



DocTalk

NEWSLETTER *mini*

College of Physicians and Surgeons of Saskatchewan

Volume 7 Issue 2 2020

www.cps.sk.ca

FOLLOW US



ISSN 2368-0628

ISSN 2368-0636 (Online)

PLEASE NOTE : While the contents of this issue were accurate at the time of publication, the information contained herein may have since been updated and no longer be current. Access to this publication is provided primarily for archival purposes. Please refer to the CPSS website for the most up-to-date information.

What's Inside

President's Message

p.2

Registrar: A CPSS perspective

The CPSS response to the Pandemic

p.3

Wise PRP Prescribing During COVID-19

p.4

Health Science Students Supporting Healthcare Professionals

Physician Health – Welcome to our new world!

Indigenous Wellness Practice Resources



COVID-19

special issue

President's Message

I would like to start by thanking the physicians of Saskatchewan for their service to the people of the province during these incredibly stressful times. COVID-19 has created anxiety and fear amongst healthcare providers in this province and yet physicians answered the call of their patients in so many ways.

It has been a unique experience watching physicians stepping into new leadership roles, preparing, educating and rehearsing modified practices developed for their safety and the safety of the patients. I suspect that the simulation sessions I have witnessed in Saskatoon are being mirrored throughout the province and I recognize the time and effort physicians are dedicating to these particularly important endeavours.

During this time, it is especially important that we think about how fortunate we are to work in the province we do. The Saskatchewan Health Authority (SHA) must be commended on the leadership shown and its significant efforts toward keeping the profession informed. Physicians were worried about the quantity of Personal Protective Equipment (PPE), but fortunately this has not been an issue and the policies around appropriate usage, distribution and efforts in procurement by SHA of this equipment must be acknowledged.

Many of our neighbours have lost their jobs and the ability to earn income and may not have had the same financial cushion as many physicians. We must be humble as a profession and thank the Saskatchewan Medical Association (SMA) for stepping up and negotiating pandemic funding for physicians. They have also gone far beyond their mandate to be the clearing house on their website and with regular distribution of information on behalf of the College of Medicine, SHA,

SMA and the College of Physicians and Surgeons of Saskatchewan (CPSS).

The Senior Leadership Team and Council of the CPSS have continued to function quietly and efficiently, expediting licenses, developing policies and statements to give physicians guidance on expectations during these unusual times, and continuing the ongoing regulation of the profession.

I am most impressed with how the profession has come together for the greater good of the public. We must nevertheless be cognizant that our appropriate concentration on COVID has left other diseases in our communities idling; this will mean that even when COVID is behind us, we will need to be creative and ingenious as to how to make up these deficiencies in care. This will require a great deal of effort by all physicians. It is my wish that this new interest and involvement in the healthcare arena will continue and multiply even when COVID is but a distant memory.

We must truly thank the citizens of this province for heeding the warning and following physical distancing recommendations. Always be aware of the significant price the public has sacrificed to follow these public health recommendations. Our mandate at the College is to protect the public; by the actions and the responsibility that the public has demonstrated over the last six weeks, their actions have likely protected all healthcare workers in the province. We thank them for this.

We must continue to be kind and considerate of each other during these very trying times.

Please stay safe.

Dr. Brian Brownbridge
President of Council, CPSS



The Covid-19 pandemic has brought new meaning to the proverb: "There is nothing certain but the uncertain".

This unprecedented experience continues to be stressful for us all. We have adjusted to a new way of living and working. It has been gratifying to see the commitment of physicians and other health care professionals in preparing for this pandemic and in continuing to deliver care in new and challenging ways.

The College has also had to change the way it does its business to be prepared for the pandemic. This includes declaring an emergency, working differently to increase flexibility and responsiveness and working with our health care partners to support physicians as they provide care.

Emergency Licensure Bylaw 2.18

Declaring an emergency for the purposes of Bylaw 2.18 has allowed us to grant emergency licences to physicians who do not meet the current criteria for licensure. It allows us to waive certain licensure requirements and amend any policy or standard as needed to respond to the pandemic. At present these emergency licences are available to any physician on the inactive register who has practised within the past three years, and to any physician currently licensed in another province in border communities to enable the provision of medical care to Saskatchewan patients. These licences have been issued at no cost and with minimal requirements including a simplified application form and proof of CMPA coverage. Emergency licences are valid until the declaration of the emergency is rescinded.

We have had discussions with the Post Grad Dean's office and the Saskatoon Health Authority to have a process in place to provide emergency licences to senior residents should there be a need, and both the College of Medicine and the SHA deem it appropriate.

Changing our processes

We have also simplified the Scope of Practice Changes to allow flexibility for those physicians wishing to change their scope of practice within the SHA facilities/jurisdiction to provide services outside of their regular scope of practice. This allows the requisite flexibility for the Saskatchewan Health Authority should it be necessary to deploy staff in expanded roles. If the SHA privileges physicians for these scope changes the CPSS will automatically grant the scope change. Physicians seeking scope expansions for service provided outside of SHA facilities/jurisdiction must apply for these scope changes through the CPSS.

Working with our partners

We appreciate the cooperation and collaboration of our partners, the Saskatchewan Medical Association, The Saskatchewan Health Authority, The Ministry of Health, The Federation of Medical Regulatory Authorities of Canada, and the Canadian Medical Protective Association, as we meet the needs of physicians who need to work in different ways to provide continuity of care to their patients and address the needs of those affected with Covid-19. This admirable collaboration has helped produce one reliable source of information and daily update and has hopefully been helpful to you.

The majority of College staff is working from home with a skeletal staff at the office. We continue to complete our normal business but are ready to address any pandemic-related issues you may have. Please reach out if we can be of assistance.

We have been trained to respond to the needs of others and this is no exception. Thank you to all who have led the planning for the pandemic, and to those who continue to be available to their patients. Learning from the experiences of other provinces and other countries will hopefully guide us. Thank you for stepping up and putting your patients first, but remember we cannot beat this pandemic alone. You must take care of yourself and be kind and supportive of each other, as members of one big team, as that is indeed what this is going to take.

Dr. Karen Shaw
Registrar & CEO



The CPSS Response to the COVID-19 Pandemic

In addition to its regular work, the CPSS remains flexible and reactive to the ever-changing scenarios of the COVID-19 pandemic. A high-level summary of some of the College's activities are as follows:

- Dr. Karen Shaw, the College's Registrar, has made a declaration of an emergency under **bylaw 2.18** to expedite licensing and remove barriers to physicians who come forward to assist the healthcare system in dealing with the COVID-19 pandemic.
- The College has established **general principles related to the provision of care** during a pandemic. The College is also regularly called upon to provide individual advice to specific physicians in relation to specific circumstances.
- The College operationalized an expedited **complaints process** related to COVID-19 issues to better serve the public

and **efficiently resolve complaints with physicians.**

- The College has a process in place for expediting requests from other Medical Regulatory organizations related to Certificates of Professional Conduct during the pandemic.
- The CPSS website was adapted to include **COVID-19 information** to the public, to physicians, and included links for medical students, faculty and staff.

Continued on p.3...

Dr. Werner Oberholzer
Deputy Registrar



- The CPSS collaborated with the Saskatchewan Medical Association, Saskatchewan College of Pharmacy Professionals, Pharmacy Association of Saskatchewan, The Saskatchewan chapter of the CFPC, and the Saskatchewan Registered Nurses Association for twice daily meetings, resulting in joint communiques "Practice Alert" which highlighted daily issues and alerts regarding the pandemic.
- **Virtual Care** has been implemented as a care delivery model during the COVID-19 pandemic.
- The CPSS continues to promote physician health and wellness in conjunction with the SMA **physician health program**, as well as distributing information on programs related to this.
- The CPSS implemented a truncated process for **emergency scope of practice changes** to enable physicians to practice virtual care specific to COVID-19 concerns.
- The CPSS introduced an **emergency licensure process** for physicians who may qualify to return to practice, and these physicians were contacted to possibly provide services in Saskatchewan. Licensure has been granted at no cost and with minimal procedural requirements.
- The CPSS collaborated with the SMA to produce a **Q&A document** related to general issues associated with the pandemic.
- The CPSS worked with eHealth to establish a truncated process for Physicians and Residents to obtain access to the **Pharmaceutical Information Program** (PIP) platform for e-prescribing.
- The CPSS collaborated with the **College of Medicine** and the **Saskatchewan Health Authority** to provide emergency licensure and scope of practice changes for qualifying resident physicians.
- The CPSS participates and interacts with physicians across the province during the "Virtual Town Hall meetings" 4 nights per week. A senior management team member is assigned to speak at each town hall WebEx.
- The CPSS worked with the **Prescription Review Program** (PRP) to disseminate information regarding OAT, UDS, and conversion guidelines for anticoagulants, care of patients on OAT in hospital and other relevant prescription and medication issues affected by the pandemic.
- The CPSS remains in regular contact with other organizations with similar interests and goals, including the Colleges of Physicians and Surgeons of other provinces, the **Federation of Medical Regulatory Authorities** (FMRAC) and continues environmental scans of information from organizations around the world. The CPSS also discusses issues with the **Canadian Medical Protective Association** (CMPA).
- The CPSS collaborates daily with the **Saskatchewan Health Authority** and the **Ministry of Health** regarding COVID-19 plans and operational issues.
- The CPSS collaborates regularly with the **Saskatchewan College of Pharmacy Professionals** (SCPP) regarding mutual issues.
- The CPSS published a number of guidance documents including but not limited to the following:
 - o Guidance Document to Physicians: Re-open Saskatchewan Phase 1
 - o Guidance Document to Physicians: Re-open Saskatchewan Phase 2
 - o CPSS expectations of Physicians during the COVID-19 Pandemic
 - o Expectations of physicians for scope of practice expansions during the pandemic
 - o On providing sick notes to patients during the COVID-19 pandemic
 - o Use of the Pharmaceutical Information Program for e-prescribing
 - o Advertising virtual care during the pandemic
 - o Maintenance of Certification during the COVID-19 Pandemic
 - o Guidance to Physicians regarding patient care issues during the COVID-19 pandemic
 - o Notice to Physicians re: PPE availability in Saskatchewan
 - o Access to care during COVID-19



Wise PRP Prescribing During COVID-19

By Nicole Bootsman, Pharmacist Manager
Prescription Review Program/
Opioid Agonist Therapy Program



Physicians and allied health-care professionals continue to facilitate uninterrupted access to essential medications during the pandemic.

PRP Prescribing Tips for Consideration During COVID-19

1. Check PIP/eHR Viewer before prescribing any medication, especially medications with known potential for misuse. Be attentive to multi-doctoring and early refills.
2. Fax, ePrescribe or issue verbal orders (temporarily permitted for Controlled Drugs and Substances Act medications) to reduce the risk of exposure from frequent in-person pharmacy visits.
3. Where electronic prescription transmission is unfeasible, adhere to the recently amended Regulatory Bylaw 17.1 to read "handwritten prescriptions given directly to the patient must be signed manually. EMR-generated prescriptions are printed and given directly to the patient must be counter-signed with a 'wet' signature".
4. With established patient-physician relationships, weigh the benefits of extending prescriptions with the risk of potential overdose or diversion. If shortened day dispenses are in the best interest of the patient or the public, work with the patient's pharmacist to manage physical distancing and self-isolation (e.g. delivery services).
5. Prevent medication stockpiling, leading to shortages, by permitting maximum one-month supplies.
6. Continue to encourage safe medication storage and urge all patients taking opioids to obtain a naloxone kit.
7. Chronic opioid therapy may cause immune suppression so educate your patients about possible risks¹.
8. Thoroughly document any deviation from normal practice.

Please feel free to contact the Prescription Review Program to discuss further prescribing strategies during COVID-19.

Reference

1. Recommendations on Chronic Pain Practice during the COVID-19 Pandemic. Shanthanna H, et al. www.asra.com/covid-19/cpguidance

Health Science Students Supporting Healthcare Professionals

By: Sehjal Bhargava

Our Student Initiative

With classes cancelled and clinical duties suspended, a group of six first and second year medical students at the University of Saskatchewan (Usask) launched the initiative “Health Science Students Supporting Healthcare Professionals.” This program matches Usask health science student volunteers to families of front-line workers to support them in day to day tasks such as grocery runs, child care, and pet care. Inspiration to start this initiative came from concerned Saskatchewan physicians, as well as seeing similar projects started at medical schools across the country. “I simply wanted to do what I could to help,” said second-year Regina student Jessica Froehlich. Another volunteer, first-year medical student Kienna Mills says “As a pre-clerkship student, I am not able to help out directly in the hospital during this pandemic, but having an opportunity to support physicians sounded like an excellent way to help out by relieving some of their non-work stress. I think that this initiative has also helped foster a sense of collegiality, which makes me proud and excited to join the field!” So far, about 20 students have been matched to assist front line workers, with many more signed up to help when needed.

Please contact the group with questions, or if you are in need of support!

sk.students4hcp@gmail.com

Photo, from top, left to right: USask medical students Tayyaba Bhatti, Colten Molnar, Sehjal Bhargava, Sarah White, Jessica Froehlich and Alexa McEwen are seen here organizing volunteer efforts through remote communication.



Physician Health

By: Brenda Senger
Saskatchewan Medical Association

Welcome to our new world!

It is not the smartest or the strongest who survive – it is those who can adapt to change. Thus our challenge begins.

For physicians and physician learners who are used to being in control, this pandemic has challenged your ability to deal with uncertainty – the sand shifts beneath your feet sometimes several times per day. You may experience fear – for yourself, your family and your patients, anxiety – especially if you’re prone to catastrophize, anger – at the system, at non-compliant people placing you at risk and sadness over the losses created by the pandemic. But you may also experience renewed energy by being called to do what you have been trained to do, joy at the coming together of people to provide support and excitement at being part of history. Remember all your emotions are normal given the circumstance.

Education and support options abound – take the time to have a look at the link below.
<https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/information-for-physicians/physician-wellness-and-support>

As always, the Physician Health Program remains available for support and assistance.



Indigenous Wellness

Preparedness, Planning and Indigenous Patient Care

The official journal of the College of Family Physicians of Saskatchewan suggests the following tool as a model for preparedness and planning in an Indigenous primary care setting:

COVID -19: A practical tool for preparedness and planning in an Indigenous primary care setting in Canada

<https://www.cfp.ca/news/2020/04/15/04-15-1>

Elders are culturally precious due to their roles in passing down language, knowledge and culture. It is particularly important to the Indigenous community for this vulnerable group to have access to quality care during the COVID-19 pandemic.

