

Morbidity and Mortality Committee(Quality Committee)-Terms of Reference

Introduction

Morbidity and mortality (M & M) rounds/meetings/conferences were first introduced in the early 1900's in surgical departments as a cornerstone of medical education. Since then, M&M rounds have grown to focus on patient safety and quality initiatives. Bal et al (2014) recommend that they should identify events resulting in adverse patient outcomes, foster discussion of adverse events, as well as identify and disseminate information gained through the review process.

Objectives of the M&M rounds:

1. identify medical errors
2. improve patient care by implementing preventative strategies for further errors
3. review medical literature related to medical errors and medico-legal issues
4. highlight opportunities for research in Quality Improvement

Purpose

This subcommittee will function under the section 51 of the Evidence Act.

Once a nurse practitioner at Providence Health Care identifies an M&M case, the Quality Committee may or may not be responsible for ensuring recommendations resulting from the case presentation and discussion are followed up on.

Membership

The Morbidity and Mortality Committee will consist of the Nurse Practitioner Department Head, all Providence Health Care Nurse Practitioners and will be led by a member of the Quality Committee. If applicable, other health care professionals involved in the case may be invited to the presentation.

Documentation/Reporting

The Quality Committee will keep records of attendance, power point presentation of the case and a record of decisions and recommendations made as a result of the cases and issues reviewed. The NP involved in the case will provide a written summary/report to the Quality Committee on the proposed actions to be undertaken after the presentation (including time line for follow up) within 2 weeks.