COLLEGE OF PHYSICIANS AND SURGEONS OF BRITISH COLUMBIA

T 604-733-7758
TF 1-800-461-3008
F 604-733-3503

300–669 Howe Street
Vancouver BC V6C 0B4
Canada

cpsbc.ca

APPROVED MINUTES

Board (Open)

May 31, 2024

9:00 a.m.
Videoconference / 7th floor boardroom
669 Howe Street, Vancouver, BC

Attendance

Members present:

- Dr. B.A. Priestman (President)
- Mr. T.T.S. Mann (Vice-President)
- Dr. C.S. Leger (Treasurer)
- Dr. R. Abrahams
- Dr. A. Du Preez
- Dr. M. Greenwood, PhD
- Dr. J.J. Kingsley
- Dr. S. McDonald
- Ms. H.A. Muller
- Ms. S.F.J. Ross (virtual)
- Dr. K.L. Seland
- Mr. L. Yip

Regrets

- Dr. J.T. Wale
- Ms. J.W.E. Dyson
- Dr. S. Tsuchiya

Recorder of minutes:

- Ms. J. Sherle (Executive Office and Board Manager)

Staff present:

- Dr. P.D. Rowe (Registrar/CEO)
- Mr. G. Keirstead, KC (Deputy Registrar, Chief Legal Counsel)
- Dr. C.A. Hall (Deputy Registrar)
- Dr. D. Puddester (Deputy Registrar)
- Dr. D.A. Unger (Deputy Registrar)
- Mr. M. Epp (Chief Operating Officer)
- Ms. C. de Bruin (Executive Director, Registration)
- Ms. S. Prins (Director of Communications and Public Affairs)

Summary of resolutions and actions discussed

Record of resolutions

Item #	Item	May 31, 2024	Resolution #
4.	Adoption of the agenda	**RESOLVED** that the agenda for the Board open regular meeting scheduled May 31, 2024, be adopted, as circulated.	**24-522**
5.	Consent agenda	**RESOLVED** that the consent agenda for the Board open meeting be approved, with the following items in the consent agenda, as attached: 5.1 Health Professions Review Board report – registration decisions and complaints dispositions 5.2 Inquiry Committee – Panel A 5.3 Inquiry Committee – Panels B-E 5.4 Inquiry Committee – Panel B report 5.5 Inquiry Committee – Panel C report 5.6 Inquiry Committee – Panel D report 5.7 Inquiry Committee – Panel E report 5.8 Prescription Review Panel report 5.9 Registration Committee report 5.10 Physician Practice Enhancement Panel report 5.11 Diagnostic Accreditation Program report 5.12 NHMSFAP Patient Safety Incident Review Panel report 5.13 Patient Relations, Professional Standards and Ethics Committee report	**24-523**
6.	Adoption of the minutes - February 23, 2024	**RESOLVED** that that the minutes of the Board open regular meeting held February 23, 2024, be adopted, as circulated.	**24-524**

Item #	Item	May 31, 2024	Resolution #
10.1.3	Bylaw amendments – physician assistant	**RESOLVED** that the Board amend the Bylaws of the College of Physicians and Surgeons of British Columbia, in accordance with the authority established in section 19(1) of the Health Professions Act, RSBC 1996, c.183 (the "Act"), and subject to sections 19(3) and (6.2) of the Act, as follows: Section 10-1 of the Bylaws is amended as in the attached form. Section 10-3 of the Bylaws is amended as in the attached form. Section 10-4 of the Bylaws is amended as in the attached form.	**24-525**
12.4	Associate Physician Class registration policies	**RESOLVED** that the Board approve the following policies for the Associate Physician Class: • Associate Physician - Acute Care Class – Registration and Licensure Requirements for Eligibility and Accountability (amended) • Associate Physician Class – Eligible Clinical Programs (amended) • Associate Physician Class – Use of Title (amended) • Associate Physician – Community Primary Care Class – Health Authority UPCC - Registration and Licensure Requirements for Eligibility and Accountability (new)	**24-526**

Action items

RFA #	Item #	Item	Responsible	Action/comments
Board-O-24-05-31-001	10.1.3	Bylaw amendments – physician assistant	Legal	Bylaws to be sent to Ministry of Health to determine if an additional period of registrant and public consultation is required on the proposed amendments.

1. Territorial acknowledgement

The College of Physicians and Surgeons of BC is located on the unceded and traditional territory of the Coast Salish peoples, including the territories of the hən̓q̓əmin̓əm̓ speaking peoples—the xʷməθkʷəy̓əm (Musqueam) and sel̓íl̓witulh (Tsleil-Waututh) Nations, and the Sḵwx̱wú7mesh-ulh Sníchim speaking peoples—the Sḵwx̱wú7mesh (Squamish) Nation.

We acknowledge the rights and title of BC First Nations whose territories span across the province. These territories recognize that laws, governance, and health systems tied to lands and waters have existed here since time immemorial.

Board members acknowledged the following territories from which they participated virtually in the meeting:

- Ms. S.J.F. Ross – The unceded Musqueam, Squamish, and Tsleil-Waututh Nations

Moose Hide Campaign

The Moose Hide Campaign is an Indigenous-led grassroots movement of men and boys – and all Canadians – who are standing up against violence towards women and children.

Board members were each provided with a moose hide pin. Wearing this moose hide signifies commitment to honour, respect, and protect women and children and to work together to end violence against women and children, and all those along the gender continuum.

Territorial Acknowledgment by Dr. Ronald Abrahams in closed session

Dr. Rowe acknowledged Dr. Abrahams' personal territorial acknowledgement (TA) in the closed session of the Board meeting on May 30, 2024. He recognized that Dr. Abrahams' led this TA with a personal element and his experience as a colonizer. He congratulated Dr. Abrahams for taking the TA beyond performative and the beginnings of a truth experience.

2. Call to order and chair's remarks

A quorum being present, Mr. T.T.S. Mann, vice-president, called the meeting to order at 9:00 a.m. on Friday, May 31, 2024.

Mr. Mann thanked the Board and staff for the president's dinner on May 30, 2024 at which he was recognized for his seven years as a board member. Mr. Mann's term as a board member ends on June 30, 2024.

3. Declaration of conflict of interest

No members declared a conflict of interest.

4. Adoption of the agenda

The following resolution was MOVED, SECONDED and CARRIED:

RESOLUTION 24-522
RESOLVED that the agenda for the Board open regular meeting scheduled May 31, 2024, be adopted, as circulated.

5. Consent agenda

The following resolution was MOVED, SECONDED and CARRIED:

RESOLUTION 24-523
RESOLVED that the consent agenda for the Board open meeting be approved, with the following items in the consent agenda, as attached:

5.1 Health Professions Review Board report – registration decisions and complaints dispositions
5.2 Inquiry Committee – Panel A
5.3 Inquiry Committee – Panels B-E
5.4 Inquiry Committee – Panel B report
5.5 Inquiry Committee – Panel C report
5.6 Inquiry Committee – Panel D report
5.7 Inquiry Committee – Panel E report
5.8 Prescription Review Panel report
5.9 Registration Committee report
5.10 Physician Practice Enhancement Panel report
5.11 Diagnostic Accreditation Program report
5.12 NHMSFAP Patient Safety Incident Review Panel report
5.13 Patient Relations, Professional Standards and Ethics Committee report

6. Adoption of the minutes: February 23, 2024

The following resolution was MOVED, SECONDED and CARRIED:

RESOLUTION 24-524
RESOLVED that that the minutes of the Board open regular meeting held February 23, 2024, be adopted, as circulated.

7. Record of resolutions approved via facsimile/email

No resolutions

8. Report of the registrar

The registrar reported on the following:

- **Therapeutics Initiative**

Drs. Rowe and Unger were invited to attend the 30th anniversary celebration for the Therapeutics Initiative. This provided another opportunity for engagement with UBC, the Ministry of Health, and the College of Pharmacists regarding the ongoing work to support safe-prescribing practices through the Prescription Monitoring Program.

- **Jasper Medical Conference**

Dr. Rowe was invited to attend the annual gathering of northern physicians at the Jasper Medical Conference. Multiple engaged conversations and group meetings covered topics including Physician Assistants, Surgical Assists, virtual care in the rural context, safe supply prescribing, and complaints processes. The organizing committee have subsequently contacted Dr. Rowe requesting a possible plenary presentation from the College at the next gathering.

- **Federation of State Medical Boards (FSMB) Annual Meeting April 18-20, 2024**

Drs. Rowe and Priestman concluded a successful trip to Nashville for the annual FSMB conference. Topics of conversation included kindness in regulation, internationally educated physicians, artificial intelligence, and challenging cases in regulation.

Also resulting from the FSMB was an invitation for CPSBC to attend a symposium in Washington, DC, to discuss alternate routes to licensure for internationally educated physicians. This will be occurring in June and will offer another opportunity for CPSBC to participate in the broader conversation about providing reasonable routes to practice for international physicians.

Keynote speaker, Mr. Martin Fletcher, Chief Executive Officer, Australian Health Practitioner Regulation Agency, provided a presentation on "*Should Medical Regulation be Kinder*", reflecting on their experience of physician extreme distress temporally related to regulatory investigation and discipline processes. Dr. Rowe noted that trauma is one of the keys to regulate in a fashion that is trauma informed and not trauma inducing. He noted that conversations at the FSMB conference on this topic were quite impressive.

Dr. Catherine Caldicott, medical director of PBI Education, provided an excellent presentation about trauma-informed regulation. Dr. Rowe and Mr. Keirstead have since met with them to organize a similar presentation for board and committee members.

- **Artificial Intelligence**

Dr. Rowe noted that the conversations at the FSMB Annual Meeting on artificial intelligence (AI) reflect the CPSBC discussions on how to protect patient safety in the context of a rapidly evolving space of innovation and to improving patient outcomes. This is a balance that the CPSBC, and bodies internationally, are trying to achieve. It was noted that registrants and staff are keen to adopt the efficiencies available through AI. As a result, the College is trying to provide guidance to registrants as well as internally. In April 2024, the College provided

registrants with an interim guidance document *"Ethical Principles for Artificial Intelligence in Medicine"*. In addition, an internal policy has also been developed.

The Board was informed that in the upcoming May/June College Connector there will be an article highlighting the new AI interim guidance document for registrants.

On September 20, 2024, the International Association of Medical Regulatory Authorities (IAMRA) is holding a one-day symposium to explore the world of AI and how it is fundamentally changing clinical practice across the globe. The Symposium will provide an opportunity to come together as a global medical regulatory community to better understand these transformational changes. This includes developments in the application of AI in clinical practice as well as the ethical and professional challenges that are rapidly emerging. A key outcome will be the development of guidance resources on AI and regulation for the IAMRA membership.

- **Physician Practice Enhancement Program (PPEP)**

The PPEP has been collecting physician factors since 2013 to identify risk and protective factors associated with physician performance in practice. The PPEP is a quality assurance program that provides feedback on registrants' clinical practice and guidance on opportunities to improve. The College is diligent to ensure it is separate from the discipline process. Dr. Hall was pleased to inform the Board that a manuscript *"Risk based regulation in quality assurance: Selection of (and benefits experienced by) registrants undertaking regulator-mandated peer assessment"* has been accepted for publication. The College is working with MRAs across the country to understand what each one finds to be important and how they do their assessments.

The following Resolutions were passed by the Board in the closed session of the meeting:

- **RESOLVED** that the Board accepts the 2023/24 audited financial statements.

- **RESOLVED** that the following be appointed as the Officers and Executive Committee for the governance year July 1, 2024 to June 30, 2025:

President:	Dr. B.A. Priestman
Vice-President:	Ms. J.W.E. Dyson
Treasurer:	Dr. C.S. Leger
Members at large:	Dr. J.J. Kingsley
	Mr. L.R. Yip
	Dr. S.M. McDonald

- **RESOLVED** that the report of the Nominations Committee for membership on College committees for the year July 1, 2024 to June 30, 2025, be accepted.

9. Report of the president

The president provided a report in the closed session of the Board meeting.

10. Unfinished business

10.1 Bylaw amendments:

- *Bylaw amendments email notification re Associate physician and USA certified from CPSBC and MoH, dated April 4, 2024*

1. Associate physician - surgical assistant class
2. USA certified class for USA trained and certified psychiatrists

At the February 2024 meeting, the Board approved proposed amendments to the Bylaws on Associate physician – acute care (section 2-25) and associate physician – community primary care (section 2-26), the addition of a new class the associate physician – surgical assistant class and USA certified (section 2-27). The proposed bylaw amendments were posted on April 4, 2024 for a three-month notification period. To date, the College has received very little feedback.

The proposed amendments and any feedback will be provided to the Board at its July 6, 2024 meeting.

3. Physician assistant

- *Briefing Note to Board re Physician Assistant – Consultation Feedback – Updated Proposed Amendments from Ms. Corinne de Bruin, submitted May 21, 2024, with attachments:*
  - *Proposed amendments to Part 10 of the College bylaws, dated February 2024*
  - *Physician assistant bylaws – additional revisions, revised May 28, 2024, redlined version*
  - *Physician assistant bylaws – additional revisions, revised May 28, 2024, clean version*
  - *Board resolution – Physician assistant – further revisions*
- *Physician assistant bylaw amendment – responses to posting*

In 2023, the College amended its Bylaws to include a class of registration for physician assistants (PA), as certified non-registrants employed by a health authority to work in the emergency department of a hospital (Section C and Part 10).

In February 2024, the Board approved proposed amendments to the Bylaws to address concerns raised and to enable physician assistants to support emergency departments in hospitals as intended. These amendments continued to require a supervising physician to satisfy themselves regarding the physician assistant's competency to perform the restricted activity, while enabling the physician assistant to perform restricted and delegated acts with more autonomy, as the supervising physician deems appropriate. The Board was referred to the recently amended proposed amendments to Part 10 of the College Bylaws (February 2024).

In March, the proposed amendments were approved in principle by the Ministry of Health and were posted for registrant and public consultation. The Board was provided with copies of the responses to the posting.

Consultation Feedback
The consultation feedback received from registrants and the public included the following:

- Clarify the terms assign, delegate, oversight and supervise terms
- Specify the circumstances where a PA would be able to initiate assessment and treatment themselves vs. when it would be appropriate for the supervising physician to do themselves
- Physician assistants will never be as able as a physician as they have not undergone the same training
- Consent – express or implicit required
- Physician assistant needs to identify themselves and their role when providing care
- Add in "subcutaneous and intramuscular injection" and "wound cleansing"
- Clarify that "insertion and maintenance of airways "does not include the use of advance airway devices

There were other comments related to broadening the scope of practice for physician assistants but given that they are not one of the designated health professions regulated under the *Health Professions Act* (HPA), they are classified as "certified non-registrants" and do not have a scope of practice. As such, the proposed amendments include a list of specific activities which are the practice of medicine that can be delegated and those that must be completed under direct supervision.

To address the concerns raised and enable physician assistants to support emergency departments in hospitals as intended, the Board is requested to consider further amendments to section 10 of the bylaws. Such amendments would continue to require a supervising physician to satisfy themselves regarding the physician assistant's competency to perform the restricted activity, while enabling the physician assistant to perform restricted and delegated acts with more autonomy, as the supervising physician deems appropriate. A redlined and clean version of these proposed amendments were provided to the Board.

Prescribing
The current bylaws related to physician assistant include the ability of a physician assistant to prescribe. Specifically, section 10-3(1)((f) and (g) note "prescribe and administer a drug…".
In Alberta, Manitoba and Nova Scotia, physician assistants can prescribe as follows:
Alberta:

- Can prescribe, under the supervision of a physician or surgeon.

Manitoba:

- Can order prescriptions in hospital for all drugs including controlled drugs.
- Can prescribe for patients to pick up prescriptions in the community (but not controlled drugs)
- All prescriptions will have the name of the primary supervisor on the Rx.

Nova Scotia

- Leave prescribing 'rule' with the programs (College approves and accredits the programs). Have some primary care and EM PA programs and they would usually prescribe to community pharmacies.

The proposed amendments to section 10-3 provide clarity in two restricted activities that may be delegated to physician assistants. Physician assistants who are authorized (by delegation) to prescribe and administer a drug may do this by way of subcutaneous and intramuscular injection. Physician assistants who are authorized (by delegation) to perform insertion and maintenance of airways not requiring visualization of the larynx, may perform this activity when the use of advanced airway devices is not required.

The proposed amendments include the addition of a restricted activity that may be delegated to physician assistants, specifically, wound preparation, wound cleansing, and suturing of simple wounds

Ms. de Bruin informed the Board that following discussions with senior medical staff at Saanich Peninsula Hospital and Island Health, the need for further amendments were identified to section 10-4. Specifically, to include the addition of two restricted activities that a delegating or supervising physician may authorize physician assistants to perform under direct supervision, specifically, performing insertion of intraosseous device and performing needle decompression of suspected tension pneumothorax. A redlined and clean version of these proposed amendments were provided to the Board.

The Board was advised that once the HPOA is in force it does not allow for the category for non-certified registrants. This means that PAs will require a designation, which the Ministry of Health has been very clear that they intend to take that opportunity to have PAs designated.

The Board was advised that PAs prescribing in emergency rooms is considered safe as the supervisor will be there. Further information for prescribing can be provided when the accreditations are done. It was noted that there will also be opportunities to further influence the prescribing of PAs at the policy level and the College will work with sites and programs to ensure that prescribing is done in a safe manner for patients.

Following discussion, the Board agreed with the proposed amendments as outlined above.

A copy of the proposed amendments will be provided to the Ministry of Health for a discussion about the current challenge with physician assistant bylaws and how the proposed amendments might address that challenge. Once the ministry approves the proposed amendments in principle, the College may be required to provide an additional period of registrant and public consultation on the proposed amendments.

The following resolution was MOVED, SECONDED and CARRIED:

RESOLUTION 24-525

RESOLVED that the Board amend the Bylaws of the College of Physicians and Surgeons of British Columbia, in accordance with the authority established in section 19(1) of the *Health Professions Act*, RSBC 1996, c.183 (the "Act"), and subject to sections 19(3) and (6.2) of the Act, as follows:

Section 10-1 of the Bylaws is amended as in the attached form.
Section 10-3 of the Bylaws is amended as in the attached form.
Section 10-4 of the Bylaws is amended as in the attached form.

Request for Action: RFA # Board-O-24-05-31-001
Bylaws to be sent to Ministry of Health to determine if an additional period of registrant and public consultation is required on the proposed amendments.

11. Committee reports

No reports

12. New business

12.1 Registration overview
Educational session: 9:30 a.m.

Corinne de Bruin, executive director, registration, Tina Cheng, manager, independent practice team, Jessica Ostrowski, registration manager, and Jonathan Norton, manager, compliance and assessments, provided the Board with a presentation on "Registration and Licensing". A copy of the presentation is attached to the minutes.

The Board acknowledged and thanked the registration department for all their hard work.

12.2 2025 Board meeting dates

- *Suggested 2025 Board meeting dates*

The following Board meeting dates were confirmed for 2025:

February 20 & 21, 2025
May 29 & 30, 2025
July 4 & 5, 2025 - Retreat
September 25 & 26, 2025
November 20 & 21, 2025

12.3 Environmental and Sustainability ad hoc committee report

- *Environmental and Sustainability ad hoc committee report to Board, dated April 10, 2024*
- *Terms of Reference re Environmental and Sustainability Committee*

The Environmental and Sustainability Committee (ESC) met on April 10, 2024, welcoming a new board member and three new staff members to the committee. The following items were covered in this meeting.

- The decisions made in the February ESC meeting were reviewed.
- The ESC terms of reference were approved to go to the Board with the acknowledgment of possible amendments in the future.

- The ESC 18-month roadmap was presented to committee members and discussed.
- The ESC was informed of a meeting between committee representatives and the Embedding Project regarding facilitating a materiality assessment workshop for the College. The Embedding Project is a research foundation specializing in integrating environmental, social, and governance initiatives. The ESC decided to move forward with a virtual workshop with the Embedding Project in June and conduct an initial staff survey beforehand.
- The ESC was informed of a meeting committee representatives had with a GreenCare consultant. The College falls outside of their advisory mandate, and they are unable to provide the ESC with direct assistance.
- The ESC engaged in a discussion about the General Medical Council's (GMC) Sustainability Report, highlighting steps taken at the GMC to involve staff in sustainability initiatives.

The following will be brought to the committee at its next meeting:

- An update on the materiality assessment with the Embedding Project
- An update on the staff sustainability survey

The Board was provided with a copy of the ESR Terms of Reference for information.

12.4 Associate Physician Class registration policies

- **Associate Physician - Acute Care Class – Registration and Licensure Requirements for Eligibility and Accountability**
- **Associate Physician Class – Eligible Clinical Programs**
- **Associate Physician Class – Use of Title**
- **Associate Physician – Community Primary Care Class – Health Authority UPCC - Registration and Licensure Requirements for Eligibility and Accountability**

- *Briefing Note to Board re Associate Physician policies from Ms. Corinne de Bruin, dated May 30, 2024, with attachments:*
  - *Associate Physician - Acute Care Class – Registration and Licensure Requirements for Eligibility and Accountability*
    - *Redlined version*
    - *Clean version*
  - *Associate Physician Class – Eligible Clinical Programs*
    - *Redlined version*
    - *Clean version*
  - *Associate Physician Class – Use of Title*
    - *Redlined version*
    - *Clean version*
  - *Associate Physician – Community Primary Care Class – Health Authority UPCC - Registration and Licensure Requirements for Eligibility and Accountability*
  - *Sections 2-25 & 2-26 Associate Physician Bylaws*

At its May 2020 meeting, the Board requested that it review proposed policies for the Associate Physician class. As a result, the policy Associate Physician – Registration and

Licensure Requirements for Eligibility and Accountability was approved by the Board effective September 24, 2020. The College registered and licensed its first physician in the associate physician class on November 30, 2022. There are currently 27 registrants in the associate physician – acute care class. On January 13, 2023, new College bylaws came into effect that renamed the associate physician class to the associate physician – acute care class and created a new associate physician – community primary care class. The Ministry of Health requested that the College and other key partners work together for any proposed sites for physicians who would be eligible for the associate physician – community primary care class. The College licensed its first physician in the associate physician – community primary care class on November 6, 2023 as part of a pilot program with Northern Health in an urgent primary care center (UPCC).

The policy for the associate physician - acute care class has been revised to provide more details about the requirements and expectations for the associate physicians and health authority programs. The policy regarding the Associate Physician classes have been updated to include the associate physician – community primary care class. Additionally, a policy outlining the registration and licensure requirements for eligibility and accountability for registrants in the associate physician – community primary care class and the related programs has been drafted.

The following policy revisions were provided to the Board for review and approval:

- Associate Physician - Acute Care Class – Registration and Licensure Requirements for Eligibility and Accountability
- Associate Physician Class – Eligible Clinical Programs
- Associate Physician Class – Use of Title

The following new policy was provided to the Board for review and approval:

- Associate Physician – Community Primary Care Class – Health Authority UPCC - Registration and Licensure Requirements for Eligibility and Accountability

The following resolution was MOVED, SECONDED and CARRIED:

RESOLUTION 24-526
RESOLVED that the Board approve the following policies for the Associate Physician Class:

- Associate Physician - Acute Care Class – Registration and Licensure Requirements for Eligibility and Accountability (amended)
- Associate Physician Class – Eligible Clinical Programs (amended)
- Associate Physician Class – Use of Title (amended)
- Associate Physician – Community Primary Care Class – Health Authority UPCC - Registration and Licensure Requirements for Eligibility and Accountability (new)

12.5 Physician Practice Enhancement Program restructuring

- *Briefing Note to Board re Physician Practice Enhancement Panel Restructuring from Ms. Nadya Castro and Ms. Susan Prins, submitted May 13, 2024*

In 2013, the College's Physician Practice Enhancement Program (PPEP) replaced the historical "peer assessment program," which was administered by the Medical Practice Assessment Committee (MPAC) under the *Health Professions Act* (since 2009). Since that time, the program has evolved significantly to include a number of different assessment "programs" and one "initiative" – the Physician Office Medical Device Reprocessing Assessments (POMDRA).

The assessment tools of the PPEP, originally designed for family practitioners, have also been enhanced and adapted over the years to apply to more specialties: dermatology, psychiatry, internal medicine, rheumatology, pediatrics, podiatry and anesthesiology in dental practice.

The PPEP is restructuring to better reflect the quality assurance/improvement focus, to minimize confusion amongst registrants about the different elements (programs and initiatives) of the program, and to be more inclusive of registrants who are not "physicians" – i.e. podiatric surgeons.

Additionally, a new assessment is being introduced that will allow registrants who are deemed low risk to participate in a less onerous, self-directed assessment guided by the program's medical advisors, assessors, and program staff. It will be important to clearly communicate how registrants are selected for each assessment.

The restructuring of the PPEP will highlight the three assessments that registrants may be required to participate in:

1. **Peer assessment**

- Conducted by an experienced peer assessor who reviews a registrant's medical record, multi-source feedback (MSF), MSF self-reflection tool, and prescribing history to develop a picture of their practice and approach to patient care
- Encompasses a facilitated feedback interview where the peer assessor may suggest opportunities, strategies, and resources for quality improvement including relevant continuing professional development (CPD)
- Registrants will participate in a peer assessment specific to their specialty:
    - Family practice – peer assessment
    - Internal medicine – peer assessment
    - Rheumatology – peer assessment
    - Pediatrics – peer assessment
    - Psychiatry – peer assessment
    - Dermatology – peer assessment
    - Anesthesiology in dental practice – peer assessment
    - Podiatry – peer assessment

2. Office assessment (of which POMDRA is a part)

- Reviews key areas of a community-based clinical practice related to the delivery of safe patient care, including College practice standards and professional guidelines, aspects of emergency preparedness, the reprocessing of reusable semi-critical and or/critical medical devices, and infection prevention and control

3. Self-directed assessment

- Directed at registrants who may require less remedial support and will require them to complete activities similar to those identified under peer assessments but over a longer period of time.

Website content related to PPEP has been updated to reflect the changes and a newly released promotional video is also available.
(https://www.cpsbc.ca/registrants/programs/ppep)

This was provided to the Board for information.

13. Information items

13.1 Media summary report relevant to CPSBC

- *Media summary report relevant to CPSBC, dated February 8 to May 14, 2024*

Received for information.

13.2 FSMB *"Navigating the Responsible and Ethical Incorporation of Artificial Intelligence into Clinical Practice"*

- *FSMB "Navigating the Responsible and Ethical Incorporations of Artificial Intelligence into Clinical Practice" article, dated April 2024*

Received for information.

14. Next meeting

The next open regular meeting of the Board of the College of Physicians and Surgeons of British Columbia is scheduled for September 27, 2024.

The open regular meeting of the Board of the College of Physicians and Surgeons of British Columbia held Friday, May 31, 2024 concluded at 10:50 a.m.

T.T.S. Mann
Vice-President and Vice-Chair

TTSM/js

COLLEGE OF PHYSICIANS AND SURGEONS OF BRITISH COLUMBIA

T 604-733-7758
TF 1-800-461-3008
F 604-733-3503

300–669 Howe Street
Vancouver BC V6C 0B4
Canada

cpsbc.ca

REPORT TO BOARD

Health Professions Review Board (HPRB) Matters
March 1, 2023 – February 29, 2024

1. Inquiry Committee (IC) Matters

Under the *Health Professions Act* (the "*HPA*"), complainants have the right to request:

1) a review of a final disposition of the Inquiry Committee; or,
2) a review of a delay in the completion of the investigation.

Between March 1, 2023, and February 29, 2024, we received **71** applications for review.

March 1, 2023 – February 29, 2024

1) HPRB Applications re: IC Disposition	71
Panel A (Boundary)	4
Panel A (Clinical)	2
Panel A (Conduct)	1
Panel B (Clinical)	8
Panel C (Conduct)	3
Panel D (Conduct)	22
Panel D (Clinical)	31
2) HPRB Applications re: Delayed Investigation	0
TOTAL	**71**

IC Statistical Information by Year

	2023 Fiscal Year	2022 Fiscal Year	2021 Fiscal Year	2020 Fiscal Year	2019 Fiscal Year	2018 Fiscal Year	Combined Totals
Total number of reviewable IC matters: Final IC dispositions and delay notifications	1,062	1,105	777	753	790	706	5,193
Number of applications filed with HPRB	71	76	74	74	82	76	453
Review rate	6.7%	6.9%	9.5%	9.8%	10.4%	10.8%	8.7%
Number of reviews returned (for further investigation or new decision)	5±	6±	4±	3±	2±	3±	23
Rate of return for new decision	**7.1%**	**7.9%±**	**5.4%±**	**4.1%±**	**2.4%±**	**3.9%±**	**5.1%**

2. Registration Committee (RC) Matters

Between March 1, 2023, and February 29, 2024, we received **8** applications for review of a decision made by the Registration Committee.

RC Statistical Information by Year

	2023 Fiscal Year	2022 Fiscal Year	2021 Fiscal Year	2020 Fiscal Year	2019 Fiscal Year	2018 Fiscal Year	Combined Totals
Total number of reviewable RC decisions CPSBC issued	475	360	640	737	371	427	3,010
Number of applications filed with HPRB	8	3	6	12	16	9	54
Review rate	1.7%	0.8%	0.9%	1.6%	4.3%	2.1%	1.8%
Number of reviews returned	0	0	5±	1±	1±	2±	9
Rate of return for new decision	**0%±**	**0%±**	**83%±** (Due to files commenced in the previous year concluding in this period)	**8.3%±**	**6.25%±**	**22.2%±**	**16.7%**

± NB. This figure may include decisions relating to applications for review filed before the fiscal year.

3. HPRB Decisions Issued during the 2023 Fiscal Year:

From March 1, 2023, to February 29, 2024, the HPRB issued **5 interim** decisions and **68 final** decisions in respect of the College relating to Inquiry Committee matters:

Inquiry Committee: Interim Decisions	
○ 4 applications to withhold information pursuant to s. 42 of the *Administrative Tribunals Act* (*ATA*) granted (College made applications to withhold information from complainant) ○ 1 application to withhold information pursuant to s. 42 of the *ATA* granted (College made application to withhold information from registrant)	**5±**
Inquiry Committee: Final Decisions	
○ HPRB confirmed Inquiry Committee disposition: ○ "Stage 1" hearing (Review of record and submissions from complainant) ▪ 44 = Panel D ▪ 4 = Panel C ▪ 2 = Panel B ○ "Stage 2" hearing (Review of record and submissions from complainant, College and registrant[s]) ▪ 4 = Panel C ▪ 1 = Panel B ○ HPRB matters sent back to Inquiry Committee for reconsideration: ▪ 1 = Panel D ▪ 3 = Panel C ▪ 1 = Panel B ○ 5 = Dismissed or withdrawn ○ 3 = Applications for an extension of time denied	**68±**

From March 1, 2023, to February 29, 2024, the HPRB issued **1 interim** decision and **7 final decisions** in respect of the College relating to Registration Committee matters:

Registration Committee: Interim Decisions	
○ 1 application from applicant for an extension of time to file an application for review past the 30-day statutory deadline granted	**1**
Registration Committee: Final Decisions	
○ 6 = Dismissed or withdrawn ○ 1 = HPRB lacks jurisdiction to review matter. Matter dismissed.	**7±**

Michelle Stimac
Legal Counsel

± NB. This figure may include decisions relating to applications for review filed before the fiscal year.

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COMMITTEE REPORT TO BOARD

Inquiry Committee – Panel A

March 7, 2024; May 10, 2024

Attendance

Chair

- Dr. B.A. Priestman: March 7, May 10

Members present

- Ms. L. Charvat: May 10
- Ms. Jane Dyson: March 7
- Ms. J. Erickson: May 10
- Dr. M. Carter: March 7, May 10
- Mr. Tarjeet Mann: March 7

Overview/summary

21 files naming 18 registrants: 5 citations issued, 2 citations rescinded, 8 concluded without criticism, 2 placed into abeyance, 1 with direction for further investigation, 3 with direction to conclude remedially.

Files included:

- 6 unfinished business: 2 citations rescinded, 1 placed into abeyance, 1 with direction for further investigation, 1 with direction to conclude remedially, 1 concluded without criticism.
- 9 new legal/clinical/conduct/own motion: 4 citations issued, 1 placed into abeyance, 2 with direction to conclude remedially, 2 concluded without criticism.
- 6 new boundary: 1 citation issued, 5 concluded without criticism.

Respectfully submitted,
Graeme Keirstead, K.C.
on behalf of Dr. B.A. Priestman, Chair

COLLEGE OF PHYSICIANS AND SURGEONS OF BRITISH COLUMBIA

COMPLAINTS AND PRACTICE INVESTIGATIONS

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TF 1-800-461-3008
F 604-733-3503

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REPORT TO THE BOARD

Inquiry Committees – Panels B through E

Since our last report was provided to the Board, the Inquiry Committee has concluded 233 files in a three-month period (February 1, 2024, to April 30, 2024). During the period, the Registrar Stream (Panel D) processed 63% of the complaints investigated by the Inquiry Committee.

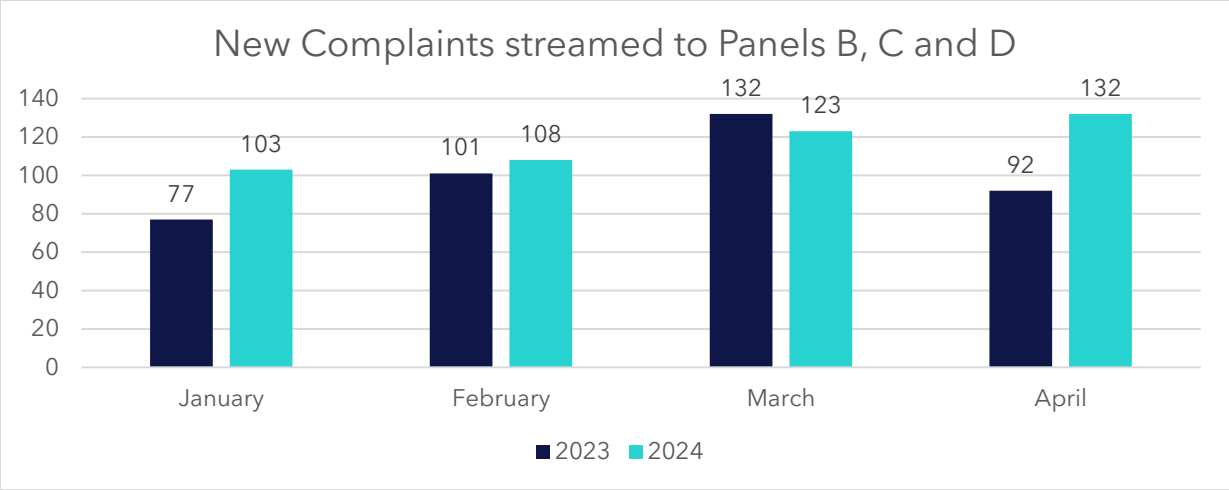
In this period, the following trends were observed relating to the department's 'timeliness' objective:

Investigation Stream	Investigations Concluded	Median Days of Investigation	Percentage concluded within 255 days
Registrar (Panel D)	147	253	51%
Inquiry Committee (Panel B &C)	86	337	24%
Inquiry Committee (Panel E)*	17	N/A	N/A
Total	**250**	**293**	**41%**

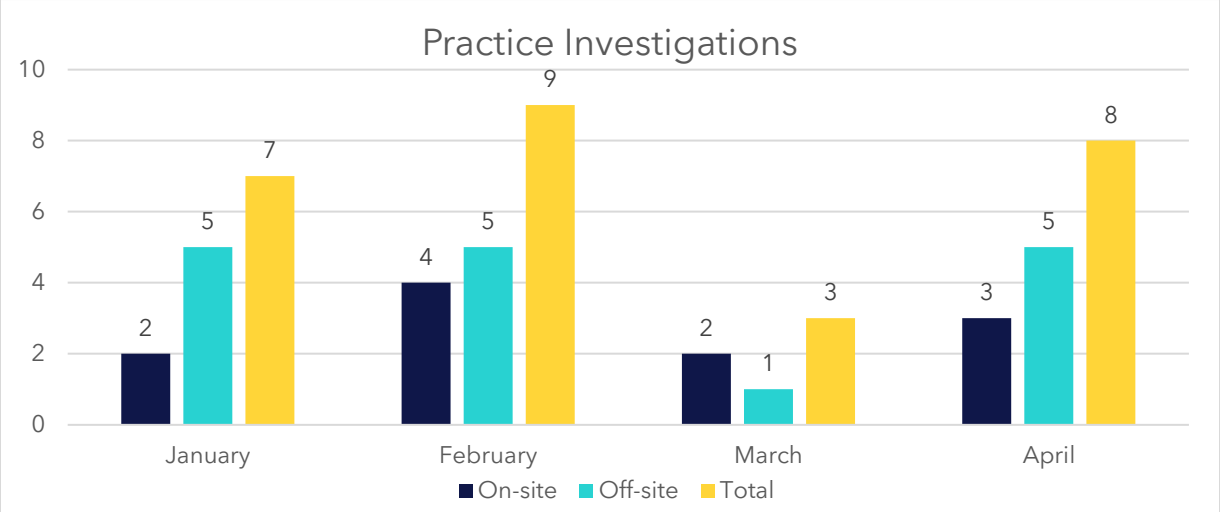
*Note: Practice Investigation files often take time to coordinate. Some remain open to allow the registrant to remediate prior to inspection (or re-inspection). For these reasons, they are not considered in calculating the KPI.

During this reporting period the Inquiry Committee **concluded 41% of files** within 255 days. This metric remains consistent from our previous report but has fallen short of our updated KPI of 50% concluded within 255 days. The KPI was increased from 40% to 50% effective March 1, 2024.

The department continues to track and closely monitor the number of new complaints received each month and notes that the total number of complaints continues to increase. From January 1 until April 30, 2024, we received a total of 363 new complaints. When compared to the same period last year, when we received 325 new complaints, the department has **experienced a 12% growth in complaint numbers**. The department has been supported to recruit a new manager and case administrator to address the growing workload. The new clinical manager started on March 13, 2024, and we are actively recruiting the new case administrator.



The department's practice investigation team coordinates both on-site and off-site assessments as directed by Panel E of the Inquiry Committee. The team has set a goal of completing a minimum of four assessments per month and has consistently **met or exceeded this target over the past four months**. For the period January 1 to April 30, 2024, a total of 27 assessments were completed.



Derek Martinig
Director
Complaints and Practice Investigations

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REPORT TO BOARD

Inquiry Committee – Panel B

February 20, 2024 - 10:45 am

Attendance

Chair

- Dr. Jason Wale

Members present

- Dr. Devin Spooner
- Dr. John Soles
- Dr. Jeff Kerrie*
- Dr. George Chang *
- Dr. Doran Ksienski
- Mr. Lionel Yip
- Ms. Lainie Shore
- Ms. Lorraine Argatoff
- Mr. Tarj Mann – Vice Chair
- Dr. Kate Bennett*

* Part-time attendance

Overview/summary

- 10 files naming 16 physicians; 9 files concluded
- 7 of 16 physicians concluded with criticism
- The Inquiry Committee reviewed a request for reconsideration of a previous disposition. The Inquiry Committee reviewed the request of the subject physician and accepted the modifications proposed to the reprimand under section 36(1)(c)
- Direction to seek consent to remedial disposition, *Health Professions Act*, *section 36(1)*:
    - 4 files for specified education, these are the courses that were directed:
        - 1 focused on critical thinking/cognitive errors relevant to radiology
        - 1 for education in breast complaints and/or management of breast lumps

  - 1 for reviewing the consent process best practices recommended by CMPA in their good practice guide and/or other equivalent resources
  - 1 for education in clinical decision making and cognitive bias
  - 1 for education in palliative care in the ER setting including resources and supports
- 4 interviews

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:

Dr. J. Wale, Chair

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REPORT TO BOARD

Inquiry Committee – Panel B

February 26, 2024

Attendance

Chair

- Dr. R. McCallum (Alternate)

Members present

- Ms. J. Dyson (Vice Chair, Alternate)
- Dr. J. Sole
- Dr. D. Spooner
- Dr. F. Din (Alternate)
- Dr. M. Aron (Alternate)*
- Dr. M. Bagdan *
- Ms. L. Argatoff
- Ms. M.L Casavant

* *Indicates part-time attendance*

Overview/summary

- 14 files naming 13 physicians; 13 files concluded, 1 deferred
- 9 of 13 physicians concluded with criticism
- Direction to seek consent to remedial disposition, *Health Professions Act*, section 36(1):
    - 8 for specified education:
        - 5 for the College's *Medical Record Keeping for Family Physicians* course
        - 1 for San'yas Anti-Racism Indigenous Cultural Safety Training Program
        - 1 for education pediatric psychiatry refresher

        - 1 for education in gynecological emergencies
        - 1 for education in diabetic emergencies
        - 1 for education in liver failure and disease
        - 1 for education in dermatology management of vulnerable persons
        - 1 for education in pediatric trauma life support
        - 1 for education in general trauma
        - 1 for education in emergency care upskilling
        - 1 for education in focused education on Parkinson's disease
        - 1 for education in health screening for immunosuppressed patients
        - 1 for education in management of patients with gastroesophageal reflux disease (GERD)
        - 1 for education in management of hematuria / urological emergencies
        - 1 for education in minor surgical procedures
    - * 2 written commitments:
        - 1 to not work in emergency departments until remedial education is successfully completed.
        - 1 to ensure that consent discussions are conducted prior to treatment and that these discussions are duly documented.
- *HPA*, section 33(4) practice investigation:
    - One motion passed to open a *33(4)* practice investigation
- 7 interviews

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:

Dr. Ryan McCallum, Chair

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REPORT TO BOARD

Inquiry Committee – Panel B

March 18, 2024

Attendance

Chair

- Dr. J. Wale

Members present

- Mr. Tarj Mann – Vice Chair
- Ms. Lorraine Argatoff
- Ms. Michelle Casavant
- Ms. Lainie Shore
- Mr. Lionel Yip
- Dr. John Soles
- Dr. Matthew Bagdan
- Dr. George Chang
- Dr. Doran Ksienski
- Ms. Janene Erickson*

* Part-time attendance

Regrets

- Dr. J. Kerrie
- Dr. D. Spooner
- Dr. T. Cordoni

Overview/summary

- 11 files naming 21 physicians; all concluded
- 5 of 21 physicians concluded with criticism
- The Inquiry Committee reviewed a request for reconsideration of a previous disposition. The Inquiry Committee reviewed the request of the subject physician and upheld the previously directed reprimand under section 36(1)(c)

- Direction to seek consent to remedial disposition, *Health Professions Act*, *section 36(1)*:
    - 1 file for specified education, this is the course that was directed:
        - Cultural Safety and Humility
- 4 interviews

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:
Dr. J. Wale, Chair

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REPORT TO BOARD

Inquiry Committee – Panel B

April 15, 2024

Attendance

Chair

- Dr. Jason Wale

Members present

- Mr. Tarj Mann – Vice Chair
- Ms. Michelle Casavant
- Ms. Lainie Shore
- Mr. Lionel Yip
- Dr. John Soles
- Dr. Teresa Cordoni
- Dr. Matthew Bagdan
- Dr. Doran Ksienski

Regrets

- Ms. Lorraine Argatoff
- Dr. George Chang
- Dr. Jeff Kerrie
- Dr. Devon Spooner

Overview/summary

- 11 files naming 16 physicians; 9 files concluded
- 4 of 16 physicians concluded with criticism
- The Inquiry Committee reviewed a request for reconsideration of a previous disposition. The Inquiry Committee reviewed the request of the subject physician and accepted the request to rescind the direction of a reprimand under section 36(1)(c).

- Direction to seek consent to remedial disposition, *Health Professions Act*, *section 36(1)*:
    - 1 for specified education, this is the course that was directed:
        - Screening and assessment of gynecological tumours
- *HPA*, *section 33(4)* practice investigations: 1
- 4 interviews

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:

Dr. Jason Wale, Chair

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REPORT TO BOARD

Inquiry Committee – Panel B

April 30, 2024

Attendance

Chair

- Mr. T. Mann

Members present

- Dr. J. Kerrie (Vice -chair)
- Dr. G. Chang
- Dr. S. Tsuchiya (Alternate)
- Dr. S. Teja (Alternate)
- Ms. L. Shore
- Ms. M. Casavant
- Ms. L. Argatoff

Overview/summary

- 6 files naming 7 physicians; all concluded
- 5 of 7 physicians concluded with criticism
- Direction to seek consent to remedial disposition, *Health Professions Act*, section 36(1):
    - 2 for specified education:
        - 2 for education in documentation
- *HPA*, section 33(4) practice investigations: 1
- 2 interviews

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:

Mr. T. Mann, Chair

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REPORT TO BOARD

Inquiry Committee – Panel B

May 13, 2024

Attendance

Chair

- Dr. Jason Wale

Members present

- Mr. Tarj Mann – Vice Chair
- Ms. Lainie Shore
- Ms. Lorraine Argatoff
- Ms. Michelle Casavant
- Mr. Lionel Yip
- Dr. Matthew Bagdan
- Dr. John Soles
- Dr. Devin Spooner
- Dr. Teresa Cordoni
- Dr. Jeff Kerrie
- Dr. George Chang
- Dr. Doran Ksienski
- Dr. Salina Teja *
- Ms. Kim Brooks *

* Part-time attendance

Overview/summary

- 13 files naming 19 physicians; 12 files concluded
- 7 of 19 physicians concluded with criticism

- The Inquiry Committee reviewed two requests for reconsideration of previous dispositions.
    - The Inquiry Committee reviewed the request of the subject physician and accepted the request to rescind the direction of an undertaking under section 36(1)(d).
    - The Inquiry Committee reviewed the request of the subject physician and accepted the proposed changes to an undertaking under section 36(1)(d).
- Direction to seek consent to remedial disposition, *Health Professions Act*, *section 36(1)*:
    - 3 for specified education, these are the courses that were directed:
        - 1 for education in paediatric DVT's
        - 1 for education in palliative care
        - 1 for education in infectious diseases
        - 1 for education in patient communication
- Consent for a written commitment to abide by the *Virtual Care* (9.0) standard
- *HPA*, *section 33(4)* practice investigations: 1
- 3 interviews

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:
Dr. J. Wale, Chair

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REPORT TO BOARD

Inquiry Committee – Panel B

February 20, 2024 – 9:00 am

Attendance

Chair

- Ms. Lainie Shore

Members present

- Dr. Devin Spooner
- Ms. Lorraine Argatoff
- Dr. Zuhair Ladha

Overview/summary

- 5 files naming 3 registrants (1 physician, 2 podiatric surgeons)
- 1 of 1 physician concluded with criticism
- 2 of 2 podiatrists concluded with criticism
- Direction to seek consent to remedial disposition, *Health Professions Act*, *section 36(1)*:
    - 5 files for specified education, these are the courses that were directed:
        - medical record keeping for podiatric surgeons
        - CMPA's Theatre Arts (surgical safety) course or equivalent
        - ischemic/vascular considerations in podiatric practice
        - physical examination of the vascular system as well as appropriate medical record keeping of the vascular examination relevant to podiatric surgery
        - a review of pediatric considerations in podiatric surgery
        - education in emergency medicine specific to ischemic and vascular injuries of the foot
- Consent for a written commitment to ensure compliance with care coverage outside of regular office hours

- 5 files have resulted in a practice investigation of a podiatric practice
- Concluding interviews with three registrants

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:

Ms. Lainie Shore, Chair

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REPORT TO BOARD

Inquiry Committee – Panel C

February 21, 2024

Attendance

Chair

- Dr. L.K Wong

Members present

- Ms. P.A McDonald (Vice-Chair)
- Mr. M. Thompson
- Dr. K.E. Bennett
- Dr. R. McCallum
- Ms. M.L. Casavant (Alternate)
- Ms. J. Erickson (Alternate)*

  * *Indicates part-time attendance*

Regrets

- Dr. S. Sohmer
- Ms. K. Brooks
- Dr. N.E. Severin

Overview/summary

- 15 files naming 17 physicians; 14 concluded, 1 deferred
- 14 of 17 physicians concluded with criticism
- Direction to seek consent to remedial disposition, *Health Professions Act*, *section 36(1)*:
  - 3 for specified education:
    - 2 for the College's *Medical Record Keeping for Family Physicians* course

        - 1 for education in prescribing
        - 1 for education in professionalism
        - 1 for education in communication
        - 2 for education in patient-centred communication
    - 3 formal undertakings:
        - to ensure compliance with the College practice standard *Advertising and Communication with the Public*
    - 1 written commitment:
        - to not alter medical records after receipt of a complaint
    - 3 reprimands:
        - for failing to comply with the College practice standard *Advertising and Communication with the Public*
- *HPA*, *section 33(4)* practice investigations:
    - One motion passed to open a *33(4)* practice investigation
- 4 interviews

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:

Dr. L.K Wong, Chair

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REPORT TO BOARD

Inquiry Committee – Panel C

March 19, 2024

Attendance

Chair

- Dr. L.K Wong*

  * *Indicates part-time attendance*

Members present

- Ms. P.A McDonald (Vice-Chair)
- Mr. M. Thompson
- Ms. K. Brooks
- Ms. H. Muller (Alternate)*
- Dr. N.E. Severin
- Dr. R. McCallum
- Dr. M. Bagdan (Alternate)*
- Dr. Z. Ladha (Alternate)*

  * *Indicates part-time attendance*

Regrets

- Dr. S. Sohmer
- Dr. K.E. Bennett

Overview/summary

- 13 files naming 12 physicians and 1 podiatrist; 12 concluded
- 10 of 12 physicians/podiatrists concluded with criticism
- Direction to seek consent to remedial disposition, *Health Professions Act*, *section 36(1)*:

    - 1 for specified education in communication
    - 2 written commitments:
        - to comply with College practice standard *Advertising and Communication with the Public*
        - to comply with College practice standard *Medical Certificates and Other Third-party Reports*
- 8 interviews

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:

Dr. L.K Wong, Chair

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REPORT TO BOARD

Inquiry Committee – Panel C

April 30, 2024

Attendance

Chair

- Mr. T. Mann

Members present

- Dr. J. Kerrie (Vice-chair)
- Dr. G. Chang
- Dr. S. Tsuchiya (Alternate)
- Ms. L. Shore
- Ms. M. Casavant
- Ms. L. Argatoff

Overview/summary

- 5 files naming 5 physicians; all concluded
- 3 of 5 physicians concluded with criticism
- Direction to seek consent to remedial disposition, *Health Professions Act*, section 36(1):
    - 1 for specified education:
        - for education in communication
    - 1 written commitment, to abide by College Standard, on *Advertising and Communication with the Public*
- 1 interview

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:

Mr. T. Mann, Chair

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REPORT TO BOARD

Inquiry Committee – Panel C

May 14, 2024

Attendance

Chair

- Dr. L.K Wong

Members present

- Ms. P.A McDonald (Vice-Chair)
- Ms. K. Brooks
- Mr. M. Thompson
- Dr. K.E. Bennett
- Dr. N.E. Severin
- Dr. R. McCallum
- Dr. S. Sohmer
- Ms. M. Casavant (Alternate)

Regrets

- Nil

Others present

- Ms. Targol Salehi (Observer)

Overview/summary

- 10 files naming 12 physicians; all concluded
- 8 of 12 physicians concluded with criticism
- Direction to seek consent to remedial disposition, *Health Professions Act*, *section 36(1)*:
    - 4 for specified education:

        - 2 for education in cultural safety and humility
        - 1 to review the College practice standard *Indigenous Cultural Safety, Cultural Humility and Anti-racism,* and learning resources
        - 1 for the College's *Medical Record Keeping for Family Physicians* course
        - 1 for education in medical record keeping for specialists
        - 1 for education in the completion of the Form 4
        - 1 for education in medical ethics
        - 1 for education in ethics and discrimination
        - 1 for education in communication
    - 2 formal undertakings:
        - to adhere to the College practice standard *Sale and Dispensing of Drugs*
        - to provide medical records in a timely manner
    - 1 written commitment:
        - to adhere to the *CMA Code of Ethics and Professionalism*
- *HPA*, *section 33(4)* practice investigations: 2
- 6 interviews

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:

Dr. L.K Wong, Chair

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REPORT TO BOARD

Inquiry Committee Panel D

March 14, 2024

Attendance

Chair

- Dr. Luay Dindo*

Members present

- Dr. Andrew Sear, Vice-chair
- Ms. Christine Evans*, Public Representative
- Ms. Pamela MacDonald*, Alternate Public Representative

*Represents part-time attendance

Overview/summary

- 77 files naming 92 physicians
  - 1 file concluded under s. 32(3)(b)
  - 76 files concluded under s. 32(3)(c)
- 31 of 92 physicians concluded with criticism
- Additional steps as directed by the Inquiry Committee
  - 7 concluding interviews
- Passed 13 resolutions to initiate an investigation as per section 33(4) of the *Health Professions Act*
- Passed 1 resolution to hold a file in abeyance until a registrant returns to practice
- Reconsidered 2 files

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of,
Dr. Luay Dindo, Committee Chair

COLLEGE OF PHYSICIANS AND SURGEONS OF BRITISH COLUMBIA

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REPORT TO BOARD

Inquiry Committee Panel D

May 28, 2024

Attendance

Chair

- Dr. Luay Dindo

Members present

- Dr. Andrew Sear, Vice-chair
- Ms. Christine Evans, Public Representative

Overview/summary

- 87 files naming 104 physicians
  - 2 files concluded under s. 32(3)(a)
  - 85 files concluded under s. 32(3)(c)
- 36 of 104 physicians concluded with criticism
- Additional steps as directed by the Inquiry Committee
  - 14 concluding interviews
  - 5 directions to seek consent to specific education
    - 1 for Medical Record Keeping
    - 2 for Successful Team Interactions
    - 2 for Communication for Health-care Professionals
- Passed 5 resolutions to initiate an investigation as per section 33(4) of the *Health Professions Act*

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of,
Dr. Luay Dindo, Committee Chair

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REPORT TO BOARD

Panel E Inquiry Committee

March 20, 2024

Attendance

Chair

- Mr. B. Penner, KC.

Members present:

- Dr. F. Dossa (vice-chair)
- Dr. S. Tsuchiya

Overview/summary

21 files were reviewed; 7 closed;

- 1 file concluded with a referral to the Board/Executive Committee for consideration of a Skill and Knowledge assessment.
- 4 files concluded with no further action.
- 2 files concluded with a written commitment;
    - 1 written commitment;
        - to limit patient volumes in [his] office to no more than six per hour and 35 per day and continue quality improvement efforts with respect to his patient records.
    - 1 written commitment;
        - to adopt a formal charting format and document history and examination in a more fulsome manner.

Of the 14 not concluded, next steps included;

- 6 files request that the registrant undertake further education, prior to reassessment.
- 6 files will proceed to an off-site chart review.

- 8 files will proceed to an on-site practice investigation.
- 1 file will proceed with an investigative interview.

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:
Mr. B. Penner, KC, Chair

COLLEGE OF PHYSICIANS AND SURGEONS OF BRITISH COLUMBIA

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REPORT TO BOARD

Panel E Inquiry Committee

May 1, 2024

Attendance

Chair

- Mr. B. Penner, KC.

Members present:

- Dr. R. McCallum (vice-chair)
- Dr. S. Tsuchiya

Regrets

- Dr. F. Dossa

Overview/summary.

18 files were reviewed: 11 closed:

- 6 files were closed with no further action.
- 1 file closed with a concluding interview.
- 4 files were concluded with a written commitment;
    - 1 written commitment;
        - to *'limit patient volume and to comply with the practice standard Care Coverage Outside Regular Office Hours'*.
    - 2 written commitments to;
        - *maint*ain *medical records to the standard expected under the College Bylaw 3- 5.*
    - 1 written commitment;
        - to *continue to limit patient volume to 35 per day.*

Of the 7 files not concluded, next steps included;

- 5 files will proceed to an off-site chart review.
- 5 files will proceed with an investigative interview.
- 2 files request that the registrant undertake further education and/or a remedial plan
- 2 files will proceed with an on-site practice investigation.
- 1 file will seek a written commitment to;
    - *meet the College standards for medical record keeping*.
- 1 file will seek a written commitment to;
    - *not accept any new patients.*

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:
Mr. B. Penner, KC, Chair

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REPORT TO BOARD

Prescription Review Panel (Open)

March 1, 2024

Attendance

Chair

- J. Dyson

Members present

- Dr. W. Woodfield
- Dr. P. Bach
- Dr. M. Butterfield
- Dr. K. Haddow
- M. Sam
- A. Alladina

Regrets

- Dr. A.D. Wardman

Others present

- Dr. D. Unger
- Dr. R. Chadha
- Dr. K. Hossack
- M. Horton
- M. Turcotte

Overview/summary

The panel reviewed three new business files.

Of the files reviewed:

- Two files will be directed to arrange a stage 7 second interview with the deputy registrar and medical consultant.

- One file will be directed to arrange a stage 5 first interview with the deputy registrar, senior medical consultant, and expert panel member. The registrant will also be required to complete additional educational courses.

Jane Dyson

J. Dyson
Prescription Review Panel Chair

JD/mt

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Committee Report to the Board – Open

REGISTRATION COMMITTEE

Details

Meeting date:	March 28, 2024
Committee chair:	Dr. Thelma O'Grady (Public Member)
Committee members in attendance:	Dr. Luay Dindo David Goldsmith (Public Member) Dr. Isabelle Hughan Dr. Anneline Du Preez

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The meeting was held in person.

Consideration of Substantial Equivalency for Conditional-Practice Setting Registrants

The Registration Committee (the Committee) of the College of Physicians and Surgeons of British Columbia (the College) was requested to review and consider whether 24 registrants in the conditional – practice setting class would be eligible for registration in the full – specialty class section 1-15(3) of the College Bylaws (the Bylaws) made under the Health Professions Act (HPA).

Provided for the Committee's review were 24 registrants in the conditional – practice setting class who would be eligible for the restricted class and hold Royal College of Physicians and Surgeons of Canada (RCPSC) certification in their primary specialty, but do not hold Licentiate of the Medical Council of Canada (LMCC) designation. Each registrant had previously been granted a resolution that allows the College to waive that resolution's requirement to obtain LMCC designation for ongoing licensure, subject to the registrant obtaining RCPSC certification.

Under section 2-12(1)(c)(i) of the Bylaws, physicians who hold primary specialty certification from the RCPSC are eligible for registration and licensure in the full – specialty class, provided the remaining requirements of section 2-12(1) are met.

Therefore, the Committee was requested to consider approving each of these 24 registrants for transfer to the full – specialty class under section 1-15(3).

The Committee exercised its discretion under section 1-15(3) of the Bylaws, and found substantial equivalency for each of the 24 registrants for transfer to the full – specialty class.

Policy Update - Requirement for a Certificate of Completion of Training (CCT) for International Medical Graduate in the Provisional Class

The Committee was asked to remove the Certificate of Eligibility for General Practitioner Registration (CEGPR), United Kingdom from alternative certificates not accepted in lieu of a CCT to alternative certificates accepted. The Committee was asked to review the CEGPR, on a case-by-case basis, in lieu of a CCT based on a previous decision where the Committee approved the CEGPR in lieu of a CCT in exceptional circumstances.

The Committee approved the policy update as written.

Thelma O'Grady
Chair

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Committee Report to the Board – Open

REGISTRATION COMMITTEE

Details

Meeting date:	May 7, 2024
Committee chair:	Dr. Thelma O'Grady (Public Member)
Committee members in attendance:	Dr. Luay Dindo David Goldsmith (Public Member) Dr. Andrew MacNeily Dr. Shannon McDonald Dr. Anneline Du Preez

---

The meeting was held in person.

Policy Update – Requirement for a Certificate of Completion of Training for International Medical Graduate in the Provisional Class

The Registration Committee (the Committee) was requested to amend its policy, *Requirement for a Certificate of Completion of Training for International Medical Graduate in the Provisional Class* (the Policy), to accept a certificate of completion of training (CCT) in a Royal College of Physicians and Surgeons of Canada (RCPSC) subspecialty, where that subspecialty is considered a primary specialty in the physician's RCPSC-accredited training jurisdiction, without the requirement to provide a CCT in the equivalent RCPSC primary specialty.

The Committee acknowledged that there are jurisdictions which designate as primary specialties disciplines that the RCPSC identifies as subspecialties. Physicians who have completed all necessary training in these jurisdictions for recognition as a subspecialist are effectively awarded only one CCT in an RCPSC subspecialty and not the equivalent RCPSC primary specialty.

The Committee also acknowledged that they recently accepted a CCT for forensic psychiatry with a RCPSC ruling for psychiatry as meeting the requirements set out in section 2-16(1)(b)(iii) on a case-by-case basis. Therefore, the Committee was requested to consider amending the Policy to accept a subspecialty CCT only, accompanied by RCPSC rulings in the equivalent primary and subspecialty for the purposes of registration and licensure in the provisional – specialty class to practice as a specialist in the subspecialty.

The Committee approved the updated policy as written:

> That the Committee amends its policy, *Requirement for a Certificate of Completion of Training for International Medical Graduate in the Provisional Class*, to include acceptance of a certificate of completion of training (CCT) in a Royal College of Physicians and Surgeons of Canada (RCPSC) subspecialty, where that subspecialty is considered a primary specialty in the physician's RCPSCaccredited training jurisdiction, without the requirement to provide a CCT in the equivalent RCPSC primary specialty.
>
> Applicants to the provisional – specialty class who have completed the entirety of their postgraduate training in an RCPSC-accredited jurisdiction where their RCPSC subspecialty is considered a primary specialty will be required to provide acceptable rulings of RCPSC examination eligibility in the RCPSC primary specialty and subspecialty.

Policy Update – Eligibility in the Provisional Class: RCPSC Rulings Acceptable to the Registration Committee

The Committee was requested to amend its policy, *Eligibility in the Provisional Class: RCPSC Rulings Acceptable to the Registration* (the Policy) to include RCPSC ruling to sit the subspecialty examinations under the Subspecialty Examination Affiliate Program (SEAP) as an acceptable ruling under section 2-16(1)(b)(iii) of the College Bylaws (the Bylaws) for eligibility to be registered and licensed in the provisional – specialty class, subject to receipt of a letter of commitment from the physician that they will practice in their subspecialty only.

The Committee acknowledged that an internationally-trained subspecialist may be eligible to apply for an assessment of their RCPSC examination eligibility through the SEAP based on completion of subspecialty training only. If the subspecialist is granted eligibility for the RCPSC examinations, this is granted for a 5-year period and that if the physician passes the examination, the physician is provided with a RCPSC attestation of its successful completion and invited to join the RCPSC as a Subspecialist Affiliate. Affiliate status allows the physician to maintain engagement with the RCPSC and to participate in the Maintenance of Certification (MOC) Program, but it does not confer RCPSC certification.

Therefore, the Committee was requested to consider accepting SEAP eligibility as a pathway to registration and licensure in the provisional – specialty class under section 2-16(1)(b)(iii) of the College Bylaws, subject to the physician limiting their scope of practice to their subspecialty only.

The Committee approved the updated policy as written:

> That the Committee amends its policy, Eligibility in the Provisional Class: RCPSC Rulings Acceptable to the Registration, to include a Royal College of Physicians and Surgeons (RCPSC) ruling to sit the subspecialty examinations under the Subspecialty Examination Affiliate Program (SEAP) as an acceptable ruling under section 2-16(1)(b)(iii) of the College Bylaws (the Bylaws) for eligibility to be registered and

licensed in the provisional – specialty class, subject to receipt of a letter of commitment from the physician that they will practice in their subspecialty only.

Thelma O'Grady
Chair

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REPORT TO BOARD

Physician Practice Enhancement Panel (Open)

March 14, 2024

Attendance

Chair

- Dr. J. Kingsley

Members present

- Mr. T. Mann (Vice-chair)
- Dr. K. Eva (PhD) (public representative)
- Dr. I. Fadyeyeva
- Dr. D. Holowenko
- Dr. C.D. Icton
- Dr. D. McLachlan
- Dr. H. Postowski (DPM)
- Dr. S. Tsuchiya
- Ms. A. Wainwright (RN) (public representative

Regrets

- Ms. J. Berry (public representative)
- Dr. F. Chan (DPM)
- Dr. D. Haslam
- Dr. B.O. Kassen
- Dr. L. Mackenzie

Staff present

- Dr. M. Murray, Deputy Registrar
- Ms. N. Castro, director, PPEP
- Dr. E. Knell, medical advisor, PPEP
- Ms. M. Hendrix, Administrative Coordinator, PPEP

Regrets

- none

Presenters/others

- Dr. Eva Knell, Medical Advisor, PPEP
- Dr. C. Hall, incoming Deputy Registrar (attending as an observer)

Recorder of minutes

- Ms. M. Hendrix, Administrative Coordinator, PPEP

Overview/summary

The Panel reviewed the following **new business arising** since its last meeting:

- New Assessment Reviews: 5
- Assessment Follow-up: 4
- Office assessments – review of systemic concerns: 0
- Chart submission review reports:
  - Reports for discussion and action: 3
  - Reports with further action directed:3
  - Reports with no further action required: 11
- Outcome letters sent:
  - FY 2019-2020 = 2
  - FY 2020-2021 = 1
  - FY 2021-2022 = 8
  - FY 2022-2023 = 84
  - FY 2023-2024 = 26
- Medical advisor calls made: 4
- Referrals made to the Prescription Review Program (PRP): 9
- Resolutions passed to refer registrants to the Inquiry Committee due to practice concerns: 1

The Panel was provided with an update on the status of **assessments initiated between March 1, 2023 and February 29, 2024 as follows:**

- 500 assessments in total were initiated (does not include PPEP-lite initiation goal of 100)
- 22 registrants have been sent their outcome letter + PPEP report in total, to date
- *27 registrants were sent their outcome letter + PPEP report since the last Panel meeting*
- 2 assessments were partially completed
- 10 assessments were cancelled
- 12 are in the process of being sent their outcome letter
- 454 assessments are in progress (awaiting outstanding components)

The Panel was provided with an update on the status of **assessments initiated between March 1, 2022 and February 28, 2023 as follows:**

- 500 assessments have been initiated, to date (Goal = 500)
- 306 registrants have been sent their outcome letter + PPEP report in total, to date
- *80 registrants were sent their outcome letter + PPEP report since last Panel meeting*
- 89 assessments are partially completed
- 6 assessments were cancelled
- 12 are in the process of being sent their outcome letter
- 87 assessments are in progress (awaiting outstanding components)

The Panel was provided with an update on the status of **assessments initiated between March 1, 2021 and February 28, 2022 as follows:**

- 472 assessments have been initiated, to date (Goal = 500)
- 355 registrants have been sent their outcome letter + PPEP report in total, to date
- *0 registrants have been sent their outcome letter + PPEP report since last Panel meeting*
- 89 assessments were partially completed
- 16 assessments were cancelled
- 4 are in the process of being sent their outcome letter
- 8 assessments are in progress (awaiting outstanding components)

POMDRA

The Panel was provided with an update on the status of the Physician Office Medical Device Reprocessing Assessments (POMDRA) initiative **from March 1, 2023 to February 16, 2024:**

- Pre-assessment questionnaires (PAQs) sent to registrants, to date: 302
- Cases initiated (eligible to be assessed): 209
- Phone assessments completed: 0
- Of the goal of 225 on-site/remote assessments:
  - Number completed: 189
  - Number booked: 9 (remote assessment scheduled, awaiting completion)
  - To be initiated: 27
- Outcome summary for the 200 cases completed and closed:
  - Reusable: 177
  - Disposable: 18
  - Stopped: 5

Respectfully submitted,

Dr. J. Kingsley
Chair

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REPORT TO BOARD

Diagnostic Accreditation Program Committee (Open)

March 27, 2024

Attendance

Chair

- Dr. Heather Clark*

Members

- Mariana Diacu
- Dr. B.A. Bradshaw *
- Dr. Brenda Farnquist*
- Tim Rode*
- Lisette Vienneau*

Regrets

- Dr. Romina Reyes*
- Dr. W. Yap*

College Staff

- Dr. Michael Murray, Deputy Registrar, Accreditation Programs and Quality Assurance
- Sara Camano, Director, Accreditation Programs
- Colin Carey, Manager, Laboratory Medicine, Accreditation Programs
- Sharan Manship, Manager, Diagnostic Services, Accreditation Programs
- Jennifer Francoeur, Accreditation Coordinator, Accreditation Programs
- Jamie Davidson, Accreditation Assessment Officer
- Emily Charles, Accreditation Research and Development Officer
- Amanda Kwan, Accreditation Assessment Officer

Guests:

- Dr. Christine Hall

Overview/summary

The following summarizes the briefing notes submitted to the DAP Committee, including but not limited to full accreditation, provisional accreditation, and nonconformance extensions, during the period November 18, 2023, to March 8, 2024 for which quorum was achieved. All were ratified by the DAP Committee.

Category	Sub-Category	Number
Laboratory Medicine	Medical Laboratories	51
	Specimen Collection Sites	16
Diagnostic Services	Diagnostic Imaging	35
	Diagnostic Echocardiography and echocardiography	3
	Neurodiagnostics	3
	Pulmonary Function	10
	Polysomnography	1
	Home Sleep Apnea Testing	12
Other	Non-Facility-Specific Briefing Notes (e.g. standards and management/operations)	5

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REPORT TO BOARD

NON-HOSPITAL MEDICAL AND SURGICAL FACILITIES ACCREDITATION PROGRAM (NHMSFAP) PATIENT SAFETY INCIDENT REVIEW PANEL (OPEN)

March 21, 2024

Attendance

Panel Chair

- Dr. Roanne L. Preston*

Members present

- Dr. Ronald R. Abrahams (Vice Chair)*
- June M. Barens*
- Paula Foster*
- Dr. Cedric Ho*
- Dr. Peter A. Lennox*
- Dr. Kenneth Seethram*
- Dr. K. Briar Sexton*
- Kenneth Stewart*
- Lionel Yip*

Regrets

- Dr. Christopher Nguan*
- Andrew Wray*

*Voting member

Staff present

- Dr. Michael Murray, deputy registrar. AP
- Sara Camano, director, AP
- Krista Fairweather, QI Lead, AP
- Jennifer Levett, manager, accreditations, NHMSFAP
- Tracy Steele, manager, NHMSFAP
- Linh Vu, accreditation assessment officer, NMHSFAP
- Neha Korgaonkar, accreditation coordinator, NHMSFAP
- Jennifer Francouer, administrative coordinator, AP
- Aliya Murphy, accreditation coordinator, NHMSFAP

Guest

- Dr. Christine Hall

Overview/summary

Patient Safety Incidents

1. Three patient safety incident reviews were brought forward from the November 30, 2023, NHMSFAP Patient Safety Incident Review Panel meeting.
    - The panel was satisfied with the facility's responses and no further action was required.
2. Twenty-five new patient safety incident reports were reviewed.
3. Eighteen patient safety incident reports were determined to be recognized complications and/or managed appropriately.
4. Seven patient safety incident reviews required further discussion/action by the panel.

Action items arising from the panel review included letters with recommendations to improve patient safety and requests for responses from physicians and medical directors.

Respectfully submitted,

Dr. Roanne Preston
Committee Chair

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REPORT TO BOARD

Patient Relations, Professional Standards and Ethics Committee

March 19, 2024

Attendance

Chair

- Ms. Shirley Ross

Members present

- Ms. Shirley Ross
- Ms. Lori Charvat
- Dr. Ronald Abrahams
- Dr. Shannon McDonald
- Ms. Michelle Casavant
- Dr. Brenda Wagner

Others present

- Dr. Patrick D. Rowe (Registrar and CEO)
- Mr. Graeme Keirstead (Deputy Registrar, Chief Legal Counsel, Legal)
- Ms. Susan Prins (Director, Communications and Public Affairs)
- Ms. Hope Moir (Policy Analyst, Communications and Public Affairs)
- Ms. Bria Luis (Policy Coordinator, Communications and Public Affairs

Overview/summary

The PRPSE Committee met on March 19, 2024. First, College staff reviewed the preliminary results from the registrant focus groups pertaining to the *Indigenous Cultural Safety, Cultural Humility and Anti-racism* practice standard evaluation. Two virtual focus groups were held: one with Indigenous registrants, facilitated by an Indigenous physician with an Elder present, and one with non-Indigenous registrants, facilitated by an external consultant. Both focus

groups indicated that more registrant education and training is needed. Next steps involve conducting a detailed analysis of the findings from the entire evaluation and putting forth recommendations.

Next, College staff updated the Committee on the *Access to Medical Care Without Discrimination* practice standard evaluation. College staff conducted eight interviews with various community groups to discuss barriers to accessing health care for the populations these groups serve. The next steps involve revising the practice standard and continuing to engage with the community groups to develop an equity toolkit.

The Committee received an update on changing the *Referral-Consultation Process* professional guideline into a practice standard to include more 'must' language. After some discussion, the Committee agreed to incorporate the new language and proceed with the shift to a practice standard. It was noted that consultation with the profession would be put on hold due to the current political environment.

College staff provided a brief update on the *Medical Assistance in Dying* practice standard. The updated practice standard incorporated minor revisions to ensure the standard remains current.

Next, the Committee was informed that the *Ethical Principles for Artificial Intelligence in Medicine* interim guidance document was provided to the Board at its February meeting with one amendment. Following a thoughtful discussion, the Committee endorsed the recommended amendment from the Board.

Mr. Keirstead provided the Committee with an update on the *Treatment of Incarcerated Patients in Isolation* practice standard development. The Committee reviewed the Statement of Law document, which outlines practice standard requirements that align with the *CMA Code of Ethics and Professionalism* and the *Madela Rules*.

Last, the Committee received a brief update on the BC-PAN and its work in assisting smaller colleges, C4 and C7, as they prepare for their amalgamation.

Issues and Accomplishments

Agenda items

1. Territorial Acknowledgement
2. Call to order and chair's remarks
3. Declaration of conflict of interest
4. Adoption of the agenda
5. Adoption of the minutes
6. Unfinished Business

    6.1 *Indigenous Cultural Safety, Cultural Humility and Anti-racism* practice standard evaluation update

    6.2 *Access to Medical Care Without Discrimination* practice standard update

    6.3 *Referral-Consultation Process* practice standard update

    6.4 *Medical Assistance in Dying* practice standard update

6.5 *Artificial Intelligence and Medical Regulation* interim guidance update

6.6 *Treating Incarcerated Patients in Isolation* practice standard update

7. New business

   7.1 BC Public Advisory Network (BC-PAN) meeting update

8. Next Meeting

Accomplishments

Focus for the Future

The PRPSE Committee will meet again on June 3, 2024.

Shirley Ross
Committee Chair

CPS BC COLLEGE OF PHYSICIANS AND SURGEONS OF BRITISH COLUMBIA

Registration & Licensing

Tina Cheng, manager, independent practice team

Jessica Ostrowski, registration manager

Jonathan Norton, manager, compliance and assessments

Corinne de Bruin, executive director, registration

May 30, 2024

Agenda

1. *Health Professions Act and the Health Professions and Occupations Act*
2. Registration Committee
3. Registration and Licensure
4. Independent Practice
5. Educational Classes
6. Certificates of Professional Conduct
7. Registration Compliance
8. Annual Licence Renewal
9. Assessments
10. Other registration accountabilities
11. What's new in registration

Legislative Authority

- ***Health Professions Act (HPA)*:**
  - Section 16 (2)(i.1) - Duty and objects of a college
    - College needs to establish and employ registration procedures that are **transparent, objective, impartial and fair**
  - Section 19 - Bylaws for college
    - Establish conditions or requirements for the registration of a person as a member of the college, including **academic standards, competencies, and good character evidence**
    - Grants the registration committee the discretion to determine **if a person's knowledge, skills and abilities are substantially equivalent** to standards of academic or technical achievement and grant registration on that basis
- **Undergoing transition to *Health Professions and Occupations Act (HPOA)***

Registration Committee

- **Statutory committee reporting to the board**
  - At least six persons appointed by the board, at least one-third of whom must be public representatives
  - Minimum of four registrants, two of whom must be elected board members (under *HPA)*
- **Eligibility decisions for provisional registrants and complex cases**
- **English language proficiency determinations**
- **Complex cases – outstanding serious matter in other jurisdiction**
- **Summative Assessment review**
- **Equivalency determinations**

Health Professions Review Board

- **In 2023/2024, the College's Registration Committee issued 358 reviewable registration decisions**
  - 7 applications to HPRB for review of registration decisions (2023/2024)
  - 2023 HPRB related actions (can relate to earlier years when review filed)
    - 1 interim decision
    - 6 final decision:
      - 5 registrants withdrew their application
      - 1 HPRB determination that it lacks jurisdiction to review matter

Registration and Licensure

- **Three broad classes of registration and licensure**
  - Full,
  - Provisional, and
  - Others (often have limits and conditions attached)
- **All registration decisions other than approval of full registration are subject to review by the registration committee**
  - Some decisions are delegated via policy
- **Registration committee decisions are subject to review by the Health Professions Review Board (HPRB)**

Registration and Licensure - Classes

- Full (family, specialty, podiatric surgeon)
- Provisional (family, specialty)
- Restricted (family, specialty)
- USA certified (internal medicine, emergency medicine, pediatrics)
- Osteopathic
- Surgical assistant
- Associate physician (acute care, community primary care)
- Visitor
- Emergency (family, specialty)
- Assessment
- Academic
- Administrative
- Educational classes

Registration and Licensure - Applications

- **Summary of section 2-2 of the College Bylaws**
- **An applicant must complete and deliver an application for registration form established by the registrar**
- **An applicant must:**
  - provide evidence of ID, experience, good professional conduct, and good character (references)
  - provide certificates of professional conduct from each jurisdiction where the applicant worked or trained since earning their medical degree – dated within 60 days of the date of application
  - provide satisfactory evidence of currency in clinical practice under section 2-8 of the bylaws

Registration and Licensure - Applications

- **Summary of section 2-2 of the College Bylaws cont'd:**
  - provide documentary proof that the applicant meets all the requirements of the class of registration applied for
  - demonstrate proficiency in English to the satisfaction of the registration committee
  - provide a signed consent to a criminal record check form under the Criminal Records Review Act
  - provide proof of professional liability coverage or protection, and pay the applicable fees (registration and licensure)
  - practise medicine within the scope of their training and experience and within the competencies expected for this scope of practice

Registration and Licensure – PRA-BC program

- **Gives a pathway to full licensure in BC for International Medical Graduate (IMG) FPs who are not otherwise eligible for the provisional – family class**
- **In 2024 PRA-BC to have up to 96 IMG FPs**
    - Currently 42 in the assessment class
- **Competency-based assessment modelled after pan-Canadian standards and processes**
    - 12 week clinical field assessment in health authority-designated community
- **Successful candidates eligible for provisional class and required to complete a three year return of service**

PRA-BC
Practice Ready Assessment - Physicians for BC

Registration and Licensure - *Canadian Free Trade Agreement*

- **Supporting mobility across provinces and territories for certified occupations**
- **Restricted and provisional classes of registration *may* be mobile, most are not**
- **Statistics since June 1, 2009 (to May 13, 2024)**
    - Total currently actively registered under *CFTA* **273**

Registration and Licensure - Educational classes

- **Medical student**
  - Includes UBC medical students, visiting electives through UBC and independent
- **Postgraduate resident**
  - Clinical associate subcategory
- **Postgraduate resident elective**
- **Postgraduate fellow**
- **Postgraduate trainee**
- **Clinical observer**

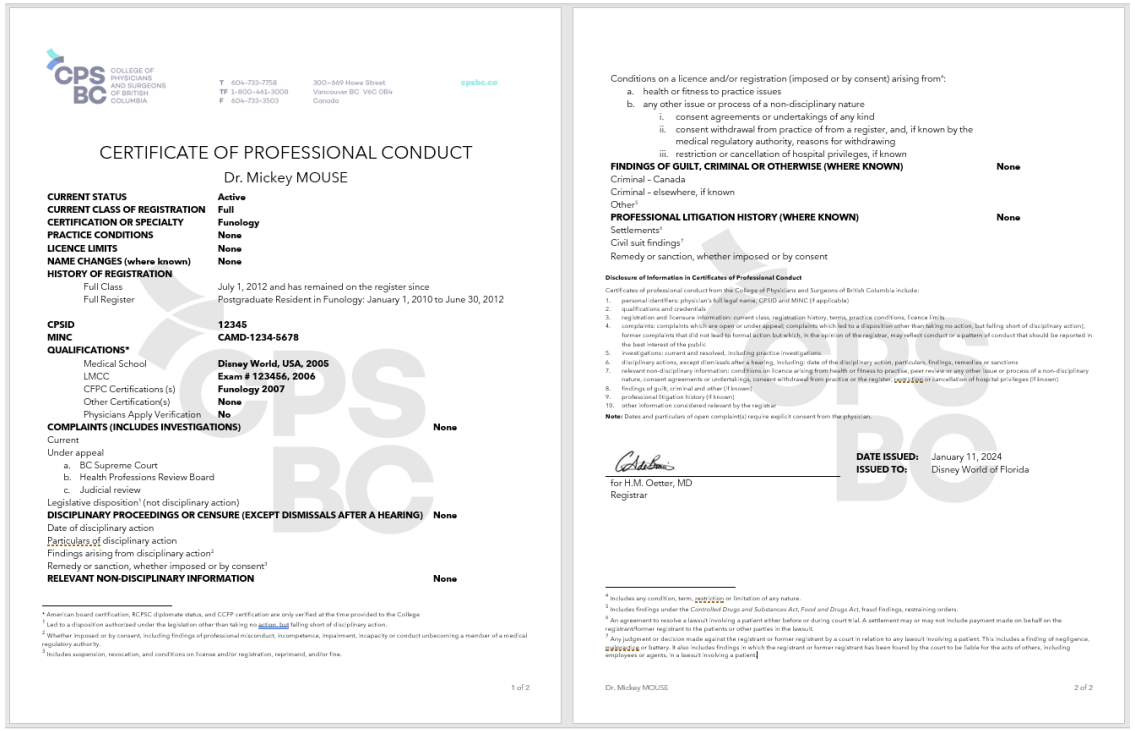
Registration and Licensure - Educational classes

- Data correction and collection
- Medical practice closures
- Physician resignation/retirement
- Retraining

Certificates of Professional Conduct

- **Professional document which confirms a registrant's full registration history, credentials and standing with the College.**

Year	Number of certificate requests		
	BC health authority requests	Other requests	Total
2021	2,135	1,920	4,055
2022	2,259	2,219	4,478
2023	1,975	2,054	4,029



CERTIFICATE OF PROFESSIONAL CONDUCT

Dr. Mickey MOUSE

CURRENT STATUS Active
CURRENT CLASS OF REGISTRATION Full
CERTIFICATION OR SPECIALTY Funology
PRACTICE CONDITIONS None
LICENCE LIMITS None
NAME CHANGES (where known) None
HISTORY OF REGISTRATION
Full Class — July 1, 2012 and has remained on the register since
Full Register — Postgraduate Resident in Funology: January 1, 2010 to June 30, 2012

CPSID 12345
MINC CAMD-1234-5678
QUALIFICATIONS*
Medical School — Disney World, USA, 2005
LMCC — Exam # 123456, 2006
CPPC Certifications (s) — Funology 2007
Other Certification(s) — None
Physicians Apply Verification — No
COMPLAINTS (INCLUDES INVESTIGATIONS) None
Current
Under appeal
a. BC Supreme Court
b. Health Professions Review Board
c. Judicial review
Legislative disposition[1] (not disciplinary action)
DISCIPLINARY PROCEEDINGS OR CENSURE (EXCEPT DISMISSALS AFTER A HEARING) None
Date of disciplinary action
Particulars of disciplinary action
Findings arising from disciplinary action[2]
Remedy or sanction, whether imposed or by consent[3]
RELEVANT NON-DISCIPLINARY INFORMATION None

Conditions on a licence and/or registration (imposed or by consent) arising from[4]:
a. health or fitness to practice issues
b. any other issue or process of a non-disciplinary nature
i. consent agreements or undertakings of any kind
ii. consent withdrawal from practice of from a register, and, if known by the medical regulatory authority, reasons for withdrawing
iii. restriction or cancellation of hospital privileges, if known

FINDINGS OF GUILT, CRIMINAL OR OTHERWISE (WHERE KNOWN) None
Criminal - Canada
Criminal - elsewhere, if known
Other[5]
PROFESSIONAL LITIGATION HISTORY (WHERE KNOWN) None
Settlements[6]
Civil suit findings[7]
Remedy or sanction, whether imposed or by consent

Disclosure of Information in Certificates of Professional Conduct

DATE ISSUED: January 11, 2024
ISSUED TO: Disney World of Florida

for H.M. Oetter, MD
Registrar

Registration Compliance

- **Application follow-up**
  - Legal, health, issues in other jurisdictions
- **Ensure registrants are complaint with legislation, bylaws, policies and standards**
  - Monitor the provisional class of registration
  - Conduct registration file review audits
  - Review and follow up on responses on the annual licence renewal
  - Generate reports pertaining to registration
- **Liaise with other college departments and/or external organizations for follow-up and monitoring**

Annual Licence Renewal

- **Support and follow-up**
- **Verification of:**
  - Continuing Professional Development/Continuing Medical Education
  - Scope of practice/currency in practice
  - Licence limits
- **Required CPCs from other jurisdictions**

Registration Assessments

- **Registration assessments provide an alternate route to certification examination to obtain registration in the full class**
- **Eligibility**
  - Two years of practice under sponsorship and supervision, and
  - Recognized accredited training occurred outside of Canada, or
  - Successful completion of recognized practice ready assessment program
- **At registrant's own cost**
- **Comprised of a number of evidence-based components**

Accreditation Assessments

- **In order to employ a registrant in the Associate Physician class a program must receive program accreditation from the College**
- **College reviews health authority administration of job description, supervision expectations, initial and ongoing competence and performance assessment done by employer, requirements for CPD, satisfaction survey**
- **Accreditations:**
  - 76 completed
  - 4 in progress

Key Highlights*

- **Total registrants (independent practice): 15, 259**
  - GPs – 50.21%; specialists – 49.30%; podiatrists – 0.47%; osteopaths – 0.02%
  - 4,828 IMGs – 31.6% of all active practising physicians
- **Total educational registrants:**
  - Medical students – 1,555
  - Postgraduate residents – 1,808
  - Postgraduate trainees – 111
  - Postgraduate fellows – 453

***Source: College statistical reporting as of May 13, 2024**

Key Highlights*

- **End of February 2024 compared to February 2023**
  - Net increase of 186 registrants in the family class (186% increase over the last year)
  - Net decrease of 149 registrants in the specialty class (32% decrease over the last year)

***Source: College statistical reporting as of May 2024**

What's New in Registration?

- **Associate physician – surgical assistant**
- **USA certified – psychiatry**
- **Physician assistant class**
- **HPOA transition**

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