

Board and Committee Composition Matrices

Preamble

BCCNM recognizes the best decisions are made - and best outcomes achieved - when there is shared understanding among a diverse group of people about how nursing and midwifery care is experienced by the public. Decision-makers must be adept, capable, and informed, and the composition matrices are designed to bring such individuals together.

The matrices establish the minimum core competencies of an *ideal* board or committee by balancing the following elements: values, lived experience, and connections to community; measures to uphold the rights of First Nations and Indigenous Peoples as a fundamental part of board and committee work; and academic and technical qualifications.

The Board and committees each have their own matrix, which apply to both individual members and the composition of a whole board or committee. The listed values, attributes, diverse experience, backgrounds, and perspectives are the same across matrices. Statements regarding skills, knowledge, and lived experience differ depending on the nature of the work, discussions taking place, and decisions being made.

Use

We use composition matrices to: (1) assess the applications of individuals seeking election to the Board or appointment to its committees; (2) identify education and professional development opportunities for board and committee members; (3) explore where knowledge, resources, and capacity can be cultivated in board and committee governance; and (4) identify advisors or perspectives that may help to support or enrich decisions (if not available within the existing board or committee composition).

We also share the matrices as a support tool for the public, registrants, and government during board election, board appointment, and committee recruitment cycles. Individuals interested in participating in board or committee work may find the matrices useful when reflecting on how they wish to engage with the college or when completing applications.

Board and committee members are not expected to possess every attribute listed in these matrices. We provide ongoing education and professional development opportunities, and access to resources and supports (such as the Community of Practice for Indigenous Peoples who hold positions on BC health regulatory boards and committees). A commitment to public protection is crucial, as is having the time and focus to participate in this work, and a sincere willingness to acquire the skills and learning necessary to become more effective as a board or committee member.

Review

The bylaws give authority to the BCCNM Governance Committee to review and recommend competencies for individuals who wish to be elected to the Board or appointed as committee members. This work is completed ahead of election, appointment, or evaluation processes, usually on an annual basis to ensure the matrices remain relevant and up to date. The review includes a needs assessment to see where skills or perspectives are missing from board or committee composition so that assistance can be arranged pending the appointment of a new member(s).

These matrices were approved by the BCCNM Board on June 27, 2024.

Artwork Credit: "Totem" by Nisga'a artist Bert Azak

Quality Assurance Committee Composition Matrix

Committee Member

To support strong decision-making in service of the College's promise to foster unshakeable confidence in nursing and midwifery care, every committee member will bring the following **VALUES** and **ATTRIBUTES** to the table:

- Act with integrity and speak the truth; be able and willing to take full responsibility for decisions made; and follow through on commitments. *[Accountability, Honesty, and Integrity]*
- Appreciate that, at times, plans will adjust to meet changing circumstances and needs. *[Adaptability]*
- Recognize that, in a complex system, what can emerge from collaborative and meaningful engagement and discourse will be stronger than what is created in isolation. *[Collaboration]*
- Be open to new or broader perspectives; employ a learning mindset by listening and becoming better informed; and take time to self-reflect and acknowledge the impact of personal power and privilege when contemplating decisions. *[Humility]*
- Actively commit to creating safe gathering spaces that welcome and support all who wish to connect, learn, share, belong, and grow. *[Inclusivity]*
- Make decisions based on evidence and good information, that will best fulfil the public protection mandate. *[Objectivity]*
- Have passion for the College's purpose and vision; compassion for the public and their right to safe, ethical care; an understanding and appreciation of, and commitment to, the board's role in protecting the public and the time required to diligently execute that role; and recognize that public interest will always be prioritized over personal or professional interests. *[Public Service]*
- Work with others effectively to support a culture of trust; be present and participate fully in discussions, fostering and promoting, not impeding or stifling, robust dialogue; and remain aware and sensitive to the impact of language used. *[Respect]*
- Have a clear understanding of personal strengths and privileges, the consequences of bias and potential conflicts of interest; recognize the value of continuous development and improvement; and be open to reflection, feedback, and opportunities to learn, relearn and unlearn. *[Self-Awareness]*

Every committee member will bring, or be willing to learn, the following **SKILLS, PRACTICES** and **KNOWLEDGE**:

- Understanding of what it means to be an ally and knowledge of how to actively model this behaviour; ability to speak up and acknowledge instances or systems of oppression; and ability to hold self and others accountable for creating safe and inclusive spaces in which honest conversations can occur. *[Allyship]*
- Understanding and actively identifying, challenging, preventing, eliminating, and changing the values, structures, policies, programs, practices, and behaviours that perpetuate racism to create conditions of greater inclusion, equality, equity, and justice. *[Anti-Racism]*
- Understanding of the need for protecting the privacy and confidentiality of registrants' quality assurance data, as legislated under the Health Professions Act. *[Confidentiality]*
- Understanding of the social, legislative and political history of the First Nations and Indigenous Peoples in BC¹; the impact of colonialism in Canada and its enduring traumatic legacy; and the effects of widespread Indigenous-specific racism within the healthcare system. *[First Nations and Indigenous Context]*
- Knowledge and understanding of the common terminology, acronyms and phrases used in health care. *[Health Care Terminology]*
- Understanding of the role and philosophy of health profession regulators, the public protection mandate of the College, the applicable legislation, regulations, bylaws and policies, and the core work of the College and its committees. *[Health Professions Regulation]*
- Understanding and ongoing learning of the distinct First Nations rights and title, approaches, protocols, and governance that inform discussions and decision-making; appreciation and respect for the rights, perspectives, and experiences of First Nations, Inuit, and Métis people who also live in this province; application of learning to make visible the impacts of settler-colonialism; and supporting BCCNM as it embeds Indigenous-specific anti-racist practices within its work, to create safety through the continuous practice of cultural humility. *[Indigenous-Specific Anti-Racism]*
- Ability to carefully review voluminous material within set timelines, assess implications, identify patterns, make connections, and narrow the issues to support good decision-making. *[Information Analysis and Judgement]*
- Ability to understand the basic principles of administrative law, restorative justice, and quasi-judicial processes; bring a commitment to the unbiased balancing of issues, meticulously weighing evidence and thinking critically about issues at hand; ability to consider options within the scope of the College's mandate and power; and bring consistency and sound judgment to decision-making in accordance with procedural fairness principles set out in common law. *[Procedural Fairness]*
- Knowledge of how to use methods that align with the developmental intention of the College's quality assurance program and philosophy. *[Quality Assurance Program]*
- Understanding of the standards and scopes of practice that guide nursing and midwifery practice in British Columbia, and ability to determine where a breach or potential breach might occur. *[Standards/Scopes of Practice]*
- Awareness of the complex system in which the College works, including the partners within that system, and the impact that College decisions have on this greater community. *[System Thinking]*
- Ability to efficiently navigate and use the College's computer and conferencing systems, adhering to applicable security and privacy policies. *[Technological Competence]*

¹ [Distinctions-based Approach Primer](#), Province of British Columbia (December 2023)

Committee

To support strong decision-making in service of the College's promise to foster unshakeable confidence in nursing and midwifery care, the Committee will bring the following **DIVERSE EXPERIENCE, BACKGROUNDS, and PERSPECTIVES**:

- Lived experience accommodating or navigating a spectrum of physical, mental health, or cognitive abilities, the knowledge of which can enhance relevant, thoughtful decisions that protect the public. *[Ableness]*
- Representation across all adult age groups to reflect the diverse experiences and perspectives of registrants and the public served by the College. *[Age]*
- A variety of cultural and historical backgrounds and experiences that reflect the communities the College serves and the cultural context within BC's health care system. *[Culture]*
- Local, national, and international academic backgrounds and experiences that reflect the diverse education and knowledge of registrants and the public served by the College. *[Education]*
- No fewer than two First Nations and Indigenous individuals at each meeting table, whose perspectives must be embedded within the College's governance structure to ensure that: deliberations include and are informed by firsthand knowledge and experiences of First Nations and Indigenous communities; decisions include and respect key rights, title, protocols, and perspectives; collective biases are identified, questioned and mitigated; and the College's Indigenous-Specific Anti-Racism journey continues to be supported so it may contribute to positive systemic change. *[First Nations and Indigenous Voices]*
- A range of gender identities and gender expressions to promote knowledge, conversation, and understanding about gender, expanding binary thinking, and learning the impact gender bias has on the public's access and experiences within the health care system. *[Gender]*
- Regional diversity, including rural, remote, and First Nations communities (which also encompass on-reserve and treaty settlement lands), to reflect the reality that practice, access to healthcare, and the public's expectations of the health care system varies throughout the province. *[Region]*
- Diverse practice experiences, backgrounds and specialities that inform dialogue and decision-making, ensuring decisions meet intended objectives, are practical and, ultimately, protect the public. *[Registrant Practice]*
- Diverse leadership experience in the public, private, healthcare, and not-for-profit sectors, to promote knowledge and the sharing of best practices. *[Sector]*
- Diverse perspectives from individuals who self-identify as 2SLGBTQIA+, to expand thinking and decision-making beyond heteronormative privilege, beliefs, and biases. *[Sexual Orientation]*
- Varied perspectives arising from the complex, multifaceted, and intersectional measures of social and economic standing, the lived experience of which will promote recognition of inequities and privilege, and ensure that solutions can be universally applied without causing unintended barriers or consequences. *[Socio-Economic Background]*

One or more committee members will have the following specific **PROFESSIONAL EXPERIENCE, KNOWLEDGE, and SKILLS**:

- Experience in facilitating committee or panel meetings, developing a positive culture, conflict resolution, and fostering effective decision making. *[Committee/Panel Leadership]*
- Understand how governance works, how committees should function, and be able to think critically about committee structures and practices. *[Governance Expertise]*
- Experience in and understanding of the quality assurance and quality improvement programs and assessments in health care, and experience in developing tools that enable meaningful feedback and continuous improvement. *[Quality Improvement]*