

SUMMARY

DR. KELVIN WING-MING LEUNG (CPSO# 65257)

1. Disposition

On September 20, 2017, the Inquiries, Complaints and Reports Committee (“the Committee”) ordered general practitioner Dr. Leung to complete a specified continuing education and remediation program (“SCERP”). The SCERP requires Dr. Leung to:

- Engage in self-directed learning, where he will:
 - Review the College publication *Infection Prevention and Control for Clinical Office Practice* and the Public Health Ontario document *Infection Prevention and Control for Clinical Office Practice*
 - Provide the College with a written summary of the above documents with reference to current standards of practice (where applicable) and how they are applicable to his situation, and describing what changes he has made or plans to make to his practice.
- Undergo two unannounced reassessments of his practice, following the completion of the education program, by an assessor chosen by the College, the first after approximately six months, and the second after approximately 15 months.

2. Introduction

In the course of another College process, deficiencies were noted in Dr. Leung’s Infection Prevention and Control (IPAC) practices and subsequently, the Committee approved the Registrar’s appointment of investigators to conduct a review of Dr. Leung’s practice.

During the course of the investigation, Dr. Leung communicated with the College about changes he was making to his IPAC practices to rectify the identified deficiencies.

3. Committee Process

A General Panel of the Committee, consisting of public and physician members, met to review the relevant records and documents related to the investigation. The Committee always has before it applicable legislation and regulations, along with policies that the College has developed, which reflect the College's professional expectations for physicians practising in Ontario. Current versions of these documents are available on the College's website at www.cpso.on.ca, under the heading "Policies & Publications."

4. Committee's Analysis

The College alerted Dr. Leung by letter about the many deficiencies College investigators found during their unannounced inspection of his office. The Committee observed that during a subsequent announced visit to Dr. Leung's office, College investigators found that Dr. Leung had addressed many of the identified deficiencies; however, there were a few outstanding issues that were minor in nature. Further correspondence from Dr. Leung's counsel reported he had altered his practice to conform to all IPAC regulations (Dr. Leung's counsel provided relevant documentation in this regard).

It was reassuring to the Committee that Dr. Leung complied with all that was asked of him surrounding IPAC in his office. However, noting the fundamental importance of safety and hygiene to clinical care in a physician's practice, the Committee was of the view that it was imperative to have the assurance that Dr. Leung fully understands IPAC procedures and standards, as well as his obligation to comply with IPAC requirements and always remain up to date about them. The Committee concluded that remediation in the form of self-directed learning and a reassessment of Dr. Leung's practice was warranted.