



**RDMA & BLMA's Joint Newsletter**

**Newsletter  
September 2020**

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**RDMA President's Report Dr Kimberley Bondeson**

Presidents Report – September 2020  
Spring – a gorgeous time of year. In Queensland, we are particularly lucky, unlike our southern neighbours, who are in lockdown and are restricted to what they can do and where they can go.

Our borders are still closed, and this is causing all sorts of grief for the population. Covid 19 has now spread into Brisbane in the southern suburbs, and in Ipswich. It is slowly creeping up the coast. The Queensland Chief Health Officer has to have a police guard, as she has had death threats and has been trolled severely on social media.

City –center GP practices in Melbourne and Sydney have gone into "hibernation" and are relying on telehealth for their survival because of the collapse in patient numbers due to the lockdown, according to Australia Doctor News, 10/9/20. Telehealth has just been extended until the end of March, 2021. This will assist with the survival of many practices.

But have we got it right?

Locking down a community, shutting the borders? I am hearing from patients and colleagues, that they feel we should stop the lockdown, and open the borders, as the economic strife and stress on the population is far outweighing any advantage that we are seeing with the current methods attempting to control this virus.

In other words, learn to live with it.

One article I read on the internet said, which made sense, is that this virus, Covid 19, is twice as infectious as influenza, and twice as deadly ie. The death rate from Covid 19 was twice that of influenza. However, by practicing good hygiene, we have managed to decrease the influenza infection rate in Australia (and in other countries). What is crippling Australia now is the financial

and mental stress caused by these lockdowns, the closure of business's and loss of income and livelihood of the population.

How many "waves" will we go through, a 3rd wave, a 4th wave and so on before we change our approach, and by this I mean the lifting of restrictions, opening of borders, and focusing on infection control within the community.

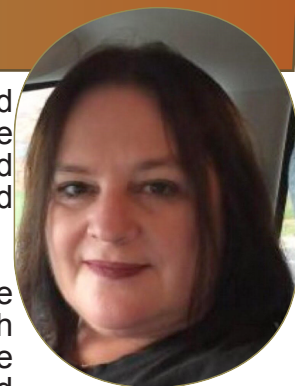
Not lockdown. Contact tracing is invaluable, and allowing GP's to be part of this is being called for by the GP's in Melbourne.

This is my own personal opinion, and I am open to hearing from our members and what they think.

On a positive note, we are going to have a Zoom meeting on the 30th September, 2020 at 7pm to have our AGM.

All members are invited to participate, and on the Agenda is this topic, "Do we need a change in our response to Covid 19".

Kimberley Bondeson



**RDMA & BLMA's Joint Newsletter**  
*Welcome from*  
**Dr Robert (Bob) Brown**  
President Brisbane Local Medical Association

**Note:** Doctors in Training  
RDMA Membership is Free  
RDMA & BLMA Meeting Dates Page 2.

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

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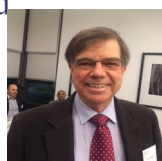
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## RDMA 2020 MEETING DATES:

For all queries contact Anna Wozniak 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	25th
Wednesday	March	25th
Tuesday	April	28th
Wednesday	May	27th
Tuesday	June	30th
Wednesday	July	29th
<b>ANNUAL GENERAL MEETING - AGM</b>		
Tuesday	August	25th
Wednesday	September	30th
Tuesday	October	27th
<b>NETWORKING MEETING</b>		
Friday	November	20th



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## BLMA 2020 MEETING DATES:

For all queries contact Graham McNally Meeting Convener: Phone: (07) 3265 3111  
Email: [gmcnally1@optusnet.com.au](mailto:gmcnally1@optusnet.com.au)

W: <https://www.brisbanelma.org/>

**CPD Points Attendance Certificate Available**

**Venue: Riverview Restaurant, Bris**  
Kingsford Smith Dr & Hunt St in Hamilton

**Time: 6.30 pm for 7.00 pm**

<b>ANNUAL GENERAL MEETING - AGM</b>		
1	February	11th
2	April	14th
3	June	9th
4	August	11th
5	October	13th
<b>NETWORKING MEETING</b>		
6	November	27th



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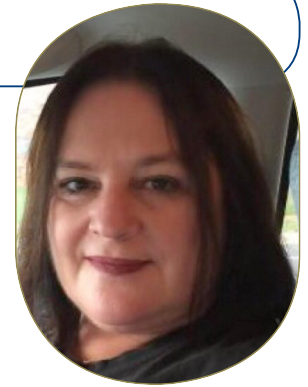
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- ▶ Payments required within 10 working days or discounts will be removed unless a payment plan is outlined at the outset.

### CLASSIFIEDS

Classifieds subject to the Editor's discretion.

- ▶ No charge to current RDMA members.
- ▶ Non-members \$55.00

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## MEMBERS UPDATE

AMAQ Branch Councillor – September 2020  
Dr Kimberley Bondeson

Congratulations to Dr Bavahuna Manoharan, our current AMAQ Vice-President, who has just stepped up to fill the gap as Executive General Manager at AMAQ whilst the recruitment process is underway for a new CEO.

Many of you may know Bav, who first came onto AMAQ Council as a Doctor-in-Training Representative.

He is working closely with Dr Chris Parry on a number of issues, one of note is advocating against Pharmacy Prescribing and Covid 19 testing with retail Pharmacies.

Who genuinely believes Covid 19 testing in retail pharmacies is a sensible idea?

Most GP and Private Specialist Practices do not even let patients with any flu like symptoms through the door. Let alone testing for Covid 19 unless they are specifically set up for it, with sufficient PPE and normally an outdoor, drive through area where patients can come and be tested.

My patients tell me that their specialist hospital consultations are where they are masked, as well as the doctor. The pharmacists themselves are against this plan, so I personally hope it is discarded as not practical or sensible.

Many of us still do not have enough PPE for our practice to be able to even offer a face mask to each patient per consultation. On a

positive note, a lot of our patients are making their own masks, and most have a mask in their bag when they come into the practice for a face to face consultation.

Another government plan, this time from the TGA, is described as follows:

“TGA wants pharmacist to prescribe cannabidiol from 2021. Patients will be able to secure low dose cannabidiol from pharmacists from next year under a TGA interim decision to down-schedule the drug.

Cannabidiol products are classed as unapproved S4 medicines and are accessible through the watchdog’s Special Access Scheme via an application by a doctor.

The TGA wants to make them S3, to “facilitate greater access” for patients. Going against the advice of its own expert advisory committee, the TGA said cannabidiol was safe at low doses “according to Australian Doctor News, 18/9/20”.

Interesting. It would appear not enough doctors are prescribing cannabidiol, so the TGA wants pharmacists to sell it direct to the public.

Will continue to watch this space.

Sincerely

Kimberley Bondeson

NEXT MEETING DATE 30TH SEPTEMBER 2020

# Monthly Meeting

Redcliffe & District Medical Association Inc.

## RDMA AGM 30 September 2020

**When** Wed 30 Sep 2020 7pm – 7:30pm (AEST)

**Where** <https://us04web.zoom.us/j/75552649558?pwd=VDI0Z0R2QkVsOEd2TXkwTW9JMDdPdZ09>

**Who** rdma-nlma@lists.internode.on.net, ximango178@gmail.com\*

**You have been invited to the following event.**

### RDMA AGM September 2020

**When** Wed Sep 30, 2020 7pm – 7:30pm Australian Eastern Standard Time - Brisbane

**Where** <https://us04web.zoom.us/j/75552649558?pwd=VDI0Z0R2QkVsOEd2TXkwTW9JMDdPdZ09> (map)

**Joining info** Join with Google Meet  
[meet.google.com/mfz-hkem-puz](https://meet.google.com/mfz-hkem-puz)

**Calendar** [rdma-nlma@lists.internode.on.net](mailto:rdma-nlma@lists.internode.on.net)

**Who**

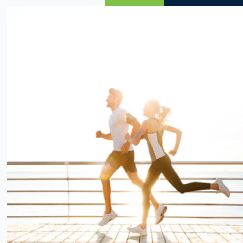
- [ximango178@gmail.com](mailto:ximango178@gmail.com) - organizer
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- Pre-operative education on precautions leads to better post-op adherence
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- Physiotherapy provides pain relief, promotes rehabilitation and the reintegration of patients into ADLs



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f: (07) 3357 0380

### Qscan North Lakes PET-CT

9 McLennan Court  
North Lakes QLD 4509

Mon - Fri: 7:30am - 4:30pm

p: (07) 3448 8840  
f: (07) 3880 6118

For enquiries or bookings call 1300 177 226 or email [petbrisbane@qscan.com.au](mailto:petbrisbane@qscan.com.au)

[qscan.com.au](http://qscan.com.au)

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Website : <http://www.ama.com.au/>



## **SOBERING ECONOMIC FIGURES SHOW NEED TO CONTINUE COVID-19 CONTROL MEASURES - AMA**

Today's national accounts figures highlight the critical role that public health measures have played in protecting Australians from the worst impacts of COVID-19 – from both a health and economic perspective, AMA President, Dr Omar Khorshid, said.

“The figures paint a sobering picture of the impact of the COVID-19 pandemic on our economy, with a 7 per cent fall in gross domestic product (GDP),” Dr Khorshid said.

“But they also show that Australia has fared much better than other nations, who were slower to act to contain the virus. The United Kingdom economy has fallen by 20.4 per cent. France, Italy, Canada, Germany and the United States have all seen falls of 9.5 per cent or more.

“The clear message from these numbers is that our economy depends on controlling COVID-19. Australia acted early and decisively to tackle COVID-19, and this strategy is working.

“If we are to avoid the terrible economic impacts seen in other countries, there can be no let-up in efforts to contain the virus.

“While we know some parts of the business sector have been hit hard by restrictions, we cannot assume that the lifting of restrictions will restore our economy.

“To restore economic activity, governments must build community confidence that COVID-19 is under control.

“The National Cabinet's stated goal of zero community transmission must be actively pursued, with restrictions and other public health measures working together to achieve this.

“In those States and Territories where zero community transmission has been achieved, settings need to ensure that outbreaks can be quickly contained. Governments must not become complacent or give up on those goals, which Australia had largely achieved earlier this year.

“Keeping community transmission low is also critical to protecting our most vulnerable. We are seeing significant deaths among residents in aged care facilities. While governments and facilities can implement more measures to protect these residents, the best way to keep COVID-19 out of these settings is by keeping it out of the community.

“Far too many healthcare workers have contracted COVID-19. We must continue to protect our health system, and commit to zero healthcare workers death from this virus.

“It is critical that Government maintains support through programs such as JobKeeper, as well as the JobSeeker coronavirus supplement.”

---

2 September 2020

CONTACT: Maria Hawthorne 02 6270 5478 / 0427 209 753



**Dr Chris Perry**  
**President AMA Queensland**  
**and**  
**Jane Schmitt,**  
**CEO AMA Queensland**



## **Role substitution doctors' number one concern**

AMA Queensland recently conducted a survey of more than 700 doctors to gauge the views of Queensland doctors about the current management and future direction of patient care in the public health system.

In the lead up to the state election next month, AMA Queensland will present your views on the health system to the State Government, and call for improved collaboration with doctors to ensure Queenslanders receive the best care possible.

The survey revealed that, regardless of where doctors practice in Queensland, role substitution is the number one concern. The survey findings can be found at [amaq.com.au](http://amaq.com.au).

The State Government's recent push to trial COVID testing in retail pharmacies - despite repeated opposition from doctors and pharmacists – is a prime example of this trend.

AMA Queensland advised the Government of the risks of testing people for COVID in retail outlets, and the working pharmacists themselves are overwhelmingly opposed to the trial on safety grounds and yet it is going ahead.

The trial is backed by the Pharmacy Guild of Australia but it has been vehemently opposed by working pharmacists and the Pharmaceutical Society of Australia which has called for an immediate stop to the trial.

AMA Queensland called on the State Government to invest more in existing COVID testing centres, rather than contracting out the important health measure to commercial enterprise.

Fully equipped testing locations already exist with trained staff. We need to boost the number of these services and ensure there's adequate supply of PPE such as head coverings, face shields, masks and gowns rather than encourage sick people to wander through shopping centres and retail outlets."

We have urged the Government to immediately stop the COVID testing and UTI pharmacy trials, and to reassess the its role substitution policy as it impacts patients care across the broader health system.

AMA Federal President Dr Omar Khorshid supported our concerns, writing to Queensland Health Minister Steven Miles to warn him that COVID testing in pharmacies "is dangerous and poses unacceptable risks" to staff, customers and the wider community.

## **AMA Queensland CEO**

After more than a decade of dedicated service to AMA Queensland, Chief Executive Officer Jane Schmitt was recently farewelled and we wish her great success in the next chapter of her career. Jane has boundless energy and passion for her work and we

***Continued Page 9***



hope to find ways to collaborate with her in the future to further enhance health care for Queenslanders.

The recruitment process for a new CEO is well underway, however given the unprecedented times we live in, the AMA Queensland Board has appointed Vice President, Dr Bav Manoharan, as the Executive General Manager and Company Secretary to maintaining stability during this transition period and continue to support staff and members.

We will work with Bav to advance a number of strategic advocacy campaigns in the lead up to the state election in October.

### **2020 Women in Medicine Breakfast**

We are looking forward to our first in-person event for 2020!

This pandemic has caused heightened stress, anxiety and mental health issues across Australia and the world – especially for health workers.

Registration is now open for AMA Queensland's 2020 Women in Medicine Breakfast on Thursday 15 October at Victoria Park, focusing on Mental Health.

Take the time to join us for a motivating and uplifting morning of support, networking and advice on nurturing your own mental health in these unpredictable times.

We look forward to seeing you there! Register at [amaq.com.au](http://amaq.com.au)

### **Resident Hospital Health Check survey**

The 2020 Resident Hospital Health Check survey is now open to junior doctors in Queensland, both member and non-members.

All responses are anonymous. The survey closes on 30 September and we will take your collated responses to Queensland Health to inform real change and action regarding your conditions at work.

Take the survey at [amaq.com.au](http://amaq.com.au)

Please encourage get every junior doctor you know to fill out the survey - the more responses we get, the more influence the survey will hold.

**Dr Chris Perry, President AMA Queensland**

# Newly Established AMA Qld Senior Doctor Craft Group

By Associate Professor Geoffrey Hawson,

AMA Qld Senior Doctor Craft Group Representative, President, Australian Senior Active Doctors Association

As many members may know, AMA Qld has been the only state AMA to support senior doctors through representation on their state Council via the Retired Doctors Craft Group. At the most recent AMA Qld Council Meeting (20th August), my motion to expand this craft group to include all senior doctors was passed. Senior doctors whether retired or in part-time or full-time practice can now join the Senior Doctors Craft Group so that their views are better represented on Council.

In the US, all members of the American Medical Association receive automatic membership of the Senior Physicians Section at age 65 regardless of whether active or retired. A separate meeting geared towards issues relevant to senior doctors is held concurrently with their annual meetings. AMA Qld through the Senior Doctors Craft Group is considering similar opportunities and events for members.

Currently there are 150 retired doctor members of AMA Qld who were previous members of the Retired Doctors Craft Group. There are 185 doctors aged over 70 years who are still practicing and for whom there has been no craft group representation. There are also doctors of varying ages considering their transition to retirement. Expansion of the Retired Doctors Craft Group to the Senior Doctors Craft Group enables better representation of the issues and concerns of a broader range of senior doctors. Engaging with doctors at these stages of their careers may assist doctors with a smoother transition to retirement and help alleviate mental health issues that can be associated with sudden cessation of practice and loss of identity as a medical practitioner.

Along with better representation, the strategy to broaden membership of the craft group provides increased alignment with AMA Qld's Health Vision planning for Senior Doctors which includes a focus on better utilizing their immense skills and experience and identifying more effective ways to channel their knowledge and expertise.

ASADA has campaigned for a step-down registration category (Limited Registration Public Interest – Senior Active Doctor) to stem the loss of over 35,000 years of medical experience from Qld's health system every triennium as over 850 doctors retire. Most doctors give up their registration because they are unable to meet AHPRA's full registration requirements. Many retired and senior doctors want to continue contributing their expertise after the pandemic and for other areas of community need. Stability in the form of a continuing registration category would enable them to most effectively use their skills and to be available for ongoing roles as community need is identified. To this end, AMA Qld and ASADA have been active in alerting the Queensland Government to the community health benefits of retaining senior doctors under Senior Active Doctor registration through:

- ASADA presentations to Deputy Director Generals of Q Health.
- AMA Qld and ASADA submissions to the Reform Planning Committee of Q Health supporting the Senior Active Doctor registration category.
- The establishment of an AMA Qld Senior Doctor Working Party to develop a model of registration and letter to be sent to the Health Minister.

As a consequence, a letter outlining the model and seeking a meeting with the Deputy Premier and Minister for Health and Ambulance Services, Dr Steven Miles, was sent late August, cosigned by AMA Qld (Dr Chris Perry as President) and ASADA (Dr Geoff Hawson as President).

At some point, all doctors become senior doctors and I encourage all doctors to join the AMA Qld Senior Doctor Craft Group, along with ASADA, so that our voices are heard. I welcome suggestions and ideas from members.

Associate Professor Geoffrey Hawson  
AMA Qld Senior Doctor Craft Group  
Representative  
President, Australian Senior Active Doctors  
Association

**Australian Medical Association Limited**

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**NEWMARCH HOUSE REPORT VINDICATES AMA CALLS FOR URGENT ASSESSMENTS OF ALL AGED CARE HOMES**

The report on the Newmarch House COVID-19 outbreak vindicates the AMA’s calls for urgent assessments of all aged care homes to manage the pandemic, AMA President, Dr Omar Khorshid, said today.

The AMA has called for every residential aged care home in Australia to be urgently and comprehensively assessed for its ability to safely care for residents during the COVID-19 pandemic.

“In April, following reports from our members, we called for improved cohorting guidance in aged care homes. We argued that isolating infected residents in their rooms would not work, given the high virulence of COVID-19. The AMA also called for better engagement and coordination with GPs during outbreaks,” Dr Khorshid said.

The Newmarch report found that: *“Until COVID-19 positive residents were cohorted in one section in the home, with dedicated staff, they were a continued source of infection.”*

It also found that: *“Local general practitioners had an important but probably under-utilised role in the early weeks of the outbreak. Those who regularly cared for residents at Newmarch House were not immediately informed of the outbreak even when their patients were infected.”* This is unacceptable.

“We must learn the lessons from Newmarch and the outbreaks in aged care homes in Victoria. These lessons must be applied in the plan that the Government announced last Friday,” Dr Khorshid said.

“Sending healthy older people to hospital for isolation is not the solution. Triggers for transfers will have to be set, along with transfer destinations for each individual aged care home.

“To prevent these situations from happening elsewhere, there should be a single contact point for any aged care home that requires additional workforce clearly designated for each State and Territory. This information should be communicated to all providers.”

The role of GPs needs to be recognised as crucial in all aspects of care for nursing home residents. They must be involved.

25 August 2020

CONTACT: Maria Hawthorne 02 6270 5478 / 0427 209 753

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Follow the AMA President on Twitter: <http://twitter.com/amapresident>

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# (Internet) Questions in Quora

## Answer By Dr Mal Mohanlal

Is it possible to heal mental illness spiritually?

Mental illness, as I see it is a disorder of perception.

It is the degree that determines the level at which it becomes a clinical disorder of behaviour and action.

Most of us, as we grow up, are conditioned to think in a particular way. So if you are brought up as a Hindu, you think like a Hindu.

If you are a brought up as a Christian, you think like a Christian.

If you are a Muslim, you think like a Muslim, etc.

As one can see that the environment in which we grow up already distorts our perceptions of reality.

Hence if anyone thinks their thinking is normal and consider themselves as normal, please think again.

To understand your mind and heal mentally, therefore, you need to use your powers of perception, insight and awareness.

The words you use in your mind can distort your perceptions. If you want to be cured, all you have to do is clear up your perceptions. Acquire some self-knowledge.

Please read my articles on perceptions and mental illness. That word 'spiritually' adds another dimension to an already distorted picture.

How do you heal/deal with your pain and your past thoughts?

Every one of us is born with the healing power within us. Healing always takes place inside us, not outside us.

It is our immune system that helps us heal us. Doctors do not cure you. We help your immune system to cure yourself. This immune system is under subconscious control, just like the other vital functioning systems (Cardiovascular, Respiratory etc.)

If your immune system packs up, no doctor in the world can save you.

Hence anyone suffering from any physical or mental illness must take an interest in acquiring self-knowledge because it will help the person to understand how the subconscious mind works.

By positively manipulating the subconscious mind, one can boost their immune system to promote healing. I have also written how to deal with the past, present and the future. You have to learn what perceptions mean, how perceptions influence your thinking and thus your subconscious mind.

Without acquiring self-knowledge, one is like a ship without a sail on the ocean of life. With the passage of time one is pounded to dust. With self-knowledge, one becomes water that can seep through rocks, become a stream, then a river which eventually joins the ocean of life.

Please read my articles on the subconscious mind and healing on the Internet and start discovering the healing power within you.

Visit the website: <http://theenchanted-timetraveller.com.au>

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**EXTENDED VICTORIAN LOCKDOWN WILL HELP AVOID THIRD WAVE**

AMA President Dr Omar Khorshid said extending COVID-19 restrictions across Victoria will help that State and the nation ultimately recover from the pandemic sooner.

In response to Premier Daniel Andrew’s extension today of Victoria’s physical isolation measures, Dr Khorshid said the extended restrictions will also help quicken the path to economic recovery.

“The Victorian Government has made necessary decisions based on sound medical advice, in the best interests of the nation’s health and the nation’s economy,” Dr Khorshid said.

“The Victorian Government modelling shows what doctors already knew. If restrictions were lifted this week, the State would see infections rise again.

“Some business leaders campaigning against isolation measures are ignoring medical evidence that easing restrictions too soon risks a third wave surge in further infections.

“The fall in daily infections in Victoria proves current restrictions are working. Extending these restrictions best positions the economy for a sustainable long-term recovery.

“Every Australian wants to see Victoria succeed in halting COVID-19, both for the health of us all and the long-term recovery of our economy.

“The Premier has also flagged some changes to the curfew and extending the ability for outdoor exercise. These modest changes are sensible, but recognise the needs of social interaction for people living alone.”

Dr Khorshid welcomed the further decline in infection of Victorian health care workers, and the benefit the extended restrictions will have in preventing health care worker infections.

“Front line doctors, nurses, and aged carers have been working to keep Victorians alive as the pandemic has reached across the State,” Dr Khorshid said.

“The extended restrictions will both help prevent further illness, and also take pressure off the strained Victorian hospital and aged care system,” Dr Khorshid concluded.

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6 September 2020

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# Italy – Lake Garda

## by Cheryl Ryan



Lake Garda, the largest of the Italian lakes, spans the regions of Lombardy on its western shores, Veneto to the east and Trentino at the top of the lake.

Although carved out of the limestone rock by glacial action, the lake lies only 65 metres above sea level and is like a fragment of the Mediterranean transferred to the shadow of the Dolomites. The northern end of the lake has a dramatic, almost fjord-like appearance on the western shoreline, while to the east the mass of Monte Baldo (known as The Garden of Europe) runs down alongside the lake. The southern end of Lake Garda has a flatter, gentler landscape. Nearby is the beautiful city of Verona, made famous as the setting for “Romeo & Juliet”. Verona is second only to Rome for the number of historical monuments found within the city. One of these, L’Arena, built in AD30, is the largest open-air lyrical theatre in the world and famous for its summer opera season.

### Climate

It has a mild sunny climate with average temperatures of mid to high twenties from May to September with daily sunshine of 11-12 hours per day.

### History

Over the centuries, this region has been under the influence or direct rule of many foreign powers, from Germanic tribes to Napoleon, Italian feudal lords to Spanish kings, and it wasn’t until the end of WW1 and the departure of the Austrians that the region finally came under the control of a unified Italy. Even today the local dialect spoken here has noticeable Spanish and French influence. The lakeside town of Salo’ was set up in 1943 as a Nazi “puppet republic”, where the disgraced Mussolini made his last stand, after fleeing Rome as his fascist state began to collapse. Five hundred years earlier Gasparo Bertolotti was born here. Famous as a maker of stringed instruments, he is regarded as the inventor of the violin.

### Local Produce

The eastern shore of Lake Garda has long

been known as “the Riviera of Olives” with wide scale commercial olive cultivation. It is the northern most area in Europe for this and the olive oil from here is known for its light, fruity and non-acidic flavour.

The southern end of the lake is home to the wine making areas of Bardolino and Valpolicella, best known for their reds; the light Chiaretto, the rich Amarone, and the sweet Recioto. The northern Trentino area is well known for its distinctive dry whites.

### Did you know?

The dramatic opening car chase sequence in the James Bond movie “Quantum of Solace” was filmed through the gallerias and twisting curves of the cliffside road on the northern shores of Lake Garda.

Cassone is the location of the river Aril, officially the “world’s shortest river”, with a length of only 175m.

Punto Veleno - one of the world’s steepest bike races is held in September every year from Castello to Prada. Rises 1080m over a 8km distance. This famous race is open to both MTB and road racing cycles.

Red Bull world cliff diving world championships take place from the Castle walls of Malcesine 27m down into the lake.

[www.123Travelconferences.com.au](http://www.123Travelconferences.com.au)

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A banner for 123 TRAVEL CONFERENCE. It features a dark background with white and teal text. At the top, it lists services: FLIGHTS • ACCOMMODATION • HOTELS • TOURS • TRAVEL INSURANCE • CRUISES. Below this, there are three main sections: 1. A logo for 123 TRAVEL featuring a silhouette of a city skyline. 2. A section with the text "WE'RE PROUD TO BE ATAS" and "travel accredited" below it. 3. A teal box with the text "PROFESSIONAL CREDIBLE &amp; RELIABLE".

## **Two things are certain in life - death & taxes! Part 1 of 3 - Estate Planning**

Over the next few weeks we will be presenting a 3 part series - the importance of estate planning, the roles of the executor and items the beneficiary must consider if they are to receive an entitlement from an estate.

What is Estate Planning? Long story short, Estate Planning is the preparation of tasks that serve to manage an individual's wealth and asset base in the event of their death. Life insurance, real estate, personal belongings, shares, superannuation all form part of ones estate.

So how does one begin their estate planning? There are a few things you need to consider:

1. Have you got a valid Will? A Will (also called a last Will and Testament) is a legal document that sets out what you would like to happen to your assets in the event of your death. Making a legally binding Will is the only way to ensure your estate will be dealt with according to your wishes. Your Will should be clear and concise; remember you are not around to clarify any questions the executor and/or beneficiary may have!

A Will allows you to provide for you loved ones long after your death. We work our entire lives to accumulate wealth so make sure your legacy passes to the next generation how you want it to.

Find yourself a great solicitor to advise you on your Will.

2. Binding death benefit nomination - This may come as a surprise to some but your superannuation does not form part of your Will, regardless if you mention your super in your Will or not. For a specified individual to receive your super you need to have a Binding Death Benefit Nomination in place. A binding death benefit nomination is a legally binding nomination that allows you to advise the trustee of your superannuation fund who is to receive your superannuation benefit in the event of your death. If you have no such nomination then the surviving trustees simply have full-discretion to distribute the funds to your estate or any dependent they choose. If you want your super to go someone specifically it is crucial that you have a current binding death benefit nomination in place! Nominations can lapse after a certain period of time so it is crucial that you check yours is current!

3. Talk to your accountant! Let's face it everyone wants to pay less tax! To maximize your estate pool and to save tax it is worthwhile to sit down with your accountant and talk through the following items:

- The assets you hold and where you would like them to go;
- Potential tax consequence for the estate & or beneficiary;
- Have you got all historical records ready and available?
- Are your personal taxes all up to date and current? Have you got any outstanding ATO debts?
- Asset protection and/or structuring post death;

4. The final step of a good estate plan is to talk to your executor and family about your estate plan. It is extremely important that the executor is aware that you have appointed them as the executor and that you're both on the same page. It is also important that the executor knows where to locate a copy of your Will and personal/historical records. In most cases your solicitor will hold these details and will contact the executor in the event of your death.

Completing the steps detailed above will ensure your estate administration process proceeds smoothly.

Part 2 of this series will discuss the executors' duties upon death and how the above items discussed are dealt with. If you have any questions or want to make a start on your estate plan today please do not hesitate to get in touch with either Kerri Welsh or Adam Niemiec from Poole Group Accountants on 07 5437 9900.

*(Article written by Adam Niemiec)*

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## **TELEHEALTH, E-PRESCRIBING ARRANGEMENTS MUST BE EXTENDED**

An interim Parliamentary Committee report has backed the AMA’s calls to make telehealth a permanent component of the Australian health system, and for e-prescribing to be implemented as quickly as possible.

The Select Committee on Financial Technology and Regulatory Technology has made the recommendations in its interim report.

“The AMA has long advocated for Medicare-subsidised telehealth consultations, and temporary Medicare COVID-19 arrangements have shown the value of telehealth,” AMA President, Dr Omar Khorshid, said today.

“The telehealth items have supported the provision of care during these very difficult times, and have been embraced by patients and doctors.

“The AMA is in discussions with the Commonwealth Government about the long-term future of Medicare-funded telehealth for patients who need to see their GP or non-GP specialist.

“This is an ongoing piece of work. In the meantime, the AMA has called for the extension until March next year of the temporary telehealth items, which are due to expire at the end of this month.

“While work on e-prescribing is progressing very quickly, it is still in a limited testing phase. We welcome the Government’s commitment to its roll-out and want to see the extension of temporary COVID-19 arrangements that have allowed pharmacists to dispense medication using a digital image of a prescription.

“With Australia still in the midst of a global pandemic, these temporary arrangements must continue. They are essential to efforts to contain the spread of the virus.

“The AMA is keen to see the Government make a decision on the extension of these temporary arrangements as soon as possible. Practices are already taking appointments for October and beyond.

“Practices and patients alike need certainty about the availability of telehealth, particularly for vulnerable patients.”

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3 September 2020

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**TEMPORARY TELEHEALTH EXTENSION WILL HELP PATIENTS**

Today’s announcement that the temporary Medicare rebates for COVID-19 telehealth consultations will be extended for a further six months will help patients and medical practices during the global health pandemic, the AMA said today.

The AMA proposed the introduction of telehealth items earlier this year as part of a comprehensive strategy to tackle COVID-19, and has worked behind the scenes for them to be extended beyond their original 30 September expiry date.

“With Australia still in the midst of a global pandemic, it is essential for telehealth to be continued as part of efforts to contain the spread of the virus,” AMA President, Dr Omar Khorshid, said today.

“These telehealth items have supported the provision of care during these very difficult times, and have been embraced by patients and doctors alike.

“The AMA wants to see telehealth become a permanent part of the health system, and this has been backed by the Select Committee on Financial Technology and Regulatory Technology.

“Today’s announcement means that medical practices can now start planning appointments beyond the end of this month, knowing that these items remain in place.

“The decision to allow GPs to apply their usual fee schedule to telehealth services from 1 October is also welcome. GPs have a long history of looking after patients in difficult financial circumstances and this decision will not change that approach.

“The AMA remains concerned about the viability of practices in lockdown situations and has urged the Government to step in with more support if needed to help them maintain services to patients.

“During the pandemic, we are also seeing patients ignore their own health needs. While COVID-19 is a serious illness, failing to see a doctor or have tests done may have far worse health ramifications.

“Medical practices have implemented strict procedures to minimise risks of COVID-19 and patients can be confident that a visit to see their doctor is very safe. For those conditions that don’t require a face to face visit, telehealth is a quality alternative.

“The AMA remains in discussions with the Federal Government about the long-term future of Medicare-funded telehealth. Telehealth is working very well and, now that we have this extension in place, we have time to finalise the future of telehealth in Australia.”

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18 September 2020

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## NEW AGED CARE FUNDING A START TO HELPING OUR MOST VULNERABLE

New Federal Government funding announced today will help the chronically-underfunded aged care sector to tackle the COVID-19 pandemic, but much more will need to be done to address the long-term issues, AMA President, Dr Omar Khorshid, said today.

Almost 70 per cent of all COVID-19 deaths in Australia relate to people in residential aged care, one of the highest rates in the world.

“The AMA welcomes the additional \$563.3 million to extend support for the aged care sector’s response to COVID-19,” Dr Khorshid said.

“The decades-old issues in aged care have only been amplified by the pandemic, and have resulted in unnecessary deaths of our oldest and most vulnerable Australians.

“The announcement of a national plan to tackle COVID-19 in aged care was welcome.

However, plans mean nothing without adequate resources to carry them out.

“The aged care and health systems must be provided with additional supports and funding to get through the pandemic.

“The aged care sector has been chronically underfunded for years, with aged care workforce underpaid and under-appreciated for the great work they do in caring for our elderly.

“Any funding that goes toward supporting, retaining and upskilling the workforce is welcome.

MEDIA RELEASE MEDIA RELEASE MEDIA RELEASE

“We also welcome the requirements tied to today’s funding for providers to report on how these funds have been used.

“Funding intended for employing clinical care leads in aged care homes must be spent for that purpose only, with accountability mechanisms in place to ensure it is.

“Clinical care was the most frequently unmet Quality Standard in aged care in the first quarter of 2020.

“Anyone leaving nursing homes due to COVID-19 concerns should have the option of accessing other forms of aged care supports, so the additional \$71.4 million announced by the Government for the Community Home Support Program is welcomed by the AMA.”

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# Where We Work and Live

## “Value Our Veterans”

<http://anzacportal.dva.gov.au/stories-service/australians-war-stories/ne-thing-more-goodbye>

### “One thing more—Goodbye”

**Name:** Athol Snook

**Date:** 1942

**Unit:** 100 Squadron RAAF

**Location:** New Guinea

Flying Officer Athol Snook was a survivor. In 1942, he spent 47 days at sea in a lifeboat sailing from Java to Australia with 11 comrades to escape from the Japanese.

Then, on a fateful night in New Guinea later that year, his plane was grounded while the rest of the squadron went to attack Japanese shipping.

Some years later, Athol Snook wrote an article in remembrance of his mates in New Guinea. His memory was triggered by a chance conversation about a radio program that was popular during the war.

Like many programs of their day, there were a number of catch phrases which always brought roars of laughter from the audience. Athol Snook takes up the story.

“Funny thing how memory works. A scent, an old tune or sometimes a taste can start your mind throwing up pictures that you thought you’d forgotten forever,” he wrote.

“I don’t suppose there are many people today who remember Harry Tate and his wonderful radio sketch ‘Running an Office’ all about Tootles the office boy, the mad inventor and the mousetrap.

“Well, the other night I heard Harry Tate’s name mentioned at a party. We were all very much of an age, somewhere in our 50s - what might be called ‘older boys and girls’. That’s if one were being kind that is.

Standing there in a mild alcoholic haze, well fed and at peace with the world, I was suddenly whisked out of that lounge, plucked from my friends and transported over the Indian Ocean, across the shallow Timor Sea, through the Torres Straits and straight into Milne Bay at the most eastern tip of New Guinea.

Not only was this instantaneous, or nearly so, but there was a neat little bit of time wangling as well. Without any fuss or nonsense the clock

was turned back and suddenly it was 1942.

“If you look at a map of New Guinea you’ll notice that there’s something about its shape that reminds you of some crouching primitive animal.

What used to be called Dutch New Guinea is the head with gaping mouth; at the other end, with forked tail, is where we were. Between these two points is the almost virgin world of this huge island. Dramatic, mountainous, jungle covered. Dangerous. Peopled by ochre-painted, sometimes warlike natives.

A land where salt is a form of currency and where the plumes of the Bird of Paradise crown heads with exotic beauty.

“This was the last link in the chain of island conquests which the Japanese had to secure before they turned south for the greatest prize of all - Australia.

“That they never achieved their goal can only be called a miracle. They were beaten in the Battle of the Coral Sea and on land were stopped when only a handful of miles from Moresby.

The battles along the Kokoda Trail were bitter, bloody and heroic.

“Milne Bay was the end of the line for the Japs; they were beaten there too and withdrew and that’s how our squadron came to be stationed there.

We flew Beaufort torpedo bombers, operated from a strip cut out of a coconut plantation and lived in a village of brown-coloured tents.

Mud, sweat, mildew, rain and the thud of failing coconuts were the elements of our domestic life.

Mosquitoes enlivened the nights with their whining flight and now and again the Japs brightened things up with their unwelcome and noisy visits. I

t is against this backdrop that the scene is played.

**To Be Continued**