



Australian Divisions of **General Practice**

The fortnightly e-newsletter of the Australian Divisions of General Practice Ltd.

ADGP News

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ADGP CEO: Kate Carnell	Deputy CEO: Liesel Wett

CEO'S REPORT – FROM KATE CARNELL

I thought that life was supposed to get a little quieter over the Christmas break!

That certainly didn't happen this year. Not that I am complaining. The opportunities that we have in front of us for 2006 are really exciting and challenging.

First "cab off the rank" was the final report from the Productivity Commission on "Australia's Health Workforce" released on January 17. This report was commissioned by COAG (Council of Australian Governments) and will be considered at their February 10 meeting. The majority of the report was very much in line with our Primary Health Care Position Statement. The report embraced multidisciplinary primary health care, an extension of item numbers to suitably qualified health professionals (on delegation from a medical practitioner) and national registration and accreditation. A more detailed report appears later in this publication.

As mentioned, COAG meets later this week with a particular focus on health. The primary objective will be to identify ways that the Federal and Territory governments can work together to improve health outcomes. There will be a focus on primary health care with particular emphasis on prevention and early intervention, mental health, workforce issues and rural and remote issues. Debate over the last week would seem to indicate that a National Call Centre may also get a run.

This agenda is the divisions network's core business so we will be working hard to convince states, territories and the Australian Government that we are the obvious infrastructure for rolling out any new proposals.

We will now have an opportunity to show that the Network's coverage, capacity, and consistency will give governments the confidence they need to use us as their preferred provider of primary health care services to local communities right across Australia.

Our capacity to be flexible, cost effective, outcomes orientated and locally focussed will be fundamental to our success.

With these exciting challenges on the table, ADGP believes that it is time to launch our new trading name – the AUSTRALIAN GENERAL PRACTICE NETWORK. We will be producing some branding materials in the next month so that all division members (if they choose) can show decision makers and stakeholders that they are an important part of a Network that covers our whole continent. There will be no requirement to use any of this material, but we believe that it will help in our effort to be acknowledged as a large, capable group that has the unique capability to deliver on programs at a local, state and federal level. In the first instant, it might be as simple as using the words "a proud member of the Australian General Practice Network" on cards, submissions and reports and letterhead.

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CEO Report continued

There is no suggestion that any Division should change their name, unless, of course, they choose to.

You will be seeing some new community service advertisements, probably on television and radio, which will carry our new trading name. When I have a schedule for these ads, I will let you know.

All members of the Divisions Network have been through a range of difficult changes – new contracts, new reporting requirements and the implementation of the Government's response to the Phillips Enquiry. The continuous changes inside the Department of Health and Ageing do not help.

That said, our relationship with DoHA (and Lisa McGlynn in particular) is mature and open and I think that we all understand that 2006 must be the year that significant new business allows the Network to achieve its potential.

Have a great year.

NEWS FROM THE NETWORK AND PROGRAMS

Productivity Commission – Final Report released

The Productivity Commission's Final Report on Australia's Health Workforce has been released. ADGP's initial press release on the Report acknowledged the value in looking at new models of care as a means of addressing health workforce issues and supported most of the Report's main recommendations. These encompassed:

- An emphasis on multidisciplinary care, team work and training
- Better processes for workforce planning and innovation, including the abolition of AMWAC and AHWAC and the establishment of an advisory health workforce improvement agency
- The establishment of single national bodies for both accreditation and registration to help health professionals move more easily through the system
- Better liaison between the Education and Health Departments regarding the funding and distribution of health workforce training places
- Ensuring that any health workforce reform includes provisions to meet the requirements of groups with special needs

Minor changes to previous recommendations included:

- The need to reconsider the self-sufficiency principle in the National Health Strategic Framework (to include some reliance on OTDs) and
- An additional recommendation regarding trialling various pooled and block funding workforce models in rural / remote areas.

Recommendations were also made around assessing payment mechanisms, including access to the MBS and prescribing rights under the PBS. In keeping with the Network's Primary Health Care Position Statement, ADGP supports an expanded role for allied health professionals in primary health care delivery, but believes that, within the current complex health system, it is essential that GPs coordinate such care.

Despite ADGP's feedback to the Productivity Commission on its earlier draft report, the Final Report still lacked the necessary emphasis on primary health care and general practice and particularly on the need for a comprehensive primary health care policy. There also continued to be no recommendations about after hours GP services.

For further details, a copy of the full Final Report, including a summary of the report's proposals and recommendations can be viewed at: <http://www.pc.gov.au/study/healthworkforce/finalreport/healthworkforce.pdf>

Nurse Practitioner in General Practice

ADGP released a position statement on the role of the Nurse Practitioner in General Practice. This position statement is based on the feedback received by the Network and again enhances the role of the general practice team, with ADGP calling on a need for scope and funding models to be explored. Many thanks to those who assisted with the development of this position statement. The position statement can be found on our website:

http://www.adgp.com.au/site/index.cfm?PageMode=indiv&module=NEWS&page_id=8128 .

NEW HOWARD MINISTRY

Fourth Howard Ministry Line-up

As of 30 January 2006*

Title	Minister	Other Chamber
Prime Minister <i>Minister Assisting the Prime Minister</i> <i>Parliamentary Secretary to the Prime Minister</i>	The Hon John Howard MP The Hon Gary Hardgrave MP <i>The Hon Malcolm Turnbull MP</i>	Senator the Hon Nick Minchin
Minister for Trade (Deputy Prime Minister) <i>Parliamentary Secretary (Trade)</i>	The Hon Mark Vaile MP <i>The Hon De-Anne Kelly MP</i>	Senator the Hon Helen Coonan
Minister for Foreign Affairs <i>Parliamentary Secretary (Foreign Affairs)</i>	The Hon Alexander Downer MP <i>The Hon Teresa Gambaro MP</i>	Senator the Hon Helen Coonan
Treasurer Minister for Revenue and Assistant Treasurer Parliamentary Secretary	The Hon Peter Costello MP The Hon Peter Dutton MP <i>The Hon Chris Pearce MP</i>	Senator the Hon Nick Minchin Senator the Hon Helen Coonan
Minister for Finance and Administration (<i>Vice President of the Executive Council</i>) (Leader of the Government in the Senate) Minister for Human Services Special Minister of State Parliamentary Secretary	Senator the Hon Nick Minchin The Hon Joe Hockey MP The Hon Gary Nairn MP <i>Senator the Hon Richard Colbeck</i>	The Hon Peter Costello MP Senator the Hon Amanda Vanstone Senator the Hon Eric Abetz
Minister for Transport and Regional Services <i>Minister for Local Government, Territories and Roads</i>	The Hon Warren Truss MP The Hon Jim Lloyd MP	Senator the Hon Ian Campbell Senator the Hon Ian Campbell
Minister for Health and Ageing (Leader of the House) Minister for Ageing Parliamentary Secretary	The Hon Tony Abbott MP Senator the Hon Santo Santoro <i>The Hon Christopher Pyne MP</i>	Senator the Hon Santo Santoro The Hon Tony Abbott MP
Attorney-General Minister for Justice and Customs (Manager of Government Business in the Senate)	The Hon Philip Ruddock MP Senator the Hon Chris Ellison	Senator the Hon Chris Ellison The Hon Philip Ruddock MP
Minister for Communications, Information Technology and the Arts (Deputy Leader of the Government in the Senate) Minister for the Arts and Sport	Senator the Hon Helen Coonan Senator the Hon Rod Kemp	The Hon Peter McGauran MP The Hon Peter McGauran MP
Minister for Immigration and Multicultural Affairs <i>Parliamentary Secretary</i>	Senator the Hon Amanda Vanstone <i>The Hon Andrew Robb AO MP</i>	The Hon Philip Ruddock MP
Minister for Defence Minister for Veterans' Affairs <i>Minister Assisting the Minister for Defence</i> Parliamentary Secretary	The Hon Dr Brendan Nelson MP The Hon Bruce Billson MP <i>Senator the Hon Sandy Macdonald</i>	Senator the Hon Ian Campbell Senator the Hon Ian Campbell
Minister for Industry, Tourism and Resources Minister for Small Business and Tourism <i>Parliamentary Secretary</i>	The Hon Ian Macfarlane MP The Hon Fran Bailey MP <i>The Hon Bob Baldwin MP</i>	Senator the Hon Nick Minchin Senator the Hon Nick Minchin
Minister for Employment and Workplace Relations <i>Minister Assisting the Prime Minister for the Public Service</i> <i>Minister for Workforce Participation</i>	The Hon Kevin Andrews MP The Hon Dr Sharman Stone MP	Senator the Hon Eric Abetz Senator the Hon Eric Abetz
Minister for the Environment and Heritage Parliamentary Secretary	Senator the Hon Ian Campbell <i>The Hon Greg Hunt MP</i>	The Hon Warren Truss MP
Minister for Agriculture, Fisheries and Forestry (Deputy Leader of the House) Minister for Fisheries, Forestry and Conservation Parliamentary Secretary	The Hon Peter McGauran MP Senator the Hon Eric Abetz <i>The Hon Sussan Ley MP</i>	Senator the Hon Eric Abetz The Hon Peter McGauran MP
Minister for Families, Community Services and Indigenous Affairs <i>Minister Assisting the Prime Minister for Indigenous Affairs</i> Minister for Community Services	The Hon Mal Brough MP The Hon John Cobb MP	Senator the Hon Chris Ellison Senator the Hon Chris Ellison
Minister for Education, Science and Training <i>Minister Assisting the Prime Minister for Women's Issues</i> Minister for Vocational and Technical Education <i>Parliamentary Secretary</i>	The Hon Julie Bishop MP The Hon Gary Hardgrave MP <i>The Hon Pat Farmer MP</i>	Senator the Hon Amanda Vanstone Senator the Hon Amanda Vanstone

Each box represents a portfolio. **Cabinet Ministers are shown in bold type.** As a general rule, there is one department in each portfolio. Except for the Department of the Prime Minister and Cabinet and the Department of Foreign Affairs and Trade, the title of each department reflects that of the portfolio minister. There is also a Department of Veterans' Affairs in the Defence portfolio and a Department of Human Services in the Finance and Administration portfolio.

* The changes to the ministry list issued on 6 July 2005 took effect on 27 January 2006.

DIVISIONS NETWORK EXECUTIVE LEADERSHIP AND MANAGEMENT PROGRAM

The Divisions Network has been advocating for a practical leadership program to develop the skills of our CEOs. This program has been developed by Divisions for Divisions, with real-life examples and tools for use in everyday Divisional workplaces. I'm proud to be involved and see it come to fruition.

Nancye Pierce – CEO, Riverina Division of General Practice and Primary Care

In the last edition of ADGP News we announced the Divisions Network Executive Leadership and Management Program - a leadership program that has been designed by the Network for the Network. The program specifically targets senior levels of Division Management, ie; CEOs or emerging leaders and runs over a ten month period, with two, five day residentials – for 2006. The five day residentials will be run in Sydney, and the first intake (April 2006) will include incentives for eligible early registrants (please see the Incentives section below).

The Course

The course itself, with successful completion, will give participants an Advanced Diploma of Business Management, which is the equivalent of three units of credit into the University of New England's 12 unit Masters of Business Administration. The course is based on on-line learning over a 10 month period, with two, five day residentials.

Assessment and Delivery

Delivery is via distance education with the two, five day residentials per 10 month period. Participants will receive full distance education materials (print and CD-rom) and access to on-line support via a team of experts. In addition, ADGP will also be compiling a list of potential mentors for participants to assist with the implementation of the learning tools as a result of the course. Participants will work in small study teams at the five day residentials, utilising these teams as 'study groups' (linking electronically) when progressing work-place related assessments. A mixture of group and individual project will form the assessments.

The Content

This program has been designed with the Divisions Network, so has been focused to the needs of Divisional CEOs. In this way, the program will equip the participant with enhanced skills in effectively managing the strategic directions of the organisation. Increasing skills in areas such as leadership, financial management and comprehensive business operations are core. Underlying this is the focus on the unique operating environment of the Divisions Network, such as working collaboratively with partners, and with government at various levels. More information on the learning modules can be found on the ADGP website at: <http://www.adgp.com.au/site/index.cfm?display=7933&filter=i&leca=16&did=72528553>

Who should register?

CEOs and emerging leaders in the Divisions. Assessments will be practically based, and involve implementing new skills into everyday decision making.

Fees

Full course Fee - \$4800

Incentives

Incentives will be available for the first intake (April 2006) and have been provided by the Australian Government Department of Health and Ageing. Incentives are available (on successful registration and application to ADGP) for both course fees and travel/ accommodation for those participants from the Divisions Network residing outside a 200 km radius of Sydney. Guidelines and documentation for both incentive pools can be accessed from ADGP's website at: <http://www.adgp.com.au/site/index.cfm?display=7933&filter=i&leca=16&did=72528553>. Applications for incentives close **Friday 24th February 2006, 5.00 pm AEDST**, and can be forwarded to Liesel Wett, ADGP (details below).

When is it running?

For 2006, there will be two intakes:

1. April 2006, Sydney (Coogee Crown Plaza)
3-7 April & 10-14 July*
2. June 2006, Sydney (Coogee Crown Plaza)
5-9 June & 18-22 September

*see incentives

For more information

Contact Liesel Wett at ADGP on lwett@adgp.com.au or Ph: 02 6228 0800

USEFUL INFORMATION FROM BEYOND THE NETWORK

✚ The Report on Government Services 2006 – Management of Diabetes

The Report on Government Services 2006 was released on 31 January 2006, and examines the performance of government services in the areas of education, justice, emergency management, health, community services and housing.

In the health section of the report, the Productivity Commission recognises that GPs and community healthcare services play a significant role in the management of diabetes and in reducing avoidable hospital admissions.

It goes on to provide details of the National Divisions Diabetes Program Data Collation Project (table 10.7) carried out in 2002-03 as well as to provide performance indicators of the management of diabetes.

	<i>Number</i>	<i>Per cent</i>
Estimated adults with diabetes in population from participating Divisions ^f	126 386	100.0
Adults with diabetes who are on a Divisions register	22 575	17.9
Patients for whom HbA1c measurement is known	13 325	100.0
Patients for whom HbA1c measurement is known having a glycaemic control assessment in a 6 month period	6 132	46.0
Patients having a glycaemic control assessment in a 6 month period for whom HbA1c measured with result >2% of ULN	1 144	18.7

^a The AusDiab survey (from which these data were sourced) was not representative of Aboriginal and Torres Strait Islander people. ^b The results reported for glycaemic control are for the period 1 January 2002 to 30 December 2002. Glycated haemoglobin (HbA1c) levels are reported as being within a certain percentage from the ULN. The reagents and units of measurement used are different in different laboratories. The normal range is established by a set of standard samples which the lab tests using its particular reagents and equipment. For this reason, every laboratory reports a normal reference range when it reports an HbA1c result. Labs may also report whether a given result is within 1 per cent of the ULN range for their particular testing method, or 'good', 'poor' etc. ^c Divisions participated on a voluntary basis (19 participated and 16 supplied complete data). The duration of Division registers varied from three to seven years, averaging 4.4 years with a median of five years. ^d Adults are persons aged 25 years or over. ^e Around half the people with diabetes are not aware that they have the condition. ^f The estimated number of people with diabetes in a Division has been calculated using population data from the 2001 Census Division and then applying the AusDiab age-specific prevalence rates.

Source: Centre for GP Integration Studies (2003).

Indicators of successful diagnosis and treatment include:

- An increase in the proportion of adults with diabetes who have been diagnosed and placed on a Divisions of General Practice diabetes register indicates improved patient management and monitoring
- An increase in the proportion of people on the Divisions' diabetes registers who have had a glycaemic control assessment also indicates improved patient management and monitoring
- A decrease in the proportion of patients who have had a glycaemic control assessment who are at risk of future complications (that is, they have glycated haemoglobin (HbA1c) greater than 2 per cent above the upper limit of normal) indicates improved disease control

The report also notes that good management on the part of primary and community healthcare providers can only go so far in reducing complications arising from diabetes. Patient cooperation (such as medication, appropriate diet and physical activity) also has significant effects.

This is the eleventh edition of the report, under a collaborative process initiated by Heads of Government in July 1993. It has been produced by the Steering Committee for the Review of Government Service Provision (SCRGSP). The Steering Committee is chaired by Gary Banks, Chairman of the Productivity Commission. Mr Banks noted that governments' continued commitment to performance reporting meant the Report's quality and scope continued to improve each year.

Mr Banks drew attention to the report's increasing focus on measuring the outcomes government services deliver to the community. This year's Report includes expanded reporting on learning outcomes for schools and new outcome indicators for hospitals. Specific details of the report can be found here: <http://www.pc.gov.au/gsp/reports/rogs/2006/index.html>

AMH 2006 Released

The 2006 (seventh) edition of Australian Medicines Handbook - Australia's independent evidence-based prescription drug reference – has been released.

Regarded by many as the indispensable drug reference for Australian healthcare professionals, with a sound reputation for independence and accuracy, AMH is continuously updated by its expert editorial team of pharmacists and medical practitioners.

AMH contains no drug company advertising and the 2006 Edition contains the most up-to-date available information on new drugs such as Ropinirole, Pregabalin, Ciclesonide, Balsalazide, Alefacept, Efalizumab, Strontium, etc.

The 2006 edition is available as a 932-page Book or in CD-ROM, PDA or online versions. For more information go to <http://www.amh.net.au> or phone (08) 8303 6977

POSITIONS VACANT

Senior Policy Adviser - ADGP

The role of the Senior Policy Adviser is to provide high level policy advice to the ADGP Board via the ADGP Chief Executive Officer (CEO), to the ADGP CEO and to the Manager Policy and Development and ADGP Program Managers on matters relating to the strategic focus and activities of the Divisions Network (ADGP, SBOs, and Divisions of General Practice).

Essential

- High level conceptual and analytical skills and demonstrated ability to quickly grasp complex issues and generate policy advice and solutions
- Highly developed communication, consultation, negotiation and liaison skills including the drafting of submissions, briefs, reports, position statements and correspondence and demonstrated capacity to engage with stakeholders and develop partnerships and networks
- Demonstrated ability to exercise judgement and initiative, to determine priorities, organise workload and ability to work independently or as part of a team
- Extensive knowledge of Australian government primary health care programs, primary health care issues, the general practice environment and the role of the Divisions Network in the health care environment
- Ability to develop Divisions network and general practice national policy solutions to issues impacting on the health of the Australian community
- Secretariat skills of a high order and demonstrated ability to work effectively within a team environment

Desirable

- Tertiary qualifications in related health disciplines

Key Responsibilities

- Provision of high level policy advice on and participation in the development and execution of ADGP Strategic and Business Plans
- Conduct of research and analysis into matters identified by the ADGP CEO and/or Board and provide advice on the impact of those matters on or their relationship to the Divisions Network and general practice
- Provision of advice to the ADGP CEO and Board regarding emerging policy issues that have a potential to impact on the Divisions Network and the general practice setting
- Provision of high level support to the ADGP Board including policy advice and briefings, speeches and presentations
- Oversight ADGP's Representation Program including timely provision of policy advice and briefing to ADGP representatives and represent ADGP at local, state/territory and national forums
- Provide advice to ADGP Program Managers on the national and ADGP policy context in which their Programs operate
- Establish relationships and undertake consultation with key stakeholders on policy and program matters affecting the Divisions Network
- Provide a point of contact for public inquiries and stakeholders' requests for information on policy and representation issues

Reporting Relationships

The position reports to the Manager, Policy and Development. The position is located in the policy team which consists of the Manager, Policy and Development, a second senior policy advisor and a policy advisor. The position works closely with ADGP's Senior Management Team.

Please forward your resume, a covering letter and contact details for three referees.

By Email: lwells@adgp.com.au

By Mail: Leanne Wells

Manager, Policy and Development

Australian Divisions of General Practice Ltd

PO Box 4308

MANUKA ACT 2603

Applications close 5 pm Monday 20 February 2006. For further information about the Australian Divisions of General Practice see www.adgp.com.au

Policy Adviser - ADGP

The Policy Adviser will provide policy and research support to senior members of ADGP's policy team and program management staff on a number of discrete primary health care related policy issues and initiatives.

Essential

- Demonstrated ability to research and analyse current health-related issues and to generate policy advice and solutions
- Demonstrated ability to work collaboratively and efficiently with senior staff and Board members and to liaise effectively with a range of key stakeholders under direction of senior staff
- Demonstrated knowledge of the issues related to primary health care policy, planning and delivery and the role of the Divisions Network in the current health care environment
- Well developed oral and written communication skills, and experience in writing policy papers, speeches, agenda papers and presentations
- Demonstrated ability to exercise initiative and judgement, to determine priorities, organise workload and ability to work independently or part of a team
- Secretariat skills of a high order and demonstrated ability to work effectively within a team environment

Desirable

- Tertiary qualifications in related health disciplines

Key Responsibilities

- Provide research and policy support to ADGP Senior Policy Advisers and program managers on range of primary health care policy and program development matters
- Consult with and engage the Divisions Network on contemporary primary health care issues
- Assist in consultation and liaison with key stakeholders on policies, issue papers and program matters
- Assist with the administration of ADGP's Representation Program
- Contribute to a range of policy papers, including agenda papers for Board discussion/decision and make contributions to speeches, presentations and media pieces

Reporting Relationships

The position reports to the Manager, Policy and Development. The position is located in the policy team which consists of the Manager, Policy and Development and two senior policy advisers.

Please forward your resume, a covering letter and contact details for three referees.

By Email: lwells@adgp.com.au

By Mail: Leanne Wells

Manager, Policy and Development

Australian Divisions of General Practice Ltd

PO Box 4308

MANUKA ACT 2603

Applications close 5 pm Monday 13 February 2006. For further information about the Australian Divisions of General Practice see www.adgp.com.au

Executive Director - Gold Coast Division of General Practice Ltd

The Division is seeking expressions of interest from individuals for appointment to the position of Executive Director. This position calls for executive leadership and change management skills of the highest order.

For a brief on the position, contact the Division office on (07) 5507 7777 or email gpdvgold@gcdgp.com.au.

Remuneration (including full use of a company vehicle and the statutory employer superannuation contribution) will be negotiated commensurate with experience and in reference to the terms and conditions specified in the Division's Certified Australian Workplace Agreement, also available on request.

Mastery of the issues facing general practice and the role of Divisions of General Practice in achieving improvements to patient health outcomes and industry efficiency is most desirable.

Expressions of interest should be forwarded **no later than 5.00 pm Monday 27 February 2006**

to:

The Board Chair
Gold Coast Division of General Practice Ltd
3/5 Executive Drive
BURLEIGH WATERS Q 4220

Project Manager: Quality Care - RACGP

Permanent Flexible Role (0.8 FTE - 1.0 FTE) Melbourne based
\$69,065 - \$75,444 (1.0 FTE) pa (inclusive of 13% Super)

The Royal Australian College of General Practitioners (RACGP) is a member-based organisation. RACGP is a respected national leader in its field and is committed to the development and maintenance of high quality standards, practice support and research for Australian General Practice.

The RACGP seeks an organised professional to support all aspects of RACGP core business related to quality care including executive support to the National Standing Committee and Health Inequalities Working Group, manage and conduct projects on behalf of the NSC: QC and the National Manager: Quality Care and research and provide support to RACGP members and staff interested in quality care.

The successful applicant will demonstrate:

- Previous project and primary health care experience including applying for funding and project development and implementation and working with Committees;
- Excellent written and verbal communication skills;
- Sound strategic planning experience.
- A position description is available at <http://www.racgp.org.au/document.asp?id=19439>.

Applications are to be forwarded to:

Ms Fay Samaras
Senior HR Advisor
RACGP
1 Palmerston Crescent
South Melbourne VIC 3205
or via email at recruit@racgp.org.au by **6 February 2006**.

CONFERENCES AND COURSES

2006 Australian General Practice Network Forum

The 2006 Forum will be held at the Gold Coast Convention and Exhibition Centre, Broadbeach Queensland from 25-28 November 2006.

AGPAL Conference

9-11 March 2006

The early bird special expires at midnight tonight!

GPs, practice managers, nurses, Division staff and anyone else wishing to go to AGPAL's 9-11 March 2006 conference on the Gold Coast are advised to get in quickly to beat the last minute rush. Following the release of AGPAL's conference registration brochure in November, AGPAL has received over 500 registrations from practices, surveyors and Divisions. So it's time to turn up the heat and register before the early bird runs out. Receive up to 30 QA/CPD and 16.5 AAPM and ACRRM points! Please visit AGPAL's website <http://www.agpal.com.au> or call Julie Crook on 07 3876 6370. Register now or phone our conference organisers OzAccom toll free on 1800 814 611.

Rural Health Education Foundation Satellite Television Program

Rural Health Education Foundation LIVE Satellite Television Broadcast

Tuesday 31st January 2006 8pm ESDT

(repeated Friday 3rd February 1:30 ESDT)

Funded by the Australian Government Department of Health and Ageing. For more details visit:

<http://www.rhef.com.au/programs/601/601.html> or RSVP to rhef@rhef.com.au.

Rural E-Health Forum

Geraldton, WA

18-19 May 2006

This is your chance to talk with clinicians who are using new technologies, with the inventors designing the next big thing, with the industry and with policy makers. The Forum is jointly organised by CUCRH, the Midwest Division of General Practice and the Centre of Excellence in e-Medicine. Let us know that you plan to attend. Circulate the flier, and download the form on the forum website: <http://www.cucrh.uwa.edu.au/eHealth>

RACGP NSW & ACT Update & Uplift Conference

Shoal Bay

31 March-2 April 2006

The conference program offers GPs a wide choice of clinical, management, and wellbeing topics. This includes the option of completing two innovative Active Learning Modules – one on managing stress, and one on patient-doctor communication - for 60 category 1 CPD points. This is a family-friendly event, with plenty of activities for partners and children, at the beautiful beachfront Shoal Bay Resort & Spa. To register, please contact the faculty on 9886-4700 email nswact.events@racgp.org.au or download the registration brochure here: <http://www.racgp.org.au/nswact/events/>.

Australian College of Holistic Medicine Nutrition Medicine Workshop

Holiday Inn Hotel, Gold Coast

10 June-12 June 2006

RACGP Points

90 Category 1 CPD Points on satisfactory completion of all three Active Learning Module workshops.

30 CPD points for each 1-day Active Learning Modules workshop, subject to RACGP confirmation. Please download the online registration form here: <http://www.nutritionmedicine.org/100214.php>

ASHM Short Course in HIV Medicine

Medina on Crown, 359 Crown Street, Surry Hills, Sydney NSW 2000

28–30 April 2006

Free To NSW/ACT Doctors

The ASHM Short Course in HIV Medicine gives medical practitioners comprehensive training in the science of HIV, current pharmacology, monitoring and treatment, as well as the complicating factors surrounding HIV management. Completion of the full 8-module course and its associated assignment enables GPs to apply for the right to prescribe s100 drugs for HIV in NSW and ACT. The Certificate of Attainment from the course is recognised by many other bodies in Australia and New Zealand. Newly qualified prescribers must agree to participate in ASHM's mentorship program. **The course is available FREE** to doctors in NSW and ACT. For everyone else, the cost for each day is \$150.00 for ASHM members and \$180.00 for non-members. There is no GST component. The HIV basic science and pathogenesis CD-ROM (Module 1) is free to those who enrol in all 8 modules and \$50.00 plus GST as a stand-alone item. Module 8 is a free component of the course. Each module attracts 2 CME points for current HIV s100 prescribers. RACGP QA&CPD, AChSHM and RACP MOPS points are also available. Register early! Numbers limited. Registrations close 1 April 2006. For more information, please visit: <http://www.ashm.org.au/>.

CONTACT THE EDITOR

Information in this newsletter is for the use and benefit of all members of SBOs and Divisions, so please pass it on, and recycle the whole, or parts, of this publication to your members with due acknowledgement to ADGP.

If SBOs, Divisions and other readers have information for, or comments on, *ADGP News* please contact:

Sue Aiesi
Ph: 02 6228 0822
Email saiesi@adgp.com.au

Shiona Paul
Ph: 02 6228 0851
Email spaul@adgp.com.au.

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