



QUALITY AND PATIENT SAFETY COMMITTEE

A Committee of the Council of Advocacy, Practice and Partnerships

1. Introduction

These terms of reference are established under, and are subordinate to, the *Policy on College Entities* (the policy). Committee members should ensure they are familiar with the provisions and requirements of the Policy. These terms of reference include details of the following:

- membership specifications (including any variations to the Policy permitted by the Council of Advocacy, Practice and Partnerships (CAPP):
- matters specific to the Quality and Patient Safety Committee (QPSC) (for example responsibility):
- operational matters—where these have been varied by CAPP pursuant to the policy (e.g., the number of meetings to be held each year):

Otherwise, reference should be made to the Policy for details of all matters pertaining to the operation of the Committee.

2. Purpose

The purpose of the Quality and Patient Safety Committee is to provide expertise to the College on systemic improvement of the safety and quality of care. This will involve developing policies, procedures and protocols; advising on the clinical performance monitoring and management of clinical risk; providing advice and tools for management, reporting and learning from critical events; and supporting members in planned and systematic audits of clinical services.

3. Membership

The QPSC consists of the following members:

- (a) Ex-officio members:
 - One (1) delegate from the FACEM membership of CAPP.
- (b) Up to twelve (12) 'ordinary' FACEM members (inclusive of the Chair and the Deputy Chair)
- (c) Up to one (1) member of the College in the category of Certificant, Diplomate or Advanced Diplomate.
- (d) One (1) FACEM Training Program trainee nominated by the Trainee Committee.
- (e) One (1) external community member appointed by CAPP.

The Chair shall also have the ability to co-opt one (1) additional FACEM members (non-voting) as required in order to progress specific matters that require knowledge and / or expertise not possessed by the membership outlined above.

3.1 Office Holders

The Chair shall be the ex-officio delegate from the CAPP Committee, If the delegate is unable to undertake that role, the Chair shall be nominated from among the ordinary FACEM membership for appointment by CAPP.

4. Responsibilities and Authority

4.1 Responsibilities

The Quality and Patient Safety Committee will work with College staff to:

- Develop policies, procedures, protocols and educational opportunities that support members in employing effective clinical performance monitoring/reporting practices and clinical risk management measures.

- Provide the advice and practical tools required to support members in reporting, managing and reflecting upon clinical events and incidents.
- Develop resources to support members in planned and systematic audits of clinical services.
- Promote the responsible and appropriate use of healthcare resources, through programs such as Choosing Wisely and other initiatives, in order to support an evidence-based approach to low value care, and prevent overdiagnosis and overtreatment.
- Work with external stakeholders in the development of evidence-based clinical resources that are accessible to all ACEM members and trainees.

4.2 Extent of Authority

The Committee shall have delegated authority to make decisions where a routine process/procedure is present regarding the above matters. Where there is none, the Committee shall make recommendations to CAPP; the authority to approve or not to approve such recommendations rests solely with CAPP.

CAPP will approve a work plan that documents the objectives and deliverables for the Committee. The work plan is aligned with the strategic priorities for the College and provides direction regarding the targeted use of resources within the College administration.

Other than in relation to strategic matters, business requiring decision outside of scheduled meetings may, at the discretion of the Chair, be determined by the Chair or by the whole Committee as required. Matters dealt with by the Chair will be tabled at the next meeting of the Committee.

4.3 Reporting

The Committee shall supply a written report to CAPP following each of its meetings, together with any recommendations that require consideration and approval by CAPP.

5. Meeting Requirements

See Clause 8 of the Policy.

Frequency of Meetings

The Quality and Patient Safety Committee will meet once face-to-face and twice by teleconference in each calendar year.

6. Document Review

Timeframe for review:	Every two (2) years, or earlier if required.
Document authorisation:	Council of Advocacy, Practice and Partnerships
Document implementation:	Executive Director, Policy, Research and Partnerships
Document maintenance:	General Manager, Governance and Standards

7. Revision History

Version	Date of Version	Pages revised / Brief Explanation of Revision
V1.0	Aug-2018	Approved by CAPP
V2.0	Jan-2020	Administration revision approved by Board for all ACEM entities regarding ordinary" members, along with revisions to staff and department titles.
V3.0	Jul-2022	Extensive changes to 'Responsibilities' section; addition of new parent committee status with respect to two Networks; compositional change to enable one Certificant, Diplomate or Advanced Diplomate; co-opted positions reduced from two to one.