

The 20 DHBs' Psychologist Workforce

Workforce Services - October 2018



Workforce Metrics



20 DHBs' Employed Psychologists Workforce - Metrics at a Glance - National



	Head Count	Contracted FTE	FTE per 100,000 Population	Mean FTE	Sick Leave (Average hours per FTE)	Annual Leave Balance to Entitlement Ratio	Mean Length of Service (Years)	% Voluntary Annual Turnover	% Female	Mean Age (Years)	% Over 55	% Māori	% Asian	% Pacific Peoples	% Other Ethnicity	% Unknown Ethnicity
2018 31 June	736	573.7	11.8	0.78	61.1	65.5%	6.3	15.7%	81.0%	44.5	22.8%	5.3%	6.1%	1.1%	83.0%	4.5%
% Change from 2016	▼ - 0.1%	▼ - 0.7%	▼ - 4.1%	0%	▲ 6.3%	▲ 2.6%	▼ - 1.6%	▲ 18.9%	▲ 3.3%	▼ - 0.1%	0.1%	▲ 39.5%	▲ 29.8%	▼ 0%	▲ 0.1%	▼ - 40.0%
2016 31 June	737	577.9	12.3	0.78	57.5	63.8%	6.4	13.2%	78.4%	44.5	22.8%	3.8%	4.7%	1.1%	82.9%	7.5%

DHB workforce information sourced from the Health Workforce Information Programme (HWIP). The HWIP information is for all permanent and fixed term employees and excludes casuals, locums and any long term leave, including parental leave.

DHB Employed Psychologists Workforce - Metrics at a Glance - Region



	Head Count	Contracted FTE	FTE per 100,000 Population	Mean FTE	Sick Leave (Average hours per FTE)	Annual Leave Balance to Entitlement Ratio	Mean Length of Service (Years)	% Voluntary Annual Turnover	% Female	Mean Age (Years)	% Over 55	% Māori	% Asian	% Pacific Peoples	% Other Ethnicity	% Unknown Ethnicity
Northern	288	222.2	11.7	0.77	60.3	62.2%	6.4	15.7%	84.7%	44.2	22.6%	4.5%	10.8%	1.7%	79.5%	3.5%
Midland	115	94.3	10.1	0.82	67.0	70.8%	6.6	16.2%	72.2%	48.7	32.2%	9.6%	3.5%	0.0%	84.3%	2.6%
Central	153	114.7	12.5	0.75	45.1	58.1%	5.1	17.2%	79.7%	43.5	18.3%	6.5%	2.6%	1.3%	85.6%	3.9%
Southern	180	142.6	12.6	0.79	72.4	73.5%	7.0	14.1%	81.7%	43.3	21.1%	2.8%	3.3%	0.6%	85.6%	7.8%

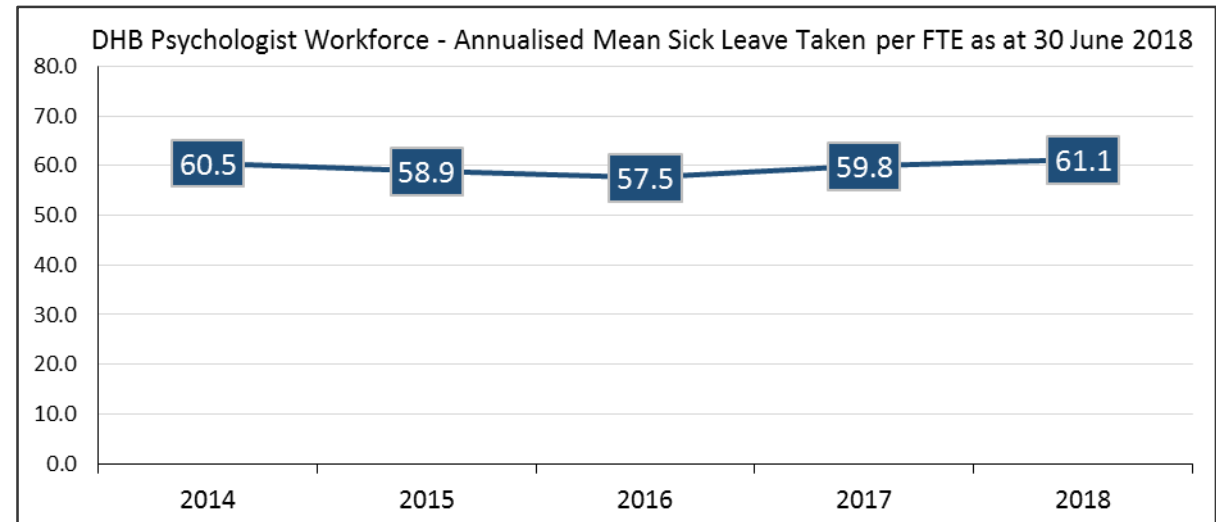
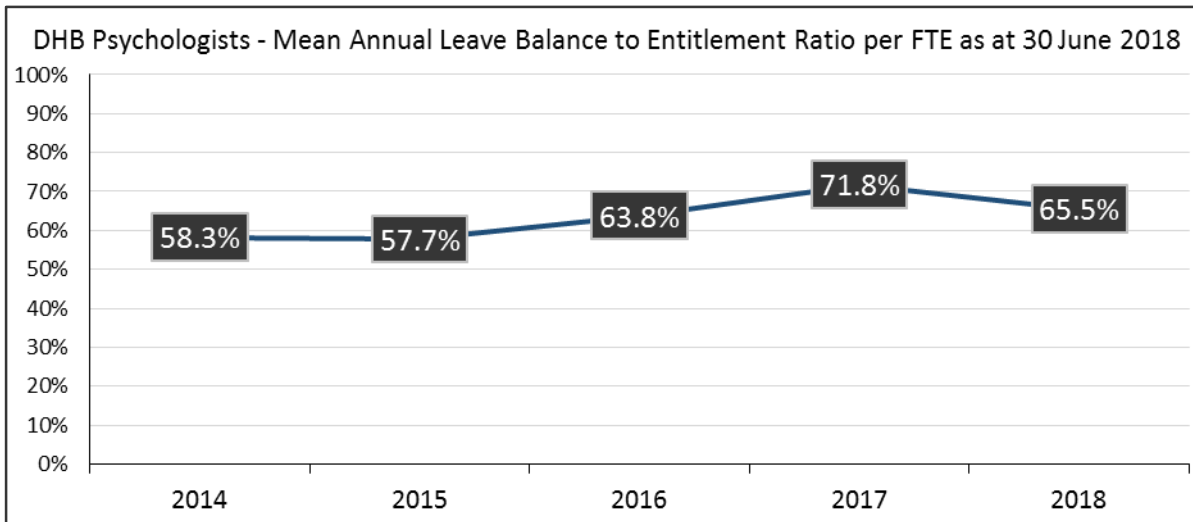
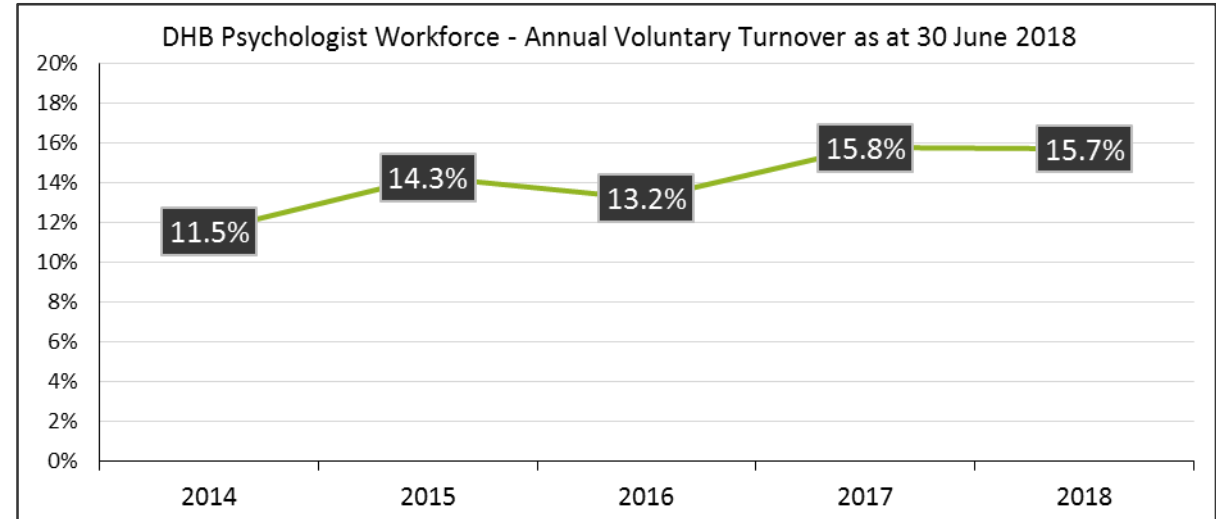
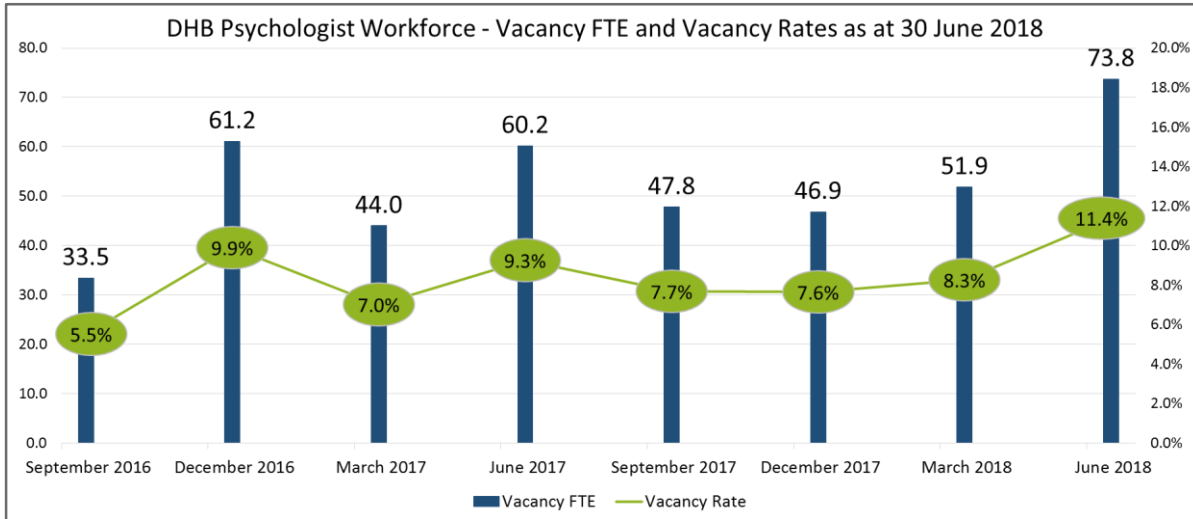
DHB workforce information sourced from the Health Workforce Information Programme (HWIP). The HWIP information is for all permanent and fixed term employees and excludes casuals, locums and any long term leave, including parental leave.

Key Workforce Trends



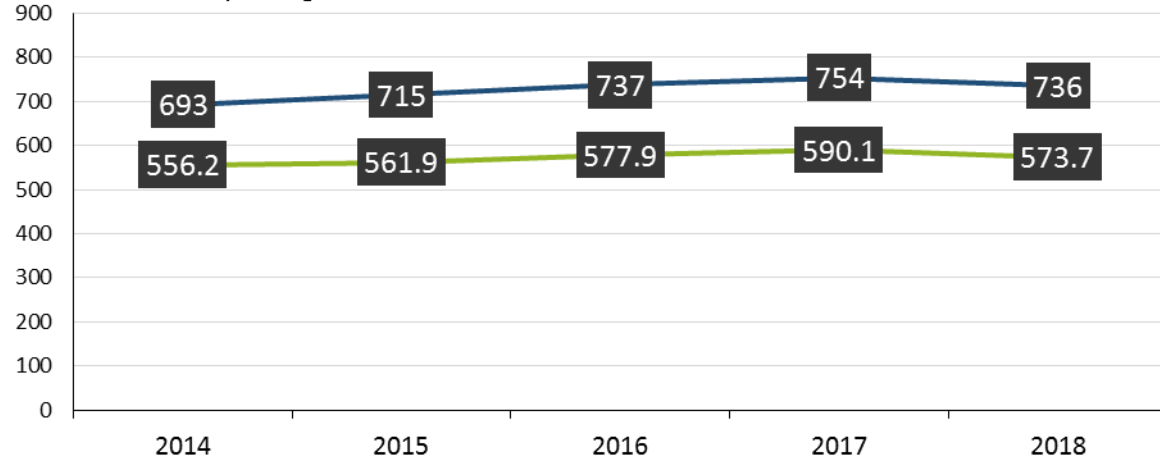
- Headcount
- Contracted Full-time Equivalent (FTE)
- Workforce Density (FTE per 100,000 Population of New Zealand)
- Employment Status (Mean FTE)
- Average Length of Service
- Voluntary Turnover Rate
- Annualised Average Sick Leave taken per FTE
- Annual Leave to Entitlement Balance
- Vacancy FTE & Vacancy Rate

Key Workforce Trends DHB Psychologists

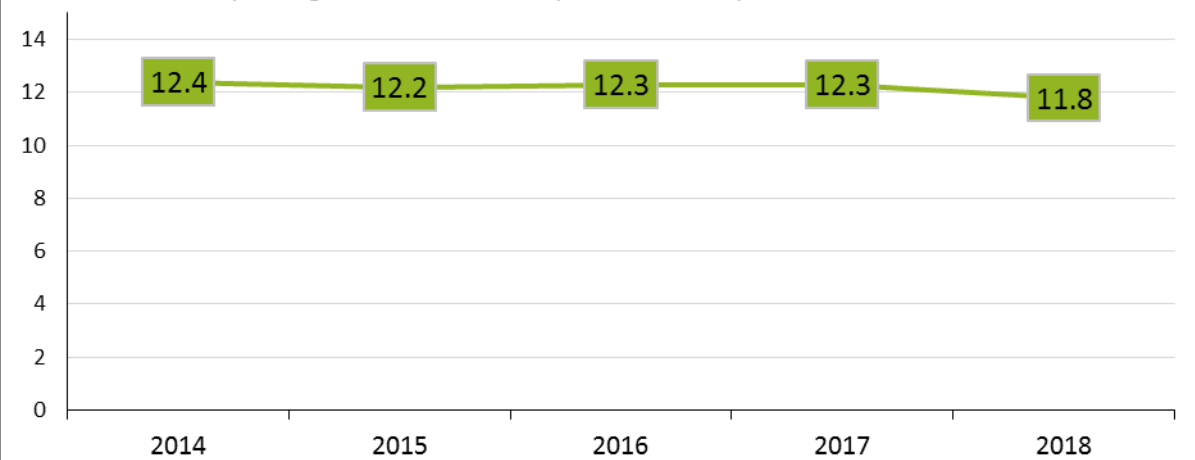


Key Workforce Trends DHB Psychologists

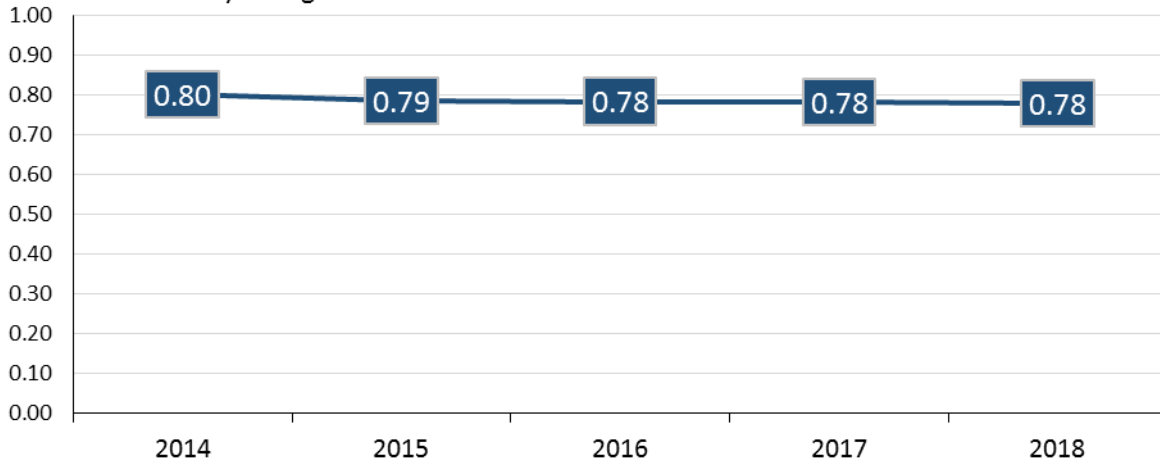
DHB Psychologist Workforce - Headcount & Contracted FTE as at 30 June 2018



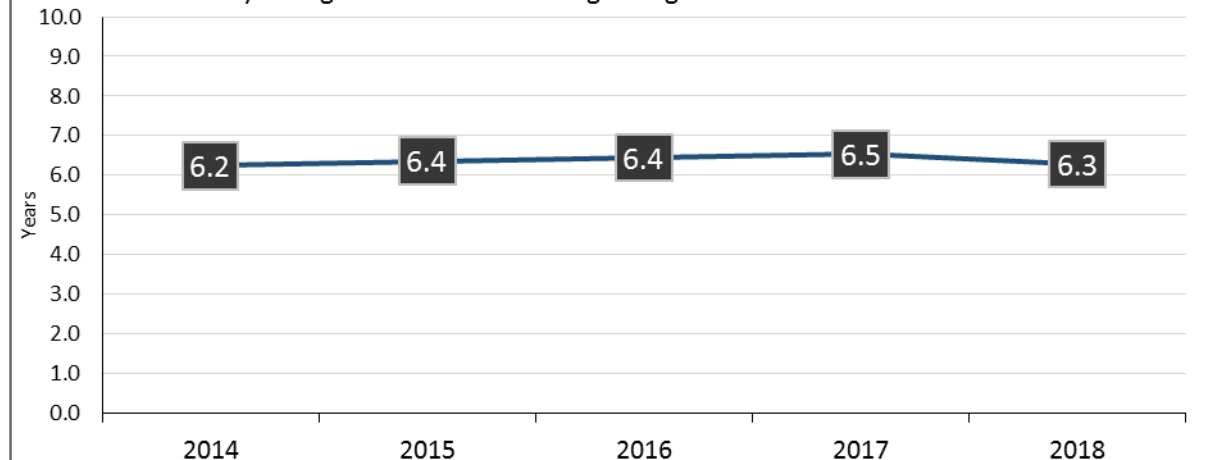
DHB Psychologist Workforce - FTE per 100,000 Population as at 30 June 2018



DHB Psychologist Workforce - Mean FTE as at 30 June 2018



DHB Psychologist Workforce - Average Length of Service as at 30 June 2018



Psychologist Workforce Snapshot at DHB Level as at 30 June 2018



DHB Level Workforce Profile - Psychologists

DHB	Average Age	% Female	% Over 55 years	Asian %	Māori %	Pacific %	Other %	Unknown %
Auckland	45.2	87.2%	25.6%	11.2%	3.2%	0.8%	79.2%	5.6%
Bay of Plenty	44.1	70.8%	16.7%	0.0%	8.3%	0.0%	91.7%	0.0%
Canterbury	40.4	85.4%	15.6%	3.1%	3.1%	1.0%	82.3%	10.4%
Capital & Coast	43.9	84.7%	19.4%	2.8%	6.9%	2.8%	80.6%	6.9%
Counties Manukau	38.8	80.9%	8.8%	7.4%	5.9%	4.4%	82.4%	0.0%
Hawke's Bay	45.0	75.0%	20.0%	0.0%	15.0%	0.0%	85.0%	0.0%
Hutt Valley	40.2	83.3%	6.7%	0.0%	0.0%	0.0%	96.7%	3.3%
Lakes	48.5	61.5%	30.8%	0.0%	7.7%	0.0%	92.3%	0.0%
MidCentral	46.3	72.2%	38.9%	11.1%	11.1%	0.0%	77.8%	0.0%
Nelson Marlborough	49.3	78.6%	39.3%	0.0%	0.0%	0.0%	96.4%	3.6%
Northland	45.1	85.7%	14.3%	4.8%	9.5%	4.8%	81.0%	0.0%
South Canterbury	37.5	50.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.0%
Southern	45.1	76.9%	21.2%	3.8%	3.8%	0.0%	86.5%	5.8%
Tairāwhiti	52.3	75.0%	50.0%	0.0%	0.0%	0.0%	100.0%	0.0%
Taranaki	46.8	76.9%	23.1%	0.0%	15.4%	0.0%	84.6%	0.0%
Waikato	50.7	73.8%	39.3%	6.6%	9.8%	0.0%	78.7%	4.9%
Wairarapa	40.0	50.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.0%
Waitemata	47.0	83.8%	32.4%	14.9%	4.1%	0.0%	77.0%	4.1%
West Coast	52.0	100.0%	50.0%	50.0%	0.0%	0.0%	50.0%	0.0%
Whanganui	45.4	71.4%	14.3%	0.0%	0.0%	0.0%	100.0%	0.0%

DHB workforce information sourced from the Health Workforce Information Programme (HWIP) as at 30 June 2018. The HWIP information is for all permanent and fixed term employees and excludes casuals, locums and any long term leave, including parental leave.

DHB Level Workforce Dynamic - Psychologists

DHB	Headcount	Contracted FTE	FTE per 100,000 Population	Mean FTE	Average Length of Service	Annual Voluntary Turnover	Vacancy FTE	Vacancy Rate	Annualised Mean Sick Leave taken per FTE
Auckland	125.0	90.6	16.8	0.72	7.3	9.1%	15.9	14.9%	64.8
Bay of Plenty	24.0	20.3	8.6	0.85	6.5	18.2%	3.3	14.0%	82.6
Canterbury	96.0	77.5	13.8	0.81	6.1	14.7%	2.0	2.5%	94.1
Capital & Coast	72.0	53.9	17.0	0.75	5.5	11.1%	1.8	3.2%	39.7
Counties Manukau	68.0	55.6	10.0	0.82	4.6	26.2%	8.7	13.5%	60.9
Hawke's Bay	20.0	12.7	7.7	0.64	4.0	16.7%	1.6	11.2%	60.0
Hutt Valley	30.0	23.2	15.5	0.77	3.7	18.5%	0.0	0.0%	23.1
Lakes	13.0	10.5	9.5	0.81	6.2	8.3%	2.5	19.2%	78.3
MidCentral	18.0	14.9	8.4	0.83	6.4	26.7%	6.0	28.7%	65.6
Nelson Marlborough	28.0	21.4	14.2	0.76	9.1	18.5%	0.0	0.0%	42.2
Northland	21.0	17.6	9.9	0.84	6.8	11.1%	2.6	12.9%	23.3
South Canterbury	2.0	1.6	2.7	0.80	0.5	0.0%	1.2	42.9%	80.2
Southern	52.0	40.7	12.4	0.78	8.0	8.0%	7.6	15.8%	51.3
Tairāwhiti	4.0	3.1	6.3	0.77	2.7	33.3%	1.0	24.5%	301.7
Taranaki	13.0	9.4	7.9	0.72	7.7	21.4%	2.9	23.6%	47.7
Waikato	61.0	51.0	12.2	0.84	6.7	15.5%	5.3	9.3%	47.2
Wairarapa	6.0	4.0	8.8	0.66	1.8	50.0%	0.6	13.2%	29.3
Waitemata	74.0	58.4	9.4	0.79	6.4	17.8%	10.8	15.6%	62.5
West Coast	2.0	1.4	4.3	0.70	0.1	200.0%	0.0	0.0%	0.0
Whanganui	7.0	6.1	9.4	0.87	8.6	40.0%	0.0	0.0%	113.8

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2016 Workforce Assessment



National DHB Psychologist Workforce Classification

Transitional Occupation - SOME INTERVENTION RECOMMENDED		
Domain	Assessment	Score
Service Demand	Service demand is progressively increasing.	3
Supply	There are some emerging distribution issues and wider issues with supply; but these are localised issues rather than the entire workforce, i.e. with particular areas of specialisation, Māori and Pacific psychologists, the number of intern placements and certain geographic areas.	2
Operational Flexibility	There are some sector requirements to begin looking at alternative models of care and roles for this workforce, as greater flexibility is required.	2.5
Operational Capacity	Some recruitment and retention issues are occurring, with slightly longer timeframes for gaining this workforce.	2
Total Score		9.5

The analysis of the Psychologists Workforce within the DHBs has resulted in the classification of a ***Transitional Occupation***. This classification highlights that service demand is progressively increasing with some supply issues around the number of Māori and Pacific psychologists and with particular areas of specialisation. There are emerging sector requirements to begin looking at alternative models of care and roles for this workforce, as greater flexibility is required. Some recruitment and retention issues are occurring in areas of specialisation, minority ethnic groups and particular geographic areas, with longer timeframes for gaining this workforce.

Service demand relating to the DHB Psychologist workforce is progressively increasing.

- Population growth and variegation / complexity, plus the impacts of housing, education and poverty issues. Seems to be decreased community resilience.
- Increased uptake of psychological services, due to reduced societal stigma about mental health issues and increased publicity. Increasing recognition of the value of psychology and psychological interventions in health.
- Increase in the acuity and complexity of patients - requiring specialist services over an extended period of time
- Increasing demand for specialist practitioners
- Increasingly psychologists are taking a lead role or multi-disciplinary integrated approach
- The scope of the role is broadening and changing - changing requirements and skills that are needed
- Changes to models of care, service delivery, service provision hours and standards of care
- Increasing emphasis on care in the community with increasing complexity around community based services
- High demand for rural work due to factors such as high suicide rates in farming communities, increasing pressures with falling dairy prices, isolation, etc.
- Growth areas: children and adolescents, forensics, ACC related 'Sensitive Claims' Increased pressures in terms of the aging workforce, reducing hours and time out for parental leave. These issues also impact on capacity for supervision

There are some emerging distribution issues and wider issues with supply; but these are localised issues rather than the entire workforce, i.e. with particular areas of specialisation, Māori and Pacific psychologists, the number of intern placements and certain geographic areas.

- Equity issues – the workforce is not representative of the wider population, with significant under representation of Māori and Pacific
- Under representation of men – few male psychologists
- Reliance on overseas trained staff
- Increasing numbers of staff reducing their hours in order to also work in private settings. It is difficult to recruit to cover small FTE gaps.
- Increasing shortages of psychologists in specialised areas and sub-specialties, with appropriate experience.
- Tension between specialist vs generalist capability development
- Concerns around the trainee pipeline being able to meet future need
- Concerns around the funding of interns, trainees and placement numbers
- Supervision capacity and requirements
- Difficult to attract graduates to rural regions

There are some sector requirements to begin looking at alternative models of care and roles for the DHB Psychologist workforce, as greater flexibility is required.

- Small workforce with a long training/education pathway.
- Training is prescribed with specific qualifications and scopes of practice
- Specialisations can reduce service flexibility
- Changing models of service delivery are looking at taking a multi-disciplinary approach and breaking down silos.
- Increasingly complex issues are coming through, so trying to take an integrated approach.
- Increasing requirements for psychologists in areas where they may not have previously been involved.
- Increased focus on care delivered in community, increased integration with primary care, shared care, etc.
- Increasing need to be responsive to consumer needs - increasing need for flexibility around work hours and locations
- New technologies are providing some flexibility in the way work is structured and organised, and services are delivered.

Some recruitment and retention issues are occurring in areas of specialisation, minority ethnic groups and some geographic areas, with slightly longer timeframes for gaining this workforce.

- Long and difficult recruitment processes due to challenges sourcing suitably qualified and experienced staff
- Reliance on overseas trained staff – challenges attracting candidates due to changes to immigration policy
- There is competition between DHBs and other agencies during recruitment.
- Sourcing Māori and Pacific psychologists is very difficult
- Retention and recruitment issues relating to specialised areas and roles
- The high cost of living in Auckland impacts on recruitment and retention. Conversely, recruiting to rural settings can be difficult.
- Managing an increasing number of retirements
- The high numbers of females means that there are high levels of parental leave and people not returning from parental leave, which impacts on retention.
- Increased movement to private settings – higher remuneration
- Can be high turnover where there are solo practitioners, who don't get a lot of support.
- Access to training and lead in time can become a retention issue. Funding of Continuing Professional Development (CPD) is negotiated. Training is needed to develop specialist skills, however funding is an issue.

What are the Workforce Assessments telling us?

Workforce Challenges

- High demand for services and increased pressures due to significant increases in demand for health services - volume, acuity and complexity
- Changing models of care
- Changing and expanded service delivery hours
- Ageing workforce challenges
- Equity - under representation of Māori and Pacific Peoples
- Workforce distribution issues
- Recruitment challenges - difficulty recruiting specialist practitioners, challenges recruiting for rural settings, high cost of accommodation in Auckland, competition for experienced staff
- Access to professional development opportunities
- Trainee numbers and funding of trainee positions
- Supervision and mentoring capacity
- Matching workforce to needs of inpatient/outpatient/community continuum

Areas of Opportunity

- Expanding areas of work and moving into new scopes
- Inter-professional practice
- Community based roles integrated fully with general practice
- Greater use of outpatient and community settings
- Greater utilisation of health assistants and support workers
- Development of leadership skills
- Increased use of technology

Completed Workforce Assessment Reports are published at:

<https://tas.health.nz/strategic-workforce-services/workforce/workforce-assessment-reports/>

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HWIP data extract provided by: Fazleen Rahiman - Workforce Analyst

Information about HWIP and reports can be accessed at:

<https://tas.health.nz/strategic-workforce-services/health-workforce-information-programme-hwip/>