

Huron Perth Healthcare Alliance

QUALITY & SOCIAL ACCOUNTABILITY COMMITTEE

Terms of Reference

ROLE

The Quality & Social Accountability Committee reports to the Board and is the quality committee for the purposes of the *Excellent Care for All Act,* 2010. The Committee will ensure that quality of care and patient safety are integral components of the governance and management processes of HPHA; that effective processes are in place to monitor and review quality, patient safety and risk; that clinical programs and services are relevant to the communities' population health needs; and that the HPHA advances social accountability in all aspects of decision-making.

MEMBERSHIP

Board members x 5, 1 of whom shall Chair Skills-Based Community Members x 4 (1/Site Catchment) Patient & Caregiver Partner President and Chief Executive Officer Chief of Staff Member, Medical Advisory Committee Vice-President People, Engagement and Social Accountability Vice President Partnerships, Transformation and CNE

RESOURCE MEMBERS

Vice President Performance, Finance and Digital Innovation Director, Quality, Patient Safety and Interprofessional Practice Manager, Quality, Patient Safety and Infection Control Corporate Lead, Patient Experience and Privacy Director, Finance & Decision Support

FREQUENCY OF MEETINGS

The Committee shall meet a minimum of 6 times/year and at the call of the Chair.

VOTING

- Board Members (elected and ex-officio) may vote at Board Sub-Committee Meetings.
- Community members and Executive Staff Members are entitled to vote, provided the Board Members (elected and ex-officio) comprise a majority.

QUORUM

• The majority of voting members.

RESPONSIBILITIES

The Quality and Social Accountability Committee is responsible to the Board for the following:

Strategic Matters

- Overseeing preparation of annual organizational Quality Improvement Plan in accordance with the *Excellent Care for All Act (2010)* and recommend to Board.
- Overseeing organizational participation in annual collaborative Quality Improvement Plan of Huron Perth & Area Ontario Health Team.
- Overseeing the organizational process for Accreditation and participation in the Huron Perth & Area Ontario Health Team Accreditation.
- Advising the Board on matters pertaining to the overall quality and safety of patient care and services and as they relate to the strategic priorities of HPHA.

Governance Processes

- Ensuring processes are in place to facilitate best practice and adherence to quality and patient safety standards in accordance with legislation, regulated Colleges and recognized external organizations including Accreditation Canada.
- Ensuring policies and systematic processes exist to effectively assess and improve the quality of care, programs and services.

Quality Monitoring

- Monitoring and reporting on quality and patient safety issues and overall quality of services with respect to access to care, patient experience and safety.
- Reviewing, monitoring and evaluating the quality processes and performance indicators established or mandated for the performance of the organization under Service Accountability Agreements.
- Considering and making recommendations on quality improvement initiatives and policies to ensure quality objectives are met and maintained.
- Receiving recommendations from the Medical Advisory Committee regarding systemic or recurring quality of care issues
- Reviewing Accreditation reports and any plans required to be implemented to improve performance and correct deficiencies.

Risk Management

- Receiving and reviewing quarterly an aggregated patient safety incident report about all patient safety incidents occurring at the hospital.
- Ensuring processes are in place to mitigate or reduce the risk of patient safety incidents.

and any other responsibilities as outlined in the regulations of the *Excellent Care for All Act* (2010).