



The Royal Australian  
College of General  
Practitioners

Healthy Profession.  
Healthy Australia.



Annual **report** 2010–2011

The Royal Australian College of General Practitioners  
Annual report 2010–2011

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# Foreword – Message from the Chair

Professor Nigel Stocks



Welcome to The Royal Australian College of General Practitioners 2010–2011 Annual Report.

'Healthy Profession. Healthy Australia' is our purpose and our passion.

We believe that appropriately resourced and sustainable general practice must be at the heart of an effective and efficient Australian healthcare system. It is also the key to equitable access for all Australians to high quality healthcare.

In the past year, the College has brought our vision to life through forward thinking and innovative developments to help general practitioners care for their communities. These developments have included providing our members with new products and services, lobbying the government on behalf of our members on health reform issues, and developing new standards. If you would like to read more about any of the College's activities, services or resources I encourage you to visit our website at [www.racgp.org.au](http://www.racgp.org.au).

I am pleased that during the challenges of the current health sector reform we have focused on collaboration and strived for a unified general practice voice by continuing to discuss issues with members of United General Practice Australia, the government and other key stakeholders.

Further key areas of focus in the past year have been e-health, Aboriginal and Torres Strait Islander health, and recognising those GPs with an additional interest and expertise in a specific area of practice.

During 2010–2011, we welcomed a number of new members to Council, including President, Professor Claire Jackson, Adjunct Associate Professor Frank R Jones, Dr Eleanor Chew, Dr Jennie Kendrick and Dr Georga Cooke.

I would like to sincerely thank my fellow Councillors, including our President, and acknowledge their tireless contribution to the College's vision and direction over the past year. Together with the tremendous input and support we receive from College members right across the country, I believe we really are making a difference to Australian general practice.

In closing, I would also like to thank our CEO, Zena Burgess and Deputy CEO, Robert Pratt who together with the senior leadership team continue to deliver to the highest standards with their knowledge and skills.

We can be confident that the College will continue its success in the coming years and strive to improve the health of all Australians by ensuring the delivery of high quality general practice.



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General practice provides person centred, continuing, comprehensive and coordinated whole-person healthcare to individuals and families in their communities.

There are over 125 million general practice consultations taking place in Australia annually and 83% of the Australian population consult a GP at least once a year.\*

## About The Royal Australian College of General Practitioners

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

We represent over 20 000 members working in or towards a career in general practice and are proud that in the 2010–2011 financial year over 18 000 GPs in Australia chose to be a member of the College.

The College's mission is to improve the health and wellbeing of all people in Australia by supporting GPs, general practice registrars and medical students through its principal activities of education, training and research and by assessing doctors'

skills and knowledge, supplying ongoing professional development activities, developing resources and guidelines, helping GPs with issues that affect their practice, and developing standards that general practices use to ensure high quality healthcare.

The College has a proud history of achievements, including the development of the *Standards for general practices* and introducing continuing professional development.

The College carries its activities within the following areas of strategic focus:

- Collegiality
- Education and training for general practice

- Innovation and policy for general practice.

The RACGP Vision Statement and Strategic Business Model (see next page) are used by College Council, College committees and College staff to ensure the clarity and currency of our strategic priorities in 2011 and beyond.

\* Australian Institute of Health and Welfare. General practice activity in Australia 2009–10.



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 20,000 members working in or towards a career in general practice and are proud that over 18,000 general practitioners in Australia have chosen to be a member of the College.

There are over 125 million general practice consultations taking place in Australia 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 healthcare 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.

STANDARDS

QUALITY

EDUCATION

ADVOCACY

PROFESSIONAL LEADERSHIP

COLLEGIALITY



The Royal Australian College of General Practitioners

*RACGP Strategic Business Model*

*Strategic context*

The College addresses its areas of strategic focus within the context of general practice – person centred, continuing, comprehensive and coordinated whole-person healthcare to individuals and families in their communities.

The College, in all areas of its strategic focus, addresses the unique nature and critical importance of:

- general practice at national, state and territory levels
- rural general practice
- Aboriginal and Torres Strait Islander health
- specific interests in general practice.

*Areas of strategic focus*

**Education and training for general practice**

Fellowships – FRACGP and FARGP, standards, quality, curriculum, assessment, continuing professional development.

**Innovation and policy for general practice**

Quality care, e-health, practice standards and accreditation, knowledge and evidence, RACGP Foundation, policy and practice support, advocacy.

**Collegiality**

*Enablers*

**Service, people and operations**

Member and stakeholder service, expert and skilled College membership and workforce, culture and values, partnerships and networks, corporate operations, strategy and governance.

**Marketing and business development**

Events, branding, promotion, publishing, fundraising, sponsorship, commercial relationships.

STANDARDS

QUALITY

EDUCATION

ADVOCACY

PROFESSIONAL LEADERSHIP

COLLEGIALITY

# Members of the 53rd RACGP Council

The College is governed by the RACGP Council comprising President, Censor-in-Chief, the Chair of each state/territory faculty, Chair of the National Rural Faculty, Chair of the National Faculty of Aboriginal and Torres Strait Islander Health, General Practice Registrar Representative, and any additional members co-opted by Council to the extent allowable under the RACGP Constitution.



**Professor Nigel Stocks**  
Chair of Council  
Chair, South Australia and Northern Territory Faculty



**Professor Claire Jackson**  
President



**Adjunct Associate Professor Frank R Jones**  
Chair, Western Australia Faculty



**Dr Jennie Kendrick**  
Censor-in-Chief



**Dr Kathryn Kirkpatrick**  
Chair, National Rural Faculty



**Dr Liz Marles**  
Vice President  
Chair, New South Wales and  
Australian Capital Territory Faculty



**Dr Eleanor Chew**  
Chair, Queensland Faculty



**Dr Georga Cooke**  
General Practice Registrar  
Representative



**Neil Greenaway**  
Co-opted member  
Chair, Finance, Audit and Risk  
Management Committee



**Dr David Knowles**  
Chair, Tasmania Faculty



**Dr Chris Mitchell**  
Co-opted member



**Associate Professor  
Brad Murphy**  
Chair, National Faculty of  
Aboriginal and Torres Strait  
Islander Health



**Associate Professor  
Morton Rawlin**  
Chair, Victoria Faculty  
Chair, National Faculty of Specific  
Interests

# Message from the President

Professor Claire Jackson



## Higher and more complex workload for GPs

The past 12 months have been very busy and challenging ones for the College. Our sector continues to grow in scope and complexity and so does the College's work. The latest Australian Institute of Health and Welfare report revealed that 83% of the Australian population now consults a GP at least once a year, with over 125 million general practice consultations taking place across Australia annually. This figure continues to increase each year and demonstrates the growing workload faced by Australia's GPs. Government health reforms have also had a major impact and will continue to do so in the year ahead for general practice.

## Recognising and rewarding general practice

Our College continues to be a tireless advocate for high quality, accessible general practice care for communities across the length and breadth of Australia. Our role is also to ensure our GPs' work is recognised and rewarded and to advocate to government and other key stakeholders around general practice issues. Since becoming President of the RACGP in October 2010, I have met regularly with the Minister for Health and Ageing and government departments to ensure new policies and initiatives are relevant and workable for both patients and general practice. In addition, the College's advocacy has included very effective partnerships with the other key general practice organisations through our work with United General Practice Australia. Through our unity we are able to work together to achieve better recognition and reward for GPs and better services for our patients.

## General practice of the future

At this critical juncture for general practice we also need to look beyond

2011 in order to effectively shape the general practice of the future. To address this, the College hosted the 'General Practice 2020 Roundtable' in December 2010 to explore the future general practice environment. The identified priority areas for general practice included: ongoing skill building, effective teamwork in general practice, systems infrastructure, recognition and reward for quality general practice, e-health, rural health support, and re-assessment of the funding sources and adequacy to support this growth. It was clear from these discussions that general practice, as the essential health system lynchpin, will need to evolve in accordance with community needs over the coming years.

The RACGP held its 2011 Strategic Planning Day in February at College House in South Melbourne. The day provided a powerful opportunity to discuss both fundamental and emerging issues facing general practice and the College in 2011 and to identify crucial streams of work for the College over the next 12 months. As a result, we established the following four Council working parties:

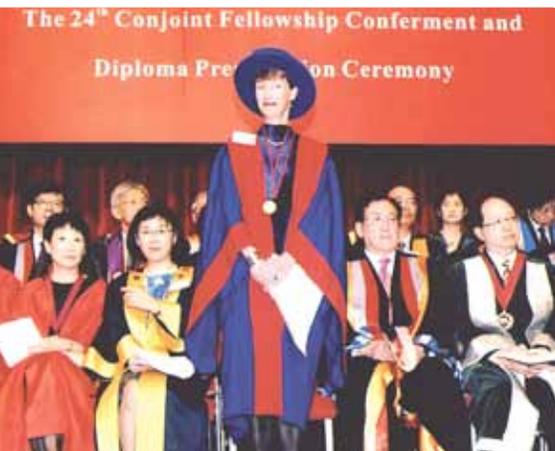
- Presidential Taskforce on Health Reform



Professor Claire Jackson, Professor Nigel Stocks and nurse practitioners at collaborative care agreement launch, June 2011, Melbourne



Professor Claire Jackson at the Fiji College of General Practitioners Conference, June 2011



Professor Claire Jackson at the Hong Kong Fellowship Conferment Ceremony, June 2011



Professor Claire Jackson at the primary care reform 'think tank' in Washington, April 2011



Professor Claire Jackson and Dr Chris Mitchell, Academic Session, October 2010, Cairns

- Assessment Pathways Review
- Curriculum Renewal
- National Faculty of Specific Interests – Directions.

### Primary care on the front burner globally

In 2011, I also had the enormous privilege of being one of a small number of Australian delegates invited to an international 'think tank' on primary care reform held in

Washington, DC, and hosted by the Agency for Healthcare Research and Quality. What was overwhelmingly clear was that primary care is on the front burner globally in supporting high quality, efficient, sustainable future healthcare delivery. What was also apparent was that Australia places top in almost all primary care related measures – prevention, avoidable deaths, smoking abstinence, efficiency, coverage, patient satisfaction, use of electronic medical records and longevity.

I was immensely proud of the contribution of our GPs and general practices who have worked tirelessly in prevention, early detection, clinical management and organisational change over the past 30 years to achieve such an outcome.

I would like to thank all our members for providing feedback on a number of very important issues to ensure that our College materials are relevant, useful and workable for general practice teams. I encourage members to continue being actively involved in their College.

The important work of our College – particularly the essential education

and training of the next generation of GPs – could not continue without the strong support of our members, and I thank you all for your generosity of spirit, energy and unflagging pride in our great discipline.



Professor Claire Jackson officially opening WA College House, December 2010, Perth

# Message from the Chief Executive Officer

Zena Burgess



The RACGP experienced another fulfilling year in 2010–2011, with continuing rapid changes occurring within the healthcare industry, the discipline of general practice, and within the College.

## Highest membership in history

The 2010–2011 year marked a significant milestone for the RACGP, with a record level of 18 206 Australian-registered GP members joining the RACGP or renewing their membership. Our Australian-registered GP membership grew by 6% on the previous year, and has doubled since 2003–2004. Our total membership base reached 20 999 and this includes our ‘budding’ GP members (medical students,

residents/interns and IMG Affiliates), as well as our overseas members. We also welcomed over 2100 members across all membership categories (65% of whom were Australian-registered GPs) who joined the RACGP for the first time, or who had previously left the College and then decided to rejoin. Our 2010–2011 membership included 12 176 RACGP Fellows, a 7% increase on the previous year. Please refer to page 12 for an overview of our membership numbers in each state.

I am also pleased to report that our National Rural Faculty achieved its highest GP membership in its 19 year history with almost 6800 Australian-registered GP members. These record membership numbers strengthen the work that we do and enable us to deliver increased and improved services to our members. I am proud that so many GPs choose to be members of the College and I thank all College members for their ongoing support.

## Focus on innovation and high standards

We have placed a strong emphasis on providing our members with innovative benefits and enhancing

the services they receive. As a forward thinking College, we continued to lead the way in advocating and facilitating continuous improvement through clinical, educational and e-health advances.

During the year we established a new subsidiary company, called RACGP Oxygen Pty Ltd, which reflects the growing importance of e-health in general practice. The new company, led by Oxygen CEO Mark Donato, aims to support GPs in the uptake of e-health clinical tools, products and services as part of membership of the College. The College is the only shareholder of RACGP Oxygen Pty Ltd. The company has its own Board, which is chaired by Dr Chris Mitchell.

Standards and quality have always been important to the College, and this year the College launched the 4th edition of the *Standards for general practices*. The Standards Committee is to be congratulated on the launch of this high quality document.

## Valuable contribution of National Standing Committees

I would also like to express my appreciation for the ongoing contribution of our National Standing Committee (NSC) members who contribute to the vibrancy of the College and give their expertise generously. In particular, I'd like to thank all past and present NSC Chairs for their extraordinary leadership and stewardship.

In 2010–2011, we welcomed the following new NSC Chairs: Dr Evan Ackerman (NSC – Quality Care), Dr John Bennett (NSC – e-health), Dr Mike Civil (NSC – Standards for General Practices) and Dr Peter Maguire (NSC – Education). Dr Beres Wenck (NSC – GP Advocacy and Support) and Dr Marie Pirota (NSC – Research) continued in their roles.



Councillors, Academic Session, Awards and Fellowship Ceremony, October 2010, Cairns



Launch of the 4th edition of the *Standards for general practices*, October 2010, Cairns



2010 Rose-Hunt recipient lunch, October 2010, Cairns

Last year we farewelled the following NSC Chairs: Associate Professor Diana O'Halloran (NSC – Education), Dr Lynton Hudson (NSC – Standards for General Practices) and Dr Ron Tomlins (NSC – Quality Care).

### Key role of general practice

The beginning of 2011 was devastating for many, with the floods and bushfires impacting on our members and their families in a number of states. It was wonderful to see the efforts of College members in their response to this situation, and not just in relation to their work. The College and its members worked closely with GPs in flood affected areas to offer assistance, provide advice and identify support needs. These natural disasters also reminded us of the vital role general practice plays in communities.

On a positive note, it is pleasing to see our great working relationship with regional training providers (RTPs) grow from strength-to-strength. Our RTPs train the next generation of GPs and it is essential that the College has strong ties with all RTPs.

I would like to acknowledge Dr Janice Bell, who is a member of the NSC

– Education and CEO of Western Australian GP Education and Training, for her commitment to the College and for leading our successful work with RTPs across Australia.

The past year also saw the College increasing its ever-growing media profile, with our President and College spokespeople featured in a range of medical and consumer print, online and broadcast media. The high number of media enquiries also shows that the College is the 'go to' organisation for comment on general practice matters.

I would like to sincerely thank the 53rd RACGP Council members for their guidance, leadership and ongoing hard work and dedication to the College and its aims: Professor Nigel Stocks, Professor Claire Jackson, Dr Liz Marles, Dr Eleanor Chew, Dr Georga Cooke, Neil Greenaway, Adjunct Associate Professor Frank R Jones, Dr Jennie Kendrick, Dr Kathryn Kirkpatrick, Dr David Knowles, Dr Chris Mitchell, Associate Professor Brad Murphy and Associate Professor Morton Rawlin.

I also gratefully acknowledge the contributions of a number of Councillors who we have farewelled

in October 2010: Professor Peter Mudge, Associate Professor Jan Radford, Dr Peter Maguire, Associate Professor Jane Smith, and Dr Naomi Harris all contributed enormously during their time on Council.

Thank you also to our many members who volunteer their time and commit their knowledge and expertise to supporting the College's many committees, our faculties, our Fellowship examinations, our mentoring programs and much more. A special thank you to our Corlis Travelling Fellows who continue to provide advice, regional leadership and support and act as local mentors.

And lastly, a big thank you to our senior leadership team – Robert Pratt, Josephine Raw, David Worland and Rowan Crosbie-Goold – and all of our dedicated and inspiring staff members who are working hard to provide College members with high quality service. A sincere thank you in particular to our faculty managers for their amazing efforts at a state and territory level.

I look forward to another year, which will no doubt bring a number of exciting changes for both the College and the profession.

# Message from the Finance Audit and Risk Management Committee Chair

Neil Greenaway



The current members of the Finance, Audit and Risk Management Committee are: Neil Greenaway (Chair and co-opted Councillor); Professor Claire Jackson (President); Dr Kathryn Kirkpatrick (National Rural Faculty Chair); Professor Nigel Stocks (Chair of Council and SA&NT 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 performance

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

During the year, RACGP Oxygen Pty Ltd was incorporated as a 100% owned subsidiary of the College. This year, for the first time, the financial statements represent the consolidated results of the College and RACGP Oxygen Pty Ltd.

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 Western Australia Faculty premises and a valuation write-up relating to the

New South Wales Faculty premises. These adjustments were charged and credited respectively to the operating result. Other property valuation adjustments were positive, except for the Queensland Faculty premises, and the net decrease across these properties was debited to the revaluation reserve in accordance with the standards. The Western Australia valuation write-down related to the fit-out costs following the recent purchase of this property that have not yet been reflected in the property's valuation and the Queensland valuation write-down reflects an adjustment to a prior year valuation.

## 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. Six reviews were completed in 2009 and 2010 and a further three reviews will be completed in 2011. 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 are embedded

throughout the organisation. During the year, 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 and Council. 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 Chris Mitchell (Immediate Past President) who stepped down as a committee member in October 2010. I would also like to acknowledge and thank the College's management team, in particular CEO, Zena Burgess, Deputy CEO, Robert Pratt and Finance Manager, Sherrynga Fung and her team.

# Collegiality

The RACGP's membership is at the heart of all College activities, and members and staff across all states are proud to promote a welcoming, collegiate environment and to celebrate excellence in general practice.

Each RACGP faculty is unique, with its own history, characters and home within the College, and yet together all faculties form the one College uniformly focused on improving the health and wellbeing of all people in Australia. Each faculty is represented within the College by a Faculty Board consisting of elected members and, along with faculty staff, work hard to deliver exceptional value to all members.

RACGP members automatically attain membership of their state or territory faculty. RACGP members can also choose to join the RACGP National Rural Faculty, National Faculty of Specific Interests and National Faculty of Aboriginal and Torres Strait Islander Health.

# Membership overview

Figure 1 provides an overview of the RACGP membership numbers in each state and territory faculty for the 2010–2011 financial year.

Figure 2 shows the increase of the Australian-registered GP membership since 2002–2003.

Throughout 2010 and 2011, the RACGP continued to build on the membership services available to all our members. In line with the College’s commitment to encourage GPs to adopt e-health initiatives, the College introduced two electronic clinical decision support tools as part of the 2010 ‘early bird’ membership offer. Australian-registered medical practitioners who joined the RACGP or renewed their membership prior to 30 June 2010 chose from a complimentary copy of the *Australian Medicines Handbook* on a USB device or one of a limited number of **PrimaryCare Sidebar®** licences.

The RACGP identified the **PrimaryCare Sidebar®** to be an important tool that could not only assist GPs to meet the e-health Practice Improvement Incentives Program, but more importantly, deliver clinical decision support at

point-of-care to drive better patient outcomes. Originally the number of **PrimaryCare Sidebar®** licences available through the early bird offer was capped at 1500 licences, but this was increased to 2500 in June 2010 due to popular demand.

As part of the 2011 early bird membership offer, the RACGP provided another opportunity for members to receive complimentary access to the **PrimaryCare Sidebar®**. Following consultation with members to identify areas that the College could develop solutions to enhance patient care (particularly chronic disease management) and ease GPs’ workflow, the 2011 early bird membership offer included a suite of new **PrimaryCare Sidebar®** tools:

- MBS Prompts (free 12 month subscription) – notifies GPs of MBS Chronic Disease Management items that may be claimed as a result of completed care activities; and
- cdmNet (free 90 day access to new cdmNet subscribers) – automates care planning and review, simplifies collaboration with the care team, and eliminates the

overhead and paperwork of MBS Chronic Disease Management items.

The College also introduced these new features of the **PrimaryCare Sidebar®** during the 2011 early bird membership offer:

- Insurance Medical Requests – enables fast, secure and simple electronic submissions for providing patient medical information for life insurance requests
- DynaMed – single sign-in to this evidence based clinical reference tool
- eTG complete – enables instantaneous searching and single sign-in access to electronic *Therapeutic Guidelines*. eTG complete was offered complimentary to 2011 early bird Registrar and new Fellow members, and all other members have the option to take up a subscription to access this tool through the **PrimaryCare Sidebar®**.

Feedback from members was used extensively to enhance the membership services and benefits

	NSW& ACT	QLD	SA&NT	TAS	VIC	WA	Overseas	Total
Fellow	3476	2589	1111	328	2881	1128	663	12 176
Member	399	184	105	34	307	88	14	1131
Registrar Associate	582	1431	215	58	365	137		1788
Associate	1372	903	356	108	989	376	447	4551
Affiliate	466	261	131	167	217	111		1353
<b>Total</b>	<b>6295</b>	<b>4368</b>	<b>1918</b>	<b>695</b>	<b>4759</b>	<b>1840</b>	<b>1124</b>	<b>20 999</b>

Figure 1. RACGP membership 2010–2011

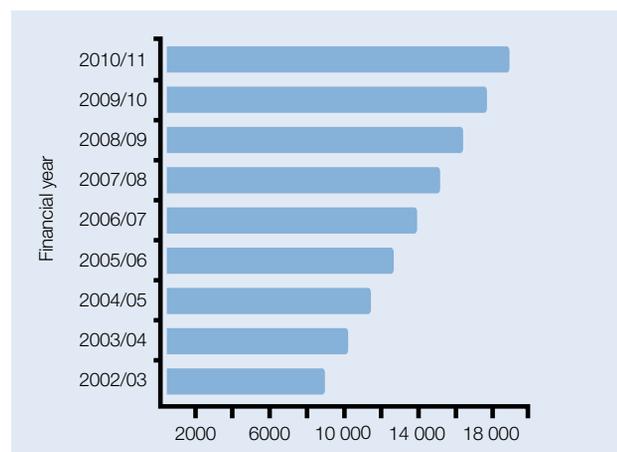


Figure 2. Growth of RACGP Australian-registered GP members



Gathering feedback from GPs has been an important aspect for enhancing RACGP membership services



The 'General practice: connecting the dots' electronic guide



The new MBS Prompts feature on the **PrimaryCare** Sidebar®

offered by the College. An important forum for receiving feedback is the Membership Advisory Committee, which includes members from a cross-section of membership categories and states and territories of Australia. In 2010–2011, the committee continued to meet monthly by teleconference and delivered valuable insights into shaping the College's membership marketing strategies and offerings. The Membership Department also surveyed segments of our broader membership base to assist with enhancing our 2011–2012 membership offerings.

For many years, the RACGP has offered membership to 'future GPs' in order to support their journey towards general practice. The 2010–2011 membership packages for medical students and residents/interns continued to provide a strong suite of clinical resources and services. Medical students who took up the student upgrade membership package were pleased to receive a complimentary copy of *John Murtagh's general practice companion handbook*, or if they were renewing their upgrade membership, they received the

*Australian Medicines Handbook* on USB.

As part of our strategy to attract more students and junior doctors to general practice and to promote the RACGP journey towards general practice, in October 2010 the College launched a new guide – 'General practice: connecting the dots for students and junior doctors'. This electronic guide was developed following feedback from our medical student and junior doctor members who expressed the need for a clear, concise guide that outlined the journey towards, and career in, general practice. The guide was extremely popular among our students, junior doctors and those involved in teaching and educating future GPs.

Finally, the College again offered additional support to our Registrar members as they undertook their general practice training. Among a range of membership offerings in 2010–2011, our Registrar 'early bird' members enjoyed a complimentary copy of three of Professor John Murtagh's most popular general practice publications, provided on a compact USB drive format.

A record number of 2226 general practice registrars chose to become members or continue their membership of the RACGP in 2010–2011; a 7% increase on the previous year. It is pleasing to note that 438 of those registrars had progressed to Fellowship by 30 June 2011.

## New South Wales and Australian Capital Territory

Dr Liz Marles, Chair



During the past year, the NSW&ACT Faculty welcomed new Board members Dr Vince Cistulli, Dr Jennifer Thomson and Dr Renato Barros. The faculty saw the opening of the Charles Bridges-Webb Education Centre by Professor Webb's widow, Anne, and her family, and the unveiling of the faculty's new Acknowledgment of Country plaque.

Australian General Practice Training Chair, Professor Simon Willcock, led a vibrant discussion on the future of general practice education after the annual faculty meeting in 2010; a tradition he perpetuated leading off the faculty's inaugural Horizons conference in April 2011.

Professor Claire Jackson led the College's involvement in our first major ACT educational venture in

the November 2010 GP Connect conference, which we co-presented with the ACT Division of General Practice, GP Southern Network and the Australian National University Medical School. Our thanks go to ACT Board member, Dr Katrina Anderson and outgoing Board member, Dr Karen Flegg for their support and the College's ACT presence. The faculty thanked outgoing ACT Assessment Panel Chair, Dr Barbara Tyler, for over 10 years of service; Dr Karen Flegg will assume the mantle from July 2011. The ACT division continues to provide the office in Canberra, helping us to strengthen the College's presence in ACT divisional activities.

The faculty also joined the ACT division in the establishment of a broad Primary Health Care Coalition in preparation for the division's bid for a Primary Health Care Organisation (PHCO; or 'Medicare Local'). The College provided letters of support for five PHCO tenders in NSW and the ACT and we are pleased that three of these – Western Sydney, ACT, and New England – were among 19 successful tenders across the nation. The primary healthcare reform agenda has occupied much of the faculty's advocacy efforts this

year. Through the peak GP organisation body in NSW, GP Unity, the faculty supported the development of aligned PHCO and Local Hospital Network (LHN) boundaries to ensure health reform could achieve one of its key benefits: cross-sectorial regional health planning.

The faculty continued to profile successful HealthOne models in general practices at Elderslie and Mt Druitt/Blacktown. The HealthOne model that links community health with general practice in order to streamline continuity of care between primary health and acute care sectors remains a sound example on which to build the PHCO-LHN relationship, and the practice of PHCOs. In conjunction with General Practice New South Wales, the peak body for divisions in NSW, the faculty also forged a relationship with the NSW Health's Service Performance Improvement branch. This saw the initiation in April 2011 of a statewide GP-facility clinical handover project, based on an opportune synergy in clinical handover standards development between NSW Health and the RACGP *Standards for general practices* (4th edition).

On membership development, the faculty has continued to nurture its New Fellows Working Group. Dr Ayman Shenouda shared learnings from the National Rural Faculty's IMG Mentoring Project with five new Fellows interested in assuming a mentoring role. The faculty thanks Dr Corne Kreik for assuming a leadership role in this group's efforts. Over 30 new Fellows expressed an interest in being part of a broader new Fellows network. The faculty continued to meet with RTP directors of training and support medical educators with its GP Medical Education Master Class. The faculty also continues to take a national lead in the support for potential future members, such as doctors aspiring to Australian Medical Council certification.



Chris Mitchell, Kathryn Kirkpatrick, Liz Marles and Allen Madden at College House Naming Ceremony

## Queensland

Dr Eleanor Chew, Chair



Reflecting on my first year as Chair of the Queensland Faculty, two key themes have defined and driven the work the faculty has undertaken during the year, namely a commitment to meeting the needs of our members, and the development and delivery of innovative and relevant education. During 2010–2011 we sharpened our focus around service delivery, advocacy, QI&CPD and assessment. Our most significant achievements have been in the delivery of high quality educational events and the increased support of our international medical graduate (IMG) colleagues.

In May we celebrated our profession at the 54th annual Gold Coast Clinical Update Conference, 'Faces of General Practice'. I would like to sincerely thank the faculty Education Committee, led by Dr Rakesh Padarath and Dr Shahab Rafiei, for developing a relevant, diverse and engaging program and giving their time and expertise to this endeavour.

Our North Queensland conference was held in Mackay in August. Organised in conjunction with the North Queensland Sub-Faculty, the theme 'A little further north' showcased the best in clinical education and professional development in regional Queensland. I would like to acknowledge the significant contribution of the North Queensland Sub-Faculty Board, led by Associate Professor Harry Jacobs,

in organising the conference and furthering the work of the College in North Queensland.

The Fellowship examination has continued to flourish under the guidance of our Assessment Panel Chair, Dr Shabana Jaipurwala, enabling the Queensland Faculty to considerably increase examination placement capacity. Our North Queensland Assessment Panel Chair, Professor Tarun Sen Gupta, has expertly steered the examination in Townsville for many years. Tarun stepped down from his role in May and I sincerely thank him for his enormous contribution to the life of the College in North Queensland and beyond.

A key element of our work has been advocacy on behalf of College members on a range of matters impacting general practice in Queensland. The faculty has represented members and provided input on a number of important state issues, particularly around the impact of the National Health Reforms at a local level. We have also worked closely with our fellow medical organisations in achieving a greater voice on behalf of GPs in Queensland. Strong positive relationships have been built with our key stakeholders including Queensland Health and the Queensland Minister for Health.

Another highlight of our faculty calendar is the IMG Forum, designed to support IMGs during settlement and orientation to Australian general practice. Held last November, this annual event provided delegates with direct access to service providers including the Department of Immigration and Citizenship, the Australian Health Practitioner Regulation Agency, Medicare, and medicolegal support. The forum also



Delegates and speakers at the 2010 IMG Forum

focuses on the journey to Fellowship, with the Queensland Censor, Dr Debra Nichols on hand to offer expert advice on the College examination.

The faculty continues to recognise the vital contribution IMGs make to the general practice workforce in this state. From late 2010, the College became aware of registration issues some of these doctors were experiencing because of difficulties in completing an Australian general practice qualification. The faculty acted to provide structured educational support and mentoring through the development of the IMG Educational Support Program in early 2011. I am very proud of the work of the faculty IMG Education Committee in developing and delivering this program, and am impressed by the enthusiasm and motivation of the participants, mentors and facilitators. My thanks go to Dr Nick Hummel and all of our participating College Fellows for their work in ensuring the ongoing success and expansion of this program.

2011 has been a challenging and productive year for the Queensland Faculty. With the continued support of our members, I look forward in the coming year to addressing more of the important issues facing general practice in Queensland.

## South Australia and Northern Territory

Professor Nigel Stocks, Chair



2010–2011 saw many changes at both national and state levels, including national registration, the creation of plans for Medicare Locals and workforce planning initiatives. The SA&NT Faculty has embraced this tide of change and the need to move forward, look for new opportunities and advance the profession.

The SA&NT Faculty, supported by its Board members and Corlis Fellow Dr Patricia Montanaro, has continued to build and strengthen key relationships, enabling the RACGP to advocate for general practice at a local level. Key issues in the past year have been representing the needs of rural GPs, particularly on the Rural Pathway project commissioned by Country Health SA, meeting with the Health Minister in response to the proposed budget cuts in mental health services provided by GPs, advocating for general practice with WorkCover and promoting the need for GPs to have a central role in the governance of Medicare Locals. More recently the College has identified the need to develop a process of communication between SA Ambulance and local GPs in situations where ambulance officers attend patients but do not provide transport. Thank you to Dr Oliver Frank who, with the College, is working on a mechanism to ensure better communication and improve patient safety.

A recent focus has been the increased awareness for all doctors

to look after their own health, including having their own GP. During the second half of 2010 the Faculty was involved in supporting the development of Doctors Health SA, which will now run a profession funded program that offers preventive health checks, a 24 hour telephone advice line, as well as accredited 'Doctors for Doctors' training courses. The College also understands that general practice is not just about GPs but also support staff such as practice nurses, managers and front office support. Our General Practice Education program aims to support GPs by developing the skill set of staff that work with and support them and their patients on a daily basis.

Success of new educational programs, including GP Update, procedural skills workshop and leadership skills complement our existing program. During the next year we will investigate videoconferencing solutions to offer professional development activities to Northern Territory and rural members.

The faculty has seen a rise in the number of doctors pursuing general practice as a career. In the Northern Territory we have seen a record number of candidates sitting the

OSCE examination, which ultimately is a success for the community as more GPs are available to provide health services to the highest of standards. The SA&NT Faculty has been engaging in practice visits throughout the Northern Territory and South Australia to ensure we have valuable feedback about the nature of the profession from the 'top end' of Australia.

Another achievement for the faculty was the establishment of the National Pain Education Network under the RACGP National Faculty of Specific Interests. This came about as a result of the huge demand for chronic pain management services in South Australia. The Pain Education Group has been looking at gaps in general practice services and how this inhibits being able to provide appropriate care to our patients. This analysis will guide how the College can further support our colleagues, either through guidelines, publications or the network.

The nature of general practice will continue to evolve as the needs of our communities change. Better access to evidence based information, multidisciplinary care, a stronger focus on preventive health and improved standards will ultimately ensure a win for the health of all Australians.



SA&NT new Fellows 2010

# Tasmania

Dr David Knowles, Chair



The Tasmania Faculty continues to focus on building strong relationships with a range of key stakeholders. GP Unity, initiated by the Tasmania Faculty, has been developed as a forum to discuss critical matters that influence Tasmanian general practice and to provide a united approach to find solutions or advocate change. Chaired by myself, members have tabled issues relating to the nurse practitioner, Medicare Locals, clinical networks and the medical intern process, to name a few.

The annual faculty event, 'College Connections', provides an opportunity for the faculty to engage with members, stakeholders and business partners. It offers an opportunity to present local and national initiatives planned for the coming year. Associate Professor Brad Murphy, Chair of the RACGP National Faculty of Aboriginal and Torres Strait Islander Health, officially launched the College's Welcome to Country policy in Tasmania and unveiled a plaque at the event acknowledging the traditional owners of the land.

Responding to areas of interest expressed by our members, the faculty has delivered a range of innovative workshops that provide quality education on a diverse range of topics. This year's calendar has included focused psychological skills training in conjunction with the Black Dog Institute, Women in

General Practice Retreat and the GP Lunchtime Series, which has now expanded to deliver a pilot program in Launceston. In addition, Tasmanian Corlis Fellow, Dr Ralph Barnes and the faculty were active in reinstating interpractice visits as a self directed QI&CPD Category 1 activity, now available nationally to all GPs.

Participation at one of Australia's key community events, Agfest, was a rewarding initiative for the Tasmania Faculty. Working in collaboration with the Pharmaceutical Society of Australia and the University of Tasmania and the Rural Clinical School, a range of interactive stations delivered preventive health messages and checks. The interprofessional collaboration was acknowledged as a key factor in the success of this enterprise.

One of the many strengths of the RACGP is its state faculty structure and the individuals who contribute and influence our profession. In 2011, the Tasmania Faculty will see three longstanding Board members retire from our Board, Dr Sally Hildred, Professor Mark Nelson and Dr Frank Meumann. We thank them for their contribution and wish them success with their ongoing endeavours.



Brad Murphy and David Knowles at College Connections

## Victoria

Associate Professor Morton Rawlin, Chair



The Victoria Faculty has enjoyed a highly successful 2010–2011. We pride ourselves on engaging with members, offering a quality educational program and providing members with opportunities to network with peers. The faculty also understands the importance of engaging with key stakeholders and partner organisations, having met with a number of key organisations in the past year to emphasise the importance of GP-led primary care.

Victoria successfully piloted the new online format for the RACGP Applied Knowledge Test (AKT) and Key Feature Problems (KFP) examinations in March 2011 and the feedback from participants has been very positive. On the back of this pioneering success, online AKT and KFP examinations were rolled

out nationally in July for the 2011.2 examination cycle.

In 2010–2011, the faculty developed and delivered six educational events. A highlight was the delivery of the Medicine in Addiction conference, held in collaboration with the RACGP National Faculty of Specific Interests and the Royal Australian and New Zealand College of Psychiatrists. Another successful workshop was the ‘Dermatology workshop for general practitioners’ that saw over 200 GPs participating from all over Victoria. The New Fellows Committee presented the inaugural ‘Starting a private practice’ workshop, a very effective event that garnered much interest, which is to be repeated in the coming year.

Collaboration was a key theme in 2011. The faculty worked with the University of Melbourne and the Australian Prostate Cancer Research Centre to present the Prostate Cancer and ‘General practice: controversies and conundrums’ workshop, and the Heart Foundation Victoria to co-host the ‘Taking the failure out of chronic heart failure management – optimising care in general practice’ workshop.

The faculty also began its Regional Forum series in March in Shepparton. It consulted with key GPs in the Goulburn Valley region on key areas such as keeping GPs at the centre of primary healthcare and the future of e-health. These forums are a great opportunity for the faculty to connect with regional members, gathering feedback to better understand and improve its support and representation of them. We look forward to

visiting other regional locations in the coming year.

A high point each year is the Victoria Faculty Fellowship and Awards Ceremony. In 2010, it was held in the Members’ Dining Room at the Melbourne Cricket Ground. The ceremony saw 93 newly ratified Fellows admitted to the Fellowship of the RACGP, with 18 Life Member trophies presented. Associate Professor Chris Hogan, a former faculty chair and provost, was honoured for his contribution to general practice as the recipient of the RACGP Victoria Faculty Award for Recognition for Distinguished Service to the College. The faculty was also proud to acknowledge its panel of examiners for the first time with six recipients of the Life Examiner awards, recognising their 20 years of service to the panel of examiners. Another 16 examiners received the Long Service Examiner Award, recognising 10 years of service to the panel.

The coming year is an exciting one for the faculty. We are committed to ensuring that we continue to conduct an excellent examination and furthering the educational needs of GPs. We aim to continue to consolidate the growth of our membership through supporting and engaging with members, conducting events that will further their professional development, and representing them in the growth of general practice in Victoria.



Medical Careers Expo, Melbourne Park, 2011

## Western Australia

Adjunct Associate Professor Frank R Jones, Chair



In December 2010 the RACGP WA Faculty College House was officially opened in Leederville. For general practice in Western Australia this was a seminal event, a 'coming of age'. We were delighted that Professor Claire Jackson, RACGP President, and senior national RACGP staff were able to join us, with Professor Jackson formally declaring WA College House 'open for business'. The event included a Welcome to Country ceremony and our much loved Provost and Corlis Fellow, Professor Max Kamien, gave us an erudite and amusing history of the College in WA and how we have finally come to have a place to call our own. Seventy guests were in attendance and this provided a great opportunity to showcase our new facility, which boasts a selection of meeting and training rooms, and which has close access to train and bus services and the freeway. WA College House belongs to all our members and I encourage you to drop in, use the facilities and catch up with our wonderful staff.

Education continues to be a high priority for the WA Faculty. We aim to provide relevant and high quality education to all our members. The faculty has delivered a showcase of events over the past year.

One of the highlights was the GP Update event, a new continuing professional development course for Australian GPs delivered by

the College. The first workshop took place in Perth in April, with participants finding the course relevant and practical. We hope this will be a regular event in the future.

Mental health issues challenge us daily in our practice and ongoing training is essential. To this end, the faculty provided mental health skills training as well as cognitive behaviour therapy workshops.

The WA Faculty Board is passionate about providing appropriate and focused education to our rural colleagues on their home patch. I am delighted that we have been able to deliver education in Karratha, Kununurra and Kalgoorlie this year. In addition, specific educational events targeting rural up-skilling have been 'tagged-on' to Perth based conferences. We look forward to expanding opportunities to support our rural members.

The Board is made up of 22 Fellows; an interesting mix of youth and experience. Our goal is to be a proactive board that engages, represents and advocates for general practice in WA. As Chair I act as an active conduit between our faculty and the RACGP National Council.

We are privileged to have a committed group of members who give up their time to support the College as examiners, medical educators, clinical leads and College representatives on important committees and respond to media enquiries.

The Board looks forward to another challenging and positive year. My



WA Friends of the Faculty

thanks go to present Board members for their passion, continued support and contribution to the College and to the profession at large.

On the Board's behalf a big thank you to our faculty staff. We are extraordinarily fortunate in having such a knowledgeable, enthusiastic and loyal team.

On a more reflective note, the WA Faculty was sad to learn of the unexpected death of Dr Sam Bada, an active member of our Board and an esteemed IMG educator. Our sympathy goes to his family. He will be sorely missed.

The momentum and goodwill at WA College House is palpable and the feeling will continue to enthuse both the Board and the team. I am optimistic there will continue to be tangible changes to how we work on your behalf to promote quality general practice with member services remaining a priority. I see great things to come in the year ahead and look forward to the ride!

# National Rural Faculty

Dr Kathryn Kirkpatrick, Chair



This year, the National Rural Faculty (NRF) achieved the largest membership in its 19 year history, with a total membership of 7675, of which 6743 are Australian-registered GPs. Of these GPs, 4494 are living and/or working in regional, rural and remote Australia. The NRF is proud to have the largest rural GP membership of any specialist medical college.

With a commitment to supporting GPs working in regional, rural and remote Australia, the NRF has implemented a work program focused on advocacy, education, collegiality and peer support.

Earlier this year, the NRF Board was shocked at the impact of the devastating summer floods across Australia. We learnt that our members had homes, practices and communities affected. The College contacted affected members to provide collegiate support, as well as practical information for re-establishing a practice.

Programs proposed and instituted by some state health departments to increase the number of doctors in rural communities are leading to a fragmented system, causing confusion for our members and their communities. In response, the NRF released its position statement on rural general practice. The NRF is clear that communities want access to appropriately trained and resourced procedural and nonprocedural

GPs and has called on government departments to consult with the general practice profession about training for rural general practice.

The NRF welcomed the Federal Government's inquiry into the registration process and support for IMGs. The NRF recognises that IMGs play a vital role in the delivery of primary healthcare to regional, rural and remote communities. It is imperative that the Federal Government ensures IMGs receive better orientation to the Australian healthcare system and Australian culture, are better supported to prepare for RACGP Fellowship and are working to the same standards as those which apply to Australian graduates.

At a program level, the faculty continues to successfully administer the Rural Procedural Grants Program. Increasingly more rural and remote GPs are taking advantage of these training grants to maintain their skills in anaesthetics, obstetrics, surgery and emergency medicine. Over the past 12 months, there has been a 9% increase in procedural participants, now numbering 677 and an 8% increase in participants providing on-call emergency services for their rural communities. A recent survey of participants demonstrated that 52% of participants perceive the program had a positive impact on their intention to stay in rural practice.

The faculty's relationship with our near neighbours in Papua New Guinea (PNG) has continued to strengthen, with the faculty hosting four PNG Masters of Rural Medicine trainees at the College's annual conference, GP10. This year we have also continued to explore

practical opportunities for supporting the PNG program.

A review of our membership database has enabled us to integrate the new Australian Standard Geographical Classification – Remoteness Area (ASGC-RA) data and to match this with each member on the College database. We believe the RACGP is one of the first nongovernment organisations to undertake this change to its database and hope to be able to utilise this data for future advocacy and education initiatives.

I congratulate our FARGP graduates for 2010–2011 and hope they find the skills and confidence acquired through the qualification to be beneficial for their future careers. I extend my appreciation to the NRF Board for their leadership of and commitment to their rural communities and for ensuring the voice of rural GPs remains strong and united.



Rural Registrar of the Year, Dr Aileen Traves, with Kathryn Kirkpatrick at GP10 in Cairns

# National Faculty of Aboriginal and Torres Strait Islander Health

Associate Professor Brad Murphy, Chair



This year marks the first anniversary of the RACGP National Faculty of Aboriginal and Torres Strait Islander Health. The faculty has gone from strength-to-strength and has been an exemplary example of its motto 'working together'.

The RACGP officially launched the faculty at GP10 in Cairns. The launch featured distinguished speakers including The Hon Warren Snowdon, Minister for Indigenous Health; Mick Gooda, the Aboriginal and Torres Strait Islander Social Justice Commissioner and Co-Chair of the 'Close the Gap' campaign; Dr Mark Wenitong from the Apunipima Cape York Health Council; and Megan Morris from the Department of Health and Ageing. Since our launch, our membership numbers have grown and I am pleased to report that almost 1000 GPs are now members of the faculty.

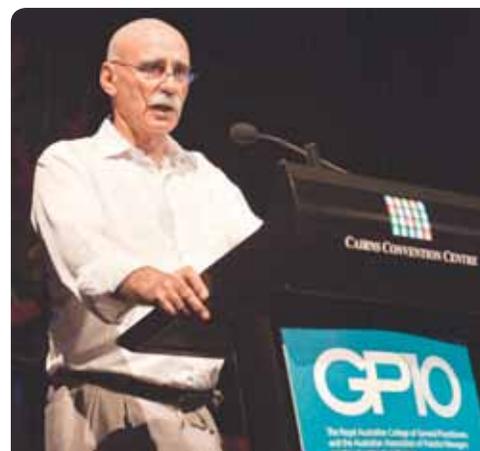
The Faculty Board has continued to provide leadership to the faculty and I thank members for their commitment and wise counsel. Their leadership culminated in the launch of four new resources that begin the faculty's contribution to ensuring general practice is well resourced, informed and supported to provide culturally sensitive, patient centred, and holistic care to Aboriginal and Torres Strait Islander people and communities.

These resources include:

- The updated RACGP Curriculum Statement for Aboriginal and Torres Strait Islander Health, detailing the knowledge, skills and attitudes necessary for general practice
- An online activity: Introduction to Aboriginal and Torres Strait Islander cultural awareness in general practice
- Educational criteria to adjudicate applications by training providers to deliver cultural awareness education and cultural safety training to participants in the RACGP QI&CPD Program
- RACGP Position Statement, 'Identification of Aboriginal and Torres Strait Islander people in Australian general practice', to explain a new indicator relating to this process in the RACGP *Standards for general practices* (4th edition).

At an organisational level, the faculty is pleased that the College is embracing the Welcome to Country ceremonies and Acknowledgment of Country practice as part of core College business. In addition, the first phase of cultural awareness training for RACGP staff has commenced and a new cultural protocol guide for staff and RACGP members is in development.

At GP10, RACGP members approved the sourcing of Aboriginal and Torres Strait Islander artwork for incorporation into a redesigned College ceremonial gown. This is an exciting project and the faculty has been sourcing artwork and artists to illustrate the RACGP's journey in celebrating the traditional lands on which College members continue to practise the art of healing.



Warren Snowdon MP, Minister for Indigenous Health, speaking at the launch at GP10

Over the coming year the faculty looks forward to:

- Recruiting and supporting a new Censor for the faculty
- Providing examination preparation support for Indigenous registrars
- Launching the new artwork for the College gown
- Providing representation and input into Close the Gap Coalition
- Developing Aboriginal and Torres Strait Islander related questions for all components of the Fellowship examination
- Working with the National Aboriginal Community Controlled Health Organisation to update the *National guide to a preventive health assessment in Aboriginal and Torres Strait Islander people*.

Finally, at GP11 the faculty will host its first elections and Annual General Meeting. This is a significant milestone in the journey of the faculty and I encourage RACGP members to join the faculty and to make an investment in its strong future.

# National Faculty of Specific Interests

Associate Professor Morton Rawlin, Chair



The National Faculty of Specific Interests (NFSI) has progressed throughout 2010–2011. Membership has grown steadily, topping 390 members at the end of June 2011.

With the addition of the Refugee Health Special Interest Group, the faculty now boasts groups supporting two areas for which the College has written specific standards documents: the *Standards for health services in Australian immigration detention centres*, supported by the Refugee Health Special Interest Group and the *Standards for health services in Australian prisons*, supported by the Custodial Health Network.

Many of the other networks have been involved in developing conferences and meetings that represent opportunities for all GPs to upskill in their given area of practice. To name just two, the Medicine in Addiction Conference, co-convened by the NFSI Network of Addiction Medicine, the Victoria Faculty and the Royal Australian and New Zealand College of Psychiatry, took place in Melbourne and is proposed to become a regular conference, and the Australian Pain Society Conference, where the Network of Pain Management will offer its very successful 'Fundamentals of pain' workshop.

Other networks have supported the RACGP conference, offering

workshops and sessions as well as writing cases for the RACGP examination and for *gplearning*.

All networks are busy working on activities that improve practice in the specific areas of interest as well as standing ready to act as a counsel and support to the College President and the wider College in whatever capacity is needed.

The Council endorsed networks which were active within the faculty as of 30 June 2011 are:

- Addiction Medicine
- Military Medicine
- Child and Young Persons Health
- Pain Management
- Custodial Health
- Psychological Medicine
- Integrative Medicine
- Refugee Health
- Medical Education
- Sports Medicine
- Sexual Assault and Family Violence
- Musculoskeletal Medicine.

The beginning of the 2011–2012 financial year will see two more networks submit materials to be endorsed as NFSI networks.

General practitioner members of the faculty are enthused by the opportunity to meet and learn with fellow GPs with an interest in their area of practice.

These groups, along with the existing NFSI networks, offer the



Members of specific interests networks

College a valuable resource in both development and revision of policy and position, as well as a wealth of experience within some of the most challenging contexts in which our GP members operate. This equates to valuable support of College standards, aiming for better outcomes for our patients.

## The Conference for General Practice

The RACGP offers a range of events and workshops across all states to support GPs' professional development and foster collegiality throughout the year with the highlight being the national annual conference.

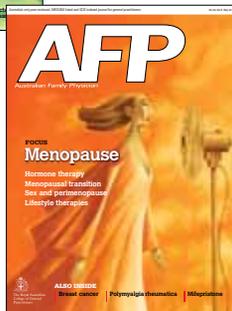
In 2010, the RACGP teamed up with the Australian Association of Practice Managers to host GP10 from 6–9 October in Cairns. A very exciting program attracted a record number of delegates, with more than 1000 people gathering at the Cairns Convention Centre. GP10 exceeded expectations and was the biggest conference the College has ever hosted.

In October 2011, the RACGP will be hosting GP11 in Hobart, Tasmania. The conference program will focus on women and children's medicine, innovations in education, telemedicine, clinician leadership development, informatics/e-health, Aboriginal and Torres Strait Islander health, business of medicine, dermatology in practice and emergency medicine. With a focus on current and future developments in Australian general practice, the conference is another highlight on the general practice events calendar.



## Australian Family Physician

*Australian Family Physician (AFP)* is the RACGP's flagship peer reviewed journal, providing themed articles, clinical updates and high quality research articles that assist those who seek quality evidence based information relevant to general practice. *Australian Family Physician* continues to be Australia's only MEDLINE listed and SCIE indexed peer reviewed journal. It now also boasts an Impact Factor (reflecting the average number of citations to articles published), an Excellence in Research for Australia (ERA) ranking of 'B', and has, on average, over 9000 PubMed 'linkouts' to its website each month. *Australian Family Physician* is a member of, and subscribes to, the principles of the Committee of Publication Ethics, and has a monthly print circulation of over 40 000. In 2010–2011, featured topics of importance to general practice included joint pain, childhood emergencies, chronic heart failure, adolescent health, menopause and mental health.



## Good Practice

*Good Practice* is the RACGP's monthly news magazine, highlighting the issues that affect general practice in Australia today. Launched in 2010, the publication has been revamped in 2011 and is delivered with *Australian Family Physician* each month. *Good Practice* includes regular sections on current topics, business practice, e-health and technology, learning and ongoing development and workshop listings. In 2010–2011, *Good Practice* included many articles that highlighted the wonderful diversity found in Australian GPs, such as Dr Jason Ong, who travels to rural China to help train healthcare workers about community medicine and HIV; and Dr Andrew Davies, who provides primary healthcare to homeless people in Western Australia.



# Education and training for general practice

The scope of the education portfolio within the RACGP encompasses all aspects of general practice education, from pre-vocational training through to vocational training and continuing professional development, reflecting the journey of general practice and lifelong learning.

The Education Department comprises the Learning and Fellowship Services units and manages programs that support Fellowship (FRACGP and FARGP), standards, curriculum, assessment and continuing professional development. The department is responsible for developing solutions and products to directly assist those working or aspiring to work in general practice with their educational needs. The department also operates extensively through the College's faculty structure to deliver services and products.

The National Standing Committee – Education is the overarching education committee within the College, responsible for advising on all aspects of general practice education and training. Separate Boards for assessment and College Censors provide academic governance in relation to College qualifications, including the FRACGP and, in conjunction with the College's National Rural Faculty, the FARGP.

## Censor-in-Chief

Dr Jennie Kendrick



Firstly, I would like to take this opportunity to acknowledge the achievements of our recent past Censor-in-Chief, Dr Jan Radford, who led the Board of Censors and Board of Assessment with a strong commitment and enthusiasm for continuous improvement in standards for education and assessment.

In 2010–2011 the RACGP delivered two examination cycles with 1463 doctors successfully completing one or more segments of the Fellowship examination. In total, 1027 doctors were admitted to Fellowship in the past 12 months.

In 2010, conjoint examinations were held with the Malaysian Academy of Family Physicians, with 10 doctors achieving Fellowship of the RACGP, and with the Hong Kong College of Family Physicians, with a further 26 doctors achieving Fellowship of the RACGP.

The RACGP has continued to advocate for improved support for IMGs and has sourced funding from the Australian Government Department of Health and Ageing (DoHA) to support progress towards Fellowship for IMGs at risk of losing their registration in either 2011 or 2012. This has allowed for 300 IMG Fellowship Support Grants (up to the value of \$3500) for IMGs to help prepare for Fellowship examinations, such as via examination preparation workshops.

In 2009 the RACGP launched the Specialist Pathway to provide a structured and supported program for IMGs entering Australian general practice. In late 2011, the College will release 90 Specialist Pathway grants up to the value of \$5000 to assist doctors and reduce the costs associated with preparing for the Fitness for Intended Clinical Practice Interview (FICPI) College examination, ongoing supervision and learning plans.

The RACGP improved its examination functionality by successfully piloting an online examination in Victoria in March 2011. This is an innovative development for the College and will benefit all GPs completing their examinations under the new system. The new system is reliable and will ultimately allow for earlier release of results. The College is utilising modern technology to make the examination process easier for both participants and examiners.

Feedback from candidates that participated in the pilot was very positive. Candidates reported that the system was very easy to use, images and text were clear, instructions for completion were straightforward, and a 'review' feature meant that highlighted questions and responses could be reviewed later on in the examination without the need to cross out answers or information. Feedback from the project managers of the pilot proved that the online examination method was a superior product. Based on this success, the online examination was rolled out nationally in July 2011.

Another development to the Fellowship examination process during 2010–2011 was the improvement in examiner performance reports to assist with identifying training opportunities for

examiners. This is a positive step that will further improve the already high quality of examiners into the future.

The focus on continuous improvement will continue into 2011–2012. The RACGP will undertake a review of its Fellowship and Assessment pathways with an emphasis on efficiency improvements and member service. This will involve further changes to our administrative processes, including online automation of Fellowship examination enrolment processes, as well as policy changes. Planning is underway to reduce the complexity of the current pathways to Fellowship while allowing for appropriate flexibility. Fellowship assessment modules will continue to be reviewed to ensure they reflect the evolving nature of general practice in Australia.

## Fellowship and Learning

### Fellowship of the RACGP and FARGP

Fellowship of the RACGP follows the formal assessment and training process which recognises competence to deliver unsupervised general practice services in any general practice setting in Australia – urban, regional, rural or remote.

The RACGP assessment processes are held in high esteem around the world, offering international standing through reciprocal recognition of Fellowships with New Zealand and Ireland. The RACGP also delivers a conjoint Fellowship in Hong Kong and Malaysia.

The Fellowship in Advanced Rural General Practice (FARGP) is a formal qualification that recognises advanced rural skills and additional training undertaken by GPs in preparation for practice in regional, rural and remote Australia. The FARGP is awarded only to Fellows of the College, however all GPs and general practice registrars are encouraged to undertake the program as part of their preparation for vocational Fellowship.

### Fellowship pathways and examinations

The journey towards RACGP Fellowship is as individual as the doctors who undertake it. The RACGP offers three pathways to Fellowship:

- the Practice Eligible Route
- the Vocational Training Route
- the RACGP Specialist Pathway.

Each pathway has different eligibility criteria based on the candidate's

previous medical experience and training.

The RACGP offers two Fellowship assessment processes:

- the College examination, available to candidates on all pathways to Fellowship
- Practice Based Assessment, available only to practice eligible candidates.

The College examination comprises two written segments – the Applied Knowledge Test (AKT) and Key Feature Problems (KFP), and a clinical segment – the Objective Structured Clinical Examination (OSCE). There are two examination cycles in each calendar year.

To allow greater flexibility, each segment can be completed and paid for separately. Passing the AKT is a prerequisite to presenting for the OSCE. All three examinations need to be completed within a 3 year period of first passing one of the written examinations.

In July 2011, all RACGP AKT and KFP examinations were switched to online examinations to make taking examinations a much smoother process. Fellowship examination enrolment processes will also be fully automated via an online portal accessible 365 days per year.

### IMG Fellowship and Specialist Pathway Support Grants

Following the introduction of national medical registration, IMGs in general practice with limited area of need registration are required to demonstrate progress towards achieving Fellowship. Failure to demonstrate progress towards attaining Fellowship may mean that some IMGs are at risk of losing their medical registration.

In the 2010–2011 financial year, the RACGP sourced funding from DoHA to support IMGs at risk of losing their registration. Three hundred IMG Fellowship Support Grants up to the value of \$3500 are available to IMGs to help prepare for either the 2011.2 or 2012.1 Fellowship examination segments, via examination support workshops.

The RACGP also sourced funding from DoHA to support IMGs participating in the RACGP Specialist Pathway Program. The College recognises that the financial costs associated with the Specialist Pathway Program for candidates can be high. The College is offering Specialist Pathway candidates (Category 2 and 3) 90 grants up to the value of \$5000, to help them participate in Specialist Pathway Program training and assessment activities.

### Curriculum for Australian General Practice

In early 2011, the RACGP commenced updating the *Curriculum for Australian General Practice (2007)* to meet the needs of the changing clinical, educational and training environment. In June an invitation to comment was extended to all members, stakeholders, health organisations and community members.

### Training and PGPPP standards

The RACGP Education Department has commenced two major reviews in this area. Both the Standards for the Prevocational General Practice Placement Program (PGPPP) and the Vocational Training Standards leading to Fellowship are currently under review. The RACGP is working with key stakeholders across the life cycle of general practice to complete this major undertaking.

## Quality improvement and continuing professional development

In October 2010, the College officially launched the RACGP QI&CPD Program for the 2011–2013 triennium.

As well as focusing on quality improvement activities in the new QI&CPD triennium, the program administration has also been streamlined for GP participants. As in the last triennium, all QI&CPD accredited activities are subject to a quality review process to ensure that education delivered is of the highest quality.

In addition, it is now easier to ensure that all learning and development is recognised by using the GP online notification system to claim CPD points, cutting out the paperwork. The new look website comes with a number of improvements, including a QI&CPD accredited activities calendar and updated online support tools available to users.

The new triennium also has a stronger emphasis on a whole-of-practice team approach to ongoing CPD and continuous quality improvement activities. However, the College has worked hard to ensure the education framework and minimum requirements for GPs in the new triennium remain unchanged: a minimum of 130 points for the triennium including two Category 1 activities and one basic CPR course.

## gplearning

The RACGP's online learning platform, *gplearning*, hosts a suite of learning activities that assists GPs in meeting their professional development requirements. The platform is accessible 24 hours a day and

activities are practical, peer reviewed, evidence based and accredited by the QI&CPD Program.

In 2010–2011 even more online learning activities were added to the *gplearning* portal. Popular activities explore topics such as child health, aged care, hormone replacement therapy, pregnancy care, musculoskeletal conditions, cultural awareness and breast symptoms.

Significant enhancements to the *gplearning* platform will be undertaken during 2011–2012. These enhancements include an improved, easier-to-use learning interface featuring single views of course and activity listings to make course structures easier for users to navigate. The new platform will be launched at the GP11 conference in October 2011.

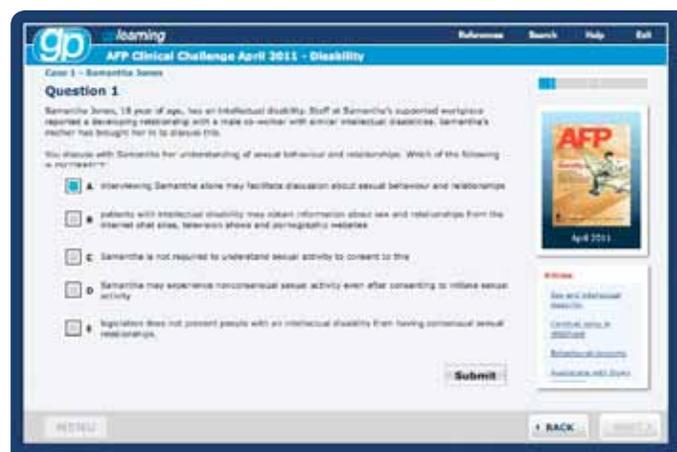
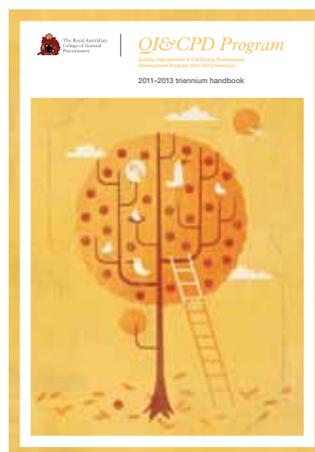
## Leadership advancement

In 2009, the NSW&ACT Faculty developed a leadership workshop for GPs interested in building on their existing leadership skills to engage more effectively in practice, team and board or committee settings. With the increasing demand for GP leadership in the expanding multidisciplinary clinical team,

developing this skills set will become all the more important for today's GPs. For this reason, in 2010–2011, the Education Department has taken on the development of a high level, skills based 2 day workshop involving key GP leaders as well as leaders from other medical specialties. The first of these workshops will be featured at our GP11 conference in Hobart, featuring well known GP leaders. Subject to demand, this workshop program will then tour regional centres in Western Australia, South Australia, Victoria, Queensland and New South Wales in 2012. Online modules will also be developed to complement the live, interactive program.

## GP Update workshops

In April 2011, the RACGP commenced a new CPD course for Australian GPs and feedback from participants has been overwhelmingly positive. The course, GP Update, is based on a successful UK program and is a series of workshops exploring practical ways to apply current evidence to patient care. The first GP Update workshop targeted diabetes, cardiovascular health and respiratory disease and ran throughout April in Perth, Adelaide, Melbourne and the Gold Coast. Each 1 day workshop is complemented



by preparation and follow up online activities, a participant handbook and plan for practice improvement.

### **Clinical Emergency Management Program**

The RACGP Clinical Emergency Management Program (CEMP) has been designed to build participants' knowledge, skills and confidence when responding to medical emergencies. Depending on current skills and knowledge, the program offers two workshops facilitated by a national team of highly trained mobile intensive care ambulance paramedics. CEMP is highly interactive and is complemented by online activities to prepare for and follow up from the workshop. In 2010–2011, 941 doctors participated in CEMP workshops.

### **Australian Medical Council Bridging Programs**

The RACGP/Australian Medical Council Bridging Programs have been developed to meet the needs of doctors with overseas qualifications who are preparing to sit the AMC's examinations. The programs are designed to rapidly improve candidates' professional

knowledge in the areas necessary to pass the AMC examinations and for subsequent clinical practice. During 2010–2011, 158 doctors took part in AMC courses with the College.

### **Certificate of Primary Care Dermatology**

This comprehensive course trains GPs to diagnose and optimally manage common skin conditions (including skin cancer). The certificate course has been developed through a special interest education partnership between the RACGP and the Australasian College of Dermatologists (ACD). It is open to all GPs and registrars. It is also open to registrars in the ACD training program. In 2010–2011, 161 GPs participated in CPD provided through this course, including 385 online modules.



GP Update workshop, Perth 2011

# Innovation and policy for general practice

The RACGP champions and facilitates high quality general practice. This is achieved through the Practice Innovation and Policy Department's involvement in quality initiatives and the development of standards, policy, knowledge resources and other innovative tools to support GPs.

The RACGP promotes and supports general practice research and advocates for general practice through representation and development of College policy on major structural and health reform issues.

The RACGP provides GP advocacy on matters relating to the quality and safety of general practice care at both a clinical and practice level, and positions general practice to make a substantial contribution to emerging trends in healthcare, including e-health initiatives.

The National Standing Committees – Education, Quality Care, Research, General Practice Advocacy and Support, e-health, and Standards for General Practices – provide College Council with information and advice on issues in general practice and guide the implementation of initiatives developed in accordance with the College's strategic plan.

## Standards and accreditation

The College is an established leader in setting national standards with the RACGP *Standards for general practices* being one of the pillars of safety and quality in the Australian healthcare system and used by over 80% of Australian general practices for accreditation.

The vision of the College is that the standards assist general practice to provide safe patient care and embrace a culture of practice improvement.

### Standards for general practices (4th edition)

The RACGP launched the 4th edition of the *Standards for general practices* in October 2010.

The 4th edition was developed through much hard work by the NSC – Standards for General Practices. General practitioners, practice nurses, practice managers, individual consumers and consumer representative organisations, accreditation agencies and other vital stakeholders provided significant input into the development of the 4th edition. During consultation on the draft 4th edition, feedback was received from almost 700 people through online surveys, focus groups, written submissions and field trials.

Key changes in the 4th edition include fewer criteria and indicators. New criteria include clinical handover, clinical leadership, patient identification and safe and quality use of medicines. In the new edition, practices have more choice in demonstrating to surveyors how they implement the standards in their practice.

In December 2010, the College also launched the RACGP Patient

Feedback Guide: Learning From Our Patients – a tool designed to assist general practices in the use of high quality patient feedback as part of the practice improvement process. The guide helps general practices understand what is required to systematically gather and use information from patients about their experiences of the practice.

### Telehealth standards

To guide GPs through telehealth consultations and provide a safety and quality framework for both patients and GPs, the RACGP is working on a number of telehealth initiatives, including the development of telehealth standards for general practices.

In May 2011, DoHA engaged the RACGP in a project to develop telehealth standards for video consultations for general practices.

There is an urgent need for the establishment and implementation of nation-wide telehealth standards, since the introduction of Medicare rebates and financial incentives for video consultations for patients in outer metropolitan, regional and remote Australia, across a range of specialties on 1 July 2011. The RACGP *Standards for video consultations for general practices* are scheduled for release in October 2011. The Telehealth Standards Taskforce, chaired by Dr Mike Civil, met for the first time in June 2011.

### Standards for health services in Australian prisons

In May 2011, the RACGP launched the *Standards for health services in Australian prisons*. The

patient population in prisons is generally characterised by complex clinical needs. These standards provide a framework to assist GPs and other health professionals working in prisons to deliver safe and high quality healthcare in this specialised area. The new standards are based on the 3rd edition of the *Standards for general practices* and were developed by the NSC – Standards for General Practices in consultation with GPs from the RACGP Network for Custodial Health and relevant state and territory jurisdictions.

### Development of other standards

The RACGP is currently working with the Australian Council on Healthcare Standards, AGPAL and the Northern Territory Government to develop standards for remote area health services. This work will ensure a greater measure of patient safety in these settings.



Launch of the 4th edition of the *Standards for general practices*

## E-health – the future of modern healthcare services

E-health continues to be a growing area for the College reflecting the significant impacts e-health will have on the manner in which GPs practise in the coming decade. The future of modern healthcare services will be supported by GPs' ability to adapt to e-health and related new technology. The RACGP believes that web-based technology will be the future for GPs delivering efficient, high quality and safe healthcare to the community. The RACGP e-health unit provides GPs and their teams with the tools, resources and education at both a clinical and practice level to help general practice into the future of e-health.

In the past year, the RACGP continued to invest in e-health and worked to ensure that e-health initiatives are profession-led to better enable GPs and their practice teams to improve health outcomes for patients in the long term. In recognition of the importance of e-health in delivering healthcare, in 2010, the College established the NSC – e-health, from the former e-health working group. The committee is chaired by Dr John Bennett.

The fundamental aim of the College's commitment to e-health is to see a healthcare system that is based on the principles of interconnectivity and interoperability, and one that is simple and intuitive.

### RACGP Oxygen Pty Ltd

In 2011, the College established a subsidiary company called RACGP Oxygen Pty Ltd. RACGP Oxygen Pty Ltd is refreshing the way general practice does business by delivering

the right products, in the right place, at the right time to improve health outcomes and people's experience of health. The organisation is working with strategic partners including information technology experts and GPs across Australia to deliver innovative clinical and business products and services.

### e-health Futures

In 2010, the National e-Health Transition Authority's (NEHTA) Model Healthcare Community was incorporated into the John Murtagh Centre at College House in South Melbourne. The interactive e-health display, 'e-health Futures', was a success since its launch with 29 groups totalling 508 people visiting, including general practice team members, students, suppliers, consumer groups, RACGP Council, staff members and many more. In 2010–2011 the Model Healthcare Community also went 'on tour' and was on display in Cairns, Adelaide, Perth and Sydney.

In 2011, an updated version of the Model Healthcare Community display was installed. Version 2 of the Model Healthcare Community display is more compact and takes visitors on a tour from when the patient arrives at a general practice reception, through a referral to a specialist, a hospital admission and associated follow up. Visitors will learn more about online referrals, discharge summaries, medications management, pathology and the Personally Controlled Electronic Health Record (PCEHR). The model provides a great opportunity to demonstrate how e-health innovations will influence the way health services are delivered in general practice, the work of the RACGP members with their patients and the online consumer interaction with their record. The new display is managed by RACGP Oxygen Pty Ltd.

### PrimaryCare Sidebar®

In order to encourage GPs to adopt e-health initiatives, the College introduced a practical e-health tool – the **PrimaryCare Sidebar®** – to members in 2010–2011. **PrimaryCare Sidebar®**, which works alongside the clinical desktop system, was developed by Pen Computer Systems Pty Ltd, a company with over 18 years experience in primary health and clinical decision support. The **PrimaryCare Sidebar®** is designed to ease existing workflows while facilitating the delivery of best care for patients. In 2011, new features of the **PrimaryCare Sidebar®** will be available to members, including MBS prompts, cdmNet, insurance medical requests, and single sign-in to evidence based resources DynaMed and eTG complete. To read more about the **PrimaryCare Sidebar®**, please refer to page 12.

### General Practice Data Governance Council

The General Practice Data Governance Council (GPDGC) comprises representatives from the RACGP, the Australian Medical Association, Australian General Practice Network, Rural Doctors Association of Australia, Australian College of Rural and Remote Medicine, Australian Practice Nurses Association, Australian Association of Practice Managers and Consumers Health Forum. The GPDGC under the chair of RACGP Life Fellow, Dr Mukesh Haikerwal AO, supports and advocates for the development of core principles and controls to support an appropriate information sharing environment for the secondary use of general practice data. Patient information that is collected for the primary use of the delivery of care also has value in the secondary use environment. The peak general practice bodies

recognise the urgency to review and revise protocols and procedures relating to the secondary use of clinical practice data, including requirements for quality, security, privacy and appropriate use. In 2010–2011 the GPDGC developed a Data Governance Strategy and Framework and four key principles as the foundation for its future work.

### Personally Controlled Electronic Health Records

In 2011, the RACGP made a submission in response to DoHA's Draft Concept of Operations – Relating to the introduction of a Personally Controlled Electronic Health Record system. In its submission the College urged the government to acknowledge the central role of GPs in the healthcare system and roll-out of PCEHR.

### GP health summaries

A need to clearly define the key elements of the GP health summary and its application in an electronic health record has prompted the College in 2011 to develop a set of seven factsheets to provide advice to general practice and their teams. These factsheets are a useful resource for the general practice team to increase patient safety and improve continuity of care and will also be valuable for the wider primary care and hospital sector.

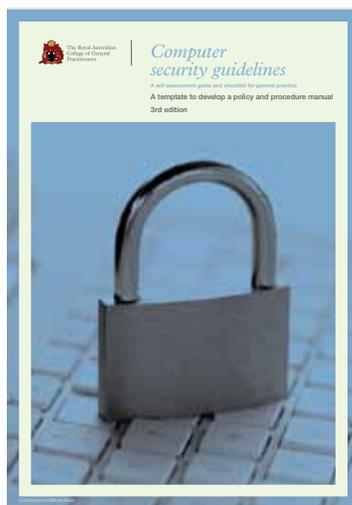
The College will continue to work closely with DoHA and NEHTA to ensure that all e-health initiatives are developed to be well integrated and useful for general practice teams.

### Computer security guidelines

The College launched the 3rd edition of the *Computer security guidelines: a self assessment guide and checklist for general practices* in October 2010.

These guidelines are designed to help busy general practices ensure that their practice systems are safe, with the 3rd edition taking into account the increased use of laptops, remote access devices and wireless connection. The guidelines provide a series of templates that provide useful information, such as how to produce a business continuity and disaster recover plan. They also include a checklist, which provides an overall assessment of the basic computer security processes that should be reviewed annually.

The guidelines are based on the *Computer security self-assessment guidelines and checklist for general practitioners* (2nd edition), published in 2005 by the General Practice Computing Group, and also on work done in 2001 by the RACGP and the AMA. The guidelines are referenced in the *Standards for general practices*.



## Policy and practice support

As Australia's largest professional general practice organisation, representing over 20 000 members working in or towards a career in general practice, the RACGP has a responsibility to ensure the collective voice of GPs across the country is extending to government. The College continues to advocate on a range of clinical, professional and business issues that influence the capacity of GPs and their practice staff to provide safe and high quality care. Our advocacy work involves understanding the issues that most affect our members and their patients, lobbying Federal and State Governments, and responding to governmental inquiries and submissions. The RACGP also represents the interests and needs of our members on industry groups such as United General Practice Australia.

In the 2010–2011 financial year, the College advocated to government and/or responded to governmental enquiries and submissions on issues including:

- Medicare Locals and Local Hospital Networks
- MBS changes, and new PIP funding streams
- After hours care arrangements
- Funding for pathology and diagnostic imaging
- PCEHR
- E-health
- Telehealth
- National registration/Australian Health Practitioner Regulation Agency

- Collaborative care agreements in general practice
- General practice mental health funding, and access to allied psychological services
- Diabetes and chronic disease management funding
- Establishment of preventive health agency
- General practice infrastructure grants
- Quality and safety of patient care
- IMGs
- Cultural awareness
- Aboriginal and Torres Strait Islander health
- Rural general practice training.

A proactive communications and media strategy resulted in the College enjoying a positive media profile in both medical and consumer media outlets in 2010–2011. The College received around 1300 mentions (media clips) across print, broadcast and online mediums, reflecting that the College is the '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 nearly 80 million (media impressions). The College has a growing media profile, and we could not have achieved this without the support of our experienced spokespeople.

### Practice support

The provision of timely and accurate responses to member enquiries is an important part of the services the RACGP provides. Enquiries also assist with the continual update of practice information and resources available to College members. Resources currently being updated include the publications, *Opening and closing a practice*, *General Practice Management Toolkit*, and *Reaching a fair deal*, all of which are due for release in 2011–2012. Full of contemporary, relevant information on practice management, these publications will help GPs negotiate the increasingly complex business environment.

## Quality care and clinical improvement

General practitioners are at the forefront of the provision of primary care and play a key role in encouraging patients to take greater responsibility for their health. The RACGP sets the standards for general practices and produces a range of guidelines designed to encourage preventive healthcare in practice.

### Guidelines for preventive activities

A review of the 7th edition of the *Guidelines for preventive activities in general practice* (the 'red book') and development of an 8th edition commenced towards the end of 2010.

A 'red book' taskforce has been established to undertake this task, comprising a range of GPs including representatives from the NSC – Quality Care. Each section of the red book is being reviewed by a small team within the taskforce, with a clinical lead appointed for each section. When drafted, each section will be provided to key stakeholders for comment, which will then be incorporated into the final draft.

The RACGP is also in the process of updating the current version of the 'e-red book', which College members can access and search online. The e-red book is an interactive decision support tool designed for the Australian primary care environment. The e-red book has also been integrated into the **PrimaryCare Sidebar®** to deliver GPs with web-based knowledge specific to the open patient record.

It is anticipated that the 8th edition of the *Guidelines for preventive activities in general practice* will be completed mid 2012.



Former Prime Minister Kevin Rudd visiting Hornsby GP Unit in 2010

## Diabetes management

General practitioners provide the majority of medical care to people with type 2 diabetes. The RACGP, in partnership with Diabetes Australia, released the 16th edition of the *Diabetes Management in General Practice* handbook for 2010–2011. The handbook provides a summary of guidelines and recommendations from various sources on the management of type 2 diabetes in adults in the general practice setting.

## Mental health

The College continues to be involved in a number of programs in the mental health area, which is currently characterised by significant government reforms. The College continues to advocate on behalf of the best interests of its members and their patients in regards to mental health and funding arrangements.

The GP Psych Support service aims to provide GPs with access to quality patient management advice from a psychiatrist to assist them to manage their patients' mental health problems. The service currently employs a panel of eight psychiatrists who respond to GP enquiries within 24 hours via telephone, fax or webmail.

The General Practice Mental Health Standards Collaboration (GPMHSC) strives to ensure optimal mental health for the Australian population through ensuring high quality GP education and training in mental health. In 2011, the GPMHSC received extra funding to develop and disseminate a best practice mental health treatment plan template with the aim of increasing collaboration and communication between GPs and other mental health professionals. The College is also involved with the Focused Psychological Strategies Skills Training Small Grants Project, funded by DoHA, which aims to

address the limited opportunities for GPs to achieve the required professional development to register at the focused psychological strategies level.

The RACGP is a member of the Mental Health Professionals Association, a collaborative group of four key professional groups involved in mental health care. The association was established to provide mental health stakeholder support and a coordinated, collaborative forum for issues affecting the RACGP, the Royal Australian and New Zealand College of Psychiatrists, the Australian Psychological Society and the Australian College of Mental Health Nurses. The RACGP is also a member organisation of the Mental Health Professionals Network, an organisation funded to facilitate and support interdisciplinary mental health networks to strengthen collaborative care within the primary mental health landscape.

## College representation

The RACGP is proud to represent the general practice profession on many committees, both nationally and state-based. A number of these committees provide high level advice to government. One important example is the Pharmaceutical Benefits Advisory Committee, with Dr John Bennett, Chair of the NSC – e-health, representing the College.

The College is also a leader among professional medical stakeholder groups, continuing to represent its members on a range of professional committees, including United General Practice Australia, the Committee of Presidents of Medical Colleges and the World Organization of Family Doctors.

Thank you to the many GPs across Australia who generously gave their time to represent the College on various committees.

## Endorsement of external clinical guidelines and other resources to support general practice

The College receives a large number of requests annually to endorse clinical guidelines and other products for use in general practice. The NSC – Quality Care assesses these in relation to their scope, content, rigour of development, clarity of presentation and applicability to general practice to determine a recommendation for endorsement. The majority of requests are received from not-for-profit health related organisations. Endorsed guidelines are publicised on the College website.

## Disaster planning and resources

The College continues to position itself as a key organisation for responding to disaster situations. On the back of the H1N1 epidemic in 2009–2010, the College again was at the forefront in responding to the flood disaster that affected widespread areas across Australia in early 2011. The College liaised with GPs, government and other relevant organisations to support members during this natural disaster. Government roundtables provided an opportunity for the College to highlight challenges faced by the profession.

The College developed fact sheets for general practices and patients along with other useful resources to help GPs and their teams respond appropriately to floods in their communities.

# Knowledge and evidence

## RACGP Foundation

A new RACGP Foundation Board was appointed during the year. The major role of the foundation is to foster positive change in general practice in order to improve the health of all people in Australia. This is achieved by attracting and disseminating funds to support research projects in general practice. The foundation also oversees promotion of, and investment in, ideas and events that improve access, quality, education and public policy, resulting in measurably healthier populations. Professor Peter Mudge was appointed Patron of the Foundation in 2010.

2011 has seen a significant increase in the number of applications received for RACGP research grants, from 29 applications in 2010 to 42 in 2011. Additionally, three new awards were established in 2011, recognising eminent GPs:

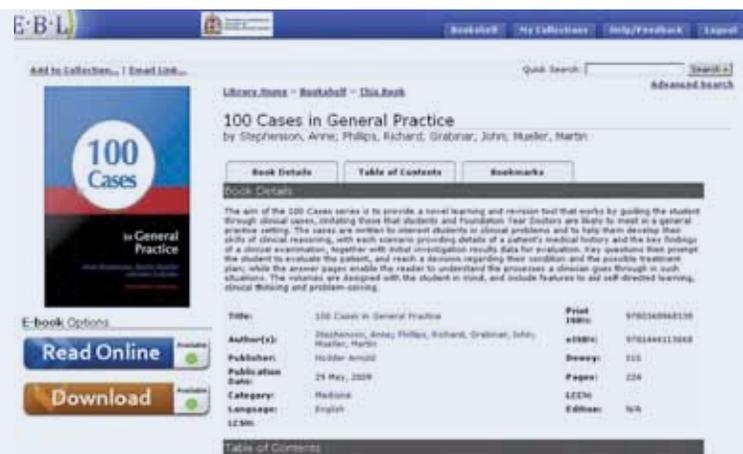
- Iris and Edward Gawthorn Award
- Peter Mudge Medal
- Charles Bridges-Webb Memorial Award.

## John Murtagh Library

Library users continue to access the John Murtagh Library's comprehensive services and resources to support their clinical, educational and research endeavours, with a high volume of staff mediated services recorded. In addition, development work has been undertaken to improve the range of online resources available to users and to enhance services.

Improvements include:

- a new e-book collection, enabling access to owned and nonowned e-books
- more directly accessible e-journals – the A-Z list now includes over 7000 titles
- extension of concurrent access to the AustHealth databases
- enhancement of the electronic table of contents (eTOCs) service, including a new e-health eTOC and expanded contents for Aboriginal health and obstetrics and gynaecology
- improved functionality of the online catalogue
- new-look library web pages with a moving banner to highlight new resources.



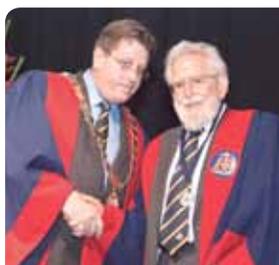
# RACGP awards and GP honours

## Rose-Hunt Award

The Rose-Hunt Award is the RACGP's most prestigious award and recognises outstanding service in promoting the aims and objectives of the College.

### Rose-Hunt Award 2010

Dr Alan Eric Fisher, NSW



"Throughout his career, Dr Fisher has been a tireless advocate for general practice and the College. Dr Fisher is an inspiration and role model for many members of our College, including myself, and a most deserving winner of the 2010 Rose-Hunt Award."

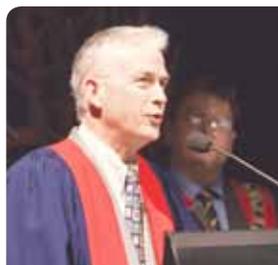
[Dr Chris Mitchell, RACGP President 2008–2010]

## GP of the Year Awards 2010

The GP of the Year Awards provide an opportunity to salute the dedication of GPs across Australia and to recognise excellence within general practice.

### General Practitioner of the Year

Dr Patrick Byrnes, QLD



"Having my work acknowledged by my patients and peers was one of the highest accolades I have received in my 30 years working in general practice."

[Dr Patrick Byrnes, RACGP General Practitioner of the Year 2010]

### General Practice Supervisor of the Year

Dr James Best, NSW



### General Practice Registrar of the Year

Dr Belinda Wozencroft, WA



### National General Practice of the Year

The Practice, Blacktown

### Victoria General Practice of the Year

Westcare Medical Centre

### South Australia General Practice of the Year

Chandlers Hill Surgery

### Tasmania General Practice of the Year

Sorell Family Practice

### Western Australia General Practice of the Year

Naturaliste Medical Group

## Monty Kent-Hughes Memorial Medal

The Monty Kent-Hughes Memorial Medal is awarded to candidates who achieve the highest OSCE score within Australia.

### Monty Kent-Hughes Memorial Medal 2010

**Dr Sarah Parker, SA**  
(2010.1 FRACGP examination)

**Dr Elizabeth French, QLD**  
(2010.2 FRACGP examination)

**Dr Jemima Grant, NSW**  
(2011.1 FRACGP examination)

## National Rural Faculty Awards 2010

The Brian Williams Award is the highest accolade awarded by the National Rural Faculty.

### Brian Williams Award

**Dr Peter Joseph, SA**



The National Rural Faculty – Rural General Practice Registrar of the Year Award recognises commitment to rural general practice and education.

### Rural General Practice Registrar of the Year Award

**Dr Aileen Traves, QLD**

**Dr Nicola Patching, WA**

The National Rural Faculty – Medical Undergraduate Student Bursary is an essay prize awarded to a medical student who is a member of a rural health students club at an Australian university.

### Medical Undergraduate Student Bursary

**Sarah McPherson, NSW**

## National Faculty of Aboriginal and Torres Strait Islander Health – Standing Strong Together Award 2010

This award provides recognition for partnerships between GPs and Aboriginal and Torres Strait Islander people in improving the health of Indigenous Australians.

### National Faculty of Aboriginal and Torres Strait Islander Health – Standing Strong Together Award

**Dr Gillian Gould and Mr David Kennedy, NSW**

**Dr Mel Scrace and the Apunipima Cape York Health Council, QLD**



# RACGP awards and GP honours

## 2010 RACGP research grant, scholarship and award winners

### Chris Silagy Research Scholarship

**Dr Julie Wang, Associate Professor Margaret Hellard and Dr Benjamin Cowie**

Improving diagnosis of hepatitis B in general practice.

### Family Medical Care, Education and Research (FMCER) Grant

**Dr Malcolm Clark, Dr Cathy Hutton and Dr Marie Pirota**

Who is deserving? Exploring the systems used to manage 'same day' appointment requests.

**Associate Professor Jane Smith, Professor Mieke Van Driel and Professor Chris Del Mar**

Patient self-diagnosis and self-medication prior to presenting to the general practitioner.

**Dr Faline Howes and Professor Mark Nelson**

Pilot study: Prevention and monitoring of the cessation of breastfeeding (PRAM-COB).

### Rex Walpole Travelling Fellowship

**Dr Fiona Millard**

Travel and present to International Dementia Conference: Memory problems and dementia in general practice, 19–21 October 2010 London.

### The RACGP/Osteoporosis Australia Bone Health Research Grant

**Dr Tania Winzenberg, Professor Graeme Jones and Dr Stephen Quinn**

Bone density feedback as an intervention to promote long-term improvements in osteoporosis preventive behaviours and bone health in younger women.

### The RACGP Research Grant for a Pilot Study

**Professor Grant Russell, Professor Nicholas Zwar and Professor Mark Harris**

A week in the life of two GP super clinics: Piloting research to optimise chronic care delivery.

### RACGP/Australian Primary Health Care Research Institute Indigenous Health Award

**Analyse Crane, The University of Notre Dame, Sydney, NSW**

### The RACGP Best Research Article in Australian Family Physician Award

**Dr Jeremy Bunker, Dr Oshana Hermiz, Professor Nicholas Zwar, Dr Sarah M Dennis, Dr Sanjot Vaghokar, Associate Professor Alan Crockett and Professor Guy Marks**

Feasibility and efficacy of COPD case finding by practice nurses.

**Dr Deborah Askew, Professor Philip Schluter, Dr Geoffrey Spurling, Dr Clare Maher, Dr Peter Cranstoun, Dr Craig Kennedy and Professor Claire Jackson**

Diabetic retinopathy screening in general practice – A pilot study.

### The RACGP/Centre of National Research on Disability and Rehabilitation Medicine Research Fellowship

**Dr Oliver Frank, Professor Nigel Stocks, The University of Adelaide, SA**

What are the beliefs and attitudes of older people with impaired cognition, and of their relatives, towards the impaired person's continuing to drive?

**Dr Tracy Cheffins, Dr Sarah Larkins and Ms Robyn Preston, James Cook University, QLD**

Are whiplash guidelines useful for GPs in North Queensland?

### The RACGP/Primary Care Collaborative Cancer Clinical Trials Group (PC4) Research Grant

**Dr Kylie Vuong, Professor Bruce Armstrong and Associate Professor Lyndal Trevena, The University of Sydney, NSW**

Feasibility of tailored skin cancer prevention in general practice.

### Alan Chancellor Award

**Dr Karen Flegg**

Attendance patterns in an urban Aboriginal health service: Not as expected?

## 2010 RACGP Honour Board

### Life Fellowship

**Professor Peter Mudge, TAS**

### Honorary Fellowship

**Dr Kerri Parnell, NSW**

**Professor Richard Roberts, USA**

### Honorary Membership

**Joan Morgan, VIC**

### William Arnold Conolly Orator

**Dr Peter Doyle, QLD**

## Australia Day Honours 2011

### Officer of the Order of Australia

**Dr Mukesh Chandra Haikerwal**



(RACGP Fellow), VIC – For distinguished service to medical administration, to the promotion of public health through leadership roles with professional organisations, particularly the Australian Medical Association, to the reform of the Australian health system through the optimisation of information technology, and as a general practitioner.

### Member of the Order of Australia

#### Dr Dominic John Frawley

(RACGP Fellow), NSW – For service to community health, particularly through executive roles with HeartKids Australia, to medicine as a general practitioner, and to the community.

#### Dr Roger Peter Strasser

(RACGP Fellow), CANADA – For service to medicine through improving the health care for people living in rural and remote communities in developed and developing nations as an educator, researcher and practitioner.

### Medal of the Order of Australia

#### Dr John Michael Ridley

(RACGP Fellow), NSW – For service to medicine as a general practitioner, and to the community of Coffs Harbour.

#### Dr John Andrew Pickering

(RACGP Life Member), VIC – For service to medicine, particularly in rural and regional areas, and to the Indigenous community.

#### Dr Ramaswamy Thangavelu

(RACGP Associate), NSW – For service to the community of Crookwell, and as a medical practitioner.

## Queen's Birthday Honours 2011

### Member of the Order of Australia

#### Dr Joanna Mary Flynn

(RACGP Fellow), VIC – For service to medical administration and to the community, particularly in the areas of practice standards, regulation, professional education and as a general practitioner.

### Ms Mary Elizabeth Martin

(RACGP Member), QLD – For service to the Indigenous community through the Queensland Aboriginal and Islander Health Council, to the review of professional standards, and to community nursing.

### Professor Kerryn Lyndel Phelps

(RACGP Fellow), NSW – For service to medicine, particularly through leadership roles with the Australian Medical Association, to education and community health, and as a general practitioner.

### Medal of the Order of Australia

#### Dr Rodney Paul Barkman

(RACGP Life Member), NSW – For service to the community of Corowa as a general practitioner.

#### Dr Bruce Wallace Ingram

VIC – For service to medicine as a general practitioner, and to professional associations.

#### Dr Richard Wayne Lehmann

(RACGP Associate), NSW – For service to medicine as a general practitioner in the Temora region.

#### Dr Peter James Robinson

NSW – For service to medicine as a general practitioner in the Deniliquin region.

#### Dr Natale Anthony Romeo

NSW – For service to the community through fundraising roles with the Italian Affair Committee.

