



GENERAL PRACTICE
HEALTH
— OF THE —
NATION
2021

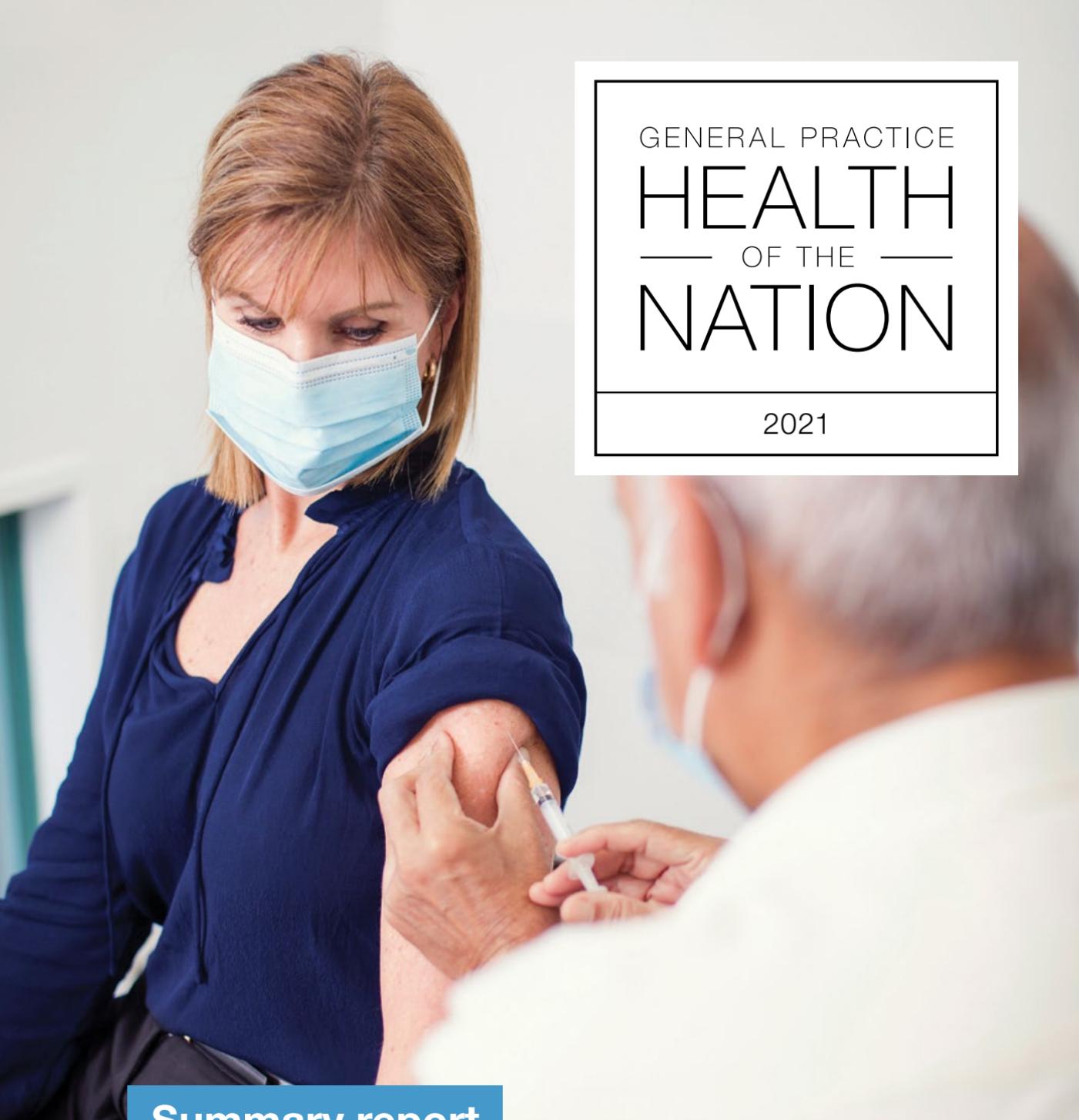
A unique insight into the state
of Australian general practice

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We acknowledge the Traditional Custodians of the lands and seas on which we work and live, and pay our respects to Elders, past, present and future.

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Summary report

This summary provides a brief snapshot of the RACGP's
General Practice: Health of the Nation 2021 report.

For further details, view the full report at www.racgp.org.au/hotn



RACGP

Royal Australian College of General Practitioners

Message from the President



This last year has again shown how resourceful, determined and capable general practices are in times of crisis

The COVID-19 pandemic lingers and many communities, including my own in Melbourne, have been plunged into lockdown again and again.

The vaccine rollout has encountered many challenges, yet our GPs, practice managers, nurses, receptionists and administrative staff have not only persevered, but performed tremendously. Practices have delivered more than 12 million COVID-19 vaccine doses (more than half the national total), and by the time you read this it will be many more.

The *General Practice: Health of the Nation 2021* report underscores that GPs are more important than ever, and we need greater support to help communities manage the fallout from the pandemic.

General practice is a ready-made mass-vaccination service

Our survey found that almost three out of five GPs reported ‘managing patient expectations about vaccinations’ as one of the most challenging issues arising from the pandemic. Multiple changes to vaccine eligibility requirements left many people confused and overwhelmed and, unfortunately, some of these patients took their frustrations out on general practice staff.

Differing eligibility requirements across jurisdictions added to the strain. Government can alleviate this additional pressure by ensuring practices are kept in the loop on public health decisions. General practice must be involved in public health decisions, including changes to the vaccine rollout.

This rollout will no doubt have more twists and turns ahead, and it is vital that GPs are properly consulted to ensure we can best perform our critical role as the backbone of the vaccine rollout.

We must look ahead and be clear-eyed about the future of our profession

Not enough junior doctors are choosing a career in general practice. It is that simple.

The general practice workforce is ageing – the proportion of GPs over the age of 65 increased from 11.6% in 2015 to 13.3% in 2019.

At the same time, not enough medical graduates want to be GPs. The proportion of final-year students listing general practice as their first preference specialty has fallen to just 15.2% – the lowest since 2012.

International medical graduates will continue to play a crucial role in bolstering the general practice workforce, but we must also grow our locally trained workforce. We also need more GPs to practise outside major cities. The RACGP is Australia's largest representative body of rural GPs, so that will always be a high priority.

I believe that by highlighting how diverse and rewarding this career path can be, we can encourage more doctors to opt for general practice. But it is also important to address what is holding more doctors back from a career as a GP. Piece-by-piece repair is not sufficient – genuine reform in the sector is required.

A great place to start would be putting general practice on a more sustainable, long-term financial footing. At a time when we are needed by our communities more than ever, the share of total government healthcare spend for primary care is in decline. Funding for GPs and general practice services is less than 8% of total health expenditure, yet we provide more than twice the number of episodes of care a year than hospitals, and all at one-sixth of the cost.

As we revealed last year, economic analysis by PricewaterhouseCoopers estimates that implementing the RACGP's [Vision for general practice and a sustainable healthcare system](#) and boosting primary care funding could provide benefits of \$5.6 billion over the next five years.

This issue is front of mind for many of our members. This year's survey found that 26% of respondents ranked Medicare rebates as their highest priority. More than half of GPs surveyed said they would recommend general practice as a career to their junior colleagues, but 48% indicated they are less likely to do so now compared to a decade ago. Those who would not recommend general practice as a career have concerns around their remuneration, recognition and Medicare billing requirements.

So, if the Federal Government is serious about boosting the general practice workforce of the future so all patients can continue to access high-quality primary care regardless of where they live, it is vital this is reflected in long-term funding arrangements. The task of attracting more junior doctors to general practice would be made that much easier and the savings for the entire health system would be immense.

We need to set a target and stick with it. Anything less could be detrimental to the entire health system and, indeed, the health of the nation.

Managing the fallout from the pandemic in the years ahead will be crucial

Ask any GP and they will likely report more and more patients presenting with mental health concerns. This is part of a longer-term trend. For the fifth consecutive year, psychological conditions, including sleep disturbance and depression, were the most reported reasons for patient presentations. Over 70% of GPs selected 'psychological' in their top three reasons for patient presentations, a number that has risen steadily from 61% in 2017.

As the first port of call for many patients with mental health issues, GPs play a vital ongoing role over many months or even years. Four out of five GPs report they have patients with mental health conditions that are mostly managed within general practice. This aligns with data showing that GPs provide the majority of Medicare-subsidised mental health services.

The scale of the task has only grown over the last 12 months. To help these patients, we need new Medicare items for longer mental health consultations so we can really get to the bottom of what is going on.

The true measure of any society is how it treats its most vulnerable

The last year has seen an increased focus on aged care, a shift that could not have come soon enough. GPs play a vital and often unrecognised role in caring for older people in residential aged care facilities and in the community. People aged 65 and over account for 16% of the Australian population but represent nearly 30% of all general practice consultations.

Ensuring adequate access to primary care can make an enormous difference. We know people with dementia entering the aged care system are less likely to experience an increase in prescriptions for medications like antipsychotics if they retain a relationship with their usual GP.

When asked what would make them more likely to work in aged care, two-thirds of GP respondents said better remuneration via Medicare items, while more than half selected fewer administrative burdens and more clinical staff in aged care settings as key drivers. Helping GPs get on with the job of helping older people in aged care is essential.

It is also important to remember that GPs are the only medical practitioners that specialise in managing patients with multiple health conditions. Almost three-quarters of GPs surveyed reported that most of their patients have multiple medical conditions.

This challenge looms large on the horizon for general practice. To better help patients with multiple conditions who are at heightened risk of ending up in hospital, we must change how we structure general practice funding. As things currently stand, Medicare discourages GPs from treating almost one condition in the same consultation. It is vital that we remove this barrier and incentivise longer consultations to support comprehensive care by GPs.

The solutions are in plain sight – we just need the political will

The RACGP will continue fighting for practices and their patients across Australia.

Only when the fundamental role of general practice is properly recognised and greater support and resources are given to our hardworking GPs can government honestly say it is committed to improving the health of the nation.

To all practices, I say keep up the great work. Your communities need you now more than ever before.

Dr Karen Price

RACGP President

17 September 2021

Introduction

GPs are the backbone of Australian healthcare, with almost 85% of the population seeing a GP at least once each year.¹ A thriving, accessible and high-quality general practice sector is vital to the health of the nation.

As Australia's largest professional general practice organisation, the RACGP represents more than 43,000 members, including more than 24,000 Fellows who have completed specialist training (or its equivalent). These are the frontline GPs who treat almost 22 million patients¹ across the country every year.

Our annual *General Practice: Health of the Nation* report helps shine a light on Australian general practice. It examines the main reasons people see their GP, as well as how they interact with the primary health system. It also points to the main challenges GPs face and what must be addressed to ensure Australians can access the care they need, when they need it.

The report collates data from various sources – including publicly available data from the Department of Health, Medicare, the Australian Institute of Health and Welfare (AIHW), the Australian Bureau of Statistics (ABS) and the Productivity Commission – to provide a unique overview of the general practice sector. It also draws directly on GPs' own thoughts via the 2021 Health of the Nation survey, specifically commissioned research spanning five years that has involved RACGP Fellows from all parts of Australia.

The online survey was undertaken by EY Sweeney during April and May 2021. The 1386 survey respondents covered a wide range of demographics:

- 59% female, 40% male
- 8% <35 years, 26% 35–44 years, 31% 45–54 years, 24% 55–64 years, 11% ≥65 years

- 12% Western Australia, 10% Northern Territory/ South Australia, 23% Queensland, 28% New South Wales/Australian Capital Territory, 27% Victoria/Tasmania, <1% overseas
- 70% in major cities, 20% inner-regional, 8% outer-regional, 2% remote and very remote

The *General Practice: Health of the Nation* report focuses on a range of general practice topic areas, including:

- the health of the profession
- patient access to general practice
- the varied and important services that GPs provide to communities
- challenges facing GPs and practices.

RACGP members select a specific topic of focus for the report each year. In 2021, that focus is multimorbidity in general practice. The ongoing challenge of adapting processes and responding to the COVID-19 pandemic is also reflected in survey findings throughout the report.

As the fifth edition of *General Practice: Health of the Nation*, this report provides opportunity to track changes over the short and medium term and forecasts possible longer-term changes and their implications.

Previous editions of the report can be viewed online at www.racgp.org.au/hotn



The COVID-19 pandemic has demonstrated how important an **integrated and well-supported primary care sector** is in managing threats to population health.

Key themes from the 2021 report

GP workforce demographics



18% of GPs plan to retire within five years²



19% of female GPs report they work 40 hours or more per week, compared to **38%** of male GPs³

The number of GPs outside major cities has grown by

3.4% ↑

per year since 2013⁴

3 in 5

GPs in training report an interest in rural practice⁵



The rate of Aboriginal and Torres Strait Islander medical practitioners increased from 1.7 per 10,000 in 1996 to **5.3 per 10,000** in 2016⁶

53%

of GPs in training indicate an interest in Aboriginal and Torres Strait Islander healthcare⁵

The work day of a GP

21.8 million

Australians visit a GP each year¹



GPs see an average of

97 patients

each week²

GPs on average spend

18.4 minutes

with each patient²



87%

of GPs said their practice has same-day appointments set aside for urgent presentations²

GPs reported the most common patient presentations in 2021 were:



Psychological



Musculoskeletal



Respiratory



Women's health



Endocrine and metabolic

Mental health

70% ↑

70% of GPs reported psychological as one of the most common reasons for patient presentations in 2021, an increase from 61% in 2017²



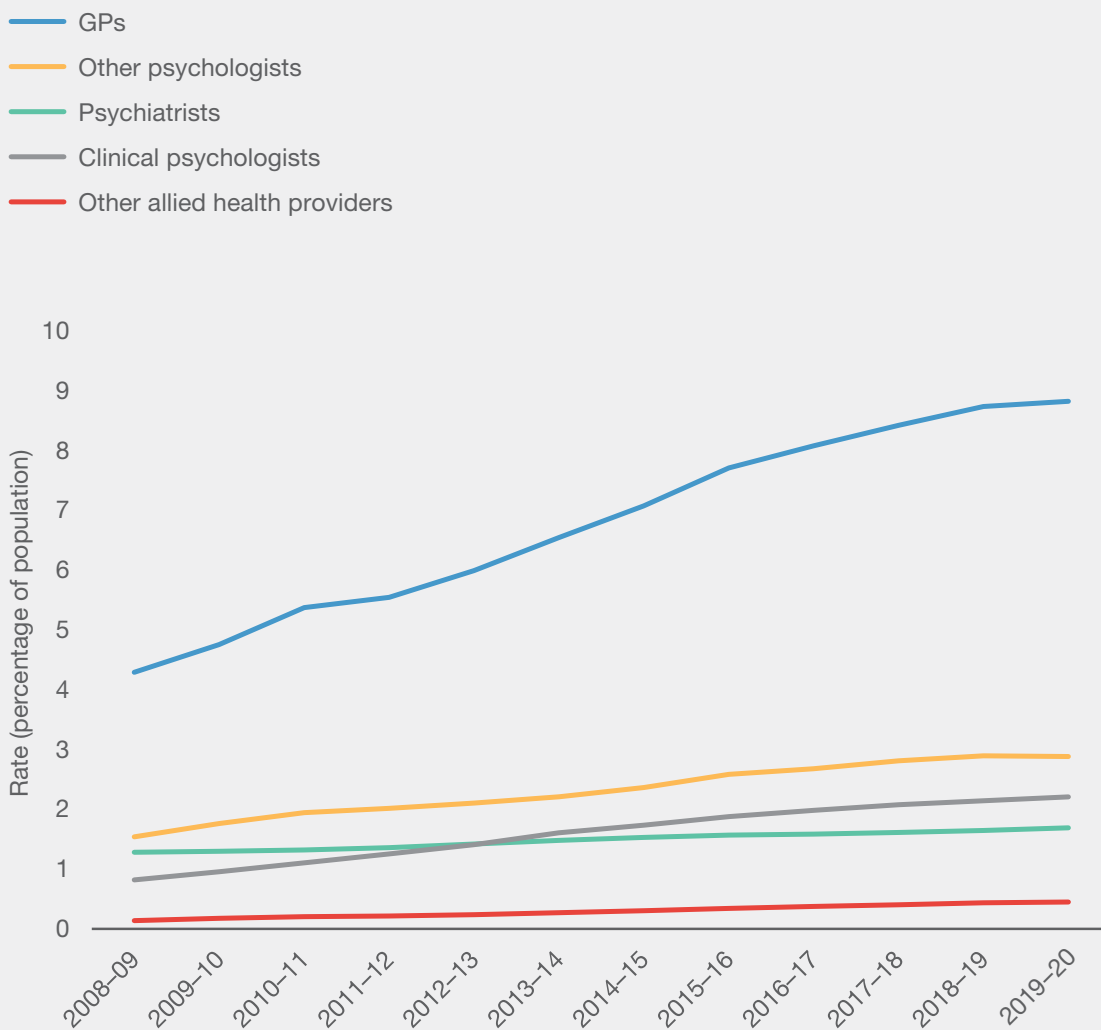
More than **10%** of the population received MBS-supported* mental health care in 2019–20, almost **twice** the rate from 2008–09⁷

82%

of MBS-supported mental health services were provided by a GP⁷

*MBS = Medicare Benefits Schedule

**GPs provide the majority of MBS-subsidised mental health services –
and attendances are rapidly increasing**



COVID-19 and general practice

The most commonly reported challenges for GPs arising from the pandemic are:

- managing patient expectations about COVID-19 vaccinations
- finding a financially viable way to provide COVID-19 vaccinations.²

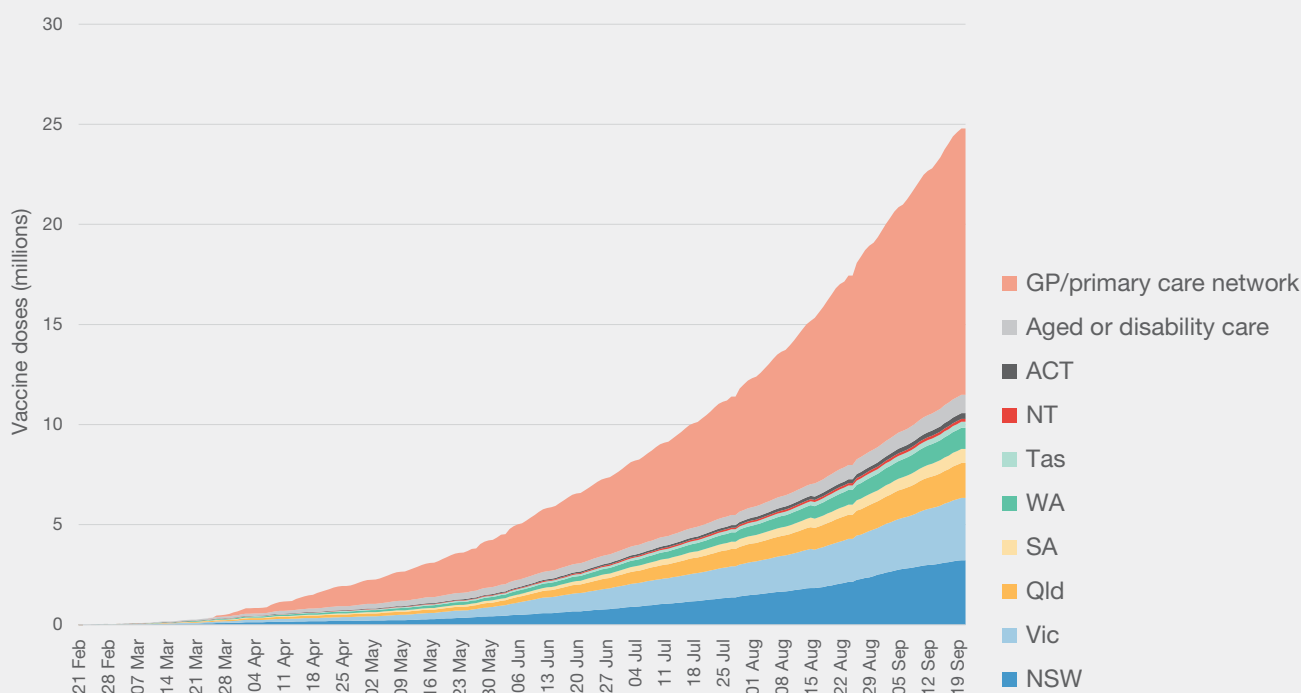
General practice teams put the wellbeing of their patients first, regardless of financial and logistical barriers.

Almost **nine out of 10** GPs reported their practice is providing COVID-19 vaccinations or is willing to do so.²

Primary care administered **more than half** of all doses during the first five months of the COVID-19 vaccine rollout.

Half of GPs reported at least one negative impact to their wellbeing because of COVID-19.²

General practice is leading the COVID-19 vaccine rollout



Measure: COVID-19 vaccine cumulative doses by administration channel – state-run vaccination hubs, aged care, disability care and general practices.
Source: covid19data.com.au/vaccines [Accessed 21 September 2021]

Multimorbidity in general practice

GPs are the only medical practitioners that specialise in managing multimorbidity for the full spectrum of patients, from paediatrics to aged care.

Multimorbidity is increasing, and this in turn increases the complexity of care required.

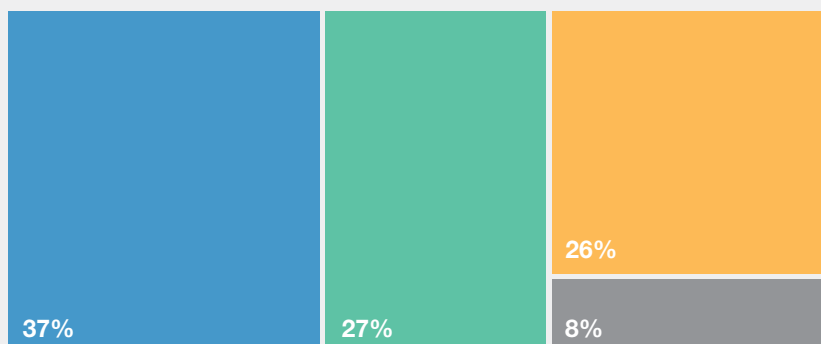
One-third of GPs reported more than 75% of their patients have multiple chronic conditions.²

Four out of five GPs reported their patients with mental health conditions have most of their care provided within general practice.²

Almost **two-thirds** of GPs reported most of their patients have physical and mental health conditions that they treat concurrently.²

The majority of patients have physical and mental health conditions that are treated together

■ Half to three-quarters ■ More than three-quarters
■ A quarter to half ■ Less than a quarter



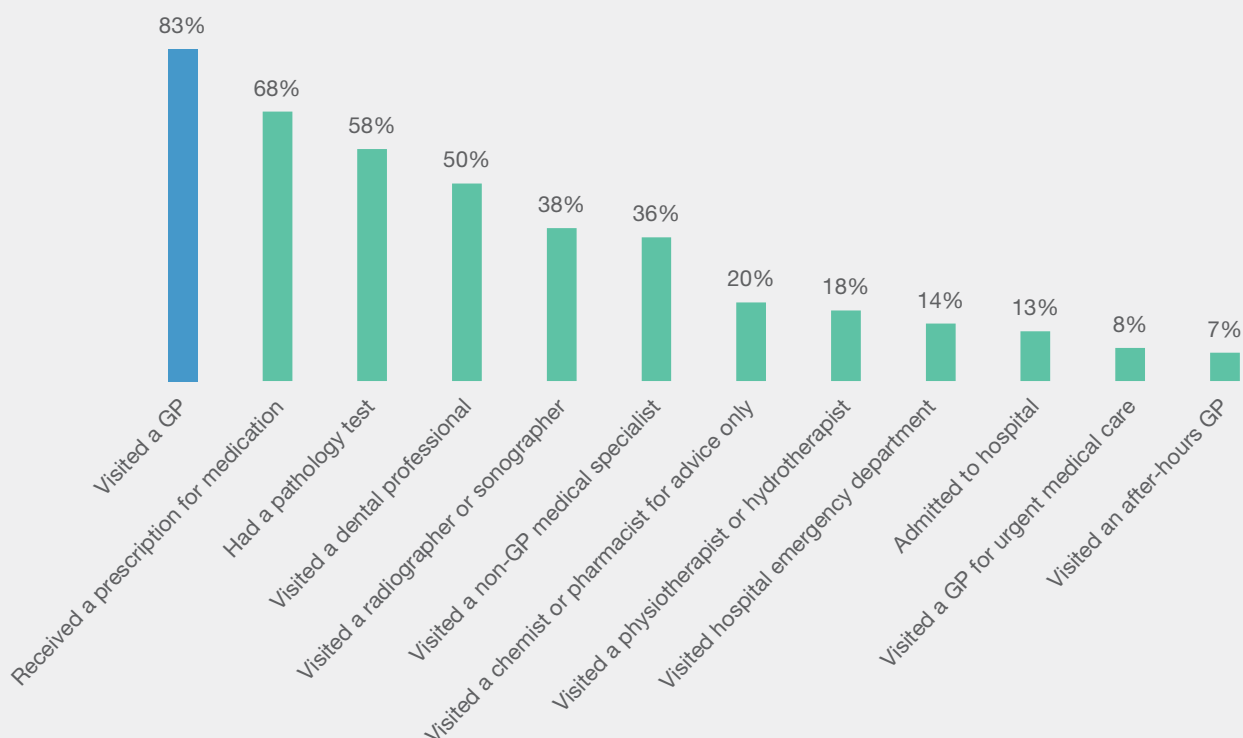
Measure: GP responses to the question 'What proportion of your patients would you describe as having physical and mental health conditions which you treat concurrently?'

Base: Responses to survey question, n = 1386.

Source: EY Sweeney, RACGP GP Fellow survey, May 2021.

Patient access

Patients reported seeing their GP more than any other health professional



Measure: Patient responses to the question 'In the last 12 months, have you [insert category]?'

Base: Total survey responses, n = 29,793.

Source: Australian Bureau of Statistics. Patient experiences in Australia: Summary of findings, 2019–20. Cat. no. 4839.0. Canberra: ABS, 2020.

Less than 1%

of patients reported they needed to, but did not, see a GP at all in the previous 12 months⁸



In 2019–20, the number of people who reported they had a preferred GP increased by 0.8% to **76.3%**⁸

Almost **nine out of 10** Aboriginal and Torres Strait Islander people reported seeing a GP or other medical specialist in the last 12 months⁹

Aboriginal and Torres Strait Islander people use GP services at rates slightly higher (**x1.2**) than non-Indigenous Australians⁶

Telehealth



Telehealth via phone in May 2021 represented 17% of all GP attendances, a decline from around one-third in April 2020¹⁰

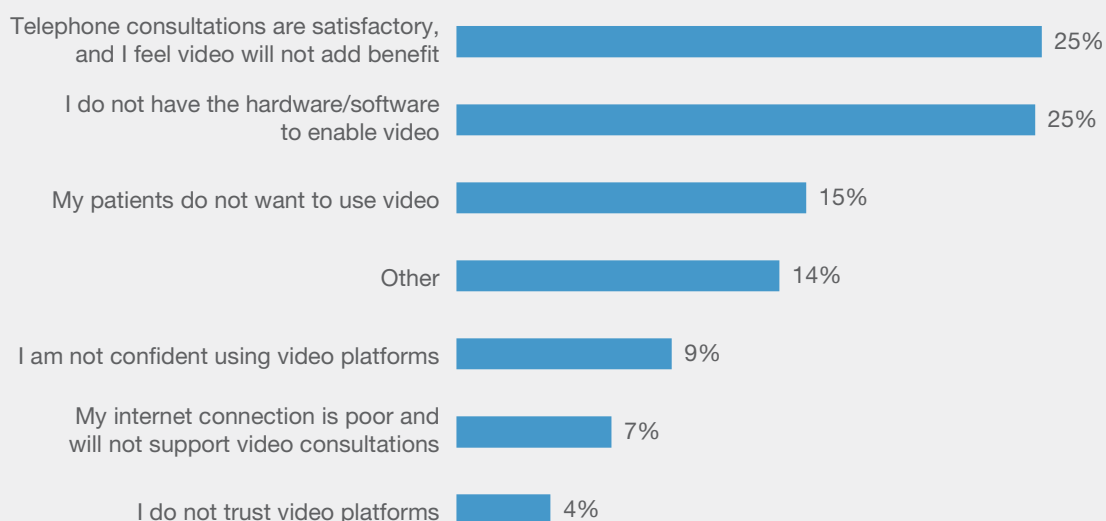


1.3% of all GP attendances used video in April 2020, falling to **0.29%** by May 2021¹⁰



In June 2020, **55%** of GPs reported they had used video technology at least once,¹¹ an increase from **30%** in April 2020, indicating a willingness to attempt to use new technology¹²

One out of four GPs reported they do not have the technical capability to provide video consultations



Measure: GP responses to the question, 'Please outline the reason/s you have not undertaken telehealth consultations using video (select all that apply).'

Base: GPs who had indicated they had never attempted using video technology in their practice, n = 342.

Source: RACGP telehealth survey, June 2020.

Aged care

Aged care services are the **fourth-highest** priority health policy area among GPs.²

Fewer than **one in five** GPs reported working in an aged care facility in the past month.²

56% of those GPs who had not worked in aged care in the past month said they were unlikely to do so in the future.²

The majority of surveyed GPs reported that better remuneration, fewer administrative burdens, more clinical staff and better IT infrastructure/interoperability would make them more likely to work in aged care



Other responses in free text included: nothing/no interest in aged care/no time, improved aged care standards, a more supportive work environment, politics, better access to facility, less on-call time.

Measure: GP responses to the question 'What would make you more likely to want to work in aged care [select all that apply]?'

Base: Survey respondents who had not worked in aged care in the past month, n = 1028.

Source: EY Sweeney. RACGP GP Fellow survey. May 2021.

Government funding



Funding continues to be the most-reported health policy issue of importance to GPs²

GPs provide more than **twice** the number of episodes of care per year than hospitals for **one-sixth** of the expenditure amount^{13,14}



Total healthcare expenditure is projected to increase, with funding for public hospitals the fastest-growing component, nearly doubling between 2020–21 and 2031–32¹⁵

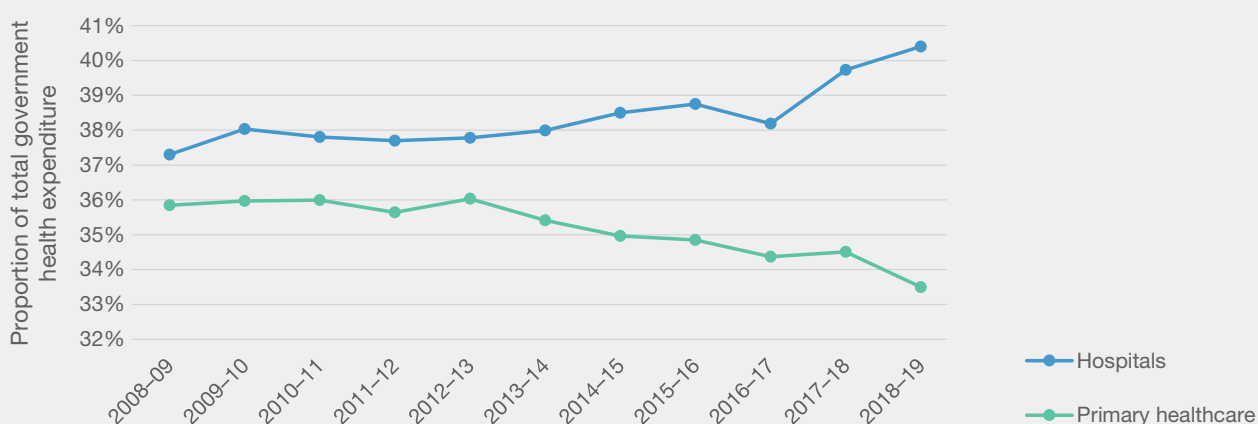


The proportion of total government health expenditure for primary care declined from 36% in 2012–13 to 33.5% in 2018–19¹⁴



Just **7.4%** of total government expenditure is directed to general practice¹³

Total government expenditure on primary care is declining



Measure: Government expenditure on primary care and hospital services, 2008–09 to 2018–19.

Source: Australian Institute of Health and Welfare. Health expenditure Australia 2018–19. Health and welfare expenditure series. Cat. No. HWE 80. Canberra: AIHW, 2020.

Billing and patient out-of-pocket costs

22% of GPs work at a practice that bulk bills all of its patients.²

The median percentage of patients who had all of their general practice services bulk billed in 2018–19 was **64%**.¹⁶

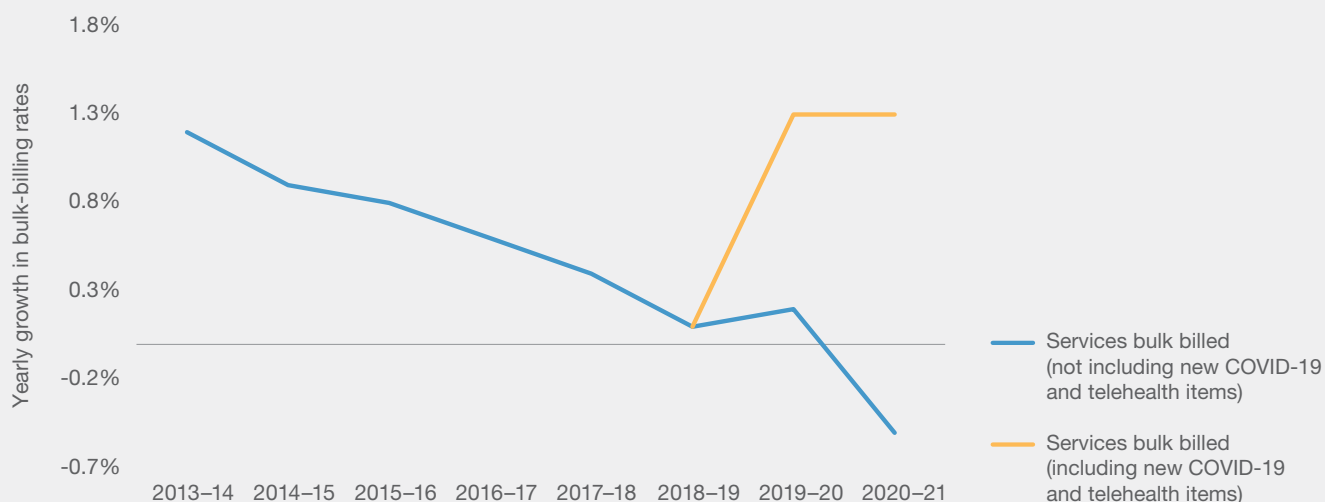
Bulk-billing rates vary between electorates, from **32.9%** of patients in Canberra to **96.7%** of patients in Chifley (NSW).¹⁶

78% of GPs work at a practice that privately charges at least some of its patients.²

Average patient out-of-pocket costs for non-referred services have increased by **50%** over the last decade.¹

The average reported out-of-pocket cost for a Level B (MBS item 23) consultation is **\$38.80**.²

Growth in bulk billing of general practice services has been affected by the pandemic



Measure: Growth in percentage of bulk-billed services in category, 'Broad type of services: GP non-referred attendances', Australia-wide, split by COVID-19, telehealth.
Base: Population-level data.

Source: Department of Health. Annual Medicare statistics – Financial year 1984–85 to 2020–21. Canberra: DoH, 2021.

Job satisfaction

73% of RACGP Fellows reported they are very or moderately satisfied with being a GP²



GPs are most satisfied with:

- the amount of variety in their work
- their colleagues and fellow workers
- physical working conditions
- freedom to choose their own method of working²

GPs are least satisfied with:

- billing and regulatory requirements
- remuneration
- the recognition they receive for their work²

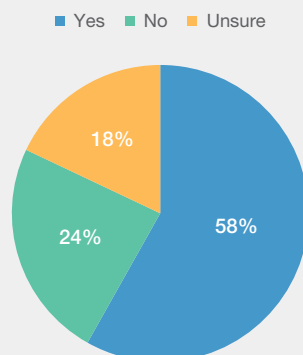


The most common challenge reported by GPs is:

- ensuring fair remuneration for skills and services provided
- managing fatigue and burnout
- managing work–life balance
- understanding and adhering to regulatory and policy changes³

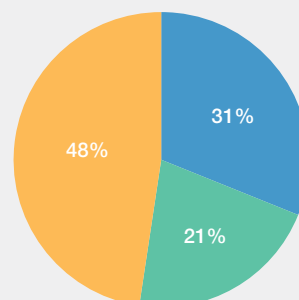
Three out of five GPs would recommend general practice as a career

Would you recommend general practice as a career?



How has your recommendation of a general practice career changed compared to 10 years ago?

- No change
 ■ I am MORE likely to recommend a career in general practice now
 ■ I am LESS likely to recommend a career in general practice now



Measure: GP responses to the question, 'Would you recommend your junior colleagues (medical students, interns, prevocational trainees) choose general practice as a career?' and 'How has your recommendation of a general practice career changed compared to 10 years ago?'

Base: Total survey respondents, n = 1386.

Source: EY Sweeney. RACGP GP Fellow survey. May 2021.

Practice ownership

23% of GPs surveyed own all or part of a practice²



14% of AGPT[†] Program participants would like to own their own practice

18% would like to purchase or buy into an existing practice¹⁷



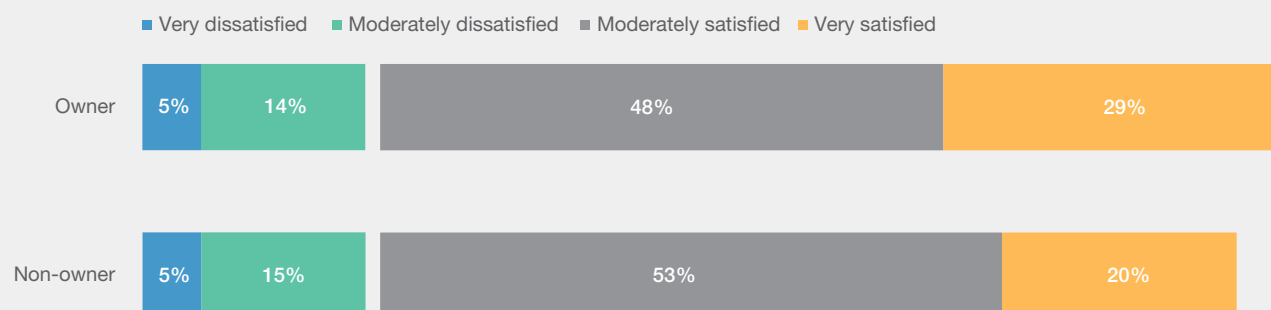
50% of owners are concerned about the long-term viability of their practice²



43% of owners and **57%** of non-owners report they can maintain a good work-life balance²

[†]AGPT = Australian General Practice Training Program

Practice owners are more satisfied with their career than non-owners



Measure: Responses to the question, 'Taking everything into consideration, how do you feel about your work?' by ownership status.

Base: n = 1386.

Source: EY Sweeney. RACGP GP Fellow survey. May 2021.

General practice training

Interest among medical graduates in entering the AGPT Program has been in decline; however, the 2021 round saw the highest number of applicants since 2017.

79%

of poll respondents indicated the best way to attract more medical graduates to general practice is to increase remuneration for the profession¹⁸

15.2% ↓

The proportion of final-year medical students listing general practice as their first preference specialty has fallen to 15.2%¹⁹

The most common reasons for choosing to become a specialist GP are:



Hours and working conditions



Diversity of patients and medical presentations



Building long-term relationships with patients¹⁷

31%

of surveyed GPs in training report undertaking additional employment²⁰

View the full report at www.racgp.org.au/hotn

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