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takingaction Divisions of General Practice Network Forum 2004



GENERAL PRACTICE REGISTRARS AUSTRALIA LTD

Developing a Sustainable General Practice Workforce

Dr George Manoliadis
GPRA Deputy Chair

THE FUTURE OF GENERAL PRACTICE
GPRA

GP Registrars

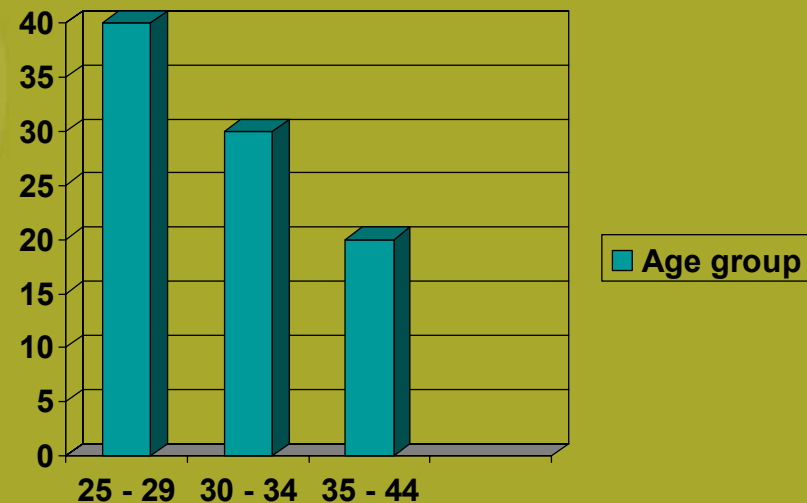
The Future of General Practice

THE FUTURE OF GENERAL PRACTICE



Who are we?

- We are 5% of the Primary care workforce
- 65% female
- 35% male
- Ages: 40% 25-29,
30% 30-34,
20% 35-44



Workforce Shortages?

Demand vs Supply of GP services

Unmet demand for GP services

- patients can't access a GP
- patients presenting to ED

Insufficient supply of GP services

- Difficult to recruit GPs for locums or permanently

What affects demand?

- Price
- Quality
- Access

What affects supply?

- Number of GPs
- Time GPs spend seeing patients
 - GPs on avg working shorter hours (esp younger ones)
 - increasing paperwork – accreditation, EPC, SIPs, PIPs
 - increasing education
- Time spent per patient
 - complex chronic diseases increasing
 - earlier hospital discharge
 - more informed patients – more explanation needed
 - defensive medicine – better notes, more tests, more consent

Recruitment

- Training places increased 450 to 600 for 2004
- Applicants decreased from 800+ to 550
- Less than 50% from Australian medical schools
- 208 unfilled places for 2005 (Source: GPET after 2 rounds of applications)

How has training changed?

- Provider number legislation
- Regionalisation - > 50% of GP Training is delivered in rural areas
- Shifting goal posts

Attracting doctors to GP training

- Exposure to GP prior to training – GPPP
- Focus training on education not workforce
- Flexibility in training programme – hours, location
- Special skills training
- Promotion of GP career – lifestyle, relationship with patients, flexibility
- Improve perceptions – negative comments in hospital system

Attractiveness of a GP career

- **Appropriate remuneration**
 - for managing a practice
 - for education, responsibility
 - relative to other medical specialties
- **Reduction in red tape**
- **Quality education & training**
- **Sufficient resources for referrals** eg psychiatry, counselling
- **High standards**

Thank you

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