

Renal Program Quality Council TERMS OF REFERENCE

PURPOSE	The Renal Program Quality Council (RPQC) is responsible for overall monitoring, evaluating, and improving the quality of care and standardization of all renal services within Interior Health.
DEFINITIONS	RENAL- for the purposes of this quality council is defined as the health system function consisting of acute and community services that work to promote health and prevent progression of kidney disease.
SPONSOR	VP, Clinical Operations, IH North
ACCOUNTABLE TO	The Renal Program Quality Council is dually accountable to the VP, Clinical Operations, IH North, and to the BC Renal Executive Committee.
	Individual members who provide support for the Renal Program Quality Council are accountable to their respective Executive Directors, Program Director, Chief Nursing Officer and Vice Presidents through their geographic reporting structure.
AUTHORITY	This Council makes recommendations to the Renal Program Leadership Team and/or portfolio leadership structures. It does not have independent authority beyond that of its individual members.
APPOINTMENTS	Members are appointed by their respective VP or Site Leadership.
MEMBERSHIP	Membership includes:
	 Renal Program Director and Renal Medical Director (co-Chairs) Site Lead Nephrologists (KCC, Hemodialysis, Home Hemodialysis, Peritoneal Dialysis, Transplant Renal Managers Clinical Practice Committee Chair Kidney Care Clinic Committee Chair Transplant Committee Chair Home Modalities Committee Chair Hemodialysis Committee Chair Palliative Care & End of Life Committee Chair Renal Clinical Pharmacy Specialist Health Human Resources Committee Chair Facilities and Equipment Planning Committee Chair Renal Program Data Management Coordinator-PROMIS Renal Program Administrative Assistant Renal Program Coordinator Renal Program Improvement Consultant Patient and/or Family Partners Aboriginal Health Partner Ad Hoc members such as; Business Support, Professional Practice Office, Human Resources, Strategic Information, Health System Planning, Digital Health, Communications BC Renal Executive representative, BC Transplant representative Responsibilities of the Chairs: Facilitate meetings Provide updates to VP (as required) Complete, distribute, and store meeting minutes, action logs, and documents Organize meeting schedules, agendas, and log recommendations



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	 Provide committee updates (as required) Provide recommendations and leadership support in the member's area of responsibility Ensure there is an informed delegate in the event of absence
QUORUM & VOTING	 50% of membership plus one Chair is required for a quorum. Delegates may partake in discussion but are unable to vote.
MEETINGS	 Meetings held quarterly. Co-chairs may call extraordinary meetings at any time. Traditional Territory Acknowledgement (Land Acknowledgment) will be provided. Meetings will be conducted in the most efficient manner and remote access technology offered to support attendance.
ADMINISTRATION	 Agenda & Minutes/Action Logs Council members will submit agenda items to Administrative Support and/or Co-Chairs in advance of the meetings. Minutes and action logs of the meetings will be reviewed by the Co-Chairs and distributed to all members prior to the next meeting.
SPECIFIC AREAS OF RESPONSIBILITY	PROCESS & PRIORITIES The Council: Fosters the development of a culture reflecting Interior Health's commitment to quality and safety. Uses the BC Patient Safety & Quality Council Quality Matrix as a guide to identify new areas of opportunity to influence and champion the local implementation of initiatives. Ensures that local quality initiatives are consistent with Interior Health goals and strategies as well as aligned with VP Work Plans. Reviews reports related to quality indicators/performance measures, identifies trends in data and assists in the selection of potential areas for local quality improvements projects. Receives and analyzes the recommendations of critical incident reviews, quality reviews and audits as appropriate. Receives and provides feedback to/from internal departments, committees and liaison groups to assist in determining priority areas for focus and timelines for execution of the work. ALIGNMENT Where applicable, the work of the Council is aligned with and guided by: Ministry of Health Service Plan IH Strategic Priorities BC Renal Strategic Priorities BC Renal Strategic Priorities BC Transplant Renal Program Tactical Plan PERFORMANCE The Council will monitor and review data quality indicators quarterly and provide recommendations to develop remedial plans to address areas of concern. Reporting will also occur through established VP and portfolio structures. STRUCTURES AND COMMUNICATION The Council may, where appropriate, establish ad hoc or time-limited working groups or task forces to consider specific topics or issues. Communication will occur through established portfolio structures. The Council will consult with enabling departments, including inviting representatives to attend council meetings, as needed.



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	QUALITY REVIEW The Council will work in collaboration with established committees to carry out its responsibilities related to quality and standardization of all renal services within Interior
DATE APPROVED	Health.
REVIEW DATE	Annually from approval date.

