1. PURPOSE AND SCOPE

This policy defines the structure and scope of the Australian Capital Territory Audit of Surgical Mortality (ACTASM) 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

ACT, Audit, Australasian, Mortality

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, standardization and consistency ACTASM 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. ACT Department of Health provides funding for the ACTASM project, and has representation on the ACTASM Management Committee.

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

3.1 ACTASM Management Committee

- Will oversee the Audit’s contractual services.
- Is responsible for the endorsement of the publications of all reports generated by ACTASM.
- Will discuss the future direction of the project and the related requirements for such matters.
- Will determine any issues related to Qualified Privilege or ACT 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.
- Will report to ANZASM Steering Committee
- Will review regular reports to DHS
- Aim for 100% participation compliance. One mechanism is mandatory participation of audit through CPD.

3.2 Membership

Members of the ACTASM Management Committee:

- ACTASM Clinical Director (Chair)
- RACS – ACT State Surgical Specialty Members and State Chair or Representative of Regional Committee
- ACT Department of Health representatives (maximum of two)
- One registered and practising surgeon, nominated by RANZCOG to represent RANZCOG participating surgeons
• One registered and practicing anaesthetist, nominated by ANZCA to represent ANZCA participating anaesthetists
• In attendance - Project Staff from ACTASM and ANZASM (non-voting membership)
• ACTASM project staff will provide secretarial support and services to the Committee.
• Membership will be on an ongoing basis for a period of up to three years with ability for two further periods of three years.

3.3 Meetings
The ACTASM Management Committee will meet at least every three months. Meeting dates will be determined in advance and agendas will be available at least three business days prior to meeting. Minutes will be available within five business days of meeting.

4. PROCEDURES
4.1 Access
RACS staff (including Fellows and Trainees) have access to this policy.

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

Approver  CEO
Authoriser  Council