

Standards in this chapter are grouped using the following leadership hierarchy:

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## **Level I: Governance**

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*Governance* refers to the governing entity of the hospital and can exist in many configurations. For example, the governing entity may be a group of individuals (such as a community board), one or more individual owners within a corporate structure, or in the case of public hospitals, the Ministry of Health. Any individual(s) or board member(s) responsible for the requirements found in GLD.01.00 is considered the governing entity of the hospital.

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## **Level II: Chief Executive**

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The most senior hospital executive, commonly termed the *chief executive*, is a position occupied by one or more individuals selected by the governing entity to manage the organization on a day-to-day basis. In academic medical centers, the dean of the medical school may be at this executive level in the hospital. GLD.02.00 describes the accountabilities and expectations of the chief executive.

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## **Level III: Hospital Leaders**

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The standards assign to hospital leaders a variety of responsibilities intended to collaboratively guide the hospital in meeting its mission. Most frequently, hospital leadership consists of a chief medical officer representing the medical staff of the hospital, a chief nursing officer representing all levels of nursing in the hospital, senior administrators, and any other individuals the hospital selects, such as a chief quality officer, chief information officer, or vice president of human resources. In larger hospitals with different organizational structures, such as divisions, hospital leadership may include the leaders of these divisions. Each hospital identifies hospital leadership, and standards GLD.03.00 through GLD.05.03 describe the accountabilities of this group.

**Note:** GLD.06.00 describes the responsibilities of leaders of clinical services; however, they may be formally or informally organized. In academic medical centers, the leader of medical education and leader of clinical research may be a part of hospital leadership.

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## **Level IV: Department/Service Leaders**

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For effective and efficient daily delivery of clinical services and management of the organization, hospitals are most frequently divided into cohesive subgroups such as departments, services, or units, each under the direction of a department/service leader(s). Standards GLD.06.00 through GLD.06.02 describe the expectations of these department/service leaders. The subgroups consist of departments such as medicine, surgery, obstetrics, pediatrics, and others; one or more nursing subgroups; diagnostic services or departments such as quality and patient safety, radiology, and clinical laboratory; pharmacy services, both centralized and distributed throughout the hospital; and ancillary services such as transportation, social work, finance, purchasing, facility management, and human resources, among others. Most larger hospitals also have managers within these subgroups. For example, nursing may have a manager of the operating theatres and one for outpatient services, the department of medicine may have managers of each patient clinical unit, and the hospital business office may have managers for the different business functions such as bed control, billing, and purchasing, among others.