The Royal Australian College of General Practitioners (RACGP)

Country Report 2012 – WONCA Asia Pacific

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<tr>
<th>Name of Member Organisation</th>
<th>The Royal Australian College of General Practitioners (RACGP)</th>
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<tr>
<td>Year of establishment</td>
<td>1958</td>
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<tr>
<td>Number of physician members</td>
<td>Over 18,000 Australian-registered general practitioner (GP) members</td>
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<td></td>
<td>Over 20,000 total membership – including medical students, residents/interns and affiliates</td>
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Name of any other primary care organisations and relationship to your organisation

About the RACGP

The Royal Australian College of General Practitioners (RACGP) is Australia’s largest professional general practice organisation and represents urban and rural general practitioners.

Our vision is ‘Healthy Profession. Healthy Australia’. We believe that appropriately resourced and sustainable general practice must be at the heart of an effective and efficient Australian healthcare system. It is also the key to equitable access for all Australians to high quality healthcare.

We represent over 20,000 members working in or towards a career in general practice and are proud that in the 2010-2011 financial year over 18,000 general practitioners in Australia have chosen to be a member of the College.

The College’s mission is to improve health and wellbeing for everyone in Australia by supporting general practitioners, registrars and medical students by assessing doctors’ skills and knowledge, supplying...
ongoing professional development activities, developing resources and guidelines, helping general practitioners with issues that affect their practice and developing standards that general practices use to ensure high quality care.

The College has a proud history of achievements including the development of standards for general practices and introducing continuing professional development.

There are over 125 million general practice consultations taking place in Australia annually and 83 percent of the Australian population consults a GP at least once a year.

The College has regular constructive contact with the Federal Health Minister (The Hon Nicola Roxon until January 2011, new Health Minister is The Hon Tanya Plibersek), and Department of Health and Ageing (DoHA) senior executives to enhance GP support for optimal community health.

**About United General Practice Australia (UGPA)**

There are a number of primary healthcare organisations in Australia. The RACGP works collaboratively with these organisations through an umbrella group, called United General Practice Australia (UGPA). UGPA is the united voice for general practice in Australia and includes the Royal Australian College of General Practitioners, the Australian Medical Association, the Australian General Practice Network, the Rural Doctors Association of Australia, the Australian College of Rural and Remote Medicine and the General Practice Registrars Association. The RACGP President, Professor Claire Jackson, is the Chair of United General Practice Australia.

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<th><strong>Population of your country</strong></th>
<th>22,846,690 (source: Australian Bureau of Statistics, March 2012)</th>
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<td><strong>No of total physicians</strong></td>
<td>Over 27,500 GPs in Australia (source: Australian Government Department of Health and Ageing, March 2012)</td>
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<td><strong>Do patients have to see a general practitioner to seek healthcare?</strong></td>
<td>For the majority of people living in Australia, their first contact with the healthcare system is through a general practitioner. Patients in Australia continue to be able to choose their general practitioner. For accessing specialised care, including specialist medical practitioners, allied health or community based services, patients need to obtain a referral from their general practitioner in order to access government subsidies for the consultation.</td>
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<td><strong>What is government/Ministry of Health’s support for your organisation?</strong></td>
<td>The main mechanisms by which the Federal Government supports general practice in Australia is through the provision of payments for patient care and treatment. These payments are managed by Medicare Australia through a payment system known as the Medical Benefits Scheme. Fee for service payments constitute the majority of payments to Australian general practice. These payments enable general practices to provide timely, accessible, cost efficient and high quality care and treatment.</td>
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| **What are the compelling/demanding healthcare needs/issues in your country?** | All in all, Australia is a healthy nation. People living in Australia generally have good health that compares well with other countries in many ways. Of course there are serious areas of concern that need to be tackled and there is great scope for Australia to do better.  

The RACGP recognises that there are a number of factors that impact upon the capacity of general practice in Australia. These factors include:  
- The changing burden of disease (more complex care)  
- Population changes (ageing population and increasing number of people seeking healthcare)  
- Increasing costs of healthcare  
- Access issues, particularly in some rural and metropolitan areas of need  
- Poor health of Aboriginal people and Torres Strait Islanders  
- The need to continually innovate and improve the quality and safety of healthcare  
- The need to prevent ill health  
- Pressures on the current and future workforce (including workforce shortages and ageing workforce)  
- The need for better health record management and coordination |
- Development of new approaches to manage care and treatment.

There is a gradual shift in focus to team-based care – the general practice team and other collaborative care arrangements. With the current workforce shortages facing Australia, the RACGP has advocated for a system that provides coordinated, continuous and comprehensive patient-centred care, with the general practitioner being at the centre of this to safeguard patient care and avoid duplication and fragmentation of services.

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<th>Initiative/activities your organisation is currently working on.</th>
<th>The RACGP has a strong commitment towards enhancing the safety, quality, access and efficiency of the Australian healthcare system. In its <strong>2012-2013 Federal Budget</strong> submission (January 2012), the College urged the Federal Government to provide more funding for general practice healthcare in the upcoming May Federal Budget to ensure communities receive the high quality care they deserve. Key themes highlighted within the submission include:</th>
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<td><strong>Investing in the future of e-health</strong></td>
<td><strong>Building capacity in general practice</strong></td>
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<td>- Readiness for the Personally Controlled Electronic Health Record (PCEHR) which will be available in Australia from July 2012</td>
<td>- GP led clinical governance systems in general practice</td>
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<td>- Technical capabilities to ensure national electronic interoperability</td>
<td>- General practice research capacity</td>
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<td>- Framework to support change management</td>
<td>- General practice training</td>
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<td>- Computer and information security</td>
<td>- General practice and primary healthcare infrastructure development</td>
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<td><strong>Chronic disease prevention and management</strong></td>
<td>- Pathology capacity - point of care testing</td>
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<td>- All Australians should have access to a medical home</td>
<td>- Capacity for advanced skills in general practice</td>
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- MBS Enhanced Primary Care Items
- PBS Authority Prescriptions
- PBS Safety Net
- Continuity of care – GP-hospital interface
- Preventing delayed cancer diagnosis
- Smoking cessation programs
- Healthy lifestyle changes

**Mental health – universal access**
- Mental healthcare plans
- Review of mental health funding and access

**Medication safety**
- Clinical governance systems for antibiotic stewardship in general practice
- Clinical governance systems for narcotic governance programs in general practice

**Community and residential aged care**
- GP-led coordination of community based aged care
- Patient rebates for GPs providing services to elderly patients in residential aged care facilities

**Health assessments**
- Health assessment for 15-19 year old adolescents
- Health check for all Australians over the age of 40

**Enhancing health outcomes for regional, rural, and remote communities**
- Rural Procedural Grants Program
- Education, Recruitment and Retention
- Infrastructure grants programs
- Accommodation for medical students, junior doctors and general practice trainees
- Recognising and supporting International Medical Graduates (also called ‘overseas trained doctors’ or IMGs)
- Supporting the development of general practice in our near neighbours in the Asia Pacific region

**Enhancing the health of Aboriginal and Torres Strait Islander communities**
- Supporting Aboriginal and Torres Strait Islander doctors and other health professionals
- Supporting general practitioners and other health professionals to provide clinically and culturally appropriate healthcare to Aboriginal and Torres
Strait Islander communities

- Supporting self-determination and community control

The RACGP’s full submission is available at www.racgp.org.au/media2012/45688.

Achievement/successes your organisation has made since the last Council meeting.

Highest Membership
The 2010-11 financial year marked a significant milestone for the RACGP, with a record level of 18,206 Australian-registered GP members joining the RACGP or renewing their membership. RACGP membership continues to grow, with current membership just over 20,000.

We are also pleased to report that in 2011 our National Rural Faculty achieved the largest membership in its 19 year history, which a total membership of over 7600, of which over 6700 are Australian-registered GPs.

Focus on innovation and high standards
The College continues to place a strong emphasis on providing our members with innovative benefits (such as the PrimaryCare Sidebar) and enhancing the services they receive. As a forward thinking College, we continued to lead the way in advocating and facilitating continuous improvement through clinical, educational and e-health advances.

Health reform/advocacy
Health reform has been high on the agenda for the Federal Government in 2011, and we are grateful that the College has had the opportunity to play a leading role in a number of crucial areas for general practice, including after hours care arrangements, PCEHR, e-health, telehealth, national registration, Medicare Locals, collaborative care arrangements, general practice mental health funding, diabetes and chronic disease management.

The College continues to be a tireless advocate for high quality, accessible general practice care for communities across Australia.

The College will continue to work with the government and key general practice stakeholders in 2012 on matters affecting general practice, such as general practice mental healthcare funding, non-medical
prescribing and dispensing and funding quality general practice.

**RACGP Oxygen Pty Ltd**
In 2011 the RACGP established a new subsidiary company, called RACGP Oxygen Pty Ltd, which reflects the growing importance of e-health in Australian general practice. The company has its own Board, which is chaired by Past President Dr Chris Mitchell.

**National Faculty of Aboriginal and Torres Strait Islander Health**
2011 marked the first anniversary of the RACGP National Faculty of Aboriginal and Torres Strait Islander Health. Improving the health of Aboriginal and Torres Strait Islander people is one of Australia’s highest health priorities.

**National Faculty of Specific Interests**
The RACGP National Faculty of Specific Interests has progressed throughout 2011, with 14 active networks at the end of 2011.

**Key role of general practice during disasters**
The beginning of 2011 was devastating for many people in Australia, with the floods and bushfires impacting on our members and their families in a number of states. The College provided members with a number of disaster resources such as factsheets, literature reviews, support hotline, up to date web information.

**Resources and guidelines**
The RACGP continues to develop evidence-based and high quality resources and guidelines to enable general practitioners to support their patients in best practice preventive care. Recent resources include:

- RACGP Standards for general practices (4th edition) – launched in 2010
- RACGP Standards for general practices offering video consultations (an addendum to 4th edition of the Standards)
- Implementation guidelines for video consultations in general practice – Version 2.0
- RACGP Computer and Information Security Standards (1st edition)
- RACGP Curriculum for Australian General Practice
2011

- Standards for health services in Australian prisons

**Guidelines for preventive activities**

A review of the 7th edition of the RACGP’s *Guidelines for preventive activities in general practice* (the ‘Red Book’) is currently underway. The RACGP is also in the process of updating the current version of the ‘e-red book’.

**QI&CPD Program**

The new RACGP QI&CPD program for the 2011-2013 triennium focuses on quality improvement activities and administration has been streamlined for participants.

**gplearning**

Significant enhancements to the RACGP’s online learning platform, *gplearning*, were undertaken in 2011. These enhancements include an improved, easier-to-use learning interface featuring single views of course and activity listings to make course structures easier for users to navigate.

**GP11 – annual conference**

The RACGP’s annual conference, GP11, took place in October 2011 in Hobart, Tasmania. The overarching theme was ‘Explore. Collaborate. Innovate’ and the conference program focused on women’s and children’s medicine, innovations in education, telemedicine, clinician leadership development, informatics/e-health, Aboriginal and Torres Strait Islander health, business of medicine, dermatology in practice and emergency medicine. With a focus on current and future developments in Australian general practice, the conference brought an opportunity to refine current skills, learn new skills and provide a great opportunity to share and learn with past and new colleagues. Approximately 1000 people from across the country attended.

**RACGP Fellowship/ online examinations**

In the 2010-11 financial year, over 1000 doctors were admitted to Fellowship.

In July 2011, all RACGP AKT and KFP examinations were switched to online examinations to make taking examinations a smoother process.
### A quality general practice of the future

In 2011 the RACGP released a discussion paper that discussed a potential model for the future general practice – positioned for the growing and rapidly changing general practice environment and activity platform demanded by current health reforms.

The paper provides a short descriptive overview of the quality general practice of the future from a functional perspective, i.e. the nature of the care and services provided, how and by whom. The description draws on the evidence base, the experience of existing high quality general practices, and the substantial body of work produced by the College and other professional and academic bodies. The paper is available at [www.racgp.org.au/futuregeneralpractice](http://www.racgp.org.au/futuregeneralpractice)

### Difficulties/problems your organisation is facing.

As a membership organisation, one of the difficulties is meeting all the needs for all our members. GPs in Australia practice in major cities, metropolitan areas, rural, regional and remote settings. Each of these settings can be profoundly different from another with each requiring different College support and services.

### Any other matters

- Approximately 29,000 general practitioners participate in our Quality Improvement and Continuing Professional Development program (QI&CPD), making it the largest medical CPD program in Australia

- The RACGP’s peer reviewed journal *Australian Family Physician* has a monthly print circulation of over 40,000

- 2011 has seen a significant increase in the number of applications received for The RACGP Foundation research grants, from 29 applications in 201 to 42 in 2011

### Permission to publish on web?

Yes

### Report author

Melanie Pugliese, Communications & Media Manager

### President of your organisation

Professor Claire Jackson
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<tr>
<th>Date of submission</th>
<th>13 March 2012</th>
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