Competing interests

None declared

- 1. Crawley A, Murphy L, Regier L, McKee N. Tapering opioids using motivational interviewing. Can Fam Physician 2018;64:584-7 (Eng), e341-5 (Fr).
- 2. Miller WR, Rollnick S. Motivational interviewing. Helping people change. 3rd ed. New York NY: The Guilford Press: 2012

Provincial screening bonuses

read with interest and agreement the article by Dickinson et al titled "Screening: when things go wrong," which encourages family doctors to have transparent and evidence-based conversations with our patients about preventive screening. Rather than simply telling our patients to complete the screening, we should engage with them in evidence-based shared decision making.

It caused me to wonder what effect provincial bonuses to family doctors might be having on these discussions with our patients. As a family doctor in Ontario, I receive a substantial annual preventive care bonus that is scaled to the percentage of my patients who have completed breast, colon, or cervical cancer screening. Patients count toward my annual bonus only if they have decided to complete their screening. When I take the time to engage my patients in a discussion of the risks and benefits of screening, those patients who ultimately decide against screening detract from my annual bonus.

What effect are provincial bonus structures like this having on our discussions with patients? As much as I would like to think I will do the right thing for my patient regardless of how I get paid, we are all still financial actors. In my view the bonus structure incentivizes a paternalistic "just get it done" approach over the shared decision-making strategy Dickinson et al advocate for.

> —Jason Booy MD CCFP Toronto, Ont

Competing interests

None declared

1. Dickinson JA, Pimlott N, Grad R, Singh H, Szafran O, Wilson BJ, et al. Screening: when things go wrong, Can Fam Physician 2018.64:502-8 (Eng.), e299-306 (Fr),

Correction

n the English translation of the editorial that appeared in the August issue of Canadian Family Physician, 1 the term stage should have been translated as rotation, rather than *clerkship*, and the term *étudiant* should have been translated as learner, rather than student.

Canadian Family Physician apologizes for the error and any confusion it might have caused.

Reference

1. Ladouceur R. Assessment of family medicine residents. Can Fam Physician 2018;64:560 (Eng), 561 (Fr).

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