Ambition: Mayo University Hospital will achieve excellence through securing meaningful patient engagement in service delivery from the bed side to the management table; driven by engaged staff from all disciplines and grades, who are empowered by a commitment of support from senior management, for continuous quality improvement

Mayo University Hospital: Governance for Quality Developments

Areas of Focus (primary Drivers) Actions (secondary drivers) Aim Measures Q1 what are we trying to achieve? Q3 what changes can we make that will result in improvement? Q2 how will we know that a change is an improvement? 1.1 Develop and approve HMT Terms of Approved HMT Terms of Reference 1 Identify current Reference (n=1) Number of approved Committee 2 structures 1.2 Review/approve Committee (facility Terms of reference (facility / clinical 1.0 Structures /clinically focused) Terms of Reference focused) \leftarrow Review current (n=17) 3 Number of approved Directorate structures 1.3 Develop and approve Directorate Teams team terms of reference Terms of Reference (n=5) Quantify (map) existing committees Aim: strengthen /review No of weekly HMT meetings held structures and 2.1 Hold weekly HMT meeting (0800-0900) Establish 5 No attending each HMT meeting (right 2.2 Use structured agenda for weekly HMT processes to support people) directorates and 2.0 Processes meeting (W1, W2, W3, W4) information flow on 6 No of scheduled written reports map wards, units, \leftarrow 2.3 Receive and discuss written reports at quality of care from the clinics, depts. to discussed at each HMT meeting each HMT meeting (four per week in No of actions from HMT minutes log directorates 7 bedside to the hospital rotation) noted as completed/overdue at each management team by 2.4 Complete and review action log at each Map reporting of meeting HMT meeting end Q1 2017 committees 8 Change in hospital wide KPIs (TBC) /directorates to HMT 3.1 Develop organisational charts and make 9 No of organisational charts displayed Develop agenda, available to all staff and public publicly 3.0 People minute, 3.2 Develop guidance for operational and نے 10 Staff understanding of their committee / service delivery accountability accountability/reporting arrangements directorate 3.3 Identify staff operational and service 11 Staff understanding of organisational reporting delivery accountability levels structures for quality and safety templates

Examely of the services are delivered and oversight in place to ensure that, person centred, safe and effective services are delivered