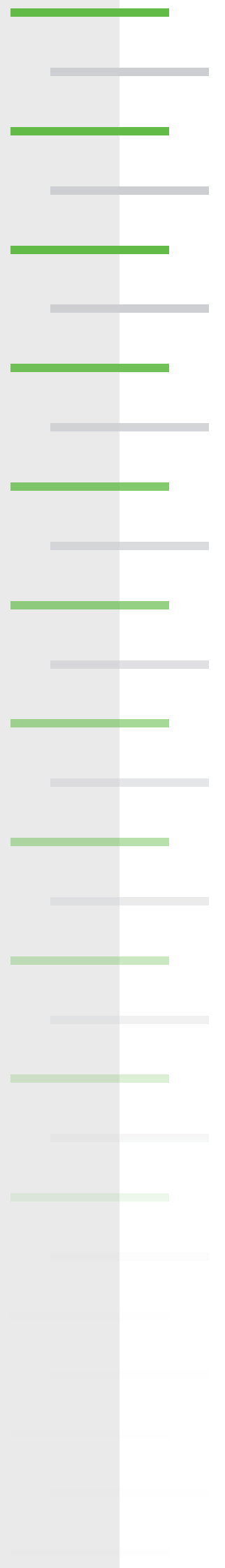
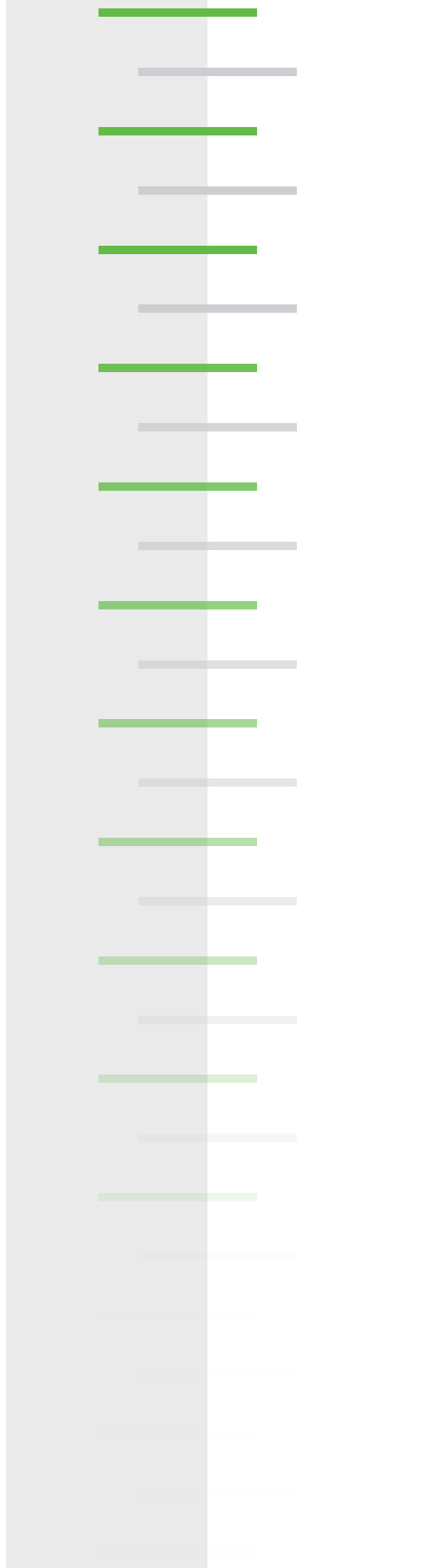






Timeline Highlights





BEFORE 1920

The Influence of WWI

Before 1920, postgraduate medical education in Victoria was ad hoc.



The University of Melbourne, the Victorian Branch of the British Medical Association (BMA), and the Medical Society of Victoria all held occasional lectures and meetings to update medical practitioners on new developments in medicine.

During WWI, most new medical graduates went straight to the War as doctors, so many of them only had clinical experience in the medical care of young men, particularly their war wounds.

In 1919, the Council of the Victorian Branch of the BMA established a subcommittee to arrange for a 'refresher course' for young doctors returning from the War. The course was held at the Melbourne Hospital in late October and early November.

BEFORE

1920

WWI. Image from the State Library Victoria archive, www.slv.vic.gov.au

20 FEBRUARY
1920

THE BEGINNING - 20 FEBRUARY 1920

Establishment of the Melbourne Committee for Postgraduate Work

Due to the success of the postgraduate education in late 1919 it was recognised there would be an ongoing need for courses that would be beyond the capability of the BMA to manage.

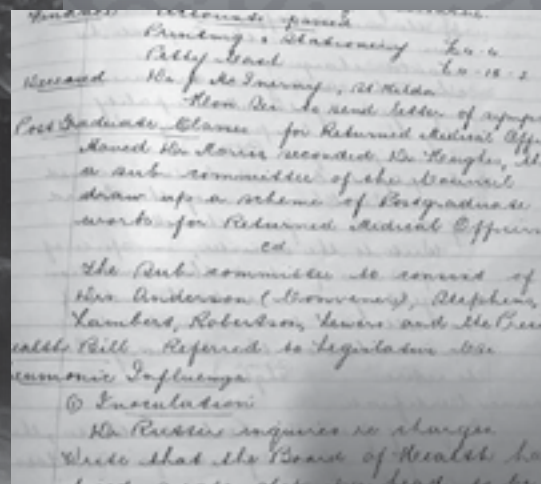
On 20 February 1920 at a meeting of the Council of the Victorian branch of the BMA it was resolved to establish an independent postgraduate committee consisting of representatives from the BMA, The University of Melbourne, and the major teaching hospitals in Melbourne.

The Melbourne Committee for Postgraduate Work (the Committee) met soon after and Dr AVM Anderson, a prominent Melbourne doctor who was representing the BMA on the committee, was elected Chairman.

Dr Dunbar Hooper became the first Secretary. The minute was confirmed and signed on 11 March 1920.



Committee Secretary, Dr Dunbar Hooper



“

Moved Dr Morris, seconded Dr Hughes, that a sub-committee of the council draw up a scheme of post graduate work for Returned Medical Officers.

”

1920s

Early Activities of the Melbourne Committee for Postgraduate Work

During the first few years, the committee quickly established a variety of postgraduate activities, including:

- Continuation of an annual refresher course of two weeks duration, with tutorials and clinics organised in all major teaching hospitals
- Commencement of the following programs:
 - 1922 - Country Education Program
 - 1924 - A special course in renal diseases
 - 1924 - A prize essay in obstetrics
 - 1925 - Visiting lecturers from the "old country" (United Kingdom) - the first was Professor CJ Martin
 - 1926 - Courses of weekly lecturettes, each course held twice a year

- 1927 - Visiting lecturers from the United States - the first were Drs Elliot and Kanavel
- 1928 - A course of lectures in advanced pathology and physiology for the Master of Surgery (MS) examination of the University of Melbourne

Importantly, the Committee decided all its activities should be self-sustaining and fees were charged accordingly. This enabled the payment of reasonable honoraria and expenses to lecturers.

November, 1926						
TIME TABLE						
	MONDAY, 8th.	TUESDAY, 9th.	WEDNESDAY, 10th.	THURSDAY, 11th.	FRIDAY, 12th.	SATURDAY, 13th.
9.30 to 11 a.m.	Registration at Postgraduate Office, Melbourne Hospital.	S.V.—Mr. H. Devine, Atypical Form of Appendicitis. Dr. A. Brennan, Laboratory Methods for General Practitioners.	W.H.—Dr. J. Green, Post Partum Haemorrhage, Use and Abuse of Pituitrin.	St. V.—Dr. Julian Smith, Operating Morning arranged with a view to Utility in General Practice. Dr. J. Greig, Acute Infections of Central Nervous System.	M.H.—Dr. S. Sewell, Cerebra. Mr. A. Haines, Tumours of the Kidney.	M.H.—Mr. Harold Hew, Swellings of the Lymphatic Glands. Dr. L. Harley, Atrial Fibrillation.
11.15 to 1 p.m.	Dr. Hume Turnbull, The Causes of Heart Failure. M.H.—Mr. Alan Newton, Surgical Cases.	Dr. L. Latham, Pulmonary Cases. S.V.—Mr. Norman Morris, Surgery of Hand and Wrist.	W.H.—Dr. Egan Hayes, Narcolepsy in Childhood.	St. V.—Mr. Gordon Shaw, Diag. of Lesions of R. Blue Tonsils. Dr. F. Apperley, Some Types of dyspepsia.	Mr. V. Harley, Cases in Septic Wards. M.H.—Dr. Douglas Thomas, Dietetic Management of Diabetes.	M.H.—Dr. Ralph McMeekin, Neurology in General Practice. Mr. C. Littlejohn, Pain in the Back.
2.15 to 3.30	M.H.—Dr. C. H. Kellaway, Focal Infections.	M.H.—Dr. Ceedman, Radiography.	St. V.—Dr. Hewish, Radiology (Gastro-intestinal).	A.H.—Dr. A. Lee, Throat, Radiotherapy.	C.H.—Dr. S. Ferguson, Infant Feeding Principles.	
3.30 to 5 p.m.	M.H.—Professor P. MacCallum, Pathological Demonstration.	M.H.—Dr. L. Mitchell, Eye Cases of Everyday Practice.	St. V.—Mr. L. Doyle, Local Anaesthetics.	A.H.—Mr. H. Tremble, Diabetes.	C.H.—Dr. Whitaker, Selected Surgical Cases.	
8.30 p.m.	Inaugural Meeting* Address by Sir George Syme, B.M.A. Hall, East Melbourne.		8.15.—A.B.S. School University, B.M.A. Meeting, Demonstration at Anatomy School, Prof. Berry and Staff.		7.30 p.m. M.H.—Dr. Kenneth McLean, Venereal Diseases.	
	MONDAY, 15th.	TUESDAY, 16th.	WEDNESDAY, 17th.	THURSDAY, 18th.	FRIDAY, 19th.	SATURDAY, 20th.
9.30 to 11 a.m.	A.H.—Dr. A. V. M. Anderson, Diagnosis and Treatment of Nephritis. Mr. A. Trice, Early Diagnosis of Cancer of Breast.	M.H.—Mr. J. Tait, Urinary Stricture. Dr. W. S. Johnston, Uraemia.	W.H.—Dr. A. Sharwin, Indication for Operation in Gynaecology.	M.H.—Mr. K. Evington, Fractures of Femur. Dr. H. Effer, Medical Cases.	A.H.—Mr. Baldoube Quick, Surgery Abroad. A.H.—Dr. J. Bell, Bowels and how to use H.	
11.15 to 1 p.m.	A.H.—Mr. St. C. Stewart, Common Knee Joint Injuries. Dr. J. Major, Types of High Blood Pressure.	Mr. T. Lambert, Head Injuries. M.H.—Dr. R. Lawton, Cardio-vascular Syphilis.	W.H.—Dr. R. Wynn, Indications for Interference in Labour.	M.H.—Mr. R. T. Ewan, Diagnosis of Upper Abdominal Lesions. Dr. S. O. Cowen, Aortic Diseases.	A.H.—Dr. MacKendzie, Artificial Pneumothorax Neurological Cases. Mr. J. Kennedy, Fractures in the Wards.	
2.15 to 5 p.m.	A.H.—Dr. Lawrie, Dr. Colville, Dr. Morris, Children's Diseases, etc.	M.H.—Dr. Wattenhall, Common Skin Affections.	Commonwealth Serum Laboratories—Dr. Morgan, Serums, Vaccines, etc. Acute Mental Hospital—Mrs. Philpot and Henty, Mental Diseases met with in General Practice.	I.D.H.—Fairfield—Dr. F. Scholes, Infectious Diseases. St. V.—Dr. K. Calquhoun, Dermatological Cases.	Erington Convalescent Home—Dr. R. Dawsons, Radiotherapy Cases. Dr. D. Galbraith, Pulmonary Diseases of Children.	

Medical Education Timetable 1926. Courtesy of the HEAL archives.

1930s

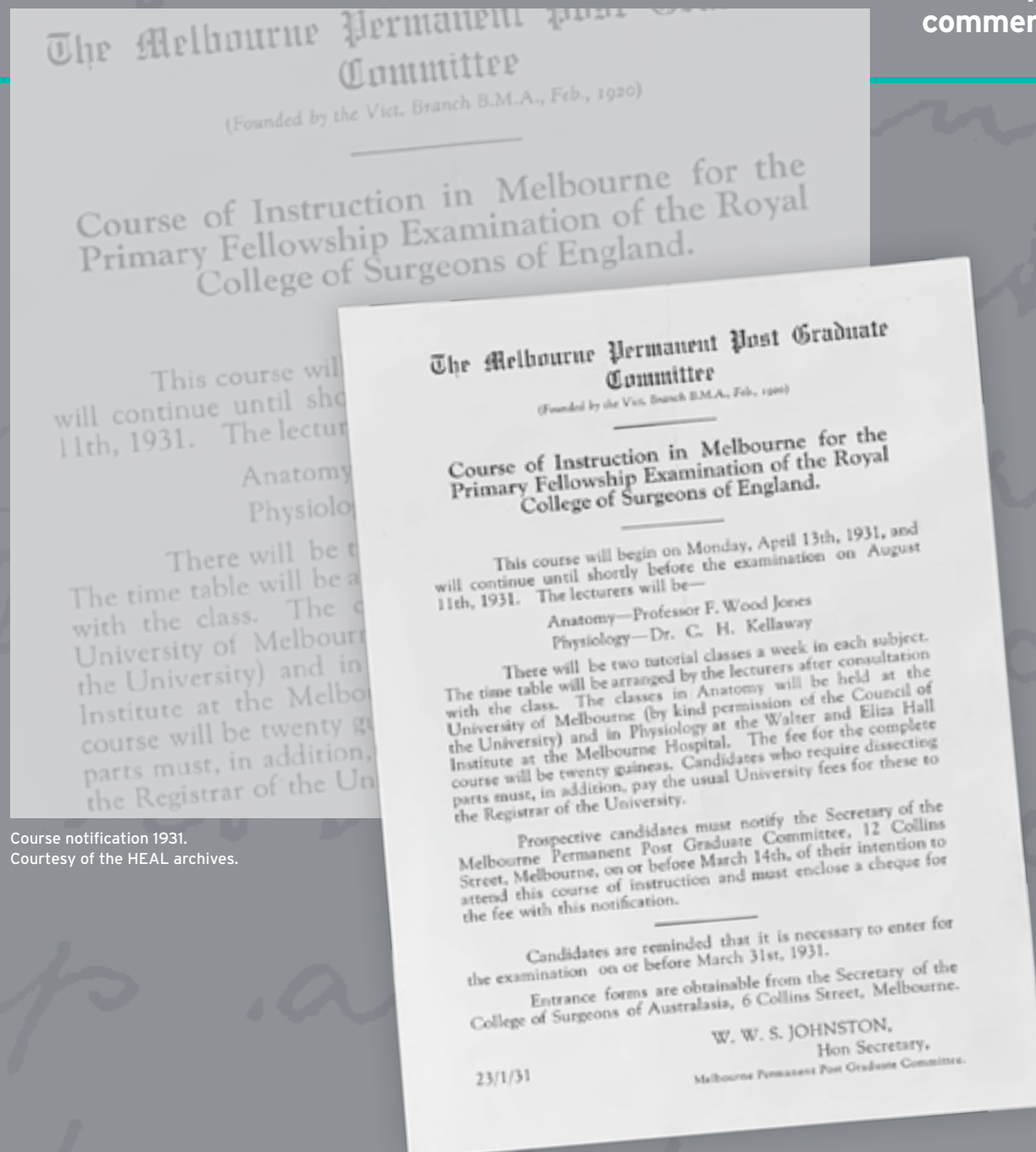
Adoption of a Constitution and Rules

The 1930s were extremely busy years for the Committee, which was still made up of entirely unpaid, full time medical practitioners and academics and met monthly - usually at 8:00pm! Annual activities included the programs that commenced in the 1920s, plus new programs were introduced:

- Afternoon clinical demonstrations at Melbourne teaching hospitals
- Speciality courses - including industrial diseases and obstetrics
- Lecture programs held by The University of Melbourne to prepare candidates to sit Master of Surgery and Doctor of Medicine exams
- Instruction courses to prepare candidates to sit the primary fellowship examination of the Royal College of Surgeons (England)
- Facilitation for Melbourne graduates to attain overseas placements

In 1931, as the Committee developed, it resolved to adopt a formal Constitution and Rules that guided the management and governance of the members as 'The Melbourne Permanent Postgraduate Committee'. The Committee also realised that there were synergies with other state postgraduate committees and in 1935 agreed to work together in the establishment of an Australian Postgraduate Council.

1930s



Course notification 1931.
Courtesy of the HEAL archives.

1940s

The Influence of WWII

With the advent of World War II (WWII) regular postgraduate education activities were cancelled between the years of 1940-1945.



Doctors operating in a tent 1942 - Argus Newspaper Collection

In 1945, after WWII, the Committee's activities returned in earnest with the appointment of a full time secretariat and part time Medical Director of postgraduate studies. A full syllabus of postgraduate education activities recommenced similar to that in the 1930s. To assist with the large workload a part time Assistant Director of postgraduate studies was appointed the following year.

SYLLABUS of Medical Postgraduate Facilities for 1948

1. Intensive Refresher Courses
2. Country Courses
3. Courses for Higher Degrees and Diplomas
4. Course by Overseas Lecturer
5. Supernumerary Residencies
6. Individual Postgraduate Study
7. Overseas Postgraduate Study
8. Various Facilities Provided by Other Bodies

1940s

1950-60s

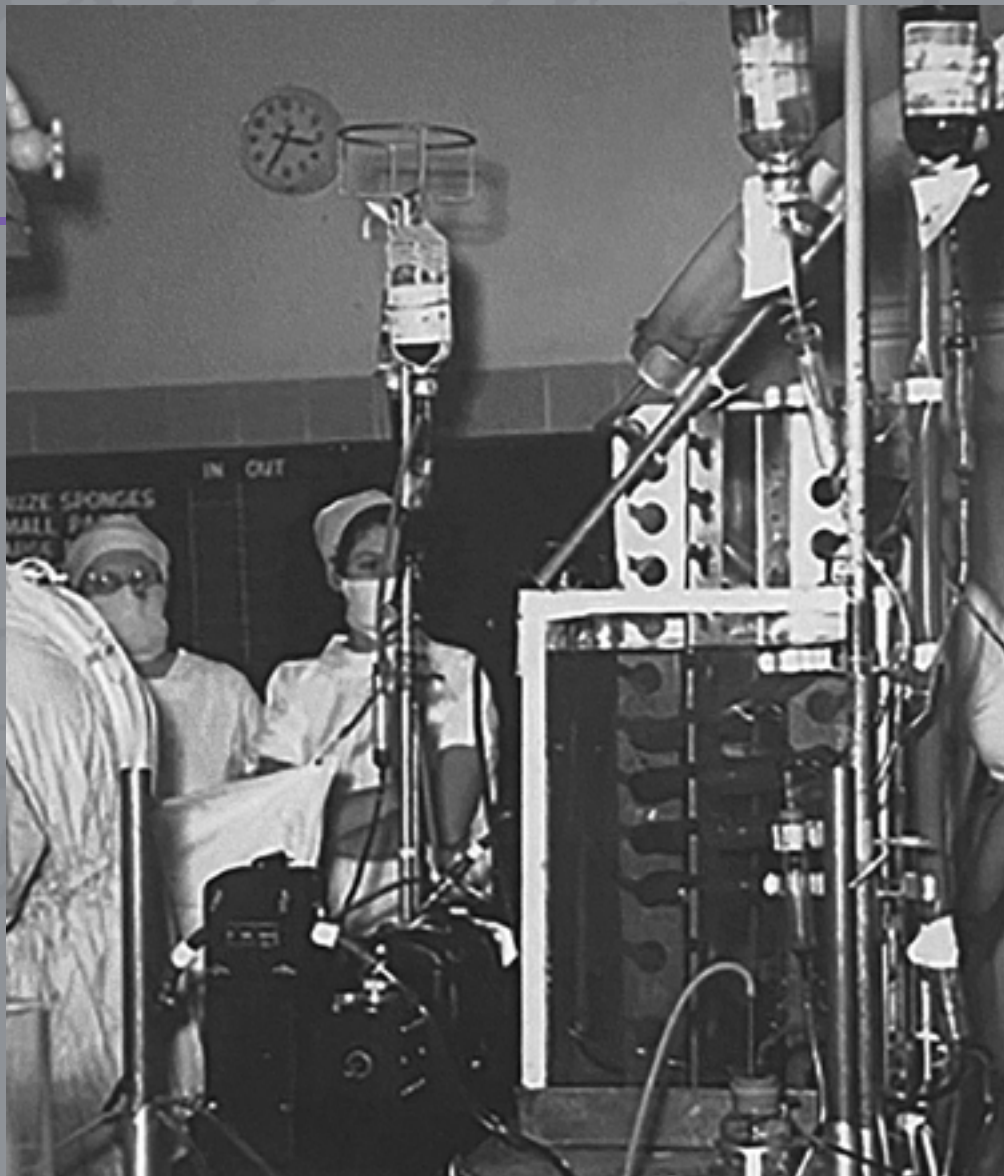
Introduction of an Annual Subscription

From the outset, the Committee determined that all lecturers would receive an honorarium and reimbursement of expenses. This necessitated charging attendance fees, and in order to keep attendance fees within acceptable limits, additional sources of funding were always being explored.

In 1951, however, it was determined that an annual subscription be introduced to attend all the activities organised by the Committee.

1961 saw the first clinical placements arranged for overseas medical graduates through the Colombo Plan - which was born out of a Commonwealth Conference of Foreign Ministers, and established to provide a framework within which international cooperation efforts could be promoted to raise the standards of people in a region.

In 1966 the Committee developed a Resident training program that commenced at the Alfred Hospital and was funded by a grant from the Wolfson Foundation (United Kingdom).



Courtesy of Alfred Health Archives

1950s
1960s



1970s

Adoption of a New Name

Victorian Medical Postgraduate Foundation (VMPF)

In 1970 the Committee received funding from the Victorian Department of Health to run the 'computer matching service' for Interns.

The **computer matching** service matched the preferences of both hospitals and candidates to enable an impartial placement of medical graduates to hospitals. The service was expanded to include hospital residents and registrars in 1972.

The new name of Victorian Medical Postgraduate Foundation (VMPF) was adopted in 1973 and the organisation continued to prosper throughout the decade. In 1979 the first non-medical Executive Director, Mr DGP Thompson, was appointed.

1970s

1980s

Introduction of Courses for IMGs and Commencement of an Antibiotic Guidelines Committee

In 1984 the VMPF established an Antibiotic Guidelines Committee and published the 4th Edition of Antibiotic Guidelines. The committee continued to publish quality guidelines that became a reliable source of unbiased and objective information for all health professionals to help them make the best decisions for their patients.

1984 also saw the first training program developed for International Medical Graduates (IMGs) to assist them to integrate in to the Australian healthcare system.

Following on from the success of the medical computer matching services the first medical radiation practitioner computer matching service was held in 1988. This was followed in 1993 by the first nursing computer matching services.

In the late 80's and 90's VMPF continued to produce contemporary educational programs for medical practitioners including topics on AIDS (acquired immunodeficiency syndrome) and child sexual abuse. New guidelines were also published in analgesic therapy; psychotropic therapy; therapy of cardiovascular disorders, gastrointestinal disorders, and respiratory disorders; and imaging.



Trawalla, Toorak, in 1984, which housed the VMPF offices

1980s

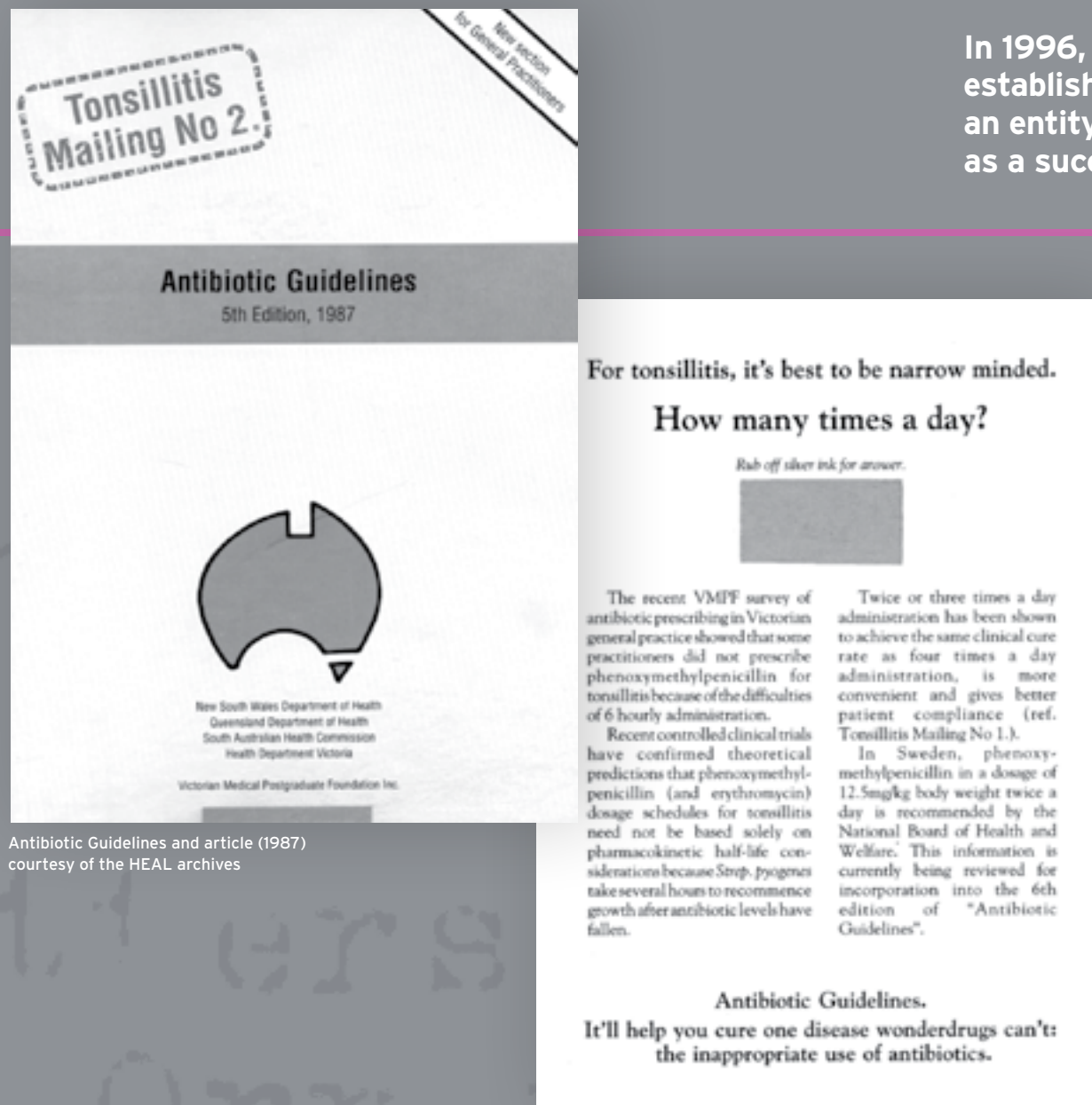
1990s

Establishment of the Therapeutic Guidelines Ltd. (TGL) and the Postgraduate Medical Council of Victoria (PMCV)

In 1996, following the success of the 'guidelines' publications, the VMPF established Therapeutic Guidelines Ltd (TGL) as a not-for-profit company, an entity in its own right, with a separate governing board that continues as a successful company today.

With the Health Insurance Amendment Act (No 2) that commenced on 17 December 1996, it became a requirement for medical practitioners to complete a recognised postgraduate medical training program to be eligible to provide services that attract Medicare benefits. On the recommendation of the Medical Training and Review Panel, Postgraduate Medical Councils were established across Australia to manage this.

In 1999 VMPF ran its last computer match and was then required by the Victorian government to transfer the medical and nursing computer matching services, along with the relevant funds, to the newly established Postgraduate Medical Council of Victoria (PMCV).



Antibiotic Guidelines and article (1987)
courtesy of the HEAL archives

1990s

2000s

Focus on IMG and Country Education Programs

During this decade there was a significant requirement for the Australian healthcare system to employ International Medical Graduates (IMGs), and VMPF continued to provide a range of programs specifically aimed to assist IMGs to pass the Australian Medical Council (AMC) exams required to gain Australian registration.

Courses included the opportunity to attend major health services in Victoria to observe the Australian system and incorporated trial exams as a learning and preparation tool. Since 2002, permanent Australian residents were able to access FEE-HELP assistance and language and communication tutors through a partnership with Victoria University.

The Country Education Program delivered 100s of sessions to all health professionals. Sessions were accredited with the Royal Australian College of General Practitioners (RACGP), the Australian College of Rural and Remote Medicine (ACRRM)

and the Royal College of Nursing Australia (RCNA) for continuing professional development points.

Throughout this decade, the VMPF in partnership with the Australian Medical Association (AMA) and later, the PMCV, also ran an annual Medical Careers Expo (that commenced in 1999) for graduating medical students and junior medical staff. The Expo assisted attendees to access information on specialist training programs and assisted IMGs to explore employment opportunities.



IMG Training Program courtesy of HEAL archives

2000s

EARLY 2010s

The Move to Health Education Australia Ltd (HEAL)

In 2010 VMPF established a subsidiary company, Health Education Australia Limited (because the VMPF corporate structure was limited to Victoria).



Health
Education
Australia
Limited

In 2012 it was resolved to transition from VMPF and officially implement HEAL as the new entity. It was also resolved to adopt a skills based Board rather than a largely medical practitioner membership. HEAL remained a not-for-profit organisation, adopted a charitable status and achieved Registered Training Organisation (RTO) accreditation in 2013.

2012 also saw the implementation of a new website, a social media strategy and a Learning Management System, which provided many additional resources and online programs for the IMGs and other health professional programs.

In 2013, face-to-face IMG programs were commenced in New South Wales.

The Simulated Patient (SP) Program was established in 2013 and was the first of its kind in Australia. This program continues to train a broad cohort of simulated participants (that now include simulated health professionals) who are hired from the HEAL database to organisations for educational encounters or to assist with high stakes exams (of health professionals).

EARLY
2010s

TOWARDS 2020

The Development of the Australasian Institute of Clinical Governance (AICG)

In 2016, the HEAL Foundation was established to provide a vehicle to channel charitable activities and formally endorse a culture of fostering programs that support healthcare education.



Today, as well as the provision of grants, the Foundation supports the HEAL Thought Leaders Program that is designed to formally carry on the tradition of the organisation's 100 years of facilitation of conversations by national and international leaders on important issues around the provision of healthcare.

Online CPD programs on varying topics were established in 2016 that were mapped against health professional competency frameworks. The modules have accreditation with the medical, nursing and physiotherapy accreditation bodies.

In 2017, the Australasian Institute of Clinical Governance (AICG) was formed as a Division of HEAL, in a direct response to an identified need for healthcare professionals to strengthen their skills in clinical governance to improve patient safety and quality care. The AICG was formally launched in 2019 and provides a Certificate in Clinical Governance for frontline health professionals as well as other courses that have been mapped to the AICG Clinical Governance Framework.

TOWARD
2020

Timeline

Additional Information



The Country Education Program 1922 - 2014

Provision of education activities for medical practitioners (and later for all healthcare practitioners) in country areas of Victoria was always a major focus of the Committee.

The Country Education Program was the first new activity developed by the Committee in 1922, and except for a break during WWII it continued for nearly 100 years, only ceasing in 2014 when it was finally rendered redundant by the ease of access to online education resources and the decentralisation of funding to country regions.

The structure of the program remained essentially unchanged for the whole of its life, whereby a respected practitioner from Melbourne visited a country centre and gave a lecture on a topic of interest to country practitioners - usually at lunchtime.

Initially speakers were organised by a designated local country practitioner who was paid an annual honorarium by the Committee. Later, an annual needs analysis was provided to country areas and responses informed the program.

Local attendees were initially charged an attendance fee, but in later years the program was partially funded by a yearly project grant from the Victorian government, and partially by sponsorship of individual meetings by a pharmaceutical company or other similar organisation.

Many reviews of the program were undertaken over the years of its existence, and it is a tribute to its popularity that each review recommended it continue largely unchanged. Its longstanding success lay in the calibre of attending speakers, the degree of local involvement and support, and, in later years as other local healthcare practitioners were encouraged to attend, the meetings provided a networking opportunity for the local area.



Computer Matching Service

A computer matching service was first used for Interns (Post Graduate Year 1) placements in Victorian public hospitals in 1970, and extended to most PGY2 and registrar positions by 1974.



Before the program, final year medical students needed to apply to each hospital individually for a PGY1 position, and when hospitals evaluated the applicants they did not know which other hospitals the students had applied for.

With the match, students listed their order of preference for hospitals, and hospitals listed their order of preference for the students. The computer then matched the preferences so that each received the highest preference available.

This highly successful early use of computers continued to be administered by the VMPF until it was taken over by the newly created Postgraduate Medical Council of Victoria (PMCV) in 1999. PMCV ran their first computer match in 2000.

International Medical Graduates (IMGs)

For many years, the Committee played an important role in assisting Victorian medical graduates obtain specialist experience within suitable overseas clinical placements. It did this mainly by using personal contacts of the Committee members.

In 1954, however, the reverse occurred, when doctors who were trained in Commonwealth countries, were sponsored to obtain further specialist training in Australia under the Colombo Plan, and their placements in Victoria were arranged by the Committee.

Additionally, with increasing migration to Australia after WWII, there were increasing numbers of medical graduates seeking permanent registration to practice in Australia. Various ad hoc arrangements were made to organise lecture programs (e.g. through the medical colleges) and clinical placements to assist overseas graduates gain registration in Victoria.

In 1985, the VMPF agreed to take over the organisation of the various programs then available in Victoria.

Today, Health Education Australia Ltd (HEAL) continues to be a major provider of online and face-to-face programs in Victoria and New South Wales to assist International Medical Graduates (IMGs) to gain registration in Australia. Courses assist the IMG to sit either the first part Multiple Choice Question (MCQ) and/or the Clinical components of the Australian Medical Council (AMC) examination.



Therapeutic Guidelines

The first version of the Antibiotic Guidelines was written in 1978 by a small group of Victorian clinicians responding to concern about the advent of the multiresistant *Staphylococcus Aureus* (Golden Staph) in Victorian hospitals.

In 1984, the 4th edition of the guidelines was being written, and the Victorian Health Department, which had been responsible for the publication of the earlier editions, decided it was not appropriate for the guidelines to continue to be published by a government department.

Representatives of the writing group, which was then a subcommittee of a ministerial advisory committee, the Victorian Drug Usage Advisory Committee (VDUAC), asked the VMPF to take over responsibility for the publishing, dissemination and evaluation of the guidelines.

The VMPF formed a separate Antibiotic Committee to oversee these activities, and this later became the Therapeutics Committee when guidelines in most other major therapeutic areas were added by the VDUAC.

The activities of the committees were so successful that in 1996 it was decided they would be better governed by a not-for-profit company structure, rather than by several committees (the VDUAC and the VMPF Therapeutic Committee), and the VMPF established Therapeutic Guidelines Ltd (TGL) and transferred the assets of its Therapeutics committee to the new company.

TGL continues to be a highly successful company, and its major product (eTG complete), an online resource, now contains guidelines for therapy of all major clinical conditions and continues to be widely used in all Australian hospitals, all Australian medical and pharmacy schools, and in most Australian general practices.

Funding of the Committee, VMPF – HEAL/AICG

Funding of activities has always been a major preoccupation of the Committee - and its successors.

Despite many requests, the Victorian Government consistently refused to provide core funding for the activities of the Committee, presumably as they believed that medical practitioners should fund their own professional development.

The Committee was also not eligible for tax deductibility of philanthropic donations, so over many years explored the possibility of becoming a Committee of the Council of Melbourne University, which had tax deductibility status. However these negotiations always foundered on the impossibility of ensuring donations to the Committee could not be used for general University purposes.

In 1951, the Committee decided to introduce an annual subscription model, whereby subscribers could attend all the activities organised by the Committee.

When the Committee later became the VMPF, the subscribers became the members of the organisation.

By the 1990s, some of the activities of the VMPF were funded by ongoing grants from the Victorian Government – e.g. for the country education program and the computer matching service. However the former was withdrawn in 2014 and the latter transferred to the PMCV when it was established by the Government in 1999. The VMPF then became reliant on user-pay activities, and some single project grants.

Since the establishment of HEAL, and now also the AICG, funding is largely user-pays – i.e. enrolment fees are charged for educational offerings of the organisation.

Organisational Structure

From a Committee, to a Foundation, to a Company and an Institute

During its 100 year existence, the structure of the organisation has gradually evolved to ensure it was the most appropriate for the activities it wanted to undertake, and was also in keeping with evolving legal and corporate structures.

The Committee initially consisted of representatives from a variety of named organisations, and over the first years of its existence it developed its own Constitution and Rules. At the time, this enabled it to open bank accounts, enter legal agreements, and later to employ administrative staff.

However two problems gradually emerged. First, more and more organisations sought, and were granted, representation on the Committee, such that by the 1960s the Committee had more than trebled in size. This could be partly, but not fully, overcome by the formation of an executive committee, but remained cumbersome.

Second, the Committee was never able to gain tax deductibility for donations to its activities, which significantly hampered its ability to raise the funds needed to pay for

all its activities. Thus it was totally reliant on attendance fees, and later subscription fees, to fund its activities.

After many years of considering different structures, the Committee initially changed its name to a Foundation (the VMPF), but this didn't enable it to gain the charitable status that was hoped for. In addition, changes to the Victorian laws required Committees to become incorporated bodies. So in the early 1980s it became an incorporated body (VMPF Inc) under the then new Victorian incorporation legislation.

The incorporated structure was initially successful, but again over the next 15 years or so, two further challenges arose. First, incorporation in Victoria limited the organisation to undertaking activities only within Victoria. Second, the VMPF structure retained a very large Council of representatives

of many organisations, and also a membership who had previously been the subscribers to the Foundation. This cumbersome structure proved more and more problematic as the activities of the organisation evolved.

The first of these problems was solved by the establishment in 2010 by the VMPF of the new not-for-profit company Health Education Australia Ltd (HEAL), and some years later by the transfer into HEAL of the assets of the VMPF. The second was overcome by ensuring the structure of HEAL was more in line with the requirements of an education body than a 'club'.

The last change has been the creation of the Australasian Institute of Clinical Governance (AICG), a Division of HEAL, to enable a broad suite of educational activities to be provided under the one general concept of Clinical Governance.

Acknowledgements

To celebrate the rich history of Health Education Australia Ltd (HEAL) we acknowledge this organisation's former names; the Victorian Medical Postgraduate Foundation (VMPF) and the Melbourne Committee for Postgraduate Work. The latter was founded by the Council of the Victorian branch of the British Medical Association (BMA) on 20 February 1920.

Throughout our 100 year history we have supported thousands of medical practitioners to achieve their learning needs and professional development. Particularly notable achievements include the establishment of what has now become the Therapeutic Guidelines (TGL), the Postgraduate Medical Council of Victoria (PMCV) and the recent launch of the Australasian Institute of Clinical Governance (AICG).

Today, 20 February 2020, we are a national not-for-profit organisation that supports a broad vision for all health professionals: improving healthcare through innovative education.

It is impossible for me to acknowledge everyone involved in the organisation over the last century. I do extend my sincere and heartfelt thanks to every single person that has crossed our path and added value to an astonishing history of successes.

For this project, I provide my gratitude to the HEAL Board of Directors, who provide governance and unwavering support and the HEAL staff who make it all possible. Specifically, I would like to thank our most recent past Executive Director, Ms Ann Dancer, our Medical Advisor (and former Director) Professor Robert Moulds,

our Marketing Manager, Ms Liana Moule and last but not least, our current CEO, Ms Beverley Sutton for crafting our history into a booklet, web timeline and an amazing wall timeline in the foyer of our new offices and training rooms, for all to enjoy.

Professor Harvey Newnham
Chair, HEAL Board of Directors



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