



The Reproductive Technology Accreditation Committee (RTAC)

Terms of Reference

CONTENTS

1. Definition of RTAC
2. Membership of RTAC
3. RTAC Chairperson
4. Responsibilities of RTAC
5. Abbreviations Used in This Document

1. DEFINITION OF RTAC

The Reproductive Technology Accreditation Committee is a subcommittee of the Board of the Fertility Society of Australia and reports directly to that Board. It is charged with the responsibility of setting standards for the performance of ART through an audited Code of Practice and the granting of licences to practice ART within Australia. It further licences an International Version of the Code of Practice for the use by Certifying Bodies in countries outside Australia and New Zealand.

2. MEMBERSHIP OF RTAC

RTAC includes FSA expert representatives from all specialty areas of ART, including reproductive medicine, nursing, counselling and reproductive biology. It also includes representation from the fertility consumer organisations ACCESS or fertility NZ.

Current membership of RTAC is as follows:

- Chairperson (appointed by FSA Board)
- Deputy Chairperson (appointed by FSA Board)
- Nominee of the Medical Directors Subcommittee of the FSA

- Nominee of the Australian and New Zealand Infertility Counsellors Association (ANZICA)
- Nominee of Fertility Nurses of Australasia (FNA)
- Nominee of Scientists in Reproductive Technology (SIRT)
- Nominee of Access or fertility NZ

3. RTAC CHAIRPERSON

Chairperson Nomination

Six months prior to the completion of the current three-year term of office of the chairperson, the FSA secretary calls for written nominations outlining the relevant experience of the candidates.

Appointment

The RTAC chairperson is appointed by the FSA Board of Directors for a term determined by the board, but not exceeding two terms of three years. The chairperson is an ex-officio member of the FSA and reports regularly to the FSA Board, but RTAC licensing decisions remain independent of the FSA board and other FSA subcommittees.

Qualifications & Experience

The chairperson must satisfy the following criteria:

- Member of FSA
- RTAC auditing experience desirable
- Extensive depth of knowledge in ART
- Extensive knowledge in quality management systems and auditing
- Skills in diplomacy and dispute resolution
- Declared conflict of interests
- Respect from colleagues and affiliated professionals

Appointment Process

An RTAC chairperson selection committee is appointed by the FSA board of directors. This committee is responsible for reviewing nominations against the RTAC chairperson criteria. The committee reports its findings and suggestions to the FSA board of directors for a decision on the appointment. The selection committee includes:

- A. President of FSA;
- B. Medical Directors Subcommittee chairperson; and
- C. An FSA board member representing a subcommittee other than those represented by the President and the medical directors subcommittee.

The board member position should vary for each chairperson selection process to reflect each of the FSA subcommittees.

The final decision and appointment of the RTAC chairperson is made by the entire FSA board of directors.

4. RTAC RESPONSIBILITIES

The RTAC responsibilities include:

- a. To set standards for ART units and to encourage adherence to best practice principles (QMS) via the Code of Practice.
- b. To monitor achievement of such standards by receiving accreditation reports by JAS-ANZ approved CB's following assessment of ART units according to Scheme Rules devised by RTAC Technical Committee.
- c. Maintaining records of non-compliance activities for QA review and to assist in the revision of the Code of Practice.
- d. To review the Code of Practice on a three yearly basis with recommendations for approval to the FSA Board.
- e. Issuing, suspending and withdrawing of RTAC Licences.
- f. Withdrawing licences if ART units have not signed a current Deed of Agreement or the unit has not paid its annual fees to FSA.
- g. Issuing licences to use the RTAC mark.
- h. Immediately advising the relevant CB and JAS-ANZ on every occasion that an RTAC licence is suspended or withdrawn.
- i. Ensuring that ART units are undertaking audits by JAS-ANZ registered CB's and that reports have been received and licences issued.
- j. Ensuring a Deed of Agreement for adherence to the RTAC Code of Practice is obtained annually from each licensee.
- k. To provide feedback to ART units via Technical Bulletins to enhance clinical practice.
- l. To monitor and review applications and reapplications for accreditation by ART units in conjunction with JAS-ANZ approved CB's.
- m. To ensure that accredited ART units are listed on the FSA web page.
- n. To provide to FSA Board with an annual report of RTAC activities and Technical Bulletins.
- o. To provide technical advice as requested by CB's.
- p. Direct (if the FSA Board has determined that an exceptional circumstance has arisen concerning an ART unit or organization) a Unit to undergo an additional Primary or Surveillance Audit conducted by a CB.

5. ABBREVIATIONS USED IN THIS DOCUMENT

RTAC	Reproductive Technology Accreditation Committee
FSA	Fertility Society of Australia
CB	Certification Body (also CAB: Certified Accrediting Body)
JAS-ANZ	Joint Accreditation System – Australia & New Zealand
ANZARD	Australia & New Zealand Assisted Reproduction Database
ART	Assisted Reproductive Technology
QMS	Quality Management System
QA	Quality Assurance
FNA	Fertility Nurses of Australasia
ANZICA	Australia & New Zealand Infertility Counsellors Association
SIRT	Scientists in Reproductive Technology