

STANDARDS OF PRACTICE

Continuity of Care

Under Review: No

Issued By: Council: January 1, 2010 (*After-Hours Access to Care and Preventing Follow-Up Care Failures*)

Reissued by Council: June 1, 2015 (*Continuity of Care*)

The **Standards of Practice** of the College of Physicians & Surgeons of Alberta (“CPSA”) are the **minimum** standards of professional behavior and ethical conduct expected of all regulated members registered in Alberta. Standards of Practice are enforceable under the *Health Professions Act* and will be referenced in the management of complaints and in discipline hearings. CPSA also provides **Advice to the Profession** to support the implementation of the Standards of Practice.

1. A regulated member whose practice includes established physician-patient relationships¹ **must**:
 - a. have a system in place to:
 - i. review test results and consultation reports in a timely manner;
 - ii. arrange any necessary follow-up care;
 - iii. notify a patient of any necessary follow-up care; and
 - iv. document all contacts with a patient, including failed attempts to notify a patient about follow-up care;
 - b. directly provide or arrange for continuous after-hours care to be provided through an appropriate healthcare provider(s) and/or service with capacity to assess and triage care needs;
 - c. ensure handover of relevant patient information to the after-hours healthcare provider(s) or service when a patient’s need for after-hours care is reasonably foreseeable;
 - d. inform patients how to access the after-hours care;
 - e. if using a recorded message to direct patients to a healthcare provider or service such as, but not limited to, Health Link, an emergency service or

¹ In an established physician-patient relationship, both the regulated member and patient have a reasonable expectation the care provided will extend beyond a single encounter. These relationships include, but are not limited to:

- a. longitudinal relationships, based on the identification of a regular attending physician or clinic; and
- b. sessional relationships for a defined period of time, based on a presenting concern(s), referred consultation or identified medical condition.

Terms used in the Standards of Practice:

- “Regulated member” means any person who is registered or who is required to be registered as a member of this College. The College regulates physicians, surgeons and osteopaths.
- “Must” refers to a mandatory requirement.
- “May” means that the physician may exercise reasonable discretion.
- “Patient” includes, where applicable, the patient’s legal guardian or substitute decision maker.

- after-hours medical clinic, have evidence of an agreement with the identified healthcare provider or service; and
- f. notwithstanding clause (1)(e), immediately refer a patient with an emergent or life-threatening condition to an appropriate emergency service if unable to render care.
2. A regulated member **must** have arrangements in place for receiving and responding to critical diagnostic test results reported by a laboratory or imaging facility after regular working hours or in the regulated member's absence, which include:
- a. clearly identifying on the test requisition documents and informing the patient when the results are expected to fall in the critical range; and
 - b. ensuring the laboratory or imaging facility is able to reach a regulated member or a regulated member's designate, either by:
 - i. participating in a call rota available to the laboratory or imaging facility that identifies who to contact in the regulated member's absence and their direct contact information; or
 - ii. providing direct contact information to the laboratory or imaging facility for the regulated member or the regulated member's designate.
3. A regulated member whose practice includes established relationships with patients who is going to be unavailable for an extended period(s) of time **must**:
- a. enter into an agreement with an appropriate healthcare provider(s) and/or service to provide ongoing care during periods of unavailability and ensure handover at the start and conclusion of the coverage, including management of:
 - i. outstanding tests and test results;
 - ii. outstanding referrals and consultation reports; and
 - iii. any follow-up care required as a result of the above;

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- b. provide proof of this agreement to CPSA on request; and
- c. inform a patient of ongoing care arrangements where a patient would have a reasonable expectation of being informed.

RELATED STANDARDS OF PRACTICE

- [Code of Ethics & Professionalism](#)
- [Episodic Care](#)
- [Establishing the Physician-Patient Relationship](#)
- [Referral Consultation](#)
- [Responsibility for a Medical Practice](#)

COMPANION RESOURCES

- [Advice to the Profession: Continuity of Care](#)
- [Advice to the Profession: Episodic Care](#)
- [CMPA's The Most Responsible Physician](#)
- [AMA's After Hours Support for Continuity of Care](#)
- [Health Link's FAQs for Clinical Groups](#)

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