

SOUTH HURON HOSPITAL
PROFESSIONAL STAFF BY-LAW NO. 2024-1

Approved by the Board of Directors: June 25, 2024

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SCHEDULE A

PROCEDURE REGARDING REAPPOINTMENTS, REQUESTS FOR CHANGES IN PRIVILEGES AND MID-TERM ACTION

SOUTH HURON HOSPITAL

BY-LAW 2024-1

PROFESSIONAL STAFF BY-LAW

1. INTERPRETATION

This By-Law shall be interpreted in accordance with the following unless the context otherwise specifies or requires:

- (a) all terms which are contained in this By-Law and which are defined in the Ontario *Not-for-Profit Corporations Act*, the *Public Hospitals Act* (Ontario), the *Excellent Care for All Act* or the regulations made thereunder, shall have the meanings given to such terms in the Ontario *Not-for-Profit Corporations Act*, the *Public Hospitals Act*, the *Excellent Care for All Act* or the regulations made thereunder. If there is a conflict between the Act as defined below and any other legislation applicable to the Corporation, the provisions of such other legislation shall prevail;
- (b) the use of the singular number shall include the plural and vice versa, the use of gender shall include the masculine, feminine and neuter genders, and the word “person” shall include an individual, a trust, a partnership, a body corporate or public, an association or other incorporated or unincorporated entity;
- (c) the headings in this By-Law are inserted for reference purposes only and are not to be considered or taken into account in construing the terms or provisions thereof or to be deemed in any way to clarify, modify or explain the effect of any such terms or provisions; and
- (d) any references herein to any law, by-law, rule, regulation, order or act of any governmental body or other regulatory body shall be construed as a reference thereto as amended or re-enacted from time to time or as a reference to any successor thereto.

2. DEFINITIONS

- (a) “**Board**” means the governing body of the South Huron Hospital;
- (b) “**By-Law**” or “**By-Laws**” means this by-law, and all other by-laws of the Corporation from time to time in force and effect;
- (c) “**Certification**” means the holding of a specialty certificate issued by a professional body recognized by the Board on the advice of the Medical Advisory Committee;
- (d) “**Chief of Department**” means the physician appointed by the Board to be in charge of a specialized services of the Professional Staff of South Huron Hospital;
- (e) “**Chief of Staff**” means the physician appointed by the Board to be the Chief of the Professional Staff;

- (f) **“Chair of the Medical Advisory Committee”** means the member of the Professional Staff appointed to serve as Chair of the Medical Advisory Committee;
- (g) **“Chief Executive Officer”** means in addition to ‘administrator’ as defined in the *Public Hospitals Act*, the Chief Executive Officer of the Corporation;
- (h) **“Chief Nursing Executive”** means the senior nurse employed by the Hospital who reports directly to the Chief Executive Officer and is responsible for nursing services provided in the Hospital;
- (i) **“Corporation”** or **“Hospital”** means the South Huron Hospital with the Head Office at 24 Huron St. W., Exeter, Ontario;
- (j) **“Credentials Committee”** means the committee established by the Medical Advisory Committee to review applications for appointment and reappointment to the Professional Staff and to make recommendations to the Medical Advisory Committee. If no such committee is established it shall mean the Medical Advisory Committee;
- (k) **“Dental Staff”** means those Dentists appointed by the Board to attend or perform dental services for patients including oral and maxillofacial in the Hospital;
- (l) **“Dentist”** means a dental practitioner in good standing with the Royal College of Dental Surgeons of Ontario;
- (m) **“Department”** or **“department”** means an organizational unit of the Professional Staff to which members with a similar field of practice have been assigned;
- (n) **“Extended Class Nursing Staff”** means those Registered Nurses in the Extended Class who are nurses that are granted Privileges to diagnose, prescribe for or treat out patients in the Hospital;
- (o) **“Impact Analysis”** means a study to determine the impact upon the resources of the Corporation of the proposed appointment of an applicant for appointment to the Professional Staff or an application by a member of the Professional Staff for reappointment or for additional Privileges;
- (p) **“in camera”** means a meeting that is restricted to voting members of such meeting and such invitees as determined by the chair of the meeting;
- (q) **“Locum Tenens”** means the legally qualified professional who provides coverage for a member of the Professional Staff during their absence;
- (r) **“Medical Staff”** means those Physicians who are appointed by the Board and who are granted Privileges to practice medicine in the Hospital;

- (s) “**Midwife**” means a midwife in good standing with the College of Midwifery of Ontario;
- (t) “**Midwifery Staff**” means those Midwives who are appointed by the Board and granted Privileges to practice Midwifery in the Hospital;
- (u) “**Nurse**” means a holder of a current certificate of competence issued in Ontario as a registered nurse;
- (v) “**Patient**” includes an in-patient and out-patient except where the context otherwise requires;
- (w) “**Physician**” means a medical practitioner in good standing with the College of Physicians and Surgeons of Ontario;
- (x) “**Privileges**” or “privileges” means the right to admit in-patients, register out-patients and/or provide the clinical services which the Board has granted to a member of the Professional Staff;
- (y) “**Professional Staff**” means the Medical Staff, Dental Staff, Midwifery Staff and members of Extended Class Nursing Staff who have been granted privileges;
- (z) “**Professional Staff Human Resources Plan**” means the Hospital’s plan from time to time which provides information and future projections with respect to the management and appointment of the Professional Staff based on the mission and strategic plan of the Corporation;
- (aa) “**Professional Staff Officer**” means the President, Vice President or Secretary-Treasurer of the Professional Staff;
- (bb) “**Public Hospitals Act**” means R.S.O. 1990, c.P.40, and, where the context requires, includes the regulations made under it, all as may be amended from time to time;
- (cc) “**Resource Plan**” means the plan developed by the Professional Staff, based on the mission and strategic plan of the Hospital and on the regional needs of the community, which provides information and future projections of this information with respect to the management and appointment of physicians, dentists, midwives and Registered Nurse-Extended Class who are or may become members of the Professional Staff;
- (dd) “**Registered Nurse in the Extended Class**” means a member of the College of Nurses of Ontario who is a registered nurse and who holds an extended certificate of registration under the *Nursing Act, 1991*;
- (ee) “**Rules and Regulations**” means the rule and regulations governing the practice of the Professional Staff at the Hospital both generally and within a particular department, which have been established respectively by the staff in general and the staff of the department;

PROFESSIONAL STAFF BY-LAWS

3. THE PROFESSIONAL STAFF BY-LAWS

- (a) These By-laws shall:
 - (i) govern the appointment, organization, duties and responsibilities of the Professional Staff;
 - (ii) define the relationship and responsibilities of the Professional Staff to the Leadership Team and the Board; and
 - (iii) outline how the requirements of the *Public Hospitals Act* and its regulations are put into force.

4. PURPOSE OF THE PROFESSIONAL STAFF BY-LAWS

- (a) The purposes of the Professional Staff By-laws are:
 - (i) to outline clearly and succinctly the purposes and functions of the Professional Staff;
 - (ii) to identify specific departments, committees, etc. necessary to allocate the work of carrying out those functions;
 - (iii) to designate a process for the selection of officials of the Professional Staff, including the Chief of Staff, and Chief of Departments;
 - (iv) to assign responsibility, define authority, and describe the manner of accountability to the Board of all officials, organizational units and each member of the Professional Staff for patient care, and for professional and ethical conduct;
 - (v) to maintain and support the rights and privileges of the Professional Staff as provided herein; and
 - (vi) to identify a professional staff organization with responsibility, authority and accountability so as to ensure that each Professional Staff member conducts him/herself in a manner consistent with the requirements of the *Public Hospitals Act* and its regulations, these By-Laws and such rules and regulations, or any amendments thereto, which become effective when approved by the Board.

5. PURPOSE OF THE MEDICAL STAFF ORGANIZATION

- (a) The purposes of the Medical Staff Organization, in addition to fulfilling the responsibilities established by the Laws of the Province of Ontario and these By-Laws, are:
 - (i) to provide a structure whereby the members of the Medical Staff participate in the Hospital's planning, policy setting, and decision making;

- (ii) to serve as a quality assurance system for medical care rendered to patients by the Hospital's Medical Staff and to ensure the continuing improvement of the quality of professional care;
- (iii) to provide a structure and process to ensure that all patients have access to medical care; and
- (iv) to facilitate the best possible environment for learning.

6. RULES AND REGULATIONS

- (a) The Medical Advisory Committee shall make Rules and Regulations, as well as corresponding policies and procedures, as it deems necessary for patient care, and the conduct of members of the Professional Staff, consistent with the mission of the Hospital.
- (b) Such Rules and Regulations, or any amendments thereto, will become effective when recommended by the Medical Advisory Committee, and approved by the Board.

7. PROFESSIONAL STAFF RESOURCE PLAN

- (a) The Medical Advisory Committee with the advice of the Administration of the Hospital will recommend to the Board for approval, on an annual basis, a Professional Staff Resource Plan for each department of the Professional Staff.
- (b) This plan will be consistent with the strategic directions of the Hospital as established by the Board, and the *Public Hospitals Act*, Section 44(2) regarding cessation of services.
- (c) Each department's Clinical Services Resource Plan shall include:
 - (i) a recruitment plan, which shall include an impact analysis;
 - (ii) reasonable on-call requirements for members of the Professional Staff of the department; and
 - (iii) a process for equitably distributing resources to the members of the Professional Staff within the department.

8. APPOINTMENT OF PROFESSIONAL STAFF

- (a) The Board shall appoint annually a Professional Staff for the Hospital;
- (b) Subject to revocation by the Board, appointments to the Professional Staff shall be for a period of twelve (12) months or for such shorter period of time as the Board may determine and appointments shall continue where a member of the Professional Staff has reapplied for appointment during the then current appointment period, until the Board has made the appointments for the ensuing year;

- (c) The Board shall establish from time to time criteria for appointment to the Professional Staff after considering the advice of the Medical Advisory Committee;
- (d) Notwithstanding the other requirements of these By-laws, a person who is not a physician, dentist, midwife or nurse in the extended class may be honored by appointment to the Honorary Staff category;
- (e) Where the Board determines that the Hospital shall cease to provide a service or the Minister directs the Hospital to cease to provide a service, the Board may:
 - (i) refuse the application of a member for appointment or reappointment to the Professional Staff;
 - (ii) revoke the appointment of any member; and
 - (iii) cancel or substantially alter the privileges of any member as long as such determination relates to the termination of the service.

9. APPOINTMENT TO PROFESSIONAL STAFF

- (a) Application for Appointment to the Professional Staff
 - (i) An application for appointment to the Professional Staff will be processed in accordance with the provisions of the *Public Hospitals Act*, these By-laws and the Rules and Regulations of the Professional Staff.
 - (ii) On request, the Chief Executive Officer will supply a copy of an application, these By-laws, the Rules and Regulations of the Professional Staff, the *Public Hospitals Act* and the Regulations thereunder to each applicant who expresses in writing the intention to apply for appointment to the Professional Staff.
 - (iii) Each applicant for membership to the Professional Staff shall submit on the prescribed forms one original written application to the Chief Executive Officer, together with a consent for release of the required information.
 - (iv) Each application must contain:
 - (A) a statement by the applicant that they have read the *Public Hospitals Act* and the Hospital Management Regulations thereunder, these By-laws and the Rules and Regulations of the Professional Staff of the Hospital;
 - (B) an undertaking in writing that, if the applicant is appointed to the Professional Staff, he or she will provide the agreed upon services to the Hospital and will act in accordance with the *Public Hospitals Act* and its Regulations, the laws of the Province of Ontario relating to hospital practice, the requirements set out in the By-laws and the Rules and Regulations of the Professional Staff and policies of the Hospital, and will be guided by the ethical standards of the profession;