

April 30, 2026 Member Town Hall: What We Heard

Family Medicine Forward: The CFPC's Strategic Planning Initiative

1. Overall tone and context

Members described practising family medicine in an environment marked by workforce shortages, access challenges, administrative burden, strained morale, and system misalignment. There was a strong sense that the moment is critical, and that the College of Family Physicians of Canada (CFPC) must respond with focus, clarity, and assertiveness rather than diffuse activity.

2. Clear priority areas identified by members (Poll Question 1)

Across live polling and chat discussion, several themes consistently emerged as top priorities for the CFPC over the next three to five years:

- **Future workforce:** Strong concern about recruitment, retention, training pathways, rural/underserved coverage, international medical graduates, and ensuring that family medicine trainees remain in comprehensive practice
- **Advocacy and policy influence:** Members expect the CFPC to be a sharper, more influential national advocate—particularly with governments—using evidence, data, and public support to drive system change
- **Clarifying scope of practice and identity:** Repeated calls for clarity about the role, skills, and value of family physicians, including differentiating family medicine from other models of primary care
- **Value proposition and member relevance:** Members want to clearly understand—and be able to articulate—what a CFPC membership means for them in practice, at all career stages
- **Practice models and innovation:** Interest in modern, team-based, and scalable practice models that support comprehensive care rather than fragment it

The word cloud shown during the session reinforced **future workforce, advocacy, practice models, and value proposition** as the most salient issues.

3. Ranking of the CFPC roles (Poll Question 2)

When asked to rank the CFPC's core activities, members were remarkably consistent:

1. **Advocacy** – viewed as the most important activity overall
2. **Standard setting** – maintaining credibility and professional authority
3. **Value proposition** – ensuring tangible, visible member benefit
4. **Alignment** – improved coordination between national and provincial Chapters

This order was explicitly summarized during the session and reflected in polling results.

4. Expectations of the CFPC's advocacy role

Members expressed a strong desire for the CFPC to:

- Act as the **primary national voice for family medicine**, including physician shortages and system design
- **Better leverage public and patient support** to influence governments, not relying solely on professional-to-government advocacy
- Be **more visible, assertive, and media present**, including offering clinical expertise to journalists and decision makers
- Coordinate messaging more closely with **provincial Chapters, the Canadian Medical Association, and other national medical organizations**, reducing fragmentation and confusion for governments

There was strong support for the CFPC stepping fully into this leadership space.

5. Identified risks and system pressures

Several substantive risks were raised:

- **Erosion of comprehensive family medicine** through alternative or commercial primary care models, including private-sector encroachment
- The danger of **assuming evidence from family medicine applies to non-physician or fragmented care models**, without scrutiny
- **Risk of inadequate communication** of the CFPC's work to members, the public, and policy makers

6. What members expect from the strategy

Members were clear that the strategy must:

- Lead to **visible change**, not just a restatement of values or ambitions
- Have **clear priorities and trade-offs**, reflecting capacity and reality
- Be grounded in members' lived experiences while positioning the CFPC to act decisively at the national level
- Allow members to **recognize their own input** in what comes next

7. Engagement going forward

Members were informed that this town hall is one step in a broader engagement process including surveys, focus groups, validation of themes, and further town halls before strategic directions are finalized.

The CFPC is currently inviting members to volunteer for small virtual focus groups as part of its *Family Medicine Forward* strategic planning process. These sessions, facilitated by external consultants, offer a confidential and constructive forum for members to share perspectives, test emerging ideas, and help shape the CFPC's priorities for the next three to five years. Interested members are encouraged to express their interest by [registering today](#).

The composition of the focus groups will be done in a way that reflects diversity through a broad mix of members, across practice contexts, career stages, geographic settings, and backgrounds, ensuring that *Family Medicine Forward* reflects the full breadth of who our members are and what they face in practice every day.