

Editorial

WHERE IS SELF-REGULATION GOING?



Dr. John P. O'Keefe

Three of the features in this edition touch on issues related to professional regulation. In a debate piece, Dr. Don Bonang gives us guidelines on how to stay out of trouble. Dr. Michael Casas has written the Clinical Abstracts on current trends in quality assurance. Dr. Burton Goldstein kicks off a five-part series on unconventional dentistry, which culminates with an examination of how regulatory authorities ought to handle this issue.

As a dental student, my teachers imbued a sense of pride in me that our profession is self-regulating. They told me that this is a wonderful privilege and that every dentist has a responsibility to help maintain this status. However, looking at trends emerging in Canada, Britain and the U.S., I feel that there are storm clouds gathering on the horizon.

One of the first newspaper features that caught my eye at the beginning of this year reported that the Ontario Ministry of Health had engaged the services of a management consulting

firm to examine public perceptions of the complaints process run by the Ontario College of Physicians and Surgeons. A few weeks later, there was a notice in the same newspaper asking patients who had dealt with the complaints process to contact the firm.

Also earlier this year, President Clinton stated that as many as 98,000 deaths each year in the U.S. are attributable to medical mistakes and that this was cause for grave concern. The President was speaking in reaction to an Institute of Medicine report which called for the creation of a U.S. federal government agency that would monitor medical mistakes and seek ways of reducing them.

The government perspective is that reporting major errors should be mandatory, while the medical profession believes that mandatory reporting would not have the desired effect. One of the recommendations of the report is that "health professional licensing bodies should implement periodic re-examination of doctors, nurses, and other key providers, based on both competence and knowledge of safety procedures."

In a recent editorial in the *British Medical Journal*, Dr. Richard Smith said that the General Medical Council, the body that regulates physicians in Britain, is trusted neither by the public, the government, nor physicians. A number of scandals in recent times have done a lot to rock the confidence of stakeholders.

In response to changes in the climate of regulation, the Council is committed to what it terms the revalidation of physicians' licences by the year 2002. It seems that British physicians will be examined by their peers every five years in terms of their clinical and communication skills. In his editorial, Dr. Smith indicated that some members of the British Medical Association council are floating the idea of co-regulation, rather than self-regulation. Under this scheme, the profession and government would share the costs and responsibility of the regulation of physicians.

Perhaps you will say that I am being alarmist in bringing these trends to your attention. Perhaps you will say that medicine and dentistry are different in nature, and that we will escape what happens in medicine. The evidence seems to be pointing in the other direction, however. I recently attended a forum on governance organized by the Royal Society of Canada. One of the speakers was discussing the issues presented above in relation to the future of regulation in medicine. At the end of the session, I asked him privately if he thought dentistry would be affected by these trends. He replied simply, "There is no way to avoid it."

The bargain between the health professions and society appears to be in rapid transition. For approximately a century, governments said to the professions, "You take care of regulating yourselves, because you know best who should get into the professions, what they should learn, and how they should be disciplined when things go wrong." Consumerism has replaced deference and the trust in professions has largely dissipated in recent years.

If you want a glimpse at a blueprint for the future of regulation of the health professions, read the following two publications from the San Francisco-based Center for the Health Professions (<http://futurehealth.ucsf.edu>): *Recreating Health Professional Practice for a New Century* and *Strengthening Consumer Protection: Priorities for Health Care Workforce Regulation*. Some of the ideas presented include: significantly increased public representation on the boards of licensing bodies; mandatory re-licensure through competence testing on a regular basis; national level coordination of regulation; and public availability of practice-relevant information about licensees. Food for thought!

John O'Keefe
1-800-267-6354, ext. 2297
jokeefe@cda-adc.ca