

GPSA encouraged by priorities for Tasmanian SEM trial

Friday 27th January 2023

General Practice Supervision Australia (GPSA) welcomes the priorities announced by Prime Minister Anthony Albanese and Premier Jeremy Rockliff for the Single Employer Model (SEM) trial in Tasmania.

“While we remain cautious about any changes to rural GP training that may amplify the perceived urban-rural divide, the way this SEM trial has been explained today is actually quite encouraging,” said GPSA Chairperson, Dr Kevin Arlett, an experienced GP supervisor and practice owner in Townsville.

GPSA is one of the two national peak organisations charged with the responsibility for maintaining and administering the National Terms and Conditions for the Employment of Registrars (NTCER). Along with its sister organisation, General Practice Registrars Australia (GPRA), GPSA concluded the biennial review of the NTCER earlier this week with a commitment to jointly advocating for better conditions for registrars and training practices.

“GPSA has long recognised the injustice of registrars not only losing unused hospital entitlements but also being prevented from accruing leave throughout their multi-employer training, in effect doubly punishing them for choosing the GP specialty.

“While private training practices simply can’t afford more than we already contribute to GP training, we are keen to explore systemic improvements alongside GPRA,” said Dr Arlett.

The Tasmanian SEM will be trialled under a partnership between the Tasmanian and Commonwealth governments to support more training placements in rural and regional areas and provide a sustainable pathway with the goal of strengthening the general practice workforce across Tasmania.

“If the Tasmanian SEM provides a solution that enhances the attractiveness for more doctors to join us in this rewarding specialty, and does so without directly or indirectly imposing further costs on already-strapped training practices, Tasmania can count on our support,” said Dr Arlett.

GPSA represents the GP supervisors and privately-owned practices who both deliver the bulk of training in the GP specialty and provide employment for the majority of AGPT trainees throughout their 6- to 12-month training placements.

“The future of primary health care across Australia relies on the sustainable continuation of GP training. If training practices are forced to their knees by external threats like we’re seeing with Queensland’s new payroll tax ruling, the well will dry up and public health will not cope with the inundation of hospital attendances,” Dr Arlett warned.

“By pitching this SEM as a bridge between hospital-based and community-based training, we are hopeful this will drive home the importance of the GP’s role in continuity of care for, and within, their local community.

“Access is important, but quality is vital; and, for a population with such a high percentage of comorbidities, quality care relies on continuous access to the GP you know and trust. Helping registrars develop these connections is incredibly important for the future of healthcare in this country.

“We look forward to supporting the rural GP supervisors in Tasmania in making this trial a success.”

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