



ANZCA
FPM

Annual Report 2024



**AUSTRALIAN AND NEW ZEALAND
COLLEGE OF ANAESTHETISTS
& FACULTY OF PAIN MEDICINE**

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President's message

2024 has been a year of significant progress and reflection for ANZCA, marked by critical projects, key advocacy initiatives, and ongoing collaboration across our community.

From our launch of the Chapter of Perioperative Medicine to our continued focus on patient safety and quality of care, robust assessment processes and enhancing cyber security, the year has been both busy and transformative.

A key focus has been the college's ongoing involvement in discussions on workforce issues, particularly the expedited pathways for internationally trained specialists, including anaesthetists, in Australia and New Zealand.

The pathway for anaesthesia was introduced in December 2024 with minimal consultation and we continue to be proactive in attempting to work with regulators and as a member of the Council of Presidents of Medical Colleges to ensure the best outcomes for our specialist international medical graduates (SIMGs) and, ultimately, for patient care. It has been very challenging to deal with combined ignorance, myths, ideology, and power plays from governments and government institutions that have undermined the relationship with the medical colleges.

We are committed to ensuring that rigorous clinical oversight is not lost in the rush to address rural and regional workforce shortages. With strong lobbying from ANZCA the Medical Board of Australia has agreed that SIMGs on the fast track must complete an Effective Management of Anaesthetic Crises (EMAC) course overseen by the College. However, we continue to be concerned that a formal ANZCA review of their supporting application and workplace-based assessments is not part of Medical Board assessment. ANZCA will create a fairly smooth pathway for expedited SIMGs to go on to fellowship, if they choose, but an external workplace-based assessment will be mandatory.

Our commitment to the health workforce extends well beyond the expedited pathway issue not only for fellows and SIMGs but also trainees. In collaboration with the Australian Society of Anaesthetists we continue to advocate not only for safe patient care but also for the wellbeing of our fellows, trainees, and SIMGs across metropolitan,

rural, and regional areas. The role that SIMGs play, particularly in addressing maldistribution in rural and regional health services is vital. Many of our FANZCAs are now deeply involved in refining and supporting the SIMG assessment program, ensuring that the process is fair, rigorous, and supportive. Nonetheless we continue to advocate for the primary focus to be Australian and New Zealand trained anaesthetists.

A milestone achievement for ANZCA in 2024 was the launch of our Chapter of Perioperative Medicine (POM). The inaugural POM Special Interest Group (SIG) meeting in Melbourne in November recognised nearly 700 new graduates from the Chapter, including 419 anaesthetists, 148 physicians, 71 intensivists, 16 surgeons, and 9 GPs. By December 2024 we had received a total of 835 applications for the qualification via the recognition pathway. This multidisciplinary approach underscores the value of perioperative medicine as an integral part of patient care.

The first cohort of 36 multidisciplinary participants completed the ANZCA qualification course in 2024, with the program being delivered at 21 hospitals across Australia and New Zealand. The success of this program is a testament to the collaborative efforts of various specialties and societies.

Our work with perioperative medicine continues to evolve, with two key committees — the Education and Assessment Committee and the Advocacy and Policy Committee — leading the way. These committees are central to ensuring that the education, assessment, and advocacy needs of the POM community are met. In addition, we have strengthened our focus on POM with the appointment of Dr Vanessa Beavis, an ANZCA past president, as Director of Professional Affairs.

Perioperative Medicine has two major functions. It is part of reducing the hidden pandemic of complications after surgery and to provide new career options for anaesthetists and other specialties.

Patient safety and quality care remain at the heart of everything we do. ANZCA continues to lead the way with its professional documents and through the tireless work of our Safety and Quality Committee. In 2024 we saw the evolution of these documents to include elements of perioperative medicine.

For our trainees there have been changes to the ANZCA training program. Finalised in 2024 for introduction in 2025 these include a new online multiple-choice question assessment and revised supervisor-led emergency scenario training. The revision reflects our commitment to ongoing improvement in training standards to ensure our trainees are equipped with the skills needed for the future. I would like to particularly thank frontline educators, especially supervisors of training, for their ongoing hard work in supporting our trainees.

ANZCA's 2024 meeting calendar was again jam-packed. We hosted a range of scientific meetings, including the highly anticipated Annual Scientific Meeting (ASM) in Brisbane in May, and the lead-in Emerging Leaders Conference. The Aotearoa New Zealand Anaesthesia ASM was held in Auckland in November.

These gatherings, along with numerous SIG meetings continue to be essential opportunities for professional development, networking, and sharing new ideas, often involving research programs and trials.

Not surprisingly, the ANZCA research program continues to flourish, with more than \$A1.5 million in grants supporting research across a diverse range of areas — from lab-based studies on propofol reversal agents to sustainability in anaesthesia and perioperative medicine in First Nations communities.

As part of our commitment to raising the profile of our specialty in the community we celebrated another successful National Anaesthesia Day (NAD) in October, with more than 50 hospital champions supporting the "You're in safe hands" event across both Australia and New Zealand. NAD24 celebrated anaesthesia and anaesthetists using our fellows with real stories to tell. Our posters featured strong messages about the critical role of anaesthetists in the health system.

As ANZCA President I was fortunate to chair our 2024 ANZCA Council meeting in Wellington in September where we had the opportunity to engage with our New Zealand colleagues and reflect on the importance of cultural awareness and inclusion in our work. A highlight of the visit was our adoption of the Te Tiriti o Waitangi Roadmap (2024–2028), a companion document to our Reconciliation Action Plan. Our New Zealand National Committee continues to work closely with local stakeholders on these and other workforce and wellbeing issues.



As we look to the future, we are focused on addressing the challenges and opportunities that come with rapid advances in technology. Cybersecurity remains a priority for the college, with the introduction of multi-factor authentication for continuing professional development access and ongoing efforts to safeguard data. We are also developing a comprehensive artificial intelligence strategy, guided by ANZCA's Chief Executive Officer Nigel Fidgeon and his team to understand how AI can benefit ANZCA while mitigating the associated risks.

Two groups we need to work with more closely are heads of departments of anaesthesia and fellows in private practice. We have started enhancing these relationships and will continue in 2025.

Finally, I would like to acknowledge the dedication and commitment of our fellows, trainees and SIMGs who work tirelessly throughout the year volunteering hundreds of hours of work for the college across our scientific meetings, advocacy and research.

Their support is crucial for our mission.

Professor Dave Story
ANZCA President

CEO's report

The college continues to contribute to meaningful health reform and the safety and quality of anaesthesia care, pain medicine and perioperative medicine in Australia and New Zealand.

Reflecting on 2024, the year presented a range of complex and evolving challenges for the college.

The ongoing pressures of workforce shortages, particularly in health, and the impact of global socio-political issues on our own communities in Australia and New Zealand tested our resilience in new ways.

The strain on the health workforce and attempts by governments in Australia and New Zealand to address this by bringing more internationally trained specialists to work in regional, rural and remote areas through a new expedited specialist pathway prompted ANZCA to play a proactive advocacy role with government, other policy stakeholders and the media.

The college engaged with, and prepared an unprecedented volume of consultations, submissions, and advocacy efforts, with ANZCA leading discussions with regulatory bodies, peak organisations, government agencies, and broader stakeholders across the healthcare sector. Our efforts were driven by a single aim: to contribute to meaningful reform and ensure the ongoing safety and quality of anaesthesia care in Australia and New Zealand.

The implementation of the expedited anaesthesia registration pathway by the Medical Board of Australia and the Medical Council of New Zealand, designed to address workforce shortages by bypassing the traditional college processes, was one of the most significant developments of the year. Anaesthesia was one of four specialties, along with general practice, obstetrics and gynaecology, and psychiatry, identified as priorities for the pathway reform implementation by the end of 2024.

While we remain committed to providing a pathway for Specialist International Medical Graduates (SIMGs) to achieve fellowship, we must also ensure that these new pathways do not compromise the high standards we have established in Australia and New Zealand. The risks associated with these changes must be carefully managed, and we will continue to work collaboratively with the Medical Board of Australia, the Australian Health Practitioner Regulation Agency (Ahpra) and other stakeholders to refine these processes in a way that prioritises patient safety.

We remain concerned about the lack of focus by governments in Australia and New Zealand on growing our domestic medical workforce, particularly given the stagnation in medical student numbers over the last decade. Addressing this gap will require long-term strategies that balance the needs of the workforce with the preservation of quality care.

The growing demand for services, coupled with the lingering effects of the COVID-19 pandemic, our ageing populations and the health equity and access challenges experienced in New Zealand in the face of changing government policy, have amplified the pressure on our profession. These challenges are compounded by the rising push for cost efficiencies, shifting ways of working post-pandemic, and ongoing workforce shortages.

In recognition of ANZCA's role as one of Australia and New Zealand's leading specialist medical colleges we joined the Australian government's new body, the Medical Workforce Advisory Collaboration (MWAC). This is a key opportunity for us to continue to influence policy and workforce reform directly and the first meeting was held in Canberra in August 2024.

Recognising the priority focus of workforce, the Australian Department of Health and Aged Care established MWAC to advise federal, state and territory health ministers, through the Health Workforce Taskforce, on medical workforce issues.

I am pleased to report that throughout 2024 ANZCA made substantial progress in our strategic initiatives. The Chapter of Perioperative Medicine will continue to grow in 2025, with the second cohort of trainees set to benefit from this collaborative qualification. We also saw the successful graduation of the second cohort from the Advanced Certificate in Rural Generalist Anaesthesia. These initiatives represent our commitment to expanding opportunities for education and training in the medical community.

Furthermore, we have invested heavily in the development of new technologies to support our fellows, trainees and SIMGs. This includes the launch of a continuing professional development (CPD) application, the introduction of online exams for the Faculty of Pain Medicine, and advancements in our information technology platforms for qualifications in diving and hyperbaric medicine, as well as rural generalist anaesthesia. These developments ensure that our fellows and trainees have the tools they need to continue providing world-class care in an ever-evolving healthcare landscape.

College leadership changes throughout the year included welcoming Martina Otten as the new Executive Director of the Faculty of Pain Medicine and Kristy Grady as Executive Director, Education and Research. Both bring a wealth of experience in the health sector and will be instrumental in driving the strategic vision of the college.

I would like to extend my heartfelt thanks to all our fellows, trainees, and staff for their ongoing dedication and hard work in the face of these challenges. The support and engagement we have received have been integral to our successes this year.

Thank you for your continued trust and support.

Nigel Fidgeon
ANZCA Chief Executive Officer



Awards, prizes and honours

ANZCA AND FPM AWARDS IN 2024

Robert Orton Medal

ANZCA's most prestigious award is made at the discretion of the ANZCA Council, the sole criterion being distinguished service to anaesthesia.

Associate Professor Meredith Craigie (SA)

Dr Martin Culwick (Qld)

Associate Professor Wayne Morriss (NZ)

Associate Professor Newman Harris (Qld)

Dr Brian Spain AM (NT)

ANZCA Medal

The sole criterion for this award is a major contribution by a fellow to the status of anaesthesia, intensive care, pain medicine or related specialties.

Dr Jacob Koshy (NT)

Dr John McGuinness OAM RFD (NSW)

Dr John Copland (Vic)

Associate Professor Carolyn Arnold (Vic)

Associate Professor Nicole Phillips (NSW)

Dr Anna Hallett (Qld)

ANZCA Council Citation

The ANZCA Citation is awarded at the discretion of ANZCA Council in recognition of significant contributions to college activities.

Dr Jennifer Bruce (WA)

Gilbert Brown Prize

Dr Jess Davies

Dr Angela Tognolini

ANZCA Trainee Research Prize

Dr David Liu

ANZCA Trainee Quality Improvement Prize

Dr Amelia Fitzgerald

ASM Open ePoster Prize

Mr Richard Dunlop

ASM Trainee ePoster Prize

Dr Cyril Tang

FPM Best Free Paper Award

Dr Joanne Vo

Dr Ray Hader Award for Pastoral Care

Awarded to an ANZCA fellow or trainee who is recognised to have made a significant contribution to the welfare of one or more ANZCA trainees in the area of pastoral care.

Dr Colin Baird

Steuart Henderson Award

Awarded to practitioners who have demonstrated a significant contribution to medical education (in anaesthesia or pain medicine), including, but not limited to, ANZCA and FPM fellows and academic experts.

Associate Professor Kara Allen

Dr Alex Konstantatos

Renton Prize

The Renton Prize is awarded to the candidate obtaining the highest marks in the primary examination for fellowship of ANZCA.

Dr Maleck Louis

Dr Varun Venkata Peri

Cecil Gray Prize

The Cecil Gray Prize is awarded to the candidate obtaining the highest marks in the final examination for fellowship of ANZCA.

Dr Yadanar Zaw

Dr Stephen James Sanchez

History and Heritage Research Grant

The History and Heritage Research Grant is awarded to a fellow, trainee, or external researcher to advance the knowledge and understanding of the history of anaesthesia and pain medicine in Australia and New Zealand.

Callum Royle, photographic artist, videographer and writer (Vic)

AUSTRALIA DAY HONOURS

Dr Richard Bailey AM (NSW)

Professor Steven Faux AM (NSW)

Dr Brian Patrick AM CSC (NSW)

KING'S BIRTHDAY HONOURS

Dr Amanda Baric AM (Vic)

Dr Brendan Moore AM (Vic)

Professor Vernon Van Heerden AM (WA)

Clinical Professor Daryl Williams AM (Vic)

Distribution of workforce

ANZCA AND FPM

The geographical distribution of active ANZCA and FPM fellows at December 31, 2024:

	ANZCA	FPM
Australia	5725	432
New Zealand	911	43
Hong Kong	181	23
Singapore	72	14
Malaysia	31	2
Other	153	19

There were 331 new ANZCA fellows and 32 new FPM fellows admitted in 2024.

TRAINING FIGURES

ANZCA admitted a total of 331 new anaesthesia fellows in 2024. In the first sitting of the final exam, 170 candidates were successful. In the second sitting of the final exam, 119 candidates were successful. In the first sitting of the primary exam, 142 candidates were successful. In the second sitting of the primary exam, 148 candidates were successful. Assessment of 119 new specialist international medical graduate (SIMG) applications in Australia and 27 in New Zealand were undertaken. There were five new area of need applications, and 56 SIMGs have gained fellowship.

Of the 32 fellows admitted to FPM, 29 completed the training program and 3 completed the SIMG process. Thirty-four candidates sat the written component in September with those successful invited to sit the oral component in November. Twenty-seven candidates passed the oral component, and the overall exam pass rate was 60 per cent.

ANZCA Council



ANZCA COUNCIL

From left:

Dr Sally Ure

Mr Nigel Fidgeon (ANZCA CEO)

Dr Debra Devonshire

Dr Tanya Selak (ANZCA Vice-President)

Professor David Sturgess

Professor David Story (ANZCA President)

Associate Professor Stu Marshall

Dr Chris Cokis (ANZCA Immediate Past President)

Dr Dilip Kapur (FPM Dean)

Professor Leonie Watterson

Associate Professor Deborah Wilson

Dr Scott Ma

Dr Sarah Nicolson

Dr Adam Levin (New Fellow Councillor)

ANZCA and FPM by numbers

11,256

trainees and fellows (active and retired, anaesthesia and pain medicine)



4341

event registrations (virtual and face-to-face)



496

primary and

418

final exam candidates



32

fellows admitted to FPM

676

graduates of the Chapter of Perioperative Medicine (GChPOM) via the recognition pathway.

7606

anaesthesia and pain medicine active fellows

2043

anaesthesia and pain medicine active trainees



50

anaesthesia trainee courses with 2556 attendees

SPOTLIGHT ON SPECIALIST INTERNATIONAL MEDICAL GRADUATES (SIMGS) IN 2024

363

new fellows with 300 presented at the College Ceremony

1555

physical book loans from the library

47

anaesthesia accreditation site visits

23

media releases

129,425

downloads from the library's e-book collections

21

hospitals in Australia and NZ are Perioperative Medicine Clinical Immersion sites

12

safety alerts

310,148

page views of the library guides

4

new hospital sites in Australia were accredited for training for the 2025 hospital employment year

39

written submissions to government agencies and other relevant stakeholders

2765

articles delivered to fellows and trainees from other libraries with an average turnaround time of less than one day

10

site visits for the Rural Generalist Anaesthesia (RGA) training program

84

meetings with external stakeholders by Policy and Communications Unit

565

hours spent by the research librarian conducting expert literature searches

124

SIMG interviews conducted in Australia, 122 in anaesthesia and two in pain medicine

27

SIMG interviews conducted in New Zealand

56

SIMGs were granted fellowships

8

SIMGs successfully passed their examination

54

SIMGs completed their performance assessment process, with 14 performance assessments completed

45

short-term training (STT) applications were submitted, reflecting a steady increase in STT applications

116

applications for anaesthesia and two for pain medicine were received

SOCIAL MEDIA



INSTAGRAM

2785
followers

28,773
people reached



LINKEDIN

5317
followers

101,736
impressions



YOUTUBE

2295
subscribers

82,927
video views



FACEBOOK

7932
followers

340,954
people reached



BLUESKY

1324
followers

ANZCA Strategic Plan 2023-2025

PURPOSE

To serve our communities by leading high quality care in anaesthesia, perioperative and pain medicine, optimising health and reducing the burden of pain.

STRATEGIC PRIORITIES

Our strategic priorities were formed from an objective view of the strategic opportunities and risks present in the immediate and emerging conditions – and ensure we will be aligned and equipped to generate long-term sustainable value.

STRATEGIC OBJECTIVES

Our objectives reflect our intent and focus as we work to achieve what is expressed in our strategic priorities. In formulating the projects that will deliver against these objectives, we will consider what to take forward from our existing work, what to stop doing and where we can direct energy towards new initiatives.

1. Lead

Anaesthesia, pain medicine and perioperative medicine

2. Engage

Workforce, wellbeing, equity and diversity

3. Support

Fellows, trainees and specialist international medical graduates experience

4. Sustain

Leading specialist medical college

1. Lead

Anaesthesia, pain medicine and perioperative medicine

STRATEGIC PRIORITIES

We will lead anaesthesia, pain medicine and perioperative patient care through evidence-based safety and quality standards and guidance, training, and continuing education across Australia and New Zealand.

We will do this using adaptive training and education, engaging with key industry and government partners, developing and implementing evidence-based standards, applying our research outcomes, and working with health professionals and communities.

HIGHLIGHTS

Perioperative medicine

- The Chapter of Perioperative Medicine (POM) was launched at the Perioperative Medicine Special Interest Group Meeting in Melbourne in November 2024, marking a significant strategic milestone for ANZCA in its commitment to becoming the leading authority in the specialty across Australia and New Zealand.
- As of November 2024, 835 applications were received through the recognition pathway, with 676 applicants successfully recognised as graduates of the Chapter of Perioperative Medicine (GChPOM). These graduates include fellows of ANZCA (62% of the total graduates), the Royal Australasian College of Physicians (21.9%), the College of Intensive Care Medicine (10.5%), the Royal Australasian College of Surgeons (2.4%), Royal Australian College of General Practitioners, the Royal New Zealand College of General Practitioners and the Australian College of Rural and Remote Medicine (1.3%) and other specialty groups including overseas luminaries (1.9%).
- In its inaugural year, the ANZCA Course in Perioperative Medicine enrolled 36 participants across six units of study, providing a unique opportunity for specialists to deepen their expertise in perioperative medicine.
- The appointment of a Director of Professional Affairs (POM) and the establishment of the Board of the Chapter of Perioperative Medicine in November 2024 ensures the governance and strategic oversight of ANZCA's educational offerings, clinical quality, and patient safety in perioperative medicine.
- The chapter's growth strategy focuses on expanding the ANZCA course in perioperative medicine across Australia and New Zealand, especially in regional and remote areas.
- Hospitals with two or more chapter graduates (GChPOM) will be encouraged to participate as clinical immersion sites, supporting the course delivery.
- By the end of 2025, the number of clinical sites is expected to increase by 10 across both countries. The chapter also plans to broaden its educational offerings and develop an affiliation program for its graduates, promoting continued professional development and strengthening the chapter's network.

Faculty of Pain Medicine

- The faculty is leading the development of Australian standards for health practitioner pain management education, advancing goal one of the *National Strategy for Health Practitioner Pain Management Education*.
- Funded by the Australian government, the initiative began in February 2024 and is scheduled for completion by October 2025.

Rural generalist anaesthesia

- Rural generalists with advanced training in anaesthesia play vital roles in providing life-saving services to patients in many regional, rural and remote communities.
- The Advanced Certificate in Rural Generalist Anaesthesia provides training to produce rural generalist anaesthesia graduates who can deliver safe anaesthesia and perioperative care in regional, rural and remote settings for lower-risk patients undergoing elective surgery and patients requiring emergent surgery. This includes obstetric and paediatric patients (within scope of practice) and the resuscitation and stabilisation of patients for transfer when required.
- The Rural Generalist Anaesthesia (RGA) program saw continued interest in 2024 with 42 candidates passing the 2024 viva exams.

Training

- The college's trainee selection project continued in 2024 with extensive stakeholder consultation on the feasibility of implementing recommendations from the initial consultation phase. An implementation strategy has been developed for action in 2025 to introduce a more standardised selection system to support improved equity for applicants including supportive pathways for First Nations people and regional and rural applicants.
- The Curriculum Review Sub-committee (CRSC) was established in 2024 with agreed terms of reference, an agreed workplan and priority activities to be addressed in 2025.

- Phase two of the Online Centralised Exam Preparation Resource (OCEP) project delivered a six-hour online module *Planning for success: A resource for anaesthesia exam preparation* designed to assist fellows and supervisors to support trainees and specialist international medical graduates (SIMGs) in their study journey.
- The project will continue in 2025 with a needs assessment to support the development of knowledge resources for anaesthesia exams.
- The competency-based medical education (CBME) project developed resources to support the introduction of two new assessments for introductory trainees beginning in 2025. The multiple choice questions (MCQ) assessment includes a practice resource, and assessment, both available in Learn@ANZCA. CBME project activities will continue to review and improve usability of workplace-based assessment (WBA) forms and explore options for improving processes associated with progression decisions.
- The Patient Clinical Interaction Assessment (PCIA) implementation group developed a suite of resources to support the implementation of this new assessment in 2025. Resources include an online PCIA assessor resource and the PCIA Library Guide which provides easy access to the suite of implementation and assessment resources.
- The Accreditation Renewal Steering Group produced a standardised definition, philosophy and purpose of accreditation for inclusion in all ANZCA and FPM training program accreditation handbooks.
- A multi-layered, evidence-based approach was adopted for the development of the newly titled Anaesthesia/Pain medicine Trainee (APT) survey including co-design with anaesthesia and pain trainees. The APT Survey is proposed for launch in late June 2025.

Developments in assessment

- In 2024, ANZCA established a new college-wide assessment governance committee to provide strategic direction and advice on college-wide assessment approaches, and to promote the sharing of best practices across college training programs. The college has also developed an online centralised exam preparation resource to support trainees preparing for their exams.

Faculty of Pain Medicine training

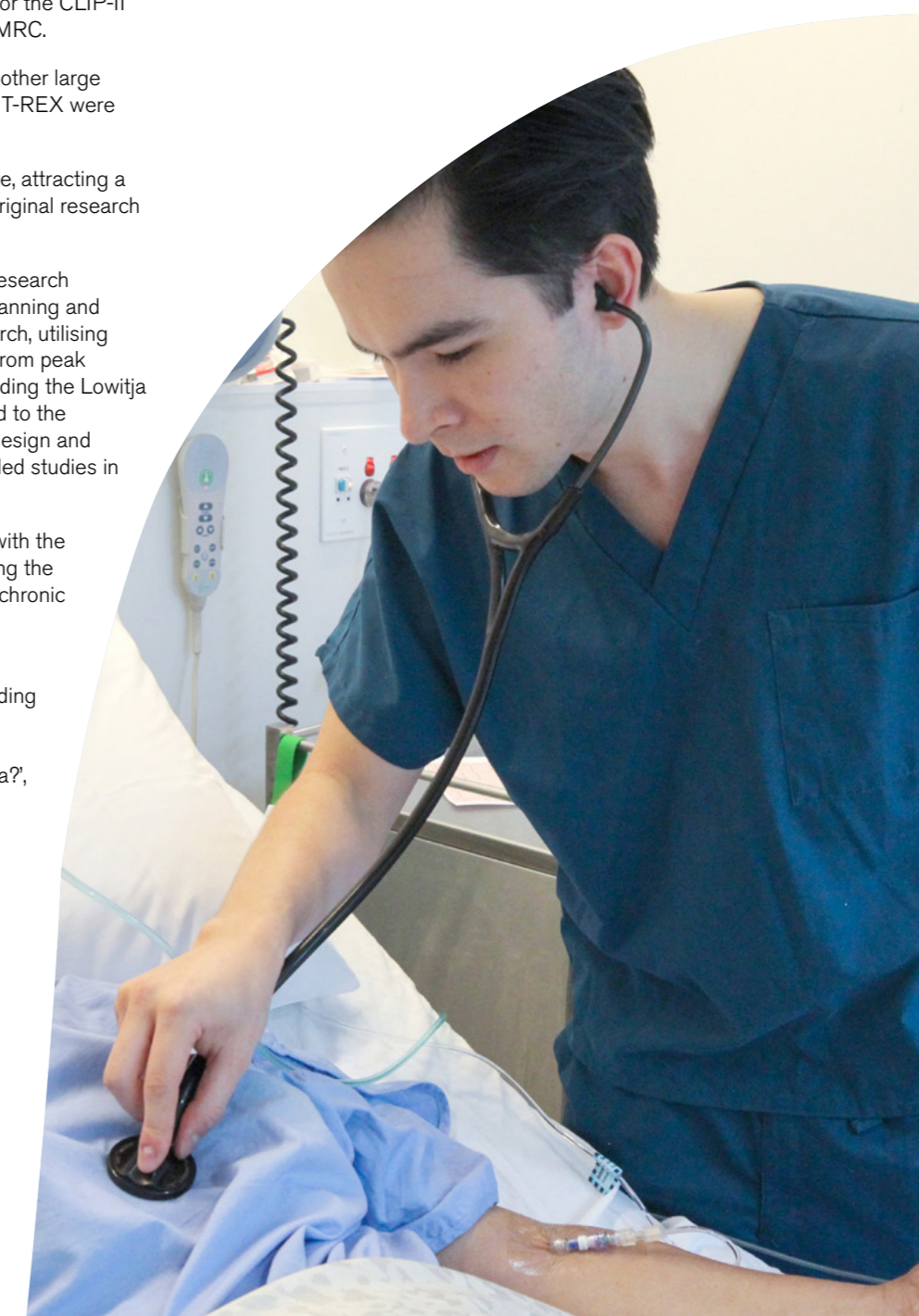
- The faculty progressed an assessment review and approved an assessment framework in 2024. The framework reflects contemporary medical education approaches and was developed with consideration of feedback received from trainees, supervisors and the fellowship through surveys and working groups.
- The review considered the requirements identified by the Australian Medical Council (AMC) and Medical Council of New Zealand during the college reaccreditation process in 2022, adopting a more competency-based medical education approach to assessment and embedding cultural safety training. A staged approach to implementation will be undertaken with minor changes being introduced in 2025.
- The faculty mapped resources that support learning and related areas of the curriculum to the FPM graduate outcome statements to assist trainees plan their learning. The FPM Trainee support resources in Learn@ANZCA have been reorganised to align to this mapping.
- The FPM curriculum was updated to include the primary assessment method by which each learning outcome is assessed. This is aimed at providing greater transparency and clarity for trainees.

Research

- The ANZCA Foundation's research grant application and selection process for studies to commence in 2025 was completed in September, with \$A1.62 million awarded through the ANZCA Research Committee. Fifty applications were received and 28 grants approved after peer-review, including the Academic Enhancement Grant, the Douglas Joseph Professorship, 17 project grants, four second-year project grants, two novice investigator grants, the Patrons Emerging Investigator Grant, one Professional Practice Research Grant, and the Skantha Vallipuram ANZCA Research Scholarship. An allocation of \$A40,000 was also made for ANZCA Clinical Trials Network (CTN) pilot grants.
- The ANZCA Foundation provided \$A1.74 million for 25 studies to commence in 2024, and second-year funding for seven that started in 2023. Outcomes continued to support applications for large peer-reviewed grants for new multicentre clinical trials through the ANZCA CTN, driving future evidence for improvements in clinical practice.

- In August, the CTN reported that it had surpassed A\$73 million in total competitive peer-reviewed funding secured for large investigator-led clinical trials since its inception, through major granting entities including the Australian National Health and Medical Research Council (NHMRC), Medical Research Future Fund, and the Health Research Council of New Zealand. The stream of trials completed and published with this funding has resulted in a strong track record in delivering evidence-based, definitive answers to important questions for improving clinical practice, education, and patient outcomes.
- Patient recruitment commenced for the DECIDE trial on postoperative delirium and was completed for the CLIP-II and ITACS cardiac trials, funded by the NHMRC.
- Outcomes from the DECS-II study and two other large multicentre paediatric trials HAMSTER and T-REX were published in leading medical journals.
- The CTN hosted its largest workshop to date, attracting a record number of trainees who presented original research ideas.
- The ANZCA Foundation and the ANZCA Research Committee also finalised a new guide for planning and conducting Indigenous health-related research, utilising published principles and priorities sourced from peak Indigenous-led research organisations including the Lowitja Institute. The new guide has been appended to the ANZCA Research Strategy to support the design and implementation of ANZCA Foundation-funded studies in Indigenous health.
- The foundation continued its collaboration with the Medibank Better Health Foundation including the funding and implementation of a long-term chronic post-surgical pain follow-up study.
- Two funding applications to the Channel 7 Telethon Trust in Perth were successful, leading to funding of \$A289,668 for two important studies in paediatric anaesthesia: 'What happens to babies' brains under anaesthesia?', and 'Better Understanding, Communication and Care for Kids' Pain'.

- The new W. John Russell ANZCA Research Award for research in anaesthetic equipment, patient safety and education was established by the ANZCA Foundation, after a generous donation from Mrs Jan Russell, and approved by the ANZCA Research Committee, which conferred the inaugural award in September.
- In collaboration with the ANZCA Library three FPM research webinars were conducted to educate and provide information on how to navigate through stages of research activities.



2. Engage

Workforce, wellbeing, equity and diversity

STRATEGIC PRIORITIES

We will continue to improve health and wellbeing, equity, inclusion and diversity of our fellows, trainees, specialist international medical graduates and staff to enable broad and equitable access to care and delivery of high-quality outcomes for patients and communities across Australia and New Zealand.

We will work with diverse communities, particularly Aboriginal and Torres Strait Islander and Māori peoples.

We will work with key stakeholders including colleges, teaching institutions, hospitals, communities and governments to influence workforce distribution, especially in underserved areas, sustainability, wellbeing and equity in training, practice and care.

HIGHLIGHTS

Workforce advocacy

- Workforce advocacy was a significant area of focus for the college, in response to workforce pressures experienced across the health sector following the COVID-19 pandemic. ANZCA remained active, responding to the associated government working groups, consultations and reviews to advocate for the needs of our fellows, trainees and SIMGs.
- The Australian government introduced the expedited registration SIMG pathway for specialist anaesthetists from Ireland and the UK that meet relevant criteria (effective from 23 December 2024). The pathway bypasses existing medical college assessment processes, with the Medical Board of Australia conducting paper-based assessment of SIMGs. As these pathways do not directly lead to ANZCA fellowship, a concurrent pathway to ANZCA fellowship has been developed for this cohort. This pathway allows SIMGs with eligible qualifications to pursue ANZCA fellowship. (Regulation 23 has been updated to include an additional appendix section for the expedited specialist pathway. A full review of Regulation 23 is scheduled for 2025.)
- ANZCA met with the Medical Board of Australia on multiple occasions, issued a media release and wrote to all Australian health ministers calling for an urgent and immediate pause on fast-tracking the registration of overseas-trained doctors without the involvement of medical colleges. This resulted in productive meetings with the Victorian, Queensland and Commonwealth health departments.
- The Medical Council of New Zealand also implemented a similar fast-track process for registration in the provisional vocational scope of practice in New Zealand (effective from 1 November 2024). The eligible SIMGs comprise the UK, Ireland and Australia, with anaesthesia being one of the approved areas of medicine.
- Following ANZCA's submission to the *NSW Special Commission of Inquiry into healthcare funding* in late 2023 multiple targeted information discovery meetings with the commissioners occurred and a detailed witness statement relating to training and accreditation policies and procedures was prepared. College representatives also attended two hearing sessions in 2024.
- During the year the college developed and published the ANZCA Advocacy Plan 2025-2027, which sets out the strategic advocacy planning for the college in four areas including enhancing awareness of the anaesthesia and pain medicine, improving access to specialist pain medicine services, embedding perioperative medicine and ensuring workforce sustainability. It brings together a plan of work to strengthen organisational coherence of our efforts to enhance the college's identity among governments, clinicians, the public and peer agencies.

- The college wrote to, and met with, most Australian state and federal governments on a range of workforce items including workforce shortages, training pipelines and required government support.
- The college was also successful in gaining a position as one of five specialist medical college positions represented on the national Medical Workforce Advisory Collaboration to advise federal, state and territory health ministers on medical workforce matters. The group oversees the ongoing implementation and evaluation of the *National Medical Workforce Strategy 2021-2031* and will seek to match medical workforce planning to community needs. With three meetings occurring to date, the group's workplan has focused on clinical supervision reform and the promotion of generalism (as opposed to sub-specialisation).
- ANZCA also met with the incoming New Zealand Health Minister in April 2024. Key topics of discussion included pain services and the *Mamaenga roa model of care*, perioperative medicine, workforce issues (including a need for anaesthetic technicians), and the potential for a nationally compatible, anaesthesia-specific, electronic patient record.

Regional and rural workforce

- Implementation of initiatives from our regional and rural workforce strategy to improve access to specialist care in regional and rural communities continued throughout the year with a focus on establishing regional and rural-based training rotations in all jurisdictions.
- A new south-west NSW anaesthesia training hub based at Dubbo Base Hospital was established with rotations through Orange Health Service and one year of advanced training at the Royal Prince Alfred Hospital in Sydney.
- Work progressed on a new Darwin-based training rotation (to commence in 2026), with rotations through Alice Springs and a metropolitan Adelaide hospital.
- The college engaged with the Western Australian Regional Committee, WA Country Health Services and heads of departments to progress the establishment of a rural training pathway in Western Australia. These new pathways join the successful Victorian regional training network, NSW training pathways based in Wagga Wagga and Lismore, Queensland's northern training rotation and the Tasmanian Anaesthesia Training Program.
- In November, with funding from the Department of Health and Aged Care's Specialist Training Program, the college employed a dedicated Rural Training Pathways Co-Ordinator to work with stakeholders to improve access to specialist health services in rural and regional areas and develop our rural training pathways.

Other highlights include:

- Consolidation of the Rural Generalist Anaesthesia training program with 343 rural generalists grandparented and awarded an Advanced Certificate in Rural Generalist Anaesthesia and 57 trainees undertaking rural generalist anaesthesia training in 2024.
- The launch of 'Planning for Success' - the college's new exam preparation resource designed to support trainees and specialist international medical graduates (SIMGs) on the exam pathway. Planning for Success will address the varied access to exam preparation courses experienced by anaesthesia trainees in non-metropolitan training sites throughout Australia and also assist fellows and supervisors to support trainees and SIMGs in their study journey.
- The completion of the first phase of a Department of Health and Aged Care funded project to develop flexible accreditation pathways for pain medicine training in rural settings. With potential sustainable and flexible accreditation models identified, phase two of the project will pilot an appropriate model to support specialist pain medicine physician training in a regional area.
- The trainee selection project led by the college education unit is reviewing college attraction and selection strategies to increase representation from under-represented groups including those from a rural background.

FPM

- The faculty has identified six key advocacy priorities:
 - **Increased funding for pain services** – Advocating for greater investment at state and national levels to improve service delivery and patient outcomes.
 - **Raising the profile of pain medicine** – Strengthening recognition of the specialty within the broader healthcare system and among the public.
 - **Improving access to pain services** – Addressing disparities in care, particularly for regional, rural, and remote communities, as well as Aboriginal, Torres Strait Islander, and Māori peoples.
 - **Ensuring health practitioners are well-informed** – Promoting best-practice, evidence-based pain assessment and care across all healthcare disciplines.
 - **Supporting the welfare of pain specialists** – Advocating for initiatives that promote clinician wellbeing, reduce burnout, and support workforce sustainability.
 - **Encouraging research and innovation** – Strengthening research funding and fostering innovation in pain medicine to drive new treatments and improved models of care.

- In 2024, the faculty expanded its digital presence by launching a dedicated LinkedIn page, fostering positive engagement from the healthcare community and reaching over 430 followers. This platform serves as a hub for advocacy, research, and education, reinforcing FPM's leadership in pain medicine while connecting with key stakeholders and highlighting faculty achievements.
- The FPM Board approved a new professional document *PS15(PM) Statement on the clinical approach to persistent pelvic pain including endometriosis-associated pain* (including its background paper *PS15(PM) BP* and consumer factsheet) in July 2024. The statement was piloted for six months. A large amount of consumer feedback was received which prompted the development of a series of talking points for use by our fellows.

Communications

- The college distributed 23 media releases in Australia and New Zealand on a range of issues including the expedited pathway, anaesthesia research, Annual Scientific Meeting (ASM) presentations, faculty guidelines and National Anaesthesia Day, reaching nearly 10 million readers and listeners across print, broadcasting and digital platforms aimed at promoting anaesthesia, pain medicine and perioperative medicine.
- ANZCA's communications unit produced four 2024 editions of the ANZCA Bulletin (and associated ANZCA-produced videos) featuring a diverse range of anaesthesia and pain medicine articles, many from fellows, trainees and SIMGs across metropolitan, regional and rural Australia and New Zealand.
- Monthly E-Newsletters and President's Messages were also compiled by the communications unit.

Partnerships and engagement

- ANZCA hosted the second annual inter-college meeting for staff with a focus on mutual shared membership initiatives such as value for membership, retirement, inclusion and diversity, continuing professional development (CPD) homes, and volunteer recognition and awards.

Wellbeing

- In September, at the National Rural Health Conference in Perth, the college delivered the Critical Incident Debriefing eModule, a new resource supported through the Australian government's Specialist Training Program (STP) funds, and a result of the work led by advanced skilled social worker Dr Liz Crowe.
- This e-module builds on the ANZCA Critical Incident Debriefing Toolkit launched in 2022. There were more than 460 users of the eModule in the three months after its launch. As part of our ongoing support for our fellows, trainees, and SIMGs, ANZCA engages the professional services of Converge International – a confidential and independent counselling and coaching program. The services continue to be accessed by our members, providing support in a variety of mediums including face to face, telephone and virtually.
- A workshop to rural, regional and remote trainees and fellows was also conducted in September at the Joondalup Health Campus. The toolkit has now been accessed more than 35,000 times and continues to be one of the college's most visited library guides.



3. Support

Fellows, trainees and specialist international medical graduates experience

STRATEGIC PRIORITIES

We will deliver a world class experience to all fellows, trainees, and specialist international medical graduates as an innovative, responsible, and focused leader for the specialist medical college sector.

We will further embed effective engagement practices, training and education, digital and in-person experiences and resources.

HIGHLIGHTS

Membership

- A trauma-informed care working group was formed and will develop a college-wide definition of trauma-informed care as it relates to the practise of anaesthesia, perioperative and pain medicine.
- The 2024 ANZCA and FPM fellowship survey was held from 3 September to 22 October 2024 with 2470 participants responding (ANZCA 2391, FPM 198) – a 29% response rate. The results will be an important guide for the college and ANZCA Council/FPM Board in the development of the next strategic plan.

Training

- The college continues to support the integration of Specialist International Medical Graduates (SIMGs) into the Australian and New Zealand healthcare systems through a structured assessment and training pathway. The SIMG program plays a vital role in addressing workforce needs, while maintaining the high standards of anaesthesia and pain medicine practice. The SIMG newsletter was relaunched in December 2024. The newsletter provides updates on SIMG program developments, valuable resources to enhance the SIMG experience and exam success rates, and information on regional events and workshops for networking.
- The college processed 15 reconsideration applications, eight reviews, and one appeal in 2024. These processes are essential for ensuring fairness and transparency in assessment and training decisions.

ANZCA Educators Program (AEP)

- The ANZCA Educators Program (AEP) continued to be a key focus in 2024, aiming to equip clinicians with effective teaching skills. The program's interactive, evidence-based, five-module structure was delivered across Australia and New Zealand, with additional online and tailored sessions. There was positive feedback, strategic rebranding and development of an evaluation plan. Key challenges were addressed, including the diverse needs of specialist pain medicine physicians through the Pain Medicine AEP Uplift Project. A facilitator community of practice was launched, and new facilitators were onboarded.
- Priorities for the AEP in 2025 include further development of the facilitator community, improving onboarding, implementing the new evaluation plan, and engaging with First Nations consultants to enhance health professional education.

Indigenous Health

- The college's first Reconciliation Action Plan (RAP) is nearing completion, with the second RAP scheduled for launch in 2025.
- Eighty per cent of college staff have completed Aboriginal and Torres Strait Islander cultural competency training using a blended learning strategy, online via Your Mob learning and face to face with Koorie Heritage Trust.
- All Australian offices now display an Acknowledgement of Country at the reception area and have a flag set at the reception desk depicting the Aboriginal flag and Torres Strait Islander flag along with the Australian flag. Some offices have also worked with Traditional custodians to dedicate local language names to meeting rooms.
- The Te Tiriti o Waitangi Roadmap was launched as an important step in our journey to ensure that members and staff understand the implications of Te Tiriti o Waitangi in all our work. The roadmap is the first stage of achieving the vision of Māori health equity and a culturally safe and competent anaesthesia and pain medicine workforce in Aotearoa New Zealand.
- An object was added to the ANZCA constitution to contribute to achieving health equity for Aboriginal, Torres Strait Islander and Māori and Pacific Islander peoples in Australia and Aotearoa New Zealand, through a commitment to the process of reconciliation in Australia and the principles of Te Tiriti o Waitangi in Aotearoa New Zealand.
- Ten Aboriginal, Torres Strait Islander and Māori medical students and prevocational doctors were supported by the college to attend the Annual Scientific Meeting in Brisbane.
- A cultural learning activity is now mandated in the CPD program, and work is underway to embed cultural safety across the CPD program. Cultural competency workshops are also now offered at Annual Scientific Meetings.
- A cultural safety learning activity was introduced as an optional activity into the pain medicine training program in 2024 and will be a mandated training requirement from 2025.
- The college's Health Equity Projects Fund 2024 grants round supported two projects to commence in 2025 aiming to further Māori health: "A Hauora Māori medical education extension resource" and "The narratives belonging to Māori Anaesthetists Network Aotearoa."
- The college's trainee selection project recommendations include co-designing an Aboriginal, Torres Strait Islander, and Māori Pathway. An implementation strategy was developed in 2024, for action in 2025 in collaboration with First Nations representatives.

4. Sustain

Leading specialist medical college

STRATEGIC PRIORITIES

We will enhance sustainable value by integrating economic, environmental, and social aspects of leading in anaesthesia, pain medicine and perioperative medicine, maintaining our reputation as a foremost model for specialist medical training, education, and professional standards.

We will do this by enhancing our infrastructure, operations, resources, staff capability and culture.

HIGHLIGHTS

CPD

- Launched a CPD app to enhance how fellows and CPD participants record, monitor, and provide evidence on completed CPD activities.
- Implemented 13 new CPD activities across all three categories (knowledge and skills, emergency response, and practice evaluation).
- Completed the 2023 transition year with all cohorts of fellows and CPD participants (2023 cycle, 2020-2024 amended triennium and 2021-2023 triennium) achieving a 100 per cent completion rate. Engaged with fellows and other CPD participants at key conferences and events.
- Supported all fellows and CPD participants with multi-factor authentication, enhancing data security, while strengthening engagement with CPD.
- Enhanced support for the first annual CPD cycle (2024), with a focus on liaising with fellows selected for verification of CPD activities (audit) for the 2024 CPD cycle.
- Revised and expanded guide for [ANZCA and FPM CPD Program Resources](#), which now covers 56 CPD activities.

Annual Scientific Meeting

- Over five days at the 2024 Brisbane "Limitless" ASM we hosted 2460 delegates including 295 onDemand delegates who heard from speakers in five plenary and 52 concurrent sessions, attended 134 workshops and small group discussions, met with 62 healthcare industry exhibitors, and enjoyed social activities from fun runs to the gala dinner.
- On Saturday 5 May we held our 2024 College Ceremony – the biggest on record, with 300 new ANZCA and FPM fellows presenting. The College Ceremony livestream had more than 20,000 plays on [Facebook](#).
- In addition to the ASM we held two satellite meetings in and around Brisbane. The 2024 FPM Symposium had 210 delegates including 50 onDemand. The Emerging Leaders Conference had 44 delegates, mentors and speakers.

Sustainability

- The Environmental Sustainability Network (ESN) hosted a webinar themed "Time to gown up, sustainably" which focused on the environmental impacts of single-use surgical gowns. A second webinar was held with the theme "Understanding and managing nitrous oxide leaks" which covered the clinical challenges and issues associated with nitrous oxide and focused on detecting and mitigating leaks and decommissioning manifolds.
- A joint desflurane statement was released by ANZCA's ESN executive in consensus with the Australian Society of Anaesthetists (ASA) as an evidence-based document.

Information Technology

- The college continued to invest in technology and security with a focus on improving capability maturity and upgrading critical systems to mitigate business risks.
- Human resources and payroll systems were replaced with a consolidated cloud-based solution to streamline and improve processes across Australia and New Zealand.
- Website and CRM system upgrades commenced to deliver feature upgrades and ensure continued platform support. The college also replaced end-of-life network hardware infrastructure to ensure reliability of our wireless connectivity across the Melbourne office and all regional locations.
- The college extended its video conferencing capability to the new ANZCA office in Tasmania with the implementation of a custom Zoom set-up for members, trainees, and SIMGs.
- In response to changes in the CPD Home landscape ANZCA expanded its digital service offering by becoming the first specialist medical college to release a mobile app for CPD. Since its launch at the 2024 ASM more than 60 per cent of our active CPD members have downloaded the mobile app and are enjoying the benefits of being able to record their hours via their Apple and Android phones at their convenience.
- ANZCA reinforced its commitment to lifelong learning by approving the long-awaited investment in uplifting the legacy anaesthesia training management service offering. Following a comprehensive evaluation, the college has committed to rebuilding a fit-for-purpose cloud-based solution for ANZCA's current and future training management needs. Collaborative discovery and design phases have been completed, and the college is aiming to progress build and schedule incremental release of functionality by the end of 2025.

- The college remains focused on ensuring compliance to AMC standards, implementing multiple system enhancements for exam management, training site accreditation, and CPD.
- Acknowledging the increasing threat of cyber-attacks, information system and data security improvements featured as a high priority for ANZCA with a range of people, process, and technology controls prioritised and implemented throughout the year. Appointment of a new managed security partner, replacement of unsupported infrastructure, firmware upgrades, network security uplift, operational process improvements and automation, staff training and desktop exercise, periodic phishing campaigns, and business continuity and disaster recovery planning, are some of the activities undertaken throughout the year to uplift ANZCA's security posture.
- Rollout of single sign-on and multifactor authentication (MFA) for key college systems including CPD web-app and mobile app, EMS, Learn@ANZCA, TPS, and ePortfolio, was a significant undertaking impacting all members, trainees, and SIMGs. Since rollout, more than 90 per cent of active CPD participants have enabled MFA and are securely accessing college systems and data. Outstanding systems including library services are scheduled for MFA enablement in 2025.
- The college has aligned with payment card industry standards by removing the payment details section from all our online and PDF forms. Secure payment gateways are now the preferred payment solution for all college services. In addition, data and workflows held in third-party platforms have been brought in-house to improve security and deliver operational efficiencies while driving user-experience improvements.
- Acknowledging the rapid rise of artificial intelligence (AI) and associated opportunities and risks for the college, ANZCA has developed an AI strategy, roadmap, and governance framework for safe and responsible adoption across college functions. Work has commenced on developing a data strategy to enable adoption of AI. The college has also released an AI policy for staff outlining guidelines for responsible use of the technology for college purposes.
- ANZCA is currently progressing two controlled trials using AI for secretariat support and maintenance of clinical literature. The trials are being progressed in collaboration with industry leaders and experts in technology and AI. The college is also collaborating with members and subject matter experts in exploring opportunities to leverage AI capabilities with our incumbent platforms and partners.

Diversity and equity

- In recognition of our diverse workforce, we continue to support work throughout the college in areas of Indigenous health, gender equity, reconciliation, cultural safety, population health and much more. Our goal is for our fellowship to reflect the diversity of the communities we serve.
- In February 2024, the college published a statement on diversity, equity and inclusion, a significant step in our commitment to creating and supporting a culture of inclusiveness. This brings together the broad range of policies, activities and initiatives already underway at the college under one banner, thereby ensuring future activities are aligned with college strategic priorities and governance structures.
- The Gender Equity Sub-committee (GESC) presented a webinar themed "Menopause matters: Breaking the silence" focusing on perimenopausal/menopausal research and the sharing of findings from a recent survey on menopause.
- 2024 International Women's Day was celebrated with the release of a [guided discussion pack](#) that encouraged members to discuss the broad range of topics around gender equity including what it looks like, what the barriers in local settings are and bringing focus to areas such as mentoring, leadership, intersectionality, unconscious bias and the gender pay gap.
- The GESC launched the revised Unconscious Bias Toolkit, which provides an introduction to unconscious bias and explains how it influences the care our patients receive and the professional endeavours of our members. It also provides strategies and resources to identify and mitigate the effects of unconscious bias. The guide will be developed into an online learning resource in 2025.
- Quantitative results from the results from the October 2022 GESC gender survey were published in *Anaesthesia* – "[Still a 'boys' club': a qualitative analysis of how gender affects a career in anaesthesia in Australia and Aotearoa New Zealand](#)".
- A comprehensive gender equity survey toolkit was released in April 2024 to support fellows conducting their own version of the ANZCA gender survey. The survey toolkit contains six documents to assist fellows in performing a local gender equity survey and to claim the highly valuable CPD 'Practice evaluation-measuring outcomes: Practice audit'.

History and heritage

- A new online exhibition "[Without sensation? A brief history of early anaesthesia](#)" was launched by the museum to coincide with National Anaesthesia Day on 16 October. The exhibition covers the discovery and experimentation of anaesthetic agents in the renaissance period, through to its arrival in Australian and New Zealand up to World War I.
- The 2024 history and heritage research grant was awarded to Callum Royle for his proposal "A Life with Pain". Associate Professor Leigh Atkinson's oral history in which he discusses the formation of FPM and the growth of pain medicine as a specialty was added to the [FPM Youtube channel](#). Two students from the University of Melbourne's Masters of Cultural Materials Conservation course completed internships with the museum. Each student focused on different types of objects from the collection, such as airway tubes, and prepared assessment reports.

Regional offices

The Australian regions team comprises 19 staff working across seven regional offices, four time zones, and in various full and part-time capacities.

- Regional events were face-to-face, with additional hybrid and virtual options.
- Thirty-one regional continuing medical education and FPM events and 140 committee meetings were held in 2024.
- Regional operations supported the Education and FPM units with invigilation for exams across all regions.
- Forty-nine trainee courses were held across the Australian regions as face-to-face, hybrid or virtual offerings. Online practice vivas were supported, with several regions hosting breakout sessions.



Dean's report

The Faculty of Pain Medicine Dean Dr Dilip Kapur reflects on the changes to governance, and curriculum and advocacy developments over the past 12 months.



2024 saw change throughout the FPM governance structure. Board elections at the start of the year confirmed Associate Professor Susie Lord's continuing presence as a senior board member. Additionally, we were pleased to welcome Dr Irina Hollington to the board.

Dr Kieran Davis finished his term as dean in May, to be succeeded by myself. Kieran also left the board, having completed his maximum 12-year term. Kieran has had great influence on the faculty's development, having been a board member through almost half of the faculty's life and fellows have every reason to be grateful for his extensive input.

Dr Leinani Aiono-Le Tagaloa was elected to the position of vice-dean in February 2024. Her election maintains the faculty's commitment to its trans-Tasman governance and raises our profile in the Pacific nations.

We said a fond farewell to Leone English, our former executive director. Leone helped steer the faculty through the tough times of COVID-19 and launched many initiatives, including the *National Strategy on Health Practitioner Pain Management Education* project. We wish her all the best for the future.

We also bid adieu to Dr Scott Ma who had served as a very effective ANZCA Council representative for nearly three years. I am sure I speak for all of us in appreciation of Scott's work on our behalf. Scott has been replaced by Dr Deb Devonshire who brings a wealth of experience from her extensive roles as a college councillor and committee chair.

Martina Otten joined the faculty as the new executive director in May 2024. Martina's enthusiasm and expertise will be a great asset to the faculty. Among the numerous initiatives that Martina has promoted, perhaps the most important has been the development of a risk registry specific to the faculty. This is an important issue for the faculty's governance.

The Professional Standards Committee (PSC) was dissolved in 2024. The faculty needs strong links to its regional and national committees (RNCs) and it was not clear that the PSC was the best forum for this.

Separately, the faculty now holds a yearly RNC forum that has been well-attended. Chairs of RNCs are now invited to attend a full day board meeting, on a rotating basis. Chairs are tasked with bringing specific issues relevant to their committee to the board for further discussion.

The faculty's advocacy for people living with pain remains strong. Our two major projects funded by the Australian government, notably the *National Strategy on Health Practitioner Pain Management Education* and the *Flexible Approach to Training in Enhanced Settings* (FATES) have progressed on time and within budgets. Both projects aim to improve access to high-quality pain management services.

The faculty has endorsed the ANZCA Te Tiriti o Waitangi Roadmap and remains committed to improving access to pain management services to First Nations people across the region. Despite the significant pressures on health services in New Zealand, the Mamaenga Roa initiative remains intact and the commitment to the project shown by our colleagues across New Zealand has been admirable.

The faculty has remained active in discussions with Australian government agencies, including Medicare and the Pharmaceutical Benefits Scheme. This has been through a time when, in addition to the continuing stress within healthcare systems, severe shortages of vital analgesic medications developed.

The faculty has continued to work with other medical colleges to improve the delivery and understanding of high-quality pain management. In July 2024 the faculty, under delegation from ANZCA, provided endorsement of the Royal Australasian College of Surgeons position paper on *Pain Management in Adults for Surgeons*. In August 2024 the faculty released a pilot of *PS15(PM) Statement on the clinical approach to persistent pelvic pain including endometriosis-associated pain*. Extensive feedback was received on PS15 with support being provided by both consumer and provider groups, including the Royal Australian and New Zealand College of Obstetricians and Gynaecologists.

Martina Otten and I attended a major parliamentary event organised by Chronic Pain Australia and the Parliamentary Friends of Pain in November 2024. The meeting was attended by senior parliamentarians, including deputy Minister of Health Ged Kearney. A separate meeting was held with senior staff from Minister of Health Mark Butler's office at which the benefits of funding multidisciplinary pain management programs in primary care were emphasised.

The faculty's key purpose remains that of training and accrediting specialist pain medicine physicians. The training program is at the heart of the faculty's work and is under continuous review. Following the Australian Medical Council (AMC) accreditation visit to ANZCA and FPM in 2022, several conditions were placed upon further accreditation. Compliance with the conditions has required extensive work undertaken by the faculty staff and fellows serving on the relevant committees. Through this considerable effort, the faculty has fulfilled all AMC requirements within time frames provided to date. However, this body of work continues as additional deadlines approach.

A review of the examinations process has identified potential modifications that may improve the experience for trainees. The most significant of these will be a transition to a full multiple-choice examination format. The examinations committee has set up a working group to explore the multiple choice questions format although the transition will not take place before 2026.

Faculty trainee numbers remain stable and the overall fellowship continues to grow. At the end of 2024, the faculty had 532 active fellows with a further 78 retired fellows maintaining fellowship. About one third of our active fellows are women. Increasing the size of the fellowship remains an important priority and the board is exploring further options in this area.

The faculty's meetings were well attended in 2024. The FPM Symposium and ANZCA/FPM Annual Scientific Meeting (ASM) in Brisbane were very popular. The FPM Spring Meeting in Auckland also attracted excellent numbers. The scientific meetings have also included mandatory continuing professional development (CPD) activities in areas of cultural safety and emergency responses. The opioid induced ventilatory inhibition workshop, developed by Professor Pam Macintyre, was an important contribution to the emergency response CPD topics and covered an area of great importance to both FPM and ANZCA fellows.

The faculty is well-regarded internationally and senior representatives of ANZCA and FPM attended the Hong Kong College of Anaesthesiologists' ASM in November. The four training sites in Hong Kong continue to provide a high-quality training environment and there are many options for educational exchanges between units in the southern hemisphere and Hong Kong.

Faculty fellows have many achievements between them, but none more than Professor Michael Cousins AO, the founder of the Faculty of Pain Medicine. It was with great sadness that the faculty learned of Professor Cousins's passing on the eve of the faculty symposium. His vision carries all of us forward.

Other fellows have continued to feature in lists of national awards. During 2024, Professor Steven Faux was appointed as Member of the Order of Australia (AM) for significant service to rehabilitation medicine and to medical research. Professor Brendan Moore was awarded an AM for significant service to anaesthesia, to pain medicine and to tertiary education.

Dr Dilip Kapur
Faculty of Pain Medicine Dean

FPM Board



FPM BOARD

From left:

Dr Amanda Wisely
Dr Tipu Aamir
Dr Scott Ma (ANZCA Councillor)*
Professor Dave Story (ANZCA President)
Dr Leinani Aiono-Le Tagaloa (FPM Vice-Dean)
Dr Murray Taverner
Dr Dilip Kapur (FPM Dean)

Professor Michael Veltman
Dr Noam Winter
Associate Professor Susie Lord
Dr Irina Hollington
Ms Martina Otten (Executive Director FPM)

**Replaced on FPM Board by Dr Debra Devonshire
in September 2024*

Honorary treasurer's report

I am pleased to present the treasurer's report for the year ended 31 December 2024, outlining the financial performance of ANZCA. I would like to express my appreciation to my fellow councillors, the Finance, Audit and Risk Management (FARM) Committee, the Investment Sub-Committee — particularly our expert independent members — and the ANZCA staff for their dedication and contributions to the ongoing success of the college, in what remains a challenging global financial environment.

The college's annual financial statements, including those of the New Zealand office, were independently audited and reviewed by the external auditors, ANZCA Council, and the FARM Committee.

2024 overview

The college achieved a surplus before non-operating activities of \$A1.721 million for the year ending 31 December 2024, compared to a surplus of \$1.795 million in 2023.

Total revenue from operating activities in 2024 was \$44.701 million, an increase of \$3.648 million from 2023. However, this was offset by a \$3.722 million rise in operating expenses, resulting in a modest reduction in operating surplus before non-operating activities compared to 2023.

In 2024, in addition to business-as-usual (BAU) activities, ANZCA continued advancing key information technology and security (ITS) and education projects initiated in 2023. These efforts were supported by increased staffing to overcome delays caused by the competitive job market in previous years.

After including dividends, interest income and investment gains, the total comprehensive income for the year reached \$7.121 million, up from \$5.497 million in 2023. This increase was primarily driven by strong investment performance.

Statement of profit or loss and comprehensive income

Revenue

Subscription and entry fees rose by \$1.474 million, driven by increased volumes and a six per cent fee adjustment which was guided by the latest inflation figures available at the time of setting fees. To ensure the college's ongoing financial sustainability and avoid more significant fee increases in the future, it is crucial that fee increases align with the rising cost of operations.

Registration, training and exam fees also increased compared to 2023, due to higher volumes for primary and final exams and specialist international medical graduates (SIMGs).

The Rural Generalist Anaesthesia (RGA) and Perioperative Medicine (POM) programs, which launched in 2023, have continued to exceed expectations with higher-than-anticipated enrolment for both programs. There has been a significant financial and non-financial investment from the college and its volunteers into the program development, so it is pleasing to see this investment substantiated by high levels of interest in undertaking the programs.

Conference and course fees decreased by \$0.573 million in 2024, primarily due to lower attendance at the annual scientific meeting (ASM). The 2023 ASM experienced exceptionally high attendance as it was the first in person ASM since the onset of COVID-19, making 2024's decline a return to more typical levels rather than a negative trend. Additionally, fewer special interest group conferences were held during the year, contributing to the overall reduction in revenue.

Specialist Training Program (STP) income increased in 2024, driven by funding for several specific projects. These included the Advanced Certificate in Paediatric Anaesthesia, critical incident debriefing, the Victoria Regional Anaesthetic Training Network, the Education Support Project, and Flexible Approach to Training in Expanded Settings (FATES). It is important to note that the college only recognises STP revenue and corresponding expenditure for grants relating to projects it directly manages and STP administration costs.

Expenses

Employment costs increased by \$2.228 million in 2024, primarily due to the successful recruitment of several roles that remained unfilled in 2023. Roles were also created to support various ITS projects initiated in prior years and continuing through 2024.

Travel and event related costs increased by \$0.781 million, as the college hosted more in-person events and meetings than in 2023, continuing to return to pre-COVID-19 levels of activity. Higher costs for airfares, accommodation and venues also contributed to the increase.

Professional services increased by \$1.391 million reflecting the engagement of consultants for ITS and education projects, as well as legal fees and bank charges.

Research grant expenditure decreased by \$0.458 million, due to the return of some awarded grants and a smaller pool of unallocated funding from prior years being available for distribution in 2024.

Non-operating activities (investments)

The college's investment portfolios delivered strong results in 2024, supported by resilient global GDP growth, solid corporate earnings, continued technological innovation, and easing inflation. Investment income totaled \$5.428 million, a significant increase from \$3.715 million in 2023.

Dividends and other investment income rose to \$1.688 million, while gains in the valuation of investments reached \$2.976 million, up from \$2.219 million in 2023 – reflecting robust portfolio performance.

Interest income also increased markedly to \$0.764 million compared to \$0.530 million in 2023, driven by elevated interest rates on the college's operating accounts.

While the strong investment performance contributed significantly to the achieved surplus, the college does not depend on investment returns to fund core operational activities. The college maintains three dedicated investment portfolios to underwrite day-to-day operations in the event of a severe liquidity issue, to fund large-scale strategic or capital

initiatives beyond the scope of annual operating budgets and to complement ANZCA Foundation grant funding. These portfolios, together with the college's policy of maintaining a minimum six months of operating cash on hand, form a robust financial framework ensuring ongoing sustainability that underpins long-term stability and resilience.

Statement of financial position

ANZCA's financial position remains strong, with net assets increasing by \$7.121 million, consistent with the reported total comprehensive income in 2024.

The college's investment portfolios grew by \$4.563 million, reflecting market performance. In 2024, work began on a major rebuild of the Training Portfolio System (TPS), with planned investment withdrawals in 2025 to fund this strategic initiative.

Cash holdings increased due to the timing of invoices issued for annual subscriptions and training fees.

Statement of changes in equity

Total equity for the year increased by \$7.121 million to \$58.798 million in line with the reported total comprehensive income for 2024.

Statement of cash flows

The college traditionally generates positive cash flows from operating activities. In 2024, the college generated \$3.626 million from operating activities, compared to \$4.294 million in 2023. The lower amount in 2024 can be attributed to higher operating expenditure as the college has carried out more projects and undertaken more activities than in 2023.



2025 budget overview

The college's annual budget is guided by agreed parameters to deliver a modest operating surplus before investment gains or major project spending.

ANZCA remains in a healthy financial position, focused on balancing income and expenses for long-term sustainability. A small, consolidated surplus is budgeted for 2025, with a similar outlook for 2026, assuming investment returns remain in line with strategy.

The planned deficit before non-operating activities in 2025 is consistent with the college's strategic decision to invest in core educational and corporate systems.

Conclusion

The college continues to be in a strong financial position. Prudent financial management has enabled the college to continue its everyday functions while investing in its strategic priorities.

On behalf of ANZCA Council, I extend my sincere thanks to the many fellows who contribute their time and expertise on a pro bono basis, and to the college's dedicated staff, led by our Chief Executive Officer, Mr Nigel Fidgeon.

It has been a busy and successful year, and the college remains on a solid financial foundation to support its trainees, fellows, and the wider community.

Associate Professor Deborah Wilson

Honorary Treasurer, ANZCA

Discussion and analysis of the financial statements extract

The financial statements and disclosures in this report have been extracted from the full audited financial report of the Australian and New Zealand College of Anaesthetists (ANZCA) for the year ended December 31, 2024, prepared in accordance with Australian Accounting Standards. Please refer to the full financial statements on the ANZCA website for more information.



FINANCIAL STATEMENTS EXTRACT

Statement of profit or loss and other comprehensive income for the year ended 31 December 2024

	2024 \$	2023 \$
Revenue		
Subscriptions and entry fees	17,341,355	15,867,266
Registrations, training and exam fees	16,767,125	14,741,021
Conference and course fees	6,664,279	7,237,689
Specialist training program grant	1,222,017	806,891
Government grants - other	168,406	13,370
Other income	2,538,177	2,387,272
Total revenue from operating activities	44,701,359	41,053,509
Expenses		
Employment	21,405,178	19,177,760
Facilities	2,760,129	2,724,722
Travel and events	9,208,691	8,427,736
Information technology	2,615,006	2,681,804
Professional services	4,369,436	2,979,573
Research grants	1,762,961	2,221,378
Finance costs	89,791	70,665
Other expenses	768,982	974,264
Total expenses from operating activities	42,980,174	39,257,902
Surplus before non-operating activities	1,721,185	1,795,607
Income from non-operating activities		
Investment income	5,427,811	3,715,001
Surplus for the year before income tax expense	7,148,996	5,510,608
Income tax expense	-	-
Surplus for the year after income tax expense	7,148,996	5,510,608
Other comprehensive income <i>Items that may be reclassified to profit or loss</i>		
Exchange differences on translation of foreign operations net of tax	(27,731)	(13,620)
Total comprehensive income for the year	7,121,265	5,496,988

Statement of financial position as at 31 December 2024

	2024 \$	2023 \$
ASSETS		
Current assets		
Cash and cash equivalents	20,945,425	19,153,815
Cash and cash equivalents – STP related	10,033,472	9,094,252
Trade and other receivables	4,075,828	4,093,971
Other financial assets	296,406	1,188,372
Total current assets	35,351,131	33,530,410
Non-current assets		
Property and office equipment and cultural assets	12,017,679	11,645,309
Intangible assets	276,392	-
Other financial assets	45,153,553	40,590,444
Total non-current assets	57,447,624	52,235,753
Total assets	92,798,755	85,766,163
LIABILITIES		
Current liabilities		
Trade and other payables	10,895,999	11,199,078
Contract liability	13,879,193	14,898,184
Employee benefits	2,513,079	2,358,239
Lease liabilities	519,326	486,123
Total current liabilities	27,807,597	28,941,624
Non-current liabilities		
Contract liability	4,528,259	4,172,985
Employee benefits	227,105	306,304
Lease liabilities	1,437,647	668,368
Total non-current liabilities	6,193,011	5,147,657
Total liabilities	34,000,608	34,089,281
Net assets	58,798,147	51,676,882
EQUITY		
Retained earnings	58,400,822	51,251,826
Foreign currency translation reserve	106,168	133,899
Asset revaluation reserve	291,157	291,157
Total equity	58,798,147	51,676,882

Statement of changes in equity for the year ended 31 December 2024

	Retained earnings	Foreign currency translation reserve	Assets revaluation reserve	Total
	\$	\$	\$	\$
Balance at 1 January 2023	45,741,218	147,519	291,157	46,179,894
Surplus for the year	5,510,608	-	-	5,510,608
Currency translation differences arising during the year	-	(13,620)	-	(13,620)
Total comprehensive income for the year	5,510,608	(13,620)	-	5,496,988
Balance at 31 December 2023	51,251,826	133,899	291,157	51,676,882
Surplus for the year	7,148,996	-	-	7,148,996
Currency translation differences arising during the year	-	(27,731)	-	(27,731)
Total comprehensive income for the year	7,148,996	(27,731)	-	7,121,265
Balance at 31 December 2024	58,400,822	106,168	291,157	58,798,147

Statement of cash flows for the year ended 31 December 2024

	2024	2023
	\$	\$
Cash flows from operating activities		
Receipts from members, customers and Government bodies	51,239,316	49,670,590
Interest received	764,451	530,028
Donations received	360,978	191,958
Payments to employees, suppliers and other parties	(47,006,139)	(43,877,086)
Research grants paid	(1,732,961)	(2,221,378)
Net cash inflow from operating activities	3,625,645	4,294,112
Cash flows from investing activities		
Proceeds from term deposits	879,459	10,327,176
Proceeds from disposal of financial assets	1,014,874	27,887,000
Payments for purchases of financial assets	(1,104,436)	(37,887,000)
Payments for property and office equipment	(794,098)	(539,397)
Payment for intangible assets	(292,650)	-
Net cash outflow from investing activities	(296,851)	(212,221)
Cash flows from financing activities		
Lease liabilities payments	(513,089)	(460,576)
Net cash outflow from financing activities	(513,089)	(460,576)
Net increase in cash and cash equivalents	2,815,705	3,621,315
Cash and cash equivalents at the beginning of the financial year	28,248,067	24,623,452
Total effect of exchange rate fluctuation of cash held	(84,875)	3,300
Cash and cash equivalents at the end of the financial year	30,978,897	28,248,067

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