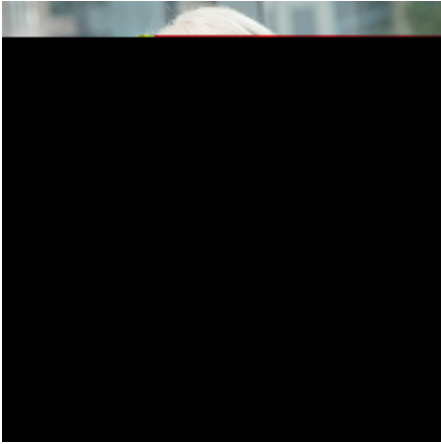


bcP RDP? T4? DWT, TfWO 4WV? 4 T4 M0cDRPWRP cd R 240, 24WDP O 42D, M4? bMcDRP



Dr. Heidi M. Oetter retired in December, after nearly two decades working at the College, first as deputy registrar since 2004 then as registrar and CEO since 2008. She sat down with the *College Connector* editorial team to reflect on her time in medical regulation.

4NbW . RbaC4 4cRMdRP R O 42D, M4? bMcDRP VP04 eRb Vt, Ta42 , acC4 RNM? 4

When I think back to 2004, professional regulation was viewed as exclusively the domain of the professional. This has certainly evolved – now we see regulation as shared work done by both the public and the profession. While it may still be described as professionally led regulation, it is clearly a shared model and there is an expectation that the public is able to participate and contribute.

ensure registrants remain competent and fit to practise over their career. I think the College was a little ahead of the curve when I started here because they had already started this proactive work,

think it really shows the willingness of our Board and our staff to self-reflect and decide that it was important to retire the colonial crest and adopt a modern logo reflective of our values. It's also been very gratifying to see our staff living our new brand strategy I can really see that every day at work.

Another achievement I'm proud of is just working with a resilient and sophisticated organization that can take on anything. We have played an important role in many complicated health-care circumstances over the past number of years, including the COVID-19 pandemic. The next major project will be the transition to a new legislative framework, the *Health Professions and Occupations Act* (*HPOA*), and I have every confidence that we will successfully shift to and grow under the new Act.

**RRLDP? , C4, 2 d C, aDWbC4. D?4WRSSRTcbPDe eRb W4 RTcC4 RNM?4 , P2 RTT4?bMdrP DP
?4P4T, M**

I see a big opportunity to continue to evolve our regulatory processes to address the inequities in our health-care system. The *Human Rights Code* is embedded in the *HPOA*, which signals a new and important direction. The *HPOA* states that in exercising the powers and performing duties under this Act, a person must act to protect the public from harm and discrimination – this is the first time we've seen discrimination articulated as more than and distinct from harm.

So, there will be an explicit expectation to support and promote reconciliation with Indigenous Peoples and to address Indigenous-specific racism. The College has an opportunity to engage in regulatory processes that are anti-racist, to protect patients from discrimination, to ensure that physicians and surgeons are aware of the requirement to treat patients in a culturally safe and respectful manner, and to promote open dialogue that encourages patients to participate in their health-care decisions.

terms. He also brings years of direct experience as a front line physician working in Northern Health.

C, a, T4 eRb MRLD? RTd, T2 aR D T4cD4O 4Pa

I'm just looking forward to spending time with my family and friends! But I will say that I am going to miss everyone here who I have worked with, some for many years. And I'm certainly going to miss what I think are the exciting opportunities for regulators, in particular, advancing our work in cultural safety, cultural humility, and reconciliation.

Heidi M. Oetter, MD

Registrar and CEO



2024 licence renewal begins January 1



Annual licence renewal begins January 1, 2024. Here is what registrants need to know in order to be prepared.

Important dates

January 1, 2024: Start of annual licence renewal process

February 1, 2024: Deadline to complete the Annual Licence Renewal Form and payment of fees

March 1, 2024: Penalties applied for late licence renewal or late payment of fees

April 1, 2024: Suspension for non-renewal of licensure or non-payment of fees

Before annual licence renewal starts

To save time during the renewal process, registrants should sign into the registrant portal on the College website before January to:

- Add security questions. Registrants who have not already set their security questions will be required to set them before they can access the rest of the portal.

- Review contact information and update if needed. Changes in contact information throughout the year must be made within 14 days of the effective date of the change.
 - **Note:** While the province-wide Connected Health System digital solution is being developed and implemented for referral-consultation, orders and secure messaging (Ocean MD), there remains a need to communicate with physician colleagues via fax. Please add an up-to-date fax number to your profile.

Retiring or resigning before February 29, 2024

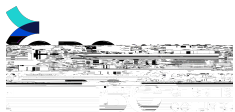
Registrants planning on retiring or resigning can submit a [resignation form](#) before February 29, 2024 to be exempt from the 2024 annual renewal process. Further details about retirement/resignation options can be found on the [College website](#).

FAQs

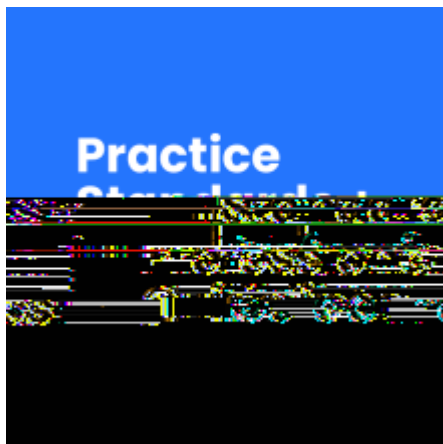
See frequently asked questions about the annual licence renewal process on the [College website](#).

Prepare documents

- BC driver's licence (for verifying a registrant's identity for the criminal record check)
- Method of payment (credit or debit card)



A year in review: practice standards and professional guidelines



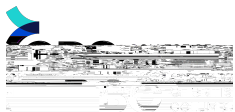
In 2023, the College hosted numerous engagement opportunities, revised several practice standards, and introduced a new practice standard and interim guidance document. The College appreciates the robust feedback and insight provided from all who participated throughout the practice standard development processes.

Engagement opportunities

Consent to Treatment

In January and February 2023, the College held a second consultation on its [Consent to Treatment](#) practice standard with registrants and other providers who work with patients who often face barriers in the consent process to gain a perspective on equity considerations. The College received feedback on a second draft of the practice standard which incorporated changes from the first round of engagement, held in 2022.

Care Coverage Outside Regular Office Hours



In April 2023, the College sought feedback on proposed revisions to the [Care Coverage Outside Regular Office Hours](#) practice standard. Revisions were made to include nurse practitioners (NPs) as members of a call team. The College heard from registrants that there are many benefits of including NPs in the call team, however, there were also some questions raised regarding NPs scope of practice and payment model. Further analysis is now being done by the College.

Indigenous Cultural Safety, Cultural Humility and Anti-racism

The College is currently evaluating awareness levels and application of the [Indigenous Cultural Safety, Cultural Humility, and Anti-racism](#) practice standard among registrants. The College has conducted a survey with registrants, and key health partners, and is now interviewing a smaller subset of registrants to hear specific examples of how the principles and core concepts are being applied in different practice settings to develop additional learning resources.

Ongoing engagement

By the end of 2023, the College will have also engaged on

- A revised [Indigenous Cultural Safety, Cultural Humility, and Anti-racism](#) public resource
- A revised [Medical Assistance in Dying](#) practice standard

Policy revisions

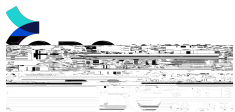
Virtual Care

The [Virtual Care](#) practice standard underwent revisions in June 2023 to clarify the use of PharmaNet, emphasizing that access is permissible only while the practitioner is physically located within BC.

Sale and Dispensing of Drugs

In the same month, the [Sale and Dispensing of Drugs](#) practice standard was revised to distinguish expectations for registrants using PharmaNet with a practice ID number versus community access.

Primary Care Provision in Walk-in, Urgent Care and Multi-physician Clinics



The practice standard for [Primary Care Provision in Walk-in, Urgent Care, and Multi-physician Clinics](#) was updated in July 2023 to specify principles applicable to registrants in urgent and primary care settings, clarifying their exemptions regarding longitudinal primary care.

New standards and guidelines

Consent to Treatment

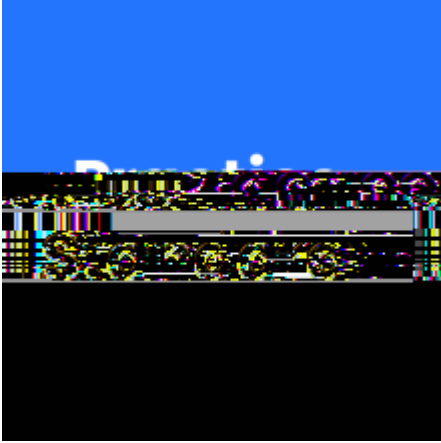
The [Consent to Treatment](#) practice standard and its accompanying resource, [Consent to Treatment - Equity Considerations](#), were approved and published in April 2023.

rTMS interim guidance

In September 2023, the College introduced new [interim guidance](#) on repetitive transcranial magnetic stimulation (rTMS) for the treatment of psychiatric and neurological disorders in adults. This guidance outlines the College's position on scope of practice, education requirements, and expectations for registrants providing this treatment.

Questions regarding practice standards, professional guidelines and interim guidance documents can be directed to communications@cpsbc.ca.

The need for proper use of specialist titles



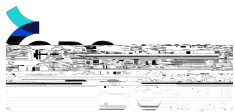
Advertising and Communication with the Public



Balancing expertise and clarity



Serving the public by regulating physicians and surgeons



WorkSafeBC required occupational health and safety assessment



According to WorkSafeBC *Occupational Health and Safety Regulation* section 3.15, employers must provide each workplace with equipment and supplies for promptly rendering first aid to staff. Equipment and supplies for providing first aid must be assembled in a kit that is always readily accessible. The first aid kit must be in addition to facility's emergency cart equipment and supplies (i.e. the items cannot be shared).

Some facilities will be required to have a first aid attendant who has successfully completed a recognized first aid training course at the required level. WorkSafeBC *Occupational Health and Safety Regulation* section 3.16(2)(b) states that employers must conduct an assessment to identify the risks and hazards in the workplace.

Assessments are to be conducted annually and/or whenever a significant change affecting the assessment occurs in the employer's operations. Medical directors should refer to tables 1-6 (WorkSafeBC *Occupational Health and Safety Regulation* *Schedule 3-A – Minimum Levels of First Aid*) to determine the minimum requirement for level of first aid kit and level of first aid certificate for



attendant if required.

Reference: *WorkSafeBC*. (n.d.). <https://www.worksafebc.com/en/law-policy/occupational-health-safety/searchable-ohs-regulation/ohs-regulation/part-03-rights-and-responsibilities#Schedule3A>



hœc b a dg df dœha g



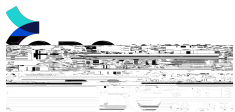
As part of the Diagnostic Accreditation Program's (DAP) ongoing commitment to transparency and accessibility of the accreditation process and requirements, the program is developing a series of short videos to support awareness, understanding and continued improvement.

The first of this series reviews quality management systems and notes the relevancy and applicability in each of the accreditation programs' standards. Future educational videos are planned for topics such as measurement uncertainty, proficiency testing, or quality control, and may be specific to all accreditation programs, or support unique aspects of individual programs. Over the coming months, links to new videos will be shared directly as they are published.

View the quality management systems video on [YouTube](#).

Learn more about the DAP on the [College website](#).

Requests for specific video topics can be directed to dap@cpsbc.ca.



What is the BC Health Technology Assessment Committee?



Under the BC Ministry of Health, the BC Health Technology Assessment Committee (HTAC) makes evidence-informed recommendations about which devices, diagnostics, medical procedures, and programs should be publicly funded in the province.

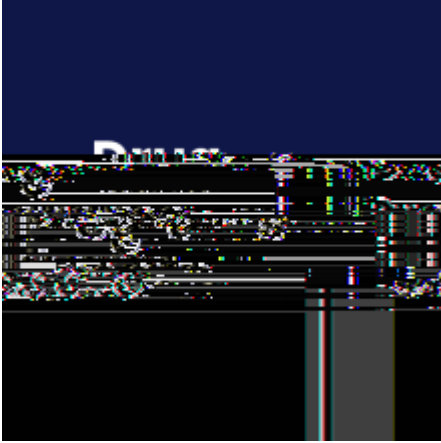
The HTAC is comprised of a member from the Ministry of Health and each of the province's health authorities, as well as a scientific advisor, health economist, ethicist, and members of the public.

The HTAC follows an [evidence-based process](#), which includes topic selection, an evidence-based assessment, review by the HTAC, and makes recommendations to senior ministry and health authority executives about whether a technology should be publicly provided. The actual decision about whether a technology should be provided relies on many other factors in addition to the HTAC recommendation.

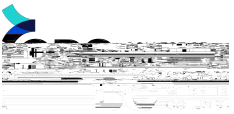
Approved technologies and supporting material are posted on the BC Ministry of Health [HTAC website](#) for public access. These may support decisions by the College's accreditation programs (DAP and NHMFAP) related to new technology accreditation requests, when other technology



assessment are not available (e.g. [CADTH](#) and [NICE](#)).



Safe prescribing of all medications is considered a core comp

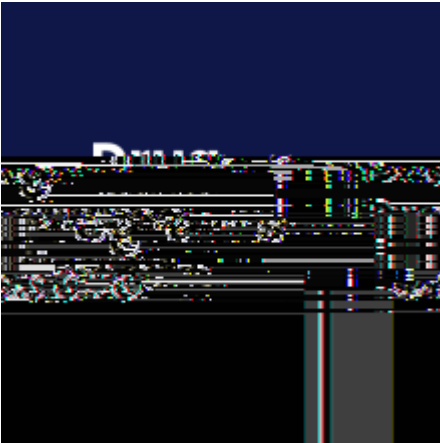


group.

The report draws no conclusions regarding the appropriateness of adherence to clinical guidelines and scientific literature. The report provides information to assist registrants in optimizing their approach to care, enhancing the overall care provided to patients.

Request a [report](#) Report updates are available quarterly.

Prescribing for a travelling patient



With winter approaching, registrants may encounter more requests for large amounts of medication for patients who are planning to travel within Canada or internationally.

Whether a patient is travelling to another province for a week, or travelling internationally for a few months, prescribing best practices remain the same. Registrants are expected to follow the [Safe Prescribing of Opioids and Sedatives](#) practice standard.

Prescribing a large amount of any psychoactive medication is not medically appropriate and poses a risk to both the patient and public. In cases where patients are spending a significant amount of time in another country, snowbirds for examples, patients should be encouraged to seek medical follow-up at intervals when they return to Canada (e.g. at Christmas or during holidays). Patients who do not return to Canada should find a treating physician in their new community. Registrants are reminded that patients who are prescribed narrow therapeutic index medications should be reassessed regularly. Relying solely on virtual care for patients travelling is not appropriate.

For patients travelling within Canada for a shorter duration of time, registrants should consider dispensing medication in blister packs or faxing their prescription to their home pharmacy.



speaking with a pharmacist there.

Physician assistants and the College



In anticipation of serving physician assistants (PAs) in the future, the College has begun to collect and organize PA-specific clinical material such as ebooks, e-journals, and other formats.

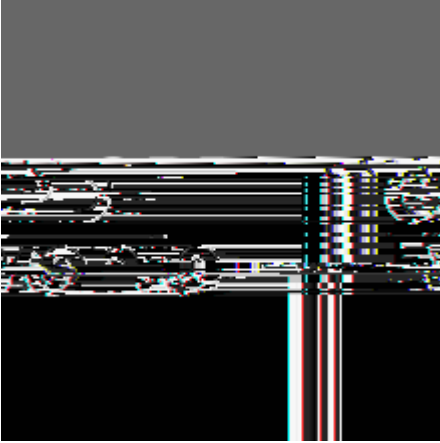
These PA-specific e-journals can be accessed [through the library's](#)

- Drug information as CPS and Martindale pharmacopeia

-



CPD events



Medical Record Keeping for Physicians

Wednesday, February 14, 2024

[Learn more](#)

Wednesday, March 13, 2024

[Learn more](#)

Wednesday, April 24, 2024

[Learn more](#)