



	Policy/Procedure Name:	Quality Improvement and Safety
Manual: Governance	Number:	
Section: Program Quality and Effectiveness	Effective Date:	10 NOV 2022
Pages: 1 of 2	Revision Date:	

Purpose

This policy outlines the Board’s commitment to quality improvement and safety.

Policy

The Board, in accordance with the *Excellent Care for All Act, 2010*:

- recognizes that a high quality health care system is one that is accessible, appropriate, effective, efficient, equitable, integrated, patient-centred, population health focussed, and safe;
- is committed to ensuring that the Corporation is responsive and accountable to the public, and focused on creating a positive patient experience and exceptional outcomes; and
- believes that quality is the goal of everyone involved in delivering health care in Ontario, and that ultimately, this Corporation should hold its executive team accountable for its achievement.

The Corporation will meet or exceed established and evolving standards of quality and patient safety. The Corporation is committed to addressing quality issues and identifying and acting upon opportunities to continuously improve patient care and service delivery. The Board recognizes the importance of monitoring, evaluating, and continuously improving the quality of patient care and services.

The Board recognizes the importance of the safe delivery of its services, as well as the importance of reducing or preventing the potential for injury or loss to its patients, visitors, staff, Credentialed Staff, volunteers and students, and damage to or loss of the Corporation’s assets.

The Corporation is committed to improving the quality of programs and services on a continuous basis. A culture of patient safety is the underlying principle in the success of quality improvement. Patient safety has been defined as a patient’s “freedom from accidental injury” when interacting in a healthcare system. Care and management standards are integral to the achievement of this goal. Standards and quality planning will align with the Corporation’s mission, vision, and values, and corporate priorities, and will support the goals and objectives of the Corporation’s strategic plan.

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The Board is ultimately responsible for oversight and decision making related to quality and safety issues including:

- reviewing and recommending policies and standards;
- overseeing compliance with quality and safety related issues, including accreditation; and
- reviewing and making recommendations following adverse events.

In keeping with the requirements under *the Excellent Care for All Act, 2010*, the Corporation will:

- carry out patient satisfaction surveys and employee satisfaction surveys;
- develop a patient declaration of values, and publicly post it;
- establish a patient relations process that reflects the content of its patient declaration of values, and publicly post it;
- develop an annual quality improvement plan and publicly post it, through the Quality & Patient Safety Committee, and provide a copy of it to the Ontario Health Quality Council; and
- annually establish performance targets and performance metrics related to quality and patient and staff safety for monitoring by the Quality & Patient Safety Committee.

At least quarterly, the Quality & Patient Safety Committee will monitor the Corporation’s quality of patient care, and patient and staff safety against the defined performance targets and performance metrics and report to the Board.

The Quality & Patient Safety Committee will also oversee the development of the Corporation’s Patient & Family Centred Care philosophy and the development of support systems that will enhance the delivery of healthcare services around the needs of patients and their families and report to the Board.

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