



WCDHB Maternity Quality and Safety Advisory Group Terms of Reference

- 1. Purpose**

The West Coast District Health Board (WCDHB) Maternity Quality and Safety Advisory Group will ensure that the WCDHB initiates and maintains quality improvement processes which align with the Maternity Quality and Safety Programme. The group will have functional relationships with maternity providers, professional groups and non-governmental groups, as required.
- 2. Functions**

The functions of the WCDHB Maternity Quality and Safety Advisory Group are to:

 - 2.1 Review significant trends and individual adverse events that are identified through the incident report review meetings and monitor the outcome of actions taken.
 - 2.2 Identify changes made to clinical practice to reduce future risk and improve clinical standard and where relevant, initiate further investigation of clinical safety and quality issues.
 - 2.3 Make recommendations for audit to the Clinical Quality Improvement Team.
 - 2.4 Make recommendations for ongoing development of policies and guidelines for maternity and obstetric care.
 - 2.5 Ensure that systems are in place to provide a safe environment for both women and staff.
 - 2.6 Ensure the instigation of actions designed to improve patient and staff safety.
 - 2.7 Develop a communication strategy to inform stakeholders of initiatives and outcomes.
- 3. Standing Orders**
 - 3.1 Agenda and papers to be circulated by mail/email at least five (5) business days prior to meeting.
 - 3.2 Material tabled at the meeting will be for information or discussion and recommendations will be made where appropriate.
 - 3.3 Minutes and items to be actioned from the previous meetings will be forwarded to the membership by email within 10 business days.
 - 3.4 The Chairperson shall be responsible for keeping the final copy of the Terms of Reference and meeting minutes.
 - 3.5 There will be a maximum time allocation of 1 ½ hours for the meeting unless otherwise agreed by the committee.
- 4. Powers**

The WCDHB Maternity Quality and Safety Advisory Group will have the power to:

 - 4.1 Seek advice from external experts.
 - 4.2 Consult appropriately in order to obtain information relevant to the functions of the advisory group.
- 5. Chairperson**

To be appointed by the WCDHB Maternity Quality and Safety Advisory Group at the commencement of the financial year.
- 6. Membership**
 - 6.1 The membership of the WCDHB Maternity Quality and Safety Advisory Group will include the following members:

- Quality Facilitator
- Director of Nursing and Midwifery
- Clinical Midwife Manager
- Senior Medical Officer, Obstetrics and Gynaecology
- Lead Maternity Carer representative
- Lactation Consultant
- Clinical Nurse Manager, Paediatrics
- Consumer representative
- Maori representative
- Pacific Island representative
- Allied Health representative (Maternity Social Worker)
- Planning and Funding representative
- Poutini Waiora representative
- The Haslett Partnership: Kawatiri Midwife/Manager
Kawatiri Quality and Administrator
- Maternity Educator

- 6.2 It is expected that members will arrange a proxy to attend meetings where they cannot attend themselves. Each member is responsible for ensuring the proxy is adequately briefed prior to the meeting and that relevant information and actions are communicated back to the committee member.
- 6.3 Other positions or individuals may be co-opted to meetings as required.

7. Voting Rights of Members

- 7.1 Decisions should be reached where possible by consensus. When this is not possible, decisions may be carried by a simple majority of voting members present and a minority opinion will be recorded.
- 7.2 Members must declare a conflict of interest to the Chairperson as soon as they are aware of a conflict or the potential for a conflict. Ideally this should occur at the commencement of the meeting. The member must disclose the nature and extent of the interest to the committee for the record and refrain from voting.
- 7.3 Co-opted positions or individuals do not form part of the membership and therefore do not have voting rights, nor affect the quorum.

8. Other Recipients of Agendas & Minutes

- General Manager Grey | Westland
- Director of Nursing and Midwifery
- Head of Obstetrics and Gynaecology
- Clinical Manager, Primary Health Organisation

9. Quorum

A quorum will consist of six voting members.

10. Meetings

The committee will meet monthly, on the second Wednesday of each month.

11. Accountability

Through the WCDHB Clinical Board and through the CDHB & WCDHB Maternity Clinical Governance Committee.

12. Reporting Mechanism

A quarterly written report will be provided by the Chair to the WCDHB Clinical Board; the Clinical Quality Improvement Team; and the CDHB & WCDHB Maternity Clinical Governance Committee.
The report will also be copied to the membership and tabled at the next meeting.

13. Performance Indicators

The following measures will monitor the performance of the WCDHB Maternity Quality and Safety Advisory Group:

- The objectives set out in the WCDHB Maternity Service Quality Plan will be implemented within the set timeframes.

13.Sub-Committees

May be established as required to complete projects.

14. Functional Relationships

The WCDHB Maternity Quality and Safety Advisory Group will have functional relationships with the following committees:

- WCDHB Clinical Board
- Clinical Quality Improvement Team
- Incident Review Group
- CDHB and WCDHB Maternity Clinical Governance Committee