Dr Peter O'Connor

RANZCO Censor-in-Chief (1999–2002)

Dr Peter O'Connor was born in Brisbane on 8 August 1940 and was educated at Nudgee College in Brisbane. He gained his MB BS at the University of Queensland in 1965 and worked at the Royal Brisbane Hospital for several years before moving to Melbourne to study ophthalmology at the Royal Victorian Eye and Ear Hospital (RVEEH) from 1970 to 1972. He was awarded MACO in 1973. Dr O'Connor ran a private practice at 3370 Pacific Highway, Springwood.

As Censor-in-Chief, Dr O'Connor guided education policy and operations through a period of review and change, including planning and organising for the move to a five-year program and preliminary preparations for accreditation by the Australian Medical Council (AMC). He introduced quality measures at each stage of a trainee's progress through the Vocational Training Program (VTP) including the strengthening of the "fitness to sit" requirement for candidates for the Part II Examination and improving arrangements for each trainee's final year experience.

During his time as Censor-in-Chief, through the Qualification and Education Committee (QEC), Peter was responsible for setting educational policy and overseeing the delivery of all education and training encompassing the Vocational Training Program (VTP) and examinations, for continuing professional development, for other training including primary eye care for General Practitioners, for the College journal, for assessment of overseas trained specialists, for preparing for the new five year program due to commence in 2004, to contribute to the College's strategic planning process and preparation for accreditation by the Australian Medical Council (AMC).

Assisting the Censor-in-Chief were the Chairs of the seven regional QECs from each State and New Zealand, who oversee the progress of College trainees in their regions through the cooperation of hospitals, universities and College Fellows. The clinical elements are conducted in selected hospitals and university ophthalmology departments in which the College has inspected and accredited training posts. Underpinning every aspect of the VTP are the seven key roles and competencies of expert decision maker, scholar, communicator, collaborator, health advocate, manager, and professional. There were also thirteen committees, boards and "portfolios" covering all educational activities.

"Portfolios" introduced during Peter's tenure as Censor-in-Chief, included Inspector of Training Posts, Director of Supervisors, and Coordinator of Trainee support. Dr Frank Taylor drew up guidelines for the Inspection and Accreditation of Training Posts which set out the teaching and supervision, clinical load, surgical experience and facilities expected of a training post, to be accredited, across the seven roles and associated competencies of the specialist ophthalmologist. Dr Paul McCartney drew up guidelines and assessment forms to support and enhance the skills of some 150 Fellows who

supervise and educate trainees in clinical settings as clinical educators. Dr Lisa Cottee, as a direct contact for trainees who require support or assistance, conducted a survey on trainees' expectations of the training program to provide a basis for reviewing and improving the training experience in all posts.

During Peter's time as Censor-in-Chief, the final Part I Examination was held with the proposal to incorporate the ophthalmic basic sciences into the new five-year VTP to commence in 2004, requirements for each trainee to demonstrate their 'fitness to sit' the Part II Examination was introduced, a comprehensive survey of rural ophthalmologists was conducted to identify ways the College could assist them to fulfil their continuing professional development, working with the Committee of Presidents of Medical Colleges (CPMC), conducted a review of training outside teaching hospitals, introduced "fast tracking" for the filling of "area of need" posts, and worked on rationalising medical registrations.

From the strategic planning meetings, eight key strategic College goals were identified, and major objectives referred to the QEC for action. Plans emerged to implement systems approaches to the VTP, the CPD and the assessment of overseas trained specialists, and to improve the quality of the journal. The term "Continuing Professional Development" was adopted to replace the term "Continuing Medical Education".