



Island Health



MEDICAL LEADER ONBOARDING MANUAL

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Medical and Academic Affairs



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MedicalStaff.IslandHealth.ca

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TERRITORY ACKNOWLEDGEMENT

Before Canada and BC were formed, Indigenous Peoples lived in balance and interconnectedness with the land and water in which the necessities of life are provided. Health disparities persist, which are due to the impacts of colonization and Indigenous-specific racism. Healthy lands, healthy people. Island Health acknowledges and recognizes these homelands and the ongoing stewardship of Indigenous Peoples of this land; it is with humility we continue to work toward building our relationship.

PURPOSE

The Medical Leader Onboarding Manual is designed to assist new and existing Medical Leaders at Island Health by providing relevant information related to education and leadership requirements, as well as useful information including organizational structures, Medical and Academic Affairs programs and medical leadership resources.

The document includes website links associated with internal and external resources to provide access to people, programs, and departments within Island Health relevant to Medical Leaders.

This document will be updated as necessary for relevancy. Your feedback is appreciated, please email medstaffdevelopment@islandhealth.ca.

OUR VISION. OUR PURPOSE. OUR VALUES.

Island Health is committed to providing quality care for patients and creating a respectful workplace for all staff. The vision, purpose and values are the guiding principles used to provide the highest quality health care services to the populations we serve.

At Island Health, our purpose is to provide superior healthcare through innovation, teaching, research and a commitment to quality and safety – creating healthier, stronger communities and a better quality of life for those we touch.

This is reflected in our core beliefs, which were developed in partnership with staff, medical staff, volunteers, and communities and will inspire us into the future.

OUR VISION:

Excellent health and care for everyone, everywhere, every time.

OUR VALUES:

Courage: to do the right thing, to change, innovate and grow.

Aspire: to the highest degree of quality and safety.

Respect: to value each individual and bring trust to every relationship.

Empathy: to give the kind of care we would want for our loved ones.

WELCOME TO ISLAND HEALTH

Welcome to Island Health is an introduction to your new health authority.

Code of Conduct and associated policies (**Living our Values, Policies & Procedures**, and **Workplace Conduct Policies & Procedures**) applies to all Island Health employees, physicians, contractors, students and volunteers.

The **Respectful Workplace** policy applies to all persons associated with Island Health, including employees contractors, students, volunteers and medical staff. A Respectful Workplace incorporates courtesy, civility, consideration, and compassion. It is an approach, which actively respects individuals by avoiding bullying, harassing and discriminatory behaviours. It includes recognizing, accepting and welcoming differences that individuals bring to the organization. **Cultural Safety** is part of Living our Values in Island Health. All employees, physicians, contractors, students, community support professionals, and volunteers are responsible for creating a culturally safe environment for both clients and staff.

ISLAND HEALTH EXECUTIVE STRUCTURES

Island Health is large organization with over 30,000 employees, medical staff, and volunteers. The information below will help you to navigate the various leadership structures at Island Health.

Island Health Executive Team

In partnership with the British Columbia Ministry of Health, the Island Health Executive Leadership Team (ELT) sets clear performance objectives for the delivery of health care services. The ELT is accountable for achieving — and striving to exceed — these objectives, while ensuring the health needs of the populations we serve are met in an effective, equitable, and sustainable manner.

Following British Columbia's 2025 provincial election, Premier David Eby appointed the [Honourable Josie Osborne, Minister of Health](#) and provided her with the 2025 [Ministry of Health Mandate Letter](#).

Board of Directors (BoD)

The **Board of Directors** appointments for Island Health are decided by the Government of British Columbia. They are chosen for their leadership skills, decision-making abilities, and willingness to be accountable. Collaborating with the Executive Leadership Team, the Board establishes Island Health's Vision, Purpose and Values and ensures patients receive the best care possible within an affordable, sustainable health care system.

The Board of Directors is interested in hearing what is important to you. If you have a question or comment for the Board, we invite you to attend a [Board Public Forum](#) in-person, or submit a question by email to asktheboard@islandhealth.ca and watch the forum on-line.

President and Chief Executive Officer

The **President and Chief Executive Officer at Island Health engages with** the Island Health Board of Directors to provide leadership to the Health Authority and to conduct the day-to-day management of the Facilities and Programs operated by Island Health in accordance with the Bylaws, Rules, and policies of Island Health.

Executive Leadership Team

Working with the **Board of Directors**, and led by **President and Chief Executive Officer**, the [Executive Leadership Team](#) is responsible for meeting the health needs of the people living in the Island Health region in an effective and sustainable way. In collaboration with the BC Ministry of Health, the executive leadership team establishes [performance objectives](#) regarding the delivery of health care, and works to ensure those goals are met or exceeded.

Executive Leadership Team and Organizational Structure

You can view the Executive Leadership and organizational structure, please click [here](#).

Executive Leadership Biographies

You can view Executive Leadership Biographies, please click [here](#).

MEDICAL STAFF STRUCTURES

Medical Staff Leadership

Medical staff can assume various leadership roles within Island Health. These roles include Department Head, Division Head, Section Head, Chief of Staff, Site Chief, Standalone Division Head, Executive Medical Director, Medical Director, and Medical Lead. Medical leaders are accountable to the Vice President, Medicine, Quality and Academic Affairs & CMO, the Chief Executive Officer, and the Health Authority Medical Advisory Committee (HAMAC).

Executive Medical Director

An Executive Medical Director is a senior medical leader accountable for clinical governance and strategic and operational leadership over a defined portfolio. This role is expected to work in collaboration with other senior leaders within the organization, as appropriate. This role implements organizational strategy, oversees quality assurance programs, coordinates clinical leadership, and manages the performance and effectiveness of assigned medical services. The Executive Medical Director reports to the CME and is recruited in alignment with organizational policy. The Executive Medical Director reports to the Chief Medical Officer.

Chief of Staff (COS)

The Chief of Staff hospital on-site deputy of the CME who is a member of the Medical Staff. The COS is responsible for the assurance of the quality of Medical Care and practice provided by members of the Medical Staff. The COS is appointed by the CME in consultation with the local Medical Staff. The Chief of Staff reports to the Executive Medical Director.

Site Chief

The Site Chief is the medical leader responsible for a specific service at a site. The Site Chief works in partnership with their respective co-lead, as appropriate, to ensure the continuous provision of services at the site. They are responsible for credentialing and privileging, recruitment, local quality matters, and medical staff oversight and review. Site Chiefs are members of the LMAC and play a vital role as a liaison between medical staff, the local site leadership, and the organization at large. Site Chiefs report to the Chief of Staff and have an indirect reporting relationship with their respective Department and/or Division Head. The role is recruited in alignment with organizational policy.

Medical Lead

An Active member of the Medical Staff who holds an Administrative role reporting directly to a Medical Director. The Medical Lead reports to the Department Head in collaborates with Chief of Staffs, as needed.

Department Heads

The Department Head is accountable for the overall administration, leadership, and clinical performance of a specific department within Island Health. Department Heads work in partnership with their respective co-lead(s), as appropriate. They are responsible for the quality of medical care provided to patients by members of the Department, medical staff governance, operational and strategic planning, and workforce planning within the Department. The Department Head reports to Executive Medical Director.

Division Head

The Division Head is responsible for the overall administration, leadership, and clinical performance of a specific division within Island Health. Division Heads work in partnership with their respective co-lead(s), as appropriate. They are responsible for the quality of medical care provided to patients by members of the Division, medical staff governance, operational and strategic planning, and workforce planning within the Division. The Division Head reports to a Department Head, except in the case of Division Heads of the Stand-alone Divisions, who report to the CME or their delegate. Division Head role is recruited in alignment with organizational policy. The Division Head reports to the Department Head.

Section Head

The Section Head is responsible for the overall administration, leadership, and clinical performance of a specific section within Island Health. Section Heads work in partnership with their respective co-lead(s), as appropriate. They are responsible for the clinical, academic, quality and governance activities of a Section. The Section Head role is recruited in alignment with organizational policy. The Section Head reports to the Division Head.

Practice Lead

Provides oversight into specialized skills or privileges and supports Department and Division Heads in ensuring adequate training and quality reviews. The Practice Lead reports to the Department or Division Head.

Overview of Medical Leader Roles and Responsibilities Chart

ROLE	MAIN RESPONSIBILITIES	REPORTING TO	OPERATIONAL CO-LEADER
EXECUTIVE MEDICAL DIRECTOR (EMD)	A senior medical leader accountable for clinical governance and strategic and operational leadership over a defined portfolio .	Chief Medical Officer	Executive Director
CHIEF OF STAFF	Senior site-level leader responsible for the quality of medical care and practice provided by members of the medical staff at an acute site .	Executive Medical Director (EMD)	Site Director, Operations (or equivalent)
SITE CHIEF (acute)	The operational and governance leader for a service at a site . responsible for credentialing and privileging, recruitment, local quality matters, and medical staff oversight and review.	Chief of Staff and Department Head	Ward/Unit/Service Manager
MEDICAL LEAD (acute and community)	The operational and governance leader for multiple sites, typically across community and acute . Responsible for credentialing and privileging, recruitment, local quality matters, and medical staff oversight and review.	Department Head Collaborates with Chiefs of Staff, as needed	
DEPARTMENT HEAD	A senior regional leader responsible for the quality of medical care provided by the Department members, medical staff governance, operational, strategic, and workforce planning within the Department .	EMD	Program Director/Manager
DIVISION HEAD	Oversees quality of medical care provided by the Division members, governance, operational, strategic planning, and workforce planning within the Division .	Department Head	Program Director/Manager
SECTION HEAD	Oversees clinical, academic, quality and governance activities of a Section .	Division Head	n/a
PRACTICE LEAD	Provides oversight for specialized skills or privileges and supports Department and Division Heads in ensuring adequate training and quality reviews.	Department or Division Head	n/a

Medical Leadership Organization Charts and Directory

Whether you are a medical leader or a member of the medical staff, it is important to understand Island Health’s medical staff organizational structure. These organization charts define medical leader roles and responsibilities, clarify reporting relationships, and outline decision-making authority. This ensures that everyone understands their duties, who they report to, and how decisions are made.

The governance team is responsible for maintaining the organization charts. If you see a discrepancy, please email medstaffgovernance@islandhealth.ca.

Medical staff can also access a Medical Leader Directory where they can search for medical leaders by name, position, facility, or department. When searching by name, you may enter any portion of the individual’s first or last name to generate results.

For detailed guidance on how to use the Medical Leadership Directory, please refer to the Directory Instruction Manual, please click [here](#). If you see a discrepancy in the Directory, please email medstaffcommunications@islandhealth.ca.

To access to the Medical Leadership Organization Charts and Directory, click [here](#).

MEDICAL & ACADEMIC AFFAIRS (MAA)

MAA Executive Leadership

At Island Health, the Medical and Academic Affairs (MAA) unit serves as a centralized leadership and support division dedicated to the governance, development, quality oversight, and workforce planning of the health authority's medical staff. It provides strategic and operational support to physicians, nurse practitioners, midwives, dentists, and other medical professionals, enabling them to deliver safe, high-quality care while actively contributing to organizational leadership, planning, and system improvement.

The Medical and Academic Affairs (MAA) team is under the leadership of [Dr. Ben Williams](#), Vice President, Medicine, Quality, Research & Chief Medical Officer, [Dr. Michelle Weizel](#), Associate VP of Medicine and Academic Affairs and Deputy Chief Medical Officer and [Laura Nielsen](#), Executive Director, Medical and Academic Affairs.

Please click [here](#) to learn more about Medical and Academic Affairs.

Vice President and Medicine, Quality, Research & Chief Medical Officer (CMO)

Dr. Ben Williams, Vice President and Medicine, Quality, Research & Chief Medical Officer is appointed by the Chief Executive Officer (CEO). Dr. Williams provides overall leadership and governance for the organization's medical staff and is accountable for medicine and quality-related processes across the health system. He oversees Executive Medical Directors in partnership with clinical operations leadership and leads the Quality & Safety and Medical Affairs portfolios.

Dr. Williams works closely with the executive team to advance integration, transparency, accountability, and medical staff engagement, while fostering strong relationships across the broader medical community.

He brings extensive leadership experience, having previously served as Executive Medical Director for Nanaimo, Oceanside, Alberni-Clayoquot, and regional Renal, Trauma and Cancer programs, as well as Executive Lead for Strategy and Engagement in the Office of the President and CEO. A graduate of the University of British Columbia, he completed his family medicine residency at Nanaimo Regional General Hospital and continues clinical practice in urgent and emergency care and end-of-life care. Prior to medicine, he held senior policy and communications roles in the non-profit and government sectors.

To contact Dr. Ben Williams, please email vpcmooffice@islandhealth.ca.

Associate Vice President Medicine and Deputy Chief Medical Officer (CMO)

Dr. Michelle Weizel, The Associate Vice President, Medicine and Quality, and Deputy Chief Medical Officer at Island Health supports the VP, Medicine and Chief Medical Officer in providing strategic leadership, governance, and oversight for the organization's medical staff, quality, and patient safety initiatives, and Medical and Academic Affairs.

This role provides executive oversight of medical staff health human resource planning and works collaboratively to ensure the organization is well positioned to meet current and future workforce needs. The Associate Vice President co-leads the Medical Affairs portfolio in partnership with the Executive Director, Medical and Academic Affairs.

In addition, the role fosters and sustains strong, collaborative relationships with operational leaders, medical staff, Divisions of Family Practice, Indigenous partners and communities, elected officials, and the Ministry of Health to advance organizational priorities and support high-quality, patient-centered care.

Executive Director, Medical and Academic Affairs (ED)

Laura Nielsen serves as Executive Director, Medical and Academic Affairs (MAA) at Island Health. In partnership with the Associate Vice President, Medicine and Deputy Chief Medical Officer, she co-leads the Medical Affairs portfolio, providing strategic leadership, operational oversight, and continuous improvement of the corporate functions that enable and support the organization's relationship with its medical staff.

Laura leads a diverse team responsible for a broad portfolio that includes medical staff recruitment and retention, medical workforce planning, credentialing and privileging, clinical service contracts, quality and professional practice processes, governance, medical staff communications, and medical leadership education and development. Through this work, she ensures that systems, policies, and processes are aligned with regulatory requirements, organizational priorities, and leading practices in medical administration.

In close collaboration with medical and operational leaders across the organization, Laura works to strengthen engagement, foster trust, and build effective partnerships with medical leaders and staff. She supports the development of a sustainable medical workforce and advances structures that promote professional accountability, clinical excellence, and high-quality patient care.

The Executive Director, Medical and Academic Affairs reports to the Vice President, Medicine, Quality and Academic Affairs and Chief Medical Officer.

For more information on the Medical and Academic Affairs Executive Structure, click [here](#).

PORTFOLIOS WITHIN MEDICAL AND ACADEMIC AFFAIRS

MEDICAL STAFF PARTNERSHIPS AND COMMUNICATION

The [Partnerships and Communication](#) portfolio is an exciting new portfolio within MAA. Developed in June 2023, the portfolio exists to bolster communication, partnerships, and engagement with medical staff across Island Health, and key external partners.

This portfolio consists of two main facets covering a breadth of work: The Medical Staff Communication, Education & Development, which oversees all medical staff communications channels, Medical Leader Education & Development, and Rural Programs; and the Partnerships & Programs, which includes the Associate Physician Program, Resident Doctor Onboarding and Support, and the Extraordinary Temporary Support Program.

MEDICAL STAFF COMMUNICATIONS, EDUCATION AND DEVELOPMENT TEAM

Medical Staff Communication

The [Medical staff Communication](#) team develops and manages clear, consistent, and transparent messaging across all medical staff communication channels. This includes oversight of the medical staff website, the monthly newsletter *The Bulletin*, Medical Staff Forums, and Vice President and Executive memos.

The team partners with Departments, Divisions, and other units within Medical and Academic Affairs to strategically plan, refine, and distribute communications to targeted medical staff audiences—ensuring messages are timely, relevant, and aligned with organizational priorities.

For general inquiries pertaining to Medical Staff Communication, please email MedStaffCommunications@islandhealth.ca.

Medical Leader Education and Development

The Medical Leader Education and Development Team is dedicated to supporting physicians in leadership roles—whether newly appointed or experienced—by providing the guidance, tools, and development opportunities needed to succeed in today’s complex healthcare environment.

Medical Leader Onboarding

Medical Leader Onboarding

We offer a structured and comprehensive onboarding experience designed to set medical leaders up for success. Through tailored orientation, practical resources, and connections to key partners, we ensure leaders understand their roles, responsibilities, and the systems that support their work. Our goal is to help you transition into your position with clarity, confidence, and a strong foundation for effective leadership.

Navigation Support and Resources

Healthcare systems can be complex to navigate. Our team provides ongoing support, curated resources, and practical guidance to help medical leaders access the information, processes, and contacts they need.

The following MAA departments support onboarding sessions to help orientate new Medical Leaders. They are typically provided on a bi-monthly or quarterly basis. To access the next sessions dates and times, please click [here](#).

- Foundations Onboarding Sessions – Dr. Michelle Weizel
- Contracts and Compensation Onboarding Session – Dr. Alicia Power
- Patient Safety & Learning System (PSLS) – Dr. Ali Yakhshi Tafti
- Enhanced Medical Staff Support – Dr. Bruce Campana
- Recruitment and Stabilization – Dr. Maria Kang
- Credentialing and Privileging – Jillian Pearman, RM

For more information on medical staff education, please email medstaffdevelopment@islandhealth.ca.

Education and Professional Development

The Education and Development Program offers a comprehensive range of tools, resources, educational opportunities, accredited events, and leadership development programs to support you in your new role and throughout your leadership journey.

We advance continuing professional development and leadership excellence through:

- **Departmental CPD Rounds** – Supporting the planning, coordination, and continuous improvement of local continuing professional development activities
- **CME Accreditation Advisory Support** – Providing expertise and guidance to ensure educational initiatives meet accreditation standards and requirements
- **Community and Rural CME Support** – Enhancing access to high-quality continuing medical education for community and rural physicians
- **Leadership Development Programming** – Delivering targeted programs and workshops to strengthen leadership capability, strategic thinking, and team performance

Through integrated onboarding, navigation support, and comprehensive education programming, the Medical Leader Education and Development Team fosters a culture of continuous learning and collaboration across the medical community.

Learn more about current Medical Leadership Development opportunities, please click [here](#) or by email medstaffdevelopment@islandhealth.ca.

Medical Staff Education Standards

The [Department educational schedule](#) outlines the required, recommended, and optional learning activities specific to your department. As the Medical Leader, you are responsible for sharing this information with your department’s medical staff and ensuring completion of all required and recommended learning activities each year.

Below is a summary of the mandatory training requirements and the associated CME credits available to you.

If you would like to register for medical leader onboarding, educational opportunities, or professional development events, please email MedStaffDevelopment@islandhealth.ca.

Here is a list of accredited **required** educational courses:

- [Mental Health Act \(MHA\)](#)
- [Violence Prevention](#)
- [Confidential Information Management training \(CIM\)](#)

Note:

Medical staff are not remunerated for accredited courses having received Mainpro+ or MOC credits for their time. **exception is the 3.5-hour Violence Prevention course for required departments only.*

There is no sessional coverage provided for the required training.

The MHA, CIM and the VP 1-hour session are available online and to be completed at earliest convenience.

Your [LearningHub profile](#) provides details as to when the required courses were last completed. Login to your LearningHub profile and review your ‘Learning History’. Each course will have a completion date.

The chart below outlines course(s) CME credits and remuneration for required training.

If you would like additional information related to the **required, recommended** and **optional** courses, email medstaffdevelopment@islandhealth.ca.

COURSE	CME or Remunerated	Details	Education Standard	Department(s)
MHA	1.0-hour credits	1.0 Mainpro+ credits	Required	Required for all: Emergency Department physicians

		1.0 MOC Section 3	<i>*Renew course every 2 years</i>	Psychiatrists Hospitalists Pediatricians Geriatricians
Violence Prevention Training	1.5-hour courses accredited 3.5-hour Course is renumerated	1.5 Mainpro+ Credits 1.5 MOC Credits - Self assessment program Section 3	Required <i>*Both 1.5- hour and 3.5-hour courses are one time learning</i>	1.5 course - required for all Medical Staff 3.5 hours is REQUIRED for: Emergency Departments/Urgent Care Mental Health & Substance Use Psychiatry Neurology Long-Term Care Community Health Services (CHS)
Confidential Information Management (CIM) Code of Practice	1 hour course accredited 30 min course accredited	1.0 Mainpro+ credits 1.0 MOC Section 3	Required <i>*Renew annually</i>	CIM for First time - 1 hour course CIM renewal - 30 min course

To register for [Department and Standalone Divisions Standard Education courses](#), please see links below:

Department Standard Education

[Medicine Education](#)

[Pediatrics Education](#)

[Anesthesiology, Pain and Perioperative Medicine Education](#)

[Obstetrics and Gynecology Education](#)

[Midwifery Education](#)

[Surgery Education](#)

[Psychiatry Education](#)

[Family Practice Education](#)

[Nurse Practitioner Education](#)

[Imaging Medicine Education](#)

[Emergency Medicine Education](#)

[Public Health and Preventative Medicine Education](#)

[Laboratory Medicine, Pathology, and Medical Genetics Education](#)

Standalone Divisions Standard Education

[Critical Care Education](#)

[Trauma Education](#)

[Additions Medicine Education](#)
[Multidisciplinary and Interventional Pain Education](#)
[Palliative and End of Life Education](#)

Indigenous Cultural Safety San'yas Training

San'yas is a facilitated online training program that introduces participants to key aspects of Indigenous cultural safety and the importance of addressing Indigenous-specific racism.

Recommended learning

[Introduction to Cultural Safety and Humility - LearningHub](#)

Course provides an overview of Cultural Safety and humility in Island Health and is required learning for all medical staff members in Primary Care, Emergency, Critical Care, Maternity, Medicine, Midwifery, Pediatrics, Psychiatry and Surgery (10 min)

To Register for San'yas Core Health

Please go to www.sanyas.ca and use your Island Health email address when registering. To register, please click [here](#).

COURSE	CME or Renumerated	Details	Education Standard	Department(s)
San'yas Core ICS Health or San'yas Core ICS Mental Health	Maximum 10 hours 2-credit per hour	Maximum 20 Mainpro+ credits Maximum 20 MOC Section 3	Recommended	All physicians - Self-Learning, 2-credit per-hour - If no PARE is completed, 16 Mainpro+ Credits are claimable.
San'yas Advanced: Bystander to Ally - Allyship in Action	Maximum 5 hours 2-credit per hour	Maximum 10 Mainpro+ Credits Maximum 10 MOC Credits Section 3	Optional	Pre-requisite – successful completion of a San'yas Core Training in the past 5-years with a minimum time lapse of 6-months since completing a San'yas Core Training. <i>Note: Core ICS Health and Core ICS Mental Health are accredited for 10 MOC (Section 3) hours by UBC CPD for RCPSC physicians.</i> Bystander to Ally is also accredited for 5 MOC (Section 3) hours

				<ul style="list-style-type: none"> - Self-Learning, 2-credit per-hour - If no PARE is completed, 8 Mainpro+ Credits are claimable.
Seven Generations	6 hours	None	Optional	LearningHub Five-module course

You can access additional information on Cultural Safety Learnings [here](#).

Additional Resources

- [San'yas Frequently Asked Questions](#)
- Seven Generations: We highly recommend the Seven Generations course available on our [LearningHub](#). In Plain Sight Report: [In Plain Sight Summary](#)
- Library Subject Guide: [Indigenous-Specific Anti-Racism and Cultural Safety & Humility](#)
- In Plain Sight Report: [In Plain Sight Summary](#)
- Accreditation Canada BC Cultural Safety & Humility Standard: [Accreditation Canada BC Cultural Safety and Humility Assessment Standard](#)
- MMIWG: [Calls to Justice](#)
- DRIPA: [Declaration on the Rights of Indigenous Peoples Act](#)
- The TRC Calls To Action: [Calls to Action](#)
- Len Pierre Videos: [Anti-racism Tools - YouTube](#) ; [Indigenous Allyship with Len Pierre - YouTube](#)
- Cultural Safety: [Island Health Intranet Page](#)

Sauder Physician Leadership Program

As physicians take on greater leadership responsibilities, the ability to build strong relationships, communicate clearly, and work effectively with others becomes increasingly important. Success in senior roles requires moving beyond a traditionally autonomous model of practice toward one that emphasizes teamwork, shared decision-making, and collaborative leadership.

This program is designed to provide senior physicians with the knowledge and practical skills required to contribute meaningfully to the planning, delivery, and improvement of the health care system. Participants gain a deeper understanding of health care leadership and develop the capabilities needed to work effectively across departments, disciplines, and levels of the organization.

The program was developed through a collaboration between B.C. Health Authorities, the B.C. Patient Safety & Quality Council, UBC's Sauder School of Business, and the UBC Faculty of Medicine. Drawing on expertise from clinical and management fields, it offers an integrated perspective on the medical and organizational dimensions of health care leadership.

The team facilitates the bi-annual nomination and application process. To learn more about the program, please click [here](#) or email medstaffdevelopment@islandhealth.ca.

Rural Programs

If you are a medical leader serving [rural communities](#), a wide range of [incentives and educational opportunities](#) are available to support both your professional growth and the sustainability of your practice. Rural healthcare systems recognize the unique challenges you face—limited resources, workforce shortages, geographic isolation, and broader scopes of responsibility—and have developed targeted programs to help you deliver care to rural and remote areas in need across Vancouver Island.

To contact the Rural Program Liaison, please email ruralprograms@islandhealth.ca.

Rural Retention Program (RRP)

The RRP offers financial incentives to physicians residing and practicing in [RSA](#) designated communities. By supporting clinicians who live and work in these areas, the program aims to stabilize and strengthen healthcare delivery within underserved rural and remote regions.

The program offers two key financial incentives:

1. Flat Fee Payments offer quarterly retention bonuses for eligible physicians billing over \$75,000 annually
2. Fee Premiums provide automatic compensation for [isolated](#) communities (6.0+ points) via a 30% flat fee and 70% fee-for-service premium on MSP claims

For inquiries, please contact ruralprograms@islandhealth.ca.

Northern & Isolation Travel Assistance Outreach Program (NITAOP)

The NITAOP Program provides financial support for physicians delivering essential medical services to eligible rural and isolated communities where local care is unavailable. Funding covers pre-approved travel expenses—including flights, mileage, and meals—and provides a transit honorarium to compensate for time spent traveling.

For inquiries, please contact ruralprograms@islandhealth.ca.

Rural Continuing Medical Education (RCME)

The RCME Program provides essential financial support for rural physicians to maintain specialized skills and address the unique challenges of practicing in remote communities.

The program is divided into two distinct streams: Individual and Community funding.

1. Individual Funds provide physicians up to \$7,800 annually through quarterly payments for personal professional development.
2. Community Funds support collaborative, group-based learning for physicians and allied health partners. Both streams require completion of the Annual Rural Physician Confirmation Survey to determine eligibility and allocation.

For inquiries about Individual Funds, please contact ruralprograms@islandhealth.ca.

For inquiries about Community Funds please contact rcme@rccbc.ca.

MEDICAL STAFF PARTNERSHIPS AND PROGRAMS

The Partnerships and Programs team leads several strategic initiatives that support medical staff integration, engagement, workforce stability, education, and occupational health and safety across Island Health. The team works collaboratively with internal leaders, external partners, regulatory bodies, and provincial stakeholders to ensure programs and projects are thoughtfully implemented and aligned with organizational, provincial, and medical staff priorities.

For more information, please contact MedStaffPrograms@islandhealth.ca.

Associate Physicians (APs) Program

The Associate Physicians Program supports the integration of internationally trained physicians into accredited acute care settings under a restricted class of registration established by the College of Physicians and Surgeons of British Columbia (CPSBC). Associate Physicians are medical graduates with postgraduate training who practise under physician supervision within a defined scope aligned with CPSBC registration requirements.

The program is responsible for the following:

- Supporting accredited Associate Physician positions in acute care settings
- Ensuring compliance with CPSBC registration and scope requirements
- Facilitating supervision structures and renewal processes
- Providing eligibility guidance and program oversight support to site and medical leaders

For more information, please contact MedStaffPrograms@islandhealth.ca.

Physician Assistants (PAs) Program

The Physician Assistants Program supports the integration of Physician Assistants into Island Health clinical settings as part of a provincially coordinated initiative led by the Ministry of Health in collaboration with the College of Physicians and Surgeons of British Columbia and health authority partners. Physician Assistants are nationally certified medical professionals who complete a two-year accredited PA training program and practise under physician

supervision.

The program is responsible for the following:

- Supporting integration of Physician Assistants into approved clinical environments, specifically emergency department.
- Ensuring defined supervision requirements and regulatory compliance through CPSBC
- Providing eligibility criteria guidance and onboarding coordination
- Supporting clinical and operational leadership in team-based care implementation

For more information, please contact MedStaffPrograms@islandhealth.ca.

Medical Staff Health & Safety

Island Health provides a comprehensive range of Medical Staff Health & Safety initiatives, developed in collaboration with Partnerships and Programs, Doctors of BC, and Occupational Health & Safety (OH&S), to advance physician wellness and safety across the organization.

This program area is responsible for the following:

- Coordinating Violence Prevention Training and safety-focused education
- Supporting development of policies and resources that enhance workplace safety
- Promoting physician physical and psychological safety
- Aligning medical staff safety initiatives with organizational standards

For more information, please contact MedStaffOHS@islandhealth.ca.

Post-Graduate Medical Education (PGME) – Occupational Health & Safety Collaboration

The Postgraduate Medical Education Program reflects a provincial commitment to strengthening Resident Doctor pathways within health authorities. Partnerships and Programs collaborate with Occupational Health & Safety and academic stakeholders, including the University of British Columbia, Resident Doctors of BC, and the Island Medical Program, to improve policies and processes affecting Resident Doctors.

This collaboration is responsible for the following:

- Reviewing and improving policies and processes impacting Resident Doctors
- Supporting academic–health authority partnership coordination
- Aligning health and safety processes for trainees
- Enhancing communication between internal and external partners

For more information, please contact Residents@islandhealth.ca.

Resident Doctor Onboarding & Support

The Resident Doctor Onboarding & Support program ensures that Resident Doctors are effectively welcomed, integrated, and supported throughout their training within Island Health and that commitments under the Resident Cooperation Agreement (RCA) are upheld.

The program is responsible for the following:

- Coordinating structured onboarding processes
- Monitoring compliance with the Resident Cooperation Agreement
- Supporting resident engagement, issue resolution, and escalation
- Facilitating communication between Resident Doctors and Island Health

For more information, please contact Residents@islandhealth.ca.

Extraordinary Temporary Support Program (ETSP)

The Extraordinary Temporary Support Program provides a structured mechanism to address urgent medical staffing gaps by introducing temporary physician resources to maintain continuity of care.

The program is responsible for the following:

- Reviewing and approving ETSP applications and renewals
- Verifying eligibility and alignment with program criteria
- Providing guidance to medical and site leaders
- Supporting continuity of service during workforce shortages

For more information, please contact MedStaffPrograms@islandhealth.ca.

Engagement and Change Management – Medical Staff Priorities

The Medical Staff Engagement and Change Management program supports medical leaders and operational teams leading initiatives that significantly impact medical staff and clinical practice. The program emphasizes early partnership to ensure medical staff priorities are meaningfully integrated into project design and implementation.

The program is responsible for the following:

- Supporting navigation of medical and clinical governance structures
- Facilitating medical staff engagement for Island Health-wide initiatives
- Providing change management and implementation support
- Delivering education and capacity building for engagement and change practices

For more information, please contact MedStaffPrograms@IslandHealth.ca.

Medical Staff Recognition Program

Launched in 2025, the Medical Staff Recognition Program acknowledges the dedication and service of medical staff at Island Health and aligns with the organization's service milestone recognition framework. The program celebrates service milestones in five-year increments and is delivered through Medical & Academic Affairs.

The program is responsible for the following:

- Coordinating annual recognition of service milestones
- Collaborating with department and division leadership to confirm eligibility
- Delivering structured and equitable recognition processes
- Promoting physician engagement and retention through formal acknowledgment

For more information, please contact medstaffrecognition@islandhealth.ca.

Clinical Associate (CA) Program

The Clinical Associate Program enables eligible postgraduate residents (R3+) to provide supervised, in-person clinical services beyond their mandatory residency training. Residents work under a Most Responsible Physician and hold an educational license through the College of Physicians and Surgeons of British Columbia. The program supports team capacity and strengthens recruitment pathways across Vancouver Island.

The program is responsible for the following:

- Providing governance and oversight in collaboration with the Alternate Provider Advisory Committee
- Coordinating structured application and onboarding processes
- Supporting licensure guidance for Clinical Associate educational licenses
- Ensuring supervised clinical practice to maintain safe and consistent service delivery

For more information, please contact MedStaffPrograms@islandhealth.ca.

MEDICAL STAFF CONTRACT, COMPENSATION AND FINANCIAL REPORTING

Contracts Management And Physician Compensation

Medical Staff Contract Management (MSCM) works collaboratively with clinical operations programs and medical leadership to develop and manage contracts for medical staff services required by the Health Authority. These contracts ensure alignment with Ministry of Health policies and support effective implementation of medical staff agreements.

MSCM partners closely with other Medical and Academic Affairs teams—including Practice Design (focused on designing and developing new medical services), Credentialing and Privileging, and Recruitment—to facilitate the development and execution of medical staff contracts.

MSCM is responsible for the following:

- Negotiates, drafts and issues contracts to Medical Staff for Clinical, On-Call, Sessional, Medical Leadership and Administrative services
- Responsible for all stages of the Medical Staff Contract Lifecycle including execution, contract management and renewal of contracts
- Provides advice and expertise on Medical Staff contract language, service parameters and reporting requirements

MSCM ensures compliance with Provincial and Health Authority contracting requirements
Provides stewardship for Ministry and Health Authority funds for Medical Staff contracted services

MSCM also collaborates closely with Physician Compensation to ensure that contracted medical staff are paid through authorized invoices and that required utilization data is accurately submitted to the Ministry of Health.

Physician Compensation

The primary function of the Physician Compensation team is to ensure timely and accurate payments to Medical Staff working under contracts and other arrangements within Island Health. The team also provides contract and financial analysis and supports financial planning and reporting. It also serves as the first point of contact for physicians with questions about Island Health payments.

Physician Compensation is responsible for the following:

- Developing and maintaining operating budgets
- Forecasting for physician compensation contracts and Ministry of Health funding
- Monitoring and analyzing contract spending against contracts and Ministry funding targets
- Preparing Financial Performance Reports for leadership, the board of directors and external funders
- Providing detailed reporting to Ministry of Health in compliance to Physician Master Agreement (PMA)
- Providing specialized financial analysis and advice for contract management
- Maintaining knowledge of current physician contracts, including Ministry of Health policy

Physician Master Agreement

The Physician Master Agreement (PMA) is a binding, negotiated contract between the Government of British Columbia and Doctors of BC that sets compensation, benefits, and working conditions for physicians in the province. The PMA is typically renegotiated every three years and covers both fee-for-service and alternative payment models, serving as the foundational agreement for doctor remuneration and system-wide collaboration.

Contained within the 2022 Physician Master Agreement is the [Alternative Payments Subsidiary](#)

[Agreement](#) (APSA). The APSA defines the compensation and the general terms and conditions that apply to all Salary Agreements, Service, MOCAP and Sessional Contracts between contracted Physicians and Island Health.

The Alternative Payments Program provides funds to BC Health Authorities for specific physician services using a compensation model that is alternative to Fee-For-Service and is implemented via the above referenced contracts using templates provided in the PMA

Medical Staff Contracting Process

Requests for new contracts for clinical services undergo the following considerations and approvals:

- Confirmation of funding source for the proposed contract
- Confirmation of the contract deliverables / services, and location(s) where the services are provided
- Confirmation of the Medical Staff contracted to provide the services and their credentials
- Validation of a compensation model that is supported by the Physician Master Agreement or approved Health Authority rates
- When applicable to the service location(s), verifying the Medical Staff contracted to provide the services have privileges to work at the site(s)

Pre-Approvals include

- Approval by Island Health Operational Program and Medical Leadership via a Practice Description
- Approval of a Medical Contract Pre-Approval Form (MCPAF) for contracts funded by Global Operating dollars
- Approval by the Ministry of Health for issuing a new clinical service contract
- Approval of an Impact Assessment
- Approval of new or changes to existing MOCAP contracts (add link to template)

Request for new Leadership, Non-Clinical or Administrative Contracts undergo the same considerations listed above apply however contract pre-approvals are determined by the funding source and scope of work

If you are leaving your position or would like more information, please reach out to the Physician Contracts team by emailing PhysicianContracts@islandhealth.ca.

Clinical Service Contract Negotiations And Practice Design

Clinical Service Contract Negotiations

The Clinical Service Contract Negotiation Team is responsible for the development, negotiation, implementation, and ongoing management of clinical service contracts in the following provincially identified priority areas: Emergency Medicine, Hospitalist Medicine, Anesthesia, and Laboratory Medicine. The team is also responsible for leading complex negotiations involving

non-standard contract structures.

The work of the team is closely aligned with the work of the Medical Staff Contract Management and Medical Staff Compensation Teams, and involves significant collaboration with Island Health programs, physicians, medical and operational leaders, and external partners, such as the Ministry of Health and the Health Employers Association of BC (HEABC).

Practice Design

The Practice Design team leads business case development and service definition activities relating to new or significantly revised Medical Staff clinical service contracts. Team members have a variety of skillsets in budgeting, clinical models of care, contracting best practice, and medical staff rules and college obligations.

Each team member acts with a great degree of independence, and is relied upon to facilitate conversations and gather data from a diverse group of stakeholders, and information sources. Their work to support contract development creates positive impacts for Medical Staff, patients, communities, and the broader Island Health organization.

For more information, click [here](#).

MEDICAL STAFF SUPPORT AND RESOURCES

Primary Care Support And Resources

The [Primary Care Support & Resources](#) team enhances patient access to primary care services through primary care contracts, working together with the Divisions of Family Practice, First Nations, Indigenous-serving organizations, Ministry of Health, partners and practitioners.

The team is responsible for contracting primary care services provided by family physicians and nurse practitioners to patients receiving care at Primary Care Network (PCN) clinics, including Community Health Centres (CHC), Urgent and Primary Care Centres (UPCC).

Services currently supported by the Primary Care Support & Resources team include:

- Advising about contract options for primary care services
- Informing practitioners and partners about key contract deliverables
- Ensuring a contract aligns with services and complies with provincial policies
- End to end contract administration
- Liaising with the Ministry of Health, practitioners, and partners to advance primary care initiatives

Helpful Resources

- [Primary Care Network Toolkit \(Ministry of Health\)](#)
- Resource Library (Victoria Division of Family Practice)
 - [New-to-Practice Contract Resource Library](#)

- [Practicing Family Physician Group Contract Resource Library](#)

For more information contact the Primary Care team, please email PCNMedAffairs@islandhealth.ca.

For general inquiries about the programs and initiatives listed, please email MedStaffPrograms@islandhealth.ca.

Recruitment And Stabilization

Island Health's Medical Staff Recruitment team is a specialized group within Island Health that helps to bring medical staff professionals — Specialists and Primary Care providers — into the organization. Their role is to support and manage the process of identifying, attracting, evaluating, and hiring medical staff to work across Island Health's hospitals and sites.

To report any leadership changes, please email medstaffgovernance@islandhealth.ca.

Organizational charts are posted monthly on the intranet and you can access [here](#).

Recruitment Process

A Division Head or Section Head will identify a recruitment need and communicate this information to the Department Head; identifying if the request is a replacement or a new position and will communicate with the Medical Staff Recruiter (MS Recruiter). The MS Recruiter will send out the appropriate Impact Analysis (IA).

The purpose of the Impact Analysis is to identify any potential impacts that requests may have and to ensure alignment with local, geographic, clinical department, and strategic direction. The goal is to identify the impact that an individual provider service has on the structure around it (e.g., Contracts, compensation, resources, etc.)

The Impact Analysis goes to the Medical Planning & Credentialing Committee (MPCC) for review and is subsequently presented to the Health Authority Medical Advisory Committee (HAMAC) for endorsement. Following this, HAMAC presents to the Board of Directors (BoD) for final approval.

Exceptions

Replacement positions can be posted ahead of approval if urgent. They can be approved through Medical Planning and Credentialing Committee (MPCC) and then sent to VP Medicine, Safety & Quality and CMO to start immediate recruitment. The Impact Analysis is then presented to the HAMAC for endorsement and then the BoD for approvals.

There are two types of IA:

- Fee-For-Service (FFS) (Medical On-Call / Availability program (MOCAP))

- Group contracts.

Urgent Postings

If a department has an urgent need to fill a net new position to the Ministry Strategic Human Resources Plan (MSHRP) and it has been approved at MPCC, the recruiter can send a request to the Vice President, Medicine, Quality and Chief Medical Executive to post ahead of HAMAC/Board approvals and start recruitment. Approval of funding and the associated marketing is done at a site/program level. For more information on urgent shift opportunities, please click [here](#).

For more information or support contact your recruitment coordinator directly, please email MedStaffRecruitment@islandhealth.ca.

Medical Staff Job Opportunities

Explore current job opportunities, please click [here](#). For additional information on any of our postings, please email MedStaffRecruitment@islandhealth.ca.

Enhanced Medical Staff Support (EMSS)

The [Enhanced Medical Staff Support \(EMSS\)](#) team assists medical leaders in addressing concerns related to the conduct, professionalism, and workplace interactions of medical staff. EMSS aims to foster a respectful, constructive, and supportive work environment, helping medical leaders resolve issues fairly while promoting professional growth among staff.

All members of the medical staff contribute to workplace culture, and medical leadership is responsible for ensuring concerns are addressed responsibly. EMSS encourages early, informal resolutions whenever possible, supporting a culture of respectful communication and constructive conflict resolution.

Stages Of Intervention

EMSS provides support at multiple stages, helping medical leaders address concerns proactively and effectively. These interventions include coaching, facilitation, and structured guidance for resolving workplace issues.

Stage 1: INTERVENTION	Supportive and documented. May recommend apology, relevant course, coaching.
Stage 2: INTERVENTION	Supportive and documented. May recommend another course (PACE), further coaching.
Stage 3: INTERVENTION	To HAMAC, possible suspension/removal of privileges.
Stage 4: CRISIS	Immediate suspension of privileges (i.e. intoxicated at work, acute psychosis/competency issue/danger to staff, patients or self).

EMSS Resources

EMSS offers a range of services to support medical staff and leadership, including:

- Teaching and coaching for Department Heads and Division Heads
- Meeting facilitation support for leaders addressing EMSS issues, including an escalation process for urgent concerns
- Comprehensive [EMSS Toolkit](#), including Respectful Workplace Procedures
- Case management and documentation support to meet institutional requirements
- Respectful Workplace Procedures for Medical Staff, Resident Doctors, and Medical Students
- Access to the Respectful Workplace Policy

EMSS Support Team

- For inquiries or concerns, medical staff can contact: EMSS@islandhealth.ca
- For concerns involving non-medical staff, medical staff should contact Respectful Workplace at respectfulworkplace@islandhealth.ca. Respectful Workplace will notify EMSS when medical staff raise concerns about non-medical staff.

Respectful Workplace Defined

A Respectful Workplace promotes courtesy, civility, consideration, and compassion. It actively discourages bullying, harassment, and discrimination, while valuing the diverse perspectives and experiences that individuals bring to the organization.

The [Respectful Workplace Procedures](#) complement the [Respectful Workplace Policy](#) and provide guidance for:

- Medical Staff, Resident Doctors, and Medical Students addressing workplace concerns
- Non-medical staff reporting concerns about medical staff, residents, or students

To review the EMSS procedures for Medical Staff, Resident Doctors, and Medical Students, please click [here](#).

Urgent and Crisis Support

- If you are in crisis and need immediate support, contact the Vancouver Island Crisis Line at 1-888-494-3888
- If your concern involves the physical safety of yourself or others, notify an organizational leader immediately, and contact Protection Services/security, 911, and/or police/RCMP as appropriate

MEDICAL STAFF GOVERNANCE, CREDENTIALING AND PRIVILEGING

Governance Team

The [Governance Team](#) is strategically aligned with Island Health Leadership and the Health Authority Medical Advisory Committee (HAMAC) and HAMAC Standing Sub-Committees.

The Governance team:

- Oversees the implementation of strategic initiatives to support all aspects of Medical Staff governance and engagement in accordance with the Medical Staff Bylaws (MSB) and Medical Staff Rules (MSR), and Island Health policies and procedures
- Supports the development, implementation, and administration of the Medical Staff Department Structure

Credentialing and Privileging (C&P)

The [Credentialing and Privileging \(C&P\)](#) team oversees the processes required under the Medical Staff Rules and Bylaws to ensure physicians, midwives, dentists, and nurse practitioners are qualified and authorized to practice within Island Health.

Credentialing verifies a practitioner's education, training, and licensure, while privileging grants approval to perform specific clinical services based on proven skills. Together, these processes protect patient safety, reduce organizational risk, and ensure providers practice within their approved scope.

Medical staff will interact with the C&P team during:

- Initial appointment, provisional to active progression, and reappointment
- Requests to add, modify, pause, or relinquish privileges
- Ongoing credential maintenance and updates
- Questions or support related to credentialing and privileging

At Island Health, we provide [guidelines, quick reference guides, tools and additional resources](#) to help medical leaders and providers navigate and understand the Credentialing and Privileging processes.

For more information or support you can email the C&P at credentialing_office@islandhealth.ca.

MEDICAL STAFF COMMITTEES

Health Authority Medical Advisory Committee (HAMAC)

The Health Authority Medical Advisory Committee ([HAMAC](#)) is the senior advisory committee of the Medical Staff as defined in Article 9 of the Bylaws.

- The HAMAC makes recommendations to the Board with respect to:
- Appointment and review of members of the Island Health Medical Staff, including the delineation of clinical and procedural Privileges
- The quality, effectiveness, and availability of Medical Care provided within Island Health Facilities and Programs
- The establishment and maintenance of professional standards in Facilities and Programs operated by Island Health in compliance with all relevant legislation, the Bylaws, Rules, and policies
- The resources required by the Medical Staff to meet the needs of the population served by Island Health including, but not limited to, the availability and adequacy of existing resources to provide appropriate patient care
- CPD of the Medical Staff
- The professional and ethical conduct of members of the Medical Staff; and
- Disciplinary measures for violation of the Bylaws, Rules, and policies governing the conduct of the Medical Staff

The HAMAC receives information from its subcommittees, Medical Departments, and clinical Programs, and provides advice to the Board based on that information.

HAMAC Standing Sub-Committees

The standing subcommittees of the HAMAC provide the detailed information to the HAMAC.

Medical Education Resource Committee (MERC)

The [MERC](#) is a standing committee of HAMAC that serves in an advisory role, making recommendations and reporting on the identification and prioritization of clinician learning needs, including regional, rural, Indigenous Health, and cultural learning. It supports Departments, Divisions, and MSAs in planning, coordinating, tracking, and evaluating continuing education and informal learning; promotes evidence-based educational responses to quality assurance challenges; and endorses educational content on the Medical Staff website, Island Health Libraries, and the Learning Hub. MERC also promotes interdisciplinary and provincial learning initiatives, liaises with UBC and other academic and simulation partners to coordinate educational opportunities, supports Medical Staff onboarding and ongoing process improvement, and advances learning through an equity, diversity, and inclusion lens.

Medical Planning and Credentials Committee (MPCC)

The [MPCC](#) serves as the Credentials Committee for the Health Authority, as outlined in Article

4.3 of the Bylaws. It reports and makes recommendations to HAMAC regarding Medical Staff recruitment, credentialing, privileging, appointment and reappointment, performance review, and recognition. The MPCC also reviews LMAC recommendations on local Privileges requests, facilitates resolution of recruitment and privileging issues unresolved at the Department or Division level, and provides advice on MAA projects and initiatives related to the Medical Staff.

Legislative Committee (LC)

The [Legislative Committee \(LC\)](#) advises HAMAC on the development, implementation, monitoring, and revision of the Island Health Medical Staff Bylaws, Rules, and Policies. Changes to the Bylaws require written approval from the CEO, Board Chair, and Minister of Health, while changes to the Rules require written Board approval. The Rules must be regularly reviewed and updated to reflect changes in the clinical practice environment. The LC also reviews the impact of legislation on the quality of medical care and medical staff performance at HAMAC's request and ensures the Rules embed the organization's culture, including commitments to diversity, equity, inclusion, and cultural safety.

Health Authority Medical Quality Committee (HAMQC)

Reporting to HAMAC, the [HAMQC](#) aligns with Island Health's quality improvement structure and committees to provide advice and guidance on quality improvement and patient safety matters within the purview of the Medical Staff. It makes recommendations to HAMAC regarding Medical Staff quality assurance data and measures, quality improvement initiatives, the development and implementation of QA/QI programs, and Medical Staff-related issues identified by HAMAC that may impact the quality of patient care.

Local Medical Advisory Committee (LMACs)

The LMACs are local advisory committees to the HAMAC on Medical, Dental, Midwifery, and Nurse Practitioner clinical practice and governance matters, as described in Article 8 of the Medical Staff Bylaws.

The [LMACs](#) monitor the quality of medical care in a geographic area and report any Quality improvement or assurances to the HAMAC. The LMAC is a site-specific subcommittee of the HAMAC that fulfills the same duties and functions as HAMAC at the local level. It is usually chaired by the Chief of Staff (COS) and Site Medical Director but may be chaired by another member of the local Medical Staff. The LMAC will report to the HAMAC on its minuted business and approved motions and bring reports and requests for action or consultation to the LMAC from HAMAC.

For more information or support contact the Governance Team at:
Governance Coordinators, please email medstaffgovernance@islandhealth.ca.
Governance Assistants, please email medstaffgovassistants@islandhealth.ca.

For more information on the HAMAC or the HAMAC Standing Subcommittees, please refer to the Medical Staff Rules (Section 2.5.9), please click [here](#).

MEDICAL STAFF QUALITY AND IMPROVEMENT

The Medical Staff Quality and Improvement Team is here to develop quality and system improvement capacity and organize for collective impact. Medical leaders can get quality improvement project support, training and funding through a variety of channels:

- The **Physician Quality Improvement** (PQI) team provides a range of QI education opportunities, ranging from self-paced online modules to a year-long Cohort training program. For more information, please click [here](#). To learn more about the flourishing Alumni/Alumna community and relevant opportunities, please click [here](#)
- The **Spreading Quality Improvement** (SQI) team takes successful QI projects and grows them to maximize system impact. For more information, please click [here](#)
- The **Health System Redesign** (HSR) program provides sessional funding support to ensure physician inclusion in system-level improvement. For more information, please click [here](#)
- The **Choosing Wisely** program supports a range of clinical improvement work under the umbrella of Choosing Wisely Canada. For more information, please click [here](#)

For all inquiries, please email PQI@IslandHealth.ca.

PATIENT SAFETY AND QUALITY

Patient Safety And Quality

The [Quality, Safety, and Improvement \(QSI\) portfolio](#) works to create, support, and sustain systems that enable integrated quality and safety at the patient/health-care provider interface.

Patient Safety & Learning System (PSLS)

The [Patient Safety and Learning System](#) (PSLS) is a web-based tool that BC's health authorities use to report and learn from patient safety incidents, good catches, and hazards. [Patient Safety and Learning System \(PSLS\) Educational video](#) has been created specifically for Medical Staff at Island Health. This video introduces PSLS and demonstrates how to find and use the reporting system.

[New Data Request Intake Form](#) with more information, please click [here](#).

For issues reporting or accessing PSLS, please email psls@islandhealth.ca.

Patient Care Quality Office (PCQO)

The [Patient Care Quality Office](#) is pleased to announce a new way for our patients and family

members to submit feedback. An [online form](#) has been created using RedCap to allow patients to electronically register compliments and concerns. [Local Level Resolution Tips](#) with more information, please click [here](#).

For more information or support, please email patientcarequalityoffice@islandhealth.ca.

CLINICAL GOVERNANCE MODEL

The Clinical Governance Model is a framework of local, regional and organization-wide committees and support resources that Island Health uses to make decisions that improve the quality and safety of care in every sector and community. Medical Leaders are involved at every level of the structure, which can be accessed [here](#).

MEDICAL STAFF ASSOCIATIONS

As outlined in the Island Health Medical Staff Rules, all physicians, midwives, dentists, and nurse practitioners are members of a site's Medical Staff Association. MSAs exist to speak for the medical staff in general and the member of the medical staff in particular.

As a program of the Specialist Services Committee, the Facility Engagement Initiative supports medical staff to engage with the health authority and with each other. Each of the 11 MSAs across the Island Health region receives Facility engagement funding annually from Doctors of BC to support this work.

More information on Medical Staff Associations and Facility Engagement, please click [here](#).

There are [11 MSAs across Island Health](#).

- [Nanaimo Medical Staff Engagement Society](#)
- [Cowichan District Medical Society](#)
- Campbell River Medical Staff Engagement Initiative Society
- CVH Medical Staff Association (CVH MSA)
- Lady Minto Gulf Island MSA
- Mount Waddington Facility Engagement Committee
- [South Island MSA](#)
- Saanich Peninsula Physician Society
- Tofino Medical Staff Engagement Society
- West Coast General Hospital (WCGH) / Port Alberni MSA
- North Island 'Namgis MSA

EXTERNAL PHYSICIAN FUNDING

In British Columbia, external funding for physicians is largely coordinated through the Joint Collaborative Committees (JCCs), a partnership between Doctors of BC and the provincial government, as well as directly through the Ministry of Health. These funding streams are designed to enhance patient care, advance system redesign, and support physician professional development. The information below provides links to each of the external physician funding opportunities.

The Practice Support Program (PSP)

The [PSP](#) provides family physicians with services that are designed to improve the efficiency of their practice, improve the utilization of health technology, and more effectively administer their patient panel.

Primary Care Network (PCN)

[PCNs](#) are local primary care providers, with patient medical homes (PMHs) as their foundation. Enabled by partnerships between local family practice divisions, regional health authorities, First Nations, and other community partners.

Division of Family Practice (DoFP)

The [DoFP](#) supports family physicians in community-based groups to achieve health care goals. Divisions engage with community and health care partners to improve patient care and physician satisfaction.

Shared Care Partners for Patients

The [Shared Care Partners for Patients](#) bring physicians, patients, families, and partners together for integrated care.

Physician Quality Improvement (PQI)

The [PQI](#) is a professional development and education program for community or facility-based medical staff who want to enhance their quality improvement capacity, network with colleagues, and transform our local health system through continuous improvement.

The Health System Redesign (HSR)

The [HSR initiative](#) encourages physician participation in health authority service redesign and quality improvement.

The Rural Education Action Plan (REAP)

The [REAP](#) supports the training of physicians in rural areas and offers undergraduates and post-graduate residents the opportunity to in rural regions. It also increases rural physicians to participate in medical school selection process.

The Rural Continuing Medical Education (RCME)

The [RCME](#) Community and Individual Programs fund and support rural doctors to update and enhance their medical skills and credentials for rural practice.

The Facility Engagement Initiative (FEI)

The [FEI](#) launched in 2014 to enhance communication and collaboration between health authorities and facility-based physicians, leading to increased meaningful physician involvement in decision-making.

Rural Retention Program

The [RRP](#) provides financial incentives, calculated through a community-specific isolation point system, to attract and stabilize the supply of physicians practicing in rural areas covered by the Rural Practice Subsidiary Agreement.

The Northern and Isolation Travel Assistance Outreach Program (NITAOP)

The [NITAOP](#) is a provincial initiative designed to bridge the healthcare gap in British Columbia's most remote regions. By providing dedicated funding, the program enables specialized physicians to travel to eligible rural and isolated communities, ensuring residents receive essential medical services that would otherwise be inaccessible.

Rural Emergency Enhancement Fund (REEF)

The [REEF](#) supports rural British Columbia physicians who balance full-scope family practice with reliable, designated emergency department coverage. It aims to recognize the comprehensive nature of rural medicine and ensure consistent ER services in these communities.

Rural Family Practitioner Locum Program (RFPLP)

The [RFPLP](#) assists Family Practitioners (FPs) in rural communities with seven or fewer physicians, to obtain subsidized locums for vacation relief, Continuing Medical Education (CME), and health reasons.

Rural Family Practitioner Anaesthesia Locum Program (RFPALP)

The [RFPALP](#) program assists Family Practitioners with enhanced anaesthesia skills (FPAs) in rural communities with seven or fewer FPA physicians, to obtain subsidized locums for vacation relief, Continuing Medical Education (CME), and health reasons.

Rural Family Practice Maternity Locum Program (RFPMLP)

The [RFPMLP](#) supports eligible rural family practitioners (FPs) who provide intrapartum maternity care services secure subsidized periods of leave from their practices for purposes such as Continuing Medical Education (CME), vacation and medical leave.

Rural Family Practice Enhanced Surgical Skills OB Locum Program (RESSO)

The [RESSO](#) help eligible rural family practice physicians, who provide eligible core surgical obstetric services, secure subsidized periods of leave from their practices for purposes such as Continuing Medical Education (CME) and vacation.

Rural Specialist Locum Program (RSLP)

The [RSLP](#) assists specialists in rural communities to obtain subsidized locums for vacation relief, Continuing Medical Education (CME), and health reasons. A & B communities may be eligible

with less than seven eligible specialists. C & D communities may be with less than five eligible specialists.

Isolation Allowance Fund (IAF)

The [IAF](#) is available for physicians providing necessary medical services, in eligible Rural Practice Subsidiary Agreement (RSA) communities with fewer than four physicians and no hospital, who do not receive Medical On-Call Availability program, call-back or Doctor of the Day payments.

Recruitment Incentive Fund (RIF)

The [RIF](#) provides financial incentives to recruit physicians to eligible rural communities. It combines these targeted incentives with collaborative physician supply planning between B.C. health authorities and local doctors to ensure rural areas have the medical staffing they need to thrive.

Recruitment Contingency Fund (RCF)

The [RCF](#) provides annual funding to help eligible rural communities overcome challenges in filling physician vacancies. These grants can be used to enhance new physician incentives or cover specific recruiting expenses via applications submitted to the Joint Standing Committee on Rural Issues.

Supervisors for Provisionally Licensed Physicians (SPLP)

The [SPLP](#) provides compensation to supervising physicians who are assigned by a health authority to assess the knowledge, competencies, and clinical skills of provisionally licensed physicians who reside and practice in Rural Practice Subsidiary Agreement ([RSA](#)) communities.

PHYSICIAN MASTER AGREEMENT (PMA)

The Physician Master Agreement ([PMA](#)) governs the relationship and financial arrangements between the government of British Columbia and the Doctors of BC. In January 2023, physicians across the province approved the planned 2022-2025 PMA, with a total of 5,591 votes cast and 94.15% endorsing the agreement.

The 2022-2025 PMA includes a number of new regulations and amendments that must be adopted by regional health authorities. This page will serve as a resource and information hub for Island Health's implementation activities.

For more information, check the [Ministry of Health website](#) or contact physiciancontracts@islandhealth.ca.

Hours Reporting and After-Hours Premiums Implementation

The PMA, effective April 1, 2023, states all new or renewed service contracts include mandatory daily hours reporting, and after-hours premiums (AHPs) became payable to physicians on Alternative Payment Subsidiary Agreement service contracts or salary agreements.

For more information on Hours Reporting and After-Hours Premiums Implementation, please

click [here](#).

HEALTH PROFESSIONS ACT, REGULATIONS, BYLAWS AND STANDARDS

Physicians are asked to familiarize with the Acts, Bylaws, Rules, and College Standards. Registrants are encouraged to become familiar with them and review regularly as they are routinely updated over time.

Medical Staff Bylaws (MSB)

Island Health's [Medical Staff Bylaws](#) set out the conditions under which members of the medical staff serve the facilities and programs operated by Island Health, provide patient care, and offer medical advice to the Board of Directors.

Medical Staff Bylaws are established when adopted by the Board of Directors and approved by the Minister of Health of British Columbia. All medical staff are required to sign an agreement to the Medical Staff Bylaws before working with Island Health.

Medical Staff Rules (MSR)

Island Health's [Medical Staff Rules](#) outline the details of the organization of the medical staff and the day-to-day processes by which the medical staff provide patient care. Medical Staff Rules are established by the Board of Directors upon the recommendation of the Health Authority Medical Advisory Committee (HAMAC) and the Medical Staff.

The Rules do not require approval from the Minister of Health. **All Medical Staff are required to sign an agreement with the Medical Staff Rules before working with Island Health.**

Governance for the operation of Island Health's facilities and programs, and for medical staff responsibility, is provided for by the following legislation:

- **Hospital Act**
Hospital care in British Columbia is governed under the [Hospital Act](#). This Provincial legislation sets out requirements of hospitals
- **Health Authority Act**
This [Health Authority Act](#) is Provincial legislation that sets our requirements of Regional Health Boards
- **Health Professionals Act**
The [Health Professionals Act](#) provides a common regulatory framework for health professions in British Columbia

This provincial legislation provides for the registration and licensing of health professionals by their respective College. Each regulatory College has its own bylaws and regulations. Regulations are created by government for each individual health profession governed under the Act. These regulations contain a scope of practice statement and a set of restricted activities

that outline what members of that profession are authorized to do.

The Regulations also designate the regulatory college for each health profession, which for Island Health medical staff includes:

- [College of Physicians & Surgeons of British Columbia](#)
- [College of Dental Surgeons of British Columbia](#)
- [College of Nurses and Midwives of British Columbia](#)

Each regulatory college has its own bylaws. The bylaws set out the details of the operation of the organization, including the duties and responsibilities of a governing board, committees and the registrar; qualifications for registration; and the regulation of professional conduct and ethics.

For detailed information on the regulation of health professionals in our province, please visit the [BC Ministry Health Profession Regulation website](#).

The College of Physicians and Surgeons of British Columbia Standards And Guidelines

The College develops, practice standards, professional guidelines and legislative guidance to assist physicians and surgeons in meeting high standards of medical practice and conduct.

The topics addressed focus on specific issues that are relevant to the practice of medicine.

- [Practice Standards](#)
- [Professional Guidelines](#)
- [Legislative Guidance](#)
- [Code of Ethics and Professionalism](#)
- [Registrant Engagement](#)

Registrants are encouraged to become familiar with these documents and review them regularly as they are routinely updated over time.

MEDICAL STAFF WELLBEING

Maintaining personal health and well-being is a professional priority. Below are practical, trusted resources to support physicians, medical learners, leaders, and educators.

These resources focus on the personal well-being of medical staff and include mental health supports, professional development tools, peer connections, and organizational wellness initiatives.

For more information on health and well-being, please click [here](#).

For the Telus Health Website, please click [here](#).

Physician Health Program (PHP) of British Columbia

In Crisis - 24/7 Helpline: 1-800-663-6729

PHP Direct Line: 604-398-4300

Physician Peer Support Group, please email peersupport@physicianhealth.com

For more information, please click [here](#).

Under Critical Incident Stress Management

[WorkSafeBC Critical Incident Response \(CIR\) Program](#)

Toll Free: 1-888-922-3700 (7 days/week, 9 am – 11 pm)

Individual or Team-based CIR support

Cumulative Stress Management Program

Email our Psychological Health & Safety team (psychhealthsafety@islandhealth.ca) to learn more about setting up cumulative stress supports for your team.

For Peer Support for healthcare workers:

[Care to Speak Peer Support](#)

Toll Free: 1-866-802-7337 (M-F, 9 am-9 pm PST)

Text/SMS support: 1-866-802-7337

Online Chat

Resident Doctors Crisis Support

1-888-877-2722

For more information, please click [here](#).

UBC Resident Counselling and Peer Support (RCAPS) Office

In Crisis - 24/7 Helpline:

1-800-663-6729

RCAPS Direct line: 604-875-4111 ext. 23055

For more information, please click [here](#).

UBC Indigenous Counselling & Cultural Teachings

In Crisis - 24/7 Helpline:

1-800-663-6729

RCAPS Direct line: 604-875-4111 ext. 23055

For more information or support, please click [here](#).

ADMINISTRATIVE AND CLINICAL RESOURCES AND SERVICES

Island Health Network Account And Email

You will receive an email containing your network login information, email address, and temporary password.

This account includes your Island Health email address.

Some communications contain confidential information that should not be shared outside of internal Island Health systems. **Please check your Island Health email regularly; this is a requirement of your service with Island Health.**

You can access your Island Health email account at any site using your Island Health network login or when off-site, by typing <http://mail.islandhealth.ca> into your web browser.

If you have not received these details, please email MedStaffPrograms@IslandHealth.ca.

Photo ID And Access Card

Your [photo ID and access card](#) (if applicable) are ordered [here](#). If you lost or need to replace your photo ID, please contact photoID@islandhealth.ca

Parking Services offers information such as parking office hours, bicycle storage, and alternative commuting options. To obtain information on physician parking rates and how to obtain a parking permit, please contact parking services directly:

- Physician Parking Annual Permit form, please click [here](#)
- Physician Parking Pay as you Go form, please click [here](#)
- South Island (Victoria, Cowichan Valley). Please email Parking@islandhealth.ca
- Central/North Island (Nanaimo, Comox Valley, North Vancouver Island), please email CIParking@islandhealth.ca

Bicycle Compounds

NRGH, RJH, and VGH offer secured bicycle compounds available to Island Health Employees. Access to these compounds is provided through proximity access cards. In order to gain access to these compounds contact your manager and have them fill out the [SECCON](#) request form available through Protection Services.

Additional Resources

Physician Registration and Licensing

All physicians and surgeons who practise in British Columbia must be registered and licensed with the College. The College ensures that only qualified, competent and ethical physicians and surgeons are granted registration and given a license to practise in British Columbia.

To Maintaining Registration and Licensing with The College of Physicians and Surgeons of British Columbia (CPSBC) , please click [here](#).

Electronic Health Records (EHR) Support, please email ehrprovidereducation@islandhealth.ca

or go to the EHR Support, please click [here](#).

Medical On-Call Availability Program (MOCAP)

The Medical On-Call Availability Program compensates physicians for on-call and availability coverage for new or unassigned patients requiring emergency care at a variety of facilities.

Please contact Medical Staff Contract Management when you are:

- Considering a MOCAP on call service, or changing an existing MOCAP contract
- Updating members of an existing MOCAP call group, or changing the group leader

The MOCAP application can be accessed on the [On-Call Scheduling System](#) link.

BC Guidelines

The BC Guidelines are clinical practice guidelines and protocols that provide recommendations to B.C. practitioners on delivering high quality, appropriate care to patients with specific clinical conditions or diseases. For more information, please click [here](#).

Island Health Clinical Order Sets

The Island Health Clinical Order Sets are available on the Island Health intranet and are [electronic](#) or [paper based](#).

For more information, please click [here](#) or email orderset@islandhealth.ca for additional support.

Therapeutics Initiative

[The Therapeutics Initiative](#) was established in 1994 by the Department of Pharmacology and Therapeutics in cooperation with the Department of Family Practice at The University of British Columbia with its mission to provide physicians and pharmacists with up-to-date, evidence-based, practical information on prescription drug therapy.

Emergency Care BC – Provincial Health Services Authority (PHSA) Network

The Emergency Care BC – Provincial Health Services Authority (PHSA) Network connects BC emergency practitioners with each other and with current, practical resources via four core programs: Clinical Resources (includes procedural videos), Innovation, Continuing Professional Development, and Real-Time Support – all integrated under one roof.

For more information or to register, please click [here](#).

Physician Professional Practice

The Physician Professional Practice applies to all registered Physicians.

For more information, please click [here](#).

[LearningHub Account Registration](#)

LearningHub is our learning management system (LMS) providing access to online and classroom courses. All Island Health employees must create a LearningHub account using their Island Health email address. Employees transferring from another BC Health Authority should update their existing profile with their new Island Health email address.

Follow the prompts on the [LearningHub homepage](#) to create your LearningHub account.

Common Learner Issues

- Please scroll up to visit the **My Profile & Take a Course** tabs for guides that may be of assistance to you before submitting a ticket.
 - [Setting Up Your LearningHub Account](#)
 - [Manage My Profile](#) (e.g. change login information, verify Employee ID) / [Merge Accounts](#)
 - [Finish a Course & Get Certification](#)
 - [Find a Course](#) / [Course Registration](#) (e.g. rescheduling) / [Cancel Course](#)
 - [Upcoming Classroom Course](#)
- LearningHubAdmin do not have any virtual Classroom course links (i.e., Skype/Zoom links). Contact the designated Course Manager and/or refer to the course registration confirmation email for information.

DEFINITIONS

Acceptance (Contracts)	<p>“Yes” = a willingness to enter into the contract on the terms offered</p> <p>Must be unconditional</p> <p>Must be brought to the attention of the offerer</p> <p>Can be expressed in writing, verbally, or by conduct.</p>
Active	Physician which is licensed and trained to practice medicine in British Columbia and licensed by the College of Physicians and Surgeons of British Columbia (CPSBC). It is eligible to be enrolled in the Medical Services Plan (MSP).
Appointment	The process by which a Physician, Dentist, Midwife or Nurse Practitioner becomes a member of the Medical Staff of the Island Health.
Best Possible Medication History (BPMH)	A “snapshot” of the patient’s current medication, obtained through a systematic process of interviewing the patient or family and review of at least one other reliable source of information. The BPMH attempts to document all current prescription and non-prescription medication, including drug name, dose (amount or volume), route, frequency, and duration.
Board of Directors	The governing body of the Island Health.
Breach of Contract	<p>When one party in a contract fails to perform precisely and exactly his or her obligations under the contract</p> <p>This can be actual or anticipatory</p>
Bylaws	The Island Health Medical Staff Bylaws.
Certainty of Terms (contracts)	There is a requirement for certainty of all essential terms.
Chief Executive Officer (CEO)	The person is engaged by the Island Health Board of Directors to provide leadership to the Health Authority and to carry out the day-to-day management of the Facilities and Programs operated by the Health Authority in accordance with the Bylaws, Rules, and policies of Island Health.
Chief Medical Executive (CME)	The senior medical administrator appointed by the Chief Executive Officer (CEO), currently titled Vice President Medicine, and Quality.
Chief Nursing and Allied Health Officer (CNAHO)	A registered nurse appointed by the CEO of Island Health who has Health- Authority-wide responsibility and is accountable for providing senior leadership and strategic direction for the professional practice of nursing and allied health.

Chief of Staff (COS)	The hospital on-site deputy of the CME who is a member of the Medical Staff. The COS is responsible for the assurance of the quality of Medical Care and practice provided by members of the Medical Staff. The COS is appointed by the CME in consultation with the local Medical Staff.
Credentialing	The process of screening and evaluating qualifications includes appropriate training, licensure, experience, references, professional college requirements, and practice insurance necessary for Appointment to the Island Health Medical Staff.
Consensus Ad Idem	At a meeting of the minds when both parties accept that they want to be parties to the contract
Consideration (contracts)	The price of a promise Some benefits or advantages of one party and a corresponding burden, cost, or prejudice to the other party Must be valuable but the courts tend to leave up to the parties what is valuable
Department Head	The Department Head is accountable for the overall administration, leadership, and clinical performance of a specific department within Island Health. Department Heads work in partnership with their respective co-lead(s), as appropriate. They are responsible for the quality of medical care provided to patients by members of the Department, medical staff governance, operational and strategic planning, and workforce planning within the Department. The Department Head reports to CME and is appointed by the Board.
Division	A component of a Department composed of members with a clearly defined sub-specialty interest.
Division Head	The Division Head is responsible for the overall administration, leadership, and clinical performance of a specific division within Island Health. Division Heads work in partnership with their respective co-lead(s), as appropriate. They are responsible for the quality of medical care provided to patients by members of the Division, medical staff governance, operational and strategic planning, and workforce planning within the Division. The Division Head reports to a Department Head, except in the case of Division Heads of the Standalone Divisions, who report to the CME or their delegate. Division Heads' role is recruited in alignment with organizational policy.
Duty of Honesty	Parties must not lie or knowingly mislead each other

Enhanced Medical Staff Support (EMSS)	An administrative team of Medical Affairs that supports Medical Leaders by assisting them to address professional practice issues in the workplace by enhancing their capacity to identify, understand, manage, and resolve these issues effectively.
Executive Medical Director (EMD)	An Executive Medical Director is a senior medical leader accountable for clinical governance and strategic and operational leadership over a defined portfolio. This role is expected to work in collaboration with other senior leaders within the organization, as appropriate. This role implements organizational strategy, oversees quality assurance programs, coordinates clinical leadership, and manages the performance and effectiveness of assigned medical services. The Executive Medical Director reports to the CME and is recruited in alignment with organizational policy.
Facility	A health care Facility as defined by the Health Authorities Act.
Fellow	A Physician who has completed an accredited specialist residency-training Program from a recognized university who has been accepted by Island Health for further training in a clinical discipline.
Freedom of Information and Protection of Privacy Act (FOIPPA)	A Provincial Act that regulates the information and privacy practices of public bodies such as government ministries, local governments, crown corporations, police forces, hospitals, and schools.
Health Authority Medical Advisory Committee (HAMAC)	The advisory committee to Island Health on Medical, Dental, Midwifery and Nurse Practitioner practice matters, as well as quality-of-care issues, as described in Article 8 of the Medical Staff Bylaws.
Frustration (contracts)	Contract ends when the circumstances around the existing contract subsequently change so drastically that further performance would be impossible or radically different from what the parties intended No compensation for wrongful dismissal or breach of contract
Health Record	A digital or hard-copy version of the patient medical chart.
Local Medical Advisory Committee (LMAC)	A local advisory committee to the HAMAC on Medical, Dental, Midwifery, and Nurse Practitioner clinical practice and governance matters, as described in Article 8 of the Medical Staff Bylaws.
Local Quality and Operations Committee (LQOC)	A local committee composed of medical and administrative leaders managing quality assurance, quality improvement, and operational efficiency and effectiveness at a given site.

Medical Care	For the purposes of this document, Medical Care includes the clinical services provided by Physicians, Dentists, Midwives, and Nurse Practitioners.
Medical Department	A major component of the Medical Staff Organization established by Article 8 of the Bylaws and composed of members with common clinical or specialty interest. The Department to which a member of the medical staff is assigned according to his/her training, and where the member delivers the majority of care to patients. All members of the Medical Staff must belong to, and fulfill the responsibilities of their Department.
Medical Director	An Active member of the Medical Staff who holds an Administrative role reporting directly to an Executive Medical Director.
Medical Lead	An Active member of the Medical Staff who holds an Administrative role reporting directly to a Medical Director.
Medical Planning and Credentials Committee (MPCC)	A subcommittee of the HAMAC responsible for making recommendations on Credentialing, Privileging, Appointment, Reappointment, and regular review of members of the Medical Staff.
Medical Staff	The Physicians, Dentists, Oral Surgeons, Midwives, and Nurse Practitioners who have been appointed to the Medical Staff, and who hold a permit to practice Medicine, Dentistry, Midwifery, or Nursing as a Nurse Practitioner in the Facilities and Programs operated by Island Health.
Medical Staff Association (MSA)	The component of the Medical Staff Organization, established by Article 11 of the Bylaws, is to represent and advocate for the Medical Staff in general and to speak for the individual Medical Staff members, and to bring matters of general concern to their LMACs and to HAMAC. All members of the Medical Staff must belong to and fulfill the responsibilities of the MSA.
Medical Staff Organization	The organization of the Medical Staff was established by Article 2 of the Bylaws in a manner to be advisory and accountable to the Board, through the HAMAC on matters of Medical Care of patients.
Medical Staff Rules (Rules)	The Rules approved by the Board of Directors governing the day-to-day management of the Medical Staff in the Facilities and Programs operated by Island Health.
Medical Student	A Physician-in-training who has not yet received a degree to practice Medicine.

Midwife	A member of the Medical Staff duly licensed by the British Columbia College of Nurses and Midwives (BCCNM) and entitled to practice Midwifery in British Columbia.
Nurse Practitioner	A member of the Medical Staff duly licensed by the BCCNM and entitled to practice as a Nurse Practitioner in British Columbia.
Offer (Contracts)	A statement or some other indication that a party is prepared to enter into a contract on certain terms. This must be clear, unequivocal, direct, and with certainty of terms. May be terminated by revocation, counteroffer, at any time.
Physician	A member of the Medical Staff duly licensed by the College of Physicians and Surgeons of British Columbia (CPSBC) and entitled to practice medicine in British Columbia.
Practitioner	A Physician, Dentist, Midwife or Nurse Practitioner who is a member of the Medical Staff of Island Health.
Privileges	A permit to practice Medicine, Dentistry, Midwifery, or nursing as a Nurse Practitioner in the Facilities and Programs operated by the Health Authority and granted by Island Health to a member of the Medical Staff, as set forth in the <i>Hospital Act and its Regulation</i> . Privileges describe and define the scope and limits of each Practitioner's permit to practice in the Facilities and Programs of the Health Authority.
Promissory Estoppel	When the promisor, after the contract was entered into, makes a promise to the promisee to waive or not enforce in some way a part of the contract and the promisee, relying on the promise, acts in some way to their detriment The promisor is now stopped from enforcing that part of the contract
Provisional	The provisional class of licensure permits a registrant to practice medicine with limits and conditions granted by the Registration Committee.
Quality Lead	The Quality Lead provides oversight for special skills or privileges a member may have. The Quality Lead supports the Department or Division Head with ensuring members have adequate credentials and currency for a specific set of specialized skills through the privileging process, ensuring appropriate professional development, and quality reviews, as required. The Quality Lead reports to the Department or Division Head and is recruited in alignment with organizational policy.

Resident	A Physician-in-trainer who has received a medical degree and who is undertaking additional specialty training in a Facility or Program owned or operated by Island Health.
Section	A component of a Division composed of members with clearly defined sub-specialty interests.
Section Head	The Section Head is responsible for the overall administration, leadership, and clinical performance of a specific section within Island Health. Section Heads work in partnership with their respective co-lead(s), as appropriate. They are responsible for Island Health Medical Staff Rules Page 8 the clinical, academic, quality and governance activities of a Section. The Section Head role is recruited in alignment with organizational policy.
Site Chief	The Site Chief is the medical leader responsible for a specific service at a site. The Site Chief works in partnership with their respective co-leads, as appropriate, to ensure the continuous provision of services at the site. They are responsible for credentialling and privileging, recruitment, local quality matters, and medical staff oversight and review. Site Chiefs are members of the LMAC and play a vital role as a liaison between medical staff, the local site leadership, and the organization at large. Site Chiefs report to the Chief of Staff and have an indirect reporting relationship with their respective Department and/or Division Head. The role is recruited in alignment with organizational policy.
Standalone Division	Standalone Divisions are separate structures from Departments and are comprised of medical staff from more than one Department working in the same specialized field of practice.
Temporary Privileges	A permit to practice in the Facilities and Programs operated by Island Health that is granted to a member of the Medical Staff for a specified period of time, in order to meet a specific service need.
Trainee	A licensed Practitioner who has applied to and been accepted by Island Health for further clinical training.
Two Types of Terms (Contracts)	Express - Content has been expressed in oral and written exchanges between the parties Implied - Looks at surrounding circumstances and in particular the preceding course of dealings between the parties. - Looks at trade or business usage or customs that govern relationships - When legislation implies a term

Uncertainty Includes (Contracts)	The absence of an important matter. Ambiguity or Internal contradictions.
Unprofessional Behaviour	Behaviour that contravenes the code of professional conduct of a Practitioner's Regulatory College or professional association, or Island Health policy.