**Independent review of health practitioner regulatory settings**

**Implementation Update**

**October 2024**

See below for implementation updates across the reform areas:

* improve the applicant experience (recommendations 1-8)
* expand fast track registration pathways (recommendations 9-16)
* improve workforce data and planning (recommendations 17-20)
* increase flexibility, while ensuring safety and quality of care (recommendations 21-24)
* enhance regulator performance and stewardship (recommendations 25-28).

For general inquiries about projects and other implementation activities contact moh-hwt-krukreview-overseasworkforce@health.nsw.gov.au.

### **Reform area: Improve the applicant experience**

#### **Recommendation 1**

**Streamline, remove duplication and align standards, evidentiary requirements and policy settings across agencies and regulators involved in the end-to-end process, so applicants only need to provide information and meet requirements once, moving to a single portal over time**

A stage one evidence and analysis report has been drafted identifying duplication across registration, migration, Medicare, and employment processes, leading to unnecessary burdens for applicants.

The next steps include prioritising solutions, exploring IT improvements, and seeking policy agreement, with stakeholders to be consulted as collaboration between Commonwealth, state, and territory agencies progresses.

**Recommendation 8**

**Centralise back-end support within jurisdictions, and front-end support across jurisdictions as part of the development of a single portal, to drive efficiencies and reduce costly competition for the same workforce where possible**

Consultation has commenced with jurisdictions and private employer peak bodies on the following three workstreams:

* **Addressing duplication of evidentiary requirements** between employers and registration/migration agencies. This work focuses on processes required by health employers, and although separate, is closely linked with Recommendation 1, which aims at removing duplicative evidentiary requirements across other stages in the end-to-end journey of internationally qualified health practitioners (IQHPs).
* **Assessing possibilities to reduce impacts of costly competition across jurisdictions** for the same IQHP workforce.
* **Supporting IQHPs to integrate into living and working in Australia.** This includes identification of both national-level options and options for local employers and communities to support IQHPs once they are recruited.

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### **Reform area: Expand fast track registration pathways**

**Recommendation 9**

**Introduce or expand expedited pathways to registration for all professions in acknowledged areas of shortage**

Specialist international medical graduates

The Medical Board of Australia has developed an [expedited specialist pathway](https://www.medicalboard.gov.au/Registration/International-Medical-Graduates/Expedited-specialist-pathway.aspx) for specialist international medical graduates (SIMGs) with qualifications deemed equivalent to Australian standards.

The pathway launched in October 2024 with general practice qualifications included on the [Expedited Specialist pathway: accepted qualifications list](https://www.medicalboard.gov.au/Registration/International-Medical-Graduates/Expedited-specialist-pathway/Expedited-Specialist-pathway-accepted-qualification-list.aspx). Other qualifications will be added by December 2024 in anaesthetics, psychiatry, obstetrics and gynaecology.

All qualifications on the list have been assessed by the Australian Medical Council (AMC) and approved by the Board as substantially equivalent or based on similar competencies to an approved qualification.

For further information, visit the Board’s [expedited specialist pathway](https://www.medicalboard.gov.au/Registration/International-Medical-Graduates/Expedited-specialist-pathway.aspx) webpage.

Expedited pathways for other professions

Ahpra and national boards commenced two further expedited pathway projects in September 2024 for other professions, including:

* occupational therapy, dental, psychology, podiatry and medical radiation
* nursing and midwifery.

These projects will seek to streamline recognition and registration pathways and outcomes are expected to include:

* publication of recognised qualifications
* new or expanded policy frameworks for recognising qualifications as substantially equivalent or based on similar competencies
* new or expanded pathways recognising comparable regulators and/or experience.

The projects will also address recommendation 10 to explicitly recognise skills and experience as well as qualifications, initially through new registration standards; as well as recommendation 22 to review and explore options for enhanced accessibility to modes of assessment (including online and offshore).

The nursing and midwifery project builds on previous work by the Nursing and Midwifery Board of Australia including development of a new registration standard for internationally qualified nurses (IQRNs) from comparable international regulatory jurisdictions; and expansion of the places offered under the Objective Structured Clinical Exam (OSCE).

**Recommendation 12**

**Streamline processes, remove duplication and provide greater support to specialist comparability assessment to ensure more timely decision making and consistent outcomes**

In addition to establishing the new expedited pathway, the Medical Board of Australia and Ahpra are reviewing the existing pathways for SIMGs to streamline processes and enhance efficiency and transparency for assessment of overseas qualified practitioners.

**Recommendation 15**

**Supervision requirements to focus on the minimum required to build the capability of the health practitioner to deliver safe and quality health services in the Australian healthcare setting, recognising that supervisory resources are scarce. Innovative solutions, including a review of current Ahpra supervised practice framework, expansion of remote supervision models and online cultural competency and Australian health system training to be considered.**

Two projects are underway for Recommendation 15: a supervised practice review led by Ahpra, involving public consultation, potential changes to guidelines, and piloting innovative solutions; and review of online cultural competency and Australian health system training.

The training review project will also incorporate assessment and development of training modules supporting acculturation and orientation to the Australian health system proposed in Recommendation 23 of the Kruk review.

### **Reform area: Improve workforce data and planning**

#### **Recommendation 17**

## **Quantify workforce, skills, and distributional issues, making it easier to determine the extent of workforce shortages, factoring in changing models of care. This work should encompass needs in health, aged and disability care.**

Workforce modelling is underway to create a comprehensive view of Australia’s health workforce to guide decisions on the future skill mix and distribution of IQHPs. Significant progress has been made in data sharing and modelling studies for workforces including nursing and general practice, with upcoming milestones including further studies in psychiatry, obstetrics, and psychology.

Stakeholders, including specialist medical colleges, are engaged through data-sharing agreements and ongoing collaboration to improve data collection across the sector.

[General Practitioners (GP) modelling](https://hwd.health.gov.au/supply-and-demand/gp-supply-demand-study.html) was published in August 2024 and other studies will be progressively released on the Department of Health and Aged Care [Supply and Demand](https://hwd.health.gov.au/supply-and-demand/supply-demand-home.html) webpages.

The following workforces are being modelled in the 12 months until 30 June 2025:

|  |  |
| --- | --- |
| **Workforce** | **Timeframe** |
| * Whole of Medical
	+ Interns
	+ Hospital Non-Specialists
	+ Registrars
	+ Specialists
	+ Other
* Psychiatry
* Dental practitioners
	+ Dentists
	+ Specialist dentists
	+ Allied dental practitioners
 | 0-3 months |
| * Obstetrics & Gynaecology
* Midwifery
* Psychology
	+ Interns
	+ Clinical psychologists (endorsement)
	+ Other psychologists
 | 3-6 months |
| * Paediatrics & Child Health
	+ Paediatrics (all specialty and sub-specialties grouped together)
	+ General paediatrics
	+ Each of the remaining paediatric sub-specialties individually\* (training pipeline and supply projections only and at national level)
* Radiology
	+ Radiology (all sub-specialties grouped together)
	+ Diagnostic radiology
	+ Nuclear medicine (training pipeline and supply projections only and at national level)
* Medical radiation practitioners
	+ Diagnostic radiographer
	+ Nuclear medicine technologist
	+ Radiation therapist
 | 6- 9 months |
| * Surgery
* Surgery (all specialty and sub-specialties grouped together)
* General surgery
* Orthopaedic surgery
* Otolaryngology-head and neck surgery
* Plastic surgery
* Urology
* Each of the remaining surgery sub-specialties individually (training pipeline and supply projections only)
* Anaesthetics
* Occupational therapy
 | 9-12 months  |

**Recommendation 18**

**Support better planning for Australia’s future workforce needs, including developing national workforce strategies for maternity and allied health, and finalising the nursing strategy already in development**

National Nursing Workforce Strategy

Consultation on the draft National Nursing Workforce Strategy concluded on 20 October 2024. The consultation focused on four key areas: enhancing the value of nursing, workforce planning, profession design to meet community needs, and growth through recruitment and retention.

Feedback from public consultation will be used to prepare the final strategy or approval from all Health Ministers.  An implementation plan and a monitoring and evaluation framework will be developed to support the strategy and facilitate implementation.

For further information including the draft strategy and consultation materials visit the [National Nursing Workforce Strategy](https://www.health.gov.au/our-work/national-nursing-workforce-strategy) website.

National Maternity Workforce Strategy

The National Maternity Workforce Strategy phase two project is underway. Steering committee and advisory groups are being established and the project is due for completion in late 2025.

Phase One is complete and included a review to identify current strategies and initiatives that exist across jurisdictions, and the workforce groups required to provide maternity services and potential future workforce issues. New South Wales and Queensland are co-leading the development of Phase Two: National Maternity Workforce Strategy. Consultation opportunities will be made available over the coming months.

Further information is available on the [National Maternity Workforce Strategy](https://www.health.gov.au/our-work/national-maternity-workforce-strategy-2026-2036) website.

National Allied Health Workforce Strategy

The Allied Health Workforce Strategy project focuses on meeting the current and future needs of allied health professionals in Australia over the next ten years to align supply with demand. Progress to date has included completion of a phase one environmental scan and stakeholder consultation. The strategy is being developed in phase two. Further information is available on the [National Allied Health Workforce Strategy](https://www.health.gov.au/our-work/national-allied-health-workforce-strategy) webpage.

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### **Reform area: Increase flexibility, while ensuring safety and quality**

**Recommendation 21**

**Provide applicants with greater flexibility in demonstrating their English language competency**

Ahpra and national boards completed a review of English language registration standards resulting in a reduction of the IELTS test standard for written English from 7 to 6.5 for all registered health professions except occupational therapy and medicine. Health ministers approved the updated registration standard in June 2024.

A second project commenced in September 2024 to recognise more programs of study conducted in English. The project will include research to potentially expand the recognition of English language, embed English language recognition in health qualifications, evaluate the impact of drop in IELTS writing test score from 7 to 6.5 and test effectiveness of standards within professions. Further information will be provided about this project as it progresses.

**Recommendation 23**

**Ensure all health practitioners are supported with appropriate training to familiarise them with and prepare them for safe practice in the Australian health system, regardless of their registration pathway**

Consultation commenced in September 2024 to deliver a stocktake of available cultural competency and orientation to the Australian health system resources. The project will then consider if new online modules for orientation to the Australian health system and cultural safety training are needed

Stakeholders, including public and private health employers and peak bodies, have been invited to get involved by participating in upcoming surveys and interviews to inform the stocktake of existing training resources.

**Recommendation 24**

**Implement relevant recommendations from the National Medical Workforce Strategy to address maldistribution of the workforce including evaluating the effectiveness of existing support structures for international medical graduates (IMGs) in rural settings, increasing the number of training pathways and posts available, and creating networks with, and connections between, metropolitan and regional health services**

This project addresses medical workforce maldistribution in rural and remote Australia by evaluating support structures for IMGs and increasing training opportunities.

Project outcomes will include a literature review, stocktake of existing professional support structures and an evaluation. A consultancy was appointed in August 2024 and literature review is on track for completion in October 2024.