1) Purpose

a) The purpose of this Directive is to:
   i) Promote engagement by hospitals with staff, patients, their families, and members of the public in hospital naming decisions;
   ii) Ensure the names used by hospitals reflect their role as publicly-supported organizations operating within a universal, publicly-funded health care system;
   iii) Reinforce the public’s confidence in the health care system; and
   iv) Establish a consistent process for the naming of hospital corporations, including a standardized template for reporting required information.

2) Application and Scope

a) This Directive applies to all hospitals.

b) This Directive governs new names (including business names registered under the Business Names Act and corporate names filed under the Corporations Act) of:
   i) hospital corporations,
   ii) hospital sites,
   iii) individual hospital buildings in cases where the building comprises all or substantially all of a hospital site; and
   iv) alliances, partnerships, and other associations between or among hospital corporations.

c) This Directive governs names for new corporations, sites, or associations, as well as new names (i.e. name changes) for existing corporations, sites, or associations.

d) This Directive does not apply to:
   i) hospital wings;
   ii) individual hospital buildings, unless the building comprises all or substantially all of a hospital site as described under paragraph (b)(iii) of this section;
   iii) research or treatment centres, which are a part of a hospital site dedicated to providing services in relation to a particular disease or condition or grouping thereof; or
   iv) programs or services.

3) Definitions

a) The following definitions apply for the purposes of this Directive:
   i) hospital means a public hospital within the meaning of the Public Hospitals Act.
   ii) hospital site means a site or campus about which a hospital reports financial and statistical information to the Ministry.
iii) *Ministry* means the Ministry of Health and Long-Term Care, and *Minister* has a corresponding meaning.

4) **Requirement to Obtain Minister Approval**
   a) All hospitals must obtain written Minister approval prior to adopting a new name.
   b) Requirements for registering names or filing letters patent under applicable legislation are separate and distinct from obtaining approval under this directive.

5) **Naming Criteria**
   a) The following criteria must be met regarding any proposed new name:
      i) The new name must not include the corporate or business name of a corporate donor, or the name of an individual or family irrespective of whether the donation is from an individual, family or corporation;
      ii) The hospital board has considered whether, if approved, the new name could:
         1) give rise to a public perception that a donor to the hospital will unduly influence the operations or practices of the hospital; or
         2) undermine public confidence in the province’s hospitals or health care system.
      iii) The new name must be consistent with the mission, vision and values of the hospital, the public interest and reflect one or more of the following:
         1) the geographic place or region in which the hospital is located;
         2) the hospital’s service or clinical mandate;
         3) the patient population served by the hospital;
         4) the culture or heritage of the persons served by the hospital; or
         5) the hospital’s history.
   b) In making a decision on whether a proposed new name is consistent with the public interest, the Minister of Health and Long-Term Care may consider any matter he or she regards as relevant, including, without limiting the generality of the foregoing, whether the new name, if approved, could:
      i) give rise to a public perception that a donor to the hospital will unduly influence the operations or practices of the hospital; or
      ii) undermine public confidence in the province’s hospitals or health care system.

6) **Requirements for Submissions**
   a) Every hospital that plans to adopt a new name must prepare and submit a submission to the Ministry for approval.
   b) Every submission must include the following elements:
      i) The full current name (if applicable);
ii) The proposed new name in full;

iii) An indication of whether the new name would apply to:

   (1) the corporation,
   (2) a hospital site, or
   (3) an alliance, partnership, and other association between or among hospital corporations.

iv) An indication of whether the new name would be a corporate or business name;

v) The date that the proposed name would take effect;

vi) A rationale for the name change (if applicable) and for the proposed name;

vii) Description of real and potential reputational and operation impacts of a name change, if any;

viii) A letter from the relevant hospital CEO(s), a letter of endorsement from the Hospital’s Patient and Family Council, and a copy of hospital Board minutes or other evidence that the proposed new name has the approval of the relevant hospital CEO(s) and Board(s); and

ix) A description of the consultation(s) with the public and LHIN completed on the proposed new name, including:

   (1) A description and results of the consultation process with the public and LHIN (e.g. how notice of consultation was posted; the duration of the consultation; how feedback was collected);
   (2) A description of the persons and organizations who provided or were invited to provide feedback (e.g. patients, staff, employees, volunteers, stakeholder organizations, community members, LHIN representatives, etc.); and
   (3) A description of the feedback received, any objections raised, and how the hospital addressed any objections.

c) The hospital must provide any information that the Ministry requests following the Ministry’s review of the Submission.

7) Approval Process

   a) Following public and LHIN consultation(s), the hospital board must approve the proposed name change and send its completed submission to their LHIN for review.

   b) If the LHIN endorses the submission, it must forward the submission, with a letter from the LHIN Board Chair indicating the LHIN’s endorsement to the Ministry’s Hospitals Branch.

   c) The Ministry’s decision will be communicated in writing to the hospital and the LHIN will be notified.
d) Meeting the aforementioned naming criteria and requirements for submission does not guarantee approval.

e) The Minister’s decision is final and not subject to review or appeal, except at the Minister’s discretion.

8) Responsibilities

a) Hospitals are responsible for:
   i) Meeting the requirements of this Directive; and
   ii) Seeking clarification from the Ministry when there are questions concerning the application of the Directive.

b) LHINs are responsible for:
   i) Appropriately engaging and consulting with hospitals regarding their name change submissions;
   ii) Ensuring that hospitals funded by the LHIN meet the requirements of the Directive; and,
   iii) Reviewing submissions and forwarding endorsed submissions to the Ministry.

c) The Ministry is responsible for:
   i) Clarifying the requirements in this Directive, as required;
   ii) Requesting information from hospitals to substantiate that the requirements of the Directive have been met;
   iii) Ensuring that hospitals meet the requirements of the Directive;
   iv) Reviewing and communicating the outcome of submissions to both the hospital and the appropriate LHIN in a timely manner.

9) Process Exemptions

Hospitals may request in writing an exemption from any of the requirements set out under section 6 or 7 of this Directive, provided that the hospital specifies the name that is being proposed along with reasons for the request. The Minister may grant the request where, in the Minister’s opinion, an exemption is necessary or appropriate under the circumstances. The Minister’s decision will be communicated to the hospital in writing.

10) No Waiver or Limits to Other Legal Obligations

This Directive does not limit or abrogate the LHINs’ or any hospital’s obligations under any other instrument, including but not limited to legislation, regulation, agreements, directives, or guidelines.

11) Effective Date

This Directive is effective immediately.