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New RACP president: here's how I'll fix the college

MEDICAL EDUCATION

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Professor Jennifer Martin takes on the RACP presidency at a time of unprecedented upheaval for the college.

Her predecessor, Dr Jacqueline Small, resigned less than two months ago, citing concerns over governance, as did the college's recently-appointed CEO, Lee Whitney.

Adding to the sense of turbulence, the RACP is preparing to undertake a major investment in overhauling its curriculum and technology that will see it plunge into the red for at least the next four years.

Meanwhile, there are new challenges on the horizon, including a battle for reaccreditation with the Australian Medical Council and competition for members in the form of the new CPD Homes.

A clinical pharmacologist and senior academic at the University of Newcastle, Professor Martin spoke with the limbic shortly after the RACP Congress in Sydney.

***The limbic:* When you were elected two years ago, you spoke about your priorities being things like health reform and climate change. Will issues like these need to go on the backburner while you sort out the internal mess you've inherited at the RACP?**

Professor Martin: It can be hard to put on a positive face externally if you haven't got your own house in order, so that's a fair question. We do need to get our internal systems working and the college performing at its best internally for members.

But there is still a very important external agenda, with the Federal Budget handed down a few days ago being an important example. It has impacts on health and climate, as you have just alluded to, and our members expect us to be out there talking about those issues and supporting policy that is conducive to good health out there.

Nevertheless, I am very focused on getting some of these internal concerns addressed, particularly in our big education and training portfolio. It is really important to us because we are an education body and we can't afford to fail again on that.

The good news is we've just had a review from our external regulator that supported the significant changes we're putting in place to improve our performance in education and training. We're going to keep focusing on that and our other internal issues, but it won't be at the expense of our quite powerful external advocacy.

Your immediate predecessor, Dr Jacqueline Small, raised concerns about college governance in her resignation announcement earlier this year, as

did the former CEO. Do you think there is a governance crisis? And, if so, what needs to be done to fix it?

Professor Martin: 'Governance' is a fairly vague word. It can mean a lot of different things to different people. But it's not something you really hear about when organisations are sound. Board chairs don't usually need to publicly discuss their governance.

However, for the record we have been working with external governance experts intermittently for a long period of time, constantly aiming for best board practices. In 2019, when the Australian Charities and Not-for-profits Commission – our regulator – came into the college, they did cite poor board governance and gave the college a number of recommendations and things to address. Since April, when I became chair and now president, we have been really working on addressing those issues.

Governance is an evolving process though and there are always new governance challenges. It will be the job of the board to address those and get the culture right at the top and to lead from the top.

Has a new permanent CEO been appointed?

We have an interim CEO and he has agreed to stay until we get a permanent CEO in place. He is very, very experienced and understood the issues that we needed to get across very quickly and the board are delighted to be working with him.

As a board, we have a very good relationship with the interim CEO and we're enabling him to run the operations of the college under the oversight of the board and in line with our board strategy and the operational plan. We have also been continuing our work with external governance experts and have seen important changes from that, particularly around the importance of empowering the CEO to deliver the business.

Is the multimillion dollar technology investment announced at the time of Mr Whitney and Dr Small's resignations still going ahead? Why is it so expensive?

We are investing in technology and digitisation to improve member services, create operational efficiencies and manage risks. We'll be doing it in sections, starting with a new training management platform as that is critical for us to be able to deliver our training system for members. Our current architecture features technologies that are not well integrated, causing issues for members and staff. We are shifting away from bespoke systems to a platform approach to provide a much better user-experience and data-management across all our digital channels.

So it's much more complicated than just buying one product as we are upgrading the whole system. Although, to be honest, if you do an IT upgrade on this scale anywhere now, it's not cheap. And by doing it bit by bit, the financial and other risks are smaller for our organisation. But we do have to get the training and management platform up pronto and running now, because it's necessary to support our education platform and our accreditation requirements. Our amazing education team are already doing that.

The funds for the IT upgrade are available, essentially savings for a rainy day. Well it's raining now and it's time to start delivering an IT system so we can deliver benefits to our members.

Fellows now have the option of leaving the RACP and joining CPD Homes with much lower fees. How concerned are you about a potential member exodus?

I think it is potentially a very big risk, not just for our college but for all colleges because there is always someone out there who thinks they can deliver a rival platform. But, having looked at the alternative providers currently, I wonder if

they just see it more as a business opportunity rather than having the technical knowledge and skill to develop a real competitor. The quality of what is on offer currently externally is at a pretty low level and I think there wouldn't be enough for our members at the moment to be attractive at all.

That doesn't mean to say that, in 10 years time, they won't have imported the systems and the educators and the curriculum experts to create some real competitors. But that will cost physicians maybe even more than what the college can currently provide it at.

As a result of this potential threat though, we have to be responsive to members. To start, we have already created 291 new educational videos using our huge amount of expertise, and more. We have around 150 educators employed at the college, as well as all of the technical and educational experts in our 30,000 membership – we've been able to draw on that and actually build some really high quality, world-class modules and other education support for our people. I don't think anyone else will be able to compete with that for a very long time.

So it's certainly a threat, but we've used it as an opportunity to invest in education and professional development support for life for our members. The issue also highlights why we really need to invest in technology to be able to deliver these high quality products for members.

What was your response to the Federal Budget? There didn't seem to be a great deal of investment in health, particularly specialist care.

One announcement we have been very interested in is the commitment to expand the network of urgent care clinics. After speaking with colleagues from other colleges, particularly the GPs, we have a real concern about whether this is money well spent to improve primary health care needs in Australia.

From a physician perspective, we support the need for very strong primary health care because it actually reduces unnecessary admissions. There are real risks with the urgent care clinical model, as we don't have any evidence that it stops hospital admissions, nor improves patient outcomes. We are not sure why the government didn't audit its own pilot data before expanding the program. The clinics seem to fragment health care even more and do not link with the secondary care system that is so often needed in that setting (chronic disease and co-morbidity for example).

More broadly, we are seeing a substitution of doctor work by non-doctors, which can undermine continuity of care and impact safety and quality. The colleges are already working on solutions to provide quality support in the regional areas as those patients deserve to have access to medical care, even if the specialist care is funded by a telehealth consultation supporting the local GP. And despite the increasing costs of Government-led non-doctors providing health care, we still have an underfunded primary health care system which we have evidence to show reduces unnecessary hospital admissions and is cost-effective method of providing quality care in the community.

Finally, what will you do differently to your predecessors as RACP president and how do you see things changing?

For starters, I understand I am the first president that has significant experience as a company director, a positive start for a board chair. I am still a member of a university council and I have been involved in the Australian Institute of Company Directors (AICD) off and on since 2010. I am on AICD's corporate governance committee, director professional development committee as well as its NSW council.

So there will be clearer recognition of the role of the board in our college and the importance of the division between the board and the actual running of the business.

Part of me actually hopes that members don't notice that change, however, but see the benefits that flow, in terms of the delivery of the member services. The board has been in the forefront for so many years, rather than the business of the organisation. I would actually just like it to disappear into the background and govern quietly whilst the business can deliver for members. I want to get to a situation where members aren't talking about the board or governance at the college, because it is functioning so well. Good governance is something that people generally don't notice and that is as it should be.