

**Standard Intent:**

The medical staff is defined as all physicians, dentists, and other professionals who are licensed to practice independently and who provide preventive, curative, restorative, surgical, rehabilitative, or other medical or dental services to patients; or who provide interpretative services for patients, such as pathology, radiology, or laboratory services. There must be a medical staff bylaw that describes the organization, functions, and responsibilities of the medical staff that are known to all of them.

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**MS.2 A qualified medical director is responsible for managing the medical staff and medical services.**

- MS.2.1 The medical director is a board certified physician or equivalent, qualified in healthcare management by education, training or experience.
  - MS.2.2 The medical director is responsible and accountable for the clinical performance of the medical staff, the quality of care they provide, as well as their professional conduct.
  - MS.2.3 The medical director recommends to the hospital director the appointment of the heads of clinical departments.
  - MS.2.4 The medical director has a current written job description that clearly describes his managerial roles and responsibilities.
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**Standard Intent:**

The medical director is primarily responsible and accountable for the clinical performance of the medical staff and the quality of care they provide, as well as their professional conduct. He recommends to the hospital director the appointment of the head of clinical departments. The medical director must be qualified and well trained in healthcare management.

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**MS.3 The hospital has an effective process that supports the professional communication and coordination of care amongst medical staff.**

- MS.3.1 There is a medical executive committee or equivalent, chaired by medical director and includes the heads of clinical departments, to ensure that they work together to coordinate the provision of care.
- MS.3.2 The medical executive committee holds regular formal meetings (at least monthly).
- MS.3.3 The medical executive committee reviews and approves policies and procedures related to clinical departments.
- MS.3.4 The medical executive committee reviews all relevant reports of other hospital committees for prioritizing the services needed and guiding the credentialing and privileging process.

**Standard Intent:**

The leaders of the hospitals should ensure that there will be a process that support the professional communication and coordination of care amongst medical staff. There must be regular meetings between the medical director and the head of clinical departments to review and approve policies and procedures as well as to coordinate the provision of care.

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**MS.4 Each clinical department is directed by a qualified individual.**

- MS.4.1 The department head is board certified or equivalent in his field and qualified in healthcare management by education, training or experience.
  - MS.4.2 The department head has a written job description that clearly describes his role and responsibilities.
  - MS.4.3 Responsibilities of the department head include:
    - MS.4.3.1 Defining medical staff qualifications required for the provision of effective and safe patient care.
    - MS.4.3.2 Recommending the need for further training/certification of a medical staff member.
    - MS.4.3.3 Monitoring admissions to ensure that the diagnostic and therapeutic interventions are within the staff capabilities and the available hospital resources.
    - MS.4.3.4 Ensuring that medical staff members work within the clinical privileges granted to them.
    - MS.4.3.5 Developing a written scope of services for the department.
  - MS.4.4 The department head has an ongoing method of peer review (e.g., peer review committee) to evaluate care provided as well as the performance of the medical staff.
    - MS.4.4.1 The department head regularly assesses important functions that include appropriateness of admissions, appropriateness and effectiveness of care, training and educational needs, length of stay, and appropriate utilization of resources.
    - MS.4.4.2 The department head defines criteria or indicators for selecting cases that must be referred for peer review.
    - MS.4.4.3 The activities of the peer review process are utilized as part of the physician's performance evaluation.
    - MS.4.4.4 The department head shares the findings of the peer review with the medical director and works closely to improve and correct any deficiencies.
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