



June 16, 2014

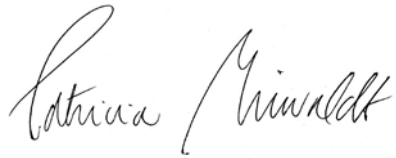
I am writing in response to the article “Changes to medical staff privileging in British Columbia” (BCMJ 2014;56:23-27). As the professional organization that represents more than half of all physicians in British Columbia, the British Columbia College of Family Physicians (BCCFP) welcomes the opportunity to participate in the provincial privileging standards project as it relates to family physicians.

Due to the unique nature of full-scope family practice, the development of the privileging dictionary for family physicians and the criteria for currency of family medicine responsibilities must be considered with a different lens: from the perspective of the longitudinal generalist. As the provincial voice of family physicians with this perspective, we wish to highlight some specific considerations for the privileging process for family physicians:

- The definition of currency as it relates to family physicians. The College of Family Physicians sets the standards for training and ongoing maintenance of certification for family physicians in Canada. The College defines and assesses the validated educational standards, which maintain competency. We would be pleased to share the criteria used by the College of Family Physicians of Canada in developing a competency-based approach, which we hope will be useful to the privileging process.
- Currency is but part of competence. In consideration of the breadth and scope of family practice, currency based on numbers of exposures or procedures does not adequately measure competence.
- The unintended consequences of applying such a narrow definition of competence. Applying a currency-based-on-numbers approach to privileging for family practice, a discipline with such a broad scope, may discourage family physicians from entering full-scope family practice and negatively impact recruitment and retention of family physicians for remote and rural areas.
- Evidence for the process of determining the privileging standards (currency or competence) specific to full-scope family practice must be considered.

The BCCFP has worked closely with the Society of General Practitioners and the Rural Coordination Centre of BC to identify a diverse cross-section of family physicians to populate

the family medicine expert panel. We believe that their direct involvement in the project is important to ensure that privileging standards are developed to best meet the needs of our valued family doctors, patients, and the health care system.

A handwritten signature in black ink, reading "Patricia Mirwaldt". The signature is written in a cursive style with a large initial "P" and a long, sweeping underline.

Patricia Mirwaldt, MD, CCFP  
President