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PUBLIC HOSPITAL ACT CHANGES MUZZLE MEDICAL STAFF IN DELIVERY OF CARE TO THE PUBLIC

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The recent amendments to the Public Hospitals Act which were advocated by the Ontario Hospital Association (management and administration) and which the Ontario government embraced whole-heartedly and very rapidly this past year, have had the effect of removing the voice of the medical staff in every hospital from any meaningful participation at the board level. The presence of the medical staff representatives without a vote, makes these representatives nothing more than mere observers at board meetings of our hospitals.

What these changes do not do, however, is remove in any way the legal obligations of the medical leadership (the Medical Advisory Committees) from responsibility and accountability for delivering safe, timely accessible patient care in their institutions.

Every chief in every department in every hospital must ensure that no By-Law changes are enacted that would change the make-up or the voting process of their MACs. This is not required by any of the recent legislative changes but some hospitals have indicated an intention to change By-Laws in order to accomplish such MAC make-up, chairmanship and voting.

Regardless of the justification put forward in any hospital, the medical leadership continue to carry the legal and ethical liability for the quality, standard and timeliness of the medical care. To accept the liability without the ability to oversee this onerous responsibility or to recommend or require meaningful changes, resources, reviews and the like, is an exercise in self destruction.

Hospitals are the mandatory workplace of our consultants and surgeons. They have a right to have a meaningful voice in their workplace environment and they have a duty to the public and themselves to be listened to in that environment and not simply seen but not heard. This is particularly true in the functioning and management of the institution at the delivery of care level.

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