Celebrating 50 years of general practice training programs in Australia

Stephen A Margolis

THIS MONTH we celebrate the 50th anniversary of the arrival of formal training in Australian general practice when The Royal Australian College of General Practitioners (RACGP) established the Family Medicine Program in 1973.1 The early 1970s was a time of fundamental change for primary healthcare in Australia, when, for the first time, there was consensus and corresponding funding that recognised the centrality of general practice within health service provision in Australia. Over the years, training for general practice has undergone several iterations, with profession-led training starting this year.2 Yet, the mission is essentially unchanged and follows the lead of the RACGP through acknowledging that the patient is at the centre of care, supported in the first instance by their regular GP to provide patient-centred, comprehensive, high-quality, continuous, coordinated, and accessible care.3

This year also heralds the arrival of a new triennium of continuing professional development (CPD) standards for Australian GPs. Although the program now requires a formal commitment of 50 hours per year, reporting requirements are simplified through self-reporting. This change now provides the Australian Journal of General Practice (AJGP) with enhanced opportunities to provide CPD for our readers, with up to 77 hours available. Each issue will offer two hours' Educational Activity (reading the journal), two hours' Measuring Outcomes (completion of the clinical challenge), and three hours' Reviewing Performance (self-reflection).

This year, the RACGP will proudly co-host the World Organization of Family Doctors (WONCA) world conference, the key global body promoting general practice/family medicine (GP/FM). The confluence of these organisations recognises the global role the RACGP holds in promoting and fostering GP/FM, especially in countries with developing economies.

With that in mind, AJGP will now publish the answers to the clinical challenge in the following issue, to ensure that all current and aspiring GPs, regardless of location and circumstances, may benefit from this program. In addition, the clinical challenge now includes several short answer questions (SAOs) in addition to the single best-answer multiple choice questions (MCQs). As each of these stimulates a distinctly different mode of learning, AJGP will include both to provide a helpful experience for the broadest possible audience. These changes will initially impact the printed issue, with the online to soon follow.

While acknowledging the current structural and fiscal challenges general practice is experiencing in Australia, let us also highlight and champion the success of general practice in enhancing the lives of all Australians and supporting those in need. As recently noted by the Chief Medical Officer of Australia in relation to the general practice response to COVID-19, the manifold contributions of GPs provided essential and valued contributions to the health and wellbeing of the nation, providing a cornerstone of the healthcare system.⁴

Finally, I would like to acknowledge our patients, with whom GPs are in symbiosis. GPs continue to be the most common health professional seen by the Australian

public, with 84% having at least one consultation each year, rising to 95% for those with a chronic disease,⁵ leading us full circle to the RACGP mission, which places patients at the forefront.

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