

SUMMARY

Dr. Milind Gunvantrai Desai (CPSO# 61125)

1. Disposition

On April 13, 2018, the Inquiries, Complaints and Reports Committee (the Committee) required Dr. Desai (Gastroenterology, Internal Medicine) to appear before a panel of the Committee to be cautioned with respect to his deficiencies in office and practice management.

2. Introduction

The College received information from the Out-of-Hospital Premises (OHP) Inspection Committee stating that Dr. Desai, who was the medical director of an OHP, was non-compliant with annual Tier 2 Adverse Events reporting requirements between November 15, 2016 and May 19, 2017. In September 2017, the Committee approved the Registrar's appointment of investigators under Section 75(1)(a) of the Code, in order to examine Dr. Desai's practice.

Dr. Desai responded that there had been a "miscommunication" between him and the Premises Inspection Committee (PIC). He said he missed the annual reporting deadline for Tier 2 Adverse Events as he was unable to log on to the online system that he required to report them. He further indicated that he was unable to accommodate the scheduled inspection because of a conflict, that he never received any information about booking the inspection for another day, and that there was some delay in responding to the PIC on account of his busy schedule. Dr. Desai said the clinic's lease is expired and it ceased operating in February 2017.

3. Committee Process

A Surgical Panel of the Committee, consisting of public and physician members, met to review the relevant records and documents related to the complaint. 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 Committee did not accept Dr. Desai's explanation as to why he missed the annual Tier 2 Adverse Events reporting deadline, why he could not accommodate an inspection, and why his written responses to the PIC requests for further information were delayed. In the Committee's opinion, it is the responsibility of a medical director of an OHP to oversee all quality of care issues, as is outlined in the OHP Inspection Program (OHPIP) Standards. The PIC ultimately decided to issue Dr. Desai's clinic a "Fail" solely on account of his deficiencies in office and practice management, and on account of his unprofessional conduct. Dr. Desai did not accept responsibility for failing to comply with OHPIP Standards, indicating that he had "computer difficulties", and that he has a high clinical workload. The Committee emphasized that all physicians must comply with regulations that are mandated by statute, and Dr. Desai's failure to comply with the terms for operating an OHP is troubling. The Committee noted this is not the first time issues have been raised about Dr. Desai's office and practice management in other College investigations and was therefore concerned about Dr. Desai's governability, which could have warranted referring this matter to the College's Discipline Committee. However, given that Dr. Desai's clinic has now been closed for quite some time, the Committee was not of the view that there is an immediate risk of harm or injury to the public. Nonetheless, the Committee was still of the opinion that this matter warranted a significant disposition.

The Committee therefore concluded that the appropriate disposition in this particular case was to require Dr. Desai to attend at the College to be cautioned.