

BCCOHP BOARD OPEN MEETING**Thursday, 7 September 2023****9:25 a.m. – 11:00 a.m.****Terminal City Club
837 West Hastings Street, Vancouver, BC
Skidmore Room, 2nd Floor****MINUTES**

The British Columbia College of Oral Health Professionals (BCCOHP or "the College") Open meeting commenced at 10:45 a.m.

In Attendance

Mr. Carl Roy, Chair

Ms. Julie Akeroyd

Ms. Elizabeth (Lise) Cavin

Ms. Pat Dooley

Dr. Alexander Hird

Ms. Cathy Larson

Ms. Rachel Ling

Ms. Shirley Ross

Mr. Amandeep Singh

Ms. Kim Trottier

Regrets

Ms. Marion Erickson

Ms. Michelle Nelson

Staff in Attendance

Dr. Chris Hacker, Registrar and Chief Executive Officer (CEO)

Ms. Nancy Crosby, Manager, Board and Committee Relations

Mr. Narinder Dhillon, Senior Manager, People and Culture

Ms. Joyce Johner, General Counsel and Deputy Registrar

Ms. Karen Mok, Director, Professional Conduct, Competence and Fitness

Ms. Róisín O'Neill, Executive Director, Policy, Planning and People

Ms. Steph Nicholls, Senior Manager, Policy and Projects

Ms. Leslie Riva, Director, Registration and Certification

Ms. Jennifer Roff, Director, Professional Practice

Mr. James Spencer, Data Integration and Project Management Officer

Ms. Anita Wilks, Executive Director, Strategic Engagement and Communication

Mr. Dan Zeng, Executive Director, Finance, IT and Operations

Guests

Dr. Ben Balevi, Chair, Standards and Guidance Committee (virtual)

Ms. Julie Guenkel, Chair, Finance, Audit and Risk Committee

Mr. Doug Steele, COO, Decision Point Advisors

Dr. David Vogt, PhD, Chair, Quality Assurance Committee (virtual)

Preparation of Minutes:

Ms. Megan Krempel, Raincoast Ventures Ltd.

Call to Order

Mr. Carl Roy, Chair, called the Open Board meeting to order at 9:55 a.m. and advised that the meeting would begin with the committee reports prior to the other agenda matters.

9. Standards and Guidance Committee – Report by Chair

Dr. Ben Balevi, Chair, Standards and Guidance Committee, reviewed a series of presentation slides and offered comments regarding:

- The Committee’s mission statement and its alignment with the mission of the College
- The Committee’s role in creating standards and guidance which are consistent with the mission of providing safe, team-based, and ethical care
- Establishing a working group to develop and revise documents on subject matters
- Committee composition of seven, including four registrants and three public members
- Six committee meetings between November 2022 and July 2023
- Development of terminology, definitions, and a Terms of Reference (ToR)
- Future work involves the review of current suite of standards and guidance documents, including those in existence in other colleges.

During discussion and in response to questions, comments were offered related to:

- Clarification that the purpose for approving the Sedation and General Anesthesia (GA) Committee ToR was to enable it and not have to wait for formal approval
- Whether the Sedation Working Group could include specialists who are not full dentist registrants
- Whether there was merit in having different oral health professionals in the composition of the Record Keeping Working Group:
 - The intention is to keep the working groups’ composition small and agile
 - Suggestion that the four oral health professionals be defined by each of the disciplinaries:
 - The ToR states from “diverse groups of practice” which could be sufficient
 - This would be taken back to the Committee for further discussion
- The definition of “system thinking” should contemplate how different people study outside of dental practice.

RESOLUTION:**It was MOVED (Shirley Ross) and SECONDED (Pat Dooley)**

RESOLVED to approve the draft Terms of Reference for an Infection Prevention and Control (IPAC) Standards Working Group and a Recordkeeping Standards Working Group for recruitment and provide final approval of the Terms of Reference for the Sedation and General Anesthesia (GA) Standards Working Group. **CARRIED**

10. Quality Assurance Committee

Dr. David Vogt, PhD, Chair, Quality Assurance (QA) Committee, reported that the work on the update to the Charter was the substantive focus of the Committee. The work included many new staff members who were described as “keen and skilled” and striving to advance the Charter forward.

The Charter is a monumental undertaking and concerns were raised of whether there was the overall capacity to move it forward. A ToR for a working group was under development and would be brought forward for Board approval.

The new QA program will be greatly improved and innovative and would demonstrate the College’s leadership and forward thinking in this regard. Full implementation of the program would likely be two to three years out; however, some aspects of the program could be released in phases prior to that.

The Chair noted the QA Committee could count on the support from the Board to move the work forward.

11. Nomination and Appointment Committee

Ms. Rachel Ling, member of the Nomination and Appointment Committee (NAC), presented on behalf of the NAC Chair, Sabina Reitzik, and advised of the Committee’s focus on eligibility policy. The Committee was seeking approval for the eligibility policy, its purpose to assess an applicant’s eligibility for committee and working group membership. The policy will allow work to begin and to make recommendations to committee appointments and reappointments, including for the Sedation and General Anesthesia working group.

During discussion and in response to questions, comments were offered regarding:

- Concerns the eligibility criteria may be exclusionary specifically in regard to not permitting candidates who have been convicted of an offense in BC or another jurisdiction:
 - Many disadvantaged people, including Indigenous, are overrepresented in the area of convictions, and they should not have to face additional barriers
- The NAC found the criteria was consistent with current College bylaws:
 - It was initially contemplated to include those “charged or convicted of an offense”
- Suggestion that applicants be asked to reveal any convictions after which a determination could be made as to whether the conviction would preclude them from being a Committee member:
 - The Committee application form does ask the question of prior convictions
 - Suggestion there be a mechanism at the Committee level to make these determinations
 - Suggestion to say, “relative offence” and the relevance could be determined by the Committee:

- Concerns that the word “relative” could be interpreted in different ways.

The Board was in agreement that the policy be brought back to the Committee to consider the feedback provided and to conduct a risk assessment on the eligibility criteria.

Agenda Varied

The order of the agenda varied with the consideration of Item 13.

13. Finance, Audit and Risk Committee Report

Ms. Julie Guenkel, Chair, Finance, Audit and Risk (FAR) Committee, reported on:

- The FAR special projects for the balance of the year
- An internal control audit, separate from the financial statement, which examines the internal controls implemented by management, to ensure they are working:
 - The audit report will provide recommendations of deficiencies or best practices
 - The FAR recommendation that the audit be an annual exercise
- Development of an investment policy to provide guidance to management on how to invest excess funds
- Creation of a reserve fund policy to determine how the amount of reserves the College would like to retain on its balance sheet:
 - Auditors Smythe LLP have provided initial thoughts and directions and will explore similar institutions and industry standards
- Confirmation the policies would be completed prior to creation of the 2024-25 budget
- A potential whistleblower policy being reviewed by management and the Human Resources (HR) Committee
- Development of a staff expense policy in response to the increase in remote work and multiple locations:
 - Industry standards will be reviewed and recommendations brought to the Board
- Preparation of next year’s fiscal budget
- Committee’s recommendation that Smythe LLP be retained for the 2023-24 fiscal audit and that other auditors be considered for 2024-25 fiscal audit.

Health Break

The meeting briefly paused at 10:55 a.m. and returned at 11:00 a.m.

14. Risk Management Roadmap

Mr. Doug Steele, Principal Co-founder, Decision Point Advisors, reviewed a Risk Management Roadmap and presented recommendations for approaching broader risk management of the professions and how they interface. The Roadmap provided a path for the organization on the implementation of risk management and the Risk Management Framework would serve as a vehicle for stakeholders to fulfill their responsibilities as outlined in the document.

The intention is to gather feedback from the Board on its priorities for risk management. This would be done through a combination of online surveys and facilitated workshops over the course of the next six months.

In response to a question as to whether the Risk Management Framework would be ready for use in the budget planning, it was noted this would be unlikely; however, the legacy Risk Management Framework would still be used, and a risk management lens applied. The risk register would likely be operationalized in March 2024.

RESOLUTION:

It was MOVED (Shirley Ross) and SECONDED (Kim Trottier)

RESOLVED to adopt the Risk Management Roadmap.

CARRIED

7. Consent Agenda**7a. Approval of June 8, 2023, Open Meeting Minutes****7b. BCCOHP Board Dashboard Report Q2 - September****RESOLUTION:**

It was MOVED (Julie Akeroyd) and SECONDED (Cathy Larson)

RESOLVED that the Open Meeting Consent Agenda for the September 7, 2023, BC College of Oral Health Professionals Board meeting be approved.

CARRIED

8. Reports from Committees**8a. Inquiry****8b. Registration****8c. Sedation and General Anesthesia****12. Governance and Human Resources Committee Report**

Pat Dooley, Chair, Governance and Human Resources Committee, requested Board approval on the use of three evaluation tools for a Board evaluation, a Board Chair evaluation, and a Board Meeting evaluation. The evaluation forms were reviewed.

During review of the evaluation tools, comments were offered regarding:

- The intention that Board members feel they are able to submit topics of discussion for Board meeting agendas:
 - This may need to be clarified to ensure for alignment with strategic priorities
 - Board meetings have been designed to be facilitative to operational change; however, as the amalgamation stabilizes, there will be more opportunity for broader discussions
- Suggestion that the tool content be numbered
- Suggestion that the statement, “protecting the privacy of patients” is reworded possibly to “the Board regularly ensures public accountability” or “the Board regularly receives tools to ensure public accountability and the safety of the public and patients”
- Questions should be more specific and less broad/vague:
 - Clarify what is meant by “Board members receive the tools needed”
 - Clarify what is meant by “protecting public and patients”
 - Suggested wording of “the Board receives adequate information and has adequate tools in place to fulfill its mandate”
- The intention of the evaluations is to identify themes and trends
- Suggestion for a rating scale in “enhancement of fiduciary oversight”
- Confirmation that the information would be analysed by an external consultant and comments would remain anonymous
- Suggestion to add an “additional comments/areas for follow-up” section
- Suggestion to include an opportunity for Board members to evaluate themselves as a participating Board member
- Agreement to call it a “Board Meeting Evaluation”, and not a self-evaluation
- Suggestion to include in the Board Meeting evaluation, “I could have made a greater contribution if...”.

Board members will be provided the final tools inclusive of Board feedback, along with instructions and a timeline. All evaluation tools will be kept confidential and the external consultant will summarize the data in a report and provide findings to the Board.

RESOLUTION:

It was MOVED (Amandeep Singh) and SECONDED (Lise Cavin)

RESOLVED to accept the recommendation of the Governance and Human Resources Committee and approve the Board evaluation forms as amended.

CARRIED

This concludes the Open Meeting – 11:46 a.m. The Board moved into an In Camera session.