



# SGP BULLETIN

October 24, 2017

## Central Patient Attachment Registry (CPAR) - What's in it for family physicians and our patients?

Dear Family Physician,

By now many of you have received communications from the AMA, and possibly from PCNs, providing information about the Central Patient Attachment Registry.

### Why are we doing this?

As a reminder, the development of the Central Patient Attachment Registry was a part of our last Amending Agreement with Alberta Health signed in October 2016. There was a commitment by both parties to develop this tool for primary care.

The Section of General Practice and AMA staff have representation on both the CPAR Working Group and the Steering Committee in order to keep up with aggressive timelines for the project.

Presently, close to 70% of family physicians across Alberta are in an active phase of developing or completing their panels with their PCNs. The Registry is one more additional step in this process that will consolidate continuity.

### What's so good about it?

The Registry is the **key technical enabler** to longitudinal continuity for patients. There is significant evidence that continuity...

- improves preventative care
- decreases utilization and hospitalization
- reduces mortality
- improves patient health
- reduces health care costs
- improves overall care quality
- increases patient satisfaction
- improves patient adherence to care

Overall, the Registry is the next step in improving care for patients.

### How does this help physicians?

Physicians will have the ability to confirm who is on their panel and identify duplication of patients on multiple panels. This can potentially reduce physician work by clarifying with patients who their family physician is. For practices engaged in panel management, this is a logical next step to ensure proactive care is offered to patients that are verified on a physician's panel.

Once streamlined, the Registry has the potential to improve integration and transfer of care from acute care facilities.

There is also the potential to financially incent continuity by using the registry and practicing comprehensive care.

### **What's the catch?**

If you are among the 70% of family physicians already working on panel development, this is the next step to strengthen panels/patient registries as a clinical tool. The only catch is encouraging family physicians and clinics to continue to work on panel and registry development.

Communication is also key to the success of the Registry - both to physicians and to our patients. The Section of General Practice has made it clear to Alberta Health that informing patients and the public is a shared effort and one that cannot be left solely to physicians and our clinics.

### **Timelines**

- December 2017 – Registry technical solution will be ready for roster management by alternate compensation programs for January use.
- Spring 2018 – Ready for registry registration.
- April 2018 – Registry will be ready for panel uploads. Limited production roll-out will occur before broader roll-out.

If you have questions, you can find more information online at:

<http://www.topalbertadoctors.org/CPAR>.

You can also contact Barbra McCaffrey ([Barbra.McCaffrey@topalbertadoctors.org](mailto:Barbra.McCaffrey@topalbertadoctors.org)) or Chris Diamant ([Chris.Diamant@topalbertadoctors.org](mailto:Chris.Diamant@topalbertadoctors.org)) for more information.

You can also contact myself, and the Section of General Practice, at [gppres@albertadoctors.org](mailto:gppres@albertadoctors.org).

Regards,



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President - AMA Section of General Practice

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