

<b>Manual</b>	<b>GOVERNANCE POLICY</b>		<b>POLICY</b>
Section 3.0	Program Quality and Effectiveness		
<b>Title</b>	<b>QUALITY</b>		
Issuing Body/ Prepared By	Quality Committee		
Approved by	Board of Directors		<b>Number:</b> GOV 3.30
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### Purpose

As part of its responsibility for ensuring program quality and effectiveness, the Board recognizes the importance of monitoring, trending, evaluating, and continuously improving the quality and safety of patient care and services. The Board is committed to addressing quality issues and acting upon opportunities for improvement. This policy sets out processes to support the Board in fulfilling this responsibility.

### Policy

The Board will:

- ensure that the Hospital establishes adequate systems to identify and manage quality and patient safety issues
- ensure that the Hospital fosters a quality improvement and patient safety culture
- establish a Quality Committee whose mandate includes monitoring the delivery of health care and services at Bluewater Health and ensuring that quality improvement is an integral component of the hospital's governance and management processes
- determine key indicators of quality, goals and appropriate benchmarks to evaluate and trend the Hospital's performance.

The Board delegates responsibility and authority to the Chief Executive Officer and the Chief of Professional Staff to develop, implement, monitor, and evaluate a quality improvement plan and program consistent with the strategic plan goals and objectives which shall include a quality indicator dashboard, annual quality reports, a medical quality and utilization committee, and quality performance support structures consistent with this policy.

### Monitoring:

Method:        1. Review of the policy  
                  2. Review of the quality improvement program and its outcomes.

Frequency:    1. Annually  
                  2. Quarterly