# GRAND **CR**IVER HOSPITAL

### **BOARD MANUAL**

Approved By:	Board	Number:	8-10
Date Issued:	September 25, 2012	Page:	1 of 2
Last Review Date:	June 25, 2019	Last Revision Date:	June 25, 2019
SUBJECT:	Legislative Compliance		

## Policy

In its responsibility for oversight of risk management, the Board oversees the hospital's compliance with applicable legislation.

The Board will ensure that management has a process to ensure legislative compliance relevant to hospital operations.

This process will:

- Identify and determine applicability of aspects of legislation and regulations\*;
- Identify and prioritize legislation requiring review\*;
- Review prioritized legislation in conjunction with applicable hospital policies and procedures to confirm compliance and /or identify required revisions;
- Revise as required, any affected hospital policies and procedures to ensure they accurately reflect and meet current legislative requirements;
- Educate/train applicable employees about their legislative compliance requirements; and,
- Monitor the external environment for changes in legislation.

Management will ensure a corporate-wide view of legislation affecting hospital operations.

Monitoring, reviewing, and ensuring legislative compliance is a continuous process. New acts or regulations affecting the hospital will be raised and brought promptly to the attention of the Board. On an ongoing basis, management will monitor compliance with current applicable legislation.

# Accountability

The Governance and Community Engagement Committee, on behalf of the Board, will oversee management's responsibilities towards ensuring the organization has an adequate process in place to ensure legislative compliance. The Governance and Community Engagement Committee will ensure annually that management has reasonable practices in place to identify legislative requirements of the hospital and mechanisms to ensure compliance with those requirements. As deemed necessary, the Board may request Internal Audit to review the legislation compliance process.

The Governance and Community Engagement Committee will make any recommendations as required to the Board.

\* As per GCEC direction, since 2017, the legislative compliance check list published annually by the Ontario Hospital Association is used to identify and prioritize the legislative requirements that require review.

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## Reporting

Management will report on legislative compliance to the Governance and Community Engagement Committee annually. This will occur by way of a year-end report by the Chief Executive Officer. This report will provide to the Governance and Community Engagement Committee the legislative acts that have been reviewed during the course of the year and any necessary actions required to comply.

Areas of significant legislative non-compliance, associated risks and mitigating strategies or corrective action will be reported immediately.

From time to time the Governance and Community Engagement Committee may request management to provide an educational overview of a selected act or regulation and the steps taken to ensure compliance.

### **Related Policies**

3-A-1 Legislative and Regulatory Framework 3-B-10 Roles and Responsibilities of the Board 8-2 Enterprise Risk Management

## Reference

Understanding Your Legal Accountabilities: A Guide for Ontario Hospitals, OHA