Graduate School of Medicine | GSM
Faculty of Science, Medicine and Health

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Tracking What Matters - FRAME workshop

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The **Federation of Rural Australian Medical Educators** (FRAME) is the peak body representing those Rural Clinical Schools (RCS) and Regional Medical Schools (RMS) funded (in whole or in part) through the Australian Government Department of Health and Ageing's Rural Health Multidisciplinary Training program (RHMT). FRAME was established in 2003 to advance the causes common to medical student training in rural and remote Australia. Under the auspices of FRAME medical schools with RHMT programs come together to discuss and promote matters of mutual interest. RCS and RMS are required to work within and respond to the parameters set by the Australian Government Department of Health and Ageing for the RHMT. https://ausframe.org/

Slide 1/10 – Tracking What Matters: Linking Data, Community Outcomes, and Workforce Impact

UOW medical graduate tracking through data reporting

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Hi everyone, Today I'll be sharing this Grad Tracking work from a reporting perspective – how we link and use data to understand UOW medical graduate journeys and workforce outcomes.

Slide 2/10 – Why Track Graduates?

UNDERSTAND GRADUATE PATHWAYS

MEASURE WORKFORCE OUTCOMES

SUPPORT FUTURE WORKFORCE PLANNING

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Graduate tracking helps us answer important questions.

- **Where do our graduates come from?**
- **What training experiences do they have during their university medical course?**
- **Where do they go on to work?**

Understanding these pathways helps us better understand our workforce impact and support future planning.

Slide 3/10 – Linking the data together

Student origin

Training experiences

Current work location

Graduate survey

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To understand the graduate journey, we **linked** information from several data sources.

- **Admissions data tells us about graduate background and origin**
- **Training data shows their university clinical placements experience, including rural exposure.**
- **Workforce data shows where graduates are currently working and have worked.**
- **Survey data provides additional insight from the graduates themselves like which Hospital they have applied to for their internship.**

Linking these data sources help us build a more complete picture of graduate outcomes.

Slide 4/10 – Graduate Tracking Dashboard

Interactive Tableau dashboard

Explore graduate outcomes

Identify trends and patterns

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We developed a Tableau dashboard to bring this information together in one place.
The **GSM Grad Tracking** dashboard allows us to explore different parts & themes of the graduate journey, including origin, education clinical placement training experiences, current work locations, and work specialities.
The aim was to make the data easier to explore and support meaningful conversations.

Slide 5/10 – Sankey chart: Graduate pathways

Follow graduate movement

Visualise pathways

Identify patterns

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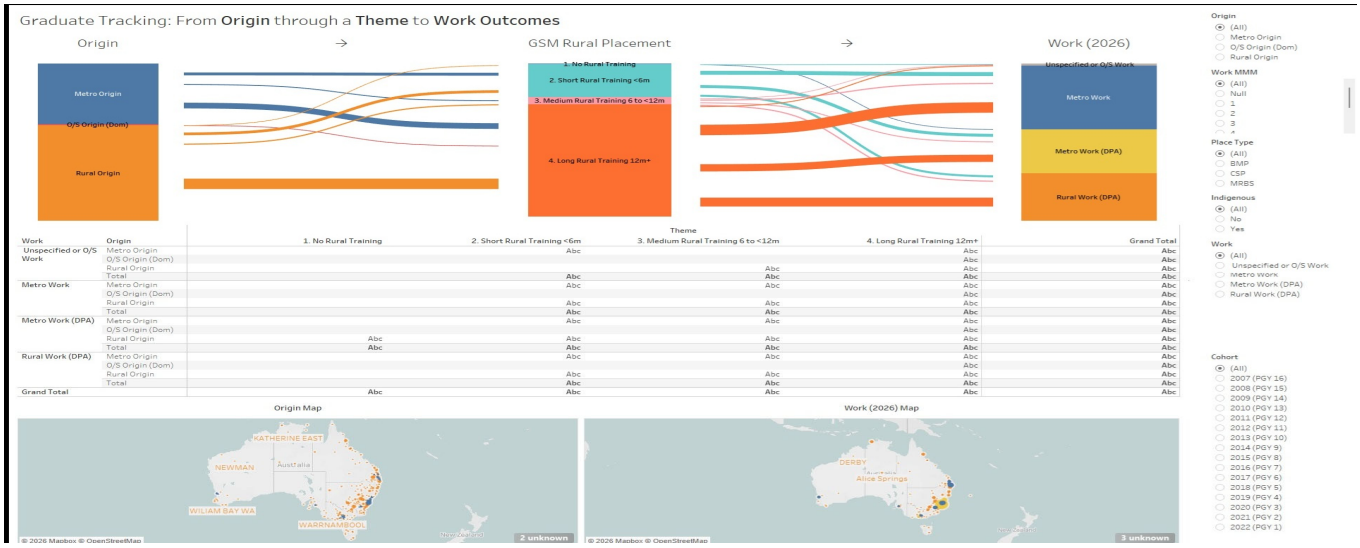
One of the ways we show graduate movements is through a **Sankey chart**. The benefit is that it turns a table of numbers into a story of movement and pathways. I'll explain the Sankey chart visualisation in the next slide.

Slide 6/10 - Sankey chart



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The left side shows where graduates started – metro or rural origin, the middle shows a Theme (for e.g. student rural training exposure), and the right side shows where graduates are working now in 2026 – metro, metro distribution priority area (DPA) or rural location.

The lines shows how graduates move through these stages. The wider the line the more graduates have followed that path.

This gives us a simple way to see the graduate journey and identify patterns that may be difficult to see in a table of numbers.

Slide 7/10 – Rural Training Exposure

RURAL PLACEMENT EXPERIENCE

LEVELS OF RURAL EXPOSURE

WORKFORCE OUTCOMES

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We looked at rural exposure during university training.
Instead of only asking whether someone had a rural experience, we looked at the amount of rural exposure they received during their medical course.
This helps us explore whether different training experiences are linked to different workforce outcomes.

Slide 8/10 – Explore workforce outcomes by Themes

No.	Sankey Theme
1	Clinical Placement - UOW medical students completion of rural training (short 5 weeks or long 12 months) during the course
2	Course Entry Offer Type - Bonded BMP, CSP
3	Internship PGY 1 Locations
4	Hometown to Work km
5	Specialisations - General Practice, Surgery, Psychiatry etc.
6	MMM work locations
7	LHD work locations
8	Work locations history - Overall exposure to rural and metro DPA locations throughout their working career

We also looked at workforce outcomes by specialisation.
This helps us understand our workforce contribution across different areas of healthcare.

Slide 9/10 – What we have learned

Better understanding of graduate pathways

Supports workforce planning

Informs future decisions

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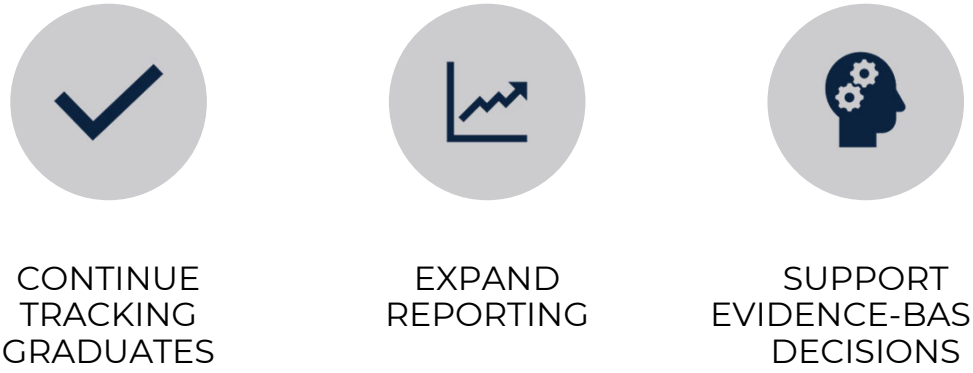
To summarise, this work shows how reporting can turn data into meaningful insights. By bringing & linking different data sources together, we can better understand the journey our medical graduates take from their origin, through education training, and into the workforce.
These insights help support conversations around workforce planning and future decision making.

Slide 10/10 – Future opportunities



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Moving forward, this work provides an opportunity to continue tracking medical graduates over time.
By understanding where graduates are working, particularly across rural and remote communities in Australia, we can better understand our contribution to Healthcare workforce needs.
Continuing to build this reporting capability will help inform future planning and support decisions around education, training and healthcare workforce outcomes.

Thank you for your time. I welcome any questions or discussion.