

TERMS OF REFERENCE – PHYSICIAN QI WORKING GROUP

Purpose

The Physician Quality Improvement (QI) working group acts as a coordinating vehicle to bring partner organizations together to share information and experiences in support of lifelong learning, maintenance of competencies and continuing professional development.

Definition

Quality Improvement is defined in this context as the ongoing processes and activities that maintain and improve the delivery of appropriate, safe and evidence-based care at the patient, organization and system levels of the health care system. These activities are generally led by physicians for physicians, and involve other medical practitioners as appropriate.

Role

The Physician QI working group acts as a forum within the quality leadership operating framework to bring partner organizations together. The Group:

- provides an over-arching function by linking a wide range of activities focusing on medical staff quality improvement and professional development;
- plays a significant role in identifying and promoting successful and innovative QI programs;
- promotes linkage and coordination between parallel initiatives; and
- responds to emerging issues and opportunities identified in quality and practice improvement related activities.

Success for this group is based, in part, on the following:

- awareness of the quality improvement initiatives and innovations that are occurring;
- recognition that quality medical care is a professional responsibility;
- all physicians working in BC are engaged and participating in various forms of QI activities;
- a positive and constructive working relationship exists between health authorities and their medical staff to support QI processes; and
- an agreed upon structure for supporting quality improvement is in place, reflecting physician practice and multi-disciplinary health care teams.

Guiding Principles

In fulfilling its role and mandate the Physician QI working group will be guided by the following values and principles:

- clear objectives, accountability, roles and responsibilities;
- partnership and collaboration;
- value for the continuum of care, providing benefits to patients, providers, and to healthcare system as a whole;
- transparent decision making;
- quality improvement founded on safe, learning processes owned by medical practitioners;
- a trusted and acceptable firewall in place between the QI and QA processes at the individual practitioner level;
- knowledge exchange and an information-sharing culture supported by technology;
- measurable and relevant scope of work to support clinical practice and quality improvement;
- communication and engagement strategies that reflect current ideas about adult

- learning, professional development and quality improvement;
- alignment of activities across processes and organizations; and
- realistic and manageable scope of responsibilities in light of available resources and system supports.

Objectives

The Physician QI working group will engage with physician leaders and interested partner organizations to enhance quality improvement activities to:

- develop a comprehensive picture / environmental scan of the physician-led QI context and landscape in BC and where appropriate recommend alignment of QI initiatives to reduce duplication and overlap of effort;
- identify the scope of work /coordination for this group, including initiatives that may be predicated on the functioning of interdisciplinary teams and broader systems of care / service delivery;
- reach consensus on the extent of desired interplay between QA and QI activities at the individual, team and system levels;
- exchange information and work in conjunction with the QA Working Group and newly forming Multi-Professional QI Working Group (dentists, nurse practitioners, midwives, podiatric surgeons etc.) to share best practices and innovative approaches to continuous improvement and practice enhancement;
- serve as a mechanism for examining and sharing metrics/outcome measures and promoting learning opportunities that support physicians in QI activities;
- work with the Expert Advisory Group and individual subject matter experts on emerging issues/research related quality and practice improvement projects;
- advocate for and promote quality improvement initiatives in the province of BC; and
- report out to the Medical Quality Oversight Committee and other groups (as requested) on successes, barriers and challenges for emerging issues.

The role and objectives of the Quality Improvement Working Group will be reviewed annually to ensure ongoing relevance and appropriateness to current work and emerging opportunities.

Reporting/Accountability

The Physician QI Working Group will report through its members to their respective organizations. Regular reports will be provided by the Co-Chairs to the Medical Quality Oversight Committee. The Group is accountable to physicians themselves and the patients they care for.

Membership and Committee Functioning

The Physician QI Working Group has a fluid membership, with representation from organizations involved in medical quality improvement. These include, but are not limited to:

- Doctors of BC
- UBC Faculty of Medicine – Division of Continuing Professional Development (UBC CPD)
- College of Family Physicians of Canada
- BC Patient Safety and Quality Council
- Specialist Services Committee
- General Practice Services Committee
- Royal College of Physicians and Surgeons of Canada
- Joint Standing Committee on Rural Issues

Note: consideration to be given to inviting patients and other health care professions to periodically join and participate in these meetings.

Alternates - attendance at meetings is restricted to committee members, their appointed alternates, invited guests and the secretariat. Alternate members are requested to provide prior notice to the Co-Chairs.

Chair – The Physician QI Working Group will be co-chaired by one member from Doctors of BC and one member from the UBC Division of Continuing Professional Development (UBC CPD) within the UBC Faculty of Medicine. Terms of office are suggested for a 2-year period and should be reviewed on an annual basis.

Individual member responsibilities –

- Work collaboratively to resolve issues and reach decisions to support successful outcomes;
- Be accountable to connect and communicate with their organization and/or the committee they represent, to help integrate and align across the system;
- Ensure that meeting materials for discussion are forwarded to the secretariat according to a predetermined schedule;
- Represent organization or roles for which they are nominated and no others (unless specified).

Out of pocket Expenses - Participating organizations are responsible for remunerating individuals for time investment, travel and any other out of pocket expenses for their participating representative.

Funding for specific work / project activity – The committee may establish time-limited, issue-specific working groups or direct standing working groups to undertake work in follow-up to decisions or discussions at meetings. Funding for these activities will come from a variety of sources and will be discussed once the scope and focus of work is prioritized.

Meeting logistics - The Co-Chairs will set a tentative meeting schedule 6 months in advance. Meetings may be held in person or by video/teleconference. All in-person meetings will be held in Vancouver.

Secretariat - A common secretariat function will support all the committees and working groups in the medical quality governance structure and will be responsible for booking meeting space, distributing agendas, taking minutes and preparing related information in a timely manner. The secretariat will work closely with the co-chairs.

Confidentiality

On occasion, Physician QI Working Group members may possess documentation or information of a confidential nature. Members are requested not to disclose this to any person(s) other than the members of the committee without consultation with and agreement of the committee.

Evaluation / Review

The terms of reference (including mandate, membership, role and functions) of the Physician Quality Improvement Group will be reviewed annually to ensure ongoing relevance and appropriateness to current work and emerging opportunities.