

Physiotherapists



Australian Government
Department of Health

2017 Factsheet

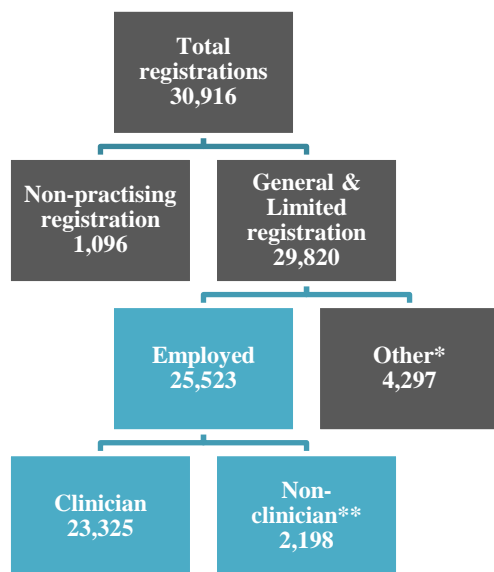
Physiotherapists are registered healthcare practitioners whose focus is on structure and movement of the human body. They work with people of all ages to improve physical mobility and movement related to sports injuries, general musculoskeletal conditions neurological and respiratory conditions. They work across the spectrum from health prevention, acute and rehabilitation.

To gain registration as a physiotherapist, practitioners must complete a minimum four-year undergraduate or two-year postgraduate Master program of study approved by the Physiotherapy Board of Australia.

The following analysis of the physiotherapy workforce is drawn from the number of physiotherapists with general/limited registration who were employed (25,523 in 2017) unless otherwise stated.

Workforce

Figure 1: Physiotherapy registrations, 2017



*'Other' includes: working but on long leave, working outside the profession, looking for work, overseas, and retired.

**'Non-clinician' includes roles reported by survey respondents that did not fit predefined survey categories.

The number of registered physiotherapists increased by 14.5% from 27,011 in 2014 to 30,916 in 2017 (average annual increase of 4.6%).

Table 1: Physiotherapists, 2014-2017

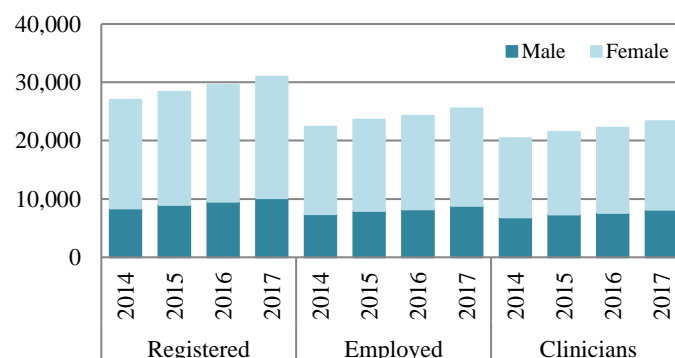
	2014	2015	2016	2017	Avg. annual growth
Registered	27,011	28,354	29,591	30,916	4.6%
Employed	22,372	23,577	24,271	25,523	4.5%
Clinicians	20,383	21,511	22,221	23,325	4.6%

The number of employed physiotherapists ('workforce') increased by 14.1% from 22,372 to 25,523 over the same period (an average annual increase of 4.5%).

Demographics

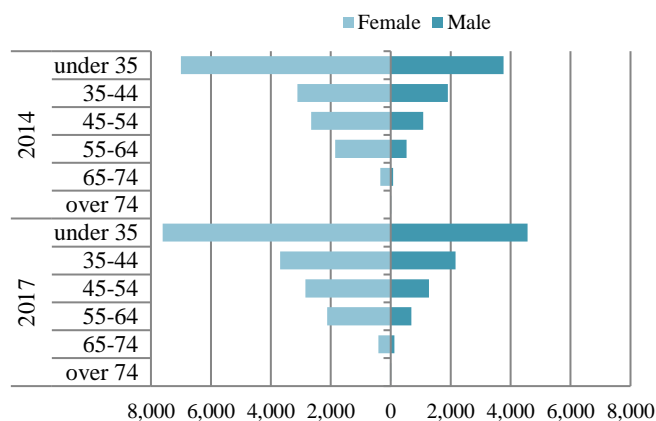
In 2017, female physiotherapists comprised 65.4% of the workforce; a decrease from 67.0% in 2014.

Figure 2: Gender distribution, 2014-2017



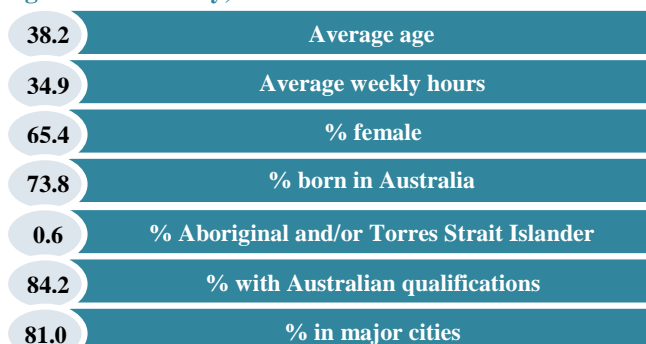
The average age of the workforce was 38.2 years, an increase from 38.0 years in 2014. The proportion of female physiotherapists aged under 35 years decreased from 31.3% of the workforce in 2014 to 29.8% in 2017.

Figure 3: Age and gender distribution, 2014 and 2017



Quick Facts - 2017

Figure 4: Summary, 2017



Replacement Rate

In 2017, there were 2.5 new registrants for every physiotherapist that did not renew their registration from 2016.

Hours Worked

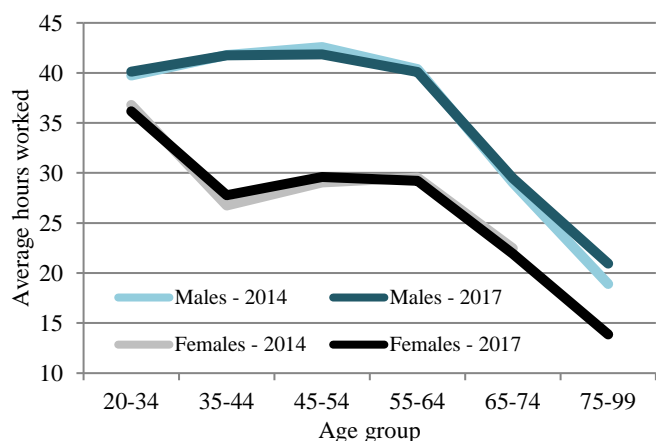
In 2017, physiotherapists worked an average of 34.9 hours per week in total, and worked an average of 5.1 hours per week in non-clinical roles.

Table 2: Average hours per week, 2014-2017

Average hours worked	2014	2015	2016	2017
Clinical	29.5	29.5	29.6	29.8
Non-clinical	5.3	5.2	5.2	5.1
Total	34.9	34.7	34.8	34.9

In 2017, female physiotherapists worked an average of 31.9 hours per week, a decrease from 32.1 hours in 2014. Male physiotherapists worked an average of 40.6 hours per week in both 2014 and 2017. Males aged 45-54 worked the longest hours on average, at 41.9 hours per week.

Figure 5: Average hours per week by gender and age group, 2014 and 2017



Principal Role

In 2017, 91.4% of physiotherapists worked as clinicians – an increase from 91.1% in 2014.

Table 3: Principal role, 2014 and 2017

Principal role	2014		2017	
	Headcount	%	Headcount	%
Clinician	20,383	91.1	23,325	91.4
Administrator	910	4.1	1043	4.1
Teacher or educator	573	2.6	549	2.2
Researcher	373	1.7	385	1.5
Other	133	0.6	221	0.9
Total	22,372	100	25,523	100

Endorsement

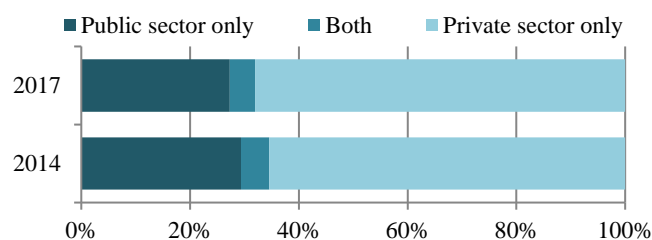
A total of 6 physiotherapists, all in VIC, held an acupuncture endorsement in 2017.

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Principal Work Sector

In 2017, 27.3% of the workforce reported that in their principal role, they worked only in the public sector - a decrease from 29.4% in 2014.

Figure 6: Sector in which clinical hours were worked, 2014 and 2017



Principal Work Setting

In 2017, 27.7% of physiotherapists worked in Group private practice, remaining unchanged from 2014, 20.4% worked in a Hospital setting, a decrease from 20.8% in 2014, and 15.1% worked in Solo private practice, an increase from 14.1% in 2014.

In 2017, physiotherapists working in Sports centres / clinics reported the highest average weekly hours (40.1) and those in Domiciliary services reported the lowest average weekly hours (29.9).

Table 4: Principal work setting, 2014 and 2017

Principal work setting	2014		2017	
	Headcount	Avg. total hours	Headcount	Avg. total hours
Group private practice	6,194	36.7	7,063	36.6
Hospital	4,650	34.6	5,198	34.8
Solo private practice	3,163	35.0	3,851	35.3
Outpatient service	1,801	32.9	2,013	32.7
Residential aged care facility	1,525	33.5	1,749	33.5
Other community health care service	1,098	32.0	1,341	31.9
Rehabilitation/physical development service	794	34.1	843	34.1
Educational facility	665	34.9	689	34.2
Sports centre/clinic	471	39.9	554	40.1
Domiciliary service	444	30.8	475	29.9
Remaining work settings	1,567	33.8	1,747	34.1
Total	22,372	34.9	25,523	34.9

Clinical Stream

The workforce survey asks physiotherapists to specify the 'clinical stream' in which they mainly work in their principal role.

In 2017, over one third (39.1%) of physiotherapists reported Rehabilitation as their clinical stream and 20.1% reported Acute care. Cancer care, Palliative care and Mental health clinical streams were reported by fewer than 1% of physiotherapists.

Between 2014 and 2017, the proportion of physiotherapists reporting Chronic disease management as their clinical stream increased by 31.6%.

Table 5: Clinical stream, 2014 and 2017

Clinical stream	2014		2017		Growth 2014 to 2017
	Head-count	%	Head-count	%	
Rehabilitation	8,513	38.1	9,988	39.1	17.3%
Acute care	4,770	21.3	5,135	20.1	7.7%
Community based care	2,852	12.7	3,600	14.1	26.2%
Other	3,063	13.7	3,185	12.5	4.0%
Aged care	2,315	10.3	2,520	9.9	8.9%
Chronic disease management	651	2.9	857	3.4	31.6%
Cancer care	126	0.6	137	0.5	8.7%
Palliative care	51	0.2	63	0.2	23.5%
Mental health	31	0.1	38	0.1	22.6%
Total	22,372	100	25,523	100	14.1%

Note: 'Not stated/Unknown' responses have been excluded from this table but are included in the total.

Principal Scope of Practice

In 2017, 52.7% of physiotherapists reported their principal scope of practice as musculoskeletal, followed by 14.3% in aged care and 6.8% in Neurology. The proportions of the workforce reporting each scope of practice remain almost unchanged from 2014.

Table 6: Principal scope of practice, 2014 and 2017

Principal scope of practice	2014		2017	
	Headcount	%	Headcount	%
Musculoskeletal	11,781	52.7	13,462	52.7
Aged care	3,228	14.4	3,654	14.3
Neurological	1,525	6.8	1,729	6.8
Other	1,531	6.8	1,673	6.6
Cardiorespiratory	1,430	6.4	1,654	6.5
Paediatrics	1,167	5.2	1,342	5.3
Sports	654	2.9	748	2.9
Women	572	2.6	671	2.6
Total	22,372	100	25,523	100

Advanced Scope of Practice

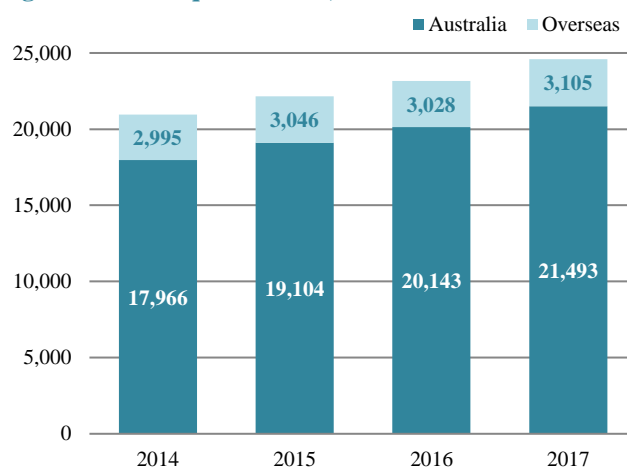
An advanced scope of practice role in physiotherapy includes work that is currently within the scope of practice for physiotherapists, but that, through custom and practice, has been performed by other professions. This advanced role requires additional training, competency, development, and clinical experience.

Between 2014 and 2017, the number of physiotherapists reporting that their principal job included an advanced scope of practice role increased by 1.1% from 2,293 in 2014 to 2,319 in 2017.

Initial Qualification

The workforce survey asks physiotherapists where they obtained their initial qualification. In 2017, 84.2% of the workforce obtained their initial qualification in Australia and 12.2% obtained their initial qualification overseas.

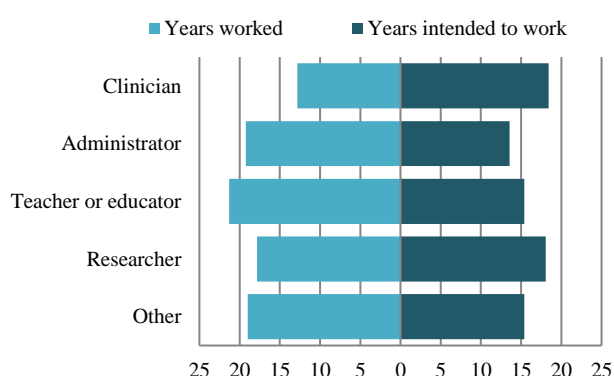
Figure 7: Initial qualification, 2014-2017



Working Intentions

In 2017, physiotherapists had, on average, worked 13 years in the profession and intended to work for another 18 years. In 2014, physiotherapists had worked 14 years on average, and had intended to work for another 18 years.

Figure 8: Workforce intentions by principal role, 2017



Distribution

State and Territory

In 2017, the jurisdictions with the most full-time equivalent physiotherapists per 100,000 population (FTE rate) were the ACT and SA. Between 2014 and 2017, the total FTE rate increased from 87.5 to 95.3 and the ACT had the largest FTE rate increase (21.7).

In 2017, physiotherapists in the NT worked the most hours per week on average (37.5 hours) and those in TAS worked the fewest (32.9 hours).

Table 7: Distribution by state/territory, 2017

State /Territory	Headcount	Total FTE	Avg. total hours	² FTE rate per 100,000 population
NSW	7,722	7,095.5	34.9	90.3
VIC	6,392	5,928.2	35.2	93.8
QLD	5,071	4,735.5	35.5	96.1
SA	2,134	1,926.8	34.3	111.8
WA	3,066	2,732.2	33.9	106.1
TAS	421	364.0	32.9	69.7
ACT	543	498.7	34.9	121.1
NT	164	161.8	37.5	65.4
Total	25,523	23,452.3	34.9	95.3

Note: 'Not stated/Unknown' responses are excluded from the table but are included in the total

Remoteness Area

In 2014 and 2017, 90.4% of physiotherapists worked in either major cities or inner regional locations.

Between 2014 and 2017, the largest shift in average hours worked was in very remote areas, increasing from 39.3 hours per week in 2014 to 42.8 hours in 2017. Consequently, the FTE rate in very remote areas increased by 15.8.

Table 8: Distribution by remoteness area, 2017

Remoteness Area	Headcount	Total FTE	Avg. total hours	² FTE rate per 100,000 population
Major cities	20,666	19,040.9	35.0	107.8
Inner regional	3,333	2,994.1	34.1	68.2
Outer regional	1,265	1,170.5	35.2	57.2
Remote	171	148.8	33.1	50.9
Very remote	80	90.2	42.8	44.9
Total	25,523	23,452.3	34.9	95.3

Note: 'Not stated/Unknown' responses are excluded from the table but are included in the total

Other Work Location Outside Major Cities

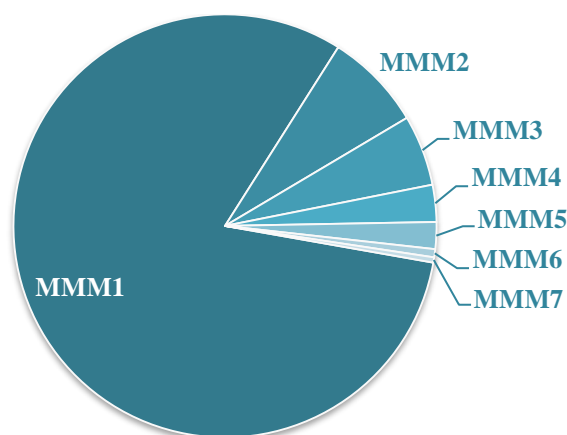
In 2017, 5.0% of the physiotherapy workforce reported that they had worked in a regional, rural or remote location, in addition to their principal job location. Of these respondents, 75.8% had worked in an inner regional or outer regional location, and 9.6% had worked in either remote or very remote locations.

Modified Monash Model

In 2017, the majority (81.2%) of FTE physiotherapists were located in a major city or a location considered as MMM1 under the Modified Monash Model (MMM) classification system, up from 81.0% in 2014.

(See www.doctorconnect.gov.au for more information on the MMM.)

Figure 9: FTE distribution by MMM location, 2017



Tele-Health

The workforce survey asks physiotherapists to report their hours practiced via tele-health in physiotherapy in the previous year.

Note: Tele-health is the use of telecommunication techniques for the purpose of providing telemedicine, medical education, and health education over a distance.

A total of 1,291 physiotherapists (5.1%) provided a response to the Tele-Health question in 2017. On average, these respondents practiced via Tele-Health for 6.9 hours per week, with the majority (75.8%) of Tele-Health services provided by practitioners based in a major city.

Table 9: Tele-Health physiotherapists by remoteness location, 2017

Major cities	Inner regional	Outer regional	Remote	Very remote
75.8%	13.3%	7.7%	1.5%	1.5%

Note: The tele-health workforce remoteness location refers to the location of the physiotherapist, not the location of the person receiving the service.

References

- 1) National Health Workforce Dataset (NHWDS): Allied Health Practitioners 2014-2017.
- 2) ABS - 3218.0 - Regional Population Growth, Australia, 2016-17, Released 31/08/18.

Notes

- 1) 'NP' denotes figures that are not published (supressed) for confidentiality reasons
- 2) The 2013-2016 NHWDS have been revised due to an error in recoding the missing values for job role. As such the figures may not match those that were previously published.
- 3) FTE number measures the number of standard-hour workloads worked by employed health practitioners. The FTE number provides a useful measure of supply because it takes into account both the number of practitioners who are working and the hours that they work. FTE number is calculated based on the total hours worked in a 'standard working week'. The standard working week is assumed to be 38 hours, equivalent to 1 FTE for all practitioners with the exception of medical practitioners where it is assumed to be 40 hours.

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