

TERMS OF REFERENCE**ROYAL AUSTRALASIAN COLLEGE OF SURGEONS**

Division:	Fellowship Engagement	Ref. No.	TOR-3094
Department:	Morbidity Audits		
Title:	ANZELA-QI Steering Committee		

College of Anaesthetists (ANZCA), and collaborates
other clinical colleges, specialty societies, consumer representatives and
authorities.

Improvement initiative has been established to enable capture of high quality
prospective data.

to key purposes; to benchmark emergency laparotomy care against evidence
national standards and to introduce quality improvement through performance
clinical care bundles and the establishment of a network for shared
learning and learning.

laparotomy patients, irrespective of age or comorbidity,

Approved By: General Manager, RAAS
Document Owner: Manager, Morbidity Audits

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- Overseeing the ethical and legal obligations.
- Engaging with key stakeholders, particularly the Australasian College for Emergency Medicine (ACEM), College of Intensive Care Medicine of Australia and New Zealand (CICM), General Surgeons Australia (GSA), the New Zealand Association of General Surgeons (NZAGS), Australian and New Zealand Intensive Care Society, Colorectal Surgical Society of Australian and New Zealand, ANZ Gastric and Oesophageal Surgery Association (ANZGOSA), ANZ Hepatic Biliary and Pancreatic Surgery Association (ANZHPBA), New Zealand Society of Anaesthetists (NZSA), Australian Society of Anaesthetists (ASA), Perioperative Medicine SIG (PMSIG), health consumer groups, government health departments, the Australian Commission on Safety and Quality in Healthcare and the Health Quality and Safety Commission in New Zealand.
- Ensuring a baseline bi-national organisational audit is undertaken to understand the infrastructural, human and IT resources of each hospital.
- Determining the key outputs.
- Determining a minimum dataset to provide data for the key outputs.
- Providing a secure data collection mechanism that is available online, under the auspices of and day to day management of the RACS Research, Audit and Academic Surgery Division.
- Ensuring the audit is able to provide real-time measurement of key processes of care and risk-adjusted outcomes in order to generate high quality, contemporaneous and meaningful data. This will be presented in the form of run charts, dashboards and other QI techniques so enabling comparison within and between hospitals.
- Ensuring benchmarking of processes and outcomes against evidence based standards such as the Surviving Sepsis Campaign, the Department of Health/Royal College of Surgeons of England's 'Higher Risk General Surgical Patient (2011)', NELA and other international publications of emergency abdominal surgery.
- Ensuring open, transparent access to data for comparative benchmarking.
- Establishing a secure data collection mechanism that is available online, under the auspices of and day to day management of the RACS Research, Audit and Academic Surgery Division.

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4. REVIEW

These terms of reference will be reviewed annually by the Steering Committee and approved by the ANZELA-QI Governance Committee.

5. ASSOCIATED DOCUMENTS

Terms of Reference, ANZELA-QI Governance Committee

Approver CEO

Authorisers RACS Council and ANZCA Council