

NSW Health

# 2007

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## Profile of the Nurses and Midwives Workforce in NSW

Registered Nurses and Midwives

## 1

# INTRODUCTION

This report provides information from the 2007 NSW Labour Force Survey for nurses and midwives registered or enrolled with the Nurses Registration Board of New South Wales ('the Board'). All persons wishing to work as nurses or midwives in this State must be registered or enrolled with the Board. This includes persons whose primary listing may be in another State but who work some or all of their time in NSW.

Discussion on the nursing labour force is presented in two parts. Part 1 contains information on nurses and midwives registered with the Board including a small number of direct entry midwives who first entered the workforce in 2007. Part 2 contains information on nurses enrolled with the Board. The foreword to the report summarises material on all nurses in New South Wales and shows the respective contributions of registered and enrolled nurses.

This section of the report provides an overview and commentary on the registered nursing workforce in 2007. It is intended for readers wishing to obtain information on current labour force conditions and trends over time without the presentation of detailed tabulations from the survey.

Note that selected charts have been included as part of this discussion. They are not designed to be exhaustive but rather to highlight areas of possible interest to the reader. In order to focus on these areas, small groups of respondents or responses may have been consolidated or disregarded in the charts. There may also be small inconsistencies due to rounding.

An extract from the register maintained by the Board was undertaken on 11 February 2008. All persons who had been registered up to 11 February 2007 and had maintained their status during the previous year were invited to renew for another year. Payment notices were sent out three months in advance with monthly reminders to those nurses who had not yet paid. Persons who chose not to renew by the end of the month in which their payment was due were deemed to have unfinancial status. Other reasons for persons to have lost financial status include delisting following disciplinary action or death.

Accompanying the invitation to renew was a Labour Force survey form that the Board requested be completed and returned together with their remittance. Most registered nurses choosing to renew also participated in the labour force survey. However, it is not mandatory to complete a survey form in order to renew registration.

Persons who first registered as nurses during the year 2006/07 (new entrants) were not asked to complete a Labour Force survey form. Similarly, persons who had previously been registered and later deleted could re-enrol with the payment of a restoration fee and did not receive a survey form.

The current register of nurses who hold financial status therefore can be divided into three categories; renewals, new entrants and re-enrolments, while the Board also holds information about nurses without financial status in two categories; persons who were financial (currently registered) on 11 February 2007 and persons who had become unfinancial at an earlier time.

Strict procedures are followed to ensure the privacy of individual nurses who respond to the Survey. There is no access to identifying data, as names and addresses are not included by the Board on the data file. Survey information will not be made available in any format that enables the identification of individual respondents. The continued support of the Nurses Registration Board of New South Wales, professional organizations and registered nurses participating in the survey is appreciated.

The series of reports covering eight health professions together with earlier reports in the series can be downloaded free of charge from the NSW Health website: <http://www.health.nsw.gov.au/workforce/index.html> The complementary section of the nursing and midwifery report covers enrolled nurses. In addition, full tables incorporating responses to each question on the survey form have been placed in a separate component of the overall report.

## 2

## THE REGISTER

## 2.1 The Number of nurses on the Register

The 2007 register of nurses contains 189,218 names, an increase of 5,018 over 2006. They were divided as follows:

Renewals	78,510
New Entrants	4,356
Previously unfinancial	1,987
<b>TOTAL CURRENT</b>	<b>84, 853 (2006 84,265)</b>
Unfinancial in last 12 months	5,755
Unfinancial >12 months	97,948
Unfinancial, new listing	662
<b>TOTAL NON CURRENT</b>	<b>104,365 (2006 99,935)</b>

Those 78,510 current registrants who were financial in 2006 had been invited to complete a survey form together with registration for 2007. There were 58,935 responses from current registrants representing a response rate of 75% compared to 81% in 2006. However, comparison with previous response rates may reflect that the method of calculation is different. In previous years, responses were based on Board generated divisions rather than tracking registrants from one year to the next..

Chart 2.1a shows the number of registrants, survey respondents and persons stated to be working in NSW grouped by gender of the respondents. Note that gender was not known for a small number of survey respondents.

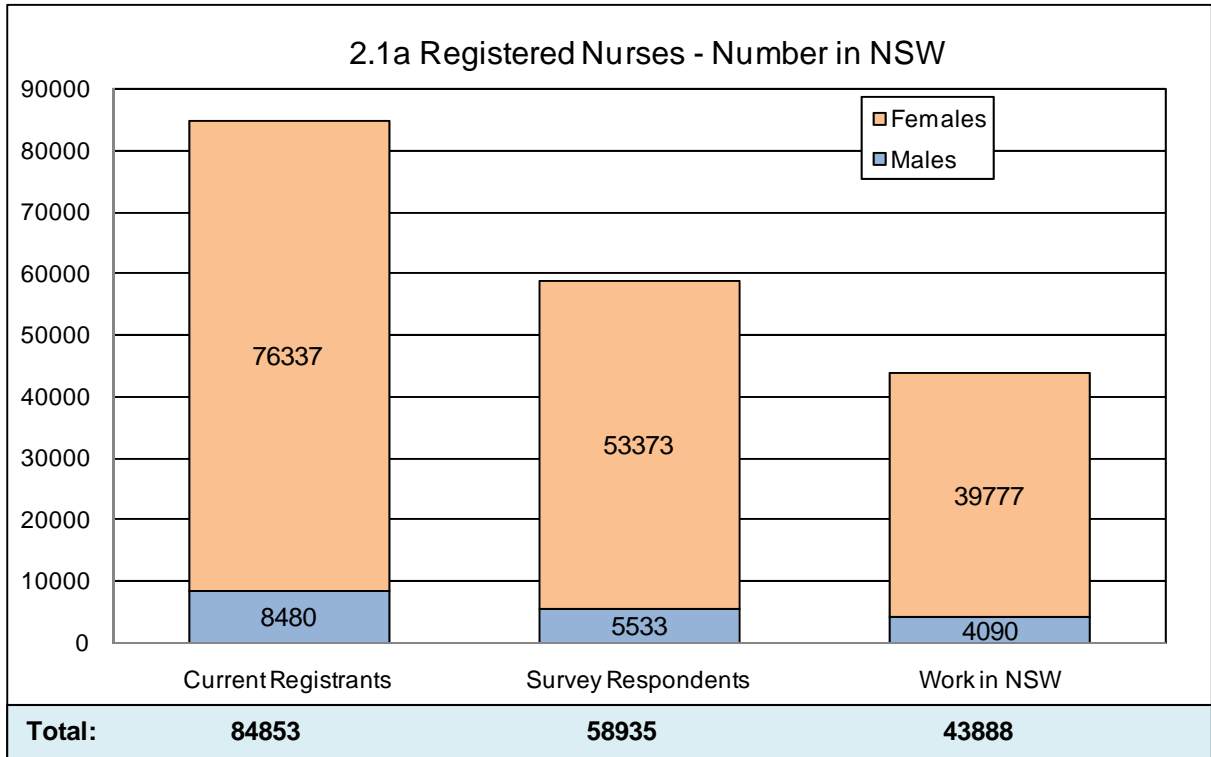
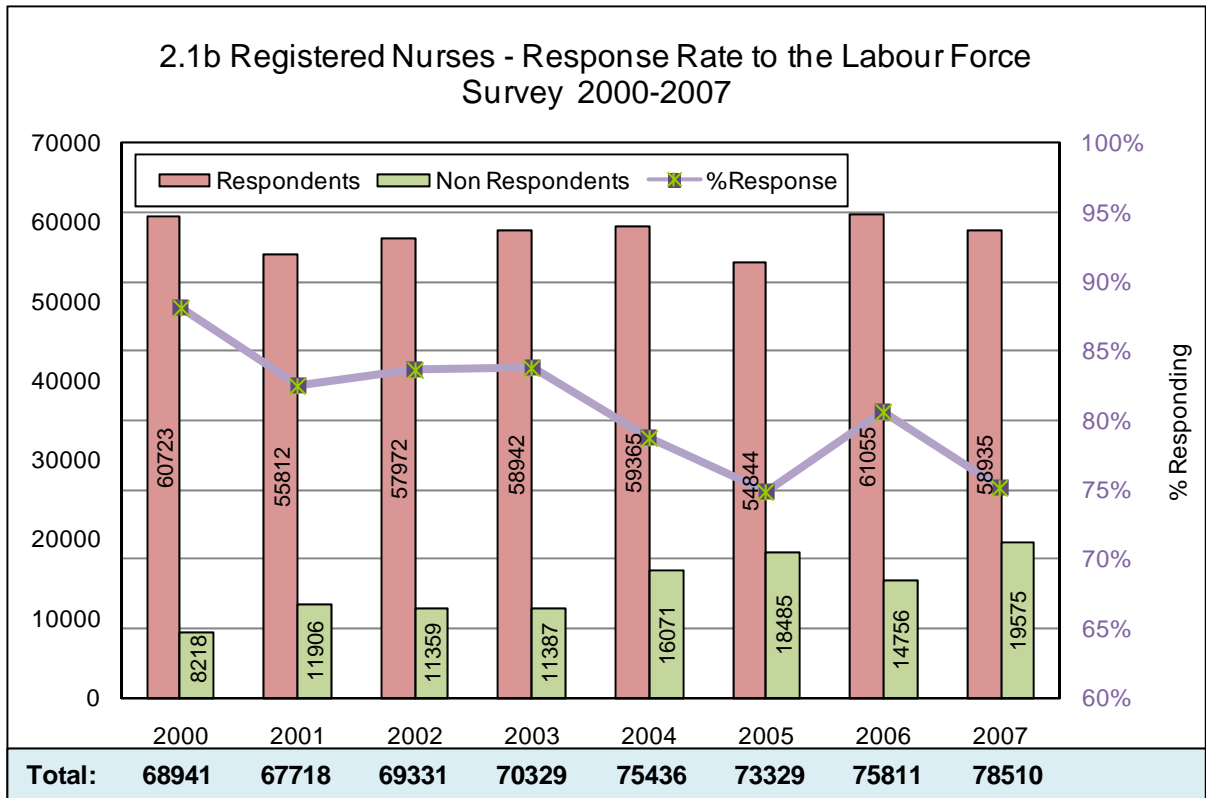


Chart 2.1b provides an estimate of the number of respondents and non-respondents for each year between 2000 and 2007. It is an estimate because changes to form design, definitional determination of respondent and timing of the registration process cause some distortion to the time series. The 2006-2007 data appears to be more indicative of the 2000-2003 period than the data found in 2004 and 2005.



## 2.2 Estimation of the Total Workforce Size

Previous reports in this series have proposed two methods for calculation of the actual size of the nursing workforce. The first method used up to and including the year 2002 was based on assumptions that non respondents to the survey followed a pattern similar to that of respondents with additional assumptions for new entrants and restorations who do not receive a survey form.

The second method was used from 2003-2005 for all health professionals except medical practitioners. It is based on responses for occupation to the 2001 ABS Census of Population and Housing and usually indicated a lower estimate of the workforce probably because a lesser proportion of non respondents to the survey work in NSW compared to the actual proportion of respondents. With the passing of time, the 2001 census becomes a less reliable yardstick to the current workforce. The 2006 ABS Census occupation data was released in November 2007.

There are clearly advantages and disadvantages to both methods. The major disadvantage to the first method is that it may not be reasonable to assume that non respondents distribute in the same way as respondents. Further, the assumption that 80% of nurses restoring to the register should be working, appears very high. The major disadvantage to the second method is that the census responses are self selected as to occupation rather than under the control of a registration board. Furthermore, the census is very divergent from survey statistics for a number of health professions while reasonably consistent for others. We have not used the census approach in the 2006-2007.

In light of these variations in methodology, we have adopted a policy establishing a band between the low and high estimate for the NSW workforce around the traditional (first) approach as described below.

**Table 2.2a Estimated Workforce of Registered Nurses 2006 by Previous Non Response Assumptions**

<b>Source of Estimate</b>	<b>Number of Nurses</b>
Survey Respondents	43,821
Non respondent Estimate	10,591
New Entrants	4,281
Previously Unfinancial	2,958
Pre Paid	209
<b>Total</b>	<b>61,860</b>

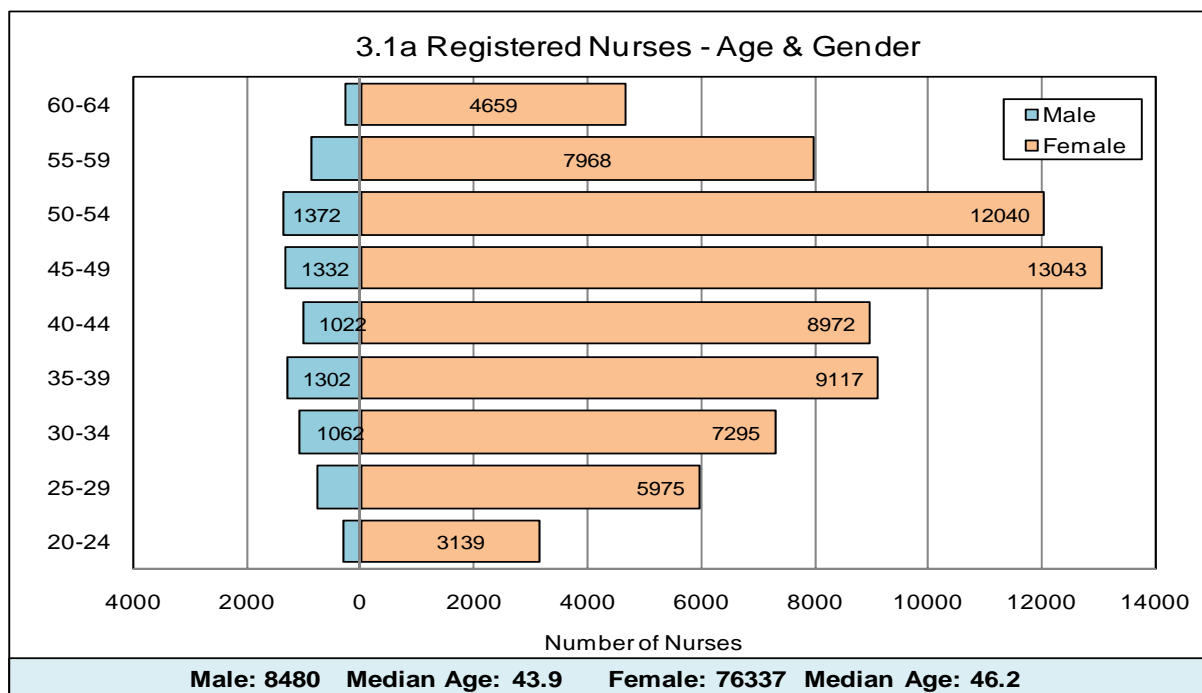
# 3

## CHARACTERISTICS OF REGISTERED NURSES WITH FINANCIAL STATUS

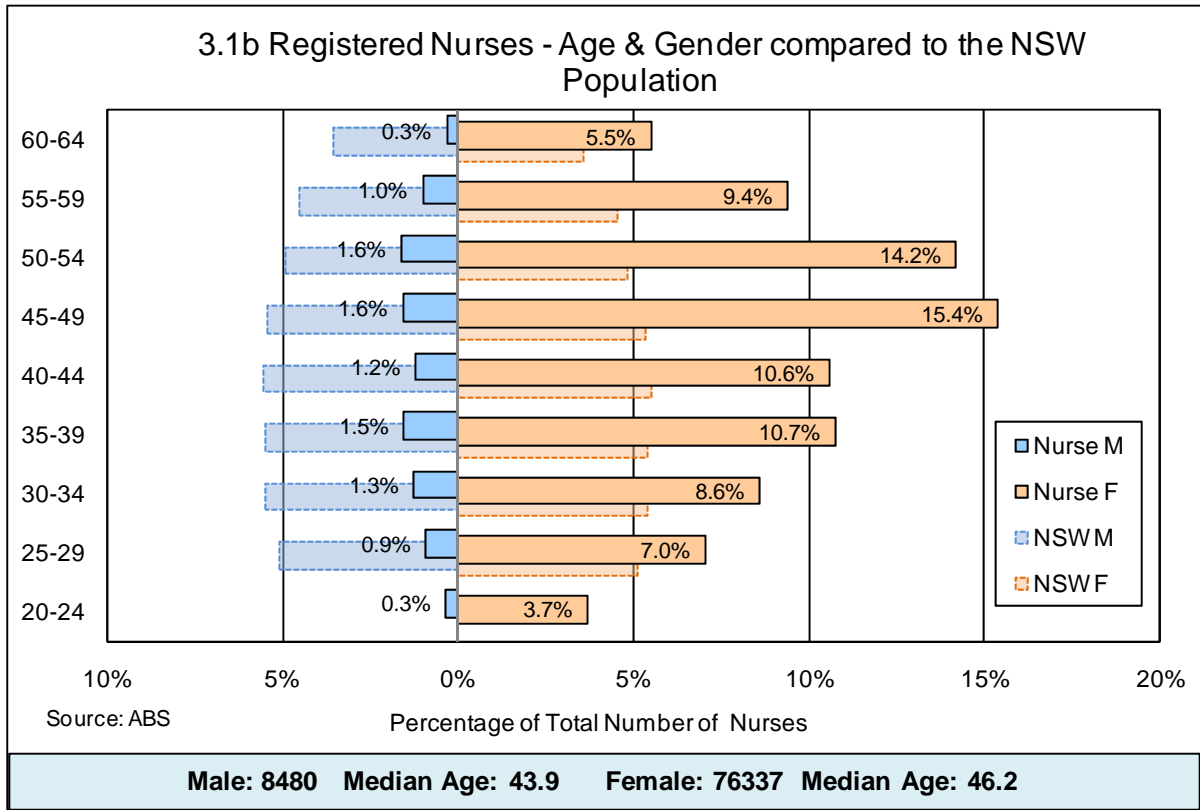
The population in this section of the report are the 84,853 registered nurses who were financial on 23 February 2008.

### 3.1 Age and Gender

Registered nursing is a female dominated profession comprising about ten times more women than men. As shown in Chart 3.1a, the age bands for registered nurses peak in the late forties and early fifties falling away quite rapidly on either side of that age band. The median age for women is 46 (45 in 2006) and for men is 44 (43 in 2006). Chart 3.1b compares this percentage distribution with the NSW population at working ages in 2007<sup>1</sup> over the 25-59 year old cohorts. For females, there are more registered nurses over the age of 35 and a similar percentage in the 20-34 year age band compared to population. Males at all ages are substantially under-represented in the nursing profession.



<sup>1</sup> Australian Bureau of Statistics *Population by Age & Sex New South Wales 2007* Catalogue No.3235.1

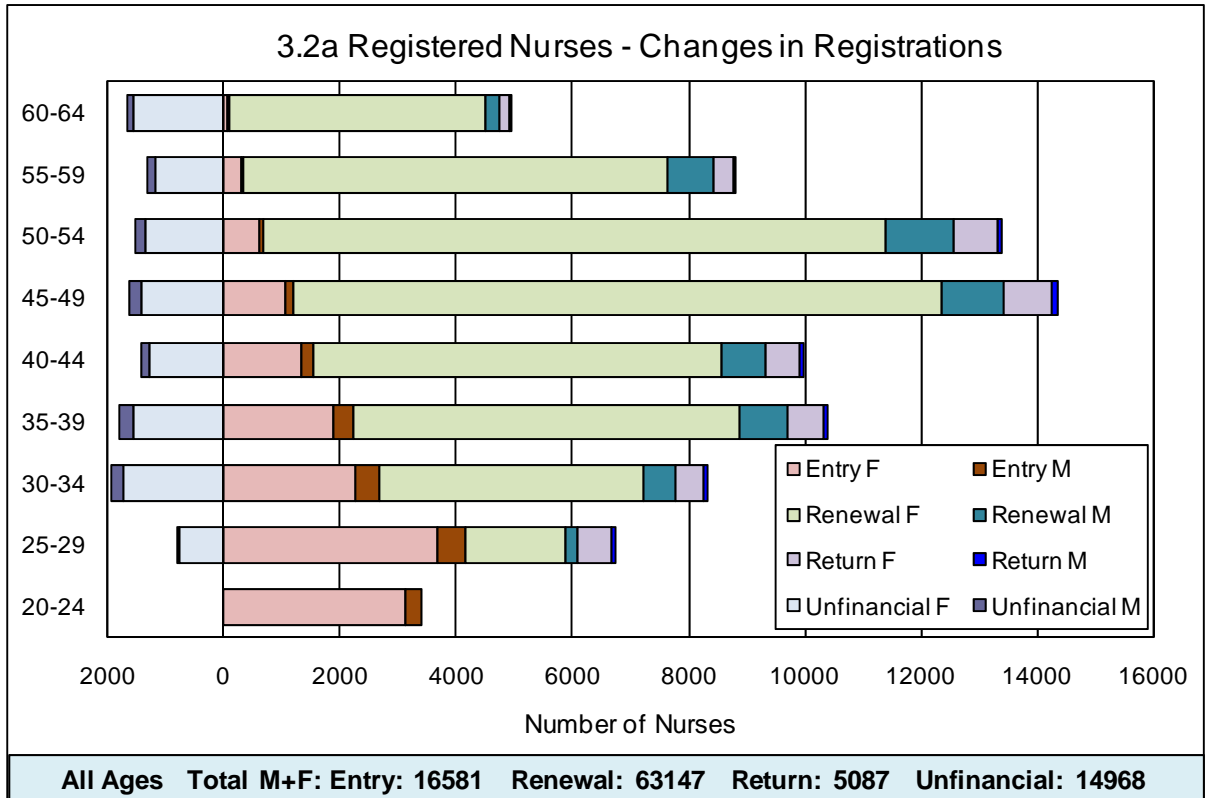


## 3.2 Projected Changes to the Nursing Population

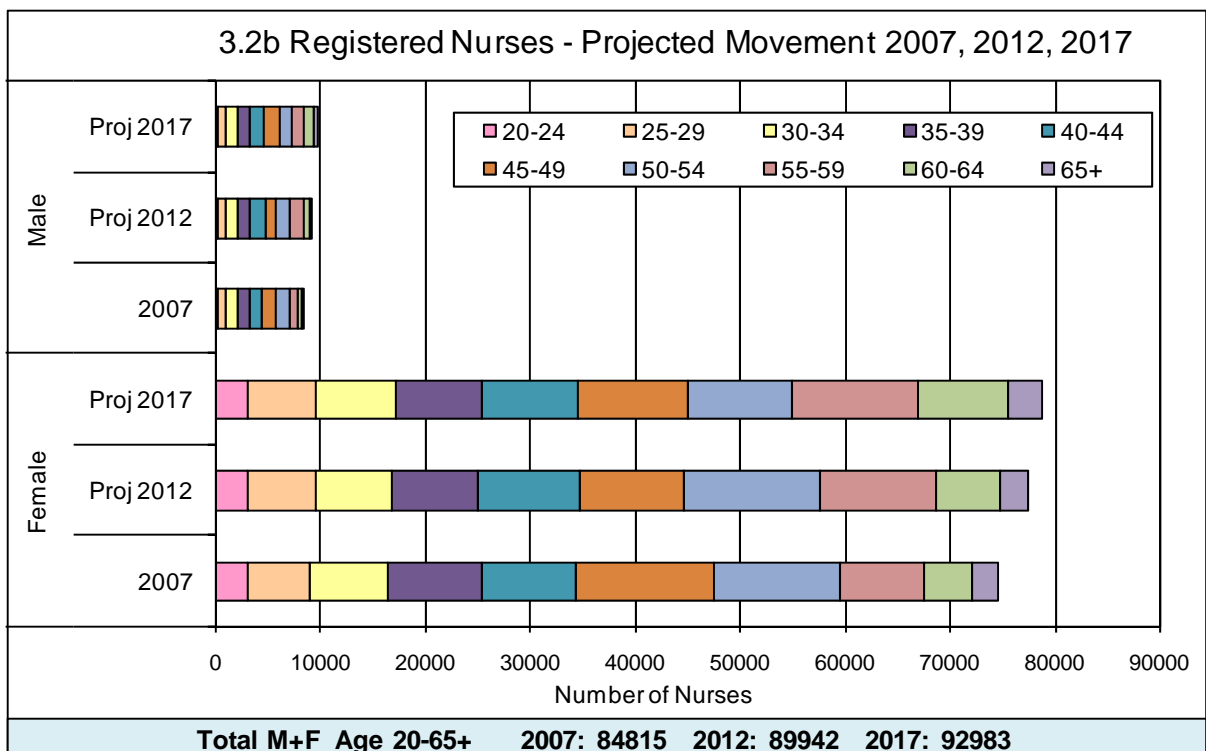
The nursing profession is subject to considerable annual change resulting from short term international movement in addition to the high general mobility of the Australian population. For this report, we have assessed population change over a 5 year period in order to reduce the noise effects of short term changes. The method is similar to that used by demographers for studies of population over time.

The median age of 46 for female registered nurses has decreased by one years from 47 since 2001 while the median male population is now two years younger with an median age of 44 in 2007 compared to 46 in 2001. New entrants have a median age of 32, somewhat older than other health professions at the entry point.

The shift by age can most readily be seen by examination of the movement rates shown in Chart 3.2a.



Projections of the population were undertaken for the next 5 and 10 year period assuming the age shifts over the period 2002-2007 were to continue into the future. The result would be an increase in the number of nurses but a reduction in the number at working ages. Thus, the total number of nurses to 2017 increases by more than 8,000 but the number under the age of 55 decreases by 4300.



## 4

## CHARACTERISTICS OF THE SURVEY RESPONDENTS

There were 58,935 (2006 61,055) registered nurses who responded to the survey. The working status information provided for activity in the last week was:

Working only in NSW	40,112
Working mainly in NSW	195
Working mainly in other States	319
Working only in other States	2,281
Currently on leave less than 3 months	1,717
Currently on leave of 3 months or more	1,478
<b>TOTAL Working in Australia</b>	<b>42,907</b>
Working overseas	755
Not working at all	4,068
Not working in nursing	4,390
Reason not provided	182
<b>TOTAL not working in Australia</b>	<b>9,395</b>
Did not answer	3,438

The number of surveys received from nurses currently working in NSW was found to be 43,888 (2006 43,821) representing 74% of all respondents including 2,965 of the nurses on leave who responded for a typical week rather than for the last week.

### 4.1 Selected Characteristics

Table 4.1a indicates certain characteristics of the whole labour force regardless of work status. These aspects are relevant to all respondents rather than just those who work in NSW.

While there are relatively few men in the profession, the proportion of those not working is 26%, the same as for women. Age is a more important factor than gender as the percentage of those not working rises to 40% for nurses over the age of 60. For registered nurses with less than 5 years experience, there are 26% who are currently not working.

There are 268 Aboriginal registered nurses (2006, 248), 51 not working in nursing (19%), a lower proportion than for non Aboriginal nurses. They represent 0.4% of the labour force

compared to an Aboriginal population of a little over 2%. There are 4,803 registered nurses who are not Australian citizens of whom 1,088 are temporary residents. However, temporary residents may be less likely to complete workforce survey forms. A little more than one half of the 6243 nurses also registered on an interstate registry, work in NSW comprising about 8% of the workforce.

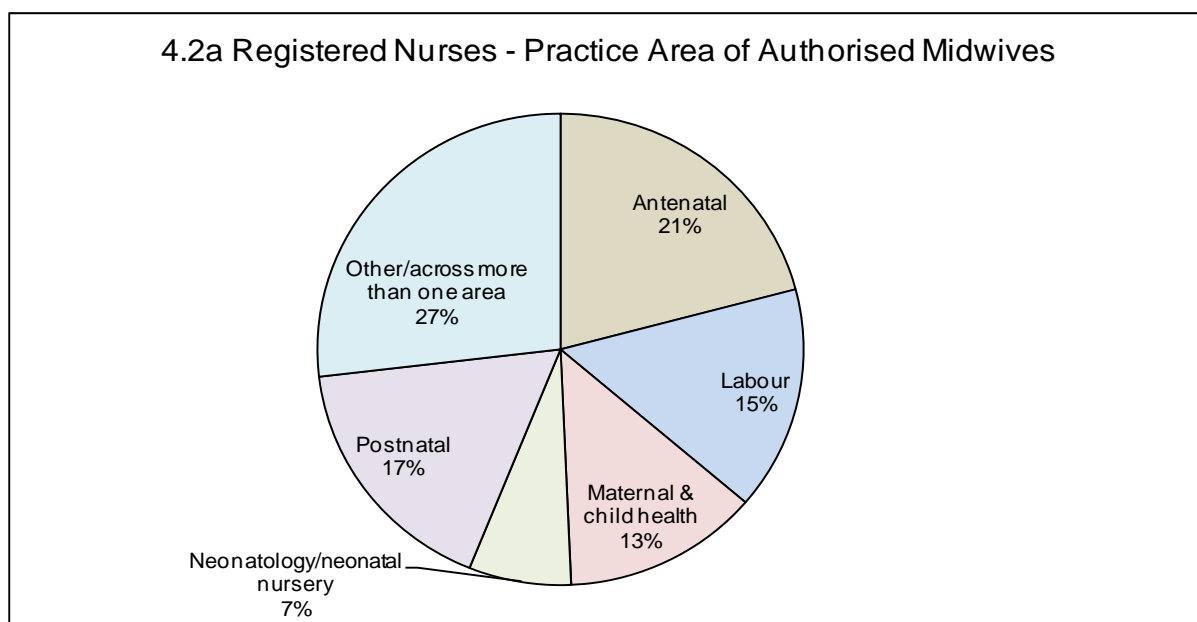
**Table 4.1a Selected Characteristics of Survey Respondents**

	Working as NSW Registered nurse	Not Working as NSW Registered nurse	Not Applicable
Male	4,090	1,443	53,002
Female	39,777	13,596	5,162
Aged 60 or over	4,183	2,730	51,622
Less than 5 years employment	4,125	-1,429	52,481
Not Australian Citizen	3,755	1,048	53,732
Aboriginal or TSI	217	51	58,267
Registered Interstate	3,348	2,685	52,502
<b>TOTAL</b>			<b>58,935</b>

## 4.2 Midwifery

There were 13,524 (2006 14,351) respondents who were authorised to practice as both a nurse and midwife corresponding to 23.0% of all registered nurses. In addition, there were 64 direct entry midwives. Currently 10,188 (2006 10,466) of these nurses work in New South Wales, 6,903 in the public sector and 2,906 in the private sector (379 did not state the sector of work). There are 3,008 (2006 2,664) authorised or direct entry midwives working in NSW whose job classification is as a registered midwife. The remaining 7,180 (70%) are working in other areas of nursing.

Chart 4.2a shows the workplace of authorised midwifery nurses working in that field. The most common field of work outside midwifery was gerontology. There are another 268 registered nurses who work in midwifery but did not report authorisation.



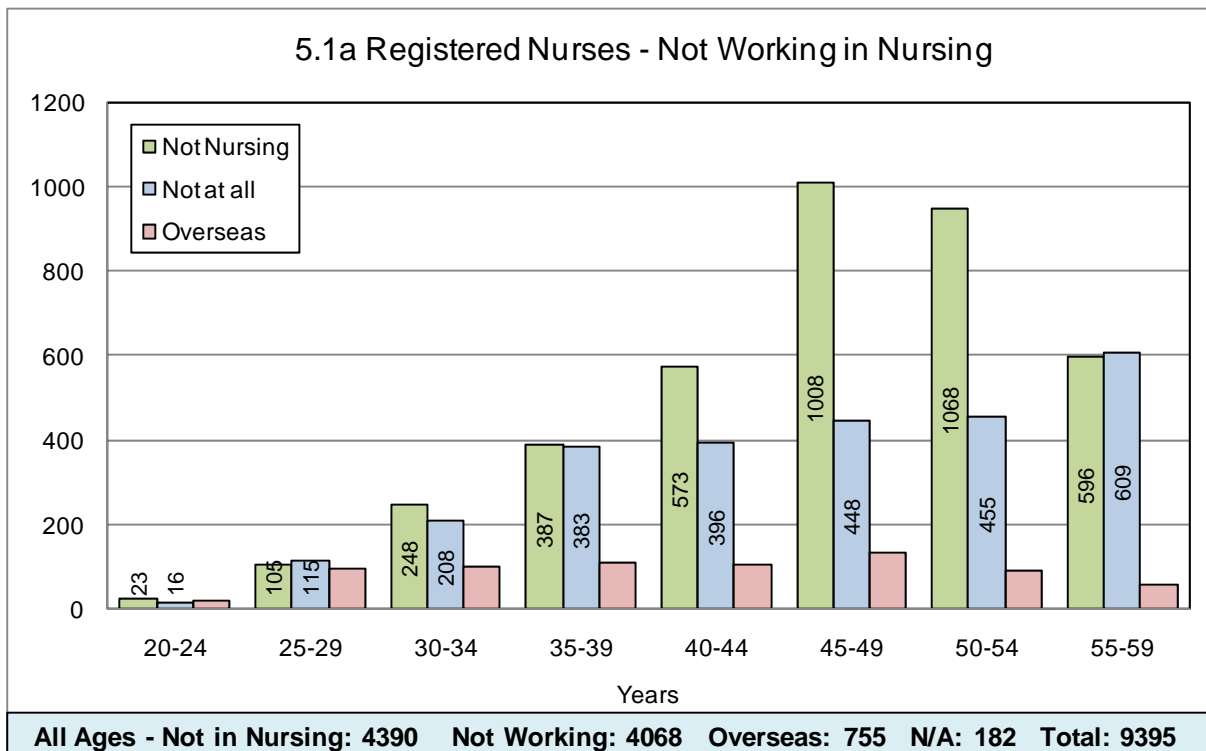
# 5

## CHARACTERISTICS OF NON WORKING RESPONDENTS

There were 9,395 (2006 10,436) respondents who were not currently working as a nurse in any State of Australia. Of these, 2,008 were already 60 years old and considered unlikely to rejoin the workforce. The younger nurses included 3,890 working in other fields, 2,630 not working at all and 715 currently overseas.

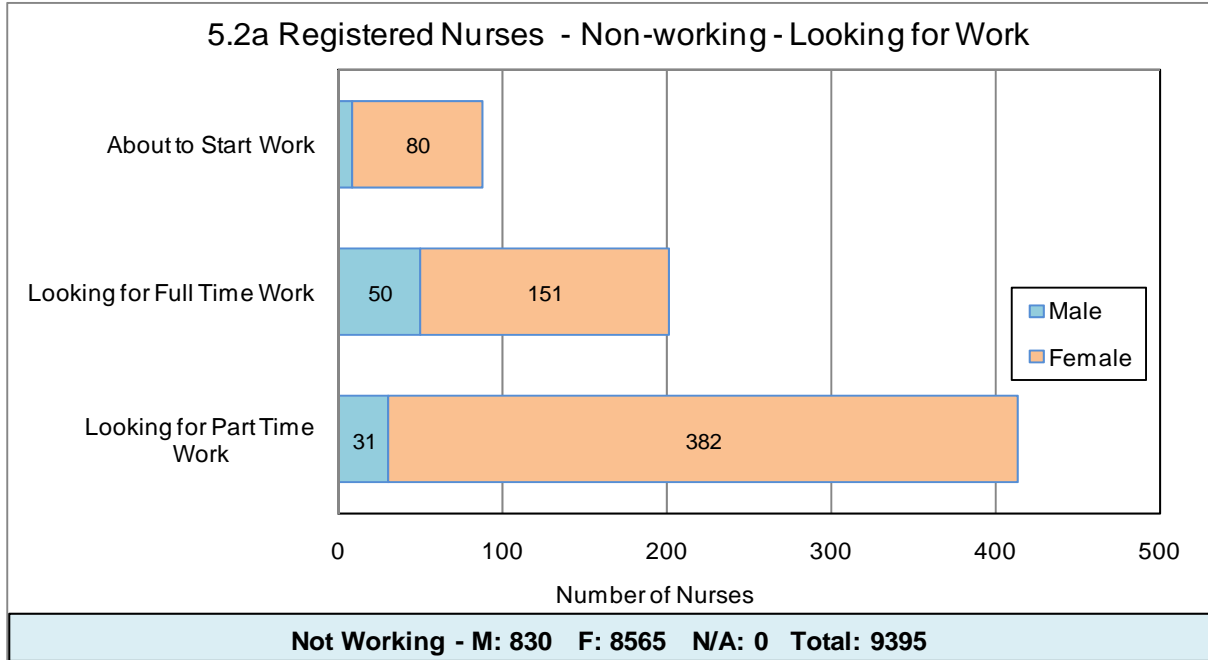
### 5.1 Age

Chart 5.1a indicates the age distribution of the respondents not working in nursing. The numbers steadily increase by age reaching a maximum at the 45-49 year band before reducing slowly for nurses in their 50's. If we compare the non working respondents to those in current work, the ratio increases steadily with age indicating a movement out of nursing from young ages.



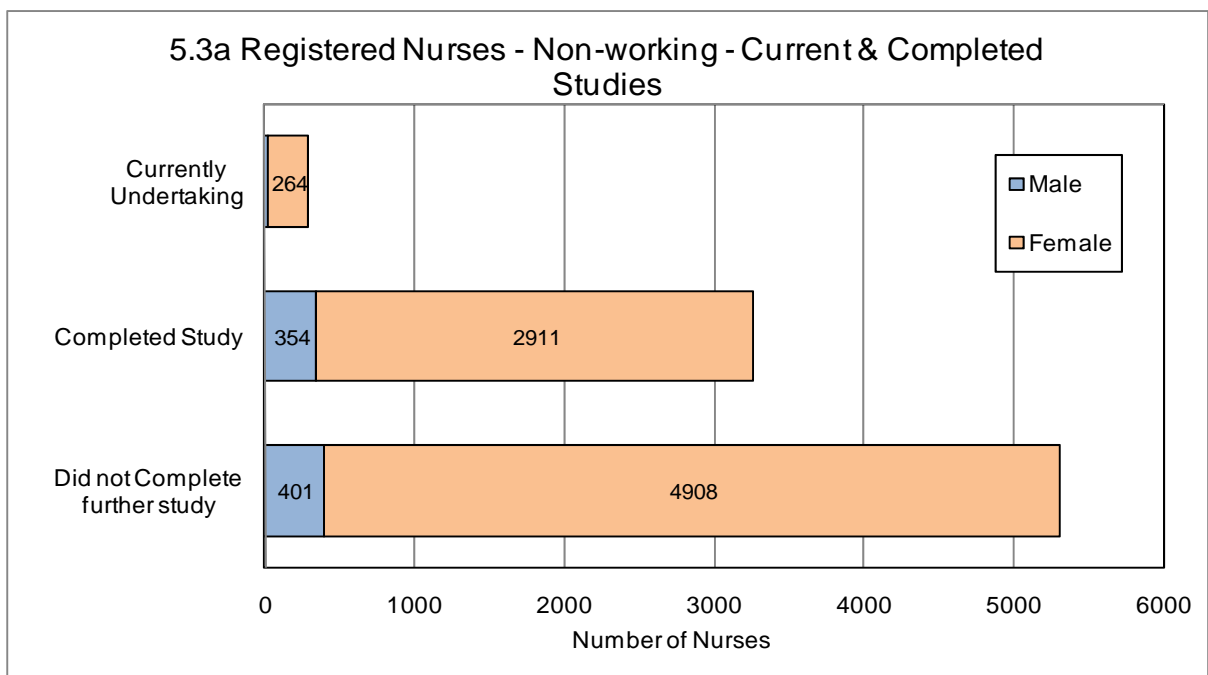
## 5.2 Looking for Work

The 614 (2006, 666) nurses looking for work represent 6.6% of those currently not working. The majority of those seeking work are looking for part time positions. Eighty eight nurses stated they are starting work shortly.



## 5.3 Current and Completed Studies

Chart 5.3a shows current and completed post registration study. It will be observed that about 2.8% of the non working nurses are undertaking current study while 35% have already completed further studies across a wide variety of disciplines.



# 6

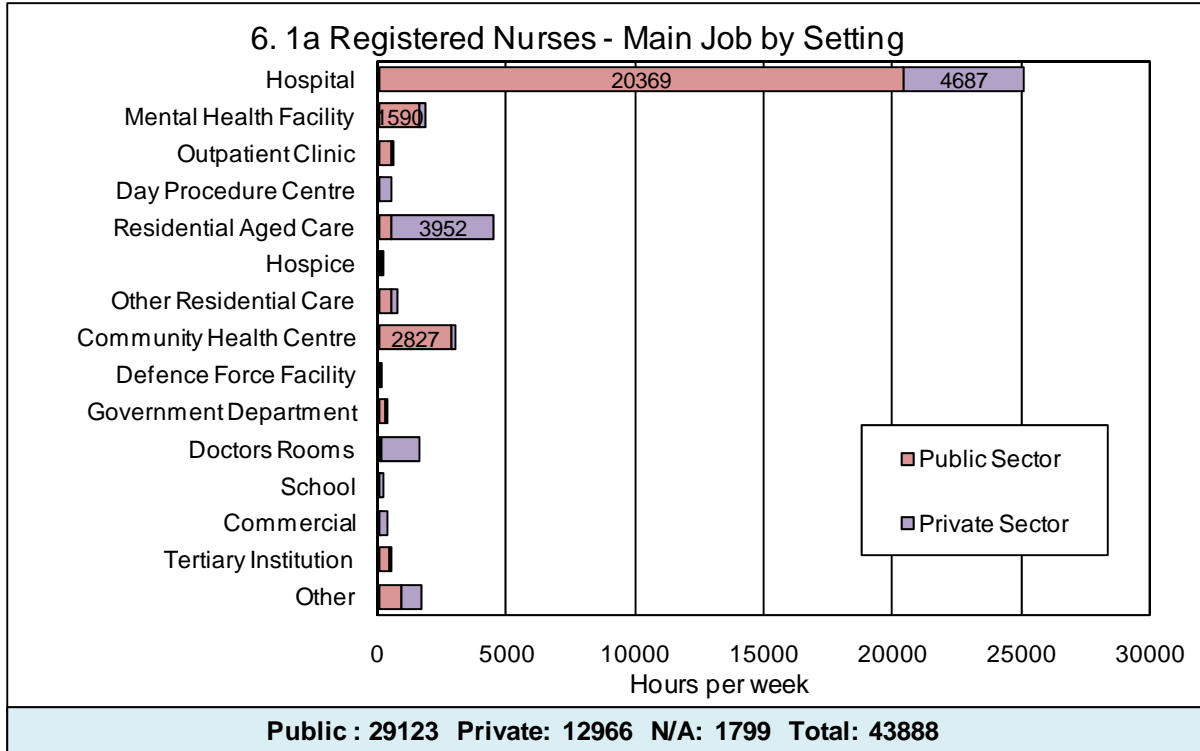
## SECTORS OF WORK

From this point of the report, all the data presented relates only to 43,888 registered nurses who work in NSW or are currently on leave. Respondents who did not answer the question on work status are also excluded in tabulations and charts from this section onwards. The primary factor of interest in this section of the report distinguishes nurses working in the public sector from those working for private employers.

In total, 29,123 (2006 29,919) registered nurses work in the public sector for their main job while 12,966 (2006 13,042) are employed in the private sector. The remaining 1,799 nurses did not answer the question on sector of work. Nurses holding a second or subsequent job are more commonly employed in the private sector.

### 6.1 Setting of the Workplace

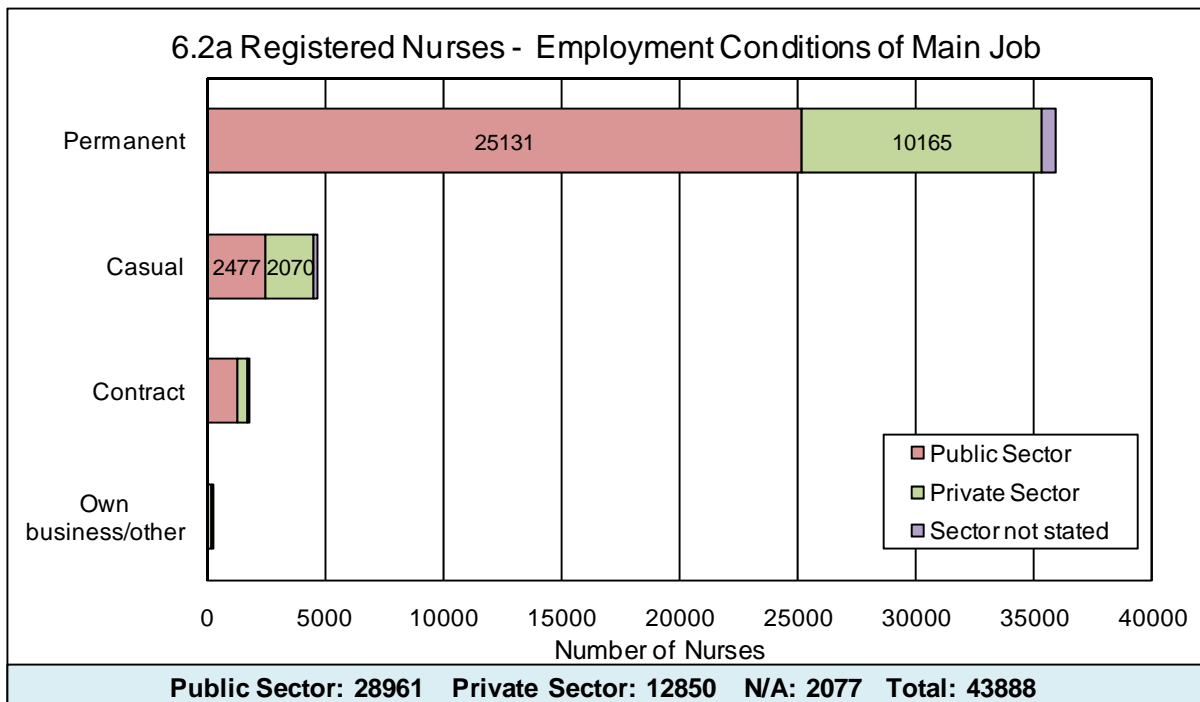
The majority of the labour force works in hospitals. This is especially true of public sector nurses (70%) where hospitals represent the dominant work setting followed by community health centres (10%) and mental health facilities (5%). In the private sector, hospitals are still the most common setting (36%) closely followed by residential aged care facilities (30%). Employment in doctors' rooms (11%) is the next most common place of employment in the private sector. For both the public and private sector, hospital work is the most common setting for a second job. Chart 6.1a indicates employment setting for the main job of registered nurses.



## 6.2 Conditions of Employment

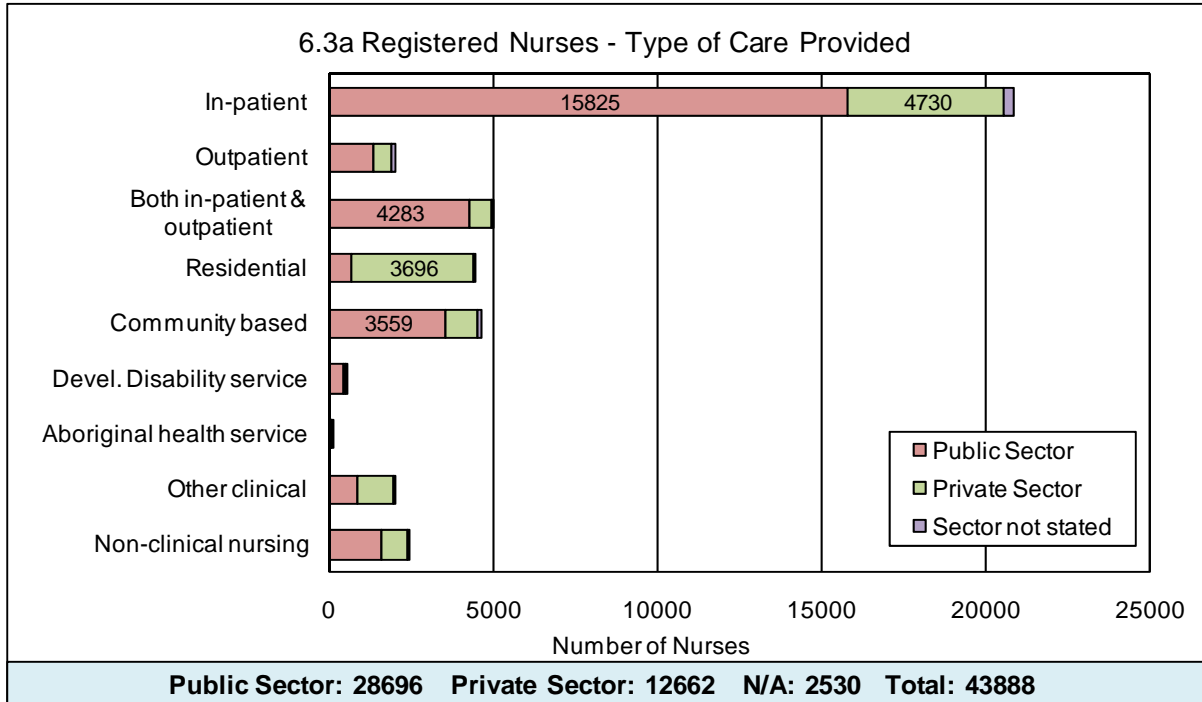
As shown by Chart 6.2a, eighty six percent of registered nurses working in the public sector are in permanent employment with 78% permanent among private employees. Both percentages are 1% lower than in 2006. Most of the remainder have casual work with a small percentage on contract and in their own practices. Most second jobs are casual.

Around four percent of registered nurses are employed through agencies.

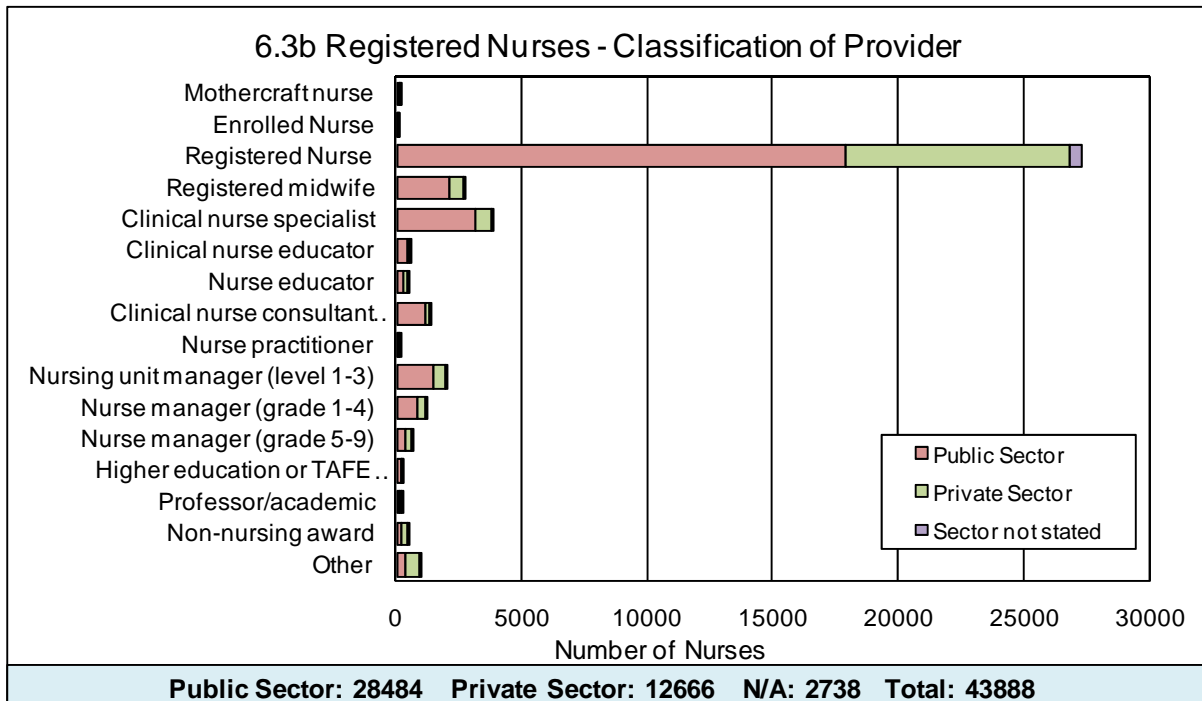


### 6.3 Patient Care Category

In the public sector, more than half of registered nurses provide care to inpatients only, with another 15% caring for both inpatients and outpatients. Community clients are the next largest categories. In the private sector, inpatient and residential care are the major categories with smaller numbers working in the community and in other clinical settings.



Most nursing providers are classified as registered nurses or registered midwives. The only other classification with more than 5% of the providers is Clinical Nurse Specialist mainly in the public sector. Most of the remainder work as nursing administrators at various levels.

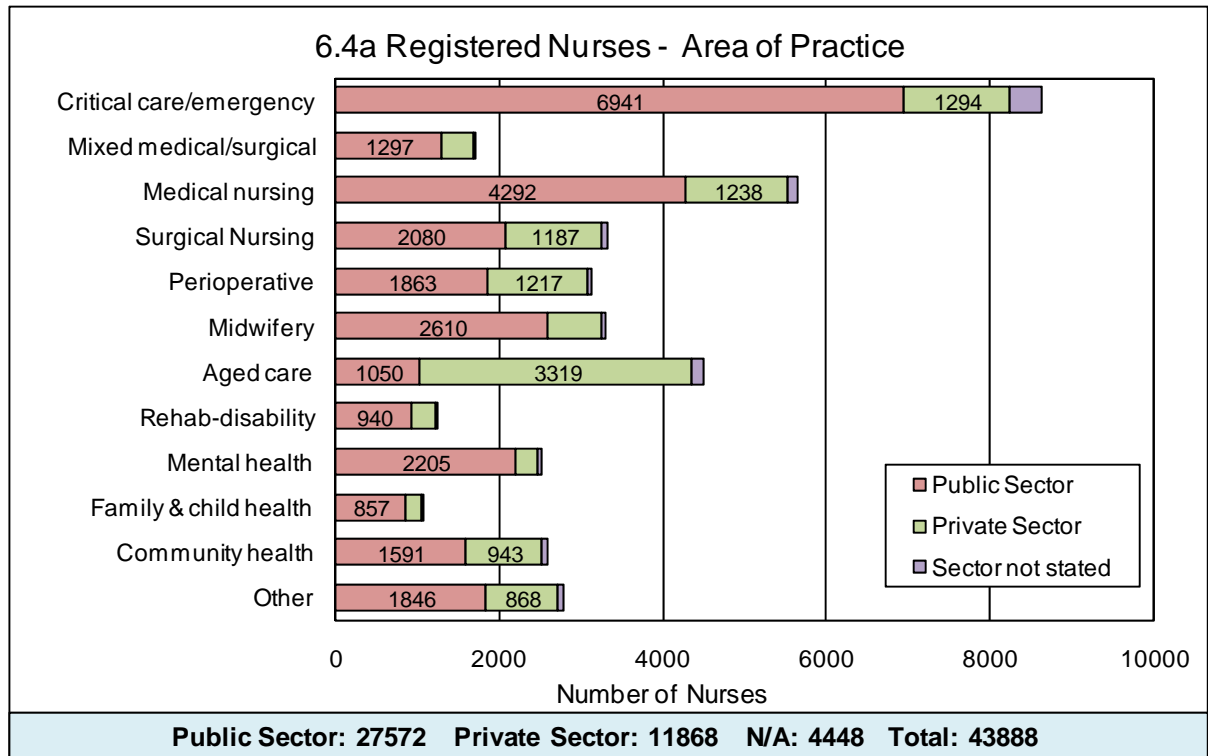


## 6.4 Area of Practice

The clinical area of practice allowed for 85 different listed responses and another 7 were specified by written additions. The full list is available in the tables but has been consolidated into 12 groups as shown in Chart 6.4a

For nurses working in general hospitals, the largest area of practice was critical care. Within that area, most nurses described their working area as emergency (8%) followed by intensive care (5%). Within medical services, general medical nursing (4%) was the common description rather than specialised functions that are usually confined to the principal hospitals. While it is not specifically asked, 506 nurses stated that their hospital work was general administration and more than 100 each nominated radiology and occupational health.

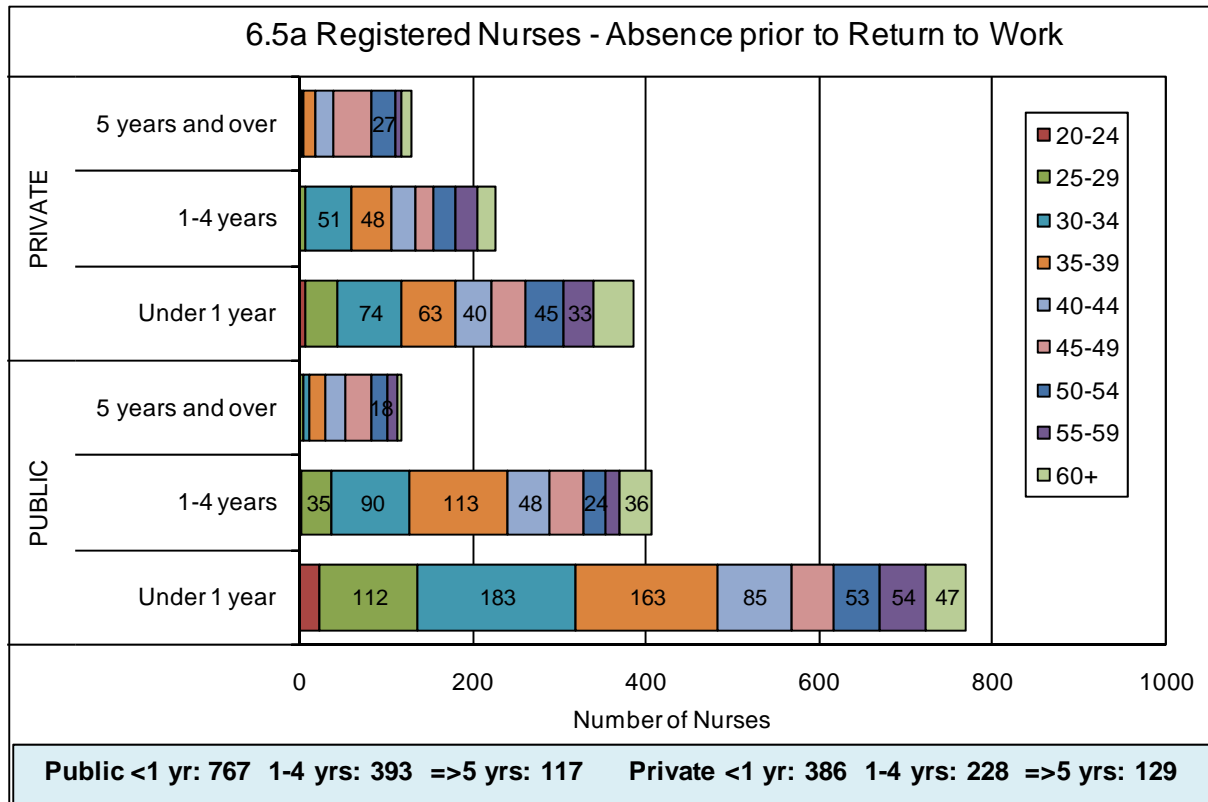
The major area of practice for public sector nurses who do not work in general hospitals is adult mental health (6%) followed by community health services (6%), often generalist. Private sector nurses who do not work in general hospitals are usually involved in aged care nursing or general practices.



## 6.5 Return to Work

The mobility of the workforce is further evident from data on nurses who returned to work after a period of absence.

There were 2,348 (2006, 2603) nurses who stated that they had returned to work in the last twelve months after a period of absence. The time of absence for a majority of these nurses was for less than 12 months as can be observed from Chart 6.5a but more than one thousand nurses had returned after absence of more than 1 year and 249 after absence of more than 5 years.



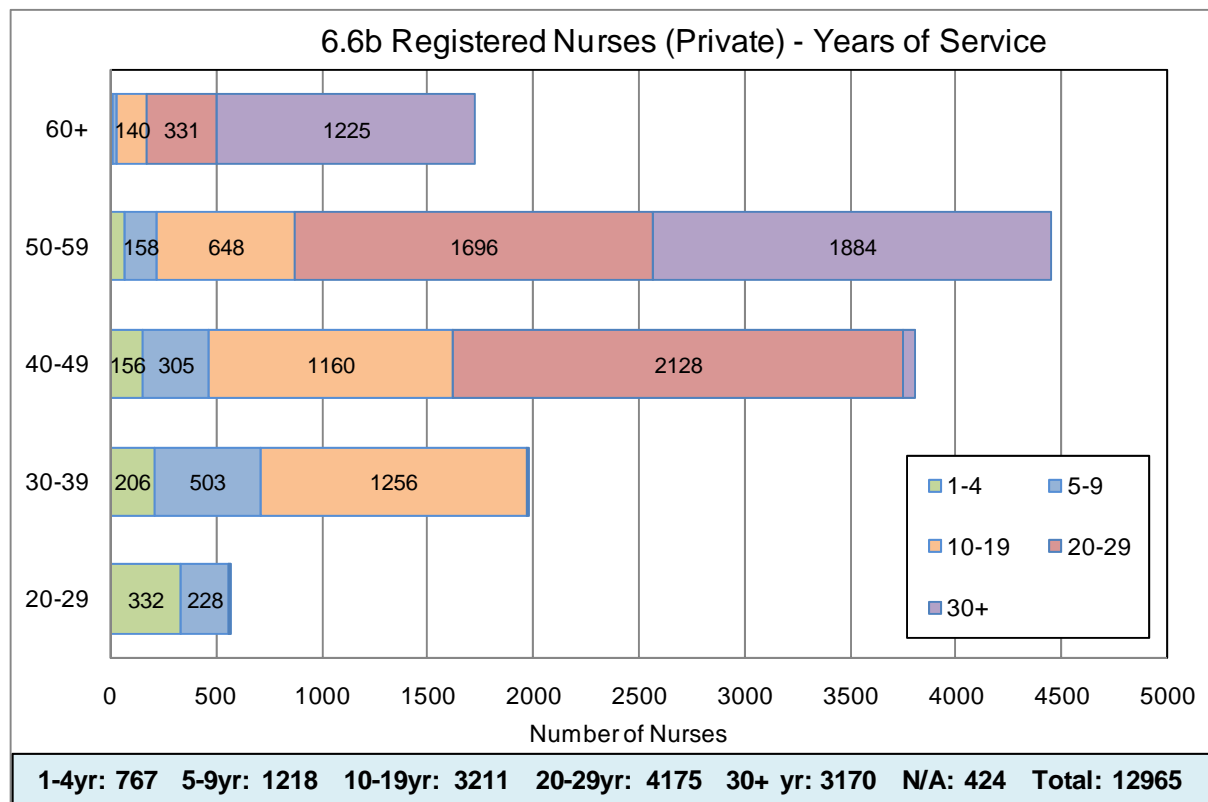
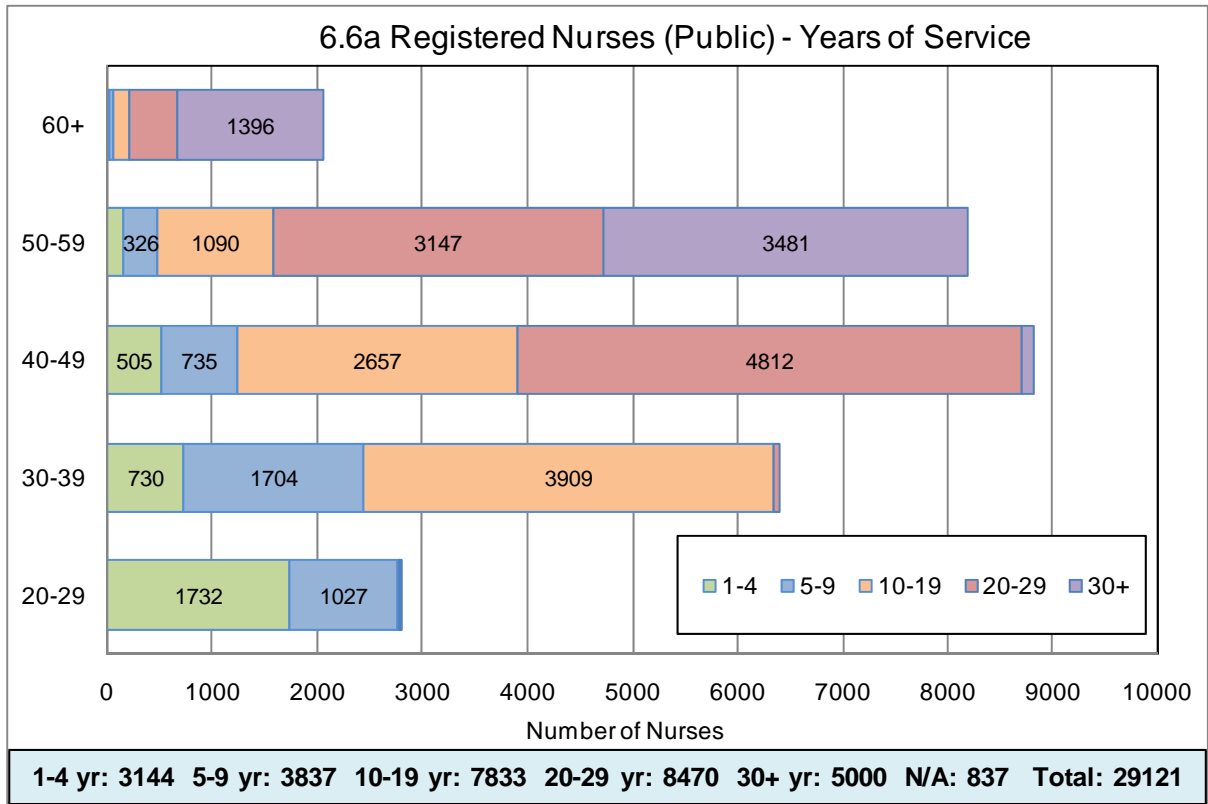
The age distribution of returning nurses is shown in Chart 6.5b. The most common age for return of less than 5 years is 30-34. After an absence of more than 5 years from nursing, the most common age at return is the late forties. Return to the private sector is slightly higher than the relative proportion of nurses working in each sector but at older ages, the private sector becomes more common.

## 6.6 Length of Service

The experience of the labour force is an important issue in appropriate service provision. While younger nurses can be expected to have less experience than their older colleagues, there are clear distinctions between age and the number of years spent in nursing. About 10% of nurses over the age of 40 have less than 10 years experience in nursing.

Charts 6.6a and 6.6b show the reported length of service for age bands in the public and private sectors of the workforce. It will be seen that the private sector has a higher

percentage of more experienced nurses although this is primarily a function of age. Within the key group of nurses aged 40-49, a similar 83 percent hold between 10 and 30 years of nursing experience in both sectors.



# 7

## LOCATION OF RESIDENCE & WORKPLACE

On the survey form, registered nurses were requested to state their postcode of residence and the location and postcode of their main job and second job (if applicable). The responses were edited to ensure that postcode matched location. Postcode was converted to Area Health Service (AHS) using an algorithm that selects the most appropriate AHS for that postcode.

Taken together, location of residence and location of workplace can indicate structural problems with the geography of the workforce. People prefer to work in reasonable proximity to where they live leading to substantial variation in opportunities taken up in different locations.

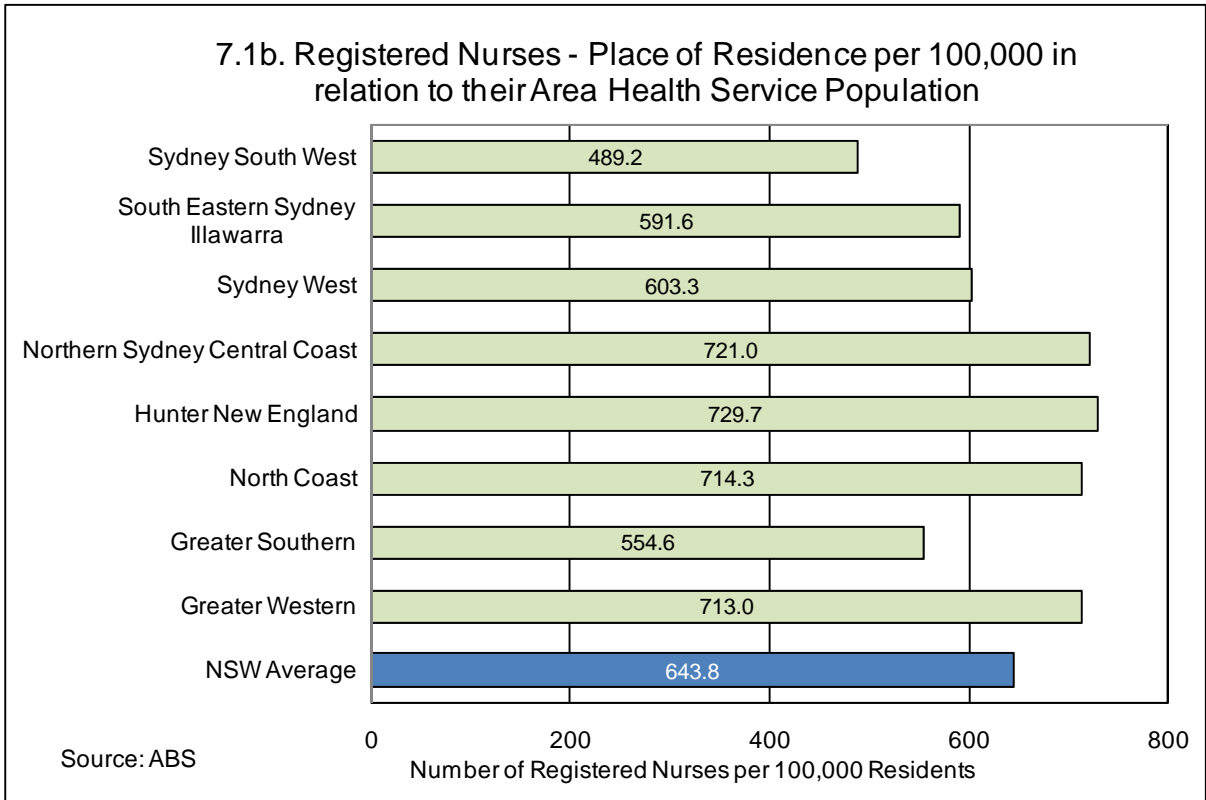
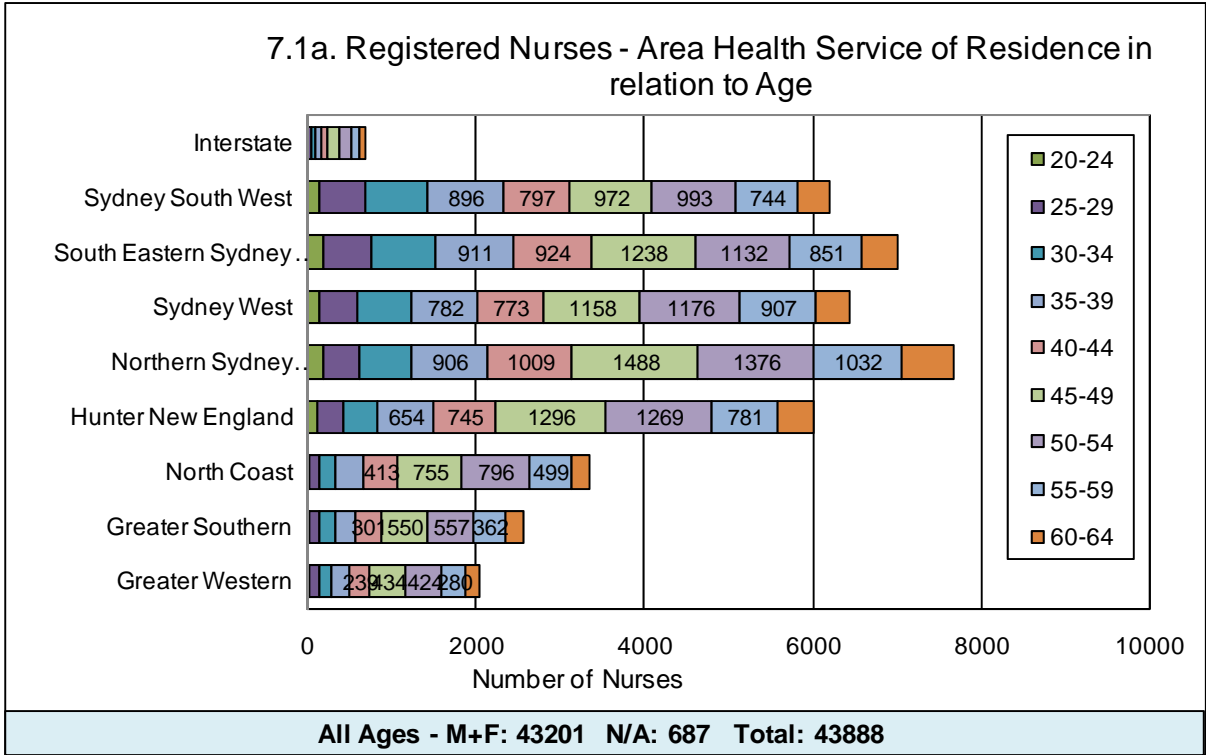
While there is no direct question as to whether nurses are working more than one job, there are 4,428 (10%) registered nurses who work one or more hours at a separate location.

### 7.1 Place of Residence

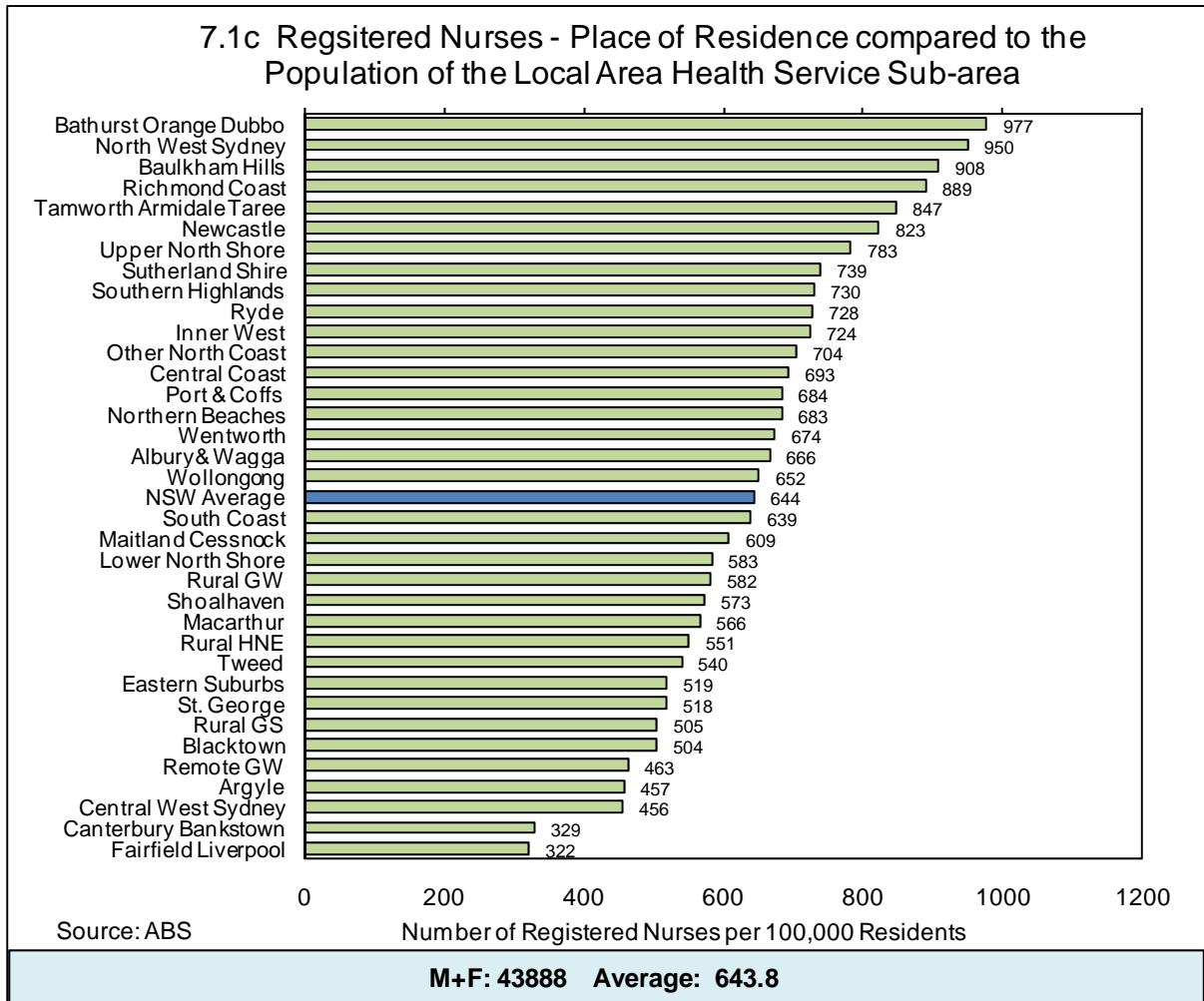
Responses from the survey indicate an average of 644 (2006, 647) working registered nurses per 100,000 population of the State of NSW including those living outside the State. If we apply the estimate of the NSW workforce shown in Table 2.2a, the estimate is 907 registered nurses per 100,000 population.

Chart 7.1a shows the AHS of residence by broad age bands for registered nurses working in NSW. The interstate addresses are usually the ACT, Gold Coast and Wodonga where NSW services including major hospitals are situated adjacent to State borders. Chart 7.1b depicts the same information as a number of registered nurses per 100,000 population.

The rate of registered nurses to population is fairly evenly distributed with the exception of Sydney South West Area where there is a significantly lower rate of resident nurses. The Greater Southern Area is also low but services are provided by nurses living across the ACT and Victorian borders. Higher than average rates of nurse residents are found in Northern Sydney Central Coast, Hunter New England and North Coast and Greater Western AHS.



As the AHS are very large and heterogeneous, a similar analysis was undertaken for sub-areas, consistent with planning districts within the AHS. The results are shown in Chart 7.1c. It will be seen that the low rate of nurses to population in Sydney South West arises from the Fairfield Liverpool and Canterbury Bankstown sub-areas with the lowest rates in the State whereas the Inner West has above average rates. Elsewhere, Central West Sydney (Sydney West), Argyle (Southern) and the remote sector of Greater Western have less than 500 resident nurses per 100,000 population. The highest rate of resident nurses to population is found in the large rural cities of Bathurst, Orange, Dubbo and Lismore. Within Sydney, the highest rate is located in the adjacent suburban sectors of Baulkham Hills (Sydney West) and North West Sydney (Northern Sydney Central Coast).



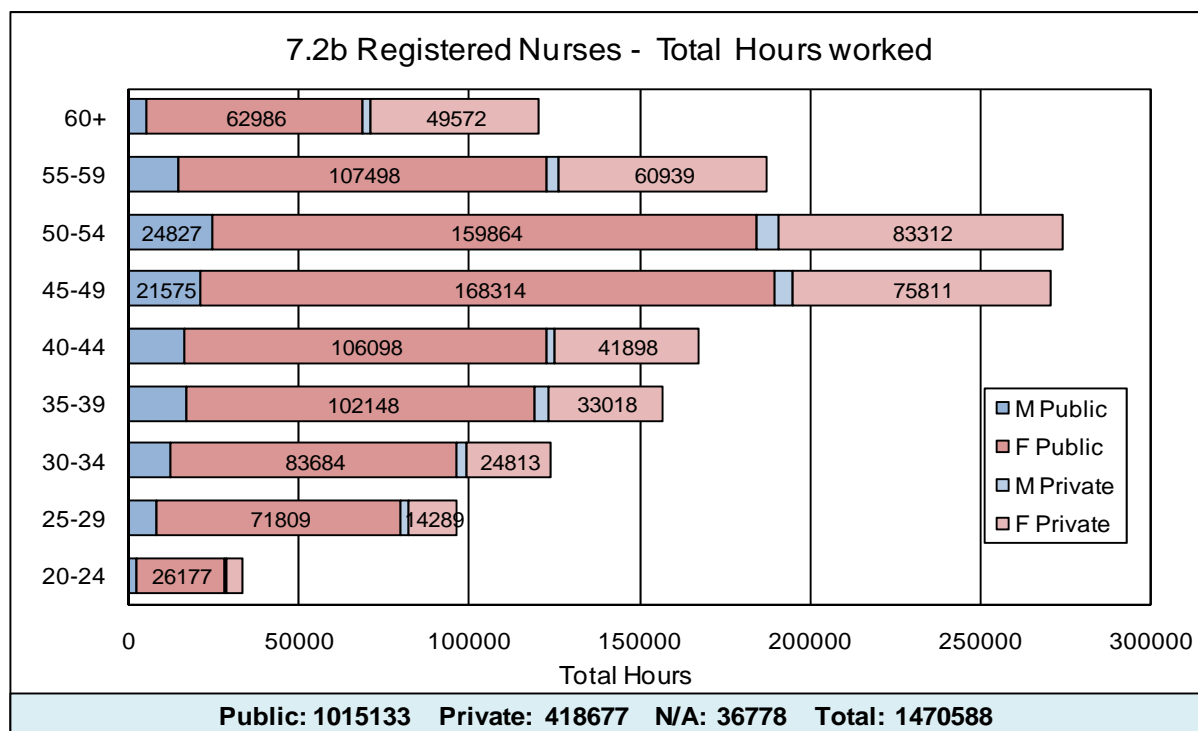
## 7.2 Place of Work

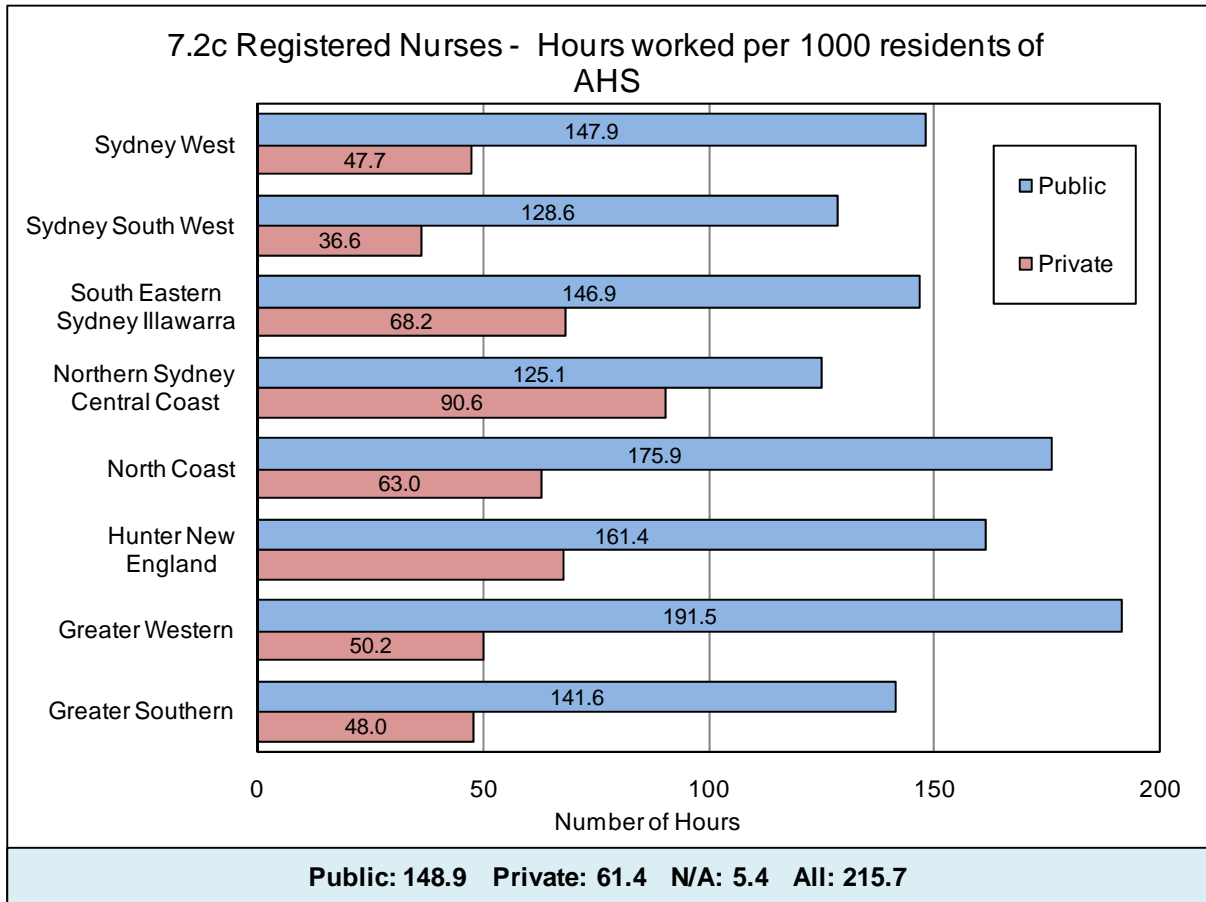
The sector (public/private) and AHS for all jobs is shown for registered nurses working in NSW in Table 7.2a. Nurses with more than one job in different sectors are classified as 'mainly public' or 'mainly private'. If the main job was held outside NSW, the AHS of the second job is shown. Registered nurses indicating that they are working in NSW but not providing data on the location of the NSW component of their work (1,921) or the sector in which they work (624) are excluded from these tables. The great majority of registered nurses work only in NSW.

**Table 7.2a Working Status by Area Health Status**

AHS	Public Sector Only	Public Sector Mainly	Private Sector Mainly	Private Sector Only
Sydney South West	4,362	275	63	1,310
South Eastern Sydney Illawarra	4,978	201	100	2,401
Sydney West	4,334	249	60	1,536
Northern Sydney Central Coast	3,889	192	99	3,115
Hunter New England	3,837	130	106	1,666
North Coast	2,381	97	54	913
Greater Southern	1,894	87	60	674
Greater Western	1,542	65	50	421
ALL AHS	27,217	1,296	592	12,036

Chart 7.2b shows the total number of hours of work for all registered nurses working in NSW by age band while chart 7.2c presents the information in average hours worked per thousand residents. Most Areas receive close to the State average of 215 hours per thousand residents. The exceptions are Sydney South West receiving considerably less and Greater Western obtaining substantially more hours, especially in the public sector. Hours in Northern Sydney Central Coast are close to average but with greater emphasis in the private sector.

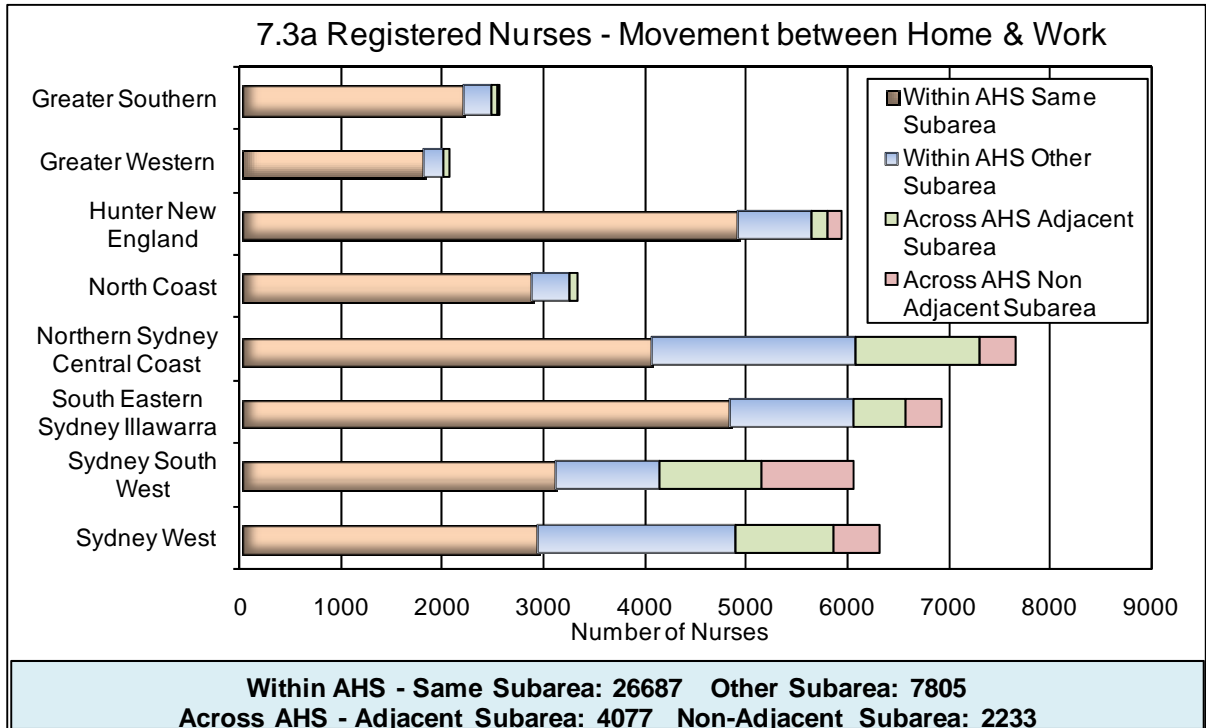




### 7.3 Movement between Home and Work

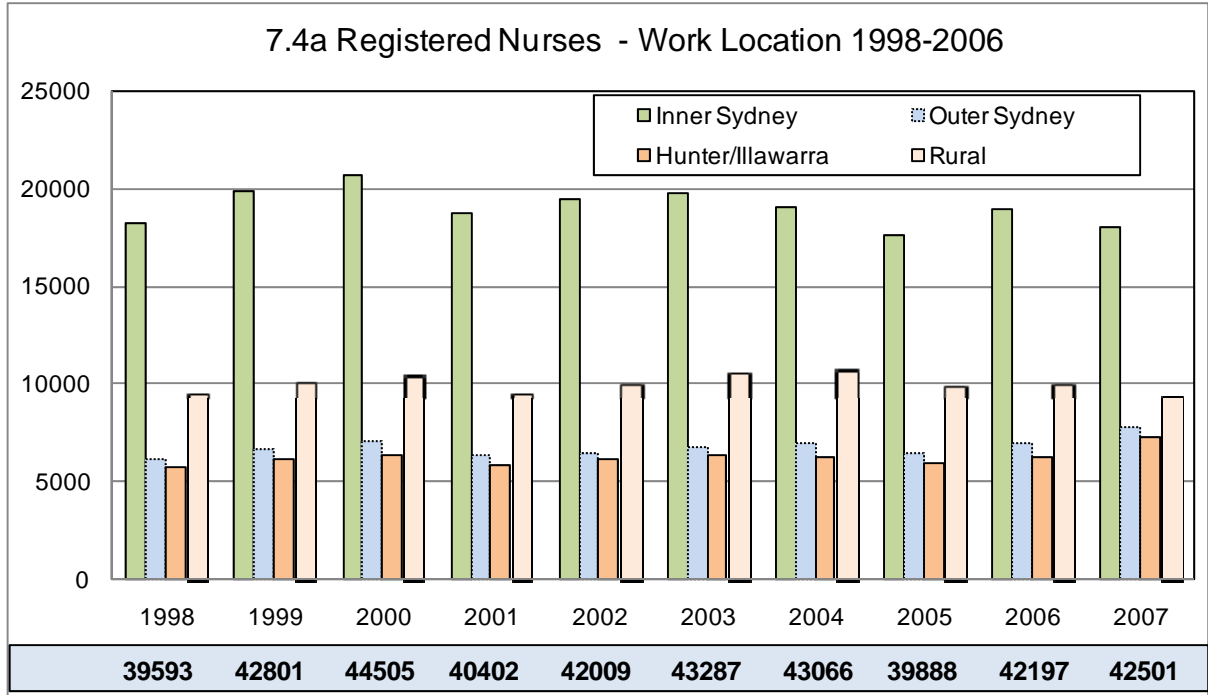
The length of travel between home and work is a key determinant of change in location of the workforce. Chart 7.3a indicates movement within and between Area Health Services using the subarea categories discussed in Section 7.1. Nurses whose principal job lies within their Area Health Service of residence are grouped into those working in the same subarea and those working in different subareas. Nurses who work in a different Area Health Service from their residence are grouped into those where the subarea of work is adjacent to their subarea of residence and those who work in non adjacent subareas.

In metropolitan Areas where distance travelled to work in another Area is less great, the movement between Areas is more pronounced. Nevertheless, up to 25% of registered nurses travel further than an adjacent subarea with the highest amount of movement occurring for those residing in Sydney South West and the least in South Eastern Sydney Illawarra. In rural Areas, movement is generally within the Area Health Service but sometimes to a different subarea because the location of major hospitals determines availability of work.



## 7.4 Changes in Location since 1998

The movement in location of registered nurses can be observed in another way by grouping workplace by the former Area Health Services and combining these into Inner Sydney, Outer Sydney, the Hunter and Illawarra regional centres and rural NSW. Chart 7.4a indicates a slow movement away from Inner Sydney towards Outer Sydney with little change in regional and rural locations. This movement follows population shifts however registered nurses remain under-represented in Outer Sydney with 16% of the nursing workforce and 22% of the population. Nurses are over-represented in the Inner Sydney locations compared to population.



## 8

## HOURS OF WORK

While 43,888 registered nurses responded that they work in NSW, 1,586 (2006 1,165) indicated only interstate work or did not provide a response for the number of hours worked in this State during their usual week. This section shows statistics for hours of work for those 42,302 (2006 42,654) registered nurses who work in NSW for one hour or more.

### 8.1 Total Full Time Equivalents

Working hours may be expressed in full time equivalents 'FTE'. Award regulations determine 38 hours as the standard working week although some nurses may extend that working week by a considerable extent. The award period of 38 hours can be regarded as the standard contribution of one full time person. Time worked in excess of 38 hours can then be taken as the excess contribution to the labour supply up to a total of 76 hours. The few respondents stating more than 76 hours or the equivalent of two FTE are limited to 76 hours for FTE reporting. Working hours outside of NSW have been disregarded.

By this definition, registered nurses working in NSW recorded a total of 1,470,588 (2006 1,477,330) hours of work in an average week equivalent to 35,242 (2006 35,625) full time persons or 0.80 FTE per worker. The additional contribution beyond 38 hours was equivalent to another 3,457 (2006 3,252) persons or 0.08 FTE per person, the same as 2006. Public sector nurses accounted for 26,714 (2006 27,254) FTE and private sector nurses for 11,018 (2006 11,204) FTE aggregating regular and additional contribution. The remaining 967 FTE came from nurses who did not indicate their sector of work.

The difference of 7,059 between the number of working nurses and the number of regular FTE arises mainly through the part time work of the 20,1777 nurses (48% of the labour force) shown in Chart 8.1a by age group. Note, however, that some nurses may have reported part time work in the week before the survey because they took a rostered day of leave.

Part time work is relatively more common in the private sector where part time workers represent 58% of the nursing population compared to 43% in the public sector. It will be seen that the most common age for part time workers is 45-49 in both public and private employment. However, in the public sector it is common for younger nurses age 40-44 and 35-39 to work part time while in the private sector, older nurses aged 50-54 and 55-59 are more commonly found in part time work.

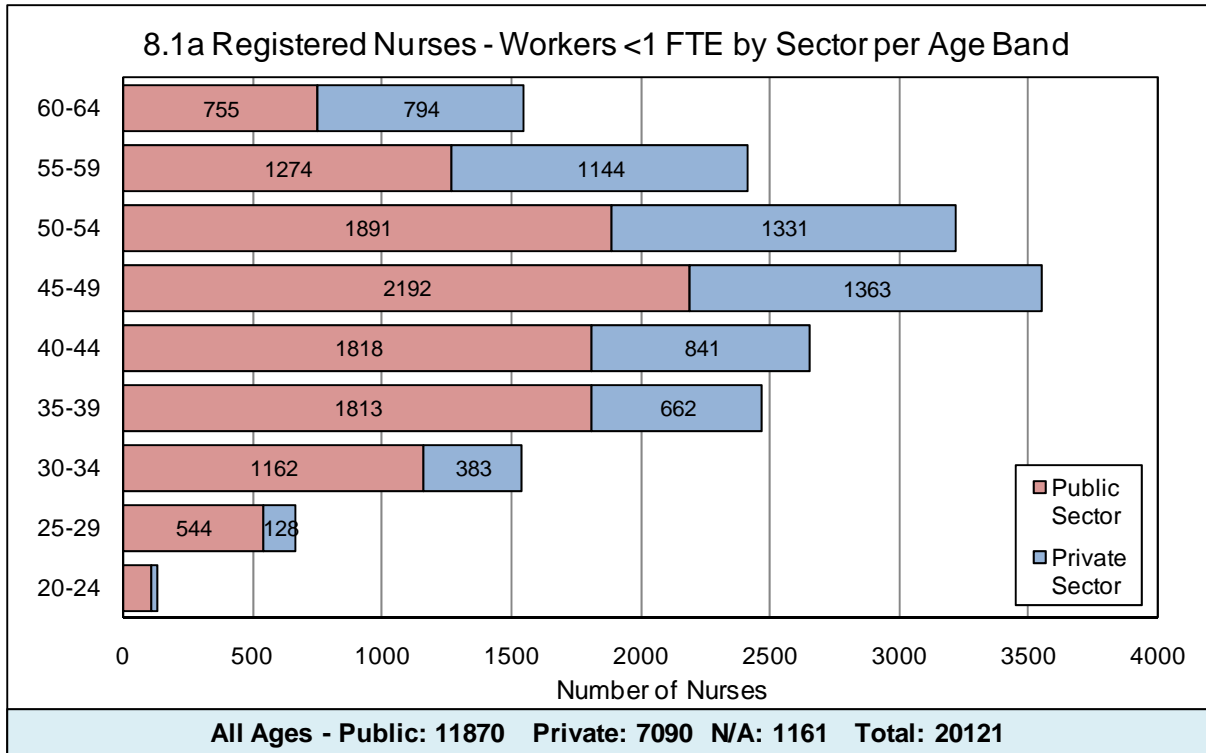
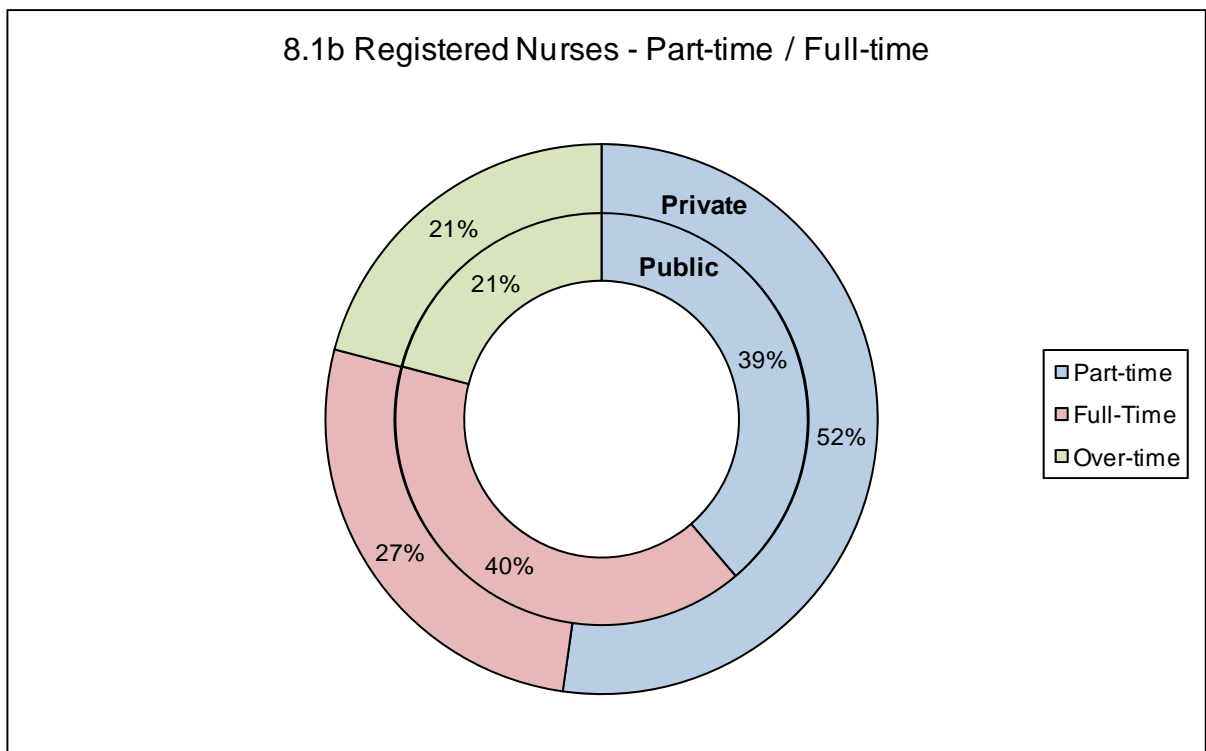
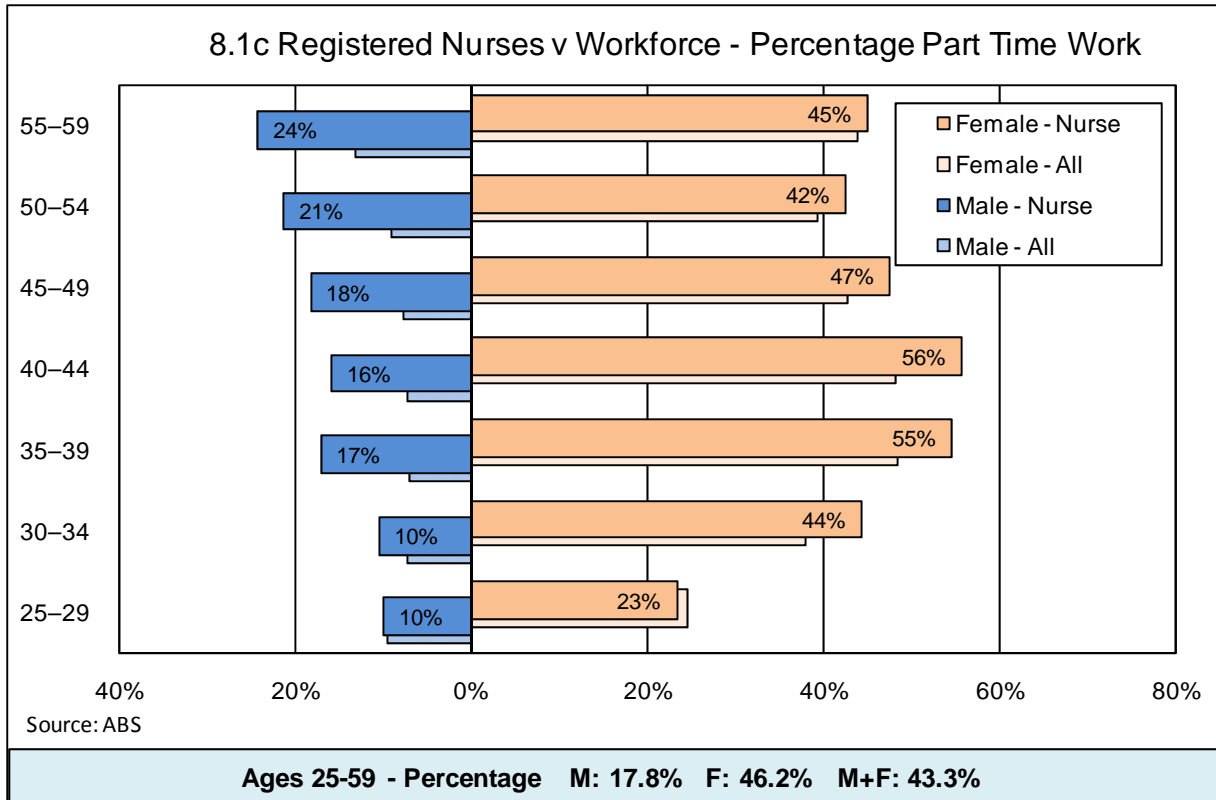


Chart 8.1b indicates work contributions by sector of work over a larger range of hours. The chart highlights nurses working below 35 hours and above 40 hours in order to cover small differences in the average working week. The private sector experiences more nurses working less than 35 hours while in the public sector more nurses work a standard week. However, in both sectors, a 40 hour week is more commonly recorded than a 38 hour week. The relatively large number of nurses who worked 32 hours in the previous week may be due to the taking of rostered leave or to working part time for 4 days.



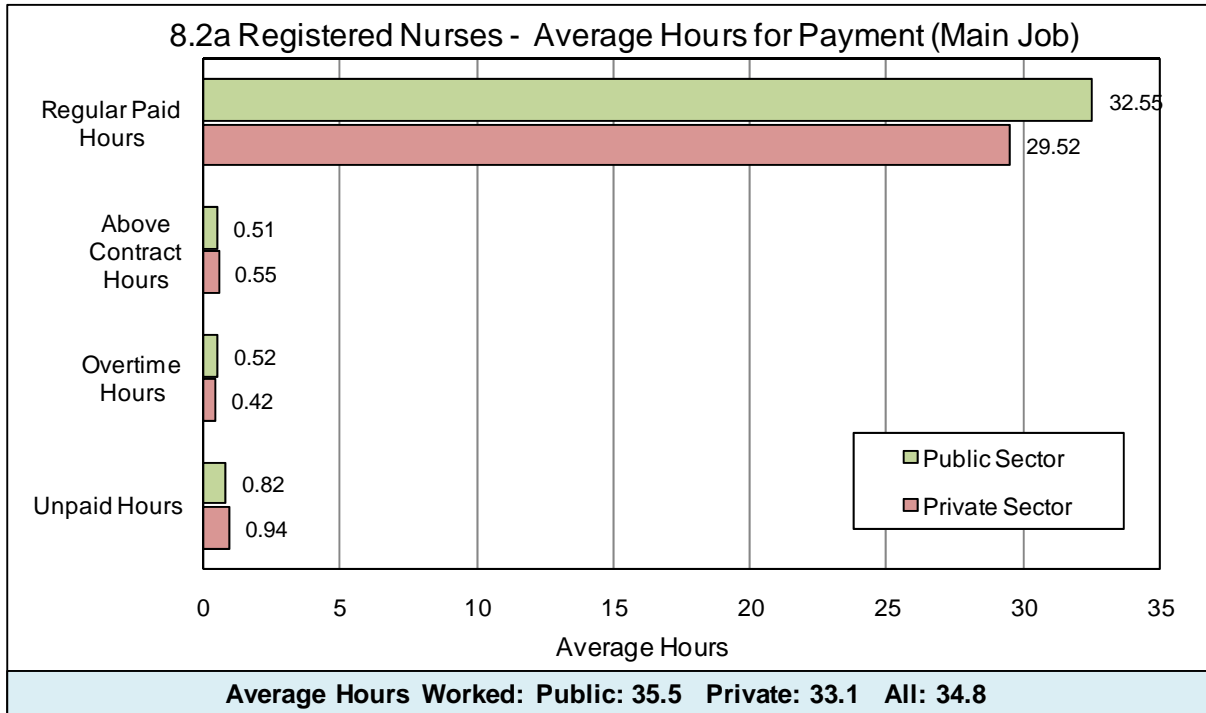
A comparison between part time work in nursing was made to part time work in the whole Australian Labour Market<sup>2</sup>. It will be observed that part time work for females is generally lower for nurses than in the workforce generally except for those older than 50. At younger ages, and in contrast to enrolled nurses, part time work is quite uncommon. For males, part time work for nurses is more common than in the general workforce except for the youngest age groups where it is similar.



## 8.2 Payment

It was found that 94% of nursing hours are for regular paid time with only slight differences between public and private sector workers and for main and subsequent jobs. Of the remaining hours, less than one hour a week each is worked above contract, overtime or unpaid. Work for unpaid hours is more common in the private sector although very few hours are reported as worked unpaid as a whole.

<sup>2</sup> Australian Bureau of Statistics *Australian Labour Market Statistics January 2007* Catalogue Number 6105.0



### 8.3 Core Roles

The majority (70%) of nursing hours are spent providing direct clinical care, especially in the public sector. The actual percentage is likely to be higher because the core role is unknown for more than 4% of registered nurses who did not respond to the question on core roles. Management represents another 18% of hours worked with 5% each for education and other activities. Privately employed registered nurses spend more hours in management than public sector nurses primarily due to management responsibilities in aged residential care.

