

Medical Advisory Committee QUALITY OF CARE SUB-COMMITTEE

Terms of Reference

Purpose

The purpose of the Medical Advisory Quality of Care Sub-Committee is to carry on activities for the purpose of studying, assessing or evaluating the provision of health care with a view to improving or maintaining the quality of health care, or the level of skill, knowledge and competence of the persons who provide health care.

Membership

The committee's membership shall include:

1. the Chief of Staff - Chair
2. the Chief of each of the following Departments:
 - i) Internal Medicine
 - ii) Surgery;
 - iii) Obstetrics and Gynaecology;
 - iv) Paediatrics;
 - v) General and Family Practice;
 - vi) Diagnostic Imaging;
 - vii) Laboratory Medicine;
 - viii) Anaesthesia;
 - ix) Oncology;
 - x) Psychiatry;
 - xi) Dentistry; and
 - xii) Emergency/Trauma Medicine;
3. the President of the privileged Staff;
4. the Vice President of the Privileged Staff;
5. the Secretary of the Privileged Staff;
6. the President of the Hospital (non-voting);
7. the Chief Nursing Officer (non-voting); and
8. a Director who is not on the Medical Staff (non-voting).
9. Coordinator Medical Affairs

In the event a Chief of Department is unable to attend any meeting of the Medical Advisory Quality of Care Sub-Committee, the Chair may wish to defer the item(s). Other medical staff or administrative staff may be requested to attend, as required, at the call of the Chair but will not have the right to vote.

Length of Appointment

All positions will be standing members on the Quality of Care Sub-Committee and only rotate as per the Medical/Privileged Staff By-Laws.

Authority

The Medical Advisory Quality of Care Sub-Committee is a designated Committee of the Board of Directors and is limited to its primary purpose. Decisions may be implemented directly by this committee provided they:

- Are consistent with the Mission Vision Values and Strategic Plan of the Health Science Centre
- Have a positive impact on quality of care and/or service
- Reduce or eliminate risks within the organization

Reporting Structure

The Medical Advisory Quality of Care Sub-Committee reports to the Quality of Care Committee of the Board. In turn, the Quality of Care Committee will report to the Board of Directors on a quarterly basis in an aggregate format. All Quality of Care information will remain within the sub-committee as per *the Quality of Care Information Protection Act 2004*.

Minutes for the Medical Advisory Quality of Care Sub-Committee will be kept as privileged and confidential documents and distribution is limited to the members of the Quality of Care Committees as designated by the Board and those permitted by the *Quality of Care Information Protection Act 2004*. All documents prepared for or by the Quality of Care Committee will carry the following notation:

“Privileged and Confidential Quality of Care Document”
“DO NOT COPY OR CIRCULATE”

Matters Reviewed by the Committee

The Sub-Committee shall review matters referred by the Chair, by another member of the Quality of Care Sub-Committee, or by the Quality of Care Committee which may give rise to significant quality of care concerns or risk management issues, including specifically:

- An occurrence involving an unexpected death or serious bodily harm

- An occurrence or series of occurrences that have the potential to result in death or serious bodily harm
- An occurrence or series of occurrences that have the potential to result in harm to a number of patients.

Review Flowcharts Attached in Appendix A

Information to the Committee

Depending on the matter to be reviewed, the Committee may seek or receive information/report from any hospital medical/privileged staff member, committee or working group and/or external person/entity.

All requested information or review requested by the Quality of Care Committee will be completed under *the Quality of Care Information Protection Act 2004* and all information will be considered privileged and confidential.

Frequency of Meetings

Members of the Committee shall meet monthly or at the call of the Chair.

Review / Follow Up

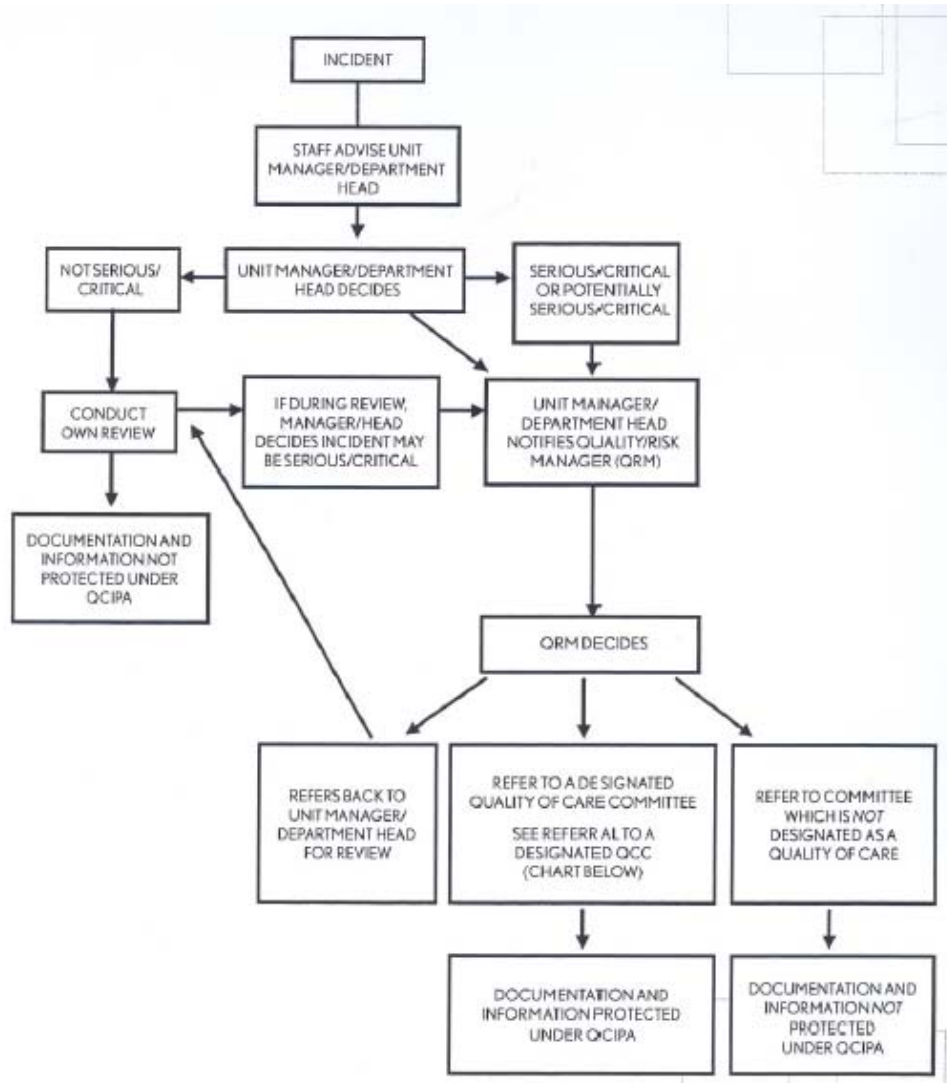
The Committee may disclose information pertaining to reviews (this may include recommendations and any other information) in accordance with the *Quality of Care Information Protection Act 2004*:

- To management if the Committee considers that it is necessary for the purpose of improving or maintaining the quality of health care provided at the hospital
- For the purpose of eliminating or reducing a significant risk of serious bodily harm to a person or group of persons.
- Deaths in specified circumstances must be reported to a Coroner under the *Coroners' Act*
- Certain communicable diseases must be reported to a medical officer of health under the *Health Protection and Promotion Act*.
- Under the *Regulated Health Professions Act*, there must be reports to regulated colleges where an RHPA professional is terminated or privileges are restricted or revoked for reasons of professional misconduct, incompetence or incapacity.

APPENDIX A – PART A

Quality of Care Committee – Incident Flowchart Part A

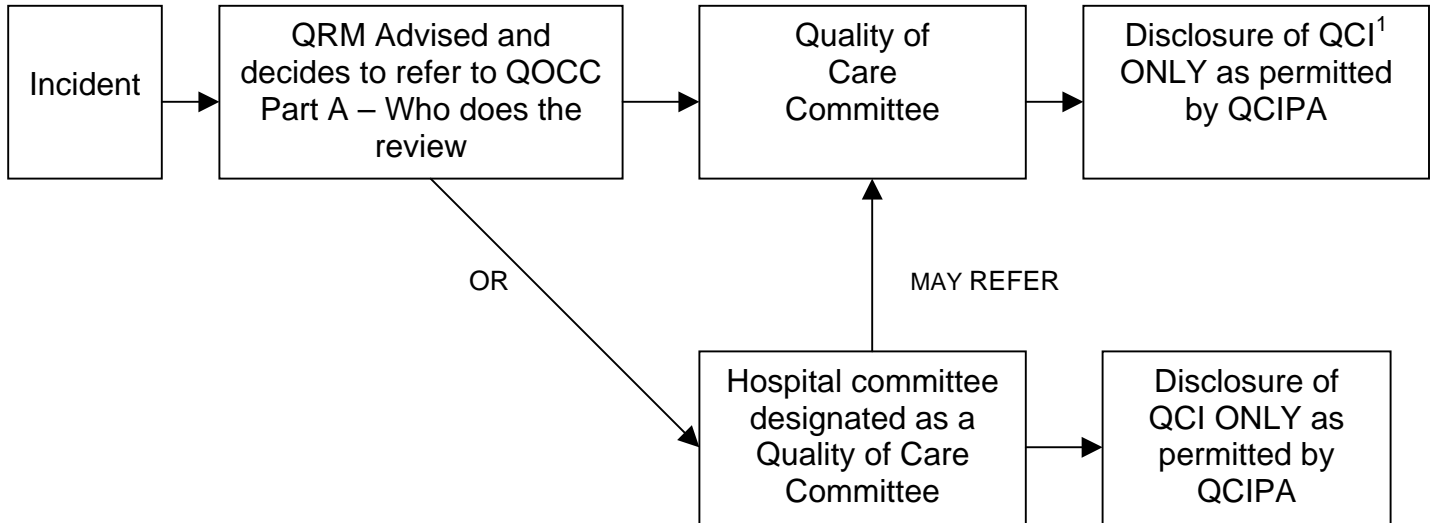
Who Does the Review?



APPENDIX A – PART B

Quality of Care Committee – Incident Flowchart Part B

Referral to a Designated Quality of Care Committee



¹ QCI – Quality of care information.