



Medical Intern Recruitment to NSW Prevocational Training Positions

Annual Report for the 2024 clinical year

25 March 2024

TRIM DOC24/300

Acknowledgement of Country

Health Education and Training Institute acknowledges the Traditional Custodians of the lands where we work and live. We celebrate the diversity of Aboriginal peoples and their ongoing cultures and connections to the lands and waters of NSW.

Copyright

© 2024 HETI (Health Education and Training Institute) NSW, Australia.

All rights reserved. This work is copyright. Apart from any use as permitted under the Copyright Act 1968, no part may be reproduced by any process without prior written permission from HETI.

Disclaimer

This program is covered by NSW Health's Disclaimer Policy.

To view this policy, please visit www.health.nsw.gov.au/pages/disclaimer.aspx

Table of Contents

Executive Summary	4
Table 1: Acceptances by priority category for the 2024 clinical year	4
Table 2: Unfilled network positions for the 2024 clinical year.....	5
Table 3: Unfilled rural hospital positions for the 2024 clinical year	6
Introduction	7
Table 4: NSW Health priority list for intern recruitment for 2024 clinical year.....	8
Table 5: Key dates for NSW medical intern recruitment for the 2024 clinical year	9
Table 6: NSW Health funded intern positions from 2015 – 2024 clinical years.....	10
Table 7: Available NSW PGY1 position capacity by prevocational training network and RPR hospitals for 2024.....	12
Table 8: Outcome of allocation process for 2024 clinical year by priority category	13
Table 9: Acceptances by NSW university and priority category for 2024 clinical year.....	14
Aboriginal Medical Workforce Pathway	15
Table 10: Distribution of applicants through the Aboriginal Medical Workforce pathway and positions accepted.....	16
Figure 1: Aboriginal Medical Workforce pathway acceptances 2010 – 2024 clinical years	16
Rural Preferential Recruitment Pathway	17
Table 11: Rural Preferential Recruitment pathway outcome for the 2024 clinical year.....	18
Table 12: NSW medical graduates accepting positions through the RPR pathway for the 2024 clinical year.....	19
Figure 2: Acceptances RPR pathway and EOI processes 2012 to 2024 clinical years	19
Direct Regional Allocation Pathway	20
Figure 3: Direct Regional Allocation pathway acceptances 2012 to 2024 clinical year.....	20
Table 13: Direct Regional Allocation pathway outcome by network for the 2024 clinical year..	21
Table 14: NSW medical graduate acceptances through the Direct Regional Allocation pathway 2024 clinical year	21
Optimised Pathway	22
Extenuating Circumstances and Change in Personal Circumstances	22
National Intern Data Audit	23
National Late Vacancy Management Process	23
Appendix 1	24
NSW Prevocational Training Networks.....	24

Executive Summary

The Medical Portfolio of the Health Education and Training Institute (HETI) has delegated authority from the NSW Ministry of Health to recruit medical graduates to prevocational training positions in NSW on behalf of Local Health Districts (LHDs) or Public Health Organisations. HETI coordinates the recruitment of medical graduates from Australian Medical Council (AMC) accredited Australian and New Zealand universities seeking their initial training position as a doctor.

In NSW, prevocational training positions are located within 15 prevocational training networks. Prevocational training positions offered by HETI are two-year positions and enable the trainee to complete their first and second postgraduate year (PGY) in a single network. All the terms and facilities in the network are accredited for prevocational training. Networks consist of multiple hospitals from metropolitan, regional and rural locations who work cooperatively to provide the training and experiences required to prepare prevocational doctors for a diverse range of medical practice.

The trainees are employed by the LHD that governs the hospital administering their employment. Applicants who accept positions acknowledge they may rotate to any facility in the network if required. It may be necessary for them to complete at least one term in the two-year period outside their administrative hospital.

This report reflects work undertaken by HETI in 2023 to recruit medical graduates to intern positions commencing in January 2024.

In 2023, 1641 medical graduates applied for an intern position in NSW for the 2024 clinical year. Of these applicants, 930 were NSW domestic students who were guaranteed an offer, with 777 guaranteed applicants accepting a position. In addition, there were 150 graduates of interstate universities (148 domestic and 2 international), 133 NSW international graduates and 1 offshore graduate recruited.

For the 2024 clinical year there were 1153.5 Ministry of Health funded positions, an increase of 33.5 positions from 2023. A total of 1059 of the 1153.5 Ministry of Health funded positions were filled by 1061 medical graduates (four are completing their internship part time). This is a decrease of 29 medical graduates placed in the previous year.

The NSW Health Priority List for intern recruitment for 2024 is on page 8. Table 1 below shows the number of applicants accepting positions by priority category.

Table 1: Acceptances by priority category for the 2024 clinical year

Priority Category	Positions accepted (headcount) for 2024 clinical year
1	777*
2	119
3	29
4	133
5	2
6	1
Total	1061

*Four category 1 applicants are completing their internship part time

A total of 36 Aboriginal medical graduates applied for internship through the Aboriginal Medical Workforce (AMW) pathway for the 2024 clinical year. 34 applicants were from NSW and two were from interstate. Of the 36 applicants who applied, 30 accepted their positions and six declined their offer.

All 30 applicants commenced their internship in the 2024 clinical year in the hospitals or networks they requested.

For the 2024 clinical year there were initially 201 positions available through the Rural Preferential Recruitment (RPR) Pathway although five positions were converted to rotational positions during the campaign, reducing available RPR positions to 196. This is an increase of 20 positions from the previous year. A total of 130 applicants accepted positions at RPR hospitals with five of these positions filled through the AMW Pathway.

Following exhaustion of eligible applicants from the initial RPR interviews, a total of three positions were filled through an Expression of Interest (EOI) process at the following RPR hospitals:

- Albury Wodonga Health - Albury Campus [1]
- Orange Health Service [1]
- The Tweed Hospital [1]

At the commencement of the LVM process on 4 December 2023, all eligible onshore and offshore medical graduates were exhausted in NSW for the 2024 clinical year. Several networks and RPR hospitals had vacancies leading into the LVM process and further vacancies arose during the LVM due to declines from applicants who had previously accepted an offer. As the applicant pool managed by HETI was exhausted, no further intern positions could be filled for the 2024 clinical year. RPR hospitals had a larger number of vacancies than previous clinical years as positions remained unfilled due to the exhaustion of eligible applicants on RPR e-lists, declines from applicants who had previously accepted an offer and lack of interest from applicants for the expression of interest process.

At the close of the LVM process on 22 March 2024, there were 94.5 vacancies remaining in total. The National Audit process identified that the number of available intern positions in Australia for the 2024 clinical year exceeded the number of applicants. In NSW LHDs were advised by the Ministry of Health to manage the vacancies using a range of appropriate strategies in accordance with their local recruitment processes.

Table 2 below shows the distribution of unfilled network positions at the close of the campaign.

Table 2: Unfilled network positions for the 2024 clinical year

Network	Administrative hospital/s	Unfilled positions
1	Royal Prince Alfred Hospital	1
2	Bankstown-Lidcombe Hospital and Campbelltown/Camden Hospital	3
3	Concord Hospital	2.5
4	Liverpool Hospital	2
5	Royal North Shore Hospital	0.5
6	Hornsby Ku-ring-gai Hospital	1
7	Gosford Hospital & Wyong Hospital	2
8	St George Hospital and Community Health Service	1
9	The Prince of Wales Hospital	3.5
10	St Vincent's Hospital	1
12	John Hunter Hospital	3
13	Westmead Hospital	1
14	Nepean Hospital	5
15	Blacktown Hospital & Mt Druitt Hospital	2
Total		28.5

Table 3 below shows the distribution of unfilled rural hospital positions.

Table 3: Unfilled rural hospital positions for the 2024 clinical year

Rural Hospital	Unfilled positions
Albury Wodonga Health - Albury Campus	3
Coffs Harbour Health Campus	4
Dubbo Hospital	12
Lismore Base Hospital	4
Manning Hospital	9
Orange Health Service	4
Port Macquarie Base Hospital	1
Tamworth Hospital	14
The Tweed Hospital	14
Wagga Wagga Health Service	1
Total	66

Introduction

HETI coordinates the recruitment of medical graduates from Australian Medical Council (AMC) accredited medical schools in Australia and New Zealand into prevocational training positions in NSW on behalf of Local Health Districts (LHDs).

The 2006 Council of Australian Governments (COAG) Agreement between the Commonwealth and the NSW government, guarantees all medical graduates from NSW medical schools, who are Australian citizens and permanent residents will be offered an internship position. International full fee-paying students are eligible to apply for internship but are not guaranteed an internship position.

The number of prevocational training positions available for the clinical year is determined by the LHDs. Prevocational training in NSW is made up of two postgraduate years. The intern and resident years are a period of supervised general clinical experience in accredited positions within a health service while receiving ongoing education and training.

Prevocational training positions are located within 15 prevocational training networks. Each network consists of a range of hospital and non-hospital facilities who work cooperatively to provide the training and experiences required for trainees to achieve general registration.

Allocation occurs using four recruitment pathways and the NSW Health Priority List. The recruitment pathways are:

1. Aboriginal Medical Workforce Pathway
2. Rural Preferential Recruitment Pathway
3. Direct Regional Allocation Pathway
4. Optimised Allocation Pathway

The Ministry of Health determines the NSW Health Priority List each year. This specifies the eligibility of applicants for the recruitment process, as well as the order in which offers will be made within the individual recruitment pathways. The NSW Health Priority List for the 2024 Clinical Year is displayed in Table 4. Offers are made according to a nationally agreed set of dates (Table 5).

NSW employs more interns than any other State or Territory in Australia. For the 2024 clinical year there were 1153.5 Ministry of Health funded positions, an increase of 33.5 positions from 2023. The number of positions available by clinical year is outlined in Table 6. The number of positions available for the 2024 clinical year by prevocational training network is listed in Table 7. In addition, eight positions for NSW graduates were recruited by the ACT to fill positions in South East Regional and Goulburn Hospitals which form part of the ACT prevocational training network.

For the 2024 clinical year a total of 1641 medical graduates applied through the Medical Intern Recruitment campaign. Of these, 930 were NSW domestic students who were guaranteed an internship offer.

Table 8 provides a summary report of the outcomes of the recruitment process for the clinical year by each priority category. All NSW domestic graduates received an offer, with 777 accepting a position. There were 133 NSW international students recruited; this was a decrease of 8 from the previous year. In addition, there were 150 graduates of interstate universities recruited (148 domestic students and two international) and one medical graduate of an AMC accredited offshore facility, a decrease by 28 from the previous year. The eight NSW Health funded positions at South East Regional and Goulburn Hospital were filled by the ACT.

A total of 1059 intern positions in NSW, were filled by 1061 medical graduates with four completing their internship part time.

Table 4: NSW Health priority list for intern recruitment for the 2024 clinical year

Priority Category	Definition
1	Medical graduates of NSW universities who are Australian/New Zealand citizens or Australian permanent residents (Commonwealth Supported Place and Domestic Full Fee paying). This priority category is guaranteed an intern position in NSW.
2	Medical graduates of interstate or New Zealand universities who completed Year 12 studies in NSW who are Australian/New Zealand citizens or Australian permanent residents (Commonwealth Supported Place, Domestic Full Fee paying or NZ equivalent).
3	Medical graduates of interstate or New Zealand universities who completed Year 12 studies outside of NSW who are Australian/New Zealand citizens or Australian permanent residents (Commonwealth Supported Place, Domestic Full Fee paying or NZ equivalent).
4	Medical graduates of NSW universities who are not Australian/New Zealand citizens or Australian permanent residents and who hold a visa that allows them to work or are able to obtain a visa to work.
5	Medical graduates of interstate or New Zealand universities who are not Australian/New Zealand citizens or Australian permanent residents and who hold a visa that allows them to work or are able to obtain a visa to work in Australia.
6	Medical graduates of Australian Medical Council accredited universities with campuses that are located outside of Australia or New Zealand (University of Queensland (UQ) Ochsner and Monash Malaysia) who are not Australian/New Zealand citizens or Australian permanent residents and who hold a visa that allows them to work or are able to obtain a visa to work in Australia.

Table 5: Key dates for NSW medical intern recruitment for the 2024 clinical year

Monday 8 May 2023	Medical Intern Recruitment campaign applications open
Monday 8 May 2023	RPR applications open
Thursday 8 June 2023 (11.59pm)	RPR applications close
Thursday 8 June 2023 (11.59pm)	Medical Intern Recruitment campaign applications close
Thursday 15 June 2023	Aboriginal Medical Workforce Pathway Committee meets
Monday 19 June 2023	RPR interview period commences
Thursday 22 June 2023	Extenuating Circumstances Committee meets
Wednesday 28 June 2023	National Audit of Applications commences
Thursday 29 June 2023	RPR interview period concludes
Thursday 29 June 2023 (11.59pm)	Deadline for RPR applicants to re-order/change RPR preferences
Monday 17 July 2023	National Offer Period 1 commences
Monday 17 July 2023	Aboriginal Medical Workforce pathway offers made
Monday 17 July 2023	RPR pathway offers commence
Wednesday 19 July 2023	Direct Regional Allocation pathway offers commence
Wednesday 19 July 2023	Optimised Allocation pathway offers commence
Friday 4 August 2023	Offer Period 1 closes
Tuesday 8 August 2023	1st National Audit of Acceptances and Unplaced Applicants commences
Thursday 17 August 2023	Offer Period 2 commences
Friday 8 September 2023 (9.00am)	Closing date for swaps requests
Friday 8 September 2023	Offer Period 2 closes
Tuesday 12 September 2023	2nd National Audit of Acceptances and Unplaced Applicants
Thursday 21 September 2023	Offer Period 3 commences
Friday 13 October 2023	Offer Period 3 closes
Tuesday 17 October 2023	3rd National Audit of Acceptances and Unplaced Applicants commences
Thursday 26 October 2023	Offer Period 4 commences
Friday 17 November 2023	Offer Period 4 closes – National Intern Recruitment Close Date
Tuesday 21 November 2023	4th National Audit of Acceptances and Unplaced Applicants commences
Monday 4 December 2023	National Late Vacancy Management (LVM) process starts
Friday 22 March 2024	National Late Vacancy Management (LVM) process closes

Table 6: NSW Health funded intern positions from 2015 – 2024 clinical years

Positions by Local Health District / Private Health Ltd	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Adventist Health Care Ltd										
Sydney Adventist Hospital	6	6	6	6	4	4	4	4	4	4
Total	6	6	6	6	4	4	4	4	4	4
Albury Wodonga Health										
Albury Wodonga Health – Albury Campus	5	5	5	5	5	5	5	10	10	10
Total	5	5	5	5	5	5	5	10	10	10
Central Coast LHD										
Gosford Hospital	35	33	36	36	39	38	38	38	38	40
Wyong Hospital	26	28	29	29	30	30	30	30	32	32
Total	61	61	65	65	69	68	68	68	70	72
Far West LHD										
Broken Hill Base Hospital	3	3	2	3	3	3	3	3	3	4
Total	3	3	2	3	3	3	3	3	3	4
Hunter New England LHD										
Armidale Hospital	3	3	3	3	3	3	3	3	3	3
Belmont Hospital	12	12	12	12	12	12	12	12	12	12
Calvary Mater Newcastle	22	22	22	22	20	19	19	19	19	19
John Hunter Hospital	53	53	55	53	51	50	48	49	49	49
Manning Base Hospital	6	6	6	6	6	8	10	11	11	12
Tamworth Hospital	18	18	16	18	20	20	20	21	21	23
Maitland Hospital	6	6	6	6	8	8	8	10	10	11
Hunter New England Mental Health	5	5	5	5	5	5	5	5	5	5
Total	125	125	125	125	125	125	125	130	130	134
Illawarra Shoalhaven LHD										
Bulli Hospital and Aged Care Centre	4	4	4	4	4	4	4	4	4	4
Port Kembla Hospital*	1	1	1	1	1	1	1	1	1	1
Shellharbour Hospital	4	4	3	3	3	3	3	3	3	7
Shoalhaven District Memorial Hospital	7	7	8	8	9	9	9	9	9	11
Wollongong Hospital	49	49	49	49	48	52	52	57	58	53
Total	65	65	65	65	65	69	69	74	75	76
Mid North Coast LHD										
Coffs Harbour Health Campus	19	19	19	19	19	19	19	22	24	28
Port Macquarie Base Hospital	16	16	16	16	16	16	16	18	18	21
Total	35	35	35	35	35	35	35	40	42	49
Murrumbidgee LHD										
Griffith Base Hospital	1	2	2	2	2	2	2	2	2	2
Wagga Wagga Health Service	22	22	22	22	25	25	27	28	28	30
Total	23	24	24	24	27	27	29	30	30	32
Nepean Blue Mountains LHD										
Blue Mountains District Anzac Memorial Hospital	3	3	2	2	3	3	3	3	3	3
Hawkesbury District Health Service	5	5	3	3	4	4	4	4	4	4
Nepean Hospital	51	51	54	56	58	56	59	60	67	68
Total	59	59	59	61	65	63	66	67	74	75

Northern NSW LHD										
Lismore Base Hospital	17	14	14	14	14	14	14	15	17	21
The Tweed Hospital	18	18	18	18	18	18	18	18	25	25
Total	35	32	32	32	32	32	32	33	42	46
Northern Sydney LHD										
Hornsby Ku-ring-gai Hospital			17	17	17	17	17	17	17	17
Manly Hospital	35	35	8	8	0	0	0	0	0	0
Mona Vale Hospital			10	10	2	2	2	2	2	2
Northern Beaches Hospital	0	0	0	0	18	17	17	17	17	17
Royal North Shore Hospital	44	44	44	44	44	44	45	44	44	44
Ryde Hospital	11	11	11	11	11	11	10	10	10	10
North Shore Private							2	2	2	2
Total	90	90	90	90	92	91	93	92	92	92
St Vincents Health Australia										
St Vincent's Hospital	29	29	29	29	29	29	29	29	29	29
Total	29	29	29	29	29	29	29	29	29	29
South Eastern Sydney LHD										
Calvary Healthcare Kogarah	2	2	2	2	2	2	2	2	2	2
St George Hospital & Community Health Service	43	43	43	43	43	43	48	49	49	49
Sutherland Hospital	24	24	24	24	24	24	18	18	18	18
Prince of Wales Hospital	36	36	37	37	37	37	37	37	44	47
War Memorial Hospital	0	0	0	0	0	0	0	0	0	0
Total	105	105	106	106	106	106	105	106	113	116
South Western Sydney LHD										
Bankstown-Lidcombe Hospital	46	26	27	27	27	27	27	29	31	31
Campbelltown/Camden Hospital		20	19	19	24	24	24	24	26	29
Fairfield Hospital		6	10	10	10	10	10	10	11	11
Liverpool Hospital	51	45	41	41	46	46	46	46	51	56
Total	97	97	97	97	107	107	107	109	119	127
Sydney LHD										
Balmain Hospital	3	3	3	3	3	3	3	3	3	3
Canterbury Hospital	42	9	10	11	11	11	12	12	12	12
Concord Hospital		33	33	32	32	35	33	33	38	37.5
Royal Prince Alfred Hospital	46	46	46	46	48	48	48	48	48	48
Total	91	91	92	92	94	97	96	96	101	100.5
Western NSW LHD										
Bathurst Health Service	5	5	5	7	7	7	11	11	11	10
Dubbo Hospital	12	12	12	12	12	13	14	16	18	18
Orange Health Service	15	17	16	18	17	19	19	19	20	22
Total	32	34	33	37	36	39	44	46	49	50
Western Sydney LHD										
Auburn Hospital	10	10	10	10	10	10	10	10	10	10
Blacktown Hospital & Mt Druitt Hospital	39	42	47	47	47	47	48	48	48	48
Westmead Hospital	70	70	70	70	73	73	73	79	79	79
Total	119	122	127	127	130	130	131	137	137	137
Grand total	980	983	992	999	1024	1030	1041	1074	1120	1153.5

Table 7: Available NSW PGY1 position capacity by prevocational training network and RPR hospitals for 2024

Prevocational Training Network	Positions in 2023	Positions in 2024
Network 1: Inner West & Western Plains	69	69
Network 2: Bankers and Campers	57	60
Network 3: Concord & Canterbury & Broken Hill Hospital	53	53.5
Network 4: South West Sydney, Tweed Heads	87	92
Network 5: North Shore & Port Mac	74	77
Network 6: Hornsby & Northern Beaches	40	40
Network 7: Central Coast Network	70	72
Network 8: St George, Sutherland, Albury & Griffith Hospitals	81	81
Network 9: From Coast to Coast	61	67
Network 10: Eastern to Greater Southern	57	59
Network 11: Oceans 11	75	76
Network 12: Hunter New England	130	134
Network 13: Westnet	133	139
Network 14: Nepean & Blue Mountains	74	75
Network 15: Central West	59	59
Grand Total	1120	1153.5

Rural Preferential Recruitment (RPR) Hospital	RPR hospital positions 2024	Network rotation positions 2024
Albury Wodonga Health – Albury Campus	10	0
Broken Hill Base Hospital	0*	4
Coffs Harbour Health Campus	19	9
Dubbo Hospital	14	4
Lismore Base Hospital	18	2
Manning Base Hospital	12	0
Orange Health Service	22	0
Port Macquarie Base Hospital	13*	8
Tamworth Hospital	23	0
Maitland Hospital	11	0
The Tweed Hospital	24	1
Wagga Wagga Health Service	30	0
SUBTOTAL	196	28
RPR Total***	224	

*Four RPR positions at Broken Hill Base Hospital were converted to rotational positions and filled through the network.

*One position at Port Macquarie Base Hospital was converted to a rotational position and filled through the network.

Table 8: Outcome of allocation process for 2024 clinical year by priority category

Priority category	Offer accepted (head count)	Offer declined	Withdrawn prior to offer	Not eligible to receive offer in LVM	Total
1	777*	153	0	0	930
2	119	74	0	0	193
3	29	129	13	0	171
4	133	47	4	0	184
5	2	66	4	0	72
6	1	75	4	11	91
Totals	1061	544	25	11	1641

*Four category 1 applicants are completing their internship part time.

Definitions	
Offer accepted	The applicant has accepted a preliminary position offer.
Offer declined	The applicant has either: declined a preliminary offer, withdrawn their application after accepting an offer, or failed to respond to a preliminary offer within the nominated timeframe.
Withdrawn prior to offer	The applicant has withdrawn their application following the audit of applications and prior to receiving a preliminary position offer.
Not Eligible to receive offer in LVM	The applicant was not eligible to participate in the Late Vacancy Management process.

Table 9: Acceptances by NSW university and priority category for 2024 clinical year

NSW Universities	NSW domestic graduate acceptances (Category 1)	NSW international graduate acceptances (Category 4)	Total
University of Sydney	184	40	224
University of New England	53	0	53
University of New South Wales	207	48	255
University of Newcastle	73	14	87
Notre Dame University Sydney	78	3	81
Western Sydney University	91	21	112
Wollongong University	50	4	54
Macquarie University	41	3	44
Total	777	133	910

Aboriginal Medical Workforce Pathway

To build capacity and success of the Aboriginal health workforce, it is important to recognise the importance of cultural issues. This includes fulfilling family responsibilities, participating in the community and having access to country. In addition, it is important to ensure the workplace is a culturally safe environment and that Aboriginal people are provided with the necessary support to succeed.

The development and implementation of an Aboriginal medical graduate program by HETI is informed by key partners including Aboriginal medical students, Aboriginal medical graduates, the Australian Indigenous Doctors Association (AIDA) and NSW Ministry of Health Aboriginal Workforce Unit.

The NSW Ministry of Health, Local Health Districts, Specialist Health Networks and other Health Organisations are committed to deliver the Aboriginal medical graduate workforce recruitment initiative under the NSW Health Aboriginal Workforce Composition Policy¹.

The Aboriginal Medical Workforce program offers Aboriginal medical graduates a recruitment pathway to prevocational training in NSW at a hospital or training network of their first preference. The program has been offered as a recruitment pathway for final year medical students since 2010.

To be eligible for the Aboriginal Medical Workforce (AMW) pathway, applicants are required to address a number of criteria on the online application form. The criteria requests applicants to: provide their personal story including connections to family, culture and country, and how they celebrate their Aboriginality; provide reasons why they have chosen the selected prevocational training network or rural preferential hospital; outline how they have shown commitment to improve health outcomes for Aboriginal and/or Torres Strait Islander people; what being an Aboriginal doctor means to them and what their goals are as an Aboriginal health practitioner; and, comment on their association or membership to organisations as AIDA, IAHA, NATSIHWA, ALS NSWALC or other community groups.

Applications for this pathway are assessed by a panel comprising of representatives from AIDA, NSW Ministry of Health's Aboriginal Workforce Unit, consumer representation and HETI.

For the 2024 clinical year, a total of 36 Aboriginal medical graduates applied via this pathway, including two interstate applicants. Of these, 30 applicants accepted positions in the hospitals or networks requested. Six applicants declined their offer.

¹ NSW Health Aboriginal Workforce Composition Policy (PD2023_046)

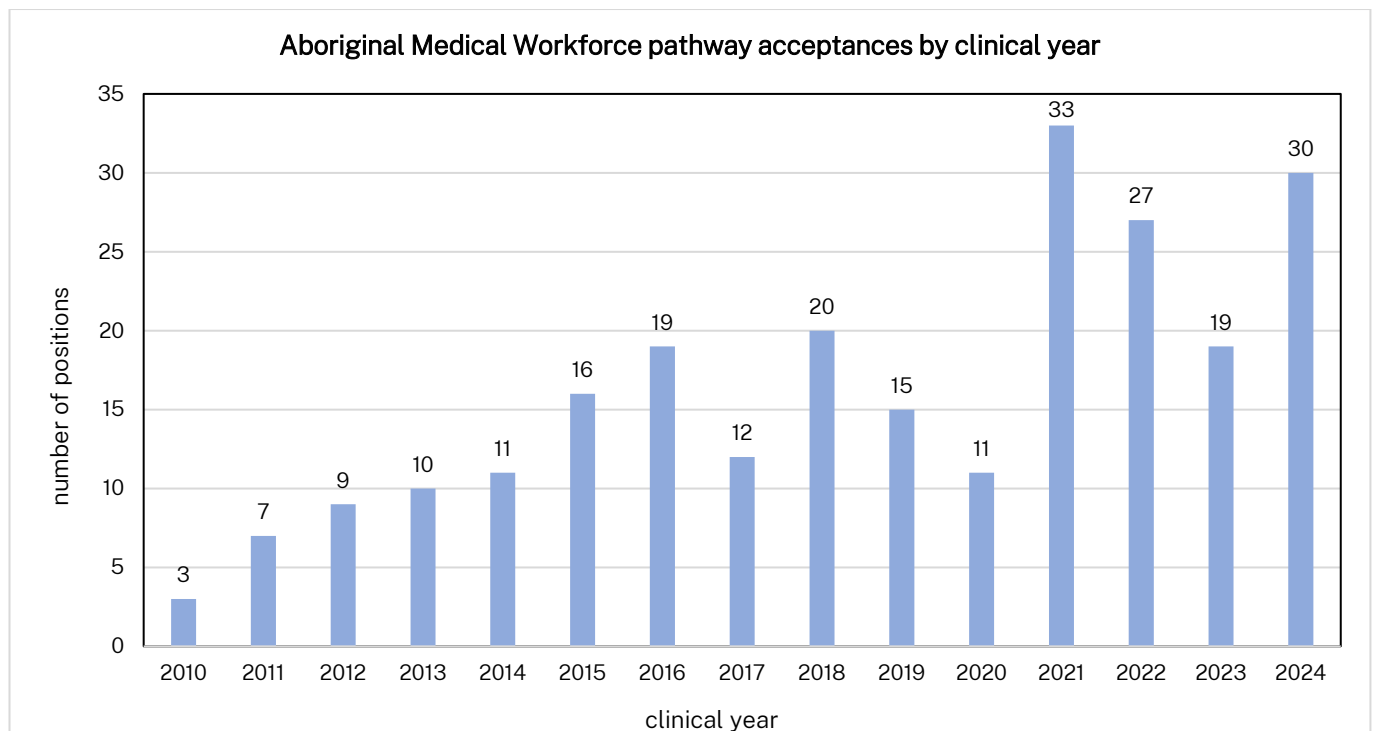
Table 10: Distribution of applicants through the Aboriginal Medical Workforce pathway and positions accepted

Aboriginal Medical Workforce Pathway for 2024 clinical year		
	Number of applicants	Accepted positions
NSW Universities	34	29
Interstate Universities	2	1
Total	36	30

Of the 30 Aboriginal trainees who commenced internship, 16 are in rural and regional locations in NSW. A total of 14 Aboriginal trainees were recruited to metropolitan networks in NSW.

Figure 1 below shows the number of Aboriginal medical graduates who accepted intern positions by this pathway since its commencement in 2010.

Figure 1: Aboriginal Medical Workforce pathway acceptances 2010 – 2024 clinical years



Rural Preferential Recruitment Pathway

The Rural Preferential Recruitment (RPR) pathway is a merit-based recruitment process that facilitates recruitment of rural cadets and all other medical graduates to prevocational training positions in rural hospitals. Applicants from all priority categories are eligible to apply.

The following principles underpin the development and review of the RPR pathway:

- Building and retaining a sustainable medical workforce in rural areas.
- Improving access to services to achieve better health outcomes across rural NSW.
- Ensuring a clear pathway from undergraduate training to postgraduate medical training positions in rural areas.

Applicants who wish to work in a rural hospital were required to complete an online application as part of the Medical Intern Recruitment campaign, as well as applying to individual rural hospitals through the JMO Career Portal. The rural hospitals, which are also known as RPR hospitals, interviewed and ranked applicants. Following interviews applicants had an opportunity to adjust their hospital preferences prior to hospitals finalising their preference ranking.

After completion of ranking by both the RPR hospitals and the applicants, HealthShare performed a preference matching process and provided the results to HETI. Offers were then made to RPR positions by HETI.

For the 2024 clinical year all offers were made to successfully matched category 1 and 2 applicants at the commencement of offer period one. The remaining positions were then offered to all successful and eligible applicants until all positions had been offered. Sixty-six RPR positions remained unfilled as outlined on page 6. These vacancies remained unfilled due to the exhaustion of eligible applicants on RPR e-lists and lack of interest from applicants through the Expression of Interest (EOI) process.

A total of 196 positions were available to be filled in rural hospitals. Of these, 122 positions were filled directly through the RPR pathway, 5 positions were filled through the Aboriginal Medical Workforce pathway and 3 positions were filled through an EOI process at the following hospitals bringing the total number of positions filled at rural hospitals to 130.

- Albury Wodonga Health - Albury Campus [1]
- Orange Health Service [1]
- The Tweed Hospital [1]

The EOI process is used in consultation with the RPR hospital to fill a vacancy when there are no successful or eligible applicants remaining on the preference matched list. The EOI process is completed by sending an email to all remaining unplaced applicants advising them where the position is located and requesting that applicants who wish to be considered for recruitment to that hospital advise HETI and provide their CV. The hospitals interviewed applicants who applied via the EOI process and provided HETI with a ranked list. HETI then made offers to these applicants.

In addition to the 196 positions available through the RPR pathway, there were 28 rotational positions in RPR hospitals. This includes four unfilled RPR positions at Broken Hill Base Hospital and one unfilled position at Port Macquarie Base Hospital that were filled as rotational positions through the network. The rotational positions provide opportunity for prevocational trainees appointed through any of the other recruitment pathways to experience a rural term as part of their prevocational training.

A summary of positions available for the 2024 clinical year by RPR hospital is provided in Table 11 below, and identifies positions filled directly through the RPR pathway at each rural hospital.

Table 11: Rural Preferential Recruitment pathway outcome for the 2024 clinical year

Network	Rural Hospital	Rural positions available for 2024 clinical year	Number of positions recruited via the RPR pathway (excluding EOI)	% of positions filled via RPR pathway (excluding EOI)
1	Dubbo Hospital	14	1	7%
3	Broken Hill Base Hospital	0*	0	0%
4	The Tweed Hospital	24	8	33%
5	Port Macquarie Base Hospital	13*	12	92%
8	Albury Wodonga Health – Albury Campus	10	6	60%
9	Lismore Base Hospital	18	14	78%
10	Wagga Wagga Health Service	30	28	93%
12	Tamworth Hospital	23	8	34%
12	Manning Base Hospital	12	3	25%
12	Maitland Hospital	11	11	100%
13	Orange Health Service	22	17	77%
13	Coffs Harbour Health Campus	19	14	74%
	Total	196	122	

*All four RPR positions at Broken Hill Base Hospital were converted to rotational positions and filled through the network.

*One RPR position at Port Macquarie Base Hospital was converted to a rotational position and filled through the network leaving 14 positions available through the RPR pathway.

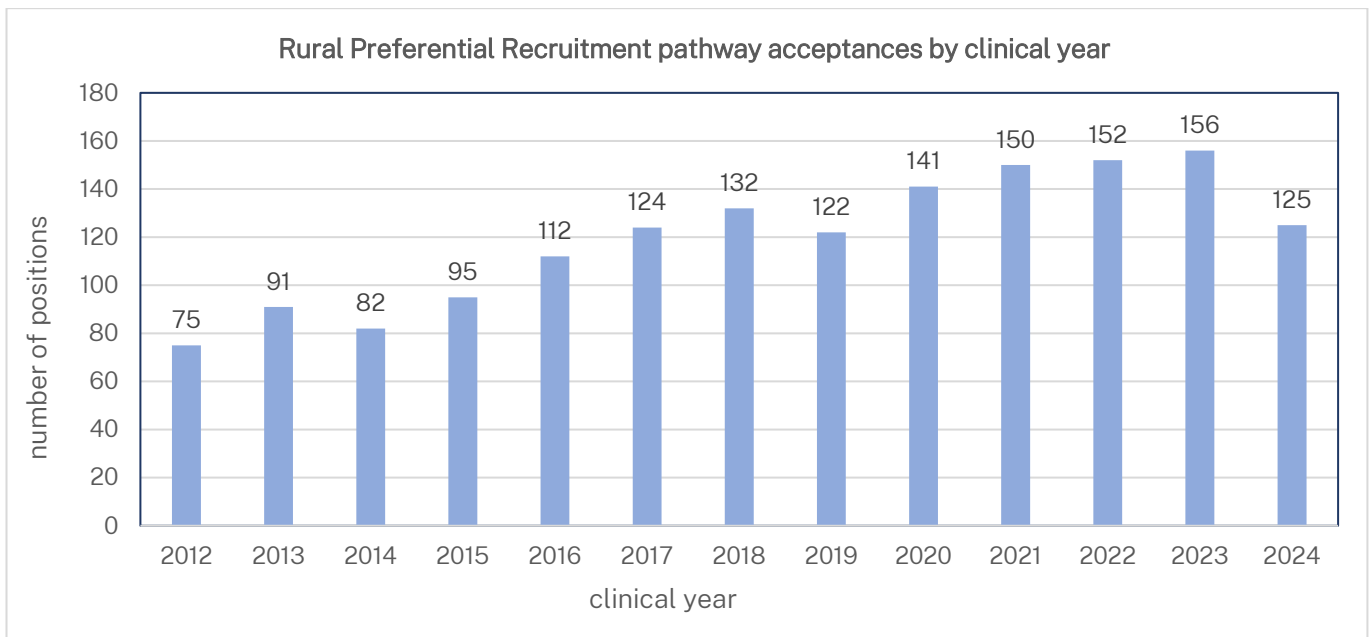
As outlined in Table 12 below, the majority (88%) of applicants accepting positions directly through the RPR pathway for the 2024 clinical year were NSW graduates; of these, 74% were NSW domestic graduates and 14% were NSW international graduates.

Table 12: NSW medical graduates accepting positions through the RPR pathway for the 2024 clinical year

RPR pathway acceptances for the 2024 clinical year for NSW medical graduates	
Domestic students (Category 1)	91
International students (Category 4)	17
Total	108

Figure 2 shows the number of applicants accepting positions at rural hospitals both through the RPR pathway and EOI process.

Figure 2: Acceptances RPR pathway and EOI processes 2012 to 2024 clinical years



Direct Regional Allocation Pathway

The Direct Regional Allocation (DRA) pathway gives priority to filling regional and outer metropolitan training positions and aims to build a sustainable regional and outer metropolitan workforce over the longer term in NSW.

The following principles underpin the development and review of the DRA pathway:

- Developing and maintaining a sustainable medical workforce in regional NSW and outer metropolitan Sydney.
- Ensuring equity of access to high quality care for patients in regional NSW and outer metropolitan Sydney.
- Ensuring fairness and transparency throughout the recruitment process.

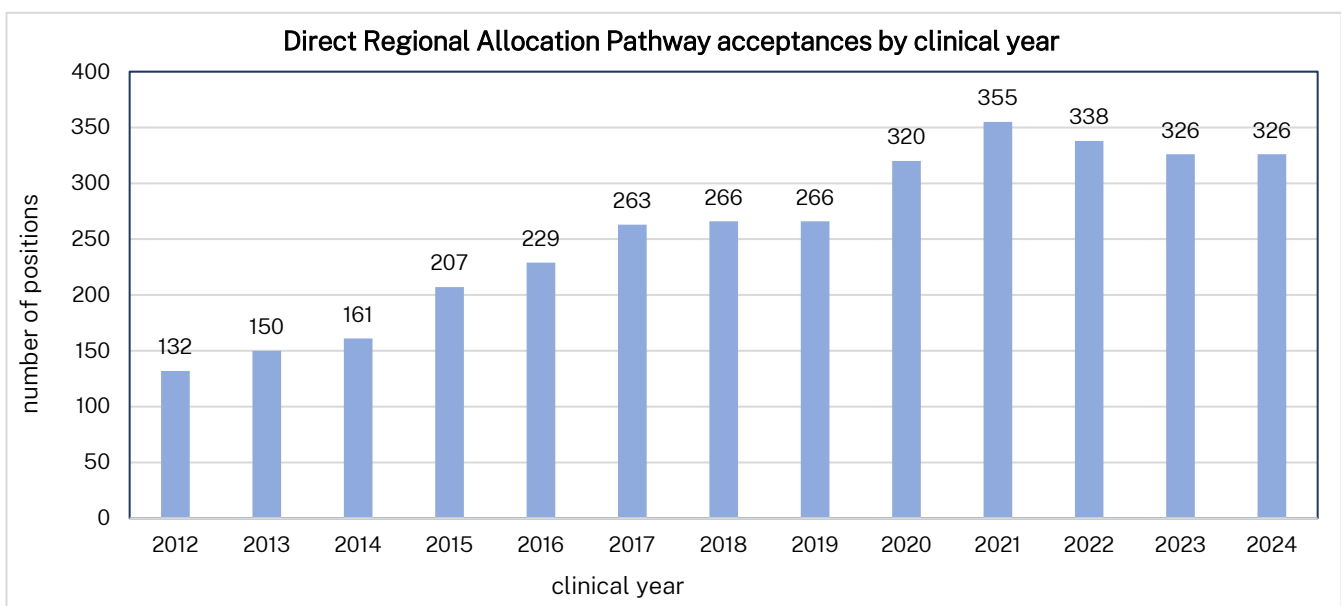
Medical graduates from priority categories 1 to 4 of the NSW Health Priority List are eligible to apply through this pathway. Applicants were required to preference one of the regional networks as their first choice in their online application.

HETI directly allocates category 1 applicants to their preferred regional network, when the number of applicants applying to the network is less or equal to the number of positions available.

If a regional network has fewer positions available than the number of category 1 applicants who listed it as their first preference, an algorithm randomly selects which applicants receive a position offer. When this occurs any category 1 applicants who do not receive an offer via the DRA pathway are automatically moved to the Optimised Allocation pathway.

A total of 498 positions were available to be filled at regional networks. Of these 326 positions were filled directly through the DRA pathway by 327 applicants (two part time applicants), 144 positions were filled through the Optimised pathway and 11 positions were filled through the Aboriginal Medical Workforce pathway. In total 481 positions were filled at the regional networks by 482 applicants as two applicants are competing their internship part time. 17 positions remained unfilled. Figure 3 shows the number of acceptances directly through the DRA pathway at regional networks by clinical year between 2012 – 2024.

Figure 3: Direct Regional Allocation pathway acceptances 2012 to 2024 clinical year



The proportion of positions filled at a regional network directly through the DRA pathway is shown in Table 13.

Table 13: Direct Regional Allocation pathway outcome by network for the 2024 clinical year

Network	Number of positions available in regional networks (less RPR positions)	Number of positions filled through the DRA pathway	Percentage (%) of positions filled through the DRA pathway
2	60	21	35%
4	68	46	67%
7	72	48	67%
11	76	38	50%
12	88	52	59%
14	75	65	87%
15	59	56	94%
Total	498	326*	

*Two category 1 applicants are completing their internship part time.

As outlined in Table 14 below, the majority (80%) of applicants accepting DRA pathway positions for the 2024 clinical year were NSW graduates; of these, 50% were NSW domestic graduates and 30% were NSW international graduates.

Table 14: NSW medical graduate acceptances through the Direct Regional Allocation pathway for the 2024 clinical year

Direct Regional Allocation pathway acceptances (headcount) for NSW medical graduates	
Domestic students (Category 1)	165
International students (Category 4)	98
Total	263

Optimised Pathway

The Optimised Allocation pathway is the main pathway through which eligible medical graduates from any priority category can be allocated to internship positions in NSW.

Applicants rank each of the 15 prevocational training networks and positions are allocated according to the preferences and priority category of the applicant. The algorithm used in the allocation to intern positions through the Optimised Allocation pathway is designed to deliver the best outcome and fairest result for all applicants in the same priority group.

For the 2024 clinical year, 579 applicants were allocated through the Optimised Allocation pathway, of these 492 (85%) were NSW domestic graduates with two completing their internship part time.

Extenuating Circumstances and Change in Personal Circumstances

HETI recognises that some applicants seeking a prevocational training position may have extenuating circumstances that can limit their ability to work in one or more of the prevocational training networks in NSW. For the 2024 clinical year the criteria for granting extenuating circumstances was limited to:

1. The applicant requires ongoing highly specialised medical treatment and/or
2. Separation of the applicant from their dependent/s during prevocational training would have a significant negative impact on the functioning of the applicant and/or their dependent/s, and/or
3. The applicant will be going through a significant life event during prevocational training that would have a negative impact on the applicant and/or their dependent/s and/or
4. The applicant has a disability with specific access requirements.

Twenty-seven applications were received for consideration by the Extenuating Circumstances Committee; an increase of 17 from the previous year. Of these, 25 applicants were granted extenuating circumstances.

A further four applications were received for consideration of change in personal circumstances following the commencement of the offer periods. The applications were assessed against the extenuating circumstances criteria as outlined above and three applicants were granted change in personal circumstances.

National Intern Data Audit

The purpose of the national audit process is to ensure all medical graduates applying for internship have the most equitable and timely opportunity to obtain an internship position in Australia. The process assists to:

1. Identify the number of individual applicants applying for intern positions
2. Identify any shortfall in the number of intern positions available nationally, and
3. Quantify and attempt to resolve multiple acceptances by applicants across jurisdictions.

All States and Territories provide information for intern applicants to the National Data Manager who undertakes an audit process. Following each national offer period, applicants who have accepted intern positions in more than one jurisdiction are identified and contacted by the National Audit Data Manager and asked to withdraw from all intern positions, except the one where they intend to undertake their intern year.

In 2024 there were four National Audits of Acceptances and Unplaced Applicants. HETI provided data to the National Data Manager for each of these audits.

National Late Vacancy Management Process

The Late Vacancy Management (LVM) process was managed by the National Audit Data Manager to assist jurisdictions in filling vacancies after the national closing date for intern recruitment. Applicants who had not been matched to a position in any state or territory at the national close date were invited to opt into the process.

The LVM process ran between 4 December 2023 and 22 March 2024.

For the 2024 clinical year, NSW had 78.5 vacancies leading into the LVM process due to unfilled positions from previous offer periods. At the opening of the LVM process, there were no applicants on the LVM list who had applied for an intern position in NSW. The applicant pool managed by HETI was exhausted and no further intern positions could be filled for the 2024 clinical year. LHDs were advised by the Ministry of Health to manage the vacancies using a range of appropriate strategies in accordance with their local recruitment processes.

During the LVM, there were further vacancies due to declines from applicants who had previously accepted a position. At the close of the LVM process on 22 March 2024, there were 94.5 vacancies in total at Networks and RPR hospitals as listed on pages 5 and 6 of this report.

Appendix 1

NSW Prevocational Training Networks

Networks	Accredited Prevocational Training Provider	LHD/ Provider	Classification	Accredited until
Network 1 <i>Inner West and Western Plains</i>	Dubbo Hospital <ul style="list-style-type: none"> Dubbo Subacute Unit 	WNSWLHD	T5 OT	August 2027
	Royal Prince Alfred Hospital <ul style="list-style-type: none"> Balmain Hospital Chris O'Brien Lifehouse 	SLHD	T5 OT OT	July 2025
Network 2 <i>Bankers and Campers</i>	Bankstown-Lidcombe Hospital	SWSLHD	T5	April 2025
	Bowral & District Hospital (PGY2 only)	SWSLHD	R	August 2025
	Campbelltown/Camden Hospital	SWSLHD	T5	June 2025
Network 3 <i>Concord, Canterbury & Broken Hill Base Hospitals</i>	Broken Hill Base Hospital	FWLHD	T3	December 2027
	Canterbury Hospital	SLHD	T3	June 2026
	Concord Hospital	SLHD	T5	June 2026
Network 4 <i>South West Sydney, Tweed Heads</i>	Fairfield Hospital <ul style="list-style-type: none"> Braeside Hospital, Fairfield 	SWSLHD Private	T3 OT	July 2024
	Liverpool Hospital	SWSLHD	T5	December 2027
	The Tweed Hospital <ul style="list-style-type: none"> Byron Central Hospital 	NNSWLHD	T5 OT	October 2027

Networks	Accredited Prevocational Training Provider	LHD/ Provider	Classification	Accredited until
----------	--	------------------	----------------	------------------

Network 5 <i>North Shore & Port Macquarie</i>	Port Macquarie Base Hospital	MNCLHD	T5	April 2025
	<ul style="list-style-type: none"> Kempsey District Hospital Wauchope District Memorial Hospital (PGY2 only) 		OT OT	
	Royal North Shore Hospital	NSLHD	T5	September 2026
<ul style="list-style-type: none"> North Shore Private Hospital 	OT			
	Ryde Hospital	NSLHD	T3	June 2025

Network 6 <i>Hornsby & Northern Beaches</i>	Hornsby Ku-ring-gai Hospital	NSLHD	T5	October 2027
	<ul style="list-style-type: none"> Hornsby & Brooklyn GP Unit 		OT	
	Northern Beaches Hospital	NSLHD	T5	October 2024
	Sydney Adventist Hospital	Private	R	September 2027
	Mona Vale Hospital	NSLHD	R	September 2024

Network 7 <i>Central Coast Network</i>	Gosford Hospital	CCLHD	T5	November 2026
	<ul style="list-style-type: none"> Woy Woy Hospital 		OT	
	Wyong Hospital	CCLHD	T5	August 2024

Network 8 <i>St George, Sutherland, Albury & Griffith Hospitals</i>	Albury Wodonga Health – Albury Campus	AWH	T5	Accredited by Victoria - PMCV
	Griffith Base Hospital	MLHD	R	November 2025
	Sutherland Hospital	SESLHD	T3	September 2024
	St George Hospital and Community Health Service	SESLHD	T5	June 2025
<ul style="list-style-type: none"> Calvary Health Care Kogarah Kirketon Road Centre The Forensic Hospital, Malabar Justice Health 	OT OT OT			

Networks	Accredited Prevocational Training Provider	LHD/ Provider	Classification	Accredited until
----------	--	------------------	----------------	------------------

Network 9 <i>From Coast to Coast</i>	Lismore Base Hospital <ul style="list-style-type: none"> • Kyogle McKid Medical Centre • Maclean District Hospital • Grafton Base Hospital • Ballina District Hospital 	NNSWLHD	T5	January 2028
	<ul style="list-style-type: none"> • OT • OT • OT • OT 			
	Prince of Wales Hospital <ul style="list-style-type: none"> • Sydney Children's Hospital • Royal Hospital for Women 	SESLHD	T5	September 2025
			<ul style="list-style-type: none"> • OT • OT 	

Network 10 <i>Eastern to Greater Southern</i>	Wagga Wagga Health Service <ul style="list-style-type: none"> • Coolamon Shire Medical and Dental Clinic (PGY2 only) • Finley Medical Centre • Cootamundra Medical Centre • Riverina Medical and Dental Corporation GP • Deniliquin General Practice 	MLHD	T5	May 2024		
	<ul style="list-style-type: none"> • OT • OT • OT • OT 					
	St Vincent's Private Hospital (PHS)		Private		T3	February 2027
	Mater Hospital Sydney (PHS)		SVHN		T3	November 2024
	Calvary Riverina Health Care (PHS)		SVHN		R	February 2027
	St Vincent's Hospital <ul style="list-style-type: none"> • War Memorial Hospital (PGY2 only) • St Joseph's Hospital 	SVHN	T5	July 2027		
	<ul style="list-style-type: none"> • OT • OT 					

Networks	Accredited Prevocational Training Provider	LHD/ Provider	Classification	Accredited until
----------	--	------------------	----------------	------------------

Network 11	Wollongong Hospital	ISLHD	T5	August 2026
	<ul style="list-style-type: none"> Bulli Hospital and Aged Care Centre Coledale Hospital (PGY2 only) 		OT	
<i>Oceans 11</i>	Shoalhaven District Memorial Hospital	ISLHD	T3	October 2026
	<ul style="list-style-type: none"> Milton General Practice Milton Family Medical Practice 		OT	
	Shellharbour Hospital	ISLHD	T3	January 2025
	<ul style="list-style-type: none"> Port Kembla Hospital 		OT	

Network 12	Armidale Hospital	HNELHD	R	July 2027		
	Belmont Hospital	HNELHD	T3	June 2026		
	Calvary Mater Newcastle	HNELHD	T3	May 2025		
	Hunter New England Mental Health - The Mater Hospital Campus	HNELHD	R	September 2025		
	John Hunter Hospital	HNELHD	T5	March 2025		
	Maitland Hospital	HNELHD	T5	December 2026		
	<ul style="list-style-type: none"> Kurri Kurri Hospital 		OT			
	<i>Hunter New England</i>	Manning Base Hospital	HNELHD	T5	October 2026	
<ul style="list-style-type: none"> Gloucester Medical Practice Wingham Community Hospital 		OT		OT		
	Tamworth Hospital	HNELHD	T5	August 2027		
	<ul style="list-style-type: none"> Scone Medical Practice Gwydir Medical Associate Medical Practice 		OT		OT	OT

Networks	Accredited Prevocational Training Provider	LHD/ Provider	Classification	Accredited until
----------	--	------------------	----------------	------------------

Network 13 <i>Westnet</i>	Auburn Hospital	WSLHD	R	September 2026
	Macquarie University Hospital <ul style="list-style-type: none"> Lady Davidson Private Hospital 	Private	T3 (PHS) OT	November 2024
	The Children's Hospital at Westmead (PGY2 only)	SCHN	R	December 2024
	Coffs Harbour Health Campus <ul style="list-style-type: none"> Macksville District Hospital Star Street Medical Centre 	MNCLHD	T5 OT OT	June 2024
	Westmead Hospital <ul style="list-style-type: none"> Cumberland Hospital 	WSLHD	T5 OT	March 2025
	Orange Health Service <ul style="list-style-type: none"> Cowra Health Service 	WNSWLHD	T5 OT	May 2027

Network 14 <i>Nepean & Blue Mountains</i>	Blue Mountains District ANZAC Memorial Hospital	NBMLHD	R	September 2027
	Hawkesbury District Health Service	NBMLHD	R	March 2025
	Nepean Hospital <ul style="list-style-type: none"> Lithgow Hospital 	NBMLHD	T5 OT	September 2026

Network 15 <i>Central West</i>	Bathurst Health Service <ul style="list-style-type: none"> Mudgee Medical Centre Ochre Health Medical Centre Parkes 	WNSWLHD	R OT OT	July 2025
	Blacktown Hospital & Mt Druitt Hospital <ul style="list-style-type: none"> Cumberland Hospital 	WSLHD	T5 OT	September 2027

Prevocational Training Provider Classification

T3	3 Term Administrative Hospital Prevocational Training Provider (T3)
T5	5 Term Administrative Hospital Prevocational Training Provider (T5)
R	Rotation Hospital
OT	Offsite Term

Abbreviations

PGY2	Post Graduate Year 2
PHS	Junior Doctor Training Program - Private Hospital Stream

Heath Education and Training Institute
1 Reserve Road
ST LEONARDS NSW 2069

LOCKED BAG 2030
ST LEONARDS NSW 1590

W: <https://heti.nsw.gov.au/>



HEALTH
EDUCATION
& TRAINING