

DEEP RIVER AND DISTRICT HOSPITAL

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| Terms of Reference: Quality and Patient Safety Committee | | |
| Original Date: 2016-11-30 | Revision <input type="checkbox"/> Review <input type="checkbox"/> | Policy Manual: Governance |
| Approved by: | | |
| <input checked="" type="checkbox"/> Board of Directors | <input type="checkbox"/> Chief Financial Officer | <input type="checkbox"/> ED, Family Health Team |
| <input type="checkbox"/> Chief Executive Officer | <input type="checkbox"/> Chief Nursing Officer | <input type="checkbox"/> Human Resources Officer |

MISSION

The Committee is responsible for monitoring and reporting on quality performance of the organization to ensure that the quality of care, hospital services, and patient safety are all at their highest achievable levels.

MEMBERSHIP

- At least 4 voting members of the Board of Directors who must comprise at least one-third of the Committee's membership. A voting member of the Board of Directors will be appointed by the Board to chair the Quality and Patient Safety Committee
- Chief of Staff or his/her delegate from the MAC
- Family Health Team Executive Director
- Chief Executive Officer
- Chief Nursing Officer
- Chair of the Board (ex-officio)
- An employee of the organization who is neither a physician nor a nurse
- May include a non-elected community representative

All members of the Committee will be voting members on Committee matters.

MEETINGS

Meetings will be held at the call of the Chair, and will be at least quarterly when the QIP results are available.

PRINCIPAL FUNCTIONS

The committee is responsible to the Board of Directors for the following:

- To monitor and report on quality issues and on the overall quality of services provided by the organization, with reference to appropriate data.
- To consider and make recommendations on quality improvement initiatives and policies.
- To ensure that best practices information is translated into materials that are distributed to employees and persons providing services within the organization and to subsequently monitor their use.
- To oversee the preparation of annual quality improvement plans and the Patient Safety Plan.

- To review departmental dashboards related to quality assurance, patient safety, policies, practices, procedures and risk indicators, and make recommendations to the Board when necessary.
- To review and report to the Board of Directors on actions taken following complaints, significant incidents, suits and external inquiries related to quality and patient safety.
- To monitor the organization’s preparation for accreditation by Accreditation Canada and to ensure that the resulting recommendations are addressed.
- To review other matters at the request of the Board of Directors.
- To prepare a report for the annual meeting of the Hospital Corporation concerning the Hospital’s quality and patient safety programs and the quality of the services delivered to patients, residents and clients.
- To carry out any other responsibilities provided for in the regulations.
- To annually review the Terms of Reference.
- To create an annual Committee Work Plan for submission to the Governance Committee.
- Any decision to be made should be reviewed in terms of its community impact and whether a community engagement plan for this action is required.
- Develop and approve performance-based compensation plan for executives.
- To form and operate the Patient and Family Advisory Council

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| Reference Documents | • |
| Acknowledgements | • |
| Review Process | • |