

January 23, 2025

Via email: consultations@cpso.on.ca

Dr. Nancy Whitmore Registrar College of Physicians and Surgeons of Ontario 80 College Street Toronto, ON M5G 2E2

Dear Nancy:

Re: Accepting New Patients and Ending the Physician-Patient Relationship

The Canadian Medical Protective Association (CMPA) appreciates the opportunity to provide feedback to the College regarding its consultations on the draft Policies and Advice documents on *Accepting New Patients* and *Ending the Physician-Patient Relationship*.

As you know, the CMPA delivers efficient, high-quality physician-to-physician advice and assistance in medico-legal matters, including the provision of appropriate compensation to patients injured by negligent medical care. Our evidence-based products and services enhance the safety of medical care, reducing unnecessary harm and costs. As Canada's largest physician organization and with the support of our over 115,000 physician members, the CMPA collaborates, advocates and effects positive change on important healthcare and medico-legal issues.

The CMPA welcomes the College's efforts to make the draft Policies more practical for physicians. We are also pleased to see reference to CMPA publications in the *Accepting New Patients* and *Ending the Physician-Patient Relationship* draft Advice documents.

While we have offered only brief comments regarding the *Accepting New Patients* Policy, our comments on the *Ending the Physician-Patient Relationship* draft Policy and Advice document, will focus on:

- Clarifying expectations around ending a therapeutic relationship due to a conflict of interest; and
- Explaining the difference between ending a therapeutic relationship and de-rostering a patient.

Accepting New Patients

The CMPA supports introducing more flexibility into the *Accepting New Patients* Policy to permit physicians to establish appropriate criteria for accepting new patients, including prioritizing access to care for patients with high or complex care needs and those belonging to priority populations.

We know physicians can sometimes be challenged by the requirement under the existing Policy to employ a "first-come, first-served" approach.

Ending the Physician-Patient Relationship

Conflict of interest

The Advice document should ideally provide further guidance with respect to the College's expectations where a physician ends a physician-patient relationship due to a conflict of interest. Examples of what would constitute a conflict of interest that could justify ending the physician-patient relationship would be most useful. It would also be helpful to clarify whether the obligation to provide necessary medical services for at least three (3) months applies when ending a physician-patient relationship due to a conflict of interest.

Regarding the requirement to inform patients about how a conflict of interest impacts their ability to provide quality care, we encourage the College to provide guidance concerning situations where the information that gave rise to the conflict of interest came from another patient and is subject to the duty of confidentiality.

De-rostering vs ending the therapeutic relationship

It would be helpful if the Advice document better explained the difference between ending a physician-patient relationship and de-rostering a patient.

The draft Advice document states that when patients who are part of a rostered practice seek care outside of that practice, it is not appropriate to end the physician-patient relationship, but physicians can de-roster the patient. It is suggested that physicians discuss with patients what de-rostering entails compared to ending the therapeutic relationship. Guidance on what physicians should highlight to patients concerning the consequences of de-rostering would be very helpful to assist physicians in providing an adequate explanation to patients.

We trust these comments will be of assistance to the CPSO in finalizing the draft *Accepting New Patients* and *Ending the Physician-Patient Relationship*.

Yours sincerely,

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Lisa Calder, MD, MSc, FRCPC Chief Executive Officer

