

California Perinatal Quality Collaborative (CA-PQC)
Advisory Council Member Role Overview

Position Title: CA-PQC Advisory Council Member

Reports to: CA-PQC Executive Steering Committee

Overall CA-PQC Purpose:

The goal of the CA-PQC is to build upon the work of CMQCC and CPQCC to improve the quality and equity of systems by supporting and sustaining a statewide Perinatal Quality Collaborative of public and private entities across the birthing continuum. The CA-PQC will leverage California's community, clinical care, and public health assets to strategically and comprehensively prioritize and respond to California's maternal and newborn/infant needs to improve outcomes through continuous clinical and community systems of care quality improvement initiatives.

Advisory Council Purpose:

The Advisory Council's (AC) composition and function are foundational for the CA-PQC structure. The AC brings together California's public/private community, clinical care, and public health experts to shape the strategic plan, priorities, goals, and direction for CA-PQC initiatives that will be implemented by the *CA-PQC Deployment Committee (DC). AC members will strengthen connections across sectors and serve as ambassadors for the CA-PQC's mission within their networks. The AC membership reflects the diversity of the state's birthing population in demographics, geography and lived experiences and strives to over index underrepresented groups. This alignment ensures the identification of issues and solutions are co-designed, clinically and culturally relevant, effective, and equitable. Together, with the *CA-PQC Executive Steering Committee (ESC) the AC guides CA-PQC-branded or affiliated quality improvement activities and advance CA-PQC's mission to eliminate preventable maternal and neonatal/infant morbidity and mortality, reduce disparities, and achieve sustainable systems-level change.

* The CA-PQC Deployment Committee translates strategic priorities into coordinated, actionable implementation plans that advance priorities set by the CA-PQC ESC and AC.

*The CA-PQC Executive Steering Committee is a nine-member governing and decision-making body of the CA-PQC that is composed of State agencies, community experts and CA-PQC leadership.

KEY RESPONSIBILITIES

Leadership

- Inform and assist in the determination of CA-PQC priority areas of focus based on the analysis of maternal and neonatal/infant needs and data findings.
- Suggest policies, systems and actions needed to achieve sustainable changes.
- Develop the 5-year CA-PQC Strategic Plan
- Proactively identify opportunities to highlight the priorities of the CA-PQC
- Leverage the internal network and circle of influence of members to advance CA-PQC priorities effectively.

Collaboration and Partnerships

- Engage and foster collaboration across the California perinatal community to meet the goals of the CA-PQC
- Identify partnership opportunities to further the mission of the CA-PQC
- Serve as a representative for CA-PQC at association meetings and local Community-Based Organization (CBO) or public health advisory committee meetings to identify synergies and opportunities for collaboration.

Funding

- Identify and assess grant opportunities and potential funders to support the priorities of the CA-PQC.
- Facilitate and actively engage in meetings with potential funders to secure financial support for the CA-PQC's priority initiatives in collaboration with the CA-PQC Executive Director.

Communication

- Identify opportunities to publicly share the goals, priorities and successes of the CA-PQC
- Use internal network to promote the priorities and impact of the CA-PQC
- Serve as a spokesperson for the CA-PQC

Decision Making

- Ensure that CA-PQC priorities and strategic decisions presented to the ESC for consideration are informed by data and evidence with input from the Deployment Committee.
- Potential ideas, priorities, and opportunities presented to the Advisory Council for CA-PQC consideration and support will be informed by data, trends, and insights and the possible impact on maternal and infant health, including mortality, morbidity, and health disparities.
- Cultivate a shared-power framework and implement strategic consensus-building processes in decision-making to ensure inclusivity and a comprehensive approach to strategic thinking.

QUALIFICATIONS

- Demonstrated expertise as a clinician, community birth worker, individual with lived experience, or leader within California state agencies or community-based organizations.
- Experience collaborating with consumer organizations, state and local health agencies, funders, and quality improvement specialists.
- Proven ability to forge partnerships, foster collaboration, and unite diverse entities that may have historically divergent perspectives or have not previously engaged with one another.
- Demonstrated ability to support initiatives beyond one's area of expertise while respecting diverse perspectives, fostering open dialogue, and avoiding attempts to impose personal opinions or ego-driven agendas.

ORIENTATION

- All AC members will participate in an orientation to set expectations on member engagement, the role and authority of the AC and ESC and how they function together.
- Participants to gain knowledge about the CA-PQC mission, history, challenges, opportunities and goals of the AC.

TIME COMMITMENT

- Quarterly 90-minute AC meetings.
- One of the quarterly AC meetings will be an (Annual or Semi-annual) in-person retreat.
- Additional ad hoc meetings, workgroup activities or orientation as necessary to further the work of the AC.

COMPENSATION

- This is a volunteer leadership opportunity.
- Compensation will be provided to individuals whose employment does not otherwise compensate them for their participation.

TERM LIMITS

- 3-year terms with the opportunity to renew.