Medical Administration / Governance / Credentialing Committee

Terms of Reference

1 Authority:
   a) The Medical Administration/Governance/Credentialing Committee is established by the FHA Board of Directors upon recommendation of HAMAC consistent with s. 8.3.1.1 and 9.1.1 of the Medical Staff Bylaws and s. 2.3.3 and 2.3.4 of the Medical Staff Rules.

   b) The Medical Administration/Governance/Credentialing Committee is established by the Board as “Medical Staff Committees” for the purposes of s. 41(1) of the Hospital Act and, as such, meet the definition of “committee” for the purposes of s. 51 of the Evidence Act.

2 Accountability:
   The Medical Administration/Governance/Credentialing Committee is accountable to HAMAC.

3 Purpose:
   (a) recommend chairs and members of standing committees to HAMAC ensures these committees function effectively including recording minutes of meetings;

   (b) make recommendations to HAMAC on the development, maintenance and updating of medical staff rules, policies and procedures pertaining to medical care provided within FH facilities;

   (c) advise on matters pertaining to clinical organization, medical technology, and other relevant medical administrative matters.

4 Functions/Duties:
   a) Recommend revisions to the Medical Staff Bylaws as necessary.

   b) Review the Medical Staff Rules every 3 years and recommend revisions to HAMAC as indicated.

   c) Ensure HAMAC sub-committees review ToR and report membership changes to HAMAC as required.

   d) Review and advocate for support to Regional Departments relative to meeting mandates established in the Bylaws and Rules.
e) Review Regional Department and Regional Division compliance with meetings expectations as established in the Rules.

f) Oversee the credentialing and privileging function for FH Medical Staff and recommend process changes as indicated in compliance with the Bylaws.

g) Recommend and manage a regular credentials review process for HAMAC.

h) Recommend and oversee an in-depth performance evaluation process for Medical Staff members consistent with the standards established in the Rules.

i) Liaise with Medical Staff Associations in relation to regular membership updates for each site, reporting of meeting attendance and dues payment, and other matters of interest or concern to HAMAC.

5 Composition:
- Chair
- 5 or more RDH
- 1 SMD
- 1 MSA President
- Members at Large - Voting (HAMAC members only)
- Members at Large – Non-voting (unlimited)
- Others as determined by the committee.

6 Appointment of Chair:
The Chair will be recommended by HAMAC to the Board.

7 Reporting:
The Chair shall provide a report to HAMAC on a regular basis.

8 Frequency of Meetings:
The Committee shall meet at least five (5) times per year in alternating months and at the call of the Chair. Meeting dates and times will be established by the Chair in consultation with the Committee members.

9 Governance/Quorum:
  a) Motions require a vote and 50% of those voting members (or delegates) present in favour to pass.

  b) 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.

  c) The Delegate shall hold a General Proxy (eg: Delegate has the right to vote as s/he sees fit on all issues and motions).

  d) A quorum will be 50% of the voting members (or Delegates) in attendance.
e) A Delegate may be appointed for only 1 meeting and the appointment lapses after that meeting.

10 Distribution of Minutes:
   a) Minutes shall be kept of the meetings and deliberations and will be organized to ensure confidentiality.
   
   b) Minutes will be circulated to all Committee members.
   
   c) Minutes, with the exception of those recording In Camera business, will be made available to Medical Staff members.