



Terms of reference – NNPBC NP Council

Preamble

Nurse Practitioners (NPs) practice autonomously and collaboratively to provide health care services that contribute to the health and wellbeing of British Columbians across the lifespan. Acting as leaders, NPs practice in diverse settings improving access to health care services, by contributing to a health care system that is responsive to the needs of all British Columbians.

Note: The term Nurse Practitioner or NP is a protected title and will be used in this document to refer to all British Columbian BC College of Nurses and Midwives (BCCNM) classifications of NP(s) – Adult, Family, and Pediatric.

A Nurse Practitioner (NP) is an advanced practice nurse (APN) that is licensed in the classification of Nurse Practitioner by the BCCNM. NPs provide comprehensive clinical care, including diagnosis and management of disease/illness, prescribing medications, ordering/interpreting laboratory/diagnostic tests, and initiating referrals to specialists. NPs provide care in both primary and acute care settings, including rural, remote, and urban centers.

Nurse Practitioners do not require physician supervision.

Mandate

To collaborate amongst NPs to establish consistent recommendations and responses to common and or emerging nursing issues in British Columbia.

To work collaboratively and reciprocally with the Nurses and Nurse Practitioners BC (NNPBC) Board to ensure the NP voice is heard in all health and social policy discussions and that the NP perspective is recognized as one key component of the nursing profession in the province of British Columbia.

The NP Council will be mandated to be the only group working with government and stakeholders on NP specific issues and initiatives such as NP compensation and provincial NP implementation (please see Appendix A – NNPBC/BCNPA Statement of Intent).

Membership/Composition of NP Council

- All Council Members must be members of NNPBC.
- The NP Council will include a maximum of 15 elected representatives.
- Representatives will be known as Councillors.
- All representatives shall be actively practising Nurse Practitioners.
- Additional guests may be invited and consulted as needed (e.g., committee members, advisors, stakeholders, NNPBC staff support).
- Councillors on the NP Council will strive to incorporate and represent the domains of nursing including clinical practice, education, research, policy, and leadership/administration. Councillors with an interest in these domains will be identified and required to do work that may arise within these domains.
- Please refer to NP Councillor Descriptions, Roles and Responsibilities found on the NNPBC NP Portal tab. The Council will strive to include representation from the following groups, recognizing that one individual may represent a number of categories. The first two categories (Regional and Indigenous) will be a priority:
 1. Regional Councillors (10)
 - Vancouver Coastal (2)
 - Fraser (2)
 - Island (2)



- Interior (2)
- Northern (2)
- 2. Rural/Remote (1)
- 3. Indigenous (1)
- 4. Councillor at Large (1)
- 5. Councillor at Large/Ex-Officio (1) – this is an appointed position by the NP Council and is non-voting.
- 6. Student Rep (1) – must be enrolled in and in good standing in a nursing education program recognized by the NNPBC Board as leading to registration as an NP. This is an appointed position by the NP Council.

Elected members from within the NP Council or at recommendation of nominations committee:

- 1) President (Elected by and from within NP Council)
- 2) President Elect (Elected by and from within NP Council)

Term of Membership

Councillors will serve a two-year term from the close of the annual general meeting following their election, renewal for a maximum of three terms (no more than 6 years total).

The Councillors will have staggered terms of office and no more than a simple majority of the initial Councillors will hold office for a term ending in the same year.

NP Student Councillors may serve from 1 to 2 year terms and must be enrolled and in good standing with a nursing education program recognized by the NNPBC Board as leading to registration as an NP.

Formation Details

Elections for NP Council representatives will occur in the spring each year. In March, the Council will identify which positions are required to be filled and forward this information to their NNPBC staff support person. The Councils will officially be formed at the close of the annual general meeting following their election.

The NP Council will determine its President-Elect by the process of election (ie majority vote) within one month of the election of new NP Council members. This person will transition into the president role at the end of the AGM the following year. Where necessary, the Council will appoint Councillors to serve positions on an "interim" basis. In addition, it reserves the right to revisit this decision from time to time throughout the year, to ensure that the Council remains optimally served by those who hold these offices.

The President and President Elect will hold a seat on the NNPBC Board as Directors. The President Elect will assume the role of President at the end of the current President's term.

The NP Council reserves the authority to decide if an alternative configuration is more strategic for Board representation at any time during the 2 year Board term of the NP Council President and President-Elect. Thus, a change in Board Director representation may include existent Councillors or Councillors who have been elected during the election process but whose term of office does not commence until the end of the annual general meeting.

Goals, Deliverables and Responsibilities

- 1) Define, discuss and make recommendations to the NNPBC board on specific NP issues and projects (see Letter of Intent – Appendix A).
- 2) Speak on behalf of NPs to all stakeholders, as determined by the NP Council and in consultation with NNPBC Board and Staff (see Appendix A).
- 3) Consider and advocate for funding from the NNPBC Board for NP specific projects (see Appendix A).



- 4) Advise, support and work with NNPBC staff to inform the public and other stakeholders regarding NP practice and issues.
- 5) Develop priorities to guide the overall NNPBC strategic plan and work with NNPBC staff to deliver the strategic plan through new and ongoing work (including but not limited to policies, research and mentorship)
- 6) Advocate for systemic changes to better serve the nursing profession generally and NP profession specifically (including, but not limited to NP integration in the health care system, remuneration and scope of practice issues).
- 7) Review, assess and approve any NP specific policies/communications/papers developed at NNPBC.
- 8) Engage with NP members throughout BC to encourage volunteer involvement of NPs on NP specific and broader NNPBC committees/policy tables/collaborative nursing groups and to ensure NP issues in each region are brought forward.
- 9) Focus on specific initiatives not undertaken by the NNPBC organization/Board (e.g., designation specific conference, response to specific legislation that impacts only NPs, etc.)
- 10) Collaborate with other NNPBC Councils on shared initiatives.
- 11) Work with NNPBC Board to develop dispute resolution mechanisms for the organization and model these to the larger nursing community.
- 12) Create nursing leadership opportunities.
- 13) Support and execute the decisions and recommendations of the NNPBC Board.

Authority

The NP Council will be responsible for bringing forward the key issues impacting NPs to the NNPBC Board. The NP Council will have support from the NNPBC Staff to determine these issues and will utilize these resources to discuss, research, consult and bring forward recommendations around key areas impacting the profession. (Please refer to Letter of Intent in Appendix A).

As the current implementation of NPs in BC is complex, the NP Council will be carrying on the system level advocacy for the implementation of NPs in BC. As part of this advocacy role, the NP Council shall be solely responsible for advocating, negotiating and approving funding matters related to employment and service contracts for NPs and approving any NP matters related to such funding, including but not limited to, adjustments to NP remuneration and negotiating NP remuneration with HEABC and the Ministry of Health.

The NP Council shall have full control in the operation of an annual Nurse Practitioner's Conference, including but not limited to program materials, fees, and agendas. The NP Council will be responsible for funding the Conference, including any shortfalls in the Conference. The NP Council will be entitled to designate funds generated from the Conference for its own activities (restricted NP Fund). The NP Council will include the Conference revenues and expenses in its financial statements.

Resources and Budget

The NP Council will be responsible for managing their financial allocation from the NNPBC Board, including the NP restricted fund. The NP Council staff person will provide an annual financial statement to the NNPBC Board outlining how the allocation received from the NNPBC, and any additional funding provided, was used. More details on meeting and travel costs are outlined under "Communications and Meetings". Additional expense coverage provided by NNPBC not related to meetings must be pre-approved by the NNPBC Board.

Governance

In all instances, consensus will be sought when decisions are required. In the absence of consensus, a 2/3 vote of members will be required to move an issue or recommendation forward.



Communications & Meetings

- Council members agree to keep information confidential as required by the NP Council executive and/or NNPBC Board. A signed confidentiality agreement is required.
- NNPBC Councils will be supported and funded to meet up to six times per year in person. Additional phone and webinar opportunities will be available at any time. Councils will determine their meeting schedule and frequency at the first meeting after formation.
- Each Council will have access to a confidential Intranet site, as well as shared Intranet space for common and shared files.
- Primary communication will be via email, and each Council member will be expected to maintain an up-to-date email and phone number with the NNPBC Executive Assistant.
- Travel costs for non-government members, associated with in person meetings, will be in alignment with NNPBC travel and reimbursement policies as set by the Board of Directors.
- Additional expenses that may be incurred should be discussed prior to the expenditure and must receive pre-approval from NNPBC for reimbursement.

Dissolution or Liquidation

The intention is that on the dissolution or liquidation of NNPBC, after payment of or adequate provision for all of the NNPBC's liabilities has been made, the remaining money or other property of NNPBC will be distributed equally amongst BC societies that have been organized to represent the RNs, NPs, LPNs and RPNs in BC. The NP Council will be responsible for identifying a society that will represent the NPs in BC.