

# The New Zealand

# **Medical Workforce in 2001**

Ninety four percent of doctors holding an annual practising certificate responded to the Medical Council's 2001 survey. The major findings were:

**The size of the workforce:** The number of doctors in active employment has decreased since 2000 by 1.4 percent to 8491.

**Demographics:** The proportion of women in the workforce, (32.6 percent) is the same as in 2000. The proportion of overseas-trained doctors has also remained the same as in 2000, at 34.4 percent. The proportion of Maori doctors has increased slightly to 2.6 percent, but along with Pacific Island doctors at 1.1 percent, Maori continue to be markedly under-represented compared with the general population.

**Work type:** Since 1999 there have been decreases in the larger work type groups anaesthetics, diagnostic radiology, general practice and primary care; and increases in paediatrics and psychiatry, and internal medicine.

**Geographical distribution:** In territorial authorities, full time equivalent general practitioners ranged from 43 to 192 per 100,000 people. The average, 85 full time equivalent general practitioners per 100,000 people, is a decrease of 2.4 percent since 2000.

#### Introduction

This report presents a summary of the most relevant results of the 2001 survey by the Medical Council of New Zealand. It follows the report Medical Workforce in 2000, which presented extensive information on changes in the medical workforce and trends in retention. Additional detailed analysis of this survey is provided by the Medical Council to the Ministry of Health and individual information requirements can be discussed with the Analytical Unit of the New Zealand Health Information Service.

## Methods

Workforce data is collected as part of the renewal of annual practising certificates. In 2000 this process was changed from one period in the year to four periods depending on the birth date of the doctor. The four periods of data in this report are November 2000, February 2001, May 2001 and August 2001 and are presented as at 31 March 2001. There are some instances where the transition to the different collection timeframe has meant adjustments were required for consistency of reporting. These instances are noted in the text.

The sampling frame for the workforce survey questionnaire includes doctors with general or probationary registration, a current annual practising certificate (APC) and a New Zealand address at the date of collection.

The questionnaire was posted out a month or more before the end of the period and those not responding were sent two reminder letters. All data is collected within three months of the end of a period and confirmation phone calls made if the information needs clarification.

Data for this report were collected in the categories "Employer", "Role" and "Work Type" at a main work site; and second and third work sites where appropriate. Role options were general practitioner; primary care; house officer; medical officer specialist scale; specialist/consultant; and other. The same categories are used in this report to identify the role and type of work, and do not indicate level of expertise.

This report also includes data drawn from the Council's registration information, to avoid duplicating questions in the APC application (age, sex, registration date, and graduation country and year).

Geographical analysis uses territorial authorities and District Health Board localities based on the employment information for the main work site. DHB populations were determined by amalgamating territorial authority population counts from the 2001 Census of Population and Dwellings<sup>1</sup>. Full time equivalents (FTEs) are calculated proportionately, so that 60 hours per week equals 1.5 FTE.

Multiple responses of ethnicity are reported here as a single category, according to a simplified version of Statistics New Zealand's prioritisation standard. Thus a single ethnic category is selected from multiple responses in the following priority order: New Zealand Maori, Pacific Island, Chinese, Indian, Other Ethnic Group, NZ European/Pakeha.

### Results

# Response

During the time covered by the four survey periods surveys were sent to a total of 9,124 practising doctors and 8,717 completed questionnaires were received, a response rate of 96 percent. The survey response rate in 2001 was 0.4 percent higher than in 2000, however only 97 percent or 8491 of the respondents worked for four or more hours per week in New Zealand or in short term overseas postings. The results in this supplement include only these doctors, who are described as "in active employment".

Table 1: Estimates of annual workforce growth and changes in composition

	1980	1985	1990²	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001
Growth per year: 1 1) measured by survey responses		_		3.6	2.3	2.2	4.5	4.9	1.4	7.7	3.2	1.5	0.0	-1.4
measured by     registration data	-	-	-	-	2.5	2.7	2.0	6.3	5.5	4.1	1.3	2.4	2.6	-2.5
Graduated from:														
New Zealand	3266	4095	4480	4621	4733	4790	4886	5024	5004	5449	5628	5693	5645	5567
Overseas Total workforce	1615	1461	1859	1949	1989	2082	2294	2506	2630	2775	2863	2923	2970	2924
(survey response)	4881	5556	6339	6570	6722	6872	7180	7530	7634	8224	8491	8616	8615	8491
% overseas trained	33.1	26.3	29.3	29.7	29.6	30.3	31.9	33.3	34.5	33.7	33.7	33.9	34.5	34.4
Temporary registrants <sup>3</sup>	-	-	165	-	-	-	-	129	-	328	351	370	421	646
Percent of workforce	-	-	2.5	-	-	-	-	1.7	-	3.8	4.0	4.1	4.7	7.1

Some earlier data are not available.

2 Data are five-yearly up to 1990 then annually until 2001

<sup>3</sup> Temporary registrants are not asked to complete the workforce survey.

Statistics New Zealand: 2001 Census of Population and Dwellings

#### Size of the medical workforce:

The workforce decreased to 8491 active doctors, down 1.4 percent from 2000. This provides one doctor per 450 people, a decrease in doctor availability from 1 per 442 in March 1999, but an increase from 1 doctor per 533 people in 1990 and 1 doctor per 642 people in 1980. General practitioner availability has decreased, from 87 full time equivalents per 100,000 people in 2000 to 85 full time equivalents per 100,000. It is predicted that these reductions in availability of GPs will continue<sup>2</sup>. Recent changes in the roles of the active doctor population are shown in Table 2.

Table 2: Changes in the medical workforce 1990 to 2001

Workforce Role	Active doctors <sup>1</sup> 2001	Percent change 2000 to 2001	Percent change 1990-2001
General practice	3,037	-4	25
House officer	760	-15	12
MOSS	289	4	67
Primary care other than GP	171	-10	4
Registrar	1,242	1	55
Specialist	2,725	3	40
Other	233	13	64
No Answer	34		
Total	8,491	-1	34

#### 1 headcount

# Work type and postgraduate training

The change in work type since 2000 is shown in *Table 3*. Doctors working as house officers are not included in the table. As well as increases in the larger groups (psychiatry, internal medicine and paediatrics) there were increases in rehabilitation medicine and the surgical groups cardiothoracic, neurosurgery and otolaryngology. Decreases occurred in the larger groups diagnostic radiology, anaesthetics, general practice and primary care, and also in surgery: urology, surgery: ophthalmology and surgery: other. Twenty percent of doctors in the role general practitioner gave their work type as primary care (up from 15.5 percent in 2000).

Vocational training is identified by respondents who use a broad self-definition of training towards vocational registration. The percentage of all 'active' doctors, excluding house officer rotation, who indicated they are undertaking training towards inclusion on the vocational register has decreased from 29 percent in 2000 to 23 percent.

In 1999 doctors working in a GP role were 50 percent of those training. This percentage reduced in 2000 to 41 percent and in 2001 it has further reduced to 34 percent of all doctors training. The percentage of vocationally registered doctors working in a GP role is now 61. Work types where more than one third of the doctors described themselves as being in vocational training were paediatrics, emergency medicine, rehabilitation medicine and breast medicine.

Graduates from overseas universities are 31 percent of the total doctors working towards vocational registration.

<sup>&</sup>lt;sup>2</sup> Medical workforce 2000

Table 3: Vocational groups at main work site (house officers excluded)<sup>1</sup>

Work type at main work site <sup>2</sup>	No. of doctors in main work site	Percent of total doctors	No. of doctors in main work site 2000	Percent change 2000 to 2001	Average hours worked (all sites) <sup>3</sup>	No. in vocational training <sup>3</sup>	Trainees as percent of work type <sup>4</sup>	Vocational registration current APC NZ address
Anaesthetics	494	6	512	-4	51	114	23	335
Basic Medical Science	48	1	38	26	48	9	19	18
Breast Medicine	7	0	4	75	38	5	71	3
Dermatology	41	1	47	-13	46	2	5	37
Diagnostic Radiology	252	3	261	-3	48	40	16	203
Emergency Medicine	170	2	169	1	46	89	52	51
General Practice	2,539	33	2,701	-6	43	607	24	1486
Intensive Care	16	0	18	-11	53	2	13	13
Internal Medicine Musculo Skeletal	825	11	870	-5	51	202	24	499
Medicine Obstetrics and	7	0	13	-46	42	2	29	5
Gynaecology	227	3	233	-3	54	40	18	180
Occupational Medicine	55	1	56	-2	43	10	18	37
Ophthalmology	102	1	103	-1	47	16	16	83
Paediatrics	264	3	239	10	51	88	33	145
Pathology	180	2	173	4	45	22	12	142
Primary Care	697	9	695	0	41	157	23	377
Psychiatry Public Health Medicine & Management	495 223	6 3	499 197	-1 13	45 44	128 37	26 17	282 141
Radiation Oncology	37	0	35	6	51	8	22	26
Rehabilitation Medicine	15	0	17	-12	46	5	33	7
Sexual Health Medicine	19	0	20	-5	28	3	16	9
Sports Medicine	12	0	13	-8	47	3	25	8
Surgery: Cardiothoracic	25	0	27	-7	65	3	12	17
Surgery: General	247	3	244	1	57	63	26	138
Surgery: Neurosurgery	18	0	21	-14	54	2	11	13
Surgery: Orthopaedic	217	3	221	-2	57	40	18	147
Surgery: Other	31	0	43	-28	53	1	3	21
Surgery: Otolaryngology	91	1	79	-15	50	13	14	70
Surgery: Paediatric	17	0	15	13	59	0	0	15
Surgery: Plastic	50	1	46	9	56	15	30	32
Surgery: Urology	45	1	40	13	61	7	16	36
Surgery: Vascular	14	0	14	0	64	1	7	12
Not answered	175	2	4	-	46	35	20	83
Other	71	1	54		47	8	11	42
Total	7,726	100	7,721	0	47	1,777	23	4713

includes registrars, MOSSs and others not on the vocational register who identify themselves as training towards vocational registration. 1

<sup>2</sup> based on vocational groups, except for categories 'basic medical science', 'primary care other than GP' and 'other surgical sub-specialties'

totals exclude House Officer Rotation.
the vocational training area may be different from the work type at the main work site 3

#### Hours worked

The mean hours per week worked for all active doctors were 48, for women the mean was 42 and men 50. Mean hours declined with increasing age, from 57 hours per week for ages less than 25, to 39 hours per week for ages 65-90.

Forty percent of women doctors reported working less than 40 hours a week. The work pattern of women doctors differs from men as seen in Figure 1. Doctors under 30 years old work an average of 56 hours per week. The average hours for women decrease to 39 in the 30-44 year range and increase to 41 from 45-60 years. From 30-59 years the average hours worked by men is maintained near 50, dropping from an average of 53 hours at 30, to 49 hours at 59 years. Mean hours decrease for both men and women from 60 years.

The mean on-call time for all doctors was 9.3 hours per week. Not all doctors work on-call but those who do are on-call an average of 27 hours, this is influenced by a few doctors who were on-call for a very high number of hours. The median on-call time was 18 hours. Doctors in the work role specialist recorded 54 percent of the on-call time and GPs 34 percent. A higher percentage of men were on-call (39%), than women (23%). Table 5 shows workforce roles by on-call hours.

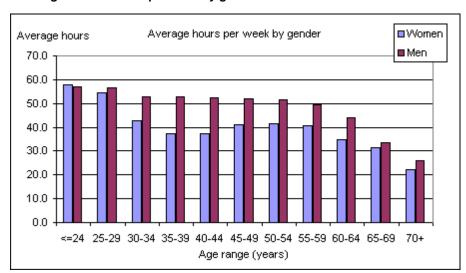


Figure 1: Average hours worked per week by gender

Table 4: Average total hours by age and gender

		Age range										
Gender	<=24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+	All
Women	58.0	54.5	42.8	37.2	37.4	41.0	41.7	40.6	35.0	31.6	22.3	41.7
Men	57.0	56.6	52.9	52.9	52.6	52.0	51.4	49.4	44.1	33.5	25.9	50.4
All	57.5	55.6	48.3	46.6	47.1	48.9	49.4	48.0	43.1	33.3	25.5	47.6

Table 5: Proportion of doctors by on-call hours grouped, in each work role

On-call hours grouped	General practice	Primary care other than GP	House Officer	Registrar	Medical officer special scale	Specialist	Other
No on-call hours	68	86	93	79	77	46	87
1 – 4	5	2	1	2	1	2	2
5 – 9	5	2	2	4	4	5	1
10 – 19	9	4	2	7	6	16	3
20 – 49	8	3	2	7	10	24	3
50 and more hours	5	4	0	1	1	7	4
Total	100	100	100	100	100	100	100

# **Geographical Distribution**

The number of full time equivalent GPs ranged from 65 per 100,000 population for the Counties-Manukau DHB locality to 102 per 100,000 for Auckland (*Table 6*). Territorial authorities with FTEs for general practice below 50 per 100,000 population were Western Bay of Plenty, South Taranaki, Tasman, Grey, Southland and Gore Districts. Territorial authorities with more than 110 GP FTEs per 100,000 were Nelson City and Thames Coromandel, Kapiti Coast, South Wairarapa, Queenstown Lakes and Clutha districts (*Table 7*). The people living in cities of New Zealand have greater access to GPs than the rest of the country, with an average 89 full time equivalent general practitioners per 100,000 population compared to an average 79 in non-city areas.

Of the fifteen city-based territorial authorities, only one had a majority of doctors who qualified overseas (Napier). In contrast 50 percent or more of the doctors in 25 of the 58 non-city district authorities completed their primary medical training overseas.

Table 6: GP workforce by DHB locality of main work site

DHB locality	Number of GPs	FTEs for GPs at all work sites 4	DHB locality population	FTEs for GPs per 100 000 population
Northland	113	129	144,354	89
Waitemata	292	289	431,112	67
Auckland	392	389	380,154	102
Counties-Manukau	239	245	376,332	65
Waikato 1	258	280	328,164	85
Bay of Plenty	130	138	179,439	77
Lakes	78	84	103,329	82
Tairawhiti	31	37	44,115	84
Hawkes Bay	108	115	146,574	78
Taranaki	67	69	102,786	67
Midcentral	95	116	147,684	78
Wanganui	44	49	59,052	83
Wairarapa	33	37	38,577	95
Hutt	94	98	131,790	74
Capital and Coast <sup>2</sup>	248	250	257,025	97
Nelson-Marlborough	98	98	130,923	75
West Coast	17	21	34,446	60
Canterbury	394	389	413,007	94
Otago	156	167	171,312	97
South Canterbury	56	69	79,971	87
Southland <sup>3</sup>	94	95	119,526	80
Total	3037	3163	3,819,672	83

- 1 Includes all TLA Ruapehu
- 2 Includes all TLA Kapiti
- 3 Includes all TLA Queenstown-Lakes
- 4 The calculation of GP FTE includes all hours recorded in GP role at site1, site2 and site3

Table 7: Medical workforce by territorial authority of main work site <sup>1</sup>

			FTEs	Ave	No. of	No. of	O'seas	Territorial
SITE1 TLA	No. of GPs	FTEs GPs <sup>2</sup>	per 100 000	hours GPs	all doctors	doctors per 100 000	doctors % of all	authority pop'n
North Shore City	139	136	73	39	417	225	25	185,262
Waitakere City	101	101	60	40	147	87	37	168,465
Auckland City	392	396	104	40	1,706	449	31	380,154
Manukau City	179	185	65	41	579	204	39	284,001
Hamilton City	95	99	85	42	198	170	47	116,223
Napier City	47	53	97	46	72	131	55	55,137
Palmerston North City	57	69	94	48	236	323	30	73,125
Porirua City	37	37	78	40	73	154	43	47,292
Upper Hutt City	31	32	88	41	34	93	39	36,684
Lower Hutt City	63	67	70	42	187	197	27	95,106
Wellington City	169	170	102	40	687	411	19	167,190
Nelson City	48	50	115	42	118	271	31	43,560
Christchurch City	341	342	105	40	1,037	320	29	324,297
Dunedin City	113	119	101	42	478	405	17	118,038
Invercargill City	48	50	99	42	134	267	42	50,118
Far North District	42	57	98	54	49	84	50	58,065
Whangarei District	59	64	94	44	165	241	36	68,478
Kaipara District	12	13	76	45	13	73	67	17,811
Rodney District	52	60	77	46	62	80	33	77,385
Papakura District	27	31	76	45	35	87	22	40,380
Franklin District	33	36	68	43	37	71	48	51,951
Thames Coromandel	00	00	00	10	0,	, ,	10	01,001
District	29	33	116	45	41	146	52	28,008
Hauraki District	14	17	102	48	14	84	43	16,662
Waikato District	34	40	100	47	332	833	53	39,870
Matamata-Piako District	21	26	89	50	22	75	52	29,403
Waipa District	35	36	89	41	37	91	51	40,509
Otorohanga District	4	6	61	57	4	43	25	9,402
South Waikato District	12	12	52	40	16	69	58	23,268
Waitomo District	6	7	70	45	8	83	50	9,618
Taupo District	22	25	73	46	32	93	36	34,557
Western BOP District	15	19	49	50	113	294	27	38,478
Tauranga District	85	88	95	41	127	138	36	91,836
Rotorua District	56	61	88	43	148	215	21	68,772
Whakatane District	23	25	76	44	52	158	48	32,955
Kawerau District	5	5	79	44	5	72	100	6,951
Opotiki District	*	4	47	86	*	33	50	9,219
Gisborne District	31	38	85	48	72	163	35	44,115
New Plymouth District	48	52	79	44	148	222	40	66,573
Stratford District	7	9	103	53	8	89	43	8,991
South Taranaki District	12	12	46	42	16	59	75	27,222
Ruapehu District	8	11	72	55	14	92	50	15,201
Wairoa District	*	5	50	61	4	44	33	9,129
Hastings District	52	56	82	43	154	224	35	68,757
Cent. HB District	6	7	53	45	6	47	67	12,837
Wanganui District	35	40	91	45	95	217	43	43,683
Rangitikei District	9	12	75	51	9	59	44	15,369
Manawatu District	14	18	66	52	23	84	21	27,393
Tararua District	10	11	61	43	11	63	70	17,586
Horowhenua District	14	21	70	59	21	71	64	29,580
Kapiti Coast District	42	47	111	45	48	113	40	42,543
Masterton District	15	17	75	45 46	39	170	40	22,926
Carterton District	4	4	75 52	36	39	58	50	6,897
South Wairarapa District	14	4 17	192	36 48	14	160	71	8,754
	21	20	46	46 39	23	51	62	
Tasman District	21	20	40	ა9	23	51	ხ∠	44,880

	No. of	FTEs	FTEs per	Ave hours	No. of all	No. of doctors per	O'seas doctors	Territorial authority
SITE1 TLA	GPs	GPs <sup>2</sup>	100 000	GPs	doctors	100 000	% of all	pop'n
Marlborough District	29	31	74	43	54	127	38	42,483
Kaikoura District	*	4	89	52	4	91	67	4,401
Buller District	7	10	96	57	9	86	86	10,440
Grey District	6	6	45	41	18	132	33	13,635
Westland District	4	5	52	54	8	77	50	10,371
Hurunui District	7	10	92	57	10	92	71	10,821
Waimakariri District	17	18	50	43	18	49	12	36,645
Banks Peninsula District	9	9	103	41	9	101	33	8,874
Selwyn District	17	19	70	46	17	61	29	27,969
Ashburton District	17	22	86	51	28	110	47	25,344
Timaru District	32	41	96	51	72	170	28	42,315
Mackenzie District	*	4	69	48	*	58	67	5,184
Waimate District	4	6	78	56	6	84	25	7,128
Waitaki District	17	20	96	47	22	105	41	20,934
Cent. Otago District	11	13	86	47	15	100	45	14,952
Queenstown-Lakes								
District	26	31	123	48	28	111	23	25,152
Clutha District	15	19	111	51	18	104	53	17,388
Southland District	15	15	46	39	16	50	60	31,884
Gore District	5	5	43	42	6	48	40	12,372
Short-term <sup>3</sup>					*			
Total	3,037	3,255	85	43	8,491	222	35	3,818,958

- \* To prevent identification of individuals, categories that contain between 1 and 3 doctors are marked with an asterisk
- 1 Results have not been adjusted for non-response.
- 2 The calculation of FTE GP includes all work hours recorded for doctors whose main work role is GP.
- 3 Short term positions at various locations, includes any doctors working overseas for New Zealand.

#### Work environment

Eighty nine percent of medical hours were worked at the main work site, 9 percent at the next main site, and 1 percent at the third site, with 39 percent of doctors working at multiple work sites.

Sixty-four percent of specialist hours, were worked for public hospitals and 29 percent for the combined private sector (private hospitals, commercial companies, group and sole private practices). There has not been any change in the proportion of time worked for the combined private sector, since 2000, but a slight increase in public hospital percentage from 62 percent in 2000.

Sixty-five percent of all GP hours were worked in group private practices, and 26 percent in sole practices. The employer for five percent of GP hours was not specified.

#### Distribution by gender and ethnicity:

The overall proportion of women remained unchanged from 2000 at 32.6 percent. Because of the increasing numbers of women training as doctors (49% of the 2000 graduates in active employment), the mean age of women in the workforce (39 years) is significantly younger than that of men (45 years).

There is a higher proportion of women in house officer roles (48%) than other roles. The proportion of women in general practice, registrar, primary care, and medical officer special scale roles is in the range 36 to 42 percent. Only 19 percent of specialists are women.

Women are 44 percent of the doctors working towards vocational registration and 53 percent of those working towards registration in general practice.

The vocational areas in which women are training are general practice (40% of all women); internal medicine 10 percent; anaesthetics 7 percent; and psychological medicine or psychiatry 7 percent. The areas in which men are training are 34 percent general practice; 12 percent internal medicine; 9 percent anaesthetics; and 8 percent emergency medicine.

In the workforce roles of general practice and primary care, women work fewer hours than men. Women average 0.8 full time equivalents as GPs and 0.7 full time equivalents in primary care compared with 1.2 and 1.0 FTE respectively for men.

The proportion of doctors who identified as Maori is 2.6 percent, up from 2.3 percent in 2000. Pacific people are 1.1 percent of all doctors, unchanged from 2000. A more comprehensive reporting frame is required, to provide more information about the "Other ethnic group". This is currently the second largest group reported. In 2001 Maori were 6.1 percent and Pacific people 2 percent of all house officers.

Table 8: Vocational training area by gender 1

				Women as % of total training in	Women training in area as % of all women	Men training in area as % of all men
Vocational training area <sup>2</sup>	Women	Men	Total	area	training	training
Anaesthetics	38	85	123	31	7	9
Breast medicine	5	0	5	100	0	0
Dermatology	1	3	4	25	0	0
Diagnostic radiology	17	25	42	40	2	3
Emergency medicine	30	76	106	28	6	8
General practice	374	337	711	53	40	34
Intensive care medicine	1	2	3	33	0	0
Internal medicine	63	116	179	35	10	12
Musculo-skeletal medicine	0	4	4	0	0	0
Obstetrics & gynaecology	29	10	39	74	2	1
Occupational medicine	3	14	17	18	1	1
Ophthalmology	4	13	17	24	1	1
Paediatrics	49	39	88	56	5	4
Pathology	14	11	25	56	1	1
Psychological medicine or psychiatry	62	64	126	49	7	6
Public health medicine	28	6	34	82	2	1
Radiation oncology	4	4	8	50	0	0
Rehabilitation medicine	0	3	3	0	0	0
Sexual health medicine	6	0	6	100	0	0
Sports medicine	2	2	4	50	0	0
Surgery: cardiothoracic	0	3	3	0	0	0
Surgery: general	15	59	74	20	4	6
Surgery: neurosurgery	1	2	3	33	0	0
Surgery: orthopaedic Surgery: otolaryngology head and	3	32	35	9	2	3
neck surgery	1	12	13	8	1	1
Surgery: paediatric	0	1	1	0	0	0
Surgery: plastic & reconstructive	2	13	15	13	1	1
Surgery: urology	1	7	8	13	0	1
Surgery: vascular	1	0	1	100	0	0
Not answered	6	2	8	75	0	0
Other	25	47	72	35	4	5
Grand Total	785	992	1,777	44	100	100

<sup>1</sup> Results have not been adjusted for non-response

<sup>2</sup> Does not include doctors with worktype HOR in main work site.

## **Overseas trained doctors:**

The proportion of doctors who obtained their primary medical qualification in another country has remained at 34 percent, the same as 1999 and 2000. (Table 9). There has been an increase from 29 percent in 1990.

Table 9: Demographics of doctors working in the main occupational groups

	Av age		Percent v	women		Perc	cent over	seas trair	ned
role at main work site	2001	1980	1990	1999	2001	1980	1990	1999	2001
House Officer	29	32	44	47	48	27	21	21	21
Registrar	33	23	29	35	38	42	22	36	35
Medical officer special scale	46	38	32	41	42	52	50	59	54
Primary care other than GP	44	49	42	38	39	42	39	33	31
Other	46	46	25	35	36	43	32	27	24
Specialists and GPs (role)									
Anaesthetics	47	19	16	19	20	41	39	41	46
Basic Medical Science	53	12	16	21	29	31	42	29	35
Breast Medicine	42	-	-	-	75	-	-	-	0
Dermatology	47	3	17	23	24	30	20	23	24
Diagnostic Radiology	47	8	14	25	24	24	27	35	37
Emergency Medicine	43	-	0	29	18	-	50	48	55
General Practice	45	13	24	36	38	35	30	34	35
Intensive Care	50	-	-	-	8	-	-	-	33
Internal Medicine	49	4	7	13	14	24	34	31	31
Musculo Skeletal Medicine	53	-	-	-	0	-	-	-	40
Obstetrics and Gynaecology	49	10	17	29	29	24	28	42	46
Occupational Medicine	51	-	5	18	16	-	41	29	38
Ophthalmology	50	6	11	11	10	18	16	17	21
Paediatrics	47	21	23	26	28	38	39	34	32
Pathology	49	15	22	24	26	21	26	38	38
Primary Care	47	0	-	17	31	0	-	50	35
Psychiatry	49	19	28	31	34	41	50	57	56
Public Health Medicine & Mgmt	48	12	23	24	27	44	36	27	26
Radiation Oncology	47	-	5	16	19	-	55	64	65
Rehabilitation Medicine	50	-	-	0	0	-	-	40	40
Sexual Health Medicine	43	17	-	33	57	33	50	50	43
Sports Medicine	44	-	-	-	14	-	-	-	0
Surgery: Cardiothoracic	46	-	-	8	6	-	-	15	44
Surgery: General	50	-	-	2	3	-	-	29	31
Surgery: Neurosurgery	50	-	-	8	8	-	-	50	46
Surgery: Orthopaedic	48	-	-	3	3	-	-	14	12
Surgery: Other	46	-	-	7	7	-	-	22	24
Surgery: Otolaryngology	49	0	2	5	4	31	24	27	27
Surgery: Paediatric	46	-	-	27	21	-	-	45	43
Surgery: Plastic	50	-	-	3	3	-	-	15	22
Surgery: Urology	49	-	-	2	3	-	-	15	17
Surgery: Vascular	49	-	-	-	0	-	-	-	17
Surgery: 1	-	0	1	-	-	20	23	21	-
Specialists and GPs	47				29				36
All the above groups	43	16	24	32	33	34	29	34	34

<sup>1</sup> all surgical subspecialties except otolaryngology were combined in 1980 and 1990 data

Although the proportion of overseas-trained doctors has not changed, the number of countries in which training was completed has increased from 61 in 1999 to 70 in 2001. Of the 2491 overseas-trained doctors, doctors who graduated in England are 25.7 percent, South Africa 19.5 percent, India 8.6 percent, Scotland 8.4 percent, Australia 7.3 percent, Sri Lanka 6.3 percent, Iraq 3.4 percent, China 1.7 percent, Bangladesh 1.6 percent and Germany 1.5 percent. Sixty other countries with less than 45 doctors from each country make up the remaining16 percent. There is only one doctor from each of 22 countries.

At 31 March 2001 646 short stay overseas-trained doctors held temporary registration, an increase of 53 percent since 2000. Short-term registrations may be compensating for the decline in some work roles.

#### Retention

Table 9 and Figure 2 compare the retention rates at each year after graduation for successive classes of graduates. The retention rate for postgraduate year one was 96 percent (this excludes overseas sponsored students). The 2001 survey shows an increased retention of postgraduate year two, up 5 percent to at 77 percent but a similar retention of postgraduate year threes at 58 percent and a large decrease in postgraduate year fours down 10 to 58 percent.

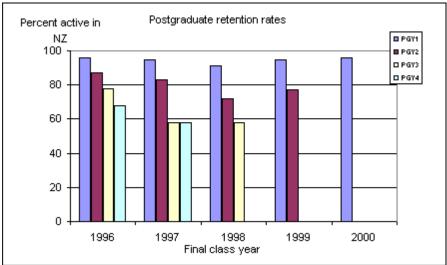
Certificates of Good Standing were provided to 662 doctors, an increase of 47 percent from 450 in 2000. Further increases are likely while better pay and conditions in Australia and high medical student debt continue.

						1
Table 10:	Percent of	recent New	<sup>,</sup> Zealand	graduates	retained in	local workforce

Final class year <sup>2</sup>	By postgraduate year 1	By postgraduate year 2	By postgraduate year 3	By postgraduate year 4
1996	96	87	78	68
1997	95	83	58	58
1998	91	72	58	
1999	95	77		
2000	96			

- 1 Source: Medical Council registration data. Retention measured by APC in 2000/01.
- 2 Final class year is used as Auckland and Otago identify graduate year differently.

Figure 2: Postgraduate retention rates



Workforce analysis 2001

Medical Council of New Zealand

# Discussion

The survey results have not been adjusted for non-response. The sample frame decreased this year from 9358 in 2000 to 9124 but the proportion of survey respondents increased relative to the previous year, (93 to 96%), indicating that collection of survey information in quarters throughout the year may have improved the number of returns.

The data on hours still needs to be treated with caution as some doctors may have included oncall hours into work hours. There are still some returns with hours worked in excess of 100 hours per week.

The workforce by territorial authority of main work site also provides some difficulties. The information is gathered from the APC application and a change of employment noted but no information is collected as to the date of the change.

# Acknowledgements

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The Medical Council particularly thanks all the practitioners who took time to complete the workforce survey.