

Colleagues in Health Care:

By now you have no doubt seen the Harry Cayton Report on the performance of the of BC College of Dental Surgeons and the Health Professions Act [HPA]. You may not have read the whole 100 page report.

When we read this report we found it encouraging on some levels (multi profession colleges for high risk professions) but discouraging on others, as per the mention of moratoriums on new Colleges. Let me explain:

We, the BCCLS , along with three other professional associations have been working diligently for **over two decades** now to encourage the establishment of a new Regulatory College, unofficially called the College of Diagnostic and Therapeutic Health Professions [CDTHP]. This college would regulate four **high risk** professions [Medical Laboratory Technologists, Perfusionists, Respiratory Therapists and Radiation Technologists]. The Designation Regulation that initially established the College was approved by Cabinet just prior to the last election, but even though it was an initiative of the previous government it was also supported by several high profile NDP MLAs who are now Cabinet Ministers themselves. It was truly a bi-partisan initiative.

Since then we, the four associations , have been working with Ministry staff to develop the Ministerial Regulations that will officially launch the new College. We are literally weeks away from posting these regulations for a mandatory 90 day consultation period, required by the HPA, after which the College would be functional. Decades of hard work is coming to fruition. This effort has required hundreds of hours of volunteer time, effort and commitment by all four professions , not to mention tens of thousands of association dollars over time. The new College will be self-sufficient and will **not require any tax payer dollars whatsoever.**

We are encouraged by Mr. Cayton's report in that he stresses justification for "[creating a multi-occupation college, as has been done in Ireland<sup>108</sup> and the UK<sup>109</sup>](#). These occupations should be high risk."

Our new College is just that, a multi profession College [4 professions] of high risk occupations, risk acknowledged by government and established in the public interest.

We are concerned however that if the recommendation "to place a moratorium on creating any new colleges and consult on how any occupations currently under consideration for regulation could be registered with an existing College" is implemented and if our new College is part of that it will result in an unacceptable delay after all these years of hard work and great expense. In our experience if the Ministry undertakes a revision of the HPA and a restructuring of the Regulatory Framework for Health Care in BC that could conceivably and easily take five to ten years. In the meantime patients will be at risk due to a lack of mandatory continuing education and continuing competence for all four of our professions. These four professions are regulated in other provinces across Canada except for B.C. . Mr. Cayton's comment that "[The current](#)

*model of professional regulation will not be adequate to protect patients and the public or to represent the interests of citizens in the future,* will certainly ring true for our four profession as we currently have no regulation at all.

85% of the decisions made by a doctor , vis a vis diagnosis and treatment of patients, are based on lab test results or diagnostics. If we get it wrong, the doctor gets it wrong and the cost to patients is significant in every which way. This is high risk by definition.

While we acknowledge that there have been issues with some Colleges and with the regulatory system itself, we don't believe government should throw out the baby with the bathwater. Once our new College is established and functional if we need to change , adapt , revise or totally rework ourselves based on a new HPA or a new Regulatory Framework so be it! We can, but at least in the meantime patients will be a lot safer. Currently we have no recognized scope of practice, no mandatory continuing education and competence requirements and most importantly there is no recourse for patients who might fall victim to mistakes made unintentionally or otherwise.

I am asking that all of you help ensure that we, the four professions and the four professional associations, be allowed to continue our good work in concert with Ministry staff. We are already at the eleventh hour and to brush all this time , effort and financial resources aside now would be a travesty. We have an opportunity to actually create a **best case practice** here in line with Mr. Cayton's suggestions while ensuring that nothing is etched in stone forever. We could be the "poster child" of the new thinking. If patient safety and public protection is truly a goal, and Mr. Cayton seems to think it should be, then self- regulation of our four professions is critical. Please don't let it take another decade.

I am at your disposal should you wish to discuss this further.

Very sincerely,

Malcolm