Contents

Introduction ........................................................................................................................................... 2
Consultation Respondents ..................................................................................................................... 4
Consultation Themes ............................................................................................................................. 5
Theme 1 – Support for Modernization ................................................................................................. 5
Theme 2 - Improved governance .......................................................................................................... 6
Theme 3 - Reducing the number of regulatory colleges for efficiency and effectiveness ............. 7
Theme 4 - Strengthening the oversight of regulatory colleges .......................................................... 8
Theme 5 - Complaints and adjudication ............................................................................................ 9
Next steps ............................................................................................................................................. 10
Appendix A: Survey Instrument ......................................................................................................... 11
**Introduction**

A recent examination\(^1\) of British Columbia’s (B.C.’s) *Health Professions Act* made suggestions for how the provincial health profession regulatory framework could be modernized. In April 2019, the Honourable Adrian Dix, Minister of Health, established the Steering Committee on Modernization of Health Professional Regulation to provide advice on how to modernize the regulatory framework for health professions in the province. The steering committee is chaired by Minister Dix and includes members Norm Letnick, health critic for the official opposition, and Sonia Furstenau, health critic and house leader for the B.C. Green Party caucus.

Following an initial public consultation, which assisted the steering committee to identify and prioritize elements of regulatory modernization important to British Columbians and health-sector partners and organizations, the steering committee released its consultation paper, *Modernizing the provincial health profession regulatory framework: A paper for consultation* on Nov. 27, 2019.

Feedback on the consultation paper was accepted from Nov. 27, 2019 to Jan. 10, 2020 via an online survey and written submissions. This report summarizes the results of the steering committee’s second consultation.

Since the conclusion of the steering committee’s consultation in January 2020, B.C., the rest of Canada and the world have faced an unprecedented public health challenge in the novel coronavirus (COVID-19). From the outset, B.C. established clear guidance, transparency and an evidence-based approach as hallmarks of our fight against COVID-19. Health-care professionals are at the front-line of this pandemic, and have felt the risks and impacts of COVID-19. The steering committee wishes to thank health-care professionals for their commitment to ensuring that British Columbians have access to safe and appropriate care during this critical time.

**Health Profession Regulation Modernization – Consultation Timeline**

<table>
<thead>
<tr>
<th>Event</th>
<th>Date Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minister of Health initiates examination of HPA - the Cayton inquiry</td>
<td>Mar 2018</td>
</tr>
<tr>
<td>Initial public consultation</td>
<td>May 9 to Jun 14, 2019</td>
</tr>
<tr>
<td>Consultation paper released and second consultation</td>
<td>Nov 27, 2019 to Jan 10, 2020</td>
</tr>
<tr>
<td>Inquiry report released and steering committee established</td>
<td>Apr 2019</td>
</tr>
<tr>
<td>What We Heard report and steering committee recommendations report released</td>
<td>August 2020</td>
</tr>
</tbody>
</table>

**Background**

In B.C., health profession regulatory colleges (regulatory colleges) are responsible for ensuring that regulated health professions provide services in a safe, professional, and ethical manner, and must make decisions that protect the public interest. Professional associations play an important role, including promoting and advocating on behalf of professions, while labour unions work to advance improved compensation and working conditions for their members.

Regulation of health professionals is one of the key mechanisms that assures patients that the care they receive is provided by qualified, capable and competent professionals. Health profession regulation is also a critical foundation supporting health professionals to work effectively and safely. It enables professionals to have confidence that they are following appropriate standards.

**Scope of consultation**

To gather feedback on how to best modernize B.C.’s health profession regulatory framework, the steering committee sought input from members of the public and a broad spectrum of health-sector partners and organizations. The consultation paper proposed wide ranging changes to strengthen the province’s framework for health profession regulation.

In considering how health profession regulation can be modernized, the steering committee is guided by three objectives:

1) Improve patient safety and public protection.
2) Improve efficiency and effectiveness of the regulatory framework.
3) Increase public confidence through transparency and accountability.

The steering committee supports implementation of the *Declaration on the Rights of Indigenous Peoples Act* and commits to honouring the United Nations Declaration on the Rights of Indigenous Peoples. Key feedback on cultural safety within health professional regulation was received toward this consultation. There was a strong desire to see cultural safety and humility embedded within regulatory modernization and for further engagement. The steering committee looks forward to ongoing engagement with Indigenous peoples and other partners regarding modernizing health profession regulation.
Consultation Respondents

Feedback towards the consultation was accepted from Nov. 27, 2019 to Jan. 10, 2020 in two ways: via an online survey and by written submission.

Online Survey Responses

➢ A total of 4,018 surveys were completed.
➢ 71% of survey respondents identified as health professionals. Members of the public were the second largest group at 22%. The remaining 7% included health profession regulator staff and board members, professional association or union representatives, health profession students and researchers.
➢ The survey was not a general population survey and should not be interpreted to represent the views of the general population of B.C., but rather individuals who have an interest in or some relationship with health professions and their regulation.
➢ 63% of respondents identified as women and 25% identified as men. About 11% preferred not to say and 1% of respondents identified as gender diverse.
➢ 3% of respondents identified as Indigenous persons.
➢ Regional distribution of survey responses largely aligns with B.C.’s population distribution.

Survey Responses by Region

<table>
<thead>
<tr>
<th>Region</th>
<th>Proportion of survey responses</th>
<th>Proportion of B.C. population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lower Mainland/Fraser Valley</td>
<td>48%</td>
<td>61%</td>
</tr>
<tr>
<td>Vancouver Island/Coast</td>
<td>27%</td>
<td>17%</td>
</tr>
<tr>
<td>Thompson/Okanagan</td>
<td>8%</td>
<td>12%</td>
</tr>
<tr>
<td>Kootenay</td>
<td>2%</td>
<td>3%</td>
</tr>
<tr>
<td>Cariboo</td>
<td>2%</td>
<td>3%</td>
</tr>
<tr>
<td>North Coast</td>
<td>1%</td>
<td>1%</td>
</tr>
<tr>
<td>Nechako</td>
<td>1%</td>
<td>1%</td>
</tr>
<tr>
<td>Northeast</td>
<td>1%</td>
<td>2%</td>
</tr>
</tbody>
</table>

Source: Survey (n = 4,018) and Census Profile, 2016 Census. Six per cent of respondents preferred not to answer. Four per cent were outside of B.C.

Written Submissions and Meetings with Partners

There were 255 unique written submissions received from: health professionals (94), professional associations (53), members of the public (38), B.C. health profession regulators (21), regional health authority representatives (11), Indigenous partners (2), and others like provincial bodies, educational institutions, unions, non-profit groups and out of province regulators (36).

In addition, 1,225 writing campaign/form letters were received regarding professionals’ scopes of practice, amalgamation of regulatory colleges and the regulation of additional professions.

Finally, 24 meetings were held with a total of nearly 50 health-sector partners and organizations.
Consultation Themes

Feedback was received in relation to themes, including support for modernization, improved governance, reducing the number of regulators, creation of a new oversight body, and complaints and adjudication.

Theme 1 – Support for Modernization

Consultation respondents expressed broad support for modernizing health profession regulation, both in survey and written submissions.

➢ The majority of survey respondents rated most of the key areas of focus for modernization as important or very important, including: ensuring board member competence; regulators protecting the public interest; a simplified complaints and disciplinary process; and, a new oversight body.

➢ Survey respondents rated reducing the number of regulators as less important than other elements of modernization.

➢ The majority of survey respondents (67%) agreed or strongly agreed that the five areas of focus for modernization would increase their confidence in the regulation of health professionals.

The five areas of focus for modernization would increase your confidence in regulation of health professionals

Source: Survey (n= 3,928). Agree includes "agree" and "strongly agree." Do not agree includes "do not agree" and "somewhat disagree."

Importance of the five areas of focus for modernization

Source: Survey (n= 3,983 - 3,985)
Theme 2 - Improved governance

Regulatory colleges’ boards provide leadership to ensure colleges fulfill their mandate to protect the public interest. Most board members are currently elected by other registrants of their regulatory college. The consultation paper proposes a new process in which all board members would be recommended for appointment in a competency-based process independently overseen by a new oversight body. Half of board members would be registrants and half public members.

There is support for ensuring board members are chosen based on merit and competence. Respondents have a range of views on how best to ensure this.

- While survey respondents voiced a high level of support for ensuring boards are composed of members chosen based on merit and competence, there were varying levels of agreement with the statement that fully appointed boards would increase confidence in the regulation of health professions.
- Responses regarding whether fully appointed boards would increase confidence in regulation varied by respondent group. While overall, 37% of respondents agreed or strongly agreed that fully appointed boards would increase their confidence in regulation, this was 51% among public respondents and 32% among health professionals.
- Some survey respondents with concerns about a new board member appointment process perceived that appointments may become political, stated that elections are a fair/democratic process and saw elections as part of self-regulation. There appeared to be some uncertainty about the role of boards (a governance role, which is mainly non-clinical).
- A majority of written submissions expressed support for the proposed new board member appointment process. Respondents indicated the process should be transparent and expressed interest in providing input on the competency criteria.
- Written submissions recommended ensuring diverse (Indigenous, cultural and gender diverse) representation on college boards and in other leadership roles, and cultural safety initiatives like board training.
- Written submissions also expressed support for increasing public membership on boards so that half of board members are public members and half are professionals.

### Ensuring regulatory college boards are composed of members appointed based on merit and competence

<table>
<thead>
<tr>
<th>Importance</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Important or Very important</td>
<td>92%</td>
</tr>
<tr>
<td>Neutral</td>
<td>5%</td>
</tr>
<tr>
<td>Not at all important or Somewhat unimportant</td>
<td>3%</td>
</tr>
</tbody>
</table>

Source: Survey (n= 3,985).

### Fully appointed boards would increase your confidence in regulation of health professionals

<table>
<thead>
<tr>
<th>Agreement</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agree or Strongly agree</td>
<td>37%</td>
</tr>
<tr>
<td>Neutral</td>
<td>17%</td>
</tr>
<tr>
<td>Do not agree or Somewhat disagree</td>
<td>45%</td>
</tr>
</tbody>
</table>

Source: Survey (n= 3,959). Note: Percentages have been rounded to the nearest whole number and therefore may not total 100%.
Theme 3 - Reducing the number of regulatory colleges for efficiency and effectiveness

To increase public protection, and improve the efficiency and effectiveness of regulation, the consultation paper proposed a transition to fewer regulatory colleges.2

A range of feedback was received on the proposal to reduce the number of regulators.

➢ Survey responses indicated a range of perspectives about the importance of reducing the number of regulatory colleges. While 42% of overall survey respondents viewed this change as important or very important, 23% were neutral and 35% rated this change as somewhat unimportant or not at all important. Responses varied by respondent type.

➢ Written submissions generally supported a reduction in the number of regulatory colleges. However, respondents preferred that different options be available for amalgamation than those proposed (particularly in relation to the College of Health and Care Professions of B.C.). Among those that did not support the proposed approach, agreement did not emerge regarding an alternative approach.

➢ Submissions recommended that amalgamation consider different criteria in determining which regulatory college should amalgamate: health professionals’ scopes of practice; theories of health and disease (“allopathic” and “holistic”); consistent criteria; ensuring specific health profession representation on boards; and, regulators’ national alliances.

➢ Various perspectives were received regarding the creation of a new oral health college, including both support for and concern regarding the four current oral health regulators joining together. Concerns included the potential for power imbalances due to employer and employee professions being regulated by a single regulator, and historical experiences of inequity in this regard.

➢ Some submissions suggested the Health Professions Act be amended to allow greater flexibility for different mechanisms for amalgamation than those currently permitted in the legislation.

Importance of reducing the number of regulatory colleges to improve efficiency and effectiveness

<table>
<thead>
<tr>
<th></th>
<th>Important or Very Important</th>
<th>Neutral</th>
<th>Somewhat Unimportant or Not at all Important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public</td>
<td>52%</td>
<td>24%</td>
<td>24%</td>
</tr>
<tr>
<td>Health professional</td>
<td>39%</td>
<td>22%</td>
<td>39%</td>
</tr>
<tr>
<td>Others</td>
<td>50%</td>
<td>26%</td>
<td>24%</td>
</tr>
</tbody>
</table>

Source: Survey (n= 3,985). Note: Percentages have been rounded to the nearest whole number and therefore may not total 100%.

2 A reduction in the number of regulatory colleges from 20 to five is proposed. This would include maintaining the College of Physicians and Surgeons of B.C., the College of Pharmacists of B.C. and the B.C. College of Nursing Professionals. A new oral health regulatory college would be created along with a new multi-profession regulator, the College of Health and Care Professions of B.C.
Theme 4 - Strengthening the oversight of regulatory colleges

The consultation paper recommended the creation of an oversight body for health profession regulators and the overall regulatory framework, with a range of responsibilities like routine audits of regulatory colleges, public reporting on common performance standards, and recommending new professions for regulation.

Broad support for the creation of an oversight body was found in both the online survey and written submissions.

- 61% of survey respondents support or strongly support the creation of an oversight body.
- Written submissions identified that an oversight body would improve consistency, transparency and accountability of the regulatory framework.
- Feedback was received related to the proposed oversight body functions, including:
  - Support for the oversight body overseeing the board member appointment process.
  - Support for routine audits and publishing guidance on regulatory policy and practice.
  - Support for the oversight body having a role in the bylaws process.
  - Mixed support was expressed for the oversight body establishing a range of standards of professional practice; however, concerns appear to be focused on a worry that the oversight body would establish the content of standards (while the consultation paper explains regulatory colleges will continue to be responsible for content).
  - Recommendation that the oversight body have a role in consistent implementation of cultural safety standards across regulatory colleges.
- Concerns were expressed about costs of the body, who would be responsible for funding the body, and the necessity for an additional layer of oversight if the number of regulatory colleges is reduced.
- Respondents voiced support for increased accountability of regulatory colleges to the Legislative Assembly to improve public accountability and transparency.
- The consultation paper proposed the new oversight body make recommendations regarding the regulation of new professions. Some submissions viewed the proposed new process as an opportunity/pathway to regulation, while others believed it may contribute to delays.
- Requests to regulate additional occupations were received, including: diagnostic and therapeutic professionals; counsellors and other mental health professionals; dental assistants; physician assistants; and others. Requests were also received to shift the regulation of social workers and emergency medical assistants to the Health Professions Act.

Support for the creation of a new oversight body

<table>
<thead>
<tr>
<th>Support or Strongly support</th>
<th>61%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neutral</td>
<td>13%</td>
</tr>
<tr>
<td>Do not support or Somewhat do not support</td>
<td>26%</td>
</tr>
</tbody>
</table>

Source: Survey (n= 3,991).
Theme 5 - Complaints and adjudication

The consultation paper proposed a series of changes to the complaints and discipline process, including the creation of a new discipline process, improved transparency and enabling regulatory colleges to more easily share information.

There is support for increased transparency of the complaints and discipline process to ensure a clear focus on patient safety and public protection.

➢ Simplifying and increasing transparency in the complaints and discipline process was rated important or very important by the majority of survey respondents.3
➢ Written submissions primarily expressed support for regulatory colleges continuing to investigate complaints, and for the proposed creation of a new independent discipline process. Respondents explained a new discipline process could help build public trust and provide consistency across colleges.
➢ The majority of survey respondents indicated support for the proposal to increase transparency by publishing actions taken to resolve accepted complaints.4 A number of written submissions raised concerns about this proposed change and commented that requiring regulatory colleges to publish all actions taken to resolve accepted complaints may limit colleges’ ability to negotiate consensual agreements with registrants (currently, public notification/confidentiality can sometimes be negotiated).
➢ Survey respondents expressed support for requiring past history to be considered as part of complaints reviews. Written submissions had varied levels of support for this change, with some noting this would help colleges recognize patterns of ongoing behaviour, and others suggesting that past history should only be considered under specific circumstances.
➢ Most written submissions supported enabling regulatory colleges to more easily share information for public safety, while some noted concerns about privacy and confidentiality.
➢ Consultation respondents recommended Indigenous approaches to justice be integrated within complaints and adjudication (as determined through engagement with Indigenous communities and organizations), and that regulatory college investigators and inquiry committee members are trained in cultural safety and humility.

---

3 See graph “Importance of the five areas of focus for modernization” on page 5.
4 Accepted complaints are those that are not dismissed, and where some action is being taken as a result of the complaint.
The steering committee sought feedback to help establish consistency across regulatory colleges in how they address sexual abuse and sexual misconduct by health professionals.

- The majority of survey respondents were supportive of mandatory cancellation of registration in cases of sexual abuse (85% support, 8% neutral, 7% do not support). Mixed levels of support were expressed in written submissions. A proportional approach was preferred in some written submissions, which recommended that decisions reflect the severity of misconduct.
- Both survey respondents (64% support, 17% neutral, 19% do not support) and written submissions expressed support for requiring regulatory colleges to provide funding for counseling. Respondents suggested regulatory colleges should be able to recover costs from registrants who have caused harm.
- Written submissions suggested a range of measures for regulatory colleges to address sexual abuse and sexual misconduct such as: common standards/policies among regulators for prevention; investigation and discipline; a unique or independent complaints/investigation process with specialized investigations and supports; and, training in trauma-informed care for investigators and decision makers.

**Next steps**

The steering committee thanks all of those who provided feedback. Feedback received from British Columbians, health sector partners and organizations will help to inform future improvements to health professional regulation in British Columbia.
Appendix A: Survey Instrument

Regulating Health Professions

The Steering Committee on Modernization of Health Professional Regulation is currently collecting public feedback as they develop a proposal for how British Columbia’s *Health Professions Act* should be modernized. This act governs the regulatory colleges that oversee regulation of health professionals in our province. The steering committee is guided by three key objectives:

1. Improve patient safety and public protection.
2. Improve efficiency and effectiveness of the regulatory framework.
3. Increase public confidence through transparency and accountability.

This short 10-minute survey will assist in developing a model of health profession regulation that is appropriate to British Columbia.

If you haven’t already, please consider reading the *Modernizing the provincial health profession regulatory framework consultation paper* before completing the survey. If you would like to provide additional feedback, you may share your thoughts through a written submission.

This public consultation and survey will close on January 10, 2020 at 4pm.

Please do not include any personally identifiable information about yourself or others in your responses.

*Please note: This online feedback form supports IE9 and all newer comparable browsers like Firefox, Chrome, Opera etc. with activated JavaScript. Your browser settings must have cookies enabled for the registration form to run properly and inactivity on the form for longer than one hour will result in the form timing out.*

*Collection Notice: Personal information collected by the Ministry of Citizens’ Services for the Minister of Health is under the authority of section 26(c) and 26(e) of the Freedom of Information and Protection of Privacy Act for the purpose of informing the Regulating Health Professions engagement. If you have any questions about the collection, use and disclosure of your personal information, please contact: Director, Citizen Engagement, PO Box 9409, STN PROV GOVT Victoria BC, V8W 9V1, 250-208-3591. If you have questions on the citizen engagement process, please email citizenengagement@gov.bc.ca*
Q1 Which of the following best describes you? Please choose one.
(This question is mandatory)

Choose one of the following answers

If you choose ‘Other:’ please also specify your choice in the accompanying text field.

- Member of the public/ patient/ client / resident
- Health professional
- Health profession regulator [College, board, etc.]
- Association or union representative
- Other: 

Please do not include any personally identifiable information about yourself or others in your responses.

Q2 The steering committee is focused on modernizing the regulation of health professionals in British Columbia. As the committee studies some of the challenges facing the current structure, there are some topics that have emerged. Please rate these areas of focus in terms of their importance to you.

- Ensuring regulatory colleges are putting the public interest and patient safety ahead of the professional interest.
- Ensuring regulatory college boards are composed of members appointed based on merit and competence.
- Reducing the number of regulatory colleges to improve efficiency and effectiveness.
- Creating a body to oversee regulatory colleges to improve public confidence and patient safety.
- Simplifying and increasing transparency in the complaints and disciplinary process.

5 point matrix for each - Not At All Important, Somewhat Unimportant, Neutral, Important, Very Important

Q3 To what extent do you agree these five areas of focus would increase your confidence in the regulation of health professionals?

5 point matrix - Do Not Agree, Somewhat Disagree, Neutral, Agree, Strongly Agree

Q4 In order to ensure a strong focus on patient safety in British Columbia, the creation of a regulatory college oversight body is proposed. This body would be tasked with responsibilities such as:

- Setting performance standards for regulatory colleges
- Auditing regulatory colleges
- Providing public reporting on regulatory college performance
- Overseeing and recommending appointments to regulatory college boards
Do you support the creation of an oversight body of this type?

5 point matrix - Do Not Support, Somewhat Do Not Support, Neutral, Support, Strongly Support

Q5 The majority of regulatory colleges' board members are elected by other registrants of their regulatory college. It is proposed that elections stop and that all board members be appointed based on recommendation by the oversight body.

Do you agree fully appointed boards would increase your confidence in the regulation of health professionals?

5 point matrix - Do Not Agree, Somewhat Disagree, Neutral, Agree, Strongly Agree

Q6 Currently, actions resulting from some accepted complaints about health professionals are not made public. It is proposed that in future, actions taken to resolve accepted complaints would be made public.

*Accepted complaints are those that are not dismissed, and where some action is being taken as a result of the complaint.

Do you support increasing transparency by publishing actions taken to resolve accepted complaints?

5 point matrix - Do Not Support, Somewhat Do Not Support, Neutral, Support, Strongly Support

Q7 At this time, regulatory colleges have discretion about whether they consider past history of a health professional when a complaint is reviewed. The steering committee proposes requiring that a health professional’s past history be taken into consideration in complaint and discipline decisions.

How important do you feel it is for past history to be considered in current complaint reviews?

5 point matrix - Not At All Important, Somewhat Unimportant, Neutral, Important, Very Important –

Q8 Alberta and Ontario have taken specific measures to address sexual abuse by health professionals, these include mandatory cancellation of practice for sexual abuse, and requiring regulatory colleges to provide funding for counselling for victims. Many other provinces do not have such measures.

- Do you support mandatory cancellation of health professional practice for sexual abuse?
- Do you support requiring regulatory colleges in British Columbia to fund counselling for victims?

5 point matrix for each bullet - Do Not Support, Somewhat Do Not Support, Neutral, Support, Strongly Support

Q9 What else do you feel the steering committee should consider in ensuring patient safety and regulation of health professionals in British Columbia? Please share your thoughts.

1000 character max open text box

Please do not include any personally identifiable information about yourself or others in your responses.
D1 In what region of B.C. or area do you live?

(The questions below are optional. Your responses are confidential. All responses will be compiled and analyzed as a group. Responses will not be identified individually.)

Choose one of the following answers:

- Vancouver Island / Coast
- Lower Mainland / Fraser Valley
- Thompson / Okanagan
- Kootenay
- Cariboo
- North Coast
- Nechako
- Northeast
- Outside BC
- Prefer not to say

D2 What is your gender?

Choose one of the following answers:

- Male
- Female
- Gender Diverse
- Prefer not to say

D3 Which age category do you belong to?

Choose one of the following answers:

- Under 18
- 18 - 39 years
- 40 - 64 years
- 65 - 75 years
- Over 75 years
- Prefer not to say

D4 Do you self-identify as an Indigenous person, that is, First Nations (status or non-status), Métis or Inuit?

Choose one of the following answers

- Yes
- No
- Prefer not to say
D5 In what sector(s) are you primarily employed in?

Choose one of the following answers

- Social Services
- Tourism
- Agricultural
- Retail or Customer Service
- Natural Resources (Mining, oil and gas, etc.)
- Forestry
- Emergency Response
- Transportation
- Construction
- Health
- Education
- Arts
- Consulting
- Unsure
- Prefer not to say
- Other: 

Please do not include any personally identifiable information about yourself or others in your response