HEALTH QUALITY COMMITTEE TERMS OF REFERENCE

I. 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:

- Patient and Family Experience
- Cultural Safety & Humility
- Care System Delivery
- Care System Quality and Safety
- Health and Wellness

II. COMPOSITION AND OPERATIONS

- A. The Committee shall be composed of not fewer than three Directors, 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 makes recommendations and does not act on behalf of the Board unless specific delegated authorities have been given.
- E. The Committee shall meet at least five times per year.

III. DUTIES AND RESPONSIBILITIES

- A. 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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B. 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.

C. Care System Delivery

- 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 components of the Integrated Board Report the Committee is responsible quarterly and evaluate risk mitigation strategies required to achieve targets.

D. 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 quality and safety, including reviewing and assessing results against measures as set out in the strategic plan.
- ii. Oversee management's development of an multi-year quality strategy including an improvement framework and safety program detailing policies, standards, structures and processes necessary to support quality improvement, patient safety, and the facilitation of rapid improvement.
- iii. Receive regular reports on system capacity, access and quality; variation in performance areas; emerging issues; and quality and safety (adverse events).
- iv. Ensure there is a well-developed needs-based education and training program regarding all aspects of quality improvement and patient safety for individuals, teams and programs.
- v. Review and respond as needed to issues raised by the Patient Advisory Council and Patient Care Quality Review board.

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E. 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 health and wellness, including reviewing and assessing results against measures as set out in the strategic plan.
- ii. Receive an annual report from the Chief Medical Health Officer on key population health issues, trends and activities.

B. Enterprise Risk Management

i. Review and assess enterprise level or strategic risks within the Committee's areas of responsibility using the enterprise risk management framework and provide recommendations to the Board.

V. ACCOUNTABILITY

The Committee shall report its discussions to the Board by maintaining minutes of its meetings and provide a detailed written report including any recommendations for approval at the next Board meeting.

VI. COMMITTEE CALENDAR

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