Guidelines for Morbidity and Mortality review meetings

Mortality and Morbidity review meetings are a requirement of all medical departments within the Royal Children’s Hospital. These guidelines have been prepared to assist departments conduct effective meetings and set the minimum standard expected.

**Purpose**
Selected cases are presented at mortality and morbidity review (M&M) meetings for the purpose of:
- discussing management decisions
- providing a learning opportunity focussed on system thinking
- identifying opportunities to improve patient safety and quality of care.

**Preparation**
- Identify clinicians who will form the core group for the department M&M meetings, taking into account:
  - the benefits of a multidisciplinary approach involving the ‘working group’
  - the potential to broaden the group for specific cases, where significant input to care occurred from other clinical areas.
- Appoint a senior consultant to be the Chair and to have responsibility for meeting management.
- Appoint a registrar or fellow with responsibility for case coordination and minute taking, outlining expectations.
- Book a regular meeting time. It is a requirement that meetings are held monthly.

**Case identification**
Cases presented at department M&M meetings will be identified from a range of sources including:
- all deaths which occur under the unit bedcard
- any case referred by a clinician (departments to establish guidelines for referral)
- any case referred via the organisation clinical risk management strategy including
  - sentinel events
  - critical incidents
  - complaints.

**Case analysis**

**Mortality review**
- There is an organisational expectation that all inhospital deaths will be reviewed and a standardised format for review followed (*Departmental mortality review*).
- Issues should be identified and, where appropriate, recommendations for system change made. It is important that the person responsible for implementing the change is identified and a due date established.
- Progress with implementation of recommendations should be reviewed at subsequent meetings.
- A department may consider that an independent review would be beneficial. The divisional quality manager will facilitate this process as required.

**Morbidity review**
- Cases should be summarised and reviewed using the standardised format (*Departmental case review*)
- Issues should be identified and, where appropriate, recommendations for system change made. It is important that the person responsible for implementing the change is identified and a due date established.
- Progress with implementation of recommendations should be reviewed at subsequent meetings.
**Conduct of meeting**

- M&M meetings should be seen as a driver of cultural change and clinical improvement. The role of the Chair is to:
  - encourage a focus on patient care
  - establish a ‘safe’ environment
  - M&M meetings are not convened for the purpose of focussing on an individual’s performance, should this be a concern the Chair must cease the discussion and refer the matter to the relevant manager/director
  - promote participation from those attending the meeting
  - ensure brief minutes and action items are taken
  - focus the discussion on identifying what went wrong, why it went wrong, what could be done differently in the future and what action is required.

**Recording/reporting**

**Mortality review**

- A report of the death review is to be submitted to the Quality Unit, cqs.registrar@rch.org.au by the end of the month following the death using the *Departmental mortality review*.
- Actions arising from the mortality review should be documented on the *Mortality and Morbidity meeting summary*.

**Morbidity review**

- Actions arising from morbidity reviews should be documented on the *Mortality and Morbidity meeting summary*.
- Progress with actions from previous meetings should be documented on this form also.
- A copy of this summary is to be submitted to the Quality Unit, cqs.registrar@rch.org.au.

Departments should maintain minutes from M&M meetings, a minimum requirement is the use of the *Mortality and Morbidity meeting summary*.

The division Quality Manager will provide a summary of department M&M meetings at the Division Quality Committee.

**Patient identification**

- Cases should be presented in a de-identified manner.
- In submitting documentation to the Quality Unit, a UR is required for the initial death review summary. This allows tracking at an organisational level to ensure that all in-hospital deaths are reviewed.