

DRAFT

Draft Document for Consultation Purposes

## Clinicians in Management

*Charter of Rights and Responsibilities  
For hospital Managers and Consultants*

## **CONSULTANT/MANAGER RELATIONSHIP: CHARTER OF RIGHTS AND RESPONSIBILITIES**

In 1998 the Department of Health and Children launched the Clinicians in Management Initiative (CIM) which was designed to heighten the involvement of key health professionals in the planning and management of services. The rationale for this was primarily about improving the quality of clinical service by moving decision making closer to the point of service delivery. A central component is to create and maintain effective working partnerships between clinicians and managers. Though notable progress under the initiative has been made in a number of hospitals the CIM experience has been very varied. Five years on from the launch of CIM, full clinician involvement in decision-making and in the management of resources is not yet the norm across the health service.

In 2003 a small and informal discussion group of hospital managers and consultants was convened, by the Office for Health Management, in an effort to progress the initiative. The discussion group has focused on the goal of increasing cooperation between doctors and managers at both hospital and national decision making levels. This will involve building a framework for effective working partnerships between clinicians and managers designed to deliver the goal of achieving meaningful involvement of clinicians in management. All agree that this is going to take time and it is probably wise to start small and progress slowly at a pace the parties are comfortable with. Consultants and senior managers are the key players. Others have much to contribute, much to gain and not a lot to lose.

During the past year the group has met on a number of occasions and has devised a draft charter of rights and responsibilities for Consultants, Managers and Clinical Directors. This document is intended to set out the principles on which understanding between clinicians and managers can develop and grow in a spirit of genuine partnership. We now consider it to be a consultation document and we are inviting clinicians and managers throughout the system to consider the charter, reflect on the spirit as well as the letter of it and let us have the benefit of their views.

## CONSULTANT/MANAGER RELATIONSHIP: CHARTER OF RIGHTS AND RESPONSIBILITIES

### Hospital Consultants

RIGHTS OF HOSPITAL CONSULTANTS	RESPONSIBILITIES OF HOSPITAL CONSULTANTS
<p><b>I have the right to:</b></p> <ul style="list-style-type: none"> <li>• Clinical autonomy, i.e. the right to make decisions about the treatment of my patients without consulting anyone</li> <li>• Ongoing Continuing Professional Development to ensure my clinical practice continues to be safe and effective</li> <li>• Meet with other consultants/clinicians as part of my contracted working week</li> <li>• Make a case for my perceived view of the resources needed to safely and effectively treat patients under my care</li> <li>• Management information on the allocation and utilisation of resources to allow me to make my case</li> <li>• Access the Hospital Management and the Board of the hospital – via an agreed process</li> <li>• Make my views known to the medical representative on the Management Team and/or the Board of Management</li> <li>• Advocate for patients under my care</li> <li>• Treat private patients within agreed hospital/national norms and guidelines</li> <li>• Be supported in my management of Human Resources and Financial Resources</li> <li>• Influence national policy</li> </ul>	<p><b>I have the responsibility to:</b></p> <ul style="list-style-type: none"> <li>• Ensure my clinical practice is safe and effective</li> <li>• Take account of the impact of my clinical decisions on others, both other clinicians and their patients</li> <li>• Contribute to the Clinical Audit process</li> <li>• Contribute to the development of safe hospital systems</li> <li>• Participate in hospital planning and decision making</li> <li>• Organise my clinical practice to enable me to participate in hospital decision making without unduly impacting on hospital finances, level of service or patient care</li> <li>• In making public statements, consider the impact of my actions on the standing of my hospital in the system</li> <li>• Practice safely and ethically as a clinician through participation in the Medical Council Competence Assurance Scheme</li> <li>• Act within agreed Service Plan provisions</li> <li>• Take account of the multi-disciplinary nature of care and to respect the contributions of other disciplines to patient care</li> <li>• Take responsibility for the supervision and education of the NCHDs under my aegis. Promote safe clinical practice and be cognisant of the budgetary implications of their practice</li> <li>• Communicate with patients and families respectfully and fully and ensure my team does also</li> <li>• Contribute to the hospital's Clinical Governance system</li> <li>• Maintain effective two-way communication systems with GPs</li> <li>• Communicate as appropriate with Public Health services, Mental Health services and Community Care services including the Primary Care Team.</li> </ul>

## CONSULTANT/MANAGER RELATIONSHIP: CHARTER OF RIGHTS AND RESPONSIBILITIES

### Hospital Managers

RIGHTS OF HOSPITAL MANAGERS	RESPONSIBILITIES OF HOSPITAL MANAGERS
<p><b>I have the right to:</b></p> <ul style="list-style-type: none"> <li>• Manage the hospital (in co-operation with consultants and others)</li> <li>• Make decisions regarding requests for additional resources in the context of overall resource availability and having consulted appropriately</li> <li>• Take the corporate view in making decisions</li> <li>• Manage implementation of the Consultant Contract</li> <li>• Information on patterns and outcomes of clinical practice by consultants</li> <li>• Be informed by consultants about any public statements they intend to make about the hospital</li> <li>• Develop Hospital Strategic plan and Service Plan</li> <li>• Seek to influence national policy</li> <li>• A respectful relationship with consultants and the consultants' representative bodies</li> <li>• Expect an efficient use of hospital beds and other resources</li> <li>• Ask consultants to participate in hospital planning and decision making</li> <li>• Ask consultants to organise themselves to achieve a) medical representation and b) medical coordination of services</li> <li>• Advocate on behalf of my hospital</li> </ul>	<p><b>I have the responsibility to:</b></p> <ul style="list-style-type: none"> <li>• Meet with consultants, both individually and collectively, on an agreed periodic basis</li> <li>• Take account of the views of consultants in making decisions on resource allocation</li> <li>• Ensure the hospital consultants operate safe systems and monitor their practice on a regular basis</li> <li>• Manage the whole hospital as an integrated unit serving a population</li> <li>• Measure performance of the whole hospital to ensure it meets defined patient needs</li> <li>• Allocate resources efficiently and according to an agreed set of criteria</li> <li>• Facilitate consultant participation in hospital planning and decision making</li> <li>• Represent the interests of the hospital to the funding system in order to access the resources necessary to deliver services</li> <li>• Provide data to hospital consultants to fully inform their decision-making</li> <li>• Ensure that all staff have the skills necessary to fulfil their roles within the hospital</li> <li>• Ensure hospital HR policies and procedures are developed and implemented within good practice standards</li> <li>• Develop safe systems and ensure consultants contribute to and observe the safety of the systems within their own practice</li> <li>• Participate in Continuing Professional Development</li> <li>• Participate in audit of hospital management in relation to efficiency, effectiveness and patient safety</li> </ul>

## CONSULTANT/MANAGER RELATIONSHIP: CHARTER OF RIGHTS AND RESPONSIBILITIES

### Clinical Directors (in addition to Rights and Responsibilities of Hospital Consultants)

RIGHTS OF CLINICAL DIRECTORS	RESPONSIBILITIES OF CLINICAL DIRECTORS
<p><b>I have the right to:</b></p> <ul style="list-style-type: none"> <li>• Manage the Directorate (in co-operation with the rest of the hospital)</li> <li>• Participate in the hospital Corporate Management structure</li> <li>• Contribute to hospital/organisation Strategic Plan and Service Plan</li> <li>• Be given the authority and appropriate resources to meet the goals of the Service Plan</li> <li>• Have the freedom to make decisions within the parameters of the organisation goals</li> <li>• Lead and manage the Directorate within the parameters of the hospital guidelines</li> <li>• Appropriate corporate support to enable me to fulfil my management role</li> <li>• Full and timely management information on the allocation and utilisation of resources within my Directorate and within the hospital</li> <li>• Information re clinical and planning operations of other Directorates</li> <li>• Access to the Hospital Manager and Board of the hospital</li> <li>• Access to ongoing management training and continuing professional development as a Clinical Director</li> <li>• Tap into a support network of other clinical directors nationally</li> <li>• Meet with colleagues and other Clinical Directors as part of my contracted working week</li> <li>• Recognition of the time required to fulfil the Clinical Director role</li> </ul>	<p><b>I have the responsibility to:</b></p> <ul style="list-style-type: none"> <li>• Contribute to the implementation of the Strategic Plan for the hospital/organisation</li> <li>• Consult with the multi-disciplinary team within my Directorate on the long term strategic direction of the Directorate</li> <li>• Produce an annual Service Plan for the Directorate</li> <li>• Engage the multi-disciplinary team within my Directorate in discussions on the service plan of the Directorate</li> <li>• Monitor, review and report on the implementation of the annual service plan for the Directorate</li> <li>• Manage within agreed resources for the Directorate and take such action as may be necessary to meet Service Plan targets</li> <li>• Ensure work of the Directorate is in line with best practice standards of care</li> <li>• Develop a multi-disciplinary team approach to the management of all clinical issues arising in the Directorate</li> <li>• Collaborate with the Business Manager and others to ensure continuous quality improvement in patient services</li> <li>• Audit clinical services to ensure the Directorate standards and performance are comparable with national/international benchmarks</li> <li>• Review case mix to identify decision drivers, implications, costs and impact on other Directorates</li> <li>• Provide clinical leadership across disciplines within the Directorate and across the hospital with other consultants</li> </ul>

**Note:** it is assumed that the Clinical Director reports to the hospital Chief Executive.

## Members of the CIM Discussion Group

### Chair

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Mr Denis Doherty, CEO of Health Boards Executive and Director Office for Health Management

### Group Members

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Dr Luke Clancy, Clinical Director, CresT Directorate, St James Hospital

Ms Jackie Crinion, Management and Organisation Development Specialist, Office for Health Management

Dr John Fennell, Consultant Physician, Loughlinstown Hospital

Dr Bairbre Golden, St. Bartholomew's Hospital, London and Vice-President, Clinicians in Management Ireland

Dr Laraine Joyce, Deputy Director, Office for Health Management

Mr John Lamont, Registrar, Irish medical Council

Mr Michael Lyons, Chief Executive Officer, AMNCH, Tallagh

Mr Tony McNamara, General Manager, Cork University Hospital

Mr John O'Brien, Chief Executive Officer, St James Hospital

Dr Christine O'Malley, Medical Consultant, Nenagh Hospital

Dr Cillian Twomey, Consultant Geriatrician, Cork University Hospital