

Profile of the Medical Workforce in NSW, 2003

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1

INTRODUCTION

The annual medical labour force survey

(a) Overview

Each year a labour force survey questionnaire is forwarded to medical practitioners renewing their registration in NSW. Information from the survey contributes to constructive discussion of medical workforce planning issues for the NSW Health Department, Australian Government, Health Services, professional colleges and associations, the NSW Medical Board, medical faculties and other interested bodies.

Response rates to the survey have been high during the past decade, with 92.38% in 1995 and 90.0% in 2000. However, the response rate declined to 71.5% in 2002, probably due to changes in the survey collection method although it has now improved again to 80.5%. This was after a sample collection in 2001 of 24.9% (see Appendix A on Timing of the Survey) The continued support of the NSW Medical Board, professional organisations and medical practitioners in the distribution and completion of the survey is appreciated.

(b) Availability of survey information

The *Profile of the Medical Labour Force* has been published to provide detailed information about the medical labour force. The last *Profile of the Medical Labour Force* was published in 2004, documenting 2002 data. In addition to comprehensive data from the most recent survey, longitudinal data is included where data is available from the surveys undertaken from 1993 onwards. Where there are inconsistencies in the data, these are noted (see the notes in Appendix A on longitudinal data).

Additional survey analysis can be obtained by forwarding a written request to the contact address in the front of the publication. Contact should be made to clarify the information required and to determine if a fee may apply. A charging policy is available on request.

Strict procedures are followed to ensure the privacy of individual medical practitioners who respond to the survey. An agreement between NSW Health and the NSW Medical Board prevents access to identifying data. Survey information will not be made available in any format that enables the identification of individual respondents.

Methodology

A detailed description of the methodology used in calculating response rates to the workforce survey and determining workforce estimates by category is described in Appendix A. The workforce size estimates will vary from the workforce estimates quoted in previous profiles for 1997, 2000, 2001 and 2002, and these are explained in Appendix A. Data for 2001 where reported is calculated as the midpoint between 2000 and 2002, as the small sample size precluded detailed reporting of the data.

Major findings

a) Workforce status

Table 1.1: Workforce status of survey respondents, NSW, 2003

Work Status	No.		%		No.		%		%	
	Sex unknown		Female		Male		Total		Female	
Working in medicine in NSW										
Only in NSW	678	63.5%	4,330	79.9%	9,366	76.4%	14,374	76.7%	31.6%	
Mainly in NSW	12	1.1%	89	1.6%	354	2.9%	455	2.4%	20.1%	
On extended leave	6	0.6%	99	1.8%	36	0.3%	141	0.8%	73.3%	
Other respondents										
Not working in medicine in NSW	131	12.3%	750	13.8%	2011	16.4%	2,892	15.4%	27.2%	
Retired	240	22.5%	149	2.8%	497	4.1%	886	4.7%	23.1%	
Total	1,067	100.0%	5,417	100.0%	12,264	100.0%	18,748	100.0%	30.6%	

There were 24,708 medical practitioners registered with the NSW Medical Board during 2003, and 18,748 responded to the workforce survey, resulting in a response rate for all registrants of 80.5%. Appendix A describes this information in more detail, together with a more detailed breakdown of work status categories (see Table A1.5). Table 1.1 shows 79.9% of respondents were working in medicine in NSW, with 83.3% of female respondents working and 79.6% of male respondents working. Some 15.4% reported that they were not working in medicine in NSW, and 4.7% indicated that they were retired.

The tables reported in Sections 3 to 7 of the profile provide information on the medical workforce in total (Section 3), and then for each of the categories (Sections 4 to 7). The Appendices provide additional information on all registrants by category, on those seeking work in medicine in NSW and the average years those working in medicine in NSW intend to remain in the workforce.

b) Trends in size of medical practitioner workforce by category

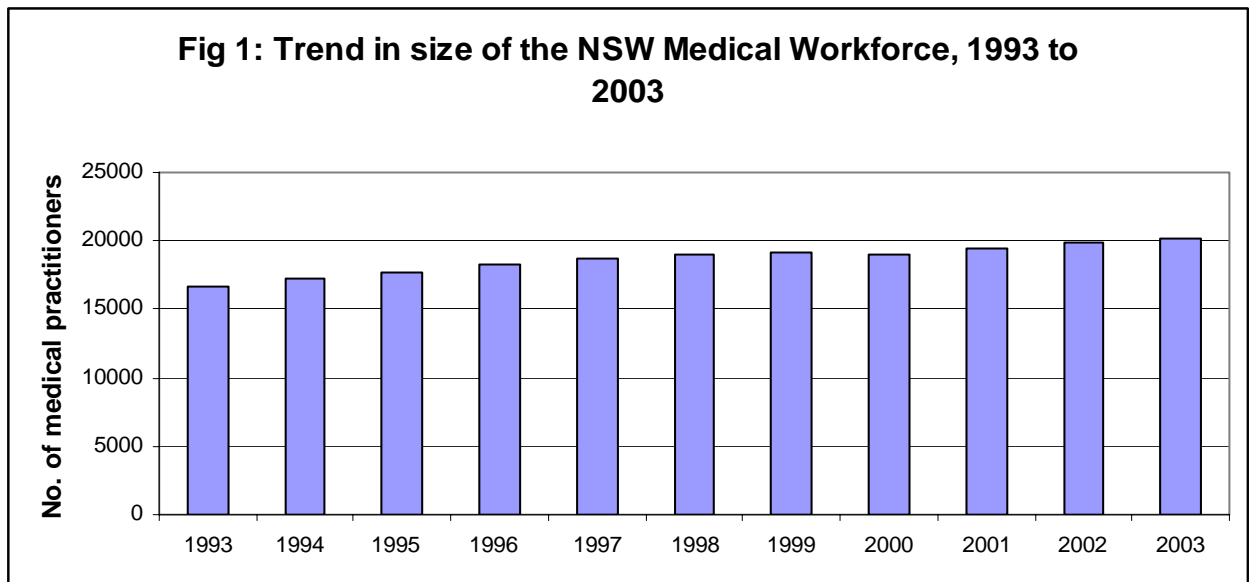
Table 1.2: Estimated size of the medical workforce, NSW, 1993 to 2003

Category	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	growth 1993-2003	% growth
GP	7656	7704	7693	8145	7982	8086	8120	7654	7803	8006	7912	256	3.3%
specialist	6054	6032	6314	6314	6452	6544	6567	6571	6834	7146	7242	1188	19.6%
specialist in training	1584	1593	1656	1702	1865	1871	1924	1963	2094	2239	2168	584	36.9%
non specialist hospital	1444	1930	2064	2182	2420	2529	2601	2858	2697	2555	2923	1479	102.4%
Total	16738	17259	17728	18343	18719	19030	19211	19046	19428	19946	20245	3507	20.9%

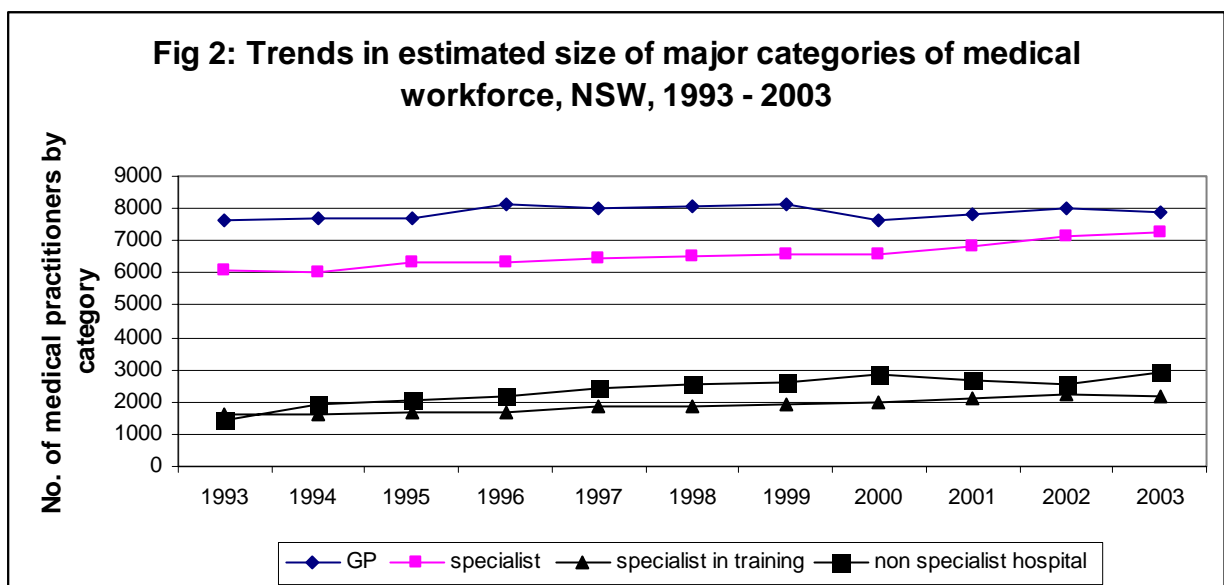
Note: 2001 data based on mid point of 2000 and 2002

Note: The headcount by category represents the main practice area for each practitioner, based on the question on the survey form. It does not allow for multiple counts of practitioners working in more than one category.

The medical workforce is estimated to have grown from 16,738 to 20,245 between 1993 and 2003 (see Table 1.3 and Fig. 1), a growth of 3,507 persons, 20.9%, or 2.1% per annum on average. There was estimated continuous growth between 1993 and 1999, with a minor decline between 1999 and 2000 of 0.9%, followed by an estimated growth of 6.3% or 2.1% average between 2000 and 2003.



There was variation in the growth in the size of the workforce by category (see Fig 2), with the largest growth for non specialist hospital practitioners (102.4% or a doubling of this group over the decade), followed by specialists in training (36.9%), specialists (19.6%) and general practitioners (3.3%). There was continuous growth for three of the four categories apart from general practitioners between 1993 and 2000 (except for specialists between 1993 and 1994) and this growth continued for specialists until 2003 and for specialists in training until 2002. However estimated general practitioner numbers reached their highest point in 1999, but showed a reduction between 1999 to 2000 to return to virtually the same levels as in 1993. There was growth in general practitioner numbers between 2000 and 2002 but another reduction between 2002 and 2003.



c) Total of employment settings for the medical workforce

Data on employment setting has been estimated from Question 8 of the survey form, “How many hours over the last four weeks did you work in each of the following settings?,” with responses allowed for three settings. This data does not distinguish number of jobs or positions, as medical practitioners may work in two different organisations (eg two public hospitals) but would have to report total hours for both as one count. Therefore the data only distinguishes where medical practitioners work in different settings. The hours worked allows for the calculation of FTE as well as frequency counts.

In Table 1.2, 14,286 respondents reported working in 22,912 settings in total, with 41.6% of settings reported in the public sector and 58.4% in the private sector. Just over half or 54.6% of respondents indicated that they worked in one or more settings in the public sector, while 67.6% reported working in one or more settings in the private sector. The most common setting reported was private rooms/surgery (35.5% of all reported settings), followed by public hospitals (28.8% of all settings) and private hospitals (10.8%).

In Table 1.3 there were 16,239.1 FTE medical practitioners reporting by setting, based on an average 40 hours per week. Some 43.0% of FTE practitioners were working in the public sector, and 57.0% in the private sector. The highest FTE was reported for private rooms/ surgery (43.7% of all reported FTE by setting) followed by public hospitals (35.2%) and private hospitals (6.2%).

For the 14,286 respondents who reported hours worked by setting the equivalent FTE was 16,239.1, resulting in an FTE ratio of 1.1367. Therefore in total medical practitioners work 13.7% more than a forty hour week average, despite 26.7% of the workforce reporting working less than forty hours per week (see Table 3.24). This is higher than the FTE ratio reported in 2002 of 1.1147 (p.8).

These tables are reported by category in Appendix B.

Table 1.3: Total employment settings, medical practitioners working in NSW, 2003

Table 3.6 Employment setting of all jobs by sex, medical practitioners working in NSW, 2003

Employment setting	No.	%	No.	%	No.	%	No.	%	Per cent female
	Unknown sex		Female		Male		Total		
Public sector									
Ambulatory centre, day surgery, community health centre, outpatient clinic	45	5.3%	403	6.5%	761	4.8%	1,209	5.3%	34.6%
Aboriginal health service	5	0.6%	54	0.9%	58	0.4%	117	0.5%	48.2%
Hospital, including psychiatric hospital	486	57.4%	1845	29.6%	4259	26.9%	6,590	28.8%	30.2%
Other residential health facility	6	0.7%	83	1.3%	153	1.0%	242	1.1%	35.2%
Tertiary education institution	22	2.6%	175	2.8%	395	2.5%	592	2.6%	30.7%
Defence forces	6	0.7%	35	0.6%	109	0.7%	150	0.7%	24.3%
Government department/agency	5	0.6%	95	1.5%	171	1.1%	271	1.2%	35.7%
Other	19	2.2%	133	2.1%	211	1.3%	363	1.6%	38.7%
Total public sector	594	70.1%	2,823	45.3%	6,117	38.6%	9,534	41.6%	31.6%
Private sector									
Private rooms/surgery	142	16.8%	2276	36.5%	5726	36.2%	8,144	35.5%	28.4%
Ambulatory centre, day surgery, community health centre, outpatient clinic	18	2.1%	134	2.2%	573	3.6%	725	3.2%	19.0%
24 hour/other medical centre	11	1.3%	98	1.6%	279	1.8%	388	1.7%	26.0%
Aboriginal health service	5	0.6%	22	0.4%	50	0.3%	77	0.3%	30.6%
Hospital, including psychiatric hospital	40	4.7%	442	7.1%	1993	12.6%	2,475	10.8%	18.2%
Other residential health facility	15	1.8%	164	2.6%	375	2.4%	554	2.4%	30.4%
Tertiary education institution	3	0.4%	38	0.6%	129	0.8%	170	0.7%	22.8%
Other	19	2.2%	234	3.8%	592	3.7%	845	3.7%	28.3%
Total private sector	253	29.9%	3,408	54.7%	9,717	61.4%	13,378	58.4%	26.0%
Total	847	100.0%	6231	100.0%	15834	100.0%	22912	100.0%	28.2%
<i>Non-response:</i>	42		218		424		684		
		% of total	No.	% of total	No.	% of total	No.	% of total	
Total no. of respondents	654	100.0%	4300	100.0%	9332	100.0%	14286	100.0%	31.5%
Total respondents public sector	522	79.8%	2298	53.4%	4975	53.3%	7795	54.6%	31.6%
Total respondents private sector	182	27.8%	2668	62.0%	6814	73.0%	9664	67.6%	28.1%

Notes

- ¹ Data has been estimated from Question 8 of the survey form, "How many hours over the last 4 weeks did you work in each of the following settings?". Responses have been added for up to three settings, and therefore are multiple responses. The responses do not equate to jobs or positions, as a respondent may work in more than one location in a setting, but will only show total hours in that setting.
- ² Percentages by setting relate to total settings reported, not respondents
- ³ Respondents may report both public and private settings

Table 1.4: Total employment settings, FTE medical practitioners working in NSW, 2003

Employment setting	No.	%	No.	%	No.	%	No.	%	Per cent female
	Unknown sex		Female		Male		Total		
Public sector									
Ambulatory centre, day surgery, community health centre, outpatient clinic	13.4	1.6%	145.6	3.5%	270.6	2.4%	429.5	2.6%	35.0%
Aboriginal health service	2.1	0.3%	14.8	0.4%	20.8	0.2%	37.6	0.2%	41.6%
Hospital, including psychiatric hospital	573.3	70.6%	1673.5	40.1%	3468.1	30.8%	5,714.9	35.2%	32.5%
Other residential health facility	2.3	0.3%	20.9	0.5%	31.0	0.3%	54.1	0.3%	40.3%
Tertiary education institution	15.8	1.9%	89.4	2.1%	200.8	1.8%	305.9	1.9%	30.8%
Defence forces	4.6	0.6%	15.8	0.4%	46.6	0.4%	67.0	0.4%	25.3%
Government department/agency	3.8	0.5%	58.1	1.4%	114.2	1.0%	176.0	1.1%	33.7%
Other	18.6	2.3%	60.6	1.5%	118.0	1.0%	197.1	1.2%	33.9%
Total public sector	633.8	78.1%	2078.5	49.8%	4269.9	37.9%	6,982.2	43.0%	32.7%
Private sector									
Private rooms/surgery	120.1	14.8%	1659.0	39.8%	5320.2	47.3%	7,099.3	43.7%	23.8%
Ambulatory centre, day surgery, community health centre, outpatient clinic	7.2	0.9%	35.5	0.9%	180.1	1.6%	222.8	1.4%	16.5%
24 hour/other medical centre	10.0	1.2%	70.0	1.7%	184.4	1.6%	264.3	1.6%	27.5%
Aboriginal health service	1.5	0.2%	6.0	0.1%	11.9	0.1%	19.3	0.1%	0.0%
Hospital, including psychiatric hospital	21.5	2.6%	161.8	3.9%	829.9	7.4%	1,013.2	6.2%	16.3%
Other residential health facility	6.9	0.8%	18.5	0.4%	50.0	0.4%	75.4	0.5%	26.9%
Tertiary education institution	0.9	0.1%	9.3	0.2%	28.5	0.3%	38.7	0.2%	24.6%
Other	9.7	1.2%	132.9	3.2%	381.5	3.4%	524.0	3.2%	25.8%
Total private sector	177.8	21.9%	2092.8	50.2%	6986.4	62.1%	9,256.9	57.0%	23.1%
Total	811.5	100.0%	4171.3	100.0%	11256.3	100.0%	16,239.1	100.0%	27.0%
<i>Non-response:</i>	42		218		424		684		
			No.	% of total	No.	% of total	No.	% of total	
Total no. of respondents	654	100.0%	4300	100.0%	9332	100.0%	14286	100.0%	31.5%
Total respondents public sector	522		2298	53.4%	4975	53.3%	7795	54.6%	31.6%
Total respondents private sector	182		2668	62.0%	6814	73.0%	9664	67.6%	28.1%
FTE ratio all respondents	1.2408		0.9701		1.2062		1.1367		
FTE ratio respondents public sector	1.2141		0.9045		0.8583		0.8957		
FTE ratio respondents private sector	0.9766		0.7844		1.0253		0.9579		

Notes

- ¹ Data has been estimated from Question 8 of the survey form, "How many hours over the last 4 weeks did you work in each of the following settings?". Responses have been added for up to three settings, and therefore are multiple responses. The responses do not equate to jobs or positions, as a respondent may work in more than one location in a setting, but will only show total hours in that setting.
- ² Percentages by setting relate to total settings reported, not respondents
- ³ Respondents may report both public and private settings
- ⁴ FTE calculated by dividing hours worked by 40 hours per week

2

MEDICAL PRACTITIONERS WORKING IN NSW OVERVIEW

This chapter summarises the characteristics of medical practitioners working in NSW, together with the characteristics of each of the four sub groups of primary care practitioners, specialists and consultants, specialists in training, and non-specialist hospital salaried medical practitioners. The final part of this section provides data on key trends in supply and distribution from 1996 to 2003.

Characteristics of all medical practitioners working in NSW

- Females are 31.6% of the medical workforce in NSW in (an increase from 24.7% in 1993)
- Females under 40 years are 44.5% of the workforce aged under 40 years (36.2% in 1993)
- The average age of the workforce is 46.3 years, with the average age of female medical practitioners 41.4 years, and 48.7 years for males.
- The public sector accounted for 40.2% of medical practitioners in 2003 in their main role (defined as most hours worked in any of three settings).
- The largest proportion (32.8% of total) of these worked in public hospitals, including psychiatric hospitals. The private sector accounted for 59.8% of medical practitioners in 2003. The largest proportion of private sector medical practitioners worked in private medical rooms/surgeries and other private 24 hour centres (50.0% of total workforce). Female medical practitioners were more likely to work in the public sector (44.2% of all females) than males (35.9% of all males). The employment setting for a second position was more likely to be the public sector than for main setting (44.2% of the total with hours in a second setting) while 34.3% were in the public sector in a third setting.
- The main geographical location for 86.5% was metropolitan areas with 13.2% indicating rural areas
- Some 26.7 % of medical practitioners reported working part time in terms of total hours worked per week (hours worked less than 40 hours per week). Women were more likely to work part time than men (45.5% compared with 19.0%).

Characteristics of primary care practitioners working in NSW

Primary care practitioners engage in general practice or in the primary care of patients. This includes those persons who are vocationally registered general practitioners, Fellows of the Royal Australian College of General Practitioners (RACGP), RACGP trainees and other primary care medical practitioners.

- Females are 35.9% of the primary care practitioner medical workforce in NSW in (an increase from 28.7% in 1993)
- Females under 40 years are 52.7% of the workforce aged under 40 years (43.4% in 1993)
- The average age of the workforce is 49.6 years, with the average age of female primary care medical practitioners 45.2 years, and 52.1 years for males.
- Some 33.1% of primary care practitioners in 2003 had two or more employment locations, with men slightly more likely to be working in multiple locations (33.9% compared with 31.7% of women).
- In 2003, there are 81.5% of primary care practitioners indicating that their main location is in metropolitan areas, with 18.3% of main locations in rural areas; 14.0% of second locations and again 14.0% of third locations were in rural areas.
- Some 35.6 % of primary care practitioners reported working part time in terms of total hours worked per week (hours worked less than 40 hours per week). Women were more likely to work part time than men (60.5% compared with 21.6%).
- Most primary care practitioners (88.6%) were working in private medical rooms, surgeries or private 24 hour centres, based on total settings worked.
- Some 63.6% of primary care practitioners were vocationally registered general practitioners, 22.5% were Fellows of the Royal Australian College of General Practitioners, 4.2% were RACGP trainees and 9.6% were other medical practitioners (question allowed for multiple responses).
- Some 10.6% of primary care practitioners reported working in a special interest area.

Characteristics of specialists and consultants working in NSW

A specialist is a medical practitioner with a qualification awarded by or recognised by the relevant specialist professional college in Australia.

- Females are 20.0% of the medical specialist workforce in NSW in 2003 (an increase from 13.7% in 1993)
- Females under 40 years are 34.1% of the workforce aged under 40 years (22.2% in 1993)
- The average age of the workforce is 50.4 years, with the average age of female medical specialists 44.4 years, and 51.6 years for male specialists.
- Some 43.5% of medical specialists reported the public sector as their main setting (defined as most hours worked in any of three settings) while 56.5% reported the private sector
- Some 58.3% of specialists in 2003 had two or more employment locations, with men slightly more likely to be working in multiple locations (62.3% compared with 52.7% of women).
- In 2003, there are 89.5% of specialists indicating that their main location is in metropolitan areas, with 10.3% of main locations in rural areas; 11.4% of second locations and 13.4% of third locations were in rural areas.
- Some 22.6% of specialists worked less than forty hours per week; and males generally worked longer hours than females; males reported an average 52.1 hours worked per week compared to 43.8 for females.
- The most commonly held specialty qualifications in terms of total qualifications in 2003 were anaesthesia (9.9%), psychiatry (8.8%), diagnostic radiology (5.5%), general surgery (5.3%), and obstetrics and gynaecology (5.1%). For women, the most commonly held areas of specialty qualifications were psychiatry (12.4%), anaesthesia (10.8%) paediatric medicine (8.1%), diagnostic radiology (5.3%), and other qualifications (5.2%). For men, the most commonly held areas of specialty qualifications were anaesthesia (9.8%), psychiatry (7.9%), general surgery (6.2%) diagnostic radiology (5.6%), general medicine (5.3%) and obstetrics and gynaecology (5.2%).
- Some 5,225 specialists in 2002 reported a total of 6,388 specialty qualifications.

- The major areas of specialty practice for all areas of practice in 2003 were anaesthesia (10.8%), psychiatry (10.5%), diagnostic radiology (6.3%), and obstetrics and gynaecology (5.5%). However the non response to this question was high at 22.2%, limiting interpretation of this variable.

Characteristics of specialists in training working in NSW

Specialists in training are medical practitioners who are generally working as a registrar and employed in a training position that is accredited and supervised by the relevant specialist professional college.

- Females are 42.9% of the specialist in training workforce in NSW in 2003 (an increase from 32.1% in 1993)
- Females under 40 years are 42.9% of the workforce aged under 40 years (32.9% in 1993)
- The average age of the workforce is 32.9 years, with the average age of female medical specialists in training 32.7 years, and 33.0 years for males.
- Some 88.2% of medical specialists reported the public sector as their main setting (defined as most hours worked in any of three settings) while 11.8% reported the private sector
- In 2003, there are 93.2% of specialists in training indicating that their main location is in metropolitan areas, with 6.2% of main locations in rural areas; and 9.2% of second locations and 3.0% of third locations were in rural areas.
- Some 11.0% of specialists in training worked less than forty hours per week; and males generally worked longer hours than females; males reported an average 55.9 hours worked per week compared to 50.1 for females.
- Specialists in training were most likely to be training for the specialties of anaesthesia (11.0%), psychiatry (10.8%), emergency medicine (8.1%), paediatric medicine (7.1%), general surgery (6.8%) and obstetrics and gynaecology (4.7%).

Characteristics of non-specialist hospital salaried medical practitioners working in NSW

Hospital non-specialists are those medical practitioners mainly employed in a salaried position in a hospital who do not have a recognised specialist qualification and who are not undertaking training to gain recognised specialist qualifications. They include interns, resident medical officers, and career medical officers.

- Females are 44.6% of the non-specialist hospital salaried workforce in NSW in 2003 (an increase from 39.5% in 1993)
- Females under 40 years are 46.9% of the workforce aged under 40 years (39.8% in 1993)
- The average age of the workforce is 33.9 years, with the average age of females 33.0 years, and 34.7 years for males.
- Some 90.3% of non-specialist hospital salaried medical practitioners reported the public sector as their main setting (defined as most hours worked in any of three settings) while 9.7% reported the private sector
- In 2003, there are 86.4% of indicating that their main location is in metropolitan areas, with 13.1% of main locations in rural areas; and 11.6% of second locations and 11.0% of third locations were in rural areas.
- Some 17.1% of this category worked less than forty hours per week; and males reported similar average hours to females; males reported an average 52.0 hours worked per week compared to 52.1 for females.
- Some 20.3% of hospital non-specialists in 2002 worked at two or more locations, with men more likely than women to be working in multiple locations (24.2% compared to 20.4% for women).

- Some 7.2% were Royal Australian College of General Practitioner trainees, and another 6.8% were vocationally registered primary care practitioners.
- Some 43.5% were awaiting entry into a specialist course (similar proportions of males and females), and 16.5% had rights of private practice (22.5% of males, 16.7% of females).

Key trends in average age and average hours worked by category, 2000 to 2003

Table 2.1: Trends in average age and average hours worked by sex and category, 2000 to 2003

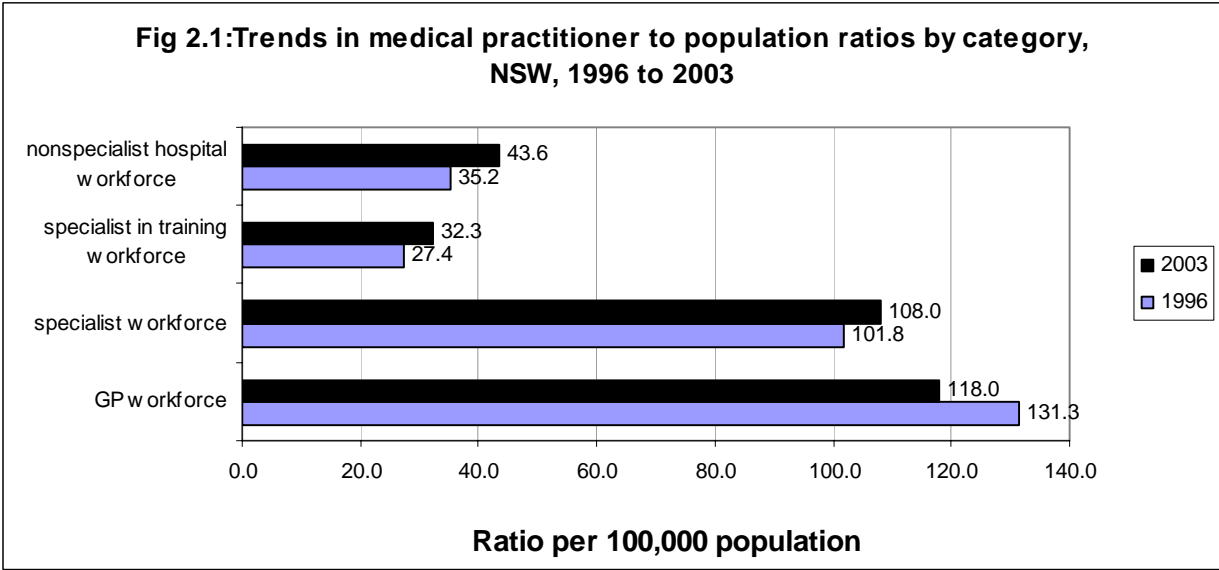
Average age	2000			2003			Difference			% difference
	Female	Male	Total	Female	Male	Total	Female	Male	Total	
Non specialist hospital	31.7	31.7	31.7	33.0	34.7	33.9	1.4	3.0	2.2	6.9%
General practitioner	43.8	51.1	48.7	45.2	52.1	49.6	1.4	1.0	0.9	1.9%
Specialist in training	32.0	32.2	32.1	32.7	33.0	32.9	0.7	0.8	0.8	2.4%
Specialist	45.0	51.2	50.1	45.4	51.6	50.4	0.4	0.4	0.3	0.7%
Total	40.4	47.7	45.5	41.4	48.7	46.3	1.0	1.0	0.8	1.8%
(Note: total includes unknown category)										
Average hours worked	2000			2003			Difference			% difference
	Female	Male	Total	Female	Male	Total	Female	Male	Total	
Non specialist hospital	47.1	50.2	48.6	44.7	48.1	46.8	-2.4	-2.1	-1.8	-3.7%
General practitioner	34.6	48.7	44.1	33.9	47.5	42.6	-0.7	-1.2	-1.5	-3.4%
Specialist in training	48.7	54.1	52.1	47.2	52.2	50.1	-1.5	-1.9	-2.0	-3.8%
Specialist	42.0	50.3	49.1	40.6	49.2	47.5	-1.4	-1.1	-1.6	-3.3%
Total	40.3	49.9	47.1	39.2	48.6	45.6	-1.1	-1.3	-1.5	-3.2%
(Note: total includes unknown category)										

The data in Table 2.1 indicate:

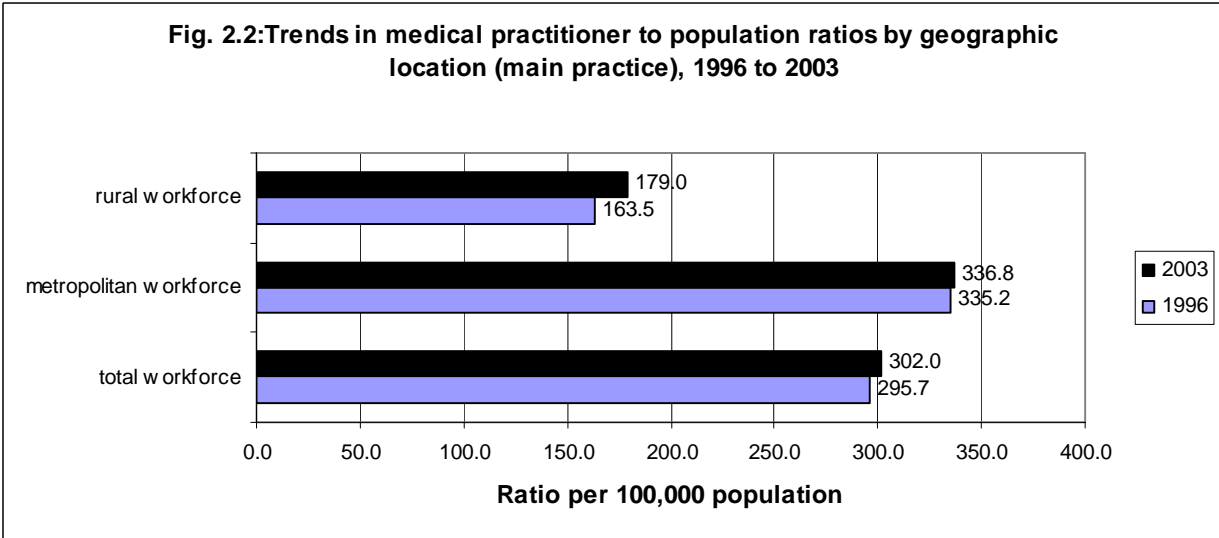
- there was a growth in the average age of the workforce, from 45.5 years to 46.3 years, or 1.8% between 2000 and 2003
- the major change in age was in the ageing of the non specialist hospital workforce, from 31.7 to 33.9 years on average
- there was a decrease in the average hours worked for all categories of the medical workforce in total of 3.2% or on average 1.5 hours per week, from 47.1 hours to 45.6 hours on average
- there was also a decrease in the average hours worked for each of the categories, with the decrease greatest for specialists in training (decrease of 2.0 hrs, 3.8%), and for non specialist hospital practitioners, (decrease of 1.8 hours, 3.7%).
- There were decreases for males and females by category, but the level of change varied by category, with female non specialist medical practitioners showing the greatest decrease of 2.4 hours on average
- Specialists in training worked the highest level of average hours both in 2000 and in 2003, with a decrease from 52.1 hours to 50.1 hours on average
- Female general practitioners worked least hours on average per week (34.6 hours in 2000, 33.9 hours in 2003)

Key trends in medical practitioner supply and distribution by category, 1996 to 2003

There was growth in the practitioner to population ratio for three of the four categories between 1996 and 2003 (specialist workforce, non specialist hospital workforce and specialist in training workforce) while the general practitioner workforce showed a decline from 131.3 per 100,000 population to 118.0 per 100,000 in 2003.



Overall the ratio per 100,000 population increased for the total medical practitioner workforce between 1996 and 2003, from 295.7 to 302.0 per 100,000 population (see Fig 2.2 below) , although the growth levels varied between metropolitan and rural areas, with higher growth in the rural medical workforce (163.5 to 179.0 per 100,000 population) than in the metropolitan workforce (335.2 to 336.8 per 100,000 population).



These changes were due to a growth in the ratio for three of the four categories between 1996 and 2003, in both metropolitan and rural settings (specialist workforce, non specialist hospital workforce and specialist in training workforce); but with a decline in the general practitioner to population ratio in each setting. The metropolitan general practitioner to population ratio declined from 140.9 to 124.3 per 100,000 population, and there was a similar trend for rural areas, with a decline in the rural general practitioner to population ratio (from 99.0 to 95.6 per 100,000 population) (see Fig 2.3 and 2.4).

