International medical graduates in Australia: future state journeys Working with Aboriginal and/or Torres Strait Islander patients Preparing for immigration and work as a medical practitioner in Australia Meeting standards for qualification, training, verification and assessment requirements Ensuring work readiness for safe and quality care Committing to continuous improvements at an individual and system level Working and living in rural and remote areas and underserved metropolitan communities and communities to provide culturally safe care Future State 6 This future state journey map shows some solutions to the context of challenge in international medical graduate assessment in Australia. The solutions are evidence-based and sourced from analysis of a survey with over 4000 respondents, focus groups and interview data and stakeholder consultation. **S** Individual **2** Individual **2** Individual **S** Individual This future state map shows some solutions which could minimise and resolve the challenges faced by international medical graduates as they attempt to navigate assessment pathways in Australia. The Establish faster assessment Cultural safety and assessment Develop more flexible full registration Resolve catch-22 challenges of Learn more about the specific Aboriginal Provide equitable treatment and pay Check English language skills Prepare documentation prior to arriving in Explore broadening of eligible count Make connections with care in the Get involved in the community life of the Understand the unique health needs Access to continuing education Encourage research an Improve experiences and remove Form a collaboration between Speciali Develop Mutual Recognition Agreements Ensure timely processing of applications Challenge personal assumptions Improve the Specialist Pathways solutions are categorised in terms of strategies duplication of registration for the Competent Authority Pathway Colleges and the AMC to improve options with customised limitations rural, remote or underserved metropolitan of your local community and/or Torres Strait Islander communities employment and registration local context Participate in and advocate for culturate individual international medical graduates can Specialist Colleges should work towards Ensure that assessment is culturally safe. Ensure that there is transparent and Anticipate challenges. Talk to others who Do English language tests before doing Have quicker turnaround times for Specialist Colleges should focus on An independent review panel should be set Be open to challenging personal nternational medical graduates should and organisations in your own area Have an awareness of the social assumptions about medical practice, bias safety training. timeliness of assessment and recognition of up within each Specialist College that establishing mutual recognition agreements Offer variations with more customised Streamline registration processes to Resolve impasses whereby registratio undertake. It also sets out system solutions. Audit and refine examination questions efficient processing of applications and Foster connections between internationa receive equitable treatment and have completed the process. Network and medical assessments - even if it is not an Where possible, check requirements to provided with ready access to continuing Support international medical graduates t This will help you to better understand the determinants of health and how they relate System solutions are further categorised in terms reach out to support groups. Look at official assessment requirement. Communication avoid having to return to your country of banks and work-based supervision so that prior learning. This system should recognise includes international medical graduate Create a workable model for the AMC and with reputable international medical boards limitations tailored to the assessed improve experiences, remove duplication expedite applications wherever possible. can't be provided prior to securing and cultural beliefs. There are many Aboriginal and/or Torres remuneration, recognising their education, mentoring and professional engage in research and academic activities, medical graduates and the community of alignment with the Kruk Report (2024). The sites and consult official services so that skills play a big part in all medical and colleges. Recognising the qualifications competencies of the individual and the and simplify requirements. employment and health services won't training to source documents. assessment questions are culturally safe representatives. The panel would review Specialist Colleges to collaborate on leaders, community organisations, and community you serve, build relationships, to the community you serve. Strait Islander language groups and contributions equally alongside their development courses, helping them stay recognising their unique perspectives and advice is from authorised sources. Use both assessments and will help with finding modified category indicates how the AMC has specific needs of the healthcare system. employ without registration being issued and feel more culturally connected. communities within Australia, each with and do not stereotype. experiences, and competencies that people and provide feedback on the assessment assessment of specialist training and and training of international medical professionals who can help you to learn Australian-trained counterparts. updated with the latest medical practices contributions to medical science and graduates from countries with comparable This would allow international medical provided further insights into recommendations their own cultural practices and norms. about the local needs of your health and regulations. informal and formal sources to give a bring from their countries of origin. A criteria and processes, ensuring that they expertise. healthcare improvement. Understanding these differences and from the Kruk Report. System solutions are framed clearer picture of how to navigate competency-based assessment framework are fair, transparent, and free from bias or healthcare systems would streamline the graduates to practise within their population and how to apply cultural safet in terms of activity which is within the AMC's remit adjusting medical practices accordingly processes and avoid wasting time, money competence areas while they work towards principles to the populations you serve to guide assessment and support may allow discrimination. Having international pathway to recognition in Australia. and to be completed relatively independently meeting the requirements for general or contributes to cultural safety. international medical graduates to progress medical graduate representatives would Contribute to health equity Establish a structured pathway to Address discrimination and exploitation within AMC budget (lead); cross sectorial activities towards full recognition in a more flexible help to identify and address any systemic specialist registration. transition to full registration Foster work-life balance and Develop feedback mechanisms Create a reporting and support system for which the AMC would seek partners and joint Ensure that people are fit and safe to Address the discrimination and exploitatio biases or barriers that international medical for discrimination and bullying address high volume workloads funding (partner); and activities which other graduates may face. practice in Australia. Commit to delivering that international medical graduates Feedback mechanisms should be This should be based on clear, achievable sectors would lead and fund which the AMC would culturally safe care of Aboriginal and/or experience in processes, cultures and Offer flexible working arrangements and established for international medical milestones and supported by targeted An independent, confidential reporting Learn about the Australian health graduates to share their experiences and support (support). support for family integration into educational and clinical experiences. This Torres Strait Islanders peoples and workplaces. mechanism should be established for environment and socio-cultural context Change the narrative about rural and Provide financial and logistical support Develop programs which focus on Australian society. pathway could be facilitated by a dedicated multicultural and diverse communities and suggestions for improving the system, international medical graduates and other retention not simply recruitment support team within Ahpra that works populations ensuring their voices are heard and acted healthcare workers to report experiences of Recognise that you may have new learnings Review the AMC pass rate Improve employment opportunities Financial incentives and logistical support Improve assessment feedback for the Expand workplace-based Assessme Reduce the financial burden of Provide study resources Develop a job portal and Increase supervisor capacity **Expand work readiness programs** discrimination, bullying, or harassment. closely with international medical and ways of working. Areas of challenge **Levers for Change:** (WBA) Programs The narrative should focus on the value and for relocating to rural and remote areas, Standard Pathway exams and WBA Health services need to develop systems Review the pass rate and maintain fair international medical graduates report and inductions (recruitment, and training) This system should be supported by policie Develop comprehensive and affordable graduates, healthcare employers, and employment support Develop a merit-based match system advantages of living and working in rural, including housing assistance, schooling for that extend beyond recruitment to Assess cultural safety in exams and WBA Work with Elders and Aboriginal and/or Standardise cultural safety training and procedures for investigating complaints Specialist Colleges. Increase the number and distribution of experiencing include: understanding the assessment of clinical competence and high Reduce fees, offer payments by instalment, study resources, similar to those available similar to that currently used in the US. This A dedicated job portal offering tailored Focus programs on cv and interview skills, Develop and implement a standardis remote, and underserved metropolitan children, and relocation allowances. retention. Fostera whole of family approach Australian health system, cultural safety, hospitals offering Workplace-Based and taking appropriate action, with a focus standards for safe medical practice. Provide clearer direction about what was or provide financial support, especially for for USMLE. These resources should be would ensure that international medical to social support and inclusion. Workplaces Mandatory cultural safety training should Assess cultural safety authentically in assessment preparation, and clinical skill framework for supervision across all areas. Health workforce agencies, academic (System – Support) employment opportunities and support in System Assessment (WBA). Hospitals should also those who are experiencing financial easily accessible and available online. both on justice and cultural change within mental health, communication, skin checks done well and the areas for development. graduates are matched to positions that healthcare settings. This framework s development including cultural safety need to value diversity at a policy, cultural securing positions that match their researchers, local councils, governments, be implemented for all healthcare assessments for international medical Foster learning programs involving Eld hardship. Make exams more affordable for align with their skills and experience. and snake bites. This would help with future assessment be encouraged to provide internships to outline clear expectations, roles, and professionals, including international training, emergency medicine and the community, and international medical and behavioural level. Discrimination and international medical graduates, with the repeat takers (recognising the financial Hospitals and healthcare services should be preparation and provide better insight into Improve the quality of and procedural skills, women's and men's responsibilities for both supervisors and graduate with successful careers in rural medical graduates and their supervisors, racism should not be tolerated. **System Levers:** goal of ensuring that international medical strain imposed by the need for multiple clinical areas of strength and focus for encouraged and supported to hire access to supervision nurses, allied health professionals, and international medical graduates, ensurir health, communication, digital health, and remote medicines can all play an further development. graduates can complete necessary rotations exam attempts) or implement a sliding international medical graduates, breaking consistent and supportive supervisior administrative staff. This training should important role in changing this discourse. mental health and Australian specific Review supervision standards, provide scale for exam fees based on the and gain valuable Australian medical down barriers such as Permanent Establish clearer benchmarks and Develop inclusive policy and experience. It should include structured clinical care, for example, skin checks, focus on understanding and respecting information and collaborate on improved international medical graduate's country of Residency Visas/citizenship requirements or Partner **6** a longitudinal evaluation study decision-making processes tropical diseases and snake bites. Prioritise orientation programs, regular feedback diversity, reducing unconscious bias, and supervision training and recruitment the need for Australian work experience. origin's economic status. places in work readiness programs for promoting inclusiveness. The goal would be sessions, and clear mechanisms for Support 6 International medical graduates should be Regular audits of healthcare institution strategies to build supervisory capacity. international medical graduates who have addressing concerns or challenges. The to create a healthcare environment where Implement a moratorium system that Create whole of family recruitment with Provide end-to-end training programs more involved in policy development and should be conducted to assess the completed assessments but who have not framework could also mandate supervise all professionals, regardless of their supported through strong partnerships links to qualifications **English Language Checks** Provide Language and socio-cultural support for partners and Address visa and immigration challenges decision-making processes at various levels, workplace culture and identify areas for training to equip them with the skills background, feel valued and respected. been able to secure employment in Alignment with Government Review: **Communication Training** improvement. This could be complemented including hospital administration, English Language Test results are only valid Work with immigration authorities to Formal training and supervision that equips The government should review moratorium necessary to effectively mentor healthcare policy, and professional by regular surveys and feedback Kruk recommendations • Offer programs tailored to the healthcare requirements to make them more flexible A network of community supports that is for 2 years as per Ahpra requirements. simplify visa processes so that international international medical graduates, focusin associations. This would ensure that the mechanisms that allow all healthcare generalist skills in the interests of public and aligned with qualifications and welcoming to international medical Extension options need to be explored so context to help overcome language barriers medical graduates and their families have on cultural safety, communication, an professionals, including international voices and perspectives of international Modified Kruk recommendations • and enhance patient care. stability and security in Australia. coaching skills. The framework should a safety and their own wellbeing, confidence experiences. Look at a system where graduates and recognises the value they that international medical graduates are medical graduates, to share their medical graduates are heard and and sense of professionalism. This could moratorium requirements are directly bring, reducing prejudice and providing not required to resit English tests in identify strategies for how to build capa experiences and suggestions for creating a considered in shaping the culture and linked to qualifications, specialties, and sub- better support during the initial involve forming relationships and through recruitment and retention of practices of the healthcare system. more inclusive and supportive work specialties allowing for differentiated partnerships with universities, the environment. moratorium conditions that recognise the community and larger healthcare diversity of skills and experiences. institutions to foster learning and development and sharing of resources at a Provide socio-cultural support Have strategies to deal with cases where system level. documents cannot be sourced from accessible study resources Recruitment is conceived as a whole-of-Quality Assurance Program areas of workforce shortages improve workplace and community family process with support to secure and Create resources that are blueprinted to Create supervised practice programs to up- A program that regularly evaluates the ensure streamlined access to visas; assessments and show samples of exam i.e. refugees. schooling; partner employment; supportive format. These resources should be easily skill international medical graduates in effectiveness of supervision provided to Work towards zero tolerance for bullying Distance from cultural support Improve supervision and mentoring cultures and communities; and family well- accessible and available online. areas of practice where there are workforce international medical graduates. This could exploitation and discrimination. systems tailored to rural needs and involve anonymous feedback from International medical graduates can feel delivery options challenged by the distance from cultural international medical graduates about their support. It is important to reach out and This includes the development of supervision experience, regular reviews of provide cultural and social support to tele-supervision. supervision outcomes, and providing reduce the negative impacts of isolation. additional training or resources for Provide a clear, full picture of end-to-end Provide online assessment Improved online document management supervisors based on identified needs. portal and in-person case management processes and links to websites Provide opportunities for international Have clear information how to navigate medical graduates to complete assessment immigration requirements, assessment, requirements while still in their country of Using effective technology systems and registration and employment. This will help training to reduce the time and money improved customer service will help with spent on travel and accommodation to navigating the path and avoid wasting time, reduce the time and money spent and money and emotional stress. attend in-person assessments. **Cultural safety training** Integrate cultural safety training into induction processes and offer ongoing cultural safety training to supervisors, international medical graduates and domestically trained doctors.