

<b>Portfolio:</b>	<b>Fellowship Experience</b>	<b>Ref. No.</b>	<b>TOR-3094</b>
<b>Department:</b>	<b>Morbidity Audits</b>		
<b>Title:</b>	<b>ANZELA-QI Steering Committee</b>		

## 1. PURPOSE AND SCOPE

This policy defines the structure and scope of the Australian and New Zealand Emergency Laparotomy Audit – Quality Improvement (ANZELA-QI) Steering Committee.

## 2. KEYWORDS

Emergency Laparotomy, Quality Improvement, Benchmark standards, Audit

## 3. BODY OF POLICY

### 3.1 Background

The ANZELA-QI Steering Committee is an advisory group charged with the responsibility of providing leadership and strategic direction for the program which is led by the Royal Australasian College of Surgeons (RACS).

The management of the ANZELA-QI program is overseen by the ANZELA-QI Management Committee and the Surgical Audit Department in the Research, Audit and Academic Surgery (RAAS) section of Royal Australasian College of Surgeons (RACS).

### 3.2 Objectives

- Setting and overseeing business rules
- Oversee funding and securing additional sources of external funding
- Establishing a risk management plan
- Providing oversight of research and data infrastructure
- Monitoring and guiding the operation of the Management Committee.
- Provide strategic direction and advice related to the development and maintenance of the program.

### 3.3 Duties and responsibilities

- Support the ANZELA-QI with clinical advice and guidance to ensure the program continues to meet the needs of the participating sites, departments of health and relevant stakeholders.
- Promote the use of the program amongst colleagues and peers
- Be familiar with the dataset and have experience using the database
- Attend scheduled meetings and actively contribute

### 3.4 Powers

- The members can request in consultation with the Chief Operations and Partnerships Officer services from the Surgical Audit team to effectively carry out committee duties

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- The Committee may establish one or more working party or subcommittee. A working party or subcommittee may include persons who have been nominated by but are not members of the Committee
- The Committee shall observe the rules of procedural fairness (i.e. natural justice)
- The Surgical Audit team may be authorised in consultation with the Chief Operations and Partnerships Officer to engage specialists to provide expert clinical or legal advice to the Committee where they consider it necessary to carry out their duties

### 3.5 Membership

The ANZELA-QI Steering Committee will comprise of:

Members:

- A Chairperson (anaesthetist or surgeon)
- A Deputy Chairperson (anaesthetist or surgeon)
- ANZELA-QI Management Committee Chair
- One representative from each key society or college:
  - Australasian College for Emergency Medicine (ACEM)
  - Australian and New Zealand College of Anaesthetists (ANZCA)
  - Australian and New Zealand Society for Geriatric Medicine (ANZSGM)
  - Australian Society of Anaesthetists (ASA)
  - College of Intensive Care Medicine of Australia and New Zealand (CICM)
  - Colorectal Surgical Society of Australia and New Zealand (CSSANZ)
  - General Surgeons Australia (GSA)
- One representative from each of the following departments of health:
  - Department of Health and Wellbeing (South Australian Health)
  - Clinical Excellence Queensland (Queensland Health)
  - Western Australia Department of Health
  - Safer Care Victoria
- A representative from the Australian Commission on Safety and Quality in Healthcare (ACSQHC)
- A representative from the Indigenous community

Attendees:

- RACS General Manager, RAAS.
- RACS Manager, Surgical Audits.

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- RACS ANZELA-QI Project Lead.
- RACS ANZELA-QI Data Custodian

### 3.6 Tenure and method of appointment

Membership will be on an ongoing basis for a period of up to three years with the ability for a further two periods of three years.

Attendance at the scheduled meetings will be monitored by the Surgical Audit Team and reported to the Committee. The Chair, at his/her discretion can approach members of the Committee when attendance is not deemed regular enough to maintain position on the Committee. Absences of 3 consecutive meetings may result in end of tenure.

All nominations for appointment to the Committee and all appointments to the Committee are to be made in writing to the Chair. The Chairperson and Deputy Chairperson positions will be made by an expression of interest process (EOI). All other members will be nominated by their organisation.

The EOI for Chair and Deputy Chair will be from surgeons or anaesthetists who are RACS or ANZCA Fellows. EOI will be sought from an appropriate Indigenous network.

The membership nominations will be put forward to RAAS Steering Committee for review, selection, and approval.

The Chair may invite guest speakers or temporarily co-opt individuals or representatives of key stakeholders with specific experience, as needed. These individuals are not members but attendees:

- Attendees provide advice or expertise in areas where the Steering Committee considers it has a lack of expertise or could benefit from a wider breadth of experience.
- The presence of these non-members should be noted in the agenda and minutes.
- Non-members typically only attend the meeting for the duration of the agenda item they are concerned with.
- Attendees are not involved in decision-making and have no voting rights (they are typically not present while the Steering Committee deliberates and makes decisions). The RACS staff who attend may remain while decisions are deliberated although they do not vote.

### 3.7 Quorum

A quorum shall be 50% of the membership (not including those 'In Attendance') and must include the Chair or Deputy Chair.

Proxy representation is permitted, providing the representatives details are submitted to the Chair at least 24 hours prior to a scheduled meeting.

Decisions of the Committee shall be determined by a majority vote of those present. In the event of a tied vote the Chair will have the casting vote.

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### 3.8 Meetings

The Steering Committee will meet by teleconference at least two times per annum. Out of session deliberations will be conducted as required.

A declaration of any conflict of interest is required and will be recorded in the minutes.

Meeting dates will be determined in advance. Agenda papers will be provided ahead of a meeting to allow members time to read and consider them.

Secretariat support is provided by the Surgical Audit Team, including maintaining appropriate records of agendas, supporting documents, minutes and action items.

### 3.9 Accountability and reporting structure

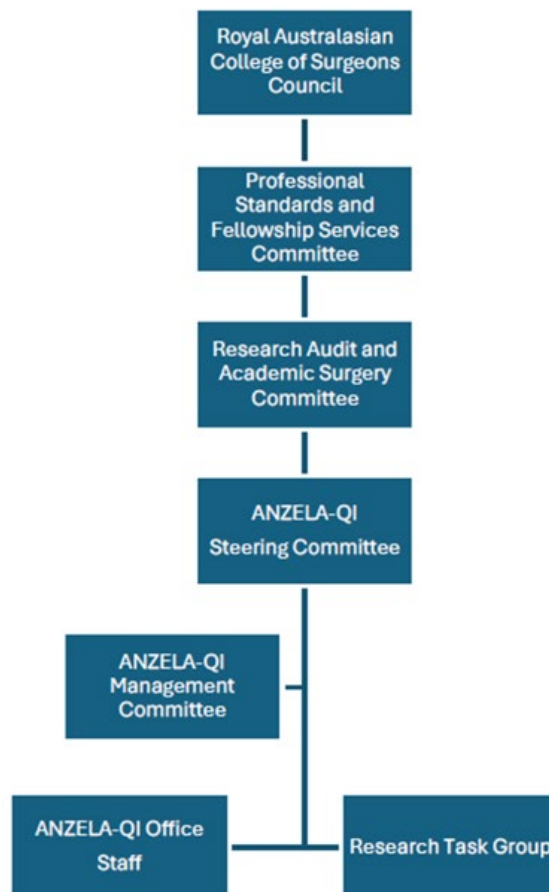
The Committee is accountable to the RACS Council via the Professional Standards and Fellowship Services Committee (PSFSC) and Research, Audit and Academic Surgery (RAAS) Committee (see Figure 1).

A person who acquires any information solely because of that person's membership of the Committee must not make a record of, or divulge or communicate that information to any person, except for the purpose of performing the functions of the Committee.

A report furnished by, or information made available by the Committee, must not disclose either expressly or by implication the identity of an individual who is a provider or recipient of a health service unless the individual has consented in writing to that disclosure.

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Figure 1: Governance structure of ANZELA-QI



#### 4. REVIEW

These terms of reference will be reviewed every three years and updated as necessary.

#### 5. ASSOCIATED DOCUMENTS

Terms of Reference, ANZELA-QI Management Committee.

**Approver:** Professional Standards and Fellowship Services Committee

**Authoriser:** Council