

Corporate Quality Initiatives Committee
February 23, 2006 – 9 a.m. – Conference Room A, Corporate Office

Present:

Ms. Pat Pilgrim, Chairperson
Ms. Norma Baker
Dr. Dick Barter
Ms. Louise Jones
Ms. Heather Predham

Ms. Janet Squires
Ms. Janet Templeton
Mr. Larry Kelly, Invited Guest
Dr. Roger Butler, Invited Guest
Ms. Dianne Smith, Recording Secretary

Regrets:

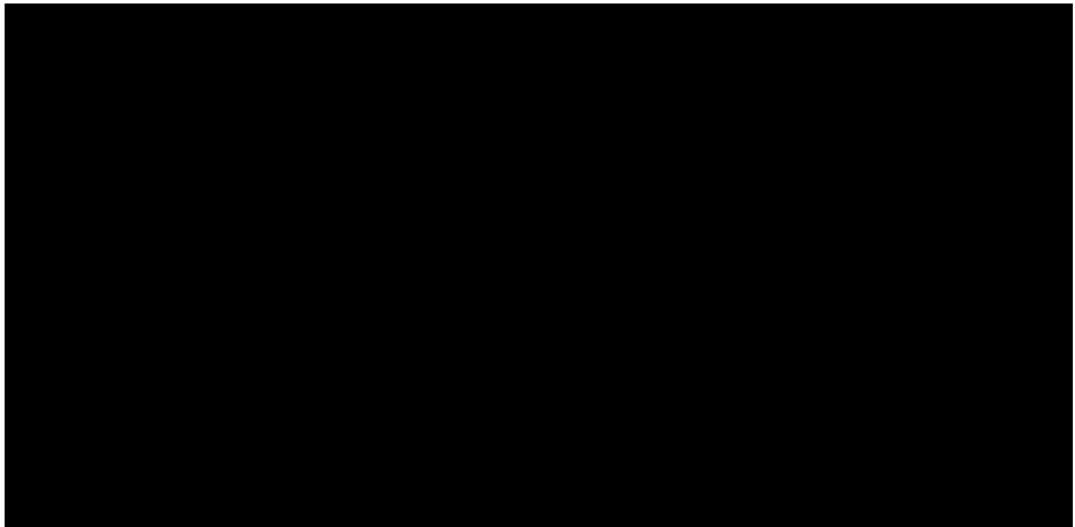
Dr. John Harnett
Ms. Carol Chafe

Welcome by Chair

The Chair welcomed Mr. Larry Kelly, (A) Program Director of Rehabilitation/Continuing Care, and Dr. Roger Butler, Clinical Chief of Rehabilitation/Continuing Care.

Approval of Agenda

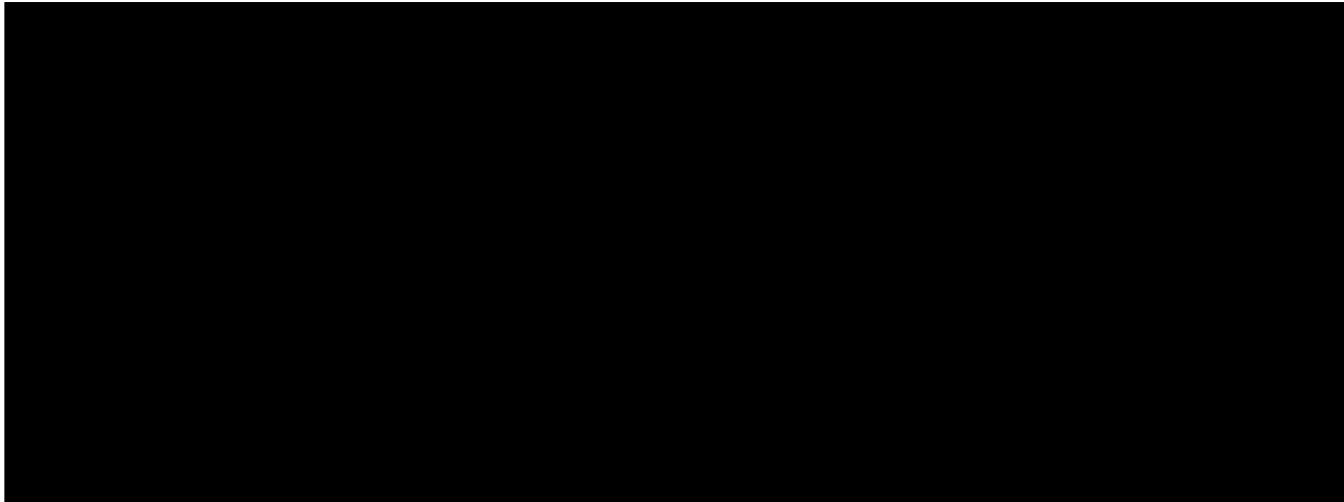
The Chair asked for revisions or additions to today's agenda. There were none. The Chair advised we would begin today's meeting with Item 7, Review of Quality Initiatives Reports and asked Mr. Kelly to provide a verbal overview of the Rehabilitation/Continuing Care Report.

7.0 Review of Quality Initiatives Reports**7.2 Rehabilitation/Continuing Care**

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presented

2. Business Arising

2.1 Baker/Norton Report

The Chair advised a meeting had been scheduled with Dr. James Rorke, Dean of Medicine, to discuss our committee's concerns relating to this report and asked Dr. Robert Williams to attend the meeting with her. Dr. Williams replied, as this is a national issue, he did not feel there was a need to meet with the Dean concerning this item. He advised he would provide information on this item to Dr. William Pollett, Discipline Chair of Surgery, and we can follow-up with him to obtain an interest in moving this item forward. Committee members felt it was important to maintain this item on our agenda and stressed the need for further risk and quality education to our Medical School Students.

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2.3 Reprocessing Audit

A revised reprocessing audit report was circulated to all members. Members reviewed and debated the question of where does this report go and what needs to be removed as completed? It was noted the majority of these items belong to the portfolios of Louise Jones and Patricia Pilgrim. Ms. Jones and Ms. Pilgrim will follow-up on the items in this report for their respective areas. A suggestion was put forward that it might be time to restart a reprocessing audit again as this report pertains to the reprocessing audit started three years ago. Patricia Pilgrim will discuss this with the Quality Enhancement Department.

2.4 QI Reports

Discussions on new structure for quality initiatives are ongoing.

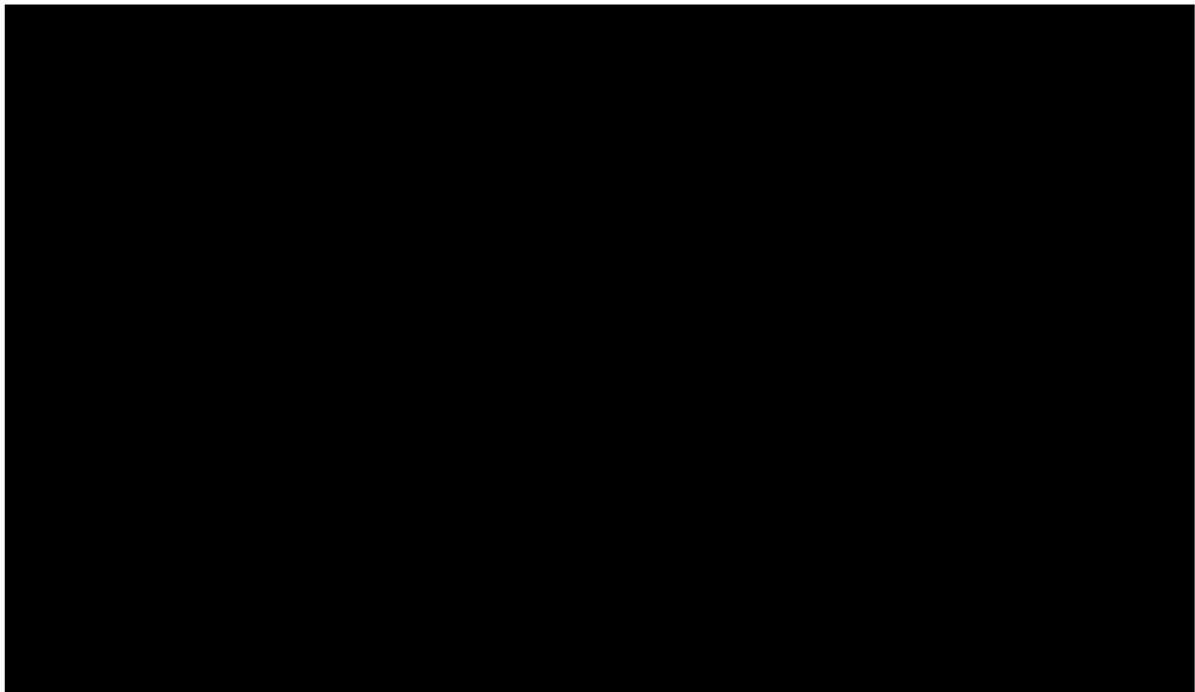
2.4.1. Reporting Schedule

Revised reporting schedule included in package and it was noted the Clinical Efficiency Report is due in March.

2.4 Goals and Objectives – HCCSJ Strategic Plan 2005-2006

There was an overall consensus to take this item off the QI agenda. Completed!

3. Standing Agenda Items



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3.2 Accreditation

Work on preparing for interim surveys, to be conducted this year, for the former NCTRF and PHCC continues.

4. New Business

Nil.

5. Quality and Risk Management Update

Members were presented with a copy of the November/December 05 and January 06 Quality and Risk Division Monthly Report. Ms. Predham reviewed verbally and highlighted the following items:

- Legal
 - A lot of work ongoing regarding the Laboratory and ER/PR testing. Verbal review of number of patients tested and panelled was provided. Insurance company, HIROC, is reviewing. First statement of claim received. The focus is on getting all results communicated to the Expert Panel for their recommendation to the patient and patient's physician.

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- [Redacted]

[Redacted]

6.

[Redacted]