

Bill Glasson, President of the Royal Australian and New Zealand College of Ophthalmologists, 2011 – 2012

William Glasson was born in Winton, Western Queensland on 2 January 1953. His parents operated a remote property while his father was also a member of the Queensland Parliament and a Cabinet Minister. Bill was initially educated by correspondence and later at the Church of England Grammar School, Brisbane. After completing a Diploma of Applied Science (Optometry) in 1974 he entered the University of Queensland on a bonded scholarship. In 1980 he gained MB BS with final year prizes in Surgery and Ophthalmology and was awarded FRACO and FRACS in 1987 having trained in ophthalmology through Royal Brisbane, Mater, Greenslopes and Princess Alexandra Hospitals. Following graduation he went to England where he spent time at St Thomas' Hospital, the Moorfield Eye Hospital and Charing Cross Hospital, doing post graduate studies in ocular oncology, oculoplastics and lacrimal surgery. In 1989 he was awarded FRCOpt, and on returning to Australia he began private practice at Wickham Terrace, Brisbane and expanded into rural and outreach services to central western Queensland and East Timor. He is a Knight Hospitaller of St John Australia and in 2005 Bill was made an Honorary Fellow of the RACGP. Bill was also Clinical Senior Lecturer in Ophthalmology at the University of Queensland; has written numerous papers on Ophthalmological Research; and has given many lectures at a State, National and International level.

Bill is Past Chair, Secretary and Treasurer of the RANZCO Queensland Branch and was a Federal Councillor before becoming Vice President then President. Bill also served on the RACS Council and was President of the Queensland Branch of the AMA from 2001 to 2002 before becoming President of the Federal AMA from 2003 to 2005. From 2006 to 2007 he was a member of the Northern Territory Emergency Response Task Force; Chair of the Rural and Regional Telecom Review Committee, Chair of the Queensland Clinical Senate; and from 2007 to 2008 was Deputy Chair of the Medical Services Advisory Committee (MSAC). In 2008 Bill was awarded the Order of Australia for his services to medicine in rural and remote Australia; to eye health of indigenous people and to professional organisations; and in 2010 he was Chair of the Cancer Council. Bill is a Consulting Ophthalmologist to the Australian Army with rank of Lieutenant Colonel, having been commissioned as Captain in 1981 and as Major in 1990.

During his term as President Bill focused on positioning RANZCO as a proactive (rather than reactive) organisation in order to confront the issues to be faced over the next decade. Issues addressed were:

- development and fine-tuning of the strategic plan with clear portfolio areas for each Board member to ensure continual reporting;
- ratification of the Code of Conduct initiated by the previous President, Rick Stawell;
- extensive consultation with Medicare on Intra-vitreous Injections (Item 42738) to develop accessible and sustainable solutions based on facts and best practice for patients, ophthalmologists and the department;
- establishment of policies guiding the College's increased contribution to eliminating avoidable blindness and vision impairment in the Asia-Pacific region through the RANZCO Asia-Pacific International Development unit which formulated and developed strategies and implementation of project activities;
- education of the Board and Council upon methods to improve interaction with the media, community and government at the inaugural Mid-Year Forum held in Parliament House, Canberra. Requisite tools were provided to create a presence within federal and state political environments so that both sides have input into constructive policy making;
- attendance at the American Academy meeting of the RANZCO President, Hon Treasurer and CEO, and the President of the ASO, to present on the Australian Health Care system as one of the most balanced, fair, and equitable in the world with the provision of affordable and very high standard of care;
- integration of workforce study data into the strategic plan and discussions with Health Workforce Australia and New Zealand to ascertain future needs for ophthalmologists in both countries;

- extensive discussions held around future workforce needs and the changing scope of practice for optometry, orthoptics and ophthalmic nursing so that the future ophthalmic team would be more integrated;
- celebration of the 10th year of the RANZCO Eye Foundation which had raised over \$10 million; supported projects in Australia and the Asia-Pacific region; and contributed to funding eye health research through ORIA projects;
- development of a Memorandum of Understanding with the RANZCO Eye Foundation with the view to obtaining Australian Council for International Development and AusAid accreditation to enable application for funding to assist projects in the Asia-Pacific region;
- creation of a Senior Fellows position on Council as Fellows over 60 made up nearly 30% of the Fellowship; and revision of the CPD to exempt retired Fellows from the Audit requirement;
- modern development of the RANZCO museum website.

In his Presidential address, Bill welcomed the new Fellows into the College as a proud and rewarding moment for the President and he assured the graduates that their senior colleagues remembered the stress of final exams. He asserted that rather than being an end stage in their lives, achieving entry into their chosen profession was a more important beginning in creating their own future. He advised them that College membership provided many avenues of support, career opportunities, the benefits of networking, and embodies what it means to be professional.

Bill informed the audience that as professionals they had earned the right, through their education and training, to undertake work independently and it was their duty to maintain the highest and most rigorous standards of practice: that they had gained their expertise from others who had followed the same path. He stated that in the main professionals were self-regulating, as only their peers were capable of understanding their work and that members of the College made decisions together through committees, the Council and Board, on matters of education and conduct; research and community service; and maintenance of the high reputation of its members. Bill advised that in return for the privileges of self-regulation, the community expected a high ethical standard in their relationships with each other; with patients; and with third parties, and considered that the RANZCO Professional Code of Conduct which incorporated the RANZCO Oath should be read and understood by all, as elements of the Code involved legal obligations. He said that although there were other codes of conduct which Australian and New Zealand doctors must observe, RANZCO considered it of the highest importance to have their own code so that members could base their practices on this. He cautioned that practitioners who find themselves in breach of the code brought disrepute on themselves and their colleagues: that consequences to the profession can be damaging and unexpected such as alteration or removal of Medicare items.

Bill advised that practicing ethically, and engaging with makers of health policy would help to preserve and enhance the balance of public and private health care to ensure equity but prevent rationing of services. He informed the audience that the College was in evolution so that it could be ready for inevitable and constant change: in dynamic relations with Governments, community, international organizations for outreach work, education and research, and the welfare of fellows. He advised that governments, consumer groups and Medicare continually question and seek to alter the classification of and payment for medical services, and two matters affecting ophthalmology in recent years have been the reduction in rebates for cataract surgery, and debate about intra-vitreous injections. He pointed out that it was essential that the College give expert opinion and was involved in negotiations before decisions were made.

Bill advised that the College was a pro-active organization and needed input. He spoke about the workforce and the changing roles of various health professions which involved continuing dialogue about the roles of ophthalmologists, orthoptists, optometrists, and ophthalmic nurses so that all disciplines work together for the benefit of the patient. He also advised that effective communication with the general community in providing reliable information on the RANZCO website was an important role of the College in this age of

self-diagnosis through the internet. Other areas in constant evolution he mentioned were rural and indigenous eye care and international development. In summing up he recognised that initially the starting off of the graduates' careers would require their undivided attention but he appealed to them to eventually take their place in College activities so they could benefit from them and in turn pass on their experience to more junior colleagues.

Bill is married to Claire Jackson, past President of the RACGPs, and they have two daughters and a son. Bill devotes much time to his family and he enjoys travel, whether it is work or pleasure. In his spare time he runs, plays tennis and golf.