

# Royal Gazette

## Part II Regulations under the Regulations Act

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**Halifax, Nova Scotia**

**Vol. 31, No. 13**

**June 22, 2007**

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**In force date of regulations:** As of March 4, 2005\*, the date a regulation comes into force is determined by subsection 3(6) of the *Regulations Act*. The date a regulation is made, the date a regulation is approved, the date a regulation is filed and any date specified in a regulation are important to determine when the regulation is in force.

\*Date that subsections 3(6) and (7) and Sections 11 and 13 of the *Regulations Act* and amendments to the *Regulations Act* made by Chapter 46 of the Acts of 2004 were proclaimed in force.

**N.S. Reg. 290/2007**

Made: June 1, 2007

Filed: June 1, 2007

Prescribed Petroleum Products Prices

Order dated June 1, 2007

made by the Minister of Service Nova Scotia and Municipal Relations  
pursuant to Section 14 of the *Petroleum Products Pricing Act*

**In the Matter of Section 14 of Chapter 11 of the Acts of 2005  
the *Petroleum Products Pricing Act***

- and -

**In the Matter of Sections 14 to 18 of the *Petroleum Products Pricing Regulations*  
made by the Governor in Council  
pursuant to Section 14 of the *Petroleum Products Pricing Act***

- and -

**In the Matter of an Order Prescribing Prices for Petroleum Products  
made by the Minister of Service Nova Scotia and Municipal Relations  
pursuant to Section 14 of the *Petroleum Products Pricing Act* and  
Sections 14 to 18 of the *Petroleum Products Pricing Regulations***

**Order**

I, Jamie Muir, Minister of Service Nova Scotia and Municipal Relations for the Province of Nova Scotia, pursuant to Section 14 of Chapter 11 of the Acts of 2005, the *Petroleum Products Pricing Act*, and Sections 14 to 18 of the *Petroleum Products Pricing Regulations*, hereby

- (a) repeal the Order dated May 24, 2007, which prescribed prices for petroleum products in the Province effective on and after 12:01 a.m. on May 25, 2007; and
- (b) prescribe prices for petroleum products in the Province as set forth in the tables in Schedule "A".

This Order is effective on and after 12:01 a.m. on May 31, 2007.

Made at Halifax, in the Halifax Regional Municipality, Nova Scotia, on June 1, 2007.

Sgd.: *Jamie Muir*

Honourable Jamie Muir

Minister of Service Nova Scotia and Municipal Relations

**Schedule "A"**

**Prices Prescribed for Petroleum Products  
under the *Petroleum Products Pricing Act* and the  
*Petroleum Products Pricing Regulations*  
effective on and after 12:01 a.m. on June 1, 2007**

<b>Table 1: Benchmark Prices for Regulated Petroleum Products (cents/litre)</b>	
Regular unleaded gasoline	64.3

Mid-grade unleaded gasoline	67.3
Premium unleaded gasoline	70.3
Ultra low-sulfur diesel oil	58.1

<b>Table 2: Fixed Wholesale Prices, Retail Mark-ups and Retail Prices for Regulated Petroleum Products</b> (cents/litre)									
		<b>Retail Mark-up</b>				<b>Retail Price</b> (includes all taxes)			
		Self-Service		Full-Service		Self-Service		Full-Service	
	<b>Fixed Wholesale Price</b> (excludes GST)	Min	Max	Min	Max	Min	Max	Min	Max
<b>Zone 1</b>									
Regular Unleaded	96.1	4.0	5.5	4.0	999.9	114.1	115.8	114.1	999.9
Mid-Grade Unleaded	99.1	4.0	5.5	4.0	999.9	117.5	119.2	117.5	999.9
Premium Unleaded	102.1	4.0	5.5	4.0	999.9	121.0	122.7	121.0	999.9
Ultra Low-Sulfur Diesel	83.8	4.0	5.5	4.0	999.9	100.1	101.8	100.1	999.9
<b>Zone 2</b>									
Regular Unleaded	96.5	4.0	5.5	4.0	999.9	114.6	116.3	114.6	999.9
Mid-Grade Unleaded	99.5	4.0	5.5	4.0	999.9	118.0	119.7	118.0	999.9
Premium Unleaded	102.5	4.0	5.5	4.0	999.9	121.4	123.1	121.4	999.9
Ultra Low-Sulfur Diesel	84.2	4.0	5.5	4.0	999.9	100.5	102.3	100.5	999.9
<b>Zone 3</b>									
Regular Unleaded	97.0	4.0	5.5	4.0	999.9	115.1	116.9	115.1	999.9
Mid-Grade Unleaded	100.0	4.0	5.5	4.0	999.9	118.6	120.3	118.6	999.9
Premium Unleaded	103.0	4.0	5.5	4.0	999.9	122.0	123.7	122.0	999.9
Ultra Low-Sulfur Diesel	84.7	4.0	5.5	4.0	999.9	101.1	102.8	101.1	999.9
<b>Zone 4</b>									
Regular Unleaded	97.0	4.0	5.5	4.0	999.9	115.1	116.9	115.1	999.9
Mid-Grade Unleaded	100.0	4.0	5.5	4.0	999.9	118.6	120.3	118.6	999.9
Premium Unleaded	103.0	4.0	5.5	4.0	999.9	122.0	123.7	122.0	999.9
Ultra Low-Sulfur Diesel	84.7	4.0	5.5	4.0	999.9	101.1	102.8	101.1	999.9
<b>Zone 5</b>									
Regular Unleaded	97.0	4.0	5.5	4.0	999.9	115.1	116.9	115.1	999.9
Mid-Grade Unleaded	100.0	4.0	5.5	4.0	999.9	118.6	120.3	118.6	999.9
Premium Unleaded	103.0	4.0	5.5	4.0	999.9	122.0	123.7	122.0	999.9
Ultra Low-Sulfur Diesel	84.7	4.0	5.5	4.0	999.9	101.1	102.8	101.1	999.9
<b>Zone 6</b>									
Regular Unleaded	97.8	4.0	5.5	4.0	999.9	116.1	117.8	116.1	999.9
Mid-Grade Unleaded	100.8	4.0	5.5	4.0	999.9	119.5	121.2	119.5	999.9
Premium Unleaded	103.8	4.0	5.5	4.0	999.9	122.9	124.6	122.9	999.9
Ultra Low-Sulfur Diesel	85.5	4.0	5.5	4.0	999.9	102.0	103.7	102.0	999.9

**N.S. Reg. 291/2007**

Made: June 7, 2007

Filed: June 11, 2007

Proclamation, S. 12, S.N.S. 2007, c. 20

Order in Council 2007-315 dated June 7, 2007

Proclamation made by the Governor in Council

pursuant to Section 12 of

*An Act to Amend Chapter 293 of the Revised Statutes, 1989, the Motor Vehicle Act*

The Governor in Council on the report and recommendation of the Minister of Transportation and Public Works dated May 30, 2007, pursuant to Section 12 of Chapter 20 of the Acts of 2007, *An Act to Amend Chapter 293 of the Revised Statutes, 1989, the Motor Vehicle Act*, and subsection (7) of Section 3 of Chapter 235 of the Revised Statutes, 1989, the *Interpretation Act*, is pleased to order and declare by proclamation that Sections 8 and 9 of Chapter 20 of the Acts of 2007, *An Act to Amend Chapter 293 of the Revised Statutes, 1989, the Motor Vehicle Act*, do come into force on and not before June 7, 2007.

PROVINCE OF NOVA SCOTIA

**sgd: J. Michael MacDonald**

G/S

ELIZABETH THE SECOND, by the Grace of God,  
of the United Kingdom, Canada and Her Other  
Realms and Territories, Queen, Head of the  
Commonwealth, Defender of the Faith.

TO ALL TO WHOM THESE PRESENTS SHALL COME, OR WHOM THE SAME MAY IN ANY WISE  
CONCERN,

GREETING:

**A PROCLAMATION**

WHEREAS in and by Section 12 of Chapter 20 of the Acts of 2007, *An Act to Amend Chapter 293 of the Revised Statutes, 1989, the Motor Vehicle Act*, it is enacted as follows:

- 12** This Act comes into force on such day as the Governor in Council orders and declares by proclamation.

AND WHEREAS it is deemed expedient that Sections 8 and 9 of Chapter 20 of the Acts of 2007, *An Act to Amend Chapter 293 of the Revised Statutes, 1989, the Motor Vehicle Act*, do come into force on and not before June 7, 2007;

NOW KNOW YE THAT WE, by and with the advice of the Executive Council of Nova Scotia, do by this Our Proclamation order and declare that Sections 8 and 9 of Chapter 20 of the Acts of 2007, *An Act to Amend Chapter 293 of the Revised Statutes, 1989, the Motor Vehicle Act*, do come into force on and not before June 7, 2007, of which all persons concerned are to take notice and govern themselves accordingly.

IN TESTIMONY WHEREOF We have caused these  
our Letters to be made Patent and the  
Great Seal of Nova Scotia to be  
hereunto affixed.

WITNESS, Our Trusty and Well Beloved His Honour  
the Honourable J. Michael MacDonald,  
Administrator of the Government of the Province  
of Nova Scotia.

AT Our Law Courts in the Halifax Regional Municipality, this 7th day of June in the year of Our Lord two thousand and seven and in the fifty-sixth year of Our Reign.

BY COMMAND:

**sgd: Murray K. Scott**  
Provincial Secretary  
Minister of Justice and Attorney General

**N.S. Reg. 292/2007**

Made: June 7, 2007

Filed: June 11, 2007

Proclamation, S. 44, S.N.S. 2007, c. 9

Order in Council 2007-317 dated June 7, 2007  
Proclamation made by the Governor in Council  
pursuant to Section 44 of the  
*Financial Measures (2007) Act*

The Governor in Council on the report and recommendation of the Acting Minister of Finance dated May 23, 2007, pursuant to Section 44 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, and subsection (7) of Section 3 of Chapter 235 of the Revised Statutes, 1989, the *Interpretation Act*, is pleased to order and declare by proclamation that Sections 7, 10, 13 to 19, 22, 23, 25 to 27, 36, 37, 40 and 41 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, do come into force on and not before June 7, 2007, with Section 17, subsection (2) of Section 18, and Section 23 having effect on and after January 1, 2005, Sections 14 and 15 and subsection (1) of Section 18 having effect on and after January 1, 2006, Sections 7, 13 and 25 to 27 having effect on and after July 1, 2006, Sections 16 and 19 having effect on and after January 1, 2007, Section 37 having effect on and after March 24, 2007 and Sections 36 and 41 having effect on and after April 1, 2007.

PROVINCE OF NOVA SCOTIA

**sgd: J. Michael MacDonald**

G/S

ELIZABETH THE SECOND, by the Grace of God,  
of the United Kingdom, Canada and Her Other  
Realms and Territories, Queen, Head of the  
Commonwealth, Defender of the Faith.

TO ALL TO WHOM THESE PRESENTS SHALL COME, OR WHOM THE SAME MAY IN ANY WISE CONCERN,

GREETING:

**A PROCLAMATION**

WHEREAS in and by Section 44 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, it is enacted as follows:

- 44 (1)** This Act, except Sections 4 to 7, 13 to 19, 21, 23, 25 to 27, 29, 30, 33 to 37, 39, and 41 to 43, come into force on such day as the Governor in Council orders and declares by proclamation.

- (2) Section 17, subsection 18(2), and Section 23 have effect on and after January 1, 2005, upon the Governor in Council so ordering and declaring by proclamation.
- (3) Sections 14 and 15 and subsection 18(1) have effect on and after January 1, 2006, upon the Governor in Council so ordering and declaring by proclamation.
- (4) Sections 7, 13 and 25 to 27 have effect on and after July 1, 2006, upon the Governor in Council so ordering and declaring by proclamation.
- (5) Section 39 has effect on and after December 1, 2006, upon the Governor in Council so ordering and declaring by proclamation.
- (6) Sections 16, 19, 21 and 29 have effect on and after January 1, 2007, upon the Governor in Council so ordering and declaring by proclamation.
- (7) Sections 42 and 43 have effect on and after January 12, 2007, upon the Governor in Council so ordering and declaring by proclamation.
- (8) Section 37 has effect on and after March 24, 2007, upon the Governor in Council so ordering and declaring by proclamation.
- (9) Sections 4 to 6, 33 to 36 and 41 have effect on and after April 1, 2007, upon the Governor in Council so ordering and declaring by proclamation.
- (10) Section 30 has effect on and after June 1, 2007, upon the Governor in Council so ordering and declaring by proclamation.

AND WHEREAS it is deemed expedient that Sections 7, 10, 13 to 19, 22, 23, 25 to 27, 36, 37, 40 and 41 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, do come into force on and not before June 7, 2007, with Section 17, subsection (2) of Section 18, and Section 23 having effect on and after January 1, 2005, Sections 14 and 15 and subsection (1) of Section 18 having effect on and after January 1, 2006, Sections 7, 13 and 25 to 27 having effect on and after July 1, 2006, Sections 16 and 19 having effect on and after January 1, 2007, Section 37 having effect on and after March 24, 2007 and Sections 36 and 41 having effect on and after April 1, 2007;

NOW KNOW YE THAT WE, by and with the advice of the Executive Council of Nova Scotia, do by this Our Proclamation order and declare that Sections 7, 10, 13 to 19, 22, 23, 25 to 27, 36, 37, 40 and 41 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, do come into force on and not before June 7, 2007, with Section 17, subsection (2) of Section 18, and Section 23 having effect on and after January 1, 2005, Sections 14 and 15 and subsection (1) of Section 18 having effect on and after January 1, 2006, Sections 7, 13 and 25 to 27 having effect on and after July 1, 2006, Sections 16 and 19 having effect on and after January 1, 2007, Section 37 having effect on and after March 24, 2007 and Sections 36 and 41 having effect on and after April 1, 2007, of which all persons concerned are to take notice and govern themselves accordingly.

IN TESTIMONY WHEREOF We have caused these  
our Letters to be made Patent and the  
Great Seal of Nova Scotia to be  
hereunto affixed.

WITNESS, Our Trusty and Well Beloved His Honour  
the Honourable J. Michael MacDonald,  
Administrator of the Government of the Province  
of Nova Scotia.

AT Our Law Courts in the Halifax Regional  
Municipality, this 7th day of June in the year of  
Our Lord two thousand and seven and in the fifty-  
sixth year of Our Reign.

BY COMMAND:

**sgd: Murray K. Scott**  
Provincial Secretary  
Minister of Justice and Attorney General

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**N.S. Reg. 293/2007**

Made: June 7, 2007

Filed: June 11, 2007

Proclamation, S. 44(1), S.N.S. 2007, c. 9

Order in Council 2007-318 dated June 7, 2007  
Proclamation made by the Governor in Council  
pursuant to subsection 44(1) of the  
*Financial Measures (2007) Act*

The Governor in Council on the report and recommendation of the Minister of Service Nova Scotia and Municipal Relations dated May 29, 2007, pursuant to subsection (1) of Section 44 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, and subsection (7) of Section 3 of Chapter 235 of the Revised Statutes, 1989, the *Interpretation Act*, is pleased to order and declare by proclamation that Sections 31 and 32 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, do come into force on and not before June 15, 2007.

PROVINCE OF NOVA SCOTIA

**sgd: J. Michael MacDonald**

G/S

ELIZABETH THE SECOND, by the Grace of God,  
of the United Kingdom, Canada and Her Other  
Realms and Territories, Queen, Head of the  
Commonwealth, Defender of the Faith.

TO ALL TO WHOM THESE PRESENTS SHALL COME, OR WHOM THE SAME MAY IN ANY WISE  
CONCERN,

GREETING:

**A PROCLAMATION**

WHEREAS in and by subsection (1) of Section 44 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, it is enacted as follows:

- 44 (1)** This Act, except Sections 4 to 7, 13 to 19, 21, 23, 25 to 27, 29, 30, 33 to 37, 39 and 41 to 43, come into force on such day as the Governor in Council orders and declares by proclamation.



AND WHEREAS it is deemed expedient that Sections 31 and 32 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, do come into force on and not before June 15, 2007;

NOW KNOW YE THAT WE, by and with the advice of the Executive Council of Nova Scotia, do by this Our Proclamation order and declare that Sections 31 and 32 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, do come into force on and not before June 15, 2007, of which all persons concerned are to take notice and govern themselves accordingly.

IN TESTIMONY WHEREOF We have caused these  
our Letters to be made Patent and the  
Great Seal of Nova Scotia to be  
hereunto affixed.

WITNESS, Our Trusty and Well Beloved His Honour  
the Honourable J. Michael MacDonald,  
Administrator of the Government of the Province  
of Nova Scotia.

AT Our Law Courts in the Halifax Regional  
Municipality, this 7th day of June in the year of  
Our Lord two thousand and seven and in the fifty-  
sixth year of Our Reign.

BY COMMAND:

**sgd: Murray K. Scott**  
Provincial Secretary  
Minister of Justice and Attorney General

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**N.S. Reg. 294/2007**

Made: June 7, 2007

Filed: June 11, 2007

Child Maintenance Guidelines

Order in Council 2007-321 dated June 7, 2007  
Amendment to regulations made by the Governor in Council  
pursuant to Section 55 of the *Maintenance and Custody Act*

The Governor in Council on the report and recommendation of the Minister of Justice dated May 17, 2007, and pursuant to Section 55 of Chapter 160 of the Revised Statutes of Nova Scotia, 1989, the *Maintenance and Custody Act*, is pleased to amend the *Child Maintenance Guidelines*, N.S. Reg. 53/98, made by the Governor in Council by Order in Council 98-386 dated August 5, 1998, to ensure that they mirror recent amendments to the federal Child Support Guidelines, in the manner set forth in Schedule "A" attached to and forming part of the report and recommendation, effective on and after June 7, 2007.

## Schedule "A"

**Amendment to the *Child Maintenance Guidelines* made by the  
Governor in Council pursuant to Section 55 of Chapter 160  
of the Revised Statutes of Nova Scotia, 1989,  
the *Maintenance and Custody Act***

- 1 Subsection 2(1) of the *Child Maintenance Guidelines*, N.S. Reg. 53/98, made by the Governor in Council by Order in Council 1998-386 dated August 5, 1998, is amended by
    - (a) striking out the period at the end of clause (f) and substituting a semi-colon; and
    - (b) adding the following clause immediately after clause (f):
      - (g) "universal child care benefit" means a benefit provided under section 4 of the *Universal Child Care Benefit Act* (Canada).
  - 2 Subsection 7(3) of the Guidelines is repealed and the following subsections substituted:
    - (3) Subject to subsection (4), in determining the amount of an expense referred to in subsection (1), the court must take into account any subsidies, benefits or income tax deductions or credits relating to the expense, and any eligibility to claim a subsidy, benefit or income tax deduction or credit relating to the expense.
    - (4) In determining the amount of an expense referred to in subsection (1), the court shall not take into account any universal child care benefit or any eligibility to claim that benefit.
  - 3 Section 16 of the Guidelines is amended by striking out "Canada Customs and Revenue Agency" and substituting "Canada Revenue Agency".
- 

**N.S. Reg. 295/2007**

Made: June 7, 2007

Filed: June 11, 2007

Proclamation, S. 44(1), S.N.S. 2007, c. 9

Order in Council 2007-323 dated June 7, 2007  
Proclamation made by the Governor in Council  
pursuant to subsection 44(1) of the  
*Financial Measures (2007) Act*

The Governor in Council on the report and recommendation of the Minister of Justice dated May 16, 2007, pursuant to subsection (1) of Section 44 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, and subsection (7) of Section 3 of Chapter 235 of the Revised Statutes, 1989, the *Interpretation Act*, is pleased to order and declare by proclamation that Sections 8 and 9 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, do come into force on and not before June 15, 2007.

PROVINCE OF NOVA SCOTIA

sgd: **J. Michael MacDonald**

G/S

ELIZABETH THE SECOND, by the Grace of God,  
of the United Kingdom, Canada and Her Other  
Realms and Territories, Queen, Head of the  
Commonwealth, Defender of the Faith.

TO ALL TO WHOM THESE PRESENTS SHALL COME, OR WHOM THE SAME MAY IN ANY WISE  
CONCERN,

GREETING:

**A PROCLAMATION**

WHEREAS in and by subsection (1) of Section 44 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, it is enacted as follows:

- 44 (1)** This Act, except Sections 4 to 7, 13 to 19, 21, 23, 25 to 27, 29, 30, 33 to 37, 39 and 41 to 43, come into force on such day as the Governor in Council orders and declares by proclamation.

AND WHEREAS it is deemed expedient that Sections 8 and 9 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, do come into force on and not before June 15, 2007;

NOW KNOW YE THAT WE, by and with the advice of the Executive Council of Nova Scotia, do by this Our Proclamation order and declare that Sections 8 and 9 of Chapter 9 of the Acts of 2007, the *Financial Measures (2007) Act*, do come into force on and not before June 15, 2007, of which all persons concerned are to take notice and govern themselves accordingly.

IN TESTIMONY WHEREOF We have caused these  
our Letters to be made Patent and the  
Great Seal of Nova Scotia to be  
hereunto affixed.

WITNESS, Our Trusty and Well Beloved His Honour  
the Honourable J. Michael MacDonald,  
Administrator of the Government of the Province  
of Nova Scotia.

AT Our Law Courts in the Halifax Regional  
Municipality, this 7th day of June in the year of  
Our Lord two thousand and seven and in the fifty-  
sixth year of Our Reign.

BY COMMAND:

**sgd: Murray K. Scott**  
Provincial Secretary  
Minister of Justice and Attorney General

**N.S. Reg. 296/2007**

Made: May 30, 2007 and June 7, 2007

Filed: June 11, 2007

Summary Offence Tickets Regulations

Order in Council 2007-324 dated June 7, 2007

Amendment to regulations made by the Minister of Justice and the Governor in Council pursuant to Section 8 of the *Summary Proceedings Act*

The Governor in Council on the report and recommendation of the Minister of Justice and Attorney General dated May 30, 2007, and pursuant to Section 8 of Chapter 450 of the Revised Statutes of Nova Scotia 1989, the *Summary Proceedings Act*, is pleased to amend Schedule 4 of the *Summary Offence Tickets Regulations*, N.S. Reg. 4/2001, made by the Governor in Council by Order in Council 2001-21 dated January 18, 2001, to change the designation of an offence under Section 151 of the *Motor Vehicle Act* in the manner set forth in Schedule "A" attached to and forming part of the report and recommendation, effective on and after June 7, 2007

**Order**

I, Murray K. Scott, M.B., Minister of Justice and Attorney General of Nova Scotia, hereby order and direct pursuant to Section 8 of Chapter 450 of the Revised Statutes of Nova Scotia, 1989, the *Summary Proceedings Act*, that the penalty to be entered on a summons in respect of an offence set out in amendments to the Schedules to the *Summary Offence Tickets Regulations*, N.S. Reg. 4/2001 as set forth in Schedule "A", is the amount of the out-of-court settlement set out opposite the description of that offence, and the out-of-court settlement amount includes the charge provided for, and in accordance with, Sections 8 and 9 of the Act.

This Order is effective on and after the making by the Governor in Council of the amendments to the *Summary Offence Tickets Regulations* set out in Schedule "A".

**Dated and made** May 30, 2007, at Halifax, Halifax Regional Municipality, Province of Nova Scotia.

Sgd.: *Murray Scott*

Honourable Murray K. Scott, M.B.

Minister of Justice and Attorney General of Nova Scotia

**Schedule "A"**

**Amendment to the *Summary Offence Tickets Regulations*  
made by the Governor in Council pursuant to Section 8 of Chapter 450  
of the Revised Statutes of Nova Scotia, 1989, the *Summary Proceedings Act***

Schedule 4 - *Motor Vehicle Act* of the *Summary Offence Tickets Regulations*, N.S. Reg. 4/2001, made by the Governor in Council by Order in Council 2001-21 dated January 18, 2001, is amended by repealing item 249, and substituting the following item:

249	Failing to obey parking sign (specify)	151	A (parking)
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**N.S. Reg. 297/2007**

Made: June 7, 2007

Filed: June 11, 2007

Proclamation, S. 11, S.N.S. 2007, c. 7

Order in Council 2007-326 dated June 7, 2007  
Proclamation made by the Governor in Council  
pursuant to Section 11 of the  
*Environmental Goals and Sustainable Prosperity Act*

The Governor in Council on the report and recommendation of the Minister of Environment and Labour dated May 16, 2007, pursuant to Section 11 of Chapter 7 of the Acts of 2007, the *Environmental Goals and Sustainable Prosperity Act*, is pleased to order and declare by proclamation that Chapter 7 of the Acts of 2007, the *Environmental Goals and Sustainable Prosperity Act*, do come into force on and not before June 7, 2007.

PROVINCE OF NOVA SCOTIA

sgd: **J. Michael MacDonald**

G/S

ELIZABETH THE SECOND, by the Grace of God,  
of the United Kingdom, Canada and Her Other  
Realms and Territories, Queen, Head of the  
Commonwealth, Defender of the Faith.

TO ALL TO WHOM THESE PRESENTS SHALL COME, OR WHOM THE SAME MAY IN ANY WISE  
CONCERN,

GREETING:

**A PROCLAMATION**

WHEREAS in and by Section 11 of Chapter 7 of the Acts of 2007, the *Environmental Goals and Sustainable Prosperity Act*, it is enacted as follows:

- 11** This Act comes into force on such day as the Governor in Council orders and declares by proclamation.

AND WHEREAS it is deemed expedient that Chapter 7 of the Acts of 2007, the *Environmental Goals and Sustainable Prosperity Act*, do come into force on and not before June 7, 2007;

NOW KNOW YE THAT WE, by and with the advice of the Executive Council of Nova Scotia, do by this Our Proclamation order and declare that Chapter 7 of the Acts of 2007, the *Environmental Goals and Sustainable Prosperity Act*, do come into force on and not before June 7, 2007, of which all persons concerned are to take notice and govern themselves accordingly.

IN TESTIMONY WHEREOF We have caused these  
our Letters to be made Patent and the  
Great Seal of Nova Scotia to be  
hereunto affixed.

WITNESS, Our Trusty and Well Beloved His Honour  
the Honourable J. Michael MacDonald,  
Administrator of the Government of the Province  
of Nova Scotia.

AT Our Law Courts in the Halifax Regional Municipality, this 7th day of June in the year of Our Lord two thousand and seven and in the fifty-sixth year of Our Reign.

BY COMMAND:

**sgd: Murray K. Scott**  
Provincial Secretary  
Minister of Justice and Attorney General

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**N.S. Reg. 298/2007**

Made: June 7, 2007

Filed: June 11, 2007

Prescribed Petroleum Products Prices

Order dated June 7, 2007  
made by the Minister of Service Nova Scotia and Municipal Relations  
pursuant to Section 14 of the *Petroleum Products Pricing Act*

**In the Matter of Section 14 of Chapter 11 of the Acts of 2005  
the *Petroleum Products Pricing Act***

- and -

**In the Matter of Sections 14 to 18 of the *Petroleum Products Pricing Regulations*  
made by the Governor in Council  
pursuant to Section 14 of the *Petroleum Products Pricing Act***

- and -

**In the Matter of an Order Prescribing Prices for Petroleum Products  
made by the Minister of Service Nova Scotia and Municipal Relations  
pursuant to Section 14 of the *Petroleum Products Pricing Act* and  
Sections 14 to 18 of the *Petroleum Products Pricing Regulations***

**Order**

I, Jamie Muir, Minister of Service Nova Scotia and Municipal Relations for the Province of Nova Scotia, pursuant to Section 14 of Chapter 11 of the Acts of 2005, the *Petroleum Products Pricing Act*, and Sections 14 to 18 of the *Petroleum Products Pricing Regulations*, hereby

- (a) repeal the Order dated May 31, 2007, which prescribed prices for petroleum products in the Province effective on and after 12:01 a.m. on June 1, 2007; and
- (b) prescribe prices for petroleum products in the Province as set forth in the tables in Schedule "A".

This Order is effective on and after 12:01 a.m. on June 8, 2007.

Made at Halifax, in the Halifax Regional Municipality, Nova Scotia, on June 7, 2007.

Sgd.: *Angus MacIsaac*  
Honourable Jamie Muir  
Minister of Service Nova Scotia and Municipal Relations

## Schedule "A"

**Prices Prescribed for Petroleum Products  
under the *Petroleum Products Pricing Act* and the  
*Petroleum Products Pricing Regulations*  
effective on and after 12:01 a.m. on June 8, 2007**

<b>Table 1: Benchmark Prices for Regulated Petroleum Products</b> (cents/litre)	
Regular unleaded gasoline	62.1
Mid-grade unleaded gasoline	65.1
Premium unleaded gasoline	68.1
Ultra low-sulfur diesel oil	58.1

<b>Table 2: Fixed Wholesale Prices, Retail Mark-ups and Retail Prices for Regulated Petroleum Products</b> (cents/litre)									
		<b>Retail Mark-up</b>				<b>Retail Price</b> (includes all taxes)			
		Self-Service		Full-Service		Self-Service		Full-Service	
	<b>Fixed Wholesale Price</b> (excludes GST)	Min	Max	Min	Max	Min	Max	Min	Max
<b>Zone 1</b>									
Regular Unleaded	93.9	4.0	5.5	4.0	999.9	111.6	113.3	111.6	999.9
Mid-Grade Unleaded	96.9	4.0	5.5	4.0	999.9	115.0	116.7	115.0	999.9
Premium Unleaded	99.9	4.0	5.5	4.0	999.9	118.4	120.2	118.4	999.9
Ultra Low-Sulfur Diesel	83.8	4.0	5.5	4.0	999.9	100.1	101.8	100.1	999.9
<b>Zone 2</b>									
Regular Unleaded	94.3	4.0	5.5	4.0	999.9	112.1	113.8	112.1	999.9
Mid-Grade Unleaded	97.3	4.0	5.5	4.0	999.9	115.5	117.2	115.5	999.9
Premium Unleaded	100.3	4.0	5.5	4.0	999.9	118.9	120.6	118.9	999.9
Ultra Low-Sulfur Diesel	84.2	4.0	5.5	4.0	999.9	100.5	102.3	100.5	999.9
<b>Zone 3</b>									
Regular Unleaded	94.8	4.0	5.5	4.0	999.9	112.6	114.3	112.6	999.9
Mid-Grade Unleaded	97.8	4.0	5.5	4.0	999.9	116.1	117.8	116.1	999.9
Premium Unleaded	100.8	4.0	5.5	4.0	999.9	119.5	121.2	119.5	999.9
Ultra Low-Sulfur Diesel	84.7	4.0	5.5	4.0	999.9	101.1	102.8	101.1	999.9
<b>Zone 4</b>									
Regular Unleaded	94.8	4.0	5.5	4.0	999.9	112.6	114.3	112.6	999.9
Mid-Grade Unleaded	97.8	4.0	5.5	4.0	999.9	116.1	117.8	116.1	999.9
Premium Unleaded	100.8	4.0	5.5	4.0	999.9	119.5	121.2	119.5	999.9
Ultra Low-Sulfur Diesel	84.7	4.0	5.5	4.0	999.9	101.1	102.8	101.1	999.9

<b>Zone 5</b>									
Regular Unleaded	94.8	4.0	5.5	4.0	999.9	112.6	114.3	112.6	999.9
Mid-Grade Unleaded	97.8	4.0	5.5	4.0	999.9	116.1	117.8	116.1	999.9
Premium Unleaded	100.8	4.0	5.5	4.0	999.9	119.5	121.2	119.5	999.9
Ultra Low-Sulfur Diesel	84.7	4.0	5.5	4.0	999.9	101.1	102.8	101.1	999.9
<b>Zone 6</b>									
Regular Unleaded	95.6	4.0	5.5	4.0	999.9	113.5	115.3	113.5	999.9
Mid-Grade Unleaded	98.6	4.0	5.5	4.0	999.9	117.0	118.7	117.0	999.9
Premium Unleaded	101.6	4.0	5.5	4.0	999.9	120.4	122.1	120.4	999.9
Ultra Low-Sulfur Diesel	85.5	4.0	5.5	4.0	999.9	102.0	103.7	102.0	999.9

**N.S. Reg. 299/2007 to 300/2007**

Made: March 28, 2007

Filed: June 12, 2007

Medical, Dental and Scientific Staff (Credentialing/Disciplinary) Bylaws

Order dated March 28, 2007  
made and approved by the Minister of Health  
pursuant to Section 23 of the *Health Authorities Act*  
and Section 6 of the *Hospitals Act*

**Certificate of Approval**  
**Medical, Dental and Scientific Staff Bylaws (General) and**  
**Medical, Dental and Scientific Staff Bylaws (Credentialing and Disciplinary)**  
**For the IWK Health Centre**

**Pursuant to Section 6 of the *Hospitals Act***  
**and Section 23 of the *Health Authorities Act***

I, the Honourable Chris d'Entremont, hereby approve the IWK Health Centre's Medical, Dental and Scientific Staff Bylaws (General) and the Medical, Dental and Scientific Staff Bylaws (Credentialing/Disciplinary), dated October 25, 2006, pursuant to the *Hospitals Act* and the *Health Authorities Act*, and such bylaws shall be effective from March 27, 2007 to September 30, 2007.

Dated at Halifax, Nova Scotia, this 28th day of March, 2007.

Sgd.: *Chris d'Entremont*

Honourable Chris d'Entremont

**N.S. Reg. 299/2007**

Medical, Dental and Scientific Staff Bylaws (Credentialing and Disciplinary)

**IWK Health Centre Medical, Dental and Scientific Staff**  
**Credentialing and Disciplinary Bylaws**

**Part I: Definitions****1 Definitions****1.1** In these Bylaws,

- 1.1.1 "Applicant" means a person seeking appointment or reappointment to the IWK Health Centre Medical, Dental and Scientific Staff and includes a person applying for a temporary appointment.



- 1.1.2 “Application Form” means the appropriate application form to be completed by an Applicant to the MDSS, as determined by the CEO.
- 1.1.3 “Article” means a section or subsection of these Bylaws, as the context requires.
- 1.1.4 “Board” means the Board of Directors of the IWK Health Centre.
- 1.1.5 “Bylaws” means
- 1.1.5.1 these IWK Health Centre Medical, Dental and Scientific Staff Bylaws (Credentialing/Disciplinary) when the phrase “these Bylaws” is used, or
  - 1.1.5.2 the IWK Health Centre Medical, Dental and Scientific Staff Bylaws (Credentialing/Disciplinary); the IWK Health Centre Medical, Dental and Scientific Staff Bylaws (General); and the IWK Health Centre Corporate Bylaws when the phrase “all Bylaws” is used.
- 1.1.6 “Chief Executive Officer” abbreviated as CEO means the person appointed by the Board to be the President and Chief Executive Officer of the IWK Health Centre who is responsible for the administration and management of the IWK Health Centre.
- 1.1.7 “Child Abuse Register Inquiry” means an inquiry pursuant to the Nova Scotia Child Abuse Register, or equivalent registers in other jurisdictions in which an applicant has resided or practised, which provides information respecting allegations or findings of child abuse against an applicant.
- 1.1.8 “Credentials Committee” means the committee of the MAC acting as the Credentials Committee for the purposes of these Bylaws, comprised of the membership set out in Article 2.
- 1.1.9 “Credentials Process” means the process outlined in these Bylaws where an Applicant seeks appointment to the MDSS, and the grant of privileges and, without limiting the generality of the foregoing, includes those processes outlined in Parts III and IV of these Bylaws.
- 1.1.10 “Criminal Record Inquiry” means an inquiry to local police authorities, or to police authorities in locations where an applicant has resided or practised, to determine whether the applicant is or has been convicted of any criminal offenses for which a pardon has not been granted.
- 1.1.11 “Day” means one business day; that is, Monday to Friday, excluding statutory holidays.
- 1.1.12 “*Dental Act*” means the *Dental Act*, S.N.S. 1992, c. 3, s. 4.
- 1.1.13 “Dentist” means a dentist who, under the *Dental Act*, is registered in the Dentists’ Register and holds a licence to practice dentistry.
- 1.1.14 “Department Chief” means the physician, dentist, or scientist appointed by the Board to be the leader of an IWK Health Centre Department and who reports to the Board through the CEO.
- 1.1.15 “Discipline Process” means the processes outlined in Part V of these Bylaws. For greater certainty, an automatic suspension issued pursuant to Article 20 is not a discipline process.
- 1.1.16 “Health Centre” means the Izaak Walton Killam Health Centre established pursuant to the *Izaak Walton Killam Health Centre Act*, ~~S.N.S. 2001, c. 49, s. 2~~ [S.N.S. 1996, c. 26].

- 1.1.17 “Health Centre Representative” means the CEO or a person appointed by the CEO to act as the representative of the Health Centre for purposes of a Mediation Process or Discipline Process.
- 1.1.18 “Hearing Committee” means the committee of the MAC acting as the Hearing Committee for the purposes of these Bylaws, comprised of the membership set out in Article 3.
- 1.1.19 “MDSS Rules and Regulations” means rules and regulations made by the Medical, Dental and Scientific Staff Organization with respect to the governance and internal operations of the MDSS Organization.
- 1.1.20 “Mediated Resolution” means a unanimous agreement signed pursuant to Article 15.6.
- 1.1.21 “Mediation Process” means the process outlined in Article 15.
- 1.1.22 “*Medical Act*” means the *Medical Act*, S.N.S. 1995-96, c. 10, ~~s. 4~~.
- 1.1.23 “Medical Advisory Committee” means the Committee abbreviated as MAC established by the Board to act as the MAC for the purposes of these Bylaws, comprised of the membership set out in Article 4.
- 1.1.24 “Medical, Dental and Scientific Staff” abbreviated as MDSS means those physicians, dentists, and scientists who are licenced under the *Medical Act* and *Dental Act*, if applicable, and have privileges or who are otherwise permitted to practice within the Health Centre as more particularly set out in these Bylaws, the Bylaws (General) and the MDSS Rules and Regulations.
- 1.1.25 “Medical, Dental and Scientific Staff Executive” abbreviated as MDSS Executive means the Executive of the Medical, Dental and Scientific Staff Organization, elected in accordance with the MDSS Rules and Regulations.
- 1.1.26 “Medical, Dental and Scientific Staff Organization” means the entity established pursuant to the Bylaws (General) to represent the Medical, Dental and Scientific Staff.
- 1.1.27 “Member” means a member of the Medical, Dental and Scientific Staff.
- 1.1.28 “Party” means
- 1.1.28.1 the Health Centre representative;
  - 1.1.28.2 the Member who is the subject of consideration in any process pursuant to these Bylaws; and
  - 1.1.28.3 any other person identified as a party pursuant to these Bylaws.
- 1.1.29 “Physician” means a person who, under the *Medical Act*, is registered and holds a licence to practice medicine.
- 1.1.30 “Privileges Review Committee” abbreviated as “PRC” means the Committee comprised of members of the Board as defined in Article 5.
- 1.1.31 “Provincial Appeal Board” abbreviated as “PAB” means the board constituted pursuant to s. 23(b) of the *Health Authorities Act*, S.N.S. 2000, c. 6, ~~s. 4~~ that carries out those functions assigned to it by these Bylaws.

- 1.1.32 “Rules and Regulations” means any Rules and Regulations approved by the Board pursuant to the Bylaws, and includes MDSS Rules and Regulations approved by the MDSS Executive unless the context otherwise requires.
- 1.1.33 “Scientist” means an individual who has been appointed as a scientist to the Medical, Dental and Scientific Staff of the Health Centre.
- 1.1.34 “Variance” means any change from the appointment or privileges requested by an Applicant.
- 1.1.35 “VP Medicine” means the Vice-President, Medicine.

## Part II: Committees

### 2 Credentials Committee

2.1 The Credentials Committee is a committee of the MAC and consists of:

- 2.1.1 the VP Medicine, who will serve as Chair (or his/her delegate);
- 2.1.2 a member of MDSS Executive, appointed by the MDSS Executive; and
- 2.1.3 three members of the MDSS, who shall not be Chiefs, appointed by the MDSS Executive.

2.2 A quorum of the Credentials Committee consists of three individuals, one of whom must be the VP Medicine or his/her delegate.

2.3 The Credentials Committee shall:

- 2.3.1 undertake detailed investigation and analysis of applications for appointments, privileges, and applications for reappointment;
- 2.3.2 review Mediated Resolutions arising out of the Mediation Process, where required pursuant to these Bylaws; and
- 2.3.3 perform such other functions as set out in these Bylaws.

2.4 The chair of the Credentials Committee is a voting member of the Credentials Committee, and shall cast an additional vote in the event of a tie among the remaining members of the Credentials Committee.

2.5 The MAC retains the authority at any time to appoint or replace new members of the Credentials Committee where no quorum is available, where a conflict of interest may exist, or for any other reason where a member of the Credentials Committee is not available to act. In the absence of appointments by the MDSS Executive for replacement members of the Credentials Committee, the MAC may appoint any member of the MDSS to replace a member of the Credentials Committee appointed pursuant to Article 2.1.

### 3 Hearing Committee

3.1 The Hearing Committee is a committee of the MAC and consists of:

- 3.1.1 one member of the MAC appointed by the MAC, who is not the Chair of the MAC or the VP Medicine, and who shall act as Chair of the Hearing Committee;

- 3.1.2 two other members of the MAC, appointed by the MAC, none of whom is the chair of the MAC or the VP Medicine; and
- 3.1.3 three members of the MDSS nominated by the MDSS Executive.
- 3.2** A quorum of the Hearing Committee consists of five individuals.
- 3.3** The Hearing Committee shall act as an independent adjudicative body during the Hearing Process, in accordance with Articles 16 and 17.
- 3.4** Members of the Hearing Committee shall excuse themselves from any discussions at the MAC regarding the credentialing or discipline of individuals who may become a party before the Hearing Committee.
- 3.5** A member of the Hearing Committee shall not serve concurrently on the Credentials Committee.
- 3.6** In a proceeding before the Hearing Committee, the Hearing Committee may retain independent legal counsel.
- 3.7** The chair of the Hearing Committee is a voting member of the Hearing Committee, and shall cast an additional vote in the event of a tie among the remaining members of the Hearing Committee.
- 3.8** The MAC retains the authority to appoint or replace new members of the Hearing Committee where no quorum is available, where a conflict of interest may exist, or for any other reason where a member of the Hearing Committee is not available to act. Replacement members of the Hearing Committee need not be members of MAC, but may be appointed by the MAC from any members of the MDSS.
- 4 Medical Advisory Committee**
- 4.1** The Medical Advisory Committee is the senior medical committee appointed by and accountable to the Board and consists of:
- 4.1.1 the VP Medicine;
- 4.1.2 the VP Research;
- 4.1.3 the President, MDSS;
- 4.1.4 the Vice-President, MDSS;
- 4.1.5 the Department Chiefs;
- 4.1.6 the CEO, who shall be a non-voting member of the MAC; and
- 4.1.7 such other persons as determined by resolution of the Board.
- 4.2** A quorum of the MAC shall consist of 50 per cent of the MAC members.
- 4.3** The members of the MAC shall elect the Chair, who shall hold a position of Chair for a two year term. The incumbent Chair can offer for re-election for two additional two year terms, with six years being the maximum time for any one person to occupy the position of Chair.
- 4.4** The nomination process for the Chair of the MAC and the process for election of the Chair shall be set out in the Rules and Regulations pursuant to these Bylaws.

**4.5** The MAC shall:

- 4.5.1 perform those functions assigned to it by the Medical Advisory Committee Terms of Reference, as approved by the Board; and
- 4.5.2 perform such other functions as set out in these Bylaws.

**5 Privileges Review Committee****5.1** The Privileges Review Committee is a committee of three members of the Board, appointed by the Board.

The PRC shall act in the place of the Board and shall be the Board's final decision-making authority with respect to the Credentials Process and the Discipline Process, as authorized by s. 9 of the *Izaak Walton Killam Health Centre Act*, S.N.S. 2001, c. 49 [S.N.S. 1996, c. 26].

**5.2** Without limiting the generality of the foregoing, the PRC shall:

- 5.2.1 make decisions regarding applications for credentialing;
- 5.2.2 review all Mediated Resolutions and Hearing Committee decisions referred to it pursuant to these Bylaws;
- 5.2.3 make decisions on appeals from Hearing Committee decisions;
- 5.2.4 forward its decisions to the chair of the Board and the CEO for information; and
- 5.2.5 perform such other functions as set out in these Bylaws.

**5.3** The chair of the Privileges Review Committee shall be appointed by the Board, and shall be a voting member of the Privileges Review Committee.**5.4** A quorum of the Privileges Review Committee is three members of the Board.**5.5** The Board retains the authority at any time to appoint or replace members of the PRC where no quorum is available, where a conflict of interest may exist, or for any other reason where a member of the PRC is not available to act.**Part III: Appointments & Privileges – General****6 Appointment of Medical, Dental and Scientific Staff – General****6.1** The Board may appoint physicians, dentists, and scientists in its sole and absolute discretion to the Medical, Dental and Scientific Staff in the manner provided for in these Bylaws.**6.2** All appointments to the MDSS shall be conditional on the physician, dentist, or scientist agreeing in writing to abide by:

- 6.2.1 all IWK Health Centre Bylaws, policies, and procedures;
- 6.2.2 the Rules and Regulations;
- 6.2.3 the limits of the appointment and privileges as specified in these Bylaws and granted to the Member; and

- 6.2.4 the Code of Ethics of the Canadian Medical Association (for physicians), the Canadian Dental Association (for dentists), or such codes of ethics as exist and pertain to their field (for scientists).

## **7 Privileges – General**

- 7.1** A physician, dentist, or scientist who is appointed to the MDSS shall be granted privileges appropriate to his/her role and practice, as determined by the processes established pursuant to these Bylaws. When privileges are granted pursuant to these Bylaws, the decision granting such privileges shall specify the extent and limitation of the privileges, including the category of appointment pursuant to Article 8 and the departments in which the applicant may exercise privileges.
- 7.2** All privileges granted to members of the MDSS in accordance with these Bylaws shall be for a period of 36 months. In the case of members of the MDSS who have privileges in effect at the time these Bylaws are approved, the privileges granted to such members remain in effect until the expiration date of such privileges.
- 7.3** Notwithstanding Article 7.2, privileges granted to a member shall be for a term less than thirty-six (36) months, where:
- 7.3.1 specified in a decision made pursuant to these Bylaws;
- 7.3.2 granted as part of a temporary appointment pursuant to Article 12; or
- 7.3.3 an employment contract or another contractual relationship with a Member states otherwise.
- 7.4** Members shall annually, on a date specified by the CEO, provide evidence as required by the CEO of:
- 7.4.1 appropriate insurance or coverage through a protective association;
- 7.4.2 registration and current licensing with the relevant regulatory body; and
- 7.4.3 such other items as may be required by the CEO.
- 7.5** A Member of the Medical, Dental and Scientific Staff may request a change in privileges or category if the member submits a request in writing to the CEO.
- 7.6** Upon receipt of a request for a change in privileges or category pursuant to Article 7.5, the CEO shall forward the request to the VP Medicine and relevant Department Chief, and the matter shall be processed as if it were an application from the member to the CEO for reappointment pursuant to Article 11.
- 7.7** If a Member's privileges expire prior to completion of the Credentials Process outlined in these Bylaws, such privileges shall be continued until the Credentials Process is completed, unless such privileges are suspended or varied pursuant to Articles 13, 14, or 20.

## **8 Categories of Appointments**

- 8.1** The categories of appointment within the IWK Health Centre Medical, Dental and Scientific Staff shall be:
- 8.1.1 Active Staff;
- 8.1.2 Consulting Staff;
- 8.1.3 Courtesy Staff;

- 8.1.4 Clinical and Research Trainees;
- 8.1.5 Clinical Associate Staff;
- 8.1.6 Scientific Staff;
- 8.1.7 Honorary Staff;
- 8.1.8 Locum Tenens; and
- 8.1.9 Visiting Consultant.

**8.2 Active Staff:**

- 8.2.1 The Active Staff consists of those physicians and dentists who are appointed in accordance with these Bylaws and the University-Health Centre Affiliation Agreement and have appointments in either the Faculty of Medicine or the Faculty of Dentistry at the University.
- 8.2.2 Unless otherwise recommended by the Chief of the appropriate Department of the IWK Health Centre and approved by the Credentials Committee, Members of the Active Medical and Dental Staff shall be primarily based at the IWK Health Centre.
- 8.2.3 Physicians who are Members of the Active Staff are eligible to be granted IWK Health Centre privileges, including regular attendance to patients, and have attending privileges as delineated in the terms of their appointment.
- 8.2.4 Dentists who are Members of Active Staff are eligible to be granted IWK Health Centre privileges, including regular attendance to patients, as delineated in the terms of their appointment.

**8.3 Consulting Staff:**

- 8.3.1 The Consulting Staff consists of those physicians and dentists who are appointed in accordance with these Bylaws and the University-Health Centre Affiliation Agreement, and have appointments in either the Faculty of Medicine or Faculty of Dentistry at the University.
- 8.3.2 Unless otherwise recommended by the Chief of the appropriate Department of the IWK Health Centre and approved by the Credentials Committee, the Consulting Staff shall consist of those physicians and dentists who are primarily based at another health care facility whose consultation and advice may be required from time to time at the IWK Health Centre.
- 8.3.3 Physicians who are Members of the Consulting Staff are eligible to be granted IWK Health Centre privileges and have attending privileges as delineated in the terms of their appointments. Consulting Staff shall respond to requests for consultations in a timely manner.
- 8.3.4 Dentists who are Members of the Consulting Staff are eligible to be granted IWK Health Centre privileges as delineated in the terms of their appointments. They shall not admit patients to inpatient units of the IWK Health Centre. Consulting Staff shall respond to requests for consultations in a timely manner.

**8.4 Courtesy Staff:**

- 8.4.1 The Courtesy Staff consists of those physicians and dentists who are appointed in accordance with these Bylaws. Unless otherwise recommended by the Chief of the appropriate Department of the IWK Health Centre and approved by the Credentials Committee, Members of the Courtesy Staff may hold a University appointment.

- 8.4.2 Physicians who are Members of the Courtesy Staff are eligible to be granted IWK Health Centre privileges and have attending privileges as delineated in the terms of their appointments.
- 8.4.3 Dentists who are Members of the Courtesy Staff are eligible to be granted IWK Health Centre privileges as delineated in the terms of their appointments. They shall not admit patients to inpatient units of the IWK Health Centre.
- 8.5 Clinical and Research Trainee Staff:**
- 8.5.1 The Clinical and Research Trainees consist of those physicians, dentists and scientists who do not qualify for appointment in another staff category and who are appointed in accordance with these Bylaws for a specified period up to one (1) year which may be renewed annually.
- 8.5.2 Clinical and Research Trainees shall only be appointed after appropriate consultation with the University.
- 8.5.3 Clinical and Research Trainees shall be physicians, dentists or scientists who do not have Postgraduate or Faculty appointments at the University Faculty of Medicine or Faculty of Dentistry and who are employed by the IWK Health Centre or who have sought access to the IWK Health Centre to pursue specific limited term learning objectives at the IWK Health Centre, such as mandatory re-training or additional training not provided through the University Post-Graduate Education programs.
- 8.5.4 Clinical and Research Trainees are eligible to be granted IWK Health Centre privileges which shall be delineated in the terms of their appointment. They shall serve only under the supervision of Members of the Active Staff.
- 8.6 Clinical Associate Staff:**
- 8.6.1 The Clinical Associate Staff consists of those physicians and dentists who are appointed in accordance with these Bylaws. Members of the Clinical Associate Staff shall not hold a University appointment in the Faculty of Medicine or Dentistry.
- 8.6.2 Members of the Clinical Associate Staff shall be appointed to work under the supervision of Members of the Active Staff to carry out specified tasks or specialist services in the IWK Health Centre.
- 8.7 Scientific Staff:**
- 8.7.1 The Scientific Staff consists of those persons appointed in accordance with these Bylaws who perform clinical and/or research functions at the IWK Health Centre, who are not practicing physicians or dentists, and who possess at least a MD, DDS, PhD or equivalent degree in a discipline or disciplines which may provide special expertise to the IWK Health Centre and who hold an appointment in at least one of such disciplines with the University and who, on appointment, shall be assigned to an appropriate Department defined in the Rules and Regulations.
- 8.7.2 Members of the Scientific Staff are eligible to be granted such IWK Health Centre privileges as delineated in the terms of their appointment, or, if Scientific Staff Members' privileges are not so delineated, then such privileges as are delineated pursuant to the appointment procedure stipulated in the Bylaws and in the Rules and Regulations.
- 8.7.3 Members of the Scientific Staff are not eligible to admit patients to the inpatient units of the IWK Health Centre.
- 8.7.4 Members of the Scientific Staff shall not ordinarily be employees of the IWK Health Centre.



**8.8 Honorary Staff:**

8.8.1 Honorary Staff may be appointed by the Board on the recommendation of the Executive Committee.

8.8.2 Honorary Staff Members are those persons who have retired from active service with the IWK Health Centre and have made a significant contribution to the IWK Health Centre during the period in which they were active or are Members of outstanding reputation or extraordinary accomplishment, who have demonstrated a strong interest in children's or women's health care.

8.8.3 Honorary Staff Members shall not have regularly assigned duties or responsibilities and shall not attend patients.

**8.9 Locum Tenens:**

8.9.1 The Locum Tenens Staff consists of those physicians or dentists appointed in accordance with these Bylaws and the University-Health Centre Affiliation Agreement to be granted privileges for periods not less than 30 days and not to exceed twelve (12) months in order that they may relieve Members of the Medical, Dental and Scientific Staff who may be on vacation or other such extended leave of absence.

8.9.2 Locum Tenens Staff shall be required to follow the same processes for obtaining privileges as any other potential Member of the Medical, Dental and Scientific Staff, and their credentials shall be reviewed following the processes outlined in these Bylaws.

8.9.3 Locum Tenens Staff shall be entitled to admit and treat patients according to the privileges granted and will be required to substitute for the absent practitioner in any of the practitioner's regularly scheduled on-call duties.

**8.10 Visiting Consulting Staff:**

8.10.1 Visiting Consulting Staff shall consist of physicians, dentists and scientists who are on the Active Staff of a health centre outside the Capital Health District Authority and who are appointed, after consultation with the applicable Department Chief, by the Board because of special knowledge, skills and experience and who may be consulted by Members of the Active or Courtesy Staff.

8.10.2 Visiting Consulting Staff may be granted privileges solely to examine and recommend/treat patients in clinics or on the inpatient units after receiving a referral from a Member of the Active or Courtesy Staff.

**9 Emergency Privileges**

9.1 Emergency privileges are deemed to exist when a Member of the Medical, Dental and Scientific Staff believes the life of a patient is in immediate danger, and a Member anticipates that delay in administering treatment will increase the danger. The Member shall assess and assist the patient and the privileges of that Member shall be deemed to encompass the giving of such assistance. Any Member of the Medical, Dental and Scientific Staff responsible for the care of such patient may obtain consultation from any physician reasonably deemed appropriate and such consulting physicians shall have emergency privileges restricted to the treatment of such patient during an emergency situation. The Member shall notify the Chief of the appropriate Department that such emergency action has been taken.

**Part IV: Credentialing Processes****10 Applications for New Appointments**

10.1 The CEO or the CEO's designate, on receipt of an inquiry from a physician, dentist, or scientist seeking appointment to the MDSS, shall, following consultation with the relevant department chief and the VP

Medicine assess the inquiry from the perspective of need and availability of resources, not from the perspective of the individual merit of the Applicant.

- 10.2** Upon completion of the assessment pursuant to Article 10.1, the CEO or the CEO's designate shall advise the Applicant of the result of the assessment, and if the result of the assessment is negative, the application process shall end. This is a final decision by the CEO or the CEO's designate, from which there is no right of review or appeal by the Applicant.
- 10.3** If the result of the assessment pursuant to Article 10.1 is positive, the CEO or the CEO's designate shall provide the Applicant with a copy of an application form, a copy of all Bylaws, and copy of the Rules and Regulations.
- 10.4** Upon completion of the application form, the Applicant shall submit the form and supply to the CEO or the CEO's designate such documentary proof as required by the CEO including:
- 10.4.1 registration with the College of Physicians and Surgeons of Nova Scotia in accordance with the *Medical Act* or registration in the Provincial Dental Board's Dentists' Register in accordance with the *Dental Act*, as applicable,
  - 10.4.2 in the case of a physician, membership in the Canadian Medical Protective Association or other equivalent malpractice insurance and in the case of a dentist, such malpractice insurance as required pursuant to the regulations under the *Dental Act*; and
  - 10.4.3 the results of a Child Abuse Register Inquiry and the results of a Criminal Record Inquiry; and
  - 10.4.4 such other information or evidence as required by the CEO or the CEO's designate.
- 10.5** The CEO or designate shall, within five days of the receipt of a completed application form with the required accompanying documentation, forward the application to the Office of the VP Medicine to administer and coordinate the Credentials Process.
- 10.6** The VP Medicine, upon receipt of the material pursuant to Article 10.5 shall forward the material to the Credentials Committee within 5 days. The Credentials Committee, upon receipt of the material pursuant to Article 10.5, shall consider the application by:
- 10.6.1 consulting with the appropriate Department Chief (and/or the Vice-President of Research for Scientists) to assess the application on its merit;
  - 10.6.2 verifying the accuracy of information provided by the Applicant;
  - 10.6.3 conducting such other inquiries as it deems appropriate;
  - 10.6.4 interviewing such persons as it deems appropriate; and
  - 10.6.5 engaging in any other form of investigation it deems necessary.
- 10.7** Upon completion of its review, the Credentials Committee, within 45 days of receiving the application from the VP Medicine, shall:
- 10.7.1 recommend to the MAC an appointment and specific privileges for the Applicant;
  - 10.7.2 recommend to the MAC a rejection of the application; or

10.7.3 recommend a variance, which shall be reviewed with the Applicant, and the recommendation and the Applicant's response to the recommendation shall be provided to the MAC;

and shall inform the appropriate Department Chief of its recommendation.

**10.8** Upon receipt of the recommendation from the Credentials Committee, the MAC shall review the Credentials Committee's recommendations and shall, within 25 days of receipt of the application from the Credentials Committee:

10.8.1 accept the Credentials Committee's recommendations;

10.8.2 reject the Credentials Committee's recommendations; or

10.8.3 suggest a variance to the Credentials Committee's recommendations;

and shall inform the appropriate Department Chief of its disposition.

**10.9** Where a variance is recommended by the MAC, the MAC shall review the suggested variance with the Applicant, and determine the Applicant's position on the variance.

**10.10** The Chair of the MAC shall forward its recommendations to the PRC, including the Applicant's position on any suggested variance, within 5 days of making its recommendation pursuant to Article 10.8.

**10.11** The PRC shall review all recommendations from the Credentials Committee and MAC.

**10.12** If the PRC determines it does not have sufficient information to make a final decision on the application, the PRC may conduct any further investigation it deems necessary.

**10.13** The PRC shall make the final decision on the application within 20 days of receipt of the MAC's recommendations, unless further time is needed, as determined by the PRC, to complete its review.

**10.14** The PRC Chair shall immediately forward the PRC's written decision to the Board, the CEO and the appropriate Department Chief for information.

**10.15** After the PRC Chair has informed the Board, the CEO and the appropriate Department Chief of its decision, the CEO or designate shall inform the Applicant of the decision.

**10.16** The decision of the PRC pursuant to Article 10.13 shall be a final decision, and there shall be no right of review or appeal by the Applicant arising from any decision pursuant to this article to the Board, the Provincial Appeal Board, or to any other person, committee or any other entity.

## **11 Applications for Reappointment**

**11.1** The CEO shall forward an application form for reappointment to a Member at least 100 days before the completion of the Member's current term of appointment.

**11.2** If the Member desires reappointment, the Member shall forward the completed reappointment application at least 80 days before the completion of his/her current term of appointment to the CEO or his/her designate.

**11.3** The CEO shall immediately forward the application to the VP Medicine, whose office shall administer the reappointment process.

- 11.4** The VP Medicine shall, within five days of receipt of the application, forward the application and all accompanying documentation to the Applicant's Department Chief (and the Vice-President of Research if it is a reappointment to the Scientific Staff).
- 11.5** The Department Chief (and the Vice-President of Research if it is a reappointment to the Scientific Staff) shall assess the application and shall:
- 11.5.1 recommend the appointment, and forward such recommendation to the Credentials Committee within 25 days of receiving the application from the VP Medicine;
  - 11.5.2 recommend a variance which is acceptable to the Applicant, in which event the accepted recommendation is forwarded to the Credentials Committee within 25 days of receiving the application from the VP Medicine; or
  - 11.5.3 not recommend the reappointment, or suggest a variance that is not acceptable to the Applicant, in which case the matter shall be referred within 25 days of receiving the application from the VP Medicine to the CEO in order to commence the Mediation Process in accordance with Article 15.
- 11.6** Where a recommendation is made in accordance with Articles 11.5.1 or 11.5.2, or where a Mediated Resolution is reached pursuant to Article 15, the recommendation or Mediated Resolution shall be reviewed by the Credentials Committee.
- 11.7** In its review pursuant to Article 11.6, the Credentials Committee shall consider the matter by:
- 11.7.1 consulting with the CEO and the appropriate Department Chief (and/or the Vice-President of Research for Scientists);
  - 11.7.2 verifying the accuracy of information provided by the Applicant;
  - 11.7.3 conducting such other inquiries as it deems appropriate;
  - 11.7.4 interviewing such persons as it deems appropriate; and
  - 11.7.5 engaging in any other form of investigation it deems necessary.
- 11.8** The Credentials Committee, upon completion of its review shall:
- 11.8.1 approve the Mediated Resolution or recommendation forwarded pursuant to Article 11.5.1 or 11.5.2;
  - 11.8.2 recommend a variance to the recommendation pursuant to Article 11.5.1 or 11.5.2 which is acceptable to the Applicant, or recommend a variance to the Mediated Resolution which is acceptable to the signatories to the Mediated Resolution;
  - 11.8.3 reject the Mediated Resolution or suggest a variance to the Mediated Resolution that is not acceptable to the signatories of the Mediated Resolution; or
  - 11.8.4 reject the recommendation made pursuant to Article 11.5.1 or 11.5.2, or suggest a variance that is not acceptable to the Applicant; and
- and inform the Department Chief of its decision.

- 11.9** If the Credentials Committee makes a decision pursuant to Article 11.8.1 or 11.8.2, the decision shall be forwarded to the MAC within 45 days of the Credentials Committee's receipt of the matter.
- 11.10** If the Credentials Committee makes a decision pursuant to Article 11.8.3, the matter shall be referred to the Hearing Committee, in accordance with Articles 16 and 17.
- 11.11** If the Credentials Committee makes a decision pursuant to Article 11.8.4, the matter shall be referred to the CEO in order to commence the Mediation Process in accordance with Article 15, and:
- 11.11.1 if a Mediated Resolution is achieved, the Mediated Resolution shall be forwarded to the MAC;  
and
- 11.11.2 if a Mediated Resolution is not achieved, the matter shall be referred to the Hearing Committee in accordance with Articles 16 and 17.
- 11.12** Where the matter is referred to the MAC in accordance with Article 11.9 or 11.11.1, the MAC shall conduct any investigation it deems necessary and shall consider:
- 11.12.1 the application;
- 11.12.2 the recommendation of the Credentials Committee;
- 11.12.3 the recommendations forwarded to the Credentials Committee by the CEO and the Department Chief;
- 11.12.4 any recommended Mediated Resolutions; and
- 11.12.5 any information that it gains from its investigations.
- 11.13** Upon completion of its review pursuant to Article 11.12, the MAC shall:
- 11.13.1 approve the application as recommended by the Credentials Committee, or approve the Mediated Resolution, and forward such approval within 25 days of the referral of the matter to the MAC from the Credentials Committee, to the PRC for a final decision;
- 11.13.2 recommend a variance acceptable to the Applicant or recommend a variance to the Mediated Resolution which is acceptable to the signatories of the Mediated Resolution, and forward such recommendation within 25 days of receipt of the application from the Credentials Committee, to the PRC for a final decision;
- 11.13.3 reject the Credentials Committee's recommendation or recommend a variance that is not acceptable to the Applicant within 25 days of the recommendation being forward to the MAC, in which event the matter shall be referred to the CEO in order to commence a mediation process in accordance with Article 15;
- 11.13.4 reject the Mediated Resolution or recommend a variance to the Mediated Resolution is now acceptable to the signatories to the enumerated resolution, within 25 days of a net being referred to the MAC, in which event the matter shall be referred to the Hearing Committee in accordance with Articles 16 and 17 [sic];
- and shall inform the Department Chief of its decision.
- 11.14** Where a matter has been referred to the mediation process pursuant to Article 11.13.3:

11.14.1 if a Mediated Resolution is achieved, the Mediated Resolution shall be forwarded to the MAC for consideration and the MAC shall:

11.14.1.1 approve the Mediated Resolution or recommend a variance to the Mediated Resolution that is acceptable to the signatories of the Mediated Resolution, and forward such decision within 25 days of receipt of a Mediated Resolution to the PRC for decision; or

11.14.1.2 reject the Mediated Resolution or recommend a variance to the Mediated Resolution that is not acceptable to the signatories of the Mediated Resolution, in which events the matter shall be referred to the Hearing Committee in accordance with Articles 16 and 17; or

11.14.2 If a Mediated Resolution is not achieved, the matter shall be referred to the Hearing Committee in accordance with Articles 16 and 17.

**11.15** Where a recommendation is made pursuant to Article 11.13.1, 11.13.2 or 11.14.1.1, the PRC shall conduct such investigation it deems necessary and shall consider:

11.15.1 the application,

11.15.2 the recommendation of the Credentials Committee,

11.15.3 the recommendation of the MAC,

11.15.4 any proposed Mediated Resolution, and

11.15.5 any information that it gains from its investigations.

**11.16** Where the PRC has considered the matter, the PRC shall, within 25 days of receipt of the recommendation from the MAC:

11.16.1 accept the recommendation of the MAC;

11.16.2 recommend a variance that is acceptable to the Applicant and, in the case of a Mediated Resolution, to all signatories to the Mediated Resolution; or

11.16.3 reject the recommendation or the Mediated Resolution, in which event the matter shall be referred to the Hearing Committee in accordance with Articles 16 and 17.

**11.17** Where a matter is referred to the Hearing Committee pursuant to Article ~~11.18.3~~ [11.16.3], then upon completion of the Hearing in accordance with Articles 16 and 17, the members of the PRC who participated in the decision pursuant to Article ~~11.18.3~~ [11.16.3] shall not participate in any Appeal Hearing before the PRC pursuant to Article 18. In this event, the Board shall appoint three different Board Members to act as the PRC.

**11.18** Where the PRC makes a decision pursuant to Article 11.16, it shall immediately notify the Board and CEO of such decision.

**11.19** After the Board and the CEO have been notified of the decision of the PRC pursuant to Article 11.18, the CEO shall notify the Applicant, the MAC, the Credentials Committee, the VP Medicine and the Department Chief of such decision.

## **12 Temporary Appointments to the MDSS**

**12.1** Notwithstanding any other provisions in these Bylaws, the CEO or designate, and the Chair of the Credentials Committee or designate, after gathering such information as they deem appropriate in the circumstances, may grant temporary privileges to an Applicant where:

- 12.1.1 the Health Centre requires an extra physician, dentist, or scientist on a temporary basis;
  - 12.1.2 the physician or dentist requests a replacement for a short period of time;
  - 12.1.3 a specialist who does not have privileges within the Health Centre is required to consult on a particular patient or to deal with a particular situation including, but not restricted to, harvest of organs;
  - 12.1.4 a physician, dentist, or scientist has been accepted for a clinical traineeship; or
  - 12.1.5 a Department Chief requests other temporary appointments as appropriate from time to time.
- 12.2** The granting of a temporary appointment shall be conditional on the Applicant providing proof of:
- 12.2.1 Canadian Medical Protective Association coverage or its equivalent (or malpractice insurance in accordance with the *Dental Act*, if the Applicant is a dentist); and
  - 12.2.2 a licence in good standing granted to the Applicant by the College of Physicians and Surgeons of Nova Scotia (or a licence granted by the Provincial Dental Board, if the Applicant is a dentist).
- 12.3** Temporary appointments granted to a particular Applicant under this Article shall be for a period of up to 30 days.
- 12.4** Subject to Article 12.5, temporary appointments may be extended by the CEO or designate and/or the Chair of the Credentials Committee, provided that a particular Applicant may not be granted temporary privileges for more than a total of 180 days in a calendar year.
- 12.5** The Credentials Committee shall review and approve any requests for extension of temporary privileges beyond the initial period of 30 days.
- 12.6** Temporary privileges may be revoked by the CEO at any time, in which event the CEO shall immediately notify the holder of the temporary privileges and any relevant department chief at the earliest opportunity of such revocation privileges.
- 12.7** Decisions to grant, refuse or revoke temporary privileges are final decisions and there shall be no right of review or appeal from such decisions to the PRC, the Board, the Provincial Appeal Board, or to any other person, committee or entity, from any decision pursuant to this Article.
- 12.8** The CEO shall report an appointment or extension made under this Article to the Credentials Committee at the Credentials Committee meetings following the appointment or extension.
- 12.9** The appropriate Department Chief shall be notified of any decision to grant or extend a temporary appointment.

## **Part V: Disciplinary Processes**

### **13 Special Review of Privileges**

- 13.1** The CEO or Department Chief, referred to in this Article as the “person initiating the special review” may request, in writing, a special review of privileges of any Member of the MDSS at any time and shall advise the Member concerned within 24 hours of such action.

- 13.2** Where the person initiating the special review is not the CEO, the CEO shall be notified by the person initiating the special review within 24 hours of such action.
- 13.3** The grounds for a special review may consist of, but are not limited to, issues of unprofessional or unethical conduct, behaviour otherwise contrary to the values, policies, and procedures of the IWK Health Centre or failure to meet the requirements of any of the Bylaws or the Rules and Regulations.
- 13.4** In making a request for a special review, the person initiating the special review shall indicate, in writing, the grounds giving rise to such a review and the remedy that is being sought.
- 13.5** When the CEO is the person initiating the special review, or when the CEO is informed by the department chief of the request for the special review, the CEO shall initiate the Mediation Process in accordance with Article 15.
- 13.6** If a Mediated Resolution is not achieved through the Mediation Process, the parties shall proceed immediately to the Hearing Committee for a hearing to address the grounds for a special review, in accordance with Articles 16 and 17.
- 13.7** If a Mediated Resolution is achieved pursuant to Article 14, the Mediated Resolution shall be forwarded to the MAC for information.
- 13.8** The Chair of the MAC shall forward the Mediated Resolution to the PRC within five days of the receipt of the Mediated Resolution by the MAC.
- 13.9** The PRC shall review the Mediated Resolution and shall, within 15 days of receipt from the Chair of the MAC:
- 13.9.1 approve the Mediated Resolution;
  - 13.9.2 recommend a change to the Mediated Resolution that is acceptable to the signatories to the Mediated Resolution, and approve such change; or
  - 13.9.3 reject the Mediated Resolution and refer the matter to the Hearing Committee pursuant to Articles 16 and 17.
- 13.10** The PRC Chair shall, within five days of rendering its decision, forward its decision to the Board and the CEO for information.
- 13.11** Upon receipt of the decision from the PRC, the CEO shall inform the member, the person initiating the special review, the appropriate department chief and the MAC of the decision.
- 13.12** Where a matter is referred to the Hearing Committee pursuant to Article 13.9.3, then upon completion of the Hearing in accordance with Articles 16 and 17, the members of the PRC who participated in the decision pursuant to Article 13.9.3 shall not participate in any Appeal Hearing by the PRC pursuant to Article 18. In this event, the Board shall appoint three different Board Members to act as the PRC.
- 14 Immediate Suspension or Variance of Privileges**
- 14.1** The CEO or designate, or a Department Chief or designate (referred to in this article as “the person initiating the suspension/variance”) may suspend or vary the privileges of any Member of the MDSS at any time where the person initiating the suspension/variance reasonably believes that the Member has engaged in conduct which:



- 14.1.1 is reasonably likely to expose patients or staff to harm or injury at the Health Centre or by services provided through the Health Centre;
- 14.1.2 is reasonably likely to be detrimental to patients' safety or to the delivery of patient care at the Health Centre or by services provided to the Health Centre; or
- 14.1.3 is reasonably likely to be detrimental to the Member, the Health Centre, or the public.
- 14.2** If someone other than the CEO immediately suspends or varies a Member's privileges, the CEO must be informed within twenty-four hours of the suspension or variance.
- 14.3** The person initiating the suspension/variance shall inform the Chair of the MAC within 24 hours of the suspension or variation pursuant to Article 14.1.
- 14.4** When the CEO initiates the suspension/variance, the CEO shall advise the Department Chief and the Division Head of the suspension or variance, and at such time, or when the CEO becomes aware of the initiation of a suspension or variance by the department chief, whichever is the later, the CEO shall, within 48 hours appoint a Health Centre representative to commence the Mediation Process in accordance with Article 15.
- 14.5** If no Mediated Resolution is achieved pursuant to the Mediation Process, the parties shall proceed immediately to the Hearing Committee for a hearing to address the issues giving rise to the immediate suspension/variance, in accordance with Articles 16 and 17.
- 14.6** If a Mediated Resolution is achieved, the Mediated Resolution shall be forwarded to the MAC for information.
- 14.7** The Chair of the MAC shall forward the Mediated Resolution to the PRC within five days of the review of the Mediated Resolution by the MAC.
- 14.8** The PRC shall review the Mediated Resolution and shall within fifteen days of receipt from the Chair of the MAC:
- 14.8.1 approve the Mediated Resolution;
- 14.8.2 recommended a change to the Mediated Resolution that is acceptable to the signatories to the Mediated Resolution, and approve such change; or
- 14.8.3 reject the Mediated Resolution and refer the matter to the Hearing Committee.
- 14.9** Where a decision is made pursuant to Article 14.8 the PRC Chair shall, within five days, forward its decision to the Board and CEO for information.
- 14.10** Upon receipt of the decision of the PRC, the CEO shall advise the member, the relevant department chief, the relevant head of the division and the MAC of the decision.
- 14.11** Where a matter is referred to the Hearing Committee pursuant to Article 14.8.3, then upon completion of the Hearing in accordance with Articles 16 and 17, the members of the PRC who participated in the decision pursuant to Article 14.8.3 shall not participate in any Appeal Hearing by the PRC pursuant to Article 18. In this event the Board shall appoint three different Board Members to act as the PRC.

**Part VI: Mediation Process****15 Mediation Process**

- 15.1** The Mediation Process shall be engaged in the circumstances outlined in Articles 11, 13 and 14.
- 15.2** When the Mediation Process is engaged, the CEO or designate shall within 48 hours appoint a Health Centre representative to act for purposes of the Mediation Process.
- 15.3** The parties involved in the Mediation Process shall be:
- 15.3.1 the Member who is the subject of the Mediation Process;
  - 15.3.2 the Health Centre Representative selected by the CEO or designate (who must not be the Department Chief of the Member who is the subject of the Mediation Process, and who is not the person named in Article 15.3.4);
  - 15.3.3 a MDSS member appointed by the Medical, Dental and Scientific Staff Executive; and
  - 15.3.4 the Member's Department Chief in the case of a reappointment application; the person initiating the special review in the case of the special review; or the person initiating the suspension/variation in the case of Article 14.
- 15.4** The Health Centre Representative shall facilitate the Mediation Process unless the Health Centre Representative determines that a third party mediator shall be used to facilitate the Mediation Process.
- 15.5** The parties to the Mediation Process shall seek to develop a Mediated Resolution of the matter that addresses the outstanding issues to the satisfaction of the signatories to the Mediated Resolution pursuant to Article 15.6.
- 15.6** The signatories to a Mediated Resolution are the parties to the Mediation Process pursuant to Article 15.3, and the CEO.
- 15.7** The Parties to the Mediation Process shall either reach a Mediated Resolution or determine that it is not possible to reach a Mediated Resolution:
- 15.7.1 in the case of a Mediation Process to consider a reappointment pursuant to Article 11, within thirty days (30) from the initiation of the Mediation Process;
  - 15.7.2 in the case of a Mediation Process arising from a special review of privileges pursuant to Article 13, within thirty days (30) from the commencement of the Mediation Process; and
  - 15.7.3 in the case of a Mediation Process arising from an automatic suspension or variance of privileges pursuant to Article 14, within fourteen (14) days of the commencement of the Mediation Process
- unless parties to the Mediation Process agree in writing to extend these timelines.
- 15.8** Where a Mediated Resolution has been reached, the Mediated Resolution shall be forwarded by the Health Centre representative to the relevant committee pursuant to Articles 11, 13 or 14, and processed in accordance with the relevant Article.
- 15.9** Where a Mediated Resolution has not been reached, the matter shall be processed in accordance with the relevant provisions of Articles 11, 13 and 14.

**15.10** Where the Mediation Process is not successful and a matter is referred to a Hearing Committee pursuant to these Bylaws, no reference to discussions held during the Mediation Process, or to proposed Mediated Resolutions shall be allowed in evidence before a Hearing Committee.

## **Part VII: Hearings**

### **16 Hearing Process**

- 16.1** The hearing process is engaged when a matter is referred to a Hearing Committee pursuant to Articles 11, 13 or 14.
- 16.2** The parties to the hearing shall be the Member and the Health Centre Representative appointed for the particular hearing.
- 16.3** In a proceeding before the Hearing Committee, the Health Centre Representative shall present the matter to the Hearing Committee, and the Member who is the subject of the Hearing process shall respond to the case presented by the Health Centre Representative.
- 16.4** The Chair of the Hearing Committee may retain independent legal counsel to advise the Hearing Committee regarding matters of law and procedure.
- 16.5** The Health Centre Representative may retain legal counsel to present or to assist in presenting the case on behalf of the Health Centre before the Hearing Committee.
- 16.6** The Member who is the subject of the Hearing may retain counsel to represent the Member at the Member's expense.
- 16.7** Where a matter is referred to the Hearing Committee, the Health Centre Representative shall issue a Notice of Hearing setting out the details of the matters to be determined by the Hearing Committee, and specifying the time and the place of the Hearing. The Health Centre Representative shall consult with the Chair of the Hearing Committee and the Member before setting the date of the Hearing. In the event agreement cannot be reached regarding the date of the Hearing, the Chair of the Hearing Committee shall set the date for the commencement of the Hearing, which in any event shall not be later than forty-five (45) days from the date of the referral of the matter to the Hearing Committee, or such later date as the Member and the Health Centre Representative may agree in writing or the Hearing Committee may order following an opportunity for submissions from both parties as to such date.
- 16.8** In any stage of the Hearing Process, any document required to be served on either party shall be deemed to be served or provided where:
- 16.8.1 the intended recipient or their legal counsel acknowledges receipt of the document;
  - 16.8.2 where a registered mail receipt is provided from Canada Post at the intended recipient's last known address;
  - 16.8.3 where an Affidavit of Service is provided; or
  - 16.8.4 where evidence satisfactory to the Hearing Committee is provided that all reasonable efforts to effect service have been exhausted.
- 16.9** If a party does not attend a Hearing, the Hearing Committee, upon proof of service of the Notice of Hearing or proof of substituted service in accordance with Article 16.8, may proceed with the Hearing in

the party's absence and, without further notice to the party, take such action as it is authorized to take pursuant to these Bylaws.

**16.10** The Hearing Committee, at any time before or during a Hearing, on its own motion or on receipt of a motion from a party to the Hearing, may amend or alter any Notice of Hearing to correct an alleged defect in substance or form, or to make the Notice conform to the evidence where there appears to be a variance between the evidence and the Notice, or where the evidence discloses issues not alleged in the Notice.

**16.11** If an amendment or alteration is made by the Hearing Committee pursuant to Article 16.10, the parties shall be provided sufficient opportunity to prepare an answer to the amendment or alteration.

## **17 Hearing Procedures**

**17.1** The Hearing Committee may determine rules or procedures for Hearings not covered by these Bylaws or the Rules and Regulations.

**17.2** In a proceeding before the Hearing Committee the parties have the right to:

17.2.1 the opportunity to present evidence and make submissions, including the right to cross-examine witnesses; and

17.2.2 receive written reasons for a decision within thirty (30) days of the completion of evidence and submissions before the Hearing Committee.

**17.3** Evidence is not admissible before the Hearing Committee unless the opposing party has been given, at least seven (7) days before a Hearing:

17.3.1 in the case of written or documentary evidence, an opportunity to examine the evidence;

17.3.2 in the case of evidence of an expert, a copy of the expert's written report or if there is no written report, a written summary of the evidence; or

17.3.3 in the case of evidence of a witness, the identity of the witness.

**17.4** Notwithstanding Article 17.3 the Hearing Committee may, in its discretion, allow the introduction of evidence that would be otherwise inadmissible under Article 17.3 and may make directions it considers necessary to ensure that the opposing party has and appropriate opportunity to respond.

**17.5** The testimony of witnesses at a Hearing shall be taken under oath or affirmation, and all evidence submitted to the Hearing Committee shall be reduced to writing, or mechanically or electronically recorded by a person authorized by the Hearing Committee.

**17.6** Any oath or affirmation required pursuant to these Bylaws may be administered by any member of the Hearing Committee or other person in attendance authorized by law to administer oaths or affirmations.

**17.7** Evidence may be given before the Hearing Committee in any manner that the Hearing Committee considers appropriate, and the Committee is not bound by the rules of law respecting evidence applicable in judicial proceedings.

**17.8** Notwithstanding Article 17.7, the Hearing Committee shall ensure that Hearings are conducted in accordance with the principles of natural justice and procedural fairness.

- 17.9** At any time before or during a Hearing, after providing the opportunity for each party to make submissions, the Hearing Committee acting in good faith and on reasonable grounds may require the Member to:
- 17.9.1 submit to physical and mental examinations by a qualified person or persons designated by the Hearing Committee and to provide a copy of the report from such examination to the Hearing Committee and to the Health Centre Representative;
  - 17.9.2 submit to a review of the practice of the Member by a qualified person or persons designated by the Hearing Committee and to provide a copy of such review to the Hearing Committee and to the Health Centre Representative;
  - 17.9.3 submit to a competence assessment or other assessment or examination to determine whether the Member is competent to engage in practice and to provide a copy the assessment or the report of the examination to the Hearing Committee and to the Health Centre Representative; and
  - 17.9.4 produce records kept with respect to the Member's practice.
- 17.10** If a Member fails to comply with Article 17.9, the Hearing Committee may order that the Member be suspended until the Member complies.
- 17.11** The costs of complying with the requirements outlined in Article 17.9 shall be borne by the Health Centre.
- 17.12** Upon completion of the evidence, and upon giving both parties the opportunity to present submissions, the Hearing Committee shall, within thirty days, or such later date as the parties may agree, issue a decision in writing with reasons, where it decides the matters raised in the Notice of Hearing and determines the final disposition of such matters. Such final disposition may include, but is not limited to:
- 17.12.1 for purposes of the credentialing process:
    - 17.12.1.1 approval, rejection or variation of the privileges requested by the applicant;
    - 17.12.1.2 the imposition of certain conditions or restrictions on the Member's privileges; or
    - 17.12.1.3 such other disposition as the Hearing Committee deems appropriate;
  - 17.12.2 for disciplinary purposes:
    - 17.12.2.1 termination of the Member's appointment and/or privileges;
    - 17.12.2.2 suspension of the Member's appointment and/or privileges;
    - 17.12.2.3 a variation of the Member's appointment and/or privileges;
    - 17.12.2.4 conditions or restrictions on the Member;
    - 17.12.2.5 a reprimand;
    - 17.12.2.6 placement of the Member on probation with respect to his/her MDSS Membership and/or privileges, with such conditions or restrictions as deemed appropriate;
    - 17.12.2.7 such other disposition as deemed appropriate; or

17.12.2.8 any combination of the above.

- 17.13** The written decision issued pursuant to Article 17.12 shall be provided by the Chair of the Hearing Committee to the MAC for information, and to the Member, the Health Centre Representative, the Chair of the PRC and the CEO.
- 17.14** At the time the Chair of the Hearing Committee provides a copy of the written decision to the PRC, the Chair of the Hearing Committee shall order a transcript of the proceedings before the Hearing Committee and upon receipt of such transcript shall provide it together with copies of all exhibits introduced at the hearing to the PRC.

### **Part VIII: Privileges Review Committee Processes**

#### **18 Referrals to the PRC from Hearing Committee**

##### **Appeal from Decision of Hearing Committee**

- 18.1** When a Hearing Committee has rendered a written decision pursuant to Article 17, either party may appeal the decision to the PRC by filing a Notice of Appeal within ten (10) days of receipt of the Hearing Committee's written decision.
- 18.2** The Notice of Appeal shall state the grounds of appeal in accordance with Article 18.3.
- 18.3** The grounds for an appeal are:
- 18.3.1 errors of law;
  - 18.3.2 that the decision in dispute is not supported by the evidence; or
  - 18.3.3 that the decision-makers materially erred in interpreting the evidence before it.
- 18.4** Where a Notice of Appeal has been filed pursuant to Article 18.1, the party filing the Notice of Appeal shall confirm that the PRC has received a copy of the transcript of the proceedings before the Hearing Committee and a copy of all exhibits introduced at the Hearing, pursuant to Article 17.14.
- 18.5** Upon receipt of a Notice of Appeal, the Chair of the PRC shall meet with the parties within 10 days and set a time and place for the Appeal Hearing.
- 18.6** At an Appeal Hearing, the parties shall have the opportunity to provide both written and oral submissions regarding the grounds of Appeal and the remedy sought.
- 18.7** The PRC may determine rules or procedures for Appeal Hearings not covered by these Bylaws.
- 18.8** No new evidence is admissible before the PRC unless the PRC directs otherwise.
- 18.9** If the PRC allows the introduction of oral evidence pursuant to Article 18.8, such evidence shall be given under oath or affirmation, and any oaths or affirmation may be administered by any member of the PRC or other person in attendance authorized by law to administer oaths or affirmations.
- 18.10** Appeal Hearings before the PRC shall be reduced to writing, or mechanically or electronically recorded by a person authorized by the PRC.
- 18.11** Upon completion of the proceeding before the PRC, the PRC shall within thirty (30) days of the completion of the evidence and the submissions before it issue a decision in writing, with reasons, and shall provide a copy of the decision to the parties, to the Board and to the CEO.

**18.12** The PRC may impose any disposition available to the Hearing Committee pursuant to Article 17.12.2.

**18.13** Where the Member disagrees with the decision of the PRC, the Member may appeal the matter to the provincial Appeal Board, and the provincial Appeal Board shall determine the matter in accordance with processes established pursuant to the *Health Authorities Act*.

#### **Review by the PRC in Absence of Notice of Appeal**

**18.14** Where a party does not file a Notice of Appeal pursuant to Article 18.1, the decision of the Hearing Committee shall be reviewed by the PRC and for purposes of its review, the PRC shall have access to the decision of the Hearing Committee, the transcript of the proceeding before the Hearing Committee, and any and all exhibits provided to the Hearing Committee as part of the Hearing Committee process.

**18.15** The PRC shall complete its review of the Hearing Committee decision pursuant to Article ~~18.13~~ [18.14] within 15 days of its receipt of the materials pursuant to Article ~~18.13~~ [18.14], and shall:

18.15.1 approve the decision of the Hearing Committee, in which event the PRC shall inform the parties of the decision and inform the Board and CEO of the decision;

18.15.2 recommend a variance to the decision of the Hearing Committee that is acceptable to the member and the Health Centre representative, in which event the PRC shall inform the parties of the decision and inform the Board and CEO of the decision; or

18.15.3 reject the decision of the Hearing Committee, or recommend a variance that is not acceptable to either party, in which event the PRC shall appeal the decision of the Hearing Committee to the Provincial Appeal Board in accordance with processes established pursuant to the *Health Authorities Act*. In the event of such an appeal to the Provincial Appeal Board, the parties to the appeal shall be the PRC as appellant and the member as the respondent.

**18.16** The PRC may retain independent legal counsel to advise the PRC regarding matters of law and procedure.

### **Part IX: Provincial Appeal Board**

#### **19 Provincial Appeal Board**

**19.1** The Provincial Appeal Board, abbreviated as "PAB," is constituted in accordance with section 23(b) of the Nova Scotia *Health Authorities Act*.

**19.2** When a matter is appealed to the Provincial Appeal Board pursuant to these Bylaws, the Provincial Appeal Board shall take such action and conduct such processes as set out in the *Health Authorities Act*.

### **Part X: Miscellaneous**

#### **20 Automatic Suspensions**

**20.1** The privileges of a Member of the Medical, Dental and Scientific Staff shall be immediately and automatically suspended by the CEO or designate, or the appropriate Department Chief or designate when:

20.1.1 a Member fails to complete a patient's record within the Rules and Regulations of the Health Centre Medical, Dental and Scientific Staff and has failed to comply within a fourteen-day notice period for completion which is provided by the CEO or designate; or

20.1.2 a Member has ceased to be a Member of the Canadian Medical Protective Association or to carry and have in force equivalent malpractice insurance, and in the case of a Dentist, has ceased to carry and have in force such malpractice insurance as required pursuant to the regulations under the *Dental Act* or other malpractice insurance as is deemed appropriate by the Board.

**20.2** An automatic suspension issued pursuant to Article 20.1 shall continue until the violation has been corrected, at which time the CEO shall automatically reinstate the Member.

## **21 Affiliation Agreements with Dalhousie University**

**21.1** Where Members are subject to Affiliation Agreements with Dalhousie University, appointments to the Medical, Dental and Scientific Staff shall take into account the provisions of such Affiliation Agreements.

**21.2** In the case of termination of appointment by Dalhousie University for Members or applicants who have or seek an appointment with the IWK Health Centre, the effect of such termination of appointment on the Health Centre appointment is as provided in the Affiliation Agreement and, if no provision is made in the Affiliation Agreement, then the applicant or Member shall automatically have her/his appointment reviewed in accordance with the processes set out in Article 12.

**21.3** Where there is a conflict between these Bylaws and an Affiliation Agreement with Dalhousie University, these Bylaws shall prevail.

## **22 Employees/Independent Contractors**

**22.1** Unless granted privileges through the processes set out in these Bylaws, any physician, dentist, or scientist in an employment relationship with the Health Centre shall have the terms of their employment relationship with the Health Centre determined in accordance with the provisions of the employment relationship. For greater certainty, subject to Article 22.3, the Credentials Process and the Discipline Process outlined in these Bylaws are not applicable to such employees.

**22.2** Any physician, dentist, or scientist in an independent contractor relationship with the Health Centre, who does not hold privileges pursuant to these Bylaws, shall have the terms of their relationship with the Health Centre determined in accordance with the provisions of the contract establishing the relationship. For greater certainty, subject to Article 22.3, the Credentials Process and the Discipline Process outlined in these Bylaws are not applicable to such persons.

**22.3** In the event that a physician, dentist, or scientist has privileges granted pursuant to these Bylaws and is also an employee of or independent contractor with the Health Centre, matters affecting the privileges granted pursuant to these Bylaws shall be dealt with in accordance with these Bylaws, and matters involving the employment or contractual relationship of the physician, dentist, or scientist with the Health Centre shall be governed in accordance with the relevant employment or independent contractor relationship.

## **23 Joint Appointments with Other Hospitals, Health Centres or District Health Authorities**

**23.1** Any physician, dentist or scientist who has a joint appointment with the IWK Health Centre and another health facility shall be bound by these Bylaws to the extent a Member is exercising their privileges in accordance with these Bylaws.

**23.2** To the extent a physician, dentist or scientist is exercising privileges pursuant to privileges granted by another health facility, the actions of the physician, dentist or scientist shall be governed by the Bylaws of the other health facility.



**23.3** Where there is a conflict between the application of these Bylaws and the application of the bylaws of another health facility, matters involving the credentialing or discipline of the individual shall be governed by the Bylaws of the facility where the matter giving rise to the credentials or discipline matter took place. In the event of any further conflict as to the application of these Bylaws or the bylaws of another health facility, the CEOs of the health facilities involved shall determine which bylaws shall prevail, and if they cannot reach agreement, they shall appoint an independent third party whose decision with respect to the application of the applicable bylaws shall prevail.

## **24 Notices**

**24.1** All notices in these Bylaws shall be deemed duly given to a party:

24.1.1 upon delivery if delivered by hand;

24.1.2 three (3) days after posting if sent by registered mail with receipt requested; or

24.1.3 upon two (2) days after the date of the transmission, if a facsimile transmission is used.

## **25 Timelines**

**25.1** Time limits in these Bylaws may be extended by mutual written consent of the Health Centre Representative and the Member concerned.

## **26 Reporting to Regulatory Authorities**

**26.1** Where required pursuant to the *Medical Act* or any other statute, the CEO shall report any variations, suspensions, terminations of privileges or any conditions or restrictions imposed on a Member, to the relevant regulatory authority.

**26.2** Where the statute does not require the reporting of any variation, suspension, termination of privileges or conditions or restrictions imposed on a member, the CEO may report the matter to the relevant regulatory authority, where the CEO deems it in the public interest to do so.

## **27 Delegation by CEO**

**27.1** In the carrying out of any functions assigned to the CEO in these Bylaws, the CEO may designate a person to act in the place of the CEO.

## **28 Transition**

**28.1** Applications for appointments or reappointments initiated prior to the effective date of these Bylaws shall be governed by these Bylaws as nearly as possible.

**28.2** All applications for new appointments or reappointments initiated after the effective date of these Bylaws shall be governed in accordance with the terms of these Bylaws.

**28.3** Any matter where a special review process or an immediate suspension/variance process has been initiated prior to the implementation of these Bylaws shall be completed as nearly as possible in accordance with the provisions of these Bylaws.

**28.4** Any disciplinary process initiated after the effective date of these Bylaws shall be governed in accordance with the provisions of these Bylaws.

## **29 Rules and Regulations**

**29.1** The Board may approve Rules and Regulations pursuant to these Bylaws.

**30 Effect of Other Bylaws**

**30.1** These bylaws shall be read in conjunction with the IWK Health Centre Medical, Dental and Scientific Staff Bylaws (General) and the IWK Health Centre Corporate Bylaws. Any term used but not defined in these bylaws that is defined in the IWK Health Centre Medical, Dental and Scientific Staff Bylaws (General) or the IWK Health Centre Corporate Bylaws shall have the meaning given to such term in those bylaws.

**N.S. Reg. 300/2007**

Medical, Dental and Scientific Staff (General) Bylaws

**1 Title**

**1.1** These are the Medical, Dental and Scientific Staff Bylaws (General) for the Izaak Walton Killam Health Centre, hereafter referred to as the IWK Health Centre or Health Centre.

**2 Definitions**

**2.1** In these Medical, Dental and Scientific Staff Bylaws (General)

2.1.1 **Act** means the *Izaak Walton Killam Health Centre Act*, Chapter 26 of the Statutes of Nova Scotia, 1996, and as amended or replaced from time to time.

2.1.2 **Board** means the Board of Directors of the IWK Health Centre.

2.1.3 **Bylaws** means these Medical, Dental and Scientific Staff Bylaws (General), the Medical, Dental and Scientific Staff Bylaws (Credentialing/Disciplinary) and the IWK Health Centre Corporate Bylaws.

2.1.4 **Bylaws (Credentialing/Disciplinary)** means the IWK Health Centre Medical, Dental and Scientific Staff Bylaws (Credentialing/Disciplinary).

2.1.5 **Bylaws (General)** means these IWK Health Centre Medical, Dental and Scientific Staff Bylaws (General).

2.1.6 **Chief** means the Chief of a Department of the IWK Health Centre.

2.1.7 **Chief Executive Officer**, abbreviated as CEO, means the person appointed by the Board to be the President and Chief Executive Officer of the IWK Health Centre who is responsible for the administration and management of the IWK Health Centre.

2.1.8 **Corporate Bylaws** means the IWK Health Centre Corporate Bylaws.

2.1.9 **Credentials Committee** means the committee of the MAC acting as the Credentials Committee for the purposes of the Bylaws, comprised of the membership as set out in the Bylaws (Credentialing/Disciplinary).

2.1.10 **Dental Student** means a student registered in one of the academic years of the Dalhousie University Dental Faculty's program leading to a DDS or DMD degree, or other program as delineated by the Faculty of Dentistry.

2.1.11 **Department** means a Department of the IWK Health Centre more particularly referred to in Article 8.

2.1.12 **Division** means a sub-unit of a Department.

- 2.1.13 **Head** means the Head of a Division within a Department of the IWK Health Centre.
- 2.1.14 **Health Centre** means the IWK Health Centre.
- 2.1.15 **MDSS Rules and Regulations** means rules and regulations made by the MDSS Organization with respect to the governance and internal operations of the MDSS Organization.
- 2.1.16 **Medical Advisory Committee**, abbreviated as MAC, means the committee established by the Board to act as the MAC for the purposes of the Bylaws, and is comprised of the membership set out in the Bylaws (Credentialing/Disciplinary).
- 2.1.17 **Medical, Dental and Scientific Staff**, abbreviated as MDSS, means those physicians, dentists and scientists who are licensed under the *Medical Act* and *Dental Act*, if applicable, and have privileges or who are otherwise permitted to practice within the Health Centre as more particularly set out in these Bylaws, the Bylaws (Credentialing/Disciplinary) and the MDSS Rules and Regulations.
- 2.1.18 **Medical, Dental and Scientific Staff Executive**, abbreviated as MDSS Executive, means the Executive of the Medical, Dental and Scientific Staff Organization, elected in accordance with the MDSS Rules and Regulations.
- 2.1.19 **Medical, Dental and Scientific Staff Organization** means the entity established pursuant to Article 9.2 of these Bylaws to represent the the Medical, Dental and Scientific Staff.
- 2.1.20 **Medical Student** means a student registered in one of the academic years of the Dalhousie University Faculty of Medicine's program leading to a MD degree.
- 2.1.1 **Member** means a Member of the Medical, Dental and Scientific Staff of the IWK Health Centre.
- 2.1.1 **Program Director** means a person appointed by a University Department Head to supervise the activities of Residents.
- 2.1.21 **Resident** means an individual registered in one of Dalhousie University's approved graduate or postgraduate programs accredited by the Royal College of Physicians and Surgeons of Canada, the College of Family Physicians of Canada or the Canadian Dental Association Commission on Dental Accreditation.
- 2.1.22 **Rules and Regulations** means any Rules and Regulations approved by the Board pursuant to the Bylaws, and includes MDSS Rules and Regulations approved by the MDSS Executive unless the context otherwise requires.
- 2.1.23 **University** means Dalhousie University.
- 2.1.24 **University-Health Centre Affiliation Agreement** refers to the agreement between Dalhousie University Faculties of Medicine or Dentistry and the IWK Health Centre with respect to physician or dentist appointments. The University-Health Centre Affiliation Agreement shall, to the extent possible, be interpreted in a consistent manner with the Bylaws.

### 3 Purpose

- 3.1 These Medical, Dental and Scientific Staff Bylaws (General), as well as the Medical, Dental and Scientific Staff Bylaws (Credentialing/Disciplinary), together with the Rules and Regulations are developed and enacted in order to:

- 3.1.1 ensure that all patients admitted to the IWK Health Centre or treated in the ambulatory care facilities or programs/services of the IWK Health Centre receive a standard of care that is family-centered and appropriate to health centres of similar size and type as determined by the IWK Board of Directors.
- 3.1.2 enable the Members of the Medical, Dental and Scientific Staff to provide input into the planning, policy setting and decision-making of the Board.
- 3.1.3 ensure that the processes for appointment, credentialing and discipline of the Medical, Dental and Scientific Staff are fair and consistent with a standard of care appropriate to academic health centres of similar size and type.
- 3.1.4 provide a means of effective and timely communication of the Medical, Dental and Scientific Staff with the Board and administration of the IWK Health Centre.
- 3.1.5 fulfill Medical, Dental and Scientific Staff obligations to provide instruction and to maintain educational standards for physicians, dentists and scientists in training as required to maintain a high quality of clinical care.
- 3.1.6 ensure Medical, Dental and Scientific Staff adhere to policies of the IWK Health Centre which have general application.
- 3.1.7 ensure the Medical, Dental and Scientific Staff Organization is provided opportunity for appropriate consultation during development of future policies.

#### **4 Organization**

- 4.1 The Medical, Dental and Scientific Staff shall be organized as provided in these Bylaws (General), the Bylaws (Credentialing/Disciplinary), and the Rules and Regulations.
- 4.2 No Member of the Medical, Dental and Scientific Staff is authorized to admit or provide any service to a patient, teach authorized students or conduct research at the IWK Health Centre unless that Member holds an appointment to the Medical, Dental and Scientific Staff which includes privileges so to do.
- 4.3 Where the Staff category previously held by a physician, dentist or scientist is no longer in effect under these Bylaws, the Board, after consultation with the Chair of the Credentials Committee and the appropriate Department Chief, shall reassign that physician, dentist or scientist to the applicable staff category and inform the physician, dentist or scientist of such reassignment.

#### **5 Medical, Dental and Scientific Staff Categories**

- 5.1 The categories of appointment within the IWK Health Centre shall be as set out in the Bylaws (Credentialing/Disciplinary).
- 5.2 The process for appointing persons to any of the categories of membership within the IWK Health Centre, including the criteria for entry in each category of membership shall be set out in the Bylaws (Credentialing/Disciplinary).
- 5.3 Active Staff:
  - 5.3.1 Members of the Active Staff shall attend Medical, Dental and Scientific Staff Organization Meetings as set out in the MDSS Rules and Regulations.
  - 5.3.2 Members of the Active Staff have the right to vote at meetings of the Medical, Dental and Scientific Staff Organization.

- 5.3.3 Members of the Active Staff shall pay such Medical, Dental and Scientific Staff Organization dues, if any, as are stipulated by the MDSS Executive and are set out in the MDSS Rules and Regulations.
- 5.4 Consulting Staff:**
- 5.4.1 Members of the Consulting Staff may attend Medical, Dental and Scientific Staff Organization meetings but shall not vote at such meetings.
- 5.4.2 Members of the Consulting Staff shall pay such dues, if any, as are stipulated by the MDSS Executive and in accordance with the MDSS Rules and Regulations.
- 5.5 Courtesy Staff:**
- 5.5.1 Members of the Courtesy Staff shall attend a minimum number of Medical, Dental and Scientific Staff Organization meetings, as stipulated in the MDSS Rules and Regulations, but shall not vote at such meetings, unless otherwise authorized pursuant to the MDSS Rules and Regulations.
- 5.5.2 Members of the Courtesy Staff shall pay such dues, if any, as are stipulated by the MDSS Executive and in accordance with the MDSS Rules and Regulations.
- 5.6 Clinical and Research Trainee Staff:**
- 5.6.1 Clinical and Research Trainee Staff shall not attend Medical, Dental and Scientific Staff Organization meetings.
- 5.6.2 Members of the Clinical and Research Trainee Staff are not required to pay Staff dues.
- 5.7 Clinical Associate Staff:**
- 5.7.1 Members of the Clinical Associate Staff may attend Medical, Dental and Scientific Staff Organization meetings but are not eligible to vote at such meetings.
- 5.7.2 Members of the Clinical Associate Staff are not required to pay Staff dues.
- 5.8 Scientific Staff:**
- 5.8.1 Members of the Scientific Staff shall attend Medical, Dental and Scientific Staff Organization meetings as set out in the MDSS Rules and Regulations, and have the right to vote at such meetings.
- 5.8.2 Members of the Scientific Staff shall pay such Staff dues, if any, as are stipulated by the MDSS Executive and in accordance with the MDSS Rules and Regulations.
- 5.8.3 Members of the Scientific Staff shall not ordinarily be employees of the IWK Health Centre.
- 5.9 Honorary Staff:**
- 5.9.1 Honorary Staff Members may attend meetings of the Medical, Dental and Scientific Staff Organization, but shall not vote at such meetings.
- 5.9.1 Honorary Staff Members are not required to pay Staff dues.
- 5.10 Locum Tenens:**
- 5.10.1 Locum Tenens Staff shall not be eligible to attend, unless invited, Medical, Dental or Scientific Staff Committee meetings, shall not be eligible to vote at any Committees, Department or other Medical, Dental and Scientific Staff meetings, and shall not be eligible to be elected as a Member of the MDSS Executive, but Locum Tenens Staff may attend Medical, Dental and Scientific Staff Organization meetings.

5.10.2 Locum Tenens Staff shall pay such Staff dues, if any, as are stipulated by the MDSS Executive and in accordance with the MDSS Rules and Regulations.

**5.11 Visiting Consulting Staff:**

5.11.1 Members of the Visiting Consulting Staff may not attend Medical, Dental and Scientific Staff Organization Meetings.

5.11.2 Members of the Visiting Consulting Staff are not required to pay dues.

**5.12 Attending Physician/Dentist or Scientist**

5.12.1 Attending physician/dentist or scientist responsibilities shall be as outlined in the Rules and Regulations pursuant to these Bylaws.

5.12.2 Each Member of the Medical, Dental and Scientific Staff shall undertake duties as specified by the Chief of the Department or Head of the Division to which such Member is assigned.

5.12.3 Each attending physician/dentist or scientist who has teaching responsibilities shall provide instruction to other Members of the Medical, Dental and Scientific Staff, medical/dental students and other learners as required by the Chief of the Department or Head of the Division to which such attending physician/dentist or scientist is assigned.

5.12.4 A Member of the Medical, Dental and Scientific Staff who is unable to perform his/her duties and responsibilities at the IWK Health Centre shall immediately notify the Chief of the appropriate Department or Head of the appropriate Division that he/she is unable to perform these duties. The notification to the Chief of the Department or Head of Division shall also indicate whether the inability to perform duties is likely to be long term.

**5.13 Residents**

5.13.1 Medical/Dental Students/Residents shall not be Members of the Medical, Dental and Scientific Staff Organization.

5.13.2 Medical/Dental Students and Residents shall be assigned to an appropriate Department defined in the Rules and Regulations.

5.13.3 Medical/Dental Students and Residents shall have an Undergraduate/Postgraduate appointment at the University Faculty of Medicine or Faculty of Dentistry. Elective students and Residents who are not appointed to training programs at the University must be registered with the Dean's office of the Dalhousie Faculty of Medicine or Dentistry as applicable.

5.13.4 Each Medical/Dental Student and Resident shall be under the supervision of the appropriate Department Chief, Division Head or Post-graduate Residency Training Program Director (where such a position exists).

5.13.5 The nature, extent and number of responsibilities, including patient care responsibilities, assigned to a Medical/Dental Student or Resident by the above at any given time shall be commensurate with the Medical/Dental Student's or Resident's demonstrated level of skill, the educational objectives established for the rotation or unit in the relevant clinical area from time to time, and the limits and privileges of the medical/dental license held by the Medical/Dental Student or Resident at the relevant time.

**6 Vice-president, Medicine**

**6.1** The Vice-President, Medicine is appointed by the CEO and is responsible to the Board through the CEO.

**6.2** The Vice-President, Medicine shall be an ex-officio, non-voting member of the Medical, Dental and Scientific Staff Organization unless otherwise eligible to be a Member of the Medical, Dental and Scientific Staff.

**6.3** The duties of the Vice-President, Medicine include:

6.3.1 implementing and maintaining appropriate measures to ensure that the quality of services offered by all members is evaluated on a regular basis and that corrective actions are taken when problems are identified;

6.3.2 monitoring members' practices to ensure compliance with these Bylaws, the Rules and Regulations and procedures and policies established by the Board;

6.3.3 encouraging the participation of members in appropriate continuing education;

6.3.4 implementing and maintaining appropriate measures for reviewing and managing the use of resources by members;

6.3.5 monitoring and advising the Board on the processes used to appoint members and assess their performance;

6.3.6 reporting to the CEO and to the Board on any issues relevant to the MDSS;

6.3.7 participating on pertinent medical, administrative and Board committees;

6.3.8 performing those functions specifically assigned to the Vice President, Medicine in the Bylaws; and

6.3.9 carrying out such other functions as assigned by the CEO.

**7 IWK Health Centre MAC**

**7.1** The IWK Health Centre Medical Advisory Committee is established to advise the Board on matters having an impact upon or otherwise involving medical, dental and scientific affairs whether such impact or involvement is direct or indirect and is accountable directly to the Board.

**7.2** The terms of reference of the Medical Advisory Committee shall be approved by the Board.

**7.3** The composition of the Medical Advisory Committee is as set out in the Bylaws (Credentialing/Disciplinary).

**7.4** The members of the Medical Advisory Committee shall elect the Chair of the Medical Advisory Committee in accordance with the provisions of the Bylaws (Credentialing/Disciplinary). The Chair of the Medical Advisory Committee shall report directly to the Board.

**8 Departments and Divisions**

**8.1** The Board, after seeking advice from the CEO and the Chief of the corresponding Department, the IWK Health Centre MAC and the Dean of the Faculty of Medicine or Dentistry, as applicable, may create or dissolve an IWK Health Centre Division or Department. The Departments shall be those as set out in the Rules and Regulations made pursuant to these Bylaws.

- 8.2** Members of the Medical, Dental and Scientific Staff shall be assigned individually to an appropriate Department by the Privileges Review Committee constituted pursuant to the Bylaws (Credentialing/Disciplinary) as part of the credentialing process pursuant to the Bylaws (Credentialing/Disciplinary), and, if appropriate, members shall also be assigned through the same process to a Division.
- 8.3** Members of the Medical, Dental and Scientific Staff shall undertake their activities in accordance with the policies and procedures developed by the Department and the Division, if applicable, to which they have been assigned.
- 8.4** Chiefs of Departments:
- 8.4.1 Each Department shall have a Chief of Department appointed by the Board who may, but need not be the same person as the University Head of the Department. When the University Head is primarily based at the IWK Health Centre, then she/he would ordinarily be the Chief of the IWK Health Centre Department.
- 8.4.2 If the Chief of the Department is also Head of the corresponding University Department:
- 8.4.2.1 the Chief of the Department shall have an academic appointment in the appropriate University Department and such appointment process shall be included in the University-Health Centre Affiliation Agreement;
- 8.4.2.2 when a vacancy exists for the position of Chief of a Department, a survey and search committee shall be constituted by the CEO. In the circumstance where a Chief is not immediately appointed, the Acting Chief shall be the Associate Chief of the Department involved. If the Associate Chief is unable to assume the functions of the Acting Chief, or if there is no Associate Chief appointed, an Acting Chief shall be recommended by the CEO in consultation with Department members and the Dean of Medicine or Dentistry as applicable, and with approval by the Board and for a period not to exceed that determined by the Board;
- 8.4.2.3 the preferred candidate shall be reviewed for eligibility to be appointed to the Medical, Dental and Scientific Staff if she/he is not already a Member of the Medical, Dental and Scientific Active Staff, prior to submitting the recommendation to the Board;
- 8.4.2.4 the Chief of a Department shall ordinarily be appointed for a five (5) year term. The Chief may be reappointed for an additional five (5) year term, subject to a favorable report and recommendation of a survey committee which shall include, at minimum, representation from the IWK Health Centre, representation from Members of the Medical, Dental and Scientific Staff (not to include members of the Department in question with the exception of those who hold cross appointments in other Departments), an external reviewer if deemed necessary by the Committee, and a Chair chosen from among the Committee members. The Chief of Department is not usually reappointed for a third term, but under unusual circumstances, when there are exceptional and compelling reasons, a third term may be granted to the Chief of the Department upon the recommendation of a duly constituted survey and search committee and with approval of the Board.
- 8.4.3 If the Chief of the Department is not also Head of the appropriate University Department:
- 8.4.3.1 the Chief of the Department shall have an academic appointment in the appropriate University Department and such appointment process shall be included in the University-Health Centre Affiliation Agreement;



- 8.4.3.2 the Chief of a Department shall ordinarily be appointed for a five (5) year term. The Chief may be reappointed for an additional five (5)-year term, subject to a favorable report and recommendation of a survey and search committee. The survey and search committee established by the CEO shall include the Head of the University Department, the Chair of MAC or designate from MAC, the CEO or designate, the Vice-President, Medicine, a nominee of the Dean of Medicine or the Dean of Dentistry, as appropriate, and two nominees from the Medical, Dental and Scientific Staff Organization. The Chief of Department is not usually reappointed for a third term but under unusual circumstances when there are exceptional and compelling reasons, a third term may be granted to the Chief of the Department upon the recommendation of a duly constituted survey and search committee and with approval of the Board;
- 8.4.3.3 the preferred candidate shall be reviewed for eligibility to be appointed to the Medical, Dental and Scientific Staff, if she/he is not already a Member of the Medical, Dental and Scientific Active Staff, prior to submitting the recommendation to the Board;
- 8.4.3.4 when a vacancy exists for the position of Chief of a Department, a survey and search committee shall be constituted by the CEO. In the circumstance where a Chief is not immediately appointed, the Acting Chief shall be the Associate Chief of the Department involved. If the Associate Chief is unable to assume the functions of the Acting Chief, or there is no Associate Chief appointed, an Acting Chief shall be recommended by the CEO in consultation with Department Members and with approval by the Board and for a period not to exceed that determined by the Board.

**8.5** Duties, responsibilities, authorities and accountabilities of IWK Health Centre Chiefs of Departments:

The Chief of a Department shall:

- 8.5.1 be directly responsible to the CEO or designate and, through her/him, to the Board of the IWK Health Centre;
- 8.5.2 have the authority and responsibility for the general supervision of the medical/dental/scientific care of the patients treated by Department Members and the Medical/Dental Students or Residents under the guidance of Members of the Department to ensure acceptable quality of care;
- 8.5.3 be responsible for the medical/dental/scientific administration and functioning of the Department:
- 8.5.3.1 upon receipt of notification that a Member of the Department or a Division of the Department is unable to perform her/his duties, shall ensure that arrangements are made for proper care of the patients affected by that Member's inability to perform her/his duties;
- 8.5.3.2 make necessary arrangements to replace the attending physician/dentist unable to perform her/his duties and this replacement physician/dentist shall be identified on the patients' Health Record;
- 8.5.3.3 be responsible for taking steps to suspend temporarily the privileges of any Department Member under the circumstances and utilizing the processes set out in the Bylaws (Credentialing/Disciplinary). When affecting a patient(s), these actions shall also include:

- 8.5.3.3.1 discussing the condition, diagnosis, care and treatment of the patient(s) with the Member being suspended and with the patient's(s') attending physician/dentist (if this is a different person);
- 8.5.3.3.2 if changes in diagnosis, care or treatment satisfactory to the Chief of the Department are not promptly made, assumption by the Chief of the Department of the responsibilities of the Member being suspended or, if appropriate, assignment by the Chief of the Department of such responsibilities to another Member of the Department; and
- 8.5.3.3.3 when the Chief of the Department is unable to discuss the problem with the suspended Member, she/he shall proceed as if she/he had spoken with the member.
- 8.5.3.4 when informed that the privileges of a Member of her/his Department has been suspended or altered in accordance with the Bylaws (Credentialing/Disciplinary) be responsible for implementing such changes;
- 8.5.3.5 ensure the development of mechanisms for and exercise such authority as is necessary to ensure the quality of health care and safety of patients cared for through the Department;
- 8.5.3.6 organize and implement processes for clinical review within the Department;
- 8.5.3.7 ensure the development of mechanisms to maintain and enforce professional standards in the Department;
- 8.5.3.8 be responsible for the ethical conduct and professional practice of the Department Members.
- 8.5.4 facilitate and support teaching and research within the Department;
- 8.5.5 be responsible to the IWK Health Centre and the Head of the University Department for the supervision, control and education of students assigned to the Department;
- 8.5.6 establish a process of and encourage continuing education within the Department;
- 8.5.7 ensure Department Members are informed about and ensure compliance with the Bylaws, Rules and Regulations, and policies;
- 8.5.8 implement any medical care policies and procedures applicable to the Department;
- 8.5.9 review annually the professional conduct, competence, performance and qualifications of Members of the Department for the purpose of making recommendations to the Credentials Committee for reappointments;
- 8.5.10 report to the Credentials Committee any requests for a change of privileges by any Member of the Department;
- 8.5.11 report to the Vice-President, Medicine any disciplinary actions in progress affecting any Member of the Department and, when requested, report on the conduct or professional performance of a Department Member;

- 8.5.12 in accordance with the IWK Health Centre's requirements and processes, if any, submit a Departmental budget;
  - 8.5.13 ensure an appropriate orientation of new Members of the Medical, Dental and Scientific Staff appointed to the Department;
  - 8.5.14 hold and chair regular Department meetings and cause attendance to be recorded and minutes to be taken;
  - 8.5.15 receive recommendations concerning medical care policies and procedures;
  - 8.5.16 submit annually a report of the Department functioning;
  - 8.5.17 be a Member of MAC and as such:
    - 8.5.17.1 advise on the quality of care and treatment provided to patients, including reporting of violations of the IWK Health Centre policies which jeopardize safety or the efficient conduct of IWK Health Centre business and advise what actions are being taken to prevent recurrence;
    - 8.5.17.2 participate in the development of the IWK Health Centre's overall objectives, planning and resource allocation and utilization;
    - 8.5.17.3 make recommendations regarding medical/dental/scientific human resource requirements of the Department, following consultation with the Medical, Dental and Scientific Staff of the Department, the Vice-President, Medicine and, where appropriate, Heads of Divisions;
    - 8.5.17.4 report on activities of the Department, including utilization of resources.
  - 8.5.18 notify the CEO or designate and assign an alternate from within the Department to act as her/his delegate when absent from the IWK Health Centre;
  - 8.5.19 participate in the development of the Department's mission, objectives and strategic plans;
  - 8.5.20 participate in the IWK Health Centre's strategic planning and the Department's resource allocation decisions;
  - 8.5.21 implement and maintain appropriate measures for reviewing and managing the use of resources by Members;
  - 8.5.22 delegate appropriate responsibilities to the Heads of Division (where they exist) within the Department;
  - 8.5.23 have the authority to appoint a Chair and Members of any committees within the Department necessary to carry out the functions of the Department.
- 8.6** Duties, responsibilities, authorities and accountabilities of IWK Health Centre Associate Chiefs of Departments:

The Associate Chief of a Department shall:

- 8.6.1 be appointed by the Board within 12 weeks of the appointment of a Department Chief, after receiving a recommendation from the Department Chief and following consultation with the CEO;
- 8.6.2 assist the Chief of the Department in the execution of her/his duties and shall ordinarily assume the duties and responsibilities of the Chief of the Department in her/his absence.

**8.7** The Head of a Division shall:

- 8.7.1 be a Member of the Active Staff of that Department;
- 8.7.2 serve for a five (5) year term and may be reappointed for one further term, not to exceed five (5) years, by the Chief of the Department of which the Division forms a part. Under the direction of the Chief of the Department, a review of the Division Head and the Division shall be conducted every five (5) years. The Head of a Division is not usually reappointed for a third term but under unusual circumstances when there are exceptional and compelling reasons, a third term may be granted to the Head of the Division upon the recommendation of the Chief of the Department and the Executive Committee and with approval of the Board;
- 8.7.3 be appointed by the Chief of the Department of which the Division forms a part;
- 8.7.4 perform such duties as determined by the Chief of the corresponding Department, including the following:
  - 8.7.4.1 be responsible to the Chief of the Department of which the Division forms a part for proper organization and administration of the Division and the enforcement within the Division of the Bylaws (General) and Bylaws (Credentialing/Disciplinary), the Rules and Regulations and Department policies and procedures and shall have the authority required to carry out these responsibilities;
  - 8.7.4.2 report and be responsible to the Chief of the Department of which the Division forms a part for the quality of care, research and teaching in the Division and to notify the appropriate Department Chief of patients who are not receiving appropriate care after discussing the patient with the attending physician:
    - 8.7.4.2.1 the Head of the Division upon receipt of notification that a Member of the Division is unable to perform her/his duties shall ensure that arrangements are made for proper care of the patients affected by the Member's inability to perform her/his duties.
  - 8.7.4.3 liaise with the appropriate University Department Head with respect to the academic activities within the Division;
  - 8.7.4.4 encourage continuing medical education;
  - 8.7.4.5 ensure that Members of the Division shall meet regularly and shall keep the Department Chief informed of the functioning of the Division.

**9 Medical, Dental and Scientific Staff Organization**

- 9.1** Physicians, dentists and scientists who have been appointed to the Medical, Dental and Scientific Staff, shall, regardless of category, constitute the members of the Medical, Dental and Scientific Staff Organization.

- 9.2** The Medical, Dental and Scientific Staff Organization is hereby constituted to represent the Medical, Dental and Scientific Staff, and to facilitate and encourage, to the extent that is reasonably possible, the fulfilment and discharge of collective responsibilities of the Medical, Dental and Scientific Staff in the Bylaws and the Rules and Regulations.
- 9.3** The Medical, Dental and Scientific Staff Organization shall develop MDSS Rules and Regulations that are not inconsistent with the Bylaws or the Rules and Regulations made pursuant to the Bylaws, which MDSS Rules and Regulations shall form the governance documents of the MDSS Organization.
- 9.4** The MDSS Executive shall:
- 9.4.1 be elected or appointed in the manner prescribed in the MDSS Rules and Regulations and shall include a President and a Vice-President;
  - 9.4.2 assist in dealing with conflicts within the Medical, Dental and Scientific Staff;
  - 9.4.3 carry out such functions as assigned in the Bylaws and the Rules and Regulations;
  - 9.4.4 conduct the business of the Medical, Dental and Scientific Staff Organization between regular meetings.
- 9.5** At the time of the coming into force of these Bylaws, the MDSS Executive in place at such time shall continue as the MDSS Executive until a new Executive is elected pursuant to the MDSS Rules and Regulations.
- 9.6** The MDSS Executive in place at the time of the coming into force of these Bylaws shall develop the MDSS Rules and Regulations for approval by the Medical, Dental and Scientific Staff at a meeting to be called within three months of the passage of these Bylaws.

## **10 Leave of Absence**

- 10.1** A Member of Medical, Dental and Scientific Staff who proposes to take a leave of absence exceeding sixteen (16) consecutive weeks, through the Chief of the appropriate Department shall apply for a Leave of Absence in writing to the CEO (on behalf of the Board) and stating the duration and purpose of the proposed absence;
- 10.2** The CEO (on behalf of the Board), on the advice of the applicable Department Chief and the Credentials Committee may grant a Leave of Absence from the Medical, Dental and Scientific Staff for periods up to one (1) year;
- 10.3** The Member may, at the end of the leave, apply for an extension for a period not to exceed one (1) year and the total continuous amount of time to be granted through such leaves cannot exceed two (2) years without the Member being required to submit a new application for appointment to Medical, Dental and Scientific Staff;
- 10.4** The Member on leave will be required to keep the Member's file current during the leave as delineated in the Bylaws (Credentialing/Discipline) and the Rules and Regulations relating to reappointments.

## **11 Ethics and Ethical Relationships**

- 11.1** The Codes of Ethics adopted by the Canadian Medical Association and the Royal College of Physicians and Surgeons of Canada, as in force, amended or replaced from time to time, shall govern the professional conduct of all physicians who are Members of the Medical Staff. The Codes of Ethics adopted by the Canadian Dental Association and the Royal College of Dentists of Canada, as in force, amended or replaced from time to time, shall govern the professional conduct of all dentists who are

Members of the Dental Staff. Members of the Scientific Staff shall be governed by such code(s) of ethics as exist and pertain to their field, as in force, amended or replaced from time to time, and by the latest national standards or codes governing research on humans, as in force, amended or replaced from time to time.

- 11.2** All Members of the Medical, Dental and Scientific Staff shall practice in a manner consistent with the laws of Canada and of the Province of Nova Scotia and with the values and guiding principles in keeping with an academic, family-centered health centre of similar size and type to the IWK Health Centre.

## **12 Amendments**

- 12.1** Amendments to these Bylaws may be proposed by and shall be processed in accordance with the procedures set out in the Corporate Bylaws.

- 12.2** Amendments to the MDSS Rules and Regulations may be proposed by and shall be processed in accordance with the procedures set out in the MDSS Rules and Regulations.

## **13 Rules and Regulations Pursuant to These Bylaws**

- 13.1** The Board may approve Rules and Regulations pursuant to these Bylaws.

## **14 Effect of Other Bylaws**

- 14.1** These Bylaws shall be read in conjunction with the IWK Health Centre Medical, Dental and Scientific Staff Bylaws (Credentialing/Disciplinary) and the Corporate Bylaws. Any term used but not defined in these Bylaws, but is defined in the IWK Health Centre Medical, Dental and Scientific Staff Bylaws (Credentialing/Disciplinary) or the Corporate Bylaws shall have the meaning given to such term in those Bylaws.

## **15 Delegation by CEO**

- 15.1** In the carrying out of any functions assigned to the CEO in these Bylaws, the CEO may designate a person to act in the place of the CEO.