

Annual Report



2016

THE COLLEGE OF PHYSICIANS AND SURGEONS OF MANITOBA

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CPSM Officials & Agents

Council

Position

President
 President-Elect
 Past President
 Finance/Treasurer
 Investigation Committee Chair

Representative

Dr. A. Vorster
 Dr. D. Lindsay
 Dr. B. Kvern
 Dr. H. Unruh
 Dr. K. Bullock Pries/Dr. B. Kvern

Public Representatives

Ministerial Appointment (Council)
 Ministerial Appointment (Council)
 Ministerial Appointment (Complaints Committee)
 Ministerial Appointment (Complaints Committee)
 Elected by Council (Complaints Committee)
 Elected by Council
 Elected by Council

Ms L. Read
 Mr. R. Dewar
 Ms A. Babaian
 Ms E. Thompson
 Rev. R. Long
 Dr. E. Boldt/Mr. J. Stinson
 Mr. R. Dawson

Employees

Position

Registrar/CEO
 Deputy Registrar

Employee

Dr. A. Ziomek
 Dr. T. Babick

External Advisors to the Council

Position

Solicitor
 Accountant

Name/Company

Mr. Blair Graham, Q.C.
 MNP LLP

Description and Structure of the College

The College of Physicians and Surgeons of Manitoba is the regulatory authority for the practice of medicine in the Province of Manitoba. It is governed by a Council, consisting of physicians elected by jurisdictions in the province, a representative from the Associate Member register (clinical assistant, physician assistant or educational register), two representatives from the University of Manitoba Faculty of Medicine, and four public representatives, two appointed by the Government of Manitoba and two elected by the Council.

The College of Physicians & Surgeons of Manitoba protects the public as consumers of medical care and promotes the safe and ethical delivery of quality medical care by physicians in Manitoba. Council governs, determines, controls and administers the affairs of the College. In accordance with its governance policy, Council governs with an emphasis on strategic leadership, including commitment to obtaining public and membership input, encouragement, delivery and viewpoints, and a clear distinction between Council and staff roles.

As stated in Council policy, the “moral owners” of The College of Physicians and Surgeons of Manitoba are the people of Manitoba. The Council is accountable to and acts on behalf of the owners as a whole, rather than being advocates for specific geographic areas or interest groups. The Council exercises the authority, granted by legislation, to self-govern the medical profession in the best interests of the public. The Council recognizes that in order to exercise this authority on behalf of the profession, it must retain a special relationship with members.

The Council has the following legislated committees:

1. **Executive Committee:** This committee acts in accordance with the authority granted in Section 35 of *The Medical Act* and in particular makes decisions on matters delegated to Executive Committee in the Bylaws of the College.
2. **Standards Committee:** This committee is responsible for the supervision of the practice of medicine by members of the College. Its role is primarily educational. It also monitors the compliance of members with the statutory requirement for continuing professional education.

Description and Structure of the College (cont'd)

3. **Program Review Committee:** This committee may investigate and inspect on behalf of the Council all diagnostic and treatment facilities in which services are performed by members in Manitoba other than those which are under the jurisdiction of provincial or municipal governments and those facilities that are appointed hospitals under *The Manitoba Hospitals Act*.
4. **Complaints Committee:** This committee is responsible for reviewing complaints or other matters referred to it and shall attempt to resolve the complaint informally if the committee considers informal resolution to be appropriate. On resolving a complaint or other matter, the Complaints Committee may provide advice to the member about the practice of medicine. Where a matter is not suitable for informal resolution, the Complaints Committee refers it to the Investigation Committee for further review.
5. **Investigation Committee:** This committee, when it receives a referral from the Complaints Committee, the Registrar or the Executive Committee, or an appeal by a complainant from a decision of the Complaints Committee, may direct that an investigation of the matter referred be held and appoint a person to conduct the investigation. After a review or an investigation, the Investigation Committee may do one or more of the following:
 - (a) direct that the matter be referred, in whole or in part, to the Inquiry Committee;
 - (b) direct that no further action be taken;
 - (c) censure the member if:
 - (i) a member of the committee has met with the member and the member has agreed to accept the censure, and;
 - (ii) the committee has determined that no action is to be taken against the member other than the censure;
 - (d) enter into an agreement with the member or accept an undertaking from the member that provides for one or more of the following:

Description and Structure of the College Cont'd

- (i) assessing the member's capacity or fitness to practice medicine;
- (ii) counselling or treatment of the member;
- (iii) monitoring or supervision of the member's practice of medicine;
- (iv) the member's completion of a specified course of studies by way of remedial training;
- (v) placing restrictions or conditions on the member's licence;
- (e) accepting the voluntary surrender of the member's licence;
- (f) taking any other action that it considers appropriate in the circumstances and that is not inconsistent with or contrary to *The Medical Act* or the bylaws.

6. **Inquiry Committee:** This committee consists of a Councillor, who is the Chair, and other members of the College, former members of the College, public representatives or other persons appointed from time to time. At least one-third of the persons appointed to the Inquiry Committee must be public representatives. On referral of a matter to the Inquiry Committee, the Chair selects a panel from among the members of the Inquiry Committee to hold a hearing. The panel is composed of at least three members, at least one of whom is a public representative.

7. **Appeal Committee:** This committee has the authority to hear and determine appeals from decisions of the Investigation Committee in accordance with *The Medical Act*. It may make any decision that in its opinion ought to have been made by the Investigation Committee, and may quash, vary or confirm the decision of the Investigation Committee or it may refer the matter back to the Investigation Committee for further consideration in accordance with any direction that the Appeal Committee may make. The President of Council selects individuals from Council for each individual appeal. Each Appeal Committee consists of three members, one of whom is a public representative.

Description and Structure of the College (cont'd)

Other Committees of the Council:

Audit and Risk Management Committee:

The Audit and Risk Management Committee provides an opinion for the Council, based on evidence required of the external auditor, as to whether the independent audit of the organization was performed in an appropriate manner. It provides an opinion to Council quarterly as to Registrar compliance with criteria specified in executive limitations policies on finance. It provides a self-monitoring report on the appropriateness of the Council's own spending, based on criteria in the Council governance process policy on Council expenses, including periodic random audit of the Council members' expenses. It provides an annual report to Council highlighting the committee's review of the audited financial statements and any other significant information arising from discussions with the external auditor. It is also charged with the responsibility to promote and monitor the risk management activities of the College and to provide advice to Council on identified risks and risk management activities.

Nominating Committee:

This committee provides a slate of two nominees for the office of President-Elect by no later than November 15 in every second year. It also provides, for approval at the Annual Meeting of the Council, a list of nominees for officers of the College, members of Council committees, chairs of Council committees, and the Councillor nominated as the Investigation Chair.

Auditor Committee:

This committee advises the College on best practices for conducting office audits. At the request of the Standards Committee or sub-committees or Investigation Committee, it will conduct audits of physicians' records in compliance with standard audit processes, for the purpose of assessing the quality of medical practice or assessing other issues as identified in the request for audit, and report in writing the findings, recommendations and opinions of the auditors to the committee or subcommittee that requested the audit.

Description and Structure of the College (cont'd)

Other Committees of the Council:

Physician Health Committee:

This is a newly created committee established by Council to operate the Health Program of the College. It can appoint Advisory Service Panels to provide this committee with advice on specific health issues such as medical marijuana or blood borne pathogens in relation to a specific member or as to matters of best practices. It also provides advice to Council with respect to trends and best practices in relation to the Health Program of the College.

Officers of the College 2015-2016

EXECUTIVE COMMITTEE

Alewyn Vorster, MB ChB, President
Daniel Lindsay, MD, President -Elect
Brent Kvern, MD, Past President
Helmut Unruh, MD, Chair, Audit (Treasurer)
Enok Persson, MB ChB, Chair, Program Review
Ira Ripstein, Chair, Complaints
Wayne Manishen, MD, Chair, Standards
Brian Postl, MD, Dean, U of M
Laurie Read (Public Councillor – Appointed)
Ex Officio 2

COMPLAINTS COMMITTEE

Ira Ripstein, MD, Chair, (Faculty Councillor)

Michael Boroditsky, MD
S.J. (Jay) Duncan, MD
Hussam Azzam, MBBS
Jacobi Elliott, MB ChB 24/06/15-16/11/15
Lou Antonissen, MD (Member Rep)
Shaundra Popowich, MD (Member Rep)
Heather Domke, MD
Morag Fisher, MB ChB
Laura Goosen (Public Rep – CPSM)
Rev. Ron Long (Public Rep – CPSM)
Arpena Babaian (Public Rep – Gov't Appt)
Eleanor Thompson (Public Rep – Gov't Appt)

AUDIT/RISK MANAGEMENT COMMITTEE

Helmut Unruh, MD, Chair

Brian Postl, MD
Robert Dewar, (Public Councillor–Govt. Appt.)
Raymond Cadieux (Public Rep–Qualified Accountant)
Ex Officio 1

AUDITOR COMMITTEE

Carol Scurfield, MD, Chair

PHYSICIAN HEALTH COMMITTEE (June 24 – Dec 31/15)

Roger Suss, MD, Chair

PHYSICIAN HEALTH COMMITTEE (Jan 1 – June 17/16)

Eric Sigurdson, MD, Chair

Roger Suss, MD
Diane Wilson-Mate – Public Representative

PROGRAM REVIEW COMMITTEE

Enok Persson, MB ChB – Chair

Eric Sigurdson, MD
Nader Shenouda, MB ChB
Iain Kirkpatrick, MD - Radiology
Ed Boldt (Public Councillor – Elected) 24/06/15-09/08/15
John Stinson (Public Councillor – Elected) 10/08/15-17/06/16
Jenisa Naidoo, MB ChB (Laboratory Medicine)
Michele Mathae-Hunter (MB Health Nominee)
Amin Kabani, MB ChB - CMO DSM
Ex Officio 1,2

STANDARDS COMMITTEE

Wayne Manishen, MD, Chair

Heather Domke, MD
Elizabeth Senderewich, MD 07/11/15-17/06/16
Nichole Riese, MD
Michael West, MD
Roger Suss, MD (Physician Health Chair)
Boshra Hosseini (Associate Member)
Richard Dawson (Public Councillor–Elected)
Jeffrey (Jeff) Sisler, MD (Associate Dean, CPD)
Katherine Stansfield (CRNM)
Ex Officio 1, 2

INVESTIGATION COMMITTEE (June 24 – Oct 31/15)

Karen Bullock Pries, MD, Chair

Brent Kvern, MD
Laurie Read (Public Councillor – Govt. Appt.)

INVESTIGATION COMMITTEE (Nov 1 – June 17/16)

Brent Kvern, MD, Chair

David Pinchuk, MD
Laurie Read (Public Councillor – Govt. Appt.)

INQUIRY COMMITTEE

Ira Ripstein, MD, Chair

NOMINATING COMMITTEE

The Committee shall consist of the President, President-Elect and Past President (even if the Past President is no longer on Council) until the election of the new President-Elect, who shall then replace the Past President

Ex Officio:

#1 President, President-Elect

#2 Registrar (non-voting)

Inquiry Committee (Panel Members) 2015-2016

Chair: Dr. Ira Ripstein

Physician members:

Dr. Amarjit Arneja

Dr. Diane Biehl

Dr. Gerry Bristow

Dr. David Brodovsky

Dr. Lydia Derzko

Dr. June James

Dr. Neil Margolis

Dr. Carry Martens-Barnes

Dr. Richard McCammon

Dr. Arnold Naimark

Dr. Diane Ramsey

Dr. Ted Redekop

Dr. Allan Ronald

Dr. F. (Rick) Ross

Dr. M. (Molly) Seshia

Dr. Valerie St. John

Dr. Murray Steinbart

Dr. Suzanne Ullyot

Dr. Alex Vajcner

Public members:

Ms Penny Bowles

Ms Eleanor Chornoboy

Mr. Herold Driedger

Ms Patsy Grant

Ms Gloria Matthes

Dr. J. Miles (PhD)

Ms Pat Murphy

Ms Annette Osted

Mr. Melvin Reimer

Ms Estelle Sures

Rev. Russ Toews

Potential Auditors (2015-2016)

Last Name	First Name	Specialty	City
Afifi	Tarek Jeremy	Dermatology	Winnipeg
Antonissen	Lou	Family Practice	Portage la Prairie
Baria	Kaikhushroo	Orthopedic Surgery	Winnipeg
Bedder	Phyllis	Family Practice	Winnipeg
Blakley	Brian	Otolaryngology	Winnipeg
Blouw	Richard	Family Practice	Winnipeg
Booy	Harold	Family Practice	Winkler
Bourque	Christopher	Neurology	Winnipeg
Boyd	April J.	Vascular Surgery	Winnipeg
Breneman	Christopher	Family Practice	Hamiota
Bretecher	Gilbert	Family Practice	Dauphin
Bueddefeld	Dieter	Family Practice	Altona
Cisneros	Nestor	Pediatrics, Clin Imm & Allergy	Winnipeg
Cleghorn	Scott Alexander	Internal Medicine	Winnipeg
Collister	Carl	Obstetrics/Gynaecology	Winnipeg
Cram	David	Family Practice	Souris
Dale	Catherine	Dentistry	Winnipeg
De Korompay	Victor	Orthopedic Surgery	Winnipeg
Dittberner	Klaus	Family Practice	Winnipeg
Doermer	Erroll	Family Practice	Winnipeg
Dolynchuk	Kenneth	Plastic Surgery	Winnipeg
Domke	Heather	Family Practice	Winnipeg
Domke	Sheila	Family Practice	Winnipeg
Drachenberg	Darrell	Urology	Winnipeg
Dupont	Jacqueline	Nuclear Medicine	Winnipeg
Dyck	Michael	Psychiatry	Winkler
Edye	Frances	Psychiatry	Winnipeg
Eggertson	Douglas	Neurology	Winnipeg
Elliott	Jacobi	Family Practice	Grandview
Erhard	Philippe	Family Practice	Winnipeg
Esmail	Amirali	Anaesthesia	Winnipeg

Potential Auditors Cont'd

Last Name	First Name	Specialty	City
Fisher	Morag	Addictions	Winnipeg
Fishman	Larry	Otolaryngology	Winnipeg
Fitzgerald	Michael	Family Practice	Virden
Fortier	Denis	Family Practice	Notre Dame
Fuchs	Graham	Family Practice	Selkirk
Galessiere	Paul	General Surgery	Steinbach
Gard	Sherry	Anaesthesia	Winnipeg
Gartner	John	Anatomical Pathology	Winnipeg
Gill	Eunice Charlene	Psychiatry	Winnipeg
Globerman	Daniel	Psychiatry	Winnipeg
Goossen	Marvin	General Surgery	Brandon
Grabowski	Janet	Pediatrics	Winnipeg
Graham	Kerr	Family Practice	Stonewall
Gray	Michael	Family Practice	Portage la Prairie
Guzman	Randy	Vascular Surgery	Winnipeg
Hardy	Brian William	Diagnostic Radiology	Winnipeg
Harris	Pat	Oncology	Winnipeg
Hawaleshka	Adrian	Anaesthesia	Winnipeg
Helewa	Michael	Obstetrics / Gynaecology	Winnipeg
Hesom	Margaret	Family Practice	Winkler
Hicks	Cynthia	Clinical Immunology & Allergy	Winnipeg
Holmes	Carol	Family Practice	Morden
Ilse	Werner	Internal Medicine / Neurology	Winnipeg
James	June Marion Eleanor	Clinical Immunology & Allergy	Winnipeg
Jansen van Rensburg	Nicholas	Family Practice	Beausejour
Juce	Karen	Family Practice	Hamiota
Kaethler	Wilfried	Family Practice	Steinbach
Karvelas	John	Urology	Winnipeg
Kellen	Rodney	Ophthalmology	Winnipeg
Kinnear	David	Family Practice	Portage la Prairie
Klassen	Donald	Family Practice	Winkler

Potential Auditors Cont'd

Last Name	First Name	Specialty	City
Kliewer	Kenneth	Family Practice	Altona
Koltek	Mark M.	Psychiatry	Winnipeg
Koodoo	Stanley	Psychiatry	Winnipeg
Kristjanson	David	Family Practice	Hamiota
Kulbisky	Gordon	Diagnostic Radiology	Winnipeg
Lane	Eric	Family Practice	Winkler
Lane	Debra	Hematological Pathology	Winnipeg
Lemoine	Gabriel	Family Practice	Ste. Anne
Lockwood	Anthony	Plastic Surgery	Winnipeg
Lotocki	Robert	Gynaecology Oncology	Winnipeg
Lucy	Simon	Anaesthesia	Winnipeg
Manishen	Wayne	Internal Medicine	Winnipeg
Matter	Michele	Family Practice	Selkirk
Menticoglou	Savas	Obstetrics - Fetal Assessment	Winnipeg
Menzies	Robert	Family Practice	Morden
Minish	Kimberley	Family Practice	Winnipeg
Munsamy	Gonasagran K.	Family Practice	Winnipeg
Naidoo	Jenisa	Chemical Pathology	Winnipeg
O'Hagan	David	Family Practice	Ste. Rose
Ong	George	Family Practice	Neepawa
Onotera	Rodney	General Surgery	Winnipeg
Padua	Raymond	Family Practice	Winnipeg
Penrose	Michael	Family Practice	Dauphin
Persson	Enok D.	Family Practice	Morden
Price	James	Family Practice	Portage la Prairie
Quesada	Ricardo	Family Practice	Portage la Prairie
Ranson	Allan	Family Practice	Hamiota
Reid	Gregory	Obstetrics/Gynaecology	Winnipeg
Reinecke	Marina	Addiction Medicine	Winnipeg
Rice	Patrick	Family Practice	Portage la Prairie
Riese	Nichole	Family Practice	Winnipeg

Potential Auditors Cont'd

Last Name	First Name	Specialty	City
Ritchie	Janet	Family Practice	Winnipeg
Ritchie	Brian Albert	Urology	Winnipeg
Ross	James	General Surgery	Portage la Prairie
Ross	Lonny L	Plastic Surgery	Winnipeg
Rusen	David	Dentistry	Winnipeg
Saranchuk	Jeff	Urology	Winnipeg
Schmidt	Daphne	Family Practice	Beausejour
Schneider	Carol	Obstetrics/Gynaecology	Winnipeg
Scurfield	Carol	Family Practice	Winnipeg
Seager	Mary-Jane	Obstetrics/Gynaecology	Winnipeg
Shepertycky	Martha	Respiratory Medicine	Winnipeg
Silver	Shane Gordon	Dermatology	Winnipeg
Simkin	Ruth	Family Practice	Winnipeg
Smith	Roy	Family Practice	Winnipeg
Smith	Hugh	InternalMedicine/Cardiology	Winnipeg
Stearns	Eric	Obstetrics/Gynaecology	Winnipeg
Stoffman	Jayson	Pediatrics/Hematology	Winnipeg
Sutherland	Eric	Anaesthesia/Pain Control	Winnipeg
Sutton	Ian	Anaesthesia/Pain Control	Winnipeg
Szwajcer	David	Internal Medicine / Hematology	Winnipeg
Taraska	Vincent	Internal Medicine / Respiratory	Winnipeg
Tenenbein	Milton	Pediatrics	Winnipeg
Thiessen	Myron	Family Practice	Selkirk
Thomson	Glen	Rheumatology	Winnipeg
Turgeon	Thomas	Orthopedic Surgery	Winnipeg
Walli	Eric	Gastroenterology/Internal Medi-	Winnipeg
Walton	Paul	Dentistry	Winnipeg
Warda	Lynne	Pediatrics	Winnipeg
Warner	Ms Ilana	Infection Control Practitioner	Winnipeg
Warrington	Richard	Clinical Immunology & Allergy	Winnipeg

Potential Auditors Cont'd

Last Name	First Name	Specialty	City
Wiens	Anthony Victor	Family Practice	Dauphin
Wiens	James	Ophthalmology	Winnipeg
Willemse	Pieter	General Surgery	Dauphin
Woelk	Cornelius	Family Practice	Winkler
Wong	Simon	Urology	Winnipeg
Woo	Vincent Curtis	Internal Medicine /Endocrinology	Winnipeg
Zabolotny	Brent	General Surgery	Winnipeg
Zacharias	James	Nephrology	Winnipeg
Zabolotny	Brent	General Surgery	Winnipeg
Zacharias	James	Nephrology	Winnipeg

Meetings Report

During the period 1 May 2015 to 30 April 2016, the following meetings were held □

- 4 Council: 24 June, 16 September, 11 December 2015; 18 March 2016
- 13 Executive Committee: 15 May, 15 June, 24 June, 26 June, 29 June, 11 August, 17 August, 16 September, 23 October, 16 November, 11 December 2015; 18 January, 18 March 2016
- 4 Appeal Committee: 14 May, 9 September, 26 November, 27 November 2015
- 9 Complaints Committee: 19 May, 16 June, 15 September, 27 October, 8 December 2015; 12 January, 2 February, 22 March, 26 April 2016
- 4 Audit/Risk Management Committee: 25 August, 19 November 2015; 25 February, 31 May 2016
- 4 Inquiry Panel: 30 November, 1 & 2 December 2015; 12 February 2016
- 6 Investigation Committee: 17 June, 2 September, 21 October, 16 December 2015; 17 February, 13 April 2016
- 4 Program Review Committee: 20 May, 9 September, 25 November 2015; 24 February 2016
- 3 Physician Health Committee: 13 January, 19 February, 6 April 2016
- 5 Standards Committee: 29 May, 9 October, 27 November 2015; 22 January, 8 April 2016
In addition: 5 meetings of Child Health Standards Committee
5 meeting of Maternal & Perinatal Health Standards Committee
10 meetings of Area Standards Committees
4 meeting of Physician Practice Enhancement Committee

56 meetings

24 meetings of subcommittees, and

4 non-hospital reviews

84

Complaints Committee Report

The Complaints Committee Panels met 9 times over the period May 1, 2015 to April 30, 2016. A total of 177 new formal complaints were reviewed from the following sources:

Patient/legal representative	161
Registrar (College) - includes those referred directly to IC	15
Other	1

The Complaints Committee closed 192 cases during the period May 1, 2015 to April 30, 2016 with the following dispositions:

Comments/No Further Action	97
Resolved by Correspondence by Medical Consultant	13
Complaint Referred to Investigation Committee (includes Registrar referrals to IC)	25
Complaint Referred to Standards Committee	0
Advice/Criticism	53
Abeyanced	0
Withdrawn cases	4

As in previous years, communication was a contributing factor in a significant number of complaints received. The Complaints Committee classified the closed complaints as follows [some cases have more than one classification]:

Breach of Trust/Behaviour	3
Breach of Trust/Sexual Impropriety	5
Communication	67
Diagnosis/Treatment	150
Advertising	0
Record Keeping	3
Systemic Problems	0

Of the 177 new complaints received during the period May 1, 2015 to April 30, 2016, the following list shows the number of complaints by geographical location of the physician:

Urban General Practitioner (Winnipeg/Brandon)	78 (44%)
Urban Non-Specialist	1 (.5%)
Urban - Specialist (Winnipeg/Brandon)	49 (28%)
Rural General Practitioner	27 (15%)
Rural Non-Specialist	1 (.5%)
Rural Specialist	1 (.5%)
Resident	1 (.5%)
Others	19 (11%)

Investigation Committee Report

The Investigation Committee met 6 times over the period May 1, 2015 to April 30, 2016 and received a total of 80 new cases during that period, from the following sources:

Complaints Committee	27 (34%)
Registrar	22 (27%)
Appeals of Complaints Committee Decision	31 (39%)

The Investigation Committee closed 90 cases during the period May 1, 2015 to April 30, 2016 with the following dispositions: (note: one case had more than one outcome):

1. Closed - No Formal Action:		
• with Letter of Criticism/Advice		32
• no further action and/or concur with Complaints Committee		46
2. Undertakings		5
Self-Directed Learning	2	
Practice Restrictions	1	
Other	1	
Retire	1	
3. Censure		1
4. Referred to Inquiry		2
5. Referred to Standards		3
6. Withdrawn		1
7. Abeyanced		0

Inquiry Committee Report

- The Inquiry Panel met 4 times between May 1, 2015 and April 30, 2016.

STATISTICAL SUMMARY

A. Inquiries completed during this fiscal year	1
B. Matters pending before the Inquiry Committee	2

Appeal Committee Report

- There were 8 appeals of Investigation Committee decisions to the Appeal Committee.

Disposition of cases reviewed by Appeal Committee:

Confirmed Investigation Committee Decision	8
Varied Decision of Investigation Committee	0
Referred back to Investigation Committee	0
Referred to Standards Committee	0
4 appeals open as of April 30, 2016	0

Measuring the Competency of Members

The College of Physicians and Surgeons of Manitoba utilizes a number of tools to review members' continuing competency. The most important of these is chart audits. Chart audits arise from a number of avenues:

- As part of the Qualifications process, new physicians on the conditional register undergo a chart audit at approximately 6 months of practice.
- The Standards Committee may direct an audit because the committee is reviewing a physician's practice.
 - Referral to Standards may come from the Investigation Committee, the Registrar, or the Executive Committee/Council.
- The Investigation Committee may order a chart audit as part of its review of a physician.
- Physicians over the age of 75 years have routine chart audits every 5 years.
- Chart audits are a significant component of accreditation surveys for non-hospital medical/surgical facilities which occur when the facilities open and every 5 years thereafter.
- The Child Health Standards Committee reviews the deaths of all patients between the ages of 29 days and 18 years.*
- The Maternal and Perinatal Health Standards Committee reviews many physician charts on a per case basis as they review maternal and perinatal morbidity and mortality.**

*The Government of Manitoba provides funding for the operation of the subcommittee on Child Health standards. Its purpose is to maintain and improve the quality of medical practice as related to child health through peer review and analysis and through education rather than discipline. It functions as a public advocacy committee when appropriate.

**The Government of Manitoba provides funding for the operation of the subcommittee on Maternal and Perinatal Health standards. Its purpose is to maintain and improve the quality of medical practice as related to maternal and perinatal health through peer review and analysis. Through education rather than discipline. It also functions as a public advocacy committee when appropriate.

Education and peer review are the two key components that assist continuing physician competence. In addition to the above educational audits, there are several other processes which act to ensure physician quality of care.

Measuring the Competency of Members Cont'd

- All physicians participate in Continuing Professional Development. All specialists must participate in the Maintenance of Certification Program of the Royal College of Physician & Surgeons of Canada. All family physicians must participate in the MainPro program of The College of Family Physicians of Canada.
- The Registrars provide many hours of educational sessions each year to the Faculty of Medicine at the University of Manitoba related to professional and ethical issues.
- Issues related to prescribing are reviewed with individual physicians. These may arise from complaints, Standards matters, calls to the Registrar from the Manitoba Pharmaceutical Association or comments from other physicians.
- Physician members are legally and ethically required to report colleagues, who may be at risk to the public, to the Registrar. These individuals are then reviewed and appropriate educational action is taken.
- The College mandates participation in a review program called MPAR [Manitoba Physician Achievement Review]. MPAR is a multi-source performance assessment and feedback program that provides physicians with a view of their medical practice. Every 7 years doctors ask patients, medical colleagues and co-workers to complete a survey about their performance. Survey topics range from medical expertise and management ability to communication skills and success in relating to those with whom they work and those whom they serve. Feedback is presented to physicians in a confidential report that contains individualized data and comparisons to the average scores of physicians with a similar practice. This report helps doctors to build on their strengths and to identify opportunities for improvement.

Applications for Registration Received & Their Disposition

Number of applications received : 418

Number registered: 326

194 on the Educational Register; 113 on the MB Medical Register (of which 17 were conditional);
16 Clinical Assistants, 3 Physician Assistants

Did meet the requirements, not yet registered: 18

Did not meet the requirements: 5

Unknown at time of report whether or not met the requirements: 69

Physician Resource Statistics

CERTIFICATES OF REGISTRATION ISSUED

During the period 1 May 2015 to 30 April 2016, 175 persons were issued registration and a full licence to practise. In total there were 194 certificates issued of which 17 were for a resident licence, 2 did not practise here.

TABLE I MEDICAL PRACTITIONERS GRANTED REGISTRATION AND FULL LICENCE ANNUALLY IN MANITOBA 2007 - 2016 with Country of Qualification

Year	Man	Can	USA	UK&I	Eur	Asia	Aust	NZ	Afr	C/S Am	Total
2007	41	31	0	8	4	40	1	0	29	3	157
2008	45	48	2	7	8	40	0	0	25	6	181
2009	49	26	2	5	2	28	1	0	20	2	135
2010	33	30	1	7	10	46	1	0	22	3	153
2011	56	42	6	5	10	39	2	1	21	7	189
2012	39	30	2	3	8	24	2	0	20	5	133
2013	61	42	2	4	9	28	3	1	15	6	171
2014	64	44	2	6	9	44	6	1	16	7	199
2015	56	42	0	9	9	33	3	0	23	4	179
2016	60	46	0	8	15	24	4	0	11	7	175
Total (10 Yr)	504	381	17	62	84	346	23	3	202	50	1672
New Practitioners % of Total											
2016	34.3	26.3	0.0	4.6	8.6	13.7	2.3	0.0	6.3	4.0	100%

Percentages may not be exact due to rounding

NUMBER OF LICENSED PRACTITIONERS IN MANITOBA AS AT 30 APRIL 2016

TABLE II NUMBER OF LICENSED MEDICAL PRACTITIONERS IN MANITOBA 2007-2016

Year	Winnipeg	%	Outside Winnipeg	%	Totals	Net Gain Net Loss(-)
2007	1688	74.3	584	25.7	2272	54
2008	1722	74.1	603	25.9	2325	53
2009	1788	75.1	594	24.9	2382	57
2010	1839	77.1	576	22.9	2415	33
2011	1870	75.7	602	24.3	2472	57
2012	1931	76.1	607	23.9	2538	66
2013	1979	76.1	620	23.9	2599	61
2014	2055	76.6	627	23.4	2682	83
2015	2116	77.0	632	23.0	2748	66
2016	2122	76.7	646	23.3	2768	20

The total of 2768 includes 52 fully licensed residents. There is no data on how many actually “moonlight”, or to what extent.

Physician Resource Statistics Cont'd

The following table shows the possible influence of this resident population on the number in active practice.

(Full Licence: FL; Resident Licence: RL)

	<i>FL</i>		<i>Subtotal</i>	<i>RL</i>	<i>Total</i>
2011	2456	46	2502	22	2524
2012	2475	63	2538	20	2558
2013	2538	61	2599	19	2618
2014	2621	61	2682	27	2709
2015	2695	53	2748	24	2772
2016	2716	52	2768	25	2793

EDUCATIONAL REGISTER

Postgraduate physicians in training programs are now referred to as residents. They may be pre-registration (Educational Register) or they may have met the registration requirements and are eligible for an independent licence. This latter category of residents may opt to practise only within their residency program (resident licence) or may obtain a full licence.

	2016	%
Medical Students	448	
Physician Assistant Students	24	
Postgraduate trainees	504	
Total on Educational Register	976	92.7
On Resident Licence	25	2.4
Full Licence	52	4.9
TOTAL	1053	100.0

DISTRIBUTION OF PRACTITIONERS

The following tables analyse the composition of the physicians in Manitoba by various breakdowns.

TABLE III

DISTRIBUTION OF MEDICAL PRACTITIONERS BY COUNTRY OF QUALIFICATION as at 30 April 2016 (as a percentage)

	Winnipeg	Brandon	Rural	Resident
%	2122	141	505	25
Man	54.7	27.7	39.0	36.0
Can	17.0	17.7	8.9	48.0
Total Canada	71.7	45.4	47.9	84.0
USA	0.7	0.7	0.4	0.0
UK & Irel	3.5	4.3	5.5	4.0
Eur	4.0	2.1	3.4	0.0
Asia	12.3	29.8	30.3	4.0
Aust/NZ	0.5	0.7	1.2	0.0
Afr	5.1	13.5	8.9	4.0
S.Am	2.3	3.6	2.4	4.0

Percentages may not be exact due to rounding.

Physician Resource Statistics Cont'd

TABLE IV PERCENTAGE OF MEDICAL PRACTITIONERS IN MANITOBA AS TO COUNTRY OF QUALIFICATION

	2016
Manitoba Graduates	50.4
Other Canadian Graduates	15.5
TOTAL CANADA	65.9
United Kingdom & Ireland	3.9
Asia	16.5
Other	13.7

TABLE V GEOGRAPHIC DISTRIBUTION OF FEMALE PRACTITIONERS

	Winnipeg	Brandon	Rural	Total	Resident Licence
1982	213	8	44	265	51
2016	764	43	187	994	15

35.9% of fully licensed physicians are female. 36.1% of practitioners in Winnipeg are women, 31.9% in Brandon and 36% in rural Manitoba. 60% of those with a residency licence are female. During the past 34 years there has been an increase of 551 women in Winnipeg, 35 in Brandon and 143 in the remainder of the province.

TABLE VI AGES OF DOCTORS RESIDING IN MANITOBA AS AT 30 APRIL 2016

	Winnipeg	Brandon	Rural	Total	
Over 70	118 (5.6)	9 (6.4)	21 (4.2)	148	(5.4)
65 - 70	182 (8.6)	11 (7.8)	33 (6.5)	226	(8.2)
56 - 64	468 (22.1)	38 (27.0)	96 (19.0)	602	(21.8)
46 - 55	562 (26.5)	36 (25.5)	130 (25.7)	728	(26.3)
36 - 45	591 (27.9)	34 (24.1)	132 (26.1)	757	(27.4)
31 - 35	173 (8.2)	9 (6.4)	74 (14.7)	256	(9.3)
30 or under	28 (1.3)	4 (2.8)	19 (3.8)	51	(1.8)

Percentages (shown in brackets) may not be exact due to rounding

Physician Resource Statistics Cont'd

MANPOWER CHANGES from 1 May 2015 to 30 April 2016

TABLE VII ADDITIONS AND DELETIONS

Deletions includes deaths, retirements, erasures, and transfers to Residency Licence.
 Additions are those entering who initiate a licence to practise and includes those who were previously registered.

ADDITIONS 2016	AGE	DELETIONS 2016
42	30 or under	9
105	31 - 35	63
113	36 - 45	104
35	46 - 55	42
18	56 - 64	32
16	65 - 70	32
5	over 70	32
334		314
YEARS SINCE QUALIFICATION		
95	5 or less	30
93	6 - 10	68
109	11 - 30	124
37	over 30	92
334		314
YEARS SINCE REGISTERED IN MANITOBA		
256	5 or less	149
25	6 - 10	41
30	11 - 30	59
23	over 30	65
334		314
PLACE OF QUALIFICATION		
104	Manitoba	80
90	Canada	81
2	USA	2
18	UK & Ireland	23
23	Europe	19
54	Asia	70
4	Australia/New Zealand	0
22	Africa	25
17	C/S America	14
334		314

Physician Resource Statistics Cont'd

DEATHS or DELETIONS 2016

Deaths	3
Transferred to Residency Licence	10
Removed from Register/Suspended	0
No Longer Practising/Retired	48
DEPARTURES to: (Total)	253
Atlantic Provinces	8
Quebec	8
Ontario	61
Saskatchewan	3
Alberta	18
British Columbia	42
NWT/NU	0
TOTAL CANADA	140
U.S.A.	7
U.K. & Ireland	0
Others/Unknown	106

SPECIALIST REGISTER

There were 1407 specialists enrolled on the Specialist Register as at 30 April 2016.

CERTIFICATES OF PROFESSIONAL CONDUCT (COPC)

During the period 1 May 2015 to 30 April 2016, 724 COPCs were issued. These are usually required for the purposes of obtaining registration in another jurisdiction. The following table indicates the purposes for which the certificates were issued and a comparison with 2015.

Provincial Licensing Bodies:	2016	2015
British Columbia	160	147
Alberta	121	122
Saskatchewan	24	28
Ontario	100	135
Quebec	3	3
Prince Edward Island	1	2
New Brunswick	9	6
Nova Scotia	16	9
Newfoundland/Labrador	13	6
Northwest Territories/Nunavut	17	13
Yukon	2	2
Australia & New Zealand	9	10
Overseas/Other	26	20
U.S.A.	32	42
Health Workforce Secretariat	83	102
RHAs (previously combined with HWS)	56	
CFPC	52	43
TOTALS	724	690

Bylaw Changes May 1, 2015—April 30, 2016

Bylaw 1

Schedule F – amendment of Certificate of Professional Conduct

Section 15.1(b) Collection of information of Application for Licensure

Articles that require amendments for the new Presidential Term in Office

Article 8.1 - establishment of a Physician Health Committee

Schedule F – amendment to COPC

Schedule G be repealed and the Code of Ethics substituted as Schedule G

Article 21 and any Article that required the change from Code of Conduct to Code of Ethics

Schedule J – amended to be in agreement with the College of Family Physicians and the Royal College of Physicians & Surgeons of Canada.

Section 16.1 - Renewal of Licensure – guilty pleas or findings of guilt and litigation history pertaining to the practice of medicine.

Section 17.3 - Section Continuing Disclosure Requirements – Advise in writing any changes within 30 days.

Article 8.3(i) – substitute member on PRC.

Article 19.8 – Fee Rebate

Article 19.8 – application for Fee Rebate

Repeal of Article 24 – Keeping of Medical Records.

Article 8.3(d) – President and President Elect are ex officio members of all committees except CC, IC, Appeal, Inquiry and PHC.

Bylaw 6

Article 1 – Definitions.

Article 2 – delete Bloodborne Pathogen Sub-Committee.

Article 15(1) 15(2) and sub-sections – Delete Physician Health Program.

Article 2(1)(d) –delete Non-Hospital Medical-Surgical Facility Review Sub-Committee.

Schedule D – add Orthopedic Surgery Provincial Standards Sub-Committee.

Article 11(2) – allow the Provincial Standards Chair to participate in the WRHA Standards Committee.

Article 2(1)(g) – add each provincial standards subcommittee identified on Schedule D

Bylaw 11

New Bylaw created to incorporate the Standards of Practice, most of which were formerly Statements or Guidelines. Amendments to:

Standards of Practice now contained in the new Bylaw 11

Code of Ethics, formerly the Code of Conduct