GP Registrar
The essential guide for general practice registrars

Inside
Negotiating a great career
Exam preparation
Looking after yourself
Training resources
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The aim of *GP Registrar* is to assist general practice registrars navigate their way through the maze of general practice training.

This 2015 edition covers employment as a registrar, including employment terms and conditions; exam preparation, including advice on study partners and how to utilise practice case studies; support, including wellbeing tips and the importance of looking after yourself; and training resources, including information about the Australian General Practice Training program.

*GP Registrar: The essential guide for general practice registrars* has been prepared by registrars for registrars. The guide has been produced using sustainable environmentally friendly printing techniques and paper; an approach that reflects GPRA’s ethos of supporting tomorrow’s general practitioners, and their families, in their quest for sustainable careers in general practice.

General Practice Registrars Australia Ltd is the voice and peak body for the next generation of general practitioners. We work to improve the health care of all Australians through excellence in education and training, and by promoting general practice as the medical specialty of choice.
GPRA would like to acknowledge the support of our patron, Professor Michael Kidd AM.

Professor Kidd is Executive Dean of the Faculty of Health Sciences at Flinders University, President of the World Organization of Family Doctors (WONCA) and past president of the RACGP.
## Contents

### On the cover

Dr Jas Saini is loving his life as a GP registrar. A role he says, that allows him to build rich relationships with his patients – as life coach, advocate, personal trainer, physician, emergency physician and surgeon. Read Jas’ story on page 18.

<table>
<thead>
<tr>
<th>Page</th>
<th>Section</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Message from the Chair</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>About GPRA</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Dr Kate Thornton on GPRA</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Introducing GPRA</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>GPRA membership</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>GPRA committees and networks</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Employment as a registrar</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Dr Jas Saini on employment</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Your first placement</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Calling Australia home</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Getting through it</td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Statutory terms and conditions of employment</td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Schemes and incentives</td>
<td></td>
</tr>
<tr>
<td>29</td>
<td>National Terms and Conditions for the Employment of Registrars</td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Find your benchmark</td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Your employment agreement</td>
<td></td>
</tr>
<tr>
<td>34</td>
<td>Choosing the right placement</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Exams – the finish line</td>
<td></td>
</tr>
<tr>
<td>38</td>
<td>Dr Letitia Clark on fellowship exams</td>
<td></td>
</tr>
<tr>
<td>41</td>
<td>ACRRM and RACGP Fellowship exams</td>
<td></td>
</tr>
<tr>
<td>43</td>
<td>Studying with peers</td>
<td></td>
</tr>
<tr>
<td>44</td>
<td>Exam preparation</td>
<td></td>
</tr>
<tr>
<td>46</td>
<td>GPRA webinars</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Support that counts</td>
<td></td>
</tr>
<tr>
<td>48</td>
<td>Dr Cass Wys on wellbeing</td>
<td></td>
</tr>
<tr>
<td>51</td>
<td>Looking after yourself</td>
<td></td>
</tr>
<tr>
<td>53</td>
<td>Staying sane</td>
<td></td>
</tr>
<tr>
<td>54</td>
<td>If things go wrong</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Training resources</td>
<td></td>
</tr>
<tr>
<td>58</td>
<td>Dr Sidya Raghavan on resources</td>
<td></td>
</tr>
<tr>
<td>61</td>
<td>Registrar liaison officers</td>
<td></td>
</tr>
<tr>
<td>62</td>
<td>The AGPT program</td>
<td></td>
</tr>
<tr>
<td>63</td>
<td>Resources for the road</td>
<td></td>
</tr>
</tbody>
</table>

**GP Registrar – The essential guide for general practice registrars**
“I am part of MDA National because …

they offer grassroots support through training and advocacy of junior doctors. They supported many societies and organisations that I was involved in during medical school, and these play a valuable role in the development of junior doctors. As my career grows, MDA National’s training and advocacy programs provide ongoing educational opportunities…”

On behalf of General Practice Registrars Australia (GPRA), I am very proud to introduce the 2015 edition of GP Registrar. With so many changes afoot in general practice training it is fantastic to be able to offer such a useful resource to fellow general practice trainees. GP Registrar provides tips, resources and stories that will help you during your time in training and beyond.

GP Registrar has been prepared by fellow GP registrars, and GPRA staff who specialise in dealing with general practice training issues. The expertise evident in this guide could be invaluable when you are first starting out in general practice. If you’re reading here at the start of the guide, I implore you to read on and make use of the essential information that lies beyond.

GPRA is the voice of the next generation of general practitioners, from medical students to newly qualified GPs. GPRA’s key aims include:

• representing the interests of all GP registrars and supporting them through the training program
• advocating on key issues affecting GP registrars, with the changes to the GP training program a current major focus
• providing resources for exam preparation
• providing support to registrars to help maintain resilience
• preparation for life and practice beyond the training program.

Inside GP Registrar you will read about different options for training pathways, crucial information on your employment conditions, and some fantastic exam preparation resources. Be inspired by the stories of some of the amazing lives GP registrars lead around Australia.

For those with a passion for more, GP Registrar explains how you can become involved in a GPRA committee. GPRA committees focus on a wide array of areas relevant to GP registrars, including Indigenous health, medical education and the quality of general practice training in Australia. At a time of significant change, I urge you now more than ever to get involved, and remain informed as we work towards the best possible future for general practice training.

General practice is an infinitely rewarding career: We are specialists in undifferentiated illness, preventive care and chronic disease management. The privilege of building an ongoing relationship with patients to guide them through all stages of life is a unique one that I encourage you to embrace. Beyond that, the possibilities are endless. The flexibility and variety that is possible in general practice is one of its greatest attributes — general practitioners work in all areas, in the widest array of roles, and your biggest problem is going to be in the choosing!

Congratulations on a fine choice of specialty, and welcome to general practice.

Dr David Chessor
GPRA Chair
Choose your own adventure

Open up your career options with a Fellowship of ACRRM, the only GP training program specifically designed to equip doctors to handle the challenges of rural and remote medicine.

www.acrrm.org.au
1800 223 226
About GPRA
GPT2 registrar Dr Kate Thornton is actively involved with GPRA as an RLO, a member of the Wellbeing Committee and the GP Registrar Advisor of this guide. While she offers support to her patients, she says GPRA is supporting her:

“I think GPRA does a fantastic job of supporting registrars,” declares Dr Kate Thornton.

“You could ask them a question about pay or feeling burnt out or whatever you want to ask, and they will answer it and guide you in the right direction,” she adds, describing GPRA’s telephone advisory service.

“Then there are all the resources on the website. We should all be using the website more often because there is some really great information there.”

If Kate sounds like a walking advertisement for GPRA, it’s understandable. She has recently made the leap from passenger’s seat to driver’s seat at GPRA by taking on roles on the Wellbeing Committee and as the registrar advisor of this guide.

In the registrar advisor role, Kate acts as another set of eyes on the information and tips in GP Registrar, reviewing it through the prism of the end user and suggesting any necessary changes. “My job is to make sure the content is well targeted at registrars like me,” she says.

A strength of the guide is that it features tips that come not from the top down but peer-to-peer from other registrars.

Kate’s best tip for new registrars? Find out in advance if your practice has a dummy patient on their computer system.

“On my first day I really struggled with the computer system and the printer and ordering tests, which surprised me,” Kate recalls.

“I thought as part of the computer-literate generation I would be fine with that stuff but I found that quite challenging and it really did make my first day difficult.

“I’ve now found out that they’ve got a dummy patient, so you can practise in advance if you tee it up with the practice manager.”

Kate is currently working in a GP clinic at Corio on the outskirts of Geelong. “Corio is traditionally quite a disadvantaged area so there’s a lot of poverty, substance abuse and unemployment there,” Kate explains.

Working with people at society’s margins may be challenging but Kate finds it rewarding. “I think unfortunately some people in Australia don’t have as many opportunities in life and have poorer health than others so that’s the sort of area I’d like to work in.”

Kate says it’s gratifying when she can help people make healthier lifestyle choices. “It’s really satisfying when you can support someone to make the decision to quit smoking, and you can see that they’re motivating themselves and bringing about change in their life.”

But Kate cautions registrars not to be disheartened if their patients lapse, or are not 100 percent pure in their new healthy habits. “It’s all about being realistic. I think part of your journey in your first
“We should all be using the website more often because there is some really great information there.”
year or two as a GP registrar is having to accept
the real world.”

Patients who attempt to give up smoking during
pregnancy are a case in point, she says. “I see a lot
of pregnant teenagers. For them, success is cutting
back from 20 cigarettes to five cigarettes while
they’re pregnant even though it’s not what’s in the
textbooks. That can be satisfying to see – bringing
about small changes.”

Kate grew up in Melbourne and studied science
at university but later decided she was more
interested in people than petri dishes. “I did a
science degree at Melbourne Uni, which I enjoyed,
but I really felt I wanted to use science to be around
people. I chose to do medicine as a graduate
course at the ANU in Canberra,” she says.

General practice was always Kate’s first choice
of medical specialty, although she did consider
psychiatry. She continues to pursue her interest in
mental health within the general practice setting,
and sees a significant number of mental health cases.

Kate’s interest in complex cases and marginalised
populations began early during her training. As a
junior hospital doctor, she did a PGPPP term at a
diverse inner-city practice in Canberra where the
patient mix included substance abusers, gay and
transgender people, HIV-positive people
and refugees

One patient made a profound impression on
Kate. The case involved a homeless 21-year-old
refugee with a five-year-old son who presented
to the clinic in a labile emotional state and 19
weeks pregnant. “The management plan that my
supervisor and I devised had to address both
regular antenatal care issues and the patient’s
social issues,” Kate recounts.

Kate says she would like to do more work in the
socio-medical field of refugee health in the future.

Kate believes it’s vital for GP registrars to make
room for exercise and personal time. “Planning the
week in advance helps,” she says.

Kate squeezes fitness into her week by regularly
cycling to work – a 12-kilometre ride.

When we spoke to her she was about to head to
Queensland with her partner Sam to run in a half-
marathon in a team triathlon. “Sam did the swim
and my dad did the bike ride,” she says.

But she also enjoys less energetic weekends away,
having recently returned from time out at a vegan
bed and breakfast.

So what’s Kate’s take-home message for registrars
about getting involved with GPRA? Definitely sign
up as a member, she says, because there’s so much
support on offer:

You can choose to volunteer for a committee if
that interests you and gain valuable experience in
policy, governance and the broader issues of
general practice – and make some great networking
contacts and friends along the way. Or alternatively
you can simply use the website resources or go to
the webinars.

“Everyone’s different and GPRA allows you to be
involved to the degree your time commitments
will allow,” she says.

Written by Jan Walker
Introducing General Practice Registrars Australia

General Practice Registrars Australia (GPRA) is the peak national representative body in Australia for general practice registrars. We produce a range of resources to support registrars throughout their training and assessment, provide direct support and advocate for their interests with other stakeholders.

Some of the things we do to directly benefit general practice registrars are:

- Produce and facilitate professional development webinars on exam skills, financial matters, clinical topics and more
- Support registrar liaison officers (RLOs) in their provision of peer support to registrars within their regional training providers (RTPs)
- Provide individual support to registrars going through any appeals process as part of their training
- Produce a range of resources such as guides on how to negotiate employment conditions, in-practice teaching, exam preparation and self care
- Negotiate the terms and conditions of employment for registrars
- Advocate for the interests of registrars and provide a conduit for them to get advice on, and address issues with, training or employment
- Represent the views of general practice registrars to government, training providers, colleges and other stakeholders.

GPRA is run by registrars, for registrars. Our Board of Directors is elected from the membership and includes a junior doctor or a medical student, up to five GP registrars and three co-opted directors. The Board is responsible for corporate governance, our financial sustainability, and for advancing registrar issues to stakeholders.

We are informed by an Advisory Council which consists of RLOs from every RTP and national registrar representatives from various stakeholders. The Council is in communication all-year-round, forming an Australia-wide network providing and sharing solutions to both local and national training issues.

The Board relies on the Advisory Council to provide feedback and information on registrar policy issues in order to advance these issues in the national arena.

GPRA also promotes general practice as the medical specialty of choice to medical students and junior doctors. We do this via:

- the General Practice Students Network and the First Wave Scholarship program for university students
- the Going Places Network for junior doctors.

Shaping the future of general practice

Students, junior doctors and GP registrars are the future of general practice. GPRA provides critical feedback to stakeholders and the government in order to improve general practice training in Australia. At a time when general practice is undergoing a substantial reshaping, we are the voice of the future. We work hard together with other stakeholders for the common purpose of advancing the profession and the health care of all Australians.
GPRA membership
Your registrar community

Being a member of GPRA provides many professional and personal benefits – and it’s free!

Registrar membership
Registrar membership is open to all general practice registrars from acceptance into general practice training, through to two years post-fellowship.

Members have full voting rights for two-years post-fellowship, and can remain Associate Members after this time. Associate Members* currently enjoy similar benefits to voting members.

Membership to GPRA is free.

Membership benefits
As a GPRA Member you have access to the following:

- Online exam resources specifically developed for registrars by registrars
- Regular enewsletters to keep you informed about issues that matter to registrars
- The opportunity to contribute to committees considering a wide range of policy issues
- Discounts on conference registrations, products and services.

Four easy ways to become a member of GPRA

- Tear out the membership form at the back of this guide
- Go to gpra.org.au
- Email registrarenquiries@gpra.org.au
- Phone 03 9629 8878

* Associate membership is available to medical students through the General Practice Students Network, junior doctors through the Going Places Network and doctors who are not on the AGPT or RVTS training program and other stakeholders. Visit gpra.org.au for more information.
The committees

GPRA committees were formed by the GPRA Advisory Council to progress issues or ideas of importance to Council. Committees are one of the primary drivers behind GPRA policy development and progression and cover a wide range of issues from rural training to wellbeing, assessment and standards to closing the gap.

GPRA advocates on behalf of GP registrars via the activities of the registrar services team, Advisory Council, committees, networks and the Board. Most issues are first raised within the Advisory Council via discussions and reports from the committees.

Key policy and advocacy areas GPRA will be working on in 2015 include rural issues, support for Aboriginal and Torres Strait Islander registrars, terms and conditions of employment, assessment and standards, and furthering the recognition and support for registrar medical educators and emerging supervisors.

How the committees work

GPRA committees promote discussion within both the Advisory Council and the committees, and work to produce outcomes that can be embraced and implemented by other stakeholders. They achieve this by meeting regularly via a web-based conferencing platform to collaborate, and by communicating via email groups. Secretarial and infrastructure support is provided to each of the committees by GPRA.

The work of many of our committees to improve the Australian General Practice Training (AGPT) program has been integrated into the various standards and policies that govern the program. Committees and networks are a great way to gain experience in governance and advocacy, and to broaden your industrial knowledge of general practice.

GPRA currently has committees working in the following areas:

Assessment and standards

This committee’s primary focus is with ACRRM and RACGP assessments and standards. The RACGP will implement new standards in 2015, which means the Committee will be heavily involved in surveillance and reporting on the new standards from a registrar’s point of view.

Closing the gap

The Close the Gap Committee works to reduce the inequality in health experienced by Aboriginal and Torres Strait Islander peoples and to promote this issue within the AGPT. The Committee works closely with the Indigenous General Practice Registrar Network and the General Practice Students Network Close the Gap Working Group.

International medical graduates

International medical graduates (IMGs) represent around one-quarter of the Australian medical workforce. The International Medical Graduate Committee represents IMG registrars and investigates issues relevant to this group. The Committee is currently developing a publication relating to IMGs.

Registrar wellbeing

Wellbeing is an issue often overlooked in the registrar community. The Wellbeing Committee aims to promote the wellbeing of registrars – and doctors – in their workplaces. The Committee recently produced a poster for consulting rooms that reminds patients that they are in a workplace.
Rural issues

Often rural registrars face unique difficulties. The Rural Committee is interested in all issues concerning rural registrars including workforce issues, rural incentive payments and the various state rural generalist pathways.

Terms and conditions

This committee negotiates the terms and conditions for registrars with General Practice Supervisors Australia every two years. The next round of negotiations will occur in 2016. The committee also monitors and investigates any issues with terms and conditions at other times.

How GPRA policy is created

In the first instance, issues are generally raised within the Advisory Council. The relevant committee then investigates change and develops potential solutions to the issue at hand. This often involves working with external stakeholders to develop industry-wide policy statements. A good example of this process is the statement of principles and discussion paper, Fatigue Management in Vocational General Practice Training, which is available on our website.

Get involved

Any GPRA member can join a committee. It’s a great way to be involved, get your ideas heard and make a difference. It’s also a great introduction to governance, and the industry and stakeholders behind general practice. Meetings are held regularly via a web-based conferencing platform.

If you are interested in joining one of our committees or networks, or would like to know more, email registrarenquiries@gpra.org.au

The networks

The Indigenous General Practice Registrars Network

In 2008, and with the assistance of GPET, the Indigenous General Practice Registrars Network (IGPRN) was established by a group of Aboriginal and Torres Strait Islander GP registrars. In 2012, GPRA agreed to manage the co-ordination of the network, with the objective of providing more targeted assistance to its members.

The aim of IGPRN is to assist all Indigenous GP registrars through to fellowship by providing support throughout their training and assessment. The network is there for when times are challenging, and also to celebrate achievements.

IGPRN undertakes exam preparation and peer debriefing via online study groups, discussion forums, and two face-to-face workshops each year.

If you are an Aboriginal or Torres Strait Islander GP registrar (or up to two years post-fellowship) we welcome your involvement in the network. Email igprnenquiries@gpra.org.au

General Practice Registrar Medical Educators Network

The ability to educate others is a crucial role in general practice – for patients, fellow health professionals and junior colleagues. Becoming a registrar medical educator (RME) is a useful and supported way to test the waters when considering a career in medical education.

The General Practice Registrar Medical Educators Network (GPRMEN) was formed by GPRA to provide a professional network for RMEs and to advocate for the role to exist in a quality framework.
The network provides peer support for RMEs around the country via online discussion forums and web-based conferencing.

The RME role includes:

- Teaching to a number of different levels, including GP registrars, junior doctors and medical students
- Delivering lectures, workshops, small group tutorials, problem based learning and clinical skills tutorials
- Networking with RTPs and other stakeholders
- Working with RTPs to plan and deliver education, including policy, curriculum and resource development
- Undertaking further professional development.

The workload generally ranges from 1–5 sessions per week, with 3–9 sessions of clinical practice to complete the working week.

**General Practice Registrar Emerging Supervisor Network**

Many supervisors begin their career in mentoring the next generation of GPs without much formal training in supervision. Many registrars feel the calling of supervision, but the path towards becoming a supervisor can be less than obvious. In order to provide peer-to-peer networking and guidance to potential supervisors, GPRA formed the General Practice Registrar Emerging Supervisor Network (GPRESN).

GPRESN is our newest network, so now is a great time to join if you have an interest in becoming a supervisor further down the track.

GPRMEN and GPRESN run free webinars each month on topics relevant to RMEs and supervisors. The topics covered represent best-practice teaching and supervision from leaders in the industry.

For more information about joining GPRMEN or GPRESN, email the registrar services team at registrarenquiries@gpra.org.au or phone 03 9629 8878

Dr Patrick McCarthy, GPRMEN Chair and Dr Letitia Clark, GPRESN Chair, at the GPRA Advisory Council meeting, Brisbane, September 2014
Employment as a registrar
Dr Jas Saini once ran a part-time business helping people get jobs. Now he shares his job market smarts with other GP registrars as a member of GPRA’s Terms and Conditions Committee and as a presenter of contract negotiation webinars.

GP registrar Dr Jas Saini sounds self-assured but, like many new registrars, he faced his first general practice term with trepidation.

“I was very nervous when I started my first term as a GP registrar,” he recalls. “Starting your first general practice term is a big transition for registrars. You’re going from the hospital setting to what is essentially a small business enterprise. All of a sudden you’re no longer working on salary, you’re generating your income as a private practitioner. So it’s a very nerve-racking time.”

A couple of years on, with the finishing line of his GP fellowship in sight, Jas has grown in confidence and offers advice to his less experienced registrar colleagues as a member of GPRA’s Terms and Conditions Committee and a presenter of the webinar Negotiating Your GP Term Employment Agreement.

The webinar covers topics such as how to handle employer-employee relations in the private medical business arena and how to negotiate a contract that’s a win-win deal for both parties.

As a medical student, Jas ran a part-time business writing resumes and offering job-seeking tips to people in his community so he has a background in human resources.

Jas says his number one tip for novice GP registrars is this: “Make sure you have a solid contract before you start work anywhere. Most practices are very lenient and supportive of their registrars. But having something written down covers both the registrar and the practice if anything happens.”

Jas has further tips for the practice interview and is a believer in the 80/20 rule. “There are many versions of the 80/20 rule, but for me it means that for 80 percent of the time during an interview you should be listening and 20 percent of the time you should be speaking. The reason for that is you want to know as much about the practice as possible.”

Practices are frequently looking for permanent staff, especially in areas of workforce shortage, says Jas, and if the registrar is the right fit there may be future job prospects.

“Interviewers often ask interviewees what their five-year goal is, but it’s also important for you as an interviewee to find out where the practice is going in the next five years,” he continues.

“If your interests and skills suit the practice’s plans, you should emphasise this. Suddenly you’re responding to their needs rather than just telling them all you’ve done, because it may be completely irrelevant.”

Jas says it can be difficult for basic term registrars to ask for more than the 45 percent of billings in the National Terms and Conditions for the Employment of Registrars (NTCER) document at first. “But 45 percent is a very good number to be on,” he says.
“Make sure you have a solid contract before you start work anywhere.”
He counsels registrars that it’s not all about money. “Money seems to be a big highlight for people but there are other aspects where negotiation may be involved. Sometimes it comes down to making a compromise so you’re better off somewhere else.”

Jas cites the example of negotiating study leave before an upcoming exam, and noting it in the contract. “This isn’t automatically covered in the NTCER – and it’s something I’ve found quite important leading up to exams,” Jas says.

A useful strategy for registrars seeking a higher rate than 45 percent is to suggest a review and renegotiation after a trial period, Jas advises. “At your interview you can say let’s see what I can achieve and perhaps we can have a discussion and a renegotiation in six weeks time.”

Jas says he is a big fan of the resources created by GPRA. “You’ve got the More than Money guide, the employment agreement template and the benchmarking survey, which is excellent to find out what conditions your colleagues around Australia are getting.

“There’s also the GPRA earnings calculator, which gives you an idea of what you can expect to get on a certain percentage based on the number of patients you see.”

A traumatic childhood event at the age of 10 inspired Jas to study medicine. Jas (short for Jaspreet) and his family were visiting India, the country of his birth.

“We had a car accident and I was hit in the face by a large metal object. I was covered in blood and taken to the nearest public hospital. It didn’t have any electricity and they were going to stitch up my face without any light, with glass fragments still in my face.”

Fortunately, Jas was whisked off to a private hospital, where a plastic surgeon skilfully repaired the damage with 32 stitches. “That man pretty much gave me my life back that day, and I made up my mind that I wanted to do the same for others,” Jas reflects.

Jas grew up in the western suburbs of Sydney. After moving to Monash University in Melbourne to complete his medical degree, he returned home to Sydney’s west for his general practice training.

He currently divides his time between an academic post at the University of Western Sydney and a clinical post at The Practice in Blacktown.

Jas is also involved in numerous extra-curricular roles, as an RLO for WentWest and a member of their General Practice Leaders Group, and he sits on the GPRA Board as a Registrar Director.

After hours, he enjoys keeping fit at the gym, catching up with friends and planning travels to exotic locations with his wife Gurleen.

So is general practice living up to expectations for Jas? Absolutely! “I’m a people person and I can build rich relationships with my patients. As a GP registrar, I’m a life coach, I’m an advocate, I’m a personal trainer, I’m a physician, I’m an emergency physician, I’m a surgeon. I’m so many different roles at the same time, which I absolutely love,” he concludes.

Written by Jan Walker
Careful thought and planning goes a long way in making your first general practice placement as rewarding as possible.

Recognition of prior learning

Make sure that your recognition of prior learning (RPL) is sufficient to satisfy the requirements of your RTP. I’ve seen a few cases where placements have been organised only for the registrar to be informed that they will have to cancel their confirmed placement to find another hospital term to finish off their RPL.

Think long term

You will need to finish a certain number of terms (this can vary depending on your choice of fellowship) and will likely need to satisfy certain training obligations.

Training obligations can include working for a minimum period in an outer metropolitan or rural area. Think about when you want to complete these requirements and where you would like to complete them.

Prioritise your needs

Think about what you are looking for in a practice. Often this includes location, practice specialty, supervisor and teaching environment, remuneration, restraint of trade and flexible annual leave and training hours.

Make sure you research each practice before applying. Finding out that a practice is open 8 am to 8 pm weekdays for example, can indicate that you will likely need to do at least one evening a week. It will also often give you a list of supervisors and their backgrounds, practice area of interest/specialisation and allied health support.

Practice profiles and websites will often provide a listing of their fees, which may be important in considering the remuneration aspect of your placement. A larger practice will often have more flexible annual leave and training hours with a larger number of GPs available to manage the patient load.

Plan your interview

The interview provides the opportunity to clarify any questions you have. Asking about patient demographic, remuneration, allied health support, teaching programs, study leave, working hours, on-call/nursing home visits is very helpful. Asking what they are looking for in a registrar often helps to see their point of view so that it forms a win-win relationship for both parties. Ask if you are able to speak to the current registrars as well.

Get the right indemnity

Indemnity is relatively cheap (and tax deductible) for first year registrars. There are many providers so do your research and select one that will suit your needs.
For most international medical graduates (IMGs) the challenges of settling in Australia can fall into the following categories:

- Family related stress
- Visa and immigration regulations
- Being unfamiliar with the Australian health system
- Having English as a second language
- Coping with cultural differences.

Most IMGs seeking employment in Australia will be placed in a district of workforce shortage area. Unfortunately this means that partners might not find a position in the same town. I recommend that you consider moving along with your family or loved ones. This will help you assimilate into the Australian health system without the emotional stress of not being around family and having the support you need.

Both family stresses and visa status can cause a sense of urgency to sit the fellowship exams. However, this type of approach eliminates the chance of efficiently knowing the Australian health system, which is important for passing the exams.

If you have ended up living away from family and hoping that obtaining fellowship as soon as possible will solve your problems, I suggest that instead, you consider moving your family to where you are based, and staying longer so that you get to know the system better.

The most obvious obstacle for many IMGs practising in Australia is that English is their second language. Language hurdles cause problems in different areas, including difficulties in having conversations with patients. If you are not familiar with Australian slang, I recommend that you purchase an Australian slang reference book and read it from cover to cover. Slang can also be a struggle for IMGs from an English speaking background. For example, imagine that a patient presents at your clinic and says: “Hi doc. I had a bingle yesterday and I feel crook now.” If you’re not familiar with the slang, you wouldn’t know that the patient had had a car accident and now feels unwell!

Another way to help overcome language hurdles is by ‘staying active’. By this I mean taking notes in English, watching Australian movies and news, reading English language books and newspapers, and by talking to staff and listening to the pronunciation of vocabulary and phrases.

It is true that there is a cultural gap for most IMGs, and it is also true that this can affect your medical practice. However, while most non-Western countries might have a paternalistic model of medical practice, in which the doctor has a high rank of authority, in Australia, this is not usually the case. So give it time, I found most of my colleagues from non-Western backgrounds were doing very well after a couple of years, if not earlier.

And finally, know your available resources! Most regional training providers provide some level of support for IMGs, including training, which also gives you the opportunity to socialise with your colleagues.
“I recommend that you consider moving along with your family or loved ones.”

Yashar with his wife Yasaman Adli and son, Kian
Getting through it
Tips for surviving that first day

Starting at a new practice?
The following registrar tips can help you make it through those first consultations with ease.

Before your placement
• Make sure you have a signed contract.
• Make sure you know the procedure if you are sick and unable to get to work.
• Try to visit the practice before your first day to meet staff, locate staff parking and to start familiarising yourself with the practice.

In your room
• Open all the cupboards in your room to find where everything is.
• Locate where all the prescription, pathology and radiology forms are kept, and check with reception staff where the extra or infrequently used referrals and forms are kept.
• Work out which way the paper faces in the computer printer.
• Work out how the phone works and put labels against internal numbers if not already done.
• Check if there is an emergency alert button, and how to use it and turn it off.
• Investigate common equipment:
  – what type of sphygmomanometer is used
  – which way the blood pressure cuff faces and where the large cuff is kept
  – what type of thermometer is used
  – where the otoscope with different sized specula for ears and noses is kept
  – what type and size of specula are kept, in addition to other Pap smear equipment
  – what and where the different types of swabs (MCS, PCR) and specimen jars are kept.
• Log on before your first consult.
• Locate the Therapeutic Guidelines, either printed copies or where it is on your computer desktop.
• Add useful and recommended websites to your bookmarks list on your browser.
• Ensure your practice firewalls allow you access to materials you want or need.
• Experiment with software. Use a fake patient to manage a condition. Your practice will have one of these on their system.
• Locate where information leaflets are on the toolbar.
• Start collecting resources that will be useful during your consultations, such as guidelines for bowel screening and a flowchart for investigating breast lumps. Keep them in an accessible place.

In the practice
• Check out the treatment room, especially where dressings, vaccines and needles are kept:
  – Does the practice nurse administer vaccines?
  – What systems and protocols does the practice use for recording vaccine usage?
• Find out where the resuscitation kit and oxygen are kept. Ensure you know what is in the kit and how to use it. Find out if you have access to oxygen saturation monitors and an ECG.
• Check how to fill up and use liquid nitrogen for cryotherapy.

• Make friends with practice staff; they can make your life much easier. Be friendly and polite and make an effort to learn their names. The practice manager is a key ally and can help smooth your way into your new environment.

• Have a say in setting up your bookings. You will almost certainly need extra time until you find your feet, so book accordingly (ideally two patients per hour when you first start, moving to three or four when you feel comfortable). Let the practice staff know the common procedures you may routinely need extra time for (eg. Pap smears, psychological intervention and care plans, skin excisions).

With your supervisor

• Check the practice booking and billing system. Make sure you can check your billings in the practice software to ensure they are correct.

• Ask about the practice policy on checking and follow-up of results and patient recalls, including who follows up your patients’ results after you leave the practice.

• Establish their preferred method of being contacted for questions during consultations (ie. phone, knock on the door, internal messaging system) and after hours. If you’re doing after-hours cover, make sure that a senior doctor has been designated to back you up and that you have their contact numbers.

• Ask for a list of local services and their phone numbers/addresses. Many practices will have a list in their practice software:
  – pathology/radiology
  – allied health/specialists

  – the capabilities and specialist coverage of the local hospital
  – community or domiciliary nursing services.

• Talk about your teaching requirements. Make sure you have sufficient designated teaching time and discuss how you would like to use this.

During consultations

• Take a deep breath, count to 10 and then call your first patient in.

• Start with open-ended questions.

• Try to get the full list of the patient’s complaints and needs early in the consult. Then you can prioritise and, if required, book a second appointment to cover the list in full.

• Try to do all the work for each consult (investigation requests, prescriptions, referrals and notes) during the consultation to avoid having to hang around after hours when everyone else has gone home and when you are more likely to forget the details.

• Have a system for keeping track of clinical questions that arise during consultations (eg. notebook on your desk, manila folder with patient consult summary printed) to ask your supervisor or look up.

GPRA tip

Once you have survived your first day, enjoy your term! Ask lots of questions, look after yourself and leave work at work. Debrief with other registrars at block releases and teaching sessions. Have fun, and if you are not enjoying work talk to someone at your RTP about it early on in your term. Don’t forget that your RLO and GPRA are there to help.
There are terms and conditions from the Fair Work Act (2009) and Australian Taxation Office that apply to all general practice registrars. It’s important to know these and to ensure that they are included in your employment agreement.

General practice registrars are employees, not contractors. This is because the salient features of an employer-employee relationship are evident in a registrar-practice relationship (or any combination thereof). Involvement in an apprentice or trainee situation also has a significant impact on whether an individual is viewed by the Australian Taxation Office (ATO) as a contractor or an employee. Therefore, no matter if you operate as a contractor, or what a signed document says, your legal relationship with your practice is employer-employee.

It is illegal to represent an employment relationship as being one of principal/independent contractor. Practices may end up having to back-pay a registrar’s entitlements such as annual leave and super, and be liable for unpaid payroll tax. The risk of engaging registrars as contractors is largely borne by the practice, however indemnity may be a significant issue for registrars.

**Full time vs. part time**

Full-time employment is 38 hours per week as per Australian employment standards. Anything less is considered part-time and calculated and paid pro-rata.

Full-time equivalent (FTE) is a term used in the context of reporting workforce to government relating to the full-time equivalent quota of the total doctors or registrars working in a specified area. This calculation is based on 38-hours per week. Hypothetically, a general practice may have 10 doctors, but when you total the hours the doctors are working, they may be working the equivalent of only six full-time doctors.

Employment and training are not related when a determination of full-time and part-time is made. ACRRM and the RACGP define part-time training as being between three and eight sessions per week (averaging 3.5 hours each session). Nine sessions per week is the minimum requirement for full-time training. These sessions include the time taken for patient contact hours, administration, compulsory educational release with your RTP, and the compulsory in-practice teaching with your supervisor/s.

It is entirely possible to be training full time, but considered a part time employee.

Restrictive covenants are a clause in an employment contract that limits an employee from working within a defined distance and time period from their current employer after their employment is terminated. The distance should depend on the density of practices within an area. The time period should recognise that registrars have little choice (in most cases) as to the practice in which they train. These clauses are designed to prevent ‘patient pinching’. GPRA recommends registrars attempt to remove restrictive covenants from employment contracts in order to maximise choice regarding your future work locations, (not to pinch patients!).

**Employment agreements**

Every two years, registrar representatives from GPRA and supervisor representatives from the General Practice Supervisors’ Association meet to negotiate the terms and conditions for
statutory terms and conditions of employment

Employment as a registrar

GP Registrar – The essential guide for general practice registrars

registrars who are not covered by the Medical Practitioners Award 2010, or any other applicable award. Following this process, GPRA publishes a document for registrars that contains the agreed terms and conditions. These terms and conditions represent the basic terms and conditions of employment, and registrars are free to attempt to negotiate improved terms and conditions. However, we advise registrars to carefully check their employment agreement to ensure they contain at least the terms and conditions agreed to with GPRA.

Refer to page 32 for more information on creating your employment agreement.

Base pay rates are indexed according to the Medicare Benefits Schedule (MBS), usually annually.

Entitlements

As an employee, you are entitled to paid annual leave under Australian law – specifically the Fair Work Act (2009) and the National Employment Standards (NES). Employers are not required to grant leave if you have not yet accumulated it. On termination of employment an employer must pay an employee for any accrued annual leave. Annual leave is paid at your appropriate base rate.

Personal leave is leave that employees can take when they cannot attend work because they are sick or injured. Sick leave is a type of personal leave under the NES. Under the NES, full-time employees are entitled to 10 days paid personal leave (for sick and paid carer’s leave) per year. Part-time employees receive a pro-rata entitlement to personal leave based on the number of hours they work. Paid personal leave accumulates from year to year. Note that if your contract is based on GPRA’s terms and conditions of employment, personal leave is immediately available to you; you do not have to accrue this leave before you can access it.

Both annual leave and personal leave are paid at the appropriate base rate.

Superannuation is paid to registrars at the gazetted rate, which is 9.5 percent in 2015. Refer to gpra.org.au for more information about superannuation rates.

Parental leave

Parental leave is generally not available to registrars, as it requires one year of continuous service with an employer. However, up to 12 months leave from the AGPT program is available to registrars on application. Additional leave from the training program may also be available depending on your circumstances. We recommend you apply for leave as soon as is realistic so that disruption to your training is kept to a minimum. Talk to your training provider for more information, or contact us. You may also want to investigate paid parental leave with Centrelink.

Other resources

More than Money: A negotiation guide for GP registrars was designed to make contract negotiation easier for registrars. The essential checklist from this guide contains a summary of the key topics that may be covered and documented in your employment contract.

The 2014 Terms and Conditions Benchmarking Report can help you quickly determine the remuneration and conditions that other registrars in your particular setting receive. Refer to page 31 for more information about this report.

Both of these publications are available at gpra.org.au
Schemes and incentives

Various incentive schemes are available to encourage general practice registrars to work or train in Australian regional, rural and remote communities.

The HECS Reimbursement Scheme

The Higher Education Reimbursement Scheme (HECS) reimburses a proportion of a medical student’s standard Commonwealth Supported HECS-HELP debt for every year they provide medical services or train in eligible rural and remote communities.

If you work in an Australian Standard Geographical Classification Remoteness Area (ASGC-RA) 2+, you are probably eligible for this scheme.

ASGC areas are classified as:
- RA1 – major cities Australia
- RA2 – inner regional Australia
- RA3 – outer regional Australia
- RA4 – remote Australia
- RA5 – very remote Australia.

General Practice Rural Incentives Program

The General Practice Rural Incentives Program (GPRIP) commenced on 1 July 2010. The program aims to encourage medical practitioners, including registrars, to practise in rural and remote communities and promote careers in rural medicine.

It combines two previously separate retention incentive programs available to GPs and GP registrars.

The GPRIP payment is based on your ASGC-RA classification and length of service.

For more information on these schemes and ASGC remoteness areas, visit:
- ruralhealthaustralia.gov.au
The GPRA Terms and Conditions Committee is responsible for negotiating terms and conditions for GP registrars with General Practice Supervisors Australia – important to all registrars.

The terms and conditions for the employment of a registrar (not covered by the Medical Practitioners Award 2010 or any other applicable award) are negotiated every two years by General Practice Registrars Australia and General Practice Supervisors Australia. The resulting document, the National Terms and Conditions for the Employment of Registrars (NTCER), details the terms and conditions that should be included in every registrar’s contract of employment.

These terms and conditions are intended to establish a fair and reasonable basis of employment for registrars and to support an appropriate educational environment. The document includes details around pay, conditions and working hours. It also requires that each registrar obtains training across the full spectrum of general practice and shares the patient workload of other doctors in the practices where they are undertaking their training. The terms and conditions are based on current, relevant AGPT and college policies.

The GPRA Terms and Conditions Committee is responsible for these negotiations. Any GPRA Member can join this committee and shape the future of terms and conditions for registrars.

Get information on terms and conditions and GPRA’s employment agreement template for registrars at [gpra.org.au](http://gpра.org.au)

To join the GPRA Terms and Conditions Committee, email [registrarenquiries@gpra.org.au](mailto:registrarenquiries@gpra.org.au)

For queries about your terms and conditions, phone the registrar services team on [03 9629 8878](tel:0396298878) or email [registrarenquiries@gpra.org.au](mailto:registrarenquiries@gpra.org.au)
Primary Health Care’s extensive network of modern medical centres allows for the delivery of affordable and accessible healthcare when and where it’s most required with our centres generally open 365 days, 7am until 10pm and bulk billing patients.

Through lead doctors within our centres and regular clinical meetings, we are committed to ensuring a best practice environment where we can educate the new generation of doctors. Our dedication on clinical excellence ensures that we provide the next generation of GPs with an experience that is rewarding clinically, professionally and personally. Our focus on quality clinical care also expands to patients with a comprehensive family practice, the doctor of choice and a range of practitioners to choose from.

A Primary Health Care medical centre provides patients with affordable and accessible health care in an environment that incorporates onsite radiology, pathology as well as specialists and allied health providers - patients have access to the majority of their primary health care needs in a single location.

To learn more about practicing from one of our medical centres, please contact Dr Sanjay Nijhawan (MBBS, FRACGP, FACRRM, DiPDerm(Wales), Conjoint Lecturer UNSW) on 02 9561 3368 or via email sanjaynijhawan@primaryhealthcare.com.au
Find your benchmark

The aim of the GPRA Terms and Conditions Benchmarking Report is to empower you in negotiating the best possible terms and conditions of employment during your training.

The 2014 Terms and Conditions Benchmarking Report contains a benchmark of earnings and employment conditions from registrars working in various general practice environments around Australia. The report is the result of the GPRA Terms and Conditions Benchmarking Survey, which was open for respondents from 2 March to 28 April 2014.

The report covers:
- general demographics
- employment conditions
- negotiating terms of employment
- billing profiles, and
- earning capacity.

The report is a great starting point for negotiating your employment terms and conditions, as you can quickly determine the remuneration and conditions that other registrars in your particular setting receive. For example, the survey showed that respondents were working an average of 7.34 sessions per week and earning an average of $2215 per week (see below).

To download a copy of the 2014 Terms and Conditions Benchmarking Report, visit gpra.org.au

Note: earnings were binned to the higher number. For example, $1500 includes $1001 to $1500.
Your employment agreement
Making it work for you

Understanding your employment agreement and ensuring it meets the minimum requirements is important for all registrars.

Know what you are entitled to
Regardless of your training term, read the National Terms and Conditions for the Employment of Registrars (NTCER) document. At a minimum, your employment agreement must include everything within the NTCER. All registrars can negotiate conditions better than in the NTCER document, and successful negotiation is common in GPT2 and beyond. Use the GPRA Terms and Conditions Benchmarking Report for information about what registrars around the country earn.

Talk to the practice
Discussions about your employment may occur with your GP supervisor, practice manager or another person within the practice. Depending on what you are negotiating, you may wish to negotiate during the job interview (if you wish to take an extended period of leave during the term, for example), or more likely soon after you have been notified that you have got the job. Try to have a positive attitude, and don’t be afraid to ask questions. GPRA members can access personalised advice on the terms and conditions and how they apply to their situation by contacting the GPRA registrar services team.

Use a template to create your employment agreement
Use our employment agreement template (available at gpra.org.au) or your RTP’s employment agreement template.

Understand what you are signing
Read your agreement and understand each clause. Speak to the practice, your RLO or phone the registrar services team if you need help or would like to discuss any parts of your agreement.

Ensure both parties are happy
Although you can negotiate with your employer for conditions and benefits that are greater than the NTCER, be prepared for a bit of give and take. Your practice is a business, and your employment should be a win-win situation. Remember that no clauses from the NTCER should be removed from your employment agreement.

For more information, refer to:
- More than Money: A negotiation guide for GP registrars. Available at gpra.org.au
- 2014 Terms and Conditions Benchmarking Report. Available at gpra.org.au

Changes during the term
Your situation can change during the year: It’s important that any changes to your terms and conditions are recorded in an amendment to your original agreement. We highly recommend:
- that you sign an employment agreement before you start work at the practice
- that you take your time before signing
- that a new employment agreement be drawn up for each term, even if you are completing another term at the same practice
- if you make any changes to your agreement, ensure you have the changes in writing or that your agreement is amended.
Need advice?
GPRA members can access personalised advice about their employment. Email the registrar services team at registrarenquiries@gpra.org.au or phone 03 9629 8878
Decisions, decisions... choosing the right placement

The great gift of general practice is choice. Dr Jas Saini, GP registrar, RLO and newly elected GPRA Board Director, poses some useful questions and tips to consider when securing your next placement.

Know your RTP requirements
Take a look at the registrar handbook produced by your RTP. Know the requirements of your RTP, map out your path early on and be sure to keep abreast of any changes.

The practice – questions to consider

Training and support opportunities
What support is available? Will I receive assistance for exams? Do any of the practice GPs have experience as examiners? What skills can I acquire at this practice that I cannot get elsewhere? Will the acquisition of these skills be useful to me personally? What does the previous registrar say about this practice?

Relationships
How does this practice treat its administration, nursing and allied health staff? Do I have access to a practice nurse? What is their role? Will the relationships that I develop at this practice help me along my career path? How does the practice bring people together?

I find the best practices are those that work on fostering relationships – a simple barbecue or dinner with the team goes a long way.

How long do I intend to stay?
Am I looking for a long-term relationship, or simply staying on for a few months to acquire certain skills?
Knowing which category you fall into can help to simplify your choice.

Technical aspects
What is the billing structure? How many patients will I be seeing an hour? Is it busy enough to allow me to develop the experience I need, for exams and for my career thereafter? Will I be supported to make safe and competent decisions? Do I get my own room?

Your style of practice
Does the practice share similar values to my own? Are the areas of interests similar to mine? Do they look after their patients the way that I would like to look after my patients? Are there opportunities to provide feedback? How is this received? Does the practice adapt to change?

Previous registrars working at the practice may best answer these questions.

Balance
What hours will I be working? Will there be a lot of after-hours commitments? How far must I travel? Will working here allow me to balance my work life with family and personal life? Will I be able to still do the things that I enjoy?

Think about your future career
Do you know what you want to be doing in five years?
Perhaps you are thinking of a career as a rural GP anaesthetist? Network with doctors who have achieved this and ask them about the steps they took to get there.
Perhaps you are interested in paediatrics? Consider doing a Diploma in Child Health. Do you have an interest in medical education? Talk to people within your RTP about how you can become an RLO or a registrar medical educator.

Whatever your plan is, write it down on paper and let this guide the decisions you make about where you practise. Keep in mind that your goals may change and that this is okay.

Thinking about your next practice can be a tricky decision, but it doesn’t have to be. Remember; if you have any concerns or enquiries, talk to your RLO or RTP program manager.
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3 Exams – the finish line
An insider’s exam tips

Dr Letitia Clark has survived – and passed – her three fellowship exams so she is well placed to reveal a few insider’s tips for exam candidates.

Three down and one to go.

That’s the exam scoreboard for Dr Letitia Clark, a rural GP registrar from Warragul in Gippsland, Victoria, who is a survivor of exam day jitters – and the joy of receiving a positive result.

Letitia is a trainee GP anaesthetist. Her anaesthetist role means she has four exams to complete rather than the usual three in the RACGP fellowship pathway. There’s more swotting ahead for her anaesthetics exam but she has already passed the three exams for her RACGP fellowship.

Letitia is also an RLO with Southern GP Training, so sharing exam tips with her peers is part of her remit.

Her advice to registrars preparing for exams is two-fold: know Murtagh, and practise lots of exam questions.

“I read Murtagh’s General Practice from cover to cover and learnt the diagnostic triads. This is where you have three symptoms together and it suggests a certain diagnosis. I found the diagnostic triads are referred to a lot in the exams,” Letitia says.

“I also did lots of practice questions. I wrote questions, other registrars wrote questions and we all did each other’s questions. I think that practising exam questions over and over again makes you understand how to answer them under exam conditions.”

The RTPs commonly run pre-exam workshops and Letitia recommends that registrars take advantage of whatever is on offer.

Letitia says there is an abundance of exam workshops available from different providers. “I know GPRA offers exam preparation webinars, which many people find valuable. And, of course, there are other exam preparation courses and seminars as well.”

The college websites contain some gems for independent exam study too, says Letitia. “One thing I found really useful was gplearning on the RACGP website. The format of the modules is great because it’s question and answer.

“There’s another independent learning program there called the check Program, which is very up to date. I used check for the things I didn’t think Murtagh covered very well like topical or legal issues.”

Forming a small study group is another approach that works well for many registrars, says Letitia.

Seeing patients can be equally effective, she adds. “I’d have my learning plan handy and whenever I came across something I felt a bit rusty on – say community-acquired pneumonia – I’d note it in my learning plan and go home and look it up.”

In the clinic, Letitia says she “treated every patient like an OSCE station for about a month beforehand”. “The oral exam is supposed to be based on a day in general practice. And I felt like it was. When I walked out of the exam I felt like I’d probably seen the vast majority of the cases in the last two or three weeks in the clinic.”
“I wrote questions, other registrars wrote questions and we all did each other’s questions.”
Letitia grew up in a small country town in Gippsland called Mirboo North and once dreamt of a career in music rather than medicine. Her youthful ambitions were shattered at 15 when she crashed through a glass door. She could no longer play her beloved violin, double bass and piano due to nerve damage in her right arm, and she suddenly had a lot to do with doctors.

Surgery was required, and Letitia was treated by a local orthopaedic surgeon. “He was a lovely man but I was very struck by how tired he always looked because he worked so hard. I had a very innocent thought that we need more doctors around here – and maybe I could be one.”

Letitia shared her thoughts with the surgeon and he was very encouraging, as were her local GP and her country high school.

After completing her medical degree at Monash University, she spent time working in the United Kingdom. “My partner is Scottish and he wanted to go back for a while,” she says.

“It was an ideal grounding for Letitia’s current workload – two days of anaesthetics at the local hospital, a day in the emergency department and a day in general practice.”

Letitia has this piece of advice for GP registrar mums: don’t be scared to ask for help.

“You can ask a friend to help clean your house, do your ironing or cook some meals. It makes your life much easier when you are a busy working mum. Don’t try to do it all yourself, especially when you’re studying for your exams.”

Written by Jan Walker

If you fail an exam...

If a disappointing exam result means you have to do a ‘take two’, Letitia has some tips.

- Don’t worry – no one thinks less of you.
- Take a few weeks off before you start studying again.
- Discuss with a senior medical educator the benefit and value of getting feedback on the exam from ACRRM or the RACGP.
- Try to change your studying to address the areas you had issues with – don’t just do the same thing again.
- Do as many practice exams as you can. This will increase your confidence and minimise your anxiety on the day.
ACRRM and RACGP Fellowship exams: Get ahead

Medical exams are tough, you don’t need us to tell you that! Seeking help, guidance and support is key to passing the college fellowship exams. So get it early and get it often and use the following tips to guide you on your way.

The facts

ACRRM Fellowship exams

GP registrars training towards fellowship of ACRRM must pass the following exams and Primary Rural and Remote Training summative assessments:

- Multiple Choice Question (MCQ) exam
- Mini Clinical Evaluation Exercise (miniCEX)
- Structured Assessment using Multiple Patient Scenarios (StAMPS)
- Multi-Source Feedback (MSF)
- Procedural Skills Logbook.

RACGP Fellowship exams

General practice registrars training towards fellowship of the RACGP must pass the following:

- Applied Knowledge Test (AKT) – a multiple choice test completed on a computer
- Key Feature Problems (KFP) exam – a multiple choice and short answer test completed on a computer
- Objective Structured Clinical Exam (OSCE) – 14 face-to-face clinical ‘consultations’ conducted with examiners and role players who are GPs.

The tips

Tip 1: Think ahead

Make sure you are properly prepared and ready to sit each exam. If you’re not sure whether you’re ready to pass the exams, talk to your medical educator. Don’t forget, you can only sit the exams a limited number of times, and they are costly.

Tip 2: Make a head start on exam preparation

Take advantage of the information the college websites provide. Take particular note of the assessment and examination information to assist in formulating a study plan. Allow yourself at least 6–12 months of study time before the exam date.

Tip 3: Make a realistic study plan

Make a study plan and spread out your study evenly. It is equally important to schedule some time off away from the books to unwind. You don’t want to find yourself spending weeks on some areas of study, with barely any time left for others.

We all have areas that we enjoy studying more than others, and it is easy to focus on those topics at the expense of the rest of your studies. Identify your learning gaps early to make sure you don’t make this mistake.

Tip 4: Study with others

Consider forming a study group, either online or in-person. Working with a small group enables you to support and motivate each other, pool resources and share strengths. It is a good idea to begin meeting at least a year before your exams and increase the frequency of meetings closer to the exam date.

GPRA members can place a free advertisement for a study partner or group on our website (see page 43 for further details).
Tip 5: Practice makes perfect
Gather together as many relevant practice questions as you can. Ask other registrars and recent fellows if they have any, search the college websites, you could even write your own! When you are working with your study group, use practice questions as a guide. You could read topics together out loud and quiz each other on clinical guidelines. Don’t forget to encourage your study group to share practice questions via email.

Many people are tempted to just read through the cases, but it is more effective to practise them under timed exam conditions. When you are working with your study group, give each other feedback on the skills that you can’t learn from a book such as communication skills, use of non-medical language and analysis of research articles.

Tip 6: The best practice occurs in general practice!
Remember that the exams are designed to assess your ability to practise as a GP. Therefore it makes sense that direct general practice experience in the clinic is central to passing. The following tips are taken from the forthcoming GPRA publication, The general practice exam book.

- Develop an approach to your daily clinical practice that incorporates key elements of the exam.
- When you see patients in the clinic:
  - demonstrate a systematic, clear, patient centred and empathetic approach
  - cultivate a professional attitude, including good time management and attention to ethical and legal issues
  - display medically sound judgement that ensures patient safety and demonstrates your ability to practise independently within a professional network
  - greet your patient and introduce yourself, ask for consent before examining, and pay attention to hand-washing and hygiene
  - use opportunities within a consultation for patient education and preventive health check-ups and advice.

Tip 7: Be bold!
You may be working with recent fellows in your practice and meeting GPs at training sessions and events during your training. Ask them for their advice and tips. Ask them if they have any study materials they would be happy to share with you!

Tip 8: Look after yourself
- Take regular breaks
- Make sure you exercise and eat healthily
- Take personal time out to ensure your wellbeing.

Tip 9: Get the right resources
- The soon to be released GPRA publication, The general practice exam book, was written by GPs for GP registrars – it’s the essential exam preparation resource. See 44 for further details
- The GPRA website exam section provides tips, links to resources and practice case studies: gpra.org.au
- For specific information about college exam preparation and workshops refer to the relevant colleges:
  - ACRRM: acrrm.org.au
  - RACGP: racgp.org.au
Share the load... study with your peers

A recent GPRA exam needs survey showed that over 75% of respondents found a peer study group to be the most useful resource in study preparation.

To assist with your exam preparation it is highly recommended that you consider joining or forming a study group, one that either meets online or in person, or both. Technology such as Skype and Google make effective study with anyone, anytime, anywhere around the country easy.

Studying over a period of several months and working in a small group enables you to support and motivate each other. Each member of the group will have different strengths to bring to the group, and together, any individual learning gaps can be identified and strengthened.

It’s a good idea to begin meeting at least one year before your exams and then increase the frequency of meetings as the exam date gets closer.

GPRA members can place a free advertisement for a study partner on our website. Each advertisement allows you to share something about yourself, which exams you are preparing for and how you would like to meet – online or face-to-face. You can also advertise a vacancy in your group for others who are looking for a study group to join.

The general practice exam book has tips on how to get the most out of a study group. See page 44 for further details.

Remember you are not alone in your exam preparation... there are hundreds of doctors in the same situation as you.
Exam preparation
The essential tools

You’ve heard it before... practice makes perfect. GPRA’s exam resources can help get you over the line. The latest, *The general practice exam book*, provides all the tools to help you survive – and hopefully pass – your general practice exams.

The latest

In a recent GPRA exam needs survey, registrars who recently passed their exams felt that tips from recently fellowed GPs and peers were the most effective resource in helping them prepare for exams. With this in mind, GPRA developed *The general practice exam book*, written by GPs for GP registrars.

The GP authors each bring valuable advice and tips drawn from their own experiences in preparing for the exams. Dr Kath O’Connor, a former medical editor with *Australian Family Physician* and the *check Program*, is the medical editor. Kath also authored the chapter on how to stay sane while studying and, importantly, how to look after yourself during this intense and stressful time.

While the names and acronyms for exams vary from college to college, they are all similar in format. For ease of usage this publication uses the terms pertaining to the RACGP exams, but the content is equally relevant to ACRRM exams and many overseas general practice exams.

*The general practice exam book* provides tips on how to formulate a study plan that really works and gives a general guideline on where you should be from 12 months to one month out from the exam dates. The book also covers each of the three exams specifically, providing tips for success and highlighting common pitfalls.

The appendices include:
- 15 AKT sample single best answer questions, with a series of answer options for five extended matching questions
- 15 sample KFP questions, followed by the answers and a discussion
- 10 OSCE practice case scenarios.

*The general practice exam book* will hit the shelves in late 2014 and will be available for purchase online. Visit gpra.org.au for updates

The best of the rest

GPRA has worked with GPs and GP registrars to provide a range of practice cases to help you prepare (these cases are based on the clinical experiences of registrars and are not aimed to reflect past exam content).

Members can also access case studies by Professor John Murtagh. These cases provide engaging, authentic examples from clinical practice and highlight some of the common mistakes and difficulties that GPs can encounter.

Clinical case studies can be found on the GPRA website at gpra.org.au
The general practice exam book

Kath O’Connor
Rachel Oommen
Robin Park
Fabian Schwarz
Tammra Warby
Yashar Aliabadi Zadeh
GPRA webinars

Last year GPRA ran over 30 webinars with more than 1000 participants logging in.

Each year GPRA runs a number of exam preparation webinars. A webinar is an interactive online workshop that can be joined from anywhere you can access the internet. Participants view documents and resources via their computer, while shared audio allows for the presentation to be heard.

GP registrars and new fellows – all of who have survived and passed their exams – present our webinars. Participants can interact with the presenters and other peers, hearing their concerns and questions and learning how to apply their knowledge to studying for the exams. It’s a great chance to ask the presenters about their experience of the exam, exam preparation and tips for managing the process.

Webinars are held weekday evenings at 8 pm AEST and run for 1.5 hours. Our webinars are also recorded, which means they can be replayed at a time that’s convenient to you. All you need is a computer and an internet connection – it’s that easy!

“I would really like to thank you for organising these webinars. It was quite informative and I really appreciate the fact that we could participate in the discussions from home. Looking forward to more of these.” Priya, GP registrar, WA

Visit gpra.org.au or email webinars@gpra.org.au for more information about upcoming webinars.
4 Support that counts
Striking a balance

Recent GP fellow Dr Cass Wys is a member and past Chair of GPRA’s Wellbeing Committee. Having weathered a firestorm of stress on her GP journey, she has learnt ways to manage the strain for a happy work-life balance.

2013 was a massive year for Dr Cass Wys.

“I was studying for exams. I was working full-time in four or five different roles. I was looking after my then two-year-old daughter. On top of that, my partner Matt had a fly-in, fly-out job and was away for three weeks out of four.

“By Friday I had brain fatigue and couldn’t think clearly. It was an incredibly stressful year and something had to give.”

The couple sat down and reassessed their priorities. Cass opted to work four days a week instead of five with an hour for lunch (“I think that’s important”), an early finish and no weekend work. Her partner found a new job with no fly-in, fly-out travel.

Now, with her exams behind her and a more forgiving work schedule in place, Cass is enjoying life again.

Cass is a strong advocate for looking after yourself so you can look after others. She now makes sure she schedules some ‘me time’ with a weekly massage in her lunch break.

She believes exercise can help you stay fit physically and mentally, and she regularly works out at the gym with a personal trainer:

“Normally I feel a bit wiped out after a day at work because I’m talking to people non-stop. At the gym it’s my time. I can listen to my music and just zone out. Then when I come home I feel like a new person. I can sit with my daughter and I’ve got the patience of a saint.”

Cass is actively involved in registrar wellness issues as a member, and past Chair, of GPRA’s Wellbeing Committee. “I think stress is an intrinsic part of the job. And if you don’t learn how to manage it early you’ll be in big trouble later down the track,” she says.

“A lot of doctors are type A personalities with perfectionist tendencies. We strive to accomplish at the highest level possible, we bite off more than we can chew and we have a fear of failure.”

For GP registrars, there’s a perfect storm of multiple stressors, continues Cass. Moving from the familiar hospital system to the unfamiliar realm of general practice is stressful in itself.

“It’s actually incredibly tiring,” Cass observes. “You’re now seeing patients every 15 minutes or so. In hospital you have the luxury of a bit more time to order tests and get results. In general practice you have to make a plan then and there. The clinical decision-making can be quite uncertain, especially in the first term.”

The clinical aspect is only part of the picture, Cass says. You’re adjusting to new people, new systems, how Medicare works, and a new way of earning an income.
“Try not to sweat on the small things and if in doubt ask for help.”
Her favourite wellbeing tips for new registrars?
“Try not to sweat on the small things and if in doubt ask for help.

“There are some great resources on the GPRA website including a wellbeing checklist. I’d like to see it on every registrar’s wall,” she adds with a laugh.

Occasionally, registrars confront serious problems with their placement, Cass says. Workplace bullying, for instance. As a registrar liaison officer with Tropical Medical Training in Far North Queensland, Cass says she was required to advocate in a number of cases of GP registrar bullying.

“Workplace bullying is repetitive behaviour that makes a registrar feel intimidated, worried or upset. The idea of going to work may make them feel ill. Physically they may get palpitations or the shakes or a dry mouth.”

Workplace bullying can take many forms. It could be constant and unreasonable negative criticism by a staff member or supervisor. Or it could be subtle, like a hush descending on the tearoom every time the registrar walks in because co-workers were gossiping about them.

“As an RLO, I had to organise for two registrars to switch practices because of workplace bullying,” Cass says.

“If a GP registrar believes they are being bullied, they should contact GPRA and let them know the situation. They should also speak to their RLO as they are the registrar’s advocate and should be able to help sort out the issue. The RLO may want to discuss it further with the registrar’s RTP for further support and advice.

“There are two sides to every story and often things can be resolved with some support and mediation. But sometimes you get a registrar who just isn’t flourishing and all it takes is a change of environment and they just bloom.”

Cass says she always wanted to be a doctor. As a bright student, being a doctor seemed a natural extension of the caring, protective role she played as the eldest child in a family of five girls.

Cass studied medicine at Otago University in Dunedin, New Zealand. Money was tight so she often worked up to 30 hours a week doing bar work, waitressing and making hamburgers in McDonalds to pay her way while studying.

During her intern year, Cass met her partner Matt and in 2008 they moved to Cairns where she completed her postgraduate and GP vocational training. Along the way, their daughter Alyssa was born.

The family recently moved from Cairns to Mooloolaba on Queensland’s Sunshine Coast where Cass works at Brightwater Medical Centre seeing a mix of young families and retirees.

Cass also has an interest in sports medicine, having worked in an orthopaedic practice in Cairns, and has recently developed an interest in dermatology and cosmetic medicine.

“One reason I love general practice is the diversity of career paths,” she says. “I’ve just done my first course in cosmetic medicine and this is going to be an exciting new avenue for me. General practice is what you make it and you can mould it to whatever interests you have.”

Written by Jan Walker
Looking after yourself
You’re not alone

Peer around the corner

Remember you are part of the Australian General Practice Training program. There are thousands of other GP registrars also undertaking the training. Whether you are in a busy town or on an island, your peers can be a great support in so many ways.

All registrars have access to a registrar liaison officer (RLO). RLOs are GP registrars employed by regional training providers to provide pastoral care, information and support to other GP registrars. If you are located in a rural or remote area, you may not get the chance to meet your RLO face-to-face, but know that they are available via phone calls and emails. If you are located remotely, ask your RLO if they can put you in touch with other registrars. See page 61 for more information about how to find your RLO.

Remember: Most problems or work situations you encounter are often resolved or supported when you talk to a peer.

Workplace issues

Feeling exhausted?

Fatigue is a huge problem for doctors at all stages of their career. It can compromise both the safe provision of high quality care to patients, and also the health and wellbeing of you, the doctor: It can affect how you work – and also how you study. It can have an impact on how you relate to your peers, practice staff and patients.

If you have suffered from fatigue, you will have experienced an acute, ongoing state of tiredness. It can lead to mental or physical exhaustion and prevent you from functioning within normal boundaries. There are many causes of fatigue, including working long hours, stressful case loads, the competing demands of family, work, study... the list is endless, but it is never something to be embarrassed about. It’s often a good idea to share your feelings and concerns about feeling fatigued with your peers – they are probably as tired as you are!

Can GPRA help?

Recognising fatigue as a major problem for registrars, a GPRA committee, working in conjunction with other stakeholders, examined the problem and used their findings to produce a statement of principles and discussion paper: The paper, Fatigue Management in Vocational General Practice Training: Statement of Principles and Discussion Paper, draws on a number of sources to suggest methods of addressing the issue within general practice and is well worth reading, even if you don’t currently suffer from fatigue. It is equally valuable in developing strategies to avoid this hazard.

To view the Fatigue Management in Vocational General Practice Training: Statement of Principles and Discussion Paper, visit gpra.org.au

I’m just not coping...

Sometimes the sheer volume of the competing priorities of work, study, relationships and home life can seem overwhelming. This doesn’t mean you are suffering from depression or exhausted, but rather it is a normal reaction that we all experience from time-to-time.

If you are feeling like this, take time out:

Have a weekend away from study and work. Treat yourself to a massage. Take a yoga class. Go for a run. Change your routine. Get a babysitter for the night or weekend. Reconnect with loved ones, or simply turn your phone and email off for a day and do something you really want to do – for you.
I’m being bullied – what can I do?
Workplace bullying is a serious concern and a behaviour that no one should be subjected to. As a trainee, it can be particularly difficult to know what to do if you are being bullied at work. Bullying behaviour can impact your health, self-esteem and your enjoyment of life. If you are being bullied at work, GPRA urges you to report the problem. This usually means reporting it to your GP supervisor and/or director of training. If you can’t speak to them for whatever reason, you can approach your RLO, or please call GPRA for a confidential discussion on 03 9629 8878.

Some types of workplace bullying are criminal offences. If you have experienced violence, assault or stalking for example, these matters should be reported to the police as a matter of course.

What if I witness someone else being bullied?
People respect those who stand up for others. But being a supportive bystander can be tough. Sometimes it’s not easy to work out how to safely assist someone who you suspect is being bullied because bullying occurs in many ways.

“There is no ‘one size fits all’ approach to being a supportive bystander. The following suggestions may assist supportive bystanders in taking safe and effective action:

- If you witness bullying, consider standing close to the person who is being bullied
- Make it clear that you won’t be involved in bullying behaviour
- Support the person who is being bullied. Suggest they ask for help: for example, go with them to a place they can get help or provide them with information about where to go for help (such as GPRA)
- Report the bullying to someone in authority or someone you trust at work. If the bullying is serious, report it to the police; if the bullying occurs on social media, report it
- Make notes of what you have witnessed: the time, place, how and by whom.

“Workplace bullying means any behaviour that is repeated, systematic and directed towards an employee or group of employees that a reasonable person, having regard to the circumstances, would expect to victimise, humiliate, undermine or threaten and which creates a risk to health and safety.” Section 55A (1) of the Occupational Health, Safety and Welfare Act 1986
Maintaining sanity during your training is vital. Dr Belinda Allan, GP registrar and GPRA Wellbeing Committee Secretary shares her wellbeing tips.

- Have another registrar or friend that you can debrief with at the end of a tough day.
- Always have a holiday or long weekend in the pipeline to look forward to.
- Do something on a Friday night for pleasure to mark the end of your working week (even if you have to work weekends).
- Always have one activity a week, booked into your diary which you do not cancel, that is just for enjoyment, such as yoga, sport, music, art or a hobby.
- Make exercise a part of your working week.
- Learn relaxation techniques and use them before sleep, depending on your beliefs this may include breathing techniques, mindfulness, meditation or prayer.
- Learn to leave work at work, debriefing can help with this.
- Learn to turn off your analytical brain, consider doing something creative or pleasurable instead such as listening to or making music or art, or spending time in your garden.
- Have a wind-down ritual, such as getting out of work clothes, having a shower, eating a nutritious meal, doing exercise, having time alone or spending time with loved ones.

- Recognise your signs of stress:
  - psychological — ruminating about work, inability to unwind, waking up anxious, low mood, general anxiety, perfectionism, irritability or mood swings, pessimism, feeling overwhelmed or inadequate, reduced concentration, difficulty making decisions
  - physical — fatigue, headaches, muscular aches, insomnia, gastrointestinal upsets, palpitations, and dermatological disorders
  - lifestyle — problems in your relationships, increased use of alcohol or drugs, lower tolerance of life stressors, social isolation, decrease in performance at work, increased number of sick days, loss of hobbies or outside interests.

- Have your own GP (don’t laugh – this is essential!) – make an appointment at least once every 12 months (and include a mental health check-up).
- Be honest – have someone in your life that you trust and can confide in about stress.
- Speak up early! Contact your RLO, GPRA or someone you trust about issues in your practice with your supervisor or RTP that are affecting your stress levels.
- Ask your fellow registrars how they are going – you’d be surprised how many of us are going through a similar experience.

GPRA has a dedicated self-care section on their website, including support programs, advice from GPs and more. Visit gpra.org.au or phone the GPRA registrar services team on 03 9629 8878.
Occasionally during your general practice training, things may not go exactly as planned. If you find yourself in difficulty, remember that GPRA can provide support and assistance.

Occasionally, registrars find themselves in situations where they are unhappy about some aspect of their training. This may include placement, relocation, educational issues, interpersonal problems or employment disputes.

If you find yourself in this type of situation, don’t worry, you are not alone. There are many people involved in general practice training who are specifically employed to assist you with these difficulties. If you are in a fix, the best advice we can give you is to let someone know – and let them know as soon as possible.

The dedicated GPRA registrar services team is available for you to talk about any problems or difficulties you may encounter with your training. Our team can be contacted by email at registrarenquiries@gpra.org.au or by phoning 03 9629 8878. All matters are treated as confidential. We are an independent body run by registrars, for the benefit of all registrars.

**Talk to someone**

The most appropriate person to talk to depends on what the problem is and how you want to go about dealing with it. Your RLOs are always there on the front line to support and advise you no matter what the problem. RLOs are registrars too, and it is a part of their job to provide peer support to you.

In some circumstances, the RLO can act on behalf of a registrar if the registrar feels that they are unable to confront the issue themselves. In general, most problems can be resolved locally with the practice or RTP. Your RTP will also have a staff member as a point-of-contact for registrars.

GPRA has a dedicated registrar services team you can contact if you are not comfortable talking to your RLO or RTP for any reason. They can double-check that the information you have been given is correct, provide suggestions on how to approach a difficult situation or help solve larger problems. We help by discussing matters thoroughly with the registrar; can speak directly with the RTP to straighten out any misunderstanding; and provide representation and assistance with appeals.

**Document the evidence**

The first thing we will advise you to do in the event of a dispute is to document the relevant events and evidence. Make a note of times and dates, make notes of any verbal advice you are given, retain copies of correspondence and try to stick to factual occurrences. Always be civil and professional in your dealings, as this will go a long way in supporting your case if a formal dispute arises.

**What if I need to take it further?**

If your issue does not seem to be resolved to your satisfaction, you may wish to escalate the matter further. Every RTP has an appeals process, and should that not resolve the issue, there is a further appeals process for the AGPT program administered by the Department of Health.

GPRA offers valuable assistance and advice during these processes. We have been involved in registrar appeals of all types, so don’t hesitate to talk to us if you find yourself in this situation. Often early
If things go wrong, ask for help. Intervention and discussion results in better outcomes for all parties. Contact us as soon as you realise you may need outside help in a situation.

Sometimes issues arise that indicate the possibility of a systemic problem, for example, a policy or situation that is disadvantaging a particular group of registrars. GPRA can act to collaborate with or lobby the relevant stakeholders to review and change their policies. Once again, GPRA has been involved in and advocated on many issues within the AGPT program that have resulted in positive change for all registrars.

**Dispute resolution guidelines, policies and appeals**

If a dispute arises, you need to be aware of relevant policies. Many RTPs have dispute resolution policies available on their websites. If you cannot find yours, contact your RLO. AGPT also has policies, which are available from the Department of Health or GPRA.

AGPT appeals are initiated when a registrar wishes to appeal a decision made by their RTP. These appeals are a last resort when all else has failed and this is the final appeals process within the AGPT program.

Remember, all employees are covered by national and state legislation relating to employment including maternity leave, discrimination, sexual harassment and bullying.

**Look after yourself**

Dealing with a dispute or conflict can place extra stress and pressure on you when you are already dealing with the many challenges of being a GP registrar (clinical practice, study, exam preparation). It is important that you pay attention to your own wellbeing. Refer to the looking after yourself and wellbeing articles on pages 51–53.
Access a wide variety of exam support tools to help with your journey to Fellowship!

**Exam papers**
Gain insight into the questions in the Applied Knowledge Test (AKT) and Key feature Problems (KFP) exams.

**Mock-up exam workshops in your local area**
See what the exam is like, by enrolling in RACGP workshops.

**Practice exam online**
Test your knowledge and gain practical experience anytime anywhere through the Exam Support Online (ESO) program on [gplearning](#).

**Check case studies**
Prepare for the RACGP exam through a series of clinical cases followed by multiple choice questions.

**Discounts on Thursday evening pre-exam tutorial series – 11 DVD set**
A 19-week tutorial DVD series, perfect for those in rural areas who can’t make it to face-to-face workshops.

Visit [www.racgp.org.au](http://www.racgp.org.au) to become a member today!
5 Training resources

Visit www.racgp.org.au to become a member today!

Healthy Profession. Healthy Australia.

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Discounts on Thursday evening pre-exam tutorial series – 11 DVD set
An 19-week tutorial DVD series, perfect for those in rural areas who can’t make it to face-to-face workshops.
A few of my favourite things

Dr Sidya Raghavan is a medical educator and former RLO with Queensland Rural Medical Education who recently achieved fellowship. Here she shares her go-to resources for clinical work and exam preparation.

Ask 10 GP registrars to list their favourite resources and you will probably get 10 different answers. Today the digital age has revolutionised what’s on offer. There is an ever-expanding plethora of online resources accessible on desktop and mobile digital devices. These range from medical learning platforms to clinical guidelines produced by expert authorities.

Then there’s the brave new world of FOAMed (free open access medical education) as well as doctors who blog, tweet and chat on Facebook with their peer group to share professional insights, clinical conundrums and links to articles across the web – often with some witty repartee thrown in.

And, of course, the traditional hard copy book remains a reliable standby.

Dr Sidya Raghavan is a medical educator and former RLO with Queensland Rural Medical Education who has taught and advised many GP registrars on their way to fellowship. And she’s happy to share her highly personal list of favourites.

Sidya confesses to being a little old-fashioned when it comes to her number one choice. “Definitely Murtagh,” she says with a laugh.

“Murtagh’s General Practice was, and still is, a bible for us. I always have it in my room so I can access it straight away. I’m a very paper-based person so I like to have a hard copy.”

Running a close second to Murtagh, says Sidya, is Therapeutic Guidelines. “It’s Australian based and it gives you the guidelines and what to do,” she explains.

A strong trend in doctors’ resources is the mobile phone app. Sidya says that while she’s not generally an early adopter she has an app for UpToDate that she finds extremely valuable.

“UpToDate is an American-based website, used a lot on hospital intranets. It gives you information on what sort of investigations to do and the usual treatment modality.

“It’s helped me to move forward or at least manage a patient I’m not sure about when I didn’t have access to a supervisor during my training years.”

Paediatric cases have Sidya thumbing through The Royal Children’s Hospital Paediatric Handbook or browsing the information freely available on their website. It’s a great resource for practising paediatric stations, looking up guidelines or even generating parent information handouts, she says.

For absolute beginners to general practice, Sidya says one resource stands out. GP Companion is a pocket reference guide produced by GPRA, but it’s equally handy for all GP registrars.

“GP Companion is a fantastic little book. It’s a quick guide to lots of simple, basic things,” she says.

The RTPs provide online learning platforms for their registrars, a series of modules for self-directed learning. “One of the main resources I used in my first year of training was GPRime,” Sidya says. “We had to go through modules, we had cases to work out, and based on that framework we did regular sessions with our supervisor. It was very helpful to me.”
“Murtagh’s General Practice was, and still is, a bible for us.”
When preparing for exams, Sidya also made use of her RTP’s access to the *British Medical Journal* – a great source of cases and exam questions. Some of her colleagues joined a Facebook study group organised by QRME for exam preparation. Sometimes it’s a matter of trial and error to find out what works best for you, Sidya advises.

Sidya grew up and completed her medical degree in Chennai, India. “My mum was an obstetrician and gynaecologist, and my dad was a general surgeon. My brother did medicine as well. There are about 14 doctors in the family so I was pretty much expected to become a doctor,” she says.

Sidya and her husband Srinivas, a research academic, migrated to Australia a few years ago. Following a short break for the birth of her first child she resumed her postgraduate training at Redland Hospital, Brisbane before moving to Toowoomba for her general practice training.

She originally planned to become an obstetrician like her mother. However, she decided to channel her interest in women’s health into general practice instead – an option more compatible with family life.

Sidya was recently awarded her fellowship. “I didn’t think it would be so big for me, but when it came through I went woohoo!” she says. She now works at The Range Medical Centre in Toowoomba and as a medical educator with QRME.

As an international doctor, Sidya has a personal insight into the issues faced by migrant registrars and is heavily involved in GPRA’s International Medical Graduate Committee.

When she gets any spare time, Sidya loves to cook Indian dishes and celebrate the customs of her homeland. “There’s a [Hindu] temple in Brisbane that we go to and we usually go in traditional clothes so we remember what our roots are. I believe it’s important for the kids, because it’s so easy for them to forget.”

Written by Jan Walker

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**Sidya’s top five resources**

- **John Murtagh’s General Practice**
  mheducation.com.au
  Hard copy and online for desktop, iPad and iPhone. Available for purchase

- **Therapeutic Guidelines**
  tg.org.au
  Hard copy and online. Available for purchase but is often provided by the practice or RTP

- **UpToDate**
  uptodate.com
  US online clinical decision-making tool used internationally. Available for purchase but is often provided by the practice or RTP

- **The Royal Children’s Hospital Paediatric Handbook**
  rch.org.au
  Comprehensive paediatric reference book from The Royal Children’s Hospital, Melbourne. Hard copy available for purchase. Information is also freely available on their website

- **GP Companion**
  gpra.org.au
  The essential pocket reference for general practice registrars, junior doctors and medical students from GPRA. Hard copy available for purchase at a special price for GPRA members
Registrar liaison officers are GP registrars who provide pastoral care, information and support.

The core objectives of the registrar liaison officer (RLO) position are to:

- Act as a liaison between GP registrars in their region and the regional training provider (RTP)
- Advocate and represent registrar interests at several levels
- Provide support to GP registrars in their region.

**Advocacy and representation**

Registrars on the AGPT program can contact their RLO confidentially to discuss any aspect of their training and employment. Your RLO may refer you to the appropriate person or group to resolve a particular problem, assist in mediating a dispute, or they may just hear you out when you have an issue. RLOs will often be able to answer a question on the spot.

RLOs also represent registrar concerns and opinions at the RTP level and nationally via the GPRA Advisory Council.

**Pastoral care**

Pastoral care is an important part of the RLO position. It is inappropriate for an RLO to enter into a patient-doctor type relationship with any of their registrar colleagues. However, they can refer registrars to a GP or other appropriate health professional.

When a placement is not going well for a registrar, or if there is a dispute with the RTP or practice, the RLO may have a role as a ‘sounding board’ and support person. They may listen to the complaint, direct the registrar to further support, or may assist with anonymous or identified enquiries with the RTP.

RLOs are also available to provide emotional support to registrars experiencing personal difficulties.

RLOs can facilitate social or group events that may help registrars debrief and support each other, particularly for those living in rural or remote areas. If you find yourself in a position where you are struggling or feeling isolated, your RLO can provide support via phone calls and emails. They may also be helpful with putting you in touch with other doctors in the area or with social networks.

Contact your RTP to find out who your local RLOs are, or refer to the GPRA RLO directory at gpра.org.au

Dr Julia Coshan, RLO for Beyond Medical Education, at the GPRA Advisory Council meeting, Brisbane, September 2014
The AGPT program
Endpoint qualifications and fellowships

<table>
<thead>
<tr>
<th>FACRRM qualifications (ACRRM)</th>
<th>FRACGP qualifications (RACGP)</th>
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<tbody>
<tr>
<td><strong>Year one</strong></td>
<td></td>
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<tr>
<td>Core clinical training time</td>
<td>Hospital training time</td>
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<tr>
<td>12 months</td>
<td>12 months</td>
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<tr>
<td><strong>Year two</strong></td>
<td></td>
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<tr>
<td>Primary rural and remote</td>
<td>GP terms</td>
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<tr>
<td>training 2 x 6 months</td>
<td>GPT1 – 6 months</td>
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<tr>
<td></td>
<td>GPT2 – 6 months</td>
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<tr>
<td><strong>Year three</strong></td>
<td></td>
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<tr>
<td>Primary rural and remote</td>
<td>Joint training opportunities</td>
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<tr>
<td>training 2 x 6 months</td>
<td>are available †</td>
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<tr>
<td><strong>Year four</strong></td>
<td></td>
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<tr>
<td>Advanced specialised training</td>
<td>Possible equivalence*</td>
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<tr>
<td>12 months</td>
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**FACRRM (VR)**

**FRACGP (VR)**

- Credit given for AGPT training already undertaken towards one fellowship, prior to undertaking a second or third fellowship
- Can be achieved in dual-accredited practices or posts

Note: Although this table is presented in a linear format, both colleges have flexible training options to enable registrars to plan their training around their own needs and interests. See the college websites for more information.
Resources for the road

There is a vast range of resources available on the journey towards fellowship. Many are free, and some may already be available at your practice, hospital or through your RTP. Recently fellowed GP, Dr Fabian Schwarz, shares his resource tips for the road ahead.

In the clinic

Common presentations

General practice is a lot about having an approach to deal with the unknown, and ultimately to assess and manage risks. Common presentations well covered by GP-friendly resources include:

- **Australian Family Physician**: racgp.org.au
- **Australian Prescriber**: australianprescriber.com
- **GP Companion** by GPRA: gpra.org.au (discounted price for GPRA members)
- **How to Treat** by Australian Doctor: australiandoctor.com.au
- **John Murtagh’s General Practice**: mheducation.com.au
- **Medicine Today**: medicinetoday.com.au
- **Royal Children’s Hospital Melbourne**: rch.org.au/rch/health-professionals
- **Rural and Remote Medical Education Online (RRMEO)**: rrmeo.com
- **The NICE pathways**: pathways.nice.org.uk
- **Therapeutic Guidelines and eTG complete**: tg.org.au

Continuity of care and preventive medicine

- ACRRM offers their registrars clinical guidelines for mobile devices: acrrm.org.au
- The RACGP offers a range of free and member-only guidelines, including preventive activities in general practice, putting prevention into practice, smoking cessation and aged care: racgp.org.au

Referrals

- **AMA referrals position statement**: ama.com.au
- Registrar liaison officers are valuable when referring to tertiary hospitals
- Familiarise yourself with the health professionals in your area, introduce yourself and network. Ask your colleagues and practice manager. Ask your patients too

Other online resources

- **AMA** offers a range of resources including a GP desktop practice support toolkit (member access only): ama.com.au
- **Better Health Channel (patient handouts)**: betterhealth.vic.gov.au
- **Blogs** written by GPs and registrars can be useful during training. For a list of reviewed blogs and podcasts, visit gpra.org.au
- **gplearning** by the RACGP: gplearning.racgp.org.au
- **MBS online**: mbsonline.gov.au
- **Medical Observer**: medicalobserver.com.au
- **Pharmaceutical Benefits Scheme (PBS)**: pbs.gov.au
- **Think GP**: thinkgp.com.au
The business end

Contracts – a necessity

GPRA is your one-stop-shop for everything contracts, offering webinars and clued-up RLOs to assist you. Their publications, More than Money and the Terms and Conditions Benchmarking Report are available to assist with contract negotiations. Visit gpra.org.au

Billing – what is that?

Correct billing will allow you to get remunerated for the work that you do. More information about percentages and other money matters can be obtained through GPRA, visit gpra.org.au

- Veterans’ affairs/DVA information: dva.gov.au/service_providers/Pages/index.aspx

Tip: Don’t be afraid to ask your practice manager or reception staff to help out with the basics when you start out. If you don’t know a specific MBS or DVA code, then simply inform your front staff of the length and type of appointment (eg. <5 min, <20 min). You will soon get the hang of it.

Medicolegal stuff

Your indemnity insurance provider should be the first point-of-contact. However, Australian Family Physician, Medical Observer, Medical Journal of Australia and Australian Doctor have all published medicolegal articles worth reading. Check out their websites for details.

Time management

Time management and communication skills are part of the art of medicine, ultimately benefiting your patients. Typing skills and recording key information during your consultation (where appropriate) can actually assist you in getting it right! The following book may be useful: The Ultimate Time Management Guide for GPs by Hugh Kearns and Maria Gardiner (purchase through admin@ithinkwell.com.au).

Key organisations

- Australian College of Rural and Remote Medicine (ACRRM): acrrm.org.au
- Australian General Practice Training (AGPT): agpt.com.au
- Australian Government Department of Health (DoH): health.gov.au
- Australian Medical Association (AMA): ama.com.au
- General Practice Registrars Australia (GPRA): gpra.org.au
- Medicare Australia: medicareaustralia.gov.au/provider
- National Prescribing Service (NPS): nps.org.au
- Rural Health Education Foundation (RHEF): rhef.com.au
- Rural Health Workforce Australia (RHWA): rhwa.org.au
- The Royal Australian College of General Practitioners (RACGP): racgp.org.au
- Therapeutic Goods Administration (TGA): tga.gov.au
GPRA is the peak national body for GP registrars.

Run by registrars, for registrars.

GPRA produces a range of resources to support registrars throughout their training and assessment. Contact the registrar services team to find out how GPRA can help you.

**GP Registrar**
The essential guide for GP registrars.

**Benchmarking report**
Power up your negotiations!
Find out what other registrars earn.

**In-practice teaching resource**
Maximise your in-practice teaching experience.

**More than Money**
A negotiation guide for registrars in training and post fellowship who are negotiating a contract.

**Exams**
Tips, case studies, webinars and a new exam book – we have you covered.

**National Terms and Conditions document**
Your employment terms and conditions have already been negotiated.

**GPRA website**
The latest news and information for registrars; keeping you informed during your training.

1300 131 198
gpra.org.au
Supporting general practice registrars