



EXECUTIVE SUMMARY

of the

14 & 15 SEPTEMBER, 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 - 5 – Medical Profession Prepared for the Future, and
 - (b) The Registrar's Compliance with Council's Executive Limitation Policies pertaining to:
 - (i) EL – 3 – Financial Planning; and
 - (ii) EL – 4 – Financial Condition; and
 - (iii) EL – 5 – Asset Protection; and
 - (iv) EL – 8 – Compensation and Benefits.
3. Council considered a request from the Associate Registrar that the Telemedicine/Virtual Medicine Standards Committee suspend its activity pending the Federation of Medical Regulatory Authorities of Canada's policy approval which is expected to occur in June, 2019.

4. Council received a report from Ms. S. Torrance with respect to the regulation of office procedures including stakeholder review and final documents for consideration and possible approval. Council accepted the policy *Performing Office Based Non-Insured Procedures* and the policy *Performing Office Based Insured Procedures* as proposed. The policies were adopted with a 3 year sunset date. Council also discussed the proposed bylaw amendments to Bylaw 23.4 and accepted the proposed amendments that speak to the delegation to duly qualified laser technicians.
5. Council received a report from the Registrar with respect to consideration of changing the rate of payment to Council and committee members. Council approved an increase from \$130 per hour to \$150 per hour with the intention that it would have immediate effect.
6. Council considered a proposal from the Associate Registrar to increase the payment to public members. This effectively will supplement the amount paid for public members of Council to 80% of the hourly rate as outlined in GP-8.
7. Council received a report from Ms. Torrance on the work of the committee tasked with developing policy with respect to the Sale of Goods and Services by Physicians. Council provided direction to the committee for continued discussion and added Dr. M. Chapelski and Mr. L. Chabot (public member) as additional committee members.
8. Council received a report and reviewed information with respect to how organizations are managing to publicly report gender. At the present time Council only allows for two options for gender identification in its applications and the information available on its website is either “M” or “F”. Council determined it would add a third option “X”.
9. Council received an update on the strategic plan pertaining to the objectives of ‘strengthen cost recovery for services provided to physicians’ and ‘improve operational alignment between cost for external services and resources obtained’.
10. Council approved an amendment to the Bylaw 4.2 pertaining to elections as follows:

Administrative Bylaws 4.2 is amended by adding the following paragraph:

(p) Notwithstanding anything in bylaw 4.1 or 4.2, there shall be a special election for one member of Council in the Southwest electoral division in 2018, with the term of the person so elected ending with the election in the Southwest electoral district in 2019, provided the Councilor continues to meet the requirements of paragraph 4.2(i).

This amendment was necessary to deal with an anomaly that was recognized while preparing for the fall Council elections subsequent to it adopting bylaws at the June meeting to establish the new electoral districts and cycle.

11. Council approved the Council meeting dates for 2019, as follows:

January 18 & 19

March 29 & 30

June 21 & 22

September 13 & 14

November 29 & 30

12. Council received a request for additional funding from the Practice Enhancement Program. Council approved the additional \$30,000 to cover the costs of the pilot to increase the number of assessors and assessments.
13. Council conducted a penalty hearing pertaining to Dr. Anjena Gandham. Dr. Gandham admitted the charges laid against her. The charges admitted by Dr. Gandham 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 the following charges against Dr. Anjena Gandham, namely:*

*1. You, Dr. Anjena Gandham, 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 some or all of the following:

- a. *On or about 27 day of June, 2017 you spoke to Ms. Bareham, Manager, of the Prescription Review Program of the College ["PRP"].*
- b. *During the conversation with Ms. Bareham you confirmed that she saw Dr. Oberholtzer as a patient and that you wrote her a prescription for synthroid and methylphenidate.*
- c. *After you were advised by Ms. Bareham that resident physicians are not permitted to write PRP medications you then stated that you did not write the impugned prescription.*
- d. *On or about the 21 day of July 2017, you sent an email message to the College in which you stated:*

"To Whom It May Concern, I was not involved with the prescription in question. Further, I have never been involved with writing any prescriptions for Dr. S. Oberholtzer."

- e. *That statement was false or misleading.*
 - f. *On or about the 25 day of September 2017 you sent an undated letter to the College in which you stated:*
- "To be absolutely clear, I have not written prescriptions for Dr. Oberholtzer in the past and I did not write the prescription dated June 18, 2017 that was included in your letter. None of the writing on that prescription is mine and the signature is not mine."*
- g. *That response was false or misleading.*

*2. You, Dr. Anjena Gandham, are guilty of unbecoming, improper, unprofessional, or discreditable conduct for knowingly giving false information to a preliminary inquiry committee contrary to the provisions of Section 46(o) and/or section 55.2 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 some or all of the following:

- a. *You were interviewed by a preliminary inquiry committee on or about 19 day of March, 2018.*
- b. *During that interview you advised the preliminary inquiry committee that you attended a Shoppers Drug Mart pharmacy on or about the 27 day of June, 2017 and examined the prescription in the name of Dr. Oberholtzer.*

- c. *During that interview you advised the preliminary inquiry committee that you did not sign the prescription.*
- d. *During that interview you advised the preliminary inquiry committee that you did not write anything on the prescription.*
- e. *During that interview you advised the preliminary inquiry committee that while the signature on the prescription looked like your signature, you could not provide an explanation why what appeared to be your signature appeared on the prescription.*
- f. *During that interview you advised the preliminary inquiry committee that you denied all involvement in issuing the impugned prescription that was the subject of the preliminary inquiry committee.*
- g. *You knowingly gave false information to the preliminary inquiry committee in connection with one or more statements in this charge.*

Submissions were made by Dr. Jon Danyliw on behalf of Dr. Gandham and by Mr. Chris Mason on behalf of the Registrar's Office. Council imposed the following penalty:

- 1) *Pursuant to Section 54(1)(e) of The Medical Professional Act, 1981, the Council hereby reprimands Dr. Gandham. 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. Gandham for a period of one month, effective 1 January, 2019;*
 - 3) *Pursuant to section 54(1)(g) of The Medical Profession Act, 1981, Council requires that Dr. Gandham 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)(i) of The Medical Profession Act, 1981, the Council directs Dr. Gandham to pay the costs of and incidental to the investigation and hearing in the amount of \$1,471.36. Such payment shall be made in full by January 1, 2019.*
 - 5) *Pursuant to section 54(2) of The Medical Profession Act, 1981, if Dr. Gandham should fail to pay the costs as required by paragraph 4, Dr. Gandham's licence shall be suspended until the costs are paid in full.*
 - 6) *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 4 and the right to reconsider and amend the requirements of the retraining or education set out in paragraph 3. Such reconsideration shall only be done if requested by Dr. Gandham.*
14. Council received a report on the quarterly financial report to the period end 30 June, 2018 from the Director of Accounting and Finance and accepted it for information.
 15. Council approved the draft budget for 2019. The draft budget was prepared with the fee unchanged from 2017. The annual fee will remain at \$1880.
 16. Council considered a report from Ms. Torrance on the possible amendment of Regulatory Bylaw 23.3(a)(vii) Delegation to a Registered Nurse acting as a Surgical Assistant. Council acknowledged that it wished to consider amending Bylaw 23.3(a)(vii) and determined that the matter required additional consultation. A committee was constituted comprising of Dr. A. Beggs – Chair, Dr. J. Fritz, Dr. O. Mabadeje, Mr. B. Hannah, Dr. W. Oberholzer and Ms. S. Torrance.

17. Mr. E. Pas, Director of Registration Services provided the annual review of provisional licensure for IMG physicians who have lost Royal College eligibility or Canadian trained physicians who have not attained the requirements for a regular licence. Council accepted the recommendations made by the Director of Registration Services and approved time limited provisional licensure (for a period of one year) for the purpose of the IMGs establishing eligibility with the Royal College or winding down the physician's practice. The College may conduct a summative assessment if the physician is directed by the Royal College to obtain additional residency training and is unable to locate the required training. Recommendations were approved for three physicians.

Council received an additional report on the status of Canadian physicians who have not achieved Royal College or CCFP or LMCC. The report was received for information only.

18. Council received a report from the Deputy Registrar, Dr. W. Oberholzer with respect to an application from a family physician for a scope of practice change to include certain plastic surgery procedures. Council considered the request and declined.
19. Council conducted a penalty hearing pertaining to Dr. M. A. R. Sayeed. Dr. Sayeed admitted the charges laid against him. The charges admitted 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. Mohammed A. R. Sayeed 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)(xvi), particulars whereof are that you committed acts of sexual impropriety with your patient, referred to in this charge as patient number 1. The evidence that will be led in support of this charge will include that you engaged in sexual intercourse with Patient 1.

Submissions were made by Ms. Sheila Caston on behalf of Dr. Sayeed and Mr. Bryan Salte on behalf of the Registrar's Office. Council imposed the following penalty:

*The Council of the College of Physicians and Surgeons imposes the following penalties on Dr. Mohammed Sayeed pursuant to **The Medical Profession Act, 1981**:*

- 1) *Pursuant to Section 54(1)(e) of The Medical Professional Act, 1981, the Council hereby reprimands Dr. Sayeed. The format of that reprimand to be determined by the Council;*
- 2) *Pursuant to Section 54(1)(a) of The Medical Profession Act, 1981, the name of Dr. Mohammed Sayeed is struck from the Register of the College of Physicians and Surgeons, effective September 15, 2018.*
- 3) *Pursuant to Section 54(1)(a) of The Medical Profession Act, 1981, Dr. Mohammed Sayeed shall not be eligible to have his name restored to the Register until both of the following conditions are met:*
 - a) *a period of nine months has elapsed from the effective date of revocation of his licence; and*
 - b) *the Council receives a satisfactory report from a professional person, persons or organization chosen by the Council which attests that Dr. Mohammed Sayeed has undertaken counseling at his expense for sexual abuse, has gained insight into the matter and has achieved a measure of rehabilitation which protects the public from risk of*

future harm from Dr. Mohammed Sayeed. Such a report may be provided by Alliance Assessment Center in Houston, TX or such other persons or organizations that are acceptable to the College of Physicians and Surgeons of Saskatchewan.

4) Dr. Mohammed Sayeed may apply to have his name restored any time after condition b) is met, provided that the restoration will take effect only after the expiry of the nine month period referenced in condition a).

5) Pursuant to section 54(1)(i) of The Medical Profession Act, 1981, the Council directs Dr. Sayeed to pay the costs of and incidental to the investigation and hearing in the amount of \$1,237.48, payable forthwith.

20. Council received a request from a physician's legal counsel for the physician to be permitted to participate in his application for licensure restoration via telephone. Legal counsel for the physician indicated that he had been persuaded by the arguments of the College's legal counsel and believes it is in the physician's best interest to appear in person. His request for the physician to appear via telephone was withdrawn.

21. Council received a report on proposed bylaw amendment pertaining to Bylaw 2.4 - Certification and 5 years of successful practice. The Registration Committee met on August 23, 2018 and directed *"the Registrar's staff to prepare a bylaw amendment to bylaw 2.4, to more specifically refer to eligibility for regular licences for American or internationally-trained physicians, to be presented to the Council at its September meeting."* Council adopted the following resolution:

Regulatory Bylaw 2.4 is hereby amended by deleting the current sections (c) and (d) and replacing them with the following:

(c) If the applicant has completed postgraduate medical training in the United States of America, the applicant has:

(i) attained certification by the College of Family Physicians of Canada (CCFP) or Certification by the Royal College of Physicians and Surgeons of Canada (RCPSC) or certification by the Collège des médecins du Québec; and, obtained the designation Licentiate of the Medical Council of Canada or successfully completed medical licensing examinations in the United States of America acceptable to the Council; or,

(ii) attained certification by the College of Family Physicians of Canada (CCFP) or Certification by the Royal College of Physicians and Surgeons of Canada (RCPSC) or certification by the Collège des médecins du Québec; and, met the requirements of a provisional licence related to successfully engaging in practice in Canada for five years and attaining a pass standing in MCCQE1; or,

(iii) met both of the following:

- 1. successfully completed a period of practice while under a provisional licence: and,*
- 2. been successful in an assessment which demonstrates to the satisfaction of the Council that the applicant has appropriate skill, knowledge and suitability to practise independently.*

(d) If the physician has completed postgraduate medical training elsewhere than in Canada or the United States of America:

(i) has successfully completed a period of practice while under a provisional licence: and,

(ii) has either met the requirements of paragraph (c)(i) or c(ii); or

(iii) has been successful in an assessment which demonstrates to the satisfaction of the Council that the applicant has appropriate skill, knowledge and suitability to practise independently.

22. Council reviewed a proposal to consider resolving a charge of unprofessional conduct through Alternate Dispute Resolution (ADR). Council declined to accept the proposed ADR.
23. Council received a report from the Associate Registrar on proposed amendments to Bylaw 2.6. The Registration Committee met on August 23, 2018 and directed the Registrar's staff to prepare an amendment to the bylaw to be presented to Council at its September meeting. It recommended that the bylaws be amended to state that if a physician has elected to achieve a regular licence through a summative assessment, but subsequently attains FRCP/FRCS/ CCFP, the only options to attain a regular licence are through 1) obtaining the LMCC or 2) obtaining the MCCQE1 together with five years of successful practice in Canada. Council accepted the amendments to Regulatory Bylaw 2.6 and adopted the following resolution:

Regulatory Bylaw 2.6 is hereby amended by adding the following paragraph:

(yy) Notwithstanding anything in paragraphs (a) through (xx) or bylaw 2.4, if a physician has elected to achieve regular licensure by meeting the conditions of supervised practice and an assessment achieves certification with the Royal College of Physicians and Surgeons or CFPC, the physician will be unable to achieve regular licensure by meeting the conditions of supervised practice and an assessment. The physician's licence will automatically be revoked and cease to be valid unless the physician achieves either:

- (i) LMCC within a period of five years of first licensure on a provisional licence; or*
- (ii) MCCQE1 and 5 years of successful practice in Canada.*

24. Council reviewed a request for guidance on what constitutes "exceptional circumstances" for granting licensure. Council was provided information with respect to a number of physicians who are unable to challenge the CFPC examination as they are not currently licensed. These physicians lost licensure as they had not attained their LMCC in the required timeframe and their licences were terminated. Some of the physicians have subsequently obtained their LMCC and would like to become licensed in Saskatchewan, however, those physicians do not have certification by the College of Family Physicians of Canada, which since September 2014 has been a requirement for licensure for family physicians who have not had a pre-licensure assessment or a period of supervised practice or a summative assessment. Council declined to accept that the circumstances of these physicians were "exceptional".

Council was apprised by the Registrar that the issue of not being able to become eligible for CFPC examination unless one is licensed and in active practice has been raised to the national table (FMRAC and CFPC) for further discussion.

25. Council reappointed Dr. Rohan Cornelissen to the JMPRC to serve a second three year term.
26. Council received a report with respect to feedback given by the senior management team on the SRNA Bylaws for prescribing opioids. Council declined to provide any additional feedback than what the senior staff had provided.
27. Council was apprised of the opportunity to attend a Reasons Writing Seminar that will be held on Thursday February 21, 2019 in Toronto.

28. Council considered a report from Dr. Micheal Howard-Tripp with respect to his recommendation that a physician continue to be monitored for the timeliness of completion of tasks. Council approved the new supervisor to be Dr. Werner Oberholzer.
29. Council was asked to review the proposed new Opioid Agonist Therapy Standards and Guidelines and adopted these guidelines as presented.
30. Council was provided an update on the status of bylaws. The College had been notified by the Ministry that the most recent request to amend Regulatory Bylaws; Bylaw 25.1 amended to add and clarify responsibilities of the Medical Director of a non-hospital treatment facility and Regulatory Bylaw 8.1(b)(xv) rescinded to remove providing care that is not generally accepted by the medical community as a form of unprofessional conduct, and Bylaw 19.1 related to prescribing Buprenorphine repealed and replaced with a new Bylaw 19.1 dealing with Methadone and Buprenorphine, have been approved by the Minister but not yet Gazetted.
31. Council reviewed how to manage conflict of interest and possible bias when acting as a Councilor.
32. Council approved the wording of a reprimand pertaining to Dr. T. Lee. This reprimand will be posted on the College website.
33. Council received a report on actions taken by the Executive Committee since the last Council meeting.
34. Council adopted reasons for the decision to decline Dr. A. Ali restoration of licence.
35. Council received a report from the Associate Registrar on a possible bylaw amendment for infection control and directed the staff to draft a bylaw for review at its November meeting.
36. Council directed under Section 55.1 of *The Medical Profession Act, 1981* that a committee consisting of Dr. Morris Markentin and Dr. W. Oberholzer be appointed to interview two physician members to raise to the physicians' attention quality of care issues and to assist the physicians in meeting the expected standard for the provision of opioid agonist therapy.
37. Council considered a report from the Associate Registrar about an enquiry from the Information and Privacy Commissioner related to the College's policies on obtaining and disclosing patient information and publishing discipline decisions.
38. Council adopted an amendment to a charge, pertaining to charges previously laid against a physician.
39. Council reviewed a Preliminary Inquiry Committee report and laid charges of unprofessional conduct against a physician for failing to meet the standards for prescribing medical marijuana. Synoptic charges will be published on the College website.
40. Council reviewed a Preliminary Inquiry Committee report and laid charges of unprofessional conduct against a physician for failing to maintain the standards of the profession and for authorizing a person who does not hold a licence to engage in the practice of medicine. Synoptic charges will be published on the College website.

41. Council reviewed a Preliminary Inquiry Committee report and laid charges of unprofessional conduct against a person holding an educational licence. The charge alleges that the person engaged in the practice of medicine beyond the scope permitted by the physician's educational licence. Synoptic charges will be published on the College website.
42. Council reviewed a Preliminary Inquiry Committee report and directed that additional clarification be sought from the Preliminary Inquiry Committee prior to making its decision.
43. Council reviewed a Preliminary Inquiry Committee report and directed that alternate dispute resolution (ADR) be offered to resolve the issue.
44. Council reviewed a Preliminary Inquiry Committee report and laid charges of unprofessional conduct against a physician for engaging in unprofessional behaviour with employees of the local health region. Synoptic charges will be published on the College website.
45. Council received a report from the Executive Committee with respect to consideration of charges against a physician who was alleged to have acted unprofessionally when providing an independent opinion and acting as a patient advocate. Council directed alternate dispute resolution as a means to resolve the matter.
46. Council was asked to reconsider charges pertaining to a previous complaint against a physician and laid charges of unprofessional conduct against a physician based upon an allegation of improper sexual conduct in an examination. Synoptic charges will be published on the College website.
47. Council received a report from the Associate Registrar updating Council on the status of outstanding cases listed on the discipline tracker.
48. Council received for information only, details about a Saegis Clinical Communication Course.
49. Council received for information only, information on the stakeholder consultation on National Pharmacare.
50. Council was apprised of a concern with respect to physicians who hold certification in the RCPSC and/or CFPC and have achieved the MCCEE, but do not meet the current national standard for regular licence. National standards for Regular licensure requires either Certifying exam (FRCP,FRCS,CCFP) plus LMCC or Certifying exam (FRCP,FRCS,CCFP) plus MCCQE Part 1 and 5 years of successful supervised practice. There appears to be a variation in the application of the national standard for regular licensure by medical regulatory authorities across the country. Council directed that additional information be sought at the national level.
51. Council reviewed information with respect to the standard penalty for consensual sexual involvement with a patient and directed that the Registrar's Office provide additional documentation for the November meeting. It was noted that the penalty imposed for a consensual sexual relationship with patients varies considerably across Canada.

52. Council discussed whether it should consider providing guidance respecting the content of and recommendations provided in the Preliminary Inquiry Committee's report, subsequent to an investigation. Council determined that the current reporting of the content and recommendations is acceptable, and no further discussion is warranted.
53. Council reviewed the self-assessment tools with respect to Council's assessment of its work and asked for additional feedback from Councilors who have not yet provided feedback. Councilors provided feedback on the current meeting.
54. Council was apprised of a list of 'For Action' items arising out of its two-day Council meeting.