

Are you considering changing your scope of practice?

Make sure you are familiar with College's updated expectations

You have been practising emergency medicine for three years when you decide to make your dream of focusing solely on sports medicine a reality. Well, before hanging out a new shingle, you will need to familiarize yourself with the expectations in the College's recently updated policy that addresses intentions to change scope.

If you plan on changing your scope of practice, the College needs to be assured that you will be able to practise safely. The recently approved policy, entitled **Ensuring Competence: Changing Scope of Practice and/or Re-entering Practice**, states that all physicians who wish to change their scope of practice and/or re-enter practice must report to the College their intent and must participate in a College review process to demonstrate their competence in the area in which they intend to practise.

After the review, the College will decide whether the physician, in fact, requires supervision and/or training. Decisions regarding training and/or supervision will be informed by a number of factors, including physician's prior experience, training already taken, and continuing professional development already taken.

A physician's scope of practice is determined by a number of factors, including:

- **education, training, and certification;**
- **the patients the physician cares for;**
- **the procedures performed;**
- **the treatments provided;**
- **the practice environment.**

The policy defines a change of scope as occurring when there is a significant change to any of these specified factors or when physicians wish to return to a scope of practice in which they have not practised for two consecutive years or more.

Significant changes in scope of practice are all determined on a case-by-case basis. A change in scope of practice has been considered by the College to be "significant" in the following circumstances:

- i. Physicians completely change their type of practice (e.g., a surgeon wants to practise in family medicine); or
- ii. Physicians are adding something to their practice that:
 - a) they have not done before, and
 - b) is not something that is considered a usual part of the discipline (e.g., a pediatrician who wants to start working in an emergency department caring for adult patients); or
- iii. Physicians begin to practise in a location where the health-care system is significantly different from where they had been practising previously (e.g., an urban setting versus a rural setting)

This policy does not apply to physicians who intend to change their scope of practice or intend to re-enter practice in positions focused on teaching, research, or administration, where there is no assessment or treatment of patients. ►►

Change in Scope or Evolution of Practice?

Examples of changes in scope of practice that have been considered significant by the College include but are not limited to:

- A family physician who wishes to perform cosmetic surgical procedures;
- A family physician who wishes to primarily practise and receive referrals for psychotherapy, disorders of the skin, or palliative care;
- A family physician who wishes to practise components of fertility medicine;
- A physician who practises in chronic pain management but who wishes to practise in interventional pain management;
- A psychiatrist who wishes to practise in sleep medicine;
- A neurosurgeon who wishes to practise in palliative care;
- An orthopedic surgeon who wishes to practise in family medicine;
- An emergency medicine physician who wishes to practise in sports medicine;
- A physician who has been working in primary care in a developing country wishes to return to Ontario;
- A physician who wishes to relocate from an urban, academic practice to a rural, underserved area.

When there is a change to one of the factors set out in the definition of scope of practice but the change is not significant, the College considers this to be an evolution in practice. An evolution in practice is characterized by the gradual development or progression of a physician's practice within a certain area in keeping with the direction of the specialty. An evolution in practice may include narrowing or limiting a practice, performance of innovative techniques or procedures or prescribing new medications within the context of a specialty.

Examples include:

- A family physician who, within their general area of training, decides to narrow the focus of their practice to women's health issues;
- An emergency medicine physician who is incorporating bedside ultrasound into their practice; or
- The transition from a solo practice to a Family Health Team.

If physicians are uncertain about whether they are required to report an intention to change their scope of practice or an intention to re-enter practice, they should contact the Inquiries Section in the Applications and Credentials Department of the College for further guidance at 416-967-2617 or by email at inquiries@cpso.on.ca. ^{MD}

EXTERNAL CONSULTATION

DATES HELD:

**September 14th, 2017
– December 4th, 2017**

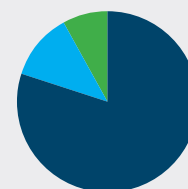


OF RESPONDENTS:

40



BREAKDOWN OF RESPONDENTS:



- 80% PHYSICIANS
- 12% ORGANIZATIONS
- 8% PUBLIC

CHANGES MADE IN RESPONSE TO FEEDBACK:

YES
NO

Three things to know about the Ensuring Competence Policy

1 Physicians must report an intention to change their scope of practice and/or to re-enter practice after an absence of two years or more.

2 All physicians who wish to change their scope of practice and/or re-enter practice must participate in a College review process to demonstrate their competence in the area in which they intend to practise.

3 Physicians must not practise in a new scope of practice or re-enter practice unless the College has approved their request.