



ANZCA

FPM

29 April 2026

The Hon. Harriet Shing MP
Minister for Health
Parliament of Victoria

Sent via email: minister.health@health.vic.gov.au

President-elect and CEO

Australian and New Zealand
College of Anaesthetists

Dear Minister Shing,

On behalf of the Australian and New Zealand College of Anaesthetists (ANZCA), we warmly congratulate you on your recent appointment as Victoria's Minister for Health.

ANZCA, including the Faculty of Pain Medicine (FPM) is the professional medical college responsible for specialist training, standards, and ongoing professional development of specialist anaesthetists and specialist pain medicine physicians across Australia and New Zealand. We have recently launched a Chapter of Perioperative Medicine whose graduates are already improving and streamlining surgical care for patients.

As one of the largest medical colleges in Australia and New Zealand, our over 10,000 fellows, trainees and specialist international medical graduates (SIMGs) play a critical role in ensuring Australia is one of the safest places in the world to have an operation under anaesthesia and supporting safe, evidence-based care for people living with pain across acute, chronic and cancer settings.

ANZCA is committed to working constructively with you, your office and the Victorian Department of Health to support evidence-based policy, strengthen specialist workforce planning, and improve patient access and outcomes. In particular, we would welcome opportunities to engage with you on:

- **Anaesthesia and pain medicine workforce supply, distribution and training pathways across the state, with a focus on regional and rural sustainability.**

ANZCA and FPM have been working hard over recent years to implement dedicated regional pathways in Victoria. The Victorian Regional Anaesthetic Training Network (VRATN) has been a great success, spanning sites such as Warragul, Bendigo, Ballarat, Shepparton, and Wangaratta. This pathway enables trainees to undertake 70-80% of their training in regional and rural settings, with a 12-month metropolitan advanced training rotation to fulfil sub-speciality training requirements. Spending the majority of training time in rural and regional Victoria allows for the development of professional and social connections with the aim of trainees continuing their specialist careers outside metropolitan locations. The college is beginning to see the first fellows graduate from this pathway, with initial outcomes showing strong trainee satisfaction and hospital buy-in, and evidence that these specialists then continue to live and practice in rural areas. We're hoping to expand pathways like this to reflect the needs of Victorian rural and regional communities and would like to discuss with you opportunities for scaling up these pathways.

- **The role of perioperative medicine, a multidisciplinary, patient-centred approach to higher-risk surgical patient care, in improving surgical outcomes, reducing length of stay and strengthening system efficiency.**

Perioperative medicine is one of the most effective ‘best buys’ in the health system. We have developed a short video and booklet to communicate its benefits, located at www.anzca.edu.au/chapter-of-perioperative-medicine. As an example in practice, Austin Health’s “Nurse navigators” program is included in the booklet, where nurses within the department of anaesthesia focus on providing structure, continuity and co-ordination for complex patients in the anaesthesia pre-admission clinic. Evidence suggests this has resulted in preventable day-of-surgery cancellation statistics now of fewer than 1% as well as an increase in staff and patient satisfaction. Evidence also shows very high return on investment through scaling up perioperative medicine. We would like to discuss with you opportunities for reducing health care costs and improving patient outcomes through the expansion of perioperative medicine across Victoria.

- **Embedding contemporary pain science, equitable access to multidisciplinary services and culturally safe pain education into future policy and service design.**

The faculty has commenced constructive engagement with your department following the publication of the *Bridging the Gender Pain Gap* report. FPM’s related [position statement PS15](#), published in 2025 emphasises that persistent pelvic pain should be approached as a complex persistent pain condition requiring multidimensional, whole-of-person care, rather than fragmented or procedural responses. We would welcome the opportunity to meet with you to discuss how the faculty’s position, clinical expertise and ongoing work may assist in strengthening standards, service design and system capability for pelvic pain care in Victoria.

We would value the opportunity to meet with you at your convenience, to discuss how we can support your priorities over the coming term.

Once again, we congratulate you on your appointment and wish you every success in your new role. We look forward to working with you in the interests of Victorian patients and communities.

Yours sincerely



Dr Tanya Selak
ANZCA President-elect



Dr Lance Emerson
Chief Executive Officer