

Constituent Question in Parliament

House of Assembly

ASKED BY: Hon Jacquie Petrusma MP

ANSWERED BY: Hon Guy Barnett MP

QUESTION:

Constituents in my electorate of Franklin, particularly in the more rural and regional areas such as the Huon Valley, have expressed concerns at the wait times to see a GP. Can the minister please provide an update on whether he is aware of what measures the federal government has done to support access to GPs in Tasmania and also provide information on what actions he is taking to make it easier to recruit doctors in rural and regional Tasmania?

ANSWER:

Both Commonwealth and State governments have developed strategies and funded initiatives to address GP workforce issues, including attraction and retention strategies.

Commonwealth support initiatives for General Practice are linked to Modified Monash Model (MMM) status and to Distribution Priority Area (DPA) status. MMM is used to assess the remoteness and accessibility of regions. DPA identifies regions where there is a shortage of medical services, particularly general practitioners (GPs). Tasmania is recognised as a DPA. This designation aims to attract and retain healthcare providers in Tasmania, addressing the disparities in healthcare access across the state.

The electorate of Franklin consists of areas classified as MMM 2 (Snug and Blackmans Bay and Risdon Vale) and MMM 5 (Huonville, Dover).

Commonwealth incentives

MMM 2 GP incentives include:

- Training initiatives:
 - Financial support for GPs, Rural Generalist education and advanced skills training support.
 - The John Flynn Prevocational Doctor Program providing support for early career doctors to experience terms in Rural General Practice.

- Private Hospital stream providing support for early career doctors to train in private hospitals.
- Access to the Remote Vocational Training Scheme which allows for supervision to be provided by a remote advisor.
- Access for International Medical Graduates to the Pre-Fellowship Program providing them with supervision, training, and access to the MBS funds.
- GP initiatives and support:
 - The Workforce Incentive Program Practice Stream provides financial incentives to a Practice.
 - The Practice Incentives Program provide financial incentives for provision of some quality and capability improvement activities.
 - Rural Bulk Billing Incentives for bulk billing patients are paid for particular item numbers in the MBS.
- Rural health workforce support activity including locum assistance, provided through HR+ in Tasmania.

MMM 5 initiatives include:

- HECS/HELP debt reduction program.
- General Practitioner Procedural Training Support Program, which remunerates costs of training in anaesthetics or obstetrics and gynaecology for Rural GPs.
- Rural Procedural Grants Program providing procedural GPs to attend Continuing professional development activities in their area of expertise.
- The Non-Vocationally Registered (VR) fellowship support program that allows Non-VR Registrars to be supported to train to be a GP.

Conjoint State-Commonwealth initiatives include:

- The Single Employer Model Pilot (2023-27) is designed to increase training placements of GP trainees in rural and regional areas and provide a sustainable pathway to strengthen the general practice workforce across Tasmania.
- Within this pilot, 20 GP Registrar positions have been created across the state including one GP Registrar currently in Dover and two in Bellerive. GPs in training are employed by the State for the duration of their training—bridging the gap between hospital-based and community-based training placements. GP registrars also receive additional educational and supervision opportunities as well as salary arrangements commensurate with hospital doctors' training in other specialist pathways.

- A State-funded GP and Primary Care Unit coordinates and facilitates the training of rural generalists in Tasmania through the Tasmanian Rural Generalist Program Coordination Unit.
- Tasmania is partnering with the Commonwealth to deliver Medicare Urgent Care Centres (UCC) across Tasmania, the Medicare UCC's clinics deliver care for urgent, but not life-threatening conditions, including assessment and treatment for minor injuries and illnesses, at no out-of-pocket cost to the patient. The fifth Medicare UCC is currently being finalised.
- National Health Directory – if patients are having difficulty obtaining an appointment or after-hours care, they can be directed to the National Health Directory online portal.

Tasmanian Government initiatives

Tasmanian Government initiatives include several initiatives to attract and retain GPs in Tasmania, including funding that provides career enhancement opportunities and activities that support GPs in their roles. Examples include:

- Primary Care Grants to support the sustainability of the sector in Tasmania, including the General Practice Sustainability and Viability Initiative, the GP After Hours Support Initiative and the Hospital Avoidance Co-Investment Fund, to ensure more Tasmanians receive the right care, in the right place, at the right time, and reducing pressure on emergency departments.
- The GP NOW Rapid Response Unit, which will work as part of a multidisciplinary team to support rural and regional communities impacted by local GP availability, including providing GP care, offering expert medical advice, as well as broader support for comprehensive virtual care to Tasmanian Health Services (THS) patients. The team will also support the growth and training of GP Registrars.
- GP attraction grants are being developed which have been created from a \$4 million commitment to attract GPs to Tasmania and give locally trained doctors extra reason to establish themselves as GPs in their home state. These grants will include:
 - An incentive of up to \$100 000 over five years for GPs who choose to settle in prioritised regional locations MMM 3-7; this will enable up to 30 GPs to be appointed to prioritised regional locations across Tasmania.
 - Reimbursement of HECS debt up to \$100 000 for GPs joining prioritised initiatives e.g. GP NOW.
- GPs with Special Interest (GPSI) program enables GPs to extend their skills and increases access to specialist outpatient services for the community and supports further integration between primary and acute care; 10 GPSIs have now been employed in the THS.

- Virtual Care includes the Care@home and Hospital@home. These services are also providing support to community palliative care teams, aged care facilities and chronic care services such as cardiac rehabilitation—keeping people in their community.
- The E-Referral system is a key action in Tasmania's Long Term Health Plan 2040. It is improving efficiencies for healthcare providers in providing and managing referrals, including navigating the system and providing appropriate patient care. A centralised single GP referral system is now operating statewide for Specialists (both Private and Public) as well as outpatient services in public hospitals and community settings.
- The State government has also worked with HR+ and local practices when issues of possible practice closures arise to determine possible viable solutions.
- There have been three recent instances where the State Government has provided one-off funding to entities looking to acquire general practices earmarked for closure. One of these is in the Franklin electorate Lauderdale Doctors - \$80 000.

APPROVED



Hon Guy Barnett MP
Minister for Health, Mental Health and Wellbeing

28 August 2024