

GOVERNANCE FRAMEWORK

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This Governance Framework (also referred to as a Governance Structure) sets out the roles, rules and responsibilities of those who will govern the new college: the Board and Committees (and their related panels).

The intent of this framework is to create a modern structure that will allow the new college to efficiently and effectively address the major issues and changes impacting today's health profession regulatory bodies, including:

- the new *Health Professions and Occupations Act* (HPOA), which is designed to modernize the provincial framework for health profession regulation (it will replace the current *Health Professions Act*)
- the public's concerns and shifting expectations about systemic racism, Indigenous-specific racism, sexual misconduct, transparency, and public engagement
- the impact of limited health-care resources, data security and artificial intelligence
- the need to regulate new professions and occupations in the future.

PERSPECTIVES

Representing the public's and the professions' perspectives

Within the seven current colleges' structures, regulated professionals participate at the Board level, on Committees, and as part of the colleges' staff and through consultation.

As we amalgamate, it will be important to keep the new college's Board small (a size requirement of the HPOA) so Board members can make decisions effectively at a strategic level, while also ensuring the Board includes a diverse public perspective and an Indigenous perspective. As a result, when moving from seven colleges to one, not every profession will be represented at the Board level.

Maintaining a deep, profession-specific understanding and capacity within the overall governance framework remains vital. For this reason, the new framework adds this profession-specific capacity at the Committee and staff levels. With the larger organization, consultation with the professions and the public is expected to increase under this framework.

Representing Indigenous perspectives

A goal of the new framework is to integrate and centre the voices of Indigenous people on the Board, on Committees, at staff levels, and through meaningful consultation. This includes those who:

- have Indigenous-lived experience
- are First Nations title holders
- represent First Nations governments
- are First Nations, Inuit, Métis people and their organizations.

Territory Acknowledgment

Together, the seven amalgamating colleges regulate more than 13,000 health professionals, including: Dietitians, Optometrists, Opticians, Occupational Therapists, Psychologists, Physical Therapists, Speech Language Pathologists, Audiologists, and Hearing Instrument Practitioners, who practise in the province of what is referred to today as B.C. We acknowledge that these health regulatory colleges serve all people living in the traditional and unceded territories of more than 200 First Nations and Indigenous people from all parts of colonial British Columbia. Indigenous refers to First Nations, Métis and Inuit Peoples in Canada.

PRINCIPLES FOR FRAMEWORK'S DESIGN

To ensure that all of the relevant aspects necessary for the new college's governance and decision making were considered when developing this framework, the following principles were established and adhered to:

1 Protect the public

... by making governance decisions that ensure BC's diverse public receive safe, ethical and competent health-care services.

2 Comply with the law

... including common law, the *Health Professions Act*, *Declaration on the Rights of Indigenous Peoples Act*, and *Freedom of Information and Protection of Privacy Act*.

3 Ensure diverse perspectives inform decisions

... from those who have the skills and lived-experiences needed to make good decisions.

4 Allow for flexibility

... as operations will evolve over time.

5 Build on success

... of what is already working well.

6 Integrate Indigenous perspectives

... into the college's governance structure, consultation framework and leadership.

7 Bridge to the HPOA

... so that few major policy changes will be needed when the new Act is implemented.

THE BOARD



6 registrant members + 6 public members

- Not more than one member from each profession.
- Not all professions will have a seat on the Board.
- Appointed by the Minister of Health.

Composition

In accordance with the Board composition matrix, members will bring diverse practice, lived experience, provincial geography, and professional skills to the table. Of the 12 Board members, the goal is to have at least two Indigenous members.

Terms of office

Up to two terms of 3 years each. After this, a person can be a member again after a 3-year hiatus.

Chair & Vice Chair

Elected from Board membership by fellow members.

Appointments/ elections

The first Board of the college will be appointed by the Minister of Health.

If registrant Board members have terms expiring prior to the HPOA coming into effect, they will be replaced via elections. The following diagram represents the process for an election, **if one is needed**:



THE COMMITTEES

Board Support Committees



Composition

Board members plus governance experts

Board members plus financial oversight experts

Board members and Executive HR expertise, if required

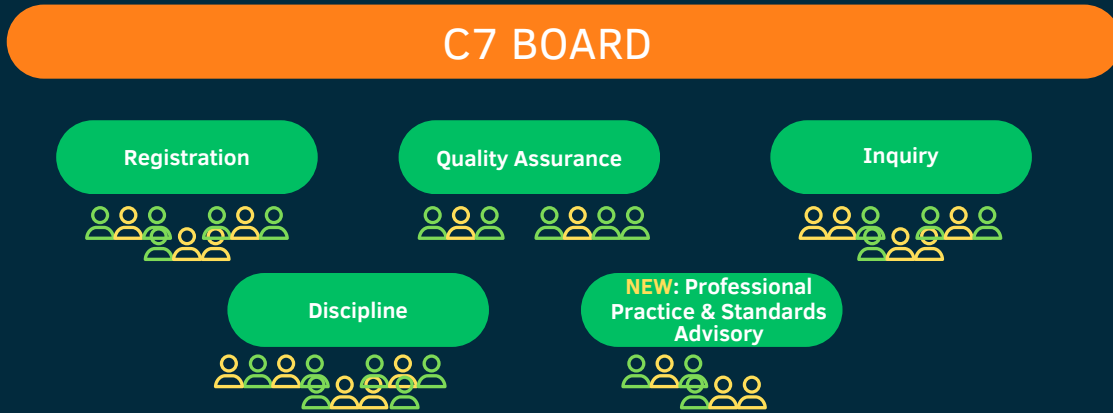
Role and responsibilities

- Ensure the College’s governance framework is effective in supporting the College’s mandate.
- More specifically, help the Board assess its own effectiveness, composition and development, as well as that of its committees.

- Advise the Board in matters related to College finances, including such matters as:
 - resource management
 - budget development and review
 - audit issues
 - financial policies and controls.

- Oversee and facilitate performance and compensation review process for the Registrar and CEO on behalf of the Board
- Make recommendations related to Registrar and CEO succession planning.
- Advise the Board on alignment of Human Resources policies with the College’s mandate and priorities.

Regulatory Committees (with panels)



Details of the Registration, Quality Assurance, Inquiry, and Discipline committees

Committee composition

- Each Committee will be made up of a number of members from each profession and members of the public.
- Small groups of Committee members will be selected from this pool of members to form “panels” that will undertake specific Committee work.
- Working with the college’s operational leaders, the Committee Chair will determine the size and composition of panels needed to best support the college’s regulatory operations.
- Each Committee will have a matrix of the collective skills, knowledge and diversity that are ideal for the Committee members to bring to the work of the panels.
- Each Committee will endeavour to have Indigenous perspectives available to bring to the work of the individual panels, as needed.
- Board members cannot be members of Regulatory Committees.

Chair & Vice Chair

- Appointed by the Board for a term of one year.

Panel composition

- Regulatory Committees will work in panels.
- Will be made up of at least three members who collectively have the necessary expertise to deal with the matter being considered. A panel can have more members depending on the matter being addressed.
- Will include members of the public.
- If the work or decision relates to a registrant/applicant or to a profession-specific matter, then at least one panel member will be from the same profession; nothing will prevent the college from going higher than this minimum.

Panel selection & specialization

- Panels will be formed by the Committee Chair in consultation with staff.
- Panels can begin to develop expertise in such areas as fraud, trauma, sexual misconduct, racism, etc.

Roles and responsibilities

Registration Committee: Establish the conditions or requirements for registration of a person based on the review and alignment of the person’s knowledge, skills, and abilities with the standards of academic achievement, competencies, or other qualifications established under the Health Professions Act and the College bylaws. Grant registration on that basis.

Quality Assurance Committee: Establish and oversee the College’s quality assurance programs to promote high standards of practice among registrants of each of the designated health professions.

Inquiry Committee: Review complaints against registrants made by the public and other regulated health professionals, and all matters that the Committee decides to investigate of its own motion.

Discipline Committee: Following a disciplinary hearing, make one or more determinations about the registrant’s conduct, or dismiss the citation.

Details of the new Professional Practice & Standards Advisory Committee

Professional Practice & Standards Advisory Committee (PPSAC) members will be an advisory resource to the Board and staff with respect to policy and standards that involve or impact the specific practice of a profession.

Committee Composition

- Made up of members from each regulated profession, members of the public, and other professionals (if required).
- Registrar or their delegate selects panel members.
- Committee will work in profession-specific or multi-profession panels, depending on issue.
- Committee will have a matrix of the collective skills, knowledge and diversity that are ideal for the Committee members to bring to the work of the panels.
- Committee will endeavour to have Indigenous perspectives available to bring to the work of the individual panels, as needed.
- Board members cannot be members of Regulatory Committees.

Chair of PPSAC Committee & Panels

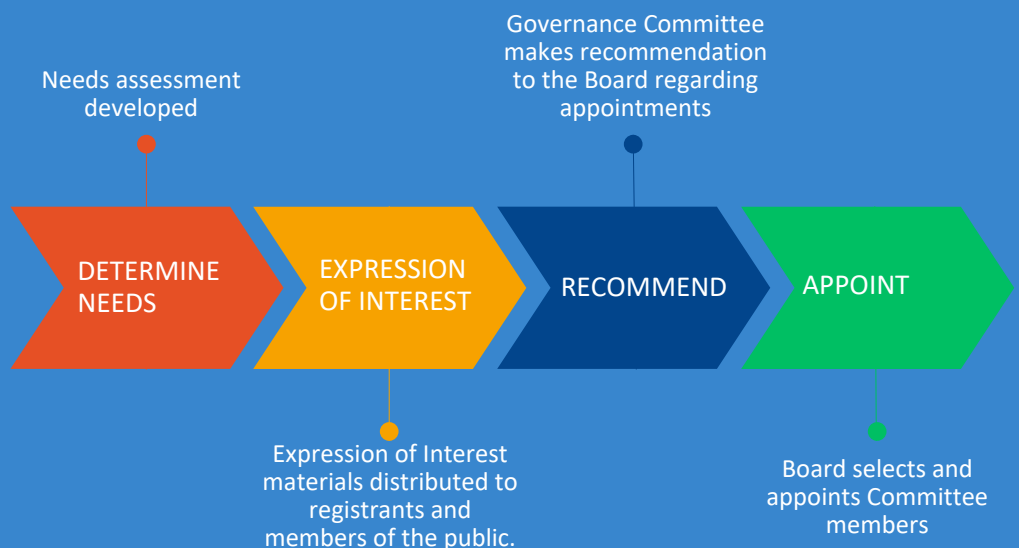
- Registrar or their delegate.

Role & Responsibilities

- Provide profession-specific perspective, advice and context to inform the Board and staff on standards, practice, and policy.
- The Committee is advisory only and does not have decision-making authority.

How Committee members will be appointed (post amalgamation)

Committee members will be selected based on a matrix of competencies approved by the Board. The Governance Committee, with the support of staff, will conduct a needs assessment based on this matrix, and the Board will appoint registrants and public members to fill identified gaps.



HOW CURRENT COMMITTEES WILL SHIFT UNDER THE NEW FRAMEWORK

Not all current Committees' roles align directly with the Governance Framework for the new college. For those that do not directly align, or that undertake roles that will come under two Committees in the new framework, the following shifts will occur:

- a Committee will no longer exist as a Committee under the new framework, but will become a panel of a relevant Committee
- a Committee may be responsible for less or more than it was prior to amalgamation
- a Committee's role may be delegated to staff in the new college.

These Committee responsibilities may shift again as the new college operationalizes and determines what works best.

C7 BOARD

Board Support Committees

Governance

Finance, Risk & Audit

Human Resources

Regulatory Committees

Registration

Quality Assurance

Inquiry

Discipline

NEW: Professional Practice & Standards Advisory

How current committees will shift under C7 structure

Governance (CSHBC, CDBC)

Finance (CDBC)

Human Resources Advisory (CDOBC)

Registration (all 7 colleges)

Quality Assurance (COTBC, COBC, CDOBC, CDBC, CPTBC, CPBC)

Inquiry (all 7 colleges)

Governance Working Group (COBC)

Finance & Audit (CSHBC)

Patient Relations (COBC, CDOBC)

Discipline (CSHBC, COBC, CDOBC, CDBC, CPTBC, CPBC)

Quality Assurance & Professional Practice (CSHBC)

TO SPLIT: QA to QA; Prof. Practice to PPSAC

Governance & Nominations (CDOBC, CPTBC)

Financial Resources Advisory (CDOBC)

Stakeholder Relations Advisory (CDOBC)

TO SPLIT: Patient Relations to Board; Ethics & Stds to PPSAC

Patient Relations, Ethics & Standards (COTBC)

Pharmaceutical Advisory (CDOBC)

Indigenous Cultural Safety Task Force (CPBC)

Committee to be reassessed by new college CEO and Board. Obligations and commitment toward Cultural Safety and Humility will be under the stewardship of the Board.