



EXECUTIVE SUMMARY

of the

19 & 20 JUNE, 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.

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 draft reprimand pertaining to Dr. M. Horri. The reprimand will be posted on the College website.
3. Council adopted the agenda with one amendment that document Confid. 43_20 be discussed in the Closed Session of Council.
4. Council reviewed and approved the Minutes pertaining to:
 - March, 2020 – Meeting of Council
 - 14 April, 2020 – Email Vote
 - 24 April, 2020 – Email Vote
 - 28 April, 2020 – Email Vote

5. Council received a report from the Associate Registrar on the actions taken in relation to the "For Action Items" from the previous meeting.
6. Council reviewed and discussed Monitoring Reports from the Registrar with respect to:
 - (a) The Registrar's advancement of Council's END – 4 – Healthy Public Policy;
 - (b) The Registrar's Compliance with Council's Executive Limitation Policies pertaining to:
 - (i) EL – 11 – Public Image; and
 - (ii) EL – 12 – Partnerships & Interorganisational Relationships; and
 - (iii) EL – 13 – Information Management.
7. Council received a report on the audited financial statements from Ms. Beckie Wills, Director of Accounting and Finance and Ms. L. Dunville, Auditor. The financial statements to December 31, 2019 were approved.
8. Council received a report pertaining to the quarterly financial statements to the end of March, 2020.
9. Council appointed KPMG the auditor for 2020.
10. Council approved the use of operating budget funds for an IT capital project and authorized the 2020 budget be amended accordingly.
11. Council provided post-approval for audio-visual equipment purchased for Boardroom B and authorized the budget for 2020 be amended accordingly.
12. Council approved the request for expenditure for the purchase of the iMIS Automation Module and authorized the 2020 budget be amended accordingly.
13. Council received a report from Ms. Torrance with respect to the amended policy entitled "Physicians/Medical Students with Blood-Borne Viral Infections" and amendments to Bylaw 24.1, approved in principle at the March meeting. Council directed that consultation with stakeholders commence.
14. Council directed that stakeholder consultation be commenced on the policy entitled "Prescribing: Access to the Pharmaceutical Information Program (PIP) or Electronic Health Viewer (eHR)" and the policy entitled "Physicians Accessing Patient-Specific Information from Electronic Databases".
15. Council received a report from Mr. Salte pertaining to the committee that was reviewing additional standing committees and Terms of Reference (ToR) of standing committees. Council directed that the Nominating Committee meet to discuss how it will implement its mandate related to the recommendations for members appointed to College committees and refreshing membership of those committees. The nominating committee consisting of Dr. Hanekom, Dr. Beggs, and Dr. Venkata will report back to Council.

16. Council directed draft bylaw amendments and changes to the ToR for committees to include a requirement for annual reporting to Council at the September meeting. It is the expectation that reports presented by these committees will be provided to Council throughout the year. Council determined it will receive the annual reports from the committees for information.
17. Council approved disbanding the Kendel Service Award Committee and directed that this be included as a responsibility of the Nominating Committee. Amendments to the bylaw are to be brought back to Council at the September meeting.
18. Council established a committee to develop draft ToR for a Medical Informatics Committee. Dr. Shaw will lead the committee with the ability to add individuals.
19. The Annual General Meeting Committee was disbanded and Council directed its responsibilities be assigned to the Executive Committee.
20. The ToR for the Compensation and Benefits Committee will be amended so that a member of the Finance Committee and the President are members of the Compensation and Benefits Committee. Changes to the ToR will be brought back for approval at the September meeting.
21. The ToR for the Registration Committee will be expanded to include providing advice to the Registrar or the Council in relation to specific applications for a licence to practise medicine, if the Registrar or the Council asks the Registration Committee to provide advice. Council directed that changes to the ToR be brought back for approval at the September meeting.
22. Council discussed amending the bylaw pertaining to Senior Life and determined it would not change this bylaw. The Registrar will survey past recipients to determine if another method of recognition would be more appropriate.
23. Amendments to the MAiD policies were approved with a change to the documents to reference only requirements for a reasonably foreseeable death in one document, and only requirements for death not reasonably foreseeable in the other document. These policies will not be posted on the College website until after the legislative changes come into effect.
24. A committee was named to review the policy entitled "Medical Practice Coverage". Dr. Igbekoyi, Dr. Kasim, Dr. Ghorl and Dr. Oberholzer will review this policy and bring back a recommendation for consideration at the September meeting.
25. Council appointed a committee to provide recommendations to Council for a policy on Social Media. The committee members include Dr. Brownbridge, Dr. Igbekoyi and Dr. Oberholzer and the committee has the ability to add additional members.
26. Council approved Dr. El-fellani Mohammed's request for an extension of time to successfully complete a boundaries course.

27. Council approved the appointment of Ms. T. Horkoff to the Quality of Care Advisory Committee.
28. Council approved a grant of \$5,000 to be paid to medSask and suggested that an article be included in DocTalk about medSask's services.
29. Council received a report from Ms. Torrance with respect to the interpretation of EL-6 and possible amendment of the CPSS Communication Strategy for Discipline Matters. Council directed that recommended changes to EL-6 be considered at the September meeting.
30. Council conducted a penalty hearing pertaining to Dr. S. Ziarko. Dr. Ziarko admitted charges of unprofessional conduct. The charges admitted are as follows:

*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 that the following charges against Dr. Svitlana Ziarko, namely:*

*1. You Dr. Svitlana Ziarko 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** and/or bylaw 8.1(b)(iii), and /or bylaw 7.1(b) and (c), paragraph 16 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:

- 1) You terminated the physician-patient relationship with Patient 1 who had been a long-term patient of your clinic.*
- 2) On or about February 21, 2018 you received a written request for Patient 1's medical chart to be transferred to her new physician.*
- 3) On or about February 26, 2018 your staff advised Patient 1 that a fee of \$174.60 would need to be paid before the file would be transferred.*
- 4) Patient 2 was a long-term patient of your clinic who terminated the physician-patient relationship because she was re-locating.*
- 5) On or about February 12, 2018 you received a request for Patient 2's medical chart to be transferred to her new physician.*
- 6) Your staff verbally told Patient 2 that a chart transfer fee of \$295.00 must be paid before the chart would be transferred.*
- 7) Patient 3 was a patient of another physician in your clinic.*
- 8) The physician-patient relationship was terminated.*
- 9) On or about December 19, 2018 your clinic received a fax request from Patient 3's new physician for Patient 3's medical records.*
- 10) On or about December 21, 2018 Patient 3 received a phone call from your clinic staff advising he had to pay \$150.00 before his patient file would be transferred.*
- 11) Patient 3 advised you and/or your staff that he had no money to pay the \$150.00 to transfer his file and he was told that he must pay it if he wanted the file transferred.*
- 12) You caused or permitted your staff to quote an excessive fee to Patient 1;*
- 13) You caused or permitted your staff to quote an excessive fee to Patient 2;*
- 14) You caused or permitted your staff to quote an excessive fee to Patient 3;*

15) You failed to exercise due diligence to ensure that the fees your clinic quoted for transferring patient files for Patient 1, Patient 2, and/or Patient 3's were not excessive.

Submissions were made by Ms. Wempe on behalf of the Registrar's Office and by Mr. Cann on behalf of Dr. Ziarko. Council imposed the following penalty on Dr. S. Ziarko:

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

1) Pursuant to Section 54(1)(f) of The Medical Profession Act, the Council directs that Dr. Ziarko pay a fine in the amount of \$3000. The fine shall be paid in full on or before December 1, 2020.

2) Pursuant to Section 54(1)(e) of The Medical Profession Act, the Council hereby reprimands Dr. Ziarko. The format of that reprimand will be in written format.

3) Pursuant to Section 54(1)(g) of The Medical Profession Act, 1981, Dr. Ziarko is required to sign an undertaking wherein she agrees within 6 months of the signing to do the following:

a) Establish an office policy on charges made for the provision of patient records and the transfer of patient charts;

b) Submit the office policy document to the Registrar of the College of Physicians and Surgeons for approval. If the policy is not approved, make whatever revisions are recommended and resubmit it to the Registrar;

c) Take steps to ensure staff are instructed on the policy and to comply with the policy and report those steps to the Registrar.

Pursuant to Section 54(1)(i) of The Medical Profession Act, 1981 the Council directs that Dr. Ziarko pay the costs of the investigation in the amount of \$8,522.24. Such payment shall be made in full on or before 31 March, 2021. Payments will be made in equal monthly installments.

Reasons for the decision and a reprimand will be drafted for adoption at the September meeting of Council. The penalty imposed will be posted on the College website.

31. Council received a report from Mr. Salte with respect to whether it was possible to impose fines totalling more than \$15,000 when imposing penalty resulting from more than one charge of unprofessional conduct. Council received the opinion for information only.
32. Council approved a request from Dr. J. Velestuk to amend the terms of the penalty pertaining to payment of the fine and costs. The amended penalty will be posted on the College website.
33. Council approved a request from Dr. T. Chikukwa to amend the terms of the penalty pertaining to payment of the fine. The amended penalty will be posted on the College website.

34. Council received a presentation from Ms. Wempe with respect to the China Tribunal Judgement on Organ Trafficking and Medical Complicity. Council requested that the video shown be placed as a link on the website.
35. Council received a report from the Registrar with respect to the June reporting of the previous strategic plan. Council adopted a new strategic plan and authorised funds of up to \$30,000 to work on strategic initiatives associated with the new plan for the remainder of 2020.
36. Council received a request from the Saskatchewan Cancer Agency to amend the bylaw authorizing ministerial licences. Council approved the request to extend the date from 2020 to 2023 in the bylaw.
37. Council received a request with respect to the licensure of two physicians working at the Saskatchewan Cancer Agency. Council rejected the application of the extraordinary licensure bylaw, and directed the candidates be considered for provisional licensure through the normal route of a pre-licensure assessment, supervision and summative assessment. The details are to be set by the Registrar's Office.
38. Council determined that the Annual General Meeting will be held at the November Council meeting.
39. Council amended Bylaw 35.1 Payment at Specialist Rates to allow the 2020 cohort of candidates who successfully completed their residency to be paid at specialist rates until they have the ability to challenge the certifying examinations.
40. Council considered a request from a non-hospital treatment facility for reduction of the annual fee due to the circumstances with Covid-19 and declined the request.
41. Council received a report from Dr. G. Stoneham pertaining to a document entitled Physician Duty of Care in a Pandemic: Ethical Considerations and Conflict Resolution.
42. Council received a presentation from Dr. B. Clapson pertaining to the assessment undertaken with respect to SIPPA supervision and assessment. Council directed additional discussion to be held at the September meeting.
43. Council received an update from Mr. Salte on the status of bylaws.
44. Council conducted a penalty hearing pertaining to a physician. The penalty imposed consisted of an immediate suspension, an in-person reprimand and costs.
45. Council considered a report from the Registrar with respect to the Prescription Review Program funding and contract. Council authorised the Registrar to use the funds that were set aside in 2019 in future years.
46. Council received a report on actions taken by the Executive Committee since the March meeting of Council.
47. Council reviewed and approved a reprimand pertaining to Dr. M. Zwane. The reprimand will be provided to Dr. Zwane and posted on the College website.

48. Council reviewed and approved a reprimand pertaining to Dr. J. Herbert. The reprimand will be provided to Dr. Herbert and posted on the College website.
49. Council reviewed and approved a reprimand pertaining to Dr. R. Katz. The reprimand will be provided to Dr. Katz and posted on the College website.
50. Council received a report from Ms. Torrance with respect to a Preliminary Inquiry Committee's report and recommendations. Council laid a charge of unprofessional conduct and approved post-charge ADR in relation to the care of a patient.
51. Council received a report from Ms. Torrance with respect to a Preliminary Inquiry Committee's report and recommendations and directed that no charges be laid in relation to the care of a patient.
52. Council considered a Preliminary Inquiry Committee's report and recommendations and determined charges be laid against the physician, with synoptic charges being posted on the College website.
53. Council considered a Preliminary Inquiry Committee's report and its recommendations and laid charges against a physician. The full charge will be posted on the College website.
54. Council appointed members to a Competency Committee pertaining to a physician.
55. Council received a report from legal counsel with respect to a possible bylaw amendment pertaining to the appointment of a competency committee by the Executive Committee. Council approved the amendment to allow competency committees to be appointed by the Executive Committee or by Council.
56. Council received a report from the Associate Registrar with respect to possible amendments to **The Medical Profession Act, 1981** to align with changes requested by other health professional bodies. Council supported the request to amend **The Medical Profession Act, 1981**.
57. Council received a report from Mr. Salte pertaining to the outstanding discipline cases.
58. Council received a report from Dr. Oberholzer with respect to the quality of care tracker.
59. Council received a report from the Registrar with respect to the Saskatchewan College of Pharmacy Professionals' new policy pertaining to patient ID verification.
60. Mr. Salte provided a report to Council that the previously requested amendments to the HIPA Regulations will go forward.
61. The Registrar provided a report with respect to a petition pertaining to MCCQEII.
62. Council received a draft of the annual report for review and feedback.

63. Council directed that a Diversity Action Plan for the College be prepared for the September meeting. The committee is to consist of Dr. Brownbridge and Dr. Shaw.