College of Veterinarians of British Columbia

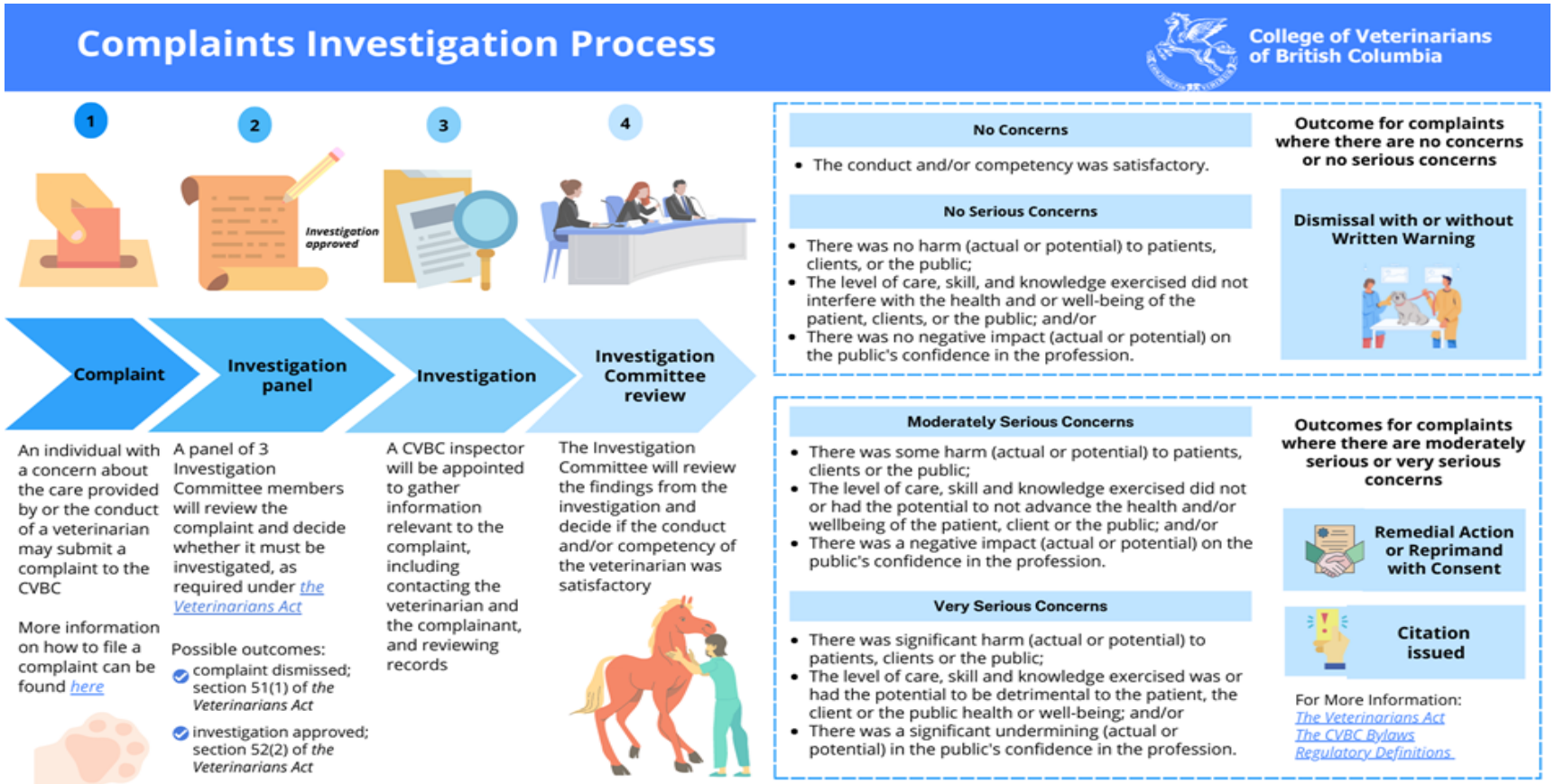
CVBC Complaints and Investigation Progress Report

NOVEMBER 4 2022

Complaints and Investigation Action Plan Progress Report

TASK	PROGRESS	START	GOAL
Transparency and Communication with the Public			
Develop a Communication Package for Registrants and the Public	100%	7-1-22	7-31-22
Roll out of Report Findings and Action Plan	100%	7-1-22	7-31-22
Review of Communication Materials			
Website	67%		
Revise text on complaints page	100%	7-1-22	8-30-22
Publish All Discipline Committee Decisions including pre-hearing	0%	7-1-22	8-30-22
Ensure the process for filing a complaint is clear	100%	7-1-22	8-31-22
Formalize a process for members of the public unable to communicate in writing in English	100%	7-1-22	8-31-22
Review and improve templates for documents that are sent to registrants and the public	50%	7-1-22	9-30-22
Continue to work with stakeholders to support comms skills	0%	7-1-22	7-31-24
Incorporate complaint outcomes requiring public notification into the online registry	0%	7-1-22	1-31-23

Complaints Investigation Process



https://www.cvbc.ca/public-protection/complaints-process/

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TASK	PROGRESS	START	GOAL
Reforming the Complaints Process			
Standard on duty to report for registrants	0%	1-2-23	7-31-23
Risk Assessment for Staff	100%	7-1-22	8-30-22
Decision Support tool for IC	100%	7-1-22	8-31-22
Template for Presenting material from the IC and the IP referencing bylaws and standards	100%	7-1-22	8-31-22
Process to present previous decisions when determining outcomes/penalties	100%	7-1-22	8-31-22
Template or Guidelines for Case Presentation to the IC	75%	7-1-22	2022-09-31
Modify Current IC operations to be more nimble	70%	7-1-22	10-31-22
Establish a more timely meeting minute approval process	50%	7-1-22	7-31-22
Review admin processes	30%	7-1-22	12-31-22
Interim order process	50%	1-2-23	10-31-23
Identify potential bylaw and standard breeches in IP memos	100%	7-1-22	8-31-22
Public Members on all subcommittess	15%	7-1-22	7-1-24
Establish a monitoring process for undertakings	40%	11-1-22	1-31-23

Staff Risk Assessment Tool

Staff Risk Assessment Tool

The purpose of this Staff Risk Assessment Tool is to provide staff with general guidance on how to assess and prioritize complaints based on risk to the public. As a general guide, this tool is not comprehensive for assessing risk on all complaints. Staff should bring any questions or concerns to CVBC Management.

Step 1: Assess the Complaint for Level of Risk

Risk is determined by assessing the degree of harm (actual or potential) to public and/or the public's confidence in the profession. There are three potential risk categories:

No/Minimal Risk: there is little to no harm (actual or potential) to the public or the public's confidence in the profession.

Moderate Risk: there is some harm (actual or potential) to the public or the public's confidence in the profession.

High Risk: there is significant harm (actual or potential) to the public or the public's confidence in the profession.

Complaint Category	Risk Assessment
Patient Care Alternative/complementary treatment Anesthesia Assessment/diagnosis Collaborative care	**No/Minimal Risk:** - Examples could include situations where the registrant's patient care did not, or did not have the potential to, lead to: a worsening of the patient's symptoms, prolonged pain and suffering, or additional symptoms/problems. - Generally, the patient makes a full recovery without complications.

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IC Decision Making Framework

The purpose of this framework is to guide the Investigation Committee decision-making when addressing complaints to ensure consistent, fair and transparent decision-making.

Note: This framework does not apply to health related matters.

STEP 1: Conduct a provisional assessment of the facts to identify any concerns about the registrant's conduct and/or competency.

Issue	Complaint Category	Concerns Identified?	Summarize why there are or aren't concerns
Issue 1	Client Interactions Make a Selection	☐ Yes ☐ No	
Issue 2	Patient Care Make a Selection	☐ Yes ☐ No	

Investigation Committee Decision Framework

Complaints and Investigation Action Plan Progress Report

TASK	PROGRESS	START	GOAL
Enabling Change to Happen			
Review Staffing Levels			
Build operational capacity of the Complaints department and IC	100%	7-1-22	9-30-22
Enhance Paralegal Capacity	100%	7-1-22	8-31-22
Review HR capacity required to support change implementation	100%	7-1-22	8-31-22
Appoint a Chief Information Officer	100%	7-1-22	7-1-22
Training			
Training for the Intake Panel (data security pending, risk based pending)	75%	7-1-22	11-30-22
Training for the Investigation Committee (data security pending)	75%	7-1-22	3-31-22
Training for Staff	100%	7-1-22	7-31-24
Training for Investigators	80%	7-1-22	12-31-22
Complete Complaints Manual	0%	1-2-23	3-31-23

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TASK	PROGRESS	START	GOAL
Information Governance			
Develop and Information Management and Cybersecurity Framework	0%	7-31-22	3-31-23
Further Enhance security practices with respect to data management	80%	7-31-22	8-31-22