# DEEP RIVER AND DISTRICT HOSPITAL NORTH RENFREW FAMILY HEALTH TEAM FOUR SEASONS LODGE

Terms of Reference: Quality, Risk and Safety Committee			
<b>Original Date:</b> 2016-11-30	Policy Manual: Governance		
Approved by:			
	☐ Chief Financial Officer	□ ED, Family Health Team	
☐Chief Executive Officer	□ Chief Nursing Executive	☐ Human Resources Officer	

### **MISSION**

The Committee is responsible for monitoring and advancing quality performance, risk management and safety across the organization.

### **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,
     Risk and Safety Committee
- Chief of Staff or his/her delegate from the Medical Advisory Committee (MAC)
- Executive Director, Family Health Team
- Chief Executive Officer
- Chief Nursing Executive (CNE)
- Manager of Quality, Risk and Innovation
- Chair of the Board (ex-officio)
- An employee(s), as designated by the CNE
- 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.

### PRINCIPAL FUNCTIONS

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

#### Quality

- To monitor and advance quality of services provided by the organization
- To consider and make recommendations on quality improvement initiatives and policies
- To monitor and make recommendations regarding performance, dashboards and quality improvement plans
- To oversee the preparation of annual quality improvement plans
- To monitor the organization's preparation for accreditation by Accreditation Canada and to ensure that the resulting recommendations are addressed
- To oversee the functions of the Patient and Family Advisory Council and Residents' Council

## Risk

- To ensure that an appropriate risk management process is in place to identify and mitigate risks
- To review and monitor progress related to risk assessment and risk mitigation
- To monitor and review the following reports: incident reporting, patient feedback, patient satisfaction, and sentinel/critical events

# Safety

- To review annually: the Patient Safety Plan, Accessibility Plan and Joint Health and Safety Committee functions
- To prepare a report for the annual meeting of the Hospital Corporation concerning the Hospital's
  quality, risk and safety programs and the quality of the services delivered to patients, residents and
  clients
- To annually review the Terms of Reference
- To create an annual Committee Work Plan for submission to the Governance Committee

Reference Documents	•		
Acknowledgements	•		
Review Process	•	Quality, Risk and Safety Committee – 2018-12-03	
	•	Governance Committee – 2019-01-09	
	•	Board of Directors – 2019-01-24	