

DRAFT terms of reference for the

Quality Improvement Decision Support Specialist Steering Committee (QSC)

(subject to further amendment from discussions with MOHLTC and AFHTO board)

Purpose:

Within a framework of policies and priorities established by AFHTO board, QSC sets specific project priorities and objectives to advance best practice and optimize performance measurement capacity across the FHT sector.

Principles:

- QSC will ensure the work it does benefits all FHTs.
- QSC will seek active involvement and support from those who lead and work in FHTs.

Mandate:

- Seek and maintain appropriate awareness of developments within the broader health system, and needs/interests shared by FHTs, that might inform information management, performance measurement and quality improvement across primary care generally and FHTs in particular.
- Consult with and advise the AFHTO board, FHTs, the provincial level decision support staff, the Ministry, related agencies (e.g. HQO, eHealth Ontario, OntarioMD, CIHI) and EMR vendors on such matters, for example setting of data standards, indicator selection, sector-wide reporting, decision-support capacity, spread of best practice, and quality improvement initiatives to support the provision of better quality of care.
- Identify and prioritize needs; review, approve and prioritize proposals to meet these needs.
- Give direction to the provincial level decision support staff (through the QIDSS Project Manager) in order to ensure QSC decisions are effectively executed and communicated.
- Actively promote adoption and spread of best practice in performance measurement across all FHTs.
- Evaluate the degree to which the QIDSS role has enhanced information management capacity across the FHT sector to support planning for continued capacity building.

Membership and reporting relationships:

- AFHTO board will determine the number of positions and representational structure for QSC, in keeping with AFHTO's principle that QSC membership should strive to reflect the different regions of Ontario, FHT governance types, professions involved in FHTs, sizes of FHTs and EMR types.
- All FHTs will be invited to apply for QSC positions; appointments will be made by the AFHTO board in consultation with members, to reflect the factors listed above. AFHTO board will appoint the chair.
- QSC is accountable to the AFHTO board to ensure direction and priorities are consistent with AFHTO direction and lead to optimal improvement and spread across the FHT sector.
- The AFHTO Executive Director, through the AFHTO board, is accountable to the QSC for appropriate management and deployment of provincial level decision support staff for satisfactory completion of projects and provision of agreed support services to all participating FHTs.

Coordination and administration:

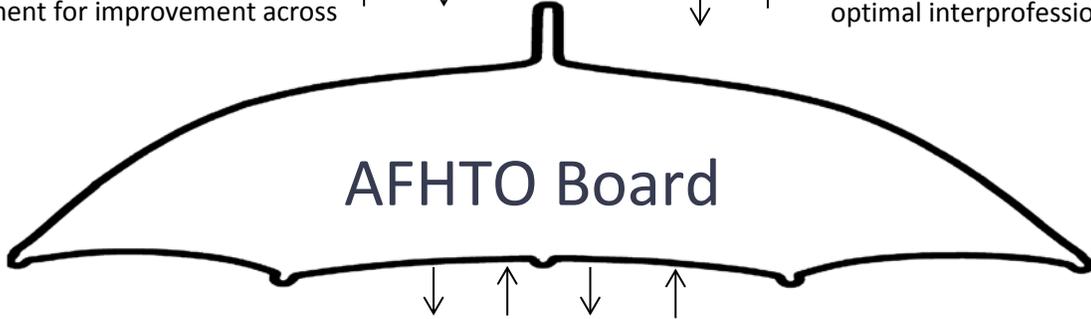
AFHTO staff will provide administrative and communications support and coordination for QSC business.



AFHTO board is accountable for appropriate use of funds to hire and house the QIDSS provincial resources, in order to advance performance measurement for improvement across FHTs



AFHTO board is accountable to the members who elect them to be their advocate, champion, network and resource to support them in delivering optimal interprofessional care

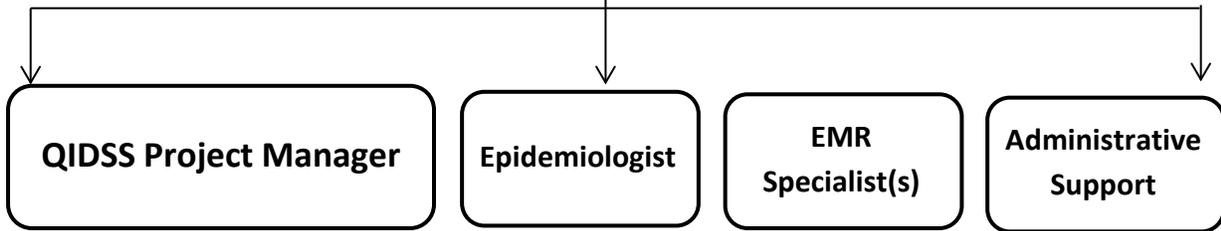
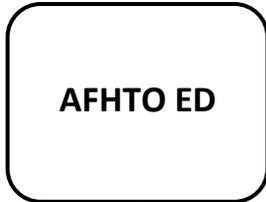


Non-voting advisory members



Within a framework established by AFHTO board, QSC works on behalf of all FHTs to set priorities and objectives to advance and optimize performance measurement across FHT sector and evaluates progress.

AFHTO ED is accountable to QSC for providing secretariat support and appropriate deployment of staff for satisfactory delivery of projects and support services



Collaboration on projects and knowledge exchange; delivery of support services

