


<p><b>Name of Policy:</b> <u>Performance Improvement Council</u></p> <p><b>Policy Number:</b> 3364-87-20</p> <p><b>Approving Officer:</b> Chief of Staff Medical Director</p> <p><b>Responsible Agent:</b> Medical Director</p> <p><b>Scope:</b> All University of Toledo Campuses</p>	 <p><b>Effective date:</b> 03/14/01</p>
<input type="checkbox"/> New policy proposal	<input type="checkbox"/> Minor/technical revision of existing policy
<input type="checkbox"/> Major revision of existing policy	<input type="checkbox"/> Reaffirmation of existing policy
<input type="checkbox"/>	<input type="checkbox"/>

(A) Policy statement

It is the policy of the University of Toledo Medical Center (UTMC) and its Medical Staff that a Performance Improvement Council will be appointed as defined below.

(B) Purpose of policy

To define the goals and objectives, composition, and responsibilities and duties of the Performance Improvement Council.

(C) Procedure

(1) Description

The Performance Improvement Council (PIC) is a coordinating body for performance improvement initiatives that supports the mission and strategy of UTMC.

(2) Goals and Objectives

The council's goal is to promote performance improvement (PI) and to achieve a new way of thinking, wherein employees, managers, and physicians own and collaborate in their work processes, seek improvement possibilities, implement them and communicate successes. Two important functions around which PI activities are organized include:

- (a) Patient Care Processes
- (b) Organizational Processes

(3) Composition

All staff and physicians are responsible for PI. The members of the PIC include physicians, hospital administrators, and managers. The PIC is co-chaired by the Medical Director and the Quality Administrator.

(4) Responsibilities and Duties

The PIC relies on the departments and committees to actively pursue opportunities for improvement. The council members conduct various activities to educate, coordinate, collaborate, communicate and celebrate PI, as follows:

- (a) Educate: The Performance Improvement Council identifies needs for education of staff and physicians and defines methods for disseminating new information about multidisciplinary projects, new outcomes or changes in PI tools, techniques or requirements.
- (b) Coordinate: The PIC members review selected Performance Improvement (PI) reports to maintain an ongoing knowledge of the current PI activities.
- (c) Communicate: Multiple methods are utilized for communicating to the organization and the Board, PI activities occurring throughout the hospital.
- (d) Celebrate: The council members promote and carry out celebration of University of Toledo Medical Center staff successes and efforts for improving processes and performance.

(5) Membership

The members of the PIC include employees, physicians, and managers. The Chief of Staff appoints four (4) physicians; the Medical Director appoints one (1) resident; and the Executive Director of the Hospital appoints three (3) hospital members. In addition, the Chief Nursing Officer, the Administrator for Risk Management, and the Director of Quality Management are permanent members of PIC.

(6) Meetings

The PIC will meet at least ten (10) times a year. Regular attendance and participation in PIC activities are required for continued membership in the Council. Staff from the Quality Management Department may serve as ad hoc and support staff as determined by the Director of Quality Management.

<p>Approved by:</p> <hr/> <p>Christopher K. Lynn, M.D. Chief of Staff</p> <hr/> <p>Ronald McGinnis, M.D. Medical Director</p> <hr/> <p>Date</p> <p><i>Review/Revision Completed by: Performance Improvement Council Medical Executive Committee</i></p>	<p><b>Policies Superseded by This Policy:</b></p> <ul style="list-style-type: none"><li>• <i>MS-020 Performance Improvement Council</i></li></ul> <p><b>Review/Revision Date: 11/19/03 08/09/06</b></p> <p><b>Next review date: 08/09/09</b></p>
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