

RACGP Policy Statement – May 2005

Fellowship of the RACGP

General Practice is a recognised medical specialty, and the FRACGP represents the attainment of the required standard for the discipline of General Practice.

General practice is a medical specialty accredited by the Australian Medical Council (AMC). The AMC has also accredited the RACGP standards and processes for education and training leading to Fellowship of the RACGP; and continuing professional development via the RACGP QA and CPD program.

The RACGP has demonstrated that general practice is a distinct and unique specialty and that our specialist education and training program standards are evidence based, reliable and valid, and provide a basis for continuing, safe and high quality general practice.

The RACGP reaffirms the Fellowship of The Royal Australian College of General Practitioners as the minimum universal standard for all general practitioners, and commits to all GPs – and those working in general practice who are not recognised general practitioners, having the opportunity to attain the FRACGP within a five year time frame.

Over 10,000 GPs have been admitted as Fellows of the RACGP, and since 1996 all Australian graduates seeking recognition as general practitioners with the Australian Government have been required to gain the FRACGP.

The FRACGP examination has proven its reliability and validity and is subject to continuing and intensive evaluation and review.¹ The FRACGP examination is held in high regard internationally and serves as a model for general practice / family medicine assessment in many other countries, including Singapore, Malaysia and Hong Kong.

Flexible Training with a Single End-Point

The RACGP believes that the discipline of general practice and the Australian community are best served by a single vocational training program based on the RACGP's general practice curriculum and culminating in a single end point signifying readiness for unsupervised general practice anywhere in Australia: the FRACGP.

The RACGP believes that the core of general practice is the same in all clinical contexts, and that core is described in the RACGP curriculum and well supported in the literature². However, this core is practiced in widely differing

¹ Hays RB, Fabb WE, van der Vleuten C. Longitudinal reliability of the RACGP certification examination. *Med Educ* 1996;29:317-21

² Britt H, Miller GC, Knox S, Charles J, Valenti L, Henderson J, Pan Y, Bayram C, Harrison C. 2003. *General practice activity in Australia 2002–03*. AIHW Cat. No. GEP 14. Canberra: Australian Institute of Health and Welfare (General Practice Series No. 14). Carmody J, Ketley B, West R (eds). *General Practice in Australia: 2000, 2000*, Department of Health and Aging (General

clinical, community and geographic contexts, and each context imposes its own unique demands.

Within a single flexible training program, the RACGP provides options that will help prepare doctors for a career in general practice anywhere in Australia urban or rural. Training options include certification of procedural skills, public health, paediatric and other special skills, and our Graduate Diploma in Rural General Practice. The RACGP gives doctors choices in training.

The FRACGP has been the required entry standard for general practice since 1996. All Australian medical graduates are required without exception to achieve the FRACGP prior to entry into unsupervised general practice.

This requirement must also apply to all doctors entering general practice, regardless of origin or route of entry if Australian standards of care are not to be undermined

International Medical Graduates and Training

International medical graduates have made a huge contribution to addressing the rural doctor shortage in Australia. The RACGP and its National Rural Faculty recognise this contribution - as well as advocating for and providing support for international medical graduates to adjust to aspects of working in the Australian health system.

However, for doctors on Temporary Resident Visas working in Australian general practice, there are often no entry standards applied at a level acceptable to the RACGP, including often no requirement to even pass the Australian Medical Council's own examination. There also may be no formal requirement to participate in continuing professional education activities.

The RACGP remains gravely concerned that there is still insufficient educational support to assist international medical graduates entering practice in rural Australia, particularly in relation to meeting the quality benchmark of the FRACGP and Graduate Diploma in Rural General Practice

The RACGP has repeatedly called on Commonwealth, State and Territory Governments to ensure that all doctors working in general practice in Australia meet appropriate Australian standards before they are able to practise unsupervised or be recognised as general practitioners in Australia.

The RACGP calls on the Commonwealth to ensure that doctors who are not recognised general practitioners but are working in Australian general practice, are:

- working under supervision,
- being supported to prepare for the FRACGP
- required to meet the standards for continuing professional development required by the RACGP.

Recognition and Reward for Quality General Practice

The RACGP considers that sound generalist training and qualifications should precede medical practitioners moving into narrower clinical fields in virtually all medical disciplines, and is opposed to the formation of narrow new disciplines, especially where these preclude early generalist training.

However, over the last two decades, the trend within all recognised medical disciplines has been towards practice in smaller, more specialised clinical areas, and the pressure to recognise sub-specialties and entirely new disciplines has increased. Yet the international evidence³ points to the inefficiencies, costs and risks of further fragmentation of care, and illustrates that effective, comprehensive, integrated primary health care underpins cost effective health systems.

In parallel with increasing specialization has been the trend to increased rewards for practitioners who narrow their scope of practice, when in reality, the greatest challenge is in maintaining skills across the breadth of practice.

Proper recognition is long overdue for general practice and is most urgently due for those general practitioners who provide quality care and a comprehensive range of services. Clinical practice in areas of need adds a further dimension.

³ Kahn NB. *op cit.*