

HEALTH QUALITY COMMITTEE TERMS OF REFERENCE

1. PURPOSE

The Health Quality Committee (the “Committee”) of the Vancouver Island Health Authority (“Island Health”) Board of Directors (the “Board”) assists the Board in review and oversight of the following areas:

Strategic Governance

- Multi-year Strategy, Annual Goals and Plans
- Performance Monitoring
- Enterprise Risk Management

Fiduciary Governance

- Human Experience
- Cultural Safety and Humility
- Care System Quality and Safety
- Health and Wellness

2. COMPOSITION AND OPERATIONS

- A.** The Committee shall be composed of all members of the Board, each of whom shall be independent of Management.
- B.** The Committee shall operate in a manner consistent with the Committee Guidelines outlined in the Board Manual.
- C.** The Committee shall review its Terms of Reference annually to ensure it meets the needs of the Board. Any proposed revisions shall be recommended to the Governance Committee of the Board.
- D.** The Committee has delegated authority to pass motions on behalf of the Board. For clarity, the Committee does not have the authority to alter the membership of the Committee. This power remains with the Board.
- E.** The Committee shall meet at least five times per year.

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3. DUTIES AND RESPONSIBILITIES

Subject to the powers and duties of the Board, the Committee will perform the duties listed below.

Strategic Governance

A. Multi-Year Strategy, Annual Goals and Plans

Review progress against Committee assigned Quality and Safety multi-year strategies and annual plans and identified priorities on a regular basis.

Performance Monitoring

- i. Monitor Quality and Safety performance measures in relation to Committee assigned multi-year strategies, identify priorities for improvement and track progress towards achievement.
- ii. Establish new Quality and Safety performance measures as required to ensure alignment with targets outlined in the strategic plan.

B. Enterprise Risk Management

- i. Regularly oversee performance on enterprise risks assigned to the Health Quality Committee.

Fiduciary Governance

C. Patient and Family Experience

- i. On a regular, scheduled basis monitor progress against identified strategic plan objectives in the area of Human Experience (patient, resident, client, family, community) including reviewing and assessing results of experience measures as set out in the strategic plan.

D. Cultural Safety & Humility

- i. On a regular, scheduled basis as monitor progress against identified strategic plan objectives to meet the British Columbia Cultural Safety and

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Humility Accreditation Standard, including reviewing and assessing results against measures as set out in the strategic plan.

E. Care Quality & Safety

- i. Review the adequacy and effectiveness of the clinical governance system annually based on established measures.
- ii. Receive regular reports on the Systems and Processes to Support Quality Care, including external quality assurance reporting.
- iii. Receive reports as needed on emerging quality and safety issues.
- iv. Receive reports, as needed, on the implementation status of recommendations stemming from inquests of external bodies, such as the BC Coroners Service, Office of the Ombudsperson, Office of the Representative for Children and Youth, and Patient Care Quality Review Board.

F. Population Health and Wellness

- i. Review an annual report from the Chief Medical Health Officer on the health of the population and key population health issues, trends and activities.

4. ACCOUNTABILITY

The Committee has delegated authority to pass motions on behalf of the Board, and shall document discussions by maintaining minutes of its meetings. Decisions of the Committee shall be reported to the Board at a duly constituted In-Camera or public Board meeting , as appropriate in light of the nature of the decision.

5. COMMITTEE CALENDAR

The Committee’s workplan of activities is outlined in an Annual Planning Calendar.