

# Better conditions for GP registrars

## Key Issues

Since 2015 we have seen a 20% fall in the number of applications for GP training and a 6% drop in the number of first year GP training posts filled. For 2019, 63 first year GP training places went unfilled even though multiple recruitment rounds were initiated. This is despite Australia now graduating around 3700 medical students each year.

## Patient consideration

An undersupply of general practitioners will lead to a weaker primary care system and poorer health outcomes for Australians. It could also lead to a situation where patients are forced to attend hospital emergency departments for primary health care because they cannot see a GP. Already, rural and remote communities struggle to employ and retain GPs. Without a robust general practice workforce, patients will not receive the best standard of care and pressure will be placed on the rest of the system to compensate.

## Government consideration

There are several reasons why prevocational doctors choose another specialty over general practice. A crucially important one is the prospect of a significant cut in pay and inferior conditions that moving from a hospital-based role to a GP registrar position involves.

While conditions vary across the country, GP registrars earn significantly less than their hospital-based counterparts, particularly when they first commence work in a general practice.

The current employment model for GP registrars also means that their leave entitlements are much less generous, and unlike the public sector, this leave is not portable as they move around to satisfy their training requirements.

In this regard, a GP Registrar personal/carer's leave accumulation is badly affected. GP trainees who have children are also particularly vulnerable, with no access to paid parental leave other than the Government's own scheme in contrast to public sector trainees.

The disparity in employment conditions for GP trainees and the recruitment problems this presents were recently recognised in the advice from the National Rural Generalist Pathway Taskforce prepared for the National Rural Health Commissioner.

Rural Generalist Training is part of general practice training and the Taskforce recommended the establishment of a 'single employer' model for rural generalist GP trainees so that they were not disadvantaged in comparison to their hospital-based colleagues and to encourage recruitment to the pathway.

## AMA position

The AMA calls on the major parties to publicly commit to an immediate review of the employment model for the GP training program.

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