ROYAL AUSTRALASIAN COLLEGE OF SURGEONS

TERMS OF REFERENCE

Division:	Fellowship Engagement	Ref. No.	TOR-3092
Department:	Surgical Audit		
Title:	Surgical Audit Committee		

1. PURPOSE AND SCOPE

This policy outlines the Terms of Reference for the Surgical Audit Committee.

2. KEYWORDS

Audit, MAC, MALT, BQA, ANZGOSA, ANZASM, TASM, ACTASM, WAASM, SAASM, NTASM, QASM, VASM, CHASM, evaluation, peer review.

3. BODY OF POLICY

3.1. Background

The Committee was established to provide leadership and direction for areas relating to Morbidity and Mortality Audits.

3.2. Objectives

- 3.2.1. To advise the Professional Development and Standards Board (PDSB) with regard to surgical audit activities within the Royal Australasian College of Surgeons (RACS);
- 3.2.2. To be responsible to PDSB for developing, coordinating and monitoring the implementation of the RACS Strategic Plan for surgical audit and their evaluation:
- 3.2.3. To be responsible for the full range of issues relating to the development and implementation of surgical audit policies.

3.3. Duties and Responsibilities

- 3.3.1. To oversee all RACS-managed surgical audit activities.
- 3.3.2. To establish priorities within the Strategic Plan for surgical audit.
- 3.3.3. To advise on budget priorities for surgical audit activities as recommended by the Australia and New Zealand Audits of Surgical Mortality (ANZASM) Steering Committee and the Morbidity Audits Committee relating to the Morbidity Audit and Logbook Tool, and to make recommendations to the Resources Committee on the budgetary implications of new initiatives and existing projects.
- 3.3.4. To approve and oversee implementation of surgical audit policies and consider and advise on surgical audit policy issues brought forward by other Committees.
- 3.3.5. To ensure appropriate communication channels are in place for the provision of feedback with respect to surgical audit issues and the promulgation of policy decisions.
- 3.3.6. To receive regular status reports and other information from the ANZASM Steering Committee and the Morbidity Audit Committee.
- 3.3.7. To use the surgical audit data, as appropriate and in accordance with audit policies relating to data release, for evaluation and monitoring purposes as well as surgical research projects.
- 3.3.8. To identify risk and appropriately inform the Risk Management and Audit Committee.

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3.4. Powers

The Committee has such executive powers, supervisory functions and decision-making authority as delegated by Council and PDSB.

3.5. Composition and Voting Rights

3.5.1. Committee membership with full voting rights comprises:

- Chair, Surgical Audit Committee (RACS Councillor elected annually at the February Council meeting)
- ANZASM Steering Committee Chair
- Morbidity Audit Committee Chair
- One additional Councillor
- Fellows (up to two) with interest in morbidity and/or mortality audit
- Chair PDSB
- Deputy Treasurer

In attendance:

- Chief Executive Officer
- Executive Director Surgical Affairs (Australia)
- Executive Director Surgical Affairs (New Zealand)
- Manager, Finance
- Surgical Director of Research & Evaluation
- Director, Research, Audit & Academic Surgery
- Manager Morbidity Audits
- Manager Mortality Audits
- Other staff of the RACS shall attend Committee meetings as requested by the Chair of the Committee. The Chair may invite attendees from outside RACS from time to time.
- 3.5.2. Co-opted attendance, at the discretion of the Committee Chair.

(Note: co-opted attendance will be for a defined period determined by the Committee Chair)

3.6. Tenure and Method of Appointment

Membership of the Committee is approved by the Professional Development and Standards Board and may be for three years with two further periods to a maximum of nine years.

The Committee shall hold at least three meetings per year. Invited persons may attend all or part of a meeting but will not have voting rights.

3.7. Quorum

A quorum shall be a majority of the membership of the Committee.

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3.8. Accountability

The Committee is accountable to PDSB for fulfilment of the duties and responsibilities outlined in the Terms of Reference and for the fulfilment of any other matters delegated to it. Reporting Structure

3.9. Reporting Structure

The Committee's proceedings will be recorded in minutes. Reports are provided to Council via PDSB.

4. ASSOCIATED DOCUMENTS

No documents associated with this policy.

Approver PDSB **Authoriser** Council