

Division:	Research, Audit and Academic Surgery	Ref. No.	TOR-3100
Department:	ANZASM		
Title:	Queensland Audit of Surgical Mortality (QASM) Steering Committee		

1. PURPOSE AND SCOPE

This policy defines the structure and scope of the Queensland Audit of Surgical Mortality (QASM) Steering 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

QLD, 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, QASM 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. Queensland Health provides funding for the QASM project and has representation on the QASM Steering Committee.

This Steering Committee will monitor the structures and processes involved in the QASM quality assurance activity. Furthermore it will facilitate the planning, managing, monitoring and evaluating of surgically related health services by the participation of Surgeons in QASM.

3.1. QASM Steering Committee

- Will oversee the Audit's contractual services.
- Is responsible for the endorsement of the publications of all reports generated by QASM.
- Will discuss the future direction of the project and the related requirements for such matters.
- Will determine any issues related to Qualified Privilege or Queensland Privacy Legislation.
- 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.
- Aim for 100% participation compliance. One mechanism is mandating of audit through CPD.
- To review de-identified data and 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 and recommending quality improvement initiatives for surgical care.
- To promote systemic improvements in the safety and quality of health care in the Queensland health system both in hospitals and other health care settings.
- Review recommendations and action taken to respond to relevant safety and quality issues as identified and disseminate recommendations to health services state-wide.

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- Will report to ANZASM Steering Committee.
- Will review regular reports to DHS.

3.2. Membership

Membership of the QASM 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 QASM Management Committee for a decision to appoint members

Members of the QASM Steering Committee:

- RACS – Queensland State Surgical Specialty Members, including members of the Queensland Surgical Advisory Committee and State Chair
- QASM Clinical Director (Chair)
- Queensland Health representatives (maximum of 2)
- One (1) registered and practicing surgeon, nominated by RANZCOG to represent RANZCOG participating surgeons
- Consumer representative (maximum 2)
- In attendance - Project Staff from QASM and ANZASM (non – voting membership)
- QASM project staff will provide secretarial support and services to the committee

3.3. Meetings

The QASM Steering Committee will meet at least 3 times a year. 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.

3.4 Publications

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

3.5. Access

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

3.6. Communication

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

4. ASSOCIATED DOCUMENTS

No documents associated with this policy.

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Approver CEO
Authoriser Council