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# President's Letter

April 19, 2011

## **New *Medical Act* good for patients and profession**



**Patrick M. O'Shea**  
MD, CCFP, FCFP  
President

Dear Colleagues:

Last week, government introduced *An Act Respecting the Practice of Medicine, 2011*. The new legislation replaces the *Medical Act, 2005* and will guide how the College of Physicians and Surgeons of Newfoundland and Labrador (the College) regulates the practice of medicine. College Registrar Dr. Robert Young met with the NLMA Board of Directors on Saturday and briefed us on the changes that will come into effect at the end of this calendar year.

The new legislation, first and foremost, protects the medical profession as a self-regulating profession. Self-regulation is fragile, as we have seen in other jurisdictions. It is increasingly questioned by the general public and patients, as they become more informed and demand improved accountability and transparency from the medical profession.

Self-regulation must put the best interests of the public and patients first, and avoid self-interest. We believe that the new legislation balances the interests of the public with the interests of the profession.

The new legislation will:

- incorporate quality assurance measures by authorizing the appointment of a Quality Assurance Committee to perform quality assurance reviews, and by requiring compliance with those reviews;
- incorporate mandatory continuing medical education and continuing competency measures;
- revise and update disciplinary processes; and,
- revise and update requirements for licensure, and will include a provision which will authorize a limitation on the scope of practice under a licence.

The new Quality Assurance Committee will have the ability to subpoena records; order a physician to undergo an evaluation, assessment, examination or practice review; and, restrict a physician's practice. The committee will also be able to order a physician to obtain counseling, and order the completion of an educational or training program. The QA committee will address issues related to fitness to practice and competency, as well as issues related to a physician's personal health such as addictions, all matters that now can only be addressed through the complaints process.

The College will also be able to act more quickly on issues related to complaints. New provisions for the Complaints Authorization Committee will allow it to act quickly to suspend or restrict a physician's licence where there is a reasonable belief that the physician has engaged in conduct deserving of sanction.

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**Newfoundland &  
Labrador Medical  
Association**  
164 MacDonald Dr.  
St. John's, NL  
A1A 4B3  
(709) 726-7424  
or 1-800-563-2003  
Fax: (709) 726-7525  
or 726-7456  
[www.nlma.nl.ca](http://www.nlma.nl.ca)  
[president@nlma.nl.ca](mailto:president@nlma.nl.ca)

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Dr. Young, in our discussions, said that this step would only occur after a full investigation, and only if it was believed that the physician in question posed a danger to the public. Throughout this process, the physician would have legal representation to ensure that his or her rights are protected.

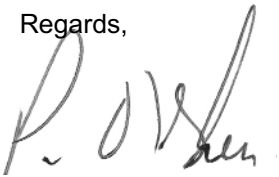
The full text of the new legislation is available online at [www.assembly.nl.ca/business/bills/Bill1122.htm](http://www.assembly.nl.ca/business/bills/Bill1122.htm)

The changes in the legislation are, as Dr. Young said in his presentation to the Board, the "skeleton" to which we must now apply the "meat" by way of developing and implementing regulations. Regulations will set out the processes for the Quality Assurance and Complaints Authorization Committees and more.

We will be organizing a meeting of the College, CMPA and the NLMA in the coming period to find a consensus on key issues related to regulations. We expect to find accommodation and resolution on issues of mutual interest as we have in the past.

Overall, the Board and I believe that the general direction of the legislation is desirable and good for the profession.

Regards,



Patrick M. O'Shea, MD, CCFP, FCFP  
President