

The Generalist Pathway

Strategic Plan 2017

Foreword

We are pleased to present the Queensland Rural Generalist Pathway (QRGP) Strategic Plan.

The QRGP is a world leader in training and supporting passionate and dedicated medical officers to achieve a diverse and purposeful career delivering the health services rural communities need. Since our establishment in 2007, the QRGP has supported more than 100 medical officers to achieve a career as a Rural Generalist; and there are more than 300 trainees on the Pathway. By 2020 we expect more than 250 trainees will have completed rural generalist training.

The QRGP's vision is reliable, comprehensive health care for Queensland's rural and remote communities delivered close to home. We have adopted five principles to help guide decision making and focus in the attainment of this vision:

- Excellence
- Community focussed
- Flexible and adaptive
- Joined up
- Collaborative

Over the life of this plan, in keeping with the principles of the Roma Agreement (2005), we aspire to:

- Support the growth and sustainability of Queensland rural and remote medical services through the appropriate training and placement of Rural Generalist Trainees who can meet the needs of the community.
- Increase the uptake of advanced skills training in cognitive/medical disciplines such as internal medicine, Indigenous health, mental health, paediatrics and emergency medicine.
- Increase the number of Trainees and Fellows working in community general practice.
- Engage with key stakeholders to address the lack of comprehensive workforce planning data for Queensland's rural and remote communities.

This Strategic Plan also underpins the Department of Health's strategic objectives: supporting Queenslanders to be healthier, equitable health outcomes, enabling safe, quality services; engaged and productive workforce; and considers the objectives of the *Medical Practitioner Workforce Plan for Queensland*.

We look forward to using this document as the foundation to guide our work as we advance into the next decade of rural generalism in Queensland.



Dr John Douyere
Medical Director

A handwritten signature in black ink, appearing to read 'John Douyere'.



Dr Hwee Sin Chong
Executive Director, Rural and Remote Medical Support

A handwritten signature in black ink, appearing to read 'H. Sin Chong'.

August 2017

Our Strategic Plan

Our vision

Reliable, comprehensive health care for Queensland's rural and remote communities delivered close to home.



Our purpose

Providing medical graduates with a supported training pathway to a career in rural and remote medicine; and rural and remote communities with a skilled medical workforce.

Our values

We use the following values to guide our work and to help us achieve our goal:

- › Compassion
- › Integrity
- › Dignity
- › Innovation
- › Courage



Our Strategic Plan

Our principles

The QRGP has adopted five foundation principles that guide the implementation of the Strategic Plan. At each decision making point we consider if the planned action supports these principles.

Excellence

We coordinate a progressive, responsive, world leading medical workforce initiative that develops and supports rural generalist practice

Community focussed

We keep rural community needs at the forefront of our decision making

Flexible and adaptive

We recognise the importance of personal and professional development and seek out flexible models of training and employment

Joined up

We market and provide a supported career path from medical school to sustainable rural generalist practice

Collaborative

We develop strong working relationships and partner with universities, public and private service providers, general practice training providers, colleges and rural and remote communities to deliver appropriately trained health professionals.

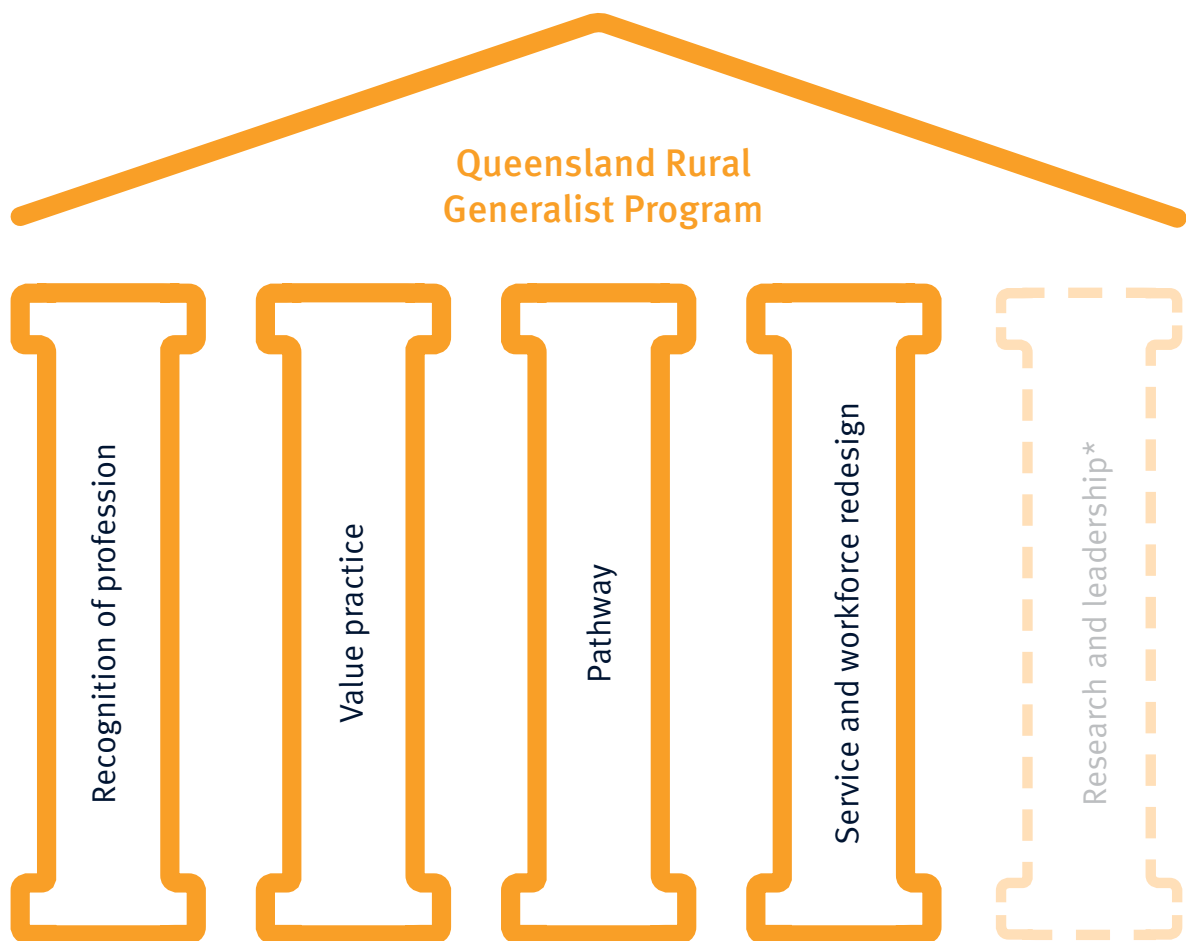


The Queensland Rural Generalist Program is founded on four pillars characterised by:

- › recognition of rural generalist medicine as a unique medical discipline in its own right;
- › valuing the practice for its true worth;
- › a supply line/pathway to practice (the Queensland Rural Generalist Pathway (QRGP));
- › and service and workforce redesign.

The intention of the QRGP Strategic Plan is to train and support the rural generalist workforce to respond to community need by ensuring the right doctor with the right skills is doing the right job in the right place.

We are now working to establish research and leadership as the fifth pillar.



**Under development*

Our approach

Strategies	Objectives
Clients	
1. Address inequity of health access for rural and remote Queenslanders	1.1. Attract, recruit, retain and grow the rural generalist workforce
	1.2. Develop flexible, adaptive and community needs based training and workforce solutions
Resources	
2. Ensure sustainable resources through attentive financial and asset administration	2.1. Effectively and appropriately manage costs and assets
	2.2. Explore and maximise business development opportunities
	2.3. Enhance and strengthen ICT capacity and capability
Processes	
3. Contribute to the body of knowledge and evidence pertaining to rural generalist medicine and capacity for rural generalist training	3.1. Collate and publish accurate workforce and vacancy data
	3.2. Actively pursue research and evaluation opportunities in accordance with the QRGD Research Strategy
	3.3. Contribute to the delivery of quality rural generalist training across jurisdictions
4. Support patient and community centred care	4.1. Engage, communicate and collaborate with training stakeholders and communities
Workforce	
5. Develop the leadership and resilience skills of the rural generalist workforce	5.1. Provide access to leadership development opportunities and support professional collegiate networks

Measures of success

- 1.1.1. The QRGP is promoted effectively
- 1.1.2. Recruitment and selection processes support the appointment of suitable aspiring rural generalists
- 1.1.3. Access to a positive rural health experience and career opportunities is improved
- 1.1.4. The gap between rural workforce demand and supply decreases
- 1.2.1. The diversity of career offered is appealing and sought after
- 1.2.2. Early immersion in rural medicine reinforces career choice
- 1.2.3. Decrease in critical medical vacancies and use of locum services
- 1.2.4. Hospital staffing models are integrated with primary care service provision
- 1.2.5. Increased focus on chronic disease management
- 1.2.6. Unmet community health needs determine the skillset required
- 1.2.7. Improved access to health care for rural and remote Queenslanders
- 1.2.8. Synergistic collaboration with Queensland Country Practice's specialist vocational training pathways

- 2.1.1. A balanced or surplus operating position is maintained
- 2.1.2. Strong and effective working relationships are developed with funders
- 2.1.3. Equipment is maintained and asset replacement is planned
- 2.2.1. Operational agility and revenue opportunities are maximised
- 2.3.1. ICT supports success
- 2.3.2. Robust data management tools meet QRGP needs

- 3.1.1. Recent, reliable and detailed data is available on the size and characteristics of the rural generalist workforce
- 3.1.2. Data informs local and statewide workforce planning and decision making
- 3.1.3. Increased evidence based decision making occurs in regards to rural health service provision
- 3.2.1. Increased understanding of workforce models and other factors that improve recruitment and retention
- 3.2.2. Increased team and trainee exposure to research methodology
- 3.2.3. Increased research capacity of the rural generalist workforce
- 3.2.4. Increased body of research available that is relevant to rural communities
- 3.2.5. Knowledge is shared with other jurisdictions and strengthens rural generalist medicine nationally and internationally
- 3.2.6. The QRGP remains fit for purpose
- 3.3.1. The Rural Generalist Jurisdictional Forum is a well-established source of expertise and advice
- 3.3.2. The QRGP is a key player in national rural generalist pathway developments
- 4.1.1. 'Grow our own' initiatives mature
- 4.1.2. Communities are involved in the planning and training of the workforce
- 4.1.3. Service delivery is locally designed and aligns with community need
- 4.1.4. Broad and diverse stakeholder input is embedded in a robust governance structure

- 5.1.1. Best practice leadership and supervision principles are applied
- 5.1.2. Recruitment and retention of the rural generalist workforce is enhanced
- 5.1.3. The Queensland Rural Generalist Leader Program advances the future leaders of rural and remote Queensland
- 5.1.4. Vertical and horizontal integration is achieved

Challenges for the next 5 years

Training opportunities

- Identify and market additional capacity in prevocational and advanced skills training opportunities to accommodate the expanded QRGP intake.
- Ensure continued access to QRGP mandated, highly sought after prevocational terms.
- Continue to expand vocational training opportunities beyond the Senior Medical Officer Provisional Fellow model.
- Align trainee advanced skills discipline choices with community need.

External influences

- Support trainees to achieve a rural generalist career in a complex general practice training governance and policy environment.

Business systems

- Ensure technology infrastructure supports operational and strategic need.

Recruitment and retention

- Refine recruitment processes to optimise selection of suitable candidates.
- Recruit and retain a qualified and committed rural generalist workforce.
- Identify sufficient supervisors to support the increasing number of trainees.
- Meet the workforce needs of underserved communities.





find your calling

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