Fact File

The Royal College of Pathologists of Australasia

New Zealand Pathologist Workforce Study 2018 Haematology

Medicine is Pathology

NEW ZEALAND PATHOLOGIST WORKFORCE – HAEMATOLOGY

Overview

Haematologists were 24.3% of the NZ Pathologist workforce in 2016. This is lower than the Australian Pathologist workforce where Haematologists were 27.1% of the workforce in 2016. There has been high growth in the discipline of Haematology within New Zealand at 5.5% per annum on average between 2011 and 2016. The Haematologist workforce in New Zealand has grown from 55 to 70 headcount in that period (see Table 70).

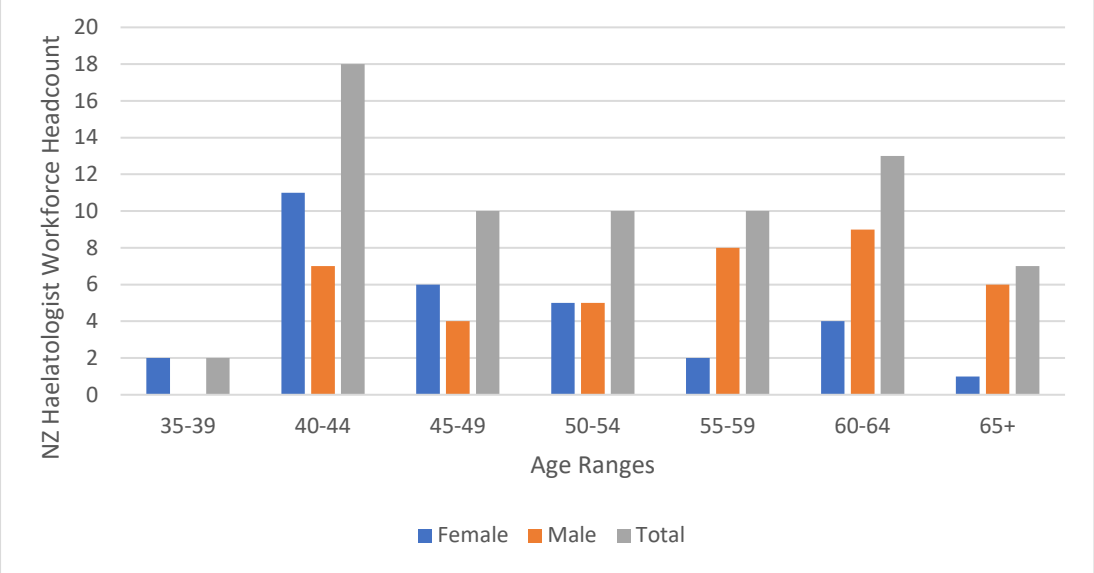
Workforce profile and trends

Table 1: NZ Haematologist Workforce, 2016, Age and Sex Profile

	Headcount			Percentage	Percentage
Age Group	Female	Male	Total	by Age	Female by Age
35-39	2	0	2	2.9%	100.0%
40-44	11	7	18	25.7%	61.1%
45-49	6	4	10	14.3%	60.0%
50-54	5	5	10	14.3%	50.0%
55-59	2	8	10	14.3%	20.0%
60-64	4	9	13	18.6%	30.8%
65+	1	6	7	10.0%	14.3%
Total	**31**	**39**	**70**	**100.0%**	**44.3%**
55 years and older	**7**	**23**	**30**		
% 55 years and older	**22.6%**	**59.0%**	**42.9%**		

Source: RCPA data base, 2016

Figure 1: NZ Haematologist Workforce, 2016, Age and Sex Profile



Source: RCPA data base, 2016

Table 1 and Figure 1 show that the NZ Haematologist workforce is relatively young, with the modal age range for the workforce at 40 to 44 years (25.7% of the total workforce), with a second large group between 60 to 64 years (18.6%). However, there were no NZ Haematologists less than 34 years.

The modal age range for the female workforce is 40 to 44 years, and for the male workforce it is 60 to 64 years. Females are in the majority in each age cohort up to 54 years and males are in the majority for age cohorts 55 years and over.

More than four in ten of the workforce is older than 55 years (42.9%), with 22.6% of females in this age range, and over one half of males (59.0%). This profile has significant implications for the retirement of a large proportion of the workforce in the next ten years. There are 28.6% of the workforce aged 65 years and older, so that 20 New Zealand Haematologists will retire in a much shorter time frame.

Trends in trainee numbers

NZ Haematologist trainees increased from 12 to 21 trainees over the period 2011 to 2016. This was a very high growth of 75.0% over the period.

Workforce demand and supply

Demand drivers

Population change, cancer incidence and prevalence in Haematology, precision medicine, genetic testing and the value-add role as all contributing to high demand growth. Complexity of testing was identified as a medium-level demand driver. Technological innovation was determined to be low to medium demand driver and efficiency improvements contributed to low demand growth.

Cancer incidence is driving growth in services as there is an increasing range of therapeutic options, better survival rates, with closer and ongoing monitoring being required.

Value-adding is an important and growing role for laboratory Haematologists providing advice on a large range of drugs and transfusions. One participant mentioned the concept of “clinical traction” where laboratory Haematologists are being increasing drawn into clinical advisory roles. Complexity is also rising in areas such as bone marrow biopsy reporting.

Genetic testing is now used at diagnosis of most haematological cancers and therefore is becoming more prevalent.

There has been a large increase in options for haematological treatments within clinical trials. However, this is not captured under the MBS items and is also attracting workforce into these roles.

The workforce who have undertaken joint training are predominantly in clinical roles and there is concern regarding adequate supervision roles in laboratories.

Supply Issues

The 2015 NZ workforce profile reported that the increased number of Haematologists and Haematology registrars in the workforce reflects the investment in the infrastructure necessary for the recent expansion of better cancer services in the country.

Results of projection modelling

The lack of available data on trends in services in New Zealand due to the lack of an available data source resulted in the decision to use Australian data on Medicare service trends for modelling demand. Therefore, the same assumptions were applied to the New Zealand modelling for services demand as were applied for the Australian national workforce modelling. The high scenario has 3.8% and the low scenario has 3.4%

Figure 2: Results of Projection Modelling for New Zealand Haematologist Workforce, High Scenario (Workforce Demand)

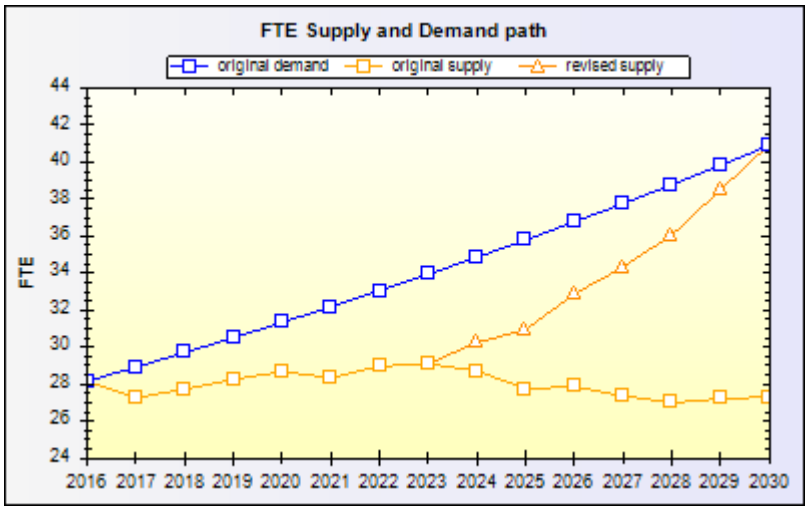


Figure 3: Results of Projection Modelling for New Zealand Haematologist Workforce, Low Scenario (Service Demand)

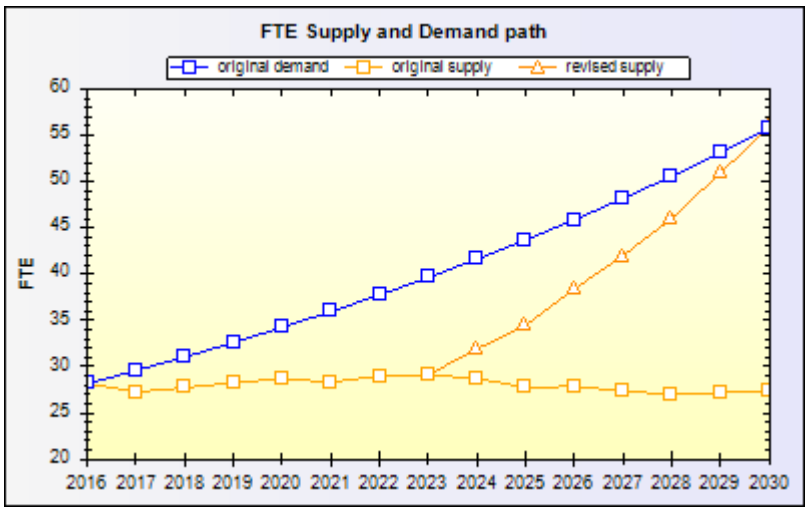


Table 3: Results of Workforce Modelling for New Zealand Haematologist Workforce

	Trainees				
	Base Year	Low Scenario	High Scenario	Gap Low Scenario	Gap High Scenario
	2016	2030	2030	2030	2030
Haematology	2	9	17	7	15
Total three disciplines	**11**	**26**	**34**	**15**	**23**
Total NZ Workforce	**11**	**25**	**29**	**14**	**18**
	New Fellows				
Haematology	2	8	15	6	13
Total three disciplines	**10**	**23**	**31**	**13**	**21**
Total NZ Workforce	**10**	**23**	**26**	**13**	**16**

The largest number of additional trainees needed were for Haematologists under both scenarios (seven for the Low Scenario and fifteen for the High Scenario). The high level of the additional trainees required is due to the demand assumption in the High Scenario reflecting recent high levels of growth in that workforce in response to expansion of cancer services. Therefore, the High Scenario result reflects the need to have trainee supply to meet this growth. If it is the view of the discipline that similar growth in cancer services and/or growth in the clinical role of Haematologists will not continue in the next decade then these projections could be reduced.