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Medical workforce distribution review? Yes please!

The Rural Doctors Association of Australia (RDAA) has welcomed a Federal Government review that will investigate how to more equitably distribute health professionals around Australia, agreeing that the current mechanisms are not working

RDAA President Dr RT Lewandowski said that much could be done to update the current metro-centric programs.

"We welcome the Working Better for Medicare Review and the focus it will have on ways to better distribute the medical and health workforce" **RDAA President, Dr RT Lewandowski said.**

"We agree that the current systems are not fit-for-purpose, with many never ideal to start with.

"For example, last year's changes to the Distribution Priority Area (DPA) classification only increased the struggle to recruit and retain doctors in the bush.

"DPA was developed as a way of enabling medical practices in rural and remote areas to attract and retain Overseas Trained Doctors (OTDs). It wasn't a perfect system, but when it was expanded to include all large regional and some outer metro areas it did not result in a new influx of doctors – just a migration of them from rural and remote to city areas.

"We need the entire training pipeline to be looked at, as it continues to create a workforce that is focused in urban centres," Dr Lewandowski said.

"The first two years of most junior doctor training is based exclusively in large hospitals. This is despite the fact that general practice, which is not hospital-based, provides the foundation of our entire health care system.

"Junior doctor training must include exposure outside of the hospital and outside of the city.

"Programs from medical school onward need to be focused on delivering the doctors we need into the areas we need, and they need to be held accountable for doing this.

"This review will be seeking to identify ways to improve health access for all Australians, particularly those in rural, remote and outer-metro areas, by building a more stable, motivated, and properly located workforce, which is exactly what is needed."

While RDAA supports the review, it also warns about the risks of abandoning those parts of the system that are working well, such as the Modified Monash Model (MMM) geographical classification system.

"Minister Butler has flagged that the MMM will also be under review," **Dr Lewandowski said.** "This classification model is currently used in determining the application of health workforce support and incentive measures across Australia.

"While no system is perfect, MMM has been the best of the geographical ranking systems used by successive governments in determining locations that need additional measures to attract and retain doctors. Using a scale of MMM1 (metro) to MMM7 (very remote) it has proved to be the most accurate tool we've had to provide a clear distinction between metro, large regional, rural, remote and very remote areas.

"We would be disappointed to see this replaced with a new system, as development and testing takes considerable time that we simply don't have with the amount of issues that need fixing right now.

"We are very pleased to see long-time rural health expert Professor Sabina Knight as a Review chair, alongside another respected health expert, Mick Reid," Dr Lewandowski said.

"We look forward to contributing to this Review, and hope to see positive outcomes that will help address the ongoing challenges of the health workforce maldistribution."

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A high resolution photo of Dr RT Lewandowski is available here.

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