

### **COUNCIL MEETING HIGHLIGHTS**

November 15, 2024

**Present:** Noël Dunn (President), Bill Fischer (Vice President), David Kopperud, Donna Dohms, Karen Gibbons (Public Representative), Roger Carriere (Public Representative), Joel Gritzfeld (Public Representative), Jacquie Messer-Lepage (Executive Director), Collette Parks (Communications Coordinator), Louise Durnford (Director of Operations), Jodi Egeborn (Manager of Professional Conduct), Destin Ash (Clinical Practice Specialist)

**Online:** Michael Slater, Rashed Al-Mamun (Senior Policy & Research Analyst)

Regrets: Matt McGurk (Past President), Jason Farago (Fire)

#### 1.0 Call to Order

President of Council called the meeting to order at 0901

### 2.0 Land Acknowledgement:

- I want to acknowledge that in Saskatchewan, we are on treaty land. These treaties serve to govern our relationships with Indigenous people.
- Today we are located on Treaty 4 territory, which is the traditional territory of the Nêhiyawak, Saulteaux, Dakota, Lakota, Nakota, and the homeland of the Métis/Michif Nation.
- It is important that we recognize that we all have benefits and responsibilities under these agreements. We acknowledge the harms and injustices of the past and present. We dedicate our efforts to working together in a spirit of collaboration and reconciliation. We are all treaty people.

#### 3.0 Declaration of conflict of interest

- Noel is provincial manager of SHA EMS division
- Bill has conflicts with education

### 4.0 Approval of Agenda

• Add: 9.1.5: PSCS follow up.

MOTION: To approve the agenda with the addition. Karen/Bill. Carried.



## 5.0 Approval of Minutes June 6/7, 2024:

MOTION: To approve Minutes. Roger/Joel. Carried.

### **5.1** Business arising from the Minutes

ACTION ITEM	ACCOUNTABILITY	Status	TIMELINE
1. Publish resolution updates in newsletter	Collette	Completed	
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# 6.0 Progress on Strategic Priorities:

### **6.1** Strategic Planning Update:

- **6.1.1** SCoP Strategic Planning Summary
  - Affirmed the Mission, Vision, and Values of SCoP
  - Evaluated strengths, weaknesses, opportunities, and threats
  - Strat Plan will be posted on the website prominently

### **6.1.2** Strategic Framework

 Strategic Priorities: advance regulatory excellence, enhance stakeholder awareness and relationships, strengthen organizational stability

### **6.1.3** Strategy Map

Circulated to Council

### 6.2 COPR Update

### **6.2.1 Educational Reports**

- No report (quarterly reporting)
- COPR is working directly with educators, especially with implementation of COPR standards for entry to practice

### 6.2.2 Exam Results

The following link is to a COPR video which explains the well-established process known as "Examination Blueprinting" used for developing each COPR Entry to Practice Examination. Video Link:

https://youtu.be/FirLqGwWuxw



• EMR pass rate: 35% - 8/23

SK	Pass Score	64	71.11%
n=23	Average	61.39	68.21%
	Std Dev	5.60	6.22%
	Pass Rate	8	34.78%

National	Pass Score	64	71.11%
n=120	Average	64.58	71.75%
	Std Dev	8.71	9.68%
	Pass Rate	66	55.00%

• **PCP pass rate:** 59% - 17/29

SK	Pass Score	125	69.44%
n=29	Average	126.83	70.46%
	Std Dev	11.02	6.12%
	Pass Rate	17	58.62%

National	Pass Score	125	69.44%
n=300	Average	132.46	73.59%
	Std Dev	12.20	6.78%
	Pass Rate	225	75.00%

• ACP Pass rate: 100% - 2/2

SK	Pass Score	120	66.67%
n=2	Average	124.00	68.89%
	Std Dev	1.41	0.79%
	Pass Rate	2	100.00%

National	Pass Score	120	66.67%
n=39	Average	140.23	77.91%
	Std Dev	12.15	6.75%
	Pass Rate	37	94.87%

- Saskatchewan EMRs are particularly weak on this exam
- COPR meeting next week; will be evaluating the exams and question banks, and will assess against the blueprint to see if the blueprint needs to change



 Only a few provinces use EMRs; BC, Alberta, Manitoba, Newfoundland and Labrador, and Saskatchewan

## **6.2.3 COPR CPCF Implementation Briefing Note**

- CPCF is the profile (Canadian Paramedic Competence Framework)
- Have been talking to educators to give them notice
- First CPCF exam is fall 2025 for EMRs
- PCPs start in spring 2026; ACPs in 2027
- Will offer a blend of NOCP and CPCF at first, depending on what instructors are teaching. Eventually will be all CPCF
- Full implementation by November 2026

### **6.2.4** COPR CPCF to NOCP comparison:

- These docs are information items that were circulated to Council
- Very minor differences between the two standards

## 7.0 Additional Updates – Executive Director

**Committee Reports** (Committee Chairs as appropriate):

- 7.1 Executive Committee Decision(s):
  - **7.1.1** Executive Committee decisions: moved to in-camera portion of meeting;

## 7.2 Audit Committee

- **7.2.1** Meeting Minutes June 13, 2024
  - Variance reporting until end of August in a good position
- **7.2.2** Draft Budget for Approval 2025 2027
  - Forecasted membership numbers are always around 1970
  - Projections around Practicing/Non-Practicing and Prorated memberships always stay the same
  - Fines and costs are collected but not in budget and not relied upon
  - Total revenue for 2025 is close to 2024; increase in 2026 due to approval of membership fee increase tied to CPI (1% or 2%; usually \$5 or \$10)
  - Legal budget is seldom sufficient for Professional Conduct Committee; draw from reserves
  - In 2025, many Colleges are moving to AGMs that are pure business and no education; SCoP is not yet doing this but considering

**ACTION ITEM:** Executive Director to request Ministry of Health present on new legislation at our AGM



- Investigations are always over budget; dependent on volume of complaints
- Professional Conduct Committee has biggest budget of committees
- Rent is going up in 2026, w incremental increases yearly thereafter
- Interest and bank charges are mostly related to renewal

MOTION: To approve the budget as presented. Donna/David. Carried.

# 7.3 Legislation and Bylaws Committee

- **7.3.1** Regulatory Bylaw Amendments/Umbrella Legislation
  - Bylaw amendments clarifying Reinstatement provisions
- **7.3.2** Governance Policy Brief Review
  - Have scheduled reviews for all policies relating to Council; should do annually
  - Council reviewed all policies in Policy Manual relating to Council:
  - Orientation and Development: establishes expectations that new Council members be paired with experienced members;

**ACTION:** 3: change to "may" instead of "will"; 4.1.1: remove "written" in provide a report

Council Evaluation:

**ACTION:** 2: evaluation of Executive Director does not happen at the same time as the evaluation of Council

• Privacy and Release of Information:

**ACTION:** Executive Director to draft a statement on security of private information

• Rules and Procedures for Meetings:

**ACTION:** 11.1: Executive Director to revise statement that increases time for open forum, plus overall revised draft reflecting online meetings

Voting Procedures and Scrutineers

**ACTION:** Executive Director to review

### 7.4 Discipline Committee (DC)

• No details of individual cases were discussed



- No meetings since last Council meeting
- Hearing in January 2025
- DC has been very busy; more referrals than usual
- In 2024, there have been three referrals from PCC; most years it is zero
- Cases are getting more complex
- May see an increase of insurance premiums; members are using it for legal advice which is good

### 7.5 Professional Conduct Committee (PCC)

- No details of individual cases were discussed
- Joel Gritzfeld recused himself and left the room for this update
- Two new suspensions have been posted on the website
- **7.5.1** Paramedic suspension DVD
- **7.5.2** Paramedic suspension CB

## 7.6 Paramedic Practice Committee (PPC): Jen verbal update

- Last meeting was October 21
  - Protocol proposal review
  - Approved more representation of all licence levels on PPC

#### 7.7 Education Committee

- Most recent meeting was October 14, 2024
- PEARS and PEPP making mandatory for PCP for 2027 or 2028; comparing PEPP, PEARS and Pediatric ITLS; PALS for PCP is difficult because too many medications are not approved for PCP
- Approved changes to Standards

#### 7.8 Nominations Committee

- Summary of Council and Committee vacancies was circulated to Council
- Audit: three members to recruit
- Discipline: one member to recruit
- Leg & Bylaws: one or more members to recruit

ACTION: change document to reflect Noël is chair; Roger's term started in 2023

- Nominations: one member to recruit
- PPC: all licence levels plus CP
- PCC: no more members to recruit



# 8.0 Collaboration, Meeting and Training Updates

### 8.1 Research/Funding

- SHRF VAPOC Expression of Interest Proposal
  - Applied to do a presentation as a featured researcher at SHRF; one of 5 projects chosen
  - Applied to research potential use of VR in other healthcare settings

### 8.2 NIRO Citizen Advisory Group

- Overview of Citizens Advisory Group project was circulated to Council
- Each College puts funds towards this group

### 9.0 Other/New Business:

### 9.1 General Updates:

- **9.1.1** Student Restricted Licence
  - Issue brought up at AGM
  - Recommended option is to revise the restriction to allow a restricted member to work under indirect supervision while performing low risk activities
  - Restricted members would be required to perform specific skills (high risk) under direct supervision and could work under indirect supervision during other patient care activities
  - This restriction would apply to Primary Care Paramedics (PCPs) only.
    There would be no change to the EMR restriction requiring direct supervision at all times during patient care
  - Advanced Care Paramedics (ACPs) already can work as a PCP when not directly supervised and can perform their ACP skills when directly supervised
  - List of Skills to be performed with direct supervision circulated to Council
  - Questions:
    - Will the risks of approving this to the public be minimal? Yes.
      Would alleviate the concerns relating to the same person driving all the time (fatigue)



- What about all medications instead of just select meds? No, still want Tylenol, Ibuprofen, etc.; Removes meds that are outside of the EMR scope
- Discussion re: definition of who can supervise and who is accountable.
  - Direct supervision: discussed that members must be working for 2 years unsupervised before a member can supervise a Restricted member.
  - Is the individual who is supervising be accountable to maintain patient safety? The employer (if they are a member) accountable?
  - Add statement: all reasonable efforts be made to have 2 years experience in order to supervise
  - Still a need to clarify definition of Direct Supervision

**MOTION:** To approve recommendation OPTION 1 with the inclusion that all reasonable efforts should be made to have 2 years experience in order to supervise. **Noël/David. Carried.** 

### 9.1.2 Council Terms of Reference quick review

Circulated for review

### **ACTION ITEMS:** Changes:

- Oversee the Executive Director of the College and ensure they create linkage with the public on behalf of the College.
- Change draft date to August 2024

### **9.1.3** Executive Director Policy Update

- Splitting responsibilities of ED and Registrar for January
- Not any different from what's already being done, just more detailed
- ED is responsible for overseeing all operations of the College even if they are not performing these operations
- Bachelor's/Master's requirement because business knowledge in this role is more important than clinical

**ACTION ITEM:** Compensation 3.3.1: change his/her to their, and date to August 2024

**9.1.4** British Columbia Regulatory Amalgamation (Information Item): <a href="https://chcpbc.org/">https://chcpbc.org/</a>



### **9.1.5** PSCS Follow Up

• Executive Director will send a letter regarding restrictions changes

### 10.0 Correspondence

No correspondence was circulated

### 11.0 3.2.1 Reporting

- 3 Highlights
  - Renewal as of this morning, 798 approved renewals; 335 submissions are payment pending; 7 are ready for review; 11 that are not yet approved; 10 have informed us that they are not renewing. 622 that have begun renewal but not submitted
  - Job descriptions for ED/Registrar split are almost done
  - Good position post-Renewal in January; Rashed on paternity leave for 34 weeks but will be replaced with Tosin in the interim (Tosin has worked here before). Destin is Jen's resource to take on 50% of the clinical side of her position
- 2 Challenges
  - Unknown around umbrella legislation is hard to plan for, and certain things have to be on pause until more is known
  - Unknown around the new Ministers
- 1 Hope for the Future
  - Optimistic that ED/Registrar transition will go very well

### 11.0 In Camera Session:

- **11.1** Council Item(s) with ED
  - **11.1.1 Appointment to Council:** Vacancy replacement discussion
  - 11.1.2 Criminal Record Applicant Decision Item
    - Council approved the recommendation
  - 11.1.3 Executive Committee Decisions: confirmed
  - **11.1.4 Pension Plan Proposal** (Decision Item): decision to have presentation and the next Council meeting if possible
- **11.2** Council Item(s): ED excused for this portion of meeting
- **11.0** Adjournment: Next Meeting February 7, 2025