

2005 ANNUAL REPORT



COLLEGE OF
PHYSICIANS & SURGEONS
OF NOVA SCOTIA

Competent Care & Ethical Practice

President's Report



Rodney Wilson, MD

This year marks the tenth anniversary of the College of Physicians and Surgeons of Nova Scotia, the self-governing professional body that replaced the former Provincial Medical Board under the Nova Scotia *Medical Act* of 1996. The College enters its second decade with an impressive and widely acknowledged record of service to the public and the profession.

Nova Scotia physicians can be justly proud of the quality of their professional self-governance. As described in the following report, the College is active on many fronts, including maintaining high quality

care through peer assessment, improving access to medical care, enhancing member services, and managing its administration and governance in an accountable, forward-thinking manner.

NSPAR – Practical, physician-friendly peer review

The College is mandated under the Nova Scotia *Medical Act* to establish, maintain, and develop standards of qualification and practice among its members and to conduct peer assessment. The College has chosen the Nova Scotia Physician Achievement Review (NSPAR) methodology to fulfill its peer assessment mandate because NSPAR is physician-friendly, cost-effective, confidential and focused on professional development.

NSPAR recognizes that excellence in medical practice requires abilities that extend beyond the traditional measures of clinical skills and knowledge. Rather than focusing exclusively on clinical skills and knowledge, NSPAR looks more broadly at areas such as coordination of care and resources, professional development, communication and professional conduct, patient interaction skills, and office management. NSPAR uses a positive approach that is unrelated to, and operates at arms-length from, the College's disciplinary functions.

NSPAR was successfully launched with Nova Scotia's family physicians in early February 2005. The annual goal of initiating 120 NSPAR physician reviews has been exceeded with more than 160 reviews begun and 49 fully complete at the end of February 2006. The feedback received to date has been highly positive.

Some of the year's NSPAR milestones include:

- The appointment of Dr. Maria Alexiadis, Dr. Cynthia Forbes and Dr. Phil Muirhead as NSPAR program advisors, in collaboration with Doctors Nova Scotia, to the Practice Improvement Committee of the College. These practicing family physicians are providing follow-up facilitation to the small number of assessed physicians who will receive "flagged"

NSPAR reports and assist them in their efforts to make practice improvements and to target appropriate professional development activities.

- In keeping with the College's culture of continuous improvement, and to provide reviewed physicians with a clear opportunity to offer suggestions for improvements to NSPAR, a program evaluation was launched with physicians who have completed an NSPAR review. The evaluation addresses not only the review process, but also the value of the feedback from a physician's perspective, the actions the physician has taken as a result of the review, and the availability of CME/CPD opportunities to meet the needs identified by the review.
- The negotiation of an agreement with Doctors Nova Scotia to financially support professional development for practice and stress-related issues.
- Adherence to budget, with the actual realized cost of NSPAR being significantly lower than the 2005 budgeted amount
- Ongoing research by Joan Sargeant at the Dalhousie Department of Continuing Medical Education to enhance the value of multi-source feedback for physicians.

The College has begun to review anonymous, aggregate NSPAR data to document and encourage official action on important issues facing physicians and patients alike. These issues include trends in physician demographics and distribution, physician access to resources and levels of self-reported physician stress.

NSPAR

Nova Scotia Physician Achievement Review



In autumn 2006, NSPAR will expand to include most medical and surgical specialties. I am confident that surgeons and medical specialists will find NSPAR as useful and relevant as family physicians have. The College of Physicians and Surgeons of Alberta and the American Board of Internal

Medicine have adopted similar programs for the assessment of medical specialists and/or surgeons, and I am encouraged by the early support that this new phase of the NSPAR Program has received from medical specialists and surgeons in Nova Scotia. Further information about these enhancements will be distributed to members in September 2006.

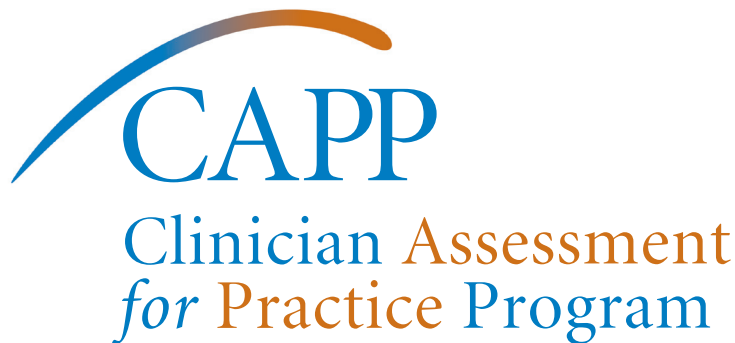
CAPP – Improving access to medical care

On May 17, 2005, the College launched the Clinician Assessment for Practice Program (CAPP), which assesses the clinical skills of international medical graduate (IMG) physicians who wish to become licensed in Nova Scotia. The initial CAPP assessment consists of a rigorous therapeutics examination and an Objective Structured Clinical Examination (OSCE).

Since the CAPP launch, the College has granted defined licenses to 22 family physicians following their successful CAPP assessments, and several district health authorities are now sponsoring defined licensees. CAPP is improving access to medical care, especially in rural areas of the province that have been underserved for many years. The presence of defined licensees is also beginning to provide much-needed relief to some of the province's busiest physicians.

CAPP involves ongoing follow up with physicians and mentors. CAPP and the College are working closely with Dalhousie University, Doctors Nova Scotia, immigrant groups, district health authorities and the provincial government to ensure that these physicians receive personal support and professional mentorship to assist their integration into the communities where they practice. I would like to extend the College's thanks to the CAPP examiners and to the many physicians who are mentoring these defined licensees in communities across the province.

The College has been extremely fortunate to have gained the insight and wisdom of Dr. Robert Maudsley, an internationally respected physician and medical educator, who has overseen the design and successful implementation of CAPP as its director. Dr. Maudsley has been instrumental in securing significant external funding for CAPP mentoring, assessment and research activities. He and his staff have also been active in research, publication and dissemination of information about this innovative program to local, national, and international bodies.



Registration – Serving physicians better

With 2,230 physicians licensed at the end of 2005, registration numbers for 2005 are part of an encouraging trend. Nova Scotia has seen an average increase of 60 licensees per year since 2001.

The College introduced an online re-registration option in late 2005, which provides College members a simple, “paperless” way to re-register and pay the annual license fee. Member response to this service was overwhelmingly positive, with approximately one-quarter of members choosing to renew online in 2005. The registration department has also introduced an online review of credentials service, which provides a simple and easy means for prospective new licensees to submit their credentials for assessment.

The College participates in the Medical Information Number for Canada (MINC) program, which issues a unique identifier (MINC number) upon written consent to licensed physicians, medical students, and trainees. Most College members provided this consent with their most recent re-registration, and will receive further MINC information in the summer of 2006. MINC enables regulatory bodies to quickly and accurately confirm the identity of individuals applying for registration and practicing within their jurisdictions. This nation-wide system will also be of great benefit to physicians, particularly if they move among jurisdictions. The MINC program is governed by strict confidentiality provisions, and adheres to the Canadian Standards Association Model Code for the Protection of Personal Information.

Dr. William Lowe has recently joined the College as Deputy Registrar, with responsibility for registration activities. Dr. Lowe brings a wealth of experience to this position, having undertaken 25 years of rural family practice and having served as a Council member and College president.

Governance, Quality and Leadership

The College has been nationally recognized for its commitment to continuous quality improvement. This commitment is exemplified by our ongoing assessment of Council and committee functioning. The president is now evaluated annually by Council, and routine evaluations will soon expand to all committees and Council. A recent governance review saw a reduction in the number of committees, and a significant improvement in the efficiency of committee work. For example, the Investigations Committees and Credentials Committee now divide the bulk of their considerable workload among inner-committee teams and/or team leaders who are responsible for detailed preparation. Their work is facilitated by paperless document-management software to which each committee member has access through a secure laptop computer. This innovation has resulted in improved administrative efficiency and significant savings in staff and committee time.

The College continues to strive for greater transparency regarding its operations. For example, the Investigation Committees have begun to provide more feedback to both physicians and complaints with regard to how decisions were reached. The Investigations Department has also begun to survey complainants and physicians in order to improve the quality and value of the process for all parties involved

With regard to the management of the College's financial affairs, Council takes its role as a financial steward very seriously, as you can see from the attached auditor's report. The College continues to manage its finances in a conservative and responsible manner.

I feel privileged to have served my colleagues and the public as College president over the past two years. One of the most interesting parts of the job has been speaking with colleagues about the many important projects the College undertakes. It is essential that Council remain well-informed about the realities of current medical practice. Accordingly, I encourage anyone who has questions, ideas, or concerns to get in touch with me or any other Council member by contacting the College.

I am pleased to report that Dr. Rex Dunn, a vascular and general surgeon from Sydney, will begin a two-year term as College president in September 2006. Dr. Dunn has been an elected member of Council since 2001. His experienced and balanced perspective has been a tremendous asset to the College during that time, and I am certain the public and the medical profession in Nova Scotia will be very well served under his leadership.

A handwritten signature in black ink, appearing to read "Rodney Wilson".

Rodney Wilson, MD
President

2005-2006 Strategic Milestones: College of Physicians and Surgeons of Nova Scotia

	2005 Q1	2005 Q2	2005 Q3	2005 Q4	2006 Q1	2006 Q2	2006 Q3	2006 Q4
Clinician Assessment for Practice Program (CAPP)								
• 60 International Medical Graduates (IMGs) assessed		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
• First IMG physicians with defined license under CAPP program			<input checked="" type="checkbox"/>					
• On-site assessments					<input checked="" type="checkbox"/>	<input type="checkbox"/>		
• Policies to evaluate and integrate IMGs							<input type="checkbox"/>	
• Client satisfaction measured					<input checked="" type="checkbox"/>			
• Operating surplus								<input type="checkbox"/>
Nova Scotia Physician Achievement Review (NSPAR)								
• Program implementation	<input checked="" type="checkbox"/>							
• 120 family physician assessments initiated				<input checked="" type="checkbox"/>				
• Program evaluation (initiated/first results)						<input type="checkbox"/>		
• Physician satisfaction measured					<input checked="" type="checkbox"/>			
• Linkage of assessment with CPD opportunities (determination of CPD needs and resources)					<input checked="" type="checkbox"/>			
• NSPAR launch with specialists							<input type="checkbox"/>	
College Governance Review								
• Implementation of governance quality program		<input checked="" type="checkbox"/>						
Registration Department Initiatives								
• Online curriculum vitae review		<input checked="" type="checkbox"/>						
• Online re-registration				<input checked="" type="checkbox"/>				
• Communications skills training for physicians				<input checked="" type="checkbox"/>				
Investigations Department Initiatives								
• Client satisfaction measured				<input checked="" type="checkbox"/>				

Auditors' Report

To the members of the
College of Physicians and Surgeons of Nova Scotia

We have audited the financial statements of the College of Physicians and Surgeons of Nova Scotia as at December 31, 2005 in accordance with Canadian generally accepted auditing standards and expressed an unqualified opinion on these financial statements in our report dated January 27, 2006. In our opinion, the information contained in the attached condensed statement of operations and the statement of changes in net assets is consistent with the above mentioned financial statements from which it was derived. To obtain a better understanding of the organization's financial position and the results of its operations for the year ended December 31, 2005, this condensed financial statement should be read in light of the audited financial statements.

WBLI
CHARTERED ACCOUNTANTS
Bedford, Nova Scotia
January 27, 2006

Notes To Financial Statements For The Year Ended December 31, 2005

1. PURPOSE OF ORGANIZATION

The College of Physicians and Surgeons of Nova Scotia is a not-for-profit organization that serves as a licensing and regulatory body for the medical profession within the province of Nova Scotia.

2. SIGNIFICANT ACCOUNTING POLICIES

Credit Risk

The College of Physicians and Surgeons of Nova Scotia does not believe that it is subject to any significant concentration of credit risk from its members. The accounts receivable relate to unpaid annual licensing fees and incorporation fees.

Capital Assets

Capital assets are stated at cost. Amortization is provided by the diminishing balance method at the following annual rates:

Furniture and equipment	20%
Computer hardware and software	30%

Equipment under capital leases are being amortized by the straight line method over sixty months, which is approximately the term of the leases.

Investments

The short term investments are stated at cost which approximates the fair market value at the end of the year. The long term investments are comprised of fixed income securities that are stated at cost net of amortization of bond premiums.

Deferred Charges

Deferred charges represent costs incurred by the College to develop an appraisal centre for the licensing of international medical graduates. These costs are amortized against future revenues.

Deferred Revenue

Physicians are licensed on a calendar year basis. Annual fees billed by the College of Physicians and Surgeons of Nova Scotia before December 31 and related to the subsequent year, are recorded as deferred revenue.

Revenue Recognition

Annual licensing fees and professional corporation fees are recorded as revenue in the year to which they relate. Revenue from other fees and programs is recognized as the service is rendered. Investment income is recognized on the accrual basis. Recoveries of hearing expenses are recorded when received.

Deferred Lease Inducements

Lease inducements are being amortized by the straight line method over the term of the lease.

Statement of Operations

	2005 Budget \$	2005 Actual \$	2004 Actual \$
Revenue			
Annual Licensing Fees	2,348,650	2,325,585	2,022,907
Registration Fees	85,000	91,745	67,330
Temporary Fees	24,000	31,339	29,765
Specialists Registration Fees	15,000	16,445	16,740
Certificates of Good Standing	18,500	20,743	20,355
Professional Corporation Fees	87,200	102,230	88,200
Other Income	25,000	17,041	19,271
Investment Income	39,500	37,261	19,275
NSPAR Program	100,000	-	-
CAPP Program	660,000	584,860	-
	3,402,850	3,227,249	2,283,843
Expenses			
Council	226,000	188,323	279,106
Registrar's Office	72,750	51,957	58,256
Investigations	245,500	236,904	152,183
Administration	1,305,700	1,425,457	1,283,716
Occupancy	193,463	182,053	147,798
Communications and Technology	183,774	286,900	180,410
NSPAR Program	324,750	184,093	76,966
CAPP Program	441,980	584,860	9,336
	2,993,917	3,140,547	2,187,771
Excess of Revenue Over Expenses	408,933	86,702	96,072

Statement of Changes in Net Assets

Net Assets	Invested in Capital Assets \$	Reserve Fund \$	Unrestricted Assets \$	2005 Total \$	2004 Total \$
Balance - Beginning of year	55,333	810,279	383,274	1,248,886	1,175,515
Excess (deficiency) of revenue over expenses	(192,767)	-	279,469	86,702	96,072
Investment in capital assets	192,378	-	(192,378)	-	-
Investment Income(loss)	-	140,363	-	140,363	(22,701)
Balance - end of year	54,944	950,642	470,365	1,475,951	1,248,886

Net Assets

Effective 1996, the College of Physicians and Surgeons of Nova Scotia began following a policy of appropriating surplus for future commitments. Surplus is now allocated based on expected future use as follows:

- Unrestricted net assets – available for future general use of the organization;
- Net assets invested in capital assets – funds used for capital assets;
- Restricted net assets – funds for which the Council has internally restricted for the purpose of covering expenditures in excess of the organization's operating budget. This internally restricted fund is not available for other purposes without the approval of the Finance Committee.

3. AUDITED FINANCIAL STATEMENTS

The full set of audited financial statements can be obtained by writing to the College of Physicians and Surgeons of Nova Scotia at Sentry Place, Suite 200, 1559 Brunswick St., Halifax, Nova Scotia, B3J 2G1.

Complaints by Category: 2001-2005

As of December 31 each year

Category (Pre-2003)	2001	2002	Category (Post-2003)	2003	2004	2005
Clinical Care	77	67	Quality of care	83	82	138
Communication	20	35	Communication	23	27	29
Sexual misconduct	2	1	Systemic issues	1	0	1
Narcotics/restricted drugs	8	1	Impaired physician	1	1	1
Insurance issues	8	4	Third-party medical information	7	3	1
Ethical conduct	13	9	Ethics	11	10	20
Physician substance abuse	0	0	Medical reporting	8	6	4
Medical records	4	0	Practice management	7	2	4
Miscellaneous	0	1	Miscellaneous	2	0	1

Note to table above:

In 2003 the College changed the way it classifies the complaints it receives to provide a more useful picture of its investigations activities. The new classifications are contained in the "Category (Post-2003)" column above.

Complaint Outcomes: 2001-2005

As of December 31 each year

	2001	2002		2003	2004	2005
Dismissed	85	103	Dismissed	75	105	82
Counselled	11	11	Counselled	9	14	17
Cautioned	6	8	Cautioned	2	2	4
Caution / Counsel	7	4	Caution / Counsel	4	5	11
Reprimand with consent	1	1	Reprimand with consent	1	0	3
Referred to Hearing	2	0	Referred to Hearing	0	2	2
			Open	74	30	46

Note to table above:

In 2003 the College changed the way it tabulates complaint outcomes to provide a more complete picture of its investigations activities. The tabulations now include an "open" category that refers to complaints that were under investigation as of December 31 of the given year, but were not yet subject to disposition.

Hearing Committee Decision and Consensual Reprimand Summaries

January 1, 2005 to December 31, 2005

Please Note:

Complete and up-to-date information about Hearing Committee Decisions and Consensual Reprimands is available at www.cpsns.ns.ca/disciplinary-decisions.htm or by contacting the College.

Hearing Committee Decision:

Dr. William Hunter Blair, Barrington Passage, June 20, 2005

Dr. William Hunter Blair, a general practitioner in Barrington Passage, Nova Scotia, was suspended from the practice of medicine for six months commencing Saturday, June 18, 2005. Dr. Blair admitted to allegations regarding the inappropriate prescribing of controlled substances outlined in a Notice of Hearing and admitted that he was guilty of professional misconduct. Dr. Blair agreed to give up his prescribing privileges for narcotics and other controlled substances and not to sponsor defined licensees with the College of Physicians and Surgeons of Nova Scotia.

Hearing Committee Decision:

Dr. Jacek Wesolkowski, Sydney, November 8, 2005

The license to practice medicine of Dr. Jacek Wesolkowski, a psychiatrist in Sydney, was suspended until further notice on Monday November 7, 2005 when he failed to attend a random monitoring test for alcohol as part of an agreement with the College. On November 9, 2005, Dr. Wesolkowski's license suspension was lifted.

Hearing Committee Decision:

Dr. David Russell, Mount Uniacke, November 30, 2005

In a Hearing Committee Decision incorporating a Settlement Agreement, Dr. David Russell, a family physician in Mount Uniacke, agreed that he was guilty of professional misconduct and/or professional incompetence arising out of physical or mental incapacity. Dr. Russell also admitted to a substance dependency that had adversely impacted his ability to practice medicine. The Settlement Agreement stipulated that Dr. Russell's license was to remain suspended effective Thursday, November 24, 2005, and that for three months following this date, he would submit to random tests for prohibited substances.

Consensual Reprimand:

Unnamed Physician, September 15, 2005

A Nova Scotia psychiatrist consented to a reprimand. To protect patient confidentiality, the identity of the psychiatrist was not disclosed. The reprimand regarded a failure by the physician to establish and maintain appropriate professional boundaries by being involved in the psychiatric care of a family member. The reprimand also noted that the behavior of the physician when interacting with health care practitioners in this situation was inappropriate and unbecoming to the medical profession.

Consensual Reprimand:

Dr. Robert J. Cooper, Pictou, October 5, 2005

Dr. Robert J. Cooper, a family practitioner in Pictou, consented to a reprimand. The reprimand related to a failure to conduct an adequate history of the patient's complaint, an inadequate physical examination and a failure to arrange an emergency neurosurgical consultation. The Committee also expressed concerns about the content, completeness, and legibility of the portion of the medical record for which Dr. Cooper was responsible.

Consensual Reprimand:

Dr. Thomas Hydorn, Amherst, November 4, 2005

Dr. Thomas Hydorn, a family practitioner in Amherst, consented to a reprimand. In the case of patient "X", Dr. Hydorn's pattern of prescribing benzodiazepines and opioids was deemed irresponsible and was found to put the patient, and potentially the community, at risk. The Committee noted that patient "X" was a difficult and possibly manipulative patient and that the audit of Dr. Hydorn's prescribing revealed this to be an isolated case of inappropriate prescribing.

College Council and Committees: 2005

As of December 31, 2005

	Position, constituency, or appointment	Executive Committee	Investigation Committee "A"	Investigation Committee "B"	Finance Committee	Governance and Quality Committee	Credentials Committee	Nominating Committee	Peer Assessment Committee
Dr. Rodney Wilson	President (District 5)	Chair			X	Chair	X	X	Chair
Dr. Henry Adamson	District 2	X	Chair					X	
Mr. Harold Bezanson	Public Member		X					Chair	
Dr. Ethel Cooper-Rosen	District 5		X						
Dr. Rex Dunn	District 1	X			X	X	X	X	
Dr. Cynthia Forbes	District 5					X	X		X
Mr. Allan Green, Q.C.	Public Member	X			Chair				
Ms. Gwen Haliburton	Public Member	X		Chair		X			
Ms. Mary Hamblin	Public Member					X	X		X
Dr. Shelagh Leahey	District 3			X					
Dr. Cameron Little	Registrar and CEO								
Mr. Douglas Lloy	Public Member						X		
Dr. William Lowe	District 4						X		
Dr. Dianne MacDonald	Investigation "A"		X						
Dr. Keri McAdoo	Investigation "B"			X					
Dr. Heather Robertson	Investigation "A"		X						
Dr. Dawn Ross	Investigation "B"			X					
Ms. Joan Sargeant	Dalhousie CME								X
Dr. Douglas Sinclair	Dalhousie University						X		X
Dr. Ronald Tanton	District 5	X			X		Chair		
Dr. Donald Wescott	Doctors Nova Scotia			X					
Ms. Marjorie Hickey, Q.C.	Solicitor								

Physician Resource Statistics and Obituaries

As of December 31, 2005

Type of Registration	Physician Location	In Memoriam	In Memoriam (continued)
Full Register	Annapolis	Allison, Nigel Paul	Martin, Julius
Defined Register	Antigonish	Barton, Frederick J.	Milton, Gordon Lockhart
Temporary Register	Cape Breton	Beaton, J. Wayne	Muir, Donald Macgill
Total	Colchester	Bedwell, Stephen Frederick	Rideout, Vernon K.
	Cumberland	Belliveau, Normand	Rippey, David Max
Specialists	Digby	Campbell, Angus Joseph	Roach, Joseph
Non-Specialists	Guysborough	Ferguson, Marylin Joyce	Thomson, Michael John C.
	Halifax	Flight, George Hubert	Webster, John Alexander
Place of Graduation	Hants	Fraser, R. John	Williston, John Miles
Dalhousie University	Inverness	Gass, Kenneth Gregory	
Other Canadian universities	Kings	Graham, Charles H.	
U.S. universities	Lunenburg	Green, Saul	
All other universities	Pictou	Griffiths, Anthony John Martin	
	Queens	Legacy, Ronald E.	
	Richmond	Macdonald, Hugh Neil Archibald	
	Shelburne	Macdonell, John Edward	
	Victoria	Mackinnon, Bernard Leo	
	Yarmouth	Manara, Aldo	