

2023 ANNUAL REPORT

Year ending 30 June 2023



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RACMA acknowledges that the College office is on the unceded lands of Naarm on the traditional lands of the Woi Wurrung language group of the Wurundjeri People from the Kulin Nation.

RACMA acknowledges and pays our respects to elders past and present of Aboriginal and Torres Strait Islander Peoples.

RACMA acknowledges that Māori are the Tangata Whenua of Aotearoa New Zealand.

RACMA also acknowledges and pays our respects to the Traditional Custodians of the lands upon which all Australasian Medical Leaders and Managers perform their duties.

About RACMA

RACMA is unique as a provider of medical management and leadership qualifications as it is the only specialist medical educator whose programs are recognised for the granting of Specialist Registration in Medical Administration.

Put simply, RACMA offers "Medical Leadership Education by Doctors for Doctors" who want to influence the health outcomes of many.

The Fellowship Training Program offered by RACMA is accredited by the Australian Medical Council and the New Zealand Medical Council. Fellows of our College are recognised as medical specialists.

RACMA offers medical leadership education programs suitable for all stages of a medical career:

- **Fellowship Training Program**
The Fellowship Training Program is designed around the Medical Leadership and Management Curriculum. Candidates develop the knowledge, skills, and attributes required of a RACMA Fellow (FRACMA). Upon completion, Candidates can apply for Specialist Registration in Medical Administration with the Medical Board of Australia or the Medical Council of New Zealand.
- **Leadership for Clinicians Program**
A program for emerging and experienced clinician leaders covering six study themes over a four- to six-month period. Upon completion, participants are eligible to apply to elect to Associate Fellowship.
- **Management for Clinicians**
A short program for clinicians planning to work in leadership and management roles. The program topics include clinical governance, health system finance foundations, communications for leading teams, and clinician to clinician manager.

The College also offers extensive professional development opportunities and the annual conference, which attracts a network of medical leaders from across Australasia and the world.

RACMA is committed to achieving excellence in the Specialty of Medical Administration in Australia, Aotearoa New Zealand, and the Asia-Pacific Region, in order to enhance and maintain high standards of health care across the region.

A RACMA Fellowship leads to a range of senior positions including:

- Chief Medical Officers
- Directors of Medical Services
- Chief Executives of hospitals and universities
- Chief Health Officers of government jurisdictions
- Heads of health authorities
- Heads of divisions of medical services
- Consultants to governments and private sector health services
- Public policy and health program management in information technology and pharmaceuticals

Mission

To educate, train, and promote the skills of specialist medical leaders and managers, enabling our Members and College to influence and lead high quality, safe health services and systems.

Vision

That all health care systems and medical professionals are supported by the highest standard of qualified medical leadership and management to enhance the health outcomes of patients, health care services, and the communities they serve.

RACMA continues to grow its value to Members and be recognised internationally, as the Australasian medical college that provides specialist education, leadership, advice, and expertise in Medical Leadership and Management that promotes the delivery of high quality, safe care for all.

Core Values

- Professionalism** — Demonstrating self-governance, high standards, and ethical behaviour
Integrity — Doing the right thing in all situations
Excellence — Striving for outstanding achievement despite constraints
Respect — Acknowledging and valuing others' thoughts, opinions, and feelings



“
LEADERSHIP EDUCATION
BY DOCTORS, FOR
DOCTORS, WHO WANT
TO INFLUENCE THE
HEALTH OF MANY.
”

President's Report



this, and to be successful. The year has proven RACMA is certainly a team to behold. What has been achieved by our Members, leaders and staff has set the College on an exciting upward trajectory.

Partnerships & Collaborations

Through collaborative projects such as joint research, and shared training programs, we can learn from each other's experiences, gain new perspectives, and acquire valuable skills and expertise. This knowledge sharing contributes to professional development, organisational growth, and the overall advancement of healthcare.

Over the past 12 months RACMA has re-engaged with our colleagues in Hong Kong and with the Hong Kong College of Community Medicine. For over 20 years RACMA has had a formal Memorandum of Understanding with the Hong Kong College of Community Medicine to facilitate the development of a high standard of professional practice in Administrative Medicine in Hong Kong.

The College is very happy to have partnered with the Royal Australasian College of Surgeons (RACS) to make the Operating with Respect online learning module available for all Members this reporting year. The Operating with Respect module was developed by RACS to improve our knowledge and understanding of unacceptable behaviours.

Key meetings were held with the Australian Medical Students Association (AMSA), the UNSW Centre for Future Health Systems, the New Zealand Medical Council, key Aotearoa health/government bodies and the Royal Australian College of General Practitioners (RACGP) to explore opportunities to further collaborate and engage with these key stakeholders to amplify the College's voice and advance Medical Leadership in healthcare. By working together, we can present a unified perspective and engage with decision-makers more effectively.

RACMA has also increased its representation across numerous industry working groups and committees including the National Workforce Distribution Working Group, Rural Health Alliance and the Royal Australasian College of Physicians Healthy Climate Future campaign.

We also partnered with other Medical Colleges to support the Pride in Medicine organisation's float at this year's Sydney Mardi Gras parade. And we continue to foster our key partnership with Advancing Women in Healthcare Leadership (AWHL), the Hush Foundation, BMJ Leader and the Faculty of Medical Leadership and Management in the UK.

Reflecting on the 2022/23 reporting period, it has been extremely busy and productive for a college the size of RACMA. From meetings and collaborations with government decision makers, industry regulators, peak bodies and leading researchers, to strengthening our training and professional development programs, increasing Member engagement, enhancing the Medical Leader identity and improving our systems and processes — the bottom line is it takes a team effort to achieve all of

A Better Culture

In late 2022, the Commonwealth approached RACMA to undertake a project to start addressing the culture of medicine following disturbing results from the Medical Board of Australia's Medical Training Survey. A Better Culture CEO and FRACMA Dr Jillann Farmer has been working hard engaging with every specialty medical college as well as key groups representing nursing and allied health.

Reference groups have been established which will help to inform key deliverables and outputs beyond the first phase of engagement to developing a pathway forward. A qualitative analysis conducted by the Nous Group has been released, based on interviews with 20 Fellows and Associate Fellows with senior and extensive health leadership experience. The report is the project's first window into the experiences, challenges, wisdom and beliefs of senior medical leaders, and I encourage you to read it in full on the RACMA website.

Constitution Amendments

Two years of tireless work from the College's Constitutional Working Group came to fruition this year when changes to the RACMA Constitution were unanimously passed at the Extraordinary General Meeting.

The amendments ensure the RACMA Constitution is contemporary and flexible to allow the College to be agile in the future. It is a great and pivotal achievement. I would like to take this opportunity to thank all the members of the Constitutional Working Group:

- | | |
|----------------------------|----------------------|
| • Dr Helen Parsons CSC | President |
| • Professor Erwin Loh | Vice President |
| • Professor Anthony Lawler | TAS Fellow |
| • Dr Jennifer Alexander | NSW Fellow |
| • Dr Bill Appleton | VIC Fellow |
| • Dr Divy Dua | ACT Affiliate |
| • Dr Felicity Jensen | QLD Fellow |
| • Dr Helen Freeborn | NSW Fellow |
| • Dr Antony Sara | NSW Fellow |
| • Dr Iwona Stolarek | Aotearoa NZ Fellow |
| • Dr Angela Williams | VIC Associate Fellow |
| • Dr Mary Boyd Turner | SA Fellow |

Scope of Practice

After much work from several Members and College staff, the College launched its first [Scope of Practice](#) this year. The document is a very big step forward in the life of the College and its Members, ensuring we can now clearly clarify the core role and contribution of Medical Leaders within the health system. It will assist us in many ways, including supporting Members with aligning their CPD activities to their scope of practice, training of our Candidates, and recognition by health services and health departments of the skills and abilities of our Medical Leaders. It will also be a real basis to grow other aspects of work of the College into the future and provide leverage as we progress in raising the profile of the RACMA Fellow.

Connecting with Members

RACMA's much anticipated first overseas study tour came to fruition in July this year with a group of 16 Members who travelled to the UK. For eight days, members engaged with a wide range of senior leaders and managers on health systems structures, planning, funding, integration, clinical governance, innovations and challenges. The group heard from executives from the National Health Service (NHS), the General Medical Council and the Faculty of Medical Leaders and

Managers, as well as senior and front-line leaders in the public and private sectors. The tour was such a success, planning is underway for the next one.

At the beginning of the 2023 year, the Wednesday Member Forums moved to monthly. Guest presenters across the 2022/23 financial year have included a mix of high-calibre healthcare leaders providing much food for thought on current issues impacting the health system. They included:

- The Hon Bronnie Taylor MLC, Minister for Women, Minister for Regional Health and Minister for Mental Health, Deputy Leader NSW Nationals
- Dr Pete Watson, Interim National Director - Medical, Te Whatu Ora - Health New Zealand
- Adjunct Professor Michael Nicoll, Chief Executive, NSW Clinical Excellence Commission
- Dr Anne Tonkin AO, Chair Medical Board of Australia
- Professor Mohamed Khadra AO, Professor of Surgery, Sydney Medical School University of Sydney and Clinical Director of Surgery Nepean Hospital
- Dr Elizabeth Moore Royal Australian and New Zealand College of Psychiatrists (RANZCP) President
- Uncle Alan Parsons, Metro North Health (Brisbane) Cultural Community Adviser
- Dr Paul Evans Medical Director Faculty of Medical Leadership & Management, UK
- Professor Geoff McColl, President Australian Medical Council (AMC)

Training, Education & Accreditation

The Medical Management Practice Oral Examination and Trial Oral Examination were again delivered online in the 2022/23 reporting period. And again, the College's exam success is a testament to the hard work and diligence by the National Office and Censors. I congratulate all the Candidates who were successful, and I commend all participating Candidates for their commitment to the Fellowship Training Program and achievement in completing the exam. I also acknowledge the significant preparations undertaken from January 2023 to June 2023 for the return of face-to-face exams for the next financial reporting year.

The Leadership for Clinicians Program (LFC) continues to be very popular and has again been delivered through a blended model of face-to-face and online along with online only cohorts. For the first time this year the College customised a program tailored specifically for clinicians working in the private sector. And LFC Scholarships for Aboriginal and Torres Strait Islander and Māori participants again attracted strong applicants.

In the past 12 months there has been much work on the Fellowship Training Program (FTP) Renewal project with the establishment of focus groups of Candidates and Fellows and the completion of one consultation on the RACMA Medical Leadership and Management Curriculum. This is a critical piece of work for the future of the College, and I acknowledge the work of the working group led by Professor Pooshan Navathé. I also acknowledge the support of the membership in providing valuable feedback to ensure we have a training program which meets the needs of RACMA Candidates and the communities they serve.

As a College focused on Medical Leadership and Management, we

fully recognise that enhancing our highly skilled specialist workforce requires a commitment to a shared understanding of the key issues and transparent communication across all stakeholders. As such the Board decided to take the front foot with government Health Ministers across all our jurisdictions and sent letters detailing our forward approach to keep them regularly informed of the status of Training Posts linked with specialist training for RACMA trainees. It is hoped that this open line of communication will alleviate any concerns relating to accreditation processes and outcomes.

First Nations

One year on from appointing the College's inaugural First Nations Advisor, Nadene Edmonds, the College has made significant progress in our commitment to reconciliation and improving health access and outcomes for First Nations' communities in Australia and Aotearoa New Zealand. Details around the key pieces of work, including our Reconciliation Action Plans can be found in this report on [page 30](#).

Our engagement and relationship building continues to go from strength to strength with key First Nations stakeholders, including the Australian Indigenous Doctors Association (AIDA), the Leaders in Indigenous Medical Education Network (LIME), the Lowitja Institute and the Māori Medical Practitioners Association Te Ora. Ongoing engagement and cross collaboration with other medical specialty colleges continues with several of the colleges beginning to approach RACMA for advice in the First Nations cultural competency space.

People

As I mentioned first, it takes a team to achieve success and navigate the challenges of our complex operating environment as leaders. RACMA continued to inject new expertise and experience into key leadership roles across the College, welcoming:

- New Censor-in-Chief — Dr Darrell Duncan
- New Chair Accreditation Committee — Dr Claire Blizzard
- A Better Culture Chief Executive — Dr Jillann Farmer
- New Lead Fellow for Clinical Governance — Dr David Rankin
- New Board Directors — Dr Debbie Holdsworth, Professor Anthony Lawler, Dr Cameron Korb-Wells, and Professor Jane Bryson

They take the baton from some highly talented Members who have laid the foundation for success. On behalf of the Board, I sincerely thank:

- Dr Peter Lowthian, who stepped down as Censor-in-Chief after four years.
- Dr Stephen Ayre, who stepped down after eight years as Chair Accreditation Committee.
- Dr Mary Boyd Turner, who stepped down as the inaugural Lead Fellow Policy and Advocacy.

Finally, I express the Board's gratitude to the team in the RACMA National Office for their continued work and dedication towards the College's outstanding achievements throughout the past year.

Equally, I acknowledge and thank my Board colleagues and Members who volunteer their time to serve on the many RACMA committees and in key College leadership roles. Medical colleges depend significantly on volunteers. They benefit not only from those who put themselves forward regularly but also from having a range of people involved who bring different experiences and strengths over time.

**Dr Helen Parsons CSC
President**

Chief Executive's Report



As we enter the final phase of the RACMA Strategic Plan 2021-2024, it has been pleasing and rewarding to see many elements of the College's key objectives coming to fruition. The College has four key strategic objectives:

- 1. To be the recognised & respected **VOICE** of Health Leadership, Management, and Governance
- 2. To be the pre-eminent provider of Medical Leadership & Management **EDUCATION & TRAINING**
- 3. To deliver High-Quality **MEMBER SERVICES** & support
- 4. To advance and expand **INFLUENCE** as a College

The 2022/23 reporting period saw RACMA develop, implement, and complete several activities and projects aligning with our College strategy to deliver on these key objectives.

Amplification of our VOICE

Over the past 12 months, the outputs from Members leading our policy and advocacy agenda have been impactful. Led by the Policy & Advocacy Committee (PAC) our priority areas clearly focus on:

- Medical Workforce
- Indigenous Health
- Diversity and Inclusion
- Rural Health
- Digital Health

Supported by College staff, we have increased our work on position statements and industry and government consultation submissions, while advocating on issues impacting medical leadership and providing representation on key healthcare advisory and working committees/groups across Australasia.

Key highlights include:

- Advocacy for trained medical leaders in all medical leadership and management positions.
- Support for Members and improving wellbeing and culture in healthcare.
- Fostering medical leadership in First Nations healthcare to enable cultural competence.
- Advancing women in health leadership.
- Supporting increased diversity, equity, and inclusion across our membership
- Strengthening medical leadership in rural healthcare.

The College is critically aware it is our Members who are central to upholding clinical governance principles. As such, the RACMA Board endorsed a program of work which aims to position RACMA as the national authority on clinical governance practice.

This work was initiated following a meeting, convened by RACMA, with Ahpra, the Medical Board of Australia, the Australian Commission on Safety and Quality in Health Care and the NSW Clinical Excellence Commission, where RACMA initiated the project and will provide

the leadership for the development of practical tools and training in clinical governance.

The program of work, which is being led by Fellow Dr David Rankin, will involve:

- Establishing an advisory group of Members
- Defining the components of clinical governance
- Producing a series of podcasts addressing common challenges in clinical governance
- Creating a clinical governance self-assessment tool
- Developing and delivering an integrated series of training programs

The response from the membership has been overwhelmingly positive and RACMA is now poised to take advantage of this opportunity which will be pivotal to the future growth and success of the College.

World-class EDUCATION & TRAINING

All Members of RACMA know the importance of refreshing our flagship offering, the Fellowship Training Program (FTP) and I am pleased that we have spent the past 12 months making great progress on the Program's renewal via the Member-led FTP renewal working group.

The Board have invested significantly in resourcing the FTP refresh project and under the leadership of the Chair of our Education and Training Committee, I am confident that we can create a product that is contemporary, future focused and meets the needs of our Candidates and employers of FRACMA's.

The renewed FTP will go live in 2025.

In addition to our flagship program, there has been significant demand for College-provided education and training via our premium offerings — Leadership for Clinicians and Management for Clinicians.

The College is often approached to create and tailor bespoke offerings based on these well-regarded programs and we are delivering these in a range of locations, settings and collaborating with other Colleges and professions.

The RACMA Conference returned to a thriving face-to-face Member event this reporting period, with phenomenal success in Hobart. The event attracted more than 300 attendees in person and a further 150 online. Congratulations to the Conference Committee and the Tasmanian Jurisdiction on showcasing RACMA and Medical Leadership under the theme "Equity and Access — Healthcare for All".

Delivering on MEMBER SERVICES

Our ongoing investment in key areas is primarily focused on providing seamless Member experiences and services across all membership categories of the College.

Over the past 12 months, we have commenced a multi-million dollar Technology project commonly referred to as 'Project Nexus'.

This Project aims to deliver a Member relationship and training management system that will be contemporary and Member-focused to ensure the College is providing our key stakeholders with the best experience and engagement with their College. We will endeavour to remove barriers, frustrations and antiquated processes and procedures to be a more agile and responsive College as part of this Project.

It is anticipated the Project will be finalised by October 2024.

Our RACMA community continues to grow and flourish with a significant increase in Associate Fellows joining the College in 2023. There is a strong sense of identity and belonging across all our Member categories and we will continue to work on providing greater value and support for our Members in 2024 and beyond.

One of our strongest growth opportunities within the profession is becoming a CPD Home, and we have had significant interest from medical professionals not traditionally aligned with our College. Our growing CPD program and short courses will continue to grow in 2024 and beyond given the demand for medical leadership and management.

This year we launched a new CPD Short Course Program. With the new CPD frameworks in Australia and New Zealand, RACMA felt it was important to support our Members by providing high calibre programs to support your professional development. Eight courses were delivered over four months covering topics such as managing innovation in healthcare, assertive communication, authentic leadership, and conflict resolution.

RACMA's Jurisdictional Committee network is central to the way the College conducts its business. We are continuing to work closely with our Jurisdictions to ensure we have the appropriate structures and resources available to continue the work of the College.

Having a greater INFLUENCE

One of the great achievements for RACMA this reporting period is having custodianship of the Australian Department of Health's 'A Better Culture' project.

By being entrusted with such a powerful and important project demonstrates the ability for our College to have impact and influence in the profession and the broader health system.

The Board also commissioned additional work on how the College can continue to grow and flourish to ensure we continue having an impact across our stakeholders. The RACMA Growth project is looking at

mapping a pathway to strengthen and fine tune our value, purpose, recognition, and relevance within the health system, whilst exploring ways to increase our membership.

This project will deliver key recommendations to the Board relating to RACMA's brand, audiences and opportunities based on trends and needs into the future. This is an exciting piece of work that will bear fruit in 2024 and beyond.

In referencing the future, we are close to releasing the College's report on Medical Leaders for Current and Future Health Care 2023. This report will guide our Members and staff on the future of medical leadership and what will be required in 2030 and beyond.

Finally, as we look to establishing our new strategic plan, I encourage all Members to become involved and contribute to the future direction of your College. Members will have an opportunity to engage and provide their input in ensuring RACMA continues to be forward-looking, relevant, and influential into the future.

I must acknowledge the stewardship and support of the RACMA Board, led by College President Dr Helen Parsons CSC.

Under Helen's leadership, the Board is determined to:

- strengthen RACMA's reputation as the leading medical leadership and management education and training provider for medical practitioners
- strive for increased innovation in the delivery of our education, training, and Member services
- increase participant numbers in our training programs
- drive more engagement and support for our Members and
- be the respected and expert voice in decision-making and policy formulation at all levels of healthcare leadership and delivery.

I look forward to the next 12 months and the exciting times ahead for RACMA.

Cris Massis
Chief Executive

“ One of the great achievements for RACMA this reporting period is having custodianship of the Australian Department of Health’s ‘A Better Culture’ project...being entrusted with such a powerful and important project demonstrates the ability for our College to have impact and influence in the profession and the broader health system.

RACMA Board of Directors



Dr Helen Parsons CSC
President



Prof Erwin Loh
Vice President



Prof Alan Sandford AM
Chair, Finance & Audit Committee



Prof Pooshan Navathé
Chair, Education & Training Committee



Dr Helen McArdle
Fellow



Dr Debbie Holdsworth
Fellow



Professor Tony Lawler
Fellow



Dr Angela Williams
Associate Fellow



Dr Cameron Korb-Wells
Candidate



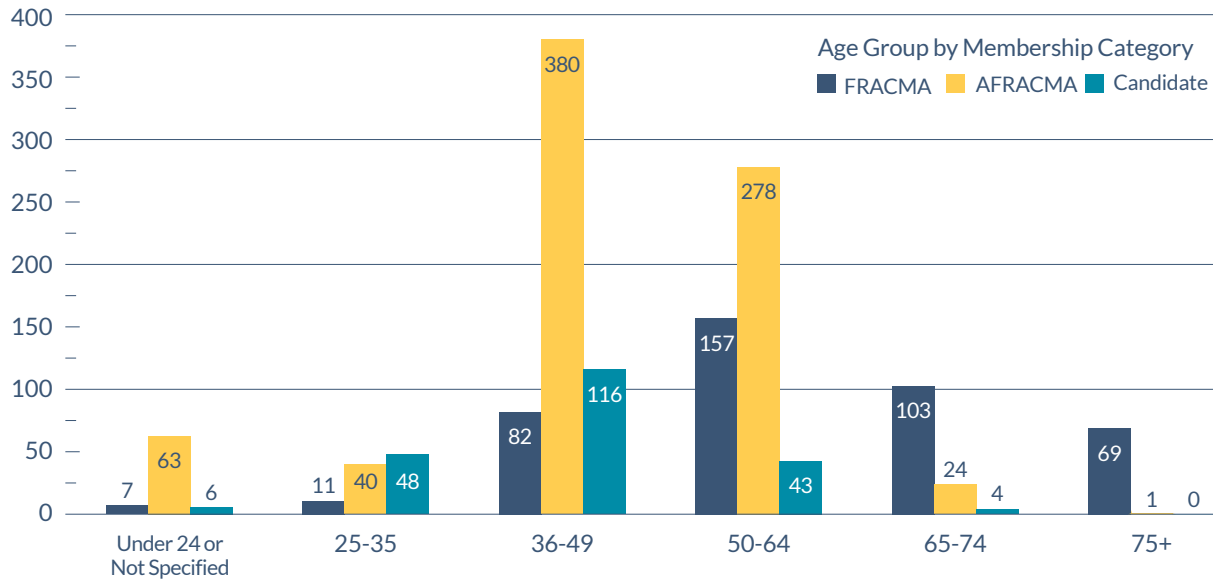
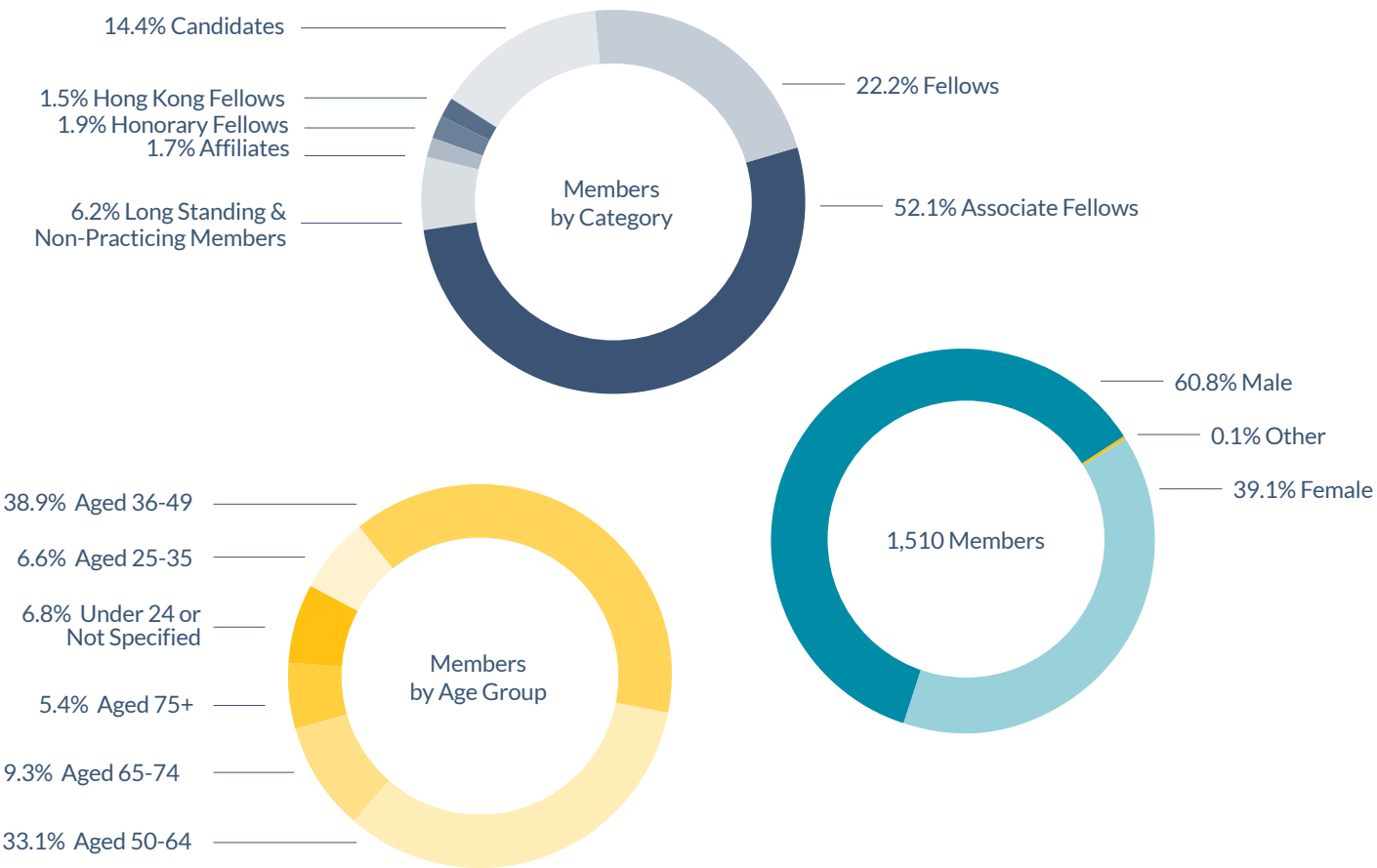
Adj Prof Gillian Biscoe AM
External Board Member



Prof Jane Bryson
External Board Member

Membership by the Numbers

- Membership has grown from 1,417 Members in 2021/22 to 1,510 in 2022/23. This includes Members in Hong Kong (27) and overseas (12).
- Age Group with the largest recorded number of Members = 36-49 (587)
- Number of Honorary Fellows = 28



RACMA Committees

FINANCE & AUDIT COMMITTEE	
Professor Alan Sandford AM	Chair
Dr Helen Parsons CSC	RACMA President
Associate Professor David Hillis	Fellow
Dr Robyn Lawrence	Fellow (until August 2022)
Professor Lester Levy CNZM	Fellow (from October 2022)
Adjunct Professor Gillian Biscoe AM	External RACMA Board Member
Ms Vase Jovanoska	External Committee Member
Dr Hash Abdeen	Candidate (from April 2023)
Dr Umesh Gupta	Candidate (until January 2023)
Mr Cris Massis	RACMA Chief Executive

QUARTERLY JOURNAL EDITORIAL COMMITTEE (FROM JUNE 2023)	
Dr Andrew Robertson CSC PSM	FRACMA, Chair, Honorary Editor, Western Australia
Professor Erwin Loh	FRACMA, RACMA Board Representative, Victoria
Dr Arnab Banerjee	AFRACMA, New South Wales
Dr Greg Watters	FRACMA, New South Wales
Dr Peter Bristow	FRACMA, Queensland
Dr Lachlan Gordon	FRACMA, Queensland
Dr Sharon Anne McAuley	AFRACMA, Queensland
Dr Lea Merone	Candidate, Queensland
Dr Nicki Murdock	FRACMA, Queensland
Dr Srinivas Bulkapuram	Candidate, South Australia
Associate Professor Taryn Bessen	Candidate, South Australia
Dr Emily Kirkpatrick	AFRACMA, South Australia
Dr Shriram Nath	AFRACMA, South Australia
Dr Rafiqul Islam	AFRACMA, Victoria
Associate Professor Bruce Waxman OAM	AFRACMA, Victoria
Associate Professor Alastair Mah	FRACMA, Overseas

POLICY & ADVOCACY COMMITTEE	
Adjunct Professor Gillian Biscoe AM	External Board Member – Chair
Professor Erwin Loh	RACMA Vice President
Dr Mary Boyd Turner	Lead Fellow Policy & Advocacy (until January 2023)
Dr Monica Trujillo	Co-Chair Digital Health Policy & Advocacy Sub Committee (from May 2023)
Dr Oliver Daly	Co-Chair Digital Health Policy & Advocacy Sub Committee (from May 2023)
Dr Scott Ma	Co-Chair Diversity and Inclusion Policy & Advocacy Sub Committee (until March 2023)
Dr Mary Ann Ferreux	Co-Chair Diversity and Inclusion Policy & Advocacy Sub Committee
Dr Lloyd McCann	Co-Chair Diversity and Inclusion Policy & Advocacy Sub Committee (from March 2023)
Associate Professor Luis Prado	Chair Indigenous Health Policy & Advocacy Sub Committee (until December 2022)
Dr Peter Jansen	Co-Chair Indigenous Health Policy & Advocacy Sub Committee (from January 2023)
Dr Brad Murphy OAM	Non Member Aboriginal and Torres Strait Islander Co-Chair Indigenous Health Policy & Advocacy Sub Committee (from January 2023)
Dr Alison Dwyer	Chair Medical Workforce Policy & Advocacy Committee (until December 2022)
Associate Professor Peter Thomas	Chair Medical Workforce Policy & Advocacy Committee (from December 2022)
Dr Joe McGirr	Chair Rural Policy & Advocacy Sub Committee
Dr Donald Mackie	Fellow, Co-opted
Dr Christina Wilkinson	Australian Capital Territory Jurisdictional Committee Chair (until April 2023)
Dr Robyn Walker	Australian Capital Territory Jurisdictional Committee Chair (from April 2023)
Dr Andy Simpson	Aotearoa New Zealand Jurisdictional Committee Chair
Dr Antony Sara	New South Wales Jurisdictional Committee Chair
Dr Gail Robinson	Queensland/ Northern Territory Jurisdictional Committee Chair
Dr Jayanthi Jayakaran	South Australia Jurisdictional Committee Chair (until August 2022)
Dr Mary Boyd Turner	South Australia Jurisdictional Committee Chair (from August 2022)
Dr Peter Renshaw	Tasmania Jurisdictional Committee Honorary Secretary (until February 2023)
Dr Ruth Kearon	Tasmania Jurisdictional Committee Chair (from April 2023)
Dr Kate Worsley	Victoria Jurisdictional Committee Chair
Dr Poh-Kooi Loh	Western Australia Jurisdictional Committee Chair
Dr Raj Ubeja	Chair Candidate Advisory Committee (until February 2023)
Dr Isabelle Kapterian	Chair Candidate Advisory Committee (from March 2023)

INDIGENOUS HEALTH POLICY & ADVOCACY SUB COMMITTEE	
Associate Professor Luis Prado	FRACMA, Victoria Jurisdictional Committee Chair (until December 2022)
Dr Peter Jansen	FRACMA, Aotearoa New Zealand Māori member (until January 2023) Co-Chair (from January 2023)
Professor Bradley Murphy OAM	Non-Member, Queensland Aboriginal and Torres Strait Islander Representative (until January 2023) Co-Chair (from January 2023)
Dr Mirna Merle	Candidate, New South Wales
Dr John Shepard	Candidate, New South Wales
Professor Chris Milross	FRACMA, New South Wales (until February 2023)
Dr Paul Lane	Candidate, Queensland
Dr Eugene Wong	Candidate, Queensland
Dr Helen Elizabeth Harris	FRACMA, Tasmania
Dr Sotoodeh Abhary	FRACMA, Victoria
Dr Katy Templeman	Candidate, Western Australia
Dr Mary Boyd Turner	Lead Fellow — Policy & Advocacy (until January 2023)

MEDICAL WORKFORCE POLICY & ADVOCACY SUB COMMITTEE	
Dr Alison Dwyer	FRACMA, Chair (until December 2022)
Associate Professor Peter Thomas	FRACMA, Chair (from December 2022)
Dr Andrew Simpson	FRACMA, Aotearoa New Zealand (until May 2023)
Dr Antony Sara	FRACMA, New South Wales
Dr Eugene Wong	Candidate, Queensland
Associate Professor James Houston	FRACMA, Queensland
Dr Jon Hodge	FRACMA, Queensland
Dr Donald Mackie	FRACMA, PAC Co-opt Member, Queensland
Dr Peter Renshaw	FRACMA - PAC Co-opt Member, Tasmania (until March 2023)
Dr Campbell Miller	FRACMA, Victoria
Dr John Elcock	FRACMA, Victoria (until June 2023)
Dr Vicki Tse	FRACMA, Hong Kong
Dr Mary Boyd Turner	Lead Fellow — Policy & Advocacy (until January 2023)

DIGITAL HEALTH POLICY & ADVOCACY SUB COMMITTEE (ESTABLISHED JUNE 2023)	
Dr Monica Trujillo	FRACMA, Co-Chair, Queensland
Dr Oliver Daly	Candidate, Co-Chair, Victoria
Professor Lester Levy CNZM	FRACMA, Aotearoa New Zealand
Dr Antony Sara	FRACMA, New South Wales
Dr Grant Rogers	FRACMA, New South Wales
Dr Paul Tridgell	FRACMA, New South Wales
Dr David Quigley	FRACMA, Queensland
Dr David Rankin	FRACMA, Victoria
Dr Stephanie Wood	Candidate, Victoria
Dr Poh-Kooi Loh	FRACMA, Western Australia
Associate Professor Angie Shafei	Affiliate, South Australia

RURAL POLICY & ADVOCACY SUB COMMITTEE	
Dr Joe McGirr	Chair
Dr Kelvin Billingham	FRACMA, Co-opted, Aotearoa New Zealand
Dr Shawn Sturland	FRACMA, Aotearoa New Zealand (until December 2022)
Dr Ruth Large	Candidate, Aotearoa New Zealand (from June 2023)
Dr Jean Collie	FRACMA, New South Wales
Dr Patrick Giddings	FRACMA, New South Wales
Dr Sara Watson	FRACMA, Northern Territory
Dr Hwee-Sin Chong	FRACMA, Queensland
Dr Michael Clements	FRACMA, Queensland
Dr Lea Merone	Candidate, Queensland (from June 2023)
Dr Sue Page	Affiliate, Queensland
Dr Chethan Pradhan	AFRACMA, South Australia (from June 2023)
Dr Allison Turnock	Candidate/FRACMA, Tasmania (until May 2023)
Dr Nicola Beamish	Candidate, Tasmania (from June 2023)
Professor Rosemary Aldrich	FRACMA, Victoria
Dr Robert Pegram	FRACMA, Victoria
Dr Suzanne Phillips	FRACMA, Western Australia
Dr Mary Boyd Turner	Lead Fellow — Policy & Advocacy (until January 2023)

DIVERSITY, EQUITY, AND INCLUSION POLICY & ADVOCACY SUB COMMITTEE	
Dr Mary Ann Ferreux	FRACMA, Co-Chair, Overseas
Dr Scott Ma	AFRACMA, Co-Chair, South Australia (until March 2023)
Dr Lloyd McCann	FRACMA, Co-Chair, Aotearoa New Zealand (from March 2023)
Dr Helen McArdle	FRACMA, Board Director
Dr Anil Nair	FRACMA, Aotearoa New Zealand
Dr Stephen Li	FRACMA, New South Wales
Dr Dylan Mordaunt	Candidate, New South Wales
Dr Andrew Frazer	Candidate, Queensland
Dr Lynette Knowles	FRACMA, Queensland
Dr Asha Chitrarasu	AFRACMA, South Australia
Professor Rosemary Aldrich	FRACMA, Victoria (until May 2023)
Dr Anjali Dhulai	FRACMA, Victoria
Dr Nisha Khot	AFRACMA, Victoria
Dr Emma Crampin	AFRACMA, Western Australia
Dr Mary Boyd Turner	Lead Fellow — Policy & Advocacy (until January 2023)

EDUCATION & TRAINING COMMITTEE	
Professor Pooshan Navathé	Chair (Board Director)
Dr Peter Lowthian	Censor In Chief (until February 2023)
Dr Darrell Duncan	Chair Research Training Domain Censor in Chief (from February 2023)
Dr Greg Watters	Chair Continuing Education Program Committee
Professor Andrew Johnson	Chair Curriculum Review
Dr Stephen Ayre	Chair Accreditation Review
Dr Darrell Duncan	Chair Research Training Domain
Professor Gavin Frost	RACMA Fellow Australia
Dr Donna O’Sullivan	Chair Training Progress Committee
Dr Margaret Wilsher	RACMA Fellow Aotearoa New Zealand
Dr Glenda McLean	Community Representative
Dr Rajdeep Ubeja	Chair Candidate Advisory Committee (until February 2023)
Dr Isabelle Kapterian	Chair Candidate Advisory Committee (from March 2023)
Dr Leah Barrett-Beck	Jurisdictional Coordinator of Training Representative

CONTINUING EDUCATION PROGRAM COMMITTEE	
Dr Greg Watters	Chair
Dr Kate Tindall	Australian Capital Territory CPD Coordinator
Dr Helen Tinsley	Hong Kong CPD Coordinator
Associate Professor Peter Thomas	New South Wales CPD Coordinator
Dr Dilky Rasiah	Aotearoa New Zealand CPD Coordinator
Dr Thuy Pham	Queensland/Northern Territory CPD Coordinator
Dr Krish Sundararajan	South Australia CPD Coordinator
Dr Ian Graham	Tasmania and Victoria CPD Coordinator
Allan Pelkowitz	Western Australia CPD Coordinator
Jenny Grew	Australian AFRACMA Representative
Hong Lee	Aotearoa New Zealand AFRACMA Representative (until March 2023)

CANDIDATE ADVISORY COMMITTEE	
Dr Rajdeep Ubeja	Chair (until March 2023)
Dr Isabelle Kapterian	Chair (from March 2023)
Dr Anand Desai	Aotearoa New Zealand Representative (until April 2023)
Dr Isabelle Kapterian	NSW Representative (until March 2023)
Dr Demi Beneru	NSW Representative (from May 2023)
Dr Alisha Thomson	Queensland/Northern Territory Representative (until February 2023)
Dr Hash Abdeen	Queensland/Northern Territory Representative (from May 2023)
Dr Shehzad Kunwar	Tasmania Representative
Dr Hemant Diesh	Victoria Representative – Metro (until December 2022)
Dr Nathan Vos	Victoria Representative – Metro (from March 2023)
Dr Nabrees Sinnalebbe	Victoria Representative – Rural (from May 2023)
Dr James Caudle	Western Australia Representative
Dr Cameron Korb-Wells	Candidate Board Director

ACCREDITATION REVIEW COMMITTEE	
Dr Stephen Ayre	Chair
Dr Leonard Brennan	Australian Capital Territory Jurisdictional Coordinator of Training
Dr Debbie Holdsworth	Aotearoa New Zealand Co-Jurisdictional Coordinator of Training
Dr Paul Muir	Aotearoa New Zealand Co-Jurisdictional Coordinator of Training (from March 2023)
Dr Mary Seddon	Aotearoa New Zealand Co-Jurisdictional Coordinator of Training (until October 2022)
Dr Antony Sara	New South Wales Co-Jurisdictional Coordinator of Training
Dr Pankaj Banga	New South Wales Co-Jurisdictional Coordinator of Training (until February 2023)
Dr Grant Rogers	New South Wales Co-Jurisdictional Coordinator of Training (until February 2023)
Dr Kashmira De Silva	New South Wales Co-Jurisdictional Coordinator of Training (from February 2023 until April 2023)
Dr Leah Barrett-Beck	Queensland/Northern Territory Co-Jurisdictional Coordinator of Training
Dr Felicity Jensen	Queensland/Northern Territory Co-Jurisdictional Coordinator of Training
Dr Jon Hodge	Queensland/Northern Territory Co-Jurisdictional Coordinator of Training (from March 2023)
Dr Elaine Pretorius	South Australia Jurisdictional Coordinator of Training (until January 2023)
Dr Mary Boyd Turner	South Australia Jurisdictional Coordinator of Training (from February 2023)
Dr Helen McArdle	Tasmania Jurisdictional Coordinator of Training
Dr Anand Ponniraivan	Victoria Jurisdictional Coordinator of Training
Dr Deepan Krishnasivam	Western Australia Co-Jurisdictional Coordinator of Training
Dr Allison Parr	Western Australia Co-Jurisdictional Coordinator of Training (until January 2023)
Dr Ajitha Nair	Western Australia Co-Jurisdictional Coordinator of Training (from January 2023)

TRAINING PROGRESS COMMITTEE	
Dr Donna O’Sullivan	Chair
Dr Stephen Ayre	Chair Accreditation Review Committee
Dr Leonard Brennan	Australian Capital Territory Jurisdictional Coordinator of Training
Dr Debbie Holdsworth	Aotearoa New Zealand Co-Jurisdictional Coordinator of Training
Dr Paul Muir	Aotearoa New Zealand Co-Jurisdictional Coordinator of Training (from March 2023)
Dr Mary Seddon	Aotearoa New Zealand Co-Jurisdictional Coordinator of Training (until October 2022)
Dr Tony Sara	New South Wales Co-Jurisdictional Coordinator of Training
Dr Pankaj Banga	New South Wales Co-Jurisdictional Coordinator of Training (until February 2023)
Dr Grant Rogers	New South Wales Co-Jurisdictional Coordinator of Training (until February 2023)
Dr Kashmira De Silva	New South Wales Co-Jurisdictional Coordinator of Training (from February 2023 until April 2023)
Dr Leah Barrett-Beck	Queensland/Northern Territory Co-Jurisdictional Coordinator of Training
Dr Elaine Pretorius	South Australia Jurisdictional Coordinator of Training (until January 2023)
Dr Mary Boyd Turner	South Australia Jurisdictional Coordinator of Training (from February 2023)
Dr Helen McArdle	Tasmania Jurisdictional Coordinator of Training
Dr Anand Ponniraivan	Victoria Jurisdictional Coordinator of Training
Dr Deepan Krishnasivam	Western Australia Co-Jurisdictional Coordinator of Training
Dr Allison Johns	Western Australia Co-Jurisdictional Coordinator of Training (until February 2023)
Dr Ajitha Nair	Western Australia Co-Jurisdictional Coordinator of Training (from February 2023)

Culture of Medicine

A Better Culture Project

It is well known that rates of bullying, harassment, racism, and discrimination are disturbingly high across the healthcare sector, supported by results from the annual Australian Medical Training Survey funded and organised by Medical Board of Australia and Ahpra. In response to these results and to address the systemic issues of poor workplace culture across healthcare, the “A Better Culture” project was initiated at the beginning of 2023 by RACMA. Supported by Commonwealth Department of Health unspent Specialist Training Program funds, the two-year project is a collaboration across all specialty medical colleges, healthcare services and organisations, government, industry bodies and non-health partners such as Safe Work Australia.

An Advisory Board was set up, chaired by Helen Szoke AO (former Australian Race Discrimination Commissioner and Victorian Equal Opportunity and Human Rights Commissioner). The Advisory Board oversee the project with suitable expertise and representation. It was decided that Working Groups would be formed to produce the project’s key outputs, which were drafted as an initial 4 pillars. The governance structure determined that working groups would report to the Advisory Board, and 12 Reference Groups were established to inform the Working Groups’ decisions and outputs. Expressions of Interest were sought for members of the reference groups and within the first two weeks close to 100 applications were received.

In the first six months of the project approximately 40 meetings were held with key stakeholder groups including:

- Australian Department of Health
- Hush Foundation

- The Royal Australian and New Zealand College of Psychiatrists (RANZCP)
- Australasian College of Dermatologists (ACD)
- The Royal Australasian College of Obstetricians and Gynaecologists (RANZCOG)
- The Australian College of Rural and Remote Medicine (ACRRM)
- The Australian Salaried Medical Officers’ Federation (ASMOF)
- The Council of Presidents of Medical Colleges (CPMC)
- The Royal Australasian College of Physicians (RACP)
- RACMA Committees

Stakeholder Engagement also included:

- Specialist Medical Training Colleges (individually, and as the Council of Presidents of Medical Colleges (CPMC)
- Australian Medical Council (AMC)
- Australian Indigenous Doctors’ Association (AIDA)
- Medical Deans Australia and New Zealand
- Consumer Health Forum
- Australian Human Rights Commission
- Australian Medical Association (AMA)
- AMA Council of Doctors in Training
- A selection of health service sites which have implemented programs to address bullying, harassment and discrimination
- Ahpra staff with knowledge of the Medical Training Survey
- National Nursing Leadership Forum
- National Chief Allied Health Officer
- Members of RACMA



A Better Culture Brand

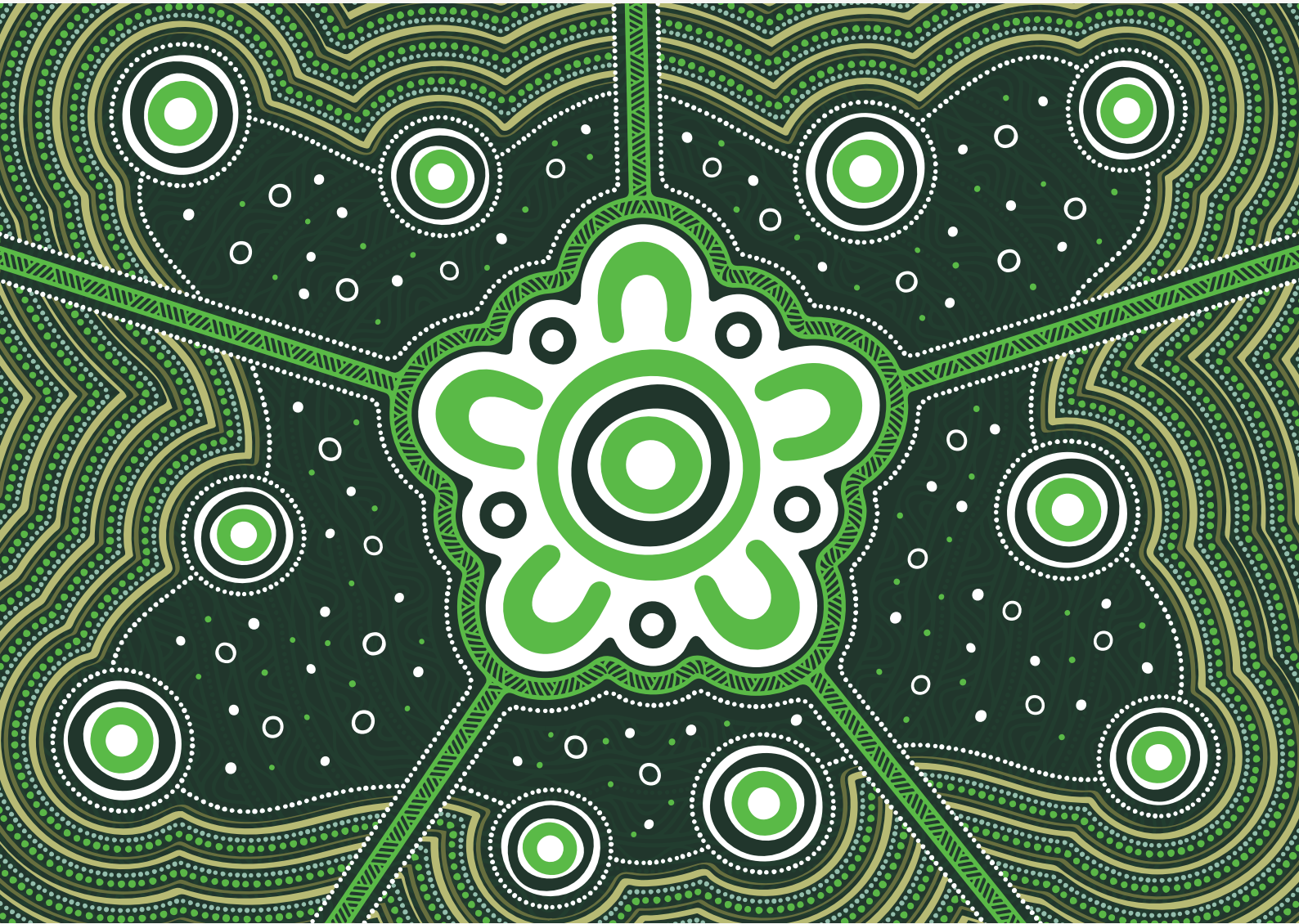
The project finalised its brand, which depicts a symbol of change, representing “less” and “more”.

Less means:

- ✗ Not about individual “Resilience and “Wellbeing”
- ✗ Not a Doctors Health Program (but if successful will have profound effects on health, resilience and wellbeing)
- ✗ Challenge traditional perceived locus of control

More means:

- + More emphasis on work health and safety, especially psychological safety
- + More emphasis on drivers, enablers and perpetrators of adverse workplace cultures
- + More emphasis on organisational responsibilities
- + More emphasis on hard levers
- + More collaboration with non-health partners e.g., Race Discrimination Commissioner, SafeWork Australia, Respect@Work



A Better Culture Artwork

The artwork by Ngarrindjeri artist Jordan Lovegrove represents the project’s commitment to address the long-standing issues in the culture of healthcare. The Project is represented by the large central meeting place. It is surrounded by its key stakeholders (5 people symbols surrounding the meeting place). The inner patterned section represents healing. The smaller meeting places represents the different people and communities effected and helped by the project. The background is growing and expanding to show a positive change.

Development on a dedicated website for the project began in this reporting period, while social media profiles were launched for Instagram, Facebook, LinkedIn and X (formerly Twitter):

- Website: abetterculture.org.au
- Instagram: [instagram.com/abetterculture.org.au](https://www.instagram.com/abetterculture.org.au)
- Facebook: [facebook.com/ABetterCulture](https://www.facebook.com/ABetterCulture)
- LinkedIn: [linkedin.com/company/abetterculture](https://www.linkedin.com/company/abetterculture)
- X (Twitter): [@ABetterCulture](https://twitter.com/ABetterCulture)

The project also commissioned a qualitative report with Nous Group to learn how leaders in Australian healthcare experience organisational cultural challenges and foster a better professional environment for health practitioners.

Education and Training Report

2022/2023 Statistics

Candidates Commencing Fellowship Training Program	60
Candidates who Became Eligible to Elect to Fellowship	11
Leadership for Clinicians Participants who Undertook the Program	264
Management for Clinicians Participants who Undertook the Program	37

FTP Renewal Project

The College conducted a Member consultation on the draft Fellowship Training Program Curriculum Learning Outcomes. The consultation provided Members the opportunity to engage and provide feedback through several channels.

In addition, Chairs of Committees and Working Groups that support the key educational functions and activities of the College were invited to provide feedback from the perspective of the Committee or Working Group's area of interest and responsibility. The Fellowship Training Program Renewal Project Working Group considered feedback to further refine the draft Curriculum Learning Outcomes which will undergo broader stakeholder consultation in the next reporting period.

Training and Assessment

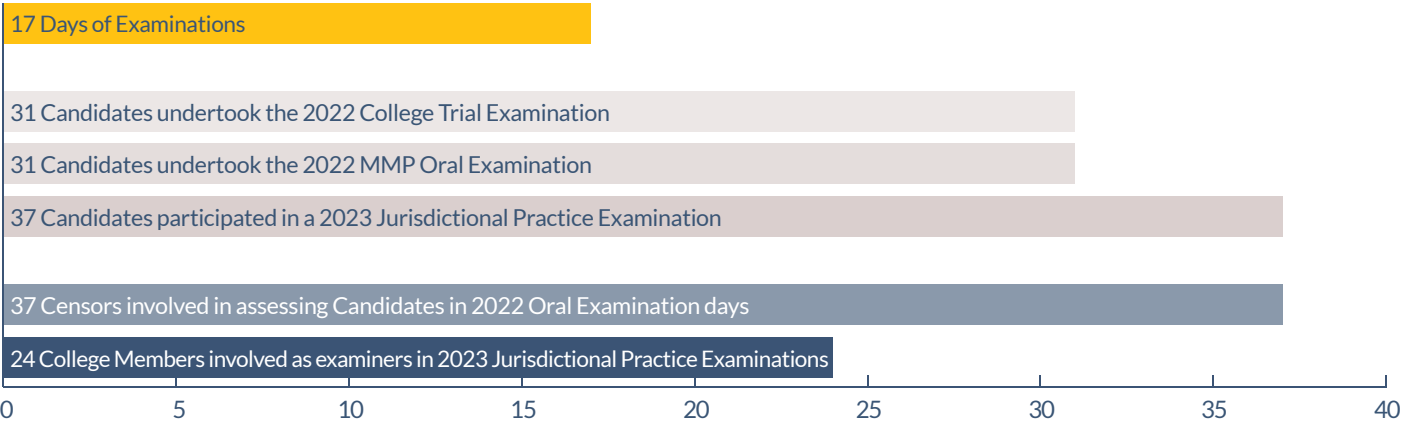
The Medical Management Practice (MMP) Oral Examination and Trial Oral Examination were again delivered online in this reporting period due to the ongoing uncertainty of the COVID-19 pandemic. Candidate workshops held later in the reporting period reverted to face-to-face delivery and were held in Melbourne.

In January 2023 the RACMA Board approved changes to College Examinations. The changes will be implemented from 2024. There have been no changes to the purpose, standards, format or design of the summative MMP Oral Examination. Consideration of changes to College examinations was introduced by the Candidate Advisory Committee in response to Candidate feedback. Candidates participated formally in the development of the proposal and consultation on the changes to examinations. The Education and Training Committee, Board of Censors, Candidate Advisory Committee and Training Progress Committee were also consulted. Through consultation with these committees all Jurisdictional Coordinators of Training, Censors, and Candidate Representatives from Jurisdictions across Australia and Aotearoa New Zealand were consulted on the proposed changes.

Summary of Changes:

1. The College Trial Examination will be removed as a compulsory training requirement from 2024.
2. The College Trial Examination will be removed as an eligibility requirement for sitting the MMP Oral Examination from 2024.
3. The last College Trial Examination will be conducted in 2023.
4. From 2024 the annual sittings of the MMP Oral Examination will increase from one (1) to two (2) per year.
5. From 2024 the maximum allowable attempts at the MMP Oral Examination will increase from three (3) to four (4) for all Candidates.

Examination Statistics



AMC Accreditation Update

During this reporting period the College has satisfied one (1) accreditation condition and closed three (3) recommendations. The RACMA Fellowship Training Program continues to Substantially Meet the overall Australian Medical Council accreditation standards.



Education Resources

With Specialist Training Program Support Project Funding from the Australian Commonwealth Department of Health the College developed and launched an Oral Examination Support Resource. The resource:

- addresses how to approach preparation for the oral examination (e.g., identifying areas to increase knowledge or gain experience)
- addresses how to approach answering examination questions
- describes the components of the examination with the aid of exemplars
- enhances resources for Candidates to manage their personal preparation and stresses which can be associated with a high stakes assessment
- is delivered online and is self-paced to facilitate completion at a time and location that best suits Candidates.

RACMA partnered with the Royal Australasian College of Surgeons (RACS) to make the Operating with Respect (OWR) online learning module available for all Members this reporting period.

The module was developed by RACS to improve the knowledge and understanding of unacceptable behaviours. It contains video scenarios and reflective questions that Members and Candidates can use to consider Medical Leader, Communicator, Professional and Collaborator competencies related to ethics, values, self-awareness, self-management, communication and the development of effective team and stakeholder relationships.

RACMA Conference

More than 300 Medical Leaders from across Australasia came together for the first time in three years for a powerful two days of inspiring speakers at RACMA's flagship event. For the first time the College hosted a hybrid conference, attracting a further 150 attendees online throughout the two days.

RACMA 2022 "Equity and Access – Healthcare for All", was officially opened by Her Excellency the Honourable Barbara Baker, Governor of Tasmania. The event delivered a diverse speaker line-up of Australasia's key healthcare decision makers, experts and researchers. An expert panel on diversity and inclusion featured Doctors with Disability founders Dr Dinesh Palipana OAM and Dr Hannah Jackson, Dr Claire Griffiths from Tasmanian Health Service, Melbourne GP

Leadership for Clinicians Program

The Leadership for Clinicians Program continued to be delivered as fully online or hybrid offerings. Four (4) cohorts were run in delivery period 2, 2022 and five (5) cohorts were run in delivery period 1, 2023.

RACMA delivered a Leadership for Clinicians, Private Sector, program during the reporting period. The program was tailored to be specifically relevant for Clinicians working in the Private Sector. The six key study themes of the program were explored through the Private Sector lens.

The College offered scholarships for Aboriginal and Torres Strait Islander and Māori participants in the Leadership for Clinicians Program. The two RACMA scholarships cover 100% of the program fees. RACMA engaged with the Australian Indigenous Doctors Association (AIDA) and Te ORA (Māori Medical Practitioners Association) regarding the scholarships and worked collaboratively to promote the scholarships and select the scholarship recipients. Te ORA also funded an additional Māori doctor to undertake the program.

Management for Clinicians

RACMA delivered two Management for Clinicians programs for general cohorts with 37 participants in total. Each program was delivered online over four sessions. The College worked with the Australasian Faculty of Rehabilitation Medicine (AFRM) to ensure the program met current AFRM training requirements. Participants included AFRM trainees and clinicians from a range of other Colleges.

Dr George Forgan-Smith and Dr Peter Jansen (FRACMA) from the Illawarra Shoalhaven Local Health District – all representing a variety of minority and diverse populations. The session was chaired by AIDA Vice President Dr Simone Raye.

The event also featured:

- 2022 Young Australian of the Year and founder of Street Side Medics Dr Daniel Nour
- 2017 Tasmanian Young Australian of the Year and founder of SPEAK UP! Stay ChatTY Mitch McPherson
- 12 abstract presentations and seven posters under the sub themes of Healthcare for Diverse Populations, Socially Conscious Medical Leadership and The Evolving Role of the Medical Leader.

RACMA Annual Conference

A delegation of more than 300 Medical Leaders from Australasia and the world gathered in Hobart for the 2022 RACMA Annual Conference. RACMA's flagship event attracted an additional 150 online attendees as Australasia's key healthcare decision makers, experts, and researchers discussed "Equity and Access – Healthcare for All".



2022 RACMA Award Recipients

- Honorary Fellowship
Dr Len Notaras AO**
Awarded for sustained commitment and excellence in health. In recognition of the significant and ongoing contribution to improving the delivery of quality healthcare across Australia, particularly within the Northern Territory, and for leading critical care and trauma response.
- Honorary Fellowship
Professor Geoff McColl**
In recognition of sustained contributions to the advancement of knowledge in medicine and health services leadership and management spanning three decades.
- College Medallion
Professor Alan Sandford AM**
Awarded for outstanding service to the College Board and for outstanding service to the College Board and Membership spanning almost three decades, carrying out key roles including President, Censor in Chief and Chair of Finance and Audit Committee.
- Distinguished Fellow Award
Professor Tracy Smart AO**
For services to the greater healthcare system, public health and Medical Leadership.
- Supervisor of the Year
Dr Mark Mattiussi**
For continual support, engagement and encouragement enabling real professional and personal growth and progression for Candidates.
- New Fellow Achievement Award
Dr Felicity Jensen**
For ongoing and significant commitment to improving College activities and processes to support Members in Queensland and across other jurisdictions.
- Margaret Tobin Challenge recipient
Dr Jerry Abraham Alex**
For the highest calibre presentation aligned with the conference theme or sub-theme. The presentation was titled: "Exploring the early use of aspirin to prevent preeclampsia in a rural Aboriginal community".
- Bernard Nicholson Prize recipient
Dr Marlow Coates**
Awarded to the outstanding Candidate at the oral examinations, in memory of Dr Bernard Nicholson, a Past-President of the College who played a major role in its establishment.

Member Honours

RACMA would like to congratulate Members who received National Honours and State Awards this reporting period. It is a great achievement to be recognised by the wider community for their services to medicine, health care, Medical Administration, leadership and management.

- New Year's Day Honours**
 - Dr Ashley Bloomfield (Honorary Fellow)**
Honorary Fellow Dr Ashley Bloomfield (former New Zealand Director-General of Health) was granted knighthood in the New Year's Day Aotearoa New Zealand Honours. Dr Bloomfield was recognised for his work leading the health sector and managing the government's public health response to the COVID-19 pandemic.
- Australia Day Honours**
 - Medal (OAM) of the Order of Australia in the General Division
Dr Debra Graves (FRACMA)**
For service to Medical Administration, particularly to pathology.
 - Medal (OAM) of the Order of Australia in the General Division
Dr Roslyn Crampton, NSW (non-Member Supervisor)**
For service to Medical Administration.
- King's Birthday Honours**
 - Officer (AO) In the General Division
Clinical Professor Brendon John Kearney AM (FRACMA)**
For distinguished service to medicine in the fields of health technology assessment and health outcomes research.
 - Officer (AO) In the General Division
Professor John Raymond Zalcberg OAM (FRACMA)**
For distinguished service to oncology as a clinician researcher, and as an advocate for those living with cancer.
 - Member (AM) In the Military Division Royal Australian Navy
Commodore Nicole Moyneen Curtis RAN (FRACMA)**
For exceptional service to the Australian Defence Force in operational health, policy and capability.
- Victorian Rural Health Awards**
 - Associate Professor Rex Prabhu (FRACMA)**
Awarded Outstanding Contribution by a medical specialist for 2023 at the Victorian Rural Health Awards. Established in 2005 by Rural Workforce Agency Victoria, the awards recognise outstanding contributions to rural healthcare in Victoria.

Congratulations to our New Fellows & Associate Fellows of 2022

The College Conferred 35 New Fellows and 360 New Associate Fellows

FELLOWS

Sophia Adams	Birinder Giddey	Emily Kuzich	Manoj Patel	Allison Turnock
Kaushik Banerjea	Samuel Goodwin	Paul Lane	Thuy Pham	Siddharth Vohra
Christopher Beck	Marius Goosen	Anthony Lawler	Rex Prabhu	Leonie Watterson
Ken Cheng	Lachlan Gordon	Marco Metelo	Eileen Rogan	Lorraine Westacott
Rachel Cheong	Ruth Kearon	Bahare Moradi	Matthew Ryan	Amber Winter
Robert Feiler	Natalie Klees	Abdullah Omari	Junyi Shi	Andrew Wright
Helen Freeborn	Kean Kuan	Alison Parr	Samantha Simpson	Ajai Verma

ASSOCIATE FELLOWS

Karen Aarons	Venu Bhamidipaty	Sophie Conroy	Subodh Ganu	Akshay Ilango
Rania Abdelmotaleb	Adriana Bibbo	Felicity Constable	Nicholas Gavaghan	Andrew Iliov
Mohammed Abdul Vaseem	Janne Bingham	Rachel Conyers	Con Georgakas	Md Rafiqul Islam
Dawn Adair	Andrew Blunt	Renee Cremen	Christian Gericke	Karuppiah Jagadheesan
Rebecca Adams	Melissa Bochner	Mya Cubitt	Catherine Gibb	Helen James
Babak Adeli Kooodehi	Michelle Boekelaar	Vijay Danivas	Jonathan Gibson	Manjunath Jangamakote
Adnan Afridi	Michael Bonning	Partha Das	Benjamin Gornall	Narayana
Nicolle Ait Khelifa	Lauren Bradbury	Trent Davidson	Stephen Gourley	Narayana Jarabandahalli
Ajit Aiyappan	Suzanne Brady	William Davies	Hannah Green	Veena Jayadev
Osama Ali	Drago Bratkovic	Sophie Davison	Simon Grof	Bridget Johnson
Taha Ali	Karl Bright	Michelle Delamont	Renee Guli	Nagarajan Kailainathan
Danielle Allan	Ingra Bringmann	Shyam Dheda	Arvind Kumar	Acheel Kamale
Kara Allen	Emma-Jane Broadfield	Belinda Doherty	Gunasekaran	Ahmed Khan
Christina Alvino	Maria Lissa	Xenia Doorenbosch	Matthew Hadfield	Raja Adeel Khan
Keith Amarakone	Buenaventura	Brian Doyle	Kathryn Hagen	Altaf Nissar Khoja
Cassandra Andrews	Eugene Buenviaje	George Du Toit	Kim Hansen	Nina Kilfoyle
Matthew Anstey	Poranee Buttery	Ben Dunne	Suriyanarayanapillai	Jeff Kim
Satyamurthy Anuradha	Patrick Buxton	Shiri Dutt	Hariprakash	Marija Kirjanenko
Rakesh Arora	Arvind Byka	Erika Dutz	Alana Harper	Emily Kirkpatrick
Eric Au	Susan Caird	Reginald Edward	Leigh Haysom	Yolande Knight
Jason Bament	Mathew Carter	Ben-Sion Elijah	Simon Hendel	Nevin Kollannoor
Arnab Banerjee	Suzanne Cartwright	Brendon Evans	Nigel Henderson	Chinnan
Ali Baqar	Theodore Chamberlain	Alon Faingold	David Heslop	Blair Koppen
Jennifer Barry	Jennifer Chambers	Anthony Fajumi	Andrew Higgs	Sheikh Arif Kozgar
Abhijit Basu	Vincent Chan	Damien Finniss	Jonathon Hill	Timur Krivitsky
Thomas Battisson	Michael Chao	Dana Fitzsimmons	Martin Hiscock	Daryl Kroschel
John Beck	Daryl Cheng	Jonathan Fong	Louise Hitchings	Dilip Kumar
Michael Beckmann	Lyn Chiem	Lea Foo	Ruth Holmes	Subramanian Karthik
Matthew Beech	Peter Christensen	Farima Forooziya	Andrew Hooper	Kumar
Harriet Beevor	Annemarie Christie	Helen Fraser	Al-amin Hoque	Maleeka Ladhani
Sean Beggs	Sharon Chua	Greg Frazer	Jenny Huang	Willem Landman
Jillian Benson	Cengiz Cimenkaya	Jennifer Galstuch Leon	Lynton Hudson	Andrew Lane
Gregg Best	Elizabeth Clingan	Sean Galvin	Jeffery Hunt	Julia Lane
	Claudia Collins	Charu Gandhi	Jeram Hyde	Stephen Lee
				Hong Lee

Liang Joo Leow OAM	Katerina Mastrocostas	Gemma Olsson	Jeevithan Sabanathan	James Tranter
Sean Leow	Admire Matsika	David O'Mahony	Bronwyn Sacks	Javeed Travadi
Fiona Leslie	Henry Maung	Jing Shen Ong	Ole Schmiedel	Talia Trigger
Jesse Li	David McCormack	Frances Page	Jason Schreiber	Inese Tucker
Adeline Lim	Caroline McFarlane	Harshel Parikh	Andrew Scott	Simon Tucker
Jing Jing Lin	Michael McLaughlin	Khalil Patankar	Gillian Scott	Abishek Tumma
Jason Lindeman	Antony McNamara	Ronak Patel	Kandegama	Timothy Turk
Katja Lindemann	Kris McQuaid	Umang Patel	Senewirathna	Melanie Turner
Katharine Lindsay	Shyaman Menon	Gillian Paulsen	Natalie Shaddock	Michael Tweed
Andrew Ling	Heather Miller	Benjamin Pearson	Archna Sharma	Francisco Valencia
Lisana Caroline Lins Rodrigues	San San Min	Alexander Peng	Sunny Sharma	Rhys Vaughan
Yong Loh	Christina Miteff	Davina Pereira	Nicholas Sharrock	Peter Velloza
Samantha Loi	Sayantanava Mitra	Samuel Petersen	Brooke Sheldon	Christine Vien
Claire Long	Sankha Mitra	Christopher Peterson	Rupert Sherwood	Ashley Wallin
Ruchika Luhach	Emma Moffatt	Belinda Phillips	Nadeem Siddiqui	John Wardell
Subbuh Luker	David Molhoek	Andrea Polari	Namrata Singh	Gillian Watterson
Julie Ruth Lustig	James Molton	Selina Porter	Vanja Sivapathasingam	Fiona Watson
Jamahal Luxford	Shirlony Morgan	Jeffrey Post	Natasha Smallwood	Marshall Watson
James Lynam	Enasio Morris	Kalyana Pothapragada	Janine Smith	Jared Watts
Sarah Lynar	Sharon Morton	Chetan Pradhan	Richard Smith	Diana Webb
Colleen Ma	Simon Mosalski	Saurabh Prakash	Jennifer Smith	Elizabeth Webber
David McCormack	Adnan Munawar	Mark Priestley	Zhao Kang Soong	Ruvani Weerasinghe
Eleanor MacDougall	Usama Munir	Stephen Prineas	Lisa Sorger	Jennifer Wharton
Paul MacIntyre	Samarina Musaad	Dean Pritchard	Makaria Stead	Lucas Wheatley
Tobias Mackinnon	Issam Muteir	Leah Purcell	Kate Stone	Lucinda Whiteley
Viswanatha Madikeri	Narayanan Manoj	Christopher Pyke	Shawn Sturland	Robert Whitfield
Ramaraju	Muthangaparambil	Khuram Qazi	Wajiha Sufyan	Andrew Whitworth
Elise Maehler	Guruprasad Nagaraj	Krishna Rachakonda	Sadasivam Suresh	Nipuna Wickremaratne
Mustafa Majeed Omar	Kshipra Nandakumar	Thinesh Rajasingam	Joseph Suttie	Garry Wilkes
Mainak Majumdar	Karthik Natarajan	Ganesh Ramanathan	Saifulla Syed	David Williams
Muhammad Malik	Jason Nebbs	Sharmila Ramessur	Wiyang Szetoo	Daniel Wilson
Manoj Mallikahewa	Heather New	Chandran	Eleanor Tan	Noam Winter
Christine Mandrawa	Helen Newman	Anne Rasmussen	Rebecca Taylor	Nadia Wise
Murty Mantha	Phillip Ngorima	Andrew Ratchford	Janaka Tennakoon	Wei Wong
Sonja Manwaring	Paul Nicholas	Geetha Rathnayake	Edward Teo	David Woodward
Conor Marron	Bryce Nicol	Lucy Reed	Louise Teo	Bili Wu
Brendan Marshall	Hitesh Nischal	James Rice	Daniel Thambiraj	Natalie Yang
Drew Marshall	Roland Oak	Megan Robb	Julia Thompson	Rachael Yin Foo
Dawn Martin	Frank O'Keeffe	Chris Robinson	Laurie Thompson	Yang Yun
Ahmed Mashhood	Francis Olopade	Lyndal Russell	Justin Titmarsh	Joel Ziffer



Member Services and Engagement Report

Peer Support Program

The College's 2021/22 pilot program to provide peer support to professionally isolated Members was approved by the RACMA Board to continue this reporting period. The Pilot project involved three groups. This initiative has a dual purpose in that these facilitated discussions support our professionally isolated colleagues as well as improving Member wellbeing by providing an avenue in which issues can be shared confidentially in a safe environment amongst peers without judgement.

An Expression of Interest process was launched to establish more groups in this reporting period, with 29 applications received. A further three groups were established on top of the three pilot groups and will commence meeting next reporting period. The groups are spread across each of the College's jurisdictions and will meet on a monthly basis.

Continuing Professional Development (CPD)

Members Participating in and Meeting the Requirements of the College's CPD Programs in Australia & Aotearoa New Zealand		
	Fellows	Associate Fellows
Number Participating in CPD Program	325	700
Number Meeting CPD Program Requirements	325	679
Percentage Compliant	100%	97%

New standards were introduced from 1 January 2023. For Fellows registered in New Zealand the new requirements are:

- Reviewing and reflecting on practice
- Measuring and improving outcomes
- Educational activities

In addition to the three categories above, these activities must be underpinned by:

- Annual conversation
- Professional Development Plan
- Cultural safety and a focus on health equity

In Australia the main change is the mandatory requirement of 25 hours active CPD in reviewing performance (previously Peer Review) and measuring outcomes (previously Audit), where doctors decide the best mix for these activities to suit their practice, with five hours minimum of each type.

The College has been working hard this reporting period to find a way for our Fellows to meet the requirements, through the development of:

- Templates
- Education materials on how to perform audits
- Education material on what should be in an annual conversation
- Workshops
- Webinars
- CPD Short Courses

The College's CPD re-alignment and refresh will continue through the next reporting period.

CPD Short Course Program

To support Members in satisfying their annual CPD requirements and as an additional revenue stream for the College, the Member Services and Engagement Division established a CPD short course program which commenced in June 2023.

The topics were finalised based upon positive feedback from sessions that have been delivered in the past and in consultation with the Continuing Education Program Committee. In addition, members have been surveyed in 2023 to seek areas of interest, as a result five of the top ten of the responses are aligned with the topics being offered. Two courses were successfully delivered in this reporting period with a further eight scheduled.

Accreditation

A total of 91 site visits were completed in this reporting period, with more than 100 voluntary hours provided by 26 FRACMAs who attended as panel members for the site visits. The table below details the number of site visits by Jurisdiction and the overall percentage of site visits undertaken by Jurisdiction.

	ACT	NSW	NT	Aotearoa NZ	QLD	SA	TAS	VIC	WA	Total
Number of Site Visits Conducted	7	20	0	4	27	5	5	19	4	91
Percentage of Site Visits by Jurisdiction	7.69%	21.97%	0%	4.39%	29.67%	5.49%	5.49%	20.87%	4.39%	

There were changes to some Jurisdictional Coordinators of Training (JCT) this reporting period. Dr Elaine Pretorius resigned from her position as JCT for South Australia and Dr Mary Boyd-Turner was appointed to the role. Dr Paul Muir was appointed as the Co-JCT for Aotearoa New Zealand. Dr Allison Johns resigned as the Co-JCT WA however Dr Ajith Nair returned to the role of Co-JCT and joins Dr Deepan Krishnasivam. Dr Pankaj Banga and Dr Grant Rogers fulfilled their three-year term as Co-JCTs for NSW, following an expression of interest Dr Kashmira De-Silva was appointed to the roll with Dr Tony Sara providing support during a six-month handover period.

Fellowship Training Program (FTP) Applications

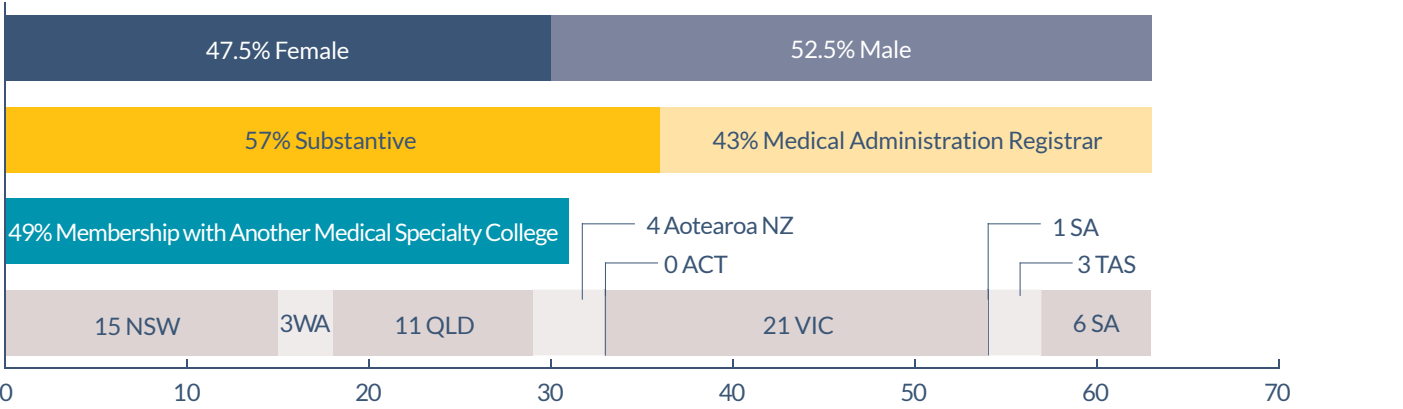
In 2023 the College experienced a 57.5% increase in applications from 2022, which were approved for FTP Candidacy. Of the 70 applications received in 2023:

- 5 Withdrawn
- 2 Not Eligible
- 63 Commenced Candidacy in 2023

The percentage of female FTP applicants offered a Candidacy position in 2023 increased from 37.5% in the previous year to 47.5% this reporting period, accounting for 30 of the 63 successful applicants.

The number of substantive positions approved suitable for training in 2023 accounted for 36 (57%) of the 63 applications approved for Candidacy. The remaining 27 positions approved were for Medical Administration Registrar posts.

31 (49%) of the 63 successful applicants hold a membership with another medical specialty college.



Specialist International Medical Graduates (SIMGs)

RACMA currently has two (2) SIMGs in the Fellowship Training Program. No SIMG applications were received this reporting period.

Recognition of Prior Learning and Experience (RPLE) Applications

In 2023, 12 applications for RPLE for the Medical Management Practice (MMP) domain were received. Two applications were not deemed suitable to proceed to interview.

Please see table below for a summary of applications by jurisdiction and RPLE outcome.

	Total Received	Application in Progress	Nil RPLE Granted	12 Months Granted	18 Months Granted	24 Months Granted
Aotearoa New Zealand	2	1	-	1	-	-
New South Wales	2	-	-	-	1	1
Northern Territory	0	-	-	-	-	-
Queensland	1	1	-	-	-	-
South Australia	1	-	-	-	-	1
Victoria	4	-	-	2	2	-
Western Australia	0	-	-	-	-	-
Total	10	2	0	3	3	2

Specialist Training Program (STP)

RACMA receives STP funding from the Australian Department of Health and Aged Care for the following:

- 17 STP positions (11 rural and 6 private),
- 9 IRTP (Integrated Rural Training Pipeline) positions
- 3 Tasmanian Project Training positions, and
- 0.75 Tasmanian Project Supervisor positions.

RACMA's current Funding Agreement with the Commonwealth provides funding for the 2022 – 2025 academic years. Secondary Funding Agreements have been executed for all funded health settings.

New STP and IRTP Posts added to Reserve Lists

The Department of Health conducts an annual Reserve List application process to allow interested health settings to be assessed for STP funding suitability, and if successful to be added to the STP Reserve List. The 2023 process resulted in nine new potential training positions being added to RACMA's STP Reserve List.

The STP Governance Review Group continues to provide oversight and advice regarding Reserve List management and funding allocation to new positions in the event of vacancies.

Filled and Vacant Positions

All of RACMA's STP, IRTP and TAS training positions have been funded (contracted) for the 2022 and 2023 academic years. Recruitment has been challenging for several health settings over the past year. A small number of funded settings have identified Candidates to fill their positions very late in the academic year, and one position remained unfilled in 2022.

RACMA works collaboratively with our funded health settings to provide assistance and support with vacancy recruitment.

STP Support Projects

STP also provides funding for Educational Support projects to develop resources to support Candidates in STP funded positions. In addition to the standard annual project funding allocation, Colleges received further project funding which utilised unspent funds from the previous 2018-2021 Agreement period. The following projects are currently underway in 2023:

- FRACMA Supervisor Workshop
- Engaging First Nations Australian Medical Leaders Program
- Tasmanian AFRACMA LFC Project
- Exemplar Videos for Oral Examination Support Resource

The RACMA STP Marketing Project has now concluded and has resulted in the creation of a suite of resources to promote and support STP and rural training. This includes:

- An [interactive map](#) of the current RACMA accredited training posts, which can be filtered by STP funding stream, Jurisdiction, Modified Monash (MM) area, public or private post, and the position type (registrar or substantive).
- A promotional video to advance the benefits of rural training, and to encourage Candidates to take up rural training opportunities at RACMA.

- Two podcast interviews about the challenges and benefits of training and supervising in rural settings.
- A rural training webpage to capture all relevant information and support available for Candidates considering rural training, including video interviews with Candidates and Supervisors who have rural experience.

FATES Initiative

The Commonwealth [Flexible Approach to Training in Expanded Settings \(FATES\)](#) initiative commenced in 2022. The initiative provides funding throughout 2022-2025 for College consortia projects that will provide flexibility to support and promote growth in specialist medical training and deliver better distribution and supply of specialists matched to community health needs.

RACMA has joined other Colleges as consortium partners for the following FATES projects:

Rural Accreditation – Addressing Barriers to Rural Practice (Partner with RACS)

RACMA has partnered with RACS to provide Subject Matter Expertise (SME) for the Rural Accreditation FATES Project. This project aims to design and implement an accreditation model for RACS that can be tailored for context and specialty, and that meaningfully supports rural hospitals to increase rural training pathways and achieve training system capacity. RACMA Fellows and staff attended a productive Workshop in Darwin which reviewed the existing RACS hospital accreditation standards and explored the challenges faced by rural hospitals in meeting those standards, as well as ways in which identified barriers may be addressed or adapted in the rural environment in future.

Rural Training Models (Partner with RACS)

RACMA has also partnered with RACS to provide Subject Matter Expertise (SME) for the Rural Training Models FATES Project. This project will support quality specialist medical training in regional, rural and remote Australia, reduce barriers to practicing rurally, improve maldistribution and provide culturally safe training experiences.

Also included in the consortium is RANZCO, ANZCA, and RACP. The five Colleges will work together to research and design rural training models through evidence-based recommendations and extensive stakeholder engagement.

Specialist Trainee Support Program (STSP) (Led by AIDA)

RACMA is a member of the Cross College Project Group for the Specialist Trainee Support Program (STSP) FATES Project, which is led by the Australian Indigenous Doctors' Association (AIDA). The project aims to increase the number of Aboriginal and Torres Strait Islander non-GP Specialists by augmenting the recruitment and retention of Indigenous doctors who wish to commence or are currently undertaking non-GP specialist medical training. The Cross-College Group meets on a quarterly basis and allows Colleges to share ideas and to remain accountable for their progress in meeting goals to increase the recruitment and retention of Aboriginal and Torres Strait Islander specialists. The resources and initiatives developed by other Colleges with a greater number of First Nations trainees continues to be very useful in informing RACMA's work in this space.

Events and Sponsorship

During this reporting period the College supported a number of key events through sponsorship, attendance, or speaking opportunities. Each year the College chooses key events to participate in to ensure we are engaging with key stakeholders and target audiences to broaden our membership. In line with RACMA key Strategic Objectives of Voice and Influence, the aim is to increase the visibility, understanding, and recognition of RACMA and our specialty as a chosen career path, CPD Home, while working towards being the respected voice of health leadership, management and governance. The events RACMA was involved in for the 2022/23 reporting period include:

- MEDCON22 Conference, Perth
- National Rural Health Conference, Brisbane
- Australian Medical Students' Association (AMSA) Global Health Conference, Melbourne
- Australian Indigenous Doctors' Association (AIDA) Annual Conference, Gold Coast
- Gathering of Kindness, Melbourne
- 45th World Hospital Congress, Dubai
- Faculty of Medical Leadership and Management (FMLM) International Healthcare Leadership Conference, online
- AMSA Careers Conference, Adelaide
- Australian and New Zealand College of Anaesthetists (ANZCA) Annual Scientific Meeting, Sydney
- Early Learning in Medicine Clinical Conference Otago (ECCO) – University of Otago medical students conference, Dunedin
- MEDCON23 Conference, Perth

Strategic Affairs Update

Strategic Affairs 2022/23

This reporting period has been one of great change, development and progression across the College's work in advocacy, First Nations and communications, making way for the new Strategic Affairs Division. It has allowed RACMA to adapt to the changing healthcare environment and respond effectively to emerging challenges and opportunities.

RACMA has continued to develop its profile, presence and position on key healthcare decisions at the highest level, working to align with the College's goals within the [Strategic Plan](#) of:

- To Advance and Expand the Influence of RACMA
- To be the recognised and respected Voice of Health Leadership, Management, and Governance

Advocacy

Our presence in the health advocacy space continued to grow and strengthen with the formation of the College's first Digital Health Policy & Advocacy Sub Committee (DHPASC). The Board approved the establishment of the new Policy & Advocacy Sub Committee (PASC) because RACMA Members are uniquely positioned to lead the evolving and increasing digitisation of health, ensuring its effectiveness and efficiency and the quality and safety of health services. An Expression of Interest process was carried out to get the committee started, with Dr Monica Trujillo and Dr Oliver Daly chosen as the inaugural Co-Chairs.

Our priority advocacy areas now cover:

- Medical Workforce
- Indigenous Health
- Diversity, Equity and Inclusion
- Rural Health
- Digital Health

Following the resignation of the inaugural Chair of the Indigenous Health Policy & Advocacy Sub Committee (IHPASC) Associate Professor Luis Prado, the committee recommended to have Indigenous Co-Chairs who represent the bi-national nature of the College. Dr Peter Jansen and Dr Brad Murphy OAM were selected as the new Co-Chairs to increase RACMA's reputation and engagement with Aboriginal, Torres Strait Islander, and Māori peak bodies such as AIDA and TeOra by supporting Indigenous Leadership. It also contributes towards the College Reconciliation Action Plan goals, and our commitment to the Reconciliation Journey with First Nations Peoples of Australia, as well as contributing towards the College commitment to the Principles of the Treaty of Waitangi. The IHPASC acknowledges and thanks Associate Professor Prado for his work and commitment to the establishment of the committee.

The Diversity and Inclusion Policy & Advocacy Sub Committee (DIPASC) also underwent some change with the addition of Equity to its name, becoming the Diversity, Equity and Inclusion Policy & Advocacy Sub Committee (DEIPASC). Co-Chair Dr Scott Ma announced his resignation from the position but remains on the committee. Dr Lloyd McCann stepped into the Co-Chair role with Dr MaryAnn Ferreux. The DEIPASC acknowledges and thanks Dr Ma for his dedication to the committee in the Co-Chair role.

For the first time, RACMA proudly supported the Pride in Medicine group's combined Medical Colleges Float at Sydney World Pride 2023/Sydney Mardi Gras parade. FRACMA Dr Natalie Klees from New South Wales was the College representative.

The College's support and partnership with the Advancing Women in Healthcare Leadership (AWHL) project continued with the development and distribution of a Member survey, which was co-produced and refined by the AWHL team. Survey questions were informed by evidence synthesis and interview questions with RACMA

leaders. Questions focused on exploring RACMA's culture and resources to support women into College leadership positions, policies and processes to support women to train in medical administration, and RACMA's role in supporting members to influence women in leadership within their professional health service organisations. A total of 184 respondents completed the survey. They comprised all categories of membership — Fellows, Associate Fellows, Affiliates, and Candidates in training. 90% of Members surveyed reported that RACMA has a role to drive change in the medical profession more broadly. Other findings included:

- RACMA has a gender equitable leadership culture
- Women represented in RACMA leadership; visibility of women leaders
- RACMA Members can progress to leadership roles at RACMA regardless of gender
- RACMA Members reported the importance of RACMA's advocacy and leadership for and implementation of training policies both internally and externally with health services to support members into and through training
- The importance of Fellows of RACMA acting within their health services to lead, inspire commitment and support for gender equity and support for women to progress to leadership in medicine
- The importance of visibility, awareness and implementation of policies

In December 2022, the College commissioned a report on how healthcare and services will be provided in the future and the implications of this for medical leaders to inform priorities for action and to demonstrate to government and other stakeholders the benefits and importance of RACMA's specialist training and education. The Australian Institute of Health Innovation led by Professor Jeffrey Braithwaite undertook the assignment. A Reference Group was established to oversee the project. The report is being finalised and is expected to be disseminated to the membership during the 2023/24 financial year.

The College office, PASC members and a number of senior Fellows coordinated the swift and expert development of the following RACMA responses and submissions to many key consultations throughout the 2022/23 reporting period:

- Australian Government: establishment of a Centre for Disease Control
- Revised Royal Australasian College of Surgeons (RACS): Hospital Training Post Accreditation Standards
- Medical Board of Australia (MBA): a revised registration standard - Granting general registration to Australian and New Zealand medical graduates on completion of intern training
- Australian Health Practitioners Regulation Agency (Ahpra) Draft Revised Telehealth Guidelines
- Australian Health Practitioner Regulation Agency (Ahpra) draft Data Strategy
- Australian Commission on Safety and Quality in Health Care: draft Sustainable Healthcare Module
- Australian Government's Draft National Care and Support Economy Strategy 2023
- Australian Government's Review of Regulatory Settings for Overseas Health Practitioners
- Australian Department of Health and Aged Care's National Health and Climate Strategy Consultation
- The Importance of Quality Clinical Registries — in response to the Australian and New Zealand Hip Fracture Registry Strategy Development
- Health Climate Futures statement

First Nations

The College has made significant progress in our commitment to reconciliation and improving health access and outcomes for First Nations' communities in Australia and Aotearoa/New Zealand after the appointment of our inaugural First Nations Advisor Ms Nadene Edmonds, in the last reporting period.

RACMA's engagement and relationship building continues to go from strength to strength with key First Nations stakeholders, including the Australian Indigenous Doctors Association (AIDA), the Leaders in Indigenous Medical Education Network (LIME), the Lowitja Institute and the Māori Medical Practitioners Association Te Ora.

Ongoing engagement and cross collaboration with other medical specialty colleges continues with a number of the colleges beginning to approach RACMA for advice in the First Nations cultural competency space. These include:

- The Royal Australasian College of Surgeons (RACS) — revision of Situational Judgement Tests
- Royal Australian and New Zealand College of Psychiatrists (RANZCP) — cultural competency support
- Royal Australasian College of Physicians (RACP) — advisory committee for culturally safe supervision
- Council of Medical Colleges Cultural Rēpū (Group) — supporting colleges as they incorporate cultural safety into training modules
- National Committee of Medical Educators Cultural Safety Think Tank

RACMA continues to implement its strategy to attract Aboriginal and Torres Strait Islander Candidates through the following initiatives:

- AIDA membership — RACMA is a corporate Member of AIDA
- AIDA Yarn-up — RACMA has Dr Peter Jansen present at these forums for AIDA members who register an interest in RACMA (23 attended with 14 follow-ups in 2022)
- Specialist Trainee Support Program (STSP) Flexible Approach to Training in Expanded Settings (FATES) AIDA project work
- Cross-college collaboration into the FATES AIDA project to increase Aboriginal and Torres Strait Islander non-GP specialists

The College's first Reconciliation Action Plan — Reflect was completed with full endorsement from Reconciliation Australia. Work commenced on the second Reconciliation Action Plan — Innovate, which will focus on developing and strengthening relationships with Aboriginal and Torres Strait Islander peoples, engaging staff and stakeholders in reconciliation, and developing and piloting innovative strategies to empower Aboriginal and Torres Strait Islander peoples.

As a bi-national college RACMA recognises that Māori are the Tangata Whenua of Aotearoa New Zealand. As such the College started

developing the College's formal position statement Recognising Te Tiriti o Waitangi and its principles, rights, and obligations.

In a further step of our recognition and commitment to Aotearoa, RACMA also commissioned a Māori sculpture which will compliment our First Nations Australia artwork.

This reporting period also involved much work from RACMA First Nations Advisor to support developing cultural protocols for RACMA 2023 and the College Conferment Ceremony to be held in Auckland.

RACMA continued to support Reconciliation Week and NAIDOC Week through various activities including staff participation in the Long Walk to the MCG and dedicated College Continuing Professional Development webinars to these campaigns.

Communications

This reporting period saw the establishment of a new Quarterly Journal Editorial Committee to move its current journal beyond a medical college professional magazine to a peer-reviewed and nationally recognised journal. By providing expert guidance and oversight, the Editorial Committee will help in moving the journal forward to ensure the highest standards of quality and relevance. The committee was selected through an Expression of Interest process and includes existing Quarterly Journal Honorary Editor Dr Andrew Robertson CSC PSM as Chair and RACMA Vice President Professor Erwin Loh.

The College Office delivered a refreshed website this reporting period. The College team listened to ongoing Member feedback to improve both the site's navigation and user experience. While the site retains its familiarity for Members, the aesthetic look is better aligned with RACMA branding. It is far more user friendly and contemporary. The RACMA website is now "persona" driven. This means there are entry points specifically designed for Members, those interested in becoming a Member and those wanting to know more about RACMA's work, the roles of our Members and the specialty of Medical Administration. There is a "Member hub" with sections designed for each membership category, containing information and resources easily identifiable and relevant to that category. There is also a new area within the Member Hub devoted to our jurisdictions and their activities.

RACMA continued to strengthen and develop its digital presence with the appointment of a Digital Marketing Intern and the implementation of a College Digital Marketing Strategy. The College successfully transitioned from its old Facebook account to a new College page connected to our Instagram account to help increase traffic. This reporting period also saw a strong growth on LinkedIn with the RACMA profile attracting about 1000 new followers.



Jurisdiction Map

AUSTRALIA

WESTERN AUSTRALIA	
Members	104
Females	38
Males	66
Fellows	25
Associate Fellows	49
Honorary Fellows	0
Long Standing Fellows	5
Non-Practicing Fellows	0
Affiliates	4
Candidates	21
Age Group with Largest Number of Members	36-49

SOUTH AUSTRALIA	
Members	110
Females	53
Males	57
Fellows	7
Associate Fellows	80
Honorary Fellows	1
Long Standing Fellows	6
Non-Practicing Fellows	1
Affiliates	2
Candidates	13
Age Group with Largest Number of Members	36-49

TASMANIA	
Members	56
Females	23
Males	33
Fellows	10
Associate Fellows	30
Honorary Fellows	1
Long Standing Fellows	1
Non-Practicing Fellows	6
Affiliates	0
Candidates	8
Age Group with Largest Number of Members	50-64



QUEENSLAND / NORTHERN TERRITORY	
Members	351
Females	127
Males	224
Fellows	85
Associate Fellows	182
Honorary Fellows	6
Long Standing Fellows	14
Non-Practicing Fellows	1
Affiliates	3
Candidates	60
Age Group with Largest Number of Members	36-49

NEW SOUTH WALES	
Members	330
Females	132
Males	198
Fellows	81
Associate Fellows	162
Honorary Fellows	4
Long Standing Fellows	24
Non-Practicing Fellows	2
Affiliates	6
Candidates	51
Age Group with Largest Number of Members	36-49

VICTORIA	
Members	380
Females	154
Males	225
Fellows	80
Associate Fellows	218
Honorary Fellows	4
Long Standing Fellows	17
Non-Practicing Fellows	3
Affiliates	7
Candidates	51
Age Group with Largest Number of Members	36-49

AUSTRALIAN CAPITAL TERRITORY	
Members	37
Females	17
Males	20
Fellows	12
Associate Fellows	12
Honorary Fellows	2
Long Standing Fellows	7
Non-Practicing Fellows	0
Affiliates	0
Candidates	4
Age Group with Largest Number of Members	50-64

AOTEAROA NEW ZEALAND	
Members	103
Females	38
Males	65
Fellows	32
Associate Fellows	53
Honorary Fellows	3
Long Standing Fellows	2
Non-Practicing Fellows	0
Affiliates	4
Candidates	9
Age Group with Largest Number of Members	50-64

AOTEAROA
NEW ZEALAND

ACT Jurisdictional Committee Report

Member Numbers	37
Fellows	12
Associate Fellows	12
Honorary Fellows	2
Long Standing Fellows	7
Non-Practicing Fellows	0
Affiliates	0
Candidates	4

LIST OF OFFICE BEARERS	
Chair	Dr Christina Wilkinson (until April 2023) Dr Robyn Walker (from April 2023)
Honorary Secretary	Dr Kate Tindall
Coordinator of Training	Dr Leonard Brennan
CPD Coordinator	Dr Kate Tindall
Candidate Representative	Dr Luke Edwards

The ACT membership is unique as it is a small jurisdiction, and most members work outside the ACT public hospital system.

As the COVID-19 pandemic waned there was a resumption of monthly face-to-face meetings with an option of virtual attendance.

The training positions of all new Candidates have been accredited for the 2023 training year. There are five active candidates, the largest cohort in the past decade. The ACT Jurisdictional Coordinator of Training continues to receive excellent support from the College Office in ensuring training positions are accredited despite the non-conventional nature of many positions.

MEMBER ACHIEVEMENTS

RACMA Fellow Dr Nicole Curtis RAN was made a Member of the Order of Australia (AM) in the King's Birthday Honours List for exceptional service to the Australian Defence Force in operational health, policy and capability.

The citation reads: 'Commodore Curtis' service has been characterised by devotion, fastidious attention to detail and moral courage. Her inspirational leadership has resulted in lasting reforms to policy, capability coordination and the safety and quality of health services provided to Australian Defence Force members both in Australia and when deployed on operations and major exercises.'

Aotearoa NZ Jurisdictional Committee Report

Member Numbers	103
Fellows	32
Associate Fellows	53
Honorary Fellows	3
Long Standing Fellows	2
Non-Practicing Fellows	0
Affiliates	4
Candidates	9

LIST OF OFFICE BEARERS	
Chair	Dr Andrew Simpson
Treasurer	Dr Peter Gootjes
Coordinator of Training	Dr Debbie Holdsworth Dr Paul Muir (from Feb 2023) Dr Mary Seddon (to Aug 2022)
CPD Coordinator	Dr Dilky Rasiah
Fellow Representative	Dr Iwona Stolarek Dr John Robson Dr Anil Nair Dr Peter Satterthwaite
Associate Fellow Representative	Dr Cameron Cole Dr Carl Eagleton (from Feb 2023) Mr David McCormack (from Feb 2023)
Candidate Representative	Dr Anand Desai (to Apr 2023)

- Riana Manuel, Chief Executive, Te Aka Whai Ora
- Fepulea'i Margie Apa, Chief Executive, Te Whatu Ora
- Dr David Hughes, Chief Medical Officer, Pharmac
- Dr Sue Nightingale, senior Psychiatrist and FRACMA
- Rob Campbell CNZM
- Mr Stephen McKernan QSO

A survey of the jurisdiction's Members has shown support to continue the forums.

Many Members of the jurisdiction spent the reporting period planning and preparing for the 2023 RACMA Conference in Auckland with the theme "Leadership in Action".

College President Dr Helen Parsons CSC and Chief Executive Mr Cris Massis spent time in the jurisdiction in May 2023, and attended the Medical Council of New Zealand annual meeting with all Medical Colleges as well as the quarterly Council of Medical Colleges (CMC) meeting.

The College also hosted a successful Leadership For Clinicians Program in Wellington this reporting period.

The Jurisdictional Committee welcomed new Members Dr Paul Muir, Dr Carl Eagleton, and Mr David McCormack, while Dr Mary Seddon and Dr Anand Desai stepped down during this reporting period. The Committee thanks Dr Seddon and Dr Desai for their work and commitment to the committee.

A number of the jurisdiction's Members joined key industry and College Committees throughout 2022/23.

Drs Stolarek, Rasiah, and Simpson have been representing RACMA at the CMC. Dr Stolarek was an elected member of the CMC executive during this period representing the wider Colleges. Drs Simpson and Stolarek represented RACMA at the launch of the Cultural Safety Training Plan by Te Ohu Rata o Aotearoa (Te Ora) and the CMC.

Dr Simpson represented RACMA at the Health Workforce Dialogue at Aotearoa New Zealand Parliament, hosted by the then Health Minister Honourable Andrew Little.

Dr Rasiah represented RACMA at the Medical Council of New Zealand annual meeting with the Medical Colleges.

College Committee representation:

- Dr Simpson represents Aotearoa New Zealand on the Policy & Advocacy Committee
- Dr Peter Jansen is Co-Chair of the Indigenous Health Policy & Advocacy Sub Committee
- Dr Muir represents Aotearoa New Zealand on the Fellowship Training Programme Renewal
- Dr Dilky Rasiah represents Aotearoa New Zealand on the Medical Workforce Policy & Advocacy Sub Committee
- Dr Kelvin Billingham represents Aotearoa New Zealand on the Rural Policy & Advocacy Sub Committee

MEMBER ACHIEVEMENTS

Dr Debbie Holdsworth was elected to the RACMA Board as a Director from the Fellow Membership Category, while Dr Brian Yow successfully passed his Medical Management Practice Oral Exam.

Honorary Fellow Dr Ashley Bloomfield (former New Zealand Director-General of Health) was granted knighthood in the New Year's Day Aotearoa New Zealand Honours. Dr Bloomfield was recognised for his work leading the health sector and managing the government's public health response to the COVID-19 pandemic.

The Aotearoa New Zealand Health Reforms gained pace this reporting period with the commencement of the Pae Ora Healthy Futures Act on 1 July 2022, and the establishment of Te Whatu Ora / Health New Zealand. Implementation of the health reforms is ongoing.

The refreshed Continuing Professional Development (CPD) framework went live during this reporting year, which for Aotearoa New Zealand, given the Medical Council of New Zealand requirements were on a different timeframe to its Australian counterpart, meant we had two approaches live at the same time. While this had the potential for confusion it was well navigated with good communications from the College. Positive feedback has been received from Members regarding the usefulness and useability of the updated College CPD Handbook.

The Aotearoa New Zealand Jurisdictional Committee initiated the Aotearoa New Zealand Member Forums in response to members who expressed the need for information sharing and exploring challenges and opportunities in the context of health reform implementation and the ongoing COVID impact. Nine forums were held throughout the 2022/23 year, featuring the following guest speakers:

- Dr Pete Watson, interim National Director-Medical, Te Whatu Ora
- Dr Steve Earnshaw, Chief Clinical Information Officer Capital & Coast District Health Board
- Megan Mains, Chief Executive Accident Compensation Corporation

NSW Jurisdictional Committee Report

Member Numbers	330
Fellows	81
Associate Fellows	162
Honorary Fellows	4
Long Standing Fellows	24
Non-Practicing Fellows	2
Affiliates	6
Candidates	51

LIST OF OFFICE BEARERS	
Chair	Dr Tony Sara
Honorary Secretary	Dr Daryl-Anne Elias
Coordinator of Training	Dr Tony Sara Dr Pankaj Banga Dr Grant Rogers (July 2022-February 2023) Dr Kashmira De Silva (February 2023-June 2023)
CPD Coordinator	Associate Professor Peter Thomas
Coordinator Scientific Program	Dr Sid Vohra (July 2022-January 2023) Dr Nanda Kumar (from February 2023)
Coordinator Tutorial Program	Dr Elizabeth Deards-West
Candidate Representative	Dr Raj Ubeja (July 2022-March 2023) Dr Demi Beneru (from March 2023) Dr Isabelle Kapterian
Member (co-opted)	Dr Natalie Klees Dr Lynette Lee Dr Greg Watters (National CPD Coordinator)
Member (ex-officio)	Dr Helen Parsons CSC Dr Cameron Korb-Wells
Other Members	Dr Roger Boyd Dr Claire Blizard Dr Helen Freeborn Dr Robyn Godding Dr Natalie Klees

The New South Wales Committee worked very hard to ensure Candidates and Members were well supported throughout this financial year.

The Committee continued to host weekly Candidate tutorials, which were very well attended with 20 to 40 participants and the annual Candidate session coordinated by the Jurisdictional Committee and the New South Wales Health Education and Training Institute (HETI) was also delivered. Practice exams were conducted face-to-face for the first time since 2019, which included Candidates from smaller jurisdictions.

The bi-monthly Scientific Program continued through this operating period, organised by Dr Sid Vohra and Dr Nanda Kumar. Speakers included:

- Carmel Monaghan, who presented “Strategic landscape of private hospitals in Australia, perspectives from Ramsay Health Care”.
- Gumbayngirr — Biripai man Terry Donovan, who presented “Walking beside Aboriginal & Torres Strait Islander people, in sickness and in health: An Elder’s Perspective”.
- Professor Cameron Stewart, who presented “Disciplinary action against health administrators: lessons from the Bacchus Marsh/ Djerriwarrh Health Services complaints”.
- Dr Wade Stedman (NSW Health Clinical Lead Voluntary Assisted Dying Implementation Team) and Antoinette Sedwell (NSW Health Senior Manager Voluntary Assisted Dying Implementation Team), who presented “Introduction to Voluntary Assisted Dying”.

A number of New South Wales Members gathered for the 2023 AGM in May, which included dinner and featured guest speaker NSW Chief Health Officer Dr Kerry Chant AO PSM. Dr Chant explored “Vaping Reform Changes and the New South Wales Pharmacists’ Prescribing Trial”.

MEMBER ACHIEVEMENTS

Dr Debra Graves (FRACMA) received the Medal of the Order of Australia (OAM) in the General Division in the Australia Day Honours List for service to Medical Administration, particularly to pathology.

Dr Milind Rawal represented the New South Wales jurisdiction at the National Margaret Tobin Challenge at the RACMA Conference in Hobart. His presentation detailed “The imPACT (Improving Patient Access Coordination and Transfer) program at NSW Health Central Coast Local Health District”.

QLD/NT Jurisdictional Committee Report

Member Numbers	351
Fellows	85
Associate Fellows	182
Honorary Fellows	6
Long Standing Fellows	14
Non-Practicing Fellows	1
Affiliates	3
Candidates	60

LIST OF OFFICE BEARERS	
Chair	Associate Professor Gail Robinson
Honorary Secretary	Dr Amber Winter
Treasurer	Dr Hwee Sin Chong
Coordinator of Training	Dr Leah Barrett-Beck Dr Felicity Jensen
CPD Coordinator	Dr Thuy Pham
Associate Fellow Representative	Dr Eugene Wong
Candidate Representative	Dr Hashim Abdeen (from June 2023) Dr Alisha Thomson (until May 2023)
Member (ex-officio)	Professor Alan Sandford AM
Other Members	Dr David Evans Dr Jon Hodge Dr Mark Waters Dr Monica Trujillo

During this reporting period, Dr Jon Hodge worked tirelessly with Dr Alisha Thomson and Dr Monica Korecki to prepare for the Queensland/Northern Territory Jurisdictional Candidate Workshop. The event provides Candidates with the opportunity to gain knowledge and insights from some of the College’s most experienced leaders, along with support to navigate the Fellowship Training Program. The feedback from the 2022 Workshop was overwhelmingly positive, not only from an educational perspective but also for networking after the constraints of COVID-19.

Weekly training sessions also continued to be provided to Candidates and were overseen by Dr Hodge and Dr Felicity Jensen. In keeping with the Queensland/Northern Territory Jurisdictional Committee expectation of a one-year membership for the Candidate representative, Dr Thomson stepped down from the Committee at the end of May and Dr Hashim Abdeen was welcomed in her place after an Expression of Interest process.

Dr Thuy Pham is to be congratulated for guiding the jurisdiction’s

Members through the transition to the new Continuing Professional Development program.

The jurisdiction coordinated the annual jurisdiction’s practice exam in May 2023. With the support of College staff, Dr Leah Barrett-Beck coordinated a successful hybrid face-to-face and online examination experience.

The Committee Chair worked with other jurisdictional chairs to review and refine the Jurisdictional Committee Terms of Reference. With these in place, there will be greater clarity and opportunity to engage Members.

Near the end of this reporting period Dr Amber Winter notified the Committee of her decision to stand down from the Honorary Secretary role. Dr Winter has competently filled the position for many years, and it was considered a great loss. However, there comes a time when each of us choose to move on to new opportunities in our lives. The Committee thanks Dr Winter for her years of dedication.

This reporting period also saw the resignation of Dr Monica Trujillo from the Committee and the Committee will miss her representation of the non-public sector including digital health.

The Committee also thanks Dr Alisha Thomson for her work and enthusiasm she brought to the Candidate representative role this reporting period.

Dr Felicity Jensen chose to take a break from the Committee in alignment with leave and Dr Jon Hodge was approved by the Committee to assist Dr Barrett-Beck in supporting our Candidates.

MEMBER ACHIEVEMENTS

Professor Alan Sandford AM was awarded the College Medallion for outstanding service to the College Board and Membership spanning almost three decades, carrying out key roles including President, Censor in Chief and Chair of Finance and Audit Committee.

The Committee nominated Dr Felicity Jensen for the New Fellow Achievement Award, which she was successfully awarded for ongoing and significant commitment to improving College activities and processes to support Members in Queensland and across other jurisdictions.

Additionally, Associate Professor Mark Mattiussi was recognised for his commitment and excellence as Supervisor of the Year, Dr Marlow Coates was awarded the Bernard Nicholson Prize for the outstanding Candidate at oral examinations and Dr Carl De Wet represented the jurisdiction in the National Margaret Tobin Challenge at the RACMA Conference in Hobart.

The jurisdiction welcomed two more Honorary Fellows - Professor Geoff McColl, Executive Dean of the Faculty of Medicine at the University of Queensland, and Professor Len Notaras AO, Executive Director of the National Critical Care and Trauma Response Centre (NCCTRC).

Dr Hwee Sin presented at the 45th World Hospital Congress, in Dubai (November 2022) and participated as an alumna in the International Hospital Federation Young Executive Leaders workshop.

Dr Michael Clements was part of an international panel at the Faculty of Medical Leadership and Management (FMLM) International Healthcare Leadership Conference (November 2022).

The Committee also congratulates all Candidates who successfully passed the Medical Management Practice Oral Examination.

SA Jurisdictional Committee Report

Member Numbers	110
Fellows	7
Associate Fellows	80
Honorary Fellows	1
Long Standing Fellows	6
Non-Practicing Fellows	1
Affiliates	2
Candidates	13

LIST OF OFFICE BEARERS	
Chair	Dr Jayanthi Jayakaran (until August 2022) Dr Mary Boyd Turner (from August 2022)
Coordinator of Training	Dr Elaine Pretorius (until January 2023) Dr Mary Boyd Turner (from February 2023)
CPD Coordinator	Dr Krish Sundararajan Dr Thara Ramkumar (AFRACMA)
Associate Fellow Representative	Dr Milind Sanap Dr Shriram Nath

The South Australian membership made some growth early in 2023, welcoming six new Candidates and a Fellow who took up a Deputy Director of Medical Services position at one of the local health networks.

The Committee hosted two very well attended Continuing Professional Development (CPD) events this reporting period. In January, Dr Hiren Chotaliya (FACEM AFRACMA) presented on the development and implementation of the “Northern Adelaide Local Health Network AMC Accredited Work- Based Assessment” program. In March Ms Heather Hibberd (National Manager, Risk Services, MIGA), Ms Paula Meegan (Risk Education Manager, MIGA) and Dr Andrew VanLint (Haematologist, LMHS, NALHN) provided important insights into “Raising Concerns, Risk Management and Professional Accountability”.

The Australian Medical Students’ Association held their first ever Careers Conference in Adelaide in March 2023 and South Australian Members Dr Jayanthi Jayakaran (FRACMA) and Dr Toby Gilbert (Candidate) participated in a panel session highlighting the career of and pathways to Medical Leadership and RACMA.

The Committee itself saw some personnel changes with Dr Jayanthi Jayakaran stepping down as the Jurisdictional Committee Chair and Dr Mary Boyd Turner has taken up this role.

Dr Elaine Pretorius stepped down from the Jurisdictional Coordinator of Training position and Dr Mary Boyd Turner is now looking after this area. Friday afternoon sessions with Candidates occurred every two to four weeks throughout the year.

RACMA increased its presence in key decision-making roles within the health sector in South Australia as FRACMA Dr Robyn Lawrence took up the position of Chief Executive, South Australia Department of Health and Wellbeing in September 2022.

TAS Jurisdictional Committee Report

Member Numbers	56
Fellows	10
Associate Fellows	30
Honorary Fellows	1
Long Standing Fellows	1
Non-Practicing Fellows	6
Affiliates	0
Candidates	8

LIST OF OFFICE BEARERS	
Chair	Associate Professor Kath Atkinson (until April 2023) Dr Ruth Kearon (from April 2023)
Honorary Secretary	Dr Peter Renshaw (until February 2023)
Coordinator of Training	Dr Helen McArdle
Fellow Representative	Dr Allison Turnock
Candidate Representative	Dr Shehzad Kunwar

The Tasmanian FRACMA fraternity is a small but engaged group who connect with and support each other through several mechanisms. These include Peer Review Learning Sets and assistance, calibrated to their changing needs, for trainees who are progressing through their training Programs.

The Tasmanian Committee thanks their jurisdictional colleagues who continue to embrace and support the Tasmanian Candidates through their educational programs and also provide ongoing access to and inclusion in peer learning sets.

The Tasmanian Members were supported by the Jurisdictional Committee to host a dinner to farewell the Chief Medical Officer and RACMA Board Director Dr Tony Lawler.

MEMBER ACHIEVEMENTS

Dr Tony Lawler was elected to the RACMA Board as a Director from the Fellow membership category.

VIC Jurisdictional Committee Report

Member Numbers	380
Fellows	80
Associate Fellows	218
Honorary Fellows	4
Long Standing Fellows	17
Non-Practicing Fellows	3
Affiliates	7
Candidates	51

LIST OF OFFICE BEARERS	
Chair	Dr Katherine Worsley
Honorary Secretary	Dr David Rankin
Coordinator of Training	Dr Anand Ponniraivan
CPD Coordinator	Dr Ian Graham
Associate Fellow Representative	Dr Angela Williams
Candidate Representative	Dr Nathan Vos Dr Nabrees Sinnalebbe (from March 2023) Dr Hemant Diesh (until March 2023)
Fellow Representative	Dr Jason Goh Associate Professor Luis Prado (until June 2023) Dr Sidney Chandrasiri (until June 2023) Professor Mary O'Reilly (from June 2023)
JC Event Coordinators	Dr Suhan Baskar Dr Rex Prabhu (from 30/06/23)
Ex Officio	Professor Erwin Loh

In 2022, a major change for the Victorian healthcare sector was the introduction of Statutory Duty of Candor. RACMA organised an online session with a panel of experts who discussed the Statutory Duty of Candour amendment within the Health Services Act. The legislation was the final legislative recommendation from Targeting Zero — Supporting the Victorian hospital system to eliminate avoidable harm and strengthen quality of care — the report of the Review of Hospital Safety and Quality Assurance in Victoria.

- The panel comprised:
- Adjunct Clinical Professor Harvey Newman, one of three members of the Review Panel which produced the report "Targeting Zero"
 - Michael Gorton AM, Chair of the Expert Advisory Committee to the Victorian Government regarding the Duty of Candour Legislation
 - Paula Davey, Member of the Health Consumer/Community Accreditation Committee with Postgraduate Medical Council of Victoria
 - Dr Anthony Tobin, Chief Medical Officer St Vincent's Melbourne

The Victorian jurisdiction held their Annual Scientific Meeting (ASM) at Epworth in October, which was one of the first in-person events for

the jurisdiction for some time. The event provided a great opportunity to network while hearing from keynote speakers:

- Dr Annette Holian, President, Australian Orthopedic Association
- Dr Glenn Harrison, Emergency Physician and Director at Australian Indigenous Doctors' Association

The Committee hosted a social networking event for Candidates, Supervisors, Preceptors, and the Jurisdictional Coordinator of Training early 2023. The event discussed the College's newly launched Scope of Practice document and featured several guest speakers who provided a personal insight into their own careers in Medical Administration.

At the end of this reporting period, the jurisdiction hosted their annual Margaret Tobin Challenge, combined with a panel discussion on the Risks and Challenges of Artificial Intelligence in Healthcare.

Dr Nathan Vos was judged the Victorian Jurisdiction's winner of the Challenge. The guest panel discussed the future potential impact of AI on health care and featured:

- Stefan Harrer, Chief Innovation Officer, Digital Health CRC Ltd.
- Chris Bain, Professor of Practice, Digital Health, Faculty of IT Monash
- Vickie Irving, Deputy Chief Health Officer and Head of Clinical Innovation and Evaluation at Telstra Health

The Committee would like to acknowledge and thank Associate Professor Luis Prado and Dr Sidney Chandrasiri who stepped down from the committee after years of tremendous contribution.

Recognition of Prior Learning and Experience (RPLE) Assessments
The Board approved the new framework for RPLE in this reporting period. The new framework will see the RPLE assessments moved to an activity based, experiential assessment which will result in a workplan for the Candidate. The Victorian Jurisdictional Committee, through its Jurisdictional Coordinator of Training, has worked closely with the jurisdiction's Candidates to guide and support them through this change.

Victorian Health Workforce Strategy
The Victorian Health Workforce Strategy has been a key area of focus by the Victorian Department of Health and Human Services. Jennifer Dobell and the Victorian Health Workforce Strategy team have liaised with the Victorian RACMA Jurisdictional Coordinator of Training to develop the document.

- The key priorities of the strategy include:
- Critical roles - Clinical roles that require immediate supply and retention interventions to meet immediate needs and address forecasted shortage
 - Future workforce - Roles with significant growth opportunity including assistant and advanced practice workforces.
 - Demand areas - High demand growth segments with significant volume, and immediate and forecasted workforce needs.

- The key focus areas of the strategy include:
- Increase supply of critical roles
 - Strengthen rural and regional workforce
 - Create a world-leading employee experience
 - Build future roles and capabilities
 - Transform use of digital, data and technology.
 - The key strategy areas continue to be developed and rolled out and the Victorian Jurisdictional Committee is supporting this

MEMBER ACHIEVEMENTS

Professor John Zalberg OAM (FRACMA) received Officer (AO) in the General Division in the King's Birthday Honours List for distinguished service to oncology as a clinician researcher, and as an advocate for those living with cancer.

WA Jurisdictional Committee Report

Member Numbers	104
Fellows	25
Associate Fellows	49
Honorary Fellows	0
Long Standing Fellows	5
Non-Practicing Fellows	0
Affiliates	4
Candidates	21

LIST OF OFFICE BEARERS	
Chair	Dr PK Loh
Treasurer	Dr Terry Bayliss
Coordinator of Training	Dr Deepan Krishnasivam Dr Ajitha Nair
CPD Coordinator	Dr Ranjit Paul
Associate Fellow Representative	Dr Andrew Thompson Dr Jenny Grew
Candidate Representative	Dr James Caudle
Department of Health Representative	Dr Andrew Robertson CSC PSM

The Western Australian Jurisdictional Committee has been active within the sector and at various events this reporting period.

The RACMA Office had a booth and sponsored a speaker at Medcon 2023 in June, which the Jurisdictional Committee supported. Medcon is organised by the Western Australian Medical Association and the Western Australian branches or divisions of each of the medical specialist colleges. Many doctors with an interest in Medical Administration visited the RACMA booth.

The Jurisdictional Committee organised a networking event for Members to meet A Better Culture Chief Executive Dr Jillann Farmer and learn more about the project.

The jurisdiction's Christmas party was cancelled this reporting period due to a scheduling clash with the Western Australian Nursing Awards, which was attended by senior RACMA Fellows and invited guests for the Christmas party.

The Western Australian Jurisdictional Committee hosted a booth at the 2023 Medical Career Expo held at the Crown Convention Centre in March 2023. The booth was popular with Junior Medical Officers and medical students interested in Medical Administration.

Members of the Committee presented the new RACMA Scope of Practice document to the Principal Policy Officer for the Western Australia Minister of Health, Mr Cameron Barnes. It was also presented to the Shadow Minister of Health Ms Elizabeth (Libby) Mettam MLA.

The Western Australian jurisdiction was also involved in inter-jurisdictional RACMA trial exams this reporting period. The trial exam involved Candidates from Western Australia, Aotearoa New Zealand and South Australia.

MEMBER ACHIEVEMENTS

The 2022 National Margaret Tobin Challenge was awarded to Western Australian Candidate Dr Jerry Alex Abraham at RACMA 2022 in Hobart. Dr Abraham's presentation focussed on "Exploring the early use of aspirin to prevent pre-eclampsia in a rural Aboriginal community".

Finance and Audit Report

Report from the Chair of the Finance and Audit Committee



On behalf of the Finance and Audit Committee of the College I am pleased to report to the membership on the financial performance of the College for the 2022-23 financial year.

The overall financial result for the College this year was a loss of \$116,427. Total cash held totalled \$10.69 million for the 2022/23 financial year, an increase of \$240k on previous year. As at 30 June 2023, RACMA's investment corpus value is at \$2.96 million.

Revenue for the reporting year was \$10.64 million in comparison to \$8.94 million in 2021/22.

Expenditure totalled \$10.67 million for the year which was an increase of \$1.65 million on the previous year. Some changes to expenditure when compared to 2021/22 were as follows:

- Employee benefits (\$778k) – due to increased staffing in relation to FTP renewal project.
- Conference expenses (\$446k) – as a result of the return to face to face Conference in Hobart.
- Professional services and consultants \$123k - IT business requirements and legal fees for the Constitutional Review.

The RACMA Board thanks Saward Dawson for their work and recommendations to the College as our auditors and look forward to continuing to work with them for the next financial year

I would like to acknowledge the work of the RACMA secretariat who continue to support the work of the Finance and Audit Committee. It's an honour to hold this important role and to assist in ensuring that the College remains financially secure and is establishing a solid base to fund future work.

Professor Alan Sandford AM
Chair, Finance & Audit Committee

FINANCIAL STATEMENTS

For the Year Ended 30 June 2023

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The Royal Australasian College of Medical Administrators

ABN: 39 004 688 215

Directors' Report

30 June 2023

Your directors present their report on the College for the financial year ended 30 June 2023.

General information

Information on directors

The names of each person who has been a director during the year and to the date of this report are:

- Dr Helen Parsons CSC
- Prof Erwin Loh
- Prof Alan Sandford AM
- Prof Pooshan Navathé
- Dr Helen McArdle
- Dr Mellissa Naidoo - Term ended 28/09/2022
- A/Prof Luis Prado - Term ended 28/09/2022
- Dr Angela Williams
- Adj/Prof Gillian Biscoe AM
- Prof Jane Bryson - Term commenced 14/07/2022
- Dr Debbie Holdsworth - Term commenced 28/09/2022
- Prof Tony Lawler - Term commenced 28/09/2022
- Dr Cameron Korb-Wells - Term commenced 28/09/2022

Directors who have completed their terms, been elected or appointed during the financial year have been identified.

Operating results and review of operations for the year

The loss of the College for the year, after providing for income tax amounted to \$ (116,427) (2022: \$ (84,502)).

This loss was largely the result of investment in the Fellowship Training Renewal Project totalling \$333,828 partly offset by unrealised gains on the investment corpus totalling \$201,877 due to the global economic conditions this year.

Dividends paid or recommended

In accordance with its Constitution, the College is prohibited from declaring any form of dividend in favour of its members.

Significant Changes in State of Affairs

The principal activities of the College during the financial year were Medical Administration Education

No significant change in the nature of these activities occurred during the year.

The Royal Australasian College of Medical Administrators

ABN: 39 004 688 215

Directors' Report

30 June 2023

Events after the reporting date

No matters or circumstances have arisen since the end of the financial year which significantly affect the operations of the College, the results of those operations or the state of affairs of the College in future financial years.

Likely developments in the operations of the College and the expected results of those operations in future financial years have not been included in the report as the inclusion of such information is likely to result in unreasonable prejudice to the College.

Environmental issues

The College's operations are not regulated by any significant environmental regulations under a law of the Commonwealth or of a state or territory of Australia.

Dividends paid or recommended

In accordance with its Constitution, the College is prohibited from declaring any form of dividend in favour of its members.

Meetings of directors

During the financial year, 8 meetings of directors (including committees of directors) were held. Attendances by each director during the year were as follows:

	Directors' Meetings	
	Number eligible to attend	Number attended
Dr Helen Parsons CSC	8	7
Prof Erwin Loh	8	7
Prof Alan Sandford AM	8	7
Prof Pooshan Navathé	8	5
Dr Helen McArdle	8	8
Dr Mellissa Naidoo	3	3
A/Prof Luis Prado	3	3
Dr Angela Williams	8	7
Adj/Prof Gillian Biscoe AM	8	7
Prof Jane Bryson	8	7
Dr Debbie Holdsworth	5	5
Prof Tony Lawler	5	5
Dr Cameron Korb-Wells	5	4

The Royal Australasian College of Medical Administrators

ABN: 39 004 688 215

Directors' Report

30 June 2023

Indemnification and insurance of officers and auditors

No indemnities have been given or insurance paid, during or since the end of the financial year, for any person who is or has been an auditor of the College. During the financial year the College has paid premiums to insure the directors against liabilities for costs and expenses incurred by them in defending any legal proceedings arising out of their conduct while acting in the capacity of a director of the College, other than conduct involving wilful breach of duty in relation to the College.

No person has applied for leave of Court to bring proceedings on behalf of the College or intervene in any proceedings to which the College is a party for the purpose of taking responsibility on behalf of the College for all or any part of those proceedings. The College was not party to any such proceedings during the year.

Auditor's independence declaration

The lead auditor's independence declaration for the year ended 30 June 2023 has been received and can be found on page 31 of the financial report.

Signed in accordance with a resolution of the Board of Directors:

Director: 

Dr Helen Parsons CSC

Director: 

Prof Erwin Loh

Director: 

Prof Alan Sandford AM

Dated this 18th day of September 2023

The Royal Australasian College of Medical Administrators

ABN: 39 004 688 215

Statement of Profit or Loss and Other Comprehensive Income

For the Year Ended 30 June 2023

		2023	2022
	Note	\$	\$
Income	4	10,644,632	8,936,519
Employee benefits expense		(4,127,862)	(3,348,932)
Depreciation and amortisation		(97,590)	(182,512)
Governance expenses		(56,536)	(54,955)
Faculty support		(60,836)	(33,907)
Training and education		(880,226)	(966,456)
Annual conference		(446,639)	-
Marketing and promotions		(179,536)	(54,734)
Office supplies		(61,132)	(58,244)
Professional services		(405,800)	(282,226)
Occupancy expenses		(44,069)	(45,968)
IT expense		(371,148)	(152,724)
STP Project expense		(3,550,981)	(3,583,596)
Doubtful debts expense		(39,187)	(15,952)
Other operating expenses		(439,517)	(240,815)
Deficit for the year		(116,427)	(84,502)
Total comprehensive income for the year		(116,427)	(84,502)

The Royal Australasian College of Medical Administrators

ABN: 39 004 688 215

Statement of Financial Position

As At 30 June 2023

	Note	2023 \$	2022 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	7	10,691,831	10,451,142
Trade and other receivables	8	1,660,968	844,180
Other financial assets	9	4,780,786	4,212,694
TOTAL CURRENT ASSETS		17,133,585	15,508,016
NON-CURRENT ASSETS			
Property, plant and equipment	10	1,489,999	1,530,526
Intangible assets	11	22,913	61,761
TOTAL NON-CURRENT ASSETS		1,512,912	1,592,287
TOTAL ASSETS		18,646,497	17,100,303
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables	12	793,788	581,214
Employee benefits	13	281,604	173,715
Other financial liabilities	14	10,095,325	8,757,581
TOTAL CURRENT LIABILITIES		11,170,717	9,512,510
NON-CURRENT LIABILITIES			
Employee benefits	13	71,322	66,908
TOTAL NON-CURRENT LIABILITIES		71,322	66,908
TOTAL LIABILITIES		11,242,039	9,579,418
NET ASSETS		7,404,458	7,520,885
EQUITY			
Reserves		306,154	323,110
Retained earnings		7,098,304	7,197,775
TOTAL EQUITY		7,404,458	7,520,885

The accompanying notes form part of these financial statements.

The Royal Australasian College of Medical Administrators

ABN: 39 004 688 215

Statement of Changes in Equity

For the Year Ended 30 June 2023

2023

	Retained Surplus \$	State Funds \$	Bernard Nicholson Prize Fund \$	Sir Raphael Cilento Oration Fund \$	NSW Administration Course & Education Fund \$	Total \$
Balance at 1 July 2022	7,197,775	251,987	32,988	12,086	26,049	7,520,885
(Deficit) for the year	(116,427)	-	-	-	-	(116,427)
Transfers	16,956	(4,870)	-	(12,086)	-	-
Balance at 30 June 2023	7,098,304	247,117	32,988	-	26,049	7,404,458

2022

	Retained Surplus \$	State Funds \$	Bernard Nicholson Prize Fund \$	Sir Raphael Cilento Oration Fund \$	NSW Administration Course & Education Fund \$	Total \$
Balance at 1 July 2021	7,259,911	274,353	32,988	12,086	26,049	7,605,387
(Deficit) for the year	(84,502)	-	-	-	-	(84,502)
Transfers	22,366	(22,366)	-	-	-	-
Balance at 30 June 2022	7,197,775	251,987	32,988	12,086	26,049	7,520,885

The accompanying notes form part of these financial statements.

The Royal Australasian College of Medical Administrators

ABN: 39 004 688 215

Statement of Cash Flows

For the Year Ended 30 June 2023

	Note	2023 \$	2022 \$
CASH FLOWS FROM OPERATING ACTIVITIES:			
Receipts from members		5,068,893	5,299,833
Government grants, conferences, sponsorship and other receipts		6,114,108	5,231,580
Interest received		55,350	5,567
Payments to suppliers and employees		(10,603,402)	(9,308,026)
Net cash provided by/(used in) operating activities	16	634,949	1,228,954
CASH FLOWS FROM INVESTING ACTIVITIES:			
Proceeds from sale of investment		-	564,395
Redemption/ (Placement) of term deposits		(11,530)	-
Dividends received		67,240	67,911
Purchase of property, plant and equipment		(18,215)	(2,428)
Purchase of investments		(431,755)	(1,047,594)
Proceeds from sale of non-current assets		-	10,896
Net cash provided by/(used in) investing activities		(394,260)	(406,820)
CASH FLOWS FROM FINANCING ACTIVITIES:			
Net cash provided by/(used in) financing activities		-	-
Net increase/(decrease) in cash and cash equivalents held		240,689	822,134
Cash and cash equivalents at beginning of year		10,451,142	9,629,008
Cash and cash equivalents at end of financial year	7	10,691,831	10,451,142

The accompanying notes form part of these financial statements.

The Royal Australasian College of Medical Administrators

ABN: 39 004 688 215

Notes to the Financial Statements

For the Year Ended 30 June 2023

The financial statements cover The Royal Australasian College of Medical Administrators as an individual entity. The Royal Australasian College of Medical Administrators is a company limited by guarantee, incorporated and domiciled in Australia.

The functional and presentation currency of The Royal Australasian College of Medical Administrators is Australian dollars.

The financial statements were authorised for issue on the same date as the signing of the Directors' Declaration by the Board of Directors.

Comparative Amounts

Comparatives are consistent with prior years, unless otherwise stated.

1 Basis of Preparation

These general purpose financial statements have been prepared in accordance with the *Australian Charities and Not-for-profits Commission Act 2012* and Australian Accounting Standards and Interpretations of the Australian Accounting Standards Board. The Entity is a not-for-profit entity for financial reporting purposes under Australian Accounting Standards. Material accounting policies adopted in the preparation of these financial statements are presented below and have been consistently applied unless stated otherwise.

The financial statements, except for cash flow information, have been prepared on an accruals basis and are based on historical costs modified, where applicable, by the measurement at fair value of selected non-current assets, financial assets and financial liabilities. The amounts presented in the financial statements have been rounded to the nearest dollar.

2 Summary of Significant Accounting Policies

(a) Income Tax

No provision for income tax has been raised as the College is exempt from income tax under Div. 50 of the *Income Tax Assessment Act 1997*.

The College is a charitable entity registered with the Australian Charities and Not-for-profits Commission.

(b) Current and non-current classification

Assets and liabilities are presented in the statement of financial position based on current and non-current classification.

An asset is classified as current when: it is either expected to be realised or intended to be sold or consumed in the company's normal operating cycle; it is held primarily for the purpose of trading; it is expected to be realised within 12 months after the reporting period; or the asset is cash or cash equivalent unless restricted from being exchanged or used to settle a liability for at least 12 months after the reporting period. All other assets are classified as non-current.

A liability is classified as current when: it is either expected to be settled in the company's normal operating cycle; it is held primarily for the purpose of trading; it is due to be settled within 12 months after the reporting period; or there is no unconditional right to defer the settlement of the liability for at least 12 months after the reporting period. All other liabilities are classified as non-current.

The Royal Australasian College of Medical Administrators

ABN: 39 004 688 215

Notes to the Financial Statements

For the Year Ended 30 June 2023

2 Summary of Significant Accounting Policies

(c) Goods and services tax (GST)

Revenue, expenses and assets are recognised net of the amount of goods and services tax (GST), except where the amount of GST incurred is not recoverable from the Australian Taxation Office (ATO).

Receivables and payables are stated inclusive of the amount of GST receivable or payable. The net amount of GST recoverable from, or payable to, the ATO is included with other receivables or payables in the statement of financial position.

Cash flows in the statement of cash flows are included on a gross basis and the GST component of cash flows arising from investing and financing activities which is recoverable from, or payable to, the taxation authority is classified as operating cash flows included in receipts from customers or payments to suppliers.

(d) Revenue and other income

The core principle of AASB 15 is that revenue is recognised on a basis that reflects the transfer of promised goods or services to customers at an amount that reflects the consideration the College expects to receive in exchange for those goods or services.

Revenue is recognised by applying a five-step model as follows:

- 1. Identify the contract with the customer.
- 2. Identify the performance obligations.
- 3. Determine the transaction price.
- 4. Allocation of the transaction price to the performance obligations.
- 5. Recognise revenue as and when control of the performance obligations is transferred.

Generally the timing of the payment for sale of goods or rendering of services corresponds closely to the timing of satisfaction of the performance obligations, however, where there is a difference, it will result in the recognition of a receivable, contract assets or contract liability. None of the revenue streams of the company have any significant financing terms as there is less than 12 months between receipts of funds and satisfaction of performance obligations.

The Royal Australasian College of Medical Administrators

ABN: 39 004 688 215

Notes to the Financial Statements

For the Year Ended 30 June 2023

2 Summary of Significant Accounting Policies

(d) Revenue and other income

The revenue recognition policies for the principal revenue streams of the College are:

Operating Grants, Donations and Bequests

When the College receives operating grant revenue, donations or bequests, it assesses whether the contract is enforceable and has sufficiently specific performance obligations in accordance to AASB 15.

When both these conditions are satisfied, the College:

- identifies each performance obligation relating to the grant
- recognises a contract liability for its obligations under the agreement
- recognises revenue as it satisfies its performance obligations.

Where the contract is not enforceable or does not have sufficiently specific performance obligations, the College:

- recognises the asset received in accordance with the recognition requirements of other applicable accounting standards (e.g. AASB 9, AASB 16, AASB 116 and AASB 138)
- recognises related amounts (being contributions by owners, lease liability, financial instruments, provisions, revenue or contract liability arising from a contract with a customer)
- recognises income immediately in profit or loss as the difference between the initial carrying amount of the asset and the related amount.

If a contract liability is recognised as a related amount above, the College recognises income in profit or loss when or as it satisfies its obligations under the contract.

Rendering of services

Revenue in relation to rendering of services is recognised depending on whether the outcome of the services can be measured reliably. If this is the case then the stage of completion of the services is used to determine the appropriate level of revenue to be recognised in the period. If the outcome cannot be reliably measured then revenue is recognised to the extent of expenses recognised that are recoverable

Dividend revenue

Dividends are recognised in profit or loss only when the right to receive payment is established.

Interest revenue

Interest revenue is recognised using the effective interest rate method.

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Notes to the Financial Statements

For the Year Ended 30 June 2023

2 Summary of Significant Accounting Policies

(d) Revenue and other income

Advancement fees

Advancement to Associate Fellowship and Advancement to Fellowship fees are recognised on a straight line basis over the average number of years of active membership. This has been determined as 6 and 25 years respectively.

Training enrolment fees

Training enrolment fees are recognised on a straight line basis over the average number of years of a Candidate. This has been determined as 4 years.

Other fees

Other fees are recognised on a basis that reflects the transfer of promised goods or services to customers at an amount that reflects the consideration the College expects to receive in exchange for those goods or services.

STP Income

STP Income is recognised when the expense to fulfill the performance obligations of the grant has been incurred.

Other income

Other revenue is recognised on a basis that reflects the transfer of promised goods or services to customers at an amount that reflects the consideration the College expects to receive in exchange for those goods or services.

All revenue is stated net of the amount of goods and service tax.

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Notes to the Financial Statements

For the Year Ended 30 June 2023

2 Summary of Significant Accounting Policies

(e) Cash and cash equivalents

Cash and cash equivalents comprises cash on hand, demand deposits and short-term investments which are readily convertible to known amounts of cash and which are subject to an insignificant risk of change in value.

(f) Property, plant and equipment

Each class of property, plant and equipment is carried at cost or fair value less, where applicable, any accumulated depreciation and impairment.

Land and buildings

Freehold land and buildings are measured on the cost basis less depreciation and impairment losses. Costs include expenditure that is directly attributable to the asset.

Plant and equipment

Plant and equipment are measured on the cost basis less depreciation and impairment losses. Cost includes expenditure that is directly attributable to the asset.

Depreciation

Property, plant and equipment, excluding freehold land, is depreciated on a straight-line basis over the assets useful life to the College, commencing when the asset is ready for use. The depreciation rates used for each class of depreciable asset are shown below:

Fixed asset class	Depreciation rate
Buildings	2.5%
Plant and Equipment	10 - 50%
Gowns	10%

At the end of each annual reporting period, the depreciation method, useful life and residual value of each asset is reviewed. Any revisions are accounted for prospectively as a change in estimate.

When an asset is disposed, the gain or loss is calculated by comparing proceeds received with its carrying amount and is taken to profit or loss.

(g) Intangible assets

Website and Software

Website and Software as a Service (SaaS) that meet the definitions of AASB 138 Intangible assets are recorded at cost. These have a finite life and are carried at cost less accumulated amortisation and any impairment losses. Website and SaaS intangible assets have an estimated useful life of 5 years and are assessed annually for impairment. All other SaaS related costs are expensed when incurred.

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Notes to the Financial Statements

For the Year Ended 30 June 2023

2 Summary of Significant Accounting Policies

(h) Financial instruments

Financial instruments are recognised initially on the date that the College becomes party to the contractual provisions of the instrument. For financial assets, this is equivalent to the date that the College commits itself to either the purchase or sale of the asset (i.e. trade date accounting is adopted).

On initial recognition, all financial instruments are measured at fair value plus transaction costs (except for instruments measured at fair value through profit or loss where transaction costs are expensed as incurred).

Financial assets

All recognised financial assets are subsequently measured in their entirety at either amortised cost or fair value, depending on the classification of the financial assets.

Classification

On initial recognition, the College classifies its financial assets into the following categories, those measured at:

- amortised cost
- fair value through profit or loss - FVTPL

Financial assets are not reclassified subsequent to their initial recognition unless the College changes its business model for managing financial assets.

Amortised cost

Assets measured at amortised cost are financial assets where:

- the business model is to hold assets to collect contractual cash flows; and
- the contractual terms give rise on specified dates to cash flows are solely payments of principal and interest on the principal amount outstanding.

The College's financial assets measured at amortised cost comprise trade and other receivables and cash and cash equivalents in the statement of financial position.

Subsequent to initial recognition, these assets are carried at amortised cost using the effective interest rate method less provision for impairment.

Interest income, foreign exchange gains or losses and impairment are recognised in profit or loss. Gain or loss on derecognition is recognised in profit or loss.

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Notes to the Financial Statements

For the Year Ended 30 June 2023

2 Summary of Significant Accounting Policies

(h) Financial instruments

Financial assets

Financial assets through profit or loss

All financial assets not classified as measured at amortised cost as described above are measured at FVTPL.

Net gains or losses, including any interest or dividend income are recognised in profit or loss.

The College's financial assets measured at FVTPL comprise of managed funds and equity investments in the statement of financial position.

Impairment of financial assets

Impairment of financial assets is recognised on an expected credit loss (ECL) basis for the following assets:

- financial assets measured at amortised cost

When determining whether the credit risk of a financial assets has increased significant since initial recognition and when estimating ECL, the College considers reasonable and supportable information that is relevant and available without undue cost or effort. This includes both quantitative and qualitative information and analysis based on the College's historical experience and informed credit assessment and including forward looking information.

The College uses the presumption that an asset which is more than 60 days past due has seen a significant increase in credit risk.

The College uses the presumption that a financial asset is in default when the other party is unlikely to pay its credit obligations to the College in full.

Trade receivables

Impairment of trade receivables have been determined using the simplified approach in AASB 9 which uses an estimation of lifetime expected credit losses. The College has determined the probability of non-payment of the receivable and multiplied this by the amount of the expected loss arising from default.

The amount of the impairment is recorded in a separate allowance account with the loss being recognised in finance expense. Once the receivable is determined to be uncollectable then the gross carrying amount is written off against the associated allowance.

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Notes to the Financial Statements
For the Year Ended 30 June 2023

2 Summary of Significant Accounting Policies

(h) Financial instruments

Financial liabilities

The College measures all financial liabilities initially at fair value less transaction costs, subsequently financial liabilities are measured at amortised cost using the effective interest rate method.

The effective interest method is a method of calculating the amortised cost of a debt instrument and of allocating interest expense in profit or loss over the relevant period

The effective interest rate is the internal rate of return of the financial asset or liability. That is, it is the rate that exactly discounts the estimated future cash flows through the expected life of the instrument to the net carrying amount at initial recognition.

The financial liabilities of the College comprise of trade payables.

(i) Fair value measurement

When an asset or liability, financial or non-financial, is measured at fair value for recognition or disclosure purposes, the fair value is based on the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date; and assumes that the transaction will take place either: in the principal market; or in the absence of a principal market, in the most advantageous market.

Fair value is measured using the assumptions that market participants would use when pricing the asset or liability, assuming they act in their economic best interests. For non-financial assets, the fair value measurement is based on its highest and best use. Valuation techniques that are appropriate in the circumstances and for which sufficient data are available to measure fair value, are used, maximising the use of relevant observable inputs and minimising the use of unobservable inputs.

(j) Impairment of non-financial assets

At the end of each reporting period the College determines whether there is evidence of an impairment indicator for non-financial assets.

Where an indicator exists, the recoverable amount is estimated for both indefinite life intangible assets and intangible assets not yet available for use.

Where the recoverable amount is less than the carrying amount, an impairment loss is recognised in profit or loss.

Reversal indicators are considered in subsequent periods for all assets which have suffered an impairment loss.

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Notes to the Financial Statements
For the Year Ended 30 June 2023

2 Summary of Significant Accounting Policies

(k) Loans and receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market. They arise principally through the provision of goods and services to customers but also incorporate other types of contractual monetary assets.

After initial recognition these are measured at amortised cost using the effective interest method, less provision for impairment. Any change in their value is recognised in profit or loss.

The College's trade and most other receivables fall into this category of financial instruments. In some circumstances, the College renegotiates repayment terms with customers which may lead to changes in the timing of the payments, the College does not necessarily consider the balance to be impaired, however assessment is made on a case-by-case basis.

(l) Trade and other payables

Accounts payable and other payables represent the liabilities at the end of the reporting period for goods and services received by the College during the reporting period which remain unpaid. The balance is recognised as a current liability with the amounts normally paid within 30 days of recognition of the liability.

Accounts payable are recognised at their transaction price. Accounts payable are obligations on the basis of normal credit terms.

(m) Employee benefits

Short-term employee provisions

Provision is made for the College's obligation for short-term employee benefits. Short-term employee benefits are benefits (other than termination benefits) that are expected to be settled wholly before 12 months after the end of the annual reporting period in which the employees render the related service, including wages, salaries, sick leave and annual leave. Short-term employee benefits are measured at the (undiscounted) amounts expected to be paid when the obligation is settled.

Long-term employee provisions

Provision is made for employees' long service leave and annual leave entitlements not expected to be settled wholly within 12 months after the end of the annual reporting period in which the employees render the related service. Long-term employee benefits are measured at the present value of the expected future payments to be made to employees. Expected future payments incorporate anticipated future wage and salary levels, durations of service and employee departures, and are discounted at rates determined by reference to market yields at the end of the reporting period on high quality corporate bonds that have maturity dates that approximate the terms of the obligations. Upon the remeasurement of obligations for other long-term employee benefits, the net change in the obligation is recognised in profit or loss as part of employee provisions expense

The College's obligations for long-term employee benefits are presented as non-current employee provisions in its statement of financial position, except where the College does not have an unconditional right to defer settlement for at least 12 months after the end of the reporting period, in which case the obligations are presented as current employee provisions.

The Royal Australasian College of Medical Administrators

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Notes to the Financial Statements

For the Year Ended 30 June 2023

3 Critical Accounting Estimates and Judgments

The directors make estimates and judgements during the preparation of these financial statements regarding assumptions about current and future events affecting transactions and balances.

These estimates and judgements are based on historical knowledge and the best information currently available at the time of preparing the financial statements, however as additional information is known then the actual results may differ from the estimates.

The significant estimates and judgements made have been described below.

Key estimates - Fair value of financial instruments

The College has certain financial assets and liabilities which are measured at fair value. Where fair value has not able to be determined based on quoted price, a valuation model has been used. The inputs to these models are observable, where possible, however these techniques involve significant estimates and therefore fair value of the instruments could be affected by changes in these assumptions and inputs.

Key estimates - Receivables

The receivables at reporting date have been reviewed to determine whether there is any objective evidence that any of the receivables are impaired. An impairment provision is included for any receivable where the entire balance is not considered collectible. The impairment provision is based on the best information at the reporting date.

Key estimates - Depreciation

The useful lives of property, plant and equipment and intangible assets have been estimated based on Directors' assessment, the nature of the asset and prior history.

Key judgements - Performance obligations under AASB15

To identify a performance obligation under AASB 15, the promise must be sufficiently specific to be able to determine when the obligation is satisfied. Management exercises judgement to determine whether the promise is sufficiently specific by taking into account any conditions specified in the arrangement, explicit or implicit, regarding the promised goods or services. In making this assessment, management includes the nature/ type, cost/ value, quantity and the period of transfer related to the goods or services promised.

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Notes to the Financial Statements

For the Year Ended 30 June 2023

4 Revenue and Other Income

	2023	2022
	\$	\$
Revenue from contracts with customers		
- Membership subscriptions	1,777,086	1,342,885
- Training and advancement fees	3,410,889	3,382,047
- Annual conference	565,693	-
- Other programs income	223,411	64,436
- Advertising and sponsorship	58,942	41,509
- Commonwealth government - Department of Health - STP Project income	4,348,368	4,294,259
	10,384,389	9,125,136
Investment income		
- Interest - investment	55,350	5,567
- Dividend income	67,240	67,911
- Net fair value gain/ (loss) on financial assets through profit or loss (a)	124,807	(282,415)
	247,397	(208,937)
Other Income		
- Miscellaneous income	12,846	20,320
Total Revenue and Income	10,644,632	8,936,519

(a) This balance represents the investment portfolio fair value movement and is not part of the College's normal operations. An unrealised gain has been achieved in the current year due to favourable market conditions.

The Royal Australasian College of Medical Administrators

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Notes to the Financial Statements

For the Year Ended 30 June 2023

5 Results for the year

(a) Expenses

The result for the year includes the following specific expenses:

	2023	2022
	\$	\$
Net loss on disposal of property, plant and equipment	-	10,896
Defined contribution superannuation	341,578	270,205

6 Auditors' Remuneration

Remuneration of the auditor, Saward Dawson:

- Auditing the financial statements	14,500	14,000
- Other services - Preparation of financial statements	1,450	1,400
Total	15,950	15,400

7 Cash and Cash Equivalents

Cash at bank	10,691,831	10,451,142
	10,691,831	10,451,142

8 Trade and Other Receivables

CURRENT

Trade receivables	1,425,653	789,047
Provision for impairment	(96,318)	(57,131)
	1,329,335	731,916
Other debtors	331,633	112,264
	1,660,968	844,180

The College does not have any material credit risk exposure to any single receivable or group of receivables. The main source of credit risk to the College is considered to relate to the class of assets described as "trade and other receivables".

The following table details the College's trade and other receivables exposure to credit risk (prior to collateral and other credit enhancements) with ageing analysis and impairment provided for thereon. Amounts are considered as 'past due' when the debt has not been settled, within the terms and conditions agreed between the College and the customer or counter party to the transaction. Receivables that are past due are assessed for impairment by ascertaining solvency of the debtors and are provided for where there is objective evidence indicating that the debt may not be fully repaid to the College. The carrying value of trade receivables is considered a reasonable approximation of fair value due to the short-term nature of the balances.

The balances of receivables that remain within initial trade terms (as detailed in the table) are considered to be of high credit quality.

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Notes to the Financial Statements

For the Year Ended 30 June 2023

8 Trade and Other Receivables

30 June 2023	< 30 days overdue	< 90 days overdue	> 90 days overdue	Total
Trade and term receivables	468,943	857,021	99,689	1,425,653

30 June 2022	< 30 days overdue	< 90 days overdue	> 90 days overdue	Total
Trade and term receivables	76,062	694,670	18,315	789,047

Movement in provision for doubtful debts is as follows:

	2023	2022
	\$	\$
Balance at beginning of the year	57,131	66,254
Net measurement of loss	39,187	15,952
Amounts written off	-	(25,075)
Balance at end of the year	96,318	57,131

There has been no change in the estimation techniques or significant assumptions made during the current reporting period.

The College writes off a trade receivable when there is information indicating that the debtor is in default and there is no realistic prospect of recovery.

9 Other Financial Assets

Financial assets at fair value through profit or loss

CURRENT

Shares	37,436	39,765
Managed funds	2,727,067	2,168,176
Term Deposits	(a) 2,016,283	2,004,753
	4,780,786	4,212,694

(a) Term deposits

Term deposits are held for term of 12 months and at various interest rates.

The Royal Australasian College of Medical Administrators

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Notes to the Financial Statements

For the Year Ended 30 June 2023

10 Property, plant and equipment

	2023 \$	2022 \$
LAND AND BUILDINGS		
Freehold land		
At cost	460,000	460,000
Total land	460,000	460,000
Buildings		
At cost	1,088,903	1,088,903
Accumulated depreciation	(108,892)	(81,669)
Total buildings	980,011	1,007,234
Total land and buildings	1,440,011	1,467,234
Plant and Equipment		
Office equipment		
At cost	237,631	219,416
Accumulated depreciation	(191,351)	(160,592)
Total office equipment	46,280	58,824
Gowns		
At cost	12,415	12,415
Accumulated depreciation	(8,707)	(7,947)
Total gowns	3,708	4,468
Total property, plant and equipment	1,489,999	1,530,526

The Royal Australasian College of Medical Administrators

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Notes to the Financial Statements

For the Year Ended 30 June 2023

10 Property, plant and equipment

Movements in carrying amounts of property, plant and equipment

Movement in the carrying amounts for each class of property, plant and equipment between the beginning and the end of the current financial year:

	Land \$	Buildings \$	Plant and Equipment \$	Gowns \$	Total \$
Year ended 30 June 2023					
Balance at the beginning of year	460,000	1,007,234	58,824	4,468	1,530,526
Additions	-	-	18,215	-	18,215
Depreciation expense	-	(27,223)	(30,759)	(760)	(58,742)
Balance at the end of the year	460,000	980,011	46,280	3,708	1,489,999
Year ended 30 June 2022					
Balance at the beginning of year	460,000	1,034,457	118,225	5,709	1,618,391
Additions	-	-	2,428	-	2,428
Disposals	-	-	(10,896)	-	(10,896)
Depreciation expense	-	(27,223)	(50,933)	(1,241)	(79,397)
Balance at the end of the year	460,000	1,007,234	58,824	4,468	1,530,526

11 Intangible Assets

	2023 \$	2022 \$
Website and Software		
Cost	252,590	252,590
Accumulated amortisation and impairment	(229,677)	(190,829)
Total Website and Software	22,913	61,761
Total Intangible assets	22,913	61,761

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Notes to the Financial Statements

For the Year Ended 30 June 2023

11 Intangible Assets

Movements in carrying amounts of intangible assets

	Website and Software
	\$
Year ended 30 June 2023	
Balance at the beginning of the year	61,761
Amortisation	(38,848)
Closing value at the end of the year	22,913
Year ended 30 June 2022	
Balance at the beginning of the year	164,876
Amortisation	(103,115)
Closing value at the end of the year	61,761

12 Trade and Other Payables

	2023	2022
	\$	\$
CURRENT		
Trade payables	370,079	225,575
GST payable	112,607	85,203
Accrued expenses	160,067	175,093
Other payables	151,035	95,343
Total trade and other payables	793,788	581,214

Trade and other payables are unsecured, non-interest bearing and are normally settled within 30 days. The carrying value of trade and other payables is considered a reasonable approximation of fair value due to the short-term nature of the balances.

The Royal Australasian College of Medical Administrators

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Notes to the Financial Statements

For the Year Ended 30 June 2023

13 Employee Benefits

	2023	2022
	\$	\$
CURRENT		
Annual leave	246,825	163,406
Long service leave	34,779	10,309
	281,604	173,715
NON-CURRENT		
Long service leave	71,322	66,908
	71,322	66,908

Employee provisions represent amounts accrued for annual leave and long service leave.

The current portion for this provision includes the total amount accrued for annual leave entitlements and the amounts accrued for long service leave entitlements that have vested due to employees having completed the required period of service.

Based on past experience, the College does not expect the full amount of annual leave or long service leave balances classified as current liabilities to be settled within the next 12 months. However, these amounts must be classified as current liabilities since the College does not have an unconditional right to defer the settlement of these amounts in the event employees wish to use their leave entitlement.

The non-current portion for this provision includes amounts accrued for long service leave entitlements that have not yet vested in relation to those employees who have not yet completed the required period of service.

14 Other Financial Liabilities

CURRENT		
Unearned Subscription Income	1,924,117	1,699,326
Unearned Workshop Income	1,793,731	1,222,191
Unearned STP grant income	5,653,826	5,197,382
Unearned Fees	723,651	638,682
	10,095,325	8,757,581

The Royal Australasian College of Medical Administrators

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Notes to the Financial Statements
For the Year Ended 30 June 2023

15 Financial Risk Management

The College's financial instruments consist mainly of deposits with banks, local money market instruments, short-term and long-term investments and accounts receivable and payables.

The totals for each category of financial instruments, measured in accordance with AASB 9: Financial Instruments as detailed in the accounting policies to these financial statements, are as follows:

	2023	2022
	\$	\$
Financial assets		
Cash at bank	10,691,831	10,451,142
Trade and other receivables	1,660,968	844,180
Other financial assets	4,780,786	4,212,694
Total financial assets	17,133,585	15,508,016
Financial liabilities		
Trade and other payables	793,788	581,214
Total financial liabilities	793,788	581,214

Objectives, policies and processes

The Board of Directors have overall responsibility for the establishment of the College's financial risk management framework. This includes the development of policies covering specific areas such as foreign exchange risk, interest rate risk, liquidity risk, credit risk and price risk.

Risk management policies and systems are reviewed regularly to reflect changes in market conditions and the College's activities.

The day-to-day risk management is carried out by the College's Finance and Audit Committee under policies and objectives which have been approved by the Board of Directors. The Chief Executive Officer has been delegated the authority for designing and implementing processes which follow the objectives and policies. This includes monitoring the levels of exposure to interest rate and foreign exchange rate risk and assessment of market forecasts for interest rate and foreign exchange movements.

The Board of Directors receives monthly reports which provide details of the effectiveness of the processes and policies in place.

Mitigation strategies for specific risks faced are described below:

Liquidity risk

Liquidity risk arises from the College's management of working capital and the finance charges and principal repayments on its debt instruments. It is the risk that the College will encounter difficulty in meeting its financial obligations as they fall due. The College manages this risk by monitoring forecast cash flows.

The Royal Australasian College of Medical Administrators

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Notes to the Financial Statements
For the Year Ended 30 June 2023

15 Financial Risk Management

Liquidity risk

At the reporting date, these reports indicate that the College expected to have sufficient liquid resources to meet its obligations under all reasonably expected circumstances.

Credit risk

Exposure to credit risk relating to financial assets arises from the potential non-performance by counterparties of contract obligations that could lead to a financial loss to the College.

Credit risk is further mitigated as a significant amount of revenue is received from Government grants in accordance with funding agreements which ensure regular funding for the period of the grant.

The maximum exposure to credit risk by class of recognised financial assets at the end of the reporting period is equivalent to the carrying amount and classification of those financial assets (net of any provisions) as presented in the statement of financial position.

Accounts receivable and other debtors that are neither past due nor impaired are considered to be of high credit quality. Aggregates of such amounts are detailed in Note 8.

The College has no significant concentrations of credit risk exposure to any single counterparty or entity of counterparties.

Market risk

Foreign Currency Risk

The College is not exposed to any significant foreign currency risk.

Price Risk

The College is not exposed to any significant price risk.

Interest Risk

Exposure to interest rate risk arises on financial assets and financial liabilities recognised at the end of the reporting period whereby a future change in interest rates will affect future cash flows or fair value of fixed rate financial instruments.

The financial instruments that expose the College to interest rate risk are limited to listed are limited to listed shares, fixed interest securities, and cash on hand.

The College also manages interest rate risk by ensuring that, whenever possible, payables are paid within any pre-agreed credit terms.

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Notes to the Financial Statements

For the Year Ended 30 June 2023

16 Cash Flow Information

	2023	2022
	\$	\$
(Deficit) for the year	(116,427)	(84,502)
Cash flows attributable to investing activities		
- Dividends received	(67,240)	(67,911)
Non-cash flows in deficit:		
- amortisation of intangible assets	38,848	103,115
- depreciation of non-current assets	58,742	79,397
- provision for doubtful debts	39,187	(9,123)
- fair value movements on investments	(124,807)	282,415
Changes in assets and liabilities:		
- (increase)/decrease in trade and other receivables	(855,975)	(99,090)
- increase/(decrease) in trade and other payables	212,574	270,280
- increase/(decrease) in employee benefits	112,303	(56,683)
- increase/(decrease) in trade and other payables & other liabilities	1,337,744	811,056
Cash flows from operations	<u>634,949</u>	<u>1,228,954</u>

17 Reserves

State Funds		
NSW State funds	88,029	89,594
Queensland State funds	45,873	45,232
Victoria State funds	63,908	67,452
Western Australia State funds	21,208	21,017
Northern Territory State funds	1,009	1,009
New Zealand State funds	24,046	24,470
South Australia State funds	3,044	3,213
	<u>247,117</u>	<u>251,987</u>

The State Funds reserves are the residual balances of funds held to be used for the purposes of the respective states.

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Notes to the Financial Statements

For the Year Ended 30 June 2023

18 Key Management Personnel Remuneration

The totals of remuneration paid to the key management personnel of The Royal Australasian College of Medical Administrators during the year are as follows:

	2023	2022
	\$	\$
Short-term employee benefits	737,438	656,364
Long-term benefits	25,115	11,028
Total	<u>762,553</u>	<u>667,392</u>

Transactions between related parties are on normal commercial terms and conditions no more favourable than those available to other persons unless otherwise stated.

19 Contingencies

In the opinion of the Directors, the College did not have any contingencies at 30 June 2023 (30 June 2022: None).

20 Related Parties

The College's main related parties are as follows:

Key management personnel - refer to Note 18.

Other related parties include close family members of key management personnel and entities that are controlled or significantly influenced by those key management personnel or their close family members.

Transactions with related parties

Directors pay membership fees and conference fees in accordance with the normal terms and conditions for membership fees and conference fees.

Directors are reimbursed for reasonable travel costs incurred in attending board meetings.

The following other transactions occurred with related parties:

	2023	2022
	\$	\$
Expenditure to director/director related entities		
A/Prof Alan Sanford (Vice President) for Leadership for Clinicians Presentations	9,500	20,818
Dr Melissa Naidoo (Director) for Leadership for Clinicians Presentations	-	22,000
Dr Iwona Stolarek (Director) for Leadership for Clinicians Presentations	-	1,500
Dr Debbie Holdsworth for Leadership for Clinicians Presentations	4,500	-

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Notes to the Financial Statements For the Year Ended 30 June 2023

21 Events Occurring After the Reporting Date

No matters or circumstances have arisen since the end of the financial year which significantly affected or could significantly affect the operations of the College, the results of those operations or the state of affairs of the College in future financial years.

22 Members' Guarantee

The College is incorporated under the Corporations Act 2001 and is an entity limited by guarantee. If the College is wound up, the constitution states that each member is required to contribute a maximum of \$20 each towards meeting any outstandings and obligations of the entity.

23 Statutory Information

The registered office and principal place of business of the College is:

The Royal Australasian College of Medical Administrators
Suite 1
20 Cato Street
Hawthorn East Vic 3123

The Royal Australasian College of Medical Administrators

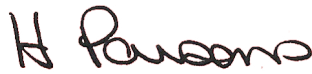
ABN: 39 004 688 215

Directors' Declaration

In accordance with a resolution of the Directors of The Royal Australasian College of Medical Administrators, the directors of the College declare that, in the directors' opinion:

- the financial statements and notes for the year ended 30 June 2023 satisfy the requirements of the *Australian Charities and Not-for-profits Commission Act 2012* and:
 - comply with Accounting Standard applicable to the College; and
 - give a true and fair view of the financial position and performance of the College as at 30 June 2023 and of its performance at the year ended on that date.
- there are reasonable grounds to believe that the College will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with subs 60.15(2) of the Australian Charities and Not-for-profits Commission Regulation 2022.

Director 
Dr Helen Parsons CSC

Director 
Prof Erwin Loh

Dated: 18 September 2023



The Royal Australasian College of Medical Administrators

ABN: 39 004 688 215

Auditor's Independence Declaration to the Directors of The Royal Australasian College of Medical Administrators

In accordance with Subdivision 60-C of the *Australian Charities and Not-for-profits Commission Act 2012*, I am pleased to provide the following declaration of independence to the directors of The Royal Australasian College of Medical Administrators. As the audit partner for the audit of the financial report of The Royal Australasian College of Medical Administrators for the year ended 30 June 2023, I declare that, to the best of my knowledge and belief, there have been no contraventions of:

- (i) the auditor independence requirements of the *Australian Charities and Not-for-profits Commission Act 2012* in relation to the audit; and
- (ii) any applicable code of professional conduct in relation to the audit.


Saward Dawson


Matthew Crouch

Partner

Dated: 18 September 2023

Blackburn VIC



The Royal Australasian College of Medical Administrators

Independent Audit Report to the members of The Royal Australasian College of Medical Administrators

ABN: 39 004 688 215

Report on the Audit of the Financial Report

Opinion

We have audited the financial report of The Royal Australasian College of Medical Administrators (the College), which comprises the statement of financial position as at 30 June 2023, the statement of profit or loss and other comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the directors' declaration.

In our opinion, the accompanying financial report of the College is in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012*, including:

- (i) giving a true and fair view of the College's financial position as at 30 June 2023 and of its financial performance for the year ended; and
- (ii) complying with Australian Accounting Standards and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2022*.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the College in accordance with the auditor independence requirements of the *ACNC Act 2012* and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants (including Independence Standards)* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Directors for the Financial Report

The directors of the College are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards and the *ACNC Act 2012* and for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible for assessing the College's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the College or to cease operations, or have no realistic alternative but to do so.



The Royal Australasian College of Medical Administrators

Independent Audit Report to the members of The Royal Australasian College of Medical Administrators

ABN: 39 004 688 215

Auditor's Responsibilities for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial report.

As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the College's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the College.
- Conclude on the appropriateness of the College's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the College's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the College to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.



The Royal Australasian College of Medical Administrators

Independent Audit Report to the members of The Royal Australasian College of Medical Administrators

ABN: 39 004 688 215

We communicate with those charged with governance regarding, among other matter, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Saward Dawson

Matthew Crouch

Partner

Dated: 18 September 2023

Blackburn VIC



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