

Physiotherapy

2016 Factsheet

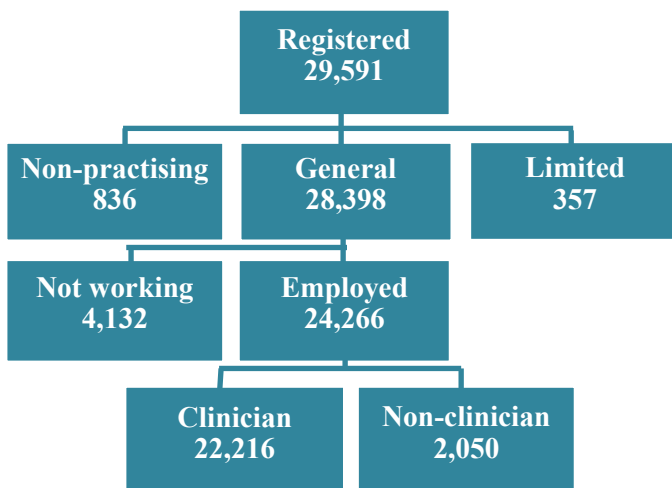


Physiotherapists are registered healthcare practitioners whose focus is on structure and movement of the human body. They work with people of all ages to improve physical mobility and movement related to sports injuries, general musculoskeletal conditions neurological and respiratory conditions. They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

Persons seeking to gain registration must complete a minimum four year undergraduate or two year postgraduate master program of study approved by the Physiotherapy Board of Australia.

Workforce

Figure 1: Breakdown of physiotherapy workforce, 2016



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

The registered physiotherapy workforce has increased by 15.8% (4,046) since 2013, with an average yearly growth rate of 5.0%.

Note: Analysis of the physiotherapy workforce contained in this document is based on the number of registered and employed physiotherapists (24,271 in 2016) unless otherwise stated.

Table 1: Headcount of physiotherapy workforce, 2013-2016

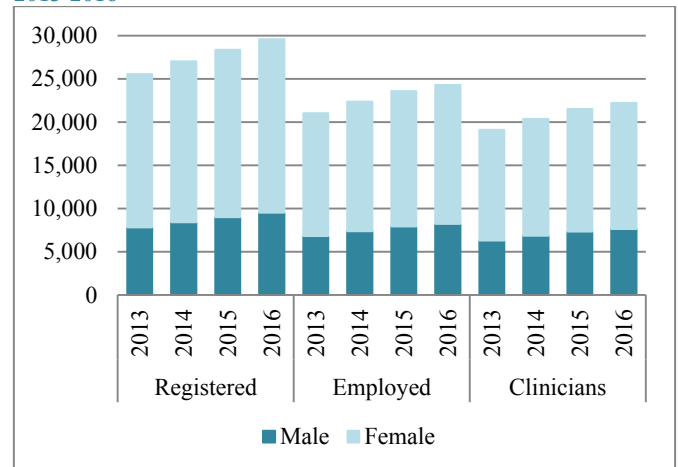
	2013	2014	2015	2016
Registered	25,545	27,011	28,354	29,591
Employed	21,046	22,372	23,577	24,271
Clinicians	19,092	20,383	21,511	22,221

Demographics

In 2016, 66.0% of the registered and employed physiotherapy workforce was female, down from 67.5% in 2013.

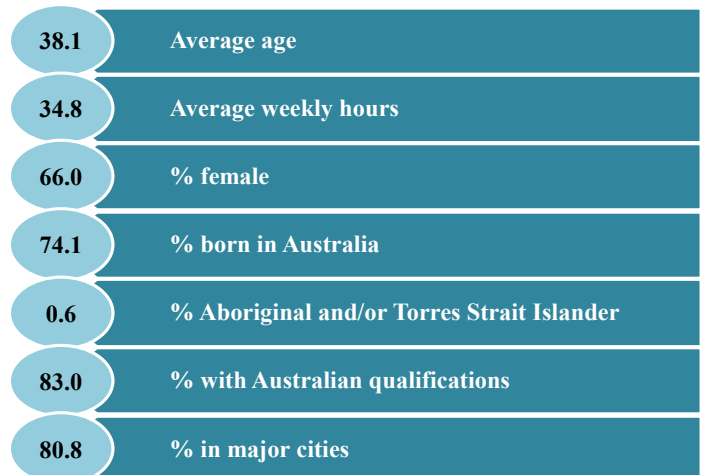
The average age of the workforce was 38.1 years in 2013 and 2016.

Figure 2: Gender distribution for physiotherapy workforce, 2013-2016



Quick Facts - 2016

Figure 3: Summary of the registered and employed, 2016



Hours Worked

Physiotherapists worked an average of 34.8 hours per week in 2016. Average hours per week have remained stable over the 2013 to 2016 period with only a minor increase in clinical hours from 29.5 to 29.6, and a decrease in non-clinical hours, 5.3 to 5.2.

Table 2: Average hours per week worked, 2013-2016

Average hours worked	2013	2014	2015	2016
Clinical	29.5	29.5	29.5	29.6
Non-clinical	5.3	5.3	5.2	5.2
Total	34.8	34.9	34.7	34.8

In 2016, female physiotherapists worked an average of 31.8 hours per week, up slightly from 31.7 in 2013. Male physiotherapists worked an average of 40.6 hours per week in 2016, down from 41.2 per week in 2013.

In 2016, males aged 45-54 worked the longest, on average, at 42.4 hours per week.

Table 3: Average hours worked per week by gender and age group, 2013 vs 2016

Age Group	Males - average hours		Females - average hours	
	2013	2016	2013	2016
20-34	40.5	39.9	36.4	36.0
35-44	42.4	41.8	26.2	27.7
45-54	43.0	42.4	28.8	29.4
55-64	40.5	39.5	29.5	29.1
65-74	29.8	30.4	23.1	20.9
75-99	21.4	18.9	21.8	15.1
Total	41.2	40.6	31.7	31.8

Replacement Rate

In 2016, there were 2.4 new registrants for every physiotherapist that did not renew their registration from 2015. The replacement rate decreased from 2.6 in 2015.

Job Role

The 2016 workforce survey asked respondents to report their principal role (the main job in which they worked the most hours in the last week).

Principal Role

In 2016, a total of 22,221 (91.6%) physiotherapists worked primarily in a clinician role, up from 19,092 (90.7%) in 2013.

Table 4: Headcounts for principal role, 2013 vs 2016

Principal role	Total Employed	
	2013	2016
Clinician	19,092	22,221
Administrator	875	954
Teacher or educator	522	538
Researcher	366	392
Other	191	166
Total	21,046	24,271

Endorsement

A total of 7 physiotherapists held an acupuncture endorsement in 2016, down from 8 in 2013.

Principal Work Sector (public/private)

The 2016 workforce survey asks respondents to report the clinical hours worked in their principal role (the main job in which they worked the most hours in the last week) in either the public or private sector.

In 2016, 26.4% (6,399) of physiotherapists worked clinical hours in the public sector, down from 28.6% (6,018) in 2013. 64.0% (15,524) worked clinical hours in the private sector, up from 61.1% (12,854) in 2013.

Table 5: Headcounts of sector in which clinical hours were worked, 2013 vs 2016

Employment sector	Headcount	
	2013	2016
Public sector only	6,018	6,399
<i>Proportion (%)</i>	28.6%	26.4%
Private sector only	12,854	15,524
<i>Proportion (%)</i>	61.1%	64.0%
Both	1,090	1,152
<i>Proportion (%)</i>	5.2%	4.7%
Total	21,046	24,271

Note: 'Not applicable' responses have been excluded from this table but included to the total.

Principal Work Setting

In 2016, 28.1% (6,811) of physiotherapists worked in group private practice, up from 27.2% (5,727) in 2013. The next most common work setting was in hospitals at 20.7% (5,018), down from 21.0% (4,417) in 2013.

Table 6: Headcounts and average hours worked by principal work settings, 2013 vs 2016

Principal work setting	2013		2016	
	Headcount	Avg. total hours	Headcount	Avg. total hours
Group private practice	5,727	36.9	6,811	36.4
Hospital	4,417	34.7	5,018	34.6
Solo private practice	2,930	35.4	3,556	35.3
Outpatient service	1,733	32.6	1,876	33.0
Residential aged care facility	1,303	31.2	1,588	32.6
Other community health care service	1,010	31.8	1,231	32.2
Rehabilitation/physical development service	821	33.3	837	33.9
Educational facility	584	35.4	697	34.7
Sports centre/clinic	461	40.5	501	40.9
Domiciliary service	454	31.1	481	30.1
<i>Remaining work settings</i>	1,606	np	1,675	np
Total	21,046	34.8	24,271	34.8

Note: 'np' indicates that the average total hours are not available for this combined category.

Principal Job Area (clinical stream)

In 2016, 39.5% (9,575) of physiotherapists reported rehabilitation as their principal job area (clinical stream) in their principal job, up from 37.1% (7,799) in 2013. The second most common clinical stream was acute care with 20.4% (4,963), down from 22.3% (4,692) in 2013.

Table 7: Principal job area (clinical stream), 2013-2016

Job Area	2013	2014	2015	2016
Rehabilitation	7,799	8,513	8,994	9,575
Acute care	4,692	4,770	4,829	4,963
Community based care	2,653	2,852	2,961	3,181
Other	3,022	3,063	3,237	3,099
Aged care	2,076	2,315	2,565	2,410
Chronic disease management	607	651	756	820
Cancer care	108	126	125	124
Palliative care	49	51	72	64
Mental health	38	31	38	35
Total	21,046	22,372	23,577	24,271

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

Principal Scope of Practice

In 2016, 52.8% (12,818) of physiotherapists reported their principal scope of practice as musculoskeletal, followed by 14.3% (3,468) noting their principal scope of practice as aged care.

In 2013, the reported principal scope of practice was similar with 52.3% (11,004) reporting musculoskeletal, and 14.2% (2,989) aged care.

Table 8: Principal scope of practice, 2013 vs 2016

Principal Scope Of Practice	Headcount	
	2013	2016
Musculoskeletal	11,004	12,818
Aged care	2,989	3,468
Other	1,459	1,749
Neurological	1,463	1,657
Cardiorespiratory	1,367	1,568
Paediatrics	1,163	1,229
Sports	648	701
Women	525	633
Not stated	394	420
Non Respondent/Unknown	34	28
All	21,046	24,271

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.

In 2016, 2,255 (9.3%) of physiotherapists reported an advanced scope of practice role in their principal job.

Initial Qualification

The workforce survey asked health professionals where they obtained their initial qualification.

83.0% (20,143) responded that they obtained their initial qualification(s) in Australia. 12.5% (3,028) responded that they had obtained their initial qualification(s) overseas.

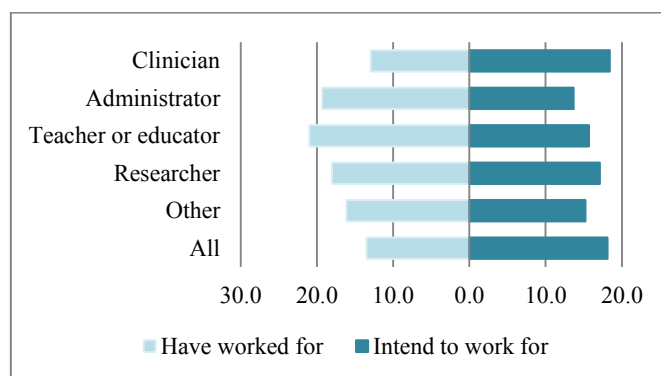
Figure 4: Country where the initial qualification was obtained – Australia or Overseas, 2016



Working Intentions

In 2016, physiotherapists had worked an average of 13.5 years in the profession and intended to work another 18.1 years. In 2013, physiotherapists reported that they had worked for 13.4 years and intended to work for another 17.2 years.

Figure 5: Years worked, and years intended to work by principal job role, 2016



Distribution

State and Territory

Nationally there was an increase in the rate of physiotherapists per 100,000 population, from 90.9 in 2013 to 100.3 per 100,000 population in 2016.

In 2016, New South Wales was listed as the principal place of practice for 30.2% (7,319) of the workforce, followed by Victoria at 25.2% (6,107).

FTE (1.0 FTE is equivalent to one full-time worker) was lower than headcount at the national level, particularly in New South Wales and Victoria.

Table 9: Distribution by state/territory, 2016

2016 State & Territory	Headcount	Total FTE	Avg. total hours	² Rate per 100,000 population
NSW	7,319	6,687.5	34.7	94.6
VIC	6,107	5,662.7	35.2	98.8
QLD	4,802	4,494.0	35.6	99.0
SA	2,046	1,814.6	33.7	119.4
WA	2,929	2,593.6	33.7	114.5
TAS	410	356.5	33.0	79.2
ACT	493	452.0	34.8	122.2
NT	158	155.6	37.4	64.3
Total	24,271	22,223.7	34.8	100.3

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

²ABS - 3218.0 - Regional Population Growth, Australia, 2015-16

Remoteness Area

In 2016, 93.9% of the workforce (22,810) worked in either major cities or inner regional locations.

The average total hours worked generally increased with remoteness, from 34.8 hours per week in major cities to 39.4 hours in remote and very remote areas.

Table 10: Distribution by remoteness area, 2016

2016 Remoteness Area	Headcount	Total FTE	Avg. total hours	³ Rate per 100,000 population
Major cities	19,621	17,987.2	34.8	113.9
Inner regional	3,189	2,877.6	34.3	72.7
Outer regional	1,222	1,131.5	35.2	58.5
Remote	154	139.4	34.4	50.0
Very remote	79	81.9	39.4	40.8
Total	24,271	22,223.7	34.8	100.3

Note: 'Not stated/Unknown' responses are excluded from the table but are included in the total ³ABS - 3222.0 - Population Projections, Australia, 2016

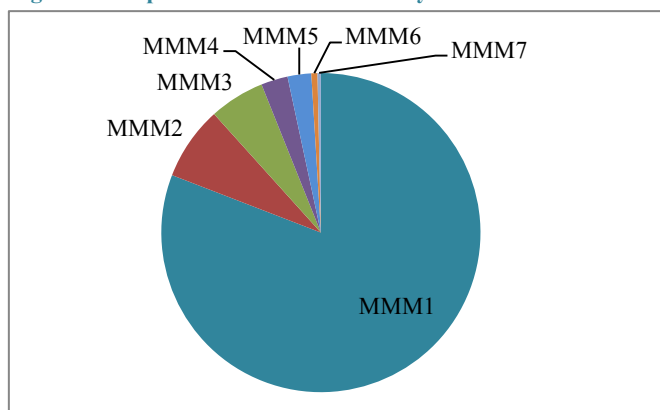
Other Work Location Outside of Major Cities

In 2016, 5.0% (1,210) of the workforce reported that they had, in addition to their principal and second job location, worked in a regional, rural or remote location: 46.4% (562) had worked in an inner regional location, 26.5% (321) had worked in an outer regional location, 5.5% (67) had worked in remote, and 6.0% (72) had worked in very remote locations.

Modified Monash Model

In 2016, the majority (80.8%) of the workforce were located in a major city or a location considered MMM1 under the Modified Monash Model (MMM) classification system, down slightly from 80.9% in 2013 (see www.doctorconnect.gov.au for more information on the MMM).

Figure 6: Proportion of the workforce by MMM location - 2016



Tele-Health

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 6.4% (1,545) of physiotherapists provided a response to the tele-health question. On average the respondents practiced via tele-health for 10.6 hours per week.

Table 11: Tele-health workforce remoteness location – 2016

Major cities	Inner regional	Outer regional	Remote	Very remote
73.6%	14.8%	8.3%	2.1%	1.2%

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 2013-2016.
- 2) ABS - 3218.0 - Regional Population Growth, Australia, 2015-16, Released 30/06/17.
- 3) ABS - 3222.0 - Population Projections, Australia, 2016.

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