Campbellford Memorial Hospital Board of Directors Policy Manual	Subject: **CHIEF OF STAFF POSITION DESCRIPTION** Policy # 2-060 Approved by: Board of Directors Issue Date: Apr 2007
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POLICY

Appointed by the Board, the COS is an ex-officio non-voting member of the Board, a member of the Hospital's Medical Staff and Senior Leadership Team.

Accountable to the Board, and as Chair of the Medical Advisory Committee ("MAC"), the COS provides medical and administrative leadership to ensure quality medical services are delivered and managed effectively, consistent with Hospital By-laws and strategic and operational priorities.

The COS is accountable for ensuring that professional staff are appropriately credentialed, maintain professional standards of practice, adhere to Hospital By-laws, policies and procedures, respond to patient concerns, satisfy Hospital initiated educational requirements, and contribute to a healthy and productive working environment.

PURPOSE

The COS Position Description details the responsibilities of the COS, which include the duties contained in the Hospital's By-Laws. It further describes the competencies, qualifications and working conditions of the COS

PROCEDURE

MAJOR RESPONSIBILITIES:

The COS will:

- Organize the Medical and Dental Staff to ensure that the quality of patient care is in accordance with best practices and Hospital Board policies;
- Supervise the professional care provided by all members of the Medical and Dental Staff;
- Advise the Board and the Medical Staff with respect to the quality of care provided to patients in the Hospital;
- Report regularly to the Board and Medical Staff about recommendations and actions of the MAC (e.g. appointments/re-appointments);
- With the CEO, be responsible for the appropriate utilization of resources by all Medical Departments;
- Assist with the evaluation of programs and services of the Hospital;
- Participate in the development of the Hospital's Purpose, Strategic Plan, Goals and Objectives and the Operating Plan;

- With the MAC, advise the Board on medical human resource needs of the Hospital;
- Report to the MAC on activities of the Hospital including the utilization of resources and quality assurance;
- Advise the Medical and Dental Staff on current Hospital policies;
- Designate an alternate to act during an absence;
- Ensure appropriate participation in continuing medical and dental education; and
- Delegate appropriate responsibility to the Chiefs of Department and monitor their performance.

Strategy and Leading Change

- Responsible for the operational efficiency of medical/clinical departments;
- Assessing major external medical-related developments that could have a material impact on care;
- Planning initiatives to enhance local healthcare and relations with partner organizations.

Organizational Leadership

- Provides leadership and creates a positive and supportive work culture for professional staff, staff, volunteers, patients and care givers;
- Builds an effective relationship with the President of Medical Staff to advance the alignment of the medical staff with the Hospital's priorities;
- Supports a healthy, productive, empowering, creative and supportive learning culture;
- Enhances the visibility and profile of the senior leadership team as a proactive, engaged, empowered and high-functioning executive team.

Quality and Patient Care

- Reports on and continuously improves the quality of services, patient care and the safety of patients and the public in the Hospital;
- Contributes to the Board Quality Committee and assists with the development of the Quality Improvement Plan;
- Contributes to the Patient Relations process, including reviewing complaints, taking appropriate corrective action where necessary, and identifying situations which could result in litigation;
- Ensures that care provided meets or exceeds all relevant quality indicators and standards;
- Ensures proper structures and systems are in place for the development, recommendation and review of new programs, program expansions or program changes;
- Notify the CEO, the Chief(s) of Department, and the Board if required by law or policy, of,
    - (i) any failure of any member of the medical, dental staff, to act in accordance with statute law or regulations thereunder, or the Hospital By-laws and Rules,
    - (ii) any belief that a member of the medical, dental staff, is unable to perform the person's professional duties with respect to a patient in the Hospital,
    - (iii) any patient who does not appear to be receiving the most appropriate treatment and care or who is not being visited frequently enough by the attending member of the medical, dental staff, and
    - (iv) any other matter about which they should have knowledge.

Physician Oversight

- Consult with the CEO to ensure that physician numbers, training and resources are sufficient to deliver Hospital services in accordance with the Hospital's Health Service Accountability Agreements and its operational plan;

- Prepare and forward a detailed report to the College of Physicians and Surgeons where:
    - (i) the application of a physician for appointment or reappointment to the medical staff of the Hospital is rejected by reason of their incompetence, negligence or misconduct;
    - (ii) the privileges of a member of the medical staff of the Hospital are restricted or cancelled by reason of their incompetence, negligence or misconduct;
    - (iii) a physician voluntarily or involuntarily resigns from the medical staff of the Hospital during the course of an investigation into their incompetence, negligence or conduct.

Resource and Financial Management

- Ensure appropriate systems and structures are in place for effective management and control of physician and medical resources;
- Be responsible for ensuring department chief stipends are in place and managed against measurable targets;
- Participate in capital equipment and new technology needs assessment.

Human Resources Management

- Working with the CEO establish the selection process for the engagement of department chiefs in accordance with Hospital By-laws;
- Establish the functions and responsibilities of the department chiefs in accordance with Hospital By-laws;
- Annually conduct an evaluation of the department chiefs;
- Assist in the development of a comprehensive medical human resources plan aligned with the Hospital's operational and strategic plans;
- Support the Medical affairs office in attracting and retaining highly qualified physician talent.

QUALIFICATIONS

- Doctor of Medicine;
- License to practice in the province of Ontario
- Fellowship within the Royal College of Physicians and Surgeons of Canada or membership within the College of Family Physicians of Canada
- Physician in good standing;
- Additional preparation in healthcare management (PMI Physician Manager Institute or equivalent) preferred.

COMPETENCIES

Skills and Abilities

- Knowledge and understanding of continuous improvement methodologies in healthcare;
- Knowledge and understanding of current and developing electronic medical records systems.
- Skills in organizing resources and establishing priorities;
- Possesses strong planning and organizational skills;
- Strong problem-solving, mediation, relationship building and negotiation skills;
- Innovative, visionary, a high level of commitment, excellent judgment.
- Demonstrated leadership abilities;
- Demonstrated planning and decision-making skills;
- Proven analytical, written and oral communications skills;
- Experience in outcome measurement and quality improvement initiatives;

WORKING REQUIREMENTS

The COS is required to devote a minimum of one day per week to fulfil their duties and responsibilities.

Work requires occasional visits to patient and clinical areas requiring strict adherence to Health and Safety and Infection Control policies, procedures and protocols.

Work requires occasional travel to offsite locations to participate in regional meetings, conduct site visits other hospitals, attend educational events, and other ad hoc requirements.