



EXECUTIVE SUMMARY

of the

25 & 26 NOVEMBER, 2022 COUNCIL MEETING

COLLEGE OF PHYSICIANS AND SURGEONS OF SASKATCHEWAN

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 email 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.
3. Council reviewed and approved the Minutes from the Friday September 30 and Saturday October 1, 2022 Open Session of the meeting of Council.
4. Council received a report from Ms. Torrance 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 - 6 - Professionally Led Regulation and;

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

- (i) EL - 14 - Development of Policies Governing the Practice of Medicine and;
- (ii) EL - 15 - Approval of Externally Generated Policies Governing the Practice of Medicine

6. Council received a report from Ms. Torrance pertaining to the feedback from consultations on the proposed amendments to the policies "Performing Office-Based Insured Procedures" and "Performing Office-Based Non-Insured Procedures". Council considered the feedback from the consultations and the policies were approved with a sunset date of 3 years. The amended policies will be posted on the College website.
7. Council reviewed the feedback from the consultations on the proposed amendments to Bylaw 23.3 and the proposed addition of Bylaws 23.5 and 23.6 relating to directives by physicians to RNs to administer Botox or dermal fillers and ordering or supplying Botox or dermal fillers for administration by others. The bylaws were approved and will be submitted to the Ministry for approval.
8. Council received a report from Ms. Torrance on behalf of the *Developing Better Communications with Patients* working group. The working group has been working with the NIRO members to consider public engagement strategies. Council supports the group's work in developing a public engagement strategy.
9. Council received a report from Dr. Beggs, Chair of the CPSS Award Committee, on the proposed changes to the College related award. The proposed changes outlined were approved in principle and the committee was directed to bring back to the January Council meeting its final recommendations.
10. Council supported the reappointment of Dr. Rohan Cornelissen to the Joint Medical Professional Review Committee effective 1 January, 2023.
11. A Penalty Hearing was conducted pertaining to Dr. C. Orhadje. Dr. Orhadje admitted to a charge of unprofessional conduct that he communicated to a patient by text but failed to document and to ensure that the patient understood the purpose of the text messages.

Submissions were made on behalf of the College by Ms. Rochelle Wempe. Submissions for Dr. Orhadje were made by Ms. Anita Fraser.

Council imposed penalty which includes a written reprimand, a course on professional boundaries, a course pertaining to effective patient communication and payment of costs. The penalty will be posted on the College website. A written reprimand will be returned to Council in January for consideration and approval.

12. Council received an update from the Chair of the Truth and Reconciliation Committee, Mr. Burton O'Soup. The committee continues to work on establishing relationships. The Registrar's Office has reached out to Saskatoon Tribal Chief Mark Arcand, and has invited the 74 sovereign nations to an opportunity to meet College program staff through WebEx . It is hoped that the College will gain some understanding of what barriers the nations and individuals encounter with our complaints system.

13. Council received an update on the work of the Diversity and Bias Committee from its Chair, Dr. Oladapo Mabadeje. The committee recommends that all Council and Council committee members (Preliminary Inquiry Committees, Discipline Committee members, and the Quality of Care Advisory Committee) be mandated to take some training pertaining to unconscious bias. The Council supports the committee's recommendation to make the course on unconscious bias mandatory.

The Diversity and Bias committee is working with the SMA's Equity, Diversity and Inclusion (EDI) Committee considering the development of a detailed survey of physicians to better understand the specifics of the racism problem in Saskatchewan. The scoping of the work is ongoing.

The requirement for English Language Proficiency for licensure was discussed. At the present time the CPSS uses the General Medical Council (UK) list which lists countries that train in English for the primary degree. The question is whether the focus should be on secondary training. The matter has been brought up to the national registration committee and Council will revisit the issue when more information has been gathered.

14. Council received a report from the committee reviewing the Patient-Physician Communication Guideline and accepted the recommendation to rescind the guideline.
15. A Penalty Hearing pertaining to Dr. Lubega was conducted. Dr. Lubega admitted he billed for services as a surgical assistant without meeting the requirements in the payment schedule for such billings, that his services were not medically necessary and that he was not asked by surgeons to act as a surgical assistant.

Submissions on behalf of the College were made by Mr. Evan Thompson and submissions by Dr. Lubega were made by Mr. David Thera.

Council imposed penalty which includes a written reprimand and a fine. The penalty will be posted on the College website. Reasons for the decision and a written reprimand will be returned to the January Council meeting for discussion and approval.

16. The Council received a report from Dr. Werner Oberholzer on behalf of the committee working on a proposed "fellowship" program to accommodate internationally trained physicians who wish to improve their skills and knowledge and return home to their country. The Council accepted the change in terminology to name these programs as Focused Competency Programs. The Council approved the training program for Haitian orthopedic surgeons as proposed by the College of Medicine and approved the amendments to its educational licensure bylaws. The amended bylaws will be submitted to the Ministry for approval.
17. Council received a report from Ms. Sheila Torrance on the progress of the work related to the policy *Completion of Third Party Forms and Certification of Work Absence/Accommodation due to Illness or Injury* subsequent to the feedback from consultations. Council approved the revised policy with a sunset date of 3 years. The policy will be posted on the College website.

18. Council provided approval for Ms. Indiana Best, a first year medical student, to observe Council's proceedings, in addition to the appointed Student Medical Society of Saskatchewan's representative. Ms. Best has an interest in leadership.
19. Council discussed proposed amendments to bylaw 8.1 to redefine failing to maintain the standard of practice as unprofessional conduct. Council approved the amendments in principle for the purpose of stakeholder consultation.
20. The Annual General Meeting was held and an educational session on Intent, Impact, Harm & Action Understanding Bias, Discrimination and Racism in Healthcare and Regulation was presented by Dr. Saroo Sharda.
21. Council received a report from Ms. Sheila Torrance on the outcome of consultations on the *Medical Examinations by Non-Treating Physicians (NTMEs) Policy*. Council approved the revised policy with a sunset date of 3 years. The amended policy will be posted on the College website.
22. Council reviewed a request to extend the list of ENT procedures performed in a non- hospital treatment facility. The amended Bylaw 26.1 was approved in principle for the purpose of stakeholder consultation.
23. Dr. Werner Oberholzer presented a revised version of the SCoP Paramedic Treat and Release Protocols. Council approved the Treat and Release Protocols as presented.
24. Ms. Beckie Wills presented the College's Financial Statements to the period end 30 September, 2022. She also presented the FNIHB-SK Financial Statements.
25. A report on the CPSS Implementation Plan was received and Council revisited some aspects of the proposed new logo and provided its final approval of a colour palate. Council also established a committee to assist with reviewing some initiatives related to Strategic goal #2.
26. An application pursuant to section 54.01 of *The Medical Profession Act, 1981* was brought by the Registrar's Office to have Council consider whether a penalty should be imposed with respect to Dr. Ali Al-Khafaji's admission of unprofessional conduct in Ontario. Dr. Al-Khafaji's licence was revoked in Ontario following his admission and the tribunal's finding of unprofessional conduct involving a sexual relationship with a vulnerable patient.

Submissions for the College were made by Ms. Sheila Torrance. Submissions were made on behalf of Dr. Al-Khafaji by Mr. Colin Ouellette.

Council imposed penalty consisting of an in-person reprimand, revocation of licence to practice for a period of 3 years, conditions including a course on boundaries and an independent assessment, and payment of costs. The penalty will be posted on the College website. Reasons for its decision and a written reprimand will be returned to Council for its consideration and approval. The reprimand will be delivered in person at the January meeting.

27. The Council heard a request for an extension of time to complete two terms of a previously imposed penalty order. Submissions on behalf of Dr. B. Zimmermann were made by Mr. David Thera and submissions on behalf of the College by Ms. Sheila Torrance. Council denied the request for an extension.
28. Council received a report from Ms. Rochelle Wempe on the College's positive experience with using a Hearing Administrator. Meetings with the Hearing Administrator have resulted in avoiding lengthy contested discipline hearings and streamlined other processes. The Council considered proposed bylaw amendments that would create a permanent position of the Office of the Hearing Administrator. The bylaw amendments were approved in principle for the purpose of stakeholder consultation.
29. Council reviewed the *Uninsured Services Policy* and directed a committee comprised of Ms. Hlady, Dr. Adeboye, Dr. Igbekoyi, Dr. Brownbridge, Dr. Oberholzer, and Ms. Torrance to review the matter and bring back recommendations for the January meeting.
30. Council reviewed the *Website Terms of Use and Privacy Policy* and approved the policy as presented with a sunset date of 3 years. The updated policy will be posted to the College website.
31. Council reviewed *The Practice of Telemedicine Policy*. The revised policy that was renamed *Virtual Care* was approved in principle for the purpose of stakeholder consultation.
32. Council reviewed the *Providing Care to Employees & Co-Workers Guideline*. Council directed a committee be established to review the guideline and bring back a recommendation to the January meeting. The committee established is comprised of Dr. Igbekoyi, Dr. Adeboye, Dr. Snyman, Dr. Pillay, Mr. Chabot, Dr. Kasim, Dr. Oberholzer and Mr. Thompson.
33. The status of bylaw report was provided by Ms. Rochelle Wempe. All bylaws submitted to date have been approved or are still within the approval timeframe.
34. Council approved the Closed Agenda as presented.
35. Council approved the Closed Session minutes from the October 1, 2022 meeting.
36. The President reported on the actions taken by the Executive Committee since the September Council Meeting.
37. Council approved reasons for its decision pertaining to the amendment of the terms of penalty previously imposed on Dr. M. Horri. The reasons will be provided to Dr. Horri and posted on the College website.
38. Council approved reasons for its decision pertaining to its decision to revoke the licence of Dr. D. Davis. The reasons will be provided to Dr. Davis.
39. Council considered a Preliminary Inquiry Committee report and declined to lay charges of unprofessional conduct against a physician.

40. Council received an update on the progress of the discipline cases contained in the Discipline Tracker from legal counsel, Ms. S. Torrance.
41. Council received an update on the Quality of Care Tracker from the Deputy Registrar, Dr. W. Oberholzer.
42. Council received a report from Ms. D. Wright pertaining to an update on the 2023 licensure renewal process.
43. Mr. Thompson provided a document that outlined concepts to consider when drafting potential bylaws that would be required to license Physician Assistants and the Council provided feedback.
44. Ms. Nicole Bootsman, Pharmacist Manager, provided information on the capacity constraints with providers managing Buprenorphine/Naloxone treatment within the chronic pain clinic and their request that the Council consider removing the requirement for education before physicians are approved as maintenance providers. Transfer of stable patients to a maintenance provider has been difficult and it is hoped that by removing the requirement for education, more family physicians will be able to become a maintenance provider. Council accepted the recommendation to remove the educational requirement for maintenance providers and replace it with "strongly encourage" completion of the educational course/workshop, in the hope that it will increase capacity of maintenance providers.
45. Council engaged in an assessment of the meeting.
46. Ms. Torrance provided a list of "For Action Items" from the meeting and their designation.