

March 17, 2003

Ms Helen Owens
Commissioner
Productivity Commission
Locked Bag 2
Collins Street East
MELBOURNE VIC 8003

Dear Ms Owens,

Re: General Practice Administrative and Compliance Costs Study – Progress Report

Thank you for the opportunity to comment on the Progress Report of the General Practice Administrative and Compliance Costs Study.

The Royal Australian College of General Practitioners (RACGP) is pleased to see the progress being made in identifying the sources and scale of compliance and administrative costs associated with participation in Commonwealth Government programs. The RACGP is particularly pleased to see the progress on determining ways in which they can be minimised.

I would like to comment on a small number of issues in the Progress Report.

The administrative costs associated with maintaining vocational registration

The RACGP is concerned about the treatment of continuing profession development (CPD) in the Progress Report. The compliance costs associated with the maintenance of GP Recognition that are included in the body of the Progress Report do not represent the RACGP's view of compliance.

The RACGP acknowledges that there is a diversity of opinion in some parts of the profession about the degree to which CPD is a compliance requirement of the federal government. Despite this, the RACGP believes that the vast majority of GPs see CPD as a desirable and important part of their profession, not a compliance requirement imposed by the federal government. The College developed its CPD program to support the responsibility its members recognised to maintain their knowledge and skills. This occurred well before the federal government became involved and imposed its compliance requirements.

The RACGP holds the view that the vast majority of GPs would continue to undertake CPD as a one part of their commitment to their craft. As the data provided by the RACGP to the Productivity Commission shows, only 557 GPs did not complete the requirements of reporting sufficient CPD. This represents 3% of GPs required to do so. Even if a further 600 reported their involvement with CPD only to comply with the governmental requirements, then only 6% of GPs could be said to have a compliance burden associated with the actual time spent in CPD. The RACGP would see it as reasonable, based on the available data, to suggest that 5% of GPs have a compliance burden with respect to the hours they spend undertaking CPD.

The RACGP would, however, strongly prefer that only the costs of *reporting* involvement in continuing professional development be reflected in the report as a compliance cost.

It is appropriate to include the cost of *reporting* involvement in CPD, as *reporting* CPD activity to a register is clearly a requirement imposed by the Federal Government program, which GPs would be unlikely to undertake were the program requirement not present. The RACGP estimates that this *reporting* would take less than one hour per year. The associated fee paid to the College is legitimately characterised as a compliance cost.

In your report (at p.50) you indicate that information from the RACGP suggests that GPs accrue, on average, about twice as many points as the minimum required. It is more accurate to say that the CPD *reported to the RACGP* is, on average twice as much CPD as the minimum required *to be reported*. As indicated in the written material provided to the Productivity Commission, there are sound reasons to believe that most GPs cease to *report* their CPD involvement once the program threshold has been reached.

Presentation of data

The RACGP is also concerned about the presentation of the figures.

The RACGP holds the view that GPs, and many other stakeholders, will see a fundamental difference between compliance costs associated with un- or under-remunerated work done to comply with Federal Government programs; and the activity associated with CPD.

Most stakeholders would distinguish, for example, between work which is, or should be, remunerated directly (e.g. work on the EPC items, or for DVA), and the educational activities associated with maintenance of GP Recognition.

The relative contribution of the EPC, PIP and SIP, EPC, DVA, and Centrelink 'red tape' was the genesis of many of the concerns, and the presence of data thought to represent compliance costs associated with maintenance of GP recognition distorts the analysis.

In that context, it is the RACGP's strong preference that compliance costs be represented in tables and graphs exclusive of costs associated with maintenance of GP Recognition, other than its reporting.

The allocation of compliance costs in Figure 1, for example, is starkly different if one reduces the contribution of compliance with requirements to stay on the HIC vocational register or Fellows list to those associated with reporting CPD involvement.

It is the RACGP's view that GPs and other stakeholders will have a keen interest in this form of representing compliance costs, and that it needs to be included in the final report.

Should the Productivity Commission maintain its view that hours of involvement in CPD need to be reflected in the paper, then the RACGP would strongly advocate that two sets of graphs and tables be included – a set that exclude costs associated with maintenance of GP recognition (except for its reporting); and a set that include the costs that the Productivity Commission attributes to the hours spent in CPD.

If you would like to discuss these matters, please do not hesitate to contact Mr Ian Watts, National Manager – GP Advocacy and Support, on (03) 8699 0544, in the first instance.

I would appreciate your considering these matters, and I look forward to the completion of the Commission's research.

Yours sincerely

Prof Michael Kidd
President