

<b>Division:</b>	<b>Research, Audit and Academic Surgery</b>	<b>Ref. No.</b>	<b>REA-ASM-006</b>
<b>Department:</b>	<b>Australian and New Zealand Audits of Surgical Mortality</b>		
<b>Title:</b>	<b>Australian and New Zealand Audits of Surgical Mortality Terms of Reference</b>		

## 1. PURPOSE AND SCOPE

This policy defines the structures and processes involved in ensuring the appropriate governance, standardisation and consistency within the Australian and New Zealand Audits of Surgical Mortality (ANZASM). In particular this policy defines the purpose and scope for the ANZASM Steering Committee and Audits of Surgical Mortality Management Committees in each region and the role of the ANZASM Manager.

## 2. KEYWORDS

Audit, Surgical Mortality, Steering Committee, Australia,

## 3. BODY OF POLICY

### 3.1 Background

The RACS Council, in 2004 endorsed coordinating the national roll out of Audits of Surgical Mortality. To ensure appropriate governance, standardization and consistency between the audits a national approach needs to be adopted. In line with this, an ANZASM Steering Committee will manage and coordinate the roll-out and maintenance of the audits.

### 3.2 ANZASM Steering Committee: Terms of Reference

- An ANZASM Steering Committee will oversee all region-based audits of surgical mortality. It will establish national guidelines and procedures to ensure consistency and standardisation between the audits. The ANZASM Steering Committee will have management responsibility on behalf of the RACS over the activities of the Management Committees in each region.
- The ANZASM Steering Committee can establish sub-committees to undertake specific tasks or projects relating to the activities of the audits of surgical mortality.
- The ANZASM Steering Committee will be responsible for the endorsement of the publications of all reports generated by the Regional Committees.

#### 3.2.1 Membership

Membership on the ANZASM Steering Committee to include:

- RACS Councillor
- ANZASM Chair
- Chair or representative from each regional audit of surgical mortality
- POMRC representative from New Zealand
- One registered and practising surgeon, nominated by RANZCOG to represent RANZCOG participating surgeons
- One registered Anaesthetist, nominated by ANZCA to represent ANZCA participating anaesthetists
- Community representative.

Approved By: Director, Research, Audit and Academic Surgery

Original Issue: June 2005

Document Owner: Director, Research, Audit and Academic Surgery

Version: 2

Approval Date: February 2017

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Terms of Office for the Chair and the Committee members should be up to 3 years per term and no more than 3 terms (9 years maximum) in line with standard College Policy.

The Chair of the ANZASM Steering Committee will also have the ability to co-opt individuals to serve as full members on the steering committee.

Attendees on the ANZASM Steering Committee to include:

- Executive Director of Surgical Affairs – Australia and New Zealand
- RACS CEO
- RAAS Director
- ANZASM Manager
- ANZASM Project Managers.

### 3.2.2 Meetings

The ANZASM Steering Committee will meet at least twice a year.

### 3.2.3 Reporting structure and requirements

- The ANZASM Steering Committee will report its activities and progress to the Professional Development and Standards Board through the Surgical Audit Committee.
- The ANZASM Steering Committee can advise and assign tasks to the ANZASM Manager in relation to the coordination of activities of the audits of surgical mortality.

### 3.2.4 Quality Assurance Coverage

All relevant State and Commonwealth Qualified Privilege coverage will be attained for all of the ANZASM Steering Committee and local Management Committee activities. The Bi-National Audit (BAS) system contains data collected under either State/Territory and/or Commonwealth quality assurance regimes. No data request shall be approved if it risks disclosure of identified data or other breach of the quality assurance legislation.

## 3.3 Management Committee

A Management Committee will be established in each region to manage, administer and supervise the region-based audits of surgical mortality. The Management Committees will negotiate a Service of Agreement contract with the relevant jurisdictional body to conduct the audit of surgical mortality in consultation with the ANZASM Manager and Project Office. The regional health jurisdictional body will outline the specific outcomes expected from the audit in the service agreement. This service agreement should be reviewed annually to ensure that outcomes and objectives are still current (refer to individual audit office terms of reference).

Approved By:	Director, Research, Audit and Academic Surgery	Original Issue:	June 2005
Document Owner:	Director, Research, Audit and Academic Surgery	Version:	2
		Approval Date:	February 2017
		Review Date:	February 2020

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### 3.4 Role of the Australian and New Zealand Audits Manager

- 3.4.1 The ANZASM Manager will assist the ANZASM Steering Committee with the coordination of the activities of the audits of surgical mortality.
- 3.4.2 The ANZASM Manager will manage all staff necessary to conduct the central activities of the audits of surgical mortality.
- 3.4.3 The ANZASM Manager will centralize as many activities as appropriate in the administration of the audits of surgical mortality; including data analysis, database management and report generation.
- 3.4.4 The ANZASM Manager will provide a national profile for the audits of surgical mortality and provide a central point of contact for the state jurisdictions to assist in the coordination of the administration of the regional-based audits of surgical mortality.

## 4. THE ANZASM SUBCOMMITTEE

The ANZASM Subcommittee consists of the ANZASM Chair and three Clinical Directors. This committee meets on an adhoc basis, and usually corresponds electronically. Its role is to review and approve a 'Request for Data Release' to support peer-reviewed publications and review appropriate case reviews to be loaded onto the National Second-Line Assessment (SLA) app.

## 5) ASSOCIATED DOCUMENTS

Policy on the Disclosure of Information from the ANZASM Database.

Submission for Data Requests Form.

**Approver** CEO  
**Authoriser** Council

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