

Plans afoot for national network of for-profit urgent care centres

Dr. Mark Godley plans to set up private, for-profit urgent care centres across Canada, including, possibly, Ontario Aboriginal reserves. Just days after he and 3 partners opened Canada's first such centre on the bottom floor of their False Creek Surgical Centre in Vancouver, on Dec. 1, Godley told *CMAJ* his plans include a national network of centres capable of caring for 20 000 to 30 000 patients annually.

He said he wants to change the way urgent medical care is delivered in Canada, and won't stop "until I've gone across the whole country."

Godley intervened in the successful 2005 legal challenge in the Supreme Court of Canada by Dr. Jacques Chaoulli. The court ruled that Quebec's ban on private health insurance for medically necessary services violated provincial human rights law. Godley says he's operating within the law.

Godley's Vancouver centre triggered a massive public backlash, with critics arguing that it threatened universal medicare. The BC health ministry said it would seek a court order to shut it down. Late on Dec. 1, Godley and the

province made a deal: the clinic agreed to bill the provincial Medical Services Plan for covered treatments, instead of charging private fees.

Details were still to be worked out, and the controversy continued, with provincial NDP health critic Adrian Dix accusing the clinic of "holding the government to ransom." Godley says emergency care in Canada is in crisis, and while medicare is "ideologically noble," he says, the lack of prompt service already violates the Canada Health Act and "the patient has no bill of rights." Godley argues that private businesses like his can respond faster than government to the changes that are needed, and medicare is not threatened because "you can still have a single-payer system and competitive delivery units."

Godley admits that his project is risky, and noted that in the 2 weeks before the Vancouver centre opened, "I lost 10 pounds."

Godley, who emigrated from South Africa 17 years ago, modeled the Vancouver centre on 800 urgent care centres in the US. The clinic is staffed daily from 8 a.m. to 11 p.m. by emergency physicians who also work at public hospitals, and serves ambulatory patients who do not require an overnight stay. Facilities include a radiology lab, speedy blood diagnosis equipment used by the military, a slit lamp to diag-

nose eye injuries and an operating room for day surgery.

Godley said the clinic will be more efficient at diagnosing and diverting patients with life-threatening conditions such as heart attacks or strokes to the nearby Vancouver General Hospital, where they can go directly for treatment without waiting in the emergency department. He estimates that urgent centres like his could care for 57% of emergency department patients.

Next up? Godley hopes to open a surgical centre with diagnostics in Surrey, BC. — Deborah Jones, Vancouver

DOI:10.1503/cmaj.061637

Auditor-General slams regulatory regime

Health Canada's management of its 3 primary regulatory programs is so haphazard that it is impossible to ascertain whether "it is fully meeting its responsibilities as the regulator of drug products, medical devices and product safety," Auditor-General Sheila Fraser says.

Moreover, the department's process and principles for oversight of the 3 regulatory programs is so incoherent that it hasn't even "determined the level of activities the programs must carry out to meet the Department's regulatory responsibilities, or the level of resources they would need to do so," Fraser said in a Nov. 28 report to Parliament.

The inevitable consequence is inadequate protection of Canadians' health and safety, which even program managers admit is likely now at risk, and sets the stage for "increased risk of liability to the Crown," Fraser noted. "The Department needs to decide what it is trying to achieve, what its priorities are, and direct resources toward programs and services that help Canadians."

While casting all aspects of Health Canada's regulatory process as generally lax, the report sketches a lengthy list of areas in which oversight is particularly deficient, including conduct-



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Emergency care in Canada is in crisis, says Godley.