



College of Physicians and Surgeons of British Columbia

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The *College Connector* is sent to every current registrant of the College. Decisions of the College on matters of standards and guidelines are contained in this publication. Questions or comments about this publication should be directed to communications@cpsbc.ca.



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Registrar's message—criminal record check: a statutory requirement for all registrants



The British Columbia *Criminal Records Review Act* is intended to support the protection of children from physical or sexual abuse, and vulnerable adults from physical, sexual or financial abuse.

The *Act* requires all College registrants to complete a criminal record check upon application and then every five years thereafter. The law applies to all applicants and registrants of all professional regulatory bodies governed by the *Health Professions Act*.

Under the statute, a criminal record check must be completed:

- at the time of application for registration
- at the time of a registrant class change
- every five years, and
- when a registrant has been charged and/or convicted of an offence.

At the time of application, all College applicants are required to provide their consent to a criminal record check, which includes consent to the vulnerable sector check, and the routine five-year renewal of the criminal record check. Registrants licensed for independent practice will notice that a consent question is also added to their Annual Licence Renewal Form in the year prior to their next five-year renewal.

The Criminal Records Review Program administers the criminal record check. The program is operated by the provincial government's Ministry of Public Safety and the Solicitor General.

The vulnerable sector check determines whether the applicant/registrant has any record suspensions for sexual offences. If the applicant/registrant has the same combination of gender and date of birth as a sex offender whose record has been suspended, s/he must provide fingerprints to confirm identity.

This is a federal requirement of the Royal Canadian Mounted Police that applies to all Canadians. Fingerprinting is necessary to eliminate the possibility that an offender has changed his/her name in order to pass a criminal record check.

If an applicant/registrant shares the same gender and date of birth as a record suspended sex offender, s/he will receive a letter from the Criminal Record Review Program informing that fingerprints are required. The letter will include forms and instructions on how to do this. Completion of this process is required in order to complete the criminal record check.

The College must receive a criminal record check result for every applicant and registrant. If a result is not received due to a physician's non-compliance with the Criminal Record Review Program, including the requirement for finger printing, his/her file may be submitted to the College's Inquiry Committee for review, and limits and conditions may be applied.

The College's duty is to make registrants aware of this statutory requirement and ensure that the laws governing the profession are adhered to. The College would very much prefer to avoid taking action against a registrant for failure to comply with this statutory provision.

I fully acknowledge that it may be difficult to take time off work to attend a police station or commissioner's office to undergo fingerprinting, and I want to thank the hundreds of physicians who promptly comply with this requirement each year.

For further information about the criminal record check and vulnerable sector check, please visit the Criminal Record Check page on the provincial government website located [here](#).

Heidi M. Oetter, MD
Registrar and CEO

Comments on this or any other article published in the *College Connector* can be submitted to the Communications and Public Affairs Department at communications@cpsbc.ca.

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Removing functionality from the online physician directory— “accepting new patients”



As of March 1, 2018, the automated feature on the College’s physician directory, which allows family physicians to identify themselves as accepting new patients, will be discontinued. Since the time the online feature was first enabled, family physicians have been responsible for keeping information about their practice capacity up-to-date. In more recent years, since many family physicians have reached capacity to take on new patients, and many physicians work in multiple practice locations, reports generated from the “accepting new patients” feature were frequently inaccurate, causing undue frustration for patients seeking a family physician.

The physician directory will continue to assist patients and others who wish to confirm whether a physician is currently registered and licensed with the College, and provide information as required by the *Health Professions Act*, including a business address and phone number. The physician directory also provides information such as registrants’ place of graduation, credentials, and scope of practice.

Once the feature is disabled, patients who phone the College seeking a family physician will be referred to HealthLink BC for a listing of walk-in clinics, and to applicable Divisions of Family Practice chapters with patient attachment mechanisms in place. Physicians, especially those who are planning to retire in the near future, are being asked to do the same, rather than directing their patients to the College.

Physicians working in walk-in clinics are reminded that they are responsible for offering any patient who does not have a dedicated family physician longitudinal medical care, including the provision of appropriate periodic health examinations and follow-up care. See [Walk-in, Urgent Care and Multi-physician Clinics](#).

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#RealityCheckup: addressing confounding societal issues that undermine people's health and the care they receive

2018
Education
Day and
AGM

Save the date for the much-anticipated College Education Day, held again this year at the Vancouver Convention Centre on Friday, September 14, 2018.

With guidance and insight from experienced, engaging experts, this year's theme aims to address a selection of complex topics, from the importance of cultural humility to combating anti-science myths. Join colleagues to explore these and other confounding issues facing physicians today.

The program includes plenary sessions, case studies and interactive workshops for an all-encompassing educational experience and an opportunity for deep reflection on these ongoing challenges.

The College is very pleased to welcome back the ever popular Timothy Caulfield, BSc, LLB, LLM, professor, presenter, and author of *The Vaccination Picture, Is Gwyneth Paltrow Wrong About Everything?: When Celebrity Culture and Science Clash*, and *The Cure for Everything: Untangling the Twisted Messages about Health, Fitness and Happiness*. This year, Tim will focus on the art and science of communicating evidence-based medical concepts to skeptical patients.

More information will be available soon on the [Events](#) page.

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Opioids in palliative care

DRUG PROGRAMS Update

The College has received reports recently of physicians refusing to prescribe opioids for cancer or palliative care patients. As is clearly stated in [Safe Prescribing of Drugs with Potential for Misuse/Diversion](#):

“The College acknowledges the appropriate role of pharmacotherapy in the context of active cancer, palliative, nursing home and end-of-life care.”

The College recognizes that the goals and expectations regarding prescribing to palliative and active cancer patients are different from those for chronic non-cancer pain, and that the same standards may not apply in this context. Physicians must use good clinical judgement and compassion to issue adequate and appropriate opioid prescriptions for such patients.

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PharmaCare contacts for medical professionals



DRUG PROGRAMS Update

On October 1, 2017, PharmaCare updated its contact information for medical practitioners wishing to obtain information on Special Authority, palliative coverage, psychiatric medication coverage, and the Restricted Claimant Program. The phone line is dedicated to medical professionals only and is not for public use.

Physicians may dial 1-866-905-4912 (toll-free) and choose one of the following options:

- For Special Authority inquiries, press 1
- For Plan P (Palliative Care Drug Plan) coverage, press 2
- For Plan G (Psychiatric Medications Plan) coverage, press 3
- For the Restricted Claimant Program, press 4

The information line for the public inquiries is 604-683-7151 (Lower Mainland) or 1-800-663-7100 (rest of BC).

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Authorization forms for prescribing methadone for analgesia—now online



DRUG PROGRAMS Update

The process to apply for a full authorization to prescribe methadone for analgesia has transitioned from a paper form to an online form. To apply, registrants must complete an application form, which can be accessed by doing the following:

- [Log in](#) using the CPSID and password.
 - Under Forms (optional), click Methadone for Analgesia Authorization Application.
- Answer all the questions.
 - Review and submit the application form.

Once the form is completed and submitted, registrants may view and print their application in a PDF format. Confirmation that the application is being processed will be sent via email within 48 hours.

To receive a temporary application to prescribe methadone for analgesia, registrants must download and complete the [Temporary Authorization to Prescribe Methadone for Analgesia](#) form from the College website, and submit it via email or fax.

Applications for a full or temporary authorization to prescribe methadone for opioid use disorder must be sent to the BC Centre on Substance Use.

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Writing prescriptions legibly to ensure patient safety

DRUG PROGRAMS Update

Physicians, pharmacists and nurse practitioners all play a role in ensuring that prescriptions are being written and dispensed accurately. A recent hand-written prescription reviewed by the College was intended to be for Abilify 7.5mg, but it clearly appeared and was interpreted as 75mg. The 13-year-old patient was dispensed the medication and took 75mg daily for five days before the error was discovered. In this instance, the patient did experience side effects but was able to make a full recovery.

When writing a prescription, a good general practice regarding decimal points is to use them when there is a fraction, not when writing a whole number:

0.1 = YES

1.0 = NO

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New bylaws and policies now in effect

NHMSFAP Update

The new Non-Hospital Medical and Surgical Facilities Accreditation Program (NHMSFAP) Bylaws have now been published on the College website.

Policies

In addition to the new Bylaws, the following six new bylaw policies have also been published:

- [Addition of New Programs, Additional Procedures or New Contracts](#)
- [Appointment of Medical Staff to Facilities](#)
- [Patient Safety Incidents Reporting](#)
- [Renovations and New Construction to a Facility](#)
- [Requirement for Continuity of Care](#)
- [Terms of Accreditation](#)

The policies are available [here](#).

Forms

Several NHMSFAP forms, such as the *Application for Appointment to Facility* and the *Notification of Appointment of Medical Director*, have been updated to reflect the new bylaws, and a new form entitled *Application for Addition or Expansion of Services in Non-Hospital Facilities* is also available on the College website.

The forms are available [here](#).

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Updated accreditation standard on overnight stay

NHMSFAP
Update

The NHMSFAP Committee has updated the *Overnight Stay* accreditation standard for private medical and surgical facilities in BC. The NHMSFAP standards represent the criteria that must be met to achieve accreditation with the College

The *Overnight Stay* and other NHMSFAP accreditation standards are available [here](#).

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Changes in structure, staffing or leadership must be reported

DAP
Update

According to section 5-30 of the College [Bylaws](#), an organization, health authority or diagnostic facility must report any significant changes (e.g. changes to the governance structure, medical leadership, facility location, scope of service or technical staffing model) to the Diagnostic Accreditation Program (DAP).

To report changes, facilities must complete and submit the Notification of Significant Change in Service form available [here](#).

Upon receipt, the form will be reviewed by the DAP to determine whether the change affects the accreditation award and warrants reassessment, or not. The facility or region will be contacted by the DAP with the outcome of the review.

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New spirometer acceptance testing templates—available now

DAP
Update

The Diagnostic Accreditation Program (DAP) accreditation standards require acceptance testing of all new or replaced equipment prior to clinical use. The testing must be performed by an individual independent of the manufacturer, and the DAP must be notified of the change before the equipment is used for patient testing. To assist facilities with the performance of acceptance testing for new or replaced spirometers, templates are available on the College website [here](#).

Who should use the templates?

The templates were developed to assist new and currently accredited facilities in the community spirometry accreditation program; however, pulmonary function laboratories are also encouraged to use the templates when introducing a new spirometer into their practice.

What happens after the completed form is submitted?

After submitting the form to ptqc@cpsbc.ca, the results of the acceptance testing will be reviewed by an expert in pulmonary function quality control to ensure the spirometer is operating correctly. Once the performance is confirmed, the DAP will contact the facility to advise that the spirometer is ready for patient testing or that additional testing is required.

More information

Facilities are encouraged to contact the DAP if they have questions at ptqc@cpsbc.ca or 604-733-7758, extension 2635.

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Audio-Digest audio lectures

College
LIBRARY

Audio-Digest audio lectures are free to registrants through the College website at the library's [Apps and Audiovisual](#) page. Audio-Digest is a venerable player in the continuing professional development field. Originally an "experiment" of the California Medical Association in 1953¹, the audio recordings are from recent US medical conferences.

The College library has offered free access to this service from the beginning as reel-to-reel tapes, and transitioned over time from tape cassettes to CDs, and to the current formats of streaming online audio, downloadable MP3 files, and a dedicated app. Note: the recent purchase of Audio-Digest by the Wolters Kluwer publishing company indicates that future licensing costs may be prohibitive so registrants are encouraged to make the best use of this resource while it is still part of the library collection.

Registrants have free access to more than 1000 lectures in the following specialties:

- Anesthesiology
- Cardiology
- Emergency Medicine
- Family Practice
- Gastroenterology
- Internal Medicine
- Obstetrics/Gynecology
- Ophthalmology
- Orthopaedics
- Otolaryngology
- Pediatrics

Lectures range from 10 to 60 minutes and each one includes a written summary with a suggested reading list. Financial conflicts of interest are disclosed. Continuing professional development credits may be claimed from the Royal College of Physicians and Surgeons of Canada MOC Program related to

podcasts, audiotapes and videotapes and as part of the College of Family Physicians of Canada MAINPRO program.

The Audio-Digest app for iOS and Android is available, although the library has not actively promoted it due to the app's software problems. Recently, Audio-Digest appears to have resolved the problems and the app is worth a try. Download instructions are available from the [Audio-Digest Mobile App](#) page. Log in with the username (medlib) and password (library) provided by the College library for accessing [Audio-Digest Clinical Lectures](#).

For any app-related technical questions, contact the [Audio-Digest Foundation](#) directly.

For more College library services and resources, contact the library at 604-733-6671 or visit www.cpsbc.ca/library.

¹ C.M.A.'s Audio-Digest-A Decade of Progress. Calif Med. 1964 Jan;100(1):50-2. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1515379/pdf/califmed00079-0051b.pdf>

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CPD events: mark your calendars



Chronic Pain Management Conference

Friday, March 2, 2018 to Saturday, March 3, 2018 – Vancouver

[Learn more](#)

Medical Record Keeping for Physicians

Wednesday, August 22, 2018 – Vancouver

[Learn more](#)

Medical Record Keeping for Physicians

Wednesday, October 10, 2018 – Vancouver

[Learn more](#)

Medical Record Keeping for Physicians

Wednesday, November 21, 2018 – Vancouver

[Learn more](#)

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Regulatory actions

- [Rabbani Farani, Nima – December 12, 2017](#)

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