Ontario FHT Pharmacist Networking Day

Medical Directives

November 10, 2009
Delegation of Controlled Acts

Delegation can happen in one of 2 ways:

1. Direct Order

2. Medical Directive
Medical Directives

- blanket instructions by physicians (often more than one) to other health care providers.

- pertain to any patient who meets the criteria set out in the medical directive.

- contain the delegation and provide the authority to carry out the treatments, interventions or procedures that are specified in the directive, providing that certain conditions and circumstances exist.
Principles

• In every instance of delegation, the primary consideration should be the best interests of the patient.

• Responsibility for the delegation of the controlled act always remains with the delegating physician.
Guidelines

1. Physician-patient relationship

2. Delegate only those acts that form part of your regular practice.

3. Identify the individual performing the act and be aware of his or her skills.
   i. Ensure the individual receiving the delegation has the appropriate knowledge, skill and judgement to perform the delegated act.
   ii. Check with the relevant regulatory body of other health professionals where applicable.
4. Establish a process for delegation, or ensure that there is one in place, that includes education, ensuring the maintenance of competence in the performance of the delegated act, and providing the appropriate supports.

   i. The physician should satisfy him or herself that the delegation is in the best interests of the patient.

   ii. Identify the risk involved in delegating the act.
iii. Quality assurance
iv. Ensure appropriate resources and equipment are available.
v. Develop written documentation about the delegation process.

5. Ensure delegation occurs with the informed consent of the patient where feasible.
6. Ensure proper supervision of the delegation

7. Consider any liability issues that may arise from delegation.

8. Consider any billing issues that may arise from delegation.
Medical Directives must include:

- Description of the procedure, treatment or intervention
- Clinical conditions that the patient must meet before the directive can be implemented;
- Circumstances that must exist before the directive can be implemented;
- Contraindications to implementation of the directive;
- Identification of the individuals authorized to implement the directive;
- The name and signature of the physician(s) authorizing and responsible for the directive and the date it becomes effective; and
- A list of the administrative approvals that were provided to the directive. The dates and each Committee (if any) should be specifically listed.
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Policy Number: P14-03
Policy Category: Practice
Approved by Council: September 1999
Publication Date: March/April 2004
College Contact: Physician Advisory Service

Purpose
Under Ontario law, certain acts (more fully described below) may only be performed by certain health care professionals. However, under appropriate circumstances, these acts may be delegated to others. The purpose of this policy is to assist physicians to understand when and how they may delegate controlled acts. Since delegation sometimes takes place by way of a medical directive, the policy also offers guidelines for the use of medical directives.

Scope
This policy applies to all physicians, regardless of practice setting or type.

Controlled Acts
The Regulated Health Professions Act, which governs the medical profession since 1993, sets out a number of "controlled acts" which may only be performed by certain of the regulated health professionals. Of the 13 controlled acts, physicians are entitled to perform 12 and may, in appropriate circumstances, delegate the performance of those acts to other individuals who may or may not be members of a regulated health profession.

The controlled acts set out in the Regulated Health Professions Act (RHPA) are:

1. Key Words
   - Delegation, Controlled acts, Medical directives
   - Related Topics
     - Medical Directives
   - Legislative References
     - Regulated Health Professions Act, 1991, sections 27, 28, 29, 30;