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REGISTRAR:
Karen Shaw, M.D.

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Dear Colleagues,

Guidance for physicians: Medical Practice Coverage

As many of you will be aware, the CPSS Council approved amendments to the [Medical Practice Coverage](#) policy in March, 2021. When the Council adopted the amended policy, it directed that the College would not take active enforcement for a period of one year to provide education and feedback respecting these expectations. That period expires March 2022.

The first piece of education on the updated expectations was contained in the article "[Increased clarity on expectations for Medical Practice Coverage](#)" published in the May 2021 edition of DocTalk (Volume 8, Issue 2).

At its recent meeting in late November, the Council directed that the Registrar's office sends an email to all physicians to address the highlights of the amended Medical Practice Coverage policy, as at some point in 2022, the College plans to start enforcing the policy's expectations. ***As indicated in the referenced article, the College will advise physicians as to when/how a proactive review/enforcement will be rolled out.***

This letter serves as an additional piece of "education" on the policy expectations.

Fundamental principle of the policy

The underlying principle for the policy is that **"All physicians involved in direct patient care have an obligation to arrange for 24-hour coverage of patients currently under their care."** It is recommended that physicians form call groups, if possible, and the policy emphasizes that it is not ethically acceptable for physicians to unilaterally offload after-hours coverage to SHA facilities/Emergency Rooms and programs without a mutually acceptable agreement with SHA.

Communication of coverage arrangements to the public

One of the critical expectations in the policy relates to communication – both communication of information to patients, and availability for urgent after-hours communications with other healthcare providers.

The policy includes an expectation that physicians have an office telephone that is answered and/or a voicemail that is operational at all hours which gives clear and current information as to office hours, office closures, coverage information, and instructions on how to access emergency care.

***To serve the public by regulating the practice of medicine
and guiding the profession to achieve the highest standards of care***

At its recent meeting in late November 2021, the CPSS Council received information from the Practice Enhancement Program (PEP) that as part of its review of physician practices, it tracks whether the information on physicians' answering machines is consistent with the College expectations. The PEP reported (non-nominally) that **32% of physicians' offices reviewed by PEP since 2020 failed to include the required information on their answering machines.**

See attached infographic - Office Answering Machines

Attached you will find an infographic that suggests an approach to ensure compliance with the telephone expectations in the policy. While compliance with the policy is mandatory, the particular approach depicted in the infographic is not mandatory. Physicians may opt to follow a different process relating to office answering machines/voicemail, such as the use of an after-hours call answering service.

After-hours management of test results

The policy includes an expectation that physicians ensure that any practice location in which they work has appropriate systems in place to receive and review investigations results after-hours, to permit them to take appropriate action in response to critical test results.

Urgent after-hours communications

The policy includes an expectation that physicians (or their designate) are available to respond to after-hours inquiries from other health-care providers, depending on the urgency of the inquiry.

Planned temporary absences

The policy contains an expectation that physicians make coverage arrangements for patient care and the management of test results during planned temporary absences, as well as to proactively plan for the management of unplanned temporary absences.

Review of office voicemail and email

The policy includes an expectation that physicians ensure that voicemail and email messages are reviewed and, if appropriate, responded to within a reasonable timeframe. Physicians are expected to ensure that any outgoing message or automatic replies are current and accurate.

Triaging patients within a practice

The policy contains an expectation that physicians take reasonable steps to structure their practices to allow for appropriate triaging of patients with time-sensitive or urgent issues, and to be prepared to offer a reasonable alternative for care if the patient cannot be accommodated during office hours.

If you have any questions on the expectations contained within the [Medical Practice Coverage](#) policy, please feel free to contact the Registrar's office for advice.

Sincerely,



Dr. Werner Oberholzer

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COLLEGE OF PHYSICIANS AND SURGEONS OF SASKATCHEWAN

Setting Messages on a Physician Office Answering Machine



All physicians must have an office telephone that is answered and/or a voicemail message that is operational 24 hours per day, pursuant to the College Policy 'Medical Practice Coverage'

1

IDENTIFICATION AND 911 INSTRUCTION

- Identify the office (“you have reached the offices of...”);
- Instruct the caller that if this is a medical emergency, they should hang up and dial 911 or proceed to the nearest ER.



2

AFTER HOURS OR AWAY FROM PHONE



- State that the office is now closed (after-hours), or that the receptionist is occupied or away from the phone (in-hours); and
- State the regular office hours of operation, or when they can call again.

3

INSTRUCTIONS ABOUT ON CALL SERVICE

- Instruct the caller that if they have an immediate concern that needs to be addressed after hours, they may contact the on-call physician or the office/clinic/ER with which the physician(s) have an arrangement to manage after hours concerns, and provide the contact details of the above.



4

MESSAGES



- For offices that take voice messages, state that the caller can leave a voice message, ask for the contact name and telephone number, and give an indication of the timeframe in which the office will respond;
- For offices that do not take voicemail messages, state this clearly and ask the patient to call back, with the time that the office will be open again.



QUICK TIPS

Speak slowly and clearly. Rehearse your message a few times before attempting to record it. When you are ready to record, remove all background noise and speak in a professional tone. Confirm that the message was recorded correctly. Update the message regularly, including changes for holidays and absences from practice.