

Where and why is New Zealand short of GPs?



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This presentation will cover

1. The history behind the current dynamic workforce situation
2. Retirement intentions of GPs
3. Graduate numbers
4. Where are the shortages worst?
5. The Voluntary Bonding Scheme

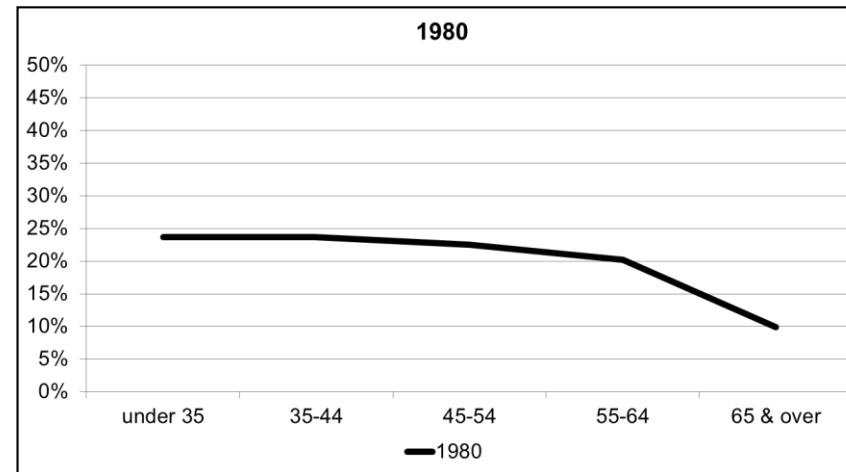


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The history behind the current dynamic workforce situation

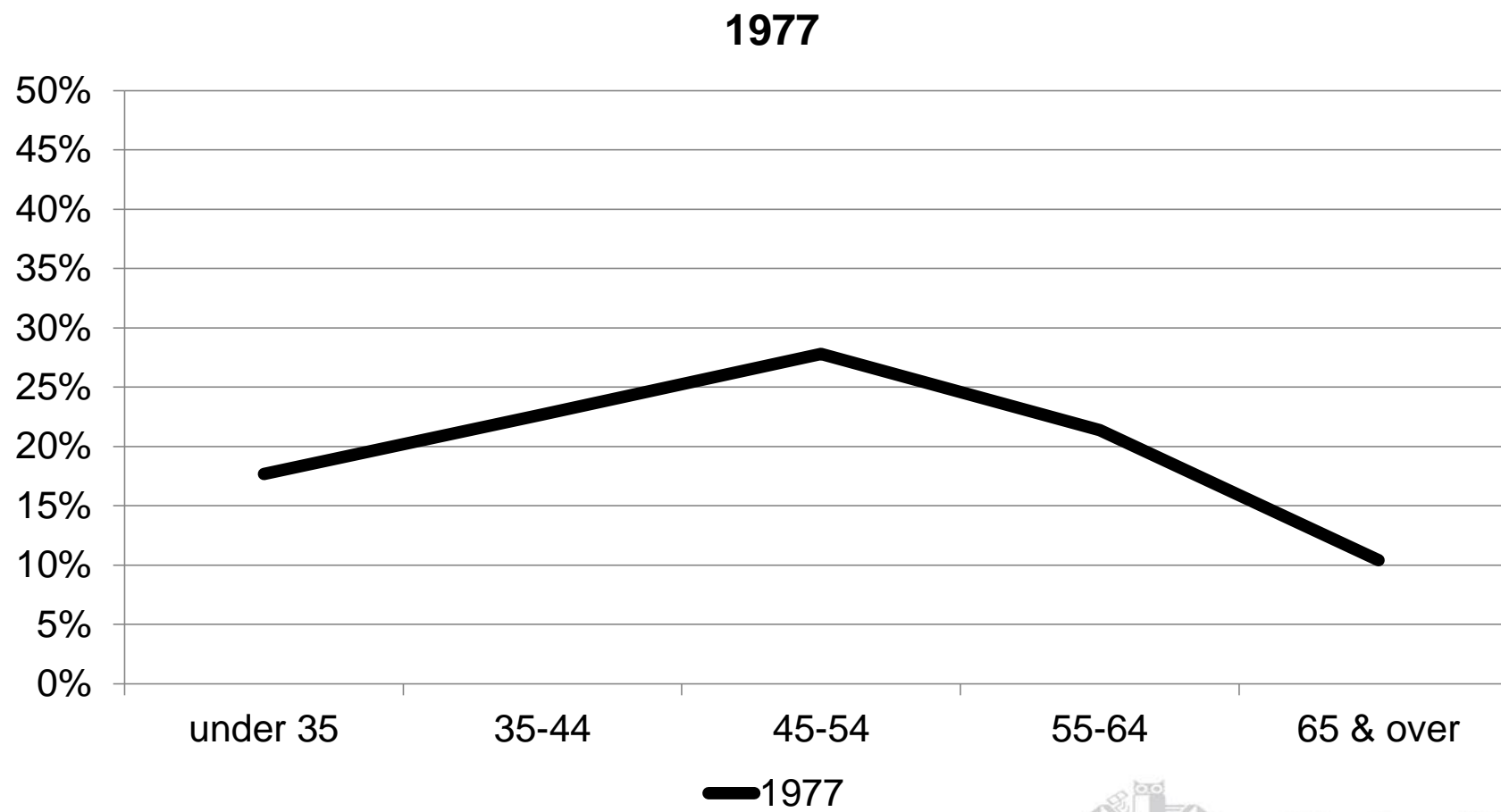


Uluru – the profile of a sustainable workforce



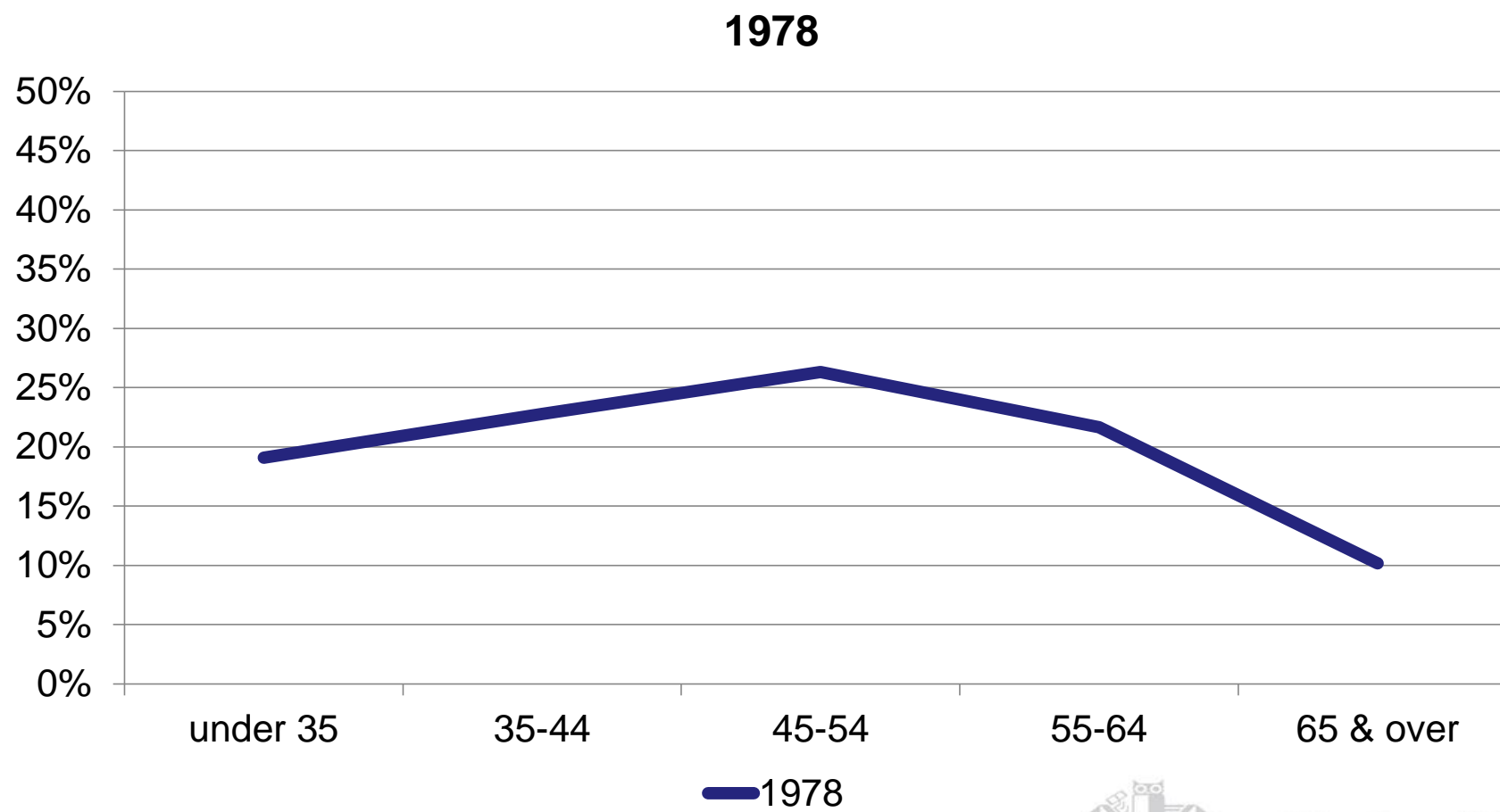
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GP age profile (MCNZ survey)



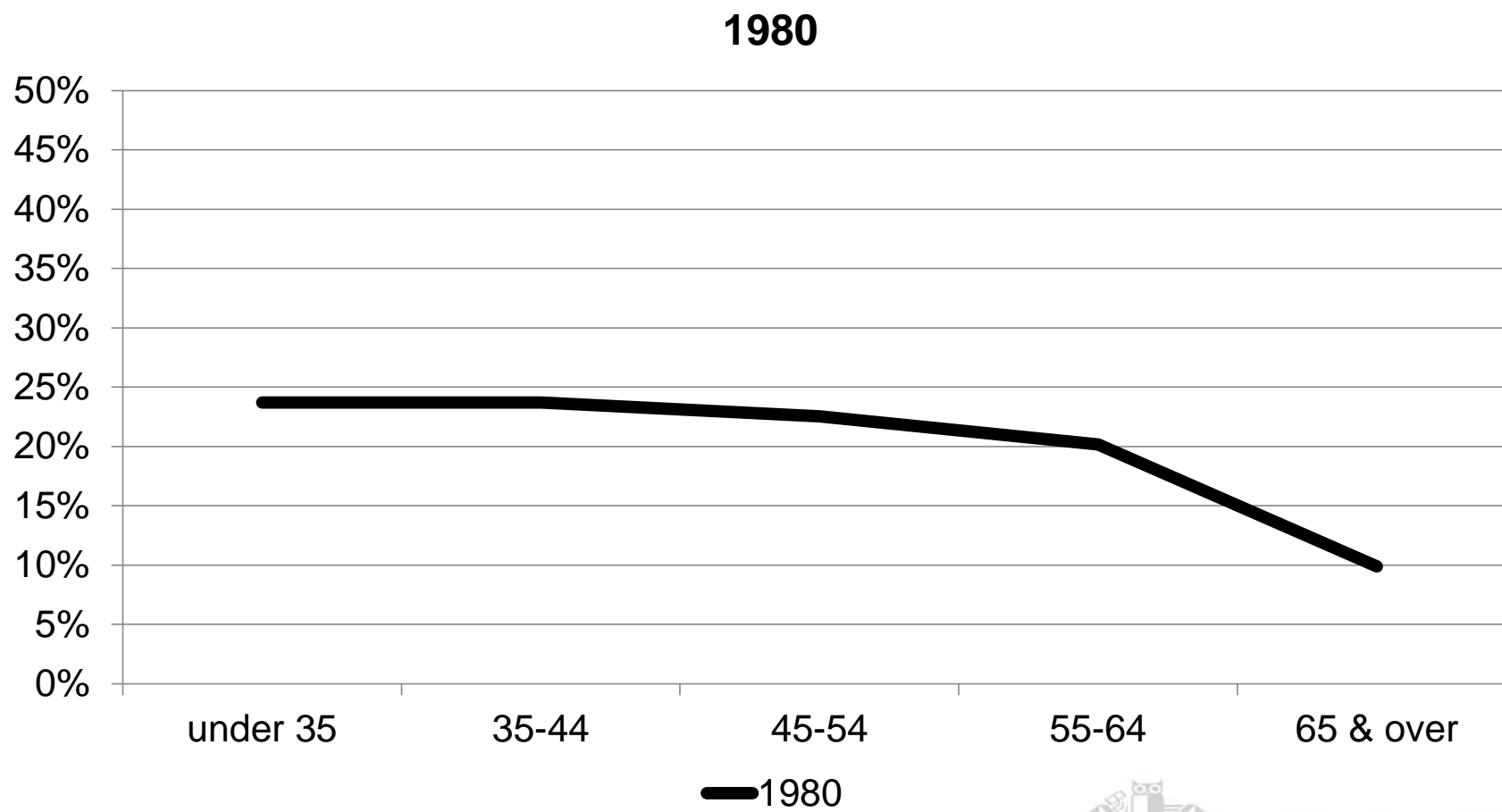
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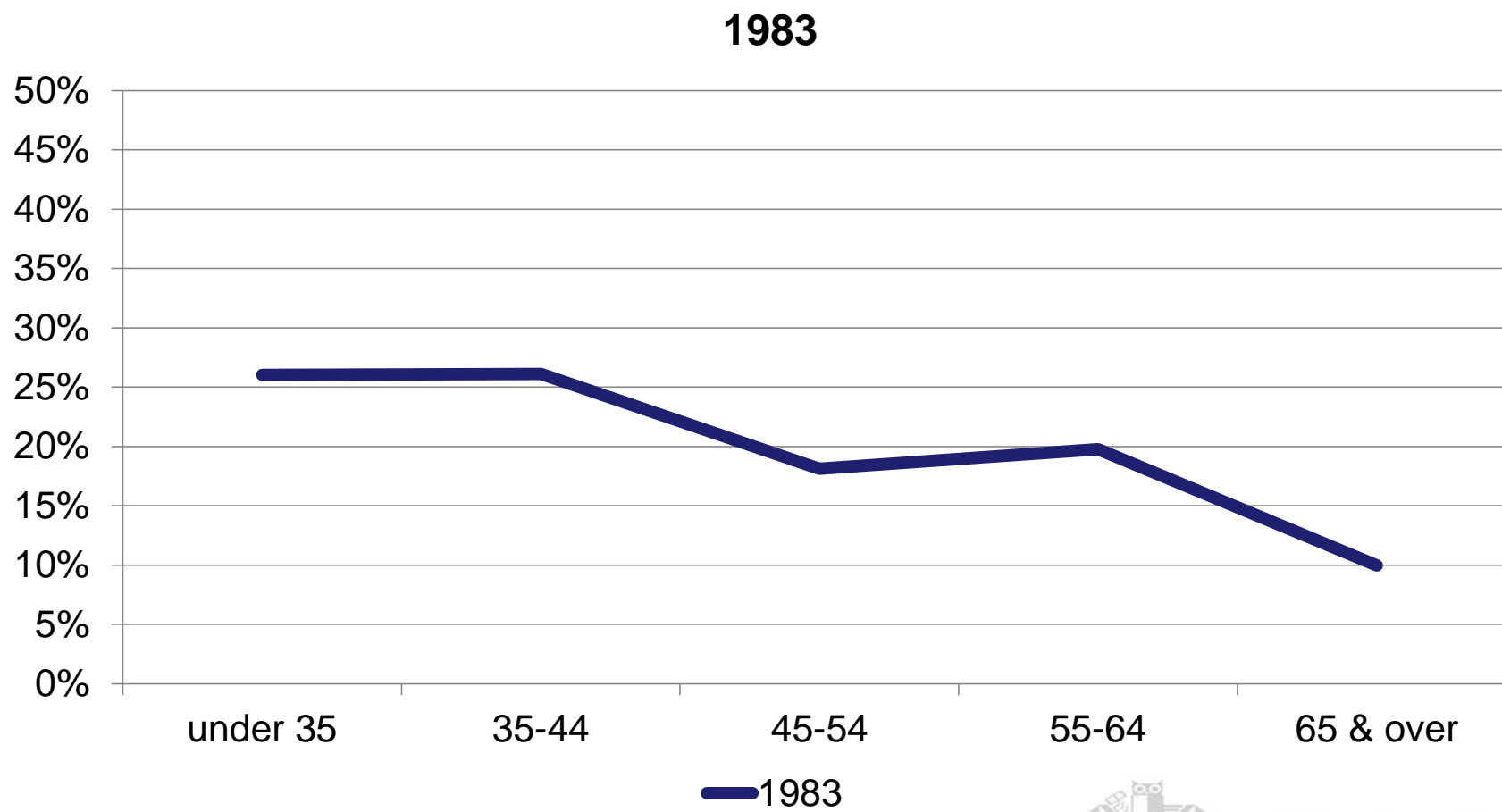
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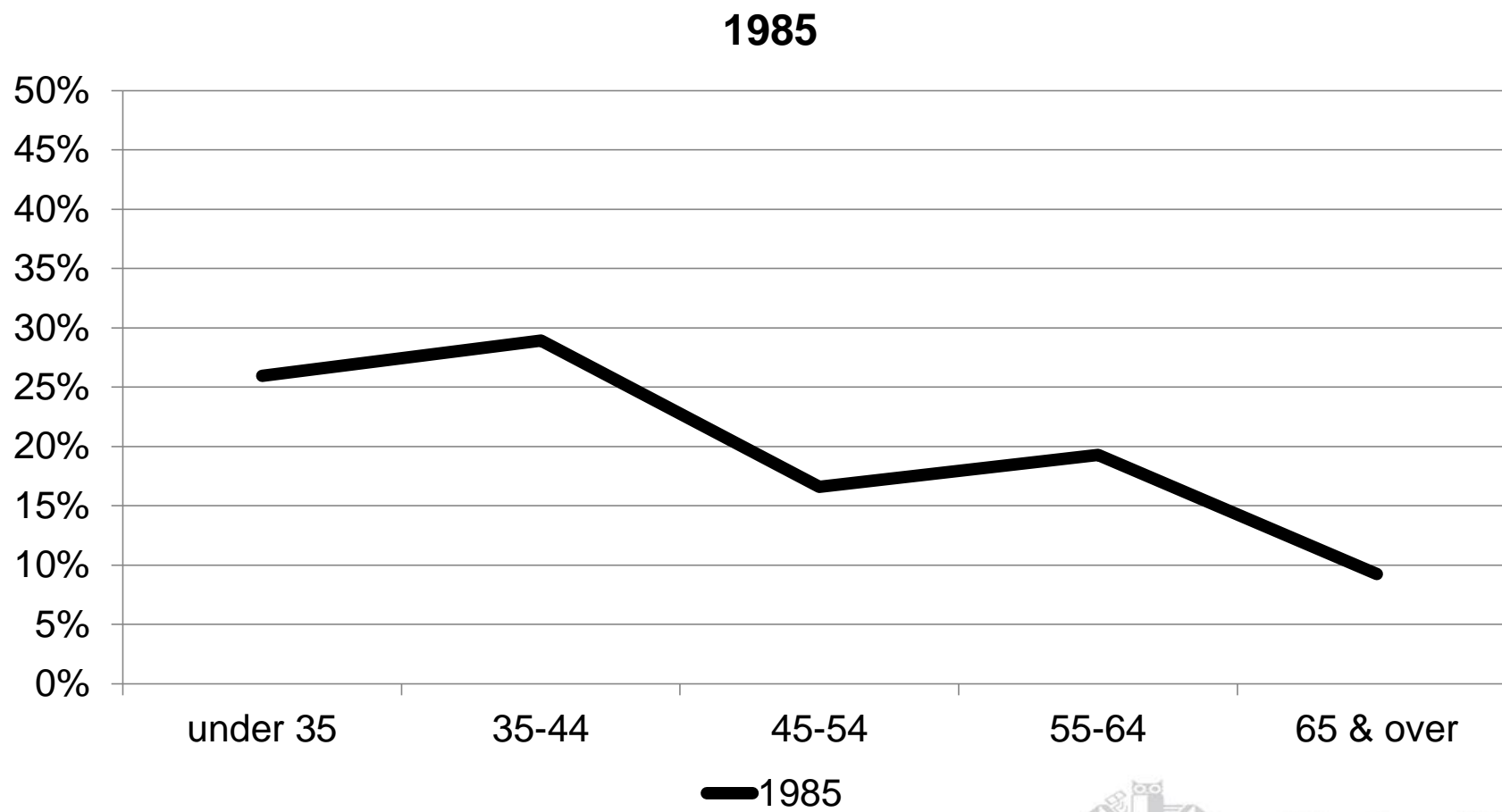
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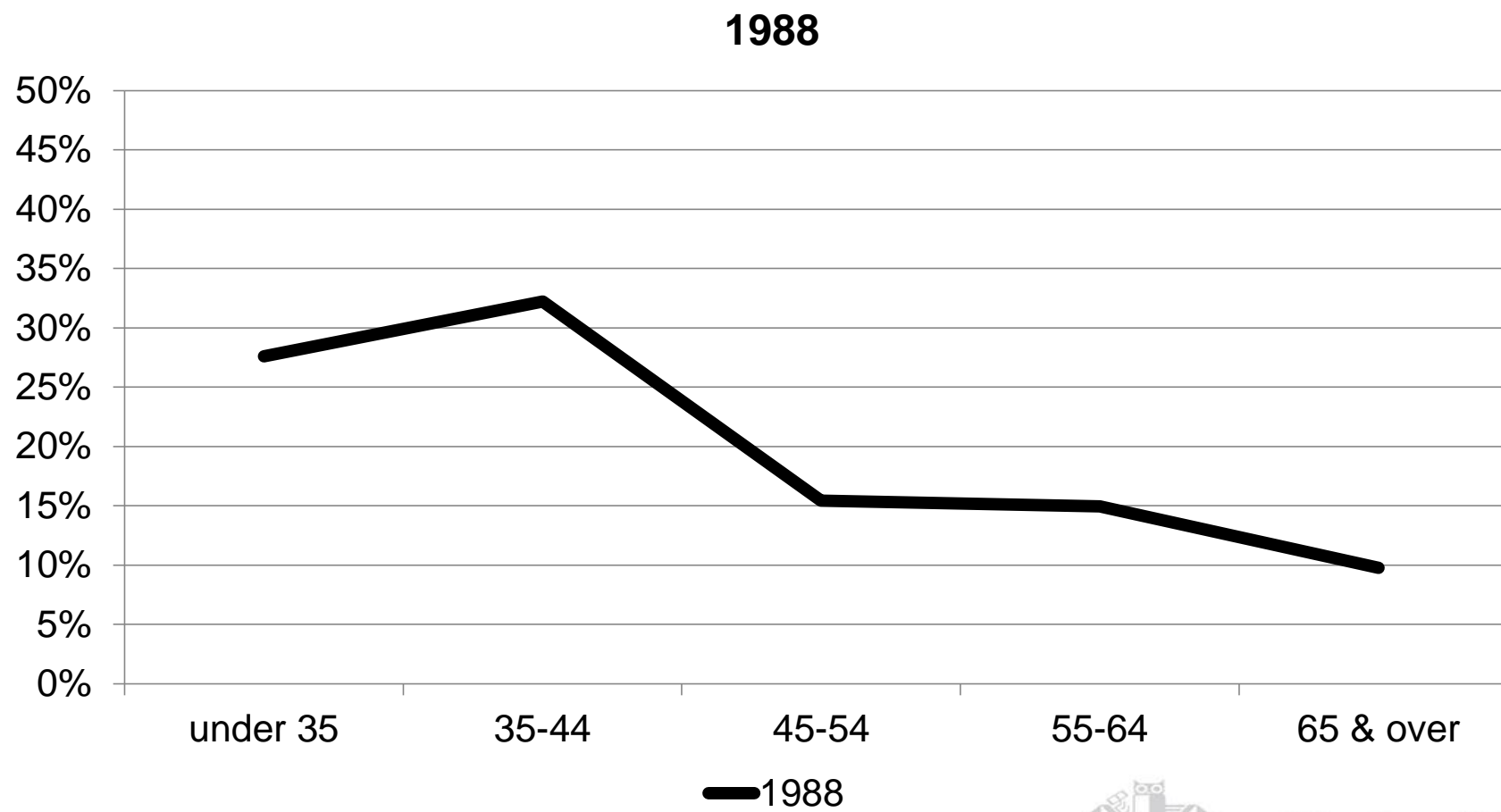
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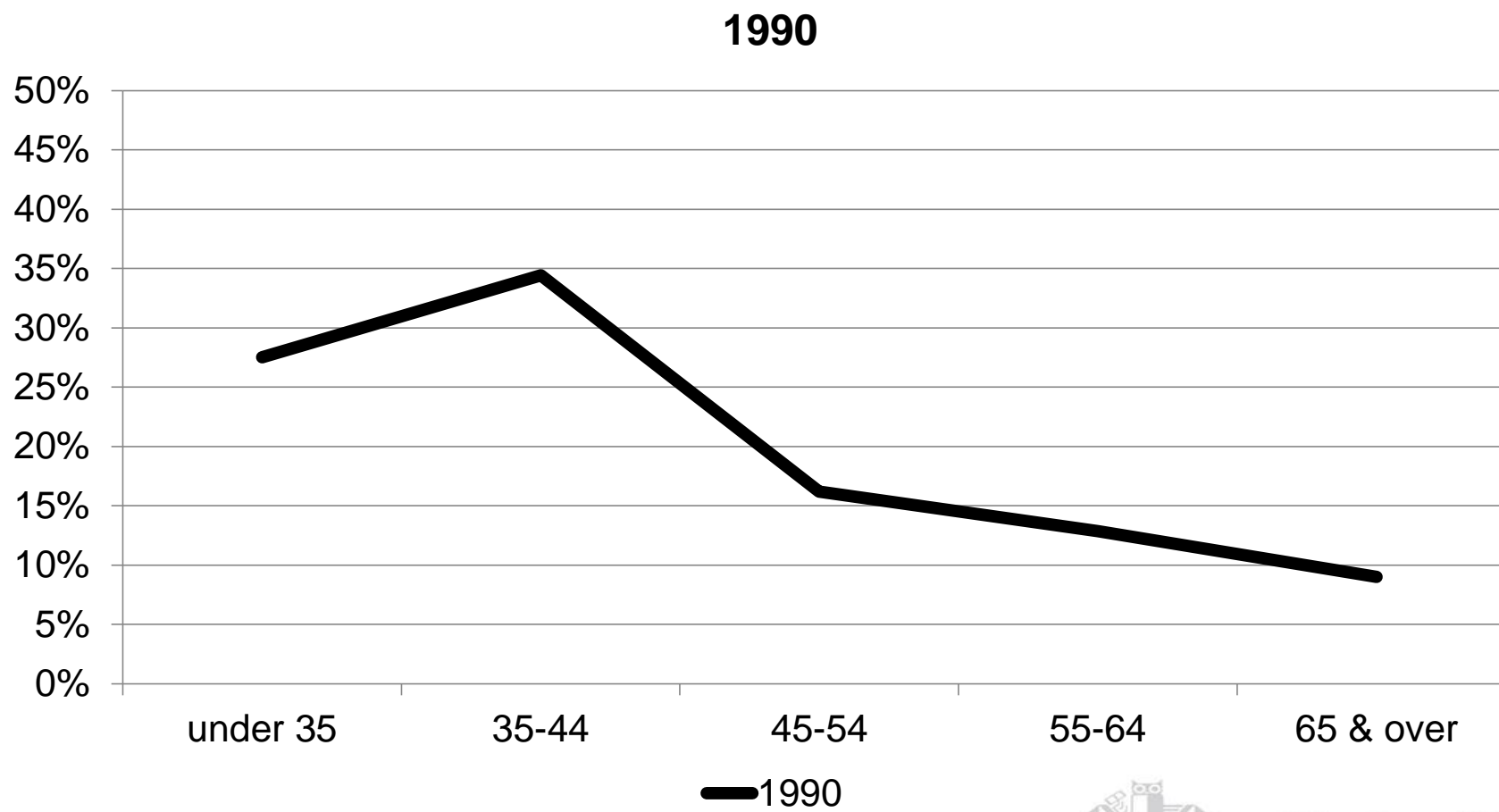
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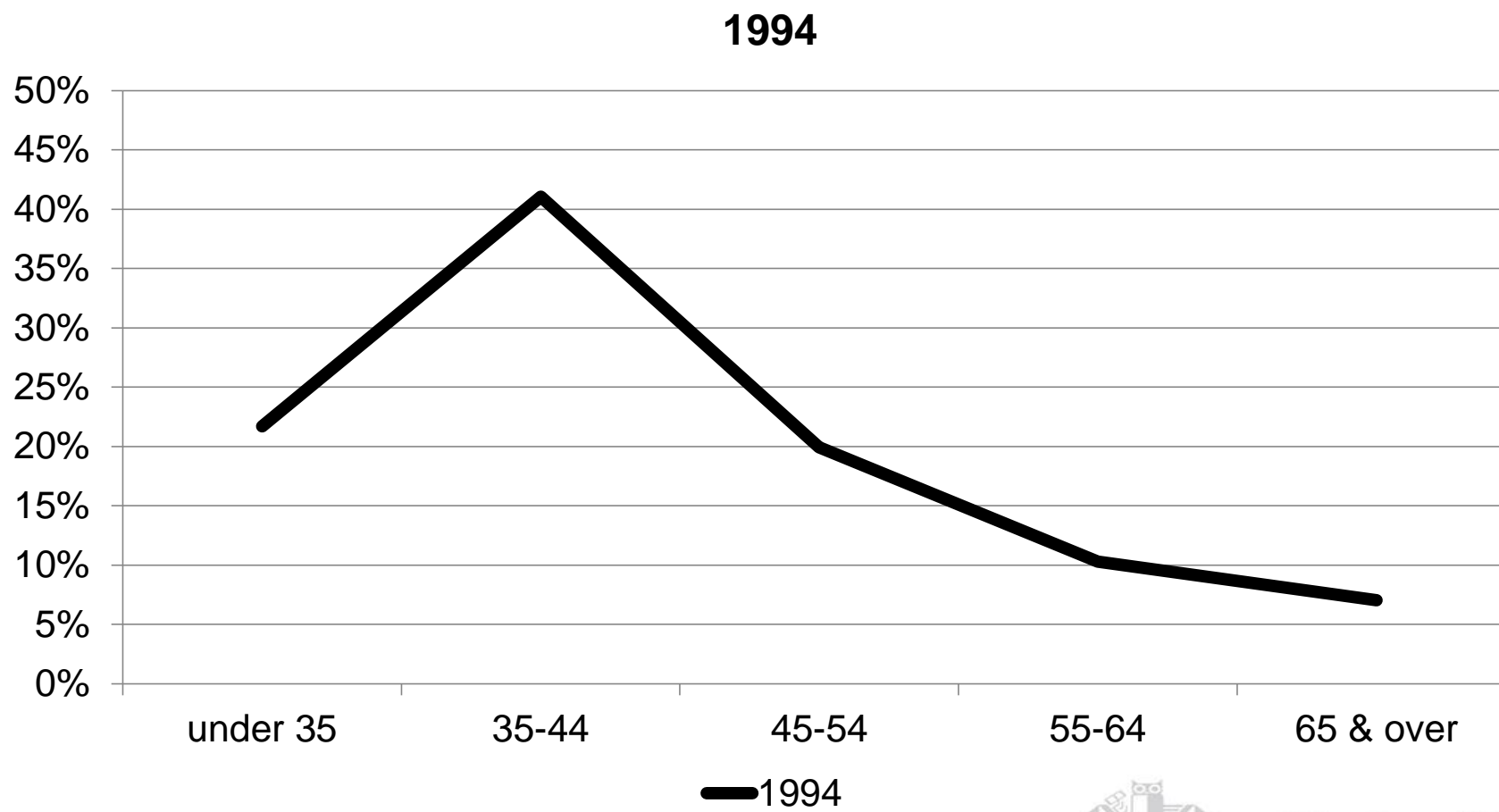
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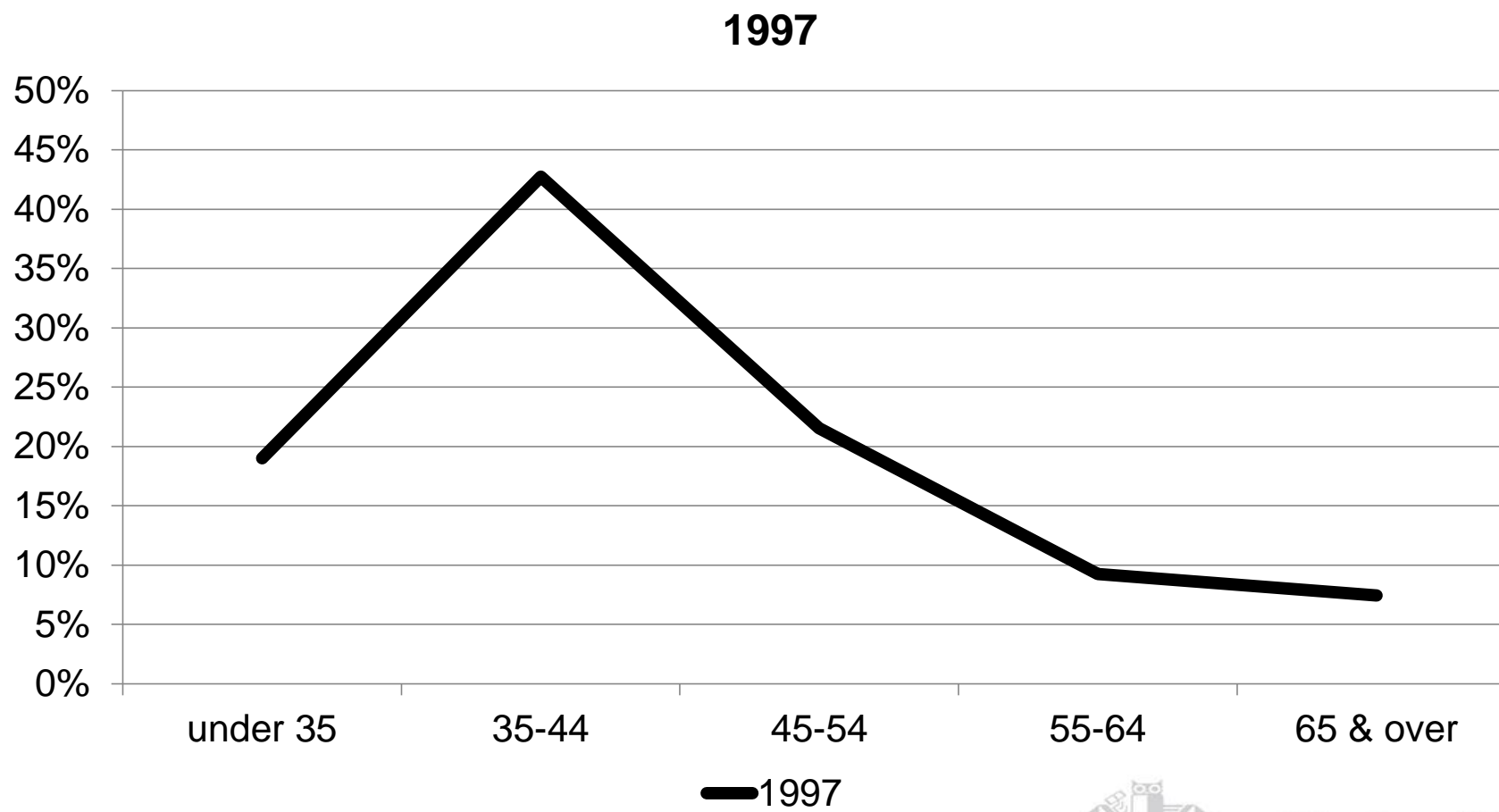
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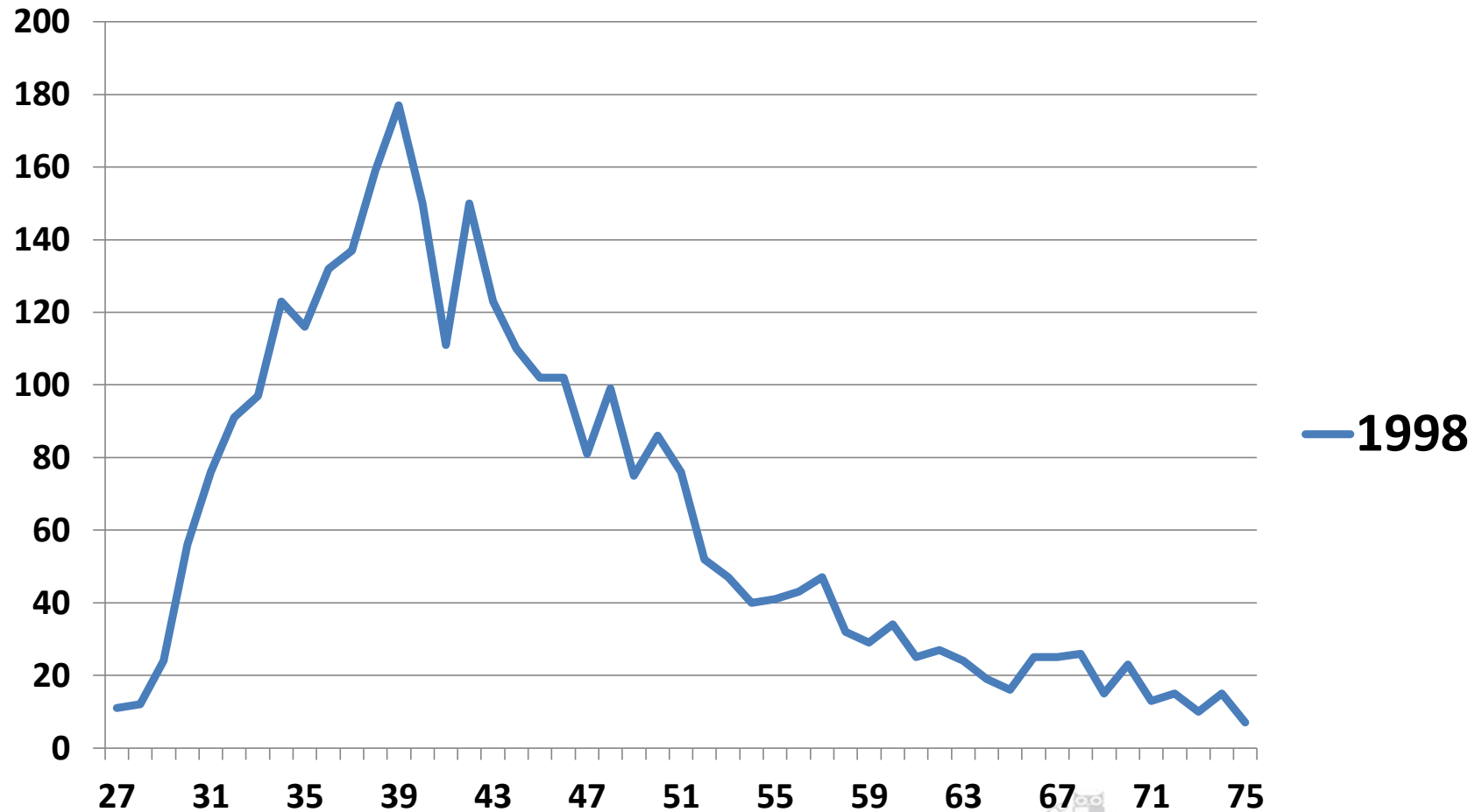
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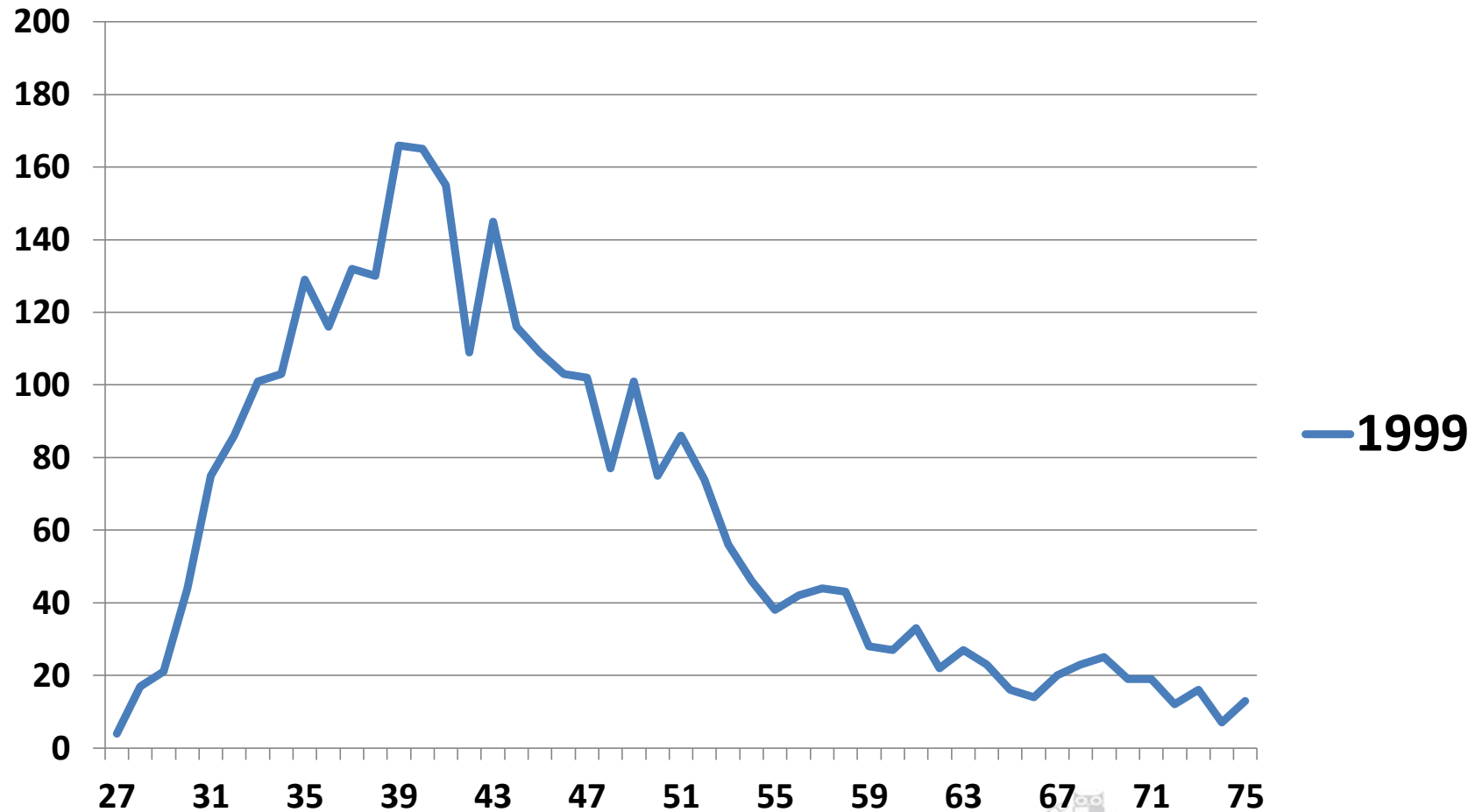
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Age profile of NZ GPs (MCNZ data)



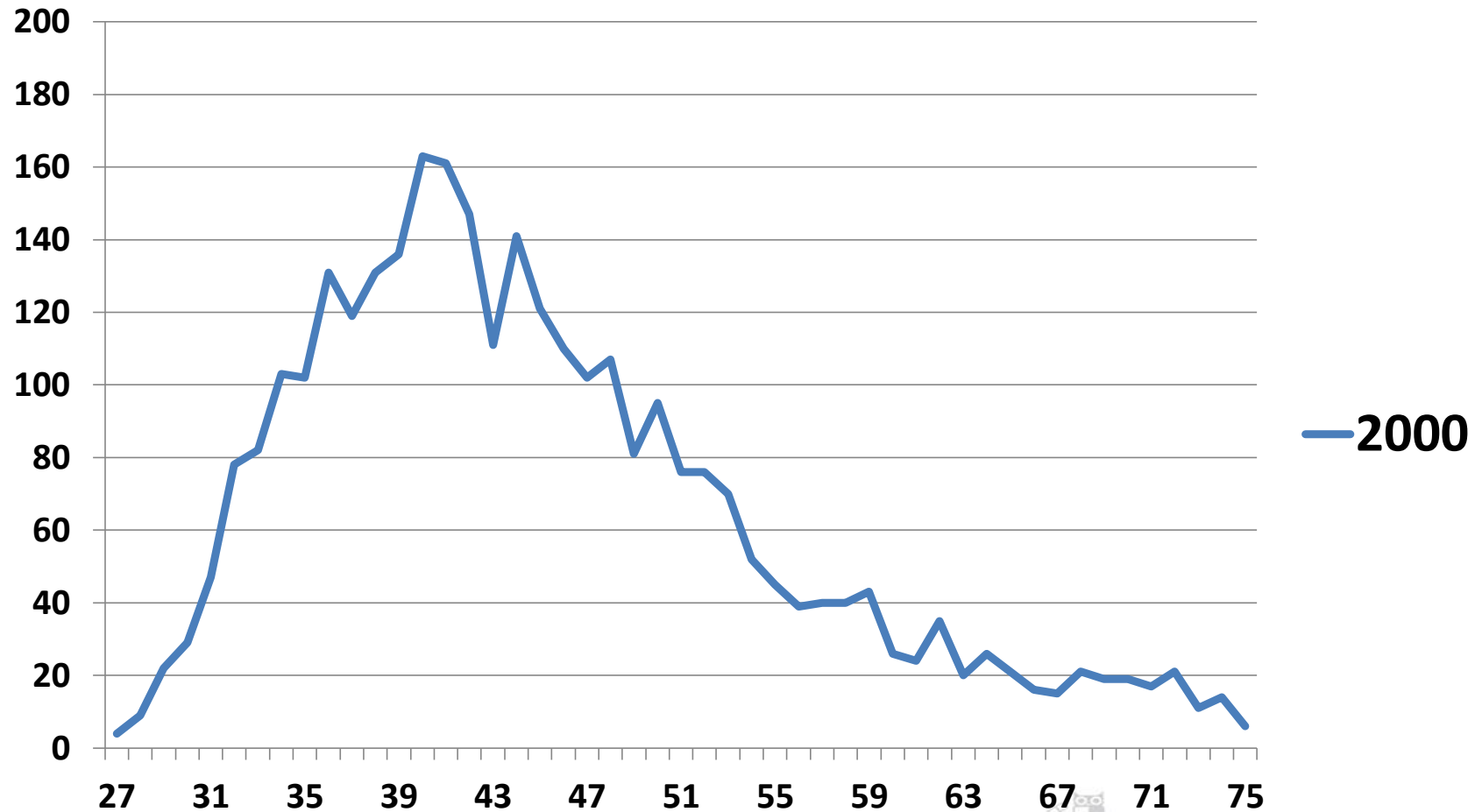
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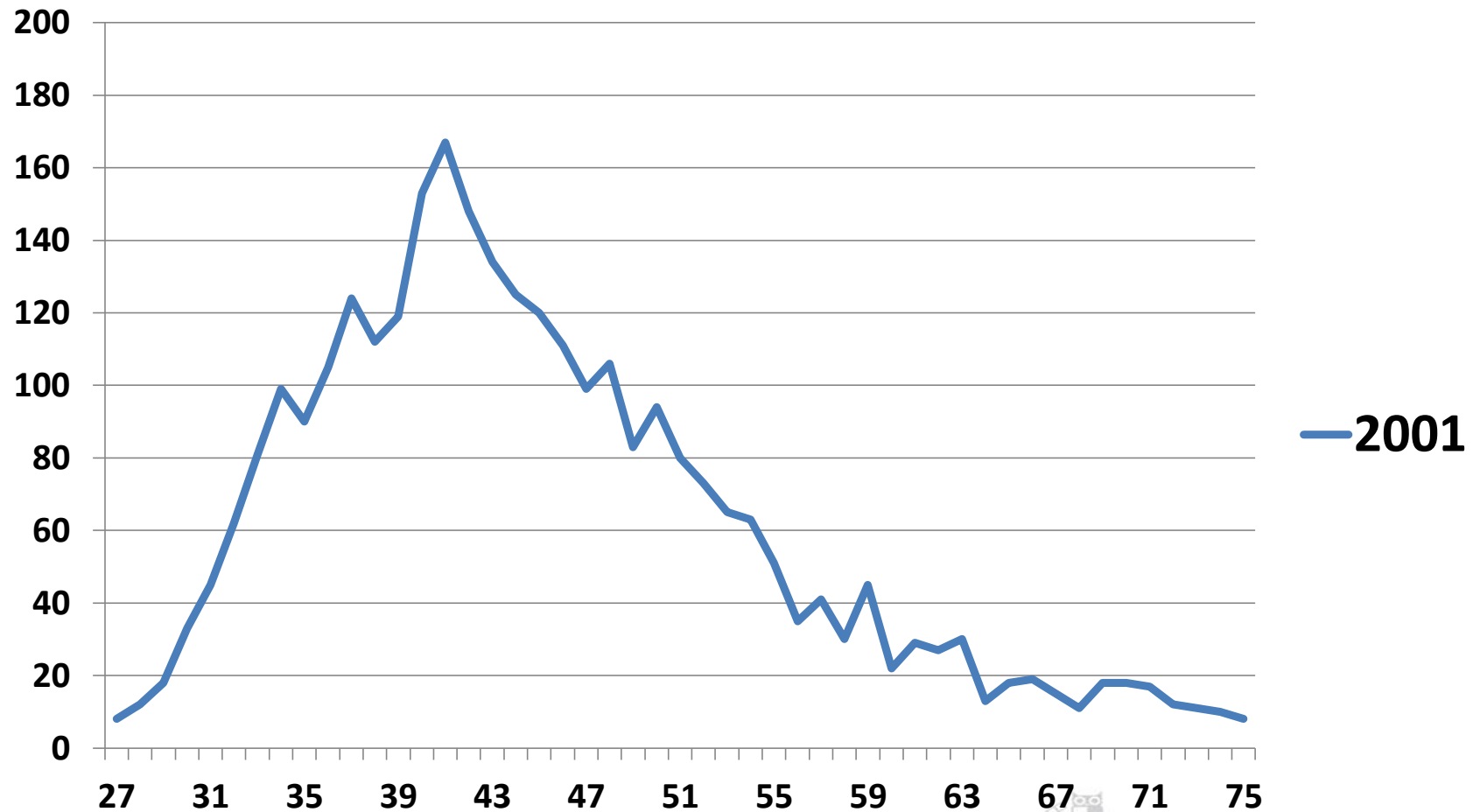
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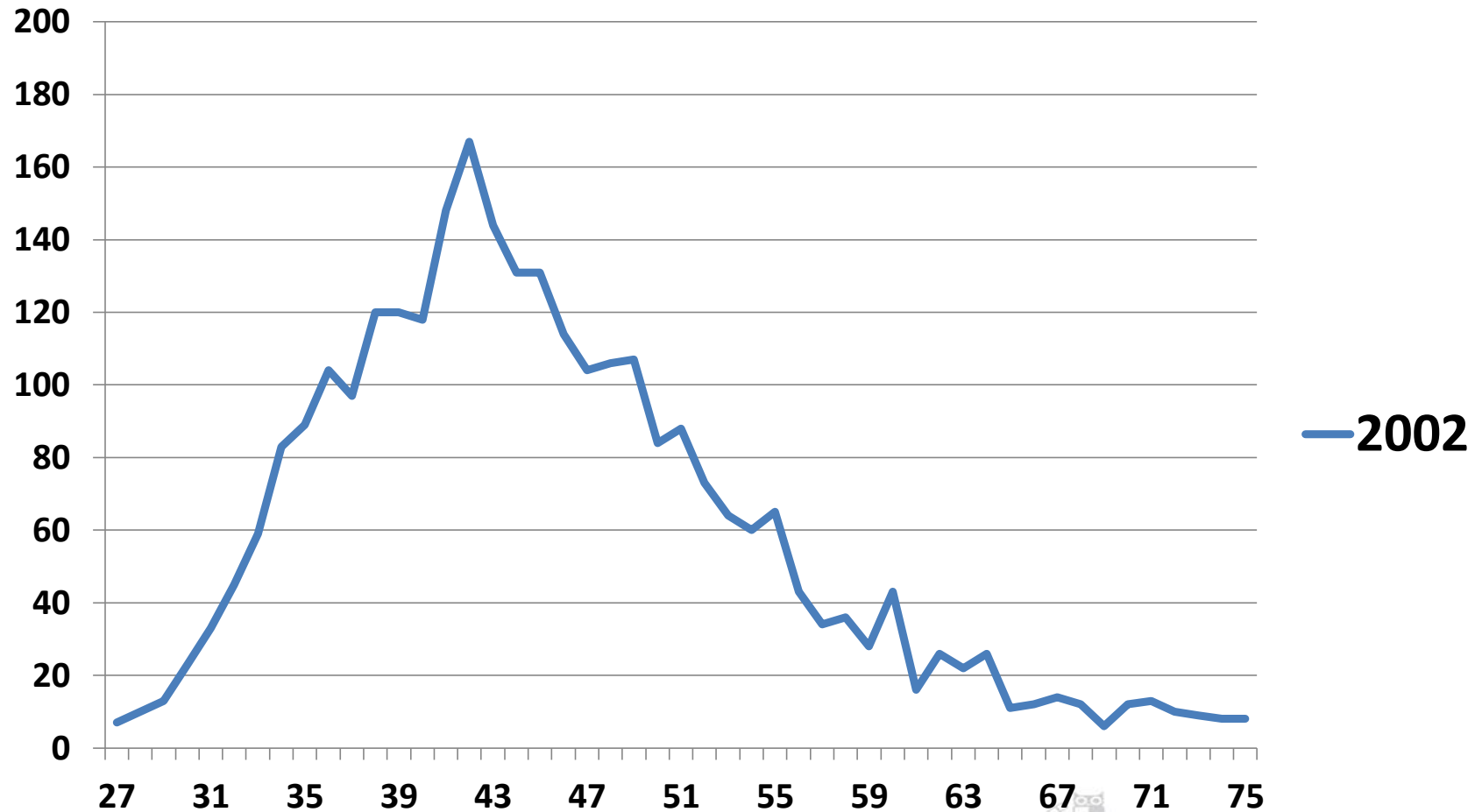
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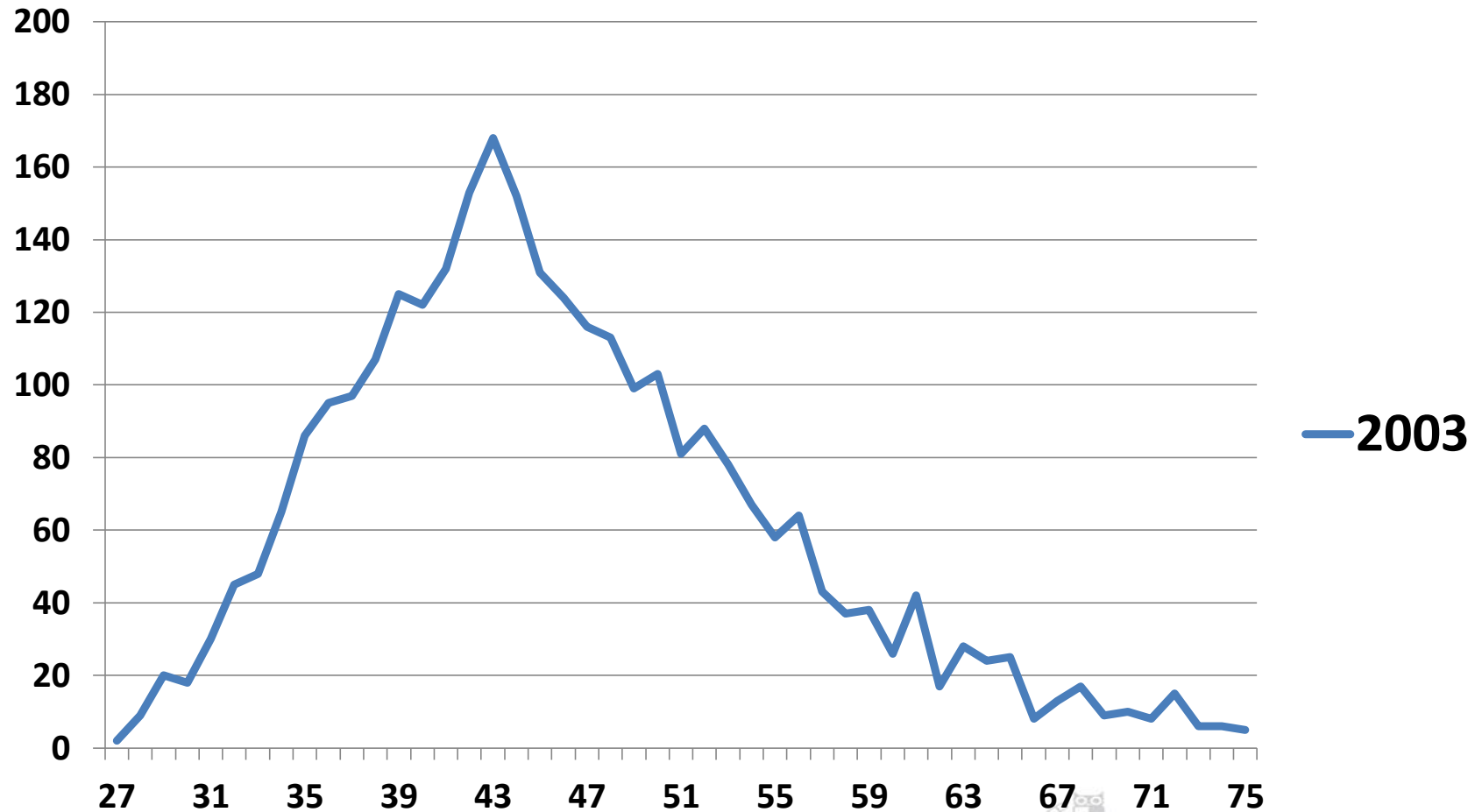
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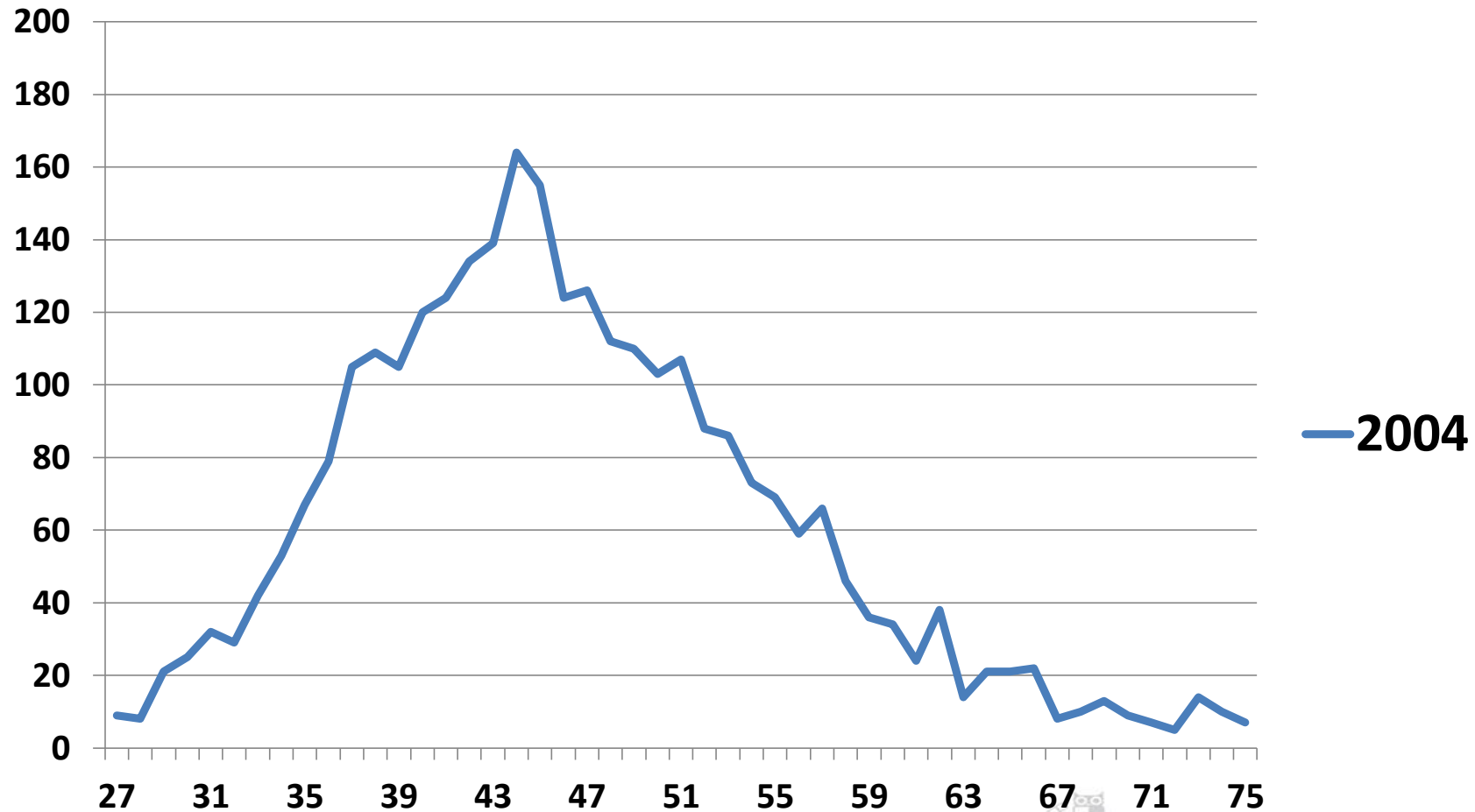
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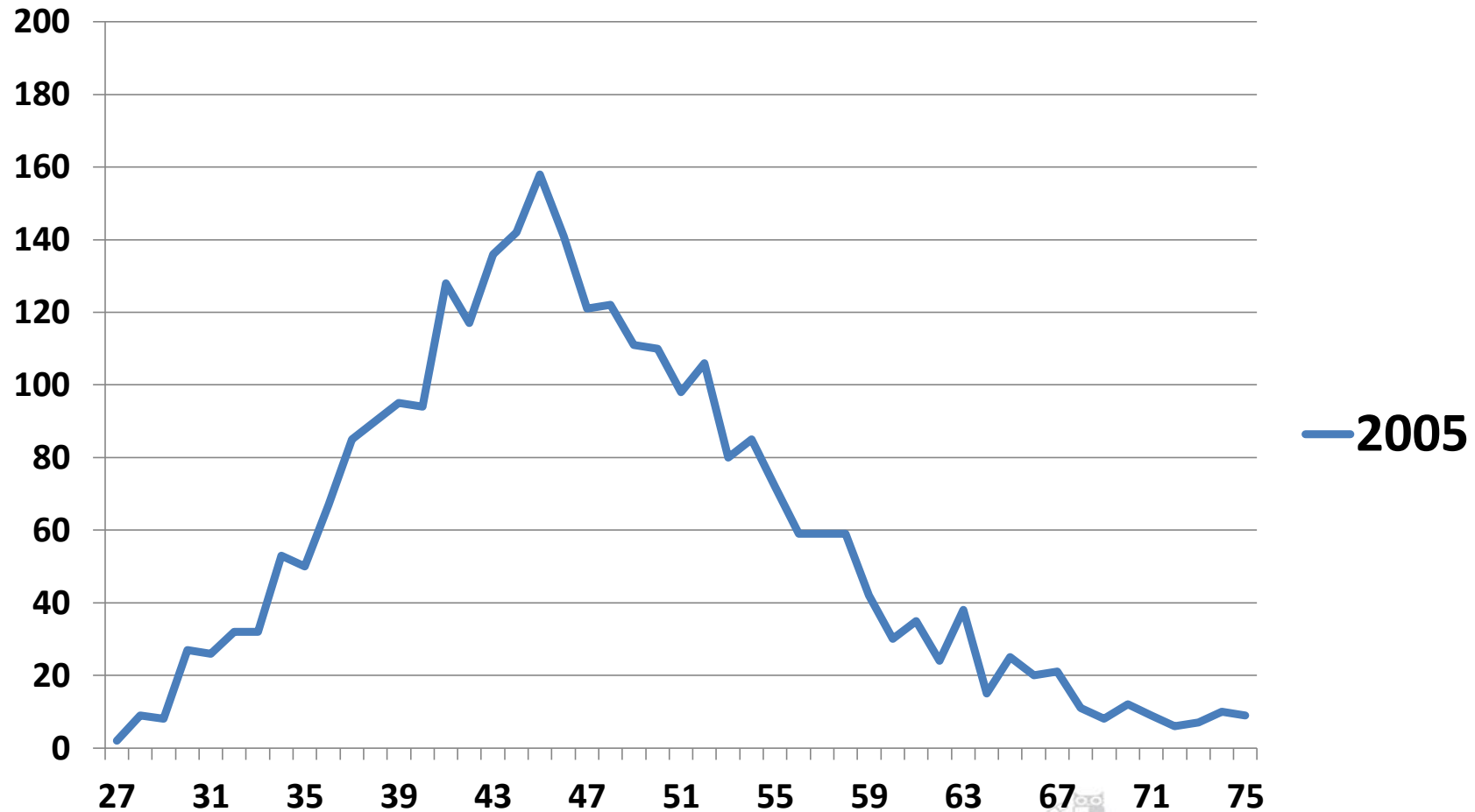
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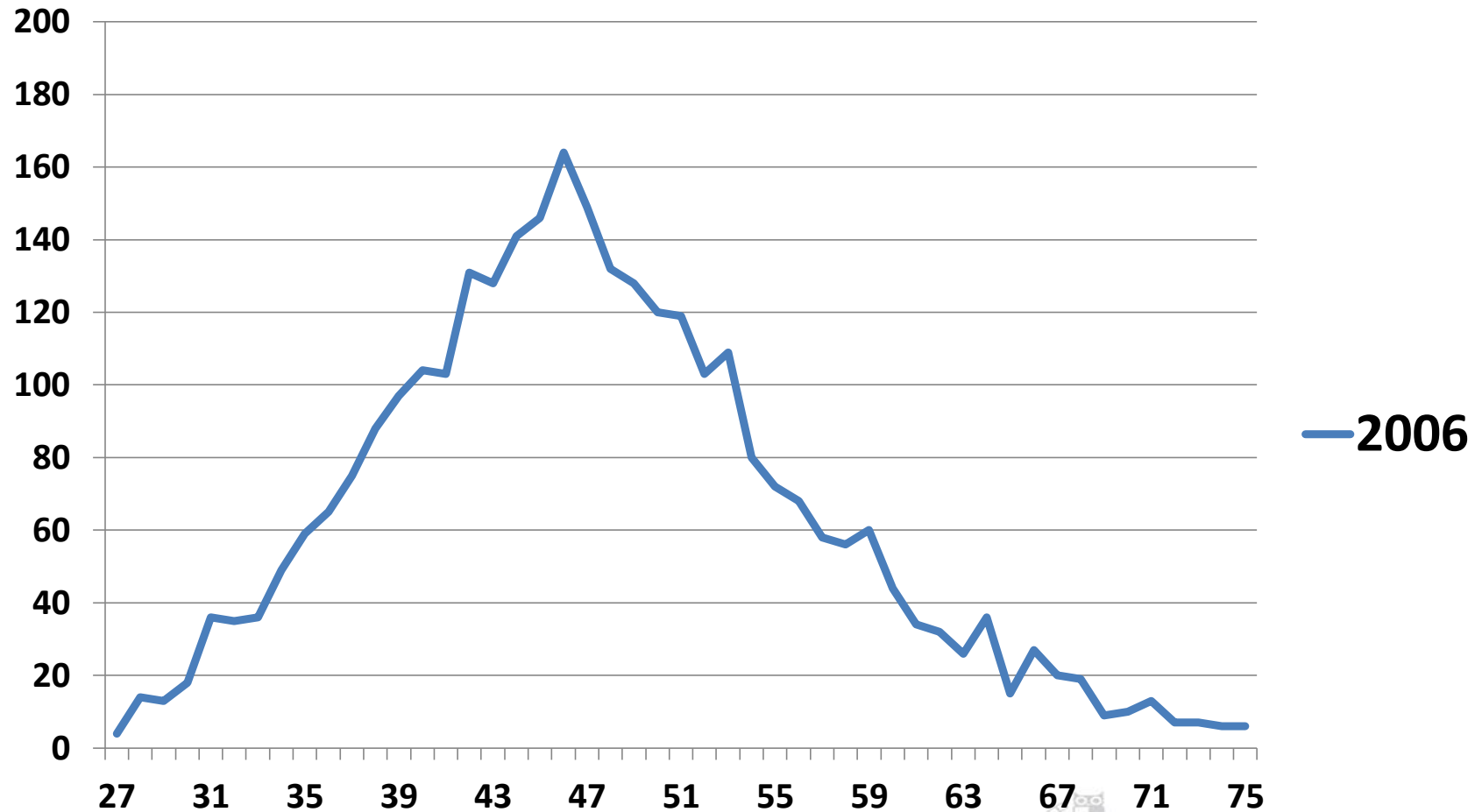
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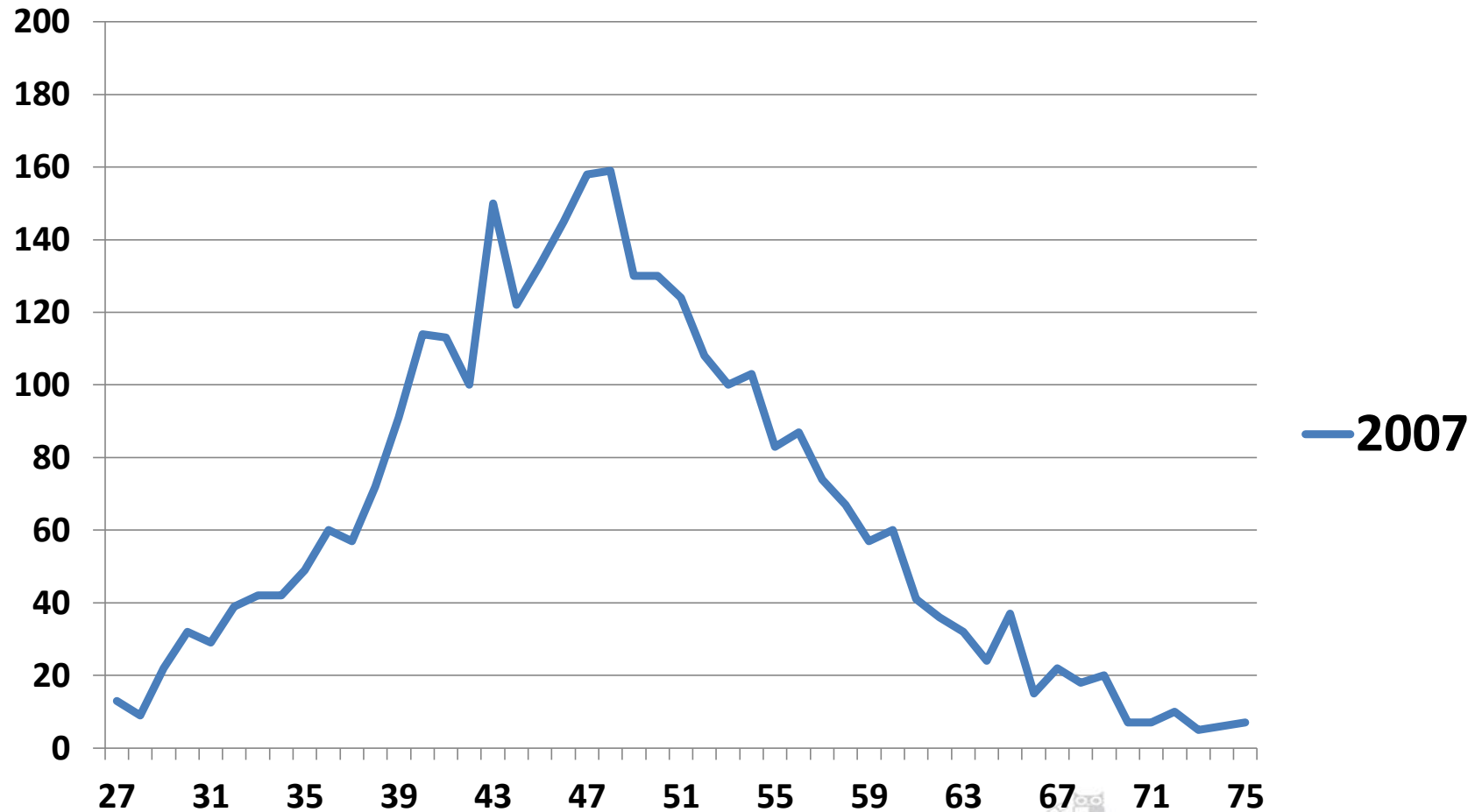
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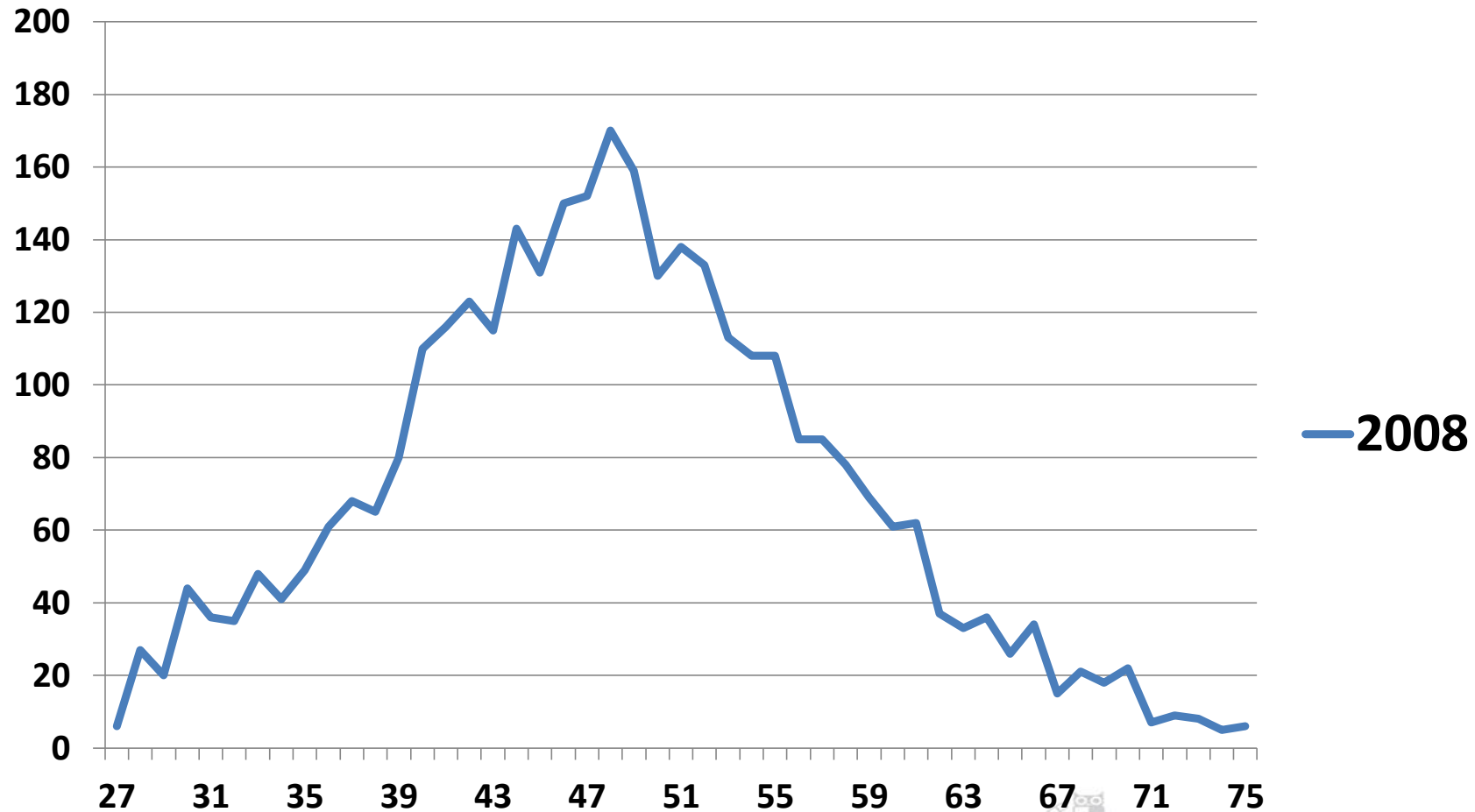
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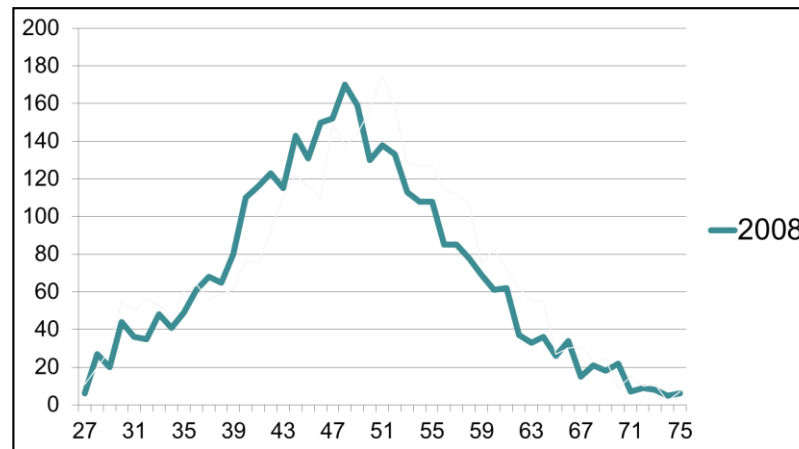
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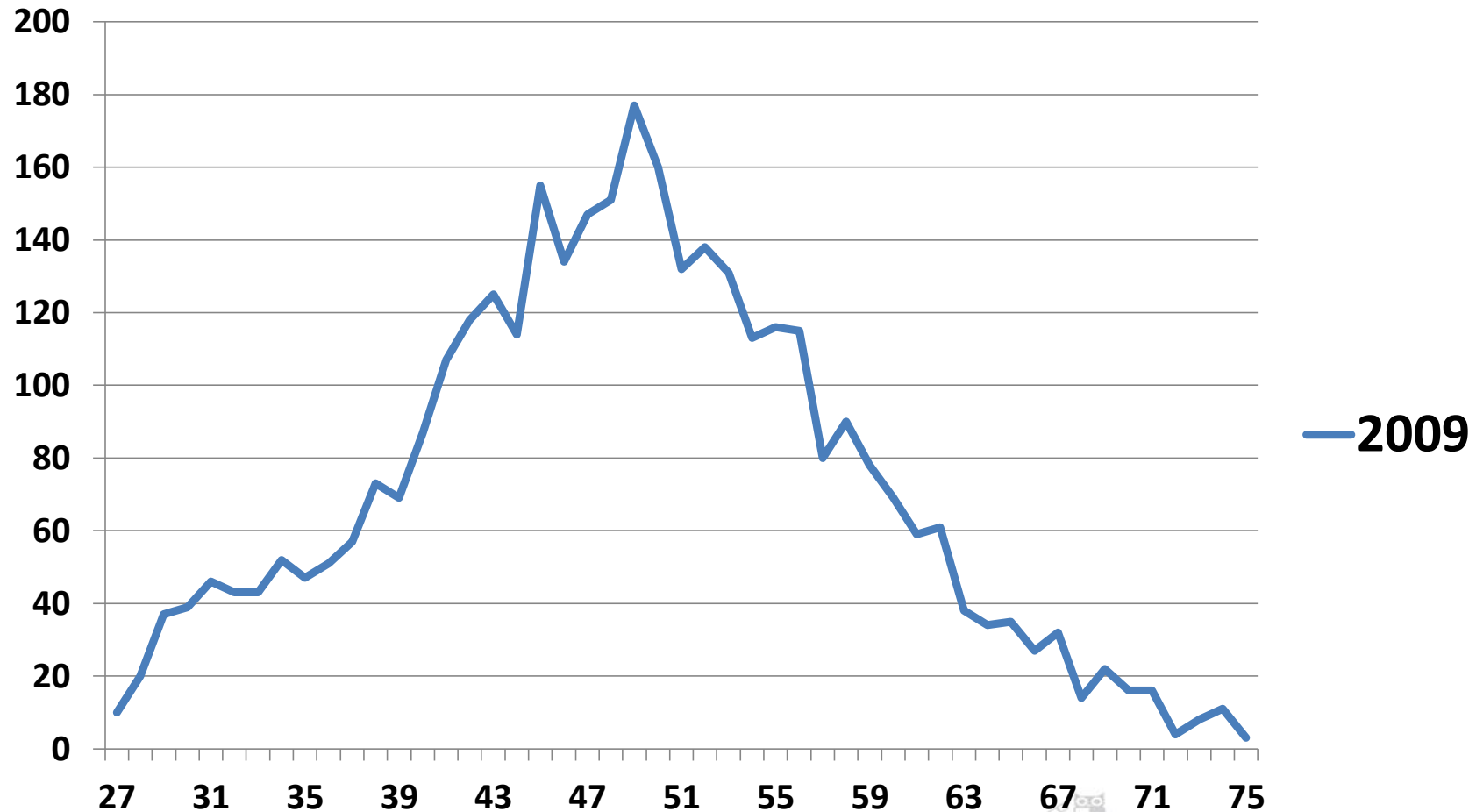
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Mitre Peak



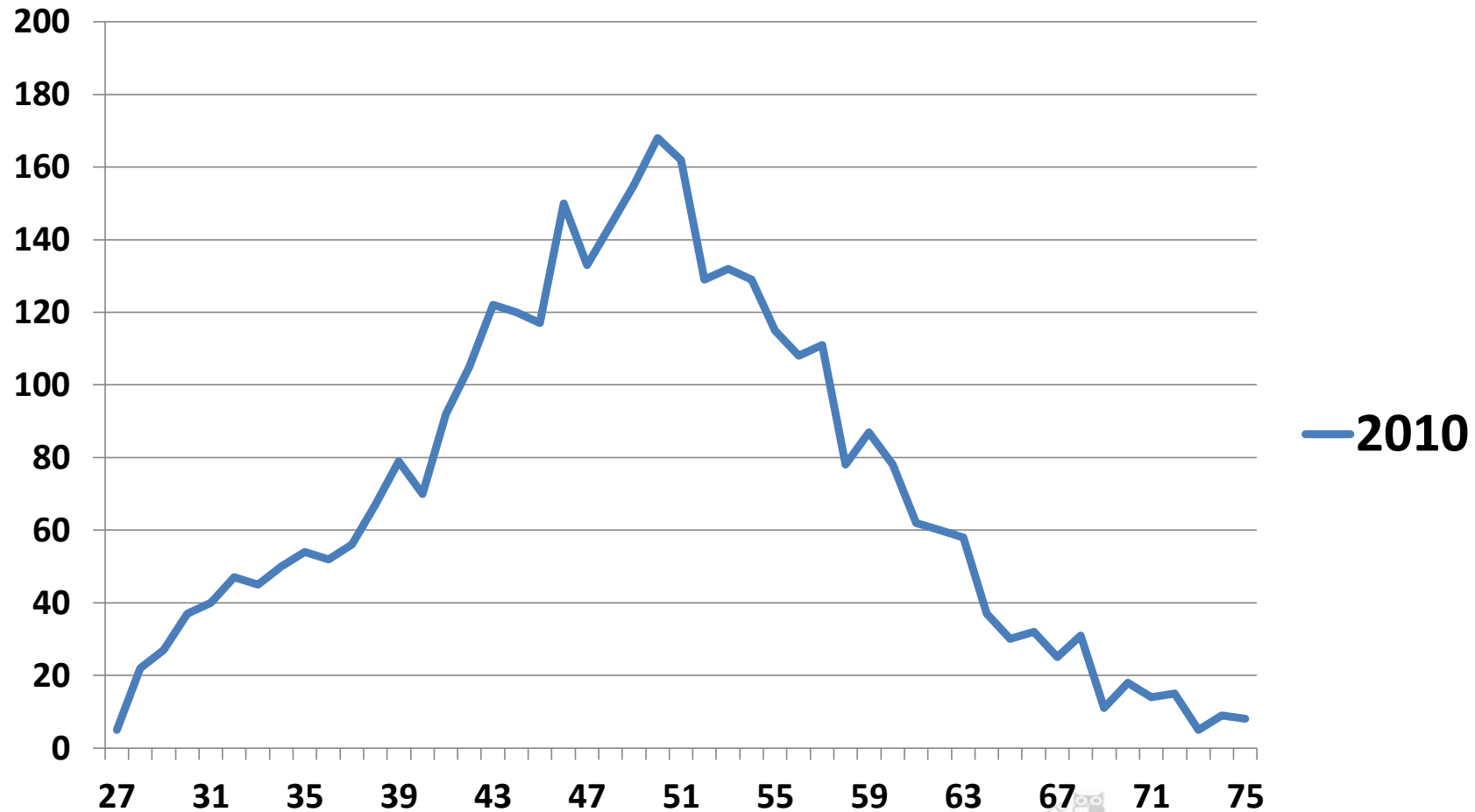
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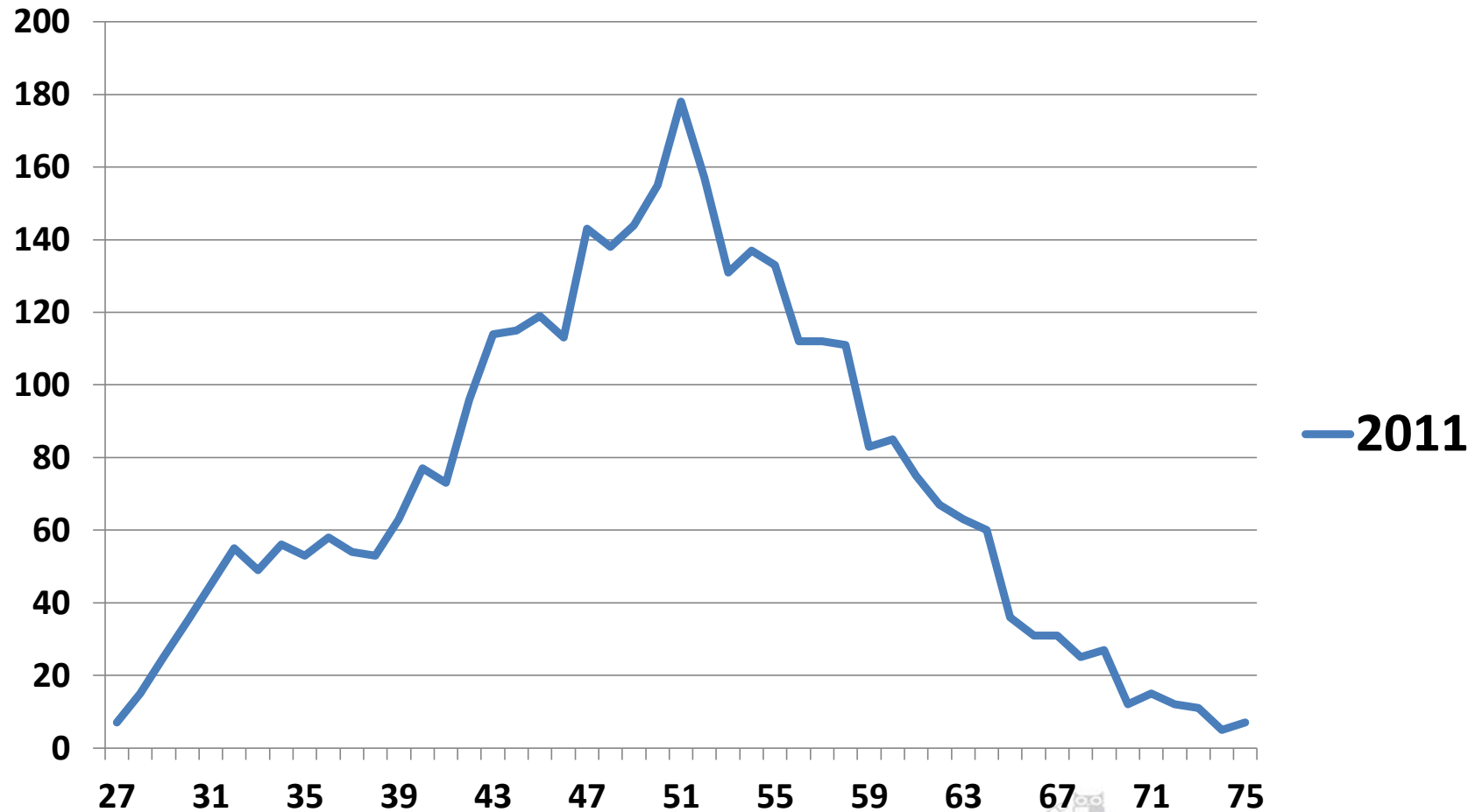
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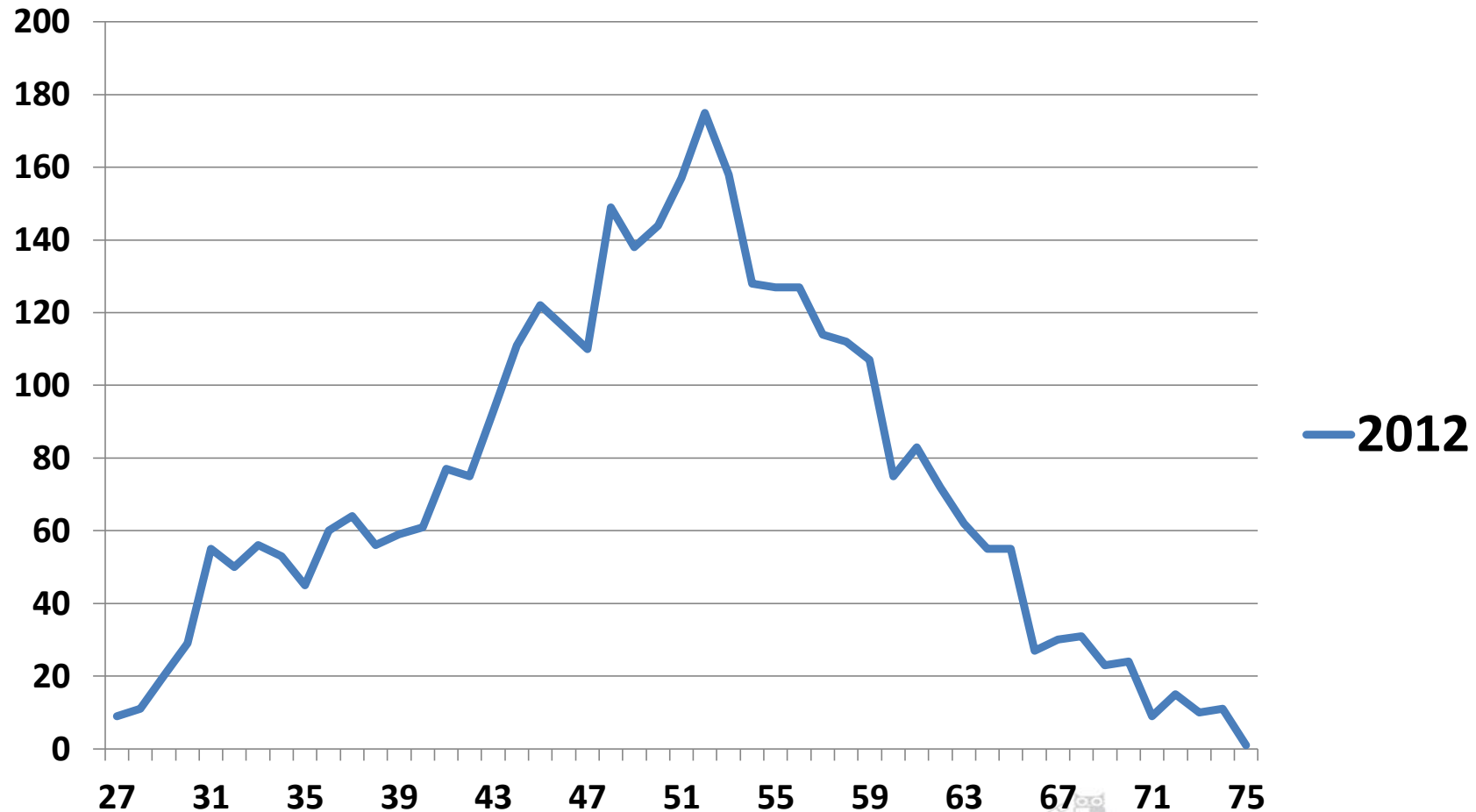
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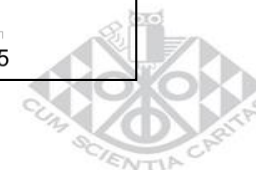
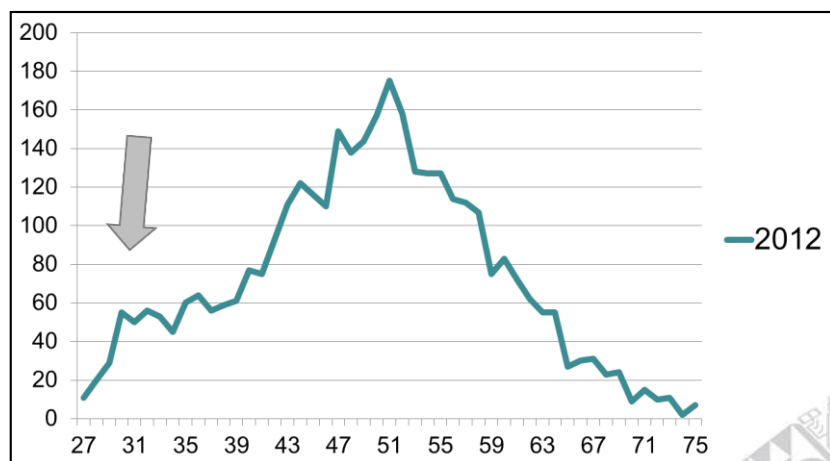
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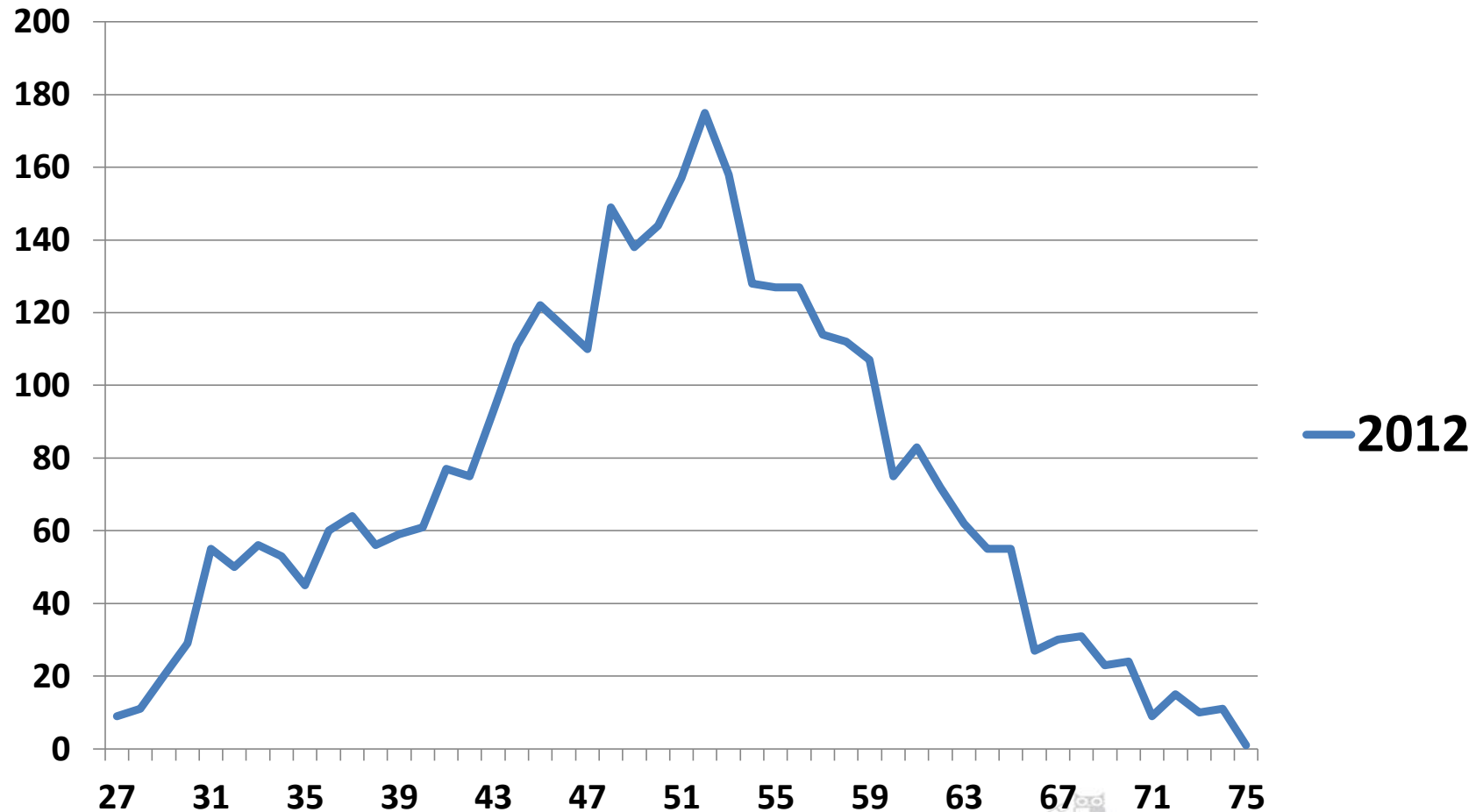
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Mt Taranaki



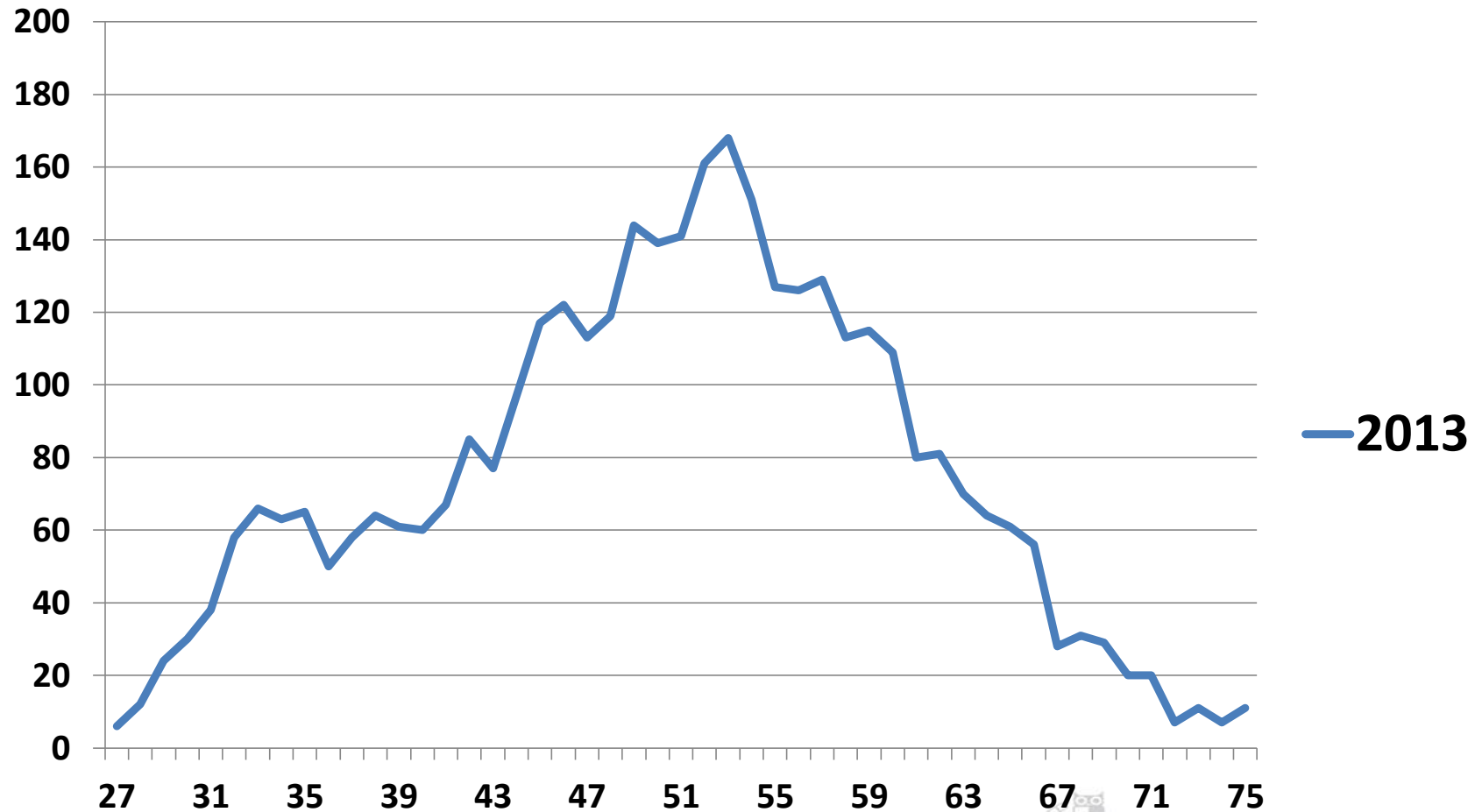
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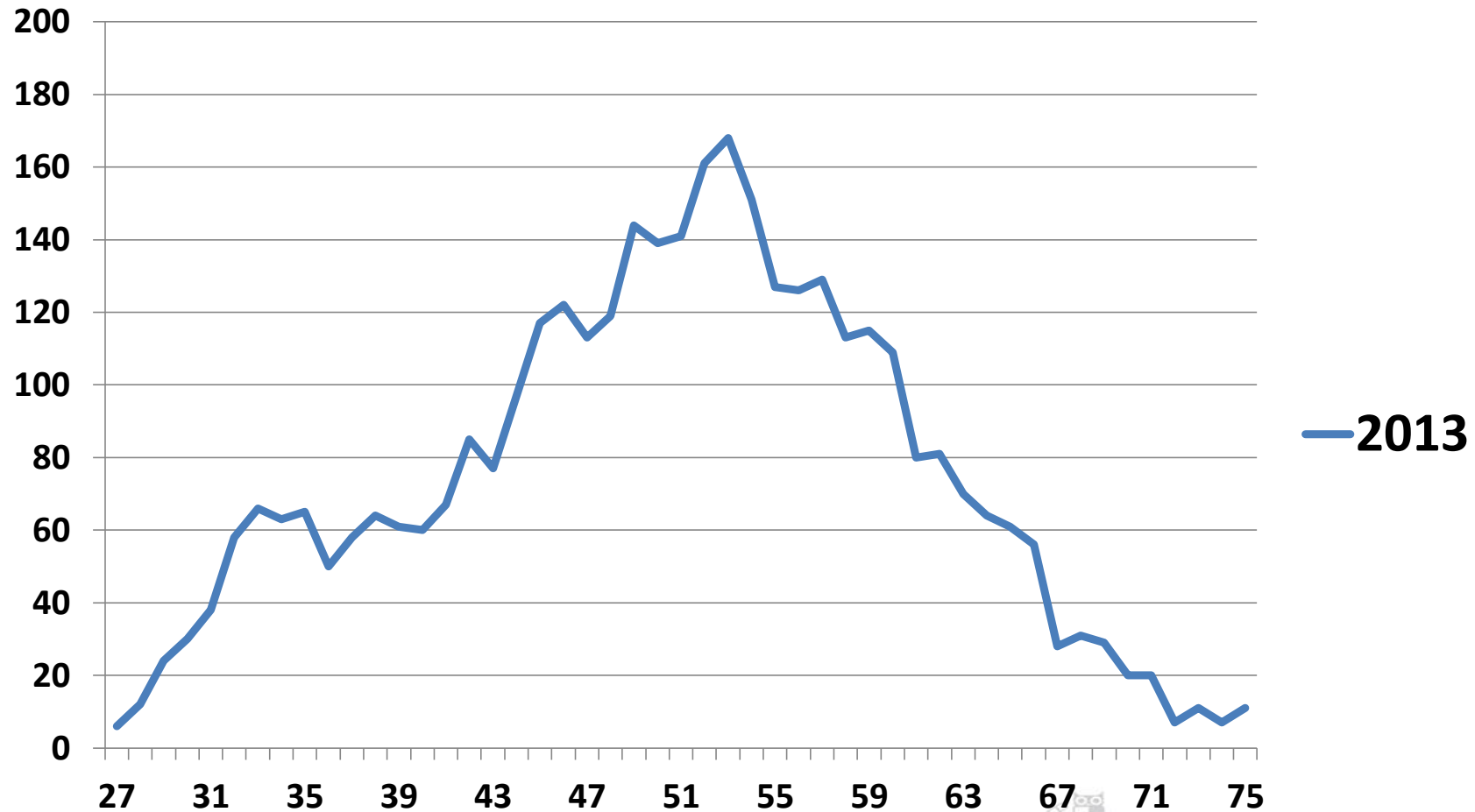
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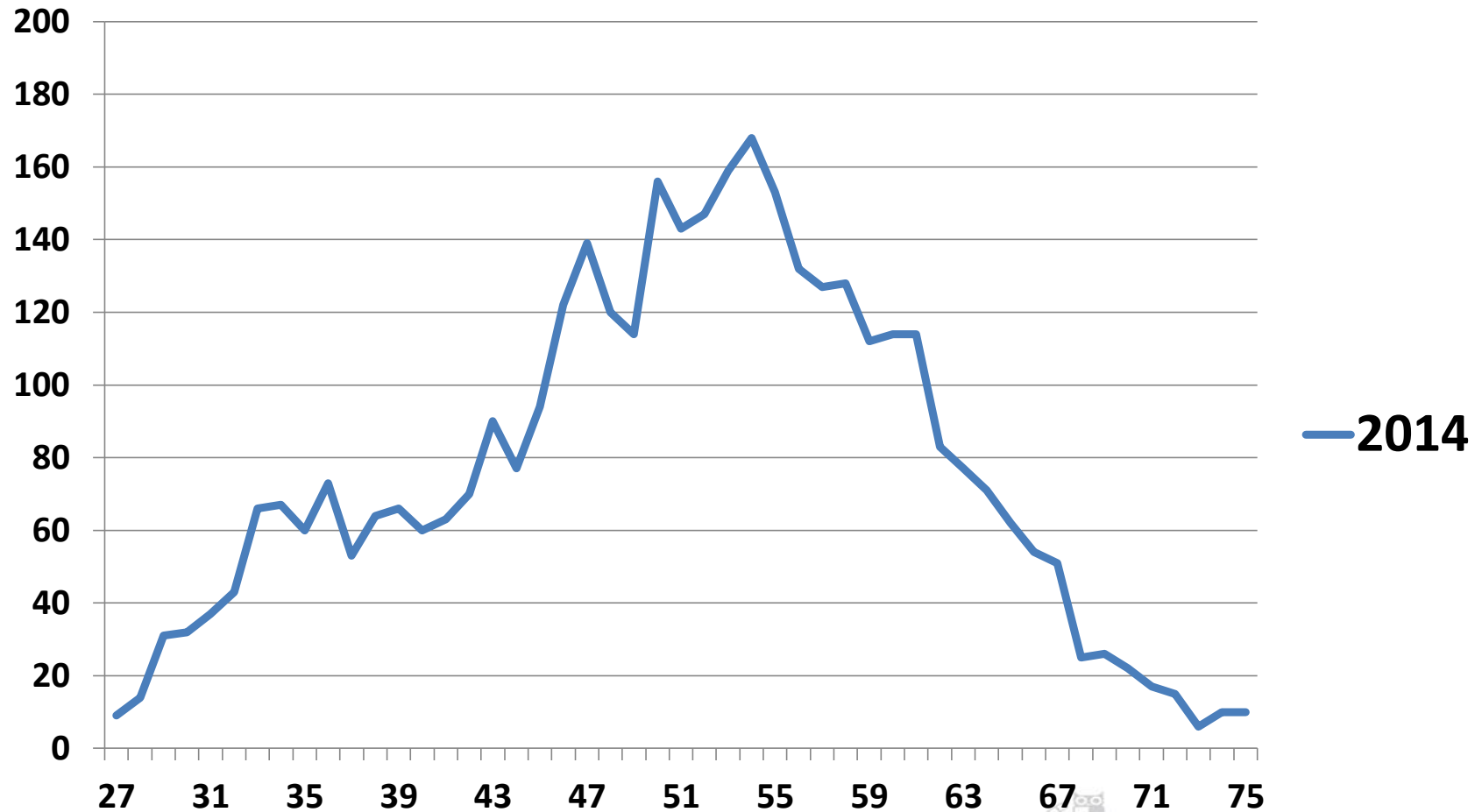
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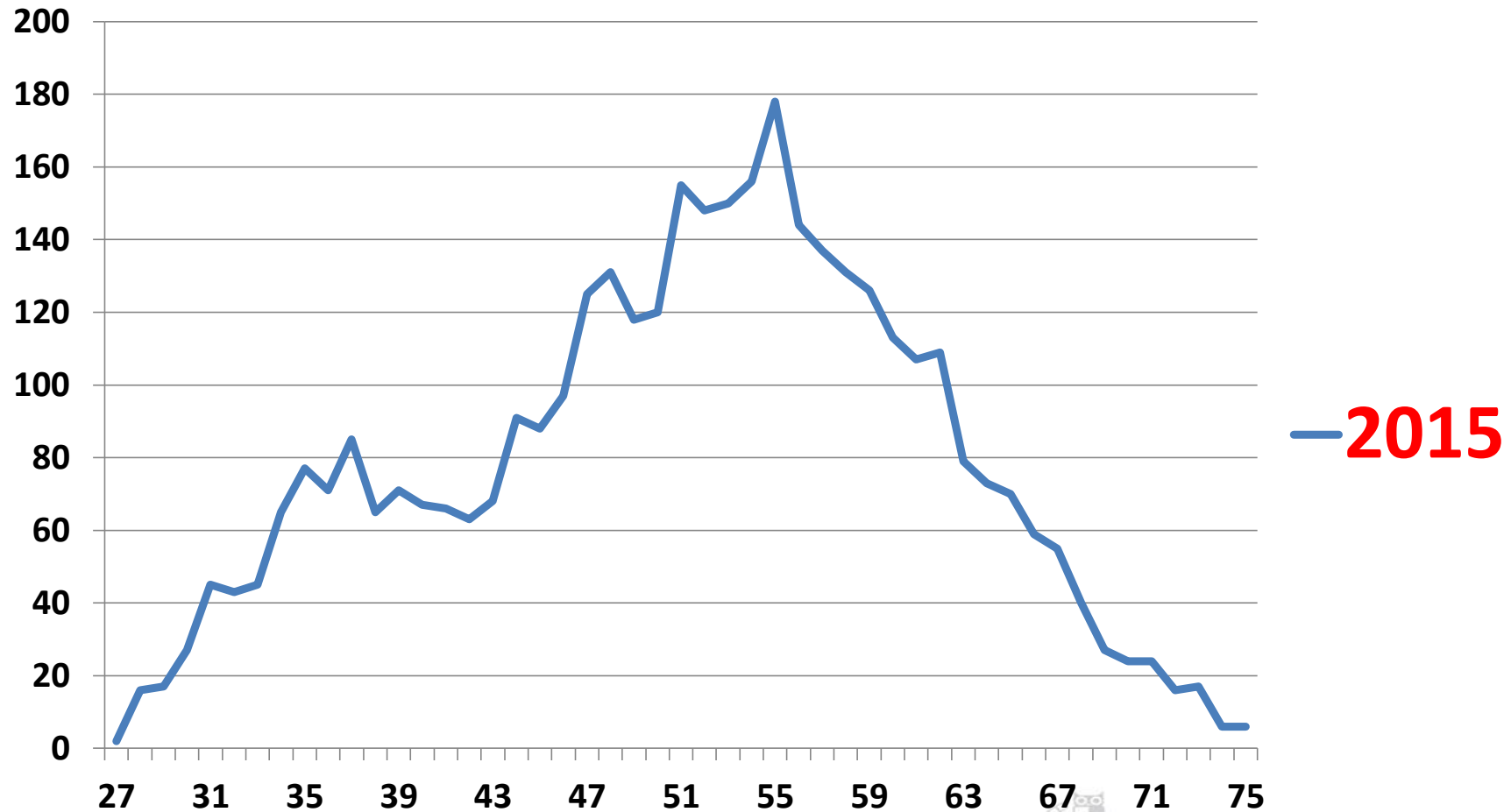
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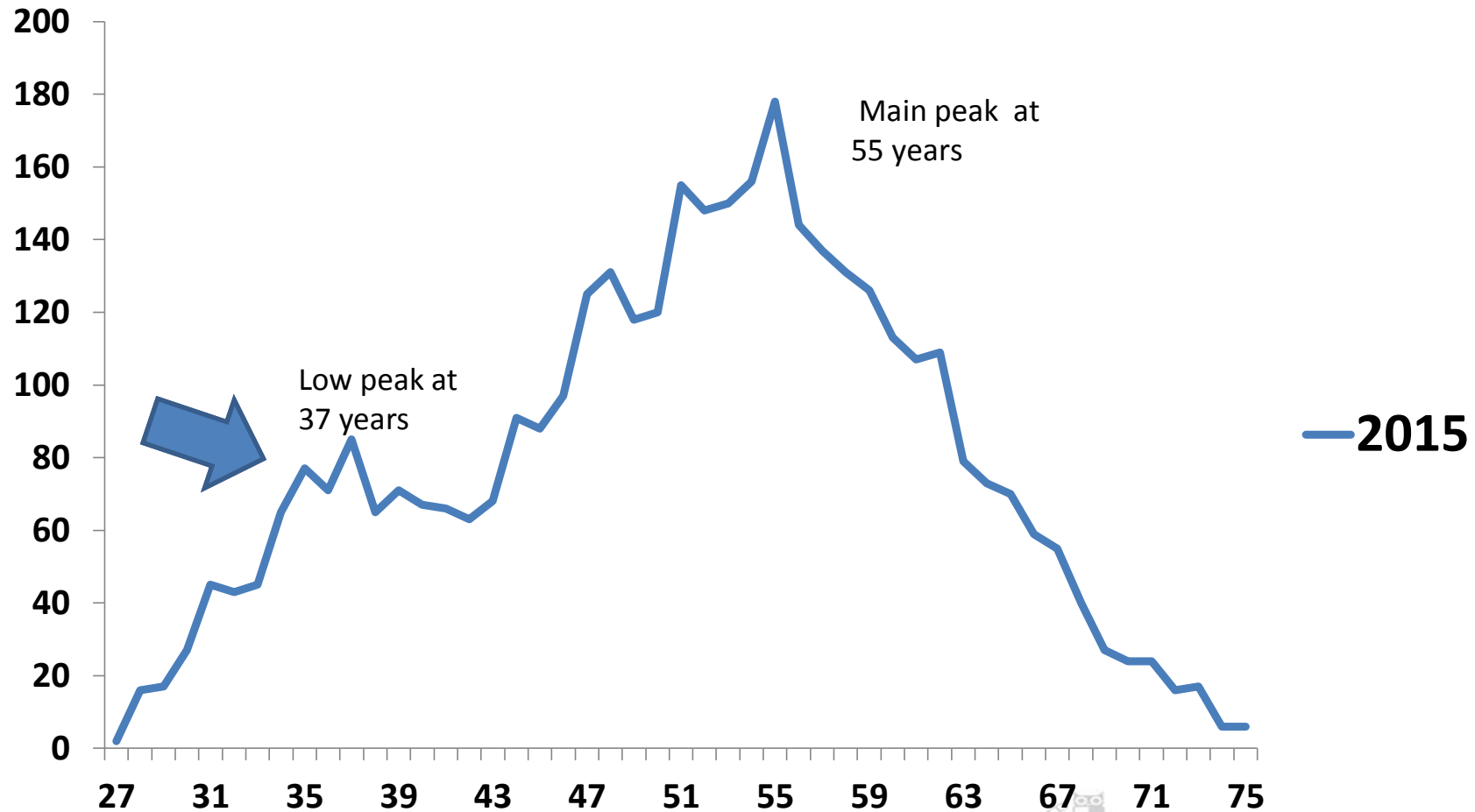
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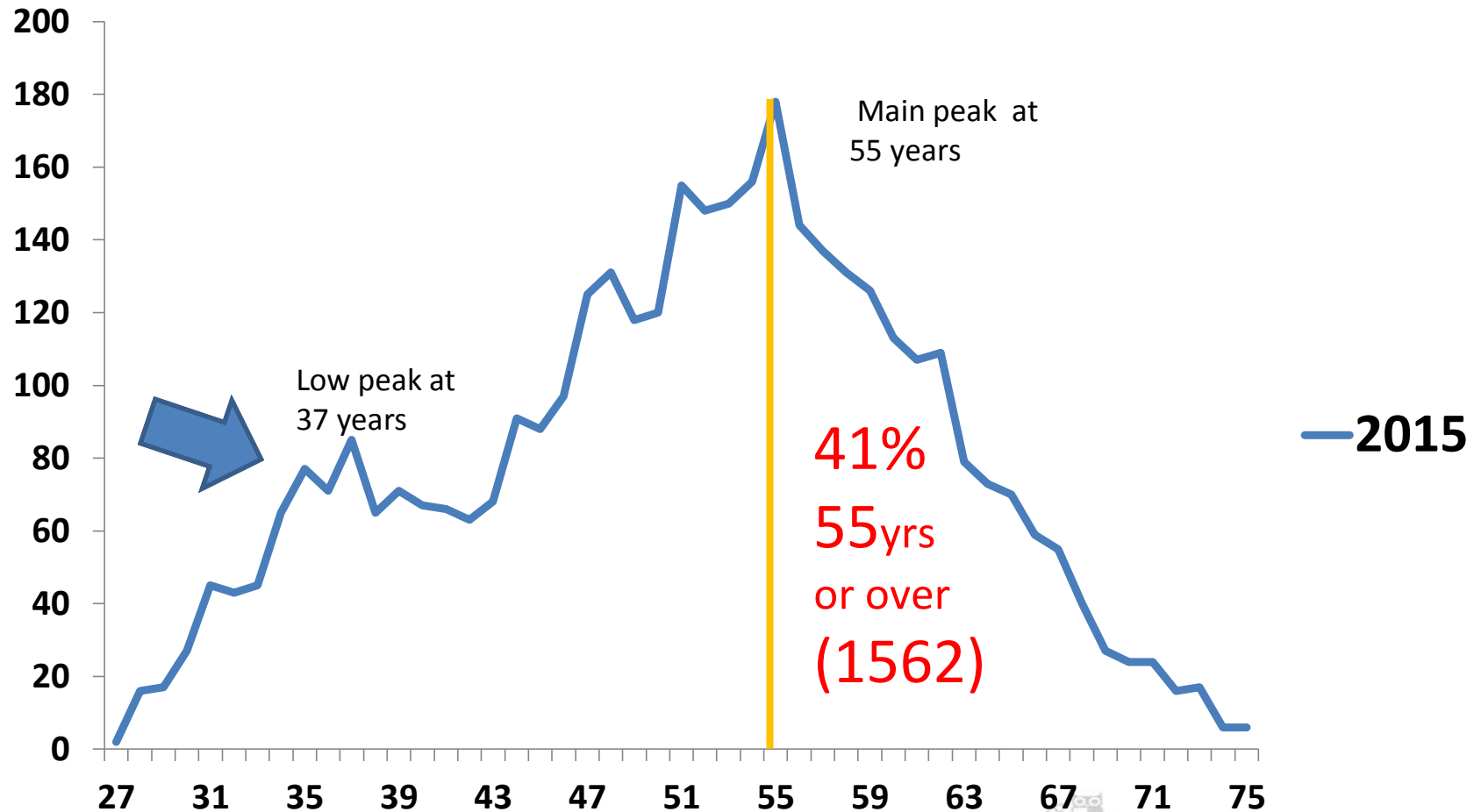
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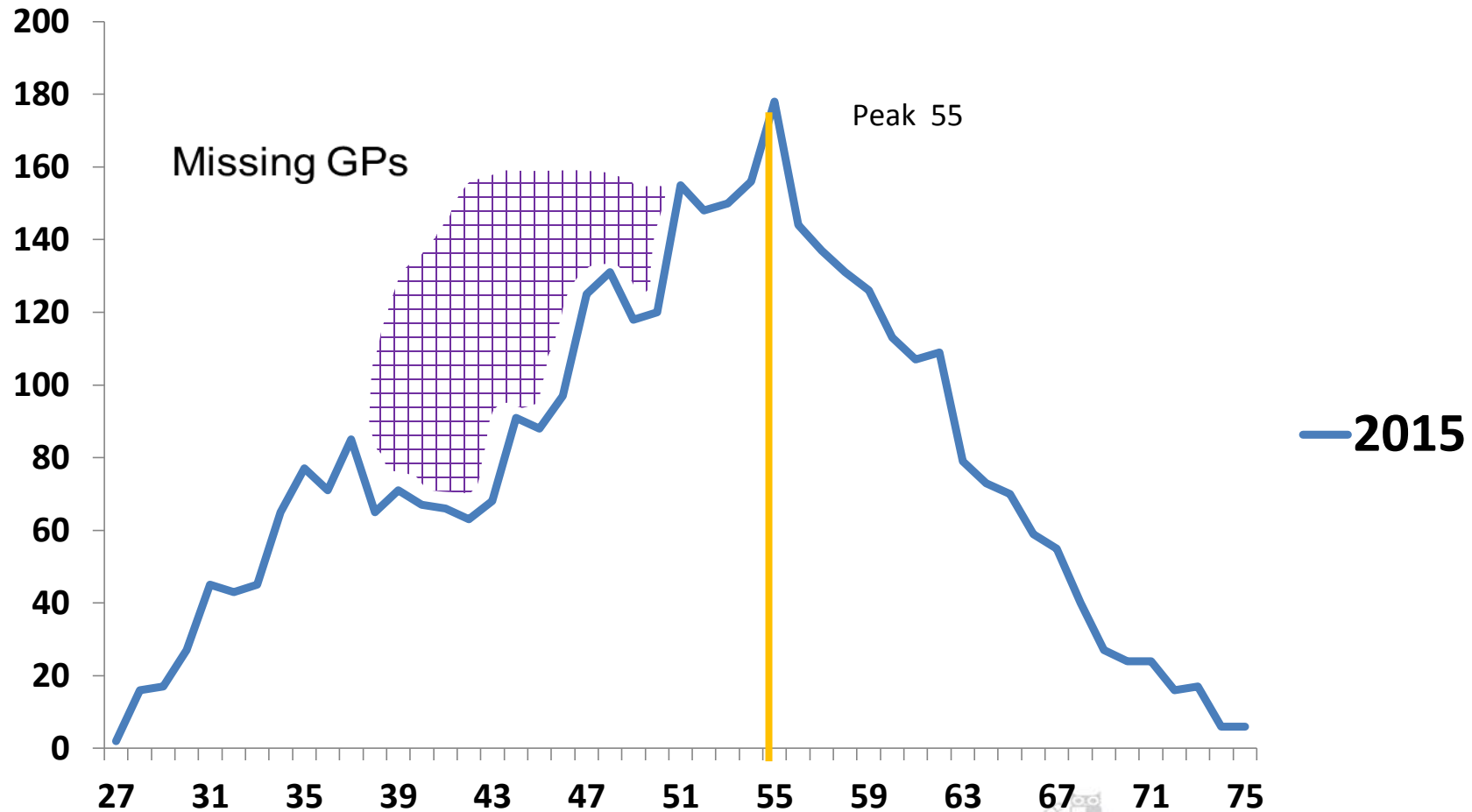


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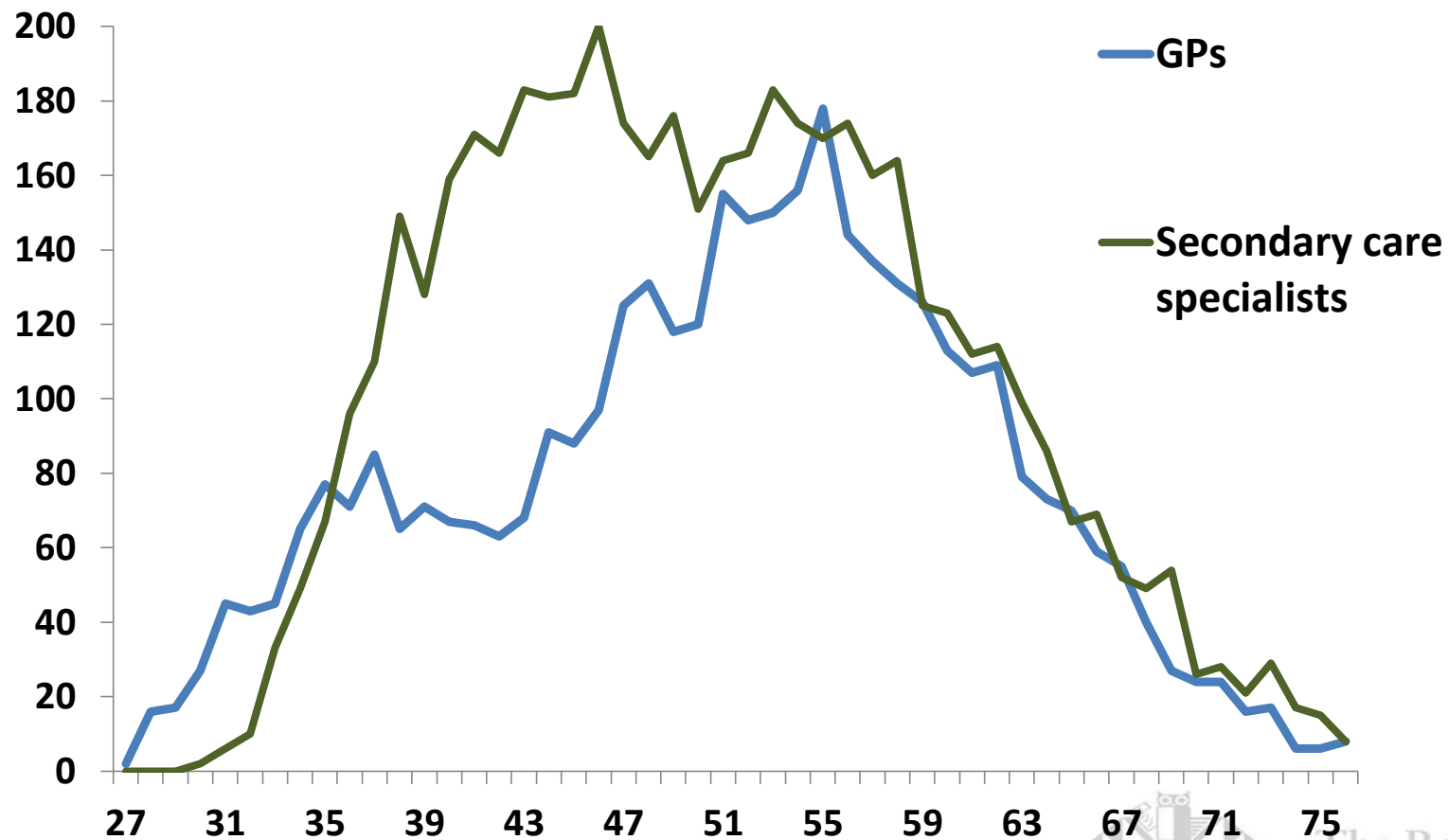
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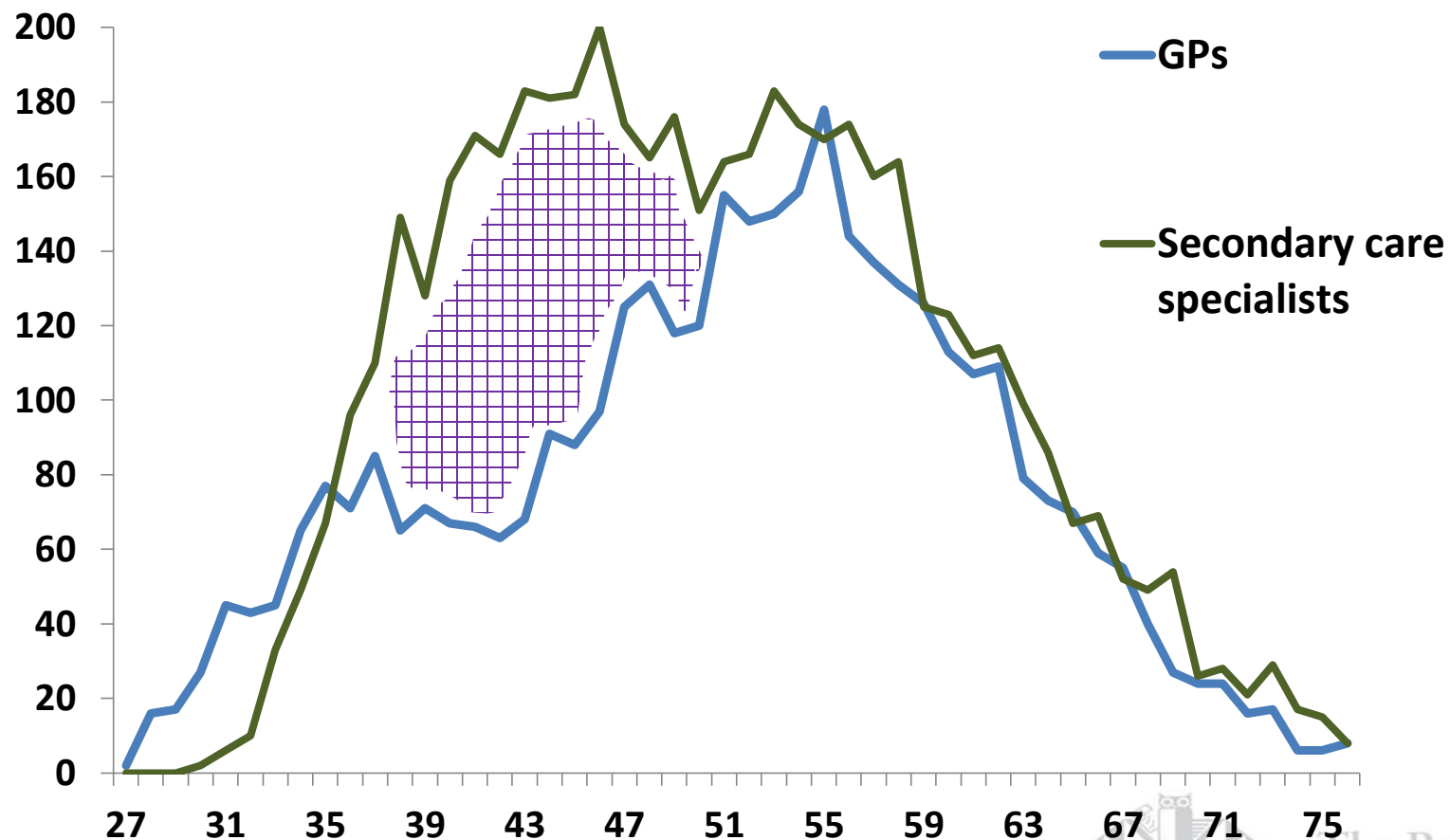
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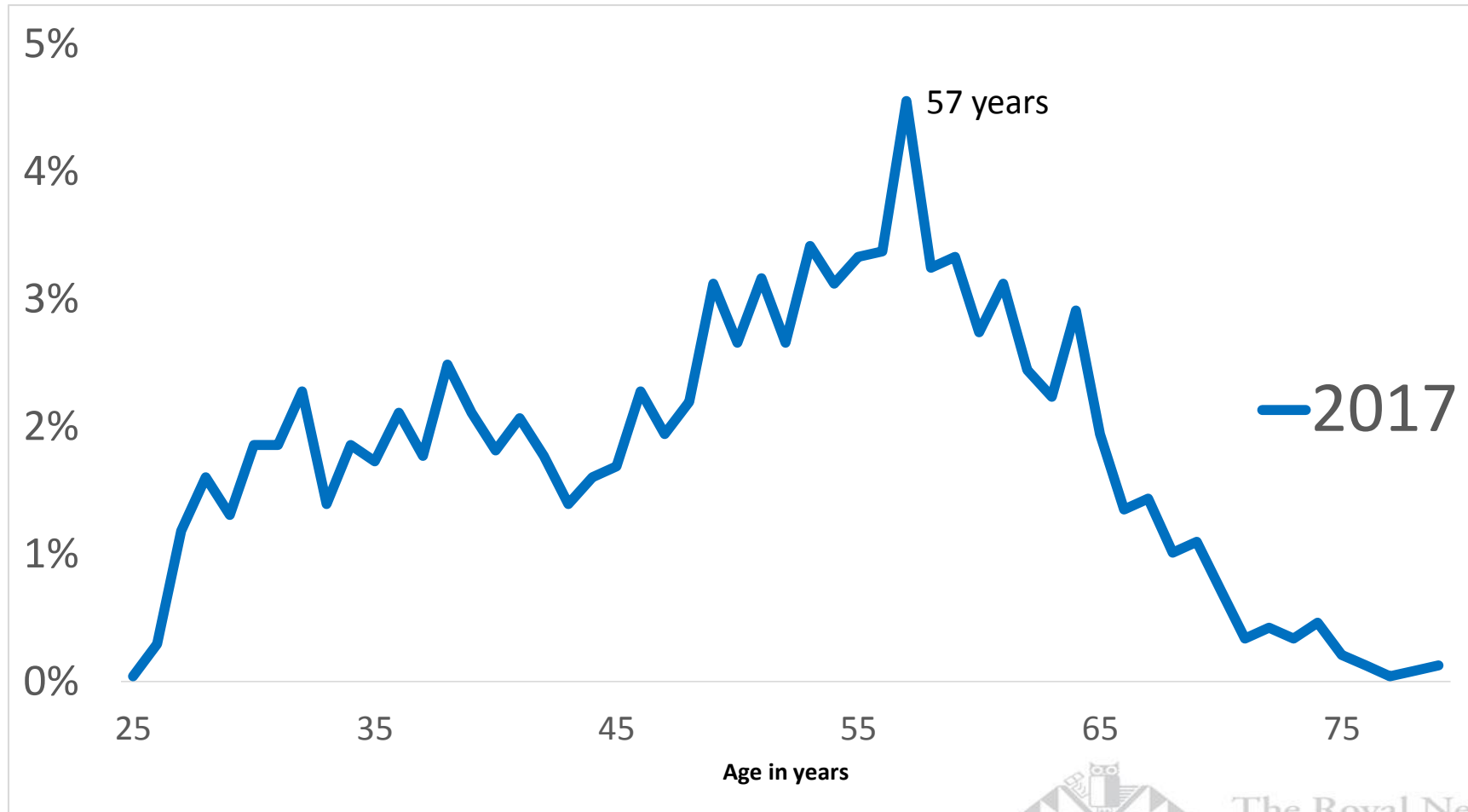
Comparison of the age profiles of GPs and secondary care specialists MCNZ 2015



Comparison of the age profiles of GPs and secondary care specialists MCNZ 2015

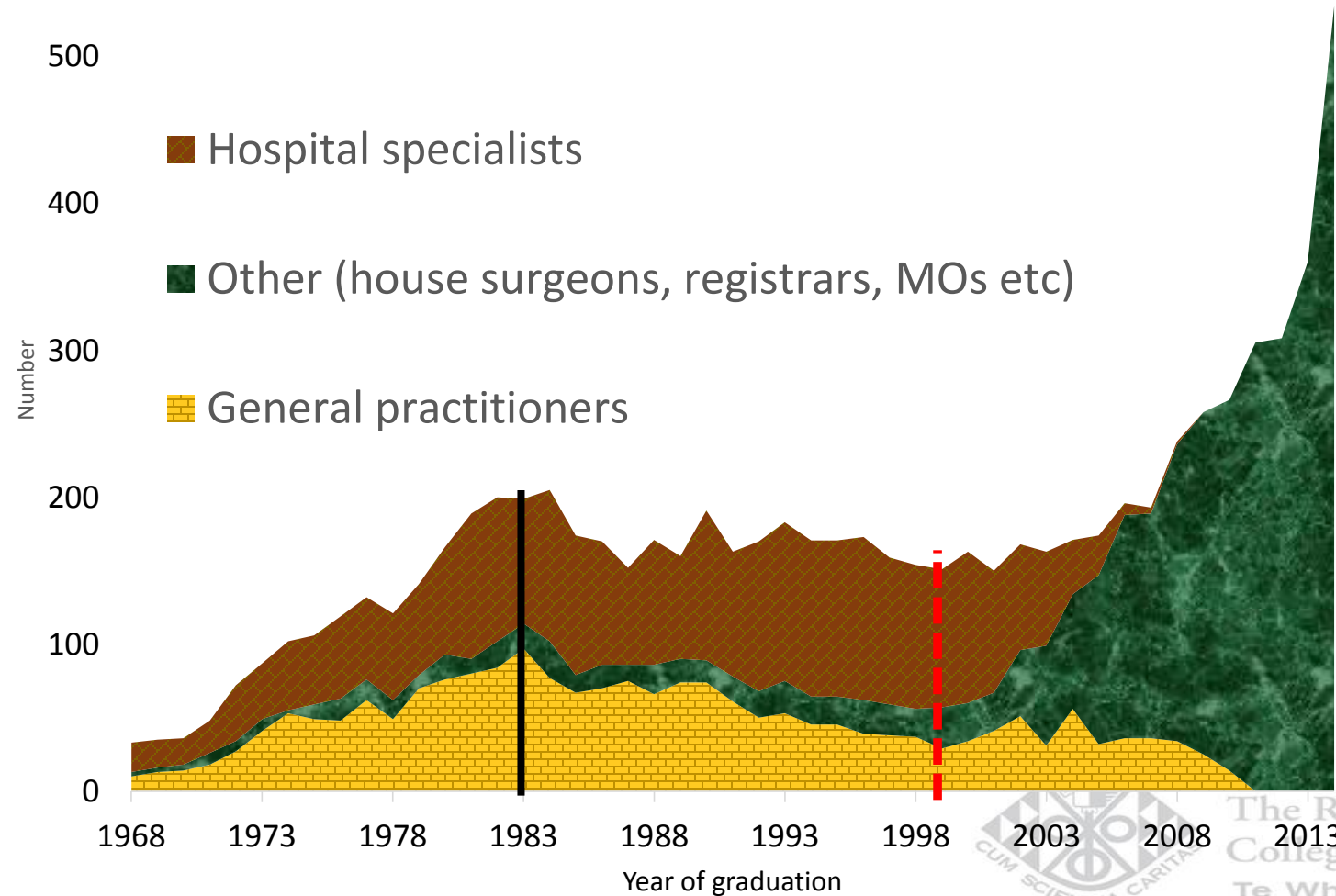


Age profile of respondents to RNZCGP survey



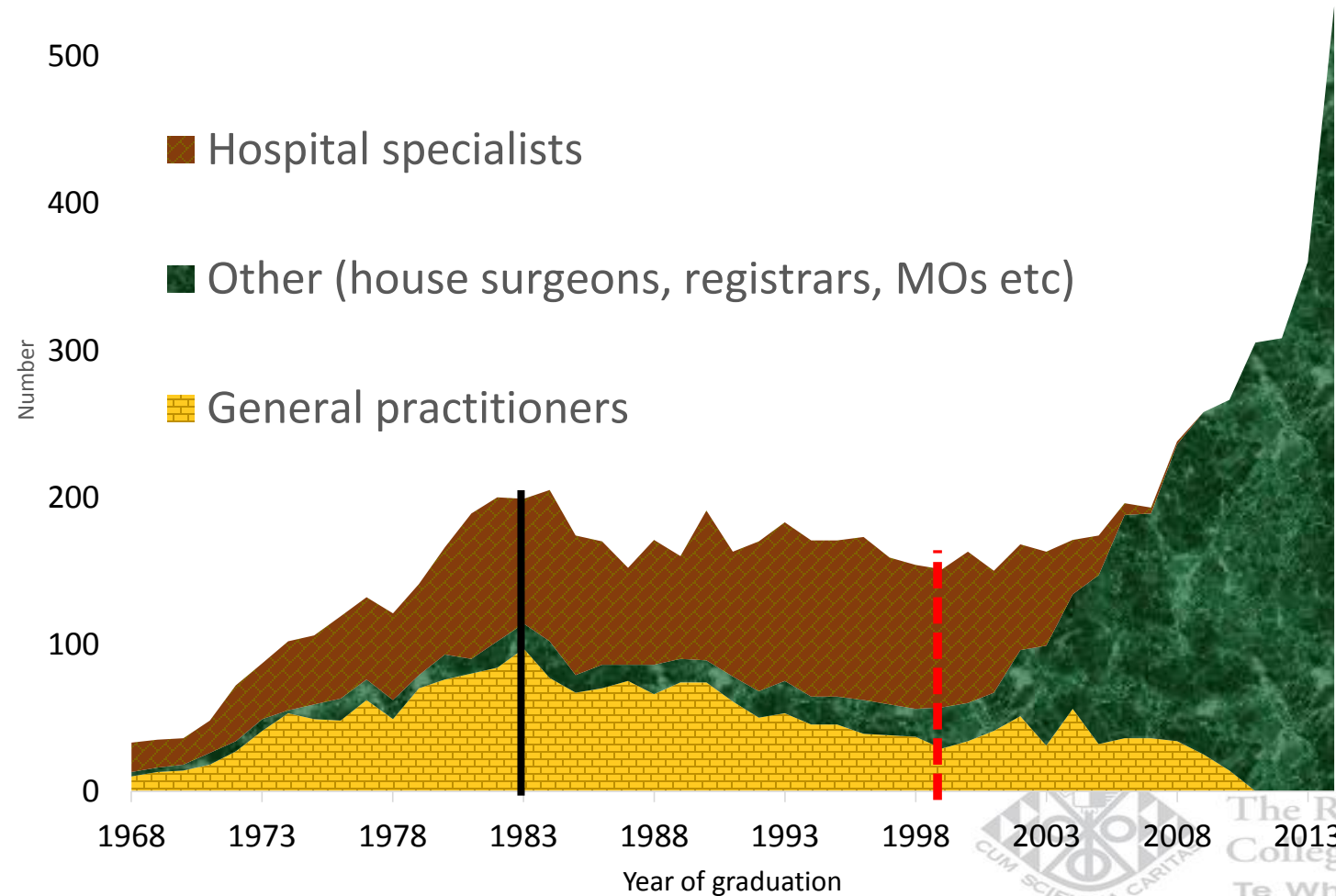
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2015 Snapshot of practicing NZ medical graduates, by year of graduation and "work role". MCNZ survey 2015



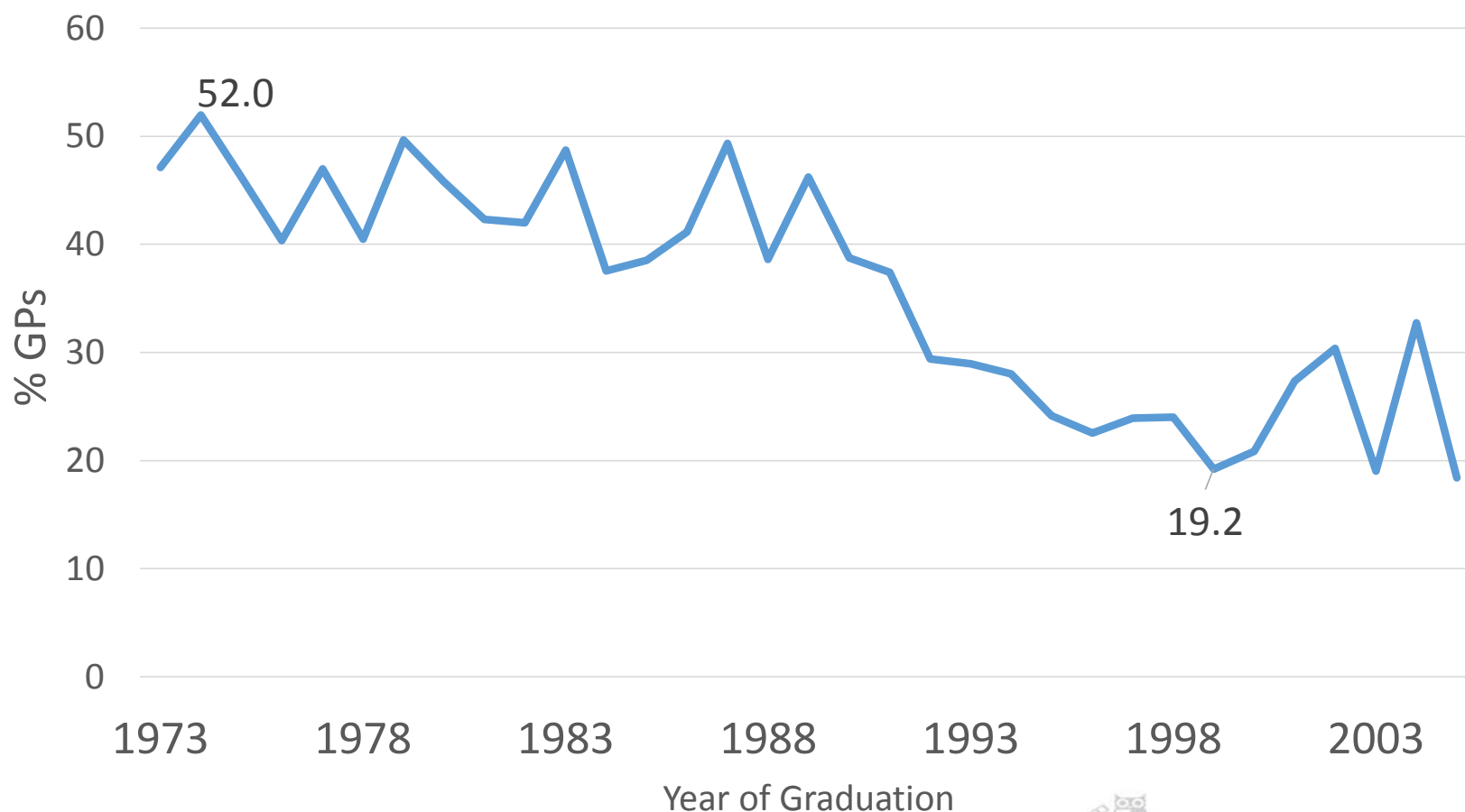
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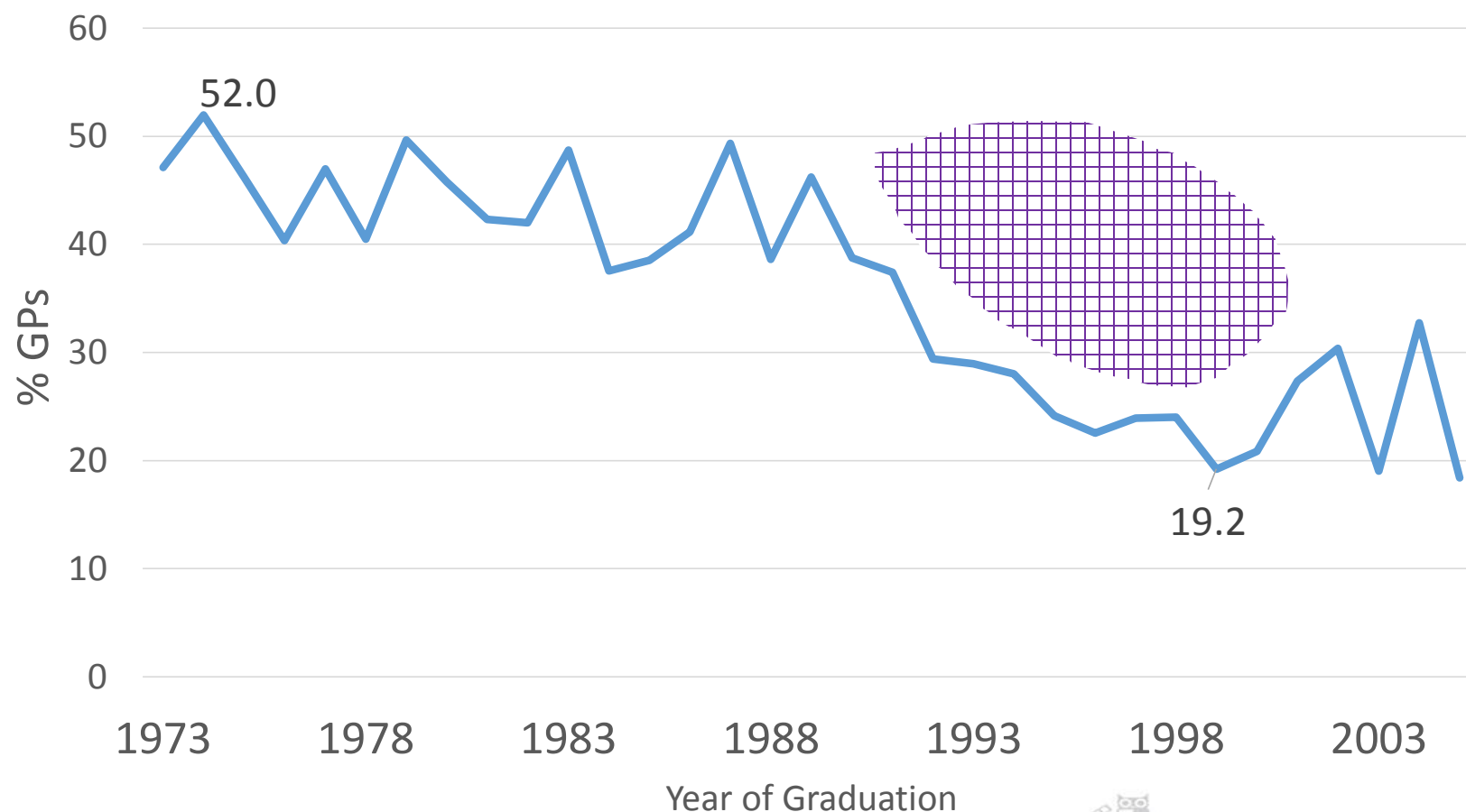
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GPs as a percentage of practicing NZ medical graduates by year of graduation (MCNZ 2015)



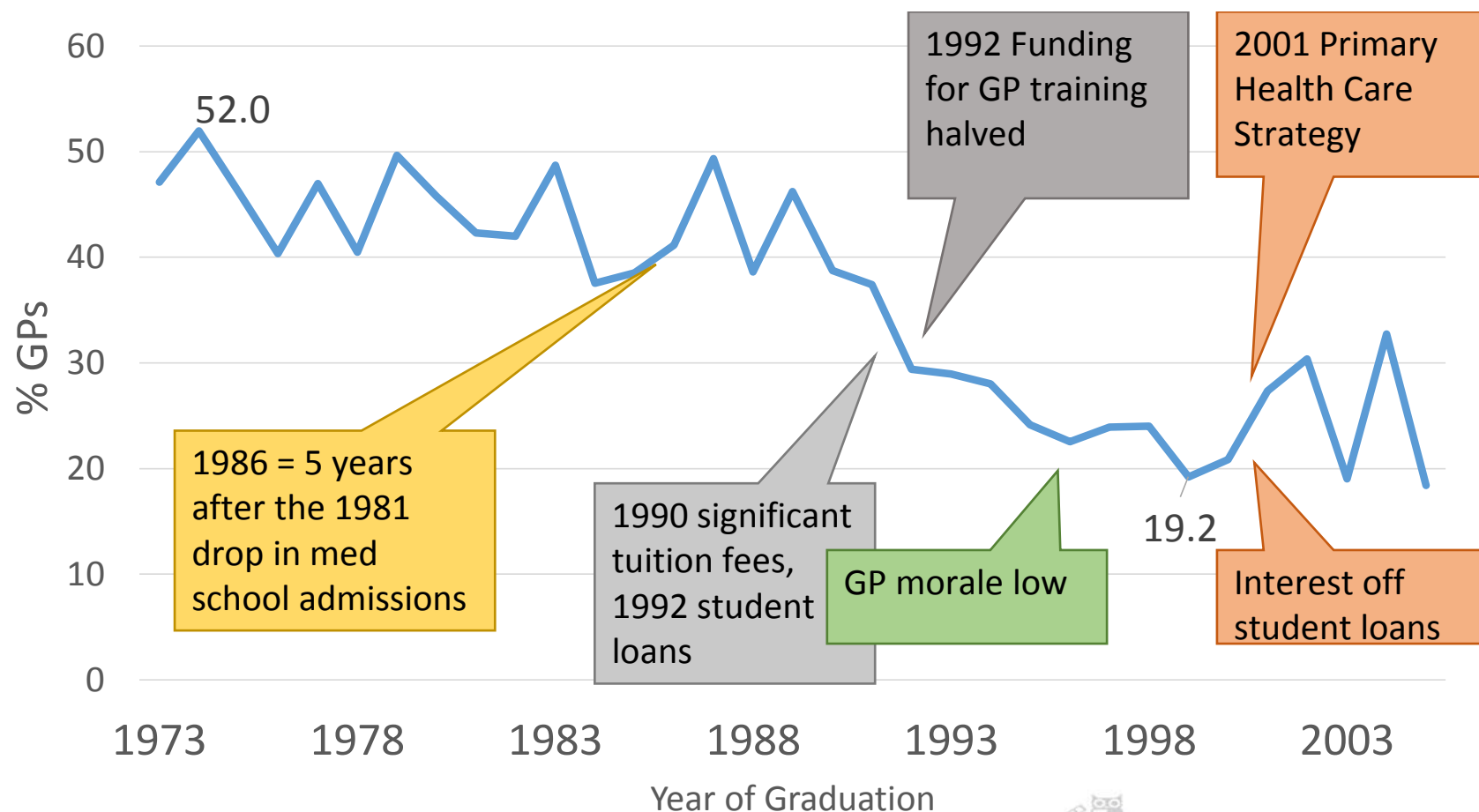
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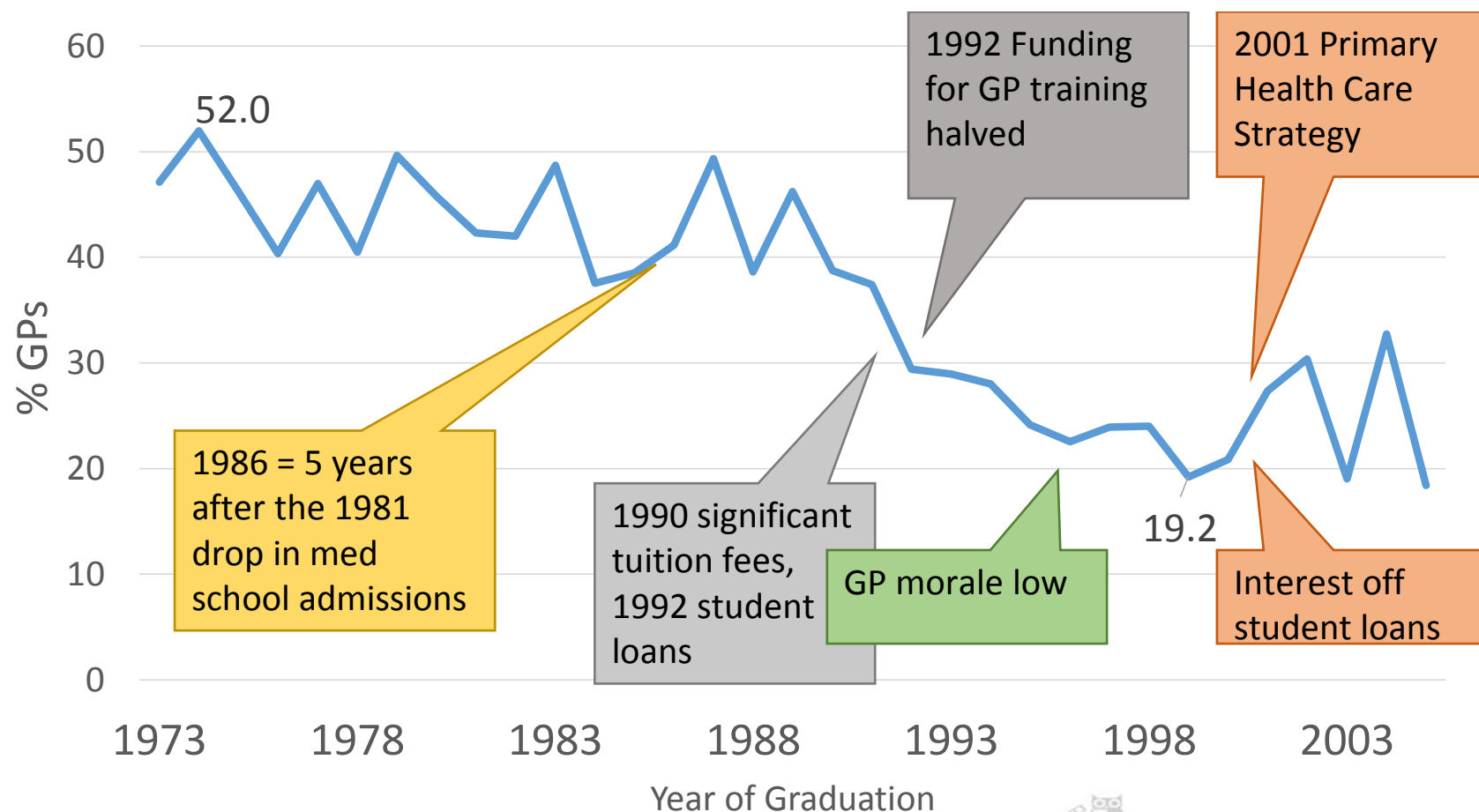
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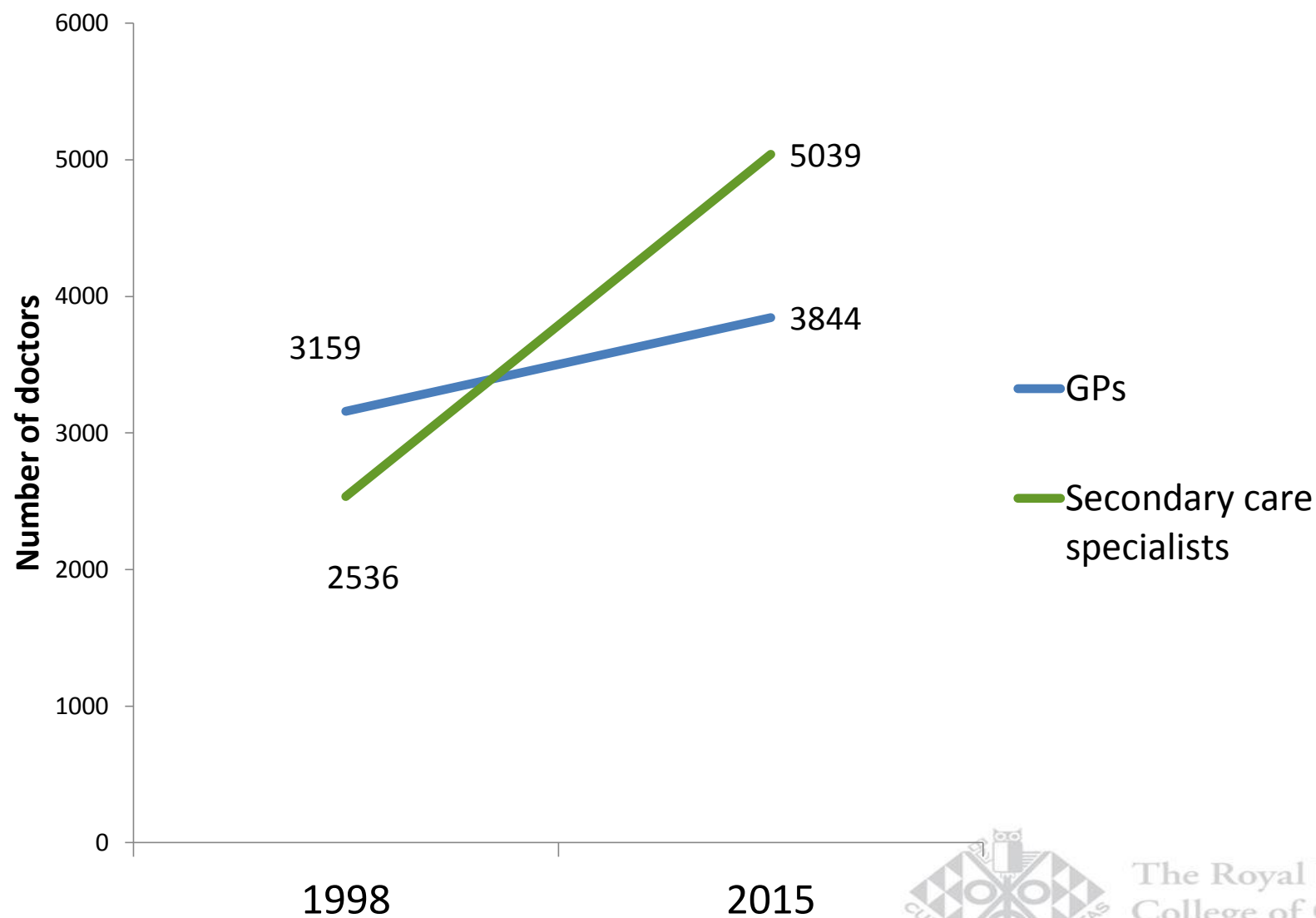
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Changes in the numbers of GPs and secondary care specialists between 1998 and 2015 (MCNZ survey data)



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Full Time Equivalents (FTEs)

- Head counts can be deceptive when looking at the supply of GPs
- Nearly half of GPs work less than 36 hours per week so it is important to take this into account by using FTEs rather than headcounts
- 2 FTE methods: Both assume a 40 hour week
 - Method 1: 60 hours = 1.5 FTEs (time trends)
 - Method 2: 60 hrs = 1 FTE (to compare regions so that where there are shortages and GPs are working excessive hours to meet demand this is not misinterpreted)



Average hours worked per week in general practice are decreasing

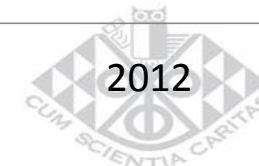
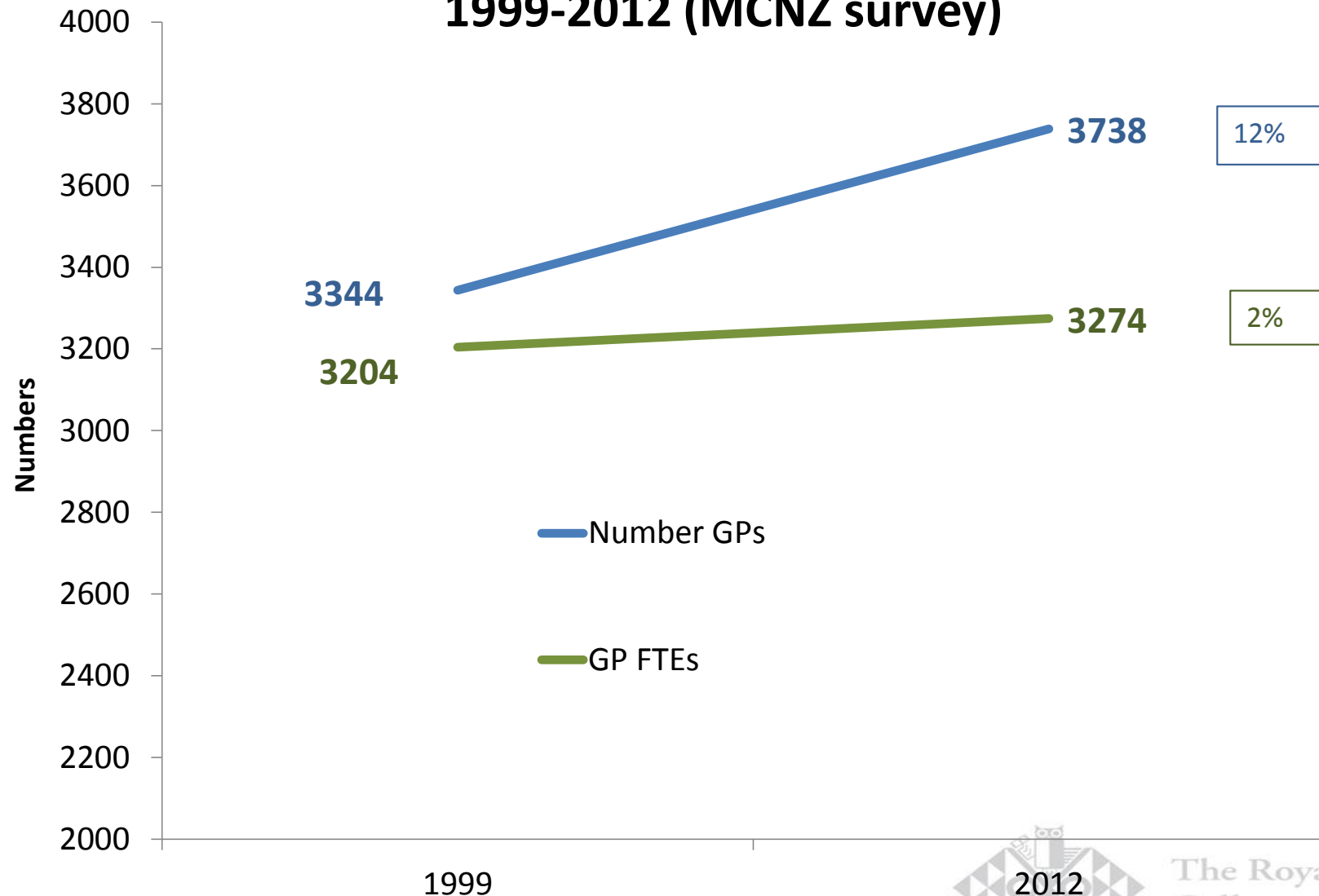
- 1999 39 hours per week
- 2012 35 hours per week



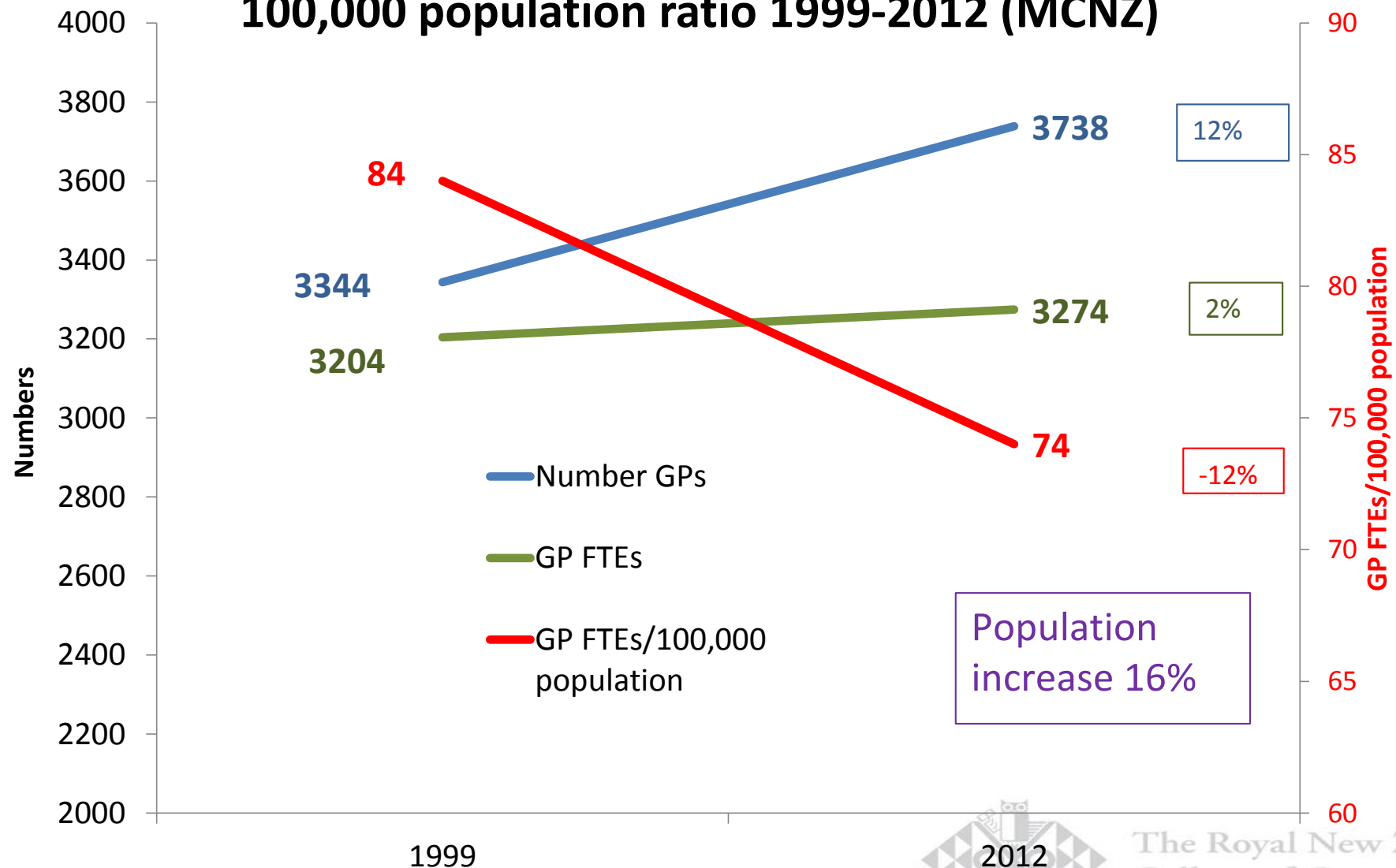
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Trends in GP numbers, GP FTEs and GP FTE

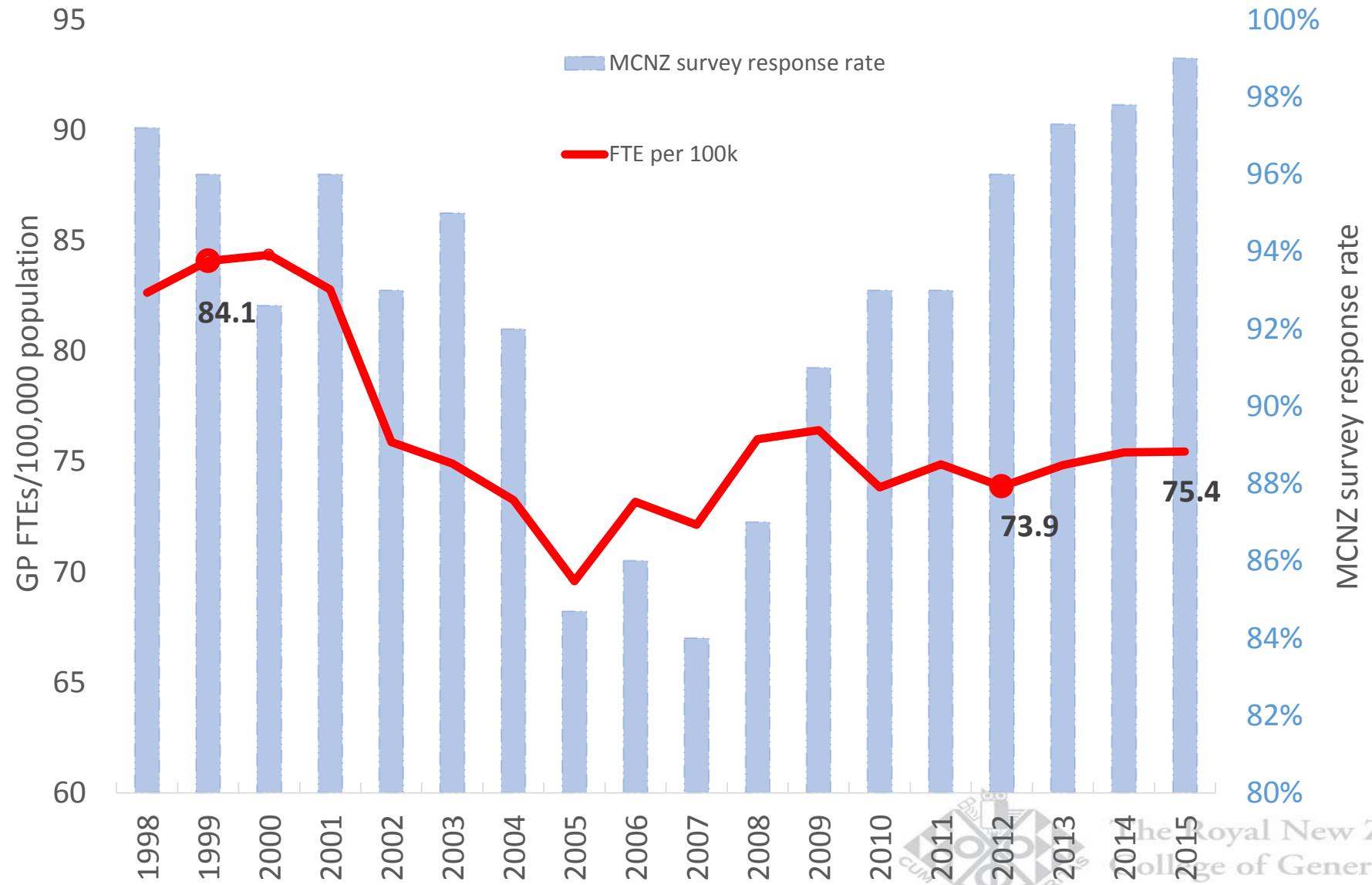
1999-2012 (MCNZ survey)



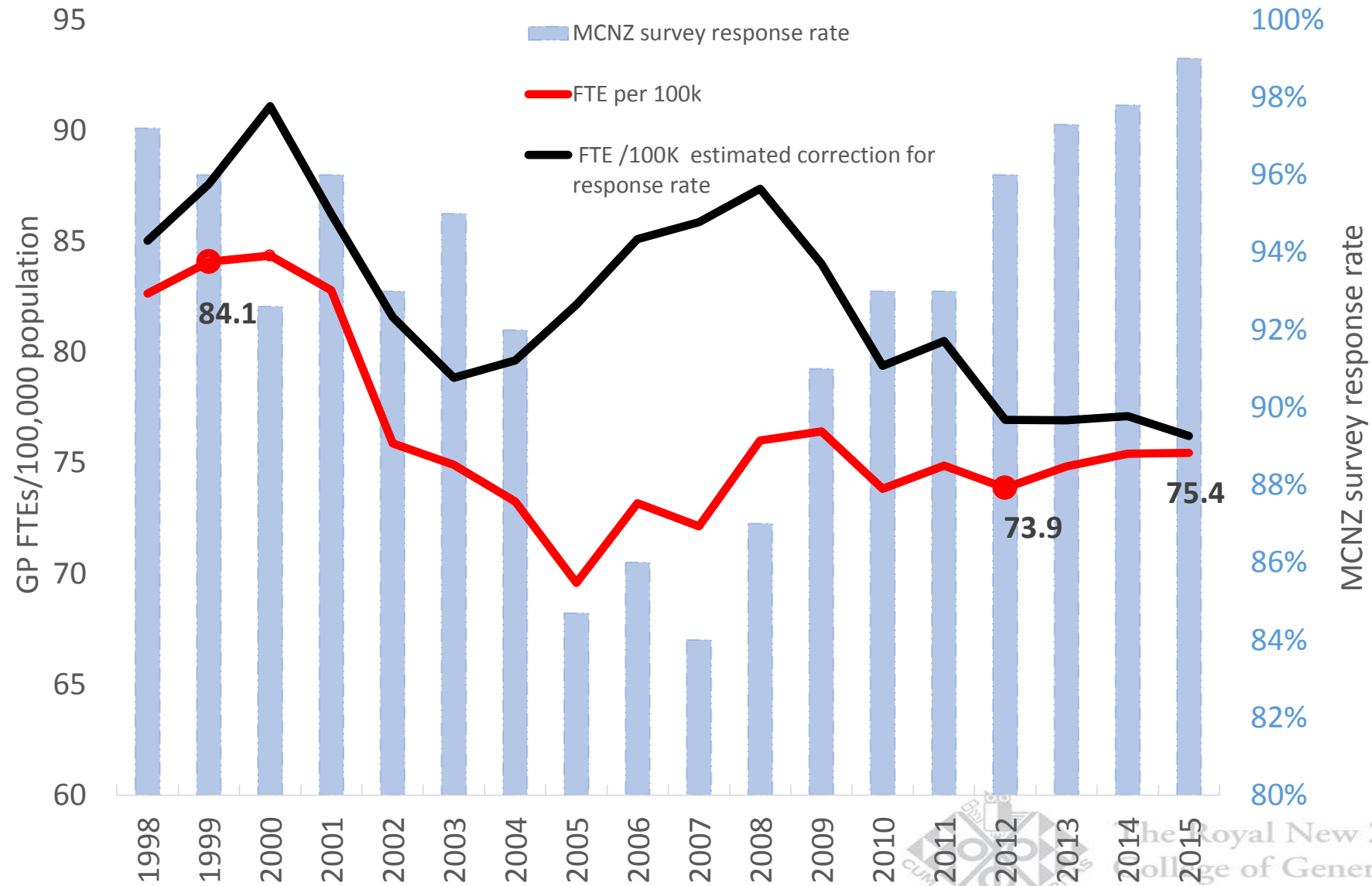
Trends in GP numbers, GP FTEs and GP FTE to 100,000 population ratio 1999-2012 (MCNZ)



GP FTE/ population ratio time trends MCNZ survey



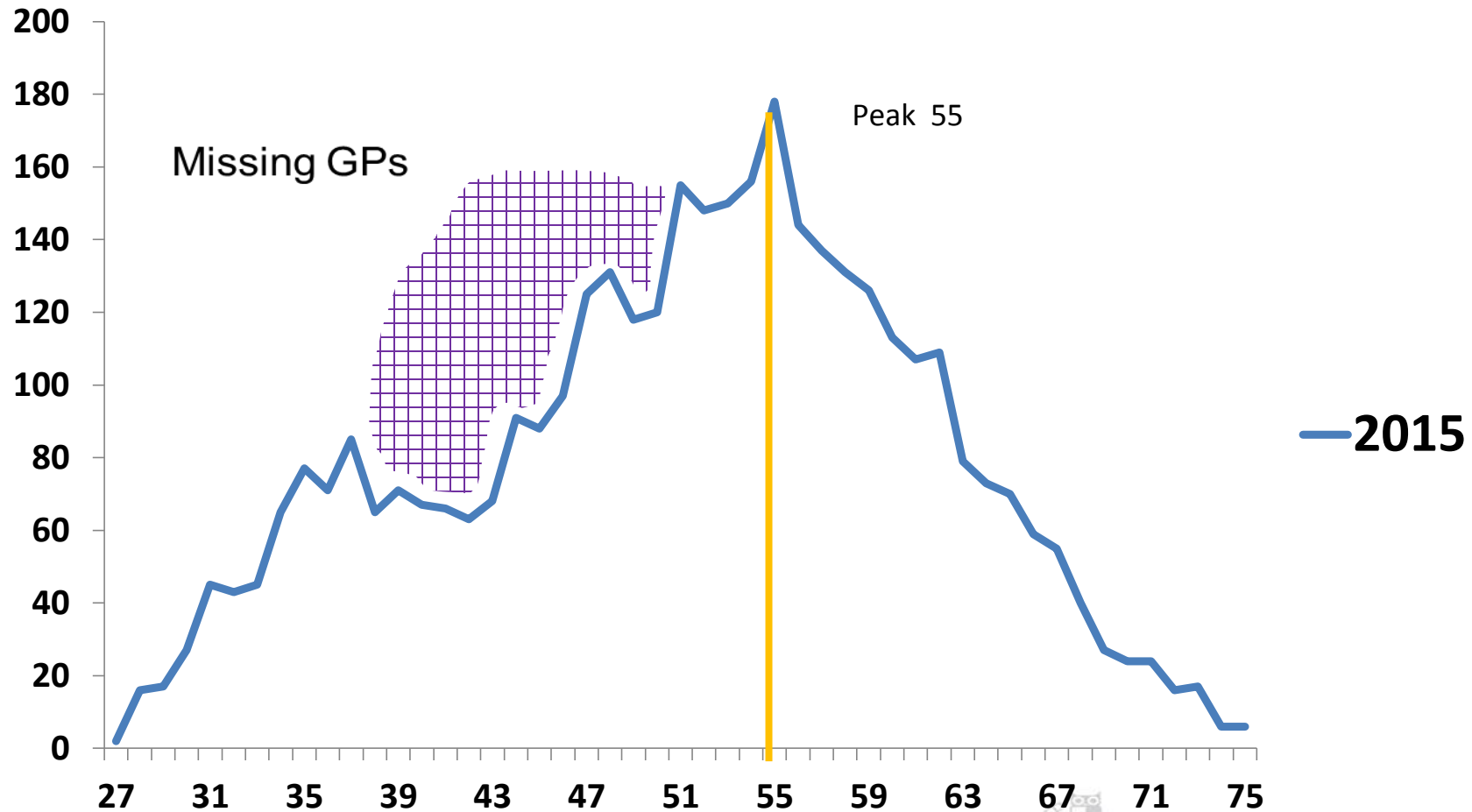
GP FTE/ population ratio time trends MCNZ survey



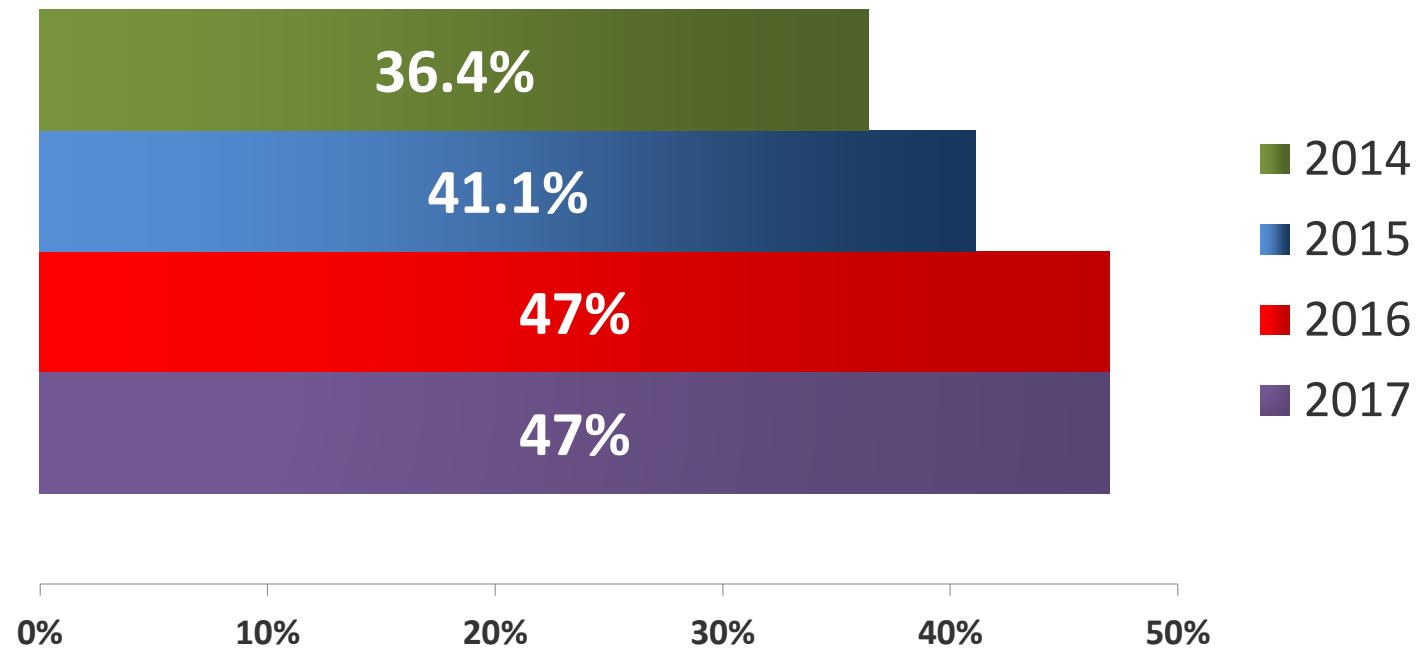
Retirement intentions of GPs



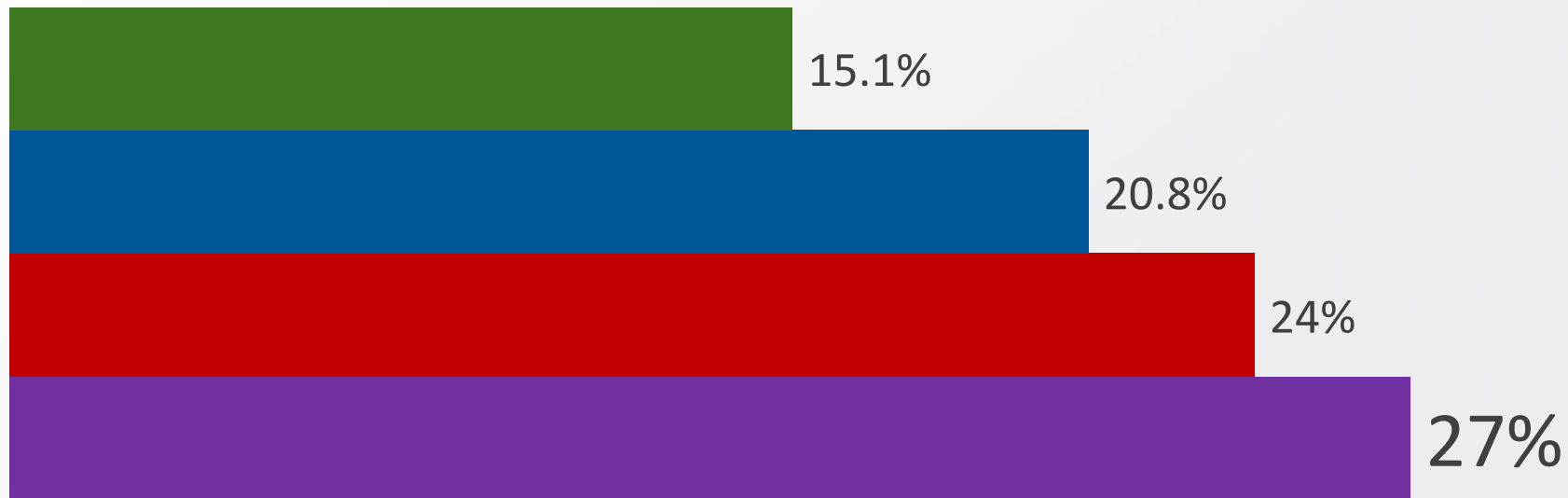
Age profile of NZ GPs (MCNZ data)



**Proportion of GPs intending to retire in the next 10 years:
Comparison of 2014 - 2017 RNZCGP survey results (2016
weighted result)**



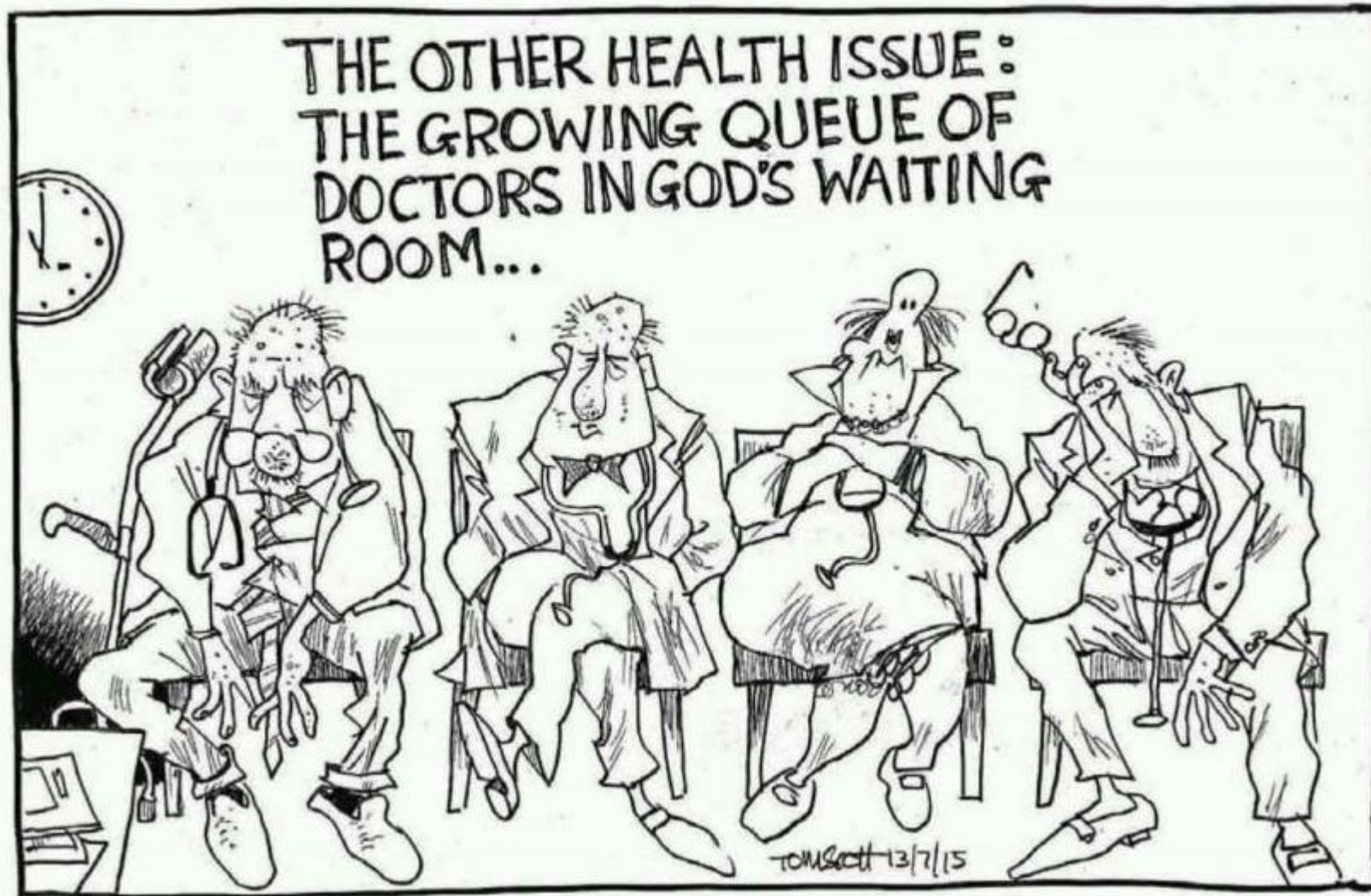
Proportion of respondents intending to retire in 1-5 years: 2014-2017 RNZCGP workforce surveys



■ 2014 ■ 2015 ■ 2016 ■ 2017



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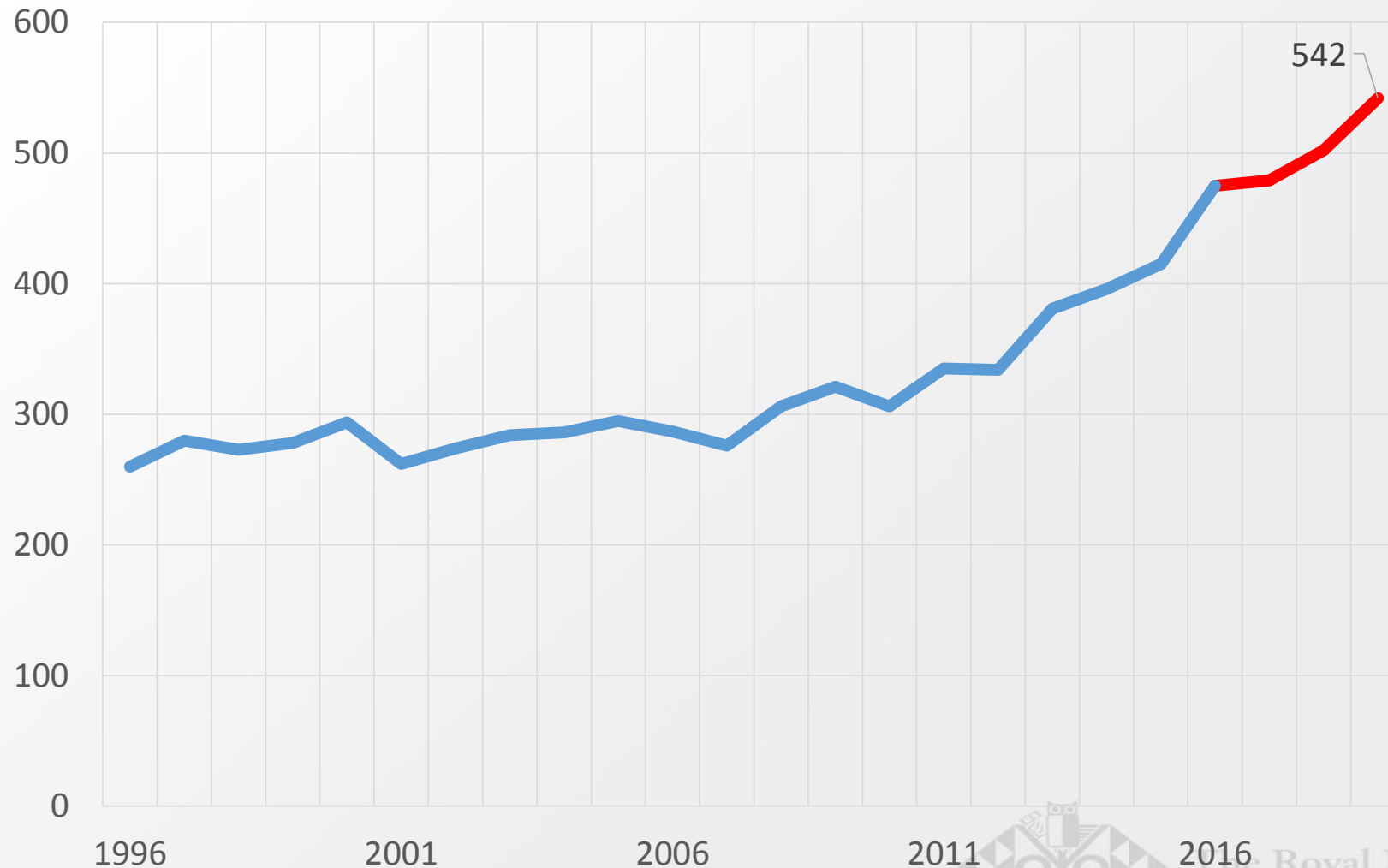
Medical Student Numbers



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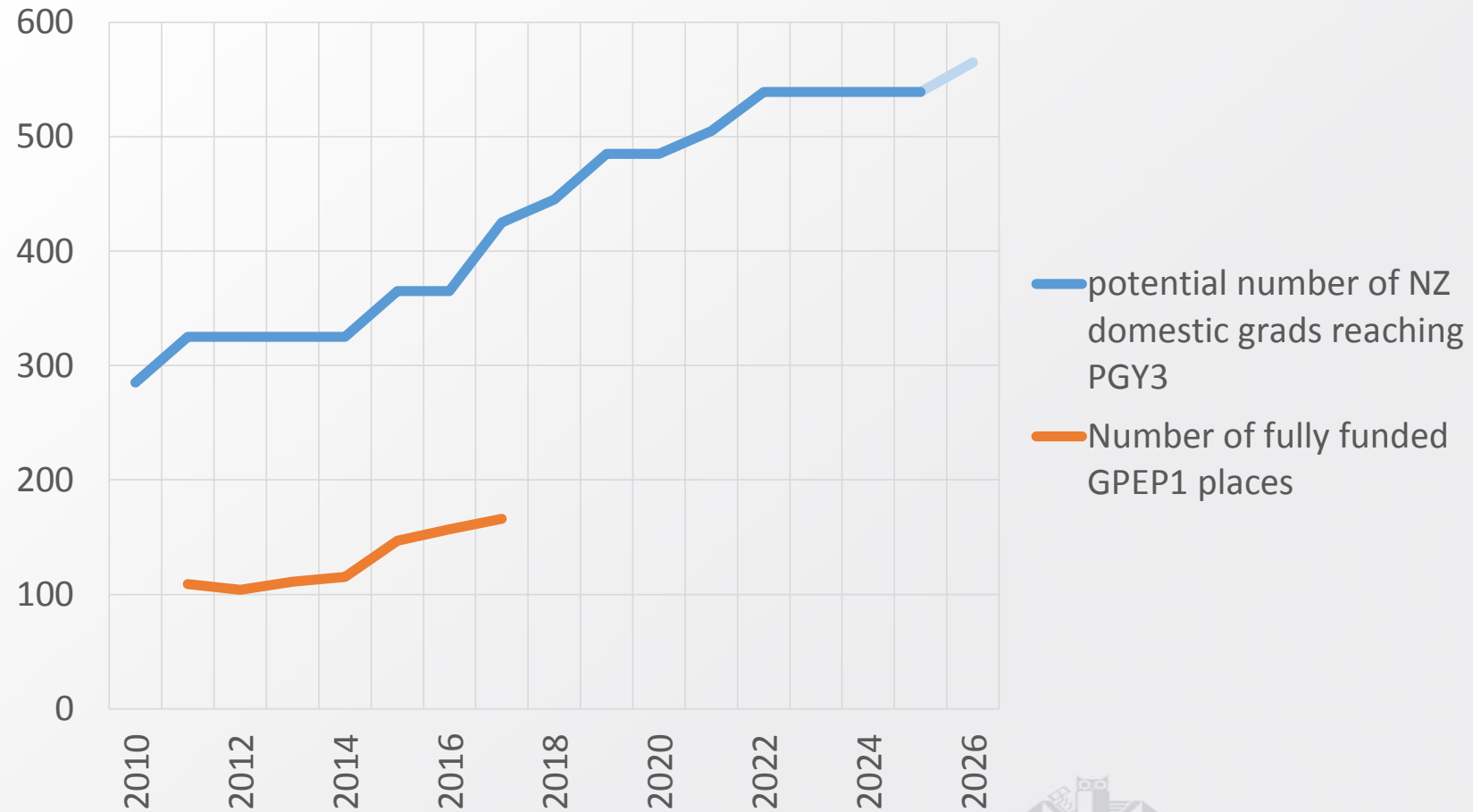
NZ Domestic Medical Graduates

(Projected from 2016) source <http://www.medicaldeans.org.au/wp-content/uploads/Table4.pdf>
Medical Deans Australia and New Zealand 2016 students statistics.



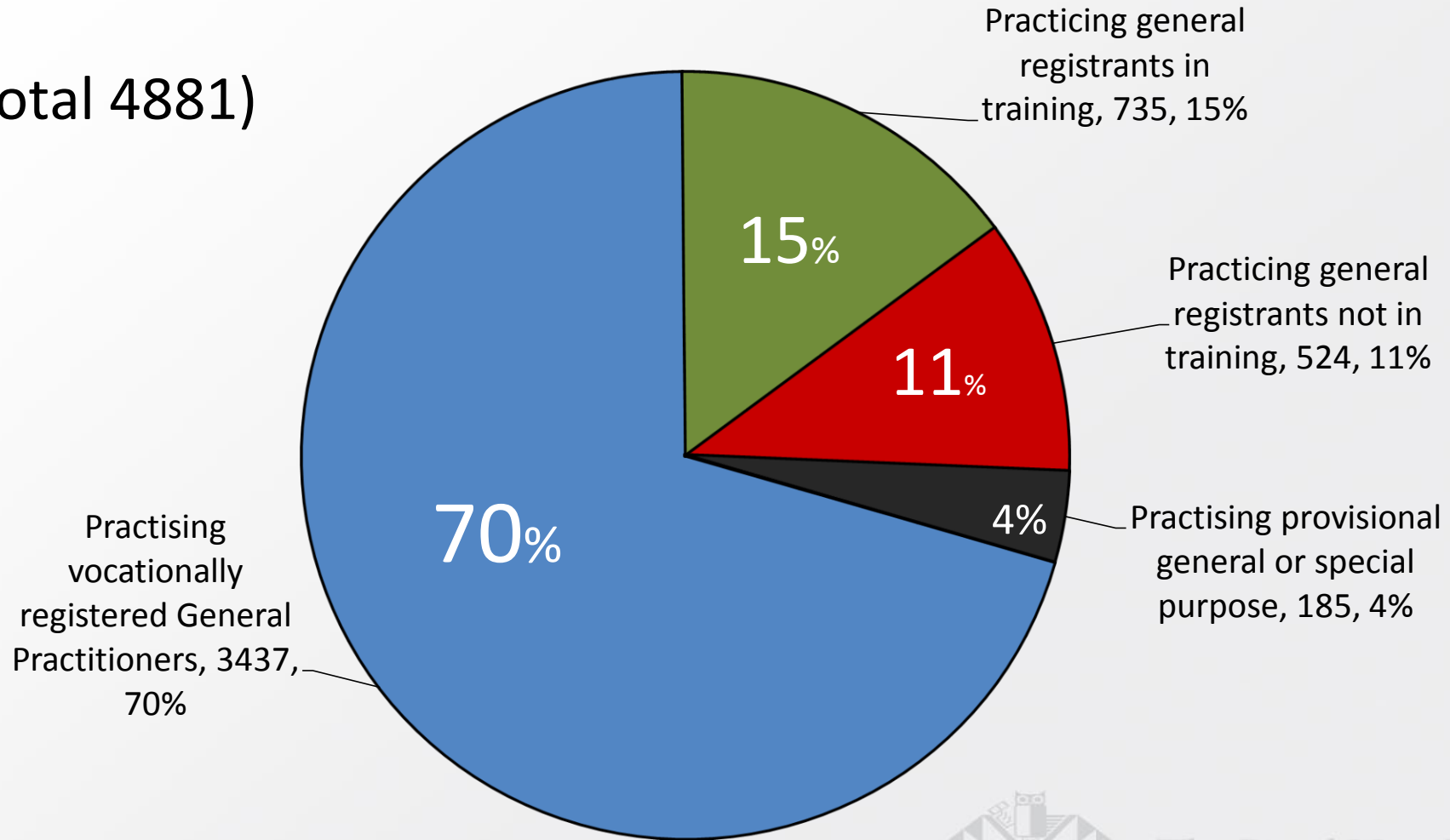
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Comparison of the increases in domestic medical graduate numbers and fully funded GPEP 1 places



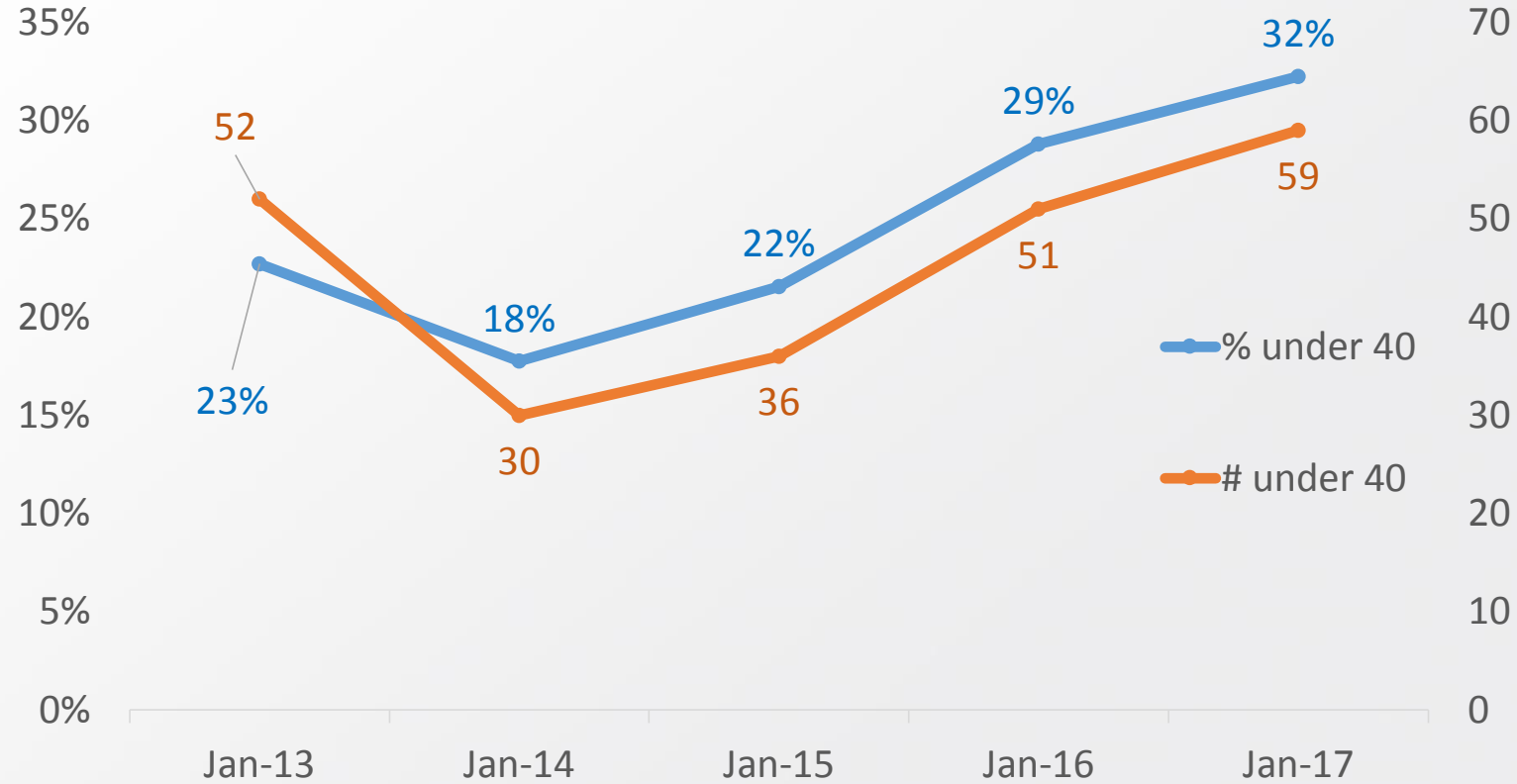
Doctors working in general practice by registration status MCNZ registration data June 2017

(Total 4881)



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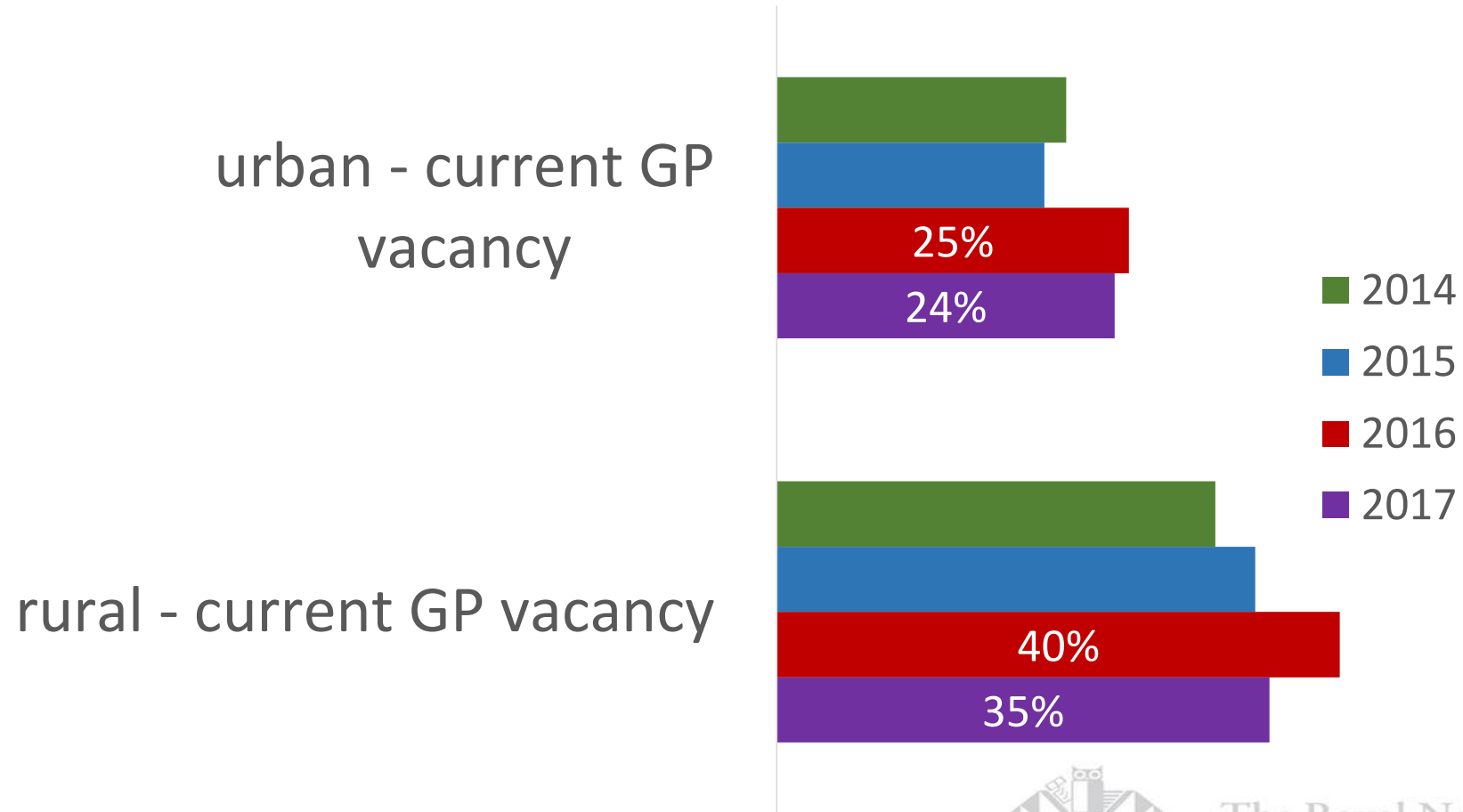
Number and % of non training NZ graduates working in general practice under general registration who are aged under 40



Where are GP shortages worst?

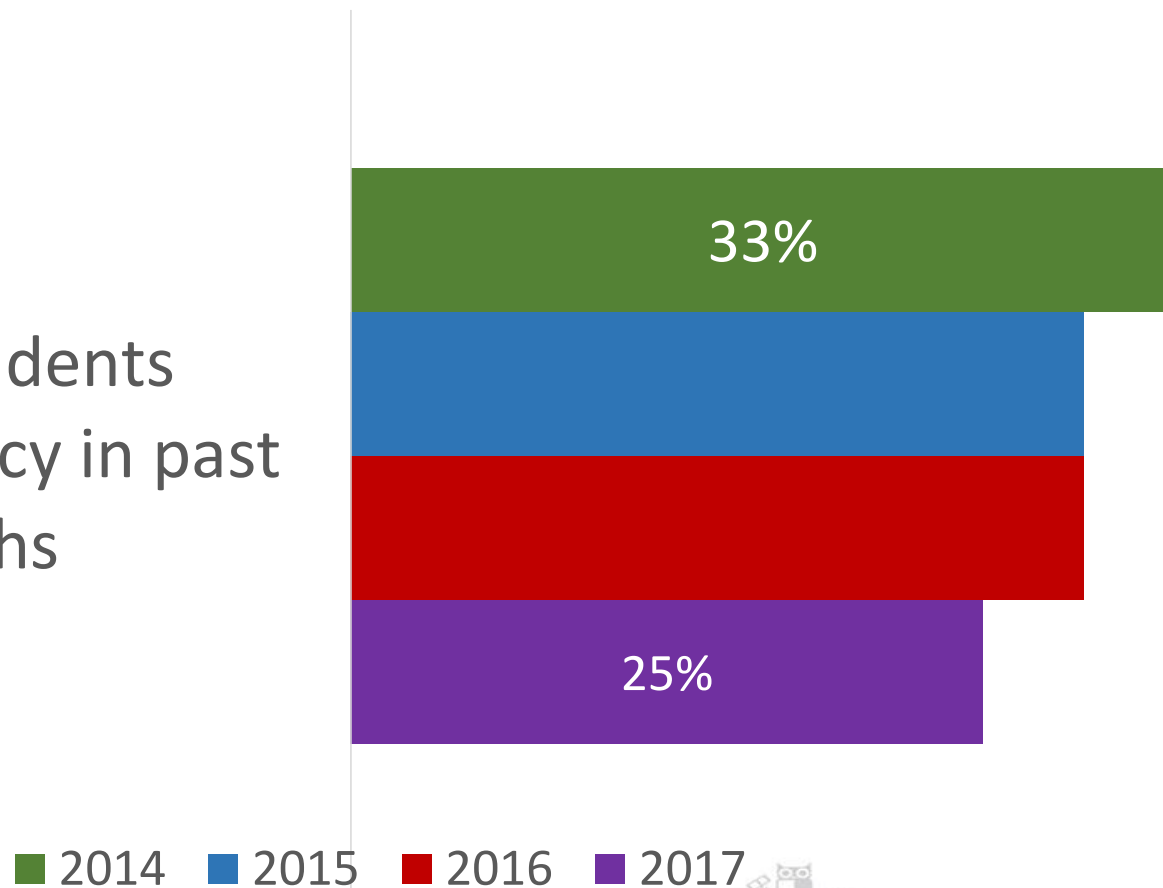


Changes in the percentage of respondents reporting a current vacancy in their practice for one or more GPs (RNZCGP)



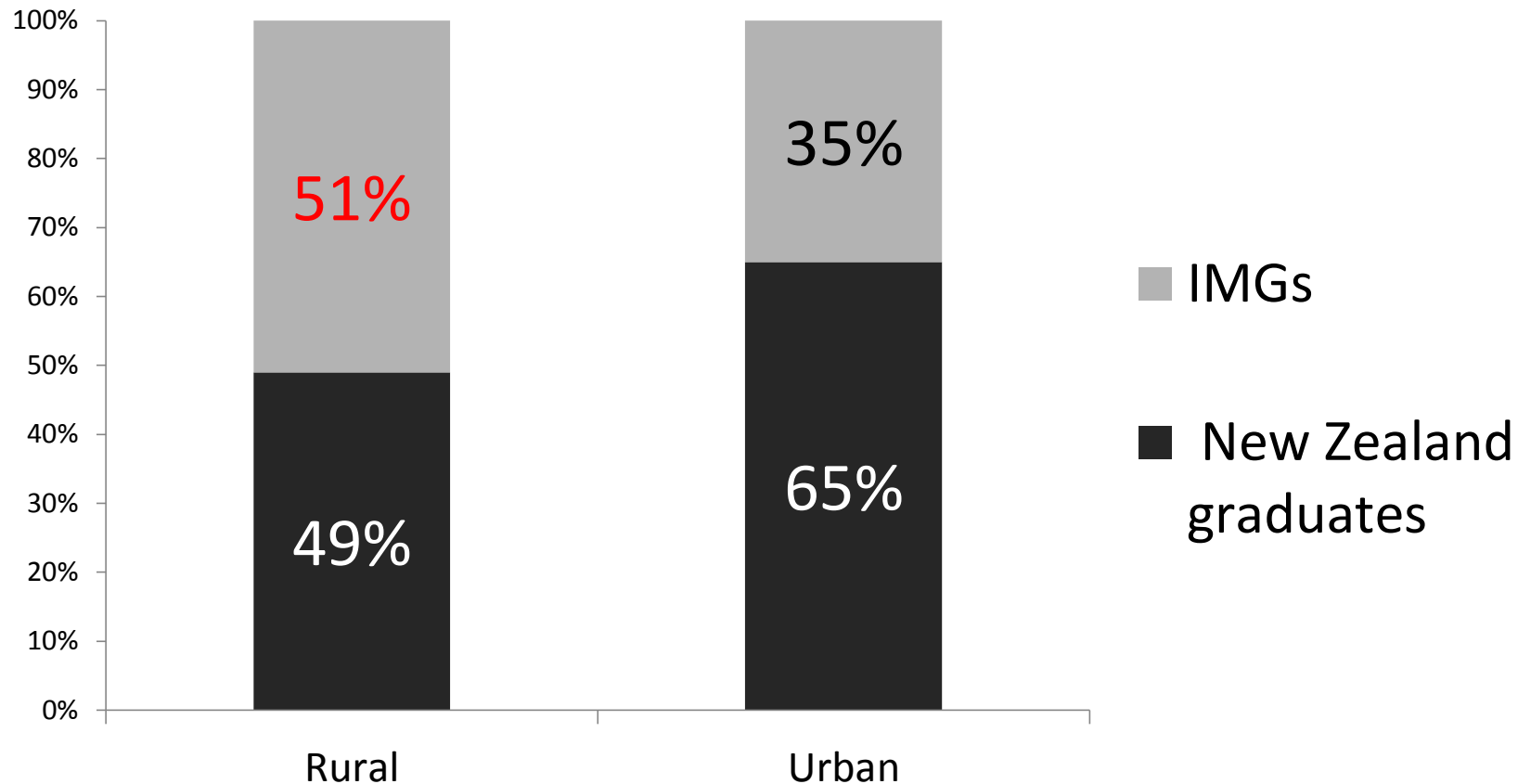
The rural vacancy situation is not improving

Rural respondents
without a vacancy in past
12 months

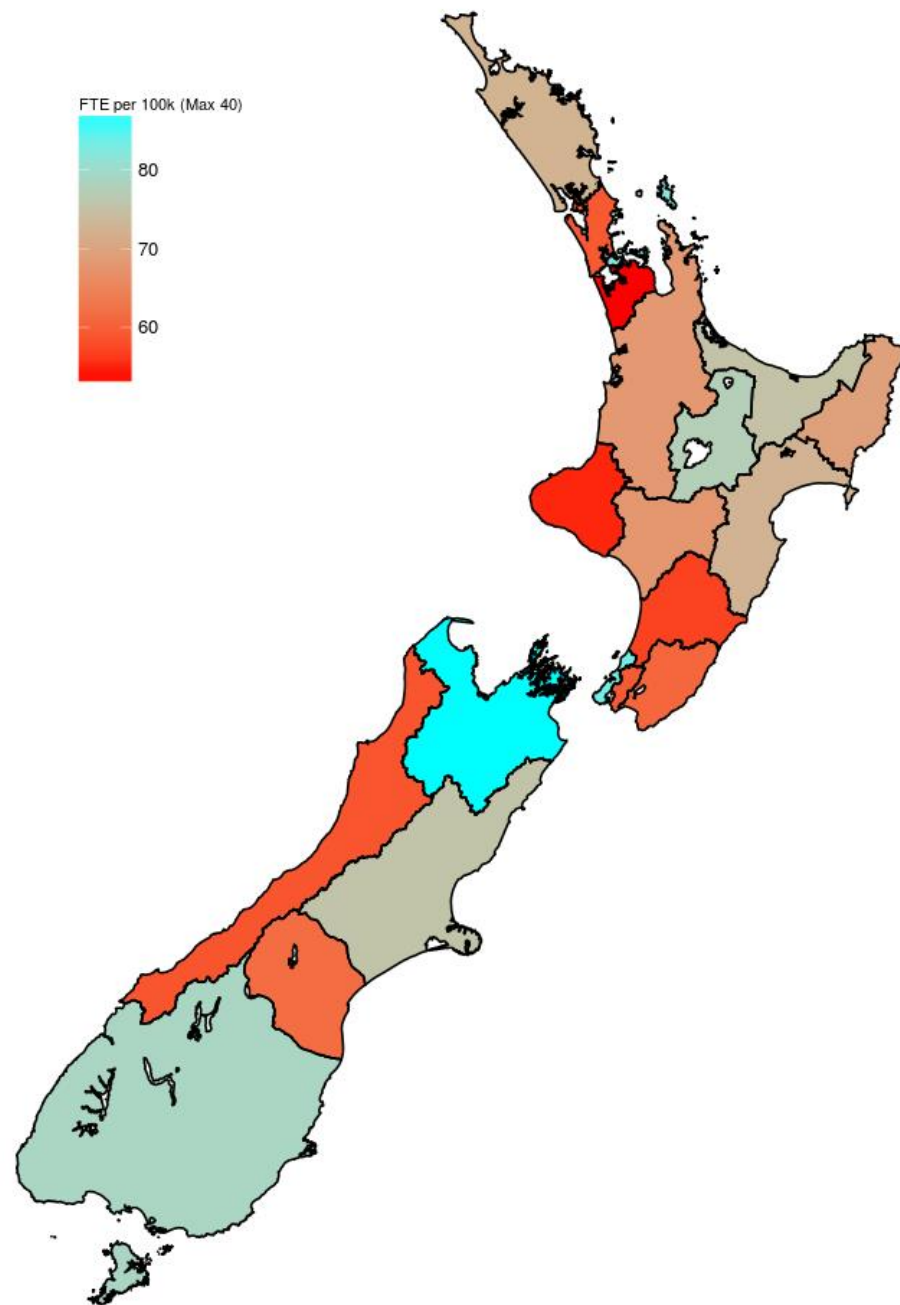


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2017 Comparison of the proportion of IMGs among rural and urban respondents



DHB	FTE GPs Per 100,000 population (Max 1) (MCNZ 2015)	% current vacancy (RNZCGP 2017)	% intending to retire in next 5 years (RNZCGP 2017)	% intending to retire in next 10 years (RNZCGP 2017)	% 55 or over (RNZCGP 2017)	% current closed books (RNZCGP 2017)	% poor work life balance (RNZCGP 2017)	% burnt out (RNZCGP 2017)	% IMG (RNZCGP 2017)	Number of respondents 2017 RNZCGP survey
Counties-Manukau	53.7	24	15	38	37	1	22	25	39	205
Taranaki	54.9	33	25	40	31	31	32	24	48	48
Midcentral	56.8	58	36	51	55	18	29	16	45	55
West Coast	58.7	93	29	36	35	7	36	0	57	14
Waitemata	59.1	25	25	49	38	5	23	24	33	224
Hutt	59.3	19	31	46	45	13	25	22	44	68
Wairarapa	60.7	56	38	56	56	12	25	25	56	16
South Canterbury	61.4	16	32	58	63	32	21	31	37	19
Whanganui	67.7	16	36	68	64	24	36	24	44	25
Waikato	68.1	29	27	47	38	4	25	27	52	171
Tairāwhiti	69.3	25	21	25	37	38	12	12	21	24
Northland	72.6	28	30	49	39	4	24	29	45	112
Hawkes Bay	72.6	54	28	49	40	31	33	26	38	94
Bay of Plenty	75.3	26	32	50	37	20	22	21	46	137
Canterbury	75.5	29	30	50	42	11	24	22	38	282
Lakes	77.6	49	18	44	39	3	31	34	31	39
Southern	78.9	18	26	44	39	9	24	22	41	194
Auckland	82.2	18	28	52	48	9	20	22	35	229
Capital and Coast	84.0	18	19	37	32	3	18	24	28	178
Nelson-Marlborough	86.6	18	26	44	34	18	22	24	41	98



The Voluntary Bonding Scheme



The Royal New Zealand
College of General Practitioners

Voluntary Bonding Scheme (VBS)

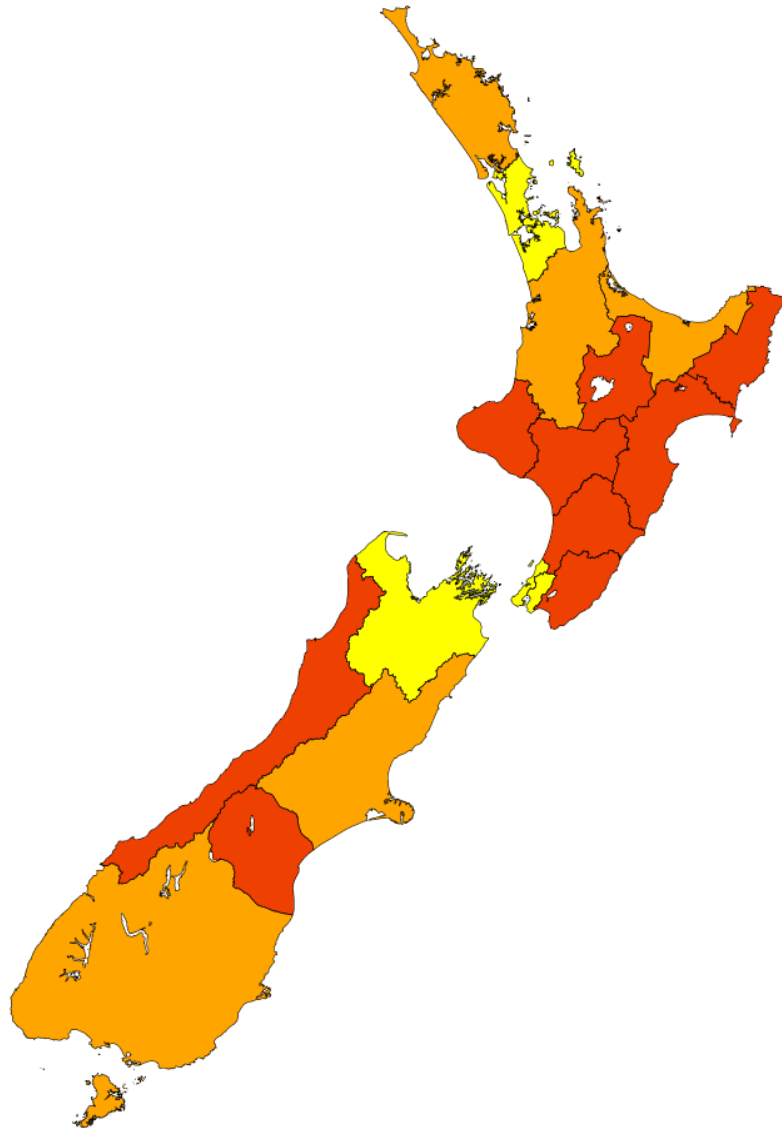
- Health workforce NZ scheme (HWNZ)
- Not just doctors, also nurses, midwives, sonographers and dentists.
- For doctors, in 2017 the incentivised specialties are
 - » General practice
 - » Rural hospital medicine
 - » Psychiatry
 - » Pathology



Entry points and timing of eligibility to apply for VBS payments

	PGY1	PGY2	? PGY3	Vocational training y1	Vocational training y2	Vocational training y3
New grad entry				\$30K	\$10K	\$10K
GPEP1 entry						\$30K





VBS

Red = all DHB

Orange = some Urban
excluded

Yellow = DHB not
included.



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2017 Hard to staff
communities
(for Junior Doctors)

- Northland DHB
- Thames Hospital
- Lakes DHB
- Whakatane Hospital
- Tairāwhiti DHB
- Taranaki DHB
- Whanganui DHB
- Wairarapa DHB
- Wairau Hospital
- West Coast DHB
- South Canterbury DHB
- Southland Region

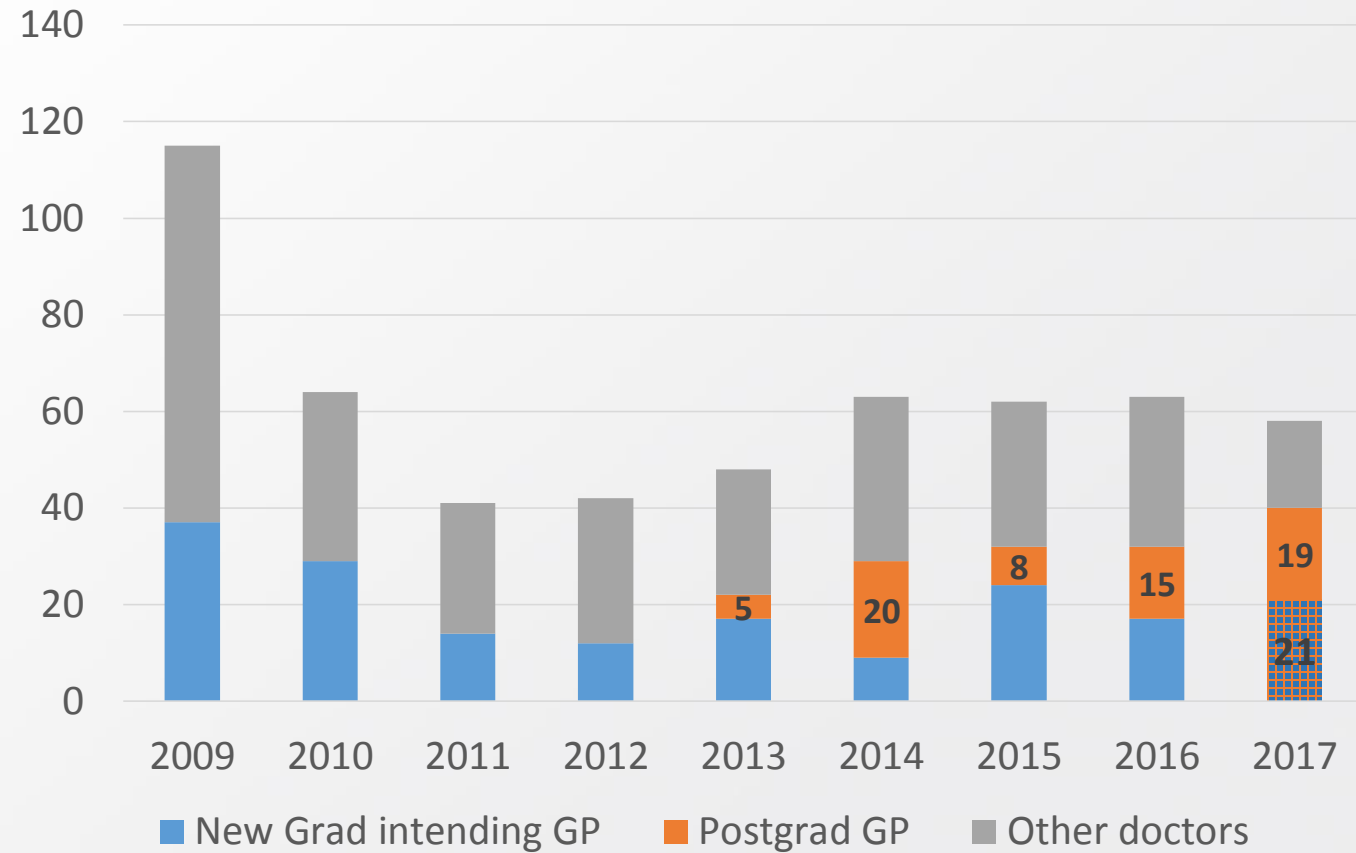


2017 hard to
staff
communities for
**General
Practice** training

- Northland DHB (excl Whangarei urban)
- Waikato DHB (excl Hamilton and Cambridge)
- Bay of Plenty DHB (excl Tauranga and Whakatane urban)
- Lakes DHB
- Tairāwhiti DHB
- Hawkes Bay DHB
- Taranaki DHB
- Whanganui DHB
- Midcentral DHB
- Wairarapa DHB
- West Coast DHB
- Canterbury DHB (excl Christchurch other than Banks Peninsula)
- South Canterbury DHB
- Southern DHB (excl Dunedin, Mosgiel and Invercargill)



Numbers of Doctors registering for the Voluntary Bonding Scheme (VBS)



VBS Registrations 2017

New Grad entry intending GP	21
New Grad entry intending Rural Hospital Medicine	15
New Grad entry intending other specialty	3
GPEP 1 entry	19
<hr/>	
Total medical	58



Summary

- NZ has an overall shortage of GPs as well as shortages in particular areas
- Rural areas are particularly short of doctors
- We remain dependent on the large cohort of experienced older GPs
 - as service providers
 - As teachers

It is crucial that GPs are valued and feel motivated and inspired to remain engaged and active in general practice, in particular those GPs approaching retirement age

- We are still not training sufficient numbers of GPs to replace them



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