

**Family Medicine Longitudinal Survey
Time 2 (Exit) 2025**

Questions 1-4 are used to generate a Unique Identifier. These are not available for request.

Demographics

5. What is your marital status?

- a. Single
- b. Married
- c. Common-law
- d. Divorced/ Separated
- e. Widowed
- f. Prefer not to answer

6. Do you have children?

- a. Yes/Expecting
- b. No
- c. Prefer not to answer

7. What is your gender?

- a. Female
- b. Male
- c. Non-binary
- d. Prefer not to answer

8. Select the ONE statement which best describes the environment in which you grew up PRIOR to university.

- a. Exclusively/ predominantly inner city
- b. Exclusively/ predominantly urban/suburban
- c. Exclusively/ predominantly small town
- d. Exclusively/ predominantly rural
- e. Exclusively/ predominantly remote/isolated
- f. Mixture of environments

9. What year were you awarded your M.D. degree? (Enter 4-digit year; for example, 2010)

10. At which university were you awarded your M.D. degree?

- a. University of British Columbia
- b. University of Calgary
- c. University of Alberta
- d. University of Saskatchewan
- e. University of Manitoba
- f. Western University
- g. McMaster University
- h. University of Toronto
- i. NOSM University
- j. University of Ottawa
- k. Queen's University
- l. Université de Sherbrooke
- m. Université de Montréal
- n. McGill University
- o. Université Laval
- p. Dalhousie University
- q. Memorial University
- r. Outside Canada

About Your Residency

11. To what extent do you agree or disagree with the following statements? (Select One: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree, Don't Know)

- a. My residency program was situated primarily within family medicine settings.
- b. In my residency program, I was exposed to a variety of different family medicine settings.
- c. My residency experiences were relevant to family medicine practice, even when in settings outside of family medicine.
- d. My preceptors in other medical specialties valued family medicine.
- e. My residency program exposed me to strong family medicine role models.
- f. In my residency program, I have had an opportunity to develop relationships with a group of patients who I followed over the long term.
- g. I feel/felt responsibility for a group of patients.
- h. In my residency program, I had an identified person (or few persons) guiding my development as a family physician by overseeing my learning and progress.
- i. In my residency program, I was provided experiences that exposed me to patients who had complex and/or ambiguous health issues.
- j. In my residency program, there were many informal opportunities given to me for feedback on my performance.

- k. In my residency program, I understood what the program expected of me, in order to graduate.
- l. In my residency program, I contributed to tailoring my learning when learning needs were identified.
- m. Throughout my program I was actively aware of my progress.

12. To what extent do you agree or disagree with the following statements? My residency training prepared me to... (Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree)

- a. ...Care for the full range of health problems that may be encountered in family medicine.
- b. ...Care for patients at all life stages.
- c. ...Care for patients in a range of clinical settings (e.g., office, hospital, home, etc.)
- d. ...Care for a range of populations (e.g., vulnerable, under-served, urban, rural, etc.).
- e. ...Provide care across the spectrum of clinical responsibilities, from prevention to palliation.
- f. ...Provide continuous care to the same group of patients over the long term.
- g. ...Use electronic medical and health records.
- h. ...Work as part of a team with other types of health professionals.
- i. ...Evaluate and improve the quality of your patient care.
- j. ...Teach medical students, residents and other health profession learners.

Perceptions about Family Medicine

13. To what extent do you agree or disagree with the following statements? (Select One: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree, Don't Know)

- a. I am proud to become a family physician.
- b. Patients recognize the value of family medicine.
- c. Patients believe that family physicians provide value above and beyond referring to other types of specialists.
- d. I have found that other medical specialists have little respect for the expertise of family physicians.
- e. Family physicians make a valuable contribution that is different from other specialists.
- f. I would prefer to be in another medical specialty.
- g. Government perceives family medicine as essential to the health care system.

Problem Solving and Learning

14. To what extent do you agree or disagree with the following statements? (Select one: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree)

- a. I sometimes feel overwhelmed when dealing with patients who present with complex or ambiguous health issues.
- b. I can identify my own learning needs.
- c. In spite of my best intentions, I rarely find the time to do the learning I need to stay up-to-date.
- d. I know how to evaluate the accuracy and relevance of information before using it to inform my patients' care.
- e. I can problem solve effectively when faced with complex or ambiguous patient presentations.

Practice Exposure and Intentions

15. After completing your residency, how likely are you to practice in the following organizational models? (Select One: Very unlikely, Somewhat unlikely, Neutral, Somewhat Likely, Highly Likely, Don't know)

- a. Solo practice
- b. Group physician practice
- c. Interprofessional team-based practice
- d. Practice that includes teaching health profession learners

16. After completing your residency, how likely are you to practice in the following family medicine practice types? (Select One: Very unlikely, Somewhat unlikely, Neutral, Somewhat Likely, Highly Likely, Don't know)

- a. Comprehensive care delivered in one clinical setting. (e.g., office –based)
- b. Comprehensive care provided across multiple clinical settings (in-hospital, long-term care, office).
- c. Comprehensive care that includes a special interest (such as sports medicine, emergency medicine, palliative care, etc.)
- d. I plan to focus only on specific clinical areas (such as sports medicine, maternity care, emergency medicine, palliative care, hospital medicine etc.)
- e. OTHER (please specify).

17. In your first three years of practice, do you intend to commit to providing comprehensive care to the same group of patients? (Select One: Very Unlikely, Somewhat Unlikely, Neutral, Somewhat Likely, Highly Likely).

18. If very unlikely or somewhat unlikely, what is your primary reason? (check one only)

- a. I may eventually practice that way, but not at the start
- b. I'm not interested in that type of practice
- c. I plan to focus my practice in a specific area
- d. I intend to do locum practice(s)
- e. I'd like to, but there are obstacles preventing me

19. To what extent do you agree or disagree with the following statement: I am confident in my current ability to provide comprehensive care to the same group of patients over time. (Select One: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree).

20. How much exposure have you had to the following domains, practice settings, and specific populations in your medical education to date? Note: This is not an exhaustive list of everything you may do in your practice but rather a selected set of domains of interest to the CFPC.

- a. Care across the life cycle
- b. Intrapartum care
- c. Mental health care
- d. Chronic disease management
- e. Palliative Care/End of life
- f. Office-based clinical procedures
- g. In-hospital clinical procedures (e.g., chest tube insertion, adult lumbar puncture, nasogastric tube insertion)
- h. Practice setting – Emergency departments
- i. Practice setting – In-hospital
- j. Practice setting – Care in the home
- k. Practice setting – Long-term care facilities
- l. Marginalized, disadvantaged and vulnerable populations
- m. Rural populations
- n. Elderly populations
- o. Indigenous Populations

21. In your future practice as a family physician, how likely are you to provide care in each of the following domains, practice settings, and specific populations in the first 3 years? (Select One: Very Unlikely, Somewhat Unlikely, Neutral, Somewhat Likely, Highly Likely)

- a. Care across the life cycle
- b. Intrapartum care
- c. Mental health care
- d. Chronic disease management
- e. Palliative Care/End of life
- f. Office-based clinical procedures
- g. In-hospital clinical procedures (e.g., chest tube insertion, adult lumbar puncture, nasogastric tube insertion)
- h. Practice setting – Emergency departments
- i. Practice setting – In-hospital
- j. Practice setting – Care in the home
- k. Practice setting – Long-term care facilities
- l. Marginalized, disadvantaged and vulnerable populations
- m. Rural populations
- n. Elderly populations
- o. Indigenous Populations

22. To what extent do you agree or disagree with the following statement: "I am confident to begin the practice of comprehensive family medicine in any community in Canada." (Select One: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree).

23a) During your regular family medicine block rotation, how many patients do you typically see in an average week? (Please only enter a whole number) _____

23b) Were you assigned a dedicated panel of patients for whom you serve as the regular care provider?

- a) YES (please specify # of patients) _____
- b) NO

24. EXCLUDING on-call time, on average how many hours do you spend on the following activities in a typical work week (regardless of block rotation)? Please assume each activity is mutually exclusive (i.e., if an activity spans two categories, please report hours in only one category). The sum should reflect your total average hours in a typical work week. (Please only enter a whole number)

- a) ___ hrs/week Direct patient care, regardless of setting and amount of supervision received
- b) ___ hrs/ week Indirect patient care (e.g., charting, reports, phone calls, etc.)

- c) ___ hrs/ week Independent and/or group learning (e.g., reading, studying, journal club)
- d) ___ hrs/ week Research and/or other scholarly work for academic project(s)
- e) ___ hrs/ week Providing teaching, supervision, or other education service, with or without concurrent patient care
- f) ___ hrs/ week Administrative tasks (e.g. emailing, scheduling, etc.)
- g) ___ hrs/ week Other (please specify) _____

25. Please provide us with any comments you have on the survey. We welcome your feedback! Thank you.

On behalf of the CFPC, we wish to thank you for completing this survey. Your data will help us to evaluate the outcomes of family medicine residency education in Canada.