An Australian Government Initiative

Good GPs for Aboriginal and Torres Strait Islander Communities

GP Training Information Package for Aboriginal Community Controlled Health Services

AGPT
Australian General Practice Training

"Having an extra doctor whose salary is paid has made a huge difference to our service."

"GP Training brings us young enthusiastic doctors with new ideas – they are innovative and up-to-date."

"There are benefits in that GPs are better trained to meet the needs of Aboriginal people."

"The benefits for us have been the service's pride in being a training practice and it is good to spread the word about the needs in Aboriginal health."

"Two of our GP registrars have stayed on."

Dr Alexandra Balzarelli with patients at Broome Aboriginal Medical Service, WA.

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Acknowledgments:

GPET is an initiative of the Australian Government Department of Health and Ageing.

This information package was developed in consultation with the GPET Aboriginal and Torres Strait Islander Health Training Reference Group.

The Reference Group includes representation from:

Australian Association of Academic General Practice	Dr Noel Hayman
Australian College of Rural and Remote Medicine	Dr David Atkinson
Australian Divisions of General Practice	Dr Simon Morgan
Australian Indigenous Doctors' Association	Dr Ngiare Brown (until February 2004) Dr Louis Peachey Dr Latisha Petterson (from February 2004)
General Practice Education and Training	Dr Tom Doolan Dr Elizabeth Marles
GP Registrars Association	Dr Peter O'Mara
National Aboriginal Community Controlled Health Organisation	Ms Jill Gallagher Ms Elaine Lomas (from October 2003) Ms Mary Martin Mr Michael Tynan (until October 2003)
Royal Australian College of General Practitioners	Dr Sam Heard
Torres Strait and Northern Peninsula Area District Health Council	Dr Peter Holt Ms Ana Levi

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GP registrar Dr Jonathon Rothstein (centre) with Arnold Collard (l) and Tracey Kitaura (r) at Derby Aboriginal Health Service, WA.

Key Facts

This document was developed under the guidance of the General Practice Education and Training (GPET) Aboriginal and Torres Strait Islander Reference Group to assist Aboriginal Community Controlled Health Services (ACCHSs) as they become more involved in the training of General Practitioners (GPs).

General Practice training in Australia today

In Australia today, to be a GP you have to *successfully* complete:

- A university course in medicine to get your degree
- At least one year of experience in a hospital to become registered
- At least 3 years of GP vocational training including an exam to gain a Fellowship of the Royal Australian College of General Practitioners

Doctors engaged in vocational training for General Practice are called GP registrars.

GP registrars are fully qualified doctors who have usually completed at least two years of hospital training. They are undertaking an additional qualification in General Practice.

The benefits of training GPs in Aboriginal Community Controlled Health Services

- Training in Aboriginal and Torres Strait Islander health is compulsory for all GP registrars in Australia. ACCHSs make the difference between good training and poor training – they bring real contact with communities that cannot be matched by any other health organisation. Aboriginal Health Workers have a key role in the training of GP registrars.
- ACCHSs undertaking training of GP registrars receive the registrars' full salary (including some on-costs) and in some circumstances a practice subsidy and teaching allowance based on the stage of training. GP registrars may also access Medicare billing if that is the normal practice of the ACCHS.
- GP registrars bring enthusiasm, up-to-date learning and new ideas to the service. GPs working in ACCHSs find the teaching stimulating and GP registrars are also often involved in training health workers and other ACCHS staff.
- Well trained GPs are able to offer efficient and effective health care to Aboriginal and Torres Strait Islander people. Some of these GPs may stay on or return to work in ACCHSs. Well informed GPs (even if they don't work in Aboriginal and Torres Strait Islander communities) help build a network of support and understanding of Aboriginal and Torres Strait Islander health issues.

Introduction to the document

This document provides further information for the reader describing:

- How GP training works
- What training is offered in Aboriginal and Torres Strait Islander health
- The GPET Aboriginal and Torres Strait Islander Health Training Reference Group and Framework
- How ACCHSs can be involved in GP training including through becoming accredited training posts, delivering Aboriginal and Torres Strait Islander health training and becoming involved in the oversight and management of GP training in their local region; and
- Contact details for key organisations

How does GP training work?

An outline

The three years of GP training include at least one year in a training hospital and at least 18 months of compulsory training in General Practices (including ACCHSs). There is 6 months of optional time (special skills training) that can be undertaken either in hospital or General Practice or a range of other relevant training situations accredited as suitable training posts by the Royal Australian College of General Practitioners (RACGP). GP registrars wishing to gain an additional qualification in Rural General Practice can complete an extra year of training in advanced rural skills posts (ARSPs). ACCHSs can also be accredited as special skills posts or ARSPs (see p 12).

The 18 months of compulsory GP training are divided into three 6 month terms – the basic, advanced and mentor (or subsequent GP experience) terms. In each of these 6 month terms a GP supervisor provides teaching and supervision. As the GP registrar progresses through each of these terms there is progressively less teaching and supervision required. In the mentor term, a GP mentor provides supervision only, with no formal teaching.

More details can be found in the Guide for GP Registrars (www.agpt.com.au/praxis.php/category/view/28 .)

Figure 1. GP Training

Year 1	Year 2	Year 3	Year 4 (Optional)
Hospital training	Basic GP term	Mentor or subsequent GP term	Advanced rural skills posts
	Advanced GP term	Special skills	

Who provides the training?

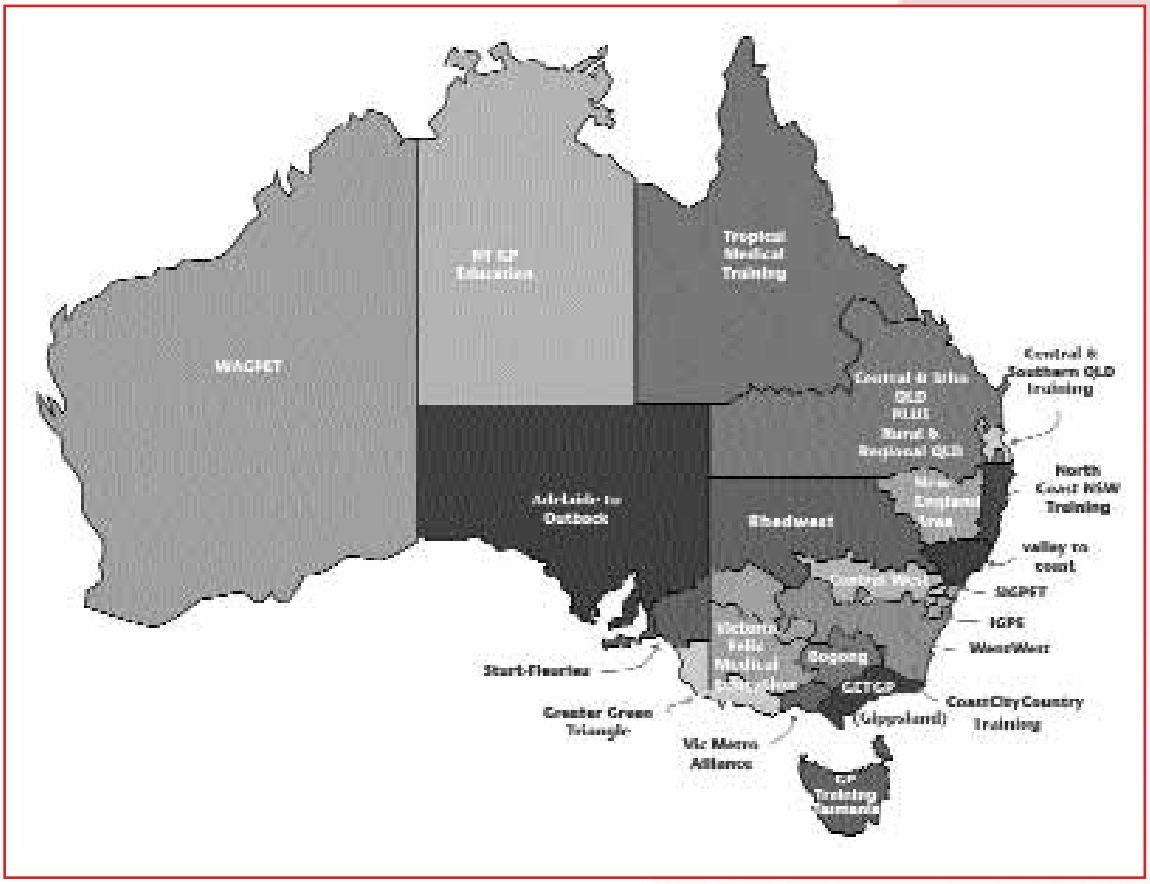
The Australian Government Department of Health and Ageing has established an organisation directed by a government appointed Board of Directors, comprised mainly of GPs, to oversee General Practice training. This organisation is called General Practice Education and Training (www.agpt.com.au).

GPET sponsors 22 regional training providers (RTPs) covering all states and territories in Australia, to provide General Practice training in line with the national curriculum and standards set by the two GP colleges – the RACGP and the Australian College of Rural and Remote Medicine (ACRRM).

The RTPs work with key regional GP stakeholder organisations, most commonly universities and divisions of General Practice to deliver training to GP registrars. GP registrars select a particular region for the whole of their training time when they apply for GP training through a national selection process. The RTPs are responsible for: selecting GP registrars applying to their region; recruiting and supporting training practices; liaising with local training hospitals; supporting and training GP supervisors; and ensuring GP registrars are supported and trained according to the national standards.

While much of the teaching in General Practice occurs in the training practices, RTPs also coordinate a range of other training experiences including regular workshops (often called "release programs" as the GP registrars are "released" from their usual clinical responsibilities), visits to other community based health care services and, in more remote areas, sometimes video and audio teleconferencing. The RTPs also employ external clinical teachers (ECTs) to undertake teaching visits to the GP registrars and their supervisors in the training practices.

Figure 2. Regional Training Providers 2004



What is covered in GP training?

The RACGP has set a curriculum for training in General Practice which forms the basis for training in all regions (http://www.racgp.org.au/folder.asp?id=709).

The curriculum reflects the types of problems with which patients may present to their General Practitioner. These include serious health problems, less serious and more common General Practice presentations, those requiring special skills, health problems specific to different population groups, presentations with public health significance and those which are preventable. The curriculum also addresses Australia's national health priorities which are based on reducing areas of highest morbidity and mortality.

Twelve curriculum statements have been developed for priority learning areas including the theory of General Practice; critical thinking and research; practice management; acute serious illness and traumatic conditions; chronic conditions; mental health; aged care; men's health; women's health; Aboriginal health; and ethnic health.

Teaching in all of the topic areas above includes consideration of the 5 Domains of General Practice:

1. Communication skills and the doctor-patient relationship
2. Applied professional knowledge and skills
3. Population health and the context of General Practice
4. Professional and ethical role
5. Organisational and legal dimensions

Advanced Rural Skills curriculum statements are available in the following areas for those GP registrars doing additional training for rural General Practice:

- Aboriginal Health
- Adult Internal Medicine
- Anaesthetics
- Child and Adolescent Health
- Emergency Medicine
- Mental Health
- Obstetrics
- Small Town General Practice
- Surgery

Both RACGP and ACRRM provide curricula for additional training in rural General Practice (http://www.racgp.org.au/folder.asp?id=709) and (http://www.acrrm.org.au/main.asp?NodeID= 3665).

L–R: Elaine Gordon, Clinic Coordinator, Aboriginal Health Worker Joyce Davidson, and GP Registrar Dr Rumindrani Liyanagamage at Daruk Aboriginal Community Controlled Medical Service in Western Sydney.

What training is offered in

Aboriginal and Torres Strait Islander health?

In 1994 a Joint Consultative Committee (JCC) was established between the RACGP and the National Aboriginal Community Controlled Health Organisation (NACCHO) and a position paper on Aboriginal health and the General Practice vocational training curriculum was developed. This paper informed the development in 1997/98 of a curriculum statement and training module in Aboriginal health. All GP registrars are required to complete core training in Aboriginal and Torres Strait Islander health in accordance with this curriculum.

This training is based on three key principles:

- ***Partnerships with Aboriginal people.*** Aboriginal educators from NACCHO affiliated organisations are involved in all aspects of the development, planning, implementation and evaluation of the curriculum;
- ***Cross-cultural training of educators.*** All medical and Aboriginal educators involved in teaching Aboriginal health undertake their own cross-cultural training beforehand;
- ***Local adaptation.*** Aboriginal communities differ across Australia so it is important that the national framework can be adapted to suit local Aboriginal community needs through consultation with local Aboriginal people.

The core training (compulsory for all GP registrars) is set out in the RACGP Aboriginal health curriculum. This includes learning about culture contact between Aboriginal and non-Aboriginal people in Australia and subsequent government regulation. Core training also addresses establishing understanding and trust when communicating with Aboriginal people, Aboriginal communities in Australia, and the health, well-being and health care of Aboriginal people. Learning objectives are noted for each of these areas of learning. This curriculum is likely to be revised in the near future.

Training activities often include visits to Aboriginal community controlled organisations, small group discussions, case studies, videos and personal stories. In each region training is approached differently and the information taught varies to reflect local differences in history, local Aboriginal culture and the resources available in that region. This core training usually takes between one and three days, though substantially more in some regions (notably the Northern Territory and the Kimberley region of Western Australia).

In addition some GP registrars take the opportunity to work in an ACCHS or a Torres Strait Island training post. These GP registrars are encouraged (but not required) to complete additional learning as set out in the optional sections of the RACGP Aboriginal health training module. GP registrars undertaking an extra year of training in rural General Practice have the option of completing additional training in Aboriginal and Torres Strait Islander health as set out in the Advanced Rural Skills Aboriginal Health Curriculum.

The Aboriginal and Torres Strait Islander

Health Training Reference Group and Framework

GPET has established an Aboriginal and Torres Strait Islander Health Training Reference Group. This group includes representation from:

- The National Aboriginal Community Controlled Health Organisation
- The Australian Indigenous Doctors' Association
- The Torres Strait and Northern Peninsula Area Health Service District
- The Royal Australian College of General Practitioners
- The Australian College of Rural and Remote Medicine
- The Australian Association of Academic General Practice
- The General Practice Registrars Association
- General Practice Education and Training

The role of this group is to oversee all issues related to GP training in Aboriginal and Torres Strait Islander health through GPET and the RTPs.

This reference group has overseen the development of a *Framework for General Practice Training in Aboriginal and Torres Strait Islander Health*. (www.agpt.com.au/registrars/abhealth.asp). ACCHSs are encouraged to read this document which sets out the best practice in Aboriginal and Torres Strait Islander health training. As part of their contracts with GPET, RTPs are required to provide Aboriginal and Torres Strait Islander health training according to this framework.

How can Aboriginal Community Controlled Health Services be involved?

ACCHSs can become involved in GP training in a number of different ways:

- training GP registrars by becoming an accredited training post
- working with the RTP to deliver Aboriginal and Torres Strait Islander health training including mentoring
- through input into management of GP training

The common point of contact for all activities related to General Practice training is the RTP.

Aboriginal Community Controlled Health Services – Accredited General Practice Training Posts

Training post requirements

To become an **accredited GP training post**, all practices including ACCHSs, must be accredited by the RACGP as training practices. This is a **different process to becoming an accredited General Practice** and may be undertaken prior to General Practice accreditation, although accredited General Practices are preferred for training.

Accreditation criteria for training posts can be found on the RACGP website (http://www.racgp.org.au/downloads/pdf/20021127vtstandards.pdf). Key criteria relate to access to a vocationally registered GP Supervisor (see page 9 of the standards document), provision of a consulting room and adequate equipment including medical records. An appropriate number of GP consultations per day is also recommended according to the level of training of the GP registrar.

GP registrars are allocated to training practices by the RTP for the first two 6 month training terms (basic and advanced). For the later mentor term as well as special skills and ARSP terms, GP registrars may select their own practice. This practice is subsequently approved for training if it is not already an accredited training practice. This means that whilst an ACCHS taking GP registrars in their basic or advanced GP terms might reasonably expect continuity of supply of GP registrars, the supply of GP registrars to those ACCHSs taking mentor, ARSP or special skills registrars may not be reliable.

ACCHSs and a few other approved Aboriginal and Torres Strait Islander Health Training Posts (mainly in Northern Territory and Queensland Health funded services), are eligible for reimbursement of GP registrar salary costs including on-costs of 9% super and workers compensation. In addition, those ACCHSs taking GP registrars in their basic and advanced training terms are eligible for a practice subsidy and teaching allowance calculated according to the stage of training and the hours of work. In addition to these payments, all ACCHSs taking GP registrars are entitled to the Medicare earnings generated by the GP registrar's bulk billing of consultations. In isolated posts the GP registrar can access travel and accommodation support which enhances their employment package.

The RTP is able to assist ACCHSs in making claims for these payments.

The GPET Aboriginal and Torres Strait Islander Health Training Framework recommends that each ACCHS develops a resource manual listing local agencies and referral services. In places where this already exists, such a manual has often been developed and updated by the GP registrar. By 2005 it is expected that each ACCHS will also have an Orientation Manual available for GP registrars. This will include information such as the history and organisation of the service, staff positions, details of local history and culture, local resources and referral services.

GP supervisor requirements

GP registrars in their first 12 months of training require teaching and supervision from an accredited GP supervisor in the same training practice. To become an accredited GP supervisor a GP is required to have the Fellowship of the Royal Australian College of General Practitioners or equivalent experience. In an ACCHS post it is essential that the GP supervisor has significant knowledge and experience of working in that environment and credibility in the local Aboriginal or Torres Strait community.

In the final 6 – 12 months of training, GP registrars are supervised by a GP mentor, preferably at the same practice location. Although the GP mentor is still required to hold the FRACGP or equivalent qualification, the approval process for GP mentors is not as rigorous as for GP supervisors.

GP registrar requirements

GP registrar teaching and supervision requirements differ for each of the GP training terms as described briefly below.

Basic GP term training posts are required to provide GP registrars with on-site supervision by an accredited GP supervisor for at least 80% of their working hours. The GP supervisor must be available by telephone and if necessary in person for the remaining 20% of working hours. The GP supervisor is also required to provide or arrange 3 hours per week of set aside teaching time in the practice. The GP registrar will also attend external teaching activities for an additional ½ day per week (or the part time equivalent for each of these).

Advanced GP training posts (covering the second 6 months of GP terms) are required to provide on-site supervision for 50% of their working hours with availability as above for the remainder of their working hours. The set aside teaching time is 1½ hours per week with half a day a fortnight spent in external teaching activities (or the part time equivalent).

Mentor (subsequent GP experience) training posts do not have to provide any formal teaching, however they are required to nominate a suitably qualified and experienced GP mentor (see above).

Special skills posts in ACCHSs have similar requirements to mentor posts except that the supervising GP is called a GP supervisor rather than a mentor.

GP registrars undertaking additional training in rural practice will complete two 6 month terms in **Advanced rural skills posts** (ARSPs). In ACCHSs these posts are required to provide GP educational mentoring only. Though there is no formal teaching requirement, the GP registrar follows a learning plan developed in consultation with their mentor. This includes completion of a research project.

GP registrars in ACCHSs

The GPET Aboriginal and Torres Strait Islander Health Training Framework recommends that GP registrars in ACCHSs receive:

- Initial orientation including local cross cultural training and orientation to the organisation, individual staff members and to working in an Aboriginal Community Controlled Health Organisation
- Mentoring from an experienced GP supervisor and a local Aboriginal community member.

The RTP and the NACCHO state or territory affiliate (see p 14) can assist with these.

Becoming a training practice

If you would like to become a training practice and to have GP registrars in your service contact your local RTP or your NACCHO state or territory affiliate (see p 14). If you would like to have an advanced rural skills post, you may also contact the National Rural Faculty of the RACGP on 1800 636 764 or email to rural@racgp.org.au for further information.

If you are having difficulties with any aspect of GP training please contact Gaye Doolan, the Program Officer, Aboriginal Health and Medical Education, GPET (see p 15).

Aboriginal Community Controlled Health Services – partnering with RTPs to deliver Aboriginal and Torres Strait Islander Health Training

Teaching the Aboriginal health curriculum

The GPET Framework requires that "Locally based Aboriginal and Torres Strait Islander health training is developed and delivered in each RTP in partnership with local Aboriginal Community Controlled Organisations and following the Aboriginal health curriculum".[1] While the RACGP curriculum and training module provide a comprehensive overview of the required teaching, how this is delivered and the exact content of that teaching is determined in each region by the ACCHS/RTP partnership.

The training framework also makes recommendations regarding adequate payment of ACCHSs for this work and support of those who are acting as educators in Aboriginal and Torres Strait Islander health.

Aboriginal and Torres Strait Islander health trainers network

A number of RTPs have established good training approaches with their local ACCHSs or their NACCHO State Affiliates. If you would like to talk with other ACCHSs or RTPs about how their training works, GPET convenes a network of Aboriginal and Torres Strait Islander health training educators who will get together face-to-face each year and more often by teleconference, to share ideas and problem solve together. Please contact Gaye Doolan for more details regarding this network (see p15).

Mentoring

The GPET Aboriginal and Torres Strait Islander Health Training Framework recommends that "interested GP registrars have access to mentoring from an experienced GP supervisor and a local Aboriginal community member".[2] Mentors are paid for their time. It is expected that a network of mentors will be established to provide support for these valuable teachers.

Aboriginal Community Controlled Health Services – management and oversight of GP training

The GPET Aboriginal and Torres Strait Islander GP Training Framework requires that "in all regions Aboriginal and Torres Strait Islander communities are involved in RTP planning and decision making, implementation and review".[3] How this is done is left to the individual RTP and the ACCHS to resolve. It is also clearly stipulated that the ACCHSs be adequately reimbursed for their time.

Some RTPs have invited local ACCHSs or NACCHO state or territory affiliates on to their boards. A range of different organisations are represented on each RTP board according to local need. In this position an ACCHS representative has the ability to influence all aspects of GP training in that region.

Other RTPs have established alternative arrangements such as including local Aboriginal and/or Torres Strait Islander community representatives in a reference group. These reference groups advise on Aboriginal and Torres Strait Islander health training in that region.

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1. A Framework for General Practice Training in Aboriginal and Torres Strait Islander Health. Canberra: General Practice Education and Training Limited, 2003.
2. *ibid*
3. *ibid*

Who do I contact?

Regional Training Providers

Contact details for all RTPs are available on the GPET website at http://www.agpt.com.au .

NACCHO State and Territory Affiliates

Aboriginal Health Council of South Australia

PO Box 75
FULLARTON SA 5063
Tel: (08) 8431 4800
Fax: (08) 8431 4822
Email: ahcsa@ahcsa.org.au
Internet: www.ahcsa.org.au/home.asp

Aboriginal Medical Services Alliance Northern Territory

PO Box 653
PARAP NT 0804
Tel: (08) 8981 8433
Fax: (08) 8981 4825
Internet: www.amsant.com.au/

New South Wales Aboriginal Health & Medical Research Council

PO Box 1565
STRAWBERRY HILLS NSW 2012
Tel: (02) 9698 1099
Fax: (02) 9690 1559

Queensland Aboriginal and Islander Health Forum

PO Box 8200
WOOLLOONGABBA QLD 4102
Tel: (07) 3393 0011
Fax: (07) 3393 2735

Tasmanian Aboriginal Centre

GPO Box 569 F
HOBART TAS 7000
Tel: (03) 6234 8017
Fax: (03) 6234 5317

Victorian Aboriginal Community Controlled Health Organisation

PO Box 1328
COLLINGWOOD VIC 3066
Tel: (03) 9419 3350
Fax: (03) 9417 3871
Internet: www.vaccho.org.au/

Western Australian Aboriginal Community Controlled Health Organisation

Unit 6 Wellington Fair, 200 Wellington Street
PERTH WA 6000
Tel: (08) 9202 1393
Fax: (08) 9202 1383
Email: admin@waaccho.org
Internet: www.waaccho.org/

Winnunga Nimmityjah Aboriginal Health Service

63 Boolimba Crescent
NARRABUNDAH ACT 2604
Tel: (02) 6284 6220
Fax: (02) 6284 6223
Internet: www.winnunga.org.au

GPET

Gaye Doolan
Program Officer – Aboriginal Health & Medical Education
GPO Box 2914
CANBERRA ACT 2601
Tel: (02) 6263 6740
Fax: (02) 6263 6788
Email: gaye.doolan@gpet.com.au
Internet: www.agpt.com.au

RACGP

RACGP Library 03 8699 0516 or library@racgp.org.au

RACGP National Rural Faculty 1800 636 764 or email – rural@racgp.org.au

ACRRM

PO Box 167
Kelvin Grove DC Qld 4059
Tel: 07 3352 8600
Fax: 07 3356 2167
Email: acrrm@acrrm.org.au
Internet: www.acrrm.org.au/

Acronyms

ACCHS	Aboriginal Community Controlled Health Service
ACRRM	Australian College of Rural and Remote Medicine
ARSP	Advanced Rural Skills Post
GP	General Practitioner
GPET	General Practice Education and Training
NACCHO	National Aboriginal Community Controlled Health Organisation
RACGP	Royal Australian College of General Practitioners
RTP	Regional Training Provider