

## From the state president

Following is my annual report to the NSW Branch AGM in August.

### Membership for NSW & ACT

NSW had 563 members at 30 June. Our state holds the largest number of members. Building membership is a constant charter for us and we continue to work hard promoting AAPM as the professional body for practice managers.

### Secretariat services

This year we engaged AAPM head office to supply us with secretariat services. The transition from McCalls in Queensland was time consuming, costly, and at times difficult. We hope our members were not disadvantaged during the transition period.

### Financials for 2010/11

NSW assisted AAPM head office in implementing a strategy to better manage the association's finances. This included forming one bank account and handing much of the reporting into one set of accounts kept at AAPM head office. This has been a time-consuming process and was completed on 30 June 2010.

The state treasurers will now set budgets to be submitted to head office then work with head office to ensure accurate reporting of income generated by state activities. AAPM National Board requested from all states to allow head office to use

all state membership subscription fees to build a stronger organization. This meant that NSW had to deliver its education program, cover the expenses of a secretariat handover and manage day-to-day state running costs with the income generated by our education program and sponsorship. I am happy to say we achieved this with having to draw a minimal amount from our previous savings. This is most commendable and I applaud the committee, our sponsors and our members for their support.



### Sponsorship and partnerships

This year we have been sponsored by Cutcher and Neale, UNEP, Douglas Hanly Moir, Hesta, Avant and Medfin.

### Education program for 2011

For our strategic planning meeting in September 2010 we summarised feedback from our programs, your reasons for joining AAPM and our member feedback survey conducted by AAPM head office. With this information we planned our most ambitious education agenda ever.

*cont. next page*

### AAPM NSW Sponsors



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### Your NSW committee

President: Angela Mason-Lynch - [angela.mason@bigpond.com](mailto:angela.mason@bigpond.com)  
Vice-president: Tania Worroll - [worrolls@tpg.com.au](mailto:worrolls@tpg.com.au)  
Treasurer: Caroline O'Donnell - [carolineo@aol.com.au](mailto:carolineo@aol.com.au)  
Secretary: Sue Gentles - [susan.gentles@maynooth.com.au](mailto:susan.gentles@maynooth.com.au)  
AAPM NSW Board representative: Debra Smith - [da.smith@internode.on.net](mailto:da.smith@internode.on.net)  
Gary Smith - [gsmith@tindale.com.au](mailto:gsmith@tindale.com.au)  
Marina Fulcher - [marina.braeside@gmail.com](mailto:marina.braeside@gmail.com)  
Daphne Kneale - [daphnekneale@optusnet.com.au](mailto:daphnekneale@optusnet.com.au)  
Helen Eirth - [heirth@bsmp.com.au](mailto:heirth@bsmp.com.au)  
Tracey Duddek - [pm@georgestmedical.com.au](mailto:pm@georgestmedical.com.au)  
Anne Curtis - [ftmc.anne@nunet.com.au](mailto:ftmc.anne@nunet.com.au)

## From the state president, cont.

For 2011 we have run, or are scheduled to run, 40 education events made up of half-day receptionist training, half day practice manager foundation days, half day practice management master classes and multiple e-seminars.

These events have been run all over our state so that all members can attend without travelling too far. Despite broad reports of low attendance in the health industry our events have been mostly very well attended and always covered costs.

### Networking groups

We rely on an enthusiastic member to start networking group dinners and have had around 14 so far this year. These are a popular way of remaining current and talking to others in your industry. If you think you would like to be a "champion" for your area, please give me a call and I will assist you in setting up a local group.

### PM of the year

By the time you are reading this we will have had our PM of The Year award. We had many nominations this year and had to make some difficult culling decisions. The panel of judges consisted of six delegates from leading bodies in our health industry.

### Newsletter

We hope our newsletter continues to give our readers current relevant information.

### New members

We welcome the following new members to NSW Branch.

Beatrice Gill	Tuggerah
Celine Hamid	Wagga Wagga
Jody McCarthy	Gosford
Nelson Plaza Clinic	Nelson Bay
Tejinder Pal	Greta
Catherine Ryan	Finley
RoseAnn Roache	Hurstville
Vaughn Shelton	East Ballina

### Policy and procedure document for NSW

Our NSW committee has worked on a detailed P&P manual to give guidance to our committee on how to conduct effective and efficient business.

We have sought input from AAPM National Board and head office. This document is almost complete and will be made available for all states to adopt if they wish.

### Website

NSW passed a motion early in 2011 to assist head office in funding the new AAPM webpage.

We are very excited to be involved in this and look forward to a professional site that will be launched at the October conference.

### NSW committee

I feel honoured to have worked with our great team. I thank all committee members for their dedication and commitment particularly Tania Worrel for her wonderful support as my vice and her excellent orientation of the new secretariat, Chris Brown for her endurance and commitment to the national financial strategy implementation, Lesley Macey for her expert advice in the development of the P&P manual and Sue Gentles for her sponsorship leads.

I also would like to recognise our new committee members Helen, Caroline and Anne who have hit the ground running helping with the PM of the Year and the newsletter.

I look forward to another productive and happy 2012.

*Angela Mason-Lynch*

### NSW Practice Manager of the Year

Congratulations to Jo-anne Bacon from The Smith Street Practice in Tamworth, winner of this year's NSW Practice Manager of the Year. Other finalists were Carol Middlebrook from Camden Haven Medical Centre in Laurieton and Nicole Lewis-Bain from Lake Cathie Medical Centre, Lake Cathie. Joanne is pictured here (top left photo) with Caroline O'Donnell (left) and Anne Curtis.



# Case study:

## Practice policy product profile

Do you have the right medical indemnity insurance structure for yourself and your practice?

Australian law requires you as a medical practitioner to hold appropriate medical indemnity insurance as part of your registration obligations.

But what about your practice entity? Is it covered under your individual policy, or is additional “practice” cover required? The reality is that having a financial interest in a medical practice exposes you as a doctor to additional risks that are in many cases not covered by your personal medical indemnity insurance. Members often ask us whether their practice needs a separate practice policy, and why each doctor can't rely on their own personal medical indemnity policy. There are a number of reasons why a separate practice policy may be needed:



**1. There are different exposures as a doctor and practice owner – you are essentially wearing “two hats”:** Consider a GP clinic owned by four GPs and using example four in the “Practice owner exposures” image above right. A person arrives at reception complaining of chest pain. Practice protocols clearly state the receptionist should alert one of the GPs immediately to provide emergency treatment (and if none are available, then call an ambulance). The receptionist is new to the practice and with other patients waiting she makes an error of judgement by simply asking the person to wait in reception. Ten minutes lapse and the person suffers a heart attack and dies.

In this situation:

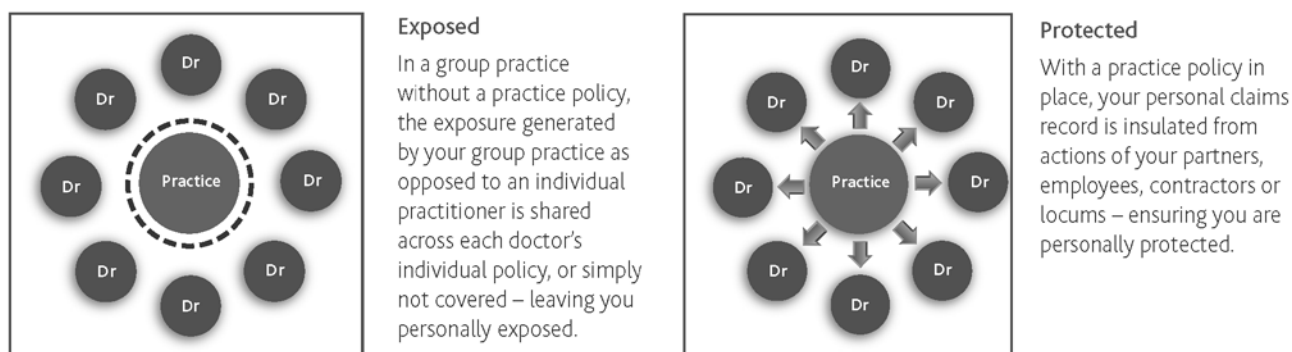
- None of the GPs treated the patient, or were even aware of the existence of the patient.
- The receptionist is not the employee of each GP – she is an employee of the practice entity (each GP owns 25% of the entity).
- The practice clearly trades under a company name.

Should the patient's family decide to bring a claim seeking compensation, it would be likely they would name the practice entity and the receptionist as defendants. Avant's practice policy would respond to cover these allegations.\*

### 2. A practice policy protects the doctor-owners' personal policies

Using this example again, the claim is recorded and managed within the practice policy. This means each GP's personal policy will be unaffected by the practice policy claim – as depicted in the diagram on the next page.

The value of a practice policy is further highlighted by changing the facts in our example - imagine the receptionist, unknown to the doctor-owners, was intoxicated and their impaired judgement caused the error. Avant's practice policy would still cover the “innocent insureds” meaning the owner-doctors and the entity would still be covered.\*



### 3. You are a doctor working in sole practice – is a practice policy still needed?

If you are a sole practitioner (that is, there are no other medical practitioners in your practice) and you meet the staff limits and supervision requirements, you may choose to rely on cover provided by your own Avant Insurance Practitioner Indemnity Insurance Policy<sup>^</sup> (excluding cosmetic procedures). It is important to consider your risk exposures in the context of your practice and whether adding a practice policy may be suitable for your needs.

#### What does it cost?

Practice policy premiums are individually risk rated with factors such as the types of healthcare provided, practice turnover and practice staff taken into account. 'Package pricing' also applies and reduces the practice premium where the doctors hold their personal policy with Avant.

While each practice policy is based on an individual assessment, across our portfolio:

- The average base premium is approximately \$3,650 which is around \$4,500 after government charges.
- The percentage of base premiums over \$10,000 is less than 5%. These policies mainly consist of larger practices or those with high risk activities.

#### New Practice Medical Indemnity Policy



We have recently introduced a new policy which provides a number of enhancements including:

- Loss of documents - \$100,000 sub-limit for costs incurred in replacing or restoring documents that have been damaged or destroyed.
- Legal fees due to:
  - a Medicare inquiry (\$100,000 sub-limit)
  - an inquiry, inquest, investigation and/or complaint relating to healthcare services (\$250,000 sub-limit)
  - reporting a healthcare professional under the mandatory reporting legislation (\$250,000 sub-limit).
- Automatic cover for the transmission of a contagious disease.

\* Applications are subject to approval and cover is subject to the terms and conditions of the policy. For full details please refer to the policy wording available from [avant.org.au](http://avant.org.au) .

<sup>^</sup> Refer to disclaimer on back cover.

## AAPM NSW events

Date	Event	Topic / Comments	Presenter	Co-ordinator
<b>NOVEMBER</b>				
24 November	E-seminar: Finance		Cutcher & Neale	AAPM NSW Ph: 1800 196 679 Email: <a href="mailto:nsw@aapm.org.au">nsw@aapm.org.au</a>
<b>DECEMBER</b>				
Central Coast 1 December	Networking Dinner			Debra Smith Mobile: 0412 802 096 Email: <a href="mailto:da.smith@internode.on.net">da.smith@internode.on.net</a>
UNEP 3 December	AAPM NSW Leadership - 21st Century, Dip		Anne Davis	 <a href="http://unepartnerships.org">unepartnerships</a> Ph: 1800 288 622 Email: <a href="mailto:practicemgt@unep.edu.au">practicemgt@unep.edu.au</a>
UNEP 4 December	AAPM NSW Leadership - 21st Century, Dip		Anne Davis	 <a href="http://unepartnerships.org">unepartnerships</a> Ph: 1800 288 622 Email: <a href="mailto:practicemgt@unep.edu.au">practicemgt@unep.edu.au</a>
<b>FEBRUARY</b>				
2 February 2012	Central Coast net- working dinner			Debra Smith Mobile:0412 802 096 Email: <a href="mailto:nsw@aapm.org.au">nsw@aapm.org.au</a>
e-seminar 9 February 2012	Telehealth	RACGP	Angela Mason- Lynch	AAPM NSW Ph: 1800 196 679 Email: <a href="mailto:nsw@aapm.org.au">nsw@aapm.org.au</a>

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