



General Practice  
Registrars Australia Ltd.

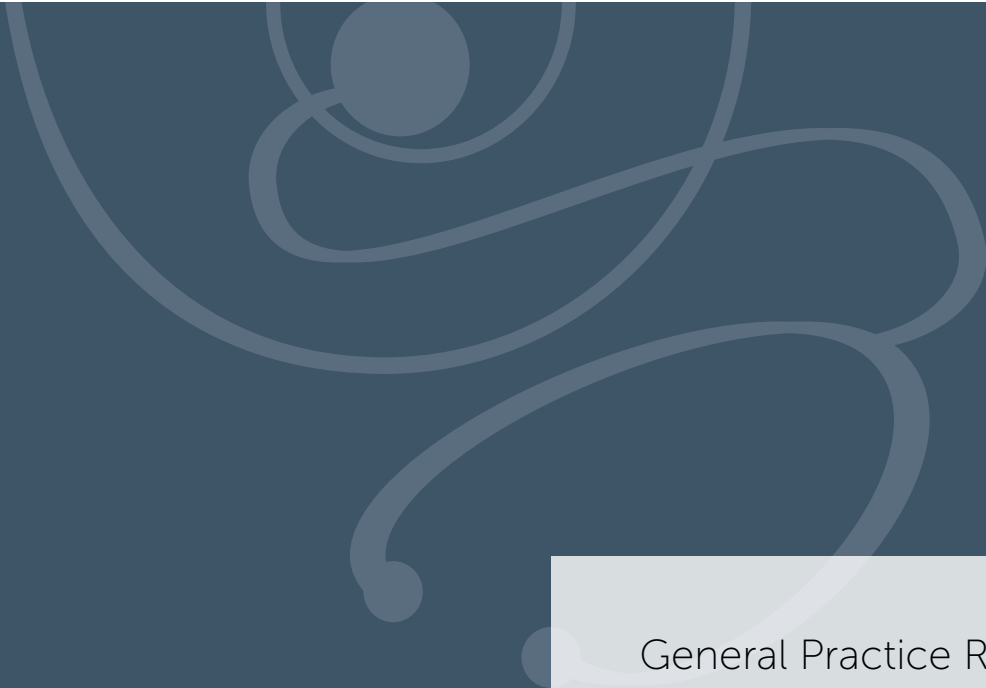
[gpra.org.au](http://gpra.org.au)



# GPRA ANNUAL REPORT 2019/20



GENERAL  
PRACTICE  
REGISTRARS  
AUSTRALIA



General Practice Registrars Australia (GPRA) is the voice for GP trainees in the GP sector. We are the only independent organisation protecting the rights of GP trainees.

We represent over 21,000 members who are: GP trainees and prevocational doctors and medical students interested in general practice.

As the peak national representative body for the next generation of general practitioners in Australia, we advocate for our members in both the general practice sector and with the government on issues that matter to GP trainees.

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# About us

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As the peak national representative body for the next generation of general practitioners in Australia, we advocate for our members in both the general practice sector and with the government on issues that matter to GP trainees.

General Practice Registrars Australia Ltd is registered with the Australian Charities and Not-for-profits Commission (ACNC).



## Our aim

**The aim of GPRA is two-fold:**

1. To shape the future of general practice, so that we improve the health care of all Australians, through excellence in education and training.
2. To ensure that general practice is the medical specialty of choice for junior doctors and medical students seeking a vocational career pathway.

## Our objectives

**To achieve our aim, our key objectives are as follows:**

- support the needs of our members during their training by lobbying for better working conditions and advocating for the interests of general practice
- salary negotiation support and advice for registrar members
- advocate for high-quality general practice training and demonstrating our commitment to excellence in general practice through provision of niche education events, examination preparation support materials, publications, and communications
- support our two networks, the General Practice Student Network (GPSN) and the Future General Practitioner (FGP) network, and auspice the Indigenous General Practice Registrars Network (IGPRN)
- promote general practice as a specialty of choice to potential candidates
- expose our members to the breadth of possibilities for their future careers as GPs.



# Our leadership



**Dr Sama  
Balasubramanian**  
**GPRA PRESIDENT**

Dr Sama Balasubramanian is a GP working in regional NSW in the town of Boorowa and was appointed GPRA president in November 2018. He has a passion for registrar advocacy and wellbeing, and sits on the GPRA Board as a member Director. He was a Registrar Liaison Officer (RLO) with GP Synergy and registrar representative on the WentWest Primary Health Network Clinical Council. Sama was involved in multiple committees for GP Synergy, and was on the management committee for the General Practice Training and Education Conference 2017. He is also a member of the RACGP NSW&ACT Faculty Board.



**Dr Andrew  
Gosbell**  
**CHIEF EXECUTIVE OFFICER**

Andrew is responsible for the overall working of the organisation and works closely with the GPRA Board, key stakeholders and government providing overall direction and management to GPRA to ensure the organisation delivers on its objectives and remains a strong voice for the next generation of general practitioners.

Andrew represents GPRA and its policies and issues at various external stakeholder meetings, and works collaboratively with key stakeholders to advance the GP training environment. Andrew also oversees GPRA's registrar programs including supporting the Indigenous General Practice Registrars Network (IGPRN), policy development and member advocacy and support services.



**Professor  
Michael Kidd**  
**PATRON**

Professor Michael Kidd AM is the Patron of GPSN and GPRA. He is a past president of the Royal Australian College of General Practitioners (RACGP), and a past president of the World Organization of Family Doctors (WONCA). He was appointed as the Director of the new World Health Organization Collaborating Centre on Family Medicine and Primary Care, and, most recently, Principal Medical Advisor to the Commonwealth Department of Health.



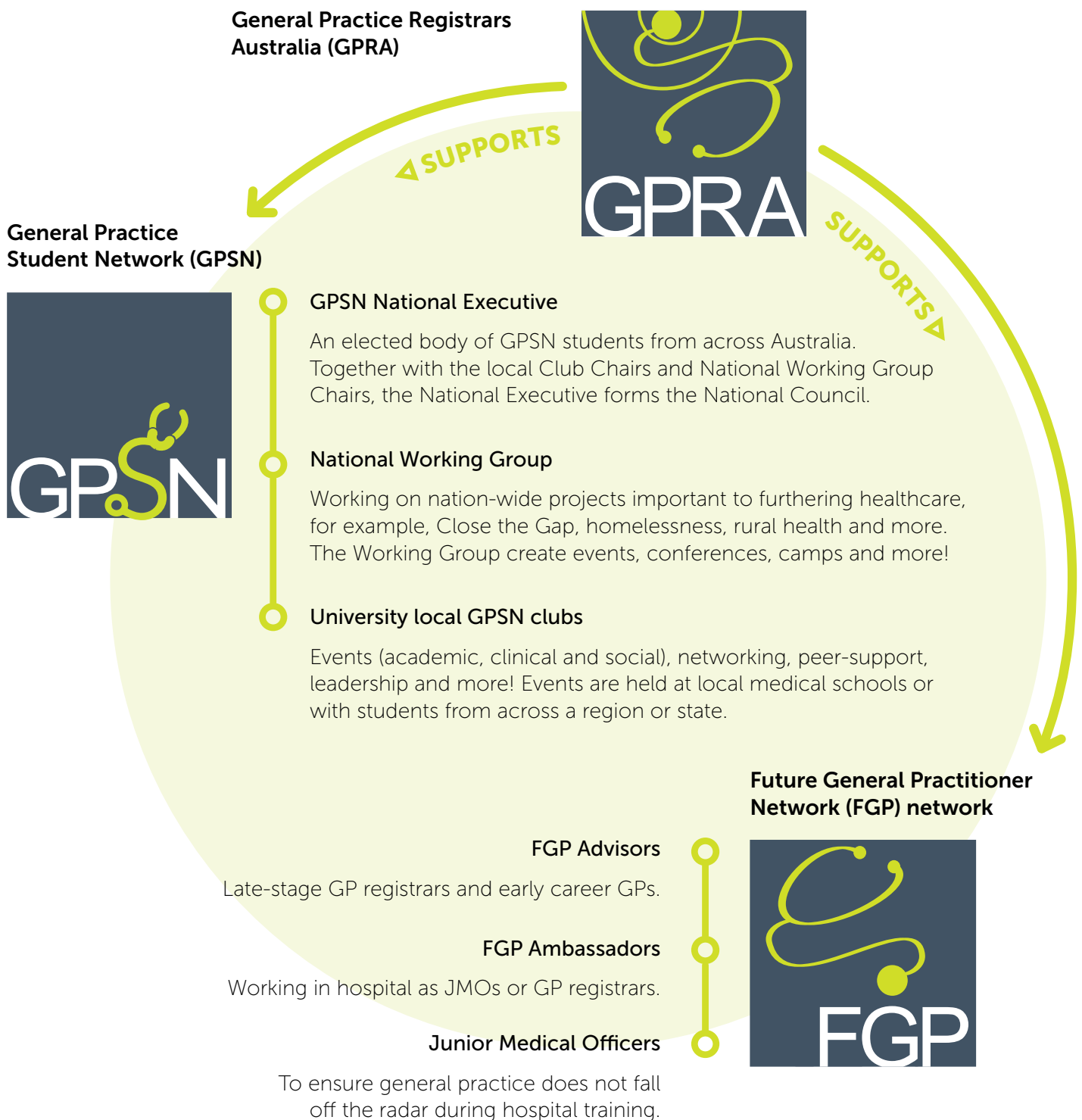
**Mr Scott  
Williams**  
**CHAIR**

Scott Williams is the Chief Executive Officer of the Police Health Group, a not-for-profit member-based private health insurance organisation for both the Police and Emergency Services community. Scott has worked within the healthcare industry for 28 years, having commenced his career as a Registered Nurse and holding many clinical and management roles in both the community and hospital setting. Scott has also held a variety of senior executive roles within public and private health across both Australia and the United Kingdom. His interest in the health service was nurtured at an early age by his grandmother who had held a long career in healthcare herself as an enrolled nurse from the 1950s.

In addition to his CEO role, Scott has been active in serving on several Boards at a local and national level which have included the Chairperson for the international Joanna Briggs Institute Advisory Committee, Ronald McDonald House Charities, the Australian Breastfeeding Association and HeartKids SA/NT. Currently he is also serving as a Director on the Adelaide Primary Health Network, and member of the International Federation of Health Plans - Clinical Effectiveness & High Cost Drugs Expert Panel.

# Our structure and networks

We support more than just GP registrars. The other networks within GPRA further the specific needs of our members and our long-term goals for the healthcare of all Australians.







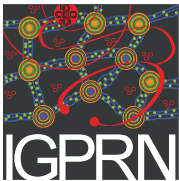
## General Practice Students Network

The General Practice Students Network (GPSN) is run by students interested in general practice as a future medical specialty. Through active student clubs in medical schools at university campuses across Australia, and supported by a National Executive, GPSN offers programs focused on exposing medical students to the inspiring diversity of careers in general practice. Activities include clinical skill sessions, social events, seminars and conferences, peer support and networking opportunities.



## Future General Practitioner Network

The Future General Practitioner (FGP) network is a junior medical officer (JMO) network that promotes general practice during hospital training, ensures that general practice does not fall off the radar, and helps JMOs get a head-start on the pathway to general practice with important information, resources and support—including advice on options within GP training and beyond.



## Indigenous General Practice Registrars Network

The Indigenous General Practice Registrars Network (IGPRN) assists Aboriginal and Torres Strait Islander GP registrars through to fellowship by providing peer-to-peer support throughout their training and assessment. The network provides support in challenging times, and also celebrates achievements. IGPRN undertakes exam preparation and peer debriefing via online study groups, discussion forums, and face-to-face workshops each year.

Students from University of Sydney, Notre Dame, and UNSW at orientation day 2020.



# President's report



I hope my report finds all members as safe and well as possible in these times. Please reach out for support when you need it; we are here to help you. Thank you for your work during the COVID-19 pandemic as the frontline of the healthcare system. You are the future of general practice, and therefore changes to general practice training must be centred around your needs.

## Employment conditions

Over the last two years, we have been working hard to move away from systems that held back progress in registrar employment conditions. We have advocated for trainee needs to General Practice Supervisors Australia (GPSA), the Royal Australian College of General Practitioners (RACGP), the Australian College of Rural and Remote Medicine (ACRRM), Department of Health (DoH), the Regional Training Organisations (RTOs) and the Australian Medical Association (AMA).

Our approach is one of firmly stressing the needs of trainees while working with fellow stakeholders to come up with collaborative solutions. We believe that GP trainees should be free to express what they want, without simply being told what they are meant to have.

From surveying and talking to our members about what they want, we believe that any systems solution to inequities relies on a few key factors. The base rate of pay needs to be improved to move towards those of trainees in other specialties. Employment entitlements such as paid parental leave and study leave need to be addressed, with portability of entitlements a possibility. There is also significant inequity created by the 13-week billing cycle (maximum) that may be implemented by employers.

These issues were considered in our discussion paper on employment conditions for GP registrars, released in the last quarter of 2019/20. We now move forward with a roundtable discussion which seeks to provide a collaborative voice that outlines the problems that need to be addressed. Through this, I believe we can achieve our aims.

## COVID-19 and advocacy

GPRA has been involved across the health system in advocating for issues affecting GP registrars due to the COVID-19 pandemic. This has ranged from advocating for adequate personal protective equipment (PPE), lobbying for funding to offset the loss of work hours trainees have experienced, as well as local issues that have arisen during the pandemic.

We have been engaged in regular teleconferences with the DoH. We also provided significant input into the Department of Health's COVID-19 Support Policy,

providing the GP trainees' viewpoint to ensure appropriate flexibilities were integrated.

GPRA will continue to fight hard for you in representing the best interests of GP trainees to policymakers. If you think something else needs to be addressed, please let us know.

We have also had to change the way we run the GPRA Advisory Council. We now virtually meet up to discuss trainee issues and advocate for your needs. With this approach we have been able to ensure a diverse range of opinions across all states and territories can be represented.

## Acknowledgements

I would like to formally acknowledge the GPRA Board for their hard-work and advocacy over the past year. Our newly-appointed members Xander Alpherts, Dr Erin O'Donnell-Taylor and Dr Antony Bolton bring expertise, wisdom, and new opinions to contribute to our Board's direction and approach.

Our registrar advisor and past-president Dr Melanie Smith has been an invaluable asset to registrars in the new role of Registrar Advisor. I would like to recognise the tireless work of our team including Rachel Sharp and Mylo Norman (communications, marketing, and design), Vicky Triantafylaros (sponsorship and events), to Mandy McDonald-Susic and Ayshika Jayatilaka (administration and finance) who both keep everything organised. Finally, to Dr Andrew Gosbell, whose wise counsel and guidance has kept me sane this last year.

It has been an absolute privilege to serve you as GPRA President over the last two years. If ongoing cohorts of general practice trainees remain as vocal, engaged, and interested in representation, then general practice truly has a bright future. The ongoing diversification of registrar advocacy, sophistication of trainee messages and enthusiasm to adopt representative roles will be the key to sustainably driving a force for good in general practice training.

A handwritten signature in blue ink, reading 'Sama Balasubramanian'.

Dr Sama Balasubramanian



# Chairperson's report

On behalf of the Board, I am pleased to provide the Chairperson's report for General Practice Registrars Australia (GPRA) for 2019/20.



It is not surprising that the most notable impact has been the coronavirus pandemic. With the Directors spread out across the country and with the restrictions on domestic travel, this has meant a reliance on video conferencing platforms as the closest substitute to face-to-face meetings. This has also meant a complete reorganisation of scheduled Board meetings from the normal, full-day Saturday held every quarter, with ad-hoc teleconferences in-between, to a shift into a monthly, two-hour weeknight video conference. With several new Directors it has been particularly challenging to support their induction to GPRA. Notably, two Directors have had all of their induction and their meet-and-greets completed in a virtual environment.

GPRA CEO Dr Andrew Gosbell has responded to these challenges in terms of informing and reporting to the Department of Health regarding grant funding acquittal, remote working of all staff, and to continue to provide a service to our members, who are facing their own unique challenges in a pandemic world.

The early part of 2020 has presented many challenges. The Board is remaining ever vigilant as the full impacts of the pandemic—both physically, mentally, and financially—are yet to be fully realised.

## Governance

The organisation's internal practices and procedures continue to be a focus for the Board. The challenges from the pandemic are a perfect example of why it is important to maintain a strong focus on governance—not only be able to respond to various regulatory and reporting requirements but to maintain the agility to effectively upturn practice in order to deliver the same outcome in a very different setting. I am pleased to report that, as with the prior years, we have had no regulatory breaches for 2019/20.

The Board had undertaken a detailed Board evaluation (as in previous years), however the training scheduled has been postponed until later due to the current travel restrictions.

Performance evaluations were also completed on the CEO, Chair, President and Directors in 2019, which are executed on an annual basis.

## Board Membership

In line with Board renewal practices there have again been a number of changes this year with the Board

membership in 2019/20, due mainly to the completion of tenures of past Directors and the decision to increase the elected member numbers following the 2019 Annual General Meeting (AGM).

In the elected member positions, a total of three new Directors were appointed throughout the financial year. We welcomed Dr Jessica Tidemann in November 2019, and more recently, Dr Erin O'Donnell-Taylor and Dr Antony Bolton in April 2020. Dr Sama Balasubramanian will complete his tenure in late 2020 as President, with succession planning a key component of success for the incoming President.

Xander Alpherts also joined the Board in August 2019 to the vacant appointed Director role with significant experience within the financial services industry. Xander has also assumed the Chair role of the Board's Finance and Risk Management sub-committee.

Dr Eranthi Hettiarachchi, stepped down from her elected Director role following the completion of her full term in November 2019. Although Dr Melanie Smith had completed her time as President the previous year, she remained on the Board in the role of past president until November 2019.

I would like to thank both Eranthi and Melanie for their contributions—especially for their lived experience of transition through general practice training during their time on the Board.

The Board continues to support the equality agenda and has a gender ratio of 50:50 of females to males, well ahead of the current industry average.

## Acknowledgements

As Chair, I would like to thank all the Directors—both our new appointees and those who left us in 2019/20—for their outstanding contributions to the Board and in particular with the recent challenges for agility in responding to the impacts of the global pandemic.

The year ahead is one that will continue to have great uncertainty and significant demands on health practitioners—concerns which are front and centre for the GPRA Board as we all learn to navigate in this new world.

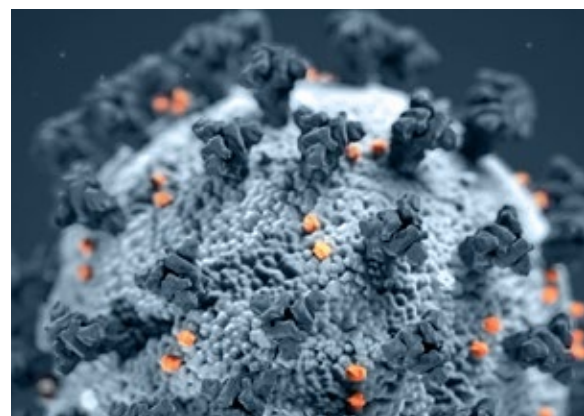


Scott Williams

# A focus on COVID-19

**The global coronavirus pandemic, that emerged in late 2019, has plunged our nation, our communities, and our members into a period of unprecedented disruption and significant challenge.**

GPRA's response to COVID-19 involved rapid re-prioritisation of activities to focus on providing support for, and advocating on behalf of, GPRA members impacted by the pandemic.

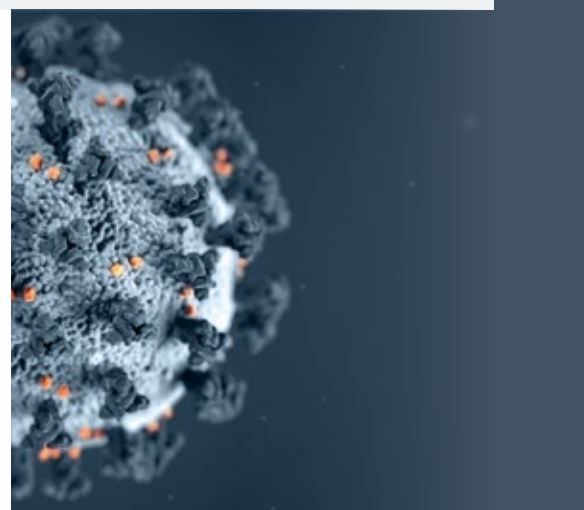


The following key activities were delivered by GPRA in response to COVID-19:

- COVID-19 FAQs webpage, which has been regularly updated (currently 22 FAQs with over 1,200 page views).
- Advocacy to sector stakeholders to ensure flexible and lenient approach to AGPT, College and RTO policies and procedures (in particular, training time caps and other training obligations) for all GP trainees including:
  - Providing input to the Department of Health on a new AGPT COVID-19 Support Policy 2020
  - Attending weekly Primary Health Care COVID-19 Response teleconferences to update the Deputy Chief Medical Officer on issue of concern to GP trainees
  - Representations to the RTO Network and individual RTOs
  - Media Releases:
    - Need for adequate Personal Protective Equipment (PPE)
    - Supporting expedited COVID-19 testing for healthcare workers.
- Two "pulse" surveys of GP trainees on the impacts of COVID-19 on their employment, training, and wellbeing, with findings shared widely with the Department of Health (DoH) and sector stakeholders.
- Webinars to support GP trainee needs, provided at no cost:
  - Telehealth consults for GP trainees
  - Optimising your supervision and training with telehealth
  - Q&A: COVID-19 impacts on GP trainee employment and training.
- Resources to assist GP trainees with new training arrangements:
  - Telehealth Supervision Plan template
  - Factsheet on Working From Home.
- Ensuring capacity to provide timely individualised support to GP trainees with a significant increase in number of member enquiries due to COVID-19 impacts.
- Advocacy to the RACGP in relation to the changes to their clinical examinations.

The duration of the pandemic and the long-term impacts on our society and on GP training are unknown. Nonetheless, GPRA will continue to build on the positive outcomes from our initial responses to COVID-19 to ensure that we are well placed to support and advocate for GP trainees in the "new normal" of pandemic-affected training and post-COVID general practice.

The response to COVID-19 and the range of efforts to support GPRA members impacted by the pandemic has been the dominant focus of our activities since mid-March 2020. As a result, some initiatives have been delayed due to limited capacity and the need to rapidly pivot priorities in responding to the pandemic and associated social distancing and travel restrictions. Despite these significant challenges and restrictions on face-to-face events and travel, GPRA has delivered several other substantial outcomes over the past year.



# CEO's report



## GP registrar employment arrangements and the NTCER

GPRA has continued to actively engage in discussions with GP training sector stakeholders on approaches to address long-standing concerns many registrars have with the current employment terms and conditions during their GP training. To facilitate this, in May 2020, GPRA released a Discussion Paper: Employment Conditions for GP Registrars.

Our Paper contributes to the evidence-base to inform potential alternative employment models and aims to ensure that any changes to employment arrangements address the key concerns of GP trainees. The Paper summarises the major issues with current employment arrangements, from the perspective of GP registrars, provides a range of potential solutions and importantly outlines a set of fundamental principles for considering any proposed employment model. In particular, that:

- trainees are not in a worse financial position, or disadvantaged in terms of other entitlements, compared with the current direct employment model;
- training practices' business models can be sustained;
- supervisors and training practices receive appropriate funding support to enable high quality supervision and in-practice teaching;
- trainees are able to access the full breadth of training experiences in community practice, in order to progress through GP training, and this is not adversely impacted by workforce demands or other competing interests;
- any potential conflicts of interest for the employer and/or other parties involved are identified and well managed;
- where possible the need for new infrastructure and/or additional administration or bureaucracy, and the cost this has on the GP training system, is avoided or minimised; and
- there are fair and equitable processes for resolving industrial relations matters or employment grievance issues.

The Discussion Paper has been well received by the GP training sector and informed our consultations with a range of stakeholders, which will continue throughout the coming year as alternative employment models are considered.

Furthermore, GPRA supports any approach that enables pilot projects for a range of potential employment models as a necessary step before any decision on a broad-scale roll-out of a new employment arrangement for GP registrars, so that an evidence-based best option outcome is achieved for GP trainees and other parties.

## Support and advice for GP trainees

Support and advice for members in relation to employment and/or training issues is a core service provided by GPRA. Our Registrar Advisor, Dr Melanie Smith, has continued to provide individual advice to member enquiries; during the initial phases of the pandemic there

was an extraordinary number of enquiries and requests for help from GPRA members.

We have continued to update and create free resources (including free webinars and FAQs) for GP trainees, focusing on understanding the NTCER, negotiating employment agreements, and overcoming problems in GP training and trainee employment.

## Education and exam preparation support

A range of updated and new educational support services have been provided to members at low cost. Examination preparation activities specifically targeted to International Medical Graduate (IMG) doctors were successful and included OSCE preparation workshops and a webinar series on the RACGP written exams. GPRA acknowledges the contribution of Dr Abdul Qadeer J Malhi, who has worked with us to present these sessions.

The 3rd edition of GP companion was launched in August 2019. This publication is a quick reference pocketbook for the most common general practice patient presentations and not-to-be-missed red flags, and promotes general practice as the specialty of choice.

GPRA's publications, focused on preparation for the written and clinical exams, underwent a major peer review and redesign. As a result, the second edition of *The general practice written exams* was in press production in June 2020 and released in July 2020. Similarly, *The general practice clinical cases* (volume one and volume two) underwent a major peer-review and redesign. However, publication was temporarily postponed following the announcement of the changes to the format of the RACGP clinical examinations. Publication of these two volumes will progress throughout the coming year—although the timeline is dependent upon further exam information to be finalised and released by the RACGP.

## Our networks

Over the past year, we have been working to re-establish and strengthen engagement with prevocational doctors through the development of our new Future General Practitioners (FGP) Network, a network for hospital-based prevocational doctors. The FGP network is based on state/regional FGP Advisors, who are late-stage GP registrars or early career GPs, linked to hospital-based FGP Ambassadors within their region, working together to promote general practice as a specialty of choice.

An initial pilot of this program is progressing in three regions: Western Australia, South Australia, and Victoria. FGP Advisors have been engaged and they have recruited doctors as FGP Ambassadors in several hospitals. While COVID-19 adversely impacted several planned face-to-face events, alternative online activities have enabled the FGP network to continue to develop.

GPRA continues to support a vibrant cohort of medical students through a national network of General Practice Student Network (GPSN) university clubs. The introduction of large state-based events has been a recent successful GPSN initiative that has enabled medical students from across universities to connect, participate in skills workshops and gain exposure to GPs and GP trainees.

## Advocacy

Continuing to build an evidence-base for a range of advocacy initiatives, two major surveys were conducted in the past year:

- A survey of around 1,200 medical students gathering information on perceptions on general practice, career pathways decision-making and the role of GPSN.
- The 2019 GP registrar benchmarking survey exploring aspects of employment and training terms and conditions and satisfaction ratings, career intentions, burnout, discrimination, and bullying; with nearly 400 GP trainees responding.

Survey analysis is progressing, and findings will inform a range of future advocacy and research initiatives.

Despite the coronavirus pandemic, several GP training reforms, particularly the transition of the Australian General Practice Training (AGPT) program to the GP Colleges from 1 January 2022, is progressing.

It is vital that the needs and expectations of GP trainee are represented in this reform process. To this end, GPRA has held forums with the Department of Health (DoH), the RACGP, and our Advisory Council; we have been actively involved in a range of consultations on the implementation of this transition and the outcomes framework for College-led GP training.

In addition, GPRA is aware that there are GP registrars who are about to commence, or are already undertaking, the AGPT program and who will still be progressing through the training program in 2022. Therefore, GPRA is advocating to ensure that these GP registrars will not be adversely affected during the transition period.

## Operations

Robust cost control and continuation of government funding through our DoH grant, supplemented with revenue from advertising and sales of goods and services, have ensured a continued stable financial position for GPRA. The surplus and substantial levels of equity reported for the current financial year (FY2020) continues the healthy financial performance of the previous year (FY2019).

We are very appreciative of our supporters and sponsors, without whom the range of activities and resources we offer to members would not be possible.

I am very grateful to the small and agile staff team at GPRA. I greatly value their dedication to GPRA; ideas, innovation and enthusiasm; willingness to take on a broad range of activities; productivity and support despite the challenges of working from home during the pandemic; and hard work to continue to build a fantastic organisation for the members.

I am very thankful to the current President, Dr Sama Balasubramanian, and the GPRA Board of Directors led by Chair, Scott Williams, along with the GPRA Registrar Advisor, Dr Melanie Smith, for their support, guidance and wise counsel as we work to continue to develop GPRA to benefit and support its members.

I look forward to continuing to work closely with the committed membership, staff, and supporters to ensure a great future for general practice in Australia.



**Andrew Gosbell, PhD**



# IGPRN report

The Indigenous General Practice Registrars Network (IGPRN) is a peer-focused, member organisation dedicated to supporting Aboriginal and Torres Strait Islander GP trainees. The 2019/20 financial year has provided an opportunity for the network to reflect on its mission and strategy, as it comes to the halfway point of the current three-year funding contract.

The challenges of adapting in the last 12 months have encouraged innovation in the delivery of education and peer support to IGPRN members.

## Workshop events

IGPRN had two face-to-face workshop events planned for the 2019/20 financial year. The first workshop was held in Brisbane from 20 September to 23 September with the support of the local Regional Training Organisation (RTO), General Practice Training Queensland (GPTQ). A total of 17 IGPRN registrars attended the workshop, which consisted of sessions spanning medical education and exam preparation, cultural and social activities.

The second workshop was planned for Broome in April 2020, however, this workshop was unfortunately postponed due to the COVID-19 pandemic and strict restrictions. As the planning for the Broome workshop was in the advanced stages, the network hopes to benefit from the groundwork and relationships which were developed. The Broome workshop sessions have commenced rolling out online, with a four-part Women's Health webinar series completed, and many more educational webinars planned before the end of the year. IGPRN is now looking at alternative formats for workshops so that we can continue to support our members in this important way.

## Chair arrangements, funding and governance

As we planned for the Broome workshop to host the election of the next IGPRN Chair, the nominations process for candidates commenced in early 2020. The delay of the workshop coupled with the uncertainty of the effects of COVID-19 have pushed back the Chair election to the next workshop, planned for November 2020.

IGPRN has made further progress towards incorporation, and this process should be complete by the end of 2020. In July 2020, the network also reached the halfway milestone in its current funding contract, and the IGPRN team have continued to engage with the Department of Health (DoH) on planning for transition to the next contract at the end of 2021.

## Education and Advocacy

Despite the disruption of the April workshop, other IGPRN activities, projects and new initiatives continued throughout the year. The IGPRN Chair represented its members at numerous forums, and the network was active in consultations, advocacy, and reference groups.

In August 2019, IGPRN also welcomed Dr Olivia O'Donoghue to the team as the first dedicated Indigenous Medical Educator. Dr O'Donoghue has been instrumental in continuing to develop and curate educational resources and new initiatives, such as a weekly study group for candidates sitting the clinical exams.

## Partnerships and stakeholders

The network also strengthened new and existing partnerships, benefiting from mutually supportive relationships with General Practice Registrars Australia (GPRA), RTOs, Australian Indigenous Doctors' Association (AIDA), Australian College of Rural and Remote Medicine (ACRRM) and Royal Australian College of General Practitioners (RACGP), and the DoH.

IGPRN also acknowledges significant contributions from volunteer Aboriginal and Torres Strait Islander GP Fellows, who improve the quality of education, peer support and mentoring within the organisation.

As our new programs build momentum, IGPRN continues to improve the quality of existing support; the network is eager to adapt to the challenges of the next year and make the most of the opportunities ahead.



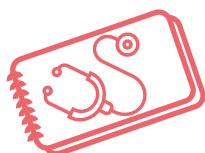
# 2019/20 at a glance

**21k+**  
**MEMBERS**



21,000  
members  
and growing

The 3rd  
edition  
of the *GP  
Companion*  
launched



**FGP  
AMBASSADORS**

**13**

FGP network trial in three regions  
(WA, SA, and Victoria); 3 FGP advisors  
recruited; 13 FGP ambassadors recruited

**50:50**



GPRA  
board  
maintains  
a 50:50  
gender  
ratio



**20.8k**

20,800+ views on our NTCER  
resources webpage

**NTCER VIEWS**

8 new education, exam,  
and support webinars

**8**



**NEW  
WEBINARS**

COVID-19-specific advocacy:

- Access to adequate personal protective equipment (PPE) for all healthcare workers
- expedited COVID-19 testing for all healthcare workers
- ensure the training of GP trainees not negatively impacted by COVID-19



**IGPRN FELLOWS**

**10**

10 of  
IGPRN  
members  
Followed  
in 2019/20



Key areas of focus for  
GPRA advocacy:

- improving GP trainee employment conditions
- transitioning to GP college-led GP training
- RACGP exam transparency



55 GPSN local  
club events;  
7 state-based  
GPSN events

**55**

**GPSN  
EVENTS**



**17%**

**MORE  
VIEWS**

17% increase in  
GPRA website  
page views;  
13% increase  
in GPRA site  
users

**12,000**



GPRA YouTube:  
12,000+ views;  
950+ hours of  
content viewed

**VIEWS**

# Corporate governance statement

Regular meetings of the Board, the Nominations and Remuneration Committee and the Finance, Audit and Risk Management (FARM) Committee ensure that the Board is fully informed and best able to give direction to management. The number of Directors meetings and the numbers attended by each Director are shown in the table below.

	Board meetings 6 MEETINGS HELD		FARM 4 MEETINGS HELD		Nominations & Remuneration 3 MEETINGS HELD	
	Attended	Eligible	Attended	Eligible	Attended	Eligible
Ingrid Williams	6	6	1	-	3	3
Scott Williams	5	6	4	4	3	3
Melanie Smith	2	2	1	-	1	1
Eranthi Hettiarachchi	1	2	1	2	-	-
Sama Balasubramanian	6	6	4	4	1	-
Rebekah Hoffman	6	6	1	-	3	3
Xander Alpherts	6	6	4	4	-	-
Jessica Tidemann	5	5	2	2	-	-
Erin O'Donnell-Taylor	2	2	-	-	1	1
Antony Bolton	2	2	-	-	-	-

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General Practice  
Registrars Australia Ltd.

# **ANNUAL CONCISE FINANCIAL REPORT**

30 June 2020



GENERAL  
PRACTICE  
REGISTRARS  
AUSTRALIA

## Statement of Profit or Loss and Other Comprehensive Income

### For the year ended 30 June 2020

	2020 \$	2019 \$
Revenue from continuing operations	1,228,577	1,171,651
Interest	13,805	7,825
Other Income	152,016	111,184
<b>Total Revenue from Continuing Operations and Other Income</b>	<b>1,394,398</b>	<b>1,290,660</b>
Cost of goods sold	51,957	96,122
Salaries and wages	699,914	595,861
Superannuation	63,710	51,540
Staff expenses	2,972	1,923
Auditing & Consultancy	50,438	33,007
Board expenses	18,444	13,149
Body corporate, rates & land tax	26,124	23,733
Events/meetings/conferences	61,858	42,909
GPSN expenses	22,296	17,346
Travel & accommodation	7,102	2,766
IGPRN expenses	86,360	144,868
Mortgage interest	25,809	29,799
Bank charges	3,299	8,283
Insurance expenses	10,579	9,825
Administration cost	52,340	57,435
IT support & web maintenance	40,445	16,163
Publications	9,102	23,747
Subscriptions	11,943	10,532
Depreciation	14,656	24,319
<b>Total Expenditure</b>	<b>(1,259,348)</b>	<b>(1,203,327)</b>
<b>Net surplus/(deficit) for the year</b>	<b>135,050</b>	<b>87,333</b>
<b>Other comprehensive income</b>		
Revaluation of property, plant and equipment	38,385	-
<b>Total comprehensive Profit (Loss) for the period</b>	<b>173,435</b>	<b>87,333</b>



# Statement of Financial Position

## As at 30 June 2020

	2020	2019
	\$	\$
<b>Current assets</b>		
Cash and cash equivalents	867,753	679,822
Trade and other receivables	12,753	22,560
Prepayments	11,274	-
Inventories	9,606	5,923
<b>Total current assets</b>	<b>901,386</b>	<b>708,305</b>
<b>Non-current assets</b>		
Property, plant and equipment	1,096,385	1,072,656
<b>Total non-current assets</b>	<b>1,096,385</b>	<b>1,072,656</b>
<b>Total assets</b>	<b>1,997,771</b>	<b>1,780,961</b>
<b>Current liabilities</b>		
Trade and other payables	51,065	42,597
Income in advance	27,335	21,200
Borrowings	-	630,000
Provisions – Holiday leave	58,359	39,917
<b>Total current liabilities</b>	<b>136,759</b>	<b>733,714</b>
<b>Non-current liabilities</b>		
Borrowings	630,000	-
Provisions – Long service leave	29,175	18,845
<b>Total non-current liabilities</b>	<b>659,175</b>	<b>18,845</b>
<b>Total liabilities</b>	<b>795,934</b>	<b>752,559</b>
<b>Net assets</b>	<b>1,201,837</b>	<b>1,028,402</b>
<b>Equity</b>		
Asset revaluation reserve	130,910	92,525
Retained earnings	1,070,927	935,877
<b>Total equity</b>	<b>1,201,837</b>	<b>1,028,402</b>

## Statement of Changes in Equity

### For the year ended 30 June 2020

	Asset revaluation reserve	Retained earnings	Total equity
	\$	\$	\$
<b>Balance at 30 June 2018</b>	<b>92,525</b>	<b>848,544</b>	<b>941,069</b>
Net surplus for the year	-	87,333	87,333
<b>Balance at 30 June 2019</b>	<b>92,525</b>	<b>935,877</b>	<b>1,028,402</b>
Revaluation of assets	38,385	-	38,385
Net surplus for the year	-	135,050	135,050
<b>Balance at 30 June 2020</b>	<b>130,910</b>	<b>1,070,927</b>	<b>1,201,837</b>

## Statement of Cash Flows

### For the year ended 30 June 2020

	2020	2019
	\$	\$
<b>Cash flows from operating activities</b>		
Receipts from customers (inclusive of GST)	1,561,743	1,448,650
Payments to suppliers and employees (inclusive of GST)	(1,361,808)	(1,313,899)
Borrowing costs paid	(25,809)	(29,799)
Interest received	13,805	7,825
	<u>187,931</u>	<u>112,777</u>
<b>Net cash inflow/(outflow) from operating activities</b>		
<b>Cash flows from investing activities</b>		
Receipts from sale of property, plant and equipment	-	-
Payments for property, plant and equipment	-	-
	<u>-</u>	<u>-</u>
<b>Net cash inflow from investing activities</b>		
<b>Cash flow from financing activities</b>		
Repayment of loans from Related parties	-	-
	<u>-</u>	<u>-</u>
<b>Net cash outflow from financing activities</b>		
Net cash inflow/(outflow)	187,931	112,777
Cash at the beginning of the year	679,822	567,045
	<u>867,753</u>	<u>679,822</u>
<b>Cash at the end of the year</b>		

## Operating and Financial Review

The concise financial report is an extract from the full financial report for the year ended 30 June 2020. The concise financial report cannot be expected to provide as detailed an understanding of financial performance, financial position and financing and investing activities as the full financial report.

### Statement of Comprehensive Income

Total company revenue increased by \$103,738 from prior year delivering a total turnover of \$1,394,398. The major contributions resulting in this increase in revenue were from a 26% increase in Commonwealth Government Grant and receipt of \$62,500 as cash flow boosts from the Commonwealth Government to reduce the impacts of economic downturn associated with COVID-19. These income increases helped to mitigate the reduction in revenue from sponsorship and educational sales, which have decreased by 37% and 57% respectively this year, mainly due to the impacts of the pandemic on the organisation and our members.

Total expenses increased by \$56,021 in 2019-2020 from \$1,203,327 2018-2019. The main components contributing to the increase in expenditure were:

- Employment of a Medical Educator and changes to the employment term of the Program Manager for Indigenous GP Registrars Network (IGPRN).
- Consultancy fees increase due to:
  - a higher volume of employment enquiries and support provided, in relation to the impacts of COVID-19, addressed by the Registrar Advisor; and
  - the service fees incurred for expert review and medical editing required for the revised editions of educational publications.

- Recruitment of Future GP Network Advisors for Victoria, South Australian and Western Australia to facilitate development of networks to support promotion of GP specialisation to hospital-based junior doctors.

IGPRN workshops and participation in a number of other stakeholder events have been adversely affected this year due to COVID-19 and related restrictions prevailing across Australia.

### Statement of Financial Position

There was a change in the Asset position due to the change in frequency of the advance of Commonwealth Government grant income from quarterly to biannually.

Current liabilities also changed as the commercial property loan of \$630,000 was renegotiated for another three-year term ending in October 2022 and so classified as a non-current liability.

Land and Building was revalued in February 2020 by adopting the capitalisation approach. An increase in the carrying amount arising from the revaluation was credited to the revaluation reserve in equity.

### Statement of Cash Flows

Net decrease in cash holdings primarily related to increased expenditure, as detailed above, was compensated by increase in Government revenue.

# General Practice Registrars Australia Ltd.

## Directors' Declaration

**30 JUNE 2020**

In the directors' opinion:

- (a) These special purpose financial statements satisfy the requirements of the Australian Charities and Not-for-Profits Commission Act 2012, including:
- complying with Accounting Standards, the Australian Charities and Not-for-Profits Commission Act 2012 and other mandatory professional reporting requirements, and
  - giving a true and fair view of the entity's financial position as at 30 June 2020 and of its performance, as represented by the results of its operations, changes in equity and its cash flows, for the financial year ended on that date.
- (b) There are reasonable grounds to believe that the company will be able to pay its debts as to when they become due and payable.

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



Scott Williams

**DIRECTOR**

23 September 2020



# LDAssurance

CHARTERED ACCOUNTANTS

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## INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF GENERAL PRACTICE REGISTRARS AUSTRALIA LTD

### REPORT ON THE CONCISE FINANCIAL REPORT

#### ***Auditor's opinion***

The Concise Financial Report which comprise the statement of financial position as at 30 June 2020, the statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows are derived from the audited financial report of General Practice Registrars Australia Ltd (the Audited Financial Report) for the year ended 30 June 2020.

In our opinion, the accompanying Concise Financial Report are consistent, in all material respects, with the audited financial report, in accordance with Australian Accounting Standards AASB 1039 *Concise Financial Reports*.

#### ***Concise Financial Report***

The Concise Financial Report do not contain all the disclosures required by Australian Accounting Standards for the financial report. Reading the Concise Financial Report, therefore, is not a substitute for reading the audited financial report and the auditor's report thereon. The concise financial report and the Audited Financial Report do not reflect the effects of events that occurred subsequent to the date of our report on the Audited Financial Report.

#### ***The Audited Financial Report and Our Report Thereon***

We expressed an unmodified auditor's opinion on the Audited Financial Report in our report dated 30 September 2020.

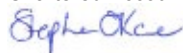
#### ***Board members' responsibility for the financial report***

The members of the board are responsible for the preparation of the Concise Financial Report in accordance with the Australian Accounting Standards AASB 1039 *Concise Financial Reports*.

#### ***Auditor's responsibility***

Our responsibility is to express an opinion on whether the Concise Financial Report is consistent, in all material respects, with the Audited Financial Report based on our procedures, which were conducted in accordance with Auditing Standard ASA 810 *Engagements to Report on Summary Financial Statements*.

LDAssurance  
Chartered Accountants



Stephen O'Kane  
Partner

Dated: 2 October 2020

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# GPRA ANNUAL REPORT 2019/20

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