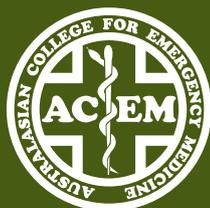




Australasian College for Emergency Medicine

acem.org.au



Year in Review 2019

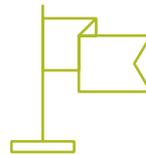
The 2019 ACEM Annual Report

The Australasian College for Emergency Medicine (ACEM) is the not-for-profit organisation responsible for training emergency physicians and the advancement of professional standards in emergency medicine in Australia and New Zealand. As the peak professional organisation for emergency medicine in Australia and New Zealand, ACEM has a significant interest in ensuring the highest standards of medical care for patients are maintained in emergency departments across both countries.



Vision

Be the trusted authority for ensuring clinical, professional and training standards in the provision of quality, patient-focused emergency care.



Mission

Promote excellence in the delivery of quality emergency care to all of our communities through our committed and expert members.



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ACEM at a glance – 30 June 2019

Fellows

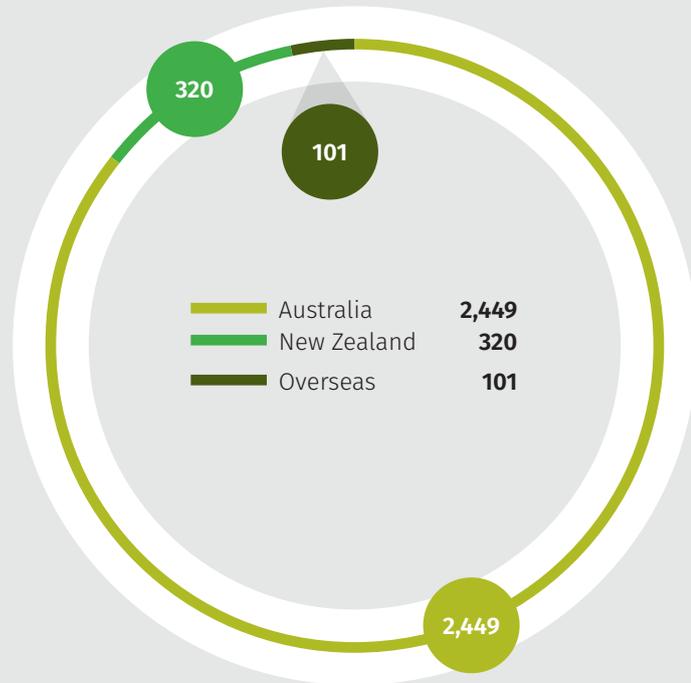
2,870

Active Fellows

218

New Fellows between
1 July 2018 – 30 June 2019

Active Fellows by region



Training Programs

2,402

Registered in the **FACEM**
Training Program

1,825

in the **Advanced Training** stage
of the **FACEM** Training Program

406

Registered **Emergency Medicine**
Certificant (EMC) Trainees

90

Registered **Emergency Medicine**
Diplomate (EMD) Trainees

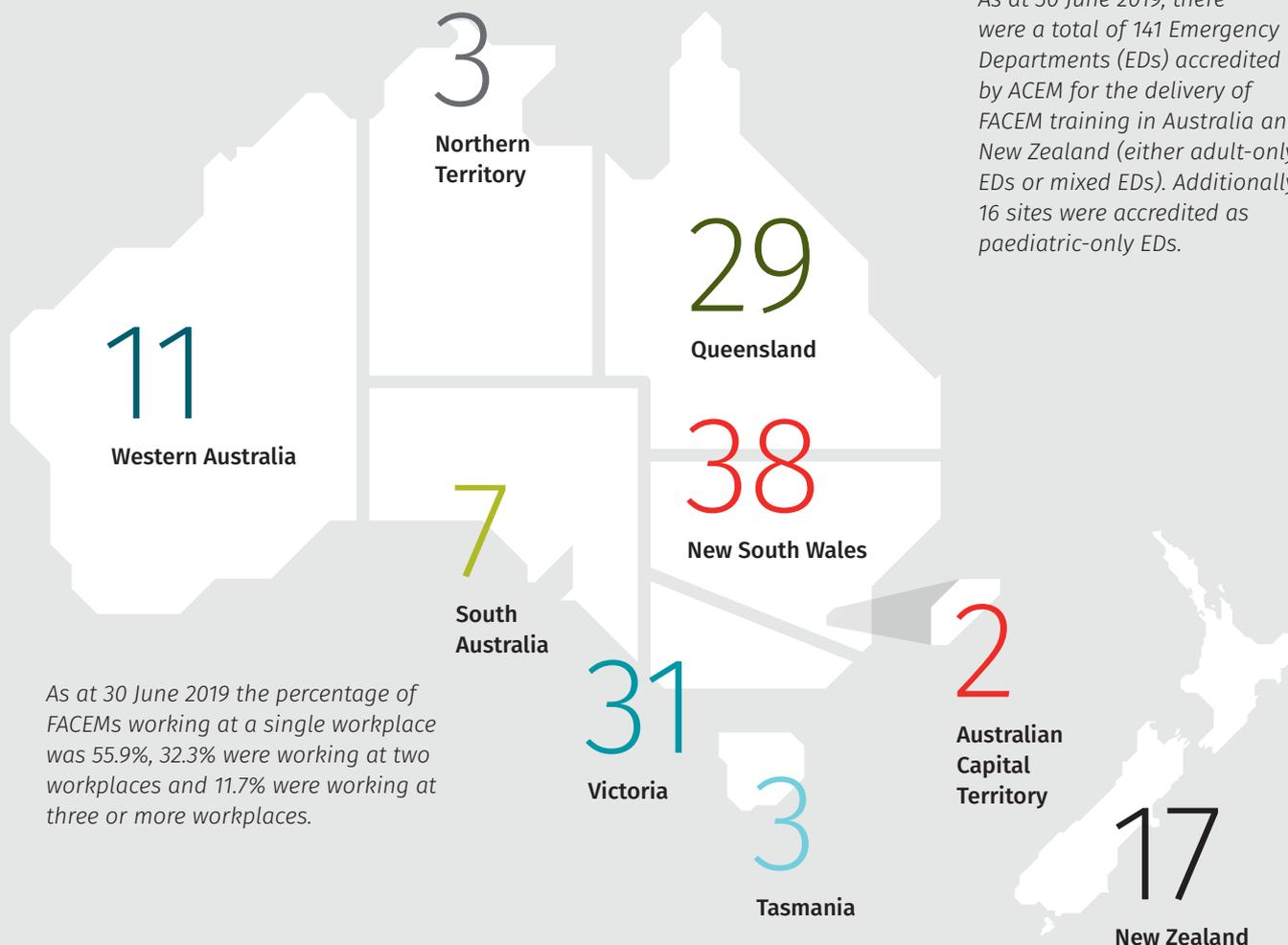
64

Registered **Specialist International**
Medical Graduates (SMIG) on the
pathway to Fellowship

ACEM accredited emergency department training sites
(FACEM Training Program)

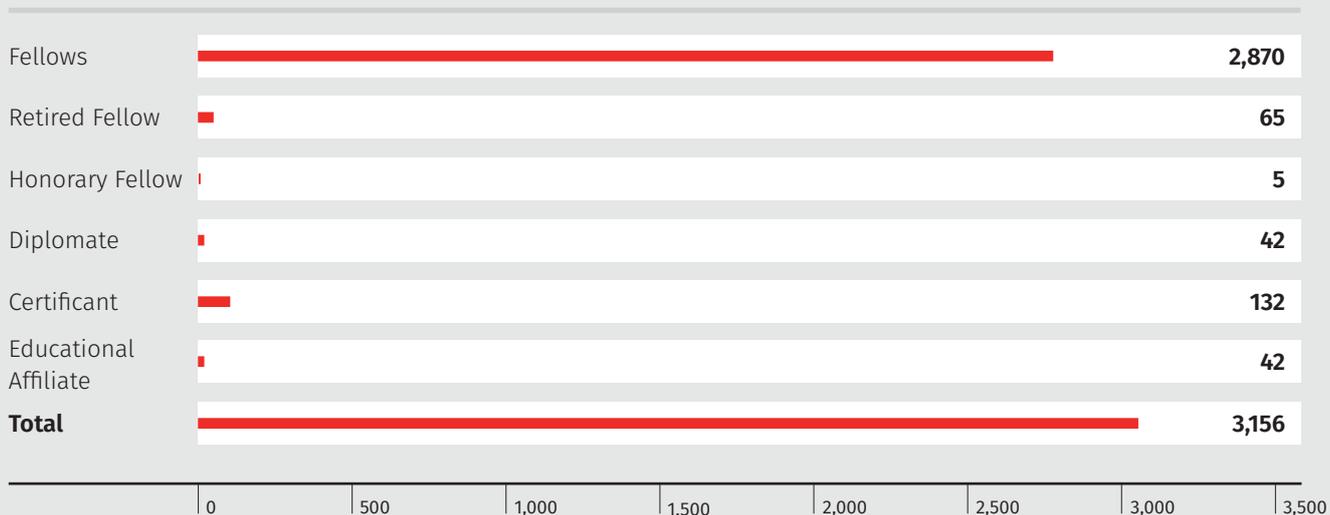
141

As at 30 June 2019, there were a total of 141 Emergency Departments (EDs) accredited by ACEM for the delivery of FACEM training in Australia and New Zealand (either adult-only EDs or mixed EDs). Additionally, 16 sites were accredited as paediatric-only EDs.



As at 30 June 2019 the percentage of FACEMs working at a single workplace was 55.9%, 32.3% were working at two workplaces and 11.7% were working at three or more workplaces.

Membership categories



President's report

Dr Simon Judkins

It has been a big year at ACEM, with significant growth experienced at the College.

We've seen growth in our number of FACEMs, with the trainee rate remaining steady, and excellent uptake by physicians of our emergency medicine certificate (EMC) and diploma (EMD) programs. This year we enrolled our 1,000th EMC trainee, an outstanding achievement and one that reflects the increasing presence and need for emergency medicine skills and expertise in rural, regional and remote areas. This is not to take away from the significant need also for FACEMs in those areas.

In continued support of our work, College staff have worked through changes at head office to ensure structures are in place to adequately support the work of all our members and trainees. Excitingly, we are seeking to build upon our staff numbers in New Zealand and look forward to the introduction of some exciting, project-based roles in that office, including for the College's Manaaki Mana strategy and Choosing Wisely activities.

Significant work is also being undertaken to meet the need for support afforded to our members and trainees, with additional staff appointed to assist with Faculty work and meeting arrangements. Ideally, I am also keen to see greater capacity for Faculties to work at a local level, particularly in the advocacy space (e.g. safety standards, resourcing and overcrowding). I am confident this transition will happen, but know the support for the FACEMs involved must also be there.

The College has also been busy working with its Pacific partners, supporting the development of emergency medicine in the South Pacific and through Asia. The College is also now offering access to some of its educational resources and CPD activities to our Pacific-based peers.

The College has also been involved in an exciting project with Swinburne University that investigates the challenges being faced by directors in emergency departments. The project is the starting point for a leadership program in emergency medicine, and is certainly one to watch.

In 2020 the College will again host a Patient Safety Workshop, with plans underway to conduct workshops in Aotearoa New Zealand as well as again at the College's head office in Melbourne. The March 2019 workshop was an outstanding success, with huge enthusiasm for the presentations and activities on the day.



Finally, I want to acknowledge some of the wonderful work our College has done this year to support equity. We passed two special resolutions that have seen three wonderful women appointed to the Board; established the Advancing Women in Emergency Section and witnessed several female appointments to our councils and entities.

Elsewhere, we've seen tangible efforts to support Māori, Aboriginal and Torres Strait Islander health, including patients and the emergency medicine workforce. The delivery of our second Reconciliation Action Plan and the launch of the Manaaki Mana strategy for excellence in emergency care for Māori recognise the work we have done so far, but also highlight all the work we must continue to do to close the gap in Aboriginal, Torres Strait Islander and Māori health outcomes and health workforce participation.

We've seen much excitement since the news of a Pre-Hospital and Retrieval Medicine Diploma, which is coming soon! It's a fantastic initiative and one made possible by the strength of our relationships with our specialist peers at the Australian and New Zealand College of Anaesthetists (ANZCA), the Australian College of Rural and Remote Medicine (ACRRM) and College of Intensive Care Medicine of Australia and New Zealand (CICM).

The coming year promises also to be a busy one. On all these things and many more (mental health, climate change, healthcare for refugees), there is plenty more to be done.

I sincerely hope that you feel supported and heard by ACEM. Together we are shaping and driving the future of emergency medicine, but the foundation is now. I look forward to hearing more of your ideas, more of your interests and more of you as we march on for emergency medicine.

A handwritten signature in black ink, appearing to read 'Simon Judkins'. The signature is fluid and cursive, with a long horizontal stroke at the end.

Dr Simon Judkins
President

ACEM Board



Dr Simon Judkins
President



Dr John Bonning
President-Elect



Associate Professor Yusuf Nagree
Chair, Council of Advocacy, Practice
and Partnerships



Dr Barry Gunn
Censor-in-Chief/Chair, Council of
Education



Dr Didier Palmer
Deputy Chair, Council of Advocacy,
Practice and Partnerships



Associate Professor Gabriel Lau
Deputy Censor-in-Chief/Deputy
Chair, Council of Education



Dr Swaroop Valluri
Trainee Representative



Mr Tony Evans
Non-FACEM Member



Mr Michael Gorton AM
Non-FACEM Member

In early June two special resolutions to amend the ACEM Constitution were passed by a vote of Fellows.

Resolution 1:

- to replace the positions of the Deputy Chairs of the Council of Advocacy, Practice and Partnerships and the Council of Education with two FACEMs from the general membership – was voted on by 936 FACEMs, with 892 votes (95.3 percent of voting FACEMs) supporting the resolution; and

Resolution 2:

- to appoint a Community Representative to the Board was voted on by 936 FACEMs, with 793 votes (84.7 per cent of voting FACEMs) supporting the resolution.

Changes to the Constitution took effect immediately following the release of results. Implementation of these changes and the appointment of two general FACEMs and one community representative to the Board have since taken place.

Further discussion is contained on page 20.

CEO report

Dr Peter White

It is again a pleasure to present the annual report of ACEM; this time for the period covered from July 2018 to June 2019.

At the risk of stating the obvious and repeating the thoughts of others, it certainly has been a 'busy' period and this is again illustrated through the contents of this document.

You will notice that the format of this Annual Report is different to what has been presented over recent years. In essence, it is a return to the more 'traditional' type of document without as wide a coverage of ACEM activities during the period that it covers. To a significant extent this is due to the College recently launching the ACEM Magazine – *Your ED*. Showcasing emergency medicine as a specialty, *Your ED* is intended to highlight the work of the College and its members across the broad range of activities that are undertaken in a way that enables a regular flow of information to the College membership and others with an interest in the work of ACEM.

While seemingly returning to an idea that was ceased some years ago, it is one of the marks of a maturing organisation that it can reassess the way in which it does things and accept that sometimes a reinvigoration of an 'old' idea can serve a useful purpose in a changing world where 'modern' methodologies may require some supplementing. Indeed, the first issue received positive feedback from the membership and external stakeholders alike, and all involved look forward to providing content that reflects and celebrates the activities of the College and our broad membership.

The work of the College in relation to what may be considered our 'core business' is outlined in the contents of this document. Clearly there has been a lot of activity, all of which is intended to make ACEM the most effective, relevant organisation that it can be in the context of the environment in which it operates. That environment is not straightforward, and it is testament to the efforts of the people who are committed to the ongoing development of the College that such a lot has been able to be achieved.

As a body with the objectives that it has, ACEM is fortunate that it has both committed members, as well as committed staff and committed community representatives that understand the need to work in partnership to achieve the aims of the College.



The College is part of the way through the period covered by its Strategic Plan 2019 – 2021 and the accompanying Business Plan and is progressing well against the intended outcomes of these documents. Additionally, throughout the last year the College has worked diligently and focussed on achieving ongoing requirements outlined in the College's Accreditation Report that resulted from the 2017/2018 reaccreditation by the Australian Medical Council and the Medical Council of New Zealand.

There is much still to do in relation to meeting the outcomes articulated in these documents, however, and all involved in achieving them will need to remain focussed, open to change in the context of the expectations of the wider community, and recognise the importance of the responsibilities of stewarding an organisation if they are to be achieved. It is a source of personal pride that I am able to be involved in contributing to the progress of ACEM through a period where change has been considerable by leading a staff that is equally committed to the task and working with College members and others who understand the value of the work that the College does. I thank everyone who has contributed to the work of ACEM during the last year and look forward to the achievements that can be outlined in the next ACEM Annual Report.

A handwritten signature in black ink, appearing to read 'Peter White', written over a thin horizontal line.

Dr Peter White
Chief Executive Officer

College Councils

Council of Education (COE) Membership

Dr Barry Gunn, Censor-in-Chief

Associate Professor Gabriel Lau, Deputy Censor-in-Chief (from November 2018), Regional Censor for New South Wales/Australian Capital Territory (until November 2018)

Dr Simon Chu, Deputy Censor-in-Chief (until November 2018)

Dr Simon Judkins, President

Dr John Bonning, President-Elect (from November 2018)

Professor Anthony Lawler, Immediate Past President (until November 2018)

Dr Andrée Salter, Regional Censor for Australian Capital Territory (from February 2019)

Dr Jules Willcocks, Regional Censor for New South Wales (from November 2018)

Dr Stuart Barrington-Onslow, Regional Censor for New Zealand (from November 2018)

Dr Gina de Cleene, Regional Censor for New Zealand (until November 2018)

Dr Rebecca Day, Regional Censor for Northern Territory (from February 2019)

Dr Sharyn Smith, Regional Censor for Queensland

Dr Alistair Fergusson, Regional Censor for South Australia (from November 2018)

Associate Professor Bob Dunn, Regional Censor for South Australia/Northern Territory (until November 2018)

Dr Kate Field, Regional Censor for Tasmania

Dr Jonathan Dowling, Regional Censor for Victoria (from November 2018)

Dr Jo Dalgleish, Regional Censor for Victoria (until November 2018)

Dr Harry Patterson, Regional Censor for Western Australia

Ms Jacqui Gibson-Roos, COE Community Representative

Dr Nicholas Lelos, Trainee Committee Chair

Council of Advocacy, Practice and Partnerships (CAPP) Membership

Associate Professor Yusuf Nagree, Chair, Western Australia

Dr Didier Palmer, Deputy Chair, Northern Territory

Dr Simon Judkins, President

Dr John Bonning, President-Elect (from November 2018) New Zealand (until November 2018)

Professor Anthony Lawler, Immediate Past President (until November 2018)

Dr Suzanne Smallbane, Australian Capital Territory

Associate Professor Sally McCarthy, New South Wales

Dr Clare Skinner, New South Wales

Dr Alan Tankel, New South Wales

Dr Kate Allan, New Zealand (from November 2018)

Dr André Cromhout, New Zealand

Dr Stephen Gourley, Northern Territory

Dr Kim Hansen, Queensland

Dr Niall Small, Queensland

Dr Thomas Soulsby, South Australia

Dr Juan Carlos Ascencio-Lane, Tasmania

Dr Suzanne Doherty, Victoria

Dr Sara MacKenzie, Victoria

Dr Edward Oakley, Victoria

Dr Peter Allely, Western Australia

Dr Lynda Vine, Western Australia

Dr Nicholas Lelos, Trainee Committee Chair

Council of Advocacy, Practice and Partnerships

Associate Professor Yusuf Nagree, Chair

The Council of Advocacy, Practice and Partnerships (CAPP) guides the College's strategic direction across the pillars of Policy, Advocacy and Research. It has been my pleasure to Chair CAPP since its inception in July 2014.

During this reporting time we have established a new entity structure and tied committee activities explicitly to the ACEM Business Plan. CAPP is increasingly a body that sets priorities, and entity membership now better reflects the demographics of the College. Consequently, in 2019, we witnessed re-energised CAPP committees.

Standards and Endorsement Committee (SEC)

In 2019 SEC audited more than 50 standards to identify revisions, gaps and opportunities. These standards are more accessible and directly embedded in educational resources. The new 'Policy Reference Panel' gives all members the opportunity to support CAPP via document development, consultation and representation.

SEC is developing guidance on safer rostering for all members, and on equity in EDs. With The Royal Australian and New Zealand College of Psychiatrists (RANZCP) we will agree a policy on the physical assessment of patients presenting with mental health problems. Updating of the ED Design Guidelines is also important work into 2020.

Health System Reform (HSR)

In 2019 HSR reviewed time-based targets and other metrics of ED effectiveness, exploring performance measures in light of new research into overcrowding and mortality. The new statement on ED metrics provides a powerful tool for influencing Government and administrators on how effectiveness is measured.

The Geriatric Emergency Medicine (GEM)

The GEM Section provided expert input into the College's submission to the Aged Care Royal Commission. While the Commission's findings are concerning, the submission articulated the pivotal role of the ED in implementing better models of care.

Quality and Patient Safety (QPS)

In March 2019, an ACEM-hosted Patient Safety Workshop in Melbourne saw experts presenting on factors that contribute to error and cultures that result in safer EDs. This event is now an annual fixture.



The redesigned EM Events Register is due to be available in 2020, with the relaunch focusing on reporting 'good saves', as well as incidents. Increased self-reporting by members will be incentivised.

Research Committee (RC)

The RC focused on how to increase clinical research capacity in EDs, including through accreditation, scholarships and the ACEM Clinical Trials Network (CTN) and Emergency Department Epidemiology Network (EDEN). The CTN improved infrastructure for ED clinician-led, multi-site trials, while EDEN is developing options for national ED linked dataset, which will culminate in ACEM's first ACEM Research Network Symposium in November 2019.

Rural, Regional and Remote (RRR) Committee

The Rural Health Action Plan aims to improve equity of access to emergency care, regardless of where patients live, using existing evidence to implement and report on both aspirational and tangible targets.

Members were consulted on the development of *Rural Emergency Medicine Learning Outcomes* as part of the ACEM Curriculum Framework Review.

Public Health and Disaster (PHD) Committee

The PHD examined how to focus College support for measures that mitigate the impact of climate change on EDs. The expectations of College members are vital in shaping the College's reaction to this issue. It continues to develop an holistic policy on harm minimisation.

Global Emergency Care Committee (GECCo)

The College's commitment to Global Emergency Care was significantly enhanced with expanded staffing, bolstering the longstanding efforts of members. Work continues to focus in the Indo-Pacific region with commitment to collaborative capacity-building (rather than crisis response). Any queries for GEC can now be directed to the ACEM Global Health Desk.

Council of Education

Dr Barry Gunn, Chair

This year the Council of Education has continued to focus on the review of the FACEM Curriculum and FACEM Training Program, with the aim of implementing a revised program and curriculum from the 2021 training year.

This work has been ongoing since 2017 and has occurred under the auspices of the *FACEM Training Program Review Working Group* and the *FACEM Curriculum Review Working Group*. During the process, there has been consultation with committees that report to both COE and CAPP. These committees have helped define the curriculum learning outcomes that trainees will need to achieve in each of the four stages of training of the proposed new training program, along with articulating the methods of assessment for each.

While undertaking the review of the training program, it became apparent that there was also a need to review the current system of accrediting Emergency Departments for FACEM training. The *FACEM Training Program Accredited Site Classification and Delineation Review Working Group* has proposed a revised process to simplify the current five tiers of accreditation to two tiers.

All proposed changes to the structure of the Curriculum Framework, the FACEM Training Program and the system of site accreditation were subsequently sent out to FACEMs, current trainees and external stakeholders for feedback. The working groups will amend the proposals according to feedback received from this consultation. COE will then undertake a final review before approving the revised ACEM Curriculum Framework, FACEM Training Program and FACEM Training Program Site Accreditation System. The ACEM Board will then consider the regulations that will be required for a 2021 training year implementation.

In response to feedback from FACEMs and trainees regarding the current (introduced in 2015) In-Training Assessment (ITA) and Workplace-Based Assessment (WBA) forms, changes have recently been under consideration. During the second half of 2018, a revised ITA form was introduced and in 2019 the *FACEM WBA Review Working Group*, headed by Associate Professor Gabriel Lau, Deputy Censor-in-Chief, reviewed and redesigned the WBA forms. Positive feedback on the new

forms has been received, with further minor enhancements suggested. It is intended that the new forms will be implemented for the commencement of the 2020 training year, following approval by COE.



During 2019, video recording of the Fellowship Clinical Examination (OSCE) commenced.

The circumstances in which these video recordings can be used are outlined in *Policy and Procedure for the Recording of Stations at the Fellowship Clinical Examination (OSCE)* (TA689). Further information regarding this is provided elsewhere in the Annual Report.

The ACEM OSCE Preparation Program, which began in late 2018, has continued into 2019, with a program held in May and a second scheduled for November. The program is now open to any Advanced trainee who is preparing to sit the OSCE. Preference is given to trainees who have had at least one unsuccessful OSCE attempt. Also held in May 2019 was a Resilient Leadership Workshop, hosted by Professor Jill Klein from the University of Melbourne. This course was open to both trainees and FACEMs, and covered clinical decision making, leadership, emotional intelligence and resilience. A further program to assist trainees preparing to sit the OSCE, *Owning Your OSCE*, by Tony Sloman was presented in June 2019.

Recognising the growth in the number of trainees and Fellows in the Northern Territory and the Australian Capital Territory, with guidance from the Board, the membership of COE was expanded with Regional Censors and Regional Deputy Censors appointed for these jurisdictions.

I would like to thank Gabriel Lau (Deputy Censor-in-Chief), the Regional Censors and Regional Deputy Censors and all the ACEM Members, Trainees and Community Representatives who serve on COE and its entities for all their support and work over the year. In particular, as COE entities will undergo a spill, I would like to thank all the outgoing members of the COE entities for their significant contribution to the ACEM. Finally, I would like to thank the ACEM staff for their tireless work for COE and its entities.



Advancing education

1. Education assessment

1.1 Assessments / Examinations

During the 2018 - 2019 financial year the College has continued to enhance the quality and structure of the Primary and Fellowship examinations and its support to candidates, acting on recommendations from sources such as the College's Expert Advisory Group (EAG) Action Plan (2018) and the AMC Accreditation Report (2018) to ensure the assessments continue to reflect best practice in the conduct of specialist medical college examinations.

At the start of 2019 a new examinations calendar was implemented to further decouple both Primary and Fellowship written and oral examinations. This change has increased the time between examinations that occur in sequence, such as the Fellowship Written and Clinical examinations, benefiting trainees who are candidates in successive examination sittings.

Fellowship Written Examinations

Throughout 2019, trialling of a new online platform for the Short Answer Question (SAQ) component of the Fellowship Written Examination has continued and full implementation is planned for May 2020. The platform enables candidates to provide editable and more legible SAQ answers in a timely manner, and examiners to access, review and score candidate answers online, within a single scheduled day.

Every candidate's answer to a question is independently marked by at least two examiners. As an SAQ examination comprises at least 27 questions, the marking processes ensure that a minimum of 54 examiners contribute to the final score in the examination for each candidate.

To ensure that the Fellowship Examination SCQ question bank continues to grow in quantity and quality, MCQ writing and review workshops were again offered in all regions throughout 2019, giving Fellows and trainees the opportunity to contribute to the work of the College in this way.

Fellowship Clinical Examination (OSCE)

The College has continued to seek feedback from candidates about the conduct of the OSCE, and since the 2018.1 OSCE has provided a College response to the feedback and a commitment to make improvements where these are indicated.

A focus in the first half of 2019 has been to consolidate and build on the enhancements to the Fellowship OSCE

that were initiated in the previous two years, including the implementation of a two-day, 12-station OSCE, comprehensive examiner and role player briefings, station workshopping and calibration, and ensuring that a candidate's performance in each station is independently assessed by at least two examiners.

Further enhancements have included the implementation of a system of electronically generated feedback for unsuccessful candidates that is related to the assessed domain criteria, providing candidates with clear, specific and relevant feedback in a timely manner. All candidates, whether successful at the examination or not, are notified of any 'Area of Concern' reports they receive concerning their actions in a station that in real life would seriously affect the health outcomes of a patient.

In OSCE 2019.1, held in March 2019, the videorecording of all OSCE stations was implemented, in accordance with the *Policy and Procedure for the Recording of Stations at the Fellowship Clinical Examination (OSCE)* (TA689). Under the policy, five uses of the recordings are allowable, those being for:

- training purposes;
- quality assurance and continuous improvement;
- reviewing the results of borderline candidates;
- candidate feedback on their third unsuccessful attempt; and
- in the event of a candidate complaint about the conduct of a station.

The College was pleased to implement recording of all OSCE stations from the 2019.1 OSCE under the applicable policy. Since the implementation of OSCE station recording in 2019, candidates who are unsuccessful on three or more occasions were afforded the opportunity to view their OSCE stations for their own feedback purposes, ahead of their final attempt at the examination. These reviews were conducted in the company of a candidate support person, an ACEM examiner and a staff administrator and will continue to be offered to eligible trainees pursuant to College policy.

Support for Trainees Preparing for the Fellowship Clinical Examination

In late 2018 the College presented a Pilot OSCE Preparation Program in response to the EAG recommendation that the College consider providing more assistance to trainees preparing to sit the OSCE following previous unsuccessful attempts. The program covered OSCE marking, standard setting, key resources,

examination psychology, the key things that can make a difference for a successful attempt, an examiner perspective on approaching the OSCE, an OSCE station demonstration and OSCE station role-playing in small groups. Two further OSCE Preparation Program programs have been held to date and it is planned the College will continue to offer the program bi-annually to all candidates preparing to sit the OSCE.

New resources were added to the Fellowship Examination Resources online, including procedures to support the OSCE processes, such as examiner and role-player recruitment, determining the minimal competence criteria, for standard setting, and feedback to/from candidates and examiners. The 'myth-busting' brochure, *OSCE Facts and FAQs* was published in 2019 and four SAQ questions from the 2019.1 Fellowship Written Examination and two OSCE stations from the 2019.1 OSCE were also released.

The Primary Examinations

Following the implementation in 2018 of a new model for the scoring of the Primary Viva Examination, a further modification, incorporating a seven-point marking scale (0-6), was introduced in 2019 to assist examiners to identify a 'Just at Standard' candidate by having an obvious mid-point.

Although the Primary Written Examination has been held online for many years without significant incident, the College released the document, Examination Contingency Plans in 2019, in an effort to allay trainee fears of a technological incident that might affect their ability to complete their examination.

Examiners

Following the successful pilot of an examiner training workshop held in late 2018, more than 50 examiners attended training workshops in the first half of 2019. The program included sessions on standard setting, an OSCE calibration exercise, unconscious bias and cultural competency. The College expects that all examiners regularly attend a workshop to maintain their currency in examination-related matters.

1.2 Specialist International Medical Graduates (SIMGs)

Within the SIMG area, a continuous improvement agenda has resulted in several significant enhancements to the processes for SIMG assessment.

Additional Assessment Strategy for SIMGs

A Multi-Source Feedback (MSF) requirement was implemented on 1 March 2019 for all SIMGs on the assessment pathway who are approaching eligibility for election to Fellowship. The requirement allows input on a SIMG's performance from a wider range of colleagues than was previously possible and responded to one of the College's reaccreditation conditions from the Australian Medical Council (AMC) Accreditation Report 2018.

Further Enhancements

The SIMG Unit continued to review applicant feedback from interviews and to implement improvements to interview processes identified through this feedback. such as informing applicants of the names of their interview panel members.

An online system to record and report a SIMG's progress through the required assessments of their pathway was implemented in May 2019 also, in accordance with a recommendation of the 2018 AMC Accreditation Report.

SIMG Assessor Training

During 2018 and 2019 all panel assessors, including members of the SIMG Assessment Committee and the three appointed Community Representatives, attended workshops on the SIMG assessment process and interview techniques, in accordance with the requirements of the *MBA Good Practice Guidelines for the SIMG Assessment Process*.

In February 2019 members of the SIMG Assessment Committee participated in a calibration workshop on interview outcome assessments and later in filming mock assessment interviews to support the Assessor Online Training Module, which was subsequently launched in July 2019.

2. Training

2.1 FACEM Training Program

Selection into Training

The Selection into Training processes and scoring methods used in 2018 were reviewed following the completion of the 2018 round of selection. Adjustments and revisions were subsequently made and implemented for the 2019 selection process.

Information regarding the application process, decision-making process, selection domains and criteria are publicly available to prospective trainees on the ACEM website. Feedback provided to unsuccessful prospective trainees aligns with the published selection domains.



Trainee Support

In October 2018 a Parental Leave Policy for trainees was introduced. This provides the opportunity for trainees to have their training time and interruption to training allowance extended for the purposes of, or due to previous, parental leave. The policy also provides the opportunity for trainees returning from parental leave to return to work for a period of time, without the need to complete assessments.

A new resource on identifying, assessing and managing a trainee in difficulty and outlining a trainee support pathway was developed and published for DEMTs, aligning with the *Supporting a Trainee in Difficulty Policy* (TA545).

Several other new initiatives were also developed to assist and support trainees. These include:

- orientation phone calls to all new trainees;
- Trainee Support team members contacting trainees approaching their due dates to discuss their plans for completion of the program;
- increased notifications and reminders to trainees to consider their training plans to ensure completion within the time limits and compliance with WBA requirements; and
- phone calls to all trainees who are required to complete a period of remediation to discuss their requirements and plans.

DEMT Resources and Management

The College introduced an orientation phone call to all new DEMTs (to assist them in starting their role).

DEMT workshops continued to be conducted across Australia and New Zealand, providing updates on ACEM activities and examinations, as well as sessions on delivering feedback. DEMT workshops were delivered in Sydney, Melbourne and Perth in the past year, and attended by almost 100 DEMTs.

Joint Paediatric Emergency Medicine (PEM)

A Joint PEM Trainee Progression Review Panel was established to review the assessment requirements of the approximately 130 trainees registered with ACEM who are completing the Joint PEM program.

A twice-annual Joint PEM Newsletter was introduced to keep trainees up to date with all PEM-training related matters, with improved functionality of the My ACEM Portal having also been introduced for Joint PEM trainees.

2.2 Emergency Medicine Diploma & Emergency Medicine Certificate

Direct Entry into EMD

COE approved direct Entry into the Emergency Medicine Diploma for Fellows of the Royal Australian College of General Practitioners (RACGP) and Fellows of the Australian College of Rural & Remote Medicine (ACRRM), or medical practitioners who have been in active clinical experience in an Emergency Department equivalent to two years full-time equivalent (FTE) in the past five years, provided they meet a series of requirements. The College anticipates that this new entry pathway will improve accessibility and lead to an increase in enrolment numbers in the Diploma.

Program Review

The College has implemented an EMC and EMD Review Working Group involving representatives from ACEM, RACGP, ACRRM and the Rural Medicine Division of the Royal New Zealand College of General Practitioners (RNZCGP) to examine the purpose, structure and content of the EMD and EMD programs. Part of the aim of the review is to maximise synergies between ACEM programs and the development of rural generalist programs from other Colleges, as well as maximise the utility for potential workforce developments and initiatives.

3. Accreditation, continuing professional development and national program

3.1 Accreditation

The Accreditation Subcommittee continued to ensure the quality of trainee supervision by accrediting hospital EDs (sites) in Australia and New Zealand to deliver the FACEM Training Program.

Accreditation is reviewed every five years, or sooner if there are issues during the site's accreditation.

Hospitals applied for varying levels of accreditation, ranging from special skills placements through to 24-month trainee posts.

In 2018 there were 59 regular site accreditation reviews and six 'focused' reviews.

The accreditation standards continue to be periodically updated.

3.2 Continuing professional development

As at 30 June 2019 the College had just under 3,000 members enrolled in its two Continuing Professional Development (CPD) programs; the Specialist CPD Program and the Non-Specialist CPD program.

Much of this year's activity has involved consulting and planning for the imminent introduction of revised CPD Registration Standards and Recertification requirements by both the Medical Board of Australia (MBA) and the Medical Council of New Zealand (MCNZ).

New CPD tools to support the revised Standards have been developed, including a goal setting and reflection guide and a 'strategic conversation' pro-forma to address the enhanced requirements for formative evaluation of professional development activities.

A selection of FACEMs participated in the trial of a commercially available multisource feedback (MSF) tools, which led to recommendations on incorporating MSF into performance review.

Foundation work was undertaken for the creation or adoption of Patient Reported Outcome Measures for ED (PROM-ED), which supports the measuring outcomes domain of the new CPD Standard.

The CPD Unit continued to maintain and update content for the Best of Web Emergency Medicine online resource, with each resource peer reviewed by CPD Committee members as part of the publication process.

Automatic recording of ACEM-accredited CPD activities has been well received by members and has been expanded over the year.

The introduction of a compulsory cultural competency activity commenced at the start of the 2019 CPD year and has been completed by all COE Entity members. This activity is now a component of the ACEM CPD three-year cycle and will be subject to audit at the end of each cycle.

3.3 National program

Through funding from the Australian Government, the National Program continued to deliver emergency medicine education to improve access to quality emergency care in rural, regional and remote areas.

There are six components to the National Program:

- Emergency Medicine Education and Training Program;
- Specialist Training Placements and Support Program;
- Tasmanian Project;
- Integrated Rural Training Pipeline;
- Emergency Department Private Sector Clinical Supervision Program; and
- support projects.

The Emergency Medicine Education and Training Program

The Emergency Medicine Education and Training (EMET) Program continued to support regional, rural and remote emergency departments and urgent care services. This support came from both the training and supervision of doctors and other health professionals who are not specifically trained in emergency medical care. EMET funding enables FACEMs to deliver supervision and training of EMC/D trainees, emergency medicine training sessions, and on-the-floor teaching and supervision to build capacity in smaller emergency departments.

This year more than 400 sites participated in EMET training.

Specialist Training Placements and Support Program

The Specialist Training Placements and Support Program (STPSP) seeks to extend vocational training for specialist registrars into settings outside traditional metropolitan teaching hospitals; this includes regional, rural and remote areas, as well as private facilities. ACEM was funded for 77 FTE positions in 2018, and 57 FTE positions in 2019.

4. Education program development

4.1 Education development

ACEM Curriculum Framework and FACEM Training Program Reviews

Reviews of the ACEM Curriculum Framework and the FACEM Training Program have been significant activities during 2018 - 2019. In order to progress the scope of activity associated with this work, the College convened various working groups to review difference aspects of these projects. The ACEM Curriculum Framework Review Working Group has reviewed all curriculum content, and restructured the Curriculum Framework to best reflect the scope of and approach to practice in emergency medicine.

The revised Curriculum Framework specifically maps teaching and learning strategies, and assessment, to the curriculum content. It is envisaged this will provide trainees and FACEMs the guidance and support required to further optimise the FACEM training experience.

As part of the FACEM Training Program review, the FACEM Training Program Review Working Group recognised that an important and valuable component of the current FACEM Training Program is the flexibility with which training and assessment requirements may be met, and the opportunities to undertake training in medical disciplines outside the emergency department that compliment ED work and aid in the development of 'well-rounded' emergency medicine physicians. To that end, the Working Group has made every effort to ensure that any proposed revisions continue to accommodate this flexibility and pursuit of non-ED training, while ensuring that the integrity and rigour of training and assessment support the learning and development of future FACEMs capable of dealing with the dynamic and demanding nature of emergency medicine practice.

As a result of the two periods of consultation conducted in 2018, it became apparent that the existing system for the accreditation of emergency departments as training sites also required review. The FACEM Training Program Site Accreditation and Delineation Review Working Group was constituted to undertake a review of this system, with a view to simplifying the current five-tier system and reduce the barriers to undertaking FACEM training in rural and regional emergency departments.

Stakeholder feedback has been sought by all working groups throughout the review processes and has informed the proposed outcomes for each group. It is envisaged that the revised FACEM Curriculum Framework and FACEM Training Program will be implemented for the commencement of the 2021 training year.

Diploma in Pre-hospital and Retrieval Medicine

In the period covered by this report the College made significant progress in the development of the Diploma in Pre-Hospital and Retrieval Medicine (DipPHRM). Evolving from the previous ACEM Pre-Hospital and Retrieval Committee, much of the developmental work was

conducted under the Pre-Hospital and Retrieval Working Group. This Working Group comprised representatives from ACEM, ACRRM, the Australian and New Zealand College of Anesthetists (ANZCA) and the College of Intensive Care Medicine (CICM), and was established in 2017 to coordinate the development of each aspect of the Diploma. In anticipation of implementation in February 2020, the following documents were produced:

- DipPHRM Curriculum;
- DipPHRM Workplace-based Assessment tools, including Multi-Source Feedback and Training Supervisor Reports;
- DipPHRM Accreditation Guidelines;
- DipPHRM CPD Requirements; and
- DipPHRM RPL Policy.

Education Development Projects

Other significant work undertaken by the ACEM Education Development Unit and relevant associated entities include:

- *Emergency Medicine Certificate and Diploma revision, development of Advanced Diploma* in collaboration with representatives from RACGP and ACRRM.
- *Fellowship Examination Question Development – Select Choice Questions*: delivery of workshops throughout Australia and New Zealand to support FACEMs writing questions, revision of existing questions, and addition of new questions to the question banks.
- *ED Ultrasound*: revision of existing credentialing guidelines and development of new guidelines for the provision of ultrasound services and training in the ED.
- *Aboriginal, Torres Strait Island, and Māori recruitment, engagement, and support of trainees and Fellows*: becoming a founding member of the Leaders in Indigenous Medical Education (LIME) Specialist College Network, presentation at LIME and AIDA conferences, yarn and korero with trainees and Fellows.

4.2 Education resources

The Educational Resources Unit has progressed significant pieces of work in online educational resources, online examinations and marking.

Within the online examinations and marking area, the second pilot of online completion and marking of the Fellowship Short Answer Question (SAQ) Examination was conducted in Melbourne and Sydney, with positive feedback received from both trainees and markers. Testing and successful delivery of the other online examinations included the FACEM training program Primary and Fellowship Multiple Choice Question (MCQ) and Select Choice Question (SCQ) written examinations and eight *Emergency Medicine Certificate* and *Emergency Medicine Diploma* examinations.



Ongoing updating of the content and functionality of existing online resources and modules continued through 2019, with the following new resources added to the Educational Resources website:

- Ultrasound resources, both ACEM-developed and external;
- SIMG Panel Assessor Training module, a bespoke module for new SIMG Panel Assessors
- Emergency Medicine Certificate, with eight new modules released;
- WBA Assessor Calibration videos, with four new videos developed;
- ACEM Core Values modules for Members, trainees and employees;
- Multiple resources added to the General EM Resources and Fellowship Examinations areas of the website; and
- Online areas for ACEM committees, working groups and faculty members.

Work was undertaken to enhance the reports related to the amount and type of use, and related feedback, of resources on the Educational Resources website. Figures and patterns of access of note at this time include:

- 12,856 users currently have access to the website;
- significantly increased use of the Educational Resources website in the last year. 124,214 sessions were recorded in the year between 1 October 2018 to 1 October 2019, compared to 102,875 sessions between 1 October 2017 to 1 October 2018;
- increased use preceding examinations, suggesting that the online resources are useful for trainees preparing for examinations;
- resources accessed from all over the world, although the majority of users are located in Australia and Aotearoa New Zealand; and
- increased access by external health professionals to the modules made available for them.

Faculty reports

Aotearoa New Zealand

2019 has seen development in two major areas of activity in the New Zealand Faculty, these being the launch of *Te Rautaki Manaaki Mana: Excellence in Emergency Care for Māori* and the Mental Health in Emergency Departments Summit.

Several members of the Manaaki Mana Rōpū (Steering Group) attended Te Ohu Rata o Aotearoa's Hui a Tau in January to help ACEM promote Emergency Medicine to students. The ACEM Foundation sponsored this conference.

April saw the launch of the Manaaki Mana strategy at the Winter Symposium – Te Wero – in Rotorua. The Manaaki Mana Steering Group further presented to the Te ORA/ Medical Council of New Zealand Cultural Competence Symposium in June. ACEM acknowledges the hard work and dedication of the group members.

ACEM hosted a Mental Health in the Emergency Department Summit in Wellington in June. The Summit brought together FACEMs and senior nurses from around New Zealand with speakers from the New Zealand Police, St John Ambulance, community mental health organisations and the Director General of Mental Health from the Ministry of Health. The Summit resulted in a communiqué to the health sector to provide increased visibility of this issue.

Faculty Board members:

André Cromhout (Chair)

Stuart Barrington-Onslow
John Bonning
Scott Boyes
Devin Faragasso
Mark Hussey
Harriet Jennings
Natasha McKay
Derek Sage

Australian Capital Territory

The ACT Faculty continued to tackle key issues effecting emergency medicine, with Faculty meetings well attended during the year.

Dr Suzanne Smallbane (ACT Chair) and departmental directors met with the Minister for Health and Minister for Mental Health to discuss the concerns of the Faculty. These included the strategy around retaining a senior medical workforce (G23), high levels of mental

health access block and issues affecting the delivery of emergency medical services, including access block and overcrowding, the need for increased funding for nursing recruitment, and the high levels of violence in the ED.

The Faculty made considerable progress towards developing a good working relationship with the Minister for Health and Minister for Mental Health, and will continue to advocate on key issues effecting emergency medicine in the ACT.

A commitment was provided by the previous Minister for Health to report 24-hour stays in the ED and it is hoped that the new Minister for Health in the ACT will continue to show interest in high levels of access block.

The ACT Faculty has constituted a conference committee, which is making excellent progress in planning the 2020 ACEM ASM, the theme of which is 'Under Pressure'.

Faculty Board members:

Suzanne Smallbane (Chair)

David Banfield
Joanne Crogan
Drew Richardson
Andrée Salter

New South Wales

The meetings of the NSW Faculty were used to discuss concerns around workforce, G23 review and the re-accreditation of a number of sites.

Concerns were addressed with NSW Health around pill testing and the deployment of NSW emergency physicians to dance festivals; the Faculty with College President, Simon Judkins, met with NSW Health representatives to discuss the issue. There has been a clear intention to deploy teams comprised of emergency doctors and nurses from EDs without impacting the roster or performance of the ED from which the team originated. There was unanimous agreement in key areas. The NSW Faculty Deputy Chair, John Kennedy, attended a briefing on the NSW Health response to keeping music festivals safer in June 2019.

Following on from the interim report by Peter Anderson into the safety of staff, patients and visitors in NSW public hospitals, additional strategies have been identified to continue to improve security in hospitals. This work commenced in February 2019 and was further highlighted when Simon Judkins raised a number of these key concerns in a media statement published on the ACEM website.

ACEM provided a submission to the NSW Special Commission Inquiry into the drug 'Ice' in May 2019.

Faculty Board members:

Christopher Trethewey (Chair)

Karen Coss
John Kennedy
Gabriel Lau
Nicholas Lelos
Sally McCarthy
Hugh Reid
Clare Skinner
Miguel Taliana
Alan Tankel
Gina Watkins
Jules Willcocks

Northern Territory

The NT Faculty focused its attention on alcohol harm reduction and mental health services. ACEM wrote to the Health Minister welcoming the introduction of measures to restrict both supply and demand of alcohol across Australia and commending the Northern Territory Government for implementing the comprehensive *Alcohol Harm Minimisation Action Plan 2018-2019* and recently passing the *Liquor Bill 2019*. The Faculty was pleased to note that as a direct result of these measures, alcohol-related ED presentations reduced by 25% between December 2017 and December 2018.

There was a collapse of forensic mental health services in the Northern Territory, placing an additional workload on EDs to assess forensic mental health patients and keep them in the department until they could be seen by psychiatric staff. Clarification was sought regarding the Northern Territory Government's plan for forensic mental health services and how the demand for such services outside Darwin will be met.

Faculty Board members:

Stephen Gourley (Chair)

Rebecca Day
Didier Palmer
Shane Tan
Danika Thiemt
Tracy Walczynski

Queensland

The Queensland Autumn Symposium was held in May with close to 200 members and trainees in attendance. The Faculty meeting took place at the Symposium, where colleagues discussed pressing concerns around access block, overcrowding and ambulance rapid offloading.

ACEM was involved in talks with Queensland Health over the rapid offloading process, which has been implemented by Queensland Ambulance Service (QAS) and Queensland Health Metro South, Gold Coast and

Sunshine Coast Hospital and Health Services. One of the major concerns was that Emergency Doctors and ACEM were not consulted before this policy was adopted. The ongoing concern is that inappropriate patients are being offloaded into wheelchairs, chairs and corridor trolleys, which has led to patient harm. There are continued efforts to maintain a strong professional working relationship with the QAS and Hospital and Health Services and to resolve practices that risk patient safety and patient care.

The College and the Minister met in April to discuss common ED issues across the state, including overcrowding, access block, patient safety and staff safety. The advocacy by the College focused on the Metro South area, which experiences an alarming rate of mental health access block.

Faculty Board members:

Kim Hansen (Chair)

Malcolm Cooper
Luke Lawton
Elizabeth Mowatt
Darren Powrie
Dominik Rutz
Niall Small
Sharyn Smith
Andrew Spiller

South Australia

The SA Faculty Board meeting and the Faculty meetings have included discussions around issues including access block/mental health access block, workforce and access to beds, and shortages in attracting trainees and retaining FACEMs. The meetings with the Health Minister resulted in a clear push by SA EDs in relation to access block. Issues such as ambulance ramping and overcrowding were highlighted.

There was a Parliamentary Hearing on 9 April related to bullying and fatigue that explored a range of issues that affect the Faculty and the health sector, including: increased demand, staffing shortages, access block, overcrowding, inadequate number and type of beds, hospital efficiency, targets (financial/performance/time-based) and how these affect day-to-day clinical work/morale of clinicians at the coal face.

As well as the Parliamentary Committee hearing, there were also a number of opportunities that the Faculty used to raise the issues they face in providing care to patients. This included media coverage through a number of platforms, including print, digital, radio and television (April 2019).

ACEM prepared a submission to the Commission on Excellence and Innovation in Health on advice from the SA Faculty Board. The Faculty also provided feedback on a consultation on the Draft Rural Health Medical Workforce Plan for SA Health.

The SA Faculty introduced Education Networking Evenings, which have been highly successful in maintaining high standards in emergency medicine healthcare and fostering a collaborative environment with health professionals.

Faculty Board members:

Thiruvencatam Govindan (Chair)

Peter Bruce
Michael Edmonds
Alistair Fergusson
Anit Manudhane
Mark Morphet
Thomas Soulsby
Amy Wilson

Tasmania

The main focus for the Tasmania Faculty has been access block. The Tasmanian Audit Office (TAO) released its *Performance of Tasmania's Four Major Hospitals in the Delivery of Emergency Department Services* report in May 2019. It found a deteriorating ED system caused by capacity constraints combined with longstanding cultural and process weaknesses within the four hospitals that are impeding effective discharge planning, bed management and coordination between EDs and inpatient areas.

The Tasmanian Health Minister invited stakeholders across Royal Hobart Hospital and external stakeholders, including Tasmanian Audit Office and ACEM representatives, to participate in a roundtable discussion in Hobart in June. The focus of the meeting was to identify and implement solutions across the hospital to improve patient care, acknowledging the role of EDs and inpatient services in achieving this outcome. An action plan was developed, grouping the actions into immediate, short term, medium term and long term, with public updates to be provided at the end of each quarter.

Faculty Board Members:

Marielle Ruigrok (Chair)

Juan Ascencio-Lane
Racy Chan
Brian Doyle
Kate Field
Lucy Reed
Viet Tran

Victoria

Advice was provided to the Department of Health and Human Services (DHHS) on its review/consultation on the *draft Urgent, Emergency and Trauma Care Capability Framework*, addressing the minimum competency requirements for the medical workforce, and the time-based target for care in the ED.

A further submission was made to the Royal Commission into Mental Health Victoria. It noted that the models of care used in EDs should draw on contemporary clinical practice for managing emergency mental health care and, to achieve this outcome, state and federal governments need to work cooperatively to agree on a vision for a sustainably funded, as well as an integrated mental health system that supports timely, coordinated and multidisciplinary management of need in children, adolescents and adults.

Faculty Board members:

Shyaman Menon (Chair)

Michael Ben-Meir
George Braitberg
Suzanne Doherty
Jonathan Dowling
Barry Gunn
Simon Judkins
Sara MacKenzie
Ed Oakley
Anoushka Perera
Chris Roubal
Andrew Tagg
Swaroop Valluri

Western Australia

The WA Faculty was active in advocating on behalf of trainees to find a solution to the inequity experienced by trainees in the FACEM Training Program during placements undertaken in hospitals that are not included as part of the AMA Metropolitan Health Agreement.

The Faculty is working together with ACEM Policy Officers to provide a written submission to the WA Department of Health's climate change and health inquiry (Climate Health WA Inquiry), under the new *Public Health Act 2016*, following a recommendation of the Sustainable Health Review.

Further advocacy work was undertaken in relation to reporting 24-hour waits in the ED to the Health Minister.

Faculty Board members:

Peter Allely (Chair)

Yusuf Mamoojee
Tracey McCosh
Karen McKenna
David Mountain
Yusuf Nagree
Harry Patterson
Lynda Vine
Ioana Vlad

ACEM Foundation

Dr Simon Judkins, Chair

The ACEM Foundation contributes philanthropically toward three pillars: fostering emergency medicine research, encouraging and supporting Aboriginal, Torres Strait Islander and Māori doctors in undertaking emergency medicine training, and building the capacity of emergency medicine programs in developing countries.*

Emergency Medicine Research

The **Morson Taylor Research Grant** serves to support a high-quality research project in emergency medicine being undertaken by an ACEM Fellow.

The **Al Spilman Early Career Researcher Grant** assists a Fellow early in their research career or trainee developing and enhancing their research skills and experience.

The **John Gilroy Potts Award** is made to the author of an article published in a refereed journal, the content of which has made a significant contribution to emergency medicine. It is an award made in the pursuit of truth, knowledge, and wisdom by physicians in emergency medicine.

The **Edward Brentnall Award** is named in recognition of the outstanding contribution made by Foundation Fellow Dr Edward Brentnall to the College. The award is announced annually for an article published in a refereed journal, relating to public health or disaster medicine.

Support for Indigenous Medical Practitioners

THE LOWITJA INSTITUTE

The 2019 Lowitja Institute Health and Wellbeing Conference was held in Darwin in June 2019. ACEM provided sponsorship as an Exhibitor at a cost of \$2,800 and a Conference Attendance Support Sponsor at a cost of \$2,000.



TE ORA (Māori Medical Practitioners Association)

The **Hui ā Tau & Scientific Conference 2019** provides an opportunity to celebrate achievements in Māori health and promote Māori scientific health research, knowledge and information exchange. The ACEM Foundation provided \$10,000 in sponsorship to the Hui-ā-Tau and Scientific Conference, held in January 2019.

The **Joseph Epstein Scholarship** is named in recognition of Foundation Fellow and second ACEM President Associate Professor Joseph Epstein. It aims to encourage and support Aboriginal, Torres Strait Islander and Māori doctors undertaking Advanced Training in the FACEM Training Program.

The **2018 ACEM Foundation Lecture** was presented by Professor Tom Calma AO, an Aboriginal Elder from the Kungarakan tribal group, a member of the Iwaidja tribal group and Race Discrimination Commissioner from 2004 to 2009. His presentation on Indigenous affairs and health at a community and national level was informative and well received.

International Emergency Medicine

The **International Development Fund Grant** aims to promote the development of emergency care in the developing world through teaching, training and capacity building.

The **ACEM Foundation International Scholarship** is awarded to doctors and other health professionals from developing nations to support their attendance at the ACEM ASM, where they also present during a session in the scientific program to increase awareness and support for emergency medicine in developing countries.

*The full list of all ACEM Foundation Award and Prize recipients is located on page 26.

Diversity and inclusion

ACEM Core Values

The College is currently finalising a set of new organisational values, which are intended to represent all members, trainees and staff. The values replace existing ACEM staff values and arise from a recommendation in the report of the Discrimination, Bullying & Harassment Project Working Group to:

- Establish a set of core values that clearly define expectations of Fellows, trainees and staff. This will include a broad consultation process and dissemination and incorporation of the core values into all aspects of College business.
- Develop and conduct a long-term campaign to communicate and demonstrate ACEM's core values and commitment to leadership and patient safety.

A consultation was conducted with members, trainees and staff in late 2018 and early into 2019. The consultation sought feedback on what values were perceived to best describe the culture ACEM needs to create and maintain to deliver excellence.

This work is continuing to be progressed by the Diversity and Inclusion Steering Group, which is currently reviewing the values. Following consideration by the ACEM Board, the final ACEM core values will be announced and activities undertaken to embed the values into the day-to-day activities and life of College staff, members and trainees.

Advancing Women in Emergency Section

In late 2018 the College approved the establishment of a new section (Advancing Women in Emergency; AWE) to promote and support female leaders in the College and within clinical practice, hospitals and health systems. The section opened to members from late December and now has more than 200 members, mostly women.

In April, five FACEMs were elected by their Section peers as the AWE Executive, with a New Zealand appointment to the Executive made in May 2019.

The Executive comprises:

- Suzi Hamilton.
- Kim Hansen
- Belinda Hibble

- Kimberly Humphrey
- Jenny Jamieson
- Clare Skinner

The Section intends to facilitate networking and mentoring opportunities for women working in emergency medicine, as well as advocate for issues that specifically affect female members of the College, in order to inform development of College policy and practice.

Constitution change

In early June two special resolutions passed to enact changes to the ACEM Constitution.

The resolutions were intended to enable changes that would reduce barriers to participation on the ACEM Board. The changes will see the appointment of two FACEMs from the general membership and a community representative to the ACEM Board.

The vote on special resolutions was the culmination of more than a year's worth of work to discover what members and trainees considered to be perceived barriers to participation in College activities and diversity in the membership of the ACEM Board and College Councils. It responded to concerns expressed by members and trainees in a 2018 consultation that barriers existed to participation on ACEM's Board (particularly for women and those living and working in rural, regional and remote areas) and that the diversity on the Board did not appropriately represent the College's membership.

All Fellows were eligible to vote on the two resolutions that encompassed revisions to the constitution that responded to the consultation feedback and sought to enable growth in the College.

Across 30 days, more than 900 Fellows voted to pass the two special resolutions, with changes in the Constitution effective from 4 June 2019.

Activities to make new appointments to the Board were then progressed.

2019 financial report – overview

Information contained in this section has been summarised from the College’s full Financial Report, which is available on the ACEM website.

In the 2019 financial year the focus of the College continued to be support of emergency medicine training, assessment, professional development, advocacy on behalf of members and publication of general practice standards.

The net result of the College for the year ending 30 June 2019 was a deficit of \$276,438. The result was primarily driven by the adoption of new accounting standards AASB 15 and AASB 1058, which changed the manner and timing of income recognition for Fellow Application and Training Registration Fees.

The College’s financial position remains sound with net assets of \$17,294,798 at the end of the financial year, allowing operations and capital investments to be fully self-funded by retained earnings.

The College’s investment portfolios with JB Were Wealth Managers continued to perform well with a return on investment of approximately 12% over the year. In light of this strong performance, particularly in comparison with interest rates offered by banking institutions, a further investment of \$1.2 million was made into the ACEM investment portfolio and a further \$813,000 into the ACEM Foundation portfolio. As at 30 June 2019 \$5.85 million was held in the ACEM portfolio and \$1.77 million in the ACEM Foundation portfolio. The College takes a conservative approach to investment, preferring a long-term strategy to achieve growth, while ensuring the preservation of funds.

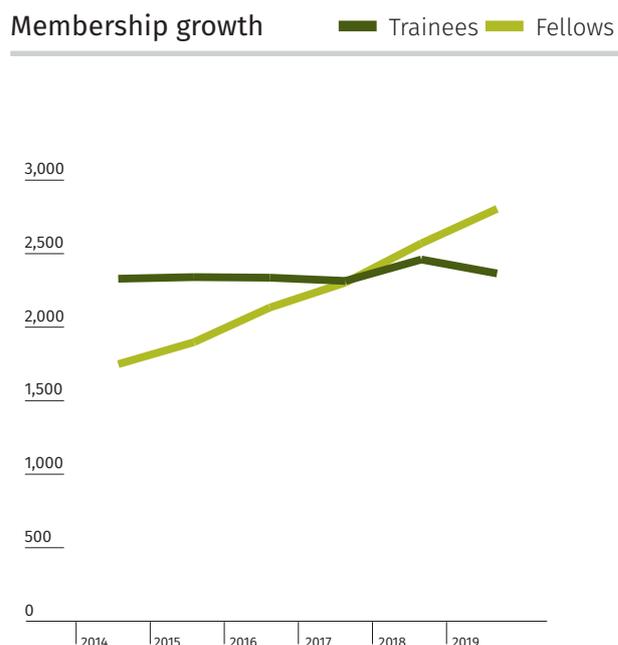
Capital expenditure on the enhancement of IT infrastructure continued with a total investment of \$744,000 into further development and improvement of existing systems to support our members and trainees. There was also additional expenditure on revisions to Emergency Medicine Certificate and Emergency Medicine Diploma modules and to the ACEM website refresh project.

The College is pleased to note that DoH’s “Specialist Training Program: Health Workforce Program” funding agreement was extended until 2021. The initiatives supported through this funding include Specialist Training Placements and Support, Emergency Medicine Education and Training Program, Integrated Rural Training Pipeline initiative, Training More Specialist Doctors in Tasmania measure, and Emergency Department Private Sector Clinical Supervision. In the 2019 financial year, DoH funding contributed \$24.78 million in revenue, which was offset with associated expenditure of \$23.88 million.

Revenue derived from membership fees, training fees, examinations and non-member fees were relatively consistent, with an average 4% increase recorded comparative to the previous year.

As can be seen by the below graph, the number of new trainees joining the College had plateaued in the preceding five years. The College continues to see a steady increase in the number of new Fellows (total number of Fellows 2019: 2,870 (2018: 2,612)).

Membership growth



Statement of income and expenditure and other comprehensive income

	2019 (\$)	2018 (\$)
Revenue	40,825,831	37,620,751
Audit, legal and consultancy expenses	(739,836)	(1,050,052)
Committee meeting expenses	(2,832,307)	(2,393,093)
Computer expenses	(377,465)	(469,760)
Depreciation and amortisation expenses	(1,461,499)	(1,025,854)
DoH direct project expenses	(23,887,898)	(21,057,913)
Employee benefits expenses	(8,797,883)	(7,775,483)
Examination expenses	(597,771)	(536,577)
Occupancy expenses	(191,159)	(256,821)
Office expenses	(1,109,320)	(964,303)
Publication expenses	(659,723)	(532,271)
Donations	(617)	(42,149)
Awards	(125,531)	(192,617)
Other expenses	(321,260)	(315,575)
Surplus for the year	(276,438)	(1,008,283)
Total comprehensive income for the year	(276,438)	1,008,283

Summary of Statement of Income and Expenditure and Other Comprehensive Income

The net loss of the College for the year ending 30 June 2019 was \$276,438 (2018: \$1,008,283 surplus).

Revenue: Total revenue for 2019 was \$40,825,831 and was comparable to the previous financial year, with a moderate 9% increase. Main revenue streams were DoH grant funding (61%), Fellowship fees (12%), trainee fees (10%) and examination fees (9%). There was a \$2.83 million increase in DoH grant funding from the 2018 financial year.

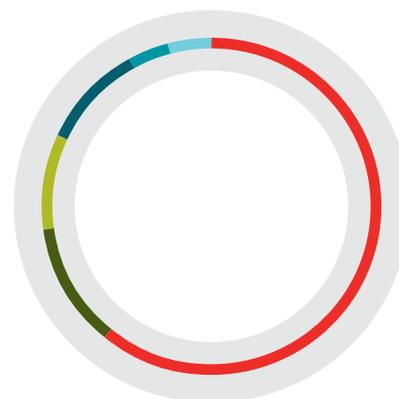
Expenditure: Total expenditure for 2019 was \$41,102,269. The increase compared to the previous year was mainly attributable to an overall increase in expenditure across the DoH project. Employee expenses increased due to recent growth in staff numbers to support College activities. Committee

meeting expenses increased in line with greater committee activity. There was also an increase in depreciation and amortisation due to the adoption of a higher rate of depreciation and amortisation.

The early adoption of AASB 15 and AASB 1058 resulted in lower than forecast revenue from Fellowship application fees, in that application fees are now required to be recognised over the life of membership. This adoption also resulted in lower than recognised Trainee-related fees, in that trainee entrance fees are now required to be recognised over the course of training. It should be noted these accounting changes impacted ACEM's Profit and Loss Statement and Balance Sheet only; there was no change to the Cash Flow Statement.

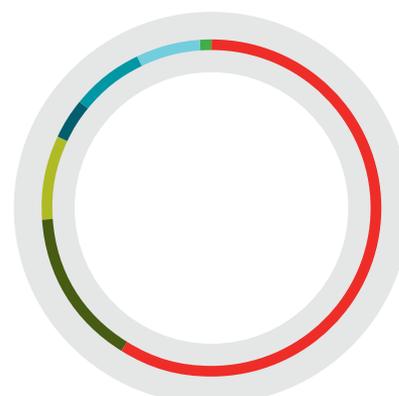
Allocation of revenue and expenditure

Revenue



Grants	61%
Fellowship fees	12%
Examination fees	9%
Trainee fees	10%
Miscellaneous income	4%
Other income	4%

Expenditure



Grants	59%
Education & Training	15%
Operations	8%
Communications & Engagement	4%
Policy & Research	7%
Governance	6%
ACEM Foundation	1%
IFEM	0%

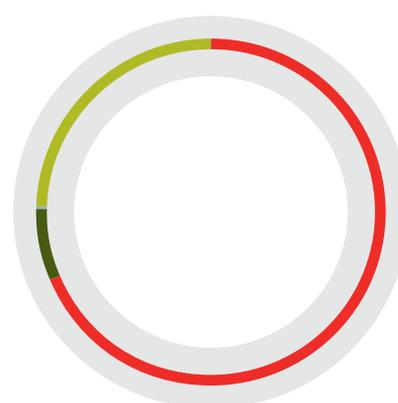
Statement of financial position

	2019 (\$)	2018 (\$)
Assets		
Current assets		
Cash and cash equivalents	13,722,275	13,312,303
Trade and other receivables	3,701,449	3,206,525
Other assets	363,067	457,708
Financial assets	11,966,169	11,532,845
Total current assets	29,752,960	28,509,381
Non current assets		
Trade and other receivables	2,000	2,000
Property, plant and equipment	7,398,152	7,628,522
Intangible assets	1,599,799	1,732,619
Total non-current assets	8,999,951	9,363,141
Total assets	38,752,911	37,872,522
Liabilities		
Current liabilities		
Trade and other payables	996,710	1,022,113
Other liabilities	19,542,250	14,920,079
Provisions	851,725	791,367
Total current liabilities	21,390,685	16,733,559
Non current liabilities		
Provisions	67,428	84,570
Total non-current liabilities	67,428	84,570
Total Liabilities	21,458,113	16,818,129
Net Assets	17,294,798	21,054,393
Equity		
Accumulated surpluses	17,294,798	21,054,393
Total equity	17,294,798	21,054,393

Assets: Total Assets at 30 June 2019 have increased approximately 2% comparative to the prior year. The slight increase in Cash and Cash Equivalents was due to a further investment of funds into Financial Assets: long-term cash deposits and the JB Were investment portfolio.

Liabilities: Total Liabilities have increased by approximately 28%. This is primarily impacted by the change in accounting standards AASB 15 and AASB 1058 that adversely impacted the recognition of revenue for Fellow Application and Training Registration Fees. Provisions have increased slightly in line with a growth in staff numbers. Trade and other payables have increased slightly, largely due to timing of supplier invoicing.

Breakdown of current assets



ACEM	69%
ACEM Foundation	7%
Faculties	< 1%
DOH	24%

Dr Tony Bottrall

September 1968 to March 2019

Emergency Medicine lost a leading light with Dr Bottrall's premature death earlier this year. A beloved colleague and passionate teacher at Alfred Health and Cabrini Health, Tony's illness was a devastating blow.

Tony's passions at work were leading-edge technology and educational engagement. As an early adopter of FOAMed, he established a robust Primary Examination website, notable for being freely accessible online at a time when most campuses guarded their intellectual property.

As DENT for more than ten years, Tony engaged with dozens of trainees from Alfred, Sandringham and Cabrini hospitals. Tony contributed to the College through the Primary and Fellowship Examination Committees and was a member of the Court of Examiners.

Tony brought a sense of fun to his work – even in the worst of times. He clearly loved emergency medicine.

Tony leaves behind a loving wife and family: Paula, Toby, Pippa and Luke.

– Dr James Taylor

Dr Peter Herron

June 1959 to 2018

At the very beginning of Emergency Medicine in Australasia, Peter was there. I met and joined him in 1988. We two were the only Registrars at the GCH when David Green took over as Director. They were exciting times.

Peter approached every patient with care and humility. He found what mattered to them and if possible made it happen. People were glad to have him as their doctor.

He was a father by the time I met him. Drownings were common back then on the Gold Coast. Regularly we received children undergoing CPR who had been pulled lifeless from the water; most did not survive, despite our best efforts. That upset everyone but none more than Peter. His paediatric resuscitations always went for longer, his grief afterwards always more palpable. He took it personally.

As a Fellow, Peter went on to a variety of posts in Emergency Medicine, Urgent Care and Primary Care. He never lost his empathy for people who had lost their way or whose lives had been derailed. I feel especially privileged for having worked with him. The world is a poorer place for his loss.

– Dr Michael Cameron

Dr Therese McBride

March 1963 to March 2019

Dr Terri McBride came to New Zealand from the United States in 2014. At that time she had already demonstrated her dedication to providing the best possible care for her patients, having started her career as a nurse, then a midwife, then a nurse practitioner before becoming a doctor and specialising in Emergency Medicine.

She relished the chance to work in New Zealand, where she could focus on patient care, rather than compliance and billing. Her family commented that her time in New Zealand seemed to be the happiest time in her life.

Terri settled in Whakatane, New Zealand, where she quickly demonstrated her excellent clinical skills. She was also well regarded by the nurses and junior doctors for her willingness to teach and the clarity of her teaching. Never forgetting her history in nursing, she developed and implemented a training program for Emergency Medicine clinical nurse specialists and nurse practitioners in Whakatane. Her legacy from that project will live on there. She became a Fellow of ACEM in 2018.

She is survived by her four children and two grandchildren. She will be missed.

– Dr Matthew Valentine

Dr Anna Nienaber

October 1968 to March 2019

Dr Anna Nienaber was surrounded by her family in South Africa and passed away peacefully. The Waikato Emergency Department would like to acknowledge Anna's contribution; she will be forever remembered by her Waikato emergency colleagues.

Anna came to New Zealand in 1998, and during her first few years there she worked in small rural hospitals, Thames and Taupo. In 2004, she became an ED trainee and moved to work at Waikato. In 2007, she spent some time doing jobs outside of ED, in both Rotorua and in Hawkes Bay. In 2008 she returned to Waikato Hospital.

Having obtained her specialist qualification, Anna spent a year working throughout Australia. But home is where the heart is, and the following year, in 2013, Anna returned to Hamilton, Waikato, and took up a consultant position in the department until her diagnosis of cancer in mid-2017.

Anna was a valuable member of the ED team; her fiery and cheeky nature brought countless unforgettable moments. Her kindness and amicable character touched the life of many friends and colleagues who worked alongside her.

Anna will be remembered as a clinician, colleague and as a friend; a vibrant, funny, courageous, resilient and adventurous individual who accepted what life gave her and made the most of the time that she had. Her sense of humour and compassion will be missed by all.

– Dr Wei Tan

Dr Colin Page

June 1965 to December 2018

Colin Page will be remembered as one of the giants of Queensland Emergency Medicine. He graduated from the University of Auckland in 1992 and soon moved to Queensland to progress his medical career. In 1999 he was awarded Fellowship of ACEM. For most of his career, he held a staff specialist position at the Princess Alexandra Hospital.

In 2007 he began his Toxicology training in Newcastle. He was Director of the Queensland Poisons Centre from 2009 and in 2014 established the first Toxicology service in Queensland. It is today one of the busiest toxicology units in the country.

Colin had a strong presence amongst the research community, with a total of 41 peer-reviewed publications.

He was a recipient of the John Gilroy Potts Award on several occasions. In 2014 he was awarded a Fellowship from the Queensland Emergency Medicine Research Foundation (QEMRF) to complete his PhD in Toxicology.

His colleagues will remember him as an inspirational mentor with a dedication and enthusiasm for his work like no other. His patients will remember him as a firm but kind clinician – someone who had a unique ability to restore dignity in the disenfranchised and dispossessed.

His family will remember him as a loving partner, a devoted father and a truly extraordinary human being.

– Dr Melanie Underwood

Dr Aleksejs Puris

July 1982 to August 2018

On Friday 31 August 2018, Dr Alex Puris, passed away peacefully at home, after a long and brave battle with cancer. He was a devoted husband to Oksana and loving father to two beautiful daughters – Dasha and Anastasia

He was an Advanced Trainee with ACEM, a remarkable man, gifted physician, trusted colleague and he was one of my closest friends. More than a hundred friends and colleagues attended Alex's funeral held on 10 September at the Seacliff Live Saving Club near his home. He did not have many years in his life, but he put a lot of life into his years.

He touched our hearts and inspired many, and it was a privilege to have known him. He was reassuring, gentle, accommodating, attentive, open hearted and modest. He was a man of few words but had a great sense of humour. His greatest skill and strength as a clinician was his kindness and empathy towards patients. Alex continued to work despite being in the terminal phase of his illness. His passion for his craft never ceased and he was driven by the desire to care for his family. He never complained, and bore his burden with unimaginable strength and bravery. We will miss Alex dearly. He was an inspiration to all who knew him and he will never be forgotten.

– Dr Megan Brooks

Dr Mark Smith

May 1950 to April 2019

Dr Mark Smith passed away peacefully surrounded by his loving family on 27 April 2019.

We don't wish to bore anyone with the usual "work anecdotes", but suffice to say, they ranged from the serious in nature to the outright hilarious. Varna had the honour to work with Mark in the ED of Frankston Hospital.

Many years ago Frankston Hospital had a fearful reputation on account of its woefully inadequate resources, despite great need. You didn't do a rotation at Frankston in those days, you did a tour of duty. It was Mark Smith and Jeff Wassertheil who singlehandedly created the modern Frankston ED.

With Mark you always got what you saw. He always meant what he said. When they invented the word "genuine", it was Mark they were talking about.

He had three great loves, his family, his hunting (but we tolerated him for this – as we were told he actually spent most of his time having a nap under a tree, rather than actually shooting anything) and his Teaching. We learnt three valuable life lessons from Mark – Respect your parents, Respect your Elders & Respect your Teachers. Mark was a much beloved parent, an Elder of our College, and a great Teacher - but Mark did not simply "deserve" respect – he earned it.

There are many varied pursuits that FACEMs follow upon graduation - but none are as profoundly influential as Teaching. Teaching creates our future FACEMs but it also creates our future Teachers and the ripple effect - or butterfly effect if you like - is endlessly fractal.

It has been said that something as insignificant as the flutter of a butterfly's wing in Brazil can ultimately result in a tornado on the other side of the world.

– Dr James Hayes and Dr Varna Amarasinghe

Dr Clement Teoh

November 1983 to 2019

We remember Dr Clement Teoh, who has sadly passed away. Clement worked at several hospitals in Western Australia as both an ED RMO and then as a Registrar. He was an advanced trainee with ACEM. In 2018 Clement moved to Sydney with his wife. He will always be remembered as a quiet achiever and a very hard worker with a mischievous sense of humour. He will be sadly missed by the many friends he made while working in Western Australia.

– Jeanne Beor, Dr Paul Hill and Dr Belinda Murphy

Due to spacing limitations of this hard copy version of the Year in Review, edits have been made to some of the Vale submissions. To read the full submissions please go to acem.org.au/vale19

Awards and Prizes

1 July 2018 – 30 June 2019

Joseph Epstein Prize

2018.2 Dr Jack Marjot

2019.1 Dr Kathryn Compson

The Buchanan Prize

2018.2 Dr Amy McAllister and Dr Colleen Taylor

2019.1 Dr Waseem Hassan, Dr Michael Humphreys and Dr Lisa Walker

Teaching Excellence Award

Dr Linas Dzuikas, Dr Bernard Foley, Dr John Kennedy and Dr Chris Nickson

2018 ACEM Medal

Dr Sue Ieraci and Dr Diane King

2018 Tom Hamilton Oration

Professor Diana Egerton-Warburton

2018 ACEM Foundation Conference Grant

Jeremy Rigney (Registered Nurse)

2018 Al Spilman Early Career Researcher Grant

Dr David McCutcheon for the paper titled 'Western Australian Illicit Substance Evaluation'.

2018 Edward Brentnall Award

Professor Diana Egerton-Warburton (lead author), Professor Daniel Fatovich (co-author) and Professor Drew Richardson (co-author) for the paper titled Alcohol-related harm in emergency departments: a prospective, multi-centre study.

2018 John Gilroy Potts Award

Dr Colin Page (lead author), Geoff Isbister (co-author), Katherine Isoardi (co-author), Stephen Rashford (co-author) and Frances Williamson (co-author) for the paper titled A Prospective Before and After Study of Droperidol for Pre-hospital Acute Behavioural Disturbance.

2018 Morson Taylor Research Grant

Dr Peter Jones for his study Paracetamol Alone versus combination Analgesia for Pain in the Emergency Department.

2018 International Development Fund

Dr Rob Mitchell for the project Mount Hagen Emergency Department Triage Development Project, and Dr Simon Craig for the project The Monash Children's Paediatric Emergency Medication Book: Developing resources for low and middle income countries.

2018 International Scholarship

Dr Madurangi Ariyasinghe (Sri Lanka), Dr Kago Thuto Mokute (Botswana), Dr Masum Poudel (Nepal), Dr Duncan Sengiromo (Papua New Guinea), Dr Htet Htet Win (Myanmar) and Dr Maung Wunna (Myanmar).

ACEM Service Award

Dr Sylvia Andrew-Starkey (QLD)

Dr Philip Aplin (SA)

Dr Neil Banham (WA)

Dr Michael Bastick (NSW)

Dr Paul Bowe (QLD)

Professor George Braitberg (VIC)

Dr Jennifer Brookes (VIC)

Dr Sheila Bryan (VIC)

Dr Adam Chan (NSW)

Dr Betty Chan (NSW)

Dr Matthew Chu (NSW)

Dr William Croker (NSW)

Dr Robert Day (NSW)

Dr Stephen Dunjey (WA)

Associate Professor Robert Dunn (SA)

Dr David Eddey (VIC)

Dr Mark Gillett (NSW)

Associate Professor David Green (QLD)

Dr Richard Harrod (VIC)

Associate Professor Wayne Hazell (QLD)

Associate Professor Anna Holdgate (NSW)

Dr Trevor Jackson (VIC)

Associate Professor Tony Joseph (NSW)

Associate Professor Debbie Leach (VIC)

Dr Greg McDonald (NSW)

Dr Yuresh Naidoo (WA)

Dr Debra O'Brien (VIC)

Dr Bhavani Peddinti (NZ)

Dr Paul Pielage (TAS)

Professor Drew Richardson (ACT)

Professor Ian Rogers (WA)

Associate Professor Pam Rosengarten (VIC)

Dr James Taylor (VIC)

Associate Professor Graeme Thomson (VIC)

Associate Professor Garry Wilkes (VIC)

New Fellows

1 July 2018 – 30 June 2019

Dr Irshath Abdul Raheem	Dr Atul Dhital	Dr Mike Jones	Dr Patrick Nixon
Dr Warren Adie	Dr Oliver Dodd	Dr Eleanor Junckerstorff	Dr Lloyd Noon
Dr Jana Alexander	Dr Kate Edgworth	Dr Vijay Kama	Dr Sahar Nosrat
Dr Barry Anthony	Dr Lucy Edwards	Dr Sadhna Kapitan	Dr Bassam Nuseibeh
Dr Tom Antonio	Dr Jessica Folger	Dr Claire-Marie Karrasch	Dr Koli Nushaj
Dr Adi Appaya	Dr Nicolas Forget	Dr Kate Kerr	Dr Obiyo Nwigwe
Dr Patrick Armstrong	Dr Michael Foster	Dr Kyle Kophamel	Dr Thomas O'Connor
Dr Cameron Ashurst	Dr Russell Funch	Dr Anil Kumar	Dr Uli Orda
Dr Sierra Beck	Dr Jason Gabriel-Anyassor	Dr Benjamin Land	Dr Adrian Owen
Dr Patrick Begley	Dr Daniel Gaetani	Dr Dave Lawless	Dr Scott Paget
Dr Katherine Bennett	Dr Yuri Gilhotra	Dr Elle Lee	Dr Ruth Parsell
Dr Lee Blair	Dr Rory Gleadhill	Dr Tony Legassick	Dr Christopher Partridge
Dr Cressida Blanshard	Dr Richard Goldsmith	Dr Gustav Lemke	Dr Sam Peschardt
Dr Matthew Bode	Dr Ben Goodgame	Dr Claire Leonard	Dr Timothy Petterson
Dr Caroline Bolt	Dr Robert Grant	Dr Olivia Lewis	Dr Zoe Poiner
Dr Byron Booth	Dr Tristan Griffiths	Dr William Lin	Dr Kimberley Pollack
Dr Andrew Brier	Dr Cristian Gutierrez	Dr Dieter Linde	Dr Tasha Power
Dr Philip Brooks	Dr Andrew Habig	Dr Zeyn Mahomed	Dr Laura Pulbrook
Dr Laura Brown	Dr Tim Harding	Dr Vivek Manda	Dr Megan Quedley
Dr David Browne	Dr Simon Harger	Dr Gabrielle Mane	Dr Bishan Rajapakse
Dr Ellen Bugeja	Dr Harriet Harper	Dr Jacqueline Marks	Dr Paris Ramrakha
Dr Alasdair Burns	Dr Daniel Haustead	Dr Catherine Marshall	Dr Syam Ravindranath
Dr Paul Calner	Dr Amelia Hendry	Dr Joe Marwood	Dr Helen Rhodes
Dr Adeline Cardon-Dunbar	Dr Adam Herbstritt	Dr Louis Mason	Dr Paulina Richard
Dr Kate Carmichael	Dr Grant Highstead	Dr Amy McAllister	Dr Robert Roan
Dr Peter Carter	Dr Tom Holland	Dr Michelle McNamara	Dr Euan Robinson
Dr Jonathan Cheah	Dr Kate Hooper	Dr Ruairaidh McRitchie	Dr Johanna Rudd
Dr Arthur Chiang	Dr Tag Hopkins	Dr Adam Michael	Dr Prad Sanjamala
Dr Jonathan Claydon	Dr Saskia Hor	Dr Erik Miller	Dr Bryan Schnabel
Dr Shalini Cleophas	Dr Michelle Hosking	Dr Rob Mitchell	Dr Nick Scott
Dr Joanne Cobbett	Dr Anna Ings	Dr Abhishek Mitra	Dr Sanjeeva Senaratna
Dr Michael Connelly	Dr Kathleen Jackson	Dr Jay Mueller	Dr Neil Shankar
Dr Charlie Coulton	Dr Tennika Jacobs	Dr Ian Muir	Dr Rebecca Shaw
Dr Conor Davis	Dr Amer Jaffal	Dr Anna Mulvaney	Dr Megha Singh Tveit
Dr Bridget Devaney	Dr Monit Jain	Dr Adrian Nightingale	Dr Hugh Singleton

New Fellows (continued)

1 July 2018 – 30 June 2019

Dr Sivasampavan Sivasubramaniam	Dr Daniel Walmsley
Dr Edward Sixsmith	Dr Steve Walsh
Dr Anne Smith	Dr Chris White
Dr Tom Soeyland	Dr Brendan Whiting
Dr Ignatius Soon	Dr Matt Wilde
Dr Luke Soong	Dr Mark Willsdon
Dr David Spencer	Dr Herris Xiao
Dr Scott Squires	Dr Payam Yahyavi
Dr Kate Stanbridge	Dr Yee Yong Lee
Dr Katrina Starmer	Dr Holly Young
Dr Rich Stephenson	Dr Amihan Yusingco
Dr Thomas Stevenson	
Dr Daniel Stewart	
Dr Priyesh Sura	
Dr Kate Taliana	
Dr Zeena Tawfik	
Dr Lemeneh Tefera	
Dr Ajith Thampi	
Dr Andrew Thelander	
Dr Rhys Thomas	
Dr Beverley Thompson	
Dr Sam Tonkin	
Dr Zorica Tootell	
Dr Viet Tran	
Dr Kelly Utting	
Dr Stephanie Valent	
Dr Yolanda Van Kooten	
Dr Mel Venn	
Dr Louise Venter	
Dr Sam Vidler	
Dr Saravanakumar Viswanathan	
Dr Gareth Wahl	
Dr Amy Wain	

Emergency Medicine Certificate and Diploma graduates

1 July 2018 – 30 June 2019

EMC graduates

Michael Abdah	Adam Ellerby
Rana Aljanabi	Kimberley Elliott
Caitlin Allnut	Celestine Ezekwe
Mark Andrighetto	Jackie Fankhauser
Amna Asif	Maleeha Farooqui
Taleitha Atkins	Afsaneh Farshin
Alexander Baggott	Thanthulage Fernando
Thirunavukarasu Balamurukan	Ailsa Finnie
Eleanor Barnes	Grace Finnie
Mark Barrenger	Ethan Fitzclarence
Raja Barua	Rowan Flanagan
Joel Bate	Joash Foo
Giselle Bell	Nicola Fracalossi
Daniel Bennett	Shaneil Fransch
Michael Berkley	Daniel Geilings
Alexander Booth	Samuel Glover
Thomas Boyle	Cecelia Godwin
Ben Brimblecombe	Marizabel Gonzalez Castillo
Helen Brodie	Jonathan Goodship
Jessica Carter	Rakesh Goyal
Olivia Cetinoglu	Allan Grogan
William Chan	Annette Hackett
Daniel Charles	Samuel Hall
Christopher Chilstone-Vause	Daniel Harbison
Robin Chisman	Savanna Harrison
Andrew Clarke	Terri-Louise Haworth
Amanda Cohn	Christopher Hayward
David Conn	Hettiarachchige Hettiarachchi
Stephen Cremonini	Fatima Himy
Merredith Cully	Xiao-Sheng Ho
Shona Curtin	Jessica Hockey
Thushani Dassanayake	Joseph Hodgson
Tamsin Davies	Katie Hogg
Liana Dedina	Christopher Holden
Kane Della Vedova	Zoe Horder
Leighton Delmenico	George Howell
Asmita Dhattrak	Hannah Humphreys
Jenny Diaz Lozano	James Humphreys

Omar Hussien
Tomos Hywel
Rama Mohan Reddy
Idamakanti
Wilhelmina Imperial
Bassem Iskander
Yolande-Leigh Iyer
Carolyn Jack
Jessica James
Byron Jameson
Sarah John
Elin Jones
Marvi Junejo
Munazzah Kanwal
Melissa Kelly
Anna Kingshott
Neil Kroeger
Wai Linn Kyaw
Christopher Lam Cham
Kee
Roxanna Lane
Mary Langley
John Laughlin
Monica Leung
Benjamin Lewis
Emily Libecans
Toby Locke
Bazel Lodhi
Gayani Lunuwila
Rohan Lynham
William Macdonald
Kerri Mackenroth
Henry Maddock
Arsalan Mahmud
Nora Mairs
Duminda Manamperi
Koralage
Vibhushan Manchanda
Andrea Marchant
Carmel Mason
Richard Mason

Anna Maynard
Cameron McClure
Racheal McDermott
Thomas McDonnell
Vernon McGeoch
Benjamin McIntosh
Kelly McIntosh
Oonagh McIntosh
Lauren McKay
Christina McLaughlan
Emma Merrick
Timothy Mettam
Stephen Middleton
Jonathan Miller
Ray Miller
Kayla Mizzi
Sebastian Mohan
Su Thet Mon
Shanna Morris
Gorata Mosweu
Stephanie Munari
Kevin Musarira
Shahzadi Nadia
Alan Ng
Sandra Nguy
Skye Nissen
Danielle Noutz
Catherine O'Carroll
Joseph Ong
Qi Hao Ong
Rachael Parker
Rajendrakumar Patankar
Samuel Patterson
Karina Pearce
Cloe Posimani
Mitchell Purser
Sara Quigley
Michael Reinke
Anthony Rengel
James Rothgrew

Felicity Roussak
Meghan Ryall
Luvarnia Sadasivan
Souravi Saha
Ayowale Salami
Lidia Samcewicz-Parham
Wendy Sexton
Callum Shaw
Celine Sinclair
Narmatha Sivasenthan
Camilla Sleeth
Ann Smith
Oliver Smith
Esther Ssebbowa
Imogen Stafford
Kira Stapleton
Winsome Stavrianou
Graham Stevens
Michael Stone
Sivasubaiah Subramanian
Miliana Tarai
Kamrang Un
Sobha Rani Vaddu
Justin van den Haspel
Shiv Vohra
Louise Wagner
Cameron Walters
Lisa Waters
Kieran Webb-Sawyer
Yi Wei
Katharine Wheldrake
Jennifer White
Amanda Witford
Zoe Wylie
Rachael Yin Foo
Mahinthan Yogeswaran
Tae Young Yoon
James Zhang

EMD graduates

Richard Accurso
Maryse Arnell
Ravindra Bhujbal
Jennifer Huang
Jeffery Hunt
Sadiq Jamali
Sandy Jusuf
Arunan Kanagasingham
Avinash Krishnamurthy
David Leaf
Jae Lee
Christopher McCue
Orla Anne Murphy
Huy Nguyen
Shikha Nigam
Johann Oosthuizen
Marcia Pamfilio Da Costa
Balamurugan Rajaratnam
David Shilson
Johannes Strydom
Soon Kim Tan

Congratulations
to the College's
New Fellows,
Prize Winners
and recent
EMC and EMD
Graduates.



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