

APPROVED MINUTES

May 31, 2024

Attendance

Members present:

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Regrets



1. Territorial acknowledgement

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4. Adoption of the agenda

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RESOLUTION 24-522
RESOLVED

5. Consent agenda

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RESOLUTION 24-523
RESOLVED

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6. Adoption of the minutes:

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RESOLUTION 24-524
RESOLVED

7. Record of resolutions approved via facsimile/email

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8. Report of the registrar

Therapeutics Initiative

Jasper Medical Conference

Federation of State Medical Boards (FSMB) Annual Meeting April 18-20, 2024

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- 12.4 Associate Physician Class registration policies
 - Associate Physician - Acute Care Class ~~§~~Registration and Licensure Requirements for Eligibility and Accountability
 - Associate Physician Class ~~§~~Eligible Clinical Programs
 - Associate Physician Class ~~§~~Use of Title
 - Associate Physician ~~§~~Community Primary Care Class ~~§~~Health Authority
 - UPCC - Registration and Licensure Requirements for Eligibility and Accountability

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2. Office assessment (of which POMDRA is a part)

3. Self-directed assessment

13. Information items

13.1 Media summary report relevant to CPSBC

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14. Next meeting

REPORT TO BOARD

Health Professions Review Board (HPRB) Matters March 1, 2023 – February 29 , 2024

1. Inquiry Concerning the Assignment of the HPA2 (d) CRE Under the

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REPORT TO BOARD

Inquiry Committee – Panel B

February 26, 2024

Attendance

Chair

Dr. R. McCallum (Alternate)

Members present

Ms. J. Dyson (Vice Chair, Alternate)

Dr. J. Sole

Dr. D. Spooner

Dr. F. Din (Alternate)

Dr. M. Aron (Alternate)*

Dr. M. Bagdan *

Ms. L. Argatoff

Ms. M.L Casavant

* *Indicates part-time attendance*

Overview/summary

- 14 files naming 13 physicians; 13 files concluded, 1 deferred
- 9 of 13 physicians concluded with criticism
- Direction to seek consent to remedial disposition, *Health Professions Act*, section 36(1):
 - 8 for specified education:

5 for the College's *Medical Record Keeping for Family Physicians* course

1 for San'yas Anti-Racism Indigenous Cultural Safety Tq630 1 251.93 111.02 Tn6912 0 612





REPORT TO BOARD

Inquiry Committee – Panel B

April 15, 2024

Attendance

Chair

Dr: Jason Wale

Members present

Mr: Taj Mann – Vice Chair

Ms: Michelle Casavant

Ms: Laine Shore

Mr: Lionel Yip

Dr: John Soles

Dr: Teresa Cordoni

Dr: Matthew Bagdan

Dr: Doran Ksienski

Regrets

Ms: Louaine Argatoff

Dr: George Chang

Dr: Jeff Kenie

Dr: Devon Spooner

Overview/summary

11 files naming 16 physicians, 9 files concluded

4 of 16 physicians concluded with criticism

The Inquiry Committee reviewed a request for reconsideration of a previous disposition
The Inquiry Committee reviewed the request of the subject physician and accepted the request to rescind the direction of a reprimand under section 36(1)(c).

Direction to seek consent to a medical disposition, Health Professions Act, section 36(1):

§ 1 for specified education, this is the course that was directed:

Screening and assessment of gynecological tumours

HPA, section 36e

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REPORT TO BOARD

Inquiry Committee – Panel C

March 19, 2024

Attendance

Chair

Dr. L. King*

Members present

Ms. P.A McDonald (Vice-Chair)

Mr. M. Thompson

Ms. K. Brooks

- 1 for specified education in communication
- 2 written commitments:
 - to comply with College practice standard
 - to comply with College practice standard
- 8 interviews

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:

Dr. L.K Wong, Chair

REPORT TO BOARD

Inquiry Committee – Panel C

April 30, 2024

Attendance

Chair

Mr. T. Mann

Members present

Dr. J. Kerrie (Vice-



REPORT TO BOARD

Inquiry Committee – Panel C

May 14, 2024

Attendance

Chair

Dr. L.K Wong

Members present

Ms. P.A McDonald (Vice-Chair)

Ms. K. Brooks

Mr. M. Thompson

Dr. K.E. Bennett

Dr. N.E. Severin

Dr. R. McCallum

Dr. S. Sohmer

Ms. M. Casavant (Alternate)

Regrets

Nil

Others present

Ms. Targol Salehi (Observer)

Overview/summary

- 10 files naming 12 physicians; all concluded
- 8 of 12 physicians concluded with criticism
- Direction to seek consent to remedial disposition, *Health Professions Act, section 36(1)*:
 - 4 for specified education:

REPORT TO BOARD

Inquiry Committee Panel D

March 14, 2024

Attendance

Chair

- x Dr. Luay Dindo

Members present

- x Dr. Andrew Sear, Vice-chair
- x Ms. Christine Evans , Public Representative
- x Ms. Pamela MacDonald , Alternate Public Representative

Represents part-time attendance

Overview /summary

- x 77 files naming 9

REPORT TO BOARD

Inquiry Committee Panel D

May 28, 2024

Attendance

Chair

- x Dr. Luay Dindo

Members present

- x Dr. Andrew Sear, Vice-chair
- x Ms. Christine Evans, Public Representative

Overview /summary

x 87 files naming 104TT0 11.04 Tf 102.74 354.29 Td ()Tj ET Q q 0 0 612 792 reS0 gs /C2_0 11.04 Tf 90.024

REPORT TO BOARD

Panel E Inquiry Committee

March 20, 2024

Attendance

Chair

- x Mr. B. Penner, KC.

Members present :

- x Dr. F. Dossa (vice-chair)
- x Dr. S. Tsuchiya

Overview /summary

21 files were reviewed; 7 closed;

- x 1 file concluded with a referral to the Board/Executive Committee for consideration of a Skill and Knowledge assessment.
- x 4 files concluded with no further action.
- x 2 files concluded with a written commitment;
 - o 1 written commitment;
 - f* to limit patient volumes in [his] office to no more than six per hour and 35 per day and continue quality improvement efforts with respect to his patient records.
 - o 1 written commitment;
 - f* to adopt a formal charting format and document history and examination in a more fulsome manner d d

- x 8 files will proceed to an on-site practice investigation.
- x 1 file will proceed with an investigative interview.

Respectfully submitted,

Dr. D. Puddester, Deputy Registrar, on behalf of:
Mr. B. Penner, KC, Chair

REPORT TO BOARD

Panel E Inquiry Committee

May 1, 2024

Attendance

Chair

- x Mr. B. Penner, KC.

Members present :

- x Dr. R. McCallum (vice-chair)
- x Dr. S. Tsuchiya

Regrets

- x Dr. F. Dossa

Overview /summary.

18 files were reviewed: 11 closed:

- x 6

Of the 7 files not concluded, next steps included;

- x 5 files will proceed to an off- site chart review.
- x 5 files will proceed with an investigative interview.
- x 2 files request that the registrant undertake further education and/or a remedial plan
- x 2 files will proceed with an on -site practice investigation.
- x 1 file will seek a written commitment to;
 - o meet the College standards for medical record keeping .
- x 1 file will seek a written commitment to;
 - o not accept any new patients

- x One file will be directed to arrange a stage 5 first interview with the deputy registrar, senior medical consultant, and expert panel member. The registrant will also be required to complete additional educational courses.



J. Dyson
Prescription Review Panel Chair

JD/mt

Committee Report to the Board – Open

REGISTRATION COMMITTEE

Details

Meeting date:	March 28, 2024
Committee chair:	Dr. Thelma O’Grady (Public Member)
Committee members in attendance:	Dr. Luay Dindo David Goldsmith (Public Member) Dr. Isabelle Hughan Dr. Anneline Du Preez

The meeting was held in person.

Consideration of Substantial Equivalency for Conditional -Practice Setting Registrants

The Registration Committee (the Committee) of the College of Physicians and Surgeons of British Columbia (the College) was requested to review and consider whether 24 registrants in the conditional – practice setting class would be eligible for registration in the full – specialty class section 1-15(3) of the College Bylaws (the Bylaws) made under the Health Professions Act (HPA).

Provided for the Committee’s review were 24 registrants in the conditional – practice setting class who would be eligible for the restricted class and hold Royal College of Physicians and Surgeons of Canada (RCPSC) certification in their primary specialty, but do not hold

The Committee exercised its discretion under section 1 -15(3) of the Bylaws, and found substantial equivalency for each of the 24 registrants for transfer to the full – specialty class.

Policy Update - Requirement for a Certificate of Completion of Training (CCT) for I.2 (on) y tPne oG0 -1.21r.5

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Committee Report to the Board – Open

REGISTRATION COMMITTEE

Details

Meeting date:	May 7, 2024
Committee chair:	Dr. Thelma O’Grady (Public Member)
Committee members in attendance:	Dr. Luay Dindo David Goldsmith (Public Member) Dr. Andrew MacNeily Dr. Shannon McDonald Dr. Anneline Du Preez

The meeting was held in person.

Policy Update – Requirement for a Certificate of Completion of Training for International Medical Graduate in the Provisional Class

The Registration Committee (the Committee) wRoyal College of Physicians and Surgeons of Canada (RCPSC) subspecialty is considered a primary specialty in the physician’s RCPSC -accredited training jurisdiction, without the requirement to provide a CCT in the equivalent RCPSC primary specialty.

The Committee acknowledged that there are jurisdictions which designate as primary specialties disciplines that the RCPSC identifies as subspecialties. Physicians who have completed all necessary training in these jurisdictions for recognition as a subspecialist are effectively awarded only one CCT in an RCPSC subspecialty and not the equivalent RCPSC primary specialty.

The Committee also acknowledged that they recently accepted a CCT for forensic psychiatry with a RCPSC ruling for psychiatry as meeting the requirements set out in section 2 - 16(1)(b)(iii) on a case-by-case basis. Therefore, the Committee was requested to consider amending the Policy to accept a subspecialty CCT only, accompanied by RCPSC rulings in the equivalent primary and subspecialty for the purposes of registration and licensure in the provisional – specialty class to practice as a specialist in the subspecialty.

The Committee approved the updated policy as written:

That the Committee amends its policy, Requirement for a Certificate of Completion of Training for International Medical Graduate in the Provisional Class , to include acceptance of a certificate of completion of training (CCT) in a Royal College of Physicians and Surgeons of Canada (RCPSC) subspecialty, where that subspecialty is considered a primary specialty in the physician's RCPSC-accredited training jurisdiction, without the requirement to provide a CCT in the equivalent RCPSC primary specialty.

Applicants to the provisional – specialty class who have completed the entirety of their postgraduate training in an RCPSC -accredited jurisdiction where their RCPSC subspecialty is considered a primary specialty will be required to provide acceptable rulings of RCPSC examination eligibility in the RCPSC primary specialty and subspecialty.

Policy Update – Eligibility in the Provisional Class: RCPSC Rulings Acceptable to the Registration Committee

The Committee was requested to amend its policy, Eligibility in the Provisional Class: RCPSC Rulings Acceptable to the Registration (the Policy) to include RCPSC ruling to sit the subspecialty examinations under the Subspecialty Examination Affiliate Program (SEAP) as an acceptable ruling under section 2 -16(1)(b)(iii) of the College Bylaws (the Bylaws) for eligibility to be registered and licensed in the provisional –specialty class, subject to receipt of a letter of commitment from the physician that they will practice in their subspecialty only.

The Committee acknowledged that an internationally -trained subspecialist may be eligible 6.1 (f) 6.7 (f) 6.1 (g) 6.1 (h) 6.1 (i) 6.1 (j) 6.1 (k) 6.1 (l) 6.1 (m) 6.1 (n) 6.1 (o) 6.1 (p) 6.1 (q) 6.1 (r) 6.1 (s) 6.1 (t) 6.1 (u) 6.1 (v) 6.1 (w) 6.1 (x) 6.1 (y) 6.1 (z) 6.1 (aa) 6.1 (ab) 6.1 (ac) 6.1 (ad) 6.1 (ae) 6.1 (af) 6.1 (ag) 6.1 (ah) 6.1 (ai) 6.1 (aj) 6.1 (ak) 6.1 (al) 6.1 (am) 6.1 (an) 6.1 (ao) 6.1 (ap) 6.1 (aq) 6.1 (ar) 6.1 (as) 6.1 (at) 6.1 (au) 6.1 (av) 6.1 (aw) 6.1 (ax) 6.1 (ay) 6.1 (az) 6.1 (ba) 6.1 (bb) 6.1 (bc) 6.1 (bd) 6.1 (be) 6.1 (bf) 6.1 (bg) 6.1 (bh) 6.1 (bi) 6.1 (bj) 6.1 (bk) 6.1 (bl) 6.1 (bm) 6.1 (bn) 6.1 (bo) 6.1 (bp) 6.1 (bq) 6.1 (br) 6.1 (bs) 6.1 (bt) 6.1 (bu) 6.1 (bv) 6.1 (bw) 6.1 (bx) 6.1 (by) 6.1 (bz) 6.1 (ca) 6.1 (cb) 6.1 (cc) 6.1 (cd) 6.1 (ce) 6.1 (cf) 6.1 (cg) 6.1 (ch) 6.1 (ci) 6.1 (cj) 6.1 (ck) 6.1 (cl) 6.1 (cm) 6.1 (cn) 6.1 (co) 6.1 (cp) 6.1 (cq) 6.1 (cr) 6.1 (cs) 6.1 (ct) 6.1 (cu) 6.1 (cv) 6.1 (cw) 6.1 (cx) 6.1 (cy) 6.1 (cz) 6.1 (da) 6.1 (db) 6.1 (dc) 6.1 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licensed in the provisional – specialty class, subject to receipt of a letter of
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REPORT TO BOARD

Physician Practice Enhancement Panel (Open)

March 14, 2024

Attendance

Chair

- x Dr. J. Kingsley

Members present

- x Mr. T. Mann (Vice-chair)
- x Dr. K. Eva (PhD) (public representative)
- x Dr. I. Fadyeyeva
- x Dr. D. Holowenko
- x Dr. C.D. Icton
- x Dr. D. McLachlan
- x Dr. H. Postowski (DPM)
- x Dr. S. Tsuchiya
- x Ms. A. Wainwright (RN) (public representative)

Staff present

- x Dr. M. Murray, Deputy Registrar
- x Ms. N. Castro, director, PPEP
- x

REPORT TO BOARD

Patient Relations, Professional Standards and Ethics Committee

March 19, 2024

Attendance

Chair

- x Ms. Shirley Ross

Members present

- x Ms. Shirley Ross
- x Ms. Lori Charvat
- x Dr. Ronald Abrahams
- x Dr. Shannon McDonald
- x Ms. Michelle Casavant
- x Dr. Brenda Wagner

Others present

- x Dr. Patrick D. Rowe (Registrar and CEO)
- x Mr. Graeme Keirstead (Deputy Registrar, Chief Legal Counsel, Legal)
- x Ms. Susan Prins (Director, Communications and Public Affairs)
- x Ms. Hope Moir (Policy Analyst, Communications and Public Affairs)
- x Ms. Bria Luis (Policy Coordinator, Communications and Public Affairs)

Overview /summary

The PRPSE Committee met on March 19, 2024. First, College staff reviewed the preliminary results from the registrant focus groups pertaining to the Indigenous Cultural Safety, Cultural Humility and Anti-racism practice standard evaluation. Two virtual focus groups were held: one with Indigenous registrants, facilitated by an Indigenous physician with an Elder present, and one with non-Indigenous registrants, facilitated by an external consultant. Both focus

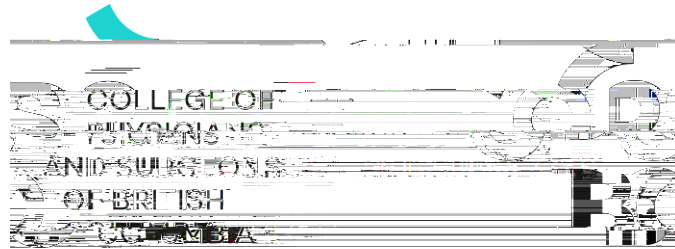
groups indicated that more registrant education and training is needed. Next steps involve conducting a detailed analysis of the findings from the entire evaluation and putting forth recommendations.

Next, College staff updated the Committee on the Access to Medical Care Without Discrimination practice standard evaluation. College staff conducted eight interviews with various community groups to discuss barriers to accessing health care for the populations these groups serve. The next steps involve revising the practice standard and continuing to engage with the community groups to develop an equity toolkit.

The Committee received an update on changing the Referral-Consultation Process professional guideline into a practice standard to include more 'must' language. After some discussion, the Committee agreed to incorporate the new language and proceed with the shift to a practice standard. It was noted that consultation with the profession would be put on hold due to the current political environment.

College staff provided a brief update on the Medical Assistance in Dying practice standard. The updated practice standard incorporated minor revisions to ensure the standard remains current.

Next, the Committee was informed that the Ethical Principles for Artificial Intelligence in Medicine interim guidance document was provided to the Board at its February meeting with one amendment. Following a thoughtful discussion, the Committee endorsed the recommended amendment from the Board.



Registration & Licensing

Tina Cheng, manager, independent practice team

Jessica Ostrowski, registration manager

Jonathan Norton, manager, compliance and assessments

Corinne de Bruin, executive director, registration

May 30, 2024

Legislative Authority

‡ Health Professions Act (HPA) :

‡ Section 16 (2)(i.1) - Duty and objects of a college

‡ College needs to establish and employ registration procedures that are **transparent, objective, impartial and fair**

‡ Section 19 - Bylaws for college

‡ Establish conditions or requirements for the registration of a person as a member of the college, including **academic standards, competencies, and good character evidence**

‡ Grants the registration committee the discretion to determine **VS A i N I m a _ m** **knowledge, skills and abilities are substantially equivalent** to standards of academic or technical achievement and grant registration on that basis

‡ Undergoing transition to **Health Professions and Occupations Act (HPOA)**

Health Professions Review Board

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registration decisions

‡

Registration and Licensure

- ‡ Three broad classes of registration and licensure

 - ‡ Full,

 - ‡ Provisional, and

 - ‡ Others (often have limits and conditions attached)

- ‡ All registration decisions other than approval of full registration are subject to review by the registration committee

 - ‡ Some decisions are delegated via policy

- ‡ Registration committee decisions are subject to review by the Health Professions Review Board (HPRB)

Registration and Licensure - Classes

‡ Full (family, specialty, podiatric surgeon)

‡ Provisional (family, specialty)

‡ Restricted (family, specialty)

‡ USA certified (internal medicine, emergency medicine, pediatrics)

‡ Osteopathic

‡ Surgical assistant

‡ Associate physician (acute care, community primary care)

‡ Visitor

‡ Emergency (family, specialty)

‡ Assessment

‡ Academic

‡ Administrative

‡ Educational classes

Registration and Licensure - Applications

‡ Summary of section 2 -2 of the College Bylaws

‡ An applicant must complete and deliver an application for registration form established by the registrar

‡ An applicant must:

‡ provide evidence of ID, experience, . ‡

Registration and Licensure - Applications

‡ Summary of section 2 - , a S p U N a]] N T N y] A w m J a _ p ^ L ' ,

‡ provide documentary proof that the applicant meets all the requirements of the class of registration applied for

‡

Registration and Licensure - Canadian Free Trade Agreement

‡ Supporting mobility across provinces and territories for certified occupations

‡ Restricted and provisional classes of registration may be mobile, most are not

‡ Statistics since June 1, 2009 (to May 13, 2024)

‡ Total currently actively registered under CFTA 273

Registration and Licensure - Educational classes

‡ Medical student

‡ Includes UBC medical students, visiting electives through UBC and independent

‡ Postgraduate resident

‡ Clinical associate subcategory

‡ Postgraduate resident elective

‡ Postgraduate fellow

‡ Postgraduate trainee

‡ Clinical observer

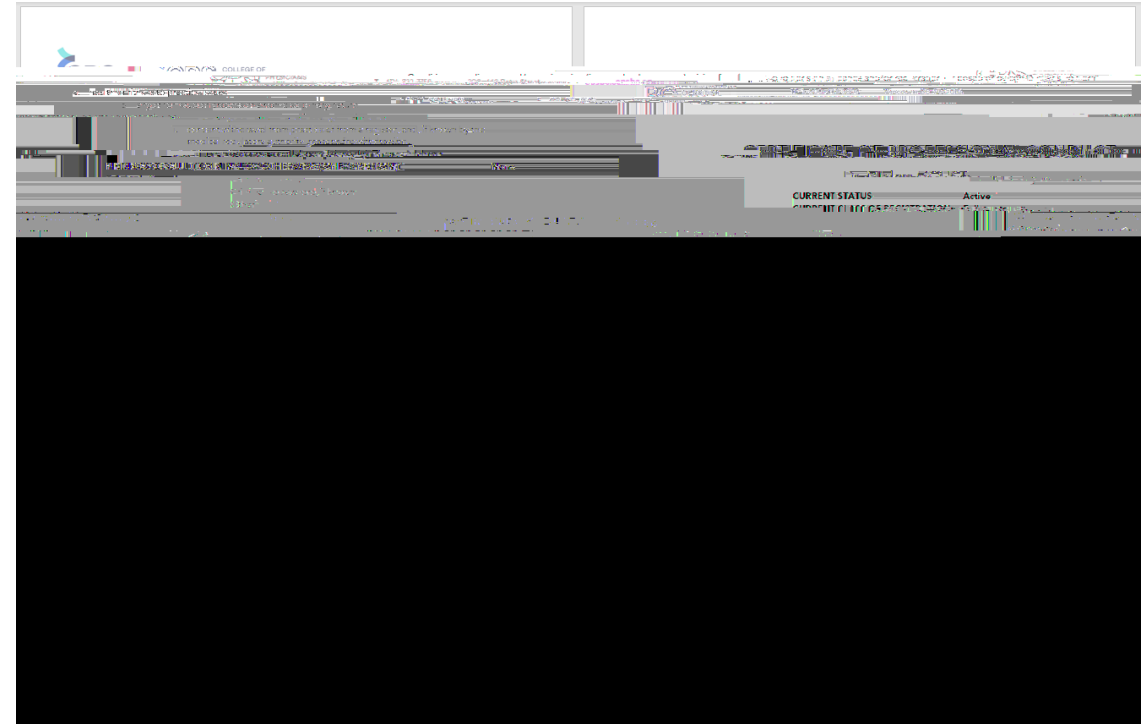
Registration and Licensure - Educational classes

- ‡ Data correction and collection
- ‡ Medical practice closures
- ‡ Physician resignation/retirement
- ‡ Retraining

Certificates of Professional Conduct

‡ - | a S N m m V a _ A] L a J q ^ N _ p w U V J U J a _ S V I ^ m A I N T V m p I A _ p
history, credentials and standing with the College.

Year	Number of certificate requests		
	BC health authority requests	Other requests	Total
2021	2,135	1,920	4,055
2022	2,259	2,219	4,478
2023	1,975	2,054	4,029



Annual Licence Renewal

‡Support and follow -up

‡Verification of:

‡Continuing Professional Development/Continuing Medical Education

‡Scope of practice/currency in practice

‡Licence limits

‡Required CPCs from other jurisdictions

Accreditation Assessments

‡ In order to employ a registrant in the Associate Physician class a program must receive program accreditation from the College

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Key Highlights*

‡ Total registrants (independent practice): 15, 259

‡ GPs 50.21%; specialists 49.30%; podiatrists 0.47%; osteopaths 0.02%

‡ 4,828 IMGs 31.6% of all active practising physicians

‡ Total educational registrants:

‡ Medical students 1,555

‡ Postgraduate residents 1,808

‡ Postgraduate trainees 5

Key Highlights*

‡End of February 2024 compared to February 2023

‡Net increase of 186 registrants in the family class (186% increase over the last year)

‡Net decrease of 149 registrants in the specialty class (32% decrease over the last year)

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