MINUTES AAAPC Executive Committee meeting July 25th 2016

Attendees: Grant Russell, Sarah Larkin, Phyllis Lau, Bianca Brijnath, Danielle Mazza, Christina Hagger, Lauralie Richard, Lynsey Brown, Sue Pullon, Richard Reed, Oliver Franks, Kirsty Douglas.

Apologies: Alistair Vickery, Jan Radford, Jodie Oliver Baxter, Dimity Pond, Nick Zwar, Michelle Guppy, Ngaire Kerse, Liz Halcomb, Jennifer Walker, Michelle Guppy

Actions/Decision from meeting July 25th 2016

- ACTION:SP to send New Zealand documentation on the conjoint model to committee
- ACTION:Draft brief position paper on integration of PhDs in the College of GP training program GR to coordinate withsubcommittee DM ,BB, SL
- ACTION:KN to FU on Dr Suresh Badami, ACCRM representative and request he email GR asap
- ACTION: LR to forward the draft program of NZ Research Weekend to committee
- ACTION: SP To forward the New Zealand Health strategy document to committee.
- ACTION: KN to look for venue for Strategic Planning Meeting airport lounge October / November- date to TBD
- ACTION: Pre polling of members for input on the strategic plan to be determined/discussed at next meeting
- ACTION: A subcommittee to help produce submission document for the NHMRC-Grant Program Re-Structure GR to coordinate
- ACTION: To use the questions (5 in each model) already formulated from consultation paper to send to members get feedback – GR and others

sues		Items
1.	Approval of the Agenda	Chair Grant Russell (GR) Minutes approved from previous meeting
2.	Past Minutes	 Accepted as correct . Follow up from the Actions and Business arising GR met with Anne Kelso but not Ian Fraser or Richard Heard Michael Kidd consulted with GR before he presented to NHMRC board with respect to primary care research. AAAPC was able to give him input including the MRFF document Claire Jackson consulted with GR before her meeting with Ian Fraser MRFF GR urged all committee members to attend the public consultations of the NHMRC changes and the MRFF Strategies on funding crisis: The AAAPC needs to deliver a consistent message and important continue to distribute core documents to members GR noted that there had been many meeting to form the submission to the MRFF with subgroup, this has been productive and thanked all for their contribution. GR has drafted letter to the Research Australia and Clinical Trials Alliance to be sent in the nex couple of days. GR:reported on meeting with Frank Jones and Zena Burgess. AAAPC invited to present a 30 minute presentation in Sydney on PHCRIS and funding to the United General Practice Australia.

the issue of building primary care research.

to support PhDs and primary health capacity building

Danielle Mazza (DM) applauded GR on his efforts with the College and because of his

endeavors there seems to have been a buy in from the College on primary care research If the College is buying into this agenda it might be opportune to encourage them to consider formal integration of PhDs in the College of GP training program which is separate but aligned with

DM talked on the recent SAPC conference she attended and there had been a whole session on building primary health capacity ,describing the various programs that are in place in Europe to support PhDs studies specifically Gp's wantingto study. She noted that up until recent times the College had been unwilling to listen to any arguments about the necessity of integrating the PhD stream into the training program but perhaps it was now time to get them

Sue Pullon (SP) reported that traditionally there had been very little support from the College of GPs for any higher degree of any sort, although a conjoined pathway was developed 4 years

- ago .The students can do a conjoined PhD and Fellowship taking an extra year and a half to fulfil the clinical requirements and their PhD. Even though the College supports the pathway there is no funding which limits the number of GPs embarking on a PhD.
- Sarah Larkins (SL) noted that James Cook is looking at establishing a conjoint model with senior medical students
- GR suggested that SP could forward any documentation on the New Zealand approach To put together a brief discussion paper to work with the College and ACCRM and to get assistance with this from DM, BB, SL.,GR happy to co-ordinate.
- Update on the ACCRM Representative for AAAPC Executive GR Noted that Dr Suresh has been invited to join the committee but still awaiting a decision

3. Correspondence

GR noted that correspondence will be reported when discussing items

4. New Zealand Matters

- Lauralie Richard(LR) Reported on New Zealand Research Weekend 16-18th September The program still being formulated and it was noted no Australian has registered yet.
- SP to organise a meeting over the weekend of New Zealand AAAPC members and will report back on any issues discussed.
- SP reported Health Research Strategy consultation process. The message that came out of the
 focus groups was a very open attitude towards broadening research priorites away from
 disease focus and biochemical research The consensus was that the future for the New
 Zealand health system lay in there being a superior and stonger primary health care focus
 Concerns were raised about the future of the Health research workforce
- SP raised the question of more formal collaborations, links and research funding with Australia The idea of a more formal partnerships between research organisations was seen as too difficult and that perhaps New Zealand should be looking more towards the Pacific

5. For Discussion

1.Strategic direction of the AAAPC

- At the AGM there was a strong agreement that it was time to critically reflect on a strategic direction due to broadening of the organisation into a primary care focus and the incorporation of New Zealand.
- A discussion on pre polling the members to help in the development of a plan and then setting up a day of a face to face meeting venue and State to be decided. There was borad agreement that airport lounge would be good and KN to look at costs before the next meeting
- GR noted he would be happy to take on board the pre work with the executive

2. Australian MRFF and NHMRC funding review

- GR reported that MRFF documentation has been circulated to committee
- He noted that the NHMRC is looking at streamlining the way it does its grant cycles
- It was noted that any submission to the funding review needs to ber completed within the month and GR requested for volunteers to help put together a documnent
- LR and PS will follow up with HRC in New Zealand and BB to contact Tania
 Winzenbergand see if she would be happy to share the College draft submission with the AAAPC executive
- DM noted that there were 3 models being proposed and one of the overall aims was to decrease the number of applications being submitted It appeardthat the perspective was very lab based and that Cl's were only allowed to be on one team and hold one funded application overall. The implications of this means that if you have more than one area of research interest you cannot pursue it. It seems to be targeting researchers who have investigated something for years and does not take into account those who have broader general practice interests, broader researcher will be disadvantaged.
- Richard Reed (RR) led the discussion on his conerns that primary care research could be overlooked. He felt we might need to create a GP team or join other teams which will be stronger but we shall have less input
- Phyllis Lau (PL) suggested that we use the questions (5 in each model) already formulated from consultation paper to get member feedback. GR and volunteers to draft and send to members

3. Membership drive

 GR noted that we need to encourage more membes particularily the young and membership drive should be included on the strategic plan :

6. Standing Items

a. Conference: Christina Hagger(CH) reported that overall theconference was very positive and the evaluations were good. RR informed the meeting that Flinders University would be sponsoring a PHCRIs like conference in July 2017, an announcement to made shortly. GR thanked the PHCRIS staff on an excellent event despite the complexities.due to funding issues.

b. Communication:

The newsletter: finalised and to be set in the next days **Social media Strategy.:**Lynsey Brown asked that any item be sent to her and she will distribute

- c. **APCReN:** Updates on the responses of the future of APCReN standing item nothing to report
- d. **Financial report:**PL noted that she would be updating the signatures in the next month There is currently \$11,345.23 in account
- e. **Membership:** PL noted that 7 new members were signed up at the conference and GR asked committee members to think about ways to boost membership in the future

NEXT MEETING AUGUST 26th 2016