

Victorian Maternity Record (VMR) Steering Committee Terms of Reference

Background

The VMR aims to provide Victorian women with a maternity record which engages consumers in decisions regarding their own care, drives further gains in collaboration and better integrated care, facilitates the delivery of evidence based care, enhances data collection to support performance reporting and provide a strong tool for improvement in health outcomes.

Statewide implementation of the VMR is a Victorian Government commitment and a Victorian public hospital policy and funding requirement.

VMR Implementation Project

Statewide implementation of a VMR is a DHS initiative, aiming for all pregnant women in Victoria to carry the VMR by end 2009. This may be in hard copy, hybrid or electronic version. As of 1 July 2008, Programs Branch within Metropolitan Health and Aged Care Services Division of the department will manage the implementation project.

A time-limited steering committee has been established to provide leadership and strategic planning expertise for the duration of the VMR implementation project.

Key principles¹ underpinning this work

1. Maternity Services provide optimal safety for women and their babies.
2. Maternity services ensure early detection and appropriate intervention (avoiding unnecessary medical intervention)
3. Maternity services provide appropriate care (ensuring continuity and consistency of care).
4. Maternity services promote parenting confidence and optimal health of mother's and their babies.
5. Maternity services respond to the needs of a diverse range of women and are customer focused.

The steering committee is responsible for:

- Representing stakeholder feedback and promoting the VMR in key stakeholder groups, including consumers, through collaborative links
- Provide advice on the development of electronic/hybrid VMR in collaboration with DHS OHIS
- Overseeing the progress of statewide implementation, identify factors impeding the project and work with DHS to identify solutions
- Provide advice to the Maternity Newborn Clinical Network
- Develop an effective statewide communication strategy
- Develop an evaluation plan for 2010
- Provide advice on strategies to support long-term sustainability of future VMR

¹ 5 principles to guide good maternity care from the 3 Centres Consensus Guidelines Project

Governance and reporting

- **The VMR Steering Committee reports to:**
*Manager
Ambulance and Acute Programs
Programs Branch
Metropolitan Health and Aged Care Services, DHS*
- **DHS Liaison:**
*VMR Project Officer
Maternity Services Program
Ambulance and Acute Programs
Programs Branch
Metropolitan Health and Aged Care Services, DHS
Tel: TBA
Email: TBA*

Membership

Current VMR Steering Committee members include:

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|-----------------|---|
| Project Officer | TBA, DHS (expect to commence by end September) |
| Patrice Hickey | Victorian President, Australian College of Midwives |
| Therese Cotter | Barwon Health, Rural Health Service Manager |
| Julie Jenkin | Manager, Maternity Services Program, DHS |
| Vickie Veitch | Senior Program Advisor, Maternity Services Program, DHS |

The Steering Committee is current being expanded to include representation from the following stakeholder groups:

- Australian College of Midwives (ACM)
- General Practice Victoria (GPV)
- Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG)
- Victorian Aboriginal Community Controlled Health Organisation (VACCHO)
- Rural and Metropolitan Maternity Health Service Managers
- Consumer Representatives
- Other representatives, eg HealthSmart and Health Information Management as required.