

2024-25 Pre-Budget Submission

GPTA Ltd trading as General Practice Supervision Australia (GPSA) is the national peak for medical supervision. In this capacity, we perform an advisory function for the Department of Health and Aged Care's Health Workforce branch under grant activities funded through the Australian General Practice Training (AGPT) program.

Our focus on member representation, engagement and support extends well beyond this one training pathway, lending to the recommendations presented herein.

Context

GPSA is an independent not-for-profit membership organisation representing some 10,000 clinicians and training practice members whose commitment to high quality placement experiences in the general practice (GP) environment provides the one constant across the training spectrum in this economically efficient and socially essential medical specialty.

Our members are the unifying feature of the fragmented journey the medical student takes from university to prevocational education and ultimately vocational training in primary healthcare.

Instrumental to the delivery of vocational programs by the 2 GP specialty colleges, the Royal Australian College of General Practitioners (RACGP) and the Australian College of Rural and Remote Medicine (ACRRM), GPSA's members provide the on-the-ground training experience the vocational trainee requires in order to achieve fellowship. The accepted weighting of this experience - which incorporates formal and informal education plus mentorship and pastoral care - over the formal components of the training program is 85:15.

Key take-aways

- Well-supported, dedicated training practices and supervisors are essential to the future of primary healthcare, providing high quality experiences of general practice for the student and prevocational doctor to build the pipeline for the AGPT and other apprenticeship-based GP training pathways.
- Without committed, supported GP and rural generalist (RG) supervisors, there can be no future primary healthcare workforce.

Tackling the decline in the primary healthcare workforce

GPSA is the other side of the training coin from the students and trainees represented by our sister peak, General Practice Registrars Australia (GPR), and we share their prioritisation of strategies around increasing the attractiveness of the profession in order to secure this nation's future primary healthcare workforce.

As in all things healthcare and government, nothing sits in isolation in this GP training context. The students and trainees our members support today are the supervisors – thus GPSA members – of tomorrow.

The influence our members have on the medical student / trainee's choice of career in primary health is substantial. While the roles of clinical educator, assessor and pastoral carer are recognised specifically by the contracted training provider and broadly in the job description of the supervisor, throughout their placements the student and trainee is immersed in an environment and team against which they need to picture their future self. All of the burdens and pressures observed and experienced in that placement are consciously and sub-consciously weighted in the career decision.

Key take-aways

- The student / trainee's lasting impressions of general practice most likely to impact the future and current primary healthcare workforce are not those developed through

the university, hospital or GP specialty college, rather the training practice and supervisor who has provided them with their placement experience at the coalface.

- The factors influencing future GPs / RGs to choose a less economically efficient medical specialty include perceptions of the various pressures on general practice such as the extent to which:
 - The training practice appears to operate under financial stress;
 - The practice team is burdened by red tape and convoluted administrative systems;
 - The specialist GP feels disconnected from and professionally denigrated by their hospitalist peers;
 - The waiting room is overflowing due to clinician shortages;
 - The supervisor's passion for general practice has been battered by increasing demands and diminishing recognition and reward; and
 - The practice's patients express themselves through violence and abuse of practice staff and clinicians.

Solutions with unintended consequences

Universities under the leadership of the Medical Deans of Australia and New Zealand, and jurisdictional postgraduate medical councils under the Confederation of Postgraduate Medical Education Councils (CPMEC), will soon be expanding opportunities for students and junior doctors to gain meaningful experience in the general practice learning environment: with the goal of increasing interest in vocational GP training.

GPSA is advocating for broad ministerial recognition of the crucial role the community (private) general practice plays in converting this expanded cohort of medical students and junior doctors to vocational GP training pathways. Without this recognition, and without suitable financial reward to balance out the added burden on resources training placements impose on the community practice, the benefits of this strategy will potentially be undermined. Indeed, the damage of such a failure would be felt for generations to come.

Key take-aways

- The more doctors we can attract into the GP specialty, the more GPs we can train, the more our populace can benefit from the quality and continuity this person-centred model of healthcare delivers when empowered with sufficient workforce, and with strategic supports to sustain a business model that minimises the burden on public healthcare.
- To meet its healthcare obligations to the Australian community, the Commonwealth has a responsibility to not only support but to champion the supervisors and training practices who nurture the future GP / RG workforce. GPSA plays a role in this as a Health Workforce delegate, yes, but the work we are funded to do specifically in vocational training grossly undervalues the impact our members have on pipeline development for all apprenticeship-based GP training pathways.

Collaborative solutions

By acknowledging that a robust primary healthcare sector is critical for communities across Australia, and that strengthening this sector relies on positive student and trainee experiences provided by high quality, well-supported training practices and GP / RG supervisors, the issue does not just sit under the Health portfolio.

Solutions to the pressures on training practices as outlined in general terms above should be sought collaboratively across Education, Finance, Employment and Workplace Relations, Infrastructure (Regional Development and Local Government), Home Affairs, Treasury (Small Business), and Health and Aged Care.

Supports under such a collaboration might take the form of tax reliefs and/or financial incentives via a single, simplified grant process. The mechanism itself is less important than the premise that this collaborative support is designed to empower rather than curtail the quality focus of the training practice and its supervisors.

Key take-aways

- The right supports in place, irrespective of rurality, the training practice and supervisor will have greater capacity to share a passion for general practice and the community they serve, and thus reverse the tide on future workforce development in this all-important sector.
- At a bare minimum, this submission has been prepared to spark a discussion, aiming for recognition of the essential service training practices and supervisors deliver to this Australian community.

Should you like to explore this submission further, please do not hesitate to contact either of us on the details below.

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