

WA GP Advisory Panel

Meeting Communique

September 2025

Topic one: Introduction and update on key priorities of lead agencies

WA Primary Health Alliance (WAPHA), the Royal Australian College of General Practitioners (RACGP) WA and Rural Health West (RHW) leadership provided an update on key priorities for the lead agencies:

WA Primary Health Alliance

WAPHA's priorities focus on supporting general practice reform and enhancing primary care and include:

- **Data and analytics:** Managing the national Primary Health Insights data repository and collaborating with the Australian Institute of Health and Welfare to improve data quality and analytics for better care delivery.
- **Strengthening Medicare Reform:** Stewarding the Strengthening Medicare Reform measures in WA and supporting federal election commitments including the expansion of Medicare Urgent Care Clinics, endometriosis and mental health clinics; MyMedicare and thin market service system recovery plans.
- **General practice support:** Assisting practices in adapting to new funding and business models, offering support through practice navigators, quality improvement coaches, and digital health teams, promoting multidisciplinary team care and expanded scope of practice.
- **After-Hours service delivery and residential aged care homes:** Commissioning after hours services, improving access to care for people in residential aged care homes (RACHs) and strengthening the interface between general practice and RACHs.

- **NDIS transition:** Responding to proposed measures in shifting care for some NDIS participants into primary healthcare settings where appropriate.
- **Collaboration with WA Health:** Ongoing engagement and collaboration with a focus on streamlining communication between general practice and the hospital system.

Rural Health West

RHW has a vision for healthy rural communities and aims to achieve this through recruitment, retention and wellbeing of health professionals. Key priorities included in their new strategy designed to support the realisation of this vision are:

- **Advocacy:** The advocacy program aims to address systemic barriers and uses a nine-stage decision making framework. The approach ensures that advocacy efforts are data-driven and partner-oriented to avoid duplication, increase impact and ensure proposed solutions are validated by health professionals to ensure relevance and effectiveness.
- **Education:** RHW delivers over 100 events annually, including the Aboriginal Health Conference and the Rural Health Conference, as well as advanced skill support programs and workshops across rural WA.
- **Engagement:** Strong emphasis on continued stakeholder engagement, particularly with the other lead agencies and Panel members to inform advocacy efforts and priorities as well as education offerings.

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The Royal Australian College of General Practitioners WA

RACGP's vision is, 'healthy profession healthy Australia' which drives the work they do. Key priorities designed to support achieving this vision include:

- **Ongoing structural evolution:** Embedding the new strategic plan and implementing several key projects including ADHD training, Pharmacy Pro, Firearms Health Assessment and the Aboriginal and Torres Strait Islander Cultural Health training framework.
- **Embedding the GP training programme:** Funding for next year is in progress and preparation is underway to manage the significant registrar placement increase, particularly in rural areas.
- **Advocacy:** Increasing focus on structured advocacy at both national and state levels which has resulted in positive outcomes in relation to registrar incentive payments.

Topic two: Women's health

It was noted that several election commitments put forward by the recently elected Australian Government place a strong emphasis on advancing women's health outcomes:

- \$573.3m to support women's reproductive health providing better access to long-acting reversible contraceptives, oral contraceptive pills, menopausal hormone therapies, more endometriosis and pelvic pain clinics (EPPCs), and the expansion of their role to encompass menopause and perimenopause.
- Role expansion to menopause and perimenopause is significant – with no additional funding yet announced.
- 11 new EPPCs announced across Australia.

Members were asked to provide feedback on the challenges and barriers they are experiencing in delivering high-quality women's health-specific care.

Key points from panel members included:

- Medicare rebates for women's health consultations are seen as inadequate, making comprehensive care financially unviable for GPs.
- Standalone pelvic pain and menopause clinics were flagged as fragmenting care and potentially undermining general practice, as many GPs already manage these conditions effectively, and funding could be better directed to supporting general practice.
- New clinics may be inaccessible to rural patients, with concerns about metro-centric service delivery.

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Suggestions to address concerns raised included:

- Redirect funding to general practice for longer consults and multidisciplinary support.
- Improve training access for GPs for long-acting contraceptive insertion and menopause care.
- Explore case conferencing models to integrate specialist input and enhance collaborative care rather than fragmenting care.
- Provide feedback to the government that introducing additional funded sessions for pelvic floor physiotherapy and psychology support under a dedicated care plan model (in a similar way to eating disorder plans) could represent a better patient-centred approach. This would enable continuity of care with the GP as well as ensuring the patient receives the specific care they need.

Continued advocacy by the lead agencies for systemic investment in general practice, better rebates, and integrated care models were recommended.

Topic three: Experience with expansion of pharmacy prescribing powers to treat urinary tract infections (UTIs)

Pharmacists who have completed accredited training have been authorised to prescribe antibiotics for the treatment of uncomplicated UTIs in patients since August 2023 in WA.

Recent data indicates there have been 14 000 presentations to pharmacists, and members were asked to comment on their experiences in relation to patient care, as well as provide feedback they may have received from patients or the wider community.

While the benefits of increased access to treatment and convenience to patients of pharmacy prescribing was acknowledged, several issues and concerns were raised including:

- Reports of patients whose conditions worsened after receiving ineffective or inappropriate treatment from pharmacies, especially outside regular hours.
- Concerns around pharmacists' diagnostic capabilities, inconsistent standard procedures as well as limited awareness of updated guidelines which recommend non-antibiotic management for uncomplicated UTIs.
- Issues with evidence supporting pharmacy prescribing, noted as misleading, lacking transparency, and failing to include robust evaluation.
- Concern that pharmacy prescribing may expand to more complex conditions, increasing the risk of inappropriate treatment, especially in cases with contraindications.

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Members called for continued advocacy to address the above, focusing on:

- Collaboration between pharmacists and GPs to ensure continuity of care.
- Targeted education and training for pharmacists to align their practices with current clinical guidelines.
- Close monitoring of any expansion of pharmacy prescribing and transparent, evidence-based evaluation to ensure it remains safe and effective.

- Building on feedback received during Department-facilitated GP sessions earlier in the year, members were asked to provide insights and feedback on the design of four proposed outpatient referral HealthLink SmartForms and the Specialty List, with a focus on design and layout.
- Feedback provided will be used to inform the final HealthLink SmartForms design and vendor discussions.

Summary of previous WA GP Advisory Panel meetings (for noting):

WA GP Advisory Panel special interest session: Lifeblood High Ferritin App (August 2025)

- Lifeblood sought feedback from the panel to inform upgrades to the High Ferritin electronic referral application.
- Members were asked to provide feedback on a range of user requirements for the continued development of the app, ensuring that it meets the needs of the GP community.
- Feedback will be used to inform the next iteration of the app to ensure it is fit for purpose and meets the user expectations of referring doctors.

WA GP Advisory Panel session - SmartForm design (August 2025)

- WA Department of Health requested insights from the panel to inform the design of new electronic referral forms for WA Health public outpatient services.

Next steps: This communique will be shared with key staff across the three lead agencies, it will also be posted on WAPHA's website and shared with external stakeholders as part of the WAPHA CEO's monthly Strategic Update.

Please send any suggestions for future agenda topics to nicola.blacker@wapha.org.au

Note: The information contained within this communique represents the views and opinions of WA GP Advisory Panel members only and does not necessarily represent the views or opinions of RACGP, RHW or WAPHA.