

Family Medicine Profile

Updated August 2018

Click on any of the contents below to navigate to the slide. Please click the “home icon” located at the top right of each slide to return to the “table of contents” slide.



TABLE OF CONTENTS

	Slide
▪ General Information	3-6
▪ Total number & number/100,000 population by province, 2018	7
▪ Number/100,000 population, 1995-2018	8
▪ Number by gender & year, 1995-2018	9
▪ Percentage by gender & age, 2018	10
▪ Number by gender & age, 2018	11
▪ Percentage by main work setting, 2017	12
▪ Percentage by practice organization, 2017	13
▪ Hours worked per week (excluding on-call), 2017	14
▪ On-call duty hours per month, 2017	15
▪ Percentage by remuneration method	16
▪ Professional & work-life balance satisfaction, 2017	17
▪ Number of retirees during the three year period of 2014-2016	18
▪ Employment situation, 2017	19
▪ Links to additional resources	20



GENERAL INFORMATION

Family medicine is the main primary care medical specialty in Canada. It focuses care on the individual within the context of the family and the community. Family physicians (refers to both family physicians and general practitioners) deliver services across the entire spectrum of care, regardless of patient age, sex or condition. Public polls repeatedly confirm how highly the people of Canada value family doctors for their roles in caring for them.

While family medicine may seem the most “general” of the specialties, it is in fact, a precise discipline, integrating a unique blend of biomedical, behavioural and social sciences, while employing a diverse range of cognitive and procedural skills.



GENERAL INFORMATION

The family physician is often called upon to deal with undifferentiated clinical problems presenting at an early stage. In addition to acute disorders, which are sometimes life-threatening, there is a high frequency of chronic diseases, emotional problems and transient illnesses.

Family physicians deliver care across a wide spectrum of settings, including their offices, hospital, long-term and other health care facilities and the patient's home. The close, long-term physician-patient relationship that is established, the diversity in the work and the variety of practice opportunities offered by family medicine are some of the main factors that attract physicians to this specialty.

Family physicians also play an important role in health promotion and illness prevention, coordinating care with other specialties and health professionals, and advocating on behalf of their patients with respect to the care and services they need in all parts of the health care system.



GENERAL INFORMATION

Upon completion of medical school, to become certified in family medicine with the College of Family Physicians of Canada (CFPC) requires an additional 2 years of postgraduate training. This includes experiences in family practice settings; general surgery; internal medicine; pediatrics; obstetrics/gynaecology; psychiatry and emergency medicine; as well as opportunities for electives in areas selected by each resident. The training environment includes hospitals but is also very focused on experiences in community-based practices, including opportunities in small town and rural settings.

While most residents are well prepared to enter practice after 2 years of postgraduate training, some with specific needs or interests might benefit from additional or enhanced skills training and apply to a number of positions available for an optional third year. Examples of such third year programs include emergency medicine, palliative care, maternity care and care of elderly.



GENERAL INFORMATION

The main objective of additional training is to prepare graduates to be able to offer added services to patients as part of their broad-based or comprehensive continuing care family practices.

Following the completion of residency, there is a certification examination to evaluate competence in the specialty of family medicine. If successful, the resident will be awarded Certification in The College of Family Physicians of Canada (CCFP) that is then maintained throughout their career through participation in the College's life-long learning (continuing professional development) program.

For further details on training requirements please go to:

[College of Family Physicians of Canada](#)



Total number & number/100,000 population by province, 2018

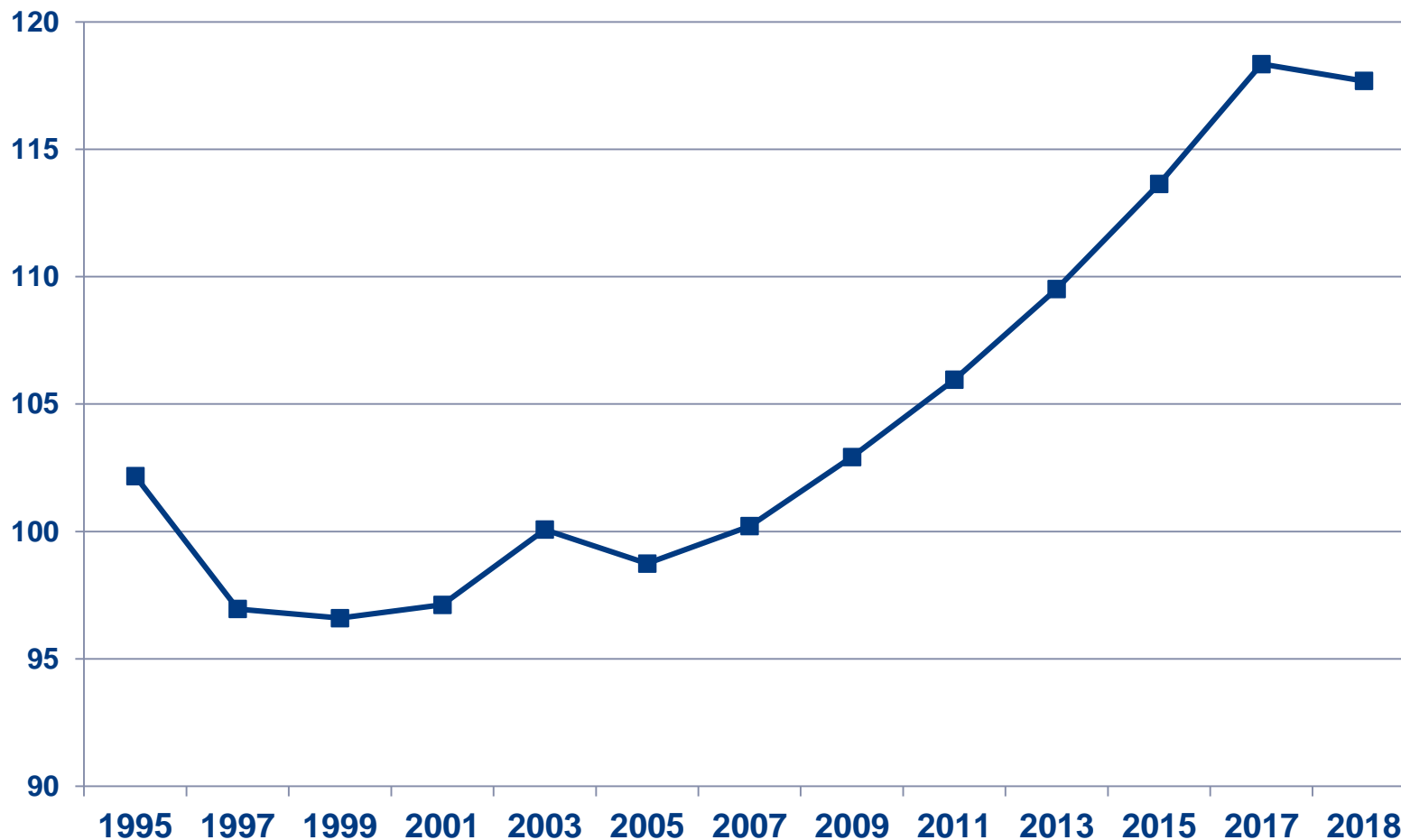
Province/Territory	Physicians	Phys/100k pop'n
Newfoundland/Labrador	910	172
Prince Edward Island	178	117
Nova Scotia	1316	137
New Brunswick	1145	151
Quebec	10143	120
Ontario	14747	103
Manitoba	1492	111
Saskatchewan	1427	122
Alberta	5652	131
British Columbia	6356	131
Territories	134	110
CANADA	43500	118

* Includes General Practitioners

Source: 2018 CMA Masterfile



Number/100,000 population, 1995 to 2018

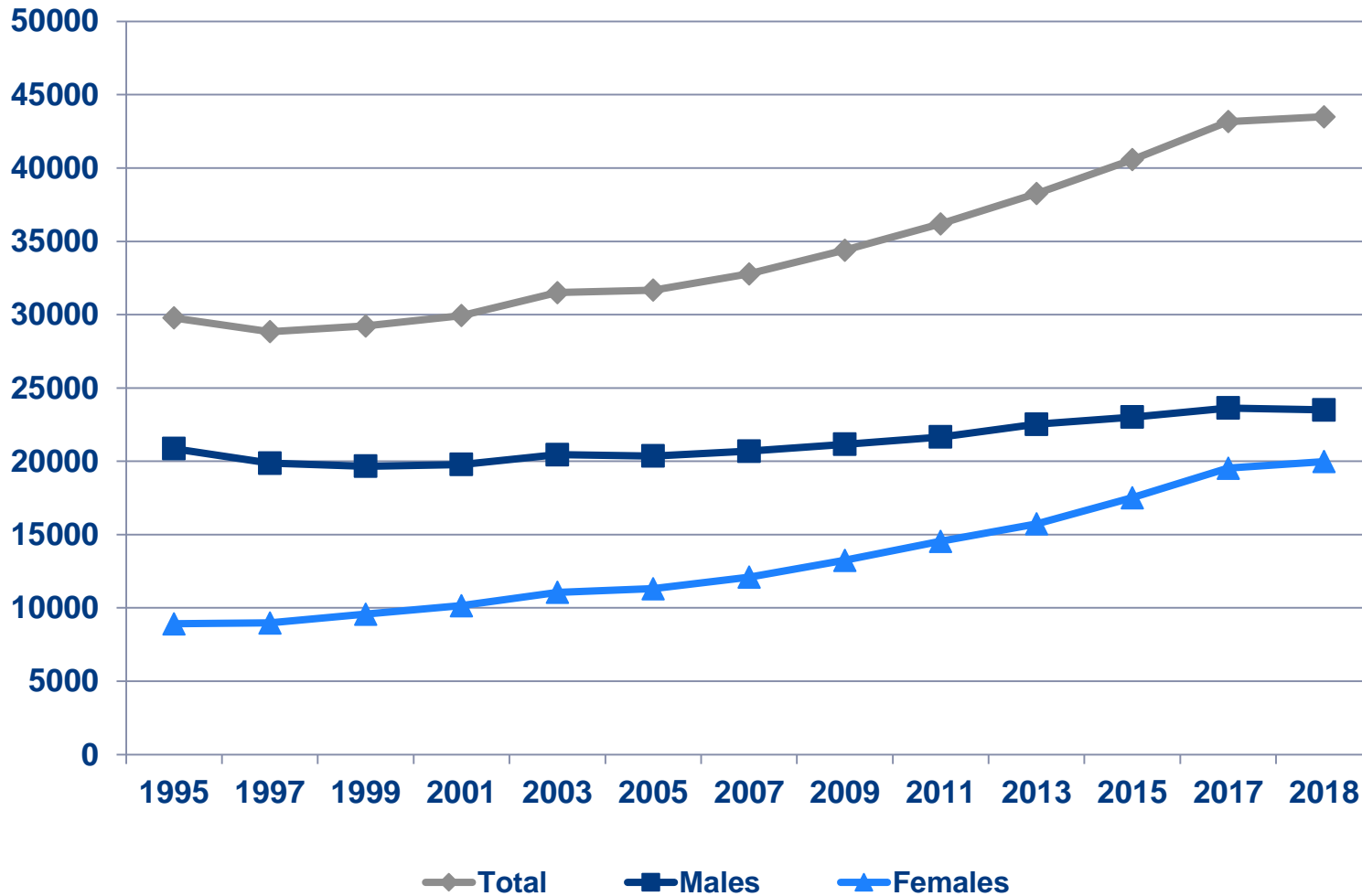


* Includes General Practitioners

Source: 1995-2018 CMA Masterfiles



Number by gender & year, 1995 to 2018



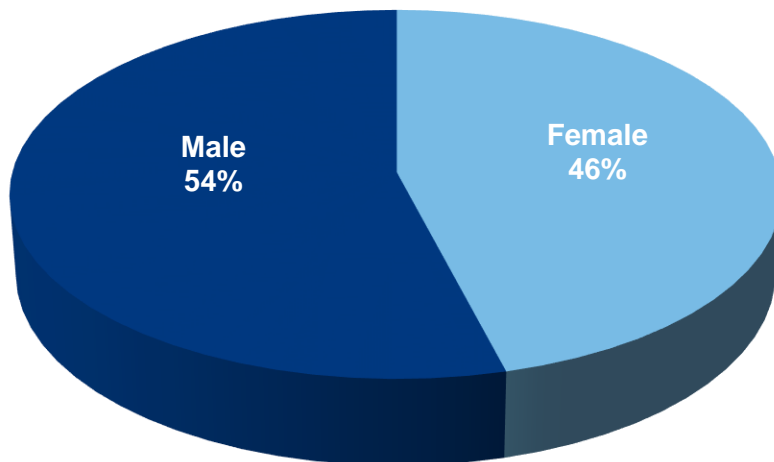
* Includes General Practitioners

Source: 1995-2018 CMA Masterfiles

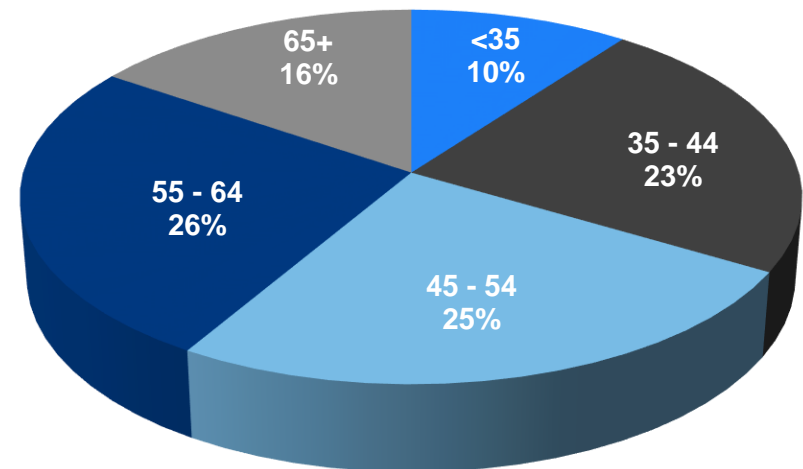


Percentage by gender & age, 2018

Gender



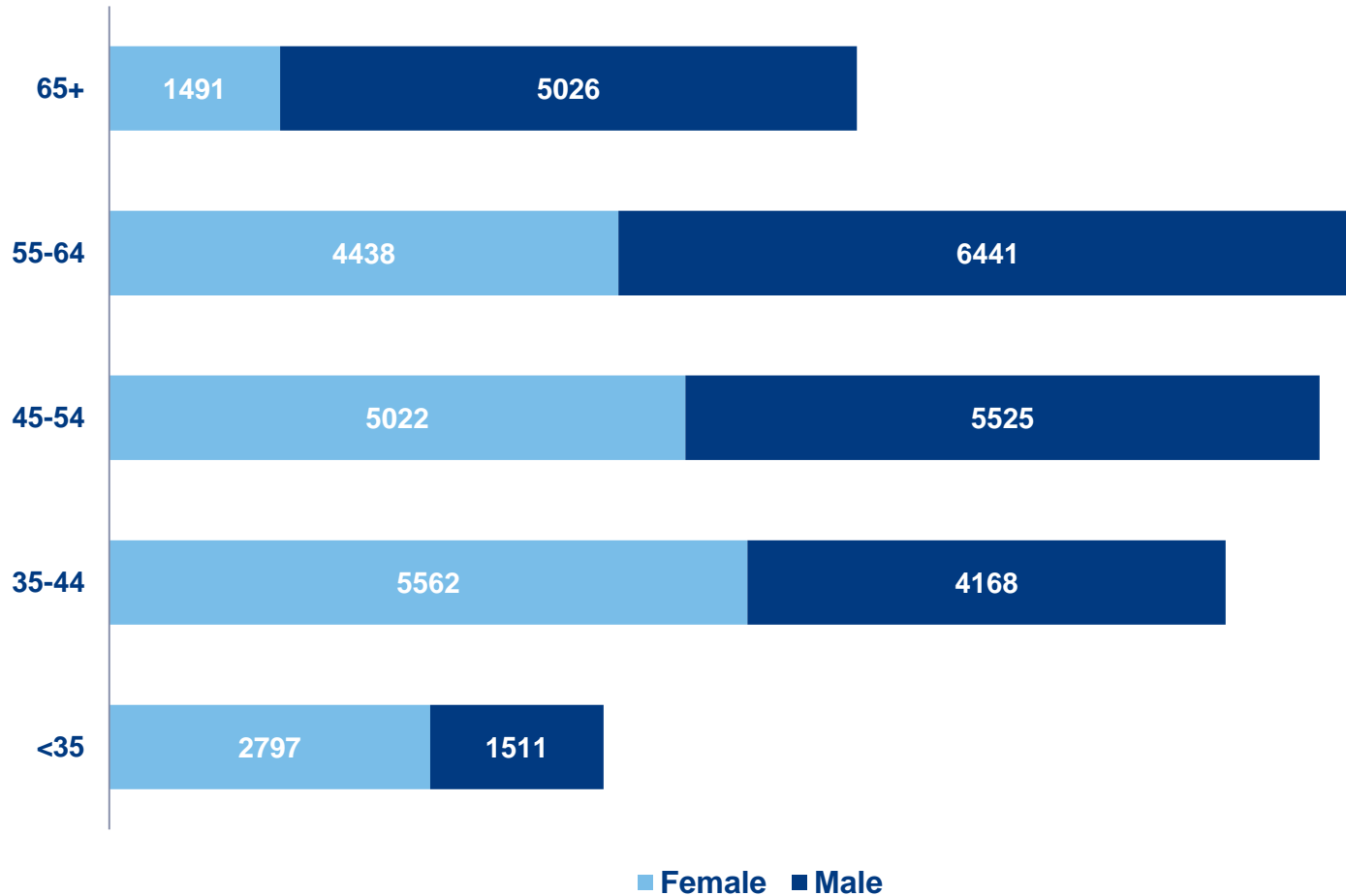
Age Group



Includes General Practitioners
Excludes those where gender or age is unknown.
Source: 2018 CMA Masterfile



Number by gender & age, 2018

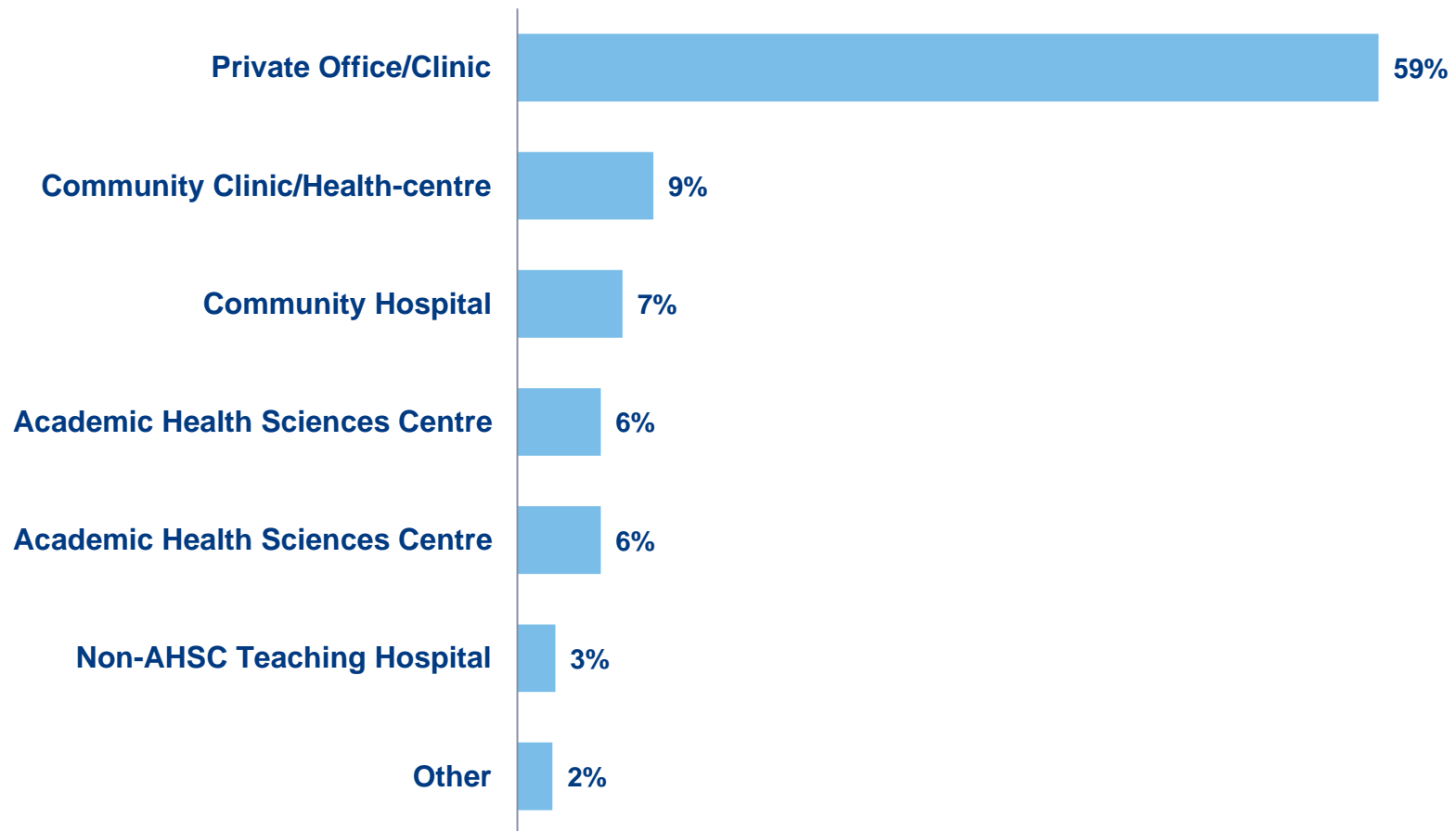


Includes General Practitioners
 Excludes those where gender or age is unknown.

Source: 2017 CMA Masterfile



Percentage by main work setting, 2017

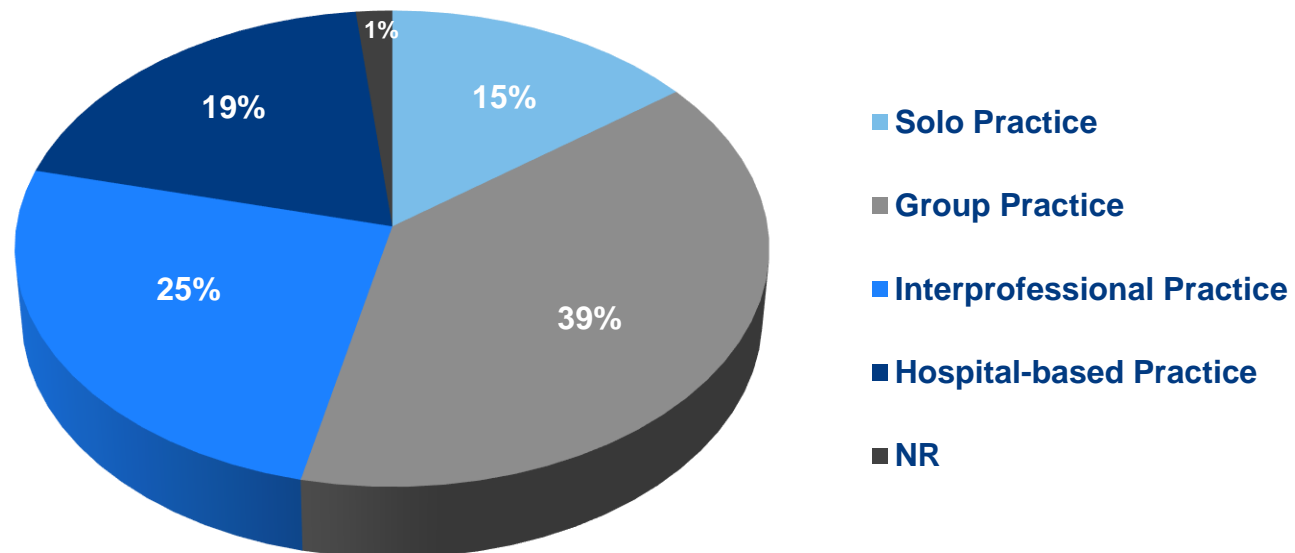


* Includes General Practitioners

Source: 2017 CMA Workforce Survey. Canadian Medical Association



Percentage by practice organization, 2017



* Includes General Practitioners

Source: 2017 CMA Workforce Survey. Canadian Medical Association



Hours worked per week (excluding on-call), 2017

Activity	Hours worked per week
Direct patient care without teaching component	27.8
Direct patient care with teaching component	4.6
Teaching without patient care	1.0
Indirect patient care	7.8
Health facility committees	0.6
Administration	1.8
Research	0.5
Managing practice	1.4
Continued professional development	2.4
Other	0.8
TOTAL HOURS PER WEEK	48.7

* Includes General Practitioners

Source: 2017 CMA Workforce Survey. Canadian Medical Association



On-call duty hours per month, 2017

- 68% provide on-call services
- On-call hours = 115 hours/month
- On-call hours spent in direct patient care = 31 hours/month

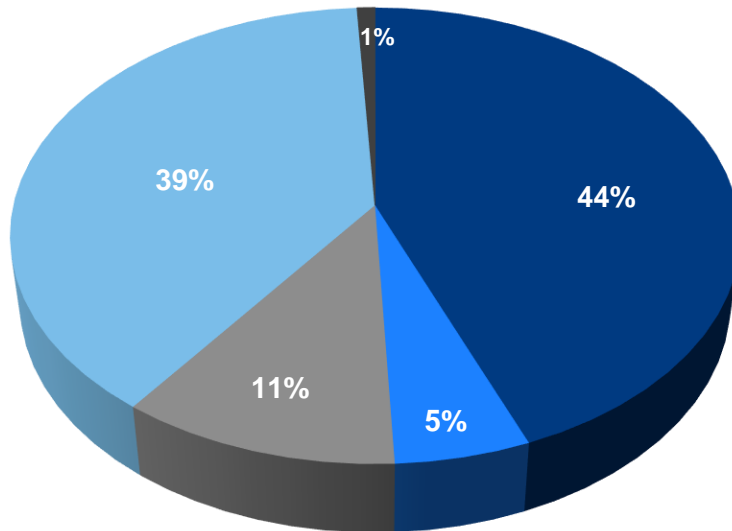
* Includes General Practitioners

Source: 2017 CMA Workforce Survey. Canadian Medical Association



Percentage by remuneration method

Primary payment method¹ in 2017



- 90% + fee-for-service
- 90% + salary
- 90% + other*
- Blended

* Other includes capitation, sessional, contract and other methods

Average gross fee-for-service payment per physician for Family Medicine in 2015/16 (those earning at least \$60,000) = \$253,683²

Average percent overhead reported in 2017 = 27%³

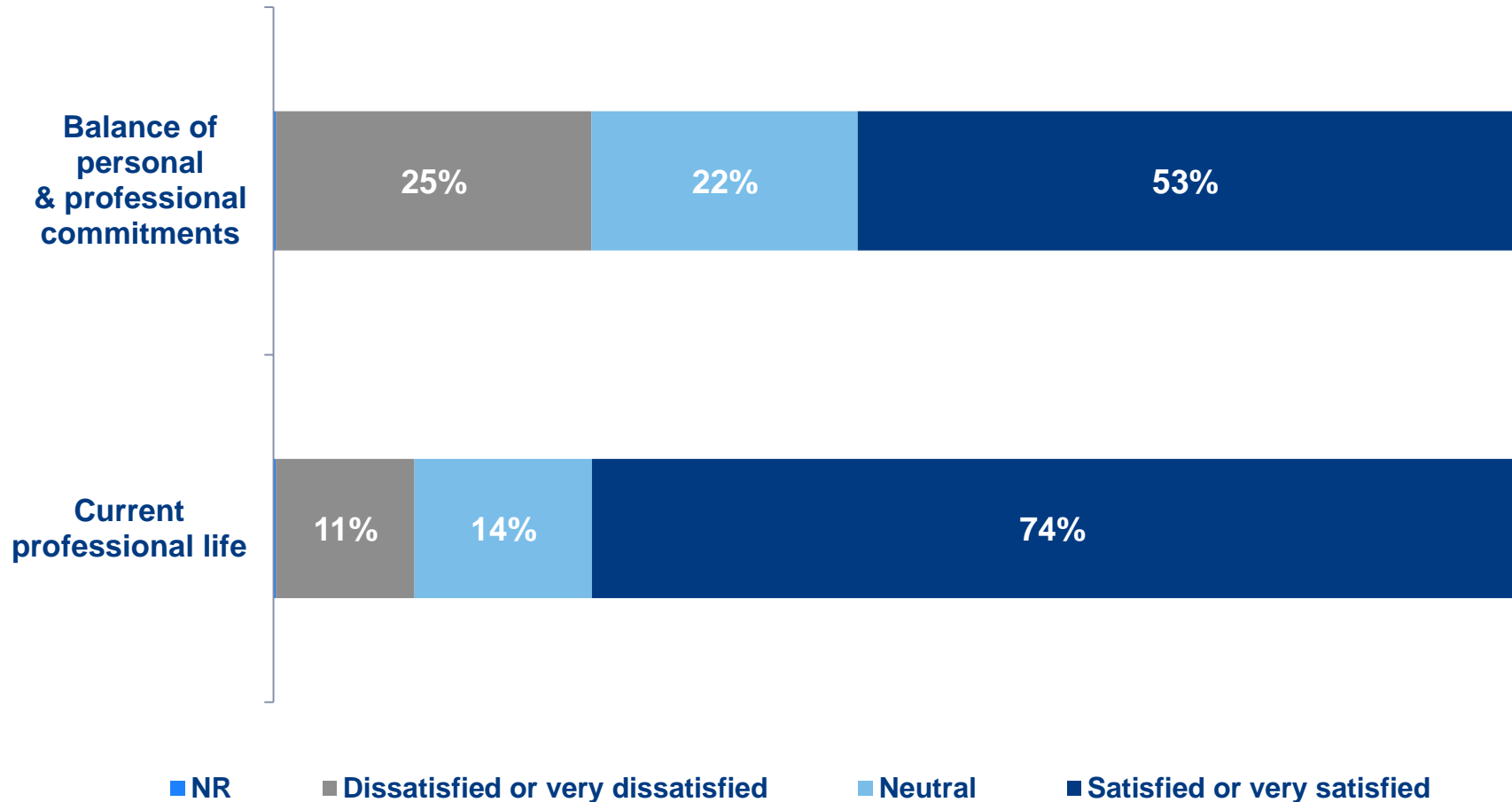
¹ 2017 CMA Workforce Survey. Canadian Medical Association

² National Physician Database, 2015/16, CIHI

³ 2017 CMA Workforce Survey. Canadian Medical Association



Professional & work-life balance satisfaction, 2017

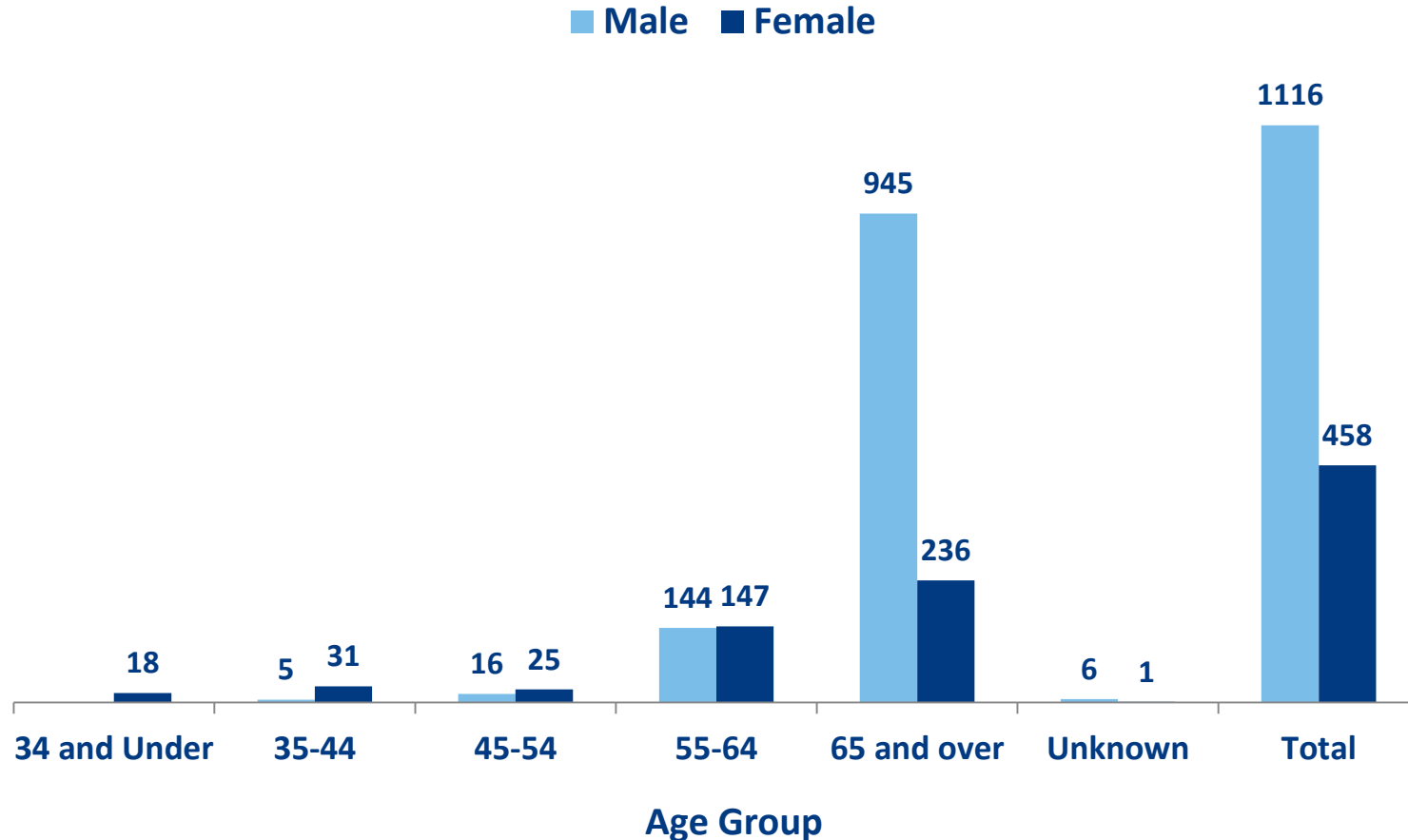


* Includes General Practitioners

Source: 2017 CMA Workforce Survey. Canadian Medical Association



Number of retirees during the three year period of 2014-2016

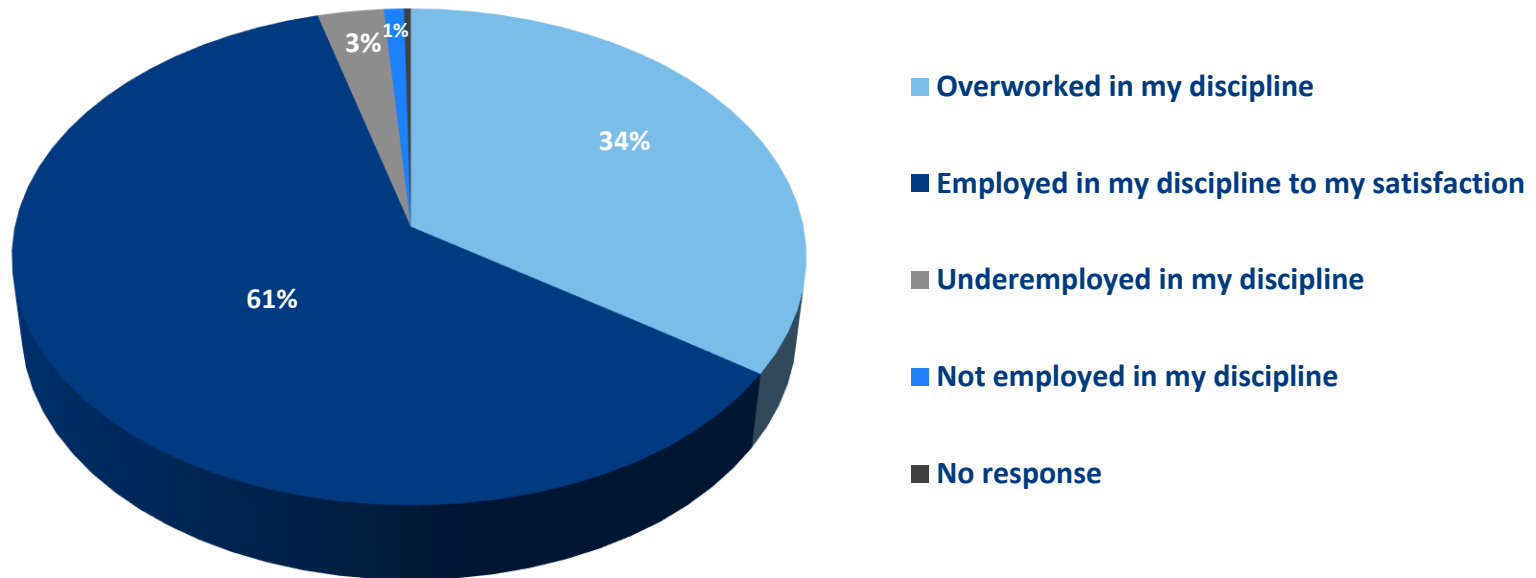


Source: CMA Masterfile – year over year comparisons

Note: “Retired” is based on giving up licence and therefore excludes those who have retired from clinical practice but are still licensed; those younger than 45 may include physicians who have temporarily given up their licence but return to practice at a later date.



Employment situation, 2017





Links to additional resources

- [Association of Faculties of Medicine of Canada](#)
- [Canadian Institute for Health Information](#)
- [Canadian Medical Association's Physician Data Centre](#)
- [Canadian Post-MD Education Registry \(CAPER\)](#)
- [College of Family Physicians of Canada](#)
- [National Physician Survey \(2004-2014\)](#)
- [Royal College of Physicians and Surgeons of Canada](#)