

UNITED GENERAL PRACTICE AUSTRALIA

Outcomes Statement for meeting held on 25 August 2016

ITEM	DESCRIPTION AND ACTIONS
1	Standing items <p>Purpose of UGPA</p> <ul style="list-style-type: none"> A useful forum for debate, UGPA is not replicated elsewhere so is of benefit for joint discussion Agreement to continue for now, but continue to re-visit future role. <p>The Australian General Practice Network (AGPN)</p> <ul style="list-style-type: none"> AGPN is no longer national and does not have divisions in each state Regularly missing at UGPA meetings, without providing prior apology. <p>ACTION: Dr Jones to write to AGPN on behalf of UGPA, advising AGPN is no longer a member of UGPA.</p> <p>After hours</p> <ul style="list-style-type: none"> MBS Review Taskforce – The government is to set up an Urgent After Hours Services Working Group This group will <ul style="list-style-type: none"> explore challenges to access explore whether the increase in item number use reflects genuine need focus on urgent after hours care items (not after-hours items more broadly) UGPA endorsed the position that deputising services should be aligned with a regular GP and practice: no fragmentation of care. <p>Privacy Commissioner – MyHealthRecord</p> <ul style="list-style-type: none"> GPs have been meeting the modest upload requirements for the purposes of the eHealth PIP UGPA remains concerned about the usability, privacy, and it being merely an information repository.
2	Ongoing MBS rebate freeze <ul style="list-style-type: none"> The AMA suggested that the freeze presented an opportunity to persuade general practices to charge what they are worth. Even if the profession moves to a private billing model, there must still be government and fiscal support for practices providing services to disadvantaged patients and communities Focus needs to be on general practice; not pathology and radiology The RACGP has already endorsed a toolkit for help GPs transition away from total bulk billing: the AMA is also arranging toolkits and webinars

<p>ACTION: UGPA to release media statement:</p> <ul style="list-style-type: none"> ○ Peak General Practice bodies agree that the ongoing NBS freeze rebate is impacting on quality patient care, including problems with access and late presentations: practice viability is also threatened. Many practices are looking to their bottom line and moving to private billing 	
3	Health Care Homes trial
<ul style="list-style-type: none"> • The ten Primary Health Networks (PHNs) involved in the trial of Health Care Homes were announced in August. • No information on how they were selected is publicly available. • UGPA noted financial support for Health Care Homes remains inadequate. • Organisations need to coordinate and guide the government on successful trialling. <p>ACTION: UGPA to release media statement:</p> <ul style="list-style-type: none"> ○ Health Care Home model is a potential solution to the challenges of a changed health demographic ○ Modelling must engage with the states ○ The profession is willing and able to work with government to ensure success ○ Adequate funding for the trial model is critical ○ Great opportunity to explore non-dispensing clinical pharmacists as part of the model 	
4	Review of Pharmacy Remuneration and Regulation
<ul style="list-style-type: none"> • The Review of Pharmacy Remuneration and Regulation report raises important questions for pharmacists • There is a suggestion that the Guild does not want non-dispensing pharmacists in general practice • UGPA agreed government should re-direct funding from retail pharmacists to supporting pharmacists in the medical home 	
5	Government's intention to appoint a National Rural Health Commissioner
<ul style="list-style-type: none"> • The National Rural Health Commissioner has not yet been appointed • There is no information on what authority/power they will have, or whether they will be independent of government • UGPA strongly endorses the view that the appointee should be a Rural medical practitioner 	
6	Medical Research Futures Fund
<p>Attendance of Professor Grant Russell, President – Australasian Association for Academic Primary Care (AAAPC)</p> <ul style="list-style-type: none"> • There is no certainty for Primary Health Care Research and Information Service (PHCRIS) funding after December 2016 	

	<ul style="list-style-type: none"> • Reformation of PHCRIS would be valuable (eg moving from health services to clinical research) • The Federal Government has no plan for future primary healthcare research • Senior staff at the Department of Health are aware of the need for GP research • The Government may look at investment into measurement of Health Care Homes. • The Medical Research Future Fund (MRFF) will see \$60 million in its first year – which will be priority driven. <ul style="list-style-type: none"> ○ MRFF will be directed to the perceived needs of the nation around healthcare delivery. It will be more about translational research, which is almost non-existent in the National Health and Medical Research Council (NHMRC) ○ AAAPC has made a submission to MRFF to be involved ○ Organisations should seek clarification from the government regarding the MRFF and its relationship to general practice. • Organisations must re-state the importance of PHCRIS. • AAAPC happy to provide any information required for the background of any organisations.
7	Medical workforce – reducing overseas training numbers
	<ul style="list-style-type: none"> • If UGPA makes any future statement on the matter, it needs to be cognisant of the issues of marginalising International Medical Graduates (IMGs) in the rural workforce.
8	MBS review
	<ul style="list-style-type: none"> • It is imperative for general practice to be heavily involved in the MBS Review's mental health working group.
9	GP Training Advisory Committee (GPTAC) update
	<ul style="list-style-type: none"> • At its meeting on 25 August 2016, GPTAC discussed: <ul style="list-style-type: none"> ○ support for Aboriginal and Torres Strait Islander people until 2017 ○ co-funding training model being put on hold ○ marketing of the GP training program going forward ○ registrar satisfaction survey ○ appeals and remediation ○ Rural Procedural Grants Program (funding until September only)
10	Next UGPA meeting
	Thursday 24 November 2016 from 1.30 – 3.30 pm at RACGP NSW Faculty – Level 7, 12 Mount Street North Sydney NSW