

RANZCP Workforce Survey Report

Australian Membership - June 2014

the Australian psychiatric workforce

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Introduction

The RANZCP is committed to leading the achievement of quality psychiatric care and mental health for our community. As part of our strategic objective to influence and provide leadership across the mental health sector, the College supports workforce planning and seeks to provide informed input into workforce development across Australia and New Zealand.

The College developed this Workforce Survey with the aim of improving understanding of the psychiatric workforce. It will complement existing data collected by other agencies.

The Workforce Survey was distributed in October 2013 to all Fellows and Affiliates across Australia and New Zealand (3599 members), based on their membership classification in the College database. Those listed as retired in the database were excluded from the distribution list.

This report provides members with a summary of the survey responses from the Australian membership.

Membership - survey distribution

The College has three membership types:

- **Fellow** Qualified psychiatrists who have successfully completed the RANZCP training program, or otherwise met the requirements for Fellowship of the RANZCP.
- Associate Trainees currently completing the RANZCP training program in psychiatry.
- Affiliate Overseas-trained psychiatrists currently working in the field in Australia or New Zealand.

The survey was distributed to 3599 RANZCP Fellows and Affiliates across Australia and New Zealand. The response rate was 35%, with 1259 out of 3599 members completing the survey. Although this response rate is deemed to be statistically representative of the total population based on calculations outlined in the American Journal of Pharmaceutical Education¹, caution should be used when interpreting these results.

Table 1: Total survey distribution across membership types

Membership type	Total
Affiliate Australia (AFA)	36
Affiliate New Zealand (AFN)	158
Fellow Australia (FA)	3072
Fellow New Zealand (FN)	333
GRAND TOTAL	3599

Of those who responded to the survey, 1028 identified as working in Australia and 226 in New Zealand (see Table 2). Five respondents did not identify their country of work.

¹ Drougalis JR, Plaza CM, (2009) Best practices for survey research reports: a synopsis for authors and reviewers. *American Journal of Pharmaceutical Education* 73: 142.

Table 2: Country of work

Country of Work	Total
Australia	1028
New Zealand	226
(blank)	5
GRAND TOTAL	1259

Before analysis, the data was cleaned to remove any unusable data. Thirty-one responses were removed from this analysis as they did not complete any of the questions beyond question one (personal details).

The final numbers included in the survey analysis (after data cleansing) for Australia and New Zealand are outlined in Table 3.

Table 3: Survey responses by country

Country	Total valid responses
Australia	1006
New Zealand	222

The Australian responses are analysed below.

At a glance - Australian membership

- Sixty-three percent of respondents were male.
- Two thirds of the Fellows and Affiliates who responded are under 60 years old.
- The majority of respondents (86%) practice in a major city.
- Just under one third of respondents (32%) indicated that they would consider retiring within the next five years.
- The majority of respondents reported working on average 30-39 hours clinically per week.
- Just over half (57%) of respondents reported spending less than nine hours per week in non-clinical work.

Results

Profile of respondents

The profile of respondents who identified as working in Australia is summarised in Table 4 – Table 7.

Table 4: Membership type

Membership type	Gender			
	Female	Male	GRAND TOTAL	
Affiliate Australia (AFA)	4	11	15	
Associate Australia (ASA)	3	3	6	
Fellow Australia (FA)	365	615	980	

Fellow New Zealand (FN)	3	2	5
GRAND TOTAL	375	631	1006

Table 5: Age classification and gender

Age classifications		Gende	er
	Female	Male	GRAND TOTAL
30-39	52	60	112
40-49	103	158	261
50-59	117	184	301
60-69	85	146	231
70-79	17	71	88
80+	1	12	13
GRAND TOTAL	375	631	1006

Table 6: Membership type and age classification

Membership type	Age classification						
	30-39	40-49	50-59	60-69	70-79	80-89	GRAND TOTAL
Affiliate Australia (AFA)	3	5	3	4			15
Associate Australia (ASA)	3	2	1				6
Fellow Australia (FA)	106	254	292	227	88	13	980
Fellow New Zealand (FN)			5				5
GRAND TOTAL	112	261	301	231	88	13	1006

Table 7: Distribution of respondents by state

State/Territory	Total
ACT	22
NSW	301
NT	10
QLD	199
SA	87
TAS	18
VIC	277
WA	92
GRAND TOTAL	1006

Location of primary clinical practice

Members were asked to provide the location of their primary clinical practice. This location was mapped to the Australian Standard Geographical Classification - Remoteness Area (ASGC-RA)* codes in order to group the distribution by the rural area classification. The majority of members who responded to the survey (85.8%) practice in a major city, as illustrated in Table 8.

Table 8: Location of primary clinical practice by ASGC - RA code

RA code – primary practice	Total
RA1 - Major Cities of Australia	844
RA2 - Inner Regional Australia	113
RA3 - Outer Regional Australia	37
RA4 - Remote Australia	5
RA5 - Very Remote Australia	4
Other (outside Australia)	1
RA code not available	2
GRAND TOTAL	1006

^{*} The ASGC-RA is a geographic classification system that was developed in 2001 by the Australian Bureau of Statistics (ABS), as a statistical geography structure which allows quantitative comparisons between 'city' and 'country' Australia. "The purpose of the structure is to classify data from census Collection Districts (CDs) into broad geographical categories, called Remoteness Areas (RAs). The RA categories are defined in terms of 'remoteness' - the physical distance of a location from the nearest Urban Centre (access to goods and services) based on population size."

Location of secondary clinical practice

523 respondents identified as having a secondary practice location. Again, the majority of these (80.1%) were located in a major city.

Table 9: Location of secondary clinical practice by ASGC - RA code

RA Code – secondary practice	Total
RA1 - Major Cities of Australia	410
RA2 - Inner Regional Australia	67
RA3 - Outer Regional Australia	26
RA4 - Remote Australia	3
RA5 - Very Remote Australia	5
Other (outside Australia)	1

² Department of Health – Doctor Connect (2014), Australian Standard Geographical Classification - Remoteness Area (ASGC-RA) Available at: http://www.health.gov.au/internet/otd/Publishing.nsf/content/RA-Intro (accessed 22 May 2014).

RA code not available	11
GRAND TOTAL	523

Type of clinical setting

The most popular responses for the type of clinical setting members worked was public hospital (n=462), community mental health service (n=323) and solo private practice (n=303), as illustrated in Table 10.

Table 10: Type of clinical setting and state

Clinical setting				State -	- prim	ary pra	actice		
	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	GRAND TOTAL
Public Hospital	9	148	6	94	46	7	112	40	462
Private Hospital	2	52		41	10	3	65	9	182
Area Health Service		38		13	9	1	30	6	97
Health Service Management (level)		21		10	5	2	12	3	53
Community Mental Health Service	8	90	4	79	28	7	73	34	323
Community Drug and Alcohol Service	1	8		8			5		22
Residential aged care facility		8		5	1		9	1	24
Outpatient service	1	32	2	20	10	3	25	11	104
Residential mental health care service	1	8		2	3		10	1	25
Correctional services		13	1	4	2	1	2	5	28
Defence forces		2		2					4
Private Practice – Solo	5	84	1	56	23	9	109	16	303
Private Practice – Group	3	69		38	17	2	41	19	189
Private Practice – Locum		1		1					2
University or other educational institution	1	33		20	13	2	31	6	106
Government department or agency	1	10		12	2	1	13	4	43
Medical Centre		4		3	3		11	1	22
Consulting rooms	1	39		35	15	2	45	9	146
Rehabilitation		11		1	2	1	8		23
Not-for-profit organisation		7	1	5	1	1	7	3	25
Other	1	26	4	9	11	3	19	11	84

Outreach work

Members were asked to identify whether they conduct any outreach work. It should be noted that the survey did not define 'outreach work'. This definition will be included in future workforce surveys.

Of the respondents, 367 (36.5%) reported that they conduct outreach work. The state breakdown is summarised in Table 11.

Table 11: Outreach work by age classification and membership type

Outreach work	Age classification (years)						
Membership Type	30-39	40-49	50-59	60-69	70-79	80+	GRAND TOTAL
Affiliate Australia (AFA)	1	4	2	1			8
Associate Australia (ASA)			1				1
Fellow Australia (FA)	33	118	104	75	23	2	355
Fellow New Zealand (FN)			3				3
GRAND TOTAL	34	122	110	76	23	2	367

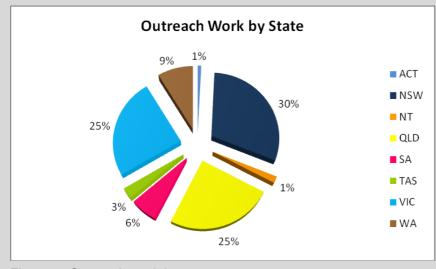


Figure 1: Outreach work by state

Work outside Australia and New Zealand

Seventy-six respondents reported that they conduct some form of work outside Australia and/or New Zealand.

Table 12: Work outside Australia and New Zealand by state and membership type

Work outside Australia & New Zealand	State – primary practice							
Membership Type	ACT	NSW	QLD	SA	TAS	VIC	WA	GRAND TOTAL
Affiliate Australia (AFA)		1					1	2
Fellows Australia (FA)	2	25	16	2	2	21	4	72
Fellow New Zealand (FN)		1	1					2
GRAND TOTAL	2	27	17	2	2	21	5	76

Area of clinical practice

Members were asked to select their primary areas of clinical practice (more than one response could be selected). General adult was the most popular response with just over a quarter of the total responses (26.5%).

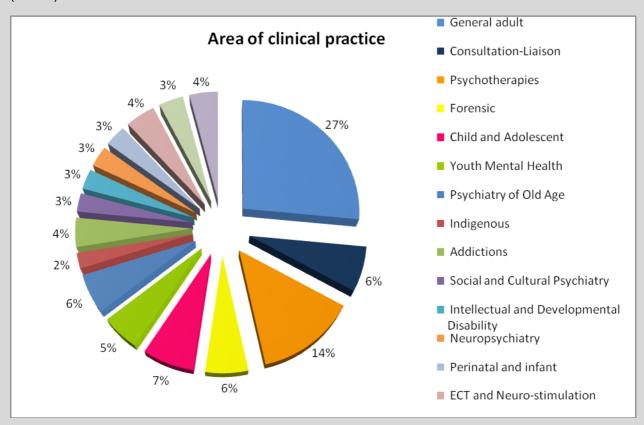


Figure 2: Primary area of clinical practice

Table 13: Primary area of clinical practice by state

Primary area of clinical practice	State – primary practice								
	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	GRAND TOTAL
General adult	19	188	6	139	63	15	178	67	675
Consultation-Liaison	3	51	1	36	17	3	42	12	165
Psychotherapies (including all psychotherapies modalities)	7	87	1	63	29	12	119	27	345
Forensic	2	52	3	42	9	2	26	11	147
Child and Adolescent	3	62	1	33	14	4	46	14	177
Youth Mental Health	4	37	1	22	8	3	43	14	132

Development Old Asse		40	4	00	40	4	07	4.4	4.4.4
Psychiatry of Old Age		49	1	29	13	4	37	11	144
Indigenous	2	15	4	15	4	1	7	9	57
Addictions	2	35		30	5	1	30	4	107
Social and Cultural Psychiatry	3	22		12	8		13	10	68
Intellectual and Developmental Disability	1	24	1	20	5	2	17	4	74
Neuropsychiatry		20		20	8	2	15	11	76
Perinatal and infant	3	23	2	9	8		29	4	78
ECT and Neuro-stimulation		24		28	9	4	39	5	109
Rural	1	34	4	18	5	3	15	9	89
Other	2	29	1	14	10	5	32	10	103

Of those who selected 'Other', common themes amongst responses included:

- Administrative
- · Eating disorders
- Emergency
- Medico legal
- Mental health review board
- Military & veterans.

- Pain medicine
- Refugee and asylum seekers
- Rehabilitation
- Research
- Epidemiology
- Teaching and training.

Patient age group

Members were asked to select the age group of patients they treat, with the option to select more than one response. The most common age groups treated were 18-25yrs, 25-40yrs and 40-65yrs.

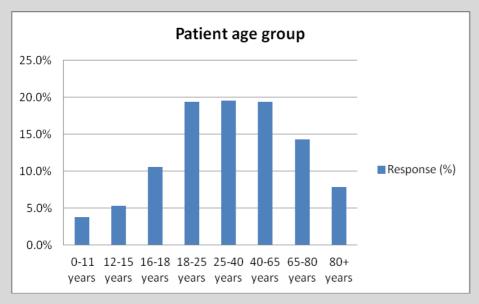


Figure 3: Patient age group treated

Table 14: Patient age group by state

Patient age group	State – primary practice								
	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	GRAND TOTAL
0-11 years	2	52	1	36	15	3	44	8	161
12-15 years	5	84	3	43	15	4	53	19	226
16-18 years	14	161	6	84	33	10	102	42	452
18-25 years	22	241	9	163	73	16	224	78	826
25-40 years	22	237	9	163	75	17	229	81	833
40-65 years	22	240	9	164	71	17	225	80	828
65-80 years	11	198	8	128	54	16	143	52	610
80+ years	5	105	3	76	28	11	83	24	335

Part time work

Members were asked to identify whether they work part time. The survey did not define 'part time' for the membership, however this will be defined for future workforce surveys. Table 15 outlines the responses to this question.

Table 15: Part time work by state

State –primary practice	Part time work								
	Yes	No	(blank)	GRAND TOTAL					
ACT	8	14		22					
NSW	120	175	6	301					
NT	4	5	1	10					
QLD	59	135	5	199					
SA	29	56	2	87					
TAS	6	12		18					
VIC	119	154	4	277					
WA	29	62	1	92					
GRAND TOTAL	374	613	19	1006					

The gender breakdown of part time workers is shown in Figure 4 below. 55.9% of females work part time and 44.1% of males.

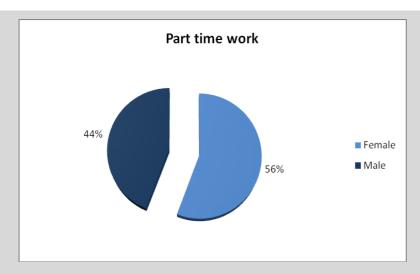


Figure 4: Part time work by gender

Clinical vs non-clinical work

Table 16: Number of hours of clinical vs non-clinical work per week

Hours per week	Clinical	Non-clinical
0-9 hrs	71	569
10-19 hrs	139	262
20-29 hrs	253	80
30-39 hrs	298	43
40-49 hrs	141	20
50+ hrs	85	13
(blank)	19	19
GRAND TOTAL	1006	1006

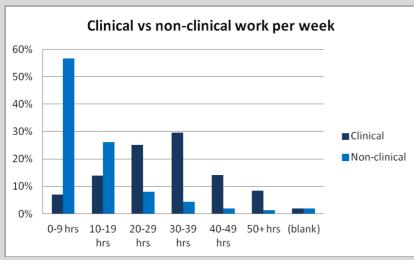


Figure 5: Clinical vs non-clinical number of hours per week

Public, private and academic work

The breakdown of public, private and academic work is outlined in Figure 6.

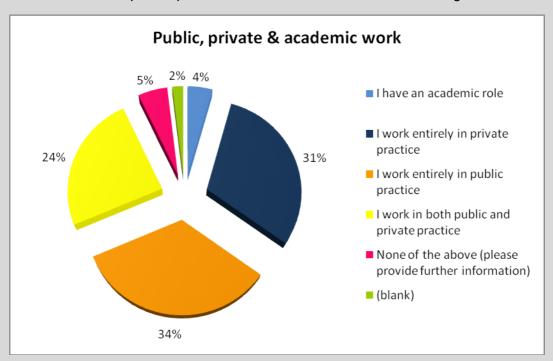


Figure 6: Public, Private and Academic Work.

Of those who selected 'none of the above', respondents were asked to provide further information. The common themes amongst these responses included:

- Education & teaching roles
- Government/national agency
- Medico-legal work
- Private & academic work
- Public & academic work
- Retired or retiring
- Tribunal work, such as the Mental Health Review Board

Private practice hours per week

Members were asked to report on the average time spent working in private practice during a normal working week. Just under a quarter (24.4%) of survey respondents provided an answer to this question. Of those who selected a response, 61.6% reported to working less than 50% of their working week in private practice and 38.4% worked greater than 50% of their week in private practice (see Figure 7).



Figure 7: Average time spent working in private practice during a normal working week

Retirement

Just under one third of respondents (32%) indicated that they would consider retiring within the next five years. See Figure 8 for the breakdown of responses.

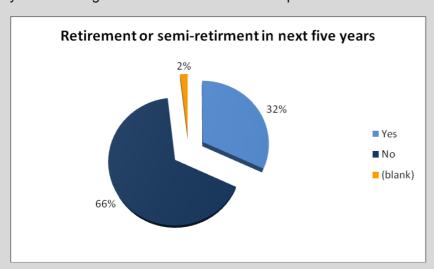


Figure 8: Retirement or semi-retirement in the next five years

The state breakdown of those considering retiring or semi-retiring in the next five years is outlined in Table 17.

Table 17: Retirement or semi-retirement in the next five years

Retiring next 5 years				St	ate – p	rimary	practic	e	
	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	GRAND TOTAL
No	15	201	4	138	59	6	183	60	666
Yes	7	94	5	56	26	12	90	31	321
(blank)	0	6	1	5	2	0	4	1	19
GRAND TOTAL	22	301	10	199	87	18	277	92	1006

Respondent feedback

Members were also invited to add any further comments on this survey. Of the members who provided comments, there were some common themes. These included:

- Difficulties reporting on time/hours spent in clinical vs non-clinical practice.
- The survey design to include further questions on academic and research work.
- The inclusion of work satisfaction as a section of this survey.
- Further detail on classifying retirement and also capturing why one is considering retirement.
- The need for career expansion in public sector psychiatry.
- Considerations for rural psychiatrists and international medical graduates.

Appendix Appendix A: RANZCP Workf	orce Survey		

Introduction

The RANZCP is committed to leading the achievement of quality psychiatric care and mental health for our community.

As part of our strategic objective to provide influence and leadership across the mental health sector, the College supports workforce planning and also seeks to provide informed input into workforce development across Australia and New Zealand.

The College needs your assistance in completing the following brief Workforce Survey, which aims to improve our understanding of the psychiatric workforce and which will complement existing data collected by other agencies.

By completing the survey, you will be assisting the College to advocate more effectively both for your fellow members and for the mental health sector more broadly. You will also be automatically entered into a draw to win a free registration to either the RANZCP 2014 Congress (Perth), or the 2014 New Zealand National Conference.

The Workforce Survey should take approximately five minutes to complete, and includes questions on where you work and the general nature of that work.

All information provided is confidential, and will be stored and used in accordance with the RANZCP's privacy policy.

The survey requires you to enter some personal information so that responses can be matched to your College membership details. However, only collated, de-identified information will be provided to the RANZCP Board or to external regulatory or government agencies.

If you have any questions or difficulties with completing the survey, please contact us via email at membership@ranzcp.org

or call us toll free on: 1800 337 448 (calling from Australia) or 0800 443 827 (calling from New Zealand)

Personal Detail	s
	cted as part of this survey will be stored securely on the RANZCP membership database. To do to match your workforce details to your membership details.
Please enter you	r RANZCP ID number (this can be found on the invitation email to this
survey)	
At this section, p	lease include your first and last names, date of birth and email address.
First Name:	
Last Name:	
Date of Birth (DD/MM/YYYY):	
Email:	

Which country do you work in?		
In which country do you work?		
C Australia		
C New Zealand		

Where do you w	vork?				
We appreciate that many psychiatrists work in multiple physical locations, and that some also undertake outreach work. Please only provide details here of your two main clinical practice location/s.					
Location of Primary Clinical Practice.					
Please provide th	Please provide the location of your primary clinical practice / workplace.				
Suburb/Town: Postcode:					
	hat percentage of your work time is spent at this location?				
▼	nut percentage of your more time to open at time recation.				
Location of Secon	ndary Clinical Practice.				
Please provide th	e location of your secondary clinical practice/workplace. (If you do not				
_	practice please leave blank.)				
Suburb/Town: Postcode:					
r dolladd.					

Where do you work? (continued) Which of the following best describes the type of clinical setting/s in which you work? (Tick all that apply) Public Hospital ☐ Private Hospital ☐ Area Health Service Health Service Management (level) Community Mental Health Service Community Drug and Alcohol Service Residential aged care facility Outpatient service Residential mental health care service Correctional services Defence forces Private Practice – Solo Private Practice - Group Private Practice – Locum University or other educational institution Government department or agency Medical Centre Consulting rooms Rehabilitation Not-for-profit organisation Other (please specify) Do you undertake any outreach work? (including rural or remote, tele-health etc)r Yes Do you ever undertake any form of work (practice, consulting, examining etc) outside of Australia / New Zealand? O Yes O No

What kind of work do you do?			
Plea	Please select the option/s that best applies to you.		
Ple	Please select your primary areas of clinical practice. Tick all that apply.		
	General adult		
	Consultation-Liaison		
	Psychotherapies (including all psychotherapies modalities)		
	Forensic		
	Child and Adolescent		
	Youth Mental Health		
	Psychiatry of Old Age		
	Indigenous		
	Addictions		
	Social and Cultural Psychiatry		
	Intellectual and Developmental Disability		
	Neuropsychiatry		
	Perinatal and infant		
	ECT and Neuro-stimulation		
	Rural		
	Other (please specify)		
	ase select the age group/s of patients you treat. (tick all that apply)		
	0-11 years		
	12-15 years		
	16-18 years		
	18-25 years		
	25-40 years 40-65 years		
	65-80 years		
	80+ years		
	OUT years		
Do	you work part time?		
0	Yes		
0	No		

a normal working week, on average, how many hours do you spinical activities (eg, administrative work)? ease select the ONE option that best applies to you I work entirely in public practice I work entirely in private practice	end working in non
I work entirely in public practice	
I work entirely in private practice	
1 work charlety in private practice	
I work in both public and private practice	
I have an academic role	
None of the above (please provide further information)	

Please estimate how much time, on average, you spend working in private practice during a normal working week.		
0	Less than 50% of the time	
0	More than 50%, but less than 100% of the time	
Are	you considering retirement or semi-retirement in the next 5 years?	
0	Yes	
0	No	

Conclusion
Optional: Should you have any feedback regarding this workforce survey itself, please provide in the comment box below.
Optional: If you would like to receive a synopsis of survey results please enter your email below.

Thank You

On behalf of the College and Board of Directors, I would like to thank you for completing the RANZCP's Workforce Survey. Please ensure you press the *submit* button below to send your responses from the survey.

The data obtained from this survey will assist the College to provide informed input into workforce development across Australia and New Zealand, and to advocate more effectively for the sector.

You will also be automatically entered into a draw to win a free registration to either the RANZCP 2014 Congress (Perth), or the 2014 New Zealand National Conference.

The prize draw will be conducted on Friday, 6 December, and the winner will be notified by e-mail and announced in the December issue of *Psyche*.

If you have any questions or comments, please contact the College on membership@ranzcp.org.

Yours sincerely,

Dr Murray Patton

President

