



# Timmins and District Hospital

## L'Hôpital de Timmins et du district

<b>Policy Title:</b> QUALITY IMPROVEMENT AND PATIENT SAFETY		
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### Table of contents

	Title	Page
A	Purpose	1
B	Definitions (all documents)	1
C	Content	1
D	Policy/Procedure	2-3
E	References	3
F	Appendices/Links	3

#### A. Purpose

The provision of safe, high quality, patient care is a strategic imperative of the TADH Board.

#### B. Definitions

N/A

#### C. Content

The Board is ultimately accountable for the quality and safety of hospital services. It plays a key role in promoting an organizational culture that enhances patient safety.

It is imperative that the Board is aware of patient safety issues and leads the quality improvement efforts. As a result, the Board regularly reviews the frequency and severity of safety incidents and uses this information to understand trends, patient and team safety issues in the hospital, and opportunities for improvement.

## **D. Policy/Procedure**

### **PATIENT SAFETY**

Ensuring safety in the provision and delivery of services is among the Board's primary responsibilities to patients and team members. At a minimum the Board expects compliance with the evidence based standard of Accreditation Canada in the delivery of patient care.

The Board of TADH is committed to support a safety culture that is open and fair, where the hospital learns from safety incidents, and where staff are encouraged to report and proactively identify risks. The TADH Quality Improvement Plan and Patient Safety Plan provides a framework within which the hospital builds this culture of safety.

The Board of the TADH implements strategies and engages in a variety of activities in support of the Quality Improvement Plan and Patient Safety Plan, which includes but is not limited to:

- Establishes a Board Quality and Safety Committee;
- Ensures that appropriate measures of performance have been identified i.e. patient safety and quality indicators, and receives regular reports and variance plans e.g. Hospital Standardized Mortality Ratios (HSMR) rates, wait time target compliance;
- Receives clinical staff appointment and reappointment; recommendations from the MAC;
- Ensures that administration complies with critical incident reporting and disclosure requirements;
- Ensures that Occupational Health and Safety and Infection Control Surveillance programs are in place;
- Ensures that information acquired through a Quality of Care Review under the Quality of Care Information Protection Act (QCIPA) is utilized to maintain and improve the quality of care provided, and to eliminate or reduce risk;
- Ensures that decisions that impact on the quality of services are made within the context of the hospital's mission, vision and strategic direction;
- Receives routine reports which demonstrate progress being made on strategic initiatives;
- Ensures the availability of, and oversees the allocation of, financial resources, and ensures that financial decisions, particularly resource allocation decisions, are consistent with strategic direction and accountabilities;
- Ensures that appropriate programs and processes are in place to protect the organization against risk.

The Board monitors organization-levels measures of patient safety. The Board receives regular reports and updates on measures related to patient safety such as; organization-wide infection rates, data on patient falls, medication reconciliation. The data are compiled at the organization level rather than at the program or team level, presenting a global picture of patient safety in the hospital, and plays an integral part in the Board's strategic planning process.

The Board will receive quarterly reports from Senior Management on patient safety-related quality in order to monitor patient safety in the Hospital. These reports will be presented through the Board's Quality and Safety Committee.

In order to gain the broadest possible context, the Board regularly hears about quality and safety incidents from the patients and families that experience them. This context provides valuable information on next steps for improvement and incident prevention.

In addition to ensuring that appropriate organizational structures and processes are in place to support the Board's responsibility for patient safety, the Board also ensures that hospital processes and governance systems are aligned through periodic review of the Board recruitment processes, Board composition, use of committees and their terms of reference and the Board's relationship with management.

#### **E. References**

Accreditation of Canada standards  
TADH Quality Improvement Plan  
Patient Safety Plan  
Quality of Care Information Protection Act (QPICA)

#### **F. Appendices/Links**

N/A