

Internal medicine: Advanced skills role and model of service delivery

Setting	Focus of care and influence	Role	Key connections
General practice	Patients	<p>Enhance access to, and delivery of, quality Internal Medicine care in rural and remote communities by providing:</p> <ul style="list-style-type: none"> Holistic, high quality, primary and emergency medical care as a Rural Generalist including participation in on-call duties, supervision, and support of trainees. Expert assessment and management of internal medicine related emergency, inpatient and primary care presentations including delivery of specific assessments and interventions. Establishment of and participation in internal medicine specific clinics in the community in collaboration with visiting specialists. Establishment of referral pathways and various innovative community specific health delivery methods (e.g. telehealth) to meet community need. Coordinating and integrating patient care across primary, secondary and specialty services. Building capacity and skills of the rural healthcare team and collaborative working relationships with visiting specialists. Development/review of relevant hospital protocols. Facilitate application of relevant legislation and guidelines locally. Advocacy and promotion of future development of Internal Medicine services, building community resilience and social capital. Development of/participation in community programs addressing specific community needs. Other opportunities for additional scope of extended practice, including roles in management, education, and research. 	Local specialty outreach services
			Tertiary subspecialty services Consultant Physician Internal Medicine Registrar
Hospital	Community		Private specialist services
Primary Health Care Centre	Colleagues		General Practice/Primary Care colleagues
			Multidisciplinary allied services - public and private
Community Controlled Health Service	Health service/ practice		Community and Government service providers, including aged care
			Community organisations and stakeholders e.g. Police-Citizens Youth Club, Returned Services League, local council
Other			

Examples of what the IM AST job might look like in practice:

What the job looks like will depend on your location/context, community need and your skills/interests. Every RG who has an IM advanced skill has a slightly different role that works for them and their community. The following examples provide an idea of what a week in the life of an RG with IM AST might look like but there are many different models and ways the role can work best for you and your community. It is what you make it.

Primarily private GP/AMS

- Some RGs with IM AST work mainly in General Practice or AMS and provide extended scope services to their patients in close consultation with their physician colleagues and tertiary referral services.

Primarily hospital based

- Alternatively, some RGs with IM AST deliver their service from a hospital setting, running internal medicine clinics in consultation with visiting physicians and might be involved in renal dialysis services, cardiac clinics etc. depending on their skill set.

Mixed hospital and primary care context

- Many RGs do a mixture of both hospital based and primary or community based care and use their skill set to provide care across contexts to better meet the needs of their community.

Other hats our RGs with IM AST wear

- Managerial and medical administration roles, academic roles, GP supervisors, medical educators, etc.