**Title**

**Author and affiliations**

**Background**

Previous RACGP member feedback has suggested a lack of networking and engagement opportunities for GPs at a local level. As part of its advocacy role, RACGP Expert Committee – General Practice Advocacy and Funding (REC-GPAF) proposed the trial Local GP Advocacy Network (LGPAN) model as an opportunity for the RACGP to establishing networks of GPs who are not typically engaged in RACGP activities.

**Aims**

The pilot aimed to determine:

* if locally facilitated meetings provide GPs with the opportunity to network, foster collegiality and increase involvement in RACGP advocacy and policy development; and
* whether existing local GP groups would benefit from RACGP involvement, including administration and costs support for meetings.

**Method**

The RACGP surveyed GPs in Newcastle and eastern Sydney and collaborated with local GP groups to inform pilot networks in those cities. RACGP President, Dr Bastian Seidel, attended the first Newcastle meeting. Topics discussed included Health Care Homes, practice system resources, National Disability Insurance Scheme, and Local Health District activities. GPs were able to raise issues for discussion and provide feedback directly to the RACGP. The RACGP conducted an evaluation survey after each meeting.

**Results**

Attendees appreciated the forum to voice issues and concerns with other local GPs and pose questions directly to the RACGP. Over 80% of attendees said the meetings provided a good opportunity to meet with other GPs and build/maintain a sense of collegiality with peers. Attendees said they were more aware and engaged in RACGP activities following the meeting and they would like to continue to attend these activities.

**Conclusion**

Local advocacy networks can provide GPs with opportunities to discuss matters with other GPs, reducing isolation and increasing engagement with the RACGP and profession. The Local GP Advocacy Network model is flexible and can be adapted to suit local priorities.

**References**