THE AUSTRALASIAN COLLEGE OF DERMATOLOGISTS

STRATEGIC PLAN, 2015 - 2019

Endorsed by Board of Directors, 1 June 2015
1. About the College

The Australasian College of Dermatologists is a national membership organisation of professional dermatologists who have been awarded Fellowship of the College, or FACD.

The College was formed to recognise the speciality of dermatology. The inauguration ceremony took place in the Great Hall of the University of Sydney on May 1, 1967. There were 95 foundation members. Well prior to this, the pre-cursor to the College, the Dermatological Association of Australia had established a Diploma in Dermatological Medicine in 1945 and the Australasian Journal of Dermatology in 1949.

From 95 at inauguration, to 258 by 1997, today in 2014, College Fellows number 538 including those retired, non-practising Fellows. There are 452 active and practicing in Australia.

<table>
<thead>
<tr>
<th>Fellows</th>
<th>Practicing</th>
<th>Non-Practicing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Queensland</td>
<td>80</td>
<td>12</td>
</tr>
<tr>
<td>New South Wales</td>
<td>169</td>
<td>27</td>
</tr>
<tr>
<td>South Australia</td>
<td>38</td>
<td>5</td>
</tr>
<tr>
<td>Victoria</td>
<td>125</td>
<td>16</td>
</tr>
<tr>
<td>Western Australia</td>
<td>40</td>
<td>7</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>452</strong></td>
<td><strong>67</strong></td>
</tr>
<tr>
<td>Overseas</td>
<td>13</td>
<td>6</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>538</strong></td>
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</tbody>
</table>

There were only 8 training positions in 1968; 42 in 1997, and today 100. A number of trainees spend 6 months to 1 year or more in accredited positions in the UK & Singapore.

<table>
<thead>
<tr>
<th>Trainees</th>
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</thead>
<tbody>
<tr>
<td>New South Wales</td>
<td>38</td>
</tr>
<tr>
<td>Queensland</td>
<td>22</td>
</tr>
<tr>
<td>South Australia</td>
<td>10</td>
</tr>
<tr>
<td>Victoria</td>
<td>37</td>
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<tr>
<td>Western Australia</td>
<td>6</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>113</strong></td>
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2. Introduction

The ACD is a membership organisation of professional dermatologists which exists to ensure first class dermatology care to the community.

**Our Mission:**
To lead the achievement of first class dermatology care and skin health for our communities

College is the leading authority in Australia for Dermatology but has an opportunity to be a key leading body in dermatology in the Southern Hemisphere and grow its influence globally.

**Our Vision:**
To be a well respect leader in the Asia-Pacific region for dermatological training, continuing education; scientific advancement and advice.

We operate from a set of values which shape us:

Leadership - which motivates the capacity of our profession
Professionalism - demonstrating competence and skill in our work
Integrity - adhering to moral and ethical principles and practice
Progressive – continuously improving. Presenting new and innovative ideas
Inclusiveness - valuing and respecting diversity
Accountability & Responsibility – to our communities and members; for the use of member resources
3. **Our Focus Areas**

The college has three primary activities:

1. **Service to Community**: information, advocacy and advice to individuals, communities, government and other health stakeholders concerning dermatology practice, the efficient and effective delivery of dermatological specialty health services, the creation of improved outcomes for the skin health of individuals and whole communities.

2. **Education**: To set the educational standards for the profession and its practice. Deliver the training of registrars through our Fellows to these standards in partnership with our key hospital & health stakeholders. Provide ongoing professional education to other clinicians who interact with dermatology patients.

3. **Service to Members**: To act in their best interests, to ensure their continued professional development. To plan and monitor the specialist workforce within Australia.

As an incorporated, not-for-profit charitable organisation it undertakes activities that are consistent with its values:

4. **Organisational Excellence**: efficient, accountable, responsible organisation within the Corporations Act that moves with and adjusts to contemporary best practice in governance and management.

<table>
<thead>
<tr>
<th><strong>SERVICE TO COMMUNITY</strong></th>
<th><strong>EDUCATION</strong></th>
<th><strong>SERVICE TO MEMBERS</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Make dermatology profession a quality result</td>
<td>Quality dermatological education at all levels</td>
<td>We support you</td>
</tr>
</tbody>
</table>

**ORGANISATIONAL EXCELLENCE**

An efficient organisation that demonstrates best practice across all key areas.
4. Our Challenges

Our future is not without its challenges.

<table>
<thead>
<tr>
<th>SERVICE TO COMMUNITY</th>
<th>EDUCATION</th>
<th>SERVICE TO MEMBERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting rural workforce needs and rural dermatology service needs.</td>
<td>Maintain our Education status – AMC; Enterprise RTO; and Develop education provider status towards Higher Education Provider</td>
<td>Keeping the College relevant to members</td>
</tr>
<tr>
<td>Sustaining and innovating our Trainee position numbers consistent with Workforce planning targets.</td>
<td>Improve continually our Education Services – quality of teaching &amp; assessment; Maintain quality of our educational products - a core Training Program curriculum that aims to create and maintain a workforce well skilled for all settings yet accommodate the educational needs of sub specialisation in dermatology Setting standards for and delivery education in, dermatology of non-dermatologists.</td>
<td>Increasing member engagement with their College</td>
</tr>
<tr>
<td>Working with advancements in technology that empower individuals to image skin problems</td>
<td></td>
<td>Sustaining College leadership and activities</td>
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<tr>
<td>Better College public engagement and public awareness of dermatology and the service providers who public may seek service from for skin care.</td>
<td></td>
<td>Maintaining collegiality and College coherence without internal division, whilst supporting sub-specialty interests</td>
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<tr>
<td>Becoming more engaged with our communities at all levels</td>
<td></td>
<td>Choosing wisely our future colleagues/partners where such synergy derives benefits for both.</td>
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**ORGANISATIONAL EXCELLENCE**

Staying contemporary and well fit for the task of governing in an increasingly complex environment

Keeping abreast of and working positively and more actively with our key regulatory and government stakeholders

Management – strengthen internal policy and awareness/coherence; maintain a risk focus; use resources productively; assemble the right resources

Member professional development program and Revalidation of members

The proliferation of providers in skin and cancer care or education

Better positioning and understanding of the College ‘brand’ as a peak body.
5. Our Strategic Direction

The following are goals for the College over the period to 2019

<table>
<thead>
<tr>
<th>SERVICE TO COMMUNITY</th>
<th>EDUCATION</th>
<th>SERVICE TO MEMBERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Workforce to meet need</td>
<td>• Quality Trainee Education</td>
<td>• Expand Member professional development</td>
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<tr>
<td>• Better College public engagement</td>
<td>• Trainee Education Delivery</td>
<td>• Increase member engagement</td>
</tr>
<tr>
<td>• Understanding of dermatology</td>
<td>• Advance Post Fellowship education</td>
<td>• Member affiliations</td>
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<tr>
<td>• Quality services by our members</td>
<td>• Quality education for primary care clinicians</td>
<td>• Scientific and Academic advancement</td>
</tr>
<tr>
<td>• Leadership in Skin Health Care</td>
<td>• Strengthen supervisor quality</td>
<td>• Advocacy, PR and communications</td>
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<table>
<thead>
<tr>
<th>ORGANISATIONAL EXCELLENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Governance</td>
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<tr>
<td>• Financial viability</td>
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<tr>
<td>• Resource deployment</td>
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<tr>
<td>• Certification</td>
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</tbody>
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5.1. **Services to Community**

From 2006-2010 College was assertive in influencing community attitudes. Major forward steps were taken in sun protection awareness, for example, with Surf Lifesaving Australia. The rise of non-specialist skin cancer doctors was the focus of a sustained campaign in the public arena which has since ceased. This period of advocacy and public awareness raising has not slowed the increase of such clinics, and a task remains to inform the public of the issues posed by such providers. It did however lead the College to seek to differentiate its educational products by pursuing a status referred to as HEP. This, if achieved, enables a new round of community awareness raising, and possibly enables regulators to consider tighter regulation in this area, knowing the College has set a standard.

In the past 5 years many organisations have become more community focussed, and have a planned approach to community engagement which really is central to our mission. College needs to re-vitalise efforts to do the same. To “lead the achievement of first class dermatology care and skin health for our communities” (our mission) means doing this in partnership with communities not on communities.

This strategic plan period will involve a gradual transformation within all College structures and processes to ensure we are best attuned to community need and therefore best positioned to fulfil our mission.

College has been training more specialist dermatologists, yet there are ongoing rural and regional workforce shortages of dermatologists despite this. As numbers of dermatologists rise, Fellows may be forced or may wish to sub-specialise, and there are increasing cosmetic procedural treatments as technology improves and cheapens. Advocating about our workforce needs and studying the way our profession is changing requires some focus over the next few years.

1. **Workforce to meet need**
   1.1. Plan and implement strategies to boost the rural workforce
   1.2. Plan and implement strategies to boost the Aboriginal and Torres Strait Islander specialist dermatologist workforce
   1.3. Increase College-based workforce planning to inform government planning

2. **Better College public engagement**
   2.1. Board and Fellow understanding of what and why
   2.2. Create a governance structure that leads this cultural change
   2.3. Create opportunities within our structure and processes for community interaction
   2.4. Assist Fellows with their engagement with their local community

3. **Raise community understanding of dermatology**
   3.1. Develop a communications service and plan for external communications
   3.2. Improve College ‘social presence’
   3.3. Measure community understanding and monitor this

4. **Quality dermatology services and best practice by our members**
   4.1. This is linked to CPD, development of clinical guidelines, re-validation

5. **Leadership in skin health care**
5.1. Provide high quality dermatology information (A-Z of skin)
5.2. Revitalise health promotion and prevention action
5.3. Partner with Skin and Cancer Foundations for community initiatives
5.2. **Education Strategy**

The College over the last 5 years has developed experience in the development a suite of 'educational products':

- At its core is the Trainee Program.
- There is one post-fellowship offering – the one year Mohs Program.
- It had developed 24 modules as topics for GP education.
- It developed a 9 module undergraduate curriculum for Medical Schools.

College is also better positioned because:

- the education staffing profile changed in 2013 and two qualified education officers were employed. Now a third is on board.
- a Curriculum Review (of the Trainee Program) was commenced in 2014 for completion in mid 2015
- an application to TEQSA to become a Higher Education Provider (HEP) was completed in 2014, awaiting outcome after passing initial assessment.

Setting clear learning outcomes as a core discipline of educational design is at the core of every course. Outcomes guide the assessment processes and in turn what is taught.

College cannot become a Higher Education Provider unless candidates can be assessed to have met the course (learning) outcomes.

With the application before TEQSA, College is on a threshold of some significance, assuming it becomes a HEP. College as a HEP and RTO (registered training organisation) moves from only being able to offer College branded “qualifications” to being able to choose to offer:

- degrees (graduate certificates; graduate diplomas; masters; extended masters);
- vocational certificate 4’s or 5’s (VET – vocational education and training)
- College branded qualifications

Our 4 year Trainee Program will be approved as a Masters degree (extended). Fellowship however is the coveted label. A degree has less value. However once awarded a degree, Fellowship is automatic. Fellowship however can be awarded without a degree (eg to IMGs after upskilling; to international colleagues as Honorary degrees).

College as a HEP becomes more significant for all other College courses. Courses with Australia-wide recognised qualifications branded upon them - Graduate Diploma, Certificate or a Masters – are unambiguous re what is on offer, and what such are worth.

College will be setting the standard. For example, our present ‘course’ for GPs (offered through RACGP and ACCRM) is learning content that is not assessed. Completion gives a certificate not comparable to anything else. Completion does not guarantee that the learner has actually acquired the skills. The public have no guarantees as to what this means in practice. Our future training of GPs will meet a level within the Australian Qualifications Framework (AQF). Those completing will have acquired the skills. This will give College a competitive advantage and leverage in communicating with the public about the difference between a doctor trained in skin health matters by College or trained by another organisation.
College is facing increasing demand for post Fellowship courses as the number of Fellows expands. Step one is to review Mohs Micrographic Surgery’s curriculum and align it to a graduate diploma qualification. We will seek TEQSA recognition for this from 2017.

Whilst Fellows maybe more interested in completing a post Fellowship training year than caring what level of qualification they have achieved, formal TEQSA approval will become a marketing tool, targeted at overseas dermatologists.

College is entering a 5 year period that can and must capitalise on the foundation work laid down. However College must prioritise resource deployment to find a balance with work on educational products that will recover cost or earn income, and that work which is needed but may yield no return.

Educational items with the potential to recover the costs of development or go further and create an income stream are:

- Cosmetic Dermatology (Post Fellowship);
- other cosmetic related smaller courses (eg Phlebology);
- GP education – skin cancer, general dermatology;
- Pharmacist education.

Educational items less likely to cover costs are

- education for Aboriginal Health Workers;
- education for Dermatology Nurses
- CPD which is ‘free’.
- Post-Fellowship education such as Paediatric Dermatology where we would expect maybe one or two candidates per year – not unlike Mohs.

College must increase its output of CPD modules for Fellows, seek partnerships with other providers for access to dermatology relevant modules of more generic nature, and aim to increase category 3 offerings over this plan period. These will be College branded, but the potential might exist to convert one or two to VET level certificates may become a possibility by the end of the strategic period.

Throughout 2015 College will gain considerable knowledge about the feasibility of GP and Pharmacy external offerings and the Cosmetic sub specialty offering.

From 2016 development challenges will change to administration challenges. Service standards and capability to respond to trainee needs will need to be responsive and College will need to assemble course co-ordinators and assessors, on top of those who teach. There will such roles for Fellows who may only wish to work clinically part time.

The scale of College educational operations will therefore grow notably over the period of the plan.

Finally this Strategy includes continuing to nationalise the delivery of our Training Program, and build up our on-line capability. Critical to the future is strengthening the quality of teaching and supervision, supporting supervisors and Directors of Training, and seeking to continually improve based on evaluations and feedback.

College will:
6. Create quality Trainee Education
   6.1. Complete the curriculum review
   6.2. Move pharmacology to pre-course ‘recommended study’, but not another ‘Part 1’
   6.3. Continually refine and add new modules eg EBM, cultural competency
   6.4. Complete HEP status as College, and Training Program as Masters

7. Refine trainee Education Delivery
   7.1. Nationalise the learning offerings
   7.2. Strengthen On-line capability/Moodle upgrades
   7.3. Improve Trainee support as per Higher Education Provider requirements

8. Advance Post fellowship education
   8.1. Review Mohs
   8.2. Create Cosmetic, explore potential
   8.3. Develop timeline and resource/income plan for next post fellowship offerings
   8.4. Develop Phlebology in context of Cosmetic

9. Create quality education for primary care clinicians
   9.1. Create ACD GP education HEP offering(s) for market mid 2016
   9.2. Review Med School curriculum 2015 and aim to widest possible reach 2016-19
   9.3. Develop Pharmacy education 2016
   9.4. Advance Aboriginal Primary Care worker education
   9.5. Advance Derm Nurse education

10. Strengthen supervisor quality
    10.1. Systematic approach to improve the quality of teaching – train trainees to teach;
         training for supervisors – Cert IV or alternative
    10.2. Assist the supervisor skills for trainee/supervisor relationships that are difficult;
    10.3. Survey learners on teaching quality
5.3. **Services to Members**

This plan aims over this period to make a vast improvement to a focus on delivering services to members and to and for the community. CPD, although developed and managed by staff in education services is listed here as a member service. Its concordance with the trend towards re-validation is required. The general level of engagement with Fellows will commence with a Member Survey that will guide the priorities for action. Internal communications and mechanisms can be improved. The focus on scientific and academic advancement in Dermatology will continue, and growing our membership by considering affiliations or amalgamations will create scale that College would benefit from.

11. **Expand CPD**
   11.1. Link CPD to likely tools that might comprise re-validation
   11.2. Move toward a 1 year CPD Program (from current 3 year)
   11.3. Build on new member portal for CPD and continually refine for maximum ease of use and mobile device interactivity
   11.4. Expand College-developed CPD units
   11.5. Strategic review of CPD needs, gaps and how best to deliver - assemble a mix of free CPD and CPD to purchase (as provided by other organisations)

12. **Increase member engagement**
   12.1. Survey the members and develop and implement action plan
   12.2. Engage with Fellows over the Strategic Direction
   12.3. Improve interactivity between Board and Members
   12.4. Develop and monitor measures of engagement for reporting

13. **Grow the member base**
   13.1. Continually refine entry selection of the next Dermatologists to meet best practice
   13.2. Explore closer relationship with NZDSI
   13.3. Strategically pursue relationships in the Asia-Pacific with dermatology societies
   13.4. Explore more formal affiliations of mutual benefit with doctor and non-medical colleagues - eg phlebology; oral; pathology; nursing
   13.5. Continue to widen those involved in the Scientific meeting without diluting core dermatology purpose

14. **Scientific and academic advancement**
   14.1. Change approach to Event Management under College management and drive innovation and size of annual scientific meeting
   14.2. Encourage and assist seed fund professorial appointments in every State
   14.3. Maintain Journal performance and impact factor
   14.4. Continue to grow the Rural Scientific Meeting and co-operative/joint meetings with partners in Asia-Pacific

15. **Advocacy and Internal Communications**
   15.1. Develop a communications service and plan for internal communications and advocacy for the profession to key influencer and regulatory bodies
   15.2. Improve links with key stakeholders who are partners in creating specialists
   15.3. Improve skills of key leaders such as Heads of Departments of Hospitals to protect and advance dermatology within the health system
   15.4. Improve and widen media capabilities by members in special interest areas
5.4. Organisational Excellence

Efforts to progress the three services above must be matched by a parallel determination to make the College the best practice organisation it can be – involving Governance improvement and Management improvement.

In 2014 and 15 the Board has commenced a dialogue with members about proposed changes to governance. This aims to increase the capability of the organisation through the quality of its governance. In 2006 the current Board structure was formed from a management-style Council. This evaluation has run for 10 years quite successfully, but the Board could be leaner, hold more appropriate skills, and be better at its duties as defined in the Corporations Act. The change proposed has commenced a dialogue. The dialogue needs to continue if the culture is to be shaped. Key to this is understanding of the challenges facing College.

College must maintain its financial viability and exercise care in resource deployment. College delivers education, and as a professional body it has made this choice, but this commits it to an in-house staffing model for education. As a small college outsourcing expertise may better serve the organisation than developing its own in house. This needs continual evaluation and assessment of the best value approach for College.

College’s reputation is not given but earned. Achieving ongoing certification remains a high priority as this confers our ability to lead and advocate from a position of primacy.

16. Governance
   16.1. Improve corporate governance
   16.2. Re-cast Educational governance to respond to the growth planned in Education
   16.3. Review all Education Policies
   16.4. Corporate Culture change – linked to 7 & 12 above

17. Financial viability
   17.1. Manage fee levels, cost to develop annual growth
   17.2. Deploy equity for College-wide benefit
   17.3. Manage invested funds to maximise return
   17.4. Protect intellectual property

18. Resource deployment
   18.1. Annual and 5 year rolling financial forecasts

19. Certification
   19.1. Maintain AMC accreditation – 10 year review in 2017 is a major review which is a key focus in the life of this plan
   19.2. Achieve HEP status and maintain. After 5 years self-accrediting status will enable swifter accreditation of new courseware. Aim to achieve self-accrediting status
   19.3. Maintain RTO accreditation
   19.4. Maintain ISO accreditation
### 6. Outcomes and Measures of Success

#### Education

<table>
<thead>
<tr>
<th>Training Program</th>
<th>Trainee satisfaction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lower trainee-in-trouble indicators</td>
</tr>
<tr>
<td></td>
<td>Supervisor satisfaction</td>
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</tbody>
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<table>
<thead>
<tr>
<th>HEP status and repeatable application templates ready</th>
<th>HEP status achievement</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Cosmetic course(s) inc phlebol</td>
</tr>
<tr>
<td></td>
<td>Pharmacy training defined</td>
</tr>
<tr>
<td></td>
<td>GP/ ACCRM training complete; arrangements satisfactory mutually where possible</td>
</tr>
</tbody>
</table>

#### Member Services

<table>
<thead>
<tr>
<th>Clear definition of member services</th>
<th>Members value for money in annual subs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>ASM gross profit continues</td>
</tr>
<tr>
<td></td>
<td>College Gross Profit maintained at 5% ROE</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Member engagement survey</th>
<th>Members engagement level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Trainee engagement level</td>
</tr>
<tr>
<td></td>
<td>Satisfaction with selection by members</td>
</tr>
</tbody>
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#### Community Service

<table>
<thead>
<tr>
<th>Communications strategy outcomes</th>
<th>Develop measures</th>
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<tbody>
<tr>
<td></td>
<td>Bequests and donations rise</td>
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<table>
<thead>
<tr>
<th>Communications service satisfaction</th>
<th>Stakeholder survey outcomes</th>
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#### Organisational Excellence

<table>
<thead>
<tr>
<th>AMC accreditation</th>
<th>Granted after 2017</th>
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<tbody>
<tr>
<td>HEP status</td>
<td>Granted to College and Trainee Program in 2015</td>
</tr>
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<table>
<thead>
<tr>
<th>RTO and ISO status maintained</th>
<th>Annually</th>
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<tbody>
<tr>
<td>Viability</td>
<td>Grow the College intangible (IP – courseware) assets by $1m in 2 years</td>
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<table>
<thead>
<tr>
<th>Financial</th>
<th>Balanced operating results</th>
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<tbody>
<tr>
<td></td>
<td>Maximum investment returns</td>
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</table>