
Terms of Reference

1. AUTHORITY

- a) The Edmonton Zone Medical Quality Council (EZMQC) formerly called Strategic Clinical Improvement Committee (SCIC) is a standing committee of the Department of Medicine (DoM).
- b) The EZMQC is created by the Office of the Chair, Department of Medicine.
- c) The Office of the Assistant Chair, Administration of the DoM shall provide management support to the EZMQC.
- d) The EZMQC shall function in accordance with these Terms of Reference.

2. COMPOSITION OF COMMITTEE

Members:

a) Voting members:

- (i) The Deputy Zone Clinical Department Head, Medicine;
- (ii) The AHS Executive Director, Medicine who shall act as the Committee Co-Chair;
- (iii) The Assistant Chair, Clinical Academic Colleagues;
- (iv) The Clinical Informatics Lead;
- (v) The Ambulatory Clinics Lead(s);
- (vi) Quality in Medical Education Lead
- (vii) The AHS Patient Care Manager, Ambulatory Care Medicine, Edmonton Zone.

b) Ex-Officio:

- (i) Chair, Department of Medicine

c) Non-Voting Members:

- (i) Individuals, as required, for advisory and/or auditing purposes and for the management support of the Committee.
- (ii) Site-chief or representative from the RAH, GNH, MHE and or SGH on an ad-hoc basis as appropriate projects dictate.

3. MANDATE OF THE COMMITTEE

- a) To implement strategic clinical initiatives in close association with Alberta Health Services, Covenant Health, Primary Care Networks and other key stakeholders.
- b) To provide advice to the Zone Clinical Department Executive Committee (ZCDEC) on global DoM policies as they pertain to the areas of clinical activity and clinical administration (see 4a).
- c) To provide advice to the Chair as needed on general matters affecting clinical operations and to address urgent clinical matters that impact the DoM as they arise.
- d) To serve as a conduit for information flow (up and down) within the DoM and the Clinical Department.
- e) To serve as a resource for regular evaluation of the DoM's and members' clinical needs and priorities, initiatives and processes to build a dynamic cycle of continuous improvement in the in-patient and ambulatory patient experience.
- f) To recommend strategies for both the DoM Administrators and Clinical Heads to operationalize.
- g) To advise the AEC on matters pertaining to Clinical Improvement scholarship evaluation for individuals seeking promotion and advancement.

4. EZMQC REPORTING AND CONTROLS

- a) Directly to the Chair, Department of Medicine and ZCDEC on the progress and the implementation of strategic clinical initiatives.
- b) Through the Clinical Division Heads and the appropriate Division Structures, communicate recommendations of the EZMQC to the members of the DoM.
- c) Through the Office of the Assistant Chair, Administration, ensure that all recommendations and relevant information are communicated to all members of the DoM.

5. EZMQC PROCEDURES AND OPERATIONS

Except as herein provided, the EZMQC will be the master of its own procedure.

- a) The quorum for all EZMQC meetings will be 50% + 1 of the voting members.
- b) All decisions will be made by a majority vote of the voting members in attendance excluding the Chair. If a tie vote results, the Chair will cast the deciding vote.
- c) Meeting minutes will be taken to ensure recommendations and pertinent background information is communicated to the members of the DoM.
- d) The EZMQC will meet at least four (4) times per year, quarterly, additional meetings to be held at the call of the EZMQC Chair.