



## **TEMPLATE**

### **TERMS OF REFERENCE**

**Department (STATE NAME OF DEPARTMENT/SERVICE/SITE)**  
**Morbidity & Mortality Committee**

**REPORTS TO:** Department Parent Committee and DMAC Quality Committee

**CHAIRPERSON:**

**MEMBERSHIP:** TBA

---

#### **I. PURPOSE**

The **Department (STATE NAME OF DEPARTMENT/SERVICE/SITE) Morbidity & Mortality Committee** is a hospital committee established for the purpose of quality assurance, and specifically to study and evaluate medical or hospital care or practice within the **Department (STATE NAME OF DEPARTMENT)**.

The **Department (STATE NAME OF DEPARTMENT/SERVICE/SITE) Morbidity & Mortality Committee** is part of the Capital District Health Authority's (Capital Health) quality improvement program. The information and documents generated by the **Department (STATE NAME OF DEPARTMENT/ SERVICE/SITE) Morbidity & Mortality Committee** are used for the purpose of education or improvement in medical or hospital care or practice.

#### **II. FUNCTIONS**

1. Collect and review information to identify issues related to quality of care and services;
2. Maintain a liaison with the following division-level M&M Committees: for those departments that have divisions, list each division's M&M committee
3. Maintain liaison with the **Department's (STATE NAME OF DEPARTMENT SERVICE/SITE) Executive Council**
4. Upon identification of deficiencies in care and standards that are process or structure related, make recommendations within the department to address issues. If the issue cannot be addressed at the department level, or if the issue has implications beyond the department, then the committee should refer it to the **District Medical Advisory Council – Quality Committee (DMAC-QC)** or other committees as appropriate;
5. Maintain a record of all committee activities. Provide a statistical report the number of cases reviewed, recommendations identified, and action, to the both the parent committee of the service/department, to Quality/Risk Management and to **DMAC-QC**;



## TEMPLATE

6. Maintain department-wide accessibility and awareness of the committee. Review the committee mandate;
7. The **Department's (STATE NAME OF DEPARTMENT SERVICE/SITE) Executive Council and the DMAC-QC** is responsible for a) overseeing the implementation of recommendations; b) evaluating effectiveness of recommendations; and c) annual review of recommendations to identify themes and trends leading to quality improvement of patient care and services.

### III. NATURE & SCOPE

1. Review specific department-related information to identify recommendations related to quality of care and services within the department;
2. Recommendations related to the process that may have resulted in mortality or morbidity may be reviewed by the committee;
3. Other issues brought to the committee as required;
4. Minutes shall be distributed to all committee members. Master copies of the minutes and any correspondence related to the committee are maintained by the **Department (STATE NAME OF DEPARTMENT SERVICE/SITE) Morbidity & Mortality Committee**; and,
5. The **Department (STATE NAME OF DEPARTMENT SERVICE/SITE) Morbidity & Mortality Committee** will meet at least 4 times per year.

### IV. LIMITATIONS

1. While the **Department (STATE NAME OF DEPARTMENT SERVICE/SITE) Morbidity & Mortality Committee** will review cases with morbid implications, deaths, and may review cases identified through patient complaints, it is NOT a forum for review of patient complaints;
2. The **Department (STATE NAME OF DEPARTMENT SERVICE/SITE) Morbidity & Mortality Committee** will not provide feedback or information to patients, families, or their agents. Such requests lie outside the mandate of this committee, and will be coordinated by the **Division Head** in counsel with the **Department Head**;
3. The **Department (STATE NAME OF DEPARTMENT SERVICE/SITE) Morbidity & Mortality Committee** is not a disciplinary committee.

### V. PROCESS FOR REVIEW

1. Cases are identified by members of the division, department, occurrence reporting process, patient representatives, or others or by the **DMAC-QC**;



## Capital Health

## **TEMPLATE**

2. If a case reviewed by the **Department (STATE NAME OF DEPARTMENT SERVICE/SITE) Morbidity & Mortality Committee:**
  - a. Reveals only a single division or department level issue, with no broader Capital Health issues (**e.g.** issues touching on any other division or department), that committee shall enact their solution locally, and report the case to the **Department's (STATE NAME OF DEPARTMENT SERVICE/SITE) Executive Council** for documentation only; or,
  - b. Reveals a broader Capital Health issues (**e.g.** touching on any other division or department, or with the potential to impact any other division or department), that case shall be referred to the **Department's (STATE NAME OF DEPARTMENT SERVICE/SITE) Executive Council** with a report of the review, and suggestion as appropriate to the **DMAC-QC**.