

## "SCOPING OUT" SCOPE OF PRACTICE IN THE MEDICAL PROFESSION: WHAT DOES THIS CRUCIAL TERM REALLY MEAN?

*Authors: Sophia M. Kam, Laurentian University, Elizabeth F. Wenghofer, Rachel H. Ellaway & Michael Yeo*

This presentation focuses on the term "scope of practice" (SOP) in the physician population. Changing health system realities, delivery, and patient and community needs promote flexibility in SOP statements. However, too much flexibility results in confusion. To ensure that physicians practice safely in their respective settings, the scope in which they must be competent must first be identified. To ensure continued quality of care throughout physician careers, the scope of abilities they must maintain should be determined. The ability of physicians to safely transition within or among specialties at various stages of their careers and/or their practice context, and to ensure their patients' safety are important considerations prior to such transitions. It is important to generate a more precise and clear understanding of SOP at the policy level. It is equally important, yet much more difficult, to achieve a commonly identifiable understanding of SOP at the individual practitioner or deployment level; such understandings will be rooted in their specific practice realities.

### CHWC 2016

#### PURPOSE/OBJECTIVES

With an emphasis on the physician population in Ontario and implications for provincial medical regulatory authorities, this study aimed to evaluate how SOP is currently defined and understood in regulatory and liability legislation.

#### CONCLUSIONS

It is important for regulators to critically evaluate their internal structures and regulatory instruments pertaining to SOP, specifically, what they are regulating, monitoring and evaluating so that they implement policies and programs their memberships can identify with and find meaningful. There might be a greater cost both to the profession and the public for not doing so; as part of the privilege for self-regulation, the medical profession has a responsibility to maintain societal trust and uphold its social contract. Should the terms of this social contract not be met, the profession invites the possibility of direct regulation by another entity for failure to conduct quality assurance on itself.

#### FINDINGS/IMPACT/OUTCOMES

Documents and the broader literature make reference to phrases that at times are used interchangeably with SOP. However, they are not necessarily synonymous with SOP. The ubiquitous and interchangeable use of this term has generated an assumption that everyone knows what it means and thinks about it in the same way. The above search strategy generated 231 results, 76 of which were ultimately selected for further analysis. The same concepts are often mentioned, yet there are differences in how they are viewed or interpreted within each perspective:

Within health professional legislation, the phrase SOP is seldom found. When it is detected, it is typically found in either professional regulatory statutes, companion legislation specific to the medical profession or accompanying professional regulations. In Ontario legislation, the Medicine Act's definition of the practice of medicine, in conjunction with the 14 licensed and protected controlled/restricted acts authorized in the Regulated Health Profession's Act provide a foundation for how SOP is defined. Generally, the documents vaguely discuss SOP and refer to three types of SOP: "professional," "clinical" and "individual."

SOP is mentioned most frequently in documents produced by medical regulatory authorities. In many cases, one has to read between the lines to infer SOP from broad, non-exclusive phrases, concepts or elements that comprise this construct. In Ontario, the definition of SOP is articulated in professional regulations and licensing as being determined by: the patients one cares for, the procedures one performs, the treatments one provides, and the environment(s) in which one practices. "Situational" or "emergency" SOP is a partial exception to the above statements.

The certification perspective views SOP to be a dynamic, transformative and fluid construct that changes throughout physician careers; it changes with the health system, profession and individual professionals over time. This is evidenced by the types of SOP identified in the documents. "Evolving," "new," "redesigned," "expanded," and "limited" SOP are viewed as reactions to health system pressures (i.e., health workforce shortages, changing patient needs), medical and technological advances, and personal interests/career aspirations. The medico-legal liability perspective identified and differentiated between different, yet seemingly interrelated and hierarchical, types of SOP: "jurisdictional," "professional," "normal," and "institutional."