

Board Quality Initiatives Committee
January 14, 2003 - 11:30 a.m. – Board Room, Corporate Office

Present:

Ms. Kathy LeGrow, Chairperson
Ms. Thelma Williams
Dr. David Peddle
Mr. Gary Milley

Ms. Betty Forward
Ms. Kay Daley
Ms. Pamela Elliott
Ms. Sharon Smith

Regrets:

Ms. Patricia Pilgrim

1. Minutes of the Last Meeting

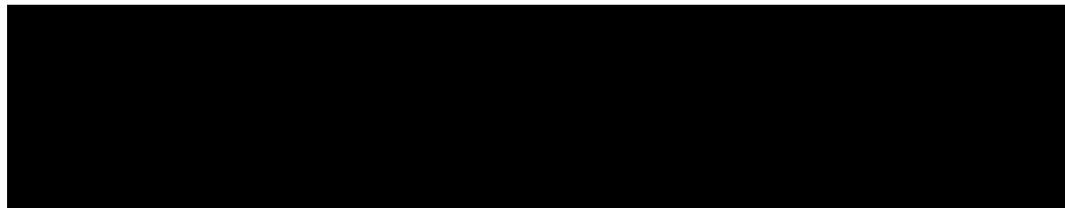
Page 5 – “[REDACTED] – Facilities – “Ms Smith indicated that incidents of this nature are increasing.” will be clarified to read “Ms. Smith indicated that that such situations whereby we have no record of the incident are increasing.”

Ms. Smith advised that education sessions are being conducted with the programs on the circumstances and the process for occurrence reporting.

With this change, it was moved by Ms. Williams, seconded by Ms. Daley, that the minutes of November 19, 2002, be approved. *Carried.*

2. Business Arising**2.1. Frequency of Mislabeled Specimens**

Four responses were received to the Request for Information, two of which meet our criteria. A group has been established to review the responses. Both systems are bar coding systems and will require a significant investment of hardware. It was suggested that opportunities for cost sharing should be pursued with other hospitals and the Department of Health and Community Services.

2.2.

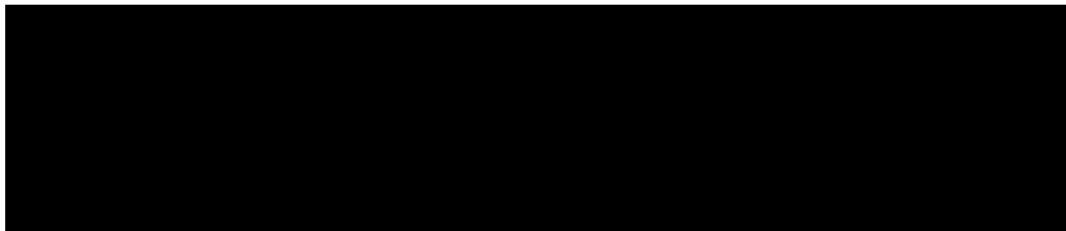
2.3. Terms of Reference

The committee approved the terms of reference with the following additions:

- the Director of Quality Initiatives will also attend meetings as a resource person
- under "Duties" – responsibility for Purple and Green Awards.

The terms of reference will be submitted to the Planning Committee for inclusion with the Bylaws and subsequent submission to the Board of Trustees.

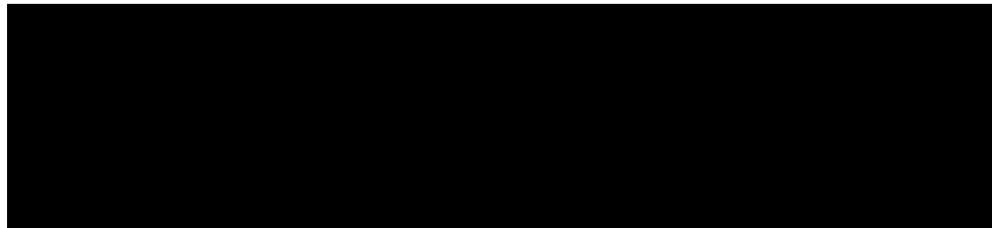
2.4.



3. Report from the Director of Quality Initiatives

The report for October, 2002, was reviewed and the following highlighted:

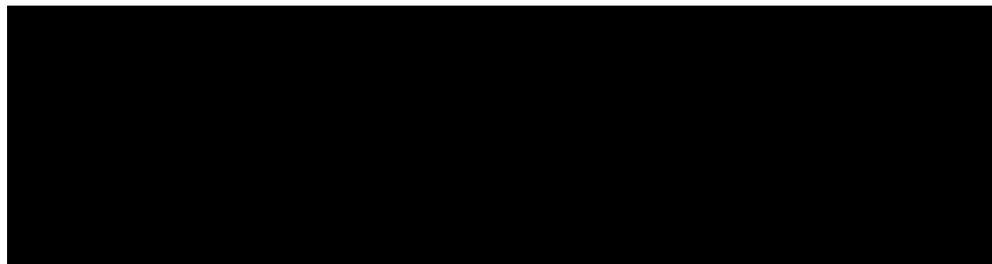
- ✓ there were no *statements of claim* received during this period
- ✓ *Discoveries:*



- ✓ *Discontinuances/Settlements:*



- ✓ *Potential/Ongoing Legal Issues:*



Board Quality Initiatives Committee
February 4, 2003 - 11:30 a.m. – Board Room, Corporate Office

Present:

Ms. Kathy LeGrow, Chairperson
Ms. Thelma Williams
Dr. David Peddle
Mr. Gary Milley

Ms. Betty Forward
Ms. Kay Daley
Ms. Pamela Elliott
Ms. Sharon Smith

Regrets:

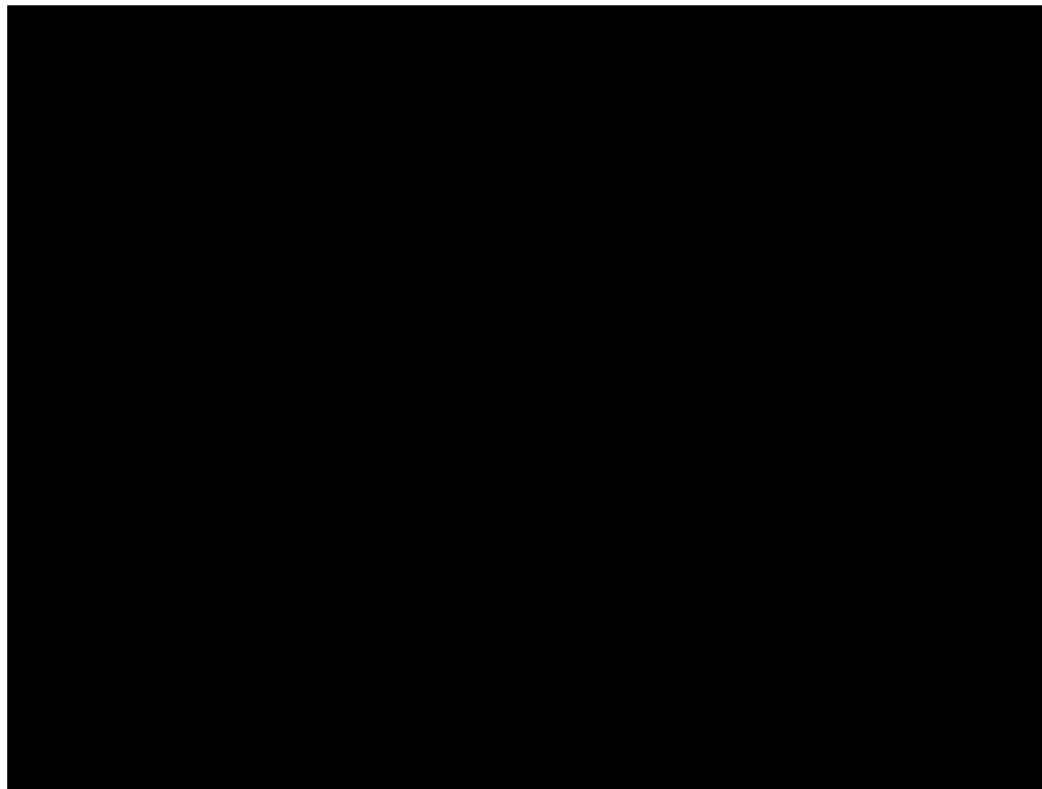
Ms. Patricia Pilgrim

1. Minutes of the Last Meeting

Page 4, 4.1 Surgery Program “the shortage of anaesthetists continues to impact services” will be changed to “the shortage of anaesthetists continues to impact services at the HSC”. With this change, it was moved by Ms. Daley, seconded by Ms. Williams, that the minutes of the meeting held on January 14, 2003, be approved. **Carried.**

2. Business Arising

2.1.



Board Quality Initiatives Committee
March 11, 2003 - 11:30 a.m. –Room 2551, Health Sciences Centre

Present:

Ms. Kathy LeGrow, Chairperson
Ms. Thelma Williams
Dr. David Peddle
Mr. Gary Milley

Ms. Kay Daley
Ms. Pamela Elliott
Ms. Patricia Pilgrim
Ms. Sharon Smith

Regrets:

Ms. Betty Forward

1. Minutes of the Last Meeting

The following change was made to the last minutes:

Page 3, “[REDACTED] - Medicine” “The occurrence was not reported.” should be changed to “The occurrence was not reported in a timely fashion.”

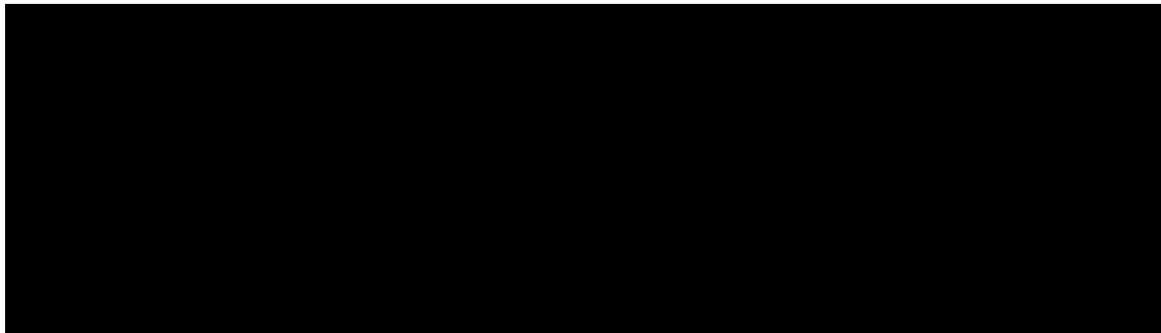
With the above change, it was moved by Ms. Williams, seconded by Ms. Daley, that the minutes of February 4, 2003, be approved. **Carried.**

2. New Business

2.1. Schedule of Meetings

There was some discussion about reducing the number of committee meetings recognizing that the Board has changed its schedule. The committee feels it should continue to meet monthly (with the exception of July, August and December). The reporting schedule for programs and departments allows for three reports per meeting, and a reduction in the number of meetings would mean an increase in the number of reports at each meeting and longer meetings. We will revisit the matter next year.

3.



Board Quality Initiatives Committee
May 13, 2003 - 11:30 a.m. – Conference Room A, Corporate Office

Present:

Ms. Kathy LeGrow, Chairperson
Ms. Betty Forward
Dr. David Peddle
Mr. Gary Milley

Ms. Kay Daley
Ms. Pamela Elliott
Ms. Patricia Pilgrim
Ms. Sharon Smith

Regrets:

[Redacted]

1. Minutes of the Last Meeting

[Redacted]

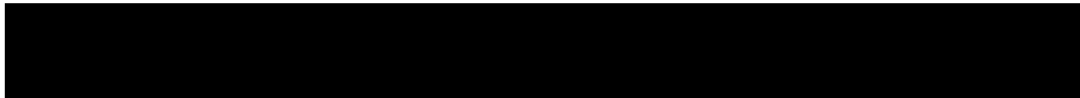
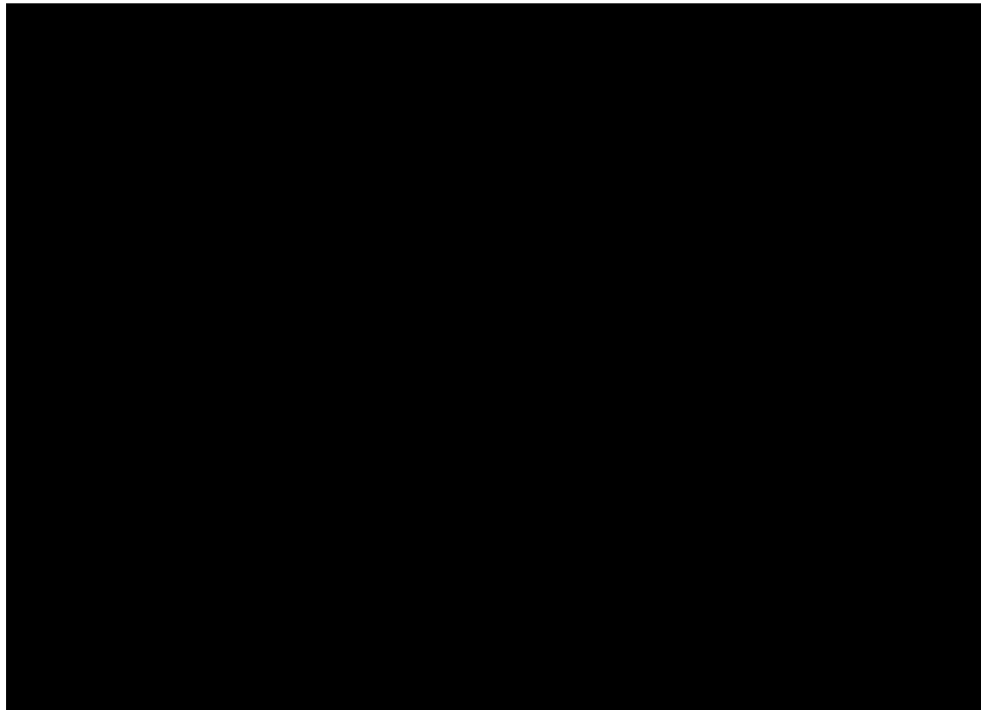
2. Business Arising

[Redacted]

2.2. Entrances to Patient Bathrooms – Orthopedic Unit, St. Clare’s

[Redacted]

- ✓
- ✓
- ✓
- ✓



7. Quality Initiatives Reports

7.1. Organizational Development

The following was highlighted:

Achievements:

- ✓ Implementation of first inhouse management course
- ✓ 16 bursaries were awarded during 2002
- ✓ Corporate orientation has been redesigned
- ✓ Volunteer Appreciation Breakfast was held

Challenges:

- ✓ Management succession plan – within the next four years, 20% of our managers will retire
- ✓ Improving compliance with the performance management program
- ✓ Accessing appropriate teaching space



Board Quality Initiatives Committee
June 10, 2003 - 11:30 a.m. – Conference Room A, Corporate Office

Present:

Ms. Kathy LeGrow, Chairperson
Ms. Pamela Elliott
Ms. Betty Forward
Dr. David Peddle

Ms. Patricia Pilgrim
Ms. Heather Predham for Ms. Sharon Smith
Ms. Thelma Williams

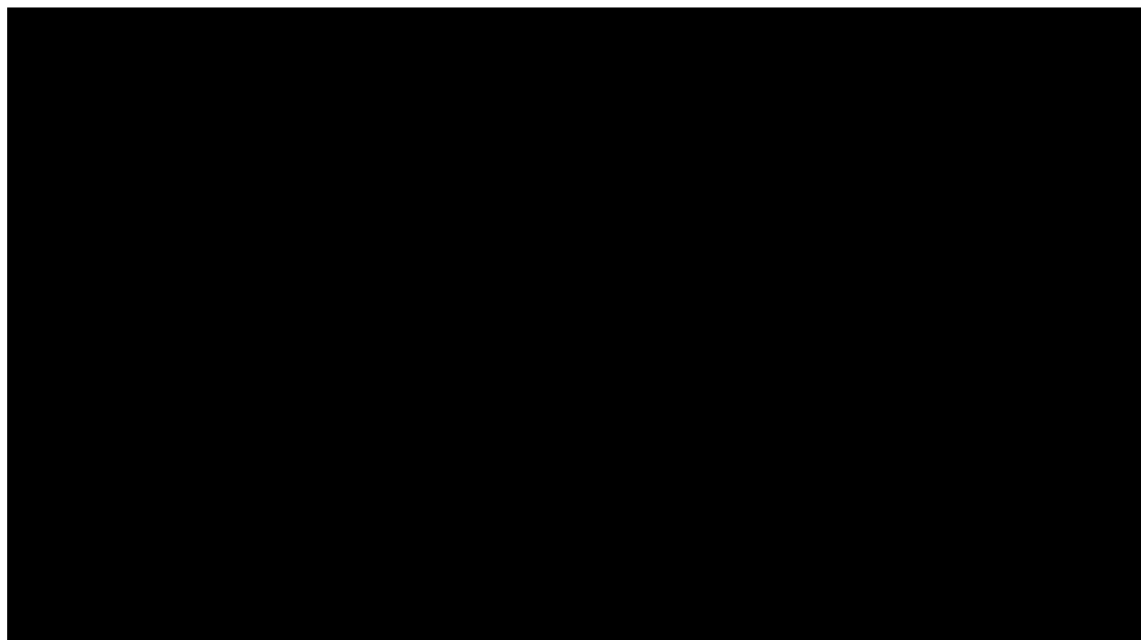
Regrets:

Ms. Kay Daley
Mr. Gary Milley
Ms. Sharon Smith

1. Minutes of the Last Meeting



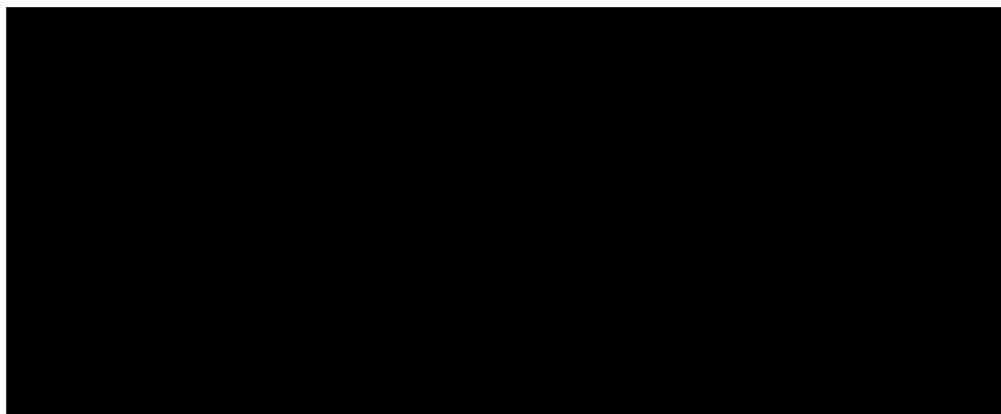
2. Business Arising



3. Report from the Director of Quality Initiatives

The report for April, 2003, was reviewed, and the following highlighted:

Statements of Claim and Discoveries - there were none during this time period.



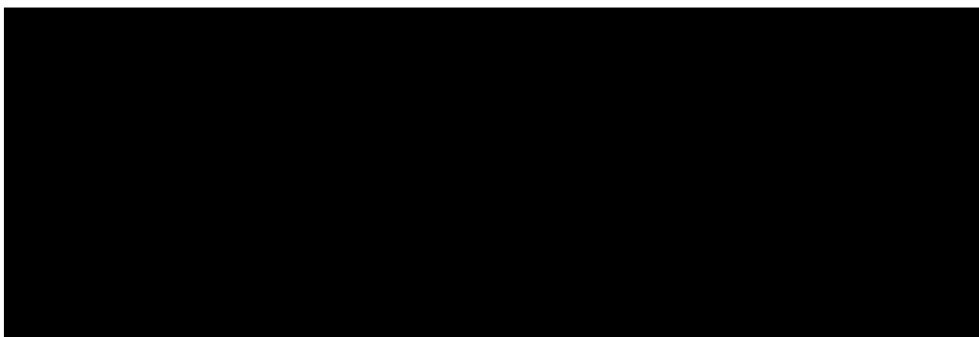
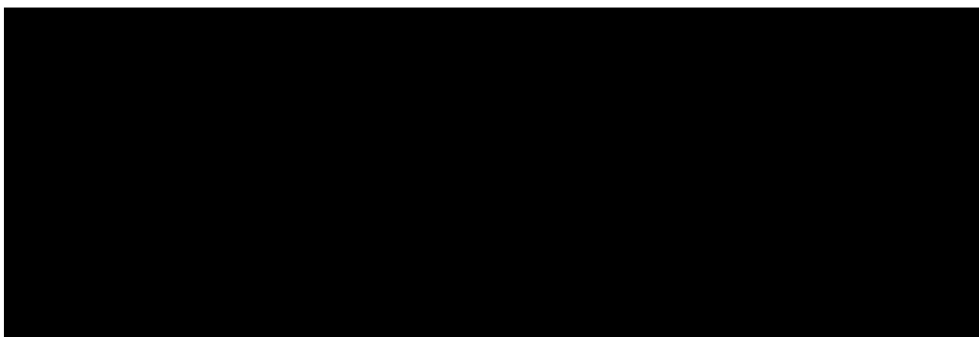
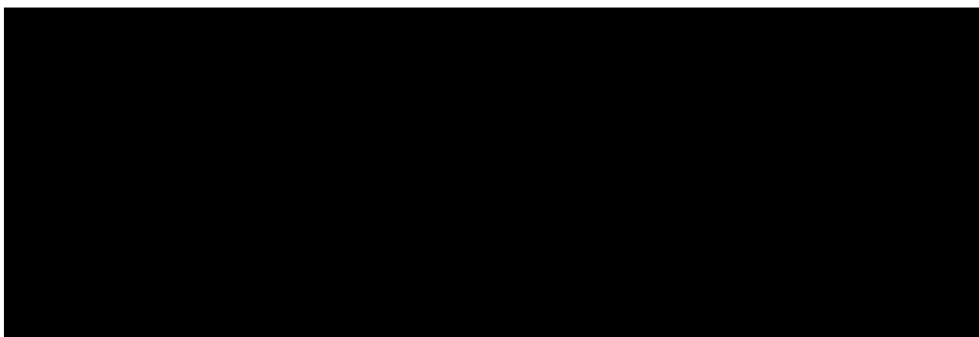
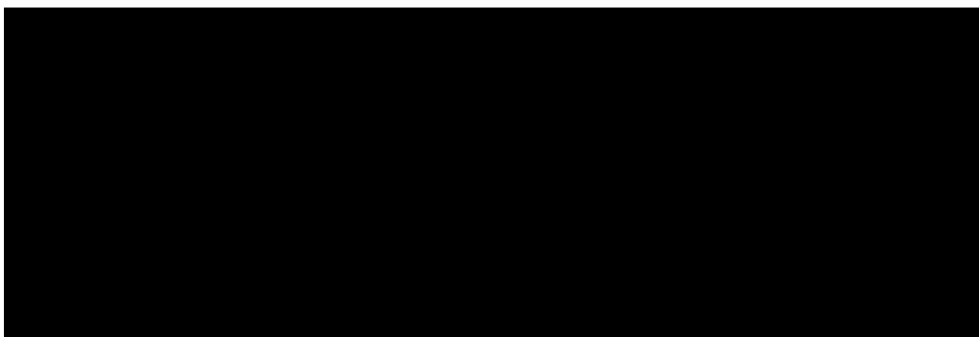
3.1. Corporate Quality Initiatives Committee

The minutes of the meeting of April 17, 2003, were provided for information.

4. Clinical Efficiency Unit – Update

Ms. Pilgrim circulated an update highlighting the following:

Ongoing initiatives:

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- 
- 

New Initiatives:

- Diagnostic Imaging – an action plan is being developed to address issues related to prioritization of procedures
- Quality of physician documentation and impact on coding - the impact of appropriate coding has been presented to the Clinical Chiefs. A sheet identifying co-morbidities for diagnoses has been developed for use by physicians when completing their discharge summaries.
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