

## Regional Department Medical Quality Committee Electrodiagnostics Terms of Reference

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### 1. **Authority:**

- 1.1 The Regional Department Medical Quality Committees (RDMQC) are established by the FHA Board of Directors upon recommendation of HAMAC consistent with s. 8.3.1.1 of the Medical Staff Bylaws and s. 2.3.3 of the Medical Staff Rules.
- 1.2 The RDMQCs are established by the Board as “Medical Staff Committees” for the purposes of s. 41(1) of the *Hospital Act* and, as such, meet the definition of “Committee” for the purposes of s. 51 of the *Evidence Act*.

### 2 **Accountability**

- 2.1 The Electrodiagnostics Committee, hereinafter known as the Committee, will exist as a collaborative joint Committee between the Department of cardiac services, the division of cardiology, the department of medicine and the division of General Internal Medicine.
- 2.2 Consistent with s. 8.3.3.1 of the Bylaws, the Electrodiagnostics Committee will submit their report jointly to both the Department of Medicine and to the Department of Cardiology. Each department will incorporate the report in their biannual quality submissions to HAMAC.

### 3 **Purpose:**

- 3.1 Consistent with the requirements of s. 41 of the *Hospital Act*, the RDMQC will...
  - (a) Evaluate, control and report on the clinical practice in a hospital in order to continually maintain and improve the safety and quality of patient care in the hospital, and
  - (b) Perform a function for the appraisal and control of quality of patient care in the hospital.
- 3.2 The Committee will assume the responsibility for quality assurance in regards to Electrodiagnostics within the Division of Cardiology and Division of General Internal Medicine. That is...

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*Regional Departments shall participate in a program of professional practice evaluation and structured quality improvement regarding the care provided to patients by its members through a limited review of the standards of quality regarding interpretation of Electrodiagnostics including ECGs, ambulatory ECGs (i.e. Holter monitors), exercise stress testing and pacemaker interrogation performed in Fraser Health Authority.*

- 3.3 Fact finding, investigation and problem assessment by review of specific cases, adverse clinical events and audits of the care provided by members of the Department when appropriate.
- 3.4 Provide advice to the respective Regional Department Heads and/or HAMAC with respect to the education of the Medical Staff and other health care professionals.

#### **4 Objectives/Functions/Roles:**

- 4.1 To conduct limited reviews of Electrodiagnostics reporting, with a view to establishing meaningful criteria by which care can be measured and compared.
- 4.2 To review complications in patient care including morbidity and mortality pertaining to Electrodiagnostics.
- 4.3 To conduct special audits of individual patient care cases and/or physicians as the Committee may determine is necessary in order to carry out its tasks or as requested by the HAMAC or other member of the medical administration. Written requests from individuals will also be considered by the Committee.
- 4.4 Where concerns relative to the medical management of cases are recognized by the Committee...
  - these concerns will be relayed through members of the Committee to the respective Department or Division Head who will be delegated to review the case within an acceptable timeframe; the member(s) of the medical staff involved shall be given the opportunity by the Department or Division Head to respond to any concerns in writing, or, at the option of the Department or Division Heads, by way of an oral discussion.

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- If the concerns raised by the committee involve the regional department head medical practice then the reviewer will be an executive medical director as per the Fraser Health policy.
- establish and maintain confidentiality with respect to the individual member(s) involved.

4.5 The Committee will adhere to the protocol for managing confidential quality assurance information set out in s. 5.4 of the Medical Staff Rules.

4.6 The Committee will review all cases required by the Canadian Council on Health Facilities Services standards.

4.7 The Committee may recommend to medical administration that outside hospitals, individuals or agencies be engaged to perform audits or reviews on its behalf.

### **5 Membership:**

- Regional Department Head of Cardiology or delegate
- Regional Department Head of Medicine or delegate
- Regional Division Head of Cardiology or delegate
- Regional Division Head of General Internal Medicine or delegate
- Cardiology Lead of Quality Committee
- 1-2 members each from the Division of General Internal Medicine and the Department of Cardiology
- Subcommittees established under the Committee will have 1-2 members each from the Division of General Internal Medicine and the Department of Cardiology
- Consulting members from the Electrophysiology Service in FHA may be invited to provide an expert opinion as deemed necessary as per the Regional Department Head & Regional Division Head (or delegates)

#### Non-Voting Members:

The Committee may invite staff from the Health Record Department and/or Decision Support Services to aid in documentation and or review as well as any other member of the Medical Staff on individual request.

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*NOTE: In any instance where a concern of the Committee involves a Committee member who has been involved in the medical management of the case being reviewed, that member may be excused from deliberations and afforded the opportunity detailed in item 4.0 of the functions above.*

**6 Appointment of Chairpersons:**

The Committee will be co-chaired by one representative of the division of Cardiology, as chosen by the Department Head, and one representative of the Division of General Internal Medicine, as chosen by the Regional Department Head.

**7 Subcommittees:**

7.1 Provision may be made at the discretion of the Committee for the establishment of permanent or temporary subcommittees which will assume responsibility for specific aspects of the Committee's mandate. This includes subcommittees for Electrodiagnostics including ECGs, ambulatory ECGs (i.e. Holter monitors), exercise stress testing and pacemaker interrogation.

7.2 The Subcommittee Leads will be appointed by the Committee with input from the Committee co-chairs.

**8 Committee Reports To:**

The Committee reports through the Cardiac Network to HAMAC and to the respective Department or Division.

**9 Frequency Of Meetings:**

The Committee shall meet at least six (6) times per year and at the call of the Chairpersons. Meeting dates and times will be established by the Chairpersons in consultation with the Committee members.

**10 Distribution Of Minutes:**

Minutes shall be kept of the meetings and deliberations and will be organized to ensure confidentiality. Minutes will be circulated to all Committee members and following approval of the Committee shall be sent to the Regional Department & Regional Division Heads.