Accessible transcript – PMMRC webinar 2023: Welcome and opening address

Link: <https://www.youtube.com/watch?v=dAJV9q5Cbvc>

**Visual: The video begins with an image of the Te Tāhū Hauora Health Quality & Safety Commission logo in white against a dark blue background. The logo is replaced with the words, ‘Ka awatea: A new dawn. PMMRC recommendations in action webinar. 8 June 2023.’ After a moment, these words are replaced by the following words: ‘Welcome and opening address. Denis Grennell, Pou Tikanga, PMMRC; John Tait, Chair of PMMRC; Jo Sorasio, Senior specialist advisor, PMMRC.’ After a moment, the title disappears and is replaced by an image of Denis Grennell. He has dark-rimmed glasses and is bald. He wears a large pounamu taonga around his neck.**

Audio: [Denis] E ngā reo, e ngā mana, e ngā karangaranga, maha kei waenganui i a tātou, tēnei te mihi mai i a PMMRC ki a koutou katoa, kua whai wā ki te haramai ki tēnei kōrerorero nunui. Nō reira nau mai, haramai whakatau mai.

I just want to welcome you all to this webinar of this very important kaupapa and topic. The loss of babies and our Perinatal Mortality Review Committee findings. So, in Māori and indigenous thought, as soon as we start engaging with those that had passed on, we also engage with the other side. So, we'd like to begin this webinar with a karakia.

Nō reira, me inoi tātou. Tēnei au, tēnei au te hōkai nei i taku tapuwae. Te hōkai-nuku, te hōkai-rangi, te hōkai a tō tupuna a Tane-nui-a-rangi i pikitia ai. Ki te rangi-tūhāhā, ki te tihi-o-manono, i rokohina atu rā ko io-matua-kore anake i riro iho ai ngā kete o te wānanga: ko te kete tuauri, ko te kete tuatea, ko te kete aronui, ka tiritiria, ka poupoua ki a Papatūānuku. Ka puta te ira tangata ki te whei-ao. Ki te ao mārama. Turuturu o whiti. Whakamaua kia tina. Haumi e, hui e, tāiki e! Tēnā tātou.

We've come together this afternoon on this webinar to have a look at the fifteenth report from PMMRC and to highlight the recommendations. And we have a number of excellent speakers today who will be talking about the recommendations. Just a few things to note. That within our audience, we may have parents, grandparents, others who have suffered loss and to just be conscious of that. I'm aware that after the presentations, there may be a number of people that leave. We'd like to take just a small break then to ensure their safe journeys as they depart and leave this and close this session for them. And we'll close again at the end of the question and answer session.

We can't enter into this conversation or any conversation around health and the statistics for Māori, Pasifika and other minority groups without also talking about institutional racism. We need to come with an open mind and an open heart to engage in that conversation. Having said that, we'd also like to acknowledge that the health system is staffed with well-meaning people doing everything they can and within a system that's not necessarily working for everybody at the moment.

We'd also like to acknowledge, and I'd probably like to think of Rose Pere and the wheke, that health is not just within the health system but permeates all parts of our lives and engages with other parts of the system as well.

Nō reira. Tenei au te mihi atu kia koutou katoa.

Nau mai, haere mai, whakatau mai. I'd like to introduce John Tait, Doctor John Tait. He's been a member of PMMRC since 2017 and was the Chair, has been the Chair since 2018 and still holds that role. John until recently was the Chief Medical Officer at Capital and Coast DHB and the Hutt Valley DHB and has been a consultant, obstetrician and gynaecologist in Wellington since 1986. A few years there, John.

John is also active in a number of other groups. Not limited to, but some of them are Chair of the COVID-19 Vaccine Independent Safety Monitoring Board. You need a qualification just to read that title. Vice President of the Asia and Oceania Federation of Obstetrics and Gynaecology, a member of the National Maternity Monitoring Group, a member of the ACC Neonatal Encephalopathy Task Force.

And in June 2022, Dr Tait was made an officer of the order for services in this field. Nō reira. John, over to you.

**Visual: The image changes to show Doctor John Tait. He is bald, wears a grey suit and has dark-rimmed glasses.**

Audio: [Dr John Tait] Kia ora, Denis. Thank you very much for that welcome and introduction. And thank you also for the lead-in to this webinar and all that you do with the PMMRC. As Denis has said, I’m the Chair of the Perinatal and Maternal Mortality Review Committee. We collect information on all deaths in Aotearoa New Zealand from 20 weeks in pregnancy to 28 days after birth. We also collect information on babies born with moderate or severe neonatal encephalopathy and on the deaths of women who were pregnant or were recently pregnant.

From the 1st of July, we will be moving to a national mortality review function, but we will continue to collect information on perinatal and maternal mortality and neonatal encephalopathy and will continue to provide subject matter expertise on perinatal and maternal mortality to this national committee. I'd just like to take a moment to acknowledge the passion and commitment of those members of our two working groups which are no longer. That is the Maternal Mortality Working Group and the Neonatal Encephalopathy Working Group. I’d just like to thank them for the incredible work that they've done over the past number of years. I'd also like to particularly acknowledge Jo and Debbie, who do all the work in the background. And without them we would not really be able to function efficiently as a committee.

For those of you who regularly read the PMMRC reports, yet again, it shows unacceptable ethnic, deprivation and age inequities. Yet again, it is the babies of Māori, Indian and Pacific whānau, those under 20 years of age and those living in areas with high deprivation that continue to experience the worst outcomes. Rates for neonatal encephalopathy remain static with no significant improvement, and wāhine Māori, Pacific women and women in higher deprivation areas continue to suffer a disproportionate burden of maternal mortality.

The overall rate of stillbirth has decreased since 2011. However, this is dampened by the fact that stillbirth rates are still much higher in babies of Indian, Māori and Pacific peoples and by the fact that over one-third of these deaths were classified as unexplained. There's evidence of an increase in the rate of unexplained antepartum death resulting in stillbirth over this period of time.

And unfortunately, it is also dampened by the fact that the overall perinatal mortality rate has not significantly changed from 2007 to 2020.

**Visual: The video of John shrinks to take up a small square in the upper-right corner of the screen. The rest of the screen is filled by an image of a line graph on a dark blue background. The title above the graph reads, ‘Figure 3.1: Perinatal related mortality rates (per 1000 births) using Aotearoa New Zealand definitions, 2007–2020’.**

Audio: [Dr John Tait] And we'll just put up a slide for you to look at, which just demonstrates that. Now, we could talk to you about the grim findings of the report in detail, but these are available online. Instead, we've taken a slightly different approach, and we have individuals and groups here which are passionate for change, wanting to make a difference. And today is less about the what and more about the why and the how. This webinar seeks to show you what can and is already being done.

Note that this is just a snapshot of what is happening out in the sector. I continue to see people going above and beyond to ensure that everything is done to try to change these outcomes, even in the situation we are now with chronic workforce shortages and resourcing issues. This includes, but not limited to PMMRC local coordinators, maternity quality and safety coordinators, midwives, obstetricians, neonatologists, anaesthetists, nurses, and particularly the great work that's done in the community with wraparound community services working with the whānau.

To those people and others who provide safe care and support, thank you. And to those whose lives and deaths are represented in this report, my sincere condolences to you. I acknowledge you, your grief and your journey. And we will continue to work to prevent others from experiencing the loss that you have experienced. Thank you.

**Visual: The screen changes to show a video of Jo Sorasio. She has long brown hair and dark-rimmed glasses.**

Audio: [Jo Sorasio] Tēnā koutou katoa. Thank you to everyone who has joined today. And for anyone who is watching this via the recording at a later date. Thank you also to Denis and John, who have kind of laid the groundwork for the webinar today. Thank you for that. Really briefly, my name is Jo Sorasio. I am a specialist advisor, and my role is to support the work of the PMMRC. I work with — for Te Tāhū Hauora, the Health Quality & Safety Commission.

You'll see me a bit today. I'll just be popping in and out, and my role is just to introduce each of the four recommendations from the PMMRC report that the committee have elevated and to introduce each of our wonderful speakers that we've got today, who the PMMRC are really grateful have agreed to attend, because they are really passionate about their work and have some really great messages that align beautifully with the report and with the recommendations.

**Visual: The screen changes to show the Te Tāhū Hauora Health Quality & Safety Commission logo in white against a dark blue background. After a few seconds, the logo is replaced with the Te Kāwanatanga o Aotearoa New Zealand Government logo in black against a white background.**

**The video ends.**