

Nurse Practitioners

2017 Factsheet



A Nurse Practitioner (NP) is a Registered Nurse (RN) educated to a master's degree level. The NP role includes assessment and management of clients using nursing knowledge and skills and may include, but is not limited to, the direct referral of patients to other health care professionals, prescribing medications and ordering diagnostic investigations. The qualification requirement is a Masters of Nurse Practitioner

The Workforce

Between 2014 and 2017, the total number of Nurse Practitioners with general or provisional registrations has increased by 43.4% from 1,085 to 1,556 (an average annual growth of 12.8%). The number of employed Nurse Practitioners ('workforce') has increased by 41.1% from 1,036 to 1,462 over the same period (an average annual growth of 12.2%).

Table 1: Nurse Practitioners, 2014 - 2017

	2014	2015	2016	2017
Registered	1,085	1,240	1,417	1,556
Employed	1,036	1,175	1,341	1,462

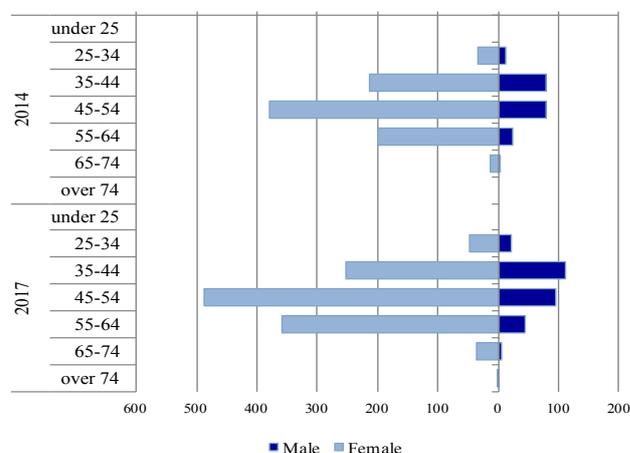
Currently the workforce survey does not collect information on whether a nurse is employed in a job in which a nurse practitioner endorsement is required or utilised. The following analysis of the Nurse Practitioner 'workforce' is based on the number of nurses who held a Nurse Practitioner endorsement and were employed (1,462 in 2017), unless otherwise stated.

Demographics

In 2017, 80.9% of the Nurse Practitioner workforce were female. Since 2014, the number of male Nurse Practitioners has increased by 85 and they now comprise 19.1% of the workforce.

The average age of the workforce has increased from 48.4 years in 2014 to 49.4 years in 2017. The proportion of Nurse Practitioners in the 55 years and over age group has grown from 23.2% in 2014 to 30.5% in 2017.

Figure 1: Age and gender distribution, 2014 and 2017



Quick facts — 2017

Figure 2: Summary, 2017



Hours worked

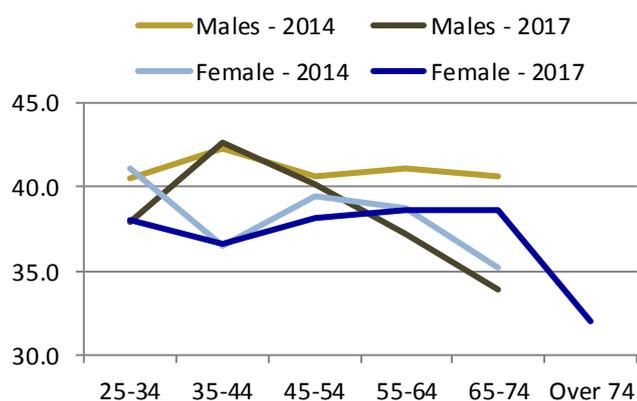
Since 2014, the number of average hours worked per week has decreased by 0.6 hours to 38.4 hours in 2017. The majority of these hours were worked in a clinical role (32.4 hours per week on average).

Table 2: Average total hours per week, 2014 - 2017

Average hours worked	2014	2015	2016	2017
Clinical	32.7	31.9	32.7	32.4
Non-clinical	7.7	7.5	6.9	7.0
Total	40.3	39.3	39.6	39.4

Male Nurse Practitioners worked more hours per week on average than females in 2017 (40.4 hours vs 37.9 hours), however, this was not the case for all age groups. In the youngest age group males and females worked equal hours, while the largest difference appeared in the 35 - 44 year age group, where males worked an average of 6.1 hours more than females. Conversely, females 55 years and over worked more hours than males.

Figure 3: Average total hours per week by gender and age group, 2014 and 2017



Job Role

In 2017, 92.1% of Nurse Practitioners worked as clinicians - a small increase in comparison with 2014 (91.6%).

Table 3: Principal role, 2014 and 2017

Job role	2014	2017
Clinician	949	1,345
Administrator	27	42
Teacher or educator	30	51
Researcher	15	16
Other	15	7
Total	1,036	1,461

Note: Not stated/Unknown has been excluded

Principal work sector

In , 68.6% of Nurse Practitioners worked only in the public sector, 24.4% only in the private sector and 6.0% in both.

Table 4: Sector in which clinical hours were worked, 2014 and 2017

Employment sector	2014	2017
Public sector only	691	964
<i>Proportion (%)</i>	<i>69.6</i>	<i>68.6</i>
Private sector only	241	357
<i>Proportion (%)</i>	<i>23.3</i>	<i>24.4</i>
Both	61	84
<i>Proportion (%)</i>	<i>6.1</i>	<i>6.0</i>
Non response	43	57
Total	1,036	1,462

Principal area of practice

In 2017, ten principal areas of practice also accounted for 81.3% of the Nurse Practitioner workforce. In 2014, the 'top ten' areas of practice accounted for 83.1% of the workforce.

In 2017, Nurse Practitioners whose principal area of practice was Mental Health reported the highest average hours per week (40.8 hours), while those

working in Maternity care reported the lowest average hours per week (13.1 hours).

Table 5: Principal area of practice, 2014 and 2017

Principal area of practice	2014		2017		Change
	Head-count	Average Total Hours	Head-count	Average Total Hours	
Emergency	228	38.6	318	37.4	90
Other	155	39.7	203	38.3	48
Medical	92	38.4	142	40.4	50
Mental health	99	40.9	131	40.8	32
Community nursing	76	40.3	106	39.4	30
Aged care	67	40.9	97	39.2	30
Palliative care	34	41.1	59	38.6	25
Practice nursing	48	38.2	48	38.1	-
Paediatrics	31	38.7	43	37.7	12
Surgical	30	42.2	41	39.2	11
Critical care	28	39.1	37	39.0	9
Education	26	37.6	36	39.9	10
Neonatal care	-	-	35	32.9	35
Mixed medical/surgical	31	43.0	34	39.4	3
Drug and Alcohol	16	42.1	30	40.5	14
Management	17	36.7	26	39.5	9
Peri-operative	21	31.6	23	36.4	2
Child and family health	9	32.9	21	32.5	12
Research	5	38.0	10	34.5	5
Maternity care	12	11.2	8	13.1	-4
Rehabilitation and disability	6	39.2	7	39.9	1
Health promotion	3	32.0	4	26.0	1
Policy	2	42.5	3	36.7	1

Note: Not stated/Unknown has been excluded

Principal work setting

In 2017, 45.6% of Nurse practitioners worked primarily in a Hospital setting. Community health care services were the next most common work setting (14.0%) followed by Outpatient services (11.8%). These were also the three most common principal work settings in 2014.

In 2017, there was a change to the response options in the principal work setting question in the survey ('independent private practice' was added). Consequently, there are small changes between 2014 and 2017 in the number of Nurse Practitioners who reported working in Other private practice.

Table 6: Principal work setting 2014 and 2017

Principal work setting	2014		2017	
	Head-count	Average Total Hours	Head-count	Average Total Hours
Hospital	479	37.8	667	37.8
FTE Clinical hours - public*	364.6		509.1	
FTE Clinical hours - private*	36.5		55.2	
Community health care service	137	40.0	204	39.6
Outpatient service	153	39.6	172	38.8
Residential health care facility	47	40.7	78	38.1
Other	51	45.5	72	39.8
General practitioner (GP) practice	57	36.0	69	36.9
Independent private practice	-	-	61	41.5
Other private practice	42	41.6	38	35.4
Tertiary educational facility	20	39.2	35	40.4
Aboriginal health service	11	38.4	20	34.0
Correctional service	13	39.5	17	39.8
Other government department or agency	12	41.7	13	42.9
Commercial/business service	3	39.0	6	36.8
School	-	-	3	32.0
Defence forces	5	41.0	3	33.7
Other educational facility	3	38.7	2	44.0
Hospice	1	40.0	2	39.0
Locum private practice	2	40.0	-	-

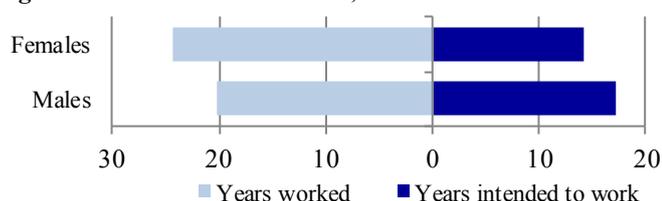
Note: Not stated/Unknown has been excluded

* The hospital setting FTE has been calculated based on clinical hours worked in the private or public sector.

Working Intentions

In 2017, Nurse Practitioners had worked for 24 years on average and intended to stay in the workforce for another 15 years. There were gender differences: males reported having worked fewer years than females (20 years vs 24 years) but intended to stay longer (17 years vs 14 years). These differences are indicative of a younger male workforce (47% of male Nurse Practitioners are aged 44 years or younger relative to 25% of female Nurse Practitioners).

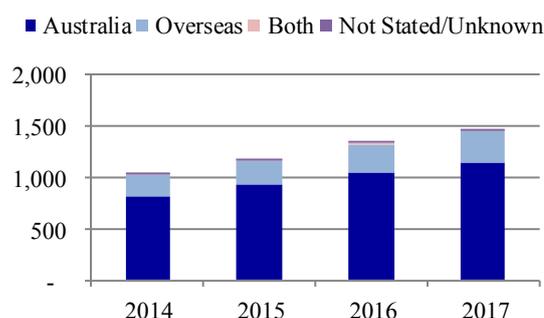
Figure 4: Workforce intentions, 2017



Initial qualification

The workforce survey asks where nurses and midwives obtained their initial qualification. In 2017, 79.0% of Nurse Practitioners obtained their initial qualification(s) in Australia, 20.2% obtained their initial qualification(s) overseas and 0.7% obtained both Australian and overseas qualifications.

Figure 5: Initial qualification, 2014 - 2017



Distribution

State and territory

In 2017, over two thirds (69.4%) of the workforce was located in three states: QLD (26.6%), NSW (23.1%) and VIC (19.7%).

Table 7: Distribution by state/territory, 2017

State & Territory	Headcount	Total FTE	Average total hours	² Rate per 100K population
NSW	338	346	38.9	4.3
VIC	288	290	38.3	4.6
QLD	389	401	39.2	7.9
SA	123	117	36.2	7.1
WA	228	223	37.2	8.9
TAS	32	34	40.4	6.1
ACT	43	44	39.2	10.4
NT	20	20	38.4	8.1
Australia	1,462	1,477	38.4	5.9

Note: Not stated/Unknown has been included in the Australia total.
²ABS - 3218.0 Regional Population Growth, Australia, 2016-2017

In 2017, the highest rate of Nurse Practitioners per 100,000 population were in the ACT and WA while the lowest rate was in NSW. Between 2014 and 2017, the NT had the largest rate increase (2.7), followed by WA (2.2).

From 2014 to 2017, the average hours worked per week decreased across all States and Territories except TAS. In 2017, Nurse Practitioners in TAS worked the highest average hours per week (40.4 hours) and those in SA worked the fewest hours (36.2 hours).

Remoteness area

In 2017, 67.8% of Nurse Practitioners worked in Major cities, 18.3% in Inner regional, 9.4% in Outer regional and 4.5% in Very remote/Remote locations.

The Nurse Practitioner workforce has experienced a slight shift away from regional/remote areas since 2014 when 65.9% of Nurse Practitioners worked in Major cities, 19.1% in Inner regional, 9.5% in Outer regional and 5.5% in Remote/Very remote locations.

In 2017, average hours worked per week generally increased with remoteness, from 38.8 hours in Inner Regional areas to 43.2 hours in Very Remote areas.

Table 8: Distribution by remoteness area, 2017

Remoteness Area	Headcount	Total FTE	Average total hours	² Rate per 100K population
Major cities	991	991	38.0	5.6
Inner regional	267	272	38.8	6.1
Outer regional	138	142	39.0	6.7
Remote	27	28	38.7	9.2
Very remote	39	44	43.2	19.4
Australia	1,462	1,477	38.4	5.9

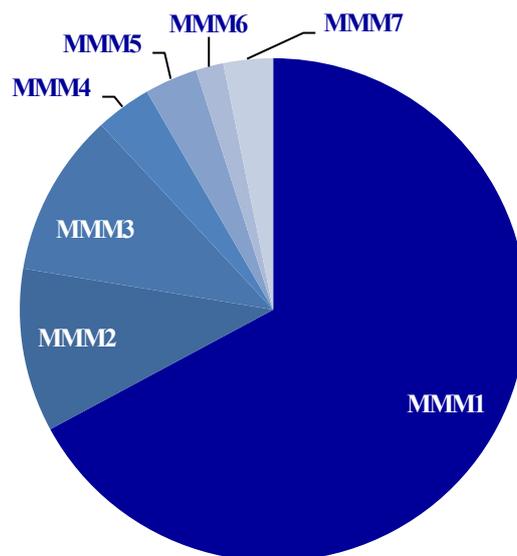
Note: Not stated/Unknown has been included in the Australia total.
²ABS - 3218.0 Regional Population Growth, Australia, 2016-2017

Modified Monash Model

In 2017, the majority of FTE Nurse practitioners (67.1%) were located in a major city or a location considered as MMM1 under the Modified Monash Model (MMM) classification system, an increase from up from 65.9% in 2014.

Note: See www.doctorconnect.gov.au for more information

Figure 6: FTE Distribution by Modified Monash, 2017



Tele-Health

The workforce survey asks nurses and midwives to report hours practiced via tele-health in nursing, midwifery, or both in the previous year. Responses have been combined to provide an average for the workforce

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

In 2017, 15.9% (232) of the workforce responded to the tele-health question. On average, respondents practiced via tele-health 3.7 hours per week.

Remoteness area breakdown for tele-health refers to the location of the Nurse Practitioner, not the location of the person receiving the service.

Table 9: Tele-health workforce remoteness location, 2017

Major cities	Inner regional	Outer regional	Remote	Very remote
51.7%	26.3%	14.7%	2.6%	4.7%

Note: Not stated/Unknown has been excluded

There are 5 factsheets in this series: 1 Nurses and Midwives, 2 Registered Nurses, 3 Midwives, 4 Enrolled Nurses, 5 Nurse Practitioners.

If a practitioner has a job role or worked hours in more than one profession they will be counted in each professions factsheet, but only once in the Nurses and Midwives factsheet. This means, when the profession factsheets are added together, the total will vary from the Nurses and Midwives factsheet.

Commonwealth of Australia 2018

This work is copyright. You may download, display, print and reproduce the whole or part of this work in unaltered form for your own personal use or, if you are part of an organisation, for internal use within your organisation, but only if you or your organisation do not use the reproduction for any commercial purpose and retain this copyright notice and all disclaimer notices as part of that reproduction. Apart from rights to use as permitted by the Copyright Act 1968 or allowed by this copyright notice, all other rights are reserved and you are not allowed to reproduce the whole or any part of this work in any way (electronic or otherwise) without first being given the specific written permission from the Commonwealth to do so. Requests and inquiries concerning reproduction and rights are to be sent to the Communication Branch, Department of Health, GPO Box 9848, Canberra ACT 2601, or via e-mail to copyright@health.gov.au.

Enquiries concerning this report and its reproduction should be directed to:

Department of Health
GPO Box 9848
Canberra ACT 2601

healthworkforcedata@health.gov.au

References

- 1) Registered and employed workforce data, National Health Workforce Dataset — (<http://hwd.health.gov.au>)
Note: These numbers have changed due to an error in the NHWDS for 2013-2016 and won't match the previous years figures in the 2016 factsheets.
- 2) ABS - 3218.0 Regional Population Growth, Australia (<http://www.abs.gov.au/ausstats/abs@.nsf/mf/3218.0>), released at 11:30 AM (CANBERRA TIME) 31/08/2018