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## A model of general practice placements in Tasmania for hospital medical officers

**Alex Crespo-Schmidt, Louise Mason**

HR+

### Abstract

**Introduction:** The position of resident medical officer (RMO) is often the decisive point when many young doctors choose their future career pathway, and although universities in rural Australia offer rural placements during the undergraduate period, there are very limited options for recent graduates wishing to pursue a career in general practice. Historically, the Prevocational General Practice Placements Program (PGPPP) was introduced at a time when there was not enough demand for GP training places and offered a suitable experience; however, it was discontinued by the Department of Health in 2014, redirecting the funding towards the expansion of the Australian General Practice Training program (AGPT).

**Methods:** A program for hospital RMOs to experience a thirteen-week placement in general practice was developed through a partnership between the Launceston General Hospital (Tasmanian Health Service), HR+ (Rural Workforce Agency for Tasmania) and a private practice (Scottsdale, TAS) in 2016, and started as a pilot in 2017.

**Results:** At the date of writing of this paper eight RMOs have participated in the program and have completed entry and exit surveys. All of them have rated their experience in the program from 'Good' to 'Excellent'. All the participants were assessed by an independent Medical Educator who has found their progress to be consistently good and assisted the participants in identifying areas of improvement. One of the participants of the 2017 cohort has now joined the AGPT and two participants of the 2018 cohort will follow this trend. Considering the success of the program, an expansion to other areas of Tasmania has been developed and started in 2019.

**Conclusions:** Early exposure to general practice is desirable during the training of recent medical graduates; offering first-hand experience to those interested in this field of specialty, and to encourage other hospital-based junior doctors to consider general practice as a career choice; we present a straightforward and economically viable model that can be implemented in other areas of regional Australia where development and strengthening of a locally trained medical workforce is a priority.

## Introduction

As part of a comprehensive approach to solving the imbalance of medical workforce between rural and urban settings, different initiatives have been designed and implemented during the past two decades. It is noted in different studies that the most important predictive factors for medical professionals to choose a career in a rural setting are having a rural background and early exposure to rural practice.<sup>1</sup> In the light of this, the University of Tasmania has in place special pathways to attract Students with a rural background and a comprehensive rural placement scheme to allow medical students to be exposed early in their careers to first-hand experience in rural practice, especially to General Practice in a Rural setting.

As a strategy to reinforce exposure to rural general practice, the Department of Health introduced the Prevocational General Practice Placements Program (PGPPP) in 2006, but it was discontinued in 2014<sup>2,3</sup> as it successfully increased the interest in General Practice and achieved the goal to make the GP training fully subscribed. The funding was then reallocated to support the Australian General Practice Training program increasing the number of available positions from 1,200 to 1,500.<sup>3</sup> While the success of the program was clear in promoting General Practice as a specialty choice, it is believed that the maximum benefit was achieved in urban training positions and not in rural areas.

The PGPPP was acknowledged as a good opportunity by the student and recent medical graduates community not only to learn about general practice as a career choice, but to obtain valuable background on how the primary healthcare system works, even for those students that ultimately became urban hospital specialists,<sup>4</sup> and while it's discontinuation obeyed logistic and strategic reasons it was seen as a loss by the academic community.<sup>2</sup>

Current strategies to promote primary care in rural areas include the John Flynn Placement Program, the Integrated Rural Training Pipeline Initiative and the Tasmanian Rural Generalist Pathway; however, it was noticed that the access to these initiatives by the group of advanced junior medical hospital doctors (RMOs) was limited, creating an opportunity to develop a new support program for this cohort.

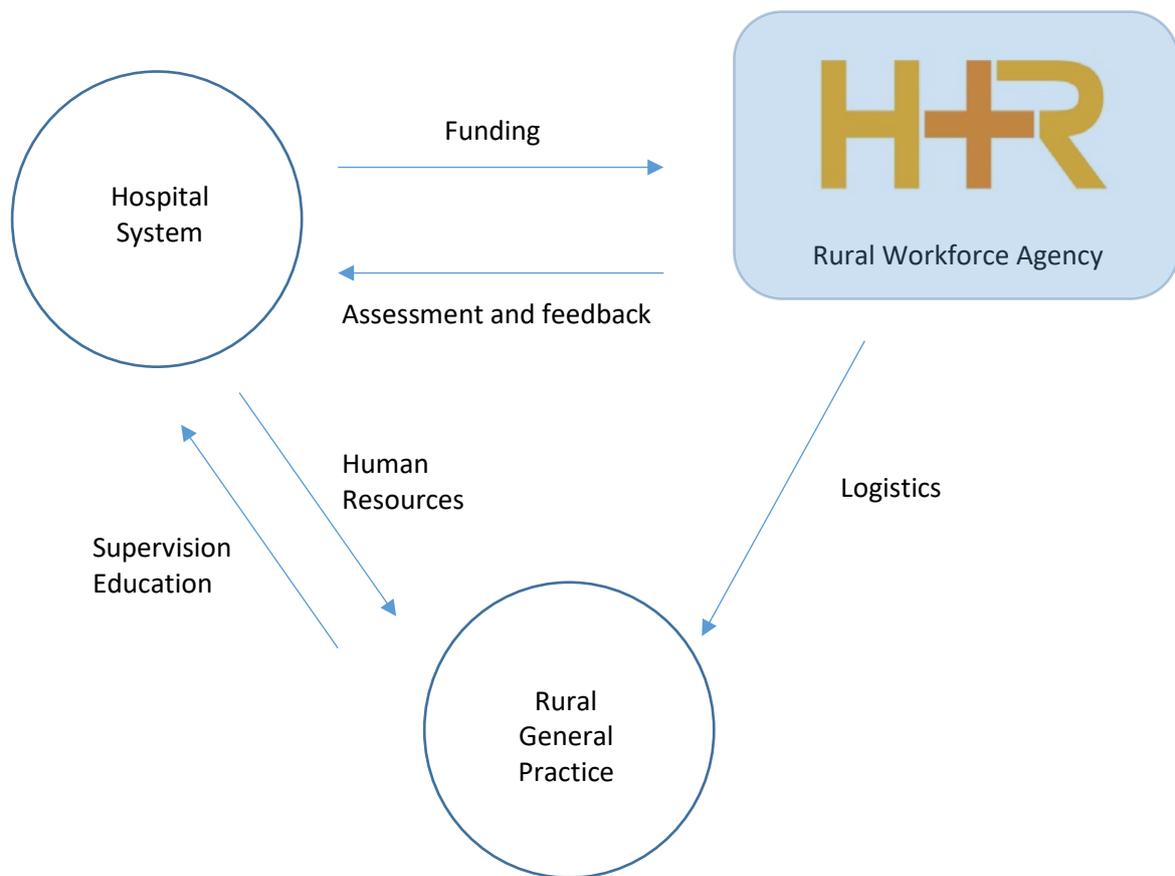
## Methods

In the spirit of the PGPPP, a new program was developed in Tasmania to offer junior medical staff an opportunity to experience a placement in a Rural general practice setting with comprehensive supervision and a flexible learning environment.

A joint effort between the Tasmanian Health Service, Scottsdale Doctors Surgery and HR+ allowed the program to be outlined and set-up during 2016 and to start operations in January 2017.

- The Tasmanian Health Service, through the Launceston General Hospital, participated in the program by allowing four Resident Medical Officers (RMOs) to do a 13-week clinical placement in a rural General Practice. The selection process was highly competitive.
- The Scottsdale GP practice (A privately owned general practice) provided all the necessary infrastructure and supervision for the placement and committed to an intensive and highly academic teaching program, it is a practice accredited by GPTT to deliver GP registrar training both for RACGP and ACRRM programs.
- HR+ (Rural Workforce Agency for Tasmania) served as catalyst, providing all the logistic framework and management, (accommodation, internet access, induction and orientation,

clinical software learning), facilitated internal and external assessment procedures and ensured the economic resources were allocated as agreed.



Before starting the placement, the participants attended an orientation session at HR+ which covers general logistics and functioning of the program, an outline assessment and academic requirements and a hands-on session with the clinical software used by the practice.

During their placement the participants are visited at least twice by a HR+ representative and once by an external medical educator for general assessment and feedback, during these visits the participants receive feedback about their performance and provide feedback about their perception and development of the program.

The participants start by seeing two patients per hour as maximum to allow enough time for discussion with their mentor if required, a mentor is on-site 100% of their consulting time.

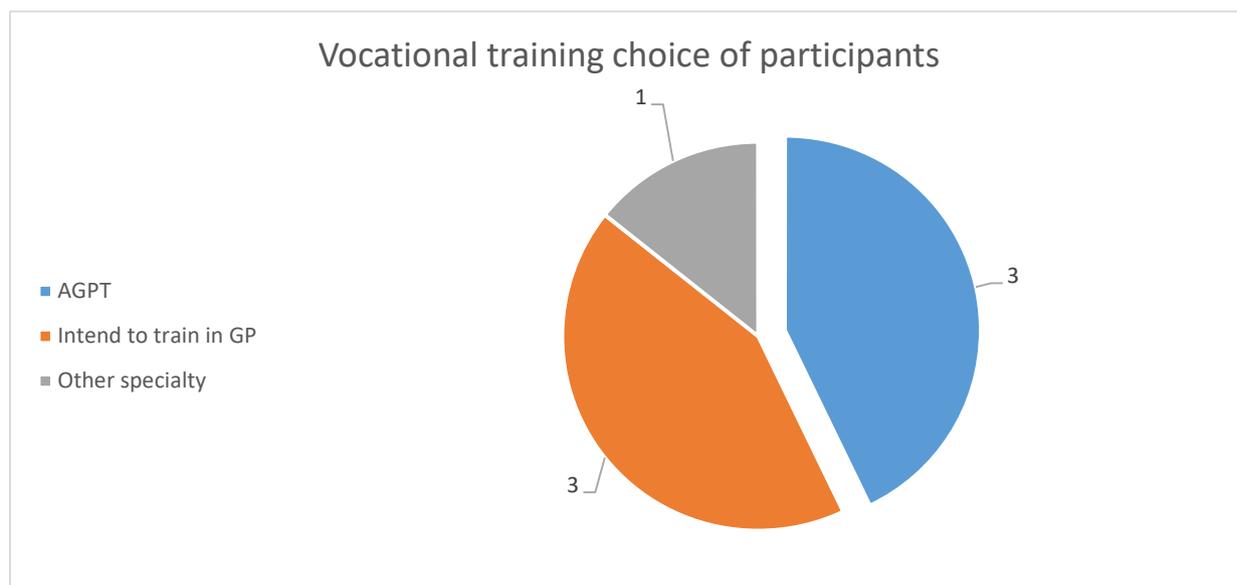
The program also includes academic activities, with at least two academic sessions per week, to discuss clinical scenarios or specific topics based on their clinical experience and patients seen.

The program was reviewed and endorsed by the Postgraduate Medical Council of Tasmania.

## Results

From January 2017 to December 2018 the program has been fully subscribed. We had eight participants starting the GP term; unfortunately, one of the terms could not be completed as the participant died in a road accident.

Out of seven participants who have successfully completed the program three have been accepted to AGPT and one has started specialty training as a General Physician, the other three have expressed interest in General Practice training.



Given the good results of this program a second location was implemented and started operation in January 2019 in East Devonport, allowing the RMOs from the Northwest Regional Hospital to access the program.

During their final assessment interviews, all the participants have rated the program to be good to excellent (Table 1) and have identified specific topics that consistently pose a challenge when they start their placement (Table 2).

Given that mental health patient management was by far the most common topic requiring improvement a pre-requisite workshop on Mental Health for GP practice has been developed at the LGH and is now compulsory for all participants, other workshops are under development.

## Discussion: key points of the GP-RMO

Although the program was developed in the spirit and following the model of the PGPPP, certain aspects make it completely different.

- Is funded locally by the State Government, making the logistics and management easier
- The RMOs obtain a provider number and their billings are managed by the program to cover the supervision and logistic expenses by the practice and the workforce agency.
- Beyond being an 'experience' program, the GP-RMO program has a well-defined academic structure.

- The program is focused exclusively on Rural general practice.
- The time spent during the placement can be recognised as prior learning for General Practice training.

## Conclusions

The development of an academically sound and fully supervised placement program for Resident Medical Officers employed by the Tasmanian Health System has provided an opportunity for Hospital Medical Officers to have first-hand experience of working as General Practitioners in a Rural Setting in Tasmania. The program has demonstrated to be economically viable and provided a much-needed step in the pathway of becoming a GP, especially for recent graduates still undecided on a specific career choice.

The success of the program so far has attracted interested and a second location has started operation in 2019.

The GP-RMO program is a viable and ongoing program that might improve the local workforce development strategies for rural and regional areas.

**Table 1 Overall rating of the program in exit surveys with participants**

Good	2
Very Good	2
Excellent	3
N/A	1

**Table 2 Topics that require improvement, as identified by the participants**

Mental health management  
 Newborn assessment  
 Procedural skills  
 Consultation time strategies  
 Obstetrics follow-up / normal pregnancy

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## Presenter

**Dr Alex Crespo-Schmidt** has an MD from National University of Mexico (1991), Specialist in General Surgery, LaSalle University, Mexico (1996) and Specialist in Plastic and Reconstructive Surgery, National University of Mexico (2000). From 2000 to 2008 he was a plastic and reconstructive surgeon in public and private practice in Mexico, then from 2009 to 2013 Staff Specialist, Plastic and Reconstructive Surgery, Launceston General Hospital. He is currently the Future Workforce Program Manager, HR+ in Tasmania.