

EXECUTIVE SUMMARY

of the

19 JANUARY, 2018 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) 667 4625, Fax (306) 244 2600, or email OfficeOfTheRegistrar@cps.sk.ca.

- 1. Council received a report on the actions taken in relation to the "For Action Items" from the previous meeting.
- 2. Council reviewed and discussed Monitoring Reports from the Registrar with respect to:
 - (a) The Registrar's Advancement of Council's End 1 The Mission of the College; and
 - (b) The Registrar's Advancement of Council's End 2 Public Protection; and
 - (c) The Registrar's Compliance with Council's Executive Limitation Policies pertaining to:
 - (i) EL 1 General Executive Constraint; and
 - (ii) EL 2 Treatment of Staff; and
 - (iii) EL 6 Interactions with Members of the Public.
- 3. Council reviewed the committee's work on possible amendments to College Policy on Clinical Trainees. As one of the documents was not posted to Trueshare the matter was deferred to the March meeting of Council.
- 4. Council received an update on the Telemedicine/Virtual Medicine committee's work. The Federation of Medical Regulatory Authorities of Canada will be reviewing its telemedicine policy and Mr. Bryan Salte is a member of that committee. The work on our policy will be delayed so as to be informed by FMRAC's work.

- 5. The Council was updated on the committee's work dealing with the Truth and Reconciliation Report and Council provided direction to the Registrar to arrange a presentation for Council at the next meeting with respect to cultural awareness and humility.
- 6. Council received a report from the committee working on the British Columbia Real Estate Commission Report and tasked the committee to proceed with developing a Code of Conduct. A report is to be reviewed at the March Council meeting.
- 7. Council received a report on policy development pertaining to the sale of goods and services by physicians. Council appointed the same committee that has been working on the Code of Conduct which is comprised of Mr. Ken Smith, Dr. Mark Chapelski and Mr. Bryan Salte. A report is to be prepared for the March Council meeting.
- 8. Council received a report on the progress for strategic priorities. Council directed the Registrar to investigate options for providing support for complainants who allege sexual abuse and report back to Council at its March meeting.
- 9. Council received an update from Ms. Sheila Torrance with respect to potential amendments to Bylaw 25.1 regarding a Medical Director in Diagnostic Imaging facilities. Council will defer the matter to its March meeting to allow for further consultation feedback to be received.
- 10. Council received a report from the Associate Registrar on the feedback to the proposed bylaw amendment to phase out MCCEE. Council reviewed the consultation feedback and adopted the amendment which was approved in principle at the November meeting of Council. Council adopted the following resolution:

Regulatory Bylaw 2.3 is amended by deleting bylaw 2.3(d)(vii) and substituting the following: (vii)If the physician achieves licensure in Saskatchewan on or before June 30, 2019, provide proof that the physician has passed the Medical Council of Canada Evaluating Examination (MCCEE), or,

(viii) Provide proof that the physician has passed the Medical Council of Canada Qualifying Examination Part 1 (MCCQE1) or successfully completed medical licensing examinations in the United States of America acceptable to the Council;

- Regulatory Bylaw 2.3 is amended by renumbering bylaw 2.3(d)(viii) as bylaw 2.3(d)(ix).
- 11. Council received a report from the Associate Registrar on the Terms of Reference for committees and accepted the suggested Terms of Reference for various committees not contained in the bylaws. The amendments to the Administrative Bylaws for Terms of Reference for committees in document Info 8_18 was deferred until the March meeting of Council as there had been a problem with posting the document on Trueshare.
- 12. Council received a presentation from Dr. Oberholzer with respect to the request from the Saskatchewan College of Podiatrists for implementation of bylaws that would allow podiatrists to prescribe a particular panel of drugs and order laboratory tests. Council reviewed the report and requested the College ascertain interest in a stakeholder meeting with the Saskatchewan College of Podiatrists, the Saskatchewan Medical Association, the Saskatchewan College of Pharmacy Professionals, the Saskatchewan Registered Nurses' Association and the Saskatchewan Association of Licensed Practical Nurses to discuss implementation of bylaws which would allow the prescribing of medications and the ordering of laboratory tests.

13. Council conducted a penalty hearing pertaining to Dr. S. Cheshenchuk. Dr. Cheshenchuk admitted the charges laid against her. Council considered a joint recommendation for penalty from the Registrar's Office and from Dr. Cheshenchuk's legal counsel, Mr. David Thera. The charges admitted by Dr. Chehenchuk are, as follows:

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. Svitlana Cheshenchuk, namely:

You Dr. Svitlana Cheshenchuk 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)(vi) and/or bylaw 8.1(b)(ix) 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 one or more of the following:

a) You failed to maintain records for your patient, S.H. that met the requirements of bylaw 23.1 of the College bylaws;

b) You altered a medical record regarding the examination and treatment of S.H.
c) On or about Friday October 17, 2014 you completed a medical record for patient S.H.

d) On or about Monday October 20, 2014 you learned of the death of patient S.H. e) On or about Monday October 20, 2014 you altered the medical record of S.H. and added the words "suggested to go to ER, was reluctant to do ECG and go to ER, stated "it's bronchitis, I know.""

f) On or about Wednesday October 22, 2014 you altered the medical record of S.H. to read, "suggested to go to ER, explained that had abnormal ECG and should be checked for MI, was reluctant to do ECG and go to ER, stated "it is Bronchitis, I know" and was obviously irritated by my advice. ECG, rx tecta, see list of meds " g) On or about Wednesday February 18, 2015 you altered the medical record of S.H. to read, "suggested to go to ER, explained that had abnormal ECG and should be checked for MI, was reluctant to do ECG and go to ER, stated it is Bronchitis, I know" and was obviously irritated and annoyed. ECG, rx tecta, see list of meds /ECg sent to cardiologist, urgent, patient refused to go to ER"

h) On or about Wednesday February 18, 2015 you altered the medical record of S.H. to read, "suggested to go to ER, explained that had abnormal ECG and should be checked for MI, was reluctant to do ECG and go to ER, stated it is Bronchitis, I know" and was obviously irritated and annoyed. ECG, rx tecta, see list of meds/ECg sent to cardiologist, urgent, patient did not want to listen to any suggestions, refused to go to ER/. no family contact was provided."

i) On or about Thursday May 21, 2015 you added to the previous alteration in "g" the following; "b/p 123/67, pale, stressed out." Altered diagnosis to read "URTI" j) On or about Wednesday June 10, 2015 you altered the medical record of S.H. by deleting the words "pale, stressed out" and added the words "ASA at this time refused" and "even though was asked to, refused to call for ambulance." Altered diagnosis to read Bronchitis.

k) On or about Monday June 15, 2015 you altered the medical record of S.H. by adding the words "Said, I will think about WHAT you SUGGEST"

I) On or about Monday June 22, 2015 you altered the medical record of S.H. by checking off boxes indicating S.H. complained of "chills, discharge from nose" and past medical history of Bronchitis and altered "b/p 124/88"

m) You failed to exercise due diligence to ensure that the information in your patient records accurately reflected the care which you provided to patient S.H..n) Your medical records were not completed in a timely manner.

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. Svitlana Cheshenchuk, namely:

You Dr. Svitlana Cheshenchuk 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) 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 one or more of the following:

a) You submitted altered medical records to the College of Physicians and Surgeons of Saskatchewan about the matter involving patient S.H.

b) You failed to exercise due diligence to ensure the records provided to the College were accurate.

c) You failed to inform the College that the medical records had been altered.

d) A request was sent to you on October 21, 2015 requesting a copy of the audit trail from the Electronic Medical Record ["EMR"] for the period October 17, 2014 to June 25, 2015, the result of which was a summary of log changes.

e) The College sent your office a request on October 29, 2015 requesting details of the changes.

f) On November 4, 2015 your office advised the College that you did not alter the EMR in a substantive way.

g) You failed to exercise due diligence to ensure that the November 4, 2015 response to the College was accurate.

h) On November 16, 2015 the College sent a request to your office demanding particulars of the changes made to the EMR.

i) On November 18, 2015, the College received the details from your office, which illustrated numerous substantive changes made to the patient file over the course of more than 8 months from the date of the original patient visit.

Submissions were made by Mr. Salte on behalf of the Registrar's Office and Mr. David Thera on behalf of his client Dr. Cheshenchuk. Council imposed the following penalty:

1) Pursuant to Section 54(1)(e) of The Medical Professional Act, 1981, the Council hereby reprimands Dr. Cheshenchuk. The format of that reprimand will be determined by the Council;

2) Pursuant to Section 54(1)(b) of The Medical Profession Act, 1981, the Council hereby suspends Dr. Cheshenchuk for a period of one month, effective immediately;
3) Pursuant to section 54(1)(g) of The Medical Profession Act, 1981, Council requires that that

Dr. Cheshenchuk 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.

4) Pursuant to section 54(1)(g) of The Medical Profession Act, 1981, Council requires that that Dr. Cheshenchuk successfully complete a record-keeping course to the satisfaction of the Registrar. Such course shall be completed at the first available date. The programs Medical Record Keeping by the University of Toronto and Medical Record Keeping for Physicians by the College of Physicians and Surgeons of British Columbia are record-keeping courses acceptable to the Registrar.

5) Pursuant to section 54(1)(i) of The Medical Profession Act, 1981, the Council directs Dr. Cheshenchuk to pay the costs of and incidental to the investigation and hearing in the amount of \$7,484.61. Such payment shall be made in full by April 19, 2018.

6) Pursuant to section 54(2) of The Medical Profession Act, 1981, if Dr. Cheshenchuk should fail to pay the costs as required by paragraph 5, Dr. Cheshenchuk's licence shall be suspended until the costs are paid in full.

7) The Council reserves to itself the right to reconsider and amend the time within which payment of costs must be made set out in paragraph 5 and the right to reconsider and amend the requirements of the retraining or education set out in paragraphs 3 and 4. Such reconsideration shall only be done if requested by Dr. Cheshenchuk.

14. Council conducted a penalty hearing pertaining to Dr. O. Mitchell. Dr. Mitchell admitted the charges laid against her. Council considered a joint recommendation for penalty from the Registrar's Office and Dr. Mitchell's legal counsel Mr. David Thera. The charges admitted by Dr. Mitchell are, as follows:

Pursuant to section 47.6 of The Medical Profession Act, 1981, the executive committee directs the discipline committee to hear the following charge of unbecoming, improper, unprofessional or discreditable conduct:

You Dr. Oluwatomi Mitchell 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 18.1(l), 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) You failed to respond to inquiries from the College as required by bylaws 18.1, and/or 16.1 and/or 16.2;

b) You failed to comply, to the best of your ability, fully and accurately with requests for information as required by bylaw 18.1(k);

c) By letter dated April 10, 2017 you were asked to provide information specified in that letter with respect to your prescribing to 13 patients identified in that letter. That letter stated that you were expected to reply within 14 working days of the date that you received that letter;

d) By email dated April 25, 2017 you were granted a further 14 days to respond to the requests in the letter of April 10, 2017;

e) By letter dated May 16, 2017 you were advised that the College had not received a response with respect to 12 of the 13 patients identified in the letter of April 10, 2017; f) In the letter of May 16, 2017 you were advised that the College expected a response within 7 working days of the receipt of the letter;

g) By email dated May 25, 2017 you were granted a further extension to June 19, 2017 to respond to the requests in the letter of April 10, 2017;

h) By letter dated June 27, 2017 you were advised "Should you fail to provide the expected

information by July 14, 2017, the matter will be referred to the Associate Registrar for consideration of a charge of unprofessional conduct";

i) You provided a response with respect to some of the patients identified in the letter of April 10, 2017 on or about July 14, 2017;

j) You provided a response with respect to one of the patients on or about September 3, 2017;

k) Your responses did not include all of the information that was requested in the letter of April 10, 2017;

I) Your responses did not include all of the documents requested in the letter of April 10, 2017;

m) Your responses did not provide full and accurate responses to the questions that were asked of you in the letter of April 10, 2017.

Submissions were made by Mr. Salte on behalf of the Registrar's Office and Mr. David Thera on behalf of his client Dr. O. Mitchell. Council imposed the following penalty:

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

Pursuant to Section 54(1)(f) of *The Medical Profession Act,* 1981, the Council imposes a fine of \$1,500 on Dr. Mitchell, payable within 60 days.

15. Council received a report from the Associate Registrar with respect to appointments to committees. The following appointments were made:

Advisory Committee on Medical Imaging

Dr. I.C. Waddell Dr. D. McIntosh, Chair Dr. H. Wells Dr. J.P. Hillis Ms. Maureen Kral Dr. Abdulaziz Almgrahi Ms. Bev Kellington Dr. D. Murthy Dr. C. Jabs

Committee on ECG Interpretations

Dr. R. Chernoff (Chair) Dr. J. Akhtar Dr. P. Schwann

Quality of Care Advisory Committee

Dr. Johann Kriegler (Chair) Mr. Don Ebert (public member) Ms. S. Lougheed (public member) Dr. V. Olsen Ms. Jill Beatty Dr. Jonathan Hey

Practice Enhancement Program

Dr. B. Laursen - Co-Chair Dr. G. Carson - Co-Chair Dr. Karen Holfeld Dr. Y. Nataraj Dr. A. Muller Dr. I. Radevski

Finance Committee

Dr. M. Sheridan – Chair Dr. P. Hanekom Dr. E. Nykiforuk Dr. S. Kassett Dr. G. Stoneham Mr. K. Smith

Health Facilities Credentialing Committee

Dr. J. Blushke – Chair Dr. G. R. Morris Dr. Syed Asif Ali Dr. Jim Carter Dr. Alan Beggs

Nominating Committee

Dr. M. Chapelski (Chair) Dr. P. Hanekom Dr. P. Venkata

Legislative Committee

Dr. M. Chapelski (Chair) Dr. E. Tsoi Dr. A. Beggs Marcel de la Gorgendiere

Expert Advisory Committee on Blood Borne Communicable Diseases

Dr. T. Diener Dr. S. Helliar Dr. K. Williams Dr. L. Worobetz

Registration Committee

- Dr. G. Stoneham Chair Dr. E. Tsoi Mr. G. Mitchell
- Dr. M. Chapelski
- Dr. A. Saxena
- Dr. P. Venkata

Annual General Meeting Committee

Dr. J. Carter Dr. P. Hanekom – Chair Dr. K. Shaw Bill Hannah Dr. B. Brownbridge

Compensation Committee

- Dr. G. Stoneham Mr. K. Smith - Chair Dr. A. Beggs
- 16. Council received a report from Ms. Sheila Torrance with respect to amendments to the Opioid Substitution Therapy Guidelines and Standards. Council accepted the proposed amendments and directed that the Registrar's Office post the amended policy with respect to methadone on the College website and have a discussion with the Saskatchewan College of Pharmacy Professionals to try and facilitate pharmacists filling prescriptions for methadone to be done in accordance with the new methadone policy.
- 17. Council received a report from Ms. Sheila Torrance with respect to boundaries after care programs. Council accepted the recommendation to direct the Registrar's Office to make enquiries with the College of Medicine's Dean of Undergraduate Education and Dean of Postgraduate Education related to the education currently provided to students and residents in relation to professional boundaries and whether there is a role for the CPSS in facilitating the education. In addition, Council directed the Registrar's Office to consult with the CPSS Registration Department to determine whether there is any way to facilitate an educational module on professional boundaries for IMGs who are not participating in SIPPA.
- 18. Council received a short report from Mr. Ken Smith with respect to possible realignment of medical electoral districts. The committee had reviewed what happens in other medical regulatory authorities' jurisdictions. Council directed more work be done and the matter be brought back to the March meeting.
- 19. Council reviewed the draft proposal prepared by the Ministry of Health with respect to an external advisory committee to provide advice and recommendations regarding health professions' scope of practice and other regulatory issues. Council provided some general feedback to the Registrar in order to assist in the preparation of the survey tool requested by the Ministry. Council advised that the College supports the concept of an advisory body relating to the scopes of practice but that additional consultation is required.
- 20. Council received a presentation from Mr. Salte on conflict of interest and apprehension of bias pertaining to Councilors in their role on Council.
- 21. Council received a report from Ms. Sheila Torrance with respect to the proposed bylaw amendments pertaining to regulation of office procedures. Council directed that a working group of Ms. Sheila Torrance, Ms. Susan Halland, Dr. Franklin Igbekoyi, Dr. Alan Beggs and Dr. Brian Brownbridge take into consideration the consultation remarks to date and discuss the mandate of the committee and bring back a report to Council for the March meeting.

- 22. Council received a report from the Associate Registrar on the status of bylaws. Mr. Salte indicated that all bylaws have been approved and we are awaiting Gazetting of one set; there are no outstanding matters.
- 23. Council approved the wording of a reprimand pertaining to Dr. A. Kumar.
- 24. Council received a report from the Associate Registrar on individuals providing health care who are not subject to licensure. Council received the information for information only.
- 25. Council reviewed a Preliminary Inquiry Report pertaining to a physician, and laid a charge. A summary of the charge will be available on the website.
- 26. Council reviewed a Preliminary Inquiry Report pertaining to a physician, accepted the recommendation of the committee and determined no charges would be laid. Council however provided direction to the Registrar to write a letter outlining Council's concerns and request that the physician attend for interview with the President and the Registrar.
- 27. Council reviewed draft reasons for the decision with respect to the decision to decline restoration of licence for Dr. A. Ali and adopted those reasons.
- 28. Council reviewed a request for an appeal of a Quality of Care Advisory Committee decision. The appeal was based on the complainant alleging that the committee had not used due diligence in managing the matter. Council confirmed the Quality of Care Advisory Committee's decision and denied the appeal.
- 29. Council received a report from the Associate Registrar on the progress of discipline cases on the discipline tracker. Council also received an update on a particular case where there had been a recommendation made for alternate dispute resolution. As the complainant is not wanting to enter into an alternate dispute resolution, Council was apprised the matter is now considered closed.
- 30. Council reviewed a request from the Saskatchewan Medical Association to have regular Executive to Executive meetings. Council directed the Registrar to proceed with accepting the Saskatchewan Medical Association's request and move to set up the first meeting.
- Council was apprised that FMRAC's Annual General Meeting is scheduled from June 9 11 in Charlottetown and consideration should be given to who would like to attend from Council.
- 32. Council was asked whether they wish an educational session in addition to the Annual General Meeting and if so, were asked to provide potential topics to the committee for consideration.
- 33. Council received a report from the President Dr. Alan Beggs on meeting assessment and a draft of a self-assessment tool. Council will review the tool and provide feedback for the next Council meeting.

34. Council conducted its elections for its Executive positions and Dr. Brownbridge was appointed President by acclamation. Dr. Grant Stoneham was elected Vice President by acclamation. Mr. Ken Smith was appointed public member at large, by acclamation and Dr. Ed Tsoi and Dr. Mark Chapelski were voted into the remaining positions of physician member at large.