

Annual Report

2023

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Committed to Indigenous health

Service | Integrity | Respect | Compassion | Collaboration

About RACS

The Royal Australasian College of Surgeons (RACS) is the leading advocate for surgical standards, professionalism and surgical education in Australia and Aotearoa New Zealand.

The College is a not-for-profit organisation that represents more than 8300 surgeons and 1300 surgical Trainees and Specialist International Medical Graduates (SIMGs).

RACS is a substantial funder of surgical research and supports healthcare and surgical education in the Indo-Pacific region.

The College trains nine surgical specialties across Australia and Aotearoa New Zealand in: Cardiothoracic Surgery, General Surgery, Neurosurgery, Orthopaedic Surgery, Otolaryngology Head and Neck Surgery, Paediatric Surgery, Plastic and Reconstructive Surgery, Urology, and Vascular Surgery.

Vision

Advancing surgery, embracing innovation

Mission

To improve access, equity, quality, and delivery of surgical care that meets the needs of our diverse communities

Values

Service, Integrity, Respect, Compassion, Collaboration

2023 at glance

8300

Members

RACS provided FRACS post-nominals to 8300 members across Australia and Aotearoa New Zealand.

>165

advocacy meetings and policy submissions

RACS continued advocacy efforts with more than 125 stakeholder meetings, numerous ministerial and departmental representations and around 40 submissions and position statements

406

Trainees sat the Fellowship exam

Of the 1300 surgical Trainees we represent, 406 sat the Fellowship exam with 264 in May and 142 in September

135

courses delivered

We delivered 135 courses to more than 2291 participants

500

volunteer teaching hours

We are grateful to the 38 faculty members donated their time to deliver more than 41 professional development activities—equating to 500 volunteer teaching hours

\$2m

bequeathed by Mrs Joyce Ethel Robertson

A donor, Mrs Joyce Ethel Robertson, bequeathed \$2 million to the RACS Scholarships and Grants Program



- › RACS Global Health deployed 20 volunteer surgical teams to 11 Indo-Pacific countries
- › RACS Global Health supported 20 clinical training courses for 320 Indo-Pacific clinicians
- › RACS volunteer medical teams performed 1133 patient consultations and 321 surgeries



- › The General Surgical Sciences Exam (GSSE) and Clinical Examination (CE) had three successful sittings during 2023 with the following numbers of candidates: GSSE – 830, CE – 388, and Specialty Specific Exams (SSEs) – 181



- › 117 incoming Trainees attended the RACSTA Induction Conference
- › 165 new Fellows convocated at the RACS Annual Scientific Congress



- › RACS awarded 28 research scholarships and 43 learning and development grants



- › RACS volunteer medical teams provided vital surgical training and mentoring to 232 clinicians



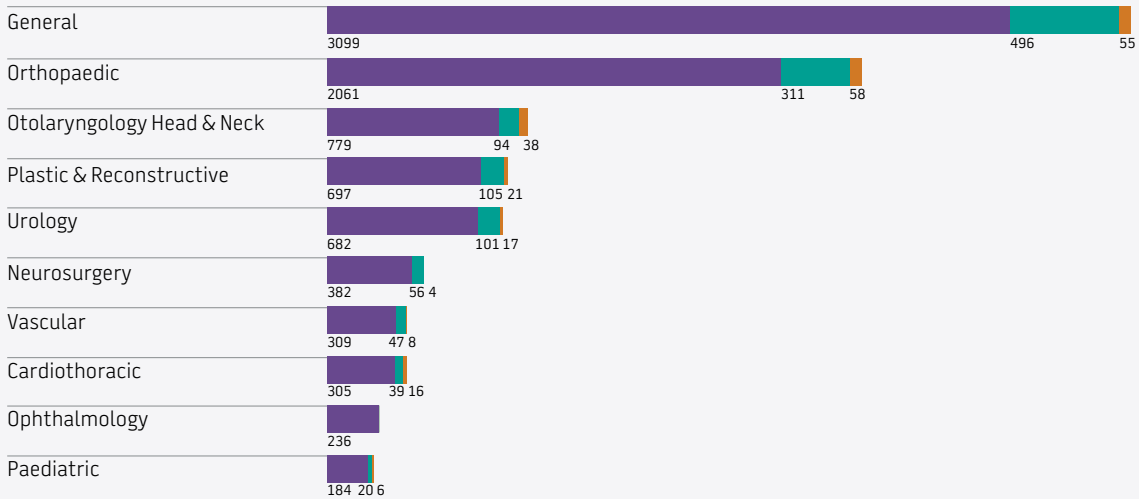
- › We had 2314 participants attend the Foundation Skills for Surgical Educators and the Operating with Respect courses



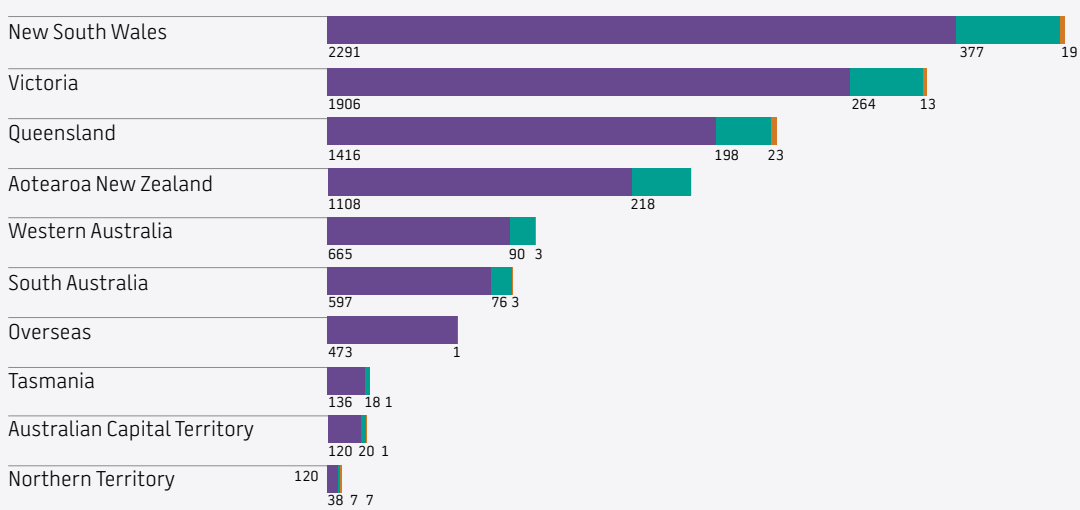
- › We provided educational support to more than 450 JDocs subscribers

Our Fellows, Trainees and Specialist International Medical Graduates

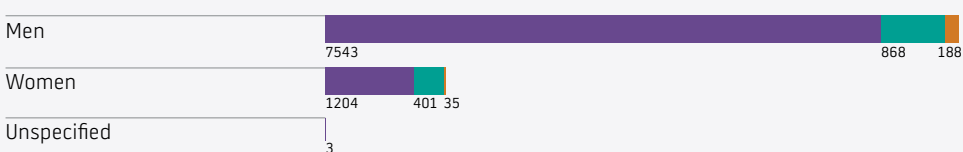
By specialty



By location



By gender



Active Fellows SET Trainees SIMGs

Awards 2023

Awards approved by Council in 2023

Honorary Fellowship

Associate Professor Ikau Kevau

Award for Excellence in Surgery

Professor John McCall

Court of Honour

Dr Sally Langley

Professor Spencer Beasley, ONZM

Sir Louis Barnett Medal

Dr (Duncan) Scott Stevenson (posthumous)

ESR Hughes Award

Dr Heather Cleland

John Corboy Award

Dr Sharon Jay

RACS Medal

Dr Philippa Mercer

Rural Surgeons Award

Dr Jaeme Zwart

Henry Windsor Lectureship

Professor Fiona Wood

Indigenous awards

Māori Health Medal

Dr Maxine Ronald

ACT

- › Outstanding Service to the Community
Dr Allen-John Collins

Victoria

Joint VSO & University Awards

- › VSO & Melbourne University Final Year Surgical Student Prize – **Dr Emily Greenwood**
- › VSO & St Vincents/Melbourne University Michael Ryan Scholarship – **Dr Katherine Roche**
- › VSO & Monash University ESR Hughes Medal – **Dr Sarah Elizabeth Clark**
- › VSO & Deakin and Geelong Medical Staff Group GJ Royal Prize in clinical surgery – **Dr Natarssha Ryland**

VSO Academic Awards

- › DR Leslie Prize – **Dr Sam McClintock**
- › RC Bennett Prize – **Dr Yen Kylie Lim**
- › VSO Medical Student's Prize – **Dr Su Liu**
- › VSO DCAS Scholarship – **Dr Aya Basam**

Fellow prizes

- › Outstanding Service Award – **Dr Susan Shedda**
- › VSC Essay Prize – **Dr Romy Granek**
- › VSC Photography Prize – **Dr An Pham**
- › GJ Royal Medal – **Professor Bruce Mann**

Tasmania

Academic awards

- › The Joe Shepherd Memorial Prize – **Dr Laurent Willemot**
- › The Peter Braithwaite Memorial Prize – **Dr Olivia Kandamany**
- › The Medtronic Education Award – **Dr Kristy Mansour**
- › The Peter Hewitt Memorial Prize –
Dr Shriranshini Satheakeerthy
- › The Bongiorno Group & RACS Prize – **Dr Joshua Blum**
- › The Graeme Duffy Memorial Prize – **Dr Sharon Lee**

South Australia

- › Sir Henry Newland Award –
Associate Professor Robert Bauze
- › Justin Miller Medal – **Dr Luke Traeger**
- › RP Jepson Medal – **Dr Harleen Kaur**

New South Wales

- › NSW Merit Award – **Dr Angus Gray**
- › Service to the Community Award – **Dr Raffi Qasabian**
- › Graham Coupland Lecture and Medal –
Associate Professor Laurencia Villalba
- › Women in Leadership Award –
Associate Professor Margaret Schnitzler
- › Innovation award – **Dr Bishop Soliman**
- › Annual Medical Student Award – **James Lockhart**

Western Australia

- › Outstanding Service to the Community – **Dr Paul Bumbak**
- › Outstanding Service to the Community –
Associate Professor Mary Theophilus

Aotearoa New Zealand

- › Rural Surgeons Award – **Dr Richard Coutts**
- › Louis Barnett Prize – **Dr Scott Bolam**

President's report



Associate Professor Kerin Fielding, President

In a year of significant challenges, both for the College and the wider healthcare sector, there are indications of a strong future.

The College's profession-led education and training model continues to be recognised as one that delivers high quality surgical care across Australia and Aotearoa New Zealand. Our professionals are recognised globally, and FRACS understood as a symbol of excellence.

Protecting this reputation is one of the College's core functions, and as such was a cornerstone of our advocacy efforts this year. Our ongoing collaboration with government entities and rigorous advocacy efforts serve to safeguard the interests of our members and uphold the integrity of our noble profession. We were pleased to see Australian health ministers announce a limitation on the use of the title 'surgeon' to only medical practitioners holding registration in the specialties of surgery, obstetrics and gynaecology, ophthalmology and maxillofacial. In September 2023, this was solidified through legislation passed in Queensland as the host jurisdiction for the national law. This formal protection of title is critical for patient safety outcomes and strengthens the standing of our profession in the community.

These achievements come only when we work together as a profession, and I thank all of the societies, our partners, and respective governments for their collaboration.

Another issue that we continue to discuss with government and key stakeholders is that of workforce—specifically workforce distribution across rural and regional areas. Australians and Aotearoa New Zealanders reasonably expect access to timely, high quality and safe healthcare, regardless of where they live. Yet, the reality is too many people, especially those living in regional and remote areas, are finding this increasingly difficult. Data shows that young doctors enter training pathways with an interest and intention to work in rural areas, but that diminishes over time through limited opportunities and limited support. This issue is ours to address as a College and a sector.

The College's *Rural Health Equity Strategy* was established in 2020 and sets goals under four core pillars—to select, train, retain and collaborate for rural. As chair of the Rural Health Equity Steering Committee, I am passionate about strengthening our workforce and services for the benefit of rural communities. I am pleased to report that three years into this strategy, we continue to make progress against these aims. Our strongest outcomes to date have been in setting a more pro-rural culture within the profession, in technology as a tool for inclusion and in selection and training initiatives. These areas demonstrate an early engagement and uptake of rural equity as a priority by our profession and form a strong foundation for meaningful impact. We can be proud of how far we've come in such a short time—but there is still a long way to go.

The *Rural Health Equity Strategy* has been adapted by the Australian Medical Council (AMC) and the Medical Council of New Zealand (MCNZ) as a condition of our ongoing accreditation. While this is a strong endorsement that we are on the right path, it also holds us accountable and demonstrates how seriously we must take our commitment to rural communities and our social contract.

While the College's leadership in this area has been acknowledged by the regulator, other structural issues, particularly around workforce planning and processes, have been identified as grounds for concern. It's crucial to emphasise that these issues are not regarding the quality of training under the current devolved model, but rather some inconsistencies around structure and process. We will be expected by the regulator and health ministers across jurisdictions to work together to address these. The College continues to review AMC/MCNZ recommendations and work closely with all delivery partners and stakeholders on a clear roadmap for the future.

Our financial situation has also presented challenges over the last 12 months. In an economic environment already characterised by rising cost pressures, the College has had to come to terms with the impact of a number of recent investment decisions and undertake a range of important measures to restore stability to our financial situation.

The first of these was establishing a Recovery Committee in June 2023, comprising myself, the vice president and four skills-based, profession-led Board members. This committee has worked extremely hard to address our financial situation, both in terms of realigning operations to achieve significant savings through the 2023 budget period and in setting the 2024 budget, which has been approved with an operating surplus of \$1.7 million. In addition, the Council commissioned an independent review of the cause of our financial issues, looking back at events from 2016 to 2023.

With the benefit of this new information, it is clear that recent capital expenditure and digital transformation, while well intentioned, were not initiatives the College could afford. The other major takeaway from the report was that the College must modernise and strengthen its governance structure by creating a new standalone skills-based, profession-led Board with strong financial and risk management abilities, leaving the Council to focus on core business and surgical leadership. We have shared the findings of this independent report with members. We have also shared a summary with members of the numerous actions already undertaken to secure the financial future of the College and the safeguards we have put in place for foundation funds to prevent this from occurring in future.

I am confident that the work we have done – and the work we continue to do to address both our financial and regulatory obligations – puts us in good stead for the future. I am also confident that we have the right people in place to achieve our goals.

In November, we announced the appointment of Stephanie Clota as our new CEO with effect from 29 January 2024. Stephanie brings a wealth of experience to RACS, most recently serving as the CEO of GPEx – South Australia's leading primary care specialist training and workforce planning organisation. During her tenure at GPEx, she spearheaded the successful delivery of the Australian General Practice Training program in South Australia and oversaw its transition to a college-led model in 2023.

Our next steps are to make the necessary amendments to our constitution to ensure that we have the right governance structure in place. While this process takes place outside of this annual reporting period, it is simply too important to our future to not address. Governance reform requires the support of members. It requires all of us to come together to ensure the long-term financial sustainability of our College and the important work it does for the profession – both now and for the next generation of surgeons.

I believe in this College and in the model of training we deliver. On a recent trip to the UK, I observed another model of training delivery and while I'm sure it has its merits, it reaffirmed my belief that we must protect what we have in Australia and Aotearoa New Zealand. It also reminded me that the surgical profession is facing challenges worldwide. Both at home and abroad, the health system continues to face significant challenges including the growing burden of an aging population, workforce shortages and associated increases in the costs of delivering care. At the same time, Australians and Aotearoa New Zealanders are facing sharp increases in the cost of living, and as a sector we must do everything we can to deliver affordable healthcare to patients. These issues highlight the need to continue to innovate how care is delivered, enhance our teaching of professional skills and continue to work together to improve and strengthen our healthcare system for the benefit of the community.

We have so much to lose if we do not unite as a profession. Our College is the envy of many and has come to represent excellence in safe and comprehensive surgical care, education, training, professional development and advocacy. As a fellowship-based organisation, RACS continues to act for you – our 8300 members – because we know that strengthening our profession is the best thing we can do for the communities we serve.

As always, I would like to thank our staff, Council members, committee members, and our valued Fellows for your support during the year. We look forward to building on this momentum in the coming year and facing new challenges with the same spirit of collaboration.

Associate Professor Kerin Fielding
President

Advocating for our profession

Advocating for patients in Australia

RACS Health Policy and Advocacy Committee (HPAC) and its dedicated policy and advocacy team advocates on behalf of surgeons and their patients across a wide range of issues. Primarily focused on the Australian Commonwealth level, HPAC kept members informed through its *Advocacy in Brief* newsletter. In 2023, their efforts yielded significant outcomes with more than 100 stakeholder meetings inclusive of relevant Australian commonwealth ministers and the health department secretary, 30 submissions and position statements, and 30 letters to stakeholders.

In 2023 the dominant policy issues were:

- › surgical advocacy (35 per cent)
- › private healthcare insurance (18 per cent)
- › environmental sustainability in surgical practice (16 per cent)
- › direct political advocacy (14 per cent)
- › national health law and compliance (8 per cent)
- › ethics and equity (6 per cent), and medico-legal (3 per cent).

Aotearoa New Zealand

The Aotearoa New Zealand National Committee (AoNZNC) made important strides in 2023 in building relationships with government health bosses and ensuring the voice of Aotearoa New Zealand surgeons was heard by decisionmakers. It was a critical year for health reforms, which saw a centralisation of public health oversight and the establishment of the Māori Health Authority – Te Aka Whai Ora.

The AoNZNC executive had three meetings with the health minister and more than 20 executives in government health agencies. Two members of the AoNZNC sat on health roundtables and more than 10 submissions were made on policy consultations.

Some of the specific issues the AoNZNC advocated on in 2023 were the toughening up of safety procedures

Beyond these core focus areas, HPAC addressed diverse surgical issues, from budget allocations to telehealth guidelines. They also contributed to landmark initiatives like the National Safety and Quality Cosmetic Surgery Standards and the Australian-first National Health and Climate Strategy.

HPAC also focused on other topics like racism, end-of-life care, surgical apparel and reusable surgical gowns, anti-racism, workforce maldistribution considerations, reducing waiting lists, health registries and morbidity groups, capturing big health data, managed care, low-value care, protection of title, workforce on surgical assistance, rural generalist medicine, and scopes of practice.

The future direction in 2024 will focus on critical issues shaping the future of Australian surgery while delving into emerging topics affecting surgical practice. While funding stands at the forefront, discussions on optimising health economics, mitigating the impact on rural areas, and public-private partnerships and their potential influence on surgical training will also be explored.

around the use of surgical mesh to treat urinary stress incontinence; the regulation of the physician associate profession; and the Accident Compensation Corporation wage subsidy for patients injured when not earning.

An election in October heralded in a new coalition government. The AoNZNC was quick to get the new health minister up to speed on the what it sees as the biggest issues for surgical services in Aotearoa New Zealand—health reforms, workforce, planned care, equity and environment.



Australian states and territories

During COVID-19 the Australian states and territories committees played a crucial role in engaging with the jurisdictional governments and were able to maintain relationships with key stakeholders.

As Australia recovered from the major impact of the pandemic the states and territories rebuilt and created new processes to promote and maintain healthcare. The relationships and partnerships developed allowed the state and territory committees to be involved in many initiatives, not just representing RACS Fellows, Trainees, Specialist International Medical Graduates (SIMGs), and the community in which surgeons work.

The state and territory committees focused on addressing elective surgery waiting lists and equality of surgical care across urban and rural locations. They also gave RACS a voice through their regular meetings with ministers, health departments, hospitals, governments, universities, other medical specialists, surgical specialties and other key stakeholders.

The committees advocated on various issues and opportunities such as trauma including gun safety, the effects of alcohol abuse, vehicular speed limits, and e-scooters.

The committees also worked closely with the Health Policy and Advocacy Committee (HPAC) in addressing advocacy affecting Australia. An ongoing example of this was the strong advocacy on cosmetic surgery issues that culminated in the protection of the title of 'surgeon'.

The states and territories also focused on addressing local issues. Some of the highlights included having a voice in the conversations and legislation around variations in sex characteristics and voluntary assisted dying, being involved in bowel cancer guidelines, and promoting innovation through robotic surgery and artificial intelligence.

The pivotal role of the state and territory committees in advancing the organisational and member-centric objectives of the College were evident. The committees actively engaged with state and territory governments, advocating for the interests of RACS and its constituents.



Committed to Indigenous health

Leading a sustainable future for surgery

Robot-assisted surgical training

The RACS Robot-Assisted Surgery Working Party completed its work in June 2023. The final report and recommendations were shared with the RACS Council on how to introduce relevant robot-assisted surgical training into RACS programs.

The recommendations included RACS specialty training boards considering:

- › introducing robot-assisted surgical training into their respective Surgical Education and Training (SET) curricula
- › setting the standards of robot-assisted surgical education and training
- › setting the graduate outcomes for their respective specialty curricula.

Other recommendations included endorsement of a credentialing pathway for robot-assisted surgery and a staged simulation training pathway.

RACS continues to collaborate with the International Medical Robotics Academy (IMRA) as a leading provider of medical robot-assisted surgical skills training in the health sector. The aim is to provide Fellows, Trainees, Specialist International Medical Graduates, and prevocational doctors with the training, assessment, feedback, and support they need to competently and safely perform robot-assisted surgical procedures.

The RoboSET Simulation Skills course, the second in IMRA's curriculum pathway, is endorsed by RACS. The endorsement started in November 2023 and was launched with a coordinated promotional program from both parties.

The RACS and IMRA Advisory Committee will convene in 2024 to advise on the deployment and promotion of medical robotic surgery. The Advisory Committee will report to the RACS Council through the Education Committee.

Skills training

In 2023, we delivered 135 courses with 2291 participants.

Our invaluable volunteer instructors of the College filled 1316 teaching positions through the year, which was a 10 per cent increase of volunteer time compared to 2022. Without the highly appreciated contributions of our instructors, we wouldn't be able to keep running these essential courses and we thank them for their dedication to the ongoing training.

Prevocational doctors

In 2023 RACS supported more than 450 JDocs subscribers and continued to promote the JDocs Framework to prevocational doctors.

A prevocational strategy day was held in February 2023 to develop a vision and strategic plan to guide our future approach and commitment to prevocational training.

We had two prevocational doctors on the Prevocational and Skills Education Committee to facilitate mutual understanding and enhance communication among their peers.

We improved subscriber experience with updated eLearning modules, resources, processes, and systems.

We supported approximately 20 GP Trainees to complete e-modules as part of their alternative training model at the Royal Australian College of General Practitioners.

RACSTA update

RACS Trainees Association (RACSTA) continued to represent and advocate for the interests of Trainees across nine surgical specialities.

The increase in training fees was a central focus for RACSTA who worked with the College to minimise the impact on Trainees. RACSTA was pleased that their advocacy for the uncoupling of the Fellowship exam was supported and will take effect from 2025.

Leave portability and relocation costs have remained a focus for RACSTA. This agenda has been taken up by the College who will work with other medical colleges to raise these matters with state, territory, and national governments. Both the Fellowship exam uncoupling and relocation have been major advocacy issues for RACSTA from 2021 to 2023.

Dr Shiv Karan Chopra (Plastic and Reconstructive Surgery Trainee) was the 2023 John Corboy Medal recipient. This medal is the highest award given to a Trainee at RACS and recognises a Trainee who has embodied outstanding leadership, selfless service, tenacity, and service to Trainees of the College.

The RACSTA Induction Conference was held virtually in November 2023 and was attended by 117 incoming Trainees.



RACSTA committee members

Professional development

During 2023, the professional development department together with faculty and state, territory and Aotearoa New Zealand offices delivered 70 activities via face-to-face, webinars and online learning to 753 participants (546 Fellows, 50 Trainees, 56 SIMGs and 101 non-members). In addition, the Operating With Respect (OWR) e-module was completed by 703 participants and Introduction to Operating with Respect by 104 participants.

As part of the RACS *Building Respect, Improving Patient Safety Action Plan*, nine Foundation Skills for Surgical Educator (FSSE) courses were delivered in 2023.

We delivered 11 OWR courses across Australia and Aotearoa New Zealand in 2023.

During 2023, 38 faculty members donated their time to deliver more than 41 professional development activities—equating to 500 volunteer teaching hours.

During the year, the Academy of Surgical Educators (ASE) conducted six Educator Studio Sessions (ESS) webinars with 163 attendees.

The Academy of Surgical Educators (ASE) also conducted three Online Journal Club (OJC), with 45 attendees. This gave the attendees opportunities to discuss the latest surgical education literature among peers and is an innovative method for translating knowledge into practice.

During 2023, we moved the Difficult Conversations with Underperforming Trainees to an online delivery and two courses were held with 17 surgeons completing the course.

Identifying and Addressing Microaggressions was launched in August 2023, and 33 surgeons completed the course.

A new microlearning activity was launched in mid-December 2023 and 15 surgeons completed the course. Associate Professor Susan Neuhaus presented the topic, 'No Profession for a Lady: the Pioneering Women Surgeons of Australia and Aotearoa New Zealand'.

Introduction to Operating with Respect was launched in August 2023 and is available to all RACS members for free and to non-members for a fee. This course replaces the Operating with Respect eModule and includes revised and additional content, including microaggressions. In 2023, the Introduction to Operating with Respect was completed by 104 surgeons and aspiring surgeons.

Educator of Merit

Every year, the Academy of Surgical Educators presents the Educator of Merit award to recognise the exceptional contribution by our surgical educators.

Educator of Merit – Supervisor of the Year (by region)

Dr Magdalena Biggar	Aotearoa New Zealand
Dr Simon Chong	Aotearoa New Zealand
Dr Trafford Fehlberg	New South Wales
Dr Eric Levi	Western Australia
Dr Timothy Makeham	Australian Capital Territory
Dr Nicola Slee	Queensland
Dr Sabu Thomas	Western Australia
Dr Catherine Thoo	Tasmania

Facilitator and Instructor of the Year Award

Dr Gregory Keogh	New South Wales
Dr Alex Wurm	South Australia





Building Respect, Improving Patient Safety

We continued our work to promote the Building Respect, Improving Patient Safety initiative. Key areas of focus included gender equity targets, partner collaborations, and elimination of racism, sexual harassment, and bullying.

Our gender equity targets have been refreshed to improve and strengthen the diversity of our profession over the next five years, by boosting the number of women in surgery.

RACS updated 2027 gender equity targets introduce a 40:40:20 gender concentration and apply across our two existing areas of focus—more women SET Trainees and more women in RACS leadership roles—including on RACS Council, RACS major committees, and in leadership roles across the College. By 2027, the Council would like to see 40 per cent of Trainees selected to be women, 40 per cent to be men, and 20 per cent to be any gender.

RACS is encouraging the adoption of specialty-specific targets to help the College community reach profession-wide targets.

We also launched a fact sheet on racism titled *Recognising and Responding to Racism in the Workplace*. Eliminating racism is central to a culture of respect and this document outlines the RACS position.

Research conducted with College members indicates that sexual harassment is still an issue in surgery, just as it is in the wider workforce. RACS complementary eLearning course *Recognising and responding to sexual harassment* provides actionable guidance when encountering sexual harassment in the workplace. Supplementary eLearning courses will be available in 2024.

We have also partnered with the Royal Australasian College of Medical Administrators (RACMA) auspiced project A Better Culture to find ‘tangible solutions to cultivate a systematic and sustained behavioural change across the specialist medical sector.’

By engaging with a dynamic coalition of professionals from across the health sector A Better Culture can change the structural roots of discrimination, bullying and sexual harassment in healthcare. RACS hopes to be a key leader in supporting the pragmatic work done by A Better Culture.

Progress in these spaces will be monitored through annual reporting, including on actions taken to improve the culture of respect within surgery.

Update on Green College Guidelines

The Lancet Commission on Climate and Health has previously called for the healthcare community to take a leadership role in advocating for emission reductions, and to critically examine its activities with respect to their effects on human and environmental health.

RACS supported these calls and in recent years the environmental sustainability of surgical practice has become an advocacy priority for the College. This includes the ongoing work of the Environmental Sustainability in Surgical Practice Working Party (ESSPPW). In November 2022 RACS was the first medical college in Australia to sign up to the [Green College Guidelines](#).

The guidelines provide guidance to medical colleges on how we can reduce the carbon emissions of our organisations by incorporating practical changes into the way we operate.

Given the guidelines impact on multiple areas of service delivery across RACS, the ESSPPW is developing a project plan for engaging internally within the College. It will work with staff and Fellows to identify which areas of the guidelines the College has completed, which areas we can realistically adopt over the next 12 months, and areas that will need to be considered longer term goals.

Enhancing member value

Scholarships and grants

Scholarships and grants, under the governance of the ANZ Scholarship and Grant Committee (ANZSGC), had a successful year, overseeing the invoicing, reports, and compliance for 65 scholarships and grants.

Applications for the 2024 Research Scholarship and Learning and Development Grant Program opened on 26 April and closed on 31 May 2023. On offer were six research scholarships valued at \$595,640 and 17 learning and development grants (of which multiples were available in some cases) valued at \$297,500. A total of 82 high-

quality applications were received and reviewed through the online platform, RACS Unlock. From these, three scholarships (valued at \$370,000) and 20 grants (valued at \$250,500) were awarded based on reviews provided by the ANZSGC members and many volunteer Fellows.

Information on the successful scholars and grantees were published in *Surgical News*. Recipients provided us with short videos outlining how their grant or scholarship would help them in their surgical journey.

Specialist International Medical Graduates

In 2023, the Specialist International Medical Graduates (SIMGs) team in Australia saw significant growth across all SIMG applications, including an increase in SIMGs starting their specialist pathway to Fellowship.

RACS received 78 specialist assessment applications and held 60 interviews with SIMG applicants in a virtual environment. The virtual interviews led to improved accessibility and reduced costs for SIMGs completing their specialist assessment application.

Thirty-seven SIMGs started their clinical assessment as part of their specialist pathway to Fellowship, and 27 SIMGs were admitted to RACS Fellowship in 2023.

Additionally, 351 short-term training applications were received and processed—a combination of new applications and extensions to current placements, resulting in a 24 per cent increase from the 2022 applications.

The RACS pilot workplace-based assessment tool, External Validation of Professional Performance (EVOPP), continued with a further three pilot EVOPP assessments completed.

SIMGs in Aotearoa New Zealand

We conducted a review of the current SIMG process and timeframes, which remain out of the timeframes set by the Medical Council of New Zealand (MCNZ). We moved to a new cloud-based platform for all applications and moving to paperless as much as possible to stop the delays in printing and posting to assessors. This will take some time as we train new assessors and undertake the training for the new platform and change in time requirements for



Urologist Dr Lodewikus (Wikus) Vermeulen gave up a lucrative but hectic private practice in South Africa and moved his family to a slower-paced life working in a public hospital in Tauranga. After 18 months of supervision, Dr Vermeulen is now fully registered to practice in Aotearoa New Zealand and is seeing opportunities to innovate and bring positive change to the health system in his adopted homeland.

SIMG processes. In line with these changes, we have been recruiting a new deputy censor role that will allow RACS 12 additional days annually for SIMG interviews. We will continue to refine and review the process throughout the changes and liaise with MCNZ to ensure a smooth transition and robust processes.

Working with specialty societies

RACS collaborates with 13 specialty surgical societies and associations to deliver training across nine surgical specialties. The surgical training committees are supported by the College and society staff to support the pro bono efforts of the Fellows in delivering excellence in surgical training.

The outstanding efforts of our training committees and surgical supervisors are evident in the 2023 Medical Board of Australia's Training Survey:

- › Eighty-five per cent of Trainees surveyed rated the quality of their clinical supervision as excellent/good.
- › Ninety per cent rated the training program relevant to their development as excellent/good.

The College acknowledges the ongoing and outstanding efforts of our 13 surgical training partners in 2023:

- › Australian and New Zealand Society of Cardiac and Thoracic Surgeons
- › General Surgeons Australia
- › New Zealand Association of General Surgeons
- › Neurosurgical Society of Australasia
- › Australian Orthopaedic Association
- › New Zealand Orthopaedic Association
- › Australian Society of Otolaryngology Head and Neck Surgery
- › New Zealand Society of Otolaryngology Head and Neck Surgery
- › Australian and New Zealand Association of Paediatric Surgeons
- › Australian Society of Plastic Surgeons
- › New Zealand Association of Plastic Surgeons
- › Urological Society of Australia and New Zealand
- › Australian and New Zealand Society for Vascular Surgery

There are more than 50 surgical societies and associations supporting the profession across Australia and Aotearoa New Zealand. Surgical societies and associations are engaged in research, training, advocacy and supporting the profession.

Continuing Professional Development

After several years of change to the Continuing Professional Development (CPD) program requirements, 2023 was a year of consolidation. With the program requirements and technology in place, there was an increased focus on delivering activities and tools which included the following:

CPD Plan online

A refreshed CPD Plan was developed to support participants to meet this core requirement of the CPD standard.

Renewal of Endoscopy Skills and Training (REST) pilot program

The REST program was established to support endoscopists to meet the certification criteria set out in the Colonoscopy Clinical Care Standard. Following its launch, the program was soon operating at capacity with participants from Victoria, Queensland, New South Wales and Western Australia.

Trauma Symposium - e-mobility

In partnership with the Jamieson Trauma Institute, the symposium, which was held in November in Queensland, brought together stakeholders from medicine, emergency services, academics and road safety organisations to explore current perspectives and future direction for the e-mobility devices.

Understanding Te Tiriti online course

To support surgeons in Aotearoa New Zealand to upskill in the 10th surgical competency—cultural competence and cultural safety—RACS worked with Groundwork to offer a self-paced, online Te Tiriti workshop that provides a succinct and powerful insight into Te Tiriti o Waitangi - Treaty of Waitangi (Aotearoa New Zealand's founding document), covering: pre-treaty relationships; the treaty itself; colonisation and its impacts, and current Te Tiriti issues.

Gender equity and diversity

The Women in Surgery Section of RACS implemented a comprehensive six-part webinar series focused on cultivating leadership skills for women. The webinars are accessible to all members on the [RACS website](#).

A breast feeding policy was finalised and efforts are ongoing to review the Provision of Facilities and Support for Parents of Infants attending RACS Activities Policy. We also started working on a return to work policy.

The Women in Surgery Essay competition was successfully held once again. This event provided an opportunity for Dewi Ang, a medical student from the University of Western Australia, whose winning essay addressed the topic: Is seeking gender equality in surgery enough, or should we be seeking equity? Dewi Ang was granted the opportunity to attend the RACS ASC in 2023.

Research, audit and academic surgery

The Australian Safety and Efficacy Register of New Interventional Procedures – Surgical (ASERNIP-S) team completed three internal projects with more planned in 2024.

Four projects are ongoing in collaboration with the RACS education department. These were funded by Specialist Training Positions (STP) and the Flexible Approach to Training in Expanded Settings (FATES) programs of the Australian Department of Health.

The *Asynchronous Video-based Coaching to Improve Surgeons' Non-technical Skills in Rural Setting* project funded by STP was extended and due for completion in September 2024.

Another STP project *Rural-facing Surgical Curriculum eLearning Module Phase 1: Needs assessment* is also ongoing and due for completion in June 2024. The *Rural Accreditation to Address Barriers to Rural Practice* project, funded by the FATES program, was completed and is currently under internal review before finalisation.

Seventeen externally funded projects were completed in 2023, with a further 11 to be finalised in 2024. Key stakeholders included the Austrian Institute for Health Technology Assessment, Medical Services Advisory Committee (MSAC), the Swiss Federal Office of Public Health (FOPH), the Singapore Agency for Care and Effectiveness (ACE), and the National Heart Foundation (Australia). MSAC appointed ASERNIP-S to its panel for health technology assessment and support services for a further three years. As part of this engagement, ASERNIP-S was awarded to perform conformity assessment services for medical devices to the Therapeutic Goods Administration (TGA).

The Australian and New Zealand Audits of Surgical Mortality (ANZASM) work closely with each department of health in Australia. Eight seminar and webinars were held across the regions in 2023, replacing in-person meetings, and enabling many more participants to attend.

A re-application for Qualified Privilege legislation covering ANZASM for a further five years was successful. Three case note review booklets were produced in 2023. The two themed booklets were on operative management issues and treatment protocol issues.

The Morbidity Audits department supports the Morbidity Audit and Logbook Tool (MALT) for RACS and the BreastSurgANZ Quality Audit for BreastSurgANZ. The Australian and New Zealand Emergency Laparotomy Audit – Quality Improvement (ANZELA-QI) program expanded across Australia with three state governments providing funding, with hospital-based support in the other jurisdictions.

In May, the Developing a Career and Skills in Academic Surgery (DCAS) course was delivered in Adelaide, with funding through the Johnson & Johnson Institute. There were 73 attendees who were surveyed for their feedback on the course. Around 80 per cent of respondents rated the course as excellent, with 60 per cent indicating they would likely pursue an academic career.

The November Annual Academic Surgery Conference, held over two days at the RACS Victorian office, attracted nearly 70 registrants and was sponsored by several partners. The Section of Academic Surgery Program's keynote address, presented by Professor Kasper Wang of the Society of University Surgeons, USA, was titled *Team Science: building strategic collaborations*.

The Surgical Research Society's Friday Program received 64 abstract submissions, resulting in 14 oral presentations and 24 quick-shot oral presentations. Medical students, junior doctors, pre-vocational doctors, SET Trainees, Younger Fellows, and RACS Fellows from Australia and Aotearoa New Zealand were among the presenters. The day's proceedings culminated in the presentation of eight sponsored awards. Professor Wendy Brown delivered the Jepson Lecture titled *Surgical Research – still a comic opera?*

Presentations from ASERNIP-S during 2023 included an international meeting (HTAsiaLink conference – oral and workshop), CTANZ meeting (oral), and 2023 Health Technology Assessment International (HTAi) annual meeting in Adelaide (orals, poster, panel and workshop).

Professor Maddern presented on evidence-based surgery at the RACS Annual Scientific Congress in Adelaide, and at international meetings (HTAi and INAHTA). Topics included hospital based HTA in Australia, HTAi Asia Policy Forum capacity building, and the use of real-world evidence for fast tracking innovation. He also presented at three specialty meetings on new procedures and the use of evidence to improve patient outcomes and value-based care.



Library services

The library completed another successful year. Almost half of Fellows, around 80 per cent of Trainees, and more than 5000 other members used the library. Their use included accessing articles, chapters, and books from many online publications, searching our databases, requesting resources beyond our collection, and asking staff to conduct literature searches for them. Library users come from across all the specialties, ranging from 41 per cent to 62 per cent of the total membership of their respective specialties.

A highlight of the year was the introduction of new reading lists. The new format integrates with Moodle allowing readings connected with courses to be embedded within the course itself, rather than attendees needing to leave the learning environment and head to the library for the materials. This seamless linking gives us more confidence in copyright compliance and the statistics give everyone a better idea of the engagement of those attending courses.

Heritage collections and archives report

We promoted RACS heritage collections during the Royal Historical Society of Victoria's History Month, the National Trust's Heritage Week and by involvement in the Medical History Association of Australia conference.

New boards on anatomy and surgery were created for the RACS building's walkway. The focus was the way anatomy theatres became surgical theatres, and with the advent of antiseptics, developed into the operating theatre.

We also transferred some flip books of previous displays to the large screen in the walkway, providing a rotating visual experience of past displays.

A new display containing amusing reproductions from the *Medical Pickwick*, 1916–1922 was also developed.

The Oral History program, facilitated by Waybackwhen Historians, a consulting company, was completed in 2023. Twenty people were interviewed, and the cohort consisted of a cross section of older Fellows, staff, and Honorary Fellows.

We also catalogued a unique collection of books and articles of anthropologist and anatomist, Frederic Wood Jones who held various chairs of anatomy, including those at Adelaide and Melbourne universities. He was an examiner at the College and was a well-known figure in surgical circles in the 1920s and 1930s.

AoNZ Annual Surgeons' Meeting and awards

The Aotearoa New Zealand (AoNZ) annual surgeons' meeting provided the usual opportunities for education and connection, including an unparalleled chance to advocate for surgical services. *Surgery 2023: Surgical care in health system change* ran from 31 August to 1 September in Te Whanganui-a-Tara Wellington and had a record attendance of 100 delegates across RACS nine surgical specialties. It was themed around the ongoing health sector reforms in Aotearoa and covered topics from robots and technology to health system change and surgical leadership.

The program, which provided a unique opportunity for collaboration, featured leaders of the contemporary health landscape, including surgeons and other clinicians, as well as government health leaders, and public health and policy academics.

During the event, Dr Richard Coutts was presented with the Rural Surgeons Award for his service to rural and regional communities and support of breast screening and trauma care. Dr Scott Bolam, who won the NZ\$2500 Louis Barnett Prize for his research on how obesity may impact on entheses healing after rotator cuff repair, was also recognised at the meeting.





RACS convocation ceremony

RACS Annual Scientific Congress

The RACS Annual Scientific Congress (ASC) was held in Adelaide, South Australia, in May 2023, embracing the theme of 'Equity in Surgery.' The event addressed crucial issues in healthcare and aligned with the 2022-2024 RACS strategic plan's priority 'Serving all communities equitably'.

Championed by Associate Professor Amal Abou-Hamden and Dr David Walters as the convener and scientific convener, respectively, the RACS ASC 2023 focused on health inequalities, sparking discussions on their identification, mitigation, and the influence of cultural backgrounds on healthcare provision. It offered a unique opportunity for self-evaluation among healthcare providers, prompting acknowledgment of personal biases and their impact on judgment and patient care.

With an impressive turnout of 2000 onsite participants, including delegates, industry partners, and accompanying individuals, along with more than 400 on-demand registrants, the RACS ASC 2023 made a significant impact.

The convocation ceremony featured 165 new Fellows, six award recipients and Professor Caroline McMillen, the chief scientist for South Australia, who delivered the 91st George Adlington Syme Oration titled *Surgery, an Epic Work*.

Global participation was notable, with 42 visitors attending from around the world. About 1000 presentations were delivered by more than 700 presenters across 290 sessions. This included 20 daily concurrent sessions throughout the week, advancing diverse perspectives and insights.

The RACS ASC 2023 emerged as a thriving platform for advancing discussion on equity in surgery and brought together a global community. The event's impact on healthcare practices and commitment to its mission were evident throughout, contributing to the ongoing advancement of surgical excellence.

Australian scientific meetings and awards

Events and engagement for many membership organisations have proved challenging post COVID-19, but the RACS Australian state and territory committees strove to provide high quality events to our existing members and prospective members such as medical students and prevocational doctors, highlighting the path and skills required to enter surgical training.

The RACS Tasmanian Committee held an annual scientific meeting in Launceston based around 'Surgical leadership'. The Northern Territory, South Australian and Western Australian committees held a successful tristate conference in Darwin based around the theme of *Trauma, Sustainability and Futility*. The events gave Fellows, Trainees and SIMGs the opportunity to meet and share relevant information and knowledge in a collegial atmosphere.

The committees continued to hold in-person, online and hybrid events aimed at supporting new and younger Fellows, women in surgery, rural surgeons and trauma, the various surgical specialties and the greater surgical community. Several online webinars were also successfully delivered for audiences across Australia.

We also acknowledged surgeons who significantly contributed to the field, community, and patient welfare, advocacy in support of surgery, the dissemination of pertinent and widely used newsletters, provision of member-centric facilities in states and territories, and acting as the public face of RACS in diverse jurisdictions. Crucially, the committees played a pivotal role as intermediaries between RACS and its members, facilitating a seamless exchange of information and serving as advocates for the College.



Serving all communities equitably

Partnering with communities globally

RACS Global Health continued to work collaboratively with ministries of health, hospital teams and other clinical partners to provide greater access to safe and affordable specialist surgery and to build clinical capacity in the Indo-Pacific region.

RACS Global Health would also like to acknowledge the significant contribution of its many surgical volunteers (surgeons, anaesthetists, and theatre nurses) who donate their time, knowledge, and skills through their pro bono work on our global health programs.

Key achievements in 2023 included:

- › 20 volunteer surgical teams were deployed to 11 Indo-Pacific countries including Timor-Leste, Federated States of Micronesia, Fiji, Kiribati, Marshall Islands, Nauru, Solomon Islands, Tonga, Tuvalu, and Vanuatu.
- › RACS volunteer surgical teams performed 1133 patient consultations and 321 surgeries. Surgeries were focused on ear, nose and throat (ENT), paediatrics, urology, vascular, and obstetrics and gynaecology procedures.
- › RACS surgical teams provided vital surgical training and mentoring to 232 clinicians. This training and mentoring comprise practical, on-the-job training and mentoring during surgical procedures and small group training outside of theatre.

RACS supported 20 clinical training courses for 320 Indo-Pacific clinicians. The training focused on delivery of the following courses:

- › Emergency Management of Severe Trauma (EMST)
- › Care of the Critically Ill Surgical Patient (CCrISP)
- › Four-week endoscopy training with Fiji National University (FNU) and Australian & New Zealand Gastroenterology International Training Association
- › Virtual online Training in Surgery with Monash Children's Simulation Centre
- › Advanced Paediatric Life Support with APLS Australia and local APLS training teams
- › Paediatric Life Support with local APLS training teams in PNG and Fiji
- › Generic Instructor Training with APLS Australia.

RACS Global Health facilitated the following scholarships for Indo-Pacific clinicians in 2023:

- › Three clinicians from Bhutan, Indonesia and Nepal were supported to attend RACS Annual Scientific Congress (ASC) in Adelaide.
- › One clinician from Fiji presented the Rowan Nicks Lecture at the ASC.
- › One scholar from Bhutan completed a Rowan Nicks Scholarship in October 2023.
- › One scholar from Thailand completed a Weary Dunlop Boon Pong Scholarship in January 2023.



Samoa, Paediatric surgical trip, 2023

Foundation for Surgery

The Foundation for Surgery is the philanthropic arm of RACS. The Foundation raises funds to support several projects and initiatives to achieve its mission, which is assisting critical surgical need in disadvantaged communities and improving health equity, including supporting research and training that advances surgical practice and patient care.

Our donors generously supported the Foundation for Surgery through 2023 and enabled funding to be distributed to important global health, Indigenous and Māori health programs, and research and scholarships. A new Younger Fellows corpus was also established, which will enable donors to support the continuation of the Younger Fellows Forum and other Younger Fellows activities.

The Foundation for Surgery successfully developed and implemented a new online donation platform, making it easier for donors to donate online. The platform also provides efficient and intuitive reporting for the Foundation for Surgery management team.

The successful Pledge-a-Procedure and End of Year Appeals raised much needed funds to support many critical RACS global health programs.

The Foundation for Surgery thanks its donors for their generosity.



Foundation for Surgery dinner



RACS global health team visit

RACS global health program

Throughout 2023, the Foundation for Surgery supported many of the RACS global health programs including:

- > 19 Visiting Medical Teams (VMTs) were deployed comprising of surgeons, anaesthetists, nurses, audiologists across 13 countries to work in partnership with national clinicians and patients.
- > 1100 clinical consultations were provided with more than 500 patients receiving life changing surgical procedures.
- > 15 nurses from the Pacific region graduated with post graduate certificate degrees in perioperative nursing from the Australian College of Nursing.
- > 18 accredited training courses were provided to 288 national clinicians including Advanced Paediatric Life Support (APLS), Early Management of Severe Trauma (EMST), and Care of the Critically Ill Surgical Patient (CCrISP).
- > 17 Indo-Pacific clinicians received endoscopy training from Australia New Zealand Gastroenterology Training Association and Fiji National University through RACS global health.
- > 500 patients received lifesaving surgical procedures through the work of the RACS global health VMTs working with national clinicians.
- > Six RACS global health scholarships recipients were deployed to Australia to receive specialist training.

The Foundation for Surgery continued to manage the donations for the RACS Scholarships and Grants Program.

- > In October, Mrs Joyce Robertson bequeathed \$2,000,000 towards RACS Scholarships and Grants program.
- > During the year 28 research scholarships and 43 learning and development grants were awarded.



Aboriginal and Torres Strait Islander and Māori Health

The Foundation for Surgery provided funding to the Indigenous Health Committee to coordinate and host the Indigenous Health Hui held in Auckland, Aotearoa New Zealand in March 2023. Information gathered from the Hui will be used to plan future changes that are required to build the Indigenous surgical workforce and address Indigenous health inequities.

During the year, the Foundation for Surgery Committee agreed to continue supporting the Māori Surgical Trainee Academy for a further three years. This will help develop a surgical pathway to increase recruitment of Māori into surgical training, ensure successful qualification, and provide early career support.

The Foundation for Surgery also funded the Indigenous Health Committee to document and produce a video of the Indigenous Health program at the 2023 RACS Annual Scientific Congress (RACS ASC). The video took a narrative approach to capture the significance of the program and will be used for promotional activities.

We continued our involvement in the Specialist Trainee Support Program (STSP) Cross-College Project Group with the Australian Indigenous Doctors Association (AIDA) and other medical colleges committing to increasing the number of Indigenous Trainees and Fellows.

The Foundation continued to support the career development of Indigenous and Māori doctors and awarded:

- › Six scholarships for medical students and junior doctors to attend the RACS ASC in 2024.
- › Two Indigenous and one Māori Research Grants supported by Johnson and Johnson.

In Aotearoa New Zealand the Te Rautaki Māori-RACS Māori Health Strategy and Action Plan was reviewed in 2023 and approved at the final meeting of the Māori Health Advisory Group in November 2023. The main priority for the next three years is Whakatipu - Workforce Development to increase the Māori surgical workforce to ensure parity with the Aotearoa population by 2040, the bicentennial of the signing of Te Tiriti o Waitangi – New Zealand’s founding agreement between tangata whenua (Māori) and the British Crown. Activities include promoting Te Rau Poka - the Māori Surgical Academy to support Māori medical students and graduates on the surgical pathway.

The Kaiārahai/Trainee Liaison Lead, Professor Jonathan Koea and other members of the Maori Health Advisory Group presented at several Pūhoro STEMM Career Expos and are developing a partnership with Te Oranga Medical Māori Medical Students Association.

Following a 2023 business case approval, a part-time administrator for 2024 was funded by the Foundation for Surgery.

Number of new Aboriginal and Torres Strait Islander Trainees:

- › Six Indigenous Trainees.

Te Rautaki Māori: number of new Māori and Pasifika Trainees.

- › 32 Māori Trainees
- › 20 Pasifika Trainees



Reducing rural health inequity

In 2023, the RACS Rural Health Equity Steering Committee demonstrated notable advancements in its strategic initiatives. Active participation in more than 15 stakeholder events underscored the committee's commitment to fostering collaborative discussions.

In August, a senior RACS delegation met with the Northern Territory (NT) Department of Health to discuss progress on the RACS and NT Memorandum of Understanding (MoU). The delegation also met with various health stakeholders including the executive leadership of the Royal Darwin Hospital (RDH), who hosted a tour of RDH and the Menzies Institute, which saw high engagement with Fellows, Trainees, and staff.

The steering committee started work on the development of a diploma of GPs and engaged with the Australian College of Emergency Medicine, the Royal Australian and New Zealand College of Obstetrics and

Gynaecology and the Australian and New Zealand Association of Anaesthetists on their respective specialist skills training programs for GPs.

While work on the Flexible Approach to Training in Expanded Settings (FATES) Rural Accreditation Project continued, RACS was successful in securing a second grant to fund the Rural Training Models project in consortium with the Royal Australian College of Physicians, the Royal Australian and New Zealand College of Ophthalmologists, the Australian and New Zealand College of Anaesthetists, and the Royal Australian College of Medical Administrators.

These achievements stand as significant milestones and affirm the steering committee's unwavering commitment to improving the rural surgical workforce and building sustainable surgical services across Australia and Aotearoa New Zealand.

Aotearoa New Zealand Rural Health Equity Strategy

Rural health inequity is an issue on both sides of the Tasman but how it presents, and the solutions to it, differ across the two countries. The *Aotearoa New Zealand Regional and Rural Health Equity Strategy* was developed to provide specific actions and aims to improve access and delivery to surgical services to the 700,000 New Zealanders who live rurally.

One of those actions is a study, which started in 2023 and is still in progress, to ask the 20 per cent of rural surgeons about the pros and cons of being based outside the metropolitan areas. Another is to promote the 'hub and node' model for rural and regional care. In 2023, the Aotearoa New Zealand National Committee also joined Hauora Taiwhenua – Rural Health Network.

After three years spearheading RACS rural health strategy and advocating for rural health equity, Dr Nicola Hill stepped down in the second half of 2023. Dr Alice Febery, a general surgeon at the hospital in Invercargill stepped into the role.



Younger Fellows

In late 2023, a corpus was established for donations to be made to support the continuation of the Younger Fellows Forum and potentially other Younger Fellows activities. Thanks to the donations we received, along with other sponsorships, the Younger Fellows Forum will run in 2024.

Specialist training program and flexible approach to training in expanded settings

RACS has a successful and ongoing collaboration with the Australian Department of Health and Aged Care (DoHAC), which funds two major programs. These address the need of rural Australians by funding extended to surgical training posts in settings outside the traditional metropolitan teaching hospitals.

In 2023, the Specialist Training Program (STP) supported 69.4 full-time positions across 76 surgical training positions. Of these, 38 positions were based in 25 rural hospitals, one of which was in a private hospital.

Twenty-four surgical posts were based across 10 private hospitals located in metropolitan settings with more than 122 surgical Trainees benefitting from this collaboration in 2023.

Two unique support projects were also funded in 2023. The Asynchronous Video Coaching project aims to improve communication within training settings by giving specific coaching advice to consultants. The Needs Assessment for the Rural-facing Surgical Curriculum will inform the development of an eLearning resource specific to the key elements of the rural surgical curriculum.

In 2023, RACS also collaborated with DoHAC to increase the rural surgical workforce and reduce workforce maldistribution in Australia and Aotearoa New Zealand. DoHAC's Flexible Approach to Training in Expanded Settings (FATES) fund and support surgical training and hospital accreditation in remote central and northern parts of Australia. RACS and Royal Australasian College of Medical Administrators (RACMA) are progressing this research project focusing on identifying barriers and facilitators to accreditation in rural settings, with the aim of developing resources to support hospitals overcome the barriers.

Under 2023 (FATES2), RACS formed a consortium with the Australian and New Zealand College of Anesthetists (ANZCA) Royal Australasian College of Physicians (RACP), RACMA, and the Royal Australian and New Zealand College of Ophthalmologists (RANZCO), to research, develop, implement, and evaluate a pilot project of rural training network in the Northern Territory, with the first Trainees starting in 2025.

FATES 2 will specifically identify rural training networks, rural and remote supervision models, mentorship and orientation in rural settings, and culturally safe outreach initiatives.

Governance

The Royal Australasian College of Surgeons (RACS) is governed by a Council made up of elected and co-opted members representing all surgical specialties and states and territories of Australia and Aotearoa New Zealand (AoNZ).

Sixteen members are elected by the Fellows of Australia, Aotearoa New Zealand and overseas. Nine members of the Council are also elected by the Fellows of their specialty. Councillors are elected or co-opted according to the College constitution.

As members of the governing body of the College, Councillors' duties are those of members of a board of directors. The Council meets three times a year, in February, June and October.

The Council's role is to:

- › set and monitor the College's strategic direction and associated budgets
- › approve policies and monitor their implementation
- › exercise fiduciary responsibility, ensure the College complies with legal requirements and remains solvent.

Council Executive

The Council Executive is responsible for operational oversight in the months between the Council meetings. They met in January, March, April, May, July, August, October, and November.

Members/Office bearers: 1 January – 4 May 2023

- › Dr Sally Langley FRACS – President, Fellowship Elected Councillor
- › Professor Christopher Pyke FRACS – Vice President, Fellowship Elected Councillor
- › Dr Greg Witherow FRACS – Treasurer, Specialty Elected Councillor
- › Dr Adrian Anthony FRACS – Censor-in-Chief, Fellowship Elected Councillor
- › Professor Andrew Hill FRACS – Chair Professional Standards and Fellowship Services Committee, Fellowship Elected Councillor

Members/Office bearers: 5 May – 31 December 2023

- › Associate Professor Kerin Fielding FRACS – President, Fellowship Elected Councillor
- › Professor Owen Ung FRACS – Vice President, Fellowship Elected Councillor
- › Dr Greg Witherow FRACS – Treasurer, Specialty Elected Councillor
- › Dr Adrian Anthony FRACS – Censor-in-Chief, Fellowship Elected Councillor
- › Dr Christine Lai FRACS – Chair Professional Standards and Fellowship Services Committee, Fellowship Elected Councillor

Rotating members: 1 January – 4 May 2023

- › Professor Owen Ung FRACS, Fellowship Elected Councillor
- › Dr Christine Lai FRACS, Fellowship Elected Councillor
- › Professor Mark Ashton FRACS, Fellowship Specialty Elected Councillor

Rotating members: 5 May – 31 December 2023

- › Professor Mark Ashton FRACS, Specialty Elected Councillor
- › Dr Nicola Hill FRACS, Fellowship Elected Councillor
- › Dr Henry Woo FRACS, Fellowship Elected Councillor

Councillors

Members/Co-opted Councillors: 1 January – 31 December 2023

- › Mr Shane Solomon, Expert Community Advisor, Australia (appointed April 2023)
- › Ms Souella Cumming, Expert Community Advisor, Aotearoa New Zealand
- › Dr Nishanthi Gurusinghe FRACS, Tasmanian Fellows Representative
- › Dr Richard Bradbury FRACS, Northern Territory, Fellows representative (took office as a Fellowship Elected Councillor 5 May 2023)
- › Dr Ailene Fitzgerald FRACS, Australian Capital Territory, Fellows representative
- › Dr Justin Parr, RACS Trainee representative

Members/Fellowship Elected Councillors: 1 January – 4 May 2023

- › Dr Adrian Anthony FRACS
- › Professor Deborah Bailey FRACS
- › Dr Ruth Bollard FRACS
- › Dr Jennifer Chambers OAM FRACS
- › Dr Sarah Coll FRACS
- › Associate Professor Kerin Fielding FRACS
- › Professor Andrew Hill FRACS
- › Dr Nicola Hill FRACS
- › Dr Annette Holian FRACS
- › Dr Rebecca Jack FRACS
- › Dr Christine Lai FRACS
- › Dr Sally Langley FRACS
- › Professor Christopher Pyke FRACS
- › Dr Maxine Ronald FRACS
- › Professor Owen Ung FRACS
- › Professor Henry Woo FRACS

Members/Specialty Elected Councillors: 1 January – 4 May 2023

- › Professor Mark Ashton FRACS
- › Associate Professor Andrew Cochrane FRACS
- › Dr John Crozier AM CSM FRACS
- › Dr Mark Dexter FRACS
- › Professor David Fletcher AM FRACS
- › Professor Mark Frydenberg AM FRACS
- › Dr Philip Morreau FRACS
- › Professor Raymond Sacks FRACS
- › Dr Greg Witherow FRACS

Members/Fellowship Elected Councillors: 5 May – 31 December 2023

- › Dr Adrian Anthony FRACS
- › Professor Deborah Bailey FRACS
- › Dr Ruth Bollard FRACS
- › Dr Richard Bradbury FRACS
- › Dr Jennifer Chambers OAM FRACS
- › Dr Sarah Coll FRACS
- › Associate Professor Kerin Fielding FRACS
- › Professor Andrew Hill FRACS
- › Dr Nicola Hill FRACS
- › Dr Annette Holian FRACS
- › Dr Rebecca Jack FRACS
- › Dr Christine Lai FRACS
- › Professor Christopher Pyke FRACS
- › Dr Maxine Ronald FRACS
- › Professor Owen Ung FRACS
- › Professor Henry Woo FRACS

Members/Specialty Elected Councillors: 5 May – 31 December 2023

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- › Associate Professor Andrew Cochrane FRACS
- › Dr John Crozier AM CSM FRACS
- › Dr Mark Dexter FRACS
- › Professor David Fletcher AM FRACS
- › Professor Mark Frydenberg AM FRACS
- › Dr Philip Morreau FRACS
- › Professor Raymond Sacks FRACS
- › Dr Greg Witherow FRACS

Councillors appointed in 2023

- › Dr Richard Bradbury FRACS, NT Fellowship Elected Councillor appointed 5 May 2023.
- › Dr Justin Parr, RACS Trainees Representative appointed 1 January 2023
- › Mr Shane Solomon, Expert Community Advisor appointed April 2023

Councillors retired in 2023

- › Dr Sally Langley FRACS, Fellowship Elected Councillor
- › The Hon Rob Knowles, OAM, Expert Community Advisor (retired December 2022)

Councillors' qualifications and experience



Mr Adrian Anand Anthony

MBBS, MSurgEd, GAICD, FRACS, FASI (Hon)
Senior Staff Specialist and Director
Clinical Training, The Queen Elizabeth
Hospital, Central Adelaide Local Health
Network; Senior Visiting Surgeon,
Regional Health SA, Senior Lecturer

Upper GI Surgery, University of Adelaide; Lecturer in
Surgical Education, University of Melbourne; University of
Melbourne, Graduate Program Faculty; Trustee, Anthony
Superannuation Fund.



Professor Mark Winter Ashton

MBBS, MD FRACS (Plas)

Specialist plastic surgeon, Professor of
Surgery at the University of Melbourne;
Chair of Plastic Surgery at Epworth
Freemasons Hospital; Former Head of
Plastic Surgery at the Royal Melbourne

Hospital; Immediate past president of the Australian
Society of Plastic Surgeons; Invited editor for *The Plastic
and Reconstructive Surgery Journal* in America; Editor in
Chief of the *Australasian Journal of Plastic Surgery*; Invited
Faculty Member of the International Perforator Flap Course
in Belgium; Chairman of the Melbourne Advanced Facial
Anatomy Course; Director of the Taylor Research Lab within
the Anatomy Department of the University of Melbourne;
Board Member, past Chair of the Surgical Committee for
Interplast.



Adjunct Professor Deborah Bailey

MBBS, FRACS

Director Paediatric Surgery Gold Coast
Health Services; Senior Staff Specialist
paediatric surgeon Gold Coast University
Hospital; Adjunct Professor Griffith
University Medical School; Adjunct

Professor Bond University Medical School; Paediatric
Surgery Member Surgical Advisory Committee Qld Health;
Board Directors Pacific Association of Paediatric Surgeons;
VMO Pindara Hospital Ramsay Health.



Dr Richard Ian Bradbury

B.Sc., MBBS, FRACS GAICD

Consultant General Surgeon Royal
Darwin Hospital; Palmerston Regional
Hospital, Gove District Hospital NT; VMO
Darwin Private Hospital; Chair of RDH
Medical Advisory Committee; senior

lecturer with Flinders University for NT Medical Program.



Dr Ruth Caroline Bollard

MBChB, FRACS, FRCS, FRCS (Gen),
MSc GAICD

Consultant General Surgeon; VMO
Ballarat Health Services, St John of
God Hospital Ballarat; East Grampians
Health Service; Director Specialists on

Drummond; Appointed diversity and inclusion Director
Australian Dragon Boating Federation.



Dr Jennifer Lee Chambers

OAM, MBBS (Hons), FRACS, AFRACMA,
GAICD

Senior Vascular surgeon, Port Macquarie
Base, Kempsey and Wauchope District
Hospitals; Conjoint lecturer in Surgery
UNSW Rural Clinical School; Associate of

Hastings Vascular Associates.



Associate Professor Andrew Donald

Cochrane AM, MBBS, FRACS, FRCS (CTH),
B.Comm, MPH, M.Epidemiol, MBA, M.Med.
Admin, M.Surg.Ed, FCSANZ, FACC

Cardiothoracic surgeon at Monash
Health, and Associate Professor in
the Department of Surgery at Monash

University; Visiting cardiothoracic surgeon at Epworth
Hospital, Mulgrave Private Hospital, and St John of God
Hospital at Berwick; Journal sectional editor for the
ANZ Journal of Surgery and for Heart Lung & Circulation;
Chair of the Science and Education Committee of the
Australian and New Zealand Society of Cardiac and
Thoracic Surgeons (ANZSCTS); Convenor of the annual
ANZSCTS Scientific meeting, and member of the Executive
of ANZSCTS; Director and Board member of the National
Cardiac Registry; Member of the ANZSCTS Database
Committee; Board member of Australasian Cardiac Surgery
Research Institution Ltd (ACSRI), which provides financial
governance over the ANZSCTS Database; Board member
of Maluk Timor Australia, an NGO involved in delivery
of primary healthcare in Timor-Leste, member of the
Clinical Governance Committee for Timor-Leste Hearts
Fund; Trustee of the Cochrane-Schofield Charitable Trust;
Recipient of an NHMRC research grant with colleagues
at the Florey Medical Research Institute, Parkville;
Investments held with JB Were and with Morgan Stanley
Smith Barney.



Dr Sarah Helen Coll

MBBS, FRACS, FAOA, GAICD, CIME

Orthopaedic surgeon; James Cook University senior lecturer, Examiner and Entrance Interviewer; Committee Member Far North Lady Doctors Association; AMA Queensland Board

member; Member AMA Qld Committee of Consultants Specialists; Member AMAQLD FRAC; Chair AMAQ Nominations and Remuneration Committee; Treasurer, Pacific International Orthopaedic Association; Director Breadcrumbs 241 Pty Ltd; Director Coll Nominees Family Trust; Vice President of the Australian Federation Medical Women; Peer Messenger Cairns Private Hospital; Panel member - Medical Assessment Tribunal of Queensland Workcover; Cairns Art Gallery Foundation Board Member.



Dr John Anthony Crozier

AM CSM MBBS, FRACS, FRCST (Hon), FACRS, GAICD, DDU (Vasc)

Vascular surgeon; VMO Liverpool Hospital, Sydney; Co-Director National Alliance for Action on Alcohol.



Ms Souella Cumming

BCA, CRMA

Partner KPMG NZ; Board Member & Deputy Chancellor Order of St John in Aotearoa New Zealand; Governor Zonta International NZ.



Dr Mark Anthony James Dexter

BSc (Med), MBBS (Hons 1) FRACS, IFAANS

Neurosurgeon; Head, Department of Neurosurgery, Westmead Adult Hospital and Children's Hospital at Westmead; Associate Professor, University of Sydney; past president Neurosurgical Society of Australasia; Chair, Shunt Registry Committee; Member of Neurosurgical Society of Australasia; MBS Review Committee, Department of Health; Neurosurgical representative, Pacific Islands Project.



Associate Professor Kerin Ann Fielding

MBBS(Syd), FRACS(Orth), FAOA, GAICD

Senior visiting orthopaedic surgeon Calvary Hospital, Wagga Wagga Rural Referral Hospital; Executive Chair Clinical Surgical Training Council for Health Education and Training Institute

of NSW; Clinical leader for Surgical Education, Notre Dame University Wagga Wagga Clinical School; Member NSW Health Department Model of Care Scope of Practice Working Party; Member Australian & New Zealand Hip Fracture Registry Executive; Member Trauma Committee Wagga Wagga Rural Referral Hospital; Expert Peer Reviewer Medical Board NSW; Australian Orthopaedic Association (AOA); AOA Rural health equity working party; Academy of Surgical Educators; AOA CPD Working Party Federal Department Health NMWS Working Group (RACS Rep), SET supervisor.



Dr Ailene Joy Fitzgerald

MBBS, FRACS.

Commander Royal Australian Navy; Chair, ACT Trauma Committee.



Professor David Rowley Fletcher

AM, MBBS, MD, FRACS, GAICD

General and Upper Gastrointestinal surgeon; Emeritus consultant surgeon Fiona Stanley Fremantle Hospital Group (FSFHG); retired Head of Department FSFHG / University Western Australia;

Member Medical Services Advisory Committee; Member Clinical Casemix Advisory Group of IHPA; Member General Surgery Committee Medicare Taskforce; Chair Service Surgical Registrar Employment Advisory Committee HDWA; Advisor Therapeutics Goods Administration.



Professor Mark Frydenberg

AM, MBBS, FRACS, FAICD

Professor, Department of Surgery Monash University; Surgical representative, Federal Council, Australian Medical Association; Academic Director of Urology, Cabrini Institute,

Cabrini Health; Member Urology MBS Implementation Committee, Department of Health; Member Out of Pocket Expenses Reference Group, Department of Health; Member Medical Reference Group, Medibank Private; Director, Peninsula Health; Director, Cabrini Foundation.



Dr Nishanthi Gurusinghe

BSc (Psychology), MBChB, FRACS, PGDip Clinical Education

General surgeon with sub specialist interests in Colorectal Surgery, advanced laparoscopic Surgery, colonoscopy and endoscopy; Director, General Surgeons Australia; Scientific convener combined 2019 GSA/CSSANZ Annual Scientific Meeting and 2019 Colorectal Trainees' Day; Surgical Supervisor of Training, Launceston General Hospital; SEAM committee member.



Professor Andrew Graham Hill

BHB, MBChB GradDip Theol, MD, EdD, FAICD, CFInstD, FCSSL (Hon), FASI (Hon), FASA (Hon), FRCSEd (ad hom), FACS, FRACS, FISS, FRSNZ

President and Governor, ANZ Chapter, American College of Surgeons; Colorectal surgeon; Professor of Surgery; Assistant Dean Faculty of Medical and Health Sciences and Head of the South Auckland Clinical Campus, University of Auckland; Consultant General Surgeon, Middlemore Hospital, Auckland; Past president, International Society of Surgeons, Zurich, Switzerland; Director Ormiston Hospital, Auckland.



Dr Nicola Hill

MB, ChB, BA, MSc, EBHC, FRACS (ORL-HNS), CMInstD

Nelson-Marlborough District Health Board, New Zealand, as consultant otolaryngology surgeon ORL Health Ltd (New Zealand) - director and shareholder; Medical Council of New Zealand contractor for educational supervision; Honorary Lecturer University of Otago; Beneficiary of Kumi Point Family Trust; member of the NZSOHNS Council.



Dr Annette Coralie Holian

MBBS, MSurgEd, FRACS, FAOrthA, GAICD

Full-time staff specialist, Director of Trauma, National Critical Care and Trauma Response Centre, Royal Darwin Hospital; Past president Australian Orthopaedic Association (AOA); APOA Chair of Disaster Preparedness; APOA WAVES, President elect; VPCC Anaesthetic Consultative Group; AVANT: Member National Stakeholder Advisory Committee; Clinical Director Surgery and Perioperative Services, RAAF; Councillor, Asia Pacific Orthopaedic Association; member, Victorian DHHS Perioperative Working Group; Governor, Shrine of Remembrance, Melbourne; Patron, Catalina Flying Boat section, RAAFA.



Dr Rebecca Kate Jack

MBBS, MPhil, FRACS, AFRACMA, GAICD

Director of Medical Services, St Andrews Toowoomba Hospital; Vascular surgeon – VMO St Andrew's Toowoomba Hospital, St Vincent's Toowoomba Hospital, Toowoomba Base Hospital.



Dr Christine Su-Li Lai

MBBS (Adel), DDU, FRACS, FACS, GAICD

Senior Staff Specialist, Breast and Endocrine Surgical Unit, Division of Surgery, The Queen Elizabeth Hospital; Visiting surgeon, Breastscreen SA; Director of The Surgical Precinct; Director Christine Lai Pty Ltd; client of FRAIS Capital.



Dr Philip Neil Morreau

MbChB, FRACS.

Paediatric surgeon Starship Children's Hospital Auckland; senior lecturer, University of Auckland; Kidzhealth; Paediatric Surgical and Medical Specialists Director and shareholder.



Dr Justin Parr

B.SC, MBBS

Registrar/SET Trainee, Department of Plastic and Reconstructive Surgery, Middlemore Hospital, Auckland, Aotearoa New Zealand; Chair, RACSTA.



Professor Christopher Martin Pyke

PhD, FRACS, FACS, FASI(Hon), PGDip Oncoplast Surg, GAICD

Senior Visiting Medical Officer and Stream Lead Surgery and Acute Care Mater Health Services, Brisbane; Chair Foundation for Breast Cancer Care; Board member Breast and Prostate Cancer Association of Queensland; Director CM Pyke Pty Ltd.



Dr Maxine Mariri Ronald

MBChB, FRACS

General surgeon, Whangarei Hospital, Aotearoa New Zealand; Member Perioperative Mortality Review Committee (AoNZ).



Shane Solomon

MA (Public Policy), GAID, CHIA

Director Silverchain Board; Chair, SA Electronic Medical Record Implementation Board; Member, SA Digital Health Board; Chair, Taskforce Ambulance Ramping SA.



Dr Gregory Edwin Witherow MBBS, FRACS GAICD

Visiting Orthopaedic surgeon Hollywood Private Hospital; Observer AOA Federal Board; Member Ramsay Orthopaedic Specialists Advisory Group; Shareholder Ramsay Healthcare, Cochlear, CSL, Orthocel; client of FRAIS Capital.



Professor Raymond Sacks

MBBCh, FCS(SA)ORL, FARS, FRACS

Otorhinolaryngology-Head & Neck Surgery; Professor and Head of discipline of OHNS, Sydney University; Professor of Surgery, Macquarie University; President, Australian Society

of Otolaryngology-Head & Neck Surgery; Member Expert Advisory Committee of Therapeutic Goods Administration and of Prosthesis List Advisory Committees; ENT representative Prosthetics and Devices Committee, Australian Dept of Health and Ageing; Consultant to Medtronic Pty Ltd.



Professor Henry Woo

MBBS, DMedSc, FRACS

Urological surgeon; Head, Department of Urology, Blacktown Hospital; Staff specialist, Western Sydney Local Health District; Professor of Urology, College of Health and Medicine, Austral

National University; Director of UroOncology Chris O'Brien Lifehouse; Board of Directors, Urological Society of Australia and New Zealand (USANZ); Board Director, Australian and New Zealand Uro-genital and Prostate Cancer Trials Group (ANZUP); Board Director Australasian Urological Foundation (AUF); Executive committee member Asian Pacific Prostate Society; Member MBS Urology Review Committee; Associate Editor, *SIU Journal*, Clinical Trial investigator for Prodeon, Zenflow, Boston Scientific, Astellas, Janssen, Olympus, and Myovant.



Professor Owen Allan Ung

MBBS, FRACS, FAICD

Director MNHHS Comprehensive Breast Cancer Institute (CBCI); Professor of Surgery School of Medicine University of Queensland; Senior Visiting Surgeon Royal Brisbane and Women's Hospital

(RBWH); Surgical Treatment and Rehabilitation Service (STARS); Director, Queensland Board of the Australian Medical Association (AMAQ); Director Medical Insurance Australia (MIA); Director Medical Defence Association of South Australia (MDASA); Director, Board of Specialist Services Medical Group; Director MIGA; President, Breast Surgery International.

RACS leadership team



Stephanie Clota
Chief Executive Officer

In November 2023, RACS announced the appointment of Stephanie Clota as its new CEO with effect from 29 January 2024. Stephanie is a highly respected and experienced leader with a remarkable track

record of success in the healthcare and training sectors. She has expertise in strategic decision-making, financial performance, policy and advocacy, and corporate governance. Before joining RACS, Stephanie was serving as the CEO of GPEx, South Australia's leading primary care specialist training and workforce planning organisation. At GPEx, she spearheaded the successful delivery of the Australian General Practice Training program in South Australia and oversaw its transition to a college-led model in 2023. Beyond her operational and stakeholder management acumen, Stephanie has a deep understanding of the healthcare landscape, recognising both the innovations and opportunities that lie ahead, as well as the challenges our College faces.



Etienne Scheepers
Executive General Manager,
Fellowship Engagement

Etienne Scheepers was appointed Executive General Manager, Fellowship Engagement in September 2019. Etienne is an experienced leader who has held

senior roles such as Chief Operating Officer (COO), Deputy Chief Executive and Executive Director in the government and the not-for-profit sectors.

Etienne previously worked in Aotearoa New Zealand at the Waikato and Lakes District Health Boards as well as the South Australian Department of Health, Health Workforce Australia, the South Australian Department for Education and Child Development, and the Department for Child Protection.

Etienne has long experience in health workforce reform and while he was at Health Workforce Australia he developed and implemented a national program of health workforce innovation and reform.



Dominic Chila
Executive General Manager,
Finance and Support Services

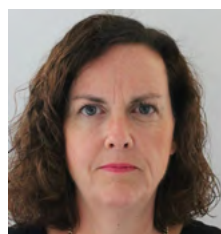
Dominic Chila was appointed Executive General Manager, Finance and Support Services in July 2022. He joined RACS in 2021, as Head of Finance and Risk.

Dominic has more than 25 years of experience in the financial services industry in the areas of general insurance, superannuation, funds management, audit, governance, risk, and legal and finance transformations.

Dominic has held leadership roles including chief financial officer, chief risk officer and company secretary. He has extensive experience working at member-based and not-for profit organisations.

He is a Fellow of the Australian Society of Chartered Public Accountants and a Chartered Secretary.

At RACS, Dominic's focus is on financial services, risk management, contract management, procurement, internal services and RACS Foundation for Surgery.



Deborah Paltridge
(Acting) Executive General
Manger, Education Development
and Delivery and Head of
Education Services (principal
educator)

Deborah Paltridge joined the College in 2008 and has been a surgical and medical educator for more than 22 years.

In 2016, she was appointed the principal educator at RACS and then progressed to head of education services. Deborah has been acting in the capacity of executive general manager of Education Development and Delivery since October 2023. While fulfilling the executive role, she also maintained the role of head of education services (principal educator).

In 2022, Deborah was the recipient of the Honorary Fellowship of RACS award.

Treasurer's report

The Financial Report for the year ended 31 December 2023 is presented together with the Auditor's Report and the voluntary Code of Conduct report for the Australian Council for International Development (ACFID).

Overall performance

The 2023 financial year was one where the Royal Australasian College of Surgeons' (RACS) had to undertake a range of important measures to restore stability to its financial position.

The financial situation of the College was impacted by challenging economic conditions, including inflationary pressures on expenditure, the impact of COVID-19 on education delivery and the strategic investment in the digital transformation. These factors together with prior year operating losses have eroded general reserves leading to a cash flow challenge in the second half of 2023.

Significant effort was undertaken over 2023 to mitigate the impacts on the financial position. Council established the Recovery Committee, comprising the president, vice president and four skills-based external members. A Recovery Plan was implemented to address various issues, both in terms of realigning operations to achieve significant savings through 2023 and measures to achieve an operating surplus in future years. The College's bank loan facility was increased to manage the cash flow demands.

RACS delivered a \$4.1m deficit from operations, including other investment income, in 2023 compared to a deficit of \$10.0m in 2022 and an overall comprehensive loss of \$1.6m compared to a loss of \$12.9m in 2022. The deficit from operations of \$4.1m includes the Foundation for Surgery's scholarship and grants payment program, deployment costs associated with its delivery and investment income to support the program. Positive performance returns of 11.5% (before fees) from the investment portfolio, predominately attributable to the Specific Purpose Trusts held within the Foundation for Surgery, have contributed to the overall result.

The bank loan facility had a balance of \$5m at 31 December 2023 and was fully repaid in January 2024. The facility will continue to be available to assist with seasonality of RACS' cash flows.

Revenue

Revenues from operations were \$64.5m compared to \$61.0m in 2022, an increase of \$3.5m (6%).

Key revenue streams for the year reflect:

- › Subscriptions and entrance fees of \$21.5m (2022: \$19.7m). The increase of \$1.8m (9%) is predominately a result of a 5% percent fee indexation and a 2.2% increase in members to 8,750 (2022:8,565);
- › Training, examination, and assessment fees of \$24.2m (2022: \$22.4m). The increase of \$1.8m (8%) is predominantly due to the first full year resumption of events post COVID-19;
- › Sponsorship and donations of \$4.1m (2022: \$5.2m), a decrease of \$1.1m (21%);
- › Conference registrations of \$2.1m (2022: \$2.1m), on par with last year; and
- › Project income and management fees from external parties of \$9.6m (2022: \$9.3m). The increase of \$0.4m (4%) is due to increased mortality audits and net growth in international programs.

Expenditure

Expenditures from operations were \$74.4m compared to \$72.6m in 2022, an increase of \$1.9m (3%). The increase is impacted by challenging economic conditions, including inflationary pressures, additional costs to run events given this was the first year post-COVID-19, the digital transformation initiatives and activity associated with stabilising the financial position, including redundancies payments.

Key expenses for the year reflect:

- › Personnel costs of \$33.7m (2022: \$33.9m). The decrease of \$0.2m (1%) is driven by a reduction in 'Other Staff Costs' associated with a review of the College Transformation program as well as the net impact of staff redundancies in the second half of 2023;
- › Outsourced service provider costs of \$4.5m (2022: \$4.2m). The increase of \$0.3m (7%) reflects the growth in externally funded programs, both within Australia and internationally and costs associated with the College Transformation program which were scaled back in the second half of 2023;

- › Information systems costs of \$4.3m (2022: \$4.5m). The decrease of \$0.2m (4%) is predominately due to a reduction in software / maintenance licence fees;
- › Travel and accommodation of \$5.5m (2022: \$5.0m). The increase of \$0.5m (10%) reflects inflationary pressures driven by higher fuel and accommodation costs, combined with a full year of post-COVID-19 resumption of activities to deliver services to members, externally funded projects and international programs which are delivered by a pro bono workforce. Recovery initiatives put in place included a review of non-essential travel, travel policy exclusions on business class travel and the use of virtual activities where possible;
- › Audit, legal and professional fees of \$1.3m (2022: \$0.6m). The increase of \$0.7m (116%) relates to net improvements in operating costs and recovery of legal fees from the College's insurer;
- › Utilities and other property costs of \$1.1m (2022: \$1.8m). The decrease of \$0.7m (39%) is due to higher prior year utility prices, repairs and increased cleaning post COVID;
- › Scholarships, fellowships and research grant costs of \$1.8m (2022: \$1.7m). The increase of \$0.1m is due to a full resumption of programs which saw some reduce during COVID-19;
- › Externally funded grants of \$1.0m (2022: \$1.4m). The decrease of \$0.4m (29%) is primarily related to the delivery of services and a review of expenditure as part of recovery activity to manage costs;
- › Facilities hire and catering costs of \$4.0m (2022: \$4.4m). The decrease of \$0.4m (9%) is predominately due to a review of expenditure as part of recovery activity to manage costs; and
- › Amortisation costs of \$3.2m (2022: \$1.6m). An increase of \$1.6m (100%) reflects the continual development and investment in transformation initiatives and digital platforms.
- › Trade and other receivables \$25.4m (2022: \$23.2m), the increase of \$2.2m (10%) largely due to the CPI increase (5%) in billing of Fellows and Trainees annual fees and other receivables;
- › Other current assets of \$4.1m (2022: \$4.1m), on par with the prior year;
- › Non-current other financial assets of \$78.8m (2022: \$73.6m). The increase of \$5.2m (7%) relates to appreciation in investment assets managed within the portfolio aligned to the overall increase in market valuations, and a realisation of investments during the year;
- › Property, plant and equipment of \$55.7m (2022: \$56.2m), the decrease of \$0.5m (1%) being attributable to the net capital improvements to facilities during the year;
- › Intangible assets of \$15.5m (2022: \$14.6m). The increase of \$0.9m (7%) is the result of digital technology investments under the multi-year One College Transformation program;
- › Contract liabilities and other revenue received in advance of \$54.0m (2022: \$52.6m). The increase of \$1.4m (3%) is due to an increase in contract liabilities with grants associated with the Specialist Training Program and RACS Global Health projects;
- › Total lease liabilities of \$19.6m (2022: \$20.7m). The decrease of \$1.1m (5%) is the net movement of interest and lease repayments;
- › Total employee benefits of \$3.9m (2022: \$4.6m). The decrease of \$0.7m (15%) relates to payments made as part of staff redundancies which reduced the overall employee.

Cash Flow

Overall, there was a net decrease in cash and cash equivalents during the year. The key movements reflect:

Financial position

Statement of Financial Position reflects:

- › Net assets of \$120.0m (2022: \$121.8m), the decrease of \$1.8m (1%) being directly related to the comprehensive loss of \$1.8m;
- › The net assets of \$120m include specific purpose funds of \$58.2m (2022: \$64.2m). RACS' net assets, excluding specific purpose funds is \$61.8m (2022 \$57.6m);
- › Cash and short-term deposits of \$22.2m (2022: \$30.4m). The decrease of \$8.2m (27%) is resulting from net cash outflows from operating activities of \$4.3m, outflows for payments of property, plant, equipment and intangibles of \$6.4m, and payments of lease liabilities of \$1.4m. This was funded through the realisation of investments (net) of \$0.5m, investment income of \$5.0m and financing activities of \$5m;
- › Net cash outflows from operating activities of \$4.3m (2022: \$2.5m). The increase in outflows of \$1.8m is due to an increase in payments to suppliers and employees for redundancies;
- › Net cash outflows from investing activities of \$7.5m (2022: inflows \$0.1m). The net outflow is due to lower net proceeds from investments and is offset with a reduction in purchases for property, plant and equipment and intangibles, associated with the One College Transformation program. There were two redemption of funds held on behalf of others (societies) during the year;
- › Net cash inflows from financing activities of \$3.6m (2022: Outflows \$1.2m) and is a result of funds received from loan facility and payments for lease liabilities.

Foundation for Surgery

The Foundation activities encompass scholarships, Fellowships, and research grants as well as direct oversight of RACS philanthropic endeavours. It is Council's strategic aim to commit to an annual funding limit of up to \$2.5m where possible, to maintain RACS as a nationally and globally recognised funding institution for surgical research, global health, indigenous health, and other philanthropic initiatives. RACS provided a number of scholarships, grants and fellowship selections, with \$1.8m being paid in the year (2022: \$1.6m).

Investment portfolio – funding the Foundation for Surgery

A rally in investment markets towards the final quarter of 2023 assisted in the investment portfolio achieving a 11.5% return (2022: -2.7%) contributing positively to the overall entity result. Sound cash income (dividends, imputation credits) within the investment portfolio of \$4.1m (2022: \$4.8m) provides the necessary funding to support the Foundation for Surgery while ensuring that the capital value of the portfolio is maintained long term.

Conclusion

I would like to acknowledge the services of our Honorary Advisers to whom we remain indebted. My thanks to Ms Siobhan Blewitt (Investment Committee), Ms Penny Heard (Investment), Mr Chesley Taylor (Investment), Mr Michael Randall OAM (Investment) and Mr Michael Saba (Investment) for their generous and valued support during the year. We thank our Honorary Advisers for their wise counsel and support. I also thank Graeme Hope from our investment advisors JBWere, who retires after 30 years of performance advice to the College.

I would also like to thank the RACS staff for their ongoing hard work and commitment in 2023.

The stabilisation in the financial position of the College compared to the prior year could not have been achieved without the implementation of the recovery initiatives and support of RACS' members. The College is committed to modernise its governance structure and our approach to financial and risk management to ensure the long-term financial sustainability of RACS.

RACS continues to maintain a solvent financial position and has access to both a bank facility and other financial assets that can be readily converted to cash to ensure it can meet its ongoing financial commitments and obligations.



Dr Greg Witherow

Treasurer

Directors' declaration

Principal Activities

The principal activities of RACS in the year were promoting the study of the science and art of surgery and clinical and scientific research. During the year, there was no significant change in the nature of those activities.

Operating and Financial Review

The total comprehensive loss of RACS for the year, as shown in the Statement of Profit or Loss and Other Comprehensive Income, was \$1,620,232 (2022: income \$12,902,540). RACS is a company limited by guarantee, which has no share capital and is prohibited by its constitution from paying dividends.

No likely developments are anticipated in relation to RACS' future operations.

Significant Changes in the State of Affairs

During the year, there was no significant change in RACS state of affairs other than that referred to in the financial statements or notes thereto.

Events After Balance Sheet Date

There are no matters or circumstances that have arisen since the end of the financial year that have significantly affected or may significantly affect the operation of RACS, the results of those operations, or the state of affairs of RACS.

Indemnification and Insurance of Councillors and Auditors

During the year, RACS paid a premium for a contract insuring the Councillors and Officers of RACS against a liability incurred as a Councillor or Officer to the extent permitted by the applicable laws and regulations. The contract of insurance prohibits disclosure of the nature of the liability and the premium amount.

RACS has not otherwise, during or since the year end, indemnified or agreed to indemnify an officer or auditor of RACS or of any related body corporate against a liability incurred as an officer or auditor.

Members' Guarantee

If RACS is wound up, the Constitution states that each member is required to contribute a maximum of \$50.00 towards meeting any outstanding obligations of RACS.


At 31 December 2023, the number of members was 8,750 (2022: 8,565).

Auditor's Independence Declaration

We, the Councillors as Directors, hereby declare and note that the Auditor's Independence Declaration has been received and follows this report.

Signed in accordance with a resolution of the Directors made pursuant to the *Australian Charities and Not-for-profits Commission Act 2012*.

On behalf of the Directors.



Associate Professor Kerin Fielding

President



Dr Greg Edwin Witherow

Treasurer

MELBOURNE, 22 MARCH 2024

Directors' Declaration

The directors declare that in the directors' opinion:

- (a) there are reasonable grounds to believe that RACS is able to pay all of its debts, as and when they become due and payable; and
- (b) the financial statements and notes satisfy the requirements of the *Australian Charities and Not-for-profits Commission Act 2012*.

Signed in accordance with subsection 60.15(2) of the Australian Charities and Not-for-profit Commission Regulation 2013.

On behalf of the Directors.



Associate Professor Kerin Fielding

President



Dr Greg Edwin Witherow

Treasurer

Councillors' report

The Councillors as Directors of the Royal Australasian College of Surgeons (RACS) submit herewith the Annual Financial Report of RACS for the year ended 31 December 2023. In order to comply with the requirements of the Australian Charities and Not-for-profits Commission Act 2012, the Councillors' report as follows:

Councillors

The names and details of the Office Bearers and the Councillors in office during the financial year and until the date of this report are as follows. Office Bearers and Councillors were in office for this entire period unless otherwise stated. Five Council meetings (February, June, October and two Extraordinary meetings in March and May) and ten Council Executive meetings (January, March, April, May, July, August, November and three Extraordinary meetings in May, July and December) were held in 2023. The number of meetings attended by each Councillor is noted below.

Councillors meeting attendance 2023

		Number of meetings attended		Number of meetings eligible to attend	
		Council	Council Executive	Council	Council Executive
Office Holders					
Dr Sally Jane Langley	President (Jan-May)	2	3	2	3
A/Prof Kerin Ann Fielding	President (May-Dec)	5	7	5	7
A/Prof Christopher Martin Pyke	Vice President (Jan-May)	5	3	5	3
Professor Owen Allan Ung	Rotating Member Council Executive (Jan-May);	5	10	5	10
Dr Gregory Edwin Witherow	Vice President (May-Dec)	5	9	5	10
Dr Adrian Anand Anthony	Treasurer	4	9	5	10
Prof Andrew Graham Hill	Censor in Chief	4	3	5	3
Dr Christine Su-Li Lai	Chair, Professional Standards & Fellowship Services Committee (Jan-May)	5	10	5	10

Councillors meeting attendance 2023 (continued)

	Number of meetings attended		Number of meetings eligible to attend	
	Council	Council Executive	Council	Council Executive
Elected Members of Council				
Professor Mark Winter Ashton	5	8	5	9
Professor Deborah Bailey	5	0	5	0
Dr Ruth Caroline Bollard	4	0	5	0
Dr Richard Ian Bradbury	4	0	5	0
	Co-opted (Jan- May); appointed 5 May 2023			
Dr Jennifer Lee Chambers OAM	5	1	5	1
A/Prof Andrew Donald Cochrane AM	5	0	5	0
Dr Sarah Helen Coll	5	0	5	0
Dr John Anthony Crozier AM CSM	4	0	5	0
Dr Mark Anthony James Dexter	5	0	5	0
Prof David Rowley Fletcher AM	5	0	5	0
Prof Mark Frydenberg AM	5	0	5	0
Dr Nicola Maret Hill	5	6	5	7
Dr Annette Coralie Holian	4	0	5	0
Dr Rebecca Kate Jack	3	1	5	1
Dr Philip Neil Morreau	4	0	5	0
Dr Maxine Mariri Ronald	4	0	5	0
Professor Raymond Sacks	3	0	5	0
Professor Henry Hyunshik Woo	4	7	5	7
Co-Opted Members of Council				
Mr Shane Solomon	3	8	3	8
Ms Souella Cumming	5	4	5	8
Dr Nishanthi Gurusinghe	5	0	5	0
Dr Ailene Fitzgerald	3	0	5	0
Retired Members of Council				
Dr Sally Anne Langley	5	0	5	0
	President (Jan - May) Retired 5 May 2023			
Dr Justin Parr	5	0	5	0
	RACSTA Chair, 1 January 2023 Retired 31 December 2023			

Statement of profit or loss and other comprehensive income

For the financial year ended 31 December 2023

	Notes	2023 \$	2022 \$
Revenue from operations	4(a)	63,702,448	59,991,119
Other income	4(b)	836,776	1,008,413
Total revenue		64,539,224	60,999,532
Personnel costs	5(a)	33,713,399	33,918,033
Associations and library publications		1,794,834	1,798,196
Audit, legal and professional fees	5(b)	1,278,180	661,973
Depreciation and amortisation	5(c)	7,785,852	5,362,603
Facilities hire and catering costs		4,034,538	4,399,892
Grants		977,893	1,376,275
Information system costs		4,322,768	4,498,779
Outsourced service providers	5(b)	4,469,542	4,224,280
Project equipment purchases, hire & repairs		1,067,932	1,146,344
Scholarships, fellowships and research grants		1,805,023	1,664,352
Travel and accommodation		5,496,629	4,990,717
Utilities and other property costs		1,135,149	1,755,573
Other expenses from operating activities	5(e)	6,545,289	6,758,981
Total expenditure		74,427,028	72,555,998
Deficit from operations, external projects and Foundation		(9,887,804)	(11,556,466)
Other income			
Financial asset income		4,091,528	4,774,268
Gain / (loss) on sale of financial assets		553,508	(991,989)
Changes in the fair value of financial assets at FVTPL		1,155,969	(2,262,300)
Total other income		5,801,005	1,519,979
Deficit from operations including other income		(4,086,799)	(10,036,487)
Other comprehensive income			
Changes in the fair value of equity investments and debt instruments at FVOCI		2,437,106	(1,972,880)
Realised loss on equity investments and debt instruments at FVOCI		(71,539)	(892,008)
Exchange differences in translating foreign operations		101,000	(1,165)
Other comprehensive income		2,466,567	(2,866,053)
Total comprehensive income		(1,620,232)	(12,902,540)

The Statement of Profit or Loss and Other Comprehensive Income is to be read in conjunction with the accompanying notes to the financial statements.

Statement of financial position

For the financial year ended 31 December 2023

	Notes	2023 \$	2022 \$
Current assets			
Cash and cash equivalents	6	22,188,050	30,376,959
Trade and other receivables	7	25,375,479	23,161,775
Contract assets	8	909,583	569,147
Inventories	9	19,423	16,557
Other assets	10	4,172,239	4,141,059
Total current assets		52,664,774	58,265,497
Non-current assets			
Trade and other receivables	7	557,012	482,847
Other financial assets	11	78,769,463	73,608,113
Property, plant and equipment	12	55,683,534	56,226,291
Intangible assets	13	15,524,023	14,554,361
Right-of-use assets	14	16,636,143	18,205,087
Total non-current assets		167,170,175	163,076,699
Total assets		219,834,949	221,342,196
Current liabilities			
Trade and other payables	15	5,000,026	4,893,453
Contract liabilities and other revenue received in advance	16	53,987,277	52,557,182
Lease liabilities	14	1,526,363	1,375,777
Loans		5,000,000	-
Employee benefits	17	3,338,634	4,122,373
Funds held on behalf of others	11	11,895,801	16,365,932
Total current liabilities		80,748,101	79,314,717
Non-current liabilities			
Lease liabilities	14	18,106,894	19,369,957
Employee benefits	17	560,050	496,187
Provisions	18	401,508	401,606
Total non-current liabilities		19,068,452	20,267,750
Total liabilities		99,816,553	99,582,467
Net assets		120,018,396	121,759,729
Members' funds and reserves			
Retained surplus		68,189,781	68,940,463
Investment revaluation reserve		13,381,385	14,473,036
Asset revaluation reserve		38,467,331	38,467,331
Foreign currency translation reserve		(20,101)	(121,101)
Total members funds and reserves	3	120,018,396	121,759,729

The Statement of Financial Performance is to be read in conjunction with the accompanying notes to the financial statements.

Statement of changes in members' funds

For the financial year ended 31 December 2023

	Retained Earnings Restated \$	Asset Revaluation Reserve \$	Investment Revaluation Reserve \$	Foreign Currency Translation Reserve \$	Total Restated \$
Balance at 1 January 2022	83,603,917	-	12,710,957	(119,936)	96,194,938
Surplus for the year	(10,036,487)	-	-	-	(10,036,487)
Other comprehensive income	(892,008)	-	(1,972,880)	(1,165)	(2,866,053)
Revaluation increase in property, plant & equipment	-	38,467,331	-	-	38,467,331
Transfer realised gain / (loss)	2,827,062	-	(2,827,062)	-	-
Transfer to/from reserve	(6,562,021)	-	6,562,021	-	-
Balance at 31 December 2022	68,940,463	38,467,331	14,473,036	(121,101)	121,759,729
Surplus for the year	(4,086,799)	-	-	-	(4,086,799)
Other comprehensive income	(71,539)	-	2,437,106	(20,101)	2,345,466
Transfer realised gain / (loss)	3,528,757	-	(3,528,757)	-	-
Transfer translation reserve	(121,101)	-	-	121,101	-
Balance at 31 December 2023	68,189,781	38,467,331	13,381,385	(20,101)	120,018,396

The Statement of Changes in Members' Funds is to be read in conjunction with the accompanying notes to the financial statements.

Statement of cash flows

For the financial year ended 31 December 2023

	Notes	2023 \$	2022 \$
Cash flows from operating activities			
Receipts from operations		77,081,709	78,975,534
Payments to suppliers and employees		(80,392,099)	(80,707,651)
Interest on leases/loans		(1,021,446)	(754,453)
Net cash outflows from operating activities	6	(4,331,836)	(2,486,570)
Cash flows from investing activities			
Payment for property, plant and equipment and intangible assets	12 & 13	(6,387,771)	(9,832,789)
Proceeds from sale of investments		20,550,317	21,665,159
Purchase of investments		(21,030,163)	(17,295,614)
Receipts and repayments of third-party funds		(5,557,322)	(726,360)
Investment dividends, interest and franking credits received		4,957,964	6,147,170
Net cash inflows/(outflows) from investing activities		(7,466,975)	(42,434)
Cash flows from financing activities			
Proceeds from loans		12,750,000	-
Repayment of loans		(7,750,000)	-
Payment of lease liabilities	14	(1,368,622)	(1,197,147)
Net cash inflows/(outflows) from financing activities		3,631,378	(1,197,147)
Net increase/(decrease) in cash and cash equivalents		(8,167,433)	(3,726,151)
Cash and cash equivalents at the beginning of the financial year		30,376,959	34,152,380
Effects of exchange rate changes in the balance of cash held in foreign currencies		(21,476)	(49,270)
Cash and cash equivalents at the end of the financial year		22,188,050	30,376,959

The Statement of Cash Flows is to be read in conjunction with the accompanying notes to the financial statements.



ACFID
MEMBER

ACFID Code of Conduct for the financial year ended 31 december 2022

Information provided under the ACFID Code of Conduct

RACS is a signatory member of the Australian Council for International Development (ACFID). The ACFID Code of Conduct is a voluntary self-regulatory code of good practice that aims to improve international development outcomes and increase stakeholder trust by enhancing the accountability and transparency of signatory members. Information disclosed below is in accordance with the financial reporting requirements of the ACFID Code of Conduct.

Income statement

For the year ended 31 December 2023

International Aid and Development Programs	2023	2022
	\$	\$
Revenue		
Donations and gifts – monetary ⁽¹⁾	81,578	(170,487)
Donations and gifts – non-monetary	501,483	763,823
Grants		
- Department of Foreign Affairs and Trade	2,059,686	2,833,823
- Other Australian Grants	321,636	366,627
- Other Overseas	153,514	216,450
Investment Income	1,134,352	325,883
Other income – International programs	16,751	1,812
Other income – all other RACS activities	66,572,712	58,945,403
Total Revenue	70,841,712	63,283,334
Expenditure		
International Aid and Development Programs		
International Programs		
- Funds to international programs	5,122,413	3,368,550
- Program support costs	1,112,527	1,135,739
Accountability and administration	46,351	28,822
Non-monetary expenditure	501,483	763,823
Total International Aid and Development Programs Expenditure	6,782,774	5,296,934
Other expenditure – all other RACS activities	68,145,737	68,022,887
Total expenditure	74,928,511	73,319,821
Surplus / (deficit)	(4,086,799)	(10,036,487)
Other comprehensive income	2,466,567	(2,866,053)
Total comprehensive income/(LOSS)	(1,620,2324)	(12,902,540)

(1) In 2022, RACS returned funds received for supporting a proposed program in Nusa Tenggara that could not be progressed.

International aid and development programs acknowledgements

RACS Global Health secured a donation to establish the Simon Siu International Travel Grant for Chinese general surgeons to attend the ASC and other relevant conferences.

We take this opportunity to thank our donors:

- › The Australian Government through the Department of Foreign Affairs and Trade
- › The New Zealand Government through the Ministry of Foreign Affairs and Trade
- › The United States Government through the US Agency for International Development
- › Children's First Foundation
- › Novartis.

Our implementing partners were:

- › The Pacific Community
- › Fiji National University
- › Pacific Ministries of Health
- › Australian & New Zealand Gastroenterology International Training Association (ANZGITA)
- › Monash Children's Simulation Centre
- › Advanced Paediatric Life Support, (APLS) Australia
- › Fred Hollows Foundation, Australia.

