



SCLMA President's Message

Dr Jon Harper

Don't miss the AGM 28 Nov 2024

The 'Health of the Nation' report, an annual survey taken by the Royal Australian College of General Practitioners (RACGP), is due to be published in the next few weeks. It always makes for interesting, and sometimes alarming, reading. The RACGP has recently indicated that many of the GPs surveyed expressed concern about their increasing administrative workload. Respondents complained that the current systems and processes for compliance are so cumbersome and time consuming that it's driving them to retirement or other work.

I have always found it interesting how governments and health departments perceive cost and value. Let's take the example of the Pharmaceutical Benefits Scheme telephone authority prescribing system. The value to the government is that fewer PBS-subsidised prescriptions will be written, and perhaps fewer clinically inappropriate prescriptions. The cost to the government is maintaining a compliance system, but the cost of actually using the compliance system is borne by prescribers. Clever.

Terbinafine tablets require an authority number for a PBS prescription. This may take several minutes waiting on the phone, or several minutes using the HPOS online portal. At a popular chemist chain, a 6-week packet of terbinafine tablets costs the same whether using a private prescription or a non-concessional PBS prescription, \$19.99. (All concessional PBS prescriptions are \$7.70).

Ok, let's argue that the reason for the authority numbers is to reduce clinically inappropriate prescriptions. In the case of terbinafine, to satisfy one of the PBS authority criteria, the doctor must try griseofulvin first. (By the way, four weeks of griseofulvin is about \$16, whether on a private or non-concessional PBS script.) But what if the patient is on an oral contraceptive and griseofulvin will reduce its effect? The additional medications and contingency plans to prevent pregnancy have additional costs to the patient and to the government and require more of the doctor's time.

It seems insane that so many inexpensive PBS medications require a telephone authority, especially when the PBS includes biologic medications with eye-watering price tags. When viewed in isolation by the funders, a few dollars of savings to the PBS and a clinical nudge may seem like a good idea. But if they looked at the unintended consequences, the true cost to the medical workforce is becoming increasingly apparent.

The first part of the SCLMA November clinical meeting will be our Annual General Meeting and I hope a good number of our members can attend.

Jon Harper
28/09/2024



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Hospital Liaison	To be advised
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The Sunshine Coast Local Medical Association welcomes contributions from members, especially 'Letters to the Editor'.

Please address all correspondence to:
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Highlights

P 6-7: SCHHS GPLOs
P 9: SCUH Hayley Farry
P 13: BPH Update
P 21: Trial - Saving Legs
P 24-27: AMAQ Update
P 28-29: Trial - IAR-DST
P 30-33: AGM 2023 Draft Minutes

DECEMBER 2024 NEWSLETTER

Deadline MONDAY 2nd December 2024

Our circulation via email, post and courier
It reaches more than 1,500 recipients!

Contact Jo: Mobile: 0407 037 112
Email: admin@sclma.com.au

We welcome new content - case studies, local news and photos.

If you are a new member, please send in a short bio and a photo to introduce yourself.

NOTE: We have changed to digital-only newsletter distribution

ALL Newsletters are posted to our website
<https://www.sclma.com.au>



ARE YOU A MEMBER?

If you are not a member please complete the application form available on the website:

www.sclma.com.au.

You will need two proposers to sign your application form.

If this is a problem, come along to a monthly clinical meeting to introduce yourself

Enquiries: Jo Ph: 0407 037 112
Email: admin@sclma.com.au

Are you listed on the Member Directory on our website?

Are your details correct?

Directory form available on the website.

www.sclma.com.au



TWENTY- SIXTH ANNUAL GENERAL MEETING
The Sunshine Coast Local Medical Association Inc.
THURSDAY 28 NOVEMBER 2024
Maroochydore Surf Club Cotton Tree
AGENDA

Business:

1. Chairman's opening remarks
2. Apologies
3. Minutes of previous Annual General Meeting, 28 November 2023
4. Business arising from previous minutes
5. The presentation of the statement of income and expenditure, assets and liabilities and mortgages, charges and securities affecting the property of the SCLMA for the last financial year
6. The presentation of the Auditor's report on the financial affairs of the LMA for the last financial year
7. The appointment of an Auditor/Accountant
8. The election of members of the Executive Management Committee
9. Incoming President's Address
10. General Business:

Close

Dr John Evans

Honorary Secretary

SUNSHINE COAST LOCAL MEDICAL ASSOCIATION Inc.
26 th ANNUAL GENERAL MEETING Thursday
28 November 2024 NOMINATION FORM
for the SCLMA Management Committee

Nominations are to be proposed by a Financial member of the Association, seconded by one other Financial member of the Association, and accepted by the nominee.

POSITION: _____

NOMINEE: (Print): _____

PROPOSER: (Print): _____

SECONDER: (Print): _____

I, _____
agree to this nomination (please sign)

RSVP:Friday 22 Nov 2024.

Scan& email to: admin@sclma.com.au





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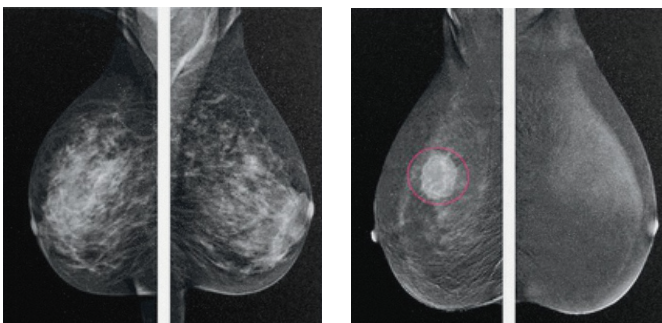
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Dr Sean O'Connor
MBBS, BSc (Hons.), FRANZCR

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assessment and
provides comprehensive
patient support.





Greetings from the SCHHS GP liaison office! This month we have some exciting improvements to share:

Request for Advice (RFA)

The new "Request for advice" option via SmartReferrals is now accepting requests for Rheumatology, Immunology, Dermatology, Neurology, Paediatrics, Cardiology

New specialties will be added over the coming months.

This service is intended to support GPs who have a non-urgent clinical question that can be answered by a hospital specialist without seeing or speaking to the patient. It is important to ensure that enough clinical information is included. We encourage you to make use of this service to receive advice directly from a hospital specialist, usually within five business days.

Further Information: GP Liaison unit: Ph: 5202 3822 SCHHS-GPLO@health.qld.gov.au

Publicly Funded Home Birth Service

Sunshine Coast publicly funded homebirth service has commenced. We encourage you to discuss this option with your pregnant patients.

Women who are healthy with a low-risk pregnancy, could be considered. The option of a homebirth will also depend on availability, geographic location, and a suitable home environment.

Further Information:

Sunshine Coast Health Home Birth Service: sc-mgp@health.qld.gov.au or

GP Liaison unit:

Ph: 5202 3822 SCHHS-GPLO@health.qld.gov.au

Information for patients: [Sunshine Coast publicly funded home birth information | Sunshine Coast Hospital and Health Service](#)

Caloundra MIIC Extended Hours

The Minor Injury and Illness Clinic at Caloundra Health Service will be extending its hours into the evening from Monday 30 September. The facility will be open from 8.00am to 10pm, Monday to Sunday, to help support the demand from working families after 5pm.



Virtual Emergency Care Service

NOTE: The Virtual Emergency Care Service is for Queensland GPs only

1. Call 1300 847 833 . Hours: 7 days per week (8am to 10pm Monday to Sunday). You will be connected directly to a senior emergency nurse who will rapidly Triage your call.
2. Please have the following information ready (this will take less than 1 minute)
 - o Clinician's name and phone number
 - o An email or other link if you require video consultation
 - o The patient's name, date of birth, hospital number (if available) and brief description of the problem

3. You will then be connected directly to an Emergency Specialist

This is a clinician only service. Patients can contact [healthdirect to access this service.](#)

The Emergency Specialist can assist in many ways:

- Advice to assist you to continue your patient management within the community Advise on the interpretation of pathology, radiology, ECGs and other investigations Engagement with hospital managed community services such as RADAR and HITH (Hospital in the Home) to support your patient with daily skilled nurse visits
- Connection to a hospital sub specialist for timely advice
- Direct admission to hospital for those patients who do not require urgent ED care
- Liaison with an Emergency Department specialist when rapid admission and care is required

You can seek advice and support for any patient that requires hospital level input but is stable and does not require urgent transport to a place of safety such as an Emergency Department.

More information @ [Virtual Emergency Care Service \(clinician service\)](#) | [Metro North Health](#)

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SCLMA SEPTEMBER SUNSHINE COAST HEALTH PROFILE – HAYLEY FARRY



While we usually like to introduce you to medical leaders from Sunshine Coast Health, it takes experts from many fields to operate the health service. So, we are sharing the spotlight around, to feature some of the Executives who play pivotal roles in making the health service function.

As our Executive Director Workforce (EDW), Hayley Farry's role is centred all around our people! Learn more about her below.

What does your role involve?

The EDW role oversees the support functions in place to support employees. In the EDW portfolio sits workplace relations, safety and wellbeing, recruitment, rostering and establishment and workforce capability.

My average day involves meeting with my teams to discuss any complex cases relating to WHS and HR matters as well as attending meetings to discuss matters relating to SCHHS employees. I really enjoy the time I spend with the workforce teams to discuss initiatives that support the employees and enhance their employee experience.

Please tell us about your work history/background.

My background probably isn't as most people expect, I come from a teaching background and have found myself in health. My first role in health was supporting the roll out of Professional Supervision and Mentoring across the state and the rest is history. I found my passion is in health and supporting clinicians to provide the best patient care possible.

I've always said 'yes' to every opportunity that has come my way and it's allowed me to work in a variety of roles in health before my first Executive role in Darling Downs Health. I love the challenge of working in health, there is always so much to do and so many ways to assist in high quality patient care whilst not being at the bedside.

What are you passionate about as a leader?

My drive as a leader is to always improve the status quo. If I'm not making things better in the long term, I'm not doing my job well. For me in the EDW role, my greatest passion is to ensure the health and wellbeing of our employees. I always consider what supports we can provide to frontline and non-frontline staff to ensure they can fulfil their job requirements to their highest capability and return home to their families each night safe and well.

What is your vision for the future of Sunshine Coast Health?

From a workforce perspective, my vision would be that SCHHS is an employer of choice. People would choose to work at SCHHS not only as a lifestyle choice but also to work with an innovative health service who prioritises their employee's wellbeing to enable them to provide the high quality, patient centred healthcare.

What is a fun fact about you many people may not know?

During my senior years at school, I worked on the lines boats in Gladstone Harbour, I love water and boating!





Matthew Sukkarieh
DIRECTOR AND PRINCIPAL LICENSEE

Matt has over 15 years experience in the financial services and property industries. He has worked as a financial adviser, buyer's agent and loan broker during this time to give every client the best possible outcome. Matt carefully takes into account every clients individual needs and goals to make sure they have advice well suited for their immediate and longer term situation.



Jolene Sukkarieh
BUSINESS DEVELOPMENT MANAGER

Jolene has had over 20 years experience in the financial services industry, previously providing advice in the areas of financial planning, tax planning, Self Managed Superannuation, insurance and property investing. At MySeeker Jolene has the role of Business Development Manager for MySeeker clients.

- Winner 2017 SMSF and Accounting Awards "SMSF Adviser of the Year", "SMSF Firm of the Year"
- Winner 2018 SMSF and Accounting Awards "SMSF Investment Strategist of the Year"
- Winner 2017, 2018, 2019, 2020 and 2021 Plan Australia Excellence in Finance Gold Status
- Winner 2020 Plan Australia Business of the Year (1 Loan Consultant) QLD
- Nominated Finalist 2019 Better Business Awards "Best Customer Service Office QLD" "Best Independent Loan Broker Regional QLD"
- Nominated Finalist 2020 Better Business Awards "Best Regional Broker QLD"

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BUDERIM PRIVATE HOSPITAL MONTHLY UPDATE

SHANE MITCHELL GENERAL MANAGER

E: shane.mitchell@uhealth.com.au
P: 07 5430 3260

Spotlight on Coinda Mental Health Services

World Mental Health Day | 10 October 2024

The World Health Organization's World Mental Health Day calls on us to help raise awareness of mental health issues and to mobilise efforts in support of mental health.

Buderim Private Hospital is proud to provide a range of inpatient and outpatient services for thousands of patients every year requiring treatment and support for mental health conditions.

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www.buderimprivatehospital.com.au/our-services/coinda-mental-health-service

New rooms for Dr Maya Menon & Dr Manish Chauhan at Buderim Medical Suites

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12 Elsa Wilson Drive, Buderim

Meet our new VMP



Dr Vanessa Watson

Gynaecologist

To search all of our doctors, visit
buderimprivatehospital.com.au

Farewell Dr Lisa Creighton

Please join us as we farewell Dr Lisa Creighton from private practice this month. Lisa has been a long-standing and very busy breast and endocrine surgeon at Buderim Private Hospital and will finish operating with us in mid-October. We wish Lisa all the best for life after private practice and thank her for all she has contributed to our hospital and to the care of our patients.

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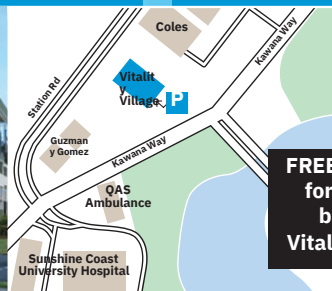
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HR UPDATE - RIGHT TO DISCONNECT LAWS

As of 26th August 2024, new HR laws have come into place for non-small business employers (these laws will come into effect on 26th August 2025 for small businesses). These new laws are related to employees now having the right to refuse to monitor, read or respond to contact (or attempted contact) made by their employer outside their working hours, unless doing so is unreasonable.

When working out whether an employee's refusal is unreasonable, the following factors must be considered:

- The reason for the contact
- How the contact is made and how disruptive it is to the employee
- How much the employee is compensated or paid extra for being available to perform work during the period they're contacted, or working additional hours outside their ordinary hours of work
- The employee's role in the business and level of responsibility
- The employee's personal circumstances, including caring responsibilities.

It will be unreasonable for an employee to refuse to read, monitor or respond if the contact or attempted contact is required by law.

It is advised to discuss out of hours contact with your staff members. Tips for this include having a discussion relating to:

- When the employee may be expected to monitor, read or respond to contact
- Pay and conditions that may relate to out of hours contact
- Preferred out of hours contact channels (Eg if there is a serious issue, an employee may prefer to be called on their personal phone)
- Who needs to be aware of out of hours contact arrangements
- When arrangements should be reviewed

Be careful – the reference to 'contact' could include a range of communication channels including calls, emails, texts, social media and messaging services. This rule also covers 'third parties' which could include clients, suppliers, staff from other businesses, or members of the public.

So, what do we take from this? Don't contact your staff members requesting a response if the matter can wait until the next business day.

For further information relating to these new laws please visit:

<https://www.fairwork.gov.au/employment-conditions/hours-of-work-breaks-and-rosters/right-to-disconnect>

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2024 ANNUAL CONFERENCE IS A SELL OUT!

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THE ROLE OF EXERCISE PHYSIOLOGY IN THE WORKERS COMPENSATION SCHEME

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SEEING AN EXERCISE PHYSIOLOGIST THROUGH WORKERS COMPENSATION QLD

Exercise Physiology (EP) is a highly valued service through Workers Compensation QLD (WCQ).

The primary goal is to successfully return the injured worker to their pre-injury work duties and hours with specific exercise prescription, motivational interviewing, and education on pacing strategies in a safe and durable manner.

Sports & Spinal EPs work as part of a multidisciplinary team to ensure the mental and physical components of the patient's injury, and barriers to recovery, are addressed.



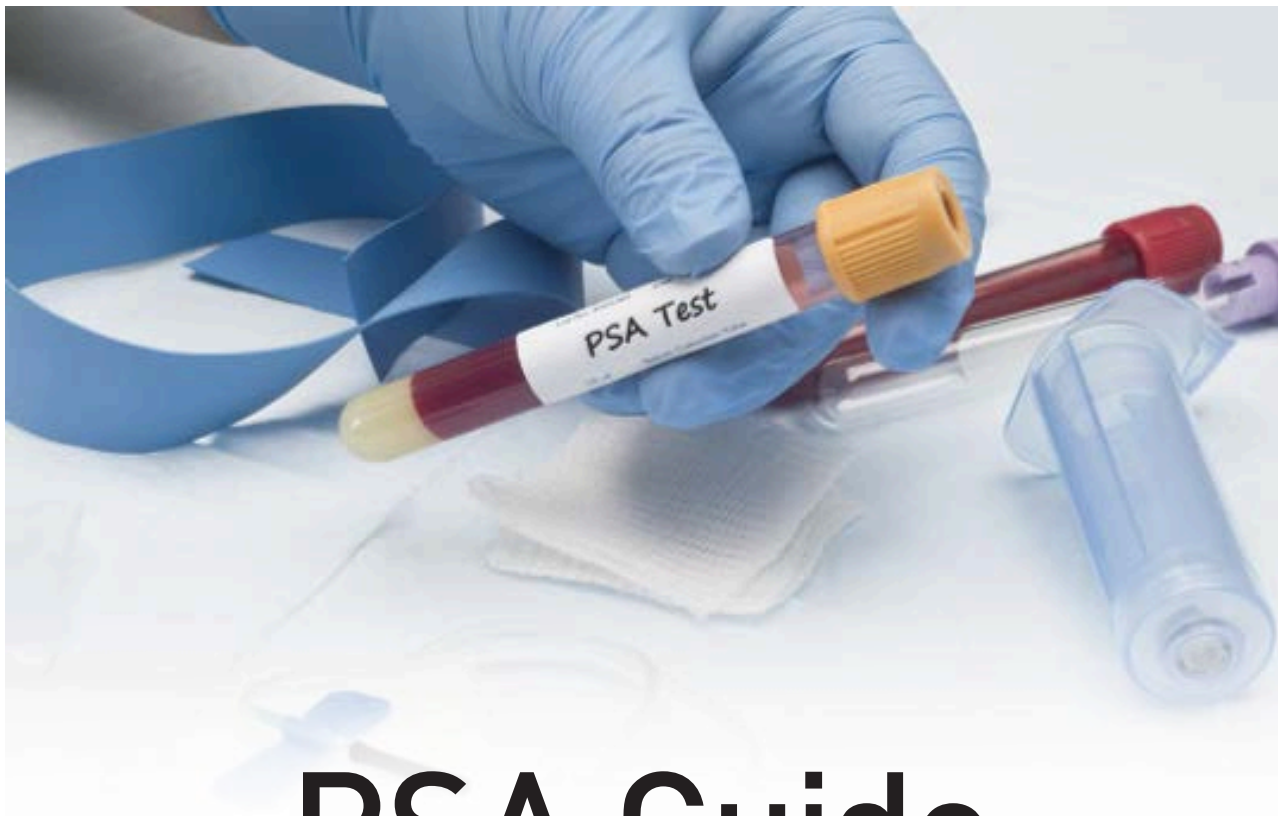
Utilising **VALD technology**, our Exercise Physiology team can measure specific, functional markers to facilitate the return to work process.



Once an injured worker's acute pain is managed the exercise prescription aims to replicate the exact work demands of the injured worker.

This task is broken down into small parts with the goal to improve movement patterns, endurance, and efficiency of the task.





PSA Guide

Early detection saves lives

PSA >3 is a red flag

(>2 if positive Family Hx, BRCA)

Repeat PSA in 1-3 months with free/ total ratio

Refer if:

Second PSA is still >3 (2)

Or anytime if there is a hard prostatic nodule
or PSA increases while on Duodart

Refer to:

Dr. Tony Gianduzzo or A/Prof. Troy Gianduzzo



Sunshine Coast Urology Clinic

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New State-of-the-Art Noosa Clinic Now Open!

Sunshine Coast Radiology is excited to announce the opening of our brand new clinic at Noosa Civic Medihub, 28 Eenie Creek Road, Noosaville.

As part of our commitment to delivering exceptional care across the Sunshine Coast, we are proud to extend our service offering into Noosa, whilst also introducing our first digital PET/CT scanning service.

Boasting state-of-the-art facilities and all-new diagnostic imaging technology, together with our expert radiologists and friendly team, we look forward to providing our dedicated care to your patients.

Our services include X-ray, ultrasound, interventional procedures, dental imaging, CT, and our PET/CT service, improving healthcare access and outcomes for patients in the northern Sunshine Coast region.



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www.sclma.com.au

GenesisCare, Noosa:

Opened and treating patients from 17th July 2024

Meet our Sunshine Coast team



We offer modern radiation therapy techniques and continuously invest in cancer treatments and technology with the aim of reducing side effects and improving quality of life.

Our team of radiation oncologists have experience across most types of tumours in adults. They aim to combine their knowledge, experience, and a multidisciplinary approach to offer personalised, evidence-based care to all patients.



Dr Debra Furniss

Radiation Oncologist
Gastrointestinal, breast, lung, skin and haematological malignancies, benign disease and palliative radiation therapy



Dr Bradley Wong

Radiation Oncologist
Wide field skin cancer, breast, prostate and urological lesions, benign conditions and palliative radiation therapy



Dr David Schlect

Radiation Oncologist
Neurological, brain and spine, lung, and skin cancers, rare tumours, sarcoma plus benign conditions

On the Sunshine Coast, our services offered include:

- Personalised care, treating the individual, not just the condition
- Radiation therapy for most adult cancer types
- Non-invasive treatment for non-melanoma skin cancer
- Rapid access to radiation therapy treatment in palliative settings
- Treatment for specific benign conditions e.g Dupuytren's disease, plantar fasciitis and keloid scars
- Stereotactic radiation therapy for cranial, lung, spine, prostate, bone, and liver lesions
- Patient transport service (for eligible patients)
- Access to allied health services
- Breast Cancer Nurse
- Breast Cancer Wellness Clinic

Treatment centres:

GenesisCare, Buderim
10 King Street
Tel: (07) 5374 8100
Fax: (07) 5374 8110
ReceptionOncologyBuderim@genesiscare.com

GenesisCare, Noosa
90 Goodchap Street
Tel: (07) 5377 2200
Fax: (07) 5377 2210
ReceptionOncologyNoosa@genesiscare.com

Consulting clinics:

Caboolture • Dr Debra Furniss
• Dr Debra Furniss
Noosa • Dr Bradley Wong
• Dr David Schlect
• Dr Bradley Wong
Gympie

Disclaimer: Any procedure including treatments involving radiation carry risks, including skin irritation and associated pain. Before proceeding with a referral for treatment, patients should be advised to seek a second opinion from an appropriately qualified health practitioner. As in any medical procedure, patient experiences and outcomes will vary.

genesiscare.com





Have you undergone vascular surgery for leg artery disease in the last 12 months?

If you have undergone a vascular procedure for peripheral artery disease in the last 12 months, you may be eligible to take part in a trial!

The Saving Legs and Lives Trial: Cardiovascular rehabilitation after leg vascular surgery

This trial is testing the benefit of cardiovascular rehabilitation in people who have undergone leg vascular surgery for peripheral artery disease.

The trial will involve:

- Six-week cardiovascular rehabilitation program
- Education sessions delivered by health specialists
- Assessment visits including:
 - Walking Tests
 - Vascular Function Tests
 - Questionnaires

Participants will be offered:

- Individualised exercise program
- Support to cover cost of parking to assessment visits (up to \$20 per visit).

Location:

The study will be conducted on the Sunshine Coast.



To learn more, contact a member of the trial team:
 Krist Feka | Trial Coordinator
 krist.feka@research.usc.edu.au
 +61 421 316 813

HREC approvals: 94155 (MNHHS), S231914 (UniSC)



Sunshine Coast
Hospital and Health Service



The Sunshine Coast's only integrated Cancer Centre

Our facility is home to:

- Highly experienced team of Medical Oncologists & Clinical Haematologists
- Day infusion unit providing the latest & cutting edge treatments (including chemotherapy, immunotherapy, targeted therapy, blood products, iron infusions & venesections)
- GenesisCare Radiation Oncology
- Cold cap therapy to prevent / minimise hair loss caused by certain chemotherapy treatments
- Allied Health including Clinical Psychology, Exercise Physiology, Dietetics & Oncology Massage Therapy
- McGrath Breast Care Nurse
- Clinical Trials



Our Team:



Dr Hong Shue
Medical Oncologist
MBBS (Monash), FRACP



Dr Brenton Seidl
Medical Oncologist
MBBS, BSc, FRACP



Dr Sorab Shavaksha
Clinical Haematologist
MBChB (Leeds), FRACP,
FRCPA (2013)



Dr Joshua Richmond
Clinical Haematologist
MBBS(Hons), FRACGP,
FRACP, FRCPA



Dr Alice Livings
Clinical Haematologist
BSc(Hons), MBBS(Hons),
FRACP, FRCPA



Dr Manjunath Narayana
Clinical Haematologist
MBBS, FRACP, FRCPA



Samantha Clutton
Clinical Psychologist
MPsychClin, FCCLP



Sarah Bloomfield
Dietitian & Nutritionist
APD, APN



Jesse Goldfinch
Exercise Physiologist
BClinExSc, ESSAM, AEP



Tania Shaw
Massage Therapist
DipRM, CLT, OMT



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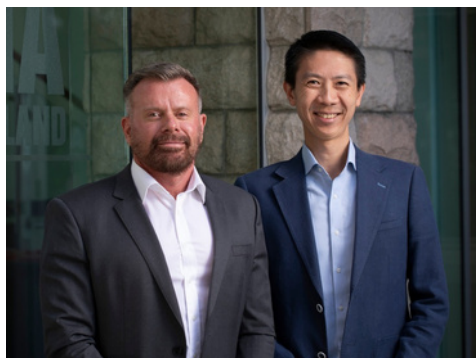
 bookings@xrayimaging.com.au





Supporting Queensland doctors,
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AMA QUEENSLAND UPDATE AUGUST 2024



AMA Queensland CEO Dr Brett Dale and President Dr Nick Yim

Health is proving to be a major campaign issue as the state election nears and AMA Queensland is carefully monitoring and analysing policies for their potential impact on our healthcare system.

We continue to work with all sides of politics to improve health services and guarantee patient safety.

WHOOPING COUGH

AMA Queensland and Health Minister Shannon Fentiman recently joined forces to urge Queenslanders to take advantage of free vaccinations.

GPs and our emergency departments are on the frontline as respiratory illnesses sweep through our communities. This year we are repeatedly seeing concerned parents present with young children suffering severe symptoms from whooping cough while vaccination rates remain low.

2024 alone has seen more than 7,000 confirmed cases of whooping cough compared to just 104 in the same period last year.

While childhood vaccination rates for whooping cough remain above 90 per cent, the proportion of pregnant Queenslanders taking up the free vaccine under the National Immunisation Program (NIP) has fallen to 70.7 per cent.

Immunisation during pregnancy is crucial to protect newborn babies and this 6.5 per cent decrease over the past two years is concerning.

Doctors know cost can be a barrier to accessing healthcare, especially preventative health.

We encourage all practitioners to talk to expecting parents about vaccination while vaccines remain free and whooping cough cases continue to rise.



[Read more](#)

PA'S WON'T SOLVE OUR WORKFORCE SHORTAGE

We have provided feedback on Queensland Health's proposal to employ more physician's assistants (PAs) in our public hospitals.

Queensland has a critical shortage of doctors, nurses, paramedics and other specialists across the whole health system.

But band-aid fixes, such as creating new and unproven roles like PAs, has the potential to worsen this crisis and reduce patient safety.

PAs usually perform tasks currently undertaken by our junior doctors as part of their essential training.

Reducing the opportunities available for junior doctors could threaten our future medical workforce pipeline.

Requirements for senior medical officer supervision of PAs also risks limiting access to these essential practitioners by doctors-in-training.



ama.com.au/qld





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There is also no university program for PAs in Australia, meaning they are likely to be recruited internationally, including from the UK and USA.

PAs are similarly not registered under Ahpra and competency standards a still unclear, raising concerns about patient safety.

We need long-term solutions to attract and retain our existing health workforce.

This is the most effective way to ensure ongoing and high-quality health care for all Queensland patients.

THREE AMA QUEENSLAND MEMBERS HONOURED AT AMA24

We are pleased to announce that three AMA Queensland members were honoured for their contribution to healthcare at the AMA24 National Conference.

The conference, held on the Gold Coast over the first few days of August, featured a packed program of keynote speakers, networking opportunities and workshops, all leading up to the Gala Dinner where members from around the country were honoured for their contribution to healthcare.



[Read more](#)



Professor of Obstetrics and Gynaecology Caroline de Costa AM was awarded the *2024 AMA Gold Medal* for her leadership in reproductive, Pacific and Indigenous health in regional Australia.

Dr Dinesh Palipana OAM has been honoured with the *2024 Diversity in Medicine Award* for his outstanding contribution to advancing diversity, equity and inclusion in the medical field.

Anaesthetist, researcher and teacher Prof André Van Zundert has been awarded the *2024 AMA Excellence in Healthcare Award* in recognition of his commitment to medicine, research, teaching and volunteering.



[Read more](#)

AHPRA PROPOSED HEALTH CHECKS

SCLMA members will have heard about Ahpra's proposal to introduce mandatory health checks for doctors over 70.

AMA Queensland President Dr Nick Yim told ABC Radio that new regulations must not discriminate against any group.

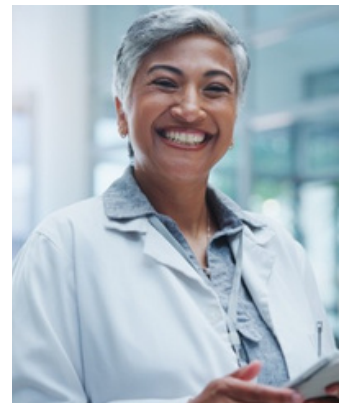
Doctors are just as prone to health issues as their patients and it is important medical practitioners of all ages have, and regularly see, their own GP.

However, Ahpra already has mandatory reporting for doctors and additional barriers could force them into earlier retirement.

We must retain as many health practitioners as we can by supporting them to continue working safely, including our experienced, late career doctors.



[Find updates here](#)



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UNITINGCARE ENDING ITS CONTRACT WITH AHSA

UnitingCare has ended its contract with the Australian Health Service Alliance (AHSA), leaving more than 2 million policy holders, including over 500,000 Queenslanders, in the lurch from 20 November 2024.

Private hospital groups are at loggerheads with private insurers over contractual agreements, but it's policyholders who are set to suffer the consequences.

These disputes undermine the confidence that Australians have in private health insurance arrangements, particularly as we have seen continued and significant premium increases alongside rising cost of living pressures.

AMA Queensland is calling on both parties to get back to the negotiating table for the sake of patients and the future of private hospitals.



[Read more](#)

SATELLITE HOSPITALS

Queensland Health data continues to show seriously ill patients are presenting to satellite hospitals when they need an emergency department (ED).

Following media reports, Health Minister Shannon Fentiman promised to work with AMA Queensland to improve public education about the facilities.

Despite the name, satellite hospitals don't function like hospitals.



[Read more](#)

Too often, patients present expecting emergency treatment, only to be transferred to an ED to receive the care they need, causing delay.

This not only causes a lot of distress for patients and their families but puts additional pressures on our health workforce and facilities.

Added to this confusion are urgent care clinics and nurse-led clinics which further stretch our overburdened workforce.



[Read more](#)

AMA Queensland will collaborate on an education campaign with the Government. However, it won't fix the root cause of the problem – gross underinvestment in general practice.

We will continue to advocate for greater investment in best practice health care across all levels of government.

SURGICAL WAITLIST ROUNDTABLE UPDATE

AMA Queensland's Surgical Wait List Roundtable held its fifth meeting on 27 August.

The Roundtable is identifying solutions to inequitable elective surgery wait times for regional and rural Queenslanders and includes clinicians from across the state.

Priority actions have included reviewing existing research and models, prioritising specialties and locations and identifying future data needs.

It is on track to release its Action Plan on 11 September, ahead of the October state election.



[Read more](#)

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THE IMPORTANCE OF DISCUSSING MEDICATIONS WITH YOUR GP

In response to a proposed class action by Shine Lawyers against proton pump inhibitors (PPIs) we spoke to ABC Radio about anticipated patient concerns.

The legal action claims a scientifically proven connection between PPIs and different forms of cancers or kidney failures – a claim that is likely to cause distress for patients currently taking the medication.

We reassured patients that while most medications have some side effects, PPIs have been around for decades, their side effects are relatively mild and they have been a life changer for much of the population.

The best thing for anyone who has concerns about their medication to do is to have that conversation with their GP.



[Read more](#)

2024 RESIDENT HOSPITAL HEALTH CHECK

Each year, ASMOFQ, in collaboration with AMA Queensland and its Committee of Doctors in Training, surveys Resident Medical Officers (RMOs) throughout Queensland, including Interns, Junior House Officers, Senior House Officers and those on Continued Residency.



The anonymous Resident Hospital Health Check (RHC) survey provides RMOs the opportunity to have their voices heard regarding access to professional development leave, hours of work and overtime, hospital facilities and workplace culture including bullying and harassment.

Thanks to all the junior doctors who have attended our hospital visits and supported this year's RHC survey. The more responses we receive, the better we can drive positive change for junior doctors in all Queensland hospitals.


The survey closes on Friday 12 September. The report card will be published in the coming months.



[View the campaign page](#)



[Read more](#)



WOMEN IN MEDICINE

BRISBANE *Breakfast*

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7AM – 10AM
WATERS EDGE

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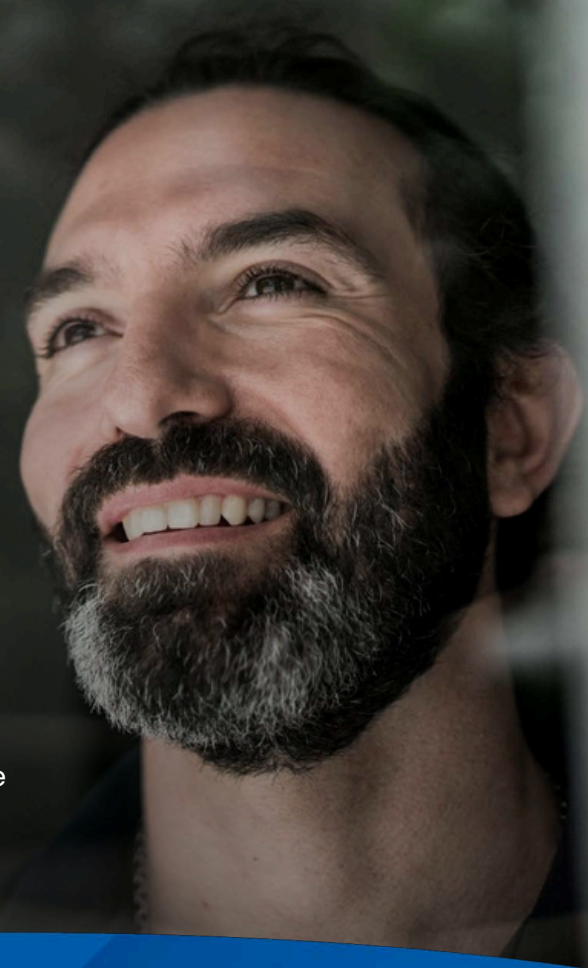




Thompson
Institute

Initial Assessment and Referral Decision Support Tool (IAR-DST) Training

Matching patient needs with appropriate care levels – a holistic approach to mental health assessment and referral.



What is IAR-DST?

The (IAR DST) is an initiative of the Australian Department of Health and Aged Care. The tool supports general practitioners and clinicians to connect people who are seeking mental health support with the most appropriate level of care. The free tool was created in consultation with an expert advisory group including lived experience and industry representatives, universities, and peak mental health bodies.

The eight domains encourage exploration of the person's internal experiences (primary domains) and the external experiences and resources available to the person (contextual domains). Based on the assessment and clinical judgement, the person seeking support is matched to an evidence-based intervention.

FREE training

\$300 GP payment GPs are eligible to receive a once-off \$300 payment to complete the training.

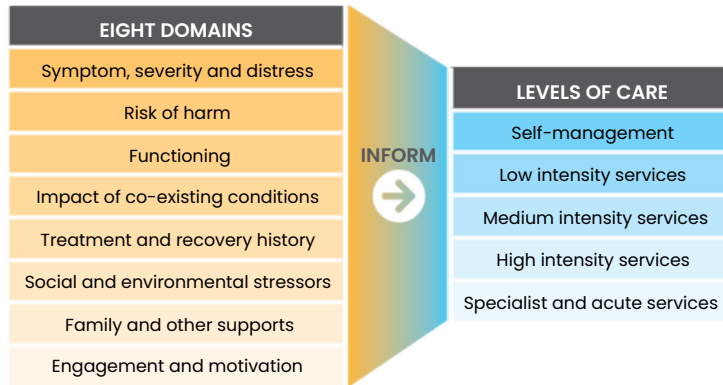
Trusted.
Trailblazing.

Transforming lives through mental health research, training and treatment.

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IAR-DST



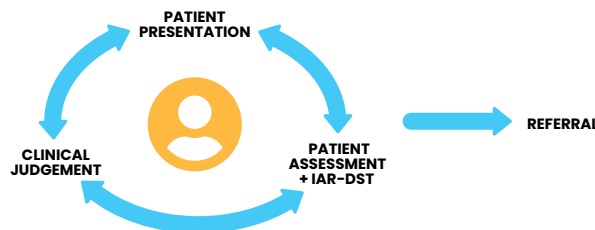
Why use the IAR-DST?

- Promotes patient-centred care and aims to improve patient outcomes**
The IAR-DST tool guides clinical judgment and creates a discussion with the patient about choice and preference for mental health services, empowering them by being involved in the decision-making process.
- Appropriate use of services**
Improved communication with patients ensures they are matched to the most appropriate service for their needs, leading to more efficient allocation of healthcare resources.
- Improved delivery of primary health care services**
The IAR-DST tool provides a standardised framework for all Commonwealth-funded mental health services to communicate assessment and referral information consistently using a shared language.
- Enhanced clinical assessment and decision-making**
Provides a more comprehensive approach than existing tools by using an evidence-informed framework leading to better patient outcomes.

The IAR-DST assists with identifying the most appropriate treatment intensity a patient needs.

A recent snapshot by Country to Coast Queensland (CCQ) reports¹ the majority of patients (78.5 percent), receiving low intensity psychological interventions experienced a significant improvement, whereas 42.5 percent of those receiving psychological therapies did not experience significant change. Furthermore, when compared with other states Queensland patients are behind on finishing their mental health treatment with only 30 percent completing the full episode of care (benchmark of 50.1 percent).

Matching patient needs for improved treatment outcomes.



¹ CCQ. Improving mental health – Suicide prevention, Alcohol and other drug services. The case for Change – July 2023.

FREE training

Make the latest tools work for your practice:

- c 1.5hr online session
- H 30min module to complete prior to training
- E check paid \$300 to get certified
- K get portal access
- E the training is offered at multiple dates and times.

Learning topics

- Background of the Initial Assessment and Referral Initiative
- The eight assessment domains of the IAR-DST
- The stepped care model and available PHN services
- Using the decision support tool to generate a recommended level of care
- Client involvement in the decision-making and referral process.

Register here



Country to Coast Queensland (CCQ) have commissioned UniSC's Thompson Institute to offer training for primary healthcare professionals wanting to harness IAR-DST benefits.



SUNSHINE COAST
LOCAL MEDICAL ASSOCIATION INC
ABN 56 932 130 084

TWENTY-FIFTH ANNUAL GENERAL MEETING
The Sunshine Coast Local Medical Association Inc.
Thursday 30 NOVEMBER 2023
Maroochydore Surf Club Function Room

DRAFT MINUTES

1	<p>Chairman's opening remarks – Welcome to the 25th Annual General Meeting of the Sunshine Coast Local Medical Association Inc.</p> <p><i>THE MINUTES OF THE LAST MEETING FOR NOVEMBER 2022 & THE AGENDA FOR TONIGHT 30 NOVEMBER 2023 WERE PUBLISHED IN THE OCTOBER 2023 NEWSLETTER. COPIES ARE ON YOUR TABLES. A NOMINATION FORM WAS ALSO PUBLISHED IN THE OCTOBER 2023 NEWSLETTER COPIES OF THE FINANCIALS ARE ON YOUR TABLES & OUR TREASURER PETER RUSCOE WILL SPEAK TO THEM LATER.</i></p> <p>I declare the meeting open at 7.14pm I have ascertained that a quorum is present according to the Rules of the Association – that is double the number of members of the Management Committee plus one. Only current members may vote at this meeting. I request that any member wishing to speak do so through the Chair, please raise your hand, stand, wait for the mike and announce your name.</p> <p>WELCOME: DR IAN COLLEDGE (SCLMA PATRON) DR WAYNE HERDY (SCLMA LIFE MEMBER) APOLOGY: WYN LEWIS (SCLMA LIFE MEMBER)</p>
2	<p>Attendance: 43 current members (as per sheet on sign-in table) Apologies: 22 from current members (as per list on sign-in table) Members present: (43) Drs Ian Colledge (Patron), Kevin Barker, Krys Cichocki, Marlene Clout, Wayne Crawford, Chris Dawkins, Nick Demediuk, James Dick, John Evans, Roger Faint, Jon Harper, Jacqui Heagney, Clint Herd, Wayne Herdy (SCLMA Life Member), Lisa Knesl, Edwin Kruys, Chris Lonergan, Philip Marshall, Scott Masters, Brian McDonnell, Tim McNamara, Sue Nightingale, John O'Bryen, Bryan Palmer, Trish Pease, Joanna Perry-Keene, Peter Ruscoe, Skye Salisbury-Briggs, Brian Smith Valerie Taylor, Karien Treurnicht, Matthew Tung, Franz Weil, Deborah Wiens, Jim Williams, Laura Williams, Bradley Wong, James Tunggal, Shyam Sunder, Raouf George, Peter Jacobs, Ian Raddatz. Members' Apologies: (22) Drs Paul Munchenberg, Di Minuskin, Michael Barrett, Bruce Goldshaft, Alex Matthews, Debbie Pfeiffer, Michael Barrett, Bruce Goldshaft, Geoff Byrne, Bill Myers, Heather Parker, Ajay Verma, Deepika Bhat, Noel Cassels, Wyn Lewis (SCMA Life Member), Jonathan Last, Stephen Byrne, David Colledge, Janet Ewan, Ian Gardner, Mike Haines, Heather Parker.</p>
3	<p>Minutes of previous Annual General Meeting, 24 NOVEMBER 2022. Motion: 'That the draft Minutes 24 November 2022 are an accurate record Moved: Dr John Evans Seconded: Dr Kevin Barker All in favour? Against? CARRIED.</p>
4	<p>Is there any Business arising from previous minutes: NIL!</p>
5.	<p>The presentation of the statement of income and expenditure, assets and liabilities and mortgages, charges and securities affecting the property of the LMA for the last financial year</p> <p>Current Treasurer, Dr Peter Ruscoe presented the Financial Report. Current Treasurer, Dr Peter Ruscoe moved a Motion to accept the Financial Report. <i>Motion – 'that the statement of income and expenditure for the SCLMA for the past financial year be accepted' Moved: Dr Peter Ruscoe. Seconded: Dr Scott Masters.</i> ALL IN FAVOUR? AGAINST? CARRIED</p>



6.	<p>The presentation of the Auditor's report on the financial affairs of the LMA for the last financial year: Current Treasurer, Dr Peter Ruscoe moved a Motion to accept the Financial Report. <i>Motion – 'that the meeting accept the Auditor's report.'</i></p> <p><i>Moved: Dr Peter Ruscoe. Seconded: Dr Kevin Barker</i></p> <p>ALL IN FAVOUR? AGAINST? CARRIED</p>
7.	<p>The appointment of an Auditor/Accountant: Current Treasurer, Dr Peter Ruscoe moved a Motion to approve the appointment of an Auditor / Accountant, Smart Steps Accounting, Mooloolaba.</p> <p><i>Motion – 'that the SCLMA approve the appointment of an Auditor/Accountant, Smart Steps Accounting.'</i></p> <p><i>Moved: Dr Peter Ruscoe. Seconded: Dr John Evans.</i></p> <p>ALL IN FAVOUR? AGAINST? CARRIED</p>

8.	<p>The election of members of the Executive Management Committee – Membership of the Committee shall commence from the date of the first meeting of the committee on 29 FEBRUARY 2024</p> <p>The following members were each proposed and seconded by current SCLMA members. All accepted nomination.</p> <p>We welcome our incoming Executive Management Committee for 2023-2024.</p> <p><i>Moved: Dr Roger Faint. Seconded: Dr John Evans.</i></p> <p>ALL IN FAVOUR? AGAINST? CARRIED</p>
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FORM	Position	Nominee Jon	Proposer	Secunder
	President	Harper	Roger Faint	John Evans
	Vice President & shared Meetings Convenor	Scott Masters	Roger Faint	Peter Ruscoe
	Secretary	John Evans	Jonathan Last	Roger Faint
	Treasurer	Roger Faint	Scott Masters	John Evans
	Newsletter Editor	Mara Clarson (to sign)	Roger Faint	John Evans
	Committee & Meetings Convenor	Alex Matthews (shared)	John Evans	Roger Faint
	Committee	Peter Ruscoe	Scott Masters	Roger Faint
	Committee	Wayne Herdy	Roger Faint	Peter Ruscoe
	Committee	Jonathan Last	John Evans	Roger Faint
	Committee	James Tunggal	Peter Ruscoe	Wayne Herdy
	Committee	Sue Nightingale	Roger Faint	John Evans
NEW	Committee	Jim Williams	John Evans	Jonathan Last



FORM	Position	Nominee Bryan	Proposer	Second
NEW	Committee	Palmer	John Evans	Jonathan Last
<p>Representatives and assistants to be appointed as required.</p> <p>SCHHS GPLOs: Edwin Kruys Michelle Johnston</p> <p>COUNTRY to COAST PHN: TBA</p> <p>President, SCJDS: TBA</p> <p>Student Representative: TBA</p>				

9. **OUTGOING President report – DR ROGER FAINT**

Dear LMA members, Committee Members, Jo Bourke, Kim Caffery and of course Jon Harper, GPLO's Edwin Kruys and Michelle Johnston, also, the NAB representative Brett Harris. It seems obvious to thank my supportive wife, however I do as she had a tear in her eye when I mentioned I was stepping down. I am stepping down tonight after 7 years as SCLMA president. As some of you may know, my becoming President was a 'baptism of fire', as I was not on the committee at the time. It was because of a nomination by Rob Park (a colleague of mine) and convincing telephone calls from the then President Di Minuskin and Secretary Mark De Wet that I decided to accept the role of President.

What Dr Minuskin didn't tell me was that the LMA was already at odds with the AMAQ in relation to supporting the concept of a local medical school. In fact the LMA and community members had a 'big barny' with Dr Chris Zappala, AMAQ President, in the room behind us one night, not long after I accepted the role.

The main point of concern was the AMAQ knew there were already too many doctors in QLD and Australia. The LMA didn't agree and who could foresee that today that state and country are significantly short of specialists, even on the Sunshine Coast, and including psychiatry.

As a secondary consequence of 200 students studying on the coast, the LMA has also benefitted from having medical students at our meetings on a regular basis and this lifted the clinical meetings not only in numbers but also in youth.

The difference in the meetings is often palpable.

Some of you may remember an online member survey that I initiated soon after I became President. The members clearly stated that the priority of this organisation was education, socialising and most importantly improving the health of the sunshine Coast community.

It was not to be a political organization I feel we have followed this mantra.

Over the last seven years, the LMA has lifted its profile with regards to the media, the local health service, sister organisations such as the Country to Coast PHN, the AMA, fundraising with WISHLIST and increasing its membership base.

The two proudest achievements I have had over the last 7 years are the establishment of the 'Health Report', with the coming together of local senior Health executives and the fundraising LMA/Wishlist Cocktail Party, which was once a small Christmas celebration.

These two events are now firmly entrenched into the LMA calendar.

The other proud achievement is that I have not bankrupted the organisation, Early in my presidency, Peter Ruscoe suggested i needed to spend a little more, and a little later he suggested I needed to spend a little less.



Thankfully, we are now in good financial shape, and I would like to thank Peter, who is stepping down as treasurer, for his lively advice and support over the years. I sincerely feel I received more than I gave to the organisation. Thank you. I will remain on the committee, as treasurer, as I believe that the LMA and I have much more to contribute to the local Sunshine Coast Health Community. Dr Jon Harper is a motivated, smart, well organised local General Practitioner, with a passionate interest in his patients, his dermatology and skin cancer work, the Country to Coast PHN, and is clinical lead with regards to the now essential Smart Referrals and Health Pathways. He has been a representative on the committee for as long as I was President and he has been a significant contributor to not only our committee, but also to the Health Report.

I could not think of a better person to take over the presidency.
Thank you Jon!

10. **INCOMING President report – DR JON HARPER**

“I am delighted to take on the role of president. I have been sitting on the LMA committee for some years and have had the benefit of learning from some very wise past presidents - Roger, Di Minuskin, Mason Stevenson, Wayne Herdy. I thought I would tell you a little bit about myself. I was born in the English heatwave of 1976 which I think gave me a misguided expectation about English weather and it wasn't long before I emigrated to somewhere warmer.

I almost became a psychiatrist, before switching to general practice and then developing an interest in skin cancer. I have worked in the NHS, Queensland Health, general practice and most recently a private specialist clinic.

I have a keen interest in health system integration, collaboration and reform. I have been working for the PHN for a while, almost 10 years as a GP liaison officer, and as senior clinical editor of the HealthPathways website.

I hope to bring to the role of president some of my experience in working with local, state and federal health systems - without falling into despair!

I believe the LMA provides a unique platform for much-needed peer support, it holds a diverse range of experience and opinion to inform local health system improvement, and it models a culture of best-practice through education to the local medical community.

I look forward to the coming year.
Merry Christmas!

General Business: NIL.

Close: 7.31pm

*Jo Bourke, AGM Chairman
SCLMA Secretariat
30 November 2023*



Classifieds

WEYBA MEDICAL CENTRE

We are looking for a GP to join our team of well established GPs.

We are non-corporate practice that has been in business for over 22 years.

We are seeking a GP wanting to work a minimum of 6 sessions Mon-Fri and Saturdays on a roster basis.

We use Best Practice software. We have a supportive team of admin and nursing staff. Please submit your enquiry to: practicemanager@weybamedicalcentre.com.au
<https://www.weybamedicalcentre.com> July 2024

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Please contact Katie Wulf

Email: pmanager@drjillodonnell.com.au

Call: 07 5436 6199 for more information April 2024

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The role involves set-up and minor assistance of our surgeon during procedures, under sedation only. These are mostly pregnancy terminations, but also IUD insertions/removals and an occasional vasectomy. There would be some time also in recovery assisting patients to prepare for home. Training will be done with you, so theatre experience is not necessary, but some recovery, emergency room or acute care would be beneficial.

We are a small team, and the successful applicant needs to be able to work well with others, and be supportive to our patients coming through, as many are experiencing

a traumatic time in their lives. The position is a casual role, but we generally operate two days a week, on Thursdays and Fridays. We are looking for someone who is able to commit to those days. Hours for those days are usually between 6-8 hours.

We are under the Private Health Nurses Award (MA000034).

Please email Jacqui at num@eastcoastwomens.com.au with a current CV, cover letter and references.

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To find out more, please email your resume to admin@nambourclinic.com.au or ring Rowena for an informal chat Ph: 0412 292 666. Continuing.

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Nov 2023*

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Redcliffe LMA produces a similar newsletter
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Email: RDMAnews@gmail.com

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To comply with Section 133 of the National Law and guidelines, advertising of services must not:

Paragraph (a) "Create or be likely to create unwarranted and unrealistic expectations about the effectiveness of the health services advertised"

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PLEASE NOTE THE FOLLOWING:

*The anti discrimination commission of Queensland has the following statement on job advertising:
Discriminatory advertising is against the law. Job advertisements need to give the impression that all suitable applicants are welcome to apply. References to sex, relationship status, age, race, religion etc should be avoided, as should the use of words that may indicate a preference for particular groups or may discourage others from applying, eg foreman, tradesman, glamorous, well-built, mature, youthful, office girl etc. Publishers can be fined and be the subject of a complaint to the Commission for publishing discriminatory advertisements that show an intention to contravene the Anti-Discrimination Act 1991. Discriminatory advertisements will therefore often be refused or modified by publishers in order to avoid legal liability.*



26 September 2024

Presenters: Dr Umesh Sinnya and Dr Tau Boga
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SUNSHINE COAST LOCAL MEDICAL ASSOCIATION
SCLMA Monthly Clinical Meeting and AGM

THURSDAY 28th Nov 2024

MAROOCHY SURF CLUB FUNCTION ROOM - Alexandra Parade, Cotton Tree
6.30 pm for 7.00 pm (9.00 pm finish)

Presenter: Dr Andrew Pattison
Respiratory & Sleep Physician
Topic: 'Lung Cancer Update'

Presenter: Kylie Ryland
Nurse Navigator
Topic: 'Lung Nodule Clinic'

Presenter: Dr Siavash Es'haghi
MB ChB FRANZCR, NIOSH Accredited B-reader
Topic: 'Lung Nodule Management'

Presenter: A/Prof Tom Campbell
MBBS DPhil FRANZCO
Topic: 'Vision Loss - More than just the Eye'

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