

Health Insurance (Quality Assurance Activity – The Australian and New Zealand Tripartite Anaesthetic Data Committee (ANZTADC) Incident Recording and Reporting Program web based anaesthetic incident reporting system – webAIRS) Declaration 2023

I, PAUL KELLY, delegate for the Minister for Health and Aged Care, make the following declaration under section 124X of the *Health Insurance Act 1973*.

Dated 5 April 2023

Professor Paul Kelly

Chief Medical Officer

Department of Health

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Part 1— Preliminary

1 Name

This instrument is the *Health Insurance* *(Quality Assurance Activity –* *The Australian and New Zealand Tripartite Anaesthetic Data Committee (**ANZTADC) Incident Recording and Reporting Program web based anaesthetic incident reporting system – webAIRS) Declaration 2023*

2 Commencement

(1) Each provision of this instrument specified in column 1 of the table commences, or is taken to have commenced, in accordance with column 2 of the table. Any other statement in column 2 has effect according to its terms.

| Commencement information |
| --- |
| Column 1 | Column 2 | Column 3 |
| Provisions | Commencement | Date/Details |
| 1. The whole of this instrument | 16 April 2023 |  |

Note: This table relates only to the provisions of this instrument as originally made. It will not be amended to deal with any later amendments of this instrument.

(2) Any information in column 3 of the table is not part of this instrument. Information may be inserted in this column, or information in it may be edited, in any published version of this instrument.

3 Authority

This instrument is made under subsection 124X(1) of the *Health Insurance Act 1973.*

4 Repeal

This instrument is repealed when it ceases to be in force in accordance with subsection 124X(4) of the *Health Insurance Act 1973*.

5 Schedule

The quality assurance activity described in the Schedule to this declaration is, to the extent that the quality assurance activity relates to health services provided in Australia, declared to be a quality assurance activity to which Part VC of the *Health Insurance Act 1973* applies.

Schedule 1— Description of quality assurance activity

**1 Name of activity**

*The Australian and New Zealand Tripartite Anaesthetic Data Committee (ANZTADC) Incident Recording and Reporting Program web based anaesthetic incident reporting system – webAIRS) Declaration 2023*

**2 Description of activity**

This quality assurance activity consists of the capture, analysis and dissemination of de-identified national data about critical anaesthetic incidents that occur in Australia and New Zealand through a voluntary web‑based incident reporting system. The activity captures national data across a spectrum of incident severity, from near miss to severe harm.

The name of the program is the Australian and New Zealand Tripartite Anaesthetic Data Committee Incident Recording and Reporting Program. The program is also known as webAIRS, which stands for web-based anaesthetic incident reporting system.

The activity will be conducted by the Australian and New Zealand College of Anaesthetists in coordination with the Australian and New Zealand Tripartite Anaesthetic Data Committee (ANZTADC). The ANZTADC consists of three parent organisations: the Australian and New Zealand College of Anaesthetists (ANZCA), Australian Society of Anaesthetists (ASA) and New Zealand Society of Anaesthetists (NZSA). All members of the three parent organisations are eligible to participate in webAIRS.

The analysis of national level data entered into webAIRS will be used to highlight trends in current practice and enable proactive responses to potential risks and improve patient safety. Local level reporting does not form part of this quality assurance activity.

The ANZTADC Publications Group will lead the process of analysing the cleansed data and release of findings. Nominated authors will use the de-identified data to produce reports and disseminate the information in the following ways:

·       anaesthetic specific journal publications, e-newsletters and magazines; and

·       publication of de-identified incident report findings to parent organisation publications; and

·       themed presentations at annual scientific meetings which include suggested improvement in practice or technique.