

# A check-up on GP services in rural Victoria



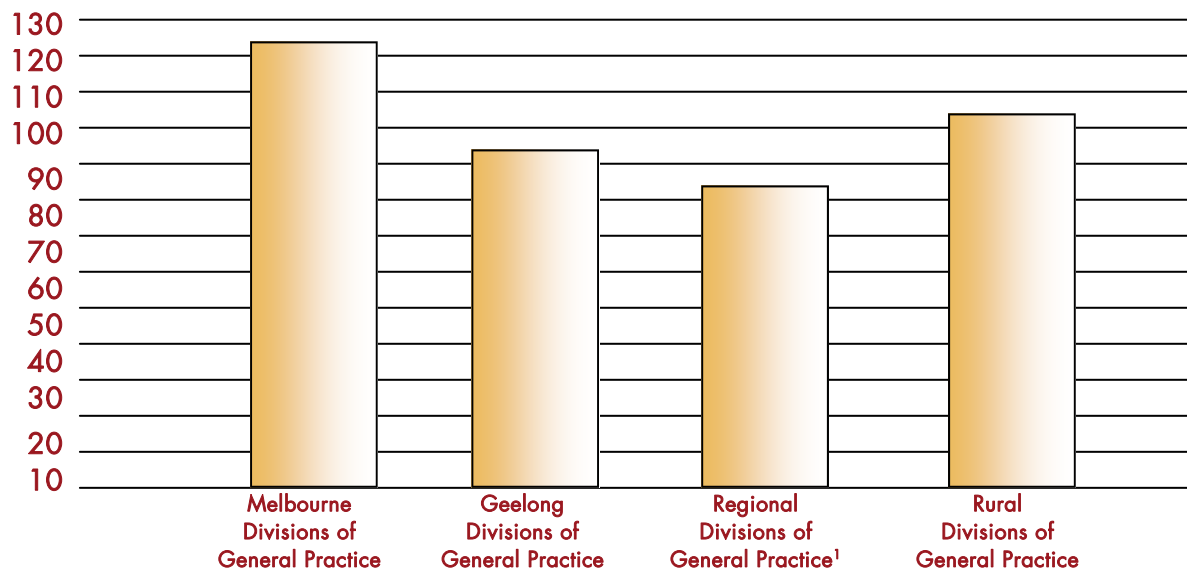
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## The health status of rural Victoria

The health of Victorians living in rural areas is already significantly worse than those living in urban areas.

Lower incomes and sole parent status are also higher in rural and regional areas and are closely linked to poor health.

A major reason for the poor health status of rural Victorians is the limited access to health care. The Rural Workforce Agency, Victoria (RWAV) works to address the critical shortage of rural general practitioners (GPs) and specialists and to improve access to GPs for rural Victorians by focussing on recruitment, retention and professional development.



Source: PHCRIS 2002-03. Survey of Divisions of General Practice

<sup>1</sup> Border, Ballarat, Bendigo and Goulburn Valley

 GPs per 100,000 people

# The symptoms and side effects

RWAV's Workforce Plan predicts that rural Victoria will need to have a net increase of up to 311 rural doctors over the next decade. Accounting for retirement, changed work patterns and industry exits, this translates to the recruitment of approximately 120 GPs every year.

Key issues to 2012 include:

## Population growth

Demand will continue to increase. The Victorian rural population will grow at 3.7% until 2012. This is lower than Melbourne, however projected growth is significantly higher in regional centres (e.g. 14.3% Wodonga), coastal retirement areas and rural communities closer to Melbourne.

## Ageing population

The ageing population will increase the demand for GP services. Seniors make up 19% of regional Victoria as compared to 16% in metropolitan areas. This figure is also increasing more rapidly in regional areas. More GPs will reach retirement age in the next decade.

## Changing workforce patterns

Rural GPs work an average of 49 hours per week. However there is a trend towards reduced average hours particularly for younger GPs.

## Changing gender balance

Women account for only one third of GPs in rural Victoria but make up 50% of medical students and 70% of GP registrars.

## Need for support services

With rural GPs working an average of 49 hours per week, basic support for after hours, leave and family support is critical.

*"One of our best strategies is to look at overseas trained doctors. One of the real positives is that by the time I see a doctor (to recruit), that person has been assessed for suitability and the paperwork maze is simplified for me. That's no small thing; it's easy to develop a two inch file when trying to recruit a doctor. It's also good to know that person is being supported. We don't have to provide all of the support and it is particularly important for them, and for me, that the support is from an agency that understands the issues. It needs a specialist agency... it needs an agency that has a big picture view also. RWAV is perfectly placed to do that and to understand the needs of the workforce and the rural environment."*

Practice Manager, North Central Victoria

## Overseas Trained Doctors

Nine out of ten of all new GPs into rural Victoria are either registrars in training or Overseas Trained Doctors (OTDs).

A study, conducted by Melbourne University and RWAV, found that 66% of all OTDs have entrenched patterns of mobility. This presents significant challenges and indicates the need for a range of support programs to facilitate the retention of OTDs.

*"Before the (OTD) program, a typical appearance was parents with a bunch of sick kids from another town, saying 'I can't see a GP in my town for two weeks, can you help me?' That does not exist any more, thanks to RWAV and the job that has been done so far. Without this service, it would be swimming in porridge again and we would be at the same level of disaster as it was four or five years ago."*

GP, Gippsland

# A prescription for a healthier rural Victoria

Since 1998, RWAV has implemented initiatives to improve access to GP and other specialist services for rural Victorians.

## Recruitment

- Placed over 550 doctors through the Rural Locum Relief Program and the Victorian Overseas Trained Doctor Rural Recruitment Scheme over the past five years.
- Surveyed all rural women doctors in Victoria to inform strategies to attract more women GPs to rural Victoria.
- Supports the 25 Victorian Aboriginal Community Controlled Health Services in recruitment of GPs and other personnel, and promotes stronger links with the Divisions of General Practice.
- Administers the Medical Specialist Outreach Assistance Program which places specialist services into rural communities. RWAV is supporting 137 specialist services with another 6 under discussion.
- Worked with Monash University to identify areas of greatest accommodation need in rural Victoria. The Department of Health and Ageing subsequently provided more than \$2.7 million in funding to provide accommodation for registrars and medical students.
- Assesses OTDs applying for rural practice Victorian Overseas Trained Doctor Rural Recruitment Scheme and Rural Locum Relief Program.

## Retention

- Subsidised over 8,000 GP locum sessions for rural GPs since 2002.
- Provided support to GP spouses and families through RWAV's Rural Medical Family Support Scheme in collaboration with the Rural Medical Family Network.

## Professional development

- Subsidised around 480 Individual Clinical Skills Training and Clinical Attachments programs for rural GPs over the past 6 years.
- Provided approximately \$430,000 to rural divisions to conduct a range of Continuing Professional Development (CPD) events for their members.
- Approved around 320 subsidies through the Victorian Department of Human Services' CPD for Rural GPs Subsidy Program since December 2003.
- Developed and delivered the Rural Emergency Skills Training Program, a two day intensive life support course. Almost 200 GPs have attended this course. Victoria's regional training providers are now delivering it.
- Developed and delivered, in collaboration with the Jean Hailes Foundation, a one day Women's Health course specifically designed for rural and OTDs. Almost 150 GPs have attended this course.
- Developed and delivered Teacher Training programs such as Emergency Medicine and Case Based Learning for small groups in rural Victoria, and now has 85 rural GPs who have the skills to teach clinical skills to doctors and other health professionals.
- Helped establish regional training providers to support Continuing Professional Development and vocational training for rural GPs.
- Established and auspices Medical Education in Rural Victoria as the over-arching medical education advocacy and information sharing body for the state.
- Developed the Flexible Learning in Acute and Medical Emergencies program consisting of nine half-day emergency medicine training modules specifically for rural women GPs.
- Coordinates Rural Examination Preparation Program for OTDs sitting the RACGP Fellowship examination.

# About RWAV

Rural Workforce Agency, Victoria (RWAV) was established in 1998 to overcome the shortage of rural GPs and improve access to GP services for rural Victorians.

RWAV's recruitment and retention programs are funded by the Rural Remote General Practice Program and Rural Specialists Support Program under the Commonwealth Department of Health and Ageing. The Victorian Department of Human Services funds RWAV to recruit OTDs, support the Rural Medical Family Network and deliver professional development to rural GPs.

The RWAV Board includes representatives from rural divisions, General Practice Division Victoria, Victorian Healthcare Association, Municipal Association of Victoria, Rural Doctors Association of Victoria, Rural Medical Family Network, Victorian Aboriginal Community Controlled Health Organisation, Monash University, the Committee of Chairmen of Victorian State Committees of Medical Colleges and Doctors In Training as associate members.

RWAV's services are delivered close to rural Victorian communities with principal offices in Traralgon, Camperdown and Shepparton as well as staff based in Bendigo, Mirboo North, Lakes Entrance and a head office in Carlton, Melbourne.

"Without the RWAV scheme where OTDs can be given a guernsey, country Victoria would be desperate. One of the really good things – and I hope they keep doing it – is to organise an Australian-registered GP to mentor the overseas trained doctors, which I think is absolutely vital. To allow doctors to come in without control through a group like RWAV, I would consider that a very dangerous situation. If we get a doctor who has language difficulties, in terms of being understood and understanding patients, it is really important they are supported through training and mentors. I find RWAV very pragmatic and very balanced and that's important in providing these services."

**Practice Manager, Murray Valley**

## Towards a healthy rural Victoria

### Our priorities

1. Improved marketing of rural general practice to increase the number of rural GPs.
2. Substantial increase in services offered to OTDs to support their recruitment and retention.
3. The provision of support services for GPs, particularly locum support and family support.
4. The development and provision of CPD and associated support for rural doctors.
5. Continued workforce planning and research to inform State and Commonwealth policy development.
6. To ensure rural Victoria benefits from new Commonwealth and State government initiatives.
7. Supporting rural communities to develop sustainable local medical services.



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