The Queensland Health Rural Generalist Pathway: Demonstrable Impacts on Rural Medical Workforce

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Overview

• Operation of the pathway
• Evaluation of the pathway
• Impact of the pathway
What is Rural Generalist Medicine?

Rural Generalist Medicine has been recognised in Queensland as a medical specialty since May 2008. A Rural Generalist is a rural medical practitioner who provides:

- hospital and community-based primary medical practice; and
- hospital-based secondary medical practice, including advanced skills in emergency medicine, Indigenous health, internal medicine, mental health, paediatrics, obstetrics, surgery or anaesthetics; and
- hospital and community-based public health practice.
What is the Rural Generalist Pathway?

The Rural Generalist Pathway (RGP) provides guidance and support to medical officers seeking a career in Rural Generalist Medicine.

Initiated in 2007 to: “develop and sustain an integrated service and training program to form a career pathway supplying the Rural Generalist workforce that the bush needs”.

(Roma Agreement, Queensland, Australia, October 2005)
Aim of the Rural Generalist Pathway

• to provide a premier health career pathway to rural practice;
• increase the supply of health professionals fit for practice in rural and remote Queensland;
• provide appropriate preparation, training and support; and
• to assist in filling vacant positions in rural health facilities.
Operation of the pathway

Graduates

Pre-vocational training
- Intern
- Junior House Officer PGY 1 and 2
- Marketing and promoting a supportive career from medical school to rural generalist practice

Advanced skills training
- Principal House Officer Registrar PGY 3
- Fast tracking to rural procedural practice
- Anaesthetics | Emergency Medicine
- Indigenous Health
- Internal Medicine | Mental Health
- Obstetrics and Gynaecology
- Paediatrics | Surgery

Vocational training
- Senior Medical Officer (Provisional Fellow)
- Medical Officer with Right to Private Practice
- Creating innovative and affordable workforce models and opportunities to meet community needs

Attrition Risk To:
- Metro or Regional General Practice
- Metro Hospital | Specialty | Non-Clinical Practice

Rural Generalist
A Rural Generalist is defined as a rural medical practitioner who is credentialled to serve in:
- Hospital and community-based primary medical practice; and
- Hospital-based secondary medical practice, without supervision by a medical specialist in at least one specialist medical discipline (commonly, but not limited to anaesthetics, emergency medicine, obstetrics and gynaecology); and
- Hospital and community-based public health practice

Rural Generalist Pathway
2013 Ernst and Young report

QRGP conception, implementation and progress.

Four transformational pillars:

1. Recognition of profession
2. Value of practice
3. Pathway
4. Workforce redesign

- Trainee feedback
- Cost analysis
- Efficiency
EY Key Findings

Trainee feedback
• Supported pathway
• Rural work
• Fast track
• Variety
• Reputation

Efficiency
• Implementation phase
• Shift to workforce planning
• Mx of QRGP – HHS

Cost analysis
• $5315 / trainee / year
• $23,800 extra / year for SMO
• 120% ROI
• Meeting critical vacancy need
The EY evaluation concluded that the Rural Generalist Pathway has:

• Provided an exceptionally **high quality training** program valued by trainees and graduates;

• Reflected the **commitment of senior clinicians** to the program through high **quality supervision and support**;

• Operated at an **efficient level**, with **improvements** to be made in: information system management, policy / process consolidation and key stakeholder communication protocols;

• Demonstrated a high degree of **flexibility and responsiveness** to trainee needs;
The EY evaluation conclusions (cont)

- Yet to realise its **potential to support workforce planning** activities undertaken by State Hospital and Health Services;

- **Met the needs of local communities** through the reduction of critical medical vacancies, enabled health services to expand service delivery and is making services more accessible and affordable to local residents; and

- Represented **value for money** with a return on investment ratio conservatively estimated to be in the vicinity of 1:2.
Critical Success Factors

- early immersion in rural medicine during the prevocational years (first two postgraduate years);
- due recognition being given to the profession by Queensland Health (associated industrial and remuneration packages);
- the fast track nature of the program - attractive to trainees but also addresses the workforce needs of rural communities in a timely fashion;
- the quality of the training and supervision offered;
- the effective quarantining of training placements in rural locations and the preference given to Rural Generalist Medicine trainees;
- career opportunities presented throughout the training period, albeit currently perceived as limited to the State of Queensland.
### Impact: training numbers

<table>
<thead>
<tr>
<th>Postgraduate Year</th>
<th>Current trainee numbers (2015)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PGY1</td>
<td>53</td>
</tr>
<tr>
<td>PGY2</td>
<td>46</td>
</tr>
<tr>
<td>PGY3</td>
<td>36</td>
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<td>PGY4</td>
<td>32</td>
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<td>PGY5</td>
<td>23</td>
</tr>
<tr>
<td>PGY6+</td>
<td>47</td>
</tr>
<tr>
<td>TOTAL</td>
<td>237</td>
</tr>
</tbody>
</table>

A total of 48 trainees have completed Fellowship of ACRRM and/or RACGP with 30 practising in rural and remote Queensland, 5 in rural parts of other States / Territories and one in New Zealand.

Attrition to date: 86 since 2008 with the main reasons for withdrawing being pursuit of specialty training and relocation to outside of the State of Queensland.
Locations in Qld which have hospitals and may attract RGs

Prevoc and AST
Advanced skills training numbers

- Anaesthetics: 60 (Completed)
- Obstetrics: 25 (Completed), 36 (Currently completing)
- Emergency Medicine: 25 (Completed), 25 (Currently completing)
- Surgery: 3 (Completed), 13 (Currently completing)
- Internal Medicine: 17 (Completed), 5 (Currently completing), 6 (Currently completing)
- Paediatrics: 5 (Completed), 3 (Currently completing), 5 (Currently completing)
- Indigenous Health: 3 (Completed), 2 (Currently completing)
- Mental Health: 0 (Completed), 1 (Currently completing)

Rural Generalist Pathway
Trainees with multiple advanced skills

Trainee AST Combinations (n20)

- EM / Anaesthetics: 6
- EM / O&G: 4
- Anaesthetics / O&G: 4
- O&G / Indigenous: 2
- Anaesthetics / Surgery: 2
- Paediatrics / O&G: 1
- Indigenous / Anaesthetics: 1

Rural Generalist Pathway
Impact: locally

Meeting critical vacancy need (E/Y)

Service redesign….Longreach / Cooktown / Emerald / Mt Isa / Stanthorpe

- Mt Isa: 0 -> 9 Registrars 2010 – 15
- Longreach / Central West: Locums > $7M pa to $1M
Retention in vocational training post
Future challenges

• Additional Intern / Junior Medical Officer training positions (already increased from 30 (2007) to 80 positions in 2015);
• Expanding Advanced Skills Training capacity;
• Strengthening private practice training models;
• Implementation of innovative training solutions eg. ‘Prevocational Integrated Extended Rural Clinical Experience’ (PIERCE)’
Personal View

Rural Generalism and the Queensland Health pathway – implications for rural clinical supervisors, placements and rural medical education providers

Submitted: 19 September 2012
Revised: 17 March 2013
Accepted: 15 April 2013
Published: 2 June 2013

Full text: View a printable version.

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ABSTRACT

The ‘life line for country medicine’ was the description by the Rural Doctors Association of Australia of the Queensland Health Rural Generalist Pathway (RGP). The program promises to redress rural medical workforce issues in Queensland. It may fulfil these promises, but only with the support of rural clinical supervisors and medical educators adapting to new expectations of competencies, of training structure and endpoints of training. These adaptations will be a key element of the RGP success, particularly as other states adopt the approach. This article outlines the lessons learnt and adaptations made by clinical supervisors and medical educators in the Queensland Rural Medical Education group, to deliver the Rural Pathway of the Australian General Practice Training program since the first registrars identifying as RGP appeared in this program in 2006.

Keywords: Australia, general practice, Queensland, rural doctors, rural generalist pathway.

ARTICLE

Context

The ‘life line for country medicine’ was the description by the Rural Doctors Association of Australia of the Queensland Health (QH) Rural Generalist Pathway (RGP). The program promises to redress rural medical workforce issues in Queensland. It may fulfil these promises, but only with the support of rural clinical supervisors and medical educators adapting to new expectations of competencies, of training structure and endpoints of training.

This article outlines the lessons learnt and adaptations made by clinical supervisors and medical educators in the Queensland Rural Medical Education group, to deliver the Rural Pathway of the Australian General Practice Training program since the first registrars identifying as RGP appeared in this program in 2006.
Are you ready for a Great Adventure in Rural Medicine?

The Rural Generalist Pathway has supported more than two hundred rural doctors in achieving their career goals and personal aspirations since its inception in 2007. We take this opportunity to share just a few of these amazing journeys with you.

"I enjoy the crazy, different, exciting work in a spectacular location that I would not have been prepared for had I not undertaken Rural Generalist Training".

"It takes me three minutes to get to work from my house by the river, the air is clear and there are no traffic jams to worry about."

"You care for your community and they’ll care for you, they’ll appreciate you...and that appreciation makes the job so much better."

"The Rural Generalist Pathway has defined what has been a very rewarding journey for me as a doctor. I’m now doing what I was trained to do and loving it!"

If a broad scope of practice, a challenging work environment, and a sense of community appeals to you then a career in rural and remote medicine may be for you.

Applications for the 2016 Rural Generalist Intern Campaign have now closed.

To find out more about the Rural Generalist Pathway and to nominate your interest in applying, please complete the expression of interest at https://www.surveymonkey.com/s/SGP_EOI. For more information visit the Rural Generalist Pathway’s Eligibility and Application and Forms and Guides webpages.
Thank you


Email: rural_generalist@health.qld.gov.au
Conference Recommendation

Educational programs should **define their outcomes**, **evaluate these independently** and **report and disseminate** evaluation results publically in the interests of **sharing good practice**.

Outcomes should include an emphasis on **impacts** such as **trainee recruitment and retention**, **workforce supply and retention** and should include other measures like **trainee, supervisor and employer satisfaction** as well as measures of education process in terms of **value for money** and of **success in meeting objectives**.
<table>
<thead>
<tr>
<th>PG Year</th>
<th>Rural Generalist Pathway</th>
<th>Queensland Hospital &amp; Health Service Appointment</th>
<th>Salary Status</th>
<th>Australian General Practice Training</th>
<th>RVTS*</th>
<th>Australian College of Rural &amp; Remote Medicine (ACRRM)</th>
<th>Royal Australian College of General Practitioners (RACGP)</th>
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<tr>
<td>1</td>
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*RVTS – Remote Vocational Training Scheme*