



COUNCIL MEETING

EXECUTIVE SUMMARY

22 and 23 September, 2023

CPSS/SMA Boardroom

2174 Airport Drive, Saskatoon, SK

The Council of the College of Physicians and Surgeons of Saskatchewan operates under an explicit set of governance policies. It strives to make its work as transparent as possible to the medical profession and to the general public.

Those portions of Council's deliberations that are not confidential are open to observation by any person subject to space availability in the meeting room.

At the conclusion of each Council meeting an Executive Summary of the meeting is widely distributed to the district medical associations, related organizations and the public media. This Executive Summary provides a brief overview of issues discussed, decisions made and/or actions taken by the Council. If any person wishes more detailed information about any of the issues which are not subject to confidentiality constraints, these can be obtained by contacting Ms. Sue Waddington, Executive Assistant to the Registrar, at 101 – 2174 Airport Drive, Saskatoon, Saskatchewan, S7L 6M6, phone (306) 244 7355, Fax (306) 244 2600, or via email at OfficeOfTheRegistrar@cps.sk.ca.

1. Council acknowledged that the land on which we gather is Treaty 6 Territory, the traditional territory and home of the Cree, Dakota, Saulteaux and Métis Nations. We would like to affirm our relationship with one another now and for the future, and our role in guiding the profession to achieve the highest standards of care to benefit all people in this territory equally.
2. Council adopted the agenda for the Open Session as presented. Council agreed to the redaction of identifiers with respect to the Drs. Horri and Mohammed discipline matters.
3. Council reviewed and approved the Minutes from the Friday 2 June, 2023 Open Session of the meeting of Council.
4. Council received a report from Mr. Bryan Salte on actions taken in relation to the "For Action Items" from the previous meeting.
5. Council reviewed and approved Monitoring Reports from the Registrar with respect to:
 - (a) The Registrar's Advancement of Council's END - 5 - Medical Profession Prepared for the Future; and

(b) The Registrar's Compliance with Council's Executive Limitation Policies pertaining to:

- (i) EL – 3 – Financial Planning;
- (ii) EL - 4 - Financial Condition;
- (iii) EL - 5 - Asset Protection;
- (iv) EL - 8 - Compensation and Benefits.

- 6. Council deferred the item "Options for selecting or electing Councilors" to a future meeting.
- 7. Council amended the administrative bylaws pertaining to Council elections.

Council rescinded Regulatory Bylaw 2.15.

- 8. Council amended the administrative bylaws to allow for the appointment of Indigenous member(s) on Council.
- 9. The Council confirmed its support of the College's participation in a Citizens' Advisory Group pilot project with the Network of Interprofessional Regulatory Organizations (NIRO). Ms. Torrance will provide status reports on this project at future meetings.
- 10. Council appointed a committee to review the "Prescribing: Access to the Pharmaceutical Information Program (PIP) or electronic Health Record (eHR) Viewer" Policy which had reached its sunset date, and to determine what expectations there are of physicians to access those resources in connection with their prescribing. The committee will consist of Dr. Kanagaratnam, Dr. Beggs, Dr Oberholzer, Mr. Ogunrinde, Dr. Igbekoyi, Ms. Torrance and a representative of each of the SHA, SCPP and CRNS.
- 11. Council approved the proposed 2024 budget.
- 12. Council approved an amendment to Administrative Bylaw 9.1 to increase the annual fee for licensure from \$1950 to \$2070 for the 2024 renewal season.
- 13. Council appointed a committee to review the Complementary and Alternative Therapies Policy which had reached its sunset date. The committee will consist of the members of the committee that reviewed the Uninsured Services Policy with the addition of Dr. Snyman and Mr. Thompson.
- 14. Council approved in principle, for the purpose of stakeholder consultation, an amendment to Regulatory Bylaw 19.1 pertaining to prescribing opioid agonist therapy (OAT) for palliative patients.

15. Council appointed members to the following Laboratory Quality Assurance Committees:
 - Anatomical Pathology
 - Chemistry
 - Hematology
 - Microbiology
 - Transfusion Medicine
 - Program Management Committee
16. Council approved amendments to the Virtual Care Policy and set a sunset date of 3 years. The updated Policy will be posted to the College website.
17. Council conducted a penalty hearing pertaining to Dr. M. Horri. Dr. Horri admitted charges of unprofessional conduct in relation to breaches of his undertaking by attending a female patient without a chaperone and failing to report the breach to the College.

Submissions were made by Mr. E. Thompson on behalf of the Registrar's Office and Mr. M. Wiens on behalf of Dr. Horri. Council imposed penalty which consisted of an in-person reprimand, a 2 month suspension effective November 1 and payment of costs associated with the investigation. Reasons for the decision will be drafted and considered at the November meeting.

18. Council conducted a penalty hearing pertaining to Dr. El-Fellani Mohammed. Dr. El-Fellani Mohammed was found guilty by the discipline hearing committee of 7 charges of unprofessional conduct arising from conduct occurring prior to or at around the same time as the conduct at issue in his prior discipline charges. More specifically, he was found to have failed to maintain the standards of practice of the profession including conducting inappropriate stethoscope examinations on 6 patients, making inappropriate comments to 2 of those patients, and conducting an inappropriate breast examination on another patient.

Submissions were made by Mr. E. Thompson on behalf of the Registrar's Office and Mr. N. Cann on behalf of Dr. El-Fellani Mohammed. Council imposed penalty on Dr. El-Fellani Mohammed which consisted of an in-person reprimand, a 5 month suspension effective November 1, the requirement of an undertaking, and payment of costs. Reasons for the decision will be drafted and considered at the November meeting.

19. Council approved in principle, for the purpose of stakeholder consultation, an amendment to Regulatory Bylaw 2.11 to exempt the requirement of licensure for physicians from border communities who provide virtual care to existing Saskatchewan patients.
20. Council approved the Physician Use of Electronic Communications Guideline with a sunset date of 3 years. The amended guideline will be posted to the College website. The Council directed that the Executive Committee raise with the Executive Committee of the Saskatchewan Medical Association (SMA) at its upcoming meeting the possibility of sending a joint letter to the Ministry with respect to establishing a secure method of electronic communication for physician-to-physician communication.



21. Council approved amendments to the Medical Assistance in Dying (MAiD) Policies and set a sunset date of 5 years. The amended policies will be posted to the College website.
22. Council approved an amendment to Regulatory Bylaw 2.8 to extend the sunset date to 2026 to authorize Ministerial licenses for physicians working for the Saskatchewan Cancer Agency.
23. Council approved a proposal from the SHA Anesthesiology Department to allow anesthesia assessments to be done in Regina in addition to Saskatoon, further to the Pre-Licensure Assessment program that was approved at the June Council meeting.
24. Council considered a proposal from the Saskatchewan Cancer Agency Hematology/Oncology Department to approve a hematology oncology clinical assistant proposal. The matter will be considered at the November Council meeting once additional information is provided especially with respect to the training that will be provided to physicians in the program.
25. Council approved the meeting dates for 2024 Council meetings, as set out:
 - 19 & 20 January
 - 22 & 23 March
 - 7 & 8 June
 - 13 & 14 September
 - 22 & 23 November
26. Council considered a request from National Medical Imaging (NMI) to amend Bylaw 25.1 to remove the requirement that a radiologist be on-site for the majority of CT and MRI studies performed in a private facility. Council declined the request.
27. Council approved the proposal for 5 one-hour sessions of anti-racism training for Councilors to be undertaken in 2024.
28. Council received an update on the implementation of its strategic plan goals.

Dr. Oberholzer provided a focused report on Goal #2 - A robust, College-led process to assess and support physicians for performance and competence throughout their careers. Council referred the matter back to the committee to suggest achievable first steps.
29. Council considered a request from Associated Radiologists LLP to approve a Pre-Licensure Assessment Program to assess a radiologist. Council approved the request.
30. Council approved the Uninsured Services Policy and set a sunset date of 3 years. The amended Policy will be posted on the College website.

31. Council discussed Specified Continuing Education or Remediation Programs (SCERPs) in general and suggested that most SCERPs should involve a "lower level" requirement for supervision, with a goal of developing resources to address SCERPs that are more intensive.
32. Council reconsidered its previous direction that the Executive Committee could not refer a matter that has been dismissed through the discipline process to the Quality of Care process. Council rescinded its previous decision.
33. Council considered and adopted amendments to Regulatory Bylaw 8.1 to define as unprofessional conduct a failure to appear before the Council for the administration of a reprimand when directed to do so.
34. Council considered amendments to the Appearing Remotely Before Council Guideline as set out in document Info 196_23 and approved the updated guideline with two additional amendments.
35. Council conducted a penalty hearing pertaining to Dr. K. Insley. Dr. Insley had pled guilty to charges of unprofessional conduct in relation to driving while impaired and providing untruthful information to the College when renewing her licence.

Submissions were made by Mr. B. Salte on behalf of the Registrar's Office and Ms. J. Buydens on behalf of Dr. Insley. Council imposed penalty consisting of a written reprimand, a 3 month suspension effective November 1, the requirement to complete an ethics course and payment of costs. Reasons for the decision will be drafted and considered at the November meeting.

36. Council deferred the penalty hearing pertaining to Dr. Sperling to the November meeting of Council.
37. Council approved the nomination of Dr. Deepti Ravi as College representative to the Radiation Health & Safety Committee.
38. Council considered a request for an extension of time for Dr. Mugerwa to provide Council proof that he has regained skill and knowledge. Council approved the request based on his undertaking to cease practice effective October 1, and amended its previous order to allow Dr. Mugerwa until the November Council meeting to present this information to the Council.
39. Council received a report from Mr. Salte with respect to the status of bylaws. All bylaws are in effect.
40. Council considered a PIC Report and accepted the committee's recommendation to not lay charges of unprofessional conduct against a physician on the basis that charges would not likely be provable. Reasons for the decision will be drafted and considered at the November meeting.
41. Council considered a PIC Report and appointed a competency committee to assess a physician's skill and knowledge.

42. Council considered a PIC Report and deferred to the Executive Committee the decision whether to lay charges against a physician.
43. Council approved the draft reprimand pertaining to Dr. M. Kiapway. The reprimand will be provided to Dr. Kiapway and posted on the College website.
44. Council approved the draft reprimand pertaining to Dr. A. Van der Merwe. The reprimand will be provided to Dr. Van der Merwe and posted on the College website.
45. Council approved the draft reprimand pertaining to Dr. A. Nguegno. The reprimand will be provided to Dr. Nguegno and posted on the College website.
46. Council approved the draft reasons for decision pertaining to Dr. M. Kiapway. The reasons for decision will be provided to Dr. Kiapway and his legal counsel and posted on the College website.
47. Council approved the draft reasons for decision pertaining to Dr. M. A. R. Sayeed. The reasons for decision will be provided to Dr. Sayeed and posted on the College website.
48. Council approved the draft reasons for decision pertaining to Dr. J. Velestuk. The reasons for decision will be provided to Dr. Velestuk and his legal counsel and posted on the College website.
49. Council considered a PIC report and accepted the recommendation of the committee, declining to lay charges of unprofessional conduct against a physician.

Council directed that a letter of concern from the President be sent to the physician addressing issues with communication and medical record-keeping.

Council also directed that the President write to the complainants providing reasons for its decision.

50. Council discussed the issue of conflict of interest and was reminded of governance policies GP-9 and GP-10 which address the Code of Conduct and conflicts of interest, that Councilors are required to review and sign annually.
51. Council expressed a consensus that if general letters to the College raise issues that are within the CPSS mandate, the Registrar's Office and/or President should generally respond. If the letters raise issues that are outside the CPSS mandate, a response is not always required.
52. Ms. Torrance reported on the status of discipline files.
53. Council received an update on the status of Quality of Care cases from the Deputy Registrar, Dr. Werner Oberholzer.
54. Mr. Salte provided the list of the For Action Items pertaining to the work of Council.