## **Senate Community Affairs Committee**

# ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

### HEALTH AND AGEING PORTFOLIO

Budget Estimates 2012-2013, 30 & 31 May and 1 June 2012

Question: E12-027

**OUTCOME** 12: Health Workforce Capacity

Topic: Australian Standard Geographical Classification – Remoteness Area (ASCC-RA)

Scheme

Type of Question: Written Question on Notice

Number of pages: 1

Senator: Senator Boyce

## Question:

Is there any evidence to suggest that since the introduction of the Australian Standard Geographical Classification - Remoteness Area Scheme, doctors in smaller towns across regional and rural Australia are finding they have to work longer hours because of colleagues transferring to less remote locations while still being eligible for the same incentives?

#### Answer:

The Department of Health and Ageing does not collect data on working hours. However, Medicare billing data indicates that in 2010-11 the number of full-time workload equivalent (FWE) general practitioners in regional, rural and remote Australia increased by more than 4 per cent.

A data report released in March 2012 by the Australian Institute of Health and Welfare presents information on the medical practitioner workforce, based primarily on estimates derived from the National Health Workforce Data Set: medical practitioners 2010. The table below summarises the findings in respect to weekly hours worked.

Hours worked by medical practitioners per remoteness classification

ASGC-RA location	2006	2010
Major Cities (RA1)	43.4	43.2
Inner regional (RA2)	43.6	43.6
Outer regional (RA3)	44.9	45.3
Remote (RA4) and Very Remote (RA5)	45.9	44.9

The AIHW report is available at http://www.aihw.gov.au/publicatiom-detail/?id=10737421480