



Reflecting on the past, looking to the future

Annual report

2022 - 2023



Contents

ACKNOWLEDGEMENT OF COUNTRY

GPSA acknowledges Aboriginal and Torres Strait Islander peoples as the traditional and current custodians of the land upon which we work. We respect that this land always was and always will be Aboriginal and Torres Strait Islander land. Aboriginal and Torres Strait Islander peoples' sovereignty has never been ceded. We particularly acknowledge the Dja Dja Wurrung and the Taungurung Peoples of the Kulin Nation, the traditional owners of the lands where our head office is located. We pay our respect to Elders past and present, as well as all Aboriginal people who have fought, and continue to fight, for equality, self-determination, culture, Country and community.

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Welcome and Chair report

Looking back on the 12 months covered in this report, I am so proud of what has been achieved through an undeniably challenging time. It has been a time of considerable change and professional concern for our members, highlighting the importance of our community.

In an unexpected but exciting development, the GPSA Chair who saw in the start of the 2022-23 financial year, Dr Nicole Higgins, stepped down from this role in September 2022 to take up the mantle of RACGP President. Congratulations and thank you to Nicole for all her hard work and excellent leadership of this organisation during her tenure; she has continued both in her RACGP role and we wish her the very best into the future.

After taking on the role of Interim Chair in the interceding period, I was delighted to be elected as Chair at the first meeting of the new Board following the AGM on 13 October 2022.

Ms Carla Taylor, appointed as CEO in June 2022, has done an excellent job over these 12 months. She has been instrumental in seeing GPSA grow

in the opinion of Government and stakeholder organisations, making the GPSA member's voice more readily heard across this sector and beyond.

Together we have engaged with sector stakeholders including DOHAC, RACGP, ACRRM, GPRA, RDAA, AIDA, AAPM, the Rural Health Commissioner, Workforce Planning and Prioritisation (WPP) organisations, AMA, universities and regional training hubs - advocating for our members and community. We have also been meeting with State Governments to represent our members' concerns and interest in the design of jurisdictional Single Employer Model pilots. This has broadened our reach even further.

Firstly, in a respectful process with GPRA, we managed to agree on revised terms for the National Terms and Conditions for Employment of Registrars (NTCER). This is one of our core functions as a peak in the AGPT arena, and, having been unable to find common ground in the 2020 NTCER review, it was wonderful



A handwritten signature in black ink, appearing to be 'K Arlett', written in a cursive style.

Dr Kevin Arlett, Board Chair
MBBS, FRACGP, FAICD

“Ms Carla Taylor, appointed as CEO in June 2022, has done an excellent job over these 12 months. She has been instrumental in seeing GPSA grow in the opinion of Government and stakeholder organisations, making the GPSA member’s voice more readily heard across this sector and beyond.”

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FINANCIAL REPORTS FOR THE
YEAR ENDING 30 JUNE 2023

to reach agreement and collaboratively revise this important document that so many training practices, GP supervisors and registrars rely on for day-to-day operations.

Changes introduced at the 2022 AGM have been implemented through this period, such as changing our trading name from GP Supervisors Australia to GP Supervision Australia. This, and the accompanying change in branding, better reflects our focus on scaffolding the learner through a whole-of-practice approach... It really does “take a village”.

Among the Constitutional changes accepted by Special Resolution at the AGM was the elevation of practice managers of training practices to “Ordinary” member status, allowing PMs to vote and one of their number to be elected onto the Board alongside the six elected supervisors. This again lends to our focus on supporting all members of the practice team, recognising the important part practice managers play in the streamlining of administrative processes and provision of pastoral care for GPs in training.

The lead-up to the transition from the RTOs to College-led training dominated the sector

in 2022, with GPSA playing a key role in disseminating information to empower our members through this particular change to the GP training environment. With so much more than the transition impacting GP supervisors, training practice owners and practice managers through the latter part of 2022 and into early 2023, a late run of enquiries – after the RTOs had wound down and before the Colleges were set up for the start of their training contract – saw the GPSA team providing phone and email support above and beyond our staffing capacity. This is a very special group of dedicated individuals and I thank them for their continued good work.

Integrated as a central tenet of the organisation, research now underpins all of GPSA’s work in education, advocacy and policy. Our Director of Research and Policy, Dr Samia Toukhsati, has taken GPSA to new heights in this area, and is currently leading a very capable team, and a very impressive collaboration of GP training experts, in the development of a quality improvement tool based on an earlier GPSA research project, the General Practice Clinical Learning Environment (GPCLE). Sami

also works closely with GPSA’s well-known Education Manager, Dr Simon Morgan, to ensure research findings are translated into best practice educational resources and interventions, and together they are working on several projects such as a supervision support program specific to the Northern Territory.

While so much was completed in this 12-month period, this only scratches the surface of all the achievements due to be realised in the next financial period. While the virtual community of practice, GPSA Community, was launched in mid-March, this has really taken off since July 2023, confirming our members’ need for connectivity and willingness to support one another via a simple communication channel. This additional service, like our CPD delivery and management, our webinars, online tools and resources, is again provided at no cost to our members.

I’d like to thank you all for your continued involvement, support and participation in our very unique and special community of practice. We look forward to bringing you more tools, innovations and services in the year ahead.

From the CEO

Before taking up the mantle as CEO, for over two years I had been working with the GPSA team in the background - developing educational content and working on research projects that gave me the chance to chat with (in the guise of 'interviewing') many members of this **inspirational community**. I remember being shocked at the prevalence of **imposter syndrome** amongst supervisors of GPs in training, particularly when those trainees had vast experience in a different medical specialty. After searching through all of our resources, I was struck by the absence of anything in GPSA's arsenal designed to minimise the impact of what I recognised as **professional denigration** and **practitioner isolation** on the **confidence and career satisfaction** of GP supervisors.

When I succumbed to imposter syndrome myself, after receiving the call from our then-Chair asking this business person with low self-esteem and no medical background to take the CEO title permanently in June 2022, Nicole encouraged me to **stop, reflect and talk it out**. This nifty GP supervisor prompt helped me see how my previous life as a corporate CEO

and founding director of a bilateral chamber of commerce had prepared me for this role in some really good ways.

Without being challenged to apply the skills and experience accumulated over 20 years, I might have missed what is quite simply **the most fulfilling role of my life**. If only the supervisors suffering feelings of inadequacy could have the same encouragement from their supervisor peers... And voila, the concept of GPSA's **Community platform** was born!

With the support of a dedicated and passionate Board and a small but immensely skilled team. I am thrilled we have been able to explore and start implementing solutions as a member organisation, starting with a virtual Community of Practice **empowering** our members to **support one another**. This is functional in terms of connectivity, yes, which helps our team better represent the community's needs; but more than that, it is symbolic of a unified body of supervisors, practice managers and practice owners in the Australian GP training context that can speak as one voice, have a seat at every

table, and stand tall as a force to be reckoned with. In short, this tool has been introduced as part of our increasing focus on enabling **self-determination**, which is particularly important in this rapidly changing healthcare, education and economic environment.

While this annual report is a comprehensive summary of our achievements and work for the past 12 months, it also contains plans for the future.



A handwritten signature in black ink, appearing to read 'Carla Taylor'.

Carla Taylor, CEO
BA(HONS), MBA(INT), MCOMM

Proactively responding to community needs

Highlights



- **GP**SA Chair, [Dr Nicole Higgins, elected President RACGP, September 2022](#)
- **New Chair**, [Dr Kevin Arlett, Interim Chair from October 2022, elected Chair December 2022](#)
- **First full year of CEO** [Ms Carla Taylor, appointed June 2022](#)
- [Networking with members as GP conferences returned after the 3-year COVID hiatus](#)
- [Rebranding the organisation](#) to better reflect strategic direction
- [Updating of Constitution by Special Resolution](#) including introduction of Practice Managers as “Ordinary” members - opening up option for members to elect a PM representative to the GPSA Board
- [Successful collaborative revision of the NTCER with GPRA](#) and [updating of this Agreement for 2023.2 / 2024.1](#)
- [Regular engagement](#) with key stakeholders including DOHAC, RACGP, ACRRM, GPRA, RDAA, AIDA, AAPM, Rural Health Commissioner, Workforce Planning and Prioritisation (WPP) organisations, AMA, and various State health agencies, universities and regional training hubs
- [Collaborating widely](#), for example on vital GP training research: notably working with GPRA for the first time to embed the registrar perspective in research translation
- Launch of innovative [GPSA Community platform](#) tying into the GPSA website
- Commencing [development of quality improvement tool after being awarded 2023 RACGP Education Research Grant \(ERG\)](#)
- Expansion of [GPSA Supervision](#) and [Employment resources](#) to underpin high quality training placements
- [Ongoing advocacy](#) for members including:
 - [Including the priorities of supervisors and practice teams in Single Employer Model \(SEM\) discussions](#)
 - [GP practice payroll tax ruling](#)
- GPSA’s appointment as an [approved CPD provider](#) for RACGP
- [Responsive to industry and community needs throughout the pre- and post-transition period for GP Training](#), in particular [facilitating sector communication on key topics](#) such as [supervisor and practice payments under the National Consistent Payment \(NCP\) framework](#)
- [Ensuring an ongoing commitment to Supervisor Liaison Officer \(SLO\) national networking](#) by enshrining the newly named SLO Advisory Council in an MOU between GPSA, ACRRM and RACGP
- [Driving initiatives and innovations for the sector](#)

Achievements snapshot



8316

GPSA members



\$120.66

Cost per member



984

Activated Users on
GPSA Community



10

Groups in GPSA
Community



26

New resources



163,511

Resource engagements



128,172

Views of supervision
support resources



35,339

Views of employment
support resources



15

New
webinars

3927

Webinar
registrations

1928

Live Webinar
attendance

8.05

Average webinar rating
(15 webinars)

GPSA webinar:

Navigating Services Australia for Practice/Supervisor Payments

1415 YouTube views, **961** registrations, **451** attendees

41,535

GPSA videos viewed on YouTube*

*Cumulative 2016 - 2023

21,152

GPSA podcast listens^

^Cumulative 2019 - 2023



10 years of conducting the National Supervisor Survey

Rebranding

Rebranding to better serve our community

For more than a decade, GPSA has been funded by the Australian Government as the nation's peak organisation for GP supervisors delivering in-practice training for registrars on the Commonwealth AGPT program.

With the impact of COVID and a significant Medicare freeze translating into a profession widely labeled as "in crisis", in mid-2022 we realised it was time to remind the sector that GPSA is not just a peak tied to AGPT activities, but a membership body with a reach of over 10,000 participants in GP training. And these individuals deserve to have a voice.

The extension of this, was the change in trading name to General Practice Supervision Australia. A name to represent not only GP supervisors, but all members of the practice team involved in training: individuals for whom we aim to provide true scaffolding in the same way that they scaffold the medical student, prevocational learner and GP-in-training. Without this amazing community, there will be no general practice in the future.

[Read more](#)

NEW TRADING NAME - NEW SCOPE - NEW OPPORTUNITIES



New funding models



Improving reach and impact



Empowering our community



Sector conduit

Helping your voice be heard

As the peak organisation for GP and RG training across Australia, GPSA acts as a sector conduit – connecting our members with Commonwealth and state governments, the GP specialty training Colleges, universities, affiliated peaks like GPRA, RDAA, AIDA and others.

In our regular meetings with both Colleges, and our participation in sector stakeholder for a such as the GP Training Advisory Committee (GPTAC), National Council of Primary Care Doctors and WPP steering groups, we have the opportunity to inject the voice of our members into pivotal discussions for the GP training sector and this profession that relies on sustainable high quality supervision into the future.

- We connect members with Commonwealth and state governments, GP specialty training colleges, universities, peak bodies and others.
- We inject our members voice into pivotal discussions for the GP training sector.
- We provided support and information to members during the transition to College-led training.

Transition to College-led training

The transition to College-Led training dominated the sector during 2022, ramping up stakeholder engagement in the second half of the year as a major focus for GPSA.

Member feedback was that the transition from training under the RTOs has proceeded without any major hiccups; but, as can be expected with a change of that size and scale, not everything went as expected.

GPSA provided support for our members throughout, and importantly in the early stages of 2023 when the RTOs were no longer operating and RACGP and ACRRM were yet to formally take over day to day management of GP Training.

We responded to well over 1,000 phone call and email enquiries from members seeking assistance in the first 6 months of the new training era.

[Read more](#)

Connection

From member engagement to advocacy

At GPSA we take the role of member advocate very seriously.

We are constantly seeking the contribution of our members to ensure all the best practice resources we produce, and all of the research and stakeholder engagement we undertake, reflects the needs of this vital community of practice. From these priorities we developed the GPSA Community platform.

Recognising that the greatest strength participants in GP training have is their connection with one another, we set about developing communication channels for peer-to-peer networking and mentoring. These communication channels enable member engagement which in turn informs our day to day dealings with RACGP and ACRRM, with whom we are advocating in the context of this new era of College-led training – arguing for equitable placement policies, networking opportunities and the such.

[Read more](#)

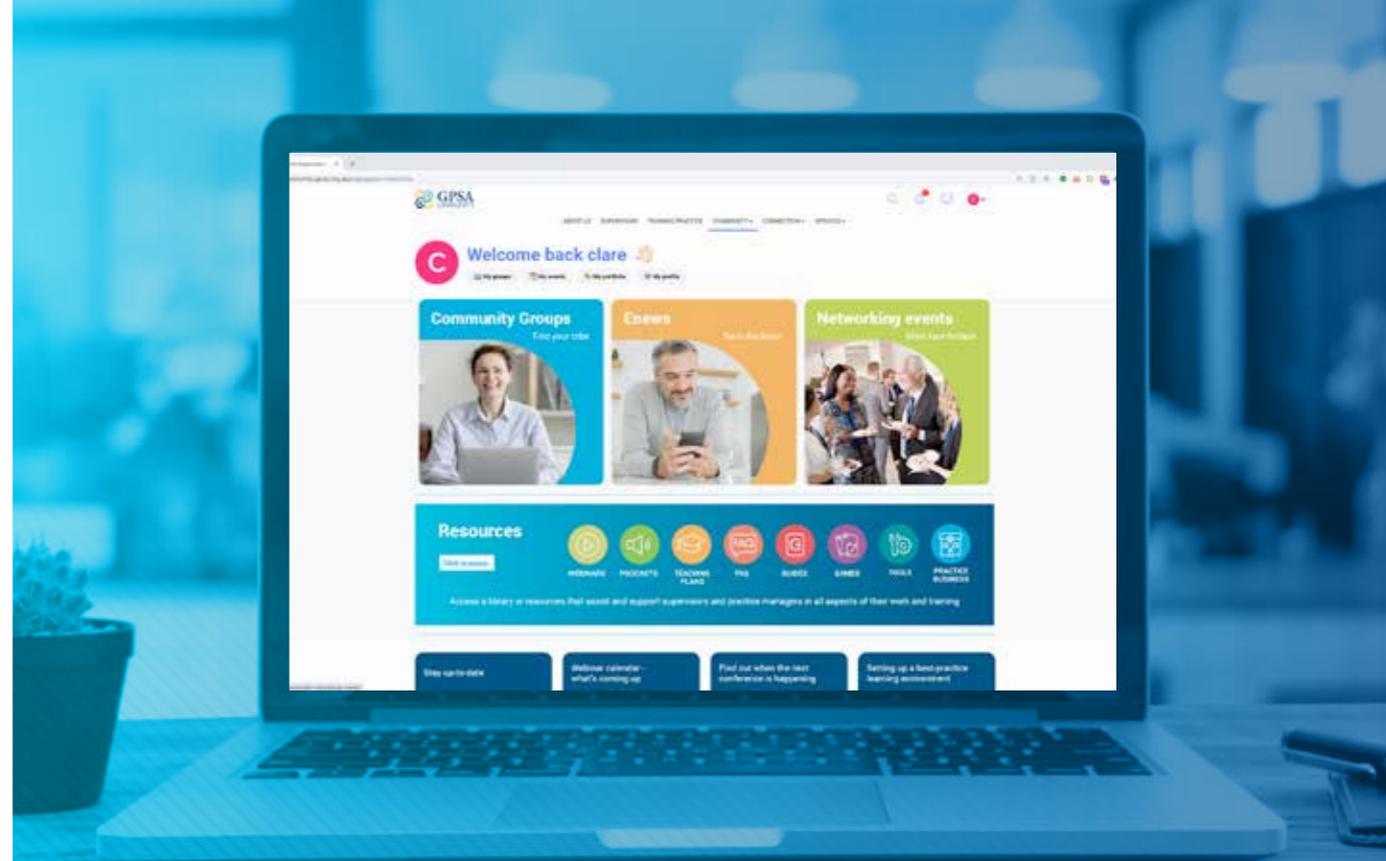
Within the broader sector, we take the position that GPSA's members need to be represented as not just practitioners or businesses but the most important component in the development of tomorrow's primary healthcare workforce. This perspective has expanded our advocacy focus into areas in which GPSA has not traditionally had a voice.

Community Platform

GPSA Community platform was launched March 2023



Data from mid-March to end June 2023



- Set up your own bespoke community group or join an existing one.
- Develop your knowledge with our latest research.
- Give and receive advice, support and fellowship.
- Find out what's happening in the sector.
- Stay up-to-date with our latest eNews.
- Notifications to CPD events.
- Access to free webinars.
- Converse with peers.

Join your GPSA community



<https://community.gpsa.org.au/page/gpsa-community>

Who we are

GPSA is a passionate community supported by a dedicated team, which is in turn guided by an experienced Board of Directors elected by and from the community.

Your community

As individual GPs and businesses operating in isolation across Australia, supervisors and training practice owners are all too often overlooked or at best underappreciated for their crucial role in the continuation of the primary healthcare sector. By uniting these individuals and businesses as a community of practice, their single unified voice has the potential to create unprecedented change.

The GPSA community is as diverse and exciting as the medical specialty it is responsible for perpetuating. The medical professionals and administrators who make up almost 10,000 GPSA members are all involved in, or aspiring to contribute to, the supervision of tomorrow's GPs and RGs. This supervising community is spread across the country, both in the traditional general practice setting and, more frequently now, outside the community clinic in contexts including public hospitals, state healthcare clinics, ACCHOs, AMSs, RFDS and the ADF, among others.



**GPSA not only supports this community
– GPSA *is* this community**

Your team



Ms Carla Taylor
Chief Executive Officer



Ms Leonie Chamberlain
Chief Operations Officer



Dr Samia Toukhsati
Director of Research
and Policy



Dr Simon Morgan
Education Manager



Dr Jess Wrigley
Education Associate



Ms Maryse Mascitti
Operations Manager



Ms Jane McMahon
Administration Officer
– Operational Support



Ms Karen Andrews
Administration Officer
– Governance

We may be small, but that's what makes us nimble... And it helps that we have a passion for supporting the people committed to high quality supervision for tomorrow's GPs.

Your Board

Governing a Not-For-Profit organisation is far from easy, but supporting this community of their peers to drive positive change makes the role of the GPSA Director vastly rewarding.



Dr Kevin Arlett (Chair)
MBBS, FRACGP, FAICD



Dr Madhu Tamaralarasan (Deputy Chair)
MBChB, MRCP(UK2005), FRACGP, MSpMed



Dr Kate Manderson
Med Sci, MBBS (Hons), DAvMed, MPH,
FRACGP, FACAsM, GAICD, CMDR RANR



Dr Justin Coleman
MBBS, FRACGP, MPH, GAICD



Dr Srishti Dutta
MBBS, MRCP, FRACGP, DFSRH, DRCOG



Mrs Leonie Chamberlain (appointed)
CPA, GAICD



Dr Candice Baker
MBBS, FRACGP



Dr Frank Maldari
MBBS, FRACGP

What we do

Our values

There are four words that encapsulate what GPSA stands for: our culture, who we are, what we do, and how we do it. These are the core values that have guided the organisation through growth and change, challenge and celebration, and will continue to do so into the future.



Commitment



Curiosity



Compassion



Collaboration

Our mission and vision



Mission

If our values are the “how”... the “what” of GPSA’s MISSION can be described as striving to nurture the passion that drives the GP training sector through service, support, research, innovation, education and advocacy.



Vision

The “why” of GPSA’s VISION is the singular goal we work towards tirelessly: to be the voice of a thriving GP training sector that is united, suitably recognised, rewarded, and respected as the cornerstone of this nation’s healthcare system.

Our strategic priorities



OBJECTIVE ONE

GPSA is a thought leader in GP supervision

- Stakeholder engagement
- Policy
- Improvement



OBJECTIVE THREE

GP supervision follows best practice

- GPCLE
- Research
- Research translation and implementation



OBJECTIVE TWO

GP supervisors are supported to be effective

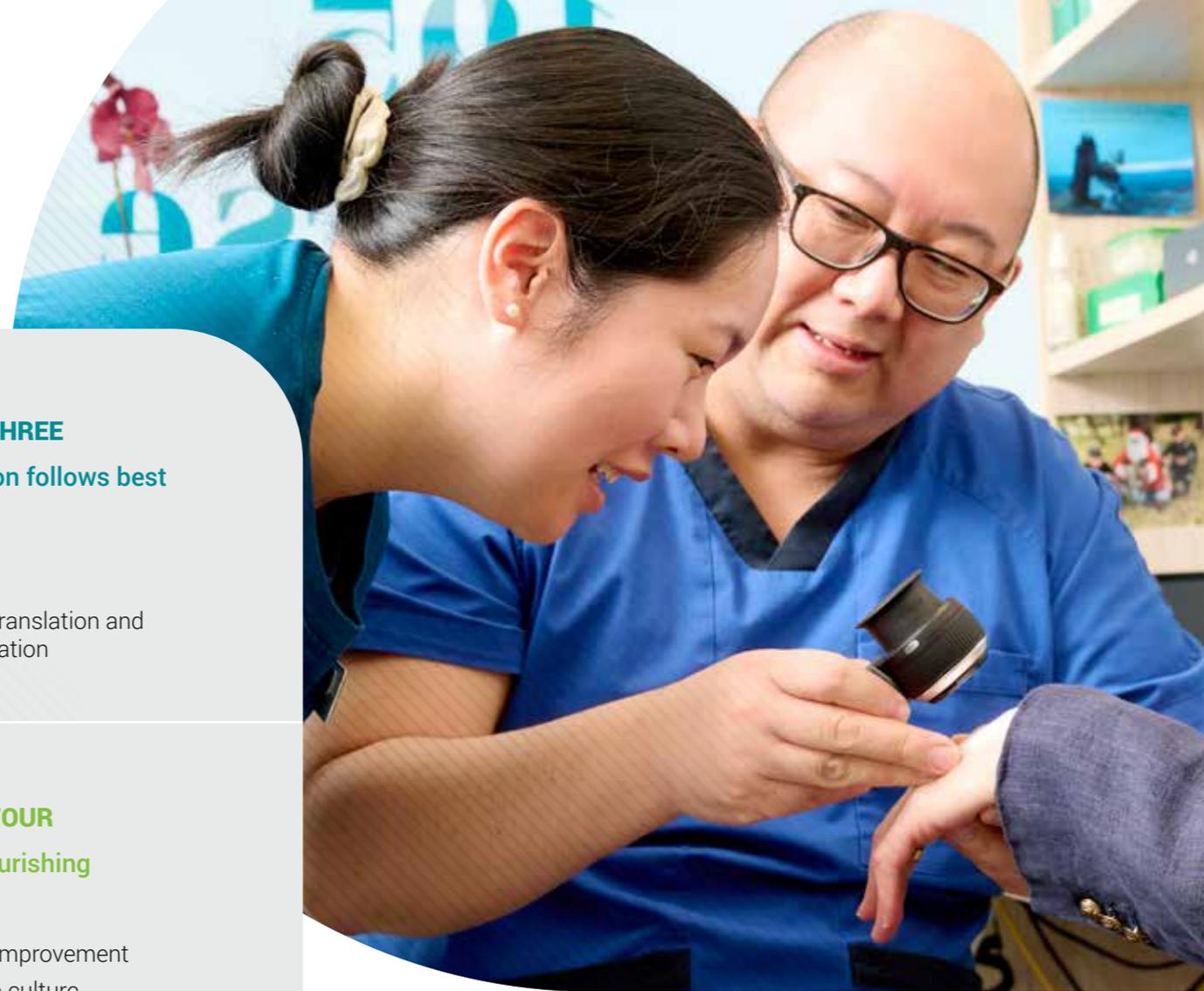
- Member engagement
- Needs analysis
- Advocacy



OBJECTIVE FOUR

GPSA is a flourishing organisation

- Continual improvement
- Leadership culture
- Innovation
- Risk management



How our priorities translate for our community

Research underpins everything we do

Our research mission is to support quality GP/RG training through evidence-based resources that in turn support member wellbeing and satisfaction by building workforce capacity and resilience.

Through direct engagement with our membership, key stakeholders, industry partners and academics in various fora, we translate the priorities of the GP/RG training sector into our research agenda to provide an evidence-base that informs our advocacy, policy and education.



The quality of our research has been recognised by recent invitations to present papers at major industry conferences, including RMA22, GP22, GPME23, WONCA23 and RMA23. These events provide a forum to showcase and disseminate our findings and share implementation strategies for translating our research into policy and best practice. Equally as important, these events provide a forum for workshopping projects to ensure that our agenda is well informed and shaped by the GP training community.

GPSA continues to break new ground to advance our evidence base in areas that support our membership to achieve best practice delivery in GP training.

Education defining our point of difference

Having clarity around what makes GPSA different from other stakeholders in GP training - defining what our educational focus is in terms of “how” supervision is delivered as opposed to “what” is taught - might seem like a small thing. But what it has led to for our team, and in turn our members, is really very significant.

Through this “how to” lens, the synergies between education and research, education and advocacy, education and member services all become clearer. The close integration of the education team with the research and policy team throughout the last year has enabled us to maximise the research/evaluation benefits of educational development, and vice versa. It is in this context that the educational gains of research projects really makes sense. In 2023, this has manifested through the formal

evaluation of GPSA’s Dementia Training Australia webinar series and the PQRST case discussion tool, contribution to current and potential Educational Research Grant (ERG) projects, joint conference abstracts and presentations, and, more broadly, greater cohesion of activity.

The development of this education-research joint focus was made possible in February 2023 when, after many years working with GPSA in a casual capacity, Dr Simon Morgan took up a permanent role as our Education Manager. The education team was then bolstered in April 2023 when Dr Jess Wrigley joined as a casual Education Associate. Both Simon and Jess work as GPs and medical educators for the RACGP, bringing clinical and GP training expertise to these roles.

Best practice



Our best practice research projects tackle contemporary challenges through evidence-based evaluation to drive innovation, quality improvement and excellence in GP training. The translation of research into policy is one of the high impact ways that we drive change to ensure best practice GP training.

evaluate | innovate | translate | policy

Completed projects

RECIPROCAL VULNERABILITY

An exploration of the GP supervisor-GP registrar relationship, focussing on mutual willingness to disclose areas of professional or personal uncertainty and the impact on trust and learning opportunities.

Projects underway

LEARNING TOGETHER

GPSA has begun a formal evaluation of its education program to develop an evidence-base that will drive quality improvement. Several approaches to learning are currently under evaluation, such joint teaching of GP supervisors/registrars.



Presentations

BAD ATTITUDE? CONFLICT IN GP TRAINING

RMA22, OCT 22, ACT AUSTRALIA

Toukhsati S, Kippen R, Wallace, Taylor C

WOMEN GP SUPERVISORS: UPTAKE AND SUSTAINABILITY.

RMA22, OCT 22, ACT AUSTRALIA

O'Sullivan B, Wearne E, Kippen R, Taylor C, Toukhsati S

Best practice

Supervisor support



Online education

GPSA has provided a wide range of educational webinars throughout the 2022-23 financial year, interspersed with informational presentations by the Colleges, DOHAC and Services Australia to best equip our supervisor members for the transition to College-led training:

- Workers Compensation: A General Practice Approach
- Transition Update: ACRRM Flexible Funding Update
- ACRRM: The Future of GP Training
- Transition Update Series: Navigating Services Australia For Practice/Supervisor Payments
- Men's Health
- Best practice supervision
- The Future of GP Training: a Joint Presentation by ACRRM and RACGP
- Teaching and learning
- Bi-College Webinar Update Q&A session
- Consultation skills
- Teaching Your Registrar About Best Practice Aboriginal and Torres Strait Islander Health
- Aboriginal and Torres Strait Islander health
- Department of Health update – National Consistent Payments (NCP) and Flexible Funding
- Long COVID
- Practice Managers: What you need to know for 2023

Best practice Supervisor support

Professional development

From 2023, the Medical Board of Australia (MBA) changed CPD for all doctors, in all disciplines, across Australia. Moving from a points-based to a time-based model, three new CPD activity types now need to be covered in 50 hours per annum:

- **Educational activities (EA)** that expand your knowledge and skills
- **Reviewing performance (RP)** activities that encourage you to reflect on feedback about your work
- **Measuring outcomes (MO)** activities that use your work data to ensure quality results

In response to these changes and GPSA's advocacy around reducing burdens for GP supervisors, the RACGP has structured CPD bundles for primary supervisors to have their supervision work recognised as significantly fulfilling the new MBA requirements.

Acknowledging that this is still not addressing the needs of the many hundreds of GPs and RGs providing supervision without formal acknowledgement in the AGPT space, not to mention the thousands more supervising medical students and prevocational learners without access to these CPD bundles, GPSA has strived to minimise the professional development burden on all supervisors by seeking accreditation as an approved CPD Provider with both Colleges.

For RACGP, this now gives our members access to CPD hours automatically credited to their CPD Home account when they participate in GPSA research or attend our webinars and workshops. ACRRM has a different system that involves self-reporting, for which we are happy to provide certificates of attendance to meet their CPD Home requirements.



RACGP CPD Provider

GPSA is now an accredited RACGP CPD provider for our educational webinars, workshops and our research focus groups and interviews.

Equivalent CPD provider status is in progress with ACRRM. GPSA's comprehensive range of supervisor and general practice resources also count towards your CPD.

GPSA is proud to provide quality educational support.

Best practice Supervisor support

Resources

Developed by our research and educational teams, GPSA's resources are highly valued by our members. A snapshot of our comprehensive resources are outlined below. Visit our website to see our full library. They are categorised by the following:



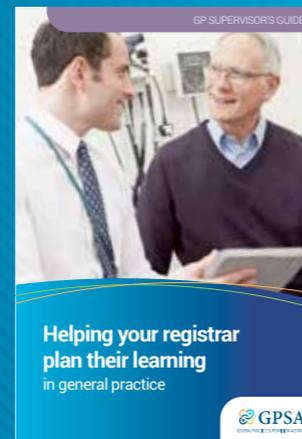
- **Collated by type:**
 - Teaching plans
 - Guides
 - Webinars, FAQs and podcasts
 - How to...
 - Tools
- **Collated by topic:**
 - Topics such as patient safety, supervisor role, consultation skills, teaching and learning, assessment and feedback, pastoral care, etc.
- **Consultation Skills Toolbox:**
 - Consultation models
 - Consultation skills
 - Challenging consultations



128,172
Views of supervision support resources



163,511
Resource engagements



GPSA has an extensive library of resources. These are researched and written by our research and education teams, are current and valuable in the teaching of GP registrars.

Best practice Supervisor support

Direction for 2023-24

A new addition to GPSA's suite of resources has been the development of the 'How to...' guides, a simple two-pager designed to help supervisors deliver effective in-practice teaching. These include case discussion, assessing and teaching clinical reasoning, giving feedback and doing random case analysis. And watch this space, as more are under development.

We are also very excited to announce the much-loved GP Synergy teaching tool, 'Clinical Reasoning: the game', has been developed into a web-based resource through the first half of 2023 and is [now available on the GPSA website](#). It is a privilege to be able to continue providing access to this wonderful learning resource, whose IP was gifted to GPSA at the start of the year.

NEW TECHNOLOGY

Building on the theme of modernising and improving accessibility to key educational tools, since April 2023 Carla and the education team have been working on a mobile app for those rainy days of supervision.

Like the teaching plans, flashcards and guides drawn on for inspiration, this tool has been designed for convenience: putting a supervision toolbox in your pocket. Literally. Scheduled for release through the Apple Store / Android Playstore in time for RMA23.

Recognising the value of a mobile app as a means of extending GPSA's reach to the international community of family doctors, two additional apps are being scoped for development through 2023-24. We look forward to sharing more about these over the next year.

Sharpen reasoning skills

NEW!

A teaching toolbox
at your fingertips

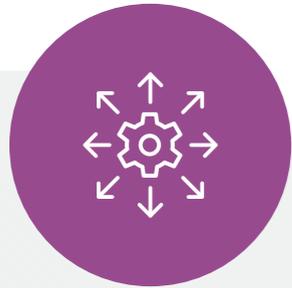
 **GPSA**
GENERAL PRACTICE SUPERVISION AUSTRALIA

Free download from
your app store



Research theme 2

Capacity building and resilience



Research in this theme is driven by GPSA's vision to support a thriving and sustainable GP training sector as the cornerstone of Australia's healthcare system. To do so, we tackle big picture challenges to build capacity and resilience in the GP workforce by attracting doctors to general practice as a speciality of choice. We achieve impact 'at the coalface' by translating research into policies that enable, include, and retain those involved in GP training through evidenced-based support and advocacy.

attract | enable | include | retain

Completed projects

SINGLE EMPLOYER MODEL

In collaboration with Monash University, GPSA supported a Scholarly Intensive Project to document policies pertaining to the development of the single employer model and explore the application of this model towards attracting and retaining doctors to rural generalism

Projects underway

EXCELLENCE IN GP TRAINING

This project, funded by the RACGP, will translate the General Practice Clinical Learning environment (GPCLE) framework into a tool that will enable quality improvement in GP training.



Presentations

WOMEN GP SUPERVISORS: UPTAKE AND SUSTAINABILITY.

RMA22, OCT 22, ACT AUSTRALIA

O'Sullivan B, Wearne E, Kippen R, Taylor C, Toukhsati S

Spotlight on:

Showcasing the intersection between Research and Education

In collaboration with our research 'dream team' comprising key stakeholders involved in GP/RG training, industry partners and academia, GPSA was awarded a competitive Education Research Grant by the RACGP in March 2023.

This project will translate the nationally endorsed General Practice Clinical Learning Environment (GPCLE) framework into practice through the development of a GPCLE quality improvement tool for training practices. Using a mixed-methods design, this 12 month project:

1. is enlisting key stakeholders in GP/RG training to co-design a GPCLE quality improvement tool
2. will invite the GP training sector to review the GPCLE quality improvement tool
3. will validate the GPCLE tool in GP/RG training practices

This project will equip supervisors and training practices with a quality improvement tool for achieving best practice in the GP Clinical Learning Environment.

Raising the quality of training experiences will attract medical students and junior doctors and retain them in general practice as a specialty of choice and ensure that the workforce is 'primary-care ready' and able to meet the primary care health needs of all Australians.



Educational Research Grant

SUPPORTING BEST PRACTICE IN THE GP CLINICAL LEARNING ENVIRONMENT: A BENCHMARKING AND QUALITY IMPROVEMENT TOOL.

MARCH 2023 - Project Lead: Toukhsati SR (GPSA)

FUNDING BODY: RACGP, Education Research Grant

Capacity building and resilience Training practice support

Resources

Outcomes informing new resources to optimise placement experiences

Just one example of how our capacity building and resilience focus translates to enhance placement experiences in the GP clinical learning environment is the guide and accompanying tools for supervisors and practice managers: “[Proactively Addressing Conflict in Registrar Placements](#)”.

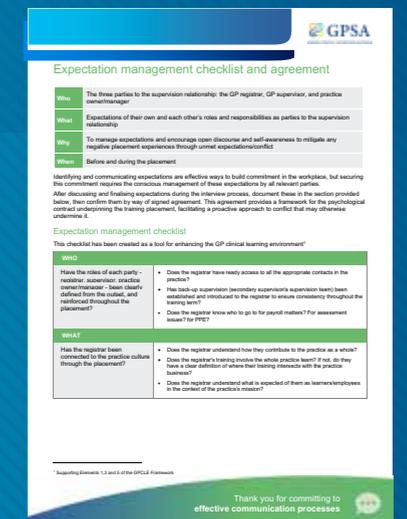
These resources further the objectives of a best practice learning environment through tools enabling core components of positive placement experiences, such as:

- The arrival of learners being anticipated and planned
- Learners receiving an appropriate orientation and induction to the practice
- Realistic expectations of learners and supervision teams

- Problems identified and discussed in a timely fashion
- Practice staff and learners being educated about what is meant by good communication and how to achieve it

The research project underpinning these specific resources was a first-of-its-kind for GPSA, involving not only a quantitative and qualitative approach to data collection (conducted through the first half of 2022), but a subsequent review of the draft guide and tools by focus groups - involving the end users in every stage of the development of the tools designed to help them. Marking GPSA's first research collaboration with GPRA, another first in this process was the involvement of both practice manager and registrar cohorts.

Proactively Addressing Conflict in Registrar Placements



Conflict

Top ten sources of conflict

Conflict in general practice training is common. In our recent survey of GP supervisors, registrars and practice managers, we found that most respondents had obtained or experienced conflict in GP training. Most of the GP supervisors and practice managers believed these conflicts were easily resolved, however, registrars generally did not. The most common of these conflicts are listed and presented in Table 1.

TABLE 1: THE TOP TEN SOURCES OF CONFLICT IN REGISTRAR PLACEMENTS

Rank	Source of Conflict
1	Attitude of registrar or supervisor/practice manager
2	Giving and/or accepting feedback
3	Poor communication
4	Employment conditions
5	Rosters and scheduling of patients
6	Personality differences
7	Basic salary and payment of bonuses
8	Registrar "fit": mismatch between registrar and the practice
9	Approach to teaching
10	Leave entitlements



Expectation management checklist and agreement

Who: The three parties to the supervision relationship: the GP registrar, GP supervisor, and practice manager/manager

What: Expectations of their own and each other's roles and responsibilities as parties to the supervision relationship

Why: To manage expectations and encourage open discourse and self-awareness to mitigate any negative placement experiences through verbal expectations/conflict

When: Before and during the placement.

Identifying and communicating expectations are effective ways to build commitment in the workplace, but securing this commitment requires the conscious management of these expectations by all relevant parties. After discussing and finalising expectations during the interview process, document these in the section provided below, then confirm them by way of signed agreement. This agreement provides a framework for the psychological contract underpinning the training placement, facilitating a proactive approach to conflict that may otherwise undermine it.

Expectation management checklist

This checklist has been created as a tool for enhancing the GP clinical learning environment*

WHO

Have the roles of each party - registrar, supervisor, practice manager/manager - been clearly defined from the outset, and reinforced throughout the placement?

- Does the registrar have ready access to all the appropriate contacts in the practice?
- Has the GP supervisor (practice manager/manager) been identified and introduced to the registrar to ensure consistency throughout the placement?
- Does the registrar know who to go to for payroll matters? For assessment support? PFI?

WHAT

Has the registrar been contracted to the practice before the placement?

- Does the registrar understand how they contribute to the practice as a whole?
- Does the registrar's training involve the whole practice team? If not, do they have a clear indication of where their training interests with the practice are?
- Does the registrar understand what is expected of them as learners/employees in the context of the practice's mission?

* Supporting Elements 1.2 and 4 of the GPCLC Framework

Thank you for committing to effective communication processes

Capacity building and resilience

Training practice support

National Terms and Conditions for the Employment of Registrars (NTCER)

Through the second half of 2022 we worked closely with GPRA to deliver an updated National Terms and Conditions for the Employment of Registrars (NTCER) – one which better reflects the needs of the changing sector. This was a respectful, collaborative process that forged a far stronger working relationship between the two peaks, with this biennial review showing the sector that our members really are the two sides of the GP training coin.

The 2022 Review of the NTCER resulted in a number of revisions to the Agreement, introduced across four training semesters starting on 1st February 2023 (2023.1):

- staggered 4% increase to minimum Base Rate
- extending Educational Release support for GPT3/CGT3 registrars
- amending Educational Release to provide full-time parity for part-time registrars
- strengthened focus on fatigue management through increase in allocated administration time
- revised Preamble to emphasise the minimum nature of the terms and conditions under the NTCER, above which practices and registrars are free to negotiate for mutual benefit and according to commercial viability
- replacing the Restrictive Covenant with a Non-Solicitation clause.



Resources for Training Practices

The supervision of registrars is a whole-of-practice endeavour. A high quality training experience will build trust and connection, greatly increasing the likelihood of the trainee staying or returning to the practice once Felled.

- Checklists
- Guides
- Webinars, FAQs and podcasts
- Online resources
- Documents

Capacity building and resilience

Training practice support

GPSA building capacity and resilience in the people central to general practice for the future

After 3 years without face-to-face conferences, the ACRRM and RDA RMA22 conference in October was a welcome symbol of much-needed hope. In this celebration of rural and remote medicine, general practice was a clear winner with GPs and RGs from across the country coming together after far too long. Dr Samia Toukhsati contributed four stellar presentations to an engrossing program, and a range of enthusiastic exhibitors and engaged delegates made this an opportunity to re-connect, re-charge, and re-calibrate. The GPSA team caught up with a significant number of new and old faces at our booth and at the Supervisor Lunch we were delighted to sponsor.

For the 1500+ RACGP members in Melbourne for the last weekend in November, networking with colleagues made GP22 extra special too. For every person we spoke to about their fears for the future of GP training, we met at least three whose optimism and confidence shone through. This is what makes our sector so special.

The 2023 conference year kicked off for GPSA with the RACGP Practice Owners National Conference (PONC) in Adelaide, followed quickly by the GPME Conference in Sydney.

PONC saw a huge number of conversations between Carla (CEO), Leonie (COO) and Kevin (Chair) with Supervisors and potential Supervisors at the GPSA booth. While there were many inspiring stories, and a great deal of laughter, this face-to-face event gave many members the chance to share concerns and grievances welcomed in equal measure. Many potential Supervisors expressed frustration that RACGP was refusing to induct new training practices due to the supply/demand issue with more Supervisors than Registrars in the current market. GPSA has been petitioning RACGP about this on behalf of our members, turning our focus on options to harness a passion for training, even if that is outside the AGPT Program.



Left: Connecting and engaging at the GPSA-sponsored RMA22 Supervisor Lunch



Right: Dr Samia Toukhsati presenting on GPSA research at RMA22



Left: GPSA team members at the GPSA GP22 booth

Right: Current GPSA Chair, Dr Kevin Arlett with former GPSA Chair (current RACGP President), Dr Nicole Higgins and former Board member, Dr Alan Leeb



Some familiar faces at GPSA's PONC23 booth, including current and previous Chairs Dr Kevin Arlett and Dr Nicole Higgins, CEO Carla Taylor and COO Leonie Chamberlain



Capacity building and resilience

Training practice support

Direction for 2023-24

We recognise that the steadily dropping number of AGPT applicants makes sparking and maintaining interest in this specialty amongst medical students and prevocational doctors imperative for the survival of the current model of general practice into the future. Since June 2023 we have been actively lobbying the Department and sector stakeholders, particularly in the forum of the General Practice Training Advisory Committee (GPTAC), to unify the many disparate entities involved in the pathways leading to vocational GP training.

In the fragmented space we've endured for far too long, the placement experiences crucial to the necessary attraction of students and junior doctors have invariably been under-valued and thus under-supported.

Changes arising from the AMC's new supervision framework also make future supervisor disengagement increasingly likely due to new requirements failing to recognise the experience of AGPT accredited supervision, resulting in unnecessary and time-consuming duplication of PD activities.

In September 2023, after several meetings and exchanges of correspondence with Carla Taylor, Medical Deans of Australia and New Zealand (MDANZ) published their Position Paper - [Doctors our Communities Need: Building, Sustaining and Supporting the General Practice Workforce in Australia and New Zealand](#) - recommending the need for increased, earlier, exposure to general practice. More than this, their focus on more and higher quality GP placements

for medical students and prevocational doctors, underpinned by an appropriate level of support and remuneration, and greater consistency across the educational spectrum, effectively signalled the very change GPSA has been advocating for. Subsequent discussions led to MDANZ indicating a strong willingness to work with GPSA, inviting our members to embed their observations and suggestions in a new curriculum for general practice at the university level. This is a very exciting direction for the year ahead.

[Visit our website](#) to learn more about our future directions.



Research theme 3

Wellbeing and satisfaction



At the heart of what we do, our mission is to nurture the passion that drives the GP training sector. To do this we explore opportunities to facilitate and improve the wellbeing and satisfaction of those involved in GP training through evidenced-based research. We achieve impact through the provision of targeted support to overcome barriers and facilitate enablers in GP training, with the goal of fostering and enhancing connections to improve wellbeing and satisfaction.

assess | support | connect | improve

Completed projects

PASTORAL CARE

This project explored the experiences of providers and recipients of wellbeing support in GP training. The findings illuminated areas for future development to ensure that the wellbeing needs of registrars are met.

Projects underway

VIRTUAL COMMUNITY OF PRACTICE

Using GPSA's community platform, this project is designed to foster professional support and reduce isolation through the development of a virtual community of practice.

Presentations

HELP US HELP YOU: CO-DEVELOPING GUIDELINES TO SUPPORT GP/RG REGISTRAR WELLBEING

GPME23, JUN 2023, NSW AUSTRALIA
Toukhsati S, Taylor C, Morgan S

BURNT OUT? IT'S MORE COMMON THAN NOT

GP22, NOV 2022, VIC AUSTRALIA
Toukhsati S, Kippen R, Wallace G, Taylor C

BAD ATTITUDE? CONFLICT IN GP TRAINING

RMA22, OCT 2022, ACT AUSTRALIA
Toukhsati S, Kippen R, Wallace G, Taylor C

FEELING BURNT OUT? YOU'RE NOT ALONE

RMA22, OCT 2022, ACT AUSTRALIA
Toukhsati S, Kippen R, Wallace G, Taylor C



Wellbeing and satisfaction

Outcomes informing sustainability

Research translation

GP/RG registrars require access to wellbeing support throughout their training. In 2022, GPSA surveyed GP supervisors, practice managers and GP registrars about their experiences as providers or recipients of wellbeing support. We found that GP supervisors were more willing to provide wellbeing support than GP registrars were to seek it from them, highlighting that “it takes a village” to support GP/RG wellbeing.

To translate these findings into practice, GPSA led a workshop with members of the GP/RG training team to co-develop guidelines to support GP/RG registrar wellbeing, illuminating a holistic approach to GP/RG wellbeing support that clarifies the roles and responsibilities for those involved in GP/RG training.

National Supervision Survey

In 2022, GPSA completed the 2022 National Supervision Survey, which focussed on burnout and self care in GP supervisors. These findings were reported in the 2022 National Supervision Survey Report and a related manuscript is currently under review with BMC Education.

Building on the findings from the 2022 survey, GPSA launched the 2023 National Supervision Survey in April 2023, delving deeper into the values and satisfaction associated with wellbeing and supervision in GP training. A 2023 National Supervision Survey Report will be available in the second half of 2023.



Wellbeing and satisfaction
Support for all members

Enhanced connections

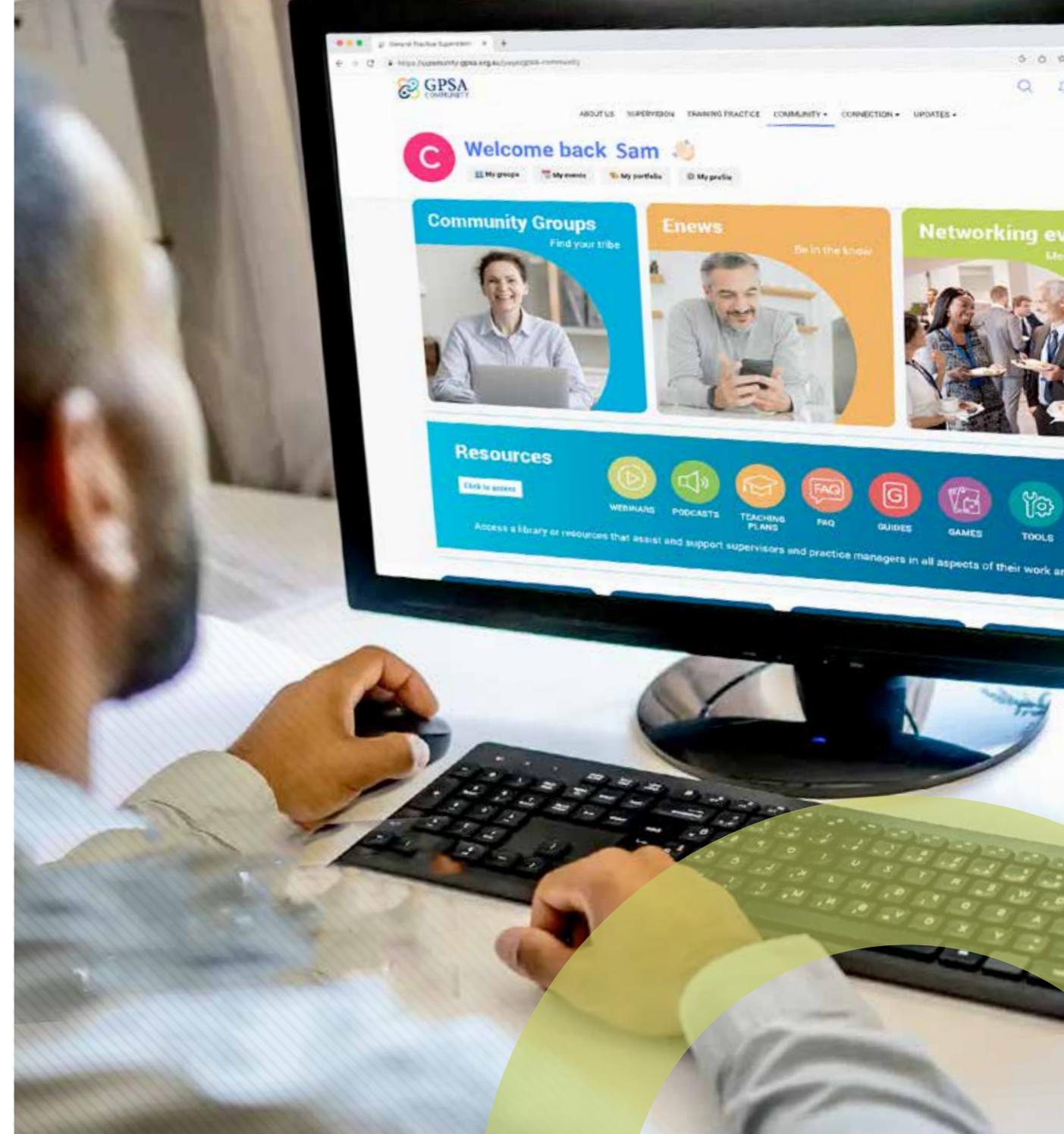


As part of our evolution to GPSA 2.0, we have created a community platform to encourage connection between members and with us - to help drive our education, research and advocacy focus so GPSA can more faithfully represent and address our members' needs in real time.

Tied seamlessly into the GPSA website, this virtual community of practice provides easy access to peer-to-peer networking,

private professional communication channels, and a wide variety of groups to support the supervision role whether for a GP supervisor with a vocational registrar or a practice manager overseeing a medical student's clinical placement (and everyone in-between).

Participation in this virtual community of practice is, as you would have come to expect from GPSA, completely free.



Wellbeing and satisfaction

Support for all members

SLO Advisory Council

Finding solutions for problems we don't know about is a very tricky thing. The Supervisor Liaison Officer (SLO) role sits formally under the employing entity, be it RACGP, ACRRM or RVTS; however, one of the key functions of the SLO is to assist the supervision teams on the ground in managing their concerns - which is where GPSA tends to come in. Individually, the SLOs put out localised spot fires. As a national network, they take on systemic bushfires.

In light of the changes to the GP training environment in the transfer of training from the 9 RTOs to the 2 unevenly sized GP specialty Colleges, GPSA has played an active role in securing a future network for the nation's Supervisor Liaison Officers. This has involved the development and execution of a Memorandum of Understanding (MOU) between GPSA, RACGP and ACRRM, along with agreed Terms of Reference (TOR) for the SLO Advisory Council.

[Read more](#)

Forging alliances to meet our members' needs

Recognising the traditional urban, owner-supervisor, AGPT focus of GPSA was better suited to a different membership than we have today, we have invested a considerable amount of time and resources this past year to address this.

Working to ensure our organisational direction is more inclusive has been a real highlight for the educational team. Focusing on recalibrating our online materials to accommodate the rural generalist and rural GP contexts, they have developed and strengthened a number of key relationships, including ACRRM, RACGP, GPRA and GPME. Outside our AGPT activities, we have also been expanding our resources to better support for supervisors of medical students and prevocational doctors, and delivered into the education program for the NSW Rural Doctors Network (RDN), teaching both supervisors and supervised doctors about core supervision topics.



GPSA's advocacy on behalf of the non-owner supervisor especially in the colleges' remuneration processes and the RACGP's recognition of "primary supervisor" CPD hours has made us a bit like a fly in the ointment, but this is a fight we need to take on in the name of equity with so many of our members fitting this description and consequently being overlooked systemically.

And it's not all about GP supervisors! The practice managers in our membership are also being championed by GPSA in our discussions with the Colleges and DOHAC. A strong alliance with AAPM is set to make advocacy efforts far more effective for this segment of our members in the year ahead.

Wellbeing and satisfaction

Support for all members

Direction for 2023-24

We have been extremely busy trying to future-proof GPSA as an organisation and a community through FY22-23.

Operationally, the AGPT funding of our activities as a peak are unable to keep up with rising staff costs and demand for our services, making external income generation and diversification a necessary and urgent priority. While working with MDANZ, RWAs and regional training hubs is part of this diversification strategy, the development of additional income streams to support an expansion of activities is a keen focus.

The Scenario™ app being launched in October 2023 is one income stream we are very excited about for the 2023-24 financial year. This app, built on the premise of simplicity and convenience, will produce case scenarios and prompts across a range of topics for supervisors to incorporate into their teaching sessions with registrars and students.

Importantly, it has been developed to have a broad international application, and will be live on iTunes and the Android appstore in time for the international audience attending RMA23 and WONCA in October. All profits generated by this resource will be directed right back into GPSA's support of the GP training sector. This would enable GPSA to better respond to our members' needs, and maybe even run our own national networking conference before long.

An extension of the Scenario app, due for release by the end of 2023, is a forum app - a space where the trainee/student is able to discuss and compare their approach to the scenario presented by their supervisor/teacher with fellow trainees/students from across the world. This lends to the development of a true international community of practice for family medicine, with the Australian GP training community as a leader thereof.



Research partners

Recognising the increased impact our research can have through broad collaboration, we have continued to grow our research partnerships through 2022-23:





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GENERAL PRACTICE SUPERVISION AUSTRALIA



Australian Government
Department of Health
and Aged Care

GPSA is supported by funding from the Australian Government under the Australian General Practice Training Program.



RACGP
Royal Australian College
of General Practitioners



GPSA would like to thank these organisations for their support.