

Australian General Practice Training Program

National report on the 2020 National Registrar Survey

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Acknowledgements

Acknowledgment of Country

The authors would firstly like to acknowledge the Traditional Owners of the lands on which our offices are located, including the Wurundjeri People, where this report was written. We pay our respects to Elders past, present and emerging and acknowledge the Aboriginal and Torres Strait Islander people who continue to contribute to our research and development to improve Indigenous learning.

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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
AKT	Applied Knowledge Test
AMC	Australian Medical Council
AMG	Australian Medical Graduate
ARST	Advanced Rural Skills Training
AST	Advanced Specialised Training
COVID-19	Coronavirus disease caused by severe acute respiratory syndrome coronavirus 2
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)
GPRA	General Practice Registrar Australia
GPSA	General Practice Supervisors Australia
GPT	General Practice Term
HECS	Higher Education Contribution Scheme
IMG	International Medical Graduate
KFP	Key Feature Problem
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 October 12 to December 9, 2020, 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. Over 4000 registrars were invited to reflect on their recent training experience in Semester One, 2020. 1,188 registrars provided a valid response to the survey, representing an overall response rate of 31 per cent. The response rate for registrars within each training region ranged from 25 to 41 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. There was a sizeable reduction in the response rate from previous years and this coincided with the unprecedented response required by the registrars to the COVID-19 pandemic in 2020, as well as the failure and subsequent cancelation of exams in the weekend before this survey was launched, causing major disruption to the plans of many registrars, including those who already had their exams previously delayed due to the pandemic.

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

Overall levels of satisfaction have decreased by four per cent across all three categories from 2019. In 2020:

- 84 per cent of registrars were satisfied with the overall education and training
- 80 per cent were satisfied with the overall support
- 82 per cent were satisfied with the overall administration.

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

- 87 per cent of registrars were satisfied with their overall training and education
- 87 per cent were satisfied with the training advice they received
- 92 per cent were satisfied with the induction and orientation they received
- 89 per cent were satisfied with the feedback they received
- 86 per cent were satisfied with the workshops provided
- 88 per cent were satisfied with the training and education resources provided
- 80 per cent were satisfied with the support received for examinations and assessments
- 86 per cent were satisfied with the support they received from their RTO to meet the training requirements of RACGP while fewer (78%) were satisfied with the support they received from their RTO to meet ACRRM training requirements (although this has significantly increased from only 55% in 2017 and 62% in 2019).

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

- 90 per cent of registrars were satisfied with the overall training and education they received
- 90 per cent were satisfied with the supervisor support
- 96 per cent were satisfied with the clinical work
- 95 per cent were satisfied with the number of patients or presentations
- 95 per cent were satisfied with the diversity of patients or presentations
- 96 per cent were satisfied with the level of workplace responsibility

- 93 per cent were satisfied with the induction and orientation
- 91 per cent with feedback on training progress
- 90 per cent with training and education resources
- 94 per cent with location of training facility
- 91 per cent with terms and conditions.

In 2020, registrars were also asked to rate the impact that the COVID-19 pandemic had on their training experiences as well as the support and communication throughout the pandemic and their experience with telehealth.

When registrars were asked to rate how impacted they were by the COVID-19 pandemic

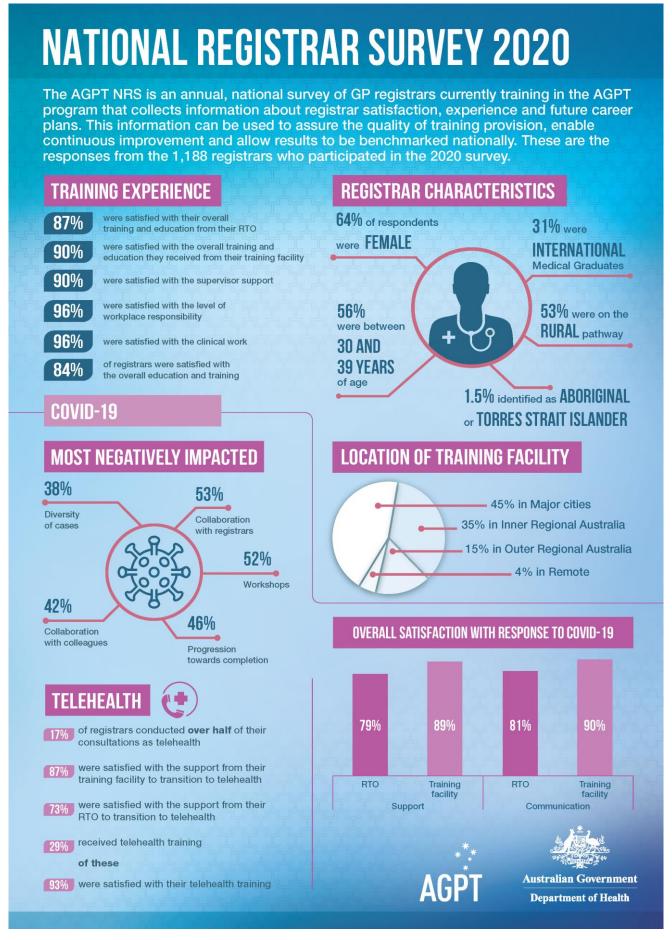
- 53 per cent of registrars reported that their ability to collaborate with other registrars was negatively impacted
- 52 per cent of registrars reported that the workshops provided were negatively impacted
- 46 per cent of registrars reported that their progression towards completion was negatively impacted
- 42 per cent of registrars reported that their ability to collaborate with colleagues was negatively impacted.

When registrars where asked to rate the **support** and **communication** for the delivery of GP training **throughout the COVID-19 pandemic**

- 79 per cent were satisfied with overall support from their RTO
- 89 per cent were satisfied with the overall support from their training facility
- 81 per cent were satisfied with overall communication from their RTO
- 90 per cent were satisfied with the overall communication from their training facility.

When asked about telehealth

- 63 per cent of registrars reported that they had more than 20 per cent of their patient consultations virtually or via telehealth during the COVID-19 pandemic
- 29 per cent reported that they received training in telehealth and of these, 93 per cent were satisfied with that training.



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 disciplinary characteristics that a GP requires is described by the Royal Australian College of General Practitioners (RACGP) as including 'person centredness, continuity of care, comprehensiveness, whole person care, diagnostic and therapeutic skill, coordination and clinical teamwork, continuing quality improvement, professional, clinical and ethical standards, leadership, advocacy and equity and continuing evolution of the discipline'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) that 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. The survey was first introduced by General Practice Education and Training Limited in 2004 and has since been conducted annually.

¹ RACGP. "What is General Practice?". RACGP. https://www.racgp.org.au/education/students/a-career-in-general-practice/what-is-general-practice (accessed January, 2021).

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 January, 2021).

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 September 2020, 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 and AGPT NRS from 2013 to 2019.

In 2020, a set of research questions was developed addressing the effect of the COVID-19 pandemic on GP training. These questions looked at the support and communication that was provided by RTOs, Colleges and training facilities as well as the impact that COVID-19 had on GP training and their experience with telehealth.

The 2020 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, 2020. The 2020 AGPT NRS instrument included questions relating to registrars':

- demographic and training characteristics
- satisfaction with their RTO, training facilities and college
- health and wellbeing
- impact of the COVID-19 pandemic, including the support and communication received
- experience with telehealth throughout the COVID-19 pandemic
- 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 findings from the 2020 survey. In addition to this National Report, training region reports have been produced for each training region which provide RTOs with more detail on their registrars' survey responses. Two college reports have also been prepared for RACGP and ACRRM that focus on the responses given by registrars completing a fellowship with each of the colleges.

Methodology

The target population for the 2020 AGPT NRS included all registrars who were enrolled in the AGPT program who were in active training during Semester One, 2020. Registrars who were on extended leave during this time period, who were on extension awaiting fellowship, and not in active training, or who were training as a hospital intern (PGY1) 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 2020 AGPT NRS included 4,251 registrars (around 50 fewer registrars than 2019). During fieldwork, 372 registrars opted out from email and SMS correspondence and a further three registrars' emails bounced.

These registrars were removed from the target population. Overall there were 3,876 registrars in the final target population. The survey was conducted as a census of all registrars in the target population.

As in previous administrations of the survey, the 2020 AGPT NRS was administered wholly online. Fieldwork was conducted between October 12 and December 9, 2020. 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.

2020 AGPT NRS findings

This section provides an overview of the findings from the 2020 AGPT NRS and provides a snapshot of registrars' experience and satisfaction with their training in Semester One, 2020. 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 2020 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 training through the COVID-19 pandemic, including their experience with telehealth, 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, a copy of the questionnaire that was used in the 2020 AGPT NRS is included in Appendix D, 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 1,518 registrars commenced the survey. Of these, 208 registrars dropped out before answering any questions in the survey. Twenty-five registrars were determined to be out-of-scope because they indicated that they were training as a hospital intern (PGY1) or were on extended leave during Semester One, 2020. A further 97 registrars dropped out of the survey before answering any questions relating to their experience or satisfaction with training. The responses from the remaining 1,188 registrars are the focus of this report.

Overall, a 31 per cent response rate was achieved in the 2020 APGT NRS. This is a further reduction to the proportion of responses received when compared with previous years (2019: 38%; 2018: 42%; 2017: 40%), however, the response is still at a rate that ensures valid and reliable results. This further reduction in response rate coincided with the unprecedented response required by the registrars to the COVID-19 pandemic in 2020, as well as the failure and subsequent cancelation of exams in the weekend before this survey was launched, causing major disruption to the plans of many registrars, including those who already had their exams previously delayed due to the pandemic. The level of response varied by training region from 25 per cent to 41 per cent.

Please note, throughout this report to ensure confidentiality, all cells with a count between 1 and 3 are recorded as <4. Also note, as most of the questions in the survey were non-mandatory, and as some questions were only asked of subsets of registrars, not all questions were answered by all registrars who participated in the survey.

Table 1 shows that the respondents to the survey are representative of the overall population of registrars in the AGPT program. The only differences 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, a smaller representation of registrars in the 20 to 29 age group (a difference of 12%) and a six per cent difference in the division of the general/rural pathway when comparing the proportion in the population and those that responded with those in the rural pathway more likely to respond to the survey. Table 1 shows that 64 per cent of all respondents were female, reflecting the greater proportion of females in the program. Over 90 per cent of respondents were working towards the FRACGP. Eleven per cent of respondents were working towards the FACRRM and fewer than five per cent towards the FARGP, a Fellowship undertaken in combination with the FRACGP. A small proportion of respondents (5%) were working towards more than one fellowship.

Table 1: 2020 AGPT NRS representativeness of respondents with population for different registrar characteristics

Registrar characteristics		Response (n)	Response (%)	Population (n)	Population (%)
All registrars		1,188	-	3,876	-
Gender	Female	754	63.5	2300	59.3
Gender	Male	434	36.5	1576	40.7
Indigenous status	Aboriginal or Torres Strait Islander	18	1.5	54	1.4
ADF status	Australian Defence Force	26	2.2	96	2.5
Rural Generalist	Rural Generalist	49	4.1	178	4.6
Pathway	General	562	47.3	2087	53.8
Tattiway	Rural	626	52.7	1788	46.1
	20 to 29	218	18.4	1182	30.5
Age	30 to 39	659	55.5	1996	51.5
Age	40 to 49	230	19.4	551	14.2
	50 plus	81	6.8	147	3.8
	Australian Citizen	890	74.9	3058	78.9
	Australian Permanent Resident	273	23.0	735	19.0
Citizenship	Australian Temporary Resident	4	0.3	15	0.4
	New Zealand Citizen or Permanent Resident	19	1.6	62	1.6
	Not Specified	<4	-	5	0.1
	FACRRM	118	9.9	302	7.8
	FRACGP	1012	85.2	3379	87.1
Fellowship	FRACGP & FACRRM	4	0.3	11	0.3
	FRACGP & FACRRM & FARGP	4	0.3	16	0.4
	FRACGP & FARGP	50	4.2	168	4.3
Training Status	Completed Time	0	0.0	<4	
	Enrolled	1113	93.7	3209	82.8
	Enrolled (Partially Fellowed)	0	0.0	9	0.2
	Fellowed	69	5.8	638	16.5
	Uncertain	0	0.0	<4	

Registrar cl	haracteristics	Response (n)	Response (%)	Population (n)	Population (%)
	Withdrawn	6	0.5	18	0.5
	Eastern Victoria	86	7.2	296	7.6
	South Eastern Queensland	151	12.7	497	12.8
	Tasmania	29	2.4	105	2.7
	North Western Queensland	117	9.8	392	10.1
Tuninin	North Eastern NSW	175	14.7	661	17.1
Training region	Lower Eastern NSW	102	8.6	416	10.7
Tog.c.i.	Western NSW	77	6.5	207	5.3
	South Australia	119	10.0	326	8.4
	Western Victoria	183	15.4	457	11.8
	Northern Territory	37	3.1	92	2.4
	Western Australia	112	9.4	427	11.0

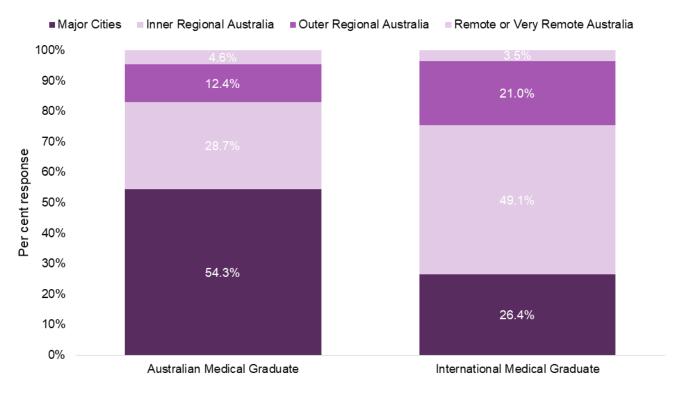
(n=3,876)

Registrars who responded to the 2020 AGPT NRS came from a range of backgrounds. Less than half of all respondents were born in Australia (48%), with 71 other countries making up the country of birth of respondents. After Australia, the most common countries of birth for registrars who participated in the survey were India (8%), Sri Lanka (5%), Malaysia (4%) and the United Kingdom (4%).

As in 2019, just under 70 per cent of registrars who participated in the survey received their medical degrees in Australia. International medical graduates (IMG) – registrars who did not graduate from medical degrees from either Australia or New Zealand – who participated in the survey were far more likely to be working in regional areas than Australian medical graduates (AMG). Of those IMG who responded to the survey, 79 per cent were on the Rural pathway compared with only 41 per cent of AMG. Figure 1 shows that just over a quarter of international medical graduates were working in major cities, compared with over half of registrars holding an Australian medical degree. Similar proportions of Australian and international medical graduates were 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* 1973.³ This generally requires doctors who received their training at an international medical school to work in a Distribution Priority Area, which tend to be concentrated in regional and remote parts of Australia.

The population of registrars who responded to the 2020 survey is similar to those who responded to the 2018 and 2019 survey.

³ Department of Human Services. "Overseas trained doctors and foreign graduates' eligibility requirements for Medicare". https://www.humanservices.gov.au/organisations/health-professionals/services/medicare/medicare-benefits/overseas-trained-doctors-and-foreign-graduates-eligibility-requirements-medicare (accessed 2 February, 2021).



(n=1,179)

Figure 1: Proportion of Australian Medical Graduate and International Medical Graduate registrars working in different regions

Table 2 provides a summary of registrars' training contexts. Most registrars were currently training in General Practice Training (GPT) terms one to three (73%), and eight per cent were currently training in Primary Rural and Remote Training (PRRT) terms one to four. Seventeen 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. Areas of Extended Skills, ARST or AST that had more than ten registrars undertaking training were in the fields of Aboriginal and Torres Strait Islander Health, Emergency Medicine, Dermatology, Obstetrics and Gynaecology, Women's Health, Paediatrics, Anaesthetics and Mental Health.

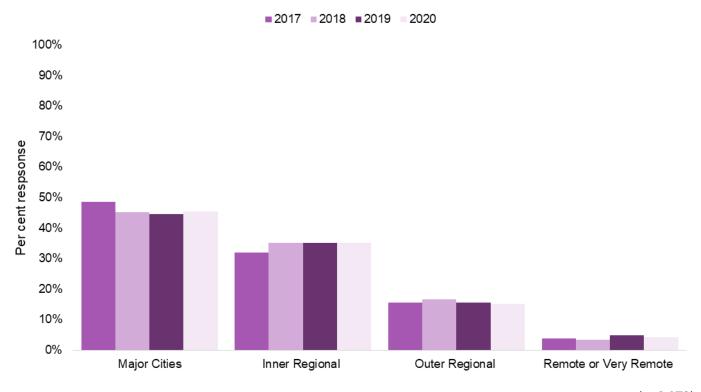
Registrars were asked about the training they did during Semester One, 2020. Most registrars (85%) were training in just one training facility with less than two per cent of registrars training in three training facilities. The majority of registrars – 65 per cent – were working full-time during Semester One, 2020 (this is a reduction from 72 per cent in 2019). As in previous years, a much higher proportion of male registrars (75%) indicated that they were working full time compared with female registrars (59%). More than half of all respondents had dependents (57% of female and 61% of male respondents). Respondents with dependents were more than twice as likely to work part-time (47%) than those with no dependents (19%).

When asked about their experience prior to commencing the AGPT program, eight per cent of registrars had experience working as a GP through the Prevocational General Practice Placements Program (PGPPP) and five per cent through a First Wave Scholarship. A small, but notable proportion of registrars had undertaken training towards another fellowship before starting the AGPT program (12%) or participated in the HECS Reimbursement Scheme (15%). Almost a third of registrars (29%) had completed a term in a Rural Clinical School. This experience seems to be linked to registrars' training choices with 51 per cent of registrars who were completing a fellowship with ACRRM having experience training in a Rural Clinical School compared with just 26 per cent of RACGP registrars, and 57 per cent of registrars who are training to be Rural Generalists having completed a term in a Rural Clinical School.

Table 2: Registrar training contexts

Training contexts		Response (n)	Response (%)
	Less than 0.4	55	4.6
Full time equivalent load	0.5 to 0.6	197	16.6
	0.7 to 0.8	128	10.8
	0.9 to 1.0	807	68.0
	One	1008	85.0
Number of training facilities	Two	162	13.7
	Three	16	1.3
	Prevocational General Practice Placements Program (PGPPP)	91	8.2
	First Wave Scholarship (GP placement in the undergraduate years)	53	4.8
	Rural Clinical School	320	28.5
	Commonwealth Medical Internships	127	11.6
	Bonded Medical Places (BMP) Scheme	166	15.1
	Medical Rural Bonded Scholarship (MRBS) Scheme	66	6.0
Completed prior to training	Rural Australia Medical Undergraduate Scholarship (RAMUS)	67	6.1
	John Flynn Placement program	97	8.8
	State rural generalist programs	61	5.6
	Remote Vocational Training Scheme	12	1.1
	HECS Reimbursement Scheme	169	15.3
	RACGP Practice Experience Program (PEP)	15	1.4
	ACRRM Independent Pathway	12	1.1
	More Doctors for Rural Australia Program	12	1.1
	Community Residency Placement (WA)	23	2.1
	Training towards any other fellowship	136	12.4
	GPT1 Term	364	30.8
	GPT2 Term	135	11.4
	GPT3 Term	363	30.7
	PRRT1	25	2.1
	PRRT2	8	0.7
	PRRT3	31	2.6
	PRRT4	26	2.2
Current training	Extended Skills	160	13.5
	Advanced Rural Skills Training (ARST)	9	0.8
	Advanced Specialised Training (AST)	36	3.0
	Academic post	<4	-
	GPT4 / Extension Awaiting Fellowship	66	5.6
	Mandatory Elective	<4	-
	Extension due to COVID	11	0.9
	Extension awaiting assessment / exams	32	2.7
	Other	10	0.8

Three-quarters of all registrars were training in New South Wales, Queensland or Victoria. As in 2019, fifty-five per cent of the registrars who responded to the survey were training in regional or remote areas of Australia, relatively consistent with registrars who responded to the survey in previous years (Figure 2).



(n=6,078)

Figure 2: Location of registrars' current training facility in 2017 to 2020

Forty-six per cent of all registrars reported moving to their current region to undertake training, this includes 52 per cent of males compared with 43 per cent of females. Similar to the response from 2019, registrars completing a fellowship with ACRRM were more likely to have moved to undertake training (66%) than registrars completing a fellowship with RACGP (44%). International medical graduates were also more likely to have moved to undertake training (63%) than Australian medical graduates (39%).

The proportion of registrars within each training region who had moved to undertake training ranged from between 29 and 75 per cent of respondents. For those registrars working in major cities, only 22 per cent had moved to complete training compared with between 63 and 74 per cent of respondents training in either inner regional, outer regional, or remote locations (Figure 3).



(n=1,082)

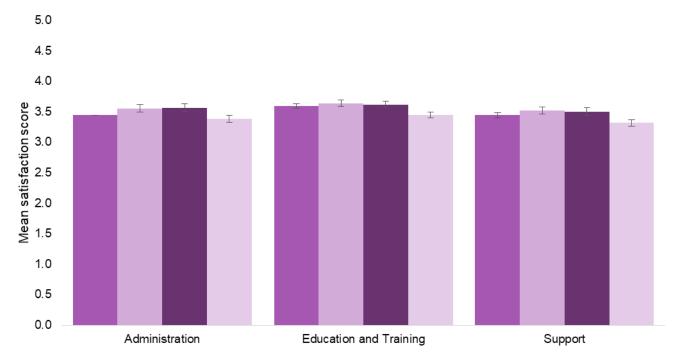
Figure 3: Proportion of registrars who relocated for training by training location

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, although these proportions have dropped across the board by around four percentage points since 2019. In 2020, 84 per cent of registrars were satisfied with the program's education and training, while 82 per cent were satisfied with the administration of the program and 80 per cent with the support they received within the program.

Figure 4 shows that the overall mean satisfaction score⁴ for administration, education and training, and support is significantly smaller in 2020 compared with all other scores since 2017 with the exception of the score for administration in 2017. This coincides with the COVID pandemic causing massive disruption to the world, as well as the failure and subsequent cancelation of exams in the weekend before this survey was launched.

⁴ Response scores were averaged across the five-point scale with one being very dissatisfied and five being very satisfied.



(2017: n=1,684; 2018: n=1,675; 2019: n=1,496, 2020: n=1,179)

Figure 4: Mean overall satisfaction of registrars with the AGPT program from 2017 to 2020

When exploring the average rates of overall satisfaction, there are no significant differences found between female and male registrars, registrars in different age groups, Australian Defence Force (ADF) and non-ADF registrars, Aboriginal and Torres Strait Islander and non-ATSI registrars, nor for registrars training in locations (major cities, inner and outer regional and remote and very remote), for those on the rural or general pathway, for rural generalists and non-rural generalists or for those registrars studying with either ACRRM or RACGP. The only difference in overall satisfaction was seen between International medical graduates who reported significantly higher levels of satisfaction for each overall area of administration, education and training and support provided than Australian medical graduates with mean responses 0.4 points higher for each mean response.

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 (labelled with * in Table 3), 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 <u>infographic</u>.

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 5.

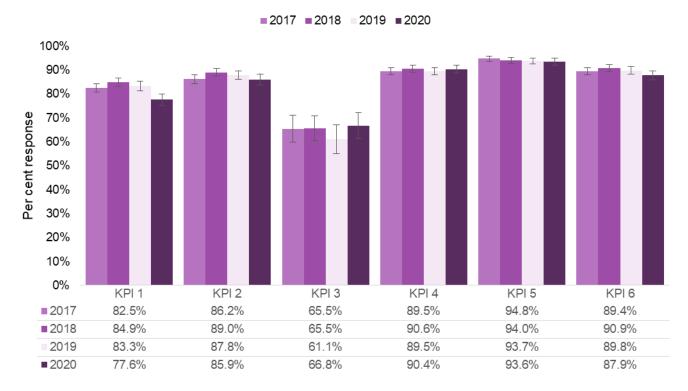
A summary of the KPIs calculated with a '3', '4' or '5 – very satisfied' response are shown in Table 3 along with their error margins reported at a 95 per cent confidence interval. The KPIs for 2020 are statistically reliable to within less than 2.4 percentage points, apart from KPI 3 which is statistically reliable to within 5.3 percentage points.

Table 3: Key Performance Indicators 2020

Key Performance Indicators	Satisfied (%)	Error margin (%)
KPI 1: Overall satisfaction*	77.6	2.4
KPI 2: Satisfaction with RTO support (no incident)*	85.9	2.3
KPI 3: Satisfaction with RTO support (with incident)*	66.8	5.3
KPI 4: Satisfaction with supervision	90.4	1.7
KPI 5: Satisfaction with practice location	93.6	1.4
KPI 6: Satisfaction with infrastructure / resources*	87.9	1.9

(n=1,188)

Figure 5 shows the KPI results from the 2017 to 2020 AGPT NRS calculated from responses of '3', '4' or '5 – very satisfied'. There was a significant drop in KPI 1: Overall Satisfaction from 2019 to 2020, a reduction by nearly six percentage points. In contrast, there was an increase in KPI 3 from 2019 to 2020 (bringing it to its highest reported level of satisfaction since 2017), however, due to larger error margins, this result was not significantly different from 2019. Differences in KPIs 2, 4, 5 and 6 were all within one or two percentage points of last year's results.



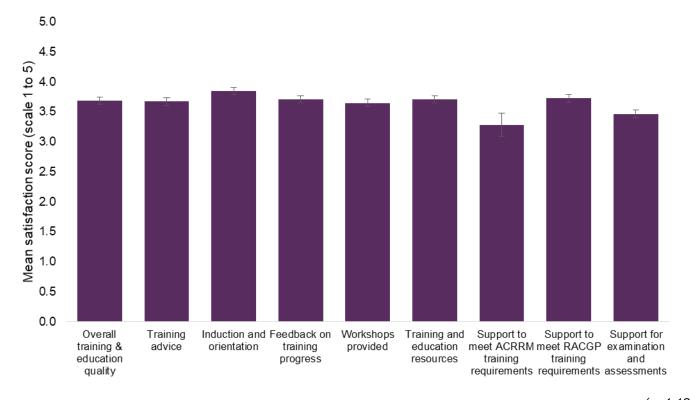
(2017: n=1700; 2018: n=1695; 2019: n=1,492; 2020: n=1188)

Figure 5: Key Performance Indicator results, 2017 to 2020

Satisfaction with RTOs

RTOs have various roles in registrars' training, including providing registrars with support and advice, helping registrars plan their training and learning, managing the placement matching of registrars and training facilities, providing registrars with training resources, and organising education and training events and activities, among others. The 2020 AGPT NRS included several questions that asked registrars about their satisfaction with different aspects of their RTO.

The results, as shown in Figure 6, suggest that registrars are satisfied with their experience with their RTOs, with one exception registrars reported average satisfaction scores of between 3.6 and 3.9 on a five point scale. Registrars rated the induction and orientation provided by RTOs the most positively. Again, registrars completing a FACRRM were much less likely to feel supported by their RTO to meet ACRRM's training requirements (3.3 on the five point scale, an increase from 2.9 in 2019) than registrars who were completing a FRACGP or FARGP were with support from their RTO to meet RACGP's training requirements (3.7).



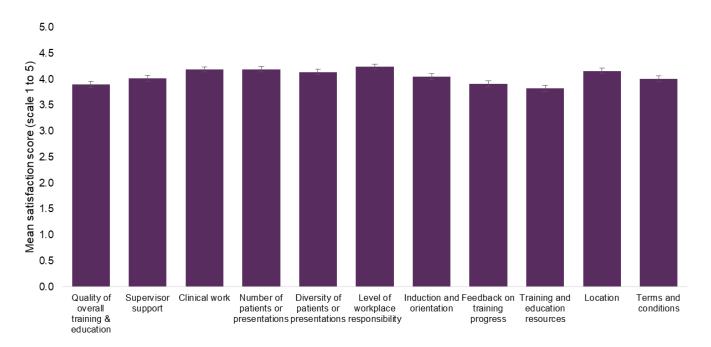
(n=1,180)

Figure 6: Satisfaction with different aspects of RTO

Satisfaction with training facilities

Registrars undertake much of their training while working in general practices, Aboriginal medical services, and other medical facilities. These training facilities have an important role in registrars' training experience. The 2020 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 3.8 and 4.2 on a five point scale. As shown in Figure 7, registrars were most satisfied with the level of workplace responsibility, clinical work, number and the diversity of patients or presentations and location of their training facility.



(n=1,183)

Figure 7: Satisfaction with different aspects of training facilities

Qualitative findings

In addition to being asked to rate their level of satisfaction overall, and with specific aspects of their training experience, registrars were also invited to provide open-ended feedback about their overall experience with training on the AGPT program in response to two questions:

- Given your overall experience with your training, what have been the best aspects of your experience?
- Given your overall experience with your training, what aspects of your experience are most in need of improvement?

Each of the responses provided to these questions were reviewed and thematically coded onto an existing code frame that had been developed in previous administrations of the AGPT NRS. Some additional codes were added to the code frame where new themes had appeared. Each response could be thematically coded onto multiple areas. This section provides a summary of the main themes that were raised in these responses.

When asked about the best aspects of registrars' experience with training, the most frequently cited theme related to registrars' practice workplace and colleagues (21%). These comments related to the level of support provided by supervisors, other clinicians, and administrative staff, as well as the work environment more generally.

"I have been lucky to have an amazing practice and incredibly good doctors as my teachers and supervisors, I love general practice and the opportunity to get hands on in a rural setting" – Female FRACGP registrar training on rural pathway.

"I have enjoyed working in my workplace. It has been challenging during the pandemic but we have worked together as a team" – Female FRACGP registrar training on general pathway.

The next most commonly cited theme related to supervisors and supervision (18%). Many registrars mentioned that their supervisors had provided them with significant support and mentorship.

"The level of supervision and access to supervisors was excellent. They almost always were there to help if needed, and I was never in a position where they didn't help" – Male FRACGP registrar training on rural pathway.

"I have been lucky to be in great training GP practices with clinicians who love to teach & are very good at their jobs. They have also allowed me the perfect balance of supervision and autonomy. I have felt a part of a team" – Female FRACGP & FARGP registrar training on rural pathway.

Another commonly cited theme included the workshops or education days (14%). The aspects of the workshops and education days that registrars mentioned included both the workshop content, delivery, learning opportunities and also having opportunities to meet with other registrars.

"The workshops provided by the RTO are excellent. Great way of learning and covering those basic topics of GP" – Female FACRRM registrar training on rural pathway.

"Loved the half day releases that the RTO provided. Loved the workshops - good for networking, but very good learning opportunities" – Female FRACGP registrar training on rural pathway.

In addition to these themes, registrars also mentioned gaining exposure to a range of cases or patients (10%), the level of overall support (10%), the support provided by their RTO (9%), and gaining clinical or procedural experience (6%).

When asked about the aspects of their experience in training that were most in need of improvement, around six per cent of registrars indicated that nothing in the AGPT program needed improvement. The most commonly mentioned theme was the amount and quality of communication registrars received (15%). These comments related to transparency around the registrar's training requirements, and communication around assessments and exams. Frustrations regarding the communication issues around exam failures were also featured in registrar responses.

"Better communication from college regarding training requirements" – Male FACRRM registrar training on rural pathway.

"Communication from the college. It can be difficult to know what assessments are required/when" – Female FRACGP registrar training on general pathway.

"It is hard to get clear advice on the time commitments, dates of workshops, requirements of placements" – Male FRACGP registrar training on general pathway.

Other areas of the AGPT program that registrars indicated needed improvement related to exam preparation and support (12%), the assessment process (10%), a lack of support (10%), this included well-being support and pastoral care, as well as general support from RTOs and training practices, and registrars' terms and conditions or pay (7%).

Rural and General Pathway

A brief analysis was undertaken to look at whether differences occurred in satisfaction between registrars enrolled in the rural and general pathways. Table 4 indicates that the overall satisfaction does not differ significantly between registrars on the general or rural pathway in either administration, education and training or support.

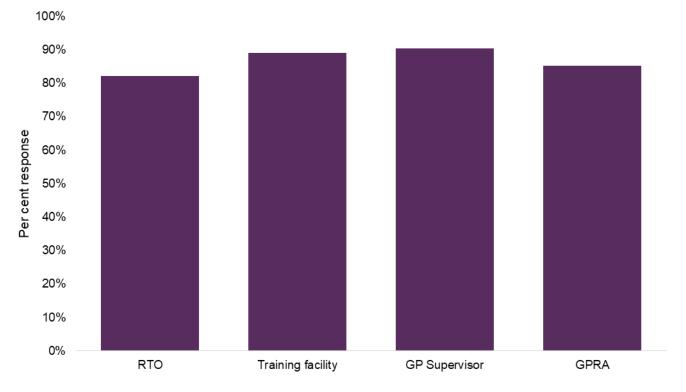
Table 4: Overall Satisfaction of registrars on the general and rural pathways (n=1,179)

Overall Satisfaction	General (%)	Rural (%)
Administration	82.6	82.3
Education and training	81.9	86.6
Support	78.8	80.6

Exposure to a range of cases or patients (42%), clinical or procedural experience (13%), being part of a community / community feeling (11%), autonomy / level of responsibility (8%), being rural or regional (7%) and developing skills / increasing confidence (6%) were most cited as the best reasons for being on the Rural Pathway. Alternatively, nothing (12%), terms and conditions of pay (11%), lack of support (9%), clinical or procedural experience or exposure (8%), supervision or supervisor (7%), specialist access (6%), amount of training or training availability (6%), placement process (6%), lack of support or training for ACRRM or rural or regional registrar (5%) and lack of flexibility (5%) were mentioned as areas of the rural pathway that needed most improvement.

Health and wellbeing

As in the previous few years, registrars were asked a series of questions regarding their health and wellbeing (Figure 8). When these figures were compared with those from 2019, satisfaction with the health and wellbeing support from all of RTOs, training facilities, GP Supervisors and GPRA remained stable.



(n=1,091)

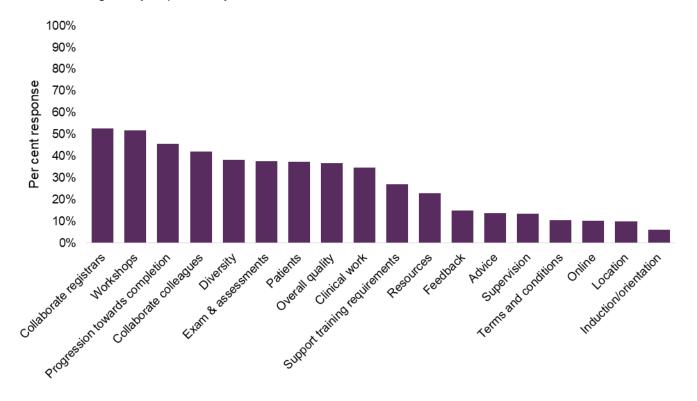
Figure 8: Satisfaction with health and wellbeing support by source of support

The effect of the COVID-19 pandemic on GP registrars' training

In 2020, a set of research questions were developed addressing the effect of the COVID-19 pandemic on GP training. These questions looked at the support that was provided by RTOs, Colleges and training facilities as well as the impact that COVID-19 was having on GP training. They were informed by a brief review of recent research and policy relating to GP training during the pandemic.

Registrars were asked if they had planned to change both RTO or training facility and the effect COVID-19 had on these plans. Only three per cent of registrars reported that they had planned to change RTO and were unable to do so, while two per cent who had planned to change RTO were able to move forward with their change. A larger proportion of registrars moved between training facilities during the pandemic. Ten per cent of all registrars reported that they had plans to move training facility and were able to do so while nine per cent were unable to move.

In 2020, registrars were invited to respond to a series of questions rating the impact that COVID-19 had on different aspects of their training. Figure 9 shows the proportion of registrars who selected either '5 - Very negative impact' or '4' on a 5 point scale, effectively ranking those aspects of their training that were most affected by the COVID-19 pandemic. Ability to collaborate with other registrars, workshops, progression towards completing training requirements and collaborating with colleagues were found by over 40 per cent of all registrars to have been negatively impacted by COVID-19, while more than one-third of all registrars reported that the overall quality of their training and education experience was also negatively impacted (37%). Conversely, quality of training advice, quality of supervision, terms and conditions of employment, online learning, location and induction/orientation were reported by less than 15 per cent of registrars to have been negatively impacted by COVID-19.



(n=1, 134)

Figure 9: Negative impact of COVID-19 on aspects of training

When registrars were asked to rate the support for the delivery of GP training throughout the COVID-19 pandemic, 89 per cent were satisfied with the support provided by the training facility, 79 per cent were satisfied with the support provided by their RTO. Similar results were observed when registrars were asked to rate the communication they received throughout the COVID-19 pandemic with 90 per cent satisfied with communication from their training facility and 81 per cent satisfied with the communication from their RTO.

An open response question asking registrars what could have been improved about the program's response to the COVID-19 pandemic and the change in how the program was delivered was also asked in

this section of questions. The most common responses referred to the issues around the remote proctoring and exam failures. However registrars also suggested that more training could be provided (17%), especially around telehealth and providing advice around COVID-19.

"In the end everyone did a good job in very difficult and uncertain circumstances. The move to telehealth protected our health but some more formal training would have made the transition easier at the time" – Female FRACGP registrar training on general pathway.

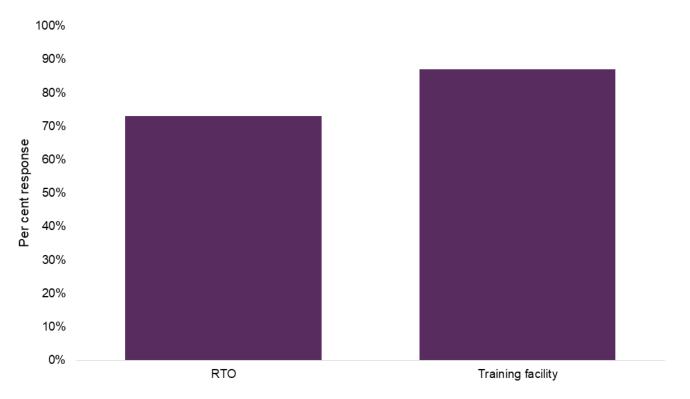
"Additional education and training on how to manage an outbreak of COVID-19 in local area" – Male FRACGP registrar training on rural pathway.

"More support at the beginning of COVID in RTO training workshops about how to safely use PPE, take NP swabs, access DHHS information and resources and conduct telehealth consults" – Female FRACGP registrar training on general pathway.

Other areas around the COVID-19 response that registrars indicated needed improvement related to communication from the colleges (11%), communication in general (9%), support for registrars (9%), and the desire to return to face-to-face training, consultations and workshops (7%), especially in areas which were unaffected by COVID-19.

Telehealth and COVID-19

On the 13 March 2020, the Australian government made available new temporary MBS telehealth items to help reduce the risk of community transmission of COVID-19 and provide protection for patients and health care providers. Seventeen per cent reported that they used telehealth a lot (> 50%), while 45 per cent of all registrars reported that they used telehealth some of the time (20-50%) and one-third reported using it only a little bit of the time (<20%). Only 29 per cent of registrars reported that they had received training in telehealth and of these, 93 per cent were satisfied with their training, while 87 per cent of registrars were satisfied with the support provided by their training facility to transition into telehealth (Figure 10).



(n=1,083)

Figure 10: Satisfaction with support for transition to telehealth consultations

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. A significant proportion of registrars are working, or have had experience working in an Aboriginal health training post. Twenty-one per cent of registrars were either currently training or had already completed a training post in an Aboriginal health training post (for example an Aboriginal Medical Service or Aboriginal Community Controlled Health Service). A further quarter of all registrars who were not currently training, or who had not yet completed training were considering undertaking training in an Aboriginal health training post. In addition, Aboriginal or Torres Strait Islander Health was the most common area in which registrars were undertaking Extended Skills, ARST or AST.

The vast majority of registrars had received an orientation to Aboriginal and Torres Strait Islander health (90%) and training in Aboriginal and Torres Strait Islander cultural safety (87%), although these proportions are slightly down on those reported in 2019 (93% and 92% respectively). Of those registrars currently undertaking training in an Aboriginal health training post (11% of registrars who responded to the survey), 72 per cent had access to a formal cultural mentor, and 92 per cent were satisfied with this support.

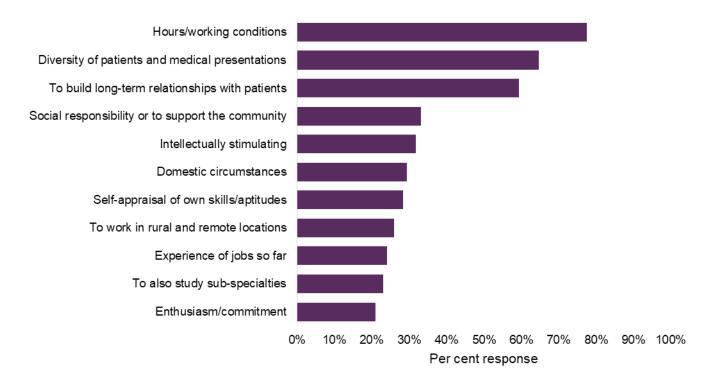
Registrars' training choices

In the 2020 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 (66%) and GP specialisation was reported as the first choice of medical specialisation for 62 per cent of registrars. Twenty-one per cent of registrars indicated that they had applied to other speciality programs prior to starting the AGPT program, these included Emergency Medicine, Basic Physician Training, Paediatrics, Surgical Training, Obstetrics and Gynaecology, and Anaesthesia.

The top three responses for why registrars decided to become GP specialists given in 2020 were the same as those given in 2019, 2018 and 2017. These reasons included the hours and working conditions for this speciality (78%), the diversity of patients and medical presentations (65%), as well as the ability to build long-term relationships with patients (59%). Figure 11 lists the top responses given by at least 20 per cent of registrars for choosing a GP specialisation.

Registrars were also asked about their reasons for selecting their RTO. As in previous years, the most common reason given was the location of the RTO (76%) followed by the available training opportunities (27%) and family or partner support (24%).



(n=1,087)

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 5). The responses indicate that most registrars plan to be working as a GP. A total of 85 per cent of registrars plan to work as a private GP with 38 per cent of registrars indicating they plan to be working full time and 54 per cent working part-time. Consistent with the

Figure 11: Why registrars decided to become GP specialists (top reasons given)

registrars indicating they plan to be working full time and 54 per cent working part-time. Consistent with the results found in previous years, female registrars planning to work as a private GP are much more likely to be planning to work part-time (65%) than male registrars (34%). Once again, in the next five years, nine per cent more male registrars expect to purchase or buy into an existing practice (24%) than female registrars (15%).

One-quarter of all registrars suggested they would like to be working in a rural or remote location in the next five years. When looking at the responses given by registrars in the rural or general pathway streams, 37 per cent of those on the rural pathway intend to work in a rural or remote location in five years' time while only eleven per cent of those in the general pathway have this same intention. Of registrars on the rural pathway 27 per cent would like to be working as a Rural Generalist, compared with only five per cent of registrars in the general pathway. Of those on the rural pathway 20 per cent intend to be working in Aboriginal Health in five years' time compared with only 11 per cent of those in the general pathway.

The majority of registrars indicated that within five years they would like to be involved in medical education (80%), either supervising medical students or registrars, or becoming a medical educator. Encouragingly, only a small proportion 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, medical education, public health or academic research.

Table 5: Career plans in five years' time

Career plans	Per cent (%)
Working full-time as a private GP	37.6
Working part-time as a private GP	53.7
To own their own practice	14.0
To purchase or buy into an existing practice	18.3
Working in Aboriginal and Torres Strait Islander Health	16.1
Working as a GP in another setting (e.g. aged, palliative, home care)	19.1
Working in a rural or remote location	24.8
Working as a Rural Generalist	16.8
Not working as a GP	5.2
Other	37.6

(n=1,084)

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, 39 per cent of these registrars said they plan to stay in their current location, 24 per cent plan to relocate after completing their training and 37 per cent are unsure.

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Appendix C: 2020 AGPT NRS item frequencies

Table 6 to Table 19 include the item frequencies for the closed items included in the 2020 AGPT NRS.

Table 6: 2020 AGPT NRS item frequencies – demographic and contextual items

Item	Response options	N	%
	Eastern Victoria	86	7.2
	South Eastern Queensland	151	12.7
	Tasmania	29	2.4
	North Western Queensland	117	9.8
In which training region was your GP	North Eastern NSW	175	14.7
training delivered in Semester One,	Lower Eastern NSW	102	8.6
2020?	Western NSW	77	6.5
	South Australia	119	10.0
	Western Victoria	183	15.4
	Northern Territory	37	3.1
	Western Australia	112	9.4
NAM : 1 6 H	FRACGP	1041	87.6
Which fellowship are you currently	FACRRM	125	10.5
working towards?	FARGP	64	5.4
	0.0 to 0.2	19	1.6
At what full time equivalent (FTE) load	0.3 to 0.4	36	3.0
were you employed during Semester	0.5 to 0.6	197	16.6
One, 2020?	0.7 to 0.8	128	10.8
	0.9 to 1.0	807	68.0
In how many training facilities were	One	1008	85.0
you employed during Semester One,	Two	162	13.7
2020?	Three	16	1.3
	GPT1 Term	364	30.8
	GPT2 Term	135	11.4
	GPT3 Term	363	30.7
	PRRT1	25	2.1
	PRRT2	8	0.7
	PRRT3	31	2.6
	PRRT4	26	2.2
What training were you undertaking	Extended Skills	160	13.5
during Semester One, 2020?	Advanced Rural Skills Training (ARST)	9	0.8
	Advanced Specialised Training (AST)	36	3.0
	Academic post	<4	-
	GPT4 / Extension Awaiting Fellowship	66	5.6
	Mandatory Elective	<4	-
	Extension due to COVID	11	0.9
	Extension awaiting assessment / exam	32	2.7
	Other	10	0.8
Did you complete any of the following terms prior to commencing the Australian General Practice Training (AGPT) program?	Prevocational General Practice	01	
	Placements Program (PGPPP)	91	8.2
	First Wave Scholarship (GP placement in	53	4.8
	the undergraduate years)		
	Rural Clinical School	320	28.5
	Commonwealth Medical Internships	127	11.6

Item	Response options	N	%
	Bonded Medical Placements (BMP)	166	15.1
	Scheme	100	10.1
	Medical Rural Bonded Scholarship (MRBS) Scheme	66	6.0
	Rural Australia Medical Undergraduate Scholarship (RAMUS)	67	6.1
	John Flynn Placement program	97	8.8
	State rural generalist programs	61	5.6
	Remote Vocational Training Scheme	12	1.1
	HECS Reimbursement Scheme	169	15.3
	RACGP Practice Experience Program (PEP)	15	1.4
	ACRRM Independent Pathway	12	1.1
	More Doctors for Rural Australia Program	12	1.1
	Community Residency Placement (WA)	23	2.1
	Training towards any other fellowship	136	12.4
	Aboriginal and Torres Strait Islander Health	23	16.4
	Academic practice	<4	-
	Adult Internal Medicine	7	5.0
	Anaesthetics	11	7.9
	Dermatology	17	12.1
	Emergency Medicine	19	13.6
JE VES TO AST EXTENDED	Medical Education	8	5.7
<pre><if arst="" ast,="" extended="" or="" skills,="" to="" yes=""> Were you training</if></pre>	Men's Health	<4	-
in any of the following areas of	Mental Health	10	7.1
Extended Skills (FRACGP), Advanced	Obstetrics and Gynaecology	12	8.6
Specialised Training (FACRRM) or	Paediatrics	11	7.9
Advanced Rural Skills Training	Palliative Care	<4	-
(FARGP) during Semester One, 2020?	Population Health	<4	-
	Remote Medicine	<4	-
	Skin Cancer Medicine	5	3.6
	Small Town Rural General Practice (STRGP)	<4	-
	Surgery	0	0.0
	Women's Health	11	7.9
	Other	18	1.5
Are you currently training on the rural	Rural pathway	582	49.1
or general pathway?	General pathway	604	50.9

Table 7: 2020 AGPT NRS item frequencies – satisfaction with RTO

Item	Response options	N	%		
How would you rate your satisfaction w	How would you rate your satisfaction with the following aspects of your RTO in Semester One, 2020?				
	Very dissatisfied	52	4.4		
Overall training 9 advection guality	2	104	8.8		
Overall training & education quality	3	279	23.6		
	4	475	40.3		
	Very satisfied	270	22.9		
Training advice	Very dissatisfied	57	4.8		

Item	Response options	N	%
	2	102	8.7
	3	284	24.1
	4	465	39.4
	Very satisfied	271	23.0
	Very dissatisfied	28	2.4
La Lagrana de Santaga	2	69	5.9
Induction and orientation	3	278	23.9
	4	468	40.2
	Very satisfied	320	27.5
	Very dissatisfied	40	3.4
	2	95	8.1
Feedback on training progress	3	289	24.6
	4	494	42.0
	Very satisfied	258	21.9
	Very dissatisfied	60	5.1
	2	104	8.9
Workshops provided	3	321	27.5
	4	392	33.5
	Very satisfied	292	25.0
	Very dissatisfied	44	3.8
	2	100	8.5
Training and education resources	3	296	25.3
	4	444	37.9
	Very satisfied	288	24.6
	Very dissatisfied	11	8.9
Support to meet ACRRM training	2	16	12.9
requirements	3	35	28.2
	4	51	41.1
	Very satisfied	11	8.9
	Very dissatisfied	50	4.7
Support to meet RACGP training	2	93	8.8
requirements	3	226	21.4
	4	413	39.1
	Very satisfied	273	25.9
	Very dissatisfied	81	6.9
Support for examination and	2	150	12.8
assessments	3	314	26.9
	4	393	33.6
	Very satisfied	231	19.8

Table 8: 2020 AGPT NRS item frequencies – satisfaction with training facility

Item	Response options	N	%
How would you rate your satisfaction	n with the following aspects of your training	g facility (e.g. your prac	ctice, your
hospital) in Semester One, 2020?			
	Very dissatisfied	42	3.6
Quality of overall training and education	2	73	6.2
	3	218	18.5
	4	477	40.4

Item	Response options	N	%
	Very satisfied	371	31.4
	Very dissatisfied	40	3.4
	2	73	6.2
Supervisor support	3	188	16.0
	4	400	34.0
	Very satisfied	477	40.5
	Very dissatisfied	15	1.3
	2	32	2.7
Clinical work	3	146	12.3
	4	515	43.5
	Very satisfied	475	40.2
	Very dissatisfied	20	1.7
	2	36	3.0
Number of patients or presentations	3	157	13.3
	4	456	38.5
	Very satisfied	514	43.4
	Very dissatisfied	15	1.3
	2	42	3.6
Diversity of patients or presentations	3	183	15.5
	4	469	39.6
	Very satisfied	474	40.1
	Very dissatisfied	12	1.0
	2	41	3.5
Level of workplace responsibility	3	127	10.7
	4	472	39.9
	Very satisfied	531	44.9
	Very dissatisfied	30	2.6
	2	51	4.3
Induction and orientation	3	207	17.6
	4	428	36.5
	Very satisfied	457	39.0
	Very dissatisfied	40	3.4
	2	65	5.5
Feedback on training progress	3	238	20.2
	4	458	38.8
	Very satisfied	379	32.1
	Very dissatisfied	34	2.9
	2	87	7.4
Training and education resources	3	268	22.7
	4	453	38.3
	Very satisfied	340	28.8
	Very dissatisfied	22	1.9
	2	54	4.6
Location	3	173	14.7
	4	395	33.5
	Very satisfied	535	45.4
	Very dissatisfied	39	3.3
Terms and conditions	2	66	5.6
remis and conditions	3	193	16.4
	4	437	37.1

Item	Response options	N	%
	Very satisfied	444	37.7

Table 9: 2020 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?			
	Very dissatisfied	66	5.6
	2	141	12.0
Administration	3	405	34.4
	4	409	34.7
	Very satisfied	157	13.3
	Very dissatisfied	63	5.3
	2	121	10.3
Education and training	3	378	32.1
	4	459	38.9
	Very satisfied	158	13.4
	Very dissatisfied	83	7.1
	2	155	13.2
Support provided	3	402	34.2
	4	379	32.2
	Very satisfied	158	13.4

(n=1,179)

Table 10: 2020 AGPT NRS item frequencies – complaints and/or grievance process

Item	Response options	N	%
Are you familiar with your RTO's	No	438	37.1
formal complaints and/or grievance	Yes	477	40.4
process?	Unaware process existed	267	22.6
Could you readily access your RTO's	No	352	30.9
formal complaints and/or grievance process if needed?	Yes	788	69.1
Have you ever made a formal written	No	1101	94.3
complaint relating to your training on the AGPT program?	Yes	67	5.7

(n=1,182)

Table 11: 2020 AGPT NRS item frequencies – adverse event or incidence

Item	Response options	N	%
Thinking about all of your AGPT	No	878	74.4
training to date, have you experienced an adverse event or incident?	Yes	302	25.6
	RTO	149	50.2
<if yes=""> From which of the following sources did you seek assistance or support to cope with the adverse event or incident?</if>	Your training facility	115	38.7
	General Practice Registrars Australia (GPRA)	51	17.2
	Did not seek assistance or support	51	17.2
	AMA	6	2.0

Item	Response options	N	%
	MDO/Insurance Provider	17	5.7
	Other	60	20.2
	Very dissatisfied	37	24.8
<if rto=""> How would you rate your satisfaction with the assistance or support your RTO provided during or after an adverse event or incident?</if>	2	27	18.1
	3	24	16.1
	4	36	24.2
	Very satisfied	25	16.8

(n=1,180)

Table 12: 2020 AGPT NRS item frequencies – registrars' health and wellbeing

Item	Response options	N	%
How would you rate your satisfaction wit	<u> </u>	ded to you by	
	Very dissatisfied	72	6.6
	2	116	10.6
DTO	3	284	26.0
RTO	4	340	31.2
	Very satisfied	243	22.3
	Not applicable	36	3.3
	Very dissatisfied	45	4.1
	2	72	6.6
Analytica Continu	3	221	20.3
training facility	4	369	33.8
	Very satisfied	362	33.2
	Not applicable	22	2.0
	Very dissatisfied	39	3.6
	2	62	5.7
	3	180	16.5
GP supervisor	4	310	28.5
	Very satisfied	461	42.3
	Not applicable	37	3.4
	Very dissatisfied	33	3.0
	2	90	8.3
General Practice Registrar Association	3	354	32.6
(GPRA)	4	242	22.3
	Very satisfied	110	10.1
	Not applicable	256	23.6
Do you have your own independent	No	310	28.4
GP?	Yes	780	71.6
Are you living away from your	No	633	58.2
immediate family?	Yes	454	41.8
	0	414	41.7
How many dependents do you have?	1 or 2	423	42.6
(e.g. children, parents)?	3 or 4	135	13.6
	5 or more	20	2.0

Table 13: 2020 AGPT NRS item frequencies – impact of COVID-19

Item	Response options	N	%
The following questions ask about the su	upport and impact the COVID-19 pandemic	has had on your	GP training.
	No, I had not planned to change RTO	1078	95.1
Did COVID-19 restrictions impact your plans to change RTO?	No, I had planned to change RTO and	24	2.1
	was able to do so Yes, I had planned to change RTO and		
	was unable to do so	32	2.8
	No, I had not planned to change training practice	909	80.4
Did COVID-19 restrictions impact your	No, I had planned to change training	116	10.3
plans to change training practices?	Practice and was able to do so Yes, I had planned to change training		
	practice and was unable to do so	106	9.4
How would you rate the impact of COVII	D-19 on each of these aspects of your GP tr	aining	
	Very negative impact	99	8.7
	2	318	28.1
Overall evelity	3	503	44.4
Overall quality	4	115	10.2
	Very positive impact	35	3.1
	Unsure	62	5.5
	Very negative impact	37	3.3
	2	117	10.4
	3	650	57.5
Supervision	4	191	16.9
	Very positive impact	72	6.4
	Unsure	63	5.6
	Very negative impact	73	6.5
	2	318	28.2
	3	490	43.5
Clinical work	4	164	14.6
	Very positive impact	51	4.5
	Unsure	30	2.7
	Very negative impact	94	8.3
	2	330	29.2
	3	481	42.5
Patients	4	156	13.8
	Very positive impact	49	4.3
	Unsure	22	1.9
	Very negative impact	94	8.3
	2	341	30.1
	3	480	42.4
Diversity	4	141	12.5
	Very positive impact	42	3.7
	Unsure	34	3.0
	Very negative impact	21	1.9
Induction/orientation	2	49	4.4
maddion/onomation	3	643	57.4
	J	043	37.4

Item	Response options	N	%
	4	151	13.5
	Very positive impact	61	5.4
	Unsure	196	17.5
	Very negative impact	45	4.0
	2	125	11.1
E II I	3	640	56.8
Feedback	4	167	14.8
	Very positive impact	58	5.1
	Unsure	92	8.2
	Very negative impact	73	6.5
	2	185	16.4
	3	561	49.8
Resources	4	175	15.5
	Very positive impact	58	5.1
	Unsure	75	6.7
	Very negative impact	41	3.6
	2	72	6.4
	3	660	58.7
Location	4	156	13.9
	Very positive impact	74	6.6
	Unsure	122	10.8
	Very negative impact	36	3.2
	2	84	7.5
- 1 100	3	663	58.9
Terms and conditions	4	162	14.4
	Very positive impact	54	4.8
	Unsure	126	11.2
	Very negative impact	36	3.2
	2	121	10.8
Advisa	3	652	58.0
Advice	4	149	13.2
	Very positive impact	58	5.2
	Unsure	109	9.7
	Very negative impact	247	21.9
	2	336	29.8
Workshaps	3	309	27.4
Workshops	4	114	10.1
	Very positive impact	56	5.0
	Unsure	64	5.7
	Very negative impact	97	8.6
	2	209	18.6
Support training requirements	3	541	48.1
Support training requirements	4	148	13.2
	Very positive impact	59	5.2
	Unsure	71	6.3
Evam & accomments	Very negative impact	209	18.6
Exam & assessments	2	213	19.0

Item	Response options	N	%
	3	436	38.9
	4	114	10.2
	Very positive impact	46	4.1
	Unsure	104	9.3
	Very negative impact	256	22.7
	2	258	22.9
Progression towards completion	3	411	36.5
Progression towards completion	4	108	9.6
	Very positive impact	45	4.0
	Unsure	49	4.3
	Very negative impact	34	3.0
	2	82	7.3
Online	3	456	40.4
Offilitie	4	328	29.1
	Very positive impact	161	14.3
	Unsure	67	5.9
	Very negative impact	165	14.6
	2	309	27.4
Callabarata callaggues	3	427	37.8
Collaborate colleagues	4	132	11.7
	Very positive impact	46	4.1
	Unsure	50	4.4
	Very negative impact	278	24.7
Callab a rate va nietva va	2	314	27.9
	3	340	30.2
Collaborate registrars	4	110	9.8
	Very positive impact	35	3.1
	Unsure	47	4.2

(n=1,134)

Table 14: 2020 AGPT NRS item frequencies – telehealth

Item	Response options	N	%
During the COVID-19 pandemic, what	None	43	3.8
proportion of your patient	A little (< 20%)	378	33.5
consultations have been virtual /	Some (20-50%)	513	45.4
telehealth?	A lot (> 50%)	196	17.3
How would you rate the support in the tr	ansition to telehealth consultations by your		
	Very dissatisfied	94	8.7
	2	198	18.3
RTO	3	458	42.3
	4	240	22.2
	Very satisfied	93	8.6
Training facility	Very dissatisfied	46	4.3
	2	95	8.8
	3	351	32.4
	4	361	33.4

	Very satisfied	229	21.2
Did you receive training in telehealth consultations?	No	801	71.5
	Yes	320	28.5
How would you rate the training you received in telehealth consultations?	Very dissatisfied	4	1.3
	2	17	5.3
	3	140	43.9
	4	122	38.2
	Very satisfied	36	11.3

(n=1, 130)

Table 15: 2020 AGPT NRS item frequencies – support and communication through COVID-19

Item	Response options	N	%
Overall, how would you rate the sup your	oport for the delivery of GP training thro	oughout the COVID-19 par	ndemic from
	Very dissatisfied	86	7.6
	2	151	13.4
RTO	3	420	37.3
	4	334	29.7
	Very satisfied	134	11.9
	Very dissatisfied	38	3.4
	2	87	7.7
Training facility	3	354	31.5
	4	414	36.8
	Very satisfied	231	20.6
Overall, how would you rate the cor	mmunication about your GP training the	roughout the COVID-19 pa	andemic from
	Very dissatisfied	69	6.1
	2	142	12.6
RTO	3	393	34.9
	4	350	31.1
	Very satisfied	171	15.2
	Very dissatisfied	43	3.8
	2	65	5.8
Training facility	3	362	32.2
•	4	403	35.9
	Very satisfied	251	22.3

(n=1, 125)

Table 16: 2020 AGPT NRS item frequencies – Aboriginal and Torres Strait Islander health and culture

Item	Response options	N	%
In Semester One, 2020, were you	No	963	88.9
training in an Aboriginal health training post (e.g. an Aboriginal Medical Service or Aboriginal Community Controlled Health Service)?	Yes	120	11.1
<if no=""> Have you completed or are you considering undertaking training in an Aboriginal health training post (e.g.</if>	I have already completed training	111	11.6
	I am considering undertaking training	271	28.2
	None of the above	578	60.2

Item	Response options	N	%
an Aboriginal Medical Service or Aboriginal Community Controlled Health Service)?			
Since commencing the AGPT	No	114	10.5
program, have you had an orientation to Aboriginal and Torres Strait Islander health?	Yes	973	89.5
Since commencing the AGPT	No	147	13.5
program, have you had training in Aboriginal and Torres Strait Islander cultural safety?	Yes	942	86.5
<if an<="" currently="" in="" td="" working=""><td>No</td><td>33</td><td>27.7</td></if>	No	33	27.7
ABORIGINAL TRAINING POST> Do you have access to a formal cultural mentor for support with issues relevant to Aboriginal and Torres Strait Islander people?	Yes	86	72.3
	Very dissatisfied	<4	-
<if yes=""> How satisfied are you with the guidance from this cultural mentor on Aboriginal and Torres Strait Islander cultural safety questions?</if>	2	4	4.7
	3	13	15.1
	4	34	39.5
, ,	Very satisfied	32	37.2

(n=1,083)

Table 17: 2020 AGPT NRS item frequencies – registrars' training choices

Item	Response options	N	%
	While I was at school	63	5.8
	Early in my medical degree	194	17.8
	Late in my medical degree	181	16.7
	In my first year out of medical school	126	11.6
	More than one year out of medical school	398	36.6
When did you decide to become a	After trying another specialty	257	23.6
specialist GP?	While in the Australian Defence Force	<4	-
	When working in another career	<4	-
	When I moved to Australia	4	0.4
	After completing another degree, prior to medical degree	10	0.9
	Whilst working in a hospital	9	0.8
	Other	13	1.2
	Hours/working conditions	842	77.5
	Diversity of patients and medical presentations	703	64.7
	To build long-term relationships with patients	645	59.3
Why did you decide to become a specialist GP?	Social responsibility or to support the community	360	33.1
	Intellectually stimulating	346	31.8
	Domestic circumstances	319	29.3
	Self-appraisal of own skills/aptitudes	308	28.3
	To work in rural and remote locations	282	25.9
	Experience of jobs so far	262	24.1

Item	Response options	N	%
	To also study sub-specialties	250	23.0
	Enthusiasm/commitment	228	21.0
	Student experience of subject	146	13.4
	Inclinations before medical school	145	13.3
	Advice from others	145	13.3
	Particular teacher, department or role model	128	11.8
	Eventual financial prospects	97	8.9
	Promotion/career prospects	95	8.7
	The training program is fully funded by the Commonwealth Government	50	4.6
	Other	18	1.5
	ADF	10	0.9
Was GP specialisation your first choice	No	415	38.4
of specialty? Did you apply to any other specialty programs at the same time or before you applied to become a GP specialist?	Yes	667	61.6
	No	862	79.4
	Yes	224	20.6

(n=1,087)

Table 18: 2020 AGPT NRS item frequencies – choice of RTO

Item	Response options	N	%
	Location	825	76.2
	Training opportunities	290	26.8
	Family/partner support	260	24.0
	Reputation of the RTO	164	15.2
	Lifestyle	161	14.9
What were the main reasons you chose your RTO as your training	Recommended by peers	98	9.1
provider?	Career links with region	56	5.2
•	Only RTO operating in state or region	49	4.5
	Did not have a choice over RTO	24	2.2
	Other	15	1.4
	Through selection process	5	0.5
	ADF	4	0.4

(n=1,082)

Table 19: 2020 AGPT NRS item frequencies - registrars' future plans

Item	Response options	N	%
	Would like to be supervising medical students.	681	62.1
Within the next five years, you would	Would like to be supervising registrars.	583	53.2
like to be	Would like to be a medical educator.	333	30.4
	Would not like to be involved in doctor training.	218	19.9
In five years, you would like	to be working full time as a private GP.	408	37.6
	to be working part-time as a private GP.	582	53.7
	to own your own practice	152	14.0

Item	Response options	N	%
	to purchase or buy into an existing practice	198	18.3
	to be working in Aboriginal Health	174	16.1
	to be working as a GP in another setting	207	19.1
	to be working in a rural or remote location	269	24.8
	to be working as a Rural Generalist	182	16.8
	to be not working as a GP	56	5.2
	other	75	6.9
Did you move to the current region to	No	582	53.6
undertake the AGPT program?	Yes	503	46.4
Do you intend to stay in this region after completing the AGPT program?	No	179	16.4
	Yes	600	55.0
	Unsure	312	28.6

(n=1,096)

Appendix D: 2020 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 2020 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 10 minutes to tell us about your experience as a general practice registrar in Semester One, 2020 by clicking on the 'Next' button below. Your responses help the Department of Health, RTOs and Colleges improve your and other registrars' experience in the Australian General Practice Training (AGPT) program.

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 in accordance with the ACT Health Human Research Ethics Committee ethics approval process.

We encourage you to participate in the 2020 Australian General Practice Training National Registrar Survey.

Question	Item	Response options
Which regional training organisation (RTO) delivered your		Eastern Victoria GP Training
GP training in Semester One, 2020 ?		General Practice Training Queensland
		General Practice Training Tasmania
		GP Synergy
		GPEx
	-	JCU General Practice Training
		Murray City Country Coast GP Training
		Northern Territory General Practice
		Education
		Western Australian General Practice
		Education Training
<if rto="GP" synergy="">In which training region was your</if>		North Eastern NSW
GP training delivered in Semester One, 2020 ?	-	Lower Eastern NSW
		Western NSW
Which fellowship are you currently working towards?	FRACGP	Not selected
If you are undertaking a dual or triple fellowship, please select all that apply.	FACRRM	Selected
	FARGP	
Solot an that apply.	Other (please specify)	OPEN RESPONSE

Question	Item	Response options
At what full time equivalent (FTE) load were you employed		0.0 to 0.2
during Semester One, 2020?		0.3 to 0.4
		0.5 to 0.6
1.0 FTE is equivalent to 38 hours per week, i.e. 0.2 = 1 day.		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 extended="" for="" leave="" on="" td="" whole<=""><td></td><td></td></if>		
SEMESTER>Thank you for taking the time to participate in		
the Australian General Practice Training National Registrar		Note that the survey will be terminated
Survey (AGPT NRS). You are not required to respond this	-	Note that the survey will be terminated here.
year.		nere.
Please press Next to finalise your input.		
If you were training in a hospital during Semester One,		Hospital intern (PGY1)
2020 , which of the following terms were you undertaking?		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</if>		
the Australian General Practice Training National Registrar		
Survey (AGPT NRS). You are not required to respond this	_	Note that the survey will be terminated
year.		here.
Please press Next to finalise your input.		
In how many training facilities were you employed during		One
Semester One, 2020?	-	Two
		Three or more
<if one="">What is the postcode of the GP training facility</if>	_	NUMERICAL RESPONSE
where you were employed during Semester One , 2020 ?		
<if more="" one="" than=""> What is the postcode of the GP</if>		NUMERICAL RESPONSE
training facility where you were employed for the most time	-	
during Semester One, 2020?		

Question	Item	Response options
What training were you undertaking during Semester One,	GPT1 Term	Not selected
2020 ?	GPT2 Term	Selected
Please select all that apply.	GPT3 Term	_
Trouse scient all that apply.	PRRT1	_
	PRRT2	_
	PRRT3	_
	PRRT4	_
	Extended Skills	_
	Advanced Rural Skills Training (ARST)	_
	Advanced Specialised Training (AST)	_
	Academic post	_
	Other (please specify)	OPEN RESPONSE
Did you complete any of the following terms prior to commencing the Australian General Practice Training	Prevocational General Practice Placements Program (PGPPP)	No Yes
(AGPT) program?	First Wave Scholarship (GP placement in the	_
	undergraduate years)	_
	Rural Clinical School	_
	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	
	RACGP Practice Experience Program (PEP)	
	ACRRM Independent Pathway	

Question	Item	Response options
	More Doctors for Rural Australia Program	
	Community Residency Placement (WA)	
	Training towards any other fellowship	
<if (6e),="" (6h),="" arst<="" ast="" extended="" or="" skills="" td="" to="" yes=""><td>Aboriginal and Torres Strait Islander Health</td><td>Not selected</td></if>	Aboriginal and Torres Strait Islander Health	Not selected
(6f)>	Academic practice	Selected
Were you training in any of the following areas of Extended Skills (FRACGP), Advanced Specialised Training	Adult Internal Medicine	_
(FACRRM) or Advanced Rural Skills Training (FARGP)	Anaesthetics	_
during Semester One, 2020?	Dermatology	_
	Emergency Medicine	
Please select all that apply.	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
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?</if>	-	OPEN RESPONSE
on the rural pathway? <if rural=""> What aspects of your experience training on</if>		
the rural pathway are most in need of improvement?	-	OPEN RESPONSE

Question	Item	Response options
Please note that unless otherwise stated, all questions referri	ng to 'your RTO' relate to <insert name:<="" rto="" td=""><td>>.</td></insert>	>.
All questions referring to 'your training facility' relate to the ma		-
The following questions ask about your satisfaction with your		
How would you rate your satisfaction with the following aspects of your RTO in Semester One, 2020 ?	Quality of overall training and education experience	1 Very dissatisfied 2
	Quality of training advice	_ 3
If any of the following statements do not apply, please leave blank.	Induction/orientation provided	45 Very satisfied
DIATIK.	Feedback on your training progress	- 5 very satisfied
	Workshops provided	_
	Training and education resources available	_
	<if college="ACRRM"> Support to meet</if>	_
	ACRRM training requirements	_
	<if college="RACGP"> Support to meet</if>	
	RACGP training requirements	_
	Support for examination and assessments	
How would you rate your satisfaction with the following aspects of your training facility (e.g. your practice, your	Quality of overall training and education experience	1 Very dissatisfied 2
hospital) in Semester One, 2020?	Quality of supervision	_ 3
If any of the following etatements do not apply places loave	Clinical work	- 4
If any of the following statements do not apply, please leave blank.	Number of patients or presentations	 5 Very satisfied
	Diversity of patients or presentations	_
	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	_

Question	Item	Response options
<if college="ACRRM"></if>	assessment?	1 Very dissatisfied
Thinking about your experience with ACRRM , how would	curriculum?	2
you rate your satisfaction with:	communication?	3
	the support they provide to you?	5 Very satisfied Not applicable
<if college="RACGP"></if>	assessment?	1 Very dissatisfied
Thinking about your experience with RACGP, how would	curriculum?	2
you rate your satisfaction with:	communication?	3
	the support they provide to you?	5 Very satisfied Not applicable
Thinking about all of your AGPT training to date, overall how satisfied are you with each of the following?	Administration	1 Very dissatisfied
now satisfied are you with each of the following:	Education and training	3
	Support	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		OPEN RESPONSE
aspects of your experience are most in need of improvement?	-	
The following questions ask about your RTO's complaints an	d grievance process.	
Are you familiar with your RTO's formal complaints and/or		No
grievance process?	•	Yes
		Unaware process exists
Could you readily access your RTO's formal complaints	-	No
and/or grievance process if needed?		Yes
Have you ever made a formal written complaint relating to your training on the AGPT Program?	-	No Yes
your training on the AGFT Flogram?		162

Question	Item	Response options
Thinking about all of your AGPT training to date, have you		
experienced an adverse event or incident?		
<help text=""></help>		No
An adverse event or incident is one that creates disruption,	-	Yes
danger or risk resulting in a negative consequence, injury or undesired outcome for registrars, patients, training practice		
or RTO staff.		
<if yes=""> From which of the following sources did you seek</if>	RTO	Not selected
assistance or support to cope with the adverse event or	Your training facility	- Selected
incident?	General Practice Registrars Australia (GPRA)	-
		_
Please select all that apply.	Did not seek assistance or support	
	Other (please specify)	OPEN RESPONSE
<if rto=""> How would you rate your satisfaction with the</if>		1 Very dissatisfied
assistance or support your RTO provided during or after an		2
adverse event or incident?	-	3
		5 Very satisfied
<if (1,="" 2="" 3)="" dissatisfied="" or=""> How could your RTO have</if>		OPEN RESPONSE
supported you better during or after an adverse event or	_	OF ENTREOF ONCE
incident?		
Please note that unless otherwise stated, all questions referri	ng to 'your RTO' relate to <your rto=""></your>	
, ,	,	
All questions referring to 'your training facility' relate to the ma	ain practice, hospital or academic post where you	were assigned in Semester One, 2020.
The following questions ask about the support and impact the	e COVID-19 pandemic has had on your GP training	g.
Did COVID-19 restrictions impact your plans to change	· · · · · · · · · · · · · · · · · · ·	No, I had not planned to change RTO
RTO?		No, I had planned to change RTO and was
	•	able to do so
		Yes, I had planned to change RTO and was unable to do so

Question	Item	Response options
Did COVID-19 restrictions impact your plans to change		No, I had not planned to change training
training practices?		practice
	-	No, I had planned to change training
		practice and was able to do so Yes, I had planned to change training
		practice and was unable to do so
How would you rate the impact of COVID-19 on each of these aspects of your GP training	Quality of overall training and education experience	1 Very negative impact 2
	Quality of supervision	3
	Clinical work	── 4 — 5 Very positive impact
	Number of patients or presentations	Unsure
	Diversity of patients or presentations	_
	Induction/orientation provided	
	Feedback on your training progress	_
	Training and education resources available	
	Location	
	Terms and conditions of employment	_
	Quality of training advice	
	Workshops provided	
	Support to meet training requirements	
	Support for examination and assessments	
	Progression towards completing training requirements	
	Online learning	
	Ability to collaborate with colleagues	_
	Ability to collaborate with other registrars	
		None
During the COVID-19 pandemic, what proportion of your patient consultations have been virtual / telehealth?	-	A little (< 20%)
		Some (20-50%) A lot (> 50%)
	RTO	1 Very dissatisfied

Question	Item	Response options
How would you rate the support in the transition to	training facility?	2
		3
telehealth consultations by your:	College?	4 5 Mars and Grant
		5 Very satisfied No
Did you receive training in telehealth consultations?	-	Yes
		1 Very dissatisfied
<if yes=""> How would you rate the training you received in</if>		2
telehealth consultations?	-	3
toonount conditations.		4
	PTO	5 Very satisfied
	RTO?	1 Very dissatisfied
Overall, how would you rate the support for the delivery of	training facility?	2 3
GP training throughout the COVID-19 pandemic from your:	<pre><if college="ACRRM"> ACRRM?</if></pre>	5
	<pre><if college="RACGP"> RACGP?</if></pre>	5 Very satisfied
	your RTO?	1 Very dissatisfied
Overall, how would you rate the communication about	your training facility?	2
your GP training throughout the COVID-19 pandemic from:	<if college="ACRRM"> ACRRM</if>	 3
	<if college="RACGP"> RACGP</if>	5 Very satisfied
Thinking about your experience this year during the COVID-		
19 pandemic, how could your GP training have been improved?	-	OPEN RESPONSE
Please note that unless otherwise stated, all questions referr	ing to 'vour RTO' relate to <your rto="">.</your>	
The second secon	g to your tire relate to the continue.	
All questions referring to 'your training facility' relate to the m	ain practice, hospital or academic post where	you were assigned in <u>Semester One, 2020</u> .
How would you rate your satisfaction with the health and	your RTO?	1 Very dissatisfied
wellbeing support provided to you by	your training facility?	 2
	<pre></pre> <pre></pre> <pre></pre> <pre></pre> <pre></pre>	3
	<pre><if college="RACGP"> RACGP?</if></pre>	4 5 Very satisfied
	your GP Supervisor?	Not applicable
	,	: : : : :

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,		NUMERICAL RESPONSE
parents)?		
Did you move to the current region to undertake the AGPT		No
program?		Yes
Do you intend to stay in this region after completing the		No
AGPT program?		Yes
		Unsure
The following questions ask about the training related to About	riginal and Torres Strait Islander culture that you	have received.
In Semester One, 2020, were you training in an Aboriginal		No
health training post (e.g. an Aboriginal Medical Service or	-	Yes
Aboriginal Community Controlled Health Service)?		
<if no=""> Have you completed or are you considering</if>		I have already completed training
undertaking training in an Aboriginal health training post		I am considering undertaking training
(e.g. an Aboriginal Medical Service or Aboriginal		None of the above
Community Controlled Health Service)?		
Since commencing the AGPT program, have you had an		No
orientation to Aboriginal and Torres Strait Islander health?	-	Yes
Since commencing the AGPT program, have you had		No
training in Aboriginal and Torres Strait Islander cultural	-	Yes
safety?		
<if aboriginal<="" an="" currently="" in="" td="" working=""><td></td><td>No</td></if>		No
TRAINING POST> Do you have access to a formal cultural		Yes
mentor for support with issues relevant to Aboriginal and	-	
Torres Strait Islander people?		

Question	Item	Response options
<if yes=""> How satisfied are you with the guidance from this</if>	S	1 Very dissatisfied
cultural mentor on Aboriginal and Torres Strait Islander		2
cultural safety questions?	-	3
		4 5) (
Discount that welcon otherwise stated all sweetings of	THE R AS INC. OF DECLARATE AS A VOLUDIOR	5 Very satisfied
Please note that unless otherwise stated, all questions refe	erning to your RTO relate to <your rto="">.</your>	
All questions referring to 'your training facility' relate to the r	main practice, hospital or academic post where you	were assigned in Semester One , 2020 .
The following questions ask about your choice of specialisa	ation, fellowship and RTO, and your future plans.	
When did you decide to become a specialist GP?	While I was at school	Not selected
Diagram adject all that apply	Early in my medical degree	Selected
Please select all that apply.	Late in my medical degree	
	In my first year out of medical school	_
	More than one year out of medical school	-
	After trying another specialty	-
	Other (please specify)	OPEN RESPONSE
Why did you decide to become a specialist GP?	To build long-term relationships with patients	Not selected
	To also study sub-specialities such as	Selected
Please select all that apply.	anaesthesia, emergency medicine, paediatrics,	
	obstetrics and gynaecology	_
	The training program is fully funded by the Commonwealth Government	
	To work in rural and remote locations	-
		_
	Intellectually stimulating	_
	Diversity of patients and medical presentations	_
	Domestic circumstances	_
	Hours/working conditions	_
	Eventual financial prospects	_
	Promotion/career prospects	

Question	Item	Response options
	Self-appraisal of own skills/aptitudes	
	Advice from others	
	Student experience of subject	_
	Particular teacher, department or role model	
	Inclinations before medical school	_
	Experience of jobs so far	
	Enthusiasm/commitment	
	Social responsibility or to support the community	_
	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	_	No
time or before you applied to become a GP specialist?		Yes
<if yes=""> What other specialty programs did you apply to?</if>		OPEN RESPONSE
<if fellowship="" single=""> What was your main reason for choosing your GP fellowship?</if>	-	OPEN RESPONSE
<if dual="" fellowship=""> What was your main reason for choosing to undertake a dual GP fellowship?</if>	-	OPEN RESPONSE
<if fellowship="" triple=""> What was your main reason for choosing to undertake a triple GP fellowship?</if>	-	OPEN RESPONSE
What were the main reasons you chose your RTO as your	Family/partner support	Not selected
training provider?	Location	Selected
Please select all that apply.	Lifestyle	
	Training opportunities	_
	Career links with region (e.g. earlier	
	placement, Prevocational General Practice	
	Placements Program (PGPPP))	
	Reputation of the RTO	
	Recommended by peers	

Question	Item	Response options
	Other (please specify)	OPEN RESPONSE
Within the next five years, you would like to be	teaching or supervising medical students.	Not selected
Please select all that apply.	supervising registrars.	Selected
	a medical educator.	_
	not involved in doctor training.	_
In five years, you would like	to be working full time as a private GP.	Not selected
Please select all that apply.	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 working as a Rural Generalist.	
	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, RTOs and Colleges 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 the Project Manager, Rebecca Taylor, ACER, 19 Prospect Hill Road, Camberwell, Victoria 3124, nrs@acer.org.

Appendix E: Accessible text alternatives for figures

Infographic text alternative

National Registrar Survey 2020

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 1,188 registrars who participated in the 2020 survey.

Training experience

- 87% were satisfied with their overall training and education from their RTO
- 90% were satisfied with the overall training and education they received from their training facility
- 90% were satisfied with the supervisor support
- 96% were satisfied with the level of workplace responsibility
- 96% were satisfied with the clinical work
- 84% of registrars were satisfied with the overall education and training

Registrar characteristics

- 64% of respondents were female
- 1.5% identified as Aboriginal or Torres Strait Islander
- 56% were between 30 to 39 years of age
- 31% were International Medical Graduates
- 49% were on the rural pathway

Location of training facility

- 45% in Major Cities
- 35% in Inner Regional Australia
- 15% in Outer Regional Australia
- 4% in Remote

COVID-19

Most Negatively Impacted

- 53% Collaboration with registrars
- 52% Workshops
- 46% Progression towards completion
- 42% Collaboration with colleagues
- 38% Diversity of cases

Telehealth

- 17% of registrars conducted over half of their consultations as telehealth
- 87% were satisfied with the support from their training facility to transition to telehealth
- 73% were satisfied with the support from their RTO to transition to telehealth
- 29% received telehealth training and of these, 93% were satisfied with their telehealth training

Overall satisfaction with response to COVID-19

- 79% were satisfied with the support from their RTO
- 89% were satisfied with the support from their training facility
- 81% were satisfied with the communication from their RTO
- 90% were satisfied with the communication from their training facility

Text alternative for Figures

Table 20: Proportion of Australian Medical Graduate and International Medical Graduate registrars working in different regions (alternative for Figure 1)

Training facility location	Australian Medical Graduate	International Medical Graduate
Major cities	54.3	26.4
Inner regional	28.7	49.1
Outer regional	12.4	21.0
Remote or very remote	4.6	3.5

Table 21: Location of registrars' current training facility in 2017 to 2020 (alternative for Figure 2)

Training facility location	2017	2018	2019	2020
Major cities	48.6	45.1	44.6	45.3
Inner regional	32.0	35.0	35.0	35.2
Outer regional	15.6	16.6	15.6	15.2
Remote or very remote	3.8	3.3	4.8	4.2

Table 22: Proportion of registrars who relocated for training by training location (alternative for Figure 3)

Region	Did not relocate for training	Relocated for training
Major cities	77.6	22.4
Inner regional	36.7	63.3
Outer regional	30.1	69.9
Remote or very remote	26.5	73.5

Table 23: Mean overall satisfaction of registrars with the AGPT program from 2017 to 2020 (alternative for Figure 4)

Area	2017	2018	2019	2020
Administration	3.4	3.6	3.6	3.4
Education and training	3.6	3.6	3.6	3.4
Support	3.4	3.5	3.5	3.3

Table 24: Key Performance Indicators from the years 2013 to 2020 (alternative for Figure 5)

Key Performance Indicators	2017 (%)	2018 (%)	2019 (%)	2020 (%)
KPI 1: Overall satisfaction	82.5	84.9	83.3	77.6
KPI 2: Satisfaction with RTO support (no incident)	86.2	89.0	87.8	85.9
KPI 3: Satisfaction with RTO support (with incident)	65.5	65.5	61.1	66.8
KPI 4: Satisfaction with supervision	89.5	90.6	89.5	90.4
KPI 5: Satisfaction with practice location	94.8	94.0	93.7	93.6
KPI 6: Satisfaction with infrastructure / resources	93.8	93.8	93.9	87.9

Table 25: Satisfaction with different aspects of RTO (alternative for Figure 6)

Area of RTO satisfaction	Average satisfaction score
Overall training & education quality	3.7
Training advice	3.7
Induction and orientation	3.8
Feedback on training progress	3.7
Workshops provided	3.6
Training and education resources	3.7
Support to meet ACRRM training requirements	3.3
Support to meet RACGP training requirements	3.7
Support for examination and assessments	3.5

Table 26: Satisfaction with different aspects of training facilities (alternative for Figure 7)

Area of training facility satisfaction	Average satisfaction score
Quality of overall training & education	3.9
Supervisor support	4.0
Clinical work	4.2
Number of patients or presentations	4.2
Diversity of patients or presentations	4.1
Level of workplace responsibility	4.2
Induction and orientation	4.0
Feedback on training progress	3.9
Training and education resources	3.8
Location	4.2
Terms and conditions	4.0

Table 27: Satisfaction with health and wellbeing support by source of support (alternative for Figure 8)

Source of support	Per cent (%)
RTO	82.2
Training facility	89.1
GP supervisor	90.4
GPRA	85.2

Table 28: Negative impact of COVID-19 on aspects of training (alternative for Figure 9)

Aspect of training	Per cent (%)
Collaborate registrars	52.7
Workshops	51.8
Progression towards completion	45.6
Collaborate colleagues	42.0
Diversity	38.4
Exam & assessments	37.6

Aspect of training	Per cent (%)
Patients	37.5
Overall quality	36.8
Clinical work	34.7
Support training requirements	27.2
Resources	22.9
Feedback	15.1
Advice	14.0
Supervision	13.6
Terms and conditions	10.7
Online	10.3
Location	10.0
Induction/orientation	6.2

Table 29: Satisfaction with support for transition to telehealth consultations (alternative for Figure 10)

Source of support	Per cent (%)
RTO	73.0
Training facility	87.0

Table 30: Why registrars decided to become GP specialists (top reasons given) (alternative for Figure 11)

Reasons	Per cent (%)
Hours/working conditions	77.5
Diversity of patients and medical presentations	64.7
To build long-term relationships with patients	59.3
Social responsibility or to support the community	33.1
Intellectually stimulating	31.8
Domestic circumstances	29.3
Self-appraisal of own skills/aptitudes	28.3
To work in rural and remote locations	25.9
Experience of jobs so far	24.1
To also study sub-specialties	23.0
Enthusiasm/commitment	21.0