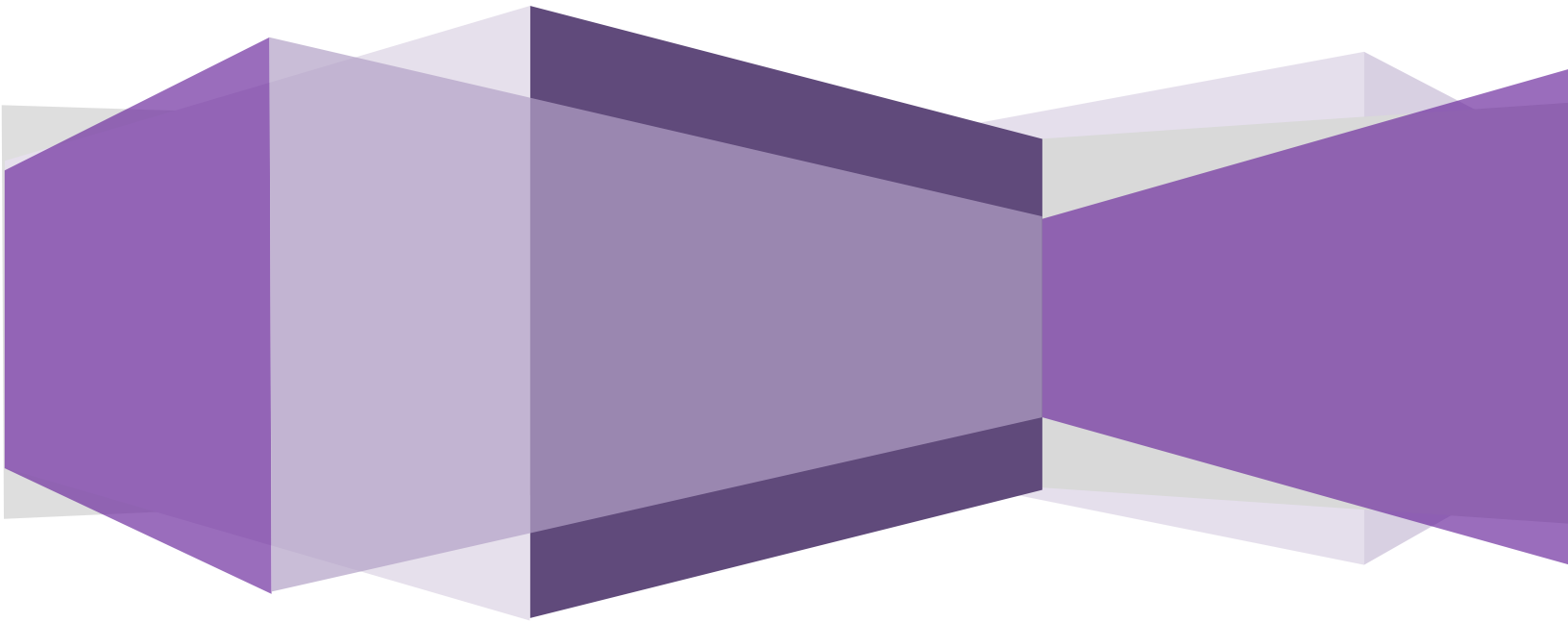
Hospital Appeal Board

2025-2026 Annual Report

Covering the reporting period from
April 1, 2025 – March 31, 2026



Hospital Appeal Board

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Message from the Chair

I am pleased to submit the Annual Report of the Hospital Appeal Board (the "Board" or the "HAB") for the fiscal year beginning April 1, 2025 and ending March 31, 2026. This report is submitted pursuant to section 59.2 of the *Administrative Tribunals Act*.

APPEAL ACTIVITY DURING THE REPORTING PERIOD

Section 59.2(c) of the *Administrative Tribunals Act* requires the Board to provide details on the nature and number of appeals received by the tribunal during the reporting period.

There were a total of 11 appeals before the Board during the current reporting period, nine of which were carried over from the previous reporting period and two of which were filed during this reporting period. The nine appeals that were carried over were largely inactive because they are being held in abeyance at the request of the parties pending the outcome of related litigation or settlement discussions. One of these nine files was closed during the reporting period after the parties concluded the terms of a settlement.

At the conclusion of the current reporting period there were ten appeals still outstanding before the Board; eight of which are being held in abeyance at the request of the parties and two of which are in the pre-hearing case management phase.

Further details of all these appeals are provided later in this report.

Judicial Reviews

During the current reporting period, no new applications for judicial review were filed in the BC Supreme Court. The BC Supreme Court gave its decision in one existing judicial review file, upholding the HAB's decision in every respect. The petitioner in that matter has filed an appeal of this decision in the BC Court of Appeal. That appeal is expected to be heard in the next reporting period and Attorney General of BC is also participating in the appeal to address a novel constitutional issue.

Further details about this judicial review are provided later in this report.

Forecast of Workload for the Next Reporting Period

Section 59.2(f) of the *Administrative Tribunals Act* requires the Board to provide a forecast of the workload for the forthcoming reporting period.

The Board expects that its two active files will proceed to multi-week oral hearings in late 2026 and accordingly the HAB is forecasting higher expenses than in the recent past.

Historically, it is unusual for the HAB to run two oral hearings in the same fiscal year and it is more typical for one hearing per fiscal year to occur, at most. When a tribunal with a modest caseload volume, such as the HAB, sees an increase of 100% more hearings in a year, even if that only amounts to one additional hearing, it creates financial forecasting challenges for not only the tribunal, but for the BC Ministry of Attorney General offices we work with on fiscal matters. This sort of budgeting and forecasting challenge is not unique to the HAB; it is a challenge experienced across the sector.

The HAB intends to hear all of the appeals before it as soon as the parties are ready to proceed, rather than defer hearings into future fiscal years or instruct panel chairs to cease writing the resulting decision until the new fiscal year. Delaying a hearing, or delaying the drafting of the resulting decision, is not a trivial or inevitable matter. A delay in a hearing or a decision means that in most cases medical practitioners who have been excluded from practice in hospitals will see their skill sets become increasingly stale, potentially leading to downstream reintegration barriers, patient safety risks, and questions of professional competence. For the reasons above, it is in the interest of all British Columbians to have these hearings proceed as soon as the parties are ready, and for decisions to be issued promptly thereafter.

Trends Noted

Section 59.2(g) of the *Administrative Tribunals Act* requires the Board to report any trends or special problems it foresees. The main trend that the Board has identified in this reporting period, as with the previous reporting periods, is the complexity and length of appeals over the past several years.

The Board has found it difficult at times over the past several years to provide timely hearings for the increasingly long and complex appeals. As discussed in earlier annual reports, this is because it has been difficult for the Board to recruit and retain members

who are available to sit on hearings that take place over several weeks. The membership of the Board consists largely of experienced health care practitioners, administrators, and lawyers who have busy practices and who often find it difficult and financially impractical to set aside large periods of time for attendance at hearings. These individuals are selected for membership on the Board on the basis of their expertise and high standing in their respective fields.

In order to maintain the high calibre of the professionals who currently sit on the Board, it may be necessary to provide greater incentives for members attending lengthy hearings; for example, greater overall member compensation, particularly for Panel chairs who are tasked with adjudicating complex legal issues; and also, financial compensation for hearings which are cancelled last-minute.

The Hospital Appeal Board is currently classified as a tier 2 tribunal for the purposes of *Treasury Board Directive 1/24*, which sets tribunal member remuneration in BC. The resulting low per diem rates creates a disincentive for Members with other employment to sit on long hearings because it removes the ability for them to earn significant portions of their regular income. For example, a lawyer who may bill $500-800 per hour in her legal practice must give up five weeks of pay to sit on a Hospital Appeal Board panel where she will be compensated $515 – $545 per day as a panel member, or $605 - $665 per day as a panel Chair.[1] The complexity of the *de novo* hearings[2] before this tribunal is similar to court proceedings and justify a classification as a tier 5 tribunal. This reclassification would alleviate some of the compensation issues experienced by the Board.

In addition, the Board has noted an increase in the number of post-decision applications, particularly regarding implementation of the Board's decisions. Where the health authority's decision is affirmed, there is little to deal with after the Board's decision. However, where the Board grants the appeal and reinstates the Appellant back into the hospital setting, there are more complicated steps that need to be taken, and applications related to this are becoming more complex and resulting in re-opening appeals and resulting in longer total appeal times. The Board intends to evaluate whether the current processes are working for post decision implementation and whether additional processes or statutory powers are required.

Plans for Improving the Board's Operations

Section 59.2(h) of the *Administrative Tribunals Act* requires the Board to report its plans for improving operations in the future.

The administrative support functions of the Board are consolidated with the Environmental Appeal Board cluster of tribunals (the "EAB cluster") in Victoria. Effective December 12, 2025, the EAB cluster relocated to a new office space shared with other

[1] Rates effective April 1, 2024.

[2] A *de novo* hearing is one in which the decision-making authority deals completely afresh with a matter that has already been heard once before either by that or another authority.

administrative law bodies, such as the Civil Resolution Tribunal. This move is intended to reduce office expenses and offer savings for taxpayers.

Late in the prior reporting period, the BC Government's Chief Records Officer approved a custom information schedule for the EAB cluster: *Environmental appeal board tribunal cluster operational records classification system, schedule 195746*.[3] This schedule identifies categories of operational information and determines how long they need to be retained, and whether they will be ultimately destroyed or preserved in perpetuity in the government archives. With this schedule approved, these retention and final disposition rules may now be implemented. This is important because, although the Board maintains a comparatively modest set of operational records (both digital or in print), there was also considerable uncertainty about which of these could be disposed of, if any, and on what timeline.

Both the move to new shared offices, and the approval of this information schedule, have naturally resulted in reflections on the Board's day-to-day operations and handling and sharing of information. The Board will continue to review its Rules, Practice Directives, and forms of communication with potential and actual appellants, with the goal of ensuring that processes are cost-effective, relevant, efficient, and accessible to British Columbians.

Stacy F. Robertson, Chair
Hospital Appeal Board

[3] Schedule 195746 is available publicly at: https://www2.gov.bc.ca/gov/content/data/information-management/information-schedules/orcs/records-schedules.

Board Membership

Under section 46(4) and (4.1) of the *Hospital Act* the minister **must** appoint 10 members to the Board.

Throughout this reporting period, the HAB membership consisted of:

Board Member	Role	Initial Appointment	Term Expiry/ Resignation
Stacy Robertson	Chair	Oct 28, 2014	Dec 31, 2028
Sharleen Dumont	Vice Chair	Jan 17, 2024	Jan 17, 2028
Darlene Kolybabi	Member	Nov 6, 2018	May 5, 2025
Dr. R. Alan Meakes (Doctors of BC nominee)	Member	Jun 30, 2019	Jun 30, 2026
Sandra J. Pullin, RM (College of Nurses and Midwives nominee)	Member	Dec 31, 2019	Dec 31, 2026
Dr. Anita Molzahn	Member	Feb 1, 2021	Jun 4, 2028
Dr. Ailve McNestry (College of Physicians and Surgeons nominee)	Member	Jun 15, 2021	Jul 9, 2025
Dr. Peter Stevenson-Moore (College of Oral Health Professionals nominee)	Member	Apr 19, 2024	Apr 19, 2028
Ryan Hira	Member	May 28, 2024	May 28, 2028
John Richard Hall	Member	May 28, 2024	May 20, 2025
Dr. Heidi Oetter	Member	Sept 11, 2025	Sept11 2029
Dr. Galt Wilson (College of Physicians and Surgeons nominee)	Member	Sept 11, 2025	Sept 11 2029
Mark Mancini	Member	Feb 23, 2026	Feb 23, 2030

Section 46(4) of the *Act* provides that a Chair, Vice Chair, and other members are to be appointed to the Board by the Minister, the Attorney General, after a merit-based process.

The Board thanks all its members for their service during the reporting period. The Board's ability to adjudicate sensitive and complex appeals fairly and efficiently is a direct result of the expertise and commitment of these members' service.

Biographies of members are provided in **Appendix 1** to this report.

Legislated Membership Requirements

The Board membership is a mix of lawyers and subject matter experts, who are themselves active or retired doctors, nurses, midwives, or dental surgeons.

Board hearings are oral hearings before a three-member panel, typically chaired by a legally trained member, with subject matter experts as side-panelists. This balance of technical and legal expertise ensures that Board decisions are impartial, based on fact, legally sound, and align with the statutory scheme set out in the *Act*.

Under section 46(4) and (4.1) of the *Hospital Act* the minister **must** appoint 10 members of the Board as follows:

a) one member designated as the chair;
b) one member designated as the vice-chair;
c) one member selected from among 3 or more individuals nominated by the College of Physicians and Surgeons of BC;
d) one member selected from among 3 or more individuals nominated by the College of Oral Health Professionals;
e) one member selected from among 3 or more individuals nominated by the BC College of Nurses and Midwives who are authorized to practice midwifery;
f) one member selected from among 3 or more individuals nominated by the executive body of Doctors of BC[4]; and
g) four other members selected after a merit-based process.

On April 1, 2026, amendments to section 46 of the *Hospital Act* affecting membership of the Board will come into force. These amendments are contained in section 575 of the *Health Professions and Occupations Act*, SBC 2022, c 43. These are primarily housekeeping amendments that update the language of section 46(4.1) to better coordinate with the new *Health Professions and Occupations Act.* The amendments do not substantively alter the membership of the Board.

[4] Doctors of BC was formerly known as the British Columbia Medical Association. It is a voluntary association of physicians, residents, and medical students.

About the HAB

The HAB is a quasi-judicial administrative tribunal continued under section 46 of the *Hospital Act*.

MANDATE

The Board's purpose is to provide a specialized, independent, accessible, and cost-effective avenue of appeal, as an alternative to the courts, for health practitioners who disagree with a decision of a hospital's board of management regarding their hospital privileges.

The Board hears appeals filed by affected health practitioners from:

a) a decision of a hospital's board of management that modifies, refuses, suspends, revokes or fails to renew a practitioner's permit to practice in a hospital; or

b) the failure or refusal of a hospital's board of management to consider and decide on an application for a permit in a timely manner.

The Board generally holds one to two full, oral, court-like hearings every three to five years. In most cases, a panel of three members hears the merits of each appeal. Each appeal usually also involves a number of preliminary issues and rulings made either by the Board Chair or the Panel Chair designated to hear the appeal. These preliminary issues usually involve oral arguments and/or extensive written submissions. In addition to any preliminary issues, there are often post-decision issues regarding implementation of orders, which can require additional oral hearings and further detailed submissions.

Pursuant to section 46(2.3) of the *Hospital Act*, appeals are conducted as a "hearing *de novo*", which requires the Board to hold a new hearing in the full sense, with witnesses, expert evidence, substantial documentary evidence, and oral argument. Consequently, hearings can vary widely in length depending on the complexity of the issues under appeal and the amount and kind of evidence to be adduced, with hearings typically taking between 3 and 5 weeks to complete, sometimes spread over several months, with written submissions often exceeding 50 pages per party. Parties to the proceedings are almost always represented by experienced legal counsel.

The Board has broad remedial authority, and may affirm, vary, reverse, or substitute its own decision for that of a hospital board of management on the terms and conditions it considers appropriate. After a hearing, the Board issues detailed written reasons for its decision which are made available to the public on the Board's website.

HISTORICAL CONTEXT

The Board's authority to conduct hearings *de novo* and its broad remedial authority are a result of the particular historical circumstances which led to the establishment of hospital appeal boards across Canada in the 1970s.

In 1971, the Ontario Minister of Health appointed Samuel Grange, QC, to head a commission of inquiry because of concerns that problems had crept into the way in which hospitals made decisions on doctors' privileges. Writing four years later for the Ottawa Law Review, lawyer Joel Saltsman characterized the concerns as: "Hospitals and hospital boards were being criticized for allegedly operating "closed shops" and for improperly excluding highly qualified doctors from their staffs. The Minister had received other complaints of discrimination by reason of race and national origin."[5]

Grange's 1972 report[6] identified what he saw as the difficulties with the privileges granting process, including concerns about perceptions of institutional bias:

> When a doctor seeking appointment to a hospital is informed by the hospital that there is no room for him and the decision is made by a body composed in part of doctors engaged in that specialty and enjoying privileges within the hospital, there may reasonably remain with the applicant the suspicion that his application was refused for selfish reasons.[7]

Expanding on this, Saltsman, explained:

> The authority of the medical staff over staff appointments is limited formally to making recommendations to the [hospital] Board [of Trustees], through the [Medical Advisory Committee ("MAC")]. But because of the expert knowledge needed to assess the qualifications of an applicant, hospital boards are always strongly influenced by the MAC's judgment. With some boards that influence may be decisive in every case. It is thus fair to say that the assessment made by the MAC has more of the character of a decision than a mere recommendation.
>
> The problem is that the members of the MAC, being members of the medical staff, may have a direct financial interest in limiting the number of doctors permitted to practise in the hospital. They may possibly also be concerned in maintaining their influence over hospital policy or in perpetuating certain specific policies. Any of these interests may conceivably influence a decision about accepting a new staff application or revoking an existing one.

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[5] Joel Saltsman, "Physicians' Staff Privileges in Ontario Hospitals" (1976) 8:2 Ottawa Law Review 382 at p 408.
[6] Ontario, *Report on the Minister's Inquiry into Hospital Privileges in Ontario*, Chairman: Samuel G. M. Grange (1972) https://librarysearch.ola.org/permalink/01ONTLA_INST/1inkcod/alma99498973408781.
[7] *Ibid* at p 9-10.

To address this concern, Grange recommended that there be a right of appeal "to an independent, impartial body to ensure that justice is done to all parties". As a result of the Grange Report, Ontario enacted Canada's first Medical Appeal Board. British Columbia followed suit by creating the Medical Appeal Board in 1973, which, in 2004, was re-named the Hospital Appeal Board.

The Hospital Appeal Board's broad appellate mandate can therefore be seen as serving two key purposes. First, it provides an independent and external forum for appeal, untainted by any perception of institutional or group self-interest. Second, it provides a safeguard against the high cost of error in decisions regarding hospital privileges, both for practitioners and for the public, particularly with regard to access to specialists' services.

Operations

The administrative support functions of the Hospital Appeal Board are provided as part of the Environmental Appeal Board cluster of tribunals (the "EAB cluster") in Victoria.

In addition to the HAB, the EAB cluster provides administrative support to six other quasi-judicial appeal tribunals. This clustering of administrative support for eight independent appellate tribunals has been done to assist government in achieving economic and program delivery efficiencies by allowing greater access to resources while, at the same time, reducing administration and operating costs. In addition to the HAB and the Environmental Appeal Board, the other clustered tribunals are:

- Community Care and Assisted Living Appeal Board;
- Energy Resource Appeal Tribunal;
- Financial Services Tribunal;
- Forest Appeals Commission;
- Health Professions Review Board; and the
- Skilled Trades BC Appeal Board.

This clustering has resulted in significant savings to government through a shared services approach, particularly for tribunals with lower volumes of cases such as the HAB with part-time Chairs and ad hoc panel assignments. This arrangement has also proven to be an effective and efficient means for providing administrative support to the Board, which in turn enables the Board to fulfill its appellate mandate effectively and efficiently. The shared services approach and common office has led to greater efficiencies in training new staff and having staff with a larger compliment of knowledge to address novel or complicated issues that arise for the HAB.

Since 2017, host Ministry responsibilities for administration of the HAB (i.e. budget oversight and member appointments, as well as facilities and records supports, etc.) have

resided with the Ministry of Attorney General, where it liaises directly with the Tribunal and Agency Support Division (TASD). TASD has provided valuable support to the HAB when needed, and has been an effective partner in dealing with emerging issues.

Effective December 12, 2025, the EAB cluster relocated to a new office it will share with other administrative law bodies. This will further reduce office expenses and offer savings for taxpayers.

Appeal Activity

Appeals Before the Board

There were a total of 11 appeals before the Board during the current reporting period, nine of which were carried over from the previous reporting period and two of which were filed during this reporting period.

The nine appeals that were carried over were largely inactive because they are being held in abeyance at the request of the parties pending the outcome of related litigation or settlement discussions. One of these nine files was closed during the reporting period after the parties concluded the terms of a settlement. The remaining eight appeals are being held in abeyance at the request of the parties pending the outcome of the *Szezepaniak* appeal which is currently before the B.C. Court of Appeal.

At the conclusion of the current reporting period there were ten appeals still outstanding before the Board; eight of which are being held in abeyance at the request of the parties and two of which are in the pre-hearing case management phase.

A summary of each appeal and its status at the end of the reporting period is provided below.

1. ***HAB-HA-22-A001, filed February 22, 2022*** - Appeal from a November 26, 2021, decision of the Provincial Health Services Authority Board of Directors to cancel the Appellant's medical staff appointments and privileges. This appeal was being held abeyance by request of the parties and was subsequently dismissed on January 26, 2026 at the request of the parties after they negotiated and implemented a settlement.
2. ***HAB-HA-22-A002, filed August 23, 2022*** - Appeal from the May 25, 2022, decision of the Island Health Authority Board of Directors to cancel the Appellant's medical staff appointments and privileges. This appeal is being held in abeyance by request of the parties.

3. ***HAB-HA-22-A003, FILED AUGUST 24, 2022*** - Appeal from the May 26, 2022, decision of the Fraser Health Authority Board of Directors to cancel the Appellant's medical staff appointments and privileges. This appeal is being held in abeyance by request of the parties.
4. ***HAB-HA-22-A004, FILED OCTOBER 18, 2022*** - Appeal from the August 23, 2022, decision of the Interior Health Authority Board of Directors to cancel the Appellant's medical staff appointments and privileges. This appeal is being held in abeyance by request of the parties.
5. ***HAB-HA-22-A005, FILED OCTOBER 18, 2022*** - Appeal from the August 23, 2022, decision of the Interior Health Authority Board of Directors to cancel the Appellant's medical staff appointments and privileges. This appeal is being held in abeyance by request of the parties.
6. ***HAB-HA-22-A006, FILED OCTOBER 18, 2022*** - Appeal from the August 23, 2022, decision of the Interior Health Authority Board of Directors to cancel the Appellant's medical staff appointments and privileges. This appeal is being held in abeyance by request of the parties.
7. ***HAB-HA-22-A007, FILED OCTOBER 18, 2022*** - Appeal from the August 23, 2022, decision of the Interior Health Authority Board of Directors to cancel the Appellant's medical staff appointments and privileges. This appeal is being held in abeyance by request of the parties.
8. ***HAB-HA-22-A008, FILED OCTOBER 18, 2022*** - Appeal from the August 23, 2022, decision of the Interior Health Authority Board of Directors to cancel the Appellant's medical staff appointments and privileges. This appeal is being held in abeyance by request of the parties.
9. ***HAB-HA-22-A010, FILED OCTOBER 18, 2022*** - Appeal from the August 23, 2022, decision of the Interior Health Authority Board of Directors to cancel the Appellant's medical staff appointments and privileges. This appeal is being held in abeyance by request of the parties.
10. ***HAB-HA-A001, FILED AUGUST 1, 2025*** - Appeal from the May 6, 2025, decision of Vancouver Coastal Health Authority refusing to re-appoint the Appellant to the medical staff at the hospital where they were practising. This appeal has been set down for a hearing in November 2026.
11. ***HAB-HA-25-A002, FILED SEPTEMBER 28, 2025*** - Appeal from the July 2, 2025, decision of the Interior Health Authority Board of Directors refusing the Appellant's application for privileges. This appeal has been set down for a hearing in November 2026.

Decisions Issued

The Board was not called on to conduct any oral hearings or issue any final decisions on the merits of an appeal during the reporting period.

One significant preliminary decision was issued on an application for summary dismissal: ***Dr. Jannah Wilson v Vancouver Coastal Health Authority*, 2026 BCHAB 1.** The Board dismissed the application for summary dismissal and the hearing on the merits of the appeal is scheduled to proceed in November 2026.

HAB decisions are published on the Board's website (https://www.bchab.ca/decision), and on CanLII (https://www.canlii.org/bc/bchab).

Performance Indicators and Timelines

Section 59.2(b) and (d) of the *Administrative Tribunals Act* requires the Board to report on performance indicators and provide details of the elapsed time from filing of an appeal to the date of the final decision.

The Board's Practice Directive #1, available on the Board's website, provides projected timelines for how long it will take the Board to complete a hearing, and how long it will take the Board to issue its final decision after the hearing concludes. The projected timelines vary depending on the complexity of the appeal. This practice directive fulfills the requirement set out in section 12(1) of the *Administrative Tribunals Act*.

During the current reporting period, the Board was not called on to hold any hearings on the merits of an appeal, or issue any final decisions, and so there is no specific information to report in this category.

The Board issued one preliminary decision on a summary dismissal application. The hearing for this application proceeded by way of written submissions, rather than an oral hearing. The written submissions concluded on October 15, 2025, and the Board's 6-page decision was issued 89 calendar days later, on January 12, 2026.

In the two new appeals received during the reporting period, the Board provided the appellant with a substantive acknowledgement and response to their notice of appeal within one business day.

Looking more generally at appeal timelines; it is helpful to understand the HAB appeal process and context. The Board's appeal process, although very similar to a court process, has been designed to be faster, more efficient, and more cost-effective than if these important and complex matters were heard by the courts.

The Board is fortunate to have capacity and availability to proceed to a hearing at the earliest opportunity allowed for by the parties' own schedules. When setting appeals down for hearing, it is the Board's practice to ask the parties about their earliest availability to exchange required documents and arguments and their earliest availability to proceed to a hearing; and then to schedule the hearing on that basis. Appeals take longer to set down for hearing for a number of reasons, with the most common in recent years being: accommodating the availability of both parties' lawyers, allowing sufficient time for both parties to exchange large volumes of documents and prepare their arguments, settling pre-hearing procedural disputes such as challenges to the HAB's jurisdiction over the matter[8], the extent of document disclosure, and holding appeal in abeyance if the parties wish to engage in mediation first.

Judicial Review of HAB Decisions

During the current reporting period, one application for judicial review of a HAB decision was before the BC Supreme Court. This application resulted from a final decision on the merits given by the Board in a prior reporting period: *Dr. Theresa Szezepaniak v Interior Health Authority*, 2023 BCHAB 5. The BC Supreme Court gave its decision in this matter on August 7, 2025, upholding the HAB's decision in every respect: *Szezepaniak v. Interior Health Authority*, 2025 BCSC 1516.

The petitioner in that matter then filed an appeal of this decision in the BC Court of Appeal. That appeal is expected to be heard in the next reporting period and Attorney General of BC is also participating in the appeal to address a novel constitutional issue.

Surveys

Section 59.2(e) of the *Administrative Tribunals Act* requires the Board to report the results of any surveys carried out by the Board during the reporting period. The Board did not conduct any surveys during this reporting period.

[8] See for example *Dr. Jannah Wilson v Vancouver Coastal Health Authority*, 2026 BCHAB 1.

Public Interest Disclosure Act Reporting

The *Public Interest Disclosure Act* (*PIDA*) provides employees of some public bodies with protection from reprisal if they bring forward concerns about specific kinds of serious wrongdoing (i.e. whistleblower protection). The Board is one of the public bodies subject to *PIDA*.

Section 38 of *PIDA* requires the Board to report the number of disclosures of wrongdoing that were received and the results of any investigations undertaken in response. During this reporting period the Board did not receive any *PIDA* disclosures. The Board is unaware of any reports in which it, its staff, or its members (past or present) is alleged to have committed any wrongdoing.

Statement of Financial Performance

(For the fiscal year ended March 31, 2026)

In fiscal year 2025/2026, the Board incurred expenses of **$101,866** as detailed below in this 5-year comparative chart.

Direct Expenses	***2021/2022 $***	***2022/2023 $***	***2023/2024 $***	***2024/2025 $***	***2025/2026 $***
Salaries and Benefits	0	0	0	0	**0**
Board Member Fees & Expenses	79,129	67,408	61,024	65,903	**68,082**
Professional Services	14,370	9,046	11,878	10,545	**21,410**
Office and Venue Expenses	14,092	12,496	13,456	9,043	**12,374**
Other	0	0	0	0	**0**
Total HAB Expenses	$107,591	$88,950	$86,358	$85,491	**$101,866**

Terminology Notes

Salary and Benefits encompass the full-time staff who support the Board. This number is zero because the Board's staff are shared with a cluster of other tribunals who bear that cost instead.

Board Member Fees and Expenses reflects the remuneration and expenses for the Chair and appointed members of the Board. Outside of hearings and decision writing, remuneration may be incurred for time spent on case management, engaging in approved professional development, attending the Board's annual general meeting, improving the Board's processes and operations, and engaging with routine administrative and operational matters and meetings as required. The Chair and members are appointed on an as-and-when needed basis and are paid a per diem for the time they work in accordance with Treasury Board Directive 1/24 and the BC Ministry of Attorney General's *Tribunal Performance Framework and Remuneration Plan*. Members are also reimbursed for any authorized expenses according to those same policies. Pursuant

to section 8.5.3 of Treasury Board Directive 1/24, the Board publishes actual remuneration and reimbursement information on its website at: www.bchab.ca/home/annual-report.

Professional Services reflects the cost of retaining outside legal counsel to represent the Board in judicial review proceedings, to provide professional development to members at the Board's annual general meeting, and to provide legal advice on operational or case management matters throughout the year. Outside legal counsel are drawn from a prequalified list provided by the BC Ministry of Attorney General and are paid standard government rates. This category also encompasses outside professional services such as court recorders in the event of an oral hearing.

Office and Venue Expenses reflects the direct costs incurred by the Board when it meets in-person for a hearing or an annual general meeting, routine office expenses at its registry, and any registration fees for professional development, such as training opportunities offered by the BC Council of Administrative Tribunals or the Council of Canadian Administrative Tribunals. This line also reflects the cost of the Board's IT infrastructure, including its website, case management system, and standard office software applications.

Appendix 1: Board Member Biographies

Stacy Robertson (Chair)

Stacy Robertson is a leader in the financial services industry and currently is the General Counsel of Harbourfront Wealth Management Inc. He previously was the VP Compliance and Regulatory Affairs at Wellington-Altus Private Wealth after spending approximately 10 years as Senior Enforcement Counsel at the Canadian Investment Regulatory Organization ("CIRO", previously the Investment Industry Regulatory Organization of Canada). He has experience in securities enforcement and compliance including member registration, complaints, internal audits, regulatory audits and inquiries and anti-money laundering and terrorist financing surveillance and serves as a member on the Pacific Regional Council of CIRO. Previously he worked as an associate and partner at several Vancouver based firms practicing in the areas of insurance, construction, employment, labour, and administrative law. Mr. Robertson has appeared before all levels of court in B.C., before the B.C. Labour Relations Board, the Canadian Industrial Relations Board, and the B.C. Securities Commission. He has extensive experience in administrative law and regulation and is currently the Chair of British Columbia's Hospital Appeal Board and Financial Services Tribunal. He was also appointed as an ad hoc member of the Environmental Appeals Board and Forestry Appeals Commission to hear a recent appeal. Previously, Mr. Robertson served as a member on the Employment Assistance Appeal Tribunal and the Eligibility Appeals Committee for B.C. School Sport. He has completed the Partners, Directors and Officers course through the Canadian Securities Institute. Mr. Robertson holds a Bachelor of Law from the University of New Brunswick, a Bachelor of Commerce from McMaster University, and a diploma from Moscow State University in Political History of Russia and the U.S.S.R.

Sharleen Dumont (Vice Chair)

Sharleen Dumont recently retired from her role as Staff Lawyer with the Law Society of British Columbia. Previously Ms. Dumont was Senior Legal Counsel at the Vancouver Fraser Port Authority and Partner with Alexander, Holburn, Beaudin & Lang. Active in her community, she is a Vice Chair of the Complaints Investigation Committee of the Law Society of Yukon. She obtained her law degree from the University of Victoria and holds a Bachelor of Arts in Economics from the University of Calgary

Darlene (Deanie) Lynn Kolybabi (member term ended May 5, 2025)

Deanie Kolybabi is the President/Owner of Panache Media Consultants. She is the past Executive Director of EAGLE (Environmental-Aboriginal Guardianship through Law & Education) and the past Interim CEO of the National Aboriginal Achievement Foundation. In addition, she has held contracts with the Aboriginal Peoples Television Network, and the Women's Television Network. Ms. Kolybabi is Co-Founder of the Strategic Alliance of Broadcasters for Aboriginal Reflection (SABAR) and within her community, she is involved with the Health Aboriginal Network. She is the former Director of the Surrey Manufactured

Homeowners Association and the Past President and Spokesperson for the Seacrest Residents' Association. Ms. Kolybabi is a member of the White Rock/Surrey Chamber of Commerce.

Dr. Ailve McNestry (Member term ended July 9, 2025)

Ailve McNestry was born in Sri Lanka and spent her early life in Nigeria and Ireland. Following graduation from medical school in Dublin, Ireland, she immigrated to Canada in 1977. She worked for over 40 years in a variety of roles: pathology, family medicine, occupational medicine, and administrative medicine; spending the final seven years of her career at the College of Physicians & Surgeons of BC as Deputy Registrar, responsible for Drug Programs and Physician Health. She retired from practice in 2018.

Dr. R. Alan Meakes

Dr. Alan Meakes was a Physician with qualifications in general practice, military medicine, and specialist medicine involving Anesthesia, internal medicine, and critical care. Previously Dr. Meakes was Executive Medical Director for Island Health. Active in his community, he was a Member of the Working Group for Physician Compensation, Specialist Services Committee Expression of Interest Review Committee and Medical On-Call Availability Program Provincial Review Committee. Dr. Meakes holds certification in both Anesthesia and Internal Medicine and is a Fellow of the Royal College of Physicians of Canada (FRCPC). He holds a Doctorate in Medicine from the University of British Columbia.

Dr. Anita Molzahn

Anita Molzahn has over 45 years experience as a nurse, professor and academic administrator. Prior to her retirement she was a professor and the Dean, Faculty of Nursing at the University of Alberta; professor and the Dean, Faculty of Human and Social Development and the Director of the School of Nursing at the University of Victoria. Dr. Molzahn has been actively involved in her community as a Member of the Canadian Academy of Health Sciences, International Advisory Board Member for the VID Specialized University in Norway and a Member of the Research and Scholarly Activities Committee for the Canadian Association of Schools of Nursing. Dr. Molzahn is a Member of the Order of Canada and a Fellow of the Canadian Academy of Health Sciences. She holds a Doctorate in Sociology, Master of Nursing and a Bachelor of Science in Nursing from the University of Alberta.

Sandra Pullin

Sandy Pullin is a Registered Midwife and has been a practicing midwife since 1978. Previously Ms. Pullin was a Registered Nurse with Queen Charlotte General Hospital. She has also traveled as a midwife in Nunavut, Uganda and Haiti for short terms. Active in her community, she was a Board Member with the College of Midwives of B.C. and an appointed Member of the Midwifery Regulation Advisory Committee for the Government of Alberta. Ms. Pullin served as an Inquiry Panel Member for the College of Midwives of

B.C., a Founding Member and Treasurer for the Alberta Association of Midwives and was the Founding President for the Association for Safe Alternatives in Childbirth. She holds a Certificate in Advanced Practical Obstetrics from the University of Alberta and a Diploma in Nursing from Grant MacEwan Community College.

Dr. Peter Stevenson-Moore

Dr. Stevenson-Moore retired from private clinical dental practice in 2015 and is currently the Dental Advisor at the BC College of Oral Health Professionals ("BCCOHP"). He represents the BCCOHP on the BC Medical Quality Initiative Credential and Privileging Oversight Committee, the BC Prescription Monitoring Program Advisory Committee, the BC Controlled Prescription Program Advisory Committee, the BC Blood Borne Diseases Committee, and the UBC Faculty of Dentistry Council.

Dr. Stevenson-Moore originally became involved with the BCCOHP in 1989, when it was known as the College of Dental Surgeons of BC ("CDSBC"). He served on various committees before joining the CDSBC Board in 2008, serving two terms as Treasurer, two terms as Vice-President, and being elected for two terms as President ending in 2014.

Dr. Stevenson-Moore was trained as a dentist at Guy's Hospital in London, England, and as a specialist in prosthodontics at the University of Washington in Seattle in 1977. Shortly thereafter he joined the BC Cancer Agency (now BC Cancer) to develop the oral oncology/dentistry program that would support the oral care needs of cancer patients. Dr. Stevenson-Moore led the BC Cancer Agency dental program for 29 of the 31 years that he was in their employ. While employed by the Agency, he served terms both as President of the Staff, and as President of the Medical/Dental Staff Association.

Richard John Hall (Member term ended May 20, 2025)

Mr. Hall is a lawyer and a practicing member of the Law Society of British Columbia. He brings a diverse mix of professional experience, most recently including executive and legal roles with the Sumas First Nation, Nenan Dane ẕaa Deh Zona Family Services Society, Vancouver Coastal Health Authority, and the Vancouver School Board. Mr. Hall served as the full-time Chairperson of the Transportation Appeal Tribunal of Canada from 2009-2013, and as a part-time Member of the same from 2007-2009. He has also worked as a lawyer in private practice at Lions Gate Law, and as the President of Lion Hall Bancorp Limited, providing executive and legal consulting services.

Mr. Hall is a graduate of the law school at the University of Victoria, and holds undergraduate and graduate degrees from the University of Western Ontario. Born in Montréal, Mr. Hall is the proud father of three daughters and two sons.

Ryan Hira

Mr. Hira is a lawyer and a practicing member of the British Columbia Bar. He is a partner at the Vancouver law firm Hira Rowan LLP. Mr. Hira maintains a broad litigation practice including civil litigation, commercial litigation, and criminal law. He has appeared in all levels of court in British Columbia and has also appeared in the Territorial Court of the

Northwest Territories. Over the years, Mr. Hira has been invited to speak and present on a variety of legal subjects in both criminal and civil litigation, more recently with a focus on the law of policing. Mr. Hira is a graduate from the Robson Hall law school at the University of Manitoba, where he was the director and founding member of the Robson Hall Racquets Club. Prior to law school, he attended the University of British Columbia.

Dr. Heidi Oetter

Dr. Heidi Oetter retired as CEO and Registrar of the College of Physicians and Surgeons of BC in December 2023. Dr. Oetter has been recognized for her accomplishments as a medical leader provincially and nationally. In addition to past leadership positions on the Board of the British Columbia Medical Association (now Doctors of BC) and the Canadian Medical Protective Association Council, she has served as a member of the Board of Directors of the Federation of Medical Regulatory Authorities of Canada, Council member of the Medical Council of Canada, and a member of the BC Health Regulators. She is currently immediate past Chair of the International Association of Medical Regulatory Authorities. Dr. Oetter previously worked as a family physician in Coquitlam for 18 years.

Dr. Galt Wilson

Dr. Galt Wilson was a family physician in his hometown of Prince George for 29 years, where his practice also included emergency, anesthesia, clinical teaching, and founding direction of both the residency and clinical clerkship programs at the local hospital. He served the hospital in various roles including Chief of Staff and Medical Director. After leaving clinical practice, he was Deputy Registrar for Complaint and Practice Investigations at the College of Physicians and Surgeons of BC (“CPSBC”) for 10 years. Now semi-retired, Dr. Wilson is Senior Medical Consultant with the CPSBC. His role there has included participation in the resolution of roughly 10,000 investigations and fielding about the same number of advice calls from physicians throughout BC. Less time working means more to spend with nine grandchildren, who are his primary preoccupation.

Mark Mancini

Mark Mancini is an Assistant Professor at Thompson Rivers University, Faculty of Law, with expertise in administrative law, the law of judicial review, and statutory interpretation. His work has been published in academic journals across Canada and has been cited by courts across the country including the Federal Court of Appeal, British Columbia Court of Appeal, and Supreme Court of Canada. Mark is a Senior Fellow with the Macdonald-Laurier Institute, a Research Fellow with the University of British Columbia-Okanagan Centre for Constitutional Studies, and is also involved with the BC Council of Administrative Tribunals. He is a co-author of the recently republished BCCAT Manual for Decision-Making (2024) and the new 5th edition of Canadian Administrative Law (2026), and he publishes a popular free newsletter: The Sunday Evening Administrative Review, which is read by close to 1500 lawyers, students, and judges. Mark holds a J.D. from the University of New Brunswick, a LL.M. from the University of Chicago Law School, and is currently a PhD candidate at the Peter A. Allard School of Law, University of British Columbia.