



Australian College of
Rural & Remote Medicine
WORLD LEADERS IN RURAL PRACTICE



Australian Government
Department of Health



RACGP

GP TRAINING TRANSITION UPDATE – July 2021

The Department of Health, the Australian College of Rural and Remote Medicine (ACRRM) and the Royal Australian College of General Practitioners (RACGP) are working collaboratively to transition the Australian General Practice Training (AGPT) Program to a college-led model.

The Government remains committed to colleges running training from recruitment and placement through to Fellowship. This will bring GP training into line with other medical specialist training and will mean GP colleges are directly responsible for training registrars, including the work of medical educators to supplement the training provided by on-the-ground supervisors.

Both colleges have released their respective strategic intentions for college-led training and are continuing to consult with stakeholders. The colleges will outline a summary of this feedback through the Transition to College Led Training Advisory Committee.

The Government remains committed to preserving all funding under AGPT so that it not only continues to support but enhances the GP training experience.

Registrar and Supervisor impacts

All parties remain acutely aware that we need to support current registrars, teaching sites and supervisors over the next few years and we will work together to ensure that change is managed in a way that reduces the impact on registrars and supervisors.

Current allocation processes will not change in 2023. The Department will work collaboratively with both Colleges to determine allocations. At a national level this is 50% MM1 and 50% MM2-7, with existing levels of training in MM2-7 in each region continuing to support rural and remote communities across Australia.

The RTOs will be extended through to the beginning of semester 1, 2023. They are currently considering the terms of a draft grant agreement to continue provision of services and supports to registrars and supervisors.

In the context of longer-term reform, and as part of our efforts to make GP training a more attractive proposition for junior doctors to consider, we are considering options to make GP registrar conditions better aligned to their hospital-based counterparts – this work is actively being explored through the General Practice Training Advisory Committee and advice will be prepared for Government consideration in the second half of 2021.

National Payments Workshop

A series of workshops with key sector representatives to develop a nationally consistent payment model for supervisors, practices and registrars commenced in June 2021.

This work is looking to provide transparency and consistency of payment structures for the program. We are exploring ways we could use the existing program funding allocation to

improve transparency of financial supports to supervisors and registrars, and incentivise high quality rural and remote GP training placements.

Workforce Planning

As communicated to the sector in October 2020, the Department is keen to examine how GP training intersects with key health strategies under development, and workforce planning across multiple rural workforce and training programs.

Discussions have continued with both the colleges and stakeholders – and the Department has noted the concerns around potential disruption that this may cause to the transition process. The Department also acknowledges the significant amount of broader consultation required outside the GP training sphere. To this end workforce distribution reform will continue to be explored outside the transition process. With minimal disruption to short-term distribution KPIs and allocations, transition can progress without having unintended impacts for communities that rely on the registrar workforce for vital GP services.

Transition Milestones:

The following functions have already transitioned from the Department of Health to the colleges:

- Selection – the colleges are responsible for running merit-based processes to select AGPT registrars;
- Remediation – the colleges are responsible for providing additional support to registrars who are identified as requiring a higher level of assistance;
- Managing AGPT policies – the colleges are the ultimate decision makers when implementing AGPT policies, including ensuring the RTOs are applying policies consistently and equitably nationally;
- Considering appeals – the colleges consider and adjudicate all appeals and are responsible for withdrawing registrars (and terminating Medicare Provider Numbers) when necessary; and
- Management of Education Research Grants and Academic Posts – the colleges now administer the funding for these AGPT opportunities.

Next Steps

The following milestones will be progressed in July:

- Feedback on the colleges' strategic intentions for College-Led Training will be finalised to inform business case development for program delivery in 2023 onwards.
- Consultations on payment reform options will continue in July. A further two stakeholder workshops are planned, with an aim of finalising advice for approaches and models for consideration.
- The Department, RTOs and colleges will also hold discussions with key partners such as the Australian Indigenous Doctors Association and the National Aboriginal Community Controlled Health Organisation, as to how we build stronger outcomes with Aboriginal and Torres Strait Islander funding for the program through the Salary Support and Strategic Planning functions.

The next joint update will be provided in August.