

Building a reliable, quality GP workforce to improve the health of communities

Australia's GP Regional Training Organisation Network



What evidence is there that the AGPT program works?

The [2020 GP Graduate Tracking Study Phase 1](#) examined the effectiveness of the AGPT program in addressing geographic maldistribution. The study looked at the current practice location of GPs who graduated from one of six RTOs between 2010 and 2018. RTOs involved were GPEX, GP Synergy, General Practice Training Tasmania, Murray City Country Coast GP Training (MCCC), Northern Territory General Practice Education (NTGPE) and Western Australia General Practice Education and Training (WAGPET).

Over 3000 GP training graduates were involved in the study.

The results are compelling and irrefutable

- > Rural FTE training experience during AGPT **increases likelihood of working rurally post fellowship** for general and rural pathway AGPT graduates.
- > For every 10-week increase in rural AGPT FTE weeks, there is **18% more likelihood** of AGPT graduates to be working rurally.
- > Registrars undertaking and committing to **advanced skills training** are more likely to work rurally postgraduation.
- > Graduates tend to work in the **same ASGS code** in which they completed the majority of their training.
- > **13% of general pathway trained registrars** choose to work rurally post fellowship.
- > The overall proportion of graduates working rurally remains stable over time. **Nearly one third of AGPT graduates chose and remain in a rural area long term.**





The 2020 GP Graduate Tracking Study Phase 1 demonstrates solid progress. We're improving but we have a way to go. Australia still experiences shortages of GPs in rural, remote and outer metropolitan areas. RTOs have the infrastructure, relationships, processes and capability to make further progress.

CONCLUSION

Direct extract from the study

“The study has shown the contribution of the AGPT program in addressing workforce issues. It supports the important role of AGPT in the rural pipeline. The study showed associations between rural background and rural clinical school experience with future rural practice. This reinforces the importance of maintaining strong relationships and communication between RTOs and rural clinical schools, and supporting doctors with a clear rural intention throughout the rural training pipeline.

However, 30% of graduates who choose to work rurally do not have either rural background or rural origin, but have experienced rural practice through the AGPT program, delivered through RTOs. This, coupled with the finding that graduates tend to work in the Remote Area code in which they completed most of their AGPT training, reinforces that the RTO's role in managing and co-ordinating workforce distribution through placements during training is critical to influence workforce distribution post-graduation.”

THIS FACT SHEET HAS BEEN
PREPARED BY WAGPET