

CPMC NATSIMSFP
Newsletter



COMMITTEE OF PRESIDENTS OF MEDICAL COLLEGES
Indigenous Health Subcommittee
National Aboriginal and Torres Strait Islander Medical Specialist
Framework Project (CPMC NATSIMSFP)

CPMC National Aboriginal and Torres Strait Islander Medical Specialist Framework Project is funded by the Commonwealth Department of Health and Ageing.

Artwork by Professor Helen Milroy

Mudlark

As each new day dawns, we have to choose which path we will walk, who we will walk with and how we will walk together. (Source: National Aboriginal and Torres Strait Islander Medical Specialist Framework for Action and Report)



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Issue Date: December 2013

CPMC Indigenous Health Subcommittee Co-Chairs' Messages

As we approach the end of 2013 we also near the end of the National Aboriginal and Torres Strait Islander Medical Specialist Project. It is time to reflect on what has been achieved and the elements of the project that require more work. The CPMC Indigenous Health Subcommittee will of course continue its work beyond the project and one of its first tasks will be to develop a 2014 work plan. We still have a substantial way to go before we see Indigenous doctors proportionately represented in the specialist workforce, and CPMC and AIDA remain committed to working towards this aim.

Dr Maria Tomasic, Co-Chair (CPMC)

This year has seen the launch of the AIDA CPMC Collaboration Agreement, and more recently in November the first CPMC Indigenous Knowledge Initiative. This important Initiative drew College Presidents together with senior Aboriginal Health Experts in a culturally safe manner to share knowledge. While only a small number of Presidents availed themselves of this opportunity, it is hoped that the sharing of information will facilitate a broader range of conversations within Colleges. As the work of the project draws to a close, the CPMC Indigenous Health Subcommittee remains committed to improving Aboriginal and Torres Strait Islander health training and increasing the number of Aboriginal and Torres Strait Islander Fellows. In this, the final newsletter of the National Aboriginal and Torres Strait Islander Medical Specialist Framework Project, I would like to wish our project officer, Dr Khadka, best wishes for his future endeavours.

Dr Tammy Kimpton, Co-Chair (AIDA)

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Farewell - Professor Kate Leslie

Welcome - Associate Professor Michael Hollands, Ms Angela Magarry

Goodbye - Dr Netra Khadka

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The Indigenous knowledge initiative for the CPMC leadership

In line with the project deliverables and the Collaboration Agreement: 2013-2015 between the Australian Indigenous Doctors' Association (AIDA) and the Committee of Presidents of Medical Colleges (CPMC), an Indigenous Knowledge Initiative program for the Presidents of the specialist Colleges was held in Melbourne on 6 November 2103.

The main objectives of the program were to:

- share knowledge and understanding of Aboriginal and Torres Strait Islander health and wellbeing between the Presidents and Aboriginal and Torres Strait Islander health leaders and health services providers
- engage in two-way conversation in a mutually respectful, supportive and collegiate manner
- consider the translation of knowledge gained by Presidents in their roles within their specific areas of medical specialty

There were 17 participants; 5 CPMC Presidents, 3 AIDA representatives, and other 9 including local Indigenous leaders, community representatives, and Indigenous leaders in health.

The program started at the Koorie Heritage Trust at around 2pm with Welcome to Country ceremony performed by Aunty Carolyn Briggs, Boon Wurrung Foundation, and ended up with a visit to the Victorian Aboriginal Health Services (VAHS) at 5:45pm.



Aunty Carolyn Briggs performing Welcome to Country ceremony

“The program was jointly convened by Professor Kate Leslie, Immediate Past President of CPMC, and Dr Tammy Kimpton, President of AIDA, and the Co-Chair of CPMC Indigenous Health Subcommittee.”



Professor Kate Leslie (left) and Dr Tammy Kimpton (right) welcoming the participants

Professor Leslie in welcoming all the participants of the program highlighted the importance of the AIDA-CPMC joint collaboration

agreement recently signed in Melbourne.

Indigenous health leaders, Associate Professor Kelvin Kong and Associate Professor Mark Wenitong took part in the program as the key speakers in sharing knowledge and understanding of Aboriginal and Torres Strait Islander health and wellbeing.

Associate Professor Kong discussed the development of the Indigenous medical workforce and Indigenous-related education and training program to medical workforce, whilst Associate Professor Mark Wenitong critically examined the importance of Indigenous health and wellbeing, including spiritualities and healing. Associate Professor Wenitong, on behalf of Professor Ngiare Brown who unfortunately had to cancel at the last minute, also talked about Indigenous health systems and services and inequality at all levels of the health care system.



A/Professor Kelvin Kong



A/Professor Mark Wenitong

Ms Danielle Thomson, representing Victorian Aboriginal Community Controlled Health Organisation (VACCHO), discussed the Indigenous history, heritage and culture & health services delivery based on the Victorian perspective.



Ms Danielle Thomson

During the afternoon refreshment, an online web resource, nicheportal.org - Network for Indigenous Culture and Health Education was launched. The portal is a collaborative project of the medical Colleges designed to link and share teaching and educational resources in Indigenous health and cultural learning. It promotes multidisciplinary engagement between specialists working within Indigenous communities. The portal is funded through the Commonwealth Government's Rural Health Continuing Education Program.

At the Victorian Aboriginal Health Service (VAHS) the participants were welcomed by the acting CEO Ms Christine Ingram and other VAHS staff members followed by introduction of participants to the VASH staff members.

During the visit to VAHS, Ms Christine Ingram, Mr Reg Thorpe, Mr Alan Brown and Dr Mary Belfrage provided information on the VAHS health service delivery to Indigenous patients.



*Ms Christine Ingram (standing in the middle)
Mr Reg Thorpe (standing left), Mr Alan Brown
(standing right)*



Dr Mary Belfrage (third from the right)

Finally, the participants were given a tour of VAHS service facilities. Before ending the program at 5:45pm, Professor Leslie and Dr Kimpton thanked VAHS for their hospitality and important input.

Although, unfortunately only a small number of CPMC Presidents attended the program, the program was well

received by those who attended. It provided opportunity to enhance their knowledge and understanding of Aboriginal and Torres Strait Islander health and wellbeing, and better implement Aboriginal and Torres Strait Islander health programs within their specialty areas.

Amidst the above program preparation, a media was jointly released by CPMC and AIDA on 4 November 2013.

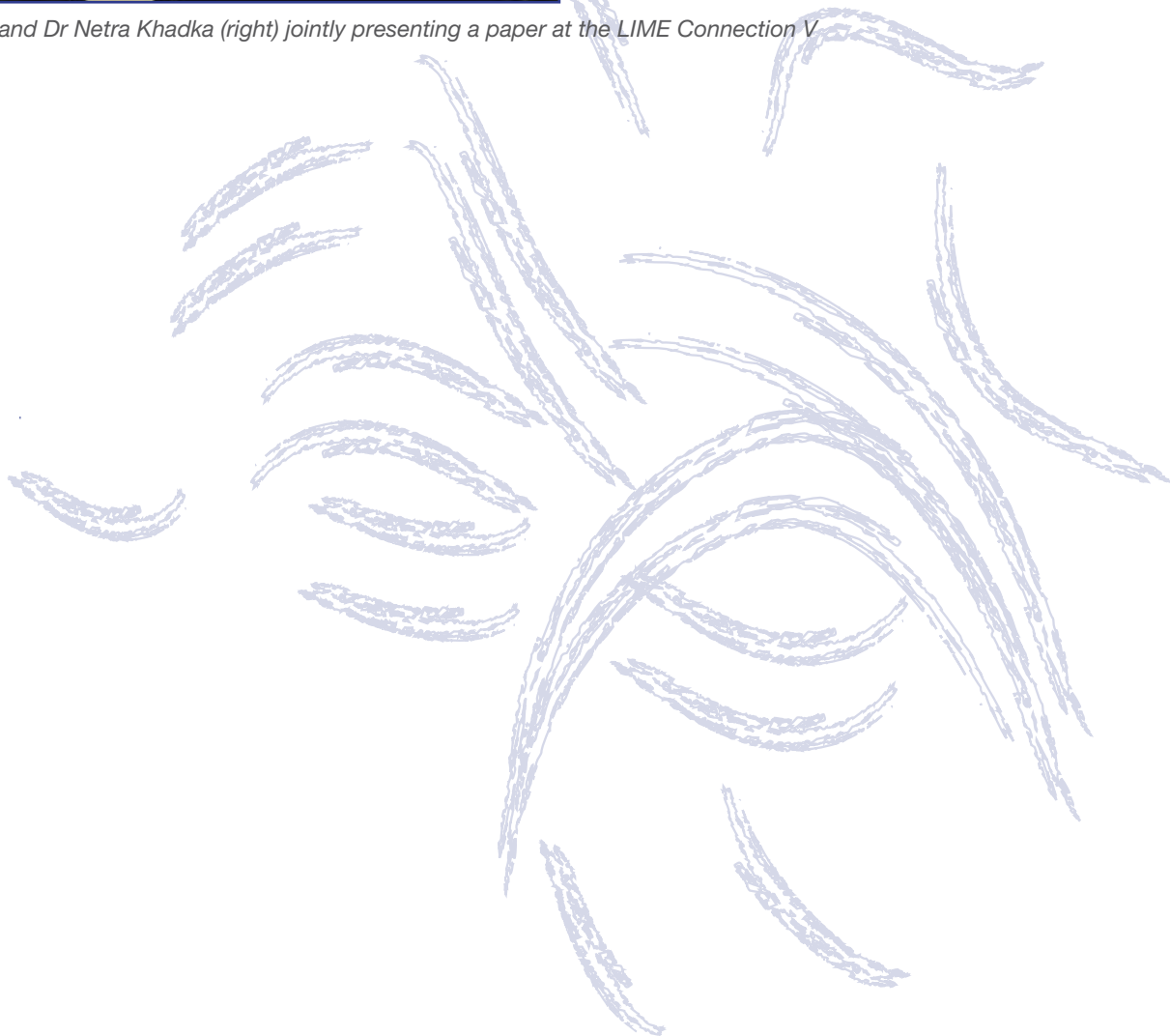
LIME Connection V

The Leaders in Indigenous Medical Education (LIME) fifth biennial conference, LIME Connection V, was held in Darwin from 26 to 28 August 2013. The theme of the conference was “Re-imagining Indigenous Health Education: Harnessing energy, implementing evidence, creating change”.

On behalf of the project, the paper “CPMC National Aboriginal and Torres Strait Islander Medical Specialist Framework Project” was presented by Dr Tammy Kimpton, Indigenous Health Subcommittee Co-Chair and Dr Netra Khadka, Senior Project Officer. The paper primarily focused on the project objectives, activities and progress.



Dr Tammy Kimpton (left) and Dr Netra Khadka (right) jointly presenting a paper at the LIME Connection V



Profiles



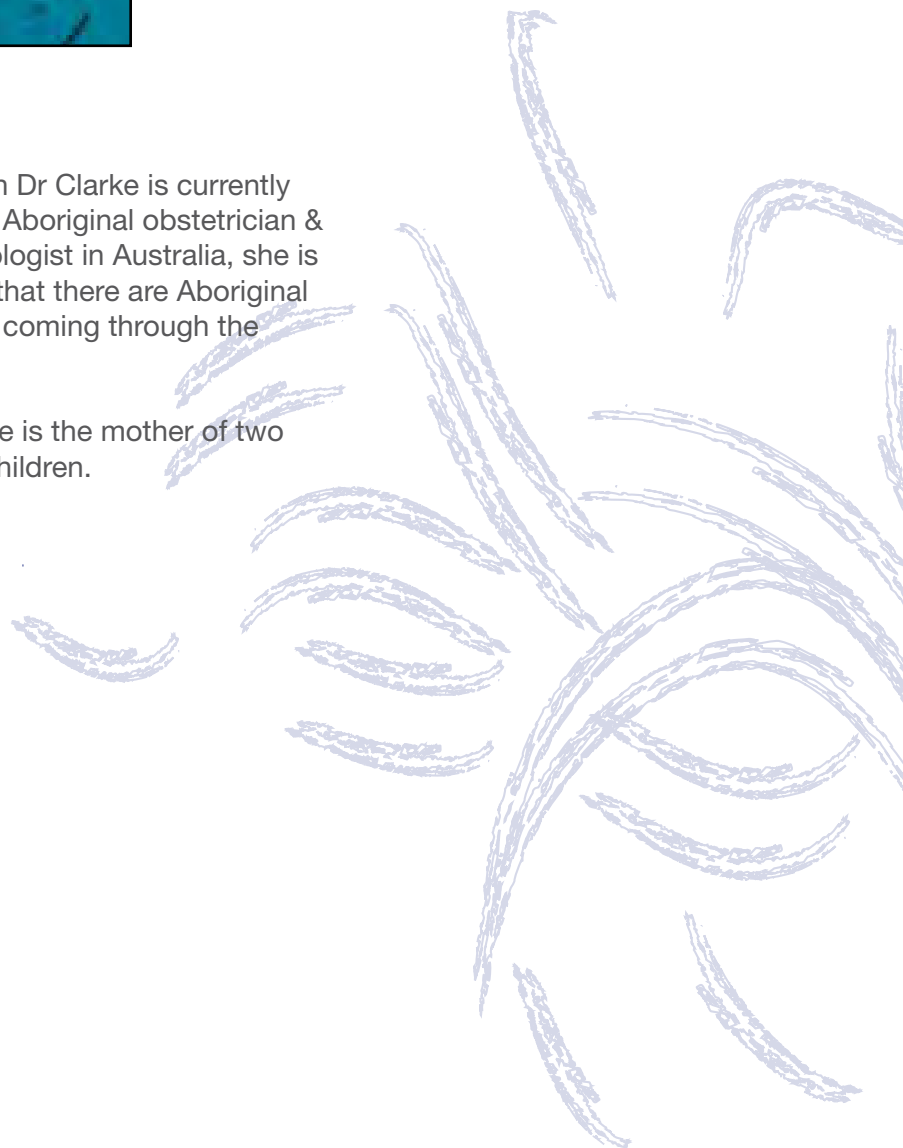
Dr Marilyn Clarke

Dr Marilyn Clarke is an obstetrician & gynaecologist based on the north coast of NSW. She is from the Worimi people from Port Stephens and grew up in Nelson Bay amongst her extended family. Along with her twin sister Marlene Kong, they were the first Aboriginal medical graduates from Sydney University.

Dr Clarke spent a year working in Papua New Guinea before undertaking her specialist O&G training through John Hunter Hospital. Since gaining her Fellowship, Dr Clarke has practiced in Coffs Harbour and now is based in Grafton. She finds her work with the Aboriginal Maternal and Infant Health Strategy program, caring for Aboriginal women in their pregnancies, one of the more rewarding aspects of her job.

Although Dr Clarke is currently the only Aboriginal obstetrician & gynaecologist in Australia, she is excited that there are Aboriginal trainees coming through the ranks.

Dr Clarke is the mother of two young children.



Stories/News from medical specialist Colleges

The Royal Australian College of General Practitioners (RACGP)

RACGP annual conference 'GP13'

On October 17 - 19, the RACGP proudly hosted 1,100 delegates at GP13 in Darwin. Record registrations were received with many workshops and sessions selling out well in advance. Attracting local and international keynote speakers, Aboriginal and Torres Strait Islander health, general practice funding and e-health were just some of the thought provoking key topics covered over the three days. Conference highlights included Dr Jeff McMullen AM presenting 'Health is a state of mind' plenary session. Dr McMullen addressed the critical need for the improvement of Aboriginal

and Torres Strait Islander health to become a national priority. Dr Theresa Maresca's keynote presentation 'What American Indian communities can teach general practitioners', sold out in advance, with Dr Maresca sharing success and failures of the integration of Indigenous American Indian communities into mainstream health programs.

A particular highlight in line with the Aboriginal and Torres Strait Islander Health theme was the recognition of nine RACGP Fellowships awarded in the past year to general practitioners who identify as

Aboriginal and/or Torres Strait Islander. Four of these Fellows attended the Academic session at GP13 in Darwin.

Planning for next year's GP conference theme is already underway, as are the key streams. GP14 will provide the perfect opportunity to collect Category 1 and 2 QI&CPD points and maximise point collection in the first year of the 2014-16 QI&CPD triennium.

Australian and New Zealand College of Anaesthetists (ANZCA)

Essential Pain Management

Working in partnership with the Territory Integrated Pain Service the ANZCA Indigenous Health Committee and the Essential Pain Management (EPM) subcommittee have refined the international pain management program to be provided to Aboriginal Health Workers in Australia. EPM provides a simple framework for managing pain using the RAT acronym as a simple how to guide to ensure health care workers are able to Recognize, Assess and Treat pain appropriately.

The program was originally developed following a request from Papua New Guinea for improved pain education materials in 2010. Since that time it has been taught in over 30 countries, with over 1617 participants and 300 new instructors trained. Following initial discussions about applying the framework to pain education in rural and regional areas and the introduction of EPM Lite into the Auckland Medical School curriculum the program has been refined to ensure it is relevant to Aboriginal Health Workers and

trialled in December.

Support for this program is currently being provided from ANZCA and the Ronald Geoffrey Arnott Foundation (via Perpetual Trustees).

To learn more please visit www.essentialpainmanagement.org or follow us on Facebook www.facebook.com/essentialpainmanagement.

ANZCA Annual Scientific Meeting Scholarships

From 2014 the ANZCA Indigenous Health committee will be supporting three annual scholarships for Australian Aboriginal, Torres Strait Islander, Maori and Pacific Island medical students and junior doctors from Australia and New Zealand. The scholarships are designed to foster interest in anaesthesia and pain medicine and will provide recipients with a complimentary registration to the annual ANZCA Scientific Meeting. Additional information can be found by contacting Paul Cargill, Policy Officer, Community Development pcargill@anzca.edu.au.

ANZCA open access learning materials

Over the past two years both as part of the development of the College's new curriculum and in an effort to provide additional resources for ANZCA Fellows, the College has developed a number of resources that are accessible to any interested specialists through the College's website.

The ANZCA Indigenous Health Podcast Series consists of nine short independent learning modules and is now available from the ANZCA podcast page at <http://www.anzca.edu.au/resources/learning/podcasts>.

The ANZCA Teaching and Learning Cases 7,8a/b and 9 are comprehensive resources developed to assist trainees and supervisors of training to discuss the complex cultural and clinical issues. The

facilitator and question only cases are now available from <http://www.anzca.edu.au/training/2013-training-program> (note you will need to scroll down to the bottom of the page).

The Royal Australian and New Zealand College of Psychiatrists (RANZCP)

Milestones in Indigenous mental health for the Royal Australian and New Zealand College of Psychiatrists

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) has been working to train and represent psychiatrists for fifty years. With more than 5,000 members, the RANZCP leads mental health treatment service delivery throughout Australia and New Zealand, advocating for increased service delivery where it is most needed and helping many of the most vulnerable members of our community at times of need.

In the area of Indigenous mental health, RANZCP initiatives include recruiting

more Indigenous doctors into psychiatry, developing education and training resources on Indigenous mental health, making submissions to government inquiries, developing publications and resources on Indigenous mental health and inclusion of Indigenous cultural events in College activities.

“Core to the RANZCP strategy is developing collaborative relationships with peak Indigenous organisations,

in particular the Australian Indigenous Doctors' Association (AIDA)”

The RANZCP annually funds four scholarships for junior Indigenous medical students to attend Congress. The selection process is undertaken in collaboration with AIDA. Special thanks are due to Immediate Past President Dr Maria Tomasic who has been instrumental in forming this partnership.

Dr Murray Patton, President

of the RANZCP continues this work and presented at the Australian Indigenous Doctors' Association Conference in Canberra. This conference was a valuable opportunity for the RANZCP President to hear directly from AIDA members, particularly medical students and doctors who spoke of the challenges they face in their studies and early careers as Indigenous people and what actions they would like to see all the specialists Colleges' take to improve the number of Indigenous specialists in Australia. The RANZCP looks forward to building a similar relationship with the Māori Medical Practitioners Association in New Zealand.

Following the AIDA conference, Dr Patton hosted a teleconference with some of the RANZCP Indigenous trainees to discuss in more detail the specific challenges Indigenous trainees face during psychiatry training and how the RANZCP can best support them throughout their training.

The RANZCP's newly developed competency-based Fellowship Program for Psychiatry training commenced in December 2012. The Program includes Indigenous mental health in the syllabus and workplace based assessments involving Indigenous patients. In 2013, the RANZCP also attended the Committee for Presidents of Medical Colleges (CPMC) Indigenous Health Content

Workshop as part of the National Aboriginal and Torres Strait Islander Medical Specialist Framework Project.

“The RANZCP continues to participate in the Specialist Training Program which funds 168 training posts for psychiatry trainees in non-public hospital settings. Eighteen posts include Indigenous mental health care, with some located in Indigenous settings. It is hoped that these experiences will encourage trainees to enter alternative future practice pathways such as Indigenous mental health or rural and remote mental health service delivery.”

Aboriginal and Torres Strait Islander peoples participate in RANZCP committees reporting to the Board. They contribute to psychiatry education and training, policy development and key RANZCP events such as the RANZCP Annual Congress. In 2013 the Congress Program included a pre-Congress workshop on “Aboriginal and Torres Strait Islander Understandings of Social and Emotional Wellbeing and the

Spiritual World” and a Māori and Aboriginal gathering, both of which were well attended.

Another key achievement during 2013 has been the development of the first RANZCP Reconciliation Action Plan, which will be released in 2014. This Plan promotes Reconciliation from the perspective of the RANZCP and will include strategies for incorporating Indigenous culture and issues in RANZCP activities and building awareness among RANZCP members.

The RANZCP has made several submissions to the Australian government on Indigenous mental health, including an evaluation of the National Health and Medical Research Council's Evaluation of the Aboriginal and Torres Strait Islander Health Research Ethics. In the lead up to the 2013 Federal election, the RANZCP made three submissions to the major parties advocating for greater investment in Aboriginal and Torres Strait Islander mental health nurses and a commitment to double the Indigenous health workforce by 2016.

Overall 2013 has been a year of significant developments for the RANZCP in the field of Indigenous mental health, one in which relationships are fostered and grown and goals established for the years ahead.

RANZCP Psychiatry Interest Forum

Indigenous medical students, junior doctors and other medical practitioners wishing to learn more about psychiatry as a career can now do so through the Psychiatry Interest Forum.



Launched in September by the Royal Australian and New Zealand College of Psychiatry (RANZCP) and promoted at the recent AIDA Conference in Canberra, the new forum has had an excellent response across Australia and New Zealand.

Nearly 500 medical students from 21 universities, as well as junior doctors and other medical practitioners have applied for membership to-date launch, and will receive the RANZCP's monthly ebuletin psyche, as well as invitations to educational and networking events.

The Psychiatry Interest Forum aims to engage with all potential trainees and promote the RANZCP and psychiatry more widely

Membership is free. Eligibility and application details are available on the RANZCP's PIF website.

The Australasian College for Emergency Medicine (ACEM)

The Indigenous Health and Cultural Competency (IH&CC) project

"If we cannot communicate with our patients, we can't diagnose them properly. Understanding their perspectives and why they're here is also part of the communication."

These sentiments spoken by Dr Ray Gadd, an Aboriginal doctor and currently Director Emergency Medicine at Gladstone Hospital Queensland and member of the Indigenous Health and Cultural Competency (IH&CC) project Reference Group, shed light on some of the underlying principles of the IH&CC project.

The IH&CC project, developed at the Australasian College for Emergency Medicine, will

provide International Medical Graduates and other doctors working in Emergency Medicine (EM) education resources to strengthen their understanding of Aboriginal and Torres Strait Islander and other culturally and linguistically diverse communities, enhancing appropriate medical care in the emergency setting.

Over the next few months, the IH&CC project will release a series of eLearning Modules and episodes in a video podcast series covering issues relevant to the emergency department (ED) setting.



Dr Ray Gadd, IH&CC project Reference Group member

eLearning Module series

The IH&CC eLearning Module series include a comprehensive ten module series covering core knowledge and skills relating to IH&CC in the ED including:

Modules 1 – 4:

Applying core concepts of culturally competent care in the ED

The first four modules of the series will: introduce learners to culturally competent care and communication in the ED; and encourage the growth of understanding health literacy and health beliefs in addition to language diversity and working with interpreters.

Module 5 - 8:

Caring for Aboriginal and Torres Strait Islander and other culturally diverse patients in the ED

These modules will: highlight the need to improve ED access and experiences of the ED; delve into the true meaning of collaborative practice including both Aboriginal Liaison Officers and families; and focus on the importance and skills required for culturally competent

discharge planning and end of life care.

Modules 9 -10:

Common presentations to ED
– Applied epidemiology

The final two modules will: detail relevant information on Aboriginal and Torres Islander as well as other culturally and linguistically diverse patient health status and statistics, as related to presentations at the ED.

Podcast series

The video podcast series will complement the eLearning Module series and present an exciting alternative learning approach to enhancing core knowledge and skills relating to IH&CC in the ED including:

- International Medical Graduates in emergency medicine –experiences related to communication and Australian ED processes
- Current research in IH&CC relevant to emergency medicine
- Examples of culturally competent initiatives in the

ED – Initiatives in Melbourne, Townsville and Alice Springs

- An example of reducing the length of stay through cultural competency.



Dr Khin Moe Sam, IMG working in emergency medicine

Visit ACEM's website and find the IH&CC webpage under Education Resources – you can access all the podcasts and online modules as they become available as well as further learning links and information on the project.

This project is funded by the Australian Government.

For more information please see the ACEM website: www.acem.org.au or email culture@acem.org.au.

The Royal Australasian College of Medical Administrators (RACMA)

Indigenous Health at RACMA

The Royal Australasian College of Medical Administrators has developed a range of Indigenous Health online activities and modules as part of the delivery of the STP support projects and to align with the RACMA Competency Framework in the area of Communication and Cultural Competence.

RACMA has mapped a series of online modules to integrate with the College LMS tool that included the Indigenous Health training program live webinars and a self-paced learning environment for RACMA trainees.

The tools provided the participants with access at elearning@racma to links to the RACGP, RAHC and Mauriora online modules; a recording of the two Indigenous

Health Webinars; the RACMA Curriculum competencies; RACMA Curriculum resources and links; the Indigenous Health program assessment and evaluation.

- Introduction to Aboriginal and Torres Strait Islander cultural awareness in general practice
- Remote Area Health Corps (RAHC)– Introduction to Remote Health Practice Program
- Mauri Ora and the Ministry of Health New Zealand – A Foundation Course in Cultural Competency

The modules also generate Certificates of Completion which are submitted as evidence of training to the Trainee's evidence folio. Participants have been surveyed and the feedback was reported to the Education and Training Committee and

provided the College with the ideas for review and improvement where needed on the specific cultural and educational aspects of the Indigenous Health program requirement.

The webinars held by RACMA were chaired and facilitated by some of the most senior Fellows of the College on Indigenous Health, Cultural Competence and Communication. These included: Dr Bernard Street, Dr Helen Tinsley, A/P Alan Sandford, Dr Peter Jansen, Dr Tony Austin, Dr Meredith Arcus and Dr Amanda Dines.

The topics included: Cultural Workplace Experience, Maori NZ, Aboriginal and Australian Remote. A discussion forum was opened on elearning@racma to continue development and improvement of the



The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG)

Indigenous women's health activities

- Reconciliation Action Plan

A College Reconciliation Action Plan is currently being developed to reflect on RANZCOG's past activities in the area of Indigenous health as well as to commit to future actions the College will take to build strong relationships with Aboriginal and Torres Strait Islander peoples. The College RAP will be officially launched at the Indigenous Women's Health Meeting on Friday, 02 May 2014 in Adelaide.

- Webcasts from 2011 RANZCOG Indigenous Women's Health Meeting

Seven webcast presentations from the 2011 Indigenous Women's Health Conference are available for viewing at the following link: <http://www.ranzcog.edu.au/webcast.html>.

- Online Learning Module

The RANZCOG Indigenous Women's Health eLearning Module is being developed to address issues specifically related to Indigenous women's health and to promote the

outcomes recommended by the Aboriginal and Torres Strait Islander Medical Specialist Framework Project.

- 2014 RANZCOG Indigenous Women's Health Meeting

The third RANZCOG Indigenous Women's Health Meeting will be held at the Adelaide Convention Centre, 2-4 May 2014. Delegates will be provided with the invaluable opportunity to network with health professionals of diverse backgrounds and experts in the field of Indigenous women's health.



**RANZCOG 2014
Indigenous Women's
Health Meeting**
*Sharing Knowledge,
Creating Change*
2-4 May 2014

South Australia | Adelaide Convention Centre | www.ranzcog2014iwhm.com.au

SESSION TOPICS
Connecting to Young People • Pregnancy Care • Pre-conception and Intergenerational Health • Staying Healthy • Sexual and Reproductive Health • Maori Health • Health of Pacific Islander Women • Promoting Social and Emotional Wellbeing • Successful Health Service Delivery • Family and Justice Services • Partnership in Health • Knowledge Exchange • Future Directions

PRE-MEETING WORKSHOPS
• Cross Cultural Awareness Workshop
• Women's Health Workshop for Health Workers
• Implanon Training Workshop
• Mirena Training Workshop

PROGRAM HIGHLIGHTS
Welcome to Country by Aunty Josie Agius
RANZCOG Reconciliation Action Plan Launch

Visit the meeting website www.ranzcog2014iwhm.com.au to register.

Confirmed Speakers

Alan Clough	Louise Maple Brown
Anne Coffey	Marilyn Clarke
Beverley Lawton	Melanie Gibson
Dion Brownfield	Michelle Giles
Donna Weetra	Pat Dudgeon
Gail Garvey	Paul Torzillo
Heather Hall	Philippa Middleton
Janine Milera	Rajat Gyaneshwar
Jaqui Hughes	Rebecca Guy
Jenny Brands	Robyn Shields
Justin Mohamed	Sandra Eades
Karen Atkinson	Stephanie Brown
Karen Glover	Stephen Simpson
Karla Canuto	Swaran Naidu
Kim O'Donnell	Tracey Johnston
Kirby Murtha	and more to be confirmed.
Kylie Cripps	

WHM Secretariat | t: 03 9412 2920 | e: 2014iwhm@ranzcog.edu.au | Follow us on Twitter @2014iwhm

The Royal Australian and New Zealand College of Ophthalmologists (RANZCO)

Indigenous and rural health committee activities

As part of the RANZCO Annual Scientific Congress in Hobart, the Indigenous and Rural Health Committee invited a Tasmanian Indigenous woman, Ms June Sculthorpe to speak about cultural awareness to our Trainees and Fellows.

The speaker presented on the fate of the Indigenous people on the island of Tasmania from the past to the present.

She explained some of the difficulties that they now face and in cultural terms the medical care they prefer and the way it should be delivered to them and mentioned the challenges facing some of the hospital and medical facilities in Tasmania. There was also an overview of some of the Colonial injustices that have occurred that have been partly responsible for some of the Indigenous eye health issues.

Later in the Congress there were numerous interesting short presentations from various stakeholders who outlined the status of Indigenous eye health from different regions around Australia. As a follow on from this there were advocacy and action plans that were discussed and put into place for completion in early 2014.

The CPMC NATSIMSFP 'guidelines for collecting indigenous status data within medical colleges' were discussed at a business meeting during Congress and it was decided that perhaps the suggested statement on Indigeneity could be slightly modified to: "Would you like us to identify you as being Aboriginal, Torres Strait Islander or New Zealand Māori".

The University of Melbourne, Indigenous Eye Health Unit has recently published the '2013 Annual Update on the Implementation of the Roadmap to Close the Gap for Vision' that contains detailed information about how to close the gap on Indigenous eye health outlined in 42 recommendations. The full report can be found at http://www.iehu.unimelb.edu.au/publications/iehu_reports. In addition to this the Hon. Warren Snowden has released the 2012 Australian Trachoma Surveillance Report (from the previous Government) that shows the rate of trachoma has fallen from

14% in 2009 down to 4%. "Across all four jurisdictions in 2012, the prevalence of trachoma in five to nine year old children was 4%". The full report can be found at [http://www.health.gov.au/internet/main/publishing.nsf/Content/0286FB6477B7AED0CA25746600066809/\\$File/2012trachoma.pdf](http://www.health.gov.au/internet/main/publishing.nsf/Content/0286FB6477B7AED0CA25746600066809/$File/2012trachoma.pdf)

The Commonwealth Government have contracted with McKinsey The Management Consultants to produce a report on the way Medicare Locals and local hospitals networks can work together. The example that has been chosen is Indigenous eye health and the work that A/Prof Angus Turner is doing in the Kimberley and Pilbara regions. This case study will assist all Medicare Locals as an example of best practice and will include among other things information on how to coordinate patient care, develop KPI's and report on targets. The full report can be found at http://amlalliance.com.au/__data/assets/pdf_file/0019/50149/A-conceptual-framework-for-Medicare-Local-Collaboration-June-2013.pdf.

RANZCO is in the process of reviewing cultural awareness course content of hospitals and other specialist Medical Colleges with the aim of completing a needs gap analysis for the purposes of looking at the requirements of RANZCO into the future. Part of this review will require an assessment of the courses that our Trainees are currently completing prior to their hospital appointments.

The Indigenous and Rural Health Committee is planning to review the CPMC NATSIMSFP Indigenous curriculum elements and cultural awareness / sensitivity guidelines when they become available in December.

Farewell



Professor Kate Leslie

Professor Kate Leslie has recently completed her term as Chair of the Committee of Presidents of Medical Colleges. Her achievements as the CPMC Chair include establishing a firm platform for advocacy, policy and government relations for CPMC members. Her leadership in developing the CPMC-AIDA Collaboration Agreement have been acknowledged.

Professor Leslie trained in anaesthesia in Melbourne and works as a staff specialist and Head of Anaesthesia Research at the Royal Melbourne Hospital. Her clinical interests include neurosurgery, colorectal surgery and sedation for endoscopy. She is honorary professorial fellow in the Department of Pharmacology at the University of Melbourne, honorary adjunct professor in the Department of Epidemiology and Preventive Medicine at Monash University and is active in clinical research. She is currently chair of the International Medical Graduate Specialist Committee and the Anaesthesia and Pain Medicine Foundation Board.

On behalf of the CPMC Indigenous Health Subcommittee, we wish all the best for her current and future endeavours.



Welcome



Associate Professor Michael Hollands

Associate Professor Michael Hollands is a general surgeon at Westmead Hospital, and is Clinical Associate Professor of Surgery in the Western Clinical School of Sydney University. He has post-graduate training in gastro-oesophageal and hepatopancreatobiliary surgery. He was trained at St Vincent's Hospital in Sydney and later at The Royal Postgraduate Medical School Hammersmith and Guys Hospital in London. He then worked in Beth Israel Hospital and Harvard Medical School, Boston and at Queen Mary's Hospital, Hong Kong before joining the staff at Westmead in 1986. He has Fellowships in surgery from The Royal Australasian College of Surgeons, the Royal College of Surgeons of England and the American College of Surgeons and Honorary Fellowships from the Royal College of Surgeons of Thailand and the College of Physicians and Surgeons of Pakistan.

Associate Professor Hollands was formerly Chair of the EMST Committee and the NSW Regional Committee of RACS. He has served on the Minister's Quality Committee and the Metropolitan Planning Group for Medical Services in New South Wales. He is currently Region 16 Chief for the American College of Surgeons Committee on Trauma. He has a special interest in the history of medicine and has a Diploma in the History of Medicine from the Worshipful Society of Apothecaries. He was elected to the Council of RACS in 2006, served as Treasurer 2010– 2011 and was made College President in 2012. Despite his non-clinical commitments Michael continues to run a busy clinical practice.

In November 2013, Associate Professor Hollands began his term as Chair of the Committee of Presidents of Medical Colleges.

On behalf of the CPMC Indigenous Health Subcommittee, we welcome Associate Professor Hollands to his new role and wish him the best in guiding the CPMC

Welcome



Ms Angela Magarry

Ms Angela Magarry has taken on the role of CEO of CPMC replacing Mr Leslie Apolony on 31 July 2013.

With this change the CPMC office has relocated to Canberra to facilitate the focus CPMC has placed on advocacy, policy and government relations.

Prior to her new role, Ms Magarry was the head of policy for Australia's Vice-Chancellors at Universities Australia. She is also a former adviser to a Cabinet Minister. She has a clinical background in nursing and specialised in renal and acute care. In addition to her clinical qualifications, Ms Magarry obtained a Bachelor of Health Administration majoring in management, and a Masters of Policy Studies, majoring in public policy, from the University of New South Wales.

Ms Magarry has a strong interest in the arts and is a qualified designer. She is the immediate past President of the Australasian College of Health Service Managers, of which she is a Fellow.

Ms Magarry is married and has 2 children.

We warmly welcome Ms Magarry as the CEO of CPMC.

Goodbye



With this final newsletter and also after almost two years of working with this project, it is time for me to say goodbye.

It has indeed been great pleasure for me to get to know so many of you and work together on the project.

I really appreciate the time that I spent working with all of you, on both a professional and personal level. I thank all of you.

My special thanks go to all medical Colleges Presidents and CEOs, Commonwealth Department of Health, CPMC CEO, Co-Chairs of the CPMC Indigenous Health Subcommittee- past and present and Subcommittee members, AIDA, and all the medical Colleges staff members who enormously helped me to complete this critically important project focused on Indigenous medical specialist framework implementation.

Hoping to cross paths again in the future, goodbye for now.

Netra Khadka

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