

Quality, Insurance and Risk Management Committee Terms of Reference

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Purpose, responsibilities, and delegated powers of the committee:

The Quality, Insurance and Risk Management Committee (QIRM) provides guidance and support to the Board in a timely manner on the AOM's work on member-related professional and general liability insurance policies and quality of care matters, including risk management activities, consistent with the philosophy and model of Ontario midwifery and the "Quality, Insurance and Risk Management Committee Values Statement" (2015), and in accordance with the AOM strategic plan.

The QIRM Committee will refer to the "Quality, Insurance and Risk Management Committee Values Statement" as a reference and guiding document in the carrying out of all of its responsibilities and activities. The QIRM Committee will also commit to building knowledge on, addressing, and deconstructing varying systems of oppression in midwifery including, but not limited to, racism, homophobia/ heterosexism, transphobia/ cissexism, xenophobia, and ableism. Although this Terms of Reference focuses in on addressing issues of racism for BIPOC populations in midwifery, the committee will strive to address the needs and concerns of other equity seeking groups as well.

Regarding quality and risk management, the responsibilities of the QIRM Committee are to:

- Identify priority clinical and practice management risks and opportunities for quality

improvement; Consider that priority clinical and practice management risks and opportunities may differ for BIPOC communities and therefore require different approaches

- Recommend and support the implementation of appropriate mitigation strategies and quality improvement initiatives, some of which may need to be specific to the needs of BIPOC clients or midwives, such as educational events for members and/or students, providing information to members, resource development, and member support;
- Provide guidance, as requested, about and input to the development of any tools prepared as a result of the above, such as Clinical Practice Guidelines, and professional development programming such as the ESW program;
- Monitor trends in quality improvement and the prevention of and response to adverse events; Commit to monitoring quality improvement, prevention and response to adverse event trends that are specific to BIPOC clients, considering issues pertaining to maternal-child health has long been neglected for these communities
- Guide the evaluation of the AOM's quality and risk management program;
- Guide education about midwifery insurance, quality of care, and risk management to other health care professionals;
- Keep abreast of trends and new initiatives related to quality improvement and risk management; Trends and new initiatives for BIPOC communities may differ, and so special attention should also be given to keeping abreast of those developments
- Monitor potential threats to public health and identify supports for midwives to manage those threats:
- Make recommendations to the Board regarding program policies; and
- QIRM members who have the appropriate skills and experience to do so may advise and support midwives, as needed, on issues related to quality of care and risk management, including undergoing training in order to respond to such calls from members (i.e., AOM On Call service); At minimum, QIRM members should also have the ability to identify and navigate conversations and recommendations related to the experiences of racism in practice. Some of this may require guidance from the HEQHR department to address more complex calls.

Regarding insurance, the QIRM Committee will:

- Maintain a relationship with the insurance carrier(s) on behalf of the AOM Board;
- Monitor the appropriateness of coverage and access to defense counsel through the AOM's policy of malpractice insurance for midwives;

- Monitor the availability and appropriateness of coverage through midwives' business insurance;
- Advise on midwives' Errors & Omissions insurance with new carrier if necessary;
- Monitor and advise the Board on insurance-related policies, including Group Funded Deductible policies.

Composition of the committee:

The QIRM Committee will be comprised of:

- President of the Board of Directors;
- Immediate Past President of the Board of Directors
- Nine AOM voting members, including one member from the Racial Equity Committee, up to 2 AOM Board members (not including the President), any AOM member who is also a HIROC board member
- Executive Director, ex officio;
- Director, Quality and Risk Management;
- Manager, Quality and Risk Management;
- Other staff may attend as required as determined by the Executive Director or Director of Quality and Risk Management.

If the President determines that it would be in the best interests of the AOM that another Board member serve on the committee, the Board of Directors can fill the President's position by appointing another Board member. In this case, the President will be an ex-officio member of the Committee.

Selection and term of office of committee members:

Terms will be completed as of the Annual General Meeting each year.

General members: General committee members will be selected by circulating a call for nominations to membership. Interested members may be asked to submit a letter of interest. Selection will be recommended by the Committee to the AOM Board based on best representation of membership demographics and experience with current midwifery issues, interest in and commitment to risk management issues, and ability to commit to the committee on a long-term basis.

The general term of office for members will be a five year term, renewable once. The term can be renewable a second time if there are no other eligible candidates. The general term of office does not include any period of time in which the member served as Chair of the Committee or served as the President/ President's delegate or served as a HIROC board member.

The Committee term of office of the President/ President's delegate is the length of the full term(s) of the AOM President. The Committee term of office of the Past-President is the length of the first term of the AOM President. The general term of office for members and the chairperson does not include any period during which the member served as the President or the President's delegate.

Chair: The committee members may recommend a member of the committee to the Board to serve as committee Chair.

The term of office of the Chair is 3 years, renewable once. The term can be renewable a second time if there are no other eligible candidates.

Vice-Chair: A vice-chair may be chosen as the Committee determines appropriate, and will be selected through the same process as the Chair.

The term of office of the Vice-Chair is 3 years, renewable once. The term can be renewable a second time if there are no other eligible candidates.

Rules for meetings:

The Committee will have a minimum of six meetings per year, including one full day meeting to be in person with members off call. Committee members will also be required to provide input between meetings via telephone or e-mail. Members who miss more than three meetings in a row (except due to attending births or extraordinary circumstances) or who breach the confidentiality agreement may have their membership on the Committee revoked. Committee meetings can be called by the Chair, the Executive Director, or the Director, Quality and Risk Management if they consider one necessary.

Quorum will be a majority of committee members. Staff members will not be counted in quorum.

Decision-making will be done by consensus where possible. Where this is not possible and a decision needs to be made, this will be done by majority vote.

Minutes for each meeting will be recorded

Reporting and accountability requirements:

The AOM QIRM Committee is a committee of the AOM Board and accountable to the Board. In accordance with the AOM constitution article 6, the committee is advisory in nature. It is established by the Board to carry out its mandate and to carry out the directions given to it from time to time by the Board. Committee members are responsible for implementing Board decisions with regard to the Committee's mandate.

Due to the highly sensitive nature of information that will form part of the Committee's work, prior to joining the Committee, members will be required to sign a confidentiality agreement. A signed

confidentiality agreement, one that covers the term of their membership on the Committee, is a requirement to serve on this Committee.

The Committee Chair will provide a written report to the Board of Directors on at least a quarterly basis about the key issues affecting the program and the deliverables being achieved.

Any staff/consultants hired to undertake specific work related to the Committee's work will be hired by and report to the Executive Director.

The Board of Directors has the authority to dissolve the Committee, if they determine that there is no longer a need for it, or if there has been sufficient evidence to suggest that the committee is no longer productive.