

COMPOSITION MATRIX

Non-hospital Medical and Surgical Facilities Accreditation Program Committee

Preamble

It is not the expectation that any one person would bring all of these to the table, but that this would be the ideal composition of the full board or committee.

Matrix

<p>The attributes that make a strong committee member:</p> <p>Ideally every committee member would bring the following to the table.</p>		<p>The attributes that make a strong committee:</p> <p>Decision-making is stronger if one or more committee members bring the following to the table.</p>	
<p>Values and attributes that every committee member must bring to the table to support strong decision-making in the public interest.</p>	<p>Skills, practices and knowledge that every committee member must bring to the table, or be willing to learn, to support strong decision-making in the public interest.</p>	<p>Diverse experience, backgrounds and perspectives that will support strong decision-making in the public interest.</p>	<p>Specific professional experience, knowledge and skills that will support strong decision-making in the public interest.</p>

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<p>Accountability, honesty and integrity: Willingness and ability to take full responsibility for decisions and to follow through on commitments. Demonstrated commitment to integrity and truth-telling.</p>	<p>Cultural safety and humility: Ongoing learning, appreciation and respect for unique perspectives, cultural contexts, power imbalances, and biases in deliberation and decision making; recognition of the role the NHMSFAP and CPSBC play in fostering culturally safe, humble, respectful and quality health care through its cultural safety and humility commitments.</p>	<p>Culture: A variety of cultural and historical backgrounds and experiences to reflect the community that CPSBC serves and the cultural context within health care.</p>	<p>Change leadership: Change management and transformation experience that supports the Committee’s ability to adapt, evolve and lead systemic change.</p>
<p>Adaptability: Recognition that plans occasionally need to change in order to meet evolving needs and circumstances.</p>	<p>Diplomacy: Interpersonal communication skills. Ability to clearly articulate a perspective and to engage in respectful and productive discussions with the NHMSFAP members, staff and key health partners. A commitment to work within and reinforce a culture of trust.</p>	<p>Education: A variety of educational backgrounds and experiences that reflect the diversity of the public we serve.</p>	<p>Facilities management experience: An understanding of good management principles and what a health-care organization needs to operate effectively.</p>
<p>Collaboration: Recognition that meaningful engagement and dialogue lead to stronger results than the isolated efforts of individuals working within a complex system.</p>	<p>Governance: Understanding of the role played by committee members, and of good governance principles, fiduciary duties and the responsibilities of the NHMSFAP.</p>	<p>Indigenous: Indigenous and First Nations voices embedded within the CPSBC governance structure to ensure that deliberations are informed, that decisions include and respect Indigenous and First Nations perspectives, that biases are identified and questioned, and that CPSBC’s collective work continues to grow in its cultural safety and humility journey, contributing to positive systemic change.</p>	<p>Governance expertise: Knowledge and experience as a committee member; the ability to calmly weigh evidence, think critically, consider options and bring sound judgment to decision-making.</p>

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<p>Compassion: A deeply felt concern for the well-being of BC residents and a commitment to safe, ethical care.</p>	<p>Health professions regulation: Understanding of the role of the NHMSFAP, its mandate as described in the CPSBC Bylaws, and the core work of the NHMSFAP.</p>	<p>Region: Regional diversity to reflect differing realities in health care practice and public expectation that exist throughout the province; specifically, the Lower Mainland, Island, North, and Interior.</p>	<p>Government relations: Understanding of how health-care partners work together and how those interactions affect and are affected by the work of the NHMSFAP Committee.</p>
<p>Humility: Openness to new ideas, new perspectives and new ways of doing things; the willingness to bring a learning mindset to decision-making.</p>	<p>Accreditation award decision-making: Understanding of the accreditation standards and appreciation for the impact of decision making on those facilities and patients served and how to ensure that decisions are based on objective principles and informed by evidence and best practice.</p>	<p>Licensee practice: Diverse practice experiences, backgrounds and specialties to foster dialogue that leads to practical decisions that meet intended objectives and effectively protect the public.</p>	<p>Innovation: Understanding of health care industry-wide trends notably surgical innovations and developments and their importance relative to quality and patient safety.</p>
<p>Inclusivity: Ability to create a working culture that is welcoming of diverse perspectives, new partners, and new ideas.</p>	<p>External accreditation requirements: Understand the scope and nature of international standards to which the NHMSFAP is evaluated and their implications for the work of the NHMSFAP Committee.</p>	<p>Sexual orientation/gender identity: A variety of perspectives to support decisions that are balanced and relevant.</p>	<p>Leadership: Experience in committee meetings and decision-making, supporting a culture of quality improvement, and fostering committee effectiveness.</p>
<p>Objectivity: Ability to take a step back and make decisions based on solid evidence and good information, in order to best fulfil the CPSBC public protection mandate.</p>	<p>Technological competence: Ability to work electronically to conduct the business of the NHMSFAP (e.g. review briefing notes) while upholding the security, privacy and efficiency of the NHMSFAP's work.</p>		<p>Public relations: Appreciation of the CPSBC mandate and commitment to transparency and accountability.</p>

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<p>Public service: A clear understanding and appreciation of, and a commitment to, the CPSBC public protection mandate and the time required to execute the role diligently. Recognition that the public interest always overrides one’s personal or professional interests.</p>	<p>Technical and clinical competence: In the case of clinical committee members, expert-level understanding of one or more technical areas required to make accreditation award decisions. In the case of all members, understanding of relevant provisions of the <i>Medicare Protection Act</i> and related government positions and policies regarding the payment and delivery of public and private care.</p>		<p>Quality improvement: Experience and understanding of both quality assurance and the science of quality improvement in health care.</p>
<p>Respect: Ability to work with others effectively; to appreciate and foster the robust exchange of differing perspectives and opinions.</p>			<p>Risk management/ oversight: Understanding of the principles of risk management and risk oversight.</p>
<p>Self-awareness: Clear understanding of one’s own strengths, areas that would benefit from development, and potential biases. Openness to reflection and feedback and dedication to continuous growth and improvement.</p>			<p>Strategic planning: Experience articulating a vision, identifying strategic priorities and appropriately overseeing organizational performance.</p>