



**ashm**

Supporting the HIV, Viral Hepatitis and Sexual Health Workforce

## Australasian Society for HIV Medicine

### Annual General Meeting

#### Minutes from the Meeting

Date: Wednesday 17<sup>th</sup> October

Time: 1:00pm to 1:45pm

Location: Melbourne Convention Centre, Level 2, Room 212

**Present:** Elizabeth Anderson, Jacinta Ankus, Christopher Birch, Barry Bland, Mark Bloch, Mark Boyd, Bruce Brew, Katherine Brown, Dianne Carey, Naama Carlin, Catherine Cherry, John Chuah, Deborah Couldwell, Benjamin Cowie, Levinia Crooks, Philip Cunningham, Liza Doyle, Virginia Furner, Janelle Hall, Margaret Hellard, Sonja Hill, Jennifer Hoy, Anthony Kelleher, Penny Kenchington, Christopher Lemoh, Maya Lindsay, Petrana Lorenz, Clara Marin-zapata, Jeffrey McMullen, Anne Mijch, Adrian Mindel, Graham Neilsen, Duc Nguyen, Catherine O'Connor, Jason Ong, Louise Owen, Angela Parker, Catherine Pell, Anna Pierce, Jeffrey Post, Nanette Presswell, Patricia Price, Damian Purcell, Darren Russell, Mark Saunders, Karen Seager, Vanessa Towell, Linda Trinh, Michelle Walsh, Emily Wheeler, Bill Whittaker, Belinda Wozencroft, Edwina Wright, Richard Wright.

#### Affiliates/Non Voting Observing Members:

Debra Allen, Christina Chang, Alison Coelho, Anthony Cunningham, John Kaldor, Niamh Lynn, Dick Quan, Rebecca Reeves, Mark Saunders, Tim Stern.

**Proxies:** Christopher Allen, Jason Asselin, Robert Batey, Victoria Bowden, Catriona Bradshaw, Nalla Burk, Lyndal Daly, Alison Duncan, Chantal Fairhurst, Roger Garsia, Paul Goldwater, Michael Kidd, Denise Kraus, Sharon Lewin, Graham Lister, Catherine Luu, Marilyn McMurchie, Edward Reis, Craig Rodgers, Steven Wade, Nicola Woolley.

**EDWINA:** Welcome everyone. As of this morning ASHM has a financial membership of 591 full voting members. The constitution requires that 10% of the membership participate in the Annual General Meeting either by being present at the meeting or by proxy. Quorum for this meeting is therefore 59 people.

We have been notified of 21 proxies. If anyone holds a proxy and has not yet told the registration staff can you please do so now. Members present in person can hold a maximum of 5 proxies.

There are 54 voting members present and 21 proxies so we have reached quorum.

I declare the meeting open at 1:06 pm

We have received one apology this year, from David Bradford.

**EDWINA:** Does anyone have any further apologies?

#### MINUTES

**EDWINA:** The minutes of last year's meeting were available as people entered the room.

Can I have a member who was present at last year's meeting move that the minutes be accepted?

Thank you. Benjamin Cowie

Can I have a seconder?

Thank you. Catherine O'Connor

Is there any discussion about those minutes?

In that case I move the minutes as a true and accurate record of that meeting be accepted.

Moved: Benjamin Cowie

Seconded: Catherine O'Connor

CARRIED

#### **PRESIDENT'S REPORT:**

**EDWINA:** The President's Report is published in the Annual Report. I am happy to present this to members. Members will recall that the Annual Report has been posted on the ASHM website and hard copies of the report have been made available for you at this meeting.

In the interests of time I will assume that members have read my report as published in the Annual Report, but I am happy to answer any questions.

The financial report is also included in the Annual Report and Levinia is happy to take questions. I would like to draw members' attention to the Director's Financial Statement.

In order for us to discuss the Annual Report including the President's Report and the Annual Financial Statement, can I have someone move the report?

Thank you. Philip Cunningham

Can I have a seconder?

Thank you. Katherine Brown

I am happy to advise members that the Society continues to be in a healthy financial position. We have maintained a position where we have sufficient operating funds to allow us to cover fluctuations in cash flow and to keep the organisation functioning while contracts are negotiated throughout the year.

I would also draw your attention to the report format. This year we were able to introduce comparisons from our previous full year operation. This allows us importantly to monitor our performance over time. I hope you find this useful.

Would anyone like to raise any issues?

I would now like to move the Annual Report, incorporating the President's Report and audited Annual Financial Report.

CARRIED UNANIMOUSLY

#### **ELECTION OF THE BOARD**

**EDWINA:** It now gives me great pleasure to provide the results of the election for the Board. It has been some time since we had an election and the interest we received in Board membership this year just goes to show our relevance as a living breathing organisation. First I would like to take this opportunity to thank retiring members.

**Patricia Price** is leaving the Board. Trish has represented WA and the research area for the past three years, as well as being an active member of the Conference Advisory Group. Thanks to Trish.

**Graham Cooksley** is not here today. He was our inaugural 'Board nominated member' and I would like to thank him for his contributions across the Viral Hepatitis area. It was great to have him on the Board and he was a great mentor for many of us. Graham retired from the Board earlier this year after a long and productive association with ASHM, he will continue his support to ASHM in a Clinical Advisor role, providing expertise in the viral hepatitis area.

I will continue in the position of President for the second year of my term, joining the other uncontested positions in the Executive:

**Greg Dore** – Immediate Past President

**Mark Boyd** – Vice President

**Philip Cunningham** – Vice President

And Ordinary Members:

**Darren Russell** – Queensland

**Louise Owen** – Tasmania

**David Nolan** – Western Australia – I would like to welcome David, we're really pleased he's coming on board. He is newly joining the Board but who will be known to many.

The following returning Ordinary Members were elected via member ballot:

**Mark Bloch** – NSW

**David Cooper** – NSW

**Lyndal Daly** – South Australia

**William Donohue** – South Australia

**Ben Cowie** – Victoria

**Julian Elliott** – Victoria

The ballot was exceptionally close and we are sorry we couldn't have everyone. I would like to take this opportunity on behalf of the Board and members to thank both Craig Rodgers and Heather Worth for nominating for election, we're pleased that they did. In the event that casual vacancies become available throughout the 2012-2013 term of the Board both Heather and Craig will be considered. The Board attempts to gain a wide geographic as well as discipline/profession spread when recruiting and filling casual vacancies. We feel that this is a good Board, which crosses lots of boundaries and covers very relevant areas.

Additionally:

**Mark Saunders** – returns as the Board’s inaugural Designated Director from the Aboriginal & Torres Strait Islander Community

**Ed Gane** – from NZ joins us as Designated Director filling area of special need. In this case, Hepatology.

**EDWINA:** Would you please join with me in welcoming in the new Board.

#### **APPOINTMENT OF AUDITOR**

**LEVINIA:** Now for some procedural business. As a company limited by guarantee, we are now required to officially appoint our auditors for another year. I propose that we continue to utilize the services of Walker Wayland Accountants.

Can I have someone move the motion that we continue to use Walker Wayland?

Thank you. Philip Cunningham

Can I have a seconder?

Thank you. Benjamin Cowie

CARRIED UNANIMOUSLY

#### **Motions on Notice:**

**EDWINA:** Members will have received notice of one motion, note there are no constitutional changes this year.

**LEVINIA:** The last item for the agenda is the review and endorsement of the ASHM Partnership Program Policy and draft Guidelines.

**EDWINA:** The ASHM Partnership Program Policy is available on the website and was emailed to members on 26<sup>th</sup> September. The draft Guidelines were added and emailed to members last week.

The ASHM Partnership Program is designed to provide opportunities for ASHM to partner with the public sector and not-for-profit organisations, corporate entities and international bodies to bring into being activities and opportunities which are in accordance with ASHM’s objectives.

To provide some background, we already have a code of conduct governing our relations with the pharma industry and this is an area that we wanted to review. We felt that this program might give us some guidance on how to work better with them, to see the benefits, in a clear and transparent way.

The Advisory Panel Committee has formed up and had its first meeting on Friday 21<sup>st</sup> September, with Annmaree O’Keeffe as Chair. Levinia, Mark Bloch and Mark Boyd are also involved. At that meeting it was felt that it would be of benefit to throw the matter out to membership and get some broader discussion, which is why we’re discussing it here today.

The Policy and Guidelines have been available on the website and are available here today. Note these are living documents and will continue to be reviewed. We intend to implement the policy over the next 12-24 months and review it on an ongoing basis. Does anyone have any questions or discussion points?

**MARK BOYD:** This is often a controversial area, but the relationships are important. We need a transparent process and I think the result is fair – I am happy with it. Others may feel strongly about this as it is an issue that incites some passions. We’d like to know if anyone thinks we have it wrong.

**MARK BLOCH:** ASHM has an important role in education and this quality service needs additional support, but we need to draw a line and be clear about the support we do get. The ASHM brand represents all members, so if we're involved with others it's not necessarily seen as an endorsement from ASHM. With the number of areas we've been involved with, this is a moving beast and we need to grasp it and ensure we have a transparent process.

**ANNE MIJCH:** I have some concerns regarding independence and reputational risks involved with long term partnerships with organisations that may have a different primary focus to ASHM, whether the focus be fundraising or pharma profit-making for example. I'd like to ask two questions:

- Re durability, once we're partners with these organisations will the partnership be durable and ongoing, or will it be reviewed?
- Re transparency, with these partnerships will there be open continuous disclosure via logos appearing together for example?

**LEVINIA:** Re the question of durability, activities are seen as project based. We will not be forming ongoing partnerships with any company whether in the pharma or mining industry for example, partnerships will be on a single contract basis. At no stage have we talked about durability past that contracted activity.

Re transparency and disclosure, we would need to think about this and develop a specific timescale table for this. We will set up a web page to disclose projects in details and to be considered the partnering organisation must agree to this transparency. There will also be active evaluations about how the Advisory Panel Committee felt that each partnership went.

**MARK BLOCH:** We will also set up guidelines for organisations that want to partner with ASHM, so that they understand our expectations of them and we can manage their expectations.

**MARGARET HELLARD:** Apologies but I have not fully read the documentation and I would like to understand more about the program before casting my vote. Levinia please can you provide a brief overview of the benefits of moving forward with this program as opposed to continuing with existing collaboration arrangements?

**LEVINIA:** Currently every time ASHM wants to do something in partnership with another organisation or company it is a one off and there are no clear guidelines to follow. We need some consistency of approach regarding how to deal with these activities. We were aware of some standards issued by Medicines Australia to their members and we wanted something similar to this. We needed to describe what an independent faculty was, as people would have different ideas about this if there were no guidelines. The Panel will decide the nature of the activity, not the partner, and will make sure that activities are within scope.

**EDWINA:** This is a way of making it very clear what we are doing and providing clear guidelines for participants. We are mindful of the International AIDS Conference in 2014 and as the scientific partner we will receive a lot of partnership requests. This program is a good way of tracking negotiations.

**CATHERINE CHERRY:** What are the implications of this program for individuals? For example, does it impact on a speaker's need to disclose conflicts of interest?

**LEVINIA:** We will need to take more advice on this. There will be someone from the RACP Committee on Ethics and Guidelines on our panel to advise. We want to come up with guidelines to help people with exactly that kind of question. It will depend on the type of event or activity.

One thing that is clear is that we will not ask for nor apply any private funding for teaching in HIV, HCV or HBV S100 Prescriber accreditation programs nor clinical guidelines development.

**LOUISE OWEN:** Partnership arrangements imply benefits for both parties. What will the benefits be for the partners? Is this well defined in the documentation?

**LEVINIA:** In the documentation some guidelines do exist. Re the benefits it would be naïve to believe that there are none for the partners. ASHM will get the capacity to provide more education, or to bring more people to the education activities via scholarships for example.

The program is broader than just the pharma industry, but using pharma as an example they may see that they will get access to people they wouldn't normally get access to (note this would be via ASHM, partners would not communicate directly), ultimately increasing their reach in a way that involves them investing back into the sector.

**BENJAMIN COWIE:** I am supportive of this process. It is not an extension of current activities but a formalisation of the approach. It is providing a framework and guidance to staff, through the Board and thereby through membership. It is a much more transparent process than we currently have and is providing structure for the secretariat on things that are already happening. People can review the partnerships and provide feedback.

**CHRISTOPHER LEMOH:** The documents state that ASHM will not partner with organisations involved in illegal activity. Due to the nature of our work and some of the organisations we're involved with this could be a difficult area. Please can you provide some clarification?

**LEVINIA:** In this context we were talking about ACFID compliance and the governance structure of the entities. We will have to have another look at this to see that it doesn't bring with it some unintentional effects or limitations.

Are there any more questions? Just to repeat that this is a work in progress and will be transparent at all times. We will continue to report back on progress.

It is proposed that the ASHM Partnership Program Policy and draft Guidelines be endorsed:

**Moved:** Mark Boyd      **Seconded:** Mark Bloch

CARRIED

#### **Membership Fees:**

**LEVINIA:** We would normally discuss potential changes to membership fees, however due to the large increase last year we will not increase again this year.

I can report that our aim to increase Organisational Sustaining Member involvement has been working well, as has our aim to increase Affiliate membership. General membership has also increased this year.

**EDWINA:** Thank you that brings to a close the formal issues for the meeting at 1:35pm.