



Royal Australasian
**College
of Surgeons**

Annual Report 2022

TABLE OF CONTENTS

1	About RACS
2	2022 highlights
6-7	President and CEO reports
9	Leading a sustainable future for surgery
15	Serving all communities equitably
19	Enhancing member value
24	Operational excellence
28	RACS awards
30	Governance
32	RACS Councilors
36	RACS leadership

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Committed to Indigenous health

Service | Integrity | Respect | Compassion | Collaboration



An experiment in AI.

Throughout this annual report we display RACS images in artistic mediums created by artificial intelligence.

About RACS

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 Asia-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

For more information download our [Strategic Plan \(https://bit.ly/3mlSnHV\)](https://bit.ly/3mlSnHV)

2022 highlights

1657
course participants

Delivered 114 professional development activities in-person, webinars and online learning to 1657 participants (1019 Fellows, 90 Trainees, 83 SIMGs and 465 non-members).

23,780
hours of pro bono teaching

Our volunteer instructors and coordinators filled 1189 teaching spots, which equated to 23,780 hours of pro bono teaching.

430
Fellowship examinees

More than 430 Trainees sat the Fellowship Exam in 2022 – 265 in May and 167 in September. The written component was administered in seven locations across Australia and Aotearoa New Zealand, while the clinical component was administered in three locations in May and two in September.



- Increased the delivery of online professional development programs with 370 attendees over 44 online courses and 538 attending 12 webinars.
- Held 15 Operating with Respect courses.



- Held nine courses on having 'difficult conversations' with underperforming Trainees. The course was attended by 57 surgeons of whom 36 were SIMGs or SET supervisors.
- Launched the Induction for Surgical Supervisors and Trainers, a new online course, designed to provide supervisors and SET trainers with an introduction to their roles and responsibilities. We held six courses with 47 surgeons, including 19 SET supervisors and 10 trainers completing the course.



- Launched an eLearning course to assist Trainees acquire the knowledge and skills to participate in feedback conversations effectively.
- Delivered 129 out of 144 scheduled skills training courses. This was a 90 per cent increase from 35 per cent in 2020 and 55 per cent in 2021.
- Our volunteer instructors and coordinators filled 1189 teaching spots, which equated to 23,780 hours of pro bono teaching.
- Launched the registration module of the events management system in November and processed 1127 participant registrations and payments for the 2023 courses within 24 hours
- Delivered scheduled General Surgical Sciences Examination (GSSE) to 893 candidates and Specialty Specific Examinations (SSE) to 158 Trainees.

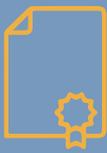


- Delivered three clinical exams, with the February sitting decentralised due to travel restrictions, and the remaining two centralised with record numbers of candidates. In total, 355 candidates sat the exams.
- Received 65 specialist assessment applications and held 50 specialist assessment interviews with SIMG applicants participating virtually from around the world.
- Held three SIMG induction workshops and welcomed 29 new SIMGs on their specialist pathway, and held three online SIMG supervisor induction programs for 29 newly appointed SIMG supervisors.
- Received and processed 282 short-term training SIMG applications, an increase of 28 per cent from the previous year.

799

SET applicants

Received 799 Surgical Education and Training (SET) applications—an increase of nearly five per cent from 2021. The number of women SET applicants increased by one per cent, with women doctors comprising 35 per cent of the applicants. Of the 284 applicants offered a Trainee position in 2022, 31 per cent were women.



- Signed an agreement with the International Medical Robotics Academy and launched the online Foundations of Robotic Surgery course.
- Launched the RACS Building Respect, Improving Patient Safety Action Plan 2022. The plan sets out a new five-year plan for cultural change by investing in leadership, training and education, fostering diversity, and strengthening a feedback culture in surgery.
- Embarked on several infrastructure projects with renovations at the RACS New South Wales office, and the Tasmania office relocated to a new location. Both offices now have more functional facilities for staff and members.

\$1.6m

scholarships and grants

Paid a total of 74 scholarships and grants worth more than \$1.6 million.



- Provided specialist medical education and training to develop local capacity and also health support in 14 countries in the Indo-Pacific region.
- Implemented the US Agency for International Development (USAID) grant and expanded the East Timor Eye Program (ETEP), including implementing a school screening and referral program to enable avoidable blindness and vision support to children.
- Funded a range of global health programs, including developing nine clinical instructional videos, through the RACS Foundation of Surgery.
- Provided Indigenous medical students and junior doctors with two Foundation for Surgery grants, six RACS Annual Scientific Congress scholarships, one medical student career enhancement grant, and five junior doctor grants.

504

Pacific Island Program health workers trained

Trained and mentored 504 health workers, and enabled 6357 medical and surgical consultations, 1809 surgeries and provided more than 50 education resources as part of the RACS Pacific Islands Program (PIP) funded by the Department of Foreign Affairs and Trade (DFAT).



- Secured AUD\$850,000 over two years to fund a project to investigate and address barriers to rural hospitals being accredited to carry out surgical training.
- Launched our first CPD mobile app, providing Fellows with a quick and easy tool to record their CPD activities.
- Successfully gained recognition under the new 'CPD Home' accreditation model established by the Australian Medical Council.

2022 highlights

42%

increase in surgical applications

Experienced a significant increase in applications to Neurosurgery and Plastic and Reconstructive Surgery Australia—42 per cent (2022) compared to 23.5 per cent in 2021.

1264

Trainee specialty enrolments

In 2022, 1264 Trainees were enrolled in one of the nine surgical specialties on a full-time, part-time, or research basis in Australia and Aotearoa New Zealand.

2650

RACS ASC participants

Conducted the RACS Annual Scientific Congress with 2650 participants, including trade and accompanying persons, with approximately 1350 onsite attendees and more than 950 virtual attendees.



- Delivered 42 surgical procedures over three clinical VMT (Visiting Medical Teams) deployments in Fiji, Cook Islands and Nauru.
- Participated in 123 major policy and advocacy meetings, wrote 26 major policy and advocacy submissions, and sent 33 letters to ministers, government departments, and non-government institutions and organisations.
- Continued advocacy on the successful protection of the title 'surgeon' leading to possible future restrictions of the title to those registered in the specialties of 'surgery', obstetrics and gynaecology, and ophthalmology.



- Raised awareness through RACS NSW of the five-year contract available to Trainees, giving them the benefits of maternity leave, accumulated annual leave, and proof of employment for financial loans. RACS and all nine surgical societies have now entered the five-year contract with NSW Health or are in the process of formalising the agreement.
- Signed a Memorandum of Understanding with NT Health, which was facilitated by RACS Northern Territory Committee, and will develop opportunities for Trainees and pathways for SIMGs.



- Successfully implemented a training management platform for Trainees, SIMGs, supervisors, trainers, training boards for the Australian Board of Plastic and Reconstructive Surgery, Board of Paediatric Surgery and Board of Cardiothoracic Surgery.
- Implemented a new events and registration system, which will enable members to register online for events. The new solution also enables payments, refunds, and notification of changes.

COVID-19 update

The COVID-19 pandemic had a significant impact on individuals and communities—disrupting daily life and causing widespread illness and loss of life. It also affected economies and the health systems in Australia and Aotearoa New Zealand.

During the year, we called on the governments in Australia and Aotearoa New Zealand to lift elective surgery restrictions that were in place over the last 18 months. This had led to a growing waiting list for elective surgery in both the public and private sectors.

Lockdowns also had negative impacts on the health and wellbeing of healthcare workers, who were already exhausted and burnt out.

We advocated for the continuation of elective surgery, wherever capacity in the health system allowed. We also called on governments to develop a funded plan to clear backlogs and properly support public hospitals, backed by long-term funding commitments to expand capacity in the public hospital system.

We called for a national plan to address the critical backlog of elective surgeries in the wake of the pandemic. Looking to the long term, we urged the current Australian federal government to work with state and territory governments on a review of national definitions for elective surgery urgency categories and develop a plan for workforce planning and future-proofing health infrastructure.

In Aotearoa New Zealand, we welcomed the Planned Care Taskforce's efforts to address long waitlists for planned surgery and urged the government to move faster and develop a long-term plan to recruit and retain skilled healthcare workers to address shortages in the healthcare sector.

The pandemic highlighted the flaws in our health systems and while governments and healthcare jurisdictions tried to adapt as best as possible to the changing circumstances, we know that the long-term effects of the pandemic on public health, economic stability, and social cohesion are yet to be fully understood and will likely continue to be felt for years to come.

“We advocated for the continuation of elective surgery, wherever capacity in the health system allowed. We also called on governments to develop a funded plan to clear backlogs and properly support public hospitals ...”

In response to reports of adverse outcomes in cosmetic and reconstructive surgery, we launched the *Trust FRACS* campaign to educate the public on the importance of choosing a properly qualified surgeon with specialist surgical training.

President's report



The year-end is an important time to reflect on the progress and challenges we have faced and look ahead to continue our important work towards the RACS vision of advancing surgery and embracing innovation.

The COVID-19 pandemic highlighted the need for reform in our healthcare system to ensure long-term sustainability. We advocated for the consultation of surgeons and other experts in addressing issues such as elective surgery bans, and we were pleased to see our recommendations accepted by governments, allowing for local flexibility in responding to patient needs.

RACS, like many other organisations, experienced two years of interruptions and restrictions caused by COVID-19. We also experienced challenging economic conditions, including volatile global investment markets and inflationary pressures on expenditures as well as other external factors that put pressure on our 2022 financial result.

Pleasingly, the delivery of our service and events has now moved towards COVID-19 normal. The increase in activity

helped improve revenue growth. Despite this positive trend we have to continue to prudently manage our operations to withstand ongoing impacts to our financial position.

Another major achievement was the review of the cosmetic surgery sector by Ahpra and the Medical Board of Australia, following years of advocacy. Our position has always been that Australians deserve the highest standards of care for all surgical procedures, and we were glad to see Australian health ministers announce restrictions on the use of the title 'surgeon' to medical practitioners registered in the specialties of surgery, obstetrics and gynaecology, and ophthalmology. This will help prevent patients from undergoing surgery under false assumptions about the training and qualifications of the surgeon and maintain public confidence in the high standards of our healthcare system.

The legislation will also establish powers to take disciplinary action against those who unlawfully use protected titles in relation to surgery or falsely claim registration or endorsement in cosmetic surgery. However, we remain concerned about Ahpra's proposal for a new area of practice endorsement for cosmetic surgery. To truly protect patients, we believe that surgical procedures should only be performed by properly qualified surgeons with Australian Medical Council or Medical Council of New Zealand accreditation, and this requirement should be mandatory.

In response to reports of adverse outcomes in cosmetic and reconstructive surgery, we launched the *Trust FRACS* campaign to educate the public on the importance of choosing a properly qualified surgeon with specialist surgical training. The campaign provided information on what patients should expect from their surgeons, including qualifications, experience, risks and complications, and facilities.

We were also pleased to announce our collaboration with the International Medical Robotics Academy on training courses for robot-assisted surgery. This partnership supports our surgeons in providing the best care to patients using robot-assisted procedures, which will become more common in the future.

In October 2022, we held a workshop to discuss options for new governance models for the College, considering the separation of governance responsibilities (in the form of the Board) from representative roles (of the Council). We will continue to consider these models in 2023 and will keep you informed of any updates.

On other Council matters, we also considered the findings of the membership category review. The review recommended that the current categories be expanded to encompass those who have committed to a surgical career. Council approved the recommendation that RACS move forward with the categories of Trainee, SIMGs, Fellow and Retired Fellow. While we agreed that the membership categories Fellow and Retired will continue to have voting rights and FRACS postnominal, further discussion is required regarding voting rights and post-nominals for Trainees and Specialist International Medical Graduates (SIMGs).

The year 2023 promises to be another busy one as we implement the many initiatives in our [strategic plan](#) and deliver value for our Fellows, Trainees, SIMGs, specialty societies and the communities we serve in both our countries.

We are grateful for the hard work and dedication of our Council, committee members, specialty societies, Fellows, Trainees, SIMGs and staff, and we look forward to continuing to serve the surgical community in the coming years.

Dr Sally Langley
President

We conducted a comprehensive staff engagement survey in 2022 with a participation rate of 72 per cent. Overall, the feedback was positive, with many staff members appreciating the positive workplace culture we are striving to create and the flexible work options we offer.

CEO's report

The year 2022 was one of significant investment in our organisation. We focused on investing in our people and infrastructure, including digital services and office environments. Our goal was to set up our teams for success and provide the best possible service to our members.

Over the past four years, we have been working to revamp our outdated technology platforms to better meet the needs of our members. In 2022, we successfully implemented three critical technology solutions: a continuing professional development (CPD) mobile app, a training and services platform, and SharePoint Online.

The CPD app, which was launched in October, allows our members to track, manage, and complete their professional development activities from their mobile phone. The feedback from our members has been overwhelmingly positive. The training and services platform allows members to search and register for events. It has been successfully used by our skills training, professional development, examinations, and Australian state and territory and Aotearoa New Zealand teams. We plan to extend this functionality to other teams in our organisation in 2023.

We also made enhancements to the Training Management Platform (TMP), enabling surgical Trainees, trainers, and supervisors from three surgical societies to manage multiple hospital requests and roles as part of their surgical education journey. In 2023, we plan to collaborate with other surgical training boards to further improve the platform.

In addition to our technology investments, we also made significant investments in our office infrastructure. While we had planned to refurbish our Melbourne office, we had to pause the project due to the financial market turmoil. However, we were able to complete the internal demolition of the west wing and remove hazardous

materials. We will be reviewing the future development of the office during 2023 and consider the best cost-effective options. We also refurbished our New South Wales office in Sydney and moved into new premises in Tasmania, providing our staff and members with functional and convenient working spaces.

We conducted a comprehensive staff engagement survey in 2022 with a participation rate of 72 per cent. Overall, the feedback was positive, with many staff members appreciating the positive workplace culture we are striving to create and the flexible work options we offer. However, we identified some areas that we need to develop action plans for in 2023, including learning and development, systems and resources, and vision and communications.

In May, we farewelled our Chief Operating Officer (COO), Emily Wooden, who had been with our organisation for four years and served as my deputy for the past three. Emily played a crucial role in managing our complaints system, implementing our Digital Services strategy, and achieving accreditation for our Global Health program from the Department of Foreign Affairs and Trade. While we were sad to see her go, we were happy for her as she took on a new role as Chief Executive Officer at the Australasian College of Emergency Medicine. Emily's departure gave us the opportunity to review the COO role and restructure our Operations team into two portfolios: Finance and Support Services and College Transformation, under two new Executive General Managers: Dominic Chila and Sendur Kathir, respectively.

Additionally, we restructured our Education portfolio following the departure of Julian Archer, our Executive General Manager for Education. The portfolio was divided into two: Education Development and Delivery and Education Partnerships. Christine Cook was appointed to the role of Executive



General Manager Education Partnerships in January 2022 and Tamsin Garrod took up the role of Executive General Manager Education Development and Delivery in late 2021.

The new executive leadership and the cascading changes downstream better support our strategy and has realigned business functions to portfolios as well as creating career opportunities for staff.

I extend my sincere thanks to all our staff for their dedication and commitment to delivering the best possible services to our valued members.

I also thank our Councillors, committee members, staff and the many Fellows, Trainees and SIMGs who contributed so much to the College's success in 2022.

John Biviano
Chief Executive Officer



Leading a sustainable future for surgery

In 2022, we delivered multiple initiatives that focused on the adoption of new technology, techniques and models that will set up a more sustainable future for the College.

Training management system launched

The Training Management Platform (TMP) was released in February 2022 for the Australian Board of Plastic and Reconstructive Surgery, the Board of Paediatric Surgery, and the Board of Cardiothoracic Surgery.

The TMP was delivered to support a comprehensive, seamless experience for training applications. There are currently 200 Trainees on the TMP and their respective supervisors, trainers, and administrators—approximately 500. The focus of the TMP has been on the development of functionalities and features required by these three boards to deliver their training and assessment programs.

Since the launch of the TMP, there have been five subsequent releases delivering significant features, including:

- Trainee activities and assessments (e.g. workplace-based assessments)
- Entrustable Professional Activities (EPAs)
- Training management tools (e.g. creating rotation-related data)
- Enabling multiple site access for supervisors and trainers.

In 2023, TMP releases will include the following functionalities: case notes, learning plans, Multi-Source Feedback and a Trainee transcript and Trainee journey snapshot reports.

RACS and IMRA robot-assisted surgical training

RACS collaborated with the International Medical Robotics Academy (IMRA) as a leading provider of medical robot-assisted surgery skills training in the health sector.

RACS and IMRA entered into a multi-year services and collaboration agreement to set standards and advance training in the practice of surgery. The organisations share a commitment to providing high-quality training, education, and experience to equip surgeons to meet the needs of patients and the community. The agreement aligns training programs in robot-assisted surgery, set standards for those performing this modality, and provide Fellows, Trainees, SIMGs, and prevocational doctors with the training, assessment, feedback, and support they need to competently and safely perform robot-assisted surgical procedures.

The online Foundations of Robotic Surgery course, endorsed by RACS and launched in September 2022, is the first in a series of IMRA's curriculum pathways. The program was launched with coordinated promotional efforts from both parties. RoboSET, a simulation skills course, is the next course in IMRA's curriculum pathway and will be endorsed in 2023.

The RACS Robot-Assisted Surgery Working Party, which convened in July, also provided information and guidance on the use of robot-assisted surgery and will make recommendations to the RACS Council on how to introduce relevant training into RACS programs.



Building Respect, Improving Patient Safety

During 2022, RACS set the foundations of our ongoing work to building respect in surgery. All efforts focused on strengthening professionalism and civility in our profession and converting awareness of the impact of unprofessional conduct on patient safety into action to prevent it.

[RACS Building Respect Improving Patient Safety Action Plan \(2022\)](#) sets out the next phase of our work. It responds directly to the challenges set by the independent expert advisory group (EAG 2022), which exhaustively reviewed our progress to date and recommended future actions.

The work of the EAG 2022 was informed by the robust evidence base provided by the independent evaluation of RACS work to build respect in surgery, conducted and finalised in 2021.

RACS 2022 Action Plan builds on all the work the surgical community has done so far and continues RACS three big areas of focus: Cultural Change and Leadership, Surgical Education, and Feedback and Complaints. The 2022 Action Plan features collaboration, leadership, and

shared responsibilities with Specialty Societies, hospitals, and others in the health sector.

The challenges we set in the 2022 Action Plan aim to keep pace with community standards and expectations and effect real change.

Community dialogue and expectations about acceptable behaviour and culture have profoundly altered our operating environment and reshaped the wider community. Our colleagues and partners in agencies across the health sector in Australia and Aotearoa New Zealand now share RACS appetite to foster cultural change that better protect patients, is safe for individuals, and enables teams to perform at their best. We are delighted that agencies across the health sector now share our commitment to improving the culture of medicine and in which the culture of surgery plays a critical part.

Collaborations and partnerships are key to our approach because no single organisation can build a culture of respect alone. There are limits to RACS jurisdiction and scope of influence, and many changes can only be developed and implemented

jointly. The Action Plan outlines how we are redoubling our efforts to foster a more diverse and inclusive workforce. Diversity strengthens our profession, by enabling different perspectives to be heard. It fosters cultural safety among surgeons and improves the care we give our patients. Diverse surgical teams are also more cognitively diverse, which improves problem-solving, decision-making, innovation, and bias and blind spot mitigation.

During the year, we continued to integrate our work to building respect in surgery into our routine operations. The priorities and goals set in the 2022 Action Plan are shaping the work and focus of RACS teams. Committees across RACS, led by committed Fellows, Trainees, and SIMGs have aligned their strategic plans to help realise 2022 Action Plan goals. The strategic focus of our College and the priorities of RACS staff are directed to achieving the same goals.

Foundation Skills for Surgical Educators (FSSE) course

The FSSE course sets the standard expected of RACS surgical educators and furthers knowledge in teaching and learning.

In 2022, 151 surgeons completed the 14 courses—nine face-to-face and five online.

An FSSE refresher course was available to those enrolled in the Difficult Conversations with Underperforming Trainees and Promoting Advanced Surgical Education courses. Fifteen surgeons completed the module in 2022.

Operating with Respect (OWR) face-to-face course

This course provides an evidence-based approach to equip surgeons with behavioural strategies and skills to respond to unacceptable behaviour.

We held 15 OWR courses with 161 surgeons completing them.

Speak Up app

This app is designed to complement the OWR course and includes tools to help users structure an informal interaction with a colleague to address behaviour concerns, or a 'cup of coffee conversation' (CCC). Since its launch in 2019, the app has been downloaded 1093 times.

Surgical education

During 2022, the Professional Development department with the support of faculty and our offices around

Australia and Aotearoa New Zealand delivered 114 activities in-person, webinars and online learning to 1657 participants (1019 Fellows, 90 Trainees, 83 SIMGs and 465 non-members).

The COVID-19 restrictions impacted the in-person delivery of courses with 749 attendees at 58 courses. However, we increased the delivery of online programs with 370 attendees over 44 online courses, and 538 attending 12 webinars.

In 2022, 82 faculty members donated their time and delivered more than 98 professional development activities equalling 1600 volunteer teach hours.

Difficult Conversations with Underperforming Trainees

This course was developed after feedback from FSSE participants about the need for more training in conducting a constructive and procedurally fair conversation with a Trainee who, despite feedback, is not meeting required standards.

Surgeons can now opt to attend this course in an online or in-person format.

In 2022, we held nine courses with 57 surgeons completing the course, 36 of whom were SIMG or SET supervisors.

New online courses

Our new online courses included the Induction for Surgical Supervisors and Trainers.

The course is designed to provide supervisors and SET trainers with an introduction to their roles and responsibilities. It also supports them

in providing high-quality education and training to RACS Trainees.

We held six courses with 47 surgeons, completing the course, including 19 SET supervisors and 10 trainers.

Other new online courses are listed below.

Keeping Trainees on Track (KTOT)

The KTOT toolkit is designed to provide surgical supervisors and trainers with the right tools for the right job—to support the development and growth of Trainees. KTOT assists underperforming Trainees get 'back on track'.

We held 11 courses with 81 surgeons completing the course of whom 18 were SET supervisors and 17 trainers.

Trainee feedback

This eLearning course was developed at the request of Trainees to assist them acquire the knowledge and skills to participate in feedback conversations effectively. The course consists of two online modules, which takes an hour to complete.

The course was launched in September and since then three courses have been held with 18 surgeons and 12 Trainees completing it.

In November, we launched the registration module of the events management system and processed 1127 participant registrations and payments for 2023 courses within 24 hours—a spectacular achievement thanks to collaboration and teamwork across the organisation.

Skills training

In 2022, we delivered 129 out of 144 scheduled courses. This 90 per cent delivery rate was a significant increase from the 35 per cent in 2020 and 55 per cent in 2021.

Our volunteer instructors and coordinators filled 1189 teaching positions, which equated to 23,780 hours of pro bono teaching.

The 1945 course places were filled across five programs:

- ASSET: 353 participants
- CCrISP: 368 participants
- CLEAR: 245 participants
- EMST: 784 participants
- TIPS: 195 participants

The courses resolved the COVID-19 backlog, and most of the Trainees completed or were registered for their required courses.

In November, we launched the registration module of the events management system and processed 1127 participant registrations and payments for 2023 courses within 24 hours—a spectacular achievement thanks to collaboration and teamwork across the organisation.

Examinations

The year 2022 saw the return to a pre-COVID-19 examination delivery mode, with the use of patients and surrogates for some specialties, and hospitals as examination venues for others.

In total, 432 Trainees sat the Fellowship Exam in 2022—265 in May and 167 in September. The written component was administered in seven locations across Australia and Aotearoa New Zealand, while the clinical component was administered in three locations in May and two in September.

There was an unusually high number of General Surgery Trainees, most likely due to a backlog caused by COVID-19, so provision was made to hold an additional exam to accommodate the demand. In total, 354 examiners were required for the two exams.

Sixteen examiners retired from the Fellowship Exam and 50 new examiners were recruited.

A new chair of the Court of Examiners was inaugurated at the September Fellowship Exam with an increased number of deputy chairs (two women and two men) in Australia and Aotearoa New Zealand.

At the annual strategy workshop in November, the Court Executive voted to incorporate some improvements and changes to the Fellowship Exam, which will be further explored and implemented in 2023. These will be the first changes made to the Fellowship Exam in almost 10 years.

We successfully delivered the scheduled General Surgical Sciences Examination (GSSE) to 893 candidates and Specialty Specific Examinations (SSE) to 158 Trainees. The Clinical Exam was

successfully delivered three times in 2022, with the February sitting decentralised due to travel restrictions still in place, and the remaining two centralised with record numbers of candidates. In total, 355 candidates sat the exam, an increased number as more specialties mandate the exam as a requirement to get into the surgical education training program.

The Virtual Clinical Exam Pilot Project initiated in early 2022—at the request of Council in response to the COVID-19 pandemic—aims to explore the feasibility and acceptability of delivering exams remotely. It will assist the College in obtaining the necessary skills and knowledge to meet candidate needs should we ever enter a nation-wide lockdown again.

A new committee chair to oversee the GSSE/SSE and Clinical Exams was recruited, with the current chair retiring in mid-2023 after serving in the position for 12 years.



Specialist International Medical Graduates (SIMGs)

In 2022, RACS received 65 specialist assessment applications and held 50 specialist assessment interviews with SIMG applicants participating virtually from around the world.

Three SIMG induction workshops were held to welcome 29 new SIMGs on their specialist pathway, and three online SIMG supervisor induction programs were held for 29 newly appointed SIMG supervisors. SIMGs on this pathway are supported by RACS for up to four years to complete the requirements for Fellowship.

In addition, 282 short-term training applications were received and processed—an increase of 28 per cent from the previous year. The short-term training pathway allows SIMGs to undertake a short period of training in Australia with the aim of gaining professional skills and experience not available in their country of training.

Following a lift in COVID-19-related travel restrictions and access to hospital sites, the pilot of the RACS workplace-based assessment tool, External Validation of Professional Performance (EVOPP), was reinstated in July 2022. An EVOPP assessor training workshop was held in Brisbane, with 10 new assessors trained and three pilot EVOPP assessments completed in October and November 2022.

In Aotearoa New Zealand we submitted 76 pieces of advice to the Medical Council of New Zealand, including advice on 16 preliminary requests (documentation only) and held 33 interviews.

RACSTA update

RACS Trainee Association (RACSTA) continued to represent and advocate for the interests of Trainees who will soon be admitted as members of the College.

The issues around leave portability and relocation costs have been taken up by the College who will work with other medical colleges to raise these matters with state, territory and federal governments. Both matters have been major advocacy issues for RACSTA in 2021-2022.

Dr Amanda Nikolic (General Surgery Trainee) was awarded the John Corboy Medal at the RACS ASC Trainees' dinner in May. This medal is the highest award given to a Trainee at RACS and represents a Trainee who has embodied outstanding leadership, selfless service, tenacity, and service to Trainees of the College.

The RACSTA Induction Virtual Conference held in November was well attended by 99 incoming Trainees.

Surgical Trainee update

In 2022, 1264 Trainees were enrolled in one of the nine surgical specialties on a full-time, part-time, or research basis in Australia and Aotearoa New Zealand.

All specialty training boards undertook selection for Surgical Education Training (SET) in 2022 and 799 applications were received—an increase of nearly five per cent from 2021. Women SET applicants increased by one per cent, with women doctors comprising 35 per cent of the applicants. Of the 284 applicants offered a Trainee position in 2022, 31 per cent were women.

Neurosurgery and Plastic and Reconstructive Surgery Australia had a significant increase in applications—42 per cent (2022) compared to 23.5 per cent (2021).

Prevocational doctors

Throughout 2022, we promoted the JDocs Framework and ePortfolio and supported more than 450 subscribers.

RACS Australia and Aotearoa New Zealand. These included a range of events, including workshops designed to prepare prevocational doctors applying for SET and or awards and networking events where junior doctors met Trainees and Fellows.

We also participated in events for junior doctors hosted by universities and the Australian Medical Association (AMA), and Australian Medical Students Association (AMSA) National Conference.

The Australian Indigenous Surgical Pathway (AISP) working group continued to support First Nations junior doctors who were interested in a career in surgery by covering the cost of the JDocs subscription.

The completion of JDocs Key Clinical Tasks and the RACS Aboriginal and Torres Strait Islander Cultural Safety Course (modules 1 and 2) were included in the resume scoring component for selection into the Vascular Surgery SET program.



Serving all communities equitably

During the year we fostered partnerships across communities, locally and globally, to build sustainable surgical services; championed equity in Aboriginal, Torres Strait Islander and Māori healthcare outcomes, delivery and education; continued to focus on rural health inequity; and championed patient-centred and sustainable healthcare.

Global Health update

The RACS Global Health department restarted the implementation of Visiting Medical Teams and continued expansion of its health, emergency response, and development programs. This was possible with the critical support of our in-country office in Timor-Leste, strong regional partnerships across the Indo-Pacific, and the expertise of our specialty coordinators and pro bono specialist volunteers.

RACS Global Health's vision is that safe, affordable surgical and anaesthetic care is available and accessible to everyone.

The RACS Global Health team engages specialised surgical, medical, and allied health personnel who donate their time and services to deliver the global health program. Through our partnerships with Asia-Pacific neighbours, we provided specialist medical education, training and capacity development, and health development support to 14 countries in the Asia-Pacific region.

Timor-Leste

Throughout 2022, RACS Global Health Timor-Leste country office implemented the US Agency for International Development (USAID) grant. This enabled the expansion of the East Timor Eye Program (ETEP) and the implementation of a school screening and referral program to enable avoidable blindness and vision support to Timor-Leste's children.

Our team implemented the Australian NGO Cooperation Program (ANCP) with a focus on establishing the Hospital National Guido Valdares (HNGV) Paediatric Critical Program with accredited Advanced Paediatric Life Support

training and equipment provided on an ongoing basis. The multi-year Australian Timor-Leste Program of Assistance for Secondary Services (ATLASS Phase II) partnership with HNGV ended after more than 10 years of implementation. The evaluation and findings will be shared with the Australian and Timor-Leste governments.

Pacific Islands Program

The Pacific Islands Program (PIP) funded by the Department of Foreign Affairs and Trade (DFAT) delivered excellent results with more than 504 health workers trained and mentored. An independent program evaluation of the PIP found the program had successfully implemented:

- 138 from the Visiting Medical Teams
- 6357 medical and surgical consultations
- 1809 surgeries
- Provided more than 50 education resources.

The program deployed 254 RACS volunteers engaged in program activities and direct service delivery. The program was completed in September 2022 and RACS Global Health began the new Pacific Specialised Clinical Services & Health Workforce Program (PSCHWIP) 2022 – 2026. This program continues in partnership with The Pacific Community (SPC) and Fiji National University.

Global Health Forum

RACS hosted the 2022 Global Health Forum with 20 organisations, associations, colleges and regional partners represented. All the partners have a common interest in global health and developed the impact statement that our collective purpose was to 'Support

sovereign Pacific Island countries to achieve their ambitions for improving the health and wellbeing outcomes of Pacific families and communities, including vulnerable and hard-to-reach groups'.

Foundation for Surgery

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

There were many challenges that impacted donors' ability to donate. Some of them were the ongoing effect of COVID-19, rising costs of living, increased interest rates, and natural disasters. Despite these challenges, our donors continued to support the Foundation and have enabled funding to be distributed to important global, Indigenous and Māori Health programs, and research and scholarships.

The Foundation developed a new Strategic Plan for 2022-2024, which is in line with the overall goals of the RACS Strategic Plan for 2022-2024. The strategic plan will ensure the development of a more user-friendly digital platform to enable an efficient and easier way of donating; reducing the use of paper for direct mail campaigns therefore reducing costs and becoming more environmentally sustainable; reaching a wider range of philanthropic projects being undertaken throughout RACS; and increasing communications with the donors.

Aboriginal and Torres Strait Islander and Māori health

The Foundation for Surgery facilitates long-term change by addressing some of the cultural, social and economic barriers to Aboriginal and Torres Strait Islander and Māori people being over-represented in the determinants of poor health.

We work to enhance recognition and awareness of Aboriginal and Torres Strait Islander and Māori health issues, promote excellence in care, and improve understanding of culturally appropriate treatment through education and advocacy.

Several scholarships and grants created from donations to the Foundation assisted Aboriginal and Torres Strait Islander and Māori Trainees and Fellows in their surgical endeavours.

Global health

The funds raised by the Foundation for Surgery enabled several activities through the Global Health programs including:

- Forty two surgical procedures delivered over three clinical VMT (Visiting Medical Teams) deployments in Fiji, Cook Islands and Nauru.
- Nine clinical instructional videos developed
- Surgical simulation training project PIVOTS piloted in partnership with the Monash Children's Hospital
- Enabled four surgeons to undertake post graduate training from the Pacific region at Fiji National University.

- RACS, in collaboration with Australian College of Perioperative Nurses (ACORN), supported the Pacific Island Operating Room Nursing Association (PIORNA) in developing the Standards for Perioperative Nursing in Pacific countries and territories; online modules were also developed to support these standards
- Directors of Clinical Services (DSC) and Pacific Heads of Nursing and Midwifery (PHONM) attended meetings and made presentations in Fiji
- PIP Partner Reflection workshops held in Fiji to reflect on the previous phase of the program
- Two refurbished Zeiss microscopes donated to Baucau and Maliana Hospital (Timor-Leste)
- Baseline report conducted for the Paediatric Critical Care Capacity Building project (PNG and Timor-Leste); briefing conducted with stakeholders in both countries

Aboriginal, Torres Strait Islander and Māori health

The year 2022 was a busy and productive year for the RACS Indigenous Health portfolio.

Dr Ben Cribb started his tenure as Chair of the Indigenous Health Committee.

The year also saw a return to face-to-face engagement. The Indigenous Health team attended the first Australian Indigenous Doctors Association (AIDA) Conference since 2019—supporting the event as a gold sponsor and hosting skills and information sessions throughout the week.

RACS awarded multiple grants and scholarships to support education and training activities for Indigenous medical students and junior doctors, including:

- two Foundation for Surgery grants
- six RACS ASC scholarships
- one Medical Student Career Enhancement grant
- five junior doctor grants.

RACS continued to deliver cultural competency and safety education sessions to the Specialty Training Boards, and there has been an uptake of the online training modules supporting the implementation of the RACS 10th Competency. More than 500 Fellows and Trainees have completed the Cultural Competency and Cultural Safety training since the launch of the program in 2019.

In 2022, RACS joined a Specialist Trainee Support Program (STSP) Cross-College Project Group with the Australian Indigenous Doctors Association (AIDA) and other medical colleges. The initiative is funded by the Department of Health under the Flexible Approach to Training in Expanded Settings (FATES). It measures and aims to increase the number of non-GP Aboriginal and Torres Strait Islander medical specialists through the development of support programs and pathways.

By the end of 2022, there were six Aboriginal and Torres Strait Islander and 30 Māori Trainees in the surgical education training program.

Reducing rural health inequity

RACS advocates for all communities to have equitable access to quality healthcare, irrespective of geography. The RACS Rural Strategy aims to improve health equity for remote, rural, and regional people in Australia and Aotearoa New Zealand. The strategy aims to:

- increase the rural surgical workforce and reduce workforce maldistribution, through the Select for Rural, Train for Rural, and Retain for Rural strategies
- build sustainable surgical services in Australia and Aotearoa New Zealand, through the Collaborate for Rural strategy.

An important part of the current strategy is to support remote central and northern parts of Australia. A Memorandum of Understanding (MoU) was signed between RACS and the Northern Territory Department of Health in May 2022, to focus on supporting the delivery of sustainable surgical services in the Northern Territory by:

- facilitating the establishment of an environment and structures to support the training of an Australian qualified workforce locally trained in the Northern Territory
- training Indigenous surgeons and improving Indigenous health outcomes
- recognising the roles of SIMGs and supporting them
- retention of the workforce in the Northern Territory.

To address one of the aims of the RACS Rural Strategy, RACS submitted a funding proposal under the Australian Government Department of Health Flexible Approach to Training in Expanded Settings (FATES) funding scheme. The project 'Rural Accreditation – Addressing Barriers to Specialist Training' was developed in consortium with the Royal Australasian College of Medical Administrators (RACMA) and will be delivered by June 2024.

A RACS delegation, including the President, Councillors, Fellows, and staff visited Darwin from 5-9 August to discuss the FATES accreditation project and met with representatives from the Royal Darwin Hospital (RDH) and the Northern Territory Department of Health to progress the activities of the MoU. A meeting was also held remotely with the Fellows from Alice Springs.

In early October 2022, the Department of Health and Aged Care announced the 'Forecast Opportunity' for Round 2 of the FATES funding initiative. RACS partnered with the Australian and New Zealand College of Anaesthetists (ANZCA), Royal Australasian College of Physicians (RACP), RACMA, and Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) to apply for funding for a project to research and design rural training models for:

- rural training networks (hub and node)
- rural and remote (virtual) supervision
- jurisdiction partnerships
- outreach
- mentorship and orientation.

RACS was a successful recipient of the FATES Round 2 funding initiative. The project will begin in July 2023 and end in June 2025.

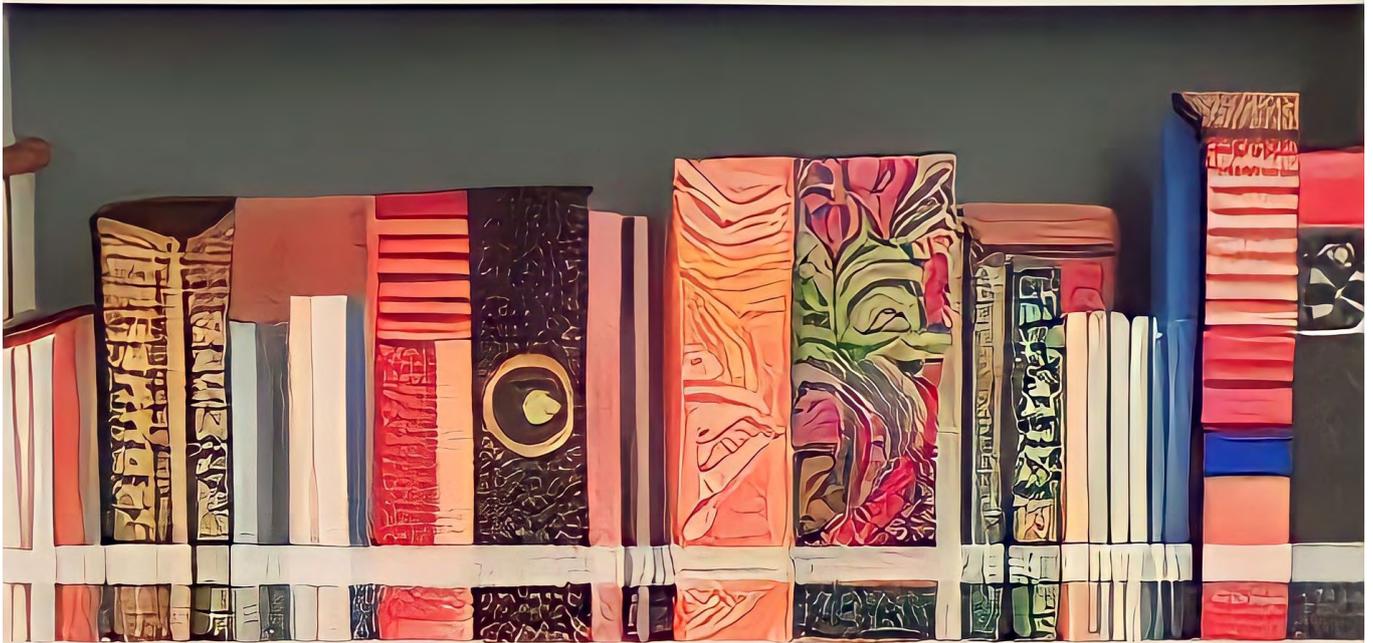
HTP accreditation project

Over a two-year period, RACS in consultation with the Specialty Training Boards, reviewed and revised the RACS Hospital Training Post (HTP) Accreditation Standards. In late 2022, the draft RACS HTP Accreditation Standards were released for external consultation and review.

The key differences between the 2016 standards and the revised 2022 version centre on the following:

- an introduction of overarching principles
- a revised structure
- strengthened standards around respect and safety
- addition of a principle and standards on Cultural Competence
- strengthened support for surgical supervisors
- strengthened support for surgical Trainees
- facilitation of information sharing with hospitals under RACS new accreditation process
- updated language and terminology.

The HTP Accreditation Standards review included a revised process to undertake future accreditation. This process separates generic 'facility level standards' (Part A) from standards related specifically to training departments (Part B). The goal of this separation is to reduce the burden on both hospital administration and training departments in relation to accreditation activities and requirements.



Enhancing member value

Scholarship and grants

Under the governance of the ANZ Scholarship and Grant Committee, the Scholarships and Grants team had a successful year in 2022. A total of 74 scholarships and grants, worth more than \$1.6 million, were paid.

The Research Scholarship round, valued at \$2.2 million, opened at the beginning of March and closed mid-April. The team was pleased to receive and process 420 applications for the 36 available scholarships. This was the first year that research applications had been processed online through our Unlock program, and was very well received by both applicants and selectors alike.

The Learning & Development grant round, valued at \$338,000, was also run through the Unlock program, with the team benefitting from previous experience. This round opened in the beginning of August and closed mid-October. In total, 160 applications were received and 38 grants were awarded.

Information on the successful scholars and grantees were published in *Surgical News*, on the website and through other social media channels. Recipients also provided us with short videos, which can be found on the scholarship and grant pages of the RACS website, outlining how the funding would help them in their surgical journey.

The Scholarships and Grants team also supported the 54 recipients of the 2022 scholarship program—managing invoicing, reports and compliance, including seven multi-year recipients continuing their scholarships from the year before.

We also introduced a new application platform to manage scholarships

and grants. This made the application process more efficient and a better experience for applicants.

Continuing Professional Development

RACS approved its inaugural Continuing Professional Development (CPD) strategy in October 2022. The strategy provides a roadmap that prioritises improving outcomes in the community, stakeholder engagement and partnerships, and refining technology and service to support Fellows to complete their CPD.

The vision for the RACS CPD Program is ‘Supporting surgeons and surgically affiliated health professionals in Australia and Aotearoa New Zealand in their lifelong commitment to professional growth and improving patient care’.

The College was successful in gaining recognition under the new ‘CPD Home’ accreditation model established by the Australian Medical Council (AMC). This achievement coincided with the successful delivery of the refreshed CPD framework throughout 2022. These new requirements align with the changes implemented by the Medical Board of Australia (MBA) and the Te Kaunihera Rata o Aotearoa – Medical Council of New Zealand (MCNZ).

Improvements to technology to create a streamlined and seamless experience also continued, with the launch of the RACS CPD mobile app. The app lets Fellows to complete their CPD requirements using their phone or other mobile device. This is another step in the College’s commitment to providing Fellows with the best-in-class CPD Program.

Diversified membership category proposal

We undertook an independent review of our membership structure. The purpose of this review was to ensure that RACS had a clear organisational understanding of why we have members, who should be members, and the style of membership model best aligned with our purpose.

A review of membership categories will provide an opportunity to modernise the College’s membership structure, better reflect the way the College engages with the medical profession, and future proof for ongoing changes in the sector. A new membership structure will assist in future business development opportunities, in prioritising advocacy, and in the way we represent our members.

Following this review, Council agreed in principle to the recommendation that the current categories expand to encompass those who have committed to a surgical career.

Further work will be undertaken in 2023 to introduce two new categories of RACS formal membership recognising RACS Trainees and SIMGs as formal members of the College.

Advocacy

The year 2022 was a busy year for the Health Policy and Advocacy Committee (HPAC), and the Policy and Advocacy team at RACS. Members from HPAC, our working parties and section, and supporting staff attended 123 major policy and advocacy meetings, wrote 26 major policy and advocacy submissions, and sent 33 letters to ministers, government departments,

RACS offices in Australia and New Zealand



and non-government institutions and organisations. The current Australian government acted on several of our stated priorities.

HPAC's advocacy in 2022 contributed to changing various policy issues, which have impacted our Fellowship and community at large. The successful protection of the title 'surgeon' and continual advocacy to the Australian Health Practitioner Regulation Agency (Ahpra) and Australian Federal Minister for Health led to possible future restrictions of the title to those registered in the specialties of 'surgery', obstetrics and gynaecology, and ophthalmology.

There was recognition that the growing elective surgery waiting lists need be given high priority with governments across Australia and re-examined with continual stakeholder negotiations.

Regarding environmental sustainability in the healthcare space, HPAC emphasised the importance of the National Climate and Health Strategy. This was alongside our involvement with the Green College Guidelines, and also an internal research project reviewing the lifecycle analysis of common surgical products and equipment.

HPAC has also spearheaded—on behalf of our Fellowship—our collective concerns regarding a private health insurance buying group and their potential to engage in 'managed-care' activities to both the Australian Competition & Consumer Commission and the Australian Competition Tribunal.

Australian state and territory advocacy

Advocacy is a key part of our engagement. The relationships nurtured by the state and territory committees and offices is a key part of achieving positive advocacy outcomes that have far reaching impact on surgical care, patient care and standards.

The committees addressed advocacy issues within each of their jurisdictions, and as a group engaged 77 times on issues affecting the individual states or territories.

Highlights from each state and territory included:

- The RACS Australian Capital Territory Committee had a positive year from an advocacy point of view, with a focus on workforce and patient outcomes in the territory's hospitals. The committee met with the Health Minister, the Opposition Health Minister, the Director General, the Chief Medical Officer for ACT Health, CEOs of hospitals, as well as other government officials to help RACS achieve better outcomes for the patients and surgeons in the territory.
- The RACS New South Wales Committee raised awareness of the five-year contract available to Trainees, giving them the benefits of maternity leave, accumulated annual leave, and proof of employment for financial loans. Along with RACS all nine surgical societies have entered into the five-year contracts with NSW Health or are in the process of formalising the agreement.
- RACS New South Wales prepared and submitted government submissions on the flooding that affected most of the east coast of New South Wales in the autumn of 2022. The impact of the floods on communities of the state was significant. A submission was also

made regarding the release of patient data in relation to a Compulsory Third Party Claim.

- The RACS Northern Territory Committee has been at the vanguard in addressing workforce issues within the Northern Territory and has long been a voice for better opportunities and outcomes in health. This included a Memorandum of Understanding with NT Health on developing opportunities for Trainees and pathways for SIMGs.
- The RACS Queensland Committee focused on equity of access for all, including rural, regional and urban and workforce concerns across the state. The RACS Queensland Committee has a history of positive engagement in the area of trauma surgery and continued with its work on addressing the risks from e-scooters.
- The RACS South Australia Committee focused on elective surgery in 2022, engaging with the South Australia health minister, the government, and other relevant groups to support the Fellows, Trainees and SIMGs.
- It also focused on sustainability issues within theatre—an ongoing issue that needs to be addressed more widely—and engaged with the new Women's and Children's hospital on the provision of safe and effective world-class care.
- The RACS Tasmanian Committee advocated for better standards, patient care, and positive outcomes, ranging from addressing rural locums for the north of Tasmania, elective surgery issues across the state, leave entitlements for volunteer medical officers and Trainees to ongoing trauma and workforce issues.
- The RACS Victoria Committee continued to address the ongoing waiting lists

The focus for the Aotearoa New Zealand National Committee throughout 2022 and into 2023 is workforce and environmental sustainability, equity, the provision of surgical services and data collection, with a particular emphasis on registries.

around elective surgery issues across the state. It spent a large part of 2022 addressing the fallout and results of COVID-19, positioning itself as a key interested party in patient care going forward.

- The RACS Western Australia Committee made great efforts to address elective surgery and engaged in the public and private readmissions discussion and promoted positive standards around data sharing and related legislation.

Aotearoa New Zealand advocacy

The focus for the Aotearoa New Zealand National Committee throughout 2022 and into 2023 is workforce and environmental sustainability, equity, the provision of surgical services and data collection, with a particular emphasis on registries.

Some of the key advocacy activities through the year included providing input into the development of the new health system in Aotearoa New Zealand. This included being vocal, both with senior health officials and in the media, about the need for both immediate and longer-term solutions to workforce shortages and surgical waitlists.

The Committee is heartened to see the government take a tough stance on smoking and provided submissions on the proposed legislation to, among other things, prohibit the sale of smoked tobacco products to anyone born on or after 1 January 2009. The law passed in December 2022 and will not only stop young people and future generations from taking up smoking, but will also improve health outcomes for Māori, who have much high rates of smoking compared with the general population.

The Committee also became interested in the benefits of surgical registries.

In 2022, the Committee raised the topic in a submission to a parliamentary select committee on a petition to stop the implantation of pelvic mesh. A meeting was held with the head of Data and Digital at Manatū Hauora, Ministry of Health, to progress the case for registries across several surgical areas.

The Committee also made submissions on the following consultations:

- ethical guidance for a pandemic
- statement on doctors and health-related commercial organisations
- informed consent for medical students involved in patient care
- firearms registry.

Library update

Immediate access anytime, anywhere summed up the library for 2022.

The new request form for library materials went live in July. The change made a significant time saving for users and staff with users getting articles immediately and staff spending less time supplying articles.

Many print journals were replaced by online versions. This made them more accessible to users, as articles can be downloaded when users need them—wherever they are—rather than staff scanning and sending the articles.

Awareness services, such as BrowZine, Read by QxMD and individual eTOCs are all available to users to keep up with the latest research. The library prepared table of contents service was improved to better meet users' needs.

The library continues to offer training to users to enable them to use the service more effectively and efficiently.

Archives and collections

Archives had a busy year with a steady stream of enquiries, work to facilitate the migration of records to Records 365 (cloud-based solution), and increased collaboration with the museum.

The oral history project continued and by the end of 2022, 14 interviews were completed. Patient records from Queen Mary's Hospital, Sidcup, UK remains an important asset for the archive and material relating to Harry Frederick Dester was lent to the Shrine of Remembrance in Melbourne.

During the year the museum, foyer and walkway spaces were refreshed with new displays and tours to the building. A display of objects from the Old Model School, using artefacts loaned from Heritage Victoria was also organised. Extensive activity in the museum spaces and the production of a promotional RACS brochure led to increased visitation and positive feedback.

Research, Audit and Academic Surgery

The Australian Safety and Efficacy Register of New Interventional Procedures – Surgical (ASERNIP-S) team completed four internal projects with more planned in 2023.

A Specialist Training Positions (STP)-funded project 'Investigating and Developing a Rural-facing Surgical Curriculum Framework' was completed and recommendations were provided for distribution and further development.

Twelve externally funded projects were completed in 2022, with a further 10 being finalised in early 2023. Key stakeholders included the Austrian



Institute for Health Technology Assessment, Medical Services Advisory Committee (MSAC), Swiss Federal Office of Public Health, 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 has also been awarded to perform conformity assessment services for medical devices to Therapeutic Goods Administration (TGA).

The Australian and New Zealand Audits of Surgical Mortality (ANZASM) work closely with each department of health in Australia. Nine webinars were held across the region in 2022, largely replacing the in-person meetings, and enabling many more participants to attend. A re-application for Qualified Privilege legislation covering ANZASM was successful for a further five years.

Three case note review booklets were produced, one with the theme of futile procedures.

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 government and hospital-based support. We are seeking funding at an Australian national level to further develop the program.

Academic Surgery presented a successful Developing a Career and Skills (DCAS) course in May with positive attendee feedback. The November Annual Academic Surgery Conference had nearly 100 registrants over the two-day event.

Attendees at the Surgical Research Society meeting were treated to 29 presentations. In 2022 a new award category was included, bringing the total number of awards to seven. Dr Siobhan McKay received the inaugural ANZ Chapter of the American College of Surgeons award for the best presentation by a younger Fellow, which added to the prestige of this meeting.

Clinical Trials ANZ (CTANZ) hosted a half-day face-to-face meeting for Trainee-led networks to plan ongoing collaborative clinical studies across Australia, Aotearoa New Zealand, and internationally.

Presentations were given by Research, Audit and Academic Surgery staff at the 2022 HTAsiaLink Conference (oral, poster and workshop), CTANZ meeting (oral), and 2022 Health Technology International Annual Meeting (panel).

RACS Annual Scientific Congress

The RACS Annual Scientific Congress (ASC) was held in May 2022. Its theme 'Sustainability in the Dispersed Workplace' was a resounding success, with Fellows enjoying the opportunity to reconnect in person without restrictions after the years of lockdown.

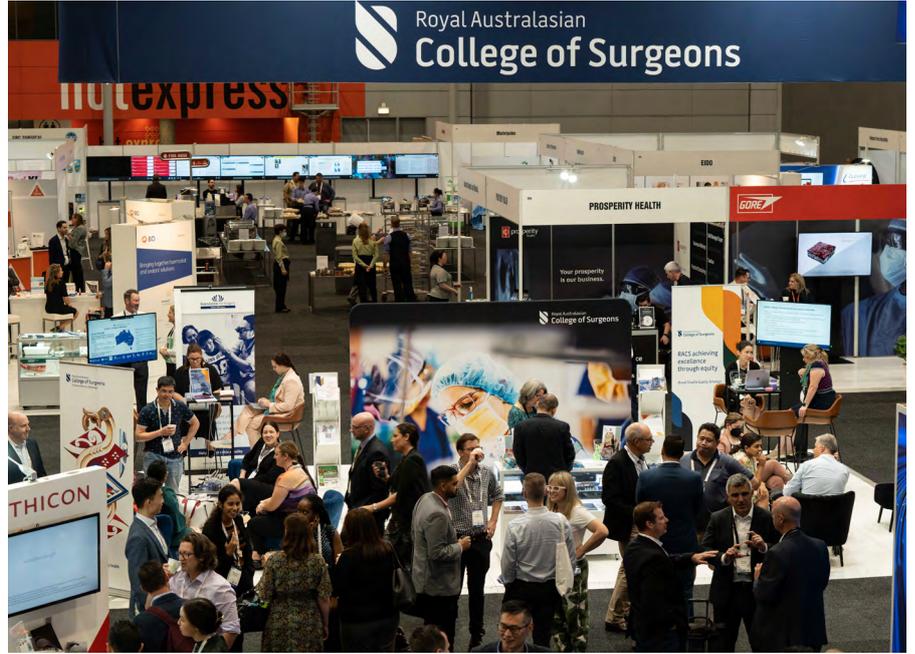
Conveners Professor Chris Pyke and Associate Professor Deborah Bailey presented a meeting of the highest quality that integrated various disciplines and included a range of international speakers. They were supported by the RACS ASC Executive, Dr Jennifer Ah-Toy, Dr Chris Allen, and Dr Heidi Peverill who made a great team.

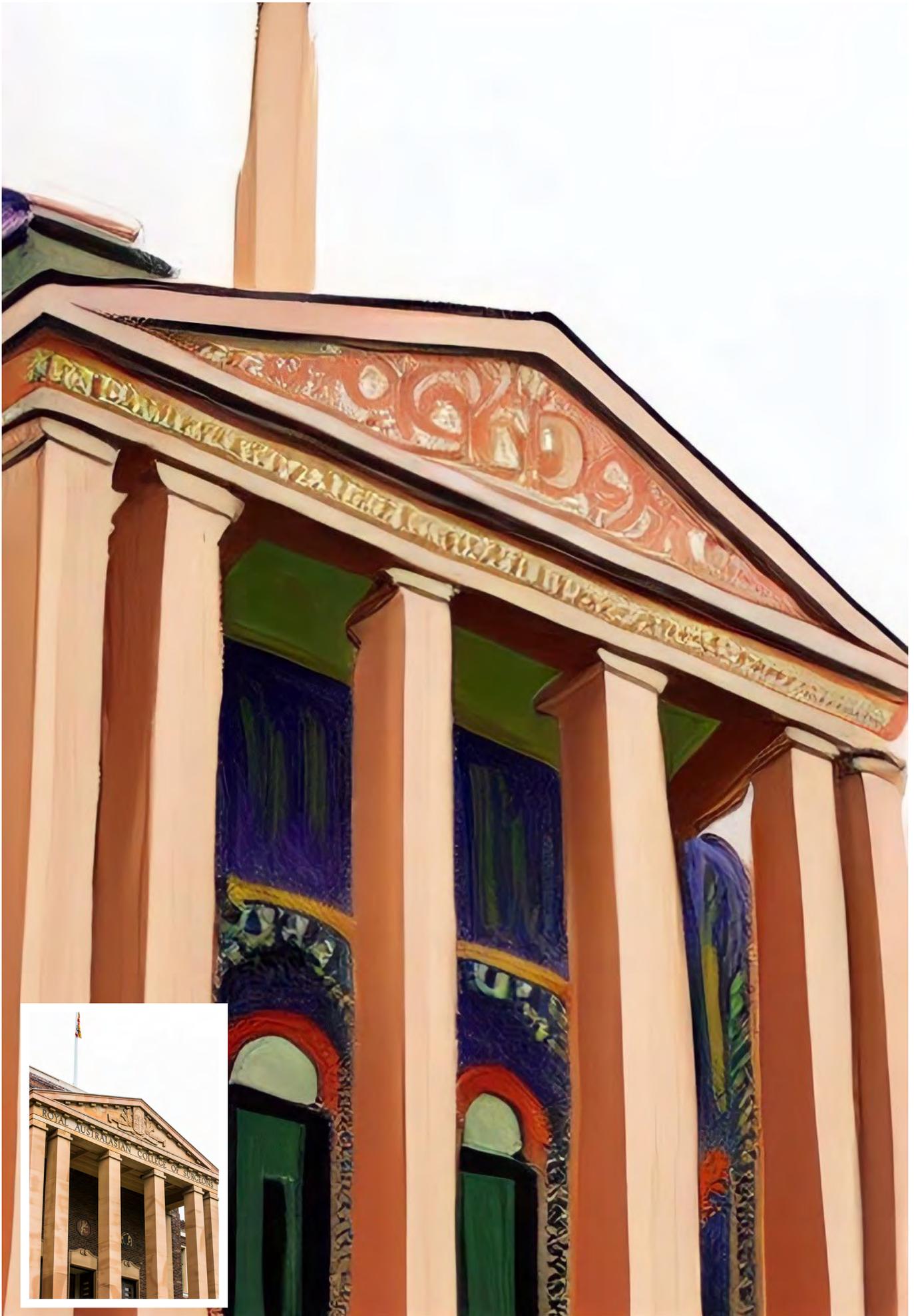
The RACS ASC hosted 44 distinguished visitors, 39 of whom participated in person. In total, 280 sessions took place

with up to 20 streams at any one time during the week. More than 950 verbal presentations and 500 electronic posters were presented.

The convocation had 158 new Fellows and nine award recipients with Associate Professor Julie Mundy presenting the 90th George Adlington Syme Oration on 'The Glass Ceiling: Is it really made of Glass?' The total participation was 2650, which included trade and accompanying persons, with approximately 1350 onsite attendees and more than 950 virtual attendees.

We had strong industry support with a full exhibition of 44 booths. The major sponsors were Medtronic with platinum sponsorship, Gore with gold sponsorship, and Becton Dickinson - Device Technologies, and Johnson & Johnson with silver sponsorships.





Operational excellence

Improving our digital services

The Digital Services portfolio delivered a range of technology solutions for the College and its members.

The Training Management Platform (TMP) was significantly developed during the year. Its capabilities will enable RACS to uphold surgical standards through increased visibility of the end-to-end training journey, provide a collaborative working platform across specialty societies, improve transparency for tracking training progress against the specialty curriculum, and support compliance through accurate data capture.

The TMP is currently used by Trainees, their trainers and supervisors from the Australian Society of Plastic Surgeons, the Australian & New Zealand Society of Cardiac & Thoracic Surgeons, and the Australian and New Zealand Association of Paediatric Surgeons to support the SET journey.

The Continuing Professional Development (CPD) platform is now near completion. It provides easy access for Fellows to complete their CPD activities, attach evidence, obtain their completion certificates, and comply with annual verification requirements.

The back end of the platform enables the CPD team to configure CPD requirements and undertake end-of-year verification activities. The much-anticipated mobile app was delivered in November—with all features of the web platform available on it—perfect for time-poor Fellows who can now complete all their CPD activities on the go.

The new events and registration system replaced the previous outdated systems, which were prone to failure. The new

system enables RACS members to register online for the many events hosted by RACS, including exams. The new system also enables payments, refunds, and notification of changes. Future work will focus on streamlining back-office processes, which are currently manual.

Employee engagement

Engagement was a primary focus for the People and Culture team in 2022.

A comprehensive employee engagement survey was launched as a means to gather feedback from staff. The aim was to inform us how we can further improve the experience of our employees. Most of our staff participated in the survey and we gained a rich insight into their perspectives.

The coming year will see a focus on initiatives to further strengthen engagement centred around providing our people with development opportunities to grow their careers. There will be a renewed focus on identifying where we can improve our systems and processes to gain efficiencies to enable staff to work more effectively to achieve their goals.

The wellbeing of RACS staff remains a critical component in ensuring their contribution is connected to delivering meaningful work. Further initiatives to support the ongoing health and wellbeing of staff will continue into 2023. This will be done through a revised suite of benefits and useful resources designed to further complement our thriving workplace.

Specialty association agreements

Collaborating with surgical specialty societies and associations is highlighted as part of the RACS 2022-2024 strategic plan with a view to building a culture of respect across the profession. The College supports the training and education of surgeons working in collaboration with 13 surgical specialty societies and associations across nine medical specialties.

In 2022, there were more than 50 surgical specialty and sub-specialty societies and associations supporting the training, education, audit, and continuing professional development of Australian and Aotearoa New Zealand surgeons.

The College and specialty societies and associations are independent organisations, sharing membership of Fellows who may hold governance roles across multiple organisations. Responsibility for the training programs and associated activities is managed through collaboration agreements between the College and individual specialty societies. In 2022, the College worked towards completing seven new agreements with our specialty society and association partners.

To ensure effective collaboration, the College and specialty society and association chief executives and training managers meet regularly to share information and discuss the challenges faced when delivering coordinated training. Along with these regular meetings, in early 2022, the CEO and College executive undertook a series of face-to-face meetings with society and association partners sharing strategic priorities and identifying opportunities for the future.

RACS in Australia and Aotearoa New Zealand

The Australian states and territories and Aotearoa New Zealand (STANZ) offices worked with their respective committees to provide advice on local issues and engaging with governments and other relevant stakeholders to achieve various outcomes.

A key part of this is the ongoing engagement with the surgical specialties ranging from using the various RACS offices in Australia for educational and societal meetings, and advocacy engagement on relevant issues such as cosmetic surgery and titling of event invitations.

The offices continued to provide staff with access to facilities and support to manage activities such as meetings, events, and exam and course delivery.

Australia

States and territory offices and committees in Australia supported several high-quality local events throughout the year.

For the first time there were two iterations of New South Wales ‘Surgeons Month’ in 2022. The first was due to be held in 2021 but was delayed until March 2022 due to COVID-19 restrictions. The events were attended by New South Wales Fellows, Trainees, SIMGs, prevocational doctors, medical students, and other College stakeholders.

August was a particularly busy month for many RACS state and territory offices, with several jurisdictions hosting their local annual scientific meetings (ASM), which included high-quality presentations relevant to surgeons,

irrespective of specialty and networking opportunities.

‘Artificial Intelligence in Surgery - Superpower or Peril?’ was the theme, when surgeons from South Australia, Western Australia, and the Northern Territory gathered in the Barossa Valley for the tristate scientific meeting. A common theme over the two days was that Artificial Intelligence (AI) and other computer-aided technologies are transforming our surgical practice by augmenting human intelligence.

AI was also a strong theme at the ACT scientific meeting, which centred around the ‘Role of the Surgeon into the Future’. In addition to this, the conference also explored the sub-themes of environmental stewardship and our climate change responsibilities within a clinical realm.

The theme of the Tasmania meeting was the ‘Humanitarian Surgeon’. Delegates heard from speakers who gave their insight into providing surgical care in countries that have very limited resources.

In Victoria, the inaugural Victorian Surgeons’ Charity Ball was held at the iconic Melbourne Cricket Ground. In Queensland, the biennial Charity Ball was held at the W Hotel in September. The events raised considerable funds for their chosen charities.

Aotearoa New Zealand events

The Aotearoa New Zealand office engaged directly with members again in 2022 after the disruptions of COVID-19 lockdowns.

The Fellowship Examinations (FEX) in May were held in Melbourne and Christchurch.

The Melbourne exams were the first to include examiners and candidates from both Aotearoa New Zealand and Australia since 2019. It was also the first time since the pandemic that the Christchurch exams ended with a function for the successful candidates and the Court Dinner for examiners.

An in-person annual scientific conference, ‘Surgery 2022: Care in a Crisis’, was organised and held in Queenstown from 1 - 2 September 2022. In a first for the meeting, it followed a hybrid format, allowing for both in-person and virtual attendees. This proved to be a winning formula and we received positive feedback on the accessibility and flexibility this provided.

Some of the standout highlights of Surgery 2022 included a COVID-19 retrospective by microbiologist and renowned science commentator Associate Professor Siouxsie Wiles. She reminded us that the pandemic isn’t over yet. Psychiatrist Dr Tony Fernando talked about “kindness” and the importance of medical compassion on clinical outcomes. Grant and Fiona Shennan shared how they found “beautiful light in the midst of tragedy” by donating their 22-year-old son’s organs following a fatal car accident in America.

The event participants had an impressive proficiency in the use of te reo Māori with nearly all session chairs and speakers, including non-New Zealanders, showing their respect for the language of the tangata whenua—Indigenous people—of Aotearoa New Zealand.



The RACS NSW office

New South Wales office renovations

In February 2022, the RACS New South Wales office embarked on a three-month transformation.

The renovation was necessary to improve functionality and modernise the office and make it a more welcoming space for Fellows, Trainees, SIMGs and staff, and the Australian Orthopaedic Society, which is also housed in the building.

The renovation was completed in late May 2022 and the re-design includes a modern kitchen and lounge space, an open plan working area, a surgeon's office, and three meeting rooms, which can be transformed into larger rooms.

Since the completion of the renovation, the office has hosted an open house, Prep for SET, Prep for Practice, an Overseas Fellowships night, the Research Audit & Academic Surgery Annual Conference, the Trauma Committee meeting, and the Australian Defence Force in Surgery, among other meetings.

Tasmanian office relocation

The Tasmanian state office moved to 105 Macquarie Street after nearly 23 years of being located at 107 Davey Street in the AMA House, Hobart.

The move was to accommodate a growing team and much-needed larger facilities for staff and Fellows. The new site is close to both the Royal Hobart Hospital and Hobart Private Hospital.

The Macquarie Street office has a 20-seat boardroom including a lounge and office, which is used by Tasmanian Fellows and surgical societies.

The office opening was attended by the Tasmanian Premier and Health Minister Hon Jeremy Rockliff and Commissioner for Children and RACS vice president, Professor Chris Pyke.

Melbourne office renovation project

The significant first stages of the Melbourne office renovation project started in 2022 when planning work was completed with the assistance of architects, Lovell Chen, and project manager, Fontic.

The design and documentation, including floorplans, were completed for West Wing levels 2 and 3.

The hazardous materials removal and internal demolition of West Wing levels 2 and 3 was also completed.

We will be reviewing the future development of the office during 2023 and consider the best cost-effective options.

RACS awards

RACS recognised long-serving surgeons who made an impact through distinguished service, as well as students who participated in competitions.

Awards approved by Council in 2022

Honorary Fellowship

Ms Lesley Dunstall

Ms Deborah Paltridge

Professor George Youngson, FRCSEd

ESR Hughes Award

Professor Richard Harvey, FRACS

Gordon Trinca Medal

Dr Katherine Martin, FRACS

John Corboy Medal

Dr Shiv-karan Chopra

RACS Surgical Research Award

Professor Francis Frizelle, FRACS

Rural Surgeons Award

Dr Richard Coutts, FRACS

Dr Michael Wilson, FRACS

Henry Windsor Lectureship

Dr William P Gibson, FRACS

Australian Capital Territory

Recognition of Outstanding Service -
Dr Ailene Fitzgerald

Recognition of Outstanding Service -
Dr Frank Piscioneri

Outstanding Service to the Community -
Dr Simon McCredie

Recognition of Outstanding Service -
Dr Yi He

New South Wales

Women in Leadership - Associate
Professor Payal Mukherjee

Innovation Award - Dr Shaheen Hasmat

Medical Student Essay Award - Caitlin
Reid

Outstanding Service to Community -
Dr Soni Putnis

Outstanding Service to Community -
Dr Anna Giles

NSW Merit Award - Dr Danette Wright

Michael Donnellan Award - Associate
Professor Payal Mukherjee

Graham Coupland Lecture -
Dr Francesca Rannard

South Australia

Anstey Giles Lecture - Maggie Beer AO

Sir Henry Newland - Dr Timothy Proudman

RP Jepson Medal - Dr Sabapathy (Giri)
Krishnan

Justin Miller Prize - Dr Suhanya Seimon

Tasmania

Outstanding Service to Community -
Dr David Penn

Tasmanian Supervisor of the Year -
Dr Jens Peters-Willke

Victoria

Outstanding Service to the Community -
Dr Gerard Fogarty

RACS/university joint awards

Deakin University, final year prize - Navjit
Kaur Sidhu

The University of Melbourne, final year
prize - Zhengyang (Daniel) Liu

Notre Dame University, final year prize -
Faisal Kilani

St Vincent's Hospital/The University of
Melbourne - Michael Ryan Scholarship -
Ruiwen (Ray) Xu

Deakin University Geelong Medical School
- GJ Royal Clinical Surgery - Shipra
Sankpal

Academic awards

Dr Leslie Prize - Dr Taha Mollah

RC Bennett Prize - Nicola Fleming

VRC Medical Students Prize - Amy Sylvivris

VRC DCAS Scholarship - Rohan Rajaran

Best Poster Prize - Shayan Soroush

Fellow awards

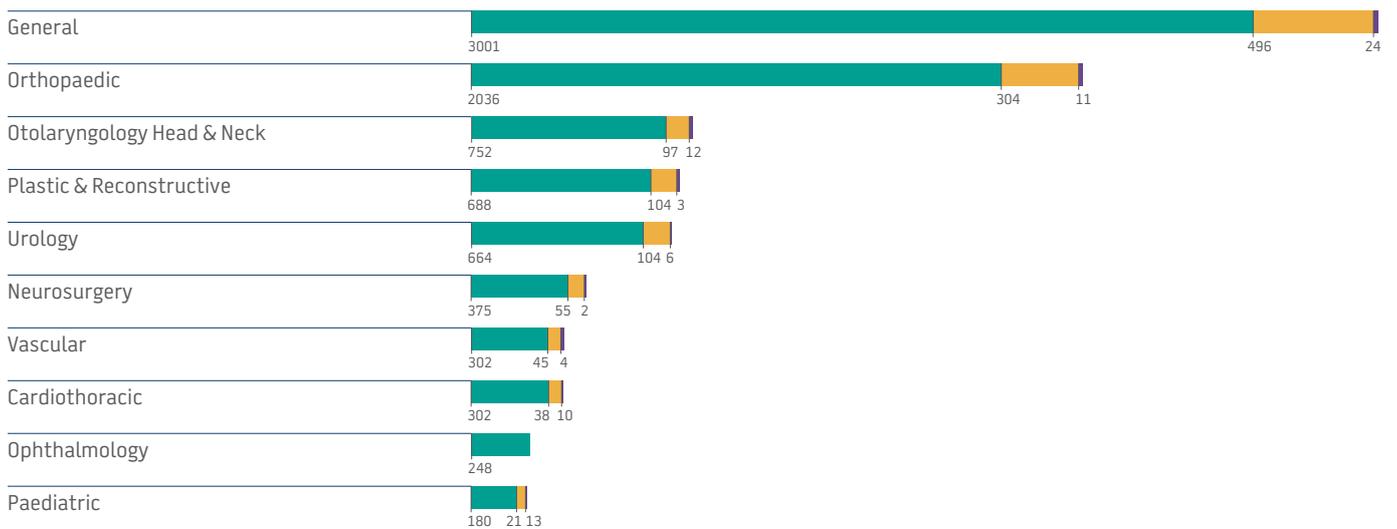
GJ Royal medal - Dr Annette Holian FRACS

Aotearoa New Zealand awards

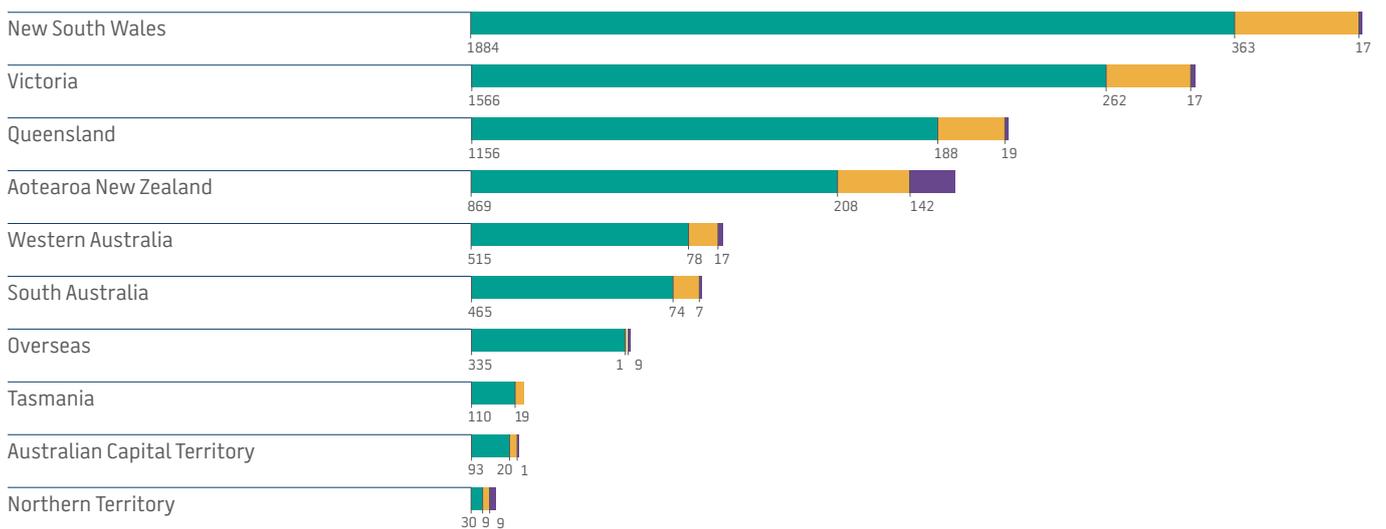
Louis Barnett award - Dr Ahmed
Barazanchi

Our Fellows, Trainees and Specialist International Medical Graduates

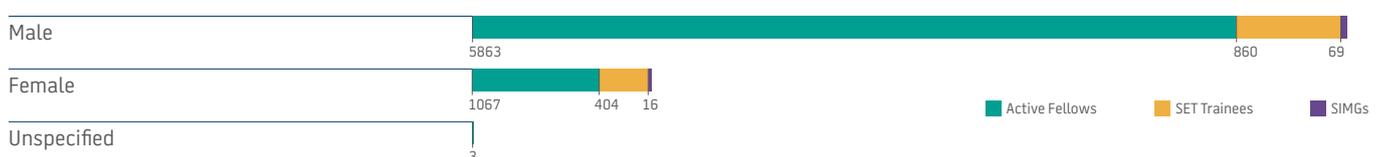
BY SPECIALTY



BY LOCATION



BY GENDER



Active Fellows SET Trainees SIMGs

The Royal Australasian College of Surgeons 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.

Sixteen members are elected by the Fellows of Australia, Aotearoa New Zealand (AoNZ) 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.

Governance

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 (formerly Board of Council)

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

Members/Office bearers 1 January - 05 May 2022

- Dr Sally Langley FRACS – President, Fellowship Elected Councillor
- Dr Lawrence Malisano 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 2022

- 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

Rotating members of Council Executive 1 January - 31 December 2022

- Dr Christine Lai FRACS, Fellowship Elected Councillor
- Dr Annette Holian FRACS, Fellowship Elected Councillor
- Dr Jennifer Chambers FRACS, Fellowship Elected Councillor

Members/Co-opted Councillors 1 January - 31 December 2022

- The Hon Rob Knowles AO, Expert Community Advisor (Australia)
- Ms Souella Cumming
Expert Community Advisor (AoNZ)
- Dr Nishanthi Gurusinge FRACS,
Tasmanian Fellows Representative
- Dr Richard Bradbury FRACS, Northern Territory Fellows Representative
- Dr Ailene Fitzgerald FRACS,
Australian Capital Territory Fellows Representative
- Dr Sharon Jay, RACS Trainees Representative



Councillors

Members/Fellowship Elected

Councillors: 1 January - 5 May 2022

- Dr Adrian Anthony 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
- Dr Lawrence Malisano FRACS
- Professor Christopher Pyke FRACS
- Dr Maxine Ronald FRACS
- Professor Owen Ung FRACS
- Professor Henry Woo FRACS

Members/Specialty Elected Councillors: 1 January - 5 May 2022

- Professor Mark Ashton FRACS
- Associate Professor Andrew Cochrane
- 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 2022

- 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 5 May - 31 December 2022

- 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

Councillors appointed in 2022

- Professor Deborah Bailey FRACS, Queensland Fellowship Elected Councillor appointed 05 May 2022
- Dr Richard Bradbury FRACS, Northern Territory Fellows Representative appointed 05 May 2022
- Dr Ailene Fitzgerald FRACS, Australian Capital Territory Fellows Representative appointed 05 May 2022
- Dr Sharon Jay, RACS Trainees Representative appointed 1 January 2022

Councillors retired in 2022

- Dr Lawrence Malisano FRACS, Fellowship Elected Councillor

COUNCIL

Council Executive
 Court of Honour
 Foundation for Surgery Committee
 Awards Committee
 Appeals Committee
 Rural Health Equity Steering Committee
 Indigenous Health Committee
 Mina
 Governance Committee
 Victoria State Committee
 Victoria State Executive Committee
 Victoria State Trauma Committee
 New South Wales State Committee
 New South Wales Executive Committee
 Aotearoa NZ National Committee
 Māori Advisory Committee
 Aotearoa NZ National Committee Awards Subcommittee
 Aotearoa NZ Trauma Sub Committee
 Aotearoa NZ Censors' Committee
 Aotearoa NZ - Younger Fellows Advisory Group
 Aotearoa NZ - ASM Organising Committee
 Northern Territory Committee
 ACT Committee
 Queensland State Committee
 Queensland State Executive Committee
 Queensland Trauma Committee
 Queensland YF Committee
 South Australia State Committee
 South Australia State Executive Committee
 South Australia Trauma Committee
 South Australia YF Committee
 Western Australia State Committee
 Western Australia YF Committee
 Tasmania State Committee
 Tasmania Trauma Committee
 ANZ Journal of Surgery Committee
 International Engagement Committee
 Global Health Program Steering Group
 One College Transformation Steering Group

PROFESSIONAL STANDARDS AND FELLOWSHIP SERVICES COMMITTEE

Professional Standards and Fellowship Services Executive Committee
 Professional Conduct Committee
 Professional Standards Committee
 – Trauma Committee
 – Trauma Quality Improvement Committee
 – Definitive Surgical Trauma Care Committee
 – Trauma Verification Committee
 – Road Trauma Advisory Subcommittee
 – Conjoint Committee for Recognition of Training in Peripheral Endovascular Therapy
 – Surgical Gastrointestinal Endoscopy Committee
 – Locum Evaluation and Peer Review Committee (LEPRC)
 Fellowship Services Committee
 – Colon and Rectal Surgery Section Committee
 – Endocrine Surgery Section Committee
 – Surgical History Heritage and Archives
 – Medico Legal Section Committee
 – Military Surgery Section Committee
 – Pain Medicine and Surgery Section Committee
 – Rural Surgery Section Committee
 – Women in Surgery Section Committee
 – Younger Fellows Committee
 – Surgical Directors Section Committee
 – Surgical Oncology Section Committee
 – Transplant Surgery Section Committee
 – Upper GI HPB Obesity Surgery Section Committee
 – Senior Surgeons Section Committee

Annual Scientific Congress Planning and Review Committee

- 2023- ASC Executive Committee
 - 2023 - ASC Section Convenors Committee
 - 2024 - ASC Executive Committee
 - 2024 - ASC Section Convenors Committee
- Health Policy and Advocacy Committee
 Surgical Audit Committee
 – ANZ Audits of Surgical Mortality Steering Committee
 – TASM Committee
 – WAASM Committee
 – MALT Committee
 – SAASM Committee
 – NTASM Committee
 – QASM Committee
 – VASM Committee
 – BQA Committee (not a RACS committee but supported by us)
- Research and Academic Surgery Committee
 – Research and Evaluation, inc: ASERNIP-S Committee
 – Academic Surgery Committee
 – Academic Surgery Executive Committee
 – Scholarships Evaluation and monitoring committee
 – ANZ Scholarship and Grant Committee
 Surgical Research Society Sub Committee
 ANZ ACS Council (not a RACS committee but supported by us)

EDUCATION COMMITTEE

Education Committee Executive
Committee of Surgical
Education and Training

- AU Board in General Surgery
 - Board of Cardiothoracic
 - Board of Neurosurgery
 - Board of Otolaryngology
 - Board of Urology
 - Board of Vascular
 - Australian Board of Plastics
 - NZ Board in General Surgery
 - NZ Board of Plastic and Reconstructive Surgery
 - NZOA Education Committee
 - NZ National Subcommittee of the Board of Otolaryngology
 - Paediatric Surgery Education and Training Committee
- SIMG Committee
- Court of Examiners Executive
- Neurosurgery Court of Examiners
 - Orthopaedic Court of Examiners
 - Otolaryngology Court of Examiners
 - Paediatric Court of Examiners
 - Plastic & Reconstructive Court of Examiners
 - General Court of Examiners
 - Paediatric Anatomy Examinations Committee
 - Urology Court of Examiners
 - Vascular Court of Examiners
 - Cardiothoracic Court of Examiners
- Prevocational and Skills Education Committee
- Early Management of Severe Trauma Committee
 - Care of the Critically Ill Surgical Patient Committee
 - Critical Literature Evaluation and Research Committee
 - Training in Professional Skills Committee
 - ANZ Surgical Skills Education and

Training Committee

- Post Fellowship Education & Training Committee
- Graduate Programs in Surgical Education Reference Group
- RACS Trainees Association
- Clinical Committee
- GSSE Pathology Subcommittee
- GSSE Physiology Subcommittee
- GSSE Anatomy Subcommittee
- Surgical Sciences Exam and clinical exam Committee
- Professional Development Committee
- Academy of Surgical Educators Committee
 - Operating with Respect Committee
 - RACS and RSE Advisory Committee (not a RACS committee, but will report back to Education Committee)
- SSE Committees
- C SSP Committee
 - General Surgery Committee
 - Neurosurgery Committee
 - O HNS Committee
 - O PBS Committee
 - Paediatric Committee
 - PRSSP Committee
 - Urology Committee
 - Vascular Committee

FINANCE, AUDIT AND RISK MANAGEMENT COMMITTEE

- Investment Committee
- Property Committee

WORKING GROUPS

- RHE Advisory Group
- RHE Curriculum Working Group
- GRID Working Group
- Robotic assisted surgery working group
- Clinical Academic Pathways Working Party
- Colorectal Cancer Audit Working Party
- CPD Homes Working Party
- STANZ Forum
- Clinical Trials ANZ Working Party
- Environmental Sustainability in Surgical Practice Working Group
- Virtual Clinical Exam Working Group
- College Centenary Working Group
- Building Respect Operational Working Group
- Code of Conduct Working Party (Pending)
- Hospital Training Post Accreditation Working Group (reporting to CSET)
- GSSE Practice Bank Working Group

Councillors 2022



Mr Adrian Anand Anthony MBBS MSurgEd FRACS GAICD

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, The University of Melbourne; 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.



Professor Deborah Bailey B.Sc, 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 of Directors Pacific Association of Paediatric Surgeons; Visiting Medical Officer Pindara Hospital Ramsay Health.



Dr Richard Ian Bradbury B.Sc MBBS FRACS

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.



Ms 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 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 *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 (ACSRL), which provides financial governance over the ANZSCTS Database; Board member of Maluk Timor Australia, an NGO involved in delivery of primary health care in Timor-Leste; Member of the Clinical Governance Committee for East Timor Hearts Fund.



**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; AMAQld Board Member; Member AMAQld 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; 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; Codirector National Alliance for Action on Alcohol.



Souella Cumming BCA CRMA

Partner KPMG NZ; Board member and 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; Previous 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 Department Model Scope of Practice Working Party; Member Australian & New Zealand Hip Fracture Registry; Chair Orthopaedic Department; Member Trauma Committee Wagga Wagga Rural Referral Hospital; Expert Peer Reviewer Medical Board NSW.



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 UGI surgeon; Emeritus Consultant Surgeon Fiona Stanley Fremantle Hospital Group; retired Head of Department FSFHG / University West 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.



**Professor Mark Frydenberg AM MBBS
FRACS GAICD**

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; Board member, 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 & Endoscopy; Scientific convener combined 2019 GSA/CSSANZ Annual Scientific Meeting and 2019 Colorectal Trainees' Day; Surgical Supervisor of Training, Launceston General Hospital; SEAM Committee Member.

Councillors 2022



**Professor Andrew Graham Hill BHB
MBChB GradDip Theol MD EdD FAICD
CFInstD FCSSL(Hon) FASI(Hon) FASA(Hon)
FRCEd(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)**

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.



**Ms Annette Coralie Holian MBBS FRACS
FAOrthA MSurgEd GAICD**

President Australian Orthopaedic Association (AOA); APOA Chair of Disaster Preparedness; APOA WAVES - treasurer; VPCC Anaesthetic Consultative Group; AVANT: Member National Stakeholder

Advisory Committee; Orthopaedic surgeon Monash Children's Hospital; 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 Sharon Jay MBBS

Surgical Trainee - General Surgery SET 5 Ōtautahi/Christchurch; Honorary Senior Clinical Lecturer University of Otago



The Honourable Rob Knowles AO MAICD

Director, Silverchain Group of Companies, Drinkwise Australia Ltd, IPG Pty Ltd, Global Health Ltd; Chair, Royal Children's Hospital; Director Great Ocean Road Health; Director Beyondblue Ltd; Director of the Medical Research Commercialisation Fund Trust; Member of Victorian Medical Workforce Advisory Council; Chair of Working group for medical workforce requirements for Portland Health and St Western Victoria;

Member of Review Panel Medically Supervised Injection Room.



**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.



**Dr Sally Jane Langley MBChB FRACS
GAICD**

Plastic and Reconstructive surgeon, Canterbury District Health Board.



Mr 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; Family member SET Trainee.



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; Chairman 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 New Zealand; Member, Perioperative Mortality Review Committee New Zealand.



Professor Raymond Sacks MBChB FCS(SA)ORL FARS FRACS

Otorhinolaryngology - Head & neck Surgery; Professor and Head of discipline of OHNS, Sydney University; Professor of Surgery, Macquarie University; Deputy President Australian Society of Otolaryngology-Head & Neck Surgery; Member Expert Advisory Committee of Therapeutic Goods Administration and of Prosthesis List Advisory Committees; Consultant to Medtronic Pty Ltd.



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.



Dr Gregory Edwin Witherow MBBS FRACS MAICD GAICD

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



Professor Henry Woo MBBS DMedSc FRACS

Urological surgeon; Professor of Urology Australian National University; Director of Uro-Oncology Chris O'Brien Lifehouse; Head Department of Urology Sydney Adventist Hospital; Board Director, Australian and New Zealand Uro-genital and Prostate Cancer Trials Group; Board Director Australasian Urological Foundation; Board member

Asian Pacific Prostate Society; Member MBS Urology Review Committee; Clinical Trial Investigator for Prodeon, Honorary Professor The University of Sydney; Associate Editor *Prostate Cancer and Prostatic Diseases*; Board member Asian Pacific Prostate Society; Member MBS Urology Review Committee; Zenflow, Boston Scientific, Astellas, Janssen, Myovant.

RACS leadership



John Biviano

Chief Executive Officer

John Biviano was appointed Chief Executive Officer of RACS in April 2019. He was previously the Deputy Chief Executive Officer and Executive General Manager of the Fellowship Services and Standards portfolio.

John has more than 40 years of experience working in the health sector, including working in medical colleges, hospitals, and in the government. For the past 15 years, he has worked in senior executive roles in two of the largest specialist medical colleges in Australasia, with expertise in leadership, strategic policy development, professional standards, and government relations.

While at RACS he has had major involvement in the development and implementation of various sustainability in healthcare initiatives, the Indigenous health strategy, and the Building Respect Improving Patient Safety Action Plan. He holds a Bachelor of Applied Science, a Masters in Management, and is a Fellow of the Institute of Managers and Leaders, and a Graduate of the Australian Institute of Company Directors (GAICD).



Etienne Scheepers

Executive General Manager, Fellowship Engagement

Etienne Scheepers was appointed to the position of Executive General Manager – Fellowship Engagement in September 2019.

He is a highly experienced leader who held senior roles such as chief operating officer, deputy chief executive, and executive director in the government and not-for-profit sectors.

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

He has extensive experience in health workforce reform and while working at Health Workforce Australia developed and implemented a national program of health workforce innovation and reform.



Tamsin Garrod

Executive General Manager, Education Development and Delivery

Tamsin Garrod has a PhD and a Master of Business Administration. She started her career in academia, both researching and teaching in the field of medical research and has a strong academic track record.

Tamsin joined RACS in 2014 and has worked across the College, starting in Research, Audit and Academic Surgery and then moving over to Education.

Having been at RACS for seven years, Tamsin has a vast knowledge of and respect for the College and its purpose. She also has experience as a company director and as a committee member across medical and membership organisations.



Christine Cook

Executive General Manager, Education Partnerships

Christine Cook was appointed to Executive General Manager (EGM) Education Partnerships in January 2022. She has more than 25 years of business experience—14 years in the healthcare sector.

Christine joined RACS from the Royal Australian College of General Practitioners where she was General Manager, Fellowship Pathways—responsible for the development of a new RACGP general practice training program. She was previously the CEO of GPEx, the South Australian GP education and training delivery organisation, and has extensive knowledge in medical education and in developing trusted relationships with key stakeholders such as the Department of Health, ACRRM, AIDA, and RDAA.



Sendur Kathir

Executive General Manager, College Transformation

Sendur Kathir was appointed Executive General Manager (EGM), College Transformation in July 2022. He joined RACS in 2021 as Head of Digital Services.

Sendur has more than 30 years of experience in executive management in IT, finance, risk, marketing, communications, Human Resources (HR), and procurement. He has undertaken several transformation initiatives in the private and public sectors.

He has a multi-disciplinary background including management consulting at Pricewaterhouse Coopers, executive leadership positions at the University of Melbourne, and involvement in several start-ups. Sendur has served on several Boards including Audit and Risk, Remuneration, and HR committees.

Sendur is a Graduate of the Australian Institute of Company Directors (GAICD), holds an MBA from Monash University, and received formal education in ethical leadership at the Vincent Fairfax Institute for Ethical Leadership.



Dominic Chila

Executive General Manager, Finance and Support Services

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

As EGM Finance and Support Services, Dominic focuses on Financial Services, Risk Management, Contract Management, Procurement, Internal Services, and RACS Foundation for Surgery.

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

Dominic has held various executive and leadership roles including that of Chief Financial Officer, Chief Risk Officer, and Company Secretary. He has extensive experience working at member-based and not-for-profit organisations including Catholic Church Insurance Limited, National Catholic Super Fund, and CCI Asset Management.

Dominic is a fellow of the Australian Society of CPAs (FCPA), an associate of the Governance Institute of Australia (AGIA), and a Chartered Secretary with the Chartered Governance Institute (CGI).



Treasurer's report

The Financial Report for the year ended 31 December 2022 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 2022 financial year was one where the Royal Australasian College of Surgeons' (RACS) core delivery of service and events moved towards COVID normal after two years of interruptions and restrictions. The increase in activity has helped drive revenue growth from the prior year as core training and examination has resumed.

Challenging economic conditions including volatile global investment markets and inflationary pressures on expenditures, many of which have been influenced by impacts of COVID and the Russian invasion of Ukraine, have seen a significant deterioration in RACS' 2022 financial result. Uncertainty with these events will require RACS to continue to prudently manage its operations to withstand ongoing impacts to its financial position.

RACS delivered a deficit result of \$10.0million in 2022 compared to a deficit of \$0.6m in 2021 and an overall comprehensive loss of \$12.9 million compared to a surplus of \$5.0 million in 2021. Negative performance returns of 2.7 per cent from the investment portfolio have contributed to the overall deficit.

Revenue

Revenues from operations were \$61.0 million compared to \$53.5 million in 2021, an increase of \$8.5 million (14%).

Key revenue streams for the year reflect:

- Subscriptions and entrance fees of \$19.7 million (2021: \$19.4 million), the increase of \$0.3 million (1.4%) predominately a result of a three

percent percent fee indexation offset by decreased fellowship entrance fees;

- Training, examination, and assessment fees of \$22.4 million (2021: \$19.1 million), the increase of \$3.4 million (18%) primarily due to the full year resumption of events;
- Sponsorship and donations of \$5.2 million (2021: \$3.7 million), the increase of \$1.5 million (41%) includes two generous bequests / donations;
- Conference registrations of \$2.1 million (2021: \$1.5 million), the increase of \$0.6 million (41%) primarily due to the delivery of the RACS ASC in May 2022 and increased numbers of participants in other courses; and
- Project income and management fees from external parties of \$9.3 million (2021: \$8.2m), the increase of \$1.1 million (13%) due to increased mortality audits and net growth in international programs.

Expenditure

Expenditures from operations of \$72.6 million compared to \$59.3 million in 2021, an increase of \$13.3 million (22%). The increase is reflective of the increased income and primarily attributable to the return of many events throughout the year as well as digital transformation initiatives under the One College Transformation program.

Key expenses for the year reflect:

- Personnel costs of \$33.9 million (2021: \$30.2 million), the increase of \$3.7 million (12%) driven by the requirement for additional resources to deliver core services and events disrupted by COVID-19 and a higher level of fellowship engagement personnel for the delivery of enhanced member services;
- Outsourced service provider costs of \$4.2 million (2021: 3.4m), the increase of \$0.8 million (23%) reflects the growth in externally funded

programs, both within Australia and Internationally;

- Information systems costs of \$4.5 million (2021: 3.6 million), the increase of \$0.9 million (24%) is due to the ongoing investment and associated costs in digital services infrastructure and new applications to support members;
- Travel and accommodation of \$5.0 million (2021: \$1.6 million), the increase of \$3.4 million (210%) reflects a return to COVID normal, and the increased activity of the College to deliver services to members and external funders;
- Audit, legal and professional fees of \$0.6 million (2021: \$1.6 million), the decrease of \$0.9 million (59%) relates to net improvements in operating costs;
- Utilities and other property costs of \$1.8 million (2021: \$1.2m), the increase of \$0.5 million (45%) is due to higher utility prices, repairs and increased cleaning post COVID;
- Scholarships, fellowships and research grant costs of \$1.6 million (2021: \$0.8 million), the increase of \$0.9 million is due to a resumption of normal levels of support;
- Externally funded grants of \$1.4 million (2021: \$0.5 million), the increase of \$0.9 million (159%) is primarily related to resumption of overseas global health activities and grants for the RACS ASC conference;
- Facilities hire and catering costs of \$4.4 million (2021: \$3.3 million), the increase of \$1.1 million (34%) predominately due to the increase costs of delivery of examinations and events at external venues; and
- Amortisation costs of \$1.6 million (2021: \$0.6 million), an increase of \$1.0 million (179%) reflects the continual development and investment in transformation initiatives and digital platforms.

Financial position

Statement of financial position reflects:

- Net assets of \$121.8 million (2021: \$96.2 million), the increase of \$25.6 million (27%) being the net increase from the revaluation of land and buildings (\$38.5 million) offset by the comprehensive loss of \$12.9 million;
- Cash and short-term deposits of \$30.4 million (2021: \$34.2 million), the decrease of \$3.8 million (11%) is resulting from net cash outflows from operating activities of \$3.2 million, outflows for payments of property, plant, equipment and intangibles of \$9.8 million, and payments of lease liabilities of \$1.2 million. This was funded through the realisation of investments (net) of \$4.4 million and investment income of \$6.1 million;
- Trade and other receivables \$23.1 million (2021: \$21.8 million), the increase of \$1.3 million (6%) a result of the CPI increase (5%) increase in billing of Fellows and Trainees annual fees;
- Other current assets of \$4.1 million (2021: \$2.9 million), the increase of \$1.2m (42%) is resulting from the increase in prepaid event costs for events to be delivered in 2023;
- Non-current other financial assets of \$73.6m (2021: \$85.0m), the decrease of \$11.4 million (13%) relates to decline in investment assets managed within the portfolio aligned to the overall decrease in market valuations, and a realisation of investments during the year;
- Property, plant and equipment of \$56.2 million (2021: \$17.6 million), the increase of \$38.9 million (225%) being attributable to the revaluation of land and buildings during the year;
- Intangible assets of \$14.6 million (2021: \$7.2 million), the increase of \$7.3 million (102%) is the result of digital technology investments under the multi-year 'One College Transformation' program;

- Contract liabilities and other revenue received in advance of \$52.6 million (2021: \$46.7 million), the increase of \$5.9 million (13%) 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 \$20.7 million (2021: \$15.9 million), the increase of \$4.8 million (30%) relates to new leases for offices in NSW and Tasmania.
- Total employee benefits of \$4.6 million (2021: \$4.2 million) are in line with the prior year annual leave and long service leave staff entitlements with marginal CPI movements in each.

Cash Flow

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

- Net cash outflows from operating activities of \$3.2 million (2021: \$1.0 million), the increase in outflows of \$2.2 million is due to an increase in payments to suppliers and employee.
- Net cash inflows from investing activities of \$0.7 million (2021: \$1.2 million), the movements include the realisation of investments and investment income, offsetting the continued investment in the 'One College Transformation' program.
- Net cash outflows from financing activities of \$1.2 million (2021: \$1.3 million) and is as a result of the notional interest payment on lease liabilities for properties.

Foundation for Surgery

The Foundation activities encompass scholarships, fellowships, and research grants as well as direct oversight of RACS philanthropic endeavours. It is Board of Council's strategic aim to commit to an annual funding limit of up to \$2.5 million, 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 \$1.6 million being paid in the year (2021: \$0.8 million).

Investment portfolio – funding the Foundation for Surgery

Investment markets volatility throughout the year resulted in the investment portfolio achieving a negative 2.7% (2021: 13.2%) resulting in an overall loss in the portfolio. Sound cash income (dividends, imputation credits) within the investment portfolio of \$4.8m (2021: \$5 million) 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), Ms Penny Heard (Investment), Mr Chesley Taylor (Investment), Mr Michael Randall OAM (Investment), Mr Michael Saba (Investment) and Mr Paul McDonald (Finance: retired in 2022) for their generous and valued support during the year. We thank our Honorary Advisers for their wise counsel and support.

I would also like to thank the RACS staff for their ongoing hard work and commitment in 2022.

We continue to maintain a sound financial position and have access to both cash reserves 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 course of 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 \$12,902,540 (2021: income \$5,008,468). 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, which have arisen since the end of the financial year, which 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 in respect of 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 amount of the premium.

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 2022, the number of members was 8,565 (2021: 8,379).

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.



Dr Sally Jane Langley
President



Dr Greg Edwin Witherow
Treasurer

MELBOURNE
24 MARCH 2023

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.



Dr Sally Jane Langley
President



Dr Greg Edwin Witherow
Treasurer

MELBOURNE
24 MARCH 2023

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 2022. 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. Four Council meetings and eight Board of Council meetings were held in 2022. The number of meetings attended by each Councillor is noted below.

Councillors meeting attendance 2022

		Number of meetings attended		Number of meetings eligible to attend	
		Council	Board of Council/ Council Executive	Council	Board of Council/ Council Executive
Office Holders					
Dr Sally Jane Langley	President	3	7	3	7
Dr Lawrence Pietro Malisano	Vice President (Jan-May)	1	3	1	3
A/Prof Christopher Martin Pyke	Vice President (May-Dec)	3	4	3	4
Dr Gregory Edwin Witherow	Treasurer	3	6	3	7
Dr Adrian Anand Anthony	Censor in Chief	3	6	3	7
Prof Andrew Graham Hill	Chair, Professional Standards & Fellowship Services Committee	3	6	3	7
Elected Members of Council					
Professor Mark Winter Ashton		3		3	
Professor Deborah Bailey	Appointed 5 May 2022	2		2	
Dr Ruth Caroline Bollard		3		3	
Dr Jennifer Lee Chambers OAM	Rotating Councillor (Council Executive)	3	6	3	7
A/Prof Andrew Donald Cochrane AM		3		3	
Dr Sarah Helen Coll		3		3	
Dr John Anthony Crozier AM CSM		3		3	
Dr Mark Anthony James Dexter		3		3	
A/Prof Kerin Ann Fielding		3		3	
Prof David Rowley Fletcher AM		3		3	
Prof Mark Frydenberg AM		3		3	
Dr Nicola Maret Hill		3		3	
Dr Annette Coralie Holian	Rotating Councillor (Council Executive)	3	5	3	7
Dr Rebecca Kate Jack		3		3	
Dr Christine Su-Li Lai	Rotating Councillor (Council Executive)	3	7	3	7
Dr Philip Neil Morreau		3		3	
A/Prof Christopher Martin Pyke		3		3	
Dr Maxine Mariri Ronald		2		3	
Professor Raymond Sacks		2		3	
Professor Owen Ung		3		3	
Professor Henry Hyunshik Woo		3		3	

Councillors meeting attendance 2022

		Number of meetings attended		Number of meetings eligible to attend	
		Council	Board of Council/ Council Executive	Council	Board of Council/ Council Executive
Co-Opted Members of Council					
The Hon Rob Knowles AO		3	7	3	7
Ms Souella Cumming		2		3	
Dr Nishanthi Gurusinghe		3		3	
Dr Richard Ian Bradbury	Appointed 5 May 2022	2		2	
Dr Ailene Fitzgerald	Appointed 5 May 2022	2		2	
Dr Sharon Jay		3		3	
Retired Members of Council					
Dr Lawrence Pietro Malisano	Vice President (Jan - May) Retired 5 May 2022	1	3	1	3
Dr Sharon Jay	RACSTA Chair, 1 January 2021 Retired 31 December 2021	3		3	
Dr Lawrence Pietro Malisano	Vice President (Jan - May) Retired 5 May 2022	1	3	1	3
Dr Sharon Jay	RACSTA Chair, 1 January 2021 Retired 31 December 2021	3		3	

Statement of profit or loss and other comprehensive income

For the financial year ended 31 December 2022

	Notes	2022 \$	2021 \$
Revenue from operations	4	60,999,532	53,454,338
Total revenue – from operations		60,999,532	53,454,338
Personnel costs	5(a)	33,918,033	30,243,953
Outsourced service providers	5(b)	4,224,280	3,444,428
Telephone, teleconference and audio-visual costs		808,157	1,036,608
Printing, stationery and photocopying		763,222	689,536
Postage and courier costs		435,900	396,773
Information system costs		4,498,779	3,615,184
Travel and accommodation		4,990,717	1,609,456
Associations and library publications		1,798,196	1,722,804
Audit, legal and professional fees		661,973	1,559,853
Bank fees and merchant charges		473,832	416,213
Interest on lease liabilities		754,453	677,736
Utilities and other property costs		1,755,573	1,208,522
Make good (gain) / loss		(34,426)	-
Insurance		788,899	702,194
Project equipment purchases, hire and repairs		1,146,344	855,115
Training manuals and consumables used in education and field projects		831,363	691,133
Scholarships, fellowships and research grants		1,664,352	790,286
Awards, other grants, gifts and prizes		213,291	234,767
Grants – funded from external sources		1,376,275	530,633
Facilities hire and catering costs		4,399,892	3,294,094
Depreciation and amortisation expense	12	2,147,677	2,205,282
Amortisation expense	13	1,592,464	570,135
Depreciation of right-of-use asset	14(a)	1,622,462	1,701,064
Specialty societies funding costs		845,444	862,238
Bad and doubtful debts		7,173	47,844
Loss on disposal of property, plant & equipment		6,278	122,736
Other expenses from operating activities		865,395	68,437
Total expenditure – from operations		72,555,998	59,297,024
(Deficit) for the year – from operations		(11,556,466)	(5,842,686)

Statement of profit or loss and other comprehensive income (cont.)

For the financial year ended 31 December 2022

	2022 \$	2021 (Restated) \$
Other income		
Financial asset income	4,774,268	5,048,957
Gain / (loss) on sale of financial assets	(991,989)	(1,470,756)
Changes in the fair value of financial assets at FVTPL	(2,262,300)	1,656,655
Total other income	1,519,979	5,234,856
Deficit for the year	(10,036,487)	(607,830)
Other comprehensive income		
Changes in the fair value of equity investments and debts instruments at FVOCI	(1,972,880)	5,590,209
Realised gain on equity investments and debts instruments at FVOCI	(892,008)	-
Exchange differences on translating foreign operations	(1,165)	26,089
Other comprehensive income for the year	(2,866,053)	5,616,298
Total comprehensive income for the year	(12,902,540)	5,008,468

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 2022

	Notes	2022 \$	2021 (Restated) \$
Current assets			
Cash and cash equivalents	6	30,376,959	34,152,380
Trade and other receivables	7	23,161,775	21,775,040
Contract assets	8	569,147	444,298
Inventories	9	16,557	36,014
Other assets	10	4,141,059	2,916,679
Total current assets		58,265,497	59,324,411
Non-current assets			
Trade and other receivables	7	482,847	536,372
Other financial assets	11	73,608,113	84,961,372
Property, plant and equipment	12	56,226,291	17,326,148
Intangible assets	13	14,554,361	7,207,138
Right-of-use assets	14	18,205,087	15,170,368
Total non-current assets		163,076,699	125,201,398
Total assets		221,342,196	184,525,809
Current liabilities			
Trade and other payables	15	4,893,453	5,561,598
Contract liabilities and other revenue received in advance	16	52,557,182	46,697,240
Lease liabilities	14	1,375,777	987,429
Employee benefits	17	4,122,373	3,792,196
Funds held on behalf of others	11	16,365,932	15,845,923
Total current liabilities		79,314,717	72,884,386
Non-current liabilities			
Lease liabilities	14	19,369,957	14,948,487
Employee benefits	17	496,187	393,607
Provisions	18	401,606	104,391
Total non-current liabilities		20,267,750	15,446,485
Total liabilities		99,582,467	88,330,871
Net assets		121,759,729	96,194,938
Members' funds			
Retained surplus		68,940,463	83,603,917
Reserves		14,473,036	12,710,957
Asset revaluation reserve		38,467,331	-
Foreign currency translation reserve		(121,101)	(119,936)
Total members funds and reserves		121,759,729	96,194,938

Statement of changes in members' funds

For the financial year ended 31 December 2022

	Retained Earnings	Asset Revaluation Reserve	Investment Revaluation Reserve	Foreign Currency Translation Reserve	Total
	\$	\$	\$	\$	\$
Balance at 1 January 2021	84,714,447	-	7,120,748	(146,025)	91,689,170
Restatement of retained earnings (refer Note 2.5)	(502,700)	-	-	-	(502,700)
Balance at 01 January 2021 (Restated)	84,211,747	-	7,120,748	(146,025)	91,186,470
Surplus for the year	1,159,664	-	-	-	1,159,664
Restated revenue (refer Note 2.5)	(1,767,494)	-	-	-	(1,767,494)
Restated surplus / (deficit)	(607,830)	-	-	-	(607,830)
Other comprehensive income	-	-	5,590,209	26,089	5,616,298
Balance at 31 December 2021 (Restated)	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

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 2022

	Notes	2022	2021
		\$	\$
Cash flows from operating activities			
Receipts from operations		78,975,534	67,668,500
Payments to suppliers and employees		(81,434,011)	(67,960,222)
Interest on leases		(754,453)	(677,736)
Net cash inflows from operating activities	6	(3,212,930)	(969,458)
Cash flows from investing activities			
Payment for property, plant and equipment and intangible assets	12 & 13	(9,832,789)	(6,151,491)
Proceeds from sale of investments		21,665,159	12,607,369
Purchase of investments		(17,295,614)	(10,404,737)
Investment dividends, interest and franking credits received		6,147,170	5,116,376
Net cash (outflows)/inflows from investing activities		683,926	1,167,517
Cash flows from financing activities			
Payment of lease liabilities	14	(1,197,147)	(1,295,243)
Net cash outflows from financing activities		(1,197,147)	(1,295,243)
Net increase/(decrease) in cash and cash equivalents		(3,726,151)	(1,097,184)
Cash and cash equivalents at the beginning of the financial year		34,152,380	35,217,440
Effects of exchange rate changes in the balance of cash held in foreign currencies		(49,270)	32,124
Cash and short-term deposits at the end of the financial year		30,376,959	34,152,380

The Statement of Cash Flows is to be read in conjunction with the accompanying notes to [the financial statements](#).



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 2022

International Aid and Development Programs

	2022	2021 (restated)
	\$	\$
Revenue		
Donations and gifts – monetary ⁽¹⁾	(170,487)	532,497
Donations and gifts – non-monetary	763,823	147,506
Grants		
- Department of Foreign Affairs and Trade	2,833,823	2,283,562
- Other Australian Grants	366,627	197,378
- Other Overseas	216,450	-
Investment Income	325,883	1,055,493
Other income – International programs	1,812	-
Other income – all other RACS activities	58,945,403	54,620,264
Total Revenue	63,283,334	58,836,700
Expenditure		
International Aid and Development Programs		
International Programs		
- Funds to international programs	3,368,550	2,379,008
- Program support costs	1,135,739	1,289,592
Accountability and administration	28,822	63,771
Non-monetary expenditure	763,823	147,506
Total International Aid and Development Programs Expenditure	5,296,934	3,879,877
Other expenditure – all other RACS activities	68,022,887	55,564,653
Total expenditure	73,319,821	59,444,530
Surplus / (deficit)	(10,036,487)	(607,830)
Other comprehensive income	(2,866,053)	5,616,298
Total comprehensive income/(LOSS)	(12,902,540)	5,008,468

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

Please refer to the [RACS Financial Report 2022](#) for more information on the notes to the financial statement



Royal Australasian
**College
of Surgeons**