

President's report

Getting on with the job

When I was elected President in May, I inherited an agenda that was full of problematic issues including national registration, task substitution, pressures on general practice, poor planning for medical training, continuing poor Indigenous health, a rural health crisis, and not enough focus on improving aged care.

Add to that a whole raft of public health issues such as obesity, binge drinking and mental health, to name but a few.

By the end of the year we had a new Government, but many of the same old problems in health remained.

While AMA advocacy has kept these issues in the headlines and in the public eye, the fact remains that the key health issues still need urgent and appropriate attention.

Though the new Government in its first month started chipping away at a number of the public health issues with new policies and funding, it was clear that there was going to be ongoing concerns with some of the more problematic areas – the policies that the AMA challenged during the election campaign.

I'm talking primarily about the COAG model for national registration, task substitution, medical training and GP Super Clinics.

Apart from the GP Super Clinics policy, the other matters have been around for some time in the COAG processes or elsewhere.

The AMA made it clear post-election that the key health issues we highlighted, but which were not addressed, would stay as our policies into 2008. The needs in the health system remain the same until they are responded to by a new government or any government.

That will present us with challenges and opportunities, but rest assured we will continue to push these policies on behalf of our patients, our members and the profession.

Outside the election setting, which required almost total focus in the second half of the year, the AMA once again proved itself the top lobby group in Canberra throughout 2007. Successes from direct AMA lobbying included:

- a Government ban on therapeutic product endorsements by health professionals,
- a new Medicare rebate to cover health assessments for people with intellectual disabilities,
- better patients' access to urgent after-hours GP care,
- tighter guidelines around privacy and access by young people to the proposed Access Card,
- relaxed restrictions to the extension of emergency medical training as part of the Rural and Remote Procedural GPs program,
- improved funding arrangements for the Local Medical Officer (LMO) scheme for veterans,
- an inquiry into Patients Assisted Travel Schemes and extra training for regional proceduralists,



- a much-improved streamlined authority prescription system,
- strategic AMA involvement in the Northern Territory Indigenous initiative,
- slight amendments to relax conditions of the Bonded Medical Places Scheme – but not enough,
- in a major win for doctors, the AMA reached agreement with the Government for a support package for doctors who take on the Medicare Easyclaim system,
- the success of the AMA's informed financial consent (IFC) campaign averted Government moves towards legislation, and
- pre-election support from Prime Minister John Howard and Health Minister Tony Abbott for the AMA's preferred model for recognition of national registration and accreditation for health professionals.

On the policy front, we released or updated a number of Position Statements, including:

- *Connectivity*,
- *Recognising Medical Teaching and Training in Private Practice*,
- *Medical Training in Expanded Settings Including the Private Sector*,
- *Boxing* (reaffirmed),

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- Accommodation and Appointment Standards for Community Placements,
- Core Terms in Internship,
- Referrals Within the Profession,
- Pre-Internships in Medical School,
- The Role of the Medical Practitioner in End of Life Care, and
- Social Determinants of Health and the Prevention of Health Inequalities.

On top of that, we released groundbreaking and agenda-setting publications, including:

- The *Safe Handover: Safe Patients* guide to help create greater efficiencies in health care in hospitals,
- The AMA's Rural Health Survey, which collated the views of grassroots rural doctors on how to fix rural health,
- The AMA Indigenous Health Report Card, which this year highlighted the barriers faced by Indigenous people when they seek the sort of quality health care enjoyed by other Australians,
- The rural health policy booklet, *Bridging The Gap – better health care in rural, regional and remote Australia*,
- The AMA Budget Submission,
- The *AMA Public Hospital Report Card 2007*, and
- Our election policy booklet, *Key Health Issues for the 2007 Federal Election*.

We also had Family Doctor Week, the Parliamentary Dinner, the Rural Health Summit, my debut National Press Club Address and, of course, the long and eventful Federal Election campaign.

All in all, that is an impressive body of work, which doesn't just happen by chance. This is the result of teamwork.

I'd like to thank my predecessor, Dr Mukesh Haikerwal, for having established a policy and advocacy framework for me to take over comfortably and seamlessly in May.

My special thanks to my hardworking Executive – Dr Gary Speck, Dr Dana Wainwright, Dr Sam Lees, Assoc Prof John Gullotta, and Dr Peter Garcia-Webb – for their ideas, excellence and support.

The AMA is lucky to have such a talented Federal Council representing all the craft groups, the students and doctors in training, and all the States and Territories. This group of dedicated doctors is a powerhouse on policy, politics, and strong and responsible administration. My thanks to them all.

This year we had a succession of people in the chair as Secretary General of the Secretariat in Canberra. After three years, Dr Robyn Mason left the AMA just prior to National Conference.

We were fortunate indeed that AMAQ CEO, Kerry Gallagher, made himself available to steer the Federal AMA safely for five months into and beyond the turbulence of the Federal Election. Kerry made a huge contribution, for which I am eternally grateful.

Kerry's efforts are indicative of the successful partnership that has developed between the Federal AMA and all the State and Territory AMAs. I think we have reached an unprecedented level of camaraderie, consultation and cooperation, which was on display for all to see during the election campaign. Team AMA is alive and kicking.

In December, the AMA secured the services of Mr Francis Sullivan as the new Secretary General. Francis would be well known to many members through his work for 14 years as head of Catholic Health Australia. Francis will lead the Secretariat into 2008 to achieve more great outcomes for the AMA and its members.

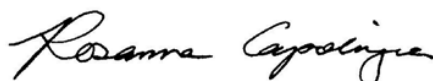
I pay tribute to the hard work of all the staff in the Federal Secretariat. They keep the wheels turning for the AMA all year round. Our engagement with Government, Opposition, the bureaucracy and the health sector in Canberra and nationally is maintained constantly to ensure smooth access for the President, the Executive and Federal Council members. I extend my personal thanks to each and every staff member for the support they provide to the President, often with quick turn around and under high demand.

They keep the Committees informed and resourced and ensure that the AMA's reputation as the peak lobby group stays intact. It was a tough and demanding year for all the staff in 2007 and I thank them for their dedication.

In closing, may I express my gratitude to all AMA members. It is your work at the coalface of medicine that fuels the AMA's advocacy.

It is your experiences and ideas that shape our policy and build our success. It has been an honour to serve you as President in 2007.

Stay tuned for a year of action in 2008 as your Federal AMA sets out to get some action on the policies that will deliver confidence to the medical profession and the best quality care for the Australian people.



Dr Rosanna Capolingua
President, Federal AMA