



DRAFT Standard of Practice: Interdisciplinary Care & Delegation of Tasks (2024)

A **Standard of Practice** is the minimum standard of professional behavior and ethical conduct expected by the College on a specific issue.

Interdisciplinary Care & Delegation of Tasks

Preamble

Interdisciplinary care can enhance the delivery of patient-centred care and improve patient and system outcomes. This Standard of Practice outlines the College's expectations of physicians in supporting interdisciplinary care.

In appropriate circumstances, physicians can delegate tasks within their scope of practice to another member of the healthcare team. Delegation must only occur if it is in the best interest of the patient and done in accordance with this Standard of Practice.

Standard of Practice

Interdisciplinary Care

Health professionals have an established history of working together to deliver quality health care. Collaborative interdisciplinary care can optimize a patient's access to the skills and competencies of a wide range of health professionals and improve patient care. As such, physicians have an ethical obligation to support interdisciplinary team-based practices by fostering collaboration and a shared accountability for patient care¹.

Interdisciplinary care must be focused on the patients' best interests. Physicians are expected to understand their individual role and the role of other interdisciplinary team members, as defined

¹ CMA Code of Ethics and Professionalism (2018)

by each member's training, experience, and scope of practice. Each regulated member of the team is responsible and accountable for the care they provide.

Delegation of Tasks

Tasks that fall within a physician's scope of practice may be delegated to a healthcare team member, if it is in the best interest of the patient and it is done so in accordance with this Standard of Practice.

Physicians must only delegate the performance of tasks which they have the knowledge, training, experience, and professional liability coverage to perform themselves. Physicians must also be satisfied that individuals to whom they delegate have the knowledge, skills, and judgment to perform the delegated task competently and safely.

After delegating a task, a physician must provide a level of supervision and support that is proportionate to the risk associated with the delegation and is reflective of the following factors:

1. the specific task being delegated;
2. the patient's specific circumstances (e.g., health status, specific health-care needs);
3. the setting where the act will be performed and the available resources and environmental supports in place; and
4. the education, training, and experience of the delegate.

If following an assessment of the associated risk, a physician reaches the opinion that onsite supervision is not necessary, the physician must ensure they are available to provide appropriate consultation and assistance.

Medical Directives

In appropriate circumstances, physicians may elect to delegate a task through the issuance of a written medical directive. These written orders are issued by a physician to a healthcare team member and pertain to any patient who meets the specific criteria set out in the medical directive. Medical directives provide the authority for another individual to carry out the tasks that are specified in the directive, provided that certain conditions and circumstances exist.

Documentation

Physicians must ensure that medical care provided through delegation is documented in accordance with the College's Standard of Practice on [Medical Records Documentation Management](#). This includes documenting who performed the task and the authorizing physician.

For written medical directives, the following information must be included:

1. the task being ordered;
2. the specific clinical conditions that the patient must meet before the directive can be implemented;
3. any situational circumstances that must exist before the directive can be implemented;
4. a list of contraindications to implementation of the directive;
5. a list of individuals authorized to implement the directive; and
6. the name and signature of the physician authorizing and responsible for the directive and the date it becomes effective.

Acknowledgements

CPSA (2023) Restricted Activities
CMPA (2022) Collaborative Care
CPSO (2021) Delegation of Controlled Acts
CMA (2018) Code of Ethics and Professionalism
Government of Canada (2007) [Collaborative Care](#)
Canadian Pharmacists Journal (2007) [Interdisciplinary Collaboration in Primary Health Care](#)

Related Documents

CPSNL (2023) [Medical Records Documentation Management](#)

Document History

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