

# MJA Careers



## Full and joyous life

**Dr Michael Crampton, GP of the Year, has taken an active role in clinical computerisation, integrated care, vaccination safety and medical education, as well as continuing to care for families he's known for 30 years**

**D**r Michael Crampton, the Royal Australian College of General Practitioners' GP of the Year, says he is "blessed" to still be treating a family who walked through the doors of his first practice 30 years ago.

"I'm still treating all three generations today", he tells the MJA.

That connectivity doesn't apply only to his patients. As a medical educator, Dr Crampton has been supervising registrars for 15 years.

"I'm old enough and grey enough now to have seen a full cycle of that as well", he says.

"[Medical education] is an incredibly important part of my career and I think of most GPs' [careers], because we need to pass on to the next generation important aspects of our craft of general practice.

"It's more than knowledge, it's a whole series of skills which really need to be applied with practice over time.

"My greatest joy as far as medical education is concerned is watching the younger doctors that we have trained over time become the senior

and experienced doctors and start setting up their own practices and start training their own registrars, becoming the medical educators of the future.

"It's an incredibly joyous experience to see that", he says.

Dr Crampton finished his MB BS at the University of New South Wales in February of 1981 — "I know that only too well as my daughter was born on the same day" — did his hospital training at St Vincent's Hospital in Sydney and spent 4 years at Westmead Hospital before settling into general practice in Sydney's west, where he has been ever since.

The exception was a 3-year stint at Monash University in Melbourne from 1987 after being invited to become the inaugural RACGP Computer Fellow.

"During my university time in the late 70s it started to become apparent to myself and many, many others that there was a role for computers in our knowledge management and management of patient records, over time", Dr Crampton says.

While working at Westmead Hospital, he became involved with people working with the RACGP in the area of health records and took part in discussions about standards for computerised health records.

"That led me into work with the RACGP's computer conferences, which it started in the early 1980s and ran about every 2 years, showing GPs what could be done with computers."

Later, as the RACGP's Computer Fellow, Dr Crampton had a two-pronged role — educational, through the conferences, and a development role.

"We looked at various issues that might be slowing down the uptake of clinical computerisation and the first issue that we came across was a simple legislative restriction", he says.

In the 1980s a prescription had to be handwritten to be considered legal.

"Clearly that was at odds with trying to run them through a computer system, so on behalf of the RACGP a number of us had individual negotiations with each of the state health departments to get legislation changed to allow for printed prescriptions to be legal prescriptions.

"That's an example of the kinds of things the College was able to be engaged with during the late 80s and early 90s."

Dr Crampton is optimistic about the ongoing rollout of the Personally

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*"One of the messages to pass on to registrars is that as time passes you move from being a doctor who patients come to see, to being THE doctor that they come to see"*



Controlled Electronic Health Record System and other clinical computerisation measures.

"I'm now convinced that major changes like that are generational rather than something that is going to happen over a short period of time, because there are so many drivers and reasons why people do and don't make changes to how they operate their practices", he says.

"We've got fantastic capacity now with our computerised systems. Some doctors unfortunately are still using their computer systems as a very simplistic typewriter whereas other doctors are using their databases incredibly intelligently and using them to review what's happening within their individual patients and also what's happening across the practice.

"All those capacities are not as widespread yet as you'd like it to be, but the system continues to change."

Another passion for Dr Crampton has been the safety and effectiveness of vaccines. He is on the Therapeutic Goods Administration's (TGA) newly formed Advisory Committee on the Safety of Vaccines (ACSOV) which emerged from the 2011 review of the management of adverse events associated with influenza vaccines administered to children under 5 years of age, undertaken by Professor John Horvath.

"I was invited to participate in the implementation committee following the Horvath review. One of the recommendations was the formation of ACSOV and I've managed to find myself on the committee", Dr Crampton says.

"It's an interesting place to be. ACSOV is meant to give expert advice and, believe me, there are some amazing experts sitting around the table who I get to listen to and join in with."

The ability of antivaccination and anti-immunisation lobby groups to gain traction in the media and social media realms remains

a frustration but Dr Crampton remains optimistic and proactive.

"I'm not surprised the less well informed comment can get a guernsey fairly similar to very well informed comment and that can run around the system", he says.

"Am I disappointed? Yes a little bit, but the only way we can manage those is to make sure we are promoting excellent advice.

"One of our strategies has been to make that advice into bite-sized chunks so that GPs can make use of that information in conversations with their patients."

Despite all the challenges confronting general practice — dilution of skills, reduction in areas of work, funding issues — Dr Crampton remains optimistic about the future of general practice in Australia.

"There are always challenges, but I'm still of the opinion that most people, particularly as they get older, want to have a close relationship with an individual GP who is their health adviser", he says.

"It's because many people want that kind of health advisory relationship that they can get from a person rather than a computer or a book that I'm still positive for the future of general practice."

Despite his busy schedule as clinical director of WentWest, a company working to provide integrated primary care to patients in the Western Sydney Local Health District, Dr Crampton still manages to practise for 2 "very full" days a week.

"One of the messages to pass on to registrars is that as time passes you move from being a doctor who patients come to see, to being *the* doctor that they come to see", he says.

"They form that trusting relationship with you and they come to seek your advice about what to do about their health care.

"It absolutely gives me a lot of joy."

As for being named the RACGP's GP of the Year, Dr Crampton remains amazed and humbled by it.

"I think there are many people who are eligible candidates for receiving this award because I know many of my colleagues and I'm sure there are many others I don't know who work across all of these kinds of areas in general practice", he says.

"I encourage every GP to consider what they can contribute because they have things to contribute, I know that for a fact.

"And I certainly encourage GPs to consider participating in ongoing training for the future generation."

The full interview with Dr Crampton is available as a podcast at [www.mja.com.au/multimedia/podcasts](http://www.mja.com.au/multimedia/podcasts), and as a video at [www.mja.com.au/multimedia](http://www.mja.com.au/multimedia)

**Cate Swannell**

## RACGP honours the best and brightest

Dr Michael Crampton (page C7) wasn't the only general practitioner from Sydney's west honoured at the recent Royal Australian College of General Practitioners' annual conference in Adelaide.

General Practice of the Year was awarded to the Riverstone Family Medical Practice in the north-west of the city.

The award recognised the contribution of the practice and its staff, led by practice principal Dr Michelle Crockett, to improving patient care, and their participation in programs such as eHealth and Health Pathways that improve the quality and accessibility of services.

Dr Crockett also works as a clinical head for Western Sydney Health Pathways, a joint project between WentWest and the Western Sydney Local Health District to improve patient care and management across the region.

"This is a wonderful recognition of the hard work and dedication of the team at Riverstone Family Medical Practice", Dr Crockett says.

Also honoured was Aboriginal Medical Services Western Sydney, which won the Aboriginal and Torres Strait Islander Team award for their innovative program for managing chronic disease.

GP Supervisor of the Year was awarded to Dr Linda Mann (profiled in *MJA Careers* 2014; 200: C4; <https://www.mja.com.au/careers/200/10/champion-general-practice>), from Sydney's inner west.

Dr Sarah Beck was named the GP Registrar of the Year, Dr Sam Gubiac was awarded the Rural Registrar of the Year, and Michelle Seckingham was given the Student Bursary award.

Four academic awards were also given at the conference.

The most prestigious, the Rose-Hunt Award, is given to a College Fellow or Member who "has rendered outstanding service in the promotion of the objects of the College, either by individual patient care, organisation, education, research or any other means".

This year it was awarded to Professor Michael Kidd, executive dean of the Faculty of Medicine, Nursing and Health Sciences at Flinders University in Adelaide. Professor Kidd is a GP and President of the World Organization of Family Doctors (WONCA).

The Brian Williams Award, given to "medical practitioners whose guidance and support enables rural GPs to safely dedicate themselves to their patients, their families and their communities", went to Dr Barbara Jones, a GP in Townsville, Queensland.

The Alan Chancellor Award, presented each year to "the GP or GP registrar considered to be the best first time presenter of a research paper at the RACGP annual conference", was given to Dr Pam Douglas, who focuses on babies in their first year and their mothers.

The Peter Mudge Medal, awarded to a presenter at the conference who has "advanced the discipline of general practice and the goals of the College and whose original research has the most potential to significantly influence daily general practice", was given to Dr Alan Leeb from the Illawarra Medical Centre in New South Wales.

# What's your next career move?

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# Calendar of events

This calendar will be updated each month. If you have an event you would like to add, please include relevant details in an email to [cswannell@mja.com.au](mailto:cswannell@mja.com.au)

NOVEMBER						
Mo	Tu	We	Th	Fr	Sa	Su
27	28	29	30	1	2	3
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

DECEMBER						
Mo	Tu	We	Th	Fr	Sa	Su
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	1	2	3	4

**ALM** = active learning module  
**ASM** = annual scientific meeting  
**CPD** = continuing professional development  
**CT** = computerised tomography  
**ECHO/echo** = echocardiography  
**EMAC** = effective management of anaesthetic crises  
**MRI** = magnetic resonance imaging  
**OSCE** = objective structured clinical examination  
**SAT SET** = supervisors and trainers for surgical education and training

## NOVEMBER

- 1-30** November
- 3-6** ANZCA Getting started in echocardiography workshop, Brisbane, QLD
- 5** RACGP Practice innovation meeting, Perth, WA
- 5-6** ANZCA Basic assessment and support in intensive care, Melbourne, VIC
- 5-7** 14th International Forum on Mood and Anxiety Disorder, Vienna, Austria
- 6-8** Asia Pacific Lung Cancer Conference, Kuala Lumpur, Malaysia
- 6-9** 16th National Conference of Pediatric Critical Care, New Delhi, India
- 7** RACGP Developmental disabilities, challenging behaviour and mental health: research to practice and policy, Sydney, NSW
- 7-8** ANZCA Introductory ultrasound for anaesthetists, Melbourne, VIC
- 7-8** RANZCP Section of neuropsychiatry conference, Melbourne Brain Centre, Melbourne, VIC
- 7-8** Combined Australia and New Zealand Colorectal Surgical Meeting, Sydney, NSW
- 8** International Day of Radiology
- 8** RACGP Private practice: The journey from start to finish, Brisbane, QLD
- 8-10** ANZCA x-ray – combined chest and emergency interpretation, Noosa Heads, QLD
- 8-11** Biennial meeting of the International Gynaecological Cancer Society, Melbourne, VIC
- 9** RACS SAT SET course, New Zealand
- 9-11** Australasian Society for Stem Cell Research Annual Conference, Lorne, VIC
- 9-12** Australasian Professional Society on Alcohol and Other Drugs scientific conference, Adelaide, SA
- 11** RACGP Emergency update for practice staff, Adelaide, SA
- 11-13** ANZCA EMAC course, Melbourne, VIC
- 12** World Pneumonia Day
- 12** ANZCA Echo in life support, Melbourne, VIC
- 12-14** ANZCA Ultrasound in anaesthetics and critical care, Gold Coast, QLD
- 12-14** 6th Australian Rural and Remote Mental Health Symposium, Albury, VIC
- 13** Academy of Surgical Educators forum, Adelaide, SA

- 13** RACGP Clinical Emergency Management Program – Intermediate, Melbourne, VIC
- 13-14** ANZCA Advanced life support 2 provider course, Melbourne, VIC
- 13-15** RANZCP Faculty of psychiatry of old age conference, University of Technology Sydney, Sydney, NSW
- 13-15** World Association of Social Psychiatry Jubilee Congress, London, UK
- 13-15** Asia Pacific Cervical Spine Society, 8th Asia Pacific Cervical Spine Meeting, Istanbul, Turkey
- 14** World Diabetes Day
- 14-15** Arthritis and Osteoporosis WA Making Sense of Pain, Perth, WA
- 14-16** General Practitioner Conference and Exhibition, Melbourne, VIC
- 15** RACS workshop: Building towards retirement, Sydney, NSW
- 15** RACS workshop: Communication skills for cancer clinicians, Melbourne, VIC
- 15-16** ANZCA CT – acute medical and surgical interpretation, Noosa Heads, QLD
- 16** World Chronic Obstructive Pulmonary Disease Day
- 16-18** 6th Biennial Australian Falls Prevention Conference, Sydney, NSW
- 16-19** International Forum on Disability Management 2014 Conference, Melbourne, VIC
- 16-19** Australian Health and Medical Research Congress, Melbourne, VIC
- 17** World Prematurity Day
- 17-18** RACGP Clinical Emergency Management Program – Advanced, Melbourne, VIC
- 17-19** International Forum on Disability Management, Melbourne, VIC
- 18-21** ANZCA Ultrasound in intensive care, Gold Coast, QLD
- 19-21** World Health Organization 2nd International Conference on Nutrition, Rome, ITALY
- 19-21** ANZCA Ultrasound for intensive care, Melbourne, VIC
- 20** RACS SAT SET course, Melbourne, VIC
- 20-21** ANZCA Transoesophageal echocardiography course, Melbourne, VIC
- 20-22** ANZCA Effective management of anaesthetic crises, Melbourne, VIC
- 21** RACS workshop: Non-technical skills for surgeons, Melbourne, VIC
- 21-23** ANZCA Process communication course, Part 2, Adelaide, SA
- 22** RACP Continuing Education Workshop, Melbourne, VIC, + video
- 22-23** RACGP Clinical Emergency Management Program – Advanced, Brisbane, QLD
- 22-23** International Scientific Meeting in Anaesthesiology, Hong Kong
- 22-23** ANZCA Windows to the Heart Bedside ECHO, Melbourne, VIC
- 23-25** International Foundation for Integrated Care 2nd World Congress on Integrated Care, Sydney, NSW

- 24-28** 4th World Congress of Regional Anaesthesia and Pain Therapy, Cape Town, South Africa
- 27-28** ANZCA Haemodynamic evaluation and related therapies, Melbourne, VIC
- 27-29** ANZCA EMAC course, Sydney, NSW
- 28** ANZCA NHET-Sim workshop, Brisbane, QLD
- 28** RACGP Clinical Emergency Management Program – Intermediate, Sydney, NSW
- 28-30** RACGP Cognitive Behaviour Therapy (CBT) and counselling skills – 3 day workshop, Perth, WA
- 28-30** International Society for Prosthetics and Orthotics Asian Prosthetic and Orthotic Scientific Meeting, Taipei, Taiwan
- 29** MJA Professional Development: An adult respiratory CPD program for general practitioners and non-respiratory specialists, Sydney, NSW
- 29** ANZCA Anatomy for anaesthetists, Sydney, NSW
- 29-30** RACGP Clinical Emergency Management Program – Advanced, Sydney, NSW
- 29 Nov-3 Dec** Australian Institute of Occupational Hygienists annual conference, Melbourne, VIC

## DECEMBER

- 1** World AIDS Day
- 1-3** ANZCA Process communication model course Part 1, Rotorua, New Zealand
- 1-5** 44th Australasian Society for Immunology ASM, Wollongong, NSW
- 2** RACGP Emergency medicine and resuscitation update (CPR for GPs), Adelaide, SA
- 2** RACGP CPR workshop, QLD
- 2-4** Clinical Oncological Society of Australia 41st ASM, Melbourne, VIC
- 3** International Day of Persons with Disabilities
- 3-5** Australian Pain Management Association and Palliative Care Queensland, Fifty Shades of Pain: Managing complex pain across the continuum, Brisbane, QLD
- 3-6** World Cancer Congress, Melbourne, VIC
- 6** MJA Professional Development: An adult respiratory CPD program for general practitioners and non-respiratory specialists, Melbourne, VIC
- 7-11** Australasian College for Emergency Medicine Annual Scientific Meeting, Melbourne, VIC
- 8-12** ANZCA Basic echocardiography workshop, Gold Coast, QLD
- 11-12** ANZCA New anaesthetic registrar crisis management course, Wellington New Zealand
- 12-14** World Psychiatric Association Regional Congress 2014, Hong Kong
- 15-16** ANZCA Introduction to anaesthesia novice course, Wellington, New Zealand
- 15-17** World Indigenous Health Conference, Cairns, QLD
- 18-20** ANZCA EMAC course, Sydney, NSW



## General Classifieds



## MONASH Medical Education Fellow University Monash University

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## Deputy Medical Editor

The Medical Journal of Australia (MJA) is seeking to recruit suitably qualified applicants for the position of Deputy Medical Editor, to work as part of its team of medical editors at its Sydney CBD-based office. An ongoing full-time position is available immediately, and a 6-month parental leave relief position will be available in the new year, commencing in January.

The successful candidates will be medical graduates, preferably with experience in medical publishing, writing and editing. Postgraduate training, research, or a postgraduate qualification is desirable, but not essential. Excellent English language skills are essential.

The Deputy Medical Editors will be involved in, and have a responsibility for, the editorial processes of the MJA, including assessing submissions, facilitating the peer review process, commissioning contributions, liaising with authors and copy editors, writing for publication and making a contribution to the evolution of the Journal.

If you think you have the skills and experience, please send your current CV and a covering letter specifying how you meet the requirements of the role to:

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