



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

Documents



CMA_Survey_Workforce2019_Q6_Province-
e.pdf

Read PDF

Download PDF

The thumbnail shows a data table with columns for 'Specialty', 'Gender', 'Age', and 'Province/Territory'. The rows contain numerical data representing survey results.

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

Documents

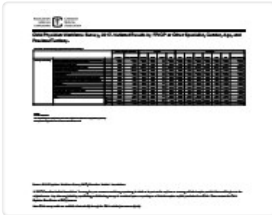
The thumbnail shows a data table with columns for 'Specialty', 'Gender', 'Age', and 'Province/Territory'. The rows contain numerical data representing survey results.

CMA_Survey_Workforc

e2019_Q7_Practice_Pr
ovince-e.pdf

 Read PDF

 Download PDF



Q07. Work setting

<https://surveys.cma.ca/en/permalink/survey14>

Survey Date: 2017

Full Question: Q07. Which of the following is your primary work setting?

Topic: Work setting

Hospital setting

Keywords: Hospital setting

Practice setting

Work location

Work setting

Response Choices: Private office/clinic (excluding free standing walk-in clinics)

Community clinic/Community health centre

Free-standing walk-in clinic

Academic health sciences centre (AHSC)

Non-AHSC teaching hospital

Community hospital

Other hospital

Emergency department (in community hospital or AHSC)

Nursing home/ Long term care facility / Seniors' residence

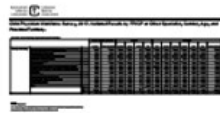
University

Research Unit

Free-standing lab/diagnostic clinic

Administrative office / Corporate Office

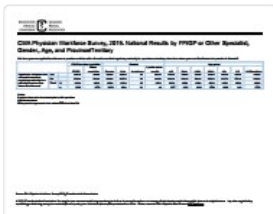
Documents



CMA_Survey_Workforc
e2017_Q7_WorkSetting
-e.pdf

 Read PDF

 Download PDF



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

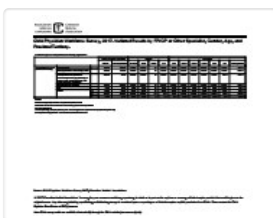
Response Choices: Yes
No

Documents

CMA_Survey_Workforce2019_Q9_Licensure.pdf

 Read PDF

 Download PDF



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

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

Survey Date: 2017

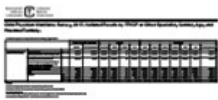
Full Question: Q09. How is your MAIN patient care setting organized? Check ONLY ONE. (Note that a solo or group practice could also include another health professional who does not have her/his own caseload).

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

Documents



CMA_Survey_Workforce2017_Q9_OrgSetting-e.pdf

 Read PDF

 Download PDF

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

Documents

CMA_Survey_Workforce2019_Q10_Licensure_Obstacles-e.pdf

Read PDF

Download PDF

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

Province/Territory	Gender	Age	Specialty	Response
Alberta	Male	18-24	Family Practice	Not at all supportive
Alberta	Female	18-24	Family Practice	Not at all supportive
Alberta	Male	18-24	Family Practice	Not very supportive
Alberta	Female	18-24	Family Practice	Not very supportive
Alberta	Male	18-24	Family Practice	No opinion
Alberta	Female	18-24	Family Practice	No opinion
Alberta	Male	18-24	Family Practice	Somewhat supportive
Alberta	Female	18-24	Family Practice	Somewhat supportive
Alberta	Male	18-24	Family Practice	Very supportive
Alberta	Female	18-24	Family Practice	Very supportive

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

Documents

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

CMA_Survey_Workforce2019_Q11_National_Licensure-e.pdf

Read PDF

Download PDF

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

Province/Territory	Gender	Age	Specialty	Response
Alberta	Male	18-24	Family Practice	Not at all supportive
Alberta	Female	18-24	Family Practice	Not at all supportive
Alberta	Male	18-24	Family Practice	Not very supportive
Alberta	Female	18-24	Family Practice	Not very supportive
Alberta	Male	18-24	Family Practice	No opinion
Alberta	Female	18-24	Family Practice	No opinion
Alberta	Male	18-24	Family Practice	Somewhat supportive
Alberta	Female	18-24	Family Practice	Somewhat supportive
Alberta	Male	18-24	Family Practice	Very supportive
Alberta	Female	18-24	Family Practice	Very supportive

Q12. Impact of national licensure on physician practices

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

Survey Date: 2019

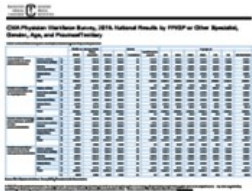
Full Question: Q12. If a national licensure system were implemented today, how likely would you be to:
Highly unlikely
Somewhat unlikely
Unsure
Somewhat likely
Highly likely

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

Documents



CMA_Survey_Workforce2019_Q12_Impact_National_Licensure-e.pdf

 Read PDF

 Download PDF

CMA Physician Workforce Survey, 2019. National Results by FFSP or Other Specialist, Gender, Age, and Practice Setting

FFSP or Other Specialist	Gender	Age	Practice Setting	Q13
FFSP	Male	35-44	Academic	100%
FFSP	Female	35-44	Academic	100%
FFSP	Male	35-44	Community	100%
FFSP	Female	35-44	Community	100%
FFSP	Male	35-44	Other	100%
FFSP	Female	35-44	Other	100%
FFSP	Male	45-54	Academic	100%
FFSP	Female	45-54	Academic	100%
FFSP	Male	45-54	Community	100%
FFSP	Female	45-54	Community	100%
FFSP	Male	45-54	Other	100%
FFSP	Female	45-54	Other	100%
FFSP	Male	55-64	Academic	100%
FFSP	Female	55-64	Academic	100%
FFSP	Male	55-64	Community	100%
FFSP	Female	55-64	Community	100%
FFSP	Male	55-64	Other	100%
FFSP	Female	55-64	Other	100%
FFSP	Male	65+	Academic	100%
FFSP	Female	65+	Academic	100%
FFSP	Male	65+	Community	100%
FFSP	Female	65+	Community	100%
FFSP	Male	65+	Other	100%
FFSP	Female	65+	Other	100%
Other Specialist	Male	35-44	Academic	100%
Other Specialist	Female	35-44	Academic	100%
Other Specialist	Male	35-44	Community	100%
Other Specialist	Female	35-44	Community	100%
Other Specialist	Male	35-44	Other	100%
Other Specialist	Female	35-44	Other	100%
Other Specialist	Male	45-54	Academic	100%
Other Specialist	Female	45-54	Academic	100%
Other Specialist	Male	45-54	Community	100%
Other Specialist	Female	45-54	Community	100%
Other Specialist	Male	45-54	Other	100%
Other Specialist	Female	45-54	Other	100%
Other Specialist	Male	55-64	Academic	100%
Other Specialist	Female	55-64	Academic	100%
Other Specialist	Male	55-64	Community	100%
Other Specialist	Female	55-64	Community	100%
Other Specialist	Male	55-64	Other	100%
Other Specialist	Female	55-64	Other	100%
Other Specialist	Male	65+	Academic	100%
Other Specialist	Female	65+	Academic	100%
Other Specialist	Male	65+	Community	100%
Other Specialist	Female	65+	Community	100%
Other Specialist	Male	65+	Other	100%
Other Specialist	Female	65+	Other	100%

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

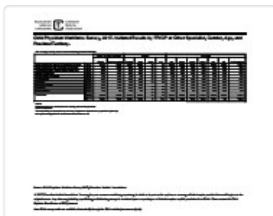
Documents

CMA_Survey_Workforce2019_Q13_Agreement_National_Licensure-e.pdf

Read PDF

Download PDF

Q13. Work hours



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

Survey Date: 2017

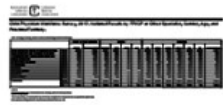
Full Question: Q13. EXCLUDING ON-CALL ACTIVITIES, how many HOURS IN AN AVERAGE WEEK do you usually spend on the following activities? Assume each activity is mutually exclusive for reporting purposes.

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.)

Documents



CMA_Survey_Workforc
e2017_Q13_WorkHrs-
e.pdf

 Read PDF

 Download PDF



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

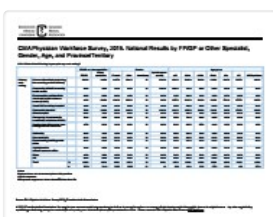
Keywords: 3rd party insurance forms
Administrative duties
Indirect patient care
Paperwork
Practice management
Workload

Documents

CMA_Survey_Workforce2017_Q14_AdminForms-e.pdf

Read PDF

Download PDF



Q15. Work Setting

<https://surveys.cma.ca/en/permalink/survey100>

Survey Date: 2019

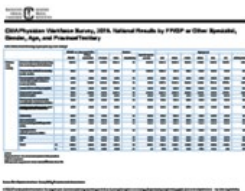
Full Question: Q15. Which of the following is your primary work setting?

Topic: Hospital setting
Work setting


Keywords: Where do physicians work?
Location
Work setting
Physician setting


Response Choices: Private office/clinic (excluding free standing walk-in clinics)
Community clinic/Community health centre
Free-standing walk-in clinic
Academic health sciences centre (AHSC)
Non-AHSC teaching hospital
Community hospital
Other hospital
Emergency department (in community hospital or AHSC)
Nursing home/ Long term care facility / Seniors' residence
University
Research Unit
Free-standing lab/diagnostic clinic
Administrative office / Corporate Office
Other

Documents



CMA_Survey_Workforce2019_Q15_Work_Setting-e.pdf

 Read PDF

 Download PDF



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

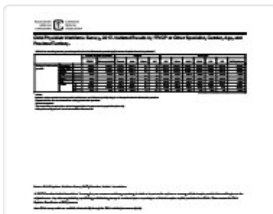
Documents



CMA_Survey_Workforc
e2017_Q16_Overhead-
e.pdf

 Read PDF

 Download PDF



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

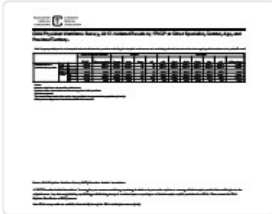
Documents



CMA_Survey_Workforce2017_Q21b_CollaborativePracticeRating-e.pdf

 Read PDF

 Download PDF



Q21. Interprofessional collaboration

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

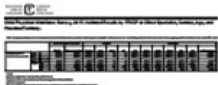
Survey Date: 2017

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

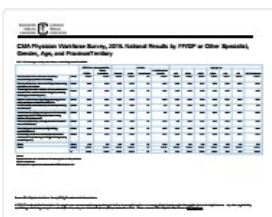
Documents



CMA_Survey_Workforce2017_Q21_CollabPractice.pdf

 Read PDF

 Download PDF



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

Documents



CMA_Survey_Workforce2019_Q21_Q22Work_hours-e.pdf

 Read PDF



Q25a. Changes made to practice

<https://surveys.cma.ca/en/permalink/survey34>

Survey Date: 2017

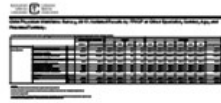
Full Question: Q25a. With reference to the LAST 2 YEARS, please check all of the following changes you have already made:

Topic: Retirement
Practice relocation
On-call activities
Hours of work and workload

Keywords: Career transition
Oncall
Oncall activities
On-call services
Overworked
Patient load
Practice relocation
Retirement
Work hours
Work location
Work-life balance
Workload

Response Choices: Retired from clinical practice
Reduced weekly work hours (excluding on-call)
Increased weekly work hours (excluding on-call)
Relocated my practice to another province/territory in Canada
Practised in the USA
Practised in another country

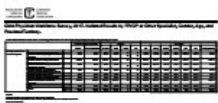
Documents



CMA_Survey_Workforc
e2017_Q25a_Changes
Made-e.pdf

 Read PDF

 Download PDF



Q25b. Planned changes to practice

<https://surveys.cma.ca/en/permalink/survey35>

Survey Date: 2017

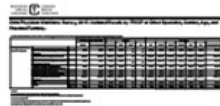
Full Question: Q25b. With reference to the NEXT 2 YEARS, please check all of the following changes that you are planning to make:

Topic: Retirement
Practice relocation
On-call activities
Hours of work and workload

Keywords: Career transition
On-call services
Oncall
Oncall activities
Overworked
Patient load
Practice relocation
Retirement
Work hours
Work location
Work-life balance
Workload

- Response Choices:
- Retire from clinical practice
 - Retire completely from medical practice
 - Reduce weekly work hours (excluding on-call)
 - Increase weekly work hours (excluding on-call)
 - Relocate my practice to another province/territory in Canada
 - Practise in the USA
 - Practise in another country

Documents



CMA_Survey_Workforc
e2017_Q25b_ChangesP
lanned-e.pdf

 Read PDF

 Download PDF