



Australian General Practice Training Program

National report on the 2018 National Registrar Survey

Rebecca Taylor, Leyna Clarke & Daniel Edwards

Australian Council *for* Educational Research

December 2018



Acknowledgements

The authors would like to acknowledge the support of the Department of Health in undertaking this project. We also thank the Regional Training Organisations for their invaluable work in promoting the survey and fieldwork throughout the 2018 National Registrar Survey. Most importantly, we acknowledge and thank all the registrars who participated in the survey for giving their time and sharing their experiences.



Table of Contents

Acknowledgements	2
Acronyms and abbreviations	4
Executive summary	5
Infographic summary of results	7
Setting the Scene	8
Background and context	8
Project overview	9
Methodology	10
2018 AGPT NRS findings	10
Survey representativeness, respondent characteristics and training contexts	10
Overall satisfaction	18
Satisfaction by Key Performance Indicators	19
Satisfaction with training facilities	21
Rural training pathway	22
Health and wellbeing	23
Aboriginal and Torres Strait Islander Health	25
Registrars' training choices	26
Registrars' future plans	27
Appendix A: Table of Figures	29
Appendix B: Table of Tables	29
Appendix C: 2018 AGPT NRS item frequencies	31
Appendix D: 2018 AGPT NRS Instrument	43
Appendix E: Accessible text alternatives for figures	58
Infographic text alternative	58
Text alternative for Figures	60



Acronyms and abbreviations

Acronym	Meaning
ACER	Australian Council for Educational Research
ACRRM	The Australian College of Rural and Remote Medicine
ADF	Australian Defence Force
AGPT	Australian General Practice Training
AGPT RSS	Australian General Practice Training Registrar Satisfaction Survey
AGPT NRS	Australian General Practice Training National Registrar Survey
AMA	Australian Medical Association
AMC	Australian Medical Council
AMG	Australian Medical Graduate
ARST	Advanced Rural Skills Training
AST	Advanced Specialised Training
the Department	The Commonwealth Department of Health
FRACGP	Fellowship of the Royal Australian College of General Practitioners
FACRRM	Fellowship of the Australian College of Rural and Remote Medicine
FARGP	Fellowship in Advanced Rural General Practice
FTE	Full -time equivalent
GP	General Practice or General Practitioner (depending on context)
GPET	General Practice Education and Training Limited
GPRA	General Practice Registrar Australia
GPSA	General Practice Supervisors Australia
GPT	General Practice Term
HECS	Higher Education Contribution Scheme
IMG	International Medical Graduate
KPI	Key Performance Indicator
PGPPP	Prevocational General Practice Placements Program
PRRT	Primary Rural and Remote Training
RACGP	The Royal Australian College of General Practitioners
RIDE	Registrar Information Data Exchange
RTO	Regional Training Organisation
RTP	Regional Training Provider



Executive summary

The Australian General Practice Training National Registrar Survey (AGPT NRS) is an annual, national survey of GP registrars currently training in the AGPT program. It collects information via an online questionnaire about registrar satisfaction, experience and future career plans. It also collects information about registrars' demographics and training contexts and other aspects of their training experience. This survey is part of the Department of Health's (the Department) monitoring and quality improvement activities. The information collected in the AGPT NRS can be used to assure the quality of training provision in the program, enables continuous improvement and allows responses to be benchmarked nationally. This survey was previously known as the AGPT Registrar Satisfaction Survey (AGPT RSS).

From July 31 to September 7 2018, the Australian Council for Educational Research (ACER) administered the AGPT NRS to registrars enrolled in active training on the AGPT program across 11 training regions and nine regional training organisations in Australia. Around 4000 registrars were invited to reflect on their recent training experience in Semester One, 2018. 1695 registrars responded to the survey, representing an overall response rate of 42 per cent. The response rate for registrars within each training region ranged from 35 to 50 per cent. The national response rate was sufficient to yield reliable results at a national level, with most of the Key Performance Indicators described in the report offering accuracy (at the 95 per cent confidence level) within two per cent of the reported average scores.

Registrars were asked to reflect on their overall experience, and their experience with their RTO and training facility. Overall, registrars reported high levels of satisfaction.

Overall levels of satisfaction continue to increase from the large dip witnessed in 2016, but are still down on the levels seen from 2013 to 2015. In 2018:

- 90 per cent of registrars were satisfied with the overall education and training
- 85 per cent were satisfied with the overall support
- 87 per cent were satisfied with the overall administration.

In terms of registrars' satisfaction with their **RTO**:

- 90 per cent of registrars were satisfied with their overall training and education
- 89 per cent were satisfied with the training advice they received
- 91 per cent were satisfied with the induction and orientation they received
- 90 per cent were satisfied with the support they received to meet the training requirements of RACGP while significantly fewer (68%) were satisfied with the support they received to meet ACRRM training requirements (although satisfaction has increased from only 55 in 2017).

When asked to reflect on their experience with their **training facility**:

- 93 per cent of registrars were satisfied with the overall training and education they received
- 91 per cent were satisfied with the supervisor support
- 97 per cent were satisfied with the clinical work
- 96 per cent were satisfied with the level of workplace responsibility as well as the number of patients or presentations.

When asked about the best aspects of their training, registrars most commonly mentioned themes including workshops or education days, their practice workplace and colleagues, supervisors or supervision and gaining exposure to a broad range of cases or patients. When asked to describe the aspects of their training that needed improvement, the most commonly mentioned areas were the same as those mentioned in 2017 and included exam preparation, support and supervision.



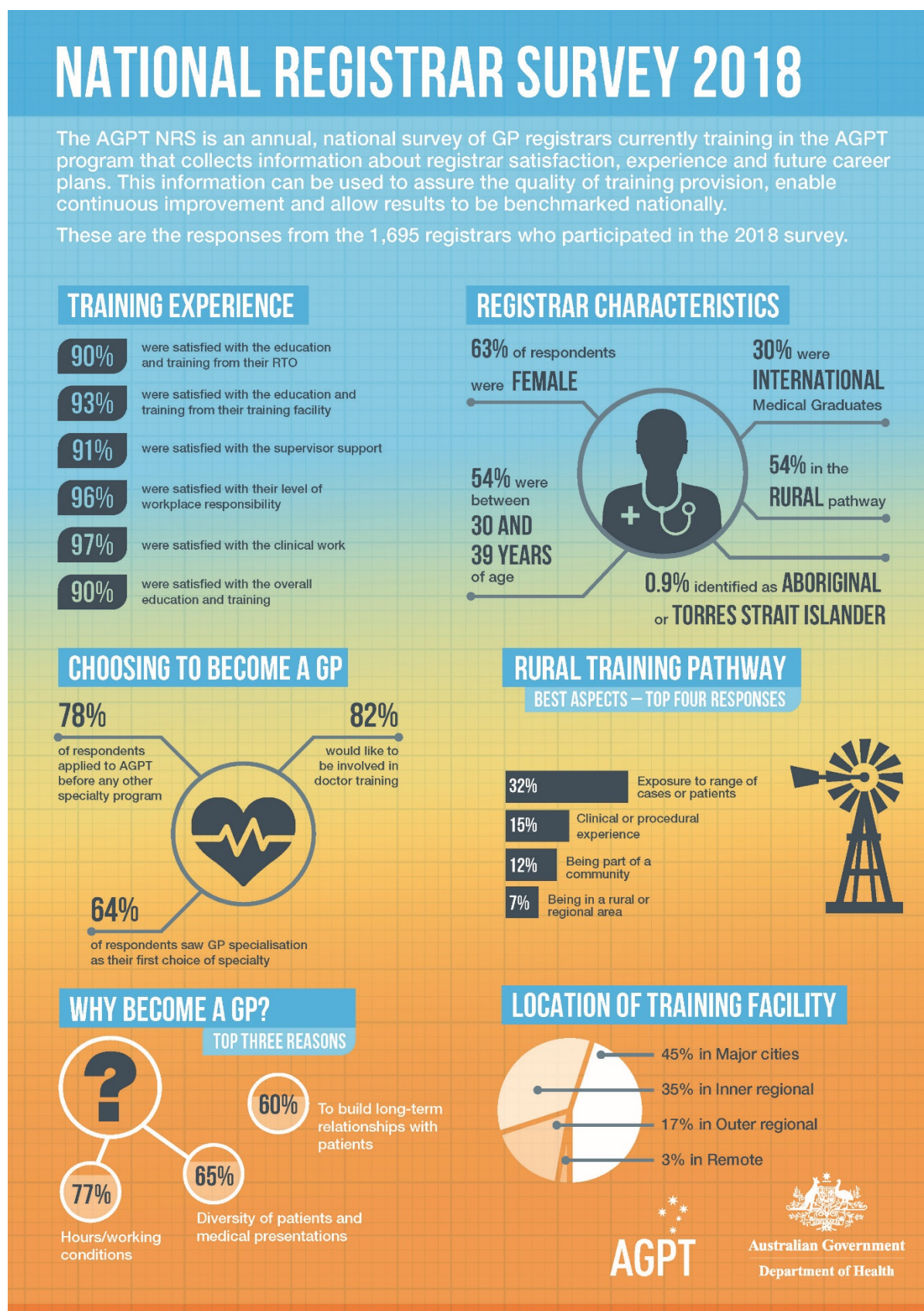
We saw very similar results in 2018 to those found in 2017 when we looked at registrars' health and wellbeing:

- 91 per cent were satisfied with the support they received from their GP supervisor
- 86 per cent were satisfied with the support from their RTO
- 71 per cent of registrars reported having their own GP
- 43 per cent were living away from their immediate family.

Registrars were also asked about their career plans for the next five years. The majority of registrars – 86 per cent – plan to be working as a private GP in five years. Most registrars – 86 per cent – would also like to be involved in training other doctors within the next five years.

We saw interesting results when looking at the intent of registrars to be working in a rural or remote location in five years' time. When we looked at the responses given by registrars in the rural or general pathway streams, 36 per cent of those in the rural pathway intend to work in a rural or remote location in five years' time while only 11 per cent of those in the general pathway have this same intention.

Infographic summary of results



[Long text alternative for infographic summary.](#)



Setting the Scene

Background and context

General practitioners (GPs) are a vital part of Australia's health care system. GPs care for a broad range of patients, with broad health needs, and are usually the first point of call Australians make for their health needs. The GP's role is described by the Royal Australian College of General Practitioners (RACGP) as providing 'person centred, continuing, comprehensive and coordinated whole person health care to individuals and families in their communities'¹. The term general practice is described by the Australian College of Rural and Remote Medicine (ACRRM) as 'the doctor with core responsibility for providing comprehensive and continuing medical care to individuals, families and the broader community.'²

These definitions underpin the training that each registrar undertakes as part of the Australian General Practice Training (AGPT) program. There are a number of different organisations involved in administering the AGPT program in Australia, including the two Colleges and nine regional training organisations (RTOs) who operate across 11 training regions.

RTOs are required to deliver training which meets the standards and requirements of the vocational training programs of either the RACGP and/or the ACRRM. The completion of either college vocational training program leads to a relevant college fellowship, either the Fellowship of the Royal Australian College of General Practitioners (FRACGP) or the Fellowship of the Australian College of Rural and Remote Medicine (FACRRM). Both fellowships are recognised professional qualifications to enable registrars to gain vocational recognition as GPs under the Medicare legislation. Registrars can additionally obtain the RACGP's Fellowship in Advanced Rural General Practice (FARGP). GP registrars are required to undertake the initial part of their training in a hospital environment, after which they go on to complete their core training and required skills training. Training is usually completed over a three or four year full time equivalent (FTE) period, but training time can be extended to accommodate those doctors who wish to train on a part-time basis.

It is important that the training Australia's future GPs receive is educationally relevant, purposeful for all stakeholders and meets the specialist medical training standards of both Colleges as determined by the Australian Medical Council (AMC). Achieving this requires RTOs to deliver training programs that help registrars prepare for FACRRM, FRACGP, or FARGP. The FACRRM and FRACGP are the endpoint of specialist GP training (under the AGPT program) and once completed, these fellowships provide entrance to the specialist GP profession in Australia. In order to ensure that RTOs are delivering training to the standards expected by the Colleges, RTOs undergo an accreditation process every three years. Each College separately undertakes training accreditation of the RTOs, commencing with a joint review process that involves an assessment of training and education systems, training information, education delivery, and training posts and supervisors.

The AGPT National Registrar Survey (AGPT NRS), previously known as the AGPT Registrar Satisfaction Survey (AGPT RSS) is part of the Department of Health's (the Department) monitoring and quality improvement activities. The survey results are used by the Department to monitor registrar satisfaction levels with the vocational training delivered by the RTOs and understand registrars' experience in training.

¹ RACGP. "Becoming a GP in Australia". RACGP. <http://www.racgp.org.au/becomingagp/what-is-a-gp/what-is-general-practice/> (accessed 10 November 2017).

² ACRRM. "Becoming a rural general practitioner". ACRRM <http://www.acrrm.org.au/about-the-college/about-rural-and-remote-medicine/college-definition-of-general-practice> (accessed 10 November 2017).



The survey was first introduced by General Practice Education and Training Limited (GPET) in 2004 and has since been conducted annually.

Project overview

The AGPT NRS is conducted by the Department to enable the continuous improvement of doctor training in the AGPT program. Findings from the survey help ensure that the AGPT program delivered by the nine RTOs across 11 training regions meets the necessary standards and requirements of the Department.

The AGPT NRS is an annual, national survey of GP registrars currently training in the AGPT program. It collects information about registrar satisfaction, experience and future career plans as well as information about registrars' demographics and training contexts and other aspects of their training experience. This information can be used to assure the quality of training provision, enables continuous improvement and – because the same survey is conducted across all RTOs and training regions - allows results to be benchmarked nationally.

In April 2018, the Department engaged the Australian Council for Educational Research (ACER), an independent and not-for-profit research organisation, to review and update the AGPT NRS instrument to ensure it continues to collect information that is relevant to and useful for the Department and other stakeholders while maintaining data that tracks changes in registrars' satisfaction and experience over time. ACER had previously administered the AGPT RSS from 2013 to 2016 and also the rebranded 2017 AGPT NRS.

In 2017, the AGPT NRS went through a major review and revision with detailed consultation from stakeholders including RTOs, RACGP, ACRRM, General Practice Registrars Australia (GPRA), General Practice Supervisors Australia (GPSA), Australian Medical Association (AMA) and representatives from the Department. This workshop involved a discussion of the overall purpose of the survey including its name, a review of the survey instrument, the administration process and the reporting that forms the AGPT NRS. The changes made in 2017 continue to be reflected in the 2018 AGPT NRS.

The 2018 AGPT NRS instrument included a broad range of questions that asked registrars about their experience and satisfaction in the AGPT program. Respondents were asked to reflect particularly on their experience in Semester One, 2018. The 2018 AGPT NRS instrument included questions relating to registrars':

- demographic and training characteristics
- satisfaction with their RTO, training facilities and College³
- health and wellbeing
- involvement in training related to Aboriginal and Torres Strait Islander health
- experience training on the rural pathway
- training choices
- career aspirations and plans.

This report details the background to the project, provides a brief overview of the methodologies employed in the survey collection and explores the outcomes of the 2018 survey. In addition to this National Report, regional reports have been produced for each training region. These regional reports offer RTOs more detail on their registrars' survey responses.

³ Reporting on registrars' satisfaction with their College has been provided to each College and is not included in this report.



Methodology

The target population for the 2018 AGPT NRS included all registrars who were enrolled in the AGPT program who were in active training during Semester One, 2018. Registrars who were on extended leave during this time period, or who were training as a hospital intern (PGY1) or resident (PGY2+) were excluded from the target population.

The Department provided ACER with a population list of all registrars in the target population. This information was extracted from the Department's Registrar Information Data Exchange (RIDE) system. ACER asked RTOs to check the contact details of their registrars, and identify if any registrars had been included or excluded from the population list. This process identified that the full target population for the 2018 AGPT NRS included 4420 registrars (200 more registrars than 2017). During fieldwork, 384 registrars opted out from email and SMS correspondence and were removed from the survey population. The survey was conducted as a census of all registrars in the target population.

As in previous administrations of the survey, the 2018 AGPT NRS was administered wholly online. Fieldwork was conducted between July 31 and September 7, 2018. ACER managed the fieldwork operations in-house, including sending out email and SMS invitations and reminders to registrars. RTOs provided invaluable assistance before and during the fieldwork period to promote the survey to their registrars using marketing materials designed by ACER. Survey responses were returned directly to ACER and stored securely and separately from respondents' personal information to ensure the confidentiality of their responses.

2018 AGPT NRS findings

This section provides an overview of the findings from the 2018 AGPT NRS and provides a snapshot of registrars' experience and satisfaction with their training in Semester One, 2018. Where appropriate, comparisons have been made with results from previous administrations of the survey.

This section reports on the level of response received and the representativeness of the registrars who responded to the 2018 AGPT NRS as well as providing insights into the training contexts of registrars. It then provides an overview of registrars' overall satisfaction, a summary of the Key Performance Indicators (KPI), and a summary of registrars' satisfaction with their RTO and training facility. The findings also include insights into registrars' satisfaction with the health and wellbeing support they receive, their experience of training in Aboriginal and Torres Strait Islander health, the choices they have made in their training, their reasons for choosing their current RTO and fellowship and their future career aspirations.

Response frequencies are given for each item in Appendix C: 2018 AGPT NRS item frequencies, a copy of the questionnaire that was used in the 2018 AGPT NRS is included in Appendix D: 2018 AGPT NRS Instrument and tabular alternatives for the figures included in the report are included in Appendix E.

Survey representativeness, respondent characteristics and training contexts

A total of 1803 registrars commenced the survey. 108 registrars who commenced the survey dropped out before answering any questions relating to their experience or satisfaction with their training. The responses from the remaining 1695 registrars are the focus of this report.

Table 1 shows that the respondents to the survey are representative of the overall population of registrars in the AGPT program. The only difference to note is that there is a higher proportion of registrars with a training status of 'Enrolled' and subsequently a lower proportion of those with a training status of 'Fellowed' among the respondents. This trend was also seen last year.



Overall, a 42 per cent response rate was achieved in the 2018 APGT NRS. This was lower than the response rates achieved in 2016 (51%), 2014 (44%) and 2013 (77%) but higher than the response received in 2015 (37%) and 2017 (40%). The level of response varied by training region from 35 per cent to 50 per cent.

Table 1 shows that 63 per cent of all respondents were female, reflecting the greater proportion of females in the program. Over 90 per cent of registrars were working towards the FRACGP. Eight per cent of registrars were working towards the FACRRM while five per cent towards the FARGP, a Fellowship undertaken in combination with the FRACGP. A small proportion (7%) of registrars were working towards more than one fellowship. This break down is very similar to the respondents from 2017.

Please note, throughout this report to ensure confidentiality, all cells with a count between 1 and 3 are recorded as <4. Also note, not all questions were answered by all registrars who responded to the survey..

Table 1: 2018 AGPT NRS representativeness of respondents with population for different registrar characteristics

Registrar characteristics		Response (n)	Response (%)	Population (n)	Population (%)
All registrars		1695		4036	
Gender	Female	1075	63.4	2489	61.7
	Male	620	36.6	1547	38.3
Indigenous status	Aboriginal or Torres Strait Islander	15	0.9	35	0.9
ADF status	Australian Defence Force	24	1.4	96	2.4
Rural Generalist	Rural Generalist	98	5.8	232	5.7
Age	20 to 29	400	23.6	1060	26.3
	30 to 39	915	54.0	2268	56.2
	40 to 49	310	18.3	586	14.5
	50 plus	70	4.1	122	3.0
Citizenship	Australian Citizen	1265	74.6	3105	76.9
	Australian Permanent Resident	341	20.1	690	17.1
	Australian Temporary Resident	8	0.5	27	0.7
	New Zealand Citizen or Permanent Resident	33	1.9	75	1.9
	Not Specified	48	2.8	139	3.4
Fellowship	FACRRM	93	5.5	206	5.1
	FRACGP	1484	87.6	3580	88.7
	FRACGP & FACRRM	26	1.5	56	1.4
	FRACGP & FACRRM & FARGP	14	0.8	29	0.7
	FRACGP & FARGP	77	4.5	160	4.0
	FRACGP & Grad. Diploma	<4		<4	
	Not specified	<4		<4	
Training Status	Completed Time	5	0.3	28	0.7
	Enrolled	1634	96.4	3685	91.3
	Enrolled (Partially Fellowed)	<4	0.1	8	0.2
	Fellowed	51	3.0	308	7.6



Registrar characteristics		Response (n)	Response (%)	Population (n)	Population (%)
	Uncertain	<4	0.1	<4	0.0
	Withdrawn	<4	0.1	5	0.1
Training region	Eastern Victoria	146	8.6	351	8.7
	Lower Eastern NSW	163	9.6	419	10.4
	North Eastern NSW	251	14.8	628	15.6
	North Western Queensland	199	11.7	458	11.3
	Northern Territory	56	3.3	118	2.9
	South Australia	151	8.9	350	8.7
	South Eastern Queensland	182	10.7	521	12.9
	Tasmania	48	2.8	104	2.6
	Western Australia	153	9.0	373	9.2
	Western NSW	120	7.1	256	6.3
	Western Victoria	226	13.3	458	11.3

The registrars who responded to the 2018 AGPT NRS were from diverse backgrounds. Less than half of all respondents were born in Australia, with 76 other countries making up the country of birth for the other 53 per cent of registrars who responded. After Australia, the most common countries of birth for registrars included India (8%), Sri Lanka (4%), Malaysia (4%) and the United Kingdom (4%). Just under 70 per cent received their medical degrees in Australia. For the registrars who did not graduate in either Australia or New Zealand, international medical graduates (IMG), 52 per cent were working in inner regional areas, 24 per cent in outer regional areas and only 21 per cent in major cities (Figure 1). This compares with registrars who graduated with medical degrees from Australia (AMG) where 55 per cent were working in major cities, 28 per cent in inner regional areas and 14 per cent in outer regional areas. Both AMG and IMG had three to four per cent of graduates working in remote or very remote areas. The difference in the proportions of AMG and IMG working in each area is likely due to the Section 19AB restrictions of the *Health Insurance Act 1973*.⁴ This generally requires doctors who received their training at an international medical school to work in a district of workforce shortage, which tend to be concentrated in regional and remote parts of Australia. The proportion of IMG at each RTO ranges from 14 to 53 per cent.

⁴ Department of Human Services. "Medicare provider number for overseas trained doctors and foreign graduates". <https://www.humanservices.gov.au/health-professionals/services/medicare/medicare-provider-number-overseas-trained-doctors-and-foreign-graduates> (accessed 15 February 2017).



(n=1695)

Figure 1: Proportion of Australian (AMG) and New Zealand (NZMG) medical graduates in different remoteness areas compared with international medical graduates (IMG)

Over 55 per cent of respondents reported having one or more dependents (54% of female and 58% of male respondents). As reported in 2017, in 2018, a much higher proportion of male registrars (86%) indicated that they were working full time compared with female registrars (67%). Of those working full time, 61 per cent reported having no dependents while at least 80 per cent of registrars working three days or fewer per week reported having at least one dependent. Likewise, 88 per cent of registrars who were under 30 years of age were working full time compared with less than 71 per cent in the older age groups.

About one in five registrars had some formal experience of working as a GP through the Prevocational General Practice Placements Program (PGPPP) or a First Wave Scholarship. Many registrars had undertaken training towards another fellowship before starting the AGPT program (18%) while just under 15 per cent of registrars participated in the HECS Reimbursement Scheme.

Registrars were asked about the training they did during Semester One, 2018. Most registrars (84%) were training in just one training facility with less than two per cent of registrars training in three training facilities. The majority, just under 74 per cent of registrars were currently training in General Practice Training (GPT) terms one to three compared with five per cent in Primary Rural and Remote Training (PRRT) terms one to four.

Twenty per cent of registrars indicated that they were training in the areas of Extended Skills, Advanced Rural Skills Training (ARST) or Advanced Specialised Training (AST). These registrars were asked to indicate the area in which this training occurred. The most common areas specified by registrars include Emergency Medicine, Anaesthetics, Obstetrics and Gynaecology, Aboriginal and Torres Strait Islander Health and Dermatology.



Table 2: Registrar training contexts

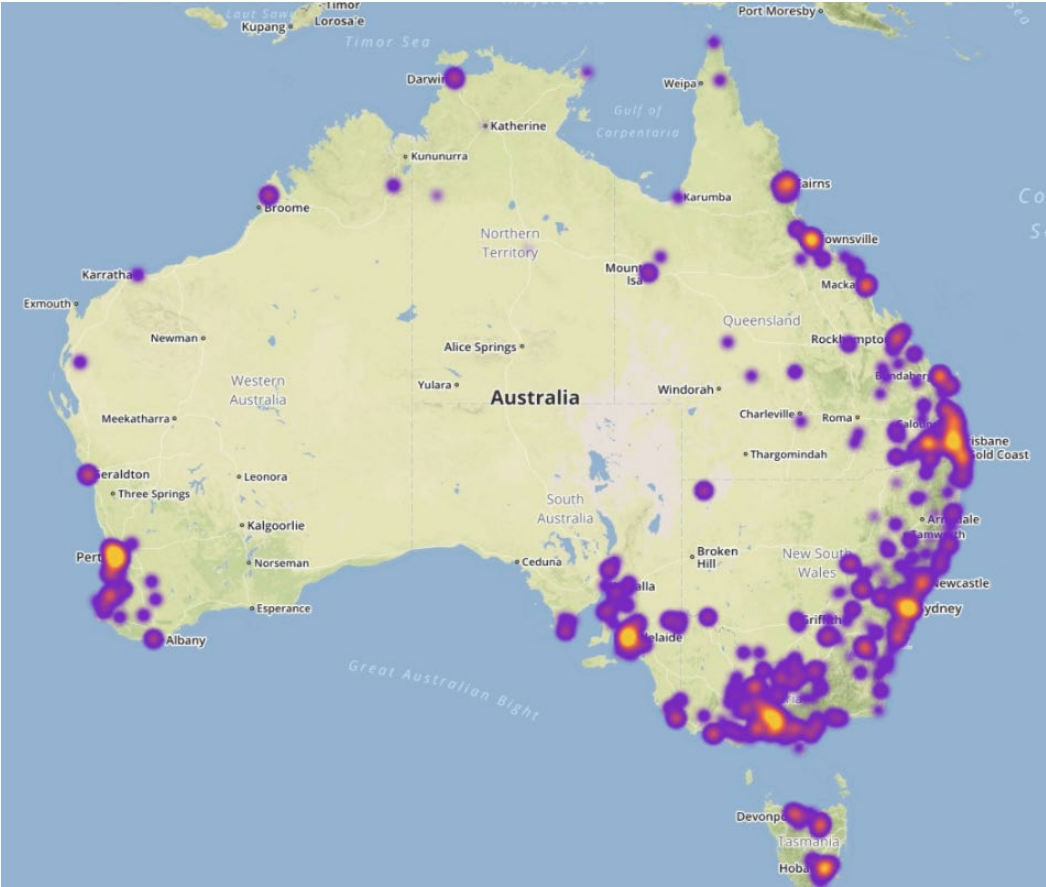
Training contexts		Response (n)	Response (%)
Full time equivalent load	Less than 0.4	65	3.8
	0.5 to 0.6	238	14.1
	0.7 to 0.8	143	8.5
	0.9 to 1.0	1244	73.6
Number of training facilities	One	1414	84.1
	Two	240	14.3
	Three	28	1.7
Completed prior to training	Prevocational General Practice Placements Program (PGPPP)	256	18.2
	Training towards any other fellowship	236	17.5
	HECS Reimbursement Scheme	196	14.7
	Bonded Medical Placements (BMP) Scheme	194	14.4
	Commonwealth Medical Internships	181	13.7
	John Flynn Placement program	124	9.3
	Medical Rural Bonded Scholarship (MRBS) Scheme	81	6.2
	Rural Australia Medical Undergraduate Scholarship (RAMUS)	80	6.1
	State rural generalist programs	63	4.8
	First Wave Scholarship (GP placement in the undergraduate years)	58	4.4
	Community Residency Placement (WA)	25	1.9
	Rural Health Multidisciplinary Training program	11	0.8
	Remote Vocational Training Scheme	8	0.6
Current training	GPT1 Term	597	35.2
	GPT2 Term	174	10.3
	GPT3 Term	475	28.0
	PRRT1	34	2.0
	PRRT2	9	0.5
	PRRT3	25	1.5
	PRRT4	13	0.8
	Extended Skills	270	15.9
	Advanced Rural Skills Training (ARST)	30	1.8
	Advanced Specialised Training (AST)	41	2.4
	Academic post	12	0.7
	GPT4 / Extension Awaiting Fellowship	119	7.0

(n=1695)

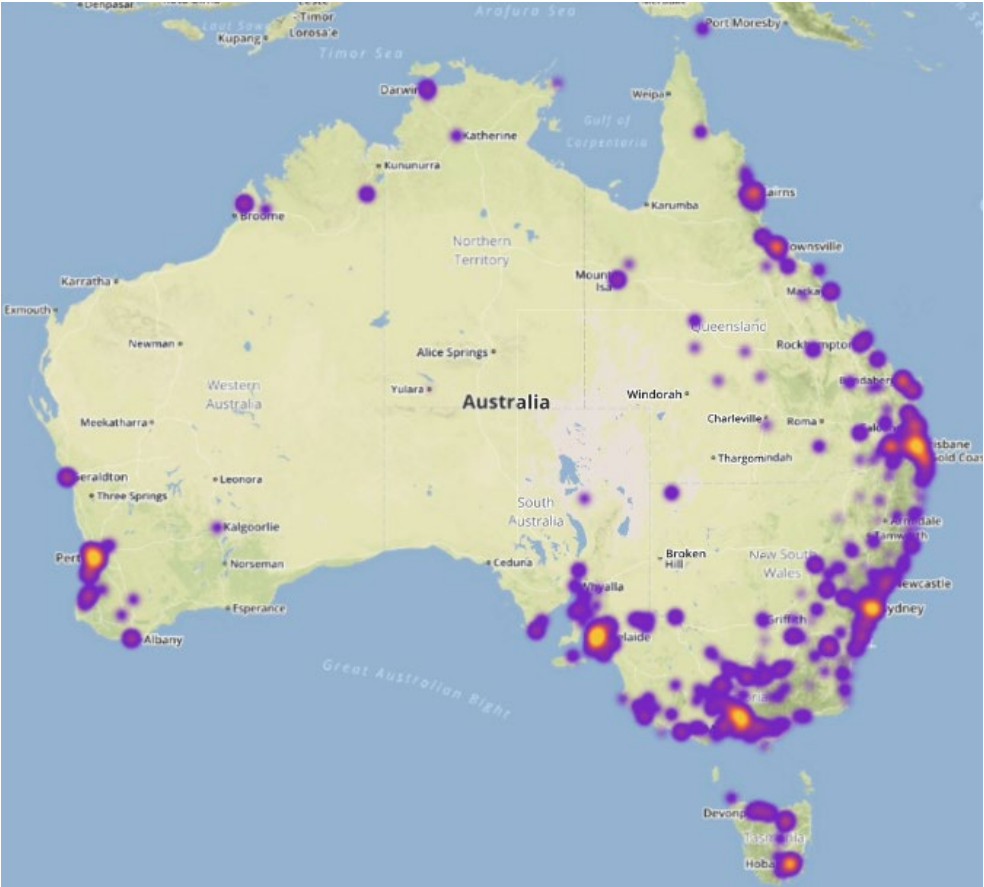
The majority of registrars were training in New South Wales, Queensland and Victoria and this is similar to the results seen in 2017 (Figure 2). Just over half of the registrars who responded to the 2018 AGPT NRS were training in regional or remote areas of Australia, relatively consistent with registrars who responded to the survey in previous years (Figure 3).



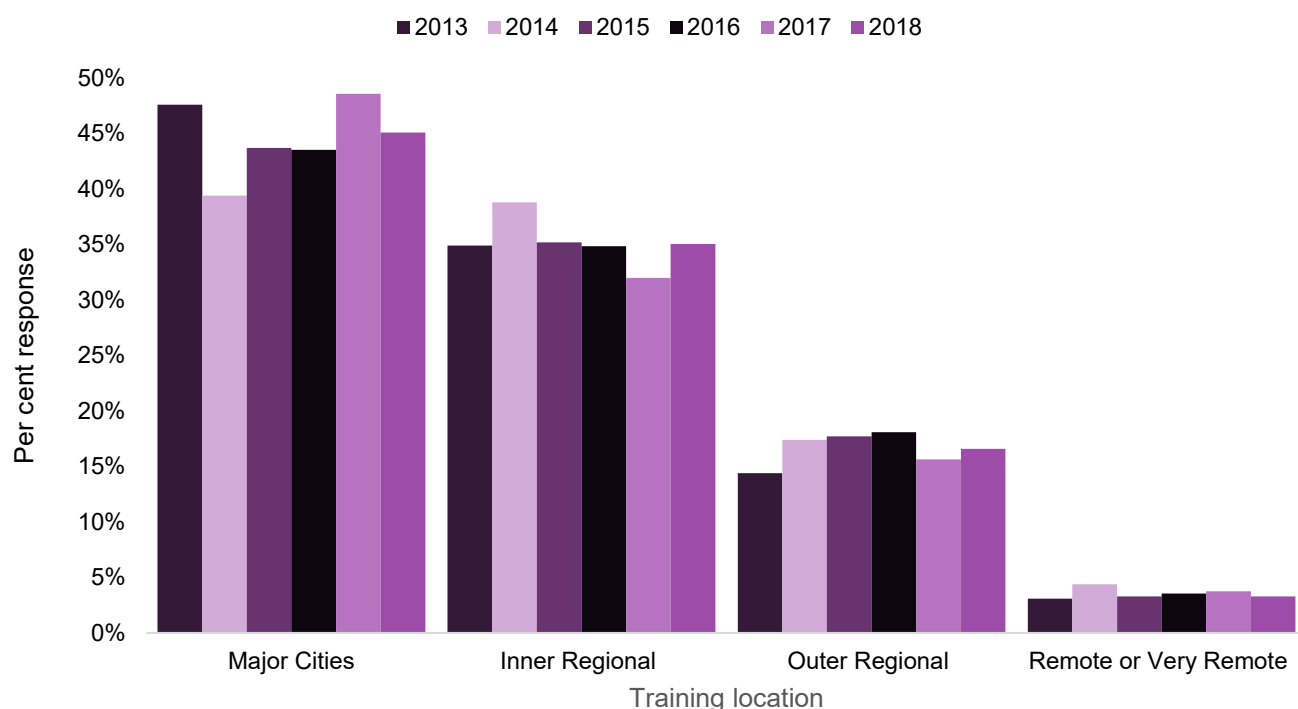
Figure 2: Heat maps comparing the training location of registrars in 2018 (left) and 2017 (right)



(n=1695)



(n=1700)



(2013: n=1942; 2014: n=1256; 2015: n=1226; 2016: n=1659; 2017: n=1700; 2018: n=1695)

Figure 3: Location of registrars' current training facility in 2013, 2014, 2015, 2016, 2017 and 2018

Forty-six per cent of all registrars reported moving to their current region to undertake training. Among female respondents, 42 per cent reported moving while among male respondents 52 per cent reported moving to their current region to undertake training. For those working full time, 49 per cent had relocated for training, while for those working 0.5-0.8 FTE, only 35 per cent had moved to complete training. The proportion of registrars within each training region who had moved to undertake training ranged from between 31 and 71 per cent of respondents. For those registrars working in major cities, only 20 per cent had moved to complete training compared with between 64 and 73 per cent of respondents training in either inner regional, outer regional, remote locations reporting that they had moved to complete training.



(n=1640)

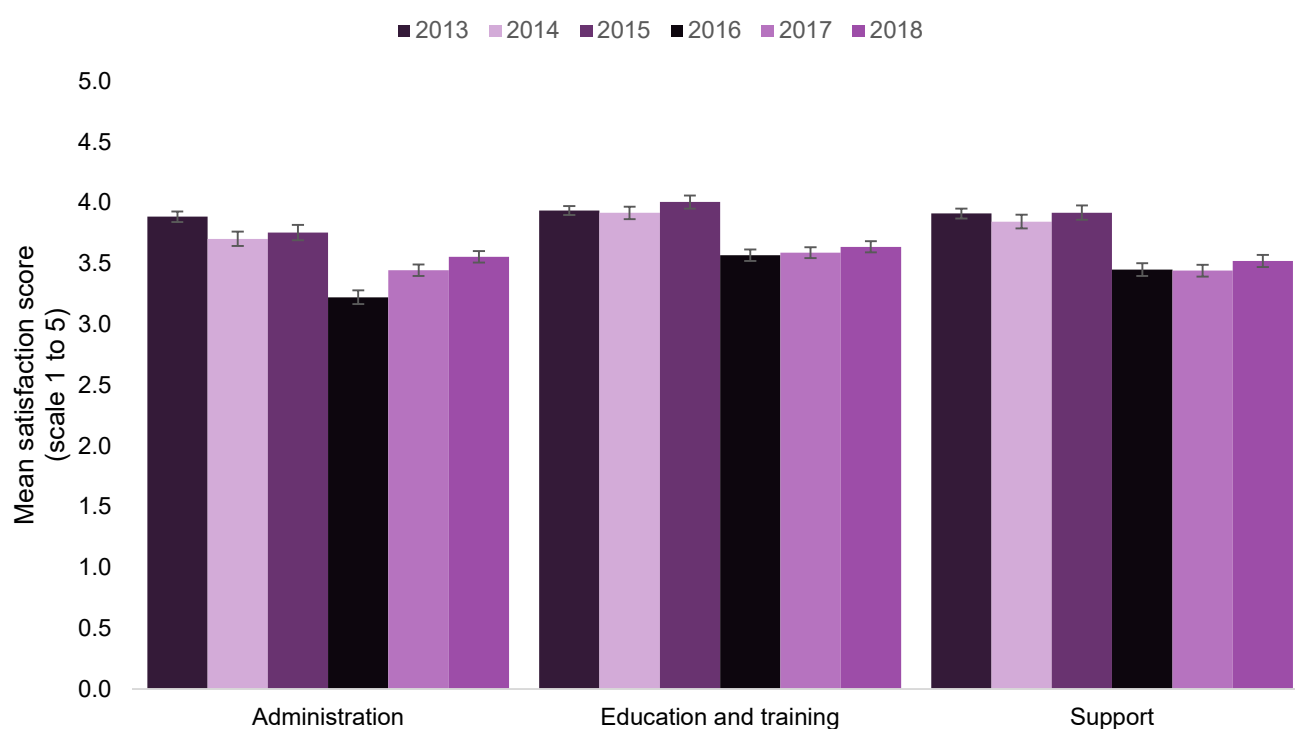
Figure 4: Proportion of registrars who relocated for training by training location



Overall satisfaction

Registrars were asked to reflect on their training to date and to rate their overall satisfaction with the administration of the program, their education and training, and the support. Registrars are relatively satisfied with their overall training experience, particularly with their education and training. Most registrars were satisfied with the program's education and training (90%), administration (87%) and support (85%), numbers that have all increased from the 2017 AGPT NRS.

Figure 5 shows that the overall mean satisfaction score⁵ for administration, education and training, and support significantly decreased in 2016. This coincides with the major reorganisation that took place with training provision at this time. Prior to 2016, training was provided via 17 Regional Training Providers (RTP). These were replaced at this time by the nine RTOs operating across 11 training regions. This drop in satisfaction levels remained constant for both education and training as well as support in 2018, however, there continues to be a small increase with the overall satisfaction of registrars with administration from its low in 2016.



(2013: n=1942; 2014: n=1261; 2015: n=1234; 2016: n=1696; 2017: n=1700; 2018: n=1695)

Figure 5: Mean overall satisfaction of registrars with the AGPT program from 2013 to 2017

When exploring the average rates of overall satisfaction, there are no significant differences found between female and male registrars, Australian Defence Force (ADF) and non-ADF registrars, nor for registrars training in locations (major cities, inner and outer regional and remote and very remote). There are some small significant differences in all three overall categories of satisfaction with respondents in different training contexts and different demographic groups. Rural generalist registrars had lower levels of satisfaction than other registrars. Respondents who were enrolled in and studying towards only the FACRRM reported lower levels of satisfaction than respondents enrolled in and studying towards only the FRACGP. Looking at satisfaction with overall education and training, respondents in the 30 to 39 age group

⁵ Response scores were averaged across the five-point scale with one being very dissatisfied and five being very satisfied.



were less satisfied than those in the 20 to 29 age group, and those who identified as Aboriginal and Torres Strait Islander were less satisfied than non-Indigenous registrars. Finally, looking at the overall satisfaction of support provided, those enrolled and studying towards FACRRM, FARGP, FRACGP & FACRRM, FRACGP & FARGP were all less satisfied than those studying enrolled and studying towards only the FRACGP. Registrars with a part time loading of 0.5 to 0.6 were less satisfied than those with a full time loading of 0.9 to 1.0.

Satisfaction by Key Performance Indicators

The information collected from registrars through the AGPT NRS is used to generate a number of Key Performance Indicators (KPIs) for the Department. These KPIs provide an overview of registrars' level of satisfaction with various aspects of the AGPT program.

A number of the KPIs are composite variables, meaning that they are a combination of registrars' responses to two or more questions in the survey. For these composite variables the percentage of registrars who are satisfied for each question included in the KPI are averaged to create an overall 'per cent satisfied' score.

- KPI 1 is a combination of the overall satisfaction items shown in Table 3 relating to administration, education and training, and support.
- KPI 2 is a combination of seven items relating to support and training provided by RTOs, and is calculated only for registrars who *did not* report that they had an adverse incident during their training.
- KPI 3 is the same as KPI 2, but instead is recorded only for registrars who *did* experience an adverse incident during their training.
- The other composite variable is KPI 6 which includes two variables relating to resources at registrars' RTO and at registrars' training facility.

Although these KPIs have similar names or terminology to some of the other analyses in this report, the KPIs are composite variables and the results will be different from the results for individual items, such as those reported in the [infographic](#).

In this year's report we have calculated the KPIs as we have done in the past, as a summary of satisfaction scores with a '3', '4' or '5 – very satisfied' response in Table 3 and Figure 6.

A summary of the KPIs calculated with a '3', '4' or '5 – very satisfied' response are shown in Table 3 along with their error margins reported at a 95 per cent confidence interval. The KPIs for 2018 are statistically reliable to within less than 2 percentage points, apart from KPI 3 which is statistically reliable to within 5.2 percentage points.

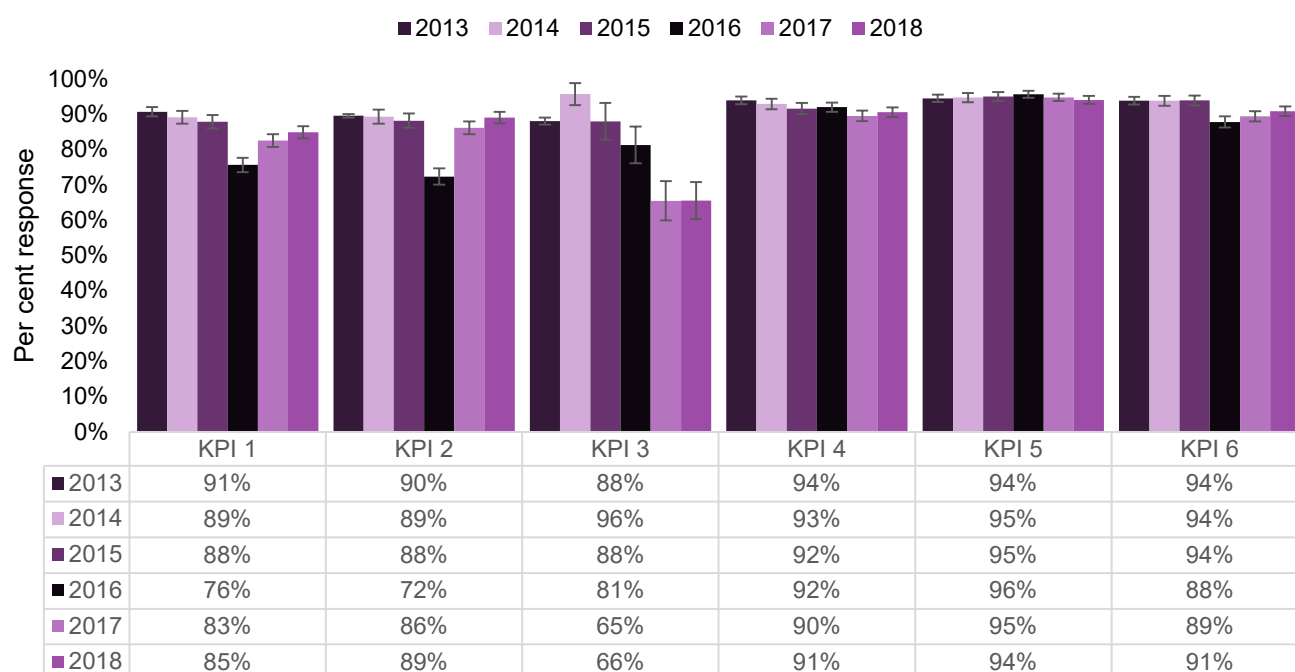


Table 3: Key Performance Indicators 2018

Key Performance Indicators	Satisfied (%)	Error margin (%)
KPI 1: Overall satisfaction*	85	± 1.7
KPI 2: Satisfaction with RTO support (no incident)*	89	± 1.7
KPI 3: Satisfaction with RTO support (with incident)*	66	± 5.2
KPI 4: Satisfaction with supervision	91	± 1.4
KPI 5: Satisfaction with practice location	94	± 1.1
KPI 6: Satisfaction with infrastructure / resources*	91	± 1.4

Figure 6 shows the KPI results from the 2013, 2014, 2015, 2016 AGPT RSS and the 2017 and 2018 AGPT NRS calculated from responses of '3', '4' or '5 – very satisfied'. KPIs slightly increased by one to three percentage points from last year with the exception for KPI 5 Satisfaction with practice location which had a minor drop of less than one percentage point. Results for KPI 3, satisfaction with RTO support (with incident) continue to remain significantly lower in 2018 than from the years 2013-2016.

KPI 6 is still significantly lower in 2018 than earlier administrations of the AGPT RSS (2013-2015) while KPI 1, with a small increase from 2017, is now only significantly smaller than 2013 and 2014. This suggests that in 2018 registrars are somewhat less satisfied with RTO support (when there has been an incident) and the infrastructure and resources than in previous years (from 2013 to 2015).



(2013: n=1942; 2014: n=1261; 2015: n=1234; 2016: n=1696; 2017: n=1700; 2018: n=1695)

Figure 6: Key Performance Indicators from the years 2013 to 2018



Satisfaction with training facilities

Training facilities have an important role in registrars' training experience. The 2018 AGPT NRS included several questions that asked registrars about their satisfaction with various aspects of their training facility.

The results suggest that registrars are very satisfied with their experience in their training facilities, with registrars reporting average satisfaction scores of between 3.9 and 4.2 on a five point scale. As shown in Figure 7, in 2018, registrars are most satisfied with the number of patients or presentations, the clinical work as well as the induction and orientation from their training facility.

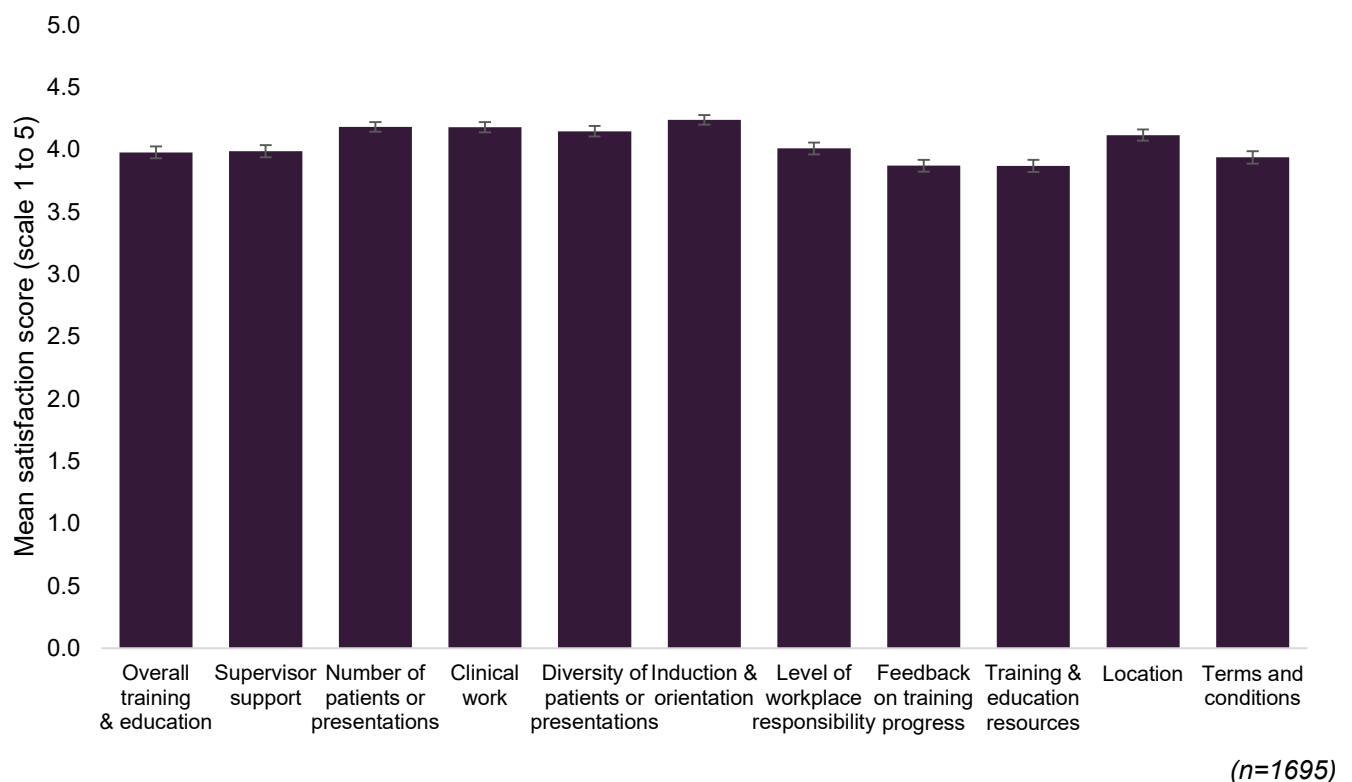


Figure 7: Satisfaction with different aspects of training facilities



Rural training pathway

54 per cent of respondents indicated that they were training on the rural pathway. These registrars were asked what they considered the best aspects of training on the rural pathway (Table 4) and what aspects they considered needed improvement (Table 5). As in 2017, in 2018 the most common response given as the best aspect of the rural pathway was registrars' exposure to a range of cases or patients (reported by 32% of respondents, it was 44% in 2017). Registrars' practice location dropped from being the second most commonly given best aspect of the rural pathway in 2017 (reported by 19% of respondents) to eighth with only four per cent mentioning it as a best aspect of the rural training pathway in 2018. While looking at the areas of the rural training pathway that need the most improvement, this was more varied with the most commonly cited reason being lack of support (8).

Table 4: Best aspects of the rural training pathway

Best aspects	Per cent (%)
Exposure to range of cases or patients	32
Clinical or procedural experience	15
Being part of a community / Community feeling	12
Rural / Region	7
Other	6
Autonomy / Level of responsibility	6
Patients	6
Practice location	4
Working in a hospital	4
Developing skills / increasing confidence	4
Practice workplace and colleagues	4

(n=940)

Table 5: Aspects of the rural training pathway that need improvement

Needs improvement	Per cent (%)
Lack of support	8
Nothing	7
Other	7
Workshops or education days	5
Extended Skills or Advanced Specialised Training	5
Amount of training or training availability	5
Workload or working hours	5
Supervision or supervisor	4
Location or travel	4
Expensive or Cost	3
Terms and conditions or pay	3

(n=1030)

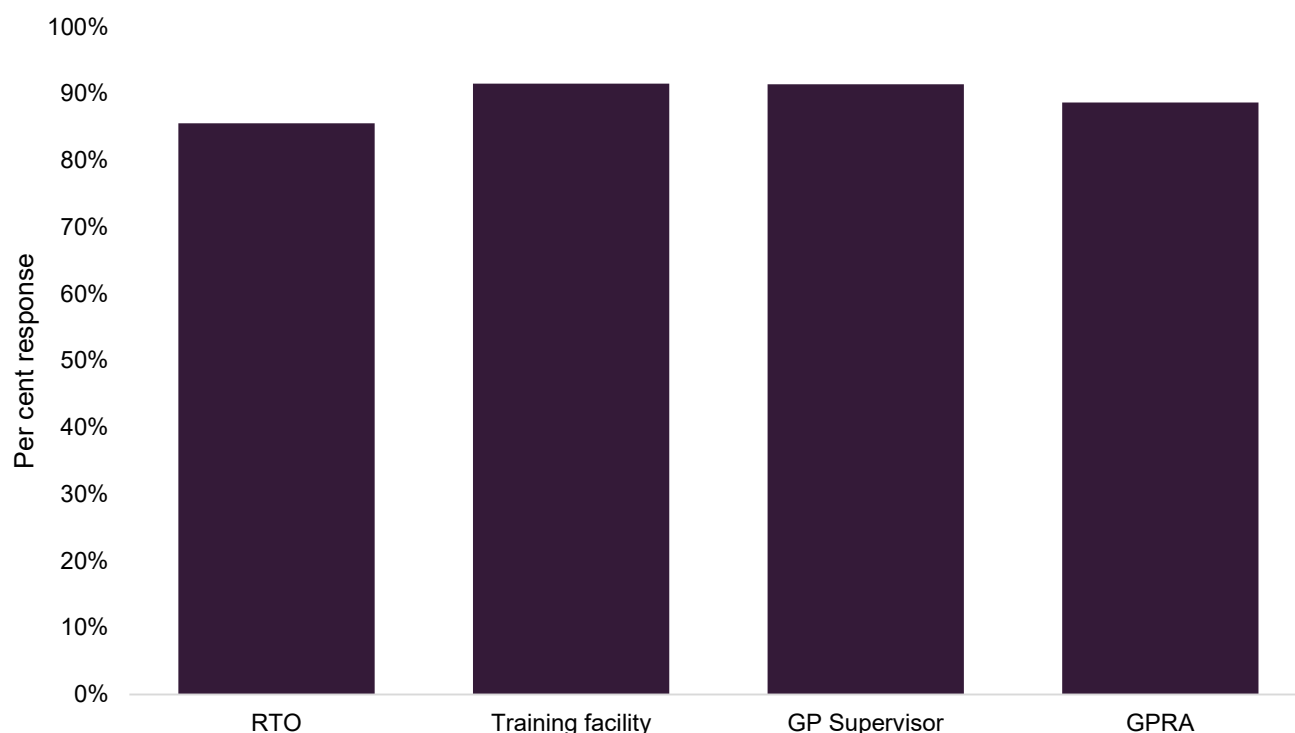


Health and wellbeing

In 2018, registrars were asked a series of questions regarding their health and wellbeing. As in 2017, over 90 per cent of registrars were satisfied with the health and wellbeing support they received from their GP Supervisor and training facility (Figure 8).

Just over 70 per cent of all registrars have their own GP⁶ while 43 per cent of registrars reported living away from their immediate family. Registrars who have dependents are considerably less likely to be training away from home (30 per cent with dependants compared with 57 per cent with no dependents). Only 40 per cent of registrars who were enrolled in and studying towards only the FRACGP were living away from home compared with 55 per cent of those enrolled and studying only towards only the FACRRM.

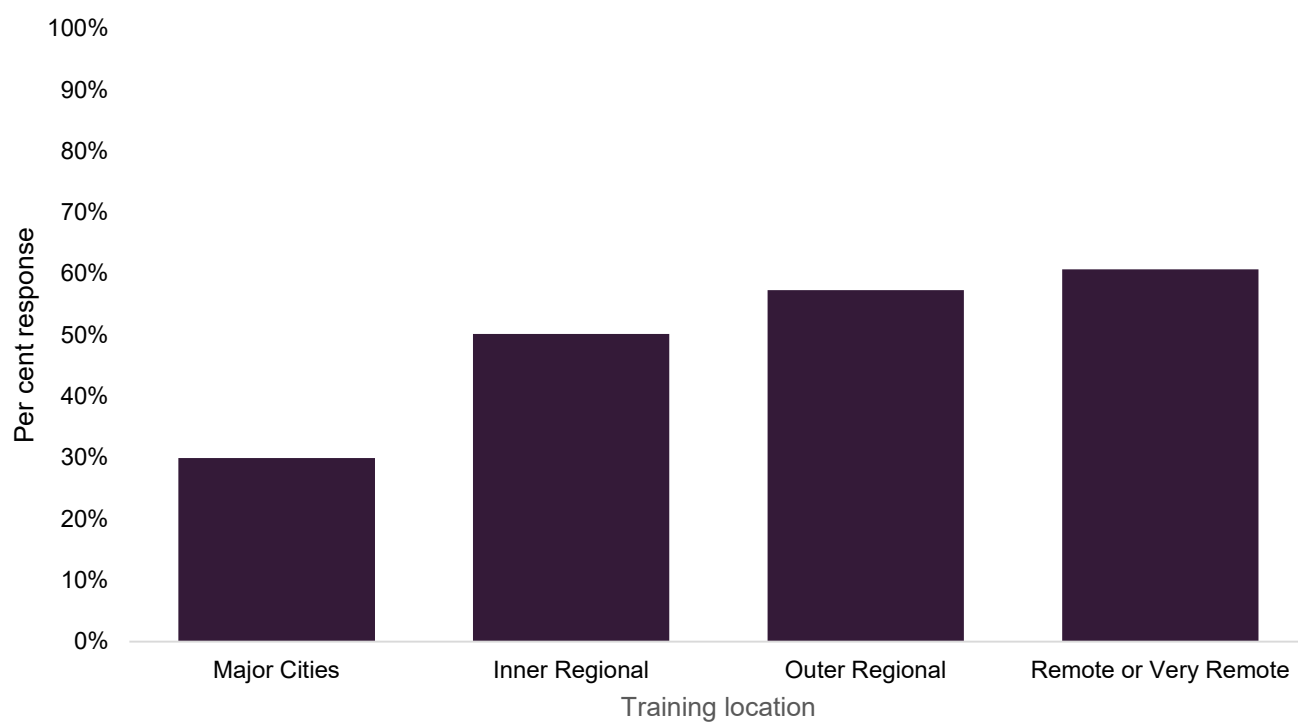
The proportion of registrars training away from their home is significantly greater among registrars training outside major cities (Figure 9). However, as in 2017, in 2018 training away from home appears to have no significant impact on a registrar's satisfaction with their RTO or training facility other than with their satisfaction with the location of their training facility.



n=1641

Figure 8: Satisfaction with health and wellbeing support by source of support

⁶ For example: <http://dhas.org.au/wellbeing/having-our-own-gp.html>, accessed 9 November, 2018



n=1637

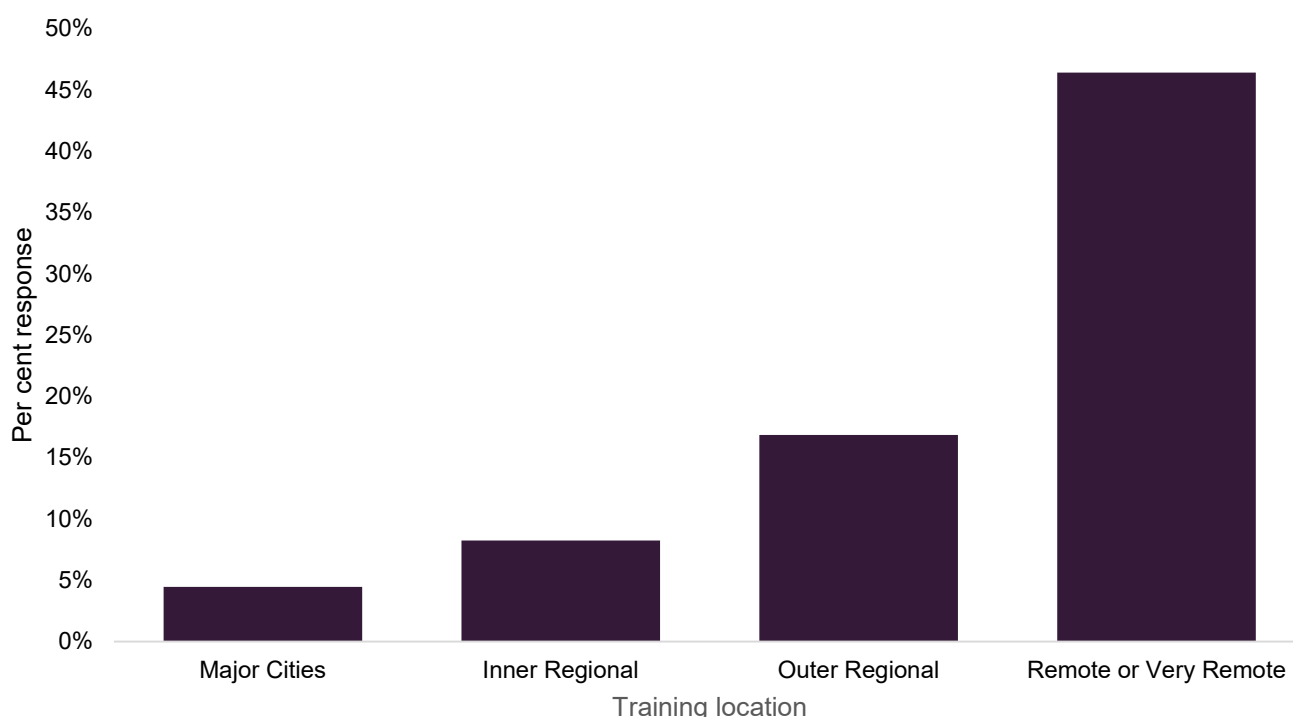
Figure 9: Proportion of registrars training away from home by location



Aboriginal and Torres Strait Islander Health

Registrars were asked a number of questions relating to their experience, future plans and their support in working in Aboriginal and Torres Strait Islander Health. Just over one per cent of registrars were currently undertaking Extended Skills or AST in Aboriginal or Torres Strait Islander Health, while nine per cent of registrars were currently training in an Aboriginal health training post (for example an Aboriginal Medical Service or Aboriginal Community Controlled Health Service). These figures are relatively unchanged from 2017.

As shown in Figure 10, of all registrars training in remote or very remote regions of Australia, 46 per cent are training in an Aboriginal health training post. In contrast, the proportion of registrars training in an Aboriginal health training post in all other regions ranges from a much lower four to 17 per cent. Twelve per cent of registrars reported that they have already completed training in an Aboriginal health training post while 29 per cent of registrars are considering this training.



n=1631

Figure 10: Proportion of registrars training in an Aboriginal training post by location

Over 90 per cent of registrars have had an orientation to Aboriginal and Torres Strait Islander health and training in Aboriginal and Torres Strait Islander cultural safety. For those registrars training in an Aboriginal health training post, 71 per cent have access to a formal cultural mentor (an increase from 58% in 2017) and of these, over 97 per cent are satisfied with this support.

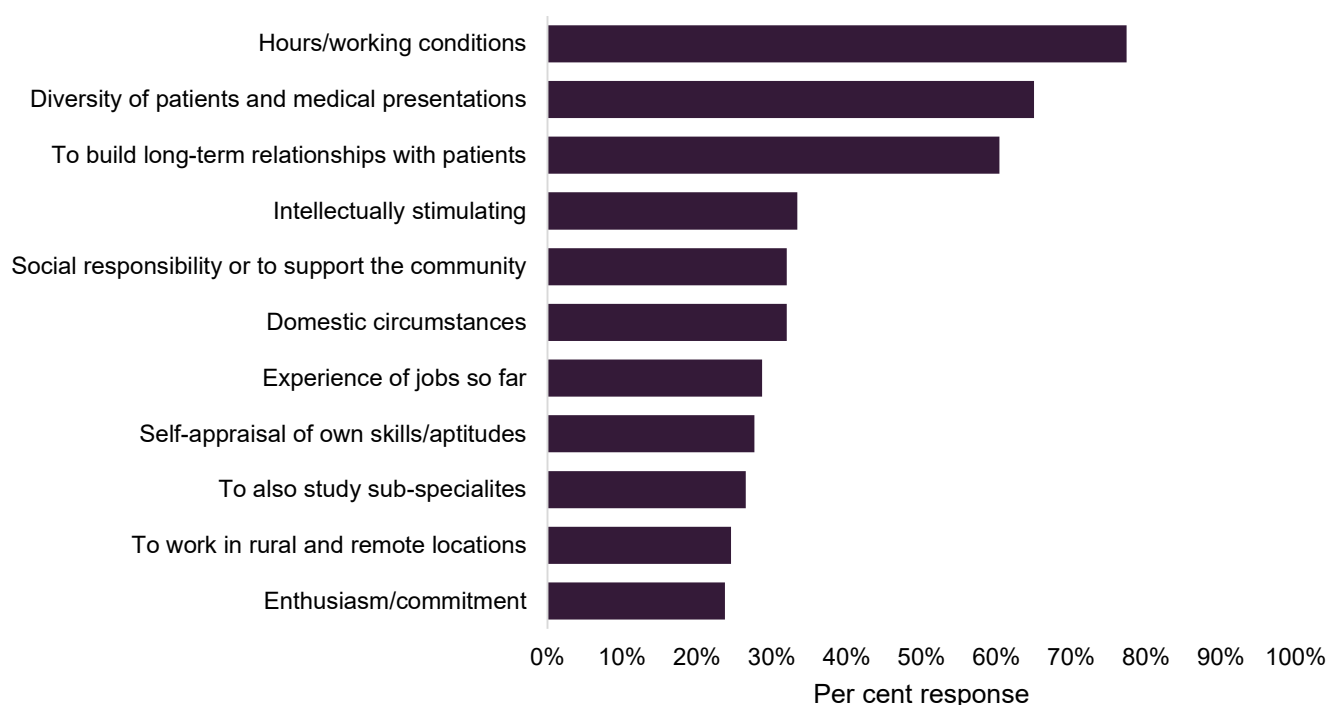


Registrars' training choices

In the 2018 AGPT NRS, registrars were asked a series of questions about when and why they decided to become GP Specialists, whether GP Specialisation was their first choice and which other speciality programs they applied to before joining the program.

Most registrars indicated that they decided to become GP specialists after they had completed their medical degree (69%) and GP specialisation was reported as the first choice of medical specialisation for 64 per cent of registrars. Twenty-two per cent of registrars indicated that they had applied to other speciality programs prior to starting the AGPT program, these included Basic Physician Training, Emergency Medicine, Paediatrics, Surgical Training, Obstetrics and Gynaecology, and Anaesthesia.

The top three responses for why registrars decided to become GP specialists given in 2017 remained the same in 2018 (Figure 11). These reasons included the hours and working conditions for this speciality (77%), the diversity of patients and medical presentations (65%), as well as the ability to build long-term relationships with patients (60%). Only options with more than 20 per cent response are shown in Figure 11.



n=1695

Figure 11: Why registrar's decided to become GP specialists (for responses over 20%)



Registrars' future plans

Registrars were asked about their career plans five years into the future and were asked to select all options that relate to their future plans (Table 6). The responses indicate that most registrars plan to be working as a GP. A total of 86 per cent of registrars plan to work as a private GP with 42 per cent of registrars indicating they plan to be working full time and 48 per cent working part-time. Consistent with the results we found in 2017, in 2018, female registrars planning to work as a private GP are much more likely to be planning to work part-time (60%) than male registrars (31%). Also interesting, in the next five years, 25 per cent of male registrars expect to purchase or buy into an existing practice compared with only 13 per cent of female registrars.

When we looked at the responses given by registrars in the rural or general pathway streams, 36 per cent of those in the rural pathway intend to work in a rural or remote location in five years' time while only 11 per cent of those in the general pathway have this same intention; 16 per cent of those in the rural pathway intend to be working in Aboriginal Health in five years time compared with only 10 per cent of those in the general pathway; and 46 per cent of those in the rural pathway intend to be working full time as a GP compared with only 37 per cent of those in the general pathway. Conversely, 55 per cent of those registrars in the general pathway intend to be working part-time as a private GP in five years time compared with 42 per cent of those in the rural pathway.

The majority of registrars (82%) indicated that within five years they would like to be involved in medical education, either supervising medical students, registrars or becoming a medical educator.

Encouragingly, only two per cent of registrars indicated that they do not plan to be working as a GP in five years. Many registrars who plan to be doing something else are instead planning to be working in hospital-based specialty training, public health or academic research.

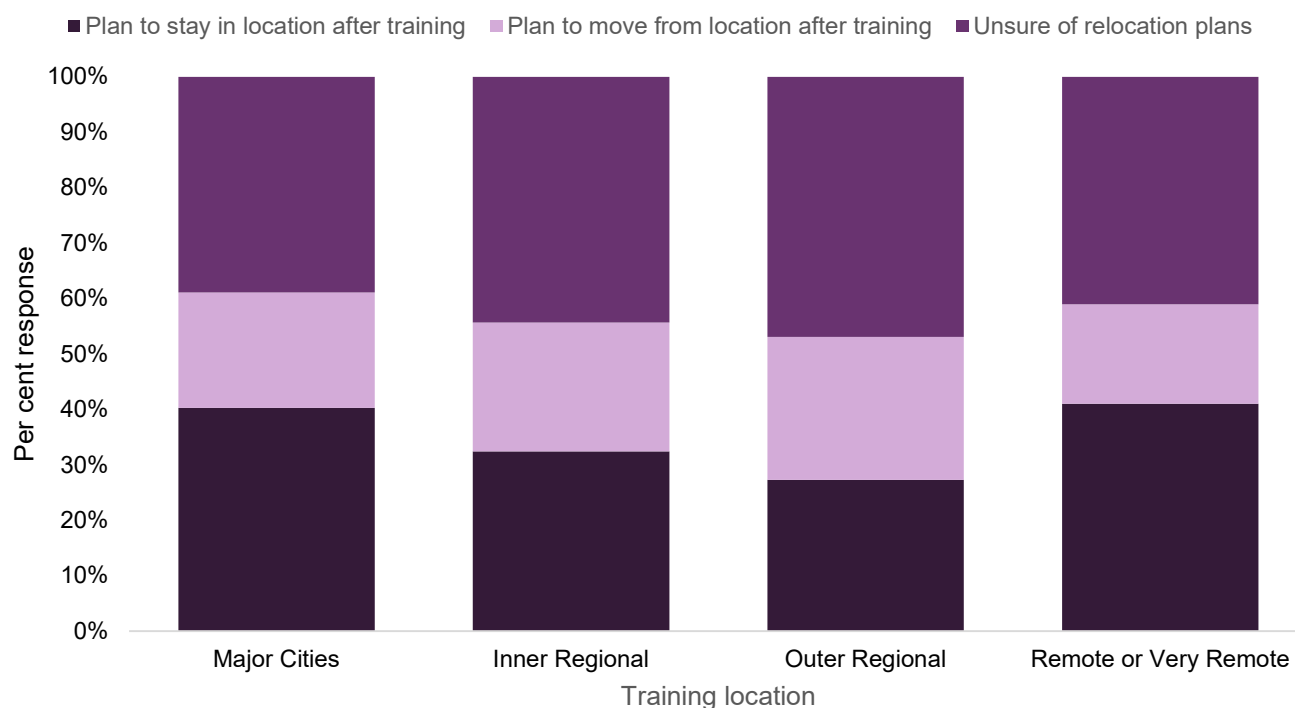
Table 6: Career plans in five years' time

Career plans	Per cent (%)
Working full time as a private GP	41.9
Working part-time as a private GP	48.1
To own their own practice	17.2
To purchase or buy into an existing practice	21.2
Working in Aboriginal Health	12.7
Working as a GP in another setting (e.g. aged, palliative, home care)	19.5
Working in a rural or remote location	24.2
Not working as a GP	2.4

(n=1695)



The 46 per cent of registrars who moved to their current location to undertake training were asked about their plans to remain in or relocate from their current location after completing the AGPT program. When asked about their current plans, one third of these registrars said they plan to stay in their current location, 23 per cent plan to relocate after completing their training and 44 per cent are unsure. As shown in Figure 12, among the registrars that moved to their current location to undertake training, similar proportions training in major cities, regional or remote areas plan to remain in their current region after completing their training.



n=747

Figure 12: Registrars who have moved for training intentions to remain or leave current region by location



Appendix A: Table of Figures

Figure 1: Proportion of Australian (AMG) and New Zealand (NZMG) medical graduates in different remoteness areas compared with international medical graduates (IMG)	13
Figure 2: Heat maps comparing the training location of registrars in 2018 (left) and 2017 (right)	15
Figure 3: Location of registrars' current training facility in 2013, 2014, 2015, 2016, 2017 and 2018.....	16
Figure 4: Proportion of registrars who relocated for training by training location	17
Figure 5: Mean overall satisfaction of registrars with the AGPT program from 2013 to 2017	18
Figure 6: Key Performance Indicators from the years 2013 to 2018	20
Figure 7: Satisfaction with different aspects of training facilities.....	21
Figure 8: Satisfaction with health and wellbeing support by source of support.....	23
Figure 9: Proportion of registrars training away from home by location	24
Figure 10: Proportion of registrars training in an Aboriginal training post by location	25
Figure 11: Why registrar's decided to become GP specialists (for responses over 20%).....	26
Figure 12: Registrars who have moved for training intentions to remain or leave current region by location	28

Appendix B: Table of Tables

Table 1: 2018 AGPT NRS representativeness of respondents with population for different registrar characteristics	11
Table 2: Registrar training contexts	14
Table 3: Key Performance Indicators 2018.....	20
Table 4: Best aspects of the rural training pathway.....	22
Table 5: Aspects of the rural training pathway that need improvement	22
Table 6: Career plans in five years' time.....	27
Table 7: 2018 AGPT NRS item frequencies – demographic and contextual items	31
Table 8: 2018 AGPT NRS item frequencies – satisfaction with RTO	33
Table 9: 2018 AGPT NRS item frequencies – satisfaction with training facility	34
Table 10: 2018 AGPT NRS item frequencies – satisfaction with College.....	36
Table 11: 2018 AGPT NRS item frequencies – overall satisfaction.....	37
Table 12: 2018 AGPT NRS item frequencies – complaints and/or grievance process	38
Table 13: 2018 AGPT NRS item frequencies – adverse event or incidence.....	38
Table 14: 2018 AGPT NRS item frequencies – registrars' health and wellbeing	38
Table 15: 2018 AGPT NRS item frequencies – Aboriginal and Torres Strait Islander health and culture	40
Table 16: 2018 AGPT NRS item frequencies – registrars' training choices.....	40
Table 17: 2018 AGPT NRS item frequencies – choice of RTO	41



Table 18: 2018 AGPT NRS item frequencies – registrars' future plans	42
Table 19: Registrars' current training region (alternative for Figure 2).....	60
Table 20: Location of registrars' current training facility in 2013, 2014, 2015, 2016, 2017 and 2018 (alternative for Figure 3)	60
Table 21: Proportion of registrars who relocated for training by training location (alternative for Figure 4)..	60
Table 22: Mean overall satisfaction of registrars with the AGPT program from 2013 to 2018 (alternative for Figure 5).....	60
Table 23: Key Performance Indicators 2013, 2014, 2015, 2016, 2017 and 2018 (alternative for Figure 6) .	61
Table 24: Satisfaction with different aspects of training facilities (alternative for Figure 7)	61
Table 25: Satisfaction with health and wellbeing support by source of support (alternative for Figure 8)	61
Table 26: Proportion of registrars training away from home by location (alternative for Figure 9)	61
Table 27: Proportion of registrars training in an Aboriginal health training post by location (alternative for Figure 10).....	62
Table 28: Why registrar's decided to become GP specialists (for responses over 20%) (alternative for Figure 11).....	62
Table 29: Registrars who have moved for training intentions to remain or leave current region by location (alternative for Figure 12)	62



Appendix C: 2018 AGPT NRS item frequencies

Table 7 to **Table 18** include the item frequencies for the closed items included in the 2018 AGPT NRS.

Table 7: 2018 AGPT NRS item frequencies – demographic and contextual items

Item	Response options	N	%
In which training region was your GP training delivered in Semester One, 2018?	Eastern Victoria	146	8.6
	Lower Eastern NSW	163	9.6
	North Eastern NSW	251	14.8
	North Western Queensland	199	11.7
	Northern Territory	56	3.3
	South Australia	151	8.9
	South Eastern Queensland	182	10.7
	Tasmania	48	2.8
	Western Australia	153	9.0
	Western NSW	120	7.1
Which fellowship are you currently working towards?	FRACGP	1553	91.6
	FACRRM	126	7.4
	FARGP	93	5.5
At what full time equivalent (FTE) load were you employed during Semester One, 2018?	0.0 to 0.2	24	1.4
	0.3 to 0.4	41	2.4
	0.5 to 0.6	238	14.1
	0.7 to 0.8	143	8.5
	0.9 to 1.0	1244	73.6
In how many training facilities were you employed during Semester One, 2018?	One	1414	84.1
	Two	240	14.3
	Three	28	1.7
What training were you undertaking during Semester One, 2018?	GPT1 Term	597	35.2
	GPT2 Term	174	10.3
	GPT3 Term	475	28.0
	PRRT1	34	2.0
	PRRT2	9	0.5
	PRRT3	25	1.5
	PRRT4	13	0.8
	Extended Skills	270	15.9
	Advanced Rural Skills Training (ARST)	30	1.8
	Advanced Specialised Training (AST)	41	2.4
	Academic post	12	0.7



Item	Response options	N	%
Did you complete any of the following terms prior to commencing the Australian General Practice Training (AGPT) program?	GPT4 / Extension Awaiting Fellowship	119	7.0
	Prevocational General Practice Placements Program (PGPPP)	256	18.2
	Training towards any other fellowship	236	17.5
	HECS Reimbursement Scheme	196	14.7
	Bonded Medical Placements (BMP) Scheme	194	14.4
	Commonwealth Medical Internships	181	13.7
	John Flynn Placement program	124	9.3
	Medical Rural Bonded Scholarship (MRBS) Scheme	81	6.2
	Rural Australia Medical Undergraduate Scholarship (RAMUS)	80	6.1
	State rural generalist programs	63	4.8
	First Wave Scholarship (GP placement in the undergraduate years)	58	4.4
	Community Residency Placement (WA)	25	1.9
	Rural Health Multidisciplinary Training program	11	0.8
	Remote Vocational Training Scheme	8	0.6
<IF YES TO AST, EXTENDED SKILLS, OR ARST> Were you training in any of the following areas of Extended Skills (FRACGP), Advanced Specialised Training (FACRRM) or Advanced Rural Skills Training (FARGP) during Semester One, 2018?	Aboriginal and Torres Strait Islander Health	20	1.2
	Academic practice	8	0.5
	Adult Internal Medicine	5	0.3
	Anaesthetics	24	1.4
	Dermatology	19	1.1
	Emergency Medicine	34	2.0
	Medical Education	11	0.6
	Men's Health	4	0.2
	Mental Health	8	0.5
	Obstetrics and Gynaecology	22	1.3
	Paediatrics	12	0.7
	Palliative Care	9	0.5
	Population Health	5	0.3
	Remote Medicine	<4	0.1



Item	Response options	N	%
	Skin Cancer Medicine	6	0.4
	Small Town Rural General Practice (STRGP)	8	0.5
	Surgery	<4	0.2
	Women's Health	19	1.1
	Other: includes addiction medicine, aged care, military and sexual health	27	1.6
Are you currently training on the rural or general pathway?	Rural pathway	778	45.9
	General pathway	917	54.1

Table 8: 2018 AGPT NRS item frequencies – satisfaction with RTO

Item	Response options	N	%
How would you rate your satisfaction with the following aspects of your RTO in Semester One, 2018?			
Overall training & education quality	Very dissatisfied	52	3.1
	2	121	7.2
	3	328	19.6
	4	777	46.4
	Very satisfied	398	23.7
Training advice	Very dissatisfied	75	4.5
	2	117	7.0
	3	387	23.1
	4	726	43.4
	Very satisfied	369	22.0
Induction and orientation	Very dissatisfied	52	3.2
	2	100	6.1
	3	377	22.9
	4	705	42.8
	Very satisfied	415	25.2
Feedback on training progress	Very dissatisfied	72	4.3
	2	116	7.0
	3	434	26.0
	4	722	43.3
	Very satisfied	323	19.4
Workshops provided	Very dissatisfied	53	3.2
	2	117	7.1
	3	343	20.8



Item	Response options	N	%
Training and education resources	4	666	40.4
	Very satisfied	471	28.5
	Very dissatisfied	49	2.9
	2	104	6.3
	3	360	21.6
	4	737	44.3
Support to meet ACRRM training requirements	Very satisfied	413	24.8
	Very dissatisfied	19	15.3
	2	21	16.9
	3	47	37.9
	4	30	24.2
Support to meet RACGP training requirements	Very satisfied	7	5.6
	Very dissatisfied	62	4.0
	2	95	6.1
	3	339	21.7
	4	681	43.5
Support for examination and assessments	Very satisfied	388	24.8
	Very dissatisfied	84	5.1
	2	140	8.5
	3	466	28.1
	4	620	37.4
	Very satisfied	346	20.9

Table 9: 2018 AGPT NRS item frequencies – satisfaction with training facility

Item	Response options	N	%
How would you rate your satisfaction with the following aspects of your training facility (e.g. your practice, your hospital) in Semester One, 2018?			
Quality of overall training and education	Very dissatisfied	49	2.9
	2	75	4.5
	3	287	17.2
	4	710	42.5
	Very satisfied	550	32.9
Supervisor support	Very dissatisfied	57	3.4
	2	101	6.0
	3	267	15.9
	4	631	37.6
	Very satisfied	621	37.0
Clinical work	Very dissatisfied	21	1.3



Item	Response options	N	%
	2	37	2.2
	3	203	12.1
	4	763	45.7
	Very satisfied	647	38.7
	Very dissatisfied	23	1.4
Number of patients or presentations	2	54	3.2
	3	216	12.9
	4	686	40.9
	Very satisfied	697	41.6
	Very dissatisfied	21	1.3
Diversity of patients or presentations	2	50	3.0
	3	239	14.3
	4	711	42.5
	Very satisfied	651	38.9
	Very dissatisfied	20	1.2
Level of workplace responsibility	2	42	2.5
	3	164	9.8
	4	735	44.0
	Very satisfied	710	42.5
	Very dissatisfied	44	2.7
Induction and orientation	2	83	5.0
	3	273	16.5
	4	668	40.3
	Very satisfied	589	35.5
	Very dissatisfied	45	2.7
Feedback on training progress	2	111	6.6
	3	352	21.0
	4	670	40.0
	Very satisfied	495	29.6
	Very dissatisfied	51	3.1
Training and education resources	2	101	6.0
	3	352	21.1
	4	676	40.5
	Very satisfied	491	29.4
	Very dissatisfied	33	2.0
Location	2	67	4.0
	3	247	14.7



Item	Response options	N	%
	4	651	38.8
	Very satisfied	678	40.5
	Very dissatisfied	60	3.6
Terms and conditions	2	111	6.6
	3	273	16.3
	4	656	39.2
	Very satisfied	573	34.2

Table 10: 2018 AGPT NRS item frequencies – satisfaction with College

Item	Response options	N	%
Thinking about your experience with ACRRM, how would you rate your satisfaction with:			
assessment	Very dissatisfied	7	5.7
	2	6	4.9
	3	29	23.6
	4	46	37.4
	Very satisfied	13	10.6
	Not applicable	22	17.9
curriculum	Very dissatisfied	3	2.4
	2	7	5.7
	3	21	17.1
	4	59	48.0
	Very satisfied	24	19.5
	Not applicable	9	7.3
communication	Very dissatisfied	11	8.9
	2	20	16.3
	3	35	28.5
	4	40	32.5
	Very satisfied	11	8.9
	Not applicable	6	4.9
the support they provide you	Very dissatisfied	14	11.4
	2	19	15.4
	3	38	30.9
	4	37	30.1
	Very satisfied	8	6.5
	Not applicable	7	5.7
Thinking about your experience with RACGP, how would you rate your satisfaction with:			
assessment	Very dissatisfied	79	5.0
	2	137	8.7



Item	Response options	N	%
	3	370	23.6
	4	529	33.7
	Very satisfied	198	12.6
	Not applicable	255	16.3
curriculum	Very dissatisfied	61	3.9
	2	134	8.5
	3	417	26.6
	4	608	38.8
	Very satisfied	246	15.7
	Not applicable	103	6.6
communication	Very dissatisfied	55	3.5
	2	159	10.1
	3	408	26.0
	4	597	38.0
	Very satisfied	255	16.3
	Not applicable	95	6.1
the support they provide you	Very dissatisfied	102	6.5
	2	203	12.9
	3	436	27.8
	4	474	30.2
	Very satisfied	222	14.2
	Not applicable	131	8.4

Table 11: 2018 AGPT NRS item frequencies – overall satisfaction

Item	Response options	N	%
Thinking about all of your AGPT training to date, overall how satisfied are you with each of the following?			
Administration	Very dissatisfied	67	4.0
	2	145	8.7
	3	518	30.9
	4	681	40.7
	Very satisfied	264	15.8
Education and training	Very dissatisfied	59	3.5
	2	112	6.7
	3	479	28.6
	4	749	44.8
	Very satisfied	273	16.3
Support provided	Very dissatisfied	83	5.0
	2	160	9.6



Item	Response options	N	%
	3	500	29.9
	4	657	39.3
	Very satisfied	270	16.2

Table 12: 2018 AGPT NRS item frequencies – complaints and/or grievance process

Item	Response options	N	%
Are you familiar with your RTO's formal complaints and/or grievance process?	No	671	40.1
	Yes	656	39.2
	Unaware process existed	348	20.8
Could you readily access your RTO's formal complaints and/or grievance process if needed?	No	552	33.9
	Yes	1077	66.1
Have you ever made a formal written complaint relating to your training on the AGPT program?	No	1595	95.7
	Yes	71	4.3

Table 13: 2018 AGPT NRS item frequencies – adverse event or incidence

Item	Response options	N	%
Thinking about all of your AGPT training to date, have you experienced an adverse event or incident?	No	1356	81.1
	Yes	316	18.9
<IF YES> From which of the following sources did you seek assistance or support to cope with the adverse event or incident?	RTO	173	10.2
	Your training facility	109	6.4
	General Practice Registrars Australia (GPRA)	48	2.8
	Did not seek assistance or support	52	3.1
	AMA	11	0.6
	MDO/Insurance Provider	31	1.8
	Other	31	1.8
<IF RTO> How would you rate your satisfaction with the assistance or support your RTO provided during or after an adverse event or incident?	Very dissatisfied	47	28.0
	2	26	15.5
	3	30	17.9
	4	32	19.0
	Very satisfied	33	19.6

Table 14: 2018 AGPT NRS item frequencies – registrars' health and wellbeing

Item	Response options	N	%
How would you rate your satisfaction with the health and wellbeing support provided to you by			
RTO	Very dissatisfied	100	6.1
	2	126	7.7
	3	349	21.3
	4	594	36.2
	Very satisfied	398	24.3
	Not applicable	74	4.5



Item	Response options	N	%
training facility	Very dissatisfied	56	3.4
	2	80	4.9
	3	262	16.0
	4	597	36.5
	Very satisfied	604	36.9
	Not applicable	36	2.2
ACRRM	Very dissatisfied	12	10.0
	2	21	17.5
	3	35	29.2
	4	32	26.7
	Very satisfied	7	5.8
	Not applicable	13	10.8
RACGP	Very dissatisfied	76	5.0
	2	162	10.6
	3	469	30.6
	4	388	25.3
	Very satisfied	176	11.5
	Not applicable	264	17.2
GP supervisor	Very dissatisfied	47	2.9
	2	88	5.4
	3	209	12.7
	4	522	31.8
	Very satisfied	709	43.2
	Not applicable	66	4.0
General Practice Registrar Association (GPRA)	Very dissatisfied	37	2.3
	2	97	5.9
	3	426	26.1
	4	418	25.6
	Very satisfied	205	12.6
	Not applicable	450	27.6
Do you have your own independent GP?	No	482	29.3
	Yes	1164	70.7
Are you living away from your immediate family?	No	940	57.4
	Yes	697	42.6
How many dependents do you have? (e.g. children, parents)?	0	696	41.1
	1 or 2	647	38.2
	3 or 4	198	11.7



Item	Response options	N	%
	5 or more	23	1.4

Table 15: 2018 AGPT NRS item frequencies – Aboriginal and Torres Strait Islander health and culture

Item	Response options	N	%
In Semester One, 2018, were you training in an Aboriginal health training post (e.g. an Aboriginal Medical Service or Aboriginal Community Controlled Health Service)?	No	1480	90.7
	Yes	151	9.3
<IF NO> Have you completed or are you considering undertaking training in an Aboriginal health training post (e.g. an Aboriginal Medical Service or Aboriginal Community Controlled Health Service)?	I have already completed training	176	11.9
	I am considering undertaking training	432	29.3
	None of the above	868	58.8
Since commencing the AGPT program, have you had an orientation to Aboriginal and Torres Strait Islander health?	No	124	7.6
	Yes	1516	92.4
Since commencing the AGPT program, have you had training in Aboriginal and Torres Strait Islander cultural safety?	No	152	9.3
	Yes	1486	90.7
<IF CURRENTLY WORKING IN AN ABORIGINAL TRAINING POST> Do you have access to a formal cultural mentor for support with issues relevant to Aboriginal and Torres Strait Islander people?	No	44	29.3
	Yes	106	70.7
<IF YES> How satisfied are you with the guidance from this cultural mentor on Aboriginal and Torres Strait Islander cultural safety questions?	Very dissatisfied	3	2.9
	2	24	23.1
	3	42	40.4
	4	35	33.7
	Very satisfied	3	2.9

Table 16: 2018 AGPT NRS item frequencies – registrars' training choices

Item	Response options	N	%
When did you decide to become a specialist GP?	While I was at school	97	5.7
	Early in my medical degree	277	16.3
	Late in my medical degree	260	15.3
	In my first year out of medical school	181	10.7
	More than one year out of medical school	616	36.3
	After trying another specialty	370	21.8
Why did you decide to become a specialist GP?	Hours/working conditions	1312	77.4
	Diversity of patients and medical presentations	1102	65.0
	To build long-term relationships with patients	1024	60.4



Item	Response options	N	%
	Intellectually stimulating	566	33.4
	Domestic circumstances	542	32.0
	Social responsibility or to support the community	542	32.0
	Experience of jobs so far	486	28.7
	Self-appraisal of own skills/aptitudes	469	27.7
	To also study sub-specialites	449	26.5
	To work in rural and remote locations	416	24.5
	Enthusiasm/commitment	402	23.7
	Student experience of subject	287	16.9
	Advice from others	244	14.4
	Inclinations before medical school	224	13.2
	Particular teacher, department or role model	200	11.8
	Promotion/career prospects	184	10.9
	Eventual financial prospects	146	8.6
	The training program is fully funded by the Commonwealth Government	93	5.5
	Other	19	1.1
Was GP specialisation your first choice of specialty?	No	581	35.7
	Yes	1048	64.3
Did you apply to any other specialty programs at the same time or before you applied to become a GP specialist?	No	1266	77.8
	Yes	361	22.2

Table 17: 2018 AGPT NRS item frequencies – choice of RTO

Item	Response options	N	%
What were the main reasons you chose your RTO as your training provider?	Family/partner support	404	23.8
	Location	1225	72.3
	Lifestyle	313	18.5
	Training opportunities	444	26.2
	Career links with region	172	10.1
	Reputation of the RTO	242	14.3
	Recommended by peers	147	8.7
	Did not choose current RTO (transferred from RTP)	6	0.4
	Did not have a choice over RTO	39	2.3
	Only RTO operating in State or region	67	4.0
	Through selection process	10	0.6
	Other reasons	14	0.8



Table 18: 2018 AGPT NRS item frequencies – registrars' future plans

Item	Response options	N	%
Within the next five years, you would like to be...	Would like to be supervising medical students.	1053	62.1
	Would like to be supervising registrars.	927	54.7
	Would like to be a medical educator.	539	31.8
	Would not like to be involved in doctor training.	244	14.4
In five years, you would like	to be working full time as a private GP.	710	41.9
	to be working part-time as a private GP.	816	48.1
	to own your own practice	291	17.2
	to purchase or buy into an existing practice	360	21.2
	to be working in Aboriginal Health	216	12.7
	to be working as a GP in another setting	330	19.5
	to be working in a rural or remote location	411	24.2
	to be not working as a GP	41	2.4
Did you move to the current region to undertake the AGPT program?	No	893	54.5
	Yes	747	45.5
Do you intend to stay in this region after completing the AGPT program?	No	261	15.9
	Yes	881	53.6
	Unsure	503	30.6



Appendix D: 2018 AGPT NRS Instrument

Introductory text

The Department of Health has engaged the Australian Council for Educational Research (ACER), an independent and not-for-profit research organisation, to conduct the 2018 Australian General Practice Training National Registrar Survey. The survey results enable the Department of Health to monitor the performance of the program and to help bring emerging issues to the attention of the Department of Health and other GP training stakeholders.

Please take 15 minutes to tell us about your experience as a general practice registrar in Semester One, 2018 by clicking on the 'Next' button below. Your responses help the Department of Health to improve your and other registrars' experience in the Australian General Practice Training (AGPT) program.

The Department of Health's ethics approval ensures the confidentiality of your response. Your involvement is voluntary and you are free to withdraw consent at any time. Your response is private, confidential and will be treated according to any applicable law. This survey is run according to the Department of Health Code of Ethics.

We encourage you to participate in the Australian General Practice Training National Registrar Survey.

Please note that unless otherwise stated: 'your RTO' is the regional training organisation (RTO) that delivered your training in Semester One, 2018; and your training facility' is the main practice, hospital or academic post where you were assigned in Semester One, 2018.

Question	Item	Response options
Which regional training organisation (RTO) delivered your GP training in Semester One, 2018 ?	-	Eastern Victoria GP Training General Practice Training Queensland General Practice Training Tasmania Generalist Medical Training GP Synergy GPEx Murray City Country Coast GP Training Northern Territory General Practice Education Western Australian General Practice Education Training



Question	Item	Response options
<IF RTO=GP Synergy>In which training region was your GP training delivered in Semester One, 2018 ?	-	North Eastern NSW Lower Eastern NSW Western NSW
Which fellowship are you currently working towards? <i>If you are undertaking a dual or triple fellowship, please select all that apply.</i>	FRACGP FACRRM FARGP Other (please specify)	Not selected Selected OPEN RESPONSE
At what full time equivalent (FTE) load were you employed during Semester One, 2018 ? <i>1.0 FTE is equivalent to 38 hours per week, i.e. 0.2 = 1 day.</i>	-	0.0 to 0.2 0.3 to 0.4 0.5 to 0.6 0.7 to 0.8 0.9 to 1.0 I was on extended leave from the training program (e.g. parental, sabbatical, long service) for the whole semester
<IF ON EXTENDED LEAVE FOR WHOLE SEMESTER>Thank you for taking the time to participate in the Australian General Practice Training National Registrar Survey (AGPT NRS). You are not required to respond this year. Please press <i>Next</i> to finalise your input.	-	<i>Note that the survey will be terminated here.</i>



Question	Item	Response options
If you were training in a hospital during Semester One, 2018 , which of the following terms were you undertaking?	-	Hospital intern (PGY1) Hospital resident (PGY2+) Hospital based extended skills training I was not undertaking training in a hospital
<IF PGY1>Thank you for taking the time to participate in the Australian General Practice Training National Registrar Survey (AGPT NRS). You are not required to respond this year. Please press <i>Next</i> to finalise your input.	-	<i>Note that the survey will be terminated here.</i>
In how many training facilities were you employed during Semester One, 2018 ?	-	One Two Three or more
<IF ONE>What is the postcode of the GP training facility where you were employed during Semester One, 2018 ?	-	NUMERICAL RESPONSE
<IF MORE THAN ONE> What is the postcode of the GP training facility where you were employed for the most time during Semester One, 2018 ?	-	NUMERICAL RESPONSE
What training were you undertaking during Semester One, 2018 ? <i>Please select all that apply.</i>	GPT1 Term GPT2 Term GPT3 Term PRRT1 PRRT2 PRRT3	Not selected Selected



Question	Item	Response options
	PRRT4	OPEN RESPONSE
	Extended Skills	
	Advanced Rural Skills Training (ARST)	
	Advanced Specialised Training (AST)	
	Academic post	
	Other (please specify)	
Did you complete any of the following terms prior to commencing the Australian General Practice Training (AGPT) program?	Prevocational General Practice Placements Program (PGPPP)	No
	First Wave Scholarship (GP placement in the undergraduate years)	Yes
	Rural Health Multidisciplinary Training program	
	Commonwealth Medical Internships	
	Bonded Medical Placements (BMP) Scheme	
	Medical Rural Bonded Scholarship (MRBS) Scheme	
	Rural Australia Medical Undergraduate Scholarship (RAMUS)	
	John Flynn Placement program	
	State rural generalist programs	
	Remote Vocational Training Scheme	
	HECS Reimbursement Scheme	
	Community Residency Placement (WA)	



Question	Item	Response options
<p><IF YES TO AST (6h), EXTENDED SKILLS (6e), OR ARST (6f)></p> <p>Were you training in any of the following areas of Extended Skills (FRACGP), Advanced Specialised Training (FACRRM) or Advanced Rural Skills Training (FARGP) during Semester One, 2018?</p> <p><i>Please select all that apply.</i></p>	Training towards any other fellowship	
	Aboriginal and Torres Strait Islander Health	Not selected
	Academic practice	Selected
	Adult Internal Medicine	
	Anaesthetics	
	Dermatology	
	Emergency Medicine	
	Medical Education	
	Men's Health	
	Mental Health	
	Obstetrics and Gynaecology	
	Paediatrics	
	Palliative Care	
	Population Health	
	Remote Medicine	
	Skin Cancer Medicine	
	Small Town Rural General Practice (STRGP)	
	Surgery	
	Women's Health	
	Other (please specify)	OPEN RESPONSE



Question	Item	Response options
Are you currently training on the rural or general pathway?	-	Rural pathway General pathway
<IF RURAL> What have been the best aspects of training on the rural pathway?	-	OPEN RESPONSE
<IF RURAL> What aspects of your experience training on the rural pathway are most in need of improvement?	-	OPEN RESPONSE
<p>Please note that unless otherwise stated, all questions referring to 'your RTO' relate to <INSERT RTO NAME>. All questions referring to 'your training facility' relate to the main practice, hospital or academic post where you were assigned in Semester One, 2018.</p> <p>The following questions ask about your satisfaction with your RTO, training facility and College, and your overall satisfaction.</p>		
How would you rate your satisfaction with the following aspects of your RTO in Semester One, 2018 ?	Quality of overall training and education experience	1 Very dissatisfied
<i>If any of the following statements do not apply, please leave blank.</i>	Quality of training advice	2
	Induction/orientation provided	3
	Feedback on your training progress	4
	Workshops provided	5 Very satisfied
	Training and education resources available	
	<IF COLLEGE=ACRRM> Support to meet ACRRM training requirements	
	<IF COLLEGE=RACGP> Support to meet RACGP training requirements	



Question	Item	Response options
	Support for examination and assessments	
How would you rate your satisfaction with the following aspects of your training facility (e.g. your practice, your hospital) in Semester One, 2018 ?	Quality of overall training and education experience	1 Very dissatisfied
	Quality of supervision	2
	Clinical work	3
	Number of patients or presentations	4
	Diversity of patients or presentations	5 Very satisfied
	Level of workplace responsibility	
	Induction/orientation provided	
	Feedback on your training progress	
	Training and education resources available	
	Location	
	Terms and conditions of employment at your training facility	
<IF COLLEGE=ACRRM> Thinking about your experience with ACRRM , how would you rate your satisfaction with:	assessment?	1 Very dissatisfied
	curriculum?	2
	communication?	3
	the support they provide to you?	4
		5 Very satisfied
<IF COLLEGE= RACGP> Thinking about your experience with RACGP , how would you rate your satisfaction with:	assessment?	1 Very dissatisfied
	curriculum?	2
	communication?	3



Question	Item	Response options
	the support they provide to you?	4 5 Very satisfied
Thinking about all of your AGPT training to date, overall how satisfied are you with each of the following?	Administration	1 Very dissatisfied
	Education and training	2
	Support	3
		4 5 Very satisfied
Given your overall experience with your training, what have been the best aspects of your experience?	-	OPEN RESPONSE
Given your overall experience with your training, what aspects of your experience are most in need of improvement?	-	OPEN RESPONSE
The following questions ask about your RTO's complaints and grievance process.	-	-
Are you familiar with your RTO's formal complaints and/or grievance process?	-	No Yes Unaware process exists
Could you readily access your RTO's formal complaints and/or grievance process if needed?	-	No Yes
Have you ever made a formal written complaint relating to your training on the AGPT Program?	-	No Yes
Thinking about all of your AGPT training to date, have you experienced an adverse event or incident?	-	No Yes



Question	Item	Response options
<p><IF YES> From which of the following sources did you seek assistance or support to cope with the adverse event or incident?</p> <p><i>Please select all that apply.</i></p>	RTO	Not selected
	Your training facility	Selected
	General Practice Registrars Australia (GPRA)	
	Did not seek assistance or support	
	Other (please specify)	OPEN RESPONSE
<p><IF RTO> How would you rate your satisfaction with the assistance or support your RTO provided during or after an adverse event or incident?</p>	-	1 Very dissatisfied
		2
		3
		4
		5 Very satisfied
<p><IF DISSATISFIED (20=1, 2 OR 3)> How could your RTO have supported you better during or after an adverse event or incident?</p>	-	OPEN RESPONSE
<p>Please note that unless otherwise stated, all questions referring to 'your RTO' relate to <YOUR RTO>. All questions referring to 'your training facility' relate to the main practice, hospital or academic post where you were assigned in Semester One, 2018.</p>	-	-
<p>How would you rate your satisfaction with the health and wellbeing support provided to you by</p>	your RTO?	1 Very dissatisfied
	your training facility?	2
	<IF COLLEGE=ACRRM> ACRRM?	3
	<IF COLLEGE=RACGP> RACGP?	4
	your GP Supervisor?	5 Very satisfied



Question	Item	Response options
	the General Practice Registrar Association (GPRA)?	
Do you have your own independent GP?		No Yes
Are you living away from your immediate family?		No Yes
How many dependents do you have (e.g. children, parents)?		NUMERICAL RESPONSE
Did you move to the current region to undertake the AGPT program?	-	No Yes
Do you intend to stay in this region after completing the AGPT program?		No Yes Unsure
The following questions ask about the training related to Aboriginal and Torres Strait Islander culture that you have received.	-	-
In Semester One, 2018 , were you training in an Aboriginal health training post (e.g. an Aboriginal Medical Service or Aboriginal Community Controlled Health Service)?	-	No Yes
<IF NO> Have you completed or are you considering undertaking training in an Aboriginal health training post (e.g. an Aboriginal Medical Service or Aboriginal Community Controlled Health Service)?	-	I have already completed training I am considering undertaking training None of the above



Question	Item	Response options
Since commencing the AGPT program, have you had an orientation to Aboriginal and Torres Strait Islander health?	-	No Yes
Since commencing the AGPT program, have you had training in Aboriginal and Torres Strait Islander cultural safety?	-	No Yes
<IF CURRENTLY WORKING IN AN ABORIGINAL TRAINING POST> Do you have access to a formal cultural mentor for support with issues relevant to Aboriginal and Torres Strait Islander people?	-	No Yes
<IF YES> How satisfied are you with the guidance from this cultural mentor on Aboriginal and Torres Strait Islander cultural safety questions?	-	1 Very dissatisfied 2 3 4 5 Very satisfied
<p>Please note that unless otherwise stated, all questions referring to 'your RTO' relate to <YOUR RTO>.</p> <p>All questions referring to 'your training facility' relate to the main practice, hospital or academic post where you were assigned in Semester One, 2018.</p> <p>The following questions ask about your choice of specialisation, fellowship and RTO, and your future plans.</p>	-	-
	While I was at school	Not selected
	Early in my medical degree	Selected



Question	Item	Response options
When did you decide to become a specialist GP? <i>Please select all that apply.</i>	<div>Late in my medical degree</div> <div>In my first year out of medical school</div> <div>More than one year out of medical school</div> <div>After trying another specialty</div> <div>Other (please specify)</div>	<div>OPEN RESPONSE</div>
Why did you decide to become a specialist GP? <i>Please select all that apply.</i>	<div>To build long-term relationships with patients</div> <div>To also study sub-specialities such as anaesthesia, emergency medicine, paediatrics, obstetrics and gynaecology</div> <div>The training program is fully funded by the Commonwealth Government</div> <div>To work in rural and remote locations</div> <div>Intellectually stimulating</div> <div>Diversity of patients and medical presentations</div> <div>Domestic circumstances</div> <div>Hours/working conditions</div> <div>Eventual financial prospects</div> <div>Promotion/career prospects</div> <div>Self-appraisal of own skills/aptitudes</div> <div>Advice from others</div> <div>Student experience of subject</div> <div>Particular teacher, department or role model</div>	<div>Not selected</div> <div>Selected</div>



Question	Item	Response options
	<u>Inclinations before medical school</u> <u>Experience of jobs so far</u> <u>Enthusiasm/commitment</u> <u>Social responsibility or to support the community</u> Other (please specify)	OPEN RESPONSE
Was GP specialisation your first choice of specialty?	-	No Yes
Did you apply to any other specialty programs at the same time or before you applied to become a GP specialist?	-	No Yes
<If Yes> What other specialty programs did you apply to?		OPEN RESPONSE
<IF SINGLE FELLOWSHIP> What was your main reason for choosing your GP fellowship?	-	OPEN RESPONSE
<IF DUAL FELLOWSHIP> What was your main reason for choosing to undertake a dual GP fellowship?	-	OPEN RESPONSE
<IF TRIPLE FELLOWSHIP> What was your main reason for choosing to undertake a triple GP fellowship?	-	OPEN RESPONSE
What were the main reasons you chose your RTO as your training provider? <i>Please select all that apply.</i>	<u>Family/partner support</u> <u>Location</u> <u>Lifestyle</u> Training opportunities	Not selected Selected



Question	Item	Response options
	Career links with region (e.g. earlier placement, Prevocational General Practice Placements Program (PGPPP))	OPEN RESPONSE
	Reputation of the RTO	
	Recommended by peers	
	Other (please specify)	
Within the next five years, you would like to be... <i>Please select all that apply.</i>	teaching or supervising medical students.	Not selected
	supervising registrars.	Selected
	a medical educator.	
	not involved in doctor training.	
In five years, you would like... <i>Please select all that apply.</i>	to be working full time as a private GP.	Not selected
	to be working part-time as a private GP.	Selected
	to own your own practice.	
	to purchase or buy into an existing practice.	
	to be working in Aboriginal Health.	
	to be working as a GP in another setting (e.g. aged, palliative, home care).	
	to be working in a rural or remote location.	
	to be not working as a GP.	
	to be doing something else (please specify).	

Closing text



Thank you for participating in the Australian General Practice Training National Registrar Survey. Once you have completed the survey, please press 'Submit'.

Your responses help the Department of Health improve registrars' experience and learning in Australia.

If this survey has raised any concerns about your experience in the AGPT program, please get in touch with your Registrar Liaison Officer (RLO). A directory of RLOs is provided by General Practice Registrars Australia (GPRA): <https://gpra.org.au/rlo-directory/>.

If you need further assistance, please contact GPRA at registrarenquiries@gpra.org.au or phone 03 9629 8878.

PRIVACY STATEMENT

Any Personal Information you provide to ACER is private, confidential and will be treated according to any applicable law. Such Personal Information will only be used for the purposes of this research specified above.

ACER is bound to comply with the Privacy Act 1988 (Cth) and its ACER Privacy Policy locatable at <http://www.acer.org/privacy> and your personal information will be handled in accordance with that policy which may be updated from time to time.

The policy sets out your rights and processes to: complain about a breach of privacy, and access and have amended your personal information held by ACER. Your involvement is voluntary and you are free to withdraw consent at any time. Should you have any queries please contact Project Manager, Rebecca Taylor, ACER, 19 Prospect Hill Road, Camberwell, Victoria 3124, agptnrs@acer.org.



Appendix E: Accessible text alternatives for figures

Infographic text alternative

NATIONAL REGISTRAR SURVEY 2018

The AGPT NRS is an annual, national survey of GP registrars currently training in the AGPT program that collects information about registrar satisfaction, experience and future career plans. This information can be used to assure the quality of training provision, enable continuous improvement and allow results to be benchmarked nationally.

These are the responses from the 1,695 registrars who participated in the 2018 survey.

TRAINING EXPERIENCE

- 90% were satisfied with the education and training from their RTO
- 93% were satisfied with the education and training from their training facility
- 91% were satisfied with the supervisor support
- 96% were satisfied with their level of workplace responsibility
- 97% were satisfied with the clinical work
- 90% were satisfied with the overall education and training

REGISTRAR CHARACTERISTICS

- 63% of respondents were female
- 54% were between 30 and 39 years of age
- 0.9% identified as Aboriginal or Torres Strait Islander
- 54% in the rural pathway
- 30% were international medical graduates

CHOOSING TO BECOME A GP

- 78% of respondents applied to AGPT before any other speciality program
- 64% of respondents saw GP specialisation as their first choice of speciality
- 82% would like to be involved in doctor training

RURAL TRAINING PATHWAY: BEST ASPECTS – TOP FOUR RESPONSES


- 32% Exposure to a range of cases or patients
- 15% Clinical or procedural experience
- 12% Being part of a community
- 7% Being in a rural or regional area

WHY BECOME A GP?: TOP THREE REASONS

- 77% Hours/working conditions
- 65% Diversity of patients and medical presentations
- 60% To build long-term relationships with patients

LOCATION OF TRAINING FACILITY

- 45% in Major cities

- 
- 35% in Inner regional
 - 17% in Outer regional
 - 3% in Remote



Text alternative for Figures

Table 19: Registrars' current training region (alternative for Figure 2)

Training region	Per cent (%)
Eastern Victoria	8.6
Lower Eastern NSW	9.6
North Eastern NSW	14.8
North Western Queensland	11.7
Northern Territory	3.3
South Australia	8.9
South Eastern Queensland	10.7
Tasmania	2.8
Western Australia	9.0
Western NSW	7.1
Western Victoria	13.3

Table 20: Location of registrars' current training facility in 2013, 2014, 2015, 2016, 2017 and 2018 (alternative for Figure 3)

Training facility location	2013 (%)	2014 (%)	2015 (%)	2016 (%)	2017 (%)	2018 (%)
Major cities	47.6	39.4	43.7	43.5	48.6	45.1
Inner regional	34.9	38.8	35.2	34.8	32.0	35.0
Outer regional	14.4	17.4	17.7	18.1	15.6	16.6
Remote	3.1	4.4	3.3	3.6	3.8	3.3

Table 21: Proportion of registrars who relocated for training by training location (alternative for Figure 4)

Training facility location	Did not relocate for training (%)	Relocated for training (%)
Major cities	80.5	19.5
Inner regional	35.7	64.3
Outer regional	27.9	72.1
Remote	30.4	69.6

Table 22: Mean overall satisfaction of registrars with the AGPT program from 2013 to 2018 (alternative for Figure 5)

Area	2013	2014	2015	2016	2017	2018
Administration	3.9	3.7	3.8	3.2	3.4	3.6
Education and training	3.9	3.9	4.0	3.6	3.6	3.6
Support	3.9	3.8	3.9	3.4	3.4	3.5



Table 23: Key Performance Indicators 2013, 2014, 2015, 2016, 2017 and 2018 (alternative for Figure 6)

Key Performance Indicators	2013 (%)	2014 (%)	2015 (%)	2016 (%)	2017 (%)	2018 (%)
KPI 1: Overall satisfaction	90.7	89.1	87.9	75.6	82.5	84.9
KPI 2: Satisfaction with RTO support (no incident)	89.5	89.3	88.2	72.4	86.2	89.0
KPI 3: Satisfaction with RTO support (with incident)	88.1	95.7	88.0	81.3	65.5	65.5
KPI 4: Satisfaction with supervision	93.9	92.9	91.6	92.0	89.5	90.6
KPI 5: Satisfaction with practice location	94.5	94.7	95.0	95.6	94.8	94.0
KPI 6: Satisfaction with infrastructure / resources	93.8	93.8	93.9	87.8	89.4	90.9

Table 24: Satisfaction with different aspects of training facilities (alternative for Figure 7)

Area of training facility satisfaction	Average satisfaction score
Overall training & education	4.0
Supervisor support	4.0
Number of patients or presentations	4.2
Clinical work	4.2
Diversity of patients or presentations	4.1
Induction & orientation	4.2
Level of workplace responsibility	4.0
Feedback on training progress	3.9
Training & education resources	3.9
Location	4.1
Terms and conditions	3.9

Table 25: Satisfaction with health and wellbeing support by source of support (alternative for Figure 8)

Source of support	Satisfaction with health and wellbeing support
GP Supervisor	85.6
Training facility	91.5
GPRA	91.4
RTO	88.7

Table 26: Proportion of registrars training away from home by location (alternative for Figure 9)

Training location	Training away from home (%)
Major cities	29.9
Inner regional areas	50.2
Outer regional areas	57.3
Remote areas	60.7



Table 27: Proportion of registrars training in an Aboriginal health training post by location (alternative for Figure 10)

Training location	Training in an Aboriginal health training post (%)
Major cities	4.5
Inner regional areas	8.2
Outer regional areas	16.9
Remote areas	46.4

Table 28: Why registrar's decided to become GP specialists (for responses over 20%) (alternative for Figure 11)

Reasons	Per cent (%)
Hours/working conditions	77.4
Diversity of patients and medical presentations	65.0
To build long-term relationships with patients	60.4
Intellectually stimulating	33.4
Domestic circumstances	32.0
Social responsibility or to support the community	32.0
Experience of jobs so far	28.7
Self-appraisal of own skills/aptitudes	27.7
To also study sub-specialites	26.5
To work in rural and remote locations	24.5
Enthusiasm/commitment	23.7

Table 29: Registrars who have moved for training intentions to remain or leave current region by location (alternative for Figure 12)

Training location	Plan to stay in location after training	Unsure of relocation plans	Plan to move from location after training
Major cities	65.1	23.4	11.4
Inner regional areas	45.4	34.8	19.8
Outer regional areas	40.1	39.8	20.1
Remote areas	48.2	37.5	14.3