



## Highlights of the January 29, 2016 Meeting of Council

The January 29, 2016 Council Meeting was held at the SCoP office with a teleconference option also made available. All members of Council attended in person and one sent regrets.

### 1. Call to Order

- Jason Trask called the meeting to order at 9:37 a.m.

### 2. Approval of Agenda:

- Addition to Agenda: SEMSA Presentation (Ross Raeburn) - **Item 3.6**
- **MOTION:** To approve the agenda with the addition of item 3.6. **Lindsay/Bill - Carried**

### 3. Approval of Minutes:

- **MOTION:** To approve the minutes with the above additions. **Betty/Bill - Carried.**

### 3.5 Presentation/Demonstration of access to the patient Electronic Health Record: eHealth Saskatchewan

- Council, staff, and invited members received a presentation and live demonstration, and had the opportunity to ask questions in advance of the pilot program.

### 3.6 SEMSA Presentation (Ross Raeburn)

- Kyle Sereda acknowledged a conflict of interest and left the room for the discussion.
- SEMSA is asking for feedback with regards to changing their name to Paramedic Services Chiefs of Saskatchewan (PSCS). Reasons stated:
  - Want to align nationally with the Paramedic Chiefs of Canada.
  - Main driver of the name change is to be more representative of what SEMSA does, and to further the evolution of ambulance services. The profession has moved from EMS to paramedicine. They are delivering the services of a paramedic. Ontario is similar.
  - Identifies the leader as chief, and to identify the leader to the public. SEMSA feels that the public can differentiate between Paramedic Chief and Paramedic.
  - A number of services have changed their decals to include the word paramedic, but business names still refer to ambulance services.

- Council is concerned about the public perception.
  - The use of the word “paramedic” is problematic. They deliver more than just emergency services, but the public will see this organization as a paramedic-driven group.
  - Concern that other groups will want to use the term paramedic. Although there is already another group using the term, everyone who is a member of that organization is a licenced member of the College, so it is not in contravention of the Act.
  - Question to consider is “does the public understand the difference between an advocacy body vs regulatory body”?
  - A corporation is a person, and SEMSA is a corporation, and “no person shall use the protected title of paramedic.”
- SCoP will send another letter to SEMSA denying the name change and providing an explanation.

#### **4. Business Arising/Action Items:**

##### **4.1 Executive Director Accountability Report**

4.1.1 **Criminal Record Report** – no update to report

##### **4.1.2 Strategic Outcomes Update**

- Updated Strategic Plan document, which was circulated to Council.
- Collaborative working relationships include working with MOH, Health Quality Council etc.
- Benefiting from co-location with two other regulatory members.
- Looking to work with NIRO more. Looking at sharing space with them instead of hotel boardrooms for hearings.
- COPR has asked SCoP’s Executive Director to stay on as chair.
- Stakeholders: Ministry of Health wants the College to have a more direct role in overseeing approval of protocols.
- Regulatory goals: continuing to issue PCP 2011 licences. New curriculum development. Community paramedicine program.
- Scope of practice: no longer know if our gap training is sufficient; we need to evaluate the AIT environment.
- Licencing processes: turnaround time was 24 hours or less, except during December 1. Licences were issued within two days.
- Financial stability: continue to operate within budget parameters.

#### 4.1.3 **COPR National Exam Results**

- ACP exam sitting was small.
- PCP exam: Sask Polytech students are on par with national average.
- British Columbia is adopting the national exam in 2017.

#### 4.1.4 **EMR Exam Update**

- Influx of people from Alberta. Decline in EMR exams, which can be attributed in part to a greater pass rate on first attempt.

### 4.2 **Other:**

#### 4.2.1 **AGM 2016 Update**

- Will be May 2, 2016
- Will feature a “member wellness” position statement from SCoP.
  - Member wellness will emphasize that action taken by the College is not about being punitive, but about protecting the public and supporting the member. Want to ensure members are healthy.
  - What should we do as a regulatory body, as opposed to the employer? Need to be prepared for this possibility.
- Critical Care Paramedics: Survey went out to ACP members January 28, 2016. 10 people want to be part of the focus group. Survey closes Feb 12. Another survey will go to regulators across Canada. Hope to have a report for the AGM. Next Council meeting: will discuss CME, resolutions.

#### 4.2.2 **General**

##### 4.2.2.1 **Funding Request**

- Received a grant through Ministry of the Economy for assessing internationally-trained applicants.
- Will begin working on a framework for assessing international applications. The College has less than 4 weeks to complete the project.

##### 4.2.2.2 **CMA Changes**

- Canadian Medical Association has decided to divest themselves of accreditation as of 2018.
- Will result in regulatory bylaw changes. Council still has the ability to approve programs. Other NIRO members may also have this issue.

- From a COPR perspective, this is an opportunity to take a leadership role in defining the standards needed by an educational institution.
- CMA is working with each profession to determine the accreditation.
- Health Regions are currently assessed by Accreditation Canada.

#### 4.2.2.3 COPR Funding Request

- COPR has requested funding from the federal government to support assessments/screening for internationally educated applicants.

#### 4.2.2.4 Justice Institute of British Columbia (JIBC) Study

- Violence in Paramedicine survey will be launched shortly. It is intended to assess whether there is a violence issue in paramedicine.

### 4.2.3 Protocol Sub-Committee

- Need to have a review of the Paramedic Clinical Practice Protocols manual and update it. Changes needed:
  - Facility protocol manual and Air protocol manual should be combined.
  - Protocol manual right now has medications listed by name instead of classification.
- Would like a sub-committee to do the work. Maximum 5 people. Would report to Council. Anything new has to be approved by the Professional Practice Committee.

**MOTION:** To establish a Protocol Subcommittee (terms of reference and budget needed before selection of members). **Lindsay/Jason - Carried.**

## 4.3 Meeting and Training Updates

### 4.3.1.1 PESPC/PPC

- Role of the Provincial Emergency Services Practice Committee (PESPC) was to evaluate and approve changes to practices and protocols. The Ministry of Health (MOH) supported a move to a new model and dissolve PESPC. The Professional Practice Committee (PPC) was created with MOH as a stakeholder.

- Plan to schedule a meeting for February to wind down PESPC and begin PCC. Then, advise PCC potential members and invite them to the new committee meeting.
- PCC will be much smaller than PESPC. Broad stakeholder consultations. Want the committee to hear evidence, put together proposals, and send them out for consultation.

4.3.1.2 CLEAR committee work (Exec. Leadership; Entry to Practice; & International Relations)

- SCoP sits on the Executive Leadership, Entry to Practice, and International Relations committee. Executive Director's involvement is specific to the development and approval of education and communication materials for CLEAR members.

## 5. Committee Reports

### 5.1 Executive Committee

**Motion:** To accept executive decisions. **Kael/Betty - Carried.**

### 5.2 Education Committee

- Met November 19, 2015. Meetings are scheduled to be quarterly.
- CME Course Approval subcommittee has been very busy. Donnita Derbyshire, Connie Wilson, Candace Gratton are on the committee. Hoping to establish achievable turnaround time projections (two weeks wasn't realistic, a month may be more appropriate).
  - Should the CME Course Approval subcommittee be larger? Currently 3 people. Larger may be more would be difficult to manage.
  - What are we trying to accomplish with CME? Education will discuss what CME means, and they can come back to council with some options. Trying to ensure a quality in CME. Currently this requirement fulfils the lifelong learning standard, but is not necessarily directly linked to competence.
  - Question: How many PCC complaints are related to skills? ~50%
  - CME Canned Courses: need to make sure that credit allocation is consistent.
- Mandatory cards: issue dates on mandatory cards used to be important for renewal.

- College policy changed to use the expiry date instead effective with the 2017 renewal. Discussed with the committee, looked at the evidence, and the intent was to streamline the process without posing additional risk to the public, as well as keeping requirements within what is stated in the Regulatory Bylaws.
- Clarification from the January, 30, 2015 meeting of Council - the minutes stated that the member shall maintain currency.  
Maintaining currency means not expired.

**MOTION:** To add to the definition of maintaining currency to say, “Not expired at time of licence renewal.” **Betty, Lindsay - Carried.**

### 5.3 **Audit Committee**

- The College revised the admin Strategy as a shared (SCoP/SAMRT/SCT) resource was not working well. There was simply too much work for one person. Went back to one full-time position with SCoP, and one part-time position with SCRT and SAMRT.
- Became aware that the potential exists for Regina Fire to not renew their paramedic licences. Budget implication is significant as ~10% of SCoP budget relates to Regina Fire. The College has prepared a contingency budget.
- The College is examining the terms of the liability insurance policy; we can get a rider on the policy that would cover legal costs for Professional Conduct and Discipline Committees.
  - Current issue: member has appealed to go to the Supreme Court. There have been submissions by both parties, but we are months away from a decision.
  - Current policy: SCoP can submit a claim through errors and omissions insurance; if the court finding is against us we can claim legal costs. If the College is successful, we would not be compensated by insurance under our current policy and would need to recover costs directly from the member. Could for the Supreme Court appeal could near \$500,000.

#### 5.4 Professional Conduct Committee

- PCC has been very busy (currently six open files). Five files have been closed; the committee issued two letters of guidance for professional misconduct and dismissed three cases.

#### 5.5 Discipline Committee

- No update to report.

#### 5.6 Legislation and Bylaws Committee

- Student licence resolution update. Desire to have members work at a full licence level and a restricted licence level while supervised. Individuals will apply for their full licence with their restriction as a student.
- When communicating this, we need to define direct supervision. Supervisor must be able to stop or correct something. The supervisor is responsible for the practice of the subordinate.

**MOTION:** To accept draft version 3.1 of the Active Practicing Member Awaiting Examination. **Kyle, Jason - Carried.**

#### 5.7 Nominations Committee

**MOTION:** To accept the Nomination committee recommendation as presented with 2 nominations committee positions going to ballot and 2 members-at-large for Council. **Betty/Bill - Carried.**

### 6. Other/New Business:

#### 6.1 Renewal Debrief

- By Early bird deadline: 338 members
- As of December 1: 1745 were licenced
- As of December 31: 2024 members
- November was very slow. The last week was very, very busy.
- Today (January 29): 2081 members. Two renewals were processed today. Late fees are \$250 this week.
- Issues are similar to last year: members are unsure of what they require and what is currently still valid. ITLS was problematic because it is valid for 3 years but only 2 for us. Lots of incomplete submissions and efforts on the part of the member to shift responsibility to employer.

**6.2** Investment Policy

- Decision will be made at the next Council meeting. Audit has approved the policy.

**7. Correspondence:** see circulation file

- 7.1 White Paper on Self-regulation (Authored by Nade) circulated to Council

**8. Adjournment**

**Next Council Meeting:** April 1, 2016