

PROFESSIONAL PRACTICE

Practicing Medicine in Saskatchewan

The contents of this section outline the administrative details that must be dealt with in the early stages of your settlement in Saskatchewan.

Licensing

The Registration Department at the College of Physicians and Surgeons of Saskatchewan (CPSS) is responsible for issuing Saskatchewan licenses to eligible physicians and establishing professional corporations.

To be eligible for licensure with the College you must:

- Submit a curriculum vitae for review by the College to determine if you meet the requirements of the College bylaws
- Satisfy the Registrar of your ability to communicate (written and oral) in one of Canada's official languages
- Satisfy the Registrar that you are of good character and reputation, that your name has not been struck from the register of any licensing authority and that you are not or have not been suspended by any licensing authority

Although physicians with international medical credentials may not meet the requirements for full, unrestricted licensure, they may be granted alternative forms of licensure such as a temporary license (locum tenens permit), provisional license or special license.

Temporary licenses (locum tenens permit) are limited to 12 months in length and cannot generally be extended or renewed. The physician practicing under this type of license must be sponsored by a physician who has full or provisional licensure with the College.

Provisional licenses are available to **family physicians** with 24 months of approved postgraduate training and either full licensure with the country in which they took their training or have passed the MCCEE, and to **specialists** who are certification eligible with the Royal College of Physicians and Surgeons of Canada. Physicians working under this type of license make a commitment to remain in a named Saskatchewan community for three years and are required to pass the applicable examinations in the specified times.

There are several categories of special license that are generally issued to physicians with speciality credentials. The categories include: specialists who have full licensure in their country of training and who agree to remain in a specified community and who are required to complete the specified examinations within the specified times; psychiatrists, oncologists, and Medical Health Officers for whom a special request has been made by the Saskatchewan Minister of Health and whose licenses will only be valid while they continue to work for the employer who hired them; and specialists who are not certification eligible but meet other defined criteria such as an unmet need for their services.

Revalidation of Licensure

As of January 1, 2007, all Saskatchewan physicians who hold full, provisional or special licenses are required to engage in meaningful continuing professional learning activities as defined by either the College of Physicians and Surgeons of Canada or the College of Family Physicians of Canada. In order to ensure that this requirement is fulfilled, physicians must:

- Enrol in the Continuing Professional Development (CPD) program of the appropriate national college by the end of 2007
- Meet the study credit requirements of the CPD program
- Provide proof at the end of the revalidation cycle (five years) that they have met the study credit requirements for the CPD program in which they are enrolled if they wish to renew their licenses

Further information about the study credit requirements for each of the national colleges can be found in the “Professional Development” section of this Guide on pages F-2 through F-4.

Additional information about the licensing process can be found at www.quadrant.net/cpss/registration/register.html or by calling 1-800-667-1668.

A presentation from a College of Physicians and Surgeons of Canada representative is included in the International Medical Graduates Orientation Conference. At that time, further details about licensure and revalidation will be provided. As well, handouts for this presentation will be included in the registration package you will receive.

Examination Process for Licensure of International Medical Graduates

Clinicians Assessment and Professional Enhancement (CAPE)

The College of Physicians and Surgeons of Saskatchewan has implemented the Clinicians Assessment and Professional Enhancement (CAPE) process as the first step International Medical Graduate family physicians will be required to complete in obtaining their unrestricted licensure. CAPE is offered by the Faculty of Medicine at the University of Manitoba in Winnipeg for the purpose of evaluating the medical knowledge and skills of International Medical Graduates.

The College of Physicians and Surgeons of Saskatchewan will arrange the assessment for International Medical Graduates.

CAPE is a three day assessment process consisting of four components:

- 150 single-best answer multiple choice questions
- 17 therapeutic assessment case scenarios
- 2 or 3 structured oral interview cases
- 10 standardized patient scenarios

Candidates who successfully complete the CAPE may be eligible for a provisional license from the College of Physicians and Surgeons of Saskatchewan. Candidates requiring additional training prior to licensure will be referred to the Division of Continuing Professional

Learning, College of Medicine, University of Saskatchewan, for individualized programming designed to address the identified areas of deficiency.

A presentation from an internationally trained physician who has successfully completed the CAPE exam is included in the International Medical Graduates Orientation Conference. At that time, further details about the examination and preparation suggestions will be provided. As well, handouts for this presentation will be included in the registration package you will receive.

Medical Council of Canada Examinations

The Medical Council of Canada, established in 1912 by authority of the Canada Medical Act, maintains a national registry of physicians and their qualifications throughout their professional careers. This registry is known as the Licentiate of the Medical Council of Canada (LMCC), and registration in it is required by the thirteen medical regulatory authorities in Canada for licensure.

To become a Licentiate of the Medical Council of Canada and be registered in the Canadian Medical Register, physicians must successfully complete both the Medical Council of Canada Qualifying Examination Part I and the Medical Council of Canada Qualifying Examination Part II.

Medical Council of Canada Evaluating Examination (MCCEE)

International Medical Graduates are required to successfully complete the Medical Council of Canada Evaluating Exam prior to writing the Medical Council of Canada Qualifying Examinations.

The MCCEE consists of 324 multiple choice questions presented in two booklets of 162 questions each. It is administered in two 3¹/₂ hours sessions – one in the morning and one in the afternoon.

International Medical Graduates who are specialists certified by a member board of the American Board of Medical Specialties may request an exemption for the MCCEE.

Additional information about the MCCEE, including the examination schedule and frequently asked questions, can be found at www.mcc.ca/english/examinations/evaluating.html.

Medical Council of Canada Qualifying Examinations (MCCQE) Part I

The MCCQE Part I is a one day computer-based test designed to assess problem-solving and clinical decision-making skills.

During the morning session, candidates are allowed up to 3¹/₂ hours to complete 196 multiple-choice questions. This component of the exam consists of seven sections with 28 questions per section. Each multiple-choice question has a stem and five options, of which only one is the correct answer.

The afternoon portion of the exam is the clinical reasoning skills (CRS) component which consists of up to approximately 60 cases, with one to four questions each. Each candidate has a maximum of four hours to complete this portion of the examination.

A complete information booklet can be downloaded at www.mcc.ca/english/examinations/qualifying_e1.html.

Medical Council of Canada Qualifying Examinations (MCCQE) Part II

The MCCQE Part II is an Objective-Structured Clinical Examination (OSCE) which assesses the knowledge, skills and attitudes essential for medical licensure in Canada. It is comprised of a series of clinical stations at which candidates are expected to interact with a Standardized Patient in the same manner as they would interact with actual patients while being observed by a Physician Examiner. Although the examination is approximately three hours long, candidates should plan to be at the examination site for a minimum of 5¹/₂ to six hours.

Successful completion of the MCCQE Part I examination is a prerequisite for writing the MCCQE Part II examination.

A complete information booklet can be downloaded at www.mcc.ca/english/examinations/qualifying_e2.html.

Responsibilities of Saskatchewan Physicians

The information package provided by the College of Physicians and Surgeons of Saskatchewan contains a number of documents that outline the legal, ethical and moral responsibilities of Saskatchewan physicians. These documents include:

- The Code of Ethics for Saskatchewan Physicians, which focuses on the core activities of medicine and is based in the fundamental principles and values of medical ethics. The Code details your fundamental responsibilities, responsibilities to the patient, initiating and dissolving patient-physician relationships, communication, decision making and consent, privacy and confidentiality, research, responsibilities to society, responsibilities to the profession and responsibilities to oneself
- The policy on Physician Disclosure of Adverse Events and Errors
- The bylaws defining unbecoming, improper, unprofessional or discreditable conduct, maintenance of insurance, medical records and the minimum standards for written and verbal medication prescriptions issued by physicians
- The report detailing the recommendations pertaining to sexual abuse or misconduct in a relationship with a patient or former patient
- The policy on medical practice coverage
- The guidelines for the “After Hours Treatment Size Package System of Pharmacy Service”
- The Coroners Act, 1999

It is your responsibility to ensure that you have read and understand these documents pertaining to the practice of medicine in Saskatchewan.

Various presentations from a College of Physicians and Surgeons of Saskatchewan representative that refer to these materials are included in the International Medical Graduates Orientation Conference. As well, handouts for these presentations will be included in the registration package you will receive.

Medical Malpractice Insurance

All physicians practicing in Saskatchewan must have medical malpractice insurance, either through membership in the Canadian Medical Protective Association (CMPA) or through a policy of professional malpractice insurance with an insurance company registered to do business in Saskatchewan that provides a minimum coverage of two million dollars for each occurrence.

Further information about applying for membership in the CMPA is contained in the “Professional Organizations” section of this document.

The Saskatchewan Medical Association provides its members with reimbursement for medical malpractice insurance premiums through the CMPA Reimbursement Fund. Eligible physicians, who are working under either fee-for-service or a government sponsored alternate payment project, may complete a one-time registration package available at www.sma.sk.ca/programs/CMPAFund.aspx.

Additional information can be found at:

- www.cmpa.org or by calling 1-800-267-6522
- www.sma.ca or by calling 1-800-667-3781

Registration for Fee-for-Service

Although some Saskatchewan physicians will have salaried positions, the majority of physicians work under a fee-for-service agreement with Saskatchewan Health. In order to claim fees for insured fee-for-service services, physicians must register with the Medical Services Branch of Saskatchewan Health. The fee-for-service services are described in the brochure “It’s For Your Benefit A Guide to Health Coverage in Saskatchewan” included in the information you received from the College of Physicians and Surgeons of Saskatchewan. This brochure can also be downloaded at www.health.gov.sk.ca/mc_dp_skhealthbooklet.pdf.

An application form for registration with the Medical Services Branch is included in the information you received from the College of Physicians and Surgeons of Saskatchewan.

The College of Physicians and Surgeons of Saskatchewan submits licensed physicians’ names to the Medical Services Branch on a regular basis. At the same time, they will identify whether or not the physician is a specialist and whether they are entitled to bill for special procedures such as stress testing, ultrasound, cancer surgery, etc.

Upon completion of the registration process, each physician is assigned a billing number that must be used on all claims submitted to the Medical Services Branch.

The Payment Schedule for Physician Service can be downloaded at www.health.gov.sk.ca/info_center_publications_mshr.html.

The “Introduction to Billing for Physicians in Saskatchewan” brochure is included in the information you received from the Saskatchewan Medical Association. The SMA also

provides billing advice and assistance, which can be accessed by contacting Practice Support at the SMA (1-800-667-3781).

For additional information, you can also contact the Medical Services Branch at (306) 787-3475 in Regina or by calling toll free at 1-800-667-7523.

A presentation from a Medical Services Branch representative is included in the International Medical Graduates Orientation Conference. At that time, further details about registration for billing and common billing problems will be provided. As well handouts of the presentation will be included in the registration package you will receive.

Medical Staff Appointments and Clinical Privileges

Physicians are required to apply for medical staff appointments with their respective health regions before they can practice in the facilities of that health region. Eligibility and/or approval for licensure and registration by the College of Physicians and Surgeons of Saskatchewan are required prior to making this application.

The need to standardize the processes and procedures related to medical staff appointments has been recognized as a priority. Consequently, Saskatchewan Health has developed the document “Model Practitioner Staff Bylaws” (May 2006) that outlines these requirements in significant detail. Each of the regional health authorities will complete the approval of bylaws and implement them in the near future.

The senior medical officer of the regional health authority will provide applicants with a copy of the Bylaws when they express an intention to apply for a medical staff appointment. The application for an appointment must include, among other information:

- An indication of the category being sought (detailed in the Bylaws) and the privileges requested
- An up-to-date curriculum vitae
- Statements and information detailing completed proceedings, criminal proceedings or convictions, pending adverse decisions or out-of-court settlements
- Information regarding any physical or mental impairment or health condition
- Evidence of current license or proof of eligibility to obtain a license from the CPSS and, where applicable, other certifications
- Evidence of membership in the CMPA or equivalent professional liability insurance
- Results of a current Criminal Records Check or a notarized copy of the Police Clearance Certificate from the applicant’s country of origin
- Signed consents and directions for disclosure of information from a variety of sources

Physicians will be required to complete an annual application for reappointment. Recommendation for special privileges must be obtained from the College of Physicians and Surgeons of Saskatchewan prior to the performance of the procedure. **Performing these procedure(s) without prior approval may result in an investigation, reprimand or suspension.**

Further information about applying for medical staff appointments and clinical privileges can be obtained by contacting the health regions directly.

The web sites for the regional health authorities are:

- Athabasca Health Authority (www.athabascahealth.ca)
- Keewatin Yatthe (www.kyrha.ca)
- Mamawetan Churchill River (www.mcrrha.sk.ca)
- Prairie North (www.pnrha.ca)
- Prince Albert Parkland (www.paphr.sk.ca)
- Kelsey Trail (www.kelseytrailhealth.ca)
- Heartland (www.hrha.sk.ca)
- Sunrise (www.sunrisehealthregion.sk.ca)
- Cypress (www.cypressrha.ca)
- Five Hills (www.fhhr.ca)
- Sun Country (www.suncountry.sk.ca)
- Saskatoon (www.saskatoonhealthregion.ca)
- Regina Qu'Appelle (www.rqhealth.ca)

Medical Practice Management

Establishing a medical practice is a complex process and will be further complicated by an international medical graduate's lack of familiarity with Saskatchewan and Canadian workplace expectations. There are, however, a number of supports available to physicians which can help them deal with the issues and challenges involved in creating a profitable medical practice.

Practice Solutions™, a Canadian Medical Association (CMA) technology and practice management company, can provide assistance with the tasks such as:

- Negotiations for clinic and office space
- The design and construction management of new and renovated facilities
- The development of business plans
- Implementing information technology in the office
- Maximizing practice profitability
- Assessing billing and scheduling software
- Implementing appropriate human resources practices

Practice Solutions™ also has a variety of resources that physicians can access such as:

- The Practice Solutions™ Hotline at 1-800-361-9151, through which you can get a 30 minute free telephone consultation
- On-site consulting
- Self-help modules on a variety of practice management topics that can be downloaded at www.cma.ca
- Practice management seminars for which the dates and locations can be found at www.cma.ca

Additional information about the services provided by Practice Solutions™ can be found at www.practicesolutions.ca or by calling 1-800-361-9151.

Should you decide to incorporate your medical practice, the College of Physicians and Surgeons of Saskatchewan can provide guidance for this process. The information about professional incorporation can be downloaded at www.quadrant.net/cpss/college/corpinfo.html.

The CMA also provides both personal and professional financial management assistance through MD Management. Assistance can include ensuring that you have adequate life and disability insurance, informing you about taxation issues (i.e. saving for the first year of provincial and federal taxes and setting up a quarterly payment schedule for subsequent years), helping you plan for retirement and establishing education savings plans for your children.

MD Management and the SMA have a number of financial products that physicians can access as well. Additional information on these financial products can be accessed at www.sma.sk.ca or by calling 1-800-667-3781.

Workplace Standards

Canadian workplace standards and expectations may be very different from those you have experienced previously. These workplace standards and expectations not only apply to you but to the employees you work with in your medical practice and other health care facilities.

Federal and provincial laws are in place to protect workers and employers by establishing things such as minimum wage requirements, health and safety standards, hours of work, maternity leave, and paid vacation leave.

Additional information about labour relations and labour standards can be found at www.labour.gov.sk.ca.

Human rights laws are designed to protect all residents from unfair treatment on the basis of sex, race, religion, disability or age. These laws are applicable to our interactions with others with regard to wide range of areas ranging from housing and education to public services and employment. It is, therefore, expected that all workplaces will ensure that both employees and the people who receive services at that workplace are treated with the appropriate level of respect and dignity.

Additional information about human rights can be accessed from the Saskatchewan Human Rights Commission at www.gov.sk.ca/shrc.

In addition to these legislated workplace standards, many Canadian employers provide their employees with extended health benefits that offset the costs associated with health care services not included in the *Canadian Health Act*. The SMA information package contains information about group benefit plans for you, your family members and employees.

Privacy Legislation

The Saskatchewan Health Information Protection Act (HIPA) governs the collection, use and disclosure of personal health information. It is the responsibility of physicians to ensure that they and their staff understand and comply with this legislation.

A number of resources are available to assist physicians in this endeavour. These resources include:

- the Privacy Toolkit which can be downloaded at www.sma.sk.ca/privacy or www.quadrant.net/cpsc
- the HIPA website at www.qp.gov.sk.ca/documents/english/Statutes/Statutes/HO-021.pdf
- the Office of the Information and Privacy Commissioner of Saskatchewan at www.oipc.sk.ca
- the CMA privacy resources at www.cma.ca/staticContentHTML/NO/12/HIT/protection-health-info/pdf/privacy-handbook.pdf.

A presentation about the Health Information Protection Act (HIPA) is included in the International Medical Graduates Orientation Conference. At that time, further details about the Code of Ethics under which physicians operate and HIPA will be provided. As well, handouts of the presentation will be included in the registration package you will receive.

Quality Assurance

Quality assurance is the systematic process by which health region services are reviewed to determine if they are meeting specified criteria. A number of different mechanisms can be implemented to assist in this process. These mechanisms can include:

- clinical department meetings
- grand rounds
- Morbidity and Mortality Rounds
- Critical Incident Reporting
- Root Cause Analysis (RCA).

Each regional health authority (RHA) also has a Quality of Care Coordinator (QCC) who is responsible for:

- assisting individuals and/or their families with questions or concerns about health services in their region
- ensuring individuals are informed about their rights and options
- recommending changes and improvements to enhance the quality of health services delivered in the region based on their findings and trends of concerns raised.

A presentation about quality assurance is included in the International Medical Graduates Orientation Conference. At that time, further details will be provided. As well, handouts of the presentation will be included in the registration package you will receive.

Quality Improvement

The Health Quality Council encourages quality improvement activities at all levels of Saskatchewan's health care system. If you are interested in learning more about what quality improvement activities are taking place in the province or you wish to include quality improvement strategies in your practice, you can download additional information at www.hqc.sk.ca.

Physician Support Programs

The Saskatchewan Medical Association provides a number of programs and services designed to support and encourage physician health and well-being. These programs and services include:

- Saskatchewan Physician Support Program, which assists physicians facing physical, emotional, personal or financial stresses
- Member Advisory Committee whose activities supplement the services provided by the CMPA
- Medical Benevolent Society, which provides financial assistance to physicians, medical students, their surviving spouses and/or dependent children.
- Parental Leave Program, which provides benefits for maternity, paternity and/or adopted child care leave.
- Rural Relief Program
- Weekend Relief Program

Additional information about these and other programs and services provided by the SMA are included in the package of information you received from the SMA and/or can be downloaded at www.sma.sk.ca.

Patient Care in Saskatchewan

Multiculturalism is an essential component of Canadian life and Saskatchewan is definitely a province of diversity.

Many of the people you will encounter in your practice come from families whose origins are outside of Canada, either in the recent or distant past. You may find that some of your patients have chosen to retain aspects of their homeland's culture such as special foods, dance, religion or other cultural practices while others have chosen to integrate themselves into the Canadian mainstream as they see it.

You may also find that the community in which you are living is identified by the majority of its original immigrants or settlers, and that their cultural practices permeate the environment. In other communities, there may be two or more cultures represented and, despite having been in Canada for generations, there may still be competition and/or friction between these cultures.

The cultural diversity of Saskatchewan is not limited to those who have immigrated to this country. There are many different cultural groups within the Aboriginal populations of Saskatchewan. For example, the Aboriginal peoples of northern Saskatchewan are not of the same group as the southern Aboriginal peoples - much like the Scandinavian peoples

with their various “nationalities” that are grouped under one umbrella term. There will also be differences arising from whether the Aboriginal peoples you are working with have been raised in a traditional or a western environment.

While there may be subtle variations in the belief systems of these Aboriginal groups that are not readily identifiable to those from outside of the groups, most Aboriginal belief systems emphasize the achievement of balance and wellness in mental (intellectual), physical, emotional and spiritual areas of life.

Saskatchewan physicians, even those raised here, need to be sensitive to our cultural diversity and willing to learn about and from the people they are caring for. Essential components of this sensitivity and willingness to learn include listening without judgment and prejudice, recognizing the socio-economic realities of the community (such as poverty) that may lead to unhealthy choices, building relationships based in trust and respect and working with the patients to address their needs.

In addition to the multiculturalism of Canada, its citizens enjoy levels of personal freedom and privilege that may result in greater levels of confidence in interacting with medical professionals than you have previously experienced. For example, it is not unusual for patients to arrive in their physicians’ offices with research about the condition with which they have been diagnosed or to question a treatment plan. These actions do not imply a lack of respect for the physician, but rather an ownership of their own health and well-being and a wish to be active partners in their own health. This responsibility for personal health and well-being is actually encouraged by the Canadian health care system.

A presentation on cultural sensitivity is included in the International Medical Graduates Orientation Conference. At that time, further details about this topic will be provided. As well, a handout of this presentation will be included in the registration package you will receive.

Population Health

The Canadian collaborative care model broadens the physician’s focus from the individual to the family and community in which that individual lives. This broadened perspective, called population health, encompasses the entire range of factors that determine the health of individuals and the entire population.

The Population Health Branch, which is responsible for the assessment, promotion and protection of the health of Saskatchewan residents, is divided into the four units:

- The **Communicable Disease Control Unit**, which is responsible for the collection, compilation and analysis of information about the 70 communicable diseases reportable by law in Saskatchewan. The infant, pre-school, school and at-risk persons immunization programs are coordinated by this unit.

The information package provided by the College of Physicians and Surgeons of Saskatchewan contains information concerning the diseases which are reportable under the Public Health Act, 1994. The information package also includes suggestions for counselling patients about HIV prevention and testing.

- The **Disease Prevention and Health Protection Unit**, which is responsible for the development and implementation of legislation, regulations, policies and guidelines related to the Public Health Act. Areas that are under the umbrella of this unit include public health nursing, dental health, food safety and environmental health.
- The **Epidemiology, Research and Evaluation Unit** which is responsible for public health research, evaluation and surveillance for the prevention and control of disease, injury and disability.
- The **Health Promotion Unit**, which provides leadership and support to the health regions in the development of health promotion models and strategies.

Additional information about the activities of the Population Health Branch can be found at www.health.gov.sk.ca/ph_br_population_health.html.

There are aspects of patient care which, while not part of the responsibilities of the Population Health Branch, do have a potential impact on families and communities. In these situations, a variety of Canadian and provincial legislations mandate the reporting of the problem to the appropriate authority. The package you received from the College of Physicians and Surgeons of Saskatchewan contains information about the following:

- Fitness to drive - Physicians are required by law to report the name, address and condition of any patient they judge to be suffering from a condition that will make it dangerous for that person to operate a motor vehicle to the Saskatchewan Government Insurance Medical Review Unit. Patients who are reported under this requirement will be assessed for their fitness to drive.
- Fitness to fly - Physicians are also required to provide medical information about patients who hold Canadian aviation documents.
- Child Abuse – Two provincial acts, *The Child and Family Services Act* and *The Emergency Protection for Victims of Child Sexual Abuse and Exploitation Act*, influence when physicians are required to report child abuse and child/youth sexual abuse. The age for consensual sexual activity is currently 14 years in the *Criminal Code of Canada*. Two consenting young adults under the age of 14 can, however, engage in sexual activity if they are both older than 12, there is less than two years age difference between them, and neither is in a position of responsibility or authority over the other.

When physicians report communicable diseases, fitness to drive, fitness to fly and child abuse concerns, it is imperative that they include documentation in their medical records such as:

- The subjective and objective observations that led them to conclude there was something that needed to be reported.
- Details about when and to whom they made their report. They may wish to include a copy of any letters or forms that were sent.

A presentation from a Population Health Branch representative and a presentation about determining fitness to drive are included in the International Medical Graduates Orientation Conference. At that time, further details about these issues will be provided. As well, handouts of these presentations will be included in the registration package you receive.

Medical Record Keeping

Medical record keeping may be another area in which Saskatchewan differs from where you have practiced in the past. Some of the differences will be the result of Medicare and the Health Information Privacy Act; others may have their origins in the social programs we have in Saskatchewan, and still others may represent differences in the way in which medical record keeping was approached in your medical training.

Physicians may choose to chart their patient care either with the traditional 'pen and paper' or, increasingly, they may choose to use electronic medical record keeping (EMR) technologies.

There are a number of electronic medical record keeping technology vendors currently providing software packages. These software packages are capable of providing a physician with electronic tools for medical record keeping, scheduling and billing technology. The SMA is currently compiling information about medical record keeping vendors with the intention of providing a "Pre-approved Vendor List" to Saskatchewan physicians in the near future.

Regardless of which technology is implemented, there are certain expectations about what should be included in medical charts that have been described by the acronym "SOAP".

SOAP stands for the following:

- **Subjective** – the information that the patient provides such as symptoms, onset of those symptoms, what they have already done about the symptoms, family history, other medical problems. If the patient indicates that an injury sustained either in a motor vehicle accident or at work is the reason for their visit to your office, this information needs to be charted.*
- **Objective** – the information that you find during your physical examination, data from laboratory results, x-rays and other diagnostic tests. Personnel in your health region will provide you with information about how diagnostic tests are to be ordered.
- **Assessment** – what do the subjective and objective results of your interaction with the patient tell you about the patient's medical condition?
- **Plan** – based on the information you have gained through the first three phases of the charting process, you will determine a plan of action for the patient.

Medical record keeping, or the lack thereof, may play a significant role in complaints or legal actions that may occur during the course of your practice so it is vitally important that you ensure your records are the best they can possibly be. The College of Physicians and Surgeons of Saskatchewan, the Saskatchewan Medical Association and the Canadian Medical Protective Association can provide additional information and guidance about medical record keeping.

* Saskatchewan Government Insurance and the Saskatchewan Workers' Compensation Board may provide additional insurance benefits for patients who are injured in motor vehicle accidents or in the workplace. These benefits may provide the patient with services such as physiotherapy and so on as well as disability insurance to support the patient if they are unable to work. The information package you received from the College of Physicians and Surgeons of Saskatchewan contains a booklet about the Saskatchewan Workers'

Compensation Board. Information about the auto injury insurance programs can be found at www.sgi.sk.ca.

A presentation about medical record keeping practices is included in the International Medical Graduates Orientation Conference. At that time, further details about this issue will be provided. A note page has been included for you to use during that presentation.

Advanced Health Care Directives

A health care directive is a legal document in which an individual communicates their wishes with respect to their future medical care and treatment to a health care provider. Health care directives may express the individual's health care decisions, appoint someone to ensure that these wishes are carried out, or both. The health care directive will come into effect when the individual no longer has the capacity to consent to or is unable to communicate their wishes regarding a proposed treatment.

When presented with a written, dated and signed health care directive, the health care provider must ensure that its existence is documented in the medical records of the individual and that the ordinal or certified copy is also placed in the medical record.

A presentation about advanced health care directives is included in the International Medical Graduates Orientation Conference. At that time, further details about the physician's roles and responsibilities as they relate to advanced health care directives will be provided. As well, handouts of the presentation will be provided in the registration package you receive.

Clinical Practice Guidelines

Based on scientific evidence and expert clinical opinion, clinical practice guidelines are used by physicians to improve patient care and health care outcomes. The intent of clinical practice guidelines is to provide practical, easy-to-follow advice that allows physicians to provide the best possible care. These guidelines also create common approaches across jurisdictions.

Clinical practice guidelines are regularly changed and modified as a result of new scientific evidence and other developments.

A wide variety of clinical practice guidelines exist, so it is impossible to provide a list of them in this document.

The best resource for clinical practice guidelines can be found on the Canadian Medical Association website at www.cma.ca/cpgs or www.cma.ca/osler.

Prescribing Practices in Saskatchewan

Despite its relatively small population, Saskatchewan shares the prescription drug abuse problems found in more populated settings. The College of Physicians and Surgeons of Saskatchewan information package you have received contains a number of important documents about programs and approaches that help reduce prescription drug abuse. These documents include:

- Information about "double doctoring" and how to deal with a patient you suspect of this
- The website for information about the appropriate use of benzodiazepines
- The brochure "Tips On Prescription Writing" from the Saskatchewan Pharmaceutical Association

- “The Physician and Psychoactive Drugs” information booklet
- Information about the Prescription Review Program (formerly the triplicate prescription program) which is used to monitor the prescribing of drugs which have the potential to be abused

The Pharmaceutical Information Program (PIP) is a Saskatchewan Health program that has been designed to optimize the therapeutic decisions made by Saskatchewan health care providers by providing confidential access to patient medication records. It ensures that prescribers are able to prescribe the best medications to avoid drug interactions and duplications of therapy. PIP is closely related to the Prescription Review Program of the College of Physicians and Surgeons of Saskatchewan.

Many of the diseases you encounter in Saskatchewan will be the same diseases you have encountered in your practice previously. However, the choices you make about the drugs you prescribe may not be the same here in Saskatchewan. For example, problems with antibiotic resistance in Saskatchewan mean that first line antibiotics in South Africa are not effective here. Discussing drug choices with your peers who have practiced in Saskatchewan for longer periods of time may help prevent this type of problem.

Patients with valid Saskatchewan Health coverage may be eligible for benefits under the Saskatchewan Drug Plan, a program designed to reduce the direct cost of prescription drugs. The amount paid for the prescription by the patient will be determined by the type of benefits the patient receives. Drugs that have been approved for coverage are included in the formulary, so physicians should become familiar with this document before prescribing medications.

Saskatchewan physicians can obtain further information about prescribing practices from *The RxFiles*, an academic detailing program that provides physicians, pharmacists and other health care professionals with comparative and objective information in selected therapeutic areas. Information developed by RxFiles is disseminated through newsletters, online via their website, and through office visits. RxFiles also provides “New Physician RxFiles Orientation” sessions to most physicians new to the province. These orientation sessions cover the Saskatchewan Drug Information Service and the Saskatchewan Prescription Drug Plan.

You will receive, or have already received, the RxFiles Drug Comparison Chart Book and some additional prescribing information and resources.

Additional information about prescribing can be found at:

- **Pharmaceutical Information Plan (PIP)** (www.health.gov.sk.ca/ps_pip.html)
- ***The RxFiles*** (www.rxfiles.ca)
- **Saskatchewan Prescription Drug Plan** (www.health.gov.sk.ca/ps_drug_plan.html)
- **Saskatchewan Drug Information Service** (www.usask.ca/pharmacy-nutrition/services/sdis.shtml)

Presentations from representatives of the College of Physicians and Surgeons of Canada, RxFiles and Pharmaceutical Information Program (PIP) are included in the International Medical Graduates Orientation Conference. There will also be a presentation from a family physician about pain care and addictions as they relate to prescribing practices. At that time, further details about prescribing practices in

Saskatchewan will be provided. As well, handouts of these presentations will be included in the registration package you receive.

Patient Referrals

Family physicians will, from time to time, need to refer their patients to a specialist for care they themselves are not authorized to provide. The regional health authority in which you are situated will provide you with contact information for the specialists in that region as well as those in the Regina Qu'Appelle Health Region and/or the Saskatoon Health Region to whom referrals are usually made. As in your previous practice experiences, you will also find that you will develop your own referral network as you settle in to your new practice.

Referral letters, preferably typed, should include the following information:

- A brief synopsis of the patient's symptoms and etiology
- Relevant personal, family and medical history
- Details of any medications the patient is currently taking
- Diagnostic tests performed and the results obtained
- Treatment strategies already implemented and/or discontinued due to poor outcome
- Current contact information

The majority of patients will be returned to the care of the family physician following the consultation with the specialist. It is the responsibility of the specialist to provide, in a timely manner, a consultation letter detailing the following:

- Details of the diagnosis
- The treatment plan which has been implemented
- Follow up care instructions
- Relevant observations and information

While Saskatchewan Health covers most medical and hospital care received in other provinces when patients are travelling, prior approval is required when referring a patient to another province for treatment. Referrals outside of Canada for treatment not available here must also have prior approval from the Medical Services Branch of Saskatchewan Health. Without prior approval of the Medical Services Branch, Saskatchewan Health may not cover the patient's care expenses. The costs associated with travel, meals and accommodation are not covered by Saskatchewan Health.

Physicians classify patients requiring surgery into one of three categories: emergent, urgent or elective; after which, patients are placed in the province-wide surgical care system. Emergent patients require treatment within 24 hours, while urgent patients can wait a short time for their surgeries (cancer and/or suspected cancer patients who are non-emergent fit in this category). Elective surgeries include required surgeries where there is not an immediate threat to the patient's life or health.

Further information about the Saskatchewan Surgical Care Network can be obtained at www.sasksurgery.ca.

Patients who receive a diagnosis of cancer from their family physician or specialist will be referred to the cancer program, which is operated by the Saskatchewan Cancer Agency. The Saskatchewan Cancer Agency operates two treatment facilities, the Allan Blair Cancer

Clinic in Regina and the Saskatoon Cancer Centre, which provide comprehensive treatment and follow up services. The Saskatchewan Cancer Agency also provides a number of prevention, education and support services to the residents of Saskatchewan.

Further information about the Saskatchewan Cancer Agency can be found at www.scf.sk.ca.

The Saskatchewan Transplant Program, established in 1989, facilitates the donation and transplantation of corneas, heart valves, kidneys and musculoskeletal tissue (bone, tendons) in Saskatchewan. Organs and/or tissues not transplanted in Saskatchewan can be donated and will be placed with other transplant centres. The transplant coordinators are located in the Regina Qu'Appelle Health Region (766-4444) and Saskatoon Health Region (655-1000). These transplant coordinators can provide assistance and guidance when physicians are working with patients who either wish to donate organs and/or tissues or who need to consider a transplant as a treatment option.

Saskatchewan Health provides specialized programs and services for patients who are experiencing difficulties with addictions and mental health. Physicians with concerns about patients can access these services as required. A brief description of the services follows.

Addictions Services

Alcohol & Drug Services

Through the regional health authorities, Saskatchewan Health provides a full range of alcohol and drug addiction recovery services for individuals and their families. These services are outlined below.

- Outpatient service agencies are the starting point for patients with alcohol and drug use and abuse. Every health region has qualified addictions rehabilitation counsellors to whom patients can be referred for assessment, counselling, education and support.
- Inpatient programs are more structured and intensive in nature with the patient typically living in a facility for about four weeks. There are a number of these programs available in the province. The health region in which you are located can provide you with information about the inpatient services usually accessed by patients in your area.
- Long-term residential services are located in North Battleford and Regina. These facilities provide assistance for longer periods of time and address issues such as relapse prevention and life skills training.
- Detoxification services in Lloydminster, Moose Jaw, La Ronge, Regina, Saskatoon and Prince Albert provide a safe environment in which patients with more severe substance abuse problems can undergo withdrawal and stabilization.

The Youth Drug Detoxification and Stabilization Act of Saskatchewan (April, 2006) provides families and caregivers with options for accessing services for youth who are unwilling or unable to voluntarily access those services. The Act can only be used in cases where the youth is suffering from severe addiction or abuse issues and is at risk of serious harm to himself or herself or another person.

Problem Gambling Program

- Saskatchewan Health delivers education and prevention programs designed to reduce the risks associated with gambling.
- The regional health authorities provide outpatient problem gambling counselling. In some regions there are also specialized counselling services available.
- Problem gamblers and their families can seek help and information by contacting the Problem Gambling Help Line at 1-800-306-6789. The Help Line provides 24-hour province-wide counselling, information and referral services.

Safe Driving

Safe Driving provides addiction screening, assessment and treatment for individuals convicted of alcohol-related driving offences. All individuals convicted of alcohol-related driving offences must be assessed before being eligible to apply for a driver's license.

Tobacco Reduction – Smoke Free Public Places

Saskatchewan Health coordinates the tobacco policy across all sectors and leads the implementation of policies and legislation that support the reduction of tobacco use. Smoking in enclosed public places is banned in Saskatchewan.

Additional information about Addictions Services can be found at www.health.gov.sk.ca/ps_addictions.html.

Mental Health Services

Mental health services are designed to promote, preserve and restore the mental health of the population. Mental health services are available in all health regions or within service areas involving multiple health regions. Mental health services are available to all Saskatchewan residents.

All mental health services are provided in accordance with the standards and guidelines of the *Mental Health and Services Act and Regulations*. The *Mental Health and Services Act and Regulations* does provide options for medical intervention when a mental health patient is unwilling or unable to seek the required treatment.

The mental health services in Saskatchewan are provided in four distinct program areas. The services provided within each of these program areas are very extensive, so it is impossible to provide complete details in this document. However, a brief overview of the four program areas follows.

Child and Youth Services

Child and Youth Services are designed to meet the mental health needs of children and youth with or at risk of developing mental health and behavioural problems.

Adult Community Services

Adult Community Services provide direct and indirect clinical and counselling services for adults.

Inpatient Care Services

Inpatient Care Services encompass diagnostic and treatment services on an inpatient basis in designated mental health units within general hospitals. Some centres have day clinics as well.

Psychiatric Rehabilitation Services

Psychiatric Rehabilitation Services assist long-term mentally ill clients through the provision of long-term case management services.

Additional more detailed information about Mental Health Services can be found at www.health.gov.sk.ca/ps_mental_health_services.html.

A presentation about mental health and addiction services is included in the International Medical Graduates Orientation Conference. At that time, further details about referrals to these services will be provided. As well, handouts of the presentation will be provided in the registration package you will receive.

Emergency Management Resources

Saskatchewan Poison Centre

The Saskatchewan Poison Centre provides confidential 24-hour immediate assessment and treatment recommendations for poison and chemical emergencies delivered by a team of specially trained pharmacists, nurses and physicians. The team will assist callers by providing first aid instructions and directing them to the appropriate treatment facilities as required.

The team at the Saskatchewan Poison Centre will also work with local physicians as part of a clinical care team to provide consultation services.

A more detailed description of the Saskatchewan Poison Centre is included in the information package from the College of Physicians and Surgeons of Saskatchewan.

The service is available to all residents of Saskatchewan and can be accessed by calling 1-866-454-1212.

Patient Transport

Tertiary medical services are concentrated in the Saskatoon Health Region and the Regina Qu'Appelle Health Region, but these services exist for the care of all Saskatchewan residents. Therefore, patients from the outlying areas will need to be transported to these facilities for required care. Saskatchewan Health has developed a number of patient transport options that can be accessed for this process.

Saskatchewan Health offsets a portion of the service costs for both road and air ambulance service, but it is not a directly insured benefit. No one will be denied access to road or air ambulance services because of an inability to pay for the service. Various extended health insurance plans may also provide patients with access to reimbursement for ambulance services.

The emergency transportation services available in Saskatchewan include:

- **Road ambulance services**, which are provided by the health regions with the assistance of grants from Saskatchewan Health. The additional fees and charges associated with this service may vary from health region to health region so physicians need to determine this information for the health region in which they are located. Programs which may also assist with the costs of road ambulance services include the Senior Citizens' Ambulance Assistance Program, the Supplementary Health Program and Workers' Compensation or SGI.
- **Saskatchewan Air Ambulance** is a provincial program that costs individuals \$350 per flight, in addition to ground transport to and from the airport. Assistance is available for some patients. Information about Saskatchewan Air Ambulance can be obtained by calling 1-306-933-5255.
- The **Northern Medical Transportation Program** provides funding for emergent and non-emergent medical transportation in northern Saskatchewan through an insured service administered by Saskatchewan Health.
- **Specialized Transportation Services** provide transportation for paediatric and neonatal patients. Both of these services are staffed by teams who travel to the patient's location to stabilize and transport the patient. Paediatric and neonatal transport teams are based out of the Regina General Hospital (1-306-766-4291) and the Royal University Hospital in Saskatoon (1-306-655-1915).

The information package provided by the College of Physicians and Surgeons of Saskatchewan contains a memo pertaining to the transfer of critically ill patients to the tertiary care facilities in the Saskatoon and Regina Qu'Appelle Health Regions.

Additional information about emergency transportation can be found at www.health.gov.sk.ca/ph_br_ae_emer_transp.html.

A presentation about emergency management resources is included in the International Medical Graduates Orientation Conference. At that time, further details about referrals to these resources will be provided. As well, handouts of the presentation will be provided in the registration package you will receive