

## MINUTES AAAPC Executive Committee meeting Friday April 22<sup>nd</sup>

**Attendees:** Grant Russell, Dimity Pond, Kirsty Douglas, Ellen McIntyre, Nick Zwar, Jennifer Walker, Sarah Larkin, Sue Pollon Ngaire Kerse, Louise Stone, Kitty Novy, Nick Zwar, Bianca Brijnath

**Apologies:** Alistair Vickery, Christina Hagger, Jodie Oliver Baxter, Phyllis Lau, Danielle Mazza, Michelle Guppy, Ngaire Kerse, Jan Radford, Liz Halcomb, Suzanne McKenzie, Kirsty Douglas

### ACTION LIST

Assigned To	Actions/Decision from meeting on 22 <sup>nd</sup> April
GR/KN	<p>ACTION: LS to set up an off line discussion with New Zealand SP/NK</p> <p>ACTION: GR /NK/SP/KN to draft proposal to change the constitution to 'up to 4 New Zealand members', set up off line discussion</p> <p>ACTION: GR/KN to draft proposal for change constitution to 'up to 6 co-opted members'</p> <p>ACTION: BB to send link of the Health Capability statement for Research to committee</p> <p>ACTION: GR to lead subgroup on drafting ideas on to funding crisis NZ/ /SL/KD /GR. LS to suggest who to speak to</p> <p>ACTION: GR to attend the Australian Academy of Health &amp; Medical Sciences Priority round table meeting on the 29th April in Sydney</p> <p>ACTION GR GR to email request for members – need early or mid career researcher KN to collate and get internal judge</p>

Issues	Items	Action	Responsible
1. Approval of the Agenda	Chair Grant Russell (GR)		
2. Past Minutes	Accepted		
3. Correspondence	None presented		
4. New Zealand Matters	<ul style="list-style-type: none"> <li>• Sue Pollen and Ngaire Kerse raised 2 issues:</li> <li>• 1. Request for additional New Zealand members on the Executive so that more New Zealand matters can be brought to the floor. This was supported by the meeting, and will be taken to the AGM to seek a constitutional change.</li> <li>• 2. Concerns about the capacity of General Practice to continue to train a lot of people. Currently in the process of working towards a co-ordinated system of maximising GP placements, but progress has been painfully slow in all areas. The Executive was asked for advice to help speed up and streamline the process. GR suggested that AAAPC as an organisation could write to relevant New Zealand bodies, Louise Stone who is currently heading up the academic training program suggested she would set up an off line discussion.</li> </ul>		
5. For Discussion	<p>a) <b>Funding issues/crisis for primary care research in Australia</b></p> <ul style="list-style-type: none"> <li>• GR led the discussion and noted that there had been a flurry of activity/agitation from members, with individual actions as well as AAAPC as an organisation. He updated the meeting on various activities with - media releases in the Canberra Times and Fairfax online</li> </ul>		GR

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- press, media releases from the RACGP and ACRIM AMA, and active discussion on Twitter.
- GR/NZ: After speaking to senior people in the Department of Health, the consistent message on funding for Primary Research was that it would be coming from the Medical Research Future fund. It was suggested that we should be meeting with this group to make submissions, as better resourced groups had already been lobbying.
  - SL felt that it was important that we all build strong relationships with the PHN's and that we should make the case that partnerships between AAAPC and individual departments of academic primary care and PHN's are strategically important
  - GR felt that we needed to be specific about what we are asking for.
  - Bianca Brijnath noted that as a member of the Australian academy her sense was that there is some support for primary care and one of the things that they often find appealing is knowledge translation and introducing new technologies into General Practice through clinical care.
  - GR discussed the recommendations that the AAAPC put forward to the Chronic Disease committee and asked for feedback. It was felt that the word **applied** research was not well understood by policy makers. The idea of chronic care and care co-ordination would be helpful in the title of any submissions, given the amount of money being invested in e-health
  - Bianca Brijnath noted that we could consider looking at the Health Capability statement that the Australian government has put out on science for research priorities. Although quite broad, it does put forward some 'natural fit' with primary care. BB to send link to committee
  - SL felt that there needs to be transition arrangements and planning for PHCRIS and BEACH.
  - SP felt that it was important to spell out the principles of primary care to those who were not familiar with it.

**b) Subsequent Strategy**

- The question asked whether we should be encouraging our members to contact their local members of parliament and if so, they need to have well articulated letters.
  - NZ felt that we need to sustain the sector in the transition period with the defunding of PHCRIS. The future is going to look different and we as an Organisation now have an opportunity to shape it.
  - A subgroup will be set up to draft a statement, with GR to led and liase with NZ/SL/KD. LS will assist if advice is required on who to speak with.
  - GR discussed slides created from communication he has had with the Australian Academy of Health and Medical Science's looking at health and medical research priorities focusing on target areas. He noted that there were an number of primary care priorities possibly over half. But that they were missing the big picture stuff.
  - On behalf of AAAPC, GR will be attending the Australian Academy of Health & Medical Sciences priority round table meeting on the 29th April in Sydney. The Minister Susan Ley will be attending.
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	<ul style="list-style-type: none"> <li>GR: We have been asked to nominate a representative to assist in judging the RACGP National Research Award by 9<sup>th</sup> May, and we will need 2-3 judges from our Executive to select. GR to email request for members – need early and mid career, KN to collate and get internal judge.</li> <li>NAPCRG nominations in –will need to get some internal judges in the next week .KN to send request to committee.</li> </ul>	
<b>6. Reports for noting</b>	<b>APCRen</b>	GR
	<ul style="list-style-type: none"> <li>Updates on the responses of the future of APCReN - standing item – nothing to report this month.</li> </ul>	
<b>7. Communication</b>	<ul style="list-style-type: none"> <li><b>Newsletter:</b> GR thanked JW/KN for the latest newsletter – very impressive</li> <li><b>Social Media Update:</b> GR felt that if people who want the message out need to send the Twitter text to Jodie; members continuing to tweet.</li> </ul>	JW/KN
<b>8. PHC Conference</b>	<ul style="list-style-type: none"> <li>JW/SL had suggested that Ellen McIntyre would be an excellent After Dinner speaker; Ellen has accepted the invitation.</li> <li>Nominations for the election of Officers has been requested. Most committee members are happy to remain. EM will be standing down, Alistair Vickery is happy to stay on but has been unable to attend meetings due to clinical conflicts so would stand down if another person was nominated. SM happy to stay on as treasurer but is finding it difficult to attend due to clinical commitments.</li> <li>GR has asked all committee members to reassess their commitments and to seriously consider their renomination.</li> <li>AGM agenda to be circulated next week. KN to ask members for agenda items and also to draft the constitution changes for GR to confirm. It has been confirmed as an early meeting Wednesday 7.45am 8th June</li> <li>Bridges Webb nomination have been sent out, closing date 9th May. One nomination so far.</li> <li>Need to encourage new members.</li> </ul>	ALL
<b>9. Finance</b>	<ul style="list-style-type: none"> <li>\$17,232.20 .</li> </ul>	SM/KN
<b>10. New members</b>	<ul style="list-style-type: none"> <li>None</li> </ul>	KN
<b>11. Other Business</b>	<ul style="list-style-type: none"> <li></li> </ul>	
<b>12. Next meeting</b>	<b>Monday May 23rd 2016.3.30-4.30pm EST</b>	