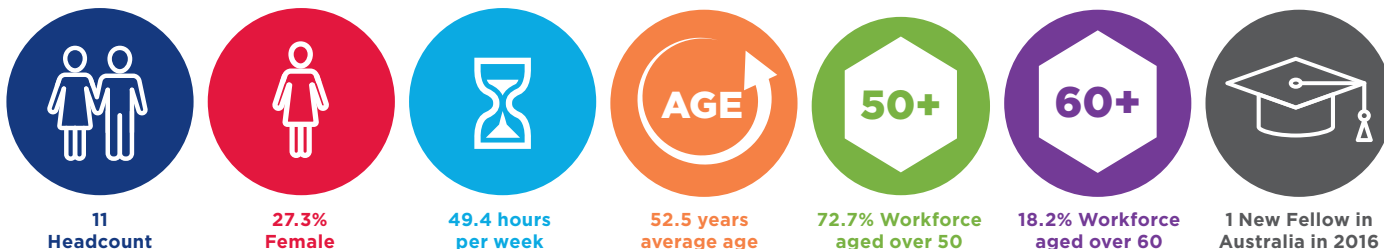


Obstetrics & Gynaecology – Maternal Fetal Medicine

The Workforce

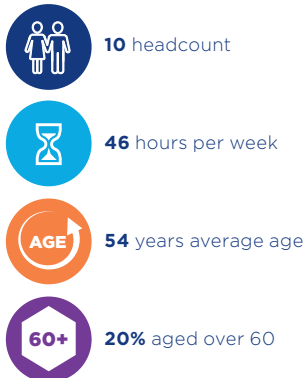
Obstetricians and Gynaecologists are concerned with separate aspects of women's health care and often managed in the one service. Obstetricians provide medical care before, during and after childbirth. Gynaecologists diagnose, treat and aid in the prevention of female reproductive disorders. The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) is accredited by the Australian Medical Council (AMC) to deliver obstetrics & gynaecology training.

Workforce Characteristics in 2015

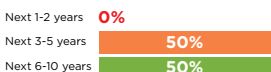


Supply and Distribution

Metropolitan Sydney

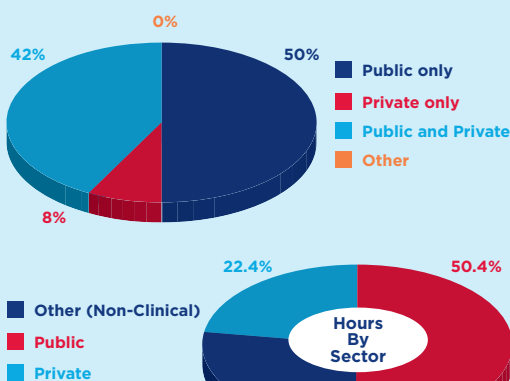


Retirement intentions (60+)



Total NSW

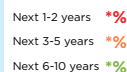
Workforce by Sector (percent)



Non-Metropolitan Sydney



Retirement intentions (60+)



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

Trainees

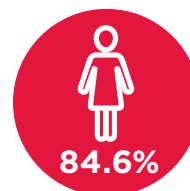


Advanced Trainees in Australia:

2015	2016	2017
7	4	29



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 1.7% (low demand scenario) to 3.1% (high demand scenario).



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



Estimated Workforce Size
In 2030, 19 Headcount (assuming all additional fellows will enter the workforce).

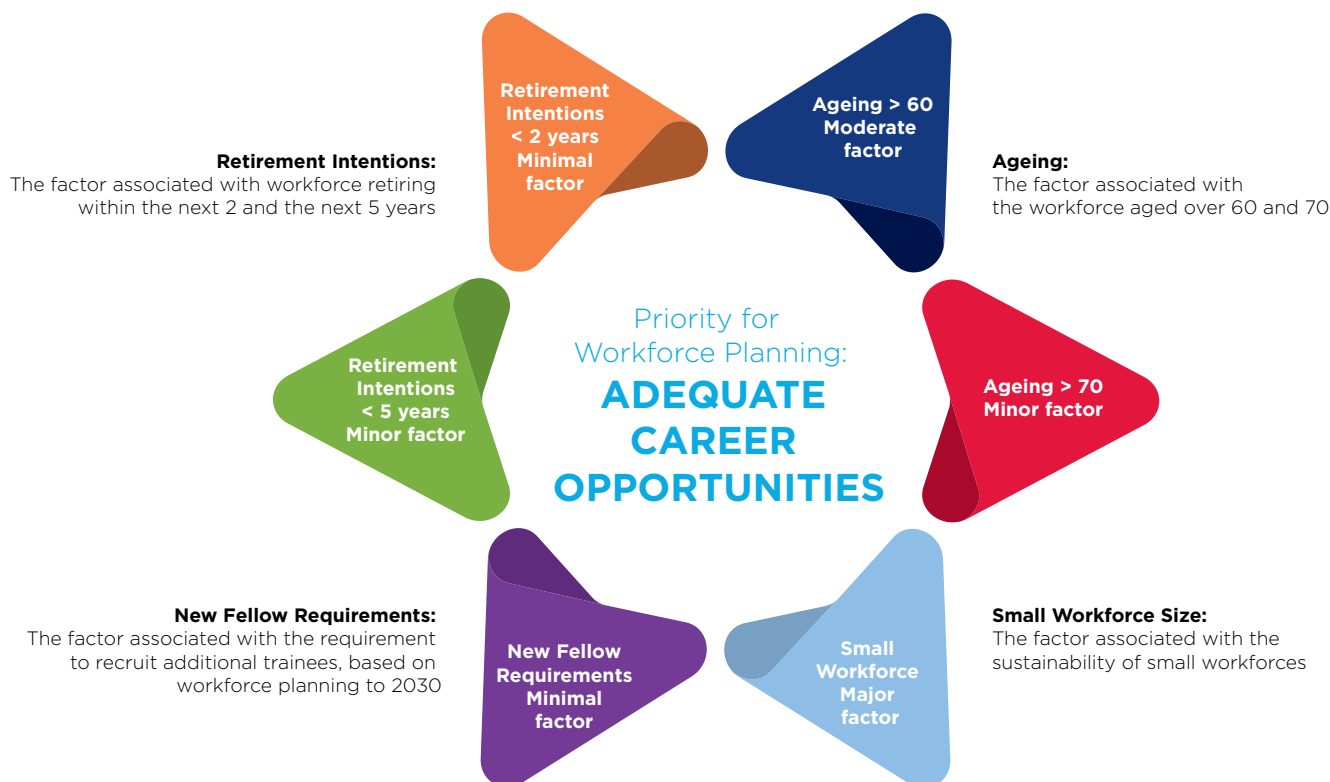


Estimated Workforce Average Age
In 2030, 55.1 years.



Estimated percentage over 60 years
In 2030, 30.6% 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)