

Rules for Member Participation

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Rules for the College Programs are required under the *Health Professions Act Regulations for Physicians, Surgeons and Osteopaths Profession*. Rules address various parameters for a program including requirements for member participation.

The College is obligated under the *Health Professions Act (HPA)* to establish and operate a continuing competence program. The three broad components of the competence program are outlined in section 21 of the *Physicians, Surgeons and Osteopaths Profession Regulation (Regulations)* under the HPA. The Competence Committee is responsible for the operation of the College's competence program. The competence program is intended to identify regulated members whose competence may require further assessment, practice changes and/or improvement through further education. Section 24 of the Regulations sets out a broad range of tools available to the Competence Committee to assess competence, and include practice visits, interviews, examinations of skill, knowledge and physical and mental health. Further assessments are conducted when members are referred from the general assessment program or when the Competence Committee or its delegate has reasonable grounds to believe that a physician's practice is:

- exposing patients to an unacceptable risk of harm, or
- not meeting the expected standard of care.

Pursuant to section 52 of the HPA, information from a regulated member's participation in the College's competence program is kept confidential by the Competence Committee. In limited circumstances, as set out in section 51.1 of the HPA, information about the regulated member can be given to the Complaints Director of the College if the Competence Committee believes there is a lack of competence that cannot be remedied, incapacity or unprofessional conduct. A failure or refusal to comply with the competence program requirements is considered unprofessional conduct under the HPA.

Council can establish rules under Section 25 of the Regulations as to how assessments are to be conducted. The rules for a regulated member undergoing an assessment under section 24 of the Regulations are:

- (1) A regulated member who is directed by the Competence Committee or its delegate to participate in an assessment under section 24 of the Regulations shall cooperate with the requirements for the assessment within a reasonable timeframe provided by the Competence Committee or its delegate.

Terms Used:

- *Regulated member* means any person who is registered or who is required to be registered as a member of this College. The College regulates physicians, surgeons, osteopaths and physician assistants.
- *Must* refers to a mandatory requirement.
- *May* means that the physician may exercise reasonable discretion.
- *Patient* includes, where applicable, the patient's legal guardian or substitute decision maker.

- (2) Without limitation to the duties of a regulated member set out in the HPA, the co-operation required of a regulated member directed to participate in an assessment under section 24 of the Regulations will include:
- (a) permitting the Competence Committee or its delegate to enter and inspect the premises where the regulated member engages in the practice of medicine, subject to the limitation set out in section 51(4) of the Act regarding private dwellings and publicly funded facilities,
 - (b) permitting the Competence Committee or its delegate to inspect the regulated member's records of the care of patients,
 - (c) providing to the Competence Committee or its delegate the information requested in respect of the practice of medicine conducted by the regulated member,
 - (d) providing the information in subsection (c) in the form requested by the Competence Committee or its delegate,
 - (e) answering questions posed by the Competence Committee or its delegate on matters pertaining to medical competence and performance,
 - (f) conferring on the contents of a draft report of the assessment,
 - (g) meeting with the Competence Committee or its delegate and discussing final recommendations for practice changes or improvements, and
 - (h) demonstrating the adoption of recommendations, practice changes and/ or improvements to the satisfaction of the Competence Committee or its delegate.
- (3) A regulated member who is directed by the Competence Committee or its delegate to participate in an interview for follow-up of an assessment shall make him or herself available within 30 days for the interview unless an extension is granted.
- (4) A regulated member who is directed by the Competence Committee or its delegate to undertake a more detailed assessment of clinical knowledge and skills shall cooperate with the requirements for that assessment within a reasonable specified timeframe.
- (5) The co-operation required of a regulated member in regard to a more detailed assessment may include, but not limited to, travel and attendance at a competence assessment program acceptable to the Competence Committee or its delegate and payment of the associated costs.
- (6) Assessments of professional competence under subsection (5) may include medical knowledge and skills, communication skills, and fitness for practice.

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- (7) In the event of an unsatisfactory assessment, the Competence Committee or its delegate may direct a regulated member to undertake one or more remedial actions in accordance with section 27 of the Regulations which may include participation in the College's practice visit program for a more detailed assessment.
- (8) A regulated member who is directed to restrict, modify, or improve their practice shall comply with that direction to the extent that, at a minimum, the Competence Committee or its delegate is satisfied that the regulated member's practice does not constitute an unreasonable risk of harm to patients.
- (9) The Competence Committee or its delegate shall refer a matter to the Complaints Director if the Competence Committee or its delegate has reasonable grounds arising from participation in the Competence program to believe that a regulated member:
 - (a) may be guilty of criminal conduct or unprofessional conduct, whether in a professional capacity or otherwise,
 - (b) may be incapacitated,
 - (c) displays a lack of skill or judgment in carrying out the professional practice that has not been remedied by participation in the Continuing Competence Program, or
 - (d) has refused or failed to comply with a direction of the Competence Committee or delegate or these rules.
- (10) The Competence Committee's delegate will report to the Competence Committee on request and at least yearly all activity which has been delegated by the Competence Committee to the delegate including referrals to the Complaints Director and actions taken with members.

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