



## POLICY

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### Scope of Practice Change

<b>STATUS:</b>	APPROVED
<b>Approved by Council:</b>	September 2014
<b>Amended:</b>	September 2021
<b>To be reviewed:</b>	September 2024

*This document is a policy of the College of Physicians and Surgeons of Saskatchewan and reflects the position of the College.*

#### 1. Guiding Principles

1. The public is entitled to be treated by physicians who are competent to practise.
2. The College recognizes that, over time, physicians may change the focus of their practice.
3. Physicians are responsible for being appropriately trained to practise competently.
4. The College is charged with the responsibility of ensuring that physicians practise competently to meet the standard of practice for their chosen area of practice.

#### 2. Purpose and Scope of this Policy

Physicians are responsible to recognize and work within the limits of their competence, and to refer a patient to another practitioner if they cannot safely meet the patient's needs.

Before carrying out a new procedure or entering a new field of practice for the first time, physicians must ensure they have sought and obtained CPSS approval for the appropriate scope of practice in accordance with this policy and Bylaw 4.1.

In addition to obtaining approval for the scope of practice change, physicians must ensure they can safely perform the procedure by undergoing training and seeking opportunities for supervised practice.

Physicians must take part in activities to maintain and develop their competence and performance across the full range of their practice.

Physicians are expected to practise evidence-based medicine, and to maintain a level of understanding of the available evidence supporting the procedure as it evolves.

In accordance with bylaw, when a scope of practice change is considered, or when asked by the College, whether in the annual renewal form or elsewhere, physicians must report to the College when they have changed their scope of practice or intend to change their scope of practice.

The College will facilitate and oversee the process for changing scope of practice if the College determines that a) the change in scope of practice is significant and b) the physician does not have the training and/or experience to practise competently in the new area of practice.

This policy outlines the College's requirements of physicians in demonstrating their competence in the new area of practice.

### 3. Definitions/Examples

#### ***Scope of practice:***

1. Every physician's scope of practice is unique.
2. A physician's scope of practice is determined by:
  - the patients the physician cares for,
  - the procedures performed,
  - the treatments provided, and
  - the practice environment.
3. A change in scope of practice occurs when there have been significant changes to any of the elements set out in part 2 of the definition.
4. If a physician intends to change practice such that he or she is practising outside of what would be considered the usual scope of practice or training for the discipline, then his or her scope of practice will also change significantly.
5. A physician's ability to perform competently in his or her scope of practice is determined by the physician's knowledge, skills, and judgment, which are developed through training, experience and the currency of practice.

Performance of techniques or procedures within the context of a specialty or family medicine, while new, will not always constitute a change in scope of practice. For example, a family physician who, within his or her general area of training, decides to narrow the focus of his or her practice to women's health issues, palliative care or addictions medicine; or a general surgeon who learns to perform laparoscopic cholecystectomies would not be considered to have changed their scope of practice. A specialist who acquires a new skill or intends to perform a new procedure within their field of practice will be reviewed by the CPSS on a case-by-case basis and may not be considered to have changed their scope of practice.

#### **Examples of changes in scope of practice include:**

- a physician who wishes to perform cosmetic surgical procedures,
- a specialist, such as a surgeon, who wishes to practise primary care medicine,
- an ER physician wishing to return to Family Medicine,
- a pediatrician wishing to provide certain services to adult patients,

- a hospitalist wishing to practise family medicine,
- a physician who wishes to re-introduce a procedure which he or she has not performed in the preceding three years,
- a physician wanting to introduce significant new technology for diagnostics or procedures,
- when physicians expand their practice to include care delivery in departments where they have not previously practiced, for example in ER, hospital wards and critical care or intensive care units.

A change in scope of practice may also occur when a physician moves to Saskatchewan from a place where the health care system is significantly different from the health care system in Saskatchewan.

## 4. College Policy

The relevant portions of Bylaw 4.1 “Returning to Practice in Saskatchewan after an absence or disability, inactive practice, or change in scope of practice” state:

- (a) For the purpose of paragraph 4.1, a significant change in a physician’s scope of practice is one in which the nature of the patient population cared for by the physician, the treatments provided by the physician or the environment in which the physician sees patients has changed in a significant way. A significant change in a physician’s scope of practice is also where a physician begins to practise outside of what would be considered the usual scope of practice for the physician’s discipline, training and experience.

All physicians who have undergone a significant change in scope of practice or who will be changing their scope of practice significantly, and who do not have the training and/or experience to practise competently in the new area of practice, will have to participate in a process to ensure that they have the necessary competence to practise in that area. This process will be individualized for each physician but, in general, the core activities involved may include training; supervision; and assessment.

For greater detail on the College's expectations in ensuring that physicians are appropriately trained and experienced in their area of practice, physicians should consult the document entitled Expectations for Practising in a New Practice Area (see next page).

## 5. Professional Misconduct

It is a term, condition and limitation of a certificate of registration that the holder practise only in the areas of medicine in which he or she is educated and experienced. Under the regulations to *The Medical Profession Act, 1981* certain activities can give rise to allegations of professional misconduct. It is professional misconduct for a physician to contravene a term, condition or limitation on his or her certificate of registration.

## 6. Resources

[Bylaw 4.1 Returning to Practice in Saskatchewan after an absence or disability, inactive practice, or change in scope of practice](#)  
[CPSS Bylaw 7.1 Code of Ethics](#)  
[CPSS Bylaw 7.2 Code of Conduct](#)

## **EXPECTATIONS FOR PRACTISING IN A NEW PRACTICE AREA**

These expectations apply to physicians when the College determines that:

- a physician has changed or wishes to change his or her scope of practice;
- the change in scope of practice is significant; and
- the physician may not have the training and/or experience to practise competently in the new area of practice.

### **1. Training**

A physician will usually be required to participate in training for the new area of practice. If the physician has undergone training, he or she can provide the College with evidence of the training in the new area.

If the physician has not undergone any training or the training that the physician has undergone is not acceptable to the College, the physician must provide the College with a training proposal which must be approved by the College.

### **2. Supervision**

A physician may be required to undergo supervised practice for a period of time. This will entail the following:

- The physician must find another physician who will act as his or her supervisor.
- The supervisor must be acceptable to the College,
- The supervision must take place in accordance with the College's Guidelines for Supervision,
- The level and duration of supervision will be at the discretion of the College and the supervisor, and will be dependent on the content and duration of the training required or completed.

The supervisor will send a written report to the College indicating that supervision is complete, and that the physician is ready to practise independently in the new area of practice. The College will review the supervisor's report and will make a determination as to whether the physician is ready to enter independent practice.

During the period of independent practice, the College may adjust or remove the supervision requirements.

### **3. Assessment**

A physician may be required to undergo a College-directed assessment of his or her practice. Once the assessment has been completed, the College will review the results of the assessment and make a final determination as to whether the physician can perform independently, safely and competently in the new area of practice.

### **4. Costs**

The physician will be responsible for costs related to training, supervision and the College-directed assessment.