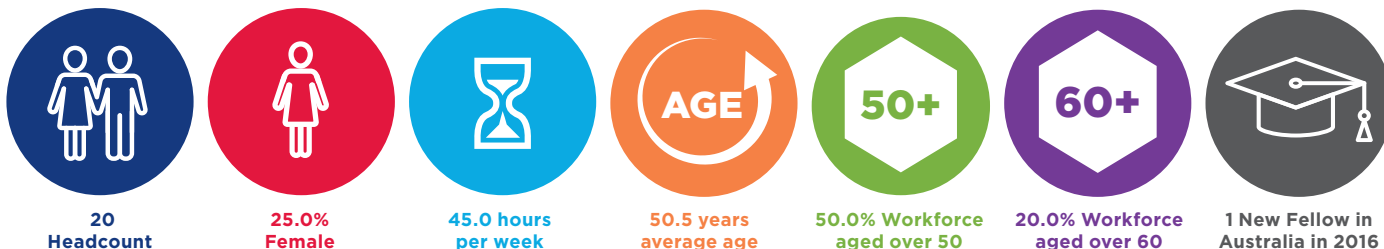


# Paediatrics – Respiratory & Sleep

## The Workforce

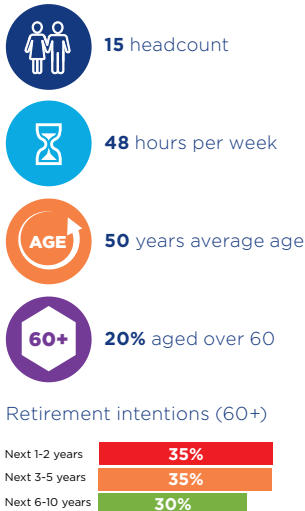
Respiratory Medicine is a specialty of internal medicine encompassing diseases of the respiratory system. Sleep Medicine is involved in the diagnosis and treatment of sleep disorders and disturbances. The Royal Australasian College of Physicians (RACP) is accredited by the Australian Medical Council (AMC) to deliver paediatrics and child health training.

## Workforce Characteristics in 2015

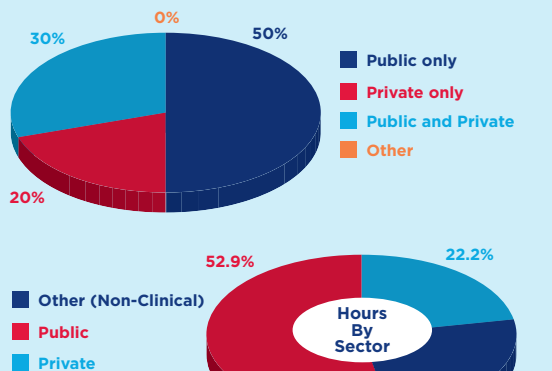


## Supply and Distribution

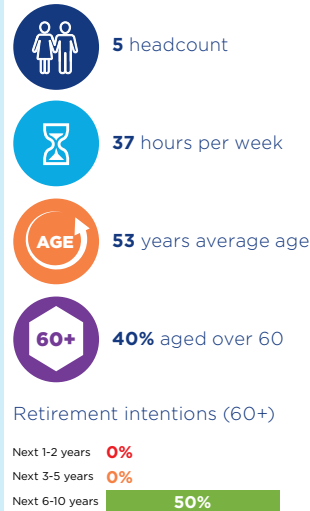
### Metropolitan Sydney



### Total NSW Workforce by Sector (percent)



### Non-Metropolitan Sydney



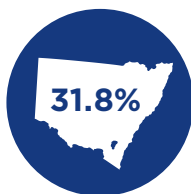
\* Data from records with less than 5 headcount is to be restricted due to privacy requirements

## Trainees



### Advanced Trainees in NSW:

2015	2016	2017
14	16	7



NSW Trainees  
as % of  
Australia 2017



Proportion  
female  
Trainees in  
Australia 2017

## 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 2.4% (low demand scenario) to 3.4% (high demand scenario).



**Estimated Additional Fellows**  
All demand scenarios require no additional fellows and hence no growth in trainees.



**Estimated Workforce Size**  
In 2030, 39 Headcount (assuming all additional fellows will enter the workforce).

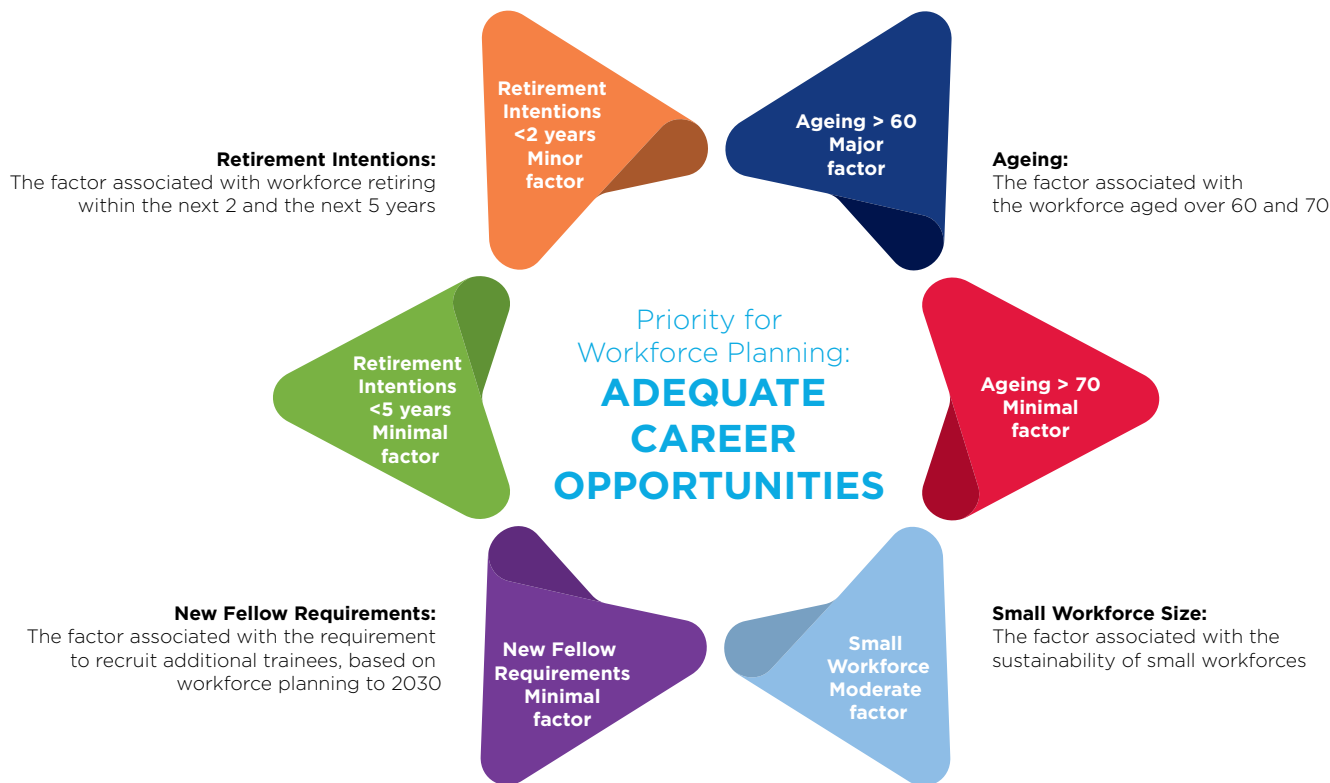


**Estimated Workforce Average Age**  
In 2030, 49.1 years.



**Estimated percentage over 60 years**  
In 2030, 22.5% of workforce over 60 years.

## Workforce Planning Priority and Assessment Framework



**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)