



**ADVENTIST HEALTH HONG KONG
MEDICAL / DENTAL STAFF RULES AND REGULATIONS
OF
HONG KONG ADVENTIST HOSPITAL – STUBBS ROAD
HONG KONG ADVENTIST HOSPITAL – TSUEN WAN
ADVENTIST MEDICAL CENTERS
(August 2022)**



**Extending the Healing Ministry of Christ—
Professionally We Serve, Personally We Care.**

Table of Contents

PREAMBLE	1
ARTICLE I: NAME AND DEFINITIONS	1
1.1 <u>Name</u>	1
1.2 <u>Definitions</u>	1
ARTICLE II: PURPOSES AND RESPONSIBILITIES	1
2.1 <u>Purposes</u>	1
2.2 <u>Responsibilities</u>	2
ARTICLE III: STAFF MEMBERSHIP.....	2
3.1 <u>Nature of Staff Membership</u>	2
3.2 <u>Basic Qualifications</u>	3
3.3 <u>Basic Responsibilities of Staff Membership</u>	3
3.4 <u>Duration of Appointments</u>	4
ARTICLE IV: CATEGORIES OF MEMBERSHIP	4
4.1 <u>Categories</u>	4
4.1.1 <u>Full time Employee Doctor</u>	4
4.1.2 <u>Full time Independent Contractor Doctor</u>	4
4.1.3 <u>Part time Employee Doctor</u>	4
4.2 <u>Associate Doctor</u>	5
4.2.1 <u>Duration of Appointment</u>	5
4.3 <u>Visiting Doctor</u>	5
4.4 <u>Temporary Doctor</u>	6
4.5 <u>In-active Doctor</u>	6
4.6 <u>Allied Health Professional</u>	6
ARTICLE V: APPOINTMENT AND REAPPOINTMENT.....	7
5.1 <u>Procedure for Appointment</u>	7
5.2 <u>Procedure for Reappointment</u>	7
5.3 <u>Procedure for Appeals</u>	8
ARTICLE VI: CLINICAL PRIVILEGES	8
6.1 <u>Exercise of Privileges</u>	8
6.2 <u>Delineation of Privileges in General</u>	8
A <u>Requests</u>	8
B <u>Basis for Determination of Privileges of Modifications</u>	9
6.3 <u>Conditions for Privileges of Allied Health Staff</u>	9
A. <u>Credentials</u>	9
B. <u>Admissions</u>	9
C. <u>Specific Limited Surgery</u>	9
6.4 <u>Temporary Clinical Privileges</u>	9
6.5 <u>Modification of Individual Clinical Privileges</u>	10
ARTICLE VII: CORRECTIVE ACTION.....	10
7.1 <u>Routine Corrective Action</u>	10
A. <u>Criteria for Initiation</u>	10
B. <u>Requests and Notices</u>	11
C. <u>Investigation</u>	11
D. <u>Medical/ Dental Executive Committee Action</u>	11
E. <u>Board of Governors Option</u>	11
F. <u>Procedural Rights</u>	11

7.2	<u>Summary Suspension</u>	12
A.	<u>Criteria and Initiation</u>	12
B.	<u>Medical/ Dental Executive Committee Action</u>	12
C.	<u>Procedural Rights</u>	12
7.3	<u>Automatic Suspension</u>	12
A.	<u>Licence</u>	12
B.	<u>Conviction of a Felony</u>	12
C.	<u>Medical Records</u>	13
D.	<u>Procedural Rights</u>	13
7.4	<u>Countinuity of Patient Care</u>	13
ARTICLE VIII: INTERVIEWS, HEARINGS, APPELLATE REVIEW		13
8.1	<u>Interviews</u>	13
8.2	<u>Hearings and Appellate Review</u>	13
A.	<u>Adverse Medical/Dental Executive Committee Recommendation</u>	13
B.	<u>Adverse Board of Directors Decision</u>	14
C.	<u>Procedure and Process</u>	14
ARTICLE IX: OFFICERS		
9.1	<u>Vice-President for Medical Affairs</u>	14
9.2	<u>Chief of Medical Staff</u>	15
9.3	<u>Vice President for Medical Affairs/Chief of Medical Staff will coordinate</u>	15-16
9.4	<u>Major Medical Service Chairman</u>	17
9.5	<u>Meeting of service staff shall be twice yearly or as deemed necessary</u>	17
ARTICLE X: CLINICAL SERVICES		18
10.1	<u>Services</u>	18
10.2	<u>Assignment to Services</u>	18
10.3	<u>Specialty Sessions</u>	18
10.4	<u>Clinic Sessions</u>	18
10.5	<u>Referral</u>	18
ARTICLE XI: COMMITTEES		18
11.1	<u>Medical/Dental Staff Committees</u>	18
11.1.1	<u>Medical/Dental Executive Committee</u>	18
11.1.2	<u>Credentials Committee</u>	19
11.1.3	<u>Infection Control Committee</u>	20
11.1.4	<u>Pharmacy & Therapeutic Committee</u>	20
11.1.5	<u>General Medical Staff Committee</u>	20
11.1.6	<u>Ethics Committee</u>	20
11.2	<u>Joint Conference Committee</u>	21
11.3	<u>Other Committee</u>	21
ARTICLE XII: MEETINGS		21
12	<u>Special Meetings</u>	21
ARTICLE XIII: DUTIES		22
13.1	<u>Active, Night, and Temporary Staff</u>	22-23
ARTICLE XIV: ADDITIONAL RULES AND REGULATIONS		23
ARTICLE XV: AMENDMENTS		24

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(Appendix 1 of Bylaws of Adventist Health Hong Kong)

PREAMBLE

As a Christian health care provider, the primary purpose of Adventist Health Hong Kong is to promote optimal patient care operating in accordance with the ethics, principles, and philosophy of the Seventh day Adventist Church.

The Medical/Dental staff of the hospitals/centers are responsible for the quality of medical/dental care in these hospitals/centers and must accept and assume this responsibility subject to the ultimate authority of the Board of Governors, standard accrediting bodies, Department of Health of the General Conference of Seventh-day Adventists and abide by the standard practices of the Department of Health of Hong Kong. The physicians/dentists practicing in Adventist Health Hong Kong hereby adopt these Rules and Regulations in order to provide for the organization of the Medical/Dental Staff, and to provide a framework for self-government in order to permit the Medical/Dental Staff to discharge its responsibilities in matters involving the quality of medical/ dental care, and to govern the orderly implementation of those purposes. These Rules and Regulations provide the professional legal structure for Medical/Dental Staff operation. Organize the Medical/Dental Staff relations with the Administration and the Board of Governors. These Rules and Regulations is also part of the By-laws of Adventist Health Hong Kong.

ARTICLE I: NAME AND DEFINITIONS

1.1 Name

The name of this organization shall be the Medical/Dental Staff of Adventist Health Hong Kong with special reference to Hong Kong Adventist Hospital – Stubbs Road and Hong Kong Adventist Hospital – Tsuen Wan as well as the Adventist Medical Centers.

1.2 Definitions

The Staff may be a single entity or separate entities working at different hospitals/centers but all under the rules and Regulations of Adventist Health Hong Kong. The official language of these Rules and Regulations will be English.

ARTICLE II: PURPOSES AND RESPONSIBILITIES

2.1 Purposes

The purpose of this organization shall:

- A. Be the formal organization structure through which:
 - 1. The privileges and rights of staff membership are defined.
 - 2. The obligations of staff member area clarified.
- B. Promote mutual co-operation between the Medical/Dental Staff, the administration and the board of Governors.
- C. Provide a means through which the staff may participate in the hospitals/centers' policymaking and planning process.
- D. Encourage research and educational activities in the interest of:
 - 1. Continuous improvement of patient care.
 - 2. Staff Development.
 - 3. Promotion of the concept of total health, which involves lifestyle changes-in addition to medical intervention.
- E. Initiate and maintain rules and regulations for the orderly function of the Medical/Dental Staff

2.2 Responsibilities

The responsibilities of the Medical/Dental Staff are fulfilled through the actions of its officers and committees:

- A. To evaluate the qualifications of each staff by submitted documents, diploma, certificates of training and membership in required specialty boards, and required licenses of Hong Kong Medical Council.
- B. Documentation of liability insurance
- C. Evidence of minimal required Continuing Medical Education credits.
- D. Promotion of activities and membership in multidisciplinary committees that improve patient care, Quality Improvement.
- E. To ensure compliance of the rules and regulations of the medical staff regulatory agencies.
- F. To identify community health need and set appropriate institutional goals.
- G. To modify the requirement for staff membership in locales outside Hong Kong and meet the statutes for qualifications.

ARTICLE III: STAFF MEMBERSHIP

3.1 Nature of Staff Membership

Membership on the staff of Adventist Health is a privilege which shall be extended only to professionally competent physicians, dentists, and allied health professionals. This privilege to practice their specialty is predicated upon continuously meeting the qualifications, standards and requirements set forth in these Rules and Regulations and as amended and/or supplemented from time to time, Appointment and reappointment to membership on the staff shall confer on the staff member only such clinical privileges and prerogatives as are granted by the Board in accordance with these Rules and Regulations, Review of performance and re-appointment are scheduled at three years intervals.

3.2 Basic Qualifications

Membership on the Medical/Dental Staff shall be restricted to physicians, dentists, and allied health professionals (psychologists, podiatrists assistants, etc.) who are under the jurisdiction of Hong Kong regulatory agencies and who meet the following documented requirements:

- A. Current local licensure
- B. Documented evidence of professional school diploma
- C. Evidence of post graduate training and experience and documented evidence of specialty designation by Medical Council or Hong Kong Academy of Medicine.
- D. Evidence of medical liability insurance coverage with the minimum as set by the Hospital Board.
- E. Acceptable character and professional references (at least one must be in the capacity to testify the clinical ability of his/her specialty), not more than one reference from the applicant's group practice/office or family member.
- F. No felony conviction or license suspension. Any legal case pending must have information-and explanation to be considered for staff memberships.

The Medical/Dental Executive Committee shall be entitled on application for membership and subsequently from time to time to require such documentary and other evidence as it may consider necessary to fulfill any of the above requirements.

3.3 Basic Responsibilities of Staff Membership

Each member of the staff shall at all times:

- A. Provide optimal patient care and abide by the Medical/Dental Staff Rules and Regulations and all other applicable Hospital polices.
- B. Abide by the code of Practice of Hong Kong Private Hospitals Association (HKPHA). (Note: we need to include Code of Practice of HKPHA as an appendix)
- C. Maintain medical/dental records as stated in the Rules and Regulations.
- D. Perform appointed responsibilities.

- E. Actively participate in peer review and the medical educational programs conducted by the hospitals/centers.
- F. Promptly notify the Vice President for Medical Affairs or Chief of Medical Staff of the Revocation or suspension of professional licensure or limitation, revocation, and Suspension of privileges in any other hospital.
- G. Abide by the adopted code of ethics as laid down by the Adventist Health_Hong Kong and the Hong Kong Medical Council.
- H. Provide services to patients at reasonable charges, Professional fees must be reasonable and in line with the philosophy and objectives of Adventist Health.
- I. The Physician recognizes and acknowledges that the information concerning patients or potential patients of the hospitals/centers and any information which he/she may gain access to by reason of discharging his/her obligations hereunder (the "Information"), are all of a confidential nature and shall remain the property of the hospitals/centers. The Physician agrees not to disclose or use in any way the Information except with the prior written consent of the hospitals/centers or patient or required to be disclose by law.

3.4 Duration of Appointments

Staff membership shall be according to the terms of the contract and evidence of annual Hong Kong licensure, Reappointment shall be reviewed tri-annually by the Credentials Committee for recommendation to the Medical/Dental Executive committee and the Board.

ARTICLE IV: CATEGORIES OF MEMBERSHIP

4.1 Categories

Medical/Dental Staff shall include the following categories:

- Full time Employee Doctor
- Full time Independent Contractor Doctor
- Part time Employee Doctor
- Associate Doctor
- Visiting Doctor
- Temporary Doctor
- In-Active Doctor

4.1.1 Full time Employee Doctor: hired by HKAH and full time clinic session in HKAH

4.1.2 Full time Independent Contractor Doctor: full time clinic session in HKAH

4.1.3 Part time Employee Doctor: hired by HKAH and part time clinic session in HKAH.

4.2 Associate Doctor

Associate Doctor shall consist of physician and dentist who:

- A. Are granted Clinic Sessions at the Out-patient Department or of Dental Clinic of the Hong Kong Adventist Hospital – Stubbs Road or Hong Kong Adventist Hospital – Tsuen Wan or Adventist Medical Centers.
- B. By accepting appointment, agree to assume all functions and responsibilities of appointment to the Associate Doctor, including, where appropriate, care of unassigned patients, emergency service care, consultation and participation in quality assessment and monitoring activities, including evaluation of provisional appointees.
- C. Are entitled to vote, hold office, to be elected to serve on Medical Staff committee, and serve as chairpersons of such committees.
- D. Clinic session granted to associate doctors require approval by the Administrative Council.

4.2.1 Duration of Appointment

Associate Doctors are independent contractors. The renewal of appointment will be reviewed every three years and may be renewed, amended, or revoked. Doctors reaching or above the age of 65 shall have their OP clinic privileges renewed annually subject to being medically fit to practice. Those reaching or above the age of 70 are encouraged to retire from OP clinic sessions.

4.3 Visiting Doctor

All physicians and dentists approved by the Medical/Dental Executive Committee and the Board for admission privilege will be considered visiting Doctor.

4.3.1 Active Visiting Doctor

Admit at least twenty (20) patients per year, or

Have at least twenty-five (25) patient contact per year. Such patient contacts shall include (a) same-day surgery or consultations performed on patients in the hospital (b) Pathology, anesthesiology and radiology consultations, or (c) being schedule to cover a minimum of ten percent (10%) of the Shift.

4.4 Temporary Doctor

4.4.1 Doctors who have been reviewed and approved by the credentials and Medical/Dental Executive Committee and awaiting Board action.

4.4.2 Doctors whose admission privileges have expired and renewal of admission privileges are in processing but not formally approved yet.

4.4.3 Under limited and exceptional circumstances, doctors who have not applied for admission privileges may request temporary staff privileges to admit and attend a specific patient; Office of Vice President for Medical Affairs or Chief of Medical Staff will review and allow/disallow these requests. If allowed, these are granted only in individual cases when the special skills and procedures required are beneficial to the well being of the patients.

4.4.4 Courtesy Doctors: When a visiting expert is invited from outside of Hong Kong to give a lecture/forum and/or is invited by the Hospital to demonstrate, assist, and observe an active staff member, Vice President for Medical Affairs/Chief of Medical Staff may grant a Temporary visiting doctor status. Medical Council of Hong Kong must approve of the visiting consultant. The patient(s) must be informed of the visiting doctor as part of the hospitals/centers team.

4.5 In-active Doctor

This Category describes doctors who have been given active membership/privileges but:

- A. moved away from Hong Kong temporarily or for extended period of more than six Months.
- B. retired from active practice.
- C. have not have patient encounter either at Hong Kong Adventist Hospital – Stubbs Road or Hong Kong Adventist Hospital – Tsuen Wan for 36 months.

To reinstate active staff membership, the doctor needs to fill out re-application form for the Credentials Committee's recommendation to the Medical/Dental Executive Committee.

4.6 Allied Health Professional

Allied Health Professionals include professionals supervised by the Rehabilitation Centers like physiotherapists, occupational therapists, speech therapists, podiatrists etc, psychologists, optometrists, dieticians and others whose applications are processed by Credentials Committee and recommended for approval by the Medical/Dental Executive Committee after careful investigation of supporting documentary proof of qualifications. This category may be consulted to see in-patients but does not have admission privileges. Assignment to clinic sessions requires a contract.

ARTICLE V: APPOINTMENT AND REAPPOINTMENT

5.1 Procedure of Appointment

- A. Application for membership to the Medical/Dental Staff shall be submitted to the Office of Vice President for Medical Affairs/Chief of Medical Staff. All documents and reference will be kept in the Office of Medical Affairs. The candidate will sign and attest that he has read and will abide by the Medical/Dental Staff Rules and Regulations and the Code of Practice of HKPHA.
- B. The Credentials Committee shall investigate the character, qualifications and standing of the applicant and shall submit a report of findings at the next regular meeting of the Medical/Dental Executive Committee, or as soon thereafter as possible, recommending that the application be accepted, deferred or rejected.
- C. Upon receipt of the report from the Credentials Committee, the Medical/Dental Executive Committee shall recommend to the Board those applicants to be accepted.
- D. When final approval is given by the Board of Directors, the Vice President for Medical Affairs of designee is authorized to transmit the decision to the candidate in writing.
- E. The Vice President for Medical Affairs/Chief of Medical Staff or designee may grant temporary staff privileges to a physician during the period of time in which his/her application is pending, this will be for: (a) consultation on referral patient already admitted, (b) admission of a private patient.

5.2 Procedure for Reappointment

Reappointment of the Medical/Dental Staff will be reviewed for approval/disapproval every Three years by the Medical/Dental Executive Committee, and the Hospital Board. Accountability should be made for:

- A. Completion of medical records in accordance with the Medical/Dental Staff Rules and Regulations.
- B. Attendance at specified Medical/Dental Staff meetings and appointed committee.
- C. Review and agree to abide by current Medical/Dental Staff Rule and Regulations, and the Code of Practice of HKPHA.
- D. Evidence of completed continuing medical education as required by the Medical Council of Hong Kong.
- E. Evidence of patient admission to the hospital as designated in the Rules and Regulations.
- F. Evidence of medical liability insurance coverage as set by the Adventist Health Hong Kong and defined in the Rules and Regulation of the By-laws.
- G. No activity or admission at Adventist Hospital Hong Kong in months will be placed In the In-active Doctor category.

- H. All physicians/dentists who are 65 years of age and older may be required to sign a statement that they are in good/excellent health. If there is any doubt, the Vice President for Medical Affairs or designee will request a signed medical report that the physician is of good health and no practice restriction exists. Process under 6.5 and 7.1 will be applicable at time other than reappointment.

5.3 Procedure for Appeals

In any case in which the Credentials Committee does not recommend for appointment, or reappointment, or where a reduction in privileges is recommended, the Vice President for Medical Affairs or Chief of Medical Staff shall notify the physician or dentist and the CEO/President, and if requested by the involved physician or dentist he/she shall be given an opportunity to appeal the decision before the Medical/Dental Executive Committee.

ARTICLE VI: CLINICAL PRIVILEGES

6.1 Exercise of Privileges

Except as otherwise provided in these Rules and Regulations, a member providing clinical Services for Adventist Health hospitals/centers in Hong Kong shall be entitled to exercise only those Clinical privileges specifically granted, Said privileges and services must be hospital specific, within the scope of any license, certificate or other legal credential authorizing practice in Hong Kong with any restrictions thereon, and shall be subject to the policies and procedures and the Authority of the appropriate committees and the Medical/Dental Executive Committee.

Medical/Dental Staff privileges may be granted, continued, modified or terminated by the Board of Adventist Health, under normal circumstances, upon recommendation of the Medical/Dental Executive Committee of the hospital where the physician practices, for reasons directly related to quality of patient care and other provisions of the Medical/Dental Staff Rules and Regulations, and only after the procedures outlined in these Rules and Regulations.

Voluntary resignations are accepted by the Vice President for Medical Affairs/Chief of Medical Staff. Re-appointment must go through the process of application for privileges.

6.2 Delineation of Privileges in General

A. Requests

Each application for appointment and recredentialing to the Medical/Dental Staff must contain a request for the specific clinical privileges desired by the applicant. A request by a member for modification of clinical privileges may be made at any time to the Credentials Committee but such requests must be supported by documentation of training and/or experience supportive of the request.

B. Basic for Determination of Privileges or Modifications

Requests for clinical privileges shall be evaluated on the basis of the member's Education, training, experience, demonstrated professional competence and judgment, Clinical performance, and the documented results of patient care and other quality review and monitoring which the Medical/Dental Executive Committee deems appropriate. Privilege determinations may also be based on pertinent information concerning clinical performance obtained from other sources, especially other institutions and health care setting where a member exercise clinical privileges.

In certain cases, the Medical/Dental Executive Committee may require observation of the applicant in the performance of procedures/surgeries to ascertain competency. The number should be stated under observation by the Vice President for Medical Affairs/Chief of Medical Staff and a report made to the Medical/Dental Executive Committee.

Observation doctors will be designated by the Vice President for Medical Affairs or designee.

6.3 Conditions for Privilege of Allied Health Staff

A. Credentials

Privileges for Allied Health Staff will be processed by the Credentials Committee in the same manner as Medical/Dental staff in 5.1 and 5.2.

B. Admissions

Allied Health staffs do not have admitting privileges. Admissions must be made under the supervision of a physician staff member, who will conduct or directly supervises the admitting history and physical examination (except the portion related to their specialty) and assumes responsibility for the care of the patient's medical problems at admission, during hospitalization, or fall outside of the limited licensed practitioner's lawful scope of practice.

C. Specific Limited Surgery

Inpatient procedures performed by an Allied Health staff shall be under the overall supervision of a physician on the Active Doctor list. Where a dispute exists regarding proposed treatment between a physician member and an Allied Health staff practitioner, the treatment will be suspended until the dispute is resolved by the Vice President for Medical Affairs or designate.

6.4 Temporary Clinical Privileges

- A. Upon receipt of a completed application and supporting documentation, the Medical/Dental Executive Committee may grant temporary privileges to a member who appears to have the qualifications, ability and judgment, consistent with section 3.2 and for not more than six months.
- B. Temporary clinical privilege may be granted by the Vice President for Medical Affairs or Chief of Medical Staff for situations where good cause exists for the care of specific patients. Such temporary privileges cease upon discharge of that patient.

- C. Following the outlined procedures in section A, temporary privileges may be granted to a person serving as a locum tenens for a current member of the Medical/Dental Staff. Such person may attend only patients of the member(s) for whom that person is providing coverage, for a period not to exceed one month unless the Medical/Dental Executive Committee recommends a longer period for good cause. He/she should maintain adequate medical documentation of the service. There should be proper hand over both before and at the end of the locum service.
- D. Staff granted temporary privileges shall act under the supervision of the Vice President for Medical Affairs of his designate.
- E. Temporary privileges shall be automatically terminated at the end of the designated Period unless affirmatively renewed by the Vice President for Medical Affairs of Chief of Medical Staff.
- F. Temporary privileges may be also terminated at any time by Vice President for Medical Affairs, Chief of Medical Staff, or the Medical/Dental Executive Committee. In such cases, the Vice President for Medical Affairs shall assign a member of the Medical/Dental Staff to assume responsibility for the care of such member's patient(s). The wishes of the patient shall be considered in the choice of a replacement Medical/Dental Staff member.
- G. All persons receiving temporary privileges shall be bound by the Rules and Regulations of the Medical/Dental Staff and Code of Practice of HKPHA.

6.5 Modification of Individual Clinical Privileges

On its own, upon recommendation of the Credentials Committee, or pursuant to a request, the Medical/Dental Executive Committee may recommend a change in the clinical privileges of a member. The Medical/Dental Executive Committee may also recommend that the granting of additional privileges to a current Medical/Dental Staff member be made subject to monitoring.

If for any reason there are health and/or disability problems that affect performance as a physician, notification to the Vice president for Medical Affairs and/or of Medical Staff is mandatory.

ARTICLE VII: CORRECTIVE ACTION

7.1 Routine Corrective Action

A. Criteria for Initiation

Whenever the activities or professional conduct of any staff member is believed to be detrimental to patient safety or the delivery of quality patient care, disruptive to hospitals/centers operation, or in violation of these Medical Staff Rules and Regulations. Code of Practice of HKPHA or other Hospital policies, corrective action against such staff Member may be initiated by Vice President for Medical Affairs/Chief of Medical Staff or the CEO/President. If there are indications of a crime, mayhem or premeditated injury, civil authorities must be consulted and involved as early as possible. Confidentiality is most important and strictly adhered to. Public Relation/Marketing must be involved if the media has been notified. Initiation of corrective action does not, preclude imposition of summary suspension as provided for in section 7.2.

The CEO/President has the authority to suspend the privileges of any staff that he feels is detrimental to the proper function of the hospitals/centers.

B. Requests and Notices

All requests for corrective action shall be in writing, submitted to the Medical/Dental Executive Committee, and supported by reference to the specific conduct or activities which constitute grounds for the request. The Vice President for Medical Affairs shall promptly notify the CEO/President in writing of all requests for corrective action received by such committee and shall continue to keep the CEO/President fully informed of all taken in connection therewith.

C. Investigation

After consideration of the request, the Medical/Dental Executive Committee shall either reject the request and report the reasons for its decision to the CEO/President, or to conduct an investigation.

D. Medical/Dental Executive Committee Action

Within sixty (60) days following such investigation such investigation, the Medical/Dental Executive Committee shall take action or make recommendation to the Board for action. Such action may include, without limitation, any one or more of the following:

1. Reject the request for corrective action.
2. Issue a warning, letter of admonition or a letter of reprimand.
3. Recommend terms of probation or requirements of consultation.
4. Recommend reduction, suspension or revocation of clinical privileges.
5. Recommend suspension or revocation of staff appointment.

The Vice President for Medical Affairs will report to the CEO/President, then carry out the decision of the Medical/Dental Executive Committee. The Board shall be notified of such action.

E. Board of Governors Option

Upon notification of the decision of the Medical/Dental Executive Committee, the Board of Governors, at its discretion, may conduct an investigation of the conduct that served as the basis for the request for corrective action and, after investigation, impose any such sanction set forth in Article VII. section D.

F. Procedural Rights

The staff member is entitled to request an appearance before the Medical/Dental Executive committee to defend his case. This will be informal and shall not constitute a hearing.

7.2 Summary Suspension

A. Criteria and Initiation

Whenever a staff member willfully disregards or grossly violates these Rules and Regulations, or other Hospital policies or Code of Practice of HKPHA or whenever his/her conduct requires that immediate action be taken to protect the life of any Patient or to reduce the substantial likelihood of immediate injury or damage to the Health or safety of any patient, employee or other person present in the hospitals/centers, or whenever the conduct of the staff member disrupts the operations of any unit of the hospitals/centers, the Vice President for Medical Affairs or the CEO/President shall have the authority to summarily suspend the staff appointment, or all or any portion of the clinical privileges, of such staff member until decision is made by the Board of Governors. Such summary suspension shall become effective immediately upon imposition, and the Vice President for Medical Affairs shall promptly give special notice of the suspension to the affected staff member, the Medical/Dental Executive Committee, and the CEO/President.

B. Medical/Dental Executive Committee Action

Within fifteen (15) days after such summary suspension a meeting of the Medical/Dental Executive Committee may recommend modification, continuation or termination of the terms of the summary suspension.

The Board is the final adjudicator of the summary suspension. The case will be presented to the Board with all the documents that lead to the suspension and the final decision will be by the Board.

C. Procedural Rights

Unless the Medical/Dental Executive Committee recommends immediate termination of the suspension and cessation of all further corrective action the staff member shall be entitled to the procedural rights as provided in Article VIII.

7.3 Automatic Suspension

A. Licence

If a staff member's licence to practice his/her profession in Hong Kong is revoked or Suspended, such staff member shall immediately and automatically be suspended from practicing in the hospitals/centers. The staff member or Vice President for Medical Affairs will make provision for another staff member in good standing to attend the patients who are hospitalized at that time.

B. Conviction of a Felony

It is the duty of the staff member to notify the Vice President for Medical Affairs of any conviction of a felony. During the course of discovery, privileges may be suspended temporarily. Upon conviction of an indictable offence of a staff member in any court, the member's staff appointment is automatically revoked. Revocation pursuant to this section of the Rules and Regulations does not preclude the staff member from subsequently reapplying for staff appointment.

C. Medical Records

A temporary suspension of admitting privileges may be imposed for failure to complete medical/dental records properly as per Hospital policy and shall remain in effect until the involved medical/dental records are complete.

D. Procedural Rights

If a staff member license has been revoked by the Medical Council, or court order and/or conviction of a felony, reappointment to the medical staff will be considered only when the legal restrictions have been lifted. Written request/application to the Medical/Dental Executive Committee is necessary. If the staff member has appealed to the court/Medical Council to overturn the conviction, the staff member may apply to the Medical/Dental Executive Committee to retain his/her privileges during the appeal process.

7.4 Continuity of Patient Care

Upon imposition of summary suspension or the occurrence of an automatic suspension, the Vice President for Medical Affairs shall provide for alternative coverage for the suspended staff Member's patients in the hospitals/centers. The wishes of the patient will be considered, where feasible, in choosing a substitute practitioner. The suspended staff member shall confer with the substitute practitioner to the extent necessary to safeguard the patient.

ARTICLE VIII: INTERVIEWS, HEARINGS, APPELLATE REVIEW

8.1 Interviews

When the Medical/Dental Executive Committee, CEO/President, or the Board receives or is considering initiating an adverse recommendation concerning a staff member, the staff member, the staff member may be afforded an interview at the discretion of the Medical/Dental Executive Committee, CEO/President, or the Board. The interview shall not constitute a hearing, shall be preliminary in nature, and need not be conducted according to the procedural rules provided with respect to hearings.

The staff member shall be informed of the general nature of the circumstances and may present information relevant thereto. A record of such interview shall be made.

8.2 Hearings and Appellate Review

A. Adverse Medical/Dental Executive Committee Recommendation

When any staff member receives special notice of an adverse recommendation of the Medical/Dental Executive Committee, he/she shall be entitled, upon request, to a hearing before the Medical Dental Executive Committee or Ad Hoc Committee of Medical Staff. If the recommendation of the Medical/Dental Executive Committee or Ad Hoc Committee following such hearing is still adverse to the staff member, he/she shall then be entitled, upon request, to an appellate review by the Board of Governors before a final decision is rendered.

B. Adverse Board of Directors Decision

When any staff member receives special notice of an adverse decision by the Board of Governors taken in one of the following circumstances, such a staff member may request for a hearing by and Ad Hoc Hearing Committee appointed by the Board of Governors. If such hearing does not result in a favourable recommendation, he may then request for an appellate review by the Board of Governors before a final decision is rendered only when

1. A decision that is contrary to a favourable recommendation by the Medical/Dental Executive Committee under circumstances where not right to a hearing existed.
2. On the Board of Governors' own initiative without benefit of a prior Recommendation by the Medical/Dental Executive Committee under circumstances where not right to a hearing existed.

C. Procedure and Process

All hearing and appellate reviews shall be recorded in official minutes and shall be held in accordance with the laws and customs of Hong Kong on such procedure.

ARTICLE IX: OFFICERS

The officers of the Medical/Dental Staff shall be Vice President for Medical Affairs and Chief of Medical Staff and Assistant Chief of Medical Staff where deemed necessary.

9.1 Vice-President for Medical Affairs

- A. It shall be the duty of Vice President for Medical Affairs for the overall planning of the medical programs and medical/dental services. This includes organization and clustering of programs, coordination with Total Health Program to express the Adventist emphasis in the health message and future expansions and other programs.
- B. His/her duties included, chairperson of or designate the chairperson of:
 1. The Medical/Dental Executive Committee
 2. Ethics Committee
 3. Institutional Review Board
- C. To give comment to the Board and the Chief of Medical Staff concerning professional programs and services of the hospitals/centers.
- D. Others duties as spelled out in AHHK by-law.

9.2 Chief of Medical Staff

- A. It shall be the duty of the Chief of Medical Staff to be responsible for and maintaining the quality of the medical staff. This includes review of medical practices, review of medical staff. This includes review of medical practices, review of medical records, developing medical audit reviews, members of Hospital Quality Improvement Committee and other tasks as directed by the Vice President for Medical Affairs.
- B. To periodically review the staffing of Outpatient Department, day and night schedules for the Urgent Care/Priority Care.
- C. Give council to the Hospital Administration and Vice President for Medical Affairs Concerning medical programs and services of the hospitals/centers.
- D. Leadership and chairperson of or designate the chairperson of committee:
 - 1. Credentials Committee

9.3 Vice President for Medical Affairs/Chief of Medical Staff will coordinate:

- A. Recruitment and professional development of staff
 - 1. Screening of applicants
 - 2. Defining qualification of staff
 - 3. Planning and coordinating Continue Medical Education programs
 - 4. Team building of medical staff
- B. Quality Assurance Program
 - 1. Meeting professional standards of Joint Conference International Accreditation, Trent and other accrediting bodies.
 - 2. Revision and updating of policies, procedures, clinical pathways, etc.
 - 3. Review of professional ethics and standards of conduct
 - 4. Investigating complaints

- C. General administration and coordination with non-medical functions of the hospitals/centers
 - 1. Representing the hospitals/centers to the public
 - 2. Counsel to the Administration and the Board
- D. Chair and management of committees:
 - 1. Credentials Committee
 - 2. General Medical Staff Meeting
 - 3. Infection Control Committee
 - 4. Pharmacology and Therapeutic Committee
 - 5. Transfusion Committee
 - 6. Surgical Committee
 - 7. Obstetric Clinical Management Committee
- E. Other Responsibilities
 - 1. Tumor Board
 - 2. Other committee and councils
 - 3. Liaison with Nursing Service
 - 4. Working with marketing to develop new business and packages, community service
 - 5. Risk management activities
 - 6. Coordination of medical specialties
 - 7. Coordination with church agencies for medical missionary program
 - 8. Coordination with public health agencies
 - 9. Advise corporate management and development of for-profit business
 - 10. Advise on planning and management of satellite clinic,

9.4 Major Medical Service Chairman

It is the duty of each medical service to develop and maintain the standards of its medical field, plans for growth and professional audit, Major Medical Services includes: 1) Surgical, 2) Internal Medicine, 3) Family practice, 4) Obstetric & Gynaecology, 5) Pediatrics, 6) Radiology and 7) Dentistry, 8) Cardiology, 9) Oncology, 10) Orthopedic, 11) Urgent care/Emergency service, 12) Intensive care.

A. Qualifications

The Chairman must be a recognized medical practitioner by the Hong Kong Medical Council or/and the Academy of Medical.

B. Selection

The Chairman will be nominated by the Administration with input from the respective clinical committee.

C. Team of Office

The Chairman will hold office for two years and may be re-elected once in succession by the members of the service.

D. Removal

The Service members may recommend to the Medical/Dental Executive Committee the removal of the Chairman, if approved by seventy-five (75) percent of the members of the Service who are eligible to vote. The Medical/Dental Executive Committee will have final authority to remove the Chairperson of the Service.

E. Duties

Working with his respective clinical committee, the Chairman of clinical service shall

1. Monitor the quality of patient care and professional performance by the members of that Service.
2. Develop and implement Service program for retrospective patient care review, ongoing monitoring of practice, and quality assessment and improvement.
3. Work with the Service officer regarding development of professional practice review and clinical audit.
4. Enforce the hospitals/centers and Medical/Dental Staff Rules and Regulations within his Service.
5. Implement actions taken by the Medical/Dental Executive Committee.
6. Participate in every phase of administration of the Service in continuous assessment and improvement of the quality of care and services provided.

9.5 Meeting of service staff shall be twice yearly or as deemed necessary

ARTICLE X: CLINICAL SERVICES

10.1 Services

The hospitals/centers shall have adequate Medical/Dental Staff to cover all medical/dental services offered.

10.2 Assignment to Services

Assignments to Clinical services and specifications of privileges shall be made by the Medical/Dental Executive Committee on recommendation of the Credentials Committee at the time of Appointment to the Medical/Dental Staff.

10.3 Specialty Service

Those Medical/Dental staff members who are permitted to practice as specialists shall meet the Following requirements:

- A. Have adequately documented specialty training in his/her specialty in a hospitals/centers or Clinic approved for such specialty training
- B. Be a fellow of that specific specialty, and/or
- C. Hold Certification by the Hong Kong Academy of Medical, and/or
- D. Specialist registration with The Hong Kong Medical Council

10.4 Clinic Sessions

Appointments to hold Clinic Session are made by the Administrative Council All appointments will be reviewed tri-annually by Vice President for Medical Affairs/COMS. The Administration reserves the right to Executive Privilege.

10.5 Referral

It is recommended that Medical/Dental Staff do not refer patients outside of the hospitals/centers when the necessary services are provided by the hospitals/centers. If it is necessary, request will be made to the Vice President for Medical Affairs/Chief of Medical Staff with reasons for such action.

ARTICLE XI: COMMITTEES

11.1 Medical/Dental Staff Committees

11.1.1 Medical/Dental Executive Committee

The Medical/Dental Executive Committee shall consist of the CEO/President (ex-officio), Vice President for Medical Affairs (Chairperson), Chief Operating Officer, Chief of Medical Staff, Assistant Chief of Medical Staff, Vice President of Administration, Dental Director / Committee Chairman, Director of Nursing and any other member of the Active Staff deemed necessary for proper representation and function.

- A. To receive and to act upon those committee reports as specified in these Rules and Regulations and to make recommendations concerning them to the CEO/President and the Board of Governors.
- B. To plan for the general administration of the staff
- C. To represent and act on behalf of the Medical Staff in all matters, without requirement of subsequent approval by the staff, subject only to any limitations imposed by these Rule and Regulations.
- D. To enforce Hospital and Medical Staff rules in the best interest of patient care and of the hospitals/centers, with regard to all persons who hold appointment to the Medical Staff.
- E. To review situations involving questions of clinical competence, patient care and treatment, case management, or inappropriate behavior of any Medical staff appointee and to recommend appropriate action.
- F. To be responsible to the Board for implementation of the hospital's quality assessment plan as it affects the Medical Staff.
- G. To review the recommendations of the Credentials Committee on all application, re-applications and to make recommendations for appointment to the Medical Staff, assignment to clinical sections and delineation of clinical privileges.

Written minutes shall be kept of the Medical/Dental Executive Committee meetings by the Medical Affairs Office.

The Medical/Dental Executive Committee may take over the functions of other committees as necessity dictates.

The Medical/Dental Executive Committee shall meet quarterly before each Board of Governors meeting with the schedule being set and published by the Vice President of Medical Affairs the beginning of each year.

11.1.2 Credentials Committee

The Credentials Committee shall consist of at least three (3) members of the Active Doctor appointed by the Medical/Dental Executive Committee. The terms of membership shall not be more than three years. The Chairman shall be appointed by Medical/Dental Executive Committee. Meetings shall be held before each regular Medical/Dental Executive Committee meeting.

- A. Duties
 - 1. To consider the qualifications for Medical/Dental Staff appointments on the basis of criteria in these Rules and Regulations, (Article VI) and make recommendations for staff appointments to the Medical/Dental Executive Committee.
 - 2. To review tri-annually, or every third year, the membership of the Medical/Dental Staff for staff re-appointments and extent of privileges.
 - 3. To receive and investigate reports from various committee, of any professional delinquencies and misdemeanours on the parts of staff members, and to make appropriate recommendations concerning the same to the Medical/Dental Executive Committee.

11.1.3 Infection Control Committee

The Infection Control Committee, appointed annually by the Medical/Dental Executive Committee, shall consist of a physician as chairperson, Infection Control Nurse as Secretary, a dentist, a member of the Administration, Director of Nursing or designee, Head of Central Supply room, Operating Room Supervisor, Clinical Lab Director and Head of Housekeeping Department. It shall be the duty of this Committee to advise on the matter of infection rate and control, and shall report to the Medical/Dental Executive Committee. Meetings of the Infection Control Committee shall be held quarterly or as deemed necessary.

11.1.4 Pharmacy & Therapeutic Committee

The Pharmacy & Therapeutic Committee shall be appointed annually by the Medical/Dental Executive Committee and shall consist of Vice President for Medical Affairs / Chief of Medical Staff as Chairperson, the chief Pharmacist as Secretary, Oncologist, Director of Nursing, Asst. Chief of Medical Staff, CEO/President or COO, Laboratory such advice as shall relate to Pharmaceuticals, therapeutic dietetics, antibiotic usage, blood utilization and to report such advice to the Medical/Dental Executive Committee. Meetings of this Committee shall be held quarterly or as deemed necessary.

11.1.5 General Medical Staff Committee

The General Medical Staff Committee is a close liaison between the Active Doctors and Hospital Administration. The Chairperson will be the Chief of Medical Staff or designee. Members shall consist of all Active Doctors, CEO/President, Vice President for Medical Affairs, Chief Operating Officer, and Director of Nursing. This Committee shall hold monthly meeting.

A. Duties

1. To help provide quality medical services to patients.
2. To raise standard of care
3. To make recommendation to Medical/Dental Executive Committee in clinical matters.

11.1.6 Ethics Committee

The function of this committee is to evaluate and give direction in the event that a medical condition of a patient or a procedure will jeopardize the integrity of the hospitals/centers, the doctors and employees in a detrimental or illegal way. Research projects, use of experimental drugs, abortions, etc, will be evaluated by this committee. The members will be Vice President for Medical Affairs (chairperson), Chief of Medical Staff, and specialist in the area of discussion, Director of Chaplaincy, CEO/President or COO, and legal counsel as needed. The Committee will function on as needed basis.

11.2 Joint Conference Committee

The Joint Conference Committee shall consist of all members of Active medical/dental staff, the CEO/President, Vice President for Medical Affairs, Chief Operating Office, Director of Nursing or designee plus the Chair or Vice-chair of the Board of Governors. The Chairman of the Board of Governors shall serve as chairperson of this Committee. The secretary of the Joint Conference Committee shall be the CEO/President. Meetings shall be held twice per year before each regular Board meeting. Written minutes of these meetings shall be kept in CEO/President Office. Under ordinary circumstances, an agenda and minutes of the previous meeting shall be prepared and sent to all members at least five working days prior to the meeting by the secretary of the Committee.

A. Duties

1. To provide liaison between the Board, the AHHK officers, the medical staff and the dental staff, and considered as an important channel of communication.
2. To provide a forum for discussion, advice, and recommendations, without the pressure of having to make final decisions.
3. To discuss important issues affecting one or all of the organizations within AHHK, involving the need for new programs, extended services, new facilities, the effects of government or public programs, and significant items for the agenda of the Board, as supplied by the CEO/President.

11.3 Other Committee

Other Committee may be as may be required to carry out the functions of each medical staff and each hospitals/centers.

ARTICLE XII: MEETINGS

12. Special Meetings

Special meetings of the Medical/Dental Staff shall be held at the request of the Vice President for Medical Affairs. Notice of time and place of such meetings shall be given in writing to all members of the Medical/Dental staff at least seven days prior to the date of the meeting, the quorum required to transact business at all Special Meetings shall be fifty percent (50) plus one of appointed committee members as tending.

To facilitate the meetings, an agenda must be presented and the reason for the meeting. A secretary will be chosen from one of the attendees and minutes will be recorded, disseminated, and filed.

ARTICLE XIII: DUTIES

13. Active, Night, and Temporary Staff

The duties of the member of the Medical/Dental Staff are stated in the Rules and Regulations and the Rules and Regulations. The Staff members are also required:

- A. To limit elective procedures in the hospitals/centers to regular business hours. Emergency case shall receive necessary care at any time, day or night.
- B. To give willingly of their time and free of charge if called upon to attend charity patients served by the hospitals/centers.
- C. Responsibility for recording all data about the patient in the medical records. This includes:
 - 1. Chief complaint and medical history
 - 2. Physical examination
 - 3. A working diagnosis and care plan
 - 4. Doctors orders with date and time. Phone orders must be initialed to verify Correct information.
 - 5. Regular progress notes with date and time
 - 6. Operative note if surgery/procedure performed giving finding and narrative description. This must be written/posted right after the surgery.
 - 7. At discharge/death completed records include:
 - a. Final diagnosis
 - b. Clinical summary
 - c. Discharge medications
 - d. Follow up information and medical records will also include laboratory, X-ray, and other service reports.
- D. To consult with the Patient Business Office and CEO/President regarding the admission of charity cases before admitting such cases.
- E. To respect and promote the Seventh-day Adventist Church institutional standards regarding Sabbath observance (e.g. refraining from elective procedures and routine activities from sundown Friday to sundown Saturday), vegetarian diet and dress code. Profane language, smoking and the use of alcohol and designer drugs (cocaine, "Ice", heroin, etc.) shall not be permitted on the hospitals/centers premises.

- F. To be proficient at cardiopulmonary resuscitation procedures.
- G. To render all diagnostic procedures performed upon admitted patients within the hospitals/centers if the procedures are available.
- H. To respect the stand that Euthanasia is not acceptable or the use of hypnosis is strictly forbidden.
- I. All medications taken by Hospital in-patients shall be dispensed by the Hospital Pharmacy. Drugs brought into the Hospital by patients will be 1) sent home with relatives or 2) identified, placed in a bag properly identified with the patients label and sent to the pharmacy until discharge. If the doctor insists that the patient can take own medication, he must write an order to that effect in the doctor's order sheet, naming each drug and directions. A waiver will be signed by the doctor and patient absolving the hospitals/centers of any adverse incidents that may occur. Drugs that affect the patient's mental capacity will be dispensed by the nurses.
- J. All specimens for histology, cytology, and pathological review will be referred to the in-house pathologist. Doctors using other pathology labs are responsible for personally notifying the other pathologists for special handling.
- K. Abortions are not allowed in this Hospital. If there is reason to believe that the mother's life is in danger, or the baby has been determined to have congenital deformities incompatible with life, an abortion is allowed under two OB doctors signature. All D & C specimens must be sent to the pathology lab for review.
- L. All doctors are encouraged to consult with other doctors in the hospitals/centers for optimal patient care.

ARTICLE XIV: ADDITIONAL RULES AND REGULATIONS

- 14. The Medical/ Dental Executive Committee shall adopt such rules and regulations as may be necessary for the proper conduct of the staff. Such rules and regulations shall become effective when recommended by the Medical/Dental Executive Committee, CEO/President, and approved by the Board of Governors.

ARTICLE XV: AMENDMENTS

An Ad Hoc Committee will be chosen by the Medical/Dental Executive Committee of each entity to review the Rules and Regulations at least every two years and recommend amendments to the Medical/Dental Executive Committee. The recommendations will be sent through the Adventist Health Hong Kong office for review and will be effective when approved by the Board of Governors.

Approved by the Board of Governors of Adventist Health on 26 September 2022



Daniel JIAO
Chairperson of the Board of Governors



Alex LAN
Secretary of the Board of Governors

**Addendum
Administrative Policy**

OPD CLINIC PRIVILEGE AFTER 65

For the hospitals/centers' Outpatient Department business, the Administrative Council may appoint medical staff who have hospital admission privileges to serve the hospitals/centers' outpatients.

The Administrative Council shall annually consider, review and permit the medical staff who have Outpatient clinic privileges and are 65 or above to practice at the Outpatient Clinic on the hospitals/centers' need base.

Approved by the Board of Governors of Adventist Health on 26 September 2022.



Daniel JIAO
Chairman of the Board of Governors



Alex LAN
Secretary of the Board of Governors

**Addendum
Medical / Dental Staff Rules and Regulations**

ADMISSION PRIVILEGE AFTER THE AGE OF 70

The Credential Committee shall, in addition to the provision in Article 6.2B, review the physical fitness, performance, capabilities of each member based on the annual mental and physical report provided by the member who has attained the age of 70 years and who has admission privilege at the hospitals/centers. Consideration and commendation by the Credential committee for renewal or rejection of admission privilege for members above the age of 70 shall be made annually to the Hospital Board.

Approved by the Board of Governors of Adventist Health on 26 September 2022



Daniel JIAO
Chairman of the Board of Governors



Alex LAN
Secretary of the Board of Governors