Forward to Fellowship—a response to Lost in the Labyrinth

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Background
The City of Kalgoorlie-Boulder is located 600 kilometres east of Perth and has a population of 30,842 of which seven per cent identify as Aboriginal. There are currently six general practices, an Aboriginal Medical Service, the Bega Garnbirringu Health Service, and a regional hospital, Kalgoorlie Health Campus.

In October 2012 Rural Health West was advised of a pending shortage of general practitioners and met with local general practices in Kalgoorlie-Boulder and Kambalda to determine the imminent changes to the general practice workforce. This initial consultation identified 8 general practitioners leaving the area in December 2012.

At the same time Rural Health West met with community leaders, politicians and local health organisations to develop a shared approach to attract and retain a locally based medical workforce.

By January 2013, the general practice workforce had decreased from 31 to 23 and 17 vacancies had been identified. Of the 23 general practitioners, 11 were vocationally registered.

Rural Health West developed a media campaign through advertising and promotion to ‘Join the Goldrush’ with advertisements placed in the Australian Doctor, Medical Forum (Western Australia based), and 6 minutes. No responses were received from Australian Medical Graduates.

The effect of the workforce crisis in Kalgoorlie-Boulder and Kambalda was felt across the whole community:

- In the local community there was
  - difficulty in booking a consultation at a local general practice which resulted in long wait times
  - a significant increase in the number of presentations at the Kalgoorlie Health Campus which were primary health related and typically seen in a general practice setting
  - Concern by the local community to their access to general practitioners and their ongoing continuity of care

- The lack of general practice workforce created a shortage of training opportunities identified by general practitioners and training providers as follows:
  - The Rural Clinical School started having difficulties in attracting medical students to the region which they contributed to the lack of locally based Medical Coordinators to provide teaching, supervision and support
  - There was a significant decrease in the number of general practice registrars to the region through the local training provider, Western Australia General Practice Education and Training, due to the lack of capacity by local general practitioners to provide supervision and support.
  - It was also challenging for the general practice principals to provide teaching and supervision support to International Medical Graduates in practices due to the critical shortage of general practitioners.
• The long working hours experienced by the existing general practice workforce created less collegiality amongst the medical fraternity.

  – Kalgoorlie-Boulder and Kambalda previously had a close knit medical community which disappeared when the number of general practitioners reduced. It became evident very few general practitioners attended networking events which created a sense of isolation and separation between the local general practices and practitioners.

A targeted recruitment strategy was undertaken by Rural Health West through a review of all International Medical Graduate applications received which resulted in an increase of eight general practitioners in Kalgoorlie-Boulder and Kambalda to 31.

The Lost in the Labyrinth report identified that Australia has long been reliant on International Medical Graduates to address medical practitioner workforce shortages, particularly in regional, rural and remote communities.¹

There is an inadequate supply and uneven distribution of medical practitioners, with workforce shortages remaining acute in some regional locations and particularly in rural and remote locations. International Medical Graduates are needed to address the current workforce shortages and are an integral part of Australia’s medical workforce.²

In a response to the increase of International Medical Graduates to the region, a business case was developed by KBC Australia to establish a program for International Medical Graduates in the Kalgoorlie-Boulder and Kambalda area. Forward to Fellowship was developed as the brand name, to enable continuous learning towards general practice Fellowship. The program was designed to focus on what will be required to build medical workforce capacity in the region and retain the workforce to become the future trainers and supervisors of medical students and general practice registrars in the future.

As of April 2014 there are 41 doctors currently working in general practice in Kalgoorlie-Boulder and Kambalda, more than 18 have arrived from overseas since early 2013. Consequently, the current status is that more than 80 per cent of the general practice workforce in Kalgoorlie-Boulder and Kambalda gained their primary medical qualification overseas. This compares to 52 per cent of the whole of rural and remote Western Australia and 40 per cent nationally as identified in Lost in the Labyrinth. There are multiple stages of support required for International Medical Graduates and their families:

• Clinical and professional orientation to Australia’s health system
• Educational and professional development support for International Medical Graduates, including exam preparation, and mentoring and peer support opportunities; and
• Continuing social and cultural support for International Medical Graduates and their families.³

The Mason Review recommended the Department should continue to work with medical professional groups, including the specialist colleges, to identify opportunities to improve professional support for International Medical Graduates in rural and remote areas. Support should be targeted to help doctors to meet the requirements for general and specialist medical registration, and provide ongoing peer mentoring particularly for International Medical Graduates in rural and remote areas.⁴

**Fundamental principles of Forward to Fellowship**

The fundamental principles developed for Forward to Fellowship included:

1. Cross collaboration of key Western Australian organisations in International Medical Graduates education and support to deliver an integrated suite of educational resources and support programs, in order to build a long-term sustainable medical workforce in the region.
2. Providing International Medical Graduates with an interest in ongoing involvement in training and commitment to the region, with:

- dedicated career navigation and Fellowship pathways support;
- clinical supervision and professional mentoring delivered by an experienced regional general practitioner educator, in addition to the locally-based general practice supervisors; and
- personal and family support, led by a dedicated local community support officer.

General practice education and training is not only for the doctor but also for the community. The focus of this education and support program is to build medical training capacity in the region by encouraging and supporting all general practitioners, including International Medical Graduates, to become actively involved in medical training as supervisors and trainers.

International Medical Graduates in the Kalgoorlie-Boulder and Kambalda area, as in other parts of Australia, face significant challenges in integrating into Australian general practice and meeting the education and training requirements for vocational registration and permanent residency. Whilst there has been investment in strategies to support the orientation of International Medical Graduates into the Australian health care system, and in their pathway to general practice Fellowship, data indicates poor completion of the pathway and/or prolonged timeframes to achieve Fellowship.\(^5\)

It is intended that the program be built up to provide Forward to Fellowship for all doctors interested in becoming a general practitioner in the region. Ensuring that all doctors working in general practice can progress through training and achieve general practice Fellowship ensures that there is an ongoing supply of trained doctors to meet the needs of rural communities.

Forward to Fellowship is delivered to International Medical Graduates in the Kalgoorlie-Boulder and Kambalda areas over a two year timeframe.

**Establishment of Forward to Fellowship**

In October 2012 Rural Health West established the Kalgoorlie-Boulder/Kambalda GP Steering Group in response to the pending critical shortage of general practitioners in Kalgoorlie-Boulder and Kambalda. Membership included the following local community groups and local and state based organisations:

- National Party – Member for Kalgoorlie (Chair)
- Rural Health West
- WA Country Health Service - Goldfields
- Goldfields Esperance Development Commission
- Goldfields Midwest Medicare Local
- City of Kalgoorlie-Boulder
- Shire of Coolgardie
- Chamber of Minerals and Energy – Eastern Regional Council
- Chamber of Commerce and Industry
- Northern and Remote Country Health Service Governing Council
- Western Australia General Practice Education and Training
The governance model of Forward to Fellowship is underpinned by the collective impact of ten Western Australian agencies working towards a shared goal. Eight of the agencies are locally based in Kalgoorlie-Boulder and Kambalda and two agencies have a state-wide remit, ie Rural Health West and Western Australian General Practitioner Education and Training Limited.

The steering committee supported the development of a business case prepared by KBC Australia to develop Forward to Fellowship – A regional integrated education and support program to assist International Medical Graduates achieve general practice Fellowship. The business case was a collaborative arrangement between Rural Health West and the Goldfields-Midwest Medicare Local.

The Forward to Fellowship program model was designed by mapping current programs available to support International Medical Graduates and linking them to maximise the skills, knowledge and support that each agency can bring.

The agencies currently contributing financial support (indirect and direct) to the program start-up include a mix of Australian Government funded agencies, Local Government and an independent company. Three existing Australian Government funded programs have been utilised to improve the effectiveness of Forward to Fellowship ie Five Year Overseas Trained Doctor Scheme Additional Assistance Scheme, Rural Locum Relief Program Additional Assistance Scheme and the Overseas Trained Doctor National Education and Training (OTDNET) program.

Development of the Forward to Fellowship program

In September 2013 KBC Australia visited Kalgoorlie-Boulder and Kambalda to meet with General Practitioners to determine the level of support they require to gain their Fellowship.

In February 2014 Rural Health West recruited a Professional and Clinical Mentor to develop and lead the education and clinical support for Forward to Fellowship. The Professional and Clinical Mentor was an experienced general practitioner who had resided in the area for 30 years, had extensive experience as an Associate Professor of the Rural Clinical School, a supervisor of general practice registrars over many years and, in the past ten years, a supervisor of International Medical Graduates in his general practice located in Kalgoorlie-Boulder. He recently left the region.

Initial consultation was undertaken by the Professional and Clinical Mentor which included meeting with general practices, Aboriginal Medical Services and International Medical Graduates to discuss the development of the program and a potential syllabus. Meetings were also held with local experienced general practitioners to seek potential interest to become medical educators for Forward to Fellowship.

Three local medical educators were recruited. One medical educator was an International Medical Graduate who completed his Fellowship exams in 2013. He is now supporting other International Medical Graduates. Subsequently a second International Medical Graduate was recruited in March 2015.

A Memorandum of Understanding was developed to define the Forward to Fellowship program and the role of the Professional and Clinical Mentor with each of the general practices in Kalgoorlie-Boulder and Kambalda. The main purpose of this was to ensure the General Practice was fully aware of their supervisory obligations of International Medical Graduates and that the Forward to Fellowship program did not replace this. Signed copies of the Memorandum of Understanding were received from the six General Practices participating in the program.

The program model was designed to address identified gaps in the professional, educational and family support needs of doctors who relocate to rural and remote locations from overseas.
Forward to Fellowship education program from August 2014 to April 2015

Fourteen International Medical Graduates from Kalgoorlie-Boulder and Kambalda have joined the Forward to Fellowship program since August 2014.

To assist in the development of the syllabus External Clinical Teaching visits were completed for candidates.

- Information on External Clinical Teaching visits and relevant consent forms were developed along with the Forward to Fellowship Learning Plan for the International Medical Graduates and a review form for the Medical Educators.

- External Clinical Teaching visits were completed for 13 candidates. One candidate is yet to pass the Pre-Employment Structure Clinical Interview (PESCI) and is currently observing in a general practice.

The Forward to Fellowship syllabus was developed to provide content and structure to the program. The formal education program commenced in September 2014. The initial program included fortnightly case base discussion group meetings and fortnightly online learning modules.

- Online learning topics were identified and covered areas such as dermatology, ophthalmology, cardiovascular and respiratory.
  - From the 4 September 2014 to December 2014 twelve on-line learning modules were provided
  - Topics included:
    - Rash on toddlers face – Key Feature Problem questions
    - Itchy leg rash
    - Hair loss in an eight year old child
    - Eye problems
    - Skin lesions
    - Children’s rashes and eczema quiz
    - Skin conditions on chest
    - Key Feature Problems in dermatology
    - Cardiovascular plus Electrocardiogram
    - Respiratory

- Case based discussion group meetings
  - Thirteen meetings were held at the Rural Clinical School from 4 September 2014 to April 2015 with an average of ten candidates attending each session.
  - Topics included:
    - Communication and consultation skills
    - Applied Knowledge Test and Key Feature Problem patterns
    - Dermatology – Children’s rashes
    - Master class in Lipid Management
    - Cardiovascular – Risk Stratification
    - Cardiovascular – Electrocardiogram
    - Respiratory
    - Common gynaecology presentations
    - The difficult consultation (the patient with undifferentiated symptoms)
• Ophthalmology
• Neurology

By December 2014 the local Medical Educators sought to review the program given the low response rate to the online learning modules. It was determined to establish small mentor groups between the Medical Educators and candidates which increased one on one teaching and learning opportunities. Regular monthly meetings are now coordinated through the Medical Educators.

The education syllabus has been confirmed for the first six months in 2015.

A Core Clinical Skills Workshop was held by Rural Health West in Kalgoorlie-Boulder on the 29 and 30 November, 2014. This course focuses on core skills such as communication, exam support and resources with the aim of increasing confidence in fundamental general practice procedures. There was a full attendance of 20 International Medical Graduates from Kalgoorlie-Boulder and Kambalda.

An SMS reminder system was developed to ensure maximum attendance at each event which has improved attendance at the case based discussion group meetings.

An online portal was developed and made available to candidates in March 2015. The portal is a repository for information provided through case based discussion groups, online learning modules and other relevant articles and videos of interest to the candidates. An online forum is to be developed shortly.

In March 2015 a new Medical Educator was appointed who is an International Medical Graduate and achieved Fellowship in 2007. This resulted in all three Medical Educators being International Medical Graduates.

Forward to Fellowship Social Support Program

• A community leader was recruited to provide the interface between the International Medical Graduate and the community to assist the doctors and their families integrate more easily into the local lifestyle. The community leader is an ex-politician who has lived in Kalgoorlie all his life and is very passionate about the community

• A Social Support Officer was recruited in Kalgoorlie-Boulder to support the families of the International Medical Graduates and work with the community leader to help connect people to schools, sporting clubs and other social activities, and also provide a local presence for the program. This position is located at the Rural Clinical School.

• All Forward to Fellowship members and their families were contacted to determine what social support they required. There was a low response rate which was attributed to the doctors working long hours and studying, and their families appreciating the valuable time they have together.

• Rural Health West hosted a picnic for attendees of the Core Clinical Skills Workshop and families of International Medical Graduates in Kalgoorlie-Boulder and Kambalda. The community leader attended and promoted the local community to newly arrived doctors and their families.

• The community leader and his wife have catered for the case based discussion meetings to contribute to the program and get to know the doctor more socially.

• The Forward to Fellowship Connections Newsletter was established and the first edition was distributed early February 2015. This edition highlighted previous events and promoted up and coming events. There was a section on Australian lingo, for example, the meaning of ‘bring a plate’ is not about bringing an empty plate. There has also been events such as local sporting club activities which were promoted by the community leader.

Outcomes achieved through Forward to Fellowship

• One candidate has passed their Applied Knowledge Test and Key Feature Problems and plans to sit the Objective Structured Clinical Examination later in 2015.
• One candidate has passed the Applied Knowledge Test and is preparing for the Key Feature Problems and Objective Structured Clinical Examination later in 2015.

• Three candidates plan to sit the 2015.2 exam series later in 2015.

• One Forward to Fellowship member achieved Fellowship of the Royal Australian College of General Practice in December 2014.

• The Goldfields Esperance GP Network subsidise the registration fee for all Forward to Fellowship candidates.

• Significant community benefit has been leveraged through the interagency partnership, thus ensuring the most efficient use of our collective resources and the prevention of duplication.

• To date, the collaboration has had a positive outcome on averting the general practitioner workforce crisis through intensive national and international recruitment strategies. This has seen a 50 per cent reduction in Kalgoorlie Health Campus Emergency Department presentations in the last 12 months.

Some members of the Kalgoorlie-Boulder/Kambalda GP Steering Group established community groups such as the Young Professionals Network where members of Forward to Fellowship were invited, and a Health Network Group which was brokered by the Forward to Fellowship community leader.

The City of Kalgoorlie-Boulder and the Chamber of Commerce and Industry have developed ‘Welcome’ strategies for new doctors to Kalgoorlie-Boulder and Kambalda.

The Chamber of Minerals and Energy – Eastern Regional Council was instrumental in assisting Rural Health West receive funding through Gold Fields Australia Pty Ltd and BHP Billiton Nickel West to run a mining industry focused workshop in Kalgoorlie in June 2015. The purpose of the workshop is to provide industry related training to International Medical Graduates who recently located to the region. A draft program has been completed.

The local newspaper, Kalgoorlie Miner, has published multiple articles on the attraction and recruitment of general practitioners and the positive outcome of new doctors relocating to Kalgoorlie-Boulder and Kambalda.

• The integrated education and support program was designed to focus on what will be required to build and retain medical workforce in the region, led and owned by community stakeholders.

• The three Medical Educators are International Medical Graduates. Two of the three locally based Medical Educators gained their Fellowship whilst living and working in Kalgoorlie-Boulder.

• A major outcome of the program is to retain this new general practice workforce and build a team of future medical supervisors that attract Australian medical graduates and general practice registrars to the region.

• Forward to Fellowship is a unique, locally designed and owned program, which aims to evaluate its primary objectives so that other Western Australian regions can benefit.

To the best of our knowledge there is no similar model being tested anywhere in rural and remote Australia.

The future aim is to expand the program to other regions within Western Australia where there is a heavy reliance on International Medical Graduates who are seeking support to complete their Fellowship exams.

Forward to Fellowship has funding to the 30 June 2015 and is pursuing funding through a range of government bodies to enable continuation of the Forward to Fellowship program in the future.
Future recommendations

As identified earlier, Australia has long been reliant on International Medical Graduates to address medical practitioner workforce shortages, particularly in regional, rural and remote communities. Rural Health West recommends the development a nationally funded program to support International Medical Graduates gain Fellowship and the recommendations identified in Lost in the Labyrinth as follows:

- Develop and implement a program of orientation for International Medical Graduates and their families.
- Develop a nationally consistent and streamlined system of education and training support for international medical graduates.
- Develop a cohesive and comprehensive system of ongoing support options for IMGs and their families.

Rural Health West also supports the establishment of a locally based model:

- Development of a structured education and training syllabus to support continuous learning and prepare International Medical Graduates for Fellowship exams within a two year timeframe.
- Access to education and training resources to deliver an integrative and inclusive training program to support Fellowship, with particular focus on core clinical skills.
- Establish a formal role for the Professional and Clinical Mentor and locally based Medical Educators.
- Support General Practices to enable International Medical Graduates access to training and study leave
- Engagement of local communities to support the Forward to Fellowship program.
- Development of a social support model to enable International Medical Graduates and their families integrate more effectively into local communities.

References

2. Ibid. (pp. 18-19)
3. Ibid. (p. 196)
Presenter

Vivienne Duggin is the General Manager, Rural Health West where she has been employed since 2006 in various roles across the broad range of programs. In 1994 she established the first rural Division of General Practice in Western Australia (located in Kalgoorlie-Boulder) where she worked as Chief Executive Officer until 2005. During those years she developed an understanding of the complexities of both living and working in a rural and remote community. Whilst employed at the Division she was involved in the establishment of the Rural Clinical School in Western Australia and various other programs working in partnership with State and Commonwealth Governments, Universities, and numerous community and state based organisations. In her current role as General Manager, Business Development and Strategy she established the Forward to Fellowship program based in Kalgoorlie-Boulder to support International Medical Graduates obtain their Fellowship.