	LINCE	NOTAL AUSTRALASIAN COL		JUNGEONS
Division:	Research, Audit and Academic Surge	ry Re	ef. No.	TOR-3099
Department:	Australian and New Zealand Audit of S	Surgical Mortality		
Title:	Western Australia Audit of Surgical M Management Committee	ortality (WAASM)		

## 1. PURPOSE AND SCOPE

This policy defines the structure and scope of the Western Australia Audit of Surgical Mortality (WAASM) Management Committee. As a Fellowship-based organisation, the Royal Australasian College of Surgeons 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.

## 2. KEYWORDS

WA, Audit, Australasian, Mortality

# 3. BODY OF POLICY

The College Council, in 2004 endorsed coordinating the bi-national roll out of Audits of Surgical Mortality. To ensure appropriate governance, standardization and consistency WAASM is a component of a bi-national approach and is a member of the Australian and New Zealand Audit of Surgical Mortality Steering Committee (ANZASM) which assists in managing and coordinating the roll-out and maintenance of the audits. WA Department of Health provides funding for the WAASM project and has representation on the WAASM Management Committee.

This Management Committee will monitor the structures and processes involved in the WAASM quality assurance activity.

- 3.1 WAASM Management Committee
  - Will oversee the Audit's contractual services.
  - Is responsible for the endorsement of the publications of all reports generated by WAASM.
  - Will discuss the future direction of the project and the related requirements for such matters.
  - Will determine a response to any serious issues identified relating to inappropriate or inadequate practice and indications of major system issues as allowed by QP legislation.
  - Will report to ANZASM Steering Committee
  - Will review regular reports to DHS
  - Aim for 100% participation compliance. One mechanism is mandating of audit through CPD.

#### 3.2 Membership

Members of the WAASM Management Committee:

- RACS WA State Chair or Representative of Regional Committee
- Surgical Specialty Representatives the number and specialty being determined by local conditions
- WAASM Clinical Director (Chair)
- Two WA Department of Health and Human Services representative
- Consumer representative (maximum 2 1 can be an indigenous representative where possible)

Authorised By:	Manager, Surgical Audits	Original Issue:	August 2011
Document Owner:	Project Manager, WAASM	Version:	4
		Approval Date:	November 2021
Page 1 of 2		Review Date:	November 2024

**TERMS OF REFERENCE** 

TERING OF REFER		NUTAL AUSTRALASIAN	JULLEGE UI	- JURGEUNS
Division:	Research, Audit and Academic Surge	у	Ref. No.	TOR-3099
Department:	Australian and New Zealand Audits of	Surgical Mortality		
Title:	Western Australia Audit of Surgical M Management Committee	ortality (WAASM)		

- One registered and practicing surgeon, nominated by RANZCOG to represent RANZCOG participating surgeons
- One 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
- In attendance Project Staff from WAASM, WA Department of Health representatives (maximum of 2) and ANZASM (non voting membership)
- WAASM project staff will provide secretarial support and services to the Committee.

# 3.3 Membership of the committee

Membership of the WAASM Management Committee will be for a 3-year term with a possible extension for 2 more terms (up to 9 years total). Term limits do not apply to the Clinical Director or to nominated representatives from other organisations. Expressions of interest for Committee membership will be sought through appropriate RACS communication channels.

All nominations will be put forward to WAASM Management Committee for a decision to appoint members.

## 3.4 Meetings

The WAASM Management Committee will meet at least every 6 months. Meeting dates will be determined in advance and agendas will be available at least 5 business days prior to meeting. Minutes will be available within 5 business days of meeting. The meetings will be tape recorded and the record destroyed once the minutes of a meeting are approved.

# 4. PUBLICATIONS

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

# 5. PROCEDURES

5.1 Access

College staffs (including Fellows and Trainees) have access to this policy.

5.2 Communication

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

ApproverCEOAuthoriserCouncil

Authorised By:	Manager, Surgical Audits	Original Issue:	August 2011
Document Owner:	Project Manager, WAASM	Version:	4
		Approval Date:	November 2021
Page 2 of 2		Review Date:	November 2024