



Office of Dr. Robert Williams  
Vice President  
Quality, Diagnostic and Medical Services  
c/o Health Sciences Centre Site  
Room 1352, Administration  
300 Prince Philip Drive  
St. John's, NL A1E 3V6  
Phone: 709-777-1308 Fax: 709-778-6307  
E-mail: [robert.williams@easternhealth.ca](mailto:robert.williams@easternhealth.ca)

November 22, 2005

Dr. Gary Baker  
Assistant Chief Executive Officer  
Medical Services  
c/o Carbonear General Hospital  
86 Highroad South  
Carbonear, NL A1Y 1A4

Dear Dr. Baker:

I'm writing in follow up to your correspondence of September 30, 2005, relating to the proposed medical staff structure for Eastern Health.

I've now had a chance to review feedback from all entities who are being brought together into the new organization, Eastern Health.

Based upon the feedback received, it is felt that the credentialing of physicians should be done through the Local Medical Advisory Committee structures with the Regional Medical Advisory Committee receiving the documentation for information purposes only. In doing so, however, we will need to be able to ensure the Board of Trustees that a comprehensive review process is in place. It was also felt that while the Regional Medical Advisory Committee would have a role in capital equipment purchases, if requested by the CEO to provide information on major purchases, that the decision with respect to purchasing equipment through the allocated budgets by respective Chief Operating Officers, in consultation with the Local Medical Advisory Committees where appropriate.

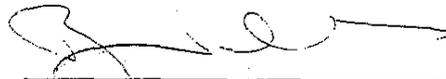
I understand concerns were also expressed from your area with respect to the Medical School representative having voting power. It was felt that the Medical School should have a representative sit on the Regional Medical Advisory Committee as Eastern Health has strong affiliations with the Medical School, however, it is not a requirement that this individual have voting power and, therefore, having a person on as an ex-officio representative from the Medical School would be in order.

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Dr. G. Baker  
November 22, 2005  
Page 3

I've sent a copy of my correspondence to the Chairs of the MAC's in Burin, Clarenville/  
Bonavista, Long-Term Care in St. John's and the MAC of the former Health Care Corporation of  
St. John's so that they may be apprised of your concerns and the changes that are  
contemplated to date.

Yours sincerely,



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R.J. WILLIAMS, M.D., M.P.H.  
Vice President, Quality, Diagnostic  
and Medical Services

/dd

- c Dr. J. Arthur
- Dr. E. Ghumman
- Dr. P. O'Shea
- Dr. L. Inkpen

# Eastern HEALTH

30 September 2005

VICE PRESIDENT

OCT 4 2005

MEDICAL SERVICES

Dr. Robert Williams  
Vice-President - Quality, Diagnostic & Medical Services  
Eastern Regional Integrated Health Authority  
c/o Administration  
Health Sciences Centre  
300 Prince Philip Drive  
St. John's, NL A1B 3V6

Dear Dr. Williams:

Please find attached the discussion which took place at a recent Medical Staff meeting concerning your proposed structure of Medical Staff under Eastern Health. There were a number of issues that the Medical Staff had concerns about and they have included these in the attached document. They would appreciate your feedback on these items and certainly would be amenable to a further face-to-face meeting with you to discuss any issues which you may deem necessary.

Yours sincerely,



G. T. BAKER, MD  
Assistant Chief Executive Officer  
Medical Services

lja:BAKER\WILLIAMS-R14

Attachment

86 Highroad South  
Carbonear, NL Canada A1Y 1A4  
Tel: 709-945-5768 ■ Fax: 709-945-5158 ■ E-mail: gbaker@ahcib.ca

AVALON HEALTH CARE INSTITUTIONS BOARD  
(NOW PART OF EASTERN HEALTH)

**REGIONAL MEDICAL STAFF MEETING**  
14 SEPTEMBER 2005

A meeting of the Regional Medical Staff of the Avalon Health Care Institutions Board was held on Wednesday, 14 September 2005, at 7:30 p.m. in Meeting Room I at Carbonear General Hospital.

In attendance:	Dr. P. du Plessis	Dr. M. Hafez
	Dr. R. Randell	Dr. L. Ivany
	Dr. M. Tau	Dr. P. Garisa
	Dr. T. Jarvis ( <i>via conf. call</i> )	Dr. C. Mokone
	Dr. G. Baker	Dr. G. Nel
	Dr. R. Butt	Dr. A. Olufemi
	Dr. A. Drover	Dr. D. Openshaw
	Dr. R. Farrell	Dr. L. M. Ali Al-Kazely
	Dr. R. Fowler	

The meeting was arranged to discuss the details of the proposed structure of Medical Staff under Eastern Health.

The basic structure as outlined in the information provided by Eastern Health concerning Medical Staff Structure was reviewed in brief by Dr. Baker. Basically the Local Medical Advisory Committees are to report to a Regional Medical Advisory Committee composed of members from all regions. Essentially there is no change in the Local Medical Advisory Committees. Upon review of the proposed Medical Staff Structure with those in attendance at tonight's meeting, several issues were raised.

#### **ISSUE No. 1**

The first issue concerned the appointment of Clinical Chiefs under the Regional Medical Advisory Committee with the Acute Care Chief coming from St. John's. The question was raised whether or not there is a need for someone from each board who represents an acute care facility. The question essentially is, *is Carbonear not an acute care facility and would it not be reasonable to have a member from the Carbonear General Hospital staff sit on the Regional Medical Advisory Committee in this capacity as a potential Clinical Chief? Why does the sitting member have to be appointed from St. John's?*

#### **ISSUE No. 2**

The question was raised as to *how much a Regional Medical Advisory Committee can dictate to the Local Medical Advisory Committees as to the provision of services and particularly the credentialing of physicians.* The feeling among those in attendance was that the Local Medical Advisory Committee should dictate affairs at the local level. There was grave concern that the Regional Medical Advisory Committee has veto power with respect to both credentialing physicians and the approval of new medical equipment to an acute care facility such as Carbonear General Hospital.

*Regional Medical Staff Meeting  
14 September 2005*

*Page 2*

Moreover, as to the issue of who is responsible for the laboratory and diagnostic services at the ground level, many staff members at tonight's meeting voiced the opinion that there should be autonomy in local hospital departments versus a Regional Medical Advisory Committee with a Clinical Chief having decision-making ability and veto power with regard to local issues at the laboratory and diagnostic services level.

### **ISSUE No. 3**

The concern over recruitment at a local level was raised. The hospital traditionally has looked after its own with regard to recruitment and again this follows with the credentialing issue as noted above. *Does the Regional Medical Advisory Committee have veto powers with regard to recruitment and to the provision of locum services carried out by the local hospital?*

### **ISSUE No. 4**

This is of major importance. The weighting of the Regional Medical Advisory Committee is unfairly balanced toward sitting members from the St. John's region. When it is taken into account that the St. John's hospital facilities service approximately 150,000 persons, while Carbonear, Burin and Clarenville service approximately 110,000 persons, there are solely two sitting members from Carbonear General Hospital and six members in total with voting status on the Regional Medical Advisory Committee. There are nine non-voting members on the Regional Medical Advisory Committee, i.e., ex-officio, however, ten voting members are from St. John's. There are solely six members from the outlying regions. Again a disproportionate weighting of voting members - ten from St. John's, six from the outside areas serviced under the umbrella of Eastern Health. This seems a very unfair weighting of voting members. Additionally, given the proposed Medical Staff Structure and if the Regional Medical Advisory Committee has veto power on provision of services, credentialing, etc., this gives the weight of control to the St. John's region and, in particular, unfair representation of concerns and voting power to the outlying hospital facilities.

### **ISSUE No. 5**

The fifth issue raised with regard to Medical Staff Structure is that the number of Clinical Chiefs from outside St. John's as proposed is "nil". As noted previously in these minutes, given the fact that Carbonear General Hospital is an acute care facility, *why is there not representation of an Acute Care Chief on the board?* A proposal was tabled that, *in addition to the four Clinical Chiefs presently from St. John's, why not have six or eight Clinical Chiefs including other members from outlying areas who do have voting power on the Regional Medical Advisory Committee as opposed to the four from St. John's?*

Regional Medical Staff Meeting  
14 September 2005

Page 3

## SUMMARY

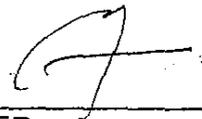
In summary, the key concern is the unjust weighting of Regional Medical Advisory Committee members with a power base and potential veto power concentrated in St. John's. In light of this, the question in terms of the Regional Medical Advisory Committee and its voting members is *why is there a medical school representative, who has voting power and who could potentially have decision-making power with regard to equipment and credentialing, sitting on a board overlaying the outlying regions?* It would seem logical to have a sitting member with voting power who represents the outlying regions as opposed to someone simply representing a medical school training program. Again there seems to be consolidation and unfair weighting of the Regional Medical Advisory Committee power base in favour of the St. John's members.

At the close of the meeting, a second meeting was proposed of the Medical Staff from the Burin and Clarenville facilities in concert with Carbonear to review the Medical Staff Structure and seek their input, especially in light of the above concerns raised by the members of the Medical Staff at Carbonear General Hospital and surrounding area.

Another issue for debate which was not tabled at this meeting is that of a uniform set of Medical Staff By-Laws as currently being proposed and this will be addressed in future.

## ADJOURNMENT

The meeting was then adjourned with the above proposed meeting of Medical Staff from facilities at Burin, Clarenville and Carbonear to take place at a later date. A copy of these minutes will be forwarded to Dr. Robert Williams upon review of Dr. Pierre du Plessis, President of Regional Medical Staff, and the signature of the Secretary of Regional Medical Staff, Dr. Robert Fowler.



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Dr. R. FOWLER  
Secretary of Regional Medical Staff

**Denise Dunn**

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**From:** FayMatthews  
**Sent:** Friday, September 30, 2005 10:54 AM  
**To:** Dr. Robert Williams  
**Cc:** Pat Coish-Snow  
**Subject:** MAC TCP

Good morning,  
We had MAC last night and there were a number of concerns about the RMAC structure. There is a lot of concern relating to the balance of voting capacity, it is viewed that rural votes could be cancelled by the numbers in St. John's. There was concern that the medical school rep has a vote. Credentialling was seen to be a local, not regional matter. There was also much discussion about the purchase of equipment and whether this RMAC structure would allow for equipment purchases to happen in the rural areas. Gary Baker is writing you further on the outcome of the medical staff meeting.  
Fay:-)

Janet Fay Matthews  
Chief Operating Officer  
Trinity, Conception, Placentia  
P.O. Box 190  
White Dove Building  
Whitbourne, NL  
AOB 3KO  
Tel: 709-759-3366  
Fax: 709-759-3358  
fay.matthews@easternhealth.ca

Mr. Tully

for information

30

2/11/05 Noel to G. Tully  
8/30

# Eastern HEALTH

30 September 2005

VICE PRESIDENT

OCT 4 2005

MEDICAL SERVICES

Dr. Robert Williams  
Vice-President - Quality, Diagnostic & Medical Services  
Eastern Regional Integrated Health Authority  
c/o Administration  
Health Sciences Centre  
300 Prince Philip Drive  
St. John's, NL A1B 3V6

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Yours sincerely,



G. T. BAKER, MD  
Assistant Chief Executive Officer  
Medical Services

lja:BAKER\WILLIAMS-R.L4

Attachment

86 Highroad South  
Carbonear, NL Canada A1Y 1A4  
Tel: 709-945-5768 ■ Fax: 709-945-5158 ■ E-mail: gbaker@ahcib.ca

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*Regional Medical Staff Meeting  
14 September 2005*

Page 2

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Regional Medical Staff Meeting  
14 September 2005

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**SUMMARY**

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Dr. R. FOWLER  
Secretary of Regional Medical Staff

ADAEON HEALTE CARE INSTITUTE BOARD  
86 HIGHROAD SOUTH  
CARBONAR, NEWZOUNDLAND  
CANADA J1H 1A4  
Telephone (700) 945-5111  
Facsimile (700) 945-5156

**FACSIMILE MESSAGE**

**TO:** Dr. Robert Williams

VP - Medical Services

**FAX NO.:** 709-778-6307

**FROM:** Dr. Gary Baker (709-945-5768)

**DATE:** 20 July 2005

**NO. OF PAGES:** 5 (including cover page)

**MESSAGE:** Urgent  Confidential  Original in Mail

For your information.

**CONFIDENTIALITY WARNING**  
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MINUTES OF THE MEETING OF  
REGIONAL MEDICAL ADVISORY COMMITTEE AND DR. R. WILLIAMS  
12 JULY 2005 - 12:00 P.M.  
CARBONAR GENERAL HOSPITAL  
MEETING ROOM 1

The following individuals were present at the meeting:

Dr. R. Fowler	Dr. B. Martin
Dr. A. O. Olufemi	Dr. J. Tamale
Dr. G. Baker	Dr. P. Bonistee
Dr. D. Openshaw	Dr. W. Brace
Dr. M. Hafez	Dr. G. Worrall
Dr. P. du Plessis	Dr. M. Zaki

Also in attendance were:

Mr. G. Butt, Vice-President - Corporate Services, Eastern HEALTH  
Dr. R. Williams, Vice-President - Quality, Diagnostic and Medical Services,  
Eastern HEALTH  
Ms. F. Matthews, Chief Operating Officer - TCP Region

The meeting was brought to order at approximately 12:10 p.m. and Dr. G. Baker introduced and welcomed Dr. Bob Williams to the meeting. There was a round table introduction and then Dr. Williams presented his proposal on Medical Staff Structure for Eastern HEALTH. Dr. Williams detailed the overall structure of the local MAC's and also the Regional MAC as well as their roles. Dr. Williams emphasized that this is a proposal and that he would ask for feedback on any of the content through the local Medical Directors over the next few weeks.

There was some discussion after the presentation regarding the presence of Clinical Chiefs from long term care in St. John's versus rural areas, and also there was discussion regarding the function of the new post of Director of Medical Services. There was also some discussion regarding the flexibility of this proposal and Dr. Williams indicated that this document was not etched in stone and that he would welcome feedback on any of the content. The feedback should be directed through the Medical Directors to his office. There was general consensus that there would be a meeting of the medical staff locally and that feedback would come from that forum. The time frame of feedback was also discussed and Dr. Williams indicated that he realized this is a difficult time of the year with a lot of people away from facilities on vacation and that there would be great flexibility in time allotted for discussion. The only request he made was that he be kept informed of any extensions which were requested by the local medical staff for discussion purposes.

*RMAC & Dr. Williams*  
12 July 2005

Page 2

There being no further business, the meeting adjourned at approximately 1:15 p.m.



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Dr. G. T. BAKER  
Chairman of RMAC  
Avalon Health Care Institutions Board

|e:RMACIMINS-RMAC&WILLIAMS.JULY05



# Avalon Health Care Institutions Board

(operating under Eastern HEALTH)

85 Highroad South, Carbonear, NL Canada A1Y 1A4 • Tel: (709)945-5111 • Fax: (709)945-5158 • www.ahcib.ca

15 July 2005

## MEMORANDUM

**TO:** Members of Regional Medical Staff

**FROM:** Dr. P. du Plessis, President - Regional Medical Staff

**RE:** Meeting to Discuss Medical Staff Organization  
under Eastern HEALTH

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Within the next week or two, we will be looking to arrange a meeting of Regional Medical Staff to discuss the details of the organization of medical staff in the Trinity-Conception-Placentia region under the new integrated health authority, Eastern HEALTH.

This is an extremely important issue and we would wish to have as many members of the medical staff as possible in attendance. Given the time of year and the possibility of some physicians being away on vacation, we would like to get an indication as to how many physicians anticipate being available to attend a meeting within the next two weeks.

If you could indicate your availability to Lydia Ash at 945-51123 as soon as possible, it would be greatly appreciated. Otherwise, we will make contact with as many of you as possible early next week to determine the feasibility of scheduling a meeting at this time.



**Avalon Health Care Institutions Board**  
*(operating under Eastern HEALTH)*

86 Highroad South, Carbonear, NL Canada A1Y 1A4 • Tel: (709)945-5111 • Fax: (709)45-5158 • www.ahcib.ca

19 July 2005

**MEMORANDUM**

**TO: Members of Regional Medical Staff**  
**FROM: Dr. P. du Plessis, President - Regional Medical Staff**  
**RE: DEFERAL of MEETING**

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Further to my memo of July 15<sup>th</sup>, it appears unlikely at this time that we will be able to achieve a quorum of medical staff for a meeting to discuss Medical Staff Structure under Eastern HEALTH.

We have therefore decided to ~~defer~~ the meeting until late August or early September.

Thank you for your assistance in this matter.

jc:RMS\MEMO-MTO.DEFERRED