



ANALYSIS

<p>Title</p> <p>1. Short Title and commencement</p> <p>2. Interpretation</p> <p>3. Maternal Deaths Assessment Committee</p> <p>4. Removal from office and resignation</p> <p>5. Meetings of Committee</p> <p>6. Fees, salaries, and travelling allowances</p> <p>7. Secretary to Committee</p> <p>8. Regional Assessors of Maternal Deaths</p>	<p>9. Reporting of maternal deaths by medical practitioners</p> <p>10. Functions of Assessors</p> <p>11. Medical practitioners to supply information</p> <p>12. Payment of medical practitioners for supplying information, etc.</p> <p>13. Functions of Committee</p> <p>14. Publication of information</p> <p>15. Secrecy of information obtained for purposes of Act</p> <p>16. Protection of persons acting under authority of Act</p> <p>17. Effect on other Acts</p>
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1968, No. 26

An Act to provide for fuller research into the causes of maternal deaths [15 November 1968]

BE IT ENACTED by the General Assembly of New Zealand in Parliament assembled, and by the authority of the same, as follows:

1. Short Title and commencement—(1) This Act may be cited as the Maternal Mortality Research Act 1968.

(2) This Act shall come into force on the first day of April, nineteen hundred and sixty-nine.

2. Interpretation—In this Act, unless the context otherwise requires,—

“Assessor” means a Regional Assessor of Maternal Deaths appointed under section 8 of this Act:

“Committee” means the Maternal Deaths Assessment Committee constituted under section 3 of this Act:

“Maternal death” means a death that occurs during pregnancy or within a period of three months after the date of termination of a pregnancy:

“Medical Officer of Health” means the Medical Officer of Health appointed under the Health Act 1956 for a health district, and includes any Deputy Medical Officer of Health:

“Minister” means the Minister of Health.

3. Maternal Deaths Assessment Committee—(1) There is hereby constituted for the purposes of this Act a committee, to be known as the Maternal Deaths Assessment Committee.

(2) Subject to subsection (3) of this section, the Committee shall consist of not more than seven members appointed by the Minister, either by name or by virtue of any office which the person being appointed holds, after consultation with the Board of Health or any appropriate committee of that Board.

(3) The Minister shall ensure that at all times the Committee’s membership includes at least one person with specialised knowledge of and experience in obstetrics and gynaecology and at least one person with specialised knowledge of and experience in pathology.

(4) Where a member has been appointed to the Committee by virtue of any office which he holds he shall, on ceasing to hold that office, cease to be a member of the Committee; and every person who succeeds him in that office shall, on assuming office, be deemed to have been appointed by the Minister to be a member of the Committee:

Provided that this subsection shall not apply if the Minister, after consultation with the Board of Health or any appropriate committee of that Board, determines that the office by virtue of which any person is a member of the Committee shall no longer be such an office.

(5) Subject to subsections (2) and (3) of this section, the Minister may from time to time, after consultation with the Board of Health or any appropriate committee of that Board, alter or reconstitute the Committee, or discharge any member of the Committee or appoint new members to the Committee for the purpose of decreasing or increasing the membership or filling any vacancies.

4. Removal from office and resignation—(1) Any member of the Committee may at any time be removed from office by the Minister for disability, bankruptcy, neglect of duty, or misconduct, proved to the satisfaction of the Minister, or may at any time resign his office by writing addressed to the Minister.

(2) The powers of the Committee shall not be affected by any vacancy in its membership.

5. Meetings of Committee—(1) The Minister shall from time to time appoint a member of the Committee to be its Chairman.

(2) Meetings of the Committee shall be held at such times and places as the Committee or the Chairman of the Committee may from time to time appoint.

(3) At any meeting of the Committee a quorum shall consist of half the total number of members for the time being when that number is even, and a majority of the members when that number is odd.

(4) The Chairman shall preside at every meeting of the Committee at which he is present. If at any meeting the Chairman is not present, the members present shall appoint one of their number to preside at that meeting; and the person so appointed shall have and may exercise and perform in any such case all the powers and functions of the Chairman for the purposes of the meeting.

(5) At any meeting of the Committee the person presiding shall have a deliberative vote, and, in the case of an equality of votes, shall also have a casting vote.

(6) Every question before any meeting of the Committee shall be determined by a majority of the votes of the members present and voting on it.

(7) Subject to the provisions of this Act, the Committee may regulate its own procedure.

6. Fees, salaries, and travelling allowances—(1) The Committee is hereby declared to be a statutory Board within the meaning of the Fees and Travelling Allowances Act 1951.

(2) There shall be paid to members of the Committee, out of money appropriated by Parliament for the purpose, remuneration by way of fees, salary or allowances, and travelling allowances and expenses in accordance with the Fees and Travelling Allowances Act 1951, and the provisions of that Act shall apply accordingly.

7. Secretary to Committee—(1) There may from time to time be appointed, under the State Services Act 1962, a Secretary to the Committee.

(2) The office of Secretary may be held either separately or in conjunction with any other office in the Public Service.

8. Regional Assessors of Maternal Deaths—(1) The Minister shall from time to time, after consultation with the New Zealand Council of the Royal College of Obstetricians and Gynaecologists and the Medical Association of New Zealand, appoint one or more medical practitioners (not being persons employed in the Public Service) to be Regional Assessors of Maternal Deaths in respect of such health district or districts constituted under the Health Act 1956 as may be specified; and may at any time revoke any such appointment.

(2) There shall be paid, out of money appropriated by Parliament for the purpose, to every Assessor appointed under subsection (1) of this section, such salary or allowance as the Minister, with the concurrence of the Minister of Finance, from time to time determines.

(3) No person shall be deemed to be employed in the Public Service for the purposes of the State Services Act 1962, or in the Government service for the purposes of the Superannuation Act 1956, by reason only of having been appointed to be an Assessor under subsection (1) of this section.

9. Reporting of maternal deaths by medical practitioners—

(1) Every medical practitioner who has attended a woman during an illness or injury that caused or contributed towards her death and who knows, or has reasonable cause to suspect, that the death was a maternal death shall forthwith, and not in any event later than twenty-four hours after the occurrence of the death, notify the Medical Officer of Health for the health district in which the death occurred of the name of the woman, the cause of her death, the reasons why he knows, or has reasonable cause to suspect, that the death was a maternal death, and his own name and address.

(2) On receipt of a notification under subsection (1) of this section, the Medical Officer of Health shall forthwith forward the information contained in the notification to the Assessor who has been appointed in respect of the health district of which the Medical Officer of Health is in charge.

10. Functions of Assessors—(1) On receipt of any information under subsection (2) of section 9 of this Act, the Assessor shall forthwith take such steps as he considers necessary to ascertain whether or not the death was in fact a maternal death and, if the Assessor is of the opinion that it was a maternal death, he shall take such steps as he considers necessary to ascertain the material facts relating to the death and to the pregnancy by virtue of which the death was a maternal death. On ascertaining such material facts the Assessor shall forthwith report his findings to the Committee.

(2) For the purposes of subsection (1) of this section, the Assessor may, with the prior approval of the Minister, enter into arrangements with any medical practitioner for the conducting by the practitioner of *post mortem* examinations of the bodies or parts of bodies of women whose deaths have been, or are intended to be, notified to the Medical Officer of Health under subsection (1) of section 9 of this Act.

(3) Any arrangement entered into under subsection (2) of this section may at any time be revoked without notice by either party and shall be so revoked by the Assessor if the Minister, on the recommendation of the Committee, so directs.

(4) This section shall be read subject to the Coroners Act 1951 and the Human Tissue Act 1964; and every provision of those Acts that in any way limits or imposes conditions on the conducting of *post mortem* examinations shall, with the necessary modifications, apply to *post mortem* examinations conducted in accordance with subsection (2) of this section.

11. Medical practitioners to supply information—(1) For the purposes of subsection (1) of section 10 and subsection (2) of section 13 of this Act, the Assessor may require any medical practitioner to supply him with all information in the possession of the practitioner relating to any maternal death and to the pregnancy by virtue of which the death was a maternal death, including clinical records and other material documents in the possession or under the control of the practitioner, notwithstanding any Act or rule of law or custom or practice to the contrary.

(2) Every medical practitioner shall answer fully to the best of his knowledge and ability every relevant question asked of him by an Assessor for the purpose of the exercise and performance of the Assessor's powers, functions and duties under this Act.

12. Payment of medical practitioners for supplying information, etc.—(1) There shall be paid, out of money appropriated by Parliament for the purpose, to every medical practitioner who notifies the Medical Officer of Health of a maternal death under subsection (1) of section 9 of this Act, or who (not being the practitioner who so notified the Medical Officer of Health) supplies an Assessor with information under subsection (1) of section 11 of this Act, or who conducts a *post mortem* examination in accordance with arrangements entered into under subsection (2) of section 10 of this Act, such fee as the Minister, with the concurrence of the Minister of Finance, from time to time determines. The Minister may, with like concurrence, determine that different fees shall be paid for different cases or classes of case and that they shall be paid subject to such conditions and exceptions as he may determine.

(2) There shall be paid, out of money appropriated by Parliament for the purpose, such incidental expenses in respect of *post mortem* examinations conducted under this Act as the Minister, with the concurrence of the Minister of Finance, from time to time determines.

13. Functions of Committee—(1) As soon as practicable after the receipt of a report from an Assessor under subsection (1) of section 10 of this Act, the Committee shall—

(a) Determine to what extent (if any) the pregnancy contributed towards the death of the woman concerned; and

(b) Determine whether that death might have been averted if the effect or consequences of the pregnancy on the woman or on her illness or injury had been fully or more fully understood and provided for:

Provided that in performing its functions under this subsection the Committee shall not allocate any blame in respect of any death to any medical practitioner or to any other person.

(2) The Committee may at any time require an Assessor to obtain such further facts relating to a maternal death as it directs; and the Assessor shall forthwith take all necessary steps to obtain those facts and report his findings to the Committee.

14. Publication of information—(1) The Committee shall, in accordance with such directions as may from time to time be given to it by the Minister, publish to persons concerned

with the care and treatment of pregnant women and to such other persons or classes of person as the Minister may specify, or, with the consent of the Minister, to the general public, the results of its deliberations under this Act:

Provided that no publication under this subsection shall contain the name of any woman who has died or the name of any medical practitioner who has in any way been involved in the care or treatment of any woman to whom the publication refers, or any information that could lead to the identification by any person of any such woman or of any such medical practitioner.

(2) Notwithstanding the provisions of subsection (1) of this section, the Committee may supply any medical practitioner who has notified a Medical Officer of Health of a maternal death or who has supplied information relating to the death with the results of its deliberations on the death.

15. Secrecy of information obtained for purposes of Act—

(1) Except as otherwise provided in this section, all information obtained by an Assessor, or by the Committee, or by any other person, in the course of the administration of this Act, shall be treated as confidential save for purposes connected with the administration of, or the carrying out of, the provisions of this Act or for the purposes of the investigation of any alleged crime or of any criminal proceeding in respect thereof or of giving evidence in any such proceeding; and every person commits an offence and is liable on summary conviction to a fine not exceeding one thousand dollars who, otherwise than for such purposes, directly or indirectly divulges any information relating to a maternal death that he has acquired in the course of his duties under this Act.

(2) No person shall be compelled or permitted to divulge, in any civil proceeding, any information relating to a maternal death that he has acquired in the course of his duties under this Act; and no such information shall be admissible as evidence in any civil proceeding.

(3) Subsections (1) and (2) of this section shall not apply to information relating to the conduct of a *post mortem* examination of a body or any part of a body or to any information obtained directly as the result of such an examination.

(4) Nothing in this section shall in any way limit or affect the provisions of section 14 of this Act.

16. Protection of persons acting under authority of Act—

(1) No person who does any act for purposes connected with the administration of, or the carrying out of the provisions of, this Act shall be under any civil or criminal liability in respect of any such act, whether on the ground of want of jurisdiction, or mistake of law or fact, or on any other ground, unless he has acted in bad faith or without reasonable care.

(2) No proceedings, civil or criminal, shall be brought against any person in any Court in respect of any such act except by leave of a Judge of the Supreme Court, and such leave shall not be granted unless the Judge is satisfied that there is substantial ground for the contention that the person against whom it is sought to bring the proceedings has acted in bad faith or without reasonable care.

(3) Notice of any application under subsection (2) of this section shall be given to the person against whom it is sought to bring the proceedings, and that person shall be entitled to be heard against the application.

(4) Leave to bring such proceedings shall not be granted unless application for the leave is made within six months after the act complained of, or, in the case of a continuance of injury or damage, within six months after the cessation of the injury or damage.

(5) In granting leave to bring any such proceedings, the Judge may limit the time within which the leave may be exercised.

17. Effect on other Acts—(1) Section 62 of the Hospitals Act 1957 shall be read subject to this Act.

(2) Nothing in this Act shall limit or affect the Births and Deaths Registration Act 1951, the Coroners Act 1951, or the Human Tissue Act 1964.

This Act is administered in the Department of Health.
