ADVISORY COMMITTEE ON FAMILY PRACTICE  
(AdComFP)

TERMS OF REFERENCE  
(Approved June 4, 2009, revised April 2011, approved by CFPC Board  
September 2021)

PURPOSE  
To support family physicians throughout Canada with respect to issues impacting the  
practice environment

RESPONSIBILITIES

1. To provide guidance and insight on primary care and advise the College on a wide  
   range of issues associated with family practice as they evolve.

2. To participate in consultations for review of external stakeholder documents, clinical  
tools, and other resources, providing feedback from the family medicine perspective,  
as needed.

3. To gather and share information from all parts of Canada related to primary care and  
   family practice.

4. To advocate for and enhance the value and importance of family physicians in existing  
   and developing models of care.

5. To support family physicians through knowledge transfer related to changes occurring  
in family medicine and the practice environment, including collaboration with  
   external stakeholders to share innovations in primary care and best practices across the  
country.

6. To encourage and promote the establishment of networks of national, provincial,  
   regional, and local family physician leaders involved in primary care and family  
   practice.

7. To build links and promote communication between the CFPC, family physicians, and  
   other professional providers and organizations involved in inter and intra -professional  
team-based care.

8. To identify and promote factors relevant to quality outcomes in family practice.

9. To serve as a resource for Chapters as needed in their development and/or review of  
policies related to primary care and family practice.
ACCOUNTABILITY

The Committee Reports to the CFPC Executive and Board.

MEMBERS

Committee members should be selected to ensure expertise is included on the committee in areas relevant to primary care and family practice, including: physician remuneration, practice governance, interprofessional collaboration, comprehensive continuing care, information technology, quality outcomes, research and evaluation, knowledge transfer, change management, policy development, and emerging models of practice in each province.

The committee will be comprised of one family physician recommended by each Chapter*, one family physician from the Territories recommended by the CFPC, and one family medicine resident recommended by the CFPC’s Section of Residents.

*each Chapter representative to this committee is to have a standing or observer seat on the Board of his/her Chapter to ensure ongoing communication.

Observers:

To be invited to committee meetings as considered appropriate to the discussion and recommended by the Chair.

TERMS OF MEMBERSHIP

Members and Chair each serve a three-year term, renewable once.

FREQUENCY OF MEETINGS

At least two face-to-face or virtual meetings annually at the call of the Chair
Teleconferences between meetings at the call of the Chair