

**TERMS OF REFERENCE COMPLIANCE- COMMITTEE WORK PLAN  
PATIENT CARE, QUALITY & PEOPLE COMMITTEE  
2018-2019**

KHSC PQP Committee  
September 20<sup>th</sup>, 2018/Agenda Item#3.2

		Month	MRP	September	October	November	January	February	March	April	May
		Date		20	25	22	24	21	21	25	23
		Focus		Q1		Q2		Q3	IAPP/QIP/ HSAA/MSAA		Q4
Terms of Reference Requirements											
<b>1.0 General Responsibilities</b>	Recommend an annual work plan to the Board based on following terms of reference;		Crawford	Draft work plan reviewed and recommended to Board (Crawford)							
	Present a mid-year and year-end report to the Board;		Crawford				Draft mid-year committee report reviewed and recommended to Board (Crawford)				Draft year-end committee report reviewed and recommended to Board (Crawford)
	Annually review, confirm and recommend revisions to the Board policies for which they have oversight responsibilities;		Crawford	Committee Orientation – Overview of KHSC Board Policy Manual (Crawford)						Review Board policies to ensure reflection of current practice, and recommend change as necessary (Crawford)	
	Ensure principle based decision making guides all committee discussions and decision-making;		Crawford		Principle Based Decision Making Framework Annual Report (Crawford)						
	Act as the Quality Committee as required by the Excellent Care of All Act; and		Crawford/Fitzpatrick								

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2.0 Quality & Patient Safety	Other duties as assigned by the board	Multiple	Ensure committee orientation briefing at first meeting of the committee year (Crawford)	As required	As required			Update on KGH Strategic Planning Process (Carter)	Review/recommend final IACP, SPI to Board (Carter)	As required	As required
			Integration Update: • People (Carlton) • Policies (Miller) • Practice (Crawford)								
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	Multiple	Q1 Reporting (Jones)		Q2 Reporting (Jones)		Q3 Reporting (Jones)	Input into 2019-2020 Master Board & Committee Schedule (Crawford)	Strategic Performance Index for 2019-2020 (Jones)	Q4 Reporting (Jones)	
	Consider & make recommendations to the Board regarding quality improvement initiatives/policies	Carter/ Fitzpatrick		Quality of Care Evaluation and Reporting Structure (Carter)				Approval of QIP and associated indicators (Carter)			

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	Review patient experience survey strategy and related results	Carter						Patient Culture Survey Results (Carter)		
	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)	Multiple Education (professional practice, patient & family centred care,			Patient safety program update (Carter)			Annual Report of the Privacy Officer and Oversight of Personal Health Information (Carter)		Trillium Gift of Life Update to the Board in June (Crawford)
	Oversee preparation of annual quality improvement plan (QIP) and patient safety plan based upon information gathered from patient surveys, patient relations program, staff input and aggregated clinical indicator data	Carter	Quarterly Quality & Patient Safety and Patient Feedback Report (Carter)			Quarterly Patient Relations Report (Carter)			Quarterly Patient Relations Report (Carter)	
	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	Carter / Fitzpatrick	Critical Incident Process and Report (Fitzpatrick)		Critical Incident Report (Fitzpatrick)				Critical Incident Process and Report (Fitzpatrick)	
	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) and Multi-Sector Service Accountability agreement (M-SAA)	Multiple	Q1 HSAA Performance Indicator Results (Jones)		HSAA Performance Indicator Results (Jones)  Report on clinical implications of HAPS submission (January) (Jones)		Q3 HSAA Performance Indicator Results (Jones)  Briefing on H-SAA & M-SAA submission to LHIN (dependent on LHIN timelines) (Jones)			Q4 HSAA Performance Indicator Results (Jones)

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	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				Quarterly Quality and Patient Safety Report (Carter)	Community Partnerships Update (McDonald)	Annual Report of the Privacy Officer and Oversight of Personal Health Information (Carlton)	Quarterly Quality and Patient Safety Report (Carter)	Trillium Gift of Life Update (Crawford)
	Ensure and report periodically to the board on structures, policies, and processes that relate to ethical dimensions of the hospitals' professional practice and patient care activities	Crawford / Bardon	Health Ethics Guide Shared – Catholic Health Alliance of Canada (Crawford)		ASSIST Framework Presentation (Carter)	Clinical Ethics Report (Carter)				
	Monitor the preparation processes for accreditations and ensure implementation of relevant recommendations arising from surveys	Carter	Overview of update on A/C Survey (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	Multiple	Annual Report of the Patient and Family Advisory Council (Bardon)  Patient Story (Carter)		Patient Story (Carter)			Patient Story (Carter)		
3.0 People	Review the hospital's talent management and leadership development plan annually;	Carlton				Talent Management Report (Carlton)	Report on corporate recruitment and retention plan/Report on hiring process for employees and volunteers (Carlton)			

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Review health human resource plan and labour relations reports bi-annually;	Carlton			Report on KGH Health Human Resource (HHR) Planning (Carlton)		Review of KGH's attendance awareness program/spotlight on wellness (Carlton)		Update on HHR Planning (Carlton)	Annual Labour Relations Report (Carlton)
Review and recommend to the Board the approval of the annual occupational health and safety report (includes update on Ministry of Labour Orders if received / consider financial impact & corporate reputation)	Carlton		Workplace Violence Prevention Update (Carlton)						Review Annual Occupational Health & Safety Report with recommendation to the Board (Carlton)
Review staff and physician engagement strategy and related results;	Carlton/ Fitzpatrick		Update on staff and physician engagement initiatives (Fitzpatrick/Carlton)						
Review medical staff resource plan	Fitzpatrick				Report on Medical & Other Credentialed staff resource plan by department including SEAMO recruitment & retention plans (Fitzpatrick)				
Ensure the integrity and completeness of the appointing and credentialing process for medical, dental, midwifery, and extended class nursing staff;	Fitzpatrick	Report on the Credentialing process (Fitzpatrick)							

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	Ensure the integrity and completeness of the appointment and hiring process for employees and volunteers;	Carlton	Report on hiring processes for employees and volunteers (Carlton)								
	Receive annual report from the Chief Nursing Executive on professional practice at KGH	Crawford					Report on Professional Practice Infrastructure and relevance to quality & safety (Crawford)			Annual report from CNE discussed at committee and brought forward to Board (Crawford)	
	Oversee the preparation and implementation of the annual French Language Services plan for KHSC	Bardon						French Language Services Compliance Report (Bardon)			
4.0 Interprofessional Education	Promote strong educational relationships with its partner hospitals and Queen's University as an affiliated university partner; review and advance linkages between KGH and other educational institutions;	Multiple				Review of education relationships including overview of affiliation agreement with Queen's (Fitzpatrick)					Update on Canadian Matching Resident Service Results (Fitzpatrick)
	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	Carlton/ Fitzpatrick	Overview of KGH's Learning Management System (Carlton)								Annual Learning/ Leadership Report (Carlton)

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	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	Crawford								
<b>5.0 KGH Strategy Performance Targets</b>	Ensure progress on KGH strategy and annual corporate plan by reviewing assigned performance indicators	Multiple	Q1 Report (Jones)  HSAA (Jones)  Q1 Report on Performance Index (Jones)	Report on Operational Performance: QBP's (Carter)	Q2 Report (Jones)  HAPS (Jones)	HIS Update (Jones)	Q3 Report (Jones)  Annual Corporate Plan (Carter)	Report on Transforming the Patient Experience (Carter)  Report on Clinical Innovation Strategy (Fitzpatrick)	Strategic Performance Index for 201-2020 (Jones)  People strategic indicators (Carlton)	Q4 Report (Jones)  Clinical Innovation Strategy Update (Fitzpatrick)
<b>6.0 Integrated Risk Domains</b>	Monitor and report on the integrated risk domains assigned to this committee which include:	Multiple			Integrated Risk Management Framework (Carter)		Integrated Risk Management Framework (Carter)			Integrated Risk Management Framework (Carter)
	o Patient Care									
	o Compliance									
	o People									

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<b>7.0 Board Reporting Requirements</b>	Board reports due at CEO's office Board mailing date Board meeting date		Report due: Sept 6 Mailing on: Sept 13 Board mtg: Oct 15	Report due: Oct 11 Mailing on: Oct 18 Board mtg: Nov 21	Report due: Nov 8 Mailing on: Nov 15 Board mtg: Dec 10	Report due: Jan 10 Mailing on: Jan 17 Board mtg: Feb 11	Report due: Feb 7 Mailing on: Feb 14 Board mtg: Mar 11	Report due: Mar 7 Mailing on: Mar 14 Board mtg: April 8	Report due: Apr 11 Mailing on: Apr 18 Board mtg: May 13	Report due: May 9 Mailing on: May 16 Board mtg: Jun 17