**Title**

Adequacy of GP registrars’ clinical exposures during training: establishing inter-practice variability in registrar consultations with older patients

**Author and affiliations**

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**Background**

GP vocational training practices should offer a range of services to a wide range of patients, and GP registrars should receive adequate exposure to all patient groups likely to be encountered in unsupervised practice post-training.

Considerable Australian evidence suggests that registrars see appreciably fewer older patients than their established GP peers and that the educational value of consultations with older patients may often be suboptimal. Anecdotally, there is also considerable inter-practice variability in registrars’ exposure to older patient care. This variability would exacerbate, for those registrars training in these practices, any underlying deficits in older patient care experience.

While there are concerns regarding the adequacy of registrar exposure to some aspects of paediatric care, overall paediatric exposure and variability in paediatric exposure is not thought to be as problematic.

**Aims**

We aimed to establish inter-practice variability in the proportion of registrars’ consultations that are with older patients. We contextualized variability in older patient exposure by also establishing variability in the proportion of paediatric consultations.

**Method**

An analysis from the ReCEnT cohort study of registrars’ in-consultation practice including 1,240 registrars and 288 practices in five states.

Outcome factors were consultations with patients aged 65+, and consultations with patients 18 years or younger. Intra-class correlations (ICCs) were calculated using mixed-effects logistic regression models, including random effects for registrar and practice, with further models constructed adding four groups of covariates (registrar, patient, consultation and practice factors) sequentially.

**Results**

For older patients, the ICC was 0.114 in the model with random effects for registrar and practice, and 0.082 in the model including all covariates.

For paediatric patients, the corresponding ICCs were 0.043 and 0.025

**Conclusion**

There is marked variability in GP registrars’ exposure to older patient care across training practices. This has potential to exacerbate an already problematic aspect of GP training.