

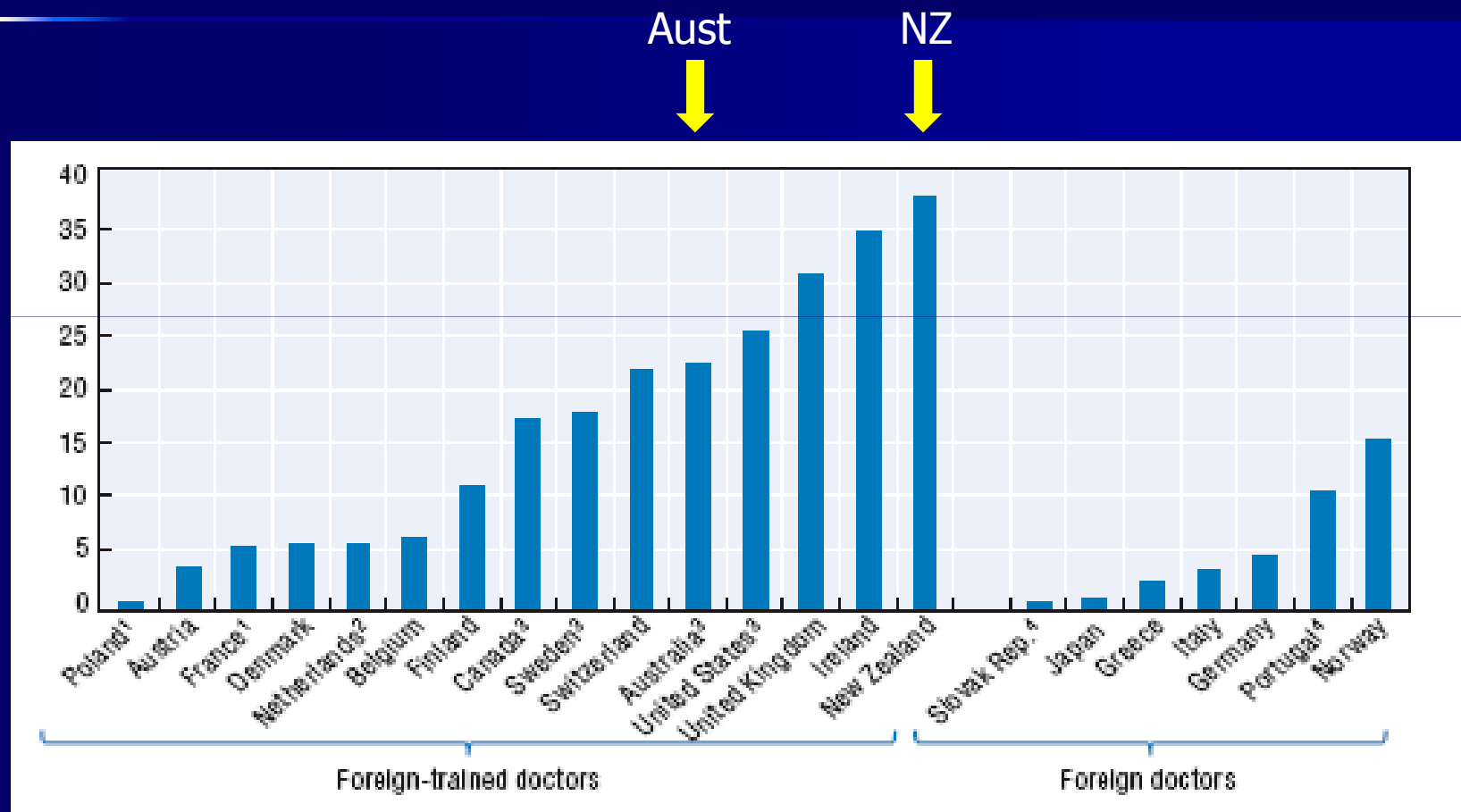
Addressing workforce shortages in NZ and Australia

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HPM, Odense, July 2010

Common problems in both countries

- Overall shortage of medical professionals
 - Doctors per 1000 population:
NZ 2.3; Aust 2.8; OECD 3.1
- High proportion of foreign trained health workers

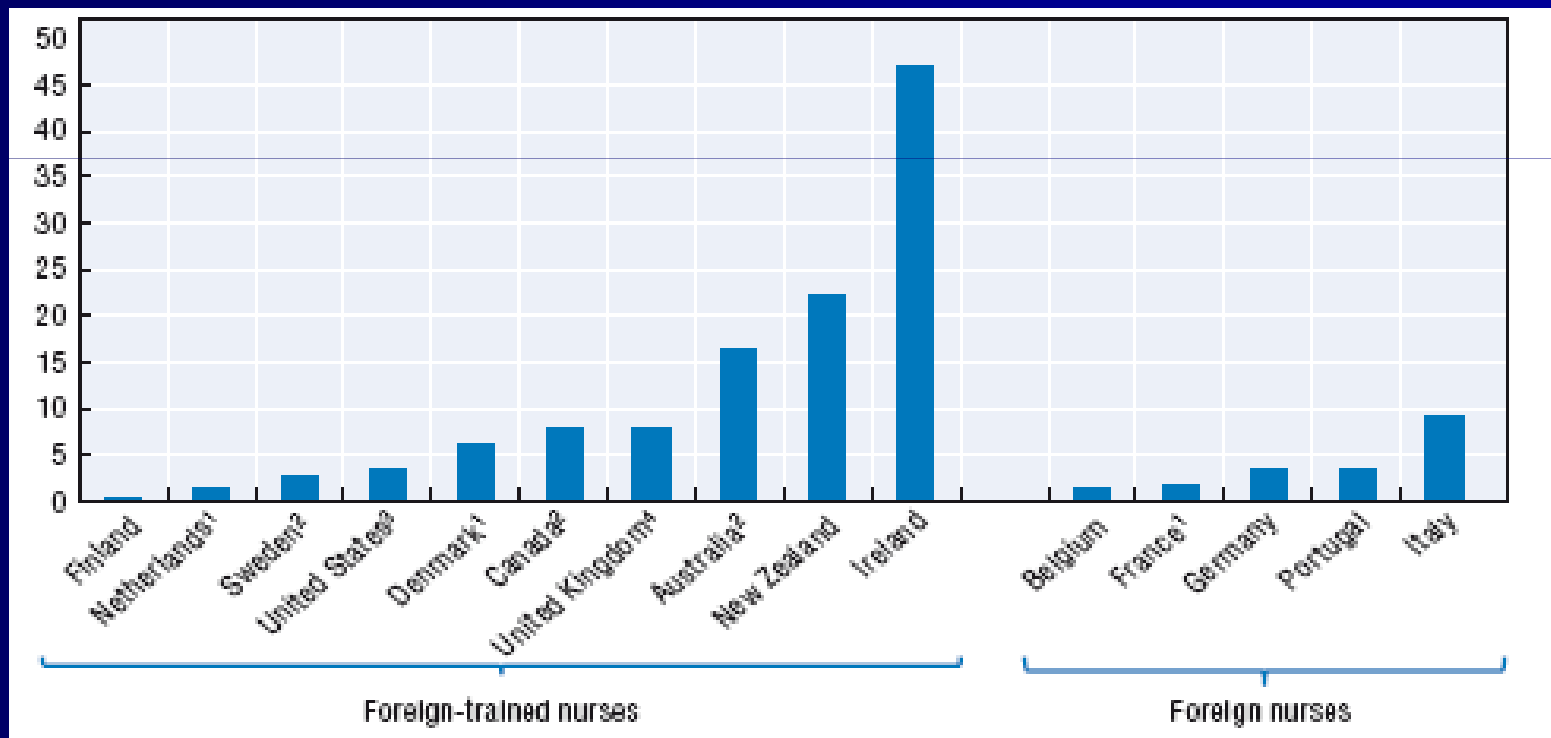
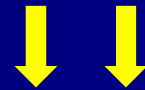
Foreign-trained doctors



Source: OECD (2010) Policy Brief: International Migration of Health Workers

Foreign-trained nurses

Aust NZ



Source: OECD (2010) Policy Brief: International Migration of Health Workers

More common problems..

- High outward migration
 - NZ: 25% of NZ trained doctors no longer registered in NZ after 4 years
- Shortages of
 - Rural doctors, GPs, some specialities, indigenous health workers
- Disparate responsibilities for health education and training
 - Numbers trained driven largely by education sector, rather than health sector

Other issues in NZ

- Ageing of workforce
 - Median age of nurses is 47 years
- High turnover rates
 - 10% vacancies
- Salaries 30 – 35% higher in Australia

Other issues in Australia

- Suspected anti-competitive behaviour by colleges on restricting the number of training places

Common responses

- Increase in medical student places
 - NZ: Increased from 300 to 500
 - Aust: Doubled (to 2500+)
- New training places for GPs
- 'Bonding' schemes for graduates who work in districts of need
 - Write-off of student debt
 - Aust: New medical places for students who agree to work at least 6 yrs in district of need
 - Bonded scholarships for vocational trainees

Other responses in NZ

- Health Workforce New Zealand
 - National workforce planning and development
 - Coordination of education and training
 - Coordinated response to improving training, recruitment and retention
- Strengthen and support clinical leadership
- Encourage new models of care
 - Physician assistants, nurse practitioners, extension of role of pharmacists, etc.
- Improve GP training

Other responses in Australia

- Ease restrictions on access to Medicare benefits for NZ doctors
- Rural Health Workforce Strategy
 - Incentive payments for rural doctors
 - Locum Program
 - Education assistance

Outstanding problems in both countries

- Lack of clinical placements for extra medical students
- How to reduce outward migration?
 - Working conditions
 - Time off for rural doctors
- Resistance to professional boundary changes

Other thoughts

- Is regional planning required?
- Use of price is effective, but working conditions are also important, esp for nurses
- Implications of sending new graduates and overseas trained doctors to practice in rural areas?

Thank you!