The power of general practice data

Michael Wright

RESULTS FROM The Royal Australian College of General Practitioners' (RACGP's) 2025 *Health of the Nation* report were released last month. Now in its ninth year, the report provides a snapshot of the state of general practice today and shines a light on the pressures facing our profession and the future health system.

Since its inception, the survey has provided insights into the changing nature of care within, sentiment for and the business of general practice. The 2025 report has highlighted the growing complexity and scale of general practice care, coexisting with stable patient satisfaction and high levels of access.[1] The report has identified concerns for general practitioners (GPs) and practices, notably regarding increasing workload, and growing bureaucracy affecting patient care. The longitudinal nature of the data has confirmed anecdotal sentiment about worsening practice financial viability and also identified increasing burnout among the GP community.

The report provides analysis and additional insights from government data, for example revealing that per person expenditure on general practice services has remained stagnant over the past decade, whereas per person expenditure on public hospital care over the same time has increased by nearly one third (Figure 1).

The survey and its findings have supported and are frequently cited for college advocacy, as well as by funders and policymakers, and highlight the potential utility of data collected in general practice. *Health of the Nation* also highlights the importance of health and wellbeing for both patients and our colleagues, the theme of this month's issue of *Australian Journal of General Practice*.

Since the tragic 2016 defunding of the Bettering the Evaluation and Care of Health (BEACH) program,[2] there has been decreased visibility of general practice research, and perhaps a coinciding drop in acknowledgement and understanding of the breadth, complexity and value of the more than 172 million general practice services provided in this country annually. Although *Health of the Nation* fills an important gap and shows the importance of profession-led and informed data, there is a critical need for comprehensive data detailing what occurs in general practice consultations, and a commitment for expanding and supporting primary care research.

Recent initiatives, such as the Australian Government's $22 million investment through the Medical Research Future Fund (MRFF), potentially mark a significant step forward. This funding is designed to support multidisciplinary models of care, digital health innovations and improved access for vulnerable populations. The formation of the National Multidisciplinary Primary Care Research, Policy and Advocacy Consortium, involving over 30 stakeholder organisations and 100 clinician-researchers, promises greater sharing of research across the health system.[3]

As general practice continues through major funding reform, there is an urgent need to evaluate the impacts of policy on the capacity, quality and financial viability of Australian general practice. Good policy needs to be data driven, and the continuing lack of reporting about health outcomes increases the risk that health policy is driven by political ideology rather than evidence.

Health of the Nation has been a great contribution for advocacy and leadership for the RACGP and the profession, but much more comprehensive data at a practice level are needed to truly understand and unleash the power of general practice.

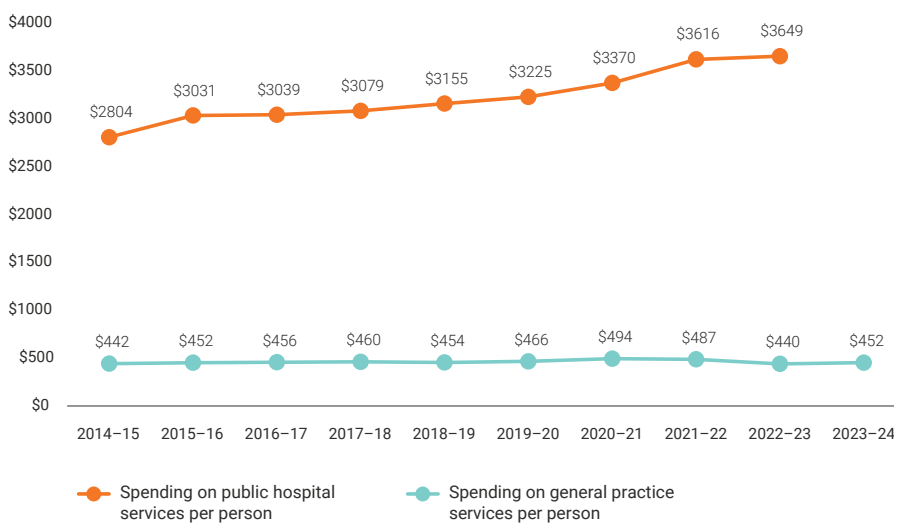

Figure 1. Annual government spending per person, public hospital[A] vs general practices,[B] 2014–15 to 2023–24.

[A] Recurrent expenditure per person, public hospital services (including psychiatric). All amounts in 2022–23 dollars.

[B] Total Australian Government expenditure on general practice services per person. All amounts in 2023–24 dollars.

Author

Michael Wright MBBS, MSc, PhD, FRACGP, GAICD, President, RACGP; Associate Professor, International Centre for Future Health Systems, University of New South Wales, Sydney, NSW

Competing interests: Michael Wright is RACGP President and Associate Professor at UNSW International Centre for Future Health Systems.

AI declaration: The author confirms that there was no use of artificial intelligence (AI)-assisted technology for assisting in the writing or editing of the manuscript and no images were manipulated using AI.

References

1. The Royal Australian College of General Practitioners (RACGP). General Practice: Health of the Nation 2025. RACGP, 2025.

© The Royal Australian College of General Practitioners 2025

2. Swannel K. BEACH, PHCRIS defunding 'a tragedy'. InSight+, 18 August 2016. Available at https://insightplus.mja.com.au/2016/14/beach-phcris-defunding-tragedy [Accessed 1 October 2025].
3. Roberts J. New consortium eyes primary care system reforms. NewsGP, 19 February 2025. Available at www1.racgp.org.au/newsgp/professional/new-consortium-eyes-primary-care-system-reforms [Accessed 1 October 2025].

correspondence **ajgp@racgp.org.au**

© The Royal Australian College of General Practitioners 2025