

Please follow the format below which has been designed to align with an IMRaD report structure. We recommend you consider the following when completing your submission:

Ensure the Introduction clearly communicates why the research is important.

Ensure the Methods section is detailed and organised.

Ensure the Results section provides comments and explanations instead of simply reporting results.

Ensure the Discussion provides a clear statement of the main findings.

Title (max 6 words)

GP views of the single-employer model

Authors

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Abstract Overview (70 words)

Please provide a brief summary of your submission. This summary will be used to describe your presentation within the program if your abstract is successfully selected. We recommend you include information such as the purpose and importance of the research, methods, main findings and/or implications of your findings to help delegates understand what you will be presenting. You may wish to come back to this section after you have completed all details on the Abstract Submission page

The single-employer model for GP registrars is proposed to reduce perceived disincentives for GP training, particularly in rural areas. It means a shift for GP registrars from private contract employment with individual general practices, to salaried employment with a single organisation throughout their training. This study explores the views of GPs and others involved in GP training about the single-employer model, and about consultation around proposed changes to GP training.

Introduction (100 words)

Explain why this research is important or necessary by describing what motivated the research or chosen topic for presentation.

In Australia, disincentives for commencing GP training as opposed to other specialties may include the perceived lower pay and levels and portability of entitlements of GP registrars (trainees) compared with their hospital-based counterparts. To reduce these disincentives, some stakeholders support shifting GP registrars from employment through private contract with individual general practices to salaried employment with a single organisation throughout their training—the single-employer model. This national study explores the views of GPs and other involved in GP training about the single-employer model, and about consultation around proposed changes to GP training.

Methods (150 words)

Explain how you conducted your study including information about your population sample, methods and equipment. Please use subheadings and past tense when writing this copy.

General Practice Supervision Australia (GPSA), as the peak national body for GP supervisors and others involved in GP training, conducts an annual online national survey of those involved in GP training, to inform policy and practice. In 2021 and 2023, participants were asked three questions about a current policy proposal to maintain registrars on a salaried employment model as they move from hospital into training into general practice (known as a single-employer model), as follows:

1. How much do you know about the single-employer model?
 2. Would you prefer that an organisation other than your general practice employs registrars to work in your practice (single-employer model)?
 3. Do you feel you have been adequately consulted about the current reforms to GP training?
- Responses were analysed according to individual participant characteristics—including age, gender, and practice role—and practice characteristics—including type, size, state and rurality.

Results (150 words)

Present your findings using past tense. Do not provide any explanation or commentary on the findings in this section. (see below)

There were 417 respondents in 2021 and 167 respondents (to date—survey closes in June) in 2023. There was good representation across individual and practice characteristics. In 2021, respondents reported low knowledge of the single-employer model (median 20/100), high ambivalence about preference for its introduction in their practice (yes 18%, no 31%, maybe/don't know 51%), and inadequate consultation (84%). Two years later, in 2023 (to date), knowledge of the single-employer model had increased somewhat (median 50/100), as had support for its introduction (yes 28%, no 22%), although ambivalence was still high (maybe/don't know 50%). Most respondents (80%) indicate that they have not been adequately consulted about reforms to GP training. On closure of the 2023 survey, regression modelling will identify characteristics associated with knowledge and support of the single-employer model, and consultation around GP training reforms. Extra textual responses to these questions will also be thematically analysed.

Discussion (150 words)

Summarise your main findings and connect them to other research. You may also wish to discuss the limitations of your study and use these limitations as reasons to suggest additional, future research.

The single-employer model aims to reduce disparity in salary and entitlements between GP and hospital-based registrars. This study reveals that those currently responsible for employing, supervising and managing GP registrars in training practices have low self-identified knowledge and low support for the single-employer model, although both have increased over time. Respondents also indicate that they have not been adequately consulted about current reforms to GP training. Awareness, acceptance, and perceived consultation is consistently poor across different respondent characteristics and practice types, including rural practices. This is despite the single-employer model intending to make general practice and rural generalist practice more appealing. It suggests that training practices need to be better consulted about how a single-employer model would work in practice, including financial implications, managing registrar performance, building business professionalism for working within a fee-for-service model, and managing entitlements like leave around the rest of the practice team.

Who is your target audience?

Please nominate your target audience from the list below. If choosing more than one, please separate with a comma.

Medical Students
Future Rural Doctors
Rural Doctors in Training
Rural Generalists
Rural Consultant Specialists
Academics
Other Rural Health Professionals
All interested

Does your presentation have an Indigenous Health (Aboriginal and/or Torres Strait Islander and/or Global) focus?

Please type Yes/No in the text box below.

No

Does your presentation contain Case Based Discussion with participants?

If YES, please provide details, including the duration of this component. Maximum of 60 words.

No

Does your presentation contain an assessment of a practical skill station?

If YES, please provide details, including the duration of this component. Maximum of 60 words.

No

Does your presentation contain outcome measurement activities such as a clinical audit?

If YES, please provide details, including the duration of this component. Maximum of 60 words.

No