Physician – Nephrology

The Workforce

Nephrologists specialise in the care of patients with diseases of the kidneys and urinary tract. The Royal Australasian College of Physicians (RACP) is accredited by the Australian Medical Council (AMC) to deliver physician training.

Workforce Characteristics in 2015

Supply and Distribution

Total NSW Workforce by Sector (percent)

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).

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

Trainees

Advanced Trainees in NSW:

NSW Trainees as % of Australia 2017

Proportion female Trainees in Australia 2017

33.0%

60.2%
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 3.4% (low demand scenario) to 4.3% (high demand scenario).
- Estimated Additional Fellows: All demand scenarios require no additional fellows and hence no growth in trainees.
- Estimated Workforce Size: In 2030, 272 Headcount (assuming all additional fellows will enter the workforce).
- Estimated percentage over 60 years: In 2030, 21.0% of workforce over 60 years.

Workforce Planning Priority and Assessment Framework

- Retirement Intentions: The factor associated with workforce retiring within the next 2 and the next 5 years.
- Ageing > 60: Moderate factor
- Ageing > 70: Minor factor
- New Fellow Requirements: The factor associated with the requirement to recruit additional trainees, based on workforce planning to 2030.
- Small Workforce Size: The factor associated with the sustainability of small workforces.
- 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).