

THE COLLEGE OF
FAMILY PHYSICIANS
OF CANADA



LE COLLÈGE DES
MÉDECINS DE FAMILLE
DU CANADA

Minutes (Draft)
CFPC Annual Meeting of Members (AMM)
November 2, 2022
Virtual Meeting

Dr. Brady Bouchard, President, presiding

1. Call to Order

Dr. Brady Bouchard, President, called the Annual Meeting of Members (AMM) to order at 7.01pm ET and welcomed College members to CFPC's virtual AMM. He and each speaker shared an acknowledgement of the traditional land from which they were joining the meeting.

2. 2021-2022 Memorial Roll of CFPC Members

Members in attendance remembered all our colleagues who died between September 30, 2021, and September 30, 2022. Their names were included in the meeting materials.

3. Minutes of 2021 Annual Meeting of Members

Moved and seconded by Drs. Christie Newton and Sarah Cook:

Minutes

That the minutes of the CFPC Annual Meeting of Members held virtually November 11, 2021, be approved.

No discussion.

Carried.

4. Report of the President and Chair of the Board

The Annual Report was shared through the agenda and Dr. Bouchard will provide the State of the College Wednesday, November 9, 2022, at the opening of Family Medicine Forum.

5. Member Classes (Special Resolution)

Moved and seconded by Drs. Mike Green and Sarah Funnell:

Member Classes

Be it resolved as a special resolution that effective January 1, 2023, the College of Family Physicians of Canada have four classes of members;

Further that the classes of members be:

- (1) the Practising class members
- (2) the Non-Practising class members
- (3) the Learner class members
- (4) the Associate class members

And further that Practising class members be Voting Members and classes 2, 3, and 4 collectively be the “Non-Voting Members”.

And further that the rights associated with each member class be as set out in Note 1 of the memo to members provided to the members in advance of this meeting.

And further that the articles of the Corporation be amended to delete the statement of the classes of members that the Corporation is authorized to establish in its entirety and replace it with the statement included in Note 2 of the memo to members provided to members in advance of this meeting.

Note 1: The rights associated with each proposed member class will be as follows:

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| <p>Practising Class</p> <p>Includes First Year Practising (FYP)</p> | <p>A Practising class member is:</p> <ul style="list-style-type: none"> • A licensed physician in good standing, engaged in the practise of family medicine including patient care, teaching, research, and/or administrative practice including members in their first year of practise; or • Engaged in a primary practice or specialty other than family medicine who holds certification from the Royal College of Physicians and Surgeons of Canada, or another certifying body recognized by the College. <p>Practising class members are required to:</p> <ul style="list-style-type: none"> • Pay annual Corporation membership fees and Chapter fees as set by the Board and the Chapter Boards; • Fulfill CPD requirements as determined by the Board; and • Be members of both the Corporation and a Chapter (with the exception of members practising in the territories or outside of Canada). |
| <p>Non-Practising Class</p> | <p>A Non-Practising class member is a non-voting member in good standing who is:</p> <ul style="list-style-type: none"> • No longer actively engaged in providing medical care to patients, nor actively involved in any other medical or medically related field or endeavour; • An individual of distinction and not a family physician, who has made outstanding contributions to family medicine; or • A member of the public with a role on the CFPC Board and/or its Committees. <p>Non-Practising class members:</p> |

| | |
|------------------------|--|
| | <ul style="list-style-type: none"> • Are not required to pay annual Corporation or Chapter fees; • Are not required to fulfill CPD requirements; and • Are members of both the Corporation and a Chapter. |
| Learner Class | <p>A Learner class member is a non-voting member in good standing who is:</p> <ul style="list-style-type: none"> • A physician enrolled as a resident in an approved postgraduate training program in family medicine; • A physician who was previously a practising family physician of the College and is now enrolled as a resident in an approved postgraduate training program in a medical discipline other than family medicine; • An international medical graduate (IMG) who is enrolled in a Canadian provincial ministry of health- and/or university-approved assessment/training program leading to the attainment of a license to practise in Canada; or • An individual enrolled in a Canadian university faculty of medicine undergraduate program leading to the MD degree who has an interest in family medicine. <p>Learner class members:</p> <ul style="list-style-type: none"> • Are not required to pay annual Corporation or Chapter fees; • Are not required to fulfill CPD requirements, with the exception of a resident who may voluntarily register CPD; and • Are members of both the Corporation and a Chapter. |
| Associate Class | <p>An Associate class member is a non-voting member in good standing who is:</p> <ul style="list-style-type: none"> • A health care professional or other who works in collaboration with family physicians in clinical practice or academic departments of family medicine. <p>Associate class members:</p> <ul style="list-style-type: none"> • Pay annual Corporation fees as set by the Board; • Are not required to fulfill CPD requirements; and • Are not required to belong to a Chapter nor pay annual Chapter fees. |

Note 2: the articles of the Corporation will be amended to delete the statement of the classes of members that the Corporation is authorized to establish in its entirety and replace it with the following:

The Corporation is authorized to establish four classes of members. The classes of members are (1) the Practicing class members, (2) the Non-Practicing class members, (3) the Learner class members, and (4) the Associate class members (classes 2, 3, and 4 being collectively the “Non-Voting Members”).

The Practising class members are entitled to receive notice of, attend, and vote at all meetings of the members of the Corporation.

The Non-Voting Members do not have the right to receive notice of, attend, or vote at meetings of members, except to the extent mandated by the Act. The Non-Voting Members are not entitled to vote separately as a class or group on a proposal to amend the articles in the case of an amendment referred to in section 199(1)(a) or (e) of the Act.

Discussion:

- It was explained that practising class includes full time, part-time, semi-retired (any clinical time). The focus is on practising and non-practising, rather than how much one practises.
- In response to concerns (shared by Drs. Gary Viner and Suzanne Girard) that some members may withdraw as a result of the relatively high fees for part-time family doctors, it was reiterated that a reduced fee option for part-time physicians continues to be offered to members and is not affected by the Practising class. Members were informed of the process outlined on the CFPC website under the membership tab to request considerations related to parental leave, medical leave, significantly reduced clinical time, etc. This reduced fee option is intended to support better equity for members by considering their individual circumstances.
- In response to questions from Drs. Alykhan Abdulla, Sarah Newbery, Sarah Kredentser, and Sherine Ensan it was further explained that the consolidation of classes does not affect revenue from member fees; less than 1% difference. The focus of the decision, as conveyed, was simplification and clarification for members and for administrative purposes.
- Resident themed questions were asked by Drs. Saptarshi Chowdhury, Conrad Tsang, Annick Gautier, and Stephanie Fong. Recognizing that residents are doctors, the Board felt that including them in the Learner class with no fee, was a way of supporting them at the start of their career. It was highlighted that learners continue to be members with access to College supports and advocacy, with a voice through the Section of Residents and in various opportunities to participate on other College committees.
- Responding to Drs. Christopher Kenworthy and John Maxted, concerning the voting rights of life members, it was reiterated that practising members with CPD requirements and paying the full fee be eligible to vote.

It was also explained that contributions to the College for Non-Practising members continue to be available and welcome, for example adding knowledge and expertise on CFPC committees, as reviewers, supporting the Foundation for Advancing Family Medicine. In thinking of life and retired members, the College leadership conveyed their hope that all members will have passion, energy and interest in supporting their College – together we're stronger. One explanation offered was that voting privileges have

historically been related to the procedural aspect of voting on some operations of the College at the AMM.

- Concluding questions from Drs. Elizabeth Birk-Urovitz and Vivian Ramsden drew out that the focus of the change is to keep all members engaged, including Associate class members. The CEO reiterated that listening to our members is a particular focus in his first year. Implications for current Affiliate Specialist members in terms of CPD requirements were explained further: they will join the Practising class and are subject to the current maximums in terms of Royal College of Physicians and Surgeons of Canada Maintenance of Certification credits and the American Medical Association's 50-credit maximum over the 5-year cycle.

Carried.

6. By-Law Amendments (Special Resolution)

Moved and seconded by Drs. Yan Yu and Magaly Brodeur:

By-law Amendments

Be it resolved as a special resolution that the amendments to By-Law No. 1 in the form provided to the members in advance of the meeting, including related to alignment with the new member classes, be approved, and that the amended and restated By-Law No. 1 provided to the members in advance of the meeting be confirmed as a by-law of the Corporation.

And be it further resolved that any of the officers and directors of the Corporation are hereby authorized and directed for and on behalf of the Corporation to execute and deliver all such documents and to do all such other acts and things as they may determine to be necessary or advisable to give effect to this Special Resolution.

Discussion: none

Carried.

7. Report of the Executive Director and CEO

Dr. Lawrence Loh, appointed September 26, 2022, shared his first report as Executive Director and CEO of the CFPC. He focused on what he has learned so far: the CFPC is the College for all members and the only organization exclusively dedicated to the interests of family physicians. The CEO committed to listening to members and increasing engagement with members to advance our cause together.

For instance, the agenda for this meeting originally included a proposal to increase member fees this year, equal to inflation. He heard clearly from some members that a fee increase was unwelcome at this time. With his recommendation, the Board and leadership team recognized that times are difficult amid an unprecedented crisis that is the natural end of decades of

under-resourcing and support for family medicine, exacerbated by the COVID-19 pandemic. Given this, the Board decided on a one-time deferral of this proposed fee. This results in a four-million-dollar deficit in our March 1, 2023, to February 29, 2024 operating budget and will mean changes to service levels and activities—though attempts will be made to mitigate impacts as possible.

The CEO reiterated that CFPC’s leaders, staff and volunteers are passionate about raising the profile of family medicine and member’s credentials, to maintain standards and amplify member’s voices, and to make life easier for members.

The CEO shared that in 2022, the College issued and advocated for policy recommendations to address administrative burnout among family physicians and called for the establishment of a strategy to support the mental health of health care workers. He also highlighted that the College’s continuous professional development offerings remain hallmarks that make our certifications a sign of trust to the public and governments, while being crucial to supporting members as they maintain their skills and lifelong learning efforts.

In closing, the CEO reiterated the importance of coming together as a community of 42,000 voices to push governments for real supports and resources in family medicine, and again stressing that the CFPC is listening and in members’ corner.

8. Report of the Nominating Committee

Dr. Francine Lemire was recognized for her unforgettable contributions to the CFPC as the Executive Director and CEO from 2013 until September 2022.

Drs. Catherine Cervin and Marie Giroux are completing their service on the Board of Directors and were recognized.

Dr. Danielle Cutts, Chair of the Nominating Committee announced the results of the election, highlighting the following points:

- This year’s recruitment priorities for serving on the Board included identifying individuals who self-identify as marginalized, who hold a Certificate of Added Competence, who are community-based, who practise in Atlantic Canada, and/or who are francophone.
- The Nominating Committee focused on identifying individuals who would make a positive contribution to the governance of the CFPC at this time, considering the diversity of our membership, and complementing the mix of current Directors.
- Three candidates were forwarded for two new Director-at-Large positions. The election also requested confirmation of the new President-Elect, Secretary-Treasurer and an additional term for one current Board Director.
- A total of 1,539 (3.7%) of members voted electronically (compared with 4.1% last year).

Results: 2022-23 Board of Directors

- Dr Alykhan Abdulla, Director-at-Large (newly elected)
- Dr Jean-Pierre Arseneau, Director-at-Large (continuing his term)
- Dr Carrie Bernard, Director holding the office of Honorary Secretary-Treasurer (newly elected)
- Dr Brady Bouchard, Director holding the office of Past President (acclaimed)
- Dr Magaly Brodeur, Director-at-Large (continuing her term, in her first five years of practice)
- Dr Sarah Cook, Director-at-Large (continuing her term)
- Dr Amanda Condon, Director-at-Large (continuing her term)
- Dr Helen Cuddihy, Director-at-Large (newly elected)
- Dr Sarah Funnell, Additional Director (continuing her term)
- Dr Michael Green, Director holding the office of President-Elect (newly elected)
- Dr Christie Newton, Director holding the office of President (acclaimed)
- Dr Yan Yu, Director-at-Large (newly elected for an additional 3-year term)

9. Report of the Honorary Secretary-Treasurer

The meeting package circulated to members outlined:

- The 2021-2022 fiscal year was for the twelve-month period of June 1, 2021, to May 31, 2022. Revenues and expenses related to the 2021-2022 unqualified (clean) Auditor's report and audited financial statements: deficit for the year ended May 31, 2022, was \$1,038,355. It is being funded by the surplus from the fiscal year ended May 31, 2021.
- 2023 Certification Examination in Family Medicine (FM Exam) fee is set at \$3,520 (representing a 7.7% increase, which is the level of predicted inflation). The FM exam's 2023 budgeted subsidy is approximately 30% of the total per candidate cost for the FM Exam. This follows the board approved strategy to increase the FM Exam fee annually by the greater of 2% or inflation.
- 2023 Emergency Medicine Certificate of Added Competence Examination (EM Exam) fee is set at \$3,597 (10% increase based on previous decision to increase the EM fee annually by the greater of 10% or inflation until such time as the fee covers both direct and indirect costs for the EM exam).
- The fiscal year for the College is transitioning to March 1 to February 28/29, as determined by special resolution at the 2020 Annual Meeting of Members. 2022-2023 represents a nine-month transitional fiscal period from June 1, 2022, to February 28, 2023.
- Revenues budgeted for the nine-month 2022-2023 budget are in the amount of \$40,913,595. Expenses are in the amount of \$46,935,263. The budgeted deficit of \$6,021,688 will be funded from the remaining 2020-2021 realized surplus of \$4,730,281 (remaining after the 2021-2022 deficit of \$1,038,356) and the COVID-19 Contingency

Fund of \$1,291,387. In addition, an amount of \$8,490,124 represents programs and projects that will be funded through reserves in 2022-2023.

- The approval of the member class changes in part 5 above will be made January 1, 2023. The fees associated with each new member class will be billed on July 1, 2023 as: Practising - \$823; Practising (first year in practise) - \$425; Associate - \$102; Learner (students and residents) - \$0; Non-Practising - \$0. The resulting deficit for 2023-2024 is approximately \$4M.
- The CFPC has not raised member fees since July 2017 including throughout the COVID-19 pandemic. As noted in the Executive Director and CEO's report in part 7, members were heard and the proposed fee increase was deferred for one year. The CEO committed to taking the next year to examine every facet of the College's operations to see where savings may be found while emphasizing the value CFPC's leaders, staff and volunteers bring to members.

Dr. Michael Green, Honorary Secretary-Treasurer, referenced the reports circulated.

Auditor

Moved and seconded by Drs. Carrie Bernard and Amanda Condon:

External auditors

Be it resolved that Deloitte LLP, be appointed as the external auditors for the College for a period of three fiscal years 2022-2023, 2023-2024, 2024-2025, and for the CFPC Employee's Pension Plan for the fiscal period starting 2022-2023 and until the plan is wound up, for a fee not exceeding the amount laid out in the proposal submitted by Deloitte, i.e. \$150,200 and \$10,000 (plus taxes and out of pocket costs) for the College and the Pension Plan respectively, with an option to further extend for a period of two years beyond 2024-2025, as needed.

Context: A request for proposal process conducted and reviewed by the Board.

Discussion:

- In response to Dr. Sherine Ensan, competitive pricing and the quality of service received were the focus of the tendering process.

Carried.

10. Member Recognition

Each outgoing Committee Chair below is receiving a gift in recognition of their commitment to the CFPC and was recognized.

- Dr. Lisa Bonang – Chair, Advisory Committee on Family Practice
- Dr. Bill Ehman – Chair, Maternity & Newborn Care Member Interest Group
- Ms. Ivneet Garcha – Co-Chair, Section of Medical Students
- Dr. Melissa Holowaty – Chair, Addiction Medicine

- Dr. Sahil Jain – Chair, Hospital Medicine Member Interest Group
- Dr. Annelise Miller – Chair, First Five Years in Family Practice Committee
- Dr. Michael Rondilla – Chair, Self Learning Committee
- Dr. Ateeya Vawdo – Chair, Section of Residents
- Dr. Anna Wilkinson – Chair, Cancer Care Member Interest Group
- Dr. Yan Yu – Chair, Patient’s Medical Home Steering Committee

Dr. Jeanette Boyd – Chair, Foundation for Advancing Family Medicine Board of Directors was also recognized.

A warm welcome to our new Chairs:

- Dr. Kiran Dhillon – Chair, First Five Years in Family Practice Committee
- Dr. Sarah Lespérance – Chair, Self Learning Committee

Recognition of three Chairs renewing or extending their terms:

- Dr. Lisa Graves - Chair, Examinations - FM
- Dr. Andrew MacPherson – Chair, Examinations - EM
- Dr. Lynda Redwood-Campbell – Chair, Besroure Centre for Global Family Medicine

11. Question and Answer (Q&A) Session

Dr. Christie Newton, President-Elect entering this meeting, moderated the 40-minute Q&A session. The panel of speakers and additional senior staff helped respond to questions. Questions were invited prior to the meeting, as members reviewed the agenda and reports, and throughout the meeting:

In response to questions from Drs. Peter MacKean, Christine Sing, Angela Laughton, Lauren Galbraith, Anne Sorensen, Jaclyn Wallace, and Nichelle Desilets, an update of the **Education Reform Task Force** and implementation of the education reform recommendations from the **Outcomes of Training Project (OTP)**, shared the following points:

- **The changes are not imminent and will be incremental:** The CFPC has started the next phase of OTP work focused on curriculum renewal and responsible change stewardship. There is a lot of work ahead before the educational recommendations become a reality and this will be an incremental process. The CFPC would like to see some residency programs or sites being able to offer a three- year program by 2027, and subsequently build on the experiences of pilot programs. This means that there will be options for medical students for several years.
- **We are listening and will be flexible:** The Education Reform Taskforce has been struck (and has met twice) and will guide the next phase of the OTP over a five-year time period. As part of this we have initiated a broad consultation process with stakeholder groups and partner organizations. A learner advisory group has been

commissioned to learn from students, and how to shape our communications with them.

- **Education is only part of the solution:** The educational changes proposed are an investment in the future of family medicine and are intended to strengthen comprehensive care and support family physicians (educationally) in their changing roles and for the greater complexity of care they are called upon to manage. This is only one element with a need for strong advocacy to bring about better practice conditions and result in better access to care. The CFPC is engaged in significant advocacy efforts of this kind (e.g. reducing administrative burdens, locum relief). The aim is to equip family medicine residents for the increasing complexity while recognizing the realities of current day practice.

Concerns were raised about a **mandatory 3rd year of family medicine residency** as a possible deterrent to choosing family medicine, a possible deterrent to practicing rural medicine, even more for those considering achieving Certificates of Added Competence, and also possibly driving more family physicians to narrow their practice focus. In response, the CFPC signaled:

- Leadership hearing member concerns on the third year of training recommendation and taking them seriously. A series of consultations was conducted with our Section of Medical Students, Section of Residents, and First Five Years in Family Practice Committee. The evidence that influenced recommendations included focus group interviews with early career family physicians, including those in rural settings to understand their transition into practice experiences and career influences.
- The analysis that supports residency reform is available on the CFPC website in one of the Outcomes of Training Project evidence summaries:
<https://www.cfpc.ca/CFPC/media/Resources/Education/AFM-OTP-Summary&-Practice-Choices.pdf>
 - The conclusion of that paper states: “This study highlights the fact that there are numerous factors influencing the choices of early-career family physicians in relation to the clinical domains they include as parts of their family medicine practices. The recognition that there are personal factors, such as a lack of interest; educational factors influencing feelings of a lack of competence or confidence; organizational factors related to practice models; hospital privilege limitations; and system factors, such as remuneration challenges, all highlight the need for policy-makers to consider these factors when optimizing the roles of family physicians in the health care system. Education is one key factor in producing family physicians who are prepared to practice in the health care system, but there are other factors that also influence what they actually do in practice.”
- The College indicated a recognition that educational influences are but one important factor to recruiting and retaining family physicians. College leadership further signalled that work is underway to support comprehensive changes to the

- practice environment as well; the focus of the OTP, however, is a recognition that this is a sphere for which we have clear authority and accountability.
- The CFPC highlighted an ongoing engagement with rural physicians and the Society of Rural Physicians of Canada (SRPC), as well as universities, in ensuring these voices were represented in the structured curriculum renewal process.
 - College leadership highlighted also that a third-year resident would be a net value add to any family practice, and also increase the likelihood that residents may choose to stay and practice in their community of training. The move from two years of training to three years does not include completing training with both Certification in the College of Family Physicians of Canada and a Certificate of Added Competence (CAC). The College is continuing to assess, as part of this work, how much extra training might be required to achieve the CAC. Data presented by the CFPC does not foresee a third year of family medicine training incentivizing focused practice.
 - The CFPC emphasized that a third year of training would not be ‘more of the same’ but would instead focus on comprehensive family practice, transition to practice, and adding insights into the complexity of care that define family practice today. It was reiterated that the goal of residency training is to produce competent and confident residents who can practice anywhere, which is particularly challenging with 2-year training programs given that practice today is very different and more complex since previous decisions were taken on length and nature of training.
 - The CFPC shared US data which showed an extension in family medicine residency from three to four years has not resulted in decreased interest or recruitment of learners who wish to practice comprehensive care.

The College noted that governments are increasingly recognizing the critical need to resource and fund the family medicine sector through training and practice supports.

In response to Dr. David Schieck, College leadership reiterated that the College’s vision for the future of family practice continues to be the Patient’s Medical Home, which envisions family practice as occurring in multidisciplinary teams led by family doctors. It was also noted that family physicians in a Patient’s Medical Home would continue to provide care and not become solely management focused.

- In response to Dr. Peter MacKean’s question around how members can recommend educational initiatives to address current gaps in a residency training program, the College highlighted the following: Identifying gap areas in medical education (whether in training, practice or both) is a *shared responsibility* and priority of our College, learners, teachers, physicians, and community stakeholders at large. Often the starting point is a conversation with Staff.
- The CFPC has a process for referring emerging topics and gap areas in medical education, overseen by the CFPC’s Family Medicine Specialty Committee, which has a

mandate to help define educational priorities, curriculum and in-training assessment approaches and standards.

Dr. Ahmed Amayem asked if dropping the Simulated Office Orals (SOOs) has been considered since it was not offered during the Covid-19 pandemic, yet certification was awarded without it.

- It was highlighted that the decision to certify without a SOO was made during an extraordinary period of time.
- It was further highlighted that patient-centered interviewing and patient-centered care, both assessed in part by the SOO, remain critical to the practice of family medicine.

Dr. Sandeep Kumar asked why the CFPC does not allow non-Canadian practicing family medicine physicians to write or challenge the Certification Examination in Family Medicine without a license to practice in Canada.

- The College highlighted the importance of assessment in requiring a period of 5 years in practice before being eligible to challenge the exam. This is a period of observed practice to ensure the individual is ready and practicing at a level commensurate with certification.
- It was also highlighted that an individual who has completed a Practice Ready Assessment process (available in some provinces) has the practice requirement reduced to 4 years.

Dr. Sherine Ensan shared questions on finances and whether there are processes for tendering work e.g. software engineers, accounting, auditors to ensure best value for money, the CFPC responded as follows:

- CFPC is guided by policies and procedures ensuring robust budgeting.
- We open tender requests for any services with a value over \$10,000 and any consulting with a value over \$25,000 to ensure competitive process and pricing.

Dr. Sherine Ensan asked about the status of the office lease at \$2 million a year and whether lower cost options are being considered.

- In response, the CFPC highlighted that the existing office lease is in an industrial park in Mississauga and has been long-standing, which has been helpful for controlling costs.
- It was further highlighted that the CFPC is presently reviewing physical office space requirements in light of the COVID-19 pandemic, and that the lease, among other things, are top of mind in ensuring that member dues are being used to their optimal value.

Dr Ali Damji requested an update on the status of the practice eligible route to certification with a CAC, given the moratorium over the past several years.

- CFPC indicated that the Practice Eligible Route to certain CACs is currently being developed with aim for implementation over the next year.

Dr. John Brewer asked what CFPC is doing nationally to advocate for a non fee-for-service method of compensation.

- In response, the CFPC indicated that the College is actively advocating for members, but that the provinces are ultimately in charge of making decisions related to remuneration.
- The CFPC highlighted its long time support for blended payments as part of the Patient's Medical Home vision, and their continuing work with Chapters and provinces regarding remuneration decisions.
- CFPC Leadership also highlighted that remuneration is one area of work and advocacy among all the pieces being advanced to adjust the practice environment to make comprehensive family practice attractive no matter where the family medicine graduate may be.

Dr. Cassandra Millar noted that the CFPC is engaged in an investment strategy and asked what are the fees involved, and if passive index investing had been considered. In response, CFPC leadership offered the following points:

- The CFPC continues an investment strategy that concentrates on certain policies and positions that matter to our members, for instance the exclusion of tobacco and fossil fuel producing industries. These types of Board decisions might not be available to us in a passive index investing.
- The CFPC also reiterated that a robust investment policy guides the current portfolio manager, and that fees for investments are well below market as the CFPC is recognized as a not-for-profit organization and a partner of Scotiabank.

Dr. Elhamy Samak asked how the CFPC is addressing the shortage of Family Physicians all over Canada, to which CFPC leadership indicated:

- The CFPC is working closely with the federal government to address health human resource issues.
- Many provincial Chapters are pushing their respective health ministries to find solutions.
- The CFPC has also issued a [Position Statement on Administrative Support for Family Medicine in Canada](#) that is intended to offer solutions to make the practice environment more supportive.
- It was noted that the federal and provincial governments are listening, most notably with the recent announcement in British Columbia of a *Longitudinal Family Physician Payment Model*.

Dr. Nichelle Desilets requested an update on what the CFPC is doing to identify and address "scope creep" and ensure the value of the Family Physician is upheld?

- In response, CFPC leadership highlighted that governments right now care about access because patients care about access, and that family physicians need to defend their value but recognize that they will do so as part of team-based comprehensive care.

Dr. Bouchard thanked the group for the thoughtfulness and relevance of the questions being asked. CFPC Leadership highlighted a commitment to continuing to discuss and find answers and solutions for the key points that were raised. There was encouragement for members to continue the dialogue through participating in committees, providing feedback to College leadership, and discussing with CFPC Board members. The College also indicated that additional questions and concerns about the Annual Member's Meeting or topics of interest to members could be submitted to amm@cfpc.ca .

Adjourned at 8.30pm ET.

Next meeting: To be held November 1, 2023.

2022 meeting date, format and participants:

This meeting was held the week before Family Medicine Forum.

206 Participants: 147 voting members, 36 CFPC Staff, 9 Chapter Staff, 14 Other (non-voting members and leads of partner organizations). An additional 261 members voted in advance of the AMM.

Format: Lumi platform for seeing, hearing and secure voting; questions welcomed through the type-in 'Q&A' feature.