

GREATER FLINT HEALTH COALITION

TERMS OF REFERENCE

REGIONAL PERINATAL SYSTEM PLANNING COMMITTEE 2008

MISSION:

In the area of maternal and child health, to support the mission of the Greater Flint Health Coalition, which is:

- Improve health status of residents of Genesee County
- Improve the quality and cost effectiveness of the healthcare system in the community

VISION OF THE COALITION:

A healthy Genesee County community practicing healthy lifestyles with access to the best and most cost effective health and medical care.

CORE VALUES:

Consensus, Collaboration, Fairness, Integrity, Continuous Improvement, Innovation, Public Participation

VISION OF THE PLANNING COMMITTEE:

To develop a consensus-based, comprehensive concept and plan for a regional perinatal system including structure, design, and organizational/physician commitment. This plan may be inclusive of Genesee, Lapeer, and Shiawassee Counties.

OUTCOME OPTIONS:

- Develop a comprehensive plan to establish standards of care, levels of care, and standards of practice for transfer and return of patients among the three labor and delivery units in Genesee County.
- Establish a formal peer review process for morbidity and mortality data review to facilitate quality improvement. This process will share and report on outcome data for each level of care, diagnosis, gestational age, and birth weight (or any other parameter deemed pertinent by the participants).
- Assess and determine hospital baseline data in order to determine opportunities for improvement and prioritization of areas where improvement is feasible.
- Engage an external consultant to assist in planning a system which may extend beyond the three Genesee County hospitals.

OUTCOME OPTION IMPACT ON 2007 – 2012 GOAL FRAMEWORK:

This initiative is focused on providing organizational support to accomplish the six quality aims. The level of organizational support, as cited in The Institute of Medicine's (IOM) Report entitled *Crossing the Quality Chasm* are as follows:

- Invest in information technology
- Coordinate care
- Redesign care processes
- Manage knowledge and skills
- Develop effective multi-disciplinary teams
- Measure and improve performance and outcomes.

It will include several of the rules for the redesign of healthcare which are:

- Evidence-based decisions
- Shared knowledge
- Transparency
- Safety as a system property
- Cooperation among clinicians
- Needs are anticipated
- Waste is decreased.

Ultimately, it will assist in meeting the six aims of quality improvement, which are to establish safe, effective, patient-centered care in a timely, efficient, and equitable manner.

MEASURABLE HEALTH OUTCOMES:

To be determined by Planning Committee participants, with possible assistance by the Data Review Subcommittee and/or the external consultant.

TASK FORCE MEMBERSHIP:

The Regional Perinatal System Planning Committee will be no larger than 15 individuals. All individuals will either be appointed by their organizations' chief executive officer/director or the president of the Coalition. The individuals should be senior enough to be able to influence and represent their organization's policies on the subject matter.

Commitments: The Regional Perinatal System Planning Committee will meet monthly for one and a half hours at the Coalition office, at a time to be determined by the Committee members. Additional time commitments will occur through specific work/ad-hoc groups as needed.

The initial membership will be categorized by the Coalition "sectors" as follows:

Providers (7)	Genesys Health System CEO Chair, Obstetrics Hurley Medical Center CEO Chair, Obstetrics McLaren Regional Medical Center CEO Chair, Obstetrics Mott Children's Health Center
Insurers (2)	Blue Cross Blue Shield of Michigan / Blue Care Network HealthPlus of Michigan
Government (1)	Genesee County Health Department
Consumers/Residents (1)	Local Consumer
Chair (1)	CEO, Mott Children's Health Center
Ex-Officio members (2):	President, Greater Flint Health Coalition Chair, Greater Flint Health Coalition

REPORTING:

The Regional Perinatal System Planning Project will report to the Executive Committee and/or Board of Directors.

STAFFING:

The staffing of the Committee will be handled by the Coalition.

BUDGET:

Currently, there is no budget. A budget and source of funding for this activity is to be determined.

On October 18, 1999 the Coalition Board of Directors approved the REACH (Racial and Ethnic Approaches to Community Health) Task Force Terms of Reference. In so doing, the Board recommended the vision and outcome option of REACH become part of the operational terms of reference of every committee/task force/group of the Coalition.

THE REACH TASK FORCE

Vision: To keep before the Coalition the issue of ethnic & racial disparities in health care.

Outcome Options:

- To assist a broad base of community leaders in health care in understanding the multifaceted challenges of race relations and its impact on individual community members' health.
- To keep front and center the issue of ethnic and racial disparities in the work of the Coalition.

Approved by the Board of Directors on January 14, 2008.