

What Does 'Scope of Practice' in the Medical Profession Really Mean?

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Outline

- o Introduction
- o Research Objective & Question
- o Approach/Strategy & Methods
- o Results
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- o Study Limitations
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Introduction

- o Scope of practice (SOP) a “hot” topic for the health workforce
 - o E.g. Ontario’s Regulated Health Professions Act & “Controlled act model” (Lahey & Currie, 2005; McNamara, Nelson & Windwick, 2002; RHPA, 1991)
- o Consultations within medicine (Ontario) about SOP:
 - o 2012 – CPSO proposed defined scope certificates to address “practice drift phenomenon” and further clarify SOP within regulatory framework (CPSO, 2000/2008; CPSO 2000/2015; CPSO, 2012; CPSO, 2013; CPSO, 2013)
 - o 2016 – CPSO solicitation of feedback re: SOP as a concept & current change in SOP policy (CPSO, 2000/2015; CPSO, 2016)

Introduction Continued

- o Ambiguity/uncertainty re: SOP in medicine
 - o Physicians traditionally granted broadest SOP by regulatory statutes (Goldman & Schafger, 2011; NCSBN, 2009)
 - o Requirement of physicians to practice in areas of medicine in which “educated and experienced” (MPA, 2000; MA, 1997; RHPA, 1991; MA, 1991)
 - o “SOP,” change in “SOP” ambiguous or omitted from legislation.
 - o Frequently mentioned in professional documents, yet inconsistent uses (Shimoni & Barrington, 2012; Hanover Research, 2010; White et al., 2008; Baranek, 2005; Besner et al., 2005; CMA, 2000)
 - o SOP & licensure criteria for medical profession not standardized (Chang, 2014; Kleinpell & Hudspeth, 2013; Duffield et al., 2011; Cant et al., 2011; Baranek, 2005)

Research Objective & Question

o OBJECTIVE:

- o Explore the typology of SOP in medical regulatory documents in & relevant to the Ontario context
- o “r” regulation – legislation, regulation, certification, medico-legal liability

o QUESTION:

- o How is SOP used in physician regulatory documents?
- o Physician = MD in independent practice (FP, GP, Royal College specialist)

Research Strategy/Approach

- o Conceptual scoping review utilizing an established scoping methodology (Glover Takahashi et al., 2014 ; Arksey & O'Malley, 2005)
 - o Scoping reviews aim to achieve broad, through examination of literature in an area (Arksey & O'Malley, 2005) & help understand what is already known in existing literature (Levac et al, 2014)
- o Scoping review (Arksey & O'Malley, 2005)
 - o Identify (1) research question, (2) relevant lit/document
 - o (3) select relevant literature/documents
 - o (4) chart/extract data
 - o (5) collate, summarize, report results

Methods

- o Search of provincial/territorial medical regulatory authority & DHSS websites re: major federal & provincial statements re: SOP
- o General search of medical literature re: SOP in health professions
 - o Medical journals, books, grey literature
- o Literature search for concepts & presentations of SOP in different areas of physician governance & practice
 - o Regulation, licensure, credentialing
 - o Law, legislation, regulation, certification, health policy

Methods Continued

- o Databases for academic & grey lit search
 - o CHHRN library, TRIP, Web of Science
 - o Web (Search engine: Google)
- o Search term combinations
 - o “SOP,” “health professional,” “health professions,” “physician,” “regulation,” “licensure,” “credentialing,” “legislation,” “liability,” and “medico-legal liability”
- o Inclusion criteria
 - o English language
 - o Published before June 2015
 - o Medical Profession in Canada

Analysis

- o 1st read through of documents
 - o Categorized into legislation, regulation, certification, medico-legal liability
- o 2nd read through of documents
 - o Emphasis on content, general themes, nuanced details
 - o Memoing, line-by-line coding
- o Descriptive coding
 - o Data into themes, concepts within each category
 - o Analytic memos → patterns, (sub)categories/themes
 - o Similar codes grouped → frequency of related info

Results – Phrases used interchangeably with SOP

- o “standards of practice”
- o “the practice of medicine”
- o “domains of practice”
- o “scope of employment”
- o “scope of services”
- o “scope of professional activities”
- o “scope of procedures”
- o “scope of care”
- o “scope of abilities”
- o “scope of training & recent experience”
- o “areas of care”
- o “areas of practice”
- o “areas of service provision”
- o “breadth of practice”

(Schmitz, Baker, MacKenzie, Kinney & Epperly, 2015; CFPC, 2015; O’neill, Peabody, Blackburn, Peterson, 2014; Acker, Johnston & Lazarsfeld-Jensen, 2014; Grondin, Schieman, Kelly, Darling, Maziak, Palacios Mackay & Gelfand, 2013; CMA, 2012; CRNNS, 2012; King, Fraher, Ricketts, Charles, Sheldon & Meyer, 2009; Cothren, Moore & Hoyt, 2008; Baranek, 2005)

Results Continued

- o 231 results → 76 analyzed
 - o Same concepts or themes, yet different views or interpretations within each category
- o Documents refer to multiple types of SOP:
 - o “Professional” SOP – interpretation of what the profession is, what it includes and excludes (i.e. practice of medicine, services provided, methods used) (RHPNA, 2012; ARPM, 2011; MA, 2011; MPA, 2010; RHPA, 2009; FLMMLMG, 2009; CMPA, 1988/2006; MPA, 2002, RHPA, 1991; MA, 1991)
 - o “Clinical” SOP – identification of what profession does and what its membership can/cannot do (i.e., professional boundaries & practice restrictions) (MRP, 2015; MPA, 2010; AIT, 2009/2012; RHPA, 2009; MPA, 2002; HPA, 2000; RHPA, 1991; MA, 1991)

Results Continued

- o “Individual” SOP – identifies who can access a profession’s SOP (i.e., authorization to perform roles, functions, reserved acts, restricted activities) (MPR, 2015; CPSO, 2015; ARPM, 2011; MPA, 2010; MPR, 2010; CPSA, 2010; AIT, 2009/2012; HPAR, 2009; FLMMLMCC, 2009; MPA, HPRAC, 2006; HPA, 2000; RHPA, 1991; MA, 1991)
 - o Practitioner specific, refers to unique practice characteristics (CMPA & CNPS, 2013; CMPA, 2008; CMPA & HIRC, 2007)
- o “Situational” / “Emergency” SOP – temporary, tied to geography and extenuating circumstances (CPSBC, 2012; CPSS, 2009/2012; CPSNS, 2010; CPSNL, 2009; CPSO, 2009)
- o “Evolving,” “New,” “Redesigned,” “Expanded,” “Limited” SOP – reactions to health system pressures (i.e., health workforce shortages, changing patient need), med/tech advances, personal interests (CFPC, 2015; CFPC, 2014; RCPSC, 2014; RCPSC, 2013)

Results Continued

- o “Jurisdictional” SOP – what can be done by professionals licensed in a particular jurisdiction (i.e., activities, who can perform them & circumstances in which they are performed) (CMPA & HIRC, 2007)
- o “Normal” SOP – ordinarily expected/typically done by a “normal prudent practitioner” in a given set of circumstances, areas of specialization & practice (CMPA, 2008)
- o “Institutional” SOP – what licensed professionals (are permitted to) do in their place(s) of work (CMPA & HIRC, 2007)

Discussion

- o Singularity vs. complexity? Clarity of policy context
 - o Legislative/Regulatory/Certification/Medico-legal SOP: What part of SOP is being discussed?
- o In our quest for definition/operationalization, are we overlooking an important debate about process?
 - o How many definitions needed? Is one general definition with application of different modifiers enough?
 - o Are we trying to do too much when creating definitions? No one definition can be all things to all people
 - o Increased focus on the principles & processes by which SOP is delimited & delimited (how do we decide what constitutes SOP of a practitioner/what is permissible for practitioner to do?)

Discussion Continued

- Competing tensions re: SOP in medical regulation:
 - Flexibility vs. Specificity (in SOP statements)
 - Flexibility/Autonomy vs. Accountability/Regulation
 - Normative SOP vs. Descriptive SOP
- Why is this an important regulatory consideration?
 - Issues regulatory bodies might encounter

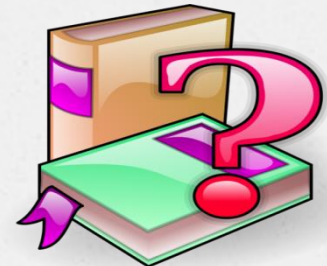
Study limitations

- o Discussion may have limited applicability outside of Ontario
 - o (Geographic focus tied to funding)
- o Potential for information bias
- o Potential for researcher bias
- o Focus on medicine



Future Research

- Non-clinical or non-procedural activities, non-traditional work settings
- More qualitative evidence to examine current institutional understandings of physician SOP
- Investigations into how physicians think about their SOPs (subset of professional population – FP/GP)



Thank you!

Questions?



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