



[www.moretonbay.qld.gov.au/redcliffe-museum/](http://www.moretonbay.qld.gov.au/redcliffe-museum/)

*SS Koopa*

See Queen of Moreton Bay SS Koopa in our historical article in our regular Where We Live And Work segments pages 5 & 20.

**President's Message . Dr KIMBERLEY BONDESON**

Former Prime Minister Kevin Rudd has quit parliament and resigned as the member for Griffith. We know that Tony Abbott defeated Kevin Rudd at the September 7 election this year. What does this mean for Health? Mr Rudd had retained his Brisbane seat of Griffith with a 3% margin at the September 7 election. However, his liberal opponent, former AMA & AMAQ President, Dr Bill Glasson, gathered a swing of more than 5 percentage points. The resignation of Kevin Rudd will force a by-election in the electorate of Griffith.

We will watch with interest what occurs over the next few weeks. To have someone with the medical expertise and political experience such as Dr Glasson in Parliament, could only be a positive thing for Health.

We already have Dr Chris Davis, the member for Stafford, as the Assistant Minister for Health. Looks like Queensland could continue to have a very strong, sensible medical presence in government.

Now onto Medical Tourism – one of our Health Insurers, NIB, is negotiating with clinics in Malaysia and Indonesia to sell offshore surgical and dental packages. Currently, it is estimated that 15,000 Australians travel overseas each year to undergo cosmetic surgery. Whilst I respect it is a patient's choice to go overseas if they want to for surgery, I object to one of our own Health Insurance Companies getting on the bandwagon and encouraging this. I am uncertain why NIB is doing this – there obviously must be a profit involved, or they would not be supporting it.

However, it is the Australia medical system, both Private and Public, that has to deal with the consequences of complications,

particularly infections. This opens up a whole can of worms, and I personally do not support it. This is a very short sighted project, which can easily lead to unintended long term complications and consequences as well as costs to the Australia Health System.



We already have a measles outbreak in Brisbane, and a dreaded Polio outbreak of 22 people believed to have contracted it in Syria. This is a reminder that we need to continue to be vigilant in our practices.

Dr Bill Glasson has confirmed that he has put his hand up for preselection ahead of the upcoming by-election for the federal seat of Griffith. Well done Bill, we wish you all success!

Kimberley Bondeson, RDMA President



**RDMA WELCOMES**  
**A Message From**  
**Dr BOB BROWN,**  
**President Northside**  
**Local Medical**  
**Association**

**“Medibank Private Service Offered at Selected General Practices”**

**Continued on Page 3**

**QML Pathology. | Redcliffe Laboratory**  
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*The Redcliffe & District Local Medical Association sincerely thanks QML Pathology for the distribution of the monthly newsletter.*

### **2013 MEETING DATE CLAIMERS:**

For all queries contact Margaret MacPherson Meeting Convener: Phone: (07) 3049 4444

### **CPD Points & Attendance Certificate Available**

**Venue:** Golden Ox Restaurant, Redcliffe

**Time:** 7.00 pm for 7.30 pm

**Tuesday February 26<sup>th</sup>**

**Wednesday March 27<sup>th</sup>**

**Tuesday April 30<sup>th</sup>**

**Wednesday May 29<sup>th</sup>**

**Tuesday June 25<sup>th</sup>**

**Wednesday July 31<sup>st</sup>**

**AGM - Tuesday August 27<sup>th</sup>**

**Wednesday September 18<sup>th</sup>**

**Tuesday October 29<sup>th</sup>**

### **End of Year Networking Function**

Next Meeting

**Friday November 29<sup>th</sup>**

## **NOVEMBER NEWSLETTER 2013**

The **19<sup>th</sup> December 2013** is the **timeline** for ALL contributions, advertisements and classifieds.

Please email the RDMA Publisher at

**[RDMAnews@gmail.com](mailto:RDMAnews@gmail.com)**

Website: <http://www.rdma.org.au>

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## NORTHSIDE LOCAL MEDICAL ASSOCIATION PRESIDENT Dr ROBERT (BOB) BROWN

### “Selected Medibank Private Service Offered”

Our practice was recently made aware of a service offered to some of its members through Medibank Private, offering bulk billed services at selected general practices and to be seen within 24 hours.

To me, it is clear that MP is positioning itself in the market as a quasi US style HMO (Health Maintenance Organisation). In part it has done this by purchasing special interest GP practices. Those special interest GPs have also been working towards established “GP specialties” such as in occupational health and travel medicine.

Now MP is directing some of its members (I believe those with full private health insurance) to consider attending named ‘non specialised’ General Practices. This move appears to be ‘a trial’ and also appears to be in Queensland only. I am unsure of all of the owners of the named GP practices but there could well be a common thread with corporate-owned practices. I do not know why those particular practices (or their doctors) are accepting the terms stated by Medibank Private! The terms are essentially that all consultations will be bulk-billed (underwritten by Medicare/Australian taxpayer) and “within 24 hours”.

I have looked at the normal billing policy of one of the Brisbane practices recommended by MP. A standard level B consultation at that practice is \$73 and there is scant mention of any bulk billing. In fact, the list of its published fees exceeds those fees listed at our practice! What appears to be common knowledge in the market is that Medibank Private is interested in buying practices and is also possibly positioning itself to be sold or publically listed on the Australian Stock Exchange. Perhaps US HMOs will be interested – I actually have no doubt! This is an evolving scenario and is in no way complete. I have not yet fully explored the ramifications of the move by Medibank Private. I cannot more clearly point out that Medibank Private is fully owned by the Australian taxpayer through the Tony Abbott led Australian Government.

I see this as a direct threat to private and independent General Practice and I question the fairness and overt anti competitive process involved. It is clear that Medibank Private is encouraging certain of its members to attend certain General Practices. Is it also doing this through its government subsidized after hours ‘hotlines’ and its other agencies?

Exactly where will this stop? Who else may Medibank Private purchase and/or influence?

I believe that all GPs need to take this move most seriously, whether we are talking about GP practice owners or GPs employed by corporate and non corporate owners. There appears to me anti competitive behavior as well as direction of the manner in which certain GPs will be billing. If that is not anti-competitive, what is? I encourage all readers to inform themselves about what has happened to all doctors in the US styled HMO scene or in the government influenced scene such as in the UK and other European countries. More importantly, doctors need to look to the AMA for leadership. To do this in a serious manner, doctors need to pay their subscriptions to enable funds to be available for such activities.

Dr Bob Brown,  
President,  
Northside Local Medical Association



#### **2013 Bi-MEETING DATE CLAIMER:**

**For all Northside LMA Meeting & Membership queries contact:**

##### **Meeting Convener:**

Miranda Russell, QML Marketing Office,

**Contact Details;**

Phone: (07) 3121 4574, Fax: (07) 3121 4972

Email: [Miranda.Russell@qml.com.au](mailto:Miranda.Russell@qml.com.au)

##### **Meeting Treasurer:**

Dr Graham McNally

**Contact Details;**

Phone: (07) 3265 3111

Postal Address: C/- Taigum Central Medical Practice, Shop 1,  
217 Beams Rd, Taigum Qld 4018

**Meeting Times: 7.00 pm for 7.30 pm**

**Next Meeting: 10<sup>th</sup> December 2013**

##### **2014 Dates:**

<b>1</b>	<b>11th February 2014</b>	<b>4</b>	<b>12th August 2014</b>
<b>2</b>	<b>8th April 2014</b>	<b>5</b>	<b>14th October 2014</b>
<b>3</b>	<b>10th June 2014</b>	<b>6</b>	<b>9th December 2014</b>

##### **Meeting President:**

Dr Robert (Bob) Brown

**Website and Link:**

Northside Local Medical Association Website

Link: <http://northsidelocalmedical.wordpress.com/>



## AUSTRALIAN MEDICAL ASSOCIATION QUEENSLAND PRESIDENT Dr CHRISTIAN ROWAN

### **Scrapped Tax Cap on Education Expenses, IR Changes for SMO & VMO Workforce in Qld, increased number of rural generalist training places in Queensland by 2016.**



Dear Members,

The past month has welcomed some positive news with the permanent scrapping of the tax-cap on education expenses and an increase in funding for rural generalist training places, unfortunately these gains have been overshadowed by the looming IR changes being imposed on Queensland's SMO and VMO workforce.

The Federal Government's recent decision to 'Scrap the Cap' was welcomed by AMA Queensland as a win for productivity and common-sense. The former Federal Government's plan to place a \$2,000 cap on tax deductions for work-related self-education expenses from July 2014 would have held immediate and detrimental consequences for doctors and medical students required to undertake continuous education and training.

This excellent outcome was a direct result of intense lobbying by the national Scrap the Cap Alliance which was founded by the AMA and a coalition of other professional Associations. AMA and LMA members across Australia should be proud of this achievement which demonstrates the ability of a united workforce to overturn reckless and ill-conceived policy decisions. We were also pleased by the Health Minister's announcement that Queensland will receive a \$1.8 million boost and redirection of scholarship funding to significantly increase the number of rural generalist training places in Queensland by 2016.

This doubling of intake numbers from 37 in 2013 to 80 in 2016 will improve access to local primary care services and offer rural communities greater choice and flexibility when making important decisions about healthcare.

As discussed in my last column, AMA Queensland and our union partner ASMOFQ, are continuing to lobby the State Government over proposed changes to industrial relations legislation and the introduction of individual employment contracts for SMOs and VMOs.

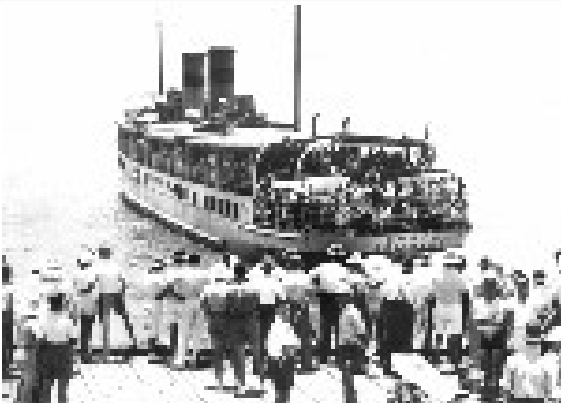
Despite our attempts to negotiate with the Government, we have made very little progress in reaching a satisfactory outcome that protects the current working rights and conditions of Queensland's salaried doctors.

We were alarmed this week to see New Zealand doctors being warned to 'steer clear of Queensland' by the Executive Director of the Association of Salaried Medical Specialists as concern over these draconian decisions spreads across the profession.

This situation clearly needs a long-term and reasonable solution to prevent a mass exodus of practitioners from Queensland's public health system, already struggling to meet the health needs of the community. Full copies of our correspondence with the Health Minister, and his response, are available on the AMA Queensland website ([amaq.com.au](http://amaq.com.au)) along with links to the ASMOFQ site and information updates. We encourage all members to view these documents and share with their colleagues, it is critical that we have the full support of the profession to send a clear message to Government on these issues.

Yours sincerely,  
Dr Christian Rowan  
AMA Queensland President





**SS Koopa at Redcliffe Pier <http://trove.nla.gov.au/version/48425219iv>**

The best known and most loved ship among the many steamers plying the waters of Moreton Bay from the 1880s until 1953 was the SS Koopa. She was known as the "Queen of Moreton Bay" and was built by Ramage and Ferguson of Leith in Scotland for the Brisbane Tug and Steamship Company at a cost of £20 000. Koopa is an Aboriginal word for 'flying fish'. The SS Koopa was launched in October 1911 and arrived in Brisbane on Christmas Eve that year. She measured 192 feet 7 inches (58.7m) in length, with a beam of 28 feet 1 inch (8.5m) and a draft of 8 feet 7 inches (2.6m).

The SS Koopa's first trip was on Christmas Day 1911, leaving the Customs House wharf at 2 pm carrying company members, officials and invited guests to Redcliffe and returning. The first trip for paying passengers occurred on Boxing Day and a large crowd greeted the ship's arrival at the Redcliffe Jetty. Originally the SS Koopa ran from Brisbane to Woody Point, Redcliffe and Bribie Island. The fare was 2/6 return. The route was down the Brisbane River to its mouth, around the old Pile Light to the Koopa Buoy off Margate and Suttons Beaches to Redcliffe Jetty.

From Redcliffe her chartered course went past the Reef Point beacon off Scarborough and across to the beacons off Bribie Island marking the channel leading into Pumicestone Passage and up to the Bongaree Jetty (built 1912). When heavy south easterlies were blowing during the Moreton Bay section of the trip, the shallow draught ship rolled considerably, resulting in many passengers becoming seasick much to the annoyance of Captain Johnston, who prided himself on running a clean and tidy ship.

SS Koopa, licensed to carry 1153

passengers with a dining saloon seating 100 was advertised for her "Speed and comfort" combined with a "Promenade, Main Deck and Saloons brilliantly alight and shimmering on the waters". Koopa was well decked out for her passengers' comfort with "Confectionery Stalls, light refreshments and Bar" and serviced by a select staff of Stewards... For thirty-one years Koopa did the Brisbane-Redcliffe-Bribie route carrying thousands of holiday makers and her maintenance was carried out at Peters' Slip facing at the Shafston Reach at Kangaroo Point. If further work beyond the capacity of Peters Slip was needed, SS Koopa was docked at South Brisbane.

The Royal Australian Navy requisitioned the Koopa on 18 August 1942 and commissioned on 14 September. Many alterations were made to the ship by the Navy for her service as a supply ship in New Guinea waters during the remainder of World War II. Koopa was the tender, mother-ship and repair facility for a group of sixteen Fairmile patrol boats during this time.

When the SS Koopa returned to Brisbane in July 1945 she underwent a major naval refit and after her naval service, she was returned to the Brisbane Tug and Steamship Company in February 1947. She resumed her seafaring trips to Redcliffe and Bribie on Sundays, Tuesdays, Thursdays and Saturday afternoons. In 1952 the Koopa was bought by the Moreton Bay Development Company who continued with her usual run until her final trip in May 1953. There were plans to convert her for use as a Barrier Reef Cruiser or as a vehicular ferry on the Cleveland-Stradbroke Island run but were abandoned. On 3 October 1960 two tugs took SS Koopa from the Stanley Wharf at South Brisbane to Boggy Creek, Myrtle town where a week later she was moved and placed opposite Bulwer Island where her dismantling began. Her two masts were removed by helicopter and the foremast was donated to St Paul's School at Bald Hills for use as a flagpole, while the aft mast was erected in the sawmilling yard of E Proctor & Son of Nundah. It was the end of an era for the "SS Koopa". Her demise ended a heart warmed and memorable chapter in the history of Redcliffe and Moreton Bay and for the holiday makers and school children of Brisbane who no longer can enjoy the pleasure of sailing the waters of the Brisbane River and Moreton Bay on a genuine coal burning gracious "Queen of Moreton Bay."

# AMAQ BRANCH COUNCILLOR REPORT NORTH COAST AREA REPRESENTATIVE Dr WAYNE HERDY



## AMA COUNCILLOR'S COLUMN

It's storm season, and the AMA has put rest to a significant storm in a teacup. The \$2000 cap on tax deductibility of self education expenses, proposed by the former Labour government, has now been declared dead and buried.

That cap was aimed initially at doctors taking supposedly luxury overseas holidays, but it wasn't long before other professions, especially the legal profession, realized that they were in the target zone too. The AMA led the charge in the campaign against the proposal, but the government could not ignore the cacaphony when other professionals, including less well-heeled professions such as teachers, added their voices to the objection. Ultimately, the ATO still has the power to disallow claimed tax deductions, so cheats will eventually get caught even without an artificial boundary that wasn't appropriate even to the ALP's electoral heartland.

Apart from the success of another (admittedly minor) AMA-led campaign, this storm in a teacup has more important lessons. The most important lesson is that, if a government official gets a bee in his/her bonnet about a seemingly trifling incident, the power that parliamentarians and bureaucrats wield can have far-reaching consequences. Let's not forget the urban myth about a former ALP Minister for Health being ask to sign her Cabcharge docket with a drug company pen, and this trivial incident leading to a wide program against drug company promotional items being given to doctors. No more free pens because one individual took exception to a meaningless observation. While I would not go so far as to characterise this as an abuse of power, the personal opinion of an individual has led us down a path that has become quite extraordinary.

It is not only the loss of our birthright to receive free pens that now haunts the medical profession. Drug reps are counting the sandwiches and reporting to Big Brother in a way that defies logic. There is a massive gap between catered functions at the Opera House and a nibble of pizza snatched in the non-existent lunch break in the staff room. I am not persuaded that a \$10 bribe will convince a prescriber to commit a million dollars worth of PBS cash for a worthless product. Drug reps do provide real information, and I fondly cling to a belief that medical graduates drawn from the top 3% of the country's intelligensia can separate the hype from the science in sponsored evening educational meetings. Somebody has lost the plot here, and I can only hope that in the fullness

of time the pendulum will stop swinging at a point that includes logic and practical reality.

With that little debate about tax deductions behind us, and the ongoing debate with Medicine Australia looming endlessly on the horizon, we are still waiting with half-bated breath for the long-awaited health reforms promised by the new Abbott government. They are still focussed on budgets and boats, so news about Medicare Locals and after-hours services and realistic Medicare rebates are yet to hit the front page.

The best news to hit medical politics for quite a while is the resignation of Kevin Rudd from Federal politics.

I can personally crow about this announcement, because my regular readers might recall that I predicted his resignation as soon as the election result was announced. I hasten to explain that this is not a personal insult from me to the ex-PM. In fact, I rather like Kev, and I sincerely respect what he tried to do, even if I don't agree with what he aimed to achieve nor the way he set about doing it.

No, my delight arises from the fact that his departure offers another opportunity for Bill Glasson to throw his hat back in the ring – as he promised to do just after the election. If Bill runs again, he has a great chance of succeeding – just look at how close he came to toppling the sitting Prime Minister only a few months ago. And if Bill gets a seat in the green leather chairs in Canberra, you can bet your super fund that he will not be sitting quietly on the back benches playing solitaire on his laptop. The medical profession is likely to see him expressing his views loudly and indelibly on a daily basis. Hansard will be recording what I expect to be the strongest advocacy for the realities of medical practice that history has ever seen. He will represent his electorate of Griffith well, but he will also represent his wider electorate, the medical profession that he served so well as AMA President, just as well. No individual can achieve miracles in politics, and I don't hold out hope that he will single-handedly bring about real reform in delivery of health care. But I am confident that with Bill on the treasury benches, the quality of debate about health care will be in good hands.

WAYNE HERDY

AMAQ BRANCH COUNCILLOR



# RDMA October Meeting 29/10/2013



**RDMA President Kimberley Bondeson Introduced the Meeting Sponsor Moreton Eye Group Representative: .**



**Meeting's Speaker**  
Dr Graham Hay-Smith (Right top picture).



**Topic:** Not an island:  
Inflamed eyes and your whole patient.

Moreton Eye Group Principal Dr Frank Cunningham (centre right).



Peggy Ekeledo-Smith and Eillehi Cunningham (Right bottom)



New Members Chris Brooks (Left Top) and Rachel McLellan (Left Centre).



Frank Cunningham & Graham Hay-Smith (Left bottom).

## REDCLIFFE & DISTRICT MEDICAL ASSOCIATION Inc.

### MONTHLY MEETING

## END OF YEAR NETWORKING FUNCTION

**Date:** Friday 29th November 2013

**Time:** Bring your partner and join us for the final meeting of the year  
7.00pm for 7.30pm

**Venue:** Sails Restaurant, Suttons Beach Parkland, Marine Parade, Redcliffe

**Cost:** Members Free, Members' partners \$50  
Non-members \$50, Non-members' partners \$100

**Speaker:** Dr Christian Rowan, AMAQ president

**Speaker:** Dr Jenny Grew

**Topic:** The Pathologist in the Machine: Diagnostic Patient Care, Not Just Diagnosis

**Dress:** Smart Evening Wear

**Sponsor:** **QML Pathology** Represented by Margaret MacPherson

**RSVP:** e: Margaret.MacPherson@qml.com.au t: 3049 4444  
by Friday 22nd November





# AMAQ BRANCH COUNCILLOR REPORT GREATER BRISBANE AREA Dr KIMBERLEY BONDESON



## AMA COUNCILLOR'S COLUMN

The horrific super typhoon Haiyan which has devastated the city of Tacloban and surrounding township and outlying islands in the Philippines is a true disaster.

The United Nations estimates 10,000 may have died in Tacloban, where 5 meter waves flattened nearly everything in its path as it swept hundreds of meters across the low-lying land.

The United Nations estimates more than 11.3 million have been affected, with 673,000 made homeless.

Watching the devastation unfold on the news, reminded me of what we saw in our recent trip to Peru. Some of the townships were built into the hill

side – they dug out the hillside with a backhoe, and started building their earthen dried brick houses.

None of these homes conformed to any building standards or regulations, and a massive landslide or flood would decimate these homes and the people.

When you see the simplicity with which the Peruvian people live their lives, then it is easy to understand when a natural disaster occurs, how so many homes are destroyed and lives lost.

Dr Kimberley Bondeson  
AMAQ Branch Councillor  
Greater Brisbane Area



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HAYDEN WHITE DFP. Dio.FMBM

# Kimberley Bondeson's Travel Pictorial



Kimberley Bondeson in the Mountains in Santiago



Machu Picchu in Peru.



Walking in Bolivia.



Reed Island and House at Lake Titicaco.



The city of La Paz



La Paz Witch Doctor Markets

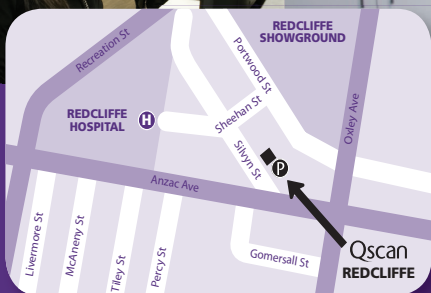


Santiago



Santiago Witch Doctor Markets

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**Dr Nigel Sommerfeld**  
MBBS, FRANZCR

**Dr Anthony Chan**  
MBBS, FRANZCR

**Dr James Challen**  
MBBS, FRANZCR

**Dr Tevita Taka**  
MB ChB, FRANZCR

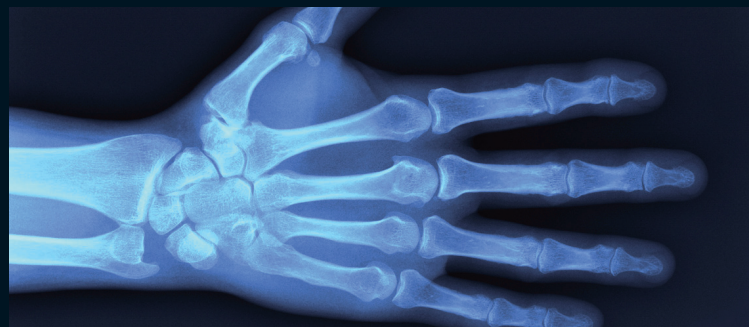
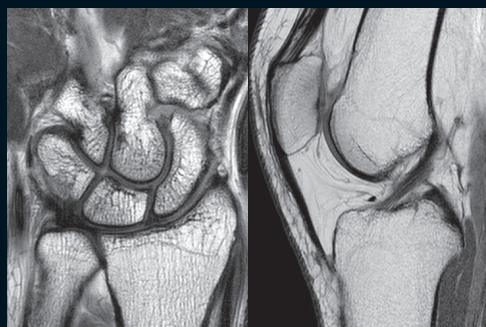
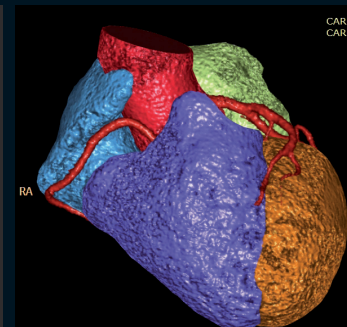
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FRCP, FRANZCR, FAANMS

**Dr Angus Thomas**  
BSc, MBBS, FRANZCR

**Dr Mark Sinnamon**  
MBBS, FRANZCR, FAANMS

**Dr Rodney Larsen**  
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# MEDICAL MOTORING

with Doctor Clive Fraser

## Texting & Driving. "He's Gonna Kill Me"

Motoring Article #108

Safe motoring,  
[doctorclivefraser@hotmail.com](mailto:doctorclivefraser@hotmail.com)

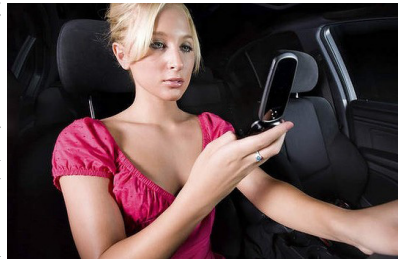


For over twenty years I've driven to work along the same familiar route. It's a short drive through non-descript suburbia. Whilst the surroundings have slowly changed on the journey, I've driven that route ten thousand times and I feel like I know it like the back of my hand.

The suburbs are slowly getting leafier in spite of de-forestation and I've noticed that the kid's who once rode push-bikes to school are now driving cars. Over the years the journey to work has become second nature to me and I'm very aware that familiarity can breed contempt.

Whilst my old Volvo does have a CD (and cassette) player, I prefer to listen to the ABC radio news and AM is always on, on my way to work. For ten years the familiar voice of Tony Eastley has been my sole companion on my daily drive. Some might say I'm old fashioned, but I just don't like all those distracting bits of technology (MP3's, pod casts, Bluetooth streaming etc) that are very fashionable right now.

So as I set off last week for the 10,001st time and came to a roundabout only 300 metres from where I live, I gave way to a lady in a brand new Hyundai ix35 4WD who seemed to be looking down rather than straight ahead.



Now most roundabouts have three exits, but the lady driver in front of me decided to make a whole new exit for herself across a traffic island, over a gutter and into a nature reserve. Whilst she was in a 4WD with presumably some off-road capability she did then come into contact with the park's perimeter defences.

In an effort to stop hoons from driving onto the grass the local council have placed vertical bollards around the park and her brand new Hyundai ix35 came to rest impaled on a 60cm high railway sleeper that had been placed in the ground.

Realizing that the lady might be injured, I hastily pulled over and ran to her aid. Like most people involved in a crash she was understandably very distressed. I found her screaming uncontrollably, "He's going to kill me, he's going to kill me!" I immediately thought that she might have been on the run from a member of an outlaw motorcycle gang. We have a lot of that happening in Queensland right now according to our Premier.

Perhaps that's why she was distracted and ran off the road? Perhaps that's why she crashed in perfect driving conditions? There was a hissing sound coming

from the front end of her car. She wanted to try to start the Hyundai

to drive backwards and get on her way. From what I could see that wasn't going to be possible. I courageously told her that I'd help her out and my first thought was to open the driver's door. Whilst the Hyundai ix35 does have a 5 star safety rating on ANCAP testing I regret to say that the door would not open as the front guard had concertinaed backwards. I heard more hissing from under the bonnet and believing that an explosion was imminent I raced to the passenger side and couldn't budge that door either.

As the lady was fairly slim she climbed into the back and exited through the rear doors. She fell into my arms hysterically screaming again, "He's going to kill me, he's going to kill me!"

As a psychiatrist I hadn't really come across this situation in my training, but by now a rather bosomy neighbour had arrived and the victim was now in her arms and still screaming, "He's going to kill me, he's going to kill me!"

It was at that point that the new rescuer's CWA training stepped in and she said, "Cars can be fixed, I'm just glad you're not injured". To which our hapless victim kept sobbing whilst she cried, "He's going to kill me, he's going to kill me!"

By now I was running late for work and Tony Eastley had signed off. The crash victim had forgotten about her rescuer who holds a Certificate in Advanced Life Support.

There was nothing more that I could do, but call a tow truck. At that point the woman's i P h o n e fell to the ground and I saw a half-written text message!!!! She wasn't trying to

escape from an outlaw motorcycle gang after all. She was teeing up a meeting with Jo-Anne for a latte.

It was then that I realized that if I'd been a second earlier on that roundabout that, "She was going to kill me, she was going to kill me!" Please don't text whilst driving.

Hyundai ix35 2.4 Elite AWD	
<b>For:</b>	Affordable, roomy family wagon with a five year warranty.
<b>Against:</b>	Not able to drive over vertical bollards.
<b>This car would suit:</b>	Anyone who doesn't text whilst driving.
<b>Specifications:</b>	2.4 litre 16 valve 4 cylinder petrol
	136 kW power @ 6,000 rpm
	240 Nm torque @ 4,000 rpm
	6 speed automatic transmission
	9.8 l/100 km (combined)
	\$37,390 drive away (Buderim, Qld)
<b>Fast facts:</b>	56% of drivers admit to texting whilst driving.
	If you text whilst driving your risk of crashing increases by more than 23 times.



# Nelson pulls no punches

**F**EDERAL AMA vice president, Brendan Nelson was pulling no punches when he outlined the medical profession's official stand on the Government's Medicare changes at a packed meeting of Redcliffe doctors in October.

"The time has come when we are going to have to fight to get what we want," Dr Nelson said.

"We can't sit idly by any more and watch as our rights, our patients rights and the standard of medical care in this country gets trampled on."

"We are going to have to draw a line in the sand and let the Government know that we won't be taking any more erosion of our rights or our patients rights."

Dr Nelson, Vice-President of the AMA, was addressing members of the Redcliffe and Districts LMA at its monthly meeting in Margate on November 25.

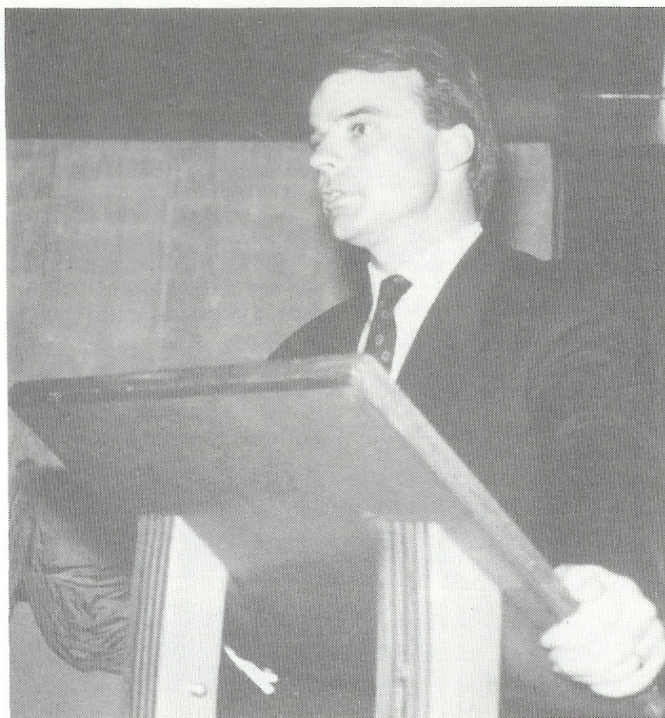
His visit to Margate was part of whirlwind tour of Queensland and other states in which he urged AMA members to become involved in a campaign to wipe out across the board bulk-billing.

He told doctors the AMA had drawn up clear guidelines concerning the Government's proposed changes to its health policies, which included the option to restrict bulk-billing, the re-introduction of private health insurance and freezing the import of overseas doctors.

"On the bulk-billing issue, we believe it should be an option only to those four million or so social security cardholders in Australia - those people who have health cards, unemployment cards, pensioners and the like."

He said the rest of the community should have no part of bulk-billing.

"The Medicare rebate should be retained at the present level for those who would in future not be eligible for bulk billing," Dr Nelson said.



**Dr Nelson at the podium, addressing the October meeting of doctors from the Redcliffe and Districts Local Medical Association at the Golden Ox.**

"But people must be given the option of being able to go and buy private insurance for medical package and hospital services."

Dr Nelson told doctors that the \$3.50 and \$2.50 Medicare rebate cut was only the tip of a programme being pushed by the Government to introduce

could take over some of the functions doctors now carry out."

He said Howe had already tested the waters in this area by writing to the President of the College of Ophthalmologists, telling him scheduled fees for refraction would be reduced to that of an

## **"No more erosion of our rights"**

sweeping changes to Australia's health care system.

"We are far more concerned with Health Minister Brian Howe's suggestion that some 5000 GP's be taken out of the system in the next five years," Dr Nelson said.

"And we are also worried about his belief that nurses, physiotherapists, psychologists or assorted other people

optometrist on the basis that "equal work will attract equal pay."

Dr Nelson said Howe's attitude was along the lines of what he described as "the army of the new health"

"You have this policy which seems to promote the idea that doctors should be

marginalising the planning and delivery of health services.

"That's the way Brian Howe thinks and no doubt he might mean well.

"In fact some of the things that Howe is putting forward in the budget plan are things that I think a great many doctors would all like to see achieved."

"In my own division of general practice, we have been trying to work on strategies whereby GP's talk to and educate people on preventative health practices.

"But I certainly don't trust Howe or anyone else in the present government to do it for us."

Dr Nelson said both he and AMA President Bruce Shepherd had also pressed Brian Howe on the issue of stemming the immigration of overseas doctors.

"We want the import stopped and a quota system set up - that at the most should be 10 per cent of our national graduating class - similar to that operating in most other western countries," he explained.

But Dr Nelson said the minister had rejected these options saying that he could not turn off the overseas tap, because it provided a source of doctors to service outback Queensland.

"Howe told me the Rural Doctors Association in Queensland had conveyed to him that any medical immigration cuts would be inappropriate because it would be impossible to fill the country positions," Dr Nelson said.

Dr Nelson said it was this sort of either-or proposition that was being used to manipulate sections of the medical community.

In answer to a question on how the AMA would handle the problem of isolated medical posts, Dr Nelson said the solution lay in developing a programme of rural training.

"For instance, we may need to improve the conditions which attract doctors to those areas," he said.

"Fundamentally, the best

• Continued page 5 →





# Something To Brighten Your Day

**A mate of mine recently admitted to being addicted to brake fluid. When I quizzed him on it he reckoned he could stop any time....**



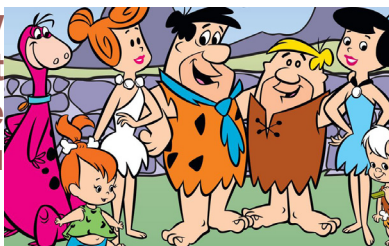
<https://www.google.com.au/search?q=stop+signs+pictures+free>

**I went to the cemetery yesterday to lay some flowers on a grave. As I was standing there I noticed 4 pall bearers walking about with a coffin, 3 hours later and they're still walking about with it. I thought to myself, they've lost the plot!**



**I was at a cash point/ATM machine yesterday when a little old lady asked if I could check her balance, so I pushed her over.**

**A new Middle East crisis erupted last night as Dubai Television was refused permission to broadcast 'The Flintstones'. A spokesman for the channel said, "A claim was made that people in Dubai would not understand the humour, but we know for a fact that people in Abu Dhabi Do."**



[http://doyouremember.com/wp-content/uploads/2013/09/flintstones-with-kids-courtney-dooyoo.co\\_uk](http://doyouremember.com/wp-content/uploads/2013/09/flintstones-with-kids-courtney-dooyoo.co_uk)

**My daughter asked me for a pet spider for her birthday, so I went to our local pet shop**

**and they were \$70.00! Sod this, I thought, I can get one much cheaper off the web.**

**6 out of 7 dwarves are not happy.**

**My son started a new job in Seoul next week. I thought it was a good Korea move.**

**I was driving this morning when I saw an NRMA van parked. The driver was sobbing uncontrollably and looked very miserable. I thought to myself 'that guy's heading for a breakdown'.**



<http://www.google.com.au/>

**Reminder:**  
The new audit triennium starts 1 January 2014!

OK

**WEDNESDAY 1 January**

**Relax, you're re-enrolled!**

**The 2014 - 2016 Audit Triennium starts on the first of January.**

**Enrolled in the Surgical Skin Audit or the Cytology Pap Smear Audit?**

Registrations have been automatically renewed, so all you need to do is continue submitting your samples using the audit request forms.

For enquiries, change of details, or to register, please call us on (07) 3121 4565.

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• From page 3

## STALEMATE IN TALKS WITH GOVERNMENT

way to get doctors to administer the country posts is to make sure young people from these rural areas get into medical schools.

"And instead of just looking at finding a doctor to fill a post, we should be recruiting families - the wives, husbands and children of doctors.

"On this issue, Howe is willing to talk to us, particularly about things like guaranteed holidays, breaks with professional leave, children's education needs and so on."

But on other issues Dr Nelson said the talks he, Bruce Shepherd, other AMA members and representatives of the College of GPs had with Brian Howe and the Health Department over the Medicare changes, had reached a stalemate.

"The AMA and the College of GPs have both decided to let further meetings with Howe be handled by their secretariat.

"We will only enter into

further talks with Howe and his department if we feel that it is going to be constructive," Dr Nelson said.

"The AMA has an agenda of things it wants to achieve," he added.

"We are not just objecting or fighting for the sake of it.

"But I don't think we are going to get anywhere with Howe.

"The biggest problem is that he doesn't seem to believe in doctoring.

"When we were dealing with Neil Blewett, he did at least have a basic belief in what we do, even if he didn't necessarily like us.

"That just doesn't seem to be the case with Howe."

Dr Nelson also told the meeting that the issue of doctors fees was a big stumbling block in negotiations with the minister.

"You just can't seem to get through to him that when you talk about income, fees and standards of medical care, which includes caring for patients, that you are talking about the same issue.

"In order to look after people properly, you need to charge an adequate fee that allows you to make an adequate income for yourself and your family.

"You need to take care of your basic needs and the costs involved in running a practice, so you can be free to concentrate on providing the best medical advice and care possible for your patients - and the standard of care that the public has come to expect."

Dr Nelson said some people were intent on portraying doctors as part of a money hungry profession and the AMA as a lobby group only out for its own interests.

"But the bottom line is patient care and the need to maintain a quality of health service and medicine in this country that supports both the practitioner and the public - and that's certainly why I am here and why I am prepared to fight the government on this issue."

## From apathy to activity in only three years

**T**HREE years ago, Dr Brendan Nelson was, in his own words, one of the most politically apathetic medics you were ever likely to find.

He was quite happy to doctor away quietly in his family practice in downtown Hobart, leaving others to get on with the public business of dealing with bureaucracies, the rules and regulations.

"If anyone came near me mentioning the AMA, I became an expert at ducking and weaving.

"In all of Australia you probably wouldn't have found a person less interested in the politics of medicine and the AMA than I was.

"I thought as long as I got on with what I was doing, and took care of patients and practiced good medicine, then everything would roll along okay.

Dr Nelson said he looked on the AMA as a reactionary organisation, wanting to constantly oppose the government.

But life in sleepy hollow changed the day Brendan woke up to find a bold headline leaping out from his morning newspaper, proclaiming to all and sundry that doctors' salaries were in the vicinity of \$154,000 a year.

"It was one of my 100 hour weeks and although it didn't make me to happy to read such a headline, I had to get to the surgery, so I let it go.

"But no sooner had my first patient walked in, than he wanted to know what I did with my \$154,000 a year salary."

Dr Nelson said that was the comment that spurred him to ring the AMA and inquire as to any legal action being taken over the story.

"They told me to more or less ignore it, but that if I wanted to do something about the doctors' situation, to come along to an AMA meeting.

"I did, and found myself getting more and more involved because I wanted to see things done properly.

"So from being one of the most apathetic political doctors in Australia, I now find myself on the front line.

"And I'll openly admit that I'm not frightened to take on the Government or anybody else when it comes to getting better conditions for medicine, the people who practice it and the people who use it.

Dr Nelson urged all doctors to shake off their apathy and show their political interest.

"We are going to have to fight the Government over these proposed Medicare changes and we are going to have to do whatever it takes.

"If nothing else, discuss the Medicare situation with your patients and get your staff to do the same.

"Explain it to them, tell them what it means in terms of patient care and service.

Dr Nelson said in his own practice he and other staff members had gone so far as to phone and make appointments for patients to see their local politicians and talk over their concerns.

"Unless we harness the 1.7million people that go through our surgeries each week and explain how these changes affect them, so they also become involved, then I can't see the Government doing much.

"There is only so much the AMA and the Medical Colleges can do.

"The Government may not listen to us and they may try and sweep us aside, but they will have to listen to our patients."

## Christmas Party popular

Tickets are selling fast for the the Redcliffe and District Local Medical Association Christmas Party on Friday, November 29.

The party will be held at Raphaels Restaurant at Sandgate and according to organiser, Dr Geoff Hoel, was chosen because of its outstanding quality of gourmet meals.

"The restaurant is BYO but the LMA is subsidising the event, providing beer wine and soft drinks," Geoff explained.

If you want to join in the end of year celebrations, bookings can be made through Judy Tucker, at 2281 Sandgate Road, Boondall, 4034.

Numbers are strictly limited to the first 70 bookings.



## SMSF – Tax Saving through Super

By Kirk Jarrott

Compared to previous generations, we are retiring earlier and living longer. The Australian male can now expect to be retired for 21 years, whilst Australian woman are spending an average of 25 years in retirement.

While we may have time to pursue hobbies, travel and other neglected interests, 20 years or more is a very long time to support yourself without the security of full-time employment.

In the correct set of circumstances, superannuation can act as a potential “Tax Haven” for investors investing in property or other asset classes. Australians who take care in establishing their Superannuation investment strategy can potentially open themselves up to considerable tax concessions both in terms of annual income tax as well as capital gains tax upon sale, all while providing a sound foundation for retirement living.

To encourage Australians to save for retirement, the Government provides tax concessions for superannuation. These arrangements depend on whether super contributions are concessional or non-concessional. Concessional contributions are generally those your employer makes, or that you make when you are claiming a tax deduction. These contributions are taxed at 15% instead of your marginal tax rate. There is an annual limit on the total amount of concessional components, ie: Under 60 = \$25,000 cap aged 60 or over \$35,000.

TIP: For those turning 60 this year may want to contribute more to super and potentially save more personal income tax.

Non-concessional contributions are generally contributions that are not tax deductible. These contributions are not taxed when they are made. These are subject to limits, ie: Under age 65 \$150,000 or up to \$450,000 over a three year period under a bring-forward provision.

Australians have a number of choices when it comes to the type of superannuation that best suits them. Generally the choices are limited to:

- Self Managed Superannuation Fund
- Retail based funds
- Industry based funds

The type of superannuation that best suits you will be influenced by the following factors:  
Desire for control and influence over the investments of the fund;

- Ease and flexibility in dealing with all matters associated with superannuation;
- Cost effectiveness associated with management, administration and reporting of fund issues;
- Estate Planning Issues;
- Asset Protection concerns.

All types of superannuation have their place, the important thing is to identify which type best suits your needs. There is no doubt that SMSF's have become more popular than ever. Growth rates highlighted by the ATO support this fact.

If you would like to discuss this article or other superannuation strategies please contact me on 07 54379900.



Dear Dr Herdy

### **Self Education Tax Cap Scrapped**

I am delighted to be able to let you know that the new Government has announced, following strong pressure from the AMA and other groups, that it will scrap the former Government's proposed \$2000 cap on tax deductions for work related self education expenses.

This is a victory for common sense and reflects the significant effort made by the AMA and members alike to campaign against this ill considered tax on learning.

The AMA was a founding member of the Scrap the Cap Alliance and has been lobbying against the proposed cap since former Treasurer, Wayne Swan, released the ill-informed policy back in April.

Members have made an enormous contribution to this campaign through your participation in surveys, letters and countless emails to members of Parliament.

The new Government has clearly listened to our concerns.

The proposed cap would have been a significant disincentive to doctors to continue their training and education throughout their careers, with their patients and communities the ultimate losers.

Quality medical education is expensive and the proposed \$2000 cap defied the reality faced by doctors wanting to improve and broaden their skills.

We asked the new Government to scrap the cap and it has clearly delivered.

Thank you for your support in this critical campaign, which has once again demonstrated the importance of the AMA as a powerful advocacy voice for the profession and your patients.

Your sincerely

Dr Steve Hambleton  
AMA Federal President  
[@amapresident](#) on Twitter







# Narangba Family Medical Practice

## Job Vacancy

A part-time (*with view to full time if required*) VR Family Doctor for the Narangba Family Medical Practice ([www.narangba-medical.com.au](http://www.narangba-medical.com.au)) as one of our doctors (Dr. Orr) is leaving to specialise.

We are a three doctor, fully computerised, non-bulk-billing practice established since 1986 in an outer, semi-rural northern suburb of Brisbane. The ideal candidate would be of an age where taking over the whole practice eventually would be a distinct possibility.

**Contact: Dr Peter C. Stephenson, Mobile: 0403 151 602.**

**Practice Location:** Opposite the Narangba Railway Station, Main Shopping Centre, beside the Narangba Pharmacy.

**Street Address:** 30 Main Street, Narangba Q 4504.

**Postal Address:** P.O. Box 3 Narangba Q 4504



# MAJELLAN MEDICAL CENTRE



## Job Vacancy

A VR, GP is required for a Scarborough Beachfront, Non-Corporate Practice which is 30 minutes from Brisbane's CBD. The Accredited Practice has private billing facilities, modern equipment and has staffing of nine doctors and registered nursing support.

The Medical Centre has a Computerised Skin Cancer Clinic, ultrasound machine and operating microscope. Allied Health staff are also on site. A candidate who is fluent in English, Afrikaans, Dutch, German or French languages would be an advantage.

**Contact:** **Angela De-Gaetano (Practice Manager)**

**Practice Location:** Majellan Medical Centre, 107 Landsborough Avenue, Scarborough Q 4020

**Practice Phone:** (07) 3880 1444

**Practice Fax:** (07) 3880 1067



# Australian Medical Association Limited



42 Macquarie Street, Barton ACT 2600;  
PO Box 6090, Kingston ACT 2604

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T: (02) 6270 5400 F (02) 6270 5499  
Website : <http://www.ama.com.au/>

## “NEW REPORTS CONFIRM GPs KEY ROLE LEADERS IN PRIMARY CARE”

Two new health reports released this week – General practice activity in Australia 2012-13 and A decade of Australian general practice 2002-03 to 2012-13 – confirm the key role of GPs as the leaders in primary care in Australia. Released by the Bettering the Evaluation and Care of Health (BEACH) program, the reports show that the Australian community is relying more and more on highly skilled GPs for quality health care and advice.

AMA President, Dr Steve Hambleton, said today that the reports show clearly that GPs are the preferred first port of call for Australians seeking the best possible health care, and demand is growing as the population ages and more people are experiencing chronic and complex conditions. “When Australians are sick or want trusted health advice, they want to see a GP,” Dr Hambleton said. “As the population ages, chronic diseases are accounting for an increasing proportion of a GP’s workload.

“There are now significantly more GP visits for depression, diabetes, atrial fibrillation, and hypothyroidism than a decade ago. “GPs are dealing with more problems per visit. “They made 7.6 million more referrals to other medical specialists and 3.7 million more referrals to allied health services than a decade ago. “GPs are ensuring that people are receiving the right care at the right time from the right health professional. “These reports underline the unique leadership role of GPs in the health system. “Any moves to allow other health professionals to do the work of a GP must be resisted. “Instead, GPs must receive stronger support to maintain and build on their key role as community demand inevitably increases in coming years. “The AMA believes that the Government needs to reform current Medicare arrangements targeting chronic disease. “GPs are integral to keeping patients with chronic

**MEDIA RELEASE MEDIA RELEASE MEDIA RELEASE**

disease healthy and out of hospital, but current Medicare-funded chronic disease management arrangements are too limited, are difficult for patients to access, and involve considerable red tape and bureaucracy. “The AMA has a plan that offers patients with multiple chronic conditions and related complex care needs improved access to GP-coordinated quality primary care. 2

“The AMA plan enhances existing arrangements and supports patients to spend more time with their GP when they need to. “It provides patients with streamlined access to a broad range of allied health and other support services and it supports a more proactive approach to the delivery of care. “GPs must be given greater support and scope to provide access to multidisciplinary care and support services for patients with chronic and complex disease,” Dr Hambleton said. The AMA Chronic Disease Plan: Improving Care for Patients with Chronic and Complex Care Needs is at <http://ama.com.au/node/5519>

Key findings of the BEACH reports include: In 2012-13, Australians claimed 126.8 million GP services through Medicare, at an average of about 5.6 GP visits per head of population or 6.6 visits per person who visited at least once. This equates to about 2.44 million GP-patient encounters per week. On average, GPs managed about 155 problems per 100 encounters – chronic problems accounted for 36.0 per cent of all problems managed, and an average of 55.7 chronic problems were managed per 100 encounters.

20 November 2013

John Flannery 02 6270 5477 / 0419 494 761  
Kirsty Waterford 02 6270 5464 / 0427 209 753  
Follow the AMA President & Media on Twitter:  
<http://twitter.com/amapresident> or [ama\\_media](http://twitter.com/ama_media)  
Like the AMA on Facebook:<https://www.facebook.com/AustralianMedicalAssociation>

### REDCLIFFE & DISTRICT LOCAL MEDICAL ASSOCIATION MEMBERSHIP

Attendance at the Redcliffe & District Medical Association (RDMA) Meeting is **FREE** to current RDMA members.

Doctors are welcome to join on the night and be introduced to the members. **Membership application forms are in this edition and available at the sign-in table on the night.**

Meeting dates are in the date claimers on page 4

**COST** for non-members:  
\$30 for doctor, non-member

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\$30 for doctor, non-member

### CHANGES TO CLASSIFIEDS

Classifieds remain **FREE** for current members. To place a classified please email: [RDMAnews@gmail.com](mailto:RDMAnews@gmail.com) with the details for further processing.

Classifieds will be published for a maximum of three placements.

Classifieds are not to be used as advertisements.

Members wishing to advertise are encouraged to take advantage of the Business Card or larger sized advertisement with the appropriate discount on offers.





**REDCLIFFE AND DISTRICT MEDICAL ASSOCIATION Inc.**  
**ABN 88 637 858 491**

**NOTICE TO ALL NEW AND PAST MEMBERS**

**Membership Subscription Benefits**

**Don't waste time! Join now!**



**Monthly: Newsletters, Topical Educational Meetings, 3 Course Cuisine,  
 CPD Points & Attendance Certificate Available  
 Rounded off with the End of Year Networking Meeting**

**Get your membership benefits! Socialise! Broaden your knowledge!**



Dear Doctors

The Redcliffe and District Medical Association Inc. have had another successful year of interesting and educative meetings on a wide variety of medical topics. Show your support for your Local Medical Association to continue the only local convocation for general practitioners and specialists to socialise and to discuss local and national medico-political issues.

Annual subscription is \$100.00. **Doctors-in-training and retired doctors are invited to join at no cost.** This subscription entitles you to ten (10) dinner meetings, a monthly magazine, an informal end of the year Networking Meeting to reconnect with colleagues. Suggestions on topics and/ or speakers are most welcome.

**RDMA SUBSCRIPTION FORM – INTERNET PAYMENT PREFERRED**

Treasurer Dr Peter Stephenson Email: [GJS2@Narangba-Medical.com.au](mailto:GJS2@Narangba-Medical.com.au).

ABN 88 637 858 491

1. **One Member (July to June: \$100; Oct.-June: \$75; Jan-June: \$50.00; April-June: \$25.00 )**
2. **Two Family Members (\$25 Discount each) (\$150 pro rata)** (Please supply details for both members)
3. **Doctors-in-training and retired doctors: FREE**

1. Dr. \_\_\_\_\_  
 (First Name) (Surname)

2. Dr. \_\_\_\_\_  
 (First Name) (Surname)

1. **EMAIL ADDRESS:** \_\_\_\_\_ @ \_\_\_\_\_

2. **EMAIL ADDRESS:** \_\_\_\_\_ @ \_\_\_\_\_

Practice Address: \_\_\_\_\_ Post Code: \_\_\_\_\_

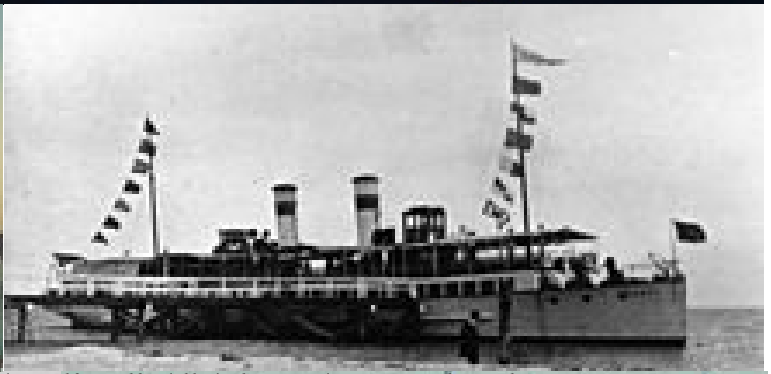
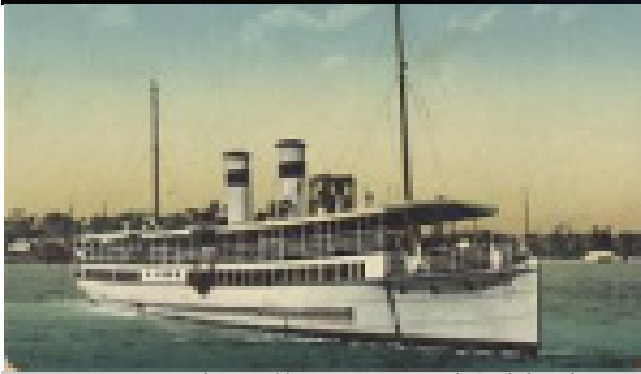
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**CBA BANK DETAILS: Redcliffe & District Local Medical Assoc Inc:BSB: 064 122 Account: 0090 2422**

**METHODS OF PAYMENT:**

1. **PREFERRED INTERNET BANKING**
2. **PAYMENT BY DEPOSIT SLIP:** Remember: INCLUDE your name i.e: Dr. F. Bloggs, RDMA A/c & date:
3. **ENCLOSED PAYMENT:** (Member Subscription Form on website, type directly into it and email)
  - i) **Complete form & return:**
    - c/-QML or Redcliffe & District Medical Assoc Inc. P O Box 223 Redcliffe 4020
  - ii) Or by email to [GJS2@Narangba-Medical.com.au](mailto:GJS2@Narangba-Medical.com.au)

# Where We Work And Live



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