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c 322 Public Hospitals Act

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CHAPTER 322

The Public Hospitals Act

1. In this Act,

(a) "administrator" means the person who has for the time being the direct and actual superintendence and charge of a hospital;

(b) "board" means the board of directors, governors, trustees, commission or other governing body or authority of a hospital;

(c) "Commission" means the Hospital Services Commission of Ontario;

(d) "Department" means the Department of Health;

(e) "dependant" means a patient the charges for whose treatment some other person is liable in law;

(f) "hospital" means any institution, building or other premises or place established for the treatment of persons afflicted with or suffering from sickness, disease or injury, or for the treatment of convalescent or chronically ill persons that is approved under this Act as a public hospital;

(g) "inspector" means an officer of the Commission or of the Department designated under this Act as an inspector;

(h) "Minister" means the Minister of Health;

(i) "municipality" means a city, separated town or county, except that in a territorial district it means a city, town, village, township or improvement district;

(j) "patient" means a person received and lodged in a hospital for the purpose of treatment;

(k) "provincial aid" means any sum paid to a hospital under this Act or under The Hospital Services Commission Act;

(l) "regulations" means the regulations made under this Act;
(m) "resident" means actually resident in a municipality for a period of three months within the six months next prior to admission to a hospital;

(n) "superintendent" has the same meaning as administrator;

(o) "territorial district" means any of the territorial districts set forth in The Territorial Division Act;

(p) "treatment" means the maintenance, observation, medical care and supervision and skilled nursing care of a patient and, if dental service is made available in a hospital by its board, includes the dental care and supervision of the patient;

(q) "unorganized territory" means those parts of Ontario that are without municipal organization, including Indian reservations and provincial parks, but not including Federal property of Canada used for the purposes of national defence installations, camps or stations. 1957, c. 98, s. 1; 1959, c. 80, s. 1 (1-3).

2. Nothing in this Act in any way relates to or affects a sanatorium under The Sanatoria for Consumptives Act or a private hospital under The Private Hospitals Act. 1957, c. 98, s. 2.

3. The Commission shall administer and enforce this Act and the regulations. 1957, c. 98, s. 3.

4.—(1) The several institutions that under The Public Hospitals Act, being chapter 307 of the Revised Statutes of Ontario, 1950, as hospitals received provincial aid for the year 1955 shall for the purposes of this Act and the regulations be deemed to be hospitals approved under this Act.

(2) No application to incorporate a hospital under The Corporations Act, or under a private Act shall be proceeded with until it has first received the approval of the Commission.

(3) No institution, building or other premises or place shall be operated or used for the purposes of a hospital unless it has received the approval of the Lieutenant Governor in Council upon the recommendation of the Commission to the Minister.

(4) No additional building or facilities shall be added to a hospital until the plans therefor have been approved by the Commission.

(5) No building or other premises or place or any part thereof acquired or used for the purposes of a hospital shall be
sold, leased, mortgaged or otherwise disposed of without the approval of the Commission.

(6) Any approval given or deemed to have been given under this Act in respect of a hospital may be suspended by the Minister on the recommendation of the Commission, or revoked by the Lieutenant Governor in Council. 1957, c. 98, s. 4.

5. The Commission may pay provincial aid to hospitals in such amounts, in such manner and at such times as the regulations prescribe. 1957, c. 98, s. 5.

6. Every hospital has power to carry on its undertaking as may be authorized by any general or special Act under which it was created, established, incorporated or empowered so to do, but, where the provisions of any general or special Act conflict with the provisions of this Act or the regulations, the provisions of this Act and the regulations prevail. 1957, c. 98, s. 6.

7. The board of a hospital or a corporation incorporated for the purpose of establishing a hospital may pass by-laws for expropriating any land that may be requisite for or advantageous to any of its purposes, and in that behalf may exercise the powers of expropriation conferred on a municipality under The Municipal Act, the provisions of which relating thereto apply mutatis mutandis to and govern the exercise of such powers so far as they are applicable or necessary thereto, and the superintendent in such case shall exercise the powers and perform the duties that under that Act are to be exercised and performed by the clerk of the municipality. 1957, c. 98, s. 7.

8.—(1) A hospital shall pass by-laws as prescribed by the regulations and submit them to the Commission.

(2) A hospital shall amend or revise its by-laws and submit them to the Commission after receiving notice to do so as prescribed by the regulations.

(3) No by-law or amendment to or revision of a by-law has any force or effect until it is approved by the Lieutenant Governor in Council upon the recommendation to the Minister of the Commission. 1957, c. 98, s. 8.

(4) Notwithstanding The Corporations Act, a hospital may provide by by-law for the election and retirement of directors in rotation, but in that case no director shall be elected for a term of more than five years and at least four directors shall retire from office each year.
(5) Notwithstanding *The Corporations Act*, a hospital may provide by by-law for the appointment by its board, in recognition of contributions or of long or special services to the hospital deemed worthy of such appointment, of life directors, term directors and honorary directors.

(6) A life director may attend meetings of the board during his lifetime and vote in person but not by proxy thereat, and the number of life directors at any time shall not exceed the number of elected and *ex officio* directors.

(7) A term director may attend meetings of the board for a term not exceeding ten years as specified in the by-law and vote in person but not by proxy thereat.

(8) An honorary director may attend meetings of the board and may act in an advisory capacity without the right to vote or may vote in person but not by proxy as determined by the by-law.

(9) The by-law may provide for the appointment of members or retired members of the medical, dental, nursing or administrative staffs of the hospital as honorary directors of the hospital.

(10) The number of honorary directors with the right to vote at board meetings plus the number of term directors at any time shall not exceed the number of elected and *ex officio* directors. 1959, c. 80, s. 2.

9. Notwithstanding *The Corporations Act*, no hospital by-law authorizing the board to elect a management committee and to delegate to the management committee any powers of the board requires to be confirmed at a general meeting of the members of the hospital corporation. 1957, c. 98, s. 9.

10. No member of a hospital corporation shall vote by proxy at any meeting of the corporation. 1957, c. 98, s. 10.

11.—(1) Notwithstanding *The Corporations Act*, it is not necessary to send written notice of any general or special meeting of the members of the hospital corporation to each member of the hospital corporation.

(2) It is sufficient notice of any general or special meeting of the members of the hospital corporation if notice is given by publication at least once a week for two successive weeks next preceding the meeting in a newspaper or newspapers circulated in the municipality or municipalities in which members of the hospital corporation reside as shown by their addresses on the records of the hospital. 1957, c. 98, s. 11.
12. The Minister, on the recommendation of the Commission, may designate one or more officers of the Commission or of the Department to be inspectors for the purposes of this Act and the regulations. 1957, c. 98, s. 12.

13. No hospital for chronically ill persons shall admit as a patient an indigent person or the dependant of an indigent person until such person or dependant is certified in accordance with the regulations to be a chronically ill person. 1957, c. 98, s. 13.

14.—(1) Except as may be otherwise provided in this Act, no hospital receiving provincial aid, other than a hospital for chronically ill persons or a hospital for convalescent persons, shall refuse to admit as a patient any person who from sickness, disease or injury or otherwise is in need of active treatment.

(2) Except as may be otherwise provided in this Act, no hospital for convalescent persons receiving provincial aid shall be required to admit as a patient a chronically ill person or a person who is in need of active treatment, and no hospital for convalescent persons receiving such aid shall refuse to admit as a patient any convalescent person referred to it from an active treatment hospital or by a legally qualified medical practitioner in accordance with the regulations.

(3) Except as may be otherwise provided in this Act, no hospital for chronically ill persons receiving provincial aid shall be required to admit as a patient a convalescent person or a person who is in need of active treatment, and no hospital for chronically ill persons receiving such aid shall refuse to admit as a patient any chronically ill person so certified and referred to it from an active treatment hospital in accordance with the regulations. 1959, c. 80, s. 3, part.

15. Nothing in this Act requires any hospital to admit as a patient,

(a) any person who is not a resident or a dependant of a resident of Ontario, unless by refusal of admission life would thereby be endangered; or

(b) any person who merely requires custodial care. 1959, c. 80, s. 3, part.

16.—(1) Where a patient in a hospital is an indigent person or a dependant of an indigent person and is declared by the attending physician not to require continued medical and skilled nursing care in a hospital but only requires custodial care, the municipality in which such person was resident...
at the time of admission is liable to the hospital for payment of the per diem rate established for that hospital by the Commission from the twenty-first day after the day on which notice that the patient is declared to require only custodial care has been sent by the superintendent of the hospital by registered mail to the clerk of the municipality until such patient leaves the hospital.

(2) A municipality that is liable to a hospital for the payment of the per diem rate under subsection 1 shall make such payment to the hospital at least quarterly.

(3) Where the person referred to in subsection 1 was a resident of unorganized territory, the Province shall pay the per diem rate in accordance with subsection 1.

(4) For the purposes of this section, “indigent person” means a person who is receiving assistance from a municipality or is declared eligible by the Department of Public Welfare to receive such assistance, or who has no place of abode to which he may go from the hospital. 1960, c. 93, s. 1.

17. Subject to any existing agreement relating thereto, every hospital receiving provincial aid shall provide such facilities for medical students and dental students as the regulations require. 1957, c. 98, s. 17; 1959, c. 80, s. 4.

18.—(1) Where a patient in a hospital is an indigent person or a dependant of an indigent person, the municipality in which he was resident at the time of admission is liable to the hospital for payment of the charges for his treatment at the following rates:

(a) in the case of a hospital that in the regulations is classed as a Group A hospital, at the rate of $9 per day;
(b) in the case of a hospital that in the regulations is classed as a Group B hospital, at the rate of $7.85 per day;
(c) in the case of a hospital that in the regulations is classed as a Group C or Group D hospital, at the rate of $6.75 per day; and
(d) in the case of all other hospitals, at the rate of $5.60 per day. 1957, c. 98, s. 18 (1); 1960, c. 93, s. 2.

(2) A municipality that is liable to a hospital for the payment of charges for treatment under subsection 1 shall make such payment to the hospital at least quarterly. 1957, c. 98, s. 18 (2).
19. A municipality may pay to a hospital the charges for treatment of a patient notwithstanding that the patient was not resident in the municipality at the time of admission to the hospital. 1957, c. 98, s. 19.

20.—(1) In the event of the death in a hospital of a patient who is an indigent person or the dependant of an indigent person, the municipality in which he was resident at the time of admission shall pay to the hospital any expenses of his burial that it incurs, not less than,

(a) $125 for the burial;
(b) the actual cost of opening and closing the grave; and
(c) a fee of $10 for a religious service performed in connection with the burial.

(2) Where the deceased person referred to in subsection 1 was not resident in a municipality, the Commission may pay his burial expenses in accordance with subsection 1. 1957, c. 98, s. 20.

21.—(1) Upon admission to a hospital of a patient who is or is represented to be or becomes an indigent person or the dependant of an indigent person, the superintendent shall by registered letter notify the clerk of the municipality in which such indigent person is or is represented to be resident of such admission, giving such particulars as are ascertainable to enable the clerk to identify the indigent person.

(2) Where a patient becomes an indigent after admission to a hospital, the superintendent shall notify the clerk of the municipality in accordance with subsection 1 when the indigency becomes known to the superintendent.

(3) Where the superintendent notifies the clerk of a county in accordance with subsection 1 or 2, he shall, at the same time and in the same manner notify the clerk of the local municipality in which such indigent person is or is represented to be resident. 1957, c. 98, s. 21.

22.—(1) Unless the clerk of a municipality within twenty days after the date of mailing such notice to him, by registered mail, notifies the superintendent from whom such notice was received that the patient referred to therein was not resident in the municipality at the time of admission as a patient or is not an indigent person or a dependant of an indigent person, such municipality is liable for the charges for treatment of such patient as provided in this Act.
(2) The clerk of a municipality, when notifying a superintendent that a patient is not resident in the municipality or is not an indigent person or a dependant of an indigent person, shall furnish such information as he has ascertained with respect to such patient and his reason for refusing to acknowledge the patient as resident in the municipality or as an indigent person or a dependant of an indigent person. 1957, c. 98, s. 22.

23. For the purpose of this Act, no patient shall be deemed to be resident in a municipality,

(a) by reason of having gone to the municipality for the purpose of seeking medical advice or treatment or seeking admission or treatment in a hospital in such municipality, but in such cases the patient shall for the purpose of this Act be deemed to be resident in that municipality in which he was resident at the time of going to the first-named municipality for the purpose of seeking such advice, treatment or admission; or

(b) if the municipality is in a territorial district and the patient being infected or likely or suspected of being infected with tuberculosis has gone to such municipality principally for the purpose of health and within one year after going to such municipality is admitted as a patient in a hospital, but in such cases the patient shall for the purpose of this Act be deemed to be resident in that municipality in which he was resident at the time of going to a municipality in a territorial district; or

(c) if the patient has been living in the municipality by reason of being a pupil in any school, college, university, training school for nurses established under The Nursing Act or a predecessor thereof, or other seminary of learning therein; or

(d) by reason of having been a patient or an inmate of a hospital, a private hospital licensed under The Private Hospitals Act or a predecessor thereof or The Private Sanatoria Act, an institution licensed by a municipality as a nursing home, a sanatorium, home for the aged, orphanage, children's shelter or child welfare institution, jail, reformatory, prison or other public institution in the municipality and otherwise was not resident therein, but in such cases the patient shall for the purpose of this Act be deemed to be resident in that municipality in which
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he was resident at the time he became such an inmate or patient; or

(e) if the patient has been living in the municipality by reason of being engaged on active service as a member of the naval, military or air force of Canada, but in such cases the patient shall for the purpose of this Act be deemed to be resident in that municipality in which he was resident at the time of enlistment for service; or

(f) by reason of having gone to the municipality during the period between the filing of application for admission and admission to a hospital, but in such case the patient shall for the purpose of this Act be deemed to be resident in that municipality in which he was resident at the time of going to the first-named municipality for the purpose of awaiting admission; or

(g) if the patient has been discharged from a hospital and has been provided with accommodation in a municipality by and at the expense of some other municipality, but in such case the patient shall, for the purpose of this Act, be deemed to be resident in the municipality in which he was resident at the time he was provided with such accommodation in the first-named municipality. 1957, c. 98, s. 23.

24.—(1) The clerk of a county may require the clerk of any township, town, village or improvement district forming part of the county to furnish such particulars as are ascertainable in respect of the residence or indigence of any person whose case has been brought to the attention of the clerk of the county under section 21.

(2) The clerk of a township, town, village or improvement district, within ten days of receiving a notice sent to him pursuant to subsection 1, shall send the particulars requested to the clerk of the county by registered mail.

(3) Upon the failure of the clerk of a township, town, village or improvement district to comply with subsection 2, such township, town, village or improvement district is liable to the county for the charges for treatment of a patient in respect of whom the information is requested as provided for in this Act. 1957, c. 98, s. 24 (2-4).

25.—(1) A dependant of an indigent person for the purpose of this Act shall be deemed to be resident in that municipality in which such indigent person is resident, but, where such indigent person is not resident in any municipality, such
dependant shall be deemed to be resident in that municipality in which such dependant is resident.

(2) A dependant of a person who is engaged on active service as a member of the naval, military or air force of Canada shall be deemed to be resident in that municipality in which such dependant is resident. 1957, c. 98, s. 25.

26. Where a patient in a hospital, other than a hospital for chronically ill persons, for the charges for whose treatment a municipality is liable under this Act is certified in accordance with the regulations to be a chronically ill person, the hospital may require of the municipality liable that such patient be removed from the hospital within seven days after notice has been given by registered mail to the clerk thereof, and failing which removal the hospital is entitled to charge the municipality liable $1.10 per day in addition to any other charges provided to be paid under this Act while such patient remains in the hospital. 1957, c. 98, s. 26; 1960, c. 93, s. 3.

27.—(1) Where a baby is born in a hospital, it shall for the purpose of this Act be deemed to be a patient and, if it is the baby of an indigent person, shall be deemed to be resident in that municipality in which such indigent person is resident, and the municipality is liable for the treatment of the baby as the dependant of an indigent person at a rate of $1 per day for a period not exceeding fourteen days after its birth. 1957, c. 98, s. 27 (1); 1960, c. 93, s. 4.

(2) Where a baby referred to in subsection 1 is kept in hospital for a period longer than fourteen days, the municipality is liable for the treatment of the baby after the fourteenth day as the dependant of an indigent person at the rates prescribed in section 18. 1957, c. 98, s. 27 (2).

28. Where under this Act the charges for treatment of any patient or for burial expenses of a deceased patient are payable by a municipality, the hospital to which such patient was admitted shall from time to time render to the clerk of the municipality statements of account of any such charges with full particulars thereof, and if the amount of any such account is not paid within a reasonable time after it has been rendered it may be recovered as a debt in any court of competent jurisdiction. 1957, c. 98, s. 28.

29. Upon the payment by a municipality of any account rendered to it by a hospital for treatment of a patient or on payment by it of any expenses of burial of a deceased patient, such municipality may recover from the patient, or, in the event of his decease, from his estate or personal representa-
tives, or, in the case of a dependant, from any person liable in law with respect to such dependant, the amount of the payment so made, and the same may be recovered as a debt in any court of competent jurisdiction. 1957, c. 98, s. 29.

(2) The right of a municipality under this section to recover any payment made by it to a hospital for the treatment of a patient shall commence the day after the patient is discharged from the hospital and shall not include the right while the patient is in hospital to take all or part of the pension received by the patient under the Old Age Security Act (Canada) R.S.C. 1952, c. 200 or received under that Act by the person whose dependant the patient is.

(3) The taking by a municipality of a conveyance of or a security on land under a municipal by-law authorized by paragraph 36 of section 377 of The Municipal Act to recover any payment made by the municipality for the treatment of a patient is deemed to be recovery for the purposes of this section although the realization on the conveyance or security may occur more than one year after the discharge of the patient from the hospital.

(4) The right of a municipality under this section to recover any payment made by it to a hospital for the treatment of a patient shall cease one year after the discharge of the patient from the hospital. 1959, c. 80, s. 6.

30. Upon payment by a municipality to a hospital of any account for treatment of a patient or upon payment of any expenses of burial of a deceased patient by reason of such patient having been assumed to be a resident in the municipality and it being ascertained that the patient was not resident therein but at the time of admission to the hospital was resident in another municipality in Ontario, the municipality that made the payment may recover the amount thereof as a debt from the municipality in which the patient was resident, and upon payment by that municipality it is entitled to exercise the rights of recovery conferred under section 29. 1957, c. 98, s. 30.

31. Any person who is an Indian within the meaning of the Indian Act (Canada) shall be deemed for the purpose of this Act not to have established residence in unorganized territory. 1957, c. 98, s. 31.

32. Every person who contravenes or is a party to the contravention, directly or indirectly, of any provision of this Act or the regulations is guilty of an offence and on summary conviction is liable to a fine of not less than $25 and not more than $500. 1957, c. 98, s. 32.
33. Any action against a hospital or any nurse or person employed therein for damages for injury caused by negligence in the admission, care, treatment or discharge of a patient shall be brought within six months after the patient is discharged from or ceases to receive treatment at the hospital and not afterwards. 1957, c. 98, s. 33.

34.—(1) In this section, “municipality” means county, city, town, village, township or improvement district.

(2) The council of a municipality either alone or in conjunction with the council or councils of another municipality or other municipalities may by by-law appoint a duly qualified medical practitioner to be the hospital officer for such municipality, and the by-law may provide for the term and conditions of his appointment and the payment of remuneration.

(3) A hospital officer so appointed may visit any hospital and secure from the superintendent information relating to any indigent patient in the hospital who is resident in any municipality for which the hospital officer is appointed.

(4) A hospital officer may exercise the powers conferred in subsection 3 in respect of indigent patients from municipalities other than the municipality for which he is appointed, but only at the request of the hospital officer for the municipality in which such patient is resident.

(5) If any hospital officer is of the opinion that it is unnecessary for any indigent patient to remain in the hospital, he shall make a report of his findings and recommendations to the superintendent of the hospital and to the Commission.

(6) No municipality shall enact a by-law under this section until thirty days after notice of intention thereof has been given to the Commission. 1957, c. 98, s. 34.

35.—(1) Upon the recommendation of the Commission to the Minister, the Lieutenant Governor in Council may make such regulations with respect to hospitals as are deemed necessary for,

(a) their creation, establishment, construction, alteration, equipment, safety, maintenance and repairs;

(b) their classifications, grades and standards;

(c) their inspection, control, government, management, conduct, operation and use;

(d) prescribing the matters upon which by-laws are to be passed by hospitals;

(e) prescribing the powers and duties of inspectors;
(f) providing that certain persons shall be by virtue of their office members of the board in addition to the members of the board appointed or elected in accordance with the authority whereby the hospital is established;

(g) their administrators, staffs, officers, servants and employees and the powers and duties thereof;

(h) providing for the certification of chronically ill persons and the method of referring such persons to hospitals for chronically ill persons;

(i) providing for the method of referring convalescent persons to hospitals for convalescent persons;

(j) the admission, treatment, care, conduct, discipline and discharge of patients or any class of patients;

(k) the classification of patients and the lengths of stay of and the rates and charges for patients;

(l) prescribing the facilities that hospitals shall provide for medical students and dental students;

(m) the records, books, accounting systems, audits, reports and returns to be made and kept by hospitals;

(n) the reports and returns to be submitted to the Commission by hospitals;

(o) prescribing the classes of grants by way of provincial aid and the methods of determining the amounts of grants and providing for the manner and times of payment and the suspension and withholding of grants and for the making of deductions from grants;

(p) defining words and terms used in the Act for the purposes of the Act and the regulations;

(q) all matters affecting hospitals. 1957, c. 98, s. 35 (1); 1959, c. 80, s. 7 (1-3).

(2) On the recommendation of the Commission, the Minister may from time to time declare all or any of the regulations to be in force with respect to all hospitals or any one or more hospitals or classes thereof and for such period or periods of time as the Minister deems expedient. 1957, c. 98, s. 35 (2).