

BOARD MANUAL

Approved By: Date Issued:	Board November 25, 2008	Number: Page:	6-1 1 of 2
Last Review Date:	June 23, 2015	Last Revision Date:	May 13, 2015
SUBJECT:	Board Quality Policy		

Policy

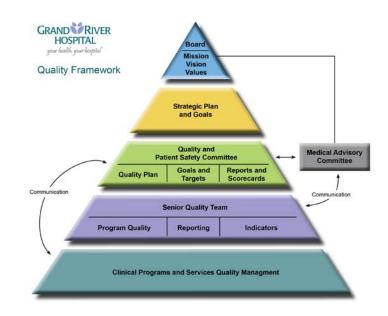
The board is accountable for ensuring that the hospital establishes appropriate structures and processes and other systems to support its responsibility for quality. Further, the board must continue to monitor and exercise oversight of those structures, processes and systems.

Definition

Quality: Providing the patient with quality care with compassion in a safe environment. Quality care at Grand River Hospital is monitored using the four domains of quality:

- 1. Access to Care Treat me,
- 2. Appropriateness of Care Heal me,
- 3. Safety of Care– Don't hurt me, and
- 4. Patient Experience with Care Respect me

The *quality framework* below serves to ensure alignment and accountability for quality throughout the hospital.



Process

• The CEO will:

-Ensure the hospital has a clearly defined quality framework to continually monitor, evaluate, report and improve quality

-Foster and support alignment and effective engagement of staff, physicians and volunteers in quality improvement.

• The board delegates the following work to the Quality and Patient Safety Committee (QPS):

-Ensure there is a quality plan, and recommend approval of that plan to the board

-Establish processes by which administration continually demonstrates effective quality processes in the management of clinical programs and services;

-Verify coordination of initiatives between MAC and administrative structures that contribute to quality and safety of patient care;

-Oversee compliance with quality related standards and legislation, including accreditation and the *Excellent Care for All Act* (2010).

• QPS is accountable to report back to the board following each meeting on the progress of the plan, key performance metrics and process compliance.

Other Related Policies

- 3-B-10 Roles and Responsibilities of the Board
- 3-C-10 Quality and Patient Safety Committee Terms of Reference
- 6-2 Performance Measurement and Monitoring Policy