## **BOARD OF DIRECTORS**

Health Sciences North / Horizon Santé-Nord

ISSUED BY: Board of Directors

AUTHORIZED BY: Board of Directors

**ISSUE DATE:** July 8, 2003

**CATEGORY:** Part II – Provides for Excellent Management

SUBJECT: CHIEF OF STAFF DIRECTION

NUMBER: II-5
REVISION DATE: March 10, 2023

**PAGE:** 1 of 1

**REVIEW DATE:** 

The Chief of Staff (COS) is accountable to the Board of Directors (Board). The Board provides direction to the COS in accordance with policies established by the Board and subject to the direction of the Board. The Board delegates responsibility and concomitant authority to the COS for the general clinical organization of the Hospital and the supervision and practice of medicine, dentistry, midwifery and extended class nursing at Health Sciences North.

## The COS shall:

- 1. Ensure that the quality and safety of medical, dental, midwifery and extended class nursing care given to all patients of the Hospital is in accordance with policies established by the Board.
- 2. Ensure that appropriate mechanisms are in place to regulate the conduct and behaviour of the medical, dental, midwifery and extended class nursing staff towards each other, the Hospital's patients and families, visitors, employees, students and volunteers.
- 3. Ensure that methodologies are in place to regularly evaluate quality of care and that all Hospital services are regularly evaluated in relation to generally accepted standards, in collaboration with the most responsible medical and senior leaders.
- 4. Provide a clear and accessible process for registering and resolving patient and/or family complaints or concerns, in collaboration with the most responsible medical and senior leaders.
- 5. Report regularly to the Board on the activities, recommendations and actions of the Medical Advisory Committee (MAC) and any other matters about which it should have knowledge.
- 6. Ensure the development of a medical human resource plan to meet the needs of the Hospital in accordance with the Hospital's strategic plan.
- 7. Be responsible to the Board and with the Chief Executive Officer for the appropriate utilization of resources by all medical, dental and midwifery departments and extended class nursing staff.

SUBJECT:

- Policy No. II-5
- 8. Ensure that the credentialing process complies with the *Public Hospitals Act* and its regulations, the Hospital By-Laws, Rules and Regulations, and Hospital policies and practices.
- 9. Actively promote and enhance clinical collaborations with other academic health sciences centres and health service provider organizations, including with the Équipe santé Sudbury-Espanola-Manitoulin-Elliot Lake Ontario Health Team, with Chiefs of Staff of other Northern Ontario hospitals, with the Joint Department of Medical Imaging for sub-specialty services and with the ONE Healthcare Information Technology Service for the regional electronic medical record, to name a few.
- 10. Promote effective communication and relationships between the members of the Medical Staff and the organization, including Board members and senior leaders.
- 11. Receive and consider complaints about behaviour, impairment / incapacity or competence involving members of the medical, dental, midwifery and extended class nursing staff, and ensure the complaints are acted upon by the MAC where appropriate.
- 12. Temporarily restrict or suspend the privileges of any members of the Professional Staff and report to the MAC and other regulatory bodies as required.
- 13. Represent the MAC at Board hearings on privileges matters.

## **Policy Review Log**

Date	Action
July 8, 2003	Issued
June 9, 2009	Revised
January 17, 2013	Revised
November 11, 2014	Revised
November 17, 2016	Reviewed
November 24, 2020	Revised
March 10, 2023	Revised