

*To serve the community by fostering safety,
and high quality patient care in anaesthesia,
perioperative medicine and Pain Medicine*

FACULTY OF PAIN MEDICINE

AUSTRALIAN AND NEW ZEALAND COLLEGE OF ANAESTHETISTS

ABN 82 055 042 852

Minutes of the Annual General Meeting of the Faculty of Pain Medicine
Australian and New Zealand College of Anaesthetists,
held on Sunday May 14, 2017 commencing at 12:00noon
Mezzanine Level, Meeting Room M4,
Brisbane Convention & Exhibition Centre,
Corner Merivale and Glenelg Streets, South Bank,
Brisbane, Queensland 4101

1. Attendance and Apologies

Present:

C Hayes (Dean and Chair), M Craigie (Vice Dean), C Arnold, M Cohen, P Cox, J Fleming, R Garrick, P Gray, R Goucke, D McCoy, B Moore, G Palmer, P Rajeepan, B Rounsefell, S Schug, E Shipton, M Vagg, M Viney, E Visser, S Walker, P Wrigley

In attendance:

H Morris (FPM General Manager), D Sequeira (AO)

Apologies: P Briscoe, B Gertoberens, M Hogg, L Roberts, G Speldewinde

The Dean welcomed Fellows to the Annual General Meeting.

2. Minutes of Annual General Meeting of Fellows held on May 2, 2016.

There being no amendment, the Dean moved that the minutes be accepted as an accurate record.

Resolution: From the Chair

That the minutes of the Annual General Meeting held on May 2, 2016 be accepted.

Carried.

3. To receive and consider the report of the FPM Board presented by the Dean

The Dean highlighted the following items from the Faculty's 2016 Annual Report which is accessible at <http://www.fpm.anzca.edu.au/communications/annual-report>.

The Faculty of Pain Medicine (FPM) was selected as the 2017 recipient of the American Academy of Pain Medicine's Robert G Addison, MD, Award, in recognition of outstanding efforts to foster international cooperation and collaboration on behalf of the specialty of pain medicine.

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In recognition of the quality of FPM's work, the European Federation of IASP Chapters requested use of the Faculty's revised curriculum as the basis for its own diploma. This has now been developed and the Faculty appropriately acknowledged. The Dean clarified that there has been no financial gain to the Faculty, but this has enhanced the Faculty's international standing.

The *Acute Pain Management: Scientific Evidence 4th Edition* which was launched at the 2016 Annual Scientific Meeting in Auckland received significant media coverage and has been recognised internationally. Professor Stephan Schug was acknowledged for his contribution.

The Android version of the free FPM Opioid Calculator smart phone app, designed to calculate dose equivalence of opioid analgesics, was launched in February, and a desktop version in September. By December 2016 there were more than 16,000 unique users, and more than 110,000 sessions were recorded across the Apple and Android versions. Associate Professor Brendan Moore was acknowledged for the development of this app.

The electronic Persistent Pain Outcomes Collaboration (ePPOC) continued to roll out well with over 75 services across Australia and New Zealand either collecting data or in the process of implementing ePPOC. In relation to outcome data, overall figures from the 2016 report show the average rate of capture of follow up data was approximately 15%, which was an improvement on the previous year.

The 12-module Better Pain Management program, designed for specialist and general medical practitioners, medical students, nurses and allied health practitioners caring for patients with persistent pain, was launched at the FPM Refresher Course Day on May 12, 2017. Dr Michael Vagg, Associate Professor Brendan Moore, Professor Edward Shipton, the staff of the Faculty and ANZCA were acknowledged for their achievements and efforts in development of this program. The program is a key offering into the pain sector in terms of education beyond the Faculty.

Considerable work has been undertaken in the development of professional statements. Professor Milton Cohen was acknowledged for his role in developing a number of these documents. Responses around these statements related to submissions to various government and regulatory organisations.

An ANZCA and FPM working group developed a short list of pain medicine-related practices for the Choosing Wisely initiative that may have limited or no benefit to patients, or that may be potentially harmful. Fellows' views on items for inclusion were gauged in a survey in June.

A committee restructure was undertaken to enhance the efficiency and communication within the Faculty's governance structure. A Training and Assessment Executive Committee and a Professional Affairs Executive Committee were formed.

The work of the Faculty staff was recognized in 2016, with the ANZCA Staff Excellence Team Award going to the FPM Curriculum Redesign Team.

In terms of future activities, the Faculty is planning to convene two in-house forums. The "Outcome measurement for interventional pain medicine" discussion forum will contribute to the Faculty's leadership role in the field. The "Cannabis use in the chronic non-cancer pain

setting” forum will consider research opportunities and the question of what constitutes ‘reasonable’ clinical practice.

The Faculty is considering the development of the FPM training program further. It was recognised that a number of subspecialty areas would benefit from further development, including paediatric pain medicine and interventional pain medicine. Board has been discussing various options regarding how these educational opportunities should be progressed. A Paediatric Pain Medicine Training Working Group has been formed and is considering options for enhanced paediatric pain training.

The Faculty is also considering developing a six month full time certificate in clinical pain medicine that would have an emphasis on the Faculty’s multidisciplinary, sociopsychobiomedical model. There may be many GPs interested in this training in addition to other specialist groups.

The Dean opened up the meeting for questions and no queries were received.

Resolution: From the Chair

That the Dean’s report be accepted.

Carried.

4. To receive the annual financial report

The Governance Report to December 2016 was circulated at the meeting.

The Faculty ended the year in a modestly unfavourable position against budget. A number of factors contributed to this result including:

- Higher than budget employee costs – largely reflecting unbudgeted parental leave.
- A reduction in examination fees as a result of a five fewer candidates sitting the November Fellowship examination.
- A reduction in Clinical Skills Course income.
- An increase in professional services related to the better Pain Management Project, offset by drawing down on grant funding.

The positive variances in expenditure included:

- Savings on the travel budget for catering, venue and equipment hire.
- Other cost savings related to a reduced Refresher Course Day management fee.

The depreciation related to the 2015 revised curriculum project and implementation. The operating income was positive against budget overall.

KPIs:

- Trainee registrations were slightly lower than budget.
- New Fellow admissions were lower than anticipated.
- Refresher Course Day registrations were well ahead of budget with 155 delegates against a budget of 114.
- Spring meeting delegate numbers were slightly down on budget.

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- 56 candidates sat the long case assessments against a target of 29.
- There were five fewer candidates sitting the fellowship examination than budgeted.

Fellows were reminded that they could contact the Faculty Dean or General Manager with any enquiries with regards to this report.

Resolution: From the Chair

That the Balance Sheet, Income and Expenditure Account for the period ended December 31, 2016 be received and adopted.

Carried.

5. To receive the declaration of the poll for election of members to the Board

The Board election was conducted on April 5, 2017. There were three vacancies on the FPM Board and four nominations were received. There were 125 envelopes returned and 120 votes counted.

The New Fellow Board Member Election was conducted on April 26, 2017. There was one vacancy on the Board and four nominations received. There were 18 envelopes received and 16 votes counted. Dr Harry Eeman was the successful candidate.

The New Board took office following the AGM on May 14, 2017 comprising:

Dr Meredith Craigie (SA), Dr Kieran Davis (NZ), Dr Harold Eeman (Vic), Associate Professor Raymond Garrick (NSW), Associate Professor Paul Gray (Qld), Dr Newman Harris (NSW), Dr Chris Hayes (NSW), Professor Stephan Schug (WA), Dr Michael Vagg (Vic), Dr Melissa Viney (Vic), and Associate Professor Andrew Zacest (SA).

6. Dean's Prize Presentation

The FPM Dean's Prize was developed to promote and encourage research, and was open to Trainees of the Faculty and of the five participating professional bodies of the FPM or FPM Fellows within eight years of admission to their original Fellowship.

The FPM Dean's prize was not awarded in 2017.

7. Best Free Paper Award

The Best Free Paper Award was open to presenters in the FPM Best Free paper session not eligible for the Dean's Prize.

The Dean announced the prize winner of the FPM Best Free paper session:

Best Free Paper Award: Dr Paul Wrigley (NSW)

"New Evidence for preserved somatosensory pathways in people with complete spinal cord injury: a fMRI study".

8. Other business of which due notice has been given to the General Manager in accordance with the by-laws of the Faculty

The Dean reported that Dr Geoffrey Speldewinde had requested that the following two items of business be raised at the AGM:

1. I, and many other FPM colleagues look forward to a fully independent "FPM". What steps have my Board taken to explore this inevitability please?
2. There is rising interest and acceptability of a range of "Interventions" by needle. What steps has my Board taken to expand its involvement in this erstwhile neglected area?

Item 1:

The Dean noted that as part of the Faculty's strategic planning phase, feedback from individuals and organisations had recognised the strengths the Faculty has drawn from being part of the ANZCA family. The need for the Faculty to develop a unique brand in pain medicine and for pain not just being seen as the remit of anaesthetists was recognised. Board discussions have identified that the Faculty needs to be both part of and have a degree of separation from ANZCA.

The Chair's comments were endorsed. It was highlighted that whatever the governance structure, the Faculty's mission was to advocate for pain medicine. It was acknowledged that the Faculty has received generous and strong support from ANZCA and is currently being enabled to be as effective as possible and in the best position to grow.

Item 2:

The issue of interventional procedures has been addressed in the Dean's Report. The Faculty is considering greater involvement in that space but the challenge is to determine how much to be involved given that the Faculty has limitations of resource in terms of fellowship and staff.

Branding: It was highlighted that the college website is changing. Fellows were advised that the website is currently undergoing a redesign process.

Memorandum of Understanding: As part of the FPM's strategic planning process, the MoU with the five original participating bodies will be reviewed. Noting that there are now other organisations and groups who are more strongly aligned with the Faculty, Fellows were encouraged to provide feedback.

Examinations: It was highlighted that the Faculty is benefiting from involvement in ANZCA's Examinations Advancement project in terms of developing parallel processes and ensuring that the quality of examinations is upheld.

FPM Training Program and vision for the future: The Vice-Dean reported that the FPM continues to work to enhance its educational offerings and build on its strong international reputation. The Faculty is almost at the end of the three year curriculum evaluation period and the Learning and Development Committee continues to work on refining the program.

Paediatric pain medicine has been identified as an important subspecialty area to develop further. Opportunities are being explored to provide a quality training program for people

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who would want to work in this area as well as advocate for services for a group of people who are more disadvantaged than adult patients.

Responding to feedback from its Fellowship, the Faculty is also exploring opportunities for developing training opportunities in interventional pain medicine based on the sociopsychobiomedical model. Discussions are still at Board level working through the issues to achieve some clarity in this space, noting the overlap with other disciplines in this area.

There being no further business, Dr Chris Hayes thanked Fellows for their participation and closed the meeting at 12.45pm.