MINUTES SCCA General Meeting

Date: Saturday, 25th May 2019
Venue: Ballroom, The Star Gold Coast,
1 Casino Drive, Broadbeach, Queensland 4218, Australia.

Attendees:

Directors: Dr Keith Monnington (President), Dr Robert Pennisi (Vice President), Dr Richard Johns, Dr Franz Strydom, Dr Angie Barker.

Members: see sign-in sheets attached as Appendix A

Officers: Lynette Hunt (CEO), Karen Hanni (COO)

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<th>No.</th>
<th>Agenda Item</th>
<th>Action</th>
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<td>1.</td>
<td><strong>Meeting commenced: 5.00pm (AEST)</strong></td>
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<td><strong>Meeting Chair:</strong> Dr Keith Monnington</td>
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<td><strong>Apologies:</strong> Dr Damien Foong, Chris Clifopoulos</td>
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Dr Keith Monnington opened the meeting and thanked members for their attendance.

| 2.  | **Confirmation of voting members**                                          |        |
|     | Karen Hanni confirmed the voting members. Dr Keith Monnington reported a quorum of an SCCA General Meeting was 15 and therefore, this requirement was satisfied. |        |

| 3.  | **Acceptance of minutes of previous meetings:**                              | Resolution carried |
|     | a) SCCA Board – 10 September 2016                                            |        |
|     | **Motion 1:** That the minutes of the Skin Cancer College Australasia (SCCA) Annual General Meeting Board, held on 8 September 2018, be accepted as a true and accurate record. |        |
|     | **Moved:** Chris Wetherall                                                   |        |
|     | **Second:** Jeremy Hay                                                        |        |

| 4.  | **Announcement of election results for SCCA Directors and President commencing a two-year term at the close of this meeting:** |        |
|     | Keith Monnington introduced Lynette Hunt, CEO and Returning Officer for the election. |        |
|     | Lynette Hunt reported there were 7 candidates who were thanked for putting themselves forward for election. |        |
|     | She reported there was a record high voting participation rate of 42 per cent which equated to 397 members. |        |
|     | The successful candidates were:                                               |        |
|     | • Dr Keith Monnington                                                         |        |
|     | Lynette Hunt stated that as Dr Monnington was the only nominee for the President role, he would be returned to that role for the next two years. Returned as Directors were: |        |
• Dr Richard Johns
Joining the Board were:
• Dr Helena Rosengren
Re-joining the board and now formally elected to the role:
• Dr Angie Barker
Lynette Hunt commented the appointments had doubled the female representation on the Board which was a positive result.

5. **President’s report**
Dr Keith Monnington reported the presentation was a combination of the President’s report and a financial statement.
He pointed out the meeting was not an Annual General Meeting (AGM) and the audited accounts would be presented at the AGM in September, which would take place at the Symposium in Melbourne.

Points to note from the presentation:
• Vision and purpose statement was recapped.
• SCCA is a not-for-profit company limited by guarantee.
• In the event of the College being wound up/in receivership/bankruptcy, members were each liable to pay $10.
• SCCA had deductible gift recipient status as an education provider. Surplus funds could be put towards the objects of the College, but there would be no distribution of funds to members, shareholders or directors.
• The College had welcomed its 1000th member and membership was growing.
• Two College ambassadors were named as: Lee Kernaghan (Australia), Leisa Renwick (NZ).
• Dr Monnington expressed the view the Board was harmonious and productive. A great deal had been achieved in the year.
• Main events were the Annual Congress, the Educational Symposium, Kingscliff in September 2018 and the Members Symposium, Melbourne 6-8 September 2019.
• Four pillars achievements:
  - Education: Income from more courses was above budget and course delivery costs were below budget. Attempts to obtain education provider accreditation was meeting with resistance.
  - Standards Committee: nothing further to add to the information covered by CEO in her presentation this morning.
  - Regarding Advocacy NZ, a detailed submission had been made for a health and disability system review. This was in the consultative stage. A submission had also been made to the National Advisory Committee (NAC) of the RNZCGP. The College’s NAC representative, Dr Bill Grove, would be moving a motion at the next meeting that the NAC advocate for skin cancer medicine be recognised by the RNZCGP as a special interest group or sub-speciality.
  - The Advocacy Committee had been disbanded in Australia and a Medicare Working Party had been established in its place.
  - Research: Five grants had been awarded, totalling $118,866.

Dr Monnington presented brief details of an interim financial report to the end of April 2019.
He said the organisation was in a very healthy financial position and pointed out 30 per cent of the projected surplus had been used to fund research, which was an important College objective. Dr Monnington thanked College executives, full-time and part-time office staff for their dedicated hard work.

6. **Treasurer’s report**  
(As discussed in the joined President report and financial statement above).

7. **CEO’s report**  
Lynette Hunt reported on total membership numbers and percentage growth in Australia and New Zealand. She said membership had never slid backwards in the College’s history.  
She reported a membership survey had revealed that gender diversity was improving. Details on the College’s age demographic, time spent on skin cancer medicine, practice locations and current issues were also presented. College-run education events continued to increase year on year and now totalled 28. Five events would run in New Zealand in 2019. Accredited skin cancer doctor numbers have reached 555. Around half of members were now accredited.  
Lynette Hunt encouraged members to stay connected to the College, through member materials and the website/blog.  
She said future focus was recognition, credibility, providing support for members, continuing education activities and continuing good governance for SCCA. Next Skin Cancer Congress would be 1-3 May 2020 at The Star Gold Coast and the Member Symposium would be 6-8 September 2019.  
Dr Monnington also encouraged members to attend the Member Symposium.

8. **Open forum**  
Questions from the floor:  
**Q. Anchita Karmakar – How does the College propose to support its members to potentially get this problem – (Professional Services Review PSR) - solved?**  
(Context: Anchita Karmakar is fronting a cardinal legal case against PSR in September to decide if its investigative process of doctors’ practices is constitutional)  
**A.** Dr Monnington explained that PSR was Professional Services Review - a body examining claiming patterns through Medicare. It had the power to investigate practice Medicare billings and how it compared with a group of peers.  
The organisation held meetings between the doctor concerned and the PSR Director, where PSR could elect to do nothing, ask the doctor to pay back some of the money claimed off Medicare and accept a reprimand, or it could refer the doctor to an Investigations Committee.  
Dr Robert Pennisi introduced himself as the acting Chair of the College Medicare Working Party. He said SCCA had been active in this area and had been addressing the issue on several points.  
A position statement had been issued in relation to Medicare item number 30196 and SCCA had stated particularly that IECs were malignancies, which was contrary to the PSR position.
He asked for Australian doctors, who had been asked to pay back monies or were under investigation - to inform SCCA as some assistance might be offered, providing it was within the SCCA constitution.

Dr Pennisi acknowledged some members had been unfairly targeted.

**Q. Anchita Karmakar – This is the cardinal case that is taking PSR to trial. Anthony Morris QC who is representing in the trial believes this will have a ripple effect for all Medicare billing providers. The funding for the legal case is the issue and any consideration would be appreciated?**

A. Dr Pennisi thanked Anchita for her question.

Dr Monnington commented that Anchita had demonstrated bravery and commitment in taking on the Constitution of Australia in this matter and it would be for the long-term benefit of the profession.

He reported that legal opinion had been obtained by SCCA which was that the confidentiality provisions for investigations by the PSR only applied to the Committee stage. He reminded members that a jail sentence was the possible penalty for breach of the confidentiality of Committee proceedings (106ZR).

Anchita Karmakar said the 106ZR was the statute the legal case was trying to abolish. Success would allow access to the findings of the Committees without the threat of jail.

Dr Monnington reported SCCA was involved as a result of becoming aware of Anchita’s legal fight and investigations faced by two other members.

**Q. Peter Allamby, Perth – How can we get representation on the PSR that our peers are us [SCCA members] and not other GPs?**

A. Dr Phil Hayden was invited to answer the question from the audience.

He reported he had met with the PSR director two years ago to offer input from SCCA.

He said she had handpicked the council of peers. He was told vacancies had already been advertised and filled.

He said members were being compared to every GP – VR (vocationally registered) or non-VR registered in Australia - rather than to a group of procedural GPs.

He said he had been disgusted at the time and in his opinion, the situation had further deteriorated.

**Q. David Harding-Smith – A far greater threat is that PSR is going to look at SCCA members who do skin grafts and flaps. Can Dr Monnington elaborate on the information in his earlier newsletter email to members about it?**

A. Dr Monnington explained that his newsletter column had included a link to a PSR newsletter on the PSR website regarding scope of practice considerations. He said he did not have any further information, except the SCCA would completely disagree with it and it was just one factor in the overall challenge to PSR.

Dr Pennisi said there were multiple issues to be considered in relation to members’ work as skin cancer doctors.

The response from the SCCA would be staged to include confirmation of different statements from PSR which might affect the normal working day of members.

Things like flap repairs would take more argument and he said another approach was planned.
Lynette Hunt reported the SCCA plan was to gather data from College members to present a typical skin cancer doctor billing profile to Medicare. She said the SCCA was investigating the logistics, time and costs of collecting the data. The challenge was to make the data ‘bulletproof’ for presentation to Government and therefore, a statistically valid sample was essential. This would require maximum participation from members. All collected data would be de-identified. Once this had been achieved, a legitimate case could be presented. Dr Pennisi expressed the view that recognition and respect was at the heart of the exercise. Anchita Karmakar commented that an extra step was required. She expressed the view that as the law stood, the data would likely be disregarded. Dr Monnington said the angles taken by SCCA would support Anchita’s legal assault.

Q. Vin Rajeswaran, Cairns – I have spoken to a couple of people who are going through a PSR investigation and it is very stressful. Is there any way we can offer some sort of support group for people who are going through the process?
A. Dr Monnington acknowledged the question as making an excellent point but said it was a very complex issue and SCCA would seek advice about what could be done. He said one of the issues would be to discover who was going through the process and encouraged doctors who had been approached by the PSR to inform the SCCA.
Dr Monnington stated that SCCA’s current policy was not to issue advice to individual members for legal reasons. He said that the SCCA needed to be protected, but acknowledged Vin’s point.

Q. Craig Russell, Toowoomba – The best way we can individually get behind this (PSR issue) is with the High Court challenge. I am prepared to donate cash to this cause and if other donations could be received, and with everything the College is doing in saturating them with issues, they cannot ignore us.
A. Dr Monnington thanked Craig Russell for his statement.

Dr Monnington invited questions from the New Zealand context. None offered.

Q. Neil Chorley – Last year, we had a lot of disruption with the Board and there were legal allegations made. At the end of the proceedings, the accusations were found to be null and void and the people accused of criminality were cleared. I would like to make a motion that in the minutes we could record this result, as this is important for the people who were accused of impropriety.
A. Dr Monnington declared a conflict of interest.
Dr Pennisi said the Board had issued a letter stating its support for the CEO and Board members subject to the criminal allegations stating they had been completely exonerated.
Members of the Board who signed the letter were Murray Govan, Angie Barker, Franz Strydom and Robert Pennisi. One Board member – Dr Damien Foong – did not sign the letter. The three people involved never received an apology which was a requirement of the Ponting Report. Neil Chorley asked for an apology to be put into the minutes so the people involved would not face any repercussions at a future date. Dr Pennisi said the issue would be reported as per these minutes.

Q. David Lester – Regarding pursuing the ties with a university with a view to the diploma being reinstated. Are these discussions continuing and is it likely to happen?
A. Lynette Hunt reported SCCA was in active and positive discussions with a university, the identity of which could not be disclosed because it was subject to commercial considerations. She said Chris Wetherall was actively involved in discussing the academic process with the university, while Lynette Hunt was dealing with business and commercial matters. She said the university involved was excited to work with SCCA to offer a programme offering post graduate qualifications in skin cancer medicine. These would be formal university qualifications, recognised under the Australian Qualifications Framework and would be valid in New Zealand. Assurances had been received that the price would be accessible to both Australians and New Zealanders. She reported that a Graduate Certificate in skin cancer medicine might be the first qualification offered. The next stage might be an exit point in the programme, offering a Graduate Diploma and ultimately a Master’s option might be offered.

Q. Conny Szenczy – I noticed the accredited doctor certificates expire next year. What do we do about continuing that?
A. Lynette Hunt confirmed each accredited skin cancer doctor certificate issued by SCCA was valid until 31 December, 2020. She reported the introduction of a CPD programme was being investigated, which would require doctors to commit to continuous development and learning to maintain accredited status. New certificates would be reissued before expiry of existing documents. These would expire at the end of the triennium in 2022.

Q. No name stated – We know that GPs do most of the skin cancer work in Australia and New Zealand. Why don’t we let the public know about the PSR situation and the fact the billing will be taken off us. This means patients will have to pay more from their own pocket because it won’t be funded by Medicare?
A. Lynette Hunt said potentially, this could be part of an overall strategy, but a public announcement needed to be well thought out to prevent problems. She confirmed it was being considered as one of a list of options.

Q. Chris Wetherall – In the Constitution there are regulations meaning that in the future, it is possible the SCCA could not elect a President because the President must have been a board member for a certain
amount of time. Are there any moves by the Board to create a referendum to change this?
A. Dr Monnington stated that a constitution was a living document which could change with time. He said the constitution would need to be reviewed and relevant changes considered to ensure effective and efficient governance for the SCCA. He said changing the constitution was a major task because it had to go to the membership at a General Meeting, but he confirmed it would be something the Board would look at.

9. **Dr Monnington invited Dr Helena Rosengren to the stage. He said she was one of the original 5 directors when the college was first formed and welcomed her back to the Board.** He stated that Damien Foong has stepped down from his Board role and thanked him for his contributions.

10. **Next meeting:**
Annual General Meeting to be held 7 September 2019 at the Member Symposium in Melbourne.
**Meeting closed at:** 5.56pm (AEST)