

*To serve the community by fostering safety and quality patient care in anaesthesia, perioperative medicine and pain medicine*



**FPM (ANZCA) Australian  
Regional Committees  
Terms of Reference**

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**PURPOSE**

The FPM (ANZCA) Australian regional committees are elected bodies that act as a conduit between Fellows and trainees in the regions and the FPM Board (the governance body of the Faculty) to which they report.

They assist in implementing Faculty policy in their regions, advise the FPM Board on issues of interest to the Faculty and its Fellows and trainees in the regions, represent the Faculty and promote the specialty in the regions, develop and maintain relationships with key regional stakeholders, and have a role in training, continuing medical education and other professional activities at a regional level.

**TERMS OF REFERENCE**

Each regional committee's role is to:

*Internally*

1. Provide advice and regular reports to the FPM Board on: matters within the region that concern the interests of the Faculty and the College, its Fellows and trainees, draft policy (for example, professional documents) and carry out other tasks that may be delegated to the committee by the FPM Board.
2. Provide advice to the FPM Board on matters affecting training, accreditation and review of hospital unit accreditations
3. Provide advice to the FPM Committees on: appointment to committees and concerns and questions arising in committee meetings which have direct regional relevance.
4. Nominate to the FPM Board a FPM Scientific Program Convenor for the Annual Scientific Meeting when held in their region.
5. Provide advice to the International Medical Graduate Specialist (IMGS) Committee on: nomination of local assessors for workplace-based assessment (IMGS-WBA) and region-specific issues (regulation 16).
6. Convene regional continuing medical education activities for Fellows (at least one per year).

*Externally*

1. Develop submissions in response to consultation documents from government bodies with the support of the FPM Board, the ANZCA Council and the ANZCA Policy Unit
2. Approve FPM representative(s) on hospital trainee selection committees
3. Nominate Fellows as FPM (ANZCA) representatives on external regional bodies.

4. Nominate Fellows for provision of medico-legal advice (for example, coroner's court, private counsel).
5. Foster relationships with key stakeholders and provide advice to government and non-government agencies.
6. Promote the roles of the Faculty, College, specialist pain medicine physicians and specialist anaesthetists in the region to agencies and individuals.

All activities are undertaken in accordance with ANZCA and FPM policy and in compliance with relevant statutory and regulatory requirements.

#### **MATTERS THAT ARE NOT THE ROLE OF THE REGIONAL COMMITTEES**

The roles of each regional committee do NOT include:

1. Appointment of members (this is by election, see FPM regulation 15).
2. Matters relating to industrial issues such as remuneration of Fellows and trainees.
3. Trainee employment (which is the role of the jurisdictions).
4. Changes to FPM/ANZCA policy.
5. Making specific commitments in political negotiations without first obtaining permission from the FPM Board and, where relevant, the ANZCA Council.
6. Those issues dealt with by the Medical Board of Australia (MBA).

#### **DELEGATIONS**

The following are delegated roles from the FPM Board:

1. Budgeted activities.
2. Election of regional committee office bearers.
3. Organisation and delivery of budgeted continuing medical education meetings and regional educational programs for trainees.
4. Responses to consultation documents from external bodies
5. Discussions regarding alternative pain medicine providers, quality and safety issues and workforce issues specific to the region
6. Support for regional appointments and honours.

#### **MATTERS THAT REQUIRE FPM BOARD APPROVAL**

The following require approval of the FPM Board and/or ANZCA Council:

1. Unbudgeted expenses (these require approval of the chief executive officer within delegation or else the FPM Board and ANZCA Council).
2. Changes to ANZCA and FPM policy.
3. Reports and responses to issues that may have broader ramifications (for example, workforce reports, statements regarding alternative providers).
4. New strategic and advocacy approaches
5. Competence issues where significant risks may result
6. Responses to standards of practice or hospital resourcing that could detrimentally affect the Faculty and College and their training programs.
7. Engagement in activities with external organisations that have major (unbudgeted) financial or other risk implications.

8. Activities that are of high risk to the Faculty or College, especially those that are outside core business or where there are wider ramifications for the Faculty or College and their reputations.

#### **IMPORTANT GROUPS FOR COORDINATION/COMMUNICATION**

The important groups/roles for coordination/communication for each regional committee are:

##### *Internally*

1. The FPM Board (to whom the regional committees report).
2. ANZCA Council (governance of the college).
3. Regional office staff.
4. The FPM Committees.
5. Supervisors of training in the region.
6. Organisers of examinations and examination courses for trainees.
7. The FPM Training Unit Accreditation Committee (for advice and information gathering).
8. The FPM International Medical Graduate Specialist (IMGS) Committee.
9. FPM Fellows and trainees in the region.
10. The ANZCA Policy Unit.
11. The ANZCA regional committee.
12. The ANZCA Communications Unit (for advice in relation to media requests for statements, particularly about controversial issues).

##### *Externally*

13. Heads of department/directors of pain medicine of FPM accredited training facilities in the region.
14. Regional jurisdictional authorities (for example, the health department).
15. The Australian Pain Society.

#### **MEMBERSHIP**

The membership of each regional committee is defined in FPM regulation 15. The body of elected members should demonstrate:

1. Willingness to contribute to Faculty related matters at a regional level.
2. Knowledge of regional education and training issues.
3. Broad representation, for example, different hospitals; rural and regional as well as metropolitan practice locations; new as well as more experienced Fellows.
4. Understanding of and willingness to abide by FPM and ANZCA policies (including but not limited to regulations, professional documents, privacy, conflict of interest, travel policies).

#### **MEETINGS**

Each regional committee will meet at least three times face-to-face per year with members attending by teleconference or other distance means as required and budgeted. An annual general meeting will be held each year with a report forwarded to the FPM Board.

A quorum for a meeting will be a majority of voting members. If at any time the number of members is less than a quorum, the regional committee may meet only for discussion purposes.

Questions arising at a meeting of a regional committee (either in person, by teleconference or webinar) are decided by a majority of votes of voting members present and voting, with abstentions not being counted in the total number of votes. The chair has a casting vote in addition to a deliberative vote where there is an equality of votes.

For an electronic vote, questions are decided in the affirmative if at least 75 per cent of all voting members (other than any member on a leave of absence or any member abstaining in writing) vote in favour.

The discussions of each regional committee are confidential to its members. Conflicts of interests will be managed in accordance with the ANZCA conflict of interest policy.

The members of each Australian regional committee will undertake their work in accordance with relevant FPM and ANZCA policies. Bullying, discrimination and harassment will be managed, as relevant, in accordance with the ANZCA Policy on Bullying, Discrimination and Harassment for Fellows and Trainees acting on behalf of the College or undertaking College functions (available at [www.anzca.edu.au/resources/corporate-policies](http://www.anzca.edu.au/resources/corporate-policies)), and staff policies (available by contacting the CEO at [ceo@anzca.edu.au](mailto:ceo@anzca.edu.au)).

#### **REPORTING**

Meetings will be minuted with the minutes being forwarded to the FPM Board. Decisions made electronically will be recorded in the minutes of the next regional committee meeting.

Each regional committee receives reports from:

1. *Internally*: the FPM Board (written reports), the Dean's communiqué, the President's communique, the ANZCA regional committee.
2. *Externally*: regular reports should be requested from regional committee nominated representatives to external bodies.

#### **ADMINISTRATIVE SUPPORT**

Administrative support for each regional committee will be from the staff in the relevant regional office.

#### **FINANCIAL REPORTING AND PLANNING**

1. Each FPM committee will have "financial report" as a standing agenda item and will receive regular financial reports.
2. The roles of the committee include:
  - a. To develop an annual activity plan.

- b. To be familiar with the approved annual budget.
- c. To oversee the financial results of budgeted activities.
- d. To support ANZCA/FPM management in decision making, in order to ensure the best possible financial outcome.

3. The roles of the committee do not include the day-to-day financial management of the Faculty (which is the role of ANZCA/FPM management).

**CHANGE CONTROL REGISTER**

Version	Author	Reviewed by	Approved by	Changes
1	P McNair, H Morris, L Roberts, Regional committee chairs		FPM Board and Council 2014	Creation

Date of next review	2016
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