

Joint Bylaws of the
Medical Staff of
Memorial Regional Hospital and the
Medical Staff of Joe DiMaggio Children's Hospital
Amendment 12

Bolding indicates addition

~~Strikethrough~~ indicates deletion

ARTICLE 11. DEPARTMENTS

Sect. 11.1 Organization of Departments – no change

Sect. 11.2 Qualifications, Selection, and Tenure of Department Chiefs **and Vice Chiefs**

- A. Each chief of a department **and vice chief** shall be an active medical staff member, in good standing, who is best qualified for the position by his training, experience, and demonstrated ability (~~four exceptions are described in Subsection C of this Section 2~~). Each chief **and vice chief** of a department shall be Board Certified in his specialty or subspecialty. ~~A physician whose practice is owned by a competing healthcare entity does not qualify to serve as a chief of a department and/or section.~~

Each chief of a department and vice chief shall have demonstrated an interest in the hospital and a commitment to its mission. The chief and vice chief of a department shall be free of any and all conflicts of interest in relation to the Memorial Healthcare System. This shall include:

- a. They shall not concurrently serve on the Executive Committee of any other hospital, including without limitation, Memorial Hospital West, Memorial Hospital Pembroke and Memorial Hospital Miramar;**
- b. They shall not serve on the Board of Directors or Board of Trustees or occupy an administrative position at any other competing hospital or medical facility in Broward or Dade Counties;**
- c. They shall not have any conflicts of interest as defined by the Governing Board's Conflict of Interest Policy;**
- d. A physician whose practice is owned by a competing medical facility does not qualify to serve as a department chief or vice chief;**
- e. While serving as a department chief or vice chief, if any of the above provisions are violated, it will be considered grounds for removal from office.**

Section 11.3 Election of Chief and Vice Chief

- A. Prior to or in January, the Chief of the Department shall appoint a nominating committee of three active members of the department. The nominating committee shall propose a slate of nominees for the position of chief of the department.**
- B. The slate of nominees will be presented to the Department in February via mail. Nominations from the department will be accepted within the ensuing 30 days when submitted by at least 15% of the active members of the department. Thereafter, nominations will be closed.**
- C. Elections will be held in April. The final slate of nominees will be sent to the Department members via mail. The nominee who receives the highest number of votes will become chief of the department and the nominee who receives the second highest number of votes will serve as vice chief of the department.**
- ~~B. The chief and vice chief of each department, except the chiefs and vice chiefs of the departments of pathology, radiology, anesthesiology, and emergency medicine of the Medical Staff of Memorial Regional Hospital shall be selected for terms as determined by each department by the voting members of his department, subject to the approval by the Board, in a manner which shall be set forth in the rules and regulations of the department. A chief may serve additional terms if so elected.~~
- D. In case of the pathology, radiology, anesthesiology, and emergency medicine departments of the Medical Staff of Memorial Regional Hospital, each chief will be appointed by the Board of Commissioners, with the approval of the Executive Committee, and will contract with the Board regarding the duties, responsibilities, and remuneration for the department.**

~~In all four of these departments, the chief as well as the members of the departments, must all be members of the medical staff. They must meet the same requirements and proceed through the same appointment process, as do all other members of the medical staff.~~

Sect. 11.4 **Term of Office**

Department Chiefs and Vice Chiefs shall take office on the first day of the medical staff year, May 1st, and shall serve a two-year term. Department Chiefs and Vice Chiefs may serve additional terms if so elected.

Sect. 11.5 **Vacancies in Office**

In the event of a resignation or failure of a chief to serve his term, the vice chief of the department shall take over the position as chief for the unexpired term. The vice chief shall be an active medical staff member. The vice chief position will be filled by a person nominated by a nominating committee of the department appointed by the department chief.

Sect. 11.6 **Function of Department Chiefs**

The responsibilities of each department chief shall include the following;

1. Establish together with the medical staff and administration, the type and scope of services required to meet the needs of the patients and the hospitals;
2. Serve as a member of the Executive Committee;
3. Be accountable for all clinical related activities of the department;
4. Be accountable for all administratively related activities of the department, unless otherwise provided for by the hospital;
5. Be responsible for the integration of the department into the primary functions of the organization;
6. Develop and implement policies and procedures that guide and support the provision of services;
7. Make recommendations regarding sufficient numbers of qualified and competent persons to provide care or service;
8. Coordination of interdepartmental and intradepartmental services;

9. Orient and provide continuing medical education for members of the department;
10. Maintain continuing surveillance of the professional performance of all individuals who possess delineated clinical privileges in the department;
11. Recommend to the medical staff the criteria for clinical privileges in the department;
12. Make recommendations regarding clinical privileges for each member of the department to the credentials committee;
13. Continually assess and make recommendations for improving the quality and safety of care and services provided and work towards addressing all national patient safety goals;
14. Maintain quality control programs as appropriate;
15. Make recommendations for space and other resources needed;
16. Assess and recommend to Administration the off-site sources for needed patient care, treatment, and services not provided by the department and/or hospital; and
17. Determine the qualifications and competence of department personnel who are not licensed independent practitioners and who provide patient care, treatment, and services.

Sect. 11.7 Removal of Department Officer

Departmental officers may be removed from office upon the recommendation of a 2/3's vote of the Executive Committee after the Executive Committee has received a petition from 2/3's of the departmental members and following receipt of the report of a special ad hoc committee appointed by the Executive Committee to investigate the reasons for the department's petition.

Reasons for removal of a departmental chief of the medical staff may include, but are not limited to, the following: (a) conflict of interest as

defined by the Board policy regarding conflicts or as defined in these Bylaws; (b) disciplinary action by the medical staff and/or any other healthcare entity or regulatory body; (c) loss of medical staff membership or changes in staff status (i.e., leave of absence); or (d) inability to perform the duties of office.

Sect. 11.5 Functions of Departments – renumber section to 11.8

Section 11.6 Formation of New Departments – renumber section to 11.9

Section 11.7 Formation of Section – renumber to 11.10

Nothing in these bylaws prohibits the formation of specialty or subspecialty sections within a department, as long as it is expressly understood that such section will remain subsidiary to that department. ~~and rules and regulations of the department will continue to take precedence over the section's rules and regulations.~~ A section may be formed **when there are at least five active staff members who are Board Certified in the specialty.** ~~upon the department's decision, and must then be approved by the Executive Committee.~~ **New sections must be approved by the Department and the Executive Committee.**

Sect. 11.11 Qualifications, Selection, and Tenure of Section Chiefs

- A. **Each chief of a section shall be an active medical staff member, in good standing, who is best qualified for the position by his training, experience, and demonstrated ability.**

Section 11.12 Election of Section Chief

- A. **Prior to or in January, the Chief of the Section shall appoint a nominating committee of three active members of the department. The nominating committee shall propose a slate of nominees for the position of chief of the section.**
- B. **The slate of nominees will be presented to the section in February via mail. Nominations from the section will be accepted within the ensuing 30 days when submitted by at least 15% of the active members of the section. Thereafter, nominations will be closed.**

- C. **Elections will be held in April. The final slate of nominees will be sent to the section members via mail. The nominee who receives the highest number of votes will become section chief.**

Sect. 11.13 **Term of Office**

Section Chiefs shall take office on the first day of the medical staff year, May 1st, and shall serve a two-year term. Section Chiefs may serve additional terms if so elected.

Sect. 11.14 **Vacancies in Office**

In the event of a resignation or failure of a chief to serve his term, the section will elect a replacement.

Sect. 11.15 **Removal of Section Chief**

Section chiefs may be removed from office upon the recommendation of a 2/3's vote of the Department after the Section has received a petition from 2/3's of the section members and following receipt of the report of a special ad hoc committee appointed by the department to investigate the reasons for the section's petition.

APPROVAL:

Chief of Staff
Memorial Regional Hospital

Date

Chief of Staff
Joe DiMaggio Children's Hospital

Date

Chairman, Governing Board

Date