



ALBERTA PROVINCIAL STROKE STRATEGY (APSS)

Evaluation and Quality Assurance Committee (Pillar 4)

Terms of Reference



March 20, 2006

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TERMS OF REFERENCE

Context

The Alberta Provincial Stroke Strategy (APSS) is a *collaborative partnership* between all Nine Health Regions, the Heart and Stroke Foundation of Alberta, NWT & Nunavut and the Provincial Government. The APSS is designed to offer Albertans with province wide access to a high standard of evidence based stroke care.

Goal

The APSS places at the centre of its focus the best interests of persons at risk for and/or experiencing stroke, their families and caregivers. The APSS works to improve stroke care in Alberta by providing a coordinated, integrated and evidence based approach to stroke care.

Objectives

The principle objectives of the APSS are:

- To reduce stroke incidence in Alberta.
- To improve stroke care at all levels through out Alberta by implementing evidence based standards of care.
- To optimize recovery and quality of life for stroke survivors in all Health Regions.
- To reduce the financial burden of stroke in Alberta.

Guiding Principles

Members of the APSS are committed to the following principles:

- Inclusiveness
- Democracy
- Respect
- Professionalism
- Accountability
- Collaboration

Purpose

The APSS **Evaluation and Quality Assurance Committee (Pillar 4)** is a composite of healthcare professionals and/or community members with diverse backgrounds and areas of expertise related to stroke care. This committee is responsible for developing and implementing an effective strategy for ongoing outcome and process evaluation of the APSS as relates to Pillars 1, 2 and 3. This will involve close collaboration with the other advisory committees in the development of appropriate indicators to document and follow patient outcomes, impact of various aspects of the strategy, and cost effectiveness of the provincial strategy. This data will constitute the principle objective means of assessment of the APSS. Regional data will be an important source of information regarding opportunities for local improvement and goal setting.

Roles and Responsibilities

Include but are not limited to:

- providing comprehensive representation, leadership and direction for Pillar 4 of the stroke care continuum: Evaluation & Quality Assurance
- articulating and endorsing the goals and objectives of the APSS
- developing the strategic direction of Pillar 4, including determining needs, setting a vision, program planning and implementation strategies

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- developing annual action plans that include goals, objectives, activities, indicators of success, evaluation components, and resource needs
 - networking, collaborating and sharing information amongst all APSS Pillar Committees
 - acting as advocates for issues and recommendations arising from the strategy
 - providing written recommendations to the Alberta Stroke Council regarding specific implementation strategies for evaluation and quality assurance measurement
 - providing written report of the major findings and recommendations of the APSS to the Alberta Stroke Council

Membership of the Committee

- In addition to the Chair, there shall be no more than twenty five (25) members on the committee.
 - First priority of committee composition will be to bring together as many *experts* as deemed necessary and beneficial to developing an authoritative, evidence based set of recommended guidelines for Pillar 4.
 - Where possible, committee composition shall reflect equitable representation within the APSS *collaborative partners* (i.e. HSFA, Nine Health Regions and Government); in addition, representation may be sought from appropriate Community Sector Groups (i.e. interest groups, business community etc).
 - There should be a lay person representative from the community, possibly a stroke victim.
 - Health region representatives shall be members of their respective Regional Stroke Steering Committee to facilitate communication and information flow between the Pillar and regional stroke evaluation activities
- Representatives need to have the knowledge, experience and/or authority required to fulfill the responsibility of the Committee (Pillar).
- Committee composition should reflect a multidisciplinary perspective and comprehensive approach (i.e. health promotion and disease prevention, acute care and community focused).
- Membership will vote on the appointment of a chair and co chair. It is strongly recommended that one of these two positions be held by a clinical stroke specialist. In addition, it is recommended that the chair and co chair reside in two different health regions and/or belong to different organizations. The term of the Chair shall be the duration of the Alberta Provincial Stroke Strategy (approximately 2 years). The Chair shall sit as an ex-officio member of the Alberta Stroke Council.
- Committee may ask other stakeholders or external advisors to attend the meetings as needed to provide information or expert advice, as deemed necessary by the board.
- Pillars 1 to 3 should have non-voting representation on Pillar 4 to establish immediate communication between the implementation committees and the evaluation committee.

Accountability

- The Committee is accountable to the Alberta Stroke Council.
- Recommendations of the Committee will be provided in the form of a formal written report to the Alberta Stroke Council for their consideration. Recommendations, proposals and/or initiatives forwarded to the Alberta Stroke Council will be considered within available funding.
- The Committee may only give advice or release information under the authority of the Alberta Stroke Council.

Meetings

- The committee shall meet directly at least twice each year.

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- Additional meetings (teleconference or other) may be called at the discretion of the Chair.
 - A quorum for meetings is fifty percent (50%) plus one (1)
 - Procedurally, the committee will utilize 'Robert's Rules of Order'.

Changing or Amending Terms of Reference

- The Terms of Reference will be reviewed annually.
- Any alteration, amendment or addition to the terms of reference is at the discretion of the committee and must be adopted at a meeting of the committee.
- Terms of Reference must be approved by the Alberta Stroke Council.