

# Report on the results: 2021 GPSA annual national survey

This report summarises the perspectives of GPSA members about the future of GP training.

### **BACKGROUND:**

- GP training reform currently being planned involves a transition to college-led training and delivering on the strategic directions of an emerging National Medical Workforce Strategy.
- Within this model, the role of the Regional Training Organisations (RTOs) has been uncertain.
- Training practices and GP supervisors are well placed to inform the value of RTOs and the future design of GP training for informing future GP training systems.
- To gather these perspectives, GPSA used its annual 2021 national survey to ask members about their satisfaction with RTOs, who they trust to be involved in delivering high-quality training in future, the aspects of GP training that they consider important, the degree to which they feel they have been adequately consulted about GP training reforms and to comment on areas where their RTOs were performing well and where they could improve.
- The data was analysed at the national level, and by RTO.



#### **FINDINGS**:

- Over four hundred respondents answered the survey in March 2021 (Table 1).
- Overall, 53-78% of respondents were satisfied or very satisfied with their RTO and mean satisfaction was around 4.8/5 (indicating nationally, most are very satisfied) (Figure 1).
- A high proportion of respondents noted the following were important/very important to include in any future GP training model: getting support for registrars experiencing challenges; being adequately remunerated for supervision work; having a local organization to support registrar training; choosing registrars who train in their practice; getting registrars when they wanted one; and supervision resources from GPSA (Figure 2).
- All respondents nominated their current RTO as the organization that they most trusted to deliver GP training, followed by the colleges (Figure 3).
- Most respondents felt that they had been inadequately consulted about GP training reforms (Figure 4).
- Respondents noted eight areas where RTOs were performing well or could improve and these were fairly consistent across RTOs (Table 2).
- Areas where RTOs were doing well were providing supervisor training, communication, engaging and managing registrars, supporting rural training and general professionalism.



- Areas where RTOs could do better were supervisor training, communication, registrar engagement and management, and supporting rural training, supervisor pay (related to the imposition on private billing hours, hard work addressing the needs of different learners and rural supervision) and reducing red tape (forms/ paperwork).
- There were no major differences in the range of themes across RTOs and states/territories, although some themes were stronger for some RTOs over others (page 7 onwards).
- Mostly, positive attributes of the RTO work were equally weighted to any suggested improvements, suggesting there is a lot of good and some areas that need ongoing attention.



#### **CONCLUSION:**

- The survey results suggest high satisfaction with RTOs as trusted organisations to supply GP training.
- Respondents valued GP training being delivered by organisations with a local presence, providing real-time support appropriately allocating registrars.
- The second most important issue was being adequately remunerated for supervision work, which was also reflected in the qualitative comments, along with reducing red tape related to supervision.
- Respondents identified a range of areas where the RTOs are performing positively, with suggestions for things that could be actioned via ongoing quality improvement. RTOs or similar entities, are relevant and supported in the ongoing delivery of GP training.
- Training practices and GP supervisors need to be more consistently consulted about GP training reforms.
- Organisations like GPSA are valued as a clearing house of resources to support teaching practices.
- These results should be interpreted with caution given <10% of all GPSA members responded to the 2021 annual survey.

#### Table 1. Responses by Regional Training Organisation (RTO)

EVGPT	Eastern Victoria	39
GPEx	South Australia	29
GP Synergy	Incorporates New South Wales, Australian Capital Territory	156
GPTQ	Queensland	41
GPTT	Tasmania	17
JCU GPT	North West Queensland	30
MCCC	Victoria	54
NTGPE	Northern Territory	14
RVTS	Rural Australia	3
WAGPET	Western Australia	34
	National total	417



### **OVERALL SATISFACTION SCORES**

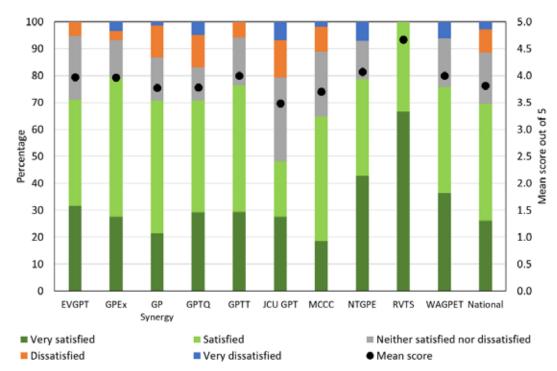
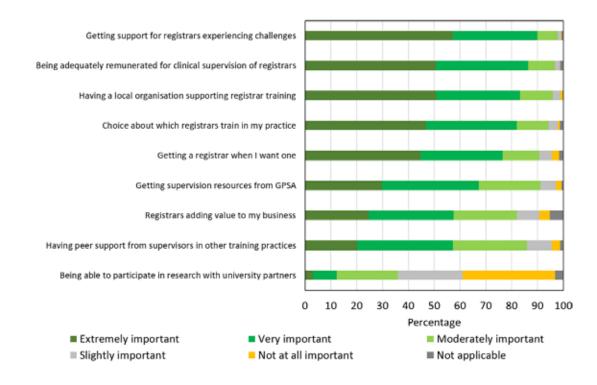


Figure 1. How would you rate your overall level of satisfaction with your RTO? (Black dots indicate mean scores out of 5—1=very dissatisfied, 5=very satisfied)

### **IMPORTANT ASPECTS OF FUTURE GP TRAINING MODELS**

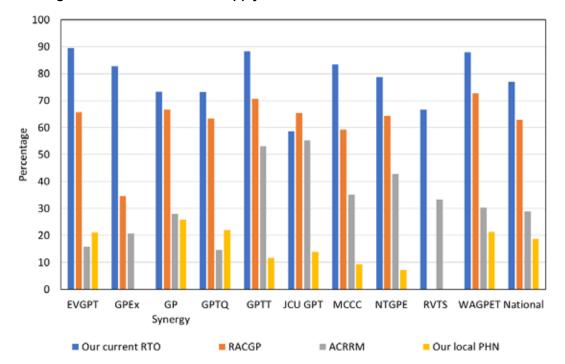
Figure 2. How important to you are the following aspects of GP training? National summary





### ORGANISATIONS THAT PRACTICES TRUST TO DELIVER GP TRAINING

Figure 3. Which of the following organisations do you trust to be involved in delivering high-quality registrar training in future? (Select all that apply.)



RTO: Regional Training Organisation; RACGP: Royal Australian College of General Practitioners; ACRRM: Australian College of Rural and Remote Medicine; PHN: Primary Health Network

### CONSULTATION ABOUT REFORMS TO GP TRAINING

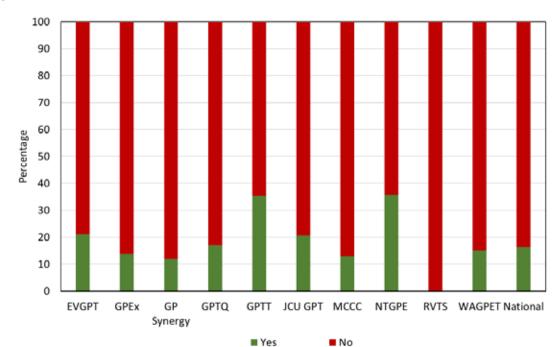


Figure 4. Do you feel you have you been adequately consulted about the current reforms to GP training?

4



Theme	Do well	Could improve
Supervisor training	<ul> <li>Good quality</li> <li>Well organised</li> <li>Regularity</li> <li>Resources to follow</li> <li>Clinical relevance</li> <li>Peer support from GP supervisors</li> <li>Blended education models</li> <li>Also have workshops for practice managers</li> <li>Outreaches the education to rural</li> </ul>	<ul> <li>Tailored to level and experience</li> <li>Relevance to on-the-job supervision role</li> <li>Supervisor networking opportunities</li> <li>Supervisor education standards</li> <li>Run workshops at better times and suitable locations</li> <li>Don't bundle it with medical student education</li> <li>Acknowledge post-graduate qualifications in education</li> <li>Education should count to CPD points</li> <li>Rigid program</li> <li>Formative feedback to supervisors as part of their education</li> </ul>
Communication	<ul> <li>Inform of any changes to training</li> <li>Notify when documentation due</li> <li>Clear expectations and timeframes</li> <li>Policies</li> <li>Accessible contact staff</li> <li>Follow up</li> <li>Prompt and helpful</li> <li>FTF communication opportunities</li> <li>When registrars in difficulty</li> </ul>	<ul> <li>Tends to rely on online interaction, communicate more in person</li> <li>More consistent</li> <li>Brevity needed</li> <li>Inform of interaction with Government and Board</li> <li>Timely contact early in term</li> <li>Simple intuitive websites</li> <li>Respond to queries quickly</li> <li>Communication not direct to supervisor resulting in missing information</li> <li>Communicate during registrar allocation requirements/process</li> <li>Staff turnover</li> </ul>
Registrar engagement and management	<ul> <li>Supply of registrars consistent</li> <li>Efficient registrar placement admin</li> <li>Support registrars in difficulty</li> <li>Excellent education program</li> <li>Attract high quality registrars</li> <li>Good pass rate</li> <li>Organised training days</li> <li>Knowing the needs of different learners</li> <li>Case management of registrars</li> <li>Registrar progression through training</li> <li>Registrar tools and assessments (GP 365, ECTV)</li> <li>Welfare of registrars</li> <li>Finding advanced registrars when needed</li> </ul>	<ul> <li>Assisting registrars to understand practice business context</li> <li>Tailor allocation of registrars to practice</li> <li>Face to face assessment important</li> <li>More support for struggling registrars</li> <li>More supply and continuity of registrars</li> <li>Allocation process murky around interview/ no certainty that time practice spends will result in a registrar (loss of business planning time)</li> <li>Exam preparation support</li> <li>Unbiased allocation (not to RTO involved staff)</li> <li>Poor flexibility in placements, including on- call rosters, part-time work</li> <li>Accommodating registrar choice/ preference</li> <li>Poor management of rogue practices/ supervisors with respect to training quality</li> <li>Need to check practices for quality training conditions</li> <li>Reduce time spent teaching out of practice (efficiency)</li> <li>Clarity around registrar placement decisions</li> <li>Feedback about registrar performance management to supervisor</li> </ul>

### Table 2: Qualitative themes summary, aggregated findings across RTOs



Theme	Do well	Could improve
Rural training	<ul> <li>Dedication to rural practices</li> <li>Rural distribution a focus</li> <li>Respond to local workforce needs</li> <li>Covers a wide region</li> <li>Region specific educational content</li> <li>Support for registrar's accommodation and personal needs in remote locations</li> <li>Excellent rural retention</li> </ul>	<ul> <li>More equitable distribution, more remote</li> <li>Flexible rural training options including part-time and matching registrars to the rural practices e.g. resus training prior to placement</li> <li>More assistance to get a registrar</li> <li>Remove two practice training policy</li> <li>Consider choice/registrar interest but also consider role of mandating</li> <li>Rural liaison and support</li> <li>Assistance with retention post fellowship</li> <li>Encourage GPs to go rural</li> <li>Stop protecting poor quality rural supervisors</li> <li>Minimise discrimination against fully private rural practices</li> <li>More support needed in rural practices</li> </ul>
Professionalism	<ul> <li>Pleasant, approachable</li> <li>Proactive and supportive</li> <li>Efficient and professional</li> <li>Kind and helpful</li> <li>Adapt to change</li> <li>Friendly</li> <li>Great reconciliation action plan</li> <li>Dedicated leadership</li> <li>Genuinely caring</li> <li>Encouraging</li> </ul>	
Red tape		<ul> <li>Unnecessary forms</li> <li>Reduce bureaucracy</li> <li>Make simple clear paperwork</li> <li>Reporting process high burden (log registrar hours, patients, training, provider numbers, IT and communication, all very onerous)</li> <li>Meaningless forms (detailed forms where hard to see important aspects)</li> <li>Box ticking with no connection to training</li> <li>RTOs not reading the forms I submit e.g. KCA</li> <li>Delay in processing paperwork</li> <li>Less onerous reporting</li> </ul>
Supervisor pay		<ul> <li>Pay more for all the hard work/time</li> <li>Don't cap monthly teaching hours</li> <li>Respect private practice financial dynamics</li> <li>Remunerate, and support across supervision pathway, including OTDs needing more support, as well as GPT3 and 4</li> <li>Reimburse rural supervisors</li> <li>Pay supervisors to attend training days</li> <li>More pay for registrar taking leave</li> </ul>



# QUALITATIVE THEMES BY RTO

### EVGPT - What did your RTO do well?

Theme	Comment
Supervisor training	<ul> <li>The actual workshops and seminars are very good quality (EV)</li> <li>Well organized training (EV)</li> <li>GP supervisor PD (EV)</li> </ul>
Communication	<ul> <li>Keeping us informed of any changes that occurring (EV)</li> </ul>
Registrar engagement and management	<ul> <li>Good teaching sessions for registrar (EV)</li> <li>Excellent program (EV)</li> <li>Good pass rate for registrars (EV)</li> <li>Attracting good quality GP candidates (EV)</li> </ul>
Rural training	<ul> <li>I have a lot of respect for our local (rural) medical educators and their dedication to the registrars and practices (EV)</li> </ul>
Professionalism	<ul> <li>Staff are pleasant and approachable (EV)</li> <li>I find they're very proactive and supportive (EV)</li> </ul>

# EVGPT - What could your RTO do better?

Theme	Comment
Supervisor training	<ul> <li>They provide training, but all I hear from supervisors is they don't get much out of it, don't enjoy it, and don't apply much of it (EV)</li> <li>Develop supervisor skills beyond a baseline - we keep getting one-size-fits-all supervisor workshops despite the huge range of experience levels (EV)</li> <li>Supervisor education standards have fallen markedly with online education (EV)</li> <li>More opportunities to get together with other supervisors would be great. A Facebook group or WhatsApp group could be good as an alternative. I've always enjoyed the informal networking with other supervisors and learning from the older ones how they do things it is frustrating when I see how my colleagues in hospitals are able to access 'professional development' leave and pay. I do my professional development in my own time, unpaid, in the evenings and on weekends. It is a barrier (EV)</li> <li>Liaise with us as educators (EV)</li> <li>Supervisor engagement especially for experienced supervisors (EV)</li> <li>Have smaller numbers at supervisor training (EV)</li> <li>Supervisor education standards have fallen markedly with online education (EV)</li> </ul>
Supervisor pay	<ul> <li>Pay more for the hard work (EV)</li> <li>We are told we are the backbone but don't get well remunerated (EV)</li> <li>Pay us better for our time training and supervising (EV)</li> <li>Reasonable remuneration (EV)</li> <li>Pay GP supervisors better. Have less onerous reporting requirements for detail of hours spent teaching, allowing or variability from week to week or month to month, at moment monthly teaching hours paid for are capped, so there can be no "averaging" if many hours one month and less hours the following month (EV)</li> </ul>
Registrar engagement and management	<ul> <li>Teach the registrars about the practice's perspective in having them train there - that there are costs, and we work best if we're all flexible (EV)</li> <li>We are being insidiously stifled by one size fits all administrative approach (EV)</li> <li>Tap into being providers of the full spectrum that is "should be" General Practice (EV)</li> <li>I don't like assessment of registrars by zoom etc. No need now for this Educators should come to the clinic to assess (EV)</li> </ul>
Red tape	<ul> <li>Lots of unnecessary forms to fill out. Simple tasks have become difficult (such as booking in to attend a workshop). Less paperwork would be much appreciated easier to use program (EV)</li> </ul>



# GP Synergy - What did your RTO do well?

Theme	Comment
Supervisor training	<ul> <li>Webinars, education for GPR and GPS (GP Syn)</li> <li>Guides and teaches registrars &amp; supervisors (GP Syn)</li> <li>Training supervisors (GP Syn)</li> <li>Keep learning modules regular (GP Syn)</li> <li>Education of registrar and supervisors</li> <li>Provide ongoing supervisor training and education (GP Syn)</li> <li>Online training portal is very user friendly and packed with excellent useful resources (GP Syn)</li> <li>Excellent Supervisor CPD (GP Syn)</li> <li>Very focused on online education delivery and resources, which it does reasonably well (GP Syn)</li> <li>Provides high quality training to registrars and supervisors (GP Syn)</li> <li>Very good training program (GP Syn)</li> <li>Webinars with clinical relevance and good tips (GP Syn)</li> <li>Education of both registrars and supervisors (GP Syn)</li> <li>Ongoing excellent face to face and online CPD (GP Syn)</li> <li>The peer support GP supervisors are excellent (GP Syn)</li> <li>Runs excellent events (GP Syn)</li> </ul>
Communication	<ul> <li>Update regularly (GP Syn)</li> <li>Excellent communication - esp updates, effective and clear (GP Syn)</li> <li>Keep us up to date, remind us to do paperwork (GP Syn)</li> <li>Communication in keeping us informed (GP Syn)</li> <li>Make rules (GP Syn)</li> <li>Give plenty of notice for when documentation is due (GP Syn)</li> <li>Keep us informed of requirements to maintain our supervisor status (GP Syn)</li> <li>Set up reasonable &amp; clear expectations of what the training GP supervisors are to offer entails (GP Syn)</li> <li>Clear about expectations of a supervisor (GP Syn)</li> <li>Clear policies and procedures (GP Syn)</li> <li>Communicate and follow up (GP Syn)</li> <li>Communicates well (GP Syn)</li> <li>Communicates with practices and supervisors (GP Syn)</li> </ul>
Registrar engagement and management	<ul> <li>Smooth flow of registrars to the practice</li> <li>Efficient management of registrar placement (GP Syn)</li> <li>Supplies us with registrars regularly. (GP Syn)</li> <li>Good ongoing supply of registrars with clear process (GP Syn)</li> <li>Very good registrar support (GP Syn)</li> <li>Consistent supply of registrars (GP Syn)</li> <li>Co-ordination of policies and registrars</li> <li>Select high quality registrars (GP Syn)</li> <li>I feel they are supportive of registrars when they run into issues - better at keeping them engaged (GP Syn)</li> </ul>
Rural training Professionalism	<ul> <li>Distribute registrars fairly across its footprint (GP Syn)</li> <li>'Communication, training and assistance of a very prompt and high caliber</li> </ul>
	<ul> <li>Available for advice and supportive (GP Syn)</li> <li>Listen and communicate (GP Syn)</li> <li>Overall organisational process is mostly efficient (GP Syn)</li> <li>Very computerized (GP Syn)</li> <li>Efficient, knowledgeable professional (GP Syn)</li> <li>Friendly and helpful (GP Syn)</li> <li>Support me if problems arise (GP Syn)</li> <li>Good support and advice (GP Syn)</li> <li>Always happy to assist us (GP Syn)</li> <li>Good support when needed (GP Syn)</li> </ul>



# GP Synergy - What could your RTO do better?

Theme	Comment
Supervisor pay	<ul> <li>… Unpaid work by supervisors, and an apparent lack of understanding of private practice financial dynamics</li> </ul>
Communication	<ul> <li>Really get to know the teaching practices and apply standards to teaching. It is more about completing the forms online than the quality of the practice or relationship between the registrar and supervisor (GP Syn)</li> <li>Contact more in person (GP Syn)</li> <li>Keep GPs better informed about interaction with Government (GP Syn)</li> <li>More personal communication with the practice - more by phone rather than email, involving supervisors more where the registrar is in difficulty, and providing more practical support to supervisor/practice at those times (GP Syn)</li> <li>Supervisors used to have more personal contact with administrators (GP Syn)</li> <li>Be more personable (GP Syn)</li> <li>I think it would be good for all those directly responsible or "attached" to a registrar to make contact in the first 2-3 weeks of placement. It is week 5 now and I have not "met" any of the others supporting the registrar attached to me (but I have emailed them and started the process) (GP Syn)</li> <li>More concise communication! (GP Syn)</li> <li>Less abbreviations, less repetition (GP Syn)</li> <li>A simpler, more intuitive website would really help (GP Syn)</li> <li>Their website could be more user friendly. (GP Syn)</li> <li>Web platform could be easier to navigate (GP Syn)</li> <li>Web platform could be easier to navigate (GP Syn)</li> <li>Improve their web portal (GP Syn)</li> </ul>
Registrar engagement and management	<ul> <li>Provide struggling registrar a better support (GP Syn)</li> <li>Local support for non-performing registrars (GP Syn)</li> <li>We had a challenging registrar and the proposed solution was more education time, (AKA Kick the can down the road) (GP Syn)</li> <li>Getting support for supervisors and practice staff when they seek advice regarding issues they are having with registrars (GP Syn)</li> <li>Provide better support for GP supervisors who are struggling with faltering registrars (GP Syn)</li> <li>Provide continuity of GPRS (GP Syn)</li> <li>Provide continuity of GPRS (GP Syn)</li> <li>Provide more personalised support (GP Syn)</li> <li>Be more active in assisting us find GP registrars (GP Syn)</li> <li>Improved localization and personalization of training (GP Syn)</li> <li>The registrar allocation/interview process is complicated and a bit murky. You get a whole lot of applications who are then not available because they have already accepted a position. A lot of time wasting, and uncertainty involved. (GP Syn)</li> <li>Help practice understand the registrar placement opportunity prior to each term so we can business plan e.g. how many registrars for how many places (GP Syn)</li> <li>Attempt to gain more understanding of individual practices and applying standards in a more flexible manner (GP Syn)</li> <li>More individual approach to training (GP Syn)</li> <li>Registrar selection is terrible. It becomes a bun rush. When Valley to Coast were organising they would allow time for practices to interview registrars. Top 3 preferences by registrars and practices shared out first year placements. (GP Syn)</li> <li>Allocate registrars to the best teaching practices (GP Syn)</li> <li>Allocate registrars to the best teaching practices (GP Syn)</li> <li>More support for Registrars at exam time and also information for how to support for Registrars in exam preparation (GP Syn)</li> <li>We are meant to support our GPR for the exam but there is no funding for teaching at this level. Like everyone else expects to</li></ul>



Theme	Comment
Red tape	<ul> <li>Reduce bureaucracy (GP Syn)</li> <li>Simplify GP registrar placement (GP Syn)</li> <li>Bureaucracy very painstakingly clunky and wordy (GP Syn)</li> <li>Reduce bureaucracy for GP Registrars (GP Syn)</li> <li>Less bureaucracy (GP Syn)</li> </ul>
Rural training	<ul> <li>Better systems for registrar allocation and workforce distribution</li> <li>Equitable distribution of resources (GP Syn)</li> <li>When setting up city-based registrars to go for a rural term could they give them the option of part-time optionThey have troubles when they have small children, babies, spouses to committing to full week (GP Syn)</li> <li>They could help us recruit registrar in regions where it has been extremely difficult to get any new registrars in the last 1-2 years (GP Syn)</li> <li>Geographical distribution of registrars (GP Syn)</li> <li>Assist with attracting registrars to a more rural practice</li> <li>SUPPORTING RURAL PRACTICE! Registrar placement process - making it fairer (GP Syn)</li> <li>Better bet/fit trainees for terms that are rural - small town thinking, commitment to travel to their placement when full time, interest in ever going further than Liverpool when Fellowed (GP Syn)</li> <li>Not enforce 2 practice training policy - does NOT work for Rural towns (GP Syn)</li> <li>Support rural practices (GP Syn)</li> <li>Do NOT FORCE Registrars with families in other location to be made to live and work rural towns - consider their needs as individuals (GP Syn)</li> </ul>





# JCU GP Training - What did your RTO do well?

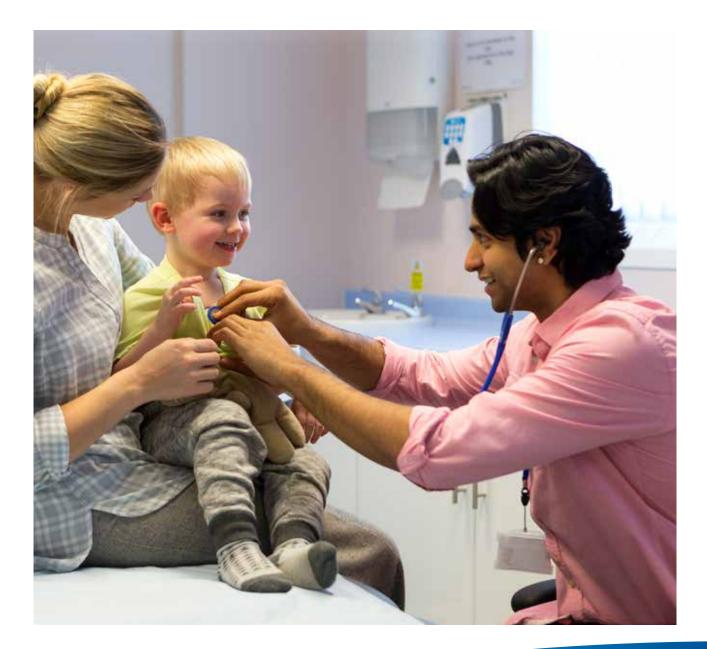
Theme	Comment
Supervisor training	<ul> <li>Registrar workshops, Supervisor workshops (JCU GPT)</li> <li>Teaching modules (JCU GPT)</li> <li>Support for education and training, support for medical workforce (JCU GPT)</li> </ul>
Communication	<ul> <li>Good support to registrars and supervisors (JCU GPT)</li> <li>Very engaged with registrars and good education processes</li> <li>Good communication to supervisors (JCU GPT)</li> <li>The local node are very accessible. They are very quick to assist and keep us up to date with changes (JCU GPT)</li> <li>Communication and support (JCU GPT)</li> </ul>
Registrar engagement and management	<ul> <li>Very engaged with registrars and good education processes (JCU GPT)</li> <li>Good educational resources for registrars and supervisors (JCU GPT)</li> <li>Our registrars report that most of the organised training days are very good (JCU GPT)</li> <li>Coordinate training for registrars and supervisors well (JCU GPT)</li> <li>Supply registrars consistently (JCU GPT)</li> <li>Recognition that some learners need extra support (JCU GPT)</li> </ul>
Rural training	<ul> <li>Responds to local workforce needs (JCU GPT)</li> </ul>
Professionalism	<ul> <li>Most of the trainers performing the ECT visits are kind and helpful (JCU GPT)</li> <li>Good relationships (JCU GPT)</li> <li>Local medical educators are pleasant (JCU GPT)</li> </ul>

# JCU GP Training - What could your RTO do better?

Theme	Comment
Supervisor training	<ul> <li>Supervisor workshops could be run at better times and at suitable locations (JCU GPT)</li> <li>Supervisor education is improving. It is bundled with medical student education which is very different (JCU GPT)</li> </ul>
Communication	<ul> <li>Often rude to deal with. Not supportive (JCU GPT)</li> <li>Advertise to the general community how GP training works and what the workforce issues are, how things like Medicare rebate affect rural practice ability to attract registrars (JCU GPT)</li> <li>Direct correspondence with myself as correspondence between the RTO and this practice involves my Medical Director and the Human Resource unit. I am often left out of the loop with some disturbing consequences (JCU GPT)</li> <li>Better communication with Practices and Supervising GPs (JCU GPT)</li> <li>Visit practices in person (JCU GPT)</li> <li>More interaction with practices in regards to placements (JCU GPT)</li> </ul>
Registrar engagement and management	<ul> <li>Feed themselves as RTO employees are also practice owners who always get the pick of the registrars and often more than 1 registrar while others go empty handed (JCU GPT)</li> <li>Allow registrars to pick their practice instead of forcing them to certain practices leading to resentment (JCU GPT)</li> <li>They need to let registrars be involved more in selecting where they train. Forcing registrars into remote/workforce shortage areas can be very traumatic. I understand the mandate to serve these areas but there is a person/family/child involved. Pay those willing to work in areas of need more and they will go (JCU GPT)</li> <li>RTO can give registrars and practices flexibility in the placement (JCU GPT)</li> <li>More registrars need to be offered (JCU GPT)</li> <li>Listen to registrars and let them be placed in areas they chose to go to esp if the practice has the capacity and supervisors on the floor (JCU GPT)</li> <li>Teach GPs how to be a real doctor not GPs for five minutes corporate bulk billing practices (JCU GPT)</li> </ul>



Theme	Comment
Red tape	<ul> <li>Creates lots of paperwork (JCU GPT)</li> <li>Administration and reporting process for logging Registrar hours, patients, training etc. is confusing and onerous (JCU GPT)</li> <li>Administration of provider numbers. Applications are often missed which causes delay in provider numbers being issued (JCU GPT)</li> <li>Forms, IT and communication (JCU GPT)</li> </ul>
Rural training	<ul> <li>Rural liaison and support (JCU GPT)</li> <li>Our RTO is based in Townsville and interested in filling true rural practices. We feel like we are asked to take on many "at risk" registrars or registrars other practices aren't interested in (JCU GPT)</li> <li>Better understanding the needs of rural/remote trainees and practices - especially with flexibility of training (JCU GPT)</li> <li>JCU could be more focused on their entire region (JCU GPT)</li> </ul>





# MCCC - What did your RTO do well?

Theme	Comment
Supervisor training	<ul> <li>Quality of the education content (MCCC)</li> <li>Educate &amp; support GPs (MCCC)</li> <li>Supervisor training (MCCC)</li> <li>Supervisor workshops (MCCC)</li> <li>Professional development for supervisors (MCCC)</li> <li>Supervisor PD and networking events (MCCC)</li> <li>Supervisor workshops (MCCC)</li> <li>Provides a blended education model - workshop/webinar and online (MCCC)</li> <li>Quality GP training program presented in blended format (utilising online and face to face activities to maximise education quality and efficiency) (MCCC)</li> <li>Very good supervisor program (MCCC)</li> <li>Communicates with supervisors and offers excellent supervisor education (MCCC)</li> </ul>
Communication	<ul> <li>Well informed with update emails and reminders (MCCC)</li> <li>Develop policies (MCCC)</li> <li>Good communication/structure (MCCC)</li> <li>Pretty good at communication (MCCC)</li> <li>Communication with MCC is excellent (MCCC)</li> </ul>
Registrar engagement and management	<ul> <li>Generally very good quality registrars (MCCC)</li> <li>Practice match (MCCC)</li> <li>Facilitates registrar progression through training (MCCC)</li> <li>Registrar support (MCCC)</li> <li>Support for trainees in difficulty (MCCC)</li> <li>Webinars for registrars (MCCC)</li> <li>Regional registrar training case management (MCCC)</li> <li>Registrar teaching (MCCC)</li> <li>I am happy with the standard of GP registrars it offers (MCCC)</li> <li>Provides access to registrars (MCCC)</li> <li>Support registrars who are in trouble (MCCC)</li> <li>Facilitates registrar progression through training (MCCC)</li> <li>Coordinates training (MCCC)</li> <li>Covers a vast swathe of regional Victoria (MCCC)</li> <li>Has a very good training programme (MCCC)</li> </ul>
Rural training	<ul> <li>Covers a vast swathe of regional Victoria (MCCC)</li> <li>Region-specific education content (MCCC)</li> </ul>
Professionalism	<ul> <li>Communication (MCCC)</li> <li>Staff support by phone or in person (MCCC)</li> <li>Responses are received quickly (MCCC)</li> <li>Adapting to change (MCCC)</li> <li>Very friendly to deal with (MCCC)</li> <li>Good admin support to practices (MCCC)</li> <li>Send reminders for when things are due (MCCC)</li> <li>Good back up when needed (MCCC)</li> <li>Easy to contact (MCCC)</li> <li>Good practice support, dealing with issues (MCCC)</li> </ul>



# MCCC - What could your RTO do better?

Theme	Comment
Supervisor	<ul> <li>Acknowledge educationalist expertise in experience and postgrad training i.e.</li> </ul>
training	<ul> <li>Dip Clin Ed. (MCCC)</li> <li>Development of educator modules that count towards CPD - in process, ACCRM assistance education for non ACRRM supervisors with ACRRM trainees (MCCC)</li> <li>Making Educational activities more valuable for Supervisors (feedback is that attendance adds low value to training from supervisor perspective) (MCCC)</li> <li>Improved CPD for supervisors (MCCC)</li> </ul>
Communication	<ul> <li>Communicate with GPS - personally I hate emails!! (MCCC)</li> <li>Better more consistent communication with supervisors (MCCC)</li> <li>Communication to supervisors (MCCC)</li> <li>I would like more individual interaction (MCCC)</li> <li>Restart face to face communication with facilities (MCCC)</li> <li>Clearer communication (MCCC)</li> <li>More succinct updates (MCCC)</li> <li>Communicate more consistently (MCCC)</li> <li>Engagement is limited (MCCC)</li> <li>Communication/inclusion (MCCC)</li> <li>Better communication between registrars/practices/RTOs (MCCC)</li> <li>Communication (MCCC)</li> <li>Support practices better (MCCC)</li> <li>Unresponsive to enquiries made (MCCC)</li> <li>Provide more consistent support to practices (MCCC)</li> </ul>
Registrar engagement and management	<ul> <li>Recruit more registrars (MCCC)</li> <li>Some lack of flexibility around registrar needs. unfair acknowledgement of registrars on on-call rosters for hospital and aged care with a lot of out of hours work not compensated or factored into training time (MCCC)</li> <li>Post-registrar preparedness - becoming a contracted GP</li> <li>More flexibility in taking individual circumstances into account for a Registrar (MCCC)</li> <li>Re-organize the match selection process. The process does not make sense at all (MCCC)</li> <li>Revise the practice match process to a more equitable system (MCCC)</li> <li>Allow us to employ the registrars we want, remove the matching system (MCCC)</li> <li>Registrar Matching Process (MCCC)</li> <li>More transparency in the practice match process (MCCC)</li> <li>Earlier matching process (MCCC)</li> <li>Streamline the practice match process (MCCC)</li> </ul>
Supervisor pay	<ul> <li>Pay supervisors more (MCCC)</li> <li>Remunerate supervisors better (MCCC)</li> </ul>
Red tape	<ul> <li>Excessive paperwork (MCCC)</li> <li>Reduce red tape and complexity of reporting systems (MCCC)</li> <li>Far too much administration that's meaningless - I'm signing registrar agreements which are so detailed, it's difficult to tease out the important aspects (MCCC)</li> <li>Simplify the paperwork (MCCC)</li> </ul>
Rural training	<ul> <li>Better understanding the needs of rural/remote trainees and practices - especially with flexibility of training, prioritizing placements and not trying to fit everyone into a box (MCCC)</li> <li>Distribution of registrars (MCCC)</li> <li>Facilitate more GP registrar placements (MCCC)</li> <li>Placement of registrars in rural communities is challenging and this is a difficult problem for the RTO or anyone else tasked with it (MCCC)</li> <li>Assistance with retention of medical workforce in remote rural areas post fellowship (MCCC)</li> </ul>



# GPEx - What did your RTO do well?

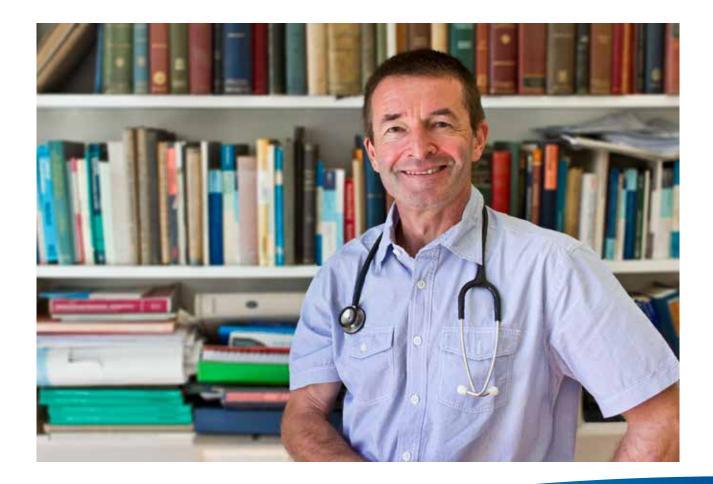
Theme	Comment
Supervisor training	<ul> <li>Workshops for Practice Managers (GPEx)</li> <li>Bring back training around sexual health and more ATSI training for Registrars (GPEx)</li> <li>Supervisor workshops (GPEx)</li> <li>Training for supervisors, practice managers is excellent (GPEx)</li> <li>Supervisor support and education (GPEx)</li> </ul>
Communication	<ul> <li>Practice visits are very appreciated and important to enable good communication (GPEx)</li> <li>Communication with Practice Manager (GPEx)</li> <li>Regular communication (GPEx)</li> <li>Being able to contact someone to get a quick answer (GPEx)</li> </ul>
Registrar engagement and management	<ul> <li>Tries to provide us with a Registrar for training (GPEx)</li> <li>Good online reg training (GP 365) with modules. Great background for all GP and exams (GPEx)</li> <li>Providing procedural registrar (GPEx)</li> <li>Manage exam preparation. Theoretical content (GPEx)</li> <li>Welfare of registrars (GPEx)</li> <li>High pass rates for the fellowship candidates (GPEx)</li> <li>Does a good well-rounded training and follow through with the registrars (GPEx)</li> <li>Has formal remediation programs in place (GPEx)</li> <li>Registrar support and education (GPEx)</li> <li>Support registrars (GPEx)</li> <li>Follow up problems with registrar training support of registrar and practice for training (GPEx)</li> </ul>
Rural training Professionalism	<ul> <li>Allocation of registrars to practices (GPEx)</li> <li>Support for both registrars/supervisors and practice manager (GPEx)</li> <li>Using IT platforms to deliver training and assessments, generally supportive (GPEx)</li> <li>Have been very satisfied with GPEX - their assistance with any problem or enquiry has always been prompt and helpful (GPEx)</li> </ul>

### GPEx - What could your RTO do better?

Theme	Comment
Supervisor training	<ul> <li>Rigid rules re attending supervisor training every year even if done for 20 years (GPEx)</li> <li>Encourage more GP supervisors to take up formal qualifications in teaching (GPEx)</li> <li>Support supervisors (GPEx)</li> </ul>
Communication	<ul> <li>Communication with the Board (GPEx)</li> <li>Perhaps quarterly practice visits with the registrar/supervisors and practice manager to follow up and keep it more personable (GPEx)</li> <li>Communication with supervisors (GPEx)</li> <li>Liaise with supervisors. Contact about registrars (GPEx)</li> <li>I have been a supervisor for four years and I have never been directly contacted by the GPEx. So communication needs to step up (GPEx)</li> <li>Communicate at individual level with practices - very rarely see them (GPEx)</li> </ul>



Theme	Comment
Registrar engagement and management	Registrar placements (GPEx)
Supervisor pay	<ul> <li>Fund teaching registrars better in their last year of training</li> <li>Better reimbursement for rural supervisors (GPEx)</li> </ul>
Red tape	• Too many "box ticking" processes which seem to have little to do with training. E.g. documenting 100 patient consultations. I have found that the KCA responses, both from the registrar and myself, do not seem to be read. To test this I deliberately put in spurious, albeit humorous, responses but there was no follow-up (GPEx)
Rural training	<ul> <li>"Encourage GPs to go Rural"- The universities have opened more positions to study medicine BUT it is not alleviating the Rural GP shortage!!!! (GPEx)</li> <li>Very poor allocation of registrars to a rural area desperately needing and wanting to train more GPs (GPEx)</li> <li>I am accredited as a supervisor but have not been the direct supervisor of any GPEX trainees. I have also been an RVTS supervisor (GPEx)</li> <li>Should not send reg to country without some resus training. Should have compulsory rural emergency course to do prior to coming to country. Not fair to throw them in deep end and makes it extra hard for supervisors (GPEx)</li> <li>Gives us more registrars. Stop sending them to places that have lots of doctors already (GPEx)</li> <li>Supporting our rural trainees better, and not protecting bad rural supervisors (GPEx)</li> </ul>





# GPTQ - What did your RTO do well?

Theme	Comment
Supervisor training	<ul> <li>Workshops for supervisors (GPTQ)</li> <li>The training days are excellent (GPTQ)</li> <li>GP supervisor training (GPTQ)</li> <li>Courses for practice managers (GPTQ)</li> <li>Support trainees &amp; Supervisors (GPTQ)</li> </ul>
Communication	<ul> <li>Communication is clear, concise and up to date (GPTQ)</li> <li>Send a lot of training information &amp; assist in re-accreditation (GPTQ)</li> <li>Good communication. Always answer my questions (GPTQ)</li> <li>Communication, education, pastoral care, processes (GPTQ)</li> </ul>
Registrar engagement and management	<ul> <li>Training for Registrars (GPTQ)</li> <li>Provide registrars and education (GPTQ)</li> <li>Has been able to find advanced registrars for us (GPTQ)</li> <li>Providing quality medical education/relevant content to registrars on their educational release. Giving support to struggling registrars (GPTQ)</li> <li>Good teaching (GPTQ)</li> <li>Allocation of Registrars (GPTQ)</li> <li>Registrar placement and support (GPTQ)</li> <li>Support our GP registrars very well (GPTQ)</li> </ul>
Professionalism	<ul> <li>Friendly communication (GPTQ)</li> <li>Liaise with Supervisors (GPTQ)</li> <li>Has been contactable and responsive (GPTQ)</li> <li>Email correspondence is swift &amp; can be informative (GPTQ)</li> <li>Communication (GPTQ)</li> <li>Communication and direction for team members, supervisors and registrars (GPTQ)</li> <li>Payment of invoices (GPTQ)</li> <li>Good IT systems (GPTQ)</li> <li>Provides plenty of resources (GPTQ)</li> </ul>

### GPTQ - What could your RTO do better?

Theme	Comment
Supervisor training	• Supervisor support and education - which they are working on (GPTQ)
Communication	<ul> <li>They avoid being noticed (GPTQ)</li> <li>I don't presently see what they do (GPTQ)</li> <li>Could keep the practice better informed, particularly of days registrars will be away from the practice (GPTQ)</li> <li>Online support is poor. Website is difficult to use (GPTQ)</li> <li>Their website/portal - very user unfriendly (GPTQ)</li> <li>Communicate around Registrar place and requirements (GPTQ)</li> <li>Improve their web portal (GPTQ)</li> <li>Clearer support structures - high turnover of staff difficult (GPTQ)</li> <li>Have portal that I could log into with all the details of the current GPTQ participants (GPTQ)</li> </ul>



Theme	Comment
Registrar engagement and management	<ul> <li>Provide more info to GPs regarding assessments (GPTQ)</li> <li>Get registrars to practices (GPTQ)</li> <li>Stop rogue practices and supervisors from having registrars (GPTQ)</li> <li>Check training practices for appropriate training conditions</li> <li>Perhaps support for the consecutive registrars could be improved. All focus is on the GPT1 and 2 (GPTQ)</li> <li>Registrar teaching out of practice could be done in half the time (GPTQ)</li> <li>Support for the registrars' education and exam prep (GPTQ)</li> <li>Encourage more applicants (GPTQ)</li> <li>Help us find suitable registrars (GPTQ)</li> </ul>
Supervisor pay	<ul> <li>Supervisors not paid for training days (GPTQ)</li> <li>A little more support in relation to remuneration i.e. sick pay, leave etc. of Registrars (GPTQ)</li> </ul>
Red tape	<ul> <li>Less paperwork (GPTQ)</li> <li>Organization, less politics (GPTQ)</li> </ul>
Rural training	• There is significant discrimination against fully private rural practices (GPTQ)

# NTGPE - What did your RTO do well?

Theme	Comment
Supervisor training	<ul> <li>Good supervisor workshops (NTGPE)</li> <li>Education and training (NTGPE)</li> <li>Good workshops (NTGPE)</li> <li>Supervisor update workshops are excellent (NTGPE)</li> <li>Supervisor PD and training (NTGPE)</li> <li>Education, online resources (NTGPE)</li> </ul>
Communication	<ul> <li>Travels to the regions for F2F CPD and networking (NTGPE)</li> </ul>
Registrar engagement and management	<ul> <li>Support registrars who are in trouble (NTGPE)</li> <li>Good ECTVs for the regs (NTGPE)</li> <li>Medical education and support (NTGPE)</li> <li>Supports registrars (NTGPE)</li> <li>Individual support Remediation Exam prep (NTGPE)</li> </ul>
Rural training	<ul> <li>Registrars accommodation and personal needs are supported in remote locations (NTGPE)</li> </ul>
Professionalism	<ul> <li>Stays in touch, asks for feedback (NTGPE)</li> <li>Peer support (NTGPE)</li> <li>Continuous quality improvement (NTGPE)</li> <li>Good reconciliation action plan that it actually puts money into and implements (NTGPE)</li> <li>High quality, dedicated medical educators and pastoral care staff (NTGPE)</li> <li>They have strong leadership, good communication and genuinely care about their staff and registrars (NTGPE)</li> </ul>



# NTGPE - What could your RTO do better?

Theme	Comment
Communication	Improve communication (NTGPE)
Registrar engagement and management	<ul> <li>Supporting regs doing their exams, feeding back to them</li> <li>As with all RTO get more GP registrars (NTGPE)</li> <li>Feedback on registrar feedback forms (NTGPE)</li> <li>Support for registrars during exams (NTGPE)</li> <li>Provide training for registrars for Medical Director computer program (NTGPE)</li> <li>Evaluate programs (NTGPE)</li> </ul>
Supervisor pay	Better remunerate supervisor (NTGPE)
Rural training	<ul> <li>Place allocation (NTGPE)</li> <li>Attract more registrars to remote areas (NTGPE)</li> </ul>

### RVTS - What did your RTO do well?

Theme	Comment
Supervisor up-skilling	<ul> <li>Education, online resources (RVTS)</li> <li>Support and teaching has been great (RVTS)</li> </ul>
Registrar engagement and management	<ul> <li>GP registrars provide feedback on high standard of support and inclusivity (RVTS)</li> </ul>
Rural training	<ul> <li>Excellent rural retention program (RVTS)</li> <li>Very popular with doctors moving to rural training practices (RVTS)</li> </ul>

### RVTS - What could your RTO do better?

Theme	Comment
Rural training	<ul> <li>Needs resources to provide a higher level of support to remote or isolated practices (RVTS)</li> </ul>





# WAGPET - What did your RTO do well?

Theme	Comment
Supervisor training	<ul><li>Involvement in teaching/supervision (WAGPET)</li><li>General support and education (WAGPET)</li></ul>
Communication	<ul> <li>Excellent, prompt clear communication (WAGPET)</li> <li>They communicate changes to the pay rates and NTCER as they are updated (WAGPET)</li> <li>Support supervisors and registrars with information (WAGPET)</li> <li>Communication and planning (WAGPET)</li> </ul>
Registrar engagement and management	<ul> <li>Follow-up of Registrar and the Practice making sure that both parties are ok (WAGPET)</li> <li>Great support and advocates for the registrars (WAGPET)</li> <li>Guide registrars through the requirements for fellowship (WAGPET)</li> <li>Placement of registrars, assisting with challenges in training, support for assessments, education of registrars</li> <li>Facilitate placements (WAGPET)</li> </ul>
Professionalism	<ul> <li>Coordinate training well (WAGPET)</li> <li>Liaise well with me nag me well when assignments are overdue (WAGPET)</li> <li>Feedback well (WAGPET)</li> <li>Explain any issues I have with the unknown (WAGPET)</li> <li>They know what they are doing (WAGPET)</li> </ul>

### WAGPET - What could your RTO do better?

Theme	Comment
Supervisor training	<ul> <li>Educating and advocating for supervisors (WAGPET)</li> <li>Better feedback when I am teaching/assessing (WAGPET)</li> <li>Not much support (WAGPET)</li> </ul>
Communication/ professionalism	<ul> <li>Holds a monopoly on training so forces engagement, whereas would prefer a free-er market - Enable my practice to recruit doctors direct from anywhere in Australia and provide the service rather than having them vetted through a tiny training program in the sovereign state of Western Australia. The Americans look at how much we compartmentalize these things and laugh. We are too small to have multiple little monopolies (WAGPET)</li> <li>Contracting out most of their modus operandi to the South Australian program (WAGPET)</li> <li>Improve their web site - never found it easy too navigate</li> <li>It is the ONLY RTO in the state, nothing to compare with. But from my interaction with other RTO in other state, it is pretty average</li> <li>Communicate better (WAGPET)</li> <li>Keep their records up to date, communicate (WAGPET)</li> <li>Nothing for them but training as a whole can improve (WAGPET)</li> <li>Board - poor representation of GPs, GPs with conflict of interest on the board, not enough people with experience of medical or other education (WAGPET)</li> <li>More face to face visits (we are regionally based). Always good to put a face to a person you normally only interact with over the phone. (WAGPET)</li> <li>Hold onto staff, attrition rate high, staff turnover means inexperienced staff giving incorrect info to registrars and practices. (WAGPET)</li> <li>More face to face (WAGPET)</li> <li>Better communication (WAGPET)</li> </ul>



Theme	Comment
Registrar engagement and management	<ul> <li>Resources and ongoing assessments to keep Registrars on a steep learning curve (WAGPET)</li> <li>Be more flexible in arranging GP placements with flexi conditions (WAGPET)</li> <li>Flexibility (WAGPET)</li> <li>Help us to find registrars (WAGPET)</li> <li>Send reminders out for registrars to check their provider number before starting at the practice (WAGPET)</li> <li>Preparation for exams for registrars is lacking (WAGPET)</li> <li>Source more GP reg for us (WAGPET)</li> </ul>
Supervisor pay	<ul> <li>Improvement of remuneration for GP time (WAGPET)</li> </ul>
Red tape	Delay in processing paperwork (WAGPET)
Rural training	<ul> <li>Distribution of registrars (WAGPET)</li> <li>Promote rural or make a section of placements rural mandatory (WAGPET)</li> </ul>

# GPTT - What did your RTO do well?

Theme	Comment
Supervisor training	<ul> <li>Provide learning opportunities for supervisors (GPTT)</li> <li>Academic talks (GPTT)</li> <li>Education for supervisors and registrars (GPTT)</li> <li>Provides interesting events for supervisor AND trainee/registrar to attend (GPTT)</li> <li>Supervisor training (GPTT)</li> <li>Supervisor engagement (GPTT)</li> <li>We are rural and away from the Capital centre. The RTO manages to bring education to us in the area (GPTT)</li> <li>GP supervisor get togethers (GPTT)</li> </ul>
Communication	<ul> <li>Communication (GPTT)</li> <li>Communicates well with us (GPTT)</li> </ul>
Registrar engagement and management	<ul> <li>Registrar training workshops (GPTT)</li> <li>Good workshops, trainee support (GPTT)</li> <li>Seems supportive to registrars (GPTT)</li> <li>I went through their program, and they prepared me well for exams and practice. (GPTT)</li> <li>GP registrar support and Training (GPTT)</li> <li>Excellent training for GP Registrars in a warm friendly environment (GPTT)</li> <li>Small numbers of course (GPTT)</li> <li>Orientating registrars to the art of general practice consulting, additional support in times of need (GPTT)</li> </ul>
Professionalism	<ul> <li>Small and responsive to issues. (GPTT)</li> <li>Positive encouragement of trainers and trainees (GPTT)</li> </ul>



# GPTT - What could your RTO do better?

Theme	Comment
Supervisor training	<ul> <li>Currently starting supervisor support increase (GPTT)</li> <li>Supervision support (GPTT)</li> </ul>
Communication/ professionalism	<ul> <li>Identify when assessments are due or overdue directly to the supervisor, especially for registrars later in training (GPTT)</li> <li>Help ancient people like me with IT and new resources (repetition needed) (GPTT)</li> <li>Communication (GPTT)</li> <li>Better integration of the GP Registrar-GP Supervisor - ME Triad. GPTT are presently trying to improve this (GPTT)</li> <li>Practice communication - communication is excellent when registrars are in difficulty but could be better across the board. (GPTT)</li> </ul>
Registrar engagement and management	<ul> <li>Communication and support of GP supervisors (GPTT)</li> <li>Support of registrars needing additional help (GPTT)</li> <li>Clarity of GP registrar placement decisions (GPTT)</li> <li>I think they could support individual registrars better. (GPTT)</li> <li>Feedback to registrar when a registrar has been reported to be having difficulties - and then feedback to supervisor about management that has been undertaken (GPTT)</li> </ul>
Supervisor pay	More funding (GPTT)
Red tape	Simplify everything (GPTT)
Rural training	<ul> <li>Assist with the distribution of registrars geographically (GPTT)</li> <li>Registrar distribution around the state (GPTT)</li> <li>Assist with the distribution of registrars geographically (GPTT)</li> </ul>

