Triennial Report

Insert QAC name

Insert reporting period YYYY - YYYY

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| PLEASE NOTE(please delete prior to report submission)* This template has been developed as a guide to assist Quality Assurance Committees to meet legislative reporting obligation under [*s.33 of the Hospital and Health Boards Regulation*](https://www.legislation.qld.gov.au/view/whole/pdf/asmade/sl-2023-0100) *2023*.
* Quality Assurance Committees are required to make the following information available to the public every three years:
* *a statement of the committee’s functions;*
* *for each current committee member—*
1. ***the member’s full name and qualifications****; and*
2. ***the member’s office or position****; and*
3. ***a summary of the member’s experience*** *that is relevant to the committee’s functions;*
* *a summary of the activities undertaken in, and any outcomes of, the performance of the committee’s functions; and*
* *a summary of the committee’s privacy policy*
* Additionally, Quality Assurance Committee’s are required to provide the above information to the entity that established the committee before the committee makes the report available to the public.
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Contents

[Contents 3](#_Toc179820981)

[Introduction 4](#_Toc179820982)

[Functions 4](#_Toc179820983)

[Summary of the activities performed, and outcomes achieved 4](#_Toc179820984)

[Committee membership 5](#_Toc179820985)

[Chairs(s) and Co-Chairs 5](#_Toc179820986)

[Current members 5](#_Toc179820987)

[Sub-committee <insert name> Current members 6](#_Toc179820988)

[Former committee members 6](#_Toc179820989)

[Privacy policy 7](#_Toc179820990)

[Appendices 8](#_Toc179820991)

# Introduction

Instructions: Provide a brief summary of the Committee’s purpose, date the committee was established and the applicable reporting period (commencing from and to).

# Functions

Instructions: Include a description of the key functions of the committee (consistent with s82(3)(b) of the Hospital and Health Boards Act 2011 (*the Act)).*

# Summary of the activities performed, and outcomes achieved

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| Instructions: Include a description by year (within the reporting period), of the activities undertaken by the Committee and the outcomes achieved, as they relate to the functions of the committee (in accordance with s33(3)(c) of the Hospital and Health Boards Regulation (2023). Activities could include a range of actions such as case reviews, forums, audits, presentations and publications sharing learnings and best practice.For example:1. **Development of a** **Trauma ‘App’**

The concept for a Trauma ‘App’ for the patient journey was raised by Committee members in 2021, as a tool for communication to enable patients, families or carers easy access to information about the hospital environment. **Outcome:** A proof of concept has been funded for one year to trial and evaluate.1. **Psychological reviews for trauma patients post discharge**

In 2021, it was identified that there was a cohort of patients requiring psychological follow up post discharge from either the acute or non-acute settings. **Outcome:** The Committee has identified some hospital and health services with established models of care for follow up and others that have conducted trial programs. The QTBQAC is continuing to seek models of care for early detection of high-risk patients to enable early access to care. |

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# Committee membership

Instructions: Include each current committee member’s full name (including sub-committee’s if applicable), qualifications, office or position and a summary of the member’s experience that is relevant to the committee’s function.

## Chairs(s) and Co-Chairs

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full name | Date commenced  | Qualifications | Position of employment  | Summary of experience relevant to QAC  | Work location (eg. HHS or town) |
| Dr abc | 05/05/2023 | MBBS, FRACP, PhD | Director XYS, GCHHS  | Consultant <speciality>Director of Research, <facility>; Chair, ZYC Steering CommitteeReviewer, ABC publicationSteering Committee member, JJJ Queensland Clinical Network | N/A |
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## Current members

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| --- | --- | --- | --- | --- | --- |
| Full name | Date commenced  | Qualifications | Position of employment  | Summary of experience relevant to QAC  | Work location (eg. HHS or town) |
| Dr abc | 05/05/2023 | MBBS, FRACP, PhD | Director XYS, GCHHS  | Consultant <speciality>Director of Research, <facility>; Chair, ZYC Steering CommitteeReviewer, ABC publicationSteering Committee member, JJJ Queensland Clinical Network | N/A |
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## Sub-committee <insert name> Current members

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| --- | --- | --- | --- | --- | --- |
| Full name | Date commenced  | Qualifications | Position of employment  | Summary of experience relevant to QAC  | Work location (eg. HHS or town) |
| Dr abc | 05/05/2023 | MBBS, FRACP, PhD | Director XYS, GCHHS  | Consultant <specialty>Director of Research, <facility> Chair, ZYC Steering CommitteeReviewer, ABC publicationSteering Committee member, JJJ Queensland Clinical Network | N/A |
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## Former committee members

The QAC would like to acknowledgement the contribution of former committee members who ceased membership during the reporting period.

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| Full name | Date commenced  | Position of employment  | Date ceased |
| Dr abc | 05/05/2023 | Director XYS, GCHHS  | N/A |
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# Privacy policy

Instructions: A summary of the Committee’s privacy policy is required to be made public, Patient Safety and Quality recommend a copy of the policy is attached to the report as an Appendix.

The Committee’s privacy policy is attached as Appendix 1.

# Appendices