



**The Hon. Dr David Gillespie MP**  
Minister for Regional Health  
Minister Assisting the Minister for Trade and Investment  
Deputy Leader of the House

## **MEDIA RELEASE**

2 September 2021

### **Distribution Priority Areas exceptional circumstances review for GPs**

A new exceptional circumstance review for the Department of Health's Distribution Priority Area (DPA) classification will help regional and rural areas respond to unforeseen workforce and population changes which may be impacting access to local GP services.

Federal Regional Health Minister, Dr David Gillespie said the DPA classification allows government to identify regions where locals face an increased challenge to access a GP.

The DPA system assesses regions annually, using the most up to date available data to support approvals for priority access to internationally-trained doctors and bonded doctors.

"I have heard loud and clear the concerns that the current approach is not capturing current or emerging local pressures, sudden and unexpected changes and unmet demand," Dr Gillespie said.

"I have worked with my Department to implement the exceptional circumstances assessment for non-DPA regions with GP service access concerns."

Dr Gillespie said the DPA classification supports other initiatives that encourage doctors who are subject to location restrictions, such as those who trained overseas, to work in rural areas.

"The Government is acutely aware of the significant shortage of GPs in many areas of regional, rural and remote Australia. As a regional doctor myself for most of my career, I understand the impact this has on health outcomes and community wellbeing," Dr Gillespie said.

Anyone in a non-DPA area such as a GP clinic can apply for an assessment. An important step in the assessment process is applicants working with and having the support of the Rural Workforce Agency (RWA) in their state or territory.

"RWAs play an important local role in helping medical practices recruit and retain GPs, nurses and other allied health professionals," he said.

"In fact, each year they support more than 6,000 rural health professionals and 1,800 rural practices with tailored solutions to a range of recruitment and retention options."

Once an applicant has worked with their RWA, they can submit it to the Distribution Working Group for a review of an area's non-DPA status.

Minister Gillespie said the following factors would be considered alongside an area's non-DPA status:

- Support of the local RWA
  - Demonstrating the RWA is working with them to address workforce concerns and that steps have been, or are being, taken to implement RWA advice or support.
- Changes to health services, workforce, or health system
  - Demonstrating an unexpected large change to the health workforce resulting in a substantial drop in health services to the community that is not recognised in the last DPA update.
- Patient demographics or changes
  - For areas experiencing changing service arrangements, for example doctor retirements (without replacement), hospital closures or an unexpected sharp increase in population.
  - Where the patient cohort is an underserved demographic or requires a specialised nature of service.
- Absence of services
  - Demonstrating difficulties in recruiting or retaining medical practitioners at a scale that is measurably different to similar communities and warrants discretion within health workforce programs.

If approved, an area will be eligible to access additional programs for that year to support recruitment of a broader pool of doctors.

“We are aiming to ensure the process is a speedy one, to quickly help address any GP service shortfall arising from those additional factors,” Dr Gillespie said.

The Australian Government is also preparing a formal review of the DPA indicator. Further details of the review will be announced soon.

**Media contact:** Steph Nicholls 0459 923 480 [steph.nicholls@health.gov.au](mailto:steph.nicholls@health.gov.au)