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Primary Care Provision in Walk-in, Urgent Care and Multi-physician Clinics FAQs

Do physicians who work part-time at a clinic have to be a most responsible physician (MRP)?

No, part-time physicians who work regularly at a clinic are expected to provide both episodic and continuing care based on their availability at the clinic. The clinic, however, must ensure that there is a unified patient record that is accessed by all physicians, and that the patient is receiving longitudinal care if desired/needed. The administration of the clinic is a shared responsibility of the medical director and the physicians who work there.

Do physicians who provide only maternity care have to accept patients into practice after delivery?

No, patients referred for maternity care (prenatal care and delivery) can be transferred back to their referring primary care physician, nurse practitioner or medical clinic for ongoing care after postpartum care has concluded.

Do physicians working as an associate at a walk-in clinic, who feel they have little influence, have to do anything if they feel that some aspects of the standard are not being met?

The College expects physicians to decline to work in settings that do not meet College standards. Physicians must insist, for example, that patients attending the clinic regularly are provided with longitudinal care through a medical record, that someone is responsible for taking calls after hours, and that the clinic provides on-site access to PharmaNet.

What should physicians do if a member of their care team leaves abruptly (e.g. for health reasons), recruitment efforts for a new physician or nurse practitioner are unsuccessful, and there is no capacity to absorb all of the newly unattached patients?

When a physician leaves a group practice, the College expects those left behind to review the patient list to ensure that medically vulnerable patients do not fall through the cracks. For the remainder, clear communication is the key. Post signs, provide staff with a script, and, if you have an EMR, consider sending a letter to all affected patients. Advise them that their former physician or nurse practitioner has left the practice, and despite significant effort, you have been unable to replace him/her, and regrettably, the other primary care providers do not have the capacity in their practices to take them as new patients. If possible, do your best to provide alternate ideas for how they can access care.