

T • S • A • N • Z

TERMS OF REFERENCE FOR THE LIVER AND INTESTINAL TRANSPLANT ADVISORY COMMITTEE (LITAC)

1. Preamble

The Transplantation Society of Australia and New Zealand has a number of Advisory Committees that act as the peak body for their special interest group in the areas of retrieval, allocation and standards of practice. This document defines the terms of reference which is intended to guide members in their deliberations. The Liver and Intestinal Transplant Advisory Committee is the peak clinical advisory body for issues related to liver and intestine donation and transplantation in Australia.

2. Objectives

The Liver and Intestinal Transplant Advisory Committee (herein after referred to as LITAC) is committed to supporting the following objectives:

- a. Development of nationally uniform eligibility criteria to ensure there are equitable and transparent criteria for listing patients for liver and intestinal transplantation.
- b. Development of nationally uniform allocation protocols to ensure consistency across Australia and New Zealand in the criteria by which donated liver and related organs and tissues are allocated.
- c. Promotion of best practice, including ethical standards, in respect to donation and transplant of liver and related organs and tissues.

3. Responsibilities

- a. Formulate relevant eligibility criteria and allocation protocols for liver and intestinal transplantation.
- b. Oversee and regularly review eligibility criteria and allocation protocols for liver and intestinal transplantation.
- c. Regularly review the information they make available on the TSANZ website for accuracy and current applicability.

- d. Provide a forum for discussion of current new or emerging therapies or practices in the field of liver and intestinal transplantation.
- e. Provide advice to TSANZ Council on current new or emerging therapies or practices in the field of liver and intestinal transplantation.
- f. Undertake auditing of liver transplant practice.

4. Membership*

- a. Membership of LITAC shall reflect different regions, relevant clinical practices and stakeholders as follows:

I. Two representatives from the following jurisdictions of which one shall be the head of the transplant unit or his or her nominee:

- i. New South Wales/Australian Capital Territory
- ii. Queensland
- iii. South Australia/Northern Territory
- iv. Victoria/Tasmania
- v. Western Australia
- vi. New Zealand

II. Two representative from Paediatric Liver Transplant Units representing jurisdictions (i) to (vi) above, appointed in consultation with the Chair of TSANZ Paediatric Working Group.

III. A representative of the Australian Transplant Coordinators Association.

IV. A consumer representative

V. A community representative.

VI. A representative of the Liver Registry who will be a non-voting member.

* See Appendix 1

- b. The President of TSANZ and Chair of the organ transplant advisory committees shall be ex-officio members of LITAC.
- c. The members of LITAC, except heads of liver transplant units, shall normally hold office for a 3-year term with the possibility of extension for an additional term.
- d. Members of LITAC should be members of the TSANZ (where appropriate), except that no such requirement pertains to the Community and the Consumer representative.



- e. LITAC may co-opt specific persons to attend meetings either for a single meeting, part of a meeting, or for the term of a project as appropriate.
- f. The head of the jurisdictional transplant unit shall advise the Chair of any changes in their jurisdiction's membership of LITAC as soon as possible.

5. Chairperson

- a. The Chair will have the responsibility for conducting meetings and representing the LITAC as appropriate in other meetings and forums.
- b. The Chair shall be selected by LITAC by consensus from one of the jurisdictions listed in 4a (l) (i)-(v) for a term of three years, with the possibility of a further term, at the discretion of the Advisory Committee.
- c. The Chair shall be rotated by regions, if possible, at the end of each term.
- d. Where there is no consensus, selection of the Chair will be by a vote of the members of LITAC cast electronically or by show of hands at a meeting.
- e. The person who receives the most votes in the ballot will be declared the Chair.

6. Governance and Reporting

- a. The Chairman shall issue an Agenda a week prior to a meeting.
- b. The quorum for a meeting shall be two third of the membership of the Committee for face-to-face meetings and one half for teleconference meetings and shall comprise representation from at least three jurisdictions.
- c. Where a member is unable to attend a meeting for whatever reasons he/she should appoint a suitable person to represent him/her and subsequently advise the Chair of the name of the proxy prior to the meeting.
- d. There shall be a face-to-face meeting of LITAC coinciding with the Annual Scientific Meeting of TSANZ (usually mid to late June), followed by another such meeting approximately six months later.
- e. Attendance at the June meeting is open to all TSANZ members with an interest in liver and intestinal transplantation but voting is restricted to members of the advisory committee.
- f. Additional face-to-face meetings and teleconferences will be held, as required, to discuss more urgent issues.
- g. Minutes will be kept of all meetings and distributed to all members.
- h. Minutes and recommendations of meetings will be tabled to TSANZ Council.
- i. The Chair of LITAC will report to the TSANZ Council on a regular basis.

- j. The Chair of LITAC will participate in the meeting with other Advisory Committee chairs by teleconference at least once per year, with a face to face meeting also held once per year.
- k. The Chair and members of LITAC should report back to the general membership as appropriate*.

*See Appendix 2

7. Conflict of Interest

- a. A committee member must declare any conflict of interest to the Chair of LITAC if they, their partner or close family friend has a direct financial or other interest which influences, or may appear to influence, proper consideration or decision-making by the committee on a matter or proposed matter.
- b. LITAC chairperson shall determine the matter and advise the person concerned and also report his decision to the Committee.

8. Confidentiality

The Chair may declare some material and discussion at the LITAC meetings as confidential and any disclosures in this respect are not permitted except with the approval of the Chair.

9. Review

The terms of reference can be reviewed any time at the discretion of LITAC.

10. Confirmation

The Terms of Reference of the Liver and Intestinal Transplant Advisory Committee was approved at its meeting dated 2 nd December 2013 and is confirmed as correct.	
Name: Jonathan Fawcett	Signature:
Title: Chair, Liver and Intestinal Transplant Advisory Committee	Date:

**APPENDIX 1: Membership of Liver and Intestinal Transplant Advisory Committee
2013/14**

Name	Interest Group/Jurisdiction
Jonathan Fawcett (Chair)	General surgeon, Director Queensland Liver Transplant Service, Princess Alexandra Hospital (QLD)
Graeme Macdonald	Staff Specialist, Department of Gastroenterology and Hepatology, Princess Alexandra Hospital (QLD)
Geoff McCaughan	AW Morrow Gastroenterology & Liver Centre, Royal Prince Alfred Hospital (NSW&ACT)
Michael Crawford	Surgical Director of the Australian National Liver Transplant Unit. (NSW& ACT)
Bob Jones	Transplant Surgeon, Director of the Victorian Liver Transplant Unit. (VIC&TAS)
Michael Fink	General Surgeon, Austin Health (VIC&TAS)
John Chen	Surgeon, Director South Australian Liver Transplant Unit. (SA & NT)
Mark Brooke-Smith	Consultant surgeon, Department of Surgery at Flinders Medical Centre (SA & NT)
Luc Delriviere	Head of Transplant Surgery, Sir Charles Gairdner Hospital. (WA)
Gary Jeffrey	Surgeon, Medical Director of the Western Australian Liver

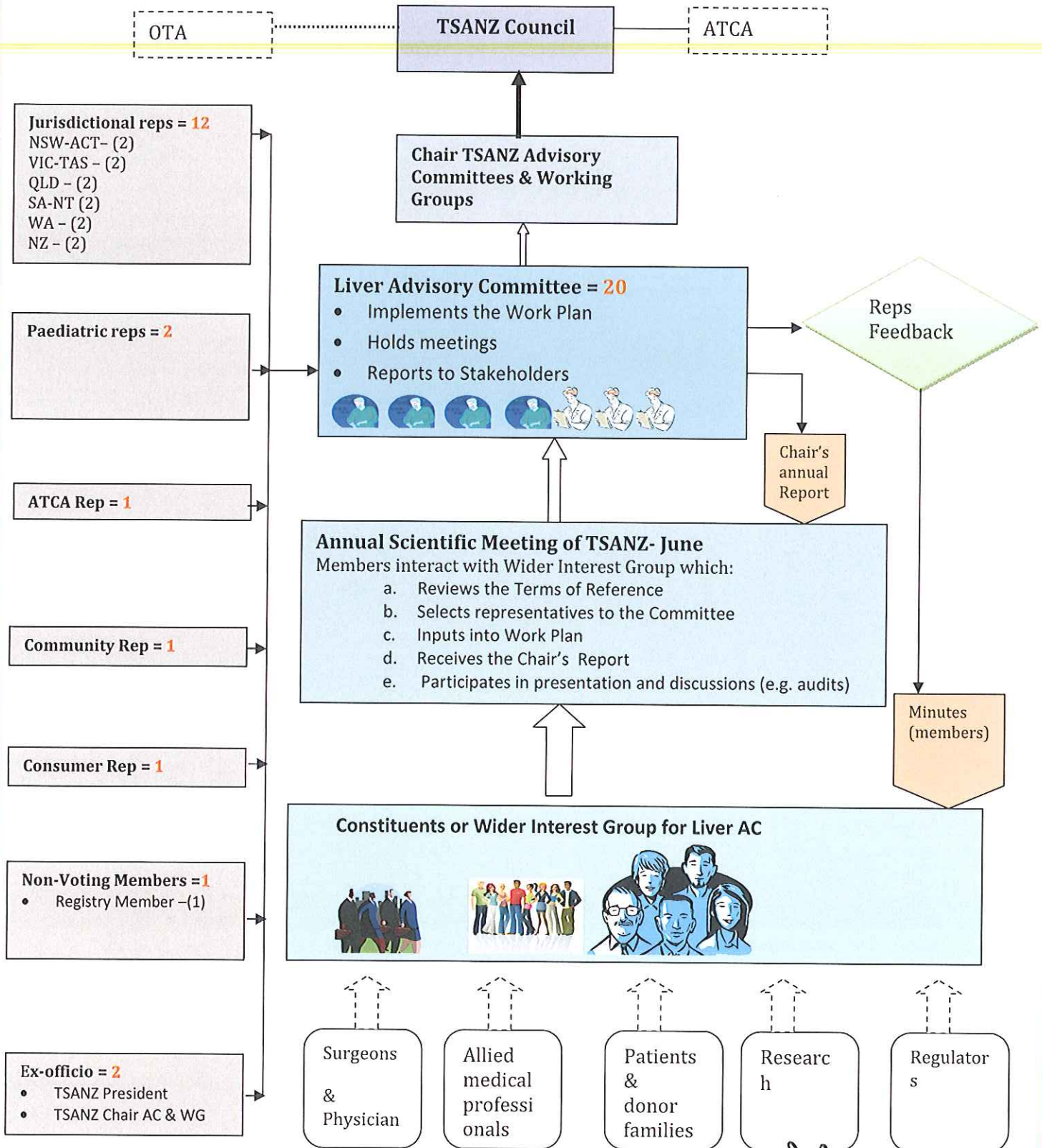


	Transplantation Service. (WA)
Stephen Munn	Surgeon, Director of Liver Transplant Unit , Auckland Hospital (NZ)
Ed Gane	Hepatologist Auckland University (NZ)
Helen Evans	Paediatric Gastroenterologist, Auckland Hospital (cross jurisdictional)
Winita Hardikar	Paediatrics, Head of Liver and Intestinal Transplantation Department of Gastroenterology, Royal Children's Hospital Melbourne. (cross jurisdictional)
Libby Johns	Clinical Services Coordinator Liver Transplant Unit Flinders Medical Centre. (ATCA Rep)
Diana Aspinall	Consumer Rep
Annette Wickens	Community Rep
Glenda Balderson	Representative of the Liver Registry
Geoff McCaughan	Ex officio (TSANZ President)
Steve Chadban	Ex officio (Chair TSANZ Advisory Committees and Working Groups)



Appendix 2

Administrative & Organisational Framework for Liver Advisory Committee



FAWLETT
13/12/13