

CORPORATIZATION OF PRIMARY CARE

Primary care services in BC are largely delivered by family medicine clinics that are publicly funded and privately operated as small businesses. This business model is changing as for-profit corporations enter BC's primary care landscape. These corporate entities are setting up episodic care clinics in pharmacies and grocery stores, purchasing family medicine clinics, and providing virtual care/telemedicine services.

This shift is changing the nature of primary healthcare delivery, including where and how physicians work. As family physicians sign contracts with virtual care and episodic care clinics owned and operated by corporations, the number of family doctors providing comprehensive, longitudinal, relationship-based care will decrease. This will reduce the number of British Columbians with family doctors and decrease access to the type of primary care that has been shown to improve health outcomes and reduce costs to the public system.

The introduction of corporate entities into primary care requires that we examine the fundamental governance, regulation and structures of healthcare delivery in order to ensure that the core tenets of primary care are protected.

BC Family Doctors has three significant concerns with the corporatization of family medicine:

PROFESSIONAL AUTONOMY

Physicians have a legal and ethical duty to act in the best interest of their patients, as noted in the [College of Physicians and Surgeons of BC's practice standard on conflict of interest](#).^[1] Clinical and professional autonomy is essential to the provision of patient care, allowing physicians to exercise professional judgment in making care decisions with patients to provide care and treatment. The [Doctors of BC position statement on Professional Autonomy](#) states that "physicians should have the ability to make decisions about the care of the patient that are in the best interest of the patient without unduly restrictive external or system constraints. Clinical autonomy is critical to ensuring the provision of physician services focuses on the clinical priorities that improve patient health outcomes".^[2]

This type of autonomy requires a degree of influence over the care environment which may be challenging as a corporate employee. Without appropriate regulation and accountability, corporate policies and practices may interfere with family doctors' professional autonomy and ability to make independent medical decisions in the best interests of their patients.

REGULATION AND ACCOUNTABILITY

Physicians in BC are a self-regulating profession governed by the College of Physicians and Surgeons of BC under the Health Professions Act. The College regulates the practice of medicine by ensuring individual physicians meet expected standards of practice and conduct. The College does not regulate clinics or corporations, with the exception of issuing permits for professional medical corporations. As a result, corporate policies and practices may conflict with the standards and guidelines of the College, while physicians employed in those corporations are still responsible for observing the standards of professional ethics and standards of practice.

DATA GOVERNANCE

The patient data in electronic medical records (EMRs) is valuable for purposes beyond direct patient care and treatment. Physicians have obligations to protect, maintain, and control access to this data, in accordance with privacy laws, professional standards and ethics. The use of this data by corporations and other third parties, however, is not currently subject to robust data stewardship and governance. This creates an environment without appropriate oversight, monitoring, and accountability, resulting in potential risks to patient privacy.

BC Family Doctors recognizes that a corporate business approach can introduce management efficiencies and innovations into primary care operations, however, we believe the health care system must prioritize the needs of patients and the sustainability of the health care system. Without appropriate checks and balances in place, the introduction of corporate entities into primary care may result in lower quality of care at a higher cost to the health system.

Recommendations

1. Regulate the practice of primary care to ensure all stakeholders are accountable for providing high standards of medical practice and conduct.

- The regulations and expectations of all physicians, clinics and corporations delivering care to British Columbians must be included within BC's health regulatory framework and held to the same standards to ensure that all are accountable for the protection and safety of patients. Physicians cannot alone be responsible to meet expected standards and guidelines as those working in corporate-owned clinics may not have the ability to influence business policies and practice.
- BC Family Doctors calls on the BC Government and the College of Physicians and Surgeons of BC to develop and implement practice standards, professional guidelines and legislative guidance to address the issues related to the delivery of primary care services by corporate entities in BC.

2. Uphold and protect physicians' professional and clinical autonomy

- Regulations and guidelines must address the provision of clinical care in corporate-run primary care services, an environment in which there is a high potential for conflict of interest. Corporate policies and practices can influence the behaviour and clinical decision-making of physicians in corporate-run clinics. Without guidance and regulation, it will be near impossible for physicians to manage conflicts of interest between the workplace/employment environment and their primary obligation to their patients.
- We must uphold and protect physicians' professional and clinical autonomy in all workplaces and ownership environments in which they practice.

3. Create regulations to govern the use of patient health data.

- Using EMR data for purposes beyond direct patient care must be focused on direct benefit of patients or an indirect benefit to the public through improvement of the health care system. Appropriate data stewardship can ensure that the use of EMR data is founded on considerations about appropriate use, transparency, respect for privacy, and meaningful physician engagement.
- We support the [Doctors of BC call](#) for the "establishment of appropriate and collaborative governance to ensure oversight, monitoring, and accountability, as it relates to the use of EMR data by external organizations for secondary purposes."^[3]

Conclusion

Physicians, physician-led organizations, health authorities and provincial partners are working together on a collaborative, multi-year journey to create an integrated system of care across BC, where patients have access to quality primary health care that effectively meets their needs.

Consideration of the role and regulation of corporate entities delivering primary care services is a necessary step towards the modernization and transformation of BC's primary care system. BC Family Doctors calls on the BC Government, Doctors of BC and the College of Physicians and Surgeons of BC to work together to examine the governance, regulation and structures of healthcare delivery in order to ensure that the core tenets of primary care are protected in BC's changing primary care landscape.

References

1. College of Physicians and Surgeons of BC. (2021). Conflict of Interest Practice Standard.
2. Doctors of BC. (2017) Professional autonomy: Position statement.
3. Doctors of BC. (2020). Governance for electronic medical record data used for secondary purposes: Position statement.