Huron Health SYSTEM Alexandra Marine and General Hospital South Huron Hospital	☐ Policy ☐ Procedure ☐ Protocol X Terms of Reference	Section Governance	Number 01-101

Terms of Reference-Quality Committee		
Date Issued: **2023-03** **Date Review/Revised:** **2026-09-11** **Next Review Date:** **2028-02**		
Owner: Quality Committee	**Reviewer(s):** Governance Committee	**Approver:** Common Board of Directors (Common Board)

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Except as expressly stated to the contrary herein, these Terms of Reference apply to both the Alexandra Marine & General Hospital (AMGH) and the South Huron Hospital (SHH). AMGH and SHH are referred to individually and collectively as the Hospital.

Policy / Purpose

- A committee under the authority of the Common Board for the purposes of the *Excellent Care for All Act*, *2010* (the "Act")
- To assist the Common Board in fulfilling its responsibility to ensure the continuing high quality of patient care throughout the hospital(s)
- Ensuring that the Leadership Team establishes an appropriate patient and performance-based quality culture
- Providing support, input and governance as the Leadership Team establishes and monitors performance targets while reducing associated risks

Objectives / Responsibilities

- Provide leadership in promoting and supporting strategic plans designed to make overall improvements to quality of care and services
- Receive and regularly review with Leadership, key reports of specified performance indicators to monitor the quality of care being provided and patient needs and wellness; and identify trends and problem issues for further investigation and monitoring
- Ensure an effective process is established and applied for the communication of quality improvement and risk management initiatives between the Common Board, the hospital and external stakeholders
- Ensure that best practices information supported by available scientific evidence is translated into materials that are distributed to employees, members of the professional staff and persons who provide services within the hospital, and subsequently monitor the use of these materials by such persons
- Oversee the preparation and implementation of Accreditation activities including readiness for accreditation surveys and compliance with all applicable standards
- Encourage a positive image of the Hospital(s) within the communities
- Address any other quality, utilization or communication issues as referred by the Common Board

- Consider and make recommendations to the Common Board regarding quality improvement initiatives and policies
- Review and make recommendations to the Common Board on the Quality Improvement Plans (QIP) as prepared by clinical leadership
- Receives reports from the Medical Advisory Committees identifying and making recommendations regarding systemic or recurring quality of care issues
- Recommends to the Common Board with regard to Executive Compensation based on QIP and other factors related to quality improvement

Critical Incidents and Events

"Critical incident" means any unintended event that occurs when a patient receives treatment in the hospital:

a. Results in death, or serious disability, injury or harm to the patient; and
b. Does not result primarily from the patient's underlying medical condition or known risk inherent in providing treatment

In accordance with Regulation 965 under the *Public Hospitals Act*, this Committee shall receive from the Chief Executive Officer or CNE aggregated critical (level 5 and 6) and near miss incident data at least two times per year and ensure completion and evaluation of all actions. The Committee reports their review and approval/disapproval on the Critical Incidents Report.

This is to monitor the hospital's system for ensuring that, at an appropriate time following disclosure of a critical incident, there will be disclosure as required by Regulation 965 under the *Public Hospitals Act* of systemic steps, if any, the hospital is taking or has taken to avoid or reduce the risk of further similar critical incidents.

Membership (All members are voting members)

- Four Common Board Directors (minimum) (one to assume Chairperson of the Committee)
- Medical Staff Representative(s) (AMGH & SHH)
- President & CEO
- Vice President Clinical Services/Chief Nursing Executive
- Vice President Corporate Services /Chief Financial Officer
- Manager of Patient Relations, Patient Registration and Privacy Officer
- Patient Advisor
- Community Member

Chairperson

- Common Board member to assume role of Chair
    - Call all meetings of the committee
    - Chair all meetings of the committee
    - Designate another director who is a member of the committee to chair the committee in the Chair's absence

Recorder

Executive Assistant to the President & CEO or alternate as selected by the Chairperson.

Terms of Appointment
Based on Board Member Term of Office

Quorum
Majority of voting membership

Frequency of Meetings
The Committee shall meet quarterly or at the call of the Chairperson.

Meeting Venue
AMGH, SHH or Virtual platform, eg., MS Teams

Meetings or proceedings may be recorded by audio or video means to ensure meeting minutes and document accuracy. Recordings are deleted after the meeting minutes have been prepared.

Circulation
Minutes are circulated to all Common Board/MACs/committee members

Reporting Relationship
Common Board of Directors

Confidentiality
In the course of committee business, confidential information may become known to committee members. Members have a responsibility to keep such information confidential.

Conflict of Interest Statement
All Common Board and committee members have a duty to ensure that the trust and confidence in the integrity of the decision-making processes of the organization are maintained. Members will ensure that they are free from conflict, potential or perception of conflict in their decision-making. It is important that all Common Board and committee members be held accountable to understand and acknowledge their obligations when a conflict of interest, potential or perceived, arises.

ToR Approval Process	Governance Committee: HHS Common Board of Directors:	2026-09-11 2026-09-24