

SUMMARY

Dr. Faizal Ismail Bawa (CPSO# 70083)

1. Disposition

On July 29, 2015, the Inquiries, Complaints and Reports Committee (“the Committee”) required general practitioner Dr. Bawa to appear before a panel of the Committee to be cautioned with respect to the deficiencies in his medical records, which have persisted despite his completion of a medical records course, and to sign an undertaking to address the practice concerns identified by the Committee.

2. Introduction

In November 2009, the Committee directed that Dr. Bawa complete a Specified Continuing Education and Remediation Program (SCERP), which consisted of attending the Medical Record Keeping Course and undergoing a reassessment of his practice six months following his completion of the course. Dr. Bawa fulfilled the SCERP direction.

On September 22, 2014, a reassessment of Dr. Bawa’s practice determined that Dr. Bawa did not meet the standard of care for record keeping in 15 out of 15 charts reviewed, and posed a potential risk of harm to one patient of the 15 charts assessed. Dr. Bawa responded with a proposal to address the concerns identified in his reassessment.

The Committee elected not to accept Dr. Bawa’s proposal and appointed investigators under the Health Professions Procedural Code in May 2015 to examine Dr. Bawa’s practice. Pursuant to this investigation, the Committee continued to have concerns about Dr. Bawa’s medical record keeping and required him to sign an undertaking to address these practice concerns, in addition to a caution.

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, as well as College policies and relevant legislation.

4. Committee's Analysis

The Committee was very concerned that upon reassessment, Dr. Bawa continued to have such inadequate medical records six months after completing a medical record keeping course. The Committee was troubled that deficiencies were found in all of the 15 charts reviewed as part of Dr. Bawa's reassessment, and in one case, Dr. Bawa's record keeping deficiencies posed a potential risk of harm to the patient in question.

The medical record is a legal document which records events and decisions that help physicians manage patient care. All physicians are expected to be familiar with the prescribed components of medical records, as per Ontario Regulation 114/94 made under the *Medicine Act, 1991*. The College policy on *Medical Records* sets out the basis components of good record keeping.

Thorough and legible notes are a crucial component of good medical care, and are an important measure of the quality of care received by a patient. A physician's notes are meant to reflect the interaction between a physician and a patient, and chronicle a physician's management of a patient's care.

In addition to attending for a caution, Dr. Bawa has entered into an undertaking to address his record keeping deficiencies going forward, which requires him to undergo clinical supervision, professional education, and a reassessment of his practice following completion of his clinical supervision and monitoring of his practice.