



22 July 2011

## **GP GROUPS URGE GOVERNMENT TO MAINTAIN AND SUPPORT GENERAL PRACTICE AS THE LYNCHPIN OF PRIMARY HEALTH CARE**

Australia's peak general practitioner coalition, United General Practice Australia (UGPA), has vowed to continue to pressure the Government to acknowledge and support general practice as the lynchpin of primary health care in Australia in all primary health care policy and programs.

UGPA met in Canberra yesterday.

The UGPA commitment strongly targets Medicare Locals and the Budget cuts to GP mental health services.

UGPA acknowledges the potential for Medicare Locals if they are implemented correctly and with the right intentions.

This means that GP leadership, skills in governance, and knowledge of their communities must be strong features of Medicare Locals boards and other governance arrangements.

Noting the national coordination role that has been given to the Australian General Practice Network (AGPN), UGPA urges the Government to retain the special governance skills and knowledge of GPs who for more than 20 years have guided the work of the Divisions of General Practice in delivering quality primary health care services to local communities.

In the transition to Medicare Locals, the Government must not push established and respected GPs out of board positions just because they are GPs.

UGPA endorsed and supported the findings of the AMA survey of GPs about the cuts to GP mental health services.

The survey of more than 760 GPs nationally found that 85 per cent of GPs think that the Budget cuts will reduce patient access to mental health services and 28 per cent of GPs surveyed said they would stop using Medicare GP Mental Health Treatment items.

UGPA reiterated that the Government's changes mean that Medicare would treat people with mental illness less favourably than people with a physical ailment.

UGPA will provide further evidence and arguments to the Government to show that the Budget cuts will seriously diminish vital frontline mental health services provided in the community by GPs.

UGPA discussed some key issues around rural health.

There was discussion of the major anomalies in the ASGC-RA classification system and the resulting adverse impacts on rural medical workforce recruitment and retention. This system was introduced in July 2010 as a major determinant of rural workforce incentive programs.

UGPA will demand that the Minister publicly release the results of a review of this classification system and will call for further consultation with the profession.

UGPA has agreed to establish a working party to examine the establishment of a *national advanced rural training pathway*.

UGPA will continue lobbying the Government and advocating in the community about the importance of maintaining and promoting general practice as the lynchpin of primary care.

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