



Advocacy Plan

2026–30

Rural advocacy

The Royal Australian College of General Practitioners (RACGP) advocates on behalf of specialist GPs and their patients to strengthen Australia's health system. We engage with all levels of government, regulators and key decision-makers to ensure general practice is well supported, patient-centred and at the heart of care delivery.

The *RACGP Advocacy Plan 2026–30* sets out how the College will advocate over the next five years on behalf of our members. It reflects the priorities members have told us are most important to them through our annual Health of the Nation and member surveys, our member-elected faculty councils, our many College expert and advisory committees, as well as direct member submissions. The Advocacy Plan provides focus, clarity and accountability while allowing flexibility to respond to emerging issues.

Key priorities



To best support our regional, rural and remote workforce and the communities they serve, the RACGP is asking the federal government to:

- fund the RACGP-led Pathways to Rural Program, delivering rural placements of metropolitan based GPs with support and structured networking for GPs moving into rural practice
- increase supervisor payments through the National Consistent Payment framework to support the development, consistency and continuity of supervision across the entire GP training pipeline
- invest in funded mentoring and supervision programs for IMGs outside existing training pathways, particularly in isolated rural locations
- increase the rural loading of the bulk billing incentive
- fund adequate and safe housing and other community supports for GPs and registrars working in remote areas, regardless of employer
- subsidise locum rates for rural GP clinics and Aboriginal Medical Services that cannot afford hospital-level rates, ensuring rural practices can access essential short-term workforce support. Position this support as complementary to the Pathways to Rural program and federally-funded Rural Locum Assistance Program (RLAP), helping to stabilise practices during workforce shortages
- extend RLAP to include GPs, alleviating the financial burden of locum coverage for rural and remote clinics
- implement recommendations from the Working Better for Medicare Review, including timely delivery of reforms to strengthen continuity of care and multidisciplinary access
- fund rural medical school placements to address 'placement poverty' in line with nursing student support
- invest in rural childcare services, including flexible models that accommodate GP hours
- expand targeted funding and support for practices and supervisors in regional, rural and remote areas to ensure sustainable, high-quality training capacity and equitable supervision opportunities
- prioritise rural and remote general practices in the GP Incentives Fund, with flexible funding and faster approvals to support ongoing service delivery
- index, review and increase the Rural Procedural Grants Program
- align the Distribution Priority Area (DPA) and Modified Monash Model (MMM) frameworks to deliver equitable, evidence-based GP workforce distribution, by:
 - introducing a remote (MMM6–7) general practice maintenance allowance to support recruitment and retention in very remote communities
 - funding locum leave support in MMM6–7 areas to maintain service continuity and practitioner wellbeing
 - applying DPA status only where there is demonstrable GP workforce undersupply, with transparent publication of the data, assumptions and rationale underpinning DPA classifications.

Supporting our regional, rural and remote workforce and the communities they serve

Rural and remote communities continue to face significant health inequities, driven by higher chronic disease burden, poorer outcomes and limited access to care. Rural GPs play a vital role in addressing these challenges through comprehensive, community-based care. With growing complexity of care and mounting workforce pressures, particularly outside major cities, targeted and sustained investment is needed to strengthen the rural GP workforce, expand training and supervision capacity, and support locally responsive models of care that ensure continuity for the seven million Australians living beyond metropolitan areas.

Want to help advance RACGP advocacy?

The RACGP's **GP Advocate Network** empowers GPs to deliver coordinated, place-based advocacy by engaging with local MPs and senators in their own communities. By sharing lived experience, GP advocates give a powerful voice to general practice and help policymakers understand the real impact of government decisions. Members receive CPD-approved training and ongoing support to advocate confidently and effectively.

Get involved today

Submit an expression of interest via the RACGP website or email gpadvocate@racgp.org.au to learn more.

Discover the **Advocacy Plan 2026–30** and talk to your **Rural faculty** about getting involved.