

Why we ask our patients NOT to go to walk-in clinics

In the past 15-20 years we have seen major changes in family practice. When we started practising, most patients in Canada had a family physician. People generally saw their own physician for most medical problems-big and small. With the tremendous growth of walk in clinics we have seen a significant change in the way patients access care in our community. We sometimes hear from patients that they go to walk in clinics for their “quick” items, but attend our office for complicated problems, lists of problems, when they are in distress, or when they need physical exams, PAP tests and ongoing care.

This does not work for two reasons:

1. Lack of continuity of care
2. The patient should not differentiate between simple and complicated care

Continuity of care is extremely important and cost efficient. Because we know our patients well and are familiar with their past and family medical histories, we often have much more insight into the likely causes of a symptom than a physician who is just meeting you for the first time. Seeing different physicians leads to the duplication of tests and wastes precious health care dollars.

In an effort to provide continuity of care, family doctors have traditionally provided many services rarely provided by physicians in a walk in clinic setting. These include:

1. **Keeping track of all your ongoing health issues and concerns.** If you are seen in emergency, by a specialist or another doctor at our clinic, we understand it to be our responsibility to have the central role in ensuring that information from any of your interactions with the health care system (specialists, hospital visits, pharmacists, etc.) is communicated to you and to other practitioners who need to know this information. Our inter-generational care in a family provides us with a rich context in which to understand our patients’ concerns.
2. **Maintaining and storing your medical info .** We collect reports from all other practitioners you see, tests that are done and your previous physicians. We are responsible to review and act on the information that is sent to us and to store it for at least 8 years after you leave the practice.
3. **Organizing your preventive and recommended health care,** including PAPs, mammograms, colon cancer screening, immunization and cholesterol and diabetes testing. We give you reminder calls when you are overdue for a test.
4. **Maintaining a comprehensive medical history.** When you join the practice we spend considerable time familiarizing and

documenting your medical and family history. We read through your previous charts and deciphering notes for relevant information. We maintain detailed patient summaries in our digital records and keep this up to date.

5. **Providing care after hours if you need to see a physician.** –physicians in a FHO group share the responsibility of being available at any time for urgent problems. Although the government has funded nurse line and on-call pay for specialists, we do not get compensation for being on call.
6. **Completion of forms:** the volume of forms to be completed has increased exponentially in the last decade. Because of the relationship with the patient and knowledge base, we are able to complete such forms.
7. **Dealing with your medical questions by phone:** in a family practice dozens of phone calls occur each day with medical questions. We either answer the calls ourselves or provide an answer to your question to our staff, who then pass the information on to you. We will ask you to come into the office if we feel that we need to see you to answer the question with a detailed explanation.

Family doctors and walk in clinic physicians are paid roughly the same fee per visit regardless of how many problems are addressed in the visit or how much time you spend with the physician. What has happened is that the complexity of care provided in each visit to a family physician has increased considerably, while walk in clinic physicians see a series of patients with less complex problems and most earn a higher income. Family doctors can typically see 25 patients, even on the busiest days, because of the complexity of the problems during a typical office visit. As a result of this pay differential for the same number of hours of work, there has been many doctors lured away from providing full service care to work in the walk-in clinics. This adds to the number of people without a family doctor. When family doctors retire, we are grateful to find someone to replace them for the continuum of care for their practice.

We recognize that there are times when people feel that a walk in clinic provides the convenience of being seen for routine care on a weekend or “right next to their office”. However, this pattern of selectively visiting walk in clinics when it is convenient adds a significant challenge to doctors dedicated to your care. **We ask that our patients make a choice:** For those individuals where the convenience of walk in clinic care outweighs the benefits of continuity of care provided in our traditional family practice, we ask that you transfer all of your care to the walk in clinic, so that we can give your space in the practice to one of the many orphaned patients waiting for the care we provide.