

Annual report

2009–2010



The Royal Australian
College of General
Practitioners

Healthy Profession.
Healthy Australia.



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Contents

2	Members of the 52nd RACGP Council
6	President
9	Council
10	Chief Executive Officer
13	Censor in chief
14	Finance Committee
15	Membership Committee
16	Strategic plan
17	Faculties
28	Education Directorate
32	Practice Innovation and Policy
39	Membership and Marketing
43	Information Technology
45	Awards and honours

Statutory reports

48	Directors' report
53	Auditor's independence declaration
54	Independent auditor's report
56	Directors' declaration
57	Statement of comprehensive income
58	Statement of financial position
59	Statement of changes in equity
60	Statement of cash flow
61	Notes to the financial statements

Members of the 52nd RACGP Council

The Royal Australian College of General Practitioners was established in 1958 to maintain high standards of learning and conduct in general practice. The College is governed by the RACGP Council, which comprises president, censor in chief, the chair of each state or territory faculty, chair of the National Rural Faculty, a general practice registrar representative, and any additional co-opted members.



Chris Mitchell

**BMed DipRACOG FRACGP FACRRM
GradDipRural FARGP FAICD
President**

Chris has worked for over 20 years as a rural GP in northern New South Wales where he has an appointment at the Ballina District Hospital.

Chris has served on RACGP Council as chair of the National Rural Faculty 2004–2008, RACGP Vice President 2006–2008 and RACGP President 2008–2010.

Currently Chris is a Board member of National Prescribing Service Ltd, Therapeutic Guidelines Ltd, Committee of President's Medical Colleges where he also chairs the education sub-committee, and a Board member of Northern Rivers General Practice Network and North Coast GP Training. In 2009 Chris became a member of the Trueblue Project Advisory Board and the *beyondblue* National Doctor's Mental Health Program Advisory Committee. He also holds a position with Enhanced Medical Education Advisory Committee established by the Department of Health and Ageing.

Chris is a clinical professor with the University of Wollongong and holds a Fellowship of the Australian Institute of Company Directors with more than 10 years experience as a director of not-for-profit boards.



Peter Mudge

**MBBS FRACGP FAFPHM
Chair of Council**

Peter is Chair of the RACGP Council. He is also Chair of the National Research Awards Committee and in June 2010 Peter was appointed patron of the RACGP Foundation.

Peter's previous appointments include Foundation Dean of the North Queensland Clinical School at the University of Queensland (now James Cook School of Medicine); Emeritus Professor of General Practice at the University of Queensland; and Professor of General Practice at the University of Tasmania. Peter was also the RACGP Tasmania faculty chair representative on Council.

Peter is a Fellow of the Faculty of Public Health Medicine at the Royal Australasian College of Physicians.



Morton Rawlin

**BMed MMedSci FRACGP
FACRRM DipPractDerm
DipMedHyp DipFP DipBusAdmin**

**Vice President, Chair Victoria Faculty,
Chair National Faculty of Specific
Interests**

Morton has extensive experience in general practice medical education at all levels, and has been a general practice supervisor and medical educator. His past professional appointments include Medical Director of Dianella Community Health, National Manager of Fellowship Programs and RACGP Director of Education. He also held a position as Senior Lecturer in Rural General Practice at the University of Melbourne.

Morton has a long standing interest in competency assessment and training, serving as the RACGP examination panel chair in Victoria for 5 years, and is principal examiner for the Medical Board of Victoria's overseas trained doctor program.

Morton's research and teaching interests are in standards in general practice, general practice teaching and integration, adolescent health and dermatology. He is currently in general practice in Melbourne.



Naomi Harris

**MBBS FRACGP FARGP
GradDipRural**

**General Practice Registrar
Representative and Chair,
Membership Committee**

Naomi has been involved with many organisations throughout the course of her training. Her first role was as the registrar representative on the Board of the National Rural Faculty. She has worked at a board level with Greater Green Triangle General Practice Training and Education, Otway Division of General Practice and the South West Country Division of the Australian Medical Association, and was also on the National Advisory Council for the Prevocational General Practice Placements Program. Naomi was Chair of General Practice Registrars Australia Ltd from May 2007 to September 2008.

Naomi received the RACGP Fellowship in April 2010, and also the FARGP/ GradDipRural.

Naomi's interests are strongly based around registrar issues, education, mental health and Aboriginal health.



Liz Marles

**BMed(Hons) BSc(Hons)
FRACGP DipEd**

**Chair, New South Wales and
Australian Capital Territory Faculty**

Liz is Deputy Director of the Hornsby General Practice Unit, which specialises in prevocational education, taking 10 Prevocational General Practice Placements Program placements per year. She is a supervisor at Redfern Aboriginal Medical Service, where she has worked for 12 years, and which led her to develop a special interest in diabetes. Liz has previously been a foundation and is a current director on the General Practice Education and Training Board, and a lecturer in the Department of General Practice at the University of Sydney.

Liz is passionate about general practice training, Aboriginal health and the future of general practice.



David Knowles

**MBBS FRACGP DCH
Chair, Tasmania Faculty
(Appointed 4 October 2009)**

David is a GP in Tasmania and shares his clinical time between Lauderdale Doctors Surgery and GPAssist. He is the current chair of General Practice Training Tasmania and has served as exam panel chair for the Tasmania faculty since 2006.

David completed his undergraduate training in Tasmania but began his general practice career in Perth. During this period he worked as a medical educator for General Practice Education Australia and became involved in providing supervisor and IMG support for WAGPET. He was also exam panel chair for the Western Australia faculty for 2 years.

With his young family, David moved back to Tasmania in 2005 taking the role as EPC and in 2008, accepted the role of deputy chair of the Tasmania faculty Board. David remains passionate about medical education, the central role of GPs in primary care and, crucially, life balance for GPs and their families.



Nigel Stocks

**BSc MBBS DipPH MD FRACGP
FAFPHM**

**Chair, South Australia and Northern
Territory Faculty**

Nigel is Director of the Australian Sentinel Practices Research Network (ASPREN) and Professor and Head of the Discipline of General Practice at the University of Adelaide. He served on the RACGP National Standing Committee – Research until 2008, and his research interests include cardiovascular, respiratory and mental health.

Nigel was trained in Adelaide, but worked for several years as a GP in the UK. He currently practises in Aldgate in the Adelaide Hills.



Peter Maguire

**MBBS DRANZCOG FRACGP GAICD
Chair, Western Australia Faculty**

Peter entered full time general practice in 1982 and spent 9 years in an outer urban practice in Perth. Since entering general practice, Peter has pursued his interests in medical education, first taking a full time medical educator position with the Family Medicine Program (which subsequently became the RACGP Training Program) and then working for Western Australian General Practice Education and Training as an educational consultant. He currently works in full time rural general practice in Narrogin, southeast of Perth and has a sessional appointment with the Rural Clinical School.

Peter has been a member of various RACGP education committees since 1989 and recently retired as chair of the QA&CPD subcommittee.



Kathryn Kirkpatrick

**MBBS FRACGP FACRRM
GDipHSt(GenPract) AAICD
Chair, National Rural Faculty**

Kathryn is a GP in Dalby, Queensland. She was a member of the RACGP National Standing Committee – Education from 2002–2004 and has been involved in all levels of medical education.

Kathryn currently works part time as rural advisor/medical educator for the Central and Southern Queensland Training Consortium.

Kathryn is also one of the RACGP nominees to the Remote Vocational Training Scheme Board, the National Rural Faculty representative on the National Rural Health Alliance and a member of the Queensland faculty Board.



Brad Murphy

**MBBS AssocDipAppSc(Amb)
CertST&D MAIES AIMM MACTM
MACAP MAITD**

**Chair, National Faculty of Aboriginal
and Torres Strait Islander Health
(Appointed 9 April 2010)**

Brad is a practising GP in rural Queensland, and understands the challenges of rural general practice.

Brad, an Aboriginal man from the Kamilaroi people (of northwest New South Wales), joined the Royal Australian Navy at the age of 15, opting for a career as a medic. Many years later, he joined the New South Wales Ambulance Service and advanced through several levels of training including intensive care paramedics, ultimately supervising and instructing in clinical paramedicine. He also worked as a paramedic for the Royal Flying Doctor Service at Uluru.

Brad is treasurer of the Rural Doctors Association of Queensland and one of three trustees of the Jimmy Little Foundation.



W Jane Smith

**MBBS FRACGP GradDipFM MHS
FAICD**

Chair, Queensland Faculty

Jane has worked as a GP in Perth, Brisbane and since 2007, on the Gold Coast. Jane has been involved in general practice education for many years as a general practice supervisor, lecturer, medical educator and examiner at both undergraduate and postgraduate levels. She is currently the Associate Professor of General Practice at the School of Medicine at Bond University. Jane has been RACGP Honorary Secretary, she has also chaired the RACGP Skin Cancer Joint Consultative Committee and the Membership Committee of Council, and vice chaired the National Standing Committee – Quality Care. Jane is one of the authors of the RACGP Guidelines for preventive activities in general practice (6th and 7th editions). She also has directorships with General Practice Gold Coast and Australian Medicines Handbook Pty Ltd.



Jan Radford

**MBBS FRACGP MPM GAICD MEd
Censor in chief**

Jan is Associate Professor of General Practice at the University of Tasmania, and is based at the Launceston clinical school. Her research interest is in medical education.

Jan has been involved in RACGP committees for 15 years, and was censor for Tasmania between 2001–2006. Jan became RACGP Censor in chief in October 2006. She chairs the RACGP Board of Censors, the Board of Assessment and the Research and Development Subcommittee of the Board of Assessment. She also sits on the RACGP National Standing Committee – Education and is a member of the RACGP Awards Committee.

Jan has been a partner in her clinical practice for 24 years and has a clinical interest in mental healthcare.



Neil Greenaway

FCA FCPA FCIS FAICD

Co-opted member – Chair, Finance, Audit and Risk Management Committee

Neil is a Fellow of the Institute of Chartered Accountants in Australia, Fellow of the Certified Practising Accountants of Australia, Fellow of Chartered Secretaries Australia and a Fellow of the Australian Institute of Company Directors. Neil was the independent external representative (finance) on the RACGP FARM Committee from 2002 before joining Council and being appointed chairman of the FARM Committee in 2008. Neil was appointed an honorary member of the RACGP in 2006. He is a member of The Greater Metropolitan Cemeteries Trust and a Councillor and Committee Chairman of CSA (Victoria). Neil was previously Deputy Chairman of the Trustees of the Necropolis Springvale and has held executive governance and finance positions at Medibank Private and St Vincent's Health. Neil is currently a consultant.



Dr Chris Mitchell

President

While the past year presented a range of challenges in the general practice arena, the College has worked hard to address these – with success. General practice is now a stronger and more united profession and the College is seen as an effective voice for GPs. Ongoing health reforms from the Federal Government have had a strong focus on general practice, and although some of their initiatives still need more consultation, their focus has been to reinforce the central role of general practice and primary healthcare in our health system. I am pleased that our voices continue to be heard.

The RACGP continued to advocate to government on general practice issues that matter to our members. We were pleased to welcome a number of reforms over the past year, many that came as a direct result of College and member advocacy.

The RACGP has long advocated for significant increases in the general practice workforce, stronger teams and better teamwork within general practice, better general practice infrastructure and investment and progress in e-health. The direct investment that general practice needs has, at least in part, been delivered with the last Commonwealth Budget committing more than \$2.2 billion to general practice and related services over the next 4 years.

Australia is one of the world's leading healthcare systems, as highlighted in this year's Commonwealth Fund report. However, access to general practice care remains an issue in most areas of Australia, highlighting the need for continued direct investment into

general practice, practice teams and infrastructure needs.

The College has more work to do to reduce red tape in the Medicare Benefits Schedule, in finding solutions to issues around after hours care, collaborative care, independent nonmedical prescribing, the placement of superclinics, the role and relevance of Medicare Locals, and in the government's diabetes program. Elements of these programs will need to change in order to ensure general practice is supported to deliver work in the community. The College has, and will, continue its hard work in the reform field.

In addition, the College's advocacy has been linked to other key general practice organisations through work with United General Practice Australia, the Australian Medical Association, the Australian General Practice Network, General Practice Registrars Australia, the Rural Doctors Association of Australia and the Australian College of Rural and Remote Medicine. Through our unity on matters central to the future of general practice, we are able to work together to achieve better recognition and reward for GPs and the discipline of general practice.

The College's strengthening and effective relationship with Regional Training Providers throughout the past 12 months is also something we are very proud of and believe that it will benefit the future of general practice. A united profession has been a major focus of College Council over the past 2 years and our strong Council and effective management team continue to be a major asset to the College; I thank them for their hard work throughout the year.

In February 2010, the College announced the formation of the National Faculty of Aboriginal and Torres Strait Islander Health, which is the first Aboriginal and Torres Strait Islander college faculty. The RACGP is proud to be associated with Aboriginal and Torres Strait Islander people through the work of the faculty and we are committed to raising GP awareness of their health needs and cultural context, and to advocating for culturally appropriate health delivery systems to improve health outcomes. The College recognises that improving the health of Aboriginal and Torres Strait Islander people is one of Australia's highest health priorities and general practice is vital to improving the health and wellbeing of Aboriginal and Torres Strait Islander people and their communities throughout Australia.

The College engaged positively in the area of e-health over the past year. Work on the General Practice Data Governance Council has helped to progress the key data governance agenda related to health privacy. The work of the General Practice Data Governance Council has been to ensure that health practitioners have sound, ethical and grounded principles from which to take guidance about the use of general practice data. The passing of the Healthcare Identifiers Bill through Federal Parliament was also welcomed. The passing of this legislation is the foundation needed to make e-health work in Australia. It would not have been possible without the ongoing hard work and determination of general practice.

At the end of June, the College signed a Memorandum of Understanding with Telstra to deliver a suite of national

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e-health solutions and services to College members, giving general practice the opportunity to access high quality and relevant healthcare applications through a web-hosted service. This is a very exciting opportunity with the potential for many benefits for GPs and I look forward to seeing this service being developed and implemented in the years ahead.

Another important development for the College in the e-health field was the implementation of the e-health Futures exhibit at the John Murtagh Centre at College House.

The government's personally controlled electronic health record aligns with the College vision of a general practice electronic health record, which is the motivation behind the College's latest e-health initiative, the RACGP e-health Summary. This summary will form the basis of data for e-referrals, and other electronic communication between healthcare providers, and will be a key component of a shared electronic health summary. We are pleased that NEHTA has selected the College as a lead agency and agreed to support and contribute to this innovative project.

Another achievement in the past year is that general practice is now acknowledged by the Medical Board

of Australia as a medical speciality, indicating the wider recognition that our profession is starting to enjoy after many years of advocacy by the College and its members. The recognition of general practice as a medical speciality by the Medical Board of Australia would not be possible without a sound, reliable, valid and accredited Fellowship, and the RACGP Fellowship is now truly internationally recognised in New Zealand, Ireland, Canada and Singapore with conjoint examinations in Malaysia and Hong Kong.

In the education area, the College designed the Specialist Pathway Program, which provides a new assessment process for doctors who do not have current Australian medical registration but have recognised general practice qualifications from overseas. It is part of a nationally agreed assessment and registration process developed in conjunction with Australian medical boards, the Australian Medical Council, the Department of Health and Ageing, the Australian Medical Council, and the RACGP.

The recognition by GPs of the value of the College is also shown in increasing membership numbers. At the end of the 2009–2010 financial year the RACGP had 21 101 members, which includes

Australian and overseas registered medical practitioners, IMG affiliates, medical students, practice nurses and practice managers.

As past chair of the National Rural Faculty I am equally proud of the strong growth in our rural faculty with over 5789 Australian GP members.

Every year across Australia our members volunteer their time and commit their knowledge and expertise to supporting the College's many national standing committees, its faculties, the delivery of Fellowship exams, mentoring programs and more. Our members' contribution to the College and their communities is greatly valued and appreciated. The work of the College could not continue without their strong support and I'd like to take this opportunity to thank them for their efforts and support.

It was with great sadness that the College announced the passing of Emeritus Professor Charles Bridges-Webb AO, in June. Charles had been a member of the College since 1959, and has been an inspiration and a wise mentor for generations of general practice researchers in Australia. He has been awarded both the Rose-Hunt Award and Life Fellowship of the RACGP and was Director of the NSW&ACT faculty's research unit until 1 June 2010. Perhaps Charles' greatest recognition is in the deep affection held by so many GPs both in Australia and overseas. We extend our sympathies to Charles' wife, Anne, and family.

On 6 October 2010, I will be handing over to RACGP President-elect,

Every year across Australia our members volunteer their time and commit their knowledge and expertise to supporting the College's many national standing committees, its faculties, the delivery of Fellowship exams, mentoring programs and more.

Professor Claire Jackson, someone who truly understands how general practice works. I am delighted that Claire takes over my role and wish her all the best in her endeavors.

It has been a very important time for general practice during my 2 years as president, and there is more work to be done. It has been a very great privilege to have had the opportunity to serve my College.



Professor Peter Mudge

The College has continued an upward trend in achieving continued growth in both its membership and profile.

Council

Upon concluding my term as chair of the Tasmania faculty in 2009, this year sees me in my final term as chair of Council. I would like to take the opportunity to acknowledge all the members of Council who have contributed to the College's vision and direction during my term.

During the 2009–2010 period, Council composition was complemented by the addition of two new councillors, Dr David Knowles as chair of the Tasmania faculty and Dr Brad Murphy as chair of the newly formed National Faculty of Aboriginal and Torres Strait Islander Health.

The College has continued an upward trend in achieving continued growth in both its membership and profile. To support and sustain this growth, the management team of the College works hard to ensure that quality personnel and project initiatives are developed to supplement the extensive range of national programs and College services on offer.

There were numerous key achievements during the year.

2010 saw the appointment of Professor Claire Jackson, President-elect. Claire will be taking over the reigns from current president Dr Chris Mitchell in October 2010. She brings to the College a passion for general practice that we have become accustomed to during Chris' presidency.

Registrar representative-elect, Dr Georga Cooke also joins the College in October, taking over from Dr Naomi Harris. Georga brings much valuable experience into the role including being a general practice registrar working

in clinical practice in Brisbane and an academic registrar at Bond University. Georga is also a member of the RACGP National Standing Committee – Education and the Queensland faculty Board.

I would like to sincerely thank my fellow councillors, the president, Chris Mitchell, the CEO Zena Burgess, Deputy CEO Robert Pratt and the senior leadership team and staff for their ongoing commitment to the continued success of the RACGP.



Dr Zena Burgess

The success of the College over the past 2 years could not have been achieved without the boundless energy of the College's president, Dr Chris Mitchell.

Chief Executive Officer

It is with pride, and gratitude to those who have contributed, that I describe several of the highlights of the 2010 year at the RACGP. I urge readers to review all sections of the annual report to discover the many and varied activities of the College during this financial year.

Firstly, I would like to thank the 52nd Council for their endeavours. I often request Council members to take on additional tasks and to assist and advise me. Each person graciously provides advice, willingly attends meetings and helps me to understand the political or general practice issues under consideration. The 52nd Council has been one that worked in partnership with management, a partnership that existed alongside robust debate and a willingness to consider all aspects of an issue for the benefit of the profession.

In October this year the College will farewell a number of councillors who have contributed enormously to Council. Professor Peter Mudge (chair) and Dr Chris Mitchell (president), Associate Professor Jan Radford (censor in chief), Dr Peter Maguire (WA faculty chair), Associate Professor Jane Smith (Queensland faculty chair), and Dr Naomi Harris (registrar representative) have all served with fastidiousness and aplomb. I also gratefully acknowledge the contributions of co-opted councillors Neil Greenaway (FARM committee chair) and Dr Brad Murphy (National Faculty Aboriginal and Torres Strait Islander Health chair).

I would like to make a special mention of the sage advice, wisdom and excellent chairing skills of Professor Peter Mudge. Council have benefited from having Peter as chair. Peter manages to allow each person to speak their mind while guiding Council to a consensus or decision point

within effective timelines through his experience in both general practice and academia. The courtesy and openness that Peter shows to all has allowed Council to make the most of his tenure and he vacates the chair leaving behind an effective council governance group.

The success of the College over the past 2 years could not have been achieved without the boundless energy of the College's president, Dr Chris Mitchell. Chris has always had the College's future as his focus. As CEO, I have relied on Chris to participate in any forum at any time, anywhere; his enthusiasm, extensive knowledge, high visibility and political skill have increased the positive reputation of the College. Few presidents would be as versatile, whether persuading the health minister, working with other organisations, speaking to potential members, or being prepared to speak directly to a disaffected GP, Chris welcomes each task. He has been reliable, thorough, strategic and thoughtful in all endeavours that he has undertaken for the College. Chris has earned the respect of all the staff for his positive approach and willingness to engage at all levels.

This year the strategic plan was reviewed and a succinct working document created. It is shown on page 16 of this annual report and is available at the College website (www.racgp.org.au/council/strategicprinciples/). The plan was created by a working group chaired by Neil Greenaway, and consisting of several senior Fellows and staff, namely: Dr Morton Rawlin (Council representative, vice president, Victoria faculty chair, National Faculty of Specific Interests chair), Dr Naomi Harris (registrar representative on council), Dr David Knowles (Tasmania faculty chair), Dr

Eric Fisher (past president), Dr Mukesh Haikerwal (Honorary Fellow), Professor Moyez Jiwa (Fellow), Associate Professor Di O'Halloran (Fellow), Zena Burgess, Robert Pratt (Deputy CEO), Mark Donato (General Manager Membership and Marketing), Dr Brendan Grabau (Director of Education), Josephine Raw (General Manager Practice Innovation and Policy), Peter Marshall (Manager National Rural Faculty), Jolanda de Jong (Manager Tasmania faculty and Manager, National Faculty of Specific Interests).

The College is recognised and respected by GPs with membership continuing to grow to record numbers. In 2009–2010, 63% of GPs in Australia chose to be a member of the College.

It is pleasing to have seen a 10% increase in the number of registrar members, resulting in a record number of 2074 registrar members. We are also delighted to see a 6% growth in the number of overseas members, as we see that more of our colleagues from around the world are benefitting from the College's clinical learning services, which includes the conjoint Fellowship examination.

The College has a continuing focus on e-health. It is showcasing the role of general practice in e-health through the mobile health display, which has been housed at College House in South Melbourne. It will be on display in Cairns at our conference and will be moving to the faculties throughout the year. The College has committed to developing technologically based tools and decision support to assist the work of members such as the e-red book, AMH online and others, which are available as member benefits.

Advocacy has been effective this year with the Practice Innovation and Policy Department making over 40 written submissions on reform and clinical practice matters to the government and its agencies. Effort has been made by the president and myself to be more frequent visitors to Canberra and become known to departmental and ministerial staff. Some of the significant submissions include the RACGP's response to: the National Health and Medical Research Council (NHMRC) *Australian Guidelines for the prevention and control of infection in healthcare*, the National E-Health Transition Authority's (NEHTA) Electronic Referrals Release 1.0, the H1N1 pandemic, the National Health and Hospital Reform Commission Report, the National Preventative Health Task Force discussion paper 'Australia: The Healthiest Country by 2020', the National Primary Health Care Strategy discussion paper, the Medicare Benefits Review and the National Registration and Accreditation Scheme.

Through consistent and sustained advocacy, we have seen increased focus and investment in general practice and primary healthcare, recognition of the central and coordinating role of the GP, and the continued role of the medical profession in setting and maintaining standards for clinical education, training, and improvement.

Standards and quality have always been important to the College and this year the College developed a fresh approach to training post accreditation, and the development of the 4th edition of the *Standards for general practices*. A working group, under the leadership of Dr Janice Bell, tackled training practice accreditation

issues and Council endorsed this new approach in June. Under the new model, the College will endorse Regional Training Providers (RTPs) who meet College standards to oversee training practice accreditation on the College's behalf. The RTPs will select, support and accredit training practices to our standards, and the College will receive feedback from RTPs and will also continue to receive feedback from registrars. The RACGP retains the authority to approve all practice accreditations where training is undertaken in its name.

This new approach will maintain the very high quality experience for registrars in the training program and will allow the College to build training capacity to meet the large increase in GP training places needed. Many practices are now embracing vertical integration with medical students, junior doctors undertaking prevocational general practice placements, and registrars all being trained in general practice. This new approach will reduce the administrative burden of training for practices taking on the important responsibility of supporting the next generation of GPs.

It is also a step by the College toward better acknowledgment of the commitment and hard work of supervisors and trainers who support the next generation of GPs, often at significant personal cost to themselves and their families. While we acknowledge the recent increase in government support for GP supervisors, more must be done to support and acknowledge the important work of both supervisors and trainers.

The Standards Committee, under the leadership of Dr Lynton Hudson, has been actively working to update the practice standards, which incorporates a focus

on e-health. The standards are currently being trialled and are expected to be released by the end of 2010.

The uncoupling of the Fellowship exam is now routine and in 2010 the College uncoupled the Practice Based Assessment. Such changes reflect the increased appreciation by the assessment area of the need for flexibility for candidates.

The College continues to admit a culturally diverse population of GPs to Fellowship with GPs practising in Australia from many countries overseas such as Ireland, Nigeria, Bangladesh, Egypt, the Philippines, Sri Lanka and Russia.

I would also like to express my appreciation for the ongoing contribution of National Standing Committee members who contribute to the vibrancy of the College and give generously of their expertise. There are hundreds of GP members who represent the College in government and professional forums and are relied on by staff for guidance about clinical and practice matters.

Although the College represents 25 000 GPs, it employs only 266 equivalent full time staff nationally. I would like to acknowledge the contribution of all staff to the success the College currently enjoys. In particular, I would like to sincerely thank the senior leadership team of Robert Pratt, Brendan Grabau, Josephine Raw and Mark Donato. This team is extremely committed and conscientious, responding proactively to whatever demands are made of them, and responding to challenges with grace and good humour. My thanks to each of you for helping me to provide leadership to the College this year.

Overall the summary for 2009–2010 is that the College is a dynamic place to

Overall the summary for 2010 is that the College is a dynamic place to work. Great strides have been made consolidating the work of previous years while new initiatives into exciting frontiers will continue the College's valuable contribution to Australia's health and wellbeing. 'Healthy Profession, Healthy Australia' is both our purpose and our passion.

work. Great strides have been made consolidating the work of previous years while new initiatives into exciting frontiers will continue the College's valuable contribution to Australia's health and wellbeing. 'Healthy Profession, Healthy Australia' is both our purpose and our passion.

Finally, I leave you with an unsolicited letter from a member received by the NSW&ACT faculty recently. It is a poignant reflection on the work of the College and testament to the vitality of those who are associated with it.

... And thank you sincerely for your hard work in bringing our collective efforts as GPs together through the RACGP. Most of us work quietly over long periods of time making available that personal support to individuals and their families in times of need. This is a very silent, almost invisible process from a global community point of view, but the work of the likes of yourself break that silence and invisibility, and help to provide the support our local GPs require to continue their vital task.



Associate Professor
Jan Radford

*From 1 July 2009 to
30 June 2010, 871 new
Fellows were admitted
to Fellowship of the
RACGP.*

Censor in chief

In the past year, the RACGP delivered two examination assessment cycles with 678 candidates successfully completing all three segments of the examination. There were two intakes of candidates for the Practice Based Assessment, which allows doctors to complete their assessments at their own practices. Ten candidates participated in Practice Based Assessments in late 2009 and 14 participated in 2010. The Modular Assessment Pathway (MAP) to Fellowship has been open since 2007.2. Of the 98 candidates originally enrolled in the pathway, 63 have been admitted to Fellowship, including 11 since July 2009 with the program closing in 2011.2.

Conjoint examinations were held in August with the Malaysian Academy of Family Physicians, and in November with the Hong Kong College of Family Physicians. Eleven candidates from the Malaysian academy and 81 from the Hong Kong college achieved Fellowship of the RACGP.

From 1 July 2009 to 30 June 2010, 871 new Fellows were admitted to Fellowship of the RACGP. Of these new Fellows, 427 came from the Vocational Training Pathway; 116 came from the Practice Eligible Pathway.

This year saw the introduction of the RACGP Specialist Pathway Program for international medical graduates (IMGs). The Specialist Pathway provides a pathway to Fellowship for IMGs who have completed training and obtained a qualification overseas. It also offers a more structured and supported program for IMGs entering Australian general practice.

The RACGP's Fellowship ad eundum gradum (Faeg) now becomes Category 1 of this new pathway. This year there were 225 Fellows admitted ad eundum gradum originating from Canada, Ireland, New Zealand and the United Kingdom.

The College recognises that, of all the candidates striving to attain Fellowship, IMGs have traditionally had the least support in terms of supervision and training. The College will continue to advocate for improved training and supervision for all IMGs on the pathway to Fellowship.

I would like to thank the dedicated Board of Censors and Board of Assessment for their continued hard work and for their steadfast support of the College's standards. I would also like to acknowledge the hard work of our assessors and RACGP staff at both national and faculty level over the past year. The support of Council and the wider College body of my role in assessment and defining standards is very much appreciated.



Neil Greenaway

I am pleased to report that the College has exceeded budget and achieved a modest operating surplus before adjustment for revaluation of land and buildings. This result continues the positive performance of recent years when the College exceeded budget and delivered surplus operating results. The result is also very pleasing considering the difficult economic environment since early 2008.

Finance Committee

Members of the Finance, Audit and Risk Management Committee for financial year 2009–2010 were: Neil Greenaway (chair and co-opted councillor); Dr Christopher Mitchell (president); Dr Kathryn Kirkpatrick (National Rural Faculty chair); Professor Nigel Stocks (SA faculty chair); Dr Eric Fisher (past president and Life Member); Joan Morgan (external representative with audit and risk management expertise); and Mark Evans (external representative with IT expertise).

Financial position

In accordance with the relevant accounting standards, the College reviews the value of land and buildings on an annual basis. As reported in the financial statements, at year end there was a valuation write-down relating to the New South Wales and Northern Territory faculty premises, which was charged to the operating result. Other property valuation adjustments were positive and the increases were credited to the revaluation reserve. The valuation decline relates solely to the NSW&ACT faculty premises and reflects the continued contraction in the property market in the Sydney CBD.

In mid 2010, the College successfully negotiated the purchase of new premises for the Western Australia faculty. Settlement took place in July 2010 and the purchase was funded from cash reserves.

The College's operating performance is positive, the balance sheet position remains strong, and the organisation maintains a strong cash position.

Internal and external audit

The College appointed independent firm Protiviti as its internal auditor in 2009. The auditors, management and the committee developed a 3 year internal audit plan. Three reviews were completed in 2009 and a further three reviews will be completed in 2010. No significant issues have been identified in the reviews completed to date. Internal auditors are

invited to attend committee meetings.

External auditors, RSM Bird Cameron, regularly meet with the committee during the audit to report on the audit plan, review progress and any issues identified. There were no significant issues raised with the College following the audit and, again, the auditors issued an unqualified opinion on the financial statements.

Risk management activities

The College has continued to strengthen and develop its whole-of-organisation risk management approach. Management is committed to ensuring that risk management and its awareness is embedded throughout the organisation. In mid 2010 management updated the risk management policy and reviewed the risk management framework.

A detailed risk register identifies and classifies key risks and allocates responsibility and actions to mitigate adverse outcomes. The register is updated on a regular basis and changes brought to the attention of the committee.

The committee has a program to review insurances and key policies and plans to ensure they are current and meet the organisation's needs. Recommendations and outcomes from internal and external audit reviews are recorded and actions monitored to ensure issues are appropriately resolved.

I wish to thank each committee member for their support and significant commitment of time and expertise. In particular, I would like to acknowledge the contribution of Dr Elizabeth Marles (NSW&ACT faculty chair) who stepped down as a committee member in October 2009. I would also like to acknowledge and thank the College's management team, in particular CEO, Dr Zena Burgess, Deputy CEO, Robert Pratt and finance manager, Sherryna Fung and her team.



Dr Naomi Harris

It was pleasing to see that a greater number of registrars are choosing to become members and we reached 2074 registrar members in this financial year, our highest figure ever.

Membership Committee

It is heartening to see the increasing number of members choosing to join the College year-on-year. Not only does this underpin its financial position, but also strengthens the College's efforts for advocacy as the key representative body for Australian general practice and enables the College to provide greater clinical educational value for members.

The 2009–2010 financial year saw membership grow by 11% to a total of 21 101 members, of which 17 177 are Australian registered GP members – the highest number in the 52 year history of the College. We also achieved a revenue increase of 8%.

It was pleasing to see that a greater number of registrars are choosing to become members and we reached 2074 registrar members in this financial year, our highest figure ever, 10% higher than in the 2008–2009 financial year.

Our 'budding GP' members – residents, interns, international medical graduate affiliates, medical students – continue to remain strong, and we look forward to supporting these segments further in the coming years.

A number of important changes have occurred in the membership department over the past 12 months. A complete review and remodelling of the Membership Committee was undertaken, and I can happily report that we now have a Membership Advisory Committee who meet monthly via teleconference and provide valuable insights into shaping the College's membership marketing strategies and initiatives. The committee represents all states/territories of Australia and each category of practitioner, including medical students.

The RACGP has a history of providing its members with valuable member benefits. Members who renewed, or joined the College for 2009–2010 before 30 June 2009 welcomed the complimentary early bird gift provided with their membership: three Therapeutic Guidelines titles: – dermatology, cardiovascular and psychotropic. These evidence based guidelines provide practical, reliable clinical information for members to use during their consultations.

As I step down from Council, and as such away from chair of membership, I would like to thank all RACGP members for their ongoing support of the College. Thank you also to the staff and management of the RACGP and the members of the Membership Advisory Committee who have contributed to making this such an enjoyable role over the past 2 years.

The RACGP Strategic plan



The Royal Australian
College of General
Practitioners

The Royal Australian College of General Practitioners is Australia's largest professional general practice organisation and represents urban and rural general practitioners.

We represent over 21 000 members working in general practice and are proud that over 17 000 general practitioners in Australia have chosen to be a member of the College.

General practitioners in Australia provide over 115 million patient consultations annually.

Core strategic objectives

Our members and staff aim to improve the health of all people in Australia, through:

- quality general practice – appropriately resourced, sustainable and vibrant, at the heart of an effective and efficient Australian health care system
- equitable access throughout Australia to quality general practice
- forward thinking College, leading and advocating continuous improvement through clinical, education and e-health advances
- welcoming, collegiate environment delivering exceptional value to all members

Vision

Healthy Profession.
Healthy Australia.

College principles

As guiding principles, our members and staff strive to:

- value our patients, their communities and the general practitioners who care for them
- achieve quality and excellence
- promote a unified voice for general practice
- be evidence based, forward thinking and innovative
- collaborate widely
- support fairness and equity
- work with integrity; ensuring we are ethical, honest and transparent

General practice

General practice is the provision of patient centred, continuing, comprehensive, coordinated primary care to individuals, families and communities.

STANDARDS

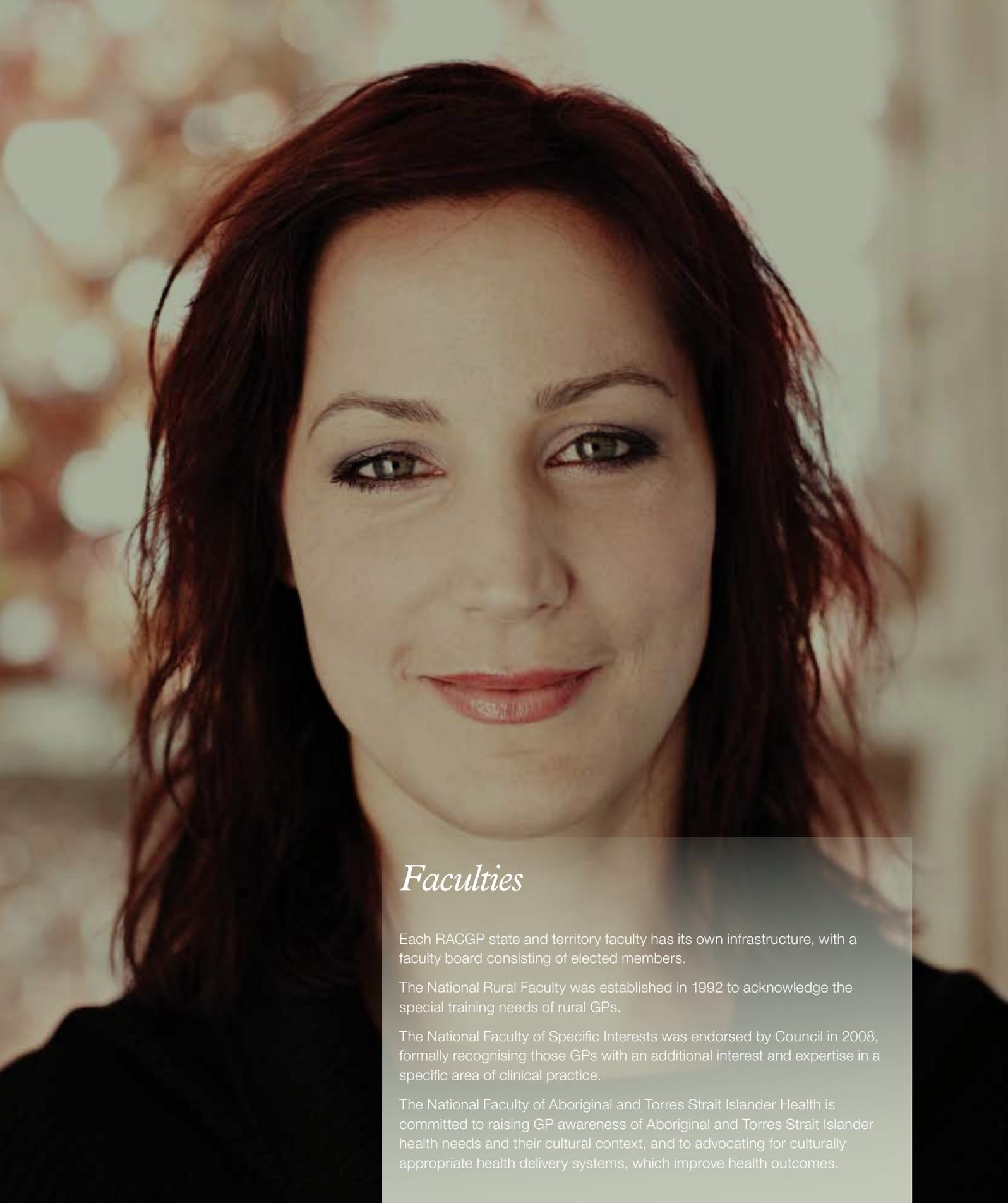
QUALITY

EDUCATION

ADVOCACY

PROFESSIONAL LEADERSHIP

COLLEGIALITY



Faculties

Each RACGP state and territory faculty has its own infrastructure, with a faculty board consisting of elected members.

The National Rural Faculty was established in 1992 to acknowledge the special training needs of rural GPs.

The National Faculty of Specific Interests was endorsed by Council in 2008, formally recognising those GPs with an additional interest and expertise in a specific area of clinical practice.

The National Faculty of Aboriginal and Torres Strait Islander Health is committed to raising GP awareness of Aboriginal and Torres Strait Islander health needs and their cultural context, and to advocating for culturally appropriate health delivery systems, which improve health outcomes.



Dr Liz Marles
Chair

Membership reached over 6300 by the end of the 2009–2010 financial year, with over 5300 GP members.

New South Wales & Australian Capital Territory

The New South Wales and Australian Capital Territory faculty has much to celebrate: membership reached over 6300 by the end of the 2009–2010 financial year, with over 5300 GP members. This represents an increase of 4% on 2008–2009, including a pleasing 14% increase in rural membership.

At a very exciting annual general meeting in Perth in October, the faculty demonstrated its depth of talent by scooping the 2009 College awards. Dr Ayman Shenouda, a Wagga Wagga GP and Director of Medical Education won GP of the Year; Walgett Doctors Surgery run by Dr Vlad Matic and his colleagues won GP Practice of the Year; and Associate Professor Diana O'Halloran received the Rose-Hunt Award for services to the RACGP.

As a result of the faculty board strategic planning meeting in December 2008, four new working groups have been formed: Workforce, Practice Management, Vertical Integration and Primary Health Care Think Tank. Each group has started implementing the 5 year strategic plan in the context of overall College objectives. The faculty Board also welcomed new registrar board member Dr Kylie Vuong.

In March the faculty was proud to join with GP Registrars Australia, the National E-Health Transition Authority (NEHTA), and WentWest GP Division and Training Provider to present a series of forums and dinner with Wonca's then President-elect, Professor Rich Roberts. In particular, Rich was joined by NEHTA Chair Dr Mukesh Haikerwal and Dr Graeme Miller, Chair of Wonca's Terminology and EHR Structure Working

Group, to discuss the future of electronic health records in Australia.

The faculty also ran many courses for international medical graduates (IMGs), one of the most successful being a medical language course that has contributed to successes for participants in the FRACGP examination. In June, the faculty delivered its first careers forum for IMGs pursuing the Australian Medical Council route to medical registration.

On a more somber note, the faculty was deeply saddened by the passing, in June, of our Research Director of 15 years, and our mentor and inspiration in general practice research of over 40 years, Emeritus Professor Charles Bridges-Webb AO. In honour of Charles' immense contribution to faculty life and to general practice, we are naming our North Sydney education suite the 'Charles Bridges-Webb Education Centre'.

I am pleased to finish the year by welcoming new members to the Board in 2010–2011 and welcoming back existing members as a result of our recent round of Board elections.

I would also like to take this opportunity to thank our hard working and committed staff in the North Sydney office. We look forward to another fruitful year ahead.



Dr Morton Rawlin
Chair

We are also committed to ensuring we conduct an excellent exam and with the introduction of the 2011–2013 triennium, we are looking forward to supporting the educational needs of GPs in Victoria.

Victoria

The Victoria faculty has had a highly successful 2009–2010. With membership growing across the College, the Victoria faculty is pleased with its 3.66% growth in membership. This is a fantastic result for the faculty as it highlights that members are responding to the faculty's support and initiatives.

The faculty prides itself on engaging with members and providing them with a quality educational program and the opportunity to network with peers. In 2009–2010, the faculty developed and delivered 10 educational conferences. The highlights were the delivery of the 5th Big Weekend Conference in April 2010 and the 3rd Managing Drug and Alcohol Problems in General Practice Conference in May 2010, developed by the faculty's Women in General Practice and Drug and Alcohol Committee respectively.

The clear highlight for the Victoria faculty's 2009–2010 events calendar was the Fellowship and Awards Ceremony held in November 2009 in the Members' Dining Room at the Melbourne Cricket Ground. The ceremony saw a record number of 134 newly ratified Fellows admitted to Fellowship of the RACGP with 17 Life Member trophies being presented. Associate Professor Graeme Jones, a Life Member and the faculty's Corlis Travelling Fellow, had his contribution to general practice honoured as he received the Victoria faculty award for Recognition for Distinguished Service to the College.

As well as engaging with members, the faculty also understands the importance of engaging with stakeholders and partner organisations. Over the past year, faculty board members and staff have met with the Victorian Minister for Health,

the Hon Daniel Andrews. This meeting was an opportunity to inform the Minister and his department about the work of the College and the importance of GP led primary care. Meetings were also held with the Chair of General Practice Victoria, Dr Linden Smibert, the Nurses Board of Victoria, Department of Human Services, the Medical Board of Victoria and the Coroners Court of Victoria. These meetings will continue into the next year and it is hoped that joint work and partnerships can be identified and strengthened.

One of the faculty's biggest undertakings is the coordination and delivery of the written and clinical examinations. Two hundred and fifty-five candidates sat the written, and 207 candidates sat the clinical examinations in the past year. This exam process would not be possible without the contribution of more than 200 examiners twice a year. The faculty is committed to the continued support of our valued and respected examiners and is introducing new measures to ensure the invaluable efforts of examiners are acknowledged.

The coming year is an exciting one for the faculty. We are aiming to continue to grow our membership through supporting and engaging with members. The faculty is embarking on an exciting initiative to engage and meet with members across Victoria. We are also committed to ensuring we conduct an excellent exam and with the introduction of the 2011–2013 triennium, we are looking forward to supporting the educational needs of GPs in Victoria.



**Associate Professor
W Jane Smith
Chair**

Local advocacy remains a core activity of the faculty, and our continued presence on key general practice committees and networks has ensured the College has input into important state issues across a range of sectors.

Queensland

2009–2010 marks my last year as chair of the Queensland faculty. I am immensely proud of the profile of the College in this state and the ongoing strong member participation across a broad range of educational and collegial activities achieved. Membership numbers have continued to grow, with continuing strong representation within the National Rural Faculty, further emphasising the crucial part the College continues to play in the rural general practice space.

The past 12 months has seen a continuation of record numbers of candidates undertake the Fellowship exam, and culminated in the faculty welcoming 171 new Fellows over that time. I would like to thank the Queensland exam panel, ably led by Dr Shabana Jaipurwala, and the state censor, Dr Eleanor Chew, for their tireless work in supporting the examination processes.

Once again, the Queensland faculty delivered a strong education program, with notable highlights being our North Coast Refresher Weekend, held on Fraser Island in October 2009 and the flagship Gold Coast Clinical Update Weekend ‘Postcards from General Practice’ conference at Sea World in May this year.

We have also continued to grow our GP Teacher’s Network. This year saw the membership of the network expand threefold with the inclusion of all the universities and Regional Training Providers in the southeast Queensland region. The new shape of the network generated much positive energy and goodwill, standing it in good stead to grow into the future.

The faculty recognises the huge contribution international medical graduates (IMGs) make to healthcare in

Queensland. Each year, the faculty IMG forum program changes in response to the changing medicolegal and political landscape. The 2009 IMG Forum saw 42 international colleagues and a number of interested practice managers and service providers attend. Networking opportunities in the program lead to the establishment of study groups and reduced feelings of isolation. Inspirational talks from IMGs who have successfully obtained Fellowship and become respected members of our general practice community helped greatly in raising confidence and morale.

Local advocacy remains a core activity of the faculty, and our continued presence on key general practice committees and networks has ensured the College has input into important state issues across a range of sectors. Through our membership of the Queensland Committee of Medical Specialist Colleges, we have also built positive relationships with the other Australian Medical Council accredited medical colleges, Queensland Health and the Queensland Minister for Health.

There have been many changes to the general practice landscape over the 6 years that I have been chair of the faculty, with the speed and tempo of these changes and the associated challenges escalating greatly over the past 12 months. The faculty Board and staff have worked with great energy and motivation to ensure the College consistently delivers responsive, proactive and relevant representation and services for all our members. I would like to thank all the GPs who have contributed to the life and energy of the faculty over the past year, and wish continued success for the future.



Dr Peter Maguire
Chair

At the WA faculty, we are fortunate in having a committed group of members who turn up regularly as examiners in the Fellowship exam, work tirelessly on faculty committees, work as medical educators and also those who help in the various educational programs we run. Their contribution is what makes the College truly 'collegiate'. Thanks to all of you – it is a great contribution to our profession and our future members.

Western Australia

2009–2010 has been a year of continued success for the Western Australia faculty. We now have 1885 members, representing an increase of 6.5% over last year's membership figures. The National Rural Faculty membership figures also showed an increase of 13.6% when compared to last year and we also welcomed 83 new Fellows to the faculty.

The GP'09 conference held in Perth in October 2009 was a faculty highlight. The excellent education program, engaging keynote addresses together with the diverse range of concurrent workshop topics, plus brilliant social events including a memorable academic session at Government House made the conference a tremendous success. I extend a wholehearted thanks to the GP'09 organising committee, especially co-convenor Professor Jon Emery and social committee chair Dr Helen Wilcox.

At our general meeting in September 2009 we welcomed new Board members Dr Kirian Puttappa and Dr Jagadish Krishnan. At a faculty planning day held in December the Board considered the challenges and opportunities for the year ahead. Providing high quality education events to our members was again listed as our top priority.

In response to this the faculty delivered 51 events over the past year including: the Grand Round Series, the New Fellows Education Series and the 'Around the World' series. Our office based procedural skills workshops continue to be oversubscribed.

The faculty joined the Western Australian General Practice Network in hosting two Medicare workshops, which jointly attracted over 230 GPs and practice staff. We also ran four mental health

workshops – two in the metro area, one in Broome and one in Northam. We continue to run the Australian Medical Council bridging course. Exam case writing sessions are also held at the faculty, along with examiner training nights and Fellowship preparation weekends, which are designed to aid international medical graduates enrolled in the clinical exam.

The faculty continued to meet regularly with other general practice organisations in the state, and the GP stakeholder group formed the previous year continues to gain strength and recognition as we aim to promote general practice as a collaborative discipline.

I would like to thank Dr Roslyn Carbon who filled the shoes of Malvina Nordstrom while Malvina was on maternity leave. Roslyn made a very significant contribution to the faculty, advocating for accreditation of Western Australia rural hospitals.

Sadly, I would also like to note the passing of Dr Geoffrey Gates in November 2009. Geoffrey, who served the College as president, Western Australia faculty chair and faculty provost, was a great friend and advocate to the faculty over many years; he will be sadly missed.

Lastly, I would like to express my sincere thanks to the faculty Board and staff. Your dedication, hard work and commitment throughout this last year bodes well for the future of general practice in our state.



Dr David Knowles
Chair

The past 12 months has been exciting and rewarding for the Tasmania faculty. The combination of our faculty Board and the enthusiasm of faculty staff has resulted in significant growth in all core areas.

Tasmania

The past 12 months has been exciting and rewarding for the Tasmania faculty. The combination of our faculty Board and the enthusiasm of faculty staff has resulted in significant growth in all core areas. In particular, we have been rewarded by increased membership and have enhanced influence of the College with our members, our stakeholders and our communities.

This year has been the first full year for new state manager, Jolanda de Jong. Her enthusiasm and guidance have not only benefited the faculty, but also nationally through her leadership of the National Faculty of Specific Interests, which has its base in Tasmania.

Both the Board and staff have invested considerable time and resource to developing and defining the faculty's strategic direction, ensuring that the faculty is forward thinking, relevant and responsive to the needs of members and their communities as we move forward. This has resulted in a number of new initiatives and also supported ongoing successful programs.

Some of the highlights include exposure at AGFEST, one of Australia's largest community events, the re-introduction of our lunchtime education meetings, support of national education programs and a focus on providing a prominent presence in regional areas of Tasmania. Prompted by the success of our annual Women in General Practice Weekend, a much anticipated Men's Weekend will be offered to GPs later in the year.

Our commitment to the important role played by international medical graduates in the community saw the Tasmanian launch of the RACGP Specialist Pathway for General Practice.

The faculty progressed the initiative by gaining accreditation from the Australian Medical Council to undertake the Pre-Employment Structured Clinical Interviews in Tasmania. The first of these interviews was rolled out in July 2010. We acknowledge the support of all stakeholders in this endeavour, particularly GP Workforce who have provided valuable assistance and counsel.

Although a small faculty, the influence of Tasmania faculty Fellows nationally has always been significant. I would like to acknowledge three Fellows who have proudly continued this theme and who will finish their terms in 2010.

On behalf of the faculty, I sincerely thank Associate Professor Jan Radford who will complete her fourth year as Censor in chief, Dr Fiona Joske for her involvement with the College exam and Professor Peter Mudge as Chair of RACGP Council.

In closing, I would also like to thank the Tasmania faculty Board for their generous support in my first year as faculty chair and again acknowledge Jolanda de Jong and her team Julia Ray, Jacqui Quinn, Allison Norman, Joanna Rosewell and Matt Rush for their commitment to members.



Professor Nigel Stocks
Chair

We are a membership based organisation that is responsive to the needs of general practice, willing to listen and ready to change if necessary.

South Australia and Northern Territory

For the first time in many years, the South Australia and Northern Territory faculty will organise an election for its faculty Board. It is reassuring that interest in taking an active part in College life has not diminished and busy GPs are prepared to give up their personal time to further the aims of the College.

We are a membership based organisation that is responsive to the needs of general practice, willing to listen and ready to change if necessary. Having new members on the Board strengthens the faculty and allows long standing Board members such as Dr Stephen Leow and Dr Peter Chia, who are retiring at this election, to pursue other interests. I would like to thank them for their contribution over many years and wish them every success for their future endeavours.

This year the faculty has continued its good work in advocacy with South Australian and Northern Territory governments, providing a successful pre-exam seminar and contributing to the SA Medical Careers Expo. Members have been involved in Pre-Employment Structured Clinical Interviews (PESCI) and Fitness for Intended Clinical Practice Interviews (FICPI), have helped international medical graduates prepare for the College Fellowship exam, and contributed to the Pain Management Network. Faculty staff have organised general practice education courses for practice staff, QA&CPD provider workshops and facilitator training and participated in Grad Week at Adelaide University and Flinders University.

For ensuring the continued success of the faculty I would sincerely like to thank faculty staff and in particular, our new faculty manager, Stephanie Clota.

The College exam and Fellowship is an important aspect of College life therefore it is appropriate to name a few members who achieved Fellowship last year. I would firstly like to congratulate Dr Peter Joseph, a past president of the College, who also addressed our annual dinner and spoke about the value of Fellowship. Dr David Tye, a past chair of the faculty and several senior GPs in Adelaide including Dr Richard Heah, Dr Richard Johns and Dr Frank Maldari. And to all who achieved Fellowship in the past year may I say thank you for supporting the College, congratulations on achieving a milestone in your careers and being willing to have your knowledge, skills and experience assessed by your colleagues. Please accept my and the faculty's best wishes for your future.



Dr Brad Murphy
Chair

I feel proud to be a member of a College that has undertaken to work strategically, practically and collaboratively toward ensuring that the health of Aboriginal and Torres Strait Islander people is given the attention it deserves. I look forward to continuing to work with Board members and College Council to ensure that the College's investment leads to meaningful and effective outcomes for GPs and Aboriginal and Torres Strait Islander communities.

National Faculty of Aboriginal and Torres Strait Islander Health

The RACGP has demonstrated its strong commitment to enhancing the health of Aboriginal and Torres Strait Islander people through the establishment of the National Faculty of Aboriginal and Torres Strait Islander Health. The faculty, endorsed by Council in November 2009 and established in February 2010, aims to engage College members in working toward a healthier future for Aboriginal and Torres Strait Islander people.

The faculty builds on the previous work of the National Standing Committee for Aboriginal Health (NSC-AH) and the Aboriginal Health Unit; both created a strong foundation for progress and a network of community support. I wish to acknowledge and thank the individuals involved in both the national standing committee and the unit.

The leadership of the current College Council in its decision to establish the faculty, and to include the Chair of the faculty as a co-opted position on Council, has been outstanding. Both decisions have emphasised the College's commitment to supporting GPs to help 'Close the Gap'.

Underpinning the establishment of the faculty is a commitment toward working together with members, Aboriginal and Torres Strait Islander organisations, communities and individuals to ensure that general practice is well resourced and supported to provide comprehensive, patient centred and holistic care to individuals and communities.

The faculty Board is well equipped for this role. It consists of general practice leaders, GPs with extensive experience in Aboriginal and Torres Strait Islander health, and representatives from the National Aboriginal and Community Controlled Health Organisation (NACCHO) and the Australian Indigenous Doctors' Association.

The Board also comprises membership of Aboriginal and Torres Strait Islander doctors, community members and a registrar representative. In the past 12 months, these members have overseen a number of strategic projects including: the development of an interpretive guide for Aboriginal health services to assist them to utilise the *Standards for general practices*; preparation of a patient information flip chart to optimise health outcomes for Aboriginal people who take warfarin; a review of cultural safety training; updating the RACGP Position Statement on Aboriginal and Torres Strait Islander health; and development of a policy on the conduct of Welcome to Country and Acknowledgement of Country for College events.

At an advocacy level, the faculty has continued to represent the College and its members on Commonwealth committees, providing advice on important Close the Gap health initiatives. This representation has enabled the faculty to advocate for structural and appropriate changes, as well as to ensure new initiatives are relevant to general practice.

As part of the Close the Gap reforms, the faculty has been funded to undertake two new projects that will benefit members and those working in general practice. The first project involves the development of an online module for cultural awareness training. The second involves collaboration with NACCHO to update the National Guide to a Preventive Health Assessment for Aboriginal and Torres Strait Islander People.

I invite all RACGP members to take an active role in the development of the faculty and to embrace our slogan 'Working Together', so that collectively we can make a significant and meaningful contribution to 'Closing the Gap'.



Dr Morton Rawlin
Chair

In its ongoing development the faculty undertakes to stay true to its initial aim, outlined by Council in 2007, that of identifying within its own membership groups of GPs with a specific interest and expertise, defined by a single clinical, organisational, educational or contextual activity.

National Faculty of Specific Interests

With the endorsement of the Faculty of Specific Interests in 2008 the College entered into a new, exciting and at times challenging phase in its engagement with, and representation of, members. The faculty, now the National Faculty of Specific Interests, or NFSI, focused this year on the development of operational guidelines and criteria, supported by Council's original endorsement and informed by a number of College documents such as the *Standards for general practices* and the General Practice Curriculum. This developmental work culminated with the endorsement by Council of the Principles and Processes – Faculty of Specific Interests at Council in February of 2010.

In its ongoing development the faculty undertakes to stay true to its initial aim, outlined by Council in 2007, that of identifying within its own membership groups of GPs with a specific interest and expertise, defined by a single clinical, organisational, educational or contextual activity. The College, for whom generalism is and will always be the prime directive, recognised that many of its members, while no less committed to the generalist practice and having been trained in the generalist paradigm, do develop interests and expertise in specific areas within the discipline of general practice. The NFSI provides the opportunity to share and further develop this knowledge and expertise on a national basis, which in turn positively contributes to the broader College GP membership and better patient outcomes.

Membership of the faculty has grown steadily this year, along with the number of endorsed networks. The existing networks to date are:

- sports medicine
- pain management
- integrative medicine
- medical education
- breast medicine
- custodial health
- addiction medicine
- child and young persons health, and
- psychological medicine.

The activities of the networks have been in the setting of terms of reference for their groups, generation of education activities and developing understanding and skills in their area of interest. Based on their priority as an area of patient need and on their readiness to progress, three of the networks were identified by Council to progress toward the development of a curriculum with the potential to develop a College recognised qualification for their FRACGP members. These networks are breast medicine, medical education and pain management.

The faculty also welcomed the Chapter of Military Medicine as a group supported by the NFSI. The Chapter of Military Medicine, while retaining the title of Chapter, will initially be recognised as a network in the same manner as other areas of specific interest.

The NFSI is about to complete the formation of its first faculty Board. The Board should meet in the latter part of August and then again at GP10. The Board will meet a minimum of four times per year.



Dr Kathryn Kirkpatrick
Chair

This has been another busy year for the faculty with activity particularly focused on the potential impact on rural Australia of the major health reforms.

National Rural Faculty

The National Rural Faculty this year enjoyed further growth in membership of 8%. This represents a total membership of over 7277 financial members maintaining the RACGP's proud reputation for having the largest rural membership of any medical college in Australia.

The final award of the dual qualifications – Fellowship in Advanced Rural General Practice (FARGP)/Graduate Diploma in Rural General Practice (GradDipRural) – occurred in February 2010 as the Graduate Diploma in Rural General Practice is no longer accredited as a tertiary qualification. The faculty will continue to award the FARGP on behalf of the College to registrars and practising doctors who successfully complete the requirements for that Fellowship.

Enrolments for FARGP have increased by 25% to 322, of which 51 are practising GPs. The FARGP online project (assisted by a Federal Government grant) will be completed in 2010 and launched at GP10 in Cairns.

Following the development of a proposal by the National Rural Faculty, the RACGP secured funding from the Department of Health and Ageing to establish a pilot International Medical Graduate Peer Mentor Network. The project funding was used to train 62 experienced IMG Fellows of the College as mentors and delivered on the proposed outcome to orientate 62 newly arrived IMGs to the Australian healthcare system, however, the full value may only be realised by longer term implementation.

The National Rural Faculty has negotiated a new 3 year agreement to jointly manage the Procedural Grant Program. This program has been successful in providing

rural and remote GPs financial support to enable them to attend approved courses in obstetrics, surgery, anaesthetics and emergency medicine for maintenance of these procedural skills. A 3 year agreement to jointly manage the Rural Locum Education Assistance Program has also been settled. This program provides grants to urban GPs to undertake emergency medicine training and commit to a 4 week rural GP locum placement within a 2 year period.

Other activities of the National Rural Faculty during 2009–2010 have included support for membership of the RACGP for rural trainees in Papua New Guinea; involvement in negotiations to assist in building capacity and sustainability for the Papua New Guinea rural program and ongoing membership of, and participation in, the work of the 29 member National Rural Health Alliance, whose vision is good health and wellbeing in rural and remote Australia, with the specific goal of equal health for all Australians by 2020.

This has been another busy year for the faculty with activity particularly focused on the potential impact on rural Australia of major health reforms. I would like to thank the National Rural Faculty Board for their contribution to the faculty, the deputy chair Dr Cameron Loy, and management of the faculty. Thank you also to the National Rural Faculty membership for the wonderful work you do in your rural communities.

The National Rural Faculty Board and management will continue to work hard to improve services in the year ahead.

The Corlis Travelling Fellows

The RACGP Council established a group of experienced and respected Fellows from each state faculty called the 'Corlis Travelling Fellows'. Aply supported by the National Rural Faculty as their secretariat, their role is to provide advice, regional leadership and support, act as a local mentor and liaise with universities, Regional Training Providers and other general practice organisations.

This role has been set up to honour Dr Bill Corlis, a Fellow of the RACGP who was recognised globally for the principles of learning he applied. Dr Corlis never ceased to be amazed at the repository of knowledge that resided in general practice and spent his life as an educator helping GPs uncover the knowledge for themselves through interactive learning.

Though Dr Corlis retired from general practice in 1984, he continued to have a great influence with politicians and the community in his efforts to improve health and education. He was awarded the Medal of the Order of Australia in 1984.

The Corlis Travelling Fellows

Dr John Kramer (NSW&ACT)

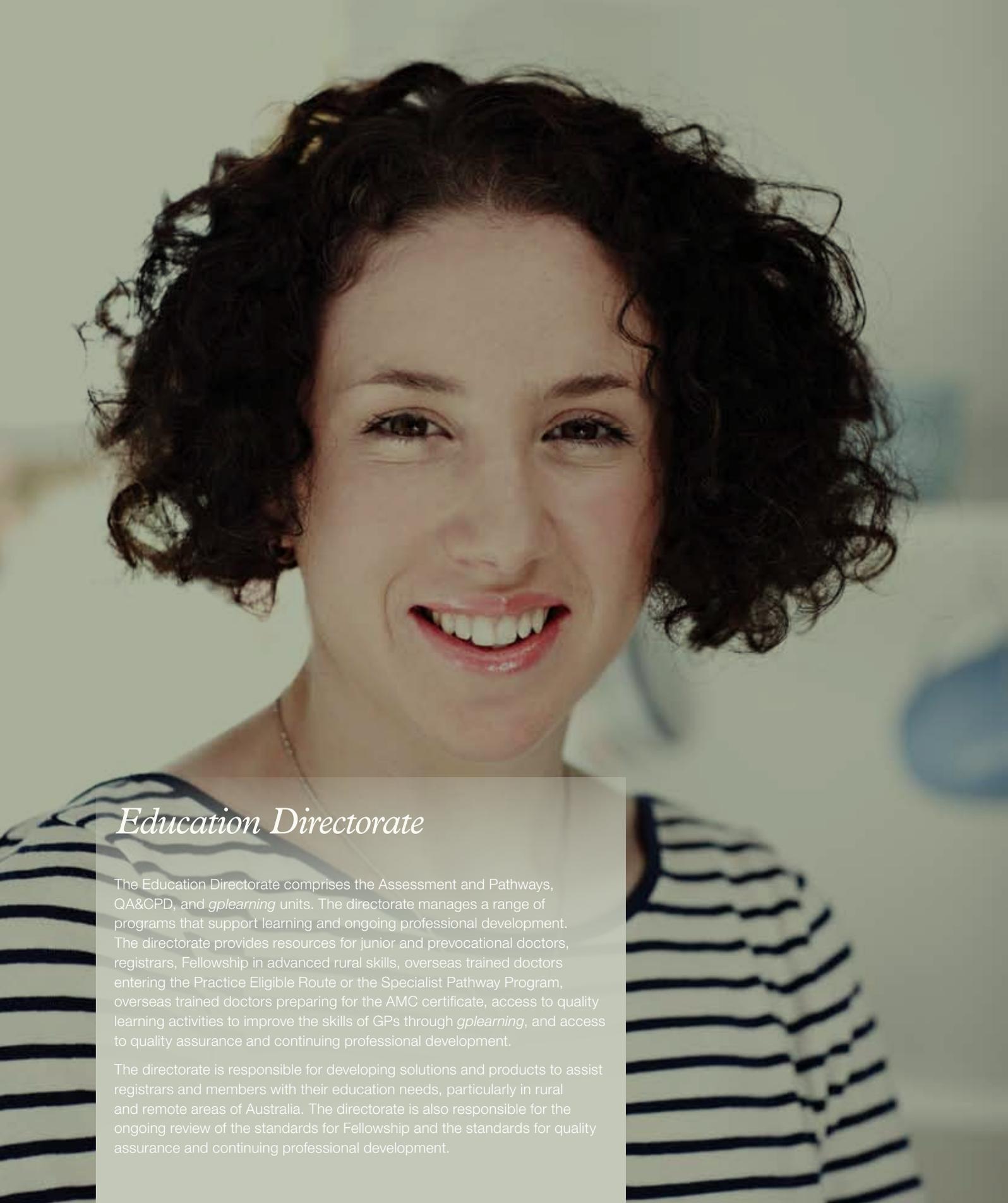
Dr Graeme Jones (Vic)

Professor Max Kamien (WA)

Dr Patricia Montanaro (SA&NT)

Dr Ralph Barnes (Tas)

Dr Harry Jacobs (Qld)



Education Directorate

The Education Directorate comprises the Assessment and Pathways, QA&CPD, and *gplearning* units. The directorate manages a range of programs that support learning and ongoing professional development. The directorate provides resources for junior and prevocational doctors, registrars, Fellowship in advanced rural skills, overseas trained doctors entering the Practice Eligible Route or the Specialist Pathway Program, overseas trained doctors preparing for the AMC certificate, access to quality learning activities to improve the skills of GPs through *gplearning*, and access to quality assurance and continuing professional development.

The directorate is responsible for developing solutions and products to assist registrars and members with their education needs, particularly in rural and remote areas of Australia. The directorate is also responsible for the ongoing review of the standards for Fellowship and the standards for quality assurance and continuing professional development.

gplearning online education system

A system upgrade was implemented in mid-2009 with modifications to improve participant learning experiences and understanding. The new learning management system and enhanced *gplearning* website was officially launched at GP'09 in September 2009. In a *gplearning* audience survey conducted in early 2010, 80% or more (of over 500 respondents) were positive in their opinion of *gplearning* and how it compares to other medical education websites.

The launch of the new learning management system coincided with the release of several new activities including the 'Managing breast symptoms' active learning module, a collaboration with the National Breast and Ovarian Cancer Centre.

Other key collaboration partners in 2009–2010 include the Centre for Developmental Disability Health Victoria, Centre for Oral Health Strategy (NSW), the Department of Health and Ageing, and Wyeth Australia.

Six Category 1 activities and 61 Category 2 activities were released in 2009–2010.

Specialist Pathways Program for IMGs

A major project undertaken in 2009 by the Curriculum and Education Development Unit was the development of the Learning Program as part of the General Practice Specialist Pathway Program for international medical graduates (IMGs).

As a first step, major issues regarding the integration of IMGs into the Australian healthcare context were identified based on the results of an extensive literature review of Australian and international experiences. Based on the outcomes of the literature review, a program outline centering on the areas of individual IMG learning plan, formal learning component, practice supervision and formative assessments was developed by the unit. After endorsement of the program outline by Council, the following program components were developed:

- Learning plan
- A suite of contextual skills modules (Aboriginal and Torres Strait Islander health, cultural awareness and communication skills, patient safety, and emergency management)
- Standards for learning program focusing on the following areas:
 - practice supervision
 - formal learning component
 - formative assessment
 - individual IMG learning plan.

This work was approved by the Board of Censors and is now part of the wider context of the Specialist Pathway Program.

Australian Medical Council re-accreditation

The Australian Medical Council re-accredited the RACGP for a further 4 years until 2013 for training leading to Fellowship and the QA&CPD Program. This is a terrific achievement recognising the educational standing of the College.

Regional Training Provider accreditation

The College has commenced the accreditation of Regional Training Providers for round 3 in mid July 2010. Each RTP undertakes a reaccreditation process once every 3 years.

This is the third round of accreditation of RTPs. The RACGP visitor reviews the RTP compliance with the RACGP Standards for General Practice Education and Training: Program and Providers 2005. The small team of visitors, including one RACGP visitor, undertakes a 4 day review of the RTP.

Curriculum for Australian General Practice

After an extensive consultation phase as part of ongoing curriculum development, the Education Directorate, in conjunction with relevant expert working groups, is now finalising six further curriculum statement chapters for inclusion in the Curriculum for Australian General Practice.

Completion of all statements and endorsement by Council is anticipated within the next few months.

Online results system

The online results reporting system is designed to allow Fellowship candidates gain easy and individual access to their exam results in a timely fashion after sitting their assessment components.

Candidates are naturally anxious to get quality feedback about their results. This is particularly true where candidates want to use the results information to consider their future options and to improve their skills.

The online results system provides fast access to secure and detailed information about a candidate's performance in relation to the standardised pass marks for elements of the assessment. It also separates marks into different clinical areas so that candidates can see their areas of strength and weaknesses and the relative prominence of each clinical discipline according to ICPC criteria. This information will help candidates to tailor their further learning activities.

For candidates who fail the exam, the notification offers the opportunity to attend face-to-face feedback sessions through the relevant state faculty office. The document also sets out the process for application for assessment reconsideration.

Clinical Emergency Management Program

The Clinical Emergency Management Program (CEMP) continues to attract strong interest with 19 intermediate workshops and 13 advanced workshops held during 2009–2010 in various capital cities and rural locations nationwide.

Due to interest from the nursing sector, the *gplearning* team developed a workshop specifically for practice nurses. The inaugural workshop was held in Victoria in April 2010 and a workshop in Canberra quickly followed. These workshops have received positive feedback and a further three workshops are in negotiation for 2010–2011.

Adding to an already growing reputation, the new CEMP CPR 'Train the Trainer' workshops strive to increase the number of qualified trainers capable of teaching and assessing cardiopulmonary resuscitation (CPR) in the general community. Following completion, participants are able to competently teach, assess and award CPR certification. This is of particular significance for rural and remote practices. The first CEMP CPR Train the Trainer workshops were held in Sydney in June 2010 for 22 participants.

Participant interest and uptake is high across the CEMP portfolio resulting in waiting lists. In 2009–2010, the program delivered emergency skills training to approximately 980 medical professionals. All courses continue to be strongly led through the involvement of Mobile Intensive Care Ambulance paramedics as medical educators.

Certificate of Primary Care Dermatology

A review of the Certificate of Primary Care Skin Cancer Management program was completed by the College and the Australasian College of Dermatologists. It has been expanded and renamed the Certificate of Primary Care Dermatology.

The certificate course will include online active learning modules, a dermatological surgery workshop and a clinical experience module (consisting of several education options including clinical attachment, peer group discussion and virtual classroom). This comprehensive course explores the diagnosis and optimal management of common skin conditions and is open to all GPs, registrars and registrars in the Australasian College of Dermatologists training program. The certificate is expected to attract strong interest as activities can now be individually purchased.

Australian Medical Council Bridging Program

gplearning is pleased to announce that the content for the Australian Medical Council Multiple Choice Question Bridging Program has been upgraded. The considerable work by Dr Ronald McCoy and a team of writers has resulted in newly created questions and the restructuring of the stem questions to reflect the change in style by the Australian Medical Council in their multiple choice question exam.

Musculoskeletal guidelines

The RACGP developed the first national musculoskeletal clinical guidelines for GPs and other primary care health professionals in 2009–2010. The guidelines cover osteoarthritis, rheumatoid arthritis, juvenile idiopathic arthritis and osteoporosis.

The 5 year project was completed this year with funding from the Australian Government Department of Health and Ageing. College project officers and expert working group members identified and reviewed the best evidence for primary care and compiled the strength of the body of evidence for the guidelines. The working groups included GPs, rheumatologists, consumers, and allied health professionals.

The four clinical guidelines, developed to the requirements of the National Health and Medical Research Council, are:

- *Clinical guideline for the prevention and treatment of osteoporosis in postmenopausal women and older men*
- *Guideline for the non-surgical management of hip and knee osteoarthritis*
- *Clinical guideline for the diagnosis and management of early rheumatoid arthritis*
- *Clinical guideline for the diagnosis and management of juvenile idiopathic arthritis*

Each clinical guideline includes:

- algorithms (diagnosis and management) that are designed to be reference tools during consultations
- graded recommendations that provide a summary and grading of the best available evidence.

Two additional documents provide support for each of the guidelines and are intended to be read in conjunction with the guidelines:

- full recommendations presenting the body of evidence and the grading for each component of the National Health and Medical Research Council matrix
- a detailed literature review supporting the guideline that presents the body of literature published on the topic, the search strategy and the search results.

As part of the project, the RACGP also developed a GP based multidisciplinary joint replacement assessment tool 'Referral for joint replacement'.

The guidelines and their supporting documentation are available on the College website at www.racgp.org.au/guidelines/musculoskeletal/diseases.



Practice Innovation and Policy

The Practice Innovation and Policy (PIP) Department was established in September 2009, initially bringing together the General Practice Advocacy and Support, Quality Care and e-health, Standards for General Practice, Policy, Research and Library units. This restructure recognised the synergies between these units in providing clinical and business tools and resources to support GPs and general practice. The business units within PIP are:

- Policy and Practice: Policy and GP Advocacy and Support
- Clinical Improvement: Quality Care, Standards for General Practice, Mental Health GP Standards Collaboration, GP Psych Support
- e-health
- Evidence and Knowledge: RACGP Foundation (incorporating Research) and the John Murtagh Centre.

Policy and Practice

Health reform continued to be a major focus of the Government in the 2009–2010 financial year.

The RACGP strongly advocated for GPs and general practice, promoting the importance of patient safety, quality care, coordination of care, whole patient care, better recognition and reward for GPs, and investment into primary healthcare infrastructure, teams, training, and technology.

The Australian Government, and relevant government departments, progressed and initiated a number of health reform projects in 2009–2010, including:

- The National Registration and Accreditation Scheme
- The National Health and Hospitals Reform Commission
- The National Primary Health Care Strategy
- The Maternity Services Review
- The MBS Quality Framework.

Broader health reform issues, including scope of practice, health education and training were also reviewed.

The College continued to build its presence in Canberra, meeting with ministers and key government departments, participating in roundtable meetings, and attending health forums.

A number of positive outcomes arising from the health reform projects have been recognised, including investment into general practice infrastructure, general practice training, and e-health, while there remains a number of ongoing concerns in relation to health reform. The College submissions advocated for

the core values of general practice and promoted the importance of:

- patient safety, access and choice
- the central and coordinating role of GPs in the delivery and coordination of primary healthcare
- better recognition and reward for general practice, including improved remuneration
- ensuring that general practice and primary healthcare funding models are developed in consultation with the profession to ensure feasibility and acceptability
- less red tape in general practice, particularly in relation to the MBS
- preventive health in general practice and primary healthcare
- improving integration of general practice and primary healthcare
- a workable national registration and accreditation scheme
- systems to support GP led teams in primary healthcare.

The substantive and continuing feedback provided by the RACGP has resulted in a number of positive changes, including the clarification of collaborative care arrangements, investment in general practice infrastructure, and the continuing role of the medical profession in maintaining standards for medical practice. With a large number of projects and schemes still underway, the College continues to advocate and lobby for patient safety, GPs, general practice, and a sustainable health system.

The Policy and Practice unit is often asked about the business of general practice. Some of the most common questions concern the policy and procedures of starting and setting up a general practice, or how to close and sell a practice.

The provision of timely and accurate responses to member enquiries is an important part of the services the unit provides. At the same time, these enquiries also assist with the continual update of practice information and the resources available at the College. Resources currently being updated include the publications 'Opening and closing a practice' and 'Reaching a fair deal', both of which are due for release in 2011.

Full of contemporary, relevant information on practice management, these publications will help GPs negotiate the increasingly complex business environment.

Clinical Improvement

The Clinical Improvement unit is a new unit within the Practice Innovation and Policy Department this year that comprises three previously separate units: Standards for General Practice, Quality Care, and Mental Health. Standards for General Practice and Quality Care were merged in February 2010. As the e-health area within Quality Care was expanding, the decision was made to operate it as a separate unit from April. In its place, the Mental Health Unit was re-located from the Education Department to the Clinical Improvement unit.

Within the Clinical Improvement unit, the standards for general practice team has been working hard with the National Expert Committee for Standards for General Practices to complete the review of the 3rd edition of the *Standards for general practices* and the development of the 4th edition of the *Standards for general practices*, which is due to be launched at GP10 in Cairns in October. This extensive review and development phase of the standards has involved a broad public consultation process and a field trial of the draft 4th edition.

In 2009–2010, the quality care team has continued to work with the National Standing Committee – Quality Care (NSC-QC) on various initiatives. These have included a strategic review of the Diabetes Management in General Practice Handbook 2009–2010, which is a joint initiative between the RACGP and Diabetes Australia. Two major projects funded by the Department of Health and Ageing have also been completed on implementation of diabetes and musculo-skeletal guidelines into general practice. These projects enabled the

development of a range of resources including various educational activities, as well as guides for practice nurses and divisions of general practice on ways these groups can facilitate the implementation of the guidelines into the general practice setting.

This financial year also saw the College partner with three other organisations to support a research project currently being undertaken under the auspices of the University of New South Wales, with Flinders, Bond and Monash universities. The research focuses on implementing guidelines to routinely prevent chronic disease in general practice and essentially will evaluate current practice regarding implementation of *Guidelines for preventive activities in general practice* (the 'red book').

The Clinical Improvement unit also has responsibility for the representatives and endorsement processes within the College. This involves seeking and appointing representatives to appropriate state and national committees, and work has commenced on developing College policies on endorsement of commercial and noncommercial products of relevance to general practice.

The mental health team is currently focusing on two important projects. One project, the General Practice Mental Health Standards Collaboration (GPMHSC) project, is funded by the Department of Health and Ageing as part of the Better Outcomes in Mental Health program. The GPMHSC is a multidisciplinary body under the auspices of the RACGP, which is involved in ensuring a progressive training pathway for professional development in mental

health for Australian GPs that will assist them to plan their mental health continuing professional development throughout the triennium.

The RACGP continues to receive funding for the General Practice Psychological Service project which provides GPs with 24 hour access to high quality psychiatric advice for the management of their patients, particularly regarding old age, general adult, child and adolescent, and drug and alcohol psychiatry. The service is actively promoted across Australia.

e-health

The RACGP recognises that general practice is in the ideal position to be at the forefront of e-health. Over the past 12 months, the work of the College has culminated in the formation of an e-health unit that sits within the Practice Innovation and Policy Department.

The work of the e-health unit has been focused on education, resource development and stakeholder engagement to ensure that GPs and the practice team is charged with the knowledge and tools to deliver care in the e-health future.

The Data Governance Council was established 2009 and brought together a wide group that represent GPs, the practice team, the divisions of general practice, medical associations and consumers. Chair, Dr Mukesh Harkiwel, worked tirelessly for the recognition of primary care as the driver for e-health change. The work of Council has been to develop principles under which data will be collected, stored, aggregated and transmitted to support an environment of open information sharing, subject to agreed principles and controls.

The e-Health Working Group was established in 2009 and has continued with the work plan in supporting, developing and promoting e-health initiatives and work practices for general practice teams. Chair, Dr Ron Tomlins has overseen the group's participation in standards development, representative and endorsement, policy development and advocacy for the profession.

e-health Futures

In April 2010 the College launched a very exciting e-health initiative at The John Murtagh Centre, 'e-health Futures', which incorporates the National E-Health Transition Authority's (NEHTA), Model Healthcare Community (MHC). The centre provides the opportunity for general practice teams, other health professionals, health industry associations, consumer groups, privacy advocates, universities, information industry associations, vendors and media representatives to learn more about e-health and the e-healthcare delivery model. The MHC is a key component of the e-health Futures display and provides a walkthrough experience with simulations and demonstrations of how e-health information will work among healthcare professionals and between healthcare settings. The MHC also showcases College e-health initiatives.

Weekly tours provided great opportunities for key stakeholders to learn about:

- The Healthcare Identifiers Service and why the government wants to introduce healthcare identifiers, and how they will work for individuals and healthcare providers
- How healthcare identifiers could be used in practice to underpin a patient's journey through the health system
- How GPs and their practice staff, hospitals, pharmacies and specialists will work with the Healthcare Identifiers Service.

Healthcare identifiers are a key building block in helping to deliver a better, more streamlined health system for patients. They will improve the management and communication of health information for healthcare delivery, and will assist provider organisations to better identify and manage patient information.

In addition to having e-health Futures displayed at College House, the College will also play a key role in the adoption of e-health in Australia by collaborating with NEHTA and hosting a mobile MHC that will travel to the College's state and territory faculty offices. This initiative will ensure that all Australians across all healthcare professions and consumers of healthcare will have the opportunity to learn and experience e-health as it is designed for the future.

As at 30 June 2010, the College had almost 300 visitors to e-health Futures. Pre- and post-tour surveys tell us that visitor knowledge and support for e-health initiatives improved.

The RACGP continues to engage with key stakeholder groups and has worked closely with NEHTA to ensure that GPs' voices are heard in the development of e-health strategies and initiatives. The College has advocated and contributed to a range of key milestones as NEHTA develops systems of interoperability within the healthcare sector.

Evidence and Knowledge

RACGP Foundation

In January 2010, the Research Foundation merged with the Friends of the College and the College Board accepted the change of name from Research Foundation to the RACGP Foundation.

With great sadness, the College noted the passing of Emeritus Professor Charles Bridges-Webb AO, in June of this year. Charles, a member of the College since 1959, was the Patron of the Foundation until his death. Professor Peter Mudge has now taken on the role of Patron. He is also Chair of the RACGP National Research Awards Committee.

The major role of the foundation is to foster positive change in general practice in order to improve the health of all Australians through raising and allocation of funds to approved projects and overseeing promotion of, and investment in, ideas and events that improve access, quality, education, research and public policy that result in measurably healthier populations. The foundation also attracts and disseminates funds to support research and researchers in general practice through the provision of scholarships, fellowships, grants and prizes to GPs.

In 2009–2010, the foundation supported the RACGP through financial contributions to the John Murtagh Centre, the Aboriginal and Torres Strait Islander Health Unit, the National Rural Faculty Brian Williams Award, the History of the College project, the Rose-Hunt Award, and chronic hepatitis B research.

Research grant, scholarship and award winners

Family Medical Care, Education and Research Grants

These grants encourage and support GPs in the early stages of their research career to conduct research into an aspect of primary healthcare.

Dr Margaret Kay, Donata Sackey, Paula Peterson, 'Understanding the barriers and facilitators of health access for refugee communities in Brisbane'.

Dr Louise Stone, A/Prof Jill Gordon, 'Assessing the patient with mixed emotional and physical symptoms: examining differences in clinical reasoning strategies and diagnostic frameworks between GP supervisors and registrars'.

Chris Silagy Research Fellowship

This scholarship is designed to support a research project into an aspect of evidence based primary healthcare by a GP researcher.

Dr Pamela Douglas, Dr Harriet Hiscock, A/Prof Geoffrey Mitchell, 'Evidence into practice: feasibility and acceptability of an integrated intervention for irritable infants under 3 months of age, and their mothers'.

PWH Grieve Memorial Award

This award provides a grant for a GP to undertake a plan of study in medical education or a research project in general practice.

Dr Christine Longman, 'GP registrar observation of supervisor consultations: What is its educational value?'

RACGP/APHCRI Indigenous Health Award

This award supports GP initiatives in indigenous health, including support for indigenous medical students, medical students undertaking experience in indigenous health, indigenous medical graduates undertaking GP training, registrars and GPs undertaking research or educational projects in indigenous health. It also provides support for other GP initiatives to deliver high quality healthcare to Indigenous Australians. (Co-funded by the Australian Primary Health Care Research Institute).

Dr Nada Andric, 'Bush medicine: a support guide for junior doctors undertaking GP placements in rural and indigenous communities'.

Ms Karen Taylor, 'Financial assistance during medical training'.

Rex Walpole Travelling Fellowship

The Rex Walpole Travelling Fellowship supports a plan of travel for a GP.

Dr Jan Coles, Travel and present to the World Health Organization Sexual Violence Research Forum: coordinated evidence-based responses to end sexual violence 6–9th July 2009, Johannesburg South Africa.

RACGP/CONROD Research Fellowship

The RACGP/CONROD Research Fellowship was established by the RACGP and the Centre of National Research on Disability and Rehabilitation Medicine to address concerns about the unacceptable morbidity and premature mortality associated with road trauma. The Fellowship encompasses all types of motor vehicle related trauma, with a particular (but not exclusive) focus on whiplash. Fellowships of up to \$20 000

were available to support research in general practice patient populations who have experienced motor vehicle related trauma.

Dr Winston Lo, A/Prof Rebecca Ivers, Dr Lisa Keay, 'Overcoming barriers to using child restraints in an urban indigenous community: a pilot study'.

A/Prof Peter Schattner, Dr Kay Jones, Dr Andrew Beveridge, 'To drive or not to drive: assessment dilemmas for GPs'.

The Alan Chancellor Award

The Alan Chancellor Award is presented to the best first time presenter of a research paper at the RACGP Annual Scientific Convention.

Dr Faline Howes, Emily Hansen, Danielle Williams, Mark R Nelson, 'Barriers to the optimal management of hypertension in primary care'.

Best Research Article in Australian Family Physician Award

A/Prof Sue Page, 'Improving vaccination cold chain in the general practice setting'. Aust Fam Physician 2008;37(10):892–6.

History of the College project

In 2007, the family of the late Robyn Cronnolly bequeathed to the College a sum of money to be used for a history project. Robyn was a member of staff from 1994 until her untimely death in 2006. Following consultation with her family, an essay was commissioned to celebrate the positive contributions made to the College by staff and members since its inception in 1958. The historical research essay, 'Cum Scientia Caritas', approved by the Archives Committee and History Screening Panel, was written by Dr Fay Woodhouse (University of Melbourne Research Fellow). The history project was managed by Tom Burgell, the College's archivist.

RACGP Foundation

Benefactors

Dr Eric Fisher AM
Dr Peter Joseph AM
Dr Evan Ackerman
Dr Peter Mudge
Dr Liz Marles
Dr Mark Harris
Dr Michael Kidd
Professor Jon Emery
Australian Primary Health Care Research Institute, Australian National University.

Friends

Dr Andrew Ramsay
Dr Brian Sando OAM
Dr Elizabeth Jane OAM
Dr Geoffrey Beale
Dr Graeme Hudson
Dr Graeme Roberts
Dr James Pollitt
Dr Norval Yeaman
Dr Samuel Howes
Dr Warwick Adams OAM
Dr Graham Lovell
Dr Sally Cole
Professor Alexander Reid
Professor John Murtagh AM
TNS Healthcare.

National Research and Evaluation Ethics Committee

The primary task of the National Research and Evaluation Ethics Committee (NREEC) is to assess the ethical principles and associated guidelines for research involving humans in the Australian primary healthcare setting, and to protect the welfare and rights of the participants in research.

The NREEC is constituted under the National Health and Medical Research Council guidelines; membership of the NREEC includes a chairperson, vice chairperson, three lay people, a minister

of religion, a lawyer representative, a GP representative, and several members with current research experience relevant to research proposals regularly considered by the NREEC. The Registrar Research and Development Officer from GPET also sits on the committee each year.

In 2009–2010 the NREEC reviewed 14 applications for ethics approval. Applicants comprised mainly GPs, registrars, divisions of general practice and university researchers. Submitted applications included clinical trials, audits and screening, prospective evaluations, initiation of treatments, observations, access to care, immunisation uptake and e-health.

The committee expedites the ethics approval process for researchers under time pressure by reviewing submissions out of session. Both the foundation manager and foundation administrator work with potential and interested researchers, guiding them through the ethical process and advising on issues such as requirements for clinical trials, patient information sheet and consent forms, legal indemnity, fee structure and monitoring of projects.

The College is grateful to all researchers and committee members alike, who have helped build a strong evidence base in general practice. Their combined efforts have directly contributed to the high quality of health Australia enjoys.

John Murtagh Centre

It has been an exciting year for the John Murtagh Centre. Over the past 12 months there has been an expansion of the range of web based resources available to library users and a number of significant service improvements.

New resources

- A suite of EBSCOHost full text databases comprising: the popular nursing database CINAHL Plus with full text; MEDLINE with full text; Psychology & Behavioral Sciences Collection; Health Business Elite and the Australian & New Zealand Reference Centre offering useful general reference texts, newspapers and magazines. Advanced linking technology enables seamless access from cited references within the point-of-care tool, DynaMed, to many full text articles available through EBSCOHost as well as live links to full text journal titles from the library's A–Z list of journals
- Harrison's Online featuring the complete contents of Harrison's Principles of Internal Medicine (17th edition) along with additional content such as podcasts, graphics, lecture notes and videos
- Over 40 AccessLange e-books accessible via a sophisticated but intuitive search interface. Additional content includes case files and cross references to other texts in the collection.

Service improvements

- A new library management system and online catalogue offering a user friendly search interface. Library users can check the status of their loans or reserved items, search for resources using a range of search options and see what resources have recently been added to the collection
- The streamlining of the electronic table of contents (eTOCs) service enabling library users to access any of the available current eTOCs directly from the library's web pages, along with an archive of 3 months for each eTOC package or title. Users can register to be alerted by email when new content is available for viewing.

The team of library staff at the John Murtagh Centre has supported the research endeavours, training activities and clinical decision making of many College members by supplying journal articles and resources from library stock and external sources, and by performing literature searches on a range of topics. Demand for services has been strong with a record number of individual serial numbers issued for downloading the popular point-of-care resource, DynaMed, to PDAs.

A close-up portrait of a woman with dark, curly hair, wearing large hoop earrings and a dark top. She is smiling slightly and looking towards the camera. The background is a plain, light-colored wall.

Membership and Marketing

The Membership and Marketing Department comprises three business units: Communications, Marketing, and Membership.

The department develops and implements strategic marketing, brand, membership and communication plans in line with the College's overall strategic and positioning priorities.

Specific outcomes include the management and production of a suite of professional, educational and clinical publications in both hardcopy and electronic formats, including the College's flagship journal *Australian Family Physician*.

The department is responsible for leading and maintaining an outstanding media profile for the College in the medical media as well as mainstream media channels, optimising publicity that promotes the College's primary healthcare priorities.

The department also co-ordinates the College's annual conference for general practice and runs the membership campaign to recruit and retain members to the College.

Communications

Publications

The Publications unit continued to provide other College business units and faculties with a high quality editing and design service. In 2009–2010 the unit produced a range of College collateral including:

- the **check** Program
- the Clinical guidelines for musculoskeletal diseases
- *Guidelines for preventive activities in general practice* (the 'red book'), 7th edition
- *Interpretive guide of the RACGP Standards for general practices (3rd edition) for Aboriginal and Torres Strait Islander health services*
- *Cultural safety training: Identification of cultural safety training needs*
- Diabetes management in general practice project: small group learning modules, audit activity, practice nurses guide and network guide
- Musculoskeletal management in general practice project: small group learning modules, algorithms, audit activity, PDSA activity, practice nurses guide and network guide
- the annual report
- the College's marketing and membership collateral.

Australian Family Physician

Australian Family Physician continued to be Australia's only peer reviewed, MEDLINE listed and SCIE indexed journal for GPs.

AFP's global circulation also continued to grow, with the most recent audit (April 2009 to March 2010) certifying a circulation of 40 741.

The January/February 2010 issue showcased a new look *AFP*. *AFP's* talented graphic designer, Jason Farrugia, designed a clean, sophisticated and accessible journal to take us into the new decade. Many of the sections changed, with the research section taking up its rightful central place. *AFP* also contracted a new illustrator, Dean Gorissen, a Children's Book Council award winning illustrator, who has provided *AFP* with a striking presence on the shelves and desktops of Australia's GPs.

In June 2010 Thomson Scientific released the journal citation reports for 2009 (based on citations in 2007 and 2008) and gave *AFP* its first impact factor: 0.570. This figure indicates that, on average, *AFP* has one citation for every two papers published.

Over the past 4 years *AFP* has hosted a GPET funded Publications Fellow position. This is an academic registrar role in which the registrar combines teaching and involvement in a research project with work at *AFP*. There was a high level of interest in the position for 2010, which resulted in two academic registrars joining the unit for a period of 12 months.

Good Practice

In early 2010, the College launched the first issue of its new monthly tabloid for GPs, *Good Practice*.

Good Practice features a balanced mix of news and views reported at both a

national and local level. It keeps readers up-to-date with the College's work around advocating for a better healthcare system in Australia.

Good Practice is delivered each month with *Australian Family Physician* and includes regular in-depth features and dedicated sections including:

- business
- e-health
- membership news and offers
- QA&CPD, and
- faculty news.

While you're waiting...

The College has long played an important role in promoting public health and continues to do so through a number of channels. In March 2009 the College launched its consumer magazine *While you're waiting...*, a patient focused magazine distributed via general practice waiting rooms throughout Australia.

The February 2010 issue provided advice on diet, exercise and preventive health, and champion surfer Layne Beachley spoke about her battle with chronic fatigue syndrome.

The June 2010 issue discussed stroke, smoking, nutrition, and kidney disease, and profiled a young man with ankylosing spondylitis who scaled Mount Kilimanjaro with his doctor.

The Winter 2010 issue focused on men's health and introduced the M5 HEALTH ONLINE tool. It also discussed organ donation, and drinking habits, and asked the question: 'Are you at risk?'

Media and PR

Telling GPs' stories

A proactive media and communications strategy resulted in the College enjoying a positive media profile in both medical and consumer media outlets in 2009–2010.

The College received around 1600 mentions (media clips) across print, broadcast and online mediums, reflecting that the College is becoming a 'go-to' organisation for comment on general practice matters. The number of people who may have seen an article, heard something on the radio, watched something on television, or read something on a web page was over 71 million (media impressions).

The College received a significant number of media enquiries from both medical and consumer journalists, with a noticeable boost to the number of enquiries coming from daily newspapers and high profile national magazines. The Media and PR unit works hard to build and maintain good relationships with media representatives and coordinates media responses with the assistance of active members of the College who act as RACGP spokespeople across a range of political and clinical issues. We would like to thank the spokespeople who gave their time and lent their expertise to responding to College media enquiries in the past year. The College has a growing media profile, and we could not have achieved this without the support of these spokespeople.

The Media and PR unit coordinated media responses about the activities undertaken by the College in regard

to e-health, education, standards, advocacy, quality care and other important issues relevant to GPs and their teams.

Significant media events for the College included the Federal Government's health reform and e-health announcements, and GP'09 in Perth.

Fridayfacts

Fridayfacts, the College's national weekly newsletter, is written and coordinated by the Media and PR unit and is distributed to over 20 000 readers each week.

The newsletter remains a key way to efficiently communicate with members and stakeholders, covering College news, developments in health policy and clinical topics, as well as covering other news and events of interest to the general practice community.

The unit has worked closely with the president and office of the CEO over the past year in order to disseminate important College news quickly and accurately. The ongoing aim of the unit is to work closely with the general practice community to promote their work and advocate on their behalf in the media to ensure a strong and positive profile for both the College and the wider general practice profession.

Marketing

The M5 Project

The M5 Project was developed with seed funding provided by the Government Department of Health and Ageing and was launched in Sydney on 5 March 2009, with the aim to improving the health of Australian men by promoting preventive health. The first phase of the grant saw a national awareness campaign, the launch of the M5 Project website and an events schedule that aimed to encourage, prompt and engage men in their preventive healthcare.

National Male Health Policy

In May 2010 the Federal Government launched Australia's first National Male Health Policy. The new policy provides a framework for improving the health of all males and achieving equal health outcomes for population groups of males at risk of poor health. The National Male Health Policy is consistent with the RACGP Men's Health Policy and the RACGP Curriculum for Australian General Practice, the basis for training Australian GPs.

In line with the National Male Health Policy, Phase 2 of the M5 Project has shifted focus to the workplace as a place to encourage men to take an active role in maintaining their health, via the delivery of workplace health risk assessments and wellness programs.

In May 2010 the RACGP established the M5 Advisory Board to oversee the M5 Project. The Board has a duty to ensure that the project is accountable for its performance to members, funders, stakeholders and the wider community. The inaugural meeting was held in June in Sydney.

M5 HEALTH ONLINE

In May 2010, the College launched M5 HEALTH ONLINE. This online tool not only educates men about their health, but also gives them the opportunity to alter their behaviour and improve their health status. The program provides clear and concise information on diseases and conditions, as well as wellness and lifestyle issues. Men of all ages can access the information they need to better manage their health, prevent future illness, and live healthier, happier lives.

Healthy Profession. Healthy Australia.

To maintain our strength and relevance in the 21st century, the RACGP undertook an evaluation of its brand in 2009 to ensure it was aligned with its goals and objectives and resonated with our audience. This process comprised a series of workshops and surveys to assess the current College brand and provide a strategic platform for moving forward: considering who we are as an organisation and what our members can expect over the next 5 years.

Referring to the RACGP as a 'brand' refers to the way the RACGP looks, reacts and behaves – the way members and relevant stakeholders experience College services and interact with the College. It covers visual identity, communications, and tangible and behavioural aspects. The brand is aligned with the College's core values, reflecting what it believes and what it considers important.

Australian general practice and the College have come far over the past 50 years but the College's mission remains the same: improving the health and wellbeing of individuals and communities by supporting GPs, registrars and medical students.

Both the M5 Project and *While you're waiting...* magazine, both being preventive health initiatives, are examples of how the College has evolved over the past few years to gain a more public profile – directly engaging with patients to provide them with clear and concise information on diseases and conditions, as well as wellness and lifestyle issues.

At the core of everything the College does is a single and powerful idea:

Healthy Profession.
Healthy Australia.

'Healthy Profession' focuses on the profession – the skills and knowledge of GPs and the processes, operations and management. 'Healthy Australia' focuses on outcomes – the critical role that GPs play in the health of the general public, and the influence the RACGP has in shaping public policy, public action and public perception.

From this branding review the College has started to create new marketing and communication materials. An example is this annual report.

As a national organisation, it is critical that the College shares its vision and live the brand – so that members and the wider community have a consistent and positive experience when dealing with the College and so that anyone who comes into contact with the College is aware of what it represents and what it stands for.



Information Technology

Information Technology

Information technology

Information technology underpins most core business processes. The objective of the Information Technology Department is to help staff obtain their goals by providing value for money, customer orientated reliable and dependable information technology facilities and services.

To this end, the department completed the following key tasks as part of its support to the College:

- Implemented a replacement software platform for the 'retired' DOCENT platform currently used by *gplearning*. This enhanced the learning offerings, ensuring the GP is the centre of the learning and always in control of their learning
- Implemented an online assessment registration processes for the College Fellowship program
- Supported the implementation of the College e-health initiative
- Purchased and deployed new servers to replace old equipment as part of the computer hardware maintenance program
- Replaced obsolete portable and desktop computers
- Commenced virtualising College servers to improve value for money and increase availability
- Continued to enhance College websites such as:
 - www.racgp.org.au
 - www.mygeneralpractice.com.au
 - www.m5project.com.au
- Facilitated new online services for the 2008–2010 QA&CPD triennium
- Continued to enhance the College CRM solution to assist in business efficiency and customer service
- Enhanced the History of the College online facilities. (In addition to the museum, we have a great collection of academic and membership resources on the development of general practice)
- Continued to assist membership and other teams to reach their goals
- Supported the online application helpdesk focusing on *gplearning* and the College website
- Developed a new online learning facility, known as 'ClinEd'
- Provided first level support for the College deployment of the PrimaryCare SideBar tool
- Relocated the three faculties located at National Office to new accommodation
- Established services for the Faculty of Specific Interests.

Important tasks for 2010–2011 include:

- implementing an enhanced and comprehensive Information management strategy
- implementing solutions to assist with remote collaboration
- ongoing support of College teams to meet and exceed expectations.

Information management

Information management is a critical aspect of the College's day-to-day function. The College strives to deliver internal solutions that:

- empower staff to utilise efficient and effective business processes
- prompt a knowledge sharing culture
- value the importance of timely, quality information
- facilitate team based collaboration.

2010–2011 will see the College embark on a comprehensive information management solution.



Awards and honours

College awards

The Rose-Hunt Award

Named in honour of two of the founding members of The Royal College of General Practitioners in the United Kingdom, Dr Fraser Rose and Lord Hunt of Fawley (Dr John Hunt), the Rose-Hunt Award is the College's most prestigious award. The award is made in recognition of outstanding service in the promotion of the aims and objectives of the RACGP.

In 2009, the award was presented to Associate Professor Diana O'Halloran.

Monty Kent-Hughes Memorial Medal

Dr Montague Kent-Hughes was a founding Fellow of the RACGP, a distinguished educator and a past president and past chair of Council.

'Monty' died in 1976. To commemorate his life and service to the College and to medical education, a medal is awarded to the candidate who achieves the highest marks in the College examination.

Dr Susan Yeung 2008.2

Dr Karyn Fuller 2009.1

GP of the Year Awards

The GP of the Year Awards provide an opportunity for patients and doctors to celebrate our profession and raise community awareness of the dedication, professional skills and caring approach of GPs and their team members.

General Practitioner of the Year

Dr Ayman Shenouda

National General Practice of the Year

Walgett Doctors Surgery

General Practice Supervisor of the Year

Dr Nadine Perlen

General Practice Registrar of the Year

Dr Abhilash Varshney

General Practice of the Year New South Wales

Walgett Doctors Surgery

General Practice of the Year Victoria

Marysville Medical Clinic

General Practice of the Year Queensland

Inala Primary Care Clinic

General Practice of the Year Western Australia

Moora Health Centre.

Honour board

Life Fellowship

Life Fellowship is the RACGP's highest honour and is reserved for outstanding and meritorious service to the College. The honour is limited to 25 Fellows at any one time.

Dr Mukesh Haikerwal

Professor Mark Harris.

Honorary Fellowship

Honorary Fellowship may be awarded to College Fellows, College members, and members of other colleges or academies. In very special circumstances, nonmedical persons may be considered for eligibility. The award is made for service to the College and/or general practice, service to medicine in the fields of education, research or administration and general service to the community.

Dr Beres Wenck.

Honorary Membership

This category is limited to persons who do not hold a registrable medical qualification and who have given long and meritorious service to the College or meritorious service to general practice.

Ruth Owens

Helen Connolly

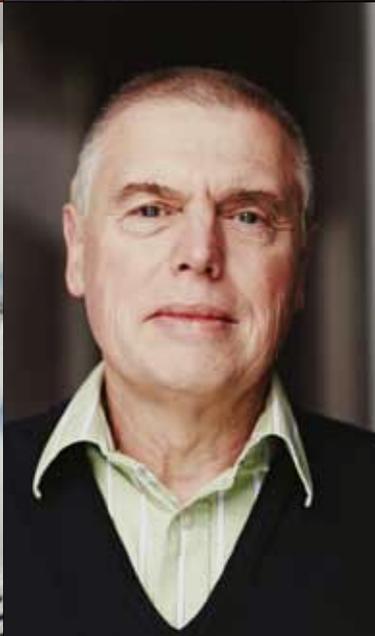
Ann Gladman

Alexius Mackay.

William Arnold Conolly Orator

Dr William Arnold Conolly was the founding father and first president of the RACGP. The oration commenced in 1970, named in Dr Conolly's honour, as acknowledgement of the College's debt of gratitude to him for his tireless efforts in the early days of the College's formation.

The orator at the 2009 academic session held at the RACGP annual conference was Dr John Radunovich.





The Royal Australian
College of General
Practitioners