Physician Privileges – Everything You Wanted to Know But Were Afraid to Ask

Part I: The Disruptive Physician

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AGENDA

1. The Legislative and Common Law Environment
2. Appointment Disputes
3. A Remedial Approach
4. Non-legal Interventions
5. Policies and Managing the Risk
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 as well as behaviours that put patients or staff at risk.
PUBLIC HOSPITALS ACT

• Medical Advisory Committee s. 35
  – Consider and review
  – Recommendations re: appointment and reappointment
  – Other duties as assigned by Act or Board
• Board Powers s.36
  – Appointment
  – Privileges
  – Revoke, suspend or deny
• Appointment/Reappointment Process s.37
  – Physician entitled to apply or reapply; M.A.C. to consider recommendation 60 days
  – MAC may delay recommendation
  – Notice to applicant and Board
  – Physician right to reasons & hearing
COMMON LAW OBLIGATIONS

• Board has duty to appointment physicians that
  – Meet the needs of the community
  – Effectively utilize the resources of the hospital
  – Are skilled & experienced
  – Will work as an effective member of the healthcare team (collaborative, respectful, ensure pt. and staff safety)
APPOINTMENT DISPUTES

Foundation for Review: Appointment & Re-Appointment

- Competency and quality of care
- Manpower need and resource availability
- Collegiality
  - Team work
  - Interpersonal behaviors
  - Compliance with rules
Foundation for Action: Immediate

• An issue of patient safety
• Immediate risk supporting extreme action
• Urgent accommodated risk
• Authority of Chief of Staff, Administrator and Board
A REMEDIAL APPROACH

• Effective procedures 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

• Engagement of counsel

• Engagement of PHP
• 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
Remediation vs Discipline:

• Zero Tolerance
• Repeat Behaviour
• Insight
• Practical Opportunity for Remediation
  – supervision
  – mentors
  – level of retraining
NON-LEGAL INTERVENTION

• OMA
• CPSO
• Private Behavioural Programs
  – emotional and anger management
• Independent Investigation and Mediation
POLICIES AND MANAGING THE RISK

• Code of Conduct Policy
• Complaints Policy
• Harassment and Abuse
• Root Cause Policies
  – Call and Coverage
  – Succession Planning
  – Patient Transfer
PART II: COMPETENCY ISSUES & REPORTING

• Stay tuned…
QUESTIONS?

Thank You!
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