



## EXECUTIVE SUMMARY

of the

**20 & 21 MARCH, 2020 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](mailto: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, Sauteaux 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 amended the charges previously laid against Dr. M. Horri.
3. Council reviewed and approved the Minutes from the Friday 24 January, 2020 Council meeting.
4. Council received a report from the Associate Registrar on the actions taken in relation to the "For Action Items" from the previous meeting.
5. Council reviewed and discussed Monitoring Reports from the Registrar with respect to:
  - (a) The Registrar's Compliance with Council's Executive Limitation Policies pertaining to:
    - (i) EL – 7 – Regulatory Functions; and

- (ii) EL – 9 –Communication and Support to Council; and
- (iii) EL – 10 – Emergency Executive Succession.

6. Council received a report from the working group dealing with the policy on End of Life Care.
7. Council received a report from Ms. Torrance with respect to an update on the management of physicians affected with blood borne viruses. The policy Physician/Medical Students with Blood Borne Viral Infections was approved in principle for the purpose of stakeholder consultation. Due to the current pandemic activity, consultation will be delayed until after the June Council meeting.
8. Draft amendments to Bylaw 24.1 Reporting of Blood Borne Infections were approved in principle for the purpose of stakeholder consultation. Due to the current pandemic activity consultation will be delayed until after the June Council meeting.
9. The policy Access to the Pharmaceutical Information Program (PIP) or Electronic Health Record (eHR) Viewer was approved in principle. Council will consider at the June meeting when stakeholder consultation will begin. At a future time Council will consider possible changes to the licensure renewal application to include questions to enquire whether physicians have access to PIP or eHR Viewer.
10. The policy Physicians Accessing Patient Specific Information from Electronic Databases was approved in principle. Council will consider at the June meeting when stakeholder consultation will begin.
11. Council received an update from the working group on Truth and Reconciliation. Work is ongoing on developing a commitment statement and arranging for a formal commitment and flag ceremony.
12. The committee working on governance issues pertaining to whether there should be additional standing committees has lost a member and a new Councilor was encouraged to step forward to join the committee. College staff will reach out to the Councilors for expressions of interest.
13. Council approved the policy entitled Consultations – College Policy Development with a sunset date of 5 years. The policy deals with the redaction of certain information when it receives responses from consultations. The policy will be posted on the College website.
14. The policy entitled Victim Impact Statements was approved with a sunset date of 5 years. The policy will be posted on the College website.
15. Council amended the Sexual Boundaries Policy to include the section on support for complainants. Staff may add additional resources to the policy. The policy will be posted on the College website.
16. Council reviewed the policy entitled Contents and Access to Information in Physicians' College Files and approved an amended policy with a sunset date of 5 years. The policy will be posted on the College website.

17. Council reviewed the policy entitled Public Access to Council Meetings and accepted the amended policy with a sunset date of 5 years. The policy will be posted on the College website.
18. Council appointed a committee to review the policy entitled Standards for Primary Care. The committee will consist of Dr. O. Igbekoyi, Dr. A. Snyman and Mr. B. Salte. Council has authorized the committee to add members as it sees fit.
19. Council determined it would develop a policy on the Referral Process. The committee will consist of Dr. A. Beggs, Mr. K. Smith, Dr. W. Oberholzer, Dr. Val Olsen, Dr. H. Halldorson and Mr. B. Salte. Council has authorized the committee to add members as it sees fit.
20. Council received a report on the March reporting of the current strategic plan.
21. Council received a report on the process related to the development of the new strategic plan. The next steps of the development are to identify key initiatives for each of the key objectives. Two Councilors expressed an interest in assisting with this work. Dr. P. Hanekom expressed an interest in assisting with goal 4 related to optimal opioid prescribing and Mr. F. Ogunrinde expressed general interest in the development of key initiatives. Other Councilors will be included at their request.
22. Council approved a medical protocol for paramedics performing nasopharyngeal and oropharyngeal swabs.
23. Council appointed new members to the Discipline Committee. The members consisted of the following:
  - Dr. J. Carter
  - Dr. J. Cross
  - Dr. S. Leibel
  - Dr. M. Beheshti
  - Dr. B. Bouchard
  - Ms. L. Sullivan (administrative lawyer)
24. Council considered amendments to GP-8 to address hearings that are cancelled or adjourned on short notice. The amendments were approved and the document will be updated.
25. Council conducted a penalty hearing pertaining to Dr. J. Herbert. Dr. Herbert admitted charges of unprofessional conduct. The charges he admitted are as follows:

*The Executive Committee of the College of Physicians and Surgeons directs that, pursuant to section 47.6 of **The Medical Profession Act, 1981**, the Discipline Committee hear the following charges against Dr. John Wesley Herbert, namely:*

  1. *You, Dr. John Wesley Herbert, are guilty of unbecoming, improper, unprofessional, or discreditable conduct contrary to the provisions of section 46(o) of **The Medical Profession Act, 1981** s.s. 1980-81 c. M-10.1.*

The evidence that will be led in support of this charge will include one or more of the following:

- a) You breached the undertaking which you provided to the College of Physicians and Surgeons dated May 3, 2016;
- b) You failed to respond in a timely manner to communications from the College of Physicians and Surgeons related to one or more supervision reports for Dr. Gbamgbola;
- c) The undertaking which you provided dated May 3, 2016 contained the following provisions, among others:
  - 3) I will comply with the expectations contained in the section entitled "Part 3 -- Supervision Process" of the document entitled "Supervised Practice SIPPA Sheet", and, in particular, I will conduct visits and submit reports on the schedule described in that document;
  - 4) I have reviewed the template for reports prepared by the College of Physicians and Surgeons and agree to provide reports to the College in that format, or such other format as may be adopted by the College;
  - 5) I agree that if the College should request additional information from me pertaining to my review of Dr. Gbamgbola's practice, I will provide that information within a reasonable time;
  - 6) I understand that the Registrar may increase or decrease the number and frequency of visits and frequency of reports after reviewing information about Dr. Gbamgbola's performance, including information from the reports which I will submit;
  - 7) I agree that, if the Registrar increases or decreases the number and frequency of visits or increases or decreases the frequency of reports, I will comply with the amended requirements;
- f) You failed to provide one or more reports as required by your undertaking;
- g) You failed to provide one or more reports on a timely basis as required by your undertaking.

2. You Dr. John Wesley Herbert are guilty of unbecoming, improper, unprofessional, or discreditable conduct contrary to the provisions of section 46(o) and/or section 46(p) of The Medical Profession Act, 1981 s.s. 1980-81 c. M-10.1, and/or bylaw 16.1 and/or bylaw 16.2 of the bylaws of the College of Physicians and Surgeons.

The evidence that will be led in support of this charge will include one or more of the following:

- a) By letter dated March 20, 2019 Dr. Werner Oberholzer, the Deputy Registrar of the College of Physicians and Surgeons wrote to you, requiring a response to that letter in accordance with bylaw 16.2;
- b) You did not reply to the letter of March 20, 2019 within 14 days as required by bylaw 16.2;
- c) You did not provide the information requested in the letter of March 20 to the best of your ability as required by bylaw 16.2;
- d) As at May 30, 2019 you had not responded to the letter of March 20, 2019.

Submissions were made by Ms. Rochelle Wempe on behalf of the Registrar's Office and submissions were made by Ms. S. Gillanders on behalf of Dr. Herbert.

Council imposed the following penalty on Dr. Herbert:

*The Council of the College of Physicians and Surgeons imposes the following penalty on Dr. John Herbert pursuant to The Medical Profession Act, 1981:*

- 1) *Pursuant to section 54(1)(b) of The Medical Profession Act, 1981, the Council hereby suspends Dr. Herbert from practicing medicine for a period of one month. The suspension will begin at 12:01 am on April 19, 2020 and continue until 11:59 pm on May 18, 2020.*
- 2) *Pursuant to Section 54(1)(f) of The Medical Profession Act, 1981, the Council directs that Dr. Herbert pay a fine in the amount of \$1500. The fine shall be paid in full on or before June 19, 2020.*
- 3) *Pursuant to Section 54(1)(b) of The Medical Profession Act, 1981, the Council hereby reprimands Dr. Herbert. The format of that reprimand will be in written format.*
- 4) *Pursuant to Section 54(1)(g) of The Medical Profession Act, 1981, Dr. Herbert is required to successfully complete an accredited course on medical record-keeping, to be approved in advance by the Registrar, and provide proof of completion.:  
"Medical Record Keeping" by ProBE/CPEP, "Medical Record Keeping" by PACE, "Medical Record Keeping" by PBI, and "Medical Record Keeping" by the University of Toronto are medical record-keeping courses approved by the Registrar;.*
- 5) *Pursuant to Section 54(1)(g) of The Medical Profession Act, 1981, the Council directs that Dr. Herbert continue to receive treatment through the Physician Health Program of the Saskatchewan Medical Association, to follow all recommendations from that program, and to only discontinue any treatment if he receives the approval of the Registrar to do so.*
- 6) *Pursuant to Section 54(1)(i) of The Medical Profession Act, the Council directs Dr. Herbert to pay the costs of the investigation and penalty hearing in the amount of \$1020.00. Such payment shall be made in full on or before June 19, 2020.*

A reprimand will be drafted for adoption at the June meeting of Council. The penalty imposed will be posted on the College website.

26. Council heard an application for restoration of licence for Dr. M. Sayeed. Dr. M. Sayeed's restoration of licence was approved but with limitations; a limit of 25 work hours per week, a limit not to see more than 20 patients per day and the requirement to have a chaperone as set out by Council.
27. Council conducted a penalty hearing pertaining to Dr. M. Horri. Dr. Horri admitted the following two sets of charges:

*The Executive Committee of the College of Physicians and Surgeons directs that, pursuant to section 47.5 of **The Medical Profession Act, 1981**, the Discipline Committee hear the following charge against Dr. Mehdi Horri, namely:*

*You Dr. Mehdi Horri are guilty of unbecoming, improper, unprofessional, or discreditable conduct contrary to the provisions of section 46(o) and/or section 46(p) of **The Medical Profession Act, 1981** S.S. 1980-81 c. M-10.1, and/or bylaw 26.1 and/or bylaw 8.1(b)(ix).*

The evidence that will be led in support of this charge will include some or all of the following:

- a) On or October 30, 2018 you provided medical care to a patient identified in this charge as Patient Number 1;
- b) The medical care provided to Patient Number 1 was provided at your medical clinic;
- c) Your medical clinic was not approved as a non-hospital treatment facility pursuant to bylaw 26.1;
- d) You provided or arranged for the administration of propofol to Patient Number 1;
- e) Your actions in providing propofol to Patient Number 1 contravened bylaw 26.1;
- f) Your actions in providing propofol to Patient Number 1 failed to meet the standard of practice of the profession.

1. The Council of the College of Physicians and Surgeons directs that, pursuant to section 47.5 of **The Medical Profession Act, 1981**, the Discipline Committee hear the following charge against Dr. Mehdi Horri, namely:

You Dr. Mehdi Horri are guilty of unbecoming, improper, unprofessional, or discreditable conduct contrary to the provisions of section 46(o) and/or section 46(p) of **The Medical Profession Act, 1981** S.S. 1980-81 c. M-10.1, and/or bylaw 8.1(b)(ix) and/or paragraphs 1, 6, 14, 15 and/or 52 of the Code of Ethics contained in bylaw 7.1. of the bylaws of the College of Physicians and Surgeons of Saskatchewan.

The evidence that will be led in support of this charge will include some or all of the following:

- a) On or about May 22, 2017 you were involved in the care of a patient identified in this charge by the initials "L.B.";
- f) You administered Rocuronium to L.B. without advising STARS personnel that it had been administered;
- g) You left a medical student in charge of arranging the transfer of L.B. to Regina without providing appropriate oversight;
- h) You failed to be present when STARS personnel arrived to transfer L.B. to Regina, leaving the medical student to communicate with STARS personnel.

2. The Council of the College of Physicians and Surgeons directs that, pursuant to section 47.5 of **The Medical Profession Act, 1981**, the Discipline Committee hear the following charge against Dr. Mehdi Horri, namely:

You Dr. Mehdi Horri are guilty of unbecoming, improper, unprofessional, or discreditable conduct contrary to the provisions of section 46(o) and/or section 46(p) of **The Medical Profession Act, 1981** S.S. 1980-81 c. M-10.1, and/or bylaw 8.1(b)(ix) and/or paragraphs 1, 6, 14, 15 and/or 52 of the Code of Ethics contained in bylaw 7.1. of the bylaws of the College of Physicians and Surgeons of Saskatchewan.

The evidence that will be led in support of this charge will include some or all of the following:

- a) On or about April 22, 2017 you were involved in the care of a patient identified in this charge by the initials "A.W.";
- b) You provided or arranged for a blood transfusion for A.W.;
- c) You failed to follow the advice of a hemopathologist who was consulted with respect to the care of the patient A.W.;
- d) You failed to follow the Transfusion Protocol in place at the hospital when providing or arranging for the blood transfusion for A.W.;
- e) You exhibited anger towards nursing staff involved in the care of A.W.;
- f) You placed a chart entry in the chart for A.W to the effect that you might contact the licensing body for nursing.

3. The Council of the College of Physicians and Surgeons directs that, pursuant to section 47.5 of **The Medical Profession Act, 1981**, the Discipline Committee hear the following charge against Dr. Mehdi Horri, namely:

You Dr. Mehdi Horri are guilty of unbecoming, improper, unprofessional, or discreditable conduct contrary to the provisions of section 46(o) and/or section 46(p) of **The Medical Profession Act, 1981** S.S. 1980-81 c. M-10.1, and/or bylaw 8.1(b)(ix) and/or paragraphs 1, 6, 14, 15 and/or 52 of the Code of Ethics contained in bylaw 7.1. of the bylaws of the College of Physicians and Surgeons of Saskatchewan.

The evidence that will be led in support of this charge will include some or all of the following:

- a) On or about April 21, 2017 you were involved in the care of a patient identified in this charge by the initials "Q.L.";
- c) You provided or arranged for an iron infusion for Q.L.;
- d) You provided or arranged for the infusion of fresh frozen plasma for Q.L.;
- e) Your actions were not within the standard of practice of the profession.

5. The Council of the College of Physicians and Surgeons directs that, pursuant to section 47.5 of **The Medical Profession Act, 1981**, the Discipline Committee hear the following charge against Dr. Mehdi Horri, namely:

You Dr. Mehdi Horri are guilty of unbecoming, improper, unprofessional, or discreditable conduct contrary to the provisions of section 46(o) and/or section 46(p) of **The Medical Profession Act, 1981** S.S. 1980-81 c. M-10.1, and/or bylaw 8.1(b)(ix) and/or paragraphs 1, 6, 14, 15 and/or 52 of the Code of Ethics contained in bylaw 7.1. of the bylaws of the College of Physicians and Surgeons of Saskatchewan.

The evidence that will be led in support of this charge will include some or all of the following:

- a) On or about June 12, 2017 you were involved in the care of a patient identified in this charge by the initials "W.V.";
- b) One or more pharmacists involved in the care of W.V. recommended a reduction in the quantities of medications being administered to W.V.;
- c) You failed to reduce the quantities of medications being administered to W.V.;

Submissions were made by Mr. B. Salte, Q.C. on behalf of the Registrar's Office and submissions were made by Ms. M. Ouellette, Q.C. on behalf of Dr. Horri.

Council imposed the following penalty on Dr. Horri:

- 1) *Pursuant to Section 54(1)(e) of The Medical Profession Act, 1981, the Council hereby reprimands Dr. Horri. The format of that reprimand will in written and verbal format. Dr. Horri is required to appear before the next regularly scheduled meeting of the Council to be present to have the reprimand administered in person.*
- 2) *Pursuant to Section 54(1)(b) of the Act, the Council hereby suspends Dr. Horri for a period of four months commencing April 4, 2020 at 12:01 a.m.*
- 3) *Pursuant to section 54(1)(i) of the Act, the Council directs Dr. Horri to pay the costs of and incidental to the investigation and hearing. The costs of the investigation and hearing are the costs of the preliminary inquiry committee consisting of Dr. Vogel and Mr. Mulder in the amount of \$5189.45, legal costs of \$5,280 and the costs of the preliminary inquiry committee consisting of Dr. Overli-Domes and Lorne Mulder. The costs shall be payable in full by September 20, 2020.*
- 4) *Pursuant to section 54(2) of the Act, if Dr. Horri should fail to pay the costs as required by paragraph 3, Dr. Horri's licence shall be suspended until the costs are paid in full.*
- 5) *The Council reserves to itself the right to amend any of the terms of this penalty decision, upon application by Dr. Horri. Without limiting the authority of the Council, the Council may extend the time for Dr. Horri to pay the costs required by paragraph 4.*

A reprimand will be drafted for adoption at the June meeting of Council. The penalty imposed will be posted on the College website.

28. Council conducted a penalty hearing pertaining to Dr. R. Katz. Dr. Katz admitted the following charge:

*The Executive Committee of the College of Physicians and Surgeons directs that, pursuant to section 47.6 of The Medical Profession Act, 1981, the Discipline Committee hear the following charge against Dr. Ronald Katz, namely:*

*You Dr. Ronald Katz are guilty of unbecoming, improper, unprofessional, or discreditable conduct contrary to the provisions of Section 46(o) and/or section 46(p) of The Medical Profession Act, 1981 S.S. 1980-81 c. M-10.1 and/or Bylaw 7.1(b) particulars whereof are that you treated a member of your immediate family by prescribing Demerol, when such treatment did not meet the conditions of paragraph 20 of the Code of Ethics.*

Submissions were made by Mr. B. Salte, Q.C. on behalf of the Registrar's Office and submissions were made by Mr. D. Thera, Q.C. on behalf of Dr. Katz.

Council imposed the following penalty on Dr. Katz:

*The Council of the College of Physicians and Surgeons imposes the following penalty on Dr. Ronald Katz pursuant to The Medical Profession Act, 1981 (the "Act"):*

- 1) *Pursuant to Section 54(1)(b) of The Medical Profession Act, 1981, the Council hereby reprimands Dr. Katz. The format of that reprimand will be in written and*



- verbal format. Dr. Katz is required to appear before the next regularly scheduled meeting of the Council to be present to have the reprimand administered in person;*
- 2) *Pursuant to section 54(1)(g) of the Act, Council requires that Dr. Katz successfully complete an ethics course on professionalism to the satisfaction of the Registrar. Such course shall be completed at the first available date. The programs "Medical Ethics, Boundaries and Professionalism" by Case Western Reserve University, "Probe Program" by CPEP and "Medical Ethics and Professionalism" by Professional Boundaries Inc., are ethics programs acceptable to the Registrar.*
  - 3) *Pursuant to section 54(1)(i) of the Act, the Council directs Dr. Katz to pay the costs of and incidental to the investigation and hearing in the amount of \$720.00. Such payment shall be made in full by April 20, 2020.*

A reprimand will be drafted for adoption at the June meeting of Council. The penalty imposed will be posted on the College website.

29. Council received a verbal report from Mr. Salte with respect to a bylaw amendment to change eligibility for Senior Life status from 40 years to 35 years of licensure. Council directed legal counsel to prepare a draft bylaw amendment for consideration at the June Council meeting.
30. Council received a proposal from the Saskatchewan Health Authority on a Medical Care Assistant Program. Council directed the Registrar to write to the SHA requesting additional information to support their application for approval.
31. Council received a report pertaining to the quarterly financial statements to the period end 31 December, 2019 from Ms. B. Wills, Director of Accounting and Finance.
32. Council received a report from Mr. Salte with respect to a proposed request by the Network of Inter-Regulatory Organisations (NIRO) for amendments to the template legislation for health regulatory organizations. Council supported the requested changes NIRO has requested to the template legislation as set out in document Info 72\_20.
33. Council received a report from the Associate Registrar on the status of bylaws. The time for the approval process for the bylaw amendment from the January Council meeting has not yet passed, however there have been no concerns expressed.
34. Council reviewed a Preliminary Inquiry Committee report and determined it did not have sufficient evidence to charge a physician with unprofessional conduct.
35. Council directed legal counsel to prepare a letter to be reviewed by the Executive Committee pertaining to concerns arising from a Preliminary Inquiry Committee report.
36. Council received a report on the actions taken by the Executive Committee since the January meeting of Council.
37. Council reviewed and approved reasons for decision pertaining to Dr. N. Tandon. The reasons will be posted on the College website.
38. Council reviewed and approved reasons for decision pertaining to Dr. M. Zwane. The reasons will be posted on the College website.

39. Council reviewed and approved reasons for decision pertaining to Dr. J. Velestuk. The reasons will be posted on the College website.
40. Council reviewed and approved the reprimand pertaining to Dr. J. Velestuk. The reprimand will be posted on the College website.
41. Council provided approval of the suggested approach to provide instructions to outside legal counsel.
42. Council provided approval of the template pertaining to drafting reasons for a decision.
43. Council received a report from Dr. W. Oberholzer pertaining to the quality of care tracker and some key performance indicators.
44. Council received a report from Mr. B. Salte pertaining to the outstanding discipline cases.
45. Council provided advice to the Registrar with respect to the MAiD proposal to authorise family physicians who have a longitudinal relationship with the patient requesting MAiD to be one of the two persons assessing patients for MAiD eligibility, without a scope change.
46. Council provided direction to legal counsel to prepare an update to the MAiD policy to address impending legislative changes to be considered at the June Council meeting.
47. Council received a report from a meeting of the College Executive and SMA Executive pertaining to potential approaches to concerns being forwarded to the College regarding care issues and excessive billing. Council approved the approach in principle, and authorized the staff to work with the SMA and other parties to address these issues.
48. Council received an update on the College's COVID-19 preparation. Council is aware that the Registrar declared the "declaration of an emergency". Bylaw 2.18 Emergency Licensure is in effect which enables the Registrar to waive any of the requirements of licensure contained in Bylaw 2.3 through 2.6; and suspend the effect of any provisions of the College's bylaws, standards, policy or guidelines. Staff are working with other stakeholders in developing a single shared communication process for communicating with physicians to improve accuracy and timeliness and avoid overwhelming the physicians with multiple communications. In addition, internal work processes to improve the ease of providers providing appropriate care have been undertaken. The College's internal continuity plan was noted.
49. Council reviewed a for-action item list.