



Patient Agreement

If you have any questions about this agreement, difficulty reading or understanding it, please don't hesitate to contact us at admin@drbarnes.ca or call our office.

This agreement is designed to establish clear expectations and boundaries for the physician-patient relationship, in accordance with the College of Physicians and Surgeons of Ontario (CPSO) guidelines.

1. Communication, Boundaries and Professional Conduct

- The patient agrees to provide accurate and complete information about their medical history, current conditions, and any changes in their health status.
- Healthcare-related conversations should occur within the context of official communication with the physician or the practice. To maintain professional boundaries and ensure proper documentation, please refrain from initiating medical discussions in informal settings (e.g., grocery stores, during casual encounters).

2. Confidentiality and Privacy

- The physician agrees to maintain patient confidentiality in accordance with legal and professional standards.
- The patient consents to the sharing of relevant medical information with other healthcare providers involved in their care, as per the Personal Health Information Protection Act (PHIPA), unless explicitly stated otherwise.

3. Use of Recording Devices

- Audio or video recording of appointments or interactions with practice staff is prohibited without explicit written consent from Dr. Barnes.

4. Prescription Medications and Controlled Substances

- The physician will prescribe medications based on medical necessity and best practices.
- The patient agrees to use prescribed medications as directed within reason.
- The patient agrees to provide an accurate list of prescription medications if changes have occurred.



- The physician may use controlled substance use agreements where necessary.

5. Fee Payment

- Patients are responsible for prompt payment of any fees not covered by OHIP or WSIB, including missed appointment fees. Fee amounts can be found on the supplied uninsured services menu, also available at www.drbarnes.ca.
- For services requiring payment, fees must be paid in advance of receiving the service or booking an appointment for the service.
- In cases where fees are incurred after service provision (e.g., missed appointment fees):
 1. The patient will be invoiced promptly, with payment due within 60 days.
 2. Payment reminder(s) will be sent via email.
 3. If the 60-day period elapses without payment: a. The practice will attempt to contact the patient to discuss the outstanding balance and explore payment options. b. A discussion regarding the outstanding fees will take place to determine an appropriate resolution. c. If the patient is unresponsive or unwilling to engage in discussion, a final notice will be sent, allowing an additional 14 days for response or payment.
 4. If there is no resolution after the additional 14 days: a. The practice may choose to take reasonable steps to recover the outstanding amount. b. The physician-patient relationship may be terminated as per Section 7, with appropriate notice and care provisions in accordance with CPSO guidelines.
- Patients experiencing financial hardship are encouraged to communicate with the practice proactively to discuss potential arrangements.
- The practice reserves the right to require pre-payment for future services from patients with a history of late payments.
- Accumulation of unpaid fees totaling \$100 or more, or three instances of unpaid fees within a 12-month period, may result in the termination of the physician-patient relationship as per Section 7.



6. Appointments and Cancellation

- Patients are expected to arrive on time for their scheduled appointments.
- If a patient cannot attend an appointment, they must provide at least 24 hours' notice for cancellation or rescheduling.
- Late arrivals may result in a shortened appointment or rescheduling, at the discretion of the practice.
- Missed appointments or cancellations with less than 24 hours' notice will incur a fee, as listed in our uninsured services menu. While we may waive the fee for genuine extenuating circumstances, repeated claims of such circumstances will be reviewed and may not be accepted.
- After three missed appointments or late cancellations within a 12-month period, the practice reserves the right to: a) Require a deposit for future appointments b) Schedule the patient for same-day appointments only c) Review the physician-patient relationship and consider termination as per Section 7, in accordance with CPSO guidelines.

7. Review Of & Termination of the Physician-Patient Relationship

7.1 Mutual Trust and Respect in the Physician-Patient Relationship

The patient-physician relationship is fundamental to effective healthcare. Patients are encouraged to recognize that their behavior significantly impacts not only their own care but also the practice's ability to serve the community. Respectful and cooperative conduct fosters an environment where your physician can provide optimal care to all patients. By being mindful of how your actions affect the practice, you contribute to a sustainable and efficient healthcare system. Understanding this mutual responsibility is crucial, as a breakdown in this relationship can have serious consequences, including review of the physician-patient relationship and potential termination of care.

During the course of the physician-patient relationship, a breakdown in trust may occur for a variety of reasons. A breakdown in trust may result in termination of the physician-patient relationship in the best interest of the patient due to potential for compromised care. In these cases, where reasonable or outside the parameters of this agreement, Dr. Barnes will attempt to respectfully resolve the dispute. Should a resolution not be reached, respectful communication not reciprocated, or a reasonable solution not found, Dr. Barnes will review the physician-patient



relationship and potentially terminate the physician-patient relationship in writing, adhering to guidelines as laid out by the CPSO.

Adequate healthcare requires a shared decision-making process and respect for patient autonomy, but also respect for the physician-patient relationship and professional advice. Continuous and routine disregard for medical advice may impact the therapeutic relationship negatively. This may contribute to cause for termination of the physician-patient relationship.

7.2 Cancellation Conditions

This agreement and the physician-patient relationship may be terminated under the following conditions:

1. Patient-Initiated:

- The patient provides written notice of cancellation.
- The patient enrolls with another primary care physician.

2. Physician-Initiated:

- Consistent failure to meet obligations outlined in this agreement.
- Repeated missed appointments or late cancellations.
- Abusive or inappropriate behavior towards Dr. Barnes or staff.
- Other reasons in accordance with College of Physicians and Surgeons of Ontario guidelines, this agreement or other causes resulting in a breakdown of the therapeutic relationship.

3. Administrative:

- Patient no longer qualifies for Ontario health care services.
- Patient moves outside the practice's service area.
- Patient becomes a resident of a long-term care facility.
- Patient is incarcerated in a correctional institution.

Termination Process:

- In non-urgent situations, at least 30 days' notice will typically be provided.



- In cases of severe misconduct or safety concerns, termination may be immediate.
- Urgent care provision during the notice period will be at Dr. Barnes' discretion, based on the circumstances of termination.
- When appropriate, information on accessing alternative care options will be provided.

The patient acknowledges that upon cancellation, they will need to seek primary care services elsewhere and that there may be a waiting period to enroll with a new primary care physician.

7.3 Immediate Termination Due to Abusive Behavior

Violent speech, threats, actions, emails, or other abusive or inappropriate behavior toward any individual connected to or working with Dr. C. Barnes Medicine Professional Corporation will not be tolerated. Should a patient act in a way that is severely disrespectful, abusive, or inappropriate, a review of the physician-patient relationship will be conducted by Dr. Barnes and may result in the immediate termination of the physician-patient relationship. The patient will be notified of the termination via email and care will be suspended when necessary to ensure a safe workplace environment.

8. Practice Communication and Technology Use

Dr. Barnes is committed to building a practice that is efficient, high-quality, and provides adequate availability for patients. To achieve this, the practice utilizes modern communication technologies that patients may not have encountered in other healthcare settings.

- Patients agree to maintain a valid email address and check it regularly for communications from the practice.
- Patients are expected to respond to emails from the practice within reasonable timeframes, typically within 3-5 business days unless otherwise specified.
- The practice may implement a secure patient portal or other digital tools in the future. Patients acknowledge that they may need to adapt to these technologies wherever reasonable.
- If a patient does not have email access, they acknowledge that this may limit the practice's ability to communicate effectively and provide timely care.



- The practice recognizes that affordable internet access is widely available in Dr. Barnes's service area. If a patient chooses not to maintain email access, they acknowledge this as a personal choice that may unintentionally impact their care.
- Failure to maintain adequate communication through agreed-upon digital channels may result in a breakdown of trust in the physician-patient relationship and could lead to termination of care as outlined in Section 7.
- Patients with genuine difficulties accessing or using digital communications should discuss their situation with the practice to explore possible accommodations.
- The practice implements security measures in accordance with the Personal Health Information Protection Act (PHIPA) and takes additional steps where possible to protect patient information. However, patients should be aware that no digital communication method is entirely risk-free. By agreeing to use these technologies, patients acknowledge and accept these inherent risks. Patients who are not comfortable with these risks should seek enrollment with another physician whose communication practices better align with their preferences.

By signing this agreement, patients acknowledge the importance of digital communication in the practice's operations, commit to participating in these communication methods to the best of their ability, and accept the inherent risks associated with digital communication in healthcare.

9. Primary Care Commitment

- The Ministry of Health of Ontario imposes a financial penalty on our Family Health Organization when patients visit walk-in clinics for care that could be accessed through our offices. As long as the Ministry maintains this practice, we request that patients utilize our FHO services whenever reasonably possible for non-emergency medical needs rather than walk-in clinics.
- This commitment ensures continuity of care and allows for comprehensive management of the patient's health.

10. Consent for Practice Feedback and Surveys

Dr. Barnes and the practice are committed to continuous improvement in patient care, service delivery, and contributing to the field of family medicine through research and advocacy. By



agreeing to this clause, you consent to receive invitations to participate in surveys about your experience with our practice and healthcare delivery. Participation is voluntary and will not affect your care quality. Survey invitations may be sent via email, patient portal, or other digital methods used by the practice.

Your survey responses will be kept confidential, and your identifying information will not be directly connected to your feedback in any public or shared format. You consent to the use of your anonymized responses for internal practice improvement, family medicine research, advocacy efforts (e.g., with the Ontario Medical Association), and public display of aggregated statistics on our practice website or other professional platforms. All applicable ethical guidelines and privacy regulations will be strictly followed in research uses.

You have the right to opt out of receiving survey invitations or request the removal of your data from future research or advocacy use by notifying our practice in writing. However, it may not be possible to remove data from already published materials, and any anonymized data already collected may still be used for the outlined purposes.

By signing, you acknowledge your understanding and agreement to these terms, retaining the right to withdraw consent at any time, with the understanding that this withdrawal cannot affect already published or used anonymized data.

By signing below, I acknowledge that I have read, understood, and agree to abide by all terms outlined in this Patient Agreement. I understand that this agreement will be periodically reviewed and may be subject to change.

Patient Signature: _____ Date: _____

Physician Signature: _____ Date: _____