At JCU, we acknowledge the Australian Aboriginal and Torres Strait Islander peoples as the Traditional Owners of the lands and waters where we operate our business. We pay our respects to ancestors and Elders, past, present and future. JCU is committed to honouring Australian Aboriginal and Torres Strait Islander peoples’ unique cultural and spiritual relationships to the land, waters and seas and their rich contribution to the University and society.

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Message from the Dean

James Cook University took up the challenge of delivering General Practice training across 90 per cent of Queensland with a very deliberate intent. From the outset, our ambition has been to align the program with priority needs of communities for health care, whilst providing excellent education and training that equips and inspires GP registrars for fulfilling General Practice careers with impact. Perhaps an adventure or three as well!

To achieve this has required a major focus on local capacity-building and collaboration, given that the area we serve is twice the size of New South Wales and covers some of the most isolated and disadvantaged communities in the country. Accordingly, we set about building a distributed, community-engaged model for our Generalist Medical Training program. Extraordinary things have been achieved in a mere 18 months through the efforts of an exceptional and committed group of staff, GP supervisors, registrars and collaborators, working with the guidance and oversight of our Strategic Leadership Council.

It is fair to say that the power of the vision has been comprehensively affirmed - excessive workloads, air miles and the odd bump in the road aside. Never before have so many registrars been successfully training in western and remote locations in Queensland for instance. Consistently high and improving registrar feedback speaks to the quality of training and support provided, much of it now local for the first time. There are compelling case studies and growing data that give every reason for confidence that we are making a real difference. Real partnerships have been built with many organisations, not least among the Queensland network of Aboriginal Community Controlled Health Services and their state peak body, the Queensland Aboriginal and Islander Health Corporation.

We now transition to a phase of maturing systems, full implementation of the distributed delivery model and the flourishing of partnerships. There are opportunities to further strengthen the ‘vertical integration’ link from medical school through junior doctor training, Fellowship training and on to career-long professional development. Similarly, the Australian Government’s Regional Training Hub initiative is an opportunity to better integrate regionally-based training to a General Practice Fellowship with training to other regional medical specialty careers. In both cases, better approaches to identifying and selecting the right candidates early remains a key area for further attention. We’ve begun the important work of understanding and documenting our impact and using our experiences to inform further development.

All of this holds great promise for the communities of regional and remote Queensland and beyond. I warmly commend all those involved in this important initiative for their passion, talent, good humour and plain hard work. We all feel this to be an important task, and I’m confident that we will not be found wanting. The future is in good hands.

Professor Richard Murray
Dean, College of Medicine and Dentistry
“GP Supervisors continue to provide excellent training posts for the registrars. A remarkable 95.5 per cent of registrars report that they would recommend their most recent training post to other registrars. Supervisors and training post staff should be justifiably proud of this result.”

Associate Professor Peta-Ann Teague

Message from the Director

I am pleased to present this report which summarises the work that James Cook University (JCU) has done through Generalist Medical Training (GMT) over the past twelve months. It has been a very busy and rewarding period.

During this time JCU achieved important milestones including accreditation by both Australian College of Rural and Remote Medicine and Royal Australian College of General Practitioners as a Regional Training Organisation. Our goal of a distributed model of GP registrar training is a reality, with local offices being the first point of contact for registrars, supervisors and training post staff. In August 2016 MyGMT became available to all registrars and supervisors. This enabled them to access registrar training records as well as a suite of teaching and learning resources. It also allows training posts to record and submit registrar teaching hours electronically.

GP Supervisors continue to provide excellent training posts for the registrars. A remarkable 95.5% per cent of registrars report that they would recommend their most recent training post to other registrars. Supervisors and training post staff should be justifiably proud of this result.

The work that JCU has done in establishing GMT is reflected in feedback from registrars and supervisors. 88% per cent of registrars report being satisfied with the support being offered to them by GMT medical educators (an increase from 73 per cent in semester 1, 2016), and 84 per cent are satisfied with the support they get from GMT administrative staff (an increase from 66 per cent in semester 1, 2016). Whilst there continues to be room for improvement, these are very encouraging results.

Importantly, we have articulated our vision of attracting registrars and supervisors whose values align to ours and who wish to contribute towards the development of a health workforce which meets the needs of the communities that we serve. Psychologists are familiar with the importance of “minding the gap” in a workplace, where the gap is the potential disconnect between one’s values and beliefs and one’s work. Aligning these is a key component to ensuring a sense of purpose in and satisfaction with one’s work.

An outstanding feature of GMT is the staff, who work tirelessly to achieve our strategic priorities because they believe in them. Our GP supervisors, registrars and GMT staff are involved in “growing our own” workforce – linking local undergraduate programs with postgraduate training in rural and regional Queensland. Inspiring junior doctors to be part of this is an exciting goal and one which we will continue to pursue.

Despite these many positives, there continue to be significant challenges for us to manage. The geographical spread of the GMT region means that creating a community of practice of supervisors and registrars, enabling local flexibility whilst maintaining program consistency, and responding to the diverse health needs of the region is a complex set of tasks. The policy changes to the Australian General Practice Training program in 2016 continue to impact the program, particularly with regard to the training time cap. The involvement of the Colleges from 2017 in the registrar selection, remediation and appeals processes is a further new development which I will report on at the end of the 2017/18 year.

I look forward to the next 12 months with confidence as the GMT program matures and we continue to work towards meeting our strategic goals.

Associate Professor Peta-Ann Teague
Director, GMT
The establishment of GMT within JCU provides the opportunity to leverage the University’s high quality education expertise, networks and use of emerging technologies to support teaching, learning and assessment, and an ongoing contribution to the evidence base of primary care education and training.

**Introduction to GMT**

Generalist Medical Training (GMT) is James Cook University’s (JCU) training program in the medical specialty of General Practice. The program is delivered through JCU’s College of Medicine and Dentistry under contract to the Australian Government. JCU is the first Australian university chosen to deliver the Australian General Practice Training (AGPT) program, which provides training towards fellowship with the Royal Australian College of General Practitioners (RACGP) and the Australian College of Rural and Remote Medicine (ACRRM).

In addition to providing the necessary training to allow doctors to achieve fellowship, JCU aims to provide better health outcomes for rural and regional Queensland, meeting the priority needs of diverse populations with a focus on remote and underserved communities, and the health of Aboriginal and Torres Strait Islander people.

In order to achieve this aim JCU has adopted a distinctive approach, building a workforce of graduates with an aptitude for service in rural, remote and regional Australia. For decades, health services across regional Queensland have faced various challenges with workforce recruitment and retention, leading to a significant reliance on locum doctors. To meet this challenge head on JCU has developed a fully integrated regional training pipeline, using a distributed model to deliver General Practice training.

The GMT education model is registrar focused, and uses best practice and emerging education methods and technology to maximize the learning experience, reduce isolation and build a sustainable general practice workforce. The model is vertically and horizontally integrated to build teaching and learning communities of practice within primary care settings in the region. The program applies the RACGP and ACRRM curricula to the distinctive features of primary care across the region. In addition to the core curriculum and College standards, the context of practice, population health, Aboriginal and Torres Strait Islander health, remote technologies and the development and maintenance of advanced and specialised skills are integrated into the program.

The establishment of the GMT program within JCU provides the opportunity to leverage the University’s high quality education expertise, networks and use of emerging technologies to support teaching, learning and assessment, and an ongoing contribution to the evidence base of primary care education and training.

**Our Locations**

JCU is responsible for what the Commonwealth Department of Health has designated the North West Queensland (NWQ) training region, a large and geographically diverse area of the state. The training region services a population of more than 1.5 million people, which is about one third of Queensland’s total population. The region offers a vivid mix of people and landscapes, from glorious beaches, mountains, hinterlands, spectacular rainforest, and rich farmland to wide savannah country, wilderness and the red soil of the Australian outback.

The communities of the training region share a unique set of priorities and challenges. The GMT regional office network delivers training and education that is community oriented and engaged, and therefore, connected to issues of relevance in each individual region.

JCU delivers the Generalist Medical Training program through offices located in Atherton, Bundaberg, Cairns, Hervey Bay, Longreach, Mackay, Maroochydore, Mount Isa, Rockhampton, Roma and Townsville.

With JCU’s focus on meeting the health needs of the most underserved regions across Queensland, there has been a concerted effort to improve the capacity of training posts and the number of registrars undertaking training in the remote central west (Longreach), north west (Mt Isa), and Cape regions.
"You look after patients in hospitals, you deal with a resuscitation or two, you put people’s bones back into place when they fall off a horse and (look after people in) palliative care, you do pretty much everything."

GMT Registrar, Dr Cameron Hoare

Dr Cameron Hoare is a Generalist Medical Training (GMT) registrar dedicated to providing good primary and hospital care to the town he now calls home.

The Cardwell raised doctor decided on a tree change after his fourth-year medical placement in Cloncurry, at the Flinders Medical Centre.

Dr Hoare said it was his James Cook University (JCU) medical degree that set him on his rural career path.

"When I started doing medicine I really enjoyed emergency medicine. One of my first elective placements was with the Queensland Ambulance Service in Townsville.

"I never really liked cities, but I liked the excitement of some emergency medicine and I liked pretty much everything (about medicine)," he said.

"Then I found a place (Cloncurry) where I could do proper general practice and still do emergency medicine."

In Cloncurry, Dr Hoare met mentors Dr Bryan Conner, Dr Christopher Appleby and Dr Julie Verran at the Flinders Medical Centre. He said they showed him what proper General Practice was about.

"You look after patients in hospitals, you deal with a resuscitation or two, you put people’s bones back into place when they fall off a horse and (look after people in) palliative care, you do pretty much everything. All the proper general parts of General Practice are done in Cloncurry," he said.

After his first placement as a medical student in the rural town, Dr Hoare returned in his sixth year and then again later to undertake GP training with JCU through the Generalist Medical Training program.

He applauds the GMT program, and said it strongly encourages doctors to take up rural and remote posts.

"GMT definitely has an advantage in that they are providing registrar training and trying to support registrars training out west, which is actually a great success."

Set to fellow with the Royal Australian College of General Practitioners in 2018, Dr Hoare has his sights firmly set on a long and rewarding career in the bush.

"Ideally I would probably want to end up being the practice owner of Flinders Medical Centre and the Medical Superintendent of Cloncurry and Julia Creek Hospitals at the same time. But I have to get a few more years of experience before I can do that.

"Overall the quality of the medicine is great, the continuity of care is great, the skills and knowledge that I’m acquiring are fantastic."

Dr Hoare is grateful for the guidance of his mentors, including Dr Leonie Fromberg.

"She started as a registrar in Cloncurry about six or seven years ago and is now one of the qualified fellowed GPs in Cloncurry. She has been a great support and a role model," he said. "Bryan Conner is probably the best mentor any registrar could ask for."
**Key Milestones**

**July**
- GMT Townsville moves into permanent premises at JCU Townsville campus
- Commencement of the on-boarding of 300+ training posts, 300+ supervisors and 500+ registrars to MyGMT

**September**
- Commencement of the 2017 placement process for new “2017 cohort” registrars

**October**
- Completion of the 2017 placement process for 400+ continuing registrars
- GMT opens office in Roma to support registrars based in the South West

**November**
- First locally held registrar and supervisor workshops in Rockhampton

**January**
- Introductory workshops simultaneously held across four locations for registrars commencing in GP training posts in 2017
- Additional introductory workshop day for all registrars training remotely

**February**
- GMT Cairns moves into new permanent premises in Cairns, co-locating with the JCU City Campus and the Northern Queensland PHN
- Commencement of 2017 Supervisor Workshop program

**March**
- Inaugural ‘remote registrar’ workshop in Longreach
- Strategic Leadership Council meeting is held in Rockhampton

**April**
- “Opal” sponsor of WONCA Rural Health Conference Cairns
- GMT staff present at six conference sessions at WONCA
- GMT hosted WONCA post-conference study tour to Thursday Island in the Torres Strait
- Commencement of the 2018 placement process for 400+ continuing registrars

**May**
- Cultural Educator, HenryNeill commences with GMT to focus on cultural competence for all Registrars
- GMT Facebook page debuts

**June**
- Aboriginal and Torres Strait Islander registrars attend Indigenous General Practice Registrars Network (ICPRRN) workshop
- Additional GMT Team Leader position established for the Western regions of Mt Isa and Longreach (North West and Central West Nodes)
- Platinum sponsor RDAQ Conference in Townsville
- Aboriginal and Torres Strait Islander Cultural Mentor Forum held in Brisbane

**During the program year 106 registrars achieved Fellowship**
What we do

Through the Generalist Medical Training program, James Cook University aims to provide better health for the regional Queensland communities we serve, training GPs for careers with adventure, skills and impact.

Values

GMT is committed to the following values in our work:

COMMUNITY FOCUS
We are proactive, solution focused and resolute in seeking to understand, respond and advocate for priority community needs locally and beyond.

COLLABORATIVE
We are collaborative, engaged and respectful in how we work together with our partners and stakeholders to achieve common ends.

PRIDE IN QUALITY
We are proud of our achievements, a sense shared by the people with whom we work, and those we serve. We constantly seek to improve our performance through hard work, rigour and scholarship.

ACCOUNTABLE
We are accountable to our community and stakeholders. We are committed to being open, honest and ethically governed.

Our strategic intent

Generalist Medical Training (GMT) aims to provide better health for the regional Queensland communities we serve through excellent GP training that is:

- Networked, collaborative and engaged with local communities
- Accountable for meeting priority community needs
- Connected from medical school to practice as a capable and confident General Practitioner via a clear and satisfying training pathway
- Leads to fulfilling General Practice careers that make a difference

Strategic Leadership Council

The GMT Strategic Leadership Council is the peak advisory body for the program. It informs, shapes, advocates and assists in holding the program accountable to its purpose and values.

The Strategic Leadership Council (SLC) continues in its vital role as the key advisory group for GMT. The Council is made up of key external stakeholders who are willing to give their time to advise GMT on strategic matters that impact the training program across our large geographic area. The Strategic Leadership Council is comprised of individuals chosen to provide a broad skill and experience matrix from diverse geographic settings. Council members’ backgrounds include community general practice, rural hospital medicine, specialist practice, health sector management, medical training, medical workforce, community perspectives and academic medicine. Organisational affiliations of Council members include three Queensland Primary Health Networks, the University of Queensland Rural Clinical School, Health Workforce Queensland, the Rural Doctors Association of Queensland, the Royal Flying Doctors Service, Queensland Health (including several Hospital and Health Service Psychics) and the Queensland Aboriginal and Islander Health Council.

The Strategic Leadership Council meets twice a year. The August 2016 meeting was in Roma, followed by a meeting in March 2017 in Rockhampton. Both meetings were chaired by Professor Harry Jacobs, who has been with GMT since its inception.

Highlights from the Roma meeting include approval of the SLC Terms of Reference and review of the final draft of the GMT Strategic Plan.

At the Rockhampton meeting, emphasis focused on ratification of the GMT Strategic Plan, as well as our Program Evaluation Framework and Program Logic Map. Discussion also centred on the work that is happening in the Aboriginal and Torres Strait Islander Health Training Program, including a Departmental review of the Salary Support Program. Workforce need was, as always, an important topic of discussion across both meetings.

GMT and JCU key staff who are guided by this group include the Director and Deputy Directors of GMT, Dean of the JCU College of Medicine, Associate Dean for Strategy and Engagement, College Manager and Head of Operations. The registrar group is represented by one of the Registrar Liaison Officers, and several of GMT’s Senior Fellows also participate, as does the Director of the Mount Isa Centre for Rural and Remote Health (MICRRH) and our GMT Practice Support Advisor.

“ ”

Strategic Leadership Council Chair, Associate Professor Harry Jacobs
The GMT regional office network delivers training and education that is community oriented and engaged, and therefore, connected to issues of relevance in each individual region.

Case Study

Rural and Remote Health Training, Central West and North West Queensland

Queensland is the most decentralized state in Australia. The North West Queensland GP training region incorporates the bulk of this land area, most of its rural towns and all of its remote communities. Currently the General Practice needs of the North West Queensland region, especially the more rural and remote communities, are not being fully met. James Cook University (JCU) has a vision to improve the health for the communities it serves through providing excellent General Practice training using the distributed training model of the Generalist Medical Training (GMT) program.

A particular priority has been the effort to increase training capacity, GP registrars numbers and ultimately GP workforce in the Central West and North West training regions. This is a vast remote area that stretches west from the Great Dividing Range to the Northern Territory border, and includes the towns of Mount Isa, Cloncurry, Longreach, Emerald and dozens of small towns and communities.

The program covers these very remote regions between the Northern Territory and South Australian borders. Life expectancy in these regions and the years spent in good health are below the Queensland average, with many residents suffering from chronic diseases, including heart disease and diabetes. A report by the Central West Hospital and Health Service recently found that many deaths and injuries in the region are avoidable and that it is not unusual for residents to be hospitalised for illnesses that could have been prevented or treated in the community.

As part of the drive to build capacity in these very underserved regions, JCU has established a new GMT Team Leader position and increased the capacity of the Training Officer position in Mount Isa. The sharing of resources across both regions allows the flexible and agile use of resources across both nodes. As in other locations, the GMT program is delivered in collaborative local arrangements, including in this case, JCU’s Mount Isa Centre for Rural and Remote Health facilities in Mount Isa, Cloncurry and Longreach.

JCU’s GMT training posts across the North West and Central West training regions provide registrars with unique opportunities to gain medical knowledge and experiences across a wide range of areas including Aboriginal and Torres Strait Islander health, travel medicine, occupational medicine, sexual health, minor surgery, anaesthetics, obstetrics and mental health. JCU has contributed to a significant change in the medical workforce across the region. For the first time in its history the Central West Hospital and Health Service no longer relies on fly in fly out locum doctors, as permanent local doctors now staff the hospitals in both Longreach and Emerald.
The GMT program has four strategic priorities.

1. Align the program with community needs across the region
   - Identify the right candidates early
   - Match registrars to priority community requirements
   - Facilitate pathways for students and junior doctors
   - Collaboratively identify and prioritise locations with workforce gaps

The Generalist Medical Training (GMT) program aims to attract and retain values aligned registrars, match registrar training posts to priority community needs and develop pathways for students and junior doctors within the region with the intention that many will remain as specialist GPs. More than 90 percent of GMT registrars surveyed in 2017 believe that working in rural and remote general practice has a positive impact on health outcomes. In contrast to current national trends, the majority of the GMT cohort plan to continue practicing outside major Australian cities.

To develop and grow a local GP pipeline in north west Queensland, James Cook University (JCU) is working to facilitate pathways for students and junior doctors in the region. Currently about a quarter of enrolled GMT registrars are JCU graduates. Of those, most are enrolled in the rural GP pathway, and almost half are serving in very remote Queensland locations.

The co-location of JCU clinical schools and GMT offices across the region provides pathways for students and junior doctors to become GMT registrars. There are opportunities for shared activities and teaching, and many staff and medical educators work across the various JCU programs, providing a range of training from medical students through to GP registrars. The development of new regional training hub initiatives will further enhance this trend.

As part of JCU’s vision to improve health outcomes for communities across north west Queensland, the GMT program has adopted geospatial analysis technology to identify priority areas where additional GP training posts are needed to meet the needs of underserved areas. Using the results, GMT nodes have worked closely with local communities to establish eight new training posts in areas of greatest need. In addition, a GMT office has been opened in Roma and further locations are under consideration.

There has been a steady increase in the number of registrars choosing to work in remote western locations as part of the program, with applications for placements for current registrars continuing to rise across the remote nodes of Central West, South West and Torres Strait and Cape. The number of applicants for rural areas, R3, R4 and R5 has also continued an upward trend since 2015.

To ensure community needs are met, extensive work has also been carried out to increase non-procedural Advanced Skills Training (AST) in the GMT program. New Advanced Skills Training in paediatrics, acute internal medicine, Aboriginal and Torres Strait Islander health and mental health have now been accredited for Mount Isa, Thursday Island and Longreach.

There were 668 registrars active in JCU’s GMT program during the financial year 2016-2017, 106 registrars had Fellowed, including 10 through ACCRM and 91 through RACGP. Five registrars achieved dual fellowship.
2. Engage in state and local partnerships through a distributed model

- Strengthen communication and teamwork across the GMT network
- Foster the geographically distributed model of leadership
- Build training capacity by supporting supervisors and training posts

James Cook University (JCU) has focused on strengthening communication and teamwork across Generalist Medical Training’s (GMT) 11 regions. To ensure engagement with stakeholders at a local, state and national level, JCU’s College of Medicine and Dentistry has undertaken a major stakeholder mapping project to identify and connect with all relevant people and organisations across communities in north western Queensland. This includes community organisations, health services, state and local government, elected representatives, and medical professionals. The project is establishing a foundation of infrastructure and processes to support JCU to influence health workforce policy at a national level. It also aims to provide leadership in the delivery of high quality, cost effective GP training. This will be achieved through assisting GMT’s evaluation committee in reporting on our strategic objectives and identifying ‘at risk’ relationships, or gaps in the current engagement activities within GMT. The evaluation committee reports are also used to inform communication strategies to strengthen relationships and help fill gaps within the current engagement activity.

Key to the GMT engagement strategy is the promotion of Aboriginal and Torres Strait Islander training posts. To this end, JCU is developing a suite of visually engaging content which aligns with the program’s goal to promote regions with priority community and practice needs. The videos provide snapshots of the training posts and raises awareness of the rewarding training opportunities available to registrars. They also offer information about training pathways for students and junior doctors in the regions. The goal of the project is to match registrars to needed specific skills and specific regions, and to promote pathways for students and junior doctors within the region and beyond. The project also aims to build community collaboration and strengthen health care in priority locations.

JCU aims to support GMT supervisors and training posts to increase their capacity to provide quality training that meets community need. The program also aims to increase the recruitment and retention of Fellows in regions of health workforce shortage. The 2017 supervisor workshop series included one day workshops held at locations throughout the region, several new supervisor workshops and a supervisor masterclass. Local meetings for practice managers are also being held throughout the region. JCU has further established a travelling practical skills workshop for GMT registrars, which has already visited about half of the training regions.

Given the vast geographic area covered by GMT, internal stakeholder engagement across the nodes remains a key priority. To this end, JCU is developing a detailed GMT staff survey to ensure the organisation is engaging effectively with, and supporting its stakeholders across regional, rural and remote Queensland.

The goal is to match registrars to specific skills and specific regions, and to promote pathways for students and junior doctors within the region and beyond.
As Mackay and the Whitsundays recover from Cyclone Debbie, Dr Skye Nissen has reflected on the vital role she played in the wake of the destruction.

Dr Nissen is a Generalist Medical Training (GMT) GP registrar based at the Proserpine Hospital. GMT is a program within James Cook University’s College of Medicine and Dentistry.

“I’m from Cairns so I’m used to cyclones, but cyclone Debbie was just something else. It went for so long, it was so destructive,” she said.

On the day following the cyclone, Dr Nissen was unable to access the Proserpine Hospital due to floodwaters, so she worked in a makeshift emergency department set up at a local GP Practice.

“We had compound fractures, appendicitis – all these people couldn’t get to the hospital.”

When the floodwaters receded, Dr Nissen drove to the hospital to relieve the doctors who had been working non-stop for several days.

“The scene I walked into at the hospital after the cyclone was intense. The hospital was half in the dark, there were people everywhere.

“That was the first large-scale event that I’ve experienced. It was one of the highest volume of patients I’ve had to manage, and my training meant that I was ready to deal with it all.”

GMT Medical Educator Dr Ciara Ross said the GMT program, along with practical experience, gives registrars the skills they need to respond in a disaster.

“A lot of the training the GMT registrars are given is centered around rural, remote medicine and a large component of that is dealing with emergency situations.

“One of the good things about their training posts is that they are assigned to very experienced supervisors who have been working in these rural, remote areas for a very long time.”

Dr Nissen’s career goal is to become a hospital-based generalist in a rural hospital. She said it was her rural placements during medical school that inspired her to ‘go rural’.

“The best thing I ever did was decide to go rural. I think I am going to have a much better lifestyle. I am well supported. I was able to gain a lot more experience in clinical skills earlier on. Rural based senior doctors are so supportive and such good mentors.”

Dr Nissen says she also enjoys being part of a community.

“It’s great having that engagement with the community, and seeing your patients out and about.”

“THAT was the first large-scale event that I’ve experienced. It was one of the highest volume of patients I’ve had to manage, and my training meant that I was ready to deal with it all.”

GMT Registrar Dr Skye Nissen
3. Innovate in delivery of high quality, technologically-enabled education

- Develop and implement technological solutions that address local needs and context
- Deliver high quality, cost effective GP training
- Build effective peer support

The registrar learning experience remains at the heart of the Generalist Medical Training (GMT) program. The program applies Royal Australian College of General Practitioners (RACGP) and Australian College of Rural and Remote Medicine (ACRRM) curricula to the distinctive features of primary care across our very diverse region. Formative assessment provided by GMT is specifically tailored to each of the College curricula. Assessment overviews and exam resources are provided to registrars through our data management system, MyGMT. Since its inception, GMT registrars have consistently performed above the national pass rate in College summative assessments. These results underscore the high quality of the training posts in the region and the support provided by GMT.

Registrars in need of extra assistance are identified to local medical educators for follow up with additional resources and activities. GMT provides an individual assessment support program for registrars who have failed repeated exams.

To deliver high quality training, James Cook University (JCU) recruits professionally skilled and values-aligned supervisors and medical educators to the program. GMT has 26 medical educators based across the 11 regions, more than 20 of whom also provide registrar supervision. The number of active supervisors over the last year has remained stable at just over 300.

Given the geographical distribution of the GMT region and the number of registrars in remote communities, the program has by necessity embraced new technologies for training delivery. GMT currently offers online training in a range of areas such as Fitness to Drive, WorkCover and Issuing Death Certificates. An online “case of the week” series provides regular self-directed learning opportunities for all registrars, as well as a monthly webinar which covers topics such as medico-legal aspects of General Practice, lifestyle medicine, and business aspects of General Practice. There are also a number of Aboriginal and Torres Strait Islander specific health case-based online modules in development.

For GMT registrars training in remote locations, online teaching is provided weekly via virtual classrooms using the Blackboard Collaborate platform. These sessions utilise the skills of a number of medical educators and are delivered to approximately 30 registrars each week. JCU employs a dedicated GMT staff member to coordinate and oversee the delivery of these sessions to assure that there are no technological barriers to program delivery. JCU is also working to build effective peer support networks and learning groups for GMT registrars through technology. The program engages with registrars, prospective registrars and stakeholders through a range of online and social media platforms. The popularity of GMT’s Facebook page continues to grow, providing a point of connection for registrars, stakeholders and prospective registrars.
James Cook University (JCU) continues to build a compelling national profile for Generalist Medical Training (GMT), which attracts value-aligned registrars. The Communications and Engagement team within JCU’s College of Medicine and Dentistry actively promote the University’s focus on developing a vertically integrated approach to training undergraduates and specialists to address the shortage of doctors in rural, regional and remote Queensland.

JCU consistently aligns its communications with GMT’s key priorities, ensuring prospective registrars are aware of its distinctive approach to Australian General Practice Training delivery. This includes highlighting the explicit focus on meeting the priority health care needs of underserved communities in rural, remote and regional Queensland, and on GMT’s capacity to offer diverse and professionally rewarding training posts. JCU clearly communicates its commitment to developing a health workforce that works effectively with Aboriginal and Torres Strait Islander people to improve health outcomes, and its role in equipping GPs with the skills, inspiration and experience for an adventurous career with impact in regional, rural and remote Queensland, across Australia and beyond.

The integrated communications strategy for the GMT program comprises communicating and engaging with a wide range of stakeholders, from prospective registrars, students and junior doctors, to health services and policy makers. This has resulted in a number of local radio, newspaper and television news features on GMT and its role in equipping GPs with the skills, inspiration and experience for an adventurous career with impact in regional, rural and remote Queensland, across Australia and beyond.

JCU has produced an extensive suite of resources which highlight the impact GMT registrars are having in Queensland communities. This includes profiles and stories on registrars and health services. These are regularly disseminated through social and traditional media channels, and presented at a range of forums and high-level advocacy meetings.

It has also overseen the production of a series of popular videos which are hosted on the GMT website, YouTube and Facebook, as well as a series of infographics which are used by the senior leadership team when presenting at a range of forums, including high-level advocacy and Strategic Leadership Council meetings.

Strong internal communication is also key to the success of GMT. A range of communication materials are regularly distributed throughout the program, including monthly updates from each node, which are sent to registrars, supervisors and practices. These updates provide information on upcoming workshops, policy updates, and answers to FAQs.

JCU works collaboratively with the Commonwealth and Queensland governments on the provision of GP training. JCU representatives regularly participate in stakeholder meetings and engage in collaborative partnerships, especially with the Queensland Rural Generalist Program. GMT’s senior leadership group also participate in a range of advocacy meetings with government and policy makers. Members of the Strategic Leadership Council regularly advocate on behalf of the program in their varying capacities, ensuring widespread awareness of the program and its unique and strategic focus.

To ensure the effectiveness of GMT, JCU has implemented a strategically developed monitoring and evaluation framework to assess its effectiveness in delivering on its key objectives. The evaluation team reports regularly against the program’s strategic priorities, examining its alignment with community need, level of engagement through the distribution model, the delivery of high-quality and technologically enabled education and its effectiveness in communicating progress. The program regularly assesses registrar, supervisor and staff outcomes and satisfaction, and uses this feedback to inform the program’s direction.
Registrar support

James Cook University (JCU) provides a network of support for Generalist Medical Training (GMT) registrars throughout their training, including passionate and dedicated medical educators and registrar liaison officers (RLOs). Medical educators are located across the GMT training regions and work closely with registrars to facilitate educationally valuable training posts and successful completion of fellowship exams.

Medical Educators
JCU offers distributed and innovative General Practice training for registrars through GMT to ensure training requirements are met at a local community level. The education program has been developed to meet the requirements of the curricula of both the Royal Australian College of General Practitioners (RACGP) and Australian College of Rural and Remote Medicine (ACRRM). Local medical educators deliver General Practice education in each node with teaching sessions aligned to meet registrars’ learning needs and address unique community needs. Education is delivered through a combination of face to face local small group teaching sessions, virtual classrooms, eLearning modules and webinars, and face to face workshops. Over the 2016/17 reporting year, 15 registrar workshops have been held across the region from Cairns to the Sunshine Coast, including our western corridor sites in Longreach and Mount Isa. Covering diverse topics from palliative care to oral health, these workshops help prepare registrars for independent clinical practice and to successfully sit their Fellowship exams.

Teaching innovation and online resource development in 2017 has enhanced the learning experience and teaching for registrars and supervisors.

Remote registrars are offered education via Blackboard Collaborate on a weekly basis to support the mentoring and teaching provided locally by their very experienced CP supervisors. Remote workshops dedicated to developing the skills and knowledge required for working more remotely have been a highlight of the year.

The opportunity to network and build supportive relationships has also been appreciated by this widely dispersed group of highly resilient and enthusiastic registrars.

Registrar Liaison Officers
GMT’s team of RLOs provide peer support and ongoing assistance to registrars across all aspects of the program. RLOs advocate on behalf of GMT registrars during their training, act as confidential contacts to discuss any aspect of training, and liaise with appropriate people on behalf of registrars to resolve issues relating to training, work conditions and placements. They can, upon request, also act as a support person in meetings.

There are six RLOs in the GMT program from both the RACGP and ACRRM. RLOs are represented on the GMT Strategic Leadership Council and play an important role in keeping JCU abreast of local and national registrar issues. They also represent GMT and their peers on a number of local and national committees, including General Practice Registrars Australia.
“One of the great joys of my work with GMT is working with other people who are passionate about General Practice and providing quality education to training registrars.”

GMT Medical Educator Dr Cindi Jackson

Dr Cindi Jackson’s journey to becoming a GP has included many experiences and opportunities for growth, which Dr Jackson said helped her become a better doctor.

Dr Jackson is a GP and a Medical Educator with James Cook University’s (JCU) Generalist Medical Training (GMT) program, who owns her own practice in the small town of Childers, 50 kilometres outside the regional town of Bundaberg.

Prior to training to become a GP, Dr Jackson studied biomedical science and worked as a scientist in histopathology (the study of diseased tissue), before studying medicine and anatomical pathology and working in a variety of rural and regional hospitals across Victoria, New South Wales and Queensland.

Dr Jackson said everything she learned while working in the hospital system has been useful in general practice.

“The time spent going through a variety of specialty areas provides a lot of insight into different conditions that translates well into General Practice.”

It was the independence and diversity of practice that most attracted Dr Jackson to begin her career in General Practice.

“I was keen to keep my emergency skills in use but have a more complete patient care experience than was possible within the confines of the hospital system.”

Dr Jackson moved to Childers to complete GP training, and then went onto open Childers Family Medicine, with her husband (also a GP), in 2011.

Dr Jackson encourages doctors considering a career in General Practice to learn about the business aspects and says owning a practice provides professional freedom and opportunity for work-life balance.

“When my husband and I decided to open our own practice, we had a very clear vision of wanting to be a truly team-based General Practice and a genuinely enjoyable place to work. We have developed and recruited a fantastically skilled group of practice nurses (including midwives, a lactation consultant, and staff with interest in early childhood, chronic disease, wound care, continence) without whom we could not deliver the patient care that we do.”

“We provide a very individualised and caring service to our patients. Being a rural practice we know our patients well and it is not uncommon for us to have to do things like driving cars or mobility scooters back to people houses if they need to go to hospital, or park them in our driveway until they come home!”

Dr Jackson said she’s glad she chose to practice in a rural area and notes that she finds rural practice particularly enjoyable.

“Being known in your local community and forming meaningful relationships within that community - sometimes means that the professional lines are blurry, but for me it makes what I do very rewarding.”

Dr Jackson’s professional interest areas are aged care, community-based palliative care, procedural skin work, and education, which she pursues via her role as a Medical Educator.

A typical week includes visiting patients at the local nursing home and independent living units, in-practice training for her staff, GP consulting at her practice, work on the business-side of her practice, and medical educator work, which includes external clinical training visits with GMT registrars. She is also studying a Masters in Medical Education via James Cook University.

“In my role as a Medical Educator with GMT, I have many meetings with registrars throughout the year to discuss their training requirements and progression through the training program, accreditation assessments of training practices, and ongoing meetings with practices and supervisors to discuss training requirements. One of the great joys of my work with GMT is working with other people who are passionate about General Practice and providing quality education to training registrars.”

Profile

Medical Educator Dr Cindi Jackson
Supervisor support

James Cook University (JCU) provides support for Generalist Medical Training (GMT) supervisors through the Senior Fellows Group. GMT Senior Fellows are experienced and respected senior GP colleagues who are available to facilitate dialogue between supervisors and GMT management, medical educators and administrative staff.

The Senior Fellows Group provide support for GP supervisors and local training nodes and represents GMT at national bodies such as the General Practice Supervisors Association (GPSA).

Senior Fellows provide feedback to GMT from the supervisor’s perspective and provide information and assistance to supervisors in many areas including Australian General Practice Training, educational, practice and registrar activity across the North West Queensland region. They are also represented on GMT’s Strategic Leadership Council and contribute to policy development and implementation.

The Senior Fellows Group is an innovative concept drawing on senior colleagues from the GMT area who have passionate engagement with their regional communities, experience in medical education and training programs and significant ongoing commitments to rural and regional medicine, workforce and education. The Senior Fellows have substantial experience in these areas at local, state, national and international levels.

The Group holds a monthly teleconference and meets at the Strategic Council, medical educator meetings and other GMT activities, as well as at other organisations to which it has membership.

The Senior Fellows Group has been well received at the National GPSA Supervisor Liaison Network meetings, and reports that the GMT training program is tracking well with support for supervisors and registrars. The Group has found that GMT’s involvement in training across RACGP, ACCRM and the Rural Generalist program is acknowledged as comprehensive.

The Senior Fellows Group is an innovative concept drawing on senior colleagues from the GMT area who have passionate engagement with their regional communities, experience in medical education and training and significant ongoing commitments to rural and regional medicine, workforce and education.
Profile

GP Supervisor Dr Marjad Page

Growing up in a remote Mount Isa Aboriginal community, GMT Supervisor Dr Marjad Page never thought he could become the man he is today, but he knew he wanted to help his people.

Dr Page, who works at Gidgee Healing (the local Aboriginal Community Controlled Health Service) and Mount Isa Base Hospital, is a proud Christian, Kalkadoon, Waanyi and Ganggalida man.

At a young age he didn’t understand why Aboriginal people including friends and family would go into hospital and not come out.

“Quickly a pattern came to me that unfortunately more Aboriginal and Torres Strait Islander people didn’t come out than non-Indigenous (people) at the time,” he said.

“I remember I couldn’t walk out with my loved ones and I wanted to do something so they could walk out with me.

“I can’t even count how many funerals I’ve been to. I’ve been a pall-bearer six times. I’ve done eulogies about five times. I remember once there was a three-year period when I was going to a funeral every month.”

Dr Page said he always had a passion to try and do something in the medical field.

“I suppose becoming a doctor was in my mind, but never an option because it was an impossible task.

“We never knew any doctors, none of my family ever went to university, and a lot of them didn’t finish school.

“We thought only aliens became doctors. But I guess I wanted to help in some way, shape or form to try and get my people out of hospital.”

Dr Page completed grade 12 at Nudgee College in Brisbane after he showed promise as a basketball player.

“I got a scholarship to go to university in Canberra. I used to play basketball and I was semi ok so that opened a lot of doors for schooling.”

However, an injury ended Dr Page’s budding sporting career and brought him back to his passion.

“I tried to my elders and my family because I thought I was going to help my people through basketball, but then that was over before it started.”

They told me to use my brain, so I tried and now I’m here.”

Dr Page studied a degree in Human Movement Science in Rockhampton before applying for Medicine at James Cook University.

“From the beginning I wanted to be a GP. I wanted to do it to come home and be the first front on the ground. I wanted to be connected to the community.”

Since working with Gidgee Healing in Mount Isa, Dr Page has seen an increase in Aboriginal and Torres Strait Islander patients coming in for check-ups.

“Our mums and bubs program started with five patients. Since I’ve been there we have a good team together and have the blessing from the community. We have gone from five patients two years ago, to 45 patients now. It’s been a massive jump.

“The elders and key stakeholders, even young kids feel like they have more of a voice around me,” he said.

As a GMT supervisor Dr Page is able to coach registrars from a medical and cultural perspective.

“The first conversation I have is about the Aboriginal people here. I teach them a lot of things regarding not only taboos, but the kinship system and that Aboriginality is not only a culture, but is actually first and foremost a religion.

“Once you look at it as a religion you start paying more attention and are more focused.

“For example an Aboriginal person who goes walkabout, that’s not because they don’t care, it’s a religious ceremony or pilgrimage they have to go on to keep their Gods happy.”

Dr Page was awarded the inaugural Denis Lennox medal at the Rural Doctors Association of Queensland (RDAQ) Conference for outstanding achievement as a registrar.

He said he owes his achievement to his community.
A key priority for James Cook University (JCU) in its Generalist Medical Training (GMT) program is to improve the provision of culturally appropriate clinical practice for Aboriginal and Torres Strait Islander people. This is achieved through embedding Aboriginal and Torres Strait Islander health in the curriculum for all registrars, and focussing on recruitment and retention of GPs keen to practice in comprehensive primary health care settings. It further involves increasing the capacity of training posts in Aboriginal and Torres Strait Islander communities to train registrars, and engaging and partnering with stakeholders to support training and workforce outcomes. JCU also aims to increase the number of Aboriginal and Torres Strait Islander registrars completing their Fellowship in General Practice. GMT supports registrars with local cultural awareness training and is developing advanced clinical case studies in Aboriginal and Torres Strait Islander health to augment current resources. The program also includes support from cultural mentors and an overarching framework for the delivery of training in Aboriginal and Torres Strait Islander health across the GMT program.

JCU offers Aboriginal and Torres Strait Islander health training posts within a range of accredited Aboriginal Community Controlled Health Services (ACCHS), non-community controlled Aboriginal Health Services and Queensland Government Health Services. These include regional, rural and remote fly-in-fly-out settings such as those in the Torres Strait Islands. The program aims to ensure that registrars are able to deliver high quality care to improve the health of Aboriginal and Torres Strait Islander people across these communities. Of the registrars placed in 2016-17, eight per cent worked their main placement in an Aboriginal and Torres Strait Islander health training post. Overall, there has been 18 per cent growth in the number of registrars placed in an Aboriginal and Torres Strait Islander post since 2016.

The overarching aim of JCU’s Aboriginal and Torres Strait Islander Health Training Program is to improve the provision of culturally appropriate clinical care for Aboriginal and Torres Strait Islander people.
Cultural awareness workshops provide registrars with knowledge of the clinical and cultural complexities of Aboriginal and Torres Strait Islander communities to ensure the delivery of improved health practices for Aboriginal and Torres Strait Islander people.

Aboriginal and Torres Strait Islander Health Training

Training Program Priorities

Engage all GMT registrars in a program of excellence in Aboriginal and Torres Strait Islander health

The North West Queensland General Practice training region has a population of about 1.5 million people, including an Aboriginal and Torres Strait Islander population of more than 100,000 people. With more than 500 registrars and only 20 Aboriginal and Torres Strait Islander health training posts, Generalist Medical Training (GMT) aims to provide cultural competency training and support to all registrars that is relevant to their clinical training and to local community needs. Key to this is a commitment to developing a Cultural Education Framework for registrars, which includes immersion in Aboriginal and Torres Strait Islander health settings, the provision of locally focused cultural training and support, and the integration of Aboriginal and Torres Strait Islander health across the curriculum and training years. It also includes minimum standards for local node workshops and establishment of formal Communities of Practice to engage and support cultural educators and mentors, supervisors, medical educators and program staff.

James Cook University (JCU) aims to increase cultural and technical training across the GMT curriculum specific to local Aboriginal and Torres Strait Islander communities. Registrars are required to complete a cultural awareness workshop to develop the skills and cultural understanding to deliver high-quality care in Aboriginal and Torres Strait Islander communities, and for the clinical treatment of Aboriginal and Torres Strait Islander people in any health setting. The workshops provide registrars with knowledge of the clinical and cultural complexities of Aboriginal and Torres Strait Islander communities to ensure the delivery of improved health practices for Aboriginal and Torres Strait Islander people. They aim to ensure GMT registrars possess a contextualised understanding of the importance of the historical impacts on Aboriginal and Torres Strait Islander communities, especially in the health sector.

Registrar develop an understanding of the importance of self-determination to Aboriginal and Torres Strait Islander communities and develop an awareness of the elements of effective and equitable service to these communities. They are provided with strategies for general practice settings to improve the identification of Aboriginal and Torres Strait Islander people in patient record systems and, address common assumptions and negative stereotypes about Aboriginal and Torres Strait Islander people. The cultural awareness workshops teach protocols and strategies in General Practice to more effectively engage local communities. They identify Aboriginal and Torres Strait Islander community organisations that are key to local history, self-determination efforts, and strengthening services to communities.

JCU has undertaken regular evaluation of the workshops and feedback has been positive. Of those who attended in 2016 and 2017, all agreed that the workshop improved their knowledge of Aboriginal and Torres Strait Islander cultures, and 85 percent of registrars believe the knowledge they gained would improve their clinical practice with Aboriginal and Torres Strait Islander people. Workshops are delivered through the nodes and are tailored to deliver content specific to the local Aboriginal and Torres Strait Islander communities in the locations in which the registrars are working. JCU has a GMT Cultural Educator to work with the nodes to coordinate and facilitate cultural awareness workshops. The Cultural Educator is available to all GMT registrars to discuss issues of culture.

In addition to the Cultural Educator, JCU engages local Cultural Mentors through the Aboriginal and Torres Strait Islander health posts to assist in developing and delivering localised education specific to the history and context of the people who live in those communities. Cultural Mentors broaden the educational experience for registrars and assist with introductions of new registrars to community. They also assist registrars to understand the different ways to communicate with various different cultural groups in their region. To help registrars further develop a deeper understanding of Aboriginal and Torres Strait Islander health, GMT is developing advanced clinical case studies in Aboriginal and Torres Strait Islander health aimed at improving the quality and continuity of care for community members. The clinical case studies will form part of the Aboriginal and Torres Strait Islander Health Education Framework and will be delivered online as advanced study modules.
Develop a robust system of recruitment and retention of Aboriginal and Torres Strait Islander registrars

James Cook University (JCU), through the Generalist Medical Training (GMT) program, is committed to expanding the Aboriginal and Torres Strait Islander GP workforce across north and west Queensland, and developing a pipeline of ‘home-grown’ doctors for rural and remote communities.

JCU is proactively working to increase the number of Aboriginal and Torres Strait Islander people entering the field of medicine, engaging with Aboriginal and Torres Strait Islander students in their final years of high school, through their undergraduate medical training and into GP specialisation.

The program assists workforce engagement with funding available for the Cultural Mentor and registrar to undertake a collaborative project to conduct in-house health career activities for high school students, to help foster interest in medicine and other health careers.

JCU provides a range of practical support measures to ensure the retention of Aboriginal and Torres Strait Islander registrars through their training years through to Fellowship. The GMT program includes a workshop for Aboriginal and Torres Strait Islander registrars, and supports interested registrars to attend the Indigenous GP Registrars Network (IGPRN) workshops and Australian Indigenous Doctors Association (AIDA) conferences each year.

Develop and strengthen capacity of Aboriginal and Torres Strait Islander health training posts

Cultural Mentors are central to developing and strengthening the capacity of JCU’s Aboriginal and Torres Strait Islander health training posts. The Cultural Mentors deliver region-specific cultural inductions and individual mentoring and support for GMT registrars. They act as a sounding board for registrars, address questions and uncertainties, and act as a point of contact for local community introductions, yarning and storytelling.

The Cultural Mentors provide the cultural component of the registrars’ orientation and are engaged in the cultural awareness training developed specifically for each training region. GMT Cultural Mentors may organise and run annual field trips for registrars, and participate in community days and outreach services such as Aboriginal and Torres Strait Islander school health checks. They also assist registrars by advising on cultural protocols when treating Aboriginal and Torres Strait Islander clients in clinic or hospital settings. Cultural Mentors offer one-on-one assistance in clinics for impromptu problem solving or assistance with Aboriginal and Torres Strait Islander patient care. In support of and in collaboration with Cultural Mentors, GMT is also developing a Cultural Mentor tool kit with resources to support their role in training registrars.

As per the Australian General Practice Training guidelines and program requirements, GMT provides reimbursement to Aboriginal and Torres Strait Islander Training Posts for the salary of registrars employed in these services along with a reimbursement for the role of the Cultural Mentors and the community workforce engagement activity.

Partnerships and engagement to support Aboriginal and Torres Strait Islander health training and workforce

Broad inclusive partnerships and engagement with stakeholders at all levels of Aboriginal and Torres Strait Islander health training enable GMT to offer registrars regionally appropriate, comprehensive and well supported training opportunities.

JCU engages with the Queensland Aboriginal and Islander Health Council (QAIHC) to provide state-wide leadership, engagement and support in the delivery of the GMT program. It delivers the program through an engaged and supported training network, with an increased awareness of opportunities available to registrars wishing to train in Aboriginal and Torres Strait Islander health settings. JCU runs an annual Aboriginal and Torres Strait Islander Forum with participants from Aboriginal and Torres Strait Islander health training posts, regional and state affiliates and select GMT staff. To date, two Forums have been held and feedback from both events has been overwhelmingly positive.

GMT holds Community of Practice meetings for Cultural Mentors and Cultural Educators, and has engaged with the national Cultural Educator and Cultural Mentor Network for the GP Training Organisations through the Regional Training Organisation Network. In addition, GMT is developing an online portal to support its Communities of Practice, and has commissioned registrar training post videos highlighting the benefits of training in Aboriginal and Torres Strait Islander health settings. The videos are hosted on the GMT website, and are used at conferences, seminars, advocacy meetings and across social media.
Cultural Awareness Immersion

As part of their cultural awareness training, GMT registrars are offered the opportunity to participate in a cultural immersion trip to a local Aboriginal and Torres Strait Islander community in their region. This important part of the training program immerses registrars in local Aboriginal and Torres Strait Islander culture and history, and improves both their cultural and technical skills with Aboriginal and Torres Strait Islander peoples.

During the past year, registrars have attended cultural immersion trips across Queensland, including visits to Palm Island off the coast of Townsville in North Queensland, Cherbourg in south east Queensland and Woorabinda in central Queensland. Registrar feedback from these trips has been overwhelmingly positive.

Registrar Feedback

“Personal reflections from Aboriginal and Torres Strait Islander people and health care workers - puts context to why we all need to do our bit to ‘close the gap’”

“Effective understanding about Aboriginal heritage; their struggle and factors affecting their health”

“Excellent videos and personal stories. Really put into context what the Aboriginal people went through and are still recovering from.”

Cultural Mentor Brett Ambrum

The Innisfail Aboriginal and Torres Strait Islander community are looking forward to a healthy future thanks to the hard work of Mamu Health Service Limited and James Cook University’s Generalist Medical Training (GMT). Community Outreach Worker and Cultural Mentor Brett Ambrum says they’ve noticed an increase in Aboriginal and Torres Strait Islander Health Checks over the last year.

“The number of people coming in for health checks is up there to equal more than half of the Aboriginal and Torres Strait Islander population in our service area. We’re looking at more than 1300 health checks.”

Mr Ambrum says health checks aren’t just for people who are sick, they are about general health and early detection.

“One of the stories that came out last month was that a child’s health check actually revealed that the child had a blood anomaly. They were able to detect it early and act on it.”

Mr Ambrum says as a mentor he introduces new GMT registrars to the community. This has contributed to the spike in health checks.

“They’re familiar with the doctor outside the clinic, instead of just when they come to the office,” he says.

Professor Jacinta Elston, Associate Dean Engagement and Strategy with GMT says the Cultural Mentors are an integral part of the GMT program.

“They directly support registrars in developing a relationship with the local community and help them understand local cultural issues and practices,” she says.

“GMT is committed to developing a general practice workforce that is able to work effectively with Aboriginal and Torres Strait Islander people towards improving their health outcomes.”

Mamu Health Services provide Health Checks through their ‘Deadly Choices’ program. The national program promotes healthy lifestyle choices and prevents chronic diseases amongst Aboriginal and Torres Strait Islander people.

Profile
Nhulundu Wooribah Indigenous Health Organisation (Nhulundu Health Service) is an Aboriginal Community Controlled Health Service based in Gladstone in central Queensland.

From its early days as a pilot program providing in-home care to elderly Aboriginal and Torres Strait Islander people, Nhulundu has grown into a fully-fledged community health service employing more than 30 staff. Nhulundu is run by a Board of Directors who are all part of the Aboriginal and Torres Strait Islander community in Gladstone.

CEO Matthew Cooke said the service provides comprehensive primary health care for Aboriginal and Torres Strait Islander people in a culturally safe environment.

“There are health needs of Aboriginal and Torres Strait Islander people that are uniquely different from those of non-Indigenous Australians, so it was hard for mainstream services to understand the needs of our community.”

“It’s more than just primary health care, more than just general practice. We have other human and social services such as aged care and family wellbeing.”

Michelle Cook is a Deadly Choices Tobacco Officer at Nhulundu. She also attended the service as a patient while pregnant with her first child.

“I never once felt uncomfortable. I was always greeted with a happy smile, was always comfortable from the get go. I got great care from Nhulundu and now my son is able to get that great care as well and I’m very thankful for that,” she said.

Michelle Cook believes the service is having a positive impact on the Aboriginal and Torres Strait Islander community in Gladstone.

“I think their health is getting a lot better than what it was all those years ago when they didn’t have a medical centre like Nhulundu, with all the care from the doctors and nurses and everyone.”

Dr Dorcas Ajose has been working as a GP at Nhulundu since early 2017 and agreed the service is having a significant impact on community health outcomes.

“Our goal is to get them back through those doors, coming back for their appointments. If we can build trust and make them feel welcome and safe then they will always come back.”

“At the end of the day we are working towards making our clients take more ownership of their health. We’re a group of people who are helping them toward this outcome and working together to get that. It is easy for them to fit into that group and join us working as one.”

Dr Ajose has found working at Nhulundu to be an overwhelmingly positive experience.

“It’s like a family. When I leave at the end of the day, when I walk out the door I am exhausted but I have this feeling of accomplishment, I feel like I have done something, it’s richly satisfying”.

Dr Ajose believes her experience at Nhulundu has made her a better General Practitioner and would recommend working in an Aboriginal Community Controlled Health Service to any registrar.

“IT’s that satisfaction of knowing that you are making a difference to the community, it’s that difference that you can see. At the end of the day when you step out the doors it’s just so rewarding.”

James Cook University offers a GP training post in Aboriginal and Torres Strait Islander health care at Nhulundu.

Matthew Cooke said the service would certainly welcome more registrars training with the service.

“Training doctors work with a range of clinicians, from other senior General Practitioners through to registered nurses and Aboriginal Health Workers, who are a centrepiece of the model of care health care we use.”
James Cook University aims to provide better health for the regional Queensland communities we serve through excellent GP training.