

COLLEGE OF PHYSICIANS & SURGEONS OF ALBERTA

IN THE MATTER OF
A HEARING UNDER THE *HEALTH PROFESSIONS ACT*,
RSA 2000, c. H-7

AND IN THE MATTER OF A HEARING REGARDING
THE CONDUCT OF DR. JAMES MCINTYRE

**DECISION OF THE HEARING TRIBUNAL OF
THE COLLEGE OF PHYSICIANS
& SURGEONS OF ALBERTA
March 26, 2026**

I. INTRODUCTION

1. The Hearing Tribunal held a hearing into the conduct of Dr. James McIntyre on January 27, 2026. The members of the Hearing Tribunal were:

Mr. Andrew Otway, Chair (Public Member);
Dr. Louis Minders;
Dr. Marelise Kruger;
Ms. Shirley Pate (Public Member).

2. Appearances:

Ms. Elizabeth Ulmer, legal counsel for the Complaints Director;
Dr. James McIntyre;
Ms. Helen Ross, legal counsel for Dr. McIntyre;
Ms. Kim Precht acted as independent legal counsel for the Hearing Tribunal.

II. PRELIMINARY MATTERS

3. There were no objections to the composition of the Hearing Tribunal or the jurisdiction of the Hearing Tribunal to proceed with the Hearing.
4. Neither party requested to close all or a portion of the hearing to the public.
5. No other preliminary matters were raised.

III. CHARGES

6. The Notice of Hearing listed the following allegations:
 1. You failed to fulfill your Canadian College of Family Physicians' Mainpro¹ credit requirements for the Continuing Professional Development (CPD) requirements of the CPSA's Continuing Competence program;
 2. You failed to respond to the correspondence from Dr. [REDACTED], Assistant Registrar responsible for Continuing Competence, dated August 1, 2024, and September 26, 2024, regarding your outstanding CPD requirements; and
 3. You failed to cooperate with the CPSA investigator assigned to investigate the section 56 complaint arising from the referral by Dr. [REDACTED] to the Complaints Director regarding your outstanding CPD requirements.

¹ "Mainpro" is short for the "Maintenance of Proficiency" of the College of Family Physicians of Canada and is a requirement under the CPSA's Continuing Competency program.

7. Via the Admission and Joint Submission Agreement entered as Exhibit 1, Dr. McIntyre admitted that all three allegations were true and constituted unprofessional conduct.

IV. EVIDENCE

8. The following Exhibits were entered into evidence during the hearing:

Exhibit 1: Admission and Joint Submission Agreement

Exhibit 2: Agreed Exhibit Book, containing Tabs 1 - 19:

- 1 Notice of Hearing dated July 16, 2025
- 2 Section 56 Complaint dated November 28, 2023
- 3 Letter to Dr. McIntyre dated December 18, 2023
- 4 Letter to Dr. McIntyre dated May 15, 2024
- 5 Dr. McIntyre's response to complaint dated June 20, 2024
- 6 Letter to Dr. McIntyre dated June 25, 2024
- 7 Letter to Dr. McIntyre dated October 9, 2024
- 8 Letter to Dr. McIntyre dated November 27, 2024
- 9 Letter to Dr. McIntyre dated January 9, 2025
- 10 Letter to Dr. McIntyre dated January 22, 2025
- 11 Confirmation of delivery (registered mail) dated January 31, 2025 of letter dated January 22, 2025
- 12 Letter to Dr. McIntyre dated April 25, 2025 with draft notice of hearing
- 13 Letter from Dr. [REDACTED] to Dr. McIntyre dated May 14, 2025 with section 65 notice to respond with enclosures
- 14 Letter from Dr. [REDACTED] to Dr. McIntyre dated July 22, 2025
- 15 Letter from Dr. [REDACTED] dated August 20, 2025, with direction pursuant to s. 65
- 16 Letter from Dr. McIntyre re continuing professional development dated October 6, 2025 (with enclosures)
- 17 Email from Dr. [REDACTED] dated October 7, 2025 confirming no suspension
- 18 CMA Code of Ethics and Professionalism
- 19 CPSA Standards of Practice – Continuing Competence Program – Continuing Professional Development (CPD)

9. Although the parties did not provide an agreed statement of facts, the Tribunal was able to discern the following facts from the documents in the Agreed Exhibit Book:
- a. On August 1, 2023 Dr. ██████████, Assistant Registrar, Continuing Competence, notified Dr. McIntyre via the Physician Portal that Dr. McIntyre had not met the CPSA's Continuing Professional Development (CPD) requirements, and was required to respond within 10 business days to provide the CPSA with a date by which he would meet his CPD requirements.
 - b. On August 2, 2023 Dr. McIntyre was sent a reminder email that he had an unread document (i.e., the notice sent on August 1, 2023) in the Physician Portal.
 - c. On September 22, 2023 CPSA left a voicemail on Dr. McIntyre's cell phone.
 - d. On September 26, 2023 Dr. █████ issued a follow up letter to Dr. McIntyre via registered mail and via the Physician Portal with a response required by October 10, 2023. The registered letter was delivered on September 27, 2023.
 - e. On November 28, 2023 the Associate Complaints Director notified Dr. McIntyre that they were initiating a complaint against him under s. 56 of the *Health Professions Act* ("HPA") regarding his failure to respond to the CPSA Continuing Competence communications and comply with the Continuing Competence Standard of Practice. By a further letter dated December 18, 2023, sent via the Physician Portal, Dr. McIntyre was asked to respond to the complaint.
 - f. Dr. McIntyre submitted a response to the complaint on June 20, 2024.
 - g. On June 25, 2024 CPSA notified Dr. McIntyre that the Associate Complaints Director had directed the matter to the CPSA's resolution process. On several occasions over the months that followed, CPSA asked Dr. McIntyre to confirm his compliance with the Continuing Competence Program, eventually providing a final deadline of October 23, 2024. Dr. McIntyre did not comply by this deadline.
 - h. On November 27, 2024 the CPSA Complaints Director assigned the matter to investigation, appointing an investigator and expanding the scope of the investigation to include a new issue of Dr. McIntyre failing to respond to the Complaints Director.
 - i. In December 2024 Dr. McIntyre agreed to address his non-compliance with the CPD requirements, but still failed to do so.

- j. On January 9, 2025 CPSA provided a letter to Dr. McIntyre via registered mail, email and the Physician Portal, with a final deadline of January 21, 2025 to respond to CPSA. By letter dated January 22, 2025 CPSA extended this deadline to February 5, 2025, advising Dr. McIntyre that if he failed to respond by the deadline, the matter would be referred to a hearing.
- k. A Notice of Hearing dated July 18, 2025 was issued by the CPSA Hearing Director for a hearing commencing September 28, 2025 (which was later adjourned to January 27, 2026 at Dr. McIntyre's request), and Dr. McIntyre was served with the Notice of Hearing by email through his CPSA physician portal.
- l. Meanwhile, on May 14, 2025, the Complaints Director made a request to the Registrar for an interim order under s. 65 of the HPA, giving Dr. McIntyre 30 days to contact the College of Family Physicians of Canada and collaboratively create a plan as to how he would come into compliance his Continuing Competence Program requirements, failing which his practice permit would be suspended. By letter dated July 22, 2025, Dr. McIntyre was given an opportunity to respond to this request. However, Dr. McIntyre did not respond.
- m. The Registrar imposed the interim condition sought by the Complaints Director effective August 20, 2025, giving Dr. McIntyre 30 days to comply.
- n. On October 6, 2025 Dr. McIntyre wrote to the CPSA confirming the steps he had taken to bring his CPD requirements up to date. Accordingly, Dr. McIntyre's practice permit was not suspended under s. 65 of the HPA.

V. SUBMISSIONS

- 10. The Complaints Director made brief submissions, highlighting Dr. McIntyre's admissions and the contents of the Agreed Exhibit Book, and urging the Hearing Tribunal to accept Dr. McIntyre's admission and the joint submission on penalty under s. 70 of the HPA. The Complaints Director's submissions regarding penalty are summarized in section VIII of this decision.
- 11. Counsel for Dr. McIntyre acknowledged Dr. McIntyre's admission of unprofessional conduct and asking the Hearing Tribunal to accept Dr. McIntyre's admission and the parties' joint submission on penalty. Counsel's more extensive submissions on penalty are summarized in section VIII of this decision.

VI. FINDINGS

- 12. The Hearing Tribunal accepts Dr. McIntyre's admission, made in accordance with s. 70 of the HPA, that all three allegations in the Notice of Hearing are factually proven and amount to unprofessional conduct.

VII. DECISION WITH REASONS

13. Based on its review of the Agreed Exhibit Book, the submissions of counsel for the Complaints Director and for Dr. McIntyre and Dr. McIntyre's admissions, the Hearing Tribunal was satisfied that the allegations were factually proven and amounted to unprofessional conduct.
14. With respect to the first allegation, the evidence demonstrated that Dr. McIntyre failed to fulfill the College of Family Physicians' Mainpro credit requirements as required for compliance with CPSA's Continuing Competence program. This failure, which was admitted by Dr. McIntyre, is directly linked to Dr. McIntyre's non-compliance in entering completed ongoing continuing education into Mainpro+, a platform provided by the College of Family Physicians of Canada for tracking and monitoring compliance with CPD requirements. The CPSA Standard of Practice on Continuing Competence requires a regulated member to undertake CPD and record their CPD on Mainpro+. Dr. McIntyre failed to comply with this Standard of Practice, and his failure amounted to unprofessional conduct.
15. With respect to the second allegation, the evidence reviewed by the Hearing Tribunal established that Dr. McIntyre failed to respond to correspondence from Dr. ██████████, Assistant Registrar responsible for Continuing Competence, regarding the outstanding CPD requirements. This was with respect to Dr. ██████████ letters dated August 1, 2024 and September 26, 2024 regarding those outstanding CPD requirements. Again, Dr. McIntyre has admitted failing to respond in both instances. Regulated members are required to comply with CPD requirements. When a regulated member fails to respond to repeated communications from CPSA, aimed at ensuring their compliance with CPD requirements, it undermines CPSA's ability to ensure regulated members are taking appropriate steps to maintain their professional competence. This amounts to unprofessional conduct.
16. With respect to the third allegation, the evidence reviewed by the Hearing Tribunal demonstrated that Dr. McIntyre failed to cooperate with the CPSA investigator assigned to investigate the section 56 complaint arising from Dr. ██████████ referral to the Complaints Director concerning the outstanding CPD requirements. Again, Dr. McIntyre admitted that he did not cooperate with the CPSA investigator. Section 1(1)(pp)(vii)(B) of the HPA makes clear that failure to comply with a request of or cooperate with an investigator falls may amount to unprofessional conduct. In this case, the Hearing Tribunal is satisfied that it does.

VIII. ORDERS

17. Along with Dr. McIntyre's admission, the parties presented a joint submission on sanction to the Hearing Tribunal. This included a 14-day suspension to be served within 90 days of the Hearing Tribunal's written decision; completion, at Dr. McIntyre's own cost, of the PBI Risk Management Essentials Course by the end of 2026; and payment of a \$4,000 fine and \$6,000 of the costs of the

investigation and hearing within six months of the Hearing Tribunal's written decision. In response to questions from the Tribunal, the parties clarified that the 14-day suspension was to be served consecutively, and that arrangements were in place to ensure it did not disrupt patient care.

18. Counsel for the Complaints Director submitted a brief of law outlining the legal principles and considerations applicable when a Tribunal is asked to accept an agreed admission and joint submission. The public interest test set out by the Supreme Court of Canada in *R v Anthony-Cook* has been consistently followed by Hearing Tribunals of the CPSA. Applying it to the professional disciplinary context, the Complaints Director submits that a tribunal should take a joint submission on sanction very seriously and only disregard it if it is manifestly unjust and not in the public interest to accept. This high threshold is essential because, for joint submissions to be possible, the parties must have a significant degree of confidence they will be accepted.
19. Regarding the appropriateness of the proposed sanctions, counsel for the Complaints Director provided the Tribunal with authorities to support the range of penalties and to demonstrate that the proposed sanctions are reasonable, proportionate, and consistent with prior decisions. Specific reference was made to the *Barr, Tse* and *Mowbrey* decisions.
20. Counsel for Dr. McIntyre expressed the sincerest apologies of Dr. McIntyre and recognition of the importance of physicians responding to and cooperating with their governing body in a timely manner. Through counsel, Dr. McIntyre acknowledged the importance of conducting himself in a manner consistent with the ethical and professional obligations of a regulated member of the College.
21. Some background on Dr. McIntyre was provided to the Tribunal by counsel for Dr. McIntyre. Dr. McIntyre has been practicing family medicine in Red Deer, Alberta for forty-five years. In addition to his family practice, Dr. McIntyre also cares for hospice and long-term care patients. He is on the board for his primary care network, including acting as chairman and chair of the complex care committee.
22. When Mainpro+ was revamped a number of years ago, Dr. McIntyre found the technology difficult to navigate and he fell behind in reporting the professional development he was obtaining. While Dr. McIntyre did have some interactions with CPSA over the years in an effort to address this situation, he admits that he did not remedy the lapse. Dr. McIntyre recognizes that a busy practice does not excuse his failure to fulfil his professional development reporting duties.
23. Counsel for Dr. McIntyre made submissions on the appropriateness of the joint submission on penalty based on a number of factors as set out in the case of *Jaswal v Newfoundland Medical Board*, as follows:
 - a. **The nature and gravity of the proven allegation:** While non-responsiveness with one's governing body is serious, counsel submitted

that Dr. McIntyre's failure to respond is at the lower to mid-range of the spectrum for seriousness. There was little risk to patient safety. As demonstrated in Exhibit 1, Tab 16, Dr. McIntyre did earn many CPD credits, with the failure on his part being a failure to enter this data into the Mainpro+ system, rather than a failure to complete the CPD itself.

- b. **The age and experience of the investigated person:** Dr. McIntyre is 71 years old. He is an experienced physician who is aware of his professional obligations. Age did play a role in the difficulties he encountered with the new CPD tracking system, Mainpro+.
- c. **The investigated person's previous character and presence or absence of any prior complaints or convictions:** Dr. McIntyre has a 45-year history of practice in Alberta with no previous findings of unprofessional conduct. This is an important mitigating factor.
- d. **The age and mental condition of an offended patient:** In this case no patient was involved.
- e. **The number of times the offence occurred:** Dr. McIntyre failed to respond to the College several times as set out in the Notice of Hearing.
- f. **The investigated person's role in acknowledging unprofessional conduct:** Dr. McIntyre has admitted the charges of unprofessional conduct and thus avoided the need for a contested hearing. This is an important mitigating factor.
- g. **Other consequences for the investigated person, as a result of the allegations:** Counsel noted that the proposed penalty includes a fine and costs amounting to \$10,000, plus the cost of the PBI course, and the loss of income that Dr. McIntyre will forgo during the two-week suspension. However, counsel did not identify any other consequences experienced by Dr. McIntyre as a result of the complaint against him.
- h. **The impact on the offended patient:** This is not an applicable factor in this case.
- i. **The presence of other mitigating factors:** Dr. McIntyre's formal admission and his acknowledgement of the importance of responding to his College were again highlighted as mitigating factors. In addition, counsel submitted that Dr. McIntyre's efforts since September 2025 to come into compliance with his CPD obligations show his intent to correct his actions and ensure that he does not repeat this error in the future.
- j. **The need to promote specific and general deterrence:** With respect to specific deterrence, the agreed sanction is significant, involving a suspension, financial consequences and remediation through an ethics course. With respect to general deterrence, the agreed sanction is serious

enough to underscore the College's firm stance on the misconduct of this case and serves as an effective deterrence to other physicians.

- k. **The need to maintain the public's confidence in the integrity of the medical profession:** Counsel submitted that the proposed sanction fulfils this need.
 - l. **The degree that by consensus the conduct falls outside the permitted range of conduct:** The failure by Dr. McIntyre to respond to the College does fall outside that range.
 - m. **The range of the penalty with respect to similar cases:** The parties submitted prior decisions in *Barr*, *Tse* and *Mowbrey* as comparable cases. Counsel for Dr. McIntyre submitted that the proposed sanctions fall squarely within the range of sanctions in similar cases.
24. On this basis, the parties submitted that the joint submission on penalty was reasonable and not contrary to the public interest.
 25. The Hearing Tribunal considered the parties' submissions and was satisfied that the joint submission on penalty is reasonable and not contrary to the public interest.
 26. The long and distinguished career of Dr. McIntyre, with no prior disciplinary proceedings before the College, was a significant mitigating factor.
 27. The Tribunal also noted that no patients were affected by Dr. McIntyre's unprofessional conduct.
 28. However, the failure of Dr. McIntyre to fulfil the College's reporting requirements for his continuing education, coupled with his initial and repeated failures to respond to requests to address this concern, even after agreeing to do so, constitute a serious breach of professional conduct. All registered members of the College, regardless of length of service, must comply with these requirements and must respond to the College when requested to do so.
 29. The proposed submission on penalty was within the range of sanctions ordered in comparable cases as jointly submitted by the parties.
 30. The Tribunal agreed that a suspension of 14 days would act as both an effective specific deterrence against any future lapse of continuing competence reporting by Dr. McIntyre, as well as a reasonable general deterrence to other physicians governed by the College.
 31. The Tribunal's concerns about the impact on Dr. McIntyre's patient cohort of the 14-day suspension were allayed by assurances by both parties that coverage for this vulnerable patient population had been considered and addressed in the joint submission on penalty.

32. The joint proposal that Dr. McIntyre would complete, at his own cost, the PBI Risk Management Essentials Course addressed the concern about lack of reporting on continuing education and goes directly to the important goal of remediation.
33. The Tribunal was satisfied that a fine of \$4,000 was appropriate, reasonable, and within the range of acceptable fines for unprofessional conduct of this nature.
34. Finally, the Tribunal was satisfied that the joint submission on how the investigation and hearing costs should be allocated was reasonable and was not punitive.
35. Accordingly, the Hearing Tribunal accepts the joint submission on penalty and makes the following orders:
 1. Dr. McIntyre's practice permit shall be suspended for a period of 14 days to be served within 90 days of the dates of the Hearing Tribunal's written decision.
 2. Dr. McIntyre shall, at his own cost, attend and complete the PBI Risk Management Essentials (RM-10 Extended) Course by December 31, 2026.
 3. Dr. McIntyre shall pay a fine of \$4,000, to be paid within six (6) months of the Hearing Tribunal's written decision.
 4. Dr. McIntyre shall pay a portion of the total recoverable costs of the investigation and hearing in the amount of \$6,000, to be paid within six (6) months of the Hearing Tribunal's written decision.

Signed on behalf of the Hearing Tribunal by the Chair:



Andrew Otway

Dated this 26th day of March, 2026.