The new Junior Doctor Training Program consolidates and builds upon current training programs to create two new streams to support training in rural primary care and in private hospitals:

- Rural Primary Care Stream – funding for educational support for junior doctors working and training in rural primary care settings
- Private Hospital Stream – salary support for junior doctors working in private hospitals.

The two streams will increase access to high quality training in rural areas and the private sector, ensuring a continued supply of the medical practitioners required for health service delivery across Australia.

**Investment**

An additional investment of $63.6 million over four years from 1 July 2018 will support extra training in the private sector and deliver education and supervision for junior doctors in rural primary health care settings. This will bring the total investment to over $174 million from January 2019.

Programs consolidated from January 2019 include the Commonwealth Medical Internships, the Junior Medical Officer Program, and the Rural Junior Doctor Training Innovation Fund.

**Rural Primary Care Stream**

The year after graduating from university, medical students need an internship to gain general registration. Internships are almost fully hospital based.

Under the new Junior Doctor initiative, the existing Rural Junior Doctor Training Innovation Fund will continue, and allow rurally based interns to experience working in primary health care settings. Up to 240 Postgraduate Years 1 to 2 junior doctors will rotate into rural general practice.

There is a large concentration of junior doctors in public metropolitan hospitals who find it difficult to access pathways to further training. The Rural Primary Care Stream will encourage some of these doctors to work in rural general practice by supporting their training and supervision.

The Rural Primary Care Stream will help fund training and supervision making new jobs in rural general practice and ensuring junior doctors moving into these settings continue to provide high quality care.

The Rural Primary Care Stream will also help around 300 junior doctors working in rural general practices to gain Fellowship by supporting their training and supervision.

**Medicare access**

There are currently thousands of junior doctors concentrated in metropolitan hospitals. The Stronger Rural Health Workforce Strategy will create new opportunities for these doctors to move out of metropolitan hospitals and work and train in rural primary care. Other changes under the Strategy will enable these doctors to generate an income in private practice by performing Medicare eligible
services. The Rural Primary Care Stream will provide training and supervision for many of these doctors. Participants in the Rural Junior Doctor Training Innovation Fund will not be performing Medicare eligible services.

**Private Hospital Stream**

The private health sector delivers significant medical services to the Australian community. Around 40 per cent of hospitalisations in Australia are in private hospitals. There is significant training capacity in the private hospital sector, which provides an opportunity to address the forecast shortage of 1,000 advanced training places by 2030.

The Private Hospital Stream provides salary support for junior doctors working in private hospitals. This includes up to 100 internships in 2019 and up to 115 places in 2020. Full fee paying international graduates of domestic medical schools will continue to have preference.

Return of service arrangements will not be imposed on participants, but will be maintained for doctors with agreements under the former Commonwealth Medical Internships program.

The Private Hospital Stream will also support Postgraduate Years 2 and 3 training placements that will be open to a broad range of medical graduates.

An increase in the training capacity in the private hospital sector will help to ensure new doctors can access quality training in this part of the health system.

**Further information**

Updates on progress of the reform and further information: