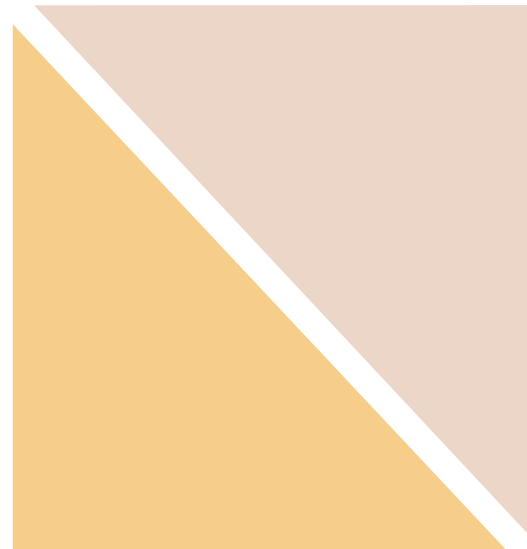
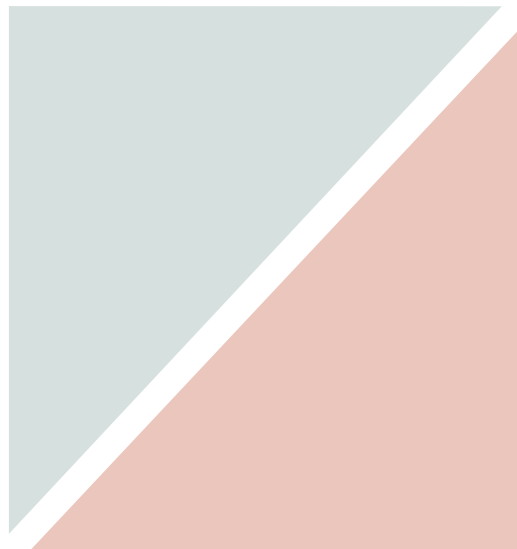
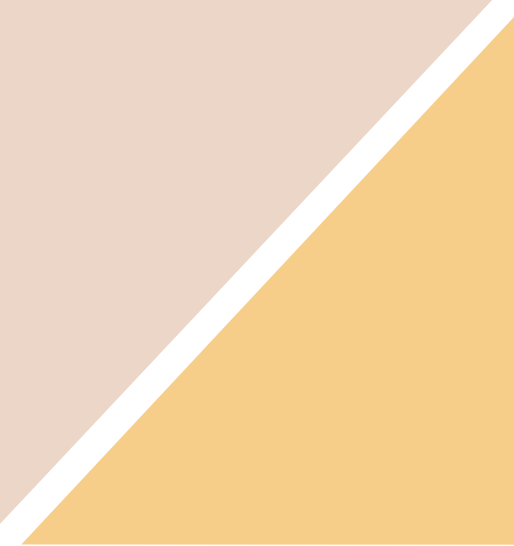


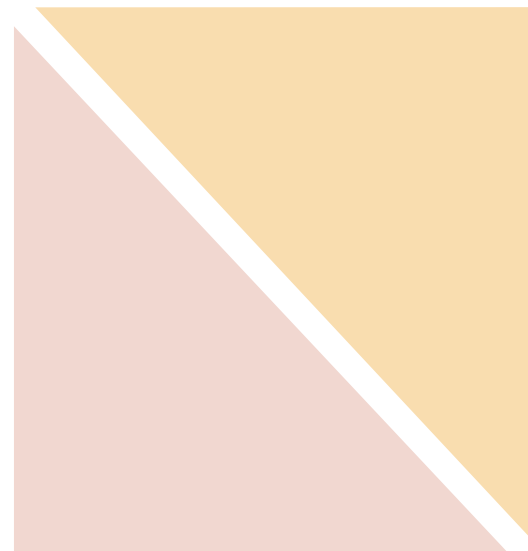
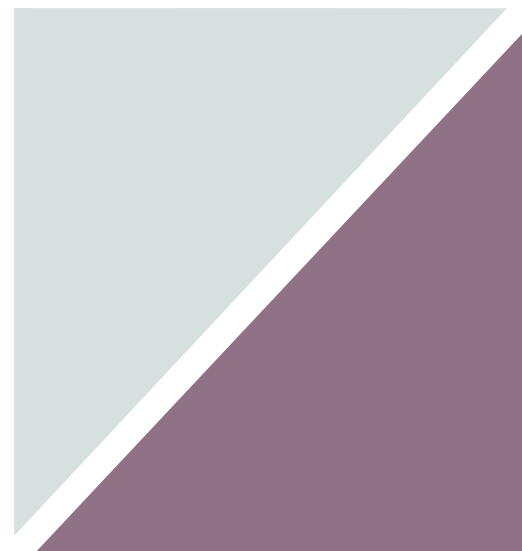


ANZCA
Annual
Report
2018





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President's message

The start of ANZCA's 2018-2022 Strategic Plan coincides with my first year as college president and I am pleased to report that one of our key achievements for 2018 has been the ongoing work to develop a perioperative medicine qualification.

With college oversight this is being developed in close collaboration with the Perioperative Special Interest Group, the societies and other specialist groups. The ANZCA Perioperative Medicine Steering Committee will develop and implement an effective integrated perioperative care model with education offerings for Australia and New Zealand.

This is an exciting project for the specialty as anaesthetists not only have a leading role to play in perioperative medicine but also in rural, remote and regional areas. ANZCA continues to work with partner rural generalist organisations on the development of the curriculum for the Diploma of Rural Generalist Anaesthesia.

We have been quick to respond to the findings of the 2017 Fellowship Survey and work is progressing on upgrading Networks, enhancing college communication around continuing professional development activities for private practitioners, improving social media training opportunities for fellows and doctors' health and wellbeing, and improving our communications to fellows about the college's activities relating to advocacy for the profession.

Our advocacy takes many forms but it is our relationships and conversations with governments that can make a difference. Our work with Australian federal and state governments and the New Zealand government is ongoing and we have had a number of successes. This includes the campaign to have codeine products moved from schedule three to schedule four. The Faculty of Pain Medicine (FPM) and ANZCA took a lead role in this campaign. FPM was very active in seeking and supporting the regulation of codeine and jointly with the college, we drove the development of a statement on slow-release opioids, especially in the management of acute pain. FPM also made its Choosing Wisely recommendations on chronic pain, neuropathic pain and low back pain.

Safe delivery of sedation by healthcare providers is a priority being led by the college. A roundtable was held in Australia in February 2018 with clinicians from specialist medical, nursing and dental practice contributing to identify common ground and common issues and concerns. Another is planned for New Zealand in 2019. This will hopefully lead to a consistent overarching position on practice and training being developed.

Our collaborations and partnerships were enhanced by the signing of a memorandum of understanding (MOU) with the Tri-Nations Alliance and our fellow members The Royal College of Physicians and Surgeons of Canada, The Royal Australasian College of Physicians, The Royal Australasian College of Surgeons and The Royal Australian and New Zealand College of Psychiatrists. The MOU will provide guidance on matters of global collaboration and participation on matters of postgraduate medical education and lifelong learning.

The development of key college strategies in Indigenous health and overseas aid in 2018 will further drive ANZCA's leadership in the specialty. Our new Indigenous Health Strategy was developed after extensive and considered consultation and provides a framework on which we can continue to address the significant health inequity experienced by Indigenous Australians and Māori in New Zealand. This important initiative aims to increase the number of FPM and ANZCA fellows with an Indigenous background as part of a diverse workforce.

The college's new international strategy has been developed to help understand the various activities in which ANZCA engages and to assist with a direction for future relationships and activities. It will also provide a framework to assess activities under consideration and will focus on current and future work in the areas of advocacy, education and training, and research and training.

In line with this strategy, the Overseas Aid Committee developed a five-year 2018-2022 strategic plan to support Australia's and New Zealand's nearest neighbours in the western Pacific Rim. The committee intends to continue to support education, equipment (particularly the Lifebox initiative), and Essential Pain Management with ongoing evaluation of these activities. Our colleagues in Papua New Guinea remain markedly under-resourced, small in number and incredibly committed.

We continue to go from strength to strength in the field of anaesthesia and pain medicine research. Record research grants of \$A1.74 million dollars were awarded through the ANZCA Research Foundation for projects commencing or continuing in 2019 highlighting ANZCA as a key supporter of investigator-led research into anaesthesia, perioperative medicine and pain medicine. The committee awarded funding to 32 lead investigators, including the Lennard Travers Professorship, 10 new project grants, 15 continuing grants, the simulation and education grant, three novice investigator grants and a scholarship stipend. ANZCA fellows were also successful in securing nearly \$A8 million in National Health and Medical Research Council grants.

The anaesthesia workforce is being addressed with the ongoing review of how Specialist Training Program funding will be allocated for 2019, and how rural training and collaboration can be enhanced with University Rural Training Hubs. The Diploma of Rural Generalist Anaesthesia working group is also continuing curriculum development.

A decision has been made to delay the "anaesthesia vs anaesthesiology" plebiscite. Feedback to date indicated that although there is some interest in a change in name, the fellowship is concerned about the cost of implementing such a change and the value it represents. The plebiscite will be delayed to give members more time to consider and discuss the issues.

National Anaesthesia Day was held in Australia and New Zealand on October 16. The event continues to attract significant, and growing, publicity for our profession, with strong engagement by our fellows with both the media and the general public. We had a record 89 champions and, for the first time, 10 private anaesthesia practices in Australia participated.

The Doctors' Health and Wellbeing Strategy and framework were presented to the Professional Affairs Executive Committee and ANZCA Council for ratification and are now under pilot for 12 months.

We represented the voice of fellows and trainees across Australia and New Zealand in 43 submissions to external regulatory, government, medical and health agencies and met with health ministers in Australia and New Zealand.

Our media profile was enhanced through the distribution of 36 media releases across a variety of topics and issues and we reached millions of readers across print, broadcast and digital platforms.

On a final note on behalf of the ANZCA community, I would like to acknowledge the heroic effort of South Australian fellow Dr Richard Harris, who, with his diving mate Dr Craig Challen, helped to rescue 12 soccer players and their coach from a flooded Thai cave in June 2018. As a fitting tribute to their role in the rescue which captured worldwide attention Dr Harris and Dr Challen were named joint recipients of the 2019 Australian of the Year award.

Dr Rodney Mitchell
ANZCA President



CEO's report

The beginning of 2018 marked the start of an exciting period for the college as we embarked on the first year of our new five-year ANZCA and FPM strategic plans.

The college has much to celebrate including the launch of the improved training portfolio system (TPS). The feedback from trainees and supervisors as they track their progress through the online program upgrade has been overwhelmingly positive. I am pleased to report that the new look TPS was launched on time and on budget in November following extensive consultation of trainees and trainee supervisors. ANZCA launched its new three-year Specialist Training Program plan with the Safety and Advocacy unit initiating the contracting process for 30 STP sites. The Safety and Advocacy unit started work with the Education unit to implement 12 new regional STP posts.

We continued to develop extensive online support resources including the Perioperative Anaphylaxis Response eLearning Course for ANZCA CPD resources. The project, which was launched via Networks in September has been embraced by college fellows, trainees and specialist international medical graduates (SIMGs). A new webpage for the ANZCA Educators Program and a calendar of events webpage were also launched. The workplace-based assessment (WBA) project was revised with planning to appoint 29 WBA leads across Australia and New Zealand early in 2019.

ANZCA's bullying, discrimination and sexual harassment resources continue to be developed and promoted through the ANZCA E-Newsletter and the ANZCA website. The Gender Equity Working Group finalised a formal position statement and now has its own webpage which includes imagery and graphs to highlight the gender distribution in the college, for example, the percentage of male versus female heads of departments, trainees, researchers and fellows.

We continued to collaborate with a range of stakeholders on several areas of mutual interest. Under a share agreement, the Royal Australasian College of Surgeons (RACS) has given ANZCA access to their e-learning resource Operating with Respect as part of an ongoing commitment to promoting appropriate behaviours in medical practice and training. The resources are published on Networks.

The 2018 ANZCA annual scientific meeting (ASM) in Sydney was a great success with nearly 2500 delegates. The meeting was co-located with RACS and featured several combined sessions with surgeons. ANZCA submitted comprehensive reports to the Australian Medical Council and the Medical Council of New Zealand detailing our education, training, accreditation, CPD and SIMG pathways to demonstrate our compliance with the standards required of an accredited specialist medical college.

Our media profile continued to grow with ANZCA and FPM fellows' research and expertise highly sought after in Australia and New Zealand. Our digital audiences are also expanding through social media engagement on Twitter, Facebook and YouTube. Our first patient information video "What is anaesthesia?" attracted widespread interest and was viewed more than 8000 times and received 2200 reactions, comments and shares. The animation was launched to coincide with National Anaesthesia Day and is a fresh attempt to represent the specialty to the community.

The policy and communications teams were merged into a new unit, Safety and Advocacy, to better position ANZCA and FPM as key stakeholders and the leading voice in Australia and New Zealand on anaesthesia and pain medicine issues. Strategic meetings were organised between federal and state health ministers and health officials in Australia and New Zealand and ANZCA and FPM. ANZCA also successfully trialled a new method of external engagement to position itself as the leading authority in safe sedation practices by hosting two healthcare

industry roundtables in Australia and New Zealand. The result will be an ANZCA publication in early 2019 of competencies for the provision of safe sedation.

We managed a successful series of special interest group meetings and other continuing medical education events in the Australian regions and New Zealand. We signed a new memorandum of agreement between ANZCA, the Australian Society of Anaesthetists (ASA) and New Zealand Society of Anaesthetists for the Australian and New Zealand Tripartite Anaesthetic Data Committee (ANZTADC) to provide clarity on the management of the webAIRS project and commenced a review of the project, which has been operating for 10 years.

Our international links are expanding following the signing of several memoranda of understanding (MOU) and agreements including an MOU with ANZCA's co-partners in the Tri-Nations Alliance in Halifax, Canada in October and an MOU with the European Society of Anaesthesiology and the ASA to foster ongoing international collaboration across education, safety and quality and clinical trial research. ANZCA also signed an agreement to become a committed partner of the global Patient Safety Movement Foundation and as part of its MOU with the Chinese Society of Anesthesiology, ANZCA was represented at the 15th Asian Australasian Congress of Anaesthesiologists in Beijing in October, the largest ever gathering of anaesthetists.

Closer to home, the ANZCA Library launched the ANZCA Institutional Research Repository (AIRR) which identifies, captures, stores and facilitates the retrieval of the research and publication output of ANZCA and the wider college community. The in-house expertise of librarian-facilitated literature research ensures that research on a wide range of topics and policy areas are based on current and best evidence.

Maintaining the cyber safety of the college's information across key business and IT assets is an ongoing priority for the college and our fellows, trainees, SIMGs and staff. Having engaged external consultants to review our IT security we started implementing upgraded security measures in 2018.

To coincide with International Women's Day on March 8 the Geoffrey Kaye Museum of Anaesthetic History launched "The Rare Privilege of Medicine: Women Anaesthetists in Australia and New Zealand" as an online and on site exhibition. We were thrilled that New Zealand Prime Minister Jacinda Ardern congratulated the college and the museum on the new exhibition via a video message that received nearly 10,000 views on social media platforms. The 2018 Joan Sheales Staff Education Award was awarded to Hannah Sinclair, Membership Manager for the Fellowship Affairs unit, to assist her in developing her professional capacity.

The inaugural \$A5000 Anaesthesia and Pain Medicine History and Heritage Grant was launched by the college as an initiative to support the research and interpretation of the history of anaesthesia and pain medicine. Queensland fellow Dr Michael Toon will use the grant for an oral history project on the history of obstetric anaesthesia.

The ANZCA Member Advantage benefits program for college fellows, trainees, SIMGs and staff was launched in July with the primary purpose of providing purchasing benefits for members and research funding. Nearly 3000 members have already signed up and we are encouraged that benefits are expected to flow to members as well as the ANZCA Research Foundation in 2019.

It was a big year and I would like to acknowledge the considerable effort of ANZCA's staff, and the tireless efforts of the many fellows and trainees working for the college. I would also like to thank ANZCA President Dr Rod Mitchell, Immediate Past President Professor David A Scott and the ANZCA Council for their leadership and support.

We look forward to consolidating our 2018 achievements and successes as we move to the next phase of the ANZCA Strategic Plan 2018-2022.

John Ilott
ANZCA Chief Executive Officer

Awards, prizes and honours

ANZCA and FPM awards in 2018

Robert Orton Medal

ANZCA's most prestigious award is made at the discretion of the ANZCA Council, the sole criterion being distinguished service to anaesthesia.

Associate Professor Richard George Walsh

Gilbert Brown Prize

Awarded to the fellow judged to make the best contribution to the free research paper session named the Gilbert Brown Prize session at each annual scientific meeting.

Dr Rani Chahal

Trainee Academic Prize

Awarded to the trainee, provisional fellow or fellow within one year of receiving the diploma of fellowship, who is judged to make the best contribution at the Trainee Academic Prize session held as part of the annual scientific meeting.

Dr Rebekah Potter, Dr Nathalie Gomes

FPM Dean's Prize

Awarded for original work in the field of pain, presented in the FPM Dean's Prize/Free Paper session at the annual scientific meeting, and judged to be a significant contribution to pain medicine and/or pain research.

Dr Luke Arthur

FPM Best Free Paper Award

Awarded for original work judged to be the best contribution to the FPM Dean's Prize/Free Paper session at the annual scientific meeting.

Dr Daniel Chiang

Dr Ray Hader Award for Pastoral Care

Awarded to an ANZCA fellow or trainee who is recognised to have made a significant contribution to the welfare of one or more ANZCA trainees in the area of pastoral care.

Dr Jo Sinclair

Steuart Henderson Award

Awarded to a fellow who has demonstrated excellence and provided outstanding contribution, scholarship, and mentorship to medical education in the field of anaesthesia and/or pain medicine.

Professor Jennifer Mary Weller

Renton Prize

The Renton Prize is awarded to the candidate obtaining the highest marks in the primary examination for fellowship of ANZCA.

Brian Nee Hou Chee, Grace Hollands

Cecil Gray Prize

The Cecil Gray Prize is awarded to the candidate obtaining the highest marks in the final examination for fellowship of ANZCA.

Alice Hazel Gynther, John Newland

Australia Day honours

Dr Colin Ross Chilvers, Clinical Associate Professor Marcus Welby Skinner and Associate Professor Peter Laurence McNicol, were made members (AM) in the general division of the Order of Australia.

Queen's Birthday Honours

Dr David Charles Pescod was made an officer (AO) in the general division of the Order of Australia.

Dr David Russell Hillman, Associate Professor Geoffrey David Champion, Dr Michael Gerrard Cooper, and Associate Professor Charles Roger Goucke were made members (AM) in the general division of the Order of Australia.

Dr Mary Felicity Sutherland and Dr Stephen Bryce Kinnear were awarded medals (OAM) in the general division of the Order of Australia.

Distribution of workforce (ANZCA and FPM)

The geographical distribution of active ANZCA and FPM fellows at December 31, 2018:

	ANZCA	FPM
Australia	4781	333
New Zealand	741	35
Hong Kong	216	15
Singapore	87	9
Malaysia	40	1
Other	150	23

There were 309 new ANZCA fellows and 30 new FPM fellows admitted in 2018.

Training figures

A total of 211 ANZCA and 18 FPM new fellows were presented with fellowship at the 2018 College Ceremony at the ANZCA ASM held in Sydney in May. ANZCA admitted a total of 309 new anaesthesia fellows in 2018.

In the first sitting of the final exam, 163 candidates were successful. In the second sitting, 101 candidates were successful.

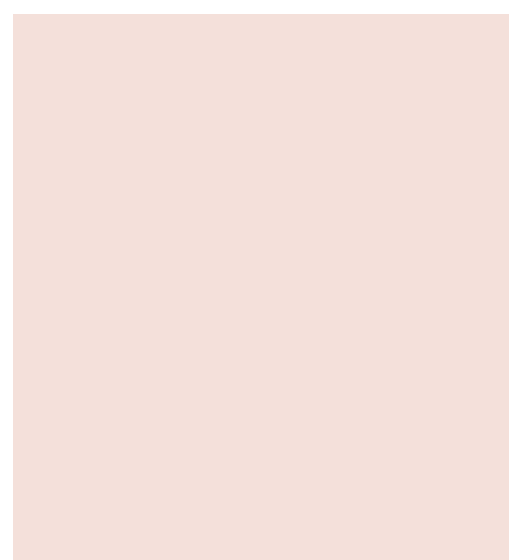
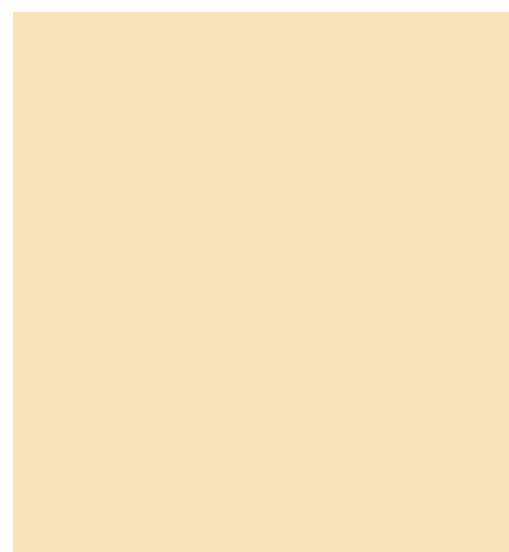
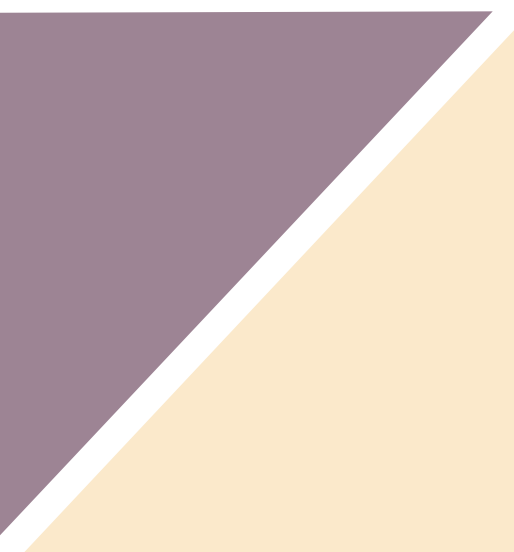
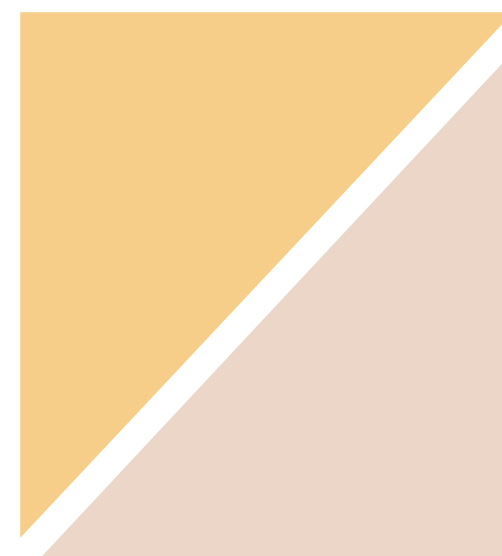
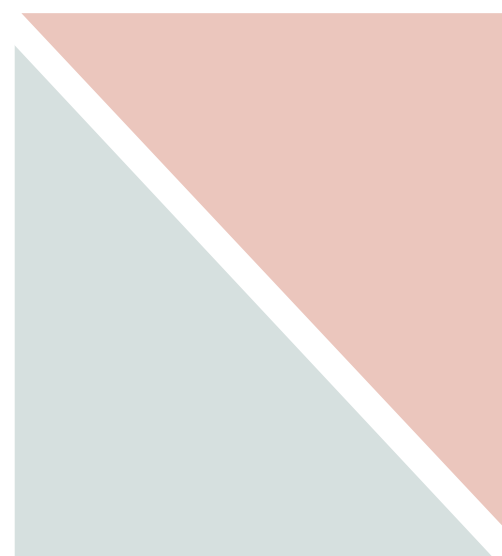
In the first sitting of the primary exam, 94 candidates were successful. In the second sitting, 153 candidates were successful.

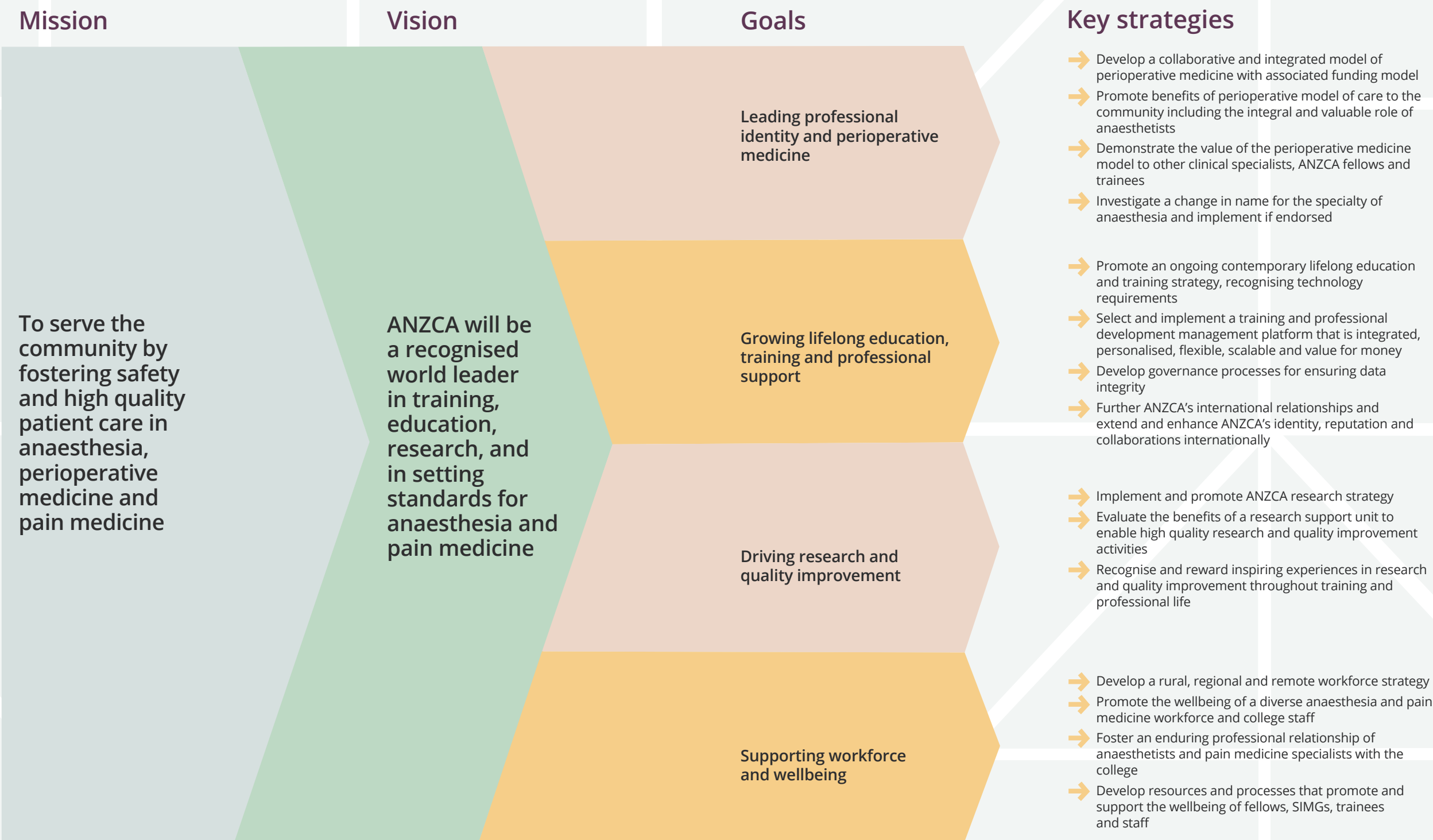
Assessment of 39 new specialist international medical graduate (SIMG) applications in Australia and nine in New Zealand were undertaken. There were four new area of need applications, and 61 SIMGs have gained fellowship.

ANZCA Council



From left: Dr Chris Cokis, Dr Sean McManus, Dr Christine Vien (New Fellow Councillor), Dr Michael Jones, Dr Rowan Thomas, Dr Genevieve Goulding, Professor David A Scott (ANZCA Immediate Past President), Dr Meredith Craigie (FPM Dean), Dr Rod Mitchell (ANZCA President), Dr Richard Waldron, Dr Vanessa Beavis (ANZCA Vice-President), Dr Patrick Farrell, Dr Simon Jenkins, Dr Nigel Robertson, Mr John Illott (ANZCA CEO).





For the full version of the ANZCA Strategic Plan 2018-2022 visit www.anzca.edu.au/documents/anzca-strategic-plan-2018-2022.pdf

GOAL 1: LEADING PROFESSIONAL IDENTITY AND PERIOPERATIVE MEDICINE

ANZCA will LEAD the promotion of the professional identity of anaesthesia and pain medicine specialties and the development of an effective, integrated and collaborative perioperative care model.



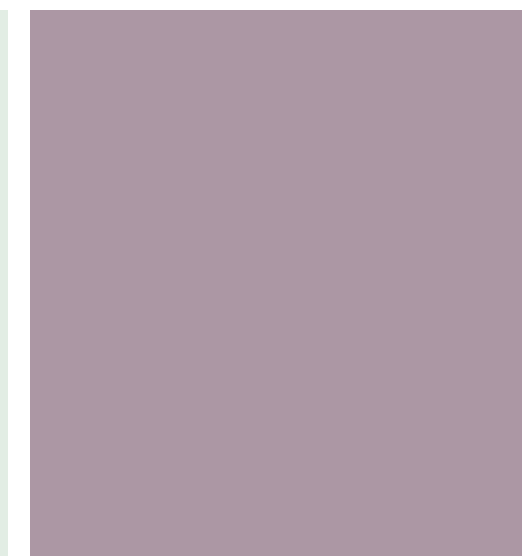
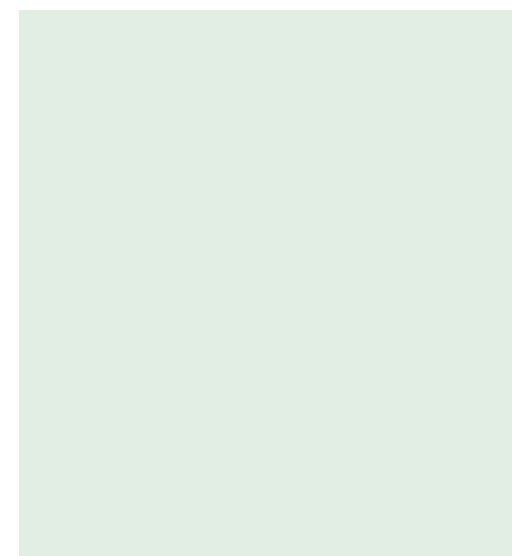
Perioperative medicine

- The college surveyed ANZCA and FPM fellows, trainees and specialist international medical graduates on their engagement with perioperative medicine.
- A literature review and evidence summary on coordinated perioperative medicine care models was completed.
- Perioperative Medicine Steering Committee chaired by ANZCA Vice-President Dr Vanessa Beavis established with multi-specialty representation.
- Terms of reference established for a Perioperative Care Working Group to define the scope of perioperative medicine.
- Terms of reference established for a Perioperative Medicine Education Group to define opportunities for educational products and services.



Professional identity

- Further consultation on a proposed plebiscite on the anaesthesiology versus anaesthesia name change and associated project cost.
- "Anaesthesiology versus anaesthesia" a feature of the ANZCA ASM with a lively debate and social media interaction.



GOAL 2: GROWING LIFELONG EDUCATION, TRAINING AND PROFESSIONAL SUPPORT

ANZCA will GROW education, training and professional support for fellows, SIMGs and trainees by investment in resources and technology and key collaborations.

Lifelong education and training

- The training portfolio system (TPS) was upgraded after consultation with fellows and trainees resulting in improved access, use and function.
- Workplace-based assessment (WBA) forms and processes enhanced benefiting both fellows and trainees. Appointment of local WBA Leads (fellows) with plans confirmed for roll out of local workshops by new WBA Leads from April 2019.
- Anaesthesia training program curriculums, handbooks and regulations have been simplified and improved using a “plain English” approach.
- The Australian Medical Council (AMC) and Medical Council of New Zealand (MCNZ) rigorously evaluated ANZCA and FPM’s education, training, accreditation, continuing professional development (CPD) and SIMG pathways, based on ANZCA’s comprehensive report for extension of accreditation 2018. This has resulted in a four-year extension of our accreditation from the start of 2019.
- Support was provided for the many convenors and presenters for continuing medical education course activities, examiners for written and clinical examinations, supervisor of training meetings, education officer meetings, heads of hospital department meetings, in house and offsite viva workshops and feedback interviews.
- In Australia, ANZCA provided support for 37 regional committee meetings, 37 continuing medical education (CME) committee meetings, 29 trainee committee meetings and 16 FPM committee meetings.
- ANZCA’s regional Australian offices ran 20 ANZCA CME events in 2018 with 1681 registrations and 57 regional training courses with 1862 registrations.
- In New Zealand, ANZCA provided support for 11 national committee meetings, three CME committee meetings, four trainee committee meetings and three FPM NZNC meetings.
- ANZCA’s New Zealand office ran five CME events in 2018 with more than 600 registrations and four national training courses with 42 registrations.

Lifelong education and training (continued)

- Full comprehensive and rigorous review of CPD emergency response standards completed.
- The AMC National Test Centre was used for the first time for the primary exam and has the potential to be used for examiner training.
- Development of an SIMG roadmap to identify and prioritise improvement over the next five years.
- Record response to the annual ANZCA Trainee Survey with 49 per cent of all anaesthesia trainees participating.
- Launch of the first online CPD eLearning anaphylaxis emergency response course for CPD participants and trainees.
- The ANZCA ASM “Reflecting on what really matters” was held in Sydney and was also a collaborative meeting with the Royal Australasian College of Surgeons. More than 5000 delegates attended the combined sessions and more than 2400 attended the ANZCA ASM. There were 500 speakers including facilitators, six plenary sessions, 42 concurrent sessions, 150 workshops and small group discussions, and 170 e-posters. The meeting was supported by 70 sponsors.
- FPM’s refresher course day held the day before the ASM was once again very successful with a record 230 delegates attending.
- The Obstetric Special Interest Group (SIG) conference ran as a satellite meeting to the 2018 ASM and attracted a record 400 delegates. It included the awarding of the inaugural Michael Paech Prize for Research in Obstetric Anaesthesia.
- ANZCA provided administration and committee support to 14 of the 17 Anaesthesia Continuing Education (ACE) SIGs, ran seven SIG events and the annual meetings of the Clinical Trials Network and the Australian and the New Zealand Anaesthetic Allergy Group (ANZAAG). The Rural SIG held its tenth meeting and the Perioperative SIG conference held in Melbourne attracted a record 500 delegates. The New Zealand ASM was also a record-breaker with more than 450 delegates.
- The ANZCA Educators Program attracted 313 fellows and trainees at 26 courses, equipping clinicians with the skills and knowledge to teach. Six new facilitators were appointed.
- 264 ANZCA trainees successfully passed the fellowship examination. Of these 223 were from Australia, 38 from New Zealand and three from South East Asia.

Professional support

- Networks scholar role support resources have been enhanced with audits to guide trainees and departmental scholar role tutors.
- Networks learning management system strengthened to improve use and access of learning resources for trainees, fellows and SIMGs.
- New mentoring program learning resources developed with the ANZCA Trainee Committee.
- ANZCA hosted safe sedation workshops in Australia and New Zealand to discuss safe sedation practices and identify common principles and training standards across professional groups.
- Improved ANZCA Library resources including the introduction of the ANZCA Institutional Research Repository and additional resources such as Auto Digest and new LibGuides to support research and literature searches.
- ANZCA Library liaison roles expanded to other ANZCA committees, including the CPD Committee, to provide a direct advisory link and ensure the library supports the needs and objectives of key committees.
- The ANZCA Library introduced a new discovery service enabling fellows and trainees to access the collection, including thousands of previously uncatalogued e-books, through a single-search portal for the first time. It has extensively redeveloped its existing web pages and integrated a new search widget for improved access.
- In May, ANZCA joined the Patient Safety Movement Foundation as a committed partner. One of the foundation goals is to reduce avoidable patient hospital deaths by 2020.

Professional support (continued)

- Choosing Wisely recommendations for eliminating the use of unnecessary and sometimes harmful tests, treatments, and procedures were developed and promoted for pain medicine and anaesthesia.
- ANZCA released the *Statement on the use of slow-release opioid preparations in the treatment of acute pain* and the *Statement on principles for identifying and preventing opioid-induced ventilatory impairment (OIVI) in the acute pain setting* reflecting an evaluation of best available evidence and expert advice in response to significant adverse events.
- ANZCA NZNC is working with Medsafe, the Health Quality and Safety Commission and the Ministry of Health to prepare a statement on the safe storage of propofol in clinical settings.
- ANZCA and the Australian Commission on Safety and Quality in Health Care produced a joint safety statement on the topical application of chlorhexidine and the risks of accidental injection.
- The webAIRS incident reporting system continues to enable fellows and trainees to submit incident reports. It supports collaborations with the Airways SIG for their multi-site Triple A Project and ANZAAG to improve data collection for anaphylaxis incidents.
- Three professional documents *PS15 Guidelines for the Perioperative Care of Patients Selected for Day Care Surgery*; *PS51 Guidelines for the Safe Management and Use of Medications in Anaesthesia* and *PS58 Guidelines on Quality Assurance and Quality Improvement in Anaesthesia*, were approved by ANZCA Council and published as final versions.
- Six professional documents were released for a 12-month pilot period (*A01 Policy for the Development and Review of Professional Documents*; *PS02 Statement on Credentialling and Defining the Scope of Clinical Practice in Anaesthesia*; *PS04 Statement on the Post-Anaesthesia Care Unit*; *PS63 Guidelines for Safe Care for Patients Sedated in Health Care Facilities for Acute Behavioural Disturbance*; *PS64 Statement on Environmental Sustainability in Anaesthesia and Pain Medicine Practice* and *PS65 Guidelines for the Performance Assessment of a Peer*).
- Professional documents being reviewed include: *PS06 The Anaesthesia Record. Recommendations on the Recording of an Episode of Anaesthesia or Sedation*; *PS26 Guidelines on Consent for Anaesthesia or Sedation*; *PS43 Statement on Fatigue and the Anaesthetist* and *PS55 Recommendations on Minimum Facilities for Safe Administration of Anaesthesia in Operating Suites and Other Anaesthetising Locations*.
- More than eight safety alerts were uploaded to the ANZCA website and promoted to fellows and trainees via ANZCA publications and social media.
- Fifty-four fellows and other subject matter experts volunteered their time as members of professional document development groups.
- A record 89 “champions” in Australia and New Zealand, including 10 private anaesthesia practices, participated in National Anaesthesia Day 2018 in October which attracted widespread media coverage.
- Launch of ANZCA’s first animated patient information video “What is anaesthesia?” for fellows and other health workers to use with patients.
- An anaesthesia and pain medicine photo shoot was held over two days at the Queen Elizabeth Hospital and the Royal Adelaide Hospital in South Australia. The photos were taken to add to the fellows’ photo library for personal and professional use.
- The Geoffrey Kaye Museum of Anaesthetic History worked with Monash University to offer a medical history masterclass to help skills development in the discipline of history.
- The museum offered an inaugural competitive grant for fellows to develop projects which would advance knowledge in the history of anaesthesia and pain medicine. Grant recipient Dr Michael Toon will undertake an oral history recording project to tell the story of the history and evolution of obstetric anaesthesia and labour analgesia at Brisbane’s two tertiary hospitals, The Mater Mothers’ Hospital and the Royal Women’s Hospital.
- The museum launched its new online exhibition “The Rare Privilege of Medicine: Women anaesthetists in Australia and New Zealand” on International Women’s Day, March 8, 2018. The on site exhibition was opened on April 18 to coincide with the Australian Heritage Festival.
- The ANZCA subscription process was moved online and supported with a new webpage after listening to feedback from fellows who wanted a more streamlined process.
- ANZCA and FPM fellowship surveys were conducted to help guide college strategy and support for fellows on a range of issues including college activities, wellbeing issues, bullying, discrimination and sexual harassment and workforce matters.
- A Diving and Hyperbaric Medicine (DHM) CPD pathway was developed by a project group including the DHM Subcommittee, CPD Committee and Education Development and Evaluation Committees. This pathway is for the professional development of all DHM practitioners.

Support through advocacy

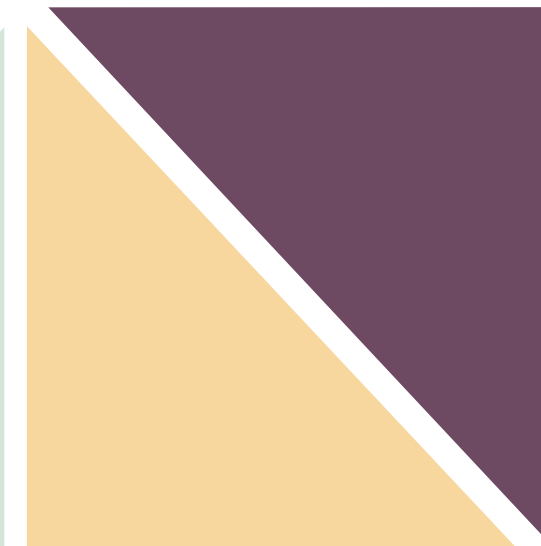
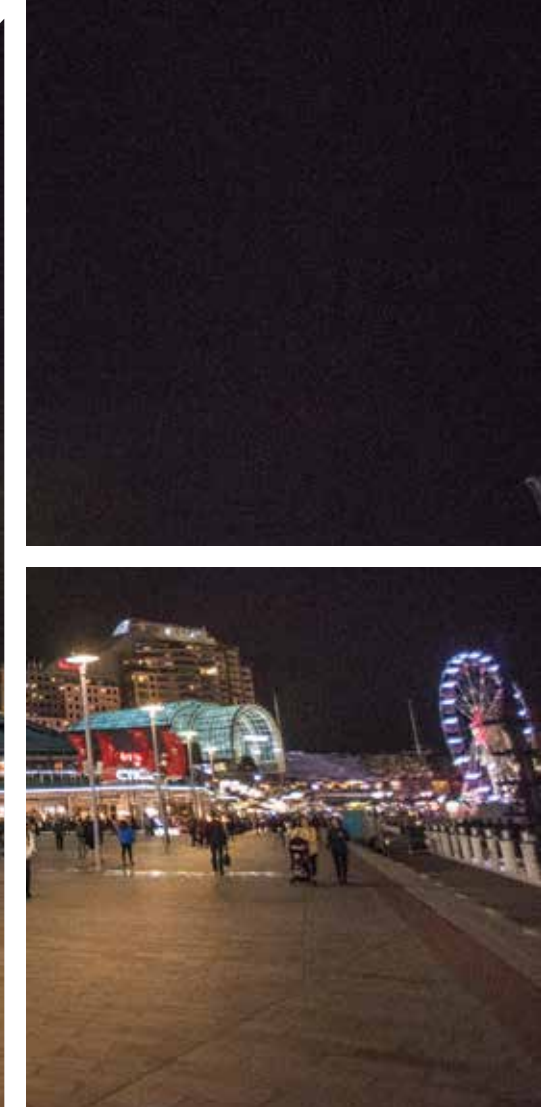
- ANZCA attended over 50 meetings in Australia with government and non-government stakeholders including the federal Department of Health (Health Workforce Branch), Victorian Department of Health and Human Services, Queensland Department of Health, Tasmanian Department of Health and Human Services, Tasmanian Health Service, Australian Digital Health Agency, Medical Research Future Fund, NPS MedicineWise, Australian Indigenous Doctors’ Association and the National Aboriginal Community Controlled Health Organisation.
- ANZCA NZNC and FPM NZNC representatives met with the New Zealand Minister of Health, Dr David Clark in March. ANZCA NZNC also met with the opposition health spokesperson, Mr Michael Woodhouse in September. ANZCA staff and NZNC members attended meetings in New Zealand with the Pharmaceutical Management Agency (Pharmac), the Ministry of Health, Medsafe, the Council of Medical Colleges, the Equity Hub, the Māori Medical Practitioners Association (Te ORA), the Health Practitioners Policy Forum and the Medical Council of New Zealand.
- Senior officials from the New Zealand Ministry of Health and Pharmac attended the NZNC meeting in March. Other meetings were held with the Health Quality and Safety Commission New Zealand and Health Workforce New Zealand. Forty-three submissions to government and agencies in Australia and New Zealand were made.
- The college distributed 36 media releases and statements reaching nearly 15 million readers and listeners across print, broadcasting and digital platforms aimed at promoting anaesthesia and pain medicine. They promoted research studies, including commentary from fellows on key medical issues and profiled fellows in Australia and New Zealand.
- The winners of the 2017 ANZCA Media Award were announced in early 2018. Kate Cole-Adams of *Good Weekend* magazine and Donna Chisholm of *North and South* were joint recipients.
- Our social media reach continued to expand with our Facebook following growing by more than a quarter – from 3529 followers to 4882. Our most popular post in 2018 (the animated patient information video) was clicked on more than 8000 times and received 2200 reactions, comments and shares. We have also helped set up a range of closed Facebook groups for trainees and fellows. The number of people following our ANZCA Twitter account grew by more than 1500, and it now sits at almost 5000. The number of people subscribing to our YouTube channel has grown by 57 per cent, to 151.

Data safety

- ANZCA is actively strengthening its data security across key business and IT assets as part of a two-year project.

International engagement

- A new Overseas Aid Committee five-year strategic priorities plan was approved by ANZCA Council.
- Three teaching visits to Papua New Guinea occurred in 2018, and several fellows including the ANZCA president attended workshops at the 2018 PNG Annual Medical Symposium. The annual ANZCA prizes for best medical student in anaesthesia and the diploma of anaesthesia were again awarded in PNG.
- Two overseas aid trainee scholarships in 2018 (supporting a final year ANZCA trainee to accompany a visiting team) were awarded.
- Lifebox Australia and New Zealand was supported by a \$A5000 annual donation and other fund-raising including funds in lieu of ASM speakers' gifts. A new memorandum of understanding (MOU) between the five partners including ANZCA was endorsed.
- The first meeting of the joint ANZCA World Federation of Societies of Anaesthesiologists (WFSA) Essential Pain Management (EPM) Steering Committee was held with Professor Roger Goucke elected chair.
- EPM was awarded a new \$A30,000 grant from the Ronald Geoffrey Arnott Foundation, managed by Perpetual Trustees.
- A letter of intent between ANZCA and the Myanmar Society for the Study of Pain was signed. The two parties agreed to work together to support the delivery of EPM and improved pain education in Myanmar.
- Delivery of a Hong Kong commissioned ANZCA Educators Program course and individual WBA workshops in 11 Hong Kong hospitals.
- An MOU was signed by ANZCA and its partners in the Tri-Nations Alliance in Halifax, Canada in October.
- ANZCA signed an MOU with the European Society of Anaesthesiology and the Australian Society of Anaesthetists to foster ongoing international collaboration across education, safety and quality and clinical trials research.
- In November, ANZCA presented at the combined Chinese Society of Anaesthesiology and the Asian Australasian Congress of Anaesthesiologists held in Beijing which was attended by 13,000 delegates making it the largest anaesthesia conference ever run. Business meetings were also held with the chief executive officers and presidents of a number of other colleges and societies including those from Ireland, Malaysia and China and the WFSA.
- Building on the relationship with the Hong Kong College of Anaesthesiologists ANZCA confirmed that a conjoint ASM will be held in Hong Kong in 2022.
- The ANZCA Library redeveloped the overseas aid library guide, and is in the process of creating an associated guide to highlight resources available to overseas aid communities.



GOAL 3: DRIVING RESEARCH AND QUALITY IMPROVEMENT

ANZCA will **DRIVE** a culture of research and quality improvement through funding and supporting research, academic anaesthesia and researchers across Australia and New Zealand and sustaining ANZCA's global leadership in high quality research.

Research

- A record \$A1.736 million was spent on anaesthesia and pain medicine research grants in 2018 with a further \$A1.5 million allocated for 2019.
- Research grant funding supported the ANZCA Academic Enhancement Grant, new and continuing project grants, the Simulation/Education Grant, novice investigator grants and the pilot grant scheme administered by the ANZCA Clinical Trials Network.
- Seventeen completed studies which previously received funding grants through ANZCA and the ANZCA Research Foundation were published in leading peer-reviewed medical journals.
- Successful grant applications included the prestigious quadrennial Lennard Travers Professorship, 10 new project grants, 15 continuing project grants, the 2019 Simulation/Education Grant, three novice investigator grants, a scholarship stipend and the \$A30,000 pilot grant scheme for support in 2019, involving 31 investigators and their teams.
- The Provisional New Fellow Research Award established by Life Patron Professor Barry Baker was conferred on Dr Courtney Thomas, a Māori doctor and recently qualified fellow, for the first ANZCA grant awarded for research specifically targeting Māori health.
- The ANZCA Melbourne Emerging Researcher Scholarship and the ANZCA Melbourne Emerging Anaesthesia Researcher Award, established following a generous multi-year commitment from ANZCA Research Foundation Life Patron Dr Peter Lowe, were awarded to Dr Jai Darvall and Dr Rachel Chapman.
- A new collaborative agreement was developed between the ANZCA Research Foundation and the Medibank Better Health Foundation to provide funding for two new grants for studies in regional anaesthesia and major joint replacement and in preoperative risk assessment and patient outcomes.

Research (continued)

- The CSL Behring ANZCA Research Award was awarded to Dr Julie Lee at the Royal Brisbane and Women's Hospital for her study "ROTEM® and platelet function in pre-eclamptic obstetric patients".
- Three new ANZCA Clinical Trials Network-endorsed multicentre randomised controlled clinical trials led by ANZCA fellows received grants from the Australian National Health and Medical Research Council: POISE-3 (\$A1.2 million); VAPOR-C (\$A4.9 million); CLIP II (\$A1.9 million).
- Professor Alan Merry stepped down as chair of the ANZCA Research Committee after 10 years in the role but remained a member of the committee. Immediate Past President Professor David A Scott was appointed as the new chair.

GOAL 4: SUPPORTING OUR WORKFORCE AND WELLBEING

ANZCA will SUPPORT the sustainable growth of a diverse, high quality and healthy anaesthesia and pain medicine and staff workforce so all communities in Australia and New Zealand have access to high quality anaesthesia, pain medicine and perioperative services, provided by clinicians who are supported both personally and professionally.

Workforce planning

- ANZCA staff and fellows participated in meetings with health workforce branches to collaborate on data issues and progress workforce planning.
- ANZCA staff also attended regional committee meetings in NSW, Victoria, Queensland and Tasmania to discuss Specialist Training Program (STP) priorities over the next three years and the progress of the implementation of the revised STP distribution model. They also visited several Australian training sites and regional training hubs.
- ANZCA CEO John Ilott attended the Rural Medical Specialist Training Summit hosted by Senator Bridget McKenzie, Minister for Regional Services, Sport, Local Government and Decentralisation.
- ANZCA hosted the STP inter-college network meeting in Melbourne and attended another in Sydney in October.
- ANZCA continued to work with partner rural generalist organisations on the development of the curriculum for the Diploma of Rural Generalist Anaesthesia.
- ANZCA facilitated two proposals to a new Health Workforce New Zealand Innovation Fund.

Wellbeing of fellows and trainees

- ANZCA monitors and supports fellows and trainees who are experiencing difficulties or who have had issues raised regarding their conduct. The Professional Conduct Triage Group was established in 2017 to assess notifications and consists of the CEO, Vice-President and Executive DPA. The college received 31 notifications in 2018 and a total of 66 notifications since 2016. In total, 62 notifications have been closed and as of early 2019 there were nine open notifications. Most cases are resolved within 12 weeks.
- The geographical location of notifications is recorded and this enables the college to identify trends where applicable.
- The Gender Equity Working Group developed the college's position statement and action plan on gender equity for release in early 2019.
- New doctors' health and wellbeing resources, including the ANZCA Doctors' Support Program, were developed.
- The draft framework for the doctor's health and wellbeing initiative was developed to guide ANZCA's strategic and operational efforts in 2019.
- The Trainee Wellbeing Working Group developed a series of recommendations to improve products and services in trainee wellbeing for council review. The recommendations were translated into a 2019 action plan. The ANZCA NZNC set up a new Welfare Advocates Network.
- ANZCA NZNC co-funded Anaesthesia Trainee Collectives as a networking initiative.
- The college strengthened ties with the Welfare of Anaesthetists SIG and representatives who developed the "Long Lives, Healthy Workplaces" toolkit to support the mental health and wellbeing of anaesthetists and anaesthetic trainees.
- The ANZCA Library redeveloped its Welfare of Doctors library guide to highlight resources relevant to the general welfare of medical practitioners, including those resources available through the library.
- The Geoffrey Kaye Museum of Anaesthetic History worked with the Museum of Contemporary Art Australia to develop art and medicine workshops. The Geoffrey Kaye Museum recorded two oral history interviews with fellows, exploring their military background and post-traumatic stress disorder.

Expanding opportunities

- ANZCA's Indigenous Health Strategy was launched in the September *ANZCA Bulletin*, featuring reports on Indigenous health following a visit to Darwin and Nhulunbuy in the Northern Territory.
- ANZCA staff held a National Reconciliation Week event at ANZCA House and several staff attended a cultural competency workshop at the Koorie Heritage Trust in December.
- New Zealand staff received training on the Treaty of Waitangi (Te Tiriti o Waitangi).
- Māori student Grace Williams was sponsored to attend the ANZCA ASM.
- ANZCA's New Zealand office started work on developing a Māori name for the college with Māori fellows and trainees meeting on the issue with ANZCA at the NZ ASM.
- EPM pilot project in Indigenous communities launched with Australian Department of Health STP educational support project funding.
- ANZCA sponsored the Australian Indigenous Doctors' Association (AIDA) conference in Perth in September, hosted an exhibition booth and participated in three workshops.
- ANZCA hosted an exhibition booth and presented at the National Aboriginal Community Controlled Health Organisation (NACCHO) conference in Brisbane in October.
- Launch of initiative to support new Indigenous fellows to attend future emerging leaders conferences.
- A Māori fellow was appointed to the Te Ohu Rata o Aotearoa (Te ORA) Māori Medical Practitioners Organisation and to a Te ORA/Council of Medical Colleges Advisory group.
- The ANZCA Library continued developing its Indigenous health library guide.



Dean's report

As we mark the first year of FPM's 2018-2022 Strategic Plan I am pleased to report that one of our four goals – positioning the faculty as a trusted source of expertise in addressing the societal impact and problem of pain – is progressing well.

Priority areas for the faculty's five year strategic plan include continuing discussions around opioids in chronic non-cancer pain and procedures in pain medicine, and working with our partners PainAustralia and the Australian Pain Society as advocates for pain services.

In June we hosted a forum on the major public health issue of opioid prescribing and chronic pain to promote robust discussion and debate with key stakeholders including consumer groups. Fifty-three delegates attended the forum at ANZCA House and another 10 participants joined remotely to hear a range of experts, including several FPM fellows, share their knowledge.

Our advocacy in Australia and New Zealand plays an important role in ensuring that pain medicine is recognised as a priority issue for health ministers and governments in those jurisdictions. Our ongoing advocacy efforts led to a meeting with the Australian health minister Mr Greg Hunt in July to discuss a range of concerns and topics including increased funding for pain services. A follow-up meeting with the minister's advisor in September focused on the faculty's national pain device implant registry initiative. The faculty also communicated with Mr Hunt regarding the new \$A20 million Pharmaceutical Society of Australia/Pharmacy Guild Chronic Pain MedsCheck trial program to voice concerns that the program was developed without appropriate input from medical specialists.

The faculty continued to highlight the importance of the National Strategic Action Plan for Pain Management at Australian state and federal levels. We have been working closely with PainAustralia on this project and another on private health insurance reforms to address concerns that those with chronic pain are not disadvantaged by new private health insurance policies.

We contributed to the Therapeutic Goods Administration's Opioid Regulatory Advisory Group determining regulatory responses to Australia's opioid problem and in March we participated in discussions with the Royal Australian College of General Practitioners on hospital discharge prescribing. We also met with the Australian Department of Health Workforce Branch to discuss workforce and data issues.

In New Zealand FPM New Zealand National Committee representatives met with the Health Minister Dr David Clark in March with the need for more pain medicine positions and training top of the agenda.

The faculty commissioned a health economics report on the burden of pain in New Zealand which will enable more effective advocacy for pain medicine services and training opportunities. The report supports an advocacy and communications plan to enhance pain medicine services in New Zealand.

We continue to lead in the development of professional pain medicine practice education and training. We published a pilot position statement on procedures in pain medicine, a revised statement on medicinal cannabis and joint ANZCA/FPM statements on the use of slow-release opioid preparations in the treatment of acute pain and on opioid induced ventilatory impairment in the acute pain setting.

A new emergency response, "Acute Severe Behavioural Disturbance in the Adult Patient (ASBD)" was developed for fellows and we continued to explore options for the development of a six-month course for medical practitioners in multi-disciplinary pain management and opportunities to train in procedural pain medicine.

Five FPM Choosing Wisely recommendations were launched in Australia aimed at improving the safety and quality of healthcare for patients.

The annual Spring Meeting held in Cairns attracted 130 delegates and was an outstanding success with its focus on Indigenous health, opioids, cannabis and interventions in pain medicine. We were pleased to have our Hong Kong colleagues as members of the meeting's organising committee and presenters during key sessions. Other successful continuing medical education events were the Refresher Course Day and Annual Scientific Meeting in Sydney which attracted more than 200 participants.

Thirty new fellows were admitted in 2018 and 41 trainees commenced training in pain medicine.

The faculty's regional and national committees continued to actively meet and to convene local continuing medical education events. Regional and New Zealand National Committee representatives attended the Professional Standards and Scientific Meetings Committees to facilitate communication and broaden input into faculty initiatives.

The Research and Innovation Committee started planning for a strategic workshop in 2019 to inform development of a research agenda and network of medicine researchers across Australia and New Zealand.

Uptake of the Better Pain Management online education program by external health professionals continued to grow. Institutional uptake was successfully negotiated with a number of institutions to commence in 2019 including a medical school for their undergraduate curriculum.

On the international front the faculty signed a Statement of Intent with the Hong Kong Board of Pain Medicine to provide support and engagement in the areas of training and continuing professional development. A letter of intent between ANZCA and the Myanmar Society for the Study of Pain was signed in September. The two parties agree to work together to support the delivery of Essential Pain Management and improved pain education in Myanmar.

An agreement was also successfully negotiated with Canadian company QxMD to host and market the Better Pain Management program to an international audience through their Learn platform in a format optimised for all devices.

It is important to recognise our fellows, trainees and staff who have worked to progress the first year of our 2018-2022 strategic plan and I thank them for their commitment and support.

Dr Meredith Craigie
Faculty of Pain Medicine Dean



FPM Board

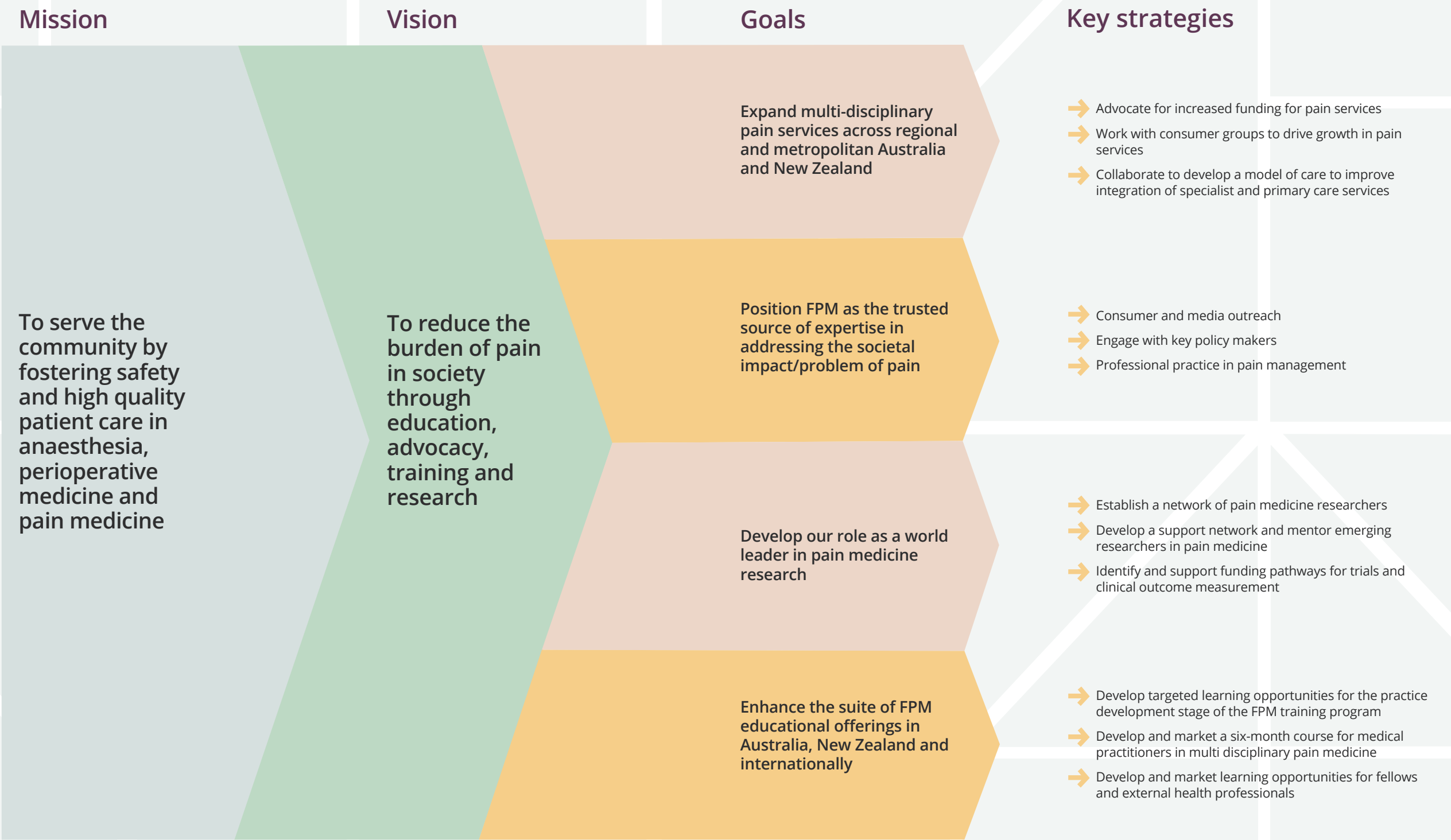


Back row: Dr Susan Lord, Professor Stephan Schug, Dr Rodney Mitchell (ANZCA President), Dr Newman Harris, Dr Kieran Davis, Ms Helen Morris (General Manager).

Front row: Dr Chris Hayes, Associate Professor Paul Gray, Dr Meredith Craigie (Dean), Associate Professor Michael Vagg (Vice-Dean), Dr Melissa Viney.

Absent: Dr Vanessa Beavis (Council representative), Dr Harry Eeman, Associate Professor Andrew Zacest.





GOAL 1: EXPAND MULTI-DISCIPLINARY PAIN SERVICES ACROSS REGIONAL AND METROPOLITAN AUSTRALIA AND NEW ZEALAND

Patients are able to access multidisciplinary pain services staffed by qualified pain management professionals in a timely manner.

Advocate for increased funding for pain services

- The FPM dean, vice-dean and general manager of FPM met with the Australian Minister of Health, Mr Greg Hunt in July to discuss a range of issues including increased funding for pain services. A meeting with the minister's adviser in September focused on the FPM national pain device implant registry initiative.
- ANZCA NZNC Chair Dr Jennifer Woods, Professor Ted Shipton and Dr Paul Vroegop met with the New Zealand Minister of Health Dr David Clark in March with the need for more pain medicine positions and training top of the agenda.
- A health economics report on the costs and burden of chronic pain in New Zealand was delivered to support an advocacy and communications plan to enhance pain medicine services in New Zealand. The report highlighted a need for more specialist pain medicine physicians.
- In June, ANZCA worked with two pain medicine services, The Auckland Regional Pain Service, and the Pain Management Centre, Canterbury DHB, to develop a proposal to the Health Workforce New Zealand Development fund, for multidisciplinary training in chronic pain management.
- Thirty new fellows were admitted in 2018 and 41 trainees commenced training in pain medicine.

Work with consumer groups to drive growth in pain services

- Key stakeholders, including consumer groups, attended the faculty's opioids and chronic pain forum at ANZCA House in June.
- Consumer representation was maintained on the Training and Assessment Executive Committee and Professional Affairs Executive Committee and provided valuable insights.
- ANZCA and FPM maintained Category A membership of Painaustralia with a position on their board and the provision of clinical advisory support. A strong and collaborative relationship has developed with the organisations working closely across a number of key issues.

Collaborate to develop a model of care to improve integration of specialist and primary care services

- In March, the FPM dean, vice-dean and general manager participated in discussions with the Royal Australian College of General Practitioners (RACGP) on hospital discharge prescribing. Other groups represented included the Royal Australasian College of Surgeons, Royal Australasian College of Physicians, Society of Hospital Pharmacists Australia and the Royal Australasian College of Medical Administrators.
- FPM participated in collaborative pain policy planning with Painaustralia and the Australian Pain Society to progress the National Strategic Action Plan for Pain Management.
- FPM Dean Dr Meredith Cragie attended the Society of Hospital Pharmacists leadership forum and provided feedback on their Standards of Practice document.

GOAL 2:
POSITION FPM AS THE TRUSTED SOURCE OF EXPERTISE IN ADDRESSING THE SOCIETAL IMPACT/ PROBLEM OF PAIN

We actively shape policy and practice in addressing pain issues and provide trusted advice to stakeholders throughout the community.

Consumer and media outreach

- Eleven FPM media releases were distributed reaching millions of readers and listeners across print, broadcast and digital platforms aimed at promoting pain medicine. The releases highlighted FPM's position on issues such as codeine upscheduling, opioid use and private health insurance reforms and profiled faculty fellows in Australia and New Zealand. FPM fellows attracted strong media coverage across national TV and radio programs – including ABC Radio National's Breakfast program and the Ten network's *The Project*.
- The number of people following the FPM Twitter account grew by 280, and currently sits at 600. The number of people subscribing to the FPM YouTube channel has grown by 19, to 53. We have used the college Facebook account to promote faculty news and events, as well as to advertise the Better Pain Management program.

Engage with key policy makers

- A meeting to discuss the impact of proposed private health insurance reforms on Australian chronic pain patients was held in August with staff from the Department of Health and Minister Hunt's office, and FPM, Painaustralia and the Australian Pain Society.
- The lack of pain services in north and north-west Tasmania was discussed at a meeting with Tasmanian Department of Human and Health Services secretary Mr Michael Pervan and his Chief Medical Officer Professor Tony Lawler.
- FPM communicated with the Australian Health Minister Mr Greg Hunt regarding the new \$A20 million Pharmaceutical Society of Australia/Pharmacy Guild Chronic Pain MedsCheck trial program voicing concerns that the program was developed without appropriate input from medical specialists.
- FPM met with the NZ Department of Health Workforce Branch to discuss workforce and data issues. The department acknowledged that branch data on specialist pain medicine physicians is poor due to most doctors registering their primary speciality.
- ANZCA NZNC representatives discussed chronic pain when they met with the opposition health spokesperson in September. The FPM-commissioned health economics report examining the cost of chronic pain to New Zealand was shared with stakeholders across the health sector before wider release.

Professional practice in pain medicine

- FPM published a pilot position statement on procedures in pain medicine, a revised statement on medicinal cannabis and joint ANZCA/FPM statements on the use of slow-release opioid preparations in the treatment of acute pain and on opioid induced ventilatory impairment in the acute pain setting.
- Five FPM Choosing Wisely recommendations were launched in Australia aimed at improving the safety and quality of healthcare for patients.
- An emergency response standard on Acute Severe Behavioural Disturbance for the ANZCA and FPM CPD program was developed.

GOAL 3: DEVELOP OUR ROLE AS A WORLD LEADER IN PAIN MEDICINE RESEARCH

Research and researchers are nurtured, supported and funded across Australia and New Zealand.

Pain medicine research network

- The Research and Innovation Committee started planning for a strategic workshop in 2019 to inform development of a research agenda and network of pain medicine researchers across Australia and New Zealand.
- Pain medicine research was well represented in 2018 grant funding.
- Successful pain medicine research grants included the Harry Daly Research Award which was awarded to Professor Alan Merry for “A bundle for anaesthetists to reduce postoperative infection: the Anaesthetists Be Clean (ABC) Study” (\$A70,000) and the John Boyd Craig Research Award to Professor Paul Rolan for his project “Exosomal miRNAs in cerebrospinal fluid as objective descriptors of pain states” (\$A32,433).

Emerging researchers in pain medicine

- Dr Daniel Chiang was awarded the Russell Cole Memorial ANZCA Research Award with Associate Professor Michal Kluger, Associate Professor Nuala Helsby, Dr David Rice and Professor Andrew Somogyi for a study into “The influence of genomic and neurophysiological factors on persistent pain after breast cancer surgery” (\$A66,698).

GOAL 4: ENHANCE THE SUITE OF FPM EDUCATIONAL OFFERINGS IN AUSTRALIA, NEW ZEALAND AND INTERNATIONALLY

Our learning opportunities are highly sought after with engaged Fellows participating in program development and delivery.

Targeted learning opportunities

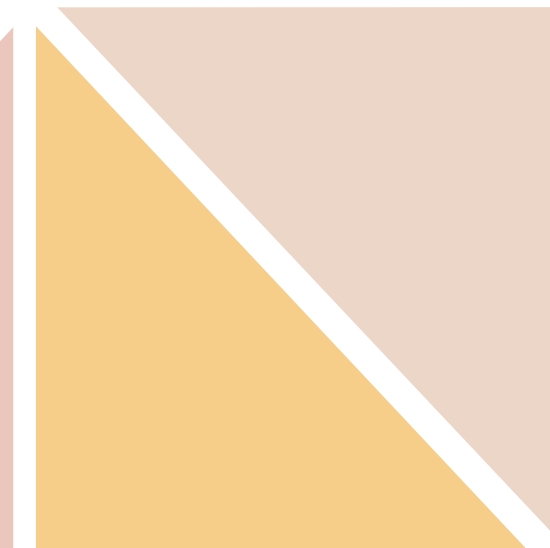
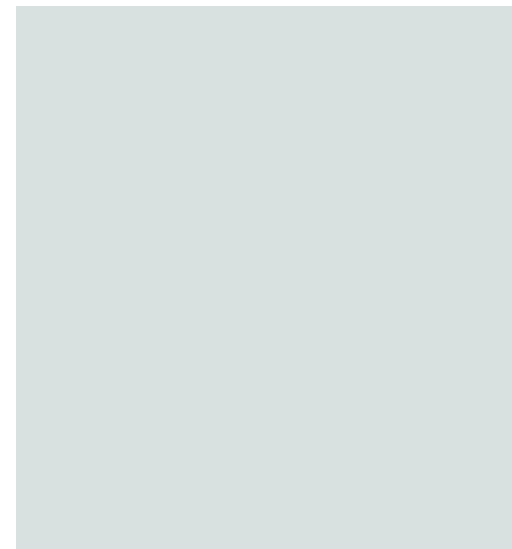
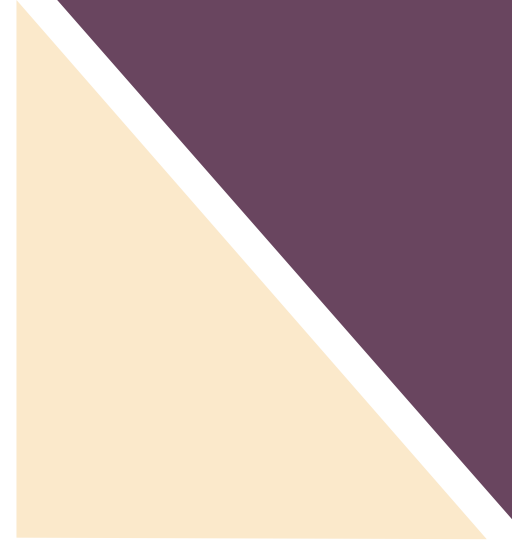
- Professor Roger Goucke was elected chair of the joint ANZCA World Federation of Societies of Anaesthesiologists Essential Pain Management Steering Committee. EPM was also successful in its application for a new \$A30,000 grant from Perpetual Trustees.
- FPM signed a statement of intent with the Hong Kong Board of Pain Medicine for the faculty to provide support and engagement in the areas of training and continuing professional development.
- A letter of intent between ANZCA and the Myanmar Society for the Study of Pain was signed in September 2018. The two parties agreed to work together to support the delivery of EPM and improved pain education in Myanmar.
- Throughout 2018, the FPM regional and national committees continued to actively meet and to convene local continuing medical education events. Regional and NZNC representatives attended the Professional Standards and Scientific Meetings committees to facilitate communication and broaden input into faculty initiatives.
- The FPM ASM program and Refresher Course Day in Sydney were successfully delivered with 224 delegates attending the latter. Presentations were made available via the Virtual ASM. From 2019, the Refresher Course Day has been renamed as the Annual Pain Medicine Symposium.
- The 2018 FPM Spring Meeting in Cairns attracted 130 delegates and there was strong industry support. The meeting was run as a collaboration with Hong Kong colleagues and included representation on the organising committee from the Board of Pain Medicine of the Hong Kong College of Anaesthetists.
- A position statement on procedures in pain medicine was promulgated for a six-month pilot period in July 2018.
- A two-year project on Procedures in Pain Management was launched to include the development of a procedural clinical care standard, enhance the training program to strengthen the structure around delivery of optional procedural pain training for trainees in the practice development stage, develop educational courses, and consider appropriate CPD activities.

Develop and market a six-month course for medical practitioners in pain medicine

- Scoping work was undertaken by the Learning and Development Committee in early 2018 with a proposal considered by the FPM Board in July. FPM communicated with key stakeholder groups, including the RACGP, to seek their feedback on the concept and to gauge the interest of their members on the concept. Feedback was supportive.

Learning opportunities for fellows and external health professionals

- Interest and participation in the Better Pain Management online education program by external health professionals continued to grow. Institutional uptake was successfully negotiated with a number of institutions to start in 2019.
- An agreement was successfully negotiated with Canadian company QxMD to host and market the Better Pain Management program to an international audience through their Learn platform.





Honorary treasurer's report

I am pleased to present the treasurer's report for the calendar year 2018 which highlights the financial performance of ANZCA. In doing so, I would like to thank my fellow ANZCA councillors, ANZCA staff (particularly the chief executive officer, director of finance and services as well as the finance staff) as well as the Finance, Audit and Risk Management (FARM), and Investment Sub-Committee members for their work and commitment to ensuring the ongoing success of the college.

The annual financial statements of the college (including the New Zealand office) have been reviewed by the college's external auditors, Grant Thornton, as well as ANZCA Council and the FARM Committee, and subsequently distributed.

2018 overview

In summary, in 2018 there is a continuance of the sound financial performance and position of the college. The headline figures are an operational deficit of just over \$1.424 million and a consolidated deficit of \$1.395 million, due in part to the selloff in global equity markets during the December quarter resulting in the investment portfolio experiencing a negative rate of return during 2018. The overall results also include:

- Enhancements to the Training Portfolio System (TPS) being completed as an operational project (rather than a capital project), with \$1.474 million expensed.
- Further renewal of the Specialist Training Program (STP) and positive work in relation to the ongoing continuation of this program.
- ANZCA Research Foundation grants and awards of almost \$1.736 million.

The balance of funds within the college remains strong, representing the college's net worth of \$31.441 million (2017: \$32.836 million), a decrease of \$1.395 million over 2017. The college continues to have no need for borrowings and is able to rely on future operating surpluses and investment earnings to finance operations and to fund approved capital projects and other expenditure. As part of

the prudent financial management of the college and in accordance with the college's treasury and investment policies, any accumulated funds in excess of annual working capital requirements are invested. These investment funds assist the ongoing financial sustainability of the college, as well as funding the delivery of ANZCA's strategic plan, including leading-edge research in anaesthesia, pain medicine and perioperative medicine.

Statement of comprehensive income

In 2018, total revenue from operating activities was \$38.717 million (\$37.756 million in 2017). Key areas of revenue for the college were:

- Subscriptions and entry fees of \$12.112 million.
- Registrations, training and examination fees of \$10.372 million.
- Conference and course income of \$6.188 million.
- Federal government funding for the STP of \$7.695 million.

Overall operating expenditure totalled \$40.142 million which is an increase of 2 per cent from 2017 (\$39.370 million), leaving an operating deficit of \$1.425 million (compared to deficit of \$1.614 million in 2017).

In 2018, the college has successfully completed the enhancements to the TPS within budget, scope, and timeframe which was well received by trainees. The project was completed at a total cost of \$1.914 million of which \$440,000 was incurred in 2017. The enhancements were treated as an operational project. The college has expensed all the costs in the year it was incurred.

In 2018 the college's investment portfolios ended the year down with a selloff in global equity markets during the December quarter, yielding a negative return of approximately 1.2 per cent (positive return of 11.8 per cent in 2017). The invested funds of \$19.815 million are the result of prudent financial management over a number of years assisted by the college's investment managers, JB Were. The overall investment income (including market movement)

for the college delivered return of \$29,000 in the 2018 financial year (compared with a positive return of \$2.388 million in 2017). Income from these investments, combined with member contributions, contributes to the ANZCA Research Foundation's ability to support research.

After taking into account the investment income, and a minor exchange rate gain on transactions with New Zealand, the college recorded a consolidated deficit of \$1.395 million (compared with a \$767,000 surplus in 2017).

Statement of financial position

Over the year, the net assets of the college decreased by the value of the consolidated deficit to \$31.441 million (compared with \$32.836 million at the end of 2017).

Statement of changes in equity

Total equity for the year decreased by \$1.395 million to \$31.441 million. This arose from the net effect of the total comprehensive deficit of \$1.395 million.

Statement of cash flows

The college traditionally generates positive cash flows from operating activities. In 2018, the college generated \$6.577 million (2017: \$1.963 million) of cash flow from operating activities. The higher amount can be attributed to STP. The college received \$9.216 million for STP of which \$2.078 million is for 2019. The college has only paid \$1.959 million to participating hospitals in 2018 due to invoices not being received until 2019.

2019 budget overview

The 2019 budget has been developed taking into consideration a number of key strategic initiatives and projects that support the delivery of the ANZCA business plan and the second year of the ANZCA Strategic Plan for 2018-2022.

Each year the forthcoming annual budget is guided by agreed budget parameters with the objective of delivering a small operating surplus. With the growth of the college over the years, additional initiatives and projects have resulted in a higher cost base.

In 2019, the college will strategically focus on the college services, including re-examination of its activities, projects, processes and procedures.

The budget also factors in an approved level of investment in important capital projects to further enhance the delivery of services to fellows and trainees, as well as capital expenditure to improve buildings and facilities to mitigate future repair costs.

Conclusion

The financial well-being of the college underpins its position in the current health environment. Prudent financial management and sound business planning has allowed the college to maintain the everyday running of the college, while also taking on additional work including:

- A well-received upgrade to the TPS, which was launched on time and on budget.
- An online perioperative anaphylaxis emergency response CPD learning resource.
- Progressed the development of an integrated perioperative medicine care model.
- Research grants of \$A1.736 million were awarded through the ANZCA Research Foundation.
- A highly successful Sydney annual scientific meeting in 2018 with 2400 in attendance and 229 new fellows presenting.
- ANZCA launched its new three-year STP plan.
- The ANZCA subscription process was successfully moved online and supported with a new webpage.

In closing, on behalf of ANZCA Council, I would like to acknowledge the significant pro bono contributions of fellows and to also thank the staff of the college under the leadership of our Chief Executive Officer, Mr John Illott. It has been another busy and successful year for the college, which continues to maintain a sound financial basis for service to the trainees, fellows and the community.

Dr Richard J Waldron
Honorary Treasurer, ANZCA

Discussion and analysis of the financial statements extract

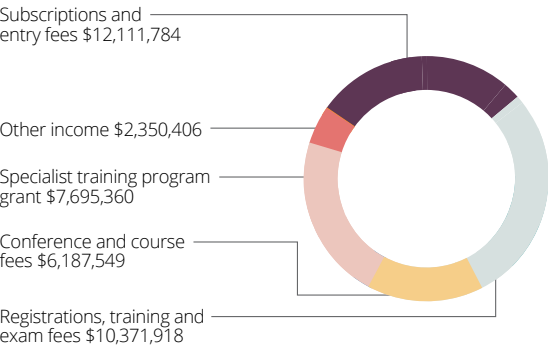
Information on the ANZCA Financial Report
The financial statements and disclosures in this report have been extracted from the full audited financial report of the Australian and New Zealand College of Anaesthetists (ANZCA) for the year ended December 31, 2018, prepared in accordance with Australian Accounting Standards.

This discussion and analysis is provided to assist the members in understanding the financial information presented. A copy of the full financial report and auditor's report can be obtained via the ANZCA website or by contacting ANZCA.

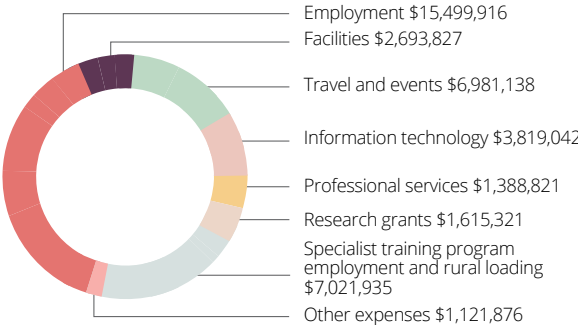
The college is a Company Limited by Guarantee that has no share capital and declares no dividends. The college is exempt from income tax pursuant to section 50-5 of the Income Tax Assessment Act 1997.

All amounts are stated in Australian dollars.

Total revenue for the 12 months ended December 31, 2018



Total expenses for the 12 months ended December 31, 2018



Financial statements extract

Statement of profit or loss and other comprehensive income for the year ended December 31, 2018		
	2018 \$	2017 \$
Revenue		
Subscriptions and entry fees	12,111,784	11,410,064
Registrations, training and exam fees	10,371,918	10,064,236
Conference and course fees	6,187,549	6,108,209
Specialist training program grant	7,695,360	7,972,236
Other income	2,350,406	2,201,884
Total revenue from operating activities	38,717,017	37,756,629
Expenses		
Employment	15,499,916	15,077,694
Facilities	2,693,827	2,682,783
Travel and events	6,981,138	6,799,188
Information technology	3,819,042	3,162,023
Professional services	1,388,821	1,519,413
Research grants	1,615,321	1,830,030
Specialist training program employment and rural loading	7,021,935	7,426,210
Other expenses	1,121,876	873,113
Total expenses from operating activities	40,141,876	39,370,454
Deficit before non-operating activities	(1,424,859)	(1,613,825)
Income from non-operating activities		
Investment income	29,250	2,388,267
(Deficit)/Surplus for the year	(1,395,609)	774,442
Other comprehensive income		
Items that may be reclassified to profit or loss		
Exchange differences on translation of foreign operations	679	(7,021)
Total comprehensive income for the year	(1,394,930)	767,421

Financial statements extract (continued)

Statement of financial position as at December 31, 2018

	2018 \$	2017 \$
ASSETS		
Current assets		
Cash and cash equivalents	18,361,122	11,983,835
Trade and other receivables	15,081,545	13,020,556
Other financial assets	230,175	1,139,047
Total current assets	33,672,842	26,143,438
Non-current assets		
Property and office equipment and cultural assets	11,431,572	10,673,868
Intangible assets	3,810,006	5,626,922
Other financial assets	19,815,355	20,104,278
Total non-current assets	35,056,933	36,405,068
Total assets	68,729,775	62,548,506
LIABILITIES		
Current liabilities		
Trade and other payables	15,221,797	8,172,862
Other liabilities	20,941,626	20,313,400
Provisions	939,154	946,550
Total current liabilities	37,102,577	29,432,812
Non-current liabilities		
Provisions	185,995	279,561
Total non-current liabilities	185,995	279,561
Total liabilities	37,288,572	29,712,373
Net assets	31,441,203	32,836,133
EQUITY		
Retained earnings	30,925,221	32,320,830
Foreign currency translation reserve	224,825	224,146
Asset revaluation reserve	291,157	291,157
Total equity	31,441,203	32,836,133

Statement of changes in equity for the year ended December 31, 2018

	Retained earnings \$	Foreign currency translation reserve \$	Assets revaluation reserve \$	Total \$
Balance at January 1, 2017	31,546,388	231,167	291,157	32,068,712
Surplus for the year	774,442	-	-	774,442
Currency translation differences arising during the year	-	(7,021)	-	(7,021)
Total comprehensive income for the year	774,442	(7,021)	-	767,421
Balance at December 31, 2017	32,320,830	224,146	291,157	32,836,133
Deficit for the year	(1,395,609)	-	-	(1,395,609)
Currency translation differences arising during the year	-	679	-	679
Total comprehensive income for the year	(1,395,609)	679	-	(1,394,930)
Balance at December 31, 2017	30,925,221	224,825	291,157	31,441,203

Statement of cash flows for the year ended December 31, 2018

	2018 \$	2017 \$
Cash flows from operating activities		
Receipts from members, customers and government bodies	37,870,666	38,029,273
Interest received	109,418	73,902
Donations received	90,011	201,606
Payments to employees, suppliers and other parties	(29,232,686)	(34,341,516)
Research grants and bequests paid	(2,260,395)	(2,000,278)
Net cash inflow from operating activities	6,577,014	1,962,987
Cash flows from investing activities		
Receipts on disposals/(payments for purchases) of financial assets	925,583	(1,710,531)
Payments for property and office equipment	(1,116,293)	(466,780)
Payments for project development	(71,492)	(616,620)
Net cash outflow from investing activities	(262,202)	(2,793,931)
Cash flows from financing activities		
Net cash inflow/(outflow) from financing activities	-	-
Net (decrease)/increase in cash and cash equivalents	6,314,812	(830,944)
Cash and cash equivalents at the beginning of the financial year	11,983,835	12,921,219
Total effect of exchange rate fluctuation of cash held	62,475	(106,440)
Cash and cash equivalents at the end of the financial year	18,361,122	11,983,835

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