



————— **Ensuring safe nursing care. Together.** —————

BCCNP BYLAWS

August 30, 2018

Disclaimer: This document has been prepared to identify bylaw changes that may be of interest to stakeholders. This is not a legal document. Should any information contained in this document conflict with either the provisions established by the bylaws, or their interpretation, the bylaws shall prevail.

ONR Bylaw Development Team

Part 1 – The Board

This bylaw part describes the composition of the college board, the duties of its chair and vice-chair and establishes the rules for elections and board meetings.

At the outset of their discussions about the future board of the British Columbia College of Nursing Professionals (BCCNP), the CLPNBC, CRNBC and CRPNBC boards began by agreeing on governance principles and the competencies and diverse experiences needed in order for the new board to fulfill its mandate. Only after they had agreed on these foundations was work able to start, dealing first with the critical questions surrounding board governance of the new amalgamated college. Some of these decisions are evident in the bylaws. Others will be articulated in board policy and terms of reference.

Set out below are some of the critical recommendations made by the boards around governance:

- Greater emphasis will be placed on **governance education, ongoing development and regular evaluation**. This is to ensure that board members are supported and positioned for success in their work, helping them keep up-to-date on changes in regulation and governance practices that might impact the decisions they make.
- More attention will be paid to **articulating the competencies and experiences required on the board** and **communicating these needs** to registrants (during elections) and government (prior to appointments). A new nominations process has been established based on this premise, and you will see reference to this in the bylaws under the provisions that establish the mandates of both the Nominations Committee and Governance Committee.
- **The board will comprise eight members elected by registrants (2 LPNs + 2 RNs + 2 NPs + 2 RPNs), and up to eight public representatives appointed by the government.** Ensuring the perspectives of all nursing designations are at the table is critical to making informed decisions. Under the *Health Professions Act* (HPA), the Minister has the ability to appoint up to 50% public members to the board, so this reality has also been reflected in the board composition. Although the board may be large (up to 16 members), the current boards felt that, for this transitional period, it was critical to have these diverse nursing perspectives available in addition to diverse gender, geographic, ethnic and professional backgrounds.
- In order to get the best people on the board and ensure that board members are not “representing” the interests of specific designations, **any registrant eligible to vote will be allowed to vote for any of the candidates running for election, regardless of the registrant class in which the voter or candidate is registered.** In other words, every registrant will vote for every vacant seat, even if that seat is a designated seat for a nursing designation that is not their own (e.g. registered psychiatric nurses will be able to vote for the best registered nurse to fill one of the two RN seats).
- The Board Chair and Vice Chair will be elected by the board from amongst the current board members.
- **Every board member will serve a three-year term, up to a maximum of a two consecutive terms (six years).** Following six years’ service, there will be a cooling-off period for one full term (three years) before re-election or re-appointment is permitted.
- **There are enhanced minimum eligibility requirements for registrants who wish to stand for election that aligns the BCCNP bylaws to other health regulators and not-for-profits that fall under the authority of the new Societies Act [SBC 2015].** The boards have included a conflict of interest provision, which requires board members currently serving as executives or board members of nursing advocacy groups (e.g. nursing associations), or other organizations where the interests of that organization may conflict with the college (e.g. nursing union board), to have a one year “cooling off” period before they are eligible to run for the BCCNP board. This provision aligns with provincial and national best practices, as several BC health colleges and the College of Nurses of Ontario, for example, lead efforts to demonstrate to the public that their mandate is to protect the public and not serve the interests of the profession.
- As set out in the *HPA*, **the Minister will appoint the First Board.** The proposed bylaws set out a process by which the appointed registrant board members will transition out and elected registrant board members will transition in over a three year period. The plan is that, by January 1, 2022, the board will be composed of eight elected registrants and up to eight appointed public members, in accordance with the bylaws. The first election will take place in the Fall of 2019 for terms beginning on January 1, 2020.

Part 2 – Committees

This bylaw part contains information about the college's regulatory and board support committees, specifically the composition of each committee, the scope of their powers and duties, and how members are appointed and removed. Information about committee meetings, reporting requirements and how work may be organized into panels is also covered in this part.

For a regulated profession, committees are where a significant amount of the core regulatory work happens. Getting the committee structure right was a key priority of the current boards through this amalgamation process.

The boards looked first at the governance principles to ensure that the new committee framework supported them, then devoted a significant amount of time in fleshing out the structure for each of the committees. They also ensured that college staff had an opportunity to provide feedback.

Every program area will be aligned within the new college, but a complete integration and alignment of the work and processes will occur over years. Therefore, the committee framework reflects how some committees are more aligned from the start than others.

The other key factor in designing the committee framework was to ensure that the unique distinctions between the nursing designations are honoured and incorporated – for example, every regulatory committee must have a certain number of registrants from each designation.

Some of the committees will work in 'ad hoc' panels (e.g. Registration, Inquiry and Discipline), where small panels are brought together on a regular basis to deal with specific matters. Some of the committees will work in 'standing panels' (e.g. Quality Assurance, Education Program Review), where discipline-specific panels will continue the work of the current college committees.

Some of the committees will simply perform their work as a committee (e.g. Nominations, Governance).

The committees are divided into two categories:

- **Regulatory Committees** are the committees that support the core regulatory responsibilities of the college. These committees are made up of registrants and public members who devote a significant amount of their time to these core functions, such as registration, inquiry, discipline, quality assurance and education program review.
- The other category of committees is what we refer to as the **Board Support Committees**. These committees support the board in executing its duties and doing its work – such as financial oversight, committee appointments, and board stewardship.

Some of the common themes that will apply to all committees are:

- Terms for committee members will mirror those of board members – up to two 3-year terms.
- There will be an intentional process in place to (1) identify the competencies and experiences that committees will need, and (2) recruit to fill those needs.
- As with board members, committee members will be provided governance education, high quality orientation and ongoing support to help ensure success in their role.

Overall Committee Framework



Regulatory Committees

*Committees established pursuant to Section 19(1)(t) of the Health Professions Act
Proposed Bylaws: Part 2, Divisions 1 to 7*

| Name | Description | Key Points |
|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Registration Committee | Reviews and decides whether to approve or deny non-routine applications for initial registration, annual renewal and reinstatement. | <ul style="list-style-type: none"> · Each committee will have a minimum one-third public membership. · Composition has been left open-ended to permit greater flexibility for the committees to appoint members based on specific skills and identified competency needs. Only minimums are outlined in the bylaws. · Committees will have discretion to work in smaller panels to assist workflow and ensure that correct expertise is available to address profession-specific issues. |
| Inquiry Committee | Receives complaint information or information that could give rise to an own motion investigation, directs the investigation process and subsequently assesses whether remedial and/or disciplinary action against a registrant is warranted. | |
| Discipline Committee | Hears allegations of professional misconduct, incompetence or incapacity referred to it by the Inquiry Committee, and if allegations are proven, determines an appropriate remedy following its deliberation of the facts presented by all parties. | |
| Quality Assurance Committee | Develops, administers and maintains a QA program to ensure the safe, ethical and competent practice of registrants. | <ul style="list-style-type: none"> · Standing panels A, B, C and D (the latter for the Professional Practice and Standards Committee only) have been established for each of these committees to allow their work to continue uninterrupted for now, with a view to fully integrating at a later stage. · There will be a coordinating standing panel for each of these committees that will assist in: developing competencies; establishing policies and procedures; organizing and conducting meetings of the committee; and providing reports to the board. · The Nurse Practitioner Standards Committee will become Standing Panel D of the Professional Practice and Standards Committee, and will continue its current work. |
| Education Program Review Committee | Evaluates the integrity of education programs and qualifying courses for nursing professionals. | |
| Professional Practice and Standards Committee | Reviews and develops recommendations pertaining to the standards of practice (including scope of practice) or professional ethics for nursing professionals. | |
| Nurse Practitioner Examinations Committee | Directs the development and administration of the Objective Structured Clinical Examination (OSCE) and scores the OSCE nurse practitioner registration examinations. | This committee is carried over to BCCNP from CRNBC, and will continue its work as before without change. |

Board Support Committees

Committees established to support the work of the board

Bylaws: Part 2, Division 7

| Name | Description | Key Points |
|---------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Finance and Audit Committee | Provides advice on all financial administration matters, the effectiveness of internal controls and risk management activities, and facilitates independent audits. | <ul style="list-style-type: none"> · The board may appoint non-board members to address any gaps in expertise. · Flexibility has been built into the bylaws to allow for committee composition to adapt to work needs year-on-year. · The Governance Committee and the Nominations Committee have been designed to complement, support and balance each other (see below). · The Nominations Committee has a unique composition due to the committee's unique role. · The board may use these committees to look into issues beyond their specified mandates. |
| Governance Committee | Helps the board assess its own effectiveness, composition and development - as well as that of its committees and individual board and committee members - through regular analysis, performance evaluation, professional development and education. It also identifies critical issues that might affect the board's strategy or composition needs. | |
| Nominations Committee | Administers the election and, through active recruitment, assists the board in finding appropriate candidates for each vacancy available at board and committee level. | |
| Registrar and CEO Performance and Oversight | Oversees and facilitates performance and compensation reviews for the Registrar/CEO on behalf of the board, and provides recommendations on succession planning and any other matters pertaining to Registrar/CEO oversight. | |

A deeper look at the nominations process for the board and committees

The bylaws set the foundation for a more intentional and robust board and committee recruitment and nomination process. At a high level this is how these processes will now work:

Board Nomination Process:

- Governance Committee creates a board competency framework (approved by the board annually).
- Governance Committee identifies gaps (approved by the board).
- Gaps communicated to Registrar/CEO and Nominations Committee.
- Registrar/CEO communicates gaps to registrants and creates an Expression of Interest with these gaps in mind.
- Interested registrants complete and submit an online Expression of Interest.
- Nominations Committee proactively encourages registrants to put their names forward for election.
- Electronic ballot has access to all candidates' Expressions of Interest.
- Note: Identified gaps also communicated to government to inform public member appointment process.

Committee Nomination Process:

- Governance Committee, in collaboration with specific committee, creates a committee competency framework for each committee.
- Nominations Committee, in collaboration with specific committee, identifies gaps to be communicated to registrants and the public through committee recruitment process.
- Interested committee members complete and submit an online Expression of Interest.
- Nominations Committee, with support of staff, actively recruits both registrant and public candidates.
- Nominations Committee forwards a list of recommended names to the board for annual appointment.
- Board discusses the recommendations provided by the Nominations Committee and appoints members to all committees.

Part 3 – College Administration

This part relates to the general operation and administration of college. The duties of the registrar and deputy registrars are set out, as are the auditing requirements and fiscal responsibilities of the board. Provision is made for the board to obtain legal advice and for the conduct of general meetings of registrants.

Generally, the majority of provisions under this part remain unchanged because they were already consistent across the three nursing colleges. There are a couple of changes to note however:

Fee Collection

Currently, CRNBC has a fee collection agreement with the Association of Registered Nurses of British Columbia. CLPNBC and CRPNBC have no such agreements with their respective associations. Whether the new college will continue to collect fees for any association is an important decision for the First Board to consider and, as such, a ‘permissive’ provision has been included in the bylaws. This provision in no way binds the board, but rather gives it the option to collect fees if the board feels this practice aligns with the new college’s mandate.

General Meetings

It is critically important that registrants have clear and open channels of communication with both the board and management, especially given that 50% of the board is elected from the registrant base, and committees rely upon the significant involvement of nursing professionals. The bylaws have been drafted to support such feedback, for example, by ensuring that annual general meetings continue to take place, and providing for the board to call a special general meeting (by special resolution) when broader discussion is required.

There may be instances where the board needs to make decisions in accordance with its legislated mandate to protect the public, but that registrants may disagree with. The bylaws have been drafted so as not to set an expectation that registrants can force the board to make a decision contrary to its mandate. For example, while registrants can bring forward resolutions to a general meeting (if it is signed by ten registrants), such resolutions will be considered but not bind the board or management. This provision aligns with the current bylaws of two of the three nursing colleges. Registrants will also no longer be able to call a special general meeting, which aligns with the more general trend within the regulatory system that clarifies the roles of the colleges, their boards and registrants, again to ensure decisions are being made to protect public safety above all else.

Provisions have also been added to allow the college to use modern technology as a means of communicating with registrants about general meetings.

Part 4 – College Records

This part provides rules to structure the College’s administration and recordkeeping in a manner that is consistent with the Freedom of Information and Protection of Privacy Act. Provisions include information about the college’s public register, as well as controls around the disclosure of information or records, the protection of personal information, and the retention and disposal of college records.

The changes to this part of the bylaws primarily deal with the alignment and modernization of the document retention provisions and clarification with respect to disclosure. Some of the noteworthy changes include:

Public Register

The bylaws set out the specific information that will be included on the college’s public register for each registrant and former registrant, including:

- practice status in British Columbia;
- certified practice designation;
- information about a registrant’s primary employer;
- both current and historical information about any terms, limits or conditions on a registrant’s practice;
- information about an unresolved citation for a disciplinary hearing under section 37 of the HPA, or any related court appeal that is currently underway.

Disclosure of complaints, investigations and citations

New provisions with respect to the disclosure of complaints, investigations and citations have been included to align with current practices. These create more clarity and transparency about what will be disclosed, as well as when and what the restrictions are with respect to such disclosure. Many of these provisions have been modelled after other health profession regulators and the Rules of the Law Society of British Columbia.

Retention of Records

There is now greater clarity regarding the retention of several categories of critical records created during the course of college business.

For example, board minutes and annual reports must be retained permanently. Inquiry and discipline records, except as otherwise required by law, must be kept for not fewer than 16 years. Records documenting the decisions, and reasons for decision, of the inquiry and discipline committees or their panels must be retained permanently.

Part 5 – Registration

This part establishes all requirements for a nursing professional to be registered with the college, including details around annual renewal, reinstatement, certified practice and use of titles.

Of all the parts within these bylaws, the most significant changes occur here in Part 5. With four distinct groups of registrants (LPN, NP, RN, and RPN), the new bylaws contain all provisions required to regulate these unique nursing identities, and clearly articulate the requirements of the 25 separate registrant classes within those groups.

There are no substantive changes to registration requirements and conditions, entry to practice competencies or the manner in which education is recognized, and the bylaws retain the nuances specific to each registrant group. Provisions for nurse practitioners remain unchanged.

Some points to note:

Provisional registration has been extended to all registrant groups. This type of registration is granted to qualified applicants who have yet to meet outstanding registration requirements for full practising registration. When granted provisional registration, applicants are assigned specific conditions that must be met for them to be eligible for practising registration, as well as limits on their practice to mitigate any risk to the public with respect to the outstanding registration requirement. When the conditions are met, the limits may be removed, and the registrant may move from provisional registration to practising registration. Provisional registration replaces interim and limited registration for LPNs and RPNs.

Temporary (Special Event) registration will also be available to all registrant groups. Recognizing that not all applicants coming to BC are looking to practice in permanent employment settings, temporary (special event) registration provides the opportunity to qualified LPNs, RNs, and RPNs from other Canadian jurisdictions to come to BC, without having to incur the cost of a full-year of registration, for a variety of other time-limited events, such as:

- continuing education opportunities, conferences, courses or programs,
- military training,
- music festivals,
- Scouts Canada events, or
- sporting events.

Temporary (Emergency) registration has been enabled for all registrant groups. The new bylaws now include Temporary (Emergency) registration for RPNs. This change will ensure that should an emergency be declared in BC, the college will be able to ensure that the public will receive the benefits of nursing care from all nursing professionals. The college has rapid emergency registration processes to ensure BC's public gets the help they need as quickly as possible while not risking their safety.

Use of Titles. The new bylaws clearly outline the titles authorized for use by registrants holding various classes of registration. The only change in this provision is the removal of authority to use “retired” in front of the nursing title for those holding non-practising registration.

Canadian applicants. For LPNs, RNs, and RPNs applying for registration with the new college, the new bylaws will provide greater transparency and clarity with respect to the relevant required practice and specified period of time one must demonstrate that practice in order to be eligible for registration in BC. In addition, the proposed bylaws provide additional clarification about the options applicants have to demonstrate continuing competence.

Transition to a new registration year. The bylaws set out a transition to the annual renewal periods for all registrant groups that will eventually lead to consistent registration years. All registrant groups will transition to a registration year that begins on April 1 and expires March 31.

Renewal Timelines. The new bylaws create a phased and structured approach towards a harmonized annual registration renewal period for all four registrant groups. The intention behind this is to improve efficiency for registrants, ensure adequate assessment and processing time, and reduce the risk to the public that may arise from registrants practising without registration. The new process will allow additional time for late renewal, although this will incur a fee. No new renewal or reinstatement applications will be accepted for the final two weeks of the registration year.

Fees. There is no requirement in the bylaws that states registrant fees need to be aligned across registrant groups. The board makes the ultimate decision with respect to fees each year for each registrant group.

Duty to report criminal charges and disciplinary proceedings. The bylaws contain a new provision to ensure the college is properly informed should a registrant (or applicant for registration) be charged with an offence under a federal or provincial statute, or become the subject of an investigation, inquiry, review or other proceeding that could affect their entitlement to practice, in *any* jurisdiction. This change speaks directly to the college’s mandate to protect the public.

Forms. In order to modernize, and to continue with “green” efforts to go paperless, the forms previously attached to the bylaws have been removed. To ensure transparency for applicants and registrants, the bylaws state what information is required from registrants. This change allows for the actual “form” that most likely will be on a dynamic online platform, to change and evolve, while not negatively impacting fairness or transparency in the process for applicants and registrants.

Part 6 – Quality Assurance

This part addresses the quality assurance program requirements for each registrant classification, the assessment of professional performance, verification, and the retention of QA records.

Each of the colleges have unique QA programs for each of their regulated nursing designations. The structure of the QA committee and the QA bylaws have therefore been designed in a way to allow for these unique programs to continue as they currently function.

The purpose of any changes within the bylaws under this part has been to reconcile some of the QA provisions, to enable the QA programs of the various nursing professions to align over time, if this is seen to be valuable.

Part 7 – Inquiry and Discipline

This part explains procedural items relating to inspections, investigations and disciplinary hearings which are not already covered by the HPA, such as provisions pertaining to the investigation and disposition of complaints, obligations of suspended registrants, and costs.

As indicated in the 2016 review of CRNBC by the UK’s [Professional Standards Authority](#), regulation is evolving and becoming more complex. As such, inquiry and discipline processes must also evolve in order to ensure the college is fulfilling its public protection mandate, indicated by the following changes that will clarify procedure, create efficiencies and modernize practice:

Investigations

| Bylaw change | Why is this important? |
|--------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Clarity regarding the requirement of registrants to produce records | In many cases, registrants are not providing records needed to further the investigation of complaints. This bylaw change will clarify the college’s authority to ask for more information to ensure that a reasonable and adequate investigation is performed. |
| Obligation for the registrant to attend an interview and answer questions | As above, compelling registrants to attend interviews – as part of their professional obligation to cooperate with the college – will ensure a full/complete and timelier investigation. |
| Registrant must now identify current employer(s) and provide their current contact information | This change ensures that employers are properly informed if limits or conditions are placed on a registrant’s practice. |
| Investigators now have authority to return/discard irrelevant information collected in the course of investigation | This is a common issue, where a complainant has provided too much information in support of their complaint. Sometimes the information is irrelevant to the investigation or it may be sensitive, so allowing investigators to discard such information eliminates the cost of storage/risk of accidental disclosure. |
| A corporate employer may be considered ‘the complainant’ when complaint is submitted by agent of the employer | This bylaw change makes it clear who the complainant is in certain common situations. For example, a supervisor has forwarded a complaint to the college on behalf of the organization. Under the new bylaw, the organization will be identified as the complainant. This ensures that should the supervisor leave the organization, the organization – i.e. the correct party – will be informed as to the progress and outcome of the complaint. |
| Registrant who is the subject of investigation has a duty to cooperate fully | At present, the colleges are relying on case law around duty to cooperate to support complaints around ungovernability. This change simply enshrines existing case law into a bylaw. |

Fines

The maximum fine has been increased to \$50,000 from \$35,000.

Pre-hearing conferences and meetings

The bylaws now create pre-hearing conferences and pre-hearing meetings, how they are to be used and how they are to function. Both of these tools are important to further the college’s approach to right-touch regulation and creating additional opportunities for meaningful and expedient resolution of issues.

Part 8 –Client Care Records

This part of the bylaws establishes requirements respecting the collection, use and disclosure of client personal information by registrants in relation to their professional practice, as well as the retention and disposal of records containing client care information and/or client personal information. Depending on the nature of their practice or practice setting, registrants may also be required to comply with applicable provisions of the Freedom of Information and Protection of Privacy Act or the Personal Information Protection Act, or similar federal legislation.

The bylaws of the three colleges are already very similar in this area. Several updates have been made to consolidate these provisions and some obsolete provisions have been deleted.

The minimum retention period for client care records in the custody and control of registrants will be set at 16 years to reflect the recently-enacted *Limitation Act*. Disclosure of a client’s personal information will now be permitted for the purposes of:

- participating in quality assurance assessments of professional performance
- responding to information requests from the Quality Assurance Committee
- responding to complaint investigations, or
- HPRB review applications.

Additionally, the obligations of registrants have been clarified with respect to both the disposal of records when leaving practice and the making of advance arrangements for disposal of records in the event of unexpected death or inability to practise. Disposal requirements have been updated to expressly include cloud-stored records.

Part 9 – General Matters

This part contains several miscellaneous provisions, such as requiring registrants to obtain adequate liability insurance and placing restrictions on the marketing of professional services by registrants. General reference is also made to standards of practice and professional ethics, and a client relations program.

Insurance

As no decisions have been made to align the insurance coverage of the nursing professions, the provisions from the current bylaws have been carried over to the new bylaws.

Patient Relations Program

Further to the *HPA*, the bylaws set out the requirements for the college to create a patient relations program. This program will be overseen by the board. The board may delegate this oversight to one of the regulatory committees if it deems this necessary.
