Special Committee Investigating Deaths Under Anaesthesia

Terms of Reference

1. Name and purpose of the committee

The Committee is known as the Special Committee Investigating Deaths Under Anaesthesia (SCIDUA). Its purpose is to subject all deaths which occur while under, as a result of, or within 24 hours after the administration of anaesthesia or sedation for procedures of a medical, surgical, dental or investigative nature to peer review so as to identify any area of clinical management where alternative methods could have led to a more favourable result. The Committee undertakes the following functions:

i. To register, investigate and classify deaths occurring during or within 24 hours of a procedure performed under anaesthesia or sedation.

ii. To determine whether further information is required to complete the above investigation, and if so to request such information under guarantee of confidentiality from the attending practitioner(s).

iii. To examine information acquired and identify any issues of management which were instrumental in the patient’s death.

iv. To report the Committee’s findings confidentially to the practitioners involved in the patient’s care.

v. To report annually to the Minister for Health, drawing attention to any matters which require action to improve the safety of anaesthesia and sedation in New South Wales.

vi. To acquaint the medical profession in general and anaesthetists in particular with any matters to which special attention needs to be paid to ensure the safety of anaesthesia and sedation.

vii. To submit for publication in appropriate peer-reviewed journals the results of the Committee’s investigations in such a way as to preserve undertakings of confidentiality given to respondents.

viii. To make available the expertise of its members to the Clinical Excellence Commission in pursuit of systemic improvements to patient care in the fields of anaesthesia and sedation.

ix. To share the audit findings of a notified death with other committees that have special privilege under section 23 of the Health Administration Act 1982, if the same death has been notified to them.
2. **Authority by which the committee is established**

The Committee is constituted under section 20 of the *Health Administration Act 1982* and all Committee members are appointed by the Secretary, NSW Health under delegation by the Minister for Health.

3. **Membership of the committee (including establishment of quorum)**

The Committee currently consists of the following members:

Dr David R Pickford (Chairperson)
Dr Michele Anne O’Brien (Secretary)
Dr Damien Arthur Boyd
Dr Matthew Ronald Crawford
Dr Carl Edward D’Souza
Dr Elizabeth Eily O’Hare
Dr Benjamin Luke Olesnicky
Dr Frances Evelyn Smith

The Committee requires the presence of three anaesthetists to establish a quorum.

4. **Procedures for the appointment of members**

Members are appointed for a fixed term of 5 years, at the end of which the Committee advises the Secretary, NSW Health whether their re-appointment is appropriate. In the event of a member resigning, the Committee may recommend a suitable replacement to the Secretary.

The aim is to ensure anaesthetists from a broad range of clinical specialties are represented, as well as the professional bodies concerned; i.e. the Australian and New Zealand College of Anaesthetists (ANZCA) and the Australian society of Anaesthetists (ASA), as well as the relevant academic Departments.

Having taken these matters into consideration, the Committee makes recommendations to the Secretary, NSW Health, who has the authority to make appointments.

The Committee elects its own Chairperson, who must be a currently practising anaesthetist.

The Chief Executive, Clinical Excellence Commission serves as an ex-officio member.
5. Remuneration rates to be paid to members

Committee members are remunerated sitting fees at rates that are set in the Public Service Commission Directive: Classification and Remuneration Framework for NSW Government Boards and Committees (D2012_005). The current rates, effective from 1 July 2014 are:

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<thead>
<tr>
<th></th>
<th>Chair</th>
<th>Member</th>
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<tr>
<td>Full day</td>
<td>$350</td>
<td>$220</td>
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<tr>
<td>Half day</td>
<td>$175</td>
<td>$110</td>
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Sitting fees are to cover all committee meetings and other official business of the Committee. The latter includes, but is not limited to: attendance by members on official visits; training and conferences; and meetings with the Minister or other public officials. The daily sitting fees are not to be paid for preparation or reading time.

In line with policy decisions against “double-dipping”, public sector employees appointed to NSW government boards or committees do not receive fees. (The Public Service Commission Policy Document: Appointment Standards – Boards and Committees in the NSW Public Sector (P2013_001)).

6. Procedures and timeframe for the review of the committee

See (4) above.

Any review of the Committee is at the discretion of the Secretary, NSW Health, who may also choose the timeframe for such a review. Otherwise review occurs when the term of appointment for a member or members expires.

7. How the committee communicates with its key stakeholders

The Committee publishes its membership and information about SCIDUA at the following web address:


The Committee communicates with its stakeholders through the following:

i. An Annual report for the preceding calendar year is provided to the Secretary, NSW Health.

ii. A triennial report is contributed to the National Working Group, which forms part of the review of anaesthesia-related mortality published by ANZCA.

iii. Each individual anaesthetist who provides information to the Committee receives a letter from the Chairperson explaining the reasons behind the Committee’s views on his or her case.
iv. Periodically, the Committee submits reports to peer-reviewed journals in which trends in anaesthesia-related mortality are described. These reports reach a wide range of anaesthetists in Australia, New Zealand and internationally.

Note: All of the Committee’s proceedings, documents and correspondence are protected under Section 23 of the *NSW Health Administration Act 1982*. 