

Division:	Research, Audit and Academic Surgery	Ref. No.	TOR-3088
Department:	Australian and New Zealand Audit of Surgical Mortality		
Title:	Tasmanian Audit of Surgical Mortality (TASM) Management Committee		

1. PURPOSE AND SCOPE

This policy defines the structure and scope of the Tasmanian Audit of Surgical Mortality (TASM) Management Committee. As a Fellowship-based organisation, the Royal Australasian College of Surgeons (RACS) commits to ensuring the highest standard of safe and comprehensive surgical care for the community we serve, through excellence in surgical education, training, professional development and support. The purpose of the TASM Committee is to support the peer review process undertaken for mortality review of surgical cases identified in Tasmanian hospitals. The Committee's work will encompass public and private hospitals in Tasmania where surgical work is undertaken.

2. KEYWORDS

Audit, Australasian, Mortality, Peer Review, Surgical, Tasmania,

3. BODY OF POLICY

The RACS Council in 2004 endorsed coordinating the bi-national roll out of Audits of Surgical Mortality. To ensure appropriate governance, standardisation and consistency, TASM is a component of a bi-national approach and is a member of the Australian and New Zealand Audit of Surgical Mortality Management Committee (ANZASM), which assists in managing and coordinating the roll-out and maintenance of the audits.

4. TASM MANAGEMENT COMMITTEE

- Is a National Qualified Privilege Committee.
- Will oversee the Audit's contractual services.
- Is responsible for the endorsement of all reports generated by TASM.
- Will discuss the future direction of the project and the related requirements for such matters.
- Will determine any issues related to Qualified Privilege or Tasmanian Privacy Legislation.
- Will report to ANZASM Steering Committee.
- Will review regular reports to DoH
- Promote local clinician engagement.
- Will support research using ANZASM and TASM process and data,

4.1 Membership

The Tasmanian Department of Health (DoH) provides funding for the TASM project. This Management Committee will monitor the structures and processes involved in the TASM quality assurance activity.

The Manager TASM will provide secretariat support for TASM and ANZASM and the Management Committee and will hold a non-voting position on the Committee. The secretarial responsibilities include preparing and sending notices of meetings and agenda,

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recording the minutes of meetings and performing other administrative duties deemed necessary by the group such as compiling data or producing annual reports.

Members of the TASM Management Committee are self-appointed for a 3-year period and may be renewed or extended:

- One (1) TASM Clinical Director (Chair) who is appointed by the Committee every three years and may be renewed or extended:
- Two (2) RACS members sourced from Tasmanian State Surgical Specialty Members State Chair or Representative of Regional Committee
- One (1) Tasmanian Department of Health representative
- One (1) registered and practising surgeon, nominated by RANZCOG to represent RANZCOG participating surgeons
- One (1) Anaesthetist nominated by the Australian and New Zealand College of Anaesthetists and appointed to the Committee by the Chairperson;
- by invitation, other people with relevant expertise to attend meetings for the purpose of providing expert advice.
- Members and guest must sign a Qualified Privileged declaration.

4.2 Meetings

The TASM Management Committee will meet at least every 6 months for at least 30 minutes. Meeting dates will be determined in advance and agendas will be available at least 3 business days prior to meeting. Minutes will be available within 5 business days of meeting. Out of Session work may be conducted in between formal Management Committee meetings.

A quorum for the meetings will be one half of the membership plus one.

Conflicts of interest should be declared at the start of all meetings and the RACS Code of Conduct should guide member's behaviours.

4.3 Objectives

- Will determine a response to any serious issues identified relating to inappropriate or inadequate practice, or to indications of major system issues.
- To analyse adverse event information from surgical care with the objective of recommending quality improvement initiatives.
- To assist in formulating action areas to prevent or reduce the likelihood or severity of future adverse events in surgical and anaesthetic care.
- To promote systemic improvements in the safety and quality of health care in the Tasmanian health system, both in hospitals and other health care settings.
- Review recommendations and actions taken to respond to relevant safety and quality issues as identified and disseminate recommendations to health services state-wide.
- Support and promote the need for a peer review process of surgical mortality cases

4.4 Reporting

The TASM Management Committee is responsible the Tasmanian DoH Clinical Governance Unit within Clinical Quality, Regulation and Accreditation Section the Australian and New

TERMS OF REFERENCE**ROYAL AUSTRALASIAN COLLEGE OF SURGEONS**

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Zealand College of Anaesthetists (TAS) and the RACS. Any reports, communication and/or advice given to unauthorised persons/groups/bodies will not contain identifying information.

5. PROCEDURES

5.1 Access

RACS staff (including Fellows and Trainees) have access to this policy.

5.2 Communication

The TASM Committee members will be notified of any changes to this policy via mail or email.

5.3 Review

Review of the Terms of Reference should be undertaken every three (3) years.

6. PUBLICATIONS

All publications arising from TASM activities will be submitted to the TASM management committee, the ANZASM Steering Committee, the Surgical Audit Committee and the Professional Standards & Advocacy Committee for noting.

Approver CEO
Authoriser Council