

Young family doctors faced with new patient-quota rules in Quebec

Written by Mark Cardwell on May 16, 2016 for CanadianHealthcareNetwork.ca

The gloves are off again in the never-ending battle between Quebec's reform-minded health minister and the province's exasperated family doctors over increased access to care.

At issue now is a new health ministry regulation that requires young family doctors and residents to roster a minimum of 500 patients in a community clinic before they are granted hospital privileges.

The stated goal of the new rule, which was issued unexpectedly in late April, is to cut the time family doctors spend in hospitals by 20%.

The new rule has been widely condemned by family doctors, residents and emergency medicine specialists as being both unwarranted and illegal.

Those reactions, together with the health minister's comments about family doctors, are fanning the fires of discontent that have been burning across Quebec's primary healthcare network for the past 18 months.

(Young family doctors) want to go into hospitals and do specialized stuff. They look down on taking patients.

"I find it saddening and unfortunate to see family doctors looking down on their own profession," Health Minister Dr. Gaétan Barrette told the Medical Post in an exclusive interview May 16 from Montreal. "The definition of a family doctor is taking care of families: men, women, babies, children, the elderly. It's not another way to find a niche in medicine or a speciality profile or to become a specialist by other means.

"The problem in Quebec is that when young doctors graduate in family medicine, they want to go into hospitals and do specialized stuff. They look down on taking patients. That's the reality I have to deal with as health minister."

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The radiologist-cum-politician was reacting to the realms of negative news stories, headlines and commentary across Quebec in recent days about the new rule. Much of it involved the case of a young family doctor who recently arrived in Sept-Iles on Quebec's North Shore to work as a fulltime replacement in the emergency department of the regional hospital there. She was shocked to learn that she must also now take on 500 patients to boot.

"It's not humanly possible to take on both jobs," Dr. Frédérique Roy told journalists last week. "It's not the start of the practice I dreamed of."

Dr. Roy said she is considering a legal challenge to the new rule.

No one-size-fits-all approach



Dr. Christopher Lemieux

For Dr. Christopher Lemieux, a resident in internal medicine at the Université de Montréal and the secretary of the Quebec Federation of Resident Doctors (FMRQ), the new rule doesn't take into account the different realities of Quebec's many regions.

"Sure we need more rostering of patients," Dr. Lemieux said. "But there's no one-size-fits-all for every place. Rostering is not the primary need in some regions like the North Shore, where 90% of patients are rostered but where there aren't enough specialities, so there is a need at the hospital."

He said medical manpower distribution and use should be left up to regional health boards.

The health minister, however, has usurped much of the boards' powers through legislative measures such as Bills 10 and 20, which have reshaped the healthcare landscape in Quebec over the past year. Those bills have bred much bad blood between Dr. Barrette and family doctors.

The truce that followed the signing a year ago of an historic agreement between Dr. Barrette and the federation that represents Quebec family doctors (FMOQ) to forego threatened patient quotas and fee penalties in return for a promise to roster 85% of people in the province by the end of 2017 was short-lived.

Since then, several ministerial decrees and administrative changes to everything from hospital missions and health insurance board powers to the call for the creation of so-called "super clinics" and the new 500-patient rule for young doctors, have acted like gas on fire.

"Dr. Barrette simply doesn't respect the agreements he signs," said FMOQ spokesperson Jean-Pierre Dion. "We're all for changes and making improvements. But you just can't bulldozer everyone the way he always tries to do."

According to Dion, the new rule is confusing and frustrating for young family doctors, and quite possibly illegal.

"We've asked the minister of justice for a legal opinion," said Dion. "We're waiting to hear from them this week. We're keeping all of our options on the table."

Pendulum swing

Dr. Jean-Philippe Blondeau, an emergency medicine specialist in Chicoutimi and an executive board member of ROME, the acronym of a group of some 800 Quebec family doctors that sprang to life a year ago to fight Bill 20, said the new rule is a complete contrast to the situation on the ground across Quebec 20 years ago, when a shortage of doctors in hospitals led to many being issued court orders to work there.

"The pendulum has swung all the way across," said Dr. Blondeau to do shifts. "The problem is we're not maintaining a natural equilibrium."

Instead of using rules and regulations to force doctors to do his bidding, Dr. Blondeau said Dr. Barrette should let the regions decide on what to do with their doctors.

"We should do like in Ontario and Alberta," he said. "But instead we've got this constant fighting that is destroying morale."

Dr. Blondeau added that the situation is so bad that many young doctors are leaving the province. Among them are reportedly a dozen young family medicine residents who recently left to do their third year in emergency medicine training in Ontario because of the new Quebec rule.

"They are likely not coming back," he said. "It's nuts, and it has to stop."