

Leamington Mennonite Home
Long Term Care

**QUALITY & RISK MANAGEMENT
POLICY AND PROCEDURE**

CATEGORY: Standing Committees	SUBJECT: Leadership & Quality Committee – Terms of Reference	SECTION: B POLICY: 2
DATE: July 12, 2022	Administrator's Signature: _____	

LEADERSHIP & QUALITY COMMITTEE – TERMS OF REFERENCE

PURPOSE:

- 1) Share information related to Quality & Risk Management programs, meetings, and committee reports, and financial and policy review.
- 2) Coordinate the annual Quality Improvement Plan (QIP) (ON), Operational Plan, and Risk Management Schedules in each department.
- 3) Establish and review departmental quality & risk management activities with an interprofessional approach and department leaders.
- 4) Review risks that have been identified through internal audits, inspections, external reviews (Practice Inspections, Compliance, Accreditation, Satisfaction Surveys, Health & Safety) and through monitoring of performance indicators.
- 5) Quarterly will review, trend, and analyze any complaints that have been filed and the results of interventions.
- 6) Analyze risk and make recommendations for changes in system/service provision so as to achieve desired results or goals.
- 7) Report quarterly to support services on the status of the Quality Management Plan and to review the effectiveness of the Quality Management Plan.
- 8) Review and ensure action plans are developed for risk issues identified by Resident Safety Committee, Professional Advisory Committee (ON), Medication Safety Advisory Committee (BC), Stakeholder Advisory Committee, and Quality Review worksheets.
- 9) Complete an annual review of the committee. and make recommendations for improvement.
- 10) Track follow up actions until complete.
- 11) Provide status reports regarding Quality of Care Reviews to Support Services as applicable.

DECISION MAKING:

The Committee makes recommendations for changes in system/service provision to the appropriate committees within the Home so as to achieve desired results or goals.

MEMBERSHIP:

Home Leadership Team with ED assigned as Chair. Other individuals to be invited as required.

FREQUENCY OF MEETINGS:

Monthly or more often as called by the Chairperson.

MINUTES:

Minutes are approved by the Committee and signed by the Chairperson. Minutes are placed in the QM program binder, which is available to all staff upon request.

AGENDA:

All agenda items must be forwarded to the Chair at least 24 hours in advance of the meeting. Results of all QI activities conducted since the last meeting from all departments are to be brought to the meetings for discussion.