

CPMC News July 2016

WINTER IS HERE IN CANBERRA



Universal Health Care: Top Election Priority

After an extended period of counting the Coalition has a 76 seat majority. On Tuesday 12 July the National MPs and Senators met in Canberra to discuss their agreement with the Coalition as the new government begins to take shape. While each political campaign is different, there is always a focus on health care. The Government must now move swiftly to ensure equity in access across the primary, acute, aged and disability sectors by making system reform a priority within the context of consistent strategic policy development. CPMC recommends the Government also includes a decision to lift the freeze on Medicare rebates, properly funds the new Primary Health Networks in the longer term and makes mental health care a priority, especially in terms of enabling access and equity for people with mental illness across the care systems. However most importantly as a priority measure, the Government must continue to fund the Specialist Training Program and open up new areas for trainees in non-hospital settings across Australia. CPMC has requested this matter be placed on the priority listing for first briefings.

This edition of CPMC News aims to provide members with an update on government relations, Ministerial activity, workforce issues, safety and quality updates, regulation and interesting issues.

Angela Magarry, CEO

Upcoming Events

- ★ **SYDNEY 18 August 2016:** CPMC Members Meeting and Ministerial Address
- ★ **MELBOURNE 25 August 2016:** National Training Survey – Health Workforce Principal Committee
- ★ **MELBOURNE: 9 November 2016:** National Health Summit on Obesity (RACGP)
- ★ **MELBOURNE: 10 November 2016:** CPMC Forum and Board meeting (RANZCOG)



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The Healthcare Policy Platforms – ALP and Coalition Outlined

The positions held by the major parties in relation to health care frame how the Government and Opposition debate policy. The biggest difference is the ALP said it would lift the freeze on Medicare rebates, while the Coalition will extend the freeze on the indexation of rebates by a further two years in a measure to save \$925M.

The **Australian Labor Party** platform announced it was focussed on delivering 100 positive policies. In health it would establish a permanent Australian Healthcare Reform Commission to assist all levels of government to continuously improve the healthcare system; restore the National Health Reform Agreement for four years at the originally agreed funding formula of 50% of growth in costs based on the Nationally Efficient Price; provide additional support to jurisdictions to reduce waiting times for elective surgery and in public hospital emergency departments. Other policies included focussing on areas of growth and community interest such as dementia care, drug policy, and palliative care. Their approach to health on health can be found at:

http://www.100positivepolicies.org.au/#policy-cat-making_health_our_number_one_priority

The **Liberal Party of Australia** announced prior to the election being called that an additional \$2.9 billion in public hospitals funding would be provided over four years which represented a 6.5% increase per annum, delivered through an agreement with the states and territories that would put a focus on patient outcomes particularly in the areas of chronic and complex needs. This policy can be found at: <https://www.liberal.org.au/our-plan/world-class-healthcare>

A new focus area is the **Health Care Homes Initiative** which is aimed at better coordination of comprehensive care for chronically ill persons. This is a fresh approach to what was previously developed as models of coordinated care however in this case, health care homes will have the GP as the central coordination point for all medical, allied health and out-of-hospital services required by chronically ill persons on an ongoing basis. This is to ensure better management of their conditions with an emphasis on keeping them out of hospital. From 1 July 2017 65,000 Australians will initially participate in the program at approximately 200 practices across Australia, ahead of a full roll-out. Find out more at: www.health.gov.au/internet/ministers/publishing.nsf/Content/health-mediarel-yr2016-ley021.htm

SUPPRT FOR RURAL SPECIALISTS IN AUSTRALIA

★ **New CPMC Sub-Committee:** CPMC has established a new governance structure to support the new SRSA funding arrangement, chaired by Professor Lucie Walters.



Professor Lucie Walters, PhD, is a GP-obstetrician in Mount Gambier, SA. She is Associate Professor of Rural Medical Education at Flinders University. She leads the longitudinal integrated community-based Parallel Rural Community Curriculum (PRCC). She is President of ACRRM and a South Australian State Clinical Senator. She was instrumental in the development of the only intern training program in rural South Australia. Her research interests include work-integrated learning, adult education pedagogies, rural training pathways, and rural health service models.

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★ **New Rural Funding Agreement:** The Australian Government and CPMC have signed a three year funding agreement to provide new funding for rural specialists CPD and upskilling. As part of the transitional arrangements for the RHCE program, the new SRSA will build upon the existing infrastructure and services, but grow and modernise to reflect new ways of learning.

I am pleased to be able to introduce the staff located at the Royal Australasian College of Physicians who will work with Professor Walters and CPMC to deliver the SRSA grant funding arrangements.

Ms Sarah Srikanthan, SRSA Project Officer



Sarah has been in this role for over a year and enjoys the diverse nature of the work. She provides administrative assistance to the SRSA Program Manager to support the Committee of Presidents of Medical Colleges administer the program. Being involved in the SRSA Program has given her a renewed appreciation for the many challenges rural and remote specialists encounter and how the Program is in a privileged position to help alleviate some of these challenges. Sarah works three days per week and on her days off she is busy studying for her Master's in Counselling. She enjoys spending time with her two small children as well as reading and being outdoors.

Mr Bernard Bucalon, SRSA Program Manager



Bernard Bucalon has just started in the role, taking over from the previous RHCE Program Manager, Mike Davidson. He is excited to build on the successful RHCE program, particularly expanding the online CPD learning platform for rural and remote specialists. Bernard has been working in medical education for over five years, conducting research, designing and developing self-paced/facilitated online courses, as well as consulting on technology projects. He enjoys listening to podcasts, computer programming, and leading the work lunchtime soccer team to victory.

The website www.ruralspecialist.org and regular news updates will continue but there will be some modernisation to the website and a series of grant funding rounds released under the agreement, you can expect the first round to be announced in October.

AUSTRALIA'S NEW CHIEF MEDICAL OFFICER ANNOUNCED

Australia's chief medical officer Professor Chris Baggoley will retire at the end of this week, and the role will be taken up by Austin Health chief executive Professor Brendan Murphy on October 4. CPMC Chair has forwarded his warm congratulations.

Previously the principal medical adviser to the Department of Health's strategic policy and innovation division Dr Tony Hobbs has been promoted to deputy chief medical officer and will act in the role until Professor Murphy commences.

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Professor Brendan Murphy has received warm congratulations from CPMC and has indicated he is looking forward to working with us in the future.

The CMO is the principal adviser on medical matters to the minister and the department, as well as the head of the Office for Health Protection. Prof Murphy (pictured) is a professorial fellow of University of Melbourne and also holds fellowships with the Royal Australian College of Physicians and Australian Institute of Company Directors. He has previously held positions as CMO and director of nephrology (kidney health) at St Vincent's Health.

He sits on the boards of the Florey Institute of Neuroscience and Mental Health, Olivia Newton-John Cancer Research Institute and the Victorian Comprehensive Cancer Centre, while acting as independent chair of Health Services Innovation Tasmania. Welcome to CPMC!

AHMAC: Health Workforce Principles Committee Joint Forum with CPMC

The Australian Health Ministers' Advisory Council (AHMAC) requested that the Health Workforce Principal Committee (HWPC) provide advice on the implementation of recommendation 7(a) of the Review of Medical Intern Training, Final Report which was: *Identification of requirements for, and possible approaches to, a national training survey to capture ongoing performance data.*

CPMC has continued to progress strategic engagement with key stakeholders and has partnered with NSW Health as lead agency for HWPC. The workshop will be held on Thursday 25 August 2016 at the Parkroyal, Melbourne Airport. Key contact is Liz Martin (Limart@doh.health.nsw.gov.au).

Read the final report here:

<http://www.coaghealthcouncil.gov.au/Portals/0/Review%20of%20Medical%20Intern%20Training%20Final%20Report%20publication%20version.pdf>

MEDICAL REGULATION

In December 2012 the Medical Board of Australia gave consideration to the concept of revalidation as a way to ensure medical practitioners maintain and enhance their professional skills and knowledge to remain fit to practise medicine. The MBA has received expert advice as well as feedback from medical professionals and the community about the best way forward. The research from CAMERA found there was evidence that revalidation is a worthwhile step to managing risk and provided three alternative models for the Board to consider. (Read that report here:

<http://www.medicalboard.gov.au/Registration/Revalidation.aspx>)

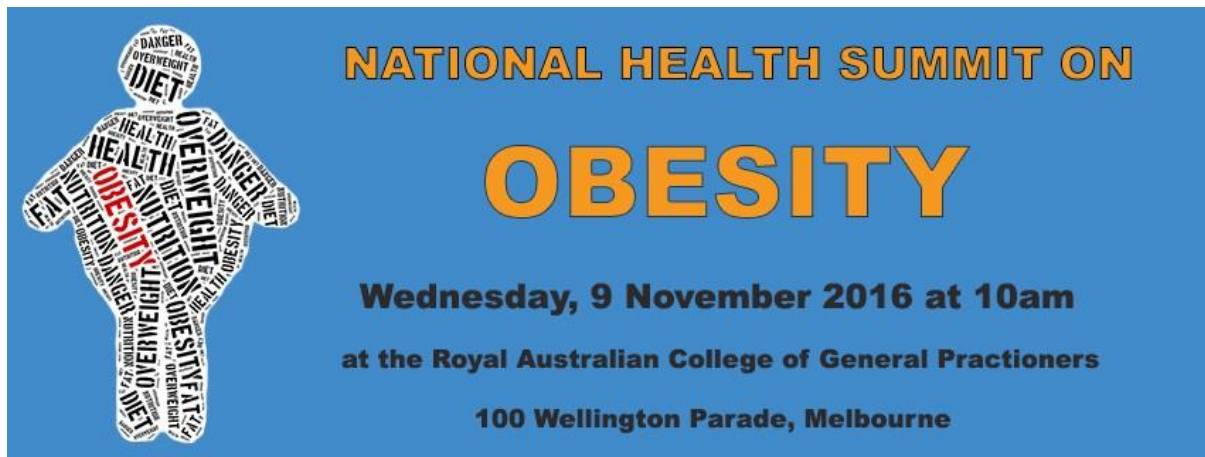
In moving forward the Board established an Expert Advisory Group to provide technical advice on revalidation and a Consultative Committee to provide feedback on issues related to the introduction of revalidation in Australia, as well as commissioning some social research into what the community and doctors expect from a system of revalidation which genuinely demonstrates fitness and competence to practise in Australia.

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On 16 August 2016 the Board will convene a roundtable to discuss its findings from the EAG. CPMC representative is Dr Lee Gruner, immediate past President of the RACMA. A report will be provided and if public it will be made available by link to the CPMC website.

IAMRA 2016: MELBOURNE: The International Association of Medical Regulatory Authorities will convene its 12th international conference on medical regulation between 20-23rd September, 2016 in Melbourne. This is hosted by the MBA/AHPRA as partners in regulating medical practitioners in Australia. You can register here: <http://iamra2016.org/>

CPMC NATIONAL HEALTH SUMMIT ON OBESITY



CPMC is concerned that obesity is fast becoming Australia's biggest health challenge with more than three quarters of the population overweight or obese. Overweight and obese people are at higher risk of cancer, type 2 diabetes, heart disease, and other life-threatening illnesses. It is however, a complex issue and designing a long term strategy across the life course involves a wide range of stakeholders from medical and nursing professionals, public health advocates, schools, food industry, advertising companies, town planners and insurers. CPMC has decided to take the lead on this important health issue by bringing the world and national leaders together to examine the issues, tackle the controversies, define potential interventions, and decide on a series of recommendations to expertly manage and reduce obesity in Australia. A Scientific Advisory Committee has been developed to steer the program and ensure the outcomes are clearly defined.

The purpose of the CPMC Summit is to examine the evidence and develop documentation to assist in the clinical management of obesity. We have invited the Health Minister to open the proceedings.

You can find the draft program by going to the following link: <http://cpmc.edu.au/our-members/national-health-summit-on-obesity/>

SURGEONS UPDATE: The RACS has completed the revision and publication of its Code of Conduct, promoting respect in surgery through high standards of surgical performance and clear expectations of professionalism. The Code defines professional behaviour for surgeons and reflects the values – of service, integrity, respect, compassion and collaboration. Read the full [media release](#) and view the [code](#) here. RACS has also launched an [e-learning module](#). Completing this training is mandatory for all Fellows, Trainees and International Medical Graduates by the end of 2017.

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CPMC POSITION STATEMENTS

CPMC Statement on End of Life Care RELEASED and you can find the link at: http://cpmc.edu.au/wp-content/uploads/2016/05/CPMC_Final_May-2016.pdf

CPMC Statement on Effective Hand Hygiene in progress following concerns that up to a quarter of healthcare staff do not wash their hands, and the importance it has in preventing healthcare associated infections, CPMC will issue the statement in July.

SAFETY AND QUALITY UPDATE

In 2013 the Department of Health provided funding to the Australian Commission on Safety and Quality in Health Care to develop a national surveillance system for antimicrobial use (AU) and antimicrobial resistance (AMR), called the Antimicrobial Use and Resistance in Australia (AURA) project. The AURA project is bringing together a wide range of passive and targeted surveillance of AMR and AU in hospitals and the community to inform strategies to prevent and contain AMR in Australia. The AURA Surveillance System requires the collection of a wide range of different types of data from different sources, as illustrated in the diagram to the right. AURA will collect this data from both targeted and passively collected systems, for both AMR and AU in hospital and community settings. The sources for each of these eight streams of data are broadly based from both long-standing and new programs around Australia. Find out more by going to:

<http://www.safetyandquality.gov.au/antimicrobial-use-and-resistance-in-australia/what-is-aura/>

International conference on infection control The Australasian College for Infection Prevention and Control is convening in Melbourne 20-23rd November 2016 in Melbourne. Find out more at:

<http://www.acipconference.com.au/>

You can find all CPMC Position Statements at: <http://cpmc.edu.au/about-us/policy-statements/>

MEDICAL RESEARCH FUTURE FUND: consultation forum

The Australian Medical Research Advisory Board is undertaking consultations to develop the Australian Medical Research and Innovation Strategy and Related Priorities. This is to improve the wellbeing of Australians through health and medical research and innovation. Public consultations will be held during July. You can register your interest at: health.gov.au/mrff

AUSTRALIA'S HEALTH JURISDICTIONS UNDER RESTRUCTURE

Almost all of Australia's health departments are undergoing strategic inflections as reported recently by jurisdictional representatives to the Australian Council on Healthcare Standards Council meeting. Changes have been reported in the ACT, NSW, South Australia, Victoria, Tasmania and Queensland. The rationale for change is similar in that all jurisdictions are looking for greater efficiency and less bureaucratic red tape.

Boards have returned to Western Australia and at the recent WA State Conference of the Australasian College of Health Service Management the Chairs of these Boards were given an opportunity to discuss vision, mission and challenges anticipated.

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While Professor Bryant Stokes has been acting Director-General since early 2013, the appointment of David Russell-Weisz a permanent DG from August will be accompanied by six assistant directors-general. The changes are aimed at making all of WA Health's operations less unwieldy. In recent times, there have been some significant challenges with new hospitals in the jurisdiction and along with concerns about governance and performance, the Health Minister has determined major changes are necessary to ensure high quality care continues to be delivered for the people in WA.

AUSTRALIAN COUNCIL ON HEALTHCARE STANDARDS: EQUIP6

EQUIP6 released: The ACHS Evaluation and Quality Improvement Program (EQuIP) was launched in 1996. EQuIP was developed by ACHS to assist healthcare organisations to strive for excellence and was designed to be used by all types of organisations which provide health care. The current edition, EQuIP5, was introduced in January 2011 and implemented July 2011.

According to the AHCS it has reviewed EQuIP5 to ensure that the next edition, EQuIP6, is up-to-date, evidence-based, and relevant to member organisations.

<http://www.achs.org.au/programs-services/equip6/> outlines the process.

EQuIP6 will be implemented from 1 July 2016. There will be a transition period of six months, where organisations scheduled for an accreditation event can elect to be assessed to either the EQuIP5 or the EQuIP6 Standards. As of 1 January 2017, all EQuIP accredited organisations must be assessed against EQuIP6.

National Rural Health Alliance Fawelled Gordon Gregory 9th June, 2016



The National Rural Health Alliance (NRHA) recently farewelled its retiring foundation CEO, Gordon Gregory. For the past 23 years, Gordon has been a passionate advocate of rural and remote health. For the past 3 years, CPMC and NRHA worked together on the RHCE sub-programs 1 and 2. CPMC CEO attended the farewell along with 150 others at Old Parliament House, Canberra. Ms Anne Cahill-Lambert undertook to coordinate the farewell singing and the event was a good opportunity for regulars in Canberra's advocacy community to get together and also tour OPH.

INDIGENOUS UPDATE: AIDA 2016 NOW OPEN

Registrations are open for [AIDA 2016](#) to be held in lush far north Queensland, Cairns 14-17 of September. Lock these dates in your corporate calendar and encourage your staff to attend.

How to register: You can now register online through [MySite](#). Use your email address ceo@cpmc.edu.au to create your MySite login and follow the prompts. Your colleagues can also register through MySite by creating a new account. **\$1,000s available for Indigenous medical students and Junior Medical Officers.** We want to see Indigenous medical students and Junior Medical Officers (JMOs) (PGY1) at AIDA 2016 and we have a funding support to help them get there. If you know of any Indigenous medical student or JMOs, please forward this email to them so they can apply for support before the **24 July 2016 deadline**.

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Program snapshot

View the [full program here](#), including the Annual General Meeting (AGM) to be held on 14 September. Some sessions, workshops and excursions have a capacity limit, so register ASAP. This year journalist Stan Grant, Indigenous Human Rights Commissioner Mick Gooda, and Queensland University of Technology academic Dr Chelsea Bond are among our high profile speakers. Our program is also packed full of high quality workshops, presentations, speeches, and importantly an awesome social program. AIDA 2016 is supported by leading Australian medical colleges, universities and medical organisations, and offers tremendous opportunity to network and share knowledge with some of Australia's most experienced and skilled medical specialists. See you there!

MEMBER UPDATE: DIRECTOR CHANGES

President, Royal Australasian College of Physicians: Dr Catherine Yelland



Dr Catherine Yelland has been a geriatrician and general physician since 1990. She trained in Brisbane and Newcastle upon Tyne and had worked since then at several Brisbane hospitals, and is now Director of Medicine and Older Persons Service at Redcliffe Hospital. She has always been interested in service development, dementia, rehabilitation and Orthogeriatric care. She has supervised many geriatric advanced trainees. She was president of the ANZSGM from 2007-2009, and since then has been involved in the Royal Australasian College of Physicians, and will be President from May 2016- 2018. Dr Yelland is on the CPMC Board and

Executive.

President, Paediatrics and Child Health Division, RACP: Dr Sarah Dalton



Dr Sarah Dalton is the newly elected President of the Division and will serve in this capacity until May 2018. She is a paediatrician, emergency physician and has a strong interest in system reform. Dr Dalton received a Fullbright award for professional business/industry (Coral Sea) scholar in 2013.

President, College of Intensive Care Medicine: Dr Charlie Corke

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Dr Charlie Corke was born and educated in England, he undertook medical training at St Bartholomew's Hospital in London. After qualifying as both a physician and anaesthetist, Charlie decided to become an intensive care specialist. He moved to work in Hong Kong and then on to Australia, initially working as Director of Intensive Care at the Repatriation Hospital in Melbourne. In 1991 he moved to become Director of Intensive Care in Geelong. He has published a number of books and research papers on medicine, anaesthesia and intensive care.

President, Australia and New Zealand College of Anaesthetists: Professor David A. Scott MB,BS, PhD, FANZCA, FFPMANZCA



Professor David A Scott is President of the Australian and New Zealand College of Anaesthetists. He is a Clinical Professor at the University of Melbourne, School of Medicine and Director of Anaesthesia and Acute Pain Medicine at St. Vincent's Hospital Melbourne, Australia. He has a PhD in the neuropharmacology of neuropathic pain. His College interests include

professionalism, research support, assessment and education, and international engagement. He has been on the Council of ANZCA since 2008, and has previously been Chair of the Quality and Safety Committee, an examiner and Chair of Examinations. His clinical and research interests include cognitive change, regional anaesthesia, acute pain management, and cardiac and vascular anaesthesia, including echocardiography. He has published and presented on many of these topics and has been co-editor of the Acute Pain Management: Scientific Evidence book for its last three editions. Over the last decade, his research has focussed on outcomes - including blood management, opioids and the cognitive effects of anaesthesia and surgery – particularly delirium and dementia.

SUGGESTED READING

System governance Update from the WHO

<http://www.euro.who.int/en/about-us/partners/observatory/publications/studies/strengthening-health-system-governance-better-policies,-stronger-performance>

IHF World Hospital Congress

The 40th World Hospital Congress, organised by the International Hospital Federation, will be held in Durban, South Africa, 30 Oct – 3 Nov. The congress theme is 'Addressing The Challenge of Patient-Centred Care and Safety'. You can [download the program](#) or [register to attend](#).