

PRACTICE GROUP UPDATES



General Practice

Chair: Dr Mary-Therese Wyatt | Meeting 26 November 2025

IMG Working Group

The AMA (WA)'s IMG Working Group, expected to commence in 2026, will provide targeted feedback on IMG issues.

Pharmacy prescribing

Concerns about pharmacy prescribing expansion and issues of safety, consultation quality, and fragmented care. Pharmacy prescribing should not replace GP-led clinical oversight.

GP management of ADHD

Group reviewed emerging models for GP-led ADHD diagnosis and prescribing for patients aged over 10 years. RACGP-led training underway, funded by State Government. ADHD assessment fees should reflect individual practice models. Medicare reform needed to support long, complex consultations.

Review of WA gambling laws

With State Government's major review of gambling legislation, group was supportive of a submission centred on public health impacts. Key concerns include advertising saturation, online gambling harm, and mental health and addiction risks. Members' input will inform AMA (WA)'s submission due 12 December.

Medicare bulk-billing incentives

Cautious but positive shift in bulk-billing uptake. Group to closely monitor uptake and financial impacts over next six months. Concerns over risk of a two-tier system if bulk-billing clinics expand disproportionately, potentially undermining general practice autonomy.

Influenza program grants

Grants may not be available next year. The AMA (WA) and RACGP will continue advocating for funding support to sustain high vaccination coverage and resourcing for practice operations.

Private health fund encroachment

Concerns about certain private health insurers increasingly engaging in patient outreach, health coaching and clinical assessments traditionally provided by GPs. Group discussed the risks of vertical integration, insurer-owned clinics, and increased reliance on online consult platforms. Emphasised need for strong federal advocacy to protect GP autonomy and prevent fragmentation of patient care.

Growing workload from SAT reports, with no reimbursement

The AMA (WA) will advocate for government funding, including at upcoming State Budget. Group noted that Medicare items are not a viable funding source. ■

Rural Doctors

Chair: Dr Paddy Glackin | Meeting 16 September 2025

Permanency and pay parity

Out of 130 doctors reviewed by WACHS, more than 120 are rural generalists, with permanency notifications, contracts and back pay (backdated to Nov 2024) due. Concerns over pay parity between rural generalists and metro-based consultants. Clear strategy needed ahead of next EBA negotiations.

Workforce, credentialing and winter pressures

Concerns discussed, including current FTE cap. Not a recruitment freeze – clinical positions still filled, only administrative roles requiring review. Members to escalate any concerns about non-filling of clinical positions to the AMA (WA). WACHS is expecting imminent appointments to some leadership positions; committed to standardising credentialing arrangements across hospitals under new district-based structure. Winter Pressures Action Group for 2026 established to improve planning and local negotiation. The AMA (WA) Council continues to apply pressure on State Government to be better prepared for the future.

Rural advocacy and partnerships

The AMA (WA) has committed \$20,000 to strengthen its presence outside Perth; partnered with Regional Health Professionals Network and Rural Health West to enhance advocacy. Members encouraged to participate in local events to strengthen relationships and ensure rural practitioners' voices are heard.

Group reviewed RHARG discussion paper; identified major challenges – housing shortages, professional isolation, limited resources. Committee will continue with initiatives recommended by the paper for stronger retention strategies on professional development, community integration, and collaboration with local governments.

Pharmacy prescribing and collaboration

State Government is developing pharmacist prescribing protocols allowing treatment for 17 conditions (including asthma, shingles and musculoskeletal pain) – prompts concern about patient safety and referral pathways. Members supported AMA involvement in expert groups to guide protocol development ensuring a rural perspective. Coordination with GP Practice Group will improve metro-rural collaboration with consistent advocacy.

Fair remuneration needed for SAT payments

Advocacy continues; issue raised regularly with Government. ■



Doctors in Training

Chairs: Dr Owen Taylor-Williams & Dr Nicole Burger

Meeting 27 October 2025

Unpaid pre-shift work

Rosters at times fail to reflect prep time for morning ward rounds. The AMA (WA) considering stronger industrial options to resolve longstanding issues; similar action underway in other States.

WACHS overtime challenges

Inconsistent interpretation of rules continues to create confusion and underpayment. The AMA (WA) is preparing a new guidance note on correct overtime, recall and paid-duty expectations.

Familiar mix of progress and pressure at metropolitan hospitals

EMHS: unresolved pay issues for Bentley psychiatry trainees. NMHS: most DiTs reported positive experiences, though safety concerns over ICU building issues at Charlie's. South Metro: improvements at Medihotel, but ongoing roster compliance issues need further auditing. CAHS: no minimum threshold to claim overtime; rosters to be adjusted to recognise pre-ward round preparation. Several sites (including KEMH, Graylands, Joondalup & SJOG): report continued understaffing, change-room limitations, and training-related workload concerns.

Regional hospitals face similar challenges to metro hospitals

Kimberley: overtime pre-approval issues. Hedland: significant concerns from JMOs about lack of hospital transport (up to \$80 in weekend taxi trips). Albany: continues to use outdated overtime claim forms; pre-approval requirements have not been enforced.

Supporting GP registrars

Ongoing work discussed, including promotion of current survey and delays to Nationally Consistent Payments. Concerns about lack of consultation ahead of the Single Employer Model trial, stressing importance of DiT involvement.

Continued work to strengthen IMG advocacy

IMG Practice Group now being established, and calls for IMG representation on all HSP-level JCCs.

National updates

Noted from Federal Council of DiTs: Ombudsman-led review of specialty colleges; major work underway to improve transparency, equity and cultural safety in training pathways. AMA examining opportunities to integrate a new multi-college CV calculator into a national guide for prospective trainees.

New DiT Co-Chair

Welcome to Nicole Burger. Invaluable contributions of previous Co-Chair Dr Natalie Ferrington were acknowledged. ■

Private Specialists

Chair: Dr Brigid Corrigan | Meeting 10 November 2025

Private insurance market update

Guest speaker Rob Bransby, Chair of the Australian Health Services Alliance and the Insurance Commission in WA, provided an in-depth overview of current private health insurance market dynamics, highlighting the financial pressures on private hospitals, consolidation market share, and demographic and participation trends.

Action items and ongoing advocacy

Group noted the AMA (WA)'s advocacy on the Commonwealth Department of Veterans' Affairs (DVA) seeking urgent reform to sustain specialist care access for DVA patients.

WorkCover WA fee indexation

Only a 3.8% rise in medical fees approved by WorkCover WA, despite AMA advocacy for a higher adjustment. WorkCover WA is willing to engage more closely with the AMA (WA) in future fee-setting discussions. A meeting with their CEO will be arranged in the near future to discuss these matters.

St John of God Mt Lawley sale and service shifts

Discussion on the sale of St John of God Mt Lawley and the operational uncertainty it is creating. The AMA (WA) will continue to represent and support any impacted members.

Maternity funding and insurer contracting

Group reviewed Federal AMA's draft position statements on Private Maternity Funding and Private Health Insurer Contracting. Feedback strongly supported opposing bundled-care models and protecting clinician autonomy. This was noted, and the consolidated feedback provided to the Federal AMA.

Private specialist survey

Group reviewed the format and scope of the upcoming private specialist survey. Survey to be circulated shortly and kept open over the holiday period to give members as much time as possible to participate. ■

The PUBLIC HOSPITAL DOCTORS PRACTICE GROUP

is scheduled to meet on 15 December. An update will be included in the next edition of *Medicus*.

The AMA (WA) thanks all our Practice Group representatives for their ongoing efforts and unwavering commitment to recognise and respond to the key challenges facing practitioners within the WA health system.