

GP LINK Lunches | Dr Danielle McMullen

Dr Kenneth McCroary, Chair of Sydney South West GP Link, hosts a series of meetings with clinical/political/regional individuals or organisations to discuss issues and solutions for GPs working in South Western Sydney.



Dr Danielle McMullen



Dr Ken McCroary

Ken McCroary - As we rapidly near the third anniversary of the first cases of COVID-19, I thought it may be worthwhile to reminisce somewhat about our journey as clinicians and members of the primary healthcare team through the pandemic, particularly as GPs and members of the general practice team, out here in South Western Sydney where we have had a particularly significant impact throughout the pandemic with significant numbers, significant mortality and the unfortunate events of curfew and lockdown.

One of the silver linings I have noticed during the dealings of traversing the COVID pandemic has been the significant collaboration and cooperation between the various levels of health, not just bureaucracy, but government and health districts and the way the various stakeholders have come together working closely and working in difficult circumstances to forward the care of our patients and the wider community.

I have seen cooperation and interaction throughout the GP community as well both on local state and federal levels. Even throughout the most harshest lockdowns and curfews with the wide spread use of virtual and digital technology we were able to continue to meet and work together towards improving outcomes.

Sydney South West GP Link has spent many an hour working closely with the Royal Australian College of General Practitioners and The Australian Medical Association, the Primary Health Network in South West Sydney the Local Health District and more wider, the NSW Ministry for Health and Federal counterparts throughout the pandemic we have spent considerable time working with the AMA particularly the NSW/ACT faculty of the Australian Medical Association and during this time of pandemic Dr Danielle McMullen was the President of the NSW/ACT faculty branch of the Australian Medical Association and did a tremendous job in leading the profession throughout many of the trials and tribulations of the past three years and I am extremely grateful for Danielle for being able to join me today to discuss life as president of NSW AMA throughout the COVID-19 pandemic.

Dr Danielle McMullen is the Vice President of the Australian Medical Association and a GP in Sydney's Inner West. She is the immediate past president of AMA(NSW), holding that role throughout the COVID-19 pandemic. Dr McMullen has demonstrated skills in leadership, effectively engaging decision makers to further the AMA's strategic policy aims. She also developed a significant media presence and was the trusted voice of doctors throughout the pandemic.

Danielle completed her speciality training in general practice in 2016 and has clinical interests in women's health and family planning, mental health, and doctors' health.

Ken McCroary - Thank you so much Danielle for being here today. I know the new role must be even more busy than what you are used to, so I am really pleased for you to be here and thanks for spending the time discussing life throughout the pandemic. Could you give us some insight into the last few years when you were President of NSW AMA and what that was like during a once in a 100 year pandemic?

Danielle McMullen - Yes, I think like many people, actually reflecting on the past couple of years is really challenging and it all blurs together and I think because we have never faced such a pandemic or such chaos in our lifetimes at least, often it is actually really hard to pick it apart. Initially I think my first response to taking over the presidency role in May 2020 was one of naivety really I think we at that stage that this might be three or four months of this strange new virus and then life will get back to normal and I think it is with that hat on that I took on the role thinking I will face this challenge and get us through it and then get on with the business of the rest of the presidency but obviously that wasn't to be and it then consumed the rest of the role for the next two years.

Ken McCroary - So yes, I was going to say just in the right time that you took on the role, that came from a previous background in the AMA how did you get to that role?

Danielle McMullen - Yes I have been involved with the AMA since my internship and that was at my hospital visit where the AMA comes around meeting the interns and they were talking about what the Doctors in Training Committee does and what the AMA does and I thought that sounded like an interesting thing to be involved in. I am one of those strange people who likes going to meetings, so I went along to some of the Doctors in Training Committee meetings and to hear about what was happening at other hospitals and what was important to other junior doctors and ended up chairing that committee and like many things once you start being involved in stuff you work your way through the organisation and up through the ranks.

I joined the board of AMA (NSW) I had more involvement as I went through my GP training bringing the AMA along to be more involved in GP training issues and GP issues more broadly and got engaged with the federal AMA and its GP groups and sticking around still at NSW and on the board for a few years before being vice president when Kean-Seng Lim was our last state president and kept the chain of GPs going and then wound up president last time around and am pleased to say that we have got another GP as our state president again this year with Michael Bonning so certainly a long track record of GP leaders in AMA (NSW).

Ken McCroary - Yes you mentioned you are one of those strange people who likes meetings. That would have been an excellent skill because the amount of meetings you would have had during the pandemic, even the meetings that we were on together, was sort of numerable so tell us about all the meetings you were doing not as much in face-to-face or sorry in person, but more online these days?

Danielle McMullen - I got very adept at zoom and teams and WebEx and whatever other video platforms exist and still yet somehow make the mistake of not coming off mute for meetings now and then, but we really did sort of throw ourselves into doing these meetings.

I think the one good thing about all of the lockdowns and the restrictions was that we had time to do all of those things and balancing clinical work with trying to fit in other bits but it was at least weekly meetings with various levels of the state health department. We were checking in actually as state presidents of the AMAs, we were checking in weekly most days. I would touch base with the staff at AMA NSW and see what kind of calls we were fielding from members and what the key issues were facing our membership and quite often in addition to all of the structured meetings that were happening weekly, fortnightly a few times a week. There was also the ad hoc calls with Kerry Chant probably most often, then here and there with the Health Minister Brad Hazzard when that was necessary and then occasionally we had a couple of face-to-face meetings with the Premier particularly around GP issues and the vaccine rollout because it was just that crazy a time that we really needed to be there active in the space.

Ken McCroary - How did you find those meetings with Kerry and Minister Hazzard and the Premier before she stepped down Gladys as well and your insight into their one understanding of general practice because I find that is lacking a lot in the bureaucracy and also their ability and willingness to assist or help and get the understanding?

Danielle McMullen - I think COVID gave us a bigger sense of collegiality than I have noticed ever before and it did break down some barriers so particularly in the height of those early years 2020 through to sort of the middle of 2021 when there was really that sense of urgency to the situation I could pick up the phone and talk to the health minister directly and that is not always the case. You do sometimes have protocols and procedures and things to go through but I think it was that urgent a time we recognised that with all of the roles we all have we are humans first and everyone was sharing in that stress and really we knew it was key to muck in get together and work out how we were going to get the community through this.

So groups like the AMA and the RACGP worked better together than ever before. The AMA family got along well and as I said those relationships with government were really productive so it was a really unique opportunity to be able to be that involved in decision making and for the decisions to be that shared and that transparent between groups and to happen that quickly. So I think they did get it at least the Health Department in NSW was really trying to get it and we certainly did better I think than some other states. Kerry Chant, I have endless respect for Dr Kerry Chant. She has worked so incredibly hard the past couple of years and has given NSW that leadership and direction that it needed and the involvement of GPs it was very clear from her from the start and from the Premier Gladys Berejiklian at the time, that we needed general practice to be involved and NSW was quicker to do that than some other states and while it wasn't perfect I actually think they did better than some other places. They really did try to understand the pressures of general practice and made a point of calling Charlotte Hespe our State RACGP President and I before key announcements sometimes only five minutes before and making sure we were involved or had as much input as possible to involve GPs.

Ken McCroary - Yes, I agree Kerry is fabulous she is a great friend of GP Link as well as we kind of claim her as one of our own as she did a lot of early work when she was first starting in public health out here in South West Sydney actually.

Danielle McMullen - She did and she takes that so seriously you really got the sense throughout the pandemic she was doing everything she could to make sure vulnerable groups got a voice and particularly when the pandemic was focused in and around South Western Sydney when you guys were struggling more than the rest of the city and the rest of the state she did work really hard to make sure we all supported you in that and that it was a unified Sydney and a unified state as much as possible because she was keenly aware that our most vulnerable Sydneysiders were being disproportionately affected by COVID.

Ken McCroary - Yes, you are actually right, the greatest incidence the greatest amount of infections increased risk of deaths as well with our particularly our CALD population those that don't speak English as their first language which is 40 per cent of our whole population at home. I had to get a permit to drive home from work every day during curfew.

Danielle McMullen - Exactly but so many essential workers work in there we know that such a proportion of our essential workforce lives in South Western Sydney even if they don't work there they work all across the rest of the city.

Ken McCroary - Correct, so that sort of segues into a question I was thinking about whether you have much experience of South Western Sydney first hand yourself or just through the role or what is your understanding of the main challenges and needs that we have out here?

Danielle McMullen - I must admit I don't have a huge experience though at my medical school terms I did a couple of terms out at Campbelltown Hospital but it is not an area I know enough about and that is one of the real shames of my presidency. It was really difficult to get out and about normally the president does try and travel around the city and around the state to really understand the members on the ground and if there is one thing I am disappointed about through the past couple of years is that I didn't get the opportunity to get out and really meet members where they are but I did hear from people over zoom and over the phone from around the state and keenly aware that outer metro Sydney and that particularly west and South Western Sydney is just struggling the financial the socio economic pressures in South Western Sydney and the geographical pressures of actually that might not be that far distance wise but the time it takes to get to where people work is a real challenge, access to healthcare, access to schools climate impacts we spend a lot of time talking about rural and regional NSW but we know that there is a whole different but equally important set of issues facing that outer metro ring in West and South West Sydney.

Ken McCroary - Yes, exactly and climate is becoming more important isn't it. I have been flooded in three times in the last 12 months where I couldn't actually get to work and I am an hour from the city so it is crazy. You brought up climate and I am really pleased about that. What are your thoughts and ideas and input with climate medicine at the moment?

Danielle McMullen - It is a really important issue and I am glad the AMA state and federal level is taking it seriously and at every opportunity calling out that it is a health issue as much as it is a direct climate and economic and every other issue. We talked about the floods and clearly that has been the issue this year but it was only just yesterday that it seems that it was bushfires and the heat related illness we were seeing in Western Sydney from the heating and the drought before that so it seems like for years now there has been a lot of health impacts of climate change.

I think it is now that's clear and I think it is time to talk about what we can do about it. It is time for action and we are working well with the Doctors For The Environment Australia so DEA around practical things doctors and health services and governments can do to reduce the health impacts of climate change and ideally to reduce climate change and reduce global warming but make sure we have got health at the forefront of that and some really great doctors and I think many of them live and work in South West Sydney where they are feeling those effects of climate change more acutely and getting engaged in that part of the world.

Ken McCroary - Yes, great thank you. Now I was going to also ask about the challenges of the last few years as AMA President it was a big job and the pandemic only exacerbated that now professionally and personally, I am sure there would have been a lot of challenges at the time. How did you deal with that and how did you get through it all?

Danielle McMullen - It was tough it still has been a wonderful time and I am so very proud and humbled to have been able to be in the role at that time and to try and be the voice for doctors and a voice of reassuring and sensible voice in the media. But that did come with a lot of pressure there were days certainly when it felt like a really heavy load to be that voice and to be expected to know things when the rules were changing every five seconds and then being expected to be up to the minute on all of that and knowing that my voice particularly in the general media that people were listening and that it was important I took that responsibility really seriously the other bit that was challenging was as everyone knows no one has agreed on everything COVID and it was really the impossible to keep everyone happy all of the time and so constantly having to just make sure we were still providing the best advice and the best direction that we could as an AMA particularly on behalf of doctors and that has been difficult.

But the way I coped is that we have a fantastic team at the AMA so while it looks like it is just one person sometimes in front of the media, cameras and in all of the emails in your inbox it is actually a whole group of people and our board and council worked really closely together with the staff at the AMA that were fantastic and supportive and I have mentioned before the group of health leaders came together unlike usual or more closely than usual and I think really tried to work to support each other as everyone was in the same boat of trying to keep up with constantly changing guidelines and really not knowing what was coming around the corner.

Ken McCroary - Yes, and I consider one of the silver linings of the pandemic the collaboration and cooperation of the GP organisations the health organisations the governments locally state and federally I think that is as you say been the really important and really interesting thing to watch. Now I am sort of seeing it continuing is that the impression that you are getting as well?

Danielle McMullen - I think so. I think I am hopeful that it does keep continuing and so far it seems to I think people recognise that we need to work together particularly after the stresses of the past few years we cant afford to all be competing with each other when actually our goals are the same and so I am hopeful that continues in a positive direction and so far the signs are good which I think is really important for GPs to know because we know the landscape of working in general practice is so challenging at the moment we really need all of our GP leaders, healthcare leaders all of the groups involved to be working together to make sure that we can work and be productive and be happy in our work for the importance of looking after patients It is about patient care in the end and if you don't have a workforce that is well supported patient care suffers.

Ken McCroary - Definitely and to quote you we all do have the same goals and that is why it hasn't made sense with the silos in the different health groups and also the government groups in the past with everyone working differently assuming to have the same goals but at the end of the day we do have the same goals realistically for our patients and the communities outcome how else can we encourage that to go on and improve that communication but also improve the understanding about what we do and what other groups do and how we can all work together for the same goal?

Danielle McMullen - Yes that is a good question and I guess it depends where you are coming from and what you are involved in and I guess for people listening. I guess the first step is just to be engaged with someone outside of your clinic, general practice can be kind of isolating if you are just sitting in your room individually seeing patients all day, so it is at least connecting in your practice with other GPs and talking about what direction you think general practice could head in and how the practice could work together so that everyone is sharing the load and the patients are looked after as well as possible.

And then it is stepping out and saying are there practices around and being involved in something like the GP Link groups and stuff and connecting between the practices getting involved in bigger groups again like the AMA or RACGP special interest groups and taking an interest in health policy and general practice policy or a clinical area of interest so that you can make a difference at that next level up and It is only through I think everyone doing their bit that then we see change then we know that those groups who hold influence with the department with the Ministry of Health are doing our work so at the AMA and RACGP and other bigger organisations, PHN kind of levels, we are then working with Department of Health and with the Ministry of Health to try and make change happen and we are strengthened when we have got the voices of many member feeding into us what it is they really want.

Ken McCroary - Exactly and increasing membership for AMA is something that you must be interested in doing as well?

Danielle McMullen - Always! Obviously we have got an AMA board hat on that would always be fantastic but obviously we speak on behalf of all doctors across all stages of career and specialty and in order to get best patient care to Australians but certainly that voice is strengthened with membership and it is a two-way street we hope members get as much from their membership as they contribute and we love to know we have got that community of doctors that can connect and collaborate and feed into policies and also know they have got the strength of the AMA behind them to support them so they can get on with doing the work day to day with patients they want to do and hopefully they can trust and rely on us to be doing some of that systems and policy work.

Ken McCroary - Yes, my 30 year membership anniversary is actually coming up very quickly unfortunately.

Danielle McMullen - That's Excellent! Thank you.

Ken McCroary - And thank you guys for the support you provide us all as doctors in the region throughout the rest of the state and country. I don't think the guys on the ground know the amount of work like you mentioned the AMA team before which I think was really good because you are a face and a dedicated and an extremely hardworking face but there is a lot of dedication and hard work behind each one of these faces isn't there and there is a lot of hard work that goes on with advocacy for the profession it is quite intense and I don't think it is sort of noticed or appreciated on the ground as it should be.

Danielle McMullen - Yes, I think it is hard for people to grasp what happens. They don't know, as you said it feels like one person talking but there are so many people behind that, so many doctors that volunteer their time to contribute to policy discussions and to strategy and to feed into what the AMA president then says. We don't just come up with it ourselves there is as much as possible we gather that information from members and usually for the past couple of years it has been challenging but it is also good at a social connection point at a NSW AMA Level we have got great social events there is a charitable foundation dinner coming up and the women in medicine high tea that are all events to kind of connect with your peers and bring that collegiate nature together. But yes, as you said on the policy side and the advocacy side there is a lot of work that goes into it a lot of staff expertise as well as doctor expertise to make sure that our positions are as researched as possible and are as much reflective of what is important to the profession as possible.

And sometimes a lot of that negotiation goes on behind closed doors so in order to make things happen it is not always stomping in the street but we get wins and we acknowledge that we have got to do better at communicating some of that back to members so that you know what it is that we are doing for you and that is a goal of mine over the next few years is to make sure that we have got a bit more of two way communication but certainly there are big groups behind the president to help them out.

Ken McCroary - Yes definitely, now you are obviously keen on improving the interaction with the doctors at the network and you have done a lot of networking in the last few years particularly with governments, GP and other doctor organisations as well we are a big area here in South Western Sydney as I was talking before we have got about 1100 GPs in the region now and we have got the rest of the primary health GP-led team as well and there is sometimes is a lot of isolation which is detrimental for many reasons socially, clinically patient outcome wise. What sort of advice would you give someone thinking about engaging, thinking about networking if they are wavering and things what would you say?

Danielle McMullen - I would say it is getting involved with something. If you are feeling professionally isolated or isolated from your network of doctor peers, find somewhere to talk to someone and if it is through the AMA then we have got social events coming up and there is also often I think they are likely to be continuing a couple of open GP forum meetings as kind of just an introduction to our council of general practice we try and hold once or twice a year a more open meeting where GPs from all over the state can join and listen to what is going on. But there are also the local groups that meet or have ways to connect. There is social media as well there is pros and cons to engaging in some of those online doctor groups but step one is just reaching out because we don't need to do this gig alone and medicine and general practice in particular can be tricky it can be isolating and we know the past few years has been particularly stressful so it is really important to make sure that you are reaching out to peers and getting that connection back.

Ken McCroary - Excellent thank you, now just stepping back a little bit about our earlier discussion we were having about the AMA and South West Sydney now how in terms of maybe some specifics and moving forward as well has the AMA assisted those of us out here in South Western Sydney and the ACT as well I guess?

Danielle McMullen - Yes so AMA ACT actually gets its own AMA believe it or not it is a small territory but they get their very own AMA but NSW AMA does cover across obviously all of NSW including South Western Sydney and I know it has been issues in the number of the hospitals there which the AMA has assisted with over the past few years to make sure clinical services remain open, make sure the staff working in those services are supported and now while that may not feel directly relevant to general practice. We are all one health system so if your hospital up the road collapses or the maternity unit shuts because they can't attract obstetricians or because the midwives and the doctors are not getting along or because there is an issue with management that does obviously flow on to your general practice care of patients. So while sometimes it feels like the on the ground AMA support may feel like it is focused at the hospital I do think that also helps the local GP services and then obviously if there are collective group kind of GP issues we are always here to help.

They don't tend to come to us as much, but we are certainly happy to help if they do arise. There has been occasions elsewhere around the state where we have helped some GPs with the PHNs and helped them work together a bit better and then obviously broader big policy issues tend to be managed through the Federal AMA because general practice funding is federal but on that local level the AMA could help if there was a group of practices that were having challenges and then also on an individual practice level we provide that practice support advice around sort of HR and industrial type issues if you needed the help with that in your practice.

Ken McCroary - Yes, I think that is one of the main benefits to the support that if you are owning a practice if you are running a practice if you are working in a practice and have interactions with other practitioners and the staff members the support you guys can provide probably does not come from anywhere else and it is really helpful, isn't it?

Danielle McMullen - Yes, the workplace relations team is a member benefit that people often don't know about but a fantastic team of HR type background people and also workplace lawyers who can help with advice around staffing and support. We run a practice managers conference that has been really popular recently and so keep an eye out to be able to send your practice manager along to that workshop because we have had really great feedback that the practice managers have really enjoyed the support around how to do their job better which hopefully takes a load of the GPs back as well.

Ken McCroary - Yes, now thinking more along your own sort of achievements and things over the last few years and the AMA I guess to, but what have you found or what have you felt have been your greatest achievements in this role that you have recently wound up?

Danielle McMullen - I think getting through the some total of it really was an achievement. I really enjoyed the connection with peers and the relationships built with government but with members around the state as well. And the media side of it was great fun and something really different and I am quite proud of that achievement to have been the newly regular slot on breakfast TV and on radio I think they did say there was something like 570 interviews over the course of that two years or something so no wonder I got used to waking up early in the morning, but it all came together and it was a really rewarding time and despite being really challenging I think one of the funny moments I did manage to get on a video call from Rottneest Island over in WA when we were briefly there I managed to get a Quokka onto my video call with Kerry Chant it was probably highlight of the presidency. Well, the most entertaining part of the presidency, I guess.

Ken McCroary - Oh very good, very good well I was going to ask you what you were most proud of but I think you have sort of already been touching on that. Apart from media what are you most proud of?

Danielle McMullen - I was proud of the profession really. We have always known that doctors go above and beyond and that GPs in particular go above and beyond for the patients but the last few years just really showed that the way everyone dug in and despite facing all of the same stressors themselves we know we are all worried for our own health and the health of our families and yet still went to work every day often without adequate PPE in the early days. GPs waited longer for vaccines than any other group of doctors, but we still turned up to work and held our patients hand through a really difficult time and I am just so proud of general practice for doing that and it was such an honour to be in a position of leadership to be able to convey that to decision makers and be able to tell that story of how wonderful GPs really are.

Ken McCroary - And we are really proud of you and the efforts you, as the leader throughout the pandemic for the wider community, but particularly for GPs, being a GP yourself and pushing the positive impact we have and the important work we have been doing for the community through the pandemic as a group here and the wider profession we are really proud of you to.

Danielle McMullen - Thanks, thanks for that.

Ken McCroary - That's ok. So, sort of opposite now what did you find most difficult?

Danielle McMullen - Personally probably the most difficult time was the lockdown kind of middle of last year. I had already been the president for just over a year you would think you would be getting used to it but it all just kind of ramped up again and there was a lot of pressure on NSW at that time for not locking down fast enough and we were being accused of lockdown light and confusing rules and all of that pressure from around the country.

Plus I was living alone and stuck in isolation like many people were so that was a really challenging time and I think over the two years that was most difficult. We got through it together as a team and I do think that the strength of the relationships we had across health groups in NSW and the trust that we have built with people like Kerry Chant helped us to stick together and not fragment so we got there but that was probably the most difficult period was that sort of July August time in Sydney.

Ken McCroary - Yes, challenges everywhere during that stage. Now just looking back at what we have discussed today and the leadership you have shown throughout the last few years obviously part of a leader is developing the next round of leaders as well. Now how did you develop these skills to become such an effective leader for the profession?

Danielle McMullen - I don't know, I think it is an interesting question. I think some days I reflect and think do I really have these skills, but you land in the place, and you do it and you just do your best at it. I was given lots of opportunities through the AMA to practice obviously through the doctor in training years but even if you came into an organisation as a senior doctor starting at a committee kind of level and getting used to how all of these organisations work sometimes takes a bit of patience because you come in new and enthusiastic and want things to move with speed and you learn pretty quickly that healthcare is slow and it takes a fair bit of patience and persistence to get things through so the AMA team and particularly the CEO Fiona Davies there were really supportive of giving me opportunities to test out my meeting chairing skills and attendance and media skills and taking me out and about to meet members and to build that networking ability so that how is how I got here and that is what I hope to model as well is organisations where we have got opportunities for people to come in and try things out and be involved at whatever level they want to be involved in. You don't have to give up quite as much of your life to an organisation as I have chosen to but there is plenty of opportunities to be involved at a lighter level.

Ken McCroary - And it is not scary, is it?

Danielle McMullen - No, its lovely people. But the reason you do this is that it is fun I mean you wouldn't be involved in the kind of stuff that you do or the kind of stuff that I do if you didn't get something out of it and you meet fantastic people and have interesting conversations and it is a good bit of fun along the way.

Ken McCroary - Absolutely and yes, I think you become more effective when you are enjoying what you are doing don't you think?

Danielle McMullen - Exactly it can't feel like work or else why would you do it. A lot of these things are volunteer roles and so to give up the time that it takes to do things it has got to be enjoyable you have really got to be interested in it and then it does make it a bit of fun and it doesn't feel like work and then you do a great job hopefully at it as well.

Ken McCroary - Yes like 570 media or radio interviews that is crazy numbers.

Danielle McMullen - It is quite a bit, isn't it?

Ken McCroary - That's like one a day throughout your presidency almost so was there training for that as well or was that something that you just morphed into as well with the role.

Danielle McMullen - No thankfully they do training. So I got good media training at the AMA and in fact from time to time we run that around the place for members so it is worth keeping an eye out if you have got an interest in doing a bit of media or a bit of advocacy type of work we also do some member training courses on that side of things to and that is good fun because it is not quite as scary as it seems. I have done a refresher of my media training now for my federal AMA role and I was scared going into the training even after all of my experience but actually it is good fun and there is a few things to watch out for and a few skills that you can gain but it is that part of the fun bit of the role is the media really.

Ken McCroary - **Yes, and whether it is your local newspaper or the federal stuff you are doing nationally the same microphone the same questions the same cameras are staring at you, aren't they?**

Danielle McMullen - Exactly, and in fact it is really important that local doctors and GPs are often turned to for media comment because hospital doctors if they are employed by the hospital have some constraint sometimes on what they can say and so it is really good if GPs are confident to talk to the media and if you are ever approached by the media and you are an AMA member and you want some tips you can always call the AMA and run some ideas by them but it is also worth knowing a few basic things about wanting to get across your few key points and then when the media contacts you knowing that you can say yes I will talk to you later and gather a bit of time to kind of get your thoughts together and work out what it is you really want to say to them and to make sure that you get your story across.

Ken McCroary - **Absolutely, and just the last couple of things I thought maybe the experiences with the decision makers how would you sum that up?**

Danielle McMullen - Generally positive the silver lining as you mentioned before of COVID was that everyone came together and I think more so than usual people recognised that we had the same goal of getting the community through COVID-19 getting them vaccinated when that was the issue. Getting doctors PPE was a little bit more challenging because at that stage people were still arguing whether it was aerosol spread or not which seems crazy now but that was the argument at the time it was.

Generally, though decision makers really were trying to do the best they could and get information from on the ground quickly and turn it into supportive policy in NSW there was good collaboration with GP groups and a recognition that general practice was going to be key at doing the vaccine rollout in particular and making sure our community felt safe and secure now that clearly was not perfect. All off us sat in clinic rooms and you know at 10am on a Friday we are doing something and then the patient that walks in at 11:15 wonders why we don't know that there was that rule change at 11am so we all threw our hands up in the air and shared that frustration about the announcements at the 11am press conference and I can assure you we had stern words with decision makers at all levels that they needed to stop making key clinical announcements in the middle of a work day where it meant that we had no time as clinicians to respond so it was not perfect but they were actually perceptive to hearing feedback and to work pretty well together.

Ken McCroary - **Yes, those Friday presses killed a lot of weekends, didn't they?**

Danielle McMullen - It was just a nightmare I feel awful for every practice owner trying to constantly change the rules or work out how they were going to do work flows and it just again showed how brilliant GPs are and how adaptable and flexible. No wonder we were all exhausted if you think back to those early days when we were literally putting tape on the floor and trying to work out how to get patients in and out of the door safely and where to put staff and where to find staff yes it was all pretty stressful times.

Ken McCroary - Definitely now your journey is not over now that you have completed your work as NSW AMA President you have the new role as Vice President of the federal organisation so just to finish up I am thinking how would you see or how would you like your legacy to look like as NSW President and then what is the future looking like?

Danielle McMullen - I hope that in NSW I am remembered as someone who tried to support the profession support patients and be that sensible middle of the road voice that guided us through a really difficult time. I know I did not get it all perfect I am sure and there will be people who disagreed with things but hopefully that is the legacy I have left and that the spirit of collaboration that we have worked with over the past couple of years that that persists and I will take that into this next federal role so as the Federal Vice President I am working with our President Steve Robson who is an Obstetrician from Canberra and we have clearly said publicly that the primary care in general practice is top of the priority list.

He has generously let me take some of the workload of that given that I am a GP in my day job so things like the strengthening of Medicare taskforce where we have got some funding for general practice not enough to fix general practice but enough to make a start I will be sitting on that taskforce and really working with the other groups there and then am back with the AMA team and Steve to do what we can to continue that collaboration and across the profession and support for GPs so that we can take the best possible care of our patients.

Ken McCroary - We are in great hands so thank you Danielle, thanks so much for joining us today for the GP Link interview we really appreciate all of the work that you have been doing and we look forward to watching your continued achievements in the future so thank you so much.

Danielle McMullen - Thanks very much for having me.

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