

**Primary Medical Care Workforce Issues**


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- Where do want to get to and why?
- What issues exist?

**\*Primary medical care - a component of the broader primary health care system**




**Home**

- Home
- Welcome
- Objectives
- Background
- People
- Research
- Policy development
- Events
- Article of the month
- Links
- Affiliates
- Governance
- Contact us
- Links

**Home**

The Australian Health Workforce Institute (AHWI) is an innovative research-driven institute dedicated to achieving health workforce sustainability by 2020. The Institute was established by the University of Melbourne and the University of Queensland in December 2007.



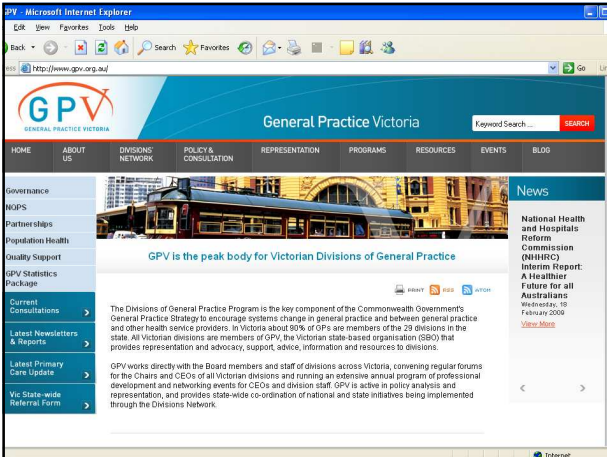
AHWI draws on expertise from a wide range of local and international sources and works closely with State and Commonwealth jurisdictions.

The Institute's head office is located at the University of Melbourne.

[Read more](#)



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General Practice Victoria

HOME ABOUT US DIVISIONS NETWORK POLICY & CONSULTATION REPRESENTATION PROGRAMS RESOURCES EVENTS BLOG

**GPV is the peak body for Victorian Divisions of General Practice**

The Divisions of General Practice Program is the key component of the Commonwealth Government's General Practice Strategy to encourage systems change in general practice and between general practice and other health service providers. In Victoria about 90% of GPs are members of the 29 divisions in the state. All Victorian divisions are members of GPV, the Victorian state-based organisation (SBO) that provides representation and advocacy, support, advice, information and resources to divisions.

GPV works directly with the Board members and staff of divisions across Victoria, convening regular forums for the Chairs and CEOs of all Victorian divisions and running an extensive annual program of professional development and networking events for CEOs and division staff. GPV is active in policy analysis and representation, and provides state-wide co-ordination of national and state initiatives being implemented through the Divisions Network.

News: National Health and Hospitals Reform Commission (NHHC) Interim Report: A Healthier Future for all Australians. Wednesday, 19 February 2009



**Where do want to get to and why?**

- **Where to** - a well qualified & sustainable workforce by 2020
- **Why** - the 2020 primary medical care workforce needs to deal with:
  - Global health workforce shortage
  - Supply of new medical graduates
  - Innovative education & training models
  - Shift in balance of care - acute -> community
  - Proactive PCOs in health workforce planning
  - Prevention not illness focussed health system




**Context**


**National Health & Hospitals reform Commission Interim Report (2009)**

**Chpt 9. Delivering better health outcomes for remote and rural communities**

*"Locally designed and responsive primary health care services are the foundation of accessible quality health care for people in remote and rural areas."* (P219)

**Issues**

- Policy
- Research
- Practice







**Policy Level**

- Lack of planning
- lack of performance based planning and monitoring frameworks
- lack of incentives for evidence informed policy
- reliance on IMGs
- lack of a community voice in policy

**Policy level questions:**

- What principles and performance based planning and monitoring frameworks can guide planning?
- What policy incentives exist for evidence informed policy?
- What policy options exist to ensure international recruitment and migration are managed effectively?
- What policy levers exist to enhance consumer health literacy, assisting community participation in policy?










**Research Level**

- lack of systematic collection, aggregation and use of medical and non-medical workforce data sources
- limited evaluation of new roles and new team structures
- limited assessment of the effect of incentives.

**Research level questions**

- What opportunities exist to improve collection and analysis of medical and non-medical workforce data sources?
- What opportunities exist to evaluate new roles and new team structures?
- What opportunities exist to evaluate the effect of incentives on the primary care workforce?










**Practice level**

- The shift in the balance of care from the acute to the community primary care setting, and its implications for skill mix
- variable incentives approaches exist to influence and sustain practice change

**Practice level questions**

- What are the skill mix implications of the shift in the balance of care from the acute to the community primary care setting?
- What incentives approaches exist to influence and sustain practice change?

**In Conclusion: to ensure :**  
*locally designed and responsive primary health care services .....in remote and rural areas." (P219)*

**Three priority issues need addressing:**

- To develop a primary medical care workforce performance framework
- To support innovative and flexible interprofessional team based clinical education and training primary medical care models of care.
- To develop policy incentives to enhance: evidence informed policy making; and consumer health literacy and participation in policy determination and planning

**THANK YOU**

