



## EXECUTIVE SUMMARY

of the

**18 MARCH, 2022 COUNCIL MEETING**

### **COLLEGE OF PHYSICIANS AND SURGEONS OF SASKATCHEWAN**

The Council of the College of Physicians and Surgeons of Saskatchewan operates under an explicit set of governance policies. It strives to make its work as transparent as possible to the medical profession and to the general public.

Those portions of Council's deliberations that are not confidential are open to observation by any person subject to space availability in the meeting room.

At the conclusion of each Council meeting an Executive Summary of the meeting is widely distributed to the district medical associations, related organizations and the public media. This Executive Summary provides a brief overview of issues discussed, decisions made, and/or actions taken by the Council. If any person wishes more detailed information about any of the issues which are not subject to confidentiality constraints, these can be obtained by contacting Ms. Sue Waddington, Executive Assistant to the Registrar, at 101 – 2174 Airport Drive, Saskatoon, Saskatchewan, S7L 6M6, phone (306) 244 7355, Fax (306) 244 2600, or email [OfficeOfTheRegistrar@cps.sk.ca](mailto:OfficeOfTheRegistrar@cps.sk.ca).

1. Council acknowledged that the land on which we gather is Treaty 6 Territory, the traditional territory and home of the Cree, Dakota, Sauteaux and Métis Nations. We would like to affirm our relationship with one another now and for the future, and our role in guiding the profession to achieve the highest standards of care to benefit all people in this territory equally.
2. Council adopted the agenda as presented.
3. Council reviewed and approved the minutes from the Friday 28 and Saturday 29 January, 2022 Open Session of the meeting of Council.
4. Council received a report from the Associate Registrar Mr. Bryan Salte on actions taken in relation to the "For Action Items" from the previous meeting.
5. Council reviewed and approved Monitoring Reports from the Registrar with respect to:
  - (a) 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;

(ii) EL – 10 - Emergency Executive Succession.

6. Council approved a change to a penalty order for Dr. Susan Bell, to allow her to take a different remedial training course than what was previously ordered by Council at the June 2021 meeting.
7. Council received a report from Ms. Sheila Torrance and appointed a committee to review and consider the policies *Performing Office-Based Insured Procedures and Performing Office-Based Non-Insured Procedures*, with consideration to amending the policies and developing a single policy. The committee will be comprised of the following members: Dr. Brian Brownbridge, Dr. Franklin Igbekoyi, Dr Amos Akinbiyi, Dr. Daniel Adeboye, Dr. Werner Oberholzer and Ms. Sheila Torrance.
8. Council received a report from Ms. Rochelle Wempe pertaining to proposed amendments to the policy *Physician Disclosure of Adverse Events and Errors That Occur in the Course of Patient Care* including amending its title to *Disclosure of Harm*. The new policy was approved in principle for the purposes of stakeholder consultation.
9. Mr. Burton O'Soup, Chair of the Truth and Reconciliation Committee presented to Council the document "Joyce's Principles". Council supported the Joyce's Principles document as a foundational and guidance document for its work on reconciliation.
10. Council considered a report from the Associate Registrar pertaining to the College of Registered Nurses of Saskatchewan's request to rescind the bylaw relating to delegation to registered nurses to inject bioactive agents. Council directed that the committee appointed to review and develop policies related to office-based insured and non-insured procedures will also review the issue of injection of bioactive agents by registered nurses. A report is to be brought to the Council for the June meeting.
11. Council directed that the Registrar's Office bring back a proposal for addressing compliance testing for the policy related to *Medical Practice Coverage* at the June meeting.
12. Council updated the policy *Renewal Questions - Use of Information by the College* to align content with the current version of Bylaw 3.1 The amended policy will be placed on the College website.
13. Council amended its expectation related to physicians notifying patients of their Covid-19 vaccination status to change it to an expectation that physicians, if asked by a patient, will advise the patient of their vaccination status. This obligation will end December 31, 2022 unless amended by the Council.

14. Council conducted a penalty hearing pertaining to Dr. B. Zimmermann. Dr. Zimmermann admitted three charges including failing to complete hospital charts in a timely manner and in accordance with the bylaws governing the Indian Head Union Hospital, and breach of an undertaking to the College.

Submissions on behalf of the College were made by Ms. Sheila Torrance and submissions on behalf of Dr. Zimmermann were made by Mr. David Thera.

Council imposed penalty that included a written reprimand, a two month suspension, completion of medical record keeping and time management courses, and payment of costs. The penalty will be posted on the College's website.

Draft reasons for its decision will be prepared for Council's consideration at the June Council meeting.

15. Council received an overview of the progress to date on the Implementation Plan related to its four strategic goals. A detailed presentation on the objectives of Strategic Goal #3 "Enhanced College supervision, assessment and support of International Medical Graduates moving from a provisional to a regular licence", was presented by Ms. Debra Wright.
16. Council received a report from Dr. Jurgen Maslany - Chair and Ms. Beckie Wills Director of Accounting and Finance on behalf of the Finance and Audit Committee. Council approved the proposed investment policy including the asset allocation.
17. Council received a report from the Deputy Registrar Dr. Werner Oberholzer and approved the American Board of Internal Medicine Examination in ECGs as a requirement to be approved for billing for those services. Council amended the administrative bylaws to remove the ECG Committee. The administrative bylaws will be updated and the committee members and the Government will be notified.

Council directed the Registrar to request that the Government and the Saskatchewan Medical Association remove the requirement for the College to approve physicians for the purpose of billing for items in the payment schedule.

18. Council adopted the revised Opioid Agonist Therapy Program (OATP) Standards and Guidelines which included changes informed by external consultation with the Saskatchewan Medical Association, Saskatchewan College of Pharmacy Professionals, Pharmacy Association of Saskatchewan, College of Registered Nurses of Saskatchewan, Ministry of Health - Mental Health and Addictions, and physicians who had been approved to prescribe Opioid Agonist Therapy for opioid use disorder. Among the changes to the previous Standards and Guidelines were a new section dealing with Buprenorphine Implant/Depot, additional expectations related to urine drug screening for patients receiving OAT, and expectations for treating patients who are pregnant or

breastfeeding. The updated OATP Standards and Guidelines document will be posted on the College website.

19. Council received an update on the status of bylaws. All outstanding bylaws have been approved and will be Gazetted by March 25, 2022.
20. Council approved the minutes from the Friday 28 and Saturday 29 January, 2022 Closed session meeting of Council.
21. Dr. Franklin Igbekoyi, President reported on the actions taken by the Executive Committee since the January Council meeting.
22. Council approved reasons for its decision to uphold the Registrar's decision to deny Dr. R. Natarajan a regular licence.
23. Council approved reasons for its decision on penalty pertaining to Dr. R. Colistro. The reasons will be posted on the College website.
24. Council approved the written reprimand for Dr. N. Tandon. The reprimand will be posted on the College website.
25. Council approved the written reprimand for Dr. R. Colistro. The reprimand will be posted on the College website.
26. Council approved the written reprimand for Dr. Tanyi-Remarck. The reprimand will be posted on the College website.
27. Council considered a preliminary inquiry report and decided not to lay charges against a physician.
28. Council considered a preliminary inquiry committee report and laid a charge of unprofessional conduct against a physician related to failing to maintain the standards of practice of the profession and the ethical and conduct expectations of the profession with respect to communication with the patient and team members during a labour and delivery on August 16, 2020, and failing to properly obtain the patient's informed consent for the management decisions implemented. Synoptic charges will be posted on the College website.
29. Council considered a preliminary inquiry committee report and laid charges of unprofessional conduct against a physician pertaining to engaging in sexual impropriety and failing to maintain appropriate professional boundaries with female patients and other unprofessional conduct. A detailed synoptic charge will be posted on the College website. Sensitive or identifying information will be redacted if there is a request for complete charges.

30. Council considered additional information from a supplemental preliminary inquiry committee report and determined not to charge a physician. Council directed a letter of concern be sent to the physician recommending education in trauma informed care, patient-centred care and modern expectations for physical examinations.
31. Council considered a preliminary inquiry committee report and laid charges of unprofessional conduct against a physician related to inadequate record keeping, billing for services not provided, excessive billing for services not medically necessary, and altering medical records in preparation for an interview with the Joint Medical Professional Review Committee. Full charges will be posted on the College website.
32. Council considered a preliminary inquiry committee report and laid charges of unprofessional conduct against a physician pertaining to providing inaccurate, misleading or untrue information about another physician's qualifications to two patients, with respect to services provided by a colleague to a patient and for failing to maintain appropriate medical records for a patient.
33. Council considered a preliminary inquiry committee report and laid a charge of unprofessional conduct against a physician pertaining to failing to provide information to a patient to allow the patient to determine whether to purchase products from the business with which the physician was associated.
34. Council considered a preliminary inquiry committee report and declined to lay a charge of unprofessional conduct against a physician. Council directed the Registrar's Office to communicate with the physician and encourage him to advise the physicians with whom he works to be clear about his qualifications when communicating with patients.
35. Council considered assessment tools that are utilized in medical regulatory authorities across Canada with respect to Council and Councilor self-evaluation. A report will be prepared with a recommendation for long-term and short-term evaluation processes for the Council for the June meeting.
36. Ms. Sheila Torrance provided an update on the status of outstanding discipline cases.
37. Dr. Werner Oberholzer, Deputy Registrar provided an update report tracking the work of the Quality of Care unit.
38. Council provided a meeting assessment.
39. Mr. Salte, Associate Registrar provided a list of the "For Action Items" arising from the meeting.