The Workforce

General Surgery is a specialty that focuses on the surgical treatment of abdominal organs, skin and soft tissue, and endocrine organs. General Surgery also includes breast surgery, transplantation, emergency and trauma surgery, head and neck surgery, vascular surgery, and surgical oncology. The Royal Australasian College of Surgeons (RACS) is accredited by the Australian Medical Council (AMC) to deliver surgery training.

Workforce Characteristics in 2015

- **521 Headcount**
- **12.7% Female**
- **45.6 hours per week**
- **53.8 years average age**
- **55.7% Workforce aged over 50**
- **35.2% Workforce aged over 60**
- **25 New Fellows in NSW in 2017**

Supply and Distribution

**Metropolitan Sydney**

- 350 headcount
- 45 hours per week
- 54 years average age
- 35% aged over 60

**Non-Metropolitan Sydney**

- 171 headcount
- 47 hours per week
- 54 years average age
- 36% aged over 60

Retirement intentions (60+)

- Next 1-2 years: 18%
- Next 3-5 years: 44%
- Next 6-10 years: 37%

Trainees

**Advanced Trainees in NSW:**

<table>
<thead>
<tr>
<th>Year</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>166</td>
<td>159</td>
<td>152</td>
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</tbody>
</table>

**NSW Trainees as % of Australia 2017**

- 37.4%

**Proportion female Trainees in Australia 2017**

- 38.0%

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 1.5% (low demand scenario) to 1.9% (high demand scenario).

- **Estimated Workforce Size**
  - In 2030, 707 Headcount (assuming all additional fellows will enter the workforce).

- **Estimated Workforce Average Age**
  - In 2030, 52.4 years.

- **Estimated percentage over 60 years**
  - In 2030, 25.7% of workforce over 60 years.

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

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

Workforce Planning Priority and Assessment Framework

- **Retirement Intentions**
  - The factor associated with workforce retiring within the next 2 and the next 5 years
  - Retirement Intentions <2 years Major factor
  - Retirement Intentions <5 years Major factor

- **Ageing > 60**
  - The factor associated with the workforce aged over 60 and 70
  - Ageing > 60 Major factor

- **Ageing > 70**
  - The factor associated with the workforce aged over 60 and 70
  - Ageing > 70 Major factor

- **New Fellow Requirements**
  - The factor associated with the requirement to recruit additional trainees, based on workforce planning to 2030
  - New Fellow Requirements Minimal factor

- **Small Workforce Size**
  - The factor associated with the sustainability of small workforces
  - Small Workforce Minimal 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)