

**TERMS OF REFERENCE COMPLIANCE – COMMITTEE WORK PLAN
KHSC PATIENT CARE & QUALITY COMMITTEE
2023-24**

Review: July 26, 2023 Senior Leadership Team Meeting
Discuss: August 9, 2023 Committee Chairs Planning Session
Endorsed: September 25, 2023 Patient Care & Quality Mtg
Approved by KHSC Board: October 23, 2023

Month	MRP	September	November	January	February	April	May
Date		25	27	15	26	22	27
Focus		Q1	Q2	HAPs/CAPs	Q3, QIP & HSAA MSAA	ACP & Indicators	Q4
Terms of Reference Requirements							

1.0 General Responsibilities	recommend an annual work plan to the Board based on following terms of reference;	Hann	Review draft work plan & recommend to Board, including review of committee TOR					
	present a year-end report to the Board;	Hann					Review draft year-end committee report and recommend to Board & ensure report captures governing body achievements	
	Review, confirm and recommend revisions to the Board policies for which they have oversight responsibilities;	Hann	Review Patient Care & Quality oversight policies at committee orientation	As required	As required	As required		Updated/revised policies to Governance for reporting at June Board
	ensure principle based decision-making guides all committee discussions and decision-making;	Hann		Generative Topic TBD			Generative Topic TBD	
	act as the Quality Committee as required by the Excellent Care of All Act;	Hann & Fitzpatrick	Review KHSC's Patient Declaration of Values as part of orientation (ECFFA requirement)					
	other duties as assigned by the Board;	Hann	CEO Report -aligned with committee mandate	CEO Report -aligned with committee mandate	CEO Report -aligned with committee mandate	CEO Report -aligned with committee mandate	CEO Report -aligned with committee mandate	CEO Report -aligned with committee mandate

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2.0 Quality & Patient Safety	monitor and report to the Board on quality issues and on the overall quality of services provided in the Hospital, with reference to appropriate data;	Hann Carter	Q1 reporting including overview of strategy performance index indicators Access to Care Update Q1 Quarterly Patient Safety Report	Q2 reporting Access to Care Update Q2 Quarterly Patient Safety Report	 Access to Care Update	Q3 reporting Access to Care Update Q3 Quarterly Patient Safety Report	 Access to Care Update	Q4 reporting Access to Care Update Q4 Quarterly Patient Safety & Quality Report
	consider and make recommendations to the Board regarding quality improvement initiatives and policies;	Hann & Fitzpatrick	Overview of KHSC's quality structure and reporting.					
	review patient experience survey strategy and related results;	Carter	Quarterly Patient Feedback Report & Patient Survey Plan update	Quarterly Patient Feedback Report		Quarterly Patient Feedback Report		Quarterly Patient Feedback Report
	ensure that best practices information supported by available scientific evidence is translated into materials that are distributed to employees and persons providing services within the Hospital, and to subsequently monitor the use of these materials by these people (ECFAA);	Hann	Program & Service Presentation: TBD	Program & Service Presentation: TBD	Program & Service Presentation: TBD	Program & Service Presentation: TBD	Program & Service Presentation: TBD	Program & Service Presentation: TBD

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	oversee the preparation of the annual quality improvement plan (QIP) and patient safety plan based upon information gathered from patient surveys, patient relations program, staff input as well as aggregated clinical indicator data;	Carter	Q1 update on 2023-24 KHSC QIP initiatives Update on Staff & Physician Engagement Survey Results Q1 Patient Safety Plan Update (incorporated into Quarterly Patient Safety Report)	Q2 update on 2023-24 KHSC QIP initiatives 2024-25 Approach to developing QIP Q2 Patient Safety Plan Update (incorporated into Quarterly Patient Safety Report)	2024-25 QIP approach update and committee engagement	Q3 update on 2023-24 KHSC QIP initiatives 2024-25 QIP recommendations (recommendation to March 27 Board) Q3 Patient Safety Plan Update (incorporated into Quarterly Patient Safety Report)	Touchpoint / adjustments to KHSC's Patient Safety Plan	Q4 Update on 2023-24 QIP Initiatives Q4 Patient Safety Plan Update (incorporated into Quarterly Patient Safety Report)
	review critical incident data at least two times per year and corporate and public performance monitoring reports on at least a quarterly basis and make recommendations to the Board regarding quality improvement initiatives and policies;	Fitzpatrick		Critical Incident Presentation to Committee + report to December Board meeting			Critical Incident Presentation to Committee + report to May Board meeting	
	review and provide input to the board on the clinical implications of the Hospital Annual Planning Submission (HAPS) and the Hospital Services Accountability Agreement (H-SAA);	Toop	Q1 HSAA Performance Indicators Dashboard	Q2 HSAA Performance Indicators Dashboard	Report on clinical implications of HAPS/CAPS submissions (January) – timing of report dependent on MOH/LHIN reporting requirements)	Q3 HSAA Performance Indicators Dashboard	Briefing on HSAA & MSAA submission to MOH/LHIN (if rec'd – dependent on MOH/LHIN approval timelines)	Q4 HSAA Performance Indicators Dashboard
	receive and be informed of reports, arising from programs, committees and services and from external groups, highlighting issues of quality, safety, risk and utilization that have an impact on patient care;	Multiple						Trillium Gift of Life Annual Report

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	ensure and report periodically to the board on structures, policies, and processes that relate to the ethical dimensions of the hospitals' professional practice and patient care activities;	EVPs					Report on Ethical Dimensions of KHSC Care Delivery	
	monitor the preparation processes for accreditations and ensure implementation of relevant recommendations arising from surveys;	Carter						
	receive annual report about the Patient and Family Advisory Council (PFAC) as well as the work related to embedding the voice and experience of the patients into the planning and decision-making processes at KHSC;	Carter		Annual Report of the Patient and Family Advisory Council				
	receive annual report from the Chief Nursing Executive on professional practice at KHSC;	Hann					Report on Professional Practice at KHSC	
	oversee the preparation and implementation of the annual French Language Services plan for KHSC.	Carlton			Annual French Language Services Compliance Report			
3.0 Interprofessional Education	promote strong educational relationships with its partner hospitals; Queen's University and St. Lawrence College as affiliated partners; review and advance linkages between KHSC and other educational institutions.	Fitzpatrick/ Gillies						Update on Canadian Matching Resident Service Results
	review and, as appropriate, recommend to the Board for approval the annual reports of the education programs for employees and credentialed staff as aligned with the strategic priorities of the hospital;	Hann/ Carlton/ Gillies			Report on Professional Practice		Annual Learning & Leadership Report	
	ensure structures, policies, and procedures pertaining to all levels of education are in place that are consistent with those of the relevant university, college or institute, and that any fiscal, resource or operational implications for educational initiatives are presented to the Board for approval;	Hann/ Fitzpatrick/ Gillies	Update on review of KHSC – Queen's Affiliation Agreement					

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4.0 Strategy Performance Targets	ensure progress on KHSC strategy and annual corporate plan by reviewing assigned performance indicators;	Multiple	Receive Q1 Strategy Performance Report	Receive Q2 Strategy Performance Report		Receive Q3 Strategy Performance Report	Review 2024-25 ACP & QIP and associated indicators for recommendation to May 6 KHSC Board Session on ACP & SPI	Receive Q4 Strategy Performance Report
5.0 Integrated Risk Management	monitor and report on the integrated risk management domains assigned to this committee which include:	Carter		As required		Receive updated Risk Profile		As required
6.0 Accreditation – GFT Survey	Standard 10.5: The governing body regularly hears about quality and safety incidents from the clients and families that experience them Question 33: Overall, what is your assessment of the governing body's impact over the past twelve months, in terms of driving improvement to patient safety?	Carter Carter	Patient Story/Video Q1 Patient Safety Report Orientation to include KHSC's Patient Safety Plan Update on 2023-24 KHSC QIP initiatives	Patient story or video Q2 Patient Safety Report Critical Incident Presentation/Update	Patient Story or Video	Patient Story or Video Q3 Patient Safety Report	Patient Story or Video Critical Incident Presentation/Update	Patient story or video Q4 Patient Safety Report
7.0 Board Reporting Requirements	Board reports due at CEO's office Board mailing date Board meeting date	Committee Secretary	October 9 October 16 October 23	December 1 December 4 December 11	January 19 January 22 January 29	March 11 March 18 March 25	April 26 April 29 May 6	June 10 June 17 June 24