



EXECUTIVE SUMMARY

of the

18 & 19 MARCH, 2016 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.

1. Council reviewed and discussed Monitoring Reports from the Registrar with respect to:
 - (a) The Registrar's Advancement of Council's End – 3 – Quality Health Care System, and
 - (b) The Registrar's Compliance with Council's Executive Limitation Policies pertaining to:
 - (i) EL –7– Regulatory Functions
 - (ii) EL –9–Communication and Support to Council, and
 - (iii) EL –10– Emergency Executive Succession.

2. Council reviewed the recommendation from the Health Facilities Credentialing Committee to grant privileges to Dr. C. Cobourn in order to perform lap band surgery in a private facility. Council approved the granting of privileges for a period of one year, however, expressed its preference for Dr. Cobourn to request limited privileges within the regional health authority in order to access laboratory and diagnostic investigations.

3. Council considered the Medical Council of Canada's request to nominate a candidate for appointment to the Medical Council of Canada's Board for the period 2016 to 2020. Dr. E. Tsoi was nominated for appointment to the MCC Board.
4. Council considered a request to nominate a representative to the University of Regina Senate for a three year term commencing July 1, 2016 to June 30, 2019. Dr. James Carter was nominated as the College's representative to the University of Regina Senate.
5. Council also considered a request for a nominee to represent the College on the University of Saskatchewan Senate. Mr. Marcel de la Gorgendiere was nominated.
6. Council considered the update report on Council 'For Action Items' and determined a number of committees working on the revision of policies have not completed their work. There was agreement that these committees would reconvene and prepare documents for Council's review in June. These policies include:

Public Disclosure of Council Documents considered during Open Council Meetings
Sick Slips/Role of Physicians in Certifying Illness
Medical Examinations by Non Treating Physicians
Regulation of Office Procedures
Physicians at Risk to Patients
Physicians/Surgeons Leaving Practice
Ending the Doctor Patient Relationship

7. Council reviewed the amendments to the policy *Withdrawal of Physician Services during Job Action*, accepted the amendments and approved the draft policy with a sunset date of 5 years.
8. Council reviewed the policy on *Pronouncement of Death* and the policy development on the *Medical Certificates of Death* and updated the policy including a revision to reflect that a nurse practitioner may now certify death in the province of Saskatchewan. Council approved the revised document and set a sunset date of 5 years. The policy is now entitled *Physician Obligations Regarding Medical Certification of Death*.
9. Council received a report from the Associate Registrar with respect to the *Standard: Unproven and Unconventional Treatment* which had reached its sunset date. Council directed the Registrar's Office to work with Dr. Julie Stakiw in revising the description of stage 1 to stage 4 clinical trials. The revised Standard will be reviewed at the June meeting.
10. Council received an update from Dr. Julie Stakiw the Chair of the Strategic Planning Committee. Council was apprised of the recommendations from the Registrar's Office with respect to changing some of the metrics and timeframes for the strategic initiatives. It was decided that the strategic plan would be presented to Council in portions in conjunction with the monitoring reports that are received by Council five times per year.
11. Council conducted a penalty hearing pertaining to Dr. T. Kabongo, pursuant to section 54 of *The Medical Profession Act, 1981*. Dr. Kabongo pled guilty to the charges laid by the Council of the College of Physicians and Surgeons that he billed for professional services which resulted in an overpayment; and his record keeping practices resulted in records which were misleading from a patient care perspective and also from a billing perspective.

Submissions were made by Ms. Kelsey O'Brian on behalf of Dr. Kabongo and by Mr. Bryan Salte on behalf of the Registrar's Office. Council considered the information and adopted the following resolution:

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

- 1) *Pursuant to Section 54(1)(f) of The Medical Profession Act, 1981, the Council hereby imposes a fine of \$5,000.*
- 2) *Pursuant to Section 54(1)(e), the Council reprimands Dr. Kabongo.*
- 3) *Pursuant to section 54 (1)(g), Dr. Kabongo is required to take an Ethics program in a form acceptable to the Registrar on or before December 31, 2016. The programs "Medical Ethics, Boundaries and Professionalism" by Case Western Reserve University and "Probe Program" by CPEP are ethics programs acceptable to the Registrar.*
- 3) *Pursuant to section 54 (1)(g), Dr. Kabongo is required to take a Records Keeping Course in a form acceptable to the Registrar on or before December 31, 2016.*
- 4) *Pursuant to section 54(1)(i), the Council directs Dr. Kabongo to pay the costs of and incidental to the investigation and hearing in the amount of \$11,425.82. Such payment shall be made by monthly payments of \$1000 not later than the 18th of each month commencing April 18, 2016 until the costs are paid in full.*
- 5) *Pursuant to section 54(2), if Dr. Kabongo should fail to pay the costs as required by paragraph 4, Dr. Kabongo's licence shall be suspended until the costs are paid in full.*
- 6) *Council reserves the right to amend the terms of this order by extending the time for payment of the costs, by arranging for the payment of costs over time or by installments, or by reducing or forgiving the payment of the costs and, in the event of such an amendment, the Council may impose such additional conditions pertaining to payment and suspension of Dr. Kabongo's license for the non-payment as may be permitted by **The Medical Profession Act, 1981**.*

12. Council was advised that Dr. O. Olubajo had agreed to enter a guilty plea to a charge of unprofessional conduct if the charge laid by Council was amended to reflect the admissions which she had made. Council reviewed the requested revisions to the charges and agreed to the amendments.

Council conducted a penalty hearing pertaining to Dr. O. Olubajo pursuant to Section 54 of *The Medical Profession Act, 1981*. Dr. Olubajo pled guilty to the charge laid by the Council that she failed to provide adequate notice to some of her patients that she intended to close her clinic and cease practicing in Rosetown; that she failed to make adequate arrangements to allow some of the patients to seek medical care from another health care provider; she failed to provide adequate continuity of care for some patients for whom she had provided care at the clinic and she failed to make adequate arrangements to follow up on seven investigation results for her patients and make adequate arrangements for access to patient files.

Ms. Kelsey O' Brian, legal counsel for Dr. Olubajo and Mr. Chris Mason, legal counsel for the College spoke to the joint recommendation.

Council declined to accept the joint recommendation and imposed the following penalty on Dr. Olubajo:

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

- 1) Pursuant to Section 54(1)(f) of *The Medical Profession Act, 1981*, the Council hereby imposes a fine of \$2,500 on Dr. Olubajo. Such fine shall be paid on or before April 18, 2016.
 - 2) Pursuant to Section 54(1)(e), the Council reprimands Dr. Olubajo.
 - 3) Pursuant to section 54(1)(i), the Council directs Dr. Olubajo to pay the costs of and incidental to the investigation and hearing in the amount of \$780.00. Such payment shall be made in full by April 18, 2016.
 - 4) Pursuant to section 54(2), if Dr. Olubajo should fail to pay the costs as required by paragraph 2, Dr. Olubajo's licence shall be suspended until the costs are paid in full.
 - 5) Pursuant to section 54 (1)(g) of *The Medical Profession Act, 1981*, Dr. Olubajo is required to take an Ethics program in a form acceptable to the Registrar on or before December 31, 2016. The programs "Medical Ethics, Boundaries and Professionalism" by Case Western Reserve University and "Probe Program" by CPEP are ethics programs acceptable to the Registrar.
13. Council received a report from Ms. Amy McDonald, Director of Accounting and Finance pertaining to the unaudited 2015 year end financial reports.
14. Council reappointed members to the Advisory Committee on Medical Imaging.
15. Council received for information only the document pertaining to the "Planning Tool for Physician Resources in Saskatchewan".
16. Council received a report from the Director of Registration Services with respect to the issue of Senior Life members and fees related to holding an inactive licence. Council endorsed that the Senior Life designation can be held without fees however, if the physician wishes to hold an inactive category of licensure as well, a fee will be applied. This discussion was prompted by an enquiry to the Council as the result of an inaccurate description printed in DocTalk that Senior Life members receive an inactive licence for no fee. An apology will be made to the physician, however, Council declined to make changes in its fee structure for the inactive category of licensure.
17. Council reviewed a request by the Saskatchewan Association for Community Living to endorse its document related to physician assisted dying. Council declined to endorse the document.
18. Council conducted a penalty hearing pertaining to Dr. B. Rieder pursuant to Section 54 of *The Medical Profession Act, 1981*. Dr. Rieder pled guilty to the charge laid by the Executive Committee that he failed on multiple occasions to respond to College requests for information. The Council of the College of Physicians and Surgeons imposed the following penalty on Dr. B. Rieder:
- Pursuant to Section 54(1)(f) of The Medical Profession Act, 1981, the Council imposes a fine of \$1,500 on Dr. Rieder, payable forthwith.*

19. Council reviewed a report from the Prescription Review Program/Methadone Program with respect to a request to update the Methadone Standards and Guidelines document. The standards and guidelines were amended to include a specific section on Buprenorphine/Naloxone (Suboxone) and additional revisions to ensure consistency and/or incorporate Suboxone therapy. The guideline was renamed "*Opiate Substitution Therapy Guidelines and Standards for the Treatment of Opiate Addiction/Dependence*". Council approved the suggested revisions.
20. Council reviewed proposed Bylaw amendments to Bylaw 25.1 *Operation of Diagnostic Imaging Facilities in the Province of Saskatchewan* from the Advisory committee on medical imaging and stakeholders. The original Bylaw 25.1 was repealed and the revised Bylaw was substituted.

The changes to the Bylaw included a number of changes to clarify language, update reference to statutes, new definitions or amended definitions, training standards with respect to the Director of the various imaging facilities (Ultrasound, Mammography, MRI and CT and Nuclear Medicine facilities) as well as including standards for technologists and technicians working in radiology facilities (Ultrasound, Mammography, MRI and CT and Nuclear Medicine facilities).

21. Council reviewed a request from Dr. Richard J. Lewis who asked the College for its perspective related to a proposed service to provide dermatology diagnosis and advice by telemedicine based on photographs of the patient's condition.

Council endorsed the position taken by the Registrar's Office and directed the information be provided to Dr. Lewis that the CPSS requires a telemedicine licence to perform telemedicine services, and advise although it does not currently have any policies that would prohibit this, he should seek clarification from the Medical Services Branch of the Ministry as to whether the Government has any concerns with his proposed service.

22. Council received a report from Ms. Barb Porter, the Director of Registration Services, with respect to the requirements to convert from a provisional to a regular licence for internationally trained physicians, both for family physicians and specialists, prior to and subsequent to September 18, 2014. Council adopted the following recommendations:

Internationally Trained Specialists:

Recommendation A:

Allow internationally trained specialist physicians registered prior to Sept 18, 2014 with:

- the Medical Council of Canada Qualifying Examination Part I (MCCQE1) or USMLE;
- a provisional licence; and
- five years of satisfactory practice in Saskatchewan; and
- certification from the Royal College of Physicians and Surgeons of Canada (RCPSC) / Collège des médecins du Québec (CMQ)

to convert from a provisional to a regular licence without passing further examinations.

Recommendation B

Allow internationally trained specialist physicians registered after September 18, 2014 with:

- the Medical Council of Canada Qualifying Examination Part I (MCCQE1) or the USMLE;
 - a provisional licence; and
 - five years of satisfactory practice under supervision in Canada; and
 - certification from the Royal College of Physicians and Surgeons of Canada (RCPSC) / Collège des médecins du Québec (CMQ)
- to convert from a provisional to a regular licence without passing further examinations.

Internationally Trained Family Physicians:

Recommendation C

1. Allow internationally trained family physicians registered prior to September 18, 2014 with:

- the Medical Council of Canada Qualifying Examination Part I (MCCQE1);
 - a provisional licence; and
 - five years of satisfactory practice in Saskatchewan; and
 - certification from the College of Family Physicians of Canada (CFPC)
- to convert from a provisional to a regular licence without passing further examinations.

2. Direct the Registrar to advise all internationally trained family physicians who have not obtained the LMCC that they have one year in which to demonstrate that they have obtained the LMCC. Failure to do so may result in a direction from Council to wind down their practice.

Recommendation D

Allow internationally trained family physicians registered after September 18, 2014 who have:

- the Medical Council of Canada Qualifying Examination Part I (MCCQE1);
 - a provisional licence;
 - five years of satisfactory practice under supervision in Canada; and
 - certification from the College of Family Physicians of Canada (CFPC)
- to convert from a provisional to a regular licence without passing further examinations.

Council further requested that the Registrar's Office provide specific information on the internationally trained specialist physicians registered prior to September 18, 2014 who appear not to have met the requirement for Part I (MCCQE1). The matter will be reviewed in June.

23. Council received a report from the Deputy Registrar pertaining to the request for the Complaints Resolution Advisory Committee process to be renamed Quality of Care process and accepted that the Complaints Resolution Advisory Committee would change to the Quality of Care Advisory Committee. Council approved the following resolution:

Administrative Bylaw 8.2(d) is amended by deleting the name “Complaints Resolution Advisory Committee” and substituting the name “Quality of Care Advisory Committee” wherever it appears.

In addition the relevant portion of Bylaw 3.1 Renewal and Expiration of Licences and 37.1 Disclosure of Information in Certificates of Professional Conduct will be appropriately changed and Council adopted the following resolution:

Regulatory Bylaw 3.1(b) is amended by deleting the name “Complaints Resolution Advisory Committee” and substituting the name “Quality of Care Advisory Committee” in paragraph (iii) 2.

Regulatory Bylaw 37.1(k) is amended by deleting the name “Complaints Resolution Advisory Committee” and substituting the name “Quality of Care Advisory Committee”.

The Council also directed the Registrar’s Office to change any other College related documents to accord with the name change.

24. Council received a request from the Deputy Registrar with respect to the appointment of a public member to the Quality of Care Advisory Committee (previously known as the Complaints Resolution Advisory Committee). Council directed the Deputy Registrar to interview the recommended candidate and if the candidate was acceptable it would approve the candidate for appointment. If it is necessary to consider a second candidate once the candidate has been interviewed, Council directed it wished to be provided an email ballot to approve the recommended candidate.
25. Council received a report from the Associate Registrar on potential amendments to the Regulatory Bylaws. Council adopted the following three resolutions:

The Regulatory Bylaws of the College are amended by deleting section 1.1 and substituting the following:

1.1 In these bylaws, unless there is something in the subject of the context inconsistent therewith, the definitions for words set out below shall apply to those words in these bylaws.

“ACT” means The Medical Profession Act, 1981.

C.A.C.M.E. The Committee on Accreditation of Continuing Medical Education. The term “C.A.C.M.E. in these bylaws shall continue to refer to that organization, or any successor organization, notwithstanding any change of name of the organization.

CFPC The College of Family Physicians of Canada. The term “CFPC” in these bylaws shall continue to refer to that organization, or any successor organization, notwithstanding any change to the name of the organization.

RCPSC The Royal College of Physicians and Surgeons of Canada. The term “RCPSC” in these bylaws shall continue to refer to that organization, or any successor organization, notwithstanding any change to the name of the organization.

The Regulatory Bylaws of the College are amended by adding the following definition to section 2.2:

FAIMER Foundation for Advancement of International Medical Education and Research. The term “FAIMER” in these bylaws shall continue to refer to that organization, or any successor organization, notwithstanding any change to the name of the program.

The Regulatory Bylaws of the College are amended by adding the following definition to section 25.1 (b):

ACMI The Advisory Committee on Medical Imaging, established in the College’s administrative bylaws.

26. Council reviewed a letter from the Ministry of Health pointing out that the College’s Regulatory Bylaws incorrectly refer to a physician practicing as a “Designated Public Health Officer” when the current term is “Medical Health Officer”. Council adopted the proposed changes to strike Designated Public Health Officer and insert Medical Health Officer in Bylaw 2.8 Ministerial Licence (b)(i) and in (g).
27. Council received a request from the College of Naturopathic Doctors of Saskatchewan to consider participating in a pharmacopeia board which will provide recommendations on the medications which naturopathic doctors will be permitted to prescribe. Council declined to provide a member to serve on this committee but confirmed it would be prepared to review and provide input on any specific medications if the College of Naturopathic Doctors requests the College’s input.
28. Council received a report with respect to potential additional members for the Discipline Committee and appointed Dr. L. Coertze and Dr. O. Adefolarin.
29. Council received information on a reason writing seminar in Toronto and an administrative law seminar in Regina. Councilors were to inform the Registrar’s Office if they wish to attend either of these seminars.
30. The Associate Registrar provided an update on the status of bylaws. All Regulatory and Administrative Bylaws which Council adopted in 2015 and in 2016 have now come into effect.
31. Council adopted reasons for its decision to restore Dr. N. Painter’s licence.
32. Council received a report with respect to a request from Medical Services Branch to investigate potential inappropriate billings of a physician prior to the case being investigated through the JMPC process. Council determined that it will act on a referral from the Ministry only after the JMPC completes its review of the physician’s billings to MSB.
33. Council received a request from the Registrar with respect to the appropriate period to allow a physician to wind up his/her medical practice when the outcome of a summative assessment is not favorable. Council provided a recommendation to the

Registrar to provide a short wind up period for physicians who fail to successfully complete the summative assessment and will not be granted an enduring form of licensure.

34. Council received a report from Mr. Chris Mason, legal counsel with respect to charging a physician with unprofessional conduct for failing to uphold the standards of the profession. The Council charged the physician with unprofessional conduct. The charge laid by the Council alleges that the physician abruptly and without notice ceased practice in Saskatchewan; the physician failed to provide appropriate notice to the patients or make appropriate arrangements to allow the patients to seek medical care from another health care provider; the physician failed to provide continuity of care and failed to make the appropriate arrangements for security of the records and access to records or transfer of the patient records..

A second charge was laid alleging that the physician failed to respond to requests for information from the Registrar.

35. Council received a request to amend an Executive Summary document that named a physician who had initially been charged with unprofessional conduct. The charges were later withdrawn. When the charges were withdrawn the subsequent Executive Summary did not name the physician at his request. Council determined that it would amend the Executive Summary that stated the physician was charged by noting after that entry the date that the charges were withdrawn.

Council further directed that in future the Executive Summary will note a physician has been charged but will not provide the name of the physician. Information with respect to the charges and the identity of the physician will, however, continue to be posted on the website for transparency.

36. Council received a report with respect to the prosecution for the unlicensed practice of medicine. Council was asked to review its position on the matter. Further consultation in this regard will be deferred until after the Federation of Medical Authorities of Canada national meeting where it will be discussed by legal counsel. Council will revisit the issue after that discussion.
37. Council received an update on the discipline tracker from the Associate Registrar and provided a narrative of where cases are within the process.
38. Council received two documents under the environmental scan; a report from the FMRAC Board of Directors for information only and the document Medication Management in Youth Residential Addiction Treatment. Councilors were asked to provide input with respect to the content of the second document. Council suggested to the Registrar that input from the Saskatchewan Registered Nurses' Association may also be helpful.