

Quality and patient safety in healthcare strategic planning

[Business](#), [Strategic Management](#)



The quality and patient safety in healthcare is crucial to the strategic planning process because it's a core value significant to accomplishing the long-term mission of our organization. The Strategic Planning Committee assists the board with overall responsibilities for the organization's mission, vision, and strategic direction. This cannot be done without safety and quality measures. This subcommittee will handle operations to advance the safety and quality of patient care. A benefit of this group will also be the collection, analysis, and aggregation of patient safety data to develop insights into practical methods to improve quality and safety.

Patient care should decrease risks and harm to users and providers, avoiding injuries, and reducing errors. Healthcare should be based off evidence and knowledge, and with cultural sensitivity. Healthcare services should be safe, timely, and with reduced wastes that minimize resources. Patient care should never have bounties like gender, race, ethnicity, location, or financial status. There should be a people-centered focus that is appreciative of the surrounding cultures and communities.

The patients we serve overall as an organization is a reason; we are all here in these positions. We have a desire to improve healthcare overall and have a passion for helping people. Each subcommittee member must be carefully selected to assist management in recognizing critical strategic issues ahead for the organization. Analysis of alternative strategic options must be done with research and a dedicated team member.

Healthcare quality and patient safety Members

1. Executive Officer- This member is designated to provide leadership and direction to the related committee's affairs, regularly review existing activities, and recommend improvements or eliminate those that do not advance the mission of the committee. I will also approve all communication and have ultimate responsibility for the subcommittee.
2. Director – Diversity and Inclusion- This person will serve as a point of contact for issues relating to diversity, inclusion, and equity. When dealing with patients, we will be dealing with different types of people from differing backgrounds. This person will be responsible for advancing, promoting, and cultivating diverse, inclusive, and equitable decisions. It is imperative to represent other races, religions, cultures when implementing best practices.
3. Director – Patient safety- Patient safety is the foundation for this subcommittee, so it's essential we designate a person to advocate for the patient alone, not the provider's viewpoint. A specific individual to represent the views and the rights of postdocs regarding health, well-being, family needs, housing, and safety. This person will head any evaluations of patient safety metrics, implementation of safe practices, and research a variety of patient safety issues that will including medical malpractice.
4. Director – Clinical Research Manager- Clinical Research Manager- There will need to be facts to create change and improvement and make decisions. This person will oversee the activities such as persistent medication management and our approach to hospital-acquired conditions and never events. An individual is needed to evaluate the

quality and safety of medication use for patients with chronic diseases, the establishment of pharmacy-based disease management programs, and the development of quality improvement systems for pharmacy services.

5. Treasurer and Secretary- We will need to stay organized as a group. We are dealing with sensitive information as well as data. This person will be the primary administrative member, maintain and present all financials related to the committee, takes meeting minutes, maintains and prepares records, deadlines, mailings, and directory.
6. Researcher Data Science Officer- There will be a lot of research and analyzing of data, this individual will oversee managing, organizing, securing, and querying all data and for research related to our projects. This person will lead the researcher development initiatives, maintain IT utilization to measure and improve health care quality. Create surveys and KPI data points for analyzation. Provide dedicated research development and impact support to research, prepare, and present all data visualization reports.
7. Representation and Policy Officer- This person is vital because they will have the primary focus on policymaking, long-range planning, and coordination with other activities and conducts data analysis, writes administrative rules and amendments. Head the implementation of new policies, coordinate legislative initiatives, oversee the policy and rules development for the group, including formulation and revision, ensuring compliance with state and federal policy and law, working

with management, staff, and stakeholders, in development and implementation.

8. Standards and Safety Officer- This person is essential because we will need to obtain views and feedback, and someone will need to liaise with the Researcher Data Science Officer. Making sure we are following all laws and regulations while conducting research and managing data.
9. Communications and Marketing Officer- The boards, stakeholders, and strategic planning committee will want to be kept up to date with the progress we are making as well as the projects we are working. This person will prepare and distribute all communications and marketing literature such as newsletters, updates, reports, social media. It's also essential to maintain community engagement while trying to encourage quality care improvement.
10. Events Chair- For the group to function and promote communication and touchpoint meetings, this person will handle the event responsibilities. With the primary responsibilities will be to organize and plan all events, including all sessions for the subcommittee and any welcome functions. Also, maintain a list of events and statistics throughout the year.

References

- Agency for Healthcare Research and Quality. (2013, August 15). Patient Safety Organizations Program. Retrieved July 17, 2019, from <https://www.ahrq.gov/cpi/about/otherwebsites/pso.ahrq.gov/index.html>

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