

Dr. Candidate’s copy

Western Schulich School of Medicine & Dentistry’s copy

Department of Oncology’s copy

Medical Affairs’ copy

**DATE**

**<Candidates Home Address>**

Dear Dr.

**Re: Letter of Understanding**

It gives us great pleasure to offer you a position as a **General Practitioner in Oncology (GPO)** in the Department of **Oncology**, at the rank of Adjunct Professor with the Schulich School of Medicine & Dentistry (Schulich Medicine & Dentistry) at Western University, with a tentative starting date of **<enter start date>**. The final start date will be determined based on completion of all hospital credentialing requirements and completion of approval processes as described below.

This offer letter also confirms the receipt of three (3) satisfactory reference letters by the Department of Medical Affairs.

Upon acceptance of this offer, we may recommend your Professional Staff appointment to the City-Wide Credentials Committee (CWCC) of the London Health Sciences Centre (LHSC) and the St. Joseph’s Health Care London (St. Joseph’s). Upon further review, the CWCC may recommend your appointment to the Joint Medical Advisory Committee. Final approval of your appointment is ultimately decided by the Boards of Directors of LHSC and St. Joseph’s.

In addition, this offer is subject to final approval by the Dean, Provost, and Board of Governors of Western University. Upon your acceptance of this offer, we will recommend your academic appointment for final approval by the Dean, Provost, and Board of Governors of Western University.

This offer is contingent upon obtaining an Independent Certificate of Registration with the College of Physicians and Surgeons of Ontario (CPSO). See [Independent Practice Policy of the CPSO](http://www.cpso.on.ca/Registering-to-Practise-Medicine-in-Ontario).

This offer is also contingent upon ensuring membership with the Canadian Medical Protective Association (CMPA) according to your specialty.

**COVID VACCINATION POLICY**

**LHSC and St. Joseph’s COVID-19 VACCINATION POLICY**

Your privileges with LHSC and St. Joseph’s are conditional upon compliance with each of the vaccination policies of LHSC and St. Joseph’s.

To be eligible for appointment at LHSC and St. Joseph’s, you will be required to be fully vaccinated against COVID-19 by means of any of the approved Health Canada vaccines.

Upon receipt of the signed letter of offer, Medical Affairs will contact you with detailed instructions to initiate the credentialing process. This will include completing and submitting the [Health Review form](https://www.sjhc.london.on.ca/medical-affairs/resources/health-review) with PROOF of immunizations/immunity to Occupational Health and Safety Services (OHSS) of your PRIMARY affiliation. OHSS will contact you if any requirements are outstanding.

If your primary affiliation is with St. Joseph’s:

St. Joseph’s Health Care London
Occupational Health and Safety Services
P.O. Box 5777, Stn B
London, ON N6A 4V2
Phone: 519-646-6100, ext. 64332
Fax: 519-646-6235
**Email:** **ohss@sjhc.london.on.ca**

If your primary affiliation is with LHSC:

London Health Sciences Centre
Victoria Hospital Occupational Health and Safety Services
Rm E1-505 800 Commissioners Road East
London, ON N6A 5W9
Phone: 519-685-8500 ext. 52286
Fax: 519-685-8374
**Email:** **OHSS-MedicalAffairs@lhsc.on.ca**

**RESPONSIBILITIES**

***Clinical Service Responsibilities***

* full assessment of new patients, and determination of an appropriate diagnostic and treatment plan within the scope of Hematology Oncology services.
* assessment of follow-up patients, and initiation of appropriate tests and investigations when indicated
* performing or arranging to be performed, procedures including thoracentesis, paracentesis, bone marrow biopsies, lumbar punctures, fine needle aspirates
* referral to other consultants when required
* dictating letters to referring physicians, family physicians
* initiating referral to other services as necessary
* orchestrating admissions, dictating stat notes when and where appropriate
* assessing patients in the adjuvant and metastatic chemotherapy clinic, altering supportive treatments based on toxicities, ordering and supervising chemotherapy when appropriate
* providing coverage for patient follow-up clinics and chemotherapy clinics during the absence of the staff oncologist(limited to patients not knowingly requiring treatment alterations/decisions, and with appropriate oncologist back-up pre-arranged)
* attending relevant disease site group meetings, and academic rounds

***Teaching and Associated Responsibilities***

**Not applicable.**

***Research Responsibilities and Opportunities***

**Not applicable.**

***University / Hospital Administrative Activities***

**Not applicable.**

**REMUNERATION**

Remuneration will be provided in accordance with **the General Practitioner in Oncology Service Agreement**.

**Fees:**

* **LHSC** agrees to pay the **Physician** for the services at the **Level 3** rate provided in *Schedule 2 of the agreement (see below for details).* The services provided hereunder are health care services rendered by a medical practitioner to individuals and are not subject to Harmonized Sales Tax (“HST).
* The **Physician** shall submit to **LHSC** an invoice for services rendered monthly. The invoice shall be due and payable within fifteen (15) days.
* For greater certainty, any fee paid by **LHSC** to the **Physician** hereunder shall be made without withholdings or deductions for Income Tax, Canada Pension Plan, Employment Insurance, Workplace Safety and Insurance Premiums, the Ontario Employer Health Tax or other like deductions.
* The **Physician** agrees to pay on his/her own account all expenses related to Income Tax, Canada Pension(CPP), Employment Insurance(EI), Group Health, and any other business tax. It is understood and agreed that all the foregoing are the sole and exclusive responsibility of the **Physician**. The **Physician** acknowledges that she/he is responsible for all required taxes, withholdings and remittances or similar obligations, under any federal or provincial legislation, which may apply to the **Physician’s** activities.
* Unless otherwise agreed to in writing by the parties hereto, no additional fee, wage, salary or other emolument shall be paid to the **Physician** on account of the services provided pursuant to this Agreement.
* The **Physician** shall not be entitled to participate in any employee benefit plans offered by Service Agreement **LHSC**. The **Physician** acknowledges that he/she is responsible for his/her own benefit coverage as he/she sees fit including pension, disability, life insurance, health and dental.
* The **Physician** shall be solely responsible for any and all expenses incurred by him/her related directly or indirectly to the performance of services pursuant to this Agreement.

**Billings:**

* The **Physician** hereby assigns to **LHSC** all fees for clinical services rendered by the **Physician** in the Program at the Premises, including OHIP and other patient clinical billings (RAMQ, out of province/country, etc.).
* **LHSC** shall process, submit, reconcile and collect all billings. The **Physician** agrees to provide all necessary information to **LHSC** bi-weekly to allow it to process and collect the Billings. **LHSC** shall provide the **Physician** with a reconciliation report on request.
* **LHSC** agrees to indemnify and save harmless the **Physician** with respect to any claw backs, discounts, adjustments, corrections and other reductions in OHIP payments that may arise relating to OHIP Billings assigned by the **Physician** to **LHSC**.

**SCHEDULE 2 – FEE FOR SERVICES PAYMENT SCHEDULE**

|  |
| --- |
| Physician’s Fee for Services Schedule: **Daily Rates**  |
| Level 1  | $728.32  |
| Level 2  | $785.53  |
| Level 3  | $854.18  |
| Level 4  | $965.49  |

Your total remuneration package consists of multiple elements. Please note that all forms and amounts of remuneration and support outlined in this letter of offer are dependent on levels of department and ministry funding and as such they are all subject to review and change at any time with an appropriate notice period.

You will have a 0.6 full time equivalent (FTE) position (equivalent to three (3) full clinic days per week).

**HOSPITAL PRIVILEGES**

You will receive an email from Medical Affairs at LHSC and St. Joseph’s with instructions and timelines to complete your credentialing requirements for hospital privileges.

In addition, you will receive your login and instructions to complete the Privacy and Confidentiality eLearning and agreement. Once completed, you will receive your hospital Corporate ID which will allow you to access the ME(MyEducation) system in order for you to complete all required eLearning as part of the credentialing process. These modules are either mandated by legislation or hospital policy, and therefore, it is your responsibility to maintain compliance.

The annual hospital privileging cycle is from July 1st to June 30th. In advance of June 30th, Professional Staff who wish to renew their hospital privileges will be required to complete the annual reappointment process. Information on how to complete the reappointment process will be emailed to all Professional Staff each February.

Your contact in Medical Affairs is Stacey Taylor, Human Resource Planning and Credentialing Specialist and may be reached at 519-685-8500 ext. 75115 or via email at stacey.taylor@lhsc.on.ca

***Please return the completed forms to*** ***<Manager or department contact>***, ***in the enclosed envelope*** ***45 days from the receipt of this letter of offer to ensure that your appointment is not delayed for approval by the Board of Directors.***

An orientation website has been developed to provide you with essential information about London, Canada, Western University, London’s hospitals and Research Institutes, and the London Regional Cancer Program. Once you have received your hospital Corporate ID, please visit the [Orientation](https://intra.lhsc.on.ca/medical-affairs/professional-staff/orientation) website.

You are required to attend a Professional Staff Orientation Session. The session will provide you with important information to practice within LHSC and St. Joseph’s. The next Professional Staff Orientation Session is scheduled for **<enter Orientation date>**. Once you receive your hospital Corporate ID, please register for this session through your ME(MyEducation) account. Further information can be obtained from the [Courses and Events](https://intra.lhsc.on.ca/medical-affairs/learning-and-development/courses-and-events) website.

**MANDATORY MAINTENANCE OF CERTIFICATION (MOC)**

It is now a CPSO regulatory requirement for all members to engage in MOC. Physicians cannot report directly to CPSO who requires that this information is collected through an approved body, which currently include the College of Family Physicians of Canada (CFPC), Royal College of Physicians and Surgeons of Canada (RCPSC) or the General Practice Psychotherapy Association (GPPA).

**SCHULICH MEDICINE & DENTISTRY ORIENTATION AND FACULTY DEVELOPMENT**

View [information](https://www.schulich.uwo.ca/clinicalfacultyaffairs/professional_affairs/learning_resources/new_faculty_orientation.html) on the Dean’s Orientation Program for New Faculty as well as other Faculty Development workshops offered through Schulich Medicine & Dentistry.

**PROFESSIONAL DEVELOPMENT FOR NEW PROFESSIONAL STAFF – AN EDUCATION SERIES**

All new faculty members are strongly encouraged to attend, as well as all new Professional Staff entering from Residency/Clinical Fellowships and for Professional Staff **new** to the Ontario healthcare system. You will receive a schedule from the department administrative contact which lists the sessions. Once you have received your hospital Corporate ID, view the Courses and Events website for information on Professional Development for New Professional Staff at <https://intra.lhsc.on.ca/medical-affairs/learning-and-development/medical-affairs-courses-and-events>

**RESIGNATION / RETIREMENT**

Should you wish to resign/retire, you are required to give the Department, Division, University, and Medical Affairs (LHSC and St. Joseph’s hospital appointments) written notice of your intention to resign/retire as early as possible and no later than three (3) months immediately preceding the effective date of resignation/retirement.  Ideally, all resignations become effective at the end of the academic year, June 30.  This information is outlined in the Conditions of Appointments (CAC) document, Section 13.3.  You will receive a copy of CAC from Western to review and sign before your appointment is finalized.

The Hospitals’ By-Laws also state within section 4.2(d)(xix)(E):  “the applicant will use best efforts to provide the Hospital with three (3) months’ prior written notice of the applicant’s intention to resign or otherwise limit their exercise of privileges and that a failure to provide the required notice will result in the Chief of Department notifying the College that the applicant has failed to comply with the Hospital’s By-Laws and a notation of the breach of the By-Laws in the applicant’s file.  The applicant may be exempted from the notice requirements if the Chief of Department believes, after considering the Credentialed Professional Staff Human Resources Plan, that the notice is not required or if the Chief of Department believes that there are reasonable or compassionate grounds to grant the exemption”.  Information is also available on line through the [Medical Affairs website](https://intra.lhsc.on.ca/medical-affairs/governance/laws-and-rules-regulations). You can access the By-Laws once you receive your hospital Corporate ID.

For retirement, under the CAC’s Section 13 and the hospital’s bylaws, clinical academics are required to give at least 12 months’ written notice of retirement.

Letters of resignation/retirement should be addressed and sent to the Department of **<enter recruiting department>** Chair/Chief with a copy to your Division Chair/Chief.  The Department Chair/Chief’s office in turn, will notify the University, the Dean’s Office, and Medical Affairs to process the appropriate termination or retirement paperwork.

Please keep in mind that notice to secretaries requires minimum 4-5 months pre-resignation/pre-retirement, depending on whether the secretary is a hospital non-union employee, a hospital union employee, or an independently hired employee.

**CLOSING**

We have enclosed **<enter the amount of copies enclosed>** copies of this letter. Kindly sign all copies and retain a copy for your files and return all other copies, together with the other requested documents to be returned (refer to offer package enclosure letter) in the enclosed envelope addressed to **Elvira Romanchik.** We would ask that you forward the signed copies to us as soon as possible after the receipt of this offer letter.

We look forward to your acceptance of this offer and to your joining us as a clinical colleague. On behalf of the Department of Oncology, we extend a warm personal welcome to you and we look forward to further growth and blossoming of a distinguished and collegial career.

Sincerely,

Dr. Michael Ott, MD, FRCSC Brad Campbell

Chair/Chief, Department of Oncology Interim Executive Lead - Financ

London Health Sciences Centre London Health Sciences Centre

Dr. Karin Hahn, MD, FRCPC Dr. Kang Howson-Jan, MD, FRCPC

Chief, Division of Medical Oncology Head, Division of Hematology

London Health Sciences Centre London Health Sciences Centre

Dr. Stephen Welch, MD, FRCPC

Chair, Division of Medical Oncology

London Health Sciences Centre

Mr. Tom McHugh

Regional Vice President, Cancer Services

London Health Sciences Centre

CC: Medical Affairs

Accepted this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dr. Candidate’s Name