

Division:	Research, Audit and Academic Surgery	Ref. No.	TOR-3101
Department:	ANZASM		
Title:	Northern Territory Audit of Surgical Mortality (NTASM) Management Committee		

1. PURPOSE AND SCOPE

This policy defines the structure and scope of the Northern Territory Audit of Surgical Mortality (NTASM) 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

NT, 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, NTASM 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. NT Health provides funding for the NTASM project, and has representation on the NTASM Management Committee. The office is run from the Queensland Audit of Surgical Mortality (QASM).

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

3.1. NTASM Management Committee:-

- Will oversee the Audit's contractual services.
- Is responsible for the endorsement of the publications of all reports generated by NTASM/ 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 Northern Territory 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 analyse 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 Northern Territory health system both in hospitals and other health care settings

Approved By: Manager, Surgical Audits
Document Owner: Project Manager, NTASM

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- Review recommendations and action taken to respond to relevant safety and quality issues as identified and disseminate recommendations to health services state-wide
- Will report to ANZASM Steering Committee
- Will review regular reports to DHS

3.2. Membership

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

Members of the NTASM Management Committee include:

- Management Committee Chair (NT surgeon)
- RACS – NT State Chair or Representative of Regional Committee
- Surgical Specialty Representatives – the number and specialty being determined by local conditions
- NTASM Clinical Director (Chair)
- RANZCOG (The Royal Australian and New Zealand College of Obstetricians and Gynaecologists) registered and practicing surgeon, nominated to represent RANZCOG participating surgeons (maximum of 2).
- ANZCA (The Australian and New Zealand College of Anaesthetists) registered and practicing anaesthetist, nominated to represent ANZCA.
- In attendance - Project Staff from QASM, NTHealth representatives (maximum of 2) and ANZASM (non – voting membership)
- QASM project staff will provide secretarial support and services to the Committee.
- A Consumer representative (maximum 2) is an optional member

3.3. Meetings

The NTASM Management 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 NTASM activities will be submitted to the NTASM Management Committee, the ANZASM Steering Committee, the Surgical Audit Committee and the Professional Standards & Advocacy Committee for noting.

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3.5. Access

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

3.6. Communication

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

4. ASSOCIATED DOCUMENTS

No documents associated with this policy.

Approver CEO
Authoriser Council

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