



RACP
Specialists. Together
EDUCATE ADVOCATE INNOVATE

P&A ANNUAL REPORT 2022

College Policy & Advocacy Council



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Introduction from the College Policy & Advocacy Council Chair

This will be my first report as Chair of The Royal Australasian College of Physicians' (College) College Policy & Advocacy Council (CPAC).

In the short time I have been leading this group and the policy and advocacy activities for the College, I have been amazed at the level of commitment and passion you give to this important work. You each bring your expertise in your specialties to draw together strong positions and clear actions. Without your input, collaboration and voices, we would not continue to deliver our health policy priorities.

I have joined CPAC at an exciting time, where we have begun the implementation stage of the CPAC Plan 2022–2026¹. This looks to address key priority areas where sustained engagement by the RACP is required to achieve change and outcomes. The Plan will be embedded across College policy and advocacy and drive the focus for future work, advocating for improvements to our health system and broader health and social policy, to achieve our goal of improved and equitable health outcomes for all in our community.

In the following pages are highlights over the last 12 months from CPAC member College Bodies and CPAC's work plan aligned to the CPAC Plan 2022–2026 focus areas.

It is through CPAC that we connect across the RACP, engaging with and supporting specialty and region led activities. Member engagement is critical to the RACP being able to build on our past achievements, which are founded on the expertise of and respect for our Fellows and trainees within our health community. I hope together we continue to strengthen the College's reputation as one of the leaders for health policy advice to Government and other health stakeholders.

Some of the key achievements showcased in this report include;



First Nations

- We are working with our Indigenous members from the Aboriginal and Torres Strait Islander Health Committee (ATSIHC) and the Māori Health Committee (MHC) on the constitutional reform process to embed Indigenous knowledge, leadership and values in the RACP constitution. A joint Board, ATSIHC and MHC meeting in November 2022 will include a focus constitutional reform. Embedding Indigenous knowledge, leadership, and values in the RACP constitution is vital to enacting the principles of self-determination, justice and equity in the governance of the RACP.



Health Reform

- With the election of a new Australian Government, the RACP has actively engaged with relevant Ministers, Shadow Ministers and key members of the Crossbench, highlighting synergies between the new government's election commitments and RACP policy priorities. In addition, College Fellows who are now Members of Parliament were personally congratulated on their election outcomes, and positive engagement continues.
- The RACP Pre-Election campaign included a Pre-Election Statement, and information sheet, a webpage, and a range of mechanisms for member support of our pre-election asks. The Statement called on

¹ https://www.racp.edu.au/docs/default-source/policy-and-adv/creating-equitable-and-healthier-communities-college-policy-and-advocacy-council-plan-2022-2026.pdf?sfvrsn=141cca1a_6

political leaders to 'commit to healthcare' asking the government to commit to a suite of priorities that will deliver a quality, future-focused healthcare system for all. The RACP's Pre-Budget Submission and the Federal Election Statement continue to serve as the basis for our advocacy work with the Labor Government, the Opposition and independents.



Climate and Justice

- The RACP continues to play an important leadership role in climate and health advocacy in 2022 with successful policy outcomes. Earlier this year the RACP launched the Climate Change and Australia's Healthcare Systems: A Review of Literature, Policy and Practice at a webinar with special guests Dr Richard Smith (former Editor in Chief and Chief Executive of the British Medical Journal) and Dr Nick Watts (Chief Sustainability Officer of the NHS England). In the lead up to the Federal Election, the RACP developed and launched the Healthy Climate Future campaign. The policy asks of the campaign are based on the RACP's comprehensive research report. The campaign has the support of 10 other medical colleges, together representing more than 100,000 doctors. The RACP has engaged closely with the Federal Health Minister on this issue.
- The elected government has committed to the development and implementation of a National Climate, Health and Wellbeing Strategy – one of the key asks of the Healthy Climate Future campaign.
- In September, the P&A Team supported RACP President to host a climate and health working dinner featuring Dr Nick Watts, in person. The dinner was attended by influential experts and advocates on climate change and health, including key RACP members, the CEO of Northern Sydney Local Health District and President of Public Health Association of Australia.



Populations in Focus

- Aotearoa New Zealand P&A continue to deliver against #MakeItTheNorm with the RACP presenting to the NZ Parliament Select Committee on Oversight of Oranga Tamariki System and Children and Young People's Commission at the start of the year. Also, successfully several of the RACP's recommended additions and amendments to the Pae Ora (Healthy Futures) Bill are visible in the Legislation Committee's report to the House of Representatives, including collaborative action on the social determinants of health, and greater reference to climate change. Work is scheduled to reinvigorate #MakeItTheNorm in the lead up to the Aotearoa New Zealand general election next year.
- Following the successful launch of the Kids COVID Catch Up campaign in February, the campaign continues to generate positive media coverage and social media engagement and successful policy outcomes. Hundreds of RACP members, other health professionals and parents have signed up to the campaign, and more than 100 of these supporters emailed their political leaders, using the campaign's online tool, in the lead-up to the Federal election. In response to supporters' emails, The Hon Mark Butler MP, who is now the new Health Minister, committed to a rapid review of support for children with disability in schools. In addition, Labor committed to improving mental health support in schools as part of a \$440 million package, which will also improve ventilation in schools. P&A continues the campaign at both the Federal and State levels.

Refreshed Approach

- To support our members in upholding this competency, in 2022 we launched the 'Advocacy for Physicians' e-resource. The advocacy e-resource was launched by the RACP President during RACP Congress in May. The launch took place during a well-attended advocacy workshop, featuring Young Australian of the Year and RACP trainee, Dr Daniel Nour founder of Street Side Medics, who is an experienced and dynamic advocate. The advocacy e-resource and workshop have provided members with tools and knowledge to apply in a range of advocacy settings. In addition, we have facilitated collective advocacy of members through the major RACP campaigns launched this year. A key focus in 2022 has been employing the latest techniques in online advocacy to allow time-poor members to take part in campaigns by lending their insights and influence through easy-to-use web platforms.
- In 2021, we worked with evaluation consultants Influence Global to develop a Monitoring and Evaluation Framework for Policy and Advocacy, and in 2022 we started implementing this new framework through three policy and advocacy projects. Work to embed monitoring and evaluation in a new policy project commenced in August 2022.

Professor Jennifer Martin

Chair, CPAC
President-Elect, RACP



CPAC and CPAC EC overview

The College Policy & Advocacy Council (CPAC) comprises up to 32 Fellows, trainees and consumer members representing the Colleges' specialties, Indigenous groups, regional and consumer perspectives and expert individuals. It meets twice a year to discuss, debate and decide the RACP's focus and priorities for health policy and advocacy.

CPAC's Executive Committee (CPAC EC) is a 12 member email-based rapid response group, highly experienced in health policy with a focus on delivering the highest standard of policy and advocacy for the RACP and its members.

2 <https://www.racp.edu.au/about/committees/board/college-policy-and-advocacy-committee>

What the RACP has done this year

CPAC Plan 2022–2026

The College Policy and Advocacy Council (CPAC) Plan 2022–2026³ has been approved and incorporated across RACP policy and advocacy. This is a refreshed approach to our policy and advocacy to position the RACP as a leading, evidence-based organisation on health policy.

With 4 focus areas that reflect the broad scope of the RACP’s work, and 6 approaches supporting strong and effective policy and advocacy.

College Policy & Advocacy Council Executive Committee

Due to it being an election year, COVID issues declining, and a strategic decision by CPAC to rebalance the focus to more proactive work alongside submissions and responses, the total number of CPAC EC matters has decreased slightly in this period. This is a positive outcome as demonstrated by all the proactive matters in this report, and that the Board KPI of 160 CPAC EC matters over this time period have been met.

During the reporting period between October 2021 and October 2022, the College Policy & Advocacy Council Executive Committee (CPAC EC) considered:



total no. of matters considered: **173**



no. of media releases and interviews: **53**



no. of submissions: **42**



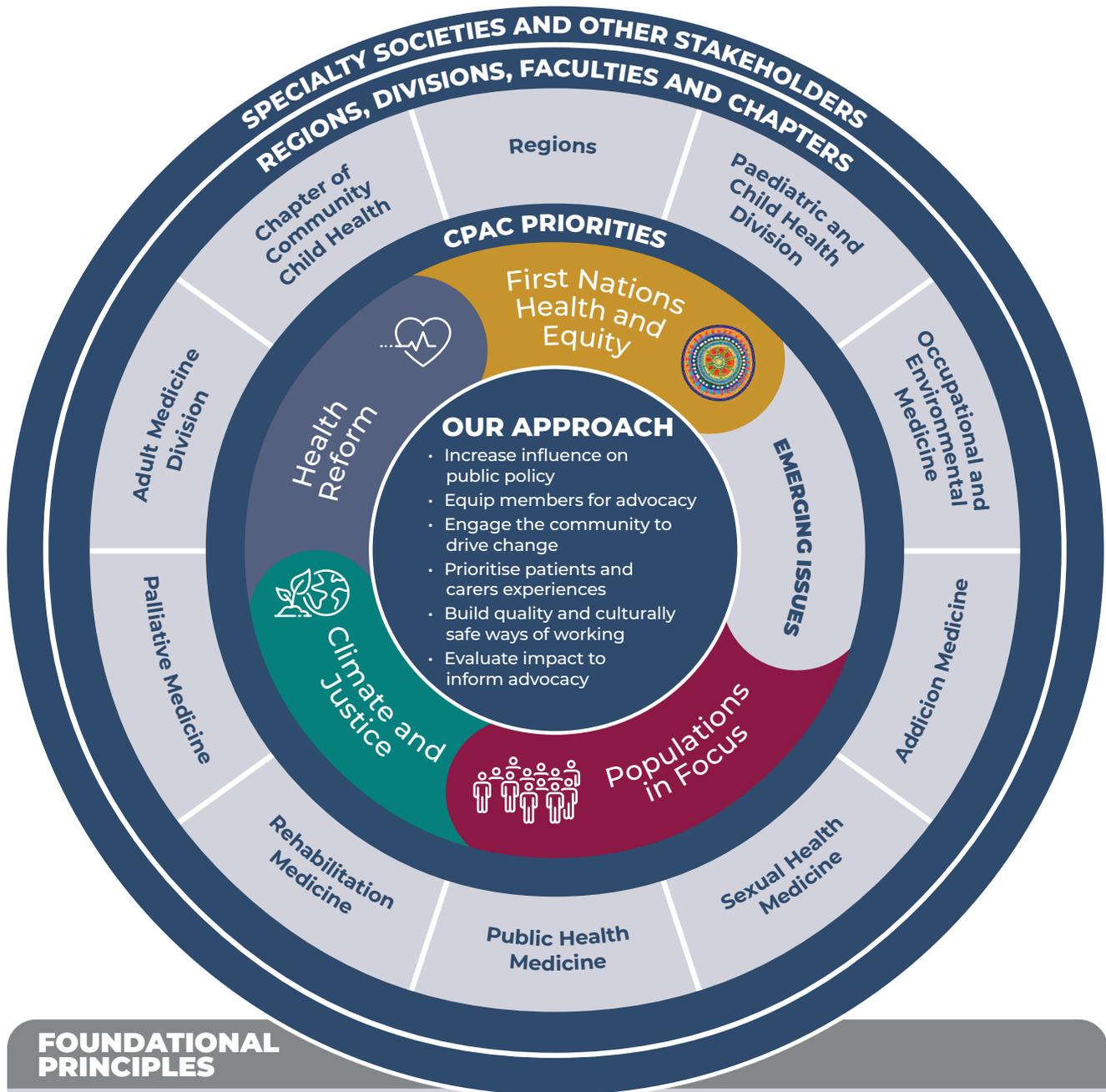
no of endorsements: **21**



no. Position statements in development: 7

- AFRM: Bariatric Rehabilitation position statement
- Revision of the RACP NDIS Guides
- PCHD: Health Care of Children in Care and Protection Services position statement
- PCHD: Revision of the Circumcision of Infant Males position statement
- AYAM: Youth Appropriate Health Care position statement
- AFOEM: The Value of Occupational and Environmental Medicine Physicians in Healthcare position statement
- AFOEM: Improving the Health of Healthcare Workers position statement

³ https://www.racp.edu.au/docs/default-source/policy-and-adv/creating-equitable-and-healthier-communities-college-policy-and-advocacy-council-plan-2022-2026.pdf?sfvrsn=141cca1a_6



FOUNDATIONAL PRINCIPLES

- Justice and equity for Aboriginal, Torres Strait Islander and Māori and Pasifika peoples
- High quality, effective and sustainable health systems
- Diversity and inclusion
- Healthy, liveable and sustainable communities
- Evidence based policy
- Health equity



no. Position statements published: 7

- Climate Change and Health Research Project final report
- Updated AFRM Position Statement on the Use of Stem Cell Therapy for Children with Cerebral Palsy
- AFOEM It Pays to Care: Bringing evidence-informed practice to work injury schemes helps workers and their workplaces
- RACP COVID-19 Living Narrative
- Pre-budget Submissions January and September 2022
- Federal Election statement 2022



Aotearoa New Zealand specific matters

Number of submissions: 9

Number of oral submissions: 2

Number of endorsements: 3



Government relations (Aus)

This is the first time government relations has been reported in this way in the CPAC Annual Report, and this reflects a focus on "increasing influence on public policy" as a strategy outlined in the new CPAC Plan 2022–2026.

MP/key stakeholder meetings:

No of Stakeholder Meetings	No of MP / Parliamentary Meetings	Roundtables/Forums/Workshops
55	17	4

- https://www.racp.edu.au/docs/default-source/advocacy-library/climate-change-and-australias-healthcare-systems-a-review-of-literature-policy-and-practice.pdf?sfvrsn=efe8c61a_6
- https://www.racp.edu.au/docs/default-source/advocacy-library/position-statement-on-the-use-of-stem-cell-therapy-for-children-with-cerebral-palsy.pdf?sfvrsn=8cd1c61a_6
- <https://www.racp.edu.au/advocacy/division-faculty-and-chapter-priorities/faculty-of-occupational-environmental-medicine/it-pays-to-care>
- https://www.racp.edu.au/docs/default-source/advocacy-library/racp-covid19-living-narrative_v2-0_may-2022_internal-links-removed.pdf?sfvrsn=9f4acc1a_0
- https://www.racp.edu.au/docs/default-source/advocacy-library/2022-2023-pre-budget-submission-to-the-australian-government-treasury.pdf?sfvrsn=69d1c91a_6
- https://www.racp.edu.au/docs/default-source/advocacy-library/racp-pre-budget-submission-to-the-australian-treasury.pdf?sfvrsn=5b94ce1a_4
- https://www.racp.edu.au/docs/default-source/policy-and-adv/election-statement/2022-racp-federal-election-statement.pdf?sfvrsn=1f1ecb1a_6



Dr Nick Watts, Chief Sustainability Officer of the NHS England, and Dr Jacqueline Small, FRACP, RACP President at the RACP's climate and health working dinner.

What members are saying

“

I think we can all be satisfied with what has been achieved so far, and excited about upcoming challenges.

AFOEM member

“

This is a magnificent document. Thank you.

AMD member regarding the RACP 2022–2023 Pre-budget Submission

Key events (eg Congress, webinars, workshops) including:

- **November 2021:** launched the Climate Change and Australia's Healthcare Systems: A Review of Literature, Policy and Practice at a webinar with special guests Dr Richard Smith (former editor in chief and Chief Executive of the British Medical Journal) and Dr Nick Watts (Chief Sustainability Officer of the NHS England).
- **February 2022:** Child Health Summit held 18 February with public launch of the Kids COVID Catch Up (KCCU) campaign. Member advocacy workshop held 17 February to discuss member involvement with the campaign
 - Member drop-in sessions for emailing MP for KCCU
- **February 2022:** Two RACP FAFOEM members gave evidence as witness Physicians to the NSW Standing Committee on Law and Justice, 2021 Review of the Dust Diseases scheme
- **April 2022:** Virtual launches in Australia and Aotearoa New Zealand of 'It Pays To Care' – a worker injury management improvement initiative
- **May 2022** Congress sessions:
 - Congress Advocacy Workshop
 - Advocacy e-resource launched at Congress Advocacy Workshop
 - *Tired of COVID? Aren't we all. Navigating ethical tensions during a pandemic*
 - Digital health and low-value care. Opportunities and limitations.
 - Next steps in Closing the Gap
- **COVID-19 Webinar Series:**
 - **March 2022:** Part 1 – Psychosocial disruptions of COVID-19 and mental health needs of healthcare workers and Part 2 – Supporting physician health and wellbeing
 - **July 2022:** Part 1 – COVID-19 now: vaccines, antiviral treatments, variants and Part 2 – COVID-19: Where to now?
 - **November 2022:** Part 1 – COVID-19 and Aboriginal and Torres Strait Islander communities and Part 2 – COVID-19 and Māori and Pasifika communities
- **August 2022:** Following a meeting with the First Assistant Secretary, Office of Health Protection and Response, CMO Group & Assistant Secretary, Environmental Health and Health Protection Policy Branch, to discuss impacts of climate change on the health system, the RACP President was invited to give a virtual presentation to the Australian Health Protection Principal Committee on the RACP's climate change and health research project.
- **September 2022:** the P&A Team supported RACP President to host a climate and health working dinner featuring Dr Nick Watts, in person.
- **October 2022:** RACP staff and members attended and presented at the AIDA Conference.

First Nations Health and Equity

First Nations Health

The Royal Australasian College of Physicians (RACP) Board's Aboriginal and Torres Strait Islander Health Committee¹¹ (ATSIHC) has, in partnership with the Māori Health Committee¹² (MHC), continued to guide the implementation of the RACP's Indigenous Strategic Framework (ISF)¹³. The ISF guides the work of RACP aimed at addressing health equity differences, growing the Indigenous physician workforce, equipping the broader physician workforce to improve Indigenous health, fostering a culturally safe and competent RACP, as well as meeting relevant regulatory standards.

In November 2019, ATSIHC held a priority setting workshop, where it was determined that ATSIHC's workplan going forward would focus primarily on priorities two and four of the ISF namely:

- Priority two: Increasing the number of Indigenous physicians
- Priority four: Fostering a culturally competent College.

Specific achievements include:

- Key elements of the RACP's Indigenous Strategic Framework have been embedded in the RACP's Strategic Plan 2022–2026¹⁴ and the CPAC Plan 2022–2026. We have also used Indigenous cultural elements and Te Reo Māori in the design of the strategic plan, in support of our priority of fostering a culturally safe, competent RACP.
- In May 2022, the RACP launched a fee reimbursement initiative for eligible Aboriginal and / or Torres Strait Islander, Māori and / or Pasifika trainees in non-District Health board training settings. Four trainees have received reimbursements.
- The RACP has implemented welcome activities for our Aboriginal and Torres Strait Islander trainees.
- Members now have access to a newly developed Curated Collection of cultural safety resources¹⁵ launched in February 2022.
- We included four specific Aboriginal and Torres Strait Islander advocacy "asks" in the federal pre-budget submission 2022–2023.¹⁶ We called on the Federal Government to fully support Indigenous-led measures to close the gap on Aboriginal and Torres Strait Islander health.



11 <https://www.racp.edu.au/about/committees/board/aboriginal-and-torres-strait-islander-health-committee>

12 <https://www.racp.edu.au/about/committees/board/maori-health-committee>

13 <https://www.racp.edu.au/about/board-and-governance/governance-documents/indigenous-strategic-framework-2018-2028>

14 https://www.racp.edu.au/docs/default-source/about/policies-and-guides/racp-strategic-plan-2022-2026b75daaafbbb261c2b08bff01001c3177.pdf?sfvrsn=dfefcb1a_4

15 <https://elearning.racp.edu.au/course/index.php?categoryid=30>

16 https://www.racp.edu.au/docs/default-source/advocacy-library/2022-2023-pre-budget-submission-to-the-australian-government-treasury.pdf?sfvrsn=69d1c91a_6



RACP Congress 2022: L-R: RACP members Dr Elkie Hull, Dr Karen Zwi, Mr Lee Bradfield, VACCHO CEO, Ms Jill Gallagher AO, and NACCHO Deputy CEO, Dr Dawn Casey.

- We have strengthened our partnerships with the Australian Indigenous Doctors Association (AIDA) and the National Aboriginal Community Controlled Health Organisation (NACCHO). For example, NACCHO, AIDA and the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) attended the RACP's Congress 2022 and presented on "Close the Gap – Next Steps." The RACP has also had papers accepted at the AIDA Conference in early October 2022.
- The RACP has supported the five dimensions of reconciliation through continuing to implement the RACP's Reflect Reconciliation Action Plan July 2021–July 22.¹⁷

- The RACP partnered and attended the 2022 AIDA Conference. The last Conference was held in 2018 and was interrupted by the COVID 19 Pandemic. AIDA has 250 Members attending with more than 20 colleges and partners. This year saw the graduation ceremonies for Graduates from 2019–2022. At AIDA, the RACP launched the Deadly Doctors network and celebrated all the activities, resources, and assistance that we offer to our Aboriginal and Torres Strait Islander Members and Trainees.
- This year RAP (Reflect) report has been submitted to Reconciliation Australia and this year had a very full list of activities and outcomes we are pleased and anticipate that the RACP will be elevated to and Innovation RAP.

ATSIHC has also been continuing to provide strategic direction and direct input into the RACP constitutional reform process to embed Indigenous knowledge, leadership and values in the RACP constitution. This will deliver on agreements between ATSIHC, MHC and the RACP Board at the historic 2019 Redfern meeting. A joint Board, ATSIHC and MHC meeting in November 2022 will include a focus on constitutional reform. Embedding Indigenous knowledge, leadership, and values in the RACP constitution is vital to enacting the principles of self-determination, justice and equity in the governance of the RACP.



Raise the Age

Momentum is growing in some Australian jurisdictions to independently raise the minimum age of criminal responsibility. The RACP has repeatedly called for this as a member of the Raise the Age campaign steering group. In 2020, the ACT Government committed to raising the age of criminal responsibility to 14, with legislation expected to be introduced later this year.

In South Australia, in May 2022, the states' first Aboriginal Attorney General expressed support¹⁸ for raising the age to 14 years. Since then, the South Australian Greens have introduced a private member's bill that would raise the age of criminal responsibility in South Australia to 14 years. In June 2022, the Tasmanian Government committed to raising the minimum age of detention (not criminal responsibility) to 14 years.

At the federal level, in June 2022, the new Minister for Indigenous Affairs, Linda Burney and Attorney-General Mark Dreyfus said that they intend to work with states and territories to raise the age of criminal responsibility.¹⁹

We continued our advocacy to raise the minimum age of criminal responsibility to a minimum of 14 years. Key activities have included:

- making a submission to the Queensland Parliamentary Community Support and Services Committee regarding the Criminal Law (Raising the Age of Responsibility) Amendment Bill 2021 (Bill) in November 2021
- obtaining high-profile national media coverage as part of marking Close the Gap Day.²⁰
- signing a joint letter with 80 other organisations to the new Federal Attorney General, Federal Minister for Indigenous Affairs and the Federal Minister for Youth and Early Childhood Education. The letter encouraged Federal Government leadership about raising the age of criminal responsibility to a minimum of 14 years.

17 https://www.racp.edu.au/docs/default-source/advocacy-library/p-a_rap2021_f_r1.pdf?sfvrsn=88f3c51a_4

18 <https://indaily.com.au/news/2022/05/10/sa-govt-to-turn-its-mind-to-raising-criminal-age-from-10/#:~:text=SA%20Govt%20to%20%27turn%20its%20mind%20to%27%20raising,the%20number%20of%20Aboriginal%20children%20in%20youth%20detention.>

19 <https://www.news.com.au/national/northern-territory/children-are-trying-to-harm-themselves-prison-where-suicide-attempts-common/news-story/9ee91bc6d27e6cd19b4103c9c433eec3c>



Tweet of SMH article on RACP joining the call to raise the age of criminal responsibility <https://twitter.com/chomskyrose/status/1504724683354406915>

- supporting the Raise the Age campaign day of action in August 2022. The Federal Minister for Indigenous Affairs, Linda Burney, and the Federal Attorney General Mark Dreyfus accepted a 200,000 strong petition²¹ from the Raise the Age campaign, calling for governments across the country to raise the minimum age of criminal responsibility to at least 14. The delivery of the petition received wide-spread positive media coverage²² including in News Ltd publications.

Raising the minimum age of criminal responsibility provides an opportunity to address the crisis levels of over-representation of Aboriginal and Torres Strait Islander people in the justice system. It provides the impetus for breaking the cycle of Aboriginal children's early entry into the criminal system. In doing so, it will contribute to

meeting the Closing the Gap target of reducing the rate of young people under 17 years in detention by 30 percent by 2031.²³

Youth justice advocacy

The Northern Territory (NT) Regional Committee has long advocated for youth justice reforms including raising the age of criminal responsibility and related youth justice issues.

In 2021 the NT Government passed harsh bail laws with no appropriate consultation. Since the introduction of these laws, the numbers of youth in detention have increased substantially. Fellows with first hand clinical experience, including some who have provided paediatric and young adult medical services to young people in detention at Don Dale Youth Detention Centre, have requested that the RACP advocate to the Northern Territory Government to address this issue.

In 2022, the NT Regional Committee has written to the NT Government seeking urgent reform. Dr Richard Budd FRACP met the Chief Minister in Darwin in late July, a meeting joined by audio by Professor Ngiare Brown, Chair of the Aboriginal and Torres Strait Islander Health Committee (ATSIHC).

The RACP has:

- expressed concerns about the increase in number of children in youth detention, especially First Nations children
- expressed concerns about the health and wellbeing of children who have self-harmed, and expressed concerns that a death by suicide is reasonably foreseeable
- called for improvements to the medical assessments
- highlighted lack of specialist paediatrician assessment for those entering the juvenile justice system

- sought an update of the Government's progress implementing the 227 recommendations of the Don Dale Royal Commission, and the work specifically being done in Aboriginal and Torres Strait Islander communities
- called on the Government to uphold its commitments to cease the use of spit hoods (while banned in youth justice facilities they are still used by police)
- noted the NT Attorney-General's statement that the age of criminal responsibility will be raised to 12 in the current term of parliament
- continue to urge the Government to accept the advice of paediatricians and health experts and commit to raising the age of criminal responsibility to 14
- noted that the ACT has committed to raising the age to 14, and has recently published a report outlining how this commitment will be fulfilled
- acknowledged the broader community's support for actions to reduce crime
- urged the design of a comprehensive approach for youth justice that includes adequate support for therapeutic interventions and other evidence-based alternatives to incarceration designed in partnership with Indigenous communities
- agreed to provide evidence about why the age of criminal responsibility should be at least 14 (not 12)
- agreed to subsequent meeting/s with other NT cabinet ministers (offered by the Chief Minister) to discuss how harms caused by incarcerating young children can be reduced to give these children the opportunity to thrive into the future.

20 <https://www.smh.com.au/politics/federal/impact-is-unfathomable-doctors-join-call-to-raise-age-of-criminal-responsibility-20220315-p5a4t1.html>

21 https://twitter.com/Change_Record/status/1554666287506530305

22 https://www.ntnews.com.au/subscribe/news/1/?sourceCode=NTWEB_WRE170_a&dest=https%3A%2F%2Fwww.ntnews.com.au%2Fnews%2Fpolitics%2F200000-aussies-sign-raise-the-age-petition-given-to-attorneygeneral-mark-dreyfus%2Fnews-story%2Fa394b9c8d1202fa5793523c49f28bb80&memtype=anonymous&mode=premium

23 <https://www.closingthegap.gov.au/national-agreement/targets>

Health Reform

Election and pre-budget activity

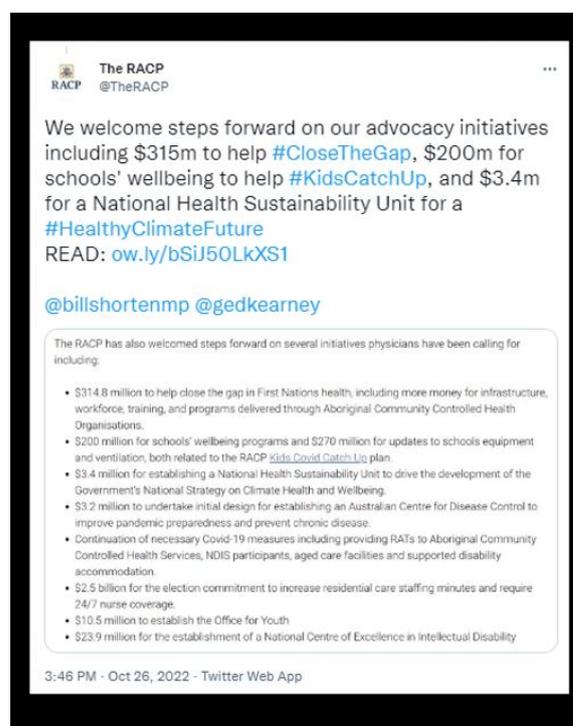
This election year the RACP delivered its Election Statement 2022 calling on political leaders to “commit to healthcare” in the lead up to the May vote. The RACP also made two Pre-Budget submissions to the Australian Treasury to inform the March and October 2022 Budgets.



The RACP's Pre-Budget Submission 2022–2023²⁴ titled *Delivering a Future-Focused Health System for Equitable Care and Healthier Communities* offered a constructive, practical set of recommendations based on the expertise and experience of our members working across primary, community and hospital settings in the public and private sectors. The recommendations focused on seven priority areas:

1. Boosting the COVID-19 response, recovery and pandemic preparedness
2. Delivering integrated and innovative health services to improve access and quality of care
3. Building an appropriately funded and safe medical specialist workforce
4. Closing the gap on Aboriginal and Torres Strait Islander health
5. Prioritising the health and wellbeing of children and young people and their recovery from the setbacks of COVID-19
6. Enabling Australians to live longer and healthier lives by strengthening support for preventive health
7. Making our health system low-carbon and climate resilient.

Following a period of advocacy aimed at the major parties, the RACP welcomed several measures announced in the March 2022 Budget such as additional investment in regional healthcare, the expansion of the national Take Home Naloxone program and funding for improved care for people with dust-related diseases. We also expressed our disappointment with the overall health Budget in a media release titled *Federal Budget stops short of delivering key reforms needed in healthcare*.²⁵



²⁴ https://www.racp.edu.au/docs/default-source/advocacy-library/2022-2023-pre-budget-submission-to-the-australian-government-treasury.pdf?sfvrsn=69d1c91a_6

²⁵ https://www.racp.edu.au/news-and-events/media-releases/federal-budget-stops-short-of-delivering-key-reforms-needed-in-healthcare?_zs=u629l&_z|=FCoA2



The RACP
@TheRACP

RACP FEDERAL ELECTION FACTSHEET 2022

The RACP plays an active role in election campaigns by advocating for policies that enable their patients to live longer, healthier lives. We've developed the RACP Federal Election Factsheet 2022.

DOWNLOAD FACTSHEET: bit.ly/RACPelection



11:00 AM · Apr 21, 2022 · Hootsuite Inc.

In the lead up to the May 2022 Australian Election, the RACP launched its Election Statement 2022²⁶ which called on political leaders to “commit to healthcare” by adopting a suite of policy recommendations designed to deliver a quality, future-focused healthcare system for all through four priority areas:

1. System reform to strengthen the health system
2. Prevention to reduce preventable chronic disease and ill health
3. Equity to give all Australians the opportunity to have good health and wellbeing across their lifespan
4. Climate resilience to equip our healthcare system so it is climate ready and climate friendly

The Pre-Election Statement was accompanied by a Federal Election webpage²⁷ and a Fact Sheet.²⁸ These materials were used as the basis for advocacy targeting key stakeholders, including political parties, ministers and shadow ministers and media, as well as partners of the RACP in order to amplify our common asks.

The RACP welcomed the election of the new Australian Government on 27 May 2022²⁹ and P&A Team prepared an Australian Government Brief to assist the Government in its transition to power. The brief set out areas where the RACP’s policy priorities closely align with the commitments made by the Government and described the expertise and experience our members can contribute towards the attainment of these goals. This document was provided to relevant Ministers and Assistant Ministers, along with individual letters from the RACP President, Dr Jacqueline Small FRACP. It has also been used as a platform to engage with stakeholders and to support our meetings with Government and departmental officials.

²⁶ https://www.racp.edu.au/docs/default-source/policy-and-adv/election-statement/2022-racp-federal-election-statement.pdf?sfvrsn=1f1ecb1a_6

²⁷ https://www.racp.edu.au/advocacy/australianelection/?_zs=u629I&_zl=EC0A2

²⁸ https://www.racp.edu.au/docs/default-source/policy-and-adv/election-statement/racp-commit-to-healthcare-fact-sheet-2022.pdf?sfvrsn=c5acb1a_4

²⁹ <https://www.racp.edu.au/news-and-events/media-releases/college-welcomes-new-federal-government>



Hon Dr David Gillespie MP and Dr Jaqueline Small, President RACP

The new Australian Government announced that it would deliver its first Budget on 25 October 2022. To inform the Budget, the RACP developed a Pre-Budget Submission titled *Sustainable, Resilient, Future-Focused: The path to equitable care and healthier communities*³⁰ which was submitted to Treasury and promoted broadly to stakeholders across the RACP’s internal and external communication channels. The Pre-Budget Submission is focused on measures relevant to delivering and enhancing Government commitments as effectively as possible to move us towards equitable care and healthier communities through a sustainable, resilient and future-focused health system for all. The Pre-Budget Submission is structured along the same four priority areas used in the RACP’s Pre-Election Statement.



Nicola Lewis, RACP Executive General Manager, P&A, Dr Jaqueline Small, President RACP, Dr Helen Haines MP

Government advocacy in Aotearoa NZ

In Aotearoa NZ several of the RACP’s recommended additions and amendments to the [Pae Ora \(Healthy Futures\) Bill](#)³¹ were visible in the [Legislation Pae Ora Legislation Committee’s report to the House of Representatives](#)³² released in late April 2022, including collaborative action on the social determinants of health, and greater reference to climate change.

Members continue to engage with Te Whatu Ora/Health NZ, including an AoNZ AMD Committee hui with Dr Pete Watson FRACP, Interim Lead Medical in July 2022. Once the official sign off of the health charter has occurred (exact timing not determined) there will be various initiatives within both Te Whatu Ora and Te Aka Whai Ora that will offer our members an opportunity to connect in a meaningful way.

³⁰ https://www.racp.edu.au//docs/default-source/advocacy-library/racp-pre-budget-submission-to-the-australian-treasury.pdf?sfvrsn=5b94ce1a_4

³¹ https://www.parliament.nz/en/pb/bills-and-laws/bills-proposed-laws/document/BILL_116317/pae-ora-healthy-futures-bill

³² https://www.parliament.nz/resource/en-NZ/SCR_121586/d80719c2b3802fca7a2cba36fe6d26727feb319b

Integrated and innovative care

Front-foot action on systemic barriers to access and integration

Over 2021 and 2022, the Australian Governments expanded, then somewhat limited, MBS telehealth items for specialists, committed to the Voluntary Patient Enrolment (VPE) scheme, and, in the case of the Albanese Government, announced the establishment of urgent care clinics and the Strengthening Medicare Taskforce to improve connection points between medical and allied health professionals in primary care. The RACP has advocated extensively on the need to include physicians in these initiatives as a requirement for integrated primary care per the Strategic Focus Area *Equitable and healthier communities*.^{33,34}

The RACP has positioned itself as a trusted advisor to the Government as it progresses its health reform agenda:

- The RACP Model of Chronic and Complex Care³⁵ has been used as a launching pad to promote the RACP as a source of independent advice for ongoing Medicare reforms, forging a pathway for input on VPE, MBS funding models, and primary care reform.
- Via briefings, meetings and other advocacy opportunities, we have highlighted our expertise in care integration, models of care, funding reform and workforce development to Ministers and key departmental officials. We have offered similar expertise in our meetings with MPs and their staff.
- At the request of Minister Butler, the P&A Team completed a rapid literature review comparing the outcomes of telephone and video consultations to inform ongoing advocacy in this area. This review lent support for telehealth item reinstatement and highlighted access and technology deficits that need to be addressed as a matter of priority. The review has been shared with the Minister, MPs and other stakeholders.

- The RACP has established a new Health Reform Working Group to provide thought leadership and drive the RACP's agenda for integrated and virtual care, innovative payment models and broader health reform policy and advocacy.

Workforce planning and equitable access to care

The P&A Team has worked to underline to decision and policy makers that effective system reform requires a robust, appropriately funded and distributed physician workforce. We have raised awareness of long-standing, COVID-intensified levels of demand, increasing patient complexity, deferred care, maldistribution of the physician workforce, increasing burnout and the limits each places on system capacity for responsive patient care.

Over the last year, the RACP has used its advocacy channels to call for national workforce reforms boosting physician supply and distribution. In line with the Strategic Focus Areas *Physician and practice of the future* and *Equitable and healthier communities*, our core advocacy targets included boosting Specialist Training Program position numbers in rural and regional areas; introducing a streamlined application process and more attractive working and living conditions for skilled migrants, including specialists; securing flexible training, working hours and leave conditions for trainees and specialists and developing an appropriately funded Aboriginal national health workforce strategy to be led by the NACCHO for First Nations worker growth.

33 RACP Pre-Budget Submission to the Federal Labor Government, September 2022 [online]; [racp-pre-budget-submission-to-the-australian-treasury.pdf](#)

34 RACP 2022 Election system reform statement [online] [2022-election-system-reform-statement.pdf \(racp.edu.au\)](#)

35 RACP, Complex care, consultant physicians and better patient outcomes, October 2019 [online]; https://www.racp.edu.au/docs/default-source/advocacy-library/c-final-mccm-document.pdf?sfvrsn=f873e21a_14

RACP media releases³⁶, policy submissions (notably the initial³⁷ and most recent³⁸ 2022–2023 Pre-Budget Submissions), meetings with Ministers, Senators, political advisors, and senior departmental staff have served to raise awareness of physician workforce constraints and their implications for patient care, as well as to promote key recommendations to relieve the ongoing pressures on the health workforce.

Review of the National Medicines Policy

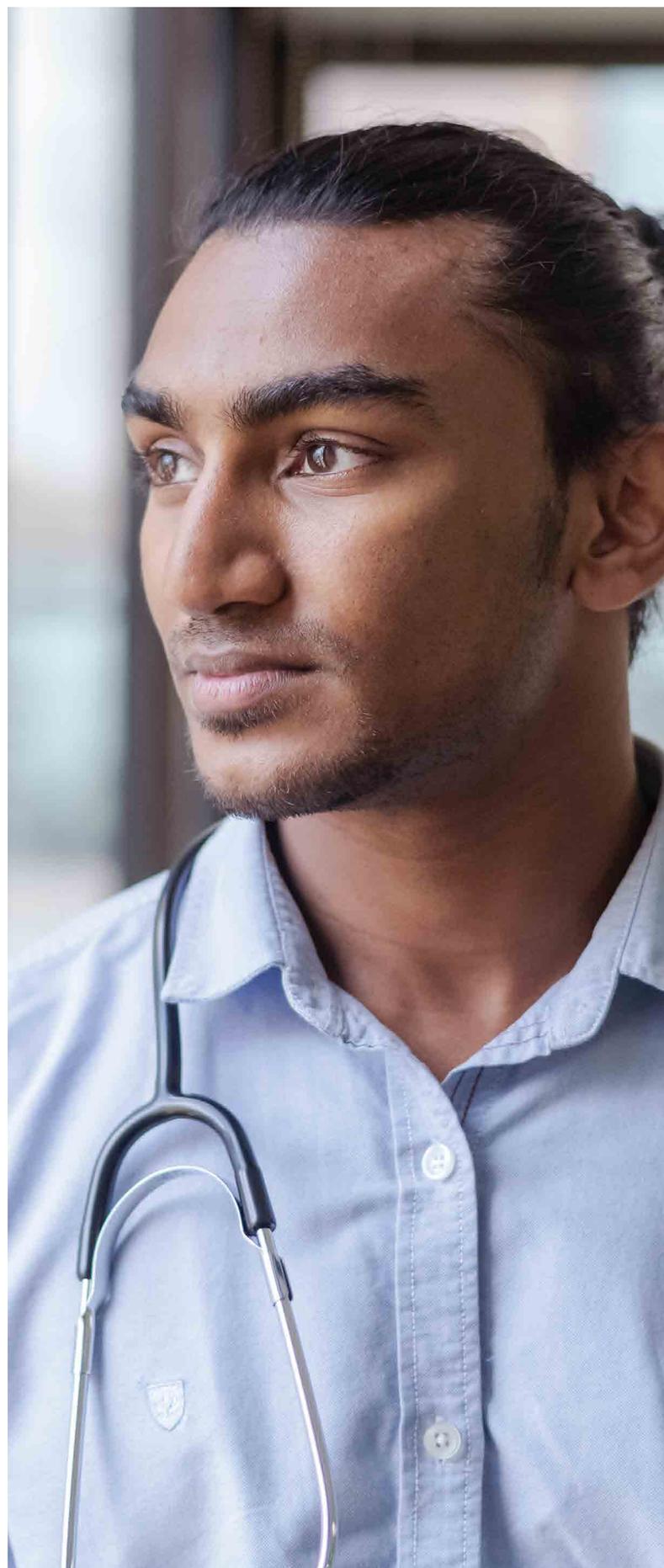
The Australian Department of Health and Aged Care's National Medicines Policy (NMP) aims to set the direction and approach for the availability and use of medicines in Australia. It is applicable to medicines research, development, regulation, manufacture, evaluation, supply and access. It seeks to promote the quality use of medicines by focusing on the needs of people and the responsibilities of health professionals to support all communities in Australia to achieve optimal health outcomes.

The Review of the NMP was commissioned by the previous Minister for Health, the Hon. Greg Hunt MP, in recognition of the substantial changes to the health landscape since the policy was published in 2000. It commenced in February 2020 and is due to be completed by the end of 2022.

³⁶ RACP Media Release Library [Media releases \(racp.edu.au\)](https://www.racp.edu.au/media-releases)

³⁷ RACP 2022–23 Pre-Budget Submission to the Federal Liberal Government, January 2022 [2022–2023-pre-budget-submission-to-the-australian-government-treasury.pdf \(racp.edu.au\)](https://www.racp.edu.au/2022-2023-pre-budget-submission-to-the-australian-government-treasury.pdf)

³⁸ RACP 2022–23 Pre -Budget Submission to the Federal Labor Government, September 2022 [online]; [racp-pre-budget-submission-to-the-australian-treasury.pdf](https://www.racp.edu.au/2022-2023-pre-budget-submission-to-the-australian-treasury.pdf)



Since the review began, the RACP has made two submissions³⁹ and the RACP's Lead Expert Fellow for the NMP Review, Associate Professor Madlen Gazarian FRACP, has attended stakeholder workshops chaired by Professor Michael Kidd, Deputy Chief Medical Officer to further highlight the RACP's feedback on the revised NMP. CPAC Chair Professor Jennifer Martin and P&A leadership attended a meeting with key departmental officials to discuss NMP and other matters related to access and quality use of medicines.

To date, the RACP's feedback has focused on the need for the revised NMP to:

- articulate overall governance and accountability mechanisms and specific details on the implementation and evaluation of the NMP
- strengthen the NMP's commitment to equity of access to medicines for all who are disproportionately impacted by health inequities
- recognise the specific needs of children and young people
- acknowledge the importance of ensuring the currency and sustainability of the clinical pharmacology workforce to enable safe, effective and quality use of medicine and ensure this expertise is included as a key component within future governance arrangements and planning for the NMP
- directly and consistently embed relevant specialist advice throughout the NMP process.

Advocacy for better MBS

Making specialist telehealth items a part of permanent MBS arrangements has been a core policy and advocacy activity for the RACP for some years. It predated the pandemic but became especially prominent since the emergence of COVID-19 in early 2020. This concerted advocacy led to the Government's announcement in late 2021 that telehealth arrangements were being made permanent. Our strong and consistent advocacy has continued into 2022 in the form of meetings with the Government and media statements, in particularly around members' chief concerns over the removal of specialist telehealth phone items. In addition, the RACP has also been advocating for funding videoconferencing technology packages for patients, especially in priority populations. Two wins ensued early this year with the previous Government announcing:



33 initial and complex specialist telephone consultation items and 40 specialist inpatient telehealth items was reinstated until 30 June 2022.



The introduction of the 30-20 auditing rule was delayed.

39 RACP submission to the NMP Review Discussion Paper in October 2021: https://www.racp.edu.au/docs/default-source/advocacy-library/racp-submission-to-nmp-discussion-paper.pdf?sfvrsn=3846c41a_8 and RACP submission to the NMP Review Consultation Draft in March 2022: https://www.racp.edu.au/docs/default-source/advocacy-library/racp-feedback-on-the-australian-government-s-national-medicines-policy-consultation-draft.pdf?sfvrsn=7928c81a_8

The RACP responded with issuing two media releases to welcome the reinstatement decision⁴⁰ and to reiterate our concerns about the auditing rule.⁴¹

In the lead up to the mid-year cut off, the RACP made every effort to advocate against cuts to specialist telehealth consultations by phone.^{42,43} However, on 30 June, the new Health Minister announced the decision to discontinue several specialist MBS phone-based telehealth items⁴⁴ introduced as part of the pandemic response in a move toward greater use of video consultations. This was done despite increases in the costs of living, adding to patient in-person travel costs, the Government's pre-election commitment⁴⁵ to make it easier to access medical care and the AIHW data⁴⁶ revealing rural and remote patients access specialist care at a significantly lower level than their metropolitan and regional counterparts (13% versus 34 and 33%, respectively).

A RACP media release⁴⁷ was issued immediately to oppose the cuts, followed by another release⁴⁸ urging the Government to reconsider its decision and highlight the impacts of the cut on access to specialist care. These include worsening unmet demand for specialist services in rural and remote areas, reducing access to specialist healthcare for underserved patients across a broad range of geographic and socioeconomic settings and increasing out-of-pocket expenses.

Since then, the RACP has met with the Health Minister, the Department of Health and Aged Care and Members of Parliament to advocate for the reinstatement of all specialist telephone MBS items and the funding for

videoconferencing technology packages for priority patients. Our messages to stakeholders stress that video consultations cannot adequately replace phone consultations because of the persistent digital divide and because many patients continue to prefer phone consultations.

The RACP has made two recent submissions on MBS telehealth arrangements:

- A confidential submission to the Medical Board of Australia's Draft revised Guidelines for Telehealth consultations with patients
- A submission to the Australian National Audit Office to inform its Audit of Expansion of Telehealth Services⁴⁹

At the request of Minister Butler, the P&A Team completed a rapid review of available literature comparing the outcomes of telephone and video consultations to inform ongoing advocacy in this area. This review lent support for phone items reinstatement and highlighted access and technology deficits that need to be addressed before the broader move to videoconferencing.

Our advocacy across all channels consistently highlights that the best option for consultation length and modality should be decided jointly by the patient and the doctor based on the type of care that is clinically appropriate and practically achievable. The phone remains a required and much-used option.

40 <https://www.racp.edu.au/news-and-events/media-releases/physicians-welcome-decision-to-reinstate-telehealth-items-for-specialist-care>

41 <https://www.racp.edu.au/news-and-events/media-releases/phone-consultations-audits>

42 <https://www.racp.edu.au/news-and-events/media-releases/don-t-cut-them-off---physicians-urge-government-to-maintain-specialist-phone-telehealth-items-to-address-healthcare-inequities>

43 <https://www.racp.edu.au/news-and-events/media-releases/the-clock-has-run-out---physicians-urge-government-to-keep-specialist-telehealth-a-permanent-feature-of-healthcare-past-today-s-deadline>

44 [http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/81F4D6E6C09A3762CA25887200043384/\\$File/Factsheet-specialist-telehealth.06.07.22.PDF](http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/81F4D6E6C09A3762CA25887200043384/$File/Factsheet-specialist-telehealth.06.07.22.PDF)

45 <https://www.alp.org.au/policies/medicare-and-your-health>

46 <https://www.aihw.gov.au/reports/medical-specialists/referred-medical-specialist-attendances>

47 <https://www.racp.edu.au/news-and-events/media-releases/a-backwards-step-for-healthcare-physicians-disappointed-some-specialist-phone-telehealth-items-will-not-be-made-permanent>

48 <https://www.racp.edu.au/news-and-events/media-releases/government-should-reverse-telehealth-wind-back-as-report-shows-crucial-role>

49 https://www.racp.edu.au/docs/default-source/advocacy-library/racp-anao-telehealth-submission.pdf?sfvrsn=c36cc1a_10

Clinical Quality and Safety

The Australian Commission on Safety and Quality in Health Care (ACSQHC) leads and coordinates national improvements in the safety and quality of health, contributing to better outcomes and experiences for all patients and consumers. Over the years, the RACP has been actively engaged in clinical quality and safety work through its support for the ACSQHC's Clinical Care Standards.

The purpose of clinical care standards is to guide the delivery of appropriate care and reduce unwarranted variation. Their development is often overseen by a topic working group made up of diverse experts and based on the most up-to-date clinical guidelines, information on gaps between evidence and practice and consideration of issues vital to consumers. A growing number of RACP Fellows have been involved in the development of these standards through RACP or RACP-affiliated specialty society representation on the topic working groups.

In the reporting period, the RACP consulted and endorsed three standards of relevance to our members:

- Acute Anaphylaxis Clinical Care Standard⁵⁰
- Sepsis Clinical Care Standard⁵¹
- Low Back Pain Clinical Care Standard⁵²

We have promoted these standards to our membership through the RACP Online Community and other digital channels.

EVOLVE Program



Australia and Aotearoa New Zealand's health systems are recognised as being some of the best in the world. Even so, it is estimated that between 30% of our healthcare is 'low-value', with 10% being harmful to the patient⁵³. These numbers demonstrate the importance for all physicians to stay up to date with the latest evidence and improve their clinical processes to deliver contemporary, best-practice patient care. Evolve⁵⁴ is a physician-led initiative that reflects the RACP's commitment to high-quality, safe and effective healthcare. Evolve is part of a growing national and international movement to analyse medical practices and reduce the use of low-value clinical procedures and interventions. Evolve aims to ensure improved patient safety and quality of care through a reduction in practices that are low-value and influence the best use of health resources, reducing wasted expenditure. The RACP is a founding member of Choosing Wisely in Australia and Aotearoa New Zealand.

Evolve Strategy Implementation Plan Update

The Evolve Strategy for 2022–26 was recently refreshed, informed by literature on the drivers of low-value care and associated interventions that may support the reduction of low-value care and feedback from the RACP's Divisions, Faculties and Chapters (DFaCs), Specialty Societies, the College Policy & Advocacy Council (CPAC), and the Evolve Policy & Advocacy Interest Group (PAIG). The Evolve Strategy Implementation Plan 2022–26 has also been refreshed with valuable feedback to reflect the new Evolve Strategy 2022–26. The Evolve Strategy and Strategy Implementation Plan 2022–26 are undergoing a second round of consultation from DFaCs, Specialty Societies, CPAC, and the Evolve PAIG.

50 <https://www.safetyandquality.gov.au/standards/clinical-care-standards/acute-anaphylaxis-clinical-care-standard>

51 <https://www.safetyandquality.gov.au/standards/clinical-care-standards/sepsis-clinical-care-standard>

52 <https://www.safetyandquality.gov.au/standards/clinical-care-standards/low-back-pain-clinical-care-standard>

53 Braithwaite J, Glasziou P, Westbrook JI. (2020) The three numbers you need to know about healthcare: the 60-30-10 Challenge. BMC Medicine

54 <https://evolve.edu.au/>

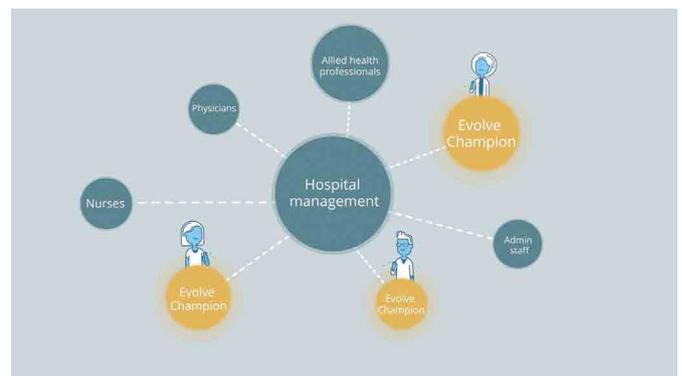
The Evolve Strategy 2022–26 presents the core streams of work for Evolve:

- development and revision of recommendations on low-value practices;
- recommendation education, dissemination, driving member support and implementation; and
- monitoring and evaluation.

The Evolve Strategy Implementation Plan 2022–26 addresses the following needs that were identified during consultation:

- development of recommendations in consideration of the impact on equity;
- ongoing reflection and adjustment for improvements in efficiency and impact; and
- greater awareness and engagement of Evolve activities across RACP members and departments.

Relevant feedback from the second round of consultation with DFACs, Specialty Societies, CPAC, and the Evolve PAIG will inform any amendments to the Evolve Implementation Plan 2022–26.



Led by physicians Supported by



New Evolve Recommendations

In 2022, the RACP in partnership with Specialty Societies launched one set of new Evolve recommendations on low-value practices. This was developed through a rigorous, peer-reviewed process led by clinical experts, informed by evidence and guided by consultation.

Evolve enables physicians to:

- safely and responsibly phase out low-value tests, treatments and procedures, where appropriate
- enhance the safety and quality of healthcare
- provide high-value care to patients based on evidence and expertise, and
- influence the best use of health resources, reducing wasted expenditure and the carbon footprint of the healthcare system.

A launch plan was developed, in consultation with the Evolve PAIG, to distribute the new recommendation widely.

Australia & New Zealand Society of Blood Transfusion

Activities for promoting the Australia & New Zealand Society of Blood Transfusion (ANZSBT) Top-5 Recommendations⁵⁵ included:

- Promoted through RACP and ANZSBT social media platforms, eBulletins, committee emails and newsletters.
- Promoted by the ANZSBT Lead i.e., Dr Anastazia Keegan FRACP at the Blood Transfusion Study Day on 10 September 2022.
- Production and promotion of a ANZSBT Top-5 Recommendations webinar⁵⁶ via RACP social media and YouTube channels, e-bulletins and via ANZSBT's newsletter.



The RACP is progressing the finalisation of the Australasian Society of Clinical and Experimental Pharmacologists and Toxicologists (ASCEPT) Top-5 Recommendations on low value practices that are the next Evolve Top-5 Recommendations to be launched.

55 [Australian and New Zealand Society of Blood Transfusion Evolve Top-5 Recommendations on low-value practices, low-value care](#)

56 <https://www.youtube.com/watch?v=JZ-fed58628>

57 <https://evolve.edu.au/recommendations/thoracic>

Promotion of Evolve Recommendations developed in 2020–21

In 2022 the RACP promoted additional activities for three Evolve recommendations that were developed in 2020–21.



The Thoracic Society of Australia and New Zealand (TSANZ) Adult Top-5 Recommendations on low-value practices⁵⁸, were promoted at the TSANZ conference held 31 March – 2 April 2022 via digital advertisement of logo, link and video on the conference pages and brochure.



The Australasian Chapter of Addition Medicine Top-5 Recommendations on low-value practices⁵⁸, were promoted at the:

- Australian Pain Society 42nd Annual Scientific Meeting held on 10–13 April 2022 in an exhibition booth and RACP social media.
- Australasian Professional Society on Alcohol and other Drugs held on 10 – 12 October 2022 in an exhibition booth, conference brochure and RACP social media.



The Australian and New Zealand Society of Nephrology Top-5 Recommendations on low-value practices⁵⁹, were promoted at the at the 57th ANZSN Annual Scientific Meeting held on 17 – 19 October 2022 in an exhibition booth and RACP social media.

⁵⁸ <https://evolve.edu.au/recommendations/AChAM>

⁵⁹ <https://evolve.edu.au/recommendations/anzsn>

Climate and Justice

Healthy Climate Future

Healthy Climate Future Campaign

The RACP played an important leadership role in climate and health advocacy in 2022. In the lead up to the Federal Election, the RACP developed and launched the Healthy Climate Future campaign (www.healthyclimatefuture.org.au). The policy asks of the campaign are based on the RACP's comprehensive research report, titled *Climate Change and Australia's Healthcare Systems: A Review of Literature, Policy and Practice*⁶⁰.

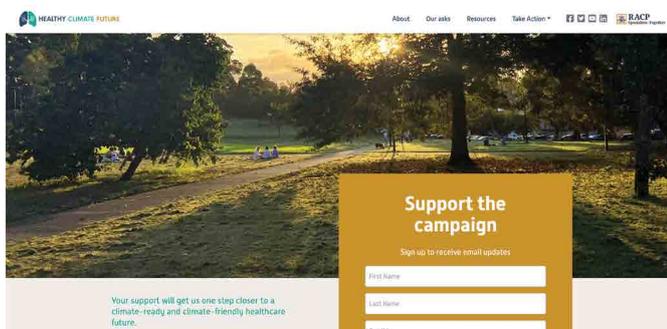


The campaign has the support of 10 other medical colleges, together representing more than 100,000 doctors. In the lead up to the Federal Election, we shared consistent policy asks, messaging and imagery across our extensive combined networks, including through the media, social media and direct engagement with Members of Parliament. We added to the powerful chorus of voices in support of climate action for our health and we saw the result of these collective advocacy efforts borne out in the election outcome. The elected government has committed to the development and implementation of a National

⁶⁰ https://www.racp.edu.au/docs/default-source/advocacy-library/climate-change-and-australias-healthcare-systems-a-review-of-literature-policy-and-practice.pdf?sfvrsn=efe8c61a_6

Climate, Health and Wellbeing Strategy – one of the key asks of the Healthy Climate Future campaign. The RACP has engaged closely with the Federal Health Minister on this issue. In addition, we have met with key crossbench Members of Parliament, senior public servants responsible for the development of the strategy, and Federal Treasury regarding economic modelling of the health impacts of climate change.

To support continued advocacy in partnership with the other colleges, the RACP launched a stand-alone Healthy Climate Future website⁶¹, which displays the logos of supporting colleges. The website allows members and other health professionals to show their support for the campaign through online actions and to share their experiences and perspectives. In addition, we carried out a survey of members and other health professionals on the sustainability of the healthcare system to generate newsworthy content.



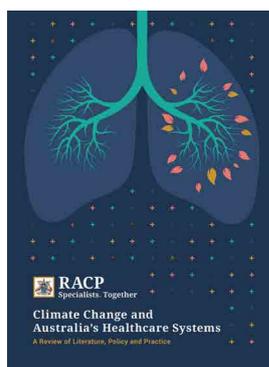
The Healthy Climate Future website.

In the lead up to the Victorian Election, the RACP developed state-level policy asks and engaged with senior Victorian public servants on these recommendations. In addition, we are providing Victorian members with online tools and support to contact Victorian Members of Parliament in support of the campaign and to show their support online. In 2023, the campaign's focus will turn to the New South Wales Election and the Australian Federal Budget. We also plan to explore adapting the campaign to the Aotearoa New Zealand context in the lead up to the 2023 election.

61 www.healthyclimatefuture.org.au

62 https://www.racp.edu.au/docs/default-source/advocacy-library/climate-change-and-australias-healthcare-systems-a-review-of-literature-policy-and-practice.pdf?sfvrsn=efe8c61a_6

Climate change and health policy



The RACP consulted with a group of medical colleges to develop a research report, titled *Climate Change and Australia's Healthcare Systems: A Review of Literature, Policy and Practice*⁶² on the risks of climate change to Australian healthcare systems and how best to manage these risks. The Monash Sustainable Development Institute (MSDI) was engaged to carry out this work in partnership with the Climate and Health Alliance (CAHA). The official launch of the research report was held via webinar on 30 November 2021, with special guests Dr Richard Smith (former editor in chief and Chief Executive of the British Medical Journal) and Dr Nick Watts (Chief Sustainability Officer, NHS). The report was released following planned media including a joint media statement with the other medical Colleges that endorsed the report, which received national, positive media coverage.

The research report established evidence-based recommendations for Australian policymakers, health systems, health professionals and the communities they serve. The RACP actively advocated for these recommendations in partnership with other medical colleges through the Healthy Climate Future campaign. With the support of the P&A Team, the RACP President has promoted the research report's recommendations through high-profile speaking engagements in 2022, including the National AMA Conference; a meeting of the AHPPC (comprised of chief health officers nationally); and the CAHA Better Futures Forum, attended by policy makers in Canberra.



RACP President, Dr Jaqueline Small speaking at the National AMA Conference on the importance of national leadership and coordination for action on climate change and health

In September 2022, the P&A Team supported RACP President to host a climate and health working dinner featuring Dr Nick Watts, Chief Sustainability Officer of the NHS England, in person. The dinner was attended by influential experts and advocates on climate change and health, including key RACP members, the CEO of Northern Sydney Local Health District and President of Public Health Association of Australia.

In 2022, a working group of members with expertise in climate change and health was established to progress the development of an online CPD learning resource for medical professionals on the relationship between climate change and health. In addition, a Climate Change and Health Working Group has been established to provide leadership and expert advice to inform the development



Dr Danielle McMullen, AMA Vice President, and Dr Sayontonee Ghosh FRACP at the RACP climate and health working dinner.



L-R: Dr Kate Charlesworth FAFPHM, A/Prof Linda Selvey FAFPHM, and Deb Willcox, Chief Executive, Northern Sydney Local Health District, at the RACP climate and health working dinner.

of the College's climate change and health policy and advocacy position statements, submissions and other activities.

Climate change was a key issue in the Australian Federal Election and a number of newly elected Members of Parliament have a keen interest in climate change. Several of these MPs are also health professionals. This has presented opportunities for RACP to engage interested MPs in climate and health advocacy. Key relationships across the Parliament on this issue have been established in 2022 and will continue to be developed in coming years.

Populations in Focus

Advocacy campaigns

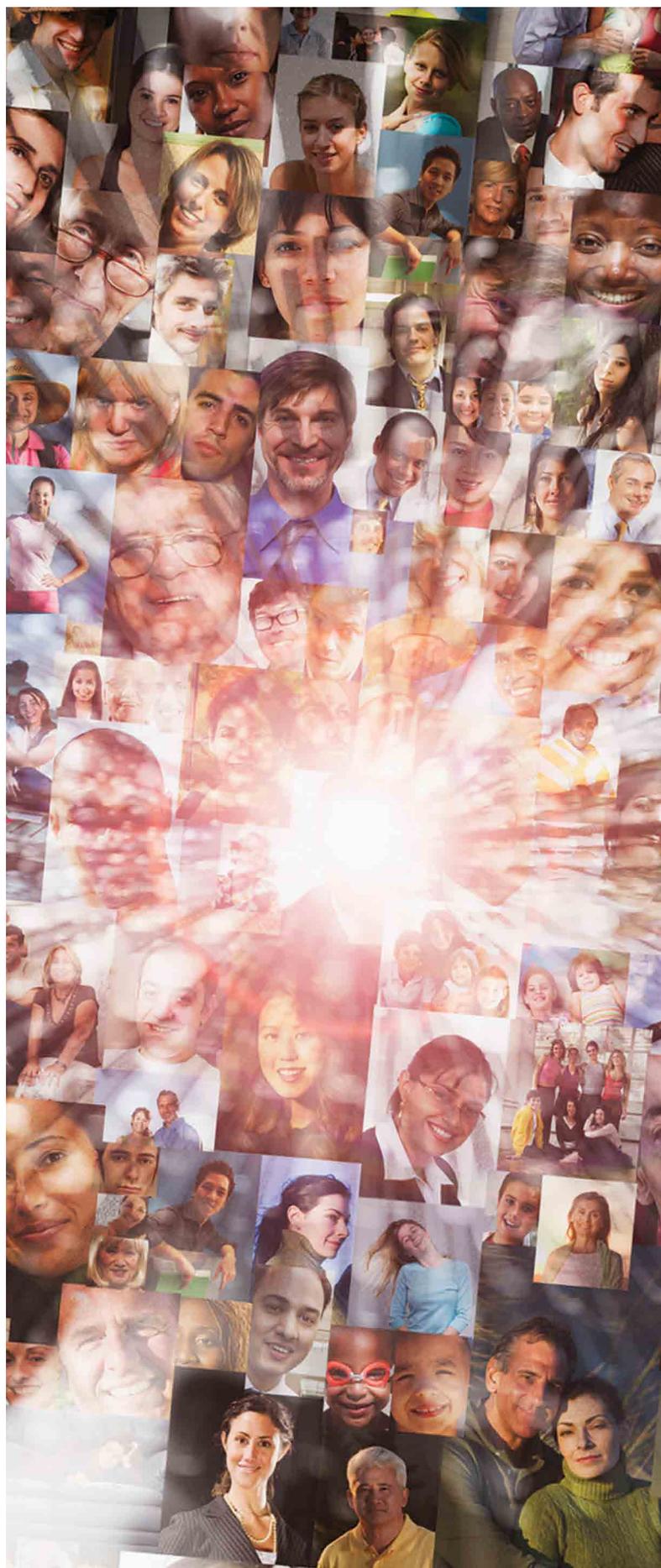
Key campaigns include the Aotearoa New Zealand #MakeItTheNorm campaign and the Australian Kids COVID Catch Up campaign.

#MakeItTheNorm

Work on #MakeItTheNorm will be reinvigorated in the lead up to the Aotearoa New Zealand general election, anticipated to be late 2023.

Submissions completed during 2022 aligning with #MakeItTheNorm included:

- To the Ministry of Education on proposed changes to the promotion and provision of healthy drinks in schools
- To the Health Committee on the Smokefree Environments and Regulated Products (smoked tobacco) Amendment Bill



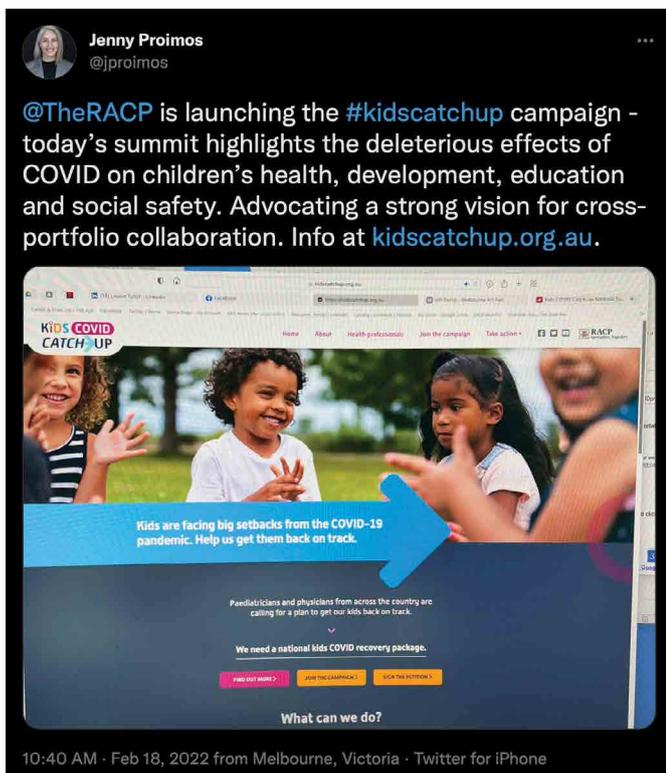
Kids COVID Catch Up



The Kids COVID Catch Up (KCCU) campaign was launched in February 2022 to promote the importance of children and young people's health and wellbeing in light of the COVID-19 pandemic. The six campaign asks comprise targeted, implementable solutions to address key areas of need that have arisen due to, or been exacerbated by, the pandemic. The key campaign policy asks are:

1. Appoint a National Chief Paediatrician or Chief Child Health Officer
2. Establish a National Taskforce to lead a COVID-19 recovery plan
3. Fully fund and implement the National Children's Mental Health and Wellbeing Strategy
4. Increase the Commonwealth funding for school support for students with disability and/or with learning difficulties
5. Implement universal access to quality early childhood education programs for all three-year-olds
6. Restrict marketing of unhealthy diets to children and young people.

A screenshot of a Twitter post from 'The RACP @TheRACP'. The text reads: 'You won't want to miss tomorrow's Child Health Summit, where we launch the Kids COVID Catchup. The Summit will be opened by @KatieAllenMP and closed by @gedkearney REGISTER 🗨️ ow.ly/rkPm50HXg7b'. Below the text are several social media handles: @AnneHollonds, @sharon_goldfeld, @FrankOberklaid, @cassandragoldie, and #kidscatchup. A banner for the 'Child health summit' is shown, with the date 'Friday, 18 February 2022' and time '10:00am - 11:30am AEDT'. The RACP logo 'Specialists. Together' is also present. Below the banner are six portrait photos of speakers: Commissioner Anne Hollonds, Dr Elkie Hull, Mr Chris O'Connell, Professor Sharon Goldfeld, Professor Frank Oberklaid AM, and Dr Cassandra Goldie. The bottom of the tweet shows the time '7:23 PM · Feb 17, 2022 · Twitter for iPhone'.



The KCCU campaign was launched with a RACP-members only Advocacy Workshop and a Child Health Summit. Speakers at the Child Health Summit included:

- Anne Hollonds, National Children's Commissioner
- Dr Elkie Hull, Advanced Trainee in Paediatrics and proud Gamilaraay woman
- Mr Chris O'Connell, 16-year-old, Melbourne high-school student and UNICEF Young Ambassador
- Professor Sharon Goldfeld FAFPHM, FRACP, Director, Centre for Community Child Health, Royal Children's Hospital and Population Health Theme Director at Murdoch Children's Research Institute
- Professor Frank Oberklaid FRACP AM, Co-Chair on the National Children's Mental Health Strategy
- Dr Cassandra Goldie, CEO of the Australian Council of Social Service

Achievements of the Kids COVID Catch Up campaign included:

- Engaging members in advocacy, including offering online opportunities to 'take action' to busy Fellows and trainees Some of the RACP's top performing social media posts
- A commitment from the Federal Government to review support required for children (in direct response to members' emails to political leaders sent via the campaign's website)
- Increased awareness of the need for increased mental health funding for children, contributing to a major funding commitment from the Federal Government
- Adding to calls for greater access to childcare, leading to commitments from the NSW and Victorian governments, expanding childcare access.
- Endorsement by high-profile organisations, including United Nations International Children's Emergency Fund (UNICEF), Save the Children, and the Australian Council of Social Service (ACOSS).
- Widespread, favourable media coverage, spanning national print, online, radio and television outlets



- Successful website launch, including functionality for supporters to sign up to the campaign and share their story
- An emotive, informative campaign video, featuring three RACP Fellows, which was displayed prominently on the website and played during the events



RACP Kids COVID Catch Up campaign video



Dr Paul Hotton featured in the Kids COVID Catch Up campaign video

- Quality engagement with key members during the Advocacy Workshop event, providing feedback on the campaign Supporter Pack
- Positive engagement with Members of Parliament and high-profile individuals who spoke at the Child Health Summit
- Some of the RACP's top performing social media posts for this period and positive engagement with members, organisations, journalists and Members of Parliament via social media.



An exclusive print article on the launch of the campaign ran in the Sydney Morning Herald and The Age.

In the lead up to the May 2022 Australian Federal Election the KCCU campaign generated substantial positive media coverage and social media engagement. Hundreds of RACP members, other health professionals and parents signed up to the campaign and more than 100 supports emailed political leaders in the lead up to both the Federal budget and Federal election.

In response to supporters' emails, The Hon Mark Butler MP, who is now the new Minister for Health and Aged Care, committed to a rapid review of support for children with disability in schools. In addition, the former Government committed to improving mental health support in schools as part of a \$440 million package. PCHD leadership and members of the P&A Team are meeting with Members of Parliament and senior public servants to ensure these commitments are actioned and physicians are involved.

Six organisations have now endorsed the KCCU campaign: Australian Research Alliance for Children and Youth (ARACY), United Nations International Children's Emergency Fund (UNICEF), Save the Children and 54 reasons, The Obesity Policy Coalition, Australian Council of Social Service (ACOSS) and Australasian Society for Infectious Diseases (ASID).

The next stage of the KCCU campaign has involved tailoring the campaign asks to the Victorian and New South Wales State contexts in the lead up to State elections in November 2022 and March 2023.

Preventive Health

Support for the Australian Centre for Disease Control & Prevention

The RACP has long advocated for a national disease control and prevention body and has welcomed the Australian Government's commitment to establish an Australian Centre for Disease Control & Prevention (CDCP) with input from States and Territories. The initiative is in its early stages and discussions on models most suitable to Australian needs and conditions continue, but the RACP has proactively offered our unique expertise in this space to the Minister for Health, key MPs and senior departmental staff.

Our initial discussions stress the importance of communicable and non-communicable diseases to the work of the CDCP and the need for a robust, appropriately funded and credentialled public health workforce across all jurisdictions. Our advocacy in this area focuses on the RACP's ability to bring to the table top experts across the disciplines of public health, infectious diseases, occupational medicine, pharmacology, respiratory medicine and other relevant medical specialties. In addition, the RACP has strengthened its relationship with the Public Health Association of Australia which also positions itself as a key adviser to the Government on the CDCP's design.

Reducing alcohol-related harm

Alcohol harm prevention and harm reduction remain RACP priorities in light of recent Australian Institute of Health and Welfare (AIHW) reporting which shows that alcohol is responsible for 4.5% of the total burden of disease in Australia.⁶³ The RACP:

- supported an open letter to the then Treasurer Joshua Frydenberg and the then Health Minister Greg Hunt cautioning against reducing the beer and spirits excise tax.⁶⁴ The excise tax reduction was subsequently excluded from the 2022–2023 Budget.
- called for a national volumetric tax in its 2022–2023 Federal Pre-Budget submission to the Morrison Government and the September 2022 Pre-Budget Submission to the Labor Government, as well as the 2020 Pre-Election Statement.^{65 66}
- endorsed the Foundation for Alcohol Research and Education's (FARE) Every Moment Matters Campaign. This campaign raises awareness of alcohol use risks in preconception and pregnancy and highlights the importance of early conversations with patients and their families. The campaign was promoted on RACP social media, culminating on the International NOFASD Day on 9 September 2022.
- became a signatory to the WA Cancer Council's Joint Statement calling on the WA Parliament to introduce a minimum unit price for alcohol. This follows and amplifies related advocacy in the NT, Queensland, Tasmania, Victoria and WA, as well as ongoing promotion of an easy-to-use information sheet on minimum pricing.⁶⁷

63 Australian Institute for Health & Welfare, Australia's Health 2022 in brief, 'what risk factors impact our health' p 36

64 An Open Letter to Treasurer Joshua Frydenberg to put the health, wellbeing and safety of Australians first and abandon any plans to cut the price of alcohol [online]; [alcohol-tax-open-letter.pdf \(racp.edu.au\)](https://www.racp.edu.au/docs/default-source/policy-and-adv/alcohol/alcohol-tax-open-letter.pdf)

65 RACP 2022–2023 Pre-Budget Submission to the Federal Liberal Government, January 2022 [online]; [2022-2023-pre-budget-submission-to-the-australian-government-treasury.pdf \(racp.edu.au\)](https://www.racp.edu.au/docs/default-source/policy-and-adv/pre-budget-submission-to-the-australian-government-treasury.pdf)

66 RACP Pre-Election Statement 2022, March 2022 [online]; <https://www.racp.edu.au/docs/default-source/policy-and-adv/election-statement/2022-racp-federal-election-statement.pdf>

67 RACP MUP factsheet [online]; https://www.racp.edu.au/docs/default-source/policy-and-adv/alcohol/racp-factsheet-on-minimum-unit-pricing-on-alcohol.pdf?sfvrsn=d4f8f71a_10



Addressing systemic drivers of overweight and obesity

Building on ongoing advocacy of the recommendations contained in the RACP *Position Statement on Obesity (2018)*,⁶⁸ over the last twelve months the RACP has continued to campaign for stronger regulations to reduce the marketing of foods high in sugar, salt, and fat to children, a tax on sugar sweetened beverages and improved access to healthy foods and physical activity in our communities.

In November 2021, the RACP made a submission to the draft National Obesity Prevention Strategy 2022–2032.⁶⁹ The submission called on policy and decision makers to address the obesogenic drivers of overweight and obesity. The submission:

- raised concerns over the draft strategy’s focus on individual responsibility and centred on social determinates influencing people’s opportunities to access healthy foods including education, income and housing.
- called for clear actions to address obesogenic drivers, as well as full funding for the strategy, challenging its focus on ‘example actions’.
- called for the strategy to recommend regulations to curb unhealthy food advertising.

In 2022, the RACP repeated its call for fully funding of the strategy and prioritising regulatory reforms addressing unhealthy product marketing to children through media releases and social media advocacy.^{70 71}

68 RACP Obesity Position Statement [online]; [racp-obesity-position-statement.pdf](#)

69 https://www.racp.edu.au/docs/default-source/advocacy-library/racp-submission-to-the-to-draft-national-obesity-prevention-strategy.pdf?sfvrsn=b426c71a_4

70 RACP Media Release, March 2022 [online]; <https://www.racp.edu.au/news-and-events/media-releases/new-obesity-strategy-puts-forward-positive-ideas-but-firm-commitments-and-funding-needed>

71 RACP Media Release, August 2022 [online]; <https://www.racp.edu.au/news-and-events/media-releases/physicians-support-push-to-ban-junk-food-advertising-aimed-at-children>

The RACP has initiated talks with the Victorian Cancer Council and the Obesity Policy Coalition to support Dr Sophie Scamps' Private Members Bill to introduce a national regulatory framework for junk food advertising to children. Establishment of such a national regulatory framework is one goal of the College's Kids COVID Catchup Campaign (KCCU).⁷² P&A has also joined the Leadership Group of the College's partner organisation, the Obesity Collective⁷³, and has worked with the Collective on the initiatives relating to the development of new obesity management guidelines, reduction of weight stigma in health care, and delivery of equitable obesity treatment and prevention services to all who need them.

Better Regulation of Vaping

Effective from 1 October 2021, the Therapeutic Goods Administration (TGA) requires consumers to obtain a prescription for all purchases of all nicotine vaping products (NVPs), including purchases from Australian pharmacies and overseas.

Despite the regulatory changes, access of vaping products to young people remains a serious concern. Policy and advocacy activities on e-cigarettes and vaping have focused on preventing youth take-up. Key consultations and reports in relation to e-cigarettes in 2022 included:

- The Australian Government consultation on the National Tobacco Strategy.
- The release of the updated NHMRC CEO Statement on E-cigarettes⁷⁴ and the ANU Report on Health Impacts of E-cigarettes.⁷⁵ The NHMRC's latest advice on e-cigarettes and the findings from the ANU report highlight the risks of an array of adverse health impacts and the potential for introducing a new generation to smoking.

- An investigation⁷⁶ by ABC Four Corners on youth vaping and the thriving black market due to inadequate enforcement of vaping laws by all levels of government.

The College made a submission⁷⁷ to support the draft National Tobacco Strategy in March 2022. The submission recommended introducing a range of supply-side measures, stronger regulation of tobacco content and product disclosures, and mitigating the risks associated with the marketing and use of novel and emerging products. We indicated that the changing tobacco market requires the Australian Government to regularly revisit and re-orient its policy and regulation focus and urged whole-of-government leadership, commitment, and investment in implementing the actions included in the Strategy.

The RACP responded to the ABC Four Corner's investigation and the NHMRC's advice on e-cigarettes by issuing a mediate statement⁷⁸, calling for urgent strengthening of importation laws to reduce the growing black-market supply of vaping products to children and young people.

Social media content⁷⁹ was used to call out Victoria and Queensland Governments' failure to stop illegal supply of vaping products to young people.

72 RACP Covid Kids Catchup Campaign [online]; <https://kidscatchup.org.au>

73 Obesity Collective: Our Projects [online]; <https://theobesitycollective.org.au/>

74 <https://www.nhmrc.gov.au/health-advice/all-topics/electronic-cigarettes/ceo-statement>

75 <https://www.anu.edu.au/news/all-news/e-cigarettes-are-harmful-and-addicting-youth-report>

76 <https://www.abc.net.au/4corners/vape-haze-the-new-addiction-of-vaping/13948226#:~:text=Vaping%20was%20hailed%20as%20the,causing%20nicotine%20addiction%20in%20teenagers.&text=Four%20Corners%20investigates%20the%20explosion,failure%20to%20police%20the%20rules>

77 https://www.racp.edu.au/docs/default-source/advocacy-library/racp-submission_-_draft-national-tobacco-strategy-2022-2030.pdf?sfvrsn=2ec4cb1a_8

78 <https://www.racp.edu.au/news-and-events/media-releases/physicians-and-paediatricians-say-rise-in-youth-vaping-is-seriously-concerning-calls-for-urgent-strengthening-of-importation-laws>

79 <https://twitter.com/TheRACP/status/1564796378613960704>

Pandemic related issues

Since the start of the COVID-19 pandemic the RACP has strongly advocated for the safety of our members and the communities we serve as a major priority.

The RACP COVID-19 Expert Reference Group (ERG) continues to provide regular COVID-19 expert advice to the RACP regarding policy and advocacy issues.

The ERG regularly reviews and provides advice on government policies and resources and informs RACP representations on key advisory Government COVID-19 committees and taskforces, including the National COVID-19 Clinical Evidence Taskforce, COVID-19 General Practitioner Peak Bodies Advisory Group, COVID-19 Disability Advisory Committee, and Department of Health forums on the COVID-19 vaccine rollout.

RACP COVID-19 Living Narrative

The ERG led the development of the RACP COVID-19 Living Narrative in late 2021 to document the RACP's activities throughout the COVID-19 pandemic. The document is divided into five overarching areas:

1. Healthcare worker health and safety
2. Providing clinical care
3. Public health
4. Priority populations
5. Equity and Health System Capacity.

The Version 2.0⁸⁰ of the Living Narrative provides updates on P&A activities up until May 2022. The next iteration is currently in progress and is due to be published following RACP approvals.

COVID-19 webinars

The ERG continued to hold 2-part COVID-19 webinars in 2022, which are available on Medflix⁸¹ and COVID-19 webpages⁸² of the RACP website.

March 2022:

- Part 1: "Psychosocial disruptions of COVID-19 and mental health needs of healthcare workers" aimed to provide attendees with an increased understanding and awareness of the psychosocial disruptions of COVID-19 and mental health needs of healthcare workers.
 - The webinar was hosted by Associate Professor Lucy Burr FRACP, Director of Respiratory and Cystic Fibrosis medicine at the Mater Hospital, Brisbane, and Chair of the ERG at the time, and Associate Professor Natasha Smallwood FRACP, respiratory physician, co-lead the Australian COVID-19 Frontline Healthcare Workers Study and member of the National COVID-19 Clinical Evidence Taskforce.
 - The webinar included presentations from Associate Professor Smallwood as well as Dr Peter Baldwin, clinical research fellow and clinical psychologist at the Black Dog Institute, and Dr Margaret Kay, Senior Lecturer at the University of Queensland and is a General Practitioner in Brisbane.
- Part 2: "Supporting physician health and wellbeing" aimed to provide attendees with details of initiatives available to support physician health and wellbeing as well as information on available resources.
 - The webinar was again hosted by Associate Professor Lucy Burr FRACP.

80 https://www.racp.edu.au/docs/default-source/advocacy-library/racp-covid19-living-narrative_v2-0_may-2022_internal-links-removed.pdf?sfvrsn=9f4acc1a_0

81 <https://elearning.racp.edu.au/login/index.php> (RACP member access only)

82 <https://www.racp.edu.au/news-and-events/covid-19>

- The webinar included presentations from Professor Brett McDermott, Hand-n-Hand Research Lead, Psychiatrist and Psychiatry Professor at James Cook University, Dr Sarah Dalton FRACP, Paediatric Emergency Physician based at The Children’s Hospital at Westmead and previous President of the RACP Paediatric and Child Health Division, Ms Liz Crowe, Staff Wellbeing Consultant, Counsellor, Coach and Educator at Royal Brisbane and Women’s Hospital, and Dr Kym Jenkins, Pandemic Kindness Movement Lead, Immediate Past Chair of the Council of Presidents of Medical Colleges and Past President of RANZCP.



Dr Susan Graham FAFRM, ERG Chair, presenting the ‘COVID-19 now: vaccines, antiviral treatments, variants’ webinar

- Part 1 “COVID-19 now: vaccines, antiviral treatments, variants” aimed to provide attendees with an increased understanding and awareness of current COVID-19 vaccines, antiviral treatment options and emerging variants.
- The webinar was hosted by Dr Susan Graham FAFRM, ERG Chair, AFRM representative on the ERG and Rehabilitation Physician and Senior Lecturer, University of Queensland, and Associate Professor Tony Allworth FRACP, ASID representative on the ERG and Infectious Diseases Physician and Microbiologist at Mater Hospital Brisbane.

- The webinar included presentations from Associate Professor Nigel Crawford FRACP, consultant paediatrician and vaccinologist based at The Royal Children’s Hospital, Dr Megan Rees FRACP, respiratory and sleep physician and Deputy Chair of the Disease-Modifying Treatment and Chemoprophylaxis Panel of the National COVID-19 Clinical Evidence Taskforce, and Dr Sanmarié Schlebusch, clinical microbiologist and Medical Director of Microbiology, Virology, and Genomics at Public and Environmental Health, Forensic and Scientific Services at Queensland Health. Joining the panel for discussion were Dr Tim Cutfield, Infectious Diseases and General Medicine Consultant based at Counties Manukau Health and member of the Manatū Hauora Ministry of Health COVID-19 Therapeutics Technical Advisory Group, Associate Professor Charlotte Hespe, General Practitioner and Practice Owner in Glebe and Chair for NSW/ACT Council, RACGP, and Dr Fei Sim, National President and Chair of the Pharmaceutical Society of Australia Board.



Panel members from the ‘COVID 19: Where to now?’ webinar: Professor Paul Kelly, Associate Professor Frank Beard, Professor Peter War, Adjunct Professor Paresh Dawda, Professor John Massie, Professor Christopher Blyth, Helen Kulas, Associate Professor Asha Bowen

- Part 2 “COVID-19: Where to now?” aimed to provide attendees with an understanding of some of the lessons learned through the COVID-19 pandemic and how they might be applied moving forward.
 - The webinar was hosted by Associate Professor Asha Bowen FRACP, PCHD representative on the ERG and clinician-researcher at Perth Children’s Hospital and Team Lead of Healthy Skin and ARF Prevention team at the Wesfarmers Centre of Vaccines and Infectious Diseases based at Telethon Kids Institute, and Associate Professor Frank Beard FAFPHM, AFPHM representative on the ERG, public health physician and Associate Director, Surveillance, Coverage, Evaluation and Social Science at the National Centre for Immunisation Research and Surveillance.
 - The webinar involved an open discussion between panellists and Q&A from attendees. Panellists included Professor Paul Kelly FAFPHM, Chief Medical Officer at the Australian Government Department of Health, Professor Christopher Blyth FRACP, paediatric infectious diseases specialist, clinical microbiologist and clinician scientist at Perth Children’s Hospital and University of Western Australia and Director of the Wesfarmers Centre of Vaccines and Infectious Diseases at Telethon Kids Institute, Dr John Massie FRACP, Clinical Director of The Children’s Bioethics Centre and member of the RACP Ethics Committee, Dr Paresch Dawda, General Practitioner, Director and Principal at Prestantia Health and Next Practice Canberra, Helen Kulas, NSW Respiratory Network Manager with the Agency for Clinical Innovation, NSW Health, and Professor Peter Wark, senior staff specialist in Respiratory and Sleep Medicine at John Hunter Hospital.

The next series in the COVID-19 webinars are scheduled for 17 and 24 November 2022 and will focus on the impact of COVID-19 on First Nations communities in Australia and Aotearoa New Zealand.

Public Health

The Australasian Faculty of Public Health Medicine (AFPHM) document *Public Health Physicians: Protecting, Promoting and Improving Health for the Whole Community*⁸³ was launched in March 2021. This document persuasively articulates the value of public health physicians, credentialled as Fellows of the AFPHM, to the contemporary public health workforce and their capacity to contribute to the broader health system. The role of public health physicians has been uniquely highlighted during the COVID-19 pandemic, where many of the problems experienced by the health system could have been significantly mitigated had there been strong local public health units in every jurisdiction to monitor epidemiology and roll out disease control strategies.

Since its release, it has been used to inform health system decision makers in their strategic and workforce planning by describing the skills, expertise and roles of public health physicians. Key policy and advocacy highlights related to the promotion of the role of public health physicians included the ‘Fellows in Focus’ campaign showcasing the career pathways of public health physicians. Three renowned public health physicians featured in the campaign: Associate Professor Kamalini Lokuge FAFPHM⁸⁴, Professor Brett Sutton FAFPHM⁸⁵ and Professor Tarun Weeramanthri FRACP, FAFPHM⁸⁶.

83 <https://www.racp.edu.au/docs/default-source/policy-and-adv/public-health-physicians---protecting-promoting-and-improving-health-for-the-whole-community.pdf>

84 <https://www.racp.edu.au/news-and-events/all-news/news-details?id=d73ca9af-bbb2-61c2-b08b-ff01001c3177>

85 <https://www.racp.edu.au/news-and-events/all-news/news-details?id=b731abaf-bbb2-61c2-b08b-ff01001c3177>

86 <https://www.racp.edu.au/news-and-events/all-news/news-details?id=c8f5a8af-bbb2-61c2-b08b-ff01001c3177>



Fellows in Focus: Associate Professor Kamalini Lokuge FAFPHM , Professor Brett Sutton FAFPHM and Professor Tarun Weeramanthri FRACP, FAFPHM

To address the existing and projected public health workforce shortages, AFPHM has been calling on the Australian Government and other jurisdictions to establish a national training program in public health and provide adequate funding for required training positions. The program would offer structured training pathways for all disciplines and professions interfacing with public health and deliver targeted, flexible and attractive career options for public health professionals.

The AFPHM webinar initiative is organised by the Faculty in collaboration with its trainees and Fellows and covers a variety of speakers and public health-related topics. It serves as an additional training resource for trainees. In May 2022, the AFPHM organised the webinar '*Strengthening the understanding of the National Agreement and priority reforms areas as they relate to public health*⁸⁷' in collaboration with the National Aboriginal Community Controlled Health Organisation (NACCHO) and the Australian Indigenous Doctors Association (AIDA).

The webinar aimed to contribute to Closing the Gap by improving health outcomes for Aboriginal and Torres Strait Islander peoples across Australia. The presentation focused on the need for a culturally safe workforce for First Nations patients and health care workers with a view to strengthening public health trainees' understanding of the National Agreement and priority reforms areas from the public health standpoint. Dr Dawn Casey, Deputy CEO of NACCHO and Dr Karen Nicholls, Trainee Support Lead (Specialist Trainee Program) at AIDA presented at the webinar.

This successful event received overwhelmingly positive feedback from the attendees and is expected to result in further collaborations between AFPHM, NACCHO and AIDA on webinars on Rheumatic Heart Disease and the role of Aboriginal Health Workers and Practitioners.

87 RACP Medflix <https://elearning.racp.edu.au/course/index.php?categoryid=39>

Paediatrics and child health

Continuing to be a leading voice on child health matters

To ensure that the RACP continues to be a leading voice on child health matters, the Paediatrics and Child Health Division (PCHD) developed the Child Health Advocacy Strategy 2022–25. The Strategy outlines the College's priorities for child health and takes a rights-based approach. It builds on the positions established in PCHD's three most recent position statements: Inequities in Child Health (2018)⁸⁸, Early Childhood: The Importance of the Early Years (2019)⁸⁹ and Indigenous Child Health in Australia and Aotearoa New Zealand (2020)⁹⁰.

The Strategy has four key focus areas:

1. Strengthening whole-of-government planning and accountability for child health outcomes
2. Promoting healthy relationships: parental, child and adolescent mental health
3. Enhancing access to quality early childhood education
4. Promoting healthy nutrition and oral health

The first major output of the Strategy is the KCCU campaign. Further work to progress the Strategy will be developed in 2023 and beyond.

In July, the RACP announced a partnership with the Thrive by Five campaign to help support children aged zero to five years in reaching their full potential. The announcement of the partnership generated media opportunities around the RACP's call to extend paid parental leave. In September 2022, Independents and the Australian Greens⁹¹ moved to push the Government to declare their position on this issue, demonstrating the importance of strong and clear advocacy to improve child health.



Associate Professor Nitin Kapur FRACP speaking about paid parental leave on Ch9

88 <https://www.racp.edu.au/docs/default-source/advocacy-library/racp-inequities-in-child-health-position-statement.pdf>

89 https://www.racp.edu.au/docs/default-source/advocacy-library/early-childhood-importance-of-early-years-position-statement.pdf?sfvrsn=e54191a_4

90 <https://www.racp.edu.au/docs/default-source/advocacy-library/indigenous-ch-statement-on-ich.pdf>

91 <https://www.smh.com.au/politics/federal/tired-of-waiting-move-to-force-labor-s-hand-on-paid-parental-leave-20220915-p5bi8b.html>

Ensuring children’s voices are heard within the health sector

The PCHD has helped ensure that children’s voices and needs are central within the health sector by providing expert advice with several key initiatives:

- Providing input to the Federal Government’s Early Years Strategy at the request of Minister for Early Childhood Education and Minister for Youth, the Hon Dr Anne Aly MP
- Department of Health and Aged Care (DoHA) review of the drivers of antidepressant prescribing behaviours
- ‘End physical punishment of children’ campaign, which is due to launch in 2023
- Cancer, Hearing and Program Support Division of DoHAC reform of the Newborn Bloodspot Screening Program
- National Children’s Commissioner, Anne Hollands, child health priorities
- Royal Australia and New Zealand College of Psychiatrists work in children’s mental health.

Additionally, RACP members have provided comment on the Autism Cooperative Research Centre’s National Guideline, the Royal Australasian College of Surgeons’ position paper on surgery in children and adolescents and the Australian Attention Deficit Hyperactivity Disorder Professionals Association’s Australian evidenced-based clinical practice guideline for Attention Deficit Hyperactivity Disorder.

Health Care of Children in Care and Protection Services

Children and young people who are involved with care and protection services have been recognised globally as a highly vulnerable group with increased physical, mental and social health needs and limited access to resources. In 2020 the PCHD agreed to form a working group to revise the 2006 position statement on the Health of Children in Out of Home Care (OOHC).

The new position statement has been broadened to address the health needs of children who are in contact with care and protection services, and not just specific to OOHC, and renamed ‘Health Care of Children in Care and Protection Services’. The position statement provides a range of recommendations to health professionals and governments in Aotearoa New Zealand and Australia to improve the health and wellbeing of children in care and protection services, and prompt improved advocacy on this issue. The draft document is in consultation phase and due for publication in 2023.



Adolescents and young adults

Research and clinical experience demonstrate that there is a need for health services which are more appropriate for young adults, or developmentally and youth appropriate health care services. Evidence exists regarding the benefits of these services, and important key features.

The Adolescent and Young Adult Medicine Committee (AYAM-C) have formed a working group to compile this evidence, including the perspectives of young people, into a concise position statement which will assist advocacy for implementation of the principles of this type of care, and development and expansion of appropriate services. The position statement will focus on secondary and tertiary level services and make recommendations which are applicable to the spectrum of services within that; small to large services, metropolitan, regional, rural or remote.



Disability

The RACP recognises the overwhelming evidence that people with disability have poorer mental and physical health compared to others in the community. The health sector has a responsibility to demonstrate leadership and policies and programs should include specific mention of how the needs of people with a disability will be met. RACP physicians from a variety of specialities have specific interest in disability offering a wide range of advocacy opportunities.

National Disability Insurance Agency

The RACP strongly supports the National Disability Insurance Scheme (NDIS) and continues to contribute physician and paediatrician expertise to inquiries into aspects of the NDIS. The National Disability Insurance Agency (NDIA) is leading discussions on new access criteria for prospective participants with the view of developing a new person-centred model. The RACP has been active in these discussions and will continue to work closely with the review process.

Following the Federal election, the RACP provided feedback to the Federal Government on issues relating to the NDIS, including delayed hospital discharge, and is seeking a meeting with the Minister for the NDIS to discuss these issues in more detail.

NDIS Guides

The RACP has commissioned National Disability Services to undertake a review of the 2016 NDIS Guides. These Guides will support members understanding of the NDIS and how to best support patients. RACP members will inform the review as subject matter experts.

Advocacy

This year advocacy relating to the impact of COVID-19 on people with disability focused on the rollout of COVID-19 vaccines, particularly related to the low number and proportion of disability support workers and people with disability who had been vaccinated.

Engagement with the Federal Government and stakeholders to support the delivery of the National Roadmap for Improving the Health of People with Intellectual Disability.

The RACP endorsed the Summer Foundation's 'Down to 10 days'⁹² campaign. *Down to 10 days* is an alliance of people with disability and approximately 30 organisations, including advocacy, housing, health and disability peaks. The campaign calls on the Federal Government to match the aged care sector with allocating funding for housing and support for people with a disability in hospital and young people at risk of entering aged care.

National Disability Advocacy Framework 2022 – 2025

The RACP provided a submission to the [National Disability Advocacy Framework 2022–25](#).⁹³ The Framework aims to ensure all people with a disability can access advocacy services and support in a changing environment. It will also help to align advocacy services and standards so they are nationally consistent. RACP feedback focused on the importance of a human rights approach, intersectionality and diversity, and inclusion of priority populations, such as Aboriginal and Torres Strait Islander peoples, people with disability, and children and young people.

⁹² Down to 10 Days <https://www.downto10days.org.au/>

⁹³ <https://engage.dss.gov.au/wp-content/uploads/2022/04/Draft-New-National-Disability-Advocacy-Framework.pdf>

Rehabilitation

Rehabilitation medicine has a large role in providing specialist health care services to people living with disabilities due to illness or injury and aims to improve their chance for employment and position in society. Rehabilitation physicians achieve this by working in multidisciplinary teams to maximise functional potential of individuals and maintain long-term wellness of people living with disabilities.

The Australasian Faculty of Rehabilitation Medicine (AFRM) has been involved with meetings with the NDIA and provided expertise to a range of disability matters including leading the response to the ACT Disability Strategy following the invitation from a meeting with Emma Davidson MLA, ACT Greens Minister for Disability, Minister for Justice Health, Minister for Mental Health, Minister for Seniors and Veterans, and Assistant Minister for Families and Community Services. The AFRM also wrote to the Department of Health and Aged Care regarding the Ukraine war offering collaboration and expertise to health professionals on the ground.

Bariatric Rehabilitation Position Statement

The AFRM-led Bariatric Rehabilitation Working Group has developed a position statement on Bariatric Rehabilitation. The purpose of the position statement is to outline recommendations and define appropriate practice on the rehabilitation requirements of patients with bariatric needs. The position statement is in the final stages of approvals and will be published by the end of 2022.

Role of Rehabilitation in COVID-19

The AFRM engaged with the Australasian Rehabilitation Outcomes Centre (AROC) to assess the impact of COVID-19 on rehabilitation services. A discussion forum for members was created on the RACP Online Community (ROC) for AFRM members to share their experiences on the impact of COVID-19 and provide input into the role of rehabilitation services with patient post-COVID recovery.



Addiction medicine

Drug Policy Position Statement

In the past year, a key focus for P&A has been developing a position statement outlining the need for the Australian and Aotearoa New Zealand Governments' drug policy to adopt a health-focused approach to substance use. This work is led by a joint Australasian Chapter of Addiction Medicine (AChAM)/Australasian Faculty of Public Health Medicine (AFPHM) Working Group chaired by Professor Nicholas Lintzeris FACHAM.

The position statement will cover three key issues: primary prevention, harm reduction and treatment. Its purpose is to set out the principles that the Australian and Aotearoa New Zealand Governments should consider in developing drug policies and programs that are effective, evidence-based and properly resourced to achieve the desired community benefits.

NSW Government response to the NSW Special Commission of Inquiry into the Drug "Ice"

The AChAM President, Professor Dunlop and the then NSW/ACT Regional Committee Chair, Dr Adrian Lee FRACP, wrote to the NSW Premier and relevant ministers on 2 June 2022 calling on the NSW Government to urgently issue its response to the Special Commission of Inquiry into the Drug 'Ice' Final Report⁹⁴ which was handed to the NSW Government by Professor Dan Howard SC in February 2020.

In parallel, the RACP issued a media release titled *Physicians extremely disappointed that NSW Government continues to avoid Ice Inquiry response*⁹⁵ to reiterate our concerns with the delays in the NSW Government's response. The letter to the NSW Premier and media release followed from an earlier joint statement which

⁹⁴ <https://www.dpc.nsw.gov.au/publications/special-commissions-of-inquiry/the-special-commission-of-inquiry-into-the-drug-ice/>

⁹⁵ <https://www.racp.edu.au/news-and-events/media-releases/nsw-government-avoids-ice-inquiry-response>

the RACP led with AMA NSW, RACGP and RANZCP issued in October 2021⁹⁶ titled *NSW Government delay on Ice Inquiry recommendations is costing lives: COVID-19 makes comprehensive strategy to tackle addiction issues more urgent*.

On 21 September, after months of pressures from stakeholders including the RACP, the NSW Government finally issued its long-delayed response to the Inquiry. The RACP cautiously welcomed this response through a media release titled *Some positive changes and welcome funding for drug treatment, but more needed to comprehensively address drug policy reform*.⁹⁷ The release stressed that while we welcome the announcement of additional funding, the NSW Government's response retains a strong criminal justice focus that prevents personal addiction issues from being treated as health and social issues, not criminal ones. It also highlighted the RACP's disappointment in the NSW Government's continuing rejection of proven harm reduction measures such as the establishment of more injecting centres, the piloting of syringe programs in jails, and the implementation of pill testing.

RANZCP Problem Gambling Position Statement

AChAM President and President-Elect, Professors Dunlop and John Saunders FAFPHM, FACHAM, FRACP, and Dr Shalini Arunogiri, Chair of the Royal Australian and New Zealand College of Psychiatrists' (RANZCP) Faculty of Addiction Psychiatry agreed to jointly review the RANZCP Problem Gambling Position Statement published in 2017.⁹⁸ The RANZCP is establishing a working group comprising both RANZCP and AChAM members to update the position statement.

Sexual health

The Australasian Chapter of Sexual Health Medicine (AChSHM) continues to provide impactful policy contributions and maintains cross sector partnerships to progress advocacy goals and respond to emerging issues for sexual health.

MPX

In Australia, the Australian Technical Advisory Group on Immunisation (ATAGI) published guidance on the use of smallpox vaccine for protection against Monkeypox (MPX) virus infection (ATAGI clinical guidance on vaccination against Monkeypox, Australian Government Department of Health and Aged Care)⁹⁹ and the Australian Federal Government released a statement¹⁰⁰ declaring MPX a Communicable Disease Incident of National Significance.

- Updates are published at health.gov.au/monkeypox-mpx¹⁰¹
- 30 June (RACP news): Monkeypox information in Australia¹⁰²

In Aotearoa New Zealand, an AChSHM recommendation led to the RACP endorsing the Joint Letter to the New Zealand Government¹⁰³ calling for urgent action on the Monkeypox (MPX) virus infection.

96 <https://www.racp.edu.au/news-and-events/media-releases/joint-statement-nsw-government-delay-on-ice-inquiry-recommendations-is-costing-lives-covid-19-makes-comprehensive-strategy-to-tackle-addiction-issues-more-urgent>

97 <https://www.racp.edu.au/news-and-events/media-releases/racp-some-positive-changes-and-welcome-funding-for-drug-treatment-but-more-needed-to-comprehensively-address-drug-policy-reform>

98 <https://www.ranzcp.org/news-policy/policy-and-advocacy/position-statements/problem-gambling>

99 <https://www.health.gov.au/resources/publications/atagi-clinical-guidance-on-vaccination-against-monkeypox>

100 <https://www.health.gov.au/news/chief-medical-officers-statement-declaring-monkeypox-a-communicable-disease-incident-of-national-significance>

101 <https://www.health.gov.au/diseases/monkeypox-mpx>

102 <https://www.racp.edu.au/news-and-events/all-news/news-details?id=b134adaf-bbb2-61c2-b08b-ff01001c3177>

103 <https://www.burnettfoundation.org.nz/articles/news/joint-letter-to-government-urgent-call-to-action-on-monkeypox/>

Aboriginal and Torres Strait Islander communities

Sexual health in Aboriginal and Torres Strait Islander communities is an ongoing policy and advocacy priority for AChSHM. The RACP has received a courtesy update from the Australian Government Department of Health and Aged Care's Medical Services Advisory Committee (MSAC) regarding Application 1627 – Point-of-care testing for sexually transmitted infections provided by Aboriginal Medical Services or Aboriginal Community Controlled Health Services in rural or remote areas.¹⁰⁴ This matter was delegated to AChSHM who provided consultation feedback in 2021. MSAC Application 1627 will now be considered at the October and November 2022 MSAC Evaluation Sub-Committee (ESC) meetings.

Occupational and environmental medicine

Two significant areas of health care reform have been addressed by the Australasian Faculty of Occupational and Environmental Medicine (AFOEM), during 2022: workplace injury and the prevention of harm, and the health care and protection of healthcare workers.

It Pays to Care

Bringing evidence-informed practice to work injury schemes to help workers and their workplaces is important because it influences the introduction of much needed health reform. It addresses a concern that when an injury or medical condition occurs in a compensable setting, the chance of a poor health outcome is significantly higher than for the same condition in a non-compensable setting.

¹⁰⁴ <http://www.msac.gov.au/internet/msac/publishing.nsf/Content/1627-public>

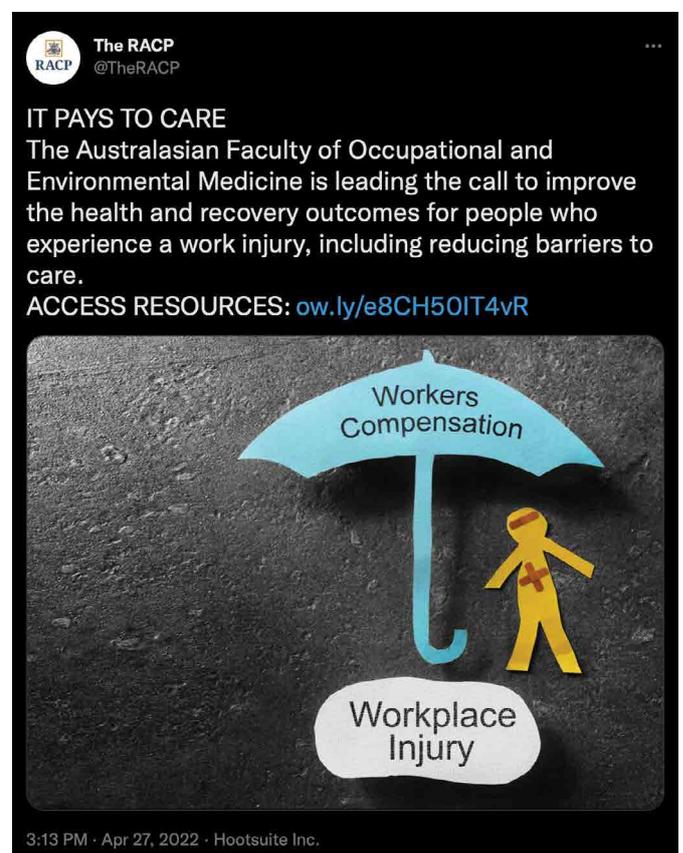
¹⁰⁵ https://www.racp.edu.au/docs/default-source/policy-and-adv/afoem/bringing-evidence-informed-practice-to-work-injury-schemes.pdf?sfvrsn=2582ca1a_8

¹⁰⁶ https://www.racp.edu.au/docs/default-source/policy-and-adv/afoem/a-values-and-principles-based-approach-to-bringing-evidence-informed-practice-to-work-injury-schemes.pdf?sfvrsn=ce82ca1a_4

Work absence and long-term disability rates are also higher. Accordingly, two RACP documents have been published:

- An evidence-based discussion paper which presents the evidence regarding psychosocial factors as barriers to return to work and the evidence about how these barriers can be lowered.¹⁰⁵
- A values and principles based approach paper regarding why “it pays to care”, and containing the principles of healthy insurance schemes.¹⁰⁶

Major promotion of this work to embed change and its uptake by the varied industry stakeholders included virtual launches in Australia and Aotearoa New Zealand in April, wide trans-Tasman document dissemination, establishing an open webpage, and social media. The outcomes have included strong support and incorporation by industry stakeholders, and there is continuing external contact made to lead members on this.



Workplace accelerated silicosis and other dust diseases

Accelerated silicosis and other dust diseases from workplaces are preventable serious diseases and should be eradicated. The AFOEM, the Thoracic Society of Australia and New Zealand (TSANZ) and the Royal Australian and New Zealand College of Radiologists (RANZCR) collaborate to drive this goal nationally (including trans-Tasman) and within jurisdictions. In Australia member activity urges the effective implementation of the seven National Dust Disease Taskforce recommendations.¹⁰⁷ Members were part of the Taskforce and continue to donate time and expertise collectively, internally, through the Lead Fellows for accelerated silicosis group and externally, through participation on steering committees, advisory groups, presenting evidence as witnesses to state hearings and developing feedback on consultations. The goal is for consistent and accountable reform, underpinned by meaningful data collection. In April 2022 the All-Government response to the National Dust Diseases Taskforce Final Report (June 2021) was released, supporting five Taskforce recommendations and noting two.



¹⁰⁷ https://www.health.gov.au/committees-and-groups/national-dust-disease-taskforce?utm_source=health.gov.au&utm_medium=callout-auto-custom&utm_campaign=digital_transformation

Key milestones for this reporting period are:

- The release of the *National Guidance for doctors assessing workers exposed to respirable crystalline silica dust* (February 2022).¹⁰⁸ Members made significant contributions to the development of this important document which was endorsed by the RACP in December 2021. The primary goal of the National Guidance document is to assist medical practitioners, including general practitioners, consultant physicians in occupational and environmental medicine, respiratory physicians and radiologists, to work with their patients and actively identify and assess people at-risk of disease from respirable crystalline silica (RCS) dust exposure in the engineered stone industry and carry out health surveillance within their specific training and expertise.
- Supporting RACP membership of the Expert Steering Committee to develop the *2022 – 2027 National Silicosis Prevention Strategy* (NSPS) and accompanying *National Action Plan*, led by Lung Foundation Australia. Professor Malcolm Sim FAFOEM, FAFPHM, AM, is the RACP appointment.
- Driving better support for medical, health and other related professionals to improve the diagnosis and management of workers affected by silicosis. The RACP has liaised with the Department of Health and Aged Care in this period regularly. A key proposal document was jointly developed by AFOEM and TSANZ in March 2022 which detailed eight feasible actions to improve the diagnosis and management of workers affected by silicosis and other dust diseases and included an illustrative case study. This was well received and because it proposes changes to MBS provisions, it is being considered in the context of those processes before the end of the year.
- The RACP has also had representation on the advisory group established to develop a National Occupational Respiratory Disease Registry. The Registry is of vital importance to address accelerated silicosis. The RACP supports a Registry that benefits workers and engages physicians.
- Input has been provided to the development of a Monitoring and Evaluation Framework (external consultants are KPMG).
- In Aotearoa New Zealand advocacy driving similar health care improvements is being progressed by meeting with Worksafe NZ.
- The RACP made a significant contribution to the NSW Legislative Council Standing Committee on Law and Justice – 2021 Review of the Dust Diseases Scheme by preparing a submission (December 2021) led by AFOEM FPAC,¹⁰⁹ the provision of evidence by two members of the Lead Fellows Group to the public hearing (February 2022) – Dr Graeme Edwards FAFOEM and Professor Deborah Yates FRACP. Evidence included a statement to the Standing Committee that conveyed deep concern for the current and growing epidemic of accelerated silicosis and the view that the overall implementation since 2017 of the Dust Diseases Scheme has fallen short of what has been recommended and needed.

¹⁰⁸ <https://www1.health.gov.au/internet/main/publishing.nsf/Content/ohp-dust-nat-guide-gp.htm>

¹⁰⁹ https://www.racp.edu.au/docs/default-source/advocacy-library/college-s-nsw-submission-to-the-nsw-legislative-council-standing-committee-on-law-and-justice-2021-review-of-the-dust-diseases-scheme.pdf?sfvrsn=aa18c61a_8

Outcomes

- In Australia, progression of the Taskforce recommendations has been interrupted by the change of government, however the Department of Health and Aged Care is progressing the AFOEM proposal for changes to MBS items, and liaising with the RACP on member concerns regarding other recommendations.
- In NSW a key outcome was that all 7 of our key “asks” were supported by the review committee. Further, the RACP submission was cited in their report throughout, along with the evidence given at the hearing. They made recommendations to improve the availability and quality of health screening of workers to ensure silicosis cases are identified as early as possible.
- However, the NSW Government response released in September 2022 has not taken up all of Committee’s recommendations.

Through May and June 2022 Dr Edwards, RACP spokesperson on these issues, provided national commentary via the ABC on radio.

Future work will continue regarding establishing effective and consistent mechanisms across jurisdictions and at the national level. Of note is the need for work on case finding and the development of jurisdiction registries.

Improving the Health of Health Care Workers

This project is a new cross-RACP initiative, approved by CPAC in March 2022 and led by AFOEM. It seeks to:

- Improve the protection of healthcare workers and meet employer Workplace Health and Safety (WHS)
- Ensure appropriate workplace safety in Australia and Aotearoa New Zealand
- Address the duty of care responsibilities towards healthcare workers in their workplaces

Two working groups are being established to develop the two deliverables:

1. A guidance document for relevant stakeholders to advocate for improvement in WHS in the healthcare sector.
2. A position paper on the role of the occupational and environmental physician in the healthcare sector.

Palliative medicine

The Australasian Chapter of Palliative Medicine (AChPM) continues to provide expert input into the RACP’s ongoing policy and advocacy activity related to palliative medicine.

The COVID-19 pandemic has placed further pressure on an already strained health system and healthcare workforce. Prior to the COVID-19 pandemic, equitable access to quality palliative care was already a prominent issue. Further challenges for specialist palliative care services are anticipated given the rise in non-malignant chronic conditions, including the expected dramatic rise in cases of post-acute sequelae of COVID (Long COVID).

Policy and advocacy priorities for AChPM include:

- Equitable access to specialist palliative care particularly for priority populations
- COVID-19
- Raising the awareness of specialist palliative care outside of end-of-life care
- Early integration of specialist palliative care in patient care
- MBS items for specialist palliative care, particularly in residential aged care settings
- Workforce issues

AChPM collaborates with relevant RACP bodies on priority activities that align with broader RACP activity, such as MBS reform, integrated care and COVID-19 advocacy.

Voluntary assisted dying

The RACP has continued to monitor developments on Voluntary Assisted Dying (VAD) across Australia and provide comment where possible to ensure appropriate safeguards and processes if VAD legislation should become operational.

Over the years, AChPM has contributed to the development of submissions on VAD Bills when the opportunity has arisen. These include submissions for VAD legislation in Queensland (July 2021)¹¹⁰, Western Australia¹¹¹ (May 2019), Aotearoa New Zealand¹¹² (February 2018), New South Wales¹¹³ (July 2017) and Victoria¹¹⁴ (April 2017). To date, VAD laws have been passed in each of Australia's six States and in Aotearoa New Zealand:

- Victoria (in operation)
- Western Australia (in operation)
- Aotearoa New Zealand (in operation)
- Tasmania (commence 23 October 2022)
- South Australia (commence 31 January 2023)
- Queensland (commence 1 January 2023)
- New South Wales (commence 28 November 2023)

VAD remains illegal in the Northern Territory and the Australian Capital Territory, and in Tasmania, South Australia, Queensland and New South Wales until those States' laws commence.

110 https://www.racp.edu.au/docs/default-source/advocacy-library/racp-submission-the-queensland-parliament-health-and-environment-committee-s-inquiry-into-the-voluntary-assisted-dying-bill-2021.pdf?sfvrsn=6efec31a_4

111 https://www.racp.edu.au/docs/default-source/advocacy-library/submission-to-the-western-australian-ministerial-expert-panel-on-voluntary-assisted-dying-discussion-paper.pdf?sfvrsn=5b19181a_8

112 [https://www.racp.edu.au/docs/default-source/advocacy-library/racp-submission-end-of-life-choice-bill-2017-\(new-zealand\).pdf](https://www.racp.edu.au/docs/default-source/advocacy-library/racp-submission-end-of-life-choice-bill-2017-(new-zealand).pdf)

113 <https://www.racp.edu.au/docs/default-source/advocacy-library/pa-racp-submission-nsw-vad-bill-submission.pdf?sfvrsn=6>

114 <https://www.racp.edu.au/docs/default-source/advocacy-library/pa-sub-vic-vad-bill-discussion-paper.pdf?sfvrsn=6>



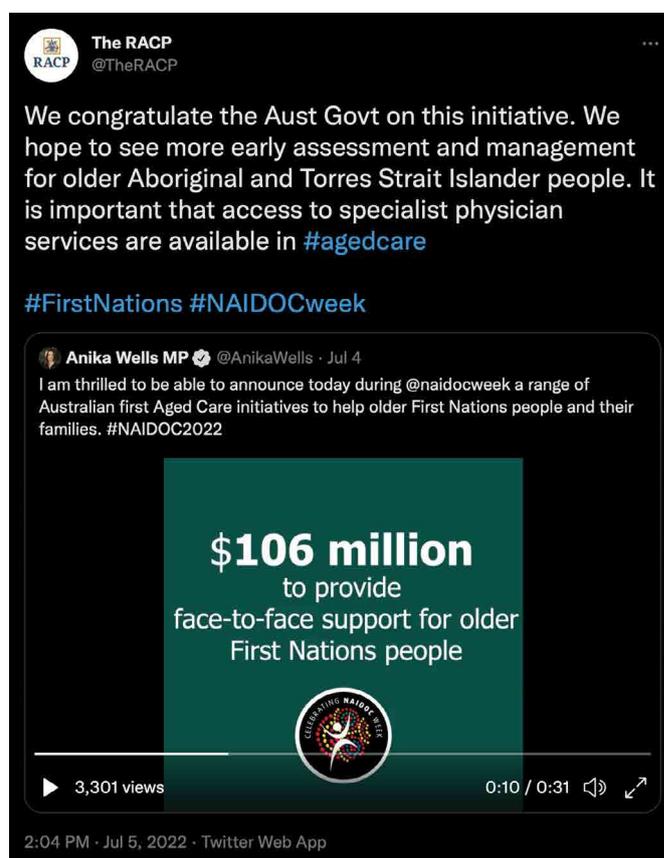
Aged care

Aged care has been an RACP policy priority since 2018, noting this population group and their health care concerns numerous RACP specialties but especially geriatric medicine. We collaborate closely with the Australian and New Zealand Society for Geriatric Medicine. Deficiencies in the health care provided to older people were highlighted by the Royal Commission into Aged Care Quality and Safety. The focus for the RACP is to advocate on outstanding recommendations from the RACP submission¹¹⁵ and those relevant from the Royal Commission.

In this reporting period:

- Key specific recommendations on aged care were included in the Federal Election statement (such as calling for the scaling up of integrated care in the aged care sector to include specialists, responding to the considerable complex chronicity; expanding palliative care services).
- Aged care and the specific reforms promoted by the RACP have been put to various Ministers and their advisors across parties and to Independents that reflect the need for three elements to positively impact health care for older people:
 - Improved, well-funded assessment, securely embedded in primary and secondary care (timely, with involvement or access to consultant physicians and specialists).
 - Integrated health care models designed to provide a two-way health care continuum (between community-based care and hospital care, which is essential for older persons with chronic complexity)
 - Improved funding and address of older Aboriginal and Torres Strait Islander people's health care needs, especially early condition assessment and comprehensive condition management.

115 https://www.racp.edu.au/docs/default-source/advocacy-library/submission-to-the-royal-commission-into-aged-care-quality-and-safety.pdf?sfvrsn=b534e21a_8



- We have advocated for there to be swift action on the implementation of *Recommendation 58 Access to specialists and other health practitioners through Multidisciplinary Outreach Services* (Royal Commission into Aged Care Quality and Safety, on the issue of privatising Aged Care Assessment Teams (ACAT), and on the need for multidisciplinary teams.
- A Policy and Advocacy Advisory Group (PAAG) stream in aged care is being established recognising the absence of a key member reference group and because aged care health involves several specialties (for example, geriatric medicine, rehabilitation medicine, palliative medicine, internal and general medicine, neurology, cardiology etc).

Regional policy and advocacy

In 2022, the RACP's Regional Committees welcomed new committee membership. In a number of regions there has been a focus on developing or maintaining relationships with state/territory health ministers. Areas of advocacy throughout the year included:

- Rural/remote advocacy across regions, e.g. call for increased phone/video consultations to promote equity and access when face to face consultations are not available
- Climate change and health advocacy, e.g. opposition to electricity disconnections in remote Indigenous communities with COVID lockdowns
- Welcoming increased Commonwealth increased support for GPs and allied healthcare workers in regional areas, but calling for better access to specialists through STP expansion
- Measures to improve physician and trainee wellbeing
- NT youth justice advocacy regarding closure of Don Dale Youth Justice Centre, use of spit hoods and other physical restraint, and delays implementing Don Dale Royal Commission recommendations
- NT advocacy for appropriate consultation with physicians about NT hospital reform
- Qld appropriate physician perspectives needed before pharmacy prescribing expansion
- Consultation with the Qld Voluntary Assisted Dying Implementation Team, including briefing the Queensland Regional Committee
- SA election-related advocacy, including on fostering a culture of wellbeing for physicians and trainee physicians, and advancing gender equity
- SA advocacy in support of Trainees' Committee concerns about hospital/health system culture and wellbeing
- NSW support for Statewide Initiative for Diabetes Management, promotion of RACP's Model of Chronic Care Management
- NSW call for urgent NSW Government response to the Special Commission of Inquiry into the Drug 'Ice'.
- Victorian advocacy for increased school supports for schoolchildren with a disability, following reports that 1 in 3 students who were expelled in the first year of the pandemic in Victoria had a disability.
- Victorian election-related advocacy including the development of an election statement and the adaption of the national Kids COVID Catch Up and Healthy Climate Future campaigns to the Victorian context.
- Planning with the WA Cancer Council and RACS' WA Trauma Subcommittee for advocacy on Minimum Unit Pricing.
- Letter to the Tasmanian Health Minister, seeking to develop a relationship.

Refreshed Approach

The College Policy and Advocacy Council (CPAC) Plan 2022–2026¹¹⁶, which was developed with input from members through consultation, surveys and interviews, includes six refreshed ways of working. In 2022 – the first year of the plan’s implementation – we have focussed on the four ‘refreshed ways of working’ below.

Increasing Influence on Public Policy

Every three years, the Australian Federal Election presents a key opportunity for the RACP to influence the commitments of political parties and candidates by advocating for policies that enable members’ patients and community members to live longer, healthier lives. In the lead up to the 2022 Federal Election, the RACP called on political leaders to ‘Commit to Healthcare’ – to commit to a suite of policy priorities that would deliver a quality, future-focused healthcare system for all. The priorities were outlined in our Federal Election Statement¹¹⁷ and factsheet¹¹⁸, with which we engaged political leaders and the media.



**System reform
to strengthen the
health system**



**Prevention to reduce
preventable chronic
disease and ill health**



**Equity to give all
Australians the
opportunity for good
health and wellbeing
across their lifespan**



**Climate resilience to
equip our healthcare
system so it is
climate ready and
climate friendly**

Our pre-election policy recommendations fell under four priority areas.

¹¹⁶ https://www.racp.edu.au/docs/default-source/policy-and-adv/creating-equitable-and-healthier-communities-college-policy-and-advocacy-council-plan-2022-2026.pdf?sfvrsn=141cca1a_6

¹¹⁷ https://www.racp.edu.au/docs/default-source/policy-and-adv/election-statement/2022-racp-federal-election-statement.pdf?sfvrsn=1f1ecb1a_6

¹¹⁸ https://www.racp.edu.au/docs/default-source/policy-and-adv/election-statement/racp-commit-to-healthcare-fact-sheet-2022.pdf?sfvrsn=c5acb1a_4

A number of our key priorities were agreed to by the new Australian Government ahead of its election, including:

- A Centre for Disease Control and Prevention
- A mental health package for school children and a review of support required for school children with disability and/or learning difficulties
- Improvements to aged care and the NDIS
- A National Climate Change, Health and Wellbeing Strategy.

Following the election, our attention turned to ensuring the government met these commitments in the most appropriate way. An 'Incoming Government Brief,' which highlighted synergies between the new government's election commitments and RACP policy priorities, was provided to key government members shortly after the election. We have focussed on developing positive working relationships with key Ministers and Assistant Ministers responsible for the delivery of these commitments. We are also engaging with Shadow Ministers and Assistant Ministers to maintain and build bipartisan support for our recommendations, adhering to our requirements as a registered charity. The RACP President has had multiple meetings with the Health Minister and we are in regular contact with his Office, providing detailed briefings on request. To complement our meetings with Ministers and Assistant Ministers responsible for key commitments, we are also engaging with senior public servants who are tasked with the implementation of these commitments. In doing so, we are ensuring our members' expertise are reflected in the real-world implementation of our policy recommendations.

We have also prioritised our relationships with Members of Parliament (MPs) who are Fellows of the RACP (FRACP). We were delighted to welcome the formation of the Parliamentary Friends of Child and Adolescent Health Group, which is co-chaired by three FRACP MPs from across the political spectrum – Dr Michael Frelander MP, Dr David Gillespie MP, and Dr Monique Ryan MP. In addition, given the key role of the crossbench in the current Australian Federal Parliament, we have focused on our relationships with crossbench MPs, who have an interest in climate change and health, especially those with a health background. We will continue to engage productively across the Australian Parliament, while also ensuring we maximise opportunities presented by the upcoming Aotearoa New Zealand election and multiple state elections in Australia.



Dr Michael Frelander MP FRACP and PRACP Dr Jacqueline Small.

Equipping members for advocacy

Advocacy is a Basic Training Competency for Adult Internal Medicine and Paediatrics & Child Health. As stated in the RACP Basic Training Curriculum, it requires physicians to “respond to individual patients’ health needs by advocating for them within and outside the clinical environment”. To support our members in upholding this competency, in 2022 we launched the ‘Advocacy for Physicians’ e-resource, available via RACP Online Learning¹¹⁹ by searching ‘physician advocacy’. The resource covers advocacy both at the patient and systemic level. It delves into the history of advocacy, the RACP’s approach to advocacy and provides practical tools for physicians to apply in advocating on the issues they are passionate about. The resource includes the popular RACP documentary series – The Advocate’s Journey, which was the focus of a popular Pomegranate podcast¹²⁰ in 2022 that also featured an overview of RACP leadership on climate and health advocacy. The advocacy e-resource was launched by the RACP President during RACP Congress in May. The launch took place during a well-attended advocacy workshop, featuring Young Australian of the Year and RACP trainee, Dr Daniel Nour founder of Street Side Medics, who is an experienced and dynamic advocate.



Dynamic advocate, Young Australian of the Year Dr Daniel Nour, who is an RACP trainee, at RACP Congress 2022.

The advocacy e-resource and workshop have provided members with tools and knowledge to apply in a range of advocacy settings. In addition, we have facilitated collective advocacy of members through the Kids COVID Catch Up campaign¹²¹ and the Healthy Climate Future campaign¹²². RACP workshops and tools have supported members to advocate on these crucial topics, which are identified as priorities in the CPAC Plan 2022–2026¹²³. A key focus in 2022 has been employing the latest techniques in online advocacy to allow time-poor members to take part in campaigns by lending their insights and influence through easy-to-use web platforms. This was key to the success of the Kids COVID Catch Up campaign in the lead up to the Australian Federal Election. Members ‘took action’ by using the web platform to email political leaders in support of the campaign. The current Health Minister (then Shadow Health Minister) responded to members’ emails with a commitment to review school supports for children with disability – a key ask of the campaign. In addition, the campaign substantially contributed to increased awareness of the need for greater investment in children’s mental health and early childhood education, precipitating major government commitments in these portfolios.



Members featured in the informative and emotive Kids COVID Catch Up campaign video.

119 <https://www.racp.edu.au/fellows/resources/online-learning>

120 <https://www.racp.edu.au/podcast>

121 <https://kidscatchup.org.au/>

122 <https://healthyclimatefuture.org.au/>

123 https://www.racp.edu.au/docs/default-source/policy-and-adv/creating-equitable-and-healthier-communities-college-policy-and-advocacy-council-plan-2022-2026.pdf?sfvrsn=141cca1a_6

Engaging the community to drive change

Physicians and paediatricians are powerful, respected voices in public debate. By combining our members' voices with others across the community we can demonstrate where broad support for issues exists, therefore encouraging government to take action. In 2022, we opened our campaigns to broader audiences. Through the Kids COVID Catch Up campaign, parents and a wide range of health professionals signed up in support, which bolstered the campaign's influence on government. We worked collectively with social service and community organisations with shared policy objectives and a number of these organisations endorsed the campaign.

Through the Healthy Climate Future campaign, the RACP has played an important leadership role on climate and health advocacy in 2022. We have facilitated coordination of advocacy across medical colleges and opened the campaign to other health professionals, as well as members of the community impacted by the health impacts of climate change. In doing so, we are gathering insights on these impacts, providing useful information for government and media.

In 2022, we continued our active participation in the Raise the Age campaign, which calls for the age of criminal responsibility to be increased to at least 14. We also endorsed the Thrive by Five campaign, which advocates for improved childcare access and affordability. For both of these campaigns in 2022, the endorsement of the RACP generated high-profile media coverage that improved awareness of these issues.



The Healthy Climate Future website allows members, other health professionals and members of the community to share their insights on the impacts of climate change on health.

Evaluating our impact

In 2021, we worked with evaluation consultants Influence Global to develop a Monitoring and Evaluation Framework for Policy and Advocacy, and in 2022 we started implementing this new framework. To build capacity in monitoring and evaluation, we undertook three key projects:

- Preparedness and capacity building, including developing a data collection framework to support evaluation;
- Piloting monitoring and evaluation on an in-flight project. The Kids Covid Catchup Campaign was selected for the pilot project;
- Embedding monitoring and evaluation in development of a new policy position statement. The Drug Policy Position Statement was selected for this project.

To integrate data collection with the CPAC Plan 2022–2026¹²⁴, key performance indicators were developed for reporting to the RACP Board and included in the 2022 workplan for regular monitoring and reporting. We reviewed what data we record to support reporting, where and how it is recorded and have commenced changes to support more transparent reporting of outcomes against KPIs.

¹²⁴ https://www.racp.edu.au/docs/default-source/policy-and-adv/creating-equitable-and-healthier-communities-college-policy-and-advocacy-council-plan-2022-2026.pdf?sfvrsn=141cca1a_6

On the Kids Covid Catchup, we conducted an ‘intense period debrief’ which is a team-based, documented reflection identifying successes and results as well as talking through areas for improvement. The key lessons from the Intense Period Debrief were:

- There was a strong policy and evidence base for the key asks of the campaign, which gave the campaign credibility and influence
- Having a Campaigns Manager within the Policy and Advocacy Team helped to drive the project
- The asks were specific, practical, actionable and achievable, which made them attractive to decision makers and helped them cut through public debate
- The website and video provided good, shareable content to engage people in the campaign
- We probably underestimated the time and resources required to deliver the campaign effectively, and there was significant stakeholder engagement and follow-up work required

- Earlier planning and stakeholder engagement in future campaigns will increase buy-in to the campaign and allow for more strategic social media support.

These lessons are being applied more broadly to other campaigns and advocacy and have been a very useful learning experience.

The final project to embed monitoring and evaluation in a new policy project commenced in August 2022. To date the change mapping tool has been utilised to develop an outcomes model for the project that clearly articulates the strategic goal, outcomes we aim to achieve, and interim outcomes that indicate progress. This will be used to develop a monitoring and evaluation plan for the project that informs the development of the policy position statement and subsequent advocacy and engagement.



The RACP's P&A Team



RACP
Specialists. Together
EDUCATE ADVOCATE INNOVATE

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