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UBCHEA ARCHIVES
COLLEGE FILES
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Shantung / Cheeloo
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University Hospital - organization
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HOSPITAL REORGANISATION

Med.Fac.Minutes, No.752, July 12, 1929.

Reorganisation of Hospital Committee.

Resolved- That we approve of the reorganisation of the Hosp.Com., as recommended by the Hosp.Com.:

There shall be two Committees, the Administrative Committee and the Professional Committee, in place of the Hospital Committee as now organised. The Administrative Committee composed of:

Medical Director (Chairman)
Superintendent of Nursing
Supervisor of Housekeeping
Supervisor of Dietary Dept.
Admission Officer
Business Manager

Duties: Advisory on matters relating to
Personnel (non-professional)
Business Office (purchasing, patients' accounts)
Housekeeping and linen supply
Kitchen and food service
Laundry
Buildings, light, heat
Admission and discharge of patients

The Professional Committee, composed of
Medical Director (Chairman)

2 representatives from Hosp.Surg.Dept.
2 " " " Med. "
1 " " " Lab. "

Dean of School of Medicine
Superintendent of Nursing

Duties: Advisory on matters relating to
Nursing Technique
Pre-operative and post-operative technique
All medical procedures
Problems of medical and surgical nature
Applications for resident appointments
Etc., etc.

Appointed by this Com. are
Record Committee;- reviews medical records, in order to bring them up to standard.
Interne Committee;- arranges for the instruction of V year students and sees that they receive proper work.
O.P.D. Committee;- advises on the operation of the O.P.D.

Sept.7, 1934. These Administrative & Professional Committees were discontinued and the Hospital Committee set up again in their place.

Board of Directors Meeting, June 15-18, 1933. Min. D 1028

"Some time was spent discussing problems raised by rules of procedure followed in administering the medical work of the University. Dr.Wells, Dr.Han, Miss Tseng, Bishop Scott and Mr.King were appointed a committee to act with President Chu and to consult with Dr.Shields, Dr.Kiang and Dr.Heimbürger on this matter. Dr. Wells reported that agreement was reached by the committee that, by conforming to the Regulations for Internal Organization as approved for the University, many of the present problems would disappear. A Com. consisting of Bishop Scott, Dr.McFadyen, Dr.Han,

Dr. Wells and Mr. Brown, was appointed to draw up a statement re hospital administration to be recorded in the minutes. The report of this committee was received and adopted as follows:-

REORGANIZATION OF THE UNIVERSITY HOSPITAL ADMINISTRATION

Whereas for the more efficient working of the hospital there should be direct responsibility to the university through the Executive Council and the President

Therefore this Board adopts the following reorganization of the Hospital administration and directs that it be put into effect forthwith:-

I. Superintendent of the Hospital. There shall be a hospital superintendent who shall be appointed by the President.

as a member of the Hospital Committee.

II. Duties of the Superintendent.

1. He shall have oversight of all the affairs of the hospital.
2. He shall be ex officio member of the Executive Council.
3. He shall be chairman of the Hospital Committee and ex officio a member of all committees in the hospital.
4. He shall recommend to the President the appointment and the dismissal of department heads, the Superintendent of Nursing and the Business Manager.
5. He shall, in consultation with the head of the department concerned, recommend to the President the appointment, promotion or dismissal of the attending and nursing staffs.
6. He shall appoint or dismiss all house staff, clerks and employees of the hospital.

III. Hospital Committee.

1. There shall be a Hospital Committee composed of the Superintendent of the Hospital, the Dean of the Medical School, the head and one other representative each of the Surgical, Medical and Laboratory Departments, elected by the department concerned, the Superintendent of Nursing and the Business Manager.

2. Powers and Duties of the Hospital Committee.

- a) To formulate policies and general plans for carrying on the clinical teaching and general internal working of the hospital and O.P.D.
- b) To make recommendations to the University Executive Council concerning new policies, additional equipment and other matters affecting the hospital.
- c) To draft the annual budgets of the Departments of the Hospital and to recommend the same to the University Executive Council for adoption.
- d) To ensure the carrying out of the dual purpose of the hospital - the healing of the sick and the provision of clinical instruction - and to promote the esprit de corps of the hospital staff.

3. Meetings. The Hospital Committee shall meet once a month and at other times on the call of the Superintendent.

IV. Relation between the Hospital and the Medical School.

Since the University Hospital is organized primarily for the healing of the sick and secondarily for providing clinical instruction for medical students:

1. The Dean of the Medical School and the Superintendent of

the Hospital shall be jointly responsible for the co-ordination of the teaching and clinical work within the hospital.

2. The Dean of the Medical School and the Superintendent of the Hospital shall make recommendations to the University Executive Council as to adjustments in the apportionment of the budget between the Medical School and the Hospital, it being understood that the Medical School accepts the same responsibilities as it has hitherto carried in this respect.

voted: That we request the President to make a report at the November meeting of the Administrative Council on the effectiveness of these regulations."

Med.Faculty Minutes, Nov.13,1933. 819.

Recommendation concerning University By-laws for the Internal Organization of the College of Medicine.

Resolved unanimously that the following recommendation, with its preamble, be submitted to the Board of Directors, through the University Executive Council:-

The Faculty of the College of Medicine begs to submit to the Board of Directors, through the University Executive Council, the following statement:-

The College of Medicine has a long-established system of internal organization and administration, which has stood the test of time and of many vicissitudes. The foundation of this has been that authority in the College of Medicine has rested with the Faculty in making recommendations for appointments to the staff and in administration of the College and the Hospital, and in all other matters, including appointments to various offices.

The Hospital has always been a department of the Medical College, an essential part of its teaching organisation. The Faculty regards it as exceedingly important that it remain so; that the Superintendent have the status of a Professor and Head of a Department and be a nominee of the Faculty under the Dean.

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Superintendent of Hospital.

In the University Hospital there shall be a Superintendent to be appointed by the President, on the nomination of the Medical Faculty and recommendation of the Dean. He shall have the status of head of a department.

.....
.....

Further, the Faculty wishes to express its strong disapproval of the regulations adopted by the Board of Directors for the administration of the hospital at its meeting in June 1933, and to ask that they be rescinded. Regulations for the administration of the hospital were drawn up by the Faculty on June 12,1929 (Minute 752) and have, in the Faculty's opinion, proved satisfactory. Under Dr.Heimbürger's administration (working under these regulations) the efficiency of the Hospital has been immensely improved and there seems no need for change.

The Faculty, while emphasising its view that the Nursing

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School should remain under the direction of the Faculty, recommends that the status of the School should remain as heretofore until the return of Miss Wilson from furlough.

Emergency Meeting of Med. Faculty, Nov. 16, 1933. Min. 820.
Passed unanimously - That Minute 819 be reaffirmed.

Meeting of Administrative Council of Board of Directors, Nov. 16, 1933
D 1046.

The Administrative Council has received from the Executive Council the resolutions of the Medical Faculty meeting of Nov. 14th(?) (13th) and has carefully examined them.

Seeing that these resolutions involve amendments to the regulations for internal organization of the University, the Council has not the power to take action, but these resolutions will be referred to the next full meeting of the Board of Directors.

Meeting of Board of Directors, June 15-19, 1934. Min. D 1082
Medical Reorganization & Ranking of Faculty.

Voted- To refer these matters back to the Executive Council for investigation as to whether an infringement of the Government regulations would be involved.

Meeting of Executive Council, Dec. 4, 1934. Min. 231.
Medical Reorganization.

Regarding the statement and proposals of the medical faculty concerning Organization of the Medical College (referred back by Board of Directors D 1082), the Executive Council desires to make the following comments:

1. This statement was unanimously passed by the Medical Faculty on Nov. 13th, 1933. The Executive Council, on Nov. 15th, 1933, referred it without comment to the Administrative Council. The Adm. Council, in Feb., referred the matter to the Board of Directors which, on June 19th, 1934, referred it back to the Executive Council for consideration and comment as to whether infringement of Government regulations would be involved.

2. The Executive Council is aware that this statement was submitted by the Medical Faculty before the present presidential problem arose, and that, therefore, it is not immediately related to it. Furthermore, the Executive Council has attempted to consider the matter on its merits, without regard to personalities.

3. It is the opinion of the Executive Council that the specific proposals of the Medical Faculty, listed 1 to 6 under the heading Organization of the College of Medicine, do not infringe upon Government regulations.

4. In the judgment of the Executive Council, the last sentence of Section 4 "He shall have the status of the head of a department" should be deleted.

5. The Executive Council recommends the early adoption of these proposals because (a) they fall in line with the policy of many universities; (b) they probably will remove a source of dissatisfaction on the part of the Medical Faculty; and (c) such a change, if made, should be made before, not after, the inauguration of a new president.

Hospital Committee Meeting, May 17, 1937, Min. HC 188.

Organization of the University Hospital (Suggested revision)

I. Superintendent of the Hospital

1. There shall be a hospital superintendent, who shall be recommended by the Medical Faculty and appointed by the President.

nominated by a nomination Committee representative of all sides of hospital work

2. Duties of the Hospital Superintendent:

- a. He shall have oversight of all the affairs of the hospital.
- b. He shall be ex officio a member of the Executive Council.
- c. He shall be ex officio a member of the Medical Faculty and member of the Medical Executive Committee.
- d. He shall be chairman of the Hospital Committee and ex officio member of all committees of the hospital.
- e. He shall appoint or dismiss all non-professional staff, clerks and employees of the hospital.
- f. He shall, upon recommendation of the Hospital Committee, appoint, promote or dismiss all members of the Resident Staff.

II. Hospital Committee

1. There shall be a Hospital Committee, composed of the Supt. of the Hospital, the Dean of the Med. School, the Surgeon-in-chief, the Physician-in-chief, three other members of the full-time Attending Staff, elected by that staff, one representative of the clinical laboratories (Pathology, Bacteriology, Serology, Biochemistry, Hospital Laboratory) elected by heads of those laboratories, the Supt. of Nursing, and the Business Manager.

2. Powers and duties of the Hospital Committee:

a. To formulate policies and general plans for carrying on the clinical teaching and general internal working of the hospital and O.P.D.

b. To make recommendations to the University Executive Council concerning new policies, additional buildings, and other matters affecting the hospital.

c. To draft the annual budget of the Hospital and to recommend the same to the University Executive Council for adoption.

d. To ensure the carrying out of the dual purpose of the hospital - the care of the sick and the provision of clinical instruction - and to promote the esprit de corps of the hospital staff.

e. To recommend to the President the hospital status of clinical members of the medical faculty, and the appointment, status, promotion and acceptance of resignation of other members of the Attending Staff.

f. To recommend to the President the appointment of all Heads of special departments (such as Pharmacy, X-ray, Social Service, Electrotherapy, Hospital Laboratories, Dentistry, etc.)

g. To recommend to the President the appointment of the Superintendent of Nursing, and any Assistant Superintendents or administrative Supervisors of Nursing.

h. To recommend to the Superintendent the appointment, promotion, or dismissal of all members of the Resident Staff.

3. The Hospital Committee shall meet once a month and at other times on the call of the Superintendent.

III. Hospital Professional Staff.

1. The Attending Staff shall be composed of clinical members of

*Selected by
Med. Faculty*

the Medical Faculty and other such non-resident physicians as may be recommended by the Hospital Committee and appointed by the President.

2. The Resident Staff shall be composed of junior graduate physicians and internes, living in residences provided by the hospital, on full-time duty, and working under the supervision of the Attending Staff.

3. The Nursing Staff shall be composed of a Superintendent of Nursing, Supervisors, Head Nurses and Staff Nurses.

(This Staff shall be related to the Faculty of the School of Nursing very much as the Attending Staff is related to the Faculty of the School of Medicine.)

IV. Relation between the Hospital and the Medical School.

Since the University Hospital is organized both for the care of the sick and clinical instruction of medical students:

1. The Dean of the Medical School and the Superintendent of the Hospital shall be jointly responsible for the co-ordination of the medical teaching and clinical work within the hospital.

2. The Dean of the Medical School and Superintendent of the Hospital shall make recommendations to the University Executive Council as to the adjustments in the apportionment of the budget between the Medical School and Hospital, it being understood that the Medical School and Hospital shall carry a mutual responsibility in this matter, since the budgets of the two institutions are in reality two parts of a single budget.

(Min. 885)

The above approved by Med. Fac., May 20, 1937, with the following two amendments, and recommended to the Executive Council:-

II. 1. ... "Other members of the full-time Attending Staff elected annually by that staff, one representative of the clinical laboratories elected annually...."

II. 4. "Actions of the Hospital Committee shall be subject to revision by the Medical Faculty in the same way as those of the Medical Faculty Executive Committee."

Meeting of Executive Council, May 21, 1937. Min. 0303.

885. The above approved, with the following amendments:-

II.1. Approved.

2. g. Omitted. (2 h. becomes 2 g. "To recommend to the Supt. the appointment, promotion or dismissal of all members of the resident staff")

4. Approved, and the following added:-

"Minutes of actions shall be circulated to the Faculty within four days. In case five members of the faculty are of the opinion that actions of the Hospital Committee should be re-considered, the Dean shall call a special meeting of the faculty at their request."

III. 3. Nursing Staff. Last sentence altered to read as follows:
"(This Staff shall be related to the Faculty of the School
of Nursing in the same way as the Attending Staff is related
to the Faculty of the School of Medicine)"

Board of Directors Meeting, June 19, 1937. D.1193.

Hospital Reorganization.

voted: To appoint a small committee to discuss these regula-
tions and report at the next meeting of the Board. Dr. Williamson,
Mr. K.M. Wu, Bishop Scott, Miss Tseng and Mr. S.K. T'an were appointed.

(Nothing more has been done, as there have been no regular meetings
of the full Board since June 1937.)

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CHEELOO UNIVERSITY HOSPITAL

ORGANISATION.

15th Nov. 1958.

S. J. Smith

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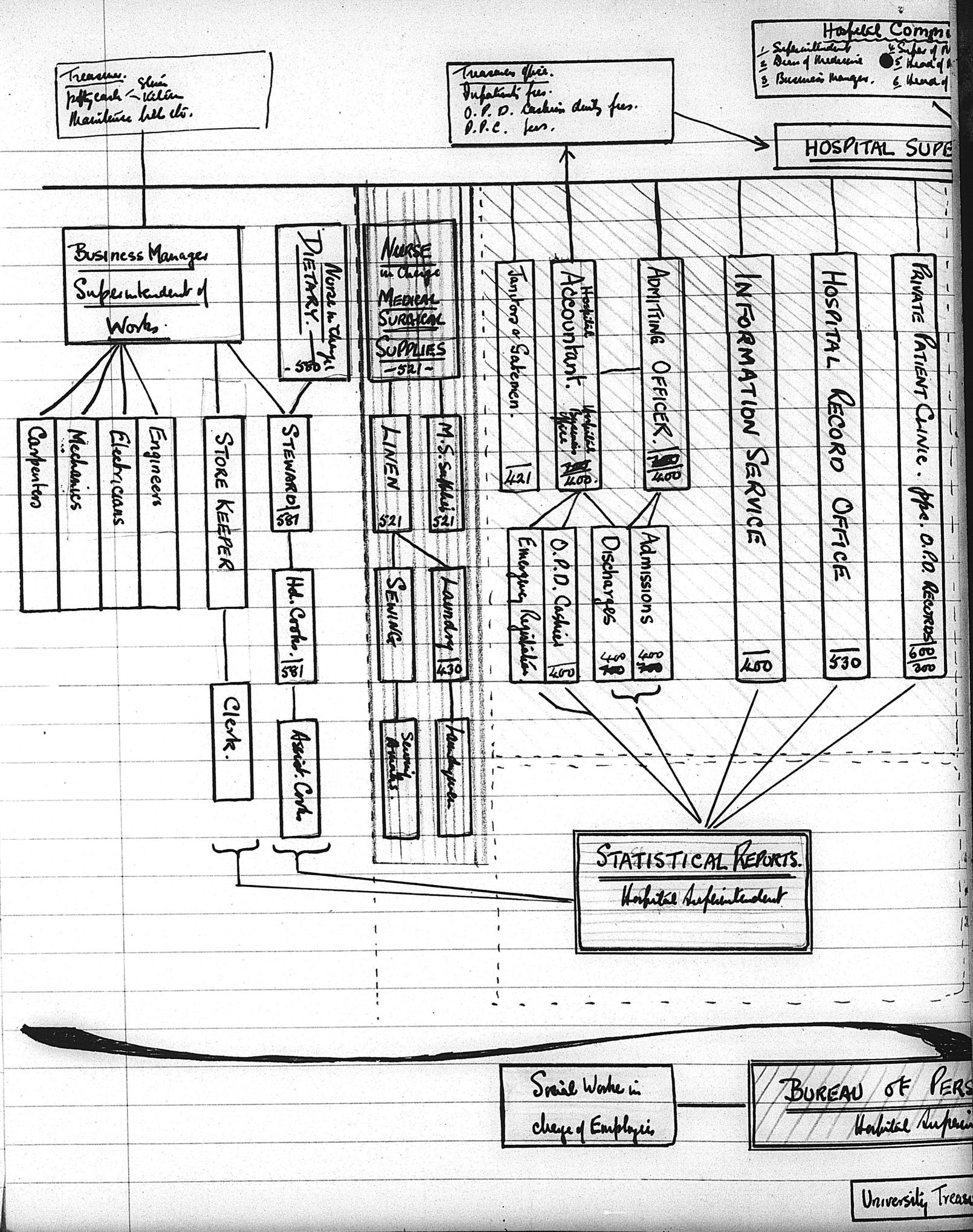
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Hofackel Committee (composed of)
 1. President
 2. Super of Nursing
 3. Head of Records
 4. Head of Pharmacy
 5. Head of Lab.
 6. Head of Hygiene
 7. Head of Hosp.

HOSPITAL SUPERINTENDENT.

HOSPITAL RECORD OFFICE
 630

PRIVATE PATIENT CLINIC. App. O.P.O. Records 618

Superintendent of Nursing (540)

Pharmacist in charge (510)
 M.O. in charge of Pharmacy

Medical & Surgical Staff (520)
 Professional Committee

School of Nursing
 HOUSE SUPERVISOR
 NIGHT SUPERVISOR
 O.P.O. Supervisor
 O.R. Supervisor

Social Service 635

DRUG SUPPLY
 Mechanic
 Linen Room
 Coolies
 DRUG RECORDS

EVANGELISTS 640

Dept. of Medicine 525
 Dept. of Surgery 526
 Laboratories 560

Student Nurses 635
 Head Nurse, P.M. 522
 O.P.O. Departmental Nurse
 O.R. Nurse

O.P.O.
 WARDS.
 O. R.
 ISOLATION - 526 -

Medicine
 Internal Medicine
 Skin
 EYE
 E.N.T.
 GENERAL
 Obs. and Gyn.
 DENTISTRY
 X-Ray
 Massage

Master of Nursing School 635
 Nursing School Graduate 660
 WARD ORDERLIES 422
 O.P.O. ORDERLIES 422

(522) Residents
 Residents
 (522) Ass. Resid. Ass. Resid.
 Tech. and Pharm.
 Blood Chemistry
 Clinical
 B.M.R.
 Technician
 M. Nurse

Head ORDERLY (422)
 FLOOR COOLIES (422)

Interns
 Interns
 Student Slides
 Technician Slides
 Coolies
 Coolies

DEPT. OF PERSONNEL
 Hospital Superintendent (450) 635.

Medical Officers in charge
 of Employee Health

University Treasurer's Office.

CHEELOO UNIVERSITY HOSPITAL

TSINAN,
SHANTUNG, CHINA

山東省濟南市
齊魯大學醫院

DUTIES AND PROCEDURE OF HOSPITAL ACCOUNTANT.

1. Examine special food book and see if any new names have been added since last inspection. If so, make indicating marks on corresponding ledger sheets.
2. Verify discharge report on census sheet, and initial same after correcting. If Admitting Officer has initialed the sheet, send same to the Superintendent.
3. Check deposits of the preceding day, write the total on back of last stub used in receipt book, and stamp with date.
4. Prepare report for all discharged patients of the preceding day.
5. Subdivide total cash receipts for preceding day and enter same under proper classifications in "Daily Report on Cash Receipts from Discharged In-patients".
6. In the case of Charity or "part-pay" patients, division of the patient's account must first be made in the small, black book prepared for "Accounts of Charity Cases and Part-pay In-patients". This division will be made in such a way as to apply the amount paid by the patient (if part-pay) to his expenses in the following order:
 - (184) Ward food
 - (110) Drugs
 - (160) Lab. examinations
 - (150) X-Ray "
 - (170) Massage
 - (126) Treatments (125) Deliveries and/or
 - (120) Operations
 - (103) Bed, -third class
 - (391) Barber service. (This is free to charity or Part-pay patients only by order of one of the Ward Supervisors, in cases of absolute necessity.)

The amounts apportioned to any charity fund are then to be entered under the appropriate headings in the "Daily Report on Discharged Charity In-patients." This sheet, upon being initialed by the collector from the University Treasurer's office and torn from the book, is to be sent, with the patient's "Yellow slip" authorizing charges to be made to charity funds, to the Social Service Dept.

7. In the case of hospital employees' (or members of their immediate families) eligible for aid from the Employees' Welfare Fund, division of the patient's account must also, as in the case of Charity patients, be made in the small, black book prepared for the "Hospital Employees' Welfare Fund". All such patients pay 20 cents per day each (including new-born infants) in cash to the Accountant upon being discharged. This amount is applied to the expenses of the patient in the same order as given above, under "6", for Part-pay patients. The amounts apportioned to the Welfare Fund are then entered on a sheet, separately from those of other Part-pay patients, and, this sheet, after detachment, is sent directly to the Superintendent. It should be labelled, "Hospital Employees' Welfare Fund", and at the top of the sheet should be written the name, in Chinese, of the employee concerned. The same report book is used as for Charity patients.
8. Prepare "Daily Report on Cash Box", in triplicate, in book prepared for same. (Reports on Cash Receipts from Discharged In-patients" and Reports on Discharged Charity In-patients are also prepared in triplicate; but the daily report for all discharged patients is prepared in quadruplicate, the extra sheet being sent to the Social Service Dept.)
9. Count out and set aside for the University Treasurer, the amount designated as "Transfers to Income Column". This amount should be the total cash receipts for the preceding day. Count the amount of actual cash remaining in the cash box and be sure that it agrees exactly with the "Balance forward" on the report sheet.

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齊魯大學醫院

10. In the order of Registration Numbers, file ledger sheets of discharged patients for the preceding day. (Use third drawer of filing cabinet.)
11. After arranging the current day's charge slips for drugs in numerical order, enter charges in the patients' ledger. Check name with hospital number in each case, and after charge has been entered, stamp date on lower end of the charge slip. Clip all for the day together, date, and place in basket on cupboard.
12. Enter all charges for the day from other charge sheets as sent in, checking name with hospital number in each case. Upon finishing a sheet, initial same and date it. Place in basket on top of cupboard until ready to file the whole lot for the day. The file of these slips is kept in top drawer of the filing cabinet.
13. Compute (in lead pencil, unless certain that a given discharge will take place as scheduled) on both sides of the corresponding ledger sheets, the bills for the patients who are to be discharged after 2 p.m. The totals should be the same on both sides of the sheet. (In case of an infant going out with its mother, place the baby's total also on the mother's sheet, using the line ordinarily reserved for "Samaritan Shop". Place the mother's own total on the "General Stores" line, and the grand total on the "Totals" line.). Be sure that no charges are omitted, paying especial attention to the "Special Food Book". Furthermore, inspect "Order Sheets" in infants' histories and wherever "Dryco" has been fed, charge the infant's account twenty cents per day for the number of days fed. Histories and "Order Sheets" should be carefully compared in all cases with the ledger sheets in order to make sure that no charges, as e.g. for operations, treatments, G.C. injections, etc., have been omitted. Any omissions of charges which should have been made should be reported to the Superintendent as soon as convenient.
14. Enter on the ledger sheets of the outgoing patients all last-minute charges brought in even up to 12am.
15. At 2.p.m. begin discharging patients. Stamp discharge date on ledger sheet and history in the appointed places, and also date the history on the upper right corner of the margin. Compute and write in the number of days in hospital. Re-check the account and fill in all figures with ink. Collect any balance due from patient. Secure from patient his original, or supplementary deposit receipts, to the total of the deposits shown on the ledger sheet; cancel these by initialling and stamping with date. Keep on file in right hand drawer of desk. Then give the patient a "Ch'ing Tan", i.e. receipted bill made out in detail from his ledger sheet. Also his balance remaining from deposits, if any is due. CHECK carefully. Write a discharge slip, dated, bearing patient's name and hospital number, for his use in leaving the ward. Give the patient or his agent a piece of Christian literature, if possible, to read while he is waiting, and let him take it with him when he goes out. Date receipts.
16. From time to time during the day receive all deposits for entering patients from the Admitting Officer. Check and initial the amounts on the receipt stubs in Admitting Officer's receipt book. It is wise to keep all deposits, including supplementary ones, separate from other funds until the cash report for a given day is made up; they may then be placed in the general balance on hand. Be sure to give credit to patients on the backs of their sheets for all supplementary or "continued" deposits, as made. Receipts for supplementary deposits are written by the Accountant.
17. Put the completed sheets of discharged patients in the basket on top of cupboard, and send the completed histories to the Record Room.
18. At frequent intervals prepare a list of patients who have exhausted their

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CHEELOO UNIVERSITY HOSPITAL

TSINAN,
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- original (or total) deposits. Have Mr. P'eng, of the Information Desk fill in the proper forms showing the status of each overdrawn account, and hand same to the patients' relatives or guarantors at the next opportunity. On the ledger sheet of each patient it is advisable to write the approximate date at which his deposit will probably be exhausted. This date is written in pencil, and his hospital number should also be placed opposite the same date on a special "notification calendar" kept for the purpose of reminding the Accountant when to place any given patient's name on the list of those who should bring a supplementary deposit. As the "approximate date" arrives for any patient, the state of his account should be examined, and, if necessary he should be notified to bring more money. The forms for this purpose are kept in the second drawer, right, of the Accountant's desk.
19. At intervals the Register should be brought down to date. The Admitting Officer will attend to the entering of patients' hospital and registration numbers; Mr. Chao, of the Record Room will write in the names and addresses. The Accountant should stamp, after each name, the date of discharge, and write in "part-pay" or "Free" in the space provided, according to a patient's status. Nothing need be written for those who paid accounts in full. The information needed for this will be found on the "Daily Report of Admissions and Discharges", and the "Daily Financial Report for All Discharged In-patients".
20. Charged Bills. Whenever, upon proper authorization from the Admitting Office, a patient's bill is to be charged to any given person, the bill should be made out in triplicate on the proper bill forms (kept in the cupboard on the top shelf). The original and one copy are sent to the University Treasurer, and the second copy is kept on file in the top drawer of the filing cabinet until the 1st copy is returned, marked "paid", by the University Treasurer. This copy is then sent to the Superintendent for filing, and the second copy may be destroyed.
21. About 3 p.m. the collector comes in from the University Treasurer's office. To him should be given the cash receipts from the preceding day, together with one sheet, after he has initialed and dated them, from each of the report books involved. (Daily Financial Report for All Discharged In-patients, Daily Report on Cash Receipts from Discharged In-patients, and Daily Report on Cash Box. When necessary, a sheet is also sent in from the Daily Report on Discharged Charity In-patients.) Also, a carbon copy from each report book is sent, at the same time, to the Superintendent's Office.

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March 28, 1941

RECOMMENDATIONS OF HOSPITAL REORGANIZATION
SUB-COMMITTEE

- I. Proposed that the idea of reorganisation be to obtain a more efficient running of the hospital and, secondly, to take some of the administrative load from the Superintendent, it being understood that such reorganisation should not, in any way decrease his ultimate administrative powers.
- II. Proposed that, on general lines, the work shall be divided into five main groups, with heads of each of the groups.

Professional

a) Director of Clinical Service. Professional Services Committee.

Responsibility for all purely medical side of the organisation, with power to recommend and act, subject always to the approval of the Superintendent. Medical records, etc.

b) Director of Nursing Services. Nursing Services Committee.

Responsibility for all purely nursing affairs, with power to recommend and act, subject to approval of Hosp.Supt.

c) Director of Social Service. Social Service Committee. Responsibility for all Social Service in the Hospital, with power to act, subject to approval of Hosp.Supt.

d) Executive Secretary)
e) Business Manager) positions to be defined later

- III. Proposed that an attempt be made to secure a Business Manager who shall be responsible for accounts, purchase of stores through the Business Office, and co-operate with Linen, Surgical and Pharmacy store buying. He shall supervise the Power House and Workshop.

Dissatisfaction was expressed by the H.S. with the present method of keeping accounts and purchase of stores through the so-called Purchasing Agent.

IV. Questions were raised as follows:

- a) Head of X-ray Department - under Clinical Services?
- b) Head of Laboratory Dept. - " " " ?
- e) Head of Dietary Dept. - separate department - probably with a permanent hospital sub-committee.
- f) Head of Pharmacy Dept. - separate department.
- g) Hospital Chaplain & Evangelistic Committee.

- V. Question of appointing an Executive Secretary who shall be also Secretary to the Superintendent. His duties to be executive oversight of Record Room, Registration Office, Admitting Office, Accountant's Discharging office and Cashier's office; Statistics; Information Desk.

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HOSPITAL REORGANISATION COMMITTEE

Proposed that: whereas, because of the circumstances during the last few years, the Board of Directors have not been able to meet, to discuss Hospital organisation, and whereas the present de jure and de facto organisation plans do not correspond, this sub-committee proposes that, until such time as a full meeting of the Board of Directors can discuss such reorganisation, the University Executive Council be asked to approve the following plan which shall be considered the legal organisation of the hospital.

Further, this plan has been formulated for the more efficient working of the hospital along representative lines and also with the idea of dividing the Superintendent's duties without in any way decreasing the ultimate administrative responsibility.

PREAMBLE: The Hospital is organised primarily for the care of the sick and, secondarily, to provide a means of instruction for medical and nursing students, etc. Being a Hospital supported in part by Christian missionary enterprise, adequate opportunity shall be given for effective evangelistic work.

I. There shall be direct responsibility for the administration of the hospital to the University through the President and his advisory Executive Council.

II. Superintendent of the Hospital. There shall be a Hospital Superintendent who shall be appointed annually by the President on the recommendation of the Hospital Committee.

III. Duties of the Hospital Superintendent.

1. He shall have oversight of all the affairs of the hospital.
2. He shall be ex officio a member of (a) the University Executive Council (b) the Medical Faculty (c) the Nursing School Advisory Board and of all committees and sub-committees in the hospital.
3. He shall be chairman of the Hospital Committee.
4. He shall, on the recommendation of the departments concerned, appoint and dismiss all clerks and employees of the hospital.
 - (b) He shall, on the recommendation of the Clinical Services Director, appoint and dismiss all house staff.
 - (c) He shall, on the recommendation of the Nursing Director, appoint all members of higher than supervisor grade. Staff and Head Nurses shall be appointed by the Nursing Director with his approval.
 - (d) He shall, on the recommendation of the Social Service Department, appoint all Social Service members.
5. On nomination of the Hospital Committee, he shall recommend to the President the appointment of:
 - I (a) Clinical Services Director
 - (b) Nursing Service Director - Laboratories
 - (c) Social Service Director - X-Ray
 - II (d) Hospital Dietitian
 - (e) " Pharmacist

- (f) Hospital Chaplain
- (g) " Business Manager

(h) any other staff member of equivalent grade -
6. Report to the President and Executive Council all actions of the Hospital Committee.

IV. There shall be Directors of the purely Professional Services who shall have power to recommend and act, subject to the approval of the Hospital Superintendent. There shall be professional committees to advise the Directors in their actions.

1. Director of Clinical Service - and Committee
Responsibility for all medical aspects of the organisation, House Staff, Medical Records, Medical Procedures, etc.

2. Director of Nursing Service - and Committee
Responsibility for Nursing affairs.

3. Director of Social Service - and Committee
Responsibility for Social Service affairs.

V. There shall be a Business Manager, who shall work under the direction of the Superintendent. The Hospital accounts shall be kept as formerly under the general University Treasurer, acting under the direction of the Hospital Superintendent.

VI. There shall be a Hospital Committee
Hospital Superintendent as Chairman

President)	
Dean of Medicine)	Ex officio
Director of Nursing Education)	
Director of Clinical Service)	
" " Nursing Service)	
" " Social Service)	
3 members from Clin. Service Com. elected annually)	
1 " " Nursing Com.)	" "
Business Manager)	

VII. Duties of Hospital Committee

1. To formulate policies and general plans for hospital internal administration.

2. To recommend to President, via Hosp.Supt., new policies, additional building and other matters affecting the hospital.

3. Power of discussion and recommendation of all matters affecting the hospital.

4. To nominate to the Hosp.Supt. for recommendation to the president all members of staff listed under III.5, I and II.

5. To recommend to the Hosp.Supt. the nomination from the Professional Departments re the appointment, status, promotion and resignation of professional staff.

6. To request through the Hosp.Supt. and President the formulation of requests for the allocation of Mission supported members of staff who will be assigned to work in the Hospital.

7. To receive recommendations from Standing Sub-committees:
Sub-com. on Diets
" " Drugs
" " Laboratories
" " Evangelism

VIII. Organisation of Clinical Instruction. The Hospital Superintendent, the Dean of the Medical School and the Clinical Service Director shall be jointly responsible.

Relation to the Nursing School: The Hospital Supt., the Director of Clinical Service, the Director of Nursing Education, Director of Nursing Service.

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ORGANIZATION OF THE UNIVERSITY HOSPITAL

(Suggested Revision)

I. Superintendent of the Hospital.

1. There shall be a hospital superintendent, who shall be recommended by the medical faculty and appointed by the President.

2. Duties of the hospital superintendent:

- a. He shall have oversight of all the affairs of the hospital
- b. He shall be ex officio member of the Executive Council.
- c. He shall be ex officio a member of the medical faculty and member of the medical Executive Committee.
- d. He shall be chairman of the Hospital Committee and ex officio member of all committees of the hospital.
- e. He shall appoint or dismiss all non-professional staff, clerks and employees of the hospital.
- f. He shall, upon recommendation of the Hospital Committee, appoint, promote or dismiss all members of the Resident Staff.

II. Hospital Committee.

1. There shall be a Hospital Committee, composed of the Superintendent of the hospital, the Dean of the medical school, the Surgeon-in-chief, the Physician-in-chief, three other members of the full-time attending staff elected by that staff, one representative of the clinical laboratories (Pathology, Bacteriology, Serology, Biochemistry, Hospital Laboratory) elected by heads of those laboratories, the Superintendent of Nursing, and the Business Manager.

2. Powers and duties of the Hospital Committee:

- a. To formulate policies and general plans for carrying on the clinical teaching and general internal working of the hospital and O.P.D.
- b. To make recommendations to the University Executive Council concerning new policies, additional buildings, and other matters affecting the hospital.
- c. To draft the annual budget of the Hospital and to recommend the same to the University Executive Council for adoption.
- d. To ensure the carrying out of the dual purpose of the hospital - the care of the sick and the provision of clinical instruction - and to promote the esprit de corps of the hospital staff.
- e. To recommend to the President the hospital status of clinical members of the medical faculty, and the appointment, status, promotion and acceptance or resignation of other members of the attending staff.
- f. To recommend to the President the appointment of all heads of special departments (such as Pharmacy, X-Ray, Social Service, Electrotherapy, Hospital Laboratories, Dentistry, etc.)
- g. To recommend to the President the appointment of the Superintendent of Nursing, and any Assistant Superintendents or administrative supervisors of nursing.

h. To recommend to the Superintendent the appointment, promotion, or dismissal of all members of the Resident Staff.

3. The Hospital Committee shall meet once a month and at other times on the call of the Superintendent.

III. Hospital Professional Staff

1. The Attending Staff shall be composed of clinical members of the Medical Faculty, and other such non-resident physicians as may be recommended by the Hospital Committee and appointed by the President.

2. The Resident Staff shall be composed of junior graduate physicians and internes, living in residences provided by the hospital, on full-time duty, and working under the supervision of the Attending Staff.

3. The Nursing Staff shall be composed of a Superintendent of Nursing, supervisors, Head Nurses, and Staff Nurses.

(This Staff shall be related to the Faculty of the School of Nursing very much as the Attending Staff is related to the Faculty of the School of Medicine.)

IV. Relation between the Hospital and the Medical School.

Since the University Hospital is organized both for the care of the sick and clinical instruction of medical students:

1. The Dean of the Medical School and the Superintendent of the Hospital shall be jointly responsible for the co-ordination of the medical teaching and clinical work within the hospital.

2. The Dean of the Medical School and Superintendent of the Hospital shall make recommendations to the University Executive Council as to the adjustments in the apportionment of the budget between the Medical School and Hospital, it being understood that the Medical School and Hospital shall carry a mutual responsibility in this matter, since the budgets of the two institutions are in reality two parts of a single budget.

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- VI. Time was taken in full discussion of Nursing Service recommendations, which were approved (see separate sheet). Separation of Nursing School from Hospital to Executive Council was approved.
- VII. Suggested that next meeting be spent on consideration of Hospital organisation in its relationship to Medical Faculty and Executive Council. It was felt that the fundamental question at issue was which of the two schemes, A June 1933 and B, Nov. 1933, was most reasonable and acceptable.

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