



MD Dialogue

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The College of Physicians and Surgeons of Ontario

www.cpso.on.ca



Welcome to the College

April 2012



Quality Professionals
Healthy System
Public Trust





College of Physicians and Surgeons of Ontario
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Website: www.cpso.on.ca
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The system of self-regulation is based on the premise that the College must act first and foremost in the public interest – and our responsibilities are set out in provincial legislation.

4 Dialogue magazine

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5 College website

Our site is a useful resource for physicians and the public, where information is current and easy to find. Bookmark www.cpso.on.ca for the latest news and information.

7 Answering your questions

Our Physician Advisory Service answers thousands of calls every year from doctors just like you. Call us when you need our help at 1-800-268-7096 extension 606 or (416) 967-2606.

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The membership fee for those in independent practice is due by June 1st every year – pay on time and avoid a late payment penalty. You can now complete the renewal form and payment online.

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The Physician Health Program is a service of the Ontario Medical Association designed to assist Ontario physicians, residents and medical students who may be experiencing a wide range of problems.

Welcome to the College



Rocco Gerace, MD
Registrar

Dear New Member,

On behalf of Council, I would like to welcome you as a new member of the College and the medical profession in Ontario. Congratulations and best wishes in your medical career.

About 145 years ago, physicians were granted the authority to self-regulate. This proud tradition is a privilege, not a right, and requires nurturing. As a new member of the College, you will now take on this responsibility with the rest of the profession in Ontario.

Every year, we will be in regular contact with you – when you renew your certificate of registration; when we send you our journal, *Dialogue*; or when you participate in an assessment of your practice. For most doctors, these will be the only times when our paths intersect.

We do encourage you, however, to become a more active member of the College. As a professionally-led organization, many activities and committees rely on the hard work and contributions of members. Last year alone, more than 1,200 physicians participated in the activities of medical self-regulation by sitting on our governing Council; serving as peer assessors; and providing expert assistance during investigations and hearings.

What can you do to help ensure that professionally-led regulation continues?

- Vote to elect a representative to Council from your district
- Run for election to Council
- Participate on College committees
- Provide feedback about College policies under development

At the very least, we hope you will stay informed and call us if you have a question or concern. Our trained staff in the Physician Advisory Service will answer your questions, or let you know how to get the assistance you need. Every year we receive thousands of calls from doctors just like you – please call us when you need help at (416) 967-2606 or toll free 1-800-268-7096 ext. 606.

As well, our website (www.cpso.on.ca) is a reliable source of helpful information. We post all of our policies and guidelines, the most recent issues of *Dialogue*, and other important information about a wide variety of relevant issues. You will also find your name and information about your qualifications on our website. We encourage you to look under the Doctor Search section and make sure that what we have posted is accurate, and let us know if it is not.

In the next few pages, we provide some information to assist you in getting to know the College. We hope that this is just the beginning of a positive, career-long relationship.

A handwritten signature in black ink that reads "Rocco Gerace". The signature is written in a cursive, flowing style.

How does professionally-led regulation work?

The privilege to self-regulate is given to the medical profession by society on the understanding that the profession will exercise its authority in the public interest. In actuality, the College is a professionally-led organization working in partnership with the public.

The governing Council consists of at least 32 and no more than 34 members:

- 16 physicians elected by their peers on a geographic basis every three years;
- three physicians appointed from among the six faculties of medicine in Ontario;
- no fewer than 13 and no more than 15 non-physician or 'public' members appointed by the provincial government for terms decided by the government.

Council meets four times a year – we invite you to attend these meetings that are held at our office at 80 College Street, Toronto. If this isn't possible, make sure to read the Council Update that we send you directly following the meeting or look for the "Reports from Council" article that appears in *Dialogue*. In this way, you will keep up-to-date on the important issues discussed and the actions taken by Council.

But medicine is no longer one of only a few self-governing health professions as there are 21 health regulatory colleges in Ontario.* Each of the health colleges has the responsibility to regulate its members in accordance with provincial legislation.

The role and authority of the College is set out in the *Regulated Health Professions Act (RHPA)*, the *Health Professions Procedural Code*, the *Medicine Act*, and the regulations made under these Acts. The functions of its committees – registration; inquiries, complaints and reports; discipline; fitness to practise; quality assurance; and patient relations – are also set out in the legislation.

Above all, the College has a duty to serve and protect the public interest. In fact, just as doctors are obligated to put their patients' best interests first, professional self-regulation must operate in the public interest.

Our Council has developed a strategic plan which sets College priorities for the next several years. The priorities articulated in the strategic plan serve as a guide to action and focus our energies toward attaining our vision – Quality Professionals, Healthy System, Public Trust.

Regulated Health Professions

Audiology and Speech-Language Pathology

Chiropractic

Chiropractic

Dental Hygiene

Dental Technology

Dentistry

Denturism

Dietetics

Massage Therapy

Medical Laboratory Technology

Medical Radiation Technology

Medicine

Midwifery

Nursing

Occupational Therapy

Opticianry

Optometry

Pharmacy

Physiotherapy

Psychology

Respiratory Therapy

* On a day to be named by proclamation of the Lieutenant Governor, the following health professions will be added:

Homeopathy

Kinesiology

Naturopathy

Psychotherapy

Traditional Chinese Medicine

Dialogue Magazine



Dialogue is the official publication of the College and is published four times a year. Our goals with the magazine are to provide clear policy direction; review pertinent legislation affecting physicians in practice; present disciplinary findings; and provide a forum for discussion and consultation with the profession on a wide variety of issues and ideas.

Here's what you'll find in *Dialogue*

Every issue of the magazine contains messages from the President and the Registrar that address the hot topics and latest developments affecting the College and the practice of medicine. Because we welcome feedback on any subject raised in *Dialogue*, letters from our readers form an integral part of every issue.

Dialogue also alerts you when legislation is enacted or amended that affects the practice of medicine. We also publish new or revised College policies and articles about policies under consideration. For instance, the feature story from Issue 2, 2011 highlighted our consultation on the Complementary/Alternative Medicine policy, which sets expectations of physicians who practise complementary medicine or whose patients pursue alternative therapies.

Our Practice Partner section provides collegial advice to help busy physicians improve their communication skills and enhance patient safety, often with tips from the Institute for Safe Medication Practices.

Case studies from the Inquiries, Complaints and Reports Committee and case summaries from the Discipline Committee are included to educate and inform, and to fulfil our obligation to publish disciplinary findings.

Articles that de-mystify College programs and provide information about new initiatives are also regularly featured in the magazine. Look for the Reports from Council update that is published after every Council meeting for news on the latest issues.

We also notify and remind the profession in *Dialogue* about the annual Council member election, and the annual membership renewal process.

We mail *Dialogue* to the address that you have given as your preferred mailing address, and the most recent issues of the magazine are always available online at www.cpso.on.ca.

The College Website – www.cpso.on.ca

Please bookmark www.cpso.on.ca in your favourites and watch for new information in addition to these regular features:

Doctor Search is by far the most frequently accessed section of our site and is the public register of Ontario doctors. All of the information that the College is mandated to collect and make available to the public about each physician is available on the website. This includes details about your qualifications, registration history, registration number, practice address and telephone number, language of service other than English, and the name of the hospital(s) where you have privileges.

Where applicable, allegations of professional misconduct or incapacity will be listed if a physician has been referred to the Discipline Committee or Fitness to Practise Committee. Any past findings by those committees are also available, including written decisions of the Discipline Committee that we post on the public register.

We encourage you to have a look at our Doctor Search section to make sure that the information we have about you is accurate, and let us know if it is not.

Two search options help users find this public information. Here's how they work:

All Doctors Search – Find a family physician or specialist by name, or select other search criteria to locate doctors by category, such as:

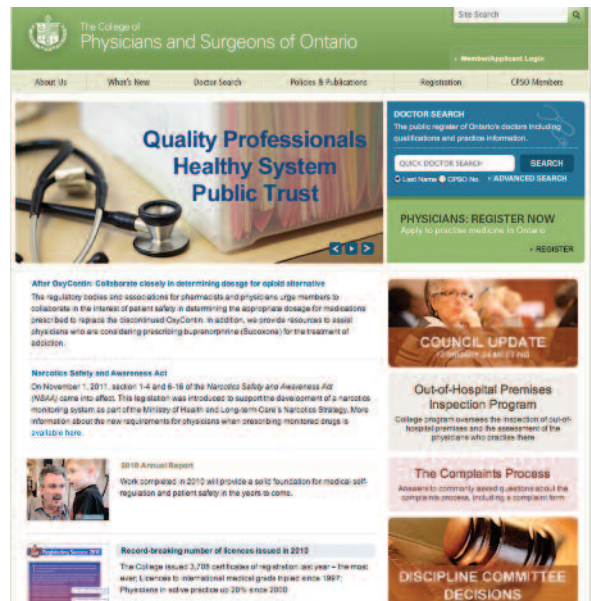
- gender
- location of practice
- hospital where the doctor has privileges
- language of service other than English

Registration Number Search – Use this search option if you know the physician's five-digit registration number.

Other Website Features

Our home page directs users to areas of particular interest and to the latest news on College issues. Content is grouped under five sections:

About Us provides information about self-regulation; important College functions; Council and Committee descriptions and compositions; the College's strategic plan; our privacy code; and details about our commitment to ensuring that we operate in compliance with Ontario's *Human Rights Code*, and make services accessible to people with disabilities.



The screenshot shows the homepage of the College of Physicians and Surgeons of Ontario. The header includes the college's name and a search bar. Below the header, there are navigation tabs: About Us, What's New, Doctor Search, Policies & Publications, Registration, and CPSO Members. The main content area features a large banner for 'Quality Professionals Healthy System Public Trust' with a stethoscope image. To the right, there is a 'DOCTOR SEARCH' section with a search bar and a 'REGISTER NOW' button. Below the banner, there are several news items: 'After QiyConfer: Collaborate closely in determining dosage for opioid alternatives', 'Narcotics Safety and Awareness Act', '2018 Annual Report', and 'Record-breaking number of licences issued in 2018'. On the right side, there are three smaller sections: 'COUNCIL UPDATE', 'Out-of-Hospital Premises Inspection Program', and 'The Complaints Process'. At the bottom right, there is a 'DISCIPLINE COMMITTEE DECISIONS' section.



What's New contains our news releases, the monthly Discipline Committee schedule, and Council Updates, highlighting the important topics discussed and actions taken at the latest meetings of Council.

Policies and Publications houses all College policies and the Practice Guide; clinical practice guidelines; legislation and by-laws; and consultations on policies or issues under consideration are posted to solicit your feedback. We also provide information on College positions and initiatives; the complaints process; and our *Dialogue* and *Noteworthy* publications are posted here.

Registration contains the legal requirements for licensure; information about application review and the Registration Committee; registration policies; applications and forms; and information of particular interest to international medical graduates and Canadians studying abroad.

CPSO Members section provides information of interest to physicians; resources including educational courses and tools to assist you in your medical practice; information about how you can become involved in self-regulation; Council elections; and details about the peer assessment process, and the new out-of-hospital premises inspection program.

And more changes are coming.

Last year, 75% of the membership completed the annual form online and that number is expected to increase in 2012. In 2013, physicians will be required to complete their annual membership renewal online.

Look to www.cpso.on.ca for the latest information on College programs and initiatives.

Answering your questions

We established the Physician Advisory Service (PAS) in 1993 to provide advice and information to members. Each year, the Physician Advisory Service receives more than 5,000 calls and letters from physicians or their representatives about a variety of issues.

The service provides a forum for you to discuss any concern or ask questions regarding your practice. The feedback we have received indicates that this is a vital resource for doctors, who often do not know where else to turn. The Physician Advisory Service assists by providing practical and informative responses to queries about specific situations or practice issues.

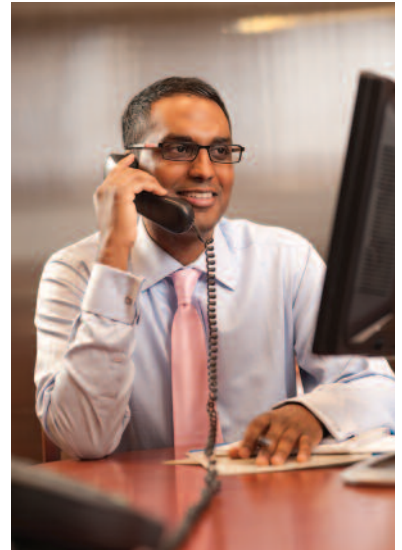
In addition, most College policies name the Physician Advisory Service as the contact department if you are seeking assistance in applying our policies to your practice.

It may interest you to know the most frequently asked questions or issues raised by the public are:

- Can a physician charge a fee to transfer my medical records?
- My doctor retired/died and I am trying to locate my medical records.
- My doctor inappropriately terminated me from her/his practice.
- Communication issues.
- My doctor inappropriately wrote a letter to the Children's Aid Society/Ministry of Transportation.
- Can a physician refuse to refer me to a specialist?
- Am I required to pay a block fee?

The Physician Advisory Service operates Monday to Friday from 8:00 - 5:00. If you have a question and would like to speak to one of the Physician Advisory staff, please contact us at the number listed below. We also welcome written questions or comments, and can be reached at the following address:

Physician Advisory Service
College of Physicians and Surgeons of Ontario
80 College Street, Toronto, Ontario M5G 2E2
(416) 967-2606 or 1-800-268-7096, extension 606
E-mail: pas@cpso.on.ca



The most frequently asked questions and issues raised by physicians who contact PAS are:

- How long must I retain my medical records?
- What are the guidelines for closing a practice?
- What are the guidelines for discontinuing professional services to a patient?
- How do I manage drug-seeking individuals?
- Issues pertaining to confidentiality and consent
- Questions about the annual renewal form
- Conflict of Interest regulations
- Patient management

Annual Membership Renewal Process



Please remember that it pays to pay on time.

If the College does not receive your membership fee by June 1st, a late payment penalty of 25% of the annual membership fee will be assessed. You will then be notified by mail that you have 60 days to submit the fee payment, including the late payment penalty. **If that deadline is not met, the College will suspend your certificate of registration, ending your ability to practise medicine in Ontario.**

*Postgraduate registrants will renew in accordance with their postgraduate training appointment. Online renewal for postgraduate certificate holders is in development.

Paying the Membership Fee

Every year in early April, we send a renewal notice to each physician with a non-educational practice certificate. All physicians who intend to renew their membership are required to submit the membership fee and their completed renewal form to the College by June 1st.*

In 2011, 75% of the profession renewed their registration online and that number is expected to increase this year. In fact, as we move toward mandatory online renewal, physicians will simply receive a letter with activation instructions to renew and pay online, and an invoice should they choose to pay by mail instead.

In 2013, physicians will be required to complete their annual renewal form online.

Completing the Renewal Form

We are mandated by the regulations and College by-laws to collect information about physicians and some information is made available to the public. Much of this information is initially gathered when you register, and is updated annually through the renewal form.

Other information that we collect on the renewal form we do not make available to the public but we gather to regulate in the public interest—such as information that relates to members' health, actions taken by other regulatory authorities, or criminal charges.

We also ask you on the renewal form to describe your clinical practice, including advising us of any new or changed clinical activities. We gather information about your practice, such as the number of hours worked per week at each practice address, and whether you are in solo or group practice.

This practice information is extremely useful in developing continuing education and College programs. It also helps us to keep in step with the changing landscape of physician practice in Ontario.

Please remember to renew online or send your renewal form and payment by mail. The deadline for renewal using either method is June 1st.

Incorporating your Practice

College members are permitted under the *Regulated Health Professions Act* to establish a professional corporation and practise medicine through their corporation.

Once incorporated, medicine professional corporations must obtain a Certificate of Authorization from the College.

As a first step, you will need to incorporate under the *Ontario Business Corporations Act* using the forms available from the Ontario government. Immediately afterwards, you will need to apply to the College for a Certificate of Authorization. Certificates of Authorization must be renewed annually.

Application forms for a Certificate of Authorization and further information are available from the College's website under CPSO Members>Membership Info> Incorporation Issuance and Renewal.

The Practice Guide

The Practice Guide: Medical Professionalism and College Policies, articulates our profession's values – compassion, service, altruism, and trustworthiness – which provide the foundation for the practice of medicine.

But the Practice Guide is much more than a blanket statement of positive values. It will assist you in determining your specific duties and explains the reasons for those duties. And because College policies are built right into the framework, it becomes clear how policies are grounded in the values and principles of practice. The format of the guide allows the values, principles and policies to flow into each other, providing both relevance and resonance.

Medical professionalism is the translation of these values into practice and underpins the social contract between the medical profession and the public: in return for the privilege of self-regulation, the profession makes a commitment to promote the public good.

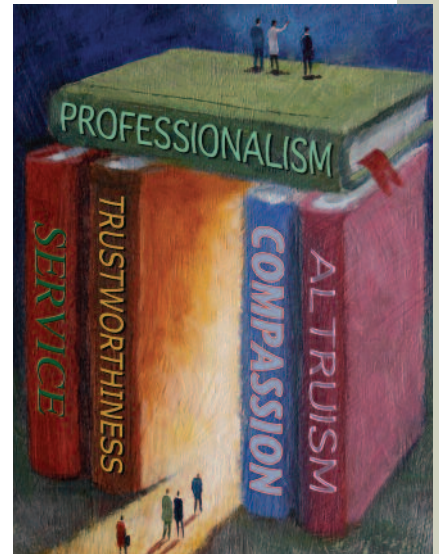
The social contract is a covenant of the profession as a whole. Individual physicians are not expected to assume responsibility for society at large but to uphold the social contract through their commitment to their profession, their medical practice, and their patients.

Translating these values and principles into practice isn't always easy. But it is achievable. In fact, these values are exhibited daily in physicians' offices and hospitals across Ontario, reflecting the profession's longstanding tradition of excellence.

However, the guide does not describe specific standards of practice, create legal obligations or provide guidance for every situation that may arise in the practice of medicine. For specific situations that are not covered here, you should rely on the values and principles to guide your practice, and do not hesitate to seek advice.

The guide's continued relevance demands that it reflect an evolving environment. So while values and principles are not likely to change, it is possible that specific duties and policies will.

To remain responsive, the College welcomes your feedback on the guide and the policies it frames. Key sections from the Practice Guide follow, and the complete guide and all policies and publications are available online at www.cpso.on.ca under Policies and Publications.



VALUES OF THE PROFESSION

Compassion

Individual doctors serve their patients by assessing, diagnosing and treating patients, and through rehabilitation and habilitation, palliation, health promotion, and disease prevention. However, medicine is more than procedures and physicians are more than purveyors of technology. Compassion is fundamental to the relationship between the patient and the doctor. Compassion is defined as a deep awareness of the suffering of another coupled with the wish to relieve it.

Service

Service means working for the benefit of another. Doctors in Ontario are dedicated to serving their patients.

To serve their patients, physicians must be competent in the medical areas in which they practice. Competence requires the application of current knowledge with requisite skill and judgment needed to meet the patient's medical needs. In this, physicians should strive for excellence.

Service is not only competence; it is also putting the patient first. A physician has professional responsibility to their patients, individually and collectively; their patients' families; their own practice; and the health care system. However, at any given time a physician's primary responsibility is to the individual patient before them.

Physicians, as a profession, also have a collective responsibility to the public, which is demonstrated by collaborating with and supporting colleagues and other health professionals, and participating in self-regulation in the public interest. The profession has a critical responsibility to the public as a whole via its responsibility to regulate. Just as doctors serve patients, the College, as the representative of the profession in self-regulation, has the ethical and statutory responsibility to serve the public by regulating physicians in the public interest.

Altruism

Altruism, as a principle of action, is the highest commitment to service. Altruism in medicine is defined as practising unselfishly and with a regard for others.

Patients' needs are paramount and must be considered before the individual physician's needs, the needs of physicians as a group, or the public as a whole. This is not to say that physicians must sacrifice their health or other important aspects of their life for their patients. Rather, it means that when providing care to a patient, a physician should always put that patient first.

Trustworthiness

Trustworthiness is the cornerstone of the practice of medicine. It is the demonstration of compassion, service and altruism that earns the medical profession the trust of the public. This trust manifests itself in the social contract between the profession and the public, as well as the relationship an individual patient has with his or her doctor.

Maintaining trust is an important aspect of medical professionalism. Patients must be able to trust that the physician will always uphold the values of the profession; in the absence of the trusting relationship the physician cannot help the patient and the patient cannot benefit from the relationship.

Overarching principles of practice flow from the values articulated above. The principles of practice, in turn, ground the specific duties of the individual physician.

Physicians accepted into practice in Ontario meet a standard of excellence in education and performance. Patients trust their physicians to be clinically competent in all areas of their practice. However, competence is more than just clinical skills and knowledge; it is also practising safely and effectively. Safe and effective care is achieved when physicians know about and abide by their professional obligations, and are competent as communicators, collaborators, advocates, and managers. It is expected that throughout a physician's career he or she will maintain his or her competence to ensure that patients receive the best care possible.

The principles of practice listed below encompass these competencies. Duties reflect the profession's values and demonstrate the principles of practice in action.

A. INDIVIDUALLY TO THE PATIENT

Principles of Practice

The doctor-patient relationship is the foundation of the practice of medicine. It reflects the values of compassion, service, altruism, and trustworthiness. Trustworthiness is the cornerstone of the doctor-patient relationship; without trust a good doctor-patient relationship cannot exist.

Physicians have a fiduciary duty to their patients — because the balance of knowledge and information favours the physician, patients are reliant on their physicians and may be vulnerable. The patient must always be confident that the physician has put the needs of the patient first. This principle should inform all aspects of the physician's practice.

Physicians are expected to make their patient's needs the first priority, but accomplishing this requires a broader focus than the direct physician-patient relationship. In order to meet individual patient needs, physicians should consider their contributions to their individual patients, but also to their own practice, the community, and the health care system. Physicians hold a respected position in society and, in return, they have responsibilities. Physicians should never forget that their primary responsibility is to the patient(s) standing before them, either individually or collectively.

Duties

1. Demonstrating Professional Competence

Physicians should be skilled clinicians committed to the values of the profession.

Physicians should be committed to lifelong learning and be responsible for maintaining the medical knowledge and clinical skills necessary to provide the highest possible quality of care to patients.

At all times physicians should:

- be aware of deficiencies in knowledge or ability;
- obtain help when needed; and
- ensure that their practice matches their level of competence.

In terms of individual patient care, physicians should provide medical care based on objective evidence whenever possible. This includes demonstrating a sense of inquiry and taking a scientific approach to solving clinical issues for the benefit of the patient.

2. Maintaining Confidentiality

An important component of trust is the honest and compassionate communication of information in complete confidence.

Receiving and giving sensitive patient information is essential to the physician's ability to provide quality care to the patient. Patients give information to physicians in a unique context where they have the utmost faith that the physician will maintain patient privacy and confidentiality.

Physicians must safeguard patient information. Occasionally, however, their responsibility to the public outweighs their responsibility to an individual patient, necessitating reporting to another party.

3. Collaborating with Patients and Others

Providing the best quality care for the people of Ontario requires physicians to work together effectively — with patients, other doctors and other health professionals — within the organizations, institutions and systems for health care delivery in Ontario.

Collaboration with an individual patient is essential to providing good medical care. The physician must work with the patient in order to understand the patient's health care needs, to formulate treatment plans that are optimal for the patient, to ensure that the patient remains informed about his or her care, and to address patient questions and concerns. To maximize the effectiveness of collaboration, physicians must have patients' trust, which is maintained, in part, through effective communication and treating patients with respect.

Collaboration is not only about getting along and treating others with respect — although this is extremely important — it is also about recognizing and accepting the unique roles and contributions of other health professionals. The best interests of patients are served when physicians utilize the skills of others, whether they are physicians or other health professionals.

Good quality health care is often delivered by a team of professionals and individuals who contribute expertise in a variety of ways. To achieve the goal of providing the best possible health care to patients, physicians should also make a commitment to those others who share this goal. Physicians should work respectfully and collaboratively with other members of the health care team to maximize the quality of patients' care.



4. Communicating with Patients and Others

Good communication is a fundamental component of a trusting doctor-patient relationship. Communications with patients, their families, colleagues, and other health care professionals should always reflect civility and professionalism.

Physicians should ensure that patients are appropriately informed about their medical care. All communication with patients should recognize an individual patient's autonomy and demonstrate a collaborative approach to patient decision-making.

Physicians should demonstrate cultural sensitivity in their communication with patients and families.

Physicians should demonstrate an awareness of their own values and how their values relate to or differ from those of their patients and families.

While communicating with compassion and engendering the trust of patients are vital to the doctor-patient relationship, physicians should also be aware of boundary issues and the potential for transference in the doctor-patient relationship.

Should conflict arise, either between the physician and patient, or the patient's family, the physician should work with the patient, the patient's family (if the patient consents) and any other supports to resolve the conflict respectfully. However, if the patient wishes to limit the information available to family or even other health care professionals who are also providing care, the physician must respect that decision.

In communications with the community at large, physicians must ensure that representations they make are, to the best of their knowledge, truthful.

Physicians should participate in educating patients and colleagues to ensure that medical knowledge is appropriately conveyed to facilitate health promotion and disease prevention.



5. Managing Conflicts of Interest

A physician must always act in the patient's best interests.

A physician's interests should not be in conflict with the patient's. Any conflicts of interest must be properly managed so as not to compromise the patient's best interests, or be avoided.

Physicians should guard against compromising their duty to their patients by pursuing personal advantage, whether financial or otherwise, at the expense of the patient. Physicians, like any other member of society, are entitled to earn an income and be paid appropriately for their services to patients. However, in all situations where a conflict of interest arises in the course of professional duties and activities, physicians should recognize the conflict, ensure that the patient's best interests remain paramount and, where appropriate, disclose the conflict of interest to the patient.

Physicians should also be aware of the possibility of damage to the reputation of the profession by the appearance of a conflict, even though an actual conflict may not exist, and avoid creating such a perception.

6. Advocating for Patients

Advocacy is an important component of the doctor-patient relationship; physicians should, individually and collectively, advocate for their patients. Advocacy involves the responsible use of expertise and influence to advance patients' health care interests.

Individuals: The health care system is a complex network of care providers, services and benefits. To ensure that patients receive fair and efficient treatment by others involved in their care, physicians should use their knowledge of the system to assist their patients in successfully navigating this network.

Communities and Populations: Physicians have a responsibility to advocate on behalf of their patients to advance policies that promote the health and well-being of the public.

B. AS A MEMBER OF THE PROFESSION, COLLECTIVELY TO THE PUBLIC

Principles of Practice

That the values of compassion, service, altruism, and trustworthiness apply to the individual doctor-patient relationship is clear. Physicians have responsibilities to patients which, as noted earlier, are paramount. However, these values are also reflected in the individual physician's responsibility to the profession of medicine, inasmuch as the medical profession works together to serve the public interest.

Duties

1. Participating in Self-Regulation

Physicians have been granted the privilege of self-regulation. Society allows physicians to regulate themselves in return for the covenant that this regulation will occur in the public interest. The social contract between the public and the profession places certain responsibilities on the physician as an individual, with respect to his or her colleagues and with respect to collective involvement for the best interests of patients and the community. Meeting these responsibilities requires efficient and appropriate governance and a reliable system of accountability. It is not enough for physicians to accept regulation. To ensure the continuity of self-regulation, each physician should, along with the College, participate in the self-regulatory process.

The goal of regulation is to serve the public by ensuring the best quality care for patients in Ontario. Both the College and individual physicians have a responsibility to ensure quality care by continually improving skills and behaviour as well as responding to concerns around practice/behaviour.

The responsibility for maintaining medical professionalism lies with physicians themselves. Acting in concert with his or her peers, each physician contributes to defining the expectations or standards of the profession as a whole. Individually, each physician upholds those standards in his or her own actions. Fulfillment of this duty is essential to self-regulation.

2. Reporting

Physicians must be aware of their reporting obligations and be truthful and forthright in their reports, whether in the context of patient charting, recording of research results, or providing expert information to third parties (i.e., the court, WSIB, insurance companies).

Physicians have a legal and professional duty to keep information about their patients private and confidential. However, under certain circumstances, physicians are required by law, or expected by the College, to report particular events or patient conditions to the appropriate government or regulatory agency. These are 'mandatory reports', and are an acceptable breach of patient privacy and confidentiality for a greater societal good.

3. Educating

Physicians should teach and learn. The profession, and its service to patients, can only be improved by taking a collaborative approach, participating in peer reviews, supporting each other, educating and mentoring each other, and participating in formal education — both within and outside of the profession.

When they are involved in teaching others, physicians should provide instruction in the context of the values set out above.

By teaching others — colleagues, students, other health professionals, their patients, and the community — physicians help ensure that high quality care will be provided to their individual patients and the public in general.

4. Learning

Physicians have a duty to seek out new evidence and knowledge, to share this knowledge with others and to apply it in practice.

Physicians are expected to keep abreast of current developments in their field, which includes maintaining an awareness of relevant practice guidelines and implementing them as appropriate. All research must be initiated and pursued in an ethical manner.

5. Advocating for a Safe Health Care System

A health care system that balances safety, caring and effectiveness is the best way to ensure patients receive high quality care. To improve the quality of care that the system provides, physicians should work collaboratively with other professionals to reduce the incidence of medical error and adverse outcomes.

Physicians should also collaborate with others for the effective management of health care resources.

6. Collaborating with Other Health Care Professionals

In addition to an individual physician's responsibility to collaborate with other members of a health care team in providing care to individual patients, physicians as a group have a responsibility to collaborate with other health care professionals in order to serve Ontario patients.

This kind of collaborative interaction between physicians and others includes the exchange of information; developing collaborative guidelines; fostering positive relationships at the institutional level; sharing decision-making, where appropriate and in the patient's best interest; and developing policies that ensure quality of care.

C. TO THEMSELVES AND COLLEAGUES

Principles of Practice

The practice of medicine is challenging. Physicians are expected by the profession and the public to meet high standards for excellence in the care they provide to patients. In addition, physicians often face competing demands — from patients, other health care professionals, the health care system, and from the expectations the physician holds for him or herself. These factors can give rise to stress, fatigue, exhaustion and frustration, which can have an impact on both the physician personally and the care the physician is able to provide to his or her patients.

Physicians, as a group, should provide mentorship, support and care to one another, in order to ensure their patients receive quality care, as well as to maintain their own personal wellness.

Duties

1. Mentorship

Physicians should be prepared to provide to colleagues, and accept from colleagues, both formal and informal mentorship. Mentorship involves the sharing of knowledge, experience and ideals, and allows physicians the opportunity to obtain advice and support in their various physician roles. As mentors, physicians should lead by example.

Mentorship is also an informal mechanism for maintaining the high expectations and standards of the profession.

2. Wellness

Physician wellness is a critical component of the professional practice of medicine. Wellness is defined as the condition of good physical and mental health necessary to provide high quality care to patients and to fulfill the duties noted above.

Because physicians cannot serve their own patients if they are not well, physicians may have to put their own needs for wellness ahead of the needs of individual patients or the public as a whole in some circumstances.

Physician wellness is also important for its own sake, independent of any responsibility to others.

Physicians should only care for patients when they are well enough to do so. In order to ensure that patients receive high quality care, physicians have a responsibility to:

- be aware of their own health, which includes being able to recognize when they are not well enough to provide competent care;
- obtain help, if necessary, from colleagues, their own physician, or other supports, in order to ensure their own wellness;
- adjust their practice, as necessary, to ensure that patients can and do receive appropriate care.

The best interests of patients are served when physicians take time to meet their own needs and are continually aware of their own wellness. This means recognizing limits imposed by fatigue, stress or illness and taking care to ensure a healthy work-life balance. This is not always easy. Physicians set high expectations for themselves and may not immediately recognize either transient or longer term periods of incapacity. Recognition of transient incapacity is particularly difficult.

In leading by example for patients and colleagues, physicians should avoid self-treatment. Instead, physicians should try to establish a relationship as a patient with another physician they trust for care and should seek advice about their own care from that physician.

If a physician knows that he or she has a serious condition that could be passed on to patients, or that his or her judgment or performance could be significantly affected by a condition or illness, or its treatment, that physician should seek professional advice about ongoing clinical practice.

3. Collegiality

Collegiality is cooperative interaction between colleagues. The collegiality of relationships can affect the comprehensiveness and continuity of care patients receive, particularly through the referral and consultation processes. For this reason, physicians should be collegial in their dealings with one another. Mutual trust, respect, and knowledge of each other's expertise, skills and responsibilities are all important to establishing collegial relationships.

This is not to say that collegiality may be used to mask ineffective or inappropriate practice, or to protect incompetent or incapacitated physicians. Rather, physicians should accept and support meaningful peer evaluation as a mechanism for upholding the standards of the profession.

Collegiality also fosters cooperation as a profession. At times, it is as a unified voice that physicians can best advance their patients' interests. Physicians should support each other not only individually, but should also, collectively, support the profession in working for the public interest.

Physicians should enter into professional associations and collaborations only if, in doing so, they can maintain professional integrity and safeguard the interests of their patients.

MANAGING CONFLICTING DUTIES

Conflict among the duties outlined in the guide is inevitable. When conflict arises, you should first refer to the fundamental values that ground the principles and duties that follow. For example, if there is a conflict between a physician's obligation to a patient and the obligation to the system (e.g., efficiency), the profession's commitment to the value of altruism makes it clear that the patient should always come first.

Conflicts will not always involve a clear choice between values, instead requiring a balancing of duties and values to determine the best way to proceed. Consultation with colleagues, the College and/or the CMPA or other insurance provider is often the best way to work through these issues.

To remain responsive, the College welcomes your feedback on the guide and the policies it frames, all of which are available online at www.cpsso.on.ca.

Lifelong Learning

The development of medical knowledge and skills doesn't come to a standstill on the day that we are registered to practise medicine. We expect the profession to embrace the principle of lifelong learning, and there are a number of ways in which the College can be an important part of this process.

We contribute to physician education by:

- identifying learning needs,
- advocating for these needs to be met, and
- measuring the outcome of educational endeavours.

We are in the unique position of knowing some of the areas of practice in which physicians need help, and we've endorsed a number of courses that are delivered by expert educators to do just that.

Courses on record-keeping, prescribing skills, and understanding boundaries are offered by Ontario medical school CPD departments. For more information and a link to register, visit www.cpso.on.ca under CPSO Members>Resources.

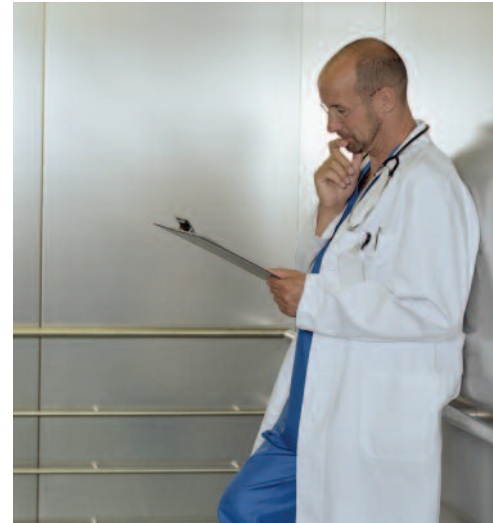
As well, national and international regulatory authorities recognize this College as an expert in the development of assessment programs. Our physician and facility assessment programs have reviewed more than 10,000 physicians during the past 30 years, and have precipitated improvements to individual behaviours and practices.

Our clinical practice guidelines and facility standards also assist doctors every day in their practices, and our commitment to work with external agencies (such as provincial and national specialty organizations) will lead to a more systematic and structured approach to the measurement and improvement of clinical practice in the province.

Future opportunities include our work with the national specialty colleges to facilitate lifelong learning and effective CPD for physicians, as well as collaboration with other stakeholders as we increase the number of assessment interactions that we have with Ontario's physicians.

In July 2011, the Ontario government approved a regulation amendment that requires every physician to participate in CPD programs offered by the Royal College of Physicians and Surgeons of Canada or the College of Family Physicians of Canada, or an alternative program approved by Council. The regulation also adds flexibility in conducting Quality Assurance assessments.

We will ask you on the annual renewal form to tell us about your CPD activities, in particular, who you report to about your CPD activities (for example, the Royal College's Maintenance of Certification Program).



College-endorsed courses:

- Understanding Boundaries in Managing the Risks Inherent in the Doctor-Patient Relationship
- The Physicians Prescribing Skills Course: A Focus on the Prescribing of Addictive and Psychoactive Drugs
- Medical Record-Keeping

For more information visit www.cpso.on.ca under CPSO Members>Resources

Help is available



The Physician Health Program is a service of the Ontario Medical Association designed to assist Ontario physicians, residents and medical students who may be experiencing a wide range of problems such as stress, burnout, work-related conflict, emotional, marital and family problems, psychiatric illness and substance use disorders.

Services include problem assessment, brief advice and referral for definitive assessment, counselling or treatment. The program also offers comprehensive monitoring, case management, and advocacy for individuals recovering from substance dependence.

The program offers these services on a confidential basis. For further information, please contact the Physician Health Program at 1-800-851-6606. Remember, help is available if you need it.

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