



# Credentialing: Processes and Strategies for Addressing the Disruptive Professional Staff Member

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# AGENDA

1. Problem Physicians
2. The Legislative Approach
3. Appointment and Reappointment Process
4. Mid-Term Process
5. Why the Legislative Approach Doesn't Work
6. Options for Addressing Problems in the Physician/Hospital Relationship
7. Remediation vs. Discipline

# Problem Physicians

- Disruptive behaviour can be defined as any action, verbal or physical, which is disrespectful of others and adversely affects staff morale or service provision. It can include behaviours inconsistent with rules and policies
- Linked issues of quality and efficiency

# The Legislative Framework

- PHA s. 36
  - The Board is empowered to appoint and grant privileges
  - The Board may alter, revoke or suspend appointment

# The Legislative Framework (cont.)

- PHA s. 35
  - The MAC shall make recommendations to the Board in respect of appointment and reappointment
  - The MAC shall carry out such other duties as assigned by the Board (by-laws)

# The Legislative Framework (cont.)

- PHA s. 34
  - Chief of Staff/Chief of Dep't responsible where serious problem re: care, treatment or diagnosis
  - May remove privileges as attending physician and take over care
  - Report to MAC and CEO

# Appointment and Reappointment Process

- Governed by section 37:
  - MAC recommendation
  - Notice of recommendation and reasons
  - Opportunity for hearing

# Mid-term Process

- Mid Term action supported where there is:
  - An issue of patient safety
  - Immediate risk supporting extreme action
  - Urgent obligation to accommodate risk or need
  - Due process requirements



# Why the Legislative Approach Doesn't Work

- The legislative process creates a win/lose environment
- The legislative alternatives are draconian and not remedial
- The process creates a defensive response

# Why the Legislative Approach Doesn't Work (cont'd)

- It is becoming increasingly difficult for hospitals to meet their medical human resource needs, particularly the provision of on-call and emergency services
- Given this atmosphere, playing “hardball” is not a realistic approach

# Options for Addressing Problems in the Physician/Hospital Relationship

- **Remedial Approach**

- An effective complaints procedure will allow issues to be handled in a non-adversarial environment
- Having a comprehensive complaints process can allow some flexibility in the approach that a hospital will take in addressing problems
- Opportunity for an informal resolution may be possible

# Options for Addressing Problems in the Physician/Hospital Relationship (cont'd)

- **Remedial Approach (cont'd)**
  - If the complaint is major then an investigation process will need to be undertaken:
    - due process considerations must be addressed
    - thorough investigation of the complaint
    - opportunity for the subject of the complaint to respond

# Options for Addressing Problems in the Physician/Hospital Relationship (cont'd)

- **Where There is a Successful Outcome**
  - Comprehensive agreement with respect to performance expectations
  - Continuation of services
  - Accountable re: future occurrences
  - Avoidance of a black mark

# Options for Addressing Problems in the Physician/Hospital Relationship (cont'd)

- **Outside Resources**
  - OMA
  - CPSO
  - Private Behavioural Programs
    - emotional and anger management

# Remediation vs. Discipline

- Zero Tolerance
- Repeat Behaviour
- Practical Opportunity for Remediation
  - Supervision
  - Mentors
  - Level of retraining

# Remediation vs. Discipline (cont'd)

# Insight



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