



**MEDICAL PRACTITIONERS (QUALITY ASSURANCE
ACTIVITIES: CANTERBURY) NOTICE 1998**

PURSUANT to section 68 (1) of the Medical Practitioners Act 1995, the Minister of Health gives the following notice.

ANALYSIS

1. Title and commencement
 2. Declaration of quality assurance activity
 3. Duration of notice
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SCHEDULE
Description of Canterbury Health Quality Assurance Activities

NOTICE

1. Title and commencement—(1) This notice may be cited as the Medical Practitioners (Quality Assurance Activities: Canterbury) Notice 1998.

(2) This notice comes into force on the day after the date of its notification in the *Gazette*.

2. Declaration of quality assurance activity—Each of the following quality assurance activities, as described in the Schedule, is a quality assurance activity to which Part VI of the Medical Practitioners Act 1995 applies:

- (a) Canterbury Health Peer Review and Clinical Audit Activity:
- (b) Canterbury Health Morbidity and Mortality Audit Activity:
- (c) Canterbury Health Incident Reporting and Review Activity.

3. Duration of notice—This notice remains in force for a period of 5 years after the date on which it is issued, unless it is sooner revoked.

Cl. 2

SCHEDULE

DESCRIPTION OF CANTERBURY HEALTH QUALITY ASSURANCE ACTIVITIES

1. Interpretation—In this Schedule, the term “activity” means any of the following activities:

- (a) Canterbury Health Peer Review and Clinical Audit Activity;
- (b) Canterbury Health Morbidity and Mortality Audit Activity;
- (c) Canterbury Health Incident Reporting and Review Activity.

2. Sponsor—Each activity is carried out under the auspices of Canterbury Health Limited, which is a hospital and health service.

3. Information—Each activity is based on information derived from Canterbury Health Limited.

4. Canterbury Health Peer Review and Clinical Audit Activity—The Canterbury Health Peer Review and Clinical Audit Activity involves—

- (a) The examination of patients’ records; and
- (b) The analysis of the following data on patients:
 - (i) Admission and discharge; and
 - (ii) Morbidity; and
 - (iii) Mortality; and
 - (iv) Outcomes of treatment; and
- (c) The identification and analysis of good and adverse outcomes; and
- (d) The comparison of the results of the analysis with internal and external benchmarking standards; and
- (e) Internal or external peer review; and
- (f) The making of recommendations on how the medical practitioners who are engaging in the activity can improve their performance so as to—
 - (i) Improve the quality of care they provide; and
 - (ii) Reduce the incidence of adverse outcomes; and
- (g) The facilitation and monitoring of the implementation of any such recommendations; and
- (h) The reporting to quality committees on the actions taken under paragraphs (a) to (g).

5. Canterbury Health Morbidity and Mortality Audit Activity—The Canterbury Health Morbidity and Mortality Audit Activity involves—

- (a) The examination of patients’ records; and
- (b) The analysis of the following data on patients:
 - (i) Admission and discharge; and
 - (ii) Morbidity; and
 - (iii) Mortality; and
 - (iv) Outcomes of treatment; and
- (c) The identification and analysis of good and adverse outcomes; and
- (d) The comparison of the results of the analysis with internal and external benchmarking standards; and
- (e) Internal or external peer review; and
- (f) The making of recommendations on how the medical practitioners who are engaging in the activity can improve their performance so as to—
 - (i) Improve the quality of care they provide; and

SCHEDULE—*continued*

DESCRIPTION OF CANTERBURY HEALTH QUALITY ASSURANCE ACTIVITIES—
continued

- (ii) Reduce the incidence of adverse outcomes; and
- (g) The facilitation and monitoring of the implementation of any such recommendations; and
- (h) The reporting to quality committees on the actions taken under paragraphs (a) to (g).

6. Canterbury Health Incident Reporting and Review Activity—

The Canterbury Health Incident Reporting and Review Activity involves—

- (a) The completing and filing of incident reports; and
- (b) The examination of the records of patients involved in incidents; and
- (c) The identification, analysis, and review of adverse outcomes of incidents; and
- (d) The preparation of documentation, and the gathering of information, on incidents; and
- (e) The holding of quality committee meetings on incidents; and
- (f) The discussion, and documentation of the discussion, of incidents; and
- (g) The comparison of the results of the analysis of reported incidents with internal and external benchmarking standards; and
- (h) The internal or external review of incidents; and
- (i) The making of recommendations relating to incidents; and
- (j) The facilitation and monitoring of the implementation of any such recommendations; and
- (k) The preparation of documentation that summarises incident reports and identifies trends showing up in them; and
- (l) The development of strategies to reduce the incidence of reported adverse clinical events or outcomes in the provision of hospital and health services; and
- (m) The reporting to quality committees on the actions taken under paragraphs (a) to (l).

7. Objective—As required by Part VI of the Medical Practitioners Act 1995, the objective of each activity is to improve the quality of care provided by medical practitioners engaged in the activity.

Dated at Wellington this 8th day of July 1998.

BILL ENGLISH,
Minister of Health.

EXPLANATORY NOTE

This note is not part of the notice, but is intended to indicate its general effect.

This notice declares that 3 quality assurance activities sponsored by Canterbury Health Limited are quality assurance activities to which Part VI of the Medical Practitioners Act 1995 applies. Medical practitioners who provide health services at Canterbury Health Limited will participate in the activities.

The effect of this declaration is that, subject to certain exceptions,—

- (a) Any information that becomes known solely as a result of the quality assurance activities is confidential; and
- (b) Any documents brought into existence solely for the purposes of the quality assurance activities are confidential; and
- (c) The persons who engage in the quality assurance activities in good faith are immune from civil liability.

This notice remains in force for a period of 5 years after the date on which it is issued, unless it is sooner revoked.

Issued under the authority of the Acts and Regulations Publication Act 1989.

Date of notification in *Gazette*: 9 July 1998.

This notice is administered in the Ministry of Health.