



Rural Doctors Association
of Queensland
“Caring for the Country”

Media Release 5th May 2011

Country docs optimistic for Qld rural generalist training

President of the Rural Doctors Association of Queensland, Dr Dan Halliday today thanked the Royal Australian College of General Practitioners (RACGP) for their contribution to community discussion about training doctors for rural communities.

“We all know that the one-in-three Australian patients who live outside the metropolitan centres have poorer access to health care and poorer health outcomes than their urban cousins,” Dr Halliday said. “Our members believe that all options to encourage doctors to train and practice in the country should be explored.”

The RACGP’s Position Statement on Rural General Practice, released last week, raises concerns with Queensland Health’s Rural Generalist Training Program (RGTP). The RGTP has been widely praised by country doctors nationwide for teaching much-needed procedural skills and providing a well-paid training and career path in Queensland’s country hospitals, and the model may be adopted by other States.

“RDAQ members agree with RACGP that doctors becoming qualified for General Practice cannot be trained solely in hospitals. We believe that all doctors obtaining GP qualifications such as FRACGP, FARGP or FACRRM do have sufficient true general practice experience to be safe and effective general practitioners in any setting. The Australian Medical Council has verified that the curricula for those qualifications meet that standard,” Dr Halliday said.

“RDAQ acknowledges RACGP’s concerns that a two-tiered remuneration structure might develop. Procedural hospital doctors that have advanced skills and work for Queensland Health could be better rewarded than their office-based general practitioner colleagues who are funded through Medicare and often self-employed. Yet both sectors have essential roles in rural communities.”

“Our members see this challenge as a call to seek better remuneration through Medicare rebates for rural doctors in the private sector. RDAQ invites the RACGP to join us, and the Rural Doctors Association of Australia, in lobbying the Federal Government to level that particular playing field. If Queensland Health has raised the bar we all need to get Medicare to try a bit harder, too.”

“RDAQ does not agree with RACGP that Rural Generalist roles create ‘fragmentation’ in the rural medical workforce. Just as cities have specialists and urban GPs who may work solely in skin cancer or travel medicine, for example, there are country doctors who may work just in hospitals or just in private practice. There’s plenty of room and plenty of demand for all special interests, and they will support each other. One-size fits-all just won’t address rural communities’ needs.

“RDAQ looks forward to a robust debate within the profession and the community about the best way to meet the diverse health care needs of this particular one-third of Australia’s population.”

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