# Victorian Maternity and Neonatal eHandbooks

## Terms of reference

### Governance Committee (GC)

### Background

#### Organisational context

Safer Care Victoria (SCV) is the peak state authority for leading quality and safety improvement in healthcare. Safer Care Victoria oversees and supports health services to provide safe, high-quality care to patients every time, everywhere. Created in response to the recommendations within the report [*Targeting Zero: the review of hospital safety and quality assurance in Victoria*](https://www.dhhs.vic.gov.au/publications/targeting-zero-review-hospital-safety-and-quality-assurance-victoria)*,* SCV works to eliminate avoidable harm and strengthen quality of care.

Staffed and led by clinicians and researchers, SCV puts patient safety front and centre, supporting health services to provide the safest and best possible care to patients, every time.

#### The Victorian Maternity and Neonatal eHandbooks (eHandbooks)

The Victorian Neonatal eHandbook was handed over to SCV upon the agency's establishment in 2017. In 2018, an accompanying Victorian Maternity eHandbook was also created.

In April 2023, Victoria’s Chief Quality and Safety Officer (CQSO) and Chief Executive Officer (CEO) of SCV tasked the Guidance Team in SCV, with reviewing and updating the eHandbooks as a priority project.

### Role

The purpose of the eHandbook GC is to provide support to the Expert Working Groups (EWG) with authority for making final decisions, resolving areas of variance, while providing project oversight, assurance, monitoring and endorsement of the guidelines within the eHandbooks, on behalf of SCV.

### Meeting objectives

The objectives of the meetings are to:

* Align decisions and activities undertaken by the EWG group to the best available evidence and research, and through communication, collaboration, and consensus with stakeholders
* Approve consensus statements where evidence is lacking or equivocal
* Identify and respond to emerging issues that are raised through the membership, SCV Senior Leadership Team (SLT), other forums and EWGs.

### Operating Principles

The eHandbooks EWGs report through the Chair who is accountable to the director, Safety Insights Program, SCV.

The eHandbook GC will:

* Always act in the best interests of consumers and the wider Victorian community
* Ensure consumers/First Nations people participate in a meaningful way (with an emphasis on co-design) in all activities of the GC, including decision making
* Work with SCV and the EWG’s in a bottom-up approach to agree on strategic objectives and priorities focused on improving outcomes for women, babies, and their families
* Actively seek opportunities to enhance clinician and consumer engagement, focusing on promoting participation and effective communication
* Provide advice to SCV and the department more broadly on any eHandbook project issues, including at short notice, if required. In formulating its advice, the GC should seek further expert input from the EWG’s or externally, as appropriate
* Monitor delivery against the project plan and regularly review progress in achieving the project’s milestones
* Be accountable to the director of Safety Insights program for delivery against the SCV eHandbook project plan.

### Membership and Responsibilities

#### The eHandbooks GC responsibilities

The GC will provide guidance, direction, and oversight to support the EWGs to:

* Promote the updating, development, and implementation of evidence-based maternity and neonatal guidelines and any associated documentation
* Provide advice to SCV on the development of the maternity and neonatal guidelines, including the implementation and monitoring approach
* Provide advice to SCV on clinical quality and the safety implications of guidelines, planning and funding decisions in relation to the maternity and neonatal guidelines.

#### Membership

The GC will comprise of clinicians and consumers/First Nations people, who will bring their perspective of frontline service delivery and lived experience. GC members are non-representative; that is, they do not represent an entity, organisation, or any vested interests. The GC will have, as a guide, no fewer than six and no greater than 10 members. If fewer or greater number of people are required to govern the eHandbooks project, this must be negotiated with SCV through the Director of the Safety Insights program.

The clinical lead, maternity and newborn Learning Health Network will be an *ex officio[[1]](#footnote-2)* member of the GC.

Having consumer members representatives and First Nations representation on the GC is mandatory. A minimum of two consumer members is recommended. There may be a preference for making a distinction between consumer representation and carer representation if this is considered appropriate.

The Guidance team manager will attend all meetings and will contribute to discussions in an impartial manner, although is not a formal voting member of the group. The Evidence team manager will bring to the attention of the group any issues or information to inform group deliberations. The Guidance team manager attendance may be delegated to another staff member of SCV if required. Guidance team member(s) will also attend governance meetings, to present final draft guidelines for endorsement.

The Director Safety Insights Program and the state maternity advisor will have a standing invitation to attend all meetings, as an impartial, non-voting participant.

The Chair may invite additional guests to take part in meetings, as appropriate. Guest participants will not have authority to vote and will be required to sign confidentiality agreements prior to the meeting.

GC members will cease to be a member if they:

* resign from the group
* fail to attend three consecutive meetings without providing notice to the chair
* resign from their employment
* breach confidentiality

#### Expectation of Members

Members of the GC are expected to:

* Commit to a two-year term
* Attend a minimum of 75% of meetings and forums scheduled by the GC chair
* Participate in the work required for the eHandbooks project deliverables as needed
* Declare any conflicts of interest
* Adhere to the member confidentiality provisions
* Advocate for and promote the EWGs, the eHandbooks project, and it’s activities
* Adhere to the core operating principles for the GC
* Notify the secretariat if they are unable to attend a scheduled meeting.

#### Appointments

GC members will be appointed via an expression of interest (EOI) process, with appointments based on merit and ensuring that the final committee has the right mix of knowledge, experience, and expertise across all maternity and newborn capability level health services. The selection criteria will be published with the EOI documentation.

GC members attending meetings or participating in other network activities during their usual working hours at a Victorian public health service, will need to provide evidence of support from their employing organisation as part of the appointment process.

#### Chair

The GC should elect a chair and a deputy from its membership. And together with the project secretariat the chair will:

* Sets the agenda for the meeting
* Lead the meeting
* Maintain order at the meeting
* Ensure the conventions of the meeting are being followed
* Ensure fairness and equality at the meeting
* Keep the meeting to time
* Approve the formal minutes of the meeting
* Represent the GC (this responsibility may be delegated)
* Review and provide advice on any out of session papers
* Has the final voting right to any contentious or unresolved issues.

#### Secretariat

The Guidance Team will provide the secretariat function for the GC. This function will be overseen by the SCV, Evidence Team manager. The role of the secretariat is to:

* schedule meetings and notify group members of any scheduled changes with as much notice as possible
* preparing agendas and issuing notices for meetings, and ensuring all necessary documents requiring discussion or comment are attached to the agenda
* update, manage or log any potential conflicts of interest
* distributing the agenda and meeting materials 7 days prior to the meeting
* taking notes of proceedings and preparing minutes of the meeting
* distributing minutes to all group members within one week of the meeting.

#### Out-of-session resolutions

When an issue arises that, in the opinion of the chair, requires resolution before the next scheduled meeting, the chair may seek an out-of-session resolution. An out-of-session resolution shall be achieved and may be acted upon if:

* Written information about the issue, together with a proposed resolution, is distributed to all members of the committee.
* Sufficient members of the group to constitute a quorum respond within a timeframe agreed upon by the chair.

#### Tenure

GC members will have a two-year term. The clinical lead, as an ex officio member, will have tenure for the period they hold the position of clinical lead.

Resignation from a GC member will be in writing to the Chair, with a one month notice period.

#### Mid-term vacancies

Mid-term vacancies will be filled via an EOI process.

### Meeting Schedule

#### Quorum

* Attendance of half the GC plus one member including via tele/videoconferencing will constitute a quorum.
* In the event a quorum is not achieved, the meeting may proceed with voting/decision making held over until such time as a quorum is achieved.
* Absent members cannot be represented by proxy.
* If the GC agrees that specific expertise and/or organisational representation is needed to progress work against specific priorities, the GC Chair may co-opt members for a set period for that work. The role of the co-opted member is to contribute constructively to discussions and deliberations in the same way as other members. Co-opted members, however, do not have voting rights and will be required to declare any conflicts of interest and sign a confidentiality form.

#### Attendance

GC members must attend no less than 75 per cent of meetings per year.

To support participation of people living in regional or rural locations, teleconference meetings via a Teams platform will be the preferred medium, with in-person meetings being the exception rather than the norm.

#### Meeting frequency

Meetings will be held quarterly, with opportunity for additional meetings in the event of increased workload. Meetings will be a minimum of one and a half hours in duration or as otherwise determined by the chair.

### Decision making

Decision making in the GC will be on a consensus basis. In the event there is no consensus, a simple majority will suffice, with the Chair casting the final vote to reach majority if required.

### Confidentiality

All members will be required to sign a confidentiality agreement on commencement of their term of appointment.

Members will not reveal any confidential or proprietary information entrusted in the course of their duties.

Upon cessation of membership, and thereafter, the member shall not reveal any confidential or proprietary information that they obtained while a member of the committee, and may not use or retain, or attempt to use or retain, any such information, documents, or data.

Guests will be required to sign a confidentiality agreement prior to meeting attendance.

The Chair will provide direction to members on outcomes or recommendations that may be disclosed publicly.

### Conflict of interest

A conflict of interest will arise if a member’s personal interest (actual or perceived) conflict with their duties as a subcommittee member such that the person may not be independent, objective, and impartial in relation to their duties. All declarations of conflict of interest will be declared as part of the membership documentation, and where appropriate for additional circumstances in any given meeting.

Where a potential conflict of interest has been declared the member will remove themselves from voting on matters concerning the declared conflict and be guided by the chairperson on how to best proceed and advise the meeting accordingly. A formal declaration will be completed and signed along with documented action taken by the chairperson.

### Remuneration

Consumer members and private practitioners such as general practitioners will be eligible for remuneration for attendance to meetings.

All members, whether remunerated or unremunerated, are eligible to be reimbursed for reasonable out-of-pocket expenses such as travelling, accommodation, meals and other incidental expenses associated with attendance at meetings, overnight absence from home or absence from the normal work location during field duties.

Committee members should contact the manager of the project for further information on remuneration and the processes for claiming expenses.

### Review and Amendments

The GC will review its progress against its stated role and functions and the eHandbook project plan quarterly as a standing agenda item. The Terms of Reference will also be updated accordingly.

Changes to the Terms of Reference will be subject to approval by the Director of Safety Insights program.

### GC member list

To be completed once the GC appointed

|  |  |  |
| --- | --- | --- |
| Name | Role | Contact Details |
|  |  |  |

## Attachment 1: Potential Conflict of Interest and Confidentiality

# Potential Conflict of Interest and Confidentiality

## All members of the Maternity and Neonatal eHandbooks Governance Committee are requested to complete this declaration prior to commencing governance duties as described in the Terms of Reference.

### CONFLICT OF INTEREST

## Governance committee members must declare any potential personal, professional, or work-related conflict of interest:

* upon commencing involvement with the Governance committee, as applicable.
* where a matter giving rise to a potential conflict of interest is to be tabled at a committee meeting, prior to the commencement of that committee meeting.
* where a matter giving rise to a potential conflict of interest is raised during a committee meeting, as soon as practicable during the committee meeting.

## A conflict of interest may include for example, where there may be possible financial gain for the member or their employing organisation through knowledge, decisions or information obtained as a governance committee member of the project.

## In the event a committee member has declared a potential conflict of interest, the committee member must comply with the identified method of addressing any the conflict of interest (For example, by removing himself/herself from the committee meeting for the duration of any discussion regarding the matter giving rise to the conflict of interest). Any declared conflict of interest will be recorded in the minutes of the committee meeting.

## I ……………………………………………………. agree to disclose any potential conflict/s of interest and comply with the identified methods of addressing the conflict/s of interest as described above.

## Signed: …………………………………………… Date: ………………………………………………

## Attachment 2: Confidentiality Undertaking

# Confidentiality undertaking

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_hereby indicate that I understand and agree to abide by the confidentiality provisions set out in the *Public Health and Wellbeing Act 2008* governing the Victorian Maternal and Neonatal eHandbook project.

I acknowledge that I must not directly or indirectly make a record of, divulge, or communicate to any person any information gained by or conveyed to me by reason of my office, employment, or engagement; or make use of the information for any purpose other than for the responsibilities expected of me as a member of the governance committee.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. *Ex officio* means that they are a full member of the committee, with all member rights and privileges, appointed based on their position as clinical lead. [↑](#footnote-ref-2)