Occupational and Environmental Medicine

The Workforce

An Occupational Physician applies high-level medical skills to the interface between a person’s work and his or her health. The Royal Australasian College of Physicians (RACP), Australasian Faculty of Occupational and Environmental Medicine is accredited by the Australian Medical Council (AMC) to deliver occupational and environmental medicine training.

Workforce Characteristics in 2015

- **Headcount**: 75
- **Female**: 24.0%
- **32.2 hours per week**
- **58.9 years average age**
- **78.7% Workforce aged over 50**
- **53.3% Workforce aged over 60**
- **2 New Fellows in NSW in 2016**

Supply and Distribution

**Total NSW Workforce by Sector (percent)**

- **Public only**: 15%
- **Other (Non-Clinical)**: 27.0%
- **Private only**: 10.9%
- **Public and Private**: 7.3%

**By Sector**

- **Public**: 73%
- **Private**: 27%

**Hours By Sector**

- **Public only**: 62.1%
- **Private only**: 9.4%
- **Public and Private**: 15%

**By Age**

- **50+**: 15%
- **60+**: 9%

**Metropolitan Sydney**

- **64 headcount**
- **33 hours per week**
- **59 years average age**
- **52% aged over 60**

**Non-Metropolitan Sydney**

- **11 headcount**
- **30 hours per week**
- **59 years average age**
- **64% aged over 60**

Retirement intentions (60+)

- **Next 1-2 years**: 7%
- **Next 3-5 years**: 41%
- **Next 6-10 years**: 40%

- **Next 1-2 years**: 0%
- **Next 3-5 years**: 75%
- **Next 6-10 years**: 25%

*Data from records with less than 5 headcount is to be restricted due to privacy requirements.*

Trainees

**Advanced Trainees in NSW:**

- **2015**: 26
- **2016**: 23
- **2017**: 21

**NSW Trainees as % of Australia 2017**: 25.6%

**Proportion female trainees in NSW 2017**: 28.6%

Data sourced: The National Health Workforce Dataset – Australian Government Department of Health; The Australian Health Practitioner Regulation Agency (AHPRA); The Medical Education and Training in Australia Report (MET).
The Future in NSW - Workforce Planning to 2030

Workforce projections are provided for a low and high demand scenario. Where requirements for both scenarios are met without the need for additional fellows, the projected “No Growth” scenario workforce data is provided.

- **Estimated Demand Growth**: Between 0.8% (low demand scenario) to 1.8% (high demand scenario).
- **Estimated Workforce Size**: In 2030, 79 to 91 Headcount (assuming all additional fellows will enter the workforce).
- **Estimated Workforce Average Age**: In 2030, 53.8 to 54.7 years.
- **Estimated percentage over 60 years**: In 2030, 23.9% to 27.6% of workforce over 60 years.
- **Estimated Additional Fellows**: All demand scenarios require additional fellows. Trainee numbers need to increase by approximately 3 per annum to meet projected 2030 requirements.

### Workforce Planning Priority and Assessment Framework

- **Priority for Workforce Planning**: SIGNIFICANT CAREER OPPORTUNITIES
  - **Small Workforce Size**: The factor associated with the sustainability of small workforces
  - **New Fellow Requirements**: The factor associated with the requirement to recruit additional trainees, based on workforce planning to 2030
  - **Retirement Intentions < 5 years**: Minor factor
  - **Ageing > 60**: Major factor
  - **Ageing > 70**: Moderate factor

- **Rating Key**: Minimal Factor < Minor Factor < Moderate Factor < Major Factor

### Workforce Modelling Considerations

- Workforce modelling is based on current models of care. Any change in the models may impact on requirements.
- Any changes to current training programs will affect the workforce modelling outcome.
- Workforce modelling is based on current workforce hours profile by age co-hours. Any changes to hours worked by future clinicians will affect the model.
- There is an accepted error rate of plus or minus two per cent within workforce modelling.
- The model does not address any mal-distribution either by location (rural or regional) or sector (public or private).