

# Pain Medicine

## The Workforce

The Pain Medicine specialist can act as a consultant to other physicians and/or as the principal treating physician. The Care provided by a Pain Medicine specialist includes prescribing medication, coordinating rehabilitative services and performing pain relieving procedures.

In the 2010 calendar year, there were 27 Pain Medicine Physicians who primarily worked within NSW. This workforce had the following characteristics:

- Average Age:** 57 years
- Females:** 22.2% of the workforce
- Average Hours:** Pain Medicine Physicians worked an average 46.1 hours per week (of a standard 40 hour week)
- Over 50s:** Approximately 74% were aged 50 years or over

Source: AIHW (2012) 2010 Medical Workforce Profile extracts for NSW (unpublished data)



## Trainees and New Fellows

**Advanced Trainees (AT)\*:** 59 ATs in Australia in 2012 with an average of 53 between 2008 and 2012.

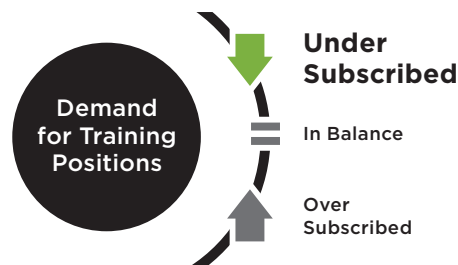
**Females:** Female ATs in Australia have increased from 14 in 2008 to 23 in 2012 (39% of total).

**New Fellows:** Nationally, an average of 12 per year from 2008-2011 (30.1 % female).

**Medical Specialty College:** Australian and New Zealand College of Anaesthetists (ANZCA) – Faculty of Pain Medicine ([www.fpm.anzca.edu.au](http://www.fpm.anzca.edu.au))

**HETI Supported Training:** Not part of Health Education and Training Institute Training Networks ([www.heti.nsw.gov.au](http://www.heti.nsw.gov.au))

Source: Medical Training Review Panel (MTRP) \* Basic Physician Training must be completed before entering Advanced Training



## Retirement Intentions in NSW

**1-2 Years:** 3.7% of Pain Medicine Physicians intend to retire within 1-2 years

**3-5 Years:** 18.5% of Pain Medicine Physicians intend to retire within the next 3-5 years

**6-9 Years:** 11.1% of Pain Medicine Physicians intend to retire within the next 6-9 years

Source: AIHW (2012) 2010 Medical Workforce Profile extracts (unpublished data)



## Supply and Distribution



**Distribution:** Pain Medicine Physicians are located mainly within Local Health Districts (LHDs) in metropolitan Sydney, Illawarra Shoalhaven and Hunter New England LHDs.

**Rural & Regional:** Pain Medicine Physicians are only located in Southern NSW and Western NSW LHDs.

## The Future in NSW – Workforce Planning to 2025\*

**Estimated Demand Growth:** Not Applicable

**Estimated Workforce Size:** Not Applicable

**Additional Fellows:** All demand scenarios suggest a small number of additional trainees required

**Range:** Not Applicable

\*Workforce Planning to 2025 combines the physician sub-specialties of Addiction Medicine, Occupational and Environmental Medicine, Pain Medicine, Palliative Medicine, Public Health Medicine, Sexual Health Medicine, Clinical Pharmacology and Clinical Genetics. These physician sub-specialties were grouped and modelled together due to small workforce size in the individual sub-specialties.

## Workforce Planning Priority and Risk Rating



**Ageing:** The risk associated with the workforce aged over 60 and 70.

**Small Workforce Size:** The risk associated with the sustainability of small workforces.

**Retirement Intentions:** The risk associated with the retirement intentions of the current workforce.

**New Fellow Requirements:** The risk associated with the requirement to recruit additional trainees, based on workforce planning to 2025.

**Training Supervision:** The risk associated with the availability of the existing workforce to provide supervision to new trainees.

## Future Workforce Considerations

Addressing rural and regional workforce maldistribution