



## EXECUTIVE SUMMARY

of the

**19 & 20 JUNE, 2015 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 Robinson, Executive Assistant to the Registrar, at 101 – 2174 Airport Drive, Saskatoon, Saskatchewan, S7L 6M6, phone (306) 667 4625, Fax (306) 244 2600, or email [OfficeOfTheRegistrar@cps.sk.ca](mailto:OfficeOfTheRegistrar@cps.sk.ca).

1. Council received and discussed Monitoring Reports from the Registrar in respect to:
  - (a) The Registrar's advancement of Council's End 4 – Healthy Public Policy, and
  - (b) The Registrar's compliance with Council's Executive Limitation policies pertaining to:
    - (i) EL - 11 – Public Image
    - (ii) EL – 12 – Partnerships and Interorganisational Relationships, and
    - (iii) EL – 13 – Information Management
  
2. Council received a report from the Associate Registrar relating to the contents of minutes and a review of minute taking protocols as they pertain to Roberts' Rules of Order which Council has adopted as the rules to be followed in relation to meetings. Council agreed to follow Roberts' rules as follows:

- i. The name of the seconder of the motion will not be recorded.
- ii. If there are corrections to the minutes they will be recorded in the corrected minutes of the previous meeting, but not in the motion to approve the minutes at the current meeting.
- iii. The minutes will record that a motion was passed or defeated but not the actual number of votes cast for or against.
- iv. The number of abstentions will not be recorded, nor will persons abstaining be required to identify that they have done so.

In addition Council determined that it will modify Roberts' Rules to allow the President to participate in the discussions of its meetings.

3. Council received a report from the Nominating Committee pertaining to setting a limit to the maximum term a member can serve on a committee. The Nominating Committee proposed that committee membership for committees such as the Advisory Committee on Medical Imaging, the Committee on ECGs, the Complaints Resolution Advisory Committee, the Practice Enhancement Committee, the Finance Committee, the Health Facilities Credentialing Committee, the Nominating Committee and the Legislative Review Committee be limited to a maximum term of 8 years.

The committee further suggested that only one member per committee be replaced each year with members remaining until they are replaced. Council accepted the suggestions from the Nominating Committee and further directed that the committees review their Terms of Reference.

4. Council reviewed a report from the Working Group on the policy *Medical Practice Coverage* and accepted the revisions as proposed. The revision accepted under point 4 is, as follows:

*However, it is not ethically acceptable for physicians to unilaterally offload professional responsibilities on RHA facilities and programs without a mutually acceptable agreement with the RHAs in which they hold a medical staff appointment.*

Council reviewed the Companion Paper: Medical Practice Coverage and determined it was outdated and rescinded it.

5. Council received a report from the Registrar on the Development of Guidelines Related to the Operation of the Physician Health Program and accepted the draft document *Blood Borne Viral Infections in Healthcare Workers* prepared for the College of Physicians and Surgeons as a review of the legal, medical and regulatory factors which must be considered when addressing physicians with blood borne viral infections. The draft was accepted in principle for the purpose of ongoing consultations.
6. Council received a report from the Associate Registrar pertaining to the recommendations of the Working Group on the policy pertaining to Conscientious Objection. Council accepted the recommended changes to the policy and considered several options with respect to providing information to patients,

providing or arranging access to healthcare services and necessary treatments to prevent harm to patients, as follows:

## **5.2 Providing Information to Patients**

*The obligation to inform patients may be met by arranging for the patient to obtain the full and balanced health information required to make a legally valid, informed choice about medical treatment from another source, provided that arrangement is made in a timely fashion and the patient is able to obtain the information without undue delay. That obligation will generally be met by arranging for the patient to meet and discuss the choices of medical treatment with another physician or health care provider who is available and accessible and who can meet these requirements. The physician has the obligation to ensure that an arrangement which does not involve the patient meeting and discussing choices of medical treatment with another physician or health care provider is effective in providing the information required by this paragraph.*

## **5.3 Providing or Arranging Access to Health Services**

*Physicians can decline to provide legally permissible and publicly-funded health services if providing those services violates their freedom of conscience. However, in such situations, they must:*

- a) make an arrangement for the patient to obtain the full and balanced health information required to make a legally valid, informed choice about medical treatment as outlined in paragraph 5.2; and,*
- b) make an arrangement that will allow the patient to obtain access to the health service if the patient chooses.*

*Those obligations will generally be met by arranging for the patient to meet with another physician or other health care provider who is available and accessible and who can either provide the health service or refer that patient to another physician or health care provider who can provide the health service. If it is not possible to meet the obligations of paragraphs a) or b), the physician must demonstrate why that is not possible and what alternative methods to attempt to meet those obligations will be provided.*

## **5.4 Necessary Treatments to Prevent Harm or Provide Care to Patients**

*Physicians must provide medical treatment for a patient if treatment is necessary to avoid harming the patient's health or well-being. Accordingly:*

- a) Physicians must provide care in an emergency, where it is necessary to prevent imminent harm, even if providing that treatment conflicts with their conscience or religious beliefs.*
- b) When it is not possible to arrange for another physician or health care provider to provide a necessary treatment without causing a delay that would jeopardize the patient's health or well-being, physicians must provide the necessary treatment even if providing that treatment conflicts with their conscience or religious beliefs.*

The draft policy was amended to include these provisions and other changes and accepted in principle to be circulated for further consultation.

7. Council reviewed the following policies and added a sunset date:
  - *Clinics that Provide Care to Patients who are not Regular Patients of the Clinic* – sunset date of 3 years
  - *Standards for Primary Care* – sunset date of 5 years
  - *Patients who Threaten Harm to Themselves or Others* – sunset date of 3 years
8. Council received a report from the Director of Registration Services with respect to a potential change to entrance standards for the SIPPA Program. Dr. Jon Witt attended Council to request Council's support to change the entry requirements to the SIPPA Program from requiring the MCEE to requiring MCQE Part 1, and to discontinue the use of the EPAK examinations. Council provided its support for these changes.
9. Council received a report from the Registrar with respect to a request from the Ministry of Labour Relations and Workplace Safety to nominate two members; one diagnostic radiologist and another specialist in internal medicine or pathology to the Radiation Health & Safety Committee. A number of physicians expressed willingness to be appointed to the committee and Council nominated Dr. J. Newstead-Angel for the position of internal medicine/pathology and Dr. M. Butcher as the nominee for diagnostic radiology.
10. Council received a report from Ms. Amy McDonald, Director of Accounting and Finance for the College with respect to the quarterly financial report to the period ending March 31, 2015.
11. Council received a report from the Associate Registrar pertaining to the Federation of Medical Authorities of Canada's document *Physician- Assisted Dying – draft guidance document*. The issue of physician assisted dying was addressed by both the Board of Federation of Medical Regulatory Authorities of Canada (FMRAC) and by legal counsel at the FMRAC meeting June 5 & 6, 2015.

Council reviewed the FMRAC document and endorsed it as a draft guidance document to aid the work of the College's Working Group on Physician Assisted Death. The committee will include two representatives from the Saskatchewan Medical Association, two senior staff from the Registrar's Office, three Council members including a public member and physicians with expertise in bioethics, palliative care and oncology. Council named the committee members and directed that the committee review the Terms of Reference and use the approved in principle document *Physician Assisted Dying - draft guidance document from FMRAC*. Council directed the Registrar to write to the Government of Saskatchewan to request clarification of the government's action on this issue as well as provide support for the establishment of an oversight body.

12. Council received a registration services update from the Director of Registration Services, Ms. Barb Porter. Ms. Porter outlined the efforts made to assist physicians in choosing a pathway towards an enduring form of licensure through both the old and new Bylaws.
13. Council received a request from Regina Qu'Appelle Health Region's Senior Medical Officer to have Council consider attaching conditions to a regular licence that will require a physician who is licensed to be privileged within a regional health authority. Although Council agreed in principle that all physicians involved in healthcare should participate within a regional health authority and be privileged, Council did not think it is the right body to enforce such a requirement.
14. Council received a report from the Working Group and adopted standards for Council Governance Practices as part of the College's 5 year operational plan. Council also reviewed the recommendations of the Executive Committee and directed a second Council evaluation survey to be circulated in the summer months for review at its September Council meeting. Council also agreed to entertain a discussion about modernizing governance processes.
15. Council received a report from the Registrar with respect to a strategic plan update noting progress made on the strategic initiatives.
16. Council reviewed the policy on *Patient Physician Communication Guidelines – Using Electronic Communications* and adopted the policy as revised and set a sunset date of 3 years.
17. Council received a report from Mr. Gord Stewart, the auditor who presented the audited financial statements for the College of Physicians and Surgeons, the Prescription Review Program and the International Medical Graduates Evaluation Program. Council also appointed KPMG as auditors for the 2016 year.
18. Council received a report from Dr. Al Beggs on information received pertaining to the training of podiatrists in order to be registered with the Saskatchewan College of Podiatrists. Council directed the Registrar to thank the Saskatchewan College of Podiatrists for providing the information and to note that information has been received on the full course for therapeutics but that information on the one day course has not yet been received. Council reviewed the course for pharmacology for chiropodists and noted that there are no modules on the prescribing of benzodiazepines or corticosteroids in one training program although both are being considered as potential medications for prescribing by podiatrists. However, it was noted another training program did list competencies for the prescribing of corticosteroids.
19. Council received a report from our Communications Officer, Ms. Caro Gareau on the draft annual report. Council provided positive feedback on the proposed format and content.

20. Council received a report from the Associate Registrar about the possible amendment of College Bylaws with respect to the Medical Marijuana Bylaw 19.2. Council directed that Bylaw 19.2 be amended by removing the paragraph which requires physicians to provide information to the College. The Government of Canada has introduced changes to the regulations to be published June 17, 2015 in the Canada Gazette which require licensed producers to provide reports to the College at the College's request which renders this portion of Bylaw 19.2 redundant. Council revised Bylaw 19.2 by removing provision (h).
21. Council received an update from the Associate Registrar on the status of bylaws. All Regulatory and Administrative Bylaws which Council adopted prior to its March 2015 meeting have now come into effect. The Regulatory Bylaw amendment adopted in March 2015 to change the Buprenorphine Bylaw to state that it only applies to Buprenorphine for management of addiction has not been Gazetted as of the date of the report to Council.
22. Council received a report from the Registrar and reviewed a draft document pertaining to infection control practices. Council approved in principle the Public Health Ontario document for consideration for Saskatchewan's use. Council also approved sending out the document in its current form notifying physicians it is the intent of the CPSS to adopt and adapt the document for use in Saskatchewan and request feedback. The appropriate revisions will be made to the document for use in Saskatchewan. Council also directed the Registrar to write to the Government to request a legislative amendment to allow the College of Physicians and Surgeons to establish bylaws authorizing the College to inspect physicians' offices for public safety.
23. Council reviewed and adopted draft Reasons for its decision pertaining to Dr. S. Ishwarlall.
24. Council reviewed and adopted draft Reasons for its decision pertaining to Dr. D. Opper.
25. Council deferred reviewing and adopting draft Reasons for its decision pertaining to Dr. C. Huerto to the September Council meeting.
26. Council received an update on the circumstances surrounding a particular physician's licensure status.
27. Council reviewed a Preliminary Inquiry Committee report and determined it did not have the grounds to take further action.
28. Council received reports from the Registrar with respect to three appeals by complainants from the Complaints Resolution Advisory Committee's decisions with respect to complaints lodged against physicians. In each case, Council reviewed the report from the Registrar and the material before the Committee. With respect to all three appeals, the Council directed letters be provided to the complainants acknowledging the deficiencies in the process but indicating that no further action will be taken.

29. Council received a report from the Associate Registrar which reviewed the activity of legal counsel of the College of Physicians and Surgeons of Saskatchewan on the outstanding discipline investigations.
30. Council received an update on the building project. The parking lot is near completion.

Council also received an update on the current status of the activity taken in attempting to sub-lease the space previously occupied by the College.