

Health Authority Medical Advisory Committee (HAMAC)

Terms of Reference

1 Authority:

- 1.1 HAMAC is described in the Bylaws of the Medical Staff of Fraser Health, Article 8 and in the Rules (sec 2.1 – 2.3).
- 1.2 HAMAC is appointed by the Fraser Health Authority Board of Directors (“the Board”) in sec. 2.1.1 of the Rules.
- 1.3 HAMAC is a “Medical Staff Committee” for the purposes of s. 41(1) of the *Hospital Act* and, as such, meets the definition of “committee” for the purposes of s. 51 of the *Evidence Act*.

2 Accountability:

- 2.1 HAMAC is accountable to the Board.

3 Purpose:

- 3.1 Consistent with the requirements of the s. 41 of the *Hospital Act*, HAMAC will...
 - (a) Evaluate, control and report on the clinical practice in a hospital (the Health Authority) in order to continually maintain and improve the safety and quality of patient care in the hospital (Health Authority), and
 - (b) Perform a function for the appraisal and control of quality of patient care in the hospital (Health Authority).
- 3.2 HAMAC provides advice to the Board and to the (FH) CEO of the Health Authority on:
 - (a) the provision of medical care within the facilities and programs operated by the Fraser Health Authority;
 - (b) the monitoring of the quality and effectiveness of medical care provided within the facilities and programs operated by the Fraser Health Authority
 - (c) the adequacy of medical staff resources

- (d) the continuing education of the members of the medical staff
- (e) planning goals for meeting the medical care needs of the population served by the Fraser Health Authority
- (f) the availability and adequacy of resources to provide appropriate patient care in the Fraser Health Authority

4 Objectives/Functions/Roles:

4.1 See section 8.3 of the Bylaws.

5 Membership:

5.1 Members of the Medical Staff appointed to medical leadership positions within the Health Authority:

- Regional Department Heads
- Hospital Medical Coordinators
- Program Medical Directors

5.2 Members of the Medical Staff who have been elected by the medical staff:

- Three (3) Presidents of the Medical Staff Associations

5.3 The Chief Medical Health Officer of the Health Authority

5.4 The Vice President Medicine of the Health Authority, who shall provide secretariat services to the HAMAC

5.5 The CEO of the Health Authority, who shall be a non-voting member

5.6 Other senior administrative or medical staff of the Health Authority as appropriate, in a non-voting capacity

5.7 Non-Voting Members:

- The CEO of the Health Authority, who shall be a non-voting member
- Other senior administrative or medical staff of the Health Authority as appropriate, in a non-voting capacity.

6 Appointment of Chair and Vice-Chair:

6.1 The Chair and Vice-Chair of HAMAC will be selected from among the members of the Active Medical Staff.

6.2 The Chair and Vice-Chair of the HAMAC are appointed by the Board upon the recommendation of the HAMAC.

- 6.3 The Chair of the HAMAC is appointed for a term of not more than three years and may be reappointed for up to three consecutive terms.

7 Subcommittees:

- 7.1 The Board, on the advice of the HAMAC, may establish other committees, reporting to the HAMAC, to undertake specific responsibilities that fall within the responsibility of the medical staff organization.
- 7.2 The composition and terms of reference of all such committees shall be delineated in Medical Staff Rules.
- 7.3 The list of Standing Committees shall be reviewed annually by the HAMAC and recommendations for revision shall be presented to the Board as necessary.
- 7.4 Each Standing Committee shall review its Terms of Reference annually and make recommendations to the HAMAC for changes, if any. The Terms of Reference of a Standing Committee shall not be effective until approved by the Board.
- 7.5 In addition to these Standing Committees, HAMAC may recommend to the Board the formation of additional committees as it deems necessary
- 7.6 All medical staff committees shall report to the HAMAC in a manner specified in the Medical Staff Rules.
- 7.7 All recommendations of these committees requiring the attention of the Board shall be forwarded to the HAMAC and shall be reported to the Board by the Chair of HAMAC.

8 Reporting:

- 8.1 The Chair or Vice-Chair of HAMAC shall provide a report to the Board and to the CEO on a regular basis.
- 8.2 The Chair or Vice-Chair of HAMAC shall attend meetings of the Board, and the appropriate committee(s) of the Board, to participate in discussion pertaining to the purposes identified for the HAMAC under sections 8.1.2 and 8.1.3 of the Bylaws.

9 Frequency of Meetings:

- 9.1 The Committee shall meet at least ten (10) times per year and at the call of the Chair. Meeting dates and times will be established by the Chair in consultation with the Committee members.

10 Governance/Quorum:

- 10.1 Motions require a vote and 50% of those voting members (or delegates) present in favour to pass.
- 10.2 Voting members may appoint a Delegate who shall have all the privileges of voting, debate and participation in the proceedings to which the member is entitled.
- 10.3 The Delegate shall hold a General Proxy (eg: Delegate has the right to vote as s/he sees fit on all issues and motions).
- 10.4 A quorum will be 50% of the voting members (or Delegates) in attendance.
- 10.5 A Delegate may be appointed for only 1 meeting and the appointment lapses after that meeting.

11 Distribution of Minutes:

- 11.1 Minutes shall be kept of the meetings and deliberations and will be organized to ensure confidentiality.
- 11.2 Minutes will be circulated to all Committee members.
- 11.3 Minutes, with the exception of those recording *In Camera* business, will be made available to Medical Staff members.