



# 20

## ANNUAL REPORT

# 22

CICM (College of Intensive Care Medicine) acknowledges and pays respect to the Traditional Custodians of the lands across Australia on which our members live and work, and to their Elders, past and present. We pay respect to the Wurundjeri Peoples as the Traditional Custodians of the land on which CICM's office stands. CICM acknowledges Māori as tangata whenua and Treaty of Waitangi partners in Aotearoa New Zealand

# PRESIDENT'S REPORT

Tēnā koutou katoa / Wominjeka umarkoo-  
(Hello to you all),



**Rob Bevan**  
*President*

## THE YEAR IN CONTEXT

I am honoured to present the President's Report which covers the events of Jan-Dec 2022, my first in the role of CICM President. I would first like to congratulate Mary Pinder for her tremendous leadership as President over the last two years. Whilst it's tempting to use words such as 'overshadowed' and 'dominated' when describing the effect of the pandemic on her term, I believe it's more important to reflect on how her leadership enabled our College to deliver training, assessment and play a part in achieving unprecedented traction for our speciality through advocacy.

Words alone cannot adequately convey how much we have all valued Mary's contribution during this period: She has brought a calm, determined, humble, collaborative and kind style. I'm grateful for her ongoing advice as the Immediate Past President on the Board and Executive Committee.

Whilst the wave of COVID respiratory illness receded from our ICUs, the logistics of facing the challenges of unprecedented demand, alongside the backlog of 'planned care' was exhausting.

For those in Australia, a year of political change and healthcare demand were compounded by extreme weather events - especially the fatal flooding in NSW and QLD. In Aotearoa New Zealand, the final realisation of significant investment in ICU services was tempered by the uncertainty which accompanied a 'whole of healthcare system overhaul'.

I'd like to congratulate everyone who worked tirelessly on both sides of the Tasman to ensure that momentum was maintained.

Staff turnover was high across both the 'not-for-profit' as well as the commercial sector in Australia. Our College had a turnover consistent with the rest of the sector, which meant we said goodbye to several experienced staff members whilst welcoming many more to our College.

## COLLEGE STAFF AND BOARD

**I want first of all to thank the College Staff, Board, Examiners and Committee members for all you have done during 2022.**

There was significant flux to all of the above groups. Firstly, the Board were delighted to appoint Daniel Angelico into the permanent position of CEO. Having joined the College in 2006, Daniel has developed through the roles of Administrative Assistant, General Manager of Training, and Acting-CEO. Daniel's calm, collaborative style sets a positive culture as we (Trainees, Fellows and Staff) grow together as a College.

I wish to congratulate Peter Kruger and Priya Nair as they were elected to the positions of Vice President and Treasurer, respectively. We welcomed Steve McGloughlin as our new Elected Board Member, Paula Lister as our Paediatrics Representative, and Cara Moore as our New Fellows Representative.

We sadly said goodbye to Nicky Dobos as the outgoing New Fellows Representative, and I thank her for her considerable contribution.

It was with profound sadness that we learned of the death of Andrew Hilton at the beginning of the year. He cared deeply about his patients, trainees and colleagues. This was always evident as he performed his many roles with the College: Supervisor of Training, Elected Board member, Censor, as well as the unofficial roles of mentor and friend to so many.

We sadly bid farewell to several staff members over the year; I want to specifically mention Kayla Hargood and Frieda Keo, who contributed to our College over many years. On the other hand, we welcomed several new staff to the College who bring a wealth of talent and experience.

The Board have undertaken a proactive approach to ensuring we do what we can to enhance retention, remain competitive, and embed processes to mitigate loss of institutional knowledge as we navigate through turbulent times.

## ACHIEVEMENTS

### Our Fellows

There was Royal recognition for the outstanding contributions of Professors Peter Morley and Imogen Mitchell, who were made Members of the Order of Australia. I wish also to congratulate Professors Rinaldo Bellomo and Jamie Cooper who received the GSK Research Excellence Award.

### AMC Accreditation

In November, we were informed of the decision that CICM had been re-accredited by the AMC/MCNZ for the maximum term. The process was a monumental effort from Staff, Board, Committee members, Fellows and Trainees, with several commendations on our current program, and valuable recommendations for future development. This is a huge achievement by all, and means we meet the exacting standards set for all Colleges - most of whom are much bigger than us. I would like to say a big thank you to all who were involved, but a special thanks to Jackie Tunnecliff our Education Advisor, and our DPAs - Bruce Lister and Felicity Hawker.

### An in-person ASM at long last

The 2022 ASM was held in Wellington. Congratulations to all who were involved in making the scientific and social programs a success, including our overseas speakers who travelled to Aotearoa New Zealand from Canada and the UK. A highlight of the ASM was the opportunity to congratulate 80 graduands (and some of their children) across the stage at the CICM dinner. It's difficult to convey how incredible it felt to be able to congratulate them in-person on behalf of us all.

The CICM Medal was awarded to Dr Ross Freebairn for his enormous and ongoing contribution to our speciality - specifically in promoting and delivering ICM Education across the globe. His oration was inspiring and included a deserved standing ovation for Dr Mary Pinder when he acknowledged her leadership as CICM President over the last two difficult years.

### College Premises

Having been out-bid in the auction for Greville Street in 2018, the Board explored the notion of a new build, with a vision to co-locate with ANZICS. This year was the culmination of that

process when we completed the purchase of our own property in Prahran, Melbourne. By the end of 2022, preparations were well underway to fit-out a space whilst navigating the logistics of moving home.

### External Collaboration

We've developed strong relationships externally; with other Colleges via CMC/CPMC, ANZCA on Dual training, FICM in the UK, and actively contributed to the AMA forum on Climate Change and Sustainability.

Special mention goes to our work with ANZICS to effectively advocate for our patients through policy submissions, political/media advocacy and global health initiatives. The year saw the culmination of negotiations to sell a floor of the new building to ANZICS, which was a big deal for both organisations. I want to thank Gian, Mark, and all of the ANZICS team for their efforts to build relationships and make this a reality.

## BEREAVEMENTS

In addition to Andrew Hilton, we were devastated to hear of the deaths of Su Winter and Paul B Ritchie. Su made a huge contribution as an Intensive Care Specialist and Anaesthetist, Colonel in the Australian Army, and a mother. Su was awarded the Medal of the Order of Australia. She was a mentor, role model and friend to many. Paul was a member of CICM's Welfare SIG and a valued colleague and friend. My thoughts are with all of you who have been affected by their deaths.

## TO CLOSE

So to summarise, 2022 was a year of challenge, celebration and sadness. I want to conclude by saying that **our collective achievements in 2022 have only been possible with the contribution from so many of you** – giving your time and energy on top of busy clinical and other life roles is hugely appreciated. I am honoured to serve as the President of our College, and look forward to 2023 as a year of new beginnings, challenges and opportunities that we can work through together.

*Kia Kaha.*

## CEO REPORT

This is my first report to members after being officially appointed as the permanent CEO of our College. I feel fortunate to be leading this organisation, as it allows me to learn from the talented group of staff, Fellows, and trainees who are not only shaping the direction of our College but, our specialty.



**Daniel Angelico**

*Chief Executive  
Officer*

The College has continued to grow in 2022, with the creation of several new roles, attracting staff with a wide breadth of skills. We have permanently implemented flexible work arrangements, which is a standard part of being a modern workplace. I am pleased that we are no longer in a state of uncertainty with pending lockdowns or changing restrictions. One of the benefits of working through COVID was learning the life skill of being adaptable and comfortable in situations that are unfamiliar. I cannot overstate the gratitude I have for our staff; they made a congested 2022 very manageable and continue to make it enjoyable to come into the office.

There were some significant achievements in 2022. A major focus was the preparation for the Australian Medical Council (AMC) and Medical Council of New Zealand (MCNZ), with their official accreditation visit taking place in April. Our training and continuing professional development programs were accredited for a further six years, with the opportunity to apply for an extension in 2029, taking us through to 2033. This is the maximum period of accreditation granted to any specialist college. This review involved several Board and committee members, Fellows, trainees, and staff, with particular thanks going to our Education Advisor, Jacqueline Tunnecliff, who guided us to this fantastic achievement.

Of course, we have areas to work on. There are aspects of education, assessment, and business that continue to evolve, it is important for us to maintain a growth mindset. I was recently told that intensive care is a team sport, those words ring true, I have always viewed the College as “we,” so involving our members in the evolution of our College is our focus.

This is particularly evident in how we are supported by our Supervisors of Training, Directors, and Examiners, who are the custodians of the training program. The relationship between our staff and the members in our units, who are

delivering the program, is important to us. We will continue to build on these relationships to ensure we deliver the best possible outcomes for our trainees and Fellows.

Our commitment to further training and supporting our supervisors and examiners is evident in the workshops and training opportunities that took place throughout 2022.

In a post-COVID world, we had the opportunity to visit several of our accredited units as part of our Culture Program. The aim was to observe interactions that take place on the floor across Australia and Aotearoa New Zealand. We are now working on understanding the relationship between the culture program, accreditation, and welfare. The learnings from this project will influence positive change in our specialty and to many of our processes.

A key highlight of 2022 was our Annual Scientific Meeting (ASM) in Wellington. This was our first face-to-face ASM in two years, and the first on Aotearoa New Zealand soil since 2013. It was also an opportunity for our community to celebrate the contribution Ross Freebairn has made to intensive care and to the College in his many roles over the years. For those lucky enough to be present at the Graduation ceremony, we witnessed an oration that was delivered with class, humility, and wit.

The acquisition of our first property has been widely publicised, however the rubber hit the road in 2022, after the settlement of our building took place. Finalising the purchase of a commercial property, and then facilitating the sale of Level 1 to ANZICS (Australian and New Zealand Intensive Care Society), was a clear indication that our capabilities have evolved. We are comfortable in aspects of business that go beyond education and assessment. Negotiating with developers, builders, surveyors, lawyers, architects, and lenders highlighted that our organisation has matured, and we have a skilled group of people capable of successfully completing a project of this magnitude.

Another project of considerable size is our ongoing digital transformation, which continued to evolve this year. This work will culminate in an improved member experience, with enhanced security measures to protect the data of members and a way of interacting with the College that we have never seen before.

2022 saw the College make considerable progress in developing our Reflect Reconciliation Action Plan (RAP) that will be implemented in 2023 and beyond. The College is on a journey of understanding, and our RAP is focused on how we function internally. We are also particularly proud of the College's ongoing relationship with Australian Indigenous Doctors Association (AIDA), and the learnings we are getting in terms of supporting our First Nations peoples on the training program as part of a cross-college consortium.

Despite all the positive aspects of 2022, our community was impacted by the passing of our Censor and friend, Andrew Hilton. The impact Andrew had on intensive care was profound, however, we will miss how Andrew was so kind to our staff, showing trust and actively encouraged us to contribute. This was also on display during his interactions with trainees during his tenure as Censor and Chair of the SIMG (Specialist International Medical Graduates) Committee.

Our College is currently being directed by an engaged and supportive Board who continue to be available to our staff. We feel this collaborative partnership is unique in our sector and provides positive results. Our Board has once again been supported by our committees and working parties. The work of the College cannot be done without the commitment of these members.

We saw Mary Pinder complete her tenure as President of the College. In what was arguably one of the most challenging presidencies in our history, Mary was a beacon of positivity and embodied that sense of trust and collaboration mentioned above. Although Mary is no longer President, she continues to be an active Board member, although I will miss our daily Facetime chats!

Although Mary's guidance will be missed, we have been fortunate to welcome Rob Bevan to the role of President. Many of the staff and I have worked with Rob for years, given his long-standing commitment to the College through his tenure on the Board, Education Committee,

and Trainee Committee. We are all grateful for his trust and team-first approach to working with every member of the staff and Board.

Thank you for all the support this year, and here's is to an even bigger 2023.

# TREASURERS REPORT

This Treasurer's report covers the period from January to December 2022, as the College's finances run on the calendar year. 2022 was the year our College transitioned back to normality with core operations returning to pre-COVID activity.



**Dr Priya Nair**

*Treasurer*

The College continuously focused on mitigating any reduction in income by minimising expenditure on activities not directly aligned with our principal activities. However, 2022 was also a year of major investment for CICM with a large financial commitment made on the purchase of 101 High Street, which will act as our new head office. We purchased three levels and on-sold level 1 to ANZICS – no profit was made on this transaction, and we were able to obtain all not-for-profit tax exemptions on purchase and re-sale. Our total financial commitment including fit-out was just over \$9,000,000 and classified as property, plant and equipment in our statutory accounts. Prior to this we were based at 168 Greville street under a lease agreement. The move to our new location aligned with the expiration of the lease arrangement. We also made a substantial investment in Member Digital Platform (MDP) which is our new membership data platform. This new platform allows us to interact with our membership in a more targeted and efficient manner. The total spend for this in 2022 was \$742,000. Our auditors have made the recommended all costs related to MDP be taken up as operating expenses in 2022. This means rather than taking up the cost as a capital item as originally anticipated it adversely impacts our income statement. The actual cash outlay and budget outcome for the project does not deviate in any way.

There are three aspects to the College's finances. The first is our operating income and expenditure, the second is the funds administered on behalf of the Commonwealth Department of Health for the Specialist Training Program (STP), and the third is our investments. Our total operating income for the year (admission, registration, and education fees) was \$6,612,904. This is an increase of 14% on the previous year, the steep increase in revenue due to 2022 being our first year where the impact of the pandemic has been minimal. Other revenue was \$2.1m lower than in 2021. The discrepancy being due the capital loss in 2022 as opposed to a capital gain made in 2021 on our investment portfolio,

as well as Specialist Training Programme (STP) revenue being significantly lower in 2022. Grant Income of \$1,358,022 relates to STP, the majority of the funds are distributed as salary support to the 17 intensive care training positions funded through STP. The College has further signed an Agreement with the Department of Health to deliver the STP program, with the duration of the agreement being four years from 2022-2025. Project income of \$406,029 relates to Flexible Approach to Training in Expanded Settings (FATES).

Our operating expenditure (excluding STP and FATES) for the year was \$7,498,000, a 25% increase of \$1.5m from 2021. Of this, \$742,000 relates to MDP implementation costs, the balance being in travel and meeting costs, this being due to activity returning to pre pandemic levels. Employee benefits expense of \$2,666,244 was in line with 2021. We continued to make significant investment in our staff, bringing our salaries in line with market expectations and conditions in 2021, and again in 2022 with further investment expected in 2023. Staff attrition was the reason we were able to keep this cost in line with 2021, this is expected to significantly increase in 2023. We understand that staff retention and increasing salaries is going to be a challenge in 2023 and is a key area of focus for CICM.

The result from operating activities of the College for the year ended 31 December 2022 amounted to a deficit of \$975,299. This result comprised of \$742,000 related to MDP, a further \$300,000 related to acceleration of depreciation in relation to our legacy software, and \$719,478 related to capital loss of our investment portfolio. If we back these figures out operationally, CICM would have operated at a surplus of just over \$750,000. This is in line with our benchmark of a net surplus between 5-10% of operating income.

We as a Board again took it upon ourselves to continually monitor our internal operations through the process of internal audit and the CICM finance and risk management committee. In 2022

we undertook two reviews. The first being a review of our payroll function, and the second being the treatment of GST across all fees we pay as members. This is an extension to our organisational continuous improvement focus, as well as strengthening our governance process.

Our investment portfolio with Credit Suisse performed quite poorly. This was however, in line with market conditions and the world economy. The decrease in the value of our investment portfolio from 2021 was \$719,478. The College generated interest income of \$39,294 and dividends of \$127,767. As at 31 December 2022, the College had total net assets of \$11,082,928, a decrease of \$975,299 for the year.

CICM has made a significant commitment to two major projects. Both these commitments have come with a solid financial commitment. We have strong financial rigour around our future commitments and will meet our financial obligations through a mix of debt and current reserves.



## CICM BOARD

The CICM Board and their portfolios as of 31 December 2022.

<b>Rob Bevan</b>	<i>President</i>
<b>Peter Kruger</b>	<i>Vice President and Chair, Hospital Accreditation and Chair Fellowship Affairs</i>
<b>Priya Nair</b>	<i>Treasurer</i>
<b>Mary Pinder</b>	<i>Immediate Past President and Deputy Chair, Education and ASM Officer</i>
<b>Neil Orford</b>	<i>Deputy Censor and Deputy Chair, Hospital Accreditation</i>
<b>Nhi Nguyen</b>	<i>Censor</i>
<b>Jeremy Cohen</b>	<i>Chair, Assessments</i>
<b>Penny Stewart</b>	<i>Chair, Rural Committee and Chair, Indigenous Health Committee</i>
<b>Martina Zib</b>	<i>Chair, Education</i>
<b>Steve McGloughlin</b>	<i>CPD Officer and Research Officer</i>
<b>Cara Moore</b>	<i>New Fellows Representative and Chair, Trainee Committee</i>



**Andrew Hilton**

## VALE – Andrew Hilton

*Written by Dr Mary Pinder, Immediate Past President*

On behalf of the CICM Board and Staff, I would like to honour the life and work of Andrew Hilton and acknowledge the immeasurable impact he has had on the lives of so many. Andrew was a much loved and respected clinician, mentor, educator, colleague and friend.

Andrew's work with the College has included the roles of Supervisor of Training, Board member and College Censor. Andrew was a wonderful advocate for Trainees, Fellows and applicants to our College and a great contributor to Board discussions. We valued his wisdom, his thoughtful, measured and fair decisions, his common sense, and his compassion and kindness. Andrew made significant, lasting improvements to our College processes. His death came too early and left a massive hole in our College, our ICU community and our hearts.

*Vale Andrew.*

## REACCREDITATION UPDATE

In 2022, the College concluded the reaccreditation process with the Australian Medical Council (AMC) and Te Kaunihera Rata O Aotearoa Medical Council of New Zealand (MCNZ) for the training and continuing professional development programs in intensive care medicine.

The College was successful in achieving accreditation for the training programs in general and paediatric intensive care medicine for the purposes of attaining specialist registration in both Australia and Aotearoa for the maximum achievable period of six years, subject to satisfactory monitoring submissions.

The College received several commendations for the training and continuing professional development programs, as well as conditions which will enable it to continue to enhance its quality. The College thanks Fellows, trainees, and staff for their valued and important contributions to the reaccreditation process.



# TRAINING

## CENSORS COMMITTEE

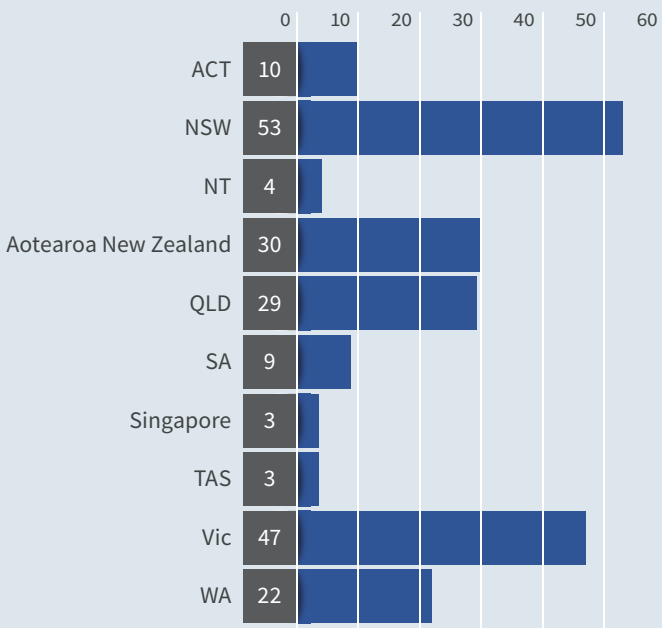
The Censor portfolio encompasses many key areas of the training program, including trainee selection, SIMG assessment and training program regulations. The Censors Committee, chaired by the Censor, Dr Nhi Nguyen, continued their work in this area throughout 2022.

The Committee continued to review requests which fall outside of the College regulations from trainees and SIMGs. Additionally, requests for Transition Year roles from units and trainees alike were reviewed with 15 positions reviewed in the year.

The work of the Censors Committee is supported by Fellows and community representation from Australia and Aotearoa New Zealand, who assist in aspects of trainee selection and SIMG assessment. The College thanks the Censors Committee and all who supported their functions in 2022.

### 2022 stats

- » 210 new trainees selected onto the training program



- » 19 SIMG assessments completed – 17 in Australia and 2 in Aotearoa New Zealand
- » 15 Transition year roles reviewed.

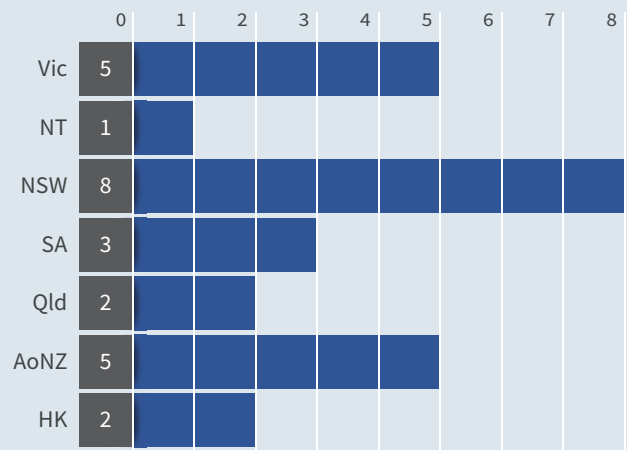
## HOSPITAL ACCREDITATION

2022 provided the first opportunity in two years for the Hospital Accreditation Committee to inspect units more freely since the beginning of the pandemic. As a result, the Committee progressed many inspections which had to be deferred due to the border and travel restrictions in place prior.

HAC (Hospital Accreditation Committee) inspections would not be possible without the efforts of our current and past Board members who work as Lead Inspectors, as well as the many local Fellows and trainees who volunteer their time to form the inspection team. The College thanks the HAC, its Chair A/Prof Peter Kruger, and everyone involved in the Hospital Accreditation process in 2022.

### 2022 HAC stats

- » 26 units inspected across Australia, Aotearoa New Zealand, and Hong Kong of which:
  - 17 units maintained their existing accreditation
  - 2 units regained accreditation
  - 3 new units were inspected (including 1 new unit for the anaesthesia rotation and 1 affiliated unit)
  - 1 unit lost accreditation
  - 2 units successfully applied for increased level of accreditation.
- » 12 progress reports were received.
- » Breakdown of inspections by location:



## TRAINEE COMMITTEE

The Trainee Committee continued their work as a pivotal College committee in 2022 and had a successful and busy year, contributing to key College policies and discussions. Trainee welfare and examinations continued to be a priority. The in-person Trainee Symposium at the 2022 ASM in Wellington was a success, and it was realised how much the in-person engagement with peers and colleagues was missed.

The College would like to thank all Trainee Committee members, past and present, who work incredibly hard to ensure all trainees are represented fairly and provided valuable insight to the day-to-day life of a CICM trainee. Additionally, we want to thank Chair Nicola Dobos for steering the Trainee Committee and providing valuable guidance during her term as New Fellows representative. We look forward to continuing to work with Cara Moore, who was elected as the New Fellows representative in 2022.

## SPECIALIST TRAINING PROGRAM (STP)

The College has administered 17 FTE (Full Time Equivalent) training posts and 0.33 FTE Supervisory posts under the Commonwealth Department of Health's Specialist Training Program (STP). The program provides vocational training opportunities for specialist registrars in settings outside of traditional metropolitan teaching hospitals, including regional, rural, and remote and private facilities. The College has successfully achieved STP training post and supervisory post targets stipulated by the Department in 2022 as follows:

<b>STP Placements and Salary Support</b>	14 FTE
<b>Rural Support Loading (RSL)</b>	6 FTE
<b>Private Infrastructure Clinical Supervision (PICS)</b>	8 FTE
<b>Integrated Rural Training Pipeline-STP (IRTP-STP)</b>	2 FTE
<b>Tasmanian Project</b>	1.33 FTE

The College has also engaged in delivery of following educational support projects in 2022:

1. BASIC Clinical Research Course
2. ECHO training for STP funding training posts located within MM2-7

In addition to the STP Grant, the College was awarded with Flexible Approach to Training in Expanded Settings (FATES) grant funding in 2022, to develop the WA Intensive Care Training Pathway (WAICTP). The WAICTP aims to promote rural training and provide networked training pathway for intensive care medicine trainees with the opportunity to access training rotations, education, and support across metropolitan and rural health services in WA. The College has subcontracted WA Country Health Service (WACHS) to undertake WAICTP project, and the grant project is scheduled to be completed in July 2023.

# EXAMINATIONS

College Examinations would not be possible without the work of the Assessments Committee and the relevant Examination Committees. We would like to thank all Committee members and examiners. Special thanks to Dr Ros Purcell who, in 2022, finished as Chair of the First Part Exam Committee at the end of 2022 and concluded her time as a First Part Examiner.

## *Assessments Committee Chair*

– Dr Jeremy Cohen

## *First Part Exam Chair*

– Dr Roslyn Purcell

## *Second Part Exam Chair*

– A/Prof Stuart Lane

## *Second Part Paediatric*

### *Exam Chair*

– Dr Johnny Millar

*Congratulations to the following people who passed a College examination in 2022*

## **FIRST PART**

Dr Mohamed Abdelhamid

Dr Nishan Abey Suriya

Dr Felix Anderson

Dr Samuel Anderson

Dr Thileepan Arudshivam

Dr Gunn Atkinson

Dr Angus Banh

Dr Liam Bell

Dr James Bergfield

Dr Indervir Bharj

Dr Philip Boey

Dr Adam Bowman

Dr Kyle Brogan

Dr Ethan Butler Bui

Dr Abbey Chrimes

Dr Daniel Chung

Dr Justin Cohen

Dr Thomas Condon

Dr Emma Cooper

Dr Aurelie Copin

Dr Jacinta Cox

Dr Robin Curran

Dr Zachariah Dawes

Dr Maria de Freitas

Dr Ransika De Silva

Dr Ashley Doyle

Dr Xizi Duo

Dr Andrew Flint

Dr Nicole Foo

Dr Kayla Foord

Dr Hank Fung

Dr Daniel Gaines-Burrill

Dr Thomas Garry

Dr Ajay Gawri

Dr Olivia Gedye

Dr Henrique Gomes Mendes

Dr Alexandra Hardy

Dr Georgia Henry

Dr Ariel Ho

Dr Lisa Hunt

Dr Keegan Hunter

Dr Jane Hutchinson

Dr Yamamah Idrees

Dr Kevin Jan

Dr Kasun Jayasekera

Dr An Jie Wang

Dr Cindy Jin

Dr Mithran

Kathirgamanathan

Dr Andre Kubler

Dr Ross Kung

Dr The Lan

Dr Timothy Law

Dr Yan Yu Stephanie Law

Dr Amadea Lazaro

Dr Daniel Li

Dr Peter Lioufas

Dr Emily Little

Dr Erin Maylin

Dr Laura McDonald

Dr Courtney Meiklejohn

Dr Wesley Meintjes

Dr Dominic Merriott

Dr Tihana Milic

Dr Alice Mizrahi

Dr Jack Murray

Dr Viveka Nainani

Dr Matthew Paltridge

Dr Tarsh Pandit

Dr Benjamin Paul

Dr Adam Pollet

Dr Bianca Rajapakse

Dr Prashant Ranjan

Dr Nathalie Rasko

Dr Raqeeb Rasul

Dr Samuel Reade

Dr Briony Robson

Dr Kirsten Rowcliff

Dr James Roy

Dr Sapphira Rusli

Dr Tamer Saleh

Dr Daniel Schlosberg

Dr Janice Siew

Dr Rachel Smith

Dr William Spencer

Dr Shawn Steckle

Dr Annaliese Stolz

Dr Rosie Sutherland

Dr Senthuran Thillainathan

Dr Emily Treagust

Dr Ryo Ueno

Dr Benjamin Verstandig

Dr Thien-kim Vo

Dr Lucy Wells

Dr Chyna Williamson

Dr Jack Wilson

Dr Cariad Wratten

Dr Carly Wright

Dr Michael Wu

Dr Rachel Yeo

Dr ZhenTi Yong

Dr Jessamine Yong

Dr Benjamin Young

Dr Tarren Zimsen

Dr India Zweng

**SECOND PART  
(GENERAL)**

Dr Taeseon Shin  
 Dr Nicholas Ryan  
 Dr James Basha  
 Dr Mandira Chakraborty  
 Dr Yin Kwan Esther Cham  
 Dr Lee Yen Ching  
 Dr Jessica Dean  
 Dr Eamonn Deverall  
 Dr Ashok Elangovan  
 Dr Wendy Henderson  
 Dr Haitham Jassim  
 Dr Hae Won Jo  
 Dr Nihal Shekhar Kumta  
 Dr Alice Magniac  
 Dr Natasha Mansell  
 Dr Abby McArthur  
 Dr Claire Michel  
 Dr Khairil Asyraf Bin Musa  
 Dr Alexander Nesbitt  
 Dr Samuel Orton  
 Dr Jose Pereira  
 Dr Michael Pittard  
 Dr Jack Purcell  
 Dr Muhammad Habibullah Rana  
 Dr Jean Sandig  
 Dr Ravinesh Singh  
 Dr Hannah Smeele  
 Dr Christina So

Dr Kogulan Sriranjani  
 Dr Carlos Stephenson  
 Dr Selvaraj Subramaniam  
 Dr Sharifah Syed Mustaffa  
 Dr James Hoon Bui Then  
 Dr Alexandra van Rijn  
 Dr Benjamin White  
 Dr Nicholas Wilson  
 Dr Muhammad Manzoor  
 Dr Anthony Ryan  
 Dr Peter Allan  
 Dr Vivekanand Rajendran  
 Dr Teresa Wong  
 Dr Mathanhi Jegatheeswaran  
 Dr Peta Mary Jones  
 Dr Shreepad Asundi  
 Dr Anand Joshi  
 Dr Ben Baldacchino  
 Dr Kirstin Coggins  
 Dr Timothy Webber  
 Dr Manohar Nempu  
 Manjunath Bhat  
 Dr Lucy Dockrell  
 Dr Narayana R. Satyavolu  
 Subramanya  
 Dr Yvett Low  
 Dr Richard Mooney  
 Dr Charlotte Brace  
 Dr Jeremy Smith  
 Dr Joshua Thia  
 Dr Simon Baylis

Dr Ramanathan Moorthy  
 Dr Yaodong Tang  
 Dr Jonathan Messing  
 Dr Ravi Varma Durai Pandian  
 Dr Julia Moore  
 Dr Ruth Paterson  
 Dr Mark Collins  
 Dr Matthew Musker

**SECOND PART  
(PEADIATRICS)**

Dr Manjiri Tule  
 Dr Rugambwa Muhame  
 Dr Tessa Kennedy  
 Dr Sharlene Butler  
 Dr Maryanne Holmes  
 Dr Megan Nettleton  
 Dr John J. McAweeney  
 Dr Padmavathy Venkatasubbu  
 Dr Beyra Rossouw  
 Dr Charles Larson  
 Dr Pravin Babhalgaonkar  
 Dr Angela Aramburo  
 Dr Oluwatoyin Yetunde Odutolu  
 Dr Sean Blackall  
 Dr Jessica Symons

# SUPERVISORS OF TRAINING

The College values the immense and vital contribution that Supervisors of Training make in guiding trainees and facilitating their learning as they progress towards becoming intensive care medicine specialists. To support Supervisors of Training, the College held workshops online and face-to-face in 2022. This included feedback, the Supervisor's role, workplace-based assessments, and the trainee needing more support. The Adelaide workshop in September was the first held face-to-face since the beginning of the pandemic and provided a wonderful opportunity for Supervisors to network.

## **2022 SOT (Supervisors of Training) stats**

New SOTs - 29

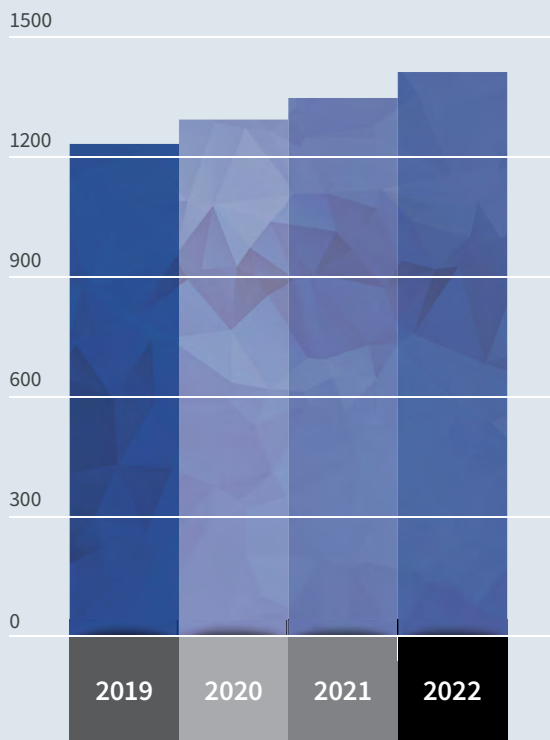
Total SOTs - 269



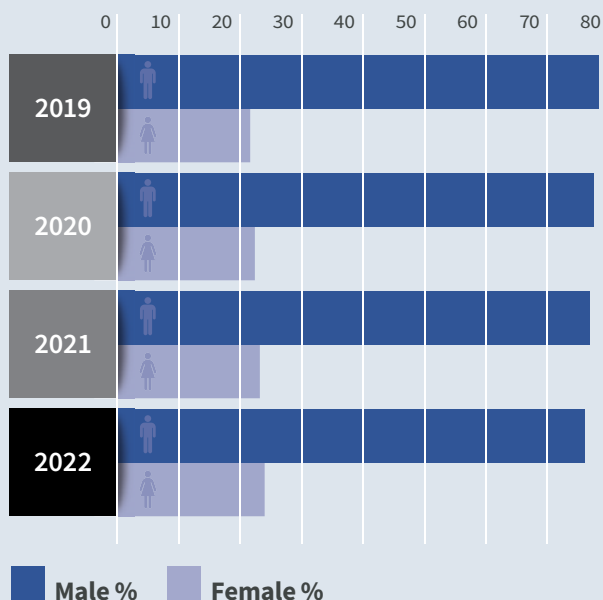
# FELLOWS

## FELLOW STATS 2022

In 2022 our Fellowship grew to 1413. The percentage of female Fellows increased to 24%



Total fellows per year



## CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

On the 30 July 2021, Medical Board of Australia released the revised ‘Continuing Professional Development (CPD) Registration Standard’, effective 1 January 2023.

A focus of the Board, CPD Committee and Fellowship Affairs Committee in 2022 was planning for the changes to the CPD program and working closely with the IT team to ensure that the new member platform and CPD program changes are aligned.

The College also supported Fellows to meet the requirements of the 2021-2022 CPD cycle which ended on 31 December 2022.

The College thanks CPD Officer Dr Nhi Nguyen who has provided support and guidance navigating these changes, and looks forward to continuing this work with Dr Steve McGloughlin who was appointed CPD Officer during 2022.

## 2022 NEW FELLOWS

We congratulate the following people on achieving their FCICM in 2022

Dr Cameron Anderson	Dr Stephanie Judge	Dr Laurie Showler
Dr Marija Apostoloska	Dr Sean Kelly	Dr Jack Simpson
Dr Sara Arcioni	Dr Ji Seon Lee	Dr Christof Slawomirski
Dr Ben Baldacchino	Dr Mervyn Leong	Dr Selvaraj Subramaniam
Dr Jonathan Ball	Dr Rachel Lister	Dr Rahul Tambade
Dr Shreerupa Basu	Dr Aidan Magee	Dr Robert Tamblyn
Dr Jonathan Begley	Dr Ailbhe McAlister	Dr Sau Ki Tong
Dr Gregory Brogan	Dr Ronan McKeague	Dr Dushyant Tripathi
Dr Andrew Carr	Dr Manohar Nempu Manjunath Bhat	Dr Yi-lun Tsai
Dr Alastair Carr	Dr Rohit Paliwal	Dr Deshani Walisundara
Dr Claire Corrigan	Dr Prakkash Parangi Ananthan	Dr Victoria Ward
Dr Bride Cruickshank	Dr Shaun Parish	Dr Charlotte Williams
Dr Daniel De Wit	Dr Rebecca Pearce	Dr Elizabeth Winson
Dr Maria De Los Angeles Dri	Dr Yannick Planche	Dr Alice Young
Dr Amr Elrakaiby	Dr Jennifer Porteous	
Dr Sophie Fincher	Dr Gayathri Premkumar	
Dr Anna Fisher	Dr Prashant Pruthi	
Dr Jennifer Gaffney	Dr Brooke Riley	
Dr Krunal Gajjar	Dr Beyra Rossouw	
Dr David Gale	Dr Rebecca Rowley	
Dr Neil Glassford	Dr Anthony Ryan	
Dr Tobias Gonzenbach	Dr Amy Sanguesa	
Dr Wendy Henderson	Dr Narayana Satyavolu Subramanya	
Dr Edward Heydon	Dr Mohamed Mubarak Shaik Kidur Mohideen	
Dr Thomas Hughes		
Dr Yves Ineza		

# INDIGENOUS HEALTH

To support our strategic initiatives, the College with the support of the Indigenous Health Committee progressed various activities in 2022. The Indigenous Health Committee appointed Christopher O'Brien to the committee as an Aboriginal Community Representative and in 2023, a focus will be on appointing a Māori Community Representative onto the committee.

In conjunction with Abstarr Consulting, two projects commenced. These included the development of Aboriginal and Torres Strait Islander Health and cultural safety within the training program curriculum framework, and the development of online resources in Aboriginal and Torres Strait Islander Health and cultural safety. The online resources will launch in 2023. Formal engagement with TeORA regarding the cultural safety training plan for vocational medicine in Aotearoa New Zealand also commenced.

The College has committed to ensuring that at least 5% of the content of the Annual Scientific Meeting has a First Nations and Māori focus. The College presented a workshop on Rapid Cycle Deliberate Practice for Advanced Life Support at the AIDA conference in October that was well received. Members also represented CICM at the "Growing our Fellows" workshop, in which medical students and junior doctors were able to learn about becoming an Intensive Care specialist. Dr Karen Nicholls (AIDA specialist trainee support) provided an online education session on supporting Indigenous trainees.

The College led a joint webinar presented with the Faculty of Intensive Care Medicine (UK) on Indigenous Health and Intensive Care.

The College also supported NAIDOC week and National Reconciliation Week through social media and encouraged members to share their activities and commitments.

The College thanks the Indigenous Health Committee, in particular, Chair Dr Penny Stewart, and everyone involved in supporting the College's progress in these important initiatives.



# REFLECT RECONCILIATION ACTION PLAN

Based on advice from Reconciliation Australia and the learnings taken from the previous Reflect Reconciliation Action Plan (RAP), the College established a new RAP Working Group. The working group is made up of CICM staff from across the various departments, as well as Board members. Christopher O'Brien (Aboriginal Community Representative on both the Community Advisory Group and Indigenous Health Committee) also joined the working group and provided invaluable input and advice.

The draft Reflect RAP was presented to the Board, Indigenous Health Committee members and the Senior Leadership Team and was submitted to Reconciliation Australia in December 2022. The College will continue to progress its Reflect RAP in 2023 and seek continued advice from Reconciliation Australia.



# ANNUAL SCIENTIFIC MEETING (ASM) WRAP UP

The 2022 CICM Annual Scientific Meeting (ASM) was held on 8-11 September. It was the first in-person ASM since Cairns in 2019 and was held at The Museum of New Zealand Te Papa Tongarewa, located in Aotearoa New Zealand's Capital City Te-Whanganui-a-Tara/Wellington.

With the conference originally planned for 2020, the theme Critical Care Chronic Disease & Cancer: Impossible Mission? was well-received. We had the pleasure of being joined by Professor Diana Sarfati, Director-General Health, 3 international speakers, and a further 22 speakers from Australia and Aotearoa New Zealand.

Being the first Face-to-face ASM since 2019, we were thrilled with the total number of 325 registrations and the support of 2 Platinum Sponsors: Pfizer and Fresenius Medical, 1 Gold Sponsor: GE Healthcare with 17 additional exhibitors.

As a College, together with family and friends, we had the opportunity to celebrate and congratulate 82 Graduands at our ASM Graduation and Dinner, which is our biggest graduation ceremony to date. We honoured past-President, Associate Professor Ross Freebairn for his significant contribution to the College and the profession of Intensive Care Medicine, by awarding him with the College Medal.

A special thanks to the organising committee from 2020 and 2022.

## *Co-Conveners*

**Dr Robert Bevan & Dr Ben Barry**

## *Committee*

**Dr Rebecca Smith**

**Associate Professor Ross Freebairn**

**Dr Debbie Chalmers**

**Dr Nia Wyn Davies**



# AOTEAROA NEW ZEALAND NATIONAL COMMITTEE

The College would like to acknowledge Dr Andrew Stapleton for his commitment and leadership during his term of four years as chair of the committee, particularly through the COVID-19 pandemic.

The College would also like to acknowledge the guidance and advice of outgoing committee Geoff McCracken and Charlotte Brace.

In 2022, the committee made a commitment to improving our own understanding of Te Tiriti o Waitangi and cultural safety. A special mention goes to Alex Browne for his commitment and mahi for Hauora Māori, health equity, cultural capability, and cultural safety.

Charlotte Brace achieved excellent work in bringing Aotearoa New Zealand trainees together. Chris Poynter also brought high enthusiasm and expertise. This led to an incredibly successful Aotearoa New Zealand training day in Tāhuna Queenstown, which will be annual event. Curtis Walker from MCNZ attended as a keynote speaker and spoke to health inequity in Aotearoa New Zealand. President Rob Bevan was there to give an overview of current activities and priorities from the College and answer any questions attendees had.

The College also had crucial representation from Andrew and Rob to the Critical Care Sector Advisory Group at the Ministry of Health, and provided advocacy and influence regarding the investment of \$500 million to advance to speciality of intensive care in Aotearoa New Zealand. This has resulted in 26 new ICU beds, but more importantly, advancing a truly modern model of care across our nation's intensive care units, particularly for the smaller rural and regional units.

For 2022, we look forward to progressing the priorities of the committee under the leadership of incoming Chair, Dr Jonathon Albrett

## AOTEAROA NEW ZEALAND COMMITTEE

<b>Andrew Stapleton</b>	<i>Chair</i>
<b>Geoff McCracken</b>	<i>Elected Member</i>
<b>Jonathan Albrett</b>	<i>Elected Member</i>
<b>Louise Hitchings</b>	<i>Elected Member</i>
<b>Chris Poynter</b>	<i>Elected Member</i>
<b>Charlotte Brace</b>	<i>Aotearoa New Zealand Trainee Representative</i>
<b>Rob Bevan</b>	<i>Ex-Officio Board Member</i>
<b>David Silverman</b>	<i>New Fellows Representative</i>
<b>Jonathan Casement</b>	<i>Co-opted Member</i>
<b>Alex Psirides</b>	<i>Co-opted Member</i>
<b>Alex Browne</b>	<i>Co-opted Member</i>
<b>Anusha Ganeshalingham</b>	<i>Co-opted Paediatric Representative</i>

## STATE AND TERRITORY COMMITTEES

The College would like to acknowledge the contribution and engagement of the State and Territory Committees. From running events, to meeting the needs of Fellows and trainees, providing invaluable input to College policies and discussions, progressing advocacy on State and Territory based issues and promotion of Intensive Care Medicine. The committees are essential of connecting local members to the College.

### MEMBERSHIP OF STATE AND TERRITORY COMMITTEES 2022

#### AUSTRALIAN CAPITAL TERRITORY COMMITTEE

<b>Bronwyn Avard</b>	<i>Chair</i>
<b>Manoj Singh</b>	<i>Deputy Chair</i>
<b>Malli Ponnu</b>	<i>Elected Member</i>
<b>Lisa McDaid</b>	<i>ACT Trainee Representative</i>
<b>Liam Byrne</b>	<i>New Fellows Representative</i>

#### NEW SOUTH WALES COMMITTEE

<b>Sarah Wesley</b>	<i>Chair</i>
<b>Manoj Saxena</b>	<i>Deputy Chair</i>
<b>Lachlan Donaldson</b>	<i>Elected Member</i>
<b>Judith Askew</b>	<i>Elected Member</i>
<b>Kylie McArdle</b>	<i>Elected Member</i>
<b>Steve Morgan</b>	<i>Elected Member</i>
<b>Alice Henschke</b>	<i>New Fellows Representative</i>
<b>Tessa Kennedy</b>	<i>Paediatric Representative</i>
<b>Mark Nicholls</b>	<i>ANZICS Representative</i>
<b>Danielle Austin</b>	<i>ANZICS Representative</i>
<b>Jaimie Henry</b>	<i>NSW Trainee Representative</i>
<b>Nhi Nguyen</b>	<i>Ex-Officio Board Member</i>
<b>Priya Nair</b>	<i>Ex-Officio Board Member</i>
<b>Martina Zib</b>	<i>Ex-Officio Board Member</i>

#### NORTHERN TERRITORY COMMITTEE

<b>Brad Treloar</b>	<i>Elected Member</i>
<b>Lewis Campbell</b>	<i>Elected Member</i>
<b>TBC</b>	<i>NT Trainee Rural Representative</i>
<b>Resy Van Beek</b>	<i>NT Trainee Representative</i>
<b>Penny Stewart</b>	<i>Ex-Officio Board Members</i>

#### QUEENSLAND COMMITTEE

<b>Vikram Masurkar</b>	<i>Chair</i>
<b>Shane Townsend</b>	<i>Deputy Chair</i>
<b>Dave Pearson</b>	<i>Queensland Pathway Representative</i>
<b>Neeraj Bhadange</b>	<i>Elected Member</i>
<b>Melita Trout</b>	<i>Elected Member</i>
<b>Michael Putt</b>	<i>Elected Member</i>
<b>Paula Lister</b>	<i>Elected Member</i>
<b>Kyle White</b>	<i>New Fellows Representative</i>
<b>Antoinette Daylight</b>	<i>Aboriginal Representative</i>
<b>Marc Ziegenfuss</b>	<i>Co-opted State-wide Intensive Care Network Representative</i>
<b>Mahesh Ramanan</b>	<i>Co-opted Research Representative</i>
<b>Daniel Obute</b>	<i>QLD Trainee Representative</i>
<b>TBC</b>	<i>QLD Transitional Year Trainee Representative</i>
<b>Jeremy Cohen</b>	<i>Ex-Officio Board Member</i>
<b>Peter Kruger</b>	<i>Ex-Officio Board Member</i>

**SOUTH AUSTRALIA COMMITTEE**

<b>Michael Farquharson</b>	<i>Chair</i>
<b>Rangan Joshi</b>	<i>Deputy Chair</i>
<b>Steve Lam</b>	<i>Elected Member</i>
<b>Vishwanath Biradar</b>	<i>Elected Member</i>
<b>Nikki Yeo</b>	<i>Elected Member</i>
<b>Amy Chapman</b>	<i>SA Trainee Representative</i>
<b>Aniket Nadkarni</b>	<i>Co-opted Member</i>
<b>Lisa-Marie Pereira</b>	<i>Co-opted Member</i>
<b>Luke Collett</b>	<i>Co-opted New Fellows Representative</i>
<b>Milind Sanap</b>	<i>Co-opted representative, Lyell McEwen Hospital</i>
<b>John Raj</b>	<i>Co-opted representative, Queen Elizabeth Hospital</i>

**TASMANIA COMMITTEE**

<b>Matthew Spotswood</b>	<i>Chair</i>
<b>Benoj Varghese</b>	<i>Elected Member</i>
<b>Michael Ashbolt</b>	<i>Elected Member</i>
<b>Samual Marshall</b>	<i>TAS Trainee Representative</i>
<b>Vikram Patil</b>	<i>Immediate Past Chair</i>

**VICTORIA COMMITTEE**

<b>Cameron Knott</b>	<i>Chair</i>
<b>TBC</b>	<i>Deputy Chair</i>
<b>Cara Moore</b>	<i>Elected Member, New Fellows Representative</i>
<b>Sarah Yong</b>	<i>Elected Member</i>
<b>Sarah Jones</b>	<i>Elected Member</i>

<b>Wisam Albassam</b>	<i>Elected Member</i>
<b>Nicky Dobos</b>	<i>Elected Member</i>
<b>Sheena Gune</b>	<i>Co-opted Paediatric Representative</i>
<b>John Botha</b>	<i>ANZICS Representative</i>
<b>Robert Short-Burchell</b>	<i>VIC Trainee Representative</i>
<b>Neil Orford</b>	<i>Ex-officio Board Member</i>
<b>Steven McGloughlin</b>	<i>Ex-officio Board Member</i>
<b>Shyamala Sriram</b>	<i>Immediate Past Chair</i>

**WESTERN AUSTRALIA COMMITTEE**

<b>Michelle Ross-King</b>	<i>Chair</i>
<b>Chris Allen</b>	<i>Elected Member</i>
<b>Vincent Chan</b>	<i>Elected Member</i>
<b>Dave Baguley</b>	<i>Elected Member</i>
<b>Anton Leonard</b>	<i>Elected Member</i>
<b>Adam Howard</b>	<i>Elected Member</i>
<b>Julian Sunario</b>	<i>New Fellows Representative</i>
<b>Katherine Douglas</b>	<i>Paediatric Representative</i>
<b>Ashleigh Drury</b>	<i>WA Trainee Representative</i>
<b>TBC</b>	<i>Transitional Year Trainee Representative</i>
<b>Jude Bharath</b>	<i>Education Representative</i>
<b>Mary Pinder</b>	<i>Ex-Officio Board Member</i>

## SPECIAL INTEREST GROUPS (SIGs)

The College would like to acknowledge the ongoing engagement and activity of the College's Special Interest Groups and the Fellows who lead these groups. In 2022, the approved SIGs are:

- » Perioperative Medicine
- » Retrieval Medicine
- » Critical Care Ultrasonography
- » Welfare
- » Burns
- » Neurocritical Care
- » Extracorporeal Life Support (ECLS)
- » Environmental Sustainability  
(new SIG formed in 2022)



## COLLABORATORS

We would like to acknowledge the following organisations who we have enjoyed working with throughout the year:

- » Australian and New Zealand Intensive Care Society
- » Australian College of Critical Care Nurses
- » Australasian College of Emergency Medicine
- » Australasian College of Sport and Exercise Physicians
- » Australian College of Rural and Remote Medicine
- » Australian Indigenous Doctors' Association
- » Australian Medical Association
- » Australian Medical Council
- » Australian and New Zealand College of Anaesthetists
- » Council of Presidents of Medical Colleges
- » Intensive Care Foundation
- » Medical Board of Australia
- » Medical Council of New Zealand
- » Royal Australasian College of Physicians
- » Royal Australasian College of Surgeons
- » Royal Australian and New Zealand College of Ophthalmologists
- » Royal College of General Practitioners
- » Royal Australian and New Zealand College of Psychiatrists

## OUR DONORS

We would like to thank the following donors who kindly supported the College in 2022

- » Dr Bruce Lister
- » Dr Gerard Moynihan
- » Dr John Brian Gavranich

**College of Intensive Care Medicine of Australia and  
New Zealand**

**ACN 134 292 103**

**Annual Financial Report**

**31 December 2022**

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## Directors' Report

The Directors present their report on the College of Intensive Care Medicine of Australia and New Zealand (referred to hereafter as the College) for the year ended 31 December 2022.

### Directors

The following persons were Directors of the College during the whole of the financial year and up to the date of this report:

- Mary Pinder
- Rob Bevan
- Peter Kruger
- Priya Nair
- Penny Stewart
- Jeremy Cohen
- Nhi Nguyen
- Neil Orford
- Nicola Dobos – retired July 2022
- Martina Zib
- Steve McGloughlin – appointed July 2022
- Cara Moore – appointed July 2022

### Principal activities

The principal activities of the College during the year consisted of the education, training and assessment of medical practitioners in the specialty area of intensive care medicine, the promotion of high standards of practice and the encouragement of research in the field of intensive care medicine.

### Review of operations

The net result from operating activities of the College for the year ended 31 December 2022 amounted to a deficit of \$975,299 (2021: surplus of \$870,793)

### Significant transactions incurred in the year

In 2022, the College incurred material expenditure, totalling \$742,080 relating to the development of the MDP system. This system has been developed to modernise the College's IT systems and user-experience for the College's members, staff and stakeholders. Further expenditure will be made on this system in future years to enhance its functionality, capability and use. Management have considered the underlying contract for the development and hosting of the MDP system, and determined that this expenditure falls within the scope of the IFRIC agenda decision on accounting for configuration and customisation costs in a cloud computing arrangements, commonly known as 'software as a service'.

Consequently, amounts spent on this project are recorded as an expense in the year in which the spend is incurred. If an alternative judgement had been reached, that this project did not fall within the IFRIC agenda decision, this expenditure would have been capitalised as an intangible asset and amortised over the system's useful life. This alternative judgement would have the effect of decreasing expenses and increasing assets in the current year, while increasing expenses in future years. This accounting treatment, while affecting the statutory result of the College, does not result in any changes in cash flows associated with the project.

In 2022, and as a result of the above MDP system nearing completion with an implementation date of March 2023, useful lives were reassessed for all legacy IT systems. Useful lives for all IT systems were reduced from 10 years to 1-2 years resulting in an amortisation expense of \$426,664 being recognised in the year compared to \$51,062 should this reassessment not have taken place. The effect of this being to increase expense in the current year however, decreasing future amortisation charges.

### Objectives and strategies

The principal objectives of the College are to:

- Promote high principles of practice in relation to intensive care medicine;
- Promote and encourage the advancement of the science of intensive care medicine;
- Maintain professional standards for the practice of intensive care medicine in Australia and New Zealand; and
- Conduct training programs leading to the award of Fellowship of the College.

To achieve these objectives, the College:

- Continually reviews policies relating to the practice of intensive care medicine;
- Donates 2.5% of operating revenue of Fellow's subscription fees to support research in the field (through the Intensive Care Institutions);
- Accredits training institution; conducts ongoing educational events, in particular an annual scientific meeting; and
- Holds regular examinations of trainees to ensure standards of learning are maintained.

### Dividends

The College is a company limited by guarantee and its Constitution precludes the payment of dividends.

### Matters subsequent to the end of the financial year

No matters or circumstance has arisen since 31 December 2022 that has significantly affected, or may significantly affect the College's operations, the results of those operations, or the College's state of affairs in future financial years.

### Likely developments and expected results of operations

The College anticipates that it will maintain in 2023, its positive financial position. The College is continually updating, reviewing, and improving its management and governance practices to ensure that the objectives of the College and its Directors are met.

### Environmental regulation

The College's operations are not regulated by any significant environmental regulation under a law of the Commonwealth, State or Territory.

Mary Pinder,  
*Immediate Past President*

#### Qualifications

- Fellow FICANZCA 1998;
- Foundation Fellow JFICM 2002;
- Foundation Fellow CICM 2010;
- MRCP(UK) 1989; and
- FCAnaes 1991.

**Role within the College**

- President, retired position July 2022 and
- Deputy Chair, Education, appointed July 2022

**Other current experience and expertise**

- Staff Specialist – Sir Charles Gairdner Hospital; and
- Hollywood Private Hospital.

Rob Bevan, *President*

**Qualifications**

- Fellow FRACP 2011;
- Fellow FCICM 2012;
- MBBS (Lond) 2001;
- B.Med Sci (Lond) 2000; and
- MRCP (UK) 2004.

**Role within the College**

- President, appointed July 2022
- Chair, Fellowship Affairs, retired position July 2022
- Deputy Chair, Education, retired position July 2022

**Other current experience and expertise**

- Intensive Care Specialist, DCCM, Te Whatu Ora (Te Toka Tumai), Auckland City Hospital

Peter Kruger, *Vice President*

**Qualifications**

- BSc (hons) 1984;
- MBBS 1990;
- FANZCA 1999;
- FCICM 2000; and
- PhD 2013.

**Role within the College**

- Vice President; appointed July 2022
- Chair, Hospital Accreditation
- Chair, Fellowship Affairs, appointed July 2022

**Other current experience and expertise**

- Member board of Directors Intensive Care Foundation – ANZICS; - ceased November 2022
- Intensive Care Specialist, Intensive Care Unit, Princess Alexandra Hospital, Brisbane;
- Visiting Intensive Care specialist, Greenslopes Private Hospital, Brisbane; and

Priya Nair, *Treasurer*

**Qualifications**

- MBBS 1992;
- MD 1995;
- FCICM 2001; and
- Grad Dip Periop Echo (Melbourne University) 2005.
- PHD 2019

**Role within the College**

- Treasurer, appointed July 2022
- Chair, Education, retired position July 2022

- Deputy Chair Education, Deputy Censor, Deputy Chair HAC retired position July 2020

**Other current experience and expertise**

- Senior Specialist/Director, Intensive Care, St Vincent's Hospital, Sydney;
- VMO Intensivist, St Vincent's Private Hospital, Sydney;
- Senior Research Fellow, George Institute for Global Health;
- Conjoint Associate Professor UNSW, and
- Clinical Associate Professor University of Notre Dame

Penny Stewart, *Member*

**Qualifications**

- MBBS (Syd) 1989;
- FANZCA 1999; and
- FCICM 2001.

**Role within the College**

- Chair, Rural Committee; and
- Chair, Indigenous Health Committee
- 

**Other current experience and expertise**

- Director, Intensive Care Unit, Alice Springs Hospital;
- ANZICS - End of life working group;
- Indigenous committee for ANZCA; and
- Representative on the Indigenous committee of Presidents of Medical Colleges.

Jeremy Cohen, *Member*

**Qualifications**

- PhD, 2012;
- FCICM, 2003;
- FRCA (UK), 1997
- MRCP (UK), 1993.
- MBBS (UK) 1990
- BSc 1988

**Role within the College**

- Chair, Assessments

**Other current experience and expertise**

- Deputy Director, Wesley ICU;
- Senior Staff Specialist RBWH, Intensive Care Unit;
- Honorary Professorial Fellow: The George Institute; and
- Associate Professor University of Queensland.
- Conjoint Associate Professor UNSW

Nhi Nguyen, *Member*

**Qualifications**

- B Med Science, 1992;
- Grad Dip Science, 1994;
- MBBS, 1999;
- FJFICM, 2008; and
- FCICM, 2010.

**Role within the College**

- Censor, appointed March 2022
- CPD Officer, retired position July 2022 and
- Deputy Censor, retired position March 2022

**Other current experience and expertise**

- Senior Staff Specialist Nepean Hospital;
- A/Medical Director ICNSW Agency Clinical Innovation; and
- ANZICS NSW Regional Chair.

Neil Orford, *Member*

**Qualifications**

- MBBS, 1992;
- FANZCA, 2001;
- PGDipEcho, 2004;
- FCICM, 2005; and
- PhD, 2018.

**Role within the College**

- Deputy Censor, appointed March 2022
- Deputy Chair, Hospital Accreditation
- Chair, Culture Program

**Other current experience and expertise**

- Director Intensive Care Barwon Health (2008-2020), then Senior Specialist (2020-present)
- Clinical Director Medicine, Specialist Medicine, and Emergency Medicine, Barwon Health (Jan 2023 to present)
- Director Critical Care St John of God Hospital Geelong (2014-2015) then Senior Specialist St John of God Hospital Geelong (2016 to present);
- Volunteer Intensive Care Specialist Open Heart International;
- Deakin University Associate Professor in Intensive Care Medicine
- Monash University Adjunct Associate Professor in Intensive Care Medicine
- Victorian ECMO Service Executive (2019-2022)
- Chief Investigator, Bone Zone RCT (2020-2025)

Martina Zib, *Member*

**Qualifications**

- Bachelor of Medicine (Honours) University of Newcastle, 2000
- Joint Faculty of Intensive Care Medicine Fellowship FJFICM, 2009
- College of Intensive Care Medicine Fellowship FCICM, 2010
- Diploma of Clinical Ultrasound University of Melbourne, 2011

**Role within the College**

- Educator's Network
- USIG member
- Welfare SIG member
- Part 2 General Fellowship Examiner
- Part 2 General Fellowship Examination Committee member
- Chair, Education appointed July 2022

**Other current experience and expertise**

- Supervisor of Training CICM trainees, John Hunter Hospital Senior Staff Specialist in Intensive Care, John Hunter Hospital 2009-2021
- CICM approved Assessor Focused Cardiac Ultrasound in Intensive Care 2014-2021

*\*Steve McGloughlin,  
Member*

**Qualifications**

- BSc (Psychology), 1996
- BMed, 2001
- Master of Public Health and Tropical Medicine, 2008
- FCICM, 2011
- FRACP (Infectious Diseases), 2013
- International Masters of Health Leadership, 2017

**Role within the College**

- CPD Officer, appointed July 2022
- Research Officer, appointed July 2022

**Other current experience and expertise**

- Aeromedical Doctor, Royal Flying Doctors Cairns, 2008 to 2009
- Intensive Care and Infectious Diseases Specialist, The Alfred Hospital, 2012 to Current
- Director Intensive Care, The Alfred Hospital, 2018 to current
- COVID19 Clinical Evidence Taskforce, Executive Director, 2021 to current
- ANZICS COVID 19 Guidelines, Lead Author, 2020 to 2021
- Surviving sepsis Campaign, ANZICS representative, 2017 to current
- Therapeutic Guidelines, Lead Author Sepsis, 2014 to current
- Australian Health Facilities Guidelines, Expert Working Group, 2019 to 2020
- 

*\*Cara Moore, Member*

**Qualifications**

- MBBS (Monash), 2004
- FCICM, 2020

**Role within the College**

- New Fellows Representative appointed July 2022
- Chair, Trainee Committee appointed July 2022

**Other current experience and expertise**

- Intensive Care Specialist, Royal Melbourne Hospital, 2020-present
- Intensive Care Registrar, Epworth Healthcare, 2019
- Intensive Care Registrar, Royal Melbourne Hospital, 2018
- Intensive Care Registrar, St Vincent's Hospital Melbourne, 2015 -17
- Victorian Intensive Care Education Network, Chair 2020 -present
- WIN-ANZICS Committee, Vic Representative 2021 -present
- WIN-ANZICS Gender Equity Think Tank – World Congress of Intensive Care, Convenor, 2019

**\*\*Nicola Dobos, Member**

**Qualifications**

- MB BS, Monash University, 2005;
- Masters in Public Health (MPH) New York University, 2011; and
- FCICM, 2017.

**Role within the College**

- New Fellows Representative - retired position July 2022 and
- Chair, Trainee Committee - retired position July 2022
- CICM Victorian State Committee - member
- CICM Communications Course faculty

**Other current experience and expertise**

- Intensive Care Specialist Austin Hospital VIC;
- Intensive Care Specialist Western Health VIC; and
- Women in Intensive Care Network (WIN) – committee member.
- Australian Resuscitation Council, ALS instructor

*\*Start of term July 2022*

*\*\* End of term July 2022.*

**College Secretary**

The College secretary is Daniel Angelico.

**Meeting of Directors**

The number of meetings of the College's board of Directors and of each committee held during the year ended 31 December 2022, and the number of meetings attended by each Director were:

Year ended 31 December 2022	Board meetings		Executive		Finance, Audit & Risk Management	
	Number eligible to attend	Number attended	Number eligible to attend	Number attended	Number eligible to attend	Number attended
	Mary Pinder	4	4	4	4	4
Rob Bevan	4	4	4	4	4	4
Peter Kruger	4	4	4	3	4	4
Priya Nair	4	4	2	2	3	3
Penny Stewart	4	3	-	-	-	-
Jeremy Cohen	4	4	-	-	-	-
Nhi Nguyen	4	4	-	-	-	-
Neil Orford	4	4	-	-	-	-
Nicola Dobos	2	2	-	-	-	-
Martina Zib	4	4	-	-	-	-
Steve McGloughlin	2	2	-	-	-	-
Cara Moore	2	2	-	-	-	-

**Contributions on winding up**

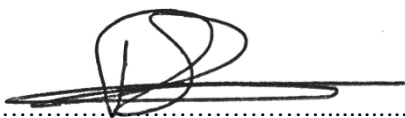
In the event of the company being wound up, ordinary members are required to contribute a maximum of \$50 each. Honorary members are not required to contribute.

**Auditor's Independence Declaration**

A copy of the auditor's independence declaration as required under section 307C of the *Corporations Act 2001* is set out immediately after this directors' report.

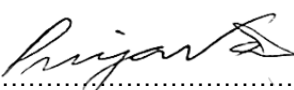
This report is made in accordance with a resolution of directors, pursuant to section 298(2)(a) of the *Corporations Act 2001*.

On behalf of the Directors



.....  
Rob Bevan  
Director

Date: 16 May 2023  
Melbourne



.....  
Priya Nair  
Director

Date: 16 May 2023  
Melbourne

**RSM Australia Partners**

Level 21, 55 Collins Street Melbourne VIC 3000

PO Box 248 Collins Street West VIC 8007

T +61(0) 3 9286 8000

F +61(0) 3 9286 8199

[www.rsm.com.au](http://www.rsm.com.au)**AUDITOR'S INDEPENDENCE DECLARATION**

As lead auditor for the audit of the financial report of the College of Intensive Care Medicine of Australia and New Zealand for the year ended 31 December 2022, I declare that, to the best of my knowledge and belief, there have been no contraventions of:

- (i) the auditor independence requirements of the Australian professional accounting bodies; and
- (ii) any applicable code of professional conduct in relation to the audit.

*Rsm***RSM AUSTRALIA PARTNERS****K J DUNDON**  
PartnerDated: 16 May 2023  
Melbourne, Victoria

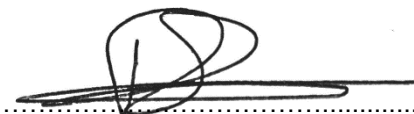
**Directors' Declaration**

In the Directors' opinion:

- (a) the attached financial statements and notes comply with the *Corporations Act 2001*, the Australian Accounting Standards - Simplified Disclosures, the *Australian Charities and Not-for-profits Commissions Act 2012* and associated regulations, the *Corporations Regulations 2001* and other mandatory professional reporting requirements;
- (b) the attached financial statements and notes give a true and fair view of the College's financial position as at 31 December 2022 and of the performance for the year ended on that date; and
- (c) there are reasonable grounds to believe that the College will be able to pay its debts as and when they become due and payable.

Signed in accordance with a resolution of the directors made pursuant to section 295(5)(a) of the Corporations Act 2001.

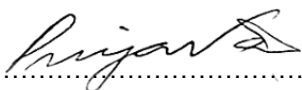
On behalf of the Directors



.....

Rob Bevan  
Director

Date: 16 May 2023  
Melbourne



.....

Priya Nair  
Director

Date: 16 May 2023  
Melbourne

**Statement of Profit or Loss and Other Comprehensive Income**

For the year ended 31 December 2022

	Notes	2022 \$	2021 \$
Revenue from ordinary activities	2	6,612,904	5,830,116
Interest income calculated using the effective interest method		39,294	18,106
Other revenue	2	1,627,008	3,761,090
Total revenue		<u>8,279,206</u>	<u>9,609,312</u>
<b>Expenses</b>			
Employee benefits expenses		(2,666,244)	(2,638,965)
Administration and college expenses		(578,259)	(573,888)
Travel and conference expenses		(1,615,135)	(1,227,827)
Information technology expenses		(1,098,004)	(328,999)
Professional services expenses		(425,592)	(330,869)
Occupancy expenses		(145,262)	(124,743)
Finance costs		(174,303)	(105,679)
Other expenses		(795,273)	(635,262)
STP		(1,350,404)	(2,772,287)
Specific Purpose Grants expenses (FATES)		(406,029)	-
Total expenses		<u>(9,254,505)</u>	<u>(8,738,519)</u>
<b>Surplus before tax</b>		<b>(975,299)</b>	<b>870,793</b>
Income tax expense		-	-
<b>Surplus/(Deficit) after tax attributable to the College</b>		<b>(975,299)</b>	<b>870,793</b>
<b>Other comprehensive income for the year</b>		-	-
<b>Total comprehensive (loss)/income for the year attributable to the College</b>		<b>(975,299)</b>	<b>870,793</b>

*The above statement of profit and loss and other comprehensive income should be read in conjunction with the accompanying notes.*

**Statement of Financial Position**

As at 31 December 2022

	Notes	2022 \$	2021 \$
<b>Current Assets</b>			
Cash and cash equivalents		3,889,190	3,179,135
Trade and other receivables	4	179,235	174,820
Financial assets	5	<u>5,228,242</u>	<u>10,817,345</u>
<b>Total Current Assets</b>		<u>9,296,667</u>	<u>14,171,300</u>
<b>Non-Current Assets</b>			
Property, Plant and Equipment	6	9,078,704	398,257
Right of use asset	7	39,863	348,174
Intangible assets	8	<u>83,955</u>	<u>510,619</u>
<b>Total Non-Current Assets</b>		<u>9,202,522</u>	<u>1,257,050</u>
<b>Total Assets</b>		<u><b>18,499,189</b></u>	<u><b>15,428,350</b></u>
<b>Current Liabilities</b>			
Trade and other payables	9	2,930,798	2,496,325
Provisions	10	418,479	418,357
Lease liability - current	11	48,014	319,157
Borrowings	12	<u>263,080</u>	<u>-</u>
<b>Total Current Liabilities</b>		<u>3,660,371</u>	<u>3,233,839</u>
<b>Non-Current Liabilities</b>			
Provisions	10	72,785	88,270
Lease liability – Non-current	11	-	48,014
Borrowings	12	<u>3,683,105</u>	<u>-</u>
<b>Total Non-Current Liabilities</b>		<u>3,755,890</u>	<u>136,284</u>
<b>Total Liabilities</b>		<u><b>7,416,260</b></u>	<u><b>3,370,123</b></u>
<b>Net Assets</b>		<u><b>11,082,928</b></u>	<u><b>12,058,227</b></u>
<b>Equity</b>			
Retained earnings	13	<u>11,082,928</u>	<u>12,058,227</u>
<b>Total Equity</b>		<u><b>11,082,928</b></u>	<u><b>12,058,227</b></u>

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*The above statement of financial position should be read in conjunction with the accompanying notes.*

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**Statement of Changes in Equity**

For the year ended 31 December 2022

	<b>Retained Earnings \$</b>	<b>Total Equity \$</b>
<b>Balance at 1 January 2021</b>	<u>11,187,434</u>	<u>11,187,434</u>
Surplus for the year	870,793	870,793
Other comprehensive income	-	-
Total comprehensive income for the year	<u>870,793</u>	<u>870,793</u>
<b>Balance at 31 December 2021</b>	<u>12,058,227</u>	<u>12,058,227</u>
Deficit for the year	(975,299)	(975,229)
Other comprehensive income	-	-
Total comprehensive loss for the year	<u>(975,299)</u>	<u>(975,299)</u>
<b>Balance at 31 December 2022</b>	<u>11,082,928</u>	<u>11,082,928</u>

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*The above statement of changes in equity should be read in conjunction with the accompanying notes.*

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**Statement of Cash Flows**

For the year ended 31 December 2022

	2022	2021
	\$	\$
<b>Cash flows from operating activities</b>		
Receipts from members and government bodies (inclusive of GST)	10,277,573	8,590,141
Government stimulus receipt	-	142,600
Payments to suppliers and employees (inclusive of GST)	(9,475,845)	(7,650,839)
Interest received	2,779	10,351
Finance costs	(78,409)	(36,299)
Net cash provided by operating activities	<u>726,098</u>	<u>1,055,954</u>
<b>Cash flows from investing activities</b>		
Payments for Property, Plant and Equipment	(12,163,132)	(344,827)
Proceeds from sale of Land & Buildings	3,440,000	-
Payments for intangible assets	(10,440)	(21,960)
Redemption of term deposits	4,981,463	-
Income received from financial assets	29,265	36,601
Net cash (used in) investing activities	<u>(3,722,844)</u>	<u>(330,186)</u>
<b>Cash flows from financing activities</b>		
Repayment of lease liabilities	(239,383)	(247,816)
Proceeds from borrowings	3,946,184	-
Net cash provided by/(used in) financing activities	<u>3,706,801</u>	<u>(247,816)</u>
<b>Net increase in cash held</b>	710,055	477,952
<b>Cash and cash equivalents at beginning of year</b>	3,179,135	2,701,183
<b>Cash and cash equivalents at end of year</b>	<u><u>3,889,190</u></u>	<u><u>3,179,135</u></u>

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*The above statement of cash flows should be read in conjunction with the accompanying notes.*

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## Notes to the Financial Statements

### 1. Statement of significant accounting policies

The principal accounting policies adopted in the preparation of these financial statements are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated.

The financial statements were authorised for issue by the Directors on page 10. The Directors have the power to amend and reissue the financial statements.

#### **New or amended Accounting Standards and Interpretations adopted**

The company has adopted all of the new or amended Accounting Standards and Interpretations issued by the Australian Accounting Standards Board ('AASB') that are mandatory for the current reporting period.

Any new or amended Accounting Standards or Interpretations that are not yet mandatory have not been early adopted.

#### **(a) Basis of preparation**

These general-purpose financial statements have been prepared in accordance with the Australian Accounting Standards - Simplified Disclosures issued by the Australian Accounting Standards Board ('AASB'), the *Australian Charities and Not-for-profits Commission Act 2012*. The College of Intensive Care Medicine of Australia and New Zealand ("the College") is a not-for-profit entity for the purposes of preparing the financial statements. The financial statements have been prepared on a going concern basis, which assumes continuity of normal business activities and the realisation of assets and the settlement of liabilities in the ordinary course of business

##### *Historical cost convention*

These financial statements have been prepared under the historical cost convention unless otherwise stated in the notes.

##### *Functional and presentation currency*

Items included in the financial statements of the College are measured using the currency of the primary economic environment in which the entity operates (the 'functional currency'). The financial statements are presented in Australian dollars, which is the College's functional and presentation currency.

#### **(b) Revenue Recognition**

Revenue is recognised at an amount that reflects the consideration to which the company is expected to be entitled in exchange for transferring goods or services to a customer. For each contract with a customer, the company: identifies the contract with a customer; identifies the performance obligations in the contract; determines the transaction price which takes into account estimates of variable consideration and the time value of money; allocates the transaction price to the separate performance obligations on the basis of the relative stand-alone selling price of each distinct good or service to be delivered; and recognises revenue when or as each performance obligation is satisfied in a manner that depicts the transfer to the customer of the goods or services promised.

Variable consideration within the transaction price, if any, reflects concessions provided to the customer such as discounts, rebates and refunds, any potential bonuses receivable from the customer and any other contingent events. Such estimates are determined using either the 'expected value' or 'most likely amount' method. The measurement of variable consideration is subject to a constraining principle whereby revenue will only be recognised to the extent that it is highly probable that a significant reversal in the amount of cumulative revenue recognised will not occur. The measurement constraint continues until the uncertainty associated with the

## Notes to the Financial Statements

### 1. Statement of significant accounting policies (cont.)

#### (b) Revenue Recognition (cont.)

variable consideration is subsequently resolved. Amounts received that are subject to the constraining principle are recognised as a refund liability.

Revenue is recognised on the following bases:

(i) *Membership subscriptions*

Initial admission fees are recognised as revenue when received. Annual membership fees are recorded as revenue in the year to which the membership fee relates.

(ii) *Specific Purpose Grants*

Grant revenue is recognised in profit or loss when the company satisfies the performance obligations stated within the funding agreements.

If conditions are attached to the grant which must be satisfied before the company is eligible to retain the contribution, the grant will be recognised in the statement of financial position as a liability until those conditions are satisfied.

(iii) *Interest income*

Interest revenue is recognised as interest accrued using the effective interest method. This is a method of calculating the amortised cost of a financial asset and allocating the interest income over the relevant period using the effective interest rate, which is the rate that exactly discounts estimated future cash receipts through the expected life of the financial asset to the net carrying amount of the financial asset.

(iv) *Other income*

Other income is recognised when it is received or when the right to receive payment is established.

#### (c) Income Tax

The College is endorsed as an income tax exempt charitable entity under Subdivision 50-B of the *Income Tax Assessment Act 1997*.

#### (d) Current and non-current classification

Assets and liabilities are presented in the statement of financial position based on current and non-current classification.

An asset is classified as current when: it is either expected to be realised or intended to be sold or consumed in the company's normal operating cycle; it is held primarily for the purpose of trading; it is expected to be realised within 12 months after the reporting period; or the asset is cash or cash equivalent unless restricted from being exchanged or used to settle a liability for at least 12 months after the reporting period. All other assets are classified as non-current.

A liability is classified as current when: it is either expected to be settled in the company's normal operating cycle; it is held primarily for the purpose of trading; it is due to be settled within 12 months after the reporting period; or there is no unconditional right to defer the settlement of the liability for at least 12 months after the

reporting period. All other liabilities are classified as non-current. Deferred tax assets and liabilities are always classified as non-current.

## Notes to the Financial Statements

### 1. Statement of significant accounting policies (cont.)

#### (e) Cash and cash equivalents

For the purposes of presentation in the statement of cash flows, cash and cash equivalents includes cash on hand, deposits held at call with financial institutions, other short-term, highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value, and bank overdrafts. Bank overdrafts are shown within financial liabilities in current liabilities in the statement of financial position.

#### (f) Trade and other receivables

Other receivables are recognised at amortised cost, less any allowance for expected credit losses.

#### (g) Financial assets

##### *Investments and other financial assets*

Investments and other financial assets are initially measured at fair value. Transaction costs are included as part of the initial measurement, except for financial assets at fair value through profit or loss. Such assets are subsequently measured at either amortised cost or fair value depending on their classification. Classification is determined based on both the business model within which such assets are held and the contractual cash flow characteristics of the financial asset unless, an accounting mismatch is being avoided. Financial assets are derecognised when the rights to receive cash flows have expired or have been transferred and the College has transferred substantially all the risks and rewards of ownership. When there is no reasonable expectation of recovering part or all of a financial asset, its carrying value is written off.

##### *Financial assets at fair value through profit or loss*

Financial assets not measured at amortised cost or at fair value through other comprehensive income are classified as financial assets at fair value through profit or loss. Typically, such financial assets will be either: (i) held for trading, where they are acquired for the purpose of selling in the short-term with an intention of making a profit, or a derivative; or (ii) designated as such upon initial recognition where permitted. Fair value movements are recognised in profit or loss.

A portfolio of financial assets that is managed and whose performance is evaluated on a fair value basis is neither held to collect contractual cash flows nor held both to collect contractual cash flows and to sell financial assets. The entity is primarily focused on fair value information and uses that information to assess the assets' performance and to make decisions.

In addition, a portfolio of financial assets that meets the definition of held for trading is not held to collect contractual cash flows or held both to collect contractual cash flows and to sell financial assets. For such portfolios, the collection of contractual cash flows is only incidental to achieving the business model's objective. Consequently, such portfolios of financial assets must be measured at fair value through profit or loss.

##### *Impairment of financial assets*

The College recognises a loss allowance for expected credit losses on financial assets which are either measured at amortised cost or fair value through other comprehensive income. The measurement of the loss allowance depends upon the College's assessment at the end of each reporting period as to whether the

financial instrument's credit risk has increased significantly since initial recognition, based on reasonable and supportable information that is available, without undue cost or effort to obtain.

## Notes to the Financial Statements (cont.)

### 1. Statement of significant accounting policies (cont.)

#### (h) Impairment of assets

Assets are tested for impairment whenever events or changes in circumstances indicate that the carrying amount may not be recoverable, and as a minimum, annually. An impairment loss is recognised for the amount by which the asset's carrying amount exceeds its recoverable amount. The recoverable amount is the higher of an asset's fair value less costs to sell and value in use. For the purposes of assessing impairment, assets are grouped at the lowest levels for which there are separately identifiable cash inflows which are largely independent of the cash inflows from other assets or groups of assets (cash-generating units). Non-financial assets, other than goodwill, that suffered an impairment are reviewed for possible reversal of the impairment at the end of each reporting period.

#### (i) Property, Plant and Equipment

Plant and equipment are stated at historical cost less depreciation. Historical cost includes all expenditure that is directly attributable to the acquisition of items. Subsequent costs are included in the asset's carrying amount or recognised as a separate asset, as appropriate, only when it is probable that future economic benefits associated with the item will flow to the group and the cost of the item can be measured reliably. The carrying amount of any component accounted for as a separate asset is de-recognised when replaced. All other repairs and maintenance are charged to profit or loss during the reporting period in which they are incurred.

Depreciation is calculated using the straight-line method to allocate the cost of the assets over their useful economic lives, or in the case of leasehold improvements, the shorter lease term, as follows:

- Leasehold improvements 12.5%
- Fixtures and fittings 5% - 20%
- Office equipment 15% - 25%

The assets' residual values and useful economic lives are reviewed, and adjusted if appropriate, at the end of each reporting period.

The assets' carrying amount is written down immediately to its recoverable amount if the assets' carrying amount is greater than its estimated recoverable amount.

Gains and losses on disposals are determined by comparing proceeds with its carrying amount. These are included in profit or loss.

#### (j) Right-of-use assets

A right-of-use asset is recognised at the commencement date of a lease. The right-of-use asset is measured at cost, which comprises the initial amount of the lease liability, adjusted for, as applicable, any lease payments made at or before the commencement date net of any lease incentives received, any initial direct costs incurred, and an estimate of costs expected to be incurred for dismantling and removing the underlying asset, and restoring the site or asset.

Right-of-use assets are depreciated on a straight-line basis over the unexpired period of the lease or the estimated useful life of the asset, whichever is the shorter. Where the entity expects to obtain ownership of the

## **Notes to the Financial Statements (cont.)**

### **1. Statement of significant accounting policies (cont.)**

#### **(j) Right-of-use assets (cont.)**

leased asset at the end of the lease term, the depreciation is over its estimated useful life. Right-of use assets are subject to impairment or adjusted for any remeasurement of lease liabilities.

The entity has elected not to recognise a right-of-use asset and corresponding lease liability for short-term leases with terms of 12 months or less and leases of low-value assets. Lease payments on these assets are expensed to profit or loss as incurred.

#### **(k) Intangible assets**

Intangible assets acquired are initially recognised at cost. Finite life intangible assets are subsequently measured at cost less amortisation and any impairment. The gains or losses recognised in profit or loss arising from the derecognition of intangible assets are measured as the difference between net disposal proceeds and the carrying amount of the intangible asset. The method and useful lives of finite life intangible assets are reviewed annually. Changes in the expected pattern of consumption or useful life are accounted for prospectively by changing the amortisation method or period.

##### *Curriculum Project*

Significant costs associated with the Curriculum Project are deferred and amortised on a straight-line basis over the period of their expected benefit, being 10 years.

##### *Website, HAC CCR Journal and SJT projects*

Significant costs associated with the Website, HAC CCR Journal and SJT projects are deferred and amortised on a straight-line basis over the period of their expected benefit, being 10 years.

#### **(l) Trade and other payables**

These amounts represent liabilities for goods and services provided to the entity prior to the end of the financial year and which are unpaid. The amounts are unsecured and are usually paid within 30 days of recognition. Trade and other payables are presented as current liabilities unless payment is not due within 12 months from the reporting date. They are recognised initially at their fair value and subsequently measured at amortised cost.

#### **(m) Deferred Income**

Contract liabilities represent the company's obligation to transfer goods or services to a customer and are recognised when a customer pays consideration, or when the company recognises a receivable to reflect its unconditional right to consideration (whichever is earlier) before the company has transferred the goods or services to the customer.

## Notes to the Financial Statements (cont.)

### 1. Statement of significant accounting policies (cont.)

#### (n) Employee benefits

##### (i) Short-term obligations

Liabilities for wages and salaries, including non-monetary benefits and annual leave expected to be wholly settled within 12 months after the end of the period in which the employees render the related service are recognised in respect of employees' services up to the end of the reporting period and are measured at the amounts expected to be paid when the liabilities are settled. The liability for annual leave, along with other short-term employee benefit obligations, is recognised in trade and other payables.

##### (ii) Other long-term employee benefit obligations

The liability for long service leave and annual leave which is not expected to be wholly settled within 12 months after the end of the period in which the employees render the related service is recognised in the provision for employee benefits and measured as the present value of expected future payments to be made in respect of services provided by employees up to the end of the reporting period using the projected unit credit method. Consideration is given to expected future wage and salary levels, experience of employee departures and periods of service. Expected future payments are discounted using market yields at the end of the reporting period on corporate bonds with terms to maturity and currency that match, as closely as possible, the estimated future cash outflows.

The obligations are presented as current liabilities in the statement of financial position if the College does not have an unconditional right to defer settlement for at least twelve months after the reporting date, regardless of when the actual settlement is expected to occur.

#### (o) Lease liabilities

A lease liability is recognised at the commencement date of a lease. The lease liability is initially recognised at the present value of the lease payments to be made over the term of the lease, discounted using the interest rate implicit in the lease or, if that rate cannot be readily determined, the entity's incremental borrowing rate. Lease payments comprise of fixed payments less any lease incentives receivable, variable lease payments that depend on an index or a rate, amounts expected to be paid under residual value guarantees, exercise price of a purchase option when the exercise of the option is reasonably certain to occur, and any anticipated termination penalties. The variable lease payments that do not depend on an index or a rate are expensed in the period in which they are incurred.

Lease liabilities are measured at amortised cost using the effective interest method. The carrying amounts are remeasured if there is a change in the following: future lease payments arising from a change in an index or a rate used; residual guarantee; lease term; certainty of a purchase option and termination penalties. When a lease liability is remeasured, an adjustment is made to the corresponding right-of-use asset, or to profit or loss if the carrying amount of the right-of-use asset is fully written down.

## Notes to the Financial Statements (cont.)

### 1. Statement of significant accounting policies (cont.)

#### (p) Fair value measurement

When an asset or liability, financial or non-financial, is measured at fair value for recognition or disclosure purposes, the fair value is based on the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date; and assumes that the transaction will take place either: in the principal market; or in the absence of a principal market, in the most advantageous market.

Fair value is measured using the assumptions that market participants would use when pricing the asset or liability, assuming they act in their economic best interests. For non-financial assets, the fair value measurement is based on its highest and best use. Valuation techniques that are appropriate in the circumstances and for which sufficient data are available to measure fair value, are used, maximising the use of relevant observable inputs, and minimising the use of unobservable inputs.

#### (q) Members' Guarantee

The College of Intensive Care Medicine of Australia and New Zealand is a company limited by guarantee and domiciled in Australia. If the College is wound up, the Constitution states that each member is required to contribute a maximum of \$50 each towards meeting any outstanding obligations of the College.

#### (r) Goods and Services Tax

Revenues, expenses, and assets are recognised net of the amount of goods and services tax (GST), except where the amount of GST incurred is not recoverable from the Australian Tax Office (ATO). In these circumstances, the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense.

Receivables and payables are stated with the amount of GST included. The net amount of GST recoverable from, or payable to, the ATO is included as a current asset or liability in the statement of financial position. Cash flows are included on a gross basis. The GST components of cash flows arising from investing and financing activities which are recoverable from, or payable to, the ATO are classified as operating cash flows.

#### (s) Borrowings

Loans and borrowings are initially recognised at the fair value of the consideration received, net of transaction costs. They are subsequently measured at amortised cost using the effective interest method.

## Notes to the Financial Statements (cont.)

### 1. Statement of significant accounting policies (cont.)

#### (t) Critical accounting estimates

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the reported amounts in the financial statements. Management continually evaluates its judgements and estimates in relation to assets, liabilities, contingent liabilities, revenue, and expenses. Management bases its judgements, estimates and assumptions on historical experience and on other various factors, including expectations of future events, management believes to be reasonable under the circumstances. The resulting accounting judgements and estimates will seldom equal the related actual results. The judgements, estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities (refer to the respective notes) within the next financial year are discussed below.

(i) *Estimation of useful lives of assets*

The College determines the estimated useful lives and related depreciation and amortisation charges for its property, plant and equipment and finite life intangible assets. The useful lives could change significantly as a result of technical innovations or some other event. The depreciation and amortisation charge will increase where the useful lives are less than previously estimated lives, or technically obsolete or non-strategic assets that have been abandoned or sold will be written off or written down.

(ii) *Employee benefits provisions*

As discussed in note 1(n), the liability for employee benefits expected to be settled more than 12 months from the reporting date are recognised and measured at the present value of the estimated future cash flows to be made in respect of all employees at the reporting date. In determining the present value of the liability, estimates of attrition rates and pay increases through promotion and inflation have been taken into account.

(iii) *Impairment of non-financial assets other than goodwill and other indefinite life intangible assets*

As the college assesses impairment of non-financial assets other than goodwill and other indefinite life intangible assets at each reporting date by evaluating conditions specific to the company and to the particular asset that may lead to impairment. If an impairment trigger exists, the recoverable amount of the asset is determined. This involves fair value less costs of disposal or value-in-use calculations, which incorporate a number of key estimates and assumptions.

**Notes to the Financial Statements (cont.)**

	<b>2022</b>	<b>2021</b>
	<b>\$</b>	<b>\$</b>
<b>2. Revenue and other income</b>		
<b>Revenue</b>		
Admission and registration fees	2,956,447	2,625,536
Training and assessment fees	3,656,457	3,204,580
	<u>6,612,904</u>	<u>5,830,116</u>
<b>Other revenue</b>		
Sponsorship - Annual Scientific Meeting	49,147	-
Registration – Annual Scientific Meeting	318,965	260,252
COVID-19 assistance	-	142,600
Other income	86,556	51,198
Net fair value gain/(loss) on financial assets	(719,478)	407,602
Investment income from financial assets	127,767	131,454
Grant income	1,358,022	2,767,984
Specific Purpose Grant (FATES)	406,029	-
	<u>1,627,008</u>	<u>3,761,090</u>
<b>3. Expenses</b>		
Surplus/(Deficit) before tax includes, but is not limited to, the following specific expenses:		
<b>Depreciation and amortisation</b>		
Depreciation expense	49,860	39,650
Right-of-use asset depreciation expense	308,311	245,116
Amortisation expense	426,664	347,993
	<u>784,835</u>	<u>632,759</u>
<b>4. Trade and other receivables</b>		
Trade receivables	6,047	2,873
Prepayments	131,543	145,217
Deposits	33,652	5,401
Other receivables	7,993	21,329
	<u>179,235</u>	<u>174,820</u>

## Notes to the Financial Statements (cont.)

## 5. Financial assets

	2022	2021
	\$	\$
<b>Current</b>		
Investment in managed funds	5,113,472	5,697,933
Term deposits	114,770	5,119,412
	<u>5,228,242</u>	<u>10,817,345</u>

**(a) Credit risk exposure**

CICM does not have any significant credit risk exposure. The carrying amount of financial assets recorded in the Statement of Financial Position, net of any provisions for doubtful debts, represents the College's maximum exposure to credit risk.

**(b) Interest rate risk**

CICM has a low exposure to interest rate risk, which is the risk that the value of financial instruments will fluctuate as a result of changes in market interest rates and the effective weighted average interest rates on classes of financial assets and financial liabilities. CICM entered into a loan arrangement with ANZ in the year for the purchase of 101 High Street, the loan was for the sum of \$4,000,000 with a variable interest rate, the interest rate being charged on the loan at year end was 5.44%. Please refer to note Note 12.

**(c) Liquidity Risk**

CICM is not subject to any liquidity risk.

## 6. Property, Plant and Equipment

	2022	2021
	\$	\$
Freehold land and buildings- at cost	9,066,658	-
Less: Accumulated depreciation	-	-
Leasehold improvements - at cost	250,577	586,928
Less: Accumulated depreciation	(250,577)	(230,914)
Net book amount	<u>9,066,658</u>	<u>356,014</u>
Fixtures and fittings - at cost	92,234	92,234
Less: Accumulated depreciation	(92,234)	(81,667)
Net book amount	<u>-</u>	<u>10,567</u>
Office equipment - at cost	180,958	180,958
Less: Accumulated depreciation	(168,912)	(149,282)
Net book amount	<u>12,046</u>	<u>31,676</u>
Total net book amount	<u>9,078,704</u>	<u>398,257</u>

**Notes to the Financial Statements (cont.)****6. Property, Plant and equipment (cont.)***Reconciliations*

Reconciliations of the written down values at the beginning and end of the current financial year are set out below:

	Freehold Land and Buildings	Leasehold improvements	Fixtures and fittings	Office equipment	Total
		\$	\$	\$	\$
<b>At 31 December 2021</b>					
Opening Book value	-	101,659	19,740	49,726	171,125
Additions	-	336,351	-	8,476	344,827
Disposals	-	(75,010)	-	(3,035)	(78,045)
Depreciation charge	-	(6,986)	(9,173)	(23,491)	(39,650)
Net book amount	-	356,014	10,567	31,676	398,257
<b>At 31 December 2022</b>					
Opening Book value	-	356,014	10,567	31,676	398,257
Additions	12,170,307	-	-	-	12,170,307
Disposals	(3,440,000)	-	-	-	(3,440,000)
Transfer	336,351	(336,351)	-	-	-
Depreciation charge	-	(19,663)	(10,567)	(19,630)	(49,860)
Net book amount	9,066,658	-	-	12,046	9,078,704

**7. Right-of-use assets**

	2022	2021
	\$	\$
Land and buildings - right-of-use	1,102,358	1,102,358
Less: Accumulated depreciation	(1,062,495)	(754,184)
	39,863	348,174

The right-of-use asset above relates to leases in relation to the College's offices. The College renewed the leases for a further three years commencing 19 March 2020 and is due to expire on 18 March 2023. There were no additional leases entered into during the year.

## Notes to the Financial Statements (cont.)

## 8. Intangible assets

	Curriculum Project	Website, HAC CCR Journal and SJT projects	Total Intangible assets
	\$	\$	\$
<b>At 31 December 2021</b>			
Cost	752,533	726,260	1,478,793
Accumulated amortisation	(564,612)	(403,562)	(968,174)
Net book amount	187,921	322,698	510,619
<b>At 31 December 2022</b>			
Cost	752,533	726,260	1,478,793
Additions	-	10,440	10,440
Accumulated amortisation	(693,341)	(711,937)	(1,405,278)
Net book amount	59,192	24,763	83,955

## Movements in carrying amounts

Movements in the carrying amount between the beginning and the end of the current financial year are as follows:

	Curriculum Project Cost	Website Cost and HAC project	Total
	\$	\$	\$
Opening net book amount	187,921	322,698	510,619
Amortisation charge	(128,729)	(297,935)	(426,664)
Closing net book amount	59,192	24,763	83,955

## 9. Trade and other payables

	2022	2021
	\$	\$
Trade payables	212,838	9,817
Deferred income	2,435,985	706,217
Other creditors and accruals	281,975	1,780,291
	2,930,798	2,496,325

**Notes to the Financial Statements (cont.)****10. Provisions**

	<b>2022</b>	<b>2021</b>
	<b>\$</b>	<b>\$</b>
<b>Current</b>		
Employee benefits – annual leave	194,675	247,947
Employee benefits – long service leave	181,875	170,410
Make Good Provision	41,929	-
	<u>418,479</u>	<u>418,357</u>
<b>Non-current</b>		
Make Good Provision	-	29,425
Employee benefits – long service leave	72,785	58,844
	<u>72,785</u>	<u>88,270</u>

**11. Lease liabilities**

<b>Current</b>		
Lease liability	48,014	319,157
	<u>48,014</u>	<u>319,157</u>
<b>Non-current</b>		
Lease liability	-	48,014
	<u>-</u>	<u>48,014</u>

**12. Borrowings**

	<b>2022</b>	<b>2021</b>
	<b>\$</b>	<b>\$</b>
<b>Current</b>		
Borrowings	<u>263,080</u>	<u>-</u>
<b>Non-Current</b>		
Borrowings	<u>3,683,105</u>	<u>-</u>

**Notes to the Financial Statements (cont.)**

	<b>2022</b>	<b>2021</b>
	\$	\$
<b>13. Equity - retained earnings</b>		
Retained earnings at the beginning of the financial year	12,058,227	11,187,434
(Deficit)/Surplus after income tax expense for the year	<u>(975,299)</u>	<u>870,793</u>
Retained earnings at the end of the financial year	<u>11,082,928</u>	<u>12,058,227</u>

**14. Related party transactions**

Key management personnel include those persons having authority and responsibility for planning, directing and controlling the activities of the College, directly or indirectly, including any Director. Total compensation paid to key management personnel during the financial year was:

	<b>2022</b>	<b>2021</b>
	\$	\$
Key management personnel remuneration	<u>1,200,911</u>	<u>1,238,342</u>

**a) Key management personnel loans**

There are no loans to or from key management personnel.

**b) Transactions with key management personnel (cont.)**

	<b>2022</b>	<b>2021</b>
	\$	\$
Key management personnel transactions	<u>-</u>	<u>40,461</u>

The key management personnel have transactions with the College that occur within a normal supplier-customer relationship on terms and conditions no more favourable than those with which it is reasonable to expect the College would have adopted if dealing with the key management personnel at arm's-length in similar circumstances. These transactions include the collection of membership dues and subscriptions and the provision of College services.

**15. Rumeration of auditors**

During the financial year the following fees were paid or payable for services provided by RSM Australia, the auditor of the incorporated association:

	2022 \$	2021 \$
<i>Audit services</i>		
Audit of the financial statements	21,000	18,000
	<b>2022</b> \$	<b>2021</b> \$
<i>Other Services</i>		
Taxation Services	3,500	8,900
Grant Acquittal	2,500	2,500

**16. Contingent Liabilities**

A review was performed by CICM of GST charged on income streams within New Zealand, it was identified that GST was applicable and should be charged on a number of income streams. Respective fee structures have been updated from 2023 onwards creating a GST liability due to be paid to the New Zealand Inland Revenue. A review is now taking place to understand if this is applicable for previous periods and should be applied retrospectively. At the current time CICM are unable to reliably estimate the cost associated with the GST claim due to factors around applicable New Zealand income streams, timeframe and the potential for additional penalties and or charges. As a result, a contingent liability has been disclosed in relation to the matter

The College had no contingent liabilities as at 31 December 2021.

**17. Commitments**

The College had no commitments for expenditure as at 31 December 2022 and 31 December 2021.

**18. Events after the reporting period**

No other matter or circumstance has arisen since 31 December 2022 that has significantly affected, or may significantly affect the incorporated association's operations, the results of those operations, or the incorporated association's state of affairs in future financial years.

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**INDEPENDENT AUDITOR'S REPORT**

To the Members of the College of Intensive Care Medicine of Australia and New Zealand

**Opinion**

We have audited the financial report of the College of Intensive Care Medicine of Australia and New Zealand ("the Company"), which comprises the statement of financial position as at 31 December 2022, the statement of profit or loss and other comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the directors' declaration.

In our opinion, the financial report of the Company has been prepared in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012* ("ACNC Act"), including:

- (a) giving a true and fair view of the Company's financial position as at 31 December 2022 and of its financial performance and cash flows for the year ended on that date; and
- (b) complying with Australian Accounting Standards and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2013*.

**Basis for Opinion**

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Company in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

## **Other Information**

The directors are responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 31 December 2022 but does not include the financial report and the auditor's report thereon.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

## **Responsibilities of Management and Those Charged with Governance for the Financial Report**

The directors of the Company are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards and the ACNC Act and for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Company or to cease operations, or has no realistic alternative but to do so.

## **Auditor's Responsibilities for the Audit of the Financial Report**

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

A further description of our responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website at: [http://www.auasb.gov.au/auditors\\_responsibilities/ar4.pdf](http://www.auasb.gov.au/auditors_responsibilities/ar4.pdf)  
This description forms part of our auditor's report.



**RSM AUSTRALIA PARTNERS**



**K J DUNDON**  
Partner

Dated: 22 May 2023  
Melbourne, Victoria