

Quality Improvement Committee Annual Report Proforma

ANNUAL REPORT TO THE PUBLIC
ON
QUALITY IMPROVEMENT ACTIVITIES UNDERTAKEN OR OVERSEEN
BY
PAEDIATRIC MEDICINE QUALITY IMPROVEMENT COMMITTEE

Please send completed reports to:
Dr Brian Lloyd
Chief Medical Officer
Department of Health
PO Box 8172 Perth Business Centre
Western Australia 6849

If you require any further information, or have any queries, please contact the Office of Safety and Quality in Health Care on 9222 4080.

Please note: The information you provide in this form must not identify, directly or by implication, any individual health care provider or receiver.

Contact details of person providing the report:

Name: ...Dr Paul Carman

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Signature:

1. Name of Committee. **Paediatric Medicine Quality Improvement Committee.**
2. Name the health care facilities that contribute to this Committee. **Princess Margaret Hospital for Children**
3. Give a brief description of the purpose of Qualified Privilege including the balance of the public interest in access to information and encouragement of participation by health care professionals in quality assurance.

Qualified privilege allows clinicians to participate in this committee and openly discuss identified and sensitive information without fear of the litigation. In order for it to function effectively to critically review the activities of PMCCU under its Terms of Reference it will be necessary for there to be restriction on disclosure of some information compiled by the committee in the performance of its function. When there is an instance of a parents complaint about the specific care of their child they are furnished with a complete response in relation to this. They are made aware if the complaint has been dealt with by the Quality Improvement Committee and the outcomes of that review which include the Committee's response to the MAC. In order for such reviews to occur where there is reasoned and considered discussion within the committee it is necessary for the details of that discussion to be restricted (in the public interest) to enable the Committee to function effectively. This does not prevent a family receiving an appropriate response to any issues which have been raised but it does mean that clinicians involved in the Committee can discuss relevant matters in an appropriate forum.

4. Describe the main functions of the Committee.
 - **Review clinical incidents and near miss reports to identify risk**
 - **Review clinical risk data to develop processes that improve patient care and safety**
 - **Establish effective and efficient system changes to improve patient outcomes**
 - **Monitor and evaluate changes to clinical practice to ensure outcomes are achieved**
 - **Review individual clinical cases where an adverse outcome has occurred to determine factors contributing to the event**
5. Attach the Terms of Reference (TOR) and any proposed changes to the TOR.

6. Describe the categories of membership of the declared Committee.
- **Medical Staff**
 - **Nursing Staff**
 - **Pharmacy Staff member**
7. a) What services have been assessed and evaluated by the committee?
- **Adverse/Serious Events Monitoring**
 - **Clinical Indicators**
 - **Clinical Guidelines**
 - **Clinical Pathways**
 - **Audit QA Activities**
- b) What action has been taken as a result of the assessment and evaluation?
- Appropriate notification of Medical Advisory Committee has occurred on a monthly basis by de-identified reports. Issues raised by the committee which have potential whole of organisation impact are referred to the Medical Advisory Committee whereas changes at a more local level ie within the Directorate are enacted by the PMCCU Quality Improvement Committee.**
- c) What were the results of the action and the lessons learnt (if known at the time of producing report)?
- There is a need for regular feedback from the Medical Advisory Committee on the outcome of matters referred to it for consideration.**
8. Attach a summary of the information management policy.
- **Members of the Committee are aware of and comply with the requirements of the Health Service (Quality Improvement) Act 1994 regarding the disclosure of information.**
 - **Minutes of the Committee are stored in a secured place and access is limited to the members of the Committee.**
 - **Reports provided to the Medical Advisory Committee contain de-identified information only.**