



President's message. The elephant in the room

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Last year at the SRPC's annual conference in Collingwood, Ont., the former president of The College of Family Physicians of Canada (CFPC) extended an invitation to the SRPC to sit as an observer on the newly formed Special Interests or Focused Practices Council of the CFPC. In August I attended my first meeting. I have to report that I felt like the elephant in the room, representing generalism in a meeting whose raison d'être was the acknowledgement of, and acquiescence to, family medicine currents that are flowing in the opposite direction.

The CFPC states that it is committed to comprehensive practice. Yet, it is prepared to grant ever-increasing legitimacy to specialized family practices, which by nature identify with an urban population base, thereby shrinking the pool of family physicians available to rural Canada.

Let me be very clear; I have no beef with these physicians. They are as legitimate and valuable as any other, and they provide excellent service to the communities that they serve. The incoming president of the CFPC, for example, has a specialized practice in palliative care, and the community he cares for is lucky to have him. What bothers me is the policy vacuum that is allowing family medicine to be defined by the sum of the individual decisions of family physicians,

rather than by the values and needs of Canadian society. As was expressed at the meeting, the CFPC seems to be following rather than leading.

It is as though the trend toward specialization has been accepted without comment by the CFPC, without any plan on how best to ensure an adequate supply of generalists. This is an abdication of the CFPC's mandate, enshrined in an act of Parliament,¹ to oversee the training of family physicians to the benefit of all communities in the country, including, as a priority, the 30% of the country that is rural.

To meet this issue head on, at its most recent council meeting, the SRPC voted unanimously to form a working group to examine the issue and develop recommendations to support and guide the survival of the generalist. The CFPC will be invited to participate, as will be representatives from the resident and student communities. Input from the broadest audience possible is not only welcome, but necessary. Consider the question carefully. All input will be brought to the attention of the working group.

REFERENCE

1. The College of Family Physicians of Canada. What it is. What it does. *Can Fam Physician* 1969;15:104-5. Available: www.ncbi.nlm.nih.gov/pmc/articles/PMC2281625/pdf/canfamphys00402-0104.pdf (accessed 2011 Nov. 22).