The Canadian Medical Association (CMA) needs your help to work toward a health system that best serves Canadians and Canada’s physicians. Tell us about your practice – from your thoughts on national licensure to your use of technology and hours you work – by completing this 7 minute survey. Every response will help draw a more accurate picture of your profession so that we can identify and address challenges.

Privacy
We strongly believe in privacy and your voluntary input will remain confidential as all results will be published in aggregate format only. Completion of the survey means you agree to participate in the study. Click here to learn more about the CMA privacy guidelines and policies.

Results
Once available, aggregated results will be posted on the CMA website and will be used by CMA and other stakeholders such as researchers and health human resource planners.

1) Are you:

- a licensed physician in full or part-time practice, a locum, in a medically related field, or on a leave of absence.
- a student, medical resident or completely retired. (Ineligible for study)
About you

2) Please rate your satisfaction with each of the following:

<table>
<thead>
<tr>
<th></th>
<th>Very dissatisfied</th>
<th>Dissatisfied</th>
<th>Neutral</th>
<th>Satisfied</th>
<th>Very satisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your professional life</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>The balance between your personal and professional commitments</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

3) Gender:

- ○ Woman
- ○ Man
- ○ I do not identify within the binary system. I identify as (please specify if you wish):
  _____________________________
- ○ I prefer not to specify

4) Year of birth:

_________________________________________________

5) Would you describe yourself as a:

- ○ Family physician
- ○ Family physician with a focused practice (e.g. emergency medicine, sport and exercise medicine) Please specify: _____________________________
- ○ Other specialty physician (medicine or surgery) Please specify: _____________________________
6) In which Canadian jurisdiction(s) do you currently hold an active medical practice licence?

Select all that apply.

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

7) In what province/territory do you primarily work?

8) Where did you complete your undergraduate medical training?

- Canada
- USA
- Other country (please specify): ________________________________
National licensure

National licensure: a process by which a physician, licensed to practice in one Canadian province or territory, can register to practise in another province or territory without undergoing the complete application process and paying the full annual licence fee.

9) 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?

☐ Yes
☐ No

10) What factors did you consider significant obstacles with respect to applying for licensure in another province or territory?

☐ 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

11) How supportive would you be of the implementation of national licensure that would enable practice in all Canadian provinces/territories?

☐ Not at all supportive
☐ Not very supportive
☐ No opinion
☐ Somewhat supportive
☐ Very supportive
12) If a national licensure system were implemented today, how likely would you be to:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Highly unlikely</th>
<th>Somewhat unlikely</th>
<th>Unsure</th>
<th>Somewhat likely</th>
<th>Highly likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seek out locum opportunities in other provinces/territories</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Practise in multiple provinces/territories on an ongoing basis</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Provide virtual care (e.g., telemedicine) to patients in other provinces/territories</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Practise temporarily in rural/remote areas in other provinces/territories</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Participate in further training in another province or territory</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

13) To what extent do you agree that national licensure will improve access to care for Canadians?

- ☐ Strongly disagree
- ☐ Somewhat disagree
- ☐ Neither agree nor disagree
- ☐ Somewhat agree
- ☐ Strongly agree
Your practice

14) Do you provide patient/clinical care (either direct or indirect)?
   ☐ Yes
   ☐ No

15) Which of the following is your primary work setting?
   ☐ 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 (please specify): ____________________________________________
Electronic tools

16) Please indicate which of the following electronic tools you use in the care of your patients. Select all that apply.

- Reminders for patient care
- Ordering lab tests
- Ordering diagnostic tests
- Receipt of hospital visit and discharge information
- Clinical decision support tool
- Access to list of medications taken by a patient
- Warnings for drug interactions
- Interface to pharmacy/pharmacist
- Access to lab test/diagnostic results
- Referral to other physicians
- Secure transfer of patient information
- Access to provincial/territorial patient information systems
- Interface to non-doctor health professionals
- An Artificial Intelligence (AI)
- None of the above

17) Which of the following can patients in your practice do? Select all that apply.

- Request appointments online (i.e. advance access e-scheduling)
- Request prescription renewals online
- View information from their health record online (e.g. lab test results or immunization history)
- Electronically add measurements (e.g. blood pressure readings) to their electronic record
- Electronically add text and/or other documentation to their electronic record
- Visit with you virtually (i.e. online by video)
- Consult with you via email or text message
- None of the above
- N/A (e.g. hospital practice only)
**Hours worked**

18) Do you provide on-call services?

☐ Yes  ☐ No

19) Estimate your average number of on-call work hours PER MONTH:

_________________________________________________

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

_________________________________________________

21) EXCLUDING ON-CALL ACTIVITIES, what is the TOTAL NUMBER OF HOURS you work in an average WEEK?

Including:

- 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.)
- Etc.
**Hours worked**

22) **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).

*The sum should reflect the total hours you indicated in the previous question. You may select the 'back' button and adjust that response if you feel it necessary.*

- [ ] 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

________________________

**Comments**

23) General comments:

____________________________________________
____________________________________________
____________________________________________
____________________________________________