

Vancouver Medical Dental and Allied Staff Association (MSA) & Vancouver
Physician Staff Association (VPSA)
Roles and Responsibilities



Vancouver Physician Staff Association

Background

The Vancouver Coastal Health Authority's Medical Staff Association (MSA) for the Vancouver Community of Care, known as the Vancouver Medical and Allied Staff Association (VMDAS) is defined by the [VCH Medical Staff rules](#), article 10 and promotes and advances the medical staff's involvement in the provision of medical services, and represents and advocates for the interests of the medical staff at Vancouver General Hospital, GF Strong, UBC Hospital and Vancouver Community.

The Vancouver Physician Staff Association (VPSA) is a non-profit society focused on creating an environment where physicians at VGH, GF Strong, UBC and those physicians in the community with hospital privileges feel connected, supported and inspired. The VPSA represents and advocates on behalf of the medical staff and patients across a broad range of issues of importance to the medical staff and the Health Authority.

- [Memorandum of Understanding](#)
- [FEI outcomes](#)

The VMDAS and the VPSA are intended to operate as seamlessly as possible. While they are two separate entities, the spirit is that they should be treated as if they are "one and the same", unless it is operationally impossible for a particular term. The Executive Board of the VMDAS generally mirrors the Board of Directors of the VPSA. This leadership team is supported by committees, task groups, and working groups that are responsible for putting the Board's policies and directions into action. Contracted staff and staff from the Specialists Services Committee (SSC) provide support to the leadership teams.

Below are descriptions of the roles, responsibilities and opportunities these leadership roles represent.

Vancouver Medical, Dental and Allied Staff Association and Vancouver Physician Staff Association **ORGANIZATION CHART**



Vancouver Medical, Dental and Allied Staff Association
Executive Board



Vancouver Physician Staff Association

Vancouver Physician Staff Association
Executive Board
(mirrors that of the VMDAS Executive)



VCH Committees with VPSA Physician Members and Project Support

VAVC Physician Wellness Steering Committee,
VCH Diversity, Equity and Inclusion In
Medical Leadership Committee,
(VPSA-CST) Implementation Task Group



VPSA
Task Groups and Committees

VMDAS Executive & VPSA Board of Directors

Elected Officials: 3 – 7 (5 VMDAS/VPSA members, 2 VPSA Member-At-Large*)

Term: 3 years maximum per executive role

Meetings: Every two weeks for 1 hour (agenda divided between VMDAS and VPSA business)

Expected Annual Commitment/Hours: 24 hours minimum (variable)

Description: The Executive/Board serves as the governing body and is responsible for managing the affairs of the VMDAS/VPSA. The Board provides overall leadership and strategic direction and is the voice of the medical staff. For a more detailed review of each role, please see **Appendix 1**.

*NB: As per the [VMDAS Election Policy](#), *To be eligible for the positions of President, President-elect, Secretary, Treasurer or member at large, the individual must be on the Active Staff. In addition to these positions, there are two positions on the Board of the Vancouver Physician Staff Association (VPSA). These members at large positions on the VPSA can have any level of staff privileges (except honorary staff). One of these members should represent or bring the perspective of Community Physicians, who usually do not hold active staff privileges at the hospital.*

VPSA/VMDAS Finance & Reporting Committee

Participants: 3 (President, Vice President and Treasurer)

Meetings: Quarterly for 1.5 hours

Expected Annual Commitment/Hours: 6 hours minimum + preparation

Staff Support: VPSA FE Initiative Manager/VMDAS Administrator/Accountant/Bookkeeper

Description: This Committee, reporting directly to the Board of Directors provides oversight to the staff (including accountant or bookkeeper) with respect to the financial tracking and reporting of the Engagement Initiative and financial business of the VMDAS. They oversee and ensure that reporting requirements are met including legislative requirements (*Societies Act*, CRA, Medical Staff Rules/Bylaws etc) and contractual requirements are obliged. They oversee the use of Facility Engagement Management System (FEMS) and ensure FEMS is being used properly by staff and participants. This team confirms and provides leadership for the establishment of policies for financial decision-making including signing authorities, reviewing policies and maintaining best practices. On a regular basis, this team reviews budgets and makes recommendations to the Board of Directors for approval. This team also oversees and ensures participation in any evaluation of the provincial program.

VPSA Communications Committee

Participants: TBD with new ToR

Meetings: Monthly for 1 hour

Expected Annual Commitment/Hours: 12 hours minimum

Staff Support: VPSA FE Initiative Manager/VPSA Communications Lead/VPSA PM/VPSA Admin Assistant

Description: This Committee, reporting directly to the Board of Directors provides oversight to the staff (including the VPSA Communications Consultant) with respect to the communications activities of the VPSA. They are tasked with developing, implementing and measuring the effectiveness of an overall communications strategy for the organization.

VPSA Selection Committee

Participants: 3-6

Meetings: As needed (typically quarterly)

Expected Annual Commitment/Hours: 6 hours minimum + preparation

Staff Support: VPSA Project Manager

Description: Reporting to the VPSA Board, the VPSA Selection Committee was established to review expressions of interest, conduct a selection process, and recommend candidates for VPSA committees, task and working groups.

VPSA Leaders Forum

Participants: Automatic membership includes VPSA Executive and one Representative from each VPSA Tasks Group, Committee and VCH Committee that is supported by the VPSA

Meetings: Quarterly (1.5 hrs)

Expected Annual Commitment/Hours: 4 hours minimum + preparation

Staff Support: VPSA Initiative Manager, VPSA Project Manager, VPSA Admin Assistant

Description: Reporting to the VPSA Board, the VPSA Leader Forum was constituted to provide a forum for task groups and committees to share updates on their activities and to create a venue for collaboration, ideas sharing and communication between VPSA initiatives.

Vancouver MSA-VCH HA Leadership Collaborative Table

Also known as the VPSA-SLT Meeting, this collaborative table is a joint committee of the Vancouver Physician Staff Association, the Vancouver Acute and Community Operational Leadership, and Corporate Leadership related to Physician Relations and Development and the Specialist Services Committee Facility Engagement Liaison. This “collaborative table” is a primary venue for developing a collaborative relationship between medical staff and facility leadership as per the terms of the 2014 Memorandum of Understanding on Regional and Local Engagement (MOU).

Participants: Automatic membership includes VPSA President and Vice President,

Meetings: Month (1 hr)

Expected Annual Commitment/Hours: 12 hours minimum + preparation

Staff Support: VPSA Initiative Manager, VPSA Project Manager, VPSA

Description: Reporting to the VPSA Board, the VPSA Leader Forum was constituted to provide a forum for task groups and committees to share updates on their activities and to create a venue for collaboration, ideas sharing and communication between VPSA initiatives.

VSPA Engagement Task Groups

Reporting to the VPSA Board the purpose of the Task Groups is to respond to/address needs emerging from the Vancouver Community of Care physician group and when applicable operationalize priorities and activities identified in the [VPSA Strategic Plan](#). These groups are meant to be efficient, solution-oriented groups that will disband when its work/tasks have been completed.

Task Group Formation

Task Groups should be able to form with minimal effort and emerge naturally from discussions and needs within the VPSA Board and the Vancouver Community of Care physician group at large. A Task Group should as part of its mandate seek to foster meaningful consultation and collaboration between physicians and Vancouver Coastal Health. To meet this goal activities of the task group must align with at least one of the following goals of [the Memorandum of Understanding on Regional and Local Engagement](#):

- To improve communication and relationships among the medical staff so that their views are more effectively represented.
- To prioritize issues that significantly affect physicians and patient care.
- To support medical staff contributions to the development and achievement of health authority plans and initiatives that directly affect physicians.
- To have meaningful interactions between the medical staff and health authority leaders, including physicians in formal HA medical leadership roles.

If you are considering forming a task group, please discuss your idea with a member of the VPSA executive and/or a VPSA Staff Member. They may have ideas about related efforts, people who might be involved, and resources that may help with your effort.

As you are forming your task group, please write a charter, see Appendix 2. The charter provides an overview of the rationale for the work and a description of the work to be done.

Below is a list of current VPSA task groups as of May 2022

1. VPSA Community Building and Wellness
2. VPSA Physician Led Projects
3. VPSA-CST Implementation Task Group

VCH Committees with VPSA Physician Members and Project Support

In areas of shared priorities the VPSA and Vancouver Coastal Health, the VPSA supports Health Authority Committees and Working Groups to fulfill their mandate. Types of support provided by the VPSA for such groups includes payment for consultants, meeting expenses, sessional payments for VPSA physicians members, as well as project management and administrative support.

VPSA support for Health Authority Committees is at the discretion of the VPSA Board and is evaluated on an annual basis. VCH Committees seeking VPSA support should submit their request to the VPSA President for consideration by the Executive.

Below is a list VCH Committees/Working Groups Supported by the VPSA as of June 2022

1. Vancouver Acute/Vancouver Community Physician Wellness Steering Committee and Working Groups
2. Vancouver Coastal Health Diversity Equity and Inclusion Steering Committee and Working Groups
3. Vancouver Coastal Health Medical Staff Orientation Steering Committee
4. Vancouver Coastal Health Engaging Physicians in Indigenous Cultural Safety
5. VA/VC Medical Staff Planetary Health Committee

Appendix 1: Detailed Descriptions of Board/Executive Roles

Roles of the Board/Executive

The Executive of the Medical Staff Association (MSA) and the Board of Directors of the Vancouver Physician Staff Association (VSPA) are technically separate entities, however, as indicated above, the intention, in their creation, was that they be as closely linked as possible. To accomplish this, the VSPA Bylaws support that the physicians elected to the Executive of the MSA are deemed to be the members of the Board of the VSPA. This means the functions of the roles significantly overlap. The people holding these roles should be clear when they are acting on behalf of the MSA and when they are acting for the VSPA, even though their functions will, in most instances, be the same.

The MSA is a creation of the VCH's Rules. It is not a legal entity. The Rules only prescribe the role of President (Article 10).

The VSPA is a non-profit society pursuant to the *Society's Act*. The Board of Directors serve as the governing body and is responsible for managing the affairs of the society. The Board members must:

- a) act honestly, in good faith and in the best interest of the organization, b)
- manage the finances of the organization, and
- c) provide the overall direction and policies.

The descriptions below are drawn from the VCH Bylaw rules, the VPSA bylaws and generally accepted role expectations of non-profit societies.

President

The President, as chair, presides over all meetings of the MSA Executive, and the VSPA Board. The President is responsible for playing an overarching leadership role, chairing all meetings including the two AGMs (one for each entity), developing meeting agendas and materials with the Secretary/Secretary-Treasurer and/or staff, and overseeing the planning of Executive and Board activities for the year ahead.

Specific for the MSA, the President attends as a voting member to the Medical Advisory Committee (MAC) and the Health Authority Medical Advisory Committee (HAMAC). The President is the spokesperson for the MSA at all events primarily sponsored by the MSA such as any awards events or fundraising events.

Specific for the VSPA, the President is the spokesperson for the VPSA at the Collaboration Table or any Specialist Services Committee meetings. The President represents the VSPA publicly, although this role can be delegated or shared with the Vice-President and the EWG Chair.

Vice President

The Vice President fulfills the President's duties and responsibilities in the President's absence for both the MSA and the VPSA. To do this effectively, the Vice President works with the President and could be delegated some of the key functions and duties held by the President.

It is recommended that the Vice-President and President consider at the beginning of their terms which tasks may be better suited for the Vice-President's leadership and input.

As per the [VMDAS Election Policy](#): The Vice-President VMDAS or Chair-Elect shall be elected by the Voting Members as a Director in accordance with these Election Procedures and shall serve for a period of two years. On the first day of January following the second anniversary of election, the Chair-Elect shall become the Chair. The Chair shall serve a term of two years or until the first regular meeting of the Board at which their successor takes office.

Secretary

While the role of the Secretary is defined in the VSPA Bylaws, the VCH Rules and Bylaws are silent on all roles but for the President. As such, it is recommended that the MSA Secretary-Treasurer responsibilities mirror those of the VPSA.

The Secretary's responsibilities are to ensure the recording, approval, distribution and maintenance of meeting minutes, Board and/or Executive decisions, policies and membership lists. The Secretary works closely with the President to manage the calendar and ensure Directors and members are given proper notice and materials for meetings. In particular, the Secretary is responsible for the following:

- a) ensuring the issuance of notices of meetings;
- b) ensuring there are minutes of all meetings;
- c) ensuring the custody of all records and documents; and
- d) for the VSPA, ensuring the maintenance of the register of members.

Treasurer

While the role of the Treasurer is defined in the VSPA Bylaws, the VCH Rules and Bylaws are silent on all roles but for the President. As such, it is recommended that the MSA Secretary-Treasurer responsibilities mirror those of the VPSA. The Treasurer is responsible for ensuring the oversight of the financial functioning of the VSPA and VMDAS and that financial statements are presented to the Directors and members annually.

For the VPSA and VMDAS, there is a reporting requirement owed to a number of stakeholders. It is recommended that the Treasurer be responsible for ensuring oversight of this reporting, but this role may be delegated.

Member at Large

There are two members at large positions on the VPSA board. Unlike the other executive positions, these can be held by a physician member with any level of staff privileges (except honorary staff). One of these members should represent or bring the perspective of Community Physicians, who usually do not hold active staff privileges at the hospital. The member-at-large acts as a representative for the general membership and may, on an as needed basis, conduct projects or accept duties that support the Board of Directors. The Member-at-Large shares ideas, guidance and expertise from the VPSA membership's perspectives on issues of interest or concern with the Executive Committee.

Past President

The Past President provides leadership on the committees that focus on the strategic direction of the VSPA and the VMDAS (i.e. issues identification, recruitment and succession planning) and on those dedicated to building a culture of collaboration between medical staff and the Health Authority. The Past-President is a non-voting position.

Appendix 2: Developing a Task Group Charter

The charter should contain the following information:

1. Define the problem. Although a task group could be created for many purposes, most are created to solve a problem or address a challenge.
3. Define the outcome(s). Clearly articulate what are the expected deliverables.
4. Define the timeline. In addition to defining the outside parameters (start date and finish date), make sure you articulate milestone dates when, for example, status reports might be due. You should also estimate the number of hours the task group members will be expected to give to task group work.
5. Identify task group members. If this task group requires administrative support from the VPSA identify that person or person(s) in the charter. The group should engage three or more participants from the community. The community includes physician members of the VPSA, staff of the SSC, Doctors of BC, and VCH.
6. Define a draft budget. This should include an estimated number of physician sessional hours required for the task group to complete its work as well as other associated costs to account for things like catering (meetings/larger events), hiring speakers/consultants, etc.

The charter provides the definition of the Task Group and its deliverables. It is not a contract and may be changed with the consensus of the members of the Task Group at any time, however significant changes such as a 6 month or more delay in timeframes, the abandonment of a deliverable, anticipated budget overrun or the change in the overall scope of the work should be brought forward to the EWG.

Task Group Charter Form

To assist you in writing your Task Group Charter, use the template provided.

Keep in mind that the charter should be a brief, one-page document that provides enough detail about the Task Group to allow readers to understand the context, objectives, and deliverables of the work. Include a timeline and list of members, including the facilitator/chair. Writing the charter should not be an onerous, burdensome process. Keep it simple and brief.

Task Group Approval

Once the charter form is completed, please forward it to the President of VPSA to be considered at an upcoming Board meeting. Whenever possible the facilitator/chair of the task group should present the charter in person.

Once the Task Group is approved, a link to the description of the group and including its charter will be made public on the ourvancouvermsa.ca website.

Task Group Requirements

A Task Group may self-organize in the most convenient manner to accomplish its tasks, including creation and assignment of additional roles and responsibilities as appropriate. Sub groups may be formed and disbanded at will, consisting only of members of the Task Group and do not need to separately meet the requirements of the Task Group.

Meeting Schedules

Meeting times and agendas should be published in advance to encourage participation.

Meeting Agendas and Notes

Meeting Agenda, Minutes and Notes and other documents should be stored on the VSPA G-Drive and all discussions within the task group must be transparent to other members of that task group.

Timelines and Deliverables

Task groups should strive to meet their timelines and produce the deliverables designated in their charter.

Facilitator/Chair

Each Task Group must have at least one participant designated as Facilitator/Chair. Facilitators/Chairs are responsible for promoting continued activity within the group

Task Group Dissolution

A Task Group is dissolved under any of the following circumstances:

- All of the deliverables have been met. Mark status as "Complete"

- The group becomes inactive. Mark status as "Inactive"
- The group does not engage three or more participants from the community. The community includes physician members of the VPSA, staff of the SSC, Doctors of BC, and VCH.
- The group does not have anyone willing to be the Facilitator/Chair

At such a time as a task group is dissolved, it is moved from the active list of task groups on the ourvancouvermsa.ca website into a task group archive page.