

Committee reports

The chairs of each of the College's committees are required by statute to submit a written report of their specific activities and accomplishments to the Board. These reports can be viewed on the _____



Our mission

Serving the public by regulating physicians and surgeons

Our mandate

The College of Physicians and Surgeons of British Columbia regulates the practice of medicine under the authority of provinlege of(lu)1

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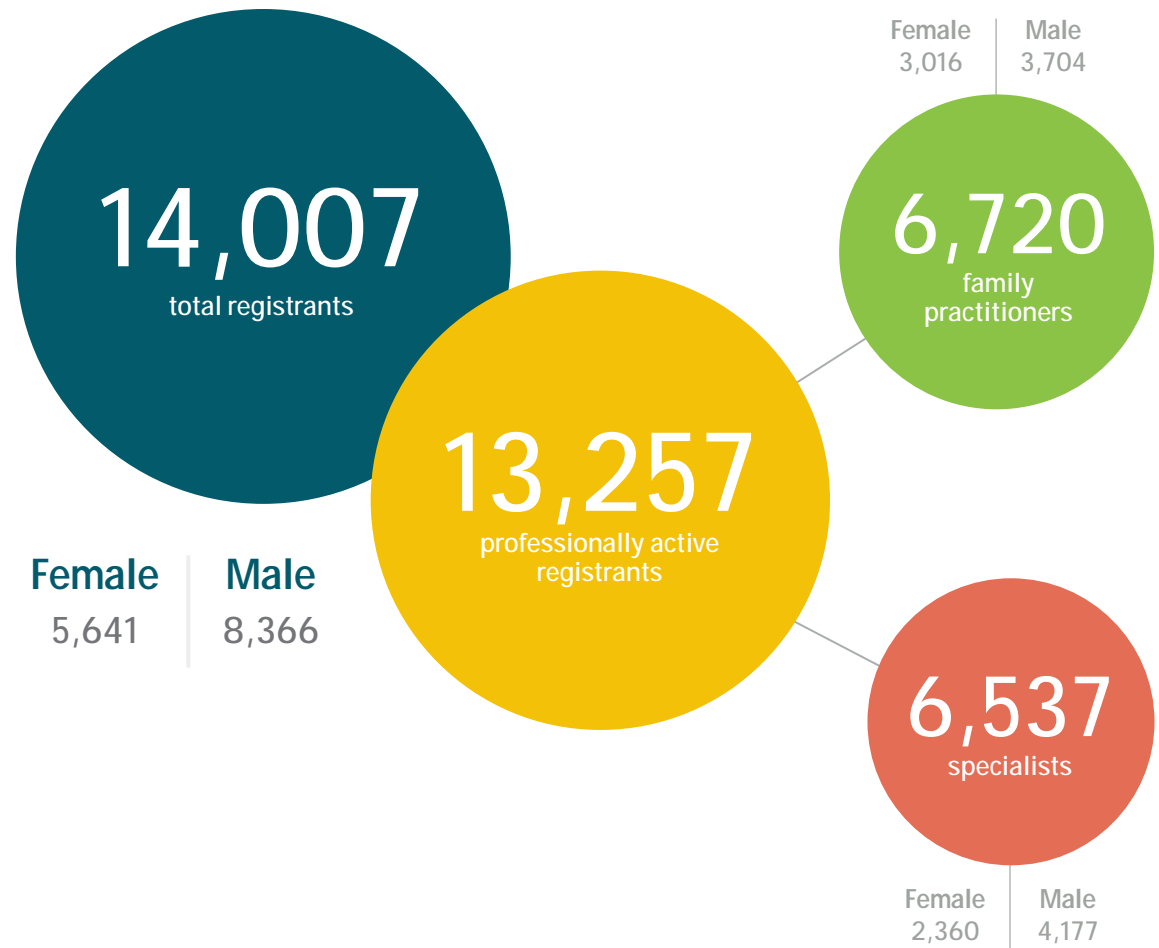
While the College took no position on how health regulators should “right size” to reduce the number of colleges, it did put forward a joint recommendation to amalgamate with the College of Podiatric Surgeons of

3 Registering qualified physicians

The College has legislated registration requirements that must be met before a physician can obtain a licence to practise medicine in British Columbia. Before making a decision, the College carefully reviews a physician's education, training, and relevant practice experience, as well as any outstanding investigations, disciplinary actions or restrictions from other jurisdictions, to ensure that only qualified, competent and ethical physicians are granted registration. The College also administers the *Criminal Records Review Act*, which provides that a criminal record check must be completed by all registrants of the College.

Applicants who meet all of the requirements of the full class of registration may begin independent medical practice within their scope anywhere in the province.

The College welcomes applications from physicians who have obtained their medical degree in another country. International medical graduates (IMGs) are often registered in the provisional class of licence as an interim step so that they can apply their knowledge and skill to the care of patients while under sponsorship by a health authority and supervision by another qualified physician. To advance to the full class of registration, physicians in the provisional class must complete Canadian qualifying exams, or they may be eligible to participate in a comprehensive workplace assessment within a specified period of time.



Figures calculated as of February 2023.

Registering qualified physicians

Country	F	M	Total	Country	F	M	Total
Canada	1	1	2	Netherlands			
South Africa	1	1	2	Singapore			
United Kingdom	1		1	Turkey			
India	1	1	2	Uganda	1		1
Ireland	1	1	2	Zimbabwe	1		1
United States		1	1	Belgium			
Iran			1	Cayman Islands			
Australia			1	Syrian Arab Republic			
Nigeria			1	Aruba			
Pakistan				Austria			
China				Saint Vincent and Grenadines			
Poland				Sudan			
Grenada				Chile			
Netherlands Antilles	1	1	2	Serbia and Montenegro		1	1
Egypt	1		1	Spain			
Russia		1	1	Viet Nam	1		1
Dominica	1		1	Belarus		1	1
Germany	1	1	2	Bosnia and Herzegovina			
Saint Kitts and Nevis	1		1	Democratic Republic of the Congo	1		1
Romania				France			
New Zealand				Italy			
Iraq	1	1	2	Kenya			
Philippines	1	1	2	Montserrat	1		1
Other*	1	1	2	Republic of Korea			
Libya				Senegal			
Ukraine	1	1	2	Trinidad and Tobago		1	1
Saudi Arabia		1	1	Croatia			
Bulgaria		1	1	Ghana	1		1
Jamaica		1	1	Croatia			
Argentina			1				
Bangladesh			1				
Brazil			1				
Antigua and Barbuda			1				
Mexico			1				
Colombia			1				
Czech Republic			1				
Israel			1				
Taiwan			1				
Hungary							

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Registering qualified physicians

Geographic distribution of professionally active registrants

	Family practitioners	Specialists	Total
District 1 Vancouver Island, South	757	664	1,421
District 2 Vancouver Island, Central and Northern	645	351	996
District 3 Vancouver and surrounding area	1,872	2,801	4,673
District 4 Fraser	1,746	1,465	3,211
District 5 Thompson-Okanagan	820	714	1,534
District 6 Kootenays	265	113	378
District 7 Northern	487	207	694
Other*	128	222	350
Grand total	6,720	6,537	13,257

* Other includes registrants with multiple or out-of-province addresses, such that an electoral district could not be determined.

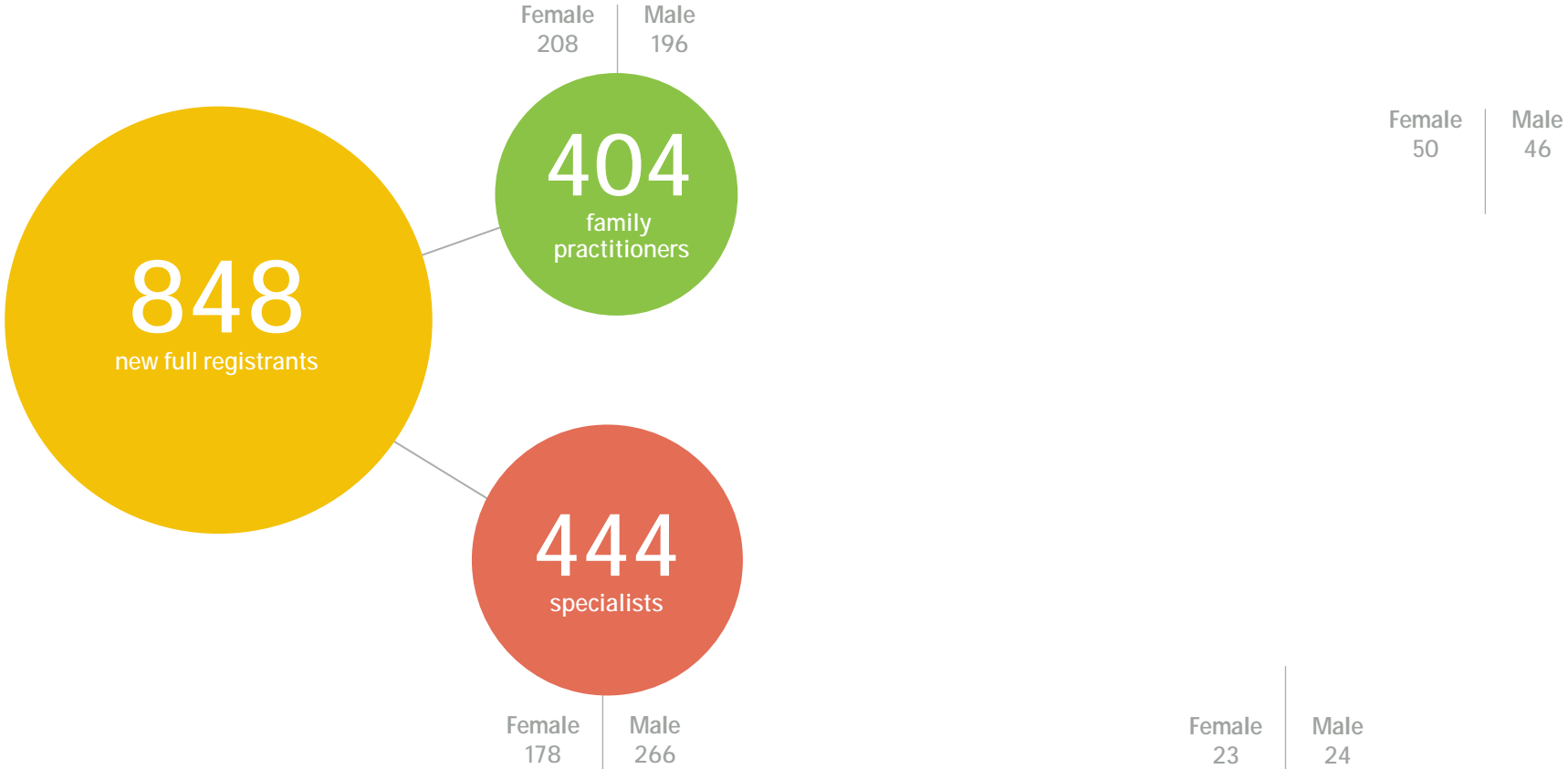
Figures calculated as of February 2018.

B I T H C O L U M B I A

Specialties of professionally active registrants

	F	M	Total		F	M	Total
Anatomical Pathology			10	Pediatrics	10	100	10
Anesthesiology	10	10		Physical Medicine and Rehabilitation			10
Cardiac Surgery		10		Plastic Surgery			100
Cardiology	10			Psychiatry			
Cardiothoracic Surgery		10	10	Public Health and Preventive Medicine		10	10
Cardiovascular and Thoracic Surgery				Radiation Oncology			
Child and Adolescent Psychiatry	10		10	Rheumatology	10	10	
Clinical Immunology		10	10	Therapeutic Radiology		10	10
Community Medicine		10	10	Urology	10		10
Dermatology			10	Vascular Surgery			
Developmental Pediatrics		10	10				
Diagnostic Radiology	10	10					
Emergency Medicine		10	10				
Endocrinology and Metabolism		10	10				
General Pathology	10						
General Surgery		10					
Hematological Pathology	10	10					
Hematology	10						
Internal Medicine	10	10					
Medical Biochemistry			100				
Medical Genetics	10		10				
Medical Microbiology	10	10					
Medical Oncology	10		10				
Neurology	10	10	10				
Neuropathology	10						
Neurosurgery	10	10					
Nuclear Medicine	10		10				
Obstetrics and Gynecology	10	10					
Occupational Medicine							
Ophthalmology		10	10				
Orthopedic Surgery							
Other*		10	10				
Otolaryngology	10		10				
– Head and Neck Surgery							

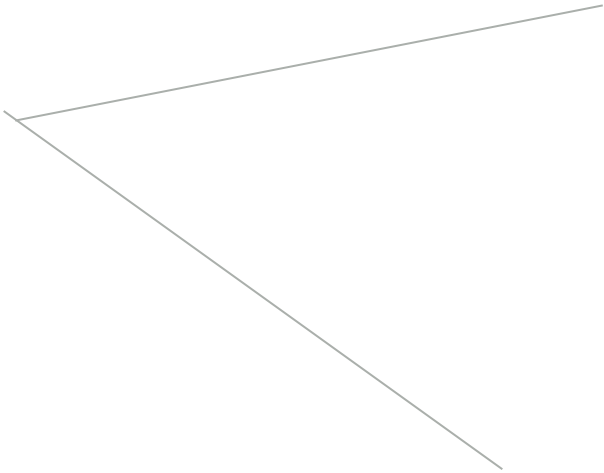
New registrants



Female
514

Male
1,204

251



For the purposes of the Annual Report, an international medical graduate is determined by the jurisdiction where the medical degree was obtained, not by country of birth.

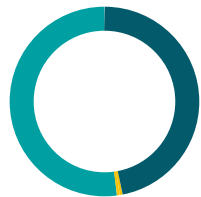
Female
894

Male
1,388

Registering qualified physicians



Educational registrants



Medical students
1,237
 F 642 M 592
 3 undisclosed



Residents
1,291
 F 677 M 614

Figures calculated as of February 2023

HEALTH PROFESSIONS REVIEW BOARD (HPRB) Registration matters

371 reviewable registration decisions issued by the Registration Committee

16 applications for review of a decision by the Registration Committee were filed

4 applications for review of a decision by the Registration Committee were dismissed

Note: A dismissal includes applications voluntarily withdrawn by the applicant and applications formally dismissed by the HPRB.

The College received the following final decisions from the HPRB with respect to Registration Committee matters:

4 applications for review of a decision by the Registration Committee were confirmed

1 application for review of a decision by the Registration Committee returned for reconsideration

Pursuant to the *Health Professions Act*, a registrant or an individual seeking to become a registrant may apply to the HPRB for a review of a decision of the Registration Committee (reviewable registration decisions) within 60 days of the day on which written notice of the decision was delivered.

All of the decisions made by the HPRB can be found at www.hprb.gov.bc.ca.

4 Addressing patient concerns

Safeguarding the public is the mandate of the College. The comprehensive review of each complaint led with the College ensures a just and fair process for patients and physicians involved in complaints proceedings. Every complaint led with the College is reviewed by the Inquiry Committee comprised of physicians and members of the public.

Through its investigation, the Inquiry Committee determines the best means to conclude the matter in the public interest. If the Inquiry Committee is critical of the physician, the *Health Professions Act* provides three options for resolution depending on the seriousness of the concern:

- 1. Informal resolution through correspondence, interviews, and/or educational activities
- 2. Formal consequences, short of discipline, including reprimands and practice restrictions
- 3. Referral to the registrar with direction to issue a citation and begin disciplinary proceedings

The majority of complaints that prompt the issuing of a citation are ultimately resolved through consent orders. If a consent resolution is not possible, the matter proceeds to a hearing before the Discipline Committee.

Themes of complaints:

Clinical

- Over or under prescribing medication
- Incorrect diagnosis that may put a patient at risk
- Failure to perform a physical examination

Conduct

- Inappropriate communication and rudeness
- Undue delay in transferring medical records or completing reports

Boundary violations

- Inadequate conduct during a sensitive exam
- Inappropriate social or business relationship with a patient

An overview of the process for filing a complaint against a physician is available in nine languages and can be found on the [College website](#).

Complaints opened

993

Clinical	432
Conduct	426
Boundary	11
Other	124

4 Addressing patient concerns

By subcategory

1,074

Clinical	448
Diagnosis	
Prescribing	
Consent	10
Surgical complication	
Case management	
Other complication	10
Documentation	
Conduct	481
Communication	10
Breach of confidentiality	10
Conflict of interest	
Medical records and third party medical reports	
Practice management	
Advertising	
Conduct – other concern	10 10
Discrimination/access to care	
Boundary	22
Spoken/written communication	10
Physical contact	10
Boundary – other concern	
Other	123
Duty to report registrant	
Criminal/quasi-criminal	10
Review of practice	
Breach of undertakings	10

By disposition

1,074

No (or very minor) criticism	(a) & (c)	556
Criticism		436
Advice/written criticism	(b) & (c)	2x tE(20)1 () 0(c)

4 Addressing patient concerns

HEALTH PROFESSIONS REVIEW BOARD Complaint matters

790 reviewable complaint decisions

70 applications for review of a complaint decision

12 applications for review of a delay in the completion of the investigation

Note: As per the *Health Professions Act*, all complaint parties are permitted to file a delay application when the investigation exceeds 90 days.

The College received the following final decisions from the HPRB with respect to Inquiry Committee matters:

47 confirmations of the Inquiry Committee disposition

5 dismissals of an application for review of an Inquiry Committee disposition

Note: A dismissal includes applications voluntarily withdrawn by the applicant and applications formally dismissed by the HPRB.

2 remittals back to the Inquiry Committee for reconsideration

13 applications for review of a delay in the completion of the investigation concluded with order to complete investigation by a specific date

Pursuant to the *Health Professions Act*, a complainant has the right to take complaint dispositions of the Inquiry Committee to the HPRB within 30 days of the day on which written notice of the disposition is delivered to the complainant for two reasons: (1) if they wish to appeal the decision of the Inquiry Committee (reviewable IC dispositions); (2) if the Inquiry Committee does not conclude the complaint within a legislated time frame (delayed investigation notices).

All of the decisions made by the HPRB can be found at www.hprb.gov.bc.ca.

Unlawful practice

The College's public protection mandate includes ensuring that people who are not registered or licensed with the College do not provide any service or treatment that is considered the "practice of medicine."

In 2017, the College successfully obtained a Court-ordered injunction against the following unlawful practitioner:

- Mr. Mehran Ghoreishi

Additionally, the College successfully petitioned the Court for a finding of contempt against the following unlawful practitioners:

- Ms. Maria Ezzati
- Ms. Rajdeep Kaur Khakh

For more details, see the [full report on unlawful practice](#).

Finally, the College is involved in court proceedings concerning the constitutionality of subsection 12.1(1) of the *Health Professions Act*. This provision prohibits non-registrants from using titles to describe their work that the minister of health has prescribed for the exclusive use by registrants of a regulatory college. The College of Midwives of BC commenced the proceedings in the Supreme Court of British Columbia, which ruled in October 2017 the provision to be of no force or effect. The College appeared in the proceedings as an intervenor party. The case is now on appeal, and the College is again an intervenor.

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5 Ensuring physician competence

Physician Practice Enhancement Program



All BC physicians who provide community-based care in private offices or multi-physician clinics, or who work as long- and short-term locums, will participate in the Physician Practice Enhancement Program (PPEP) at some point in their career. During a PPEP assessment, a physician may be required to participate in five assessment components:

- peer practice assessment of recorded care
- multi-source feedback assessment
- review of their PharmaNet prescribing profile
- office assessment
- physician interview with feedback and coaching

PPEP assessments provide external evaluation using multiple measures to assess performance, knowledge, and skills, as well as initial educational support for physicians to ensure they meet appropriate and current standards of practice throughout their professional lives.

Geographic distribution of practice assessments

	Family practitioners	Specialists	Total
District 1 Vancouver Island, South	69	29	98
District 2 Vancouver Island, Central and Northern	54	3	57
District 3 Vancouver and surrounding area	171	43	214
District 4 Fraser	127	33	160
District 5 Thompson-Okanagan	49	24	73
District 6 Kootenays	20	1	21
District 7 Northern	24	3	27
Grand total	514	136	650

Physician Office Medical Device Reprocessing Assessments

The College's Physician Office Medical Device Reprocessing Assessments (POMDRA) initiative proactively assesses the reprocessing of reusable semi-critical and/or critical medical devices in community-based physician offices and provides support and education to physicians and office staff so they can continue to provide safe care to their patients.

POMDRA is based on the requirements outlined in the Ministry of Health's *Best Practices for Cleaning, Disinfection and Sterilization for Critical and Semi-Critical Medical Devices* (2011) and the Canadian Standards Association (CSA) medical device reprocessing standard. POMDRA applies to physicians who practise in a community-based setting whether in a solo office or multi-physician clinic. It does not apply to clinical offices or outpatient clinics affiliated with a health authority or hospital, which have their own evaluation processes.

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Ensuring physician competence

Accreditation programs

The College administers two programs that accredit all of BC's diagnostic and private medical/surgical facilities. The College's accreditation programs establish accreditation and performance standards, procedures and guidelines to ensure the delivery of high-quality health system services.

Diagnostic Accreditation Program

The Diagnostic Accreditation Program has accreditation programs covering diagnostic imaging, laboratory medicine, neurodiagnostic services, pulmonary function and polysomnography.

400	private diagnostic facilities operate in BC*
293	public diagnostic facilities operate in BC*
188	site surveys were completed
26	initial assessments were performed for new facilities
9	assessments were performed for facilities that relocated

Non-Hospital Medical and Surgical Facilities Accreditation Program

The Non-Hospital Medical and Surgical Facilities Accreditation Program accredits private medical/surgical facilities across the province.

0	new private medical/surgical facilities opened
2	private medical/surgical facilities closed
55	private medical/surgical facilities operate in BC*
13	private medical/surgical facilities were accredited as part of their four-year accreditation cycle or focused visit
11	received four-year terms
2	received four-year terms with focused assessments during the cycle
738	physicians are authorized by the College to provide medical services in one or more private medical/surgical facilities*

Note: Due to the COVID-19 pandemic, private medical/surgical facilities were unable to provide services in one or more private medical/surgical facilities*

6 Collaborating with key health partners

BC Public Advisory Network

The BC Public Advisory Network (BC-PAN) is a new multi-college initiative formed to encourage more comprehensive and meaningful public engagement on important issues related to health-care regulation in BC.

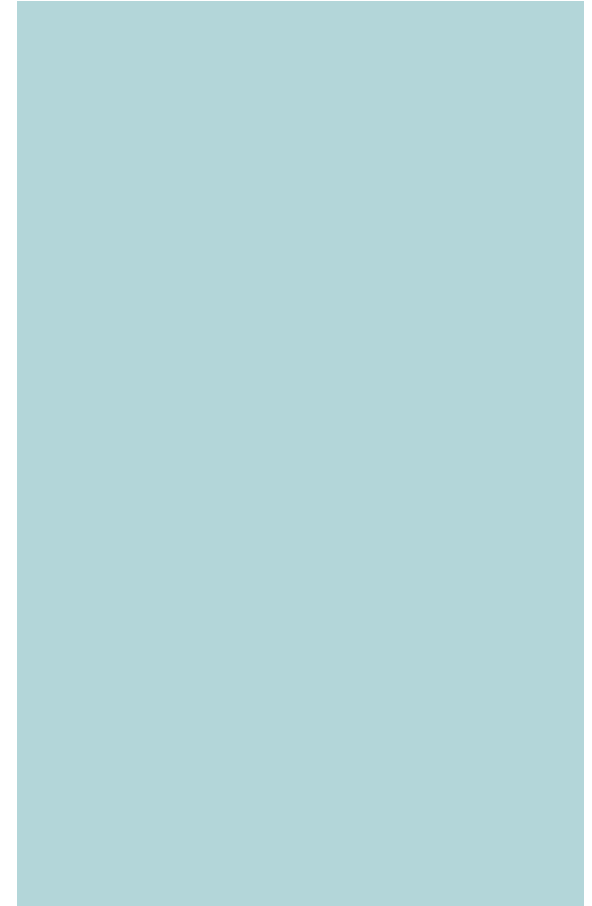
Eleven public advisors participated in two meetings during the BC-PAN's pilot phase, which ran from March



6 Collaborating with key health partners

Meet and greet with members of the legislative assembly

On May 10, Dr. Heidi Oetter, registrar and CEO, and Dr. Patrick Rowe, Board president, hosted the second annual breakfast meet and greet for members of the legislative assembly in Victoria. Following an introduction from Minister of Health Adrian Dix,



7 Guiding the profession

Developing practice standards and professional guidelines

The College is committed to sharing information and consulting widely with stakeholders on matters of mutual interest and importance. In 2017 / 18, the College engaged numerous stakeholders in the development and ongoing review of various practice standards and professional guidelines.

Consultation

Consulting with registrants during the development of new or revised practice standards provides insight into various perspectives on specific issues, including how to operationalize standards in a clinical setting.

Bringing the patient's voice to the consultation process assists the College in developing public resources to further clarify expectations contained in practice standards.

Standard revisions

The following new or revised practice standards were approved by the Board and published on the College website:

- [Advertising and Communication with the Public](#)
- [Blood-borne Viruses in Registrants](#)
- [Cannabis for Medical Purposes](#)
- [Charging for Uninsured Services](#)
- [Independent Medical Examinations](#)
- [Medical Records, Data Stewardship and Confidentiality of Personal Health Information](#)
- [Physical Examinations and Procedures](#)
- [Primary Care Provision in Walk-in, Urgent Care and Multi-physician Clinics](#)
- [Promotion and Sale of Medical Supplies and Devices](#)
- [Reporting a Child in Need of Protection](#)
- _____

7 Guiding the profession

2019 Education Day

This year's Education Day theme was *Non nocere: useful ideas and initiatives in the cause of patient safety*.

The College was pleased to welcome Dr. Bryan Sexton from the Duke Center for Healthcare Safety and Quality who introduced practical yet effective ways for busy health-care workers to build resilience in order to deliver safe and high-quality care. The event also featured patient advocate Ms. Judith John who shared personal insights on how physicians can facilitate better patient experiences. Attendees participated in interactive College case studies and chose from a afternoon workshops on caring for patients with substance-use disorders, obtaining informed consent, antibiotic resistance, and virtual solutions for physicians in rural areas.

Future learning

After more than 10 years of hosting successful in-person Education Day events, the College Board has decided to redirect resources to develop a comprehensive, online curriculum for registrants on regulatory topics that impact medical practice.

Library

The College library positions itself as a prime source of clinical information for practising registrants to support their efforts to remain current and competent throughout their careers. Core services are in-depth literature searches, delivery of documents, and teaching physicians to locate evidence-based medical information.

1,944	individual physicians served (excluding self-serve through the website)
11,284	total contacts between staff and registrants
1,464	literature search requests
63,000	articles delivered
16,800	ebook chapters viewed

Providing support

The College's contact centre receives phone and email inquiries from physicians and members of the public about the College's standards and guidelines, registration and complaints processes, physician contact information, and other related topics. The College's medical staff offers advice to physicians in all areas of practice such as ethics and professionalism, and statutory compliance.

39,662 inquiries received

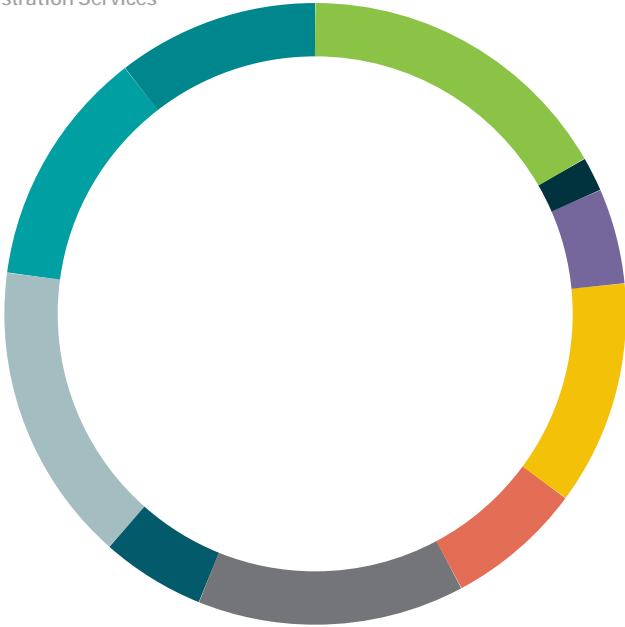
8 Managing resources

Expenditures by function

(Expressed in thousands of dollars)

Note: Allocations of expenditures by function are unaudited figures.

11% | \$3,459
Registration Services



9 Practising good governance

College Board

The role of the College and its authority and powers are set out in the *Health Professions Act*, RSBC 1996, c 10, the Regulations and the Bylaws made under the Act. A Board of 10 peer-elected physicians and six members of the public appointed by the Ministry

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Practising good governance



2019/20 College Board and Senior Management Team

Standing (left to right): Dr. C.S. Leger, Dr. G. Parhar (treasurer), Dr. M.J. Murray, Dr. A. Du Preez, Dr. J.J. Kingsley, Dr. W.D. Sanden, Dr. L.F. Dindo, Ms. C. de Bruin, Dr. P.D. Rowe, Ms. H.N. Purewal, Mr. B.C. Bell (president), Dr. H.M. Oetter (registrar and CEO), Mr. M. Epp, Dr. D.A. Unger, Ms. J.W.E. Dyson, Mr. T.T.S. Mann

Sitting (left to right): Mr. G. Keirstead, Dr. B.A. Priestman, Dr. J.G. Wilson, Ms. S.F.J. Ross, Mr. B.D. Penner, Dr. R.R. Abrahams

9

Practising good governance

College committees

The Board establishes standing committees made up of board members, subject matter experts and public representatives who review issues and provide guidance and direction to the Board and College staff, ensuring a balanced and equitable approach to professional regulation.

Executive Committee

Mr. B.C. Bell^E ⁺>
 Dr. G. Parhar^E
 Mr. B.D. Penner, QCE >
 Dr. B.A. Priestman^E
 Dr. P.D. Rowe^E

Finance and Audit Committee

Dr. G. Parhar^E ⁺
 Mr. B. Sanghera⁸ >
 Mr. B.C. Bell^E >
 Dr. C.S. Leger^E
 Ms. K. Raman >
 Ms. S.F.J. Ross^E >
 Dr. P.D. Rowe^E

Registration Committee

Dr. O.G. Casiro⁺
 Dr. M.D. Carter⁸
 Dr. L.F. Dindo^E
 Dr. A. Du Preez^E
 Mr. D. Goldsmith >
 Ms. T. O'Grady >
 Dr. I.C. Hughan[●]
 Mr. B.D. Penner, QCE > [●]

Inquiry Committee

Panel A

Dr. P.D. Rowe^E ⁺
 Ms. S.F.J. Ross^E ⁸ >
 Ms. J. Erickson >
 Dr. G.A. Vaughan
 Dr. M.D. Carter[●]
 Ms. L. Charvat > [●]

Panel B

Dr. B.A. Fleming⁺
 Mr. T.T.S. Mann^E ⁸ >
 Dr. B.M. Bagdan
 Dr. N.P. Blair
 Ms. J.N.Y. Choi >
 Dr. T. Cordoni
 Ms. M.C. Gordon >
 Dr. M.J. McMillan
 Dr. A.E. McNamara
 Ms. H. Muller >
 Dr. J.A. Soles

Panel C

Dr. B.A. Priestman^E ⁺
 Dr. G.A. Vaughan⁸
 Ms. K. Brooks >
 Ms. J.W.E. Dyson^E >
 Dr. R.A. Irvine
 Ms. P.A. McDonald >
 Dr. L.K. Wong
 Ms. L. Argatou > [●]

Panel D

Dr. L.F. Dindo^E ⁺
 Dr. A.I. Sear⁸
 Ms. C. Evans >

Panel E

Dr. M. McCarthy⁺
 Mr. B.D. Penner, QCE ⁸ >
 Dr. G.A. Vaughan

LEGEND

- ^E Board member
- ⁺ Chair
- ⁸ Vice-chair
- > Public representative
- [●] Alternate

Discipline Committee

Physician members

Dr. D.M.S. Hammell⁺
 Dr. N.J. Byrne
 Dr. M.A. Docherty
 Dr. D.J. Etches
 Dr. J.M.M. Turner

Public representative members

Mr. K. Bracken, QC >
 Ms. J. Clarke >
 Mr. W.M. Creed, FCA >
 Mr. S. Gill >
 Ms. V. Jenkinson >
 Mr. S. Kuiack >
 Mr. M.A. MacDougall >
 Mr. G.R. Toews, QC >

Legal members

Ms. M. Baird, QC >
 Mr. H. Kushner >
 Ms. K.F. Nordlinger, QC >
 Ms. A.R. Westmacott, QC >
 Ms. J.P. Whittow, QC >

Quality Assurance Committee
Non-Hospital Medical and
Surgical Facilities Accreditation
Program Patient Safety
Incident Review Panel

Mr. B.C. Bell  >

Dr. R.R. Abrahams  8

>

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Dr. R.R. Abr >

College departments and contacts



The College has been recognized as one of BC's Top Employers since 1991, and one of Canada's Top Employers since 1995. As one of Canada's most respected annual awards, the Canada's Top 100 Employers competition recognizes excellence in companies who provide exceptional workplaces and benefits to their employees.

COLLEGE OF PHYSIC