

## **SUPERVISION AND SAFETY IN EARLY GP TRAINING**

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### **Background**

This presentation will report on research supported by the Royal Australian College of General Practitioners with funding from the Australian Government under the Australian General Practice Training program.

A trainee (registrar) commencing general practice in Australia can see and manage patients without being required to have contact with, or discussion with, their supervisor. This differs from other specialty training in Australia and from primary care medical training in comparable countries. Is training without routine direct supervision of all encounters safe? How could it be made safer?

### **Methods**

A qualitative research approach initially explored the views of lead medical educators from each of the nine regional training organisations (RTOs) through semi-structured interviews and thematic analysis. The second phase of the study employed focus groups to iteratively explore the views of registrars and supervisors on the safety of training, alternative models of supervision, and to develop a safety checklist for early GP training.

### **Results**

The completed interviews found there is no monitoring by RTOs of whether the RACGP standard that registrars should only manage patients they are competent to manage is achieved. There is no mandatory period of direct observation of registrars. Most, but not all, RTOs provide training practices with checklists that indicate to the registrar when supervision is required. However, the checklists used have variable content and the RTOs do not monitor their use by the registrar and supervisor.

The oversight of training practices by RTOs mirrors that of trainees by supervisors. The onus falls on those being supervised to identify the need for assistance. Despite this, lead RTO medical educators consider the commencement of general practice training to be safe.

We will report on the views of the focus groups on the safety of general practice training, alternative models of supervision, and content and delivery of a safety checklist. Finally, we will present the research project recommendations to improve the safety of GP registrars care of patients.

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