



Clinical Practice Morbidity Mortality Review Committee (2016)

St John of God Bunbury Hospital

TERMS OF REFERENCE

GOVERNING BODY

The Clinical Practice Morbidity Mortality Review Committee will function under the auspices of St John of God Health Care Inc trading as St John of God Hospital Bunbury which provides health care services through the authority of the Divisional CEO. The governing body is the CEO of St John of God Bunbury Hospital who has overall responsibility for the operations of the hospital.

PURPOSE

The Clinical Practice Morbidity Mortality Review Committee has been established to monitor and review clinical services in order to identify opportunities for improvement within the service

FUNCTIONS

The functions of the Clinical Practice Morbidity Mortality Review Committee in accordance with Section 7(2) (c) of the *Health Services (Quality Improvement) Act 1994* include:

- **Assessment and Evaluation –**
- To assess and evaluate the quality of health services, including the review of clinical practices.
- To conduct other quality activities or investigations as required time to time. These activities may include monitoring of performance indicators where there is a trend of significance, clinical audit including medical record audit, morbidity and mortality review and peer review and limited adverse event review.
- To ensure that in-depth analysis or root cause analysis for adverse events whose level of risk is classified as critical or Extreme A/B utilising the St John of God Health Care Risk matrix is performed and actions are taken to remedy those situations.
- **Reporting and Recommending –** As per sections 8 and 9 of the Quality Improvement Act 1994, to report and make recommendations to its governing body, the Medical Advisory Committee, Clinical Corporate Governance Committee and other relevant committees concerning health services. Reports will comply with the Act and the requirement to provide de- identified information only; and

- **Monitoring and Implementation** - to monitor implementation of approved recommendations.

MEMBERSHIP

The following positions form the core membership of the Clinical Practice Morbidity Mortality Review Committee:

POSITION
Surgical Representatives- Dr Justin Johnston (MBBS FRACS) - Dr Michael Pether(MBBS FRACS)
Physician Representatives - Dr Peter Terren (MBBS FRACP) - Dr Stephen Hinton (FRACP, FCPSA, MBBCh) - Dr Carolyn Masarei (MBBSMRCP FaCFhPM PGDipMRD(PC))
Obstetrician Representative – - Dr Tom Cottee (MBBS (Syd) FRANZCOG Dip Obstetrics RACOG)
Orthopaedic Representative – Dr Tim Fletcher (FRACS (Ortho), MB BCH Belfast, MBBCH, AMC Cert, AMC)
General Practitioner Representative - Dr Ivan Janz (MBBS FRAGP)
Chief Executive Officer - Mr Mark Grime(RN, BN, GAICD, Grad Cert CCL)
Clinical and Corporate Risk Management Manager – Mrs Alexandra McMillan (BA Nursing, PG Dip Hospital Policy and Management; GAICD)
Ward Representative- Kerry Smith Clinical Nurse (Dip. Nurse, RN)

The Clinical Practice Morbidity Mortality Review Committee may call upon experts from time to time to assist them to carry out the functions of the committee and they will be made aware of their responsibilities and obligations in respect to Qualified Privilege.

Members will be appointed by appropriate qualification and expertise.

The Minister for Health will be advised of any changes to the constitution of membership, and these changes will be documented and approved by the governing body

CHAIR

The term of the Chair will be for a period of 3 years and will be a medical practitioner. The Chair may renominate for a subsequent 3 year term with a maximum term of 6 years

Committee Membership

New membership will be through nomination and selection by presiding members of the committee on an as needs basis or self nomination. The Minister will be notified of new membership on an annual basis.

QUORUM

A quorum comprises 50% of appointed members of which four will be medical representatives.

FREQUENCY

The *Clinical Practice Morbidity Mortality Review Committee* will meet monthly with a minimum of 10 meetings per year

REPORTING STRUCTURE AND PROCESS

In compliance with Regulation 8 of the *Health Services (Quality Improvement) Regulations 1995*, the *Clinical Practice Morbidity Mortality Review Committee* will provide an annual report to the governing body regarding activities (whether referred internally or by the governing body) or at such earlier time as so directed by the governing body.

In compliance with Regulation 9 of the *Health Services (Quality Improvement) Regulations 1995*, the *Clinical Practice Morbidity Mortality Review Committee* will make available a report to the public at least once in each period of 12 months.

In compliance with Regulation 10 of the *Health Services (Quality Improvement) Regulations 1995*, the *Clinical Practice Morbidity Mortality Review Committee* will report annually to the Minister for Health.

The *Clinical Practice Morbidity Mortality Review Committee* will make available reports to the *Medical Advisory Committee*, the *Clinical and Corporate Governance Committee* and other committees as appropriate from time to time. These reports will comply with section 8 and 9 of the Quality Improvement Act. Only de-identified information will be contained in these reports.

INFORMATION MANAGEMENT

All members of the *Clinical Practice Morbidity Mortality Review Committee* will comply with the Information Management Policy- Qualified Privilege Committees BUHC0147 (attached).

RECORDING OF PROCEEDINGS

Where practicable, the agenda together with reports and documents that relate to the *Clinical Practice Morbidity Mortality Review Committee* will be forwarded to members in sufficient time to enable consideration prior to meetings.

Accurate Minutes will be kept of each meeting of the *Clinical Practice Morbidity Mortality Review Committee*. The Minutes of a meeting shall be submitted to committee members for ratification at the next subsequent meeting of the Committee. When confirmed, the Minutes shall be signed by the Chairperson.

OBLIGATIONS OF COMMITTEE MEMBERS AND PERSONS ASSISTING THE COMMITTEE

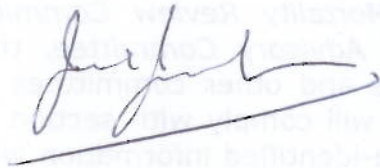
All members of the *Clinical Practice Morbidity Mortality Review Committee* will:

- receive a copy of the *Health Services (Quality Improvement) Act 1994*;
- receive a copy of the *Health Services (Quality Improvement) Regulations 1995*;
- receive a copy of the Standards accompanying the *Health Services (Quality Improvement) Act 1994*;
- comply with the Committee's terms of reference;
- declare conflicts of interest at the commencement of each meeting; and
- Be prepared to sign a declaration indicating they have read, understand and agree to comply with the legislation.

All persons assisting the *Clinical Practice Morbidity Mortality Review Committee* will:

- Be prepared to sign a declaration indicating they have read, understand and agree to comply with the legislation.

Signature



Chairperson (Name) ITJounsh
Chair Clinical Practice Morbidity Mortality Review Committee

Date 5/5/16