

Regulatory & Scope of Practice Committee

Terms of Reference

Draft V1.3

Context

Clinical governance is a systematic approach used by organizations to oversee, shape, manage and continuously improve the quality of care (HSO Standard 1003:2021(E)). To strengthen the foundations for clinical governance at Island Health, a single organizational governance structure for clinical planning, policies and standards aligned to best practices was adopted in 2022 to ensure culturally-safe, high-quality care. This structure, as one element of a refreshed clinical governance model, reflects the provincial/governmental, organizational, regional and local point of care levels of the system; each with its own responsibilities and accountabilities.

The senior committee at the organizational level is the Integrated Clinical Governance Council (ICGC) accountable to the Executive Leadership Team (ELT) to direct and evaluate defined clinical governance functions and cross-continuum quality improvement activities. Reporting to the ICGC, the C.A.R.E. Networks were established as the core clinical services committees at the regional level, for shared decision-making that defines, monitors and enables quality of care for the services within the specific Network and the Specialty Service Areas, with the goal of reducing variation in quality standards and promoting an integrated service design.

The ICGC delegates authority to Committees to carry out specialized, cross continuum work. This terms of reference is specific to the Regulatory and Scope of Practice Committee which is the single organizational committee responsible for employer controls on scope of practice for all regulated and unregulated care providers. Success for this Committee is assessed by Island Health's alignment/compliance with scope of practice requirements as laid out by legislation, regulation, and relevant oversight bodies.

All Clinical Governance Terms of Reference are supported by additional reference documents which specify expectations for all committees to align to: organizational priorities for improvement, governance principles and frameworks, definitions, process maps, tools and templates (links to include statements about Cultural Safety and DRIPA, Decision Making Framework, Patient Engagement, Diversity Equity Inclusion, Ethics, et al).

See additional reference documents to specify expectations for all committees to align to the organizational priorities for improvement, governance principles and frameworks, process maps and tools the committees will use (links to include statements about DRIPA, DEI, ethics, et al).

Accountability

- Sets and iterates the internal requirements for changes to Employer Controls on Practice (includes role and function and herein referred to as scope of practice), including use of evidence, analysis and standardized processes, tools, and templates.

- Translates and interprets the provincial Organizational Scope of Practice Framework into expectations for C.A.R.E. Networks and other relevant committees.
- Sets expectations for C.A.R.E. Networks and other relevant committees to monitor and audit compliance with scope of practice.
- Receives reports and assesses for risk and required action.
- Stays apprised of changes to legislation and regulations, national and provincial standards of care and scope of practice for clinical and health professions relevant to Island Health.
- Identifies and addresses impacts of regulatory and scope of practice changes as they apply to practice in Island Health taking into consideration regional implications.
- Receives and assesses internal requests for changes to scope of practice from the C.A.R.E. Networks, clinical operations, corporate partners, other clinical governance functions, and/or external bodies.
- Assesses proposals to confirm due diligence has been done by C.A.R.E. Networks.
- Determines whether proposal meets requirements for decision by Sub-Committee or ICGC.
- Collaborates across professions to determine the most appropriate profession to meet the overall role expectations and care needs for the applicable patient population/program.
- Determines appropriate Island Health specific limits and conditions on practice.
- Provides guidance and support to C.A.R.E. Networks to prioritize scope of practice changes and provides direction on best next steps.
- Ensures relevant input gathered from interest holders such as local teams, advisory structures, and subject matter experts on externally proposed changes to scope of practice and roles on internal or external changes.
- Defines requirements for monitoring the progress of approved scope of practice changes in support of implementation and evaluation of change, and receives regular reports from the Operations Excellence Committees on progress in the implementation of a change to scope of practice.
- Liaises with external partners such as, but not limited to the Ministry of Health, regulatory bodies, other health authorities, external practice committees and professional associations to share and receive information on scope of practice matters.
- Receives and assesses the implications of changes to scope of practice, role and function mandated by the Ministry of Health and/or other external bodies (i.e. Provincial Nursing and Allied Health Council, Regulatory Colleges).
- Prepares an annual work plan for proposed changes to scope of practice, informed by the priorities identified in the CARE Network's Quality Improvement Plans and external requirement prioritized in accordance with Sub-Committee capacity.
- Establishes and maintains working relationships and communication pathways with relevant clinical, practice and corporate governance structures to coordinate and consolidate requirements and decision-making processes.
- Prepares recommendations or approvals as appropriate, using the approved standardized tools.

Scope

In scope are all Island Health enterprise level regulatory scope of practice decisions including corporate decision making where issues related to scope of practice are raised such as risk management, human resources, and labour relations.

Out of scope are services not owned and operated by Island Health.

Decision Rights

- Approves changes to scope of practice, and/or acceptance of risk of change.
- Makes recommendations to I.C.G.C. for the re/prioritization of work as per the Annual work plan based emerging issues.

Membership

Co-Chairs are selected by ICGC. Standing members are selected following a transparent process led by the Co-Chairs to ensure diversity and inclusion, aligned to the following criteria: (initial)

- Specialized expertise including professional practice and clinical risk;
- Person, Family, and Community voice representatives (to be determined as per the Engagement Strategy);
- Operational areas with highly specialized professions such as pharmacy, laboratory and medical imaging;
- Medical staff representation;
- General representation from clinical operations, reflecting geographic diversity

Other members will be invited as required to represent the following functions:

- Legal; and
- Ad hoc membership – discipline/ subject matter representative based on proposal topic been discussed.

Other relevant selection criteria are:

- Clinical credibility/expertise to advise on proposed practice changes;
- Proven track record supporting scope of practice;
- Demonstrated active, accountable communicator;
- Outcome-oriented.

Committee Chair

The committee is co-chaired and co-chairs will be of different professional backgrounds as appointed by ICGC following a transparent process. The ICGC will nominate a delegate member in consultation with the Chair, for instances when the Chair is not available to fulfill their duties.

Meeting Frequency

The Sub-Committee will meet at least monthly or more frequently at the call of the Chair to address urgent issues based on the severity of issues for resolution or decision.

Decision Making

- Decisions will be made by consensus in the meeting. If a decision cannot be made during the meeting, next steps will be confirmed at the time of the meeting to ensure timely decision making (i.e., email vote by a date and time).
- If a decision is required prior to the next meeting, a request for an expedited panel can be made through the Regulatory and Scope of Practice Sub-Committee Coordinator via email, indicating the needed decision date and the submission forms.
 - **Expedited Panel** consists of: At least one co-chair, two operational leaders, one professional practice representative, and one additional committee member and is called by the co-chair.
- Proposals will be reviewed, vetted, and decisions made by quorum of # (51%) members as of (month/year), in person and/or virtual. Note: at least # Clinical Operational representatives must be included in quorum.

Attendance

Voting members of the Committee are required to attend all scheduled meetings to ensure all viewpoints are represented and will make their best effort to attend ad-hoc meetings. Members should advise the secretariat in advance, when absent due to planned leave. Meeting delegates, and vote by proxy, are not permitted.

Committee Administration

The maintenance of the minutes, agenda and documentation related to the Committee is the responsibility of the Chair, with the support of assigned resource teams.

A Clinical Governance Secretariat is responsible for the clinical governance information infrastructure, agenda management/scheduling and the monitoring of adherence to clinical governance processes.

Supports from resource such as finance, human resources, will provide expertise and advice in the function, design and improvement of the clinical governance processes as needed.

Confidentiality

To support the Sub-Committee's ability to provide well-informed advice and approvals, members may receive confidential information. All members must maintain confidentiality regarding materials and Sub-Committee discussions.

Dispute Resolution

If a decision cannot be made or the decision made by the committee is disputed (e.g., scope impasse), an escalation request will be submitted to the ICGC.

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