

# 2020-2021 End of Year Summary

The British Columbia Public Advisory Network



March 2021

[www.bcpa.ca](http://www.bcpa.ca)



## Background

Following a successful pilot phase in 2019, the 2020-2021 fiscal year marks the first operational year of the British Columbia Public Advisory Network (BC-PAN). The BC-PAN's operational year consisted of three 2-day Zoom meetings that occurred in September, November, and February.

The BC-PAN is an advisory group that is operated as a multi-college initiative between eleven BC health regulatory colleges. The intent of the BC-PAN is to provide members of the public with the opportunity to convene and discuss important issues related to health care regulation. The feedback gathered from the BC-PAN helps to guide regulatory practice standards and policies, strategic priorities, and communications directed at the public.

### Public Advisors

The BC-PAN is comprised of 16 members of the public who were selected to reflect the diversity of BC'S population.

#### How do they self identify?

Indigenous: 25%

Members of visible minorities: 25%

People with disabilities: 18.75%

LGBTQIA2S+: 12.5%

#### Where do they live?

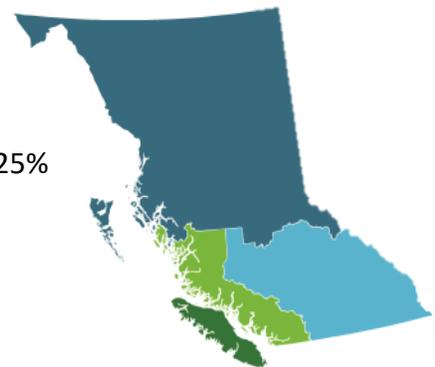
Northern BC: 12.5%

Cariboo Chilcotin Coast: 6.25%

Fraser Valley and Lower  
Mainland: 56.25%

Vancouver Island: 18.75%

Interior BC: 6.25%



### New Additions

The BC-PAN's meetings were conducted by an external facilitator, Susanna Haas Lyons, who acts as an unbiased intermediary between colleges and public advisors. A public engagement coordinator, Praise Osifo, was recruited to assist with the BC-PAN's operations.

In 2020/2021:

6

New public advisors  
joined the BC-PAN

3

2-day meetings  
were conducted

4

New regulatory  
colleges partnered  
with the BC-PAN

## Learnings and College Actions

### Virtual Care

Due to the COVID-19 pandemic, use of virtual methods to access care has increased. The BC-PAN college partners were interested in public advisors' experiences with virtual care as well as the public's expectations moving forward.

#### Key Learnings

- The public believes that virtual care should continue to be provided post the pandemic. It is important that virtual care platforms are safe, secure, confidential, and accessible.
- Expectations and standards that health care providers are qualified and culturally competent are the same for virtual care as in person.
- Knowing the health care provider prior to a virtual care session would make many public members feel more comfortable during the interaction.
- Seniors and people with disabilities experience greater challenges in accessing virtual care. Some may have difficulty due to mobility, hearing, or comprehension issues.

#### College Actions

- BCCNM incorporated the BC-PAN's input with their COVID-19 related questionnaire.
- A meeting summary of the BC-PAN's discussion was shared with the BC Ministry of Health's Director of Digital Health Policy.
- COTBC conducted a survey with registrants about COVID-19 and integrated the BC-PAN's input to establish guidelines.

### Discrimination in Health Care

BC health regulators have a shared mandate to ensure that health professionals provide qualified, safe and ethical care regardless of a patient's background. College partners heard from public advisors on what colleges can do to promote cultural safety and equity within the health care system.

#### Key Learnings

- The public believes that the concept of compassionate care should be included into clinical practice.
- Cultural safety principles could be integrated into colleges' quality assurance programs and processes.
- Practitioners should be required to undertake educational programs or professional development on cultural safety competencies and be provided with certifications.
- Practitioners should be trained in providing trauma-informed care to patients and recognize that trauma can reoccur.

### College Actions

- CPSBC and BCCNM used the BC-PAN's feedback to guide their draft Cultural Safety and Humility practice standard which will be shared for further consultation.
  - Trauma informed care was added to the draft principles.
- A meeting summary was shared with the office of Mary Ellen Turpel-Lafond.

## Ethical and Professional Use of Social Media by Health Care Practitioners

Health care practitioners may use social media to provide health information to the community, improve patient and public health outcomes, develop a professional network, and educate and interact with patients, caregivers, students, and colleagues. The college partners engaged with the BC-PAN to understand the public's expectations of health care practitioners who use social media.

### Key Learnings

- The public believes that health professionals should be held to high standards when using social media because they have a duty to protect the public.
- Resources for the public, such as guidelines on professional and personal relationships, can be helpful to identify the public's boundaries when connecting with practitioners online.
- Professionals should not provide unsolicited medical advice through social media.

### College Actions

- CPSBC used the BC-PAN's input to revise their *Social Media* professional guideline.

## Complaints Processes

The college partners understand that patients may face numerous barriers throughout the complaints process. Colleges wanted to hear about the public advisors' experiences and expectations related to filing a complaint so that they can seek out ways to improve each stage of the complaints process.

### Key Learnings

- Colleges can take measures to address the power imbalance between the complainant and the registrant during the complaints process through added support mechanisms.
- Providing opportunities for feedback and review of the outcome, and notifying complainants of its availability, helps to establish trust and willingness to participate.
- Regular communication to the complainant, even when there are no new actions taken, aids in avoiding discouragement and frustration.

### College Actions

- CTCMA and COTBC shared the BC-PAN's input with their Inquiry Committees.

- The BC-PAN's feedback has been helpful in CPTBC's work on reviewing and improving policies and procedures.
- CDSBC has included additional research questions in their work on improving their complaints process following the BC-PAN's discussion.
- BC-PAN's feedback validated CPSBC's decision to hire a Complaints Navigator who assists people in the complaints process.

## Codes of Ethics

College codes of ethics articulates registrants' ethical and professional commitments and responsibilities as health care professionals. Colleges asked the BC-PAN for input to better understand the public's expectations of key elements that should be included in their codes of ethics as well as their ideas for publicly communicating codes of ethics.

### Key Learnings

- Colleges' codes of ethics should include cultural safety and humility, and anti-racism.
- Presenting codes of ethics in plain language at public points of care can help to increase public awareness of colleges' codes.
- One shared code of ethics that encompasses all health practitioners may be helpful for patients to know what to expect from practitioners.
- Codes of ethics can be a resource that supports advocacy for self and others; colleges should invest in public education about this, through social media and public campaigns.

## Public Registers

Regulatory colleges protect the public by maintaining a searchable online public directory of registrants. The college partners sought input from the BC-PAN regarding what information the public expects to find on their public registers, as well as ways to increase public awareness and use of public registers.

### Key Learnings

- Consistent naming and functionalities across all colleges will enable an easier public experience accessing public registers.
- A single public register that encompasses all practitioners, followed with filters and categorizations for specific professions would make public registers easier to navigate.
- Providing practitioners with the option to display additional information such as a photograph, gender identity, continued education, and cultural safety certifications helps to build public trust.
- Colleges should consider investing in search engine optimization for their registers.