

International Academy of Colleges of Anaesthesiologists (IACA)

Terms of reference

Founding partners:

- The Australian and New Zealand College of Anaesthetists (ANZCA)
- College of Anaesthesiologists of Ireland (CAI)
- The Hong Kong College of Anaesthesiologists (HKCA)
- Royal College of Anaesthetists (RCoA)
- Royal College of Physicians and Surgeons of Canada (RCPSC)

Context

Postgraduate medical colleges around the world are improving patient safety and quality of care through the delivery and provision of support for high standards in training, education, professional practice and research. There are synergies in our collective activities such as promoting doctors' wellbeing, increasing diversity and inclusion, leadership development, recruitment and retention initiatives, international relations and global health programmes.

Aim

To facilitate safe and high-quality patient care regionally and internationally through dialogue and a collaborative alliance, with shared resources, experiences, ideas, and energy. Specifically, to increase consistency and improve effectiveness in:

- The development and provision of vocational education and life-long learning.
- The promotion of professional practice standards.
- Collaborative advocacy.
- Global health and patient safety, particularly through developing a formal liaison with the World Federation of Societies of Anesthesiologists (WFSA).

All partner colleges commit to establishing, promoting and advancing the aims of the academy, and to seek resourcing for its activities where required and possible (or achievable).

The founding colleges have agreed to collaborate and share best practice across a variety of strategic themes.

In principle the range and scope of themes are aligned with WFSA programs: Advocacy, education and training, innovation and research; and safety and quality.











Themes	Advocacy Promoting a focus on the availability, safety and quality of anaesthesiology.	Education and Training Delivery of world class training and education and support doctors specializing in anaesthesiology to maintain their education, knowledge and skills.	Innovation and Research Investment in innovation and research for universal access to safe anaesthesia.	Safety and Quality Promoting global standards and the wellbeing of our Fellows, members and staff.
Potential areas for collaboration	Global health supporting workforce capacity building	Competency /Outcomes assessment	Perioperative medicine and prehabilitation	Wellbeing for doctors
	Patient safety	Examination quality assurance	Scientific exchange opportunities	Sustainability
	Quality improvement	Curriculum		Diversity and Inclusion

Initial areas of collaboration

Prioritisation and agreement of key themes will be a function of the IACA. The initial themes selected for prioritization in 2020/2021 are:

- 1. Collaboration on an international COVID conference target 10 June 2021 (scientific exchange).
- 2. Collaboration on best practice standards for post graduate Anaesthesiology examinations in virtual environment target 26 January 2021 (examination quality assurance).
- 3. Collaboration on sustainability highlighting the work already underway in each college target 23 February 2021 (sustainability).
- 4. Develop a joint position/declaration statement on patient safety target 5 September 2021. (patient safety).

Membership

The International Academy of Colleges of Anaesthesiologists consists of the colleges listed above. If a decision is made to extend membership beyond the founding partners these will be contained in an annexe document.











Membership will be limited to colleges that train and and/or certify graduates as medical specialists (referred to as certifying colleges).

Governance of the IACA is by a board comprising two representatives from each member college with an elected chair. These two representatives are normally the president and chief executive officer (CEO) of each college, however suitable high-level alternatives may be nominated if required.

IACA officers

Roles and responsibilities

The chairperson is responsible for:

- Chairing the IACA meetings.
- Setting the agenda of the IACA meetings.
- Representing the IACA at meetings with relevant stakeholders.
- Ensuring the strategic policy and objectives of the IACA are advanced.
- Facilitating communication and liaison with the key stakeholders.
- Directing the work of the IACA.

The honorary secretary is responsible for:

- Overseeing the executive functioning of the IACA.
- Ensuring the strategic policy and objectives of the IACA are advanced through the IACA's membership.
- Facilitating communication and liaison with the key stakeholders.
- Representing the IACA at relevant meetings, including those with key stakeholders.

IACA administration will be undertaken on a rotational basis from within the college whose president is in the role of chairperson. The honorary secretary will be responsible for deciding on the manner in which administration will be provided.

IACA administration may include:

- Working closely with and providing support for the IACA chairperson and honorary secretary.
- Managing and executing administrative business of the IACA, by agreement with the honorary secretary.
- Maintaining regular communication with colleges
- Attending meetings where needed to maintain and circulate minutes, records and reports as required.

Term of officers

The chairperson and the honorary secretary of the IACA will serve for a maximum term of two years.

Nomination of officers

The chair should be an incoming, present or past president of a college of anaesthesiologists/anaesthetists (to be agreed by each college). The role of honorary











secretary should be a CEO of a college of anaesthesiologists/anaesthetists. Both the chair and honorary secretary should come from the same college.

The role of chair and honorary secretary will rotate every two years.

Funding

The IACA will generate funding to support its activities from within its resources in a manner to be agreed from time to time. The IACA may accept unrestricted grants from appropriate third parties. A process for receiving and accounting for third party funding will be agreed at a future date.

IACA Meetings

Frequency of meetings

The IACA will meet at least two times each calendar year. Attempts will be made to ensure at least one face to face meeting every two years.

A quorum consisting of the chair plus representatives from three colleges is required for the meeting to occur. In the absence of the elected chair, the honorary secretary will take the chair. In the absence of both a temporary chair may be nominated by the chair, taken from the membership of the IACA.

Selection of agenda items

Agenda items will be selected by the chair and the honorary secretary of the IACA. IACA members are encouraged to request specific agenda items to be included.

Materials distributed in advance

The materials for the IACA meetings will be circulated a minimum one week in advance.

Activity and Discussions

The IACA will endeavour to achieve consensus to guide its activities and policies.

Efforts will be made to establish relationships between senior staff of member colleges, to facilitate the ongoing and regular dialogue needed to translate committee decisions into operational advances and, ultimately, improved outcomes.

Reporting

The IACA will produce an annual report covering activities, outcomes and strategic priorities. The annual report will be distributed to the member colleges for consideration by council or board of trustees (as appropriate), and dissemination to their fellows, members, staff and public.

The IACA may also publish policy papers on issues relating to its remit, as agreed by the members.

Independence of the IACA

The IACA is an independent, non-statutory entity established at the behest of the recognised colleges of anaesthesiologists/anaesthetists. Although the IACA may have an address of convenience, it shall be operationally distinct and independent of any college of anaesthesiologists/anaesthetists.











Independence of the colleges

The IACA serves to unite the consensus views of the individual colleges by co-ordinating and bringing together a standardisation of practices, a combined response to third parties as well as the generation and implementation of common strategies. However, each college remains statutory within its own right and reserves the right to independently pursue its own agenda where it may seem fit or appropriate.

Outcomes:

Outcomes may be aspirational in the early stages.—The academy will seek to produce tangible benefits to members and patients such as the following:

- Better outcomes for members and patients through the sharing of expertise in education, standards and research in global anaesthesia.
- The deepening of collaborative relationships and global alliances through meetings, discussion, and shared objectives.
- The development of collaborative projects to promote anaesthesia as a specialty, and to demonstrate its impact on global health.

Outputs:

- High quality policies, procedures and training tools/resources.
- Research into changes in the global anaesthesiology workforce and training.
- Library of common resources available for use by member colleges (with authorship acknowledged).
- Collaboration on projects among senior staff of the member colleges where meaningful.
- Participation in WFSA global health initiatives.









