

### Board Quality Committee – Annual Work Plan 2022/2023

**Context:**

The Board Quality Committee is broadly responsible for the monitoring of hospital processes to ensure that patient care programs and services and the various quality improvement and patient safety activities in the Hospital are in alignment with the standards of Accreditation Canada and the requirements set out in the relevant legislation and regulations for example the *Excellent Care for All Act*.

Item	Committee Responsible	August	September	October	November	December	January	February	March	April	May	June	July	As Required
<b>Quality, Risk, Performance and Patient Safety</b>														
a) Review initial draft quality improvement plan (QIP)	BQ	Submission of QIP for 22/23 considered voluntary as per HQO												
b) recommend approval by the Board final QIP	BQ													
c) review quality indicators	BQ		X		X		X		X		X			
d) critical incidents review (quarterly)	CEO/BQ		X		X		X		X		X			
e) annually review professional staff appointment process with CoS/Chair, MAC	BQ													X
f) Consider and make recommendations to the board regarding quality improvement initiatives and policies	BQ													X
g) Review and make recommendations on the hospital's emergency preparedness	BQ													X
h) Review and make recommendations on policies for risk management related to quality of patient care and safety	BQ													X
i) Review and make recommendations with respect to areas of unusual risk and the hospital's plans to protect against, prepare for, and/or prevent such risks and services.	BQ													X
j) Quarterly ERM reports	BQ		X		X		X		X		X			
a) Review Committee Terms of Reference * No new members	Each Cte.													X
b) plan for accreditation	Board/All													X
c) Review patient safety plan	BQ				X									

Item	Committee Responsible	August	September	October	November	December	January	February	March	April	May	June	July	As Required
d) Review Balanced Scorecard	BQ, Board				X		X		X		X			
<b>Strategic Plan and Strategic Directions</b>														
a) Review progress on specific strategic directions (operational plan) (x4)	Board/All		X		X		X		X		X			
<b>Other</b>														
a) Board education sessions (x3)	BQ					X		X		X				X

Colour Legend	
Completed by Target	
In progress, but not completed by target	
Not in progress and not completed by target	

References:

1. OHA, Guide to Good Governance 3<sup>rd</sup> Edition, Sample Work Plan
2. Tillsonburg District Memorial Hospital/Alexandra Hospital Ingersoll, Joint Board of Directors' Annual Work Plan & Priorities 2019