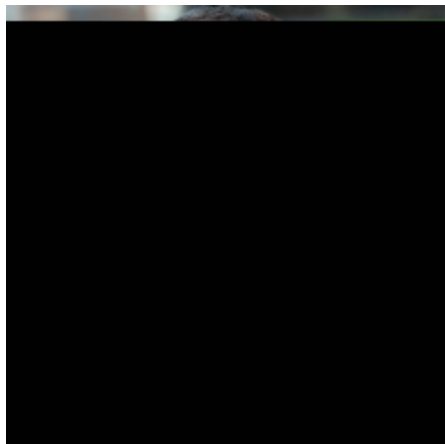


Registrar's message: building on strong foundations



One of my main goals when I stepped into the registrar and CEO role a year ago was to build on the positive work CPSBC was already doing on several key fronts, which I touch on below. I'm also happy to share that the Board recently endorsed a new strategic plan that will guide our business planning over the next four years. The development of the plan was supported by KPMG and included input from staff, Board members and key external health partners.

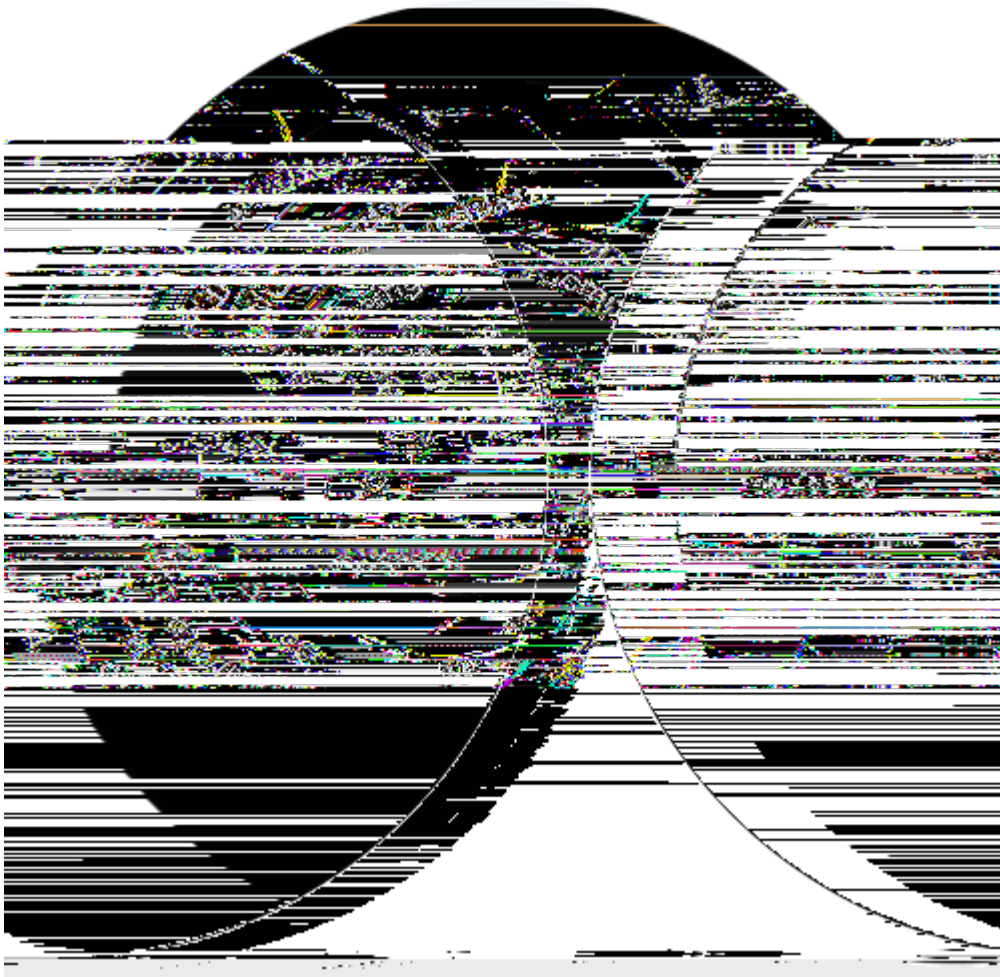
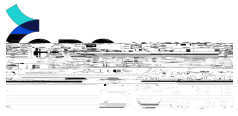
An organizational priority that remains a cornerstone of our new strategic plan is decolonizing our regulatory processes and creating safer spaces for Indigenous people. Over the last year, we started implementing the recommendations from the [critical review](#) of our complaints process. CPSBC is taking tangible steps to make the complaints process more accessible and culturally safe for Indigenous people, and we will hold ourselves accountable by publishing a regular [progress report](#) on our website.

A [recent evaluation](#) of registrants' awareness of the [Indigenous Cultural Safety, Cultural Humility and Anti-racism practice standard](#) showed us that more needs to be done to support registrants on their

cultural safety and humility learning journey. To address the gaps, additional resources will be developed to ensure registrants are aware of their responsibility to comply with the standard. A few months ago we published a two-part episode of our podcast, [Connecting the Dots](#), about addressing systemic barriers and Indigenous allyship.

We will also continue to increase Indigenous representation on our Board and committees and build collaborative relationships with Indigenous communities across the province.

Another priority for 2025 is working with the Ministry of Health, about



There is much to be done in the year ahead as we continue our cultural safety and humility journey, implement the *HPOA* and put our 2024-2028 strategic plan into action.

In closing, I offer my deep appreciation to those who have supported me this past year in my transition. It has certainly been an exciting journey so far. I look forward to the year ahead.

Patrick Rowe, MD, CCFP (EM), FCFP
Registrar and CEO

Comments on this or any other article published in the College Connector can be submitted to the communications and public affairs department at communications@cpsbc.ca.

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Annual licence renewal begins January 1, 2025. Here is what registrants need to know in order to be prepared.

- 0 Start of annual licence renewal process
- 0 Deadline to complete the Annual Licence Renewal Form and payment of fees
- Penalties applied for late licence renewal or late payment of fees
- Suspension for non-renewal of licensure or non-payment of fees

To save time during the renewal process, registrants should sign into the registrant portal on the CPSBC 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 re

- 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.

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Registrants planning on retiring or resigning can submit a [resignation form](#) before February 28, 2025 to be exempt from the 2025 annual renewal process. Further details about retirement/resignation options can be found on the [CPSBC website](#).

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

- BC driver's licence (for verifying a registrant's identity for the criminal record check)
- Method of payment (credit or debit card)
- Continuing professional development (CPD) cycle date
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will be asked to attest that they have completed the form themselves. Medical office assistants or other staff, partners or colleagues are not permitted to complete the form on a registrant's behalf.

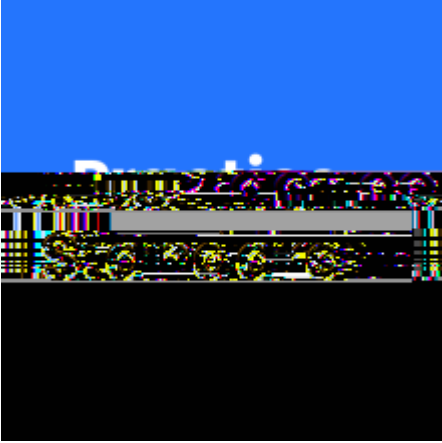
The licence renewal process is best experienced using a PC or Mac. Mobile devices, smart phones, tablets and iPads are not supported. See the [CPSBC website](#) for the full technical requirements.

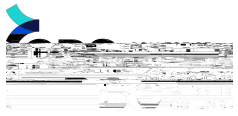
The 2025 renewal fee of _____ can be paid in one of two ways online:

- by credit card
- by debit credit card

For further details on annual licence renewal, please see the [CPSBC website](#).

Physician health and safety



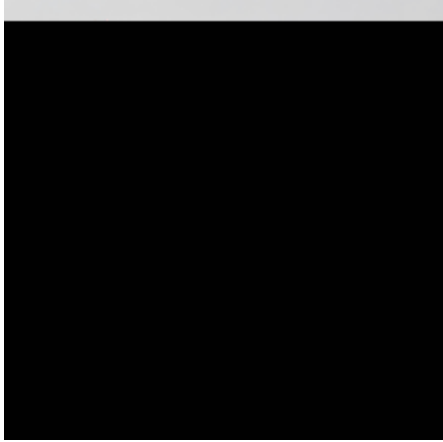


Ending the Patient-registrant Relationship

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CPSBC's newest episode of the Connecting the Dots podcast is now available. This episode features an interview with Dr. Mei-Ling Wiedmeyer, a family physician and clinical assistant professor in the UBC department of family practice, on the importance of language interpretation in health care.

Dr. Wiedmeyer works for the Umbrella Multicultural Health Co-op, a community health centre that uses a novel team-based care model with cross-cultural health brokers to provide comprehensive primary care to refugees, immigrants and migrant populations. She is also the co-principal investigator of the Evaluating Inequities in Refugee and Immigrants' Health Access Project, which uses qualitative interviews and administrative data to understand health-care access in BC's immigrant and refugee populations.

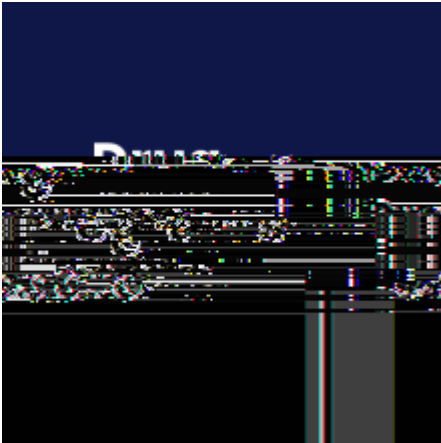
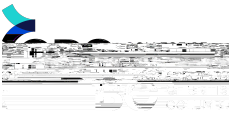
This topic addresses important issues for patient care and draws on principles in the [Access to Medical Care without Discrimination](#) and [Consent to Treatment](#) practice standards. Additionally, CPSBC has heard from registrants and members of the public about challenges in accessing adequate interpretation when English is not a patient's primary language. Without adequate interpretation, patient safety



and care can be directly impacted. A [recent study](#) found that there is a low uptake in the use of interpretation services by family physicians in the province, despite it being a free service. As a reminder, [Provincial Language Services](#) is available to all registrants, free of charge, and the College strongly encourages its use.

Earlier episodes of Connecting the Dots can be found [here](#). New episodes will be also announced in the College Connector or by email.

Questions or feedback about Connecting the Dots can be directed to communications@cpsbc.ca.



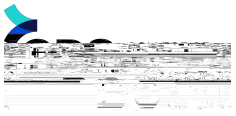
Attention-deficit/hyperactivity disorder (ADHD) diagnosis for children and adults has increased worldwide, particularly in North America. Both diagnostic rates and stimulant prescribing rates have increased as ADHD has gained national and international attention in the news and social media.

Diagnosing ADHD is complicated and can take time and effort. CPSBC is reminding registrants to follow best practice guidelines to improve patient outcomes and avoid harm.

CPSBC recognizes prescribing opioids, sedatives, antimicrobials and stimulants can cause potential harm to patients. There are risks to consider when prescribing stimulants for ADHD, including:

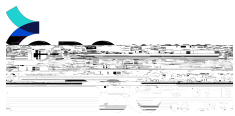
- patients' overvaluation of their benefits
- potential for dependence and addiction
- diversion of these drugs for non-medical use
- their popularity in popular culture and social media

While CPSBC cannot address these risks directly as a regulator, it has a duty to advise registrants to navigate these issues cautiously to reduce the potential harm to patients and the public.

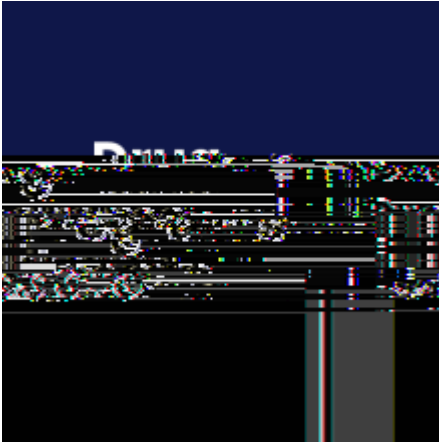


Treating ADHD in children and adults can become part of a registrant's competent scope of practice. All registrants must be able to address their patients' concerns, even if it is beyond their scope to diagnose and treat ADHD. This includes simply offering advice on where to seek help.

CPSBC has published information on [ADHD prescribing](#) on its website and encourages registrants to learn more about this emerging issue and the ongoing scientific research.



Refreshing knowledge on managing opioid use disorder

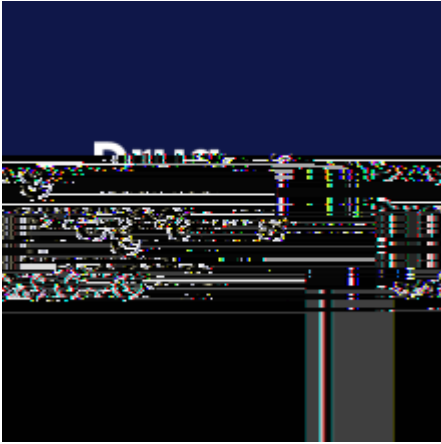


It has been eight years since BC declared a public health emergency related to the drug crisis. In the first nine months of 2024, there were 1,749 drug deaths. While not everyone at risk of overdose is suffering from an opioid use disorder (OUD), many are. CPSBC encourages registrants to refresh their knowledge in recognizing and managing substance use disorders to prevent harmful or fatal patient overdoses.

In 2023, the BC Centre on Substance Use (BCCSU) updated its [guidelines](#) for the management of OUD. This comprehensive guidance document addresses basic features in the clinical management of OUD, and addresses some of the key challenges unique to BC's toxic drug crisis. The BCCSU also offers extensive [educational offerings](#) tailored to the needs of registrants who confront these issues in their daily practice. Registrants can gain insights through these resources into the most up-to-date recommendations on how to help at-risk patients.

This year, the Canadian Research Initiative in Substance Matters updated its [national guidelines](#) for the management of OUD. Several core recommendations have changed in light of the ongoing toxic

drug crisis. Registrants should become familiar with the clinical best practices, which were set by leading addiction medicine experts from across Canada.

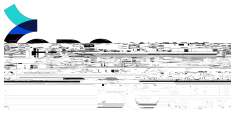


CPBSC's drug programs department is seeking family physicians and psychiatrists with clinical experience in prescribing opioids, sedatives, and stimulant medications for a part-time medical consultant role.

The current contract is for up to eight hours per week, with the potential for additional hours.

CPBSC is particularly interested in engaging with consultants with expertise in managing patients with complex mental health conditions and prescribing psychotropic medications such as stimulants and sedatives. It is essential for applicants to have knowledge of the clinical indications, and the clinical practice guidelines guiding the initiation and ongoing prescribing of these medications, as well as appropriate tapering of psychotropic medications.

Under the direction of the deputy registrar and the program manager, the medical consultant carries out the mandate of the department: to encourage physicians and surgeons to prescribe according to evidence-based best practices and accepted clinical standards, and to promote



quality improvement in medical practice in compliance with CPSBC standards, and in accordance with the Bylaws under the *Health Professions Act*.

The medical consultant will work within a well-established quality assurance program with clear policies and procedures. Consultants will provide feedback and guidance to physicians and surgeons related to the prescribing of psychoactive medications, particularly opioids, sedative, and stimulant medications, and will provide support to registrants by conducting prescribing reviews based on objective criteria.

Medical consultants must have exceptional interpersonal communication skills, be able to work in a collaborative team environment, have a current understanding of best practices, and up-to-date knowledge of clinical care guidelines.

Interested candidates should submit a letter of application, with a resume, to the manager, drug programs.

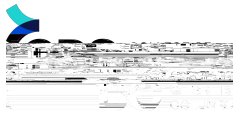
- Confidential fax: 604- 733- 1267
- Email: drugprograms@cpsbc.ca

All correspondence will be held in strict confidence.

An update on DAP medical imaging standards



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NHMSFAP accreditation standards achieve ISQuaEEA accreditation

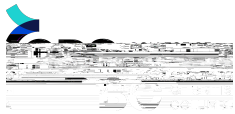


CPSBC's accreditation programs, Non-Hospital Medical and Surgical Facilities Accreditation Program (NHMSFAP) and Diagnostic Accreditation Program (DAP) are members of the International Society for Quality in Health Care (ISQua), which is a member-based, not-for-profit community and organization dedicated to promoting quality improvement in health care.

CPSBC is proud to announce that the NHMSFAP accreditation standards achieved ISQua's External Evaluation Association (ISQuaEEA) accreditation in September 2024. Specifically, 51 NHMSFAP accreditation standards were submitted to ISQuaEEA for evaluation against the ISQuaEEA Guidelines and Principles for the Development of Health and Social Care Standards, 5th Edition Version 1.1.

ISQuaEEA provides third-party external evaluation services to health and social care external evaluation organizations and standards-developing bodies around the globe.

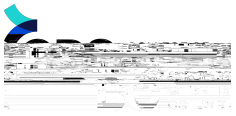
The NHMSFAP received five commendations for outstanding or exceptional performance in areas such as its clear linkage between professional and regulatory requirements and its well-structured



governance and leadership expectations to foster organizational clarity and accountability.

This achievement provides CPSBC's health partners such as the Ministry of Health, non-hospital facility medical directors and owners, physicians, nurses and patients with validation from an independent review organization that the NHMSFAP meets internationally recognized standards and best practices in accreditation.

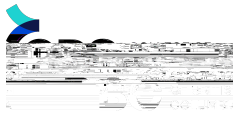
CPSBC is the only medical regulatory authority in Canada that has achieved ISQuaEEA standards accreditation for its Non-Hospital Medical and Surgical Facilities Accreditation Program.



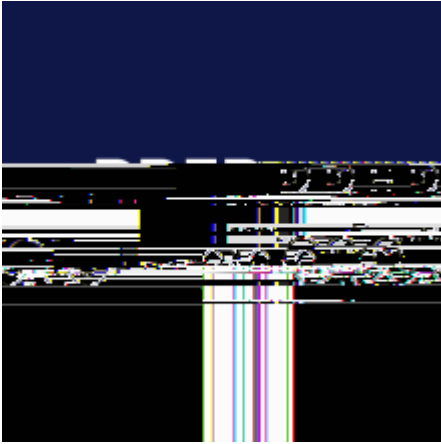
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Registrants living with a blood borne viral infection can still practise medicine and perform EPPs safely.

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Seeking two part- time peer assessors for family practice assessments



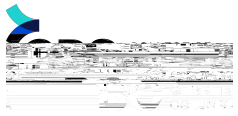
General duties

Professions Act

Health

Deliverables

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Ideal attributes

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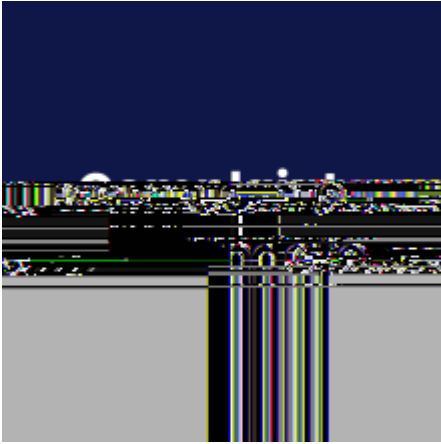
Credentials

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Application process

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Seeking medical reviewers to support Committee



CPSBC's complaints and practice investigations department is currently seeking medical reviewers to work on behalf of the Inquiry Committee to review information collected during a complaint investigation and draft dispositions.

General duties

Reporting to the deputy registrar, complaints and practice investigations, medical reviewers are responsible for:

- Reviewing information collected during a complaint investigation and draft dispositions on behalf of the Inquiry Committee (IC).

Deliverables

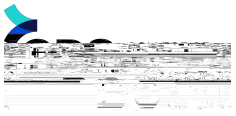
- Providing an average of 40 hours per month.
- Attending four to five virtual IC meetings per year and all required pre-meetings to discuss the complaints before the IC.
- Communicating availability each month for scheduling registrant interviews.

Education, training, and support

- Training and onboarding time with experienced medical reviewers and College staff is compensated.
- Bi-monthly meetings are held with peers and the department leadership team to discuss process changes and identify department objectives.
- Focused continuing professional development is provided.
- A dedicated laptop (for a small annual fee) is provided, which includes voice dictation software and other software required to perform work.

Ideal attributes

- Exceptional writing skills, including the ability to present technical concepts in lay terms and formulate clear and logical reasons in a style that expresses both empathy and a commitment to fairness.
- Understanding that medical reviewers are not decision-makers; that responsibility falls entirely with the IC. Like CPSBC employees, medical reviewers support the work of IC.
- Thriving in a high volume, fast-paced environment while maintaining quality and timeliness standards.
- Being open to feedback and willing to provide constructive feedback to other members of the team.
- Treating all individuals equally with dignity, courtesy and respect, and without discrimination.



Credentials

- A family physician or specialist in general internal medicine, psychiatry, or emergency medicine.
- Licensed in BC, in good standing with CPSBC, and currently engaged in clinical practice.
- Ability to understand, apply, and remain updated on CPSBC practice standards/guidelines and related legislation.

Application process

- All applications will be acknowledged by the director, complaints and practice investigations; however, only short-listed applicants will be contacted for an interview.
- Interviews will take place over MS Teams and will be conducted during regular College business hours (8:30 a.m. to 4:30 p.m. PST).
- Short-listed applicants will also be asked to complete a timed writing exercise, also completed virtually.

Applying

Interested registrants should send a letter of interest and their CV to the attention of the director, complaints and practice investigations:

- Confidential fax: 604- 733- 3503
- Email: complaints@cpsbc.ca

All correspondence will be held in strict confidence.

Explore learning opportunities



[Log in to access](#)

Ending the Patient-Registrant Relationship

5 10 minutes

[Log in to access](#)

Leaving Practice

5 10 minutes

[Log in to access](#)

Medical Record Keeping 101

15 20 minutes

[Log in to access](#)

Medical Record Keeping 201

15 20 minutes

[Log in to access](#)

Navigating Psychoactive Prescribing

20 25 minutes

[Log in to access](#)

Safe Prescribing of Opioids and Sedatives

7 12 minutes

[Log in to access](#)

Virtual Care

10 15 minutes

[Log in to access](#)

