

# HEALTH PROFESSIONS REVIEW BOARD

2017 Annual Report

Covering the reporting period from January 1 – December 31, 2017



## **Health Professions Review Board**

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July 31, 2018

The Honourable David Eby Minister of Attorney General Room 232, Parliament Buildings Victoria, British Columbia V8V 1X4

Dear Minister Eby:

#### Re: Health Professions Review Board Annual Report

On behalf of the Health Professions Review Board, it is my pleasure to respectfully submit the Annual Report of the Health Professions Review Board for the period January 1, 2017 to December 31, 2017.

This report is submitted as required by Section 50.65(1) of the Health Professions Act.

We remain committed to fulfilling the important mandate entrusted to the Review Board to ensure the highest levels of accountability and transparency in BC's health professions.

Yours truly,

David Hobbs, Chair

Health Professions Review Board

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**Enclosure** 

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### **Message from the Chair**

In 2017, its ninth year of operation, the Review Board remained committed to its vision:

To promote transparent, objective, impartial and fair administrative processes and decision-making by the regulated health professions in British Columbia that protects the public interest and engenders public confidence in the provincial health care system.

Announced at the end of 2017 was a significant change for the Review Board: The retirement of Tom English Q.C., Chair of the Health Professions Review Board since it was first established in 2009, and Michael Skinner, Executive Director of the Review Board Office since 2010.

As the new Chair, working with Executive Director Evon Soong, I assume leadership of a stable, mature organization and a team of superlatively qualified members whose rich and varied experience is evident in the high quality of Review Board decisions. I go back to first principles: Ultimately, the Review Board contributes to better health care in British Columbia. How do we achieve this? By issuing decisions that are thoughtful, fair and well-reasoned. Our position, at arm's length from government and from health regulatory bodies, gives us a unique perspective. It allows us to identify inconsistencies in a college's approach from, for example, one registration decision to another. We use this perspective to assist health regulators in their work to serve and protect the public.

It is not simply our position vis a vis the colleges that informs our work. In Decision No. 2017-HPA-021-022 the Review Board stated:

I am mandated to determine whether the disposition that the Inquiry Committee arrived at was reasonable in the circumstances. Of course, in assessing reasonableness, the Review Board is not in the same position as a generalist court which often has no "field sensitivity to the imperatives and nuances of the legislative scheme." 1 The Review Board is itself a specialized and expert tribunal, whose very purpose is to review health college dispositions, and exercises reasonableness review in light of that specialization and expertise...

As a specialized and expert tribunal, the Review Board's job is not always to criticize colleges or registrants but also, where warranted, to commend them when they get it right. We note that the number of applications for review of the decisions of the College of Physicians and Surgeons, one of the province's largest health regulators, has dropped year over year for the past 2 years. This is likely an indication that the College has been better able to satisfy complainants and applicants in their inquiry and registration processes.

Numbers cannot, of course, tell the whole story. On the other side of the equation, the Review Board has one complainant responsible for over 20 applications for review with the *Health Professions Act* (the "Act") providing limited authority to manage this. As a creature of statute that derives its authority solely from the Act, the Review Board is uniquely qualified to identify areas for possible legislative reform, such as the need for provisions to address such situations.

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<sup>&</sup>lt;sup>1</sup> Edmonton (City) v. Edmonton East (Capilano) Shopping Centres Ltd. 2016 SCC 47 at para. [33].

Another is the issue of the registrar's jurisdiction when a complaint is disposed of under ss. 32(3)(c) – as containing allegations that, if admitted or proven, would constitute a matter, other than a serious matter, subject to investigation by the inquiry committee under section 33(4). The legislature has set out a test which makes the registrar's jurisdiction turn on whether, if the allegations in the complaint were admitted or proven at a discipline hearing, the remedy would "ordinarily" be a reprimand or a fine (in which case the registrar has jurisdiction), as opposed to practice conditions, a suspension or cancellation of registration (in which case only the inquiry committee has jurisdiction). As this is a test in which anticipated disciplinary remedies are supposed to be ascertained by the registrar at the very beginning of a screening function, it is very difficult for the Review Board to access an objective standard by which to apply it. This is an area that cries out for legislative reform.

#### Reasons

In March 2018, on judicial review, the BC Supreme Court confirmed a decision of the Review Board, saying:

Here, HPRB Decision upholding the reasonableness of the Inquiry Committee's decision indicates how it arrived at its conclusions, and the HPRB expressed its reasoning in an intelligible way which allows a reader to understand the foundation for the conclusions therein.<sup>2</sup>

The importance of adequate reasons, in Review Board as well as college registration decisions and inquiry committee dispositions, cannot be overstated. In this regard, the Review Board encourages colleges to avoid conclusory statements and strive to provide thorough analysis and justification to help complainants and applicants understand the foundation for their conclusions. Well justified decisions, and minutes that properly document these decisions, are a key element of the proper administration of justice.

#### Two-stage review process

The Review Board process must be procedurally fair. Reviews of Inquiry Committee decisions, for example, involve three parties: the complainant, the college, and the registrant. As the principles of procedural fairness require that all three parties be afforded the opportunity to respond to each other's points, procedure can become cumbersome.

2017 is the third year since the Review Board began using a two-stage process to help simplify and streamline reviews. At Stage 1, the member assesses whether the application can be fairly reviewed on the merits without the need for submissions from the college and registrant. The member then either confirms the disposition of the inquiry committee (there will be no need for a Stage 2 hearing), or moves the application to Stage 2. The Review Board then requests submissions from the college and registrant to reply to the Complainant's concerns, often providing specific questions in order to probe the college in a measured and analytical way. The Review Board gives the complainant an opportunity to respond to their submissions, and conducts its review based on the expanded materials. In 2017, 70% of complaint disposition reviews and 50% of registration reviews were concluded at Stage 1. This represents a significant saving in time and effort for complainants, colleges, and registrants as well as the Review Board itself.

<sup>&</sup>lt;sup>2</sup> Sanders v. College of Physicians and Surgeons of British Columbia, 2018 BCSC 441

The College of Physicians and Surgeons comments:

Procedural changes such as the development of a two-stage hearing process demonstrate the HPRB's commitment to making the review process efficient and accessible and the College is ever mindful of the same values. Over the years the number of reviews of College dispositions changes, but what we have observed as always increasing is the precision of legal analysis and procedural fairness of the HPRB which are not only appreciated by applicants but also by this College as we incorporate recommendations and directions flowing from HPRB decisions.

#### The Future of Health Regulation

Health regulation in British Columbia is seeing a move toward consolidation of related professions under a single regulatory umbrella. The new BC College of Nursing Professionals will officially launch on September 4, 2018 and will regulate all nurses in BC: Licensed Practical Nurses, Nurse Practitioners, Registered Nurses and Registered Psychiatric Nurses. While this is a significant shift for the nursing professions, the role of the Review Board vis a vis this new college will be the same as it is for all other colleges established under the Act. Complainants will still be able to apply for review of the decisions of the new college as they do now for the four colleges it will subsume. The Review Board will monitor with interest the new college's inquiry and registration processes.

#### Thank you

In closing, I would like to recognize the Review Board members, our peerless legal counsel Frank Falzon, Q.C., the staff of the Environmental Appeal Board which provides financial and administrative support, and the hardworking team at the Victoria office for their work on behalf of the Review Board.

David Hobbs, Chair

Health Professions Review Board

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#### **About the Review Board**

On March 16, 2009, the Health Professions Review Board (the "Review Board") opened its doors and began receiving applications for review, making British Columbia the second province, after Ontario, to establish an independent health professions review body.

The Review Board is an independent quasi-judicial administrative tribunal created by the *Health Professions Act*, R.S.B.C. 1996, c. 183, as amended, (the "Act") that provides oversight of the regulated health professions of British Columbia. As such, the Review Board is an innovative and integral component of the complex health professions regulatory system in British Columbia. It is a highly specialized administrative tribunal, with a specific mandate and purpose, designed to address a few carefully defined subjects outlined in the Act. The Review Board's decisions are not subject to appeal and can only be challenged in court (on limited grounds) by judicial review.

The Review Board is responsible for conducting complaint and registration reviews of certain decisions of the colleges of the 22 self-regulating health professions in British Columbia. The 22 health professions designated under the Act and whose decisions are subject to review by the Review Board are listed below:

- Chiropractors
- Dental Hygienists
- Dental Surgeons
- Dental Technicians
- Denturists
- Dietitians
- Massage Therapists
- Midwives
- Naturopathic Physicians
- Nurses (Licensed Practical)
- Nurses (Registered)
- Nurses (Registered Psychiatric)
- Occupational Therapists
- Opticians
- Optometrists
- Pharmacists
- Physical Therapists
- Physicians and Surgeons
- Podiatrists
- Psychologists
- Speech and Hearing Professionals
- Traditional Chinese Medicine Practitioners and Acupuncturists

#### The Mandate of the Review Board

Through its reviews, early resolution processes and hearings, the Review Board monitors the activities of the colleges' complaint inquiry committees and registration committees, in order to ensure they fulfill their duties in the public interest and as mandated by legislation. The Review Board provides a neutral forum for members of the public as well as for health professionals to resolve issues or seek review of the colleges' decisions.

The Review Board's mandate is found in s.50.53 of the Act. Under this section the Review Board has the following two types of specific powers and duties:

#### 1. On request to:

- review certain registration decisions of the designated health professions colleges;
- review the timeliness of college inquiry committee complaint dispositions or investigations; and
- review certain dispositions by the inquiry committee of complaints made by a member of the public against a health professional.

The Review Board has potentially broad remedial powers after conducting a review in an individual case. In the case of registration and complaint decisions it can either:

- confirm the decision under review;
- send the matter back to the registration or inquiry committee for reconsideration with directions; or
- direct the relevant committee of the college to make another decision it could have made.

In cases where a review has been requested of the college's failure to complete an investigation within the time limits provided in the Act, the Review Board can either send the matter back to the inquiry committee of the college, with directions and a new deadline, to complete the investigation and dispose of the complaint, or the Review Board can take over the investigation itself, exercise all the inquiry committee's powers, and dispose of the matter.

#### 2. On its own initiative the Review Board may:

 develop and publish guidelines and recommendations to assist colleges to develop registration, inquiry and discipline procedures that are transparent, objective, impartial and fair.

This particular power of the Review Board allows for preventive action to be taken, recognizing that while the review function of deciding individual requests for review is important, it may not have the same positive systemic impact as a more proactive authority to assist colleges, in a non-binding process, to develop procedures for registration, inquiries and discipline that are, in the words of the Act, transparent, objective, impartial, and fair.

Further information about the Review Board's powers and responsibilities is available from the Review Board office or the website: <a href="http://www.hprb.gov.bc.ca">http://www.hprb.gov.bc.ca</a>

#### **Review Board Members**

Unlike the colleges, the Review Board is a tribunal consisting exclusively of members appointed by the Lieutenant Governor in Council. This is required by the Act to ensure that the Review Board can perform its adjudicative functions independently, at arm's-length from the colleges and government. This is reinforced by Section 50.51(3) of the Act which states that Review Board members may not be registrants in any of the designated colleges or government employees.

The Review Board consists of a part-time Chair and a number of part-time members. The Act does not specify a minimum or maximum number of members required. The members of the Review Board, drawn from across the Province, are highly qualified citizens from various occupational fields who share a history of community service. These members apply their respective expertise and adjudication skills to hear and decide requests for review in a fair, impartial and efficient manner. In addition to adjudicating matters that proceed to a hearing, members also conduct mediations and participate on committees to develop policy, guidelines and recommendations.

During the present reporting period the Review Board consisted of the following members:

#### Tribunal Members as of December 31, 2017

Tribunal Members as of December 31, 2017			
Member	Profession	From	
J. Thomas English, Q.C. (Chair)	Lawyer	Vancouver	
Michael J.B. Alexandor	Business Exec./Mediator (Ret.)	Vancouver	
Kent Ashby	Lawyer	Victoria	
Karima Bawa	Business Executive	Vancouver	
Lorianna Bennett	Lawyer/Mediator	Kamloops	
Shannon Bentley	Lawyer/Advocate	Bowen Island	
Fazal Bhimji	Mediator	Delta	
Lorne Borgal	Business Executive	Vancouver	
D. Marilyn Clark	Consultant/Business Executive	Sorrento	
Douglas S. Cochran	Lawyer (Ret)	Vancouver	
William Cottick	Lawyer	Victoria	
Brenda Edwards	Lawyer	Victoria	
Leigh Harrison	Lawyer (Ret)	Rossland	
David A. Hobbs	Lawyer	North Vancouver	
Roy Kahle	Lawyer (Ret)	Kamloops	
Robert J. Kucheran	Lawyer	Vancouver	
Victoria (Vicki) Kuhl	Consultant/Mediator/Nursing	Victoria	
Sandra K. McCallum	Lawyer (Ret)	Victoria	
Robert McDowell	Project Director	Vancouver	
John O'Fee, Q.C.	Lawyer/CEO	Kamloops	
John M. Orr, Q.C.	Lawyer	Victoria	
Herbert S. Silber, Q.C.	Lawyer	Vancouver	
Donald A. Silversides, Q.C.	Lawyer	Prince Rupert	
Kent Woodruff	Lawyer/Mediator	Kamloops	
Deborah Zutter	Mediator	West Vancouver	

### **The Review Board Office**

The administrative support functions of the Review Board are consolidated with the Environmental Appeal Board/Forest Appeals Commission (EAB/FAC) offices, which also provide administrative services to a number of other tribunals.

The Review Board staff complement currently consists of the following positions:

- Executive Director
- 3 Case Managers
- 1 Intake and Administration Officer
- 1 Administrative Assistant
- Finance, Administration and Website Support (provided by EAB/FAC)

The Review Board may be contacted at:

Health Professions Review Board Suite 900 - 747 Fort Street Victoria, BC V8W 3E9

Telephone: 250-953-4956

Toll-free number: 1-888-953-4986

Facsimile: 250-953-3195

Website Address: www.hprb.gov.bc.ca

#### **Mailing Address:**

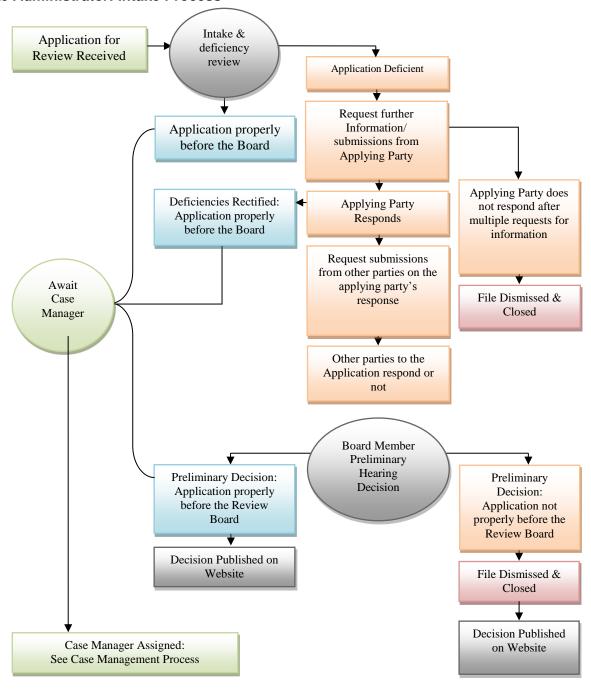
Health Professions Review Board PO Box 9429 STN PROV GOVT Victoria, BC V8W 9V1

### **The Review Process and Activity**

The following is a visual overview of the review process. For more detailed information, a copy of the Review Board's *Rules of Practice and Procedure* and other information can be accessed at the Review Board website or obtained from the Review Board Office.

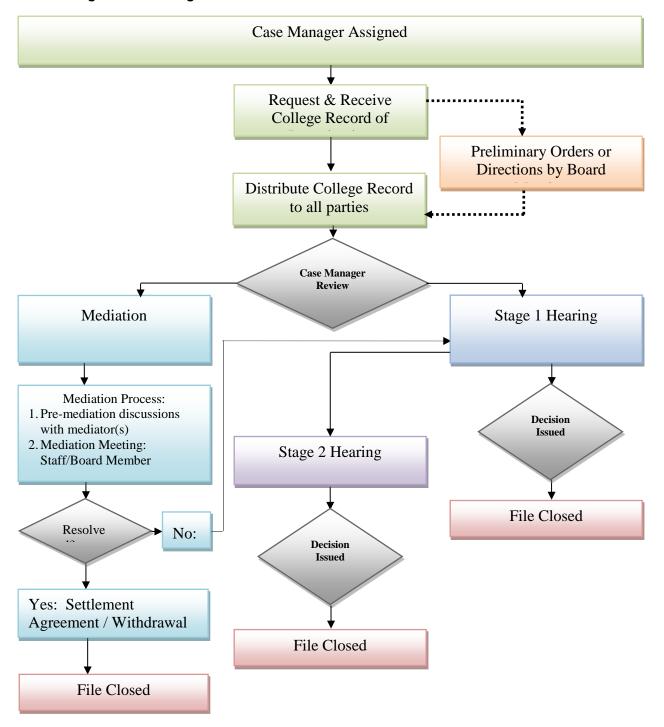
Few applicants who submit applications for review to the HPRB have had any exposure to administrative law or process. For that reason intake staff assist applicants to go through the steps necessary to "perfect" an application so that it meets the requirements of the *Health Professions Act* and the Rules of the Review Board. The chart below illustrates how Review Board staff do that.

#### **Intake Administrator: Intake Process**



The Chart below illustrates the steps in the process for managing a case from assignment of a case manager through to resolution, either by way of a mediated settlement or a decision of a Review Board member following a hearing.

#### **Case Manager: Case Management Process**



### **Mediation Activity**

As with so many aspects of health care, technology is impacting mediations. Mediation courses are now offered in mediation, and mediations can take place virtually using video-conferencing platforms. Mediations are an important aspect of the Review Board's work, and are pursued by the Review Board whenever there is the possibility of a satisfactory outcome for all parties.

In past years we have presented extremely brief snapshots of mediated outcomes to provide what we referred to as "a flavour of what has been achieved in the resolution of health practices disputes." This is because of the clear requirement that such resolutions be absolutely confidential – no information can be included that would enable identification of the parties.

Nonetheless, within that requirement for absolute confidentiality we can provide glimpses into both processes and outcomes for 2017:

- A Complainant filed an application for review in which she alleged that the Inquiry
  Committee of the College had made errors in their disposition letter concerning their
  reference to certain facts. The Inquiry Committee had concluded the complaint without
  regulatory criticism of the Registrant. After a Review Board initiated mediation the
  parties reached a settlement agreement which resulted in an amended Inquiry Committee
  disposition letter where some of the disputed facts were corrected while still maintaining
  the original conclusion of no regulatory criticism towards the Registrant.
- An Applicant filed an application for review of a decision of a Registration Committee of the College in which she was denied registration. The Review Board facilitated a mediation between the College and the Applicant which resulted in a settlement agreement where it was agreed that the Applicant would be provided with a further opportunity to present additional information and the matter would be reconsidered by the Registration Committee and a new decision issued.

## 2017 College Requests to Reconsider

At various stages of the Review Board process, on a number of files, the Review Board has received requests from colleges to refer a matter back to their Inquiry Committees or Registration Committees so that the Committee can further investigate, consider new information not previously considered, and then render a new decision. The Review Board has granted these requests, noting that there is no benefit to the parties nor is it in the public interest for the Review Board to require the parties to proceed with a hearing on a matter pending a possible college reconsideration. This process does not prejudice to the complainant or applicant, as they are free to apply for a review of the new college decision in due course. This constructive feedback loop is an example of one of the benefits of Review Board review.

### **The Adjudication Process**

As the Review Board's Rules indicate, mediation may not be appropriate for every case. Mediation may be inappropriate where, for example, an application identifies a broad systemic problem, where a dispute raises an issue of law, policy or interpretation that needs to be determined on the record, where an applicant is proceeding with a vexatious application, or where there are allegations of abuse of power. Each of these situations can raise special concerns that require adjudication and determination within the Review Board's formal decision-making process.

In other cases, even though the parties have entered into mediation in a sincere effort to resolve the issues on the application for review, the application may remain unresolved and must therefore be decided by the Review Board's adjudication (hearing) process.

The Review Board process, which finds its authority in Part 4.2 of the *Health Professions Act* (the "Act" or "HPA") and in the provisions of the *Administrative Tribunals Act* ("ATA"), is codified in the Review Board's *Rules of Practice and Procedure*. These Rules provide for the efficient adjudication of questions arising at the beginning of a Review Board proceeding, such as:

- Does the Review Board have jurisdiction (legal authority) to hear this particular complaint?
- Is this complaint clearly without merit? (i.e., is it frivolous, vexatious, or trivial)
- Was the complaint not filed in time, and should an extension of time for filing be granted?
- Should certain confidential or sensitive third party information in a health college record of investigation be withheld from an applicant?

A formal review before the Review Board is conducted as a "review on the record", subject to any additional information or evidence that was not part of the record that the Review Board accepts as reasonably required for a full and fair disclosure of all matters related to the issues under review. Hearings at the Review Board are primarily conducted in writing using the previously mentioned 2 Stage process. They can however also be conducted in person (an oral hearing) or by using an electronic format such as video or teleconferencing or by any combination of these formats. Reviews conducted by way of an oral hearing are generally open to the public, unless the Review Board orders otherwise.

If a written hearing is held, the Review Board will provide directions regarding the process and timeframe for the parties to provide their evidence, arguments and submissions to the Review Board in writing. An oral hearing gives the parties an opportunity to present their information, evidence and submissions to the Review Board in person.

The chair of the Review Board will designate one or more members of the Review Board to sit as a Panel for each individual hearing. A member of the Review Board who conducts a mediation will not be designated to conduct a hearing of the matter unless all parties consent. Further, in order to ensure that there is no conflict of interest or reasonable apprehension of bias, a board member who has previously been a registrant of a college or served on a college's board of directors will usually not sit on a panel designated to conduct a hearing in any case involving that particular college, unless all parties consent.

After a written or oral review hearing, the Review Board will issue a written decision and will deliver a copy to each party and post it to the website.

### **Key Decisions**

A selection of significant decisions issued in 2017 is summarized below.

Registration reviews typically examine whether the Registration Committee's decision was reasonable and in compliance with the Act. In contrast, Inquiry Committee dispositions are examined on the basis of two statutory review criteria:

- 1. Was the investigation adequate?
- 2. Was the disposition (reasoning, conclusion and outcome) reasonable?

#### 1. PRELIMINARY AND INTERIM DECISIONS

#### **Application for Extension of Time**

# Decision No. 2017-HPA-086(a) re: The College of Physicians and Surgeons of British Columbia

Section 42 Administrative Tribunals Act application by College to withhold certain information from disclosure to Complainant. Complainant alleged the Registrant fraudulently billed the Medical Services Plan ("MSP"). The Complainant is a non-practicing urologist and in support of his allegations he provided a description of improper billing and quality of care concerns relating to four patients that he had co-cared for with the Registrant when they practiced together. Two distinctly separate issues arise from the s. 42 Application. The first deals with the redaction of personal medical information of the patients named by the Complainant, while the second deals with the redaction of the Registrant's response to the allegations of improper or fraudulent MSP billings. The Review Board Panel Chair concluded that the adverse consequences to the administration of justice in disclosing the records in question far outweigh the interests of the Complainant in the disclosure of the medical records. The Panel Chair ordered that those patient documents contained in the Record not be disclosed to the Complainant. However, the Review Board did not accede to the College's request for non-disclosure of such records that did not relate to any personal or confidential medical records of the patients.

December 7, 2017 (Posted December 22, 2017)

#### Application for a stay of a Registration Committee decision (granted)

#### 2017-HPA-107(a) re: The College of Physicians and Surgeons of British Columbia

Applicant's preliminary application for a stay of a Registration Committee (RC) decision – granted. The College provided notification to the Applicant of the RC's decision that his registration and licensure would be cancelled effective August 23, 2017. The Applicant applied to the Review Board for a stay of the RC's decision pending the determination of the merits of the Application for Review. The Applicant is a UK trained psychiatrist who practiced as a general adult psychiatrist in the UK and New Zealand. He commenced practice in BC in a significantly underserviced area of need where he is the only general adult psychiatrist seeing outpatients from three communities and the surrounding area. Section 50.62 of the Act provides that commencement of a review does not operate as a stay or suspend the decision under review

"unless the Review Board orders otherwise." The Review Board granted the stay of the RC's decision, and in arriving at this conclusion, the Panel set out the 3-part test to be met in stay applications: 1) there is a "serious issue" to be tried; 2) the Applicant would suffer irreparable harm if the stay was not granted; and 3) balance of convenience (which of the parties would suffer greater harm from granting or refusal of the stay).

August 21, 2017 (Posted September 11, 2017)

#### Application for a stay of a Registration Committee decision (denied)

#### 2017-HPA-046(a) re: The College of Physicians and Surgeons of British Columbia

Preliminary application for a stay of a registration committee decision - Denied. The Applicant was notified his registration and licensure under the General/Family class of registration wold be canceled effective May 22, 2017. The Applicant filed an application for review of the decision and included an application under s.50.62 of the Act for a stay of the decision pending a hearing on the substantive issues. The Review Board considered the stay application on an expedited basis. The Panel Chair considered the 3-part test to be met in stay applications: 1) is there a "serious issue" to be tried? 2) Will the Applicant suffer irreparable harm if the stay is not granted; and 3) balance of convenience - which of the parties would suffer greater harm from the granting or refusal of the stay. The Applicant met the first test however was not able to satisfy the Panel Chair that he would suffer irreparable harm. Although empathising with the Applicant's circumstances the Panel Chair was not satisfied that a refusal to grant the stay would so adversely affect the Applicant's interests that the harm could not be remedied if the eventual decision on the merits is different than the decision being reviewed. The evidence showed that the Applicant was previously granted provisional registration and licensure with conditions attached. He did not meet those conditions in the time permitted, or during the extended period of time as permitted by the Registration Committee. If the Applicant's registration and licensure are cancelled prior to the hearing of his Application for Review, he will be in the same position he is in today. The Panel Chair also found that the balance of convenience and the interests of justice favour denying the stay as the Applicant did not provide evidence that he or his patients will suffer irreparable harm if the stay is not granted.

May 5, 2017 (Posted May 19, 2017)

#### 2. Noteworthy 2017 final IC decision summaries

#### 2016-HPA-198(b) re: The College of Physicians and Surgeons of British Columbia

Stage 1 hearing of an application for review of a complaint Inquiry Committee (IC) disposition under s. 50.6 HPA – Disposition confirmed. Complainant alleged conflict of interest amounting to "financial abuse of a vulnerable adult" when Registrant, a long-time family physician to Complainant and her family, including her mother, entered into agreement to purchase Complainant's mother's home in name of his mother. In course of transaction, Registrant sought legal advice and chose to withdraw from transaction, stating he had become too close to family; after meeting with family members separately he transferred their care to other physicians. In investigating complaint, College Inquiry Committee (IC) took Registrant's withdrawal into account, and disposed of complaint by way of concluding interview with Registrar's Staff and undertaking from Registrant to attend College Professional Boundaries in Physician-Patient Relationship course. Investigation included a Geriatric Mental Health Assessment of Complainant's mother, for whom Registrant had made determination regarding the mother's capacity to manage finances,

which was a component of Complainant's allegation of conflict of interest. IC critical of Registrant's conduct, while accepting Registrant's acknowledgement of wrong-doing and his "...commitment to undertake remedial steps to manage his doctor-patient relationships in the future..." along with undertaking to attend course. Investigation found to be adequate, and disposition reasonable.

November 8, 2017 (Posted November 24, 2017)

#### 2017-HPA-064(a) re: The College of Registered Nurses of British Columbia

Stage 2 hearing of an application for review of a complaint Inquiry Committee (IC) disposition under s. 50.6 HPA – Disposition confirmed. Complainant, professor at a school of nursing, complained to college about Registrant's use of RN title in conjunction with a private service marketed by the Registrant known as Therapeutic Touch (TT). A Regulatory Practice Consultant with the College wrote the Complainant and advised him that the College considered therapeutic touch to be an accepted nursing intervention. Complainant was not satisfied with this response, as a result of which the Registrar investigated the complaint, and the Inquiry Committee (IC) accepted the Registrar's recommendation, which then became a deemed disposition by the IC pursuant to HPA s. 32(5). Review Board found investigation to be adequate and proportional to the seriousness of the complaint; key information was obtained to enable the IC to understand the nature of the complaint and the actions of the Registrant. Disposition found to be reasonable; College interpretation of the applicable practice standards was that therapeutic touch is an accepted and recognized nursing intervention, notwithstanding Complainant's views about complementary and alternative health care services and a nurse's ability to provide those services. It is not the role of the Inquiry Committee (or the Registrar) to enter in an academic debate as to the strengths or weaknesses of a particular nursing intervention. In confirming the IC's disposition, Review Board adjudicator noted the Complainant's submissions had been filed by him using his academic title on university letterhead, although the complaint was apparently based on his own personal view and there was no evidence that he was authorized to complain on behalf of the university.

November 8, 2017 (Posted November 24, 2017)

#### 2017-HPA-074(a) re: The College of Physicians and Surgeons of British Columbia

Stage 1 hearing of an application for review of a complaint Inquiry Committee (IC) disposition under s. 50.6 HPA – Disposition confirmed. The Complainant complained to the College about the Registrant physician's conduct and the decision to dismiss her as a patient at her practice. The Registrant referred the Complainant to the local mental health clinic where she was diagnosed by a psychiatrist as having delusional disorder, which was considered to be less responsive to treatment. The Complainant requested that the Registrant correct her "misdiagnosis," and remediate "human rights violations." After investigation the IC confirmed that based on the medical clinical reports and the Registrant's response to concerns, the care provided by the Registrant was "reasonable, appropriate, and in keeping with the expected standards." The Review Board found the investigation of the IC to be adequate. The Review Board supported the IC's conclusion of not being critical of the Registrant for dismissing the Complainant from her clinic. It was noted that a productive patient doctor relationship requires a foundation of trust and mutual respect which was lacking. The Review Board determined that the disposition was reasonable in that it fell within the range of possible, acceptable outcomes.

December 12, 2017 (Posted January 5, 2018)

#### 2016-HPA-198(b) re: The College of Physicians and Surgeons of British Columbia

Stage 1 hearing of an application for review of a complaint Inquiry Committee (IC) disposition under s. 50.6 HPA - Disposition confirmed. Complainant alleged conflict of interest amounting to "financial abuse of a vulnerable adult" when Registrant, a long-time family physician to Complainant and her family, including her mother, entered into agreement to purchase Complainant's mother's home in name of his mother. In course of transaction, Registrant sought legal advice and chose to withdraw from transaction, stating he had become too close to family; after meeting with family members separately he transferred their care to other physicians. In investigating complaint, College Inquiry Committee (IC) took Registrant's withdrawal into account, and disposed of complaint by way of concluding interview with Registrar's Staff and undertaking from Registrant to attend College Professional Boundaries in Physician-Patient Relationship course. Investigation included a Geriatric Mental Health Assessment of Complainant's mother, for whom Registrant had made determination regarding the mother's capacity to manage finances. which was a component of Complainant's allegation of conflict of interest. IC critical of Registrant's conduct, while accepting Registrant's acknowledgement of wrong-doing and his "...commitment to undertake remedial steps to manage his doctor-patient relationships in the future...", along with undertaking to attend course. Investigation found to be adequate, and disposition reasonable.

November 8, 2017 (Posted November 24, 2017)

#### 2017-HPA-064(a) re: The College of Registered Nurses of British Columbia

Stage 2 hearing of an application for review of a complaint Inquiry Committee (IC) disposition under s. 50.6 HPA – Disposition confirmed. Complainant, professor at a school of nursing, complained to college about Registrant's use of RN title in conjunction with a private service marketed by the Registrant known as Therapeutic Touch (TT). A Regulatory Practice Consultant with the College wrote the Complainant and advised him that the College considered therapeutic touch to be an accepted nursing intervention. Complainant was not satisfied with this response, as a result of which the Registrar investigated the complaint, and the Inquiry Committee (IC) accepted the Registrar's recommendation, which then became a deemed disposition by the IC pursuant to HPA s. 32(5). Review Board found investigation to be adequate and proportional to the seriousness of the complaint; key information was obtained to enable the IC to understand the nature of the complaint and the actions of the Registrant. Disposition found to be reasonable; College interpretation of the applicable practice standards was that therapeutic touch is an accepted and recognized nursing intervention, notwithstanding Complainant's views about complementary and alternative health care services and a nurse's ability to provide those services. It is not the role of the Inquiry Committee (or the Registrar) to enter in an academic debate as to the strengths or weaknesses of a particular nursing intervention. In confirming the IC's disposition, Review Board adjudicator noted the Complainant's submissions had been filed by him using his academic title on university letterhead, although the complaint was apparently based on his own personal view and there was no evidence that he was authorized to complain on behalf of the university.

November 8, 2017 (Posted November 24, 2017)

#### 2017-HPA-036(a) re: The College of Naturopathic Physicians of British Columbia

Stage 1 hearing of an application for review of a complaint Inquiry Committee (IC) disposition

under s. 50.6 HPA – Disposition confirmed. Stage 1 review of a complaint against Registrant for failing to recognize and treat complainant's wife's mental condition. IC found no evidence to support Complainant's allegations of professional misconduct against Registrant. Complainant and wife sought naturopathic methods of treating wife's several undiagnosed medical issues. Complainant believed that Registrant counseled Complainant's wife to leave Complainant, did not properly diagnose mental illness and advised wife to cease taking certain medications. Review Board held that investigation conducted by inspector appointed by IC was adequate, notwithstanding that Review Board is not at liberty to share patient records with Complainant without consent of patient (wife). Disposition found to be within range of acceptable and rational solutions; Review Board cannot step into shoes of IC. While Complainant struggles with potential loss of his spouse while lacking informed knowledge of treatment provided by Registrant, only patient (wife) can provide consent for access to such information.

October 2, 2017 (Posted October 20, 2017)

#### 2015-HPA-226(b) re: The College of Physicians and Surgeons of British Columbia

Stage 2 hearing of an application for review of an inquiry committee (IC) disposition under s.50.6 HPA – matter remitted back to IC with directions. Review application brought by son of deceased patient with complex medical care issues who died as result of drug interactions while under care of Registrant who was her family physician. In course of investigation (and reopening of investigation) of complaint, Inquiry Committee (IC) retained an expert who opined that although Registrant consulted an online medical database for determining appropriate dosage of a gout drug (due to concerns about deceased's chronic renal failure) he did not consult available reference materials that would have revealed the "well described risk" of interaction between the gout drug (commonly prescribed) and one of deceased's other medications (not commonly prescribed). Expert report set out minimum physician training and practice standards for prescribing drugs, including the consulting of appropriate references, and confirmed that while Registrant had consulted an appropriate reference, he had not made correct inquiries. IC issued two dispositions, the latter reflecting additional inquiries and acquisition of the expert report. IC took a remedial approach, criticizing Registrant for error in clinical judgment and acknowledging that Registrant had amended his practice (including taking coursework) to take steps to minimize prospects of repeat occurrences. Registrant's reform steps included the following statement: "When prescribing a new medication or adding to existing, I now use the online medication data base to confirm dosing and to screen for major interactions, when time allows." Review Board Stage 2 Review hearing notice asked a number of questions of the IC focused on public protection (HPA, s. 16) and standards of practice. Review Board adjudicator found that while investigation was adequate. IC disposition accepting a remedial practice structure based on review of reference materials "when time allows" was not reasonable. Adjudicator directed IC to require Registrant to reform his practice to acceptable standards on unqualified basis without a "when time allows" exception. IC was also directed to issue a citation against Registrant in event Registrant refused to accept this requirement.

Additional observations by adjudicator: adverse drug interaction reports should be required by law in order to increase chances of prevention of such occurrences in future, consistent with previous suggestion in Review Board decision 2014-HPA-106(a); 2014-HPA-107(a); 2014-HPA-108(a). Also, the College's Board, in the public interest, should consider taking steps to set appropriate professional standards and guidelines on this subject for the education of the profession.

September 26, 2017 (Released October 13, 2017)

# 2016-HPA-080(b); 2016-HPA-081(b) re: The College of Physicians and Surgeons of British Columbia (Group File No. 2016-HPA-G07)

Stage 2 hearing of an application for review of a complaint Inquiry Committee (IC) disposition under s. 50.6 HPA - Matter remitted back to IC for reconsideration. Stage 2 hearing of a review of a Registrar's disposition of a complaint of inadequate care involving two registrants between 2010 and 2014. Complainant submitted that Registrant 1 (family physician) and Registrant 2 (occasional locum for Registrant 1) failed to order MRI in a timely manner in response to Complainant's concerns about upper body pain following an accident, and misdiagnosed colorectal cancer as hemorrhoidal disease (in spite of having performed several rectal examinations), resulting in late surgical removal of complainant's rectum. Complainant felt that Registrants placed undue emphasis on her weight and did not perform adequate diagnostic testing, and that the response to her request for a copy of her medical records was both late and incomplete. Registrar's disposition (deemed to be an Inquiry Committee disposition per HPA s. 32(5)) was deemed unreasonable as it failed to address key issues of complaint against Registrant 1, including management of complainant's chronic myofascial pain, disclosure of medical records, response to third-party request for medical information, and management of Complainant on rectal cancer issue. Matter remitted to Inquiry Committee (IC) under HPA s. 50.6(8)(c) for reconsideration and issuance of new disposition regarding Registrant 1, with note that Registrar's office may issue new disposition under s. 32(3) if it believes conclusion remains warranted, or may refer the matter to the IC for issuance of the new disposition.

September 25, 2017 (Posted October 13, 2017)

# 2017-HPA-021(a); 2017-HPA-022(a) re: The College of Physicians and Surgeons of British Columbia (Group File No. 2017-HPA-G01)

Stage 2 hearing of an application for review of a complaint Inquiry Committee (IC) disposition under s. 50.6 HPA - Direction for the IC to make a disposition that could have been made. The Complainant complained to the College about the two Registrant physicians alleging that they both had conducted themselves in a way that amounted to a breach of the College's ethical standards regarding conflict of interest and, additionally, that Registrant 2 had performed a medical examination without informed consent. The IC disposed of the matter without regulatory criticism of the Registrants. After a hearing the Review Board issued its first Decision which referred the matter back to the IC with the direction that it issue a new disposition. After taking the matter back the IC then issued another disposition which then led to this second application for review of the reconsidered IC disposition. The Complainant alleged that this disposition was also unreasonable as it had done basically the same thing which the Review Board Panel clearly stated was insufficient. The Review Board found that the reconsidered disposition in this case unreasonably failed to protect the public interest. Having determined that the Registrants failed to comply with the minimum standards of the College so as to warrant regulatory criticism, and having no indication from the Registrants acknowledging that they did anything wrong, the IC's mere expression of its own "expectation," with no request for a meaningful response and commitment from the Registrants to change their conduct, was disproportionately insufficient to protect the public interest. Pursuant to s. 50.6 (8)(b) of the Act the Review Board considered it appropriate in this case to direct the IC to make a disposition that could have been made by the IC, rather than remit this matter to the IC for "reconsideration," and a potential third application for review to this Review Board. The Review Board further directed that the IC consider issuing a

citation if the Registrants declined to provide the requested undertaking.

September 14, 2017 (Posted October 3, 2017)

# 2016-HPA-209(b); 2016-HPA-210(b) re: The College of Physicians and Surgeons of British Columbia

Stage 2 hearing of applications for review of two registration committee (RC) decisions under 50.54 HPA – decisions confirmed. Application for review of two registration committee (RC) decisions, filed by two internationally-trained applicant physicians (husband and wife) practising in British Columbia under provisional registration and licensure granted by the College in the General/Family Practice Class. Issue on review was decision by RC declining further extension of time limit for the passing of key certification examinations (Medical Council of Canada, College of Family Physicians of Canada) required for the award of full registration. RC had previously granted extensions of time for obtaining certifications based on "extenuating circumstances" (defined as to excuse; mitigate; make excuses for) that included significant health issues and the death of a family member, in addition to adjusting timelines for compliance due to the "deharmonization" of the administration of the certification examinations. Panel found that the actual language of the bylaw is "exceptional circumstances" meaning unusual or not typical, and beyond the applicants' control. Panel also found that the RC gave full consideration to the submission of extenuating circumstances by the applicants in their request for a further extension, were aware that the applicants had each sat and failed a required examination four times, and that the applicants faced ongoing issues with balancing professional responsibilities and family needs with the demands of exam preparation. The RC's ultimate decision to grant no further extensions, and to set a final deadline after which registration would be cancelled, was unfortunate for the applicants but not unreasonable. Additional observations by the Panel: the Panel, while confirming the decision of the RC, noted its concern that it had observed a deeply troubling pattern involving many applications for review by foreign trained physicians. These applicants faced broadly similar circumstances of attempting to pass certain exams within a stipulated period while working long hours in a foreign culture with overwhelming patient loads, family needs and financial demands. The Panel noted that the College has a duty both to serve and protect the public, and asked whether the College might "play more of an interventionist role working with the physician between the time of arrival in the under-serviced community and the deadline for meeting requirements of ongoing registration." The Panel also gueried "how the RC is serving the public by letting physicians practice with large patient loads for many years without passing the requisite exam, only to then determine that the same physician is not qualified to provide the services based on not passing an exam?" The Panel closed by noting "[t]here must be a better way and the Panel encourages the College to work with interested stakeholders to find it both for these Applicants and others."

September 15, 2017 (Posted October 3, 2017)

Copies of these decisions are available on the Review Board website.

#### **Judicial Reviews of Review Board Decisions**

Just as the Review Board was created to ensure that College decision-making is accountable, the Review Board is accountable for its decisions in British Columbia Supreme Court, in a process known as judicial review. Where a Review Board decision is challenged on judicial review, the court considers whether the Review Board's substantive decision was patently unreasonable, and whether its process was fair and impartial.

#### 1. Judicial Decisions Since Last Annual Report

This decision was issued in March, 2018, but has been included in this report for currency, and because of its significance.

#### Sanders v. Health Professions Review Board, 2018 BCSC 441

Thomas Sanders, the Complainant, sought judicial review from a Review Board decision confirming an Inquiry Committee disposition at Stage 1. The case arose out of end of life care for Mr. Sanders' mother. A key allegation Mr. Sanders made to the Inquiry Committee, the Review Board and the Court was that the Registrant, a hospital physician, administered analgesic pain management to his mother without his consent as her representative under a Representation Agreement. The Patient Care Quality Review Board agreed that there had been a clear breach of the *Health Care Consent Act (HCCA)* and no one argued to the contrary on judicial review.

The Registrant's position, which the Inquiry Committee accepted - and which the Review Board found reasonable - was that despite a breach of the *HCCA* - there was no professional misconduct where, as here, the Registrant relied on advice from Risk Management at the hospital that the Act authorized the Registrant to override Mr. Sanders' wishes, and where the Registrant otherwise acted in the best interests of the mother (who was in agony).

The Petitioner argued that the Review Board decision was patently unreasonable for two reasons. First, the Review Board failed to find that a breach of the *HCCA* was <u>necessarily</u> a professional standards problem, and pointed to other Review Board decisions which held that compliance with the *HCCA* is a significant professional standards issue. Second, the Review Board Decision was insufficiently transparent because it did not specifically speak to this argument despite acknowledging that it was the key argument of the Petitioner.

The Court held that the Review Board's decision was not patently unreasonable, either in its finding that the investigation was adequate, or in its finding that the disposition was reasonable.

With regard to the adequacy of the investigation, the Court held that it was not patently unreasonable for the Review Board to find that the Inquiry Committee could rely on the medical reviewer's summary of clinical records. Nor was it patently unreasonable to focus the review on whether the Registrant should have obtained informed consent, given that this was a professional standards issue, and the Registrant obtained professional advice. The Court held that the Review Board made a "reasonable assessment of the adequacy of the Inquiry Committee investigation".

With regard to the reasonableness of the disposition, the Court held that the Review Board's decision was also not patently unreasonable. The Court held that the Review Board undertook a "detailed review of the underlying record", "specifically acknowledged the petitioner's position before the HPRB", was reviewing "the whole picture", which was "more nuanced" than the narrow question of whether the registrant obtained informed consent, and concerned professional

conduct, not fine interpretations of law. The Court also noted that "the question of whether the petitioner's consent was improperly overridden is not so clear".

#### 2. Petitions Discontinued

# College of Physical Therapists of British Columbia v. Health Professions Review Board (Petition filed April 13, 2016)

<u>Summary</u>: The College of Physical Therapists applied for judicial review of Review Board Decision No. 2015-HPA-121(a). The Petition alleged that the Review Board exceeded its mandate by posing issues not raised by the complainant, unreasonably admitted evidence and made unreasonable findings that the College's investigation was inadequate and its disposition as unreasonable.

Status: Petition discontinued.

#### 3. Petitions Outstanding

#### TM v. Health Professions Review Board (Petition filed June 20, 2012)

Petition commenced by a complainant to set aside *Decision No. 2012-HPA-004(a); 2012 HPA-005(a)* 

<u>Summary</u>: The Review Board Decision under judicial review held that special circumstances did not exist to grant an extension of time to file the application for review.

<u>Status</u>: Following the filing of the Petition, the Review Board determined that the application for review had in fact been filed in time. The Review Board therefore continued with the application for review and on September 9, 2014, rendered its final decision: Decision No. 2012-HPA-G16. The Petitioner has taken no steps on the Petition since the issuance of the September 2014 decision.

#### Ouimet v. Health Professions Review Board (Amended Petition filed December 24, 2013)

<u>Summary</u>: Petition commenced by a complainant from Review Board decision *Decision No.* 2012-HPA-080(a) dismissing an application to set aside a decision of the College of Dental Surgeons. The complaint alleged that the Registrant provided substandard advice regarding certain dental issues. The College dismissed the complaint, finding that the Registrant had not engaged in substandard practice. The Review Board held that the College's investigation was adequate and its disposition was reasonable.

Status: Court filings have been completed. No date has been set for the hearing of the Petition.

#### Lohr v. Health Professions Review Board (Petition filed June 29, 2015)

<u>Summary</u>: The Petitioner applied for registration to the College of Chiropractors. The Petitioner applied to the Review Board for a review of the College's registration decision. In *Decision No. 2015-HPA-202(a)*, the Review Board held that it had no jurisdiction to conduct a review a decision as the college registration committee's refusal to register the applicant was made under s. 20(2.1) of the Act, which sets out a class of decisions outside the Review Board's jurisdiction to review. The Petition alleges procedural unfairness.

Status: Court filings have been completed. No date has been set for the hearing of the Petition.

# College of Physicians and Surgeons of British Columbia v. Health Professions Review Board (Petition filed September 29, 2015)

<u>Summary</u>: The College of Physicians and Surgeons applies for judicial review of Review Board <u>Decision No. 2015-HPA-006(a)</u>, which held that the College failed to conduct an adequate investigation and ordered that the new disposition be issued by the Inquiry Committee rather than the Registrar. The Petition alleges that the Review Board failed to recognize that the College cannot compel third parties to provide it with evidence, failed to reasonably apply the "adequacy of the investigation" test and exceeded its role in requiring the Inquiry Committee to issue the new disposition.

Status: Petition argued April 18-20, 2017, February 1-2, 2018 in British Columbia Supreme Court.

#### Millman v. Health Professions Review Board (Petition filed October 16, 2015)

<u>Summary</u>: Petition commenced by a complainant from a Review Board Decision dismissing an application for review from a college complaint disposition: *Decision No. 2012-HPA-116(b)*. The Petition alleges procedural unfairness.

Status: Court filings have been completed. No date has been set for the hearing of the Petition.

# Battie v. College of Physicians and Surgeons and Health Professions Review Board, Petition filed May 4, 2016

<u>Summary</u>: Petition challenges Review Board *Decision No. 2015-HPA-122(a) - 125(a)*. The Review Board, at Stage 1, dismissed an application for review from a registrar's disposition dismissing a complaint about the management of a fracture by four registrants.

Status: No date has been set for the hearing of the Petition.

# College of Dental Surgeons v. Health Professions Review Board, Petition filed October 20, 2016

<u>Summary</u>: Petition challenges Review Board *Decision No. 2015-HPA-214(a)*, which concluded that it was unreasonable for the Inquiry Committee to issue the same remedial disposition on two cases it considered on the same day, where it had been critical of the registrant.

Status: The Petition has not yet been set for hearing.

#### 4. Petitions filed

# College of Physicians and Surgeons v. Health Professions Review Board: Petition filed January 20, 2017

<u>Summary</u>: Petition challenges Review Board *Decision No. 2016-HPA-G06*, which held that an investigation was inadequate, and the disposition was unreasonable, because the Inquiry

Committee failed to address a registrant's care in relation to a college guideline setting out its expectations of the relationship between a primary care physician and consultant physician.

Status: Petition not yet been set for hearing.

# College of Physicians and Surgeons v. Health Professions Review Board, Petition filed January 27, 2017

<u>Summary</u>: Petition challenges Review Board *Decision No. 2016-HPA-112(a)*, which concluded that a disposition was unreasonable because it failed to take the registrant's past discipline history into account.

Status: Petition not yet set for hearing.

#### LeClerc v. Health Professions Review Board, Petition filed September 11, 2017

Petition commenced by a complainant to set aside Review Board *Decision 2017-HPA-031(a)*. The petition alleged failure to provide adequate reasons.

Status: Petition not yet set for hearing.

Links to judicial review decisions pertaining to Review Board matters are provided on the Review Board website.

### **Notices of Delay and Notices of Suspension**

Upon receipt of an application from a party, the Health Professions Review Board has the authority to review the issue of a delayed investigation - that is, the failure of a College to dispose of a complaint within the time required by s. 50.55 of the *Health Professions Act* and the corresponding *Health Professions General Regulation* that sets out "prescribed times" for compliance (necessary to interpret s. 50.55 of the Act). This is specific to complaint files, which are files before the Inquiry Committee.

If the College took all of the time allotted to it under the legislation to complete an investigation, it should be completed within 255 days from the date the Registrar is notified of the complaint or the date the college commences an investigation where it has done so on its own initiative. If by this time the investigation has not yet been completed by the College, a right of review to the Review Board arises with respect to that delayed investigation.

During the time allotted to the College under the legislation, the College is required to issue the following delayed investigation notices to the parties:

- (1) after 150 days have elapsed,
- (2) again after 240 days, (providing a new date of expected disposition) i.e.: a notice of delay
  - (a) copied to the Review Board
- (3) and a final notice after no more than 285 days, i.e.: a notice of suspension
  - (a) copied to the Review Board
  - (b) this final notice triggers the 30 day time limit to request a review into the timeliness of the Colleges investigation, to the Review Board

The Review Board has provided guidance for this process on our website in the following Memorandum, found online:

 Applying the Prescribed Time Periods: http://www.hprb.gov.bc.ca/process/prescribed\_time.pdf

#### **Legislation Links for Reference:**

- Health Professions General Regulations: section 7: Prescribed periods disposition of complaints and investigations: <a href="http://www.bclaws.ca/EPLibraries/bclaws">http://www.bclaws.ca/EPLibraries/bclaws</a> new/document/ID/freeside/17 275 2008#section7
- Health Professions Act: section 50.55: Timeliness of inquiry committee investigations: <a href="http://www.bclaws.ca/EPLibraries/bclaws\_new/document/ID/freeside/00\_9">http://www.bclaws.ca/EPLibraries/bclaws\_new/document/ID/freeside/00\_9</a> 6183\_01#section50.55
- Health Professions Act: section 50.57: Review delayed investigation: <a href="http://www.bclaws.ca/EPLibraries/bclaws">http://www.bclaws.ca/EPLibraries/bclaws</a> new/document/ID/freeside/00 96183 01#section 50.57

### **Review Activity Statistics**

For the reporting period from January 1, 2017 – December 31, 2017

Figure 1: Number of Applications, by type and month

Month	Complaint Dispositions	Delayed Investigations	Registration Decisions	Total Number of Applications	%
January	7	4	2	13	7
February	7	2	1	10	5
March	9	2	3	14	7.5
April	6	3	4	13	7
May	8	0	4	12	6
June	13	1	3	17	9
July	19	1	3	23	11.5
August	7	6	3	16	8
September	11	0	6	17	9
October	2	0	5	7	3
November	19	0	5	24	12
December	29	1	0	30	15
Total	137	20	39	196	
% of Total Applications					100

Figure 2: Total Applications for Review, classified by respondent College

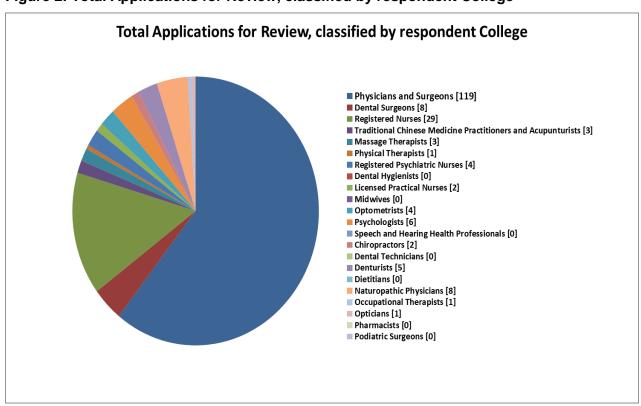


Figure 3: Applications for Review, by college and type

Respondent College	Complaint Disposition s	Delayed Investigations	Registration Decisions	Total Number of Applications	%
Chiropractors	2			2	1
Dental Hygienists					0
Dental Surgeons	6	2		8	4
Dental Technicians					0
Denturists	5			5	2.5
Dietitians					0
Massage Therapists		2	1	3	2
Midwives					0
Naturopathic Physicians	1	7		8	4
Licensed Practical Nurses			2	2	1
Registered Nurses	19	2	8	29	14
Registered Psychiatric Nurses	4			4	2
Occupational Therapists	1			1	.5
Opticians	1			1	.5
Optometrists	4			4	2
Pharmacists					0
Physicians and Surgeons	89	5	25	119	61
Physical Therapists	1			1	.5
Podiatric Surgeons					0
Psychologists	4	2		6	3
Speech and Hearing Professionals					0
Traditional Chinese Medicine Practitioners and Acupuncturists	2		1	3	2
Total	139	20	37	196	
% of Total Applications	71%	10%	19%		100%

Figure 4: Applications for Review – by status

Applications for Review	Number
Number of applications open at January 1, 2017 (Case Management in Progress)	124
Number of applications for review received in 2017	196
Applications closed in 2017	139
Number of applications open at December 31, 2017 (Case Management in Progress)	181

#### **Financial Performance**

#### 2017/18 Year Expenditures

This reporting period covers the 2017 year of operation for the Review Board.

Following is a table showing the expenditures made by the Review Board during its 2017/18 fiscal year.

#### **Health Professions Review Board**

Operating Costs - April 1, 2017 - March 31, 2018

Salary & Benefits	\$	547,895
Operating Costs	\$	929,108
Other Expenses	\$	0
Total Operating Expenses	\$ 1,477,003	

#### **Shared Services Administrative Support Model**

Administrative support for the Health Professions Review Board is provided by the office of the Environmental Appeal Board and the Forest Appeals Commission.

This shared services approach takes advantage of synergy and keep costs to a minimum. This has been done to assist government in achieving economic and program delivery efficiencies allowing greater access to resources while, at the same time, reducing administration and operational costs.

In addition to the Health Professions Review Board, the office for the Environmental Appeal Board and the Forest Appeals Commission provides administrative support to five other appeal tribunals.