

## **General Guideline 4**

### **INTERDISCIPLINARY PERINATAL COMMITTEES**

*“Each agency providing maternal/newborn care should have an advisory committee; regional programs should have a community-based, multidisciplinary advisory group, whose role it is to provide leadership for successful care and programs. Parents must be involved in this group in a meaningful way. Group members would include maternal and newborn health care providers, parents, hospital representatives, community or public health representatives and representatives from local support groups”*

*Family-Centered Maternity and Newborn Care, National Guidelines, Health Canada 2000.*

This guideline is designed to facilitate the formation of Interdisciplinary Perinatal Committees at the local and/or regional level. It outlines the suggested terms of reference for these committees.

#### **1. OBJECTIVES**

- To promote and support optimal perinatal health within/between agencies or in a defined geographic area by providing a forum for coordination of perinatal care and services.

##### **1.1 SUPPORT AND DEVELOPMENT OF PERINATAL SERVICES/PROGRAMS**

- To support consistent approaches to perinatal care, independent of where the care is delivered.
- To develop common policies, procedures, and practices related to the provision of perinatal care. These should be founded on clinical practice guidelines, such as those published by established professional associations.
- To develop a common approach for the pregnant woman/mother and her family’s education.

##### **1.2 COORDINATION AND INTEGRATION OF PERINATAL SERVICES/PROGRAMS**

- To standardize and facilitate communication between care providers, hospital, and community services.
- To standardize teaching and practice principles across a continuum of services.

##### **1.3 EVALUATION OF PERINATAL SERVICES/PROGRAMS**

- To evaluate perinatal care and perinatal care programs through continuing quality assurance activities. These should include as a minimum, perinatal mortality and morbidity review. Benchmarking in BC may be facilitated using the BCRCP Perinatal Reporting Tool.

## ***Interdisciplinary Perinatal Committees***

### **1.4 EDUCATION**

- To support continuing professional knowledge development by planning of continuing education opportunities.
- To support a wide range of educational activities for parents and families based on stage appropriateness.

### **1.5 COMMUNICATION AND COLLABORATION**

- To provide a forum for communication and to collaborate with primary, community, and hospital perinatal care providers in a defined geographic area.

## **2. MEMBERSHIP**

### **2.1 CORE MEMBERSHIP (ALPHABETICAL)**

- Administrative representative
- Doctors - obstetrician/perinatologist, pediatrician/neonatologist, family practitioner
- Midwife (where applicable)
- Nurses – public health, maternity, nursery, labour and delivery, operating room

### **2.2 OTHER KEY PERINATAL TEAM MEMBERSHIP (WHERE APPLICABLE)**

- Community health representative, parenting groups,
- Dietitian
- Doula/labour support groups
- Infant development worker
- Lactation consultant, breastfeeding groups
- Pregnancy outreach programs
- Prenatal educator
- Resident
- Social Worker
- Other perinatal related professionals e.g. pharmacist, anesthesiologist

## **3. ACCOUNTABILITY**

- Health Authority
- Hospital Administration
- Medical / Nursing/ Professional Advisory Committees

## **4. FREQUENCY OF MEETINGS**

- At least quarterly