

## **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

- Patient and Family Experience
- Cultural Safety and Humility
- Care System Delivery
- 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**

- i. Review progress against Committee assigned multi-year strategies and annual plans and identified priorities at each regularly scheduled meeting.

**B. Performance Monitoring**

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

**C. Enterprise Risk Management**

- i. Regularly oversee performance on Committee assigned mitigation strategies on high-priority identified enterprise risks, ensuring the strategies are embedded into annual plans and priorities reviews noted in subsections 3.(A) (Multi-Year Strategy, Annual Goals and Plans) and (B) (Performance Monitoring) above.

***Fiduciary Governance***

**D. Patient and Family Experience**

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

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**E. Cultural Safety & Humility**

- i. On a scheduled basis as outlined in the Annual Planning Calendar, monitor progress against identified strategic plan objectives in the area of cultural safety and humility, including reviewing and assessing results against measures as set out in the strategic plan.

**F. Care Quality & Safety**

- i. On a scheduled basis as outlined in the Annual Planning Calendar, monitor progress against identified strategic plan objectives in the area of care system delivery, including reviewing and assessing results against measures as set out in the strategic plan.
- ii. Review the adequacy and effectiveness of the clinical governance system annually based on established measures.
- iii. Receive regular reports on system capacity, access and quality; variation in performance areas; emerging issues; and quality and safety (adverse events).
- iv. Review the needs-based education and training program regarding all aspects of quality improvement and patient safety for individuals, teams and programs, on a regular basis.
- v. Review and respond as needed to issues raised by Patient Care Quality Review Board and other established Island Health human experience advisory structures.

**G. Population Health and Wellness**

- i. On a scheduled basis as outlined in the Annual Planning Calendar, monitor progress against identified strategic plan objectives in the area of care quality and safety, including reviewing and assessing results against measures as set out in the strategic plan.
- ii. Review an annual report from the Chief Medical Health Officer on key population health issues, trends and activities.

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**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.