

BCCOHP's Approach to Regulatory Decision Making

Introduction

The BC College of Oral Health Professionals' (BCCOHP's) regulatory approach is a set of principles to help guide regulatory decision making on behalf of the organization.

A clearly articulated regulatory approach enhances organizational impact by providing:

- a shared interpretation of statutory authority, and
- an aligned team-based approach to our work.

BCCOHP's regulatory approach provides an overview of the work we do and how we approach it, the world in which we operate and our relationship to that world, and how we interact, communicate, and engage. It is informed by a clear understanding of our organization and its role.

The approach considers BCCOHP's statutory authority and public protection mandate. It incorporates current standards for good regulation, including right-touch and risk-based thinking to ensure our decisions focus on outcomes, are proportionate to the level of risk identified, and balance professional autonomy and regulatory oversight.

The approach aligns with the commitments made in the UN Declaration on the Rights of Indigenous Peoples (UNDRIP) and the Truth and Reconciliation Commission (TRC) focusing on Indigenous rights, self-determination, and recognition and respect for Indigenous knowledge and practices. The [appendix](#) includes a [glossary of terms](#) and [relevant legislation and resources](#) that informs our approach.

BCCOHP's Regulatory Approach prioritizes public safety while being fair, inclusive, and responsive to the needs of a diverse health community. It aims to help members of the public, patients, oral health professionals and other stakeholders understand how we make regulatory decisions and what they can expect from us as a regulator.

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BCCOHP's Regulatory Approach is made up of two parts:

- 1** **Role Clarity**
defines our organizational role as a health regulator
 - 2** **Principles and Actions**
provides rules for how we approach our regulatory work and actions that flow from them
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Part 1 | Role Clarity

BCCOHP's mandate

To serve the public by regulating 16,000 oral health professionals, including certified dental assistants, dental hygienists, dental technicians, dental therapists, dentists and denturists by:

- Ensuring that oral health professionals are able to practice competently
- Setting expectations for the delivery of safe and patient-centred oral health care
- Investigating complaints about oral health professionals

What is BCCOHP?

To meet its mandate, BCCOHP is an objective, authoritative decision-maker in the public interest that is part of the health care system, contributing to improved health outcomes for patients and the public of BC by managing risk and supporting the delivery of safe care by the oral health team it oversees.

What this means:

BCCOHP is a decision-maker

BCCOHP is a regulator. A regulator is a decision-maker. We make regulatory decisions in the public interest and consider the impact our decisions will have on health outcomes for patients and the public of BC.

BCCOHP puts patients and the public first

We are a regulator in the public interest and are accountable to patients and the public of BC. All those who make regulatory decisions on behalf of BCCOHP (e.g. staff, board and committee members) must do so as regulators, putting the interests of patients and the public first.

BCCOHP is objective

We take an independent approach to regulation and act objectively and consistently without conflict of interest, bias, or undue influence, while maintaining engagement and accountability.

BCCOHP is authoritative

We are established under the *Health Professions Act* and have legislative authority over the oral health professionals we regulate. Our authority is bestowed by the government acting on behalf of residents of BC, and we are accountable to the public through the Ministry of Health.

BCCOHP is part of the health care system in BC and contributes to improved health outcomes for patients and the public

We are part of the BC health care system that supports health care delivery and works to ensure everyone who accesses health services receives appropriate care. We work within this system and our statutory authority to improve health outcomes for people residing in BC.

BCCOHP improves health outcomes by managing risk

We manage risk by focusing on the prevention of harms to patients and the public. We create standards for the oral health team that are proportionate to the inherent risk in specific aspects of oral health care rather than legislated scopes of practice.

BCCOHP improves health outcomes by supporting the delivery of safe care by the oral health team it oversees

We look at risk from the perspective of the oral health team and support collaborative approaches to ensure the provision of safe care. We support the oral health team by

creating expectations for a positive team culture that embraces compassion, trust and respect.

Part 2 | Principles & Actions

Principles

Principles are fundamental truths about an organization. The following BCCOHP principles define how we approach our work and inform how we make regulatory decisions. They are foundational to consistent and appropriate decision-making in the interests of patients and the public.

1. We are aligned with our role

We have a clear understanding of our mandate and make regulatory decisions that are within our legislated authority, and the scope and objectives of the organization.

2. We stay firm but fair

We regulate with clear boundaries and expectations, but also a willingness to listen and enact change, committing to transparent, accountable, and consistent processes.

3. We focus on risk

We direct our resources to the issues and individuals that pose the greatest risk to the public and use appropriate and proportionate regulatory force to mitigate or manage identified risks.

4. We put people first

We consider those involved and aim to build and maintain positive, healthy relationships, resolve conflicts, repair harm and restore harmony where possible.

We seek out and nurture intentional partnerships with the public, oral health professionals and other key partners, including Indigenous groups and the BC Health Regulators, to support collaborative and appropriate decision-making and communication that considers diverse perspectives and increases public trust.

Actions

The actions we take reflect and flow from the principles that frame our regulatory approach.

When making regulatory decisions, we need to be:

<p>Culturally safe and humble</p>	<p>We are committed to creating an environment that respects and acknowledges the diverse cultural backgrounds of individuals, emphasizing humility, and addressing power imbalances.</p> <p>We uphold the rights of Indigenous Peoples and commit to cultural safety and humility and elimination of Indigenous-specific racism throughout our processes.</p>
<p>Trauma-informed</p>	<p>We consider the potential impact of trauma on individuals and integrate trauma-sensitive approaches to ensure compassionate and supportive interactions.</p>
<p>Equitable</p>	<p>We take a people-centred approach and actively work to identify, remove, and prevent systemic inequalities for the people engaging with us.</p>
<p>Principle-based</p>	<p>We set expectations through high-level, broadly stated principles, rather than detailed and prescriptive rules. A principle-based approach gives latitude to the oral health professionals we oversee to make decisions that provide safe care to patients.</p>
<p>Proportionate</p>	<p>We ensure our output from regulatory decision-making is proportionate to the inherent risk. We identify risk and take appropriate, evidence-informed action to address it.</p>
<p>Data-informed</p>	<p>We collect and measure relevant data to enhance our understanding of risks and help guide and inform our decision-making. We measure the right things focusing on outcomes and apply an agile methodology that continuously tracks progress.</p>
<p>Fair and consistent</p>	<p>We treat everyone fairly and respectfully, considering the requirements of procedural fairness and natural justice, and are consistent in our actions and decision-making, while keeping in mind the specific circumstances and context of each case.</p>

Firm	We take firm action to prevent harm to patients and the public. We approach our work with conviction and confidence in our risk assessment and interpretation of our statutory authority.
Proactive and preventive	We anticipate, assess and measure risk to reduce and prevent harm. We understand the impact of regulatory decisions on health outcomes for patients and the public, and aim to be leaders in regulation, adapting, responding, and innovating to modern health regulation.
Collaborative	We form intentional partnerships to meet our objectives. We communicate and engage often to ensure that humble and safe practices guide our policy development and regulatory decision-making.
Enabling	We support the oral health professionals we regulate in providing safe care and believe open dialogue, clear communication and engagement produce more satisfactory results than enforcement alone. We also help patients and the public understand what to expect from their oral health professionals, enabling them to be partners in their oral health care.
Transparent	We are open and clear in our processes and communications allowing for visibility and understanding of our approach and the outcomes of our decisions.

Appendices

- [Appendix 1 – Glossary of Terms](#)
- [Appendix 2 – Relevant Legislation and Resources](#)

Appendix 1 – Glossary of Terms

This glossary provides key definitions for terms related to health regulation and serves as a guide to navigate and understand the essential concepts in BCCOHP's Regulatory Approach.

Anti-discrimination: Policies and practices designed to prevent discrimination based on characteristics such as race, ethnicity, gender, sexual orientation, or other protected attributes within the health care regulatory framework.

Cultural safety and humility: A commitment to creating an environment within health care regulation that respects and acknowledges the diverse cultural backgrounds of individuals, emphasizing humility, and addressing power imbalances.

Data-informed: Regulatory processes that incorporate relevant data to enhance understanding and guide decision-making, without solely relying on data but using it as one of several influencing factors.

Fair: Just and impartial treatment without favoritism or discrimination, ensuring equal opportunities and outcomes for all health care professionals and stakeholders.

Health outcomes: The results of health care interventions and practices on the health status of individuals and communities, often measured by improvements in health indicators and overall well-being.

Outcomes-focused: Regulatory approaches that prioritize the achievement of positive health outcomes, emphasizing the impact of regulations on patient safety, public health, and the overall quality of health care services.

Principles of good regulation: Established principles that guide regulatory practices, including transparency, accountability, proportionality, consistency, and responsiveness, to ensure effective and ethical regulation.

Public protection: The primary goal of health regulation, emphasizing measures and interventions that safeguard the health and well-being of the public by maintaining safe health care practice.

Right-touch thinking: Ensuring that interventions and requirements are proportionate to the level of risk identified, avoiding any unnecessary regulatory burdens that may impede the delivery of quality health care. Striking a balance between professional autonomy and regulatory

oversight, recognizing that right-touch thinking involves respecting the expertise of health care professionals while intervening when necessary to protect public safety.

Risk: The probability of harm or adverse events occurring as a result of health care practices or regulatory decisions.

Risk-based regulation: A regulatory approach that assesses and addresses risks to public health, safety, and well-being, tailoring interventions based on the level of identified risk.

Statutory authority: The legal power granted to a regulatory body by legislation, outlining its jurisdiction, duties, and responsibilities in overseeing and regulating health care professionals. This involves a clear understanding of the legal framework, respecting the boundaries set by legislation, and ensuring decisions are within the scope of the authority granted.

Trauma-informed: Regulatory practices that consider the potential impact of trauma on individuals and integrate trauma-sensitive approaches to ensure compassionate and supportive interactions.

Transparent: Openness and clarity in regulatory processes, decision-making, and communication, allowing for visibility and understanding of the regulatory framework by health care professionals and the public

Appendix 2 – Relevant Legislation and Resources

BCCOHP's regulatory approach aligns with statutory requirements and commitments, as well as consideration of modern approaches to regulation and health care.

Statutory Authority

- [Health Professions Act \(and forthcoming Health Professions and Occupations Act\)](#)
- [Human Rights Act](#)
- [Declaration on the Rights of Indigenous Peoples Act \(DRIPA\)](#)
- [United Nations Declaration on the Rights of Indigenous Peoples Act](#)

Regulatory Resources

- [Right-Touch Regulation](#)
- [Modernization of Health Professions in BC](#)
- [In Plain Sight Report](#)
 - [In Plain Sight Summary Report](#)
- [Truth and Reconciliation Commission of Canada](#)
- [United Nations Declaration on the Rights of Indigenous Peoples \(UNDRIP\)](#)