

# Provincial Perinatal and Maternal Mortality and Morbidity Review Committee

# TERMS OF REFERENCE

#### 1.0 PURPOSE

The Provincial Perinatal and Maternal Mortality and Morbidity (PPMMM) Review Committee is designated in British Columbia (Regulation 363/95, paragraph (c) of 51(1) of the Evidence Act) for the purpose of quality review of perinatal, neonatal and maternal morbidity and mortality. Through that review, the Committee will identify provincial issues and will make recommendations regarding strategies to address those concerns.

# 2.0 AUTHORITY:

- 2.1 The Provincial Perinatal and Maternal Mortality and Morbidity Review Committee is authorized to do this review through an Order in Council dated 27 January 1998, within the province of British Columbia; reconvened in 2002.
- 2.2 The Committee will create regular reports available to the Health Authorities summarizing and analyzing perinatal, neonatal and maternal mortality and morbidity data provided by the Health Authorities in relation to provincial data as part of the health authority quality assurance program.
- 2.3 The Committee will produce provincial perinatal, neonatal and maternal mortality and morbidity reports on a regular basis.
- 2.4 The committee is accountable to the Perinatal Services BC Steering Committee and should have a close, regular link with the surveillance team to identify trends and risk factors for morbidity and mortality.

#### 3.0 MANDATE:

- 3.1 To facilitate local perinatal and neonatal mortality review being performed on a regular basis throughout the province.
- 3.2 To develop guidelines for perinatal, neonatal and maternal mortality review.
- 3.3 To collect data and conduct analysis for a regular perinatal, neonatal and maternal mortality report.
- 3.4 To collaborate with the health authorities in order to collect data and provide provincial consultative services to health care providers, perinatal mortality and morbidity committees, and health authorities.
- 3.5 To participate in the production of a national report on maternal mortality.
- 3.6 To study, investigate, evaluate and report on the quality of care provided by the community of perinatal care providers.
- 3.7 To establish priorities related to patient safety and quality.
- 3.8 To support quality improvement projects that address identified processes and that improve outcomes throughout the province.

#### 4.0 MEMBERSHIP

Organization	Name
First Nations Health Authority, Women's Health	Dr. Unjali Malhotra
Coroners Service of BC	Carla Springinotic
Division of Family Practice	Dr. Ashnoor Nagji
PSBC Medical Advisor - Perinatology, PPMMMRC Chair	Dr. Sayrin Lalji
Neonatology Representative	Vacant
Pediatric Representative	Dr. Deepak Manhas
PSBC Provincial Director, Surveillance and Research	Ms. Amy Hobbs
PSBC Provincial Executive Director	Dr. Tamil Kendall
Obstetrician/Gynecologist, PPMMMRC Member-at-Large	Dr. Jan Christilaw
College of Midwives of BC	Ms. Amy Braunstein
College of Registered Nurses of BC (Neonatal)	Ms. Sarah Rourke
College of Registered Nurses of BC (Obstetrics)	Ms. Melanie Basso
College of Physicians and Surgeons of BC	Dr. J. Galt Wilson
Fraser Health, Obstetrician/Gynecologist (MFM)	Dr. Kirsten Grabowska
Pathologist with Expertise in Perinatal Pathology	Dr. Anna Lee
Interior Health, Obstetrician/Gynecologist	Dr. Shiraz Moola
Interior Health, Neonatologist	Dr. Jill Boulton
Ministry of Health, Women's and Maternal Health, Population and Public Health	Dr. Michelle Barros Pinheiro
Northern Health, Family Practice Physician, Maternity Care	Dr. Bill Kingston
Provincial Health Services Authority, BCW, Obstetrician/Gynecologist	Dr. Petra Selke
Provincial Health Services Authority, BCW, Internist,	Dr. Jayson Potts
Obstetrical Medicine	
Vancouver Coastal Health, LGH, Obstetrician/Gynecologist, Member of Local PMR	Dr. Carolyn Donnelly
Island Health, Nanaimo, Obstetrician/Gynecologist	Dr. Jeffrey Somerville
Interior Health, Medical Health Officer, Public Health and Prevention Medicine	Dr. Sue Pollock

4.1 The Order in Council is very specific in offering Section 51 protection to those individuals named under the regulation or to those individuals requested by the Chair(s) to participate in specific enquiries or meetings.

## 5.0 MEETINGS

- 5.1 Meetings will be held at the call of the chair(s).
- 5.2 Minimum quarterly.
- 5.3 Chair(s) will ensure scheduling of meetings and the distribution of agenda.
- 5.4 A majority of Committee members (including the Chair(s)) shall constitute a quorum.
- 5.5 Decisions are made through consensus. If consensus cannot be reached, decisions will be made through voting with a simple majority of those present.

## 6.0 DOCUMENTATION PROTOCOL

- 6.1 Documents prepared for the Committee and at the request of the Committee are protected under Section 51 of the Evidence Act.
- 6.2 The maintenance of the minutes, agenda, and other documentation related to the Committee is the responsibility of the Committee Chair(s).
- 6.3 All action items are to be brought forward at subsequent meetings. It is the responsibility of the Committee to keep a bring-forward list. It is the responsibility of the Chair(s) to ensure follow-up takes place for all action items.