

Draft MINUTES AAAPC Executive Committee meeting Monday 23rd May

Attendees: Grant Russell, Ellen McIntyre, Nick Zwar, Sarah Larkin, Sue Pollon, Kitty Novy, Bianca Brijnath, Danielle Mazza, Dimity Pond, Christina Hagger, Jan Radford,

Apologies: Alistair Vickery, Jodie Oliver Baxter, Phyllis Lau, Michelle Guppy, Ngaire Kerse, Liz Halcomb, Suzanne McKenzie, Kirsty Douglas, Jennifer Walker, Louise Stone,

ACTION LIST

Assigned To	Actions/Decision from meeting on 23rd May
	<p>ACTION:KN to FU with NAPCRG abstract dates and request judges from executive committee</p> <p>ACTION:KN to request membership to assist in judging First Time Presenter Award</p> <p>ACTION:KN: To contact Dr Suresh Badami re ACCRM Representative for AAAPC executive</p> <p>ACTION:GR to FU on ways to link more with the ACTA & Research Australia</p> <p>ACTION: GR Request and set up meeting with Ian Fraser Anne Kelso</p> <p>ACTION:GR/subgroup contact Research Australia – EM to follow up Richard Head</p> <p>ACTION:GR to meet with Frank Jones and Zena Burgess</p> <p>ACTION:GR to coordinate with subgroup /put together the submission to Dept on the Medical research Fund</p> <p>ACTION: GR to co-ordinate and organise another meeting with subgroup to operationalise suggestions on Conference strategies</p> <p>ACTION:KN to email HODS material</p> <p>ACTION: GR/KN to email EIM re the call for new members drive</p>

Issues	Items	Action	Responsible
1. Approval of the Agenda	<p>Chair Grant Russell (GR) wished Suzanne McKenzie well, our thoughts are with her at this difficult time while she undergoes treatment. She has been an important member of the committee and also of the Organisation. SL is in constant contact and noted that treatment has started</p>		
2. Past Minutes	<p>Accepted as correct .</p> <p>Discussion</p> <ul style="list-style-type: none"> • The capacity of GP training in NZ:SP updated the committee on the capacity of GP training in NZ which continues to be a vexed issue . Felicity Good-Year Smith and SP are leading data collection across the country and early indications suggest that many practices are either not willing or not suitable for training however there is capacity to build them up to multi level Practices which is a good thing . Hoping to have a comprehensive initial report by end of June,giving a clearer picture of the New Zealand landscape and therefore enabling us to map the capacity more accurately and the modelling that is required . • Update on the ACCRM Representative for AAAPC Executive GR Noted that Dr Suresh Badami would be invited to join executive committee meetings as a representative of ACCRM. He is not a member but this was not seen as a prerequisite because his will be a 		

representative post. Naturally he will be encouraged to join.

- GR noted that there were 7 nominations for an AAAPC member to join the RACGP Grants Committee and after an exhaustive process a selection has been finalised

3. Correspondence

GR noted that correspondence will be reported when discussing items

4. New Zealand Matters

- SP discussed the proposed constitutional changes to include up to 4 New Zealand members on the committee at any one time This was welcomed by all the New Zealand members and 2 current members would be willing to be nominated. The process for electing was clarified

5. For Discussion

- a) **PHCRIS Announcement** EM announced that she will be retiring in July and Richard Reed Flinders University will be the new director of PHCRIS from 1st July. Ellen will remain involved in PHCRIS, but in a different capacity. On behalf of AAAPC GR thanked her and acknowledged the amazing contribution to the PHCRIS and to Australian primary care that Ellen has made. He hoped that her new role would continue to bring her into contact with the primary care academic community that she has enriched. for so long SL also wanted to thank her for her support of the rural and remote primary care
 - b) **Funding issues/crisis for primary care research in Australia**
 - GR reported on Australian Academy of Health and Medical Sciences meeting that he had concerning the Medical Research Future Fund.(MMRF) He noted that it would take at least 2 years to get going and the focus will be on translation and commercialisation .It was made clear it would not be a duplicate of the NHMRC.
 - Within the MMRF there is an interest in making a profit and priorities will be considered in terms of potential economic impacts of priority areas. They seem to be interested in data platforms and know consumers are important .
 - GR noted that there are senior voices in the Government that are friendly towards Primary care and the proposed suggestions for the future would be to link with larger Organisations like *ACTA* and *Research Australia*.
 - GR reported back on the sub group meeting with NZ KD, EM SL and Lyndell Trevena The suggestions /actions from meeting were
 - To seek a Freedom of Information request on APHCRI report evaluation. GR has sent an initial informal request and is awaiting a reply for Alana Foster
 - GR to request meeting with Ian Fraser
 - GR to set up meeting with Anne Kelso
 - GR/EM Contact Research Australia – EM to follow up Richard Head
 - RACGP Meeting . GR to meet up Frank Jones and Zena Burgess in June
 - GR has drafted letter with sub-committee to Sussan Ley requesting a meeting to put forward AAAPC suggestions on the funding crisis
 - GR reported back on the successful meeting resulting from letter sent by the 17 HODS co-ordinated by KD to the Minister Susann Ley. This resulted in KD and DP securing an audience with Mark Cormack, Dep Secretary Health and other Department officials. It was noted that
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they justified funding cuts and once again the Department has a belief that routinely collected data is going to be the nirvana for primary care performance measurement and improvement

- DP noted that at the meeting she and KD talked about the limitations of any other data collection strategy but were very negative. Mark Cormack invited them to continue the conversation as AAAPC. They also want input from AAAPC on the Medical Research Fund. The submission is due by 7th June. DP felt that it was important to put something in the submission on advocating primary care research because they see it as translational. She also got a sense that they had given up on NHMRC as funding source of primary care
- GR felt that we need to foster within our membership multiple approaches and with that reason we have prepared a two page document that summarises the argument to be put towards parliamentarians. This will give members the raw material to go ahead and lobby
- EM noted that although disheartening at the moment she is hoping the conference will enthuse people and generate direction
- What strategy in terms of trying to make this a more secure funding environment could we be embarking on at the conference and how can we use the media in Canberra to highlight our story.?
- SL Felt that we cannot overstate the importance of AAAPC individuals approaching key policy people at the conference and for them to reinforce the positive vision of what primary care research can bring. As an organisation there are many messages but AAAPC must have a clear vision and constant message of what we do, will continue to do and what we bring to the system in terms of quality of care, health outcome and of cost saving measures.
- BB suggested that social media is mobilised more effectively and sustained. To look outside to spread the message -research patients /consumers/medical students /Allied Health and Nursing Organisations
- Although there has been some good media uptake what impact has it actually made, is unknown. DM suggested we recruit as many people to speak on our behalf. Possibly approach Adam Finkle the new Chief Scientist and Chief Medical Officer Chris Baggoley to advocate on our behalf.
- GR felt that AAAPC do not have the capacity so we need to be working through other organisations who are broader and have more capacity
- CH believes the Conference will give a structure to highlight in a positive and constructive manner the importance of primary care research. She suggested that Chairs highlight during their sessions and to follow it through to the AAAPC plenary and the symposium
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6. Reports for noting	APCRen	GR
	<ul style="list-style-type: none"> • Updates on the responses of the future of APCReN standing item – nothing to report 	
7. Communication	<ul style="list-style-type: none"> • Newsletter: Newsletter items will be around conference but need a main story. Christina 	JW/KN

	Hagger to write up on summary of the conference	
	<ul style="list-style-type: none"> • Social Media Update: To harness social media at the Confence 	
8. PHC Conference	<ul style="list-style-type: none"> • CH: Many structures have been set up for members to have positive face to face conversations to talk to people in the Department, would encourage committee members to use any opportunity to engage • KN noted that most committee members were willing to stand again Suzanne McKenzie will be unable to fulfill due to illness We need a rep from SA/ NT/WA • GR has asked all committee members to reassess their commitment as more will be expected of them in 216-217 • Bridges Webb winner notified and will attend the Conference dinner • KN noted that she is collecting Proxy votes for the AGM and will email members if they are not attending to send through their proxy vote • GR noted that we need encourage new members during the conference and also develop strategies to boost membership 	
9. Finance	<ul style="list-style-type: none"> • \$11,575.26 	KN
10. New members	Jill Benson	
11. Other Business		
12. Next meeting	AUGUST 2016	