

## Queensland Rural Generalist Pathway: impacts on rural medical workforce

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**Aims:** In the seven years since the establishment of the Queensland Rural Generalist Pathway (QRGP), more than 200 doctors have commenced training under the auspices of the program with 45 having achieved Fellowship of the Australian College of Rural and Remote Medicine and/or The Royal Australian College of General Practitioners. This paper outlines development of the pathway and its early workforce impacts.

**Methods:** Internal QRGP records and an externally commissioned review provided data on trainee activity and practice location.

**Relevance:** The QRGP concept was established to provide medical graduates with a supported training pathway to a career in Rural Generalist Medicine and provide rural and remote communities with an appropriately skilled medical workforce. Similar approaches are being adopted in other jurisdictions both nationally and internationally, with World Summits on Rural Generalism being held in 2013 and 2015.

**Results:** Advanced Skills Training (AST) forms a prominent training and preparatory element of the program. 107 Rural Generalist trainees have completed ASTs, predominantly in the procedural disciplines of Anaesthetics, Obstetrics and Emergency Medicine. 15 trainees have completed two ASTs. In direct response to the Pathway's demonstrated success in decreasing rural medical workforce shortages whilst increasing the capacity to train safe and appropriately skilled rural medical practitioners for the bush (Ernst and Young, 2013), the Queensland Minister for Health announced in 2013 the State's commitment to double the intake of the program to 80 by 2016.

Future challenges of expanding the program over forthcoming years include securing additional Intern and Junior Medical Officer training positions and expanding AST training capacity. Innovative training solutions continue to be explored, including the establishment of the 'Prevocational Integrated Extended Rural Clinical Experience (PIERCE)', for which three Queensland pilot sites have been chosen to trial the education model in 2015. PIERCE aims to increase prevocational training capacity and strengthen Rural Generalist trainee commitment to rural practice by providing an extended experience in suitably accredited rural hospitals that meet the program's prevocational training requirements.

**Conclusions:** The resounding success of the program is demonstrated through the striking rural medical workforce outcomes of communities such as Longreach, Emerald and Stanthorpe where self-sustaining, medical workforce models have provided rural and remote communities with broad, safe and stable services. Greater than 100 trainees to date contribute to the public and private rural medical workforce across Queensland. Such models may well be applicable in other jurisdictions given the global resurgence of interest in rural generalism.