

President's Report



Dr Ted Weaver
President

It is my privilege to present the RANZCOG Annual Report for 2009. This year has seen a lot of College activity in many different areas, and it is constantly surprising, sitting in the President's chair, at the breadth of material that the College has to deal with throughout the year. The demands that various levels of Government make upon the College are ever increasing, and the College also has to be represented on any number of important non-government organisations, often through the dedicated efforts of Fellows, providing their services 'pro bono'. Through all this, the College has to maintain its very high standard as a standards and training body, and continue to advocate strongly on women's health issues for the betterment of the health of women in Australia and New Zealand. This report features in detail some of the important activities with which the College has been involved and also highlights other areas of evolving activity. It is timely to remember that the business of the College has been conducted this year during the worst global financial crisis since the Great Depression in the 1930s and this has had an impact on the College itself and on some of the programs that the College administers.

RANZCOG Strategic Plan

At the beginning of each new Council, the outgoing and incoming Executive and senior College House staff meet to discuss and formulate a strategic plan for the forthcoming new Council term. For the College to be effective and efficient in what it does, it is clearly important to have a strategic plan that is aligned with the College's Mission Statement and values, and articulates goals to be worked towards during the Council term.

The strategic plan has five domains:

1. Key external relations and policy development.
2. Corporate governance.
3. Workforce issues.
4. Member services.
5. Women's health issues.

This report will focus on the five domains of the plan and highlight progress and results since the start of the Sixth RANZCOG Council.

Key External Relations and Policy Development

Three important events have focused the attention on Council and Executive this year, the first being the Federal Government's release of its Maternity Services Plan, the second being the further development of the National Registration and Accreditation Scheme, and the third being a change in Government in New Zealand, which presented an opportunity to have some College input into a review of maternity services in that country. The College, in its day-to-day working, has interactions with all levels of Government, and views the development of good relations with the various jurisdictions seriously.

Maternity Services Review

The report from the Maternity Services Review, which was commissioned by the Rudd Labour Government in 2008, was released on 21 February at Sunshine Hospital, Melbourne, by the Federal Health Minister, the Hon Nicola Roxon. The Maternity Services Review report had a strong focus on safety and quality, and again highlighted that Australia is a safe place to give birth or be born. The review made 18 key recommendations including:

- the need for a National Perinatal and Maternal Morbidity and Mortality data set;
- the need for targeted research about obstetric interventions;
- the need for the development of multidisciplinary practice guidelines; and
- various improvements in the care of Indigenous remote and rural women.

The review recommends changes to access to the Pharmaceutical Benefits Scheme (PBS) and the Medicare Benefits Scheme (MBS) that would allow an increased role for midwives within collaborative team-based models of care. The review also highlights the need to investigate the possibility of funded midwife indemnity insurance.

In the Federal Budget released in May 2009, the Government allocated A\$120.5 million over four years for an Improving Maternity Services package, which included an enhanced role for midwives, with eligible midwives gaining access to PBS and MBS from 1 November 2010, and the funding of a professional indemnity scheme for midwives.

The Government is progressing with these reforms and convened the Maternity Services Committee on the 12 August 2009. The committee contains representatives from many different maternity care stakeholder organisations, and it is an advisory body to Government to prepare proposed changes to maternity care within Australia, following the proposals put forward in the Maternity Services Report.

The College has been very active in developing suggested models of collaborative maternity care and have been working with other maternity services groups to try to ensure that, with the proposed changes, maternity care in Australia will be enhanced, but will still maintain its very high level of safety. It is hoped that a number of the reforms in Australia will be utilised in New Zealand. This has been an area of intense activity for the College this year.

National Registration and Accreditation Scheme

The National Registration and Accreditation Scheme (NRAS), as proposed by the Council of Australian Governments (COAG), has been progressing throughout the year. The enabling legislation for the scheme (Bill A) was passed by the Queensland Parliament in June and further enabling legislation (Bill B) is undergoing drafting, and is expected to be passed in late September. The College, through the Committee of Presidents of Medical Colleges

(CPMC), has provided in principle support to a national registration scheme, but has expressed concerns about a number of aspects of the overall scheme, as originally proposed, on the basis of the potential to cause an erosion in clinical standards and patient safety. This includes aspects related to the way in which specialists are registered and identified under the new scheme.

A number of changes have been made to Bill B and I am certain that they have come about because of the opposition mounted to the scheme by the specialist colleges.

New Zealand Committee Meeting with the New Zealand Minister of Health

With the election of a new New Zealand Government headed by the Hon John Key, the New Zealand Committee sought a meeting with the new Health Minister, the Hon Tony Ryall. This has subsequently led to a number of initiatives, including:

1. Development of a Maternity Action Plan, which will include better audit provisions and outcome reviews. There is also to be an emphasis on general practitioner training in obstetrics and an alteration in the funding of maternity services, which could lead to a renewal of involvement of GPs in maternity care.
2. Development of a subspecialty workforce as the country is chronically short of these, especially in gynaecological oncology and obstetric and gynaecological ultrasound.
3. Development of a screening program for aneuploidy.
4. Provision of anti-D in the antenatal period.

Corporate Governance Governance Review

With the increasing complexity of College business and the need for rapid responses to Government and other bodies, the governance structure of the College has, at times, been found less than optimal. In particular, there is a deepening perceived 'disconnect' between Federal Council and the regional committees. In recognition of this, College Council agreed to convene a working party to look at the current governance structure, and develop a blue print for a revised structure which would be in line with modern corporate governance structures. The working group was convened under the chairmanship of the President, and contains representatives from Australia and New Zealand, Executive and Council, the Trainees' Committee, RANZCOG CEO, and Mr Les Apolony, the CEO of the Committee of Presidents of Medical Colleges.

The working group met by teleconference on a number of occasions and presented a proposed governance structure to a forum held during Council week in July 2009. Following further discussion, it is hoped that a refined, new governance structure could be assessed and passed by Council in November. If it is approved by Council, it would then be voted upon by the general Fellowship in a plebiscite, and if finally approved, the next RANZCOG Council (the seventh), would be elected under the new model.

Workforce Issues

It is imperative that RANZCOG has accurate figures about the O and G workforce in Australia and New Zealand, both now and in the near future, to enable workforce planning. In the past, the College has undertaken surveys of the Fellowship, but it has still been difficult to get data on specific practice, for example, how many Fellows practice private obstetrics, or how many Fellows practice self-referred ultrasound. To address this, the College has developed an online practice profile, which will be circulated to all Fellows in the coming year, to better inform the College of individual Fellow's practice profile and scope of practice.

Overseas Trained Specialists

In 2009, thus far, the College has assessed 89 doctors for their possible equivalence to an Australian or New Zealand trained specialist, or for appointment to an Area of Need position. Doctors

are assessed in a range of ways, as per a system coordinated by the Australian Medical Council, and a similar process for the College now operates for international medical graduates in New Zealand. In Australia, doctors are classified under three bands: substantially equivalent, partially equivalent, or no equivalence. They then progress down a defined pathway to advance towards attainment of the College Fellowship. This is a complex and difficult area of College business and one that is ever expanding. In order to ensure that the College assessment process remains as robust as possible, a College working party will report next year on possible improvements to the current system.

Education and Training

Education and training are core activities of College business. In late 2008, the College appointed Mr Julian Cross as Director of Education at the College. This appointment was made as part of an ongoing review of the College organisational structure, to enable increased coordination of the College departments responsible for education and training and to ensure the capacity of the College to interact as necessary with external stakeholders.

In recent times, there has also been much discussion about the College training program, in particular, the elective years of training in years 5 and 6. In July 2008, during Council week, there was a College forum about the system of modular training in place for the advanced years of the Royal College of Obstetricians and Gynaecologists (RCOG) training program and the possible applicability of the system to the RANZCOG training program. A further forum was held in March 2009 to look critically at the possibility of introducing such a system into Australia and New Zealand. This is an area that is still unresolved, as it represents a significant divergence from the way we have run the elective years in the past. With changing workforce demographics, with over 70 per cent of trainees now female, and with the challenges of ensuring that recent graduates are able to develop their scope of practice, it is essential we have a training program that meets the needs of trainees, yet still meets workforce needs in subspecialty and generalist areas in both Australia and New Zealand.

Conjoint Committee for the Diploma of Obstetrics and Gynaecology (CCDOG)

This year saw the replacement of the Joint Consultative Committee on Obstetrics (JCCO) with the CCDOG. This has been important from the College's perspective, as we now have overall responsibility for the the Diploma, while still working together with the Royal Australian College of General Practitioners and the Australian College of Rural and Remote Medicine. The main committee is supported by two subcommittees, one devoted to education and assessment and the other to training and recertification. During the next year, it is anticipated that reviews of the Diploma curricula will be complete and that revamped courses will be available, to better equip GPs and GP obstetricians for their desired scope of practice.

Member Services College Finances

As mentioned above, the College has been operating within the constraints of the global financial crisis. The College, as a not-for-profit organisation, has noticed a significant drop in income from College investments, and the management of the College has had a significant challenge in framing a budget for the 2009/10 financial year. After a comprehensive review of all College activities and with appropriate pruning of programs, the College has essentially been able to have a balanced budget. Areas in which budgets have been pruned are travel and accommodation, teleconferences and postage.

As recently as ten years ago, a large proportion of the College's income was derived from subscriptions paid by College Fellows, Members and Diplomates. This proportion has been reduced in the

last six years, with income being derived from other streams, and membership subscriptions have usually only increased in line with changes in the Consumer Price Index (CPI).

A few years ago, Council made a decision that all Fellows should have a current email address by the end of 2009, and with greater use of electronic communication, further savings should be managed. I think that it is important to reassure all members of the College that we are in a sound financial position, however, as with virtually all organisations in this environment, that position needs constant review, and I would like to pay tribute to the Finance department for their sound and prudent advice in what has been a difficult time for the College.

Indigenous Women's Health

The College is aware of the poorer maternity outcomes in Indigenous women in both Australia and New Zealand. This has been a perennial problem, and that was brought into sharp focus at the RANZCOG Australian Indigenous Women's Health Meeting in Darwin in August 2008. Council has considered the outcomes of that conference and aims to build on its success. Given that we are a standards and training body with finite resources, Council thought it best to have some defined goals. The Indigenous Women's Health Committee was previously a subcommittee of the Women's Health Committee, but it has now been granted full committee status by Council. Its Terms of Reference will include references to both Australian and New Zealand issues, as problems are similar in both groups. As a start to build on the impetus of Darwin, the College has partnered with the Australian College of Midwives to run a conference in Alice Springs in July 2010 to provide education and a forum for remote and rural maternity care workers.

Other Issues

There are many issues currently being discussed and worked on by Council and College House staff. Some of these include:

- Analysis of the success and utility of The Australian and New Zealand Journal of Obstetrics and Gynaecology (ANZJOG) and how it can be improved and optimised as a resource for College members
- Investigation of the possibility of the College's CPD program going online
- How best we can further improve women's health and maternity outcomes in the Pacific, Papua New Guinea and East Timor
- How the College can work most effectively with the RANZCOG Research Foundation.

There were three events which happened this year, which did take up a lot of time, and I would like to highlight them. They were the Victorian bushfires, the swine flu pandemic, and the tenth anniversary of the amalgamation of the Australian and New Zealand Colleges.

Victorian Bushfires

The Victorian bushfires, with their grim and dreadful aftermath, and with so many lives and property lost, dominated the news in

Australia in February 2009. When news of the tragedy broke, the College contacted the Victorian Health Department to enquire if there was anything that we, as a College, could do to help the relief effort. We were reassured that, operationally, things were under control and they requested a monetary donation. With the general support of College Council, recognising that many Fellows would make an individual donation, the College made a financial donation to the relief effort. College House staff also organised donations of essential items to the bushfire victims.

Swine Flu Pandemic

The evolution of a new strain of swine flu, which possibly arose in Mexico and then rapidly spread around the world in the first half of 2009, again demonstrated that we do live in a global community. The swine flu pandemic also exemplified the advances that have been made in public health and virology, with rapidly updated travel warnings, the rapid identification and sequencing of the new virus, mobilisation and quarantining of antiviral therapeutic agents, and a national plan for management of swine flu cases.

The College, through its Women's Health Committee, was active in the media about precautions to be taken by pregnant women for swine flu, the safety of influenza vaccines in pregnancy and the need for pregnant travellers to heed travel warnings.

As the pandemic progressed in Australia, the College was also active in providing up-to-date management advice for pregnant swine flu victims on the College website.

Ten-year Anniversary of the Amalgamation of RACOG and RNZCOG

2008 marked the ten-year anniversary of the amalgamation of the Australian College and New Zealand College of Obstetricians and Gynaecologists. The College held a celebration dinner at the end of November Council to mark this event. A number of the people who were responsible for the amalgamation were honoured at a dinner held at College House.

During the ten years of amalgamation, RANZCOG has matured into a larger and more flexible organisation, which has been to the benefit of both Australia and New Zealand, and to the Pacific region.

In finishing this report, I would like to pay tribute to the College House staff, in particular, the CEO, Dr Peter White, and the senior managers who have done a sterling job in superintending them. Also, the College could not function without the large number of our Fellows, Members and Diplomates, who give freely of their time to sit on College committees, examine, act as training supervisors, form part of a hospital accreditation team, and many other tasks. It is a hallmark of their work that the College is generally held in high regard and I wish to sincerely thank each and everyone of you.

Jack Courier (1915-2007) Lithographs

In 2007-2008 the RANZCOG Research Foundation was the recipient of a very generous bequest from the Australian lithographic artist, Auguste John 'Jack' Courier. Included in the bequeathed estate was a collection of his works, selected items of which appear throughout this Annual Report. These and many other works, including some by his late wife, Mary Elizabeth Courier, in whose name a new scholarship has been established, are an important and substantial collection held by the RANZCOG Research Foundation, which I

and the Board of Directors look forward in the future to sharing more extensively with the membership of the Foundation and the College.

Professor David Healy
Chair, Board of Directors
RANZCOG Research Foundation



RANZCOG
Research Foundation