## **Senate Community Affairs Committee**

# ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

#### HEALTH AND AGEING PORTFOLIO

Budget Estimates 2012-2013, 30 & 31 May and 1 June 2012

Question: E12-028

**OUTCOME 12**: Health Workforce Capacity

Topic: Australian Standard Geographical Classification – Remoteness Area (Asgc-Ra)

Scheme

Type of Question: Written Question on Notice

Number of pages: 1

Senator: Senator Boyce

# Question:

Rural GPs working in areas where the population is less than 2,000 get the same financial incentives as those who work in much larger areas such as suburbs of cities or larger regional areas. Why wouldn't this inequity serve as a disincentive for the health workforce to transfer to rural and remote areas?

## Answer:

The Department of Health and Ageing has been monitoring the available data on the changes in the availability of GP services in small communities. The data shows improvement in the number of Fulltime Workload Equivalent GPs providing services in the majority of small communities (1,000-30,000 population). A range of financial and non-financial factors are considered by doctors when choosing where to live and practice. This includes their family circumstances, community and peer support, and individual lifestyle and social preferences.