BCCOHP | British Columbia College of Oral Health Professionals

BCCOHP BOARD OPEN MEETING
Thursday, 19 June 2025
9:00 a.m. – 12:00 p.m.

BCCOHP Offices
110-1765 West 8th Avenue, Vancouver, BC
"Karen England" Room

MINUTES

The British Columbia College of Oral Health Professionals (BCCOHP or "the College") Open meeting commenced at 9:02 a.m.

In Attendance

Carl Roy, Chair
Julie Akeroyd
Tianna Armstrong
Elizabeth Cavin
Pat Dooley
Marion Erickson
Dr. Andrew Irwin (virtual)
Hooman Janami
Dr. Lina Jung
Rachel Ling
Shirley Ross
Amandeep Singh

Regrets: N/A

Staff in Attendance:

Dr. Chris Hacker, Registrar and CEO
Bethany Benoit-Kelly, Director, Communications and Engagement
Katy Carson, Director, Cultural Safety and Humility
Thomas Chan, Chief Operating Officer
Chloe Lo, Director, Registration and Certification
Ruby Ma, Director, Non-Hospital Surgical Facilities
Karen Mok, Deputy Registrar and General Counsel
Roisin O'Neill, Deputy Registrar and Executive Director, Transformation
Ronald Revell, Executive Director, Strategy & Integration
Jennifer Roff, Deputy Registrar and Executive Director, Regulation
Sasan Solaimani, Technical Support

Invited Guests:

Benson Cowan, Office of the Superintendent of Health Profession and Occupation Oversight (Virtual)

Public Attendees

Angus Barrie, Member of the Public

Preparation of Minutes
Megan Krempel, Raincoast Ventures Ltd.

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1. Call Meeting to Order and Territorial Acknowledgement

Carl Roy, Chair, called the meeting to order at 9:02 a.m. and provided a territorial acknowledgement. BCCOHP staff in attendance were invited to introduce themselves for the benefit of new Board members, Tianna Armstrong and Dr. Andrew Irwin.

2. Roundtable Introductions *(attachments)*

1. Demonstration of Learning

Katy Carson, Director, Cultural Safety and Humility, shared the concept of the Demonstration of Learning to ground the meeting in relational space and assist the Board members to get to know each other as people and not just for the work they do.

Tianna Armstrong shared a First Nations story of a transition stone, located on the banks of the Fraser River, and its teachings of sharing and living right.

Board members participated in a round of introductions and personal reflections.

Chair Roy welcomed Angus Barrie, a one-time Chair of the Technicians Board and one of the original contemplators of the amalgamation of the colleges, who was attending as a member of the public.

3. Declaration of Interest

No Declarations of Interest were raised. Chair Roy reminded Board members to raise any perceived potential conflicts at any point during the meeting.

Chair Roy departed the room at 9:47 a.m. for the Election of the Board Chair.

4. Board Chair Election *(attachment)*

Karen Mok, Deputy Registrar and General Counsel, noted that per BCCOHP bylaws, the election of the Board Chair would usually coincide with Board Member elections; however, in 2024, the Board Chair was elected for a one-year term, which had now expired.

Karen Mok reviewed the election process and called for any nominations for Board Chair. Carl Roy was nominated for the position. Hearing no further nominations, Carl Roy was elected BCCOHP Board Chair by acclamation.

Chair Roy returned to the meeting at 9:49 a.m. and thanked Board members for the nomination; he was motivated to complete the workplan with fellow Board members.

5. Approval of June 19, 2025 Open Board Meeting Agenda *(attachments)*

RESOLUTION:
It was MOVED (Marion Erickson) and SECONDED (Dr. Lina Jung)
RESOLVED that the BC College of Oral Health Professionals Board approve the Open Meeting Agenda for the June 19, 2025, meeting.

CARRIED

6. Consent Agenda *(attachments)*

1. Approval of March 13, 2025 Open Board Meeting Minutes
2. Reports from Committees (attachments)
   a. Inquiry
   b. Quality Assurance
   c. Registration
   d. Sedation and General Anesthesia
   e. Standards and Guidance

It was noted the spelling of Julie Akeroyd's surname was incorrect in the March 13, 2025 Open Board Meeting Minutes. It was suggested that if a committee did not have information to report to the Board, their report be left out of the Consent Agenda.

In response to a query regarding the dissolution of the Quality and Assurance Committee Working Group, it was suggested this be discussed during the Board's In Camera Meeting.

RESOLUTION:
It was MOVED (Dr. Lina Jung) and SECONDED (Shirley Ross)
RESOLVED that the items on the Open Consent Agenda for the June 19, 2025, BC College of Oral Health Professionals Board meeting be approved.

CARRIED

7. Office of the Superintendent of Health Profession and Occupation Oversight

Benson Cowan, Director of Discipline, Office of the Superintendent, reviewed a presentation titled, "Transition to the Health Professions Discipline Tribunal: Changes to the Discipline Process" and highlighted:

- The *Health Professions and Occupations Act* (HPOA) established an independent Discipline Tribunal (Tribunal) which operates independently from the Superintendent's Office and the Ministry of Health (MoH)
- The Tribunal reports annually to the Superintendent and its report is made public
- There is ongoing recruitment of a Deputy Director of Discipline
- Tribunal members have specialized experience in areas key to the Tribunal's mandate; this includes a member from each of the 29 regulated health professions
- The Discipline Panel is comprised of three members, including a Chair, a member of the profession of the respondent in that case, and a support staff component

- The Tribunal's responsibility includes:
  - Approval of resolutions of sexual abuse matters
  - Decisions on requests for citations for matters that have not been resolved by the Investigation Committee and Registrar
  - Approve proposed resolutions after request for citations
  - Management and conduct of hearings
  - Oversight of publications and discipline orders and requests for citations
  - Request for review of disciplinary orders
- Tribunal oversight of the publication of orders as per section 256(1) and 256(4)
- During BCCOHP Fiscal 2024-2025 BCCOHP:
  - Five public notifications
  - 139 complaints resolved under the *Health Professions Act* (HPA), which would likely require some publication under the new HPOA
  - Over 100 dismissed cases that may require some publication under the HPOA
- The Tribunal is working to ensure its oversight is clear, effective, and does not create unnecessary process or confusion
- Continued review of disciplinary contexts for each college and development of a consultation document dealing with the publication of orders and hearing process
- The Tribunal's aim to be receptive to feedback, ensuring it serves the needs of the colleges, the parties in the proceedings, and the public.

Discussion ensued, and comments were offered related to:

- Clarification there would be no retroactive publication of disciplinary actions for cases that have proceeded to hearing; they would proceed under the HPA
- Cases that have not proceeded to hearings when the HPOA comes into effect will be treated as a new process
- Prohibitive clauses restrict the basis on which courts are able to review decisions
  - A more formal structure for the appeal process will be advocated for
- Whether there would be a communication strategy for the public to access information on published cases under the HPOA
  - It is the college's obligation to publish, define what "published" means, and how information is accessed by the public
  - Colleges will have the ability to dispose of some matters with a warning and/or advice and not have it be public
  - There will be a large number of cases where discipline is reported where it was not previously under the HPA
- Lack of clarity in the HPOA on how long a case must be published for
- Potential for the life cycle of some high-risk cases to be shortened under the HPOA.

Benson Cowan departed the meeting at 10:29 a.m.

Health Break

The meeting recessed at 10:30 a.m. and reconvened at 10:43 a.m.

8. HPOA Readiness Project – Board Steering Committee Updates *(attachments)*

Ronald Revell, Executive Director, Strategy and Integration, provided an overview of the rationale for the creation of the new HPOA, primarily the need for it to be reflective of the current regulating environment and to protect patients from financial, emotional, and discriminatory harms.

During a presentation on the comparison of board governance between the HPA and HPOA, the following was highlighted:

- Goals for the new legislation:
  - Modernize regulations to allow colleges to adapt quickly to changing healthcare development and expectations of patients
  - Embed cultural safety and humility and Indigenous-specific anti-racism in every aspect of the college and healthcare delivery
  - Smaller boards (8-12 members) with 50% each of public and professional members
  - More detail in the HPOA previously provided within bylaws
- Main governance changes:
  - Defines distinction of governance and operational elements of the colleges and sets out responsibilities of Board, registrar/CEO and staff
  - Removes the option to have a Board Executive Committee
  - Boards to focus on governing and ensuring operations comply with obligations of the HPOA
  - Registrar has final responsibility for all administrative and operational matters of the college
  - Fewer formal college committees will remove duplication of governance
  - Establish authority for the registrar to form working groups when needed
- HPOA Guiding Principles of particular importance under Sections 14 and 15
- Board responsibilities under the HPOA and HPA.

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

- The importance of Board members understanding the legal basis of their work and the statute
- Board committees must be made aware and educated on the HPOA changes and implications for their committee work
  - Committee members must have access to the information prior to it being released publicly.

It was requested that a copy of the presentation be shared with Board members.

The Board reviewed several bylaw sections, and members were asked to provide input. During discussion, comments were offered regarding:

- Part 2 – Board

  - For the purposes of transparency, the reasons for having a Closed Meeting must be stated
- Part 3 - Committee
  - Suggestion it be clarified that committee terms are three-year terms and members cannot exceed two consecutive terms
  - Certified Dental Assistants (CDA) could sit on committees as public members
  - Committee panels must include a representative of the same profession of the respondent
- Part 4 – College Administration
  - Clarification needed on the reference to paragraph "4" under 4.12 (2a)
  - Conflict of interest is a predominant theme throughout the statute to ensure maximization of integrity in the function
  - Seeking external legal advice in regard to the need for indemnification and insuring college board and staff
  - Board members are individually indemnified, both individually and collectively.

RESOLUTION:
It was MOVED (Dr. Lina Jung) and SECONDED (Shirley Ross)
RESOLVED that the BC College of Oral Health Professionals Board approve the draft bylaws as presented in principle, to help inform the ongoing drafting process and to be amended as needed.

CARRIED

9. Potential Public Sector Requirements as Part of the Government Reporting Entity (GRE) ***(attachments)***

Karen Mok provided an update on ongoing discussions with regulatory colleges and the MoH in regard to the GRE. Under the HPOA, the BCCOHP Board will be fully appointed by the MoH under the recommendations of the Superintendent's Office. The BCCOHP can provide input and will be consulted on the candidates they wish to put forward.

A provision in the HPOA led to discussion on whether colleges would fall under the GRE and be controlled by government. If that were the case, additional BCCOHP Board requirements and obligations to various ministries would be required. The MoH was working on possible exemptions for the BCCOHP and other colleges; however, it was unknown if the exemptions would be in place until after the HPOA was released.

The Board discussed the advantages/disadvantages of remaining independent of government influence, including increased transparency (advantage) and that complying with government reporting requirements would be onerous and resource-intensive (disadvantage).

10. Update on Cultural Safety, Cultural Humility, and Anti-Racism ***(attachment)***

Katy Carson reported on the activities related to cultural safety and humility, including:

- The Anti-Discrimination, Equality, and Reconciliation (ADER) Project and review of ADER charters:
  - Expanding and dividing the work to ensure alignment with sections 14 and 15 of the HPOA guiding principles
  - Key priorities:
    - Supporting staff to incorporate cultural safety and humility and anti-Indigenous racism into their day-to-day work
    - Establishing processes for meaningful engagement and shared decision-making with Indigenous communities
    - Strengthening relationships with Indigenous governing bodies and organizations
    - Increasing Indigenous representation across BCCOHP staff, Board, and committees
- Developing workshops and learning opportunities for staff, including on the importance of relationship building with Indigenous people:
  - Plans for a staff information session around the ADER work
- Launch of a Book Club and providing staff the opportunity to engage with Indigenous authors and have open dialogue and discussions on the books
- Ongoing cultural safety consultations and supporting staff on complaint files
- A British Columbia Health Regulators (BCHR) Consultation Working Group, under the guidance of Harmony Johnson, Harmony Johnson Consulting, building out protocols on how to consult with Indigenous governing bodies and organizations
- Issuing of a Request for Proposal (RFP) for administration of the BCHR Support Program in collaboration with five colleges.

During ensuing discussion, comments were offered regarding:

- Conflict with scheduling of the HPOA Readiness Committee and Consultation Circles
- Recognition of potential delays with stakeholder engagement
- Implementing a cultural safety and humility learning tool as a requirement for all who are regulated, including boards
- Clarification the RFP was not a BCHR initiative; the BCHR was acting as the umbrella
  - Options for the consultant partnership to be through collective agreement or independent relationship
  - The importance of the BCCOHP to be accountable for its own work and that responsibility is not diluted by other partners
- Greater emphasis needed on “anti-Indigenous racism” in curriculum
  - Health providers must be educated in order to fully understand what racism is and what it looks like
- The BCCOHP must implement the changes contemplated in Harmony Johnson’s resource document.

11. Strategic Projects Update *(attachments)*

During the Strategic Projects Update, Roisin O'Neill, Deputy Registrar and Executive Director, Transformation, noted a recent review and reset of BCCOHP strategic priorities, projects, revision of charters, and focus on four primary projects, including: the ADER, Quality Assurance Program, Professional Practice Standards, HPOA readiness, and database migration (phase 2).

During discussion, it was raised that some of the educational resources and training listed on the ADER website were either outdated or links to information were no longer usable.

12. Public Questions

No questions were submitted or raised.

13. Closing of Meeting

This concludes the Open Meeting – 12:03 p.m. The Board moved into an In-Camera session.