



## **Corporate By-Law**

### **Addition:**

#### **1.1 Definitions**

In this By-law and all other By-laws of the Corporation,

- (j) "Dentist" means a dental practitioner in good standing with the Royal College of Dental Surgeons of Ontario;**
  - (k) "Dental Staff" Means the Dentists who have been appointed by the Board to the Dental Staff;**
  - (u) "Midwife" means a midwife in good standing with the College of Midwives of Ontario;**
  - (v) "Midwifery Staff" means the Midwives who have been appointed to the Midwifery Staff by the Board;**
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### **Current Wording:**

#### **1.2 Interpretation**

In this By-law and in all other by-laws of the Corporation, unless the context otherwise requires, words importing the singular number shall include the plural number and vice versa and references to persons shall include firms and corporations and words importing one gender shall include the opposite.

### **Proposed Wording:**

#### **1.2 Interpretation**

In this By-law and in all other by-laws of the Corporation, unless the context otherwise requires, words importing the singular number shall include the plural number and vice versa and references to persons shall include firms and corporations and words importing one gender shall include ~~the opposite~~ **all genders**.

*Additionally, all references to "his/her" or "he/she" are proposed to be changed to "they" throughout the entirety of the Corporate Bylaw.*

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### **Current Wording:**

#### **4.3 Qualifications**

No spouse of any member of the professional staff, dental staff, or employee of the hospital shall be eligible for election or appointment to the Board, except by resolution of the Board.

### **Proposed Wording:**

#### **4.3 Qualifications**

No spouse of any member of the professional staff, dental staff, **midwifery staff, board**, or employee of the hospital shall be eligible for election or appointment to the Board, except by resolution of the Board.



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### ***Current Wording:***

#### **8.1 Regular Board Committees**

At the first meeting of the Board following the annual meeting of the Corporation, the Board shall:

- (a) Set out the following Committees of the Board:
  - (i) the Executive Committee,
  - (ii) the Finance and Human Resources Committee,
  - (iii) the Joint Conference Committee,
  - (iv) the Board Governance, Nominating and Executive Management Performance Committee,
  - (v) the Board Quality and Risk Management Committee,
  - (vi) the Public Relations Committee;
  - (vii) the Building & Property Committee;
  - (viii) the Patient and Family Advisory Committee;
  - (ix) the French Language Services Committee; and
  - (x) the Hospital/Foundation Subcommittee

### ***Proposed Wording:***

#### **8.1 Regular Board Committees**

At the first meeting of the Board following the annual meeting of the Corporation, the Board shall:

- (b) Set out the following Committees of the Board:
  - (i) the Executive Committee,
  - (ii) the Finance and Human Resources Committee,
  - (iii) the Joint Conference Committee,
  - (iv) the Board Governance, Nominating and Executive Management Performance Committee,
  - (v) the Board Quality and Risk Management Committee,
  - ~~(vi) the Public Relations Committee;~~
  - ~~(vii) the Building & Property Committee;~~
  - (viii) the Patient and Family Advisory Committee; **and**
  - (ix) the French Language Services Committee. **and**
  - ~~(x) the Hospital/Foundation Subcommittee~~



## ***Board-Appointed Professional Staff By-Law***

### ***Current Wording:***

#### **1.2 Interpretation**

In this By-law and in all other by-laws of the Corporation, unless the context otherwise requires, words importing the singular number shall include the plural number and vice versa and references to persons shall include firms and corporations and words importing one gender shall include the opposite.

### ***Proposed Wording:***

#### **1.2 Interpretation**

In this By-law and in all other by-laws of the Corporation, unless the context otherwise requires, words importing the singular number shall include the plural number and vice versa and references to persons shall include firms and corporations and words importing one gender shall include ~~the opposite~~ **all genders**.

*Additionally, all references to "his/her" or "he/she" are proposed to be changed to "they" throughout the entirety of the Board-Appointed Professional Staff Bylaw.*

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### ***Current Wording:***

#### **2.1 Rules and Regulations and Policies and Procedures**

- (1) The Board, after consulting with the Professional Staff Association (i.e.: Ontario Medical Association, Registered Nurses' Association of Ontario) and considering the recommendation of the Medical Advisory Committee, may make Rules and Regulations as it deems necessary, including rules and regulations for patient care and safety and the conduct of members of the Medical Staff, Dental Staff, Midwifery staff, and Extended Class Nursing Staff.
- (2) The Board, after considering the recommendation of the Medical Advisory Committee, may adopt policies and procedures applicable to the Medical Staff, Dental Staff, Midwifery Staff, and Extended Class Nursing Staff, including policies and procedures that are consistent with Rules and Regulations and support the implementation of Rules and Regulations.

### ***Proposed Wording:***

#### **2.1 Rules and Regulations and Policies and Procedures**

- (1) The Board, after consulting with the Professional Staff Association (i.e.: Ontario Medical Association, Registered Nurses' Association of Ontario) and considering the recommendation of the Medical Advisory Committee, may make Rules and Regulations as it deems necessary, including rules and regulations for patient care and safety and the conduct of members of the Medical Staff, Dental Staff, **Midwifery Staff**, and Extended Class Nursing Staff.



- (2) The Board, after considering the recommendation of the Medical Advisory Committee, may adopt policies and procedures applicable to the Medical Staff, Dental Staff, **Midwifery Staff**, and Extended Class Nursing Staff, including policies and procedures that are consistent with Rules and Regulations and support the implementation of Rules and Regulations.
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**Additions:**

**4.3 Qualifications and Criteria for Appointment to the Professional Staff**

**(5) In addition to the qualifications set out in subsection 4.3(2), an applicant for appointment to the Midwifery Staff must meet the following qualifications:**

**(a) be qualified to practice midwifery and licensed pursuant to the laws of Ontario and have a Certificate of Registration in good standing with the College of Midwives of Ontario or the equivalent letter from their most recent licensing body; and**

**(b) have a current Certificate of Professional Conduct from the College of Midwives of Ontario or the equivalent certificate from their most recent licensing body.**

**4.4 Application for Appointment to the Professional Staff**

(1) The Chief Executive Officer or delegate shall supply a copy of, or information on how to access a form of the application and the mission, vision, values and strategic plan of the Corporation, the bylaws and the Rules and Regulations and appropriate Policies, to each Physician, Dentist, **Midwife**, or Registered Nurse in the Extended Class who expresses in writing an intention to apply for appointment to the Professional Staff.

**4.6 Temporary Appointment**

(1) Notwithstanding any other provision of this By-law, the Chief Executive Officer or delegate, after consultation with the Chief of Staff/Chair of the Medical Advisory Committee or delegate may:

(a) grant a temporary appointment and temporary privileges to a Physician, Dentist, **Midwife**, or Registered Nurse in the Extended Class provided that such appointment shall not extend beyond the date of the next meeting of the Medical Advisory Committee at which time the action taken shall be reported; and

(b) continue a temporary appointment and temporary privileges on the recommendation of the Medical Advisory Committee, until the next meeting of the Board.

(2) A temporary appointment of a Physician, Dentist, **Midwife**, or Registered Nurse in the Extended Class may be made for any reason including:



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- (a) to meet a specific singular requirement by providing a consultation and/or operative procedure; or
- (b) to meet an urgent unexpected need for a medical, dental, **midwifery**, or extended class nursing service.

### 7.1 Professional Staff Categories

- (c) The Medical Staff, Dental Staff, **and Midwifery Staff** shall be divided into the following groups:

### 7.2 Active Staff

- (1) The Active Staff shall consist of those Physicians, Dentists, **and Midwives** who have been appointed to the Active Staff by the Board.
- (2) Except where approved by the Board, no Physician, Dentist, **or Midwife** with a full-time active staff appointment at another hospital shall be appointed to the Active Staff.
- (5) Each member of the Active Staff shall:
  - (h) if a Dentist **or Midwife**, be entitled to attend meetings of the Professional Staff but shall not have a vote or be eligible to hold an elected or appointed office of the Professional Staff.

### 7.3 Associate Staff

- (1) Physicians, Dentists, **or Midwives** who are applying for appointment to the Active Staff, subject otherwise to the determination of the Board, will be assigned to the Associate Staff. In no event shall an appointment to the Associate Staff extend beyond two (2) years.
- (2) Each member of the Associate Staff shall:
  - (h) if a Dentist **or Midwife**, be entitled to attend Professional Staff meetings but shall not have a vote at Professional Staff meetings and shall not be eligible to hold an elected or appointed office of the Professional Staff.

### 7.4 Courtesy Staff

- (1) The Board may grant Physicians, **Dentists, and Midwives** appointment to the courtesy staff in one or more of the following circumstances:

### 7.5 Locum Tenens Staff

- (1) Locum Tenens Staff consist of Physicians, Dentists, **or Midwives** who have been admitted to the Locum Tenens Staff by the Board in order to meet specific clinical needs for a defined period of time in one or more of the following circumstances:
  - (a) to be a planned replacement for a Physician, Dentist, **or Midwife** for specified period of time; or
  - (b) to provide episodic or limited surgical or consulting services.



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- (2) The appointment of a Physician, Dentist, **or Midwife** as a member of the Locum Tenens Staff may be for up to one (1) year subject to renewal for a further period of up to one (1) additional year. The Board, having considered the recommendation of the Medical Advisory Committee may permit renewal beyond two (2) years in exceptional circumstances.
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### *Current Wording:*

#### **7.6 Casualty Staff**

- (1) The following will be expected of all Casualty Staff:
- (a) To be available during duty hours and to respond within a reasonable period of time.
  - (b) To see all patients coming to the emergency room when requested to see by a nurse. This does not involve patients pre-booked to see their own doctor.
  - (c) To see inpatients when requested to do so by another doctor or RN.
  - (d) To order appropriate lab tests or x-rays as required. This could be done right away or the next day as deemed necessary for the care of the patient.
  - (e) To consult the local physician, backup physician, doctor in charge of the Emergency Room, or the Chief of Staff for assistance, if required.
  - (f) To request nurses to recruit additional physicians in unusual circumstances, i.e.: for sudden influx of seriously injured cases, or more than one life-threatening event occurring simultaneously.
  - (g) Plan appropriate disposition of cases:
    - (i) observe the patient
    - (ii) send the patient home with advice for necessary follow-up care
    - (iii) admit the patient
    - (iv) transfer the patient to another facility in care of a Specialist or to the patient's own family physician
  - (h) Admit patients that are appropriate to the care that can be given at HGMH which is a primary care facility. Cases such as unstable angina, acute M.I., surgical cases, and life-threatening emergencies are best transferred to a secondary or a tertiary facility, whereas pneumonia or mild congestive failure could probably be admitted to the HGMH. In uncertain cases, advice can be sought from the nurses or from fellow doctors.
  - (i) To take care of inpatients who have been admitted by them until the transfer of that patient to the family physician is completed. This would include the writing of orders and providing ongoing medical supervision. The transfer would normally be completed at about 08:00hrs the next day.



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- (j) It is not necessary for Casualty Staff to do an admitting History and Physical - this can be left for the family physician to do.
- (k) Not to arrange for follow-up of patients with themselves.
- (l) Accompany those patients in the ambulance where probable intervention can only be performed by the casualty officer (e.g.: intubation). IV medication e.g.: Morphine could be designated to be administered by an RN.
- (m) To do the utmost to uphold and promote the reputation of HGMH, its Mission, and ideals.
- (n) Above all, to use common sense and follow the Hippocratic Oath.

### ***Proposed Wording:***

#### **7.6 Casualty Staff**

- (1) **Every Physician applying for appointment to the Casualty Staff may be assigned to the Associate Staff for a probationary period of a minimum of one (1) year to a maximum of two (2) years, if required by the Board for a clearly specified reason.**
- (2) ~~The following will be expected of all~~ **Each member of the Casualty Staff shall:**
  - (a) **Attend patients and undertake treatment and operative procedures only in accordance with the kind and degree of privileges granted by the Board;**
  - (b) **Be responsible to the Chief of Emergency for all aspects of patient care;**
  - (c) **Act as a supervisor when requested by the Chief of Staff or the Chief of Emergency;**
  - (d) Be available during duty hours and to respond within a reasonable period of time;
  - (e) See all patients coming to the emergency room when requested to see by a nurse. This does not involve patients pre-booked to see their own doctor;
  - (f) **Assess and manage** inpatients when requested to do so by another doctor or RN;
  - (g) Order appropriate lab tests or x-rays as required. This could be done right away or the next day as deemed necessary for the care of the patient;
  - ~~(h) To consult the local physician, backup physician, doctor in charge of the Emergency Room, or the Chief of Staff for assistance, if required.~~





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- (i) Request nurses to recruit additional physicians in unusual circumstances, i.e.: for sudden influx of seriously injured cases, or more than one life-threatening event occurring simultaneously;
- ~~(j) Plan appropriate disposition of cases:
  - (i) observe the patient
  - (ii) send the patient home with advice for necessary follow-up care
  - (iii) admit the patient
  - (iv) transfer the patient to another facility in care of a Specialist or to the patient's own family physician~~
- (k) Admit patients that are appropriate to the care that can be given at HGMH which is a primary care facility. ~~Cases such as unstable angina, acute M.I., surgical cases, and life-threatening emergencies are best transferred to a secondary or a tertiary facility, whereas pneumonia or mild congestive failure could probably be admitted to the HGMH. In uncertain cases, advice can be sought from the nurses or from fellow doctors.~~
- (l) Take care of ~~in~~patients who have been admitted by them until the transfer of that patient to the **family inpatient unit** physician is completed. ~~This would include the writing of orders and providing ongoing medical supervision. The transfer would normally be completed at about around 08:00hrs the next day;~~
- (m) It is not necessary for Casualty Staff to do an admitting History and Physical - this can be left for the **family inpatient unit** physician to do;
- (n) Not arrange for follow-up of patients with themselves; and
- (o) Accompany those patients in the ambulance where probable intervention can only be performed by the casualty officer. ~~(e.g.: intubation). IV medication e.g.: Morphine could be designated to be administered by an RN.~~
- ~~(p) To do the utmost to uphold and promote the reputation of HGMH, its Mission, and ideals.~~
- ~~(q) Above all, to use common sense and follow the Hippocratic Oath.~~

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### **Additions:**

#### **9.6 Duties of the Chief of Staff**

- (1) The Chief of Staff shall:





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- (b) organize the Medical, Dental, **and Midwifery Staff** to ensure that the quality of the medical, dental, and midwifery care given to all patients of the Hospital is in accordance with policies established by the Board;
- (i) supervise the professional care provided by all members of the Medical, Dental, **and Midwifery Staff** and supervise the professional care provided by all members of the Extended Class Nursing Staff with respect to diagnosing, prescribing or treating out patients at the hospital;
- (s) advise the Medical, Dental, **and Midwifery Staff** on current Hospital policies, objectives and rules;

### 9.8 **Duties of Chief of Emergency**

The Chief of Emergency shall:

- (n) hold regular meetings **or quarterly communications** for the Department;

### 10.3 **Medical Advisory Committee Duties and Responsibilities**

The Medical Advisory Committee shall, perform the duties and undertake the responsibilities set out in the *Public Hospitals Act*, including:

- (a) make recommendations to the Board concerning the following matters:
  - (iii) the by-laws and Rules and Regulations respecting the Medical Staff, Dental Staff, **Midwifery Staff**, and Extended Class Nursing Staff;
  - (v) the quality of care provided in the Hospital by the Medical Staff, Dental Staff, **Midwifery Staff**, and Extended Class Nursing Staff; and
- (b) supervise the clinical practice of medicine, dentistry, **midwifery**, and extended class nursing in the Hospital;