

The Hon Warren Snowdon MP

Minister for Indigenous Health, Rural and Regional Health and Regional Services Delivery

Mrs Julia Irwin MP Chair Standing Committee on Petitions Parliament House CANBERRA ACT 2600



Dear Mrs Irwin

Thank you for your letter of 19 August 2009 to the Minister for Health and Ageing, the Hon Nicola Roxon MP, regarding the current petition under the Committee's consideration concerning the proposed change in the rural classification of Gawler. Your letter has been referred to me as the Minister for Indigenous Health, Rural and Regional Health and Regional Services Delivery.

I appreciate your update on the petition regarding the number of additional signatures and the terms of the petition.

I am pleased to confirm to you that the Australian Government has agreed to Gawler GP Inc using the term of 'Rural in Transition' and that the Government notes the special circumstances of Gawler, which has historically been a self-contained township, but is now enveloped by the outer metropolitan fringe of Adelaide. I do note, however, that the geographic classification of Gawler will remain as Australian Standard Geographical Classification – Remoteness Areas (ASGC-RA) 1 (Major Cities) and that the term 'Rural in Transition' has no material effect on access or eligibility to Government rural workforce incentive programs.

My meeting with Dr Anthony Page of Gawler GP Inc on 28 July 2009 addressed a number of the issues covered by the terms of petition. In particular, there are three specific rural workforce programs that were of concern and I undertook to examine the grandparenting arrangements further.

I have determined that the issues raised by Dr Page in relation to the Training for Rural and Remote Procedural GPs Program are in fact reproduced in a number of localities around Australia. Consequently, I have agreed to allow access to the Program by procedural GPs in metropolitan localities under very specific circumstances, which will include procedural GPs in the Gawler area.

Dr Page sought assurances from me in relation to possible changes to the Rural Locum Relief Program. This Program is due to be reviewed during 2009-10 and I am unable to pre-empt the findings of such a review. However it is reasonable to assume that if program changes were required, a transition process would be implemented to reduce the immediate impact of any such changes. In the meantime, I can advise that until the completion of such a review the current arrangements under this program will continue.

In relation to access to GP Registrars, I have advised Dr Page that I expect that the greater flexibility in placements and increased number of GP registrars available in the system in the future will enable GP practices in Gawler to more easily attract GP registrars. It is anticipated that the increased number of registrars on the general pathway who will be eligible to complete their placements in Gawler will offset any potential reduction in Gawler's access to registrars undertaking rural training placements.

I have continued to encourage Gawler GP Inc to apply for funding under the General Practice After Hours Program and am pleased that Country Health, South Australia has offered to assist Gawler GP Inc in completing the relevant application.

Finally, the Government has committed to monitor the transition of rural workforce programs to the new geographic classification system. I note that there are a number of communities, such as Gawler, that have voiced concerns with the prospective change to the ASGC-RA classification system, but as you would understand, it is not possible to test these assertions until such time that the system has been fully implemented.

I trust that the above information is of use.

Yours sincerely

WARREN SNOWDON

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