# Patient-Centred Care Committee Terms of Reference

BCCOHP's governance structure is focused on transparent decision making in the public interest.

BCCOHP committees are accountable to the Board. Each committee has specific duties and responsibilities that help the Board meet its mandate. Committees support the Board and help the Board to meet its regulatory responsibilities.

Committee members collaborate with professional staff to meet BCCOHP's mandate.

### Mandate

The Patient-Centred Care Committee will:

- oversee the development of a patient relations program to prevent professional misconduct of a sexual nature;
- review standards and guidance from the patient perspective; and
- develop and oversee public interest initiatives.

### Composition

The committee is composed of at least 8 members. The recommended composition is:

- 4 registrants or certified dental assistants
- 4 public members

The Board must designate a public member of the Patient-Centred Care committee as the Chair of the committee, and at least 50 percent of the total membership must consist of public members. Board members cannot be members of the Patient-Centred Care Committee.

The Board appoints committee members for terms of 1 or 2 years, to a maximum of 6 consecutive years.

#### Mailing Address

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### **Composition Matrix**

BCCOHP will aim to appoint individuals with the following competencies to join the Patient-Centred Care Committee:

#### Lived experience

Lived experience accommodating or navigating a spectrum of physical, mental health, or cognitive abilities, the knowledge of which can enhance relevant, thoughtful decisions that protect the public.

#### **Traumatic Experience Awareness**

Experience in, understanding of, and sensitivity to the effects of stress or potential stress on individuals involved in a complaint process, and experience in creating safe spaces and trustbuilding processes.

#### Lived healthcare experience

Significant personal experience or experience caring for someone with health challenges or maneuvering through the health care system.

### Authority

The authority of this committee derives from the *Health Professions Act* (HPA) and BCCOHP Bylaws Part 4.12.

### **Duties and Responsibilities**

In accordance with bylaw 4.12, the committee is responsible for:

- (a) establishing a patient relations program to seek to prevent professional misconduct of a sexual nature,
- (b) making recommendations to the board for establishing other programs to improve patient safety and accessibility of care,
- (c) monitoring the operation of the patient relations program and other programs to improve patient safety and accessibility of care established by the board,
- (d) reviewing and assessing standards and guidance relevant to the patient relations program and other programs established by the board to improve patient safety

and accessibility of care, and making recommendations to the standards and guidance committee for amendment of same,

- (e) developing and coordinating educational programs on patient safety and accessibility of care for registrants, certified dental assistants and the public as required,
- (f) collaborating with other health colleges for the purpose of developing standards and guidance under paragraph (d), and
- (g) at least every 2 years, reviewing and assessing the committee's terms of reference and making recommendations to the board for amendment of same.

In addition to the bylaws, the committee:

- (a) may direct the development of patient and public resources;
- (b) oversees strategic initiatives regarding patient and public engagement; and
- (c) establishes and oversees any other programs and initiatives it determines necessary for the public such as a cultural safety and humility program;

## **Meetings and expectations**

The Patient-Centred Care Committee meets approximately **4** times per year but may meet more often if necessary.

Committee meetings are usually during the business day for 3-4 hours and members are required to review meeting materials and be prepared for meetings. Schedule and meeting length are dependent on member availability and committee workload.

Committee members are compensated for attending meetings in accordance with the College's Remuneration and Expense Policy.



### Expectations:

In addition to the expectations for all committee members, members of the Patient-Centred Care Committee are expected to:

• Be aware of real or perceived conflict of interest they may have and to declare any conflicts of interest during meetings. Committee members must recuse themselves from any discussions or decision in which they have a conflict.