



ACECC Handbook

Containing:

- **ACECC Charter**
- **ACECC Executive Committee Terms of Reference**
- **ACECC Special Interest Group Constitution**
- **Guidelines for Committees Organising Regional Continuing Education and Special Interest Group Meetings**
- **Manual for SIG Executives and Combined Regional/National Continuing Medical Education Committees**

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1. Anaesthesia Continuing Education Co-ordinating Committee Charter

1.1 Purpose

The Anaesthesia Continuing Education Co-ordinating Committee (ACECC) is a tripartite committee of the Australian and New Zealand College of Anaesthetists (ANZCA), the Australian Society of Anaesthetists (ASA) and the New Zealand Society of Anaesthetists (NZSA) (parent organisations) established to promote and co-ordinate combined continuing medical education (CME) activities in anaesthesia and related disciplines in Australia and New Zealand. ACECC reports to the Councils of its three parent organisations.

The parent organisations wish to provide an integrated, effective and efficient continuing medical education service to Australian and New Zealand anaesthetists. This handbook guide the operations of ACECC. The Charter should be read in conjunction with the Special Interest Group (SIG) Constitution, the Guidelines for Committees Organising Regional Continuing Medical Education (CME) and Special Interest Group Meetings, the Memorandum of Agreement (Financial) and the Manual for SIG Executives and Combined Regional/National CME Committees.

1.2 Terms of Reference

The roles of ACECC are to:

1. Facilitate coordination of *combined* CME activities related to anaesthesia in Australia and New Zealand.
2. .
3. Assist CME organising committees in adhering to policies established by parent organisations and ACECC.
4. Sponsor and maintain the SIGs.
5. Maintain a website to support ACECC activities. The website will include links from and to the ANZCA, ASA and NZSA websites.
6. Display combined CME and SIG education material on the ACECC website.
7. Assist organisations providing CME activities to meet the needs of anaesthetists, where appropriate.
8. Maintain a mailing list of anaesthetists for provision of information about combined and SIG CME.

The roles of ACECC do NOT include:

1. Conducting CME meetings.
2. Developing continuing professional development (CPD) programs.

The following require approval of the relevant parent organisations:

1. Budgets for ACECC, administration support, each SIG's administration and each SIG and combined CME event.
2. Changes to the ACECC Charter.

The important people/groups for coordination/communication for ACECC are:

1. ANZCA, ASA and NZSA Councils, Presidents and CEOs/Committees overseeing CME within ANZCA, ASA and NZSA.
2. Combined CME committees of ANZCA and ASA.

3. New Zealand Anaesthesia Education Committee (NZAEC) (a combined committee of the New Zealand National Committee of ANZCA and the NZSA).
4. SIG executives.
5. CPD
6. Staff supporting CME and finance staff within ANZCA, ASA and NZSA.

1.3 Membership

1.3.1 Executive

1. Chair of ACECC
2. Chair, ANZCA ASM Planning and Events Committee
3. ASA education officer
4. NZSA education officer

1.3.2 Voting members

1. Chair of ACECC
2. Chair, ANZCA ASM Planning and Events Committee (or nominee)
3. ASA education officer
4. NZSA education officer
5. Presidents of ANZCA, ASA and NZSA (or their nominees)
6. One representative of the SIG chairs
7. One representative of the combined CME chairs

1.3.3 Guests (non-voting attendees)

1. ACECC website manager
2. ACECC administrative officer
3. ASA chief executive officer
4. NZSA chief executive officer
5. ANZCA chief executive officer
6. Australian regional combined CME chairs
7. NZAEC chair
8. Faculty of Pain Medicine Representative
9. SIG executive chairs
10. ANZCA General Manager Fellowship Affairs
11. ASA Communications Manager

1.3.4 Appointment

The chair will be appointed by the presidents of ANZCA, ASA and NZSA and will rotate among the three parent organisations. The initial appointment of each chair will be for a two-year period. Appointees may have their term extended by a further three years, by mutual agreement of the presidents. When the chair is unavailable to attend a meeting, an interim chair may be appointed by the three presidents. All other appointments to ACECC are ex officio.

1.4 Meetings

The executive may meet by teleconference, as required.

The committee and invited guests will meet face-to-face biannually in association with the ASM and NSC. Members and invited guests unable to attend these meetings may participate by teleconference.

All meetings will be minuted.

A quorum for ACECC will be four (4) voting members with at least one member from each parent organisation. A quorum for the ACECC Executive will be a simple majority (three (3)). Voting will be by a simple majority with the chair having a casting as well as deliberative vote.

1.5 Reporting

ACECC will receive reports from:

1. Each parent organisation.
2. Combined CME committees.
3. SIGs.
4. Conveners of combined CME and SIG meetings (report to include a financial report, statistics and critical review information as specified in the post event report).

ACECC will provide chair-approved unconfirmed minutes to the parent organisations within 28 days of its meetings.

1.6 Administrative Support

Support for the ACECC chair is provided by ANZCA. SIGs and combined CME events will receive administrative support from the parent organisation appointed to provide this administration. The ACECC website is administered by the ASA.

The costs of ACECC's operations (including that of the chair) are funded respectively by ANZCA, ASA and NZSA in the ratio 50:40:10. Each organisation is otherwise responsible for their own costs associated with ACECC activities.

A separate funding agreement between the parent organisations details the financial reporting and accounting obligations of each organisation for ACECC activities.

1.7 Ownership and Protection of ACECC Information

Information drafted, acquired, captured, reviewed, published or disseminated within ACECC is the intellectual property of the parent organisations, each of which shall have full access to all such information.

The copyright of the information published by ACECC or on behalf of ACECC Members is protected and remains always with the parent organisation that provides the administrative or secretarial support to the SIG, combined CME event or ACECC activity responsible for the material. This material may not be reproduced in part or whole without the express permission of ACECC. This caveat is to be included on all ACECC published material.

Any financial value that may be realised through ownership of the intellectual property will be shared by the parent organisations in accordance with the extant funding arrangements.

ACECC will act in accord with privacy legislation requirements in both New Zealand and Australia. Legal responsibility for compliance and enforcement of ownership remains with the respective parent organisations administering the relevant SIG, combined CME or ACECC activity.

1.8 Insurance and Liability

Parent organisations who are responsible for supporting an event or activity where there is a public liability exposure are to maintain appropriate insurance coverage.

Similarly, the parent organisation responsible for publishing material from a SIG or combined CME is responsible for its content. Appropriate liability protection through insurance is to be held by the publishing parent organisation.

1.9 Assessment and Review

ACECC will develop a list of key performance indicators (KPIs) about the functioning of the committee. These KPIs will be reviewed at each ACECC meeting. The ACECC Charter will be reviewed every two years or more frequently at the request of one or more of the parent organisations.

1.10 Dispute Resolution

ACECC is expected to manage its business, financial and analytical processes internally. If a matter cannot be resolved, it is to be referred to a combined meeting of the presidents for review.

1.11 Change Control Register

Version	Author	Reviewed by	Approved by	Changes
1	Committee	Committee	Committee	September 2011
2	Committee	Committee	Committee	August 2012
3	ACECC Secretariat	Committee	Committee	September 2013
4	ACECC Secretariat	Committee	Committee	September 2014 Minor formatting
5	ACECC Secretariat	Committee	Committee	May 2015 Content review

Date of next review	May 2016
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2. ACECC Executive Committee Terms of Reference

2.1 Purpose

The purpose of the ACECC Executive is to assist the Presidents and the Chief Executive Officers (CEOs) in dealing with matters which arise between ACECC meetings that are in need of consideration, action or ratification. Substantive decisions on these matters must be reported to ACECC at its next meeting.

2.2 Terms of Reference

The Executive Committee's roles are to consider and make recommendations to ACECC on:

1. Any changes to the objectives and priorities of ACECC which may become necessary.
2. The financial agreements between the parent organisations.
3. Any changes required to the charters, delegations, rules, regulations, policies, codes and protocols of ACECC member committees.
4. The operation of the SIGs and combined regional/national CME committees and any action necessary with regard to their terms of reference, membership or performance.
5. Reports and proposals of SIGs and combined regional/national CME committees.

In addition, the Chair of ACECC, supported by the Executive, will work with the secretariat to enable ACECC to meet its obligations to the parent organisations, combined regional/national CME committees and SIGs as specified in the constitution and the financial memorandum of agreement.

The Executive Committee has the following delegated authority:

1. The power to supervise the day-to-day business of ACECC.
2. The power to act during intervals between meetings of ACECC in accordance with the power delegated to it. In addition, in cases of emergency, the Executive will have the absolute discretion to exercise such powers and functions as it deems necessary.
3. The power to access such documents as it requires to fulfill its responsibilities and Executive Officers of the parent organisations
4. The authority to invite external advisers to attend committee meetings as requested by the chair.
5. The power to obtain such independent professional advice as is necessary for it to discharge its duties.

The roles of the Executive do not include:

1. Acting on behalf of the ACECC in a manner that exceeds the committee's delegations under the Constitution and these terms of reference.

The important groups for co-ordination and communication for the Executive Committee are:

1. Council of each parent organisation.
2. Administrative support officers of each SIG or combined regional/national CME committee.

2.3 Membership

The Committee consists of:

1. Chair of ACECC
2. Chair of ANZCA ASM Planning and Events Committee (or nominee)
3. ASA Education Officer
4. NZSA Education Officer

2.4 Meetings

The Executive Committee will hold meetings as required and such other meetings as may be requested by a member or parent organisation. Meetings may be held by electronic means.

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

Questions arising at a meeting of the 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% of all voting members vote in favour.

2.5 Reporting

The committee's proceedings will be recorded in minutes which will be included in the papers prepared for the next ACECC meeting after each meeting of the committee. Decisions made electronically will be recorded in the minutes of the next Executive Committee meeting.

The report on each Executive Committee meeting will be circulated to ACECC within 14 days of each committee meeting. As part of such reports, the chair will bring to the attention of ACECC all matters which the committee deems appropriate for the attention of the full ACECC meeting and will seek verbal or email ratification of the recommendations of the committee, unless such matters are to be considered at the next formal meeting of ACECC.

2.6 Administrative Support

Administrative support for the Executive Committee will be provided under the terms of reference of the Constitution.

2.7 Change Control Register

Version	Author	Reviewed by	Approved by	Changes
1	ACECC Committee	ACECC Committee	ACECC Committee	September 2012
2	ACECC Committee	ACECC Committee	ACECC Committee	September 2014 Minor formatting
3	ACECC Secretariat	Committee	Committee	May 2015 Content review

Date of next review	May 2016
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3. ACECC Special Interest Group Constitution

The < insert SIG name here> Special Interest Group Constitution

3.1 Reference

- A. Memorandum of Agreement between Australian and New Zealand College of Anaesthetists
Australian Society of Anaesthetists New Zealand Society of Anaesthetists, dated 27 February 2015..

3.2 Name and Formation

The name of the special interest group (SIG) shall be the < insert SIG name here > Special Interest Group.

The SIG will be formed after consideration and acceptance of such a proposal by each and all of the council/executive committees of the Australian and New Zealand College of Anaesthetists (ANZCA), the Australian Society of Anaesthetists (ASA), and the New Zealand Society of Anaesthetists (NZSA).

3.3 Objective

The major objective of this SIG is the promotion of science and education by:

- (a) The exchange of ideas between anaesthetists with a particular interest and involvement in < insert SIG name here >.
- (b) Interaction with other individuals/groups, who share an interest in < insert SIG name here >.

This SIG shall be responsible through the Anaesthesia Continuing Education Co-ordinating Committee (ACECC), to the parent organisations, namely the ANZCA, ASA and NZSA.

3.4 Membership

Membership will be of two types.

* **MEMBERS:** Fellows of ANZCA, or Ordinary Members of the ASA or NZSA who have a special interest in < insert SIG name here >.

***ASSOCIATE MEMBERS:** People with a special interest in < insert SIG name here > who are not entitled to be full members. They may include Associate Members of the ASA or NZSA, registered trainees of ANZCA, allied health professionals or members of other related professional organisations.

Associate members may only be admitted to membership after nomination by two full members of the SIG and approval by majority at a meeting of the executive committee of the SIG.

3.5 Activities

The activities of the SIG may include:

1. Organisation of SIG scientific sessions at major annual scientific meetings/congresses. Generally, each SIG is entitled to conduct one session during one annual scientific meeting of the ANZCA or ASA or NZSA per year or, alternatively, a satellite meeting of no more than one day in association with the annual scientific meeting. It is the responsibility of the SIG executive committee to decide on whether to request a segment of the scientific programme or a satellite meeting from the organising committee of the chosen annual scientific meeting. This request should be made in writing to the scientific convenor at least one year in advance of the meeting and continual liaison with the scientific program convenor shall be maintained. If any request is denied due to excess other SIGs at the meeting, it is the responsibility of the ACECC to seek inclusion in other major scientific meetings/congresses.
2. Organisation of independent SIG meetings on other occasions with the approval of the ACECC.
3. Advise the ACECC on the suitability of local and overseas experts to participate in meetings.
4. Provide advice to the ACECC on the appropriate standard of care in the area of special interest.
5. Advise the ACECC on the distribution of educational material.
6. Advise the ANZCA, ASA or NZSA on liaison with similar organisations in other regions of the world.

3.6 Administration

1. For administrative purposes the SIG shall negotiate and maintain a secretarial link with one of the parent organisations, i.e. ANZCA, ASA or NZSA, referred to subsequently in this document as the responsible parent organisation (RPO). This link will be confirmed in writing between the SIG and the responsible parent organisation and will apply for a period of six years. It will be reviewed in the fifth year for consideration for extension for a further six year period. The ACECC secretariat is responsible for maintaining a register of the secretariat provider for each SIG and coordinating the review process.
2. The SIG shall have an executive committee of up to ten full members, to represent each state of Australia and the ACT, New Zealand, and the Asia Pacific region. The SIG will determine with flexibility how each region shall best be represented.
3. An Annual General Meeting (AGM) of the SIG shall be held once in every calendar year at such time and place as determined by the SIG executive. Members of the SIG shall receive at least 60 days notice of the AGM.
4. Membership of the SIG executive committee shall be for a period of three years but members may be eligible for re-election for a total period of no longer than twelve years without the approval of the ACECC executive committee.
5. The executive committee shall have the power to co-opt up to five other members, including associate members. Co-opted members of the executive committee will be non-voting members and their position will be reviewed annually.
6. At its first meeting following the AGM of the SIG, the SIG executive committee shall elect, from amongst its members, a chair whose term of office should normally not exceed an aggregate period of three years.

7. The SIG Chair is responsible to ensure that:
 - 7.1. The SIG provides reports to the ACECC twice a year.
 - 6.2 He/she participates in or is represented when the ACECC meets.
 - 6.3 The SIG complies with the financial reporting requirements of the ACECC.
 - 6.4 A strategic plan or intentions for the SIG's development is prepared annually.
 - 6.5 Educational activities are provided for SIG members.
 - 6.6 The SIG executive is effective and complies with Paragraph 4.
7. The executive committee will report on all activities to the ACECC and through it to the council/executive committees of the ANZCA, ASA and NZSA.
8. A report of the SIG shall be prepared in conjunction with the parent body prior to each ACECC meeting and through ACECC to each of the council/executive committee of ANZCA, ASA and NZSA. The received reports may be published in the *ANZCA Bulletin*, the *ASA Newsletter* and the *NZSA Newsletter*.
9. All administrative support for the SIG and chair is provided by the responsible parent organisation. Refer to the Manual for SIG Executives and Combined Regional/National CME Committees for details.

3.7 Financial Structure

3.7.1 Financial Guidelines

1. The stakeholders of the SIGs are the ANZCA, ASA and the NZSA. Reference A is the Memorandum of Agreement setting out the financial arrangements for supporting SIGs. This agreement takes precedence should there be any inconsistency in interpreting this Constitution.
2. These stakeholders are involved on a 50:40:10 basis respectively with respect to finances. These proportions approximately reflect the respective membership numbers of each of the parent organisations.
3. Each SIG will be aligned with a "responsible parent organisation" that is responsible for the reporting by that SIG and for its financial accounting. The parent secretariat will ensure that the SIG accounting is included in the annual audit process and public reporting in the same way as all other aspects of their business.
4. Currently there are 17 SIGs
 - 4.1. Responsible parent organisation - ANZCA:
 - Acute Pain
 - Airway Management
 - Anaesthesia and Critical Care in Unusual & Transport Environments
 - Anaesthetists in Management
 - Cardiothoracic, Vascular and Perfusion
 - Communication in Anaesthesia
 - Diving and Hyperbaric Medicine
 - Medical Education
 - Neuroanaesthesia
 - Obstetric Anaesthesia
 - Perioperative Medicine
 - Rural
 - Trauma
 - Welfare of Anaesthetists

- 4.2. Responsible parent organisation - ASA:
 - Day Care Anaesthesia
 - History of Anaesthesia
 - Regional Anaesthesia
5. Each SIG should aim to be financially self sufficient.
6. The parent organisations assume the financial risk; provide the tax free status and account (under the corporations law) for the financial activities of all SIGs. Both deficits and surpluses are owned wholly by the parent organisations.

3.7.2 Financial Management and Reporting

1. The parent secretarial general ledger is to separately and clearly identify transactions for SIG committees and SIG events in sufficient detail as to allow reporting in the agreed formats.
2. Expenditure relating to the SIG is to be authorised by a representative of the responsible parent organisation.
3. Surpluses generated by SIG meetings or activities will be disbursed by the responsible parent organisation in accordance with Reference A to the parent organisations. When a net deficit occurs, the parent organisations will be required to fund the deficit in the agreed proportions.
4. All expenditure must be only for CME activities and SIG administrative expenses.
5. Expenses incurred by committee members in the organisation of a CME activity must be fully documented for audit purposes. These expenses may be reimbursed and recognised as costs of the event. Committee members may not ordinarily claim living allowances, entertainment expenses, meeting registration fees and travel expenses to attend the event.

3.7.3 Continuing Medical Education Meetings of the SIG

1. A detailed budget should be prepared by the parent secretariat based on the planned activities for the coming year for their approval and submitted to the other parent organisations in accordance with the timeframe outlined in Reference A. It is a guiding principle that CME meetings should overall be self-supporting.
2. A final report, with a financial statement attached, is to be provided in the required format by the parent secretariat within three months of the end of the meeting to the next available ACECC meeting.
3. Funding for invited speakers shall follow the "Guidelines for Committee Organising Regional Continuing Education and Special Interest Group Meetings".

3.8 General

1. The SIG executive committee shall be responsible for ensuring adherence to this Constitution. If difficulties or problems arise with such adherence, the SIG executive committee shall recommend appropriate action to ACECC.
2. The SIG will be disbanded on a recommendation from:
 - 2.1.1 The SIG executive committee to ACECC, which may then recommend on this dissolution to the council/executive committees of ANZCA, ASA and NZSA. Dissolution will only occur if all three parent organisations concur.
 - 2.1.2 Any one or more of the council/executive committees of ANZCA, ASA and NZSA. Dissolution will only occur if all three parent organisations concur.

3.9 Appendix 1 - Special Interest Group Administrative Guidelines

3.9.1 Election of Special Interest Group Executive Committee

1. Every three years, nominations for membership of the executive committee shall be sought from the Membership. It shall be left to the discretion of the special interest group (SIG) executive whether this is on a national or regional basis.
2. Nominations of candidates for election to the SIG executive will be in the prescribed format (Appendix 1) and must be signed by two full SIG members and contain a consent to act if elected signed by the person nominated. Nomination forms must be forwarded to the secretariat at least 45 days before the SIG Annual General Meeting (AGM).
3. If the number of candidates nominated and seconded for membership of the SIG executive does not exceed the number of positions on that committee, the names of all nominees shall be forwarded to the chair in accordance with item 1.8.
4. If the number of candidates nominated and seconded for membership of the SIG executive exceeds the number of vacancies, ballot lists shall be prepared containing the names of nominees in alphabetical order and shall be circulated to SIG members at least 30 days before the SIG AGM.
5. When an election is necessary as established in item 1.4, there shall be a ballot held of all members. Voting must be for the same number of nominees as there are vacancies to be filled. Voting forms must be returned to the secretariat no later than 1700 hours on the closing date of the poll.
6. When a ballot has been held, the chair of the SIG shall appoint two scrutineers to count the votes. The scrutineers must not be presenting for election. They shall notify the chair of the number of votes cast for each nominee. Voting papers which do not comply with item 1.5 shall be declared invalid.
7. Where there is a tied vote for two or more nominees of whom only one can be elected, the chair of the SIG shall exercise a casting vote.
8. The result of the ballot shall be forwarded to the SIG chair before the SIG AGM where those duly elected will be appointed as the SIG executive for the next three years.
9. Members of SIG executive shall be appointed for three years but shall be eligible for re-appointment. Except with the approval of the SIG executive, no member shall serve on an SIG executive committee for longer than twelve years.
10. At its first meeting following the AGM of the SIG, the SIG executive shall elect a chair from amongst its members, a chair whose term of office should not exceed an aggregate period of three years.
11. SIG executives may co-opt up to five other members for a special purpose. Such co-opted members may attend committee meetings at the discretion of the chair but shall have no voting rights. Co-opted members shall be appointed annually by the SIG executive for a maximum aggregate period of three years.
12. Any vacancy occurring during the term of the SIG executive may be filled at its discretion.

3.9.2 Annual General Meeting

The business of the AGM shall comprise:

- A report from the chair on the affairs of the SIG
- A financial report
- The result of the election for elected members of the SIG executive
- Other business as approved by the SIG executive

3.9.3 Quorum

A quorum for SIG executive meetings shall be decided at the first meeting of the new committee and shall be not less than one third of elected and co-opted members.

No business shall be transacted unless a quorum is present within 30 minutes of the appointed time. If a quorum is not present then the meeting shall stand adjourned.

3.9.4 Membership

1.1 Applications for full membership may be by:

- Indication on annual subscription forms of any of the three bodies.
- Application to the secretariat of the responsible parent organisation.
- Application through the ACECC website.

Applications for associate membership should be made on the SIG Application Form and should include nomination by two full members of the SIG.

1.2 The responsible parent organisation will maintain a current list of SIG members to be made available upon request to the three parent organisations, to ACECC and to members of the specific SIG.

3.10 Appendix 2 - Special Interest Group Election to SIG Executive

.....

SPECIAL INTEREST GROUP

Date

ELECTION TO SIG EXECUTIVE

Members of the Special Interest Group (.....SIG) are invited to forward nominations for the SIG executive committee. Each nomination must be signed by two full members of the SIG and contain a consent to act, if elected, by the person nominated, who must also be a member of the SIG. The SIG Executive is presently constituted as follows:

- DR....., *Qld*
- DR....., *NSW*
- DR....., *Vic*
- DR....., *ACT*
- DR....., *Tas*
- DR....., *SA/NT*
- DR....., *WA*
- DR....., *NZ*
- DR....., *Asia Pacific Region*

(The SIG may have an executive committee of up to nine full members, to represent each state of Australia and the, ACT, New Zealand, and the Asia Pacific region.)

Nominations must be returned to ANZCA Headquarters

before 5 pm oninsert date.....

SIG Administrative Officer,
Responsible Parent Organisation

- * *Executive members eligible for re-election*
- ***Co-opted executive members eligible for election*
- ****Executive members not seeking re-election*



We wish to nominate....., a member of the
..... Special Interest Group, as a candidate for election to the Executive of the Special Interest Group.

..... SIG Member
(Signature) (Print Name)

..... SIG Member
(Signature) (Print Name)

I consent to act if elected SIG Member
(Signature of nominee)

3.11 Change Control Register

Version	Author	Reviewed by	Approved by	Changes
1	Committee	Committee	Committee	September 2011
1 amended	ACECC Secretariat	Committee	Committee	September 2014 Minor formatting
1 amended	ACECC Secretariat	Committee	Committee October 2014	Changes to membership numbers 3.6.2 and 3.6.5
2	ACECC Secretariat	Committee	Committee	May 2015 Content review

Date of next review	May 2016
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4. Guidelines for Committees Organising Regional Continuing Education and Special Interest Group Meetings

Established jointly in the names of the Australian and New Zealand College of Anaesthetists, the Australian Society of Anaesthetists and New Zealand Society of Anaesthetists

July 2011

4.1 Reference

1. Memorandum of Agreement Between Australian and New Zealand College of Anaesthetists, Australian Society of Anaesthetists New Zealand Society of Anaesthetists, dated 27 February 2015.

4.2 Introduction

The Australian and New Zealand College of Anaesthetists (ANZCA), the Australian Society of Anaesthetists (ASA) and the New Zealand Society of Anaesthetists (NZSA) run numerous combined regional continuing medical education (CME) meetings, special interest group (SIG) meetings and New Zealand Anaesthesia Education Committee (NZAEC) meetings.

These meetings have been very successful both educationally and financially, while maintaining significant independence from the parent organisations. The three parent organisations have nevertheless retained ultimate responsibility for their activities. ANZCA, the ASA and NZSA have produced this document to provide principles by which such committees can function without diminishing their freedom and enthusiasm.

The College or Society staff member who assists the organising committee for the event is an important knowledge resource. Additional advice and support can be accessed through the Anaesthesia Continuing Education Coordinating Committee (ACECC).

The management of the NZAEC is in accordance with a document entitled "NZAEC Terms of Reference".

4.3 Objectives

The objectives of combined CME events are:

1. To promote and provide continuing education opportunities for anaesthetists and practitioners from related disciplines.
2. To provide a forum for balanced review of new methods and drugs in anaesthesia.
3. To promote high standards of professional performance by anaesthetists.

4.4 Organising Committee

Regional CME Committees and SIGs are responsible, through ACECC, to the parent organisations for the efficient conception, planning and execution of an education event.

The committee will be of a size appropriate for the anticipated activities in the region. A convener will need to be nominated for each meeting. This role does not have to be taken on by the chair of the committee; in fact it is preferable if the two appointments are separate. It may be appropriate to nominate other committee members to take on one or more roles including; scientific program convener, healthcare industry liaison officer, treasurer and social convener. Administrative support for the committee will be provided from the relevant parent organisation.

The chair or his/her nominee will provide a verbal report of activities and finances of the CME committee at the annual general meetings of the regional state committees or the SIG and at other meetings when requested by the parent organisations.

The committee will provide a written report of activities and finances to each ACECC meeting and through the ACECC to the Councils/Executives of the parent bodies. The chair of the SIGs and the regional CME committees (or their nominees) will also attend ACECC meetings, held twice annually at the ANZCA ASM (May) and the ASA NSC (October). Attendance can be via teleconference.

The committees should familiarise themselves with the ACECC Charter and the SIG Constitution.

4.5 Topic, Venue and Timing

Selecting an appropriate topic, venue and time are crucial to the success of the meeting. Criteria to consider when selecting a venue are: size in relation to the number of delegates and HCI exhibitors, accommodation options, transport, audio visual requirements, cost and quality of the venue and catering. Once a preferred venue has been determined, the administrative staff member will undertake negotiations with the venue and ensure the contract is suitable for the parent organisation to sign. For a new venue site inspections, if required, will normally be undertaken by the secretariat. In exceptional circumstances a committee member may undertake a site inspection. This must previously have been approved and included in the event budget.

When selecting a topic and date for the conference it is important to consider what other events are on at around the same time locally, nationally and internationally. It would be expected that no meeting would be staged ten (10) days either side of the Annual Scientific Meeting (ANZCA) or the National Scientific Congress (ASA), or the New Zealand Society Meeting (NZSA) unless of course the meeting was being included as a satellite or stream of such a meeting. The ACECC website (www.acecc.org.au) has a comprehensive list of future meetings. It is also worth checking that the meeting does not clash with any ANZCA exams, large sporting events, festivals and other major conferences in the same town.

4.6 Publicity and Promotion

Advertising the conference is crucial to its success.

Firstly inform the parent organisations and enter the event on the ACECC website.. Contact the ASA if you have any difficulty with entering the event on the ACECC website. Ideally registration should be possible online by linking from the conference details on the ACECC and parent organisations' websites.

As the conference approaches ask the parent organisations to promote the meeting as an upcoming event on their websites' front page.

Broadcast emails from the parent secretariat providers targeted at the likely registrants may be requested. The communication policy of the parent secretariat provider should be taken into consideration.

Circulation of brochures and advertising in the ANZCA, *ASA and NZSA Newsletters* and *ANZCA Bulletin* should also occur.

4.7 Planning and Organisation

The administrative staff responsible for the committee will act as the conference organiser for the event and can undertake the majority of work involved with organising it.

The organisers of the SIG meeting, if having a session at one of the parent organisations annual scientific congress or meeting, should provide to the organising committee the SIG session program as early as possible but no later than six months prior to the meeting.

Determining a project plan early on helps all involved know who is responsible for each component and when items need to be completed. An example of an event project plan is included as Appendix 1 for information.

At the conclusion of the event a Post Event Report is to be provided to the next ACECC meeting.

4.8 Speakers

Speakers from outside the Fellowship can greatly enhance the scientific program. However, their expenses need to be considered in the overall budget. In general, it is wise to select speakers from outside the Fellowship who live in the region in which the meeting is being held. The meeting convenor should ensure that no particular part of the program includes an excessive number of funded speakers.

Following discussions with the responsible parent organisation the meeting convenor or the organising committee should approach invited speakers in the first instance. Formal invitations and further communications about the arrangements of sessions will be organised by the responsible parent organisation and signed by the scientific convenors. The letter should clearly set out the financial arrangements and entitlements.

The meeting budget for larger meetings may be able to cover the costs of inviting one or more international speakers and one or more local non-fellow speakers. Additional speakers can be funded if sufficient income is available to cover their costs. Smaller meetings are unlikely to be able to afford an international speaker unless the parent bodies agree to make extra funding specially available. If a SIG wishes to invite an additional overseas or local speaker approval must sought from the ACECC Executive Committee in advance.

Please refer to Appendix 2 for the Guidelines on the Sponsorship of Speakers.

International and local (Australian and New Zealand) non-fellow speakers who are not in current anaesthesia or related practice or who are keynote invited speakers from outside the state/country are entitled to return airfares from their place of residence, accommodation for the duration of the conference and registration including all social events. Speakers whose flights are over four hours are entitled to business class airfares, speakers whose flights are shorter than four hours will be entitled to economy class airfares. Travel to other areas for personal reasons is not included. Travel expenses of any accompanying persons are also not included. Visitors should be encouraged to book early in order to take advantage of discounted fares.

Should the speaker wish to travel with their partner, and two economy fares are cheaper than the one business class fare, then the meeting will cover the two airfares. However, the flights must be direct from their home location to the meeting destination. Leisure travel will not be covered, even in the instance that it falls under the price of the business class airfare

Table: Funding of Invited Speakers Speaker	Funding
Fellows or trainees of ANZCA or FPM	No reimbursement of any expenses* Must register for the meeting, however a session only registration may be offered for Fellows only presenting in their session
Medical practitioners from outside the specialties of Anaesthesia and pain medicine	Eligible for reimbursement of expenses
Non-medical speakers	Eligible for reimbursement of expenses**

* Reimbursement may be possible in exceptional circumstances. Applications should be made to ACECC through the responsible parent organisation.

** Professional speaking fees must be considered in the meeting budget.

In exceptional circumstances variations to the above may be granted through application by the responsible parent organisation through ACECC

4.9 Healthcare Industry

Combined CME meetings have been fortunate to have been supported by the healthcare industry (HCI). These meetings are a good opportunity for industry representatives to meet anaesthetists outside of the operating theatre environment.

The Medicines Australia Code of Conduct is an important resource in determining what sponsorship opportunities the event can offer (<https://medicinesaustralia.com.au/code-of-conduct/code-of-conduct-current-edition/>).

A personal approach by a specialist anaesthetist is far more effective than just sending out a letter or an approach by administrative staff in gaining sponsorship for meetings.

When an organising committee wishes to provide prizes of monetary value to encourage participation in educational activities including, but not limited to, presentations, the value of such prize is to be included in the budget proposal and it is to be a cost of the event. The maximum value of such a prize must not exceed \$1,000. A prize that is funded by a sponsor is only required to be included in the budget when the sponsor provides a monetary value for the prize, that is, it is not an 'in kind' prize. Irrespective of prize funding, the arrangement must be consistent with Medicines Australia Code of Conduct.

4.10 Financial Management

4.10.1 General

Prudent and meticulous financial management is essential. The meetings can generate significant income and expenditure and must be managed professionally. Ultimately the responsible parent organisation is responsible for the financial efficacy of the meeting and, as such, will take a large degree of interest in overseeing the financial management process.

All financial transactions will be conducted through the finance department of the respective responsible parent organisation

4.10.2 Budgeting

The financial agreement setting out the administrative arrangements is in the Memorandum of Agreement Between Australian and New Zealand College of Anaesthetists, Australian Society of Anaesthetists New Zealand Society of Anaesthetists, dated 27 February 2015. . This agreement takes precedence should there be any inconsistency in interpreting these guidelines.

The responsible parent organisation creates a draft their budget for all CME activities as part of the annual budgeting process.

As a guiding principle, all CME activities should be self supporting. A planned surplus of 10% should be budgeted for.

4.10.3 Financial Reporting

The finance department of the responsible parent organisation is responsible for establishing processes to receive income and pay for event expenses in accordance with the Memorandum of Agreement Between Australian and New Zealand College of Anaesthetists, Australian Society of Anaesthetists New Zealand Society of Anaesthetists, dated 27 february 2015.

A final financial report will be completed as soon as possible after the end of the meeting, but in any case no later than three months from the end of the meeting.

All expenditure from the accounts must only be used for CME and related activities and must be verified by receipts.

Expenses incurred by committee members in the organisation of a CME activity must be fully documented for audit purposes. Reimbursement may be paid from the event account.

Committee members may not ordinarily claim living allowances, entertainment expenses, meeting registration fees and travel expenses to attend the event.

4.11 Setting Registration Fees

Registration fees should be set to make a 10% surplus on the expected number of delegates. Generally there will be two main categories of registration fees; full registration and ANZCA trainee and allied health. The ANZCA Trainee/Allied Health level is set at 75% of full registration plus social event costs. It may be appropriate to include day registration and early bird registrations. If enough delegates are expected to attend to cover these costs retired anaesthetists can be offered a discount or even an exemption from registration fees but will need to cover the cost of all social events.

Consideration should be given to including some or all of the costs for social events in the full registration fee. Social events for accompanying persons should have a fee set equal to the cost of the event plus GST.

4.12 General

Questions regarding compliance with this document should be directed to ACECC through the responsible parent organisation in the first instance, and then to the executives of the parent organisations.

4.13 Appendix 1 - Planning Timetable

A plan needs to be established early in the organisation process and must be catered to include all the requirements of the individual meeting. A template plan is included below as a guide.

DATE	TASK	RESPONSIBILITY	STATUS
One year out	Conference Venue and date	Committee / Conference Organiser	
	Determine Organising Committee	Committee Chair	
	Finalise venue contract / pay deposit	Conference Organiser	
	Block book accommodation	Conference Organiser	
	1 st announcement flyer (ANZCA, ASA, NZSA, ACECC)	Conference Organiser	
	Draft time line	Conference Organiser	
	Prepare preliminary budget	Conference Organiser	
	Set up meeting on ACECC website and advertise on international meeting websites	Conference Organiser	
9 months out	Finalise social events	Conference Organiser	
	Review budget and set registration fee structure	Conference Organiser / Committee	
	Establish speaker entitlements	Committee	
	Call for Abstracts	Conference Organiser	
	Invite overseas speakers	Convenor/ Conference Organiser	
	Conference Theme	Convenor/Committee	
	Invite Trade	HCI Liaison / Conference Organiser	
	Establish overview of program	Convenor	
6 months out	Send formal invitations to local speakers	Convenor/ Conference Organiser	
	Finalise program timing/content	Convenor	
	First draft preliminary program, registration brochure	Conference Organiser	
	Finalise budget	Conference Organiser /Convenor	
	CPD Credit requests (ANZCA , other Colleges if appropriate)	Conference Organiser	
	Set up meeting on database	Conference Organiser	
5 months out	Follow up potential sponsors and exhibitors	HCI Liaison/ Conference Organiser	
	Send out Registration Brochure	Conference Organiser	
4 months out	Collect speakers abstracts	Conference Organiser	
	Review numbers and advertising	Convenor	
	Cut off for papers		
3 months out	Prepare nametags	Conference Organiser	
	Organise satchels	Conference Organiser	
	Review technical program and meeting room allocation	Conference Organiser /Committee	
	Agree video / audio recording of sessions	Committee	
	Identify and invite session chairpersons	Convenor	

	Follow up potential sponsors and exhibitors	HCI Liaison/PCO	
	Update all speakers on technical program	Conference Organiser	
	Agree room set up for all sessions	Convenor	
	Prepare handbook/abstract book	Committee/ Conference Organiser	
2 months out	Call for Papers Cut		
	Select menus for all functions	Conference Organiser	
	Prepare audio visual schedule	Conference Organiser	
	Gifts for speakers? Select if desired	Committee	
	Release unbooked accommodation	Conference Organiser	
	Review registration numbers – re-advertise if necessary	Conference Organiser	
1 month out	Confirm travel schedules for speakers	Conference Organiser	
	Agree signage	Conference Organiser	
	Print Handbooks and any other publications	Conference Organiser	
	Receive running sheets for conference from venue	Conference Organiser	
	Confirm meet and greet arrangements for keynotes and speakers	Convenor	
	Check speakers / chairman / committee registered	Conference Organiser	
	Arrange for poster display boards (if required)	Conference Organiser	
	Review budget / registration numbers	Conference Organiser	
	Collect satchel inserts	Conference Organiser	
	Prepare questionnaires (if required)	Conference Organiser	
2 weeks out	Advise final catering numbers to venues	Conference Organiser	
	Review AV requirements	Conference Organiser	
	Print nametags, tickets, attendance certificates	Conference Organiser	
	Print delegates lists, prepare handouts	Conference Organiser	
	Pack satchels	Conference Organiser	
	Post boxes	Conference Organiser	
	Ring to check boxes have arrived	Conference Organiser	
Conference	Enjoy!		
Post conference	Final invoices	Conference Organiser	
	Thank you letters - speakers, trade	Convenor/ Conference Organiser	
	Prepare conference report	Convenor/ Conference Organiser	
	Finalise debtors and creditors	Conference Organiser	
3 months after event	Final financial report	Conference Organiser	

4.14 Appendix 2 - Guidelines for Sponsorship of Speakers

The three parent organisations of ACECC (ANZCA, ASA and NZSA) have a mutually-agreed policy regarding sponsorship of speakers at their major and regional meetings.

1. All speakers who accept sponsorship (from the meeting, the organisation or the HCI) must disclose this sponsorship in all printed material related to the meeting and at the beginning of their presentation. This applies particularly to speakers accepting sponsorship from the healthcare industry.
2. The sponsorship policy for Fellows and Members is as follows:
 - 2.1 At the *SIG and CME meetings*, Fellows and Members who are invited to speak on the program will not be sponsored from the meeting budget, by the organisation or by the HCI with the exception of:
 - 2.1.1 A small number of suitably-qualified Fellows or Members who are invited to be **keynote** speakers at the meeting and may be sponsored by the meeting budget, the organisation or by HCI. Generally, keynote speakers should be chosen by the organisers and then suitable HCI sponsorship should be sought.
 - 2.1.2 Keynote speakers offered by the HCI will be accepted at the discretion of the organising committee in consultation with the education officer (or equivalent) of the responsible parent organisation, keeping in mind the balance of the meeting and the potential for conflicts of interest.
3. The policy for industry-sponsored sessions (such as “breakfast sessions”) is as follows:
 - 3.1 These sessions must be conducted in accordance with the Medicines Australia Code of Conduct or New Zealand equivalent.
 - 3.2 Fellows or Members who are invited to speak at these sessions must:
 - 3.2.1 Discuss their involvement with the meeting organisers to ensure against conflicts of interest.
 - 3.2.2 Disclose at the session any sponsorship that arises from their participation in the session.
4. In relation to promotional or educational material (such as CDs or printed material) which arise from an HCI-sponsored session in the main program of meetings:
 - 4.1 Permission to publish any material arising from a presentation must be sought from the parent secretariat organisation, as well as from the sponsored speaker.

4.15 Change Control Register

Version	Author	Reviewed by	Approved by	Changes
1	Committee	Committee	Committee	September 2011
2	ACECC Secretariat	Committee	Committee	September 2014 Minor formatting. Inclusion of event timing clause in 4.5
3	ACECC Secretariat	Committee	Committee	May 2015 Content review

Date of next review	May 2016
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5. Manual for SIG Executives and Combined Regional/National CME Committees

5.1 Abbreviations and Definitions

ACECC	Anaesthesia Continuing Education Co-ordinating Committee
AGM	Annual General Meeting
ANZCA	Australian and New Zealand College of Anaesthetists
ASA	Australian Society of Anaesthetists
ASM	Annual Scientific Meeting (ANZCA and NZAEC)
CME	Continuing Medical Education “Activities that provide educational opportunities”
CPD	Continuing Professional Development “Recording of activities to demonstrate compliance”
Ex-officio	“By virtue of office” (i.e. not a personal appointment)
FPM	Faculty of Pain Medicine (ANZCA)
NSC	National Scientific Congress (ASA)
NZA	New Zealand Anaesthesia
NZAEC	New Zealand Anaesthesia Education Committee
NZNC	New Zealand National Committee (ANZCA)
NZSA	New Zealand Society of Anaesthetists
SIG	Special Interest Group

5.2 Introduction

Congratulations on your election to a SIG executive or combined regional/national CME committee!

Our SIGs and combined regional/national CME committees provide outstanding support and educational opportunities for anaesthetists in Australia and New Zealand, and this is largely due to your hard work. The three parent organisations, ANZCA, ASA and NZSA, thank you for your interest and hope that your involvement is fulfilling and enjoyable.

The main benefits of involvement in these committees are intangible. You are able to shape the future of the specialty in your territory, state or country, or in your sub-specialty area, through contributions to education and training, continuing professional development and standard setting, and provide CME opportunities and advocacy for your members. In addition, you are able to gain valuable experience in committee work and chairing. Finally, you are able to accrue CPD points for committee work that will comply with the CPD standard for anaesthetists in Australia and New Zealand.

The combined CME activities of ANZCA, the ASA and NZSA are overseen by their tripartite committee called ACECC. Further information on ACECC can be found in this manual.

This manual is also available on the ACECC website (www.acecc.org.au):

Resource documents for NZAEC are:

1. The NZAEC Terms of Reference
2. The NZSA ASM Manual

Assistance to SIG executives and combined regional/national CME committees is available from:

1. The chair of ACECC.
2. The staff of the responsible parent organisation.
3. The Chair of the ANZCA ASM Planning and Events Committee or the education officers of the ASA or NZSA.
4. The presidents and CEOs of the three parent organisations.

The parent organisations are identified in alphabetical order in this and other ACECC documents (i.e. ANZCA, ASA and NZSA). However, each body has an equal role in the governance of our shared CME activities, with surpluses/expenses split in agreed proportions based on membership. The three organisations are committed to supporting the ACECC and the SIGs, and through them providing high quality educational opportunities for our members.

This manual is revised and updated annually at an ACECC meeting, with input from members and staff of the three parent organisations as well as Members of ACECC.

5.3 Anaesthesia Continuing Education Co-ordinating Committee

5.3.1 Overview

ACECC was established by ANZCA, the ASA and NZSA to promote and co-ordinate *combined* CME activities in anaesthesia and related disciplines in Australia and New Zealand. ACECC reports to the council/executive committees of its three parent organisations and is composed of ex-officio members from the three parent organisations, SIG executive chairs, combined regional/national CME committee chairs and an ACECC chair who is appointed by the presidents. ACECC is the overarching governance committee for the SIGs and for the combined regional/national CME activities of ANZCA, the ASA and NZSA.

The SIGs were established with the goal of bringing people with sub-specialty interests together under the umbrella of the three parent organisations, obviating the need for independent sub-specialist societies. The SIGs are governed by executives that are elected by the SIG membership. The SIG executives report through ACECC to the council/executive committees of the three organisations.

Combined CME events, between ANZCA regional committees and ASA state committees in Australia, and the NZNC and NZSA in New Zealand, have long been a feature of CME calendar in our region. In some Australian regions, there is a standing combined CME committee and in other regions, committees are formed to organise specific events. In New Zealand, combined CME activities (and some other combined activities) are overseen by the NZAEC, a combined standing committee of the NZNC and NZSA.

The ANZCA ASM, ASA NSC and other individual CME activities offered by the three parent organisations are not governed by ACECC, although the SIGs may be invited to organise sessions or workshops at these events.

5.3.2 Roles

The ACECC Charter sets down the principles that guide the operations of ACECC. In brief, the roles of ACECC are to:

1. Convene ACECC business meetings at the ANZCA ASM, ASA NSC and at other times as required.
2. Receive reports from SIG executives and combined regional/national CME committees regarding their activities.
3. Maintain the ACECC website.
4. Promote, coordinate and assist SIG and combined regional/national CME committee events.
5. Maintain a mailing list for provision of information about combined CME events.

5.3.3 Meetings

ACECC considers the following issues at its meetings:

1. ACECC issues
 - 1.1. ACECC charter
 - 1.2. ACECC website
 - 1.3. ACECC administration
 - 1.4. Reports from the three parent organisations
 - 1.5. This manual
2. SIG issues
 - 2.1. SIG constitution
 - 2.2. SIG meeting guidelines
 - 2.3. Individual SIG reports

- 2.3.1. Annual report
- 2.3.2. Executive minutes
- 2.3.3. Budgets (in advance for SIG support and for events)
- 2.3.4. Post-event reports (containing narrative report and Standard Event Report [the agreed financial report])
- 2.3.5. Annual financial reports
- 2.3.6. Special project reports

3. Combined regional/national CME issues

- 3.1. Individual region reports
 - 3.1.1. Budgets (in advance for events)
 - 3.1.2. Post-event reports (containing narrative report and Standard Event Report [the agreed financial report])

5.3.4 Administration

ACECC is supported by the three parent organisations (ANZCA, ASA and NZSA):

- 1. Administrative assistance to ACECC is provided by ANZCA
- 2. ACECC website support is provided by the ASA
- 3. Expenses of the ACECC chair are covered by ANZCA

All the costs of ACECC incurred as above are split in the ratio 50:40:10 between ANZCA, the ASA and the NZSA. The reconciliation for ACECC costs between the three organisations occurs annually in arrears.

5.4 Special Interest Groups

5.4.1 Governance

5.4.1.1 Establishment

SIGs are established following the approval of each council/executive committee of ANZCA, the ASA and the NZSA. There are currently 17 SIGS:

- 1. Acute Pain
- 2. Airway Management
- 3. Anaesthesia and Critical Care in Unusual and Transport Environments (ACCUTE)
- 4. Anaesthetists in Management
- 5. Cardiothoracic, Vascular and Perfusion
- 6. Communication in Anaesthesia
- 7. Day Care Anaesthesia
- 8. Diving and Hyperbaric Medicine
- 9. History of Anaesthesia
- 10. Obstetric Anaesthesia
- 11. Medical Education
- 12. Neuroanaesthesia
- 13. Perioperative Medicine
- 14. Regional Anaesthesia
- 15. Rural
- 16. Trauma
- 17. Welfare of Anaesthetists

Groups of Members of ANZCA, the ASA and NZSA wishing to establish a SIG must put together a rationale and business plan for presentation at the council/executives committee meetings of the parent organisations. The group will need to establish the need for the SIG and the level of interest amongst members of the parent organisations.

5.4.1.2 Constitution

At inception, each SIG adopts the generic SIG Constitution, as developed by the three parent organisations. The generic SIG Constitution is revised regularly by ACECC. The key elements of the SIG Constitution are:

1. Membership of the SIG.
2. Administration of the SIG.
3. Annual general meetings of the SIG.
4. Election and meetings of the SIG Executive.
5. The roles of the chair of the SIG Executive.
6. Financial management of the SIGs.
7. Reporting requirements to ACECC.
8. Guidelines for management of SIG educational events.

5.4.2 SIG Activities

5.4.2.1 Range of Activities

All activities of the SIGs require approval from the parent organisations (ANZCA, ASA and NZSA), either through the budget process, through standing delegations or through separate approval of extraordinary items. The range of activities of SIGs includes but is not limited to:

1. Holding AGMs and SIG executive meetings.
2. Establishing subcommittees or working parties for special purposes.
3. organising CME meetings and workshops:
 - 3.1 A session at ANZCA ASM or ASA NSC each year.
 - 3.2 Satellite meetings to ANZCA ASMs or ASA NSCs.
 - 3.3 Free-standing meetings alone or in combination with other SIGs or other organisations.
4. Advising the parent organisations on matters of sub-specialty interest.
5. Developing guidelines, resource documents or other educational material for the benefit of SIG members and the profession at large.

5.4.2.2 Organising CME Events

ACECC has published guidelines for organising committees of CME events and these guidelines must be followed by SIG executives, organising committees and staff. These guidelines include:

1. Forming the organising committee.
2. Topics, venue and timing.
3. Publicity and promotion.
4. Planning and organisation.
5. Speakers.
6. Healthcare industry.
7. Financial management.
8. Post-event reporting.

5.4.2.3 Other Activities

SIG executives are welcome to propose new areas of activity that are relevant to their members. These activities must be approved in advance by ACECC. Such activities may include establishing a subcommittee or working party, developing guidelines or educational resources, or providing prizes for free papers, posters or other educational or research activity by SIG members.

In order to promote proper planning and protect against risk, proposals for new activities to SIG executives and ACECC must be accompanied by written proposals, terms of reference and business plans as applicable. These proposals need not be lengthy or complex: they simply need to state the objectives of the proposal, the support required, the draft budget, timelines for completion and proposed evaluation of outcomes. The parent secretariat staff and the Chair of the ANZCA ASM Planning and Events Committee or education officers of the ASA or NZSA are available to assist SIG chairs with developing the necessary documents.

5.4.3 The SIG Executive Chair

5.4.3.1 Roles

The roles of the SIG Executive chairs are to:

1. Chair the SIG AGM and ordinary meetings of the SIG executive.
2. Establish the strategic plan of the SIG.
3. Lead the business of the SIG with the assistance of the SIG executive and staff.
4. Attend ACECC meetings with written reports to report on SIG activities.

5.4.3.2 Procedures for New Chairs

The SIG executive chair is elected at the first meeting of the SIG executive following the SIG AGM. The total aggregate term of the chair will not exceed three years without the approval of ACECC.

Upon taking office, the chairs will receive a welcome letter from the ACECC chair as well as:

1. This manual containing:
 - 1.1 The ACECC charter
 - 1.2 ACECC Executive Terms of Reference
 - 1.3 ACECC SIG constitution
 - 1.4 Guidelines for Committees organising regional continuing education and special interest group meetings
 - 1.5 Manual for SIG executives and combined national/regional continuing medical education committees.

New chairs are advised to seek the following on assumption of the chair:

1. A comprehensive handover from the outgoing chair.
2. Contact with the staff at the responsible parent organisation.
3. Contact with the convenors of upcoming SIG events (if not the outgoing chair).
4. The current strategic plan of the SIG.
5. Recent minutes and annual reports from the SIG.
6. The dates of upcoming SIG Executive and ACECC meetings.

5.4.3.3 Establishing a Strategic Plan

The strategic plan of each SIG should be discussed at the first meeting of the SIG Executive held after the AGM. The strategic plan for the SIG need not be elaborate. The minimum activity level for a SIG is to:

1. Hold an AGM;
2. Prepare an annual report for the previous calendar year of the SIG activities for ACECC prior to the end of the second week in January that will be presented to the ACECC meeting held at the ANZCA ASM;
3. Prepare a written report for presentation to the ACECC meeting held at the ASA NSC dealing with SIG activity since the last ACECC meeting and future plans.

Otherwise, SIG executives may choose to:

1. Maintain the current level of activity in terms of meetings, CME events and special projects.
2. Increase the level of activity – add meetings, CME events and/or special projects.
3. Decrease the level of activity – discontinue meetings, CME events and/or special projects.

5.4.3.4 Chairing SIG Executive Meetings and AGMs

5.4.3.4.1 Standard Meeting Procedures

SIG executive meetings and AGMs are conducted according to standard meeting procedures, whether they are conducted as teleconferences or face-to-face meetings. AGMs are held once a year, at the ANZCA ASM, ASA NSC or a free-standing meeting of the SIG.

1. Welcome – introduction of members, observers and staff.
2. Apologies.
3. Call for declaration of conflicts of interest.
4. Approval of previous minutes.
5. Business arising from previous minutes not covered elsewhere in the agenda.
6. Business on notice (including approval of budgets and receipt of financial reports).
7. Other business.
8. Close and date of next meeting.

5.4.3.4.2 Resolutions of Meetings

SIG chairs are advised to require background papers and written recommendations for items that require the approval of the SIG Executive, ACECC or the council/executive committees of the three parent organisations. Here is an example of a recommendation:

Recommendation

from the Chair

1. **That the Rural Special Interest Group establishes a working group to consider training of non-specialist anaesthetists in Australia.**
2. **That the attached terms of reference for the working party are approved.**

The chair may move the recommendation “from the Chair” without a seconder, or the chair may seek a nominator (usually the author of the recommendation) and a seconder from among the members. The recommendation is then put to the vote (by a show of hands at a face-to-face meeting or on the voices at a teleconference). According to the SIG constitution, recommendations are approved by a majority of voting members present and voting. Recommendations will appear in the minutes as follows:

Recommendation

from the Chair

1. That the Rural Special Interest Group establishes a working group to consider training of non-specialist anaesthetists in Australia.
2. That the attached terms of reference for the working party are approved.

Carried

5.4.3.4.3 Attending ACECC Meetings

The SIG executive chairs or their nominees are required to attend, either in person or by telephone, and provide a written report to ACECC meetings held at the ANZCA ASM and ASA NSC, in order to report on SIG activities, provide feedback to the parent organisations and have input into SIG governance. The expenses of SIG executive chairs who attend these meetings in person will not be reimbursed. SIG executive chairs or their nominees are also required to attend any ACECC teleconferences or email polls that are convened.

5.4.4 SIG Administration

5.4.4.1 Selection of a responsible parent organisation

Under the SIG Constitution, each SIG negotiates a secretarial link with one of the parent organisations. This link is confirmed in writing between the SIG and the responsible parent organisation and applies for a period of six years. The link is reviewed in the fifth year for consideration for extension for a further six year period.

5.4.4.2 Relationship between SIG Executive and Staff

SIG executives and chairs often work closely with the staff of their responsible parent organisation and rely on these staff to assist them with SIG activities. Each staff member has a job description which includes details about how they will support the activities of the SIGs. However, it is important to remember that staff members do not report to the SIG executive or chairs, but to their own manager within the parent secretariat organisation. It is expected that communication between SIG executive members and staff will meet normal social standards of respectfulness. Staff members welcome feedback about positive aspects of their performance, but if a SIG executive member is concerned about the performance of a staff member, this is best raised with the staff member's manager or a member of the council/executive committee of the parent organisation concerned. This does not apply to minor things such as amendments to minutes that can be directly raised with the staff member.

5.4.4.3 Services of the responsible parent organisation

The parent secretariat provides the following services as required to the SIGs:

1. Administrative assistance to SIG executive and membership
 - 1.1. SIG executive meetings
 - 1.2. SIG subcommittee and working party meetings
 - 1.3. AGM
 - 1.4. Elections
 - 1.5. General administration
 - 1.6. Budget development
 - 1.7. Narrative and financial reports
 - 1.8. SIG pages on ACECC and parent organisation websites
 - 1.9. Management of correspondence to SIG executive and chair
 - 1.10. Maintaining files and alerting chair to outstanding action

2. Event management
 - 2.1. Meetings of organising committee
 - 2.2. Budget development
 - 2.3. Venue
 - 2.4. Advertising (taking note of the guidelines for ACECC branding on promotional material)
 - 2.5. Printing
 - 2.6. Registrations
 - 2.7. Assistance at the meeting
 - 2.8. Post-event reporting.

5.4.5 SIG Finances

5.4.5.1 Preparing the Annual SIG Budget

The annual SIG budget is a working document that outlines the plans of the SIG for the following year. It is important to note that, in line with the financial management practices of the three parent organisations, budgets must be prepared and approved in advance. Unbudgeted activity is strongly discouraged and, if it occurs, must be in accordance with the ANZCA/ASA/NZSA Memorandum of Agreement (see SIG delegations). The forecast financial outcome for the SIG will normally be influenced by how active the SIG is with respect to holding CME events. The SIG administrative staff and the finance departments of the parent secretariats are key resources for SIG executives when planning their annual budgets.

5.4.5.2 Timelines

5.4.5.2.1 SIGs hosted by ANZCA (calendar year budgeting)

August	Planning by SIG executive and event convenors completed
September	Parent secretariat prepares budget based upon planned activities
October	SIG budgets included in ANZCA annual budget
November	Budget approved by ANZCA council
Dec/Jan	Budgets circulated to ASA and NZSA for approval

5.4.5.2.2 SIGs hosted by the ASA or the NZSA (financial year budgeting)

March	Planning by SIG executive and event convenors completed
April	Parent secretariat prepares budget based upon planned activities
May	SIG budgets included in ASA/NZSA annual budget
June	Budget approved by ASA council/NZSA executive
June/July	Budgets circulated to ANZCA and ASA/NZSA for approval

5.4.5.3 Staff expenses

The rate of recovery for staff expenses has been agreed between ANZCA, the ASA and the NZSA and these rates will be used to budget the support time required. It is important to note that the staff time required for SIG support and for CME event support are budgeted separately.

5.4.5.4 Administrative support

The SIG executive should attempt to predict all meetings of the SIG and its subcommittees and working parties, and any activity such as the development of guidelines or resource documents, or surveys of the SIG membership. As this aspect of SIG activity usually has no income, it is necessarily budgeted for a deficit.

5.4.5.5 Event budgeting

Budgets for CME events must forecast a 10% surplus and must include all income and expenses including staff expenses of the responsible parent organisation. Site visits by the staff or event convenors are rarely necessary, but if they are deemed to be required, they must be included in the event budget.

5.4.5.6 Financial Reporting and Reconciliation

Financial reports known as standard event reports (SERs) comparing actual performance to budget are prepared by the finance department of the parent secretariat and are included as an appendix to the post event report. The post event reports are presented no later than 30 days before each ACECC meeting. Surpluses (deficits) are distributed (invoiced) annually with transfers no later than 1 March in arrears. All the costs of the SIGs are split in the ratio 50:40:10 between ANZCA, the ASA and the NZSA.

5.4.6 SIG Delegations

5.4.6.1 Unbudgeted Expenditure

There is no delegation of unbudgeted expenditure to SIGs. All unbudgeted expenditure by a SIG member, the SIG executive or staff on behalf of the SIG must have the prior approval of the responsible parent organisation, in accordance with the ANZCA/ASA/NZSA financial Memorandum of Agreement.

5.4.6.2 Surveys

Any survey that a SIG executive proposes to send to its members must be approved by the responsible parent organisation and that organisation's survey review process (if applicable). The responsible parent organisation reserves the right to request revision of the survey and to restrict circulation of the survey to a sub-set of the SIG membership. Surveys do not require the approval of all three parent organisations.

5.4.6.3 Other Activities

SIG executives should be guided by the SIG Constitution, the chair of ACECC and the staff of the parent secretariat when determining whether an activity needs prior approval or not.

5.4.7 Guidelines for SIG Chairs Convening Scientific Meetings

5.4.7.1 General Information

- The purpose of these guidelines is to assist Session Chairs at scientific meetings to ensure that sessions run smoothly, professionally, and to time, as well as providing the audience with optimum value material in an educational setting.
- The organising committee and / or meeting convenor invite the presenters.
- If the Chair is not available to convene the meeting then they may nominate in conjunction with the executive committee a convenor for the meeting.

5.4.7.2 Prior to the Meeting

- Contact the presenter(s) and discuss expectations and format of meeting.
- Familiarise yourself with the material to be presented, provide recommendations and discuss any concerns with the presenter.
- If the session chair invited the presenter then the topic and title of presentations should be confirmed at the time of invitation.
- Discuss with the presenter the duration of the presentation, allowing time for questions.
- Advise presenters to have prepared at least two or three questions so to encourage and promote group discussion.

5.4.7.3 **At the Meeting**

- Introduce yourself to the presenter(s) and:
 - Review presentations.
 - Ask how they would like themselves to be introduced including titles.
 - Clarify the pronunciation of names of which you may be unsure.
- Establish time frames with your presenters so that they are aware of their time allocation and that this should be adhered to.
- Remind the group that any recording or videoing of the meeting should be discussed with the session chair whom in turn will check with the presenter.
- Presenters have a right to request that their presentation not be recorded. Advise group that this should be respected.
- Encourage active participation involvement, monitor questions and times and if required start the question time.
- Guide the question time and maintain professionalism during questions. Immediately end any prolonged anecdotes, rudeness, larrikinism and / or personal point-scoring.

5.4.7.4 **At the end of the meeting - at conclusion of final session**

- Thank attendees and presenter(s).
- Remind attendees regarding the evaluation survey – on most occasions this will be sent immediately following the conclusion of the meeting.
- Where relevant, advise of next meeting date.

5.4.8 **Guidelines for Presenters at Scientific Meetings**

5.4.8.1 **Prior to the Meeting**

- The meeting convenor and/or the organising committee will contact you to discuss the expectations of the session/presentation and the format of meeting.
- You should discuss with the convenor the material to be presented, taking into consideration:
 - Makeup of the group attending.
 - The potential range of individual attitudes, values and circumstances.
 - Appropriateness of non –clinical materials.
 - The format of presentation including size, fonts and length.
- You should provide a final copy of your presentation to the meeting convenor.

5.4.8.2 **At the Meeting**

- Arrive in time to meet the session chair and go through any changes / review of your presentation.
- Confirm with the session chair the timing of your presentation and that this matches with the time allocated.
- Advise the session chair if you do not wish your presentation to be recorded.
- Discuss question time including:
 - Role of Chair.
 - Time allocated for questions.
 - Professionalism during question time - Chair will immediately end prolonged anecdotes, rudeness, larrikinism and / or personal point-scoring.
 - Managing questions.

5.4.9 General Tips for SIG Chairs

5.4.9.1 General

- It is now a requirement to table the SIG constitution at all meetings.
- Read the ACECC & SIG documents for rules & regulations.
- Always remember to emphasise the tri-partite nature of the SIG, as others may think the responsible parent organisation (RPO) is the only affiliation.

5.4.9.2 Chair & Executive

- Know when your elections are due (3 year cycle) – check with your SIG coordinator.
- Check with the responsible parent organisation's SIG coordinator for nominations and when nomination forms are due.
- A diversity of members from across Australia & New Zealand is preferable.
- Try to recruit executive members for election when due, at the SIG AGM.
- Outgoing executive members could be asked to suggest/nominate their successors.
- Succession planning has to start at least a year in advance.

5.4.9.3 Teleconferences

- The responsible parent organisation pays for teleconferences.
- Suggest twice yearly teleconferences as a minimum.

5.4.9.4 SIG issues

- Brainstorm ideas around executive on an informal basis before bringing up issues at general meetings or AGMs.
- Be sure to generate a resolution or recommendation on any important issue.
- Attend ACECC meetings if possible or nominate a deputy.
- It is beneficial to have a general meeting at all annual national meetings (ASM, CSM, NZSA) – which could be in conjunction with the SIG session. Record or take minutes & record attendees if PSP representative is not there. It helps to keep the SIG going, and enhances networking.
- AGM is most usefully held at your stand-alone SIG meeting – as this maximises attendance

5.4.9.5 Scientific Meetings

- Planning for SIG stand-alone meetings has to start early – at least 2 years in advance.
- Planning for SIG sessions at National meetings also requires at least two years planning time. Usually the meeting convenor will contact you to ask if your SIG would like a session at the relevant meeting. Each SIG is able to hold at least one session per year at a national meeting. Sometimes sessions are available at every national meeting. You can always refuse the offer of a session.
- With your responsible parent organisation regarding plans for stand-alone SIG meetings.
- If your SIG is small, consider having a stand-alone meeting with another SIG.
- Check with your responsible parent organisation about funds for any planned meeting.
- If no funds are available, then you need to apply to the PSP for special situations.
- Post-event reports (containing narrative report and Standard Event Report) to the responsible parent organisation. The report can be sent to the SIG executive, the responsible parent organisation, & SIG members.

5.4.9.6 Processes

- An annual report is required and is administered through the responsible parent organisation, and circulated to all SIG members before the AGM.
- Minutes of meetings/teleconference should also be sent to all SIG members.
- Financial reports provided by the responsible parent organisation.

5.5 Combined Regional CME in Australia

5.5.1 Governance

Combined regional CME in Australia is overseen by standing committees in some Australian regions and by ad hoc event organising committees in others. These committees liaise closely with the regional/state/territory committees of ANZCA and the ASA, as well as providing event budgets and reports to ACECC. The committees and chairs are appointed by the regional/state/territory committees of the region.

5.5.2 CME Activities

All combined regional CME activities require approval from the parent organisations (ANZCA and ASA), either through the budget process, through standing delegations or through separate approval of extraordinary items. The range of combined regional CME activities includes but is not limited to:

1. Holding combined regional CME committee or event organising committee meetings.
2. Establishing sub-committees or working parties for special projects.
3. Organising CME meetings and workshops.

ACECC has published guidelines for organising committees of CME events and these guidelines must be followed by combined regional CME committees, event organising committees and staff. These guidelines include:

1. Forming the organising committee (if applicable).
2. Topics, venue and timing.
3. Publicity and promotion.
4. Planning and organisation.
5. Speakers.
6. Healthcare industry.
7. Financial management.
8. Post-event reporting.

5.5.3 Combined Regional CME Committee Chair

5.5.3.1 Roles

The roles of the combined regional CME committee and event organising committee chairs are to:

1. Chair business meetings of the committee.
2. Establish a plan for combined CME activity in the region.
3. Lead the business of the committee with the assistance of the committee and staff.
4. Attend regional/state/territory committees of the ANZCA and ASA, and ACECC meetings, to report on combined regional CME activities.

5.5.3.2 Procedures for New Chairs

Upon taking office, the chairs will receive a welcome letter from the ACECC chair, as well as:

1. This manual containing:
 - 1.1 The ACECC charter
 - 1.2 ACECC Executive Terms of Reference
 - 1.3 ACECC SIG constitution
 - 1.4 Guidelines for Committees organising regional continuing education and special interest group meetings
 - 1.5 Manual for SIG executives and combined national/regional continuing medical education committees.

New chairs are advised to seek the following on assumption of the chair:

1. A comprehensive handover from the outgoing chair.
2. Contact with the staff at the responsible parent organisation.
3. Contact with the convenors of upcoming CME events (if not the outgoing chair).
4. The current regional CME plan.
5. Recent minutes of the committee.
6. The dates of upcoming committee and ACECC meetings.
7. The deadlines for development of annual combined regional CME budgets.

5.5.4 Establishing a CME Plan

The CME plan of each region should be discussed as the budget for the next year's activities is developed. The plan for the region need not be elaborate. The minimum activity level for a region is to:

1. Hold one combined regional CME event.
2. Provide written reports to the ACECC meetings held at the ANZCA ASM and ASA NSC.

Otherwise, committees may choose to:

1. Maintain the current number of CME events.
2. Increase the level of activity – add CME events.
3. Decrease the level of activity – discontinue CME events.

5.5.5 Chairing Combined Regional CME Committee Meetings

5.5.5.1 Standard Meeting Procedures

Combined regional CME committee meetings are conducted according to standard meeting procedures, whether they are conducted as teleconferences or face-to-face meetings:

1. Welcome – introduction of members, observers and staff.
2. Apologies.
3. Call for declaration of conflicts of interest.
4. Approval of previous minutes.
5. Business arising from previous minutes not covered elsewhere in the agenda.
6. Business on notice (including approval of budgets and receipt of financial reports).
7. Other business.
8. Close and date of next meeting.

5.5.5.2 Resolutions of Meetings

Committee chairs are advised to require background papers and written recommendations for items that require the approval of the regional/state/territory committees of ANZCA and the ASA, ACECC or the council/executive committees of ANZCA and the ASA. Here is an example of a recommendation:

Recommendation from the Chair

That the Combined CME Committee offers a prize of \$500 for the best trainee presentation at the meeting.

The chair may move the recommendation “from the Chair” without a seconder, or the chair may seek a nominator (usually the author of the recommendation) and a seconder from among the members. The recommendation is then put to the vote (by a show of hands at a face-to-face meeting or on the voices at a

teleconference). According to standard meeting procedure, recommendations are approved by a majority of voting members present and voting. Recommendations should appear in the minutes as follows:

Recommendation from the Chair

That the Combined CME Committee offers a prize of \$500 for the best trainee presentation at the meeting.

Carried

5.6 Attending ACECC Meetings

The combined regional CME committee chairs or CME portfolio holders of the regional/state/territory committee of ANZCA or the ASA (in the absence of a standing combined regional CME committee) or their nominees are required to attend, either in person or by telephone, and provide a written report to ACECC meetings held at the ANZCA ASM and ASA NSC, in order to report on combined regional CME activities, provide feedback to the parent organisations and have input into combined regional CME governance. The expenses of combined regional CME chairs or representatives who attend these meetings in person will not be reimbursed. Combined regional CME chairs or their nominees are also required to attend any ACECC teleconferences or email polls that are convened.

5.6.1 Combined Regional CME Administration

5.6.1.1 Administrative Assistance

Administrative assistance to combined regional CME committees and support for events is provided by ANZCA, under an agreement between ANZCA and the ASA.

5.6.1.2 Relationship between Combined Regional CME Committees and Staff

Combined regional CME committees, event organising committees and chairs often work closely with the staff and rely on these staff to assist them with organising CME activities. Each staff member has a job description which includes details about how they will support combined regional CME activities. However, it is important to remember that staff members do not report to the committees or chairs, but to their own manager within the organisation. It is expected that communication between committee members and staff will meet normal social standards of respectfulness. Staff members welcome feedback about positive aspects of their performance, but if a committee member is concerned about the performance of a staff member, this is best raised with the staff member's manager, the chair of the regional/state/territory committee or a member of the council/executive committee of ANZCA or the ASA. This does not apply to minor things such as amendments to minutes that can be directly raised with the staff member.

5.6.1.3 Services to Combined Regional CME Committees

The administrative assistant provides the following services as required to the combined regional CME committees and event organising committees:

1. Administrative assistance to committees
 - 1.1. Business meetings.
 - 1.2. General administration.
 - 1.3. Budget development.
 - 1.4. Narrative and financial reports.
 - 1.5. Combined CME pages on ACECC and parent organisation websites.
 - 1.6. Management of correspondence to SIG executive and chair.
 - 1.7. Maintaining files and alerting chair to outstanding action.

2. Event management
 - 2.1. Meetings of organising committee.
 - 2.2. Budget development.
 - 2.3. Venue.
 - 2.4. Advertising (taking note of the guidelines for ACECC branding on promotional material).
 - 2.5. Printing.
 - 2.6. Registrations.
 - 2.7. Assistance at the meeting.
 - 2.8. Post-event reporting.

5.6.2 Combined Regional CME Finances

5.6.2.1 Preparing the Annual Combined Regional CME Budget

The annual combined regional CME budget is a working document that outlines the plans of regional CME for the following year. It is important to note that, in line with the financial management practices of ANZCA and the ASA, budgets must be prepared and approved in advance. Unbudgeted activity is strongly discouraged and, if it occurs, must be in accordance with the ANZCA/ASA/NZSA Memorandum of Agreement (see combined regional CME delegations). The forecast financial outcome for combined regional CME activities will depend on how active the region is with respect to holding CME events. The administrative assistants and the Finance Department of the ANZCA are key resources for combined regional CME committees when planning their annual budgets.

5.6.2.2 Timelines (ANZCA [calendar year budgeting])

August	Planning by committees and event convenors completed
September	Regional Manager prepares budget based upon planned combined CME activities
October	Budgets included in ANZCA annual budget
November	Budget approved by ANZCA council
Dec/Jan	Budgets circulated to ASA for approval

5.6.2.3 Staff expenses

The rate of recovery for staff expenses has been agreed between ANZCA and the ASA and these rates will be used to budget the support time required. It is important to note that the staff time required for committee support and for CME event support are budgeted separately.

5.6.2.4 Administrative support

Committees should attempt to predict all business meetings and any other activities (apart from event management) that require administrative support for the coming year.

5.6.2.5 Event budgeting

Budgets for CME events must forecast a 10% surplus and must include all income and expenses including staff expenses. Site visits by the staff or event convenors are rarely necessary, but if they are deemed to be required, they must be included in the event budget.

5.6.2.6 Financial Reporting

Financial reports known as standard event reports (SERs) comparing actual performance to budget are prepared by the finance departments of the parent secretariat and are included as an appendix to the post event report. The post event reports are presented no later than 30 days before the May and October ACECC meetings.

Surpluses (deficits) are distributed (invoiced) annually with transfers no later than 1 March in arrears. All the costs of the SIGs are split in the ratio 50:40:10 between ANZCA, the ASA and the NZSA.

5.6.3 Combined Regional CME Delegations

5.6.3.1 Unbudgeted Expenditure

There is no delegation of unbudgeted expenditure to SIGs. All unbudgeted expenditure by combined regional CME committee or staff on behalf of the committee must have prior approval of the responsible parent organisation (ANZCA).

5.6.4 Combined National CME in New Zealand

5.6.4.1 Governance

Combined national CME in New Zealand is overseen by a standing committee called the New Zealand Anaesthesia Education Committee (NZAEC). This committee liaises closely with the NZNC of ANZCA and the NZSA, and well as providing reports to the two ACECC meetings held each year, at the ANZCA ASM and the ASA NSC. The committee and chair are appointed by the NZNC and NZSA. The NZAEC is governed by terms of reference to which the NZNC and NZSA are signatories. These terms of reference includes a financial agreement.

5.6.5 CME Activities

The NZAEC organises the following events:

1. New Zealand Anaesthesia ASM.
2. Other CME events for specialists and trainees in New Zealand.
3. Visiting lectureships.
4. BWT Ritchie scholarship.

5.6.5.1 Committee and Chair

The NZAEC is comprised as follows:

1. Two nominees of the NZNC.
2. Two nominees of the NZSA.
3. The chair of the NZNC.
4. The president of the NZSA.

The chair of NZAEC is elected by the NZNC and NZSA Executive from among the nominees.

5.6.5.2 NZAEC Administration

5.6.5.2.1 Administrative Assistance

Administrative assistance to NZAEC is provided by the NZNC, under an agreement between the NZNC and NZSA. Surpluses (expenses) are split 50:50.

5.6.5.2.2 Relationship Between the NZAEC and Staff

The NZAEC, event organising committees and chairs often work closely with the staff and rely on these staff to assist them with organising CME activities. Each staff member has a job description which includes details about how they will support combined national CME activities. However, it is important to remember that staff members do not report to the committees or chairs, but to their own manager within the organisation. It is expected that communication between committee members and staff will meet normal social standards of

respectfulness. Staff members welcome feedback about positive aspects of their performance, but if a committee member is concerned about the performance of a staff member, this is best raised with the staff member’s manager, the chair of the NZNC or a member of the executive of the NZSA. This does not apply to minor things such as amendments to minutes that can be directly raised with the staff member.

5.6.5.2.3 Services to Combined National CME Committees

The administrative assistant provides the following services as required to the NZAEC and event organising committees:

1. Administrative assistance to committee.
 - 1.1. Business meetings.
 - 1.2. General administration.
 - 1.3. Budget development.
 - 1.4. Narrative and financial reports.

2. Event management
 - 2.1. Meetings of organising committee.
 - 2.2. Budget development.
 - 2.3. Venue.
 - 2.4. Advertising.
 - 2.5. Printing.
 - 2.6. Registrations.
 - 2.7. Assistance at the meeting.
 - 2.8. Post-event reporting.

5.6.6 Register of Disclosed Interests

This register includes standing disclosed interests, for example, involvement with organisations of relevance to a SIG or CME event. Interests that arise from time to time, for example, in relation to individual SIG or CME committee members will be minuted.

Name of Member	Declared interest	Date declared	Date finishing

5.7 Change Control Register

Version	Author	Reviewed by	Approved by	Changes
1	Committee	Committee	Committee	September 2011
2	ACECC Secretariat	Committee	Committee	Addition of register of disclosed interests September 2013
3	ACECC Secretariat	Committee	Committee	September 2014 Minor formatting, update of SIG names, Inclusion of 5.4.7, 5.4.8 and 5.4.9
4	ACECC Secretariat	Committee	Committee	May 2015 Content review

Date of next review	May 2016
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