

**The Royal Australian
and New Zealand
College of
Obstetricians and
Gynaecologists**

**Annual Report
2013**

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President's Report

It is with pleasure that I present to the membership of RANZCOG the Annual Report for the 2012–13 financial year. This report comes a few months into the term of the Eighth RANZCOG Council and the second term of a RANZCOG Board as the governing body of the College and its Standing Committees. Central to effective governance is the position of CEO; Dr Peter White has announced that he will be departing the College after more than 11 years with the College and eight years as CEO. He leaves to assume a senior position with the Australian Medical Council (AMC). All in the College thank him most sincerely for his outstanding service and wish him well in his new position.

Education and Training

The Revised Training program

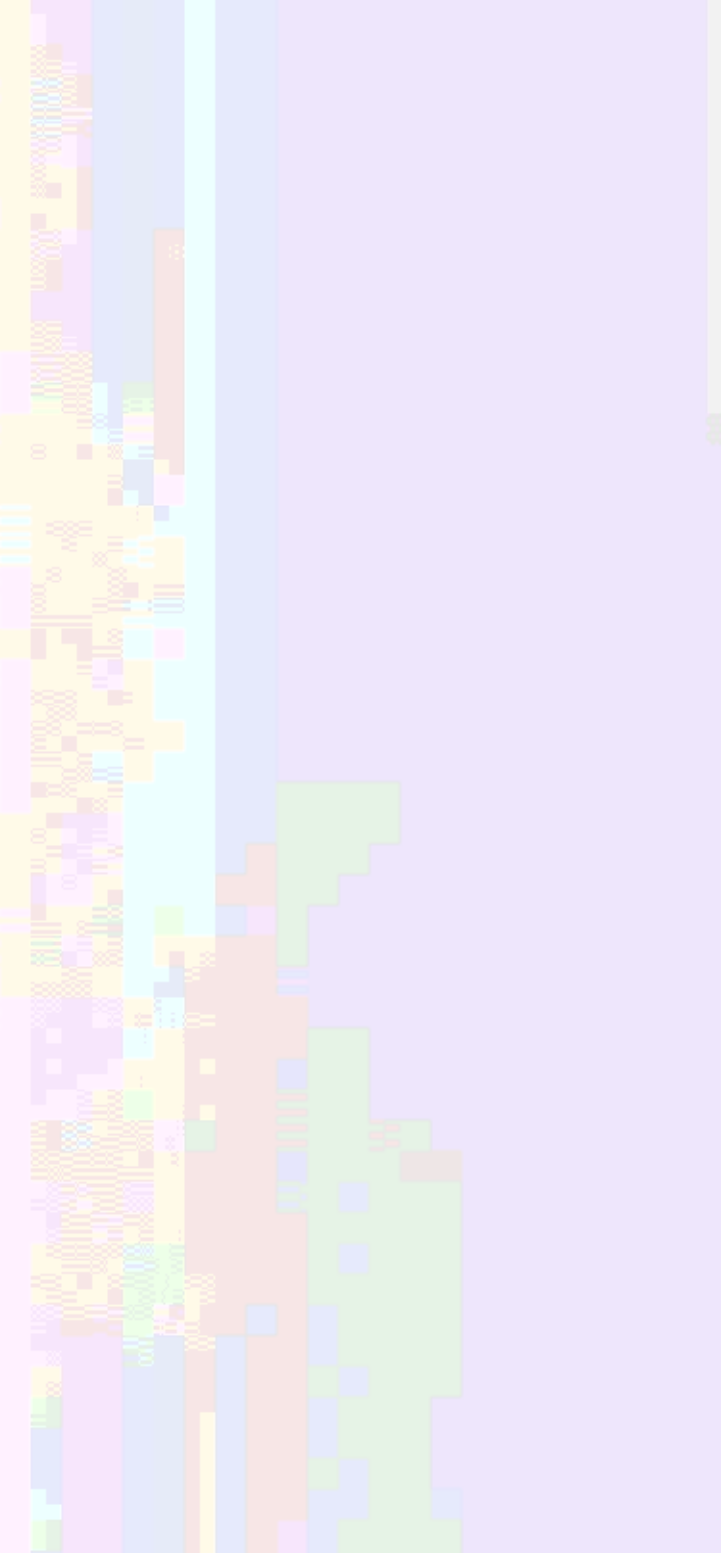
The Revised College RANZCOG Training Program is absolutely central to the College vision for Trainees and our future Fellows, and is now ready to be rolled out for Trainees commencing from December 2013. The quintessential feature is more formal structuring of Advanced Training (formerly Elective Training). Now, all Trainees will have to attain the core knowledge, skills and attributes that comprise a minimum of four years of Core Training (formerly the Integrated Training Program).

However, in the revised training program, the last two years of training will consist of a series of

ASMs, some held jointly across regions, have an established history and are important events for Trainees, Diplomates and Fellows, not only because of the scientific content, but also the collegiality that these meetings foster. As with all College activities, the successful running of a scientific meeting requires enormous commitment of time and energy by Fellows working with a dedicated College staff.

Eligible Midwives

The introduction of Medicare rebates for eligible midwives presents many challenges for members of the College. RANZCOG, the Australian Medical Association (AMA) and the National Association of Specialist Obstetricians and Gynaecologists (NASOG) joined together in mandating the imperative of Consensus Consultation and Referral Guidelines as part of the planned new



endorsed regulations to enable the revised program to be operational for Trainees commencing training from 1 December 2013, as well as enabling aspects of the program to be implemented for current Trainees where it was felt that they would benefit from such introduction. While there

Media and Communications

RANZCOG is widely recognised among print, television and radio reporters from both Australia and New Zealand, in reports relating to women's health issues. Over the past 12 months, the College has successfully increased its communications and media profile and continues to be an important source of information for journalists. Educating this target group to refer interviews on to RANZCOG has been a key ongoing strategy in increasing the College's profile in the media.

The number of referrals to RANZCOG by health organisations, such as the Federal and State(s) Department of Health and the Australian Medical Association (AMA) also continued to rise in 2012–13. Therefore, the College is increasingly being identified externally, by not only the media but also other health professional bodies and groups both in Australia and in New Zealand, as the 'key voice' on women's health such as the growing reports of female genital mutilation in Australia; and the delivery of maternity care to women of Australia and New Zealand.

The key objectives for this year were to:

- enhance and maintain the professional image of RANZCOG in Australia and New Zealand and its dedication to the establishment of a high standard of practice;
- increase the College's presence in the wider media spectrum (including print, internet, radio and television);
- increase the awareness and understanding of the work of the College;
- utilise the College's (re-designed) website's potential as an informative and efficient resource – encouraging all health professionals, media outlets, patients etc, to refer to the website and view it as an informative research tool which provides up-to-date information.
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Continuing Professional Development

In the past financial year, 1855 Fellows participated in the College continuing professional development (CPD) program and a further 37 participated in approved overseas programs. Eleven Fellows were randomly selected for, and successfully completed, the verification check process. During the year, 99 new Fellows entered the CPD Program and 32 Fellows submitted a retirement declaration. There were two Associate Members during the 2012–13 financial year, one of whom was elevated to Fellowship. There were 37 Educational Associates, with 36 participating in the RANZCOG CPD Program. Of these Educational Associates, 20 have been elevated to Fellowship.

CPD Online Program

The CPD Online program will be launched in August 2013. This exciting new development enables Fellows to record their CPD points, upload documents and track their CPD progress over the course of their three-year CPD period. In the new CPD Online program, the term Practice Audit and Reflection (PAR) replaces the term Practice Review and Clinical Risk Management (PR&CRM).

Patient Satisfaction Questionnaire

The CPD Committee reduced the cost of the Patient Satisfaction Questionnaire from \$550 to \$250 and approved a template for self-adapted Practice Patient Satisfaction Questionnaire (PSQ) to assist Fellows in designing and administering PSQs for their practice; this template is available on the RANZCOG website.

Survey requests

The College receives numerous requests from internal and external stakeholders to utilise our database to facilitate online surveys. Surveys are initially reviewed by the Chair and Deputy Chair of the CPD Committee and then referred to the full CPD Committee for ratification. In 2012–13, 12 surveys were approved for distribution.

Medical Council of New Zealand – Audit of Medical Practice

The Medical Council of New Zealand (MCNZ) has mandated compulsory participation in audit of medical practice for all MCNZ-registered practitioners. The CPD Committee agreed that for participation in the cervical cytology audit, New Zealand Fellows will be eligible for 1 CPD point per year in the Self Education category.

Fellowship Review Committee

One very satisfying aspect of this financial year has been the decline in the numbers of defaulting Fellows. A stronger line has been adopted in relation to Fellows not submitting their Annual Points Claim (APC) forms. As RANZCOG Trainees are subject to an assessment being failed if not submitted on time, it was felt that the Fellowship should also be subject to similar standards in submitting their documentation and or completing their requirements for recertification of their Fellowship.

Dr Vijay Roach
Chair, CPD Committee

Val Spark
Senior Coordinator, CPD

Provincial Fellows

The role of the Provincial Fellows Committee (PFC) is to advise the RANZCOG Board on all matters affecting obstetrics and gynaecology practice undertaken by Provincial Fellows. The PFC is also responsible for organising an Annual Scientific Meeting (ASM) for Provincial Fellows.

The recruitment and retention of specialists in provincial areas was again at the forefront of discussions by the PFC over the last 12 months. A Provincial Training Working Party, chaired by Dr Anthony Geraghty, has been formed to ensure the College has training pathways that maximise the numbers choosing to establish practice in provincial centres.


The 2013 Provincial Fellows ASM was held in Mildura, Victoria, and attracted more than 150 delegates. These quality meetings serve the professional needs of rural practitioners and provide an opportunity to network with colleagues and discuss issues of common interest.

The ongoing funding and expansion of the newly named Rural Obstetric and Anaesthetic Locum Scheme (ROALS) continues to play an important role in rural workforce retention and provides ongoing relief for Provincial Fellows. The Provincial Fellows Committee looks forward to the continuation of ROALS to support the rural obstetric workforce.

The Rural Health Continuing Education (RHCE) program provides education opportunities that support CPD for individual specialists as well as groups of specialists in rural and remote locations in Australia.

There are a number of College project grants funded through the RHCE program and involving participation by Provincial Fellows, including:

- Rural Procedural Audit (RPA): RPA provides support to rural centres and individual clinicians to collect and analyse audit data on designated procedures using an electronic data collection tool;
- PRactical Obstetric MultiProfessional Training (PROMPT): PROMPT focuses on the teamwork of obstetric teams when dealing with obstetric emergencies;
- Perinatal Morbidity and Mortality (PNM&M) Audit: PNM&M Audit seeks to improve the audit, investigation and peer review skills of regional and rural obstetricians who have been involved in perinatal adverse events that have resulted in a transfer to a neonatal intensive care unit or a perinatal death; and
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As a result of a bequest by the late Victorian artist Jack Courier, the Foundation holds a number of his lithographic works and the Board of Directors has approved the loan of several items to the College's Regional Committees. Works are currently on display in both the Queensland and New Zealand offices and throughout College House in Melbourne. A full catalogue of the collection is being compiled, with the Board intending that some works will be made available for purchase by members of the College and the Foundation, as well as the public.

In closing, it is with great sadness that I advise of the passing of Mr Graeme Bond on 1 April 2013.

Recipients of the scholarships available for application in 2012 were as follows:

Ella Macknight Memorial Scholarship, 2013–14

Awardee: Dr Kjana Elkje Schwab
Project: Gene Profiling Endometrial Stem/Progenitor Cells in Eutopic Endometrium From Women With Endometriosis
Institution: Monash Institute of Medical Research, The Ritchie Centre
Supervisor: A/Prof Caroline Gargett

Fotheringham Research Fellowship, 2012–13

Awardee: Dr Phillip McChesney
Project: A Randomised, Single Blind Controlled Study Assessing the Effect of Endometrial Injury on Live Birth Rate in Women Who are Undergoing an IVF/ICSI Cycle
Institution: Fertility Associates New Zealand
Supervisor: Prof Robert Norman, Dr Mary Birdsall

Glyn White Research Fellowship, 2013–14

Awardee: Dr Mary Tolcos
Project: Using Diazoxide to Promote Oligodendrocyte Differentiation and Myelination in the IUGR Brain
Institution: Monash Institute of Medical Research, The Ritchie Centre
Supervisor: Prof Euan Wallace

Luke Proposch Perinatal Research Scholarship 2013

Awardee: Dr Ratana Lim
Project: Sirtuin 1 (SIRT1) As a Therapeutic Target to Prevent Preterm Birth
Institution: University of Melbourne, Department of Obstetrics & Gynaecology
Supervisor: Dr Martha Lappas

RANZCOG Fellows' Clinical Research Scholarship 2013

Awardee: Dr Wan Tinn Teh
Project: Genomic Determinants of Uterine Receptivity

Training Accreditation

During the period 1 July 2012 to 30 June 2013, the RANZCOG Training Accreditation Committee (TAC) focused on the following areas.

Changes to Training Program

The TAC has worked with the RANZCOG Board and the Education Strategy Committee to develop and implement new regulations and assessment documentation for the FRANZCOG training program.

These changes, which will take effect as from December 2013, include new three-monthly appraisal reports and six-monthly summative assessment reports for all Trainees, together with the availability of fractional training and the crediting of three-month blocks of training (previously the College has only credited blocks of six months or more). Other changes will relate only to new Trainees entering the program (maximum number of examination attempts).

Re-accreditation of Integrated Training Program hospitals

Ninety hospitals have undergone the re-accreditation process.

Trainees

During the period 1 July 2012 to 30 June 2013, the Trainees' Committee held three teleconference meetings and one face-to-face meeting at College House.

Major initiatives by the Trainees' Committee over this time have included the following:

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Subspecialties

Certification

The College offers seven subspecialty training programs. In the past 12 months, 11 Fellows have met the training and assessment requirements for certification:

Obstetrical & Gynaecological Ultrasound (COGU)	0
Gynaecological Oncology (CGO)	2
Reproductive Endocrinology & Infertility (CREI)	3
Urogynaecology (CU)	0
Maternal Fetal Medicine (CMFM)	4
International Specialist CREI	1
International Specialist COGU	1

The number of current certified subspecialists is as follows: COGU 40; CGO 53; CMFM 52; CREI 71; CU 35. The total number of certified subspecialists is 251. All eligible subspecialists have met the recertification pathway requirements.

* Year 3+ includes Trainees who have completed the training component but not the assessment component and those Specialist International Medical Graduates (IMGs) who have been assessed as substantially comparable to an Australian-trained subspecialist and who are waiting to complete the relevant examination/s.

Certificate of Recognised Training (CORT)

The Certificate of Recognised Training (CORT) is only available to international medical graduates

Historical Collections

A significant consignment of records of the former Royal New Zealand College of Obstetricians and Gynaecologists and its predecessor the New Zealand Council of the Royal College of Obstetricians and Gynaecologists (RCOG) was transferred to the archives in Melbourne from the RANZCOG New Zealand office during the year. Cataloguing of the archival photograph collection was completed.

The College gratefully acknowledges those Fellows and Friends who donated personal papers, MRCOG case records, crested items and a large number of books and journals to the Historical Collections. Donors included Dr J Bates, Dr P Crowe, Dr B Wren, Prof J Leeton, Dr P Renou, Dr R Hyslop, Dr G Betheras, Prof A Korda, Ms I Keszai, Mrs M Houston, Mrs H Furber, Ms F Macdonald, Dr B Wren, Dr R Hyslop, Dr G Bishop, Dr J Roche, Prof D Saunders and Ms B Munro. The books are a valuable addition to the Frank Forster Library and all donations are greatly appreciated.

A computer has been made available for users of the Frank Forster Library that allows members and staff to consult the catalogue while working in the library. The Library's continued participation in the Libraries Australian inter-library loans service (LADDS) has enabled other Australian libraries to access the Library collection. Many requests have been received throughout the year, including one request for a rare book held in the Frank Forster Library that is the only copy in Australia.

Among donations to the Museum this year was a Corometrics twins fetal monitor from the 1970s–1980s donated by Monash Health. It would have been used at either Prince Henry's or Queen Victoria Medical Centre. Monash Health also donated 13 obstetric and gynaecological teaching models from the former Prince Henry's Hospital Nurses' Library. Other donations included three antique pill boxes from Dr Philip Suter; a Decker culdoscope and instrument kit from Dr Alan Hewson; and, from Dr Gabriel Zipser, a trocar and cannula, uterine dilator and original pack of Filshie clips with prototype Filshie clip applicator. The Museum is grateful to the donors.

Two old instruments have been loaned to the Museum under a special loan agreement with the Otago Medical School Alumnus Association in New Zealand. The instruments on loan are a Bossi's uterine dilator and a Simpson's cranioclast. A rare Watson Victor baby incubator from the 1950s–1960s was purchased for the Museum collection during the year.

The College thanks those Fellows and Friends who generously donated a total of \$3,500 to the Friends of the College Collection during the year. The money was used partly to purchase six antiquarian prints for the College Collection and also for the temporary framing of 12 Jack Courier lithographs for display at College House. The Courier lithographs are on loan to the College from the RANZCOG Research Foundation.

Dr Anthony Frumar
Chair, Historical Collections Committee

Sue Cawthorn
Librarian

Gráinne Murphy
Museum Curator

Rosalind Winspear
Archivist

New Zealand

The New Zealand Committee (NZC) and staff had another effective year, working to promote excellence in women's health.

As well as running and developing our regular College programs, we continued to work collaboratively with other colleges and groups on national projects. Much of our work involved liaison and consultation with senior politicians and health officials. Regular Executive Committee teleconferences allowed us to be proactive in this area.

In 2013, Jane Cumming completed her first year as executive officer, Jude Kaveney completed another year as part-time training coordinator and early in the year Makiko Wimbush moved from part-time to full-time hours as events officer. In the middle of the year we moved to a new office in a central location. The new space provides us with comfortable meeting space and is fully compliant with earthquake codes, which was reassuring during the recent quakes.

The NZC projects, initiatives and achievements in 2012–13 included the following:

- Strengthening the working relationship with Hon Tony Ryall, Minister of Health. The Minister attended our office opening and formally met Committee members on a few occasions to discuss matters of mutual concern.
- Contributing to several national projects, including the development of e-prioritisation tools, obstetric and gynaecological standards, guidelines and consensus statements.
- Contributing to debate about health workforce and training issues. As in previous years, this included advocating for women's health training and workforce development through the Medical Council of New Zealand (MCNZ) and Council of Medical Colleges (CMC) and active encouragement to Health Workforce New Zealand (HWNZ) to address long-term, strategic issues facing the medical workforce.
- Making combined media statements and participating in clinical working groups with other maternity providers as an expression of our commitment to the principle of seamless, collaborative care. This included the development of an agreed approach to the local resolution of clinical concerns, an inter-disciplinary session on multiple birth at the Annual Scientific Meeting (ASM) and contribution to the development of a consensus statement on Group B Streptococcus.
- Providing advice, in our capacity as an MCNZ Branch Advisory Body, to determine whether International Medical Graduates' training, qualifications and experience are at the level of a NZ-trained specialist.
- Facilitating four well attended Clinical Directors' Forums and one combined forum with the Midwifery Leaders from each District Health Board (DHB).
- Working with Porter Novelli to increase the profile of women's health issues in the media.
- Re-invigorating the practice visit program.

- Running a successful ASM in Napier that delivered a strong scientific program and workshops and which drew 155 delegates.
- Supporting 115 Trainees involved in the Integrated Training Program (ITP). In December 2012, 20 new Trainees started. We also ran several well-attended training events, including anatomy, ultrasound, research skills and three mock OSCE exams.
- Promoting and administering The Mercia Barnes Trust, which awarded two research grants (\$55,000 total) in March 2013.

We warmly thank all members of the NZC for their commitment and contribution.

Dr John Tait
Chair, New Zealand Committee

Jane Cumming
Executive Officer, New Zealand Office

Western Australia

This was a busy year for the RANZCOG Queensland Regional Committee (QRC), providing a number of opportunities for engagement with the College. Of particular interest was the rejuvenation of the North Queensland scientific meeting, held in October, which was well attended. In conjunction with the meeting, an optional perineal repair workshop was held on the Monday of the long weekend. One of the highlights was the awarding of the Bill Boyd Medal and the inaugural Michael Humphrey Medal for the best presentation of original research or case study by either a current RANZCOG Trainee or recent Fellow who had worked in Mackay, Townsville, Cairns or Mt Isa Hospitals. Both medals were won by Dr Katrina Vogler. The intention is to hold this meeting every two or three years.

QRC meetings are usually held via teleconference, however, in December 2012, the Queensland Training Accreditation (TA) Committee met face to face. The day provided the opportunity to meet and discuss training accreditation issues, including the equity of experience gained throughout the Integrated Training Program (ITP) rotations offered in Queensland. A/Prof Ted Weaver, Chair Qld TA Committee, advised that each Trainee receives approximately equal exposure and training, and, in particular, gynaecological surgical experience. The TA Committee were delighted with the high numbers and standard of applicants that presented for interview for the 18 year-one training positions, for commencement in February 2013.

The QRC offered a Membership pre-exam course in March 2013, a mock OSCE for those sitting the May 2013 OSCE in April, and a DRANZCOG update course in May. These courses are all extremely well received by Trainees. There is an enormous amount of work that goes into these courses and the QRC is very grateful to the course directors, Fellows and Trainees who give up their time to assist.

In May, the RANZCOG Board met in Brisbane and, in conjunction, the QRC hosted a Fellows' Evening. During the evening, Fellows who are involved in collaborative care arrangements with private practice midwives presented their experiences of this model of care to those in attendance. This provided the opportunity to ask questions and debate the topic. More than 50 Fellows attended and it is planned to

South Australia/Northern Territory

DRANZCOG Pre Exam and GP Revision Course

The 2012 DRANZCOG Pre Exam and GP Revision Course held in July. This year, RANZCOG hosted 15 candidates for the mid-year course. All registrations were done by IVvy Management System. GPs who undertook the course qualified for 40 RACGP QI&CPD Category One points as well as for 30 ACRRM PRPD points, 30 PRPD O&G MOPS Points and a two-day obstetric procedural grant for the 2011–13 triennium.

Rural Obstetric and Anaesthetic Locum Scheme

In October 2012, RANZCOG welcomed Federal Government funding to expand the highly successful Specialist Obstetrician Locum Scheme (SOLS) program to support rural anaesthetists. Under the program's new name, the Rural Obstetric and Anaesthetic Locum Scheme (ROALS), the program provides much needed locum relief to rural obstetricians and anaesthetists to take time off for recreation or up-skilling.

ROALS supports the rural obstetric and anaesthetic workforce through the provision of locum

services in rural areas. The program provides much needed locum relief to rural obstetricians and anaesthetists to take time off for recreation or up-skilling.

Fetal Surveillance Education Program

In the past 12 months, the Fetal Surveillance Education Program (FSEP) has further refined and developed its suite of products to support and underpin the stability and long-term success of the program. This includes employing and training a New Zealand-based educator and the development of an app-based educational resource. There has also been another original FSEP publication: Fixed or mixed? A comparison of three, four and mixed-option multiple-choice tests in a Fetal Surveillance Education Program. *BMC Medical Education*, 2013.

Almost 30,000 participants across 170 facilities throughout Australia and New Zealand have now attended the FSEP since it was piloted in 2004.

FSEP Online Programs

Our new online education program, OFSEPlus, was launched in September 2012. This is a sequential compliance-based online program, based on the OFSEP, with self-certification on completion. The OFSEPlus is freely available to those with access to the RANZCOG members' portal, but payment is required by other users. The original online education program, OFSEP, continues to be available as an open resource.

FSEP face-to-face lectures and assessment

The FSEP assessment results from the face-to-face programs are now reported as a score and practitioner level. This is accompanied by a Graphical Item Map (GIM) to help identify individual strengths and weaknesses in fetal surveillance knowledge. Descriptions of the GIM and practitioner level characteristics are made available online at: www.fsep.edu.au.

Perinatal Mortality and Morbidity Audit

RANZCOG and the Paediatrics and Child Health Division of the Royal Australasian College of Physicians (RACP) secured Commonwealth funding to run the Perinatal Mortality and Morbidity (PNM&M) Audit project. This project is covered under the Commonwealth Qualified Privilege Scheme. Qualified Privilege encourages health professionals to undertake efficient quality assurance activities in connection with the provision of certain health services. The Scheme has been designed to provide important safeguards by protecting certain information from disclosure and protecting persons involved in the activity from civil liability.

The project seeks to improve the audit, investigation and peer-review skills of regional and rural obstetricians and paediatricians who have been involved in perinatal adverse events that have resulted in a transfer to a neonatal intensive care unit or a perinatal death.

The audit consists of one full-day visit by two facilitators, including: a retrospective 12–24 month review of records; interviews with staff, including obstetricians, paediatricians, midwives, registrars and anaesthetists; a review of practice surroundings; and checking compliance with the Perinatal Society of Australia and New Zealand (PSANZ) guidelines. Audit facilitators provide feedback on clinical and systems issues and an action plan for improvement is developed in collaboration with the clinician involved.

During the 2012–13 financial year, seven PNM&M Audits were held across Australia. Following the audit visits, a follow-up teleconference is held during which the auditors' written report is discussed and feedback delivered. This allows formal feedback to be given to the visited Fellow in a timely manner.

A/Prof Ian Pettigrew
PNM&M Audit

Angie Spry
RHCE Projects Coordinator

The Practice Visits Project is funded by the Rural Health Continuing Education (RHCE) – Stream One as a unique CPD opportunity for rural and remote Fellows. Initially, RANZCOG was granted funding to conduct 16 site visits in 2011–13. Approval to use the funding to conduct up to 20 visits was subsequently approved by RHCE.

The project involves a one-day site visit by two Fellows. Prior to the visit, the Fellow receiving the visit





Discussion and Analysis of Financial Statements for the Year Ended 30 June 2013

Important Information for Members

The Directors' report, Concise Financial report and Auditor's Statement contained within this document represent a Concise Report. The full financial report of The Royal Australian and New Zealand College of Obstetricians and Gynaecologists and the Audit Reports thereon will be sent, free of charge, to members on request. The concise financial statements cannot be expected to provide as full an understanding of the financial performance, financial position and financing and investing activities as the full report.

Fellows and Members wishing to receive the full financial reports and auditor's report may arrange delivery by calling (03) 9412 2947 or visiting our web site at www.ranzcog.edu.au. The discussion and analysis is provided to assist members in understanding the concise financial report. The information contained in the concise financial report has been derived from the full 2012–13 Financial Report of The Royal Australian and New Zealand College of Obstetricians and Gynaecologists.

Statement of Comprehensive Income

The result from operations other than investments was a surplus of \$1,083,839 compared with \$639,425 in 2011–12. Total income increased by \$2,465,873 during 2012–13. Income from subscriptions and fees increased by \$2,338,138. Grant Monies received and expended increased by \$1,009,036. Interest and Dividends decreased by \$118,165. Other income excluding gain on investments was \$245,900 higher than 2011–12.

Regional offices results moved from a surplus in 2011–12 of \$165,924 to a surplus of \$571,989 in 2012–13. Expenditure in 2012–13 was \$2,021,459, higher than in the previous year. The major increase resulted from Commonwealth grants paid to Diploma trainees under the General Practitioner Procedural Training Program of \$906,818 and \$2,630,186 paid to hospitals under the STP Hospital Funding Program. Salaries and superannuation increased by \$596,258, reflecting a CPI increase, additional leave provisions, performance-based increases and employment of additional staff members.

Audit, legal and consultancy expenses increased by \$69,786, due mainly to externally funded project requirements. Other College expenses increased by \$94,757.

Grants and Donations decreased by \$54,228 due to one-off large donations in the previous year.

Travel and Accommodation increased by \$155,479, representing increased travel associated with funded projects

Statement of Financial Position

Total assets increased by \$3,438,437. The overall increase in value of investments was \$668,613. Net change in written down value of assets held, after depreciation, was an increase of \$925,900. This includes the purchase and offset-out of property in East Melbourne for \$793,058.

Short Term deposits increased by \$1,545,861, with funds held for externally funded projects. Cash and cash equivalents increased by \$613,116 and trade and other receivables decreased by \$315,052.

Liabilities have increased by \$1,865,427. Provision for employee benefits have increased by \$115,034 and grants received in advance have increased by \$1,494,519, with funds held for externally funded projects. Funds of \$353,662 are held in trust, compared with \$172,960 at 30 June 2012.

Statement of Cash Flows

Cash of \$3,491,614 was generated from operating activities. Cash investments of \$2,878,503 has resulted in cash holdings being decreased by \$613,116.

Directors' meetings

Directors' meetings held during the financial year:

Director's meetings held during the financial year were

	Meetings attended	Meetings held during term of office
Dr R Sherwood	2	2
Prof M Permezel	6	6
Prof A Rane	5	6
Dr L Farrell	2	2
Dr D Ngan Kee	2	2
Dr G Pecoraro	5	6
A/Prof Robson	4	6
Dr V Roach	4	4
Dr S Tout	3	4
Dr M Ritossa	4	4

Signed in accordance with the resolution of Directors.



Prof M Permezel, Director
President



Dr M Ritossa, Director
Treasurer


Date: 18 September 2013



Statement of Financial Position as at 30 June 2013

	2013 \$	2012 \$
Current assets		
Cash and cash equivalents	1,569,751	956,635
Trade and other receivables	589,714	904,767
Financial assets	8,066,193	6,520,332
Total current assets	10,225,658	8,381,734
Non-current assets		
Financial assets	5,488,700	4,820,087
Property, plant and equipment	8,511,399	7,585,499
Total non-current assets	14,000,099	12,405,586
Total assets	24,225,757	20,787,320
Current liabilities		
Trade and other payables	9,553,946	7,803,552
Short-term provisions	952,999	837,965
Total current liabilities	10,506,944	8,641,517
Total liabilities	10,506,944	8,641,517
Net assets (liabilities)	13,718,813	

Statement of Cash Flows for the Year Ended 30 June 2013



	2013 \$	2012 \$
Cash flows from operating activities		
Receipts from members	9,530,687	8,000,755
Interest received	464,382	582,547
Donations and appeals	3,400	4,350
Other income	8,278,637	5,953,023

Directors' Declaration

The Directors of The Royal Australian and New Zealand College of Obstetricians and Gynaecologists declare that:

1. The financial statements and notes, as set out on pages 31 to 39 of this Annual Report, are in accordance with the Corporations Act 2001; and
 - a. Comply with Accounting Standards and the *Corporations Regulations 2001*; and
 - b. Give a true and fair view of the financial position as at 30 June 2013 and of the performance for the year ended on that date of the RANZCOG.
2. In the Directors' opinion there are reasonable grounds to believe that RANZCOG will be able to pay its debts as and when they become due and payable.

This statement is made in accordance with the resolution of the Board of Directors.



Prof M Permezel, Director
President



Dr M Ritossa, Director
Treasurer

Date: 18 September 2013

