



The Royal Australian  
and New Zealand  
College of  
Obstetricians and  
Gynaecologists

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**Annual Report  
2015**



# RANZCOG Board and Council



## Back row, left to right:

*Dr Anthony Geraghty (Provincial Fellow); Dr Kate van Harselaar (Trainee Representative); Dr Martin Byrne (Chair, GP Obstetric Advisory Committee); Dr Michael Rasmussen (VIC); Dr James Harvey (SA/NT); Dr Joseph Sgroi (Vic); Dr John Regan (VIC); Dr Peter Bland (NSW); John Hehir (ACT); Dr Gregory Jenkins (NSW); Dr Ian Pettigrew (Provincial Fellow); Dr Benjamin Bopp (QLD); Dr Donald Clark (WA); and Ms Alana Killen, CEO.*

## Middle row, left to right:

*Ms Catherine Whitby (Community Representative); Dr Bernadette White (VIC); Dr Ian Page (NZ); Dr Celia Devenish (NZ); Dr Rosalie Grivell (SA); A/Prof Janet Vaughan (NSW); Dr Gillian Gibson (NZ); Dr Stephen Lyons (NSW); A/Prof Boon Lim (TAS); and Prof Yee Leung (WA).*

## Front row, left to right:

*Prof Ian Symonds (Non-Office Bearer); Dr Vijay Roach (Vice-President, Aust); Dr John Tait (Vice President, NZ); Prof Michael Permezel (President); Dr Sarah Tout (Non-Office Bearer); Dr Martin Ritossa (Treasurer); and A/Prof Stephen Robson (Vice President, Aust).*



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# President's Report

It is with pleasure that I present to the membership of RANZCOG the Annual Report for the 2014–2015 financial year. This report comes a few months into the term of the Ninth RANZCOG Council and covers what has, once again, been a busy and eventful year for the College. Central to effective governance is the position of CEO and, in June, the College welcomed Ms Alana Killen to this position. Alana comes from the Australasian College of Emergency Medicine (ACEM), where she was CEO for five years. She has extensive experience in education and learning initiatives and has a keen interest in governance and strategy.

## Education and Training

### Training Selection

Selection for RANZCOG training remains much sought after among medical graduates and is intensively competitive. This year there were more than 250 applications for 80 positions. The College continuously reviews its training selection processes to ensure that these are fair and transparent, while striving to recruit the best-possible future specialists to our discipline. The Selection Committee had identified a need for improved translation of prevocational performance into selection. Institutional references are being assessed as one means of achieving this objective. 'situational judgment testing' will also be trialled for possible use in future selection rounds.

### e-Portfolio

The College is developing an e-portfolio to streamline data management within the training and education sections of the College. It is planned to introduce the first section of the e-portfolio for the 2016 training year, beginning in New Zealand in December 2015 and Australia in February 2016. The first component will provide Trainees with facilities to electronically log all training procedures. It is envisaged that, with the availability of detailed information on procedural training, hospital allocation of Trainees will be adjusted to capitalise on the best-available training opportunities.

## Meetings and Events

### RCOG World Congress 2015, Joint RCOG/RANZCOG Event

April 2015 saw a very successful Joint Event held with the Royal College of Obstetricians and Gynaecologists (RCOG) in Brisbane under the leadership of A/Prof Ted Weaver, Chair of the Organising Committee, Dr Clare Boothroyd, Chair of the Scientific Program Committee and a College House team led by Kylie Grose and Lee-Anne Harris. The RCOG World Congress 2015, Joint RCOG/RANZCOG Event

was the culmination of four years of planning, hard work and dedication by the Organising Committee and staff of both colleges. The Congress was attended by more than 2,300 participants from 43 countries.

### FIGO 2021 Congress Bid


Following an invitation issued by the International Federation of Gynecology and Obstetrics (FIGO) to member societies in the Asia-Oceania region, the College submitted an expression of interest to host the FIGO 2021 World Congress. Bids to host this prestigious event, which typically attracts more than 6,000 delegates, were subsequently submitted by the Melbourne Convention Bureau and Business Events Sydney as the bidding host cities, with the College supporting both bids. Site visits of both Melbourne and Sydney, along with other bidding cities in the Asia-Oceania region, were conducted by the FIGO Selection Committee in early March, with each bidding city ranked according to best business case. At its May meeting, the FIGO Executive Board considered the rankings and determined that the FIGO 2021 World Congress should be held in Sydney, subject to ratification by the FIGO General Assembly at the meeting in Vancouver in October. At the time of writing this report, it is possible that Sydney will need to win a vote of the FIGO General Assembly against other bidding cities at the October meeting.

### FIGO Executive Meetings

In May, the College hosted the FIGO Executive Board and associated committee meetings in Melbourne, which provided an excellent opportunity for the College to showcase its activities and programs as well as issues relevant to the practice of the specialty in Australia and New Zealand. As part of the four-day program, FIGO Executive Board members undertook field visits to the Mercy Hospital for Women, Monash Medical Centre and the Royal Women's Hospital, in Melbourne, and experienced the important work being undertaken in the field of obstetrics and gynaecology in some of our tertiary hospitals. Additionally, the College hosted an Educational Seminar to showcase the work being done by College members, particularly in the areas of Aboriginal and Torres Strait Islander women's health and women's health in the Pacific Island Countries. The College was most appreciative of the involvement of Dr Kiarna Brown, Dr Jacqueline Boyle and Dr Alec Ekeroma, whose comprehensive and interesting presentations generated much discussion.

## Regional Finances

A number of improvements have occurred in the College financial systems including the centralisation of funds in each of Australia and New Zealand. The College will continue to maintain an Asset Register



to record all monies that are set aside for each Regional Committee, with these funds available for use by that region for recognised purposes. Regional office staff, premises and service expenses will be paid from College House and not from the relevant regional office.

## Membership Matters

### DRANZCOG Logo

As a means of recognising the dedication and professional services of our Diplomates and their commitment to ‘excellence in women’s health’, the College is developing a DRANZCOG Logo and DRANZCOG Advanced Logo. The logos will be available to all Diplomates to incorporate on to their office stationery, including letterhead and business cards, email signatures, websites and presentation slides to signify membership of the College. Fellows have had similar access to the FRANZCOG Logo.

### MRANZCOG

Since the introduction of the National Registration and Accreditation Scheme, there has been some concern that it is inappropriate to award a qualification in the middle of a specialist training program. While Fellows, Trainees and those closely connected with the College understand and appreciate that conferral of MRANZCOG does not signify an ability to practice at specialist level, there is some concern

that this distinction is not readily apparent to the general public in either Australia or New Zealand. As such, the Board and Council committed, as part of the current Strategic Plan, to streamlining the pathway to RANZCOG Fellowship and discontinue the MRANZCOG as a formal qualification of the College from 2016. This requires a constitutional change that will be considered at the College’s 2015 Annual General Meeting.

## Summary

The College remains grateful for the extensive pro bono contribution made by so many Fellows, Diplomates and Trainees – from which all members of the College derive benefit. I would like to personally thank a long-serving College House staff member Georgina Anderson, who will be known to many Fellows. Georgina gave very valuable and untiring support to me and previous Presidents of the College. We wish her well in her new senior role at ACEM.

### **Prof Michael Permezel**

President

# CEO's Report

It is with great pleasure that I present my first Annual Report since commencing as CEO at the end of June this year. As I have not had the benefit of 12 months retrospection upon which to base this report, I will instead concentrate primarily on looking forward and what we hope to achieve in the year ahead.

Having recently arrived from another specialist medical college, I am aware of the unique role that these organisations play in the postgraduate medical education sector. There are, of course, some differences in philosophy, governance and training; however, the common feature shared by all colleges is the remarkable dedication and commitment demonstrated by those Fellows and members who continue to contribute significant time and effort to their college. This includes planning for the future to ensure that RANZCOG remains sustainable and current in a constantly changing environment.

RANZCOG's Strategic Plan 2015–2019, which is available on the College website ([www.ranzcog.edu.au/the-ranzcog/governance/ranzcog-strategic-plan](http://www.ranzcog.edu.au/the-ranzcog/governance/ranzcog-strategic-plan)), outlines the priorities and goals for the next four years and addresses the following four key objectives; two of which I will discuss within this report:

1. education;
2. engagement;
3. process improvement; and
4. resources.

Education remains a key priority for RANZCOG, and over the past 12 months, the College has continued to develop and improve the RANZCOG Training Program to ensure it is contemporary, relevant and meeting future workforce needs.

## Education

Members will be aware of the development of the e-portfolio, which will lead to more streamlined and efficient methods for recording Trainees' progress. With the increasing prevalence of online learning, RANZCOG has continued to develop resources that can be accessed electronically. This includes a


number of video scenarios to support training supervisors in their roles; particularly relating to the challenging issues of giving feedback and teaching specific skills. Further enhancements in the education area has seen the development of advanced training modules (ATMs) for Trainees in their final two years of training, with a number of online resources currently under development, including: Sexual Assault and Domestic Violence; Indigenous Women's Health and Cultural Competency; and The Australian Health System.

## Engagement

There is no doubt that the College provides excellent support to those participating in the various training programs at RANZCOG; however, once Fellowship is attained or training is completed, how does the College maintain the ongoing engagement of its members? This is a critical issue for all colleges that are continually striving to provide a meaningful and beneficial relationship with the members they serve.

The Engagement Committee was established in 2014 to look at the levels of engagement among the current membership and identify strategies for improving and enhancing members' satisfaction with the College. Engagement is a commonly used word that has a variety of meanings to different people. In this context, RANZCOG is trying to determine the degree of meaningful involvement or interaction with the College and the associated value placed in this activity. Members who are highly involved in the activities of the College, through participation on committees, Council, the Board and so forth, are relatively highly engaged, whereas those who have limited contact with the College are likely to be less so.

When Fellows and members are paying not insignificant annual fees, it is reasonable to ask 'What does the College do for me/with my money?' Apart from providing training, assessment, credentialing and continuing professional development programs, RANZCOG also acts as an advocate for women's health: producing statements, submissions and feedback; participating in joint working parties and consultative processes; and contributing to health policy development. The College also undertakes excellent work in the Pacific region; where Fellows and members work collaboratively with other allied health professionals



to provide training and support to midwives and health providers in under-resourced countries. However, this does not necessarily address the very fundamental question above. The response to this question is, of course, 'What do you WANT the College to do for you?' Informal feedback indicates that there are a number of areas where RANZCOG could improve its performance, and in the coming few months, the Engagement Committee will be seeking your views on how the College can improve the relationship it has with its members.

### Enhanced Communication

In association with the Publications and Communication Management Committee, the Engagement Committee is looking at the College website to ascertain how it might be improved. These improvements involve identifying the website audiences and determining how information can most effectively and efficiently be communicated to each of the groups. In order to further enhance communication, RANZCOG has made tentative steps into the social media space with Facebook ([www.facebook.com/ranzcog](http://www.facebook.com/ranzcog)) and LinkedIn pages created ([www.linkedin.com/company/ranzcog](http://www.linkedin.com/company/ranzcog)). However, your feedback

will be most useful in determining how the College can most effectively communicate with its members.

### The Year Ahead

I have been warmly welcomed by Fellows, Trainees, members and staff at RANZCOG and wish to express my gratitude for the support I have received. I am fortunate to have highly skilled and able people with whom to work and look forward to a very productive year ahead.

**Alana Killen**  
CEO



# Media and Communications

During the reporting period, the College continued to be an important source of information for journalists. The College is increasingly being identified as the key voice on women's health in Australia and New Zealand.

*"Cytomegalovirus can cause serious problems for the unborn fetus...The most susceptible to CMV infection are women who have not had it previously – which is about half of all pregnant women."*

Prof Michael Permezel, The test you should have in pregnancy – or even before conceiving, Essential Baby

*"...women should ensure they understand the risks of giving birth at home before they choose it over hospital care."* Prof Michael Permezel, Home birth options could expand, The Age

*"There are still only a small number of studies assessing the use of hypnosis for labour and childbirth...Although the intervention shows some promise, further research is needed before recommendations can be made regarding its clinical usefulness for pain management in maternity care."* A/Prof Stephen Robson, Melissa Spilsted has delivered a world-first caesarean birth by combining childbirth education with hypnosis, News.com.au

## Collegiate

The College continues to deliver a monthly e-newsletter, Collegiate, to engage and inform the College's membership of relevant news of interest to the Fellows, Diplomates, Trainees and members generally. Collegiate delivers new and interesting feature links and encourages recipients to access information available on the College website. Members and external stakeholders have access to dedicated pages for promotions: the Member Notice Board and Events Board. These two notice boards are accessible via a link in Collegiate; however, Collegiate itself does not carry promotional content.

## Social media

The College has developed a social media content policy to guide engagement. The College recognises the value in using social media to:

- promote communication;
- ensure the College is recognised as approachable and responsive;
- promote access to College programs, events and expertise;
- provide greater awareness of the College's knowledge, advocacy, research and expertise to a wider audience; and
- provide information about the College's activities across media separate to the College website.

The College created a Facebook page in April 2015, with new content posted once or twice a week. To date, the page has received almost 400 'likes'. The main objectives are to: showcase a broad range of the College's activities; highlight useful and time-sensitive information, such as media releases, College statements and ASMs; and provide an alternative to more formal methods of communication.

## Website and Media Wrap

The College seeks to effectively communicate its position on women's health issues that have attracted public attention. The new layout of the weekly Media Wrap sent to all Board, Council and RANZCOG staff every Friday, has received positive feedback as a useful reference tool, with an average open rate of 32 per cent. The RANZCOG in the Media section of the RANZCOG website is updated daily, featuring the latest articles with expert comment from College spokespeople on a women's health issues. The News section on the homepage of the website has also increasingly been used to promote the College's position on current issues, RANZCOG events and to inform the Fellowship of special-interest initiatives relevant to their specialty. A new feature on the homepage From the President – allowing the current College President the opportunity to inform and announce to the membership special-interest initiatives that are relevant to their specialty practice.

Other strategic objectives achieved in this financial year: developed and increased the professional and co-operative relationship with both Federal and State parliamentarians and senior staff members; developed, updated and circulated to media and stakeholders statements on current women's health issues; and increased the College's presence in news articles on websites such as [www.kidspot.com.au](http://www.kidspot.com.au), [www.webchild.com.au](http://www.webchild.com.au) and [www.essentialbaby.com.au](http://www.essentialbaby.com.au).

## RCOG World Congress 2015 – Joint RCOG/RANZCOG Event

A key event on the College's calendar, RANZCOG and the RCOG successfully liaised with a variety of media outlets on the issues showcased in the scientific program relating to women's health, which were presented on a local, national and international level. All media releases and alerts were circulated via email to 1087 local, national and international media outlets.

## RANZCOG Awards

Sixteen universities in Australia, two in New Zealand and one in Papua New Guinea were involved in the selection of outstanding university students in obstetrics and gynaecology to receive the RANZCOG Women's Health Award 2014. This award helps foster awareness of the specialty among the medical students in Australia, New Zealand, Papua New Guinea and Fiji.

The College recognises the important role the media plays in informing the public and stakeholders. The RANZCOG Media Award of Excellence is presented annually by the President in recognition of the best piece of journalism that: effectively portrays the practice of obstetrics and gynaecology in a balanced and comprehensive manner in Australia and/or New Zealand, in a report and/or article primarily focusing on the specialty; and/or showcases the specialty's relationship with women's health generally in Australia and/or New Zealand. The successful recipient of the RANZCOG Media Award of Excellence for 2014 was New Zealand Herald Health Reporter, Martin Johnston, for his article on electronic fetal monitoring: Keeping track of baby's heartbeat; and Mum's births highlight value of monitoring.

### Julia Serafin

Manager, Media and Corporate Services



# Continuing Professional Development

In the past financial year, 2077 Fellows participated in the RANZCOG continuing professional development (CPD) program and a further 41 participated in approved overseas programs. Twenty-eight Fellows were randomly selected for, and successfully completed, the verification check process. During the year, 119 new Fellows entered the CPD program and 36 Fellows submitted a retirement declaration. RANZCOG has one Associate Member and 30 Educational Affiliates, with 29 Educational Affiliates participating in the RANZCOG CPD Program. Twenty-five Educational Affiliates have been elevated to Fellowship.

In the past 12 months the CPD Committee has achieved the following:

- CPD points for examination co-ordinators.
- CPD points for Fellows who provide verbal feedback to FRANZCOG and Subspecialty Trainees who have failed their written or oral examinations.
- CPD points for Fellows who write articles for non-peer-reviewed medical publications.
- Three RANZCOG Satisfaction Questionnaires were reviewed and the format changed to online via Survey Monkey.
- The Self-Adapted Patient Satisfaction Questionnaire was reviewed and the CPD points increased; this was to reflect the additional work involved in designing and completing a self-adapted questionnaire.
- Four surveys were approved for distribution to the RANZCOG membership.
- A New Zealand representative is to be appointed to the RANZCOG Media Award of Excellence Judging Panel.
- The accreditation of 284 Meetings.

During the financial year, the CPD Committee has granted extensions of nine to 12 months for eight Fellows, owing to ill-health or maternity leave, and the Fellowship Review Committee has granted 21 Fellows extensions of three months to complete their CPD requirements.

## Expert Witness Register

The CPD Committee has broadened the scope of educational activities recognised as a requirement for Fellows to be listed on the College Expert Witness Register. This resulted in the College Statement – C-Gen 1 Guidelines for College Fellows participating in the RANZCOG expert witness register – being reviewed and updated.

## CPD Online Program

The CPD Online program was launched in August 2013, with 1564 Fellows of the 2077 now participating in the CPD Online. This enables Fellows to record their CPD points, upload documents and track their CPD progress over the course of their three-year CPD period. In the new CPD Online program, the term Practice Audit and Reflection (PAR) replaces the term Practice Review and Clinical Risk Management (PR&CRM).

Tools to support Fellows with their entry into the new program include:

- CPD Online Instructional Video;
- CPD Online User Guide; and
- the RANZCOG CPD Handbook.

## Dr Vijay Roach

Chair, CPD Committee

## Val Spark

Senior Co-ordinator, CPD

# Asia Pacific & Global Women's Health

In 2014, the Asia Pacific Committee had a name change to the Asia Pacific & Global Women's Health Committee (APGWHC), in a move that reflects current terminology in global health development, while retaining the long-standing focus for the College in the Asia Pacific region. The work plan of the committee, as approved by the RANZCOG Board, provides a road map for initiatives relating to women's health, specifically in Pacific Island Countries (PICs), through targeted projects to support capacity building for obstetrics and gynaecology specialists and reproductive health workers using a multidisciplinary team approach.

Recognising the importance of teamwork and learning opportunities across disciplines, workshops are offered to both doctors and midwives. This team-learning approach was demonstrated in the RANZCOG Intra-Partum Care (IPC) workshop series, conducted in various PICs, through the Department of Foreign Affairs and Trade (DFAT)-funded Pacific Islands Project (PIP). The series concluded in September 2014, with workshops held in Tonga. This was followed by a detailed evaluation of the outcomes from the 12 workshops that had been held over the previous two-year period.

In March 2014, the Brian Spurrett Foundation was brought under the umbrella of the RANZCOG Foundation, following ten years of commitment by the RANZCOG Brian Spurrett Foundation Management Committee. The Brian Spurrett Foundation was established in 2004, following the death of Pacific-advocate and stalwart A/Prof Brian Spurrett, a leader in the College's educational efforts in the PICs and one of the founding fathers of the Pacific Society for Reproductive Health (PSRH). The Foundation had a clear focus on capacity building of the reproductive health workforce in the Pacific and achieved some remarkable successes over its life. This included 33 Brian Spurrett Fellowships for Pacific doctors and midwives, which enabled Fellows to widen their clinical perspective, professional views and leadership skills in Australia or New Zealand. An outcome of the Brian Spurrett Fellowship program has been the DFAT-funded RANZCOG Pacific Midwifery Leadership Fellowship Program, which currently provides around 16 Fellowships at the Liverpool and Nepean hospitals in Sydney each year. Initiatives begun by the Brian Spurrett Foundation will continue to work in harmony with PSRH in the future.

Over the year, the APGWHC has made significant advances in providing practical support to obstetrics and gynaecology specialists and reproductive health colleagues in our region, while also increasing networks to promote and support global women's health through increased opportunities for College members to

become involved and engaged. The APGWHC has continued to work through partnerships and collaborative agreements with the University of Papua New Guinea, the Fiji National University, Send Hope Not Flowers, regional obstetrics and gynaecology societies, Australian Volunteers International and other regional government and non-government organisations, as well as the Pacific Society for Reproductive Health (PSRH), where RANZCOG has been a long-time investment partner.

The Committee looks forward to continuing engagement with RANZCOG members and external partners.

**Dr Martin Ritossa**

Chair, Asia Pacific & Global Women's Health Committee

**Carmel Walker**

Senior Co-ordinator, Asia Pacific & Global Women's Health Services

# Provincial Fellows

The role of the Provincial Fellows Committee (PFC) is to advise the RANZCOG Board on all matters affecting obstetrics and gynaecology practice undertaken by Provincial Fellows. The PFC is also responsible for organising an Annual Scientific Meeting (ASM).

The Provincial Fellows ASMs provide an opportunity for rural Fellows to come together and discuss issues relevant to the provision of obstetrics and gynaecology services in rural Australia. These meetings also offer the chance to share experiences, develop networks and mix socially.

The FRANZCOG Provincial Training Pathway (pilot), established through significant input of the Provincial Training Working Party, chaired by Dr Tony Geraghty, was launched in February 2015 with a Year 1 Trainee undertaking the FRANZCOG Provincial Pathway Training Program at the Dubbo Base Hospital, NSW. A second Year 1 Trainee will undertake this FRANZCOG Training Program in Orange, NSW in 2016.

The Rural Obstetric and Anaesthetic Locum Scheme (ROALS) plays an important role in rural workforce retention and provides ongoing relief for Provincial Fellows. The Provincial Fellows Committee continues to advocate for sustainable Commonwealth government funding to support the rural obstetric workforce. In June 2015, RANZCOG received an extension of Commonwealth government funding for ROALS until 31 December 2015.

The Provincial Fellows Clinical Webinars provide Provincial Fellows with access to CPD on educational topics, broadcast over the internet. In 2014–2015, the following topics were delivered: integral theory in pelvic floor dysfunction, thyroid disease in pregnancy, the future of cervical screening, haemoglobinopathies in pregnancies, sex therapy for gynaecologists; and urogynaecology. Recordings of the webinars are available via the CLIMATE e-Learning portal.

The Rural Health Continuing Education (RHCE) program provides education opportunities that support CPD for specialists in rural and remote locations in Australia.

College project grants funded through the RHCE program and involving participation by Provincial Fellows in the past 12 months include:

- PRactical Obstetric MultiProfessional Training (PROMPT) project (RHCE funded until October 2014). PROMPT is a train-the-trainer program that focuses on improving teamwork between obstetricians, anaesthetists and midwives.
- Development of an audit app targeted specifically for rural Fellows.

## **Dr Anthony Geraghty**

Chair, Provincial Fellows Committee

## **Ms Elizabeth Perini**

Co-ordinator, Provincial Fellows Committee

# RANZCOG Foundation

The Foundation was established in 2014, following the transfer of the operations of the RANZCOG Research Foundation to the College. The College established the RANZCOG Foundation Management Committee to oversee the activities of the new RANZCOG Foundation.

The Foundation was formed to be a central place within the organisation for the College's philanthropic activities; it gives organisations and individuals a designated place within the College to donate funds and enable the College to promote fundraising activities. The Foundation will support the philanthropic activities of the Research Grants and Asia Pacific and Global Women's Health Committees by managing and raising funds for their use, without interfering in the autonomy or decision-making roles of these committees. With time, it is hoped that funds raised will grow the work of these committees as well as providing money for other worthwhile causes. In this regard, the Brian Spurrett Foundation Management Committee was disbanded during late 2014, and the associated funds and activities bearing the Brian Spurrett name are now managed and administered collaboratively between the Foundation and the Asia Pacific and Global Women's Health Committee.

Research scholarships previously offered by the RANZCOG Research Foundation continue to be offered by the College through the RANZCOG Foundation, and the 11 research scholarships, fellowships and travel awards offered for application in 2014 attracted 25 high-quality applications.

The process for evaluating scholarship applications has been revised with the aim of supporting the most promising early-career researchers. The RANZCOG Research Grants Committee will consider the applications at its meeting in September.

The recipients of RANZCOG Foundation scholarships, fellowships and grants commencing in 2015 are listed on the following page.

The College is very grateful to all those who have supported its philanthropic work in the past and is hopeful that this support will continue to grow under the RANZCOG Foundation.

**Dr Martin Ritossa**

Chair, RANZCOG Foundation Management Committee

**Delwyn Lawson**

Co-ordinator, Research Foundation



# Scholarship and Fellowship Recipients

Recipients of the scholarships available for application in 2014 were as follows:

## Ella Macknight Memorial Scholarship, 2015–2016

Recipient:	Dr Shakyalal (Shavi) Fernando
Project:	'Melatonin and infertility: Can we improve outcomes of assisted reproductive technology – a placebo controlled randomised controlled trial'
Institution:	Monash University
Supervisor:	A/Prof Luk Rombauts

## Glyn White Research Fellowship, 2015–2016

Recipient:	Ms Stella Liong
Project:	'Can dietary phytochemicals prevent the development of gestational diabetes?'
Institution:	Obstetrics and Gynaecology Department (Mercy Hospital for Women), The University of Melbourne
Supervisor:	A/Prof Martha Lappas

## Luke Proposch Perinatal Research Scholarship, 2015

Recipient:	Dr Sebastian Hobson
Project:	'The role of melatonin in mitigating oxidative stress in pre-eclampsia'
Institution:	Monash University
Supervisor:	Prof Euan Wallace

## Mary Elizabeth Courier Research Scholarship, 2015–2016

Recipient:	Dr Luke Larmour
Project:	'Factors influencing the progression of high-grade cervical dysplasia to invasive carcinoma'
Institution:	Monash University
Supervisor:	A/Prof Caroline Gargett

## RANZCOG Fellows' Clinical Research Scholarship, 2015

Recipient:	Dr Stefan Kane
Project:	'Maternal ophthalmic artery Doppler waveform analysis in the assessment and management of pre-eclampsia'
Institution:	The Royal Women's Hospital, Department of Perinatal Medicine
Supervisor:	Prof Shaun Brennecke

## Taylor-Hammond Research Scholarship, 2015

Recipient:	Dr Victoria Nisenblat
Project:	'Development and evaluation of plasma non-invasive diagnostic test for endometriosis'
Institution:	The Robinson Institute, School of Paediatrics and Reproductive Health, Obstetrics and Gynaecology Department, The University of Adelaide
Supervisor:	Dr Louise Hull

The following scholarship recipient was supported in their second year:

## Arthur Wilson Memorial Scholarship, 2014–2015

Awardee:	Dr Fiona Brownfoot
Project:	'Treating severe preterm pre-eclampsia with pravastatin: an early phase clinical trial'
Institution:	Mercy Hospital for Women
Supervisor:	A/Prof Stephen Tong

# Education Assessment Committee

The College has continued to progress a number of educational initiatives in the period covered by this report.

- Written feedback for candidates in the subspecialties written and oral examinations was introduced in late 2014. Candidates in all College written and oral examinations now receive feedback in relation to whether they scored 'Well Below', 'Below', 'At', 'Above' or 'Well Above' the minimum acceptable passing standard (MAPS) for each question or station in the examination.
- An investigation into near-miss fails in the MRANZCOG written examinations – multiple choice questions (MCQ) and short answer questions (SAQ) – 2010–2014 was undertaken to examine issues of fairness for candidates, particularly those falling within the category of near-miss fails. Process improvements for written examination results calculations were implemented from February 2015 to address this.
- Subspecialty Examination Question Writing Workshops have continued to facilitate the development of subspecialty oral and written examinations.
- Concurrent standard setting for the Subspecialties SAQ examinations was introduced in 2014 and a modified Rothmans criterion-referenced method of standard setting implemented.
- Formal feedback for examiners in the subspecialty written and oral examinations was introduced in late 2014. Examiners in Subspecialty SAQ and oral examinations are now provided with individual feedback on their marking with information on their standard setting and scoring ranges to further enhance examiner performance and examination reliability.
- The trial of a marking centre for examiners of the MRANZCOG SAQ written examination commenced in July 2014, to ascertain whether marking centres are able to assist examiners and improve inter-rater consistency and hence examination reliability. The results of the trial will be reported in November 2015.
- Trialling of online completion of the MRANZCOG and Subspecialties written examinations (SAQ component) commenced in August 2014 and has continued into 2015. A trial of online completion of the MRANZCOG MCQ component occurred in July 2015. The College is on track to deliver all written examinations online from 2017.
- Online marking of written (SAQ) examinations was trialled in early 2014 and is now in place for all College SAQ examinations.
- Workshops have continued to be facilitated to review and write questions to supplement the College's MCQ question banks.

Examinations conducted in the reporting period were as follows:

Written examinations	2/2014	Pass Rate (%)	1/2015	Pass Rate (%)	Total Candidates
MRANZCOG	67	75	82	55	149
DRANZCOG	112	83	66	89	178
CWH	31	61	18	78	49
Oral examinations					
MRANZCOG	35	51	73	81	108
DRANZCOG	94	93	54	93	148

## Additional Educational Activities

Further development of online resources to support specialist training continues and has led to:

- the release of the first of 23 Surgical Skills Companion Resources to help Trainees prepare for Surgical Skills assessments;
- the release of four online learning units assisting clinicians to manage issues of female genital mutilation;
- the release of eight updated online Clinical Educator Training units – these units are now compulsory for all new FRANZCOG Training Supervisors and recommended for all Training Supervisors and senior Trainees;
- four more instances of the *O&G Magazine* online app released to enhance the use of the content;
- ongoing releases of webcast content from presentations at RANZCOG events such as Provincial Fellows, Regional meetings, Revision courses, Webinars and ASMs;
- the expansion of educational resources available through the e-commerce portal;
- more Subspecialty resources available and increased access to these resources by RANZCOG Fellows and Trainees; and
- the release of four new Core Climate modules matched to the new Training Curriculum: medical and surgical conditions in pregnancy; obstetrics; gynaecology; and general surgical principles.

The Education Strategy Committee (ESC) has continued to review and refine initiatives to enhance the FRANZCOG training program as follows:

- development of five Advanced Training Modules (ATMs), including the Generalist and Essential Skills ATMs, Pelvic Floor Disorders ATM, Hysteroscopic and Laparoscopic Surgery ATM and Sexual and Reproductive Health ATM have been finalised and will be trialled by interested sites in 2016;
- Online Clinical Educator Training Modules have been made compulsory for Advanced Trainees and all new Training Supervisors;
- changes to the assessment of procedural and surgical skills (APSS) forms: all APSS are to be signed off as satisfactory, rather than competent for independent practice, by end of core training. The ESC emphasises that competence and independent practice is attained with experiential learning and further practice during Advanced Training;
- development of a Multi-Source Feedback (MSF) tool to assist Training Supervisors in the FRANZCOG Training Program;
- changes have been made to the ultrasound curriculum and requirements;
- minor additions have been made to the obstetric section of the curriculum;
- a basic obstetric skills workshop (to be introduced in 2016) has been developed for all year 1 Trainees;
- guidelines for training in resource-poor settings; and
- guidelines for developing a Provincial Core Training program.

### Prof Ian Symonds

Chair, Education and Assessment Committee

### Lyn Johnson

Director of Education

# Training Accreditation Committee

During the period 1 July 2014 to 30 June 2015, the RANZCOG Training Accreditation Committee (TAC) focused on the following areas.

## Membership/Fellowship Elevation

The TAC considered and recommended to the Board 87 applications for Membership and 81 applications for Fellowship (of these, 25 were joint Membership/Fellowship applications).

## Core Training Hospitals

The TAC approved the accreditation of Fiona Stanley Hospital (WA), Rockingham Hospital (WA) and Whanganui Hospital (NZ) for Core Training. The total number of RANZCOG-accredited sites in Australia and New Zealand is now 109.

The College's second four-yearly re-accreditation cycle is now in progress. In the past 12 months, 50 Core Training sites underwent re-accreditation. This includes four-yearly re-accreditation visits, follow-up visits to hospitals where there were significant concerns about training delivery, and standard follow-up visits to newly accredited sites 12 months after accreditation to assess how they are progressing. To ensure that all Trainees and Training Supervisors at sites undergoing re-accreditation are informed of the College's findings, the TAC recommended to the Board that a precis of site visits reports, including commendations and recommendations, be circulated to the Trainees and supervisors at the relevant site. The RANZCOG hospital re-accreditation guidelines, first developed in 2006, are currently being revised. The revised guidelines will address both Core and Advanced Training, and the accreditation standards have been reworded to make them more specific and directive in order to clearly communicate College requirements to the hospitals and ensure greater consistency in the assessments made by hospital re-accreditation teams.

## Specialist Training Program

There are 31.5 full-time equivalent (FTE) posts currently funded under the Commonwealth Department of Health's Specialist Training Program (STP), which has enabled the College to expand training opportunities for registrars in settings other than public hospitals – particularly in areas such as ultrasound, infertility and general gynaecological surgery. In the Tasmanian arm of the STP, 4.0 FTE training posts have been funded, as part of the government's commitment to increasing specialist training opportunities in that state.

## Working Groups

The Ultrasound Working Group has worked closely with the Education Strategy Committee to improve ultrasound training in the FRANZCOG program, including: a revised clinical imaging section of the curriculum; revised CLIMATE modules and multiple choice questions on biometry, 1st trimester and 2nd/3rd trimester; a new assessment of procedural and surgical skills for ultrasound; a revised ultrasound procedural list for the new eLogbook; and a new ultrasound training program to commence in December 2016, which will include in-hospital training in each integrated training program (ITP) and compulsory attendance at any approved ultrasound workshop by all FRANZCOG Trainees by the end of Year 2.

The Anatomy Working Group has worked closely with the Education Strategy Committee and the eLearning Department to address the need to enhance 'Trainees' knowledge of anatomy through the development of practical applied anatomy modules, which take Trainees step-by-step through filmed surgical procedures, and the purchase of licenses for two external anatomy modules.

## ePortfolio

TAC has liaised with external consultants and College staff in the development of the new ePortfolio system for all FRANZCOG assessment documentation, which will commence in December 2015, with the introduction of the eLogbook.

## Roles of the ITP Co-ordinator and Training Supervisor

In recognition of the importance of the role of the ITP Co-ordinator and to ensure a consistent approach, the RANZCOG position description for ITP Co-ordinators was revised to include an additional section on the terms of appointment, including formal application to the relevant regional TAC. The position description was also amended to emphasise the ITP Co-ordinator's key role within the ITP, which should be to facilitate communication between participating sites and between those sites and the relevant regional TAC.

To better prepare FRANZCOG Training Supervisors for their role, the TAC recommended to the Board that it be a compulsory requirement for all prospective Training Supervisors to complete the Clinical Educator Modules on CLIMATE as part of the application process. These modules range from an introduction to adult learning and teaching/learning styles to communication and the processes of evaluation, appraisal and assessment. Eight one-day workshops for Training Supervisors and senior Trainees interested in becoming supervisors (after elevation to Fellowship), have been conducted in the past 12 months. The workshops include teaching/learning behaviours, providing constructive feedback and supporting Trainees in difficulty.

## Terms of Reference for Regional TACs

The Terms of Reference were completely revised to incorporate recent changes to the FRANZCOG Training Program and the administrative/monitoring role of the regional TACs, and to bring the processes for these committees in line with other College bodies.

## Guidelines on Trainee Transfers

New guidelines were developed to guide regional TACs in the process for approving or rejecting applications from Trainees to transfer from one state/region to another.

### Dr Sarah Tout

Chair, RANZCOG Training Accreditation Committee

### Shaun McCarthy

Manager, Training Services

# GP Obstetrics Advisory Committee

The General Practice Obstetrics Advisory (GPOA) Committee was formed in 2005, to represent the views of Diplomates within the College, thus providing an opportunity to give input relating to continuing professional development and College Statements. Since then, the GPOA Committee has expanded its activities in the representation of Diplomates.

Elections for the GPOA Committee were held in August 2014 and the current membership for the 2014–2016 term is as follows:

## **Intrapartum Care representatives**

Dr Penelope Wilson – Broome, WA  
Dr Nathan Kesteven – Whian Whian, NSW  
Dr Carl Henman – Wagga Wagga, NSW

## **Shared Care representatives**

Dr Vanessa Hewson – Hobart, TAS  
Dr Martin Byrne – Oakey, QLD

## **Co-opted Member**

Dr Louise Sterling, Trafalgar, VIC

## **Membership in 2014–2015**

RANZCOG Certificant/Diploma membership increased by 12 to 2522 in the 2014/2015 financial year; of which 352 hold the DRANZCOG advanced, 1735 DRANZCOG, 59 Certificate of Women's Health and 376 hold the DipRACOG.

There are 1944 Diploma holders and 21 Certificate of Women's Health holders with Women's Reproductive Health requirements for the 2014-2016 triennium.

In this reporting period 22 Certificants/Diplomates have resigned and 24 were removed from the Register of Diplomates due to being unfinancial.

## **Diplomates Days**

A RANZCOG Rural Obstetrics Day was held at the Rural Medicine Australia 2014 conference. This conference was held in Sydney in October 2014 and organised by the Australian College of Rural and Remote Medicine (ACRRM) and the Rural Doctors Association of Australia (RDAA). Twenty-one participants attended the Obstetrics Day. The presentations have been made available on the CLIMATE eLearning portal of the RANZCOG website for all participants to access.

Two Diplomates Days were held at the RCOG World Congress, a Joint RCOG/RANZCOG Event held in Brisbane, QLD 11–12 April 2015 as part of the pre-conference workshop program. There were 103 participants with the majority staying on for the World Congress. The presentations from both days have been made available on the CLIMATE eLearning portal of the RANZCOG website for all participants to access.

## **Dr Martin Byrne**

Chair, GP Obstetrics Advisory Committee

## **Meagan Buttigeig**

Co-ordinator, GP Obstetrics Advisory Committee



# Specialist International Medical Graduates

The Specialist International Medical Graduate (SIMG) Assessment Committee oversees the processes for the assessment of SIMGs and the training or oversight of SIMGs accepted on to the pathway to Fellowship. The Committee oversees the appointment of assessors who conduct both initial (paper based) assessments and interviews for eligible candidates. In the reporting period, there were 28 assessors on the assessor panel, including four consumer representatives.

## Assessment and Training Activities

The SIMG applications received and assessment outcomes for 2014/2 and 2015/1 were:

SIMG Assessment	NEFI	EFI	P/W	SC	PC	NC	Total
2014/2	3	24	5	10	8	9	32
2015/1	5	18	3	13	7	4	26

*NEFI not eligible for interview; EFI eligible for interview; P/W pending or withdrawn; SC substantially comparable; PC partially comparable; NC not comparable*

Three SIMG AoN applications were received and assessed in the reporting period:

AoN Applications	S	NS	Total
2014/2	1	0	1
2015/1	2	0	2
Total	3	0	3

*S assessed as suitable for AoN position; NS assessed as not suitable for AoN position*

A total of 110 SIMGs were undertaking the training/oversight requirements in the reporting period.

SIMG Oversight/Training	SC	PC	Total
2014/2	24	27	51
2015/1	25	34	59
Total	49	61	110

*SC substantially comparable; PC partially comparable*

Elevated to Fellowship	Australia	New Zealand
2014/2	21	4
2015/1	11	5
Total	32	9

In New Zealand, the College conducts assessments of SIMGs as an advisory board to the Medical Council of New Zealand (MCNZ), in order for the Council to grant registration in the vocational scope of obstetrics and gynaecology.

NZ Outcomes	C (Option A)	C (Option B)	NC	Total
2014/2	3	1	2	6
2015/1	3		1	4
Total	6	1	3	10

*C Option A Comparable (12 months of supervised practice); C Option B Comparable (12–18 months of supervised clinical experience and assessment); NC Not comparable*

International Medical Graduates (IMGs) make application to the College for approval of training in obstetrics and gynaecology in short-term training positions in Australian hospitals.

SST Applications	Received	Approved
2014/2	13	14
2015/1	16	12
Total	29	25

## SIMG Program Enhancements

In the reporting period, the following program developments were undertaken in the SIMG area:

- A new pathway for SIMG assessment was implemented in July 2014, and all processes reviewed and updated at this time, including the introduction of guidance for assessors, second opinion processes for applicants deemed 'not eligible for interview' and annual assessor workshops.
- Additional SIMG assessors were recruited.
- The SIMG Mentoring Program for SIMGs was implemented.
- An English language requirement for applicants was introduced in November 2014.
- A new administrative position in the SIMG team was approved in March 2015, to assist with SIMG assessment processes, inform continuous improvement and undertake research and reporting functions.

### Dr Ben Bopp

Chair, Specialist IMG Assessment Committee

### Lois Lowe

Manager Educational Services

# Trainees' Committee

During the period 1 July 2014 to 30 June 2015, the Trainees' Committee held three teleconference meetings and one face-to-face meeting at College House. Major initiatives by the Trainees' Committee over this time have included:

- Under the chairmanship of the Chair of the Trainees' Committee and in close liaison with the Education Strategy Committee (ESC) and the Training Accreditation Committee (TAC), the Ultrasound Working Group has developed new initiatives to improve ultrasound training in the FRANZCOG program, including a revised clinical imaging section of the curriculum; revised CLIMATE modules and multiple choice questions on Biometry, 1st Trimester and 2nd/3rd Trimester; a new assessment of procedural and surgical skills for ultrasound; a revised ultrasound procedural list for the new eLogbook; and a new ultrasound training program to commence in December 2016, which will include in-hospital training at the home/base hospital in each integrated training program (ITP) and compulsory attendance at an approved internal/external ultrasound workshop by all FRANZCOG Trainees by the end of Year 2.
- Helped develop the new ePortfolio system for all FRANZCOG assessment documentation, which will commence in December 2015 with the introduction of the eLogbook.
- Represented Trainees on the newly established Obstetric Skills Working Group to develop a compulsory, obstetric-focused workshop for first-year Trainees, in addition to the existing Basic Surgical Skills (BSS) Workshop, in order to support the safety of new Trainees and their patients on the labour ward.
- Under the chairmanship of the Chair of the Trainees' Committee and in liaison with the ESC and the eLearning Department, the Anatomy Working Group has been addressing the need to enhance Trainees' knowledge of anatomy through the development of practical applied anatomy modules, which take Trainees step by step through filmed surgical procedures and the purchase of licenses for two external anatomy modules (after vetting by the Trainees' Committee).
- Worked with the eLearning Committee to develop other new online modules to support training.
- Represented Trainees on the BSS Working Group, which is currently revising the syllabus for the compulsory workshop for first-year trainees to ensure consistency of format and content across all regions, as well as developing a manual to accompany the workshop.
- Represented Trainees on the Pre-vocational Working Group, which is developing learning and assessment frameworks for junior doctors interested in specialist training, and the Engagement Committee, which is investigating ways of increasing the involvement of Fellows in the activities of the College.
- Worked with the Research Assessment Subcommittee to enhance the College's support of Trainees' compulsory research requirement, including reviewing research modules on CLIMATE and contributing to the establishment of a new database of RANZCOG-approved research projects over the past two years. In addition, the Trainees' Committee has been in discussion with the Education & Assessment Committee (EAC) to extend the deadline for submission/approval of research proposals (to the end of Year 2 for submission and end of first semester Year 3 for approval) to give Trainees more time to finalise their proposals.
- Represented Trainees on the Selection Committee that oversees the selection process for entry to the specialist training program and supported new initiatives to enhance the effectiveness of the process, including in-hospital ranking of candidates and situational judgement testing of candidates (post-interview) to more accurately assess their suitability for the discipline.

- Continued to review RANZCOG Trainee numbers and their impact on available clinical experience.
- Contributed to the ongoing review of the MRANZCOG and DRANZCOG Written and Oral Examinations by the EAC, particularly the provision of effective feedback to unsuccessful candidates.
- Represented RANZCOG Trainees at the AMA Council of Doctors in Training Forums held in February and June 2015.
- Provided ongoing support for, and active encouragement of, Trainees' Days at RANZCOG Annual Scientific Meetings.

Committee members have acted as Trainee representatives on the following bodies:

- the EAC;
- the TAC and each Regional/New Zealand TAC;
- the ESC;
- Regional Committees;
- the Women's Health Committee;
- the Continuing Professional Development Committee;
- RANZCOG Council;
- the eLearning Committee;
- the Trainee Selection Committee;
- the Progression Review Committee;
- the Ultrasound Working Group;
- the BSS Working Group;
- the Obstetrics Skills Working Group;
- the Pre-vocational Working Group;
- the Engagement Committee;
- the O&G Magazine Advisory Group;
- RANZCOG Core Training hospital re-accreditation teams;
- interview panels for FRANZCOG Trainee selection;
- the Recognition of Prior Learning Assessment Subcommittee;
- AMA Doctors in Training Forums;
- RANZCOG Workforce Advisory Group (New Zealand); and
- RANZCOG Maori Advisory Group (New Zealand).

## **Dr Kate van Harselaar**

Chair, Trainees' Committee

## **Shaun McCarthy**

Manager, Training Services

# Subspecialties

## Certification

The College offers five subspecialty training programs. In the past 12 months, 12 Fellows completed the training and assessment requirements for certification:

Gynaecological Oncology (CGO)	1
Maternal Fetal Medicine (CMFM)	1
Obstetrical & Gynaecological Ultrasound (COGU)	3
Reproductive Endocrinology & Infertility (CREI)	5
Urogynaecology (CU)	2

The number of current certified subspecialists is as follows: CGO 56; CMFM 54; COGU 44; CREI 77; CU 37. The total number of certified subspecialists is 268. All eligible subspecialists have met the recertification pathway requirements.

## Training

The table indicates numbers of Trainees in the five Subspecialty Training Programs as of June 2015.

Subspecialty	Year 1	Year 2	Year 3	Year 3+*	Total
CGO	2	3	3	5	13
COGU	4	2	1	1	8
CREI	7	5	2	7	21
CMFM	10	5	6	8	29
CU	8	4	0	2	9
Total	26	19	12	23	80

\* Year 3+ includes Trainees who have completed the training component but not the assessment component and those Specialist International Medical Graduates (IMGs) who have been assessed as substantially comparable to an Australian-trained subspecialist and who are waiting to complete the relevant examination/s.

## Subspecialty National Selection Process 2015

In 2015, 50 applications for subspecialty training were received for commencement in the 2016 training year. Of these, 38 candidates were interviewed, and 24 were deemed eligible for selection to enter subspecialty training for 2016 entry: CGO 4; CMFM 6; COGU 2; CREI 7; and CU 5.

## Accreditation of Subspecialty Training Units

Eight subspecialty training units have been re-accredited for subspecialty training in the period July 2014 to June 2015. Four new training units have been accredited – CMFM 1; CREI 3. The number of current accredited training units is as follows: CGO 12; CMFM 17; COGU 7; CREI 15; CU 10. The total number of accredited subspecialty training units is 61.

## Certificate of Recognised Training (CORT)

The Certificate of Recognised Training (CORT) is only available to international medical graduates and is not a recognised qualification in Australia/New Zealand. CORT trainees are allowed to undertake training in

RANZCOG-approved subspecialty training units for up to two years. Candidates are not required to complete a research project or the subspecialty examinations. Currently two candidates are registered in CORT training in CGO and CU.

## Key policy decisions and regulation changes

The implementation of workplace-based assessments (WBAs) that was initiated in 2014, has been completed for all subspecialties. The WBAs in use are:

- CGO – Multi-Source Feedback for Year 1 Trainees and Surgical Skills Assessments;
- CMFM – Assessment of Procedural Skills, In-Hospital Clinical Examination and Multi-Source Feedback (remedial);
- COGU – Research Based Discussions and Multi-Source Feedback (remedial);
- CREI – Multi-Source Feedback for Year 1 Trainees and Assessment of Procedural Skills; and
- CU – Multi-Source Feedback for Year 1 Trainees, Directly Observed Procedural Skills and Research-based Discussion.

The Subspecialties Committee has undertaken a review of the processes used for Subspecialties National Selection.

Regulation changes in the past year include:

- Eligibility to commence training. Regulations have been reviewed and ratified with respect to commencement of subspecialty training for FRANZCOG trainees and international medical graduates; and also with respect to commencing subspecialty training the year following selection or needing to re-apply through the national selection process.
- Registration/Annual Payment Fee. Regulations have been reviewed and ratified with respect to payment of training fees during extended leave of absence.
- Fractional/part-time training. Regulations have been reviewed and ratified with respect to leave taken for the purposes of professional development and leave taken for the purposes of studying for the relevant subspecialty examinations.
- Extended Leave of Absence. Regulations have been reviewed and ratified with respect to extended leave of absence duration and needing to be prospectively approved.
- Assessment of Specialist International Medical Graduates: Assessment for Recognition as a Subspecialist in Australia and New Zealand. Regulations have been reviewed and ratified with respect to the minimum and maximum period of supervised practice for Partially Comparable Applicants.

### Dr John Tait

Chair, Subspecialties Committee

### Jolene Davidson

Senior Co-ordinator, Training Program

# Women's Health

The Women's Health Committee (WHC) advocates for women's health issues on behalf of the College's Fellowship. It develops clinical advice on issues relating to many aspects of women's health and is responsible for the ongoing revision of the College's suite of statements and guidelines. In 2014–2015, WHC activities have included:

- revision of 38 College statements;
- completion of the review of the Joint RANZCOG/HGSA prenatal screening documents Prenatal Screening and Diagnosis of Chromosomal and Genetic Abnormalities in the Fetus in Pregnancy (C-Obs 59) and Prenatal Assessment of Fetal Structural Abnormalities (C-Obs 60);
- development of the following RANZCOG patient information sheets
  - Red Blood Cell Alloimmunisation
  - Monitoring the Baby's Heart Rate in Labour(These patient information sheets can be downloaded from the women's health section of the RANZCOG website free of charge.)
- endorsement of the following guidelines and statements from external organisations:
  - Monash University Women's Health Research Program – A Practitioner's Toolkit for Managing the Menopause;
  - Royal Australian College of General Practitioners – Female Genital Cosmetic Surgery, A Resource for General Practitioners and other Health Professionals;
  - National Blood Authority- Patient Blood Management Guidelines Module 5: Obstetrics and Maternity.

The WHC publishes Communiqués for topical issues requiring a position statement from the College. Communiqués were published for: Pertussis immunisation in third trimester of pregnancy; and Ebola and Pregnancy.

The College through the WHC provides advice to various Federal and jurisdictional Government committees and other external organisations as requested. This year, these activities have included:

- contributing to the Australian Health Minister's Advisory Council (AHMAC) Consultation on the National Elective Surgery Urgency Categorisation Guidelines;
- providing feedback on the Queensland Clinical Guidelines Vaginal Birth After Caesarean Section and Obesity in Pregnancy Guidelines;
- participating in an expert panel convened by the Australian Red Cross and the National Blood Authority regarding the use of Rh(D) Immunoglobulin in patients with a body mass index > 30 and developed of a consensus position statement on this topic;

- Liaising with Pfizer regarding the withdrawal of the drug Prostin F2 Alpha;
- accepting an invitation from NPS MedicineWise to join the Choosing Wisely Australia initiative, an initiative that encourages health care stakeholders to consider and discuss medical tests and procedures that may be overused, unnecessary or harmful;
- responding to Coronial recommendations from various State and Territories;
- membership of the Diagnostic Imaging Advisory Committee (DIAC); and
- membership of the RHCE Program Management Committee.

## Indigenous Women's Health

The College continues to strengthen its commitment to improving the health and wellbeing of Aboriginal and Torres Strait Islander women and babies. In 2014-2015, the Aboriginal and Torres Strait Islander Women's Health Committee's key activities have included the implementation of the College's first Reconciliation Action Plan (RAP) and the development of an Online Learning Module. Planning for the next RANZCOG Indigenous Women's Health Meeting (IWHM), to be held in 2017, has commenced.

### **A/Prof Stephen Robson**

Chair, Women's Health Committee

### **Michele Quinlan**

Director, Women's Health Services



# Historical Collections

The historical collections comprise some very rare and valuable items that are highly valued by researchers from overseas. Visitors are often surprised at the breadth of the collections and it is thanks to the foresight of Fellows such as Dr Frank Forster that the collections exist.

The College acknowledges the following donors for their gifts, which included books, instruments, personal papers, MRCOG case records, decorative and crested items: Prof D Saunders, Prof C de Costa, Prof N Beischer, Dr J Murray, Dr M Payne, Dr P Heath, Dr E Miller, Dr R Hyslop, Prof G Burton, Dr D Tibbits, Dr J Campbell, Hon R Kemp, Ms K Marsden, Dr J Green, Dr M Schramm and Mr Richard Forster.

The archives continued to receive a significant number of enquiries from College members and members of the public in Australia and also hosted visiting researchers from overseas. Consignments of records were transferred from the New Zealand office of RANZCOG to be placed in the permanent College Archives.

The Frank Forster Library received a large number of book donations during the year. Conservation of the rare books continued and access to the rare book collection was improved with the addition of shelf labels as guides. Shelf labels have also been installed in the Frank Forster Library. Income from the Frank Forster Memorial Fund provided funds to cover some of the conservation work undertaken and the purchase of new books.

The museum curator has been busy recording the 30 most significant items in the Museum on the Museums Australia (Victoria) website. This initiative will allow members of the public to view some of the most interesting items in the Collection. Museum donations included a large number of items from the Royal Australasian College of Surgeons – infant weighing scales, various specula, obstetric forceps and abdominal retractors – and various other instruments from Fellows.

In April, a morning tea was held for the Friends of the College Collection to acknowledge their generous contributions to the historical collections. About 40 Friends attended and were welcomed by Prof Michael Permezel, the President, and Prof Caroline de Costa, the Honorary Curator. The guests were shown some of the gems of the Collection. The President thanked the Friends for their generous contributions, which amounted to a total of \$2,850 this year. The money was spent on purchasing an Indigenous art work for the College and also the conservation of items in the Collection. The Friends of the College Collection support the ongoing costs of developing, maintaining and conserving the Collections.

In June, we were advised of the resignation of Sue Cawthorn, the librarian, who was leaving us to enjoy her retirement. We wish her well and acknowledge her excellent contribution to the historical collections.

## **Dr Bernadette White**

Chair, Historical Collections Committee

## **Gráinne Murphy**

Museum Curator

## **Rosalind Winspear**

Archivist

# New Zealand

The New Zealand Committee (NZC) and staff have had another productive year, working to promote excellence in women's health. The committee membership was stable throughout the year and warm thanks are given to all members for their commitment and energy. The NZC is the peak medical organisation working for women's health within New Zealand. A great deal of attention is paid to building strong working relationships with other colleges, organisations, senior politicians and health officials to ensure that quality women's health services are accessible and sustainable. In the New Zealand maternity system, obstetricians and midwives work closely together, individually as well as through the colleges. There is a stated commitment to the seamless, collaborative care of pregnant women and their babies.

As well as core RANZCOG business, the committee also oversees activities such as extra Trainee programs, Fellows' updates, specialist international medical graduate (SIMG) assessments and a practice visit program. The NZC would not be able to achieve all it does without the strong support of its sub-committees. Grateful thanks are owed to the Training and Accreditation Committee (NZTAC), SIMG Assessment Committee and panellists, Practice Visit Sub-Committee and practice visitors and He Hono Wahine, which has flourished over the last year under the leadership of Dr Leigh Duncan. Highlights for the NZC included:

- the inaugural meeting (hui) of He Hono Wahine, held on a local marae in November 2014 and attended by College President, Prof Michael Permezel;
- the initiation of a cultural competence module, being written by Maori Fellows through He Hono Wahine – to assist all College members improve their practice;
- the launch of a Fellowship Update Program;
- ultrasound training developments; and
- a lively training program organised by NZTAC, including anatomy courses, ultrasound, LapSim, and mock OSCE exams.

The NZC focused on two major priorities identified in its 2014 election briefing: the need for a structured, integrated plan to reduce the number of unintended pregnancies, particularly in deprived areas, and reducing potentially avoidable stillbirth. Work continued with Medical Council of New Zealand (MCNZ), Council of Medical Colleges (CMC) and Health Workforce New Zealand (HWNZ) on a wide range of issues, including the vulnerability and criticality of certain specialties: there is a serious lack of training and a dearth of career opportunities for maternal-fetal medicine specialists and gynae-oncologists.

As well as recognising the valuable contribution made by members of the NZC, sub-committees and staff, thanks are owed once again to the Board, Council and staff members in Australia for their collegiality and assistance.

## **Dr Ian Page**

Chair, New Zealand Committee

## **Jane Cumming**

Executive Officer, New Zealand Office

# New South Wales

The NSW Regional Committee currently comprises eight elected Members plus a Provincial Representative, seven ex-officio members, two Trainee representatives and one Diplomates' representative. The Committee meets every two months and serves more than 1700 NSW Fellows, Members, Trainees, Educational Affiliates, Diplomates, DRANZCOG Adv/DRANZCOG/CWH trainees and Retired Fellows.

The NSW Regional Committee office is located in the Australian Medical Association (AMA) building, at St Leonards, and is supported by one full-time staff member and two part-time staff. The Committee is working on plans to relocate to the ground floor of the AMA Building in late 2015.

Education activities are the main focus of the NSW Regional Committee. A MRANZCOG Oral Pre-Examination Course was held in September 2014, followed by a MRANZCOG Written Pre-Examination course in October 2014. Both courses were attended by Trainees from Australia and New Zealand. A DRANZCOG Revision Course was held in November 2014 and an FSEP Workshop in February 2015. Members of the Education Subcommittee attended various careers events.

Three educational evenings for NSW Fellows were held during the year and two luncheon meetings were held for NSW Senior Obstetricians and Gynaecologists.

The NSW/ACT Training Accreditation Committee (TAC) held four meetings. This Committee comprises a Chair, nine Training Co-ordinators and two Trainee representatives. The Committee appointed 31 year 1 Trainees for the 2015 clinical year. In 2015, the Dubbo Provincial Program commenced, with one Trainee appointed.

The NSW TAC has continued its annual program of three full-day education days for NSW registrars. The first education day each year includes orientation for Year 1 Trainees and a welcome function at the end of education sessions.

The NSW Regional Committee continues to provide representatives for NSW Health committees, working groups and hospital selection panels.

Current issues facing the NSW Regional Committee include supporting the specialist workforce in rural NSW and balancing service provision and training opportunities in NSW.

## **Prof Gabrielle Casper**

Chair, New South Wales Regional Committee

## **Lee Dawson**

Executive Officer, New South Wales Regional Office

# South Australia/Northern Territory

## 2014 DRANZCOG Pre-Exam and GP Revision Course

The 2014 DRANZCOG Pre-Exam and GP Revision Course was held 18–20 July 2014. This year RANZCOG hosted 14 candidates for the annual course. All registrations were done in IVvy Management System. The GPs who attended the course qualified for 40 RACGP QI&CPD Category One points as well as ACCRM 30 PRPD points, 30 O&G and a two-day grant in obstetrics. The summary of feedback evaluations was positive.

## FRANZCOG training

The 2014 selection process resulted in the selection of six Trainees for Year 1 in 2015. The standard was once again high with many keen local applicants not attaining a place in the FRANZCOG training program. All major teaching hospitals are to be congratulated not only on their support of the junior Trainees, but also in their mentoring of those aspiring to become Trainees. Current rotations are performing well.

## Birth Masterclass

Following the success of three Birth Masterclass workshops in the previous 12 months and the unprecedented demand, a further workshop was arranged in Adelaide in August 2014 for 20 registrants in the Education Centre, Women's and Children's Hospital. This was a full-day practical workshop, specifically designed for senior registrars and obstetric on-call consultants to refine their skills in advanced obstetrics. Participants were able to join senior obstetricians to learn how to select and counsel women about planned vaginal breech delivery, selected vaginal twin delivery and rotational forceps delivery. Included in the course was a refresher station on neonatal resuscitation conducted by an experienced neonatologist/paediatrician. There was a dedicated session on troubleshooting, dealing with unreasonable demands of patients, when to abandon attempts at vaginal birth, discussion of difficult cases which were dealt with in detail. True to its aims since inception, no course examination was required. Excellent reference materials were provided as part of the registration. As with the previous workshops, 8 RANZCOG PR&CRM CPD points were awarded for attendance. The team members were as follows:

- A/Prof John Svingos (Convenor);
- Dr Henry Murray (Co-convenor, Newcastle);
- A/Prof Stephen Robson (Co-convenor, Canberra);
- A/Prof Ted Weaver;
- Dr Chris Wilkinson;
- Dr Bill Antonas;
- Dr Darren Roberts;
- Dr Mojgan Vatani;
- Dr Anthia Rallis;
- Dr Chris Munt (paed);

- Leanne Stacey RN;
- Jennie Magor RN, RM; and
- Ms Tania Back (administrative support).

As a result of the popularity, success and continued demand for these workshops, further Birth Masterclass workshops were incorporated into the programs of The RCOG World Congress, Joint RCOG/RANZCOG Event in Brisbane, April 2015 and the SA/NT&WA Scientific Meeting, Adelaide, November 2015.

## Communications Workshop

The SA/NT Regional Office hosted a communications workshop for Trainees on 26 September 2014 at the conference facilities at the Calvary Hospital, North Adelaide. This year RANZCOG hosted 16 Trainees. The feedback received from attendees was positive.

## RANZCOG Board Q&A Evening

The SA/NT Regional Committee hosted the RANZCOG Board and local members for a Q&A session at the Old Lion, North Adelaide. The board members were presented with five questions from the SA/NT Regional Committee to address. The feedback received from members was positive.

## New Trainee Induction Evening

We welcomed our new 2015 Trainees as well as those who have transferred from interstate to train in South Australia. Dr Heather McKay, Dr Aimee Woods, Dr Robert Carey, Dr Alexandra Carey, Dr Mandana Master, Dr Kate Martin are the new Year 1 Trainees in 2015.

## 2015 DRANZCOG Pre-Exam and GP Revision Course

The 2015 DRANZCOG Pre-Exam and GP Revision Course was held 1–3 May 2015, and attended by 20 participants. All registrations were done in IVvy Management System. The GPs who attended the course qualified for 40 RACGP QI&CPD Category One points as well as ACCRM 30 PRPD points, 30 O&G points and a two-day grant in obstetrics. The summary of feedback evaluations was overall positive.

### Dr Roy Watson

Chair, South Australia/Northern Territory Regional Committee

### Tania Back

Executive Officer, South Australia/Northern Territory Regional Committee

# Queensland

The Queensland Regional Committee (QRC) continued its ongoing education program for Fellows, Trainees and Diplomates throughout this year. These programs, which included Membership pre-exam and DRANZCOG update courses, are organised by the QRC and are heavily reliant on the pro bono contribution of Fellows, without whose goodwill they would not be the success they are.

Queensland was very pleased to be the host region for the RCOG World Congress 2015, Joint RCOG/RANZCOG Event. This College-wide activity was an outstanding success, and the QRC is grateful of the contribution of Queensland Fellows who were involved in its planning during the preceding three years.

Other activities the committee has been involved in include

- participation in the meetings of the Queensland Council of Medical Specialist Colleges;
- contribution to, and review of, state-wide clinical guidelines;
- correspondence with the Minister for Health to ensure ongoing funding for the Queensland Maternal and Perinatal Quality Council;
- attendance at various vocational exhibitions to provide insight for students considering future career paths; and
- providing representatives to represent the College on various advisory groups.

The Queensland Training Accreditation Committee undertook a significant amount of work this year by completely reviewing and revising the four-year Core Training rotations for Trainees commencing training in Queensland in 2015. These changes will result in Trainees, regardless of rotation, enjoying a similar overall training experience. The contribution of all committee members and/or Training Supervisors to the training of future Fellows is greatly appreciated.

The Committee farewelled administrative officer, Ms Wendy Morrison, who left the College after nine years' service, and welcomed Ms Karen Young to the role.

## **Dr Carol Breeze**

Chair, Queensland Regional Committee

## **Lee-Anne Harris**

Executive Officer, Queensland Regional Office

# Tasmania

The Tasmanian Regional Committee (TRC) continues to represent the interests of Fellows, Diplomates and Trainees in obstetrics and gynaecology in Tasmania. Dr Emily Hooper has continued in the role of Chair of the TRC for the 2014–2015 period.

Representation continues on various external committees and bodies by Tasmanian members, including University of Tasmania Medical Advisory Committee, Tasmanian Perinatal Mortality and Morbidity Committee (IPMMC) and the Tasmanian Audit of Surgical Mortality.

Dr Naomi Saunderson has taken on the role of ITP Co-ordinator of the Tasmanian Integrated Training Program this year. Dr Saunderson took over this role from ITP Co-ordinator, Dr Stephen Raymond. There are 11 Trainees completing various levels of training in Tasmania. In addition, Launceston continues to act as a rural training site, supporting Victorian and ACT Trainees.

As with last year, two new Trainees have been recruited to commence in 2015. Both trainees commenced their training at Royal Hobart Hospital. In an effort to make Tasmania a more attractive option for prospective Trainees, the Training and Accreditation Committee changed the rotation structure to allow Trainees to complete one-year placements in the different training hospitals.

An instrumental deliveries workshop was held at Royal Hobart Hospital in July 2014 to allow Trainees the opportunity to practice and refine their skills in this area.

The Committee thanks all Tasmanian members for their ongoing support and participation in Tasmanian regional events.

## **Dr Emily Hooper**

Chair, Tasmanian Regional Committee

## **Mathew Davies**

Executive Officer, Tasmanian Regional Committee



# Victoria

## RANZCOG 2014 Victorian/Tasmanian Annual Scientific Meeting

The Royal Australian and New Zealand College of Obstetricians and Gynaecologists 2014 Victorian and Tasmanian Annual Scientific Meeting (RANZCOG 2014 VIC/TAS ASM) was held at the Rydges on Swanston, Carlton, from 14–17 August 2014. The scientific program showcased the latest and greatest in the specialty, and covered where the profession is heading in the 21st century. A number of pre-meeting workshops gave delegates an opportunity to develop and refine skills. The social program was well received, with the highlight being the conference dinner held at the iconic Eureka 89.

A big thank you must go to the Organising Committee consisting of:

- Dr Alison Fung – Convenor
- Dr Lisa Hui – Scientific Chair (obstetrics)
- A/Prof Beverley Vollenhoven – Scientific Chair (gynaecology)
- Dr Kathy Cook
- Dr David Gartlan (Tasmanian Representative)
- Dr Anthea Lindquist (Trainee Representative)
- Dr Mary Anne McLean (Diplomate Representative)
- Dr Joseph Sgroi
- Dr Meredith Tassone
- Mr Mathew Davies, RANZCOG
- Ms Sara Macarthur, RANZCOG

## Pre-Examination Revision Courses

Once again, revision courses were conducted for the DRANZCOG and MRANZCOG examinations. Numbers for the MRANZCOG course continue to rise. Of significance were the large groups from interstate and New Zealand. The convenors of both workshops – Dr Alison Fung and Prof Stephen Tong (MRANZCOG), and Dr Kathryn Cook (DRANZCOG) – made considerable efforts to develop more interactive teaching sessions in response to feedback from previous courses. The MRANZCOG course included more case-based discussion and greater opportunities to discuss controversial issues. The DRANZCOG course ran practical sessions on instrumental delivery, neonatal resuscitation, shoulder dystocia and mock exam situation scenarios. These sessions were extremely well received and have enabled us to obtain QA&CPD points from the RACGP. Trial OSCEs were held before the October 2014 and May 2015 MRANZCOG Oral Examinations. These critical practice sessions proved extremely popular with Trainees and are an invaluable opportunity to refine examination technique.

## RANZCOG Foundation Research Scholarships and Fellowships

Congratulations to the following Victorian Fellows and Trainees for receiving RANZCOG Foundation Scholarships and Fellowships:

- Arthur Wilson Memorial Scholarship, 2014–15
- Ella Macknight Memorial Scholarship, 2015–16
- Dr Fiona Brownfoot
- Dr Shakyala Vidhura Fernando

- Fotheringham Research Fellowship, 2014–15
- Luke Proposch Perinatal Research Scholarship, 2015
- Mary Elizabeth Courier Research Scholarship, 2015–16
- RANZCOG Fellows' Clinical Research Scholarship, 2015

Dr Ryan Hodges  
Dr Sebastian Hobson  
Dr Luke Larmour  
Dr Stefan Kane

## ORGANON Awards and Research Symposium

The Annual Trainees Research Symposium was held at the Royal Society Building. The morning session provided an opportunity for registrants to hear presentations from a number of experts on dealing with the issues arising during late preterm labour. The afternoon session saw six RANZCOG Trainees/new Fellows present their original research, plus a lively debate from Prof Jonathan Morris and Prof Euan Wallace. Following the Symposium, the VRC Annual Dinner was held at the Marriott Hotel, providing Trainees and Fellows with the opportunity to mix and mingle. Congratulations to Dr Carole-Anne Whigham – Western Health ITP, for winning the coveted Organon Award for her research titled 'Carbetocin versus Oxytocin to Reduce Additional Uterotonic use at Non-Elective Caesarean Section: a Double-blinded, Randomised Trial'.

## Victorian Membership of RANZCOG

Victoria boasts the second-largest number of College members out of all the regions. The majority of members fall into the categories below:

Fellows	463
Diplomates	907
RANZCOG Trainees	189
CWH/Dip/Dip Adv trainees	266
Retired Fellows	103

On behalf of the VRC, we wish to thank all members for their support of College and regional activities.

### Dr Alison Fung

Chair, Victorian Regional Committee

### Mathew Davies

Executive Officer, Victorian Regional Committee

# Western Australia

The WA Regional Committee met three times during the 2014–2015 year followed by the same number of General Meetings of the WA Fellowship. The Annual General Meeting was held on Wednesday 19 November 2014. The two WA College Councillors, Prof Yee Leung and Dr Donald Clark, attend the WA Regional Committee as well as the Trainee Representative, Dr Fiona Langdon. The other Committee members are: Drs Dale Hamilton (Secretary), Jason Chin (Treasurer), Louise Farrell and Robyn Leake.

The WA Training Accreditation Committee (TAC), chaired by Dr Dale Hamilton and supported by ITP Co-ordinator Dr Gordon Das, continues to meet to consider the training issues in the metropolitan as well as regional areas of the State. Those rural sites are: Albany, Bunbury and Geraldton plus one in the Kimberley. This year also saw Fiona Stanley Hospital open and come on board. A rigorous selection process was carried out for the FRANZCOG Training Program and the new successful Trainees were welcomed to an induction evening at the beginning of the training year, followed by a gathering of all Trainees and Training Supervisors.

The usual round of College examinations were held in July 2014 and February 2015. In future, examinations will be conducted at the Clifton Conference Centre in Perth and eventually will be online. The WA Regional Committee also supported a variety of medical careers exhibitions throughout the year with excellent attendance figures and a great interest shown in the specialty.

The WA Annual Dinner was held on Saturday 1 November 2014, at Friends Restaurant, and was attended by nearly 100 Fellows and Trainees. The Dinner, which was a return to the grand style of previous years, was hosted and organised Dr Peter Hugo. We hope that he will continue to be involved in future years as it was a great success.

Western Australia hosted the combined WA/SA/NT Regional Scientific Meeting in Broome in June 2014. It was a very successful meeting with many local delegates as well as those travelling from Perth, South Australia and the Northern Territory. The quality of the talks was excellent and the venue at Cable Beach was relaxed and beautiful.

The RANZCOG Annual Scientific Meeting in 2016 will be held in Perth from 15–19 October. The Organising Committee has been meeting on a regular basis and is working towards co-ordinating an excellent scientific program with the theme: East Meets West.

This will be my last Annual Report as Chair of the WA Regional Committee. I have enjoyed being on the Committee as well as my position as Chair over the last few years. I would like to thank the various WA Regional Committee members who have served so cheerfully and willingly with me over those years. Although I cannot mention all by name, I would like to especially thank Dr Louise Farrell, who has been part of the Committee for many more years than I and has worked tirelessly at the local and national level. Her knowledge and experience in College matters and the specialty in general is vast and her counsel to the WA Regional Committee has always been sound. I am truly grateful to her. Lastly, I would like to wish the incoming Committee and especially the new Chair an enjoyable and productive term and hope that you find the experience as fulfilling and rewarding as I have done.

**Dr Tamara Walters**

Chair, Western Australia Regional Committee

**Janet Davidson**

Executive Officer, Western Australia Regional Office

# ROALS

The Rural Obstetric and Anaesthetic Locum Scheme (ROALS) supports the rural obstetric and anaesthetic workforce through the provision of locum services and subsidies to rural obstetricians and anaesthetists to help to meet locum costs.

The objectives of the program are to:

- maintain and enhance the access of quality local obstetric and anaesthetic care by providing the rural and remote workforce (both specialist and general practice) with efficient and cost-effective locum support; and
- sustain safety and quality in rural practice by facilitating access to personal leave or professional development or breaks from on-call commitments for rural and remote obstetricians and anaesthetists.

The project services communities located in rural and remote Australia in the Australian Standard Geographical Classification – Remoteness Areas (ASGC-RA) 2 to 5.

Eligible obstetricians and anaesthetists may apply for up to 14 days of subsidised locum relief per financial year, plus locum travel costs.

During the 2014–2015 financial year, ROALS exceeded both obstetric and anaesthesia placement targets, facilitating 138 obstetric and 68 anaesthesia placements. ROALS is consistently meeting the demand for obstetric and anaesthesia locum support, as evidenced by the very low number of applications that were unfilled, mostly due to lack of interest from the pool of registered locums.

The table below provides information relating to program targets and achievements for the reporting period 1 July 2014 to 30 June 2015:

The services referred to in the table below were accessed by ROALS obstetrician and/or anaesthetist locums (both Specialists and GPs) in 59 rural towns.

**A/Prof Ian Pettigrew**

Chair, ROALS Advisory Committee

**Elizabeth Perini**

Co-ordinator, ROALS

## 2014–2015 ROALS Locum Placements

	Target placements	Actual placements	Subsidised days	Unsubsidised days	Total days
<b>Specialist Obstetricians</b>	Between 50 and 70	107	609	152	761
<b>GP Obstetricians</b>	Between 30 and 50	31	270	11	281
<b>Specialist Anaesthetist</b>	Between 12 and 20	12	71	0	71
<b>GP Anaesthetist</b>	Between 20 and 35	56	287	32	319

# GP Procedural Training Support Program

The General Practitioner Procedural Training Support Program (GPPTSP) supports rural and remote general practitioners obtaining procedural training in obstetrics and anaesthetics. The Australian Government funds RANZCOG to administer the obstetrics component of the program: GPPTSP-O. Successful applicants are funded to undertake the RANZCOG Advanced Diploma of Obstetrics (DRANZCOG Advanced). The Australian College of Rural and Remote Medicine (ACRRM) administers the anaesthetic component of GPPTSP.

The GPPTSP seeks to minimise any financial barriers experienced by rural and remote GPs in obtaining procedural skills in obstetrics and anaesthetics, at the same time assisting in overcoming workforce shortages and improving access to maternity services.

Twenty-six applicants were selected as being eligible for GPPTSP funding in Round One. Twenty-two of these GPs have completed the DRANZCOG Advanced training and two are currently in the DRANZCOG Advanced training program. Two applicants had their grants re-allocated to applicants in Round Two, as they were not able to secure training post.

Twenty-five applicants were selected as being eligible for GPPTSP funding in Round Two. Nineteen have completed the training and three are currently in the training program. Three trainees withdrew from the program and, owing to the lack of reserve list applicants, the grants have not been re-allocated.

Thirty-five applicants were selected as being eligible for GPPTSP funding in Round Three. Twelve GPs have completed the training and seven are in the process of completing the training. Sixteen trainees withdrew from the program and, owing to the lack of reserve list applicants, the grants have not been re-allocated.

Twenty-six applicants were selected as being eligible for GPPTSP funding in Round Four. Eleven GPs have successfully completed the training and nine are currently in training. Six trainees withdrew from the program and, owing to the lack of reserve list applicants, the grants have not been re-allocated.

For Round Five, the Assessment Committee met on 3 October 2014 to rank the eligible applications and recommended that 35 applicants receive GPPTSP funding. Eligible applications were ranked on the basis of rurality/remoteness of their current training post or practice, and the need for obstetrics in the GP's geographic area of practice. Of these 35 GPs:

- 4 GPs have completed the training;
- 27 GPs are currently in training;
- 2 GPs are yet to find a suitable training post;
- 1 GP will commence training in August 2015; and
- 1 GP withdrew from the program.

Preparation began for Round Six of the GPPTSP Funding Program on 1 July 2015.

**Dr Martin Byrne**

Chair, GPPTSP Assessment Committee

**Shiwanjali Prasad**

GPPTSP-Obstetrics Co-ordinator



# Ultrasound Practice Project

The Ultrasound Practice Project provides a continuing professional development (CPD) opportunity for Fellows practising in rural and remote Australia. In the 2014–2015 financial year, the Rural Obstetric and Gynaecological Ultrasound Practice Project received funding from the Rural Health Continuing Education (RHCE) Program – Stream One to conduct seven visits. Eight visits in total were held with the project funding.

The aim of the project was to improve accuracy in the diagnosis of patients who present for pregnancy or common gynaecological conditions, and to provide upskilling in a fast changing discipline. The project was open to RANZCOG Rural Fellows located in Australian Standard Geographical Classification (ASGC) Remoteness Areas Zoned 2–5. Each visit was conducted by a facilitator at a participating Fellow's practice, with up to three other participants.

The visit included:

- a demonstration of the optimal use of an ultrasound machine;
- a demonstration of a systematic approach to ultrasound scanning;
- 'hands on' practical sessions scanning volunteer patients;
- practical report writing opportunities;
- feedback on scanning;
- a discussion on communicating findings to the patient; and
- an opportunity to discuss any questions that participants may have had.

During the 2014–2015 financial year, visits were held in Bunbury, WA; Coffs Harbour, NSW; Launceston, TAS; Shepparton, VIC; Townsville, QLD; Wagga Wagga, NSW; and Hobart, TAS.

Post-visit evaluations were undertaken to allow for feedback to be provided and to assess the success of the visits. Additional funding through Rural Health Continuing Education (RHCE) – Stream One was received in 2015 to conduct a further eight visits.

**A/Prof Ian Pettigrew**

Rural Obstetric and Gynaecological Ultrasound Practice Project

**Angie Spry**

RHCE Project Co-ordinator

# PROMPT

The PRactical Obstetric Multi-Professional Training (PROMPT) course is a multi-professional emergency obstetric management training program developed in the UK and run in Australia and New Zealand under license, overseen by RANZCOG. The program focuses on the development and refining of essential clinical, communication and teamwork skills required by a multi-disciplinary maternity care team, to improve the treatment and outcomes of obstetric emergencies.

The program is delivered, in the first instance, by RANZCOG-trained PROMPT faculty members, using a train-the-trainer (T3) model. Each training team typically includes an obstetrician, an anaesthetist and two midwives, and courses are delivered in a simulation centre. Upon completion of the course, the trained hospital team is then able to run the program in-house on the maternity ward of their facility.

Through funds received from Rural Health Continuing Education (RHCE), a pilot of the PROMPT Program was commenced in February 2012 and concluded in October 2014. During the 33-month pilot period, the program was introduced to 21 hospitals in Queensland and New South Wales, in both regional and remote settings. Post T3 course training, 13 of those hospitals subsequently accepted the offer of a mentor visit by a member of the RANZCOG PROMPT faculty to provide them with guidance on the implementation of their first in-house PROMPT workshop. Overall, 85 per cent of the 21 hospitals trained in the program have implemented the program as part of their hospital's CPD program.

Adaptability of PROMPT ensures its suitability to run in any maternity hospital or facility, public or private, and RANZCOG continues to offer T3 Courses in almost every state. Program growth has been strong during the past 12 months, with seven T3 Courses held in Darwin, Sydney, Melbourne, Brisbane (two courses) and Adelaide (two courses). PROMPT now runs in the majority of maternity hospitals in Victoria, Queensland, SA and the Northern Territory and, to a lesser degree, in NSW.

Research into the effectiveness of the program continues with results from the first Australian study conducted from 2010–2012 published in the *BJOG*: Shoushtarian M, Barnett M, McMahon F, Ferris J. Impact of introducing Practical Obstetric Multi-Professional Training (PROMPT) into Maternity Units in Victoria, Australia. *BJOG* 2014;121:1710–1719.

The PROMPT Steering Committee remains committed to the provision of quality emergency obstetric training for all those who care for mothers and newborns in Australia, New Zealand and the Pacific region. Continued efforts will be made to expand the rollout of the Program to those sites in Australia and New Zealand not yet participating in the program, with a strong emphasis on the private sector where approximately 40 per cent of all births in Australia occur.

Further information about the program is available at: [www.promptmaternity.org/au](http://www.promptmaternity.org/au).

**A/Prof Edward Weaver**  
Chair, PROMPT Steering Committee

**Lauren Patten**  
PROMPT Co-ordinator

# Fetal Surveillance Education Program

As of the end of this reporting period, 40,000 participants across 280 facilities throughout Australia and New Zealand have attended the Fetal Surveillance Education Program (FSEP).

## Face-to-face workshops

From July 2014 to June 2015, 230 workshops were delivered by our nine clinical educators. Of these, 203 sessions were held in Australia, 24 in New Zealand, two in Papua New Guinea and a single workshop in Tonga. A combination of 172 full days, 48 refreshers and ten university workshops were presented. This is the highest number of workshops yet delivered within a year by the program.

## Online programs (OFSEP and OFSEPlus)

The OFSEP remains available as an open resource. The OFSEPlus is freely available only to those with access to the RANZCOG members' portal; payment is required for other users. In the last 12 months, more than 350 RANZCOG members have enrolled in OFSEPlus and 1920 OFSEPlus have been sold to external users. Of the 1920 sales, 320 were to individuals, with the remainder bulk orders to hospitals.

## Book

All 5000 copies of the book Fetal Surveillance: A practical guide have been sold. The second edition is currently being written to align with the updated RANZCOG IFS Clinical Guideline. It is anticipated that the new edition will be available by the end of 2015.

## Mobile app

Since its release in February 2014, approximately 2000 units of the iPhone and iPad mobile app, and 1000 units of the Android mobile app have been sold. The mobile app is an educational tool that provides a direct link to the RANZCOG, FSEP and OFSEP websites and contains the current RANZCOG IFS Clinical Guideline.

## Online store

The FSEP teaching and assessment tools, OFSEPlus and the printed RANZCOG IFS Clinical Guideline are only sold through the FSEP Online Store. At the end of the reporting period, 33 copies of the teaching tool #1 and 50 copies of the guideline had been sold. The newly printed teaching tool #2 (antenatal cases only) is now also available for purchase through the online store.

## Research and development

FSEP continues to be underpinned by detailed analyses of the assessment tool and participant performance. These analyses are used to maintain the high performance of the assessment and to direct future educational developments. A number of papers are in preparation for submission to peer-reviewed journals. These are seen as valuable evidence of external validation of the program. The FSEP team also continues to develop opportunities for new approaches to support the education of the workforce in fetal surveillance.

### Prof Euan Wallace

Chair, FSEP Steering Committee

### Mark Beaves

Program Manager, FSEP

### Sharon Chang

Senior Co-ordinator, FSEP

# NTUEMP

The Nuchal Translucency – Ultrasound, Education and Monitoring Program (NTUEMP) provides certification to operators (obstetricians, ultrasonographers and radiologists) performing the nuchal translucency (NT) scan in Australia. In the reporting period, 1349 operators from 436 centres in Australia were audited.

In December 2014, the Quality Review and Ongoing Certification for the first trimester scan document was updated. This document provides the basis for audit of the NT scan in Australia.

For operators performing the NT scan, the program provides the Nuchal Translucency Online Learning Program (NTOLP) and the Teleconference Tutorial educational activities. Teleconference Tutorials were held monthly to assist operators with their NT scan technique and to further improve their understanding of the audit process. For this period, 11 Teleconference Tutorials were held, with 156 operators attending, and 263 operators enrolled in the NTOLP.

Certification for the assessment of ductus venosus (DV) is now available. An educational component has been developed for the assessment of uterine artery pulsatility index (UAPI) and DV.

**A/Prof Ricardo Palma-Dias**

Chair, NT Steering Committee

**Blessy Mannil**

Senior Co-ordinator, NTUEMP and C-QuIP

# C-QuIP

The Colposcopy Quality Improvement Program (C-QuIP) aims to improve the quality of care and equity of access for women who are referred for colposcopy and treatment of screen-detected abnormalities. The C-QuIP has a total of 877 certified practitioners.

The first recertification period since the program was established is now complete. The deadline for recertification has been extended from 1 January 2015 to 31 March 2016. Of the 780 practitioners due for recertification in 2015, to date, 403(51%) practitioners have recertified.

Twenty overseas-based practitioners (non-RANZCOG Fellows) and 502 RANZCOG Fellows have enrolled in the Colposcopy Online Learning Program (COLP).

**Dr Vijay Roach**

Chair, C-QuIP Steering Committee

**Blessy Mannil**

Senior Co-ordinator, NTUEMP and C-QuIP



# Financial Reports



# Treasurer's Report

I am pleased to present this report on the financial performance of the College for the year ending 30 June 2015. The College continues to be in a strong and secure financial position, which was augmented by the creation of the RANZCOG Foundation at the beginning of the year.

The 2015 consolidated surplus is \$208,397. This is significantly lower than the 2014 surplus of \$2,688,904 and is mainly due to a one-off adjustment to annual training fees in 2015, of around \$918,000, and the write-back to income in 2014 of liabilities totalling more than \$800,000.

In 2015, College investments held with UBS Wealth Management and Pitcher Partners continued to contribute positively with an average annual return of approximately 5.9%.

During the year, the College continued to receive Government funding for various strategic projects and this increased by \$1,148,307 (or 16%) in 2015.

In 2015, the net assets of the College increased by 30% to \$21,487,563. This was mainly due to the merger with the Research Foundation and the revaluation of College House, whose value increased by \$3,858,180.

The College held investments of approximately \$6,510,280 at 30 June 2015, which represented an increase of 6.5% from \$6,110,704 at 30 June 2014. The College also manages investments of around \$3,448,863 as Trustee for various trusts. The Finance Advisory Committee meets regularly with advisors from UBS

and Pitcher Partners to discuss the appropriate response to the market, while maintaining a philosophy of balanced growth, income generation and an ethical approach appropriate for the College. Adjustments are made both in asset allocation and the products in which we invest.

Despite increased payments during the year for technology and other projects, the College's cash position at the end of the year of \$6,754,554 was a 117% increase on the cash balance at June 2014. This was mainly driven by an improved cash management strategy and strong receipts in June for annual subscriptions.

The College has had a busy but successful year and continues to maintain a strong financial position that will support the development and implementation of numerous key projects over the next few years.

The College is grateful for the assistance of Mr Rob Dowling and Mr Robert Heathershaw in providing expertise and advice to the Finance Advisory Committee.

**Dr Martin Ritossa**  
Treasurer

# Independent Audit Report to the Members

## Report on the Financial Report

We have audited the accompanying financial report of The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (A Company Limited by Guarantee) which comprises the statement of financial position as at 30 June 2015 and the statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows for the year ended on that date, a summary of significant accounting policies, other explanatory information and the Directors' declaration.

## Directors' Responsibility for the Financial Report

The directors of the company are responsible for the preparation and fair presentation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards (including Australian Accounting Interpretations and the Corporations Act 2001 and for such internal control as the directors determine is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

## Auditor's Responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We conducted our audit in accordance with Australian Auditing Standards. These Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditors consider internal control relevant to the entity's preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the directors, as well as evaluating the overall presentation of the financial report.

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

## Independence

In conducting our audit, we have complied with the independence requirements of the Corporations Act 2001. We confirm that the independence declaration required by the Corporations Act 2001, provided to the directors of the company, would be in the same terms if provided to the directors as at the date of this auditor's report.

## Auditor's Opinion

In our opinion:

- (a) the financial report of The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (A Company Limited by Guarantee) is in accordance with the Corporations Act 2001, including:
  - (i) giving a true and fair view of the company's financial position as at 30 June 2015 and of its performance for the year ended on that date; and
  - (ii) complying with Australian Accounting Standards (including Australian Accounting Interpretations) and the Corporations Regulations 2001.

MORTON WATSON & YOUNG  
Chartered Accountants  
51 Robinson Street, Dandenong  
Victoria 3175

Kerpal S Harnam  
Registered Company Auditor  
Morton Watson & Young

Date: 15 September 2015

# Discussion and Analysis of Financial Statements for the Year Ended 30 June 2015

## Important Information for Members

The Directors' report, Concise Financial report and Auditor's Statement contained within this document represent a Concise Report. The full financial report of The Royal Australian and New Zealand College of Obstetricians and Gynaecologists and the Audit Reports thereon will be sent, free of charge, to members on request.

The concise financial statements cannot be expected to provide as full an understanding of the financial performance, financial position and financing and investing activities as the full report.

Fellows and Members wishing to receive the full financial reports and auditor's report may arrange delivery by calling (03) 9412 2947 or visiting our website at: [www.ranzcog.edu.au](http://www.ranzcog.edu.au).

The discussion and analysis is provided to assist members in understanding the concise financial report. The information contained in the concise financial report has been derived from the full 2014–15 Financial Report of The Royal Australian and New Zealand College of Obstetricians and Gynaecologists.

## Statement of Comprehensive Income

The 2015 consolidated surplus is \$208,397. This is significantly lower than the 2014 surplus of \$2,688,904 and is mainly due to a one-off adjustment to annual training fees in 2015 of around \$918,000 and the write-back to income in 2014 of liabilities totalling more than \$800,000.

In 2015, College investments held with UBS Wealth Management and Pitcher Partners continued to contribute positively with an average annual return of approximately 5.9%.

During the year, the College continued to receive Government funding for various strategic projects and this increased by \$1,148,307, or 16%, in 2015.

## Statement of Financial Position

In 2015, the net assets of the College increased by 30% to \$21,487,563. This was mainly due to the merger with the Research Foundation and the revaluation of College House whose value increased by \$3,858,180.

The College held investments of approximately \$6,510,280 at 30 June 2015, which represented an increase of 6.5% from \$6,110,704 at 30 June 2014. The College also manages investments of around \$3,448,863 as Trustee for various trusts. The Finance Advisory Committee meets regularly with advisors from UBS and Pitcher Partners to discuss the appropriate response to the market, while maintaining a philosophy of balanced growth, income generation and an ethical approach appropriate for the College. Adjustments are made both in asset allocation and the products in which we invest.

## Statement of Cash Flows

Despite increased payments during the year for technology and other projects, the College's cash position at the end of the year of \$6,754,554 was a 117% increase on the cash balance at June 2014. This was mainly driven by an improved cash management strategy and strong receipts in June for annual subscriptions.



# Directors' Report

Your directors present their report on the College for the financial year ended 30th June 2015

## Directors

The names of the directors in office at any time during or since the end of the year are:

- Prof M Permezel
- Prof I Symonds (appointed November 2014)
- A/Prof S Robson
- Dr S Tout
- Dr M Ritossa
- Dr J Tait (appointed November 2014)
- Dr V Roach
- Dr G Pecoraro (retired November 2014)

Directors have been in office since the start of the financial year to the date of this report unless otherwise stated.

## Company Secretary

The following person held the position of Company Secretary at the end of the financial year: Ms Alana Killen appointed 29 June 2015.

## Significant Changes

No significant changes in the College's state of affairs occurred during the financial year.

## Principal Activities

The principal activities of the College are:

promoting and encouraging the study, research and advancement of the science and practice of obstetrics and gynaecology;

- promoting excellence in healthcare services for women and their families and cultivating and encouraging high principles of practice, ethics and professional integrity in relation to obstetric and gynaecological practice, education, training and research;
- determining and maintaining professional standards for the practice of obstetrics and gynaecology in Australia and New Zealand;
- conducting and supporting programs of training and education leading to the issue of a certificate, diploma or other certification attesting to the attainment/maintenance of appropriate levels of skills, knowledge and competencies commensurate with specialist and sub-specialist practice in obstetrics and gynaecology in Australia and New Zealand; and
- ensuring College members undertake continuous professional improvement and participate in effective, ongoing professional development activities.

During the year the College assumed the operations of the RANZCOG Research Foundation. No other significant changes in the nature of the college's activity occurred during the financial year.

## Result of Operations

The Surplus of the College for the year amounted to \$208,397.

## Subsequent Events

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

## Future Developments

The College expects to maintain the present status and level of operations and hence there are no likely developments in the College's operations.

## Environmental Regulation

The College's operations are not regulated by any significant environmental regulation under the law of the Commonwealth or the State or Territory.

## Dividends

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

## Indemnities

No indemnities have been given or insurance premiums paid, during or since the end of the financial year, for any person who is or has been an auditor of the College.

## Auditor's Independence Declaration

A copy of the auditor's independence declaration as required under Section 307C of the *Corporations Act 2001* is included.

## Directors' meetings

Directors' meetings held during the financial year:

Directors' meetings held during the financial year were

	Meetings attended	Meetings held during term of office
Prof M Permezel	9	9
A/Prof S Robson	9	9
Dr J Tait	6	6
Dr S Tout	9	9
Dr M Ritossa	8	9
Dr G Pecoraro	2	3
Dr V Roach	8	9
Prof I Symonds	6	6

Signed in accordance with the resolution of Directors.

Prof M Permezel, Director  
President

Dr M Ritossa, Director  
Treasurer

Date: 12 September 2015

# Statement of Comprehensive Income for the Year Ended 30 June 2015

	2015 \$	2014 \$
Revenues from member services	18,057,702	17,887,901
Other income	1,434,801	513,201
Interest on investments	449,986	602,291
Employee benefits expense	(6,830,587)	(6,445,305)
Depreciation and amortisation expense	(238,643)	(167,523)
Repairs and maintenance	(229,731)	(220,818)
Fuel, light and power	(23,926)	(36,789)
Rental expenses	(196,349)	(220,134)
Audit, legal and consultancy expenses	(616,289)	(795,393)
Administration expenses	(4,442,063)	(4,128,011)
Bad and doubtful debt expenses	(130,676)	
Other expenses	(7,554,231)	(5,560,594)
<b>Profit (loss) for the year</b>	<b>(320,006)</b>	<b>1,428,826</b>
<b>Other comprehensive income</b>		
Revaluation of financial investments	127,361	367,045
Write back of Brian Spurrett Foundation	144,348	
Write back of Robert Wrigley Scholarship	256,694	
Adjustment to funds held in advance		595,557
Write back of JMJ House provision		297,476
<b>Other comprehensive income for the year</b>	<b>528,403</b>	<b>1,260,078</b>
<b>Total comprehensive income for the year</b>	<b>208,397</b>	<b>2,688,904</b>

# Statement of Changes in Equity for the Year Ended 30 June 2015

	Retained Earnings \$	Asset Revaluation Reserve	Reserve for Professional Development \$	Total \$
Balance at 1 July 2013	13,595,830			13,595,830
Opening balance for the year			122,982	122,982
Profit/(loss) attributable to the entity	2,688,904		—	2,688,904
Balance at 30 June 2014	16,284,734		122,982	16,407,716
Profit/loss attributable to the entity	208,397		—	208,397
Revaluation College House, 260 Albert Street, East Melbourne		3,858,801		3,858,801
Revaluation of Unit 1, 246 Albert Street, East Melbourne		(68,054)		(68,054)
Revaluation of Unit 2, 246 Albert Street, East Melbourne		(36,617)		(36,617)
Transfer from RANZCOG Research Foundation	1,117,320			1,117,320
<b>Balance at 30 June 2015</b>	<b>17,610,451</b>	<b>3,754,130</b>	<b>122,982</b>	<b>21,487,563</b>



# Statement of Financial Position

## as at 30 June 2015

	2015 \$	2014 \$
<b>Current assets</b>		
Cash and cash equivalents	6,754,554	3,099,673
Trade and other receivables	2,320,725	4,306,156
Financial assets	8,591,317	8,201,631
<b>Total current assets</b>	<b>17,666,596</b>	<b>15,607,460</b>
<b>Non-current assets</b>		
Financial assets	9,959,143	6,110,704
Property, plant and equipment	12,369,951	8,657,255
<b>Total non-current assets</b>	<b>22,329,094</b>	<b>14,767,959</b>
<b>Total assets</b>	<b>39,995,690</b>	<b>30,375,419</b>
<b>Current liabilities</b>		
Trade and other payables	1,993,210	2,210,353
Short-term provisions	811,333	724,811
Other current liabilities		11,032,539
<b>Total current liabilities</b>	<b>18,458,416</b>	<b>13,967,703</b>
<b>Non-current liabilities</b>		
Provisions	49,711	
<b>Total non-current liabilities</b>	<b>49,711</b>	
<b>Total liabilities</b>	<b>18,508,127</b>	<b>13,967,703</b>
<b>Net assets</b>	<b>21,487,563</b>	<b>16,407,716</b>
<b>Members' equity</b>		
Retained earnings	17,610,451	16,284,734
Reserves	3,877,112	122,982
<b>Total members' equity</b>	<b>21,487,563</b>	<b>16,407,716</b>

The accompanying notes on page 41 form part of these financial statements.

# Statement of Cash Flows

## for the Year Ended 30 June 2015

	2015 \$	2014 \$
<b>Cash flows from operating activities</b>		
Receipts from members	12,979,139	9,456,443
Interest received	449,986	602,291
Donations and appeals	297,580	70,798
Other income	13,294,988	9,023,747
Payment to suppliers and employees	(21,089,182)	(16,784,350)
Net cash provided by (used in) operating activities	<b>5,932,511</b>	<b>2,368,929</b>
<b>Cash flows from investing activities</b>		
Proceeds from (transfers to) investments	(3,129,515)	(487,656)
Payment for property, plant and equipment	(265,435)	(351,351)
Adjustment for Research Foundation investments	1,117,320	
Net cash provided by (used in) investing activities	<b>(2,277,630)</b>	<b>(839,007)</b>
Net increase (decrease) in cash held	3,654,881	1,529,922
Cash at beginning of financial year	3,099,673	1,569,751
<b>Cash at end of financial year</b>	<b>6,754,554</b>	<b>3,099,673</b>

# Notes to the Financial Statements for the Year Ended 30 June 2015

The financial report covers The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (A Company Limited by Guarantee) as an individual entity. The Royal Australian and New Zealand College of Obstetricians and Gynaecologists is a not for profit company incorporated and domiciled in Australia.

The functional and presentation currency of The Royal Australian and New Zealand College of Obstetricians and Gynaecologists is Australian dollars.

The financial report was authorised for issue by the Directors.

Comparatives are consistent with prior years, unless otherwise stated.

# Directors' Declaration

The directors of the company declare that:

1. The financial statements and notes for the year ended 30 June 2015 are in accordance with the Corporations Act 2001 and:
  - (a) comply with Australian Accounting Standards and the Corporations Regulations 2001; and
  - (b) give a true and fair view of the financial position and performance of the company.
2. In the directors' opinion, there are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with a resolution of the Board of Directors.

Prof M Permezel, Director  
President

Dr M Ritossa, Director  
Treasurer

Date: 12 September 2015







**The Royal Australian  
and New Zealand  
College of Obstetricians  
and Gynaecologists**