Rural General Practice Term Education Release Program

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Background

The Royal Australian College of General Practitioners Training Program is the national training program for general practice and is funded by the Federal Government.

The Royal Australian College of General Practitioners defines general practice as the provision of primary, continuing, comprehensive, whole patient care to individuals, families and their communities.

The Training Program provides a three year course of experience and training in both hospital and community settings with a fourth advanced rural skills year for identified rural trainees. It combines clinical experience under supervision with structured educational activities.

The end point of training is the College exam. Upon satisfactory completion of the experience, education and assessment requirements, trainees are eligible for the award of the Fellowship of the Royal Australian College of General Practitioners.

Basic GP Terms

Trainees send a minimum of 18 months of their training in general practice placements with supervision and teaching relevant to their experience and learning needs.

The first six of these 18 months are in ‘basic GP terms’. These are three month placements in RACGP teaching practices where the accredited GP supervisor is readily available to the trainee to provide support and guidance and to answer questions. In addition, the supervisor and trainee spend two to three hours each week in formal teaching sessions in which the trainee’s knowledge and experience are extended and grounded in a general practice context.

During the basic term, trainees are released from the practice to attend a formal education program. Trainees in metropolitan terms attend the State Office, Trawalla, for a day each fortnight (six days). Trainees in rural terms attend two two-and-a-half day workshops, the first a residential workshop in a rural setting, the second a month later at the State Office of the Program.

Rural GP Terms

Approximately 60% of our trainees undertake a three month rotation into country general practice early in their training. Many are hesitant at first, fearing isolation and lack of support. They may also be reluctant to leave their social networks and connections in the city.
If our aim is to encourage people into rural practice then it is vital that these early terms are positive experiences providing: a welcoming practice and community, a supportive environment, good facilities, positive role models, a balanced and varied patient load, ready access to educational resources and regular contact with peers.

Rationale for the Rural Release Program

The program is organised and presented by rural GPs, GP supervisors and medical educators from the State office. We also involve rural GPs’ partners, practice managers and allied health professionals.

It allows learning to occur in a rural context exposing trainees to a range of role models, each having their own style and particular special interests, older and younger, male and female, who work in rural practice part-time and full-time.

Perhaps most significantly the residential program allows time for informal contact, for the trainees to get to know each other and the resource people, to build connections and networks and to move beyond knowledge and skills to values and beliefs.

Content and Methods

The program includes sessions on dermatology, paediatrics, communication skills, consulting techniques, emergencies, living and working in a rural setting, practical procedures, dealing with difficult emotions, geriatrics, child abuse, musculoskeletal medicine, women’s health, concepts and models of general practice, cultural aspects of health and illness, breast and cervical cancer screening, stress management and relation, approaches to behaviour change - and many more.

The methods used include small group processes, reflection, problem-based learning, didactic presentations, practical procedure workshops, multi-disciplinary approaches, bushwalking and rock climbing, feedback on performance, trainee presentations, and panels of rural general practitioners and their partners.

Evaluation and Development

The programs are evaluated by means of a plenary discussion, a written participant evaluation sheet, informal comments, review by course organisers and resource people and subsequent follow-up visits with participants.