



# RACGP

Healthy Profession.  
Healthy Australia.



Annual report 2011–12



# RACGP

The RACGP  
Annual report 2011–12

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Professor Nigel Stocks

## Message from the Chair

Welcome to The Royal Australian College of General Practitioners 2011–12 Annual Report.

The College exists to ensure quality general practice forms the basis of an effective and efficient Australian healthcare system. We strive for a well-resourced and sustainable general practice and our vision of 'Healthy Profession. Healthy Australia' is part of everything we do.

During the past 12 months this vision has been realised through the dedication and passion that general practitioners exhibit in their care of individual patients and by engagement with their local communities. The theme of this 2011–12 Annual Report is 'Telling GPs' stories' – these stories reflect the hard work and dedication GPs demonstrate in their everyday practice. The images that form the foundation of this report were taken at the Lighthouse Surgery in Narooma, New South Wales, which was named the 2011 RACGP New South Wales General Practice of the Year. The Lighthouse Surgery is led by our 2011 General Practitioner of the Year, Dr Jennifer Wray.

I would like to sincerely thank my fellow Councillors and our President, Professor Claire Jackson, and acknowledge their tireless commitment and enthusiasm towards realising the aims and objectives of the College.

In closing, I would also like to recognise the professionalism and skills of our CEO, Zena Burgess together with members of our senior leadership team and College staff who work hard to achieve the best possible outcomes for all our members.

We can be confident that the College will ensure that general practice continues to be a central pillar for one of the most effective and efficient healthcare systems in the world.

During the past 12 months this vision has been realised through the dedication and passion that general practitioners exhibit in their care of individual patients and by engagement with their local communities.







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## About the RACGP

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

On an average day in Australia,  
342 000 people visit a GP\*

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 21 500 members working in or towards a career in general practice and are proud that in the 2011–12 financial year over 19 300 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 by

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 the introduction of continuing professional development.

\* Australian Institute of Health and Welfare, Australia's health 2012



# RACGP Vision Statement and Strategic Business Model

The RACGP Vision Statement and Strategic Business Model are used by College Council, College committees and College staff to ensure the clarity and currency of our strategic priorities.



## Members of the 54th RACGP Council

The College is governed by the RACGP Council comprising the President, Censor-in-Chief, General Practice Registrar Representative, 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, 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 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 Kathryn Kirkpatrick**

Chair, National Rural Faculty



**Dr David Knowles**

Chair, Tasmania Faculty



**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



Professor Claire Jackson

## Message from the President

### Strengthening general practice

It is with great pride I reflect on the many achievements accomplished by the College over the past 12 months. Record membership numbers have ensured the voice of GPs is strengthened as our advocacy efforts continue with federal and state governments. A combination of proactive submissions, responding to government enquiries and participation in meetings with key stakeholders has allowed the College to reinforce the critical role general practice plays in achieving high quality healthcare for all people in Australia. Key areas of focus over the past 12 months have included our vision for e-health, supporting a 'medical home' for all Australians, the general practice of the future discussion paper and the preservation of a strong engaged general practice community in the move from general practice networks to Medicare Locals.

### Learning from one another

The College is working hard to provide greater opportunity to connect with one another – to share knowledge, skills and experiences. The creation of the National Faculty of Specific Interests, for example, has proved an excellent platform for GPs to pursue their special interest within their College. Our annual conference for general practice is also a great opportunity to network, learn from one another and embrace collegiality.

### Supporting our rural workforce

Another significant milestone for the College was the celebration of the National Rural Faculty's (NRF) 20 year anniversary. The NRF has accomplished much during this time, including the launch of the revised Fellowship in Advanced Rural General Practice, and has played an integral role in supporting the rural workforce in accomplishing its mission of providing high quality healthcare and access to services across rural communities in Australia.

### Closing the gap

It is great to see the College's National Faculty of Aboriginal and Torres Strait Islander Health growing in size and activity, hosting its first annual general meeting in Hobart in 2011 and announcing the details of its first elected board. Among the many initiatives undertaken by the faculty, I would like to congratulate the faculty on the successful launch of the *National guide to a preventive health assessment for Aboriginal and Torres Strait Islander people* (2nd edition) in partnership with the National Aboriginal Community Controlled Health Organisation.

Another key piece of work undertaken by the faculty was the development of a newly designed RACGP ceremonial gown and sash, incorporating Aboriginal and Torres Strait Islander artwork. This exciting project was a result of a successful convocation item at the 2010 RACGP Annual General Meeting and will be officially unveiled at GP12 – the Conference for General Practice.

### Education

Developing and delivering high quality education programs remains a fundamental role of the College. It is great to see the next generation of GPs coming through as the College continues to conduct examinations, facilitate online learning, and streamline and support pathways to Fellowship. I would like to acknowledge Dr Jennie Kendrick, Censor-in-Chief, for her unrelenting commitment and enthusiasm to continuous improvement in standards for education and assessment.



Dr Penny Barkas,  
Dr Richard  
Barkas, Prof  
Claire Jackson



## Standing strong

Now and in the future, the College will continue its important role in supporting the quality and standards of general practice in Australia. Thank you to those members who have provided invaluable feedback over the past 12 months to help guide the direction of the College. I encourage you all to continue to share your thoughts and ideas on all matters general practice. It has been a privilege and a pleasure representing our College, with the support of the 54th Council, in the interests of achieving a sustainable and vibrant general practice of the future. Together, we can be immensely proud of the vital role our profession contributes to the positive health and wellbeing of our nation.

The College is working hard to provide greater opportunity to connect with one another – to share knowledge, skills and experiences.



Breathing New Life  
into General Practice  
Conference 2012  
hosted by General  
Practice Registrars  
Australia



Prof Claire Jackson –  
Australian Association  
of Consultant  
Pharmacy Forum  
at the Australian  
Pharmacy Professional  
Conference, Gold  
Coast, 2012



Zena Burgess

## Message from the Chief Executive Officer

The RACGP has enjoyed a progressive and rewarding 2011–12 financial year. The College broke record membership numbers in January 2012, cementing the RACGP as the largest professional general practice organisation in Australia. I am certain the many achievements outlined throughout this year's Annual Report would not have been possible without the hard work, dedication and passion of our members, College Committee members, Faculty Boards, Corlis Travelling Fellows, Councillors and staff.

### Member focus

The College has worked hard over the past 12 months to support high quality, efficient and sustainable healthcare delivery. Consistent with the dynamic health environment in which we operate, the College continues to evolve its functions to meet the needs of our members and support the advancement of general practice. This year, the senior leadership team has undertaken the important task of reviewing key College portfolios to increase our organisational focus on high quality services and products to our members. Through exceptional leadership of our managers and driven

performance of our staff, the College operates under the following key pillars:

- Member Services and Operations
- College Products
- Education Services
- Policy, Practice and Innovation.

While each of these key pillars has distinct roles and responsibilities, collaboration across the College remains fundamental to achieving the core strategic objectives of the College (see page 3).

### Leadership

The many facets of the general practice discipline ensure a vibrant mix of interests, personalities and skill sets. It is through this diversity in scope that I have witnessed the incredible talents and passion of our Council members, and Chairs and members of the National Standing Committees. The College's efforts to advance the standing of general practice in

Australia are significantly strengthened by the leadership qualities and specific areas of knowledge held by each of these members. In particular, I would like to extend my appreciation to Professor Nigel Stocks, Chair of Council, for his unwavering guidance and voice of reason; Dr Jennie Kendrick, Censor-in-Chief, for the key role she has played in reviewing the RACGP's Fellowship and Assessment Pathways; and Professor Claire Jackson, President, for representing the College with such pride, abundant energy and clear direction.

### RACGP in the media

The College continues to enjoy an active presence in the media, pursuing opportunities to articulate College positions, member views and advocacy efforts. A special thank you to key College spokespeople who

Dr Kathy Kirkpatrick, Lauren Cordwell, A/Prof Brad Murphy and Zena Burgess attending the NRF 20th anniversary celebrations in Canberra



graciously provided their time and knowledge to shed light on a number of issues affecting GPs.

### National office relocation

In August 2012, the National Office, National Rural Faculty, National Faculty of Aboriginal and Torres Strait Islander Health and the Victoria Faculty relocated to 100 Wellington Parade, East Melbourne. This exciting and positive development will enable us to continue to improve the support we provide to all members.

The College broke record membership numbers in January 2012, cementing the RACGP as the largest professional general practice organisation in Australia.



Members of the 53rd Council attend GP11 in Hobart



Zena Burgess, CEO, with members of the senior leadership team



Neil Greenaway

## Message from the Finance Audit and Risk Management Committee Chair

Members of the Finance, Audit and Risk Management Committee for financial year 2011–12 were: Mr Neil Greenaway (Chair and co-opted Councillor); Professor Claire Jackson (President); Professor Nigel Stocks (Chair of Council and SA&NT Faculty Chair); Dr David Knowles (Tasmania Faculty Chair); Dr Eric Fisher (past president and Life Member); Ms Joan Morgan (external representative with audit and risk management expertise); and Mr Mark Evans (external representative with IT expertise).

### Financial performance

The College's consolidated operating performance continues to be positive, the balance sheet position remains strong and the organisation maintains a strong cash position. During the financial year, the College purchased new national and Victoria faculty premises in East Melbourne, Victoria. Settlement took place in July 2012. The purchase was funded from cash reserves, bank facilities and proceeds from the sale of the former premises in South Melbourne.

### Internal and external audit

The College reappointed independent firm Protiviti as its internal auditor for a further period of 3 years. A 3 year internal audit plan has been developed and, as part of this plan, four reviews will be completed in 2012. 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 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.

The College maintains a detailed risk register which identifies and classifies key risks and allocates responsibility and actions to mitigate adverse outcomes. Recommendations and outcomes from internal and external audit reviews are recorded and actions monitored to ensure issues are appropriately resolved.

### Appreciation

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 Kathy Kirkpatrick (National Rural Faculty Chair) who stepped down as a committee member in October 2011. I would also like to acknowledge and thank the College's management team, in particular CEO, Zena Burgess, and Finance Manager, Sherryna Fung and her team.

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



# Member Services and Operations

The RACGP's membership is at the heart of all College activities. 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, characteristics 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 Faculty of Aboriginal and Torres Strait Islander Health, National Rural Faculty and National Faculty of Specific Interests.



# Membership overview

The 2011–12 financial year marked a significant milestone for the RACGP, with a record level of 19 352 Australian-registered GP members joining the College or renewing their membership. Our Australian-registered GP membership base grew twice as fast (6%) as the estimated growth of the GP population\* (3%) (see *Figure*). Our total membership base reached 21 542, including our ‘budding’ GP members (medical students, residents/interns and IMG Affiliates), as well as our overseas members.

It was an honour to acknowledge the longstanding support of 762 Life Members in 2011–12, an accomplishment achieved by GPs who have been members of the RACGP for more than 35 consecutive years. Remarkably, some 47 of these GPs have been members since the College was established in 1958 – a testament to the amazing dedication of GPs to the profession and the patients they serve.

The table provides an overview of the RACGP membership numbers in each state/territory faculty in the 2011–12 financial year.

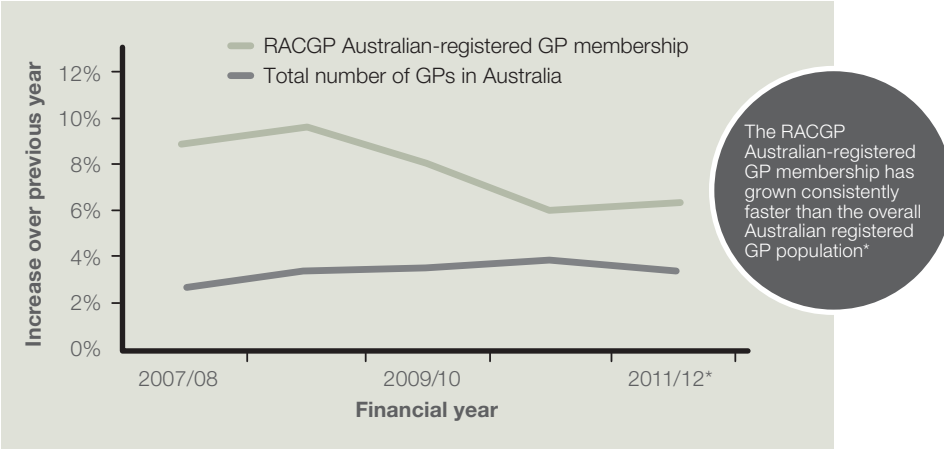
In 2012, the College focused on further building the membership value to its members. The membership package for Australian-registered GPs includes complimentary access to a number of educational services, in addition to savings on local and national College workshops. Drawing on feedback from members, we also launched an expanding suite of business resources to support members in running a practice.

While the core of the RACGP’s membership offerings are aimed at supporting members in delivering high quality and safe patient care, the College also expanded its Member Benefits Program, which supports the quality of life of members. New benefits include savings on private health insurance, convenient and competitive online foreign exchange services, savings on international hotel bookings, and other travel and insurance benefits.

We continued to seek member feedback regarding the College’s membership benefits and how we can further support members, as well as how we can better engage members in the College’s work. The Membership Advisory Committee, member focus groups and an online ‘specific interests’ survey provided valuable insights to these areas.

The RACGP continues to offer membership to future GPs in order to support their journey towards

	NSW& ACT	QLD	SA& NT	TAS	VIC	WA	Overseas	Total
<b>Fellow</b>	3699	2838	1178	340	2997	1193	766	<b>13 011</b>
<b>Member</b>	392	181	98	35	301	86	9	<b>1102</b>
<b>Registrar Associate</b>	645	465	236	68	444	157		<b>2015</b>
<b>Associate</b>	1424	858	370	116	1101	388	377	<b>4634</b>
<b>Affiliate</b>	205	221	62	115	128	49		<b>780</b>
<b>Total</b>	<b>6365</b>	<b>4563</b>	<b>1944</b>	<b>674</b>	<b>4971</b>	<b>1873</b>	<b>1152</b>	<b>21 542</b>



\* Total number of GPs in Australia is based on the GP headcount reported by the Department of Health and Ageing (DoHA). The 2011–12 headcount was estimated from historical data reported by DoHA

general practice. As part of our strategy to attract more students and junior doctors to general practice, the College released the first of many live webinars presented by Professor John Murtagh. The webinar allowed budding GPs across Australia the ability to hear and see Professor Murtagh as he shared three tricky general practice cases and valuable tips on diagnosis and examination. Video clips of the presentation were placed online to offer ongoing education to those who missed the webinar.

The College also continued to offer additional support to our Registrar members as they undertook their general practice training. Among a range of membership offerings in

2011–12, our registrar 'early bird' members enjoyed complimentary access to e-Therapeutic Guidelines as well as Australian Medicines Handbook Online. A record level of 2522 registrars chose to become members or continue their membership of the RACGP in 2011–12; a 13% increase on the previous year. It is pleasing to note that 507 of those registrars had progressed to Fellowship by 30 June 2012.

The RACGP continues to offer membership to future GPs in order to support their journey towards general practice.



Representatives from the RACGP Membership Advisory Committee. Feedback from members was integral in further building RACGP membership value



The RACGP conducted the first of many live webinars presented by Prof John Murtagh, who provided valuable tips on diagnosis and examination for RACGP 'budding' GP members





Professor Peter Mudge, Foundation Patron

## The RACGP Foundation – inspiring a healthier tomorrow

Australian GPs are at the forefront of community health, performing over 125 million general practice consultations each year.

Despite a steady undertaking of research within the primary healthcare field, significant investment is still required to support projects that aim to continually improve the standards and effective delivery of healthcare in Australia. The role of the Foundation, through its board and staff, is to seek donations, bequests and in-kind support through approaches to members of the College, corporations, government, trusts, foundations and other stakeholders including the wider community. By attracting and disseminating funds, the Foundation offers research grants, awards, scholarships and access to various projects which underpin the profession's commitment to continuous improvement.

Through the generous support of benefactors, the RACGP Foundation has seen a tremendous increase in funding for medical research. In 2011, the Foundation invested over \$100 000 in 24 research projects. In 2012, strategic partnerships and member support saw the Foundation increase this figure to over \$500 000 for member-led research projects across the country.



Through the generous support of benefactors, the RACGP Foundation has seen a tremendous increase in funding for medical research.

100 percent of all funds raised have gone towards supporting important medical projects and general practice research.

The Foundation would like to take this opportunity to sincerely thank RACGP members for their generosity and our partners for their support, as we continue to improve the quality of healthcare for people both in Australia and the Asia Pacific region.



Dr Sue English helping a child in Timor-Leste





Dr Liz Marles, Chair

## New South Wales and Australian Capital Territory

Thank you to our NSW&ACT members, staff and Faculty Board for your contributions to the College in 2011–12. The past 12 months have involved productive collaborations to ensure positive outcomes for primary healthcare in NSW and the ACT. The faculty has worked closely with government and other organisations, including NSW Health, on a number of programs such as the Connecting Care program, the NSW Rural Generalist Pathway and the NSW State Knockout Challenge, an Indigenous health initiative. Partnerships with divisions also continued, with many joint education activities being delivered.

In 2011–12 we welcomed new Faculty Board members, Dr Andrew Crossman, Dr Amy Ho, Dr Maha Qidwai and Dr Mark Lee. I'd also like to acknowledge fellow Faculty Board member Professor Simon Willcock, who stepped down as Chair of General Practice Education and Training this year after 6 years in the role. Simon has done a fantastic job overseeing the increase in general practice training numbers from 450 in 2006 to a projected 1200 by 2014.

A record number of almost 400 candidates sat the Fellowship examination in NSW and the ACT this year. The written examinations were completed online and the clinical component could not have been delivered without our team of over 360 examiners. The team also delivered a comprehensive program of examination preparation courses in both Sydney and Canberra. Thank you to all the wonderful examiners and staff who make the process as seamless as possible. The ACT Assessment Panel Chair, Dr Karen Flegg, stepped down from the role after the successful rollout of the 2012.1 OSCE examinations in Canberra. Karen has been active in

up-skilling a new cohort of quality assurance examiners for the ACT, as well as training a number of new examiners.

Celebrations for our new Fellows were held throughout the year, with 95 receiving their Fellowship at a ceremony in Sydney in November. We also joined Regional Training Providers in celebrations in Tamworth and Wagga Wagga.

During the year, we launched the very successful Twilight Update education series, giving members access to free CPD events held in partnership with divisions. Further Twilight Update events have been scheduled bi-monthly and an additional e-health stream is also being developed to support our members with the transition to the e-health environment. We continued hosting regular events, including medical receptionist courses and dermatology workshops in both Sydney and Canberra.

We also delivered an extensive education program for international medical graduates (IMGs) during the year, which included a new IMG mentoring program, consultation skill courses, a mental health workshop, an Aboriginal health workshop, clinical updates and procedural skills workshops.

**A record number of almost 400 candidates sat the Fellowship examination in NSW and the ACT this year.**



The Hon Tanya Plibersek and Dr Liz Marles at the World Health Day dinner, 2012



Twilight Update series 2012



Associate Professor Morton Rawlin, Chair

## Victoria

The Victoria Faculty has enjoyed a highly successful year and continues to pride itself on engaging with members, providing a quality educational program and seizing opportunities to network with peers.

In 2011–12, the faculty developed and delivered eight educational events. A key highlight was the delivery of the Everyday D&A conference, held in collaboration with the faculty's Drug and Alcohol Committee and the National Faculty of Specific Interests Addiction Medicine Network. Dermatology was another successful workshop, which saw over 150 GPs participating from across Victoria. The New Fellows Committee also presented the popular Starting a Private Practice workshop, an event that continues to garner much interest.

Collaboration was an ongoing theme over the past 12 months. The faculty worked with the University of Melbourne and the Australian Prostate Cancer Research Centre to present the Prostate Cancer and General Practice: A Multidisciplinary Approach workshop, and also with the Heart Foundation Victoria to co-host Motivational Interviewing: Empowering People with Cardiovascular Disease to make Vital Lifestyle Behaviour Changes.

In 2011, the New Fellows Committee piloted a MentorLink program, after the committee identified a lack of informal peer support for new Fellows in the general practice workforce. This resulted in the development of six groups, five of which were based in Melbourne, and one in regional Victoria. Each group was a mixture of registrars, new Fellows and more experienced GPs. The groups met regularly over a 6 month period. A review of the pilot found that the program assisted in establishing peer networks outside of daily practice and that it was beneficial to participants.

The groups also provided social, psychological and technical support, and allowed the opportunity for top-down and bottom-up learning. Due to the positive response to the pilot, the program will continue throughout the second half of the year.

The annual Victoria Faculty Fellowship and Awards ceremony was held in the grand ballroom of the Sebel Albert Park Melbourne. The ceremony celebrated over 90 newly ratified Fellows admitted to the Fellowship of the RACGP, with nine Life Member trophies also presented. The faculty was also proud to acknowledge its panel of examiners with the presentation of Life Examiner awards, recognising 20 years of service, and Long Service Examiner awards recognising 10 years of service.

The coming year is an exciting one for the faculty. We aim to continue to consolidate the growth of our membership, conducting events that will further their professional development and representing them in the growth of general practice in Victoria.

In 2011, the New Fellows Committee piloted a MentorLink program, after the committee identified a lack of informal peer support for new Fellows in the general practice workforce.



Everyday D&A conference



Victorian Fellowship and Awards ceremony at Sebel Albert Park Melbourne



Dr Eleanor Chew, Chair

## Queensland

Over the past 12 months the Queensland Faculty has collaborated and consulted with, and for, our members across a diverse range of issues and projects, achieving milestones, engendering collegiality and celebrating the diversity of our specialty along the way. I am enormously proud of the work we have done and the skills, talent, enthusiasm and generosity of all our members and staff who have contributed to the life of the faculty during 2011–12.

The faculty achieved record membership numbers during the past year, including continued strong representation within the National Rural Faculty. As our membership numbers have grown, so too has our direct engagement with members across a range of activities, including our Fellowship examination, formal support programs for IMGs, conference programs and the work of the Faculty Board. During this time, the faculty also welcomed more than 300 new Fellows and I look forward to their future participation in the work of the faculty over the coming years.

Education continues to be a strong focus of the faculty, and 2011–12 saw us collaborating with the North Queensland Sub-Faculty to deliver education regionally. I would like to thank Dr Paula Heggarty, Sub-Faculty Chair, and Dr Harry Jacobs, Corlis Travelling Fellow, for their leadership and hard work in the north. A highlight of 2011 was the recognition of Mackay based Paul Hopkins Medical Centre as the RACGP Queensland General Practice of the Year.

The faculty also hosted the fifth annual International Medical Graduate Forum in November. Developed to support our international colleagues during the settlement and transition phase to Australian general practice, the forum provided delegates the

opportunity for personal interaction with a number of agencies, including Medicare, the Australian Health Practitioner Regulation Agency and the Department of Immigration and Citizenship. The faculty's education support programs for IMGs have also continued to roll-out over the past 12 months, with dedicated modules now developed in support of each of the Fellowship examination segments. I would like to thank our Education Support Committee, led by Dr Nick Hummel, for their continued commitment to these programs.

Our Clinical Update Weekend celebrated its 55th year in 2012 and marked the occasion by moving venues from the Gold Coast to Brisbane. An interesting and robust clinical program attracted a record number of delegates. My congratulations and thanks go to Dr Rakesh Padarath, the faculty's Education Committee, and RACGP staff for their work in producing one of the highlight events of our 2011–12 calendar.

As Chair, I continue to work with the Faculty and sub-Faculty Boards to advocate and network on behalf of our members and general practice. The work of the next 12 months will build on the momentum achieved over the past year and I look forward to our continued work over the coming year.

The faculty achieved record membership numbers during the past year, including continued strong representation within the National Rural Faculty.

Delegates attending the 2011 International Medical Graduate Forum



North Queensland Conference dinner – Prof Claire Jackson, Dr Richard Kidd, Dr Eleanor Chew and A/Prof Barbara Jones







Adjunct Associate Professor Frank R Jones, Chair

## Western Australia

The Western Australia Faculty Board remains committed to the provision of quality education and advocating for general practice within Western Australia by providing professional leadership and collegiality. The past 12 months has seen the faculty reach target membership numbers in the early stages of the year. The Board has remained focused on developing and maintaining strong stakeholder relationships. We now have all Western Australia-based members of the various RACGP National Standing Committees (NSCs) on the Board. Members' views are discussed and debated: this information can then seamlessly be streamed to the NSC representatives for deliberation at a national level.

Responding to the needs of rural colleagues remains our focus. Although we have increased Board rural representation to five (22 members in total), there is still much work to be done. This year, our state manager Malvina Nordström and I visited members in Kalgoorlie to gain an understanding of local issues. Similar trips to Kununurra, Port Hedland and Broome are planned for later this year.

We met with five of the new Western Australia-based Medicare Locals and plan to meet with the remaining three in 2012.

The Board has ensured a College voice on all 14 Western Australia-based Health Networks, with appropriate feedback mechanisms in place. These networks are diverse, ranging from cardiovascular disease to trauma issues.

This year we formally responded to four major state-based initiatives; the Western Australia Chronic Health Conditions Framework 2012, Model of Stroke Care 2012, Western Australia Health Promotion Strategic Framework 2012–16 and the Western Australia Primary Care Strategy.

Educational events on offer at the faculty continue to expand and improve. College House in Perth has become the home of general practice in Western Australia and in 2011 provided over 50 individual education sessions to over 1100 GPs.

The provision of examination-related needs has remained central throughout 2011–12. Providing AMC preparation, Fellowship preparation (including specific events for IMGs), question writing sessions and examiner training for the OSCE has been an ongoing priority. To all educators and examiners, our heartfelt thanks.

Our Western Australia members remain our focus and I am grateful for their ongoing support. The Faculty Board has worked tirelessly and the faculty administration is second to none – my thanks to them all.

College House in Perth has become the home of general practice in Western Australia and in 2011 provided over 50 individual education sessions to over 1100 GPs.

CEMP workshop, Kununurra, 2011



Prof Max Kamien, Malvina Nordström and A/Prof Frank R Jones attend WA Faculty awards night, 2011







Dr David Knowles, Chair

## Tasmania

The successful partnership of an active Faculty Board and passionate, hardworking staff has effectively contributed to membership growth and expanded the profile of the College in Tasmania.

Engagement with Tasmanian Medicare Locals, the Tasmanian Minister for Health and other key stakeholders has allowed us to contribute to matters concerning mental health, after-hours care and general practice workforce issues, to name a few.

A highlight of the past year was GP11 – the Conference for General Practice. GP11 highlighted the dedication of many Tasmanian GPs and we acknowledge their participation in review of abstracts, delivery of workshops, providing main stage plenaries and enthusiastic attendance.

In 2011, the College sourced funding from the Department of Health and Ageing to support IMGs to undertake RACGP Fellowship in 2011 and 2012. In Tasmania, 19 grants were awarded. Working with a mentor, each IMG developed their own individual learning plan and the faculty sourced or developed resources to address their identified needs. We are delighted to announce that all grant recipients who sat the written component of the Fellowship examination in February 2012, passed.

The faculty calendar of events has been very full again this year. Our team has focused on a collaborative approach to delivery of a diverse range of quality education and collegial events. Partnerships with the Black Dog Institute, the Department of Health and Human Services, the University of Tasmania, and the Pharmaceutical Society of Australia, as well as local and interstate experts, have provided our members with a suite of learning and social opportunities that have proved invaluable.

A great number of successful events have been delivered throughout the past 12 months, including pre-examination workshops; the state-wide GP Lunchtime series; and the annual Women in General Practice Weekend retreat. Also well attended was College Connections, providing the faculty an opportunity to formally thank those members who generously contribute their time and expertise as Board members, examiners, PESCI panel members, committee members and mentors.

In closing, I would like to acknowledge the passing of two prominent members of our faculty: Dr Fergus Mitchell AM, a sought-after preceptor for a generation of young colleagues, and Dr Hugh Carpenter OBE, a champion of general practice across Australia and around the world.

In 2011, the College sourced funding from the Department of Health and Ageing to support IMGs to undertake RACGP Fellowship in 2011 and 2012.



New Fellows at GP11 in Hobart



GP Lunchtime series speaker, Andrew Wilkie MP, with Dr David Knowles and Dr Jo Graddon



Women in General Practice Weekend retreat participants enjoying Wineglass Bay, Tasmania



Professor Nigel Stocks, Chair

## South Australia and Northern Territory

2011–12 was a year of change and growth for the South Australia and Northern Territory Faculty. In February this year, the faculty exceeded the 2011–12 target for Australian-registered GPs and membership numbers continue to grow.

The SA&NT Faculty has continued to actively build and strengthen relationships with key stakeholders. Later in 2012 we will be introducing an inaugural workshop with SA Health and the Pharmaceutical Society of Australia to facilitate the sharing of knowledge and practices between pharmacists and GPs. The faculty also conducts practice visits to meet our members and discuss the role of the College, current health issues and any needs they may have of the College.

The faculty continues to engage in activities to attract and retain members and promote general practice as a career path for future doctors. For example, exhibiting at events such as the Rural Doctors Workforce Agency's 'Do it all ... Go Rural' career evening and at the SA Medical Careers expo.

During the past 12 months we continued to place a strong focus on providing support to IMGs and offered Pre-Employment Structured Clinical Interviews (PESCI) to IMGs looking to work in South Australia and receive limited medical registration. To further assist IMGs on their pathway to Fellowship, the faculty is running an Australian Medical Council (AMC) bridging course designed to rapidly improve candidates' professional knowledge in the areas required to pass the AMC examinations and for subsequent clinical practice. In 2011–12, support grants funded by the Department of Health and Ageing were again offered to IMGs to assist in their preparation for Fellowship examinations.

A refreshed and expanded General Practice Education program has been developed for 2012 and includes business management courses such as, 'How to run a successful practice (including new initiatives in general practice)' and 'The 7 habits of highly effective GPs', which bring further diversity to the existing program. The recent implementation of video conferencing technology also opens the door to providing professional development activities to Northern Territory and rural members in the future.

Another achievement for the faculty has been the development of the 'Why you need your own GP' flyer, which was developed in collaboration with the SA Ambulance Service. The flyer was recently rolled out nationally across all RACGP faculties.

The SA&NT Faculty looks forward to the coming year and the new challenges and opportunities it will bring.

The SA&NT Faculty continues to engage in activities to attract and retain members and promote general practice as a career path for future doctors.

SA&NT Faculty annual dinner and awards ceremony



Rachel Chen and Prof Nigel Stocks at the SA&NT Faculty Christmas Party, 2011



Associate Professor Brad Murphy, Chair

## National Faculty of Aboriginal and Torres Strait Islander Health

As I reflect on the past year, I am humbled and proud of the many achievements of the National Faculty of Aboriginal and Torres Strait Islander Health. Enabling GPs to provide culturally and clinically appropriate healthcare to their Aboriginal and Torres Strait Islander patients is one of the key drivers for the faculty.

Our membership is continuing to grow, and in the past 12 months over 2500 GPs have joined the faculty. Through its work the faculty is influencing approaches for:

- educating, training and assessing the skills and competencies of GPs
- developing standards and guidelines that provide best practice processes for identification and preventive care
- encouraging GPs to undertake cultural awareness and cultural safety training
- enabling the College to understand and incorporate Aboriginal and Torres Strait Islander cultural perspectives and practices
- fostering a greater awareness of the role of GPs in working with their patients and communities to optimise health outcomes.

The work of the faculty continues to be overseen by a board of Aboriginal and Torres Strait Islander GPs, GPs with extensive experience working with Aboriginal and Torres Strait Islander communities, community members and representatives from the National Aboriginal Community Controlled Health Organisation and the Australian Indigenous Doctors Association. In the past 12 months the faculty has held its first Board elections and faculty AGM, in addition to appointing its first Honorary Provost, Ms Mary Martin AM and faculty Censor, Dr Hung The Nguyen. A new education committee has also been established.

The faculty has worked extensively with College Council to identify Aboriginal and Torres Strait Islander artwork to be incorporated into the new College gown. A sash to be worn by Fellows who identify as Aboriginal or Torres Strait Islander has also been developed. Through this new gown, the RACGP pays its respects to Aboriginal and Torres Strait Islander communities across Australia and to the land on which GPs learn, teach and practise the art of medicine. Over the next 12 months the new College gown will be unveiled to all members.

The faculty has continued its active involvement in a range of national forums, including the Close the Gap Steering Committee and the Australian Medical Council Taskforce on Indigenous Health. The faculty has also contributed to the development of the National Indigenous Health Plan through participation in the roundtables hosted by the National Aboriginal and Torres Strait Islander Health Equality Council. I extend my appreciation to the Faculty Board and faculty staff on a great year of achievements.

Our membership is continuing to grow, and in the past 12 months over 2500 GPs have joined the faculty.

Faculty Chair and guests at the February 2012 Board meeting. (L-R) Jeff McMullen, Keith Fell, Vonda Moar-Malone, A/Prof Brad Murphy



Faculty Board members, staff and guests at the February 2012 Board meeting





Dr Kathryn Kirkpatrick, Chair

## National Rural Faculty

7568 National Rural Faculty members and 7568 unique stories ... listening to, learning from, and understanding the narratives of GPs living and working in rural and remote Australia has been a central focus of our work over the past 12 months.

The strength of the NRF lies in its membership base, and this year our members have been active in ensuring a strong and robust faculty, for both now and into the future. Members have diligently chaired forums, attended meetings, participated in working groups, written policies and curriculum, and represented the views of the profession to relevant stakeholders.

Reviewing and refreshing our Fellowship in Advanced Rural General Practice (FARGP) has been an important and timely undertaking for the faculty this year. We now have an updated contemporary qualification that caters to GPs no matter what stage they have reached in their professional life. We have streamlined the new FARGP requirements, making them even more relevant to GPs working in rural and remote Australia. We are also encouraging registrars to start the FARGP earlier in their training and to make the most of their rural experiences as they prepare for their Fellowship.

The NRF Faculty enjoys a good party, and our 20th anniversary celebrations in Canberra over the weekend of 20-21 April were a wonderful opportunity to reinvigorate our efforts for the next 20 years.

The faculty has continued to actively advocate for members and rural communities through increasing policy and advocacy initiatives. During the past 12 months we have provided submissions to the Senate and the Department of Health and Ageing and prepared a number of submissions to Health Workforce Australia. Representatives from the faculty meet regularly with key stakeholders to advocate for a more equitable deal for our rural communities and for GPs working in rural and remote Australia.

As we reflect on our 20 year history, I am proud to see the faculty thrive as a strong and vibrant entity, and I thank the Faculty Board, Rural Education Committee and faculty staff for their efforts this year.

The strength of the NRF lies in its membership base, and this year our members have been active in ensuring a strong and robust faculty, for both now and into the future.



NRF 20th anniversary gala dinner, Australian War Memorial, Canberra, 2012

GP Dermatology workshop participants – NRF 20th anniversary celebration weekend in Canberra, 2012



Dr Cameron Loy, Deputy Chair, NRF Board – Sharing rural GP stories workshop, NRF 20th anniversary celebration weekend





Associate Professor Morton Rawlin, Chair

## National Faculty of Specific Interests

The National Faculty of Specific Interests (NFSI) has seen solid growth in membership, interest areas supported and involvement in College activities.

Faculty membership has grown, both within existing specific interest networks and as a result of additional new faculty networks endorsed by Council, such as Hospital Medicine, Antenatal/Postnatal Care and Aged Care. Membership now exceeds 500 members and continues to grow as the year progresses.

In line with the increased areas of interest which are supported by the NFSI, networks that support key College priority areas provide a ready-made focus group to assist in informing policy and position development by the College, as well as keeping the wider College updated on emerging issues in areas of interest. Additionally, areas of practice that have historically been populated by GPs, such as hospital medicine, gained a forum to allow GPs operating within the hospital context to support and share their skills with other College members.

College Council endorsed networks operating as at 30 June 2012 are:

- Medical Education
- Child and Young Person's Health
- Sports Medicine
- Psychological Medicine
- Integrative Medicine
- Addiction Medicine
- Breast Medicine
- Refugee Health
- Sexual Assault and Domestic Violence
- Musculoskeletal Medicine
- Pain Management

- Hospital Medicine
- Custodial Health
- Antenatal/Postnatal Care
- Military Medicine
- Aged Care
- Diabetes.

During the past 12 months further development was made in determining the best avenue for providing a formal qualification in a specific interest area through the NFSI. The 54th RACGP Council approved the use of 'Diploma' for all specific interest related awards bestowed internally, after completion of a College endorsed curriculum and assessed by College selected peers, in May 2012. Council also endorsed military medicine to begin the process of curriculum development, with the view to offering an RACGP recognised diploma of military medicine within 3 years. Once fully developed and endorsed, this diploma will offer a pathway for recruitment and retention of military medical personnel beyond Fellowship and return of service and provide GPs and other RACGP members the opportunity to develop additional skills within this area of specific interest.



NFSI Board members and IMGs at the NFSI's face-to-face Board meeting, 2012

Membership now exceeds 500 members and continues to grow as the year progresses.



Dr Jim Antoniadis, Chair, Psychological Medicine Network, outlining his network's future objectives during the NFSI's face-to-face meeting in Melbourne



A/Prof Michael Fasher, Chair, NFSI Child and Young Person's Health Network, receives his award of Honorary Fellowship from Prof Claire Jackson at the GP11 Academic Session



## College Products

The RACGP Products Division is responsible for the commercialisation of products and services developed and produced by the RACGP and RACGP Oxygen Pty Ltd. The Products Division researches and develops the concepts that are cutting edge requirements for our members, general practice principles and their staff, and then works with other College departments to develop these products and services. The Division also works closely with other College departments to optimise existing products and services for both current and future markets.

The Products Division includes the Publications Department, which is responsible for the production of *Australian Family Physician*, the *check* Program, *Good Practice* and the production of publications on behalf of other College departments, such as the *National guide to a preventive health assessment for Aboriginal and Torres Strait Islander people* and the *Guidelines for preventive activities in general practice*.

## Services

### The Conference for General Practice

The RACGP offers a range of events and workshops throughout Australia with a focus on education and collegiality, with the College's annual conference the pinnacle of the RACGP events calendar.

GP11 – the Conference for General Practice – was an overwhelming success. 'Explore. Collaborate. Innovate.' was the overarching theme of the conference, which attracted close to 1000 delegates locally, nationally and internationally. The conference took place in Hobart at the Hotel Grand Chancellor in October 2011 and was a fantastic opportunity to celebrate advances in general practice while providing an ideal forum to learn from presenters and fellow attendees. Professor Richard Roberts, President of the World Organization of Family Doctors, delivered a powerful William Arnold Conolly Oration at the Academic Session, sharing his wisdom with new Fellows. He then opened the conference delivering the Stuart Patterson Lecture, 'We need better science and new technologies: We need family medicine'.

The exciting program had a strong focus on women's and children's medicine, innovations in education, telemedicine, clinician leadership development, informatics/e-health, Aboriginal and Torres Strait Islander health, the business of medicine, dermatology in practice and emergency medicine. The work of Dr David Knowles (Chair, Tasmania Faculty) and the GP11 committee ensured the conference was a truly memorable experience for all involved.

GP12 will take place in October 2012 at the Gold Coast Convention and Exhibition Centre in the heart of Broadbeach, Queensland. The

overarching theme of the 2012 conference is 'Leading primary care' and the academic program will revolve around clinical skills; chronic disease; education and training; e-health and the PCEHR; men, women's and children's health; skin and bones; and telehealth/business innovations. With a focus on practical skills to support daily practice, the conference will be a premier event in the general practice calendar.

### RACGP Oxygen Pty Ltd

RACGP Oxygen Pty Ltd (ROPL), established in 2010, is a subsidiary of the RACGP. Its purpose is to drive commercial revenue to the RACGP thereby building long term annuity income. This will be achieved through the delivery of innovations that support the implementation of high quality care in general practice. The current general practice environment has driven the focus toward e-health products and services.

In reviewing its success in January 2012, it was evident that an overlap existed between the commercial possibilities and the traditional work of the Policy, Practice and Innovation Division of the College – particularly the e-Health Department. To strengthen

the strategic leadership and ensure synergies that exist between RACGP and ROPL are optimised, RACGP CEO Zena Burgess incorporated the role of CEO of ROPL into her current responsibilities and Josephine Raw was appointed Deputy CEO ROPL in conjunction with her current position of General Manager, Policy, Practice and Innovation.

In its first 18 months, ROPL has delivered a number of highly successful projects and generated over \$1 million in revenue through contracts, delivering e-health active learning modules and partnerships to provide benefits for College members such as e-Therapeutic Guidelines and access to McGraw-Hill publications, PCS Sidebar and CAT. ROPL also prepared a report assessing IT capability of general practices and maintained a strong marketing presence at key primary care events.

A key project of the past 12 months has been the management of the National E-Health Transition Authority's 'e-Health Journey' display, arranging tours for over 1000 participants.





## Publications

### Australian Family Physician

*Australian Family Physician (AFP)* – the RACGP's flagship journal – is the highest circulating medical journal in Australia. Mailed each month to over 31 000 GPs in Australia and overseas, and almost 9000 Fellows from the Royal Australasian College of Physicians, *AFP*'s reach and ability to educate and inform health professionals is unrivalled in Australia.

The dissemination of *AFP* to both GPs and physicians – a joint initiative by the colleges with the aim of improving understanding and knowledge sharing between the disciplines – is still warmly embraced by both organisations.

The 2011 Medical Publishers of Australia readership survey showed that of all the controlled-supply medical titles that GPs receive, *AFP* is the most in-depth read medical journal and young GPs choose to read *AFP* over any other medical publication.

In 2011–12, *AFP* received over 300 submissions, published over 200 peer-reviewed papers and used the skills and generosity of over 250 reviewers.

*AFP* is proudly owned and has been wholly produced by the College for over 55 years.

### Good Practice

In 2011–12, *Good Practice* – the RACGP's monthly news magazine – covered topics that included telehealth, e-health, social media, risk management and business, and profiled the wonderful diversity of Australia's GPs. Highlights included interviews with Edward Zuckerberg (dentist and father of Facebook founder Mark Zuckerberg), emergency physician and social media expert Dr Mike Cadogan, and of special importance to Australian GPs, legendary Professor John Murtagh. *Good Practice* also

featured a timely budget-exclusive interview with the Minister for Health and Ageing, The Hon Tanya Plibersek and the Opposition's Peter Dutton.

### check Program

In 2011–12, the RACGP continued to produce its monthly independent learning program *check*. This important publication offers members a QI&CPD activity that is written and reviewed by expert clinicians. Topics included pain management, Aboriginal and Torres Strait Islander health, ischaemic heart disease and immunisation.

### An introduction to Aboriginal and Torres Strait Islander cultural protocols and perspectives

*An introduction to Aboriginal and Torres Strait Islander cultural protocols and perspectives* provides guidance to members and staff regarding appropriate and respectful behaviour with Aboriginal and Torres Strait Islander people, communities and organisations, to contribute to the improvement of their health and wellbeing.

### National guide to a preventive health assessment for Aboriginal and Torres Strait Islander people

The review and updating of the first (2005) edition of the *National guide to a preventive health assessment for Aboriginal and Torres Strait Islander people* was a joint initiative of the National Aboriginal Community Controlled Health Organisation and the National Faculty of Aboriginal and Torres Strait Islander Health. The National Guide is a practical resource intended for all health professionals delivering primary healthcare to Aboriginal and/or Torres Strait Islander people.





A woman with brown hair tied back, wearing a green scarf and a black jacket, is smiling as she applies a white bandage to the arm of another person. The background is a solid grey color. There are three white circles: two in the top left corner and one in the top right corner. The text 'Education Services' is written in a large, white, sans-serif font on the left side of the image.

# Education Services

The RACGP's vision is to ensure a 'Healthy Profession. Healthy Australia'. From an educational perspective, this vision is achieved by developing and maintaining the standards for all aspects of a GP's training and education across the lifelong journey of general practice. This includes undergraduate education, the early postgraduate years, registrar training in general practice, RACGP Fellowship and Assessment Pathways, and continuing professional development.

The Education Services Division has direct accountability for the provision of an exceptional education focused service to GP members and other stakeholders through effective, efficient and robust administration of the RACGP's Fellowship and Assessment Pathways and the Quality Improvement and Continuing Professional Development framework.

The Division operates by working in close partnership and assisting to coordinate the activities of the National Standing Committee – Education, the Board of Censors, the Board of Assessors and various project groups established to progress strategy development on behalf of the College and its Regional Training Providers.



Dr Jennie Kendrick, Censor-in-Chief

The Board of Censors and Board of Assessment play a critical role in ensuring that the standards of the RACGP's Fellowship examination and associated processes are maintained.

In 2011–12, the RACGP delivered two examination cycles with 1242 doctors successfully completing one or more segments of the Fellowship examination. In total, 1230 doctors were admitted to Fellowship in the past 12 months.

Conjoint examinations were held with the Academy of Family Physicians Malaysia, through which 32 doctors achieved Fellowship of the RACGP and with the Hong Kong College of Family Physicians, resulting in 23 doctors achieving Fellowship of the RACGP. This year marked the 25th conjoint graduation ceremony with the Hong Kong College of Family Physicians and the 31st conjoint graduation with the Academy of Family Physicians Malaysia.

A key area of focus for the Board of Censors during 2011–12 was to undertake a review of the RACGP's Fellowship and Assessment Pathways. Planning is underway for 2012–13 to introduce a range of improvements aimed at reducing the complexity of the current pathways to Fellowship while allowing for appropriate flexibility. Fellowship assessment modules will also be reviewed to ensure they reflect the evolving nature of general practice in Australia and enable increased flexibility while maintaining robust standards.

The successful introduction of the online format of the Applied Knowledge Test (AKT) and Key

Feature Problems (KFP) in 2011 was consolidated and built on in 2012, with additional centres available to candidates. Planning is also underway to enable the AKT to be more readily available, including in off-shore examination centres.

The Assessment Department has undertaken a review of administrative procedures with a focus on quality improvement in customer service delivery, including a move to online Fellowship examination enrolments, increased examination enrolment windows and significantly reduced timelines to release Fellowship examination results (8–4 weeks for the AKT examination).

As Censor-in-Chief I would like to thank the Board of Censors and Board of Assessment for their support, expertise and commitment to a high quality Fellowship assessment framework. I would also like to express my appreciation of the Assessment Department staff for the significant work they undertake to advise on and deliver our assessment processes. Finally, I would like to acknowledge our many dedicated examiners for their valuable contribution.

The Board of Censors and Board of Assessment play a critical role in ensuring that the standards of the RACGP's Fellowship examination and associated processes are maintained.

## Education and training

### Bi-College accreditation project establishment

The initial stages of making the accreditation of Australia's Regional Training Providers (RTPs) more purposeful for the RACGP, ACRRM, GPET and the RTPs began in November 2010 when RACGP and ACRRM Presidents met with RTP CEOs and RACGP senior management. An RACGP and ACRRM Accreditation Project were subsequently established to develop the conceptual framework for a College-led RTP accreditation framework, including both the accreditation process and associated governance structure. Project funding from GPET to commence a 12 month project to develop a Bi-College RTP accreditation framework is now available. Overseen by a Program Review Committee consisting of RACGP, ACRRM and two RTP CEOs, the new accreditation framework will be designed, piloted and implemented by June 2013. Underpinning the new model is a strong quality improvement and educational outcomes focus.

### Vocational Training Standards

Early in 2011, the RACGP and the Association of Chief Executives Vocational Training Standards Working Group was established to develop outcomes based standards for vocational training that could be aligned with standards set for all general practice education and training pathways. The proposed new standards are aimed at providing more flexibility for local delivery settings without change to the fundamental tenets or components of general practice vocational training as undertaken in the Australian General Practice Training program. The current RACGP Vocational Training standards (launched in 2005) have

been incorporated in the revised standards where applicable – as an outcome or an indicator – or in some cases as an activity that supports delivery on an outcome or indicator. Extensive stakeholder consultation will continue throughout 2012, including detailed transition planning aimed at introducing the new standards in early 2013.

### RACGP Curriculum for Australian General Practice

The revised RACGP Curriculum for Australian General Practice was launched in October 2011 at GP11. The new curriculum emulates the rapid changes in general practice, including the rise of e-health, multidisciplinary care, clinical governance, leadership, and quality and safety issues. The domains of general practice and the learning life of the GP continue to provide a robust framework for meeting the educational needs of our members. In addition, the review introduced sections based on training outcomes, reflecting contemporary approaches to education and competency based training.

### Quality improvement and continuing professional development

The 2011–13 RACGP Quality Improvement and Continuing Professional Development (QI&CPD) Program made impressive progress over the past 12 months. The new QI&CPD website has had over 610 000 page views and over 191 000 completed activities from over 500 accredited activity providers and 4600 accredited activities. The program recognises the importance of self-directed, self-recorded learning and has recorded over 5400 hours of education, which GPs have uploaded directly through the QI&CPD website.

Transition from divisions of general practice to the new Medicare Locals will soon be completed across Australia, and the College has been working closely with these organisations to ensure a smooth transfer of provider accreditation status and accredited activities to the new entities. Preparation for the 2014–16 QI&CPD triennium is also well underway. This year has seen the College actively seeking feedback from our members, educational providers and other stakeholders to capture key insights to help shape the future program.

### Australian Medical Council Bridging Program

The Australian Medical Council (AMC) Bridging Program has continued to provide value to participants throughout 2011–12. Three Multiple Choice Questions Series (at 10 weeks per series) were held in New South Wales and Queensland, with four clinical series (at 8 weeks per series) held in Queensland, New South Wales, Victoria and Western Australia. A total of 168 full time participants attended the courses. The College is also pleased to announce the addition of the South Australian Clinical Bridging Program, which commenced in May 2012. The AMC team is dedicated to increasing the quality and consistency of the bridging program around Australia through the delivery of a professional development day for medical educators.

### Certificate of Primary Care Dermatology

The Certificate of Primary Care Dermatology is a comprehensive course aimed at training 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 and is open to all GPs and general practice registrars. The certificate course includes online active learning modules, a dermatological surgery workshop and a clinical experience module. In the past 12 months, a total of 190 online modules were accessed and the November 2011 workshop was attended by 39 GPs.

## Clinical Emergency Management Program

The Clinical Emergency Management Program (CEMP) continues to attract strong interest, with 20 intermediate workshops and 15 advanced workshops held during 2011 and 2012 in various capital cities and rural locations across Australia. CEMP has been designed to build participants' knowledge, skills and confidence when responding to medical emergencies. Interactive workshops facilitated by a national team of highly trained intensive care paramedics are complemented by online activities. The revision of the intermediate program, which now includes meeting the basic life support and advanced life support training requirements for general practice registrars and RACGP Fellowship, has resulted in an increasing number of registrars undertaking the course. In the past 12 months, 952 medical professionals participated in CEMP workshops.

The CEMP CPR Train the Trainer workshops strive to increase the number of qualified trainers capable of teaching and assessing cardiopulmonary resuscitation in the general community. Following completion, participants are able to competently teach, assess and award CPR certification, which is of particular significance for rural and remote practices.

## gplearning

Available 24 hours a day, 7 days a week, *gplearning* provides online evidence based and peer reviewed education for primary healthcare professionals across all stages of the general practice journey. *gplearning* received an extensive upgrade and an improved version of the online learning portal was launched at GP11. The implementation of a new learning management system serves to provide primary healthcare professionals with a fast and responsive interface, user-friendly discussion boards for enhanced interaction with other learners and medical educators, and integrated learning resources and access to the QI&CPD activities calendar. It also outlines RACGP standards and guidelines.

In addition to launching a new and improved learning management system, *gplearning* released several new activities during 2011–12. These include Complex immunisation, Conventional versus complementary medicine, and the National Breast and Ovarian Cancer Centre Screening active learning module. Six 'Case of the month' forum discussions were also released during the year. Approximately 14 000 learners enrolled in an online learning activity, with around 8500 of these activities completed by June 2012.



## Fellowship

### Fellowship and Assessment Pathways review

College Council held its annual strategic issues day at the end of 2011, at which time a core component of discussion focused on opportunities to improve its Fellowship and Assessment Pathways. In response, the College is currently reviewing the Fellowship and Assessment Pathways in an effort to:

- reduce the complexity of pathways to Fellowship while maintaining flexibility to account for the diversity of clinical experience and training
- increase the robustness and transparency of assessment of international experience, training and qualifications
- increase support for IMGs through coordination of educational support and ongoing formative assessment to facilitate improved success rates for IMGs in progression to FRACGP
- increase the efficiency and effectiveness of administrative processes and resources.

Phased implementation of changes to the pathways will start during 2012 and will be accompanied by significant member and stakeholder communication.

### Improved educational service delivery

The College took numerous steps during 2012 to significantly improve educationally oriented service outcomes, including:

- the successful roll-out of the online AKT and KFP Fellowship examinations

- a move to online Fellowship examination enrolments
- a move to longer Fellowship examination enrolment windows better aligned to training terms
- significant reductions in timelines to release Fellowship examination results
- tailored Fellowship examination outcome emails direct to candidates
- improvements to exceptions processes and standard letters.

To further consolidate these improvements, the College will commence the phased introduction of a multi-channel first contact service delivery team. Over time, the new model will consolidate all member and stakeholder entry points into the RACGP (online, telephone, email, fax and mail) and feature a co-located team to provide first point-of-contact resolution on all enquiries.

### International Medical Graduate and Specialist Pathway 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 of the RACGP. The College remains committed to adequately supporting IMGs to attain Fellowship and acknowledges that deregistration has significant ramifications for the general practice workforce and communities, especially in rural and remote Australia.

During 2011–12, the College partnered with the Department of Health and Ageing to provide financial assistance grants to those IMGs most at risk of deregistration. The grants assisted IMGs to achieve and/or demonstrate progress towards RACGP Fellowship.

Over 300 IMG Fellowship Support grants to the value of \$3500 were made available to IMGs through avenues such as examination support workshops and publication materials. The College also offered 90 grants to the value of \$5000 for Specialist Pathway candidates (Category 2 and 3), to help them participate in Specialist Pathway Program training and assessment activities.

A woman in a maroon shirt is smiling and looking down at a patient's arm. The patient's arm is wrapped in a white bandage. The woman is holding the patient's hand. There are two white circular shapes in the top left corner of the page.

# Policy, Practice and Innovation

The RACGP champions and facilitates high quality general practice through the Policy, Practice and Innovation Division'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 College also provides 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 – Quality Care, 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

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

The RACGP *Standards for general practices* (4th edition) was launched in October 2010 at 'GP10'. Since then, a number of practices have been working towards becoming accredited against the 4th edition *Standards*. The Standards Business Unit has developed a communication strategy to support timely and effective information sharing between accreditation agencies, general practices and other stakeholders.

### Interpretive guide to the RACGP Standards for general practices (4th edition)

The National Faculty of Aboriginal and Torres Strait Islander Health has led the development of the second edition of the *Interpretive guide to the RACGP Standards for general practices* (4th edition) with project funding provided by the Commonwealth Office of Aboriginal and Torres Strait Islander Health. The guide is written for people working in Aboriginal Community Controlled Health Services to help them interpret the RACGP standards in the context of their local health service and achieve independent accreditation against the *Standards*.

### Remote health standards

The Remote Health Standards were developed through a partnership involving the Northern Territory Department of Health, the RACGP, the Australian Council on Healthcare Standards and Australian General Practice Accreditation Limited. These reflect the context and uniqueness of healthcare delivery to populations in remote Australia. Healthcare centres based in remote communities will be

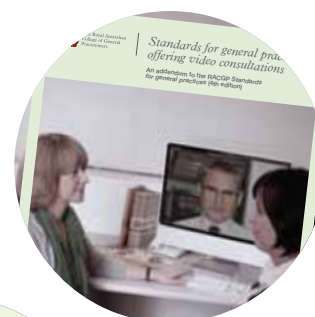
accredited against these standards, reducing the gap of health inequities between people of Aboriginal and/or Torres Strait Islander background.

### Standards for general practices offering video consultations

The *Standards for general practices offering video consultations* was developed by the RACGP as an addendum to the RACGP *Standards for general practices* (4th edition) with funding from the Commonwealth Government Department of Health and Ageing. The *Standards for general practices offering video consultations* was launched in October 2011 and a review of the *Standards* is planned for later in 2012.

### Computer and information security standards and workbook

The *Computer and information standards* were released in October 2011 and form comprehensive and up-to-date guidance on the fundamental requirements for protection of all practice data and computer networks. The standards provide both educative and practical assistance to ensure appropriate security measures are in place for the maintenance of effective levels of security and information assurance.



## e-Health

The RACGP e-Health Department has continued to work closely with our membership, the Commonwealth Government and key stakeholders to ensure that general practice is central to e-health reform. e-Health will have significant impact on the manner in which GPs practise in the coming decade. The future of modern healthcare services will be supported by GPs' use of e-health and related technology. The College believes that web-based technology is the future for GPs delivering efficient, high quality and safe healthcare to the community.

### The Personally Controlled Electronic Health Record (PCEHR)

The College supports the implementation of a shared electronic health record, recognising the benefits of improved information availability to health outcomes for the Australian population. As we work towards its release, the College has ensured GPs are well represented during the implementation process and actively advocates for high quality standards in sharing health information electronically.

The RACGP has been represented on both the Commonwealth Government Department of Health and Ageing (DoHA) and the National E-Health Transition Authority (NEHTA) committees. Submissions and representation include:

- rules and regulations of the PCEHR (DoHA)
- participation agreement for healthcare provider organisations and the PCEHR (DoHA)
- PCEHR implementation guides (NEHTA)
- NEHTA clinical reference groups.

The College also developed and delivered a 6 hour education package to provide GPs and practice staff with information on how the PCEHR will work in general practice, the role of healthcare identifiers and how best to incorporate a quality framework to improve and monitor the quality of data within clinical health records. This education program was offered in each state and territory and delivered by College members.

### Telehealth support services

To support DoHA's national telehealth initiative, the College established a telehealth support service to help members and to assist general practice in becoming telehealth ready.

While in many situations a physical consultation will be the preferred option, there are scenarios where a video consultation is clinically justifiable and will enable more convenient and accessible healthcare without compromising patient safety.

The service provides advice, support and education on video consultation set-up, popular technical solutions, practice workflows around video consultations, and establishing communication networks between GPs and other health professionals.

In addition to the RACGP *Standards for general practices offering video consultations*, the College has a range of resources available, including templates that can be adapted to assist GPs and practices in undertaking video consultations.

The service will also provide information about online education and workshops on video consultations, which will be delivered at GP12 in October 2012.

### Implementation guidelines for video consultations in general practice (3rd edition)

This latest edition of the video consultation guidelines were updated in June and include information on telehealth MBS item numbers and an expanded section on change management that covers booking in a patient, information for the patient, staffing and training, keeping practice in line with current processes, test calls, billing and what happens after a consultation.

A new section on considerations for viable telehealth business models has been included, which looks at several scenarios including GPs; practice nurses and Aboriginal health workers who provide clinical support to patients on behalf of a GP; residential aged care facilities; and the long term outlook once the government's financial incentives have ended.

The technical chapter has been updated to include software and hardware options for general practices to consider.





## Policy and practice support

### Advocacy

As Australia's largest professional general practice organisation, representing over 21 500 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 extends to government. The College continues to advocate for general practice on a range of clinical, professional and business issues that influence the capacity of GPs and their practice staff to provide safe, high quality healthcare.

Our advocacy work involves identifying and understanding the issues that most affect our members and their patients, lobbying federal and state governments and responding to governmental inquiries and submissions. The College also represents the interests and needs of our members on industry groups such as United General Practice Australia. In 2011–12, the College proactively advocated to government and/or responded to governmental enquiries and submissions on a range of issues including:

- funding for general practice, including changes to MBS item numbers, new Practice Incentives Program (PIP) funding streams and point-of-care testing
- general practice as the 'medical home'
- reduced red-tape for the Pharmaceutical Benefits Scheme (PBS) and the MBS
- after-hours care arrangements
- Medicare Locals
- general practice mental health funding and access to allied psychological services
- chronic disease management in general practice

- aged care and dementia
- registration standards and standards for technology based consultations
- rural and remote medicine
- non-medical practitioner prescribing
- doctors' health programs
- Professional Services Review scheme
- general practice infrastructure grants
- funding for pathology and diagnostic imaging
- PCEHR and e-health
- telehealth
- quality and safety of patient care
- IMGs
- Aboriginal and Torres Strait Islander health
- rural general practice training.

### Practice support

The RACGP provides timely and accurate responses to enquiries as part of a range of services offered to members. Enquiries also provide data to support the continual update of practice information and resources available to College members. New resources developed during 2011–12 included *Starting a medical practice*, *Closing a medical practice*, the *Management of health information in general practice*, the *Employee guide* and the *Employer guide*. Resources currently being updated include the GP Management Toolkit (consisting of 11 business modules) and the RACGP MBS Fee Summary. Full of contemporary, relevant information on practice management, these publications will help GPs negotiate the increasingly complex general practice business environment.

### Pandemic and disaster planning and resources

The College continues to position itself as a key organisation in responding to pandemic and disaster situations. While general practice teams play a crucial role in responding to outbreaks of infectious diseases and natural disasters, there is currently a lack of quality information and systems in primary healthcare for pandemic and disaster management. Given this, the College has actively explored potential funding to develop appropriate resources and tools for general practice to effectively manage pandemics and disasters and has successfully secured project funding from DoHA. This funding will enable the College to review current strategies in primary healthcare for pandemic and disaster management, convene a national workshop and develop and disseminate an online Pandemic and Disaster Management Toolkit to members.



## Quality care and clinical improvement/guidelines

The College has a long and proud history of leading the primary care quality agenda and supporting its members in their pursuit of excellence in patient care and community service. The College produces guidelines and other resources to assist GPs in delivering the highest quality of healthcare possible.

### Guidelines for preventive activities in general practice

The majority of the leading causes of death and disability in Australia are preventable or able to be delayed by early treatment. The RACGP's *Guidelines for preventive activities in general practice* (the 'red book') provides GPs and their practice teams with an easy-to-access, practical and succinct resource that conforms to the highest evidence based standards. A revised and updated 8th edition is being completed by a taskforce of GPs and experts and will be launched at GP12.

### Diabetes management in general practice: Guidelines for type 2 diabetes

General practitioners continue to provide the majority of medical care to people with type 2 diabetes. The RACGP, in partnership with Diabetes Australia, released the 17th edition of the *Diabetes management in general practice: Guidelines for type 2 diabetes*. 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.

### Supporting smoking cessation: A guide for health professionals

There is sound evidence to suggest that smokers are more likely to successfully quit with the help of their

GP or other health professional. This updated guide incorporates a number of significant new developments in both the science and practice of cessation support, providing health professionals with a valuable resource to help patients keen to stop smoking.

### Clinical indicators for general practice

The College has undertaken a project to identify and develop a set of indicators that deal exclusively with the safety and quality of clinical care provided by Australian general practices. The Clinical Indicator Taskforce finalised a dashboard set of 22 indicators that reflect a snapshot of the core services general practices provide on a daily basis. The selected indicators are supported by evidence, important for safety and quality, and will have minimal administrative burden on GPs and practices. In February 2012, College Council endorsed the dashboard set for consultation and piloting in general practice. It is envisaged practices will use the clinical indicators on a voluntary basis to monitor and improve the quality of their clinical services.

### Mental health

The College continues to be involved in a number of programs in the mental health service sector – an important area for the Australian healthcare system.

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 GPs' enquiries within 24 hours via telephone, fax or webmail. This year, the College developed a new website and marketing materials which have made the service more efficient and improved access for members.

The General Practice Mental Health Standards Collaboration (GPMHSC) strives to ensure optimal mental health for the Australian population through ensuring high quality standards for GP education and training in mental health. The College has also facilitated 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 College is a member of the Mental Health Professionals Association (MHPA), a collaborative group of four key professional groups involved in mental healthcare. In 2012, the College facilitated the work of the MHPA by providing the Chair and secretariat services for the association. The College 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 provides GP representatives to professional stakeholder groups in areas that include health policy, guideline development and health service strategy. By providing representation to external organisations, the College ensures appropriately trained and experienced GPs provide a professional voice to promote general practice and the priorities and overall objectives of the College. Over 160 invitations were made to the College over the past year requesting representation on various groups, panels or committees. 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, the World Organization of Family Doctors and the General Practice Data Governance Council. Thank you to the many GPs across Australia who generously gave their time to represent the College.

### Endorsement of external clinical guidelines and other resources

The College receives a large number of requests to endorse clinical guidelines and other products for use in general practice. The National Standing Committee – 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. Guidelines endorsed by the College are published on the RACGP website.

### John Murtagh Library

For almost 40 years the library has provided high quality professional services and specialist resources to support College members in their clinical work, as well as their educational and research pursuits. The number of web-based ‘self-service’ resources continues to expand and over the past year much development work has been undertaken to update content on the library’s web pages and trial new databases and tools.

Resource and service enhancements include:

- the addition of new e-books covering a range of subject areas (including significant expansion

of the e-book collection on the AccessMedicine platform, which also provides access to a growing number of videos, images and lecture notes)

- development of a resource portal for refugee and migrant health
- updating the web guides and tutorials to reflect changes to resource interfaces and functionality
- a new customised DynaMed tutorial
- inclusion of links in the library’s online catalogue to numerous Open Access resources.

### Research

The RACGP promotes and supports high quality research as a core aspect of general practice through the work of its National Standing Committee – Research (NSC-R) and the National Research and Evaluation Ethics Committee.

The NSC-R provides advice and direction to College Council on matters related to research. It has advocated for improved research capacity within general practice through its submission to the McKeon Strategic Review of Health and Medical Research in Australia. It has also provided input to various other College position papers on infrastructure and funding.

The NSC-R continues to advocate for career support for general practice researchers and the development of general practice research capacity in Australia. It also promotes critical thinking and research skills as central components of the RACGP curriculum and training. Research is essential to improving the quality of care for Australian patients and ensuring that GPs provide a service that is both clinically and cost effective.



# Awards and honours



## RACGP awards and GP honours

### Rose-Hunt Award 2011

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

**Dr Janice Bell, WA**



"Dr Bell has been a passionate advocate for the College and for general practice throughout the duration of her career in medicine. She is a true leader, never ceasing to inspire with her strategic insight. She is a most deserving winner of the 2011 Rose-Hunt Award."

*Professor Claire Jackson, RACGP President*

### GP of the Year Awards 2011

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 Jennifer Wray, NSW**



"I love being a GP. I love feeling connected to my practice team, our patients and the community. This is such an unexpected honour."

*Dr Jennifer Wray, General Practitioner of the Year*

### **General Practice Registrar of the Year** **Dr Sarah Nakhel, NSW**



"I am honoured and humbled to be the recipient of such a prestigious award. I feel blessed to have been mentored by an inspirational and dedicated group of general practitioners and given the opportunity to work with colleagues and patients who give young, passionate doctors the opportunity to not only thrive clinically and academically, but more importantly, make a positive contribution to the community in which they serve."

*Dr Sarah Nakhel, General Practice  
Registrar of the Year*

### **National General Practice of the Year** **Latrobe Family Medical Practice, TAS**



"It is a great honour to receive this award and a true testament to the hard work and genuine passion every member of the practice brings to their role each day."

*Dr Geoff Shannon, co-principal at  
Latrobe Family Medical Practice*

### **General Practice Supervisor of the Year** **Dr Peter Sharp, ACT**

#### **Victoria General Practice of the Year** **Westcare Medical Centre**

#### **South Australia General Practice of the Year** **Montague Farm Medical Centre**

#### **New South Wales General Practice of the Year** **Lighthouse Surgery**

#### **Tasmania General Practice of the Year** **Sorell Family Practice**

#### **Western Australia General Practice of the Year** **North Street Medical Centre**

#### **Queensland General Practice of the Year** **Paul Hopkins Medical Clinic**

## Monty Kent-Hughes Memorial Medal 2011

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

### Monty Kent-Hughes Memorial Medal

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

**Dr Anne Kleinitz**  
(2011.2 FRACGP examination)

## National Rural Faculty Awards 2011

### The Brian Williams Award

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

### Associate Professor Bruce Harris, NSW



"I am really pleased to receive this award, although I accept this honour together with the many rural doctors, both past and present, who have long advocated for rural health reform and who have worked tirelessly to make a difference for rural communities."

*Associate Professor Bruce Harris  
Brian Williams Award*

### Medical Undergraduate Student Bursary

The 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.

### Sarah Devereux, WA



### Rural General Practice Registrar of the Year Award

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

### Dr Mehdi Sanati Pour, VIC

## RACGP Honour Board 2011

### Honorary Fellowship

Adjunct Associate Professor Alan Michael Fasher, NSW

Dr Nathan Pinski, VIC

### Honorary Membership

Mr Anthony Parsons, VIC

William Arnold Conolly Orator

Professor Richard Roberts, USA

## Australia Day Honours 2012

### Member of the Order of Australia

Dr Jill Benson (RACGP Associate), Adelaide, SA

For service to medicine through contributions in the field of mental health, particularly for refugees and people seeking asylum, and to the Indigenous community in South Australia.

Dr Grahame Deane (RACGP Fellow), Gunnedah, NSW

For service to medicine in the Gunnedah region and to professional associations, particularly the Australian Divisions of General Practice.

Dr Rodney Pearce (RACGP Associate), Beulah Park, SA

For service to medicine as a general practitioner, through contributions to national medical organisations, and to education.

### Medal of the Order of Australia

Dr Appupillay Balasubramaniam (RACGP Associate), Homebush, NSW

For services to the Hindu community in Australia.

Dr Ernest Cramond (RACGP Fellow/Life Member), Clayfield, QLD

For service to medicine as a general practitioner and through the Australian Medical Association.

Dr Kerry Moroney, Narrabri, NSW

For service to rural medicine, and to the community of Narrabri.

Dr Kim Tee Ong, Dalkeith, WA

For service to the rural community of Mandurah, and to medicine as a general practitioner.

Dr Leslie Woollard, Moree, NSW

For service to medicine in rural and remote areas of New South Wales.



## Queen's Birthday Honours 2012

### Member of the Order of Australia

#### **Dr Thomas Rex Henderson, Subiaco, WA**

For service to rural and remote medicine in Western Australia as a paediatrician and neonatologist, to Indigenous health and welfare, and as a mentor.

### Medal of the Order of Australia

#### **Dr Don Maxwell Bowley (RACGP Fellow), Mount Isa, QLD**

For service to medicine through the Royal Flying Doctor Service.

#### **Dr Catherine Howell (RACGP Fellow), Gilberton, SA**

For service to medicine, particularly in the field of mental health, and to professional organisations.

#### **Dr Johanna Kovats (RACGP Associate), Crookwell, NSW**

For service to medicine in rural and regional New South Wales, particularly in the area of women's health.

#### **Dr Harold Lane, Beaumont, SA**

For service to medicine as a rural general practitioner, and to the community of Balaklava and district.

#### **Dr Alice MacLennan, St Georges, SA**

For service to medicine, particularly in the area of women's reproductive health, and through roles with professional organisations.

#### **Dr Neville Rothfield (RACGP Associate), Newcastle, NSW**

For service to paediatric medicine in the Newcastle region and to community health through the Broadmeadow Medical Centre.

#### **Dr Keith Whish (RACGP Fellow/Life Member), Inverell, NSW**

For service to medicine as a general practitioner, and to the community of Inverell.

#### **Dr Philippa Whish, Inverell, NSW**

For service to medicine as a general practitioner, and to the community of Inverell.

## RACGP research grants, scholarships and award winners 2011

### **Chris Silagy Research Scholarship**

**Dr Karyn Alexander, Professor Danielle Mazza**

The development of an intervention to improve the delivery and uptake of preventive healthcare for young children.

### **Family Medical Care, Education and Research Grant**

**Dr I-Hao Cheng, Professor Grant Russell, Dr Sayad Wahidi**

Rights of passage: Refugee access to Australian general practice.

**Dr Milton Sales, Dr Parker Magin**

Referrals to rapid access transient ischaemic attack and minor stroke clinic: A pilot of a trial of improved triage.

**Professor Danielle Mazza, Ms Kerry Hampton**

Informing the development of a new model of care to improve the fertility awareness of sub-fertile women in primary healthcare.

### **Rex Walpole Travelling Fellowship**

**Dr Tania Winzenberg**

Travel to the United Kingdom for International Primary Care Research Leadership Program.

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

**Dr Oliver Frank, Professor Nigel Stocks, Dr Paul Aylward**

Increasing prevention, detection and treatment of osteoporosis through automated opportunistic reminders to patients, general practitioners and practice nurses.

### **RACGP Research Grant for a Pilot Study**

**Dr Kathleen Potter, Associate Professor Christopher Beer, Professor Leon Flicker**

De-prescribing in frail older people: A randomised control trial.

**Dr Oliver Frank, Professor Nigel Stocks, Dr Paul Aylward**

Acceptability and sustainability of automated production of pre-consultation patient prevention summary and reminder sheets: Pilot study.

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

**Mr Tejas Deshmukh, Dr Penny Abbott, Professor Jennifer Reath**

The importance of socio-economic disadvantage in the calculation of absolute cardiovascular risk in Aboriginal and Torres Strait Islander peoples.

### **Best Research Article in Australian Family Physician Award**

**Dr Jenny Bocquet, Dr Tania Winzenberg, Dr Kelly Shaw**

Epicentre of influenza: The primary care experience in Melbourne, Victoria.

### **Alan Chancellor Award**

**Dr Elaine Leung**

Community based rapid transient ischaemic attack (TIA) care: COMBAT stroke. A pilot model of care.

### **PWH Grieve Memorial Award**

**Dr Esther Belleli**

Undertake postgraduate unit at Monash University towards Master of Public Health.

### **Peter Mudge Medal**

**Associate Professor Marie Pirotta**

Patient's use of St John's wort: An indicator of unmet needs.

### **Charles Bridges-Webb Memorial Award**

**Dr Jo-Anne Manski-Nankervis, Dr John Furler, Dr Ralph Audehm**

Assessment of risk factors associated with avoidable hospital admissions of patients with type 2 diabetes mellitus: Patient experience and management in primary care.

### **Iris and Edward Gawthorn Award**

**Dr Edwina Pritchard**

For the general practice registrar who achieves the highest score on the cardiovascular and respiratory components of the Fellowship examination over the 2011 calendar year.





Healthy Profession.  
Healthy Australia.



# SUPPORTING THE RACGP FOUNDATION

Millions of dollars are needed to make a significant difference in improving the standards of healthcare in Australia. The Royal Australian College of General Practitioners (RACGP) Annual Report is a reminder of the many projects and programs the College delivers to make this happen and we need your support to continue to expand this activity.

By supporting the RACGP Foundation through a donation or a bequest you will be improving the future of general practice in Australia. Your donation means funds will be available to support projects and research identified as fostering a positive change in general practice.

## WHY IS GENERAL PRACTICE RESEARCH IMPORTANT?

- General practitioners are the first point of contact for most patients
- 83% of the Australian community visit a general practitioner each year
- Most illnesses are treated in general practice such as depression, asthma, hypertension and arthritis.

**The vast majority of illnesses are managed in primary healthcare settings** and research is essential to improving the quality of care for Australian patients and ensuring that primary healthcare provides a service that is both clinically and cost effective.

Much of the evidence required by primary care providers can only be obtained by research in primary care involving general practitioners and their patients.

## A HIGH RETURN ON YOUR MEDICAL RESEARCH INVESTMENT

**Donations to the RACGP Foundation are used to fund projects and research** and your support, whether it's \$20 or \$2000, will make a valuable contribution. By making a donation, you'll be investing in crucial, high impact medical research. All donations of \$2.00 or more are tax deductible.



[www.racgp.org.au/foundation](http://www.racgp.org.au/foundation)



“My wife, Dr Jill Rosenblatt and I have donated to the RACGP Foundation and we encourage RACGP members to consider a donation as well. The advancement of quality healthcare in Australia relies on encouraging more evidence-based research by our RACGP members. This year over \$500 000 in grants were made available by the RACGP but with 65 applications this year alone, more funding is necessary to meet this growing demand. Join us in supporting the work of the RACGP Foundation.”

Professor John Murtagh

# DONATION METHODS



Visit the website at  
**[www.racgp.org.au/  
foundation/donate](http://www.racgp.org.au/foundation/donate)**



Donate over the phone by  
calling **1800 331 626**



Send a **cheque**  
or **money order**, which  
can be made out to:  
RACGP Foundation  
PO Box 217  
East Melbourne VIC 8002

**THANK YOU FOR  
YOUR ONGOING  
SUPPORT TOGETHER  
WE CAN MAKE A  
DIFFERENCE IN  
GENERAL PRACTICE.**

## RACGP FOUNDATION DONATION FORM

Title	First name	
<input type="text"/>	<input type="text"/>	
Surname		RACGP no.
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Street address		
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- ☐ I wish to **donate** to the RACGP Foundation
- ☐ I wish to leave a **bequest** to the RACGP Foundation

### Bequest

The RACGP Foundation also provides an opportunity to support the College through the provision of a memorial gift in your will through a bequest.

- ☐ I would like an RACGP Foundation representative to contact me, so I can learn more about this opportunity.



### Donation

#### Amount

\$50  \$100  \$250  \$500  \$1000

Other amount

(Donations over \$2 are tax deductible)

\$

**Cheque/Money order** (made payable to RACGP)

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