



**ANZCA**  
FPM

# South Australian Anaesthetic Mortality Committee (SAAMC)



Government  
of South Australia

SA Health

The South Australian Anaesthetic Mortality Committee (SAAMC) is formed in accordance with the rules and requirements of, and is duly authorised by, the SA/NT Regional Committee of the Australian and New Zealand College of Anaesthetists (ANZCA) and SA Health.

## 1. Role

To analyse adverse event information, specifically patient mortality, from health services related to anaesthesia with the objective of recommending quality improvement initiatives. This will assist in formulating action areas to prevent or reduce the likelihood or severity of future adverse events.

## 2. Purpose

- To undertake evaluation of deaths associated with anaesthesia and sedation undertaken by South Australian anaesthetic providers, including by conducting reviews of the incidence or causes of conditions or circumstances that may affect the quality of such services.
- To analyse and review data obtained in relation to deaths associated with anaesthesia and sedation undertaken by South Australian anaesthetic providers with the objective of recommending quality improvement initiatives.
- To monitor the implementation of any recommendations or other initiatives that are relevant to reducing the deaths associated with anaesthesia and sedation undertaken by South Australian anaesthetic providers.
- To promote systemic improvements in the safety and quality of health care in the South Australian health system both in hospitals and other health care settings.
- To support a culture of safety and quality where analysis of adverse events and continuous improvement are central.
- To analyse data and information about deaths associated with anaesthesia and sedation undertaken by South Australian anaesthetic providers and provide advice on strategies for system improvement.
- Review recommendations and action taken to respond to relevant safety and quality issues as identified and disseminate recommendations to health services state-wide and nationally.
- To support and assist in the process to produce the triennial Safety of Anaesthesia report, produced by ANZCA.
- To submit for publication in appropriate peer-reviewed journals the results of the Committee's investigations, ensuring that the submission does not contain identifying information.

## 3. Membership

The committee will be comprised of the following members from South Australia. These members have been selected because they each hold a qualification or have experience or training that is relevant to the performance of this committee's functions. There are in total nine standing permanent appointments:

Australian and New Zealand College of Anaesthetists:	3 nominations
Australian Society of Anaesthetists:	3 nominations
College of Intensive Care Medicine:	1 nomination
Royal Australasian College of Surgeons:	1 nomination
Australian College of Operating Room Nurses:	1 nomination

- If there are no representatives from either (a) metropolitan practice or (b) rural/regional practice, an additional member will be co-opted from the unrepresented area.

#### **ADMINISTRATIVE SUPPORT**

Administrative support for the committee will be provided by the Committee Support Officer who is employed by Australian and New Zealand College of Anaesthetists and this position will be protected by the Commonwealth Qualified Privilege (QP) scheme.

The committee may invite other people with relevant expertise to attend meetings for the purpose of providing expert advice.

In accordance with the requirements of Part 7 of the *Health Care Act 2008*:

- All members will be advised of their responsibility under Part 7 of the Health Care Act and will acknowledge their obligations under Part 7 in writing at the commencement of their appointment to the committee.
- A formal process of appointment for persons providing expert advice will be conducted by the Chair, the Chair ensuring that experts are made aware of the responsibilities regarding confidentiality under Part 7 of the Act. Experts will sign an undertaking of confidentiality at every meeting they attend.
- Any subcommittees / working groups will seek separate authorisation if they wish to have access to identifying information if membership is from outside SAAMC.

Members are appointed for a term of 3 years, after which time they may seek re-appointment as longevity is noted to be of benefit with these types of consultative councils.

#### **4. Meeting process**

The SAAMC will meet tri-annually. A quorum for a meeting will be half of permanent appointments. If at any time the number of members is less than a quorum, the committee may meet only for discussion purposes.

In the absence of the Chair of the SAAMC, the Chair shall appoint a proxy Chairperson from the committee membership. There is no provision for proxies should members be unable to attend the meeting.

The meetings will be conducted formally. Minutes of the meeting will be recorded and endorsed by the committee members.

Reports will come to the committee from a variety of sources including, but not limited to, voluntary reporting by anaesthetists and other health practitioners, and reports direct from the Coroner's office. Individual members will be tasked with reviewing data and presenting the case for discussion. Reports will be rapidly de-identified and will be considered individually. Where deemed appropriate by the committee, some reports may be referred to the Surgical Audit for consideration.

Individual members of the committee may be required to meet outside of the committee to review adverse event reports received from the health services. Outcomes of the individual discussions will be tabled and minuted at the next scheduled meeting.

## 5. Reporting

The SAAMC reports to the SA/NT Regional Committee of ANZCA and SA Health.

Any reports, communication and/or advice given to these or any other persons/groups/bodies not authorised under Part 7 of the *Health Care Act 2008* will not contain identifying information.

In accordance with the *Health Care Act 2008*, Committee members shall not make a record of information or make use of or disclose information gained as a result of, or in connection with, an authorised activity, except:

- To the extent necessary for the proper performance of the authorised activity; or
- In pursuance of any reporting requirements or a prescribed kind to a governing body of an entity; or
- As part of making a disclosure to another authorised person: or
- To the extent allowed by the regulations.

The committee will submit an Annual Report (short) to the Safety and Quality Unit – SA Health

## 6. Review of Terms of Reference

A review of the terms of reference will be undertaken annually.

If any alterations to the terms of reference are required, they will be submitted for re-declaration.

In any event, the terms of reference will be submitted with a request for re-declaration within 32 months of the previous declaration by the Minister if the committee required continuation of its authorisation.

Version	Date	Authored by	Submitted to Dept for Health and Wellbeing	Changes
1	May 2014			
1.1	May 2016			
1.2	May 2019			
1.3	May 2023	M Gully	24.5.2023	The SAAMC will meet tri-annually (previously quarterly)