



Australian General Practice Training Program

National report on the 2017 National Registrar Survey

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Australian Council *for* Educational Research

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Table of Contents

Acknowledgements	2
Acronyms and abbreviations	4
Executive summary	5
Infographic summary of results.....	7
Setting the Scene	8
Background and context	8
Project overview.....	9
Methodology	10
2017 AGPT NRS findings	11
Survey representativeness, respondent characteristics and training contexts	11
Overall satisfaction.....	18
Satisfaction by Key Performance Indicators	19
Satisfaction with training facilities	22
Rural training pathway	23
Health and wellbeing.....	24
Aboriginal and Torres Strait Islander Health.....	26
Registrars' training choices	27
Registrars' future plans	28
Appendix A: Table of Figures.....	30
Appendix B: Table of Tables.....	30
Appendix C: 2017 AGPT NRS item frequencies	32
Appendix D: 2017 AGPT NRS Instrument	44
Appendix E: Accessible text alternatives for figures.....	59
Infographic text alternative	59
Text alternative for Figures	61



Acronyms and abbreviations

Acronym	Meaning
ACER	Australian Council for Educational Research
ACRRM	Australian College of Rural and Remote Medicine
ADF	Australian Defence Force
AGPT	Australian General Practice Training
AGPT RSS	Australian General Practice Training Registrar Satisfaction Survey
AGPT NRS	Australian General Practice Training National Registrar Survey
AMA	Australian Medical Association
AMC	Australian Medical Council
AMG	Australian Medical Graduate
ARST	Advanced Rural Skills Training
AST	Advanced Specialised Training
the Department	The Commonwealth Department of Health
FRACGP	Fellowship of the Royal Australian College of General Practitioners
FACRRM	Fellowship of the Australian College of Rural and Remote Medicine
FARGP	Fellowship in Advanced Rural General Practice
FTE	Full time equivalent
GP	General Practice or General Practitioner (depending on context)
GPET	General Practice Education and Training Limited
GPRA	General Practice Registrar Australia
GPSA	General Practice Supervisors Australia
GPT	General Practice Term
HECS	Higher Education Contribution Scheme
IMG	International Medical Graduate
KPI	Key Performance Indicator
PGPPP	Prevocational General Practice Placements Program
PRRT	Primary Rural and Remote Training
RACGP	The Royal Australian College of General Practitioners
RIDE	Registrar Information Data Exchange
RTO	Regional Training Organisation
RTP	Regional Training Provider



Executive summary

The Australian General Practice Training National Registrar Survey (AGPT NRS) is an annual, national survey of GP registrars currently training in the AGPT program that collects information about registrar satisfaction, experience and future career plans. This survey is part of the Department of Health's (the Department) monitoring and quality improvement activities and the information can be used to assure the quality of training provision, enable continuous improvement and allow results to be benchmarked nationally. Previously known as the AGPT Registrar Satisfaction Survey (AGPT RSS), the AGPT NRS also collects information on registrars' demographics and training contexts and other aspects of their training experience.

In October and November 2017, the Australian Council for Educational Research (ACER) administered the AGPT NRS online to registrars currently enrolled in active training on the AGPT program across Australia. The survey asked registrars to reflect on their experience in Semester One, 2017. A total of 1700 registrars responded to the survey, representing an overall response rate of 40 per cent. RTOs' response rates ranged from 34 to 53 per cent. The national response rate was sufficient to yield reliable results, with most of the Key Performance Indicators described in the report offering accuracy (at the 95 per cent confidence level) within two per cent of the reported average scores.

Registrars were asked to reflect on their overall experience, and their experience with their RTO and training facility. Registrars reported high levels of satisfaction.

Overall levels of satisfaction rose slightly from last year but are still down on the levels seen in 2013, 2014 and 2015. In 2017:

- 89 per cent of registrars were satisfied with the overall education and training
- 84 per cent were satisfied with the overall support
- 84 per cent were satisfied with the overall administration.

In terms of registrars' satisfaction with their **RTO**:

- 88 per cent of registrars were satisfied with their overall training and education
- 85 per cent were satisfied with the training advice they received
- 89 per cent were satisfied with the induction and orientation they received
- 88 per cent were satisfied with the support they received to meet the training requirements of RACGP while significantly fewer were satisfied with the support they received to meet ACRRM training requirements (53%).

When asked to reflect on their experience with their **training facility**:

- 92 per cent of registrars were satisfied with the overall training and education they received
- 90 per cent were satisfied with the supervisor support
- 97 per cent were satisfied with the clinical work
- 97 per cent were satisfied with the level of workplace responsibility.

When asked about the best aspects of their training, registrars most commonly mentioned themes including practice workplace and colleagues, supervisor or supervision and clinical or procedural experience. When asked to describe the aspects of their training that needed improvement, the most commonly mentioned areas included exam preparation, support and supervision.



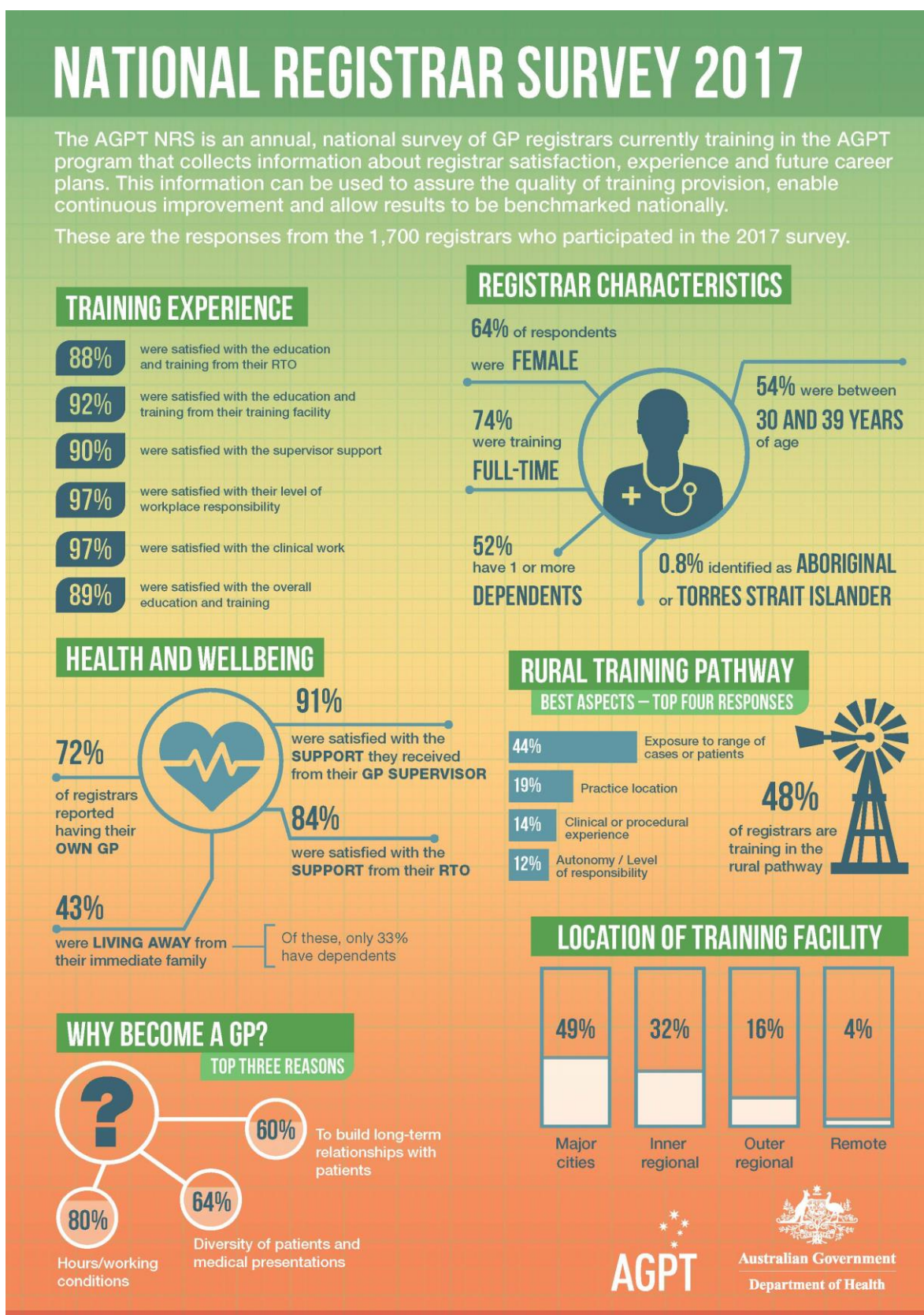
When looking at registrars' health and wellbeing:

- 91 per cent were satisfied with the support they received from their GP supervisor
- 85 per cent were satisfied with the support from their RTO
- 72 per cent of registrars reported having their own GP
- 43 per cent were living away from their immediate family.

Registrars were also asked about their career plans for the next five years. The majority of registrars – 87 per cent – plan to be working as a private GP in five years. Most registrars – 85 per cent – would also like to be involved in doctor training within the next five years.

Infographic summary of results

[Long text alternative for infographic summary.](#)





Setting the Scene

Background and context

General practitioners (GPs) are a vital part of Australia's health care system. GPs care for a broad range of patients, with broad health needs, and are usually the first point of call Australians make for their health needs. The general practitioner's role is described by the Royal Australian College of General Practitioners (RACGP) as providing "person centred, continuing, comprehensive and coordinated whole person health care to individuals and families in their communities"¹. The term general practice is described by the Australian College of Rural and Remote Medicine (ACRRM) as "the doctor with core responsibility for providing comprehensive and continuing medical care to individuals, families and the broader community."²

These definitions underpin the training that each registrar undertakes as part of the Australian General Practice Training (AGPT) program. There are a number of different organisations involved in administering the AGPT program in Australia, including two Colleges and nine regional training organisations (RTOs) who operate across 11 training regions.

RTOs are required to deliver training which meets the standards and requirements of the vocational training programs of either the RACGP and/or the ACRRM. The completion of either college vocational training program leads to a relevant college fellowship, either the Fellowship of the Royal Australian College of General Practitioners (FRACGP) or the Fellowship of the Australian College of Rural and Remote Medicine (FACRRM). Both fellowships are recognised professional qualifications to enable registrars to gain vocational recognition as GPs under the Medicare legislation. Registrars can additionally obtain the RACGP's Fellowship in Advanced Rural General Practice (FARGP). GP registrars are required to undertake the initial part of their training in a hospital environment, after which they go on to complete their core training and required skills training. Training is usually completed over a three or four year full-time equivalent (FTE) period, but training time can be extended to accommodate those doctors who wish to train on a part-time basis.

It is important that the training Australia's future GPs receive is educationally relevant, purposeful for all stakeholders and meets the specialist medical training standards of both Colleges as determined by the Australian Medical Council (AMC). This requires RTOs to deliver training programs that help registrars prepare for FACRRM, FRACGP, or FARGP. The FACRRM and FRACGP are the endpoint of specialist GP training (under the AGPT program) and once completed, these fellowships provide entrance to the specialist GP profession in Australia. In order to ensure that RTOs are delivering training to the expected standards, RTOs undergo an accreditation process every three years. Each College separately undertakes training accreditation of the RTOs, commencing with a joint review process involving an assessment of training and education systems, training information, education delivery, and training posts and supervisors.

The AGPT National Registrar Survey (AGPT NRS), previously known as the AGPT Registrar Satisfaction Survey (AGPT RSS) is part of the Department of Health's (the Department) monitoring and quality improvement activities. The survey results are used by the Department to monitor registrar satisfaction levels with the vocational training delivered by the RTOs. The survey was introduced by General Practice Education and Training Limited (GPET) in 2004 and has since been conducted annually.

¹ RACGP. "Becoming a GP in Australia". RACGP. <http://www.racgp.org.au/becomingagp/what-is-a-gp/what-is-general-practice/> (accessed 10 November 2017).

² ACRRM. "Becoming a rural general practitioner". ACRRM <http://www.acrrm.org.au/about-the-college/about-rural-and-remote-medicine/college-definition-of-general-practice> (accessed 10 November 2017).



Project overview

The AGPT NRS is conducted by the Department for the continuous improvement of doctor training in the AGPT program. Findings from the survey will help ensure that the AGPT program delivered by the nine RTOs across 11 training regions meets the necessary standards and requirements.

The AGPT NRS which has been conducted for over a decade, collects information on the experiences of registrars in active training on the AGPT program. It has been designed to provide valid and reliable information to the Department. The survey collects information about registrar satisfaction, experience and future career plans. This information can be used to assure the quality of training provision, enable continuous improvement and allow results to be benchmarked nationally.

In May 2017, the Department engaged the Australian Council for Educational Research (ACER), an independent and not-for-profit research organisation, to review and revise the AGPT NRS instrument to ensure it continues to collect information that is relevant to and useful for the Department and other stakeholders while maintaining data that tracks registrars' satisfaction and experience over time. ACER had previously administered the 2013, 2014, 2015 and 2016 AGPT RSS.

The review of the instrument involved comprehensive consultation with the Department and other stakeholders, including a one-day workshop that was held in Melbourne in June, 2017. The workshop was attended by 19 stakeholders, covering RTOs, RACGP, ACRRM, General Practice Registrars Australia (GPRA), General Practice Supervisors Australia (GPSA), Australian Medical Association (AMA) and representatives from the Department. This workshop involved discussion of the overall purpose of the survey, a review of the survey instrument, the administration process and the reporting that forms the AGPT NRS.

The stakeholder workshop clarified the purpose of the survey, which necessitated a change to the survey's name. The new name, the AGPT National Registrar Survey better reflects the defined survey purpose:

The AGPT NRS is an annual, national survey of GP registrars currently training in the AGPT program that collects information about registrar satisfaction, experience and future career plans. This information can be used to assure the quality of training provision, enable continuous improvement and allow results to be benchmarked nationally. This definition has been agreed by the Department and ACER and was informed by feedback from a broad stakeholder group.

The stakeholder workshop also included discussion surrounding the calculation of satisfaction scores with a paper distributed to all stakeholders seeking feedback. The Department decided to continue to calculate all scores using responses of '3', '4' and '5 – Very satisfied' on the 5 point scale as indicating a registrar is 'satisfied' as they felt changing this would complicate the process of making time series comparisons with previous years. This means that in all the text and graphs, mention of satisfaction has been calculated from scores of '3', '4' and '5 – Very satisfied' However, in this year's report, we have also included a table of KPIs (current and historical) calculated using scores of only '4' and '5 – Very satisfied' for comparison with the current method of registrar satisfaction calculations.



The 2017 AGPT NRS instrument includes a broad range of questions that ask registrars about their experience and satisfaction in the AGPT program. Respondents were asked to reflect particularly on their experience in Semester One, 2017. The 2017 AGPT NRS instrument included questions relating to registrars':

- demographic and training characteristics
- satisfaction with their RTO, training facilities and College³
- health and wellbeing
- involvement in training related to Aboriginal and Torres Strait Islander health
- experience training on the rural pathway
- training choices
- career aspirations and plans.

This report details the background to the project, provides a brief overview of the methodologies employed in the survey collection and explores the outcomes of the 2017 survey. In addition to this National Report, regional reports have been produced for each training region. These regional reports offer RTOs more detail on their registrars' survey responses.

Methodology

The target population for the 2017 AGPT NRS included all registrars who were enrolled in the AGPT program who were in active training in Semester One, 2017. Registrars who were on extended leave during this time period, or who were training as a hospital intern (PGY1) or resident (PGY2+) were excluded from the target population.

The Department provided ACER with a population list of all registrars in the target population. This information was extracted from the Department's Registrar Information Data Exchange (RIDE) system. ACER asked RTOs to check the contact details of their registrars, and identify if any registrars had been included or excluded from the population list. This process identified that the full target population for the 2017 AGPT NRS included 4222 registrars. The survey was conducted as a census of all registrars in the target population.

As in previous administrations of the survey, the 2017 AGPT NRS was administered online. Fieldwork was conducted between October 3 and November 11, 2017. ACER managed the fieldwork operations in-house, including sending out email and SMS invitations and reminders to registrars. RTOs provided invaluable assistance before and during the fieldwork to promote the survey to their registrars using marketing materials designed by ACER. Survey responses were returned directly to ACER and stored securely and separately from respondents' personal information to ensure the confidentiality of their responses.

³ Reporting against satisfaction with College has been provided to each College and is not included in this report.



2017 AGPT NRS findings

This section provides an overview of the findings from the 2017 AGPT NRS and provides a snapshot of registrars' experience and satisfaction with their training in Semester One, 2017. Where appropriate, comparisons have been made with results from previous administrations of the survey.

This section reports on level of response received and the representativeness of the registrars who responded to the 2017 AGPT NRS as well as the training contexts of registrars. It then provides an overview of registrars' overall satisfaction, a summary of the Key Performance Indicators (KPI), and a summary of registrars' satisfaction with their RTO and training facility. The findings also include insights into registrars' satisfaction with the health and wellbeing support they receive, their experience of training in Aboriginal and Torres Strait Islander health, the choices they make in their training, their reasons for choosing their current RTO and fellowship and their future career aspirations.

Frequencies are given for items in Appendix C: 2017 AGPT NRS item frequencies, a copy of the questionnaire is included in Appendix D: 2017 AGPT NRS Instrument and tabular alternatives for the figures included in the report are included in Appendix E.

Survey representativeness, respondent characteristics and training contexts

A total of 1961 registrars commenced the survey. 261 registrars who commenced the survey dropped out before answering any questions relating to their experience or satisfaction with their training. The responses from the remaining 1700 registrars are the focus of this report – this was the largest number of registrar responses to the survey since 2013.

Table 1 shows that the respondents to the survey are representative of the overall population of registrars in the AGPT program. The only difference in respondent characteristics is that compared with the full population, a higher proportion of registrars with a training status of 'Enrolled' responded while a lower proportion of those with a training status of 'Fellowed' responded. This is not surprising as the survey was undertaken in the second half of the year and although the entire population was all in active training in Semester One, many had Fellowed by the time the survey was run in November therefore they may have felt the survey was not relevant to them and so did not participate. In the future, we recommend that the survey is carried out in June/July– this recommendation is in line with the feedback from stakeholders received at the workshop.

Overall, a 40 per cent response rate was achieved in the 2017 APGT NRS. This was lower than the response rates achieved in 2016 (51%), 2014 (44%) and 2013 (77%) but higher than the response received in 2015 (37%). The level of response varied by Training Region from 34 per cent to 53 per cent.

Table 1 shows that nearly two-thirds of all respondents were female, representing the greater proportion of females in the program. Over 90 per cent of registrars were working towards the FRACGP. Seven per cent of registrars were working towards the FACRRM while five per cent towards the FARGP, a Fellowship undertaken in combination with the FRACGP. A small proportion (7%) of registrars were working towards more than one fellowship.

Please note, throughout this report to ensure confidentiality, all cells with a count between 1 and 3 are recorded as <4.



Table 1: 2017 AGPT NRS representativeness of respondents with population and response rates of different registrar characteristics

Registrar characteristics		Population (n)	Population (%)	Response (n)	Response (%)	Response rate (%)
All registrars		4222		1700		40.3
Gender	Female	2580	61.1	1092	64.2	42.3
	Male	1642	38.9	608	35.8	37.0
Indigenous status	Aboriginal or Torres Strait Islander registrar	33	0.8	13	0.8	39.4
ADF status	Australian Defence Force registrar	119	2.8	26	1.5	21.8
Rural Generalist	Rural Generalist	221	5.2	82	4.8	37.1
Age	20 to 29	1042	24.7	432	25.4	41.5
	30 to 39	2395	56.7	915	53.8	38.2
	40 to 49	654	15.5	284	16.7	43.4
	50 plus	132	3.1	69	4.1	52.3
Citizenship	Australian Citizen	3265	77.3	1271	74.8	38.9
	Australian Permanent Resident	708	16.8	311	18.3	43.9
	Australian Temporary Resident	31	0.7	8	0.5	25.8
	New Zealand Citizen or Permanent Resident	78	1.8	29	1.7	37.2
	Not Specified	140	3.3	81	4.8	57.9
Fellowship	FACRRM	202	4.8	79	4.6	39.1
	FRACGP	3752	88.9	1500	88.2	40.0
	FRACGP & FACRRM	57	1.4	27	1.6	47.4
	FRACGP & FACRRM & FARGP	28	0.7	13	0.8	46.4
	FRACGP & FARGP	161	3.8	77	4.5	47.8
	FRACGP & Grad. Diploma	9	0.2	<4	0.1	22.2
	Not specified	13	0.3	<4	0.1	15.4
Training Status	Completed Time	29	0.7	7	0.4	24.1
	Enrolled	3295	78.0	1514	89.1	45.9
	Fellowed	832	19.7	169	9.9	20.3
	Uncertain	11	0.3	<4	0.1	9.1
	Withdrawn	55	1.3	9	0.5	16.4
Training region	Eastern Victoria GP Training	323	7.7	154	9.1	47.7
	General Practice Training Queensland	547	13.0	198	11.6	36.2
	General Practice Training Tasmania	125	3.0	54	3.2	43.2
	Generalist Medical Training	465	11.0	189	11.1	40.6
	GP Synergy - Lower Eastern NSW	485	11.5	188	11.1	38.8



Registrar characteristics		Population (n)	Population (%)	Response (n)	Response (%)	Response rate (%)
	GP Synergy - North Eastern NSW	633	15.0	214	12.6	33.8
	GP Synergy - Western NSW	250	5.9	102	6.0	40.8
	GPEX	391	9.3	206	12.1	52.7
	Murray City Country Coast GP Training Ltd	479	11.3	199	11.7	41.5
	Northern Territory General Practice Education Ltd	132	3.1	58	3.4	43.9
	WAGPET Ltd	392	9.3	138	8.1	35.2

The registrars who responded to the 2017 AGPT NRS were from diverse backgrounds. Only half of all respondents were born in Australia. Around eight per cent of registrars who responded were born in India, four per cent in Malaysia and three per cent from each of the United Kingdom, China, Myanmar and Sri Lanka. Just under three quarters received their medical degrees in Australia. There are proportionally fewer International medical graduates (IMG) training in major cities compared to Australian Medical graduates (AMG) (IMG: 12% compared with AMG: 58%). This also means that there is a much higher proportion of IMG in regional and remote areas (78%) compared to AMG (42%). This difference is likely due to the Section 19AB restrictions of the *Health Insurance Act 1973*⁴ which generally requires doctors who received their training at an international medical school to work in a district of workforce shortage, which tend to be concentrated in regional and remote parts of Australia.

Just under 50 per cent of all respondents said that they had no dependants (51% of females and 45% of males). A much higher proportion of male registrars (85%) reported working full time compared with female registrars (68%). Of those working full-time, 57 per cent reported having no dependents while at least 80 per cent of registrars working three days per week or less reported having at least one dependent.

About one in three registrars had some formal experience of working as a GP through the Prevocational General Practice Placements Program (PGPPP) or a First Wave Scholarship. Around one-fifth of registrars participated in the HECS Reimbursement Scheme while just under 15 per cent had undertaken training towards another fellowship before starting the AGPT program. A further 13 per cent have participated in the Bonded Medical Placements Scheme.

Registrars were asked about the training they did during Semester One, 2017. Most registrars (85%) were training in only one training facility with about two per cent training in three training facilities. Just under 70 per cent of registrars are currently training in General Practice Training (GPT) terms one to three compared with four per cent in Primary Rural and Remote Training (PRRT) terms one to four.

Nineteen per cent of registrars indicated that they were training on Extended Skills, Advanced Rural Skills Training (ARST) or Advanced Specialised Training (AST). These registrars were asked to indicate the area with which area this training occurred. The most common areas where registrars were undertaking specific training included Aboriginal and Torres Strait Islander health (2%), Obstetrics and Gynaecology (2%) Women's Health (1%) and Paediatrics (1%).

⁴ Department of Human Services. "Medicare provider number for overseas trained doctors and foreign graduates". <https://www.humanservices.gov.au/health-professionals/services/medicare/medicare-provider-number-overseas-trained-doctors-and-foreign-graduates> (accessed 15 February 2017).

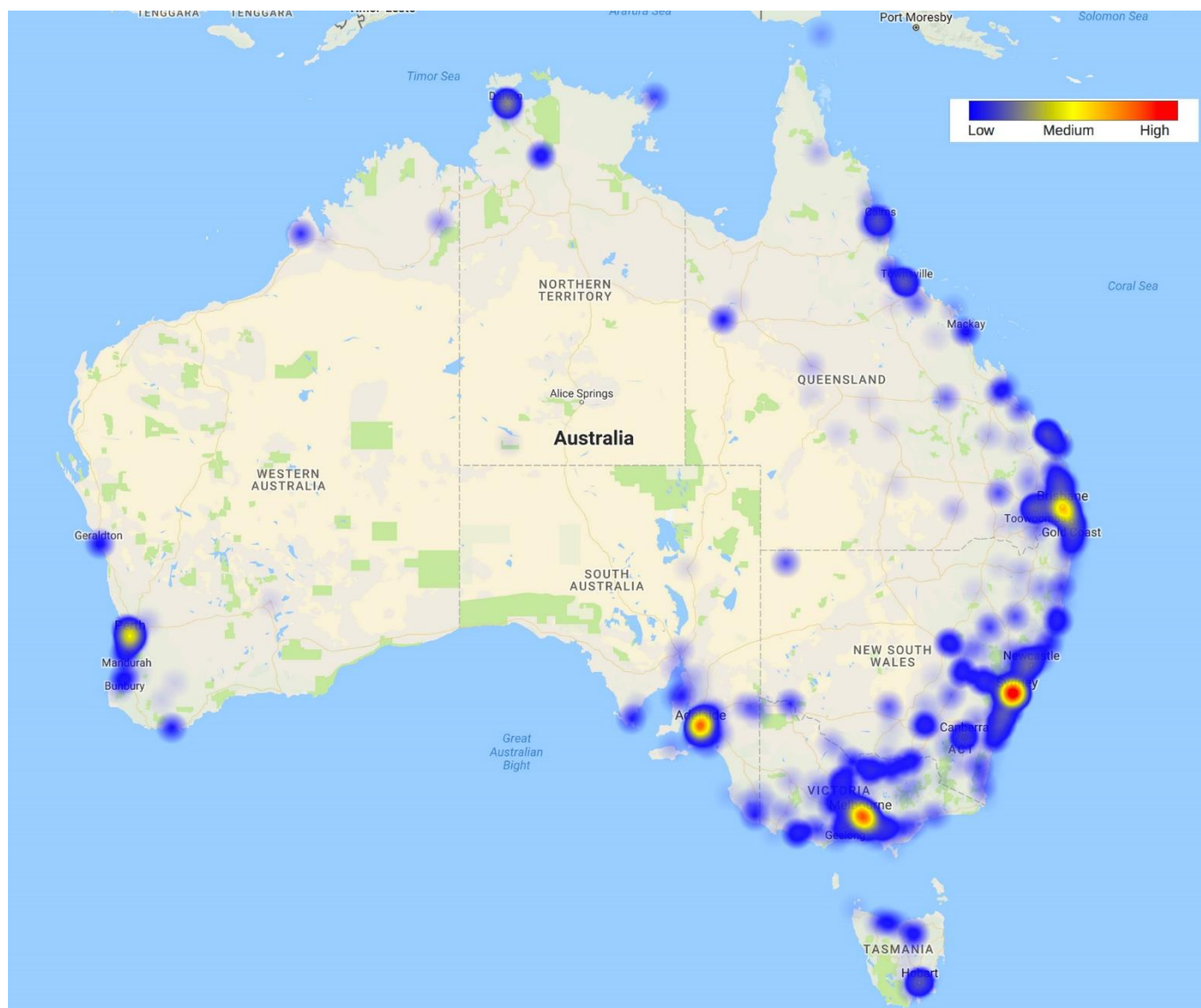


Table 2: Registrar training contexts

Training contexts		Response (n)	Response (%)
Full-time equivalent load	0.0 to 0.2	23	1.4
	0.3 to 0.4	53	3.1
	0.5 to 0.6	242	14.3
	0.7 to 0.8	126	7.4
	0.9 to 1.0	1253	73.8
Number of training facilities	One	1443	85.2
	Two	219	12.9
	Three	32	1.9
Completed prior to training	Prevocational General Practice Placements Program (PGPPP)	440	30.4
	HECS Reimbursement Scheme	290	21.5
	Training towards any other fellowship	200	14.8
	Bonded Medical Placements (BMP) Scheme	174	13.0
	Commonwealth Medical Internships	148	11.2
	John Flynn Placement program	124	9.3
	Rural Australia Medical Undergraduate Scholarship (RAMUS)	92	7.0
	Medical Rural Bonded Scholarship (MRBS) Scheme	85	6.5
	State rural generalist programs	66	5.0
	First Wave Scholarship (GP placement in the undergraduate years)	48	3.7
	Community Residency Placement (WA)	25	1.9
	Rural Health Multidisciplinary Training program	13	1.0
	Remote Vocational Training Scheme	13	1.0
Current training	GPT1 Term	607	35.7
	GPT2 Term	168	9.9
	GPT3 Term	491	28.9
	PRRT1	27	1.6
	PRRT2	8	0.5
	PRRT3	24	1.4
	PRRT4	21	1.2
	Extended Skills	272	16.0
	Advanced Rural Skills Training (ARST)	25	1.5
	Advanced Specialised Training (AST)	32	1.9
	Academic post	14	0.8
	GPT4 / Extension Awaiting Fellowship	102	6.0

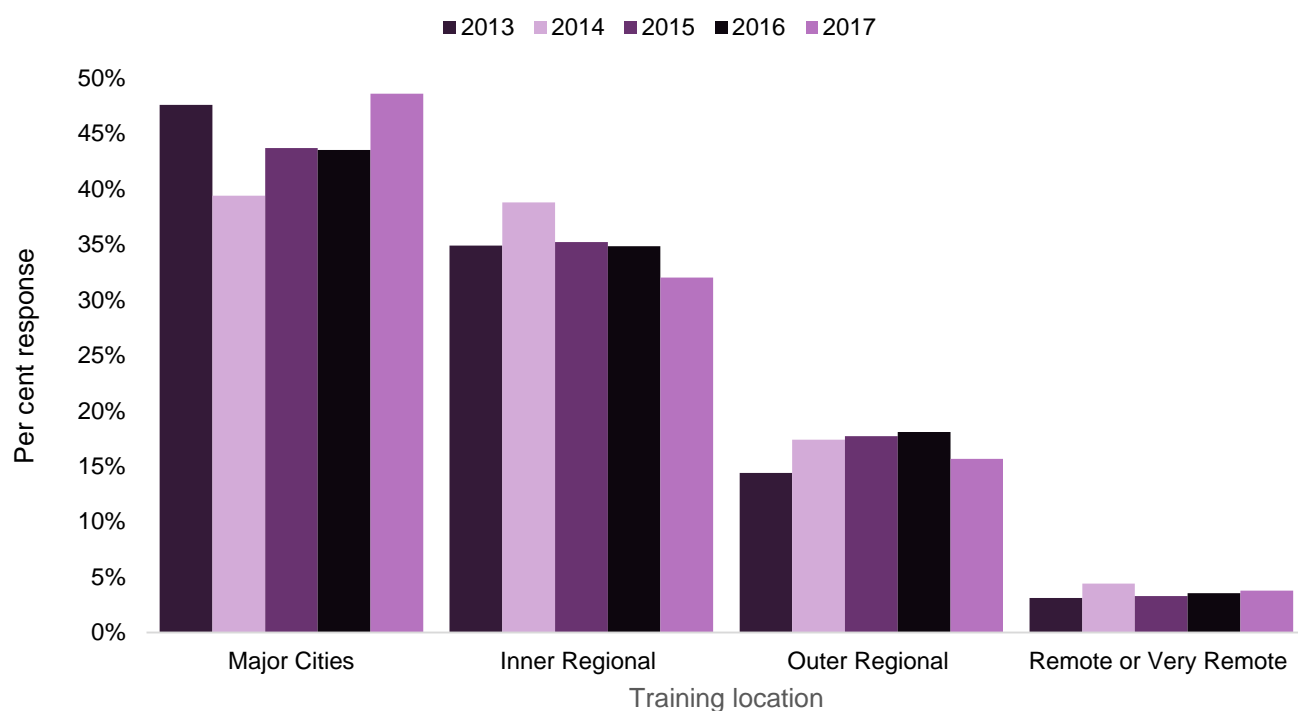
(n=1700)

The majority of registrars are currently training in New South Wales, Queensland and Victoria (Figure 1). Just over half of the registrars were training in regional or remote areas of Australia, relatively consistent to registrars who responded to the survey in previous years (Figure 2).



(n=1700)

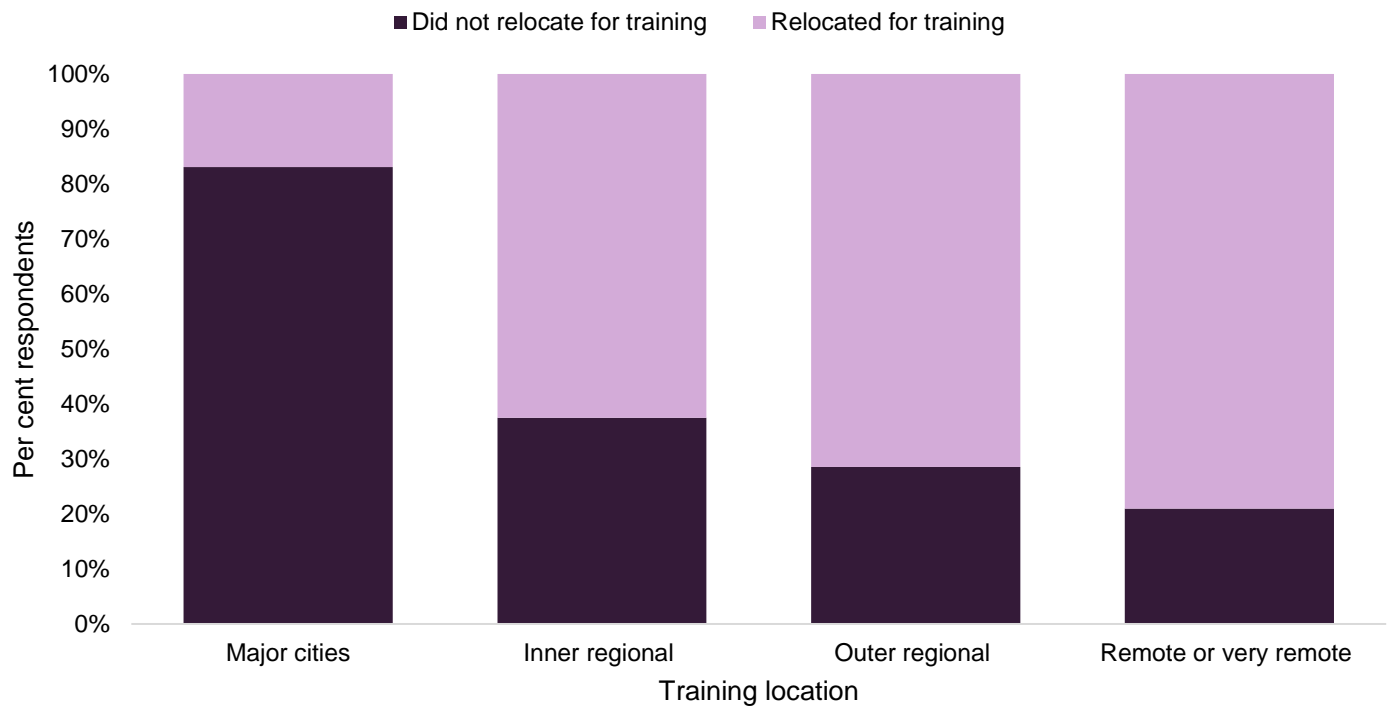
Figure 1: Registrars' current training region



(2013: n=1942; 2014: n=1256; 2015: n=1226; 2016: n=1659; 2017: n=1700)

Figure 2: Location of registrars' current training facility in 2013, 2014, 2015, 2016 and 2017

Just over 40 per cent of registrars moved to their current location to undertake training. Interestingly, 39 per cent of females reported moving to their current region for training, significantly fewer than the number of male registrars who reported moving (48%). As shown in Figure 3, the proportion of registrars who relocated for their training was higher in regional or remote areas compared with those training in the major cities. Among registrars currently training in a major city, only 17 per cent moved to their current location for training. More than 60 per cent of registrars working in regional or remote locations moved to undertake training.



(n=1700)

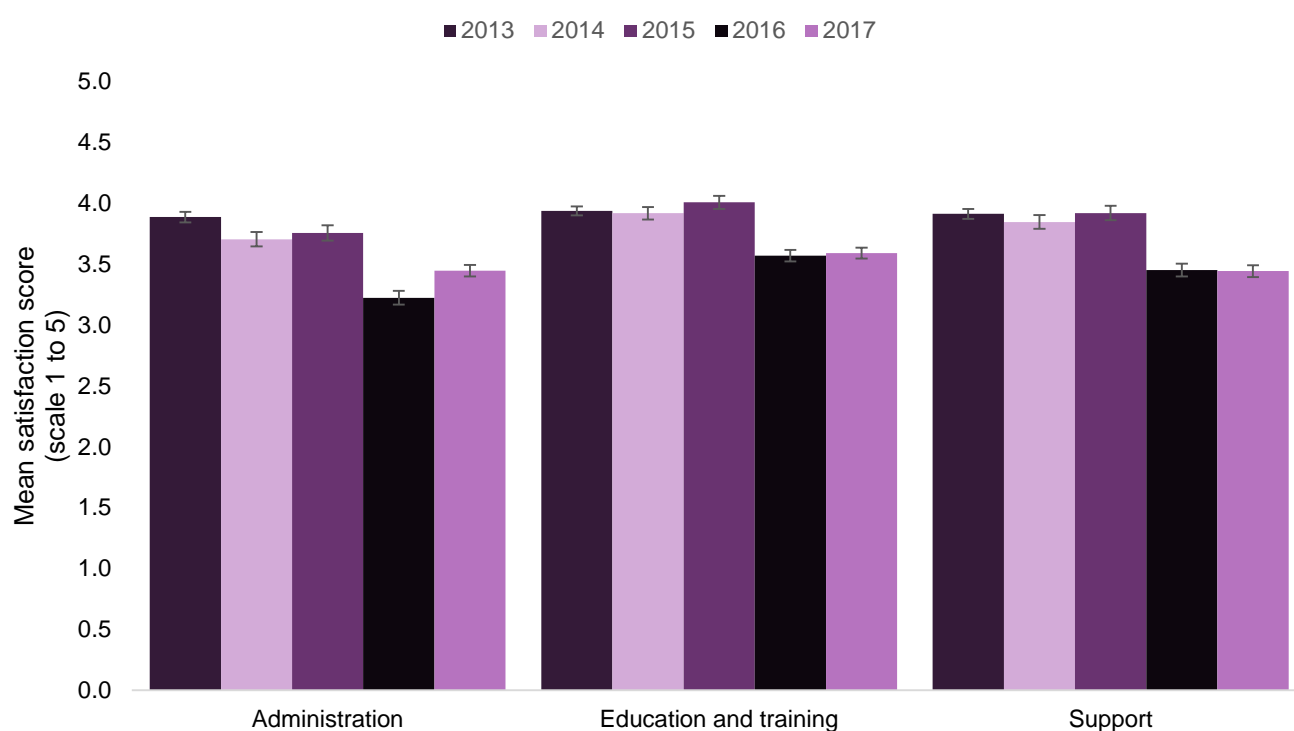
Figure 3: Proportion of registrars who relocated for training by training location



Overall satisfaction

Registrars were asked to reflect on their training to date and to rate their overall satisfaction with the administration of the program, their education and training, and the support. Registrars are relatively satisfied with their overall training experience, particularly with their education and training. Most registrars were satisfied with the program's education and training (89%), administration (84%) and support (84%). There has been a decrease from ten per cent being very dissatisfied with overall administration of the AGPT program in 2016 to only four per cent in 2017. This realigns with previous year's results (4% very dissatisfied with overall administration in 2014 and 2015).

Figure 4 shows that the overall mean satisfaction score⁵ for administration, education and training and support significantly decreased with the change from the 17 Regional Training Providers (RTP) to the nine RTOs that incorporate the 11 training regions in 2016. This drop remained constant for both education and training as well as support in 2017, however, there has been a small increase with the overall satisfaction of registrars with administration from 2016 to 2017.



(2013: n=1942; 2014: n=1261; 2015: n=1234; 2016: n=1696; 2017: n=1700)

Figure 4: Mean overall satisfaction of registrars with the AGPT program from 2013 to 2017

Looking at the average rates of overall satisfaction, there are no significant differences between female and male registrars, Australian Defence Force (ADF) and non-ADF registrars, and only small differences between registrars training in different regions and at different RTOs. There are some small significant differences in satisfaction between Aboriginal or Torres Strait Islander registrars and non-Indigenous registrars.

⁵ Response scores were averaged across the five-point scale with one being very dissatisfied and five being very satisfied.



Satisfaction by Key Performance Indicators

The information collected from registrars through the AGPT NRS is used to generate a number of Key Performance Indicators (KPIs). These KPIs provide an overview of registrars' level of satisfaction with various aspects of the AGPT program.

A number of the KPIs are composite variables, meaning that they are a combination of registrars' responses to two or more questions in the survey. For these composite variables the percentage of registrars who are satisfied for each question included in the KPI are averaged to create an overall 'per cent satisfied' score.

- KPI1 is a combination of the overall satisfaction items shown in Table 3 relating to administration, education and training, and support.
- KPI 2 is a combination of seven items relating to support and training provided by RTOs, and is calculated only for registrars who *did not* report that they had an adverse incident during their training.
- KPI 3 is the same as KPI 2, but instead is recorded only for registrars who *did* experience an adverse incident during their training.
- The other composite variable is KPI 6 which includes two variables relating to resources at registrars' RTO and at registrars' training facility.

Although these KPIs have similar names or terminology to some of the other analyses in this report, the KPIs are composite variables and the results will be different from the results for individual items, such as those reported in the [infographic](#).

In this year's report we have calculated the KPIs as we have done in the past, as a summary of satisfaction scores with a '3', '4' or '5 – very satisfied' response in Table 3 and Figure 5, and alternatively, as a suggestion from feedback we received from stakeholders, as a summary of satisfaction scores with a '4' or '5 – very satisfied' in Table 4 and Figure 6.

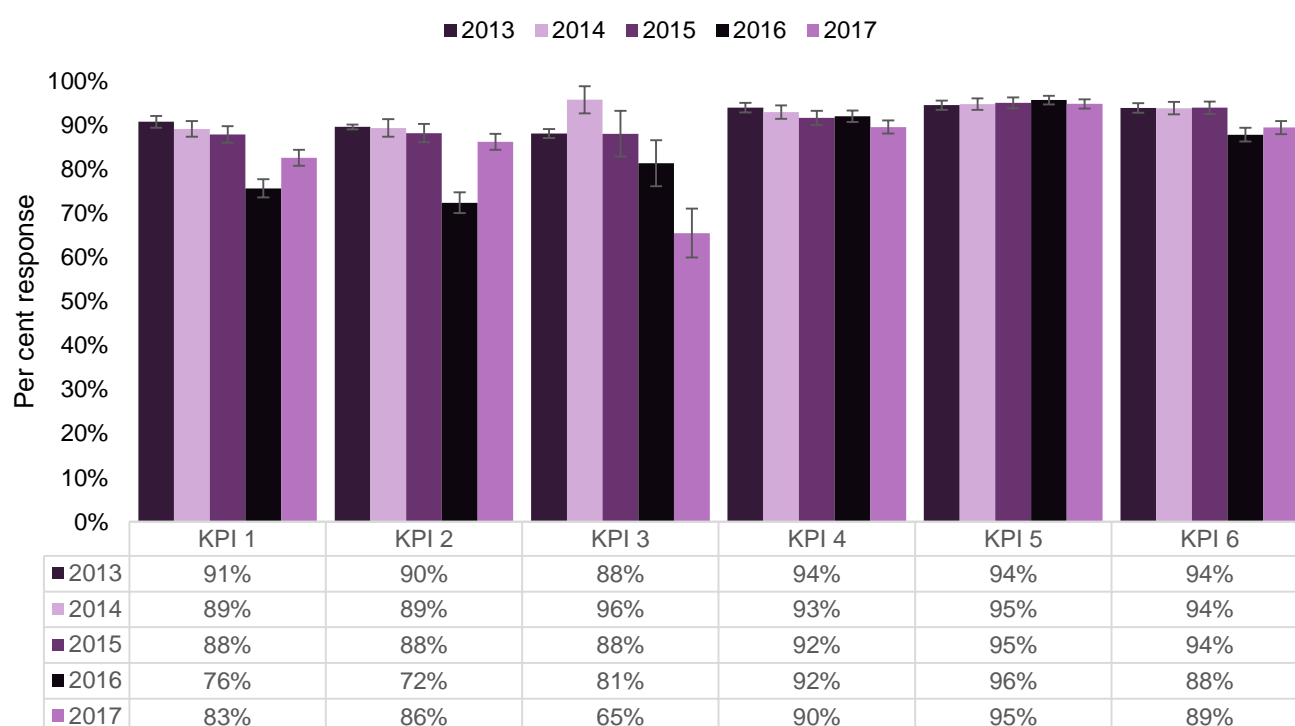
A summary of the KPIs calculated with a '3', '4' or '5 – very satisfied' response are shown in Table 3 along with their error margins reported at a 95 per cent confidence interval. The KPIs for 2017 are statistically reliable to within less than 2 percentage points, apart from KPI 3 which is statistically reliable to within 5.6 percentage points.



Table 3: Key Performance Indicators 2017

Key Performance Indicators	Satisfied (%)	Error margin (%)
KPI 1: Overall satisfaction*	83	±1.8
KPI 2: Satisfaction with RTO support (no incident)*	86	±1.8
KPI 3: Satisfaction with RTO support (with incident)*	65	±5.6
KPI 4: Satisfaction with supervision	90	±1.5
KPI 5: Satisfaction with practice location	95	±1.1
KPI 6: Satisfaction with infrastructure / resources*	89	±1.5

Figure 5 shows the KPI results from the 2013, 2014, 2015, 2016 AGPT RSS and the 2017 AGPT NRS calculated from responses of '3', '4' or '5 – very satisfied'. KPIs have generally increased from last year's significant drop – except for KPI 3 Satisfaction with RTO support (with incident) which has seen a further drop of 16 per cent on top of the drop seen in 2016. KPI 1 and KPI 6 are still significantly lower in 2017 than in previous administrations of the AGPT RSS. This suggests that in 2017 registrars are somewhat less satisfied with training, RTO support (when there has been an incident) and the infrastructure and resources than in previous years (from 2013 to 2015).



(2013: n=1942; 2014: n=1261; 2015: n=1234; 2016: n=1696; 2017: n=1700)

Figure 5: Key Performance Indicators 2013, 2014, 2015, 2016 and 2017

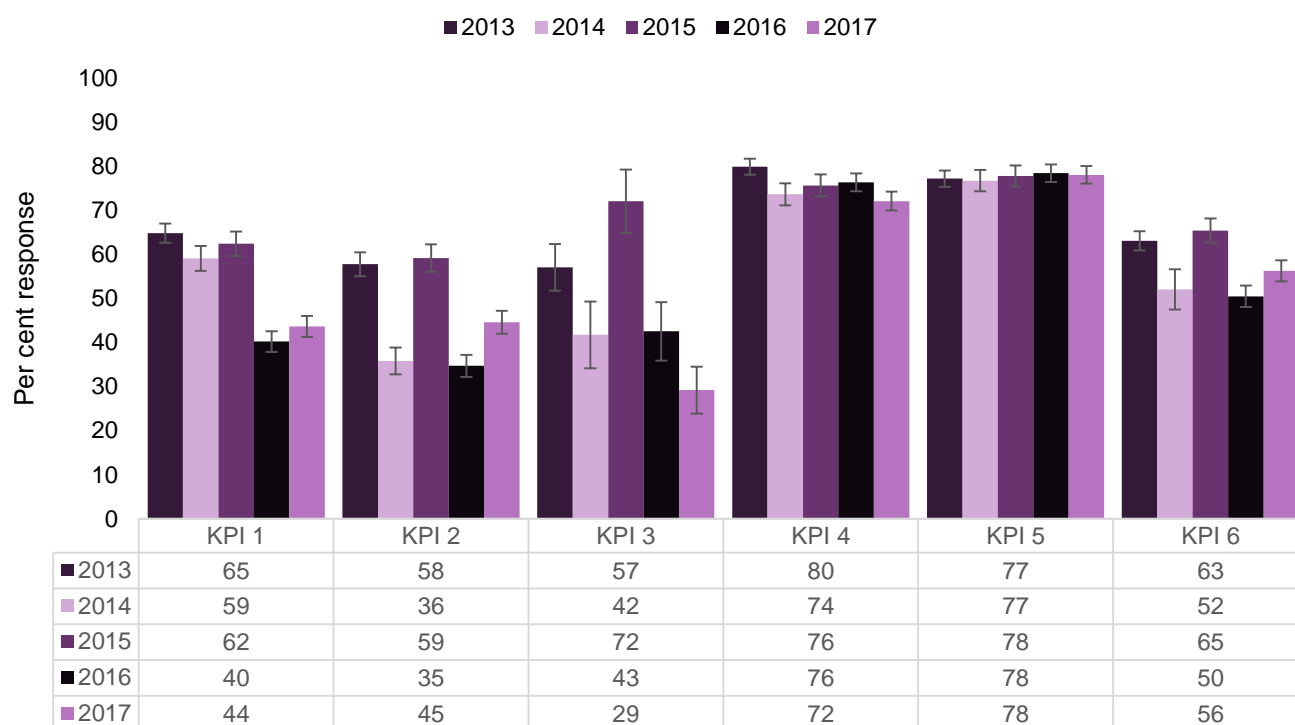
To provide a contrast, the same historical data has been re-analysed using scores of only '4' or '5 – very satisfied' on the 5-point scale to represent a response of satisfied from a registrar. A summary of the KPIs for 2017 are shown in Table 4 along with their error margins reported at a 95 per cent confidence interval. Calculated with this new method, the KPIs for 2017 are statistically reliable to within less than 3 percentage points, apart from KPI 3 which is statistically reliable to within 5.3 percentage points.



Table 4: Key Performance Indicators 2017 – reported for satisfaction responses of ‘4’ and ‘5-very satisfied’ only

Key Performance Indicators	Satisfied (%)	Error margin (%)
KPI 1: Overall satisfaction*	44	±2.4
KPI 2: Satisfaction with RTO support (no incident)*	45	±2.6
KPI 3: Satisfaction with RTO support (with incident)*	29	±5.3
KPI 4: Satisfaction with supervision	72	±2.1
KPI 5: Satisfaction with practice location	78	±2.0
KPI 6: Satisfaction with infrastructure / resources*	56	±2.4

Figure 6 shows the KPI results from the 2013, 2014, 2015, 2016 AGPT RSS and the 2017 AGPT NRS recalculated for this 2017 AGPT NRS report with responses of only ‘4’ or ‘5 – very satisfied’. There is a lot more variability in responses when the time series data is presented with this method of calculation. Overall satisfaction of registrars (KPI 1) remains significantly lower in 2017 than in 2013, 2014 and 2015. Both KPI 2 and 3 show a pattern of greater satisfaction in both 2013 and 2015 with lower satisfaction seen in 2014, 2016 and again in 2017. Interestingly, KPI 2 (satisfaction with RTO support with no incidence) has significantly increased from 2016 while KPI 3 (satisfaction with RTO support with an incident) has significantly decreased since 2016. Satisfaction with supervision and practice support (KPIs 4 and 5) remain relatively consistent over the five years of analysis while satisfaction with infrastructure/resources (KPI 6) has increased from 2016 but is still significantly lower than in 2013 and 2015.



(2013: n=1942; 2014: n=1261; 2015: n=1234; 2016: n=1696; 2017: n=1700)

Figure 6: Key Performance Indicators 2013, 2014, 2015, 2016 and 2017 – reported for satisfaction responses of ‘4’ and ‘5-very satisfied’ only



Satisfaction with training facilities

Training facilities have an important role in registrars' training experience. The 2017 AGPT NRS included several questions that asked registrars about their satisfaction with various aspects of their training facility.

The results suggest that registrars are very satisfied with their experience in their training facilities, with registrars reporting average satisfaction scores of between 3.8 and 4.2 on a five point scale. As shown in Figure 7, registrars are most satisfied with the level of workplace responsibility they are given, their clinical work and the number of patients or presentations.

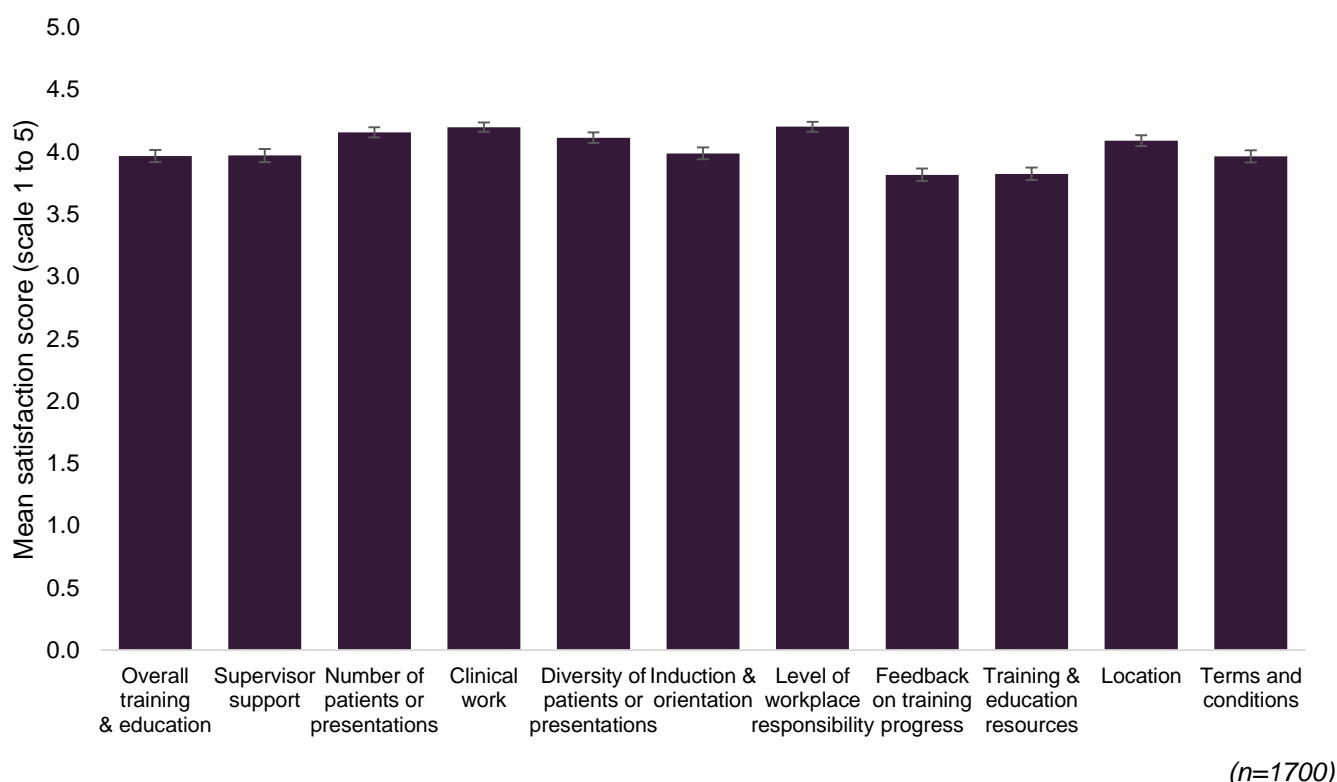


Figure 7: Satisfaction with different aspects of training facilities



Rural training pathway

Just under 50 per cent of registrars indicated that they were training in the rural pathway. These registrars were asked what they considered the best aspects of training on the rural pathway (Table 5) and what aspects they considered needed improvement (Table 6). The top result for the best aspects of the rural pathway was exposure to a range of cases or patients (44%) while either nothing (13%) or lack of support (12%) were the top responses given for areas of the rural training pathway that need the most improvement.

Table 5: Best aspects of the rural training pathway

Best aspects	Per cent (%)
Exposure to range of cases or patients	44
Practice location	19
Clinical or procedural experience	14
Autonomy / Level of responsibility	12
Being part of a community / Community feeling	9
Developing skills / increasing confidence	7
Practice workplace and colleagues	7
Working in a hospital	7
Patients	4
Learning opportunities	4
Rural / Region	4

(n=680)

Table 6: Aspects of the rural training pathway that need improvement

Needs improvement	Per cent (%)
Nothing	13
Lack of support	12
Supervision or supervisor	7
Workshops or education days	6
Workload or working hours	6
Clinical or procedural experience / exposure	5
Lack of support or training for rural / regional registrar	5
Placement process	5
Guidelines	5
Exam preparation / support	5
Amount of training / training availability	5

(n=600)



Health and wellbeing

In 2017, registrars were asked a series of questions regarding their health and wellbeing. Over 90 per cent of registrars were satisfied with the health and wellbeing support they received from their GP Supervisor and training facility (Figure 8).

Just under three-quarters of all registrars have their own GP⁶ while just over forty per cent of registrars reported living away from their immediate family. Registrars who have dependents are considerably less likely to be training away from home (33 per cent with dependants compared with 67 per cent with no dependents).

The proportion of registrars training away from their home significantly increases for registrars training outside major cities (Figure 9). However, training away from home has no significant difference on a registrar's satisfaction with their RTO or training facility other than their satisfaction with location of their training facility.



n=1666

Figure 8: Satisfaction with health and wellbeing support by source of support

⁶ For example: <http://dhas.org.au/wellbeing/having-our-own-gp.html>, accessed 17 December, 2017



n=1666

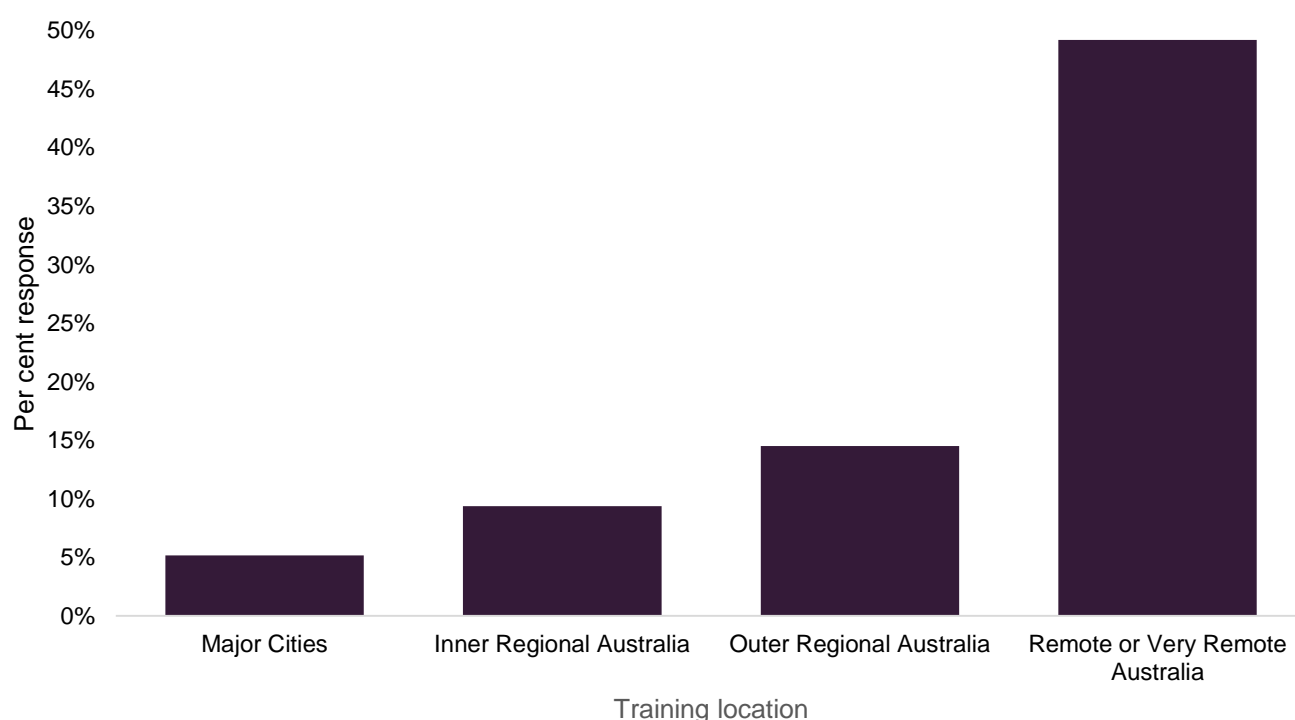
Figure 9: Proportion of registrars training away from home by location



Aboriginal and Torres Strait Islander Health

Registrars were asked a number of questions relating to their experience, future plans and their support in working in Aboriginal and Torres Strait Islander Health. Less than one per cent of registrars were currently undertaking Extended Skills or AST in Aboriginal or Torres Strait Islander Health, while nine per cent of registrars were currently training in an Aboriginal health training post (for example an Aboriginal Medical Service or Aboriginal Community Controlled Health Service).

Just under 50 per cent of all registrars training in remote or very remote Australia are training in an Aboriginal health training post. In contrast, the proportion of registrars training in an Aboriginal health training post in all other regions ranges from five to 15 per cent. Twenty four per cent of registrars are considering training in an Aboriginal health training post, while another 14 per cent reported that they had already completed this training.



n=1661

Figure 10: Proportion of registrars training in an Aboriginal training post by location

Over 90 per cent of registrars have had an orientation to Aboriginal and Torres Strait Islander health as well as received training in Aboriginal and Torres Strait Islander cultural safety. For those registrars training in an Aboriginal health training post, 58 per cent have access to a formal cultural mentor and of these, over 95 per cent are satisfied with this support.

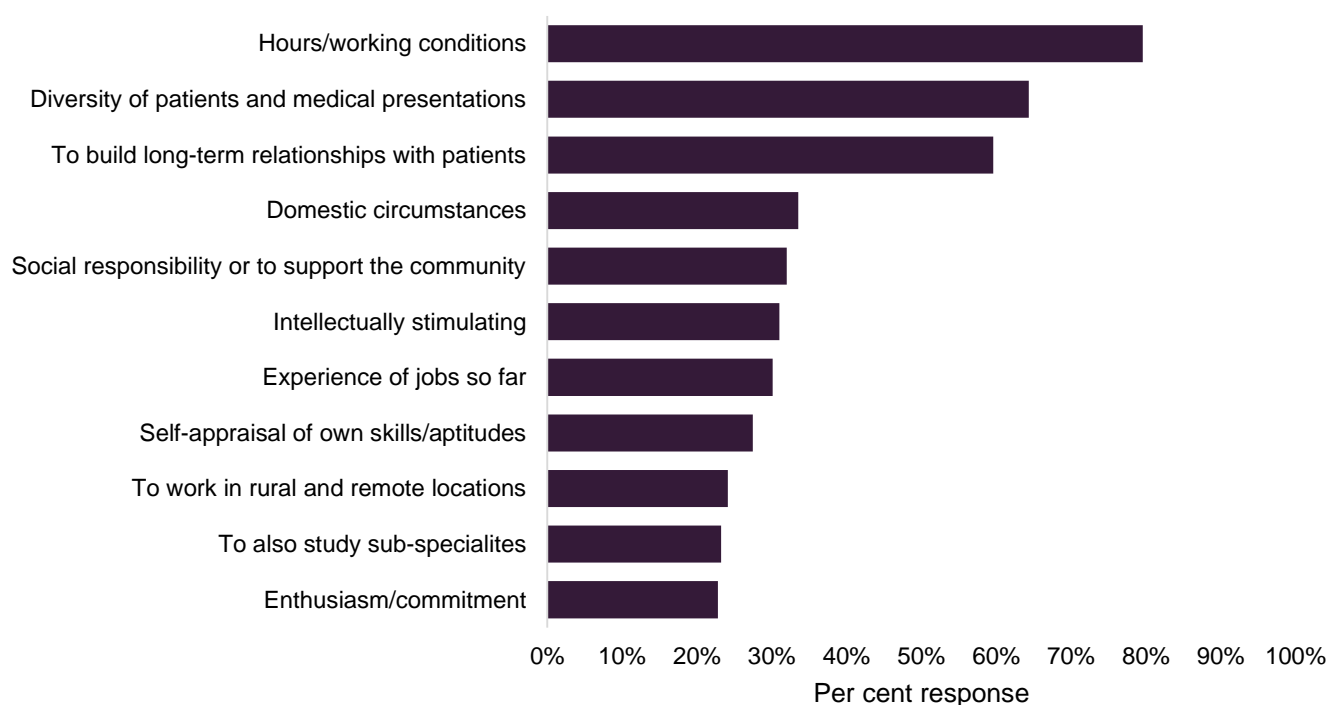


Registrars' training choices

In the 2017 survey, registrars were asked a series of questions about when and why they decided to become GP Specialists, whether GP Specialisation was their first choice and which other speciality programs they may have applied to before joining the program.

Over 70 per cent of registrars decide to become GP specialists after their medical degree had been completed. Two-thirds of registrars reported that GP specialisation was their first choice of medical specialisation. Just over 20 per cent of registrars indicated that they had applied to other speciality programs prior to starting the GP training program, these included Emergency Medicine, Paediatrics, Basic Physician Training, Surgical Training, Obstetrics and Gynaecology and Anaesthesia.

The most common reason selected by registrars for why they decided to become GP specialists was the hours and working conditions for this speciality (Figure 11). Diversity of patients and medical presentations as well as the ability to build long-term relationships with patients were also selected by more than 50 per cent of the registrars as a desirable aspect of being a GP. Only options that gathered more than 20 per cent response are shown in Figure 11.



n=1648

Figure 11: Why registrar's decided to become GP specialists (for responses over 20%)



Registrars' future plans

Registrars were asked about their career plans five years into the future and were asked to select all options that relate to their future plans (Table 7). Their responses indicate that most registrars plan to be working as a GP. A total of 87 per cent of registrars plan to work as a private GP, with just under half of those planning to work part-time. Female registrars planning to work as a private GP are much more likely to be planning to work part-time (60%) than male registrars (28%). Also interesting, 29 per cent of males expect to purchase or buy into an existing practice compared with only 18 per cent of females.

The majority of registrars (85%) indicated that within five years they would like to be involved in medical education – either supervising medical students, registrars or becoming a medical educator.

Encouragingly, only two per cent of registrars indicated that they do not plan to be working as a GP in five years. Many registrars who plan to be doing something else are planning to be working in academia, research settings or volunteering, or working in another area of health often alongside their work as a GP specialist, such as Emergency Medicine, Public Health, Obstetrics & Gynaecology or Sports Medicine.

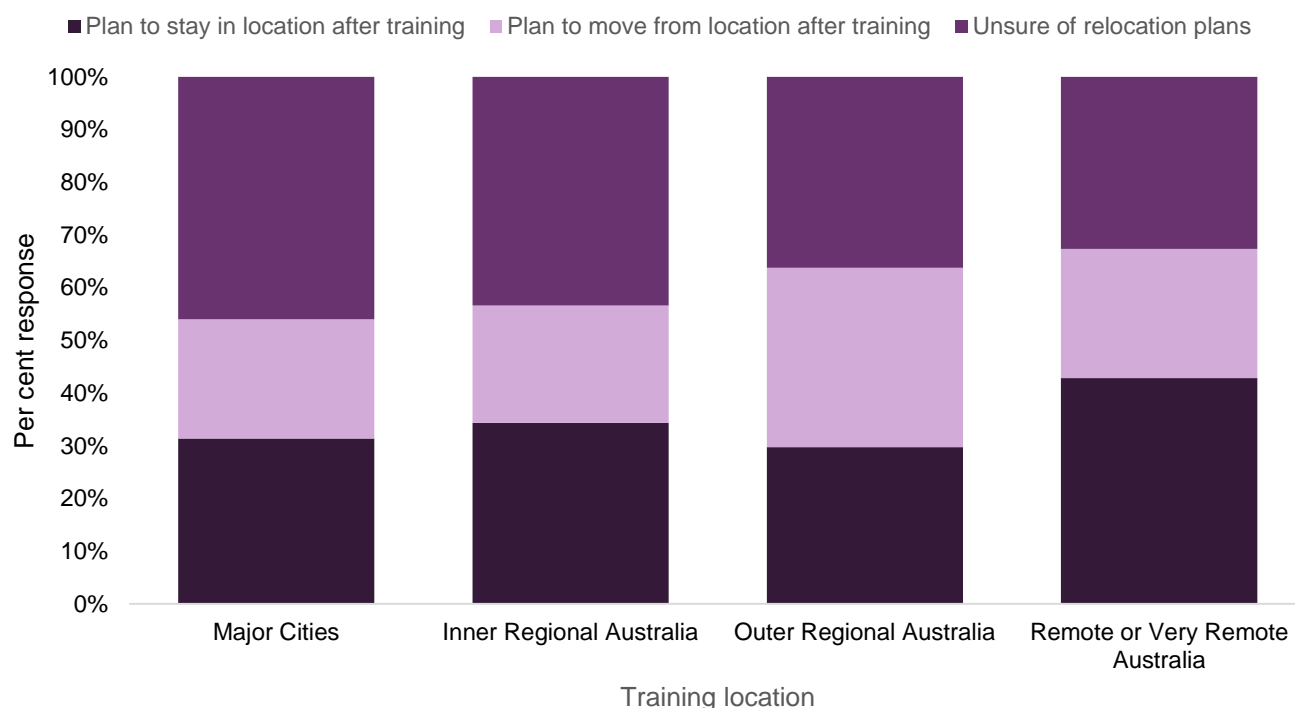
Table 7: Career plans in five years' time

Career plans	Per cent (%)
Working full-time as a private GP	43.6
Working part-time as a private GP	47.7
To own their own practice	16.4
To purchase or buy into an existing practice	21.7
Working in Aboriginal Health	12.7
Working as a GP in another setting (e.g. aged, palliative, home care)	18.2
Working in a rural or remote location	22.3
Not working as a GP	2.1

(n=1700)



The 42 per cent of registrars who moved to their current location to undertake training were asked about their plans to remain in their current location or relocate after completing the AGPT program. When asked about their current plans, over half of the registrars said they plan to stay in their current location, 17 per cent plan to relocate after completing their training and just under 30 per cent are unsure. As shown in Figure 12, of the registrars that moved to their current location to undertake training, similar proportions training in major cities, regional or remote areas plan to remain in their current region after completing their training.



n=703

Figure 12: Registrars who have moved for training intentions to remain or leave current region by location



Appendix A: Table of Figures

Figure 1: Registrars' current training region	15
Figure 2: Location of registrars' current training facility in 2013, 2014, 2015, 2016 and 2017	16
Figure 3: Proportion of registrars who relocated for training by training location	17
Figure 4: Mean overall satisfaction of registrars with the AGPT program from 2013 to 2017	18
Figure 5: Key Performance Indicators 2013, 2014, 2015, 2016 and 2017.....	20
Figure 6: Key Performance Indicators 2013, 2014, 2015, 2016 and 2017 – reported for satisfaction responses of '4' and '5-very satisfied' only.....	21
Figure 7: Satisfaction with different aspects of training facilities.....	22
Figure 8: Satisfaction with health and wellbeing support by source of support.....	24
Figure 9: Proportion of registrars training away from home by location.....	25
Figure 10: Proportion of registrars training in an Aboriginal training post by location	26
Figure 11: Why registrar's decided to become GP specialists (for responses over 20%).....	27
Figure 12: Registrars who have moved for training intentions to remain or leave current region by location	29

Appendix B: Table of Tables

Table 1: 2017 AGPT NRS representativeness of respondents with population and response rates of different registrar characteristics.....	12
Table 2: Registrar training contexts	14
Table 3: Key Performance Indicators 2017.....	20
Table 4: Key Performance Indicators 2017 – reported for satisfaction responses of '4' and '5-very satisfied' only.....	21
Table 5: Best aspects of the rural training pathway.....	23
Table 6: Aspects of the rural training pathway that need improvement	23
Table 7: Career plans in five years' time.....	28
Table 8: 2017 AGPT NRS item frequencies – demographic and contextual items.....	32
Table 9: 2017 AGPT NRS item frequencies – satisfaction with RTO	34
Table 10: 2017 AGPT NRS item frequencies – satisfaction with training facility.....	35
Table 11: 2017 AGPT NRS item frequencies – satisfaction with College.....	37
Table 12: 2017 AGPT NRS item frequencies – overall satisfaction.....	38
Table 13: 2017 AGPT NRS item frequencies – complaints and/or grievance process	39
Table 14: 2017 AGPT NRS item frequencies – adverse event or incidence.....	39
Table 15: 2017 AGPT NRS item frequencies – registrars' health and wellbeing	39
Table 16: 2017 AGPT NRS item frequencies – Aboriginal and Torres Strait Islander health and culture	41



Table 17: 2017 AGPT NRS item frequencies – registrars' training choices	41
Table 18: 2017 AGPT NRS item frequencies – choice of RTO	42
Table 19: 2017 AGPT NRS item frequencies – registrars' future plans	42
Table 20: Registrars' current training region (alternative for	61
Table 21: Location of registrars' current training facility in 2013, 2014, 2015, 2016 and 2017 (alternative for Figure 2)	61
Table 22: Proportion of registrars who relocated for training by training location (alternative for Figure 3) ..	61
Table 23: Mean overall satisfaction of registrars with the AGPT program from 2013 to 2017 (alternative for Figure 4)	61
Table 24: Key Performance Indicators 2013, 2014, 2015, 2016 and 2017 (alternative for Figure 5)	62
Table 25: Key Performance Indicators 2013, 2014, 2015, 2016 and 2017 – reported for satisfaction responses of '4' and '5-very satisfied' only (alternative for Figure 6)	62
Table 26: Satisfaction with different aspects of training facilities (alternative for Figure 7)	62
Table 27: Satisfaction with health and wellbeing support by source of support (alternative for Figure 8)	63
Table 28: Proportion of registrars training in an Aboriginal training post by location (alternative for Figure 10)	63
Table 29: Why registrar's decided to become GP specialists (for responses over 20%) (alternative for Figure 11)	63
Table 30: Registrars who have moved for training intentions to remain or leave current region by location (alternative for Figure 12)	64



Appendix C: 2017 AGPT NRS item frequencies

Table 8 to **Table 19** include the item frequencies for the closed items included in the 2017 AGPT NRS.

Table 8: 2017 AGPT NRS item frequencies – demographic and contextual items

Item	Response options	N	%
In which training region was your GP training delivered in Semester One, 2017?	North Western Queensland	189	11.1
	South Eastern Queensland	198	11.6
	North Eastern NSW	214	12.6
	Western NSW	102	6.0
	Lower Eastern NSW	188	11.1
	Eastern Victoria	154	9.1
	Western Victoria	199	11.7
	Tasmania	54	3.2
	South Australia	206	12.1
	Western Australia	138	8.1
Which fellowship are you currently working towards?	FRACGP	1568	92.2
	FACRRM	114	6.7
	FARGP	96	5.6
At what full time equivalent (FTE) load were you employed during Semester One, 2017?	0.0 to 0.2	23	1.4
	0.3 to 0.4	53	3.1
	0.5 to 0.6	242	14.3
	0.7 to 0.8	126	7.4
	0.9 to 1.0	1253	73.8
In how many training facilities were you employed during Semester One, 2017?	One	1443	85.2
	Two	219	12.9
	Three	32	1.9
What training were you undertaking during Semester One, 2017?	GPT1 Term	607	35.7
	GPT2 Term	168	9.9
	GPT3 Term	491	28.9
	PRRT1	27	1.6
	PRRT2	8	0.5
	PRRT3	24	1.4
	PRRT4	21	1.2
	Extended Skills	272	16.0
	Advanced Rural Skills Training (ARST)	25	1.5
	Advanced Specialised Training (AST)	32	1.9
	Academic post	14	0.8



Item	Response options	N	%
Did you complete any of the following terms prior to commencing the Australian General Practice Training (AGPT) program?	GPT4 / Extension Awaiting Fellowship	102	6.0
	Prevocational General Practice Placements Program (PGPPP)	440	30.4
	First Wave Scholarship (GP placement in the undergraduate years)	48	3.7
	Rural Health Multidisciplinary Training program	13	1.0
	Commonwealth Medical Internships	148	11.2
	Bonded Medical Placements (BMP) Scheme	174	13.0
	Medical Rural Bonded Scholarship (MRBS) Scheme	85	6.5
	Rural Australia Medical Undergraduate Scholarship (RAMUS)	92	7.0
	John Flynn Placement program	124	9.3
	State rural generalist programs	66	5.0
	Remote Vocational Training Scheme	13	1.0
	HECS Reimbursement Scheme	290	21.5
	Community Residency Placement (WA)	25	1.9
	Training towards any other fellowship	200	14.8
<IF YES TO AST, EXTENDED SKILLS, OR ARST> Were you training in any of the following areas of Extended Skills (FRACGP), Advanced Specialised Training (FACRRM) or Advanced Rural Skills Training (FARGP) during Semester One, 2017?	Aboriginal and Torres Strait Islander Health	16	0.9
	Academic practice	8	0.5
	Adult Internal Medicine	6	0.4
	Anaesthetics	16	0.9
	Dermatology	7	0.4
	Emergency Medicine	36	2.1
	Medical Education	8	0.5
	Men's Health	<4	0.1
	Mental Health	11	0.6
	Obstetrics and Gynaecology	35	2.1
	Paediatrics	18	1.1
	Palliative Care	6	0.4
	Population Health	4	0.2
	Remote Medicine	<4	0.1



Item	Response options	N	%
	Skin Cancer Medicine	7	0.4
	Small Town Rural General Practice (STRGP)	<4	0.2
	Surgery	4	0.2
	Women's Health	22	1.3
Are you currently training on the rural or general pathway?	Rural pathway	818	48.3
	General pathway	874	51.70

Table 9: 2017 AGPT NRS item frequencies – satisfaction with RTO

Item	Response options	N	%
How would you rate your satisfaction with the following aspects of your RTO in Semester One, 2017?			
Overall training & education quality	Very dissatisfied	64	3.8
	2	138	8.2
	3	391	23.3
	4	734	43.7
	Very satisfied	352	21.0
Training advice	Very dissatisfied	81	4.8
	2	166	9.9
	3	443	26.3
	4	654	38.9
	Very satisfied	339	20.1
Induction and orientation	Very dissatisfied	59	3.6
	2	119	7.2
	3	396	24.0
	4	705	42.8
	Very satisfied	370	22.4
Feedback on training progress	Very dissatisfied	75	4.5
	2	167	10.0
	3	473	28.3
	4	666	39.8
	Very satisfied	292	17.5
Workshops provided	Very dissatisfied	73	4.4
	2	117	7.0
	3	372	22.4
	4	714	43.0
	Very satisfied	385	23.2



Item	Response options	N	%
Training and education resources	Very dissatisfied	64	3.8
	2	124	7.4
	3	399	23.8
	4	752	44.9
	Very satisfied	336	20.1
Support to meet ACRRM training requirements	Very dissatisfied	24	21.2
	2	29	25.7
	3	33	29.2
	4	20	17.7
	Very satisfied	7	6.2
Support to meet RACGP training requirements	Very dissatisfied	68	4.3
	2	117	7.4
	3	368	23.2
	4	688	43.4
	Very satisfied	345	21.8
Support for examination and assessments	Very dissatisfied	98	5.9
	2	174	10.4
	3	432	25.9
	4	636	38.1
	Very satisfied	328	19.7

Table 10: 2017 AGPT NRS item frequencies – satisfaction with training facility

Item	Response options	N	%
How would you rate your satisfaction with the following aspects of your training facility (e.g. your practice, your hospital) in Semester One, 2017?			
Quality of overall training and education	Very dissatisfied	54	3.2
	2	86	5.1
	3	292	17.4
	4	678	40.4
	Very satisfied	569	33.9
Supervisor support	Very dissatisfied	65	3.9
	2	111	6.6
	3	294	17.5
	4	551	32.8
	Very satisfied	660	39.3
Clinical work	Very dissatisfied	9	0.5
	2	37	2.2
	3	232	13.8



Item	Response options	N	%
Number of patients or presentations	4	735	43.8
	Very satisfied	665	39.6
	Very dissatisfied	18	1.1
	2	46	2.7
	3	263	15.7
	4	683	40.7
Diversity of patients or presentations	Very satisfied	670	39.9
	Very dissatisfied	19	1.1
	2	58	3.4
	3	264	15.7
	4	715	42.5
	Very satisfied	627	37.3
Level of workplace responsibility	Very dissatisfied	18	1.1
	2	37	2.2
	3	215	12.8
	4	731	43.5
	Very satisfied	680	40.5
Induction and orientation	Very dissatisfied	48	2.9
	2	88	5.3
	3	275	16.5
	4	680	40.8
	Very satisfied	574	34.5
Feedback on training progress	Very dissatisfied	59	3.5
	2	137	8.2
	3	348	20.7
	4	645	38.4
	Very satisfied	489	29.1
Training and education resources	Very dissatisfied	53	3.2
	2	132	7.9
	3	360	21.4
	4	649	38.7
	Very satisfied	485	28.9
Location	Very dissatisfied	29	1.7
	2	59	3.5
	3	282	16.8
	4	675	40.2
	Very satisfied	635	37.8



Item	Response options	N	%
Terms and conditions	Very dissatisfied	50	3.0
	2	109	6.5
	3	287	17.1
	4	639	38.1
	Very satisfied	594	35.4

Table 11: 2017 AGPT NRS item frequencies – satisfaction with College

Item	Response options	N	%
Thinking about your experience with ACRRM, how would you rate your satisfaction with:			
assessment	Very dissatisfied	5	4.4
	2	13	11.5
	3	26	23.0
	4	41	36.3
	Very satisfied	14	12.4
	Not applicable	14	12.4
curriculum	Very dissatisfied	4	3.5
	2	4	3.5
	3	36	31.9
	4	47	41.6
	Very satisfied	20	17.7
	Not applicable	2	1.8
communication	Very dissatisfied	10	8.9
	2	15	13.4
	3	38	33.9
	4	29	25.9
	Very satisfied	18	16.1
	Not applicable	2	1.8
the support they provide you	Very dissatisfied	11	9.7
	2	18	15.9
	3	35	31.0
	4	30	26.5
	Very satisfied	14	12.4
	Not applicable	5	4.4
Thinking about your experience with RACGP, how would you rate your satisfaction with:			
assessment	Very dissatisfied	72	4.6
	2	145	9.2
	3	406	25.7
	4	509	32.2



Item	Response options	N	%
	Very satisfied	197	12.5
	Not applicable	250	15.8
curriculum	Very dissatisfied	45	2.9
	2	119	7.5
	3	464	29.4
	4	625	39.6
	Very satisfied	233	14.8
	Not applicable	92	5.8
communication	Very dissatisfied	56	3.5
	2	162	10.3
	3	459	29.1
	4	582	36.8
	Very satisfied	239	15.1
	Not applicable	82	5.2
the support they provide you	Very dissatisfied	90	5.7
	2	210	13.3
	3	476	30.1
	4	476	30.1
	Very satisfied	190	12.0
	Not applicable	139	8.8

Table 12: 2017 AGPT NRS item frequencies – overall satisfaction

Item	Response options	N	%
Thinking about all of your AGPT training to date, overall how satisfied are you with each of the following?			
Administration	Very dissatisfied	69	4.1
	2	194	11.5
	3	570	33.8
	4	621	36.9
	Very satisfied	230	13.7
Education and training	Very dissatisfied	49	2.9
	2	134	8.0
	3	526	31.3
	4	719	42.8
	Very satisfied	251	14.9
Support provided	Very dissatisfied	72	4.3
	2	189	11.3
	3	568	34.0
	4	617	36.9



Item	Response options	N	%
	Very satisfied	227	13.6

Table 13: 2017 AGPT NRS item frequencies – complaints and/or grievance process

Item	Response options	N	%
Are you familiar with your RTO's formal complaints and/or grievance process?	No	751	44.6
	Yes	573	34.0
	Unaware process existed	359	21.3
Could you readily access your RTO's formal complaints and/or grievance process if needed?	No	543	33.4
	Yes	1085	66.6
Have you ever made a formal written complaint relating to your training on the AGPT program?	No	1597	95.1
	Yes	82	4.9

Table 14: 2017 AGPT NRS item frequencies – adverse event or incidence

Item	Response options	N	%
Thinking about all of your AGPT training to date, have you experienced an adverse event or incident?	No	1405	83.3
	Yes	282	16.7
<IF YES> From which of the following sources did you seek assistance or support to cope with the adverse event or incident?	RTO	163	9.6
	Your training facility	106	6.2
	General Practice Registrars Australia (GPRA)	39	2.3
	Did not seek assistance or support	44	2.6
	AMA	7	0.4
	MDO/Insurance Provider	21	1.2
	Other	52	3.1
<IF RTO> How would you rate your satisfaction with the assistance or support your RTO provided during or after an adverse event or incident?	Very dissatisfied	38	23.9
	2	24	15.1
	3	36	22.6
	4	40	25.2
	Very satisfied	21	13.2

Table 15: 2017 AGPT NRS item frequencies – registrars' health and wellbeing

Item	Response options	N	%
How would you rate your satisfaction with the health and wellbeing support provided to you by			
RTO	Very dissatisfied	109	6.6
	2	136	8.2
	3	395	23.8
	4	549	33.0
	Very satisfied	381	22.9
	Not applicable	92	5.5
training facility	Very dissatisfied	60	3.6
	2	94	5.7



Item	Response options	N	%
	3	269	16.2
	4	556	33.5
	Very satisfied	631	38.0
	Not applicable	51	3.1
ACCRM	Very dissatisfied	8	7.1
	2	15	13.4
	3	34	30.4
	4	23	20.5
	Very satisfied	11	9.8
	Not applicable	21	18.8
RACGP	Very dissatisfied	59	3.8
	2	166	10.6
	3	479	30.6
	4	395	25.2
	Very satisfied	163	10.4
	Not applicable	304	19.4
GP supervisor	Very dissatisfied	58	3.5
	2	77	4.6
	3	235	14.1
	4	493	29.7
	Very satisfied	718	43.2
	Not applicable	81	4.9
General Practice Registrar Association (GPRA)	Very dissatisfied	40	2.4
	2	107	6.5
	3	445	27.0
	4	356	21.6
	Very satisfied	174	10.6
	Not applicable	525	31.9
Do you have your own independent GP?	No	462	27.7
	Yes	1204	72.3
Are you living away from your immediate family?	No	947	56.8
	Yes	719	43.2
How many dependents do you have? (e.g. children, parents)?	0	778	48.4
	1 or 2	634	39.5
	3 or 4	179	11.1
	5 or more	16	1.0



Table 16: 2017 AGPT NRS item frequencies – Aboriginal and Torres Strait Islander health and culture

Item	Response options	N	%
In Semester One, 2017, were you training in an Aboriginal health training post (e.g. an Aboriginal Medical Service or Aboriginal Community Controlled Health Service)?	No	1501	90.4
	Yes	160	9.6
<IF NO> Have you completed or are you considering undertaking training in an Aboriginal health training post (e.g. an Aboriginal Medical Service or Aboriginal Community Controlled Health Service)?	I have already completed training	211	14.1
	I am considering undertaking training	366	24.5
	None of the above	916	61.4
Since commencing the AGPT program, have you had an orientation to Aboriginal and Torres Strait Islander health?	No	127	7.6
	Yes	1536	92.4
Since commencing the AGPT program, have you had training in Aboriginal and Torres Strait Islander cultural safety?	No	142	8.5
	Yes	1520	91.5
<IF CURRENTLY WORKING IN AN ABORIGINAL TRAINING POST> Do you have access to a formal cultural mentor for support with issues relevant to Aboriginal and Torres Strait Islander people?	No	66	41.5
	Yes	93	58.5
<IF YES> How satisfied are you with the guidance from this cultural mentor on Aboriginal and Torres Strait Islander cultural safety questions?	Very dissatisfied	1	1.1
	2	3	3.3
	3	22	23.9
	4	27	29.3
	Very satisfied	39	42.4

Table 17: 2017 AGPT NRS item frequencies – registrars' training choices

Item	Response options	N	%
When did you decide to become a specialist GP?	While I was at school	100	5.9
	Early in my medical degree	259	15.2
	Late in my medical degree	261	15.4
	In my first year out of medical school	224	13.2
	More than one year out of medical school	635	37.4
	After trying another specialty	368	21.6
	Other	36	2.1
Why did you decide to become a specialist GP?	to build long-term relationships with patients	1013	59.6
	To also study sub-specialties	395	23.2
	The training program is fully funded by the Commonwealth Government	75	4.4
	To work in rural and remote locations	410	24.1
	Intellectually stimulating	527	31.0



Item	Response options	N	%
	Diversity of patients and medical presentations	1094	64.4
	Domestic circumstances	570	33.5
	Hours/working conditions	1353	79.6
	Eventual financial prospects	141	8.3
	Promotion/career prospects	171	10.1
	Self-appraisal of own skills/aptitudes	467	27.5
	Advice from others	239	14.1
	Student experience of subject	283	16.6
	Particular teacher, department or role model	219	12.9
	Inclinations before medical school	222	13.1
	Experience of jobs so far	512	30.1
	Enthusiasm/commitment	388	22.8
	Social responsibility or to support the community	544	32.0
	Other	38	2.2
Was GP specialisation your first choice of specialty?	No	556	33.7
	Yes	1094	66.3
Did you apply to any other specialty programs at the same time or before you applied to become a GP specialist?	No	1284	77.9
	Yes	364	22.1

Table 18: 2017 AGPT NRS item frequencies – choice of RTO

Item	Response options	N	%
What were the main reasons you chose your RTO as your training provider?	Family/partner support	370	21.8
	Location	1253	73.7
	Lifestyle	259	15.2
	Training opportunities	397	23.4
	Career links with region (e.g. earlier placement, Prevocational General Practice Placements Program (PGPPP))	163	9.6
	Reputation of the RTO	215	12.6
	Recommended by peers	140	8.2
	Did not choose current RTO (transferred from RTP)	36	2.1
	Did not have a choice over RTO (includes ADF, BMP, Foreign Doctors)	24	1.4
	Only RTO operating in State or region	86	5.1
	Through selection process	21	1.2
	Other	20	1.2

Table 19: 2017 AGPT NRS item frequencies – registrars' future plans

Item	Response options	N	%
Within the next five years, you would like to be...	Would like to be supervising medical students.	1083	63.7
	Would like to be supervising registrars.	934	54.9



Item	Response options	N	%
	Would like to be a medical educator.	546	32.1
	Would not like to be involved in doctor training.	246	14.5
In five years, you would like	to be working full-time as a private GP.	741	43.6
	to be working part-time as a private GP.	811	47.7
	to own your own practice	279	16.4
	to purchase or buy into an existing practice	369	21.7
	to be working in Aboriginal Health	216	12.7
	to be working as a GP in another setting	309	18.2
	to be working in a rural or remote location	379	22.3
	to be not working as a GP	36	2.1
Did you move to the current region to undertake the AGPT program?	No	958	57.7
	Yes	703	42.3
Do you intend to stay in this region after completing the AGPT program?	No	286	17.2
	Yes	896	53.8
	Unsure	484	29.1



Appendix D: 2017 AGPT NRS Instrument

Introductory text

The Department of Health has engaged the Australian Council for Educational Research (ACER), an independent and not-for-profit research organisation, to conduct the 2017 Australian General Practice Training National Registrar Survey. The survey results enable the Department of Health to monitor the performance of the program and to help bring emerging issues to the attention of the Department of Health and other GP training stakeholders.

Please take 15 minutes to tell us about your experience as a general practice registrar in Semester One, 2017 by clicking on the 'Next' button below. Your responses help the Department of Health to improve your and other registrars' experience in the Australian General Practice Training (AGPT) program.

The Department of Health's ethics approval ensures the confidentiality of your response. Your involvement is voluntary and you are free to withdraw consent at any time. Your response is private, confidential and will be treated according to any applicable law. This survey is run according to the Department of Health Code of Ethics.

We encourage you to participate in the Australian General Practice Training National Registrar Survey.

Please note that unless otherwise stated: 'your RTO' is the regional training organisation (RTO) that delivered your training in Semester One, 2017; and your training facility' is the main practice, hospital or academic post where you were assigned in Semester One, 2017.

Question	Item	Response options
Which regional training organisation (RTO) delivered your GP training in Semester One, 2017 ?	-	Eastern Victoria GP Training General Practice Training Queensland General Practice Training Tasmania Generalist Medical Training GP Synergy GPEx Murray City Country Coast GP Training Northern Territory General Practice Education Western Australian General Practice Education Training



Question	Item	Response options
<IF RTO=GP Synergy>In which training region was your GP training delivered in Semester One, 2017 ?	-	North Eastern NSW Lower Eastern NSW Western NSW
Which fellowship are you currently working towards? <i>If you are undertaking a dual or triple fellowship, please select all that apply.</i>	FRACGP FACRRM FARGP Other (please specify)	Not selected Selected OPEN RESPONSE
At what full time equivalent (FTE) load were you employed during Semester One, 2017 ? <i>1.0 FTE is equivalent to 38 hours per week, i.e. 0.2 = 1 day.</i>	-	0.0 to 0.2 0.3 to 0.4 0.5 to 0.6 0.7 to 0.8 0.9 to 1.0 I was on extended leave from the training program (e.g. parental, sabbatical, long service) for the whole semester
<IF ON EXTENDED LEAVE FOR WHOLE SEMESTER>Thank you for taking the time to participate in the Australian General Practice Training National Registrar Survey (AGPT NRS). You are not required to respond this year. Please press <i>Next</i> to finalise your input.	-	<i>Note that the survey will be terminated here.</i>



Question	Item	Response options
If you were training in a hospital during Semester One, 2017 , which of the following terms were you undertaking?	-	Hospital intern (PGY1) Hospital resident (PGY2+) Hospital based extended skills training I was not undertaking training in a hospital
<IF PGY1>Thank you for taking the time to participate in the Australian General Practice Training National Registrar Survey (AGPT NRS). You are not required to respond this year. Please press <i>Next</i> to finalise your input.	-	<i>Note that the survey will be terminated here.</i>
In how many training facilities were you employed during Semester One, 2017 ?	-	One Two Three or more
<IF ONE>What is the postcode of the GP training facility where you were employed during Semester One, 2017 ?	-	NUMERICAL RESPONSE
<IF MORE THAN ONE> What is the postcode of the GP training facility where you were employed for the most time during Semester One, 2017 ?	-	NUMERICAL RESPONSE
What training were you undertaking during Semester One, 2017 ? <i>Please select all that apply.</i>	GPT1 Term GPT2 Term GPT3 Term PRRT1 PRRT2 PRRT3	Not selected Selected



Question	Item	Response options
	PRRT4	
	Extended Skills	
	Advanced Rural Skills Training (ARST)	
	Advanced Specialised Training (AST)	
	Academic post	
	Other (please specify)	OPEN RESPONSE
Did you complete any of the following terms prior to commencing the Australian General Practice Training (AGPT) program?	Prevocational General Practice Placements Program (PGPPP)	No
	First Wave Scholarship (GP placement in the undergraduate years)	Yes
	Rural Health Multidisciplinary Training program	
	Commonwealth Medical Internships	
	Bonded Medical Placements (BMP) Scheme	
	Medical Rural Bonded Scholarship (MRBS) Scheme	
	Rural Australia Medical Undergraduate Scholarship (RAMUS)	
	John Flynn Placement program	
	State rural generalist programs	
	Remote Vocational Training Scheme	
	HECS Reimbursement Scheme	
	Community Residency Placement (WA)	



Question	Item	Response options
Training towards any other fellowship		
<p><IF YES TO AST (6h), EXTENDED SKILLS (6e), OR ARST (6f)></p> <p>Were you training in any of the following areas of Extended Skills (FRACGP), Advanced Specialised Training (FACRRM) or Advanced Rural Skills Training (FARGP) during Semester One, 2017?</p> <p><i>Please select all that apply.</i></p>	Aboriginal and Torres Strait Islander Health	Not selected
	Academic practice	Selected
	Adult Internal Medicine	
	Anaesthetics	
	Dermatology	
	Emergency Medicine	
	Medical Education	
	Men's Health	
	Mental Health	
	Obstetrics and Gynaecology	
	Paediatrics	
	Palliative Care	
	Population Health	
	Remote Medicine	
	Skin Cancer Medicine	
	Small Town Rural General Practice (STRGP)	
	Surgery	
	Women's Health	
	Other (please specify)	OPEN RESPONSE



Question	Item	Response options
Are you currently training on the rural or general pathway?	-	Rural pathway General pathway
<IF RURAL> What have been the best aspects of training on the rural pathway?	-	OPEN RESPONSE
<IF RURAL> What aspects of your experience training on the rural pathway are most in need of improvement?	-	OPEN RESPONSE
<p>Please note that unless otherwise stated, all questions referring to 'your RTO' relate to <INSERT RTO NAME>.</p> <p>All questions referring to 'your training facility' relate to the main practice, hospital or academic post where you were assigned in Semester One, 2017.</p> <p>The following questions ask about your satisfaction with your RTO, training facility and College, and your overall satisfaction.</p>		
How would you rate your satisfaction with the following aspects of your RTO in Semester One, 2017 ?	Quality of overall training and education experience	1 Very dissatisfied
<i>If any of the following statements do not apply, please leave blank.</i>	Quality of training advice	2
	Induction/orientation provided	3
	Feedback on your training progress	4
	Workshops provided	5 Very satisfied
	Training and education resources available	
	<IF COLLEGE=ACRRM> Support to meet ACRRM training requirements	



Question	Item	Response options
	<IF COLLEGE=RACGP> Support to meet RACGP training requirements	
	Support for examination and assessments	
<p>How would you rate your satisfaction with the following aspects of your training facility (e.g. your practice, your hospital) in Semester One, 2017?</p> <p><i>If any of the following statements do not apply, please leave blank.</i></p>	Quality of overall training and education experience	1 Very dissatisfied
		2
	Quality of supervision	3
	Clinical work	4
	Number of patients or presentations	5 Very satisfied
	Diversity of patients or presentations	
	Level of workplace responsibility	
	Induction/orientation provided	
	Feedback on your training progress	
	Training and education resources available	
	Location	
	Terms and conditions of employment at your training facility	
<p><IF COLLEGE=ACRRM> Thinking about your experience with ACRRM, how would you rate your satisfaction with:</p>	assessment?	1 Very dissatisfied
	curriculum?	2
	communication?	3
	the support they provide to you?	4
		5 Very satisfied
	assessment?	1 Very dissatisfied



Question	Item	Response options
<IF COLLEGE= RACGP> Thinking about your experience with RACGP , how would you rate your satisfaction with:	curriculum?	2
	communication?	3
	the support they provide to you?	4
		5 Very satisfied
Thinking about all of your AGPT training to date, overall how satisfied are you with each of the following?	Administration	1 Very dissatisfied
	Education and training	2
	Support	3
		4
		5 Very satisfied
Given your overall experience with your training, what have been the best aspects of your experience?	-	OPEN RESPONSE
Given your overall experience with your training, what aspects of your experience are most in need of improvement?	-	OPEN RESPONSE
The following questions ask about your RTO's complaints and grievance process.	-	-
Are you familiar with your RTO's formal complaints and/or grievance process?	-	No
		Yes
		Unaware process exists
Could you readily access your RTO's formal complaints and/or grievance process if needed?	-	No
		Yes
Have you ever made a formal written complaint relating to your training on the AGPT Program?	-	No
		Yes



Question	Item	Response options
Thinking about all of your AGPT training to date, have you experienced an adverse event or incident?	-	No Yes
<IF YES> From which of the following sources did you seek assistance or support to cope with the adverse event or incident? <i>Please select all that apply.</i>	RTO	Not selected
	Your training facility	Selected
	General Practice Registrars Australia (GPRA)	
	Did not seek assistance or support	
	Other (please specify)	OPEN RESPONSE
<IF RTO> How would you rate your satisfaction with the assistance or support your RTO provided during or after an adverse event or incident?	-	1 Very dissatisfied 2 3 4 5 Very satisfied
<IF DISSATISFIED (20=1, 2 OR 3)> How could your RTO have supported you better during or after an adverse event or incident?	-	OPEN RESPONSE
Please note that unless otherwise stated, all questions referring to 'your RTO' relate to <YOUR RTO>. All questions referring to 'your training facility' relate to the main practice, hospital or academic post where you were assigned in Semester One, 2017 .	-	-
How would you rate your satisfaction with the health and wellbeing support provided to you by	your RTO?	1 Very dissatisfied
	your training facility?	2
	<IF COLLEGE=ACRRM> ACCRM?	3



Question	Item	Response options
	<IF COLLEGE=RACGP> RACGP?	4
	your GP Supervisor?	5 Very satisfied
	the General Practice Registrar Association (GPRA)?	
Do you have your own independent GP?		No Yes
Are you living away from your immediate family?		No Yes
How many dependents do you have (e.g. children, parents)?		NUMERICAL RESPONSE
Did you move to the current region to undertake the AGPT program?	-	No Yes
Do you intend to stay in this region after completing the AGPT program?		No Yes Unsure
The following questions ask about the training related to Aboriginal and Torres Strait Islander culture that you have received.	-	-
In Semester One, 2017 , were you training in an Aboriginal health training post (e.g. an Aboriginal Medical Service or Aboriginal Community Controlled Health Service)?	-	No Yes



Question	Item	Response options
<IF NO> Have you completed or are you considering undertaking training in an Aboriginal health training post (e.g. an Aboriginal Medical Service or Aboriginal Community Controlled Health Service)?	-	I have already completed training I am considering undertaking training None of the above
Since commencing the AGPT program, have you had an orientation to Aboriginal and Torres Strait Islander health?	-	No Yes
Since commencing the AGPT program, have you had training in Aboriginal and Torres Strait Islander cultural safety?	-	No Yes
<IF CURRENTLY WORKING IN AN ABORIGINAL TRAINING POST> Do you have access to a formal cultural mentor for support with issues relevant to Aboriginal and Torres Strait Islander people?	-	No Yes
<IF YES> How satisfied are you with the guidance from this cultural mentor on Aboriginal and Torres Strait Islander cultural safety questions?	-	1 Very dissatisfied 2 3 4 5 Very satisfied



Question	Item	Response options
<p>Please note that unless otherwise stated, all questions referring to 'your RTO' relate to <YOUR RTO>.</p> <p>All questions referring to 'your training facility' relate to the main practice, hospital or academic post where you were assigned in Semester One, 2017.</p> <p>The following questions ask about your choice of specialisation, fellowship and RTO, and your future plans.</p>		
<p>When did you decide to become a specialist GP?</p> <p><i>Please select all that apply.</i></p>	While I was at school	Not selected
	Early in my medical degree	Selected
	Late in my medical degree	
	In my first year out of medical school	
	More than one year out of medical school	
	After trying another specialty	
	Other (please specify)	OPEN RESPONSE
<p>Why did you decide to become a specialist GP?</p> <p><i>Please select all that apply.</i></p>	To build long-term relationships with patients	Not selected
	To also study sub-specialities such as anaesthesia, emergency medicine, paediatrics, obstetrics and gynaecology	Selected
	The training program is fully funded by the Commonwealth Government	
	To work in rural and remote locations	
	Intellectually stimulating	



Question	Item	Response options
	<div>Diversity of patients and medical presentations</div> <div>Domestic circumstances</div> <div>Hours/working conditions</div> <div>Eventual financial prospects</div> <div>Promotion/career prospects</div> <div>Self-appraisal of own skills/aptitudes</div> <div>Advice from others</div> <div>Student experience of subject</div> <div>Particular teacher, department or role model</div> <div>Inclinations before medical school</div> <div>Experience of jobs so far</div> <div>Enthusiasm/commitment</div> <div>Social responsibility or to support the community</div> <div>Other (please specify)</div>	OPEN RESPONSE
Was GP specialisation your first choice of specialty?	-	No Yes
Did you apply to any other specialty programs at the same time or before you applied to become a GP specialist?	-	No Yes
<If Yes> What other specialty programs did you apply to?		OPEN RESPONSE
<IF SINGLE FELLOWSHIP> What was your main reason for choosing your GP fellowship?	-	OPEN RESPONSE



Question	Item	Response options
<IF DUAL FELLOWSHIP> What was your main reason for choosing to undertake a dual GP fellowship?	-	OPEN RESPONSE
<IF TRIPLE FELLOWSHIP> What was your main reason for choosing to undertake a triple GP fellowship?	-	OPEN RESPONSE
What were the main reasons you chose your RTO as your training provider? <i>Please select all that apply.</i>	Family/partner support	Not selected
	Location	Selected
	Lifestyle	
	Training opportunities	
	Career links with region (e.g. earlier placement, Prevocational General Practice Placements Program (PGPPP))	
	Reputation of the RTO	
	Recommended by peers	
	Other (please specify)	OPEN RESPONSE
Within the next five years, you would like to be... <i>Please select all that apply.</i>	teaching or supervising medical students.	Not selected
	supervising registrars.	Selected
	a medical educator.	
	not involved in doctor training.	
In five years, you would like... <i>Please select all that apply.</i>	to be working full-time as a private GP.	Not selected
	to be working part-time as a private GP.	Selected
	to own your own practice.	
	to purchase or buy into an existing practice.	



Question	Item	Response options
	to be working in Aboriginal Health.	
	to be working as a GP in another setting (e.g. aged, palliative, home care).	
	to be working in a rural or remote location.	
	to be not working as a GP.	
	to be doing something else (please specify).	

Closing text

Thank you for participating in the Australian General Practice Training National Registrar Survey. Once you have completed the survey, please press 'Submit'.

Your responses help the Department of Health improve registrars' experience and learning in Australia.

If this survey has raised any concerns about your experience in the AGPT program, please get in touch with your Registrar Liaison Officer (RLO). A directory of RLOs is provided by General Practice Registrars Australia (GPRA): <https://gp.ra.org.au/rlo-directory/>.

If you need further assistance, please contact GPRA at registrarenquiries@gp.ra.org.au or phone 03 9629 8878.

PRIVACY STATEMENT

Any Personal Information you provide to ACER is private, confidential and will be treated according to any applicable law. Such Personal Information will only be used for the purposes of this research specified above.

ACER is bound to comply with the Privacy Act 1988 (Cth) and its ACER Privacy Policy locatable at <http://www.acer.org/privacy> and your personal information will be handled in accordance with that policy which may be updated from time to time.

The policy sets out your rights and processes to: complain about a breach of privacy, and access and have amended your personal information held by ACER. Your involvement is voluntary and you are free to withdraw consent at any time. Should you have any queries please contact Project Manager, Ali Radloff, ACER, 19 Prospect Hill Road, Camberwell, Victoria 3124, agptnrs@acer.org.



Appendix E: Accessible text alternatives for figures

Infographic text alternative

The infographic provides a summary of the results from the National Registrars Survey 2017.

The AGPT NRS is an annual, national survey of GP registrars currently training in the AGPT program that collects information about registrar satisfaction, experience and future career plans. This information can be used to assure the quality of training provision, enable continuous improvement and allow results to be benchmarked nationally.

These are the responses from the 1,700 registrars who participated in the 2017 survey.

Training experience

88% were satisfied with the education and training from their RTO

92% were satisfied with the education and training from their training facility

90% were satisfied with the supervisor support

97% were satisfied with their level of workplace responsibility

97% were satisfied with the clinical work

89% were satisfied with the overall education and training

Registrar characteristics

64% of respondents were FEMALE

54% were between 30 AND 39 YEARS of age

0.8% identified as ABORIGINAL or TORRES STRAIT ISLANDER

74% were training FULL-TIME

Health and wellbeing:

91% were satisfied with the support they received from their GP supervisor

84% were satisfied with the support from their RTO

72% of registrars reported having their own GP

43% were living away from their immediate family

Of those living away from home - 33% have dependants compared with 67% who have no dependents

Rural training pathway

48% of registrars are training in the rural pathway

Best aspects of the rural training pathway:

44% - Exposure to range of cases or patients

19% - Practice location



14% - Clinical or procedural experience

12% - Autonomy / Level of responsibility

Why become a GP

(top three)

80% - Hours/working conditions

64% - Diversity of patients and medical presentations

60% - To build long-term relationships with patients

Location of training facility

49% Major cities

32% Inner regional

16% Outer regional

4% Remote



Text alternative for Figures

Table 20: Registrars' current training region (alternative for Figure 1)

Training region	Per cent (%)
North Eastern NSW	13
South Australia	12
Western Victoria	12
South Eastern Queensland	12
North Western Queensland	11
Lower Eastern NSW	11
Eastern Victoria	9
Western Australia	8
Western NSW	6
Northern Territory	3
Tasmania	3

Table 21: Location of registrars' current training facility in 2013, 2014, 2015, 2016 and 2017 (alternative for Figure 2)

Training facility location	2013 (%)	2014 (%)	2015 (%)	2016 (%)	2017 (%)
Major cities	48	39	44	44	49
Inner regional	35	39	35	35	32
Outer regional	14	17	18	18	16
Remote	3	4	3	4	4

Table 22: Proportion of registrars who relocated for training by training location (alternative for Figure 3)

Training facility location	Did not relocate for training (%)	Relocated for training (%)
Major cities	83.1	16.9
Inner regional	37.5	62.5
Outer regional	28.6	71.4
Remote	21.0	79.0

Table 23: Mean overall satisfaction of registrars with the AGPT program from 2013 to 2017 (alternative for Figure 4)

Area	2013	2014	2015	2016	2017
Administration	3.9	3.7	3.8	3.2	3.4
Education and training	3.9	3.9	4.0	3.6	3.6
Support	3.9	3.8	3.9	3.4	3.4



Table 24: Key Performance Indicators 2013, 2014, 2015, 2016 and 2017 (alternative for Figure 5)

Key Performance Indicators	2013 (%)	2014 (%)	2015 (%)	2016 (%)	2017 (%)
KPI 1: Overall satisfaction	91	89	88	76	83
KPI 2: Satisfaction with RTO support (no incident)	90	89	88	72	86
KPI 3: Satisfaction with RTO support (with incident)	88	96	88	81	65
KPI 4: Satisfaction with supervision	94	93	92	92	90
KPI 5: Satisfaction with practice location	94	95	95	96	95
KPI 6: Satisfaction with infrastructure / resources	94	94	94	88	89

Table 25: Key Performance Indicators 2013, 2014, 2015, 2016 and 2017 – reported for satisfaction responses of ‘4’ and ‘5-very satisfied’ only (alternative for Figure 6)

Key Performance Indicators	2013 (%)	2014 (%)	2015 (%)	2016 (%)	2017 (%)
KPI 1: Overall satisfaction	65	59	62	40	44
KPI 2: Satisfaction with RTO support (no incident)	58	36	59	35	45
KPI 3: Satisfaction with RTO support (with incident)	57	42	72	43	29
KPI 4: Satisfaction with supervision	80	74	76	76	72
KPI 5: Satisfaction with practice location	77	77	78	78	78
KPI 6: Satisfaction with infrastructure / resources	63	52	65	50	56

Table 26: Satisfaction with different aspects of training facilities (alternative for Figure 7)

Area of training facility satisfaction	Average satisfaction score
Overall training & education	4.0
Supervisor support	4.0
Number of patients or presentations	4.2
Clinical work	4.2
Diversity of patients or presentations	4.1
Induction & orientation	4.0
Level of workplace responsibility	4.2
Feedback on training progress	3.8
Training & education resources	3.8
Location	4.1
Terms and conditions	4.0



Table 27: Satisfaction with health and wellbeing support by source of support (alternative for Figure 8)

Source of support	Satisfaction with health and wellbeing support
GP Supervisor	91.5
Training facility	90.4
GPRA	86.9
RTO	84.4

Table 28: Proportion of registrars training away from home by location (alternative for Figure 9)

Training location	Training away from home (%)
Major cities	32.6
Inner regional areas	48.2
Outer regional areas	57.5
Remote areas	77.8

Table 29: Proportion of registrars training in an Aboriginal health training post by location (alternative for Figure 10)

Training location	Training in an Aboriginal health training post (%)
Major cities	5.2
Inner regional areas	9.4
Outer regional areas	14.5
Remote areas	49.2

Table 30: Why registrar's decided to become GP specialists (for responses over 20%) (alternative for Figure 11)

Reasons	Per cent (%)
Hours/working conditions	79.6
Diversity of patients and medical presentations	64.4
To build long-term relationships with patients	59.6
Domestic circumstances	33.5
Social responsibility or to support the community	32.0
Intellectually stimulating	31.0
Experience of jobs so far	30.1
Self-appraisal of own skills/aptitudes	27.5
To work in rural and remote locations	24.1
To also study sub-specialties	23.2
Enthusiasm/commitment	22.8



Table 31: Registrars who have moved for training intentions to remain or leave current region by location (alternative for Figure 12)

Training location	Plan to stay in location after training	Unsure of relocation plans	Plan to move from location after training
Major cities	31.4	46.0	22.6
Inner regional areas	34.3	43.4	22.3
Outer regional areas	29.7	36.2	34.1
Remote areas	42.9	32.7	24.5