June 26, 2018

The College of Physicians & Surgeons of Ontario
80 College Street
Toronto, Ontario M5G 2E2

Subject: Draft Policies on Continuity of Care

Dear Sir/Madame:

On behalf of the Oshawa Clinic Group, Canada’s Largest Multispecialty Group Practice and on behalf of our Family Health Organization comprised of 58 family physicians, I have been asked to communicate a number of concerns that our Executive Committee have identified with respect to the Draft Policies on “Continuity of Care”.

While the CPSO Continuity of Care Policy seems reasonable on the surface, upon review of this draft document, our Group has some serious concerns on the significant additional workload being placed on primary care physicians without any consideration of the impact that it has on community based physicians. In our view, regulation is not the way to improve the quality of care in physician practices and this simply adds another layer of bureaucracy and red-tape to an already excessive workload.

The Oshawa Clinic Group practices from three locations in the Durham Region and at each of the three locations, we operate an Urgent Care Centre in order to ensure that patients rostered to our FHO have access to physicians in a timely manner and also to provide primary care to the large number of individuals who are not part of our Family Health Organization roster and in many cases do not have a family physician. The Continuity of Care proposal places an additional burden on physicians with regard to reporting encounters to patients’ family doctors when in many cases patients do not want their family doctor advised of specific encounters. These regulations would also require physicians to spend an inordinate amount of time coordinating patient visits with specialists.

Our Urgent Care Centres provide a valuable resource in our community and we provide care to patients who would otherwise have to go to an Emergency Department to seek episodic care. When we review these draft policies, we need to seriously consider our future practice model and whether we should restrict our Urgent Care Centres to “rostered patients only”, which would disadvantage a large segment of people who don’t have a family physician. In our opinion, these overreaching regulations take all responsibility away from the patient and place it squarely on the primary care provider and create significant additional burden to Ontario physicians who are already overworked and struggling under the health care system that continues to download more and more paperwork on the primary care physicians.

I would be more than happy to provide additional details and discuss these concerns further with a representative from the CPSO.

On behalf of our Executive Committee,