



Medical Deans' Health Workforce Data Forum

7 August 2025

Communique

For the third consecutive year, Medical Deans Australia and New Zealand (Medical Deans) convened its Health Workforce Data Forum on 7 August 2025 in Canberra. Nearly 50 participants attended, representing Federal, State and Territory Governments, the Australian Health Practitioner Regulation Agency, the Australian Indigenous Doctors' Association, specialist medical colleges, and medical schools.

The 2025 Forum reinforced the enduring value of the longitudinal dataset, confirming its role as a robust evidence base to inform national workforce policy and planning. Its continuity across multiple years enables trend analysis and the generation of data-driven insights to inform strategic decision-making. Participants emphasised that maintaining and strengthening the dataset remains a high priority for the medical workforce "data community."

A key takeaway was the strong interest in exploring the 'why': supplementing quantitative findings with qualitative research, to better understand the reasons underpinning trends observed in the existing data. Forum attendees also expressed eagerness to refine data collection tools to capture greater nuances about the makeup and aspirations of the medical workforce.

Insights from graduates of medical schools

Professor Michelle Leech, Chair of Medical Deans' Data Committee, opened the Forum by presenting findings from the annual survey of graduating medical students, the Medical Schools Outcomes Database (MSOD). Key insights included:

- **Specialty preferences are stable** – General Practice and Physician training continue to be the most preferred career paths.
- **Preferences vary by demographics** – Older students (25+) showed greater interest in General Practice, Emergency Medicine, and Rural Generalism, while students of rural origin strongly favoured Rural Generalism (16.4% as first preference). Students from non-rural backgrounds more often preferred Physician training (20%).
- **Early interest can predict outcomes but do not represent the full picture** – Linkage with medical registration data showed that graduates who ultimately enter GP training frequently nominated General Practice as a preference at graduation. However, the proportion entering GP training is about double the proportion who indicated intent at graduation.

Subsequent presentations illustrated how MSOD data are used to answer research questions with real world relevance, such as factors influencing graduates' decision to train and/or practise rurally. Insights from Aotearoa New Zealand showed similar patterns: specialty preferences consolidate over time, and positive clinical placements strongly shape career choices.



Looking into college training and beyond

Specialist colleges presented new analyses connecting student intent to training pathways. A joint RACGP–ACRRM study demonstrated variation between medical schools in their contribution to urban and rural training pathways, raising important questions for further investigation.

The Royal Australasian College of Physicians (RACP) reported that the number of trainees has grown at a faster rate than population growth over the past five years. However, trainee distribution has not shifted, with little change in regional and remote participation. Both RACGP and the RACP highlighted their ongoing collaboration with the Commonwealth Department of Health, Disability and Ageing to ensure data feeds into national medical workforce models.

The Department of Health, Disability and Ageing demonstrated their commitment to implementing the National Medical Workforce Strategy. Specifically, the Department is focused on using data to unlock the medical workforce pipeline by increasing generalist capability, boosting capacity for medical supervision and supporting Career Medical Officers to bridge gaps in service delivery and supervision.

Opportunities and reflections

1. More research is needed to get a better understanding of the “*why*” behind the data, through qualitative research, (e.g. why graduates select general practice early or later in their career).
2. There is great potential to learn from Aotearoa New Zealand MSOD colleagues who have established a successful tripartite administration and use arrangement between the medical schools and Health New Zealand. For example, they have accumulated valuable data through their strong engagement with students and graduates.
3. The importance for all specialties to ‘be seen’ by medical students and prevocational doctors throughout their training. Lack of visibility of various disciplines during training will reduce the likelihood that these disciplines will be incorporated into career planning.
4. Measuring the quality of placements and readiness for internship were identified as crucial areas for further exploration. It was noted that this work could be done locally, with schools building their own data basis and then extending it.
5. Rural origin remains a strong indicator of future rural practice, as does positive rural placement experience.
6. Potential for the MSOD survey to be refined to capture nuances.

Moving forward

The 2025 Forum reaffirmed the value of data in understanding the medical training pipeline, while also underscoring the importance of moving beyond descriptive statistics to explore underlying drivers of student and graduate decision-making.

Medical Deans looks forward to ongoing work with medical schools, specialist colleges, government partners, and Aotearoa New Zealand colleagues to ensure that data continues to inform national workforce models and supports practical strategies to build a sustainable, responsive, and representative medical workforce.



Medical Deans thanks all participants for their generous contributions and acknowledges the Commonwealth Department of Health, Disability and Ageing for its ongoing commitment to this important work.

===