

# Defining the added value of family medicine

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**A**fter extensive consultations, the CFPC officially launched its Family Medicine Professional Profile in May 2018.<sup>1</sup> This document will allow us to better position family medicine during the next few decades to best benefit the Canadian population.

The world of health care is constantly evolving. If we genuinely believe in the ability of our specialty to help make the Canadian health care system more efficient, we must better define our added value. What are our primary responsibilities? As professionals, why are we best positioned to manage these fields of practice? What unique characteristics and contributions can we offer to patients and communities?

Like all social organizations, our time and resources are limited. We must ensure that we focus our energy in the areas we excel in and where we can provide unique contributions that serve society's needs.

Our field of practice is very large and our individual practices are extremely varied. Nevertheless, as a community, our primary collective responsibility is to provide all citizens with a family physician capable of offering comprehensive and continuous care. Together, we must also ensure that we maintain emergency and hospital care, home care, long-term care, and maternal and neonatal care. We can, then, develop additional complementary services based on specific community needs. We have defined our added value as the ability to adapt our skills to the needs of our individual communities, and our varied expertise has prepared us very well for this.

If we want to excel at our primary responsibilities, we must first ensure that our residency programs adequately prepare future family physicians to assume those responsibilities. Next, our continuing professional development activities—including quality improvement activities—must help us remain leaders within all of these contexts of care.

Finally, we must support research in these areas to provide the evidence necessary to guide our practices. These are the areas over which the CFPC, in collaboration with its partners in the departments of family medicine, has the most control.

However, to deliver on our mandate, governments and physician associations must clearly understand our role and its added value, and they must adequately support it in practice. Among other things, this includes implementing models of practice like the Patient's Medical Home and providing competitive compensation compared with other specialties.

In the past, family physicians' field of practice has not been well defined, and our specialty has often been affected by the politics of the moment. Every time a crisis occurs in a health care sector, the reflex is to redirect family physicians to that sector while forgetting our specialty's primary responsibilities. This eventually creates other problems. Quebec certainly serves as one of the prime examples of this situation. For nearly 2 decades, Quebec prioritized emergency and hospital care, diverting family physicians to these particular medical activities. This resulted in 29% of the Quebec population finding itself without a family physician.<sup>2</sup> The government was, therefore, forced to make drastic policy changes to correct the situation. As a result, family medicine in Quebec has developed a bad reputation among medical students.

The other risk of not properly defining our field of practice is allowing certain people, including medical students and public decision makers, to believe that it is possible to replace family physicians with other health care professionals. This perception threatens to undermine our collaborations with these professionals, which are essential to our ability to provide better services to the general population. The best way to avoid this is to ensure that we clearly define our field of practice, carefully maintain it, and assume the necessary leadership roles.

These are but a few examples of issues over which the CFPC has no direct control. But thanks to the Family Medicine Professional Profile, the CFPC will be able to appropriately advocate to governments and other organizations, helping them better understand the value added by our specialty and the need to adequately support it. Furthermore, the profile will allow us to better explain to medical students the types of practice they can expect should they choose family medicine.

I believe that the Family Medicine Professional Profile will serve as an important tool to support the CFPC's vision and mission, which means leading family medicine to improve the health of the people of Canada.

## References

1. College of Family Physicians of Canada. *Family Medicine Professional Profile*. Mississauga, ON: College of Family Physicians of Canada; 2018. Available from: [www.cfpc.ca/uploadedFiles/About\\_Us/FM-Professional-Profile.pdf](http://www.cfpc.ca/uploadedFiles/About_Us/FM-Professional-Profile.pdf). Accessed 2018 Jun 7.
2. Commissaire à la santé et au bien-être. *L'expérience de soins de la population: le Québec comparé. Résultats de l'enquête internationale du Commonwealth Fund de 2010 auprès de la population de 18 ans et plus*. Quebec city, QC: Commissaire à la santé et au bien-être du Québec; 2010.

Cet article se trouve aussi en français à la page 550.