a teaching component, regardless of setting
Teaching/Education without direct patient care (contact with students/residents, preparation, marking, evaluations, etc.)
Indirect patient care (charting, reports, phone calls, meeting patients' family, etc.)
Health facility committees (academic planning committees)
Administration (i.e., management of university program, chief of staff, department head, Ministry of Health, etc.)
Research (including management of research and publications)
Managing your practice (staff, facility, equipment, etc.)
Continuing medical education/professional development (courses, reading, videos, tapes, seminars, etc.)

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Document description and metadata

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Q14. Hours on administrative forms

<https://surveys.cma.ca/en/permalink/survey21>

Survey Date: 2017

Full Question: Q14. How many hours per week do you spend completing administrative forms on behalf of your patients (e.g. third party insurance forms)?

Topic: Patient care
Practice management (e.g., overhead costs, paperwork)
Hours of work and workload

Keywords: 3rd party insurance forms
Administrative duties
Indirect patient care
Paperwork
Practice management
Workload

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Q16. Overhead costs

<https://surveys.cma.ca/en/permalink/survey23>


Survey Date: 2017

Full Question: Q16. What percentage of your gross professional income goes towards running your practice (e.g. staff, leases/rent/mortgage, equipment leasing/rental, personal benefits, vehicle costs, professional fees, malpractice dues, etc.)?


Topic: Remuneration method
Practice management (e.g., overhead costs, paperwork)


Keywords: FFS
Overhead costs
Practice expenses
Practice management
Remuneration

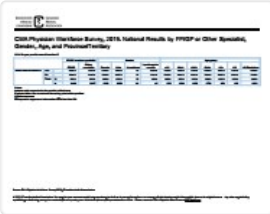
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Q18. Providing on-call

<https://surveys.cma.ca/en/permalink/survey104>

Survey Date: 2019

Full Question: Q18. Do you provide on-call services?


Topic: Hours of work and workload
On-call activities
Access to services
Patient care
Oncall


Keywords: On-call service
Workload
Oncall activities
Oncall

Response Choices: Yes
No

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CMA Physician Workforce Survey, 2019, National Results by FPPSP or Other Specialty, Gender, Age, and Province/Territory

Province/Territory	Gender	Age	Specialty	Mean	SD	Min	Max
Alberta	Male	40-49	Family Medicine	10.5	3.5	5.0	15.0
	Female	40-49	Family Medicine	10.5	3.5	5.0	15.0
British Columbia	Male	40-49	Family Medicine	10.5	3.5	5.0	15.0
	Female	40-49	Family Medicine	10.5	3.5	5.0	15.0
Ontario	Male	40-49	Family Medicine	10.5	3.5	5.0	15.0
	Female	40-49	Family Medicine	10.5	3.5	5.0	15.0
Quebec	Male	40-49	Family Medicine	10.5	3.5	5.0	15.0
	Female	40-49	Family Medicine	10.5	3.5	5.0	15.0
Atlantic	Male	40-49	Family Medicine	10.5	3.5	5.0	15.0
	Female	40-49	Family Medicine	10.5	3.5	5.0	15.0
National	Male	40-49	Family Medicine	10.5	3.5	5.0	15.0
	Female	40-49	Family Medicine	10.5	3.5	5.0	15.0

Q19. Average on-call hours

<https://surveys.cma.ca/en/permalink/survey106>

Survey Date: 2019

Full Question: Q19. Estimate your average number of on-call work hours per month:

Topic: Access to services
Hours of work and workload
Patient care
On-call activities
Oncall

Keywords: Oncall
Time
Oncall activities
On-call hours
Workload

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Q20. On-call hours in direct patient care

<https://surveys.cma.ca/en/permalink/survey109>

Survey Date: 2019

Full Question: Q20. Estimate how many of your on-call hours each month are actually spent in direct patient care (e.g., phone, email, face-to-face):

Topic: Access to services
Hours of work and workload
On-call activities
Patient care
Oncall

Keywords: Oncall
On-call hours
Time
Workload

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PtCare-e.pdf

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Q21b. Rating of collaboration

<https://surveys.cma.ca/en/permalink/survey30>

Survey Date: 2017

Full Question: Q21b. How would you rate your interprofessional collaborative practice(s) in terms of optimal care for patients?

Topic: Patient care
Collaborative practice

Keywords: Collaborative practice
Group practice
Interprofessional
Patient care
Team practice

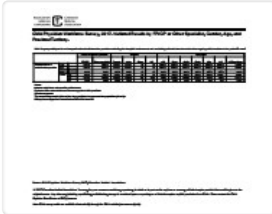
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Q21. Interprofessional collaboration

<https://surveys.cma.ca/en/permalink/survey28>

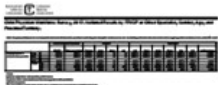
Survey Date: 2017

Full Question: Q21. Do you participate in an interprofessional collaborative practice excluding the hospital environment and excluding referrals that do not involve ongoing collaboration on the patient's care?


Topic: Patient care
Collaborative practice


Keywords: Clinical care
Collaborative practice
Group practice
Interprofessional
Patient care
Partner
Team practice

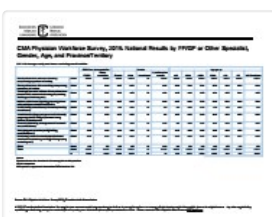
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Q21 & Q22. Work hours

<https://surveys.cma.ca/en/permalink/survey112>

Survey Date: 2019


Full Question: Q21 & Q22. EXCLUDING ON-CALL ACTIVITIES, how many HOURS IN AN AVERAGE WEEK do you usually spend on the following activities? Assume each activity is mutually exclusive for reporting purposes (i.e., if an activity spans two categories, please report hours in only one category).

Topic: Hours of work and workload
 Access to services
 Patient care
 Practice management (e.g., overhead costs, paperwork)
 On-call activities
 Oncall


Keywords: Workload
 Time
 Oncall

Response Choices: Direct patient care without a teaching component, regardless of setting
 Direct patient care with a teaching component, regardless of setting
 Teaching/Education without direct patient care (contact with students/residents, preparation, marking, evaluations, etc.)
 Indirect patient care (charting, reports, phone calls, meeting patients' family, etc.)
 Health facility committees (academic planning committees)
 Administration (i.e., management of university program, chief of staff, department head, Ministry of Health, etc.)
 Research (including management of research and publications)
 Managing your practice (staff, facility, equipment, etc.)
 Continuing medical education/professional development (courses, reading, videos, tapes, seminars, etc.)
 Other
 TOTAL HOURS WORKED PER WEEK

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