Welcome to the inaugural issue of the CPMC National Aboriginal and Torres Strait Islander Medical Specialist Framework Project Newsletter.

With these short missives, we hope to keep College Presidents & Fellows as well as other interested parties fully informed as to the progress being made with the Project, so that you may be able to not only appreciate the outcomes being pursued but also we would appreciate comments and suggestions in relation to other directions you feel we may need to take in order to achieve the best possible outcomes we can, for Indigenous Australians.

Professor Geoffrey Metz
Assoc. Professor Peter O’Mara

Welcome to the first Newsletter
In this issue
- How did the Committee of Presidents of Medical Colleges (CPMC) National Aboriginal and Torres Strait Islander Medical Specialist Framework Project come about?
- What is the CPMC Australian Indigenous Health Subcommittee?
- CPMC National Aboriginal and Torres Strait Islander Medical Specialist Framework Project (CPMC, NATSIMSFP)
- About Dr Netra Khadka, Senior Project Officer, CPMC, NATSIMSFP.
- Highlights
  - Pacific Region Indigenous Doctors’ Congress (PRIDoC), 2012
  - Network for Indigenous Cultural & Health Education (NICHE)
  - The Australian Indigenous Health & Cultural eLearning Project

The first project meeting of CPMC Australian Indigenous Health Subcommittee at the Headquarters of the Royal Australasian College of Surgeons (Courtesy: RACS)
How did the Committee of Presidents of Medical Colleges (CPMC), National Aboriginal and Torres Strait Islander Medical Specialist Framework Project come about?

With its commitment to assisting in closing the gap in health status between the Indigenous and non-Indigenous people of Australia, the Committee of Presidents of Medical Colleges (CPMC), the peak medical specialist body in Australia, commissioned a framework study in 2010 entitled ‘National Aboriginal and Torres Strait Islander Medical Specialist Framework for Action and Report’. This framework study was carried out by Dr Shaun Ewen, Onemda VicHealth Koori Health Unit, Centre for Health and Society, Melbourne School of Population Health, the University of Melbourne in 2010/2011.

The thesis driving the study is that one of the important variables that is likely to lead to improved health outcome for Indigenous Australians is an increase in the number of Indigenous doctors overall and Indigenous medical specialists in particular.

The framework study, quoting the Australian Institute of Health and Welfare (AIHW), 2009, stated that in 2006, Indigenous doctors made up only approximately 0.2 per cent of the medical workforce. In the same year, based on the 2006 census figures, the proportion of doctors (Indigenous plus non-Indigenous) in the Australian population was 0.27 per cent while the proportion of Indigenous doctors in the Indigenous population was just 0.019 per cent.

Bearing in mind the very low number of the Indigenous medical workforce, especially in relation to medical specialists, the framework study suggested 19 recommendations, which, if implemented, would be likely to increase the number of Indigenous medical specialists. The main framework recommendations, inter alia, were to identify the Indigenous status of trainees and fellows; to provide information regarding access to various specialist training programs; to provide cross-cultural training in Indigenous issues; to provide cultural competence training in Indigenous health to specialist college staff, trainees and fellows; to develop learning modules and cultural competence curricula; and to develop a cyclical quality review tool.
In order to implement the framework study recommendations, the CPMC finally applied for project funding from the Department of Health and Ageing (DoHA).

In June 2011, upon successfully receiving the funding from DoHA, the CPMC contracted with the Royal Australasian College of Surgeons (RACS) to facilitate delivery of the project activities, including housing and support to the project officer through a second phase of the CPMC National Aboriginal and Torres Strait Islander Medical Specialist Framework Project (CPMC NATSIMSFP).
What is the CPMC Australian Indigenous Health Subcommittee?

Although, the second phase of the CPMC NATSIMSFP has been running since January 2012 through the office of the RACS, its activities are essentially guided by the advice of the CPMC Australian Indigenous Health Subcommittee (CPMC AIHSC).

The full membership of the CPMC AIHSC, here-in-after referred to as the Subcommittee, generally meets twice a year to oversight to the CPMC NATSIMSFP, but a smaller “project working group” meets every 10 weeks to ensure that the aims and objectives set down by the Subcommittee are achieved within as short a timeframe as possible.

The Subcommittee consists of 15 member representatives from 15 specialised medical Colleges operating in Australia plus representatives from the Australian Indigenous Doctors’ Association (AIDA), the Department of Health and Ageing (DoHA), the National Aboriginal Community Controlled Health Organisation (NACCHO), and the Medical Deans Australia and New Zealand (MDANZ).

Since the CPMC NATSIMSFP is primarily about the development of the Indigenous medical workforce, its activities are strongly coordinated and carried out in partnership with the Australian Indigenous Doctors’ Association (AIDA), which is illustrated through the Subcommittee’s joint chaising arrangement.

The current Co-Chairs are Professor Geoffrey Metz, past-President of the Royal Australasian College of Physicians, representing the CPMC, and Associate Professor Peter O’Mara, President of AIDA.

Professor Geoffrey Metz

Associate Professor Peter O’Mara
CPMC National Aboriginal and Torres Strait Islander Medical Specialist Framework Project (CPMC NATSIMSFP)

In January 2012, the second phase of the CPMC NATSIMSFP formally started off with the appointment of Dr Netra Khadka as the Senior Project Officer for the project.

After Dr Khadka’s appointment, the Subcommittee agreed to form a Project Working Group (PWG) to help facilitate smooth running and early outcomes for the project. The PWG was formed with 5 members.

In February 2012, the project carried out a questionnaire survey involving all 15 Colleges to investigate the gaps between the current activities of each College and the framework recommendations. All Colleges responded to the survey. Thank you to College staff involved!

It should be noted that the questionnaire survey contained 13 questions. Examples of some questions are as follows:

- Do you have data on Indigenous trainees/fellows?
- Do you have Indigenous medical specialist training, recruitment, retention and mentoring strategy?
- Have you developed an Indigenous health-related learning module, including e-learning?
- Do you have cultural competency training to college staff, medical trainees and fellows and also training modules, if any?
- In curriculum development and learning processes in your College, is there specific recognition of Indigenous knowledge and culture?
- Do you have recruitment and retention strategies in promoting employment?
Based on the analysis of survey data, the major findings of the survey were:

4 out of 15 Colleges (27.7%) had Indigenous trainees/fellows data.
2 Colleges (13.3%) had an Indigenous medical specialist training, recruitment, retention and mentoring strategy.
2 Colleges (13.3%) had on-line information regarding an Indigenous medical specialisation program.
9 Colleges (60%) had developed an Indigenous health-related learning module, including e-learning.
8 Colleges (53.3%) had cultural competency training to their College staff, trainees and fellows.
11 Colleges (73.3%) provided a specific recognition of Indigenous knowledge and culture in their curriculum development and learning processes.
4 Colleges (26.7%) had mentoring programs.
3 (20%) had recruitment and retention strategies in promoting Indigenous employment.

In summary, the majority of colleges reported their engagement in Indigenous health-related learning module development and also cultural competency training. They also reported the recognition of Indigenous knowledge and culture in their curriculum development. However, it was clear from the results of this survey that improved data collection, improved information about training programs for prospective trainees, sharing of knowledge about cultural competence and cultural safety, improved curricula in relation to Indigenous health in College training programs and a program to mentor Indigenous trainees through their training are changes that are likely to both strengthen the knowledge of Indigenous health in Australian medical graduates and to lead to increased numbers of Indigenous doctors and Indigenous specialists in the Australian healthcare system. The CPMC is thus supporting a critically important project which we believe will have tangible benefits for the health of our Indigenous population and we thank College Fellows and Staff for the assistance they are giving to the project.
As an early achievement, the project, based on the priority framework recommendations, has recently developed a standard questioning format which we hope will be used by each individual College for the purpose of collecting Indigenous status data. The format will be distributed to each College soon.

As part of the implementation of the framework recommendation, an on-line portal to provide information on the Indigenous medical specialist program is under development and will be housed on the CPMC website once the design has been completed by the end of September, 2012.

In order to facilitate the smooth running of the project, the PWG meets every 10 weeks. Additionally, a Project Liaison Group (PLG) comprising a representative from each of the 15 participating Colleges is currently under formation and will meet on an ad hoc basis to help inform and subsequently roll out project recommendations.

Although, there is much work to be done, the project is funded by Department of Health and Ageing (DoHA) only until the end of December 2013.

A copy of framework recommendations that primarily guide the project can be obtain from the SPO, Dr Netra Khadka by contacting him either at Netra.Khadka@surgeons.org or on 0499775996.
About Dr Netra Khadka, Senior Project Officer, CPMC NATSIMSFP

Dr Netra Khadka who originally hails from Nepal and migrated to Australia more than two decades ago commenced his position with the project in January, 2012. Dr Khadka is based at the RACS in the Fellowship Services Department in Melbourne. He is primarily a nutritionist and diabetes management specialist with long term experience in teaching, research and fieldwork in his field of expertise, especially focused on rural and remote health.

Dr Khadka holds several academic qualifications, including a doctoral, master, and postgraduate diploma. He previously worked with many international and national organisations including the Government of Nepal, the United Nations, the World Bank, the NT Government, the University of Melbourne, Victoria University, the Australian Red Cross and the Batchelor Institute of Indigenous Tertiary Education.

Dr Khadka is very passionate about rural and remote health development, especially in the areas of Indigenous health and has published many refereed articles in national and international journals, including Australia, US, UK and Nepal.

He is currently undertaking the second phase of the project until 31 December 2013.

Dr Khadka can be contacted on 03 9276 7449 or 0499775996, or by email at Netra.Khadka@surgeons.org
Highlights
Pacific Region Indigenous Doctors’ Congress (PRIDoC), 2012

It is exciting to note that the Sixth Pacific Region Indigenous Doctors’ Congress Conference is going to be held from 1 to 6 October 2012 in Alice Springs, Northern Territory, Australia.

The theme of the Conference is Connectedness, acknowledging the bonds Indigenous people share and the significance of their connection to land and culture to their health and wellbeing.

This project is proud of becoming a part of the Conference and is anticipating presenting a paper on the project objectives, activities and progress.

Network for Indigenous Cultural and Health Education (NICHE)

The Royal Australasian College of Surgeons (RACS) is currently embarking on a NICHE project that contains an Indigenous Health and Cultural Competency Online Portal.

The portal is a collaborative project between the RACS, the Royal Australasian College of Physicians (RACP) and the Australian College of Dermatologists (ACD), and is funded by the Rural Health Continuing Education program. Other partners include member Colleges of the CPMC, the Australian Indigenous Doctors’ Association (AIDA) and the National Aboriginal Community Controlled Health Organisation (NACCHO).

The portal aims to be a one-stop reference point for medical specialists seeking information and access to accredited learning modules, activities and resources in Aboriginal and Torres Strait Islander health. It also aims to encourage networking on a multidisciplinary level. Material linked via the portal will remain the property of the provider.
The Australian Indigenous Health and Cultural eLearning Project

The Royal Australasian College of Surgeons (RACS) is developing a series of eLearning modules, supported by face-to-face workshops, to assist surgical specialists to improve their understanding of the cultural and social factors impacting on health care access and health outcomes for the Aboriginal and Torres Strait Islander patients and communities under their care.

The project is funded by the Rural Health Continuing Education (RHCE) program, and in the first instance is targeting surgeons, surgical trainees and International Medical Graduates, working with Aboriginal and Torres Strait Islander communities in rural and remote Australia.

Please contribute to this newsletter by posting a feature story or milestone relating to the Indigenous medical specialists training program and/or Indigenous health development to Dr Netra Khadka at Netra.Khadka@surgeons.org on or before 15 October 2012 to publish it in the Highlight section of the next newsletter due to be published in November 2012.

©This newsletter is developed and published by Dr Netra Khadka on behalf of the CPMC National Aboriginal and Torres Strait Islander Medical Specialist Framework Project (CPMC NATSIMSFP), July 2012, Melbourne.