

## ADVERTISEMENT

Dear Colleagues,

This is not a time for business as usual.

Primary Care in Australia has been severely challenged and the marginalisation of the profession over the past decade, including the freeze and limitations on billing have hurt the profession and our ability to deliver quality outcomes for patients. I will prioritise reinvestment in primary care as the number one objective.

As President my priority is to equally improve engagement with members. The College has to be more responsive. I will meet regularly with groups of GPs across the country, city, rural and remote giving opportunities for engagement.

Given the Pandemic, this would have to take place via zoom in the early stages. These virtual 'town hall' meetings provide an opportunity to further explain my agenda and most importantly listen to the ideas and views of concerned GPs across the country.

This is certainly not new territory for me. As co-founder of GPs Down Under I have for several years provided GPs with a platform to share learnings, discuss professional developments and yes, in some cases, air grievances.

And my experience with GPDU has demonstrated the truth of the business maxim that 'Culture eats strategy for breakfast.' This is an area of my expertise. Whilst many focus on the technical issues and the outcomes of teamwork, without relationships things fall apart.

The RACGP has a dedicated staff many of whom I have had contact with through my previous work with the College. I will build on these relationships. I also look forward to working closely with the new CEO Matthew Miles who will be crucial to the successful implementation of the changes I am seeking.

**We will all need to hit the ground running, myself, the executive, CEO and the 13 other members of the board, as you can be sure that early 2021 will bring rapid changes in government policy and the College cannot afford to be left behind.**

On the advocacy front immediate priorities include:

- Telehealth and making sure this is removed from compulsory bulk billing.
- Addressing co-payment legislation within the dressing's item numbers.
- Reunite the College with other doctor groups and patients working within the primary care space to provide a united force in dealing with governments.
- Adoption of a '**GPs-first**' posture in dealings with health ministers and senior health public servants as we move forward to meet the major challenges for the management of health-care

resources. Reasserting the role of General Practice is non-negotiable. It is both financially sound and evidence based.

Education and training changes due to take effect in February 2022, requires immediate attention. The pressure points include communication, job security, funding, equity and advocacy for each of the organisations and groups effected. I have a demonstrated record of people and change management and will provide intense oversight of this monumental transition.

There are opportunities for improvement in training pathways and career paths. This includes working more closely with ACRRM within the RTO infrastructure for Rural Generalist training. This is a key collaboration that could improve the overall landscape of General Practice training. I aim to go forward with respectful recognition of the strengths and unique differences. Together we are stronger.

In the first 100 days, I will engage with members and the marketing team on how to develop the "RACGP" as a patient recognised brand as a valuable logo for Practices that adopt it. The 'GP as specialist' could also be an important part of ring fencing our title and reasserting our funding streams. This has an intersection with quality and standards that members and patients can invest in.