

The **Allen Consulting** Group

## **Education and training of health and medical professionals in private hospitals and day surgeries**

**March 2005**

Report to the Australian Private Hospitals Association

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# The Allen Consulting Group

The Allen Consulting Group Pty Ltd

ACN 007 061 930

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## Melbourne

4th Floor, 128 Exhibition St  
Melbourne VIC 3000  
Telephone: (61-3) 9654 3800  
Facsimile: (61-3) 9654 6363

---

## Sydney

3rd Floor, Fairfax House, 19 Pitt St  
Sydney NSW 2000  
Telephone: (61-2) 9247 2466  
Facsimile: (61-2) 9247 2455

---

## Canberra

Level 12, 15 London Circuit  
Canberra ACT 2600  
GPO Box 418, Canberra ACT 2601  
Telephone: (61-2) 6230 0185  
Facsimile: (61-2) 6230 0149

---

## Perth

Level 21, 44 St George's Tce  
Perth WA 6000  
Telephone: (61-8) 9221 9911  
Facsimile: (61-8) 9221 9922

---

## Brisbane

Level 11, 77 Eagle St  
Brisbane QLD 4000  
PO Box 7034, Riverside Centre, Brisbane QLD 4001  
Telephone: (61-7) 3221 7266  
Facsimile: (61-7) 3221 7255

---

## Online

Email: [info@allenconsult.com.au](mailto:info@allenconsult.com.au)  
Website: [www.allenconsult.com.au](http://www.allenconsult.com.au)

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## Executive summary

The private hospital sector makes a large, but often unrecognised contribution to the education and training of medical and health professionals in Australia. This report details the scale and scope of this contribution for the first time, drawing on the findings of a new national survey of private hospitals and day surgeries.

The report demonstrates that a substantial proportion of private hospitals and day surgeries actively provide an extensive range of education and training opportunities to medical, nursing and allied health staff and students. The quality of the private sector's education and training effort is very highly regarded, and it plays an important role in developing the knowledge and skills of the Australian health care workforce, and improving the quality of care provided in both the public and private health systems.

The findings in the report are based on the information provided by 164 private hospitals and day surgeries that responded to a survey conducted by The Allen Consulting Group and The Ryder Self Group on behalf of the Australian Private Hospitals Association in late 2004 and early 2005. The survey attracted a reasonably representative response, with replies from hospitals in each state and territory and a mix of hospitals of different sizes that is similar to the sector as a whole.

### ***Private hospitals' commitment to education and training***

More than seven out of ten private hospitals (71 per cent) offered education and training programs to medical, nursing and allied health staff and students in 2004.<sup>1</sup> More than 36 000 students undertook a total of 834 programs at 117 hospitals. The average program involved 84 hours of formal 'classroom' delivery. In total, private hospitals provided about 3.4 million student hours of education and training.<sup>2</sup>

Table ES.1 shows that larger hospitals provided the majority of education and training in 2004. This is not surprising, given that these hospitals were more likely than small and medium-sized hospitals to be a provider of education and training, and they usually have facilities to cater for a larger number of students.

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<sup>1</sup> Based on hospitals that responded to the survey.

<sup>2</sup> 'Total student hours' is equal to the sum of total hours received by each student. For example, if 20 students take a 50-hour course, that represents 1000 student hours.

Table ES.1

**EDUCATION AND TRAINING AT PRIVATE HOSPITALS: NUMBER OF STUDENTS, PROGRAMS AND HOURS OF DELIVERY, 2004**

Hospital size	Programs	Students	Total hours of delivery	Total student hours <sup>a</sup>
1-10 beds	62	379	3 120	22 200
11-100 beds	233	4 561	13 807	378 050
101+ beds	506	29 414	42 493	2 861 510
<b>Total<sup>b</sup></b>	<b>834</b>	<b>36 455</b>	<b>61 520</b>	<b>3 419 140</b>

(a): Total student hours is equal to the sum of total hours received by each student. For example, if 20 students take a 50-hour course, that represents 1000 student hours.

(b): Totals include hospitals that did not specify their number of beds.

Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

Overall, hospitals of more than 100 registered beds accounted for:<sup>3</sup>

- 63 per cent of all programs provided in private hospitals;
- 86 per cent of all students and staff participating in education and training in private hospitals;
- 72 per cent of all hours of formal classroom delivery; and
- 88 per cent of all student hours provided.

The majority of programs offered (65 per cent) were for nursing students and staff. Medical programs and allied health programs each accounted for 18 and 17 per cent respectively. Nursing held even greater majorities in the number of students and staff participating in programs (73 per cent) and the total number of student hours provided by private hospitals (83 per cent).

Sixty-two participating hospitals (38 per cent) were Approved Teaching Facilities, formally affiliated with a university. Most of these were in Victoria, New South Wales and Queensland. About 46 per cent of participating hospitals offered scholarships to students, the vast majority of scholarships were for nursing students.

*Staff involvement in delivery*

Private hospitals contribute a large amount of human resources to providing training programs. Hospitals estimated that more than 5700 staff were actively involved in delivering education and training in 2004 — approximately 7 members of staff per program. Over the course of the year, staff contributed 113 hours to delivering the average program. Together, staff members at Australian private hospitals spent more than 61 000 hours of work delivering these programs — equivalent to about 30 full-time employees.

<sup>3</sup> Proportions relate to those programs for which hospital size was reported.

### ***Benefits, costs and barriers***

Participating hospitals considered the education and training programs of the private hospital sector to have very positive outcomes:

- 97 per cent agreed programs improve the quality of health care provided;
- 88 per cent agreed that programs assist hospitals to recruit or retain staff;
- 92 per cent agreed that programs improve the work environment at hospitals; and
- 82 per cent agreed that programs develop future managers and leaders.

The education and training contribution of private hospitals is also considered to have a wide range of benefits for the broader health system, ranging from the skills and knowledge gained by staff to better outcomes for patients and better linkages between the public and private health sectors.

On the other side of the coin, private hospitals and day surgeries reported that providing education and training to medical and health professionals had cost them a total of \$20.2 million in 2004. This equates to an average cost of about \$24 200 per program, and about \$174 400 per hospital.<sup>4</sup> When the fees received by hospitals for providing programs are taken into account, the net cost to hospitals was approximately \$18.9 million.

Cost constraints, and private hospitals' lack of access to external funding (e.g., from government and private health insurers), were identified by hospitals as one of the main factors preventing more education provision in the private health sector. Other barriers included size (for the smallest hospitals and day surgeries) and the capacity of hospitals to release staff from their work duties to attend education and training courses.

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<sup>4</sup> Averages relate to those hospitals that estimated costs incurred.

## *Chapter 1*

# Introduction

### **1.1 This report**

This report details — for the first time — the private hospital sector’s contribution to the education and training of medical and health professionals in Australia.

This information is particularly timely. There is a rising demand across all fields for a highly skilled workforce that can improve the quality of service provision while raising productivity. The development of such a workforce is underpinned by the provision of adequate opportunities for education and training of students and existing staff. Furthermore, the private sector is becoming ever more important to the Australian health system. For example, in 2002–03, private hospitals provided for 39 per cent of patient separations, up from with 33 per cent in 1998–99.<sup>5</sup>

The report is based on the findings of a new national survey of private hospitals and day surgeries conducted by The Allen Consulting Group and The Ryder Self Group on behalf of the Australian Private Hospitals Association in late 2004 and early 2005. Approximately 210 private hospitals and day surgeries and six private hospital groups were invited to respond to a written questionnaire. The questionnaire sought three types of information:

- information about the hospital or day surgery;
- details of the education and training (excluding compulsory in-service courses) provided to three groups of clinical staff and students:
  - medical staff and students;
  - nursing staff and students; and
  - allied health staff and students; and
- the costs and benefits to hospitals and the overall health system of private hospitals providing education and training.

The report summarises the number of programs provided to each group of clinical staff and students, the number of participants and hours of delivery, the main purpose of the programs, and the amount of staff resources dedicated to providing the programs. It also explores private hospitals’ perceptions of the benefits of the programs, the estimated financial cost to hospitals of delivery, and the factors that prevent private hospitals from providing more education and training.

A total of 164 hospitals participated in the survey. This represents a response rate of about 53 per cent — a very strong result for a questionnaire of this kind.

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<sup>5</sup> AIHW 2004, *Australian Hospital Statistics 2002-03*, AIHW, Canberra, Table 2.3.

***Structure of report***

The remainder of the report is structured as follows:

- Chapter 2 provides a profile of the hospitals that responded to the survey;
- Chapter 3 details the education and training activity undertaken by private hospitals in 2004; and
- Chapter 4 explores the costs, benefits and barriers associated with private hospital provision of education and training.

## Chapter 2

# Profile of participating hospitals

*This chapter describes the hospitals that responded to the survey, in terms of their location, size, services provided, and formal links with education and training*

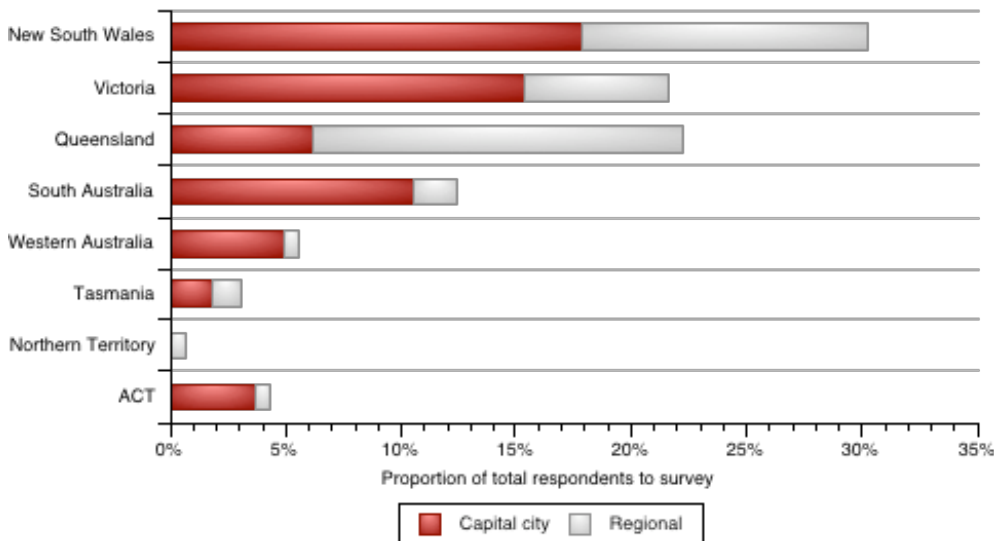
The results detailed in this report are based on the information provided by 164 private hospitals and day surgeries in response to a survey conducted by The Allen Consulting Group and The Ryder Self Group.<sup>6</sup> Each of the participating hospitals is a member of one or more of the Australian Private Hospitals Association, the Private Hospitals Association of Queensland, Catholic Health Australia and the Australian Day Surgery Association.

### 2.1 Location

Responses were received from hospitals in each state and territory in Australia. Figure 2.1 shows that the greatest number of responses was received from New South Wales, Queensland and Victoria. More than half of the hospitals (60 per cent) are located in capital cities.

Figure 2.1

#### PARTICIPATING HOSPITALS AND DAY SURGERIES, BY JURISDICTION



Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

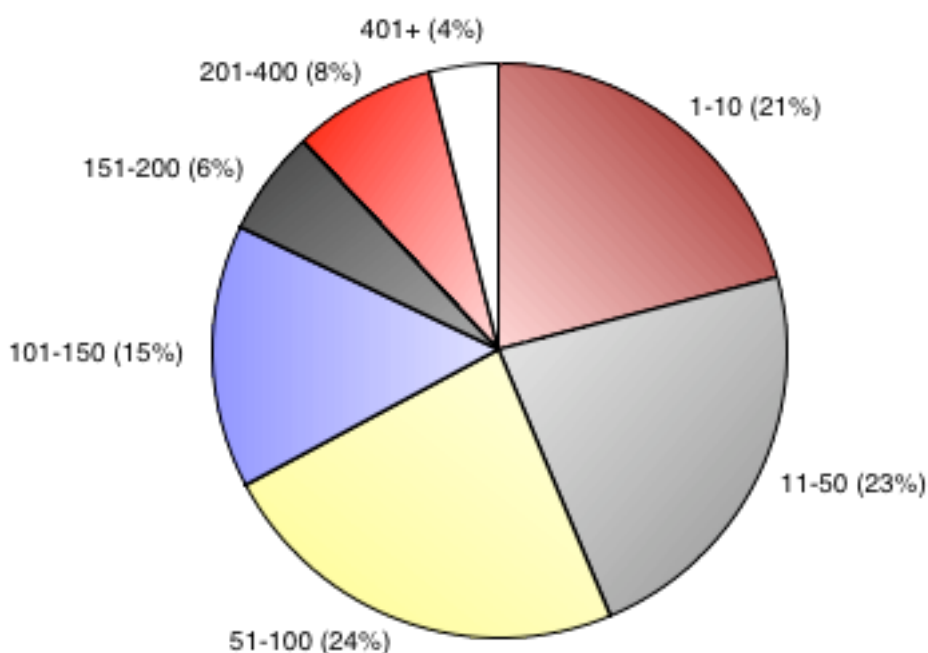
<sup>6</sup> In the remainder of the report, the term ‘hospitals’ is used to refer to both hospitals and day surgeries.

## 2.2 Size

Most participating hospitals were small or medium-sized, in terms of their number of licensed beds. Figure 2.2 shows that 21 per cent had just 10 licensed beds or fewer. These were overwhelmingly day surgeries. Among larger hospitals, 21 per cent of all responses came from hospitals with 101 to 200 licensed beds, and 12 per cent came from hospitals with more than 200 beds.

Figure 2.2

### PARTICIPATING HOSPITALS AND DAY SURGERIES, BY NO. OF LICENSED BEDS



Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

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In terms of size, the group of hospitals and day surgeries that responded to the survey is reasonably representative of all private hospitals (excluding day surgeries), as reported by the ABS in 2002–03 (table 2.1). The main difference is in hospitals of 50 beds or fewer: the survey sample has a higher proportion of hospitals with 0-25 beds — reflecting the inclusion of day surgeries in the survey respondents — and a lower proportion of hospitals with 26-50 beds. It is not possible to classify the group of survey respondents into hospitals and day surgeries, as several respondents elected not to identify themselves.

Table 2.1

**PARTICIPATING HOSPITALS AND DAY SURGERIES AND ALL HOSPITALS**

Hospital size	Survey respondents (hospitals and day surgeries)	All private hospitals, 2002–03 <sup>a</sup>
0-25 beds	42 (27%)	53 (17%)
26-50 beds	25 (16%)	80 (27%)
51-100 beds	37 (23%)	87 (29%)
101-200 beds	33 (21%)	52 (17%)
200+ beds	18 (11%)	24 (8%)
Total <sup>b</sup>	164 (100%)	296 (100%)

(a): In addition to the 296 hospitals, the ABS reported that there were 240 free-standing day hospitals (i.e. day surgeries) in 2002–03.

(b): Total of survey respondents includes nine hospitals that did not specify number of beds.

Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries and ABS 2004, Private Hospitals 2002-03, Catalogue Number 4390.0.

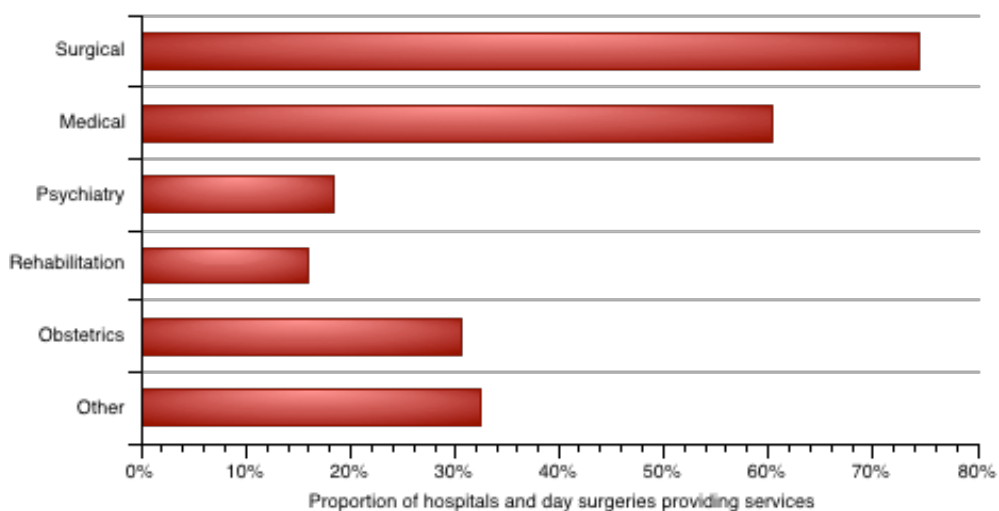
### 2.3 Services

The five main types of services provided by participating hospitals are shown in figure 2.3. Almost three-quarters of hospitals offer surgical services, while more than half provide medical services. Only 21 per cent provide neither surgical nor medical services. The most common types of ‘other’ services provided by hospitals not detailed in figure 2.3 are:

- gastroenterology and endoscopy services;
- cardiology and cardiac services;
- orthopaedics;
- ophthalmology;
- aged care;
- paediatrics; and
- palliative care.

Figure 2.3

**PARTICIPATING HOSPITALS AND DAY SURGERIES, BY SERVICES PROVIDED**



Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

**2.4 Formal links with education and training**

Sixty-two participating hospitals were Approved Teaching Facilities, formally affiliated with a university. The majority of these were from Victoria, New South Wales and Queensland.

Table 2.2

**PRIVATE HOSPITALS WITH APPROVED TEACHING FACILITIES BY STATE, 2004**

State	Number	Proportion
New South Wales	14	28%
Victoria	17	48%
Queensland	10	27%
South Australia	9	45%
Western Australia	4	50%
Tasmania	4	80%
ACT	3	42%
Northern Territory	1	100%
<b>Total</b>	<b>62</b>	<b>38%</b>

Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

Of these, 34 were medium-sized hospitals with 11 to 100 beds and 25 were larger hospitals with greater than 101 beds. Only one was smaller — an infertility treatment clinic in Western Australia with three registered beds. Twenty-nine hospitals had members of staff with academic appointments; over two-thirds of these were Approved Teaching Facilities.

### **Scholarships**

About 46 per cent of participating hospitals offered scholarships to students. The vast majority (86 per cent) of scholarships were for nurses, while 6 per cent were for medical staff, and 8 per cent were for allied health staff. About one-half of hospitals offering scholarships were larger hospitals with 101 beds or more.

Table 2.3

#### **HOSPITALS THAT OFFERED SCHOLARSHIPS BY STATE AND TYPE, 2004**

State	Medical	Nursing	Allied Health	Total
New South Wales	2	17	3	22
Victoria	1	22	2	25
Queensland	1	12	2	15
South Australia	-	10	-	10
Western Australia	-	3	-	3
Tasmania	1	3	-	4
ACT	-	3	-	3
Northern Territory	-	1	-	1
<b>Total</b>	<b>5</b>	<b>71</b>	<b>7</b>	<b>83</b>

Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

### Chapter 3

## Private hospitals' commitment to education and training

*This chapter summarises the quantity of education and training provided at private hospitals to medical staff and students; nursing staff and students; and allied health staff and students. It also describes the level of staff involvement in the delivery of these programs.*

### 3.1 Overview

#### Quantity of education and training

About seven out of ten of private hospitals (71 per cent) offered education and training programs to medical, nursing and allied health staff and students in 2004.<sup>7</sup> More than 36 000 students undertook a total of 834 programs at 76 hospitals. The average program involved 84 hours of formal 'classroom' delivery. In total, private hospitals provided about 3.4 million student hours of education and training.<sup>8</sup>

Larger hospitals were most likely to offer education and training programs. Table 3.1 shows that fewer than half of the smallest hospitals provided programs in 2004, compared to over 70 per cent of hospitals with 11 to 100 registered beds, and more than 80 per cent of larger hospitals.

Table 3.1

#### PRIVATE HOSPITALS OFFERING EDUCATION AND TRAINING PROGRAMS, 2004

Hospital size	Providing education and training programs	
	Number	Proportion
0-10 beds	15	47%
11-100 beds	53	75%
100+ beds	45	87%
Total <sup>a</sup>	117	71%

(a): Total includes hospitals that did not specify number of beds.

Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

The majority of programs offered (65 per cent) were for nursing students and staff. Medical programs and allied health programs accounted for 18 and 17 per cent respectively. Nursing held even greater majorities in the number of students and staff participating in programs (73 per cent) and the total number of student hours provided by private hospitals (84 per cent).

<sup>7</sup> Based on hospitals that responded to the survey.

<sup>8</sup> 'Total student hours' is equal to the sum of total hours received by each student. For example, if 20 students take a 50-hour course, that represents 1000 student hours.

As table 3.2 shows, the majority of programs are based in New South Wales, followed by Victorian and Queensland. Nursing programs form the majority of all programs offered across each state and territory.

Table 3.2

**NUMBER OF PROGRAMS BY JURISDICTION, 2004**

State	Medical	Nursing	Allied health	Total
New South Wales	58	165	61	284
Victoria	34	120	17	171
Queensland	35	109	29	173
South Australia	8	61	5	74
Western Australia	11	75	21	107
Tasmania	6	5	-	11
ACT	-	6	6	12
Northern Territory	-	2	-	2

Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

***Staff involvement in delivery***

Hospitals estimated that more than 5700 staff were actively involved in delivering education and training in 2004 — approximately 7 members of staff per program. Over the course of the year, staff contributed 113 hours to delivering the average program. Together, staff members at Australian private hospitals spent more than 61 000 hours of work delivering these programs.<sup>9</sup>

***Case studies***

There is great variety in the scale, scope and nature of the education and training provided by different private hospitals and day surgeries. At one end of the scale, several hospitals provided just one or two programs for a single group of staff — often continuing medical education programs for nursing staff. At the other, a handful of larger hospitals provided more than 30 programs, with offerings for medical, nursing and allied health staff and students. Box 3.1 examines the programs provided by a selection of hospitals, as an illustration of these differences.

<sup>9</sup> Information on the number of staff involved was provided for 652 of the 834 programs; estimates of hours of work contributed were provided for 545 programs.

Box 3.1

### **EDUCATION AND TRAINING PROVISION OF SELECTED HOSPITALS AND DAY SURGERIES**

#### **In Vitro Private Hospital**

This is a small specialist hospital in Perth, with just three registered beds. In 2004, it offered two programs of education and training:

- a 10-hour course on Management of Infertility, attended by 70 undergraduate medical students. Two hospital staff devoted 20 hours of time to delivering the course; and
- a 2-hour course on Midwifery, attended by 35 nursing staff as part of their continuing medical education. One member of staff contributed five hours to delivering the program.

The hospital estimated its education programs cost \$10 000 to deliver.

#### **Mater Misericordiae Hospital**

A 167-bed hospital located in regional Queensland, Mater Misericordiae provided five programs for nursing staff and students in 2004:

- three courses forming part of a Postgraduate Certificate in Nursing Science, undertaken by a total of 10 students;
- a 40-hour Graduate Nurse Transition Program undertaken by nine students; and
- a professional development program of continuing medical education, attended by 377 existing nursing staff.

21 hospital staff were actively involved in the delivery of the five programs, contributing a total of 578 hours of work over the course of the year. The hospital estimated it spent \$240 000 delivering the programs.

#### **Sydney Adventist**

This is a 342-bed hospital, that provided 64 programs of education and training to a total of almost 300 staff and students in 2004:

- 20 programs to assist medical staff attain professional recognition, including several programs of specialist peer review;
- 16 programs of continuing medical education for nursing staff, including a Bachelor of Nursing undertaken by 127 students, and a Master of Nursing Health undertaken by 11 students; and
- 28 programs for continuing medical education for allied health staff.

Almost 10 000 hours of staff time were devoted to delivering these programs. Its Faculty of Nursing and Health offers undergraduate and graduate courses in nursing studies in conjunction with Avondale College. Currently 30 to 40 nurses graduate each year. In 2005, the hospital expects to receive additional funding to increase its intake to 80 per annum. The hospital estimated the programs cost \$3.7 million.

#### **Epworth Hospital**

Epworth, a 510 bed hospital in metropolitan Melbourne, provided 18 programs of education and training in 2004, primarily for tertiary students:

- eight programs for medical staff, including six for students to gain various qualifications;
- seven graduate and postgraduate programs for nursing students; and
- three 28 programs for allied health students — at undergraduate, postgraduate and PhD levels.

Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

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### 3.2 Training of medical staff

#### Quantity of education and training

About three out of every ten private hospitals provided education and training to *medical* staff in 2004. Almost 6800 medical staff and students undertook a total of 152 different education and training programs at 53 hospitals. The average program involved 58 hours of formal ‘classroom’ delivery. In total, private hospitals provided about 397 000 student hours of medical education and training.

Table 3.2 shows that larger hospitals provided the majority of education and training to medical staff and students. This is not surprising, given that these hospitals are much more likely than smaller hospitals to be involved in education and training, and they usually have facilities to cater for a larger number of students.

Table 3.3

**EDUCATION AND TRAINING OF MEDICAL STAFF: NUMBER OF STUDENTS, PROGRAMS AND HOURS OF DELIVERY, 2004**

Hospital size	Programs	Students	Total hours of delivery	Total student hours <sup>a</sup>
1-10 beds	14	90	36	360
11-100 beds	35	701	1 929	62 650
101+ beds	97	5 901	4 495	325 900
<b>Total<sup>b</sup></b>	<b>152</b>	<b>6 756</b>	<b>6 586</b>	<b>397 250</b>

(a): Total student hours is equal to the sum of total hours received by each student. For example, if 20 students take a 50-hour course, that represents 1000 student hours.

(b): Totals include hospitals that did not specify their number of beds.

Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

Overall, hospitals of more than 100 registered beds accounted for:<sup>10</sup>

- 66 per cent of all medical programs provided in private hospitals;
- 88 per cent of all students and staff participating in medical education and training;
- 70 per cent of all hours of formal classroom delivery; and
- 84 per cent of all student hours provided.

<sup>10</sup> Proportions relate to those programs for which hospital size was reported.

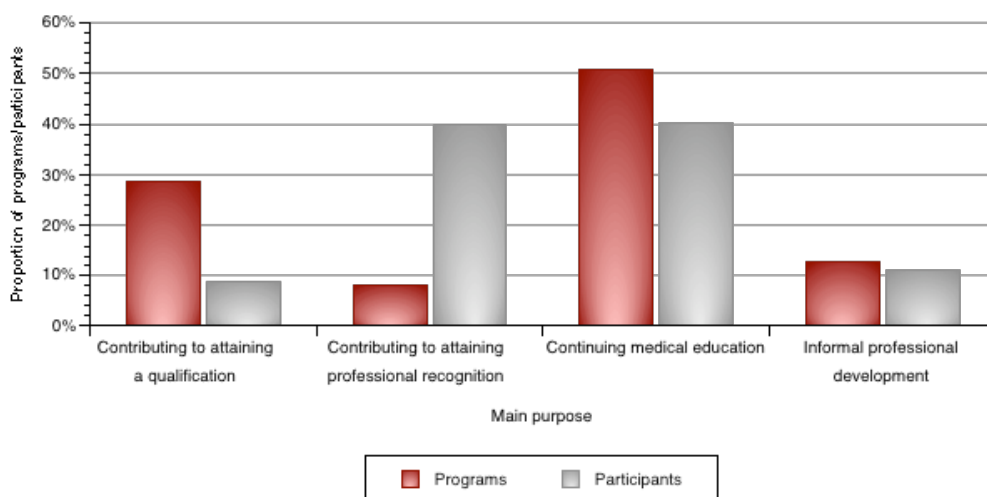
### Type of programs

The main reasons that medical staff and students undertake education and training programs at private hospitals were for continuing medical education and to attain professional recognition. Figure 3.1 shows that while only 9 per cent of programs were undertaken primarily for attaining professional recognition, a large number of staff and students participated in these programs, such that they accounted for 46 per cent of all participants. Conversely:

- over 50 per cent of programs involved continuing medical education, but these accounted for 40 per cent of participants; and
- attaining a qualification was the main purpose for only 8 per cent of participants, despite this being the rationale for about 28 per cent of programs.

Figure 3.1

#### MAIN PURPOSE FOR MEDICAL EDUCATION AND TRAINING IN PRIVATE HOSPITALS



Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

The vast majority of medical education and training provided by private hospitals was concerned with a variety of specialist medical topics. Box 3.2 lists the primary specialist fields in which private hospitals provided education and training for medical staff.

Box 3.2

**AREAS OF SPECIALIST MEDICAL PROGRAMS PROVIDED BY PRIVATE HOSPITALS, 2004**

Rehabilitation	Plastic and reconstructive surgery
Dermatology	Orthopaedics
Ear, nose and throat surgery	Ophthalmology
Obstetrics and gynaecology	Radiation oncology
Hand surgery	Cardiology
Paediatrics	Endocrinology

Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

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***Staff involvement in delivery***

Hospitals estimated that more than 820 staff were actively involved in delivering medical education and training in 2004 — an average of 15 staff per hospital, and around eight members of staff per program. Over the course of the year, staff contributed 91 hours to delivering the average medical program. In total, staff members at Australian private hospitals spent 8400 hours of work delivering these programs.<sup>11</sup>

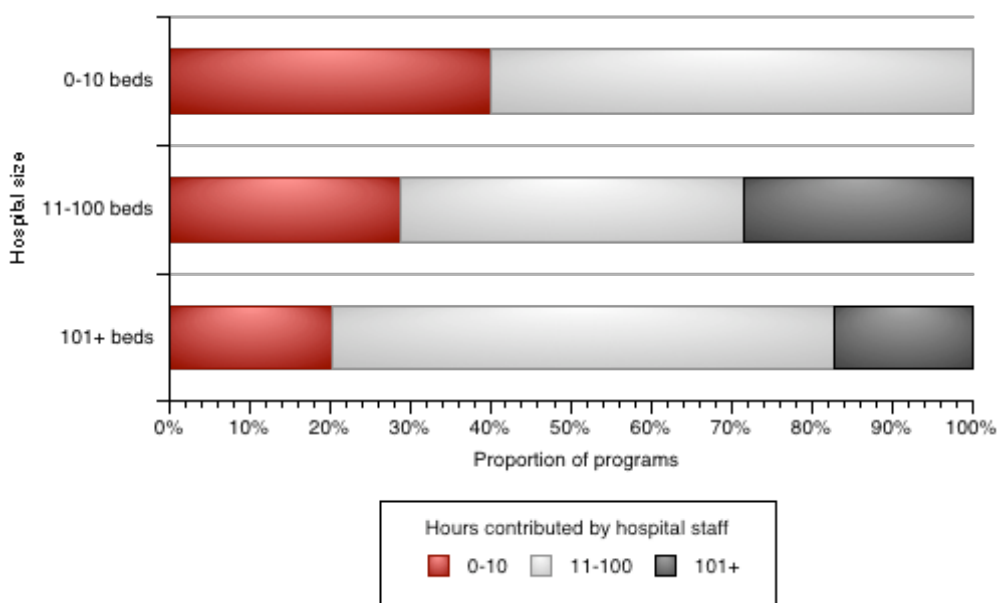
Several medium-sized and larger hospitals made substantial commitments of their human resources to providing medical education and training. Figure 3.2 shows that, of those programs for which the number of hours contributed by staff was reported, 29 per cent of programs at hospitals with 11 to 100 beds and 17 per cent of programs at larger hospitals involved staff contributing more than 100 hours of time.

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<sup>11</sup> Information on the number of staff involved was provided for 83 of the 112 medical programs; estimates of hours of work contributed were provided for 71 programs.

Figure 3.2

**HOURS OF STAFF TIME CONTRIBUTED TO MEDICAL PROGRAMS, BY HOSPITAL SIZE, 2004**



Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

Larger hospitals represented about 72 per cent of total staff hours contributed to medical programs, with the average program involving 95 hours of staff time. Hospitals with 11 to 100 beds represented almost one-quarter of total staff hours, with 150 hours contributed to the average program. The smallest hospitals represented less than 2 per cent of total staff hours, with an average of 14 hours of staff time contributed.

### 3.3 Training of nursing staff

#### *Quantity of education and training*

The extent of the education and training of *nursing* staff in private hospitals is more than twice as large as the medical and allied health programs put together. More than 68 per cent of private hospitals provided education and training to nursing staff in 2004. Over 26 700 nursing staff and students undertook a total of 543 different education and training programs at 112 hospitals. The average program involved 94 hours of formal ‘classroom’ delivery. In total, private hospitals provided about 2.5 million hours of nursing education and training.

As was the case for medical training, larger hospitals provided the majority of education and training to nursing staff and students. Table 3.3 shows that hospitals of more than 100 registered beds accounted for:<sup>12</sup>

- 61 per cent of all nursing programs provided in private hospitals;

<sup>12</sup> Proportions relate to those programs for which hospital size was reported.

- 84 per cent of all students and staff participating in nursing education and training;
- 70 per cent of all hours of formal classroom delivery; and
- 88 per cent of all student hours provided.

Table 3.4

**EDUCATION AND TRAINING OF NURSING STAFF: NUMBER OF STUDENTS, PROGRAMS AND HOURS OF DELIVERY, 2004**

Hospital size	Programs	Students	Total hours of delivery	Total student hours <sup>a</sup>
1-10 beds	44	273	2 444	17 580
11-100 beds	161	3 705	11 261	311 620
101+ beds	315	21 512	32 481	2 404 610
<b>Total<sup>b</sup></b>	<b>543</b>	<b>26 725</b>	<b>47 335</b>	<b>2 828 875</b>

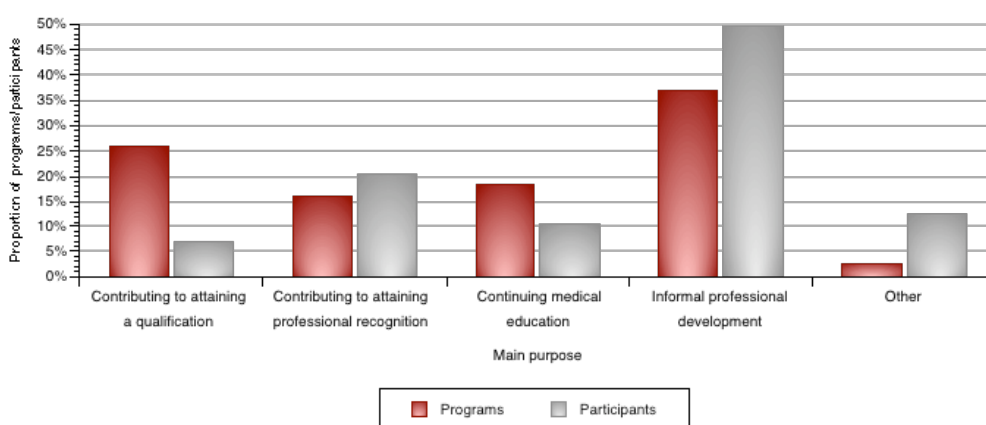
(a): Total student hours is equal to the sum of total hours received by each student. For example, if 20 students take a 50-hour course, that represents 1000 student hours.  
 (b): Totals include hospitals that did not specify their number of beds.  
 Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

*Type of programs*

The type of education and training programs provided to nursing staff and students was quite different to that provided to medical staff and students. Figure 3.3 shows that more than 36 per cent of nursing programs were for informal professional development, and these programs accounted for almost 56 per cent of participants. Only 7 per cent of nursing staff or students undertook education and training provided by private hospitals for the primary purpose of attaining a qualification.

Figure 3.3

**MAIN PURPOSE FOR NURSING EDUCATION AND TRAINING IN PRIVATE HOSPITALS**



Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

Nursing education and training programs covered a very wide range of types of training and skills including, *inter alia*:

- a range of graduate and postgraduate nursing courses in areas such as critical care nursing, perioperative nursing, oncology, rehabilitation and midwifery;
- continuing education in treatment of certain conditions and diseases, such as diabetes, asthma, heart failure and mental health conditions;
- continuing education in midwifery, obstetrics and maternity care; and
- continuing education or professional development in a range of subjects, including chemical and pharmaceuticals management and safe administration of medicine, infection control, CPR, occupational health and safety, life support, manual handling, fire education and computer literacy.

A list of postgraduate programs is provided in Appendix B.

### ***Staff involvement in delivery***

Hospitals estimated that almost 4000 staff were actively involved in delivering nursing education and training in 2004 — an average of 35 staff per hospital, and almost 9 members of staff per program. Over the course of the year, staff contributed 118 hours to delivering the average nursing program. In total, staff members at Australian private hospitals spent more than 43 000 hours of work delivering these programs.<sup>13</sup> Almost 83 per cent of staff hours were contributed at larger hospitals.

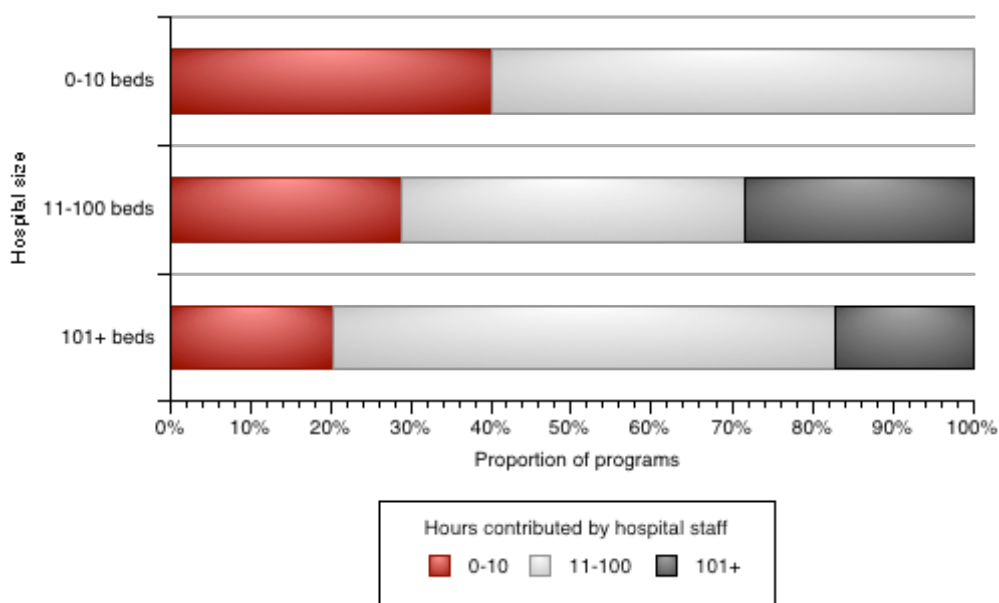
Figure 3.4 shows that more than 20 per cent of nursing programs required more than 100 hours of staff time, including 18 programs to which more than 500 staff hours were contributed.

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<sup>13</sup> Information on the number of staff involved was provided for 332 of the 388 nursing programs; estimates of hours of work contributed were provided for 276 programs.

Figure 3.4

**HOURS OF STAFF TIME CONTRIBUTED TO NURSING PROGRAMS, BY HOSPITAL SIZE, 2004**



Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

Larger hospitals contributed 145 hours of staff time to the average nursing program. Hospitals of 11 to 100 beds contributed an average of 69 hours per program. At the smallest hospitals, 33 hours per program were contributed.

### 3.4 Training of allied health staff

#### *Quantity of education and training*

A similar number of *allied health* programs were delivered at private hospitals in 2004 as the number of medical programs, but to significantly fewer students. Around 20 per cent of private hospitals provided education and training in areas of allied health. Almost 3000 allied health staff and students undertook a total of 117 different education and training programs at 33 hospitals. The average program involved 65 hours of formal ‘classroom’ delivery. In total, private hospitals provided about 193 000 student hours of allied health education and training.

Again, larger hospitals accounted for the vast majority of allied health education and training provided by private hospitals, particularly in terms of the number of participating staff and students. Table 3.4 shows that hospitals of more than 100 beds accounted for:<sup>14</sup>

- 70 per cent of all allied health programs provided in private hospitals;
- 92 per cent of all students and staff participating in allied health education and training;

<sup>14</sup> In each instance, proportions relate to those programs for which hospital size was reported.

- 81 per cent of all hours of formal classroom delivery; and
- 94 per cent of all student hours provided.

Table 3.5

**EDUCATION AND TRAINING OF ALLIED HEALTH STAFF: NUMBER OF STUDENTS, PROGRAMS AND HOURS OF DELIVERY, 2004**

Hospital size	Programs	Students	Total hours of delivery	Total student hours <sup>a</sup>
1-10 beds	4	16	640	4 260
11-100 beds	37	155	617	3 780
101+ beds	94	2 001	5 517	131 000
<b>Total<sup>b</sup></b>	<b>139</b>	<b>2 974</b>	<b>7 599</b>	<b>193 015</b>

(a): Total student hours is equal to the sum of total hours received by each student. For example, if 20 students take a 50-hour course, that represents 1000 student hours.

(b): Totals include hospitals that did not specify their number of beds.

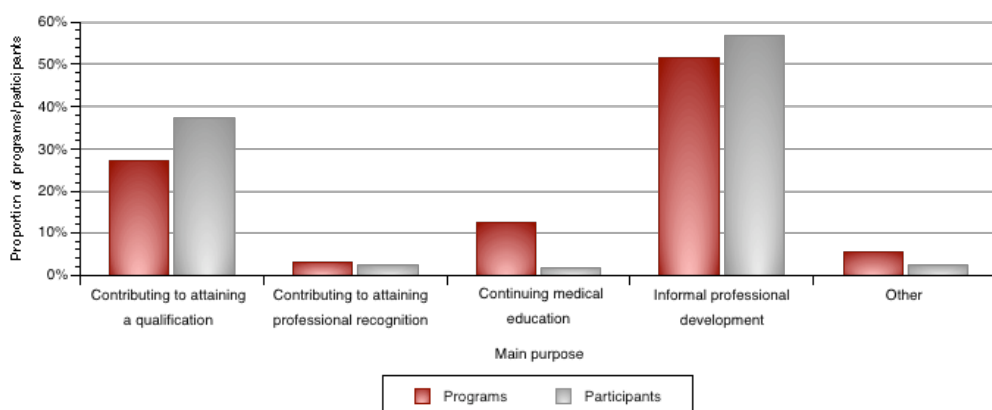
Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

*Type of programs*

Like nursing staff, the main reason that allied health staff and students undertake education and training programs at private hospitals is for informal professional development. Figure 3.5 shows that almost 52 per cent of staff and students participating in allied health programs did so for this reason. Twenty-seven per cent of participants were seeking to attain a qualification — a much higher proportion than for medical or nursing participants.

Figure 3.5

**MAIN PURPOSE FOR ALLIED HEALTH EDUCATION AND TRAINING IN PRIVATE HOSPITALS**



Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

As was the case with nursing, allied health education and training programs covered a very wide range of types of training and skills, including:

- physiotherapy — including both postgraduate courses and continuing medical education;
- nutrition and dietetics — including both postgraduate courses and continuing medical education;
- continuing medical education in pathology;
- continuing medical education in mental health assessment and treatment;
- compliance-related programs (occupational health and safety and workplace harassment and discrimination); and
- personal and professional development (e.g. leadership and management, career planning,

A list of postgraduate programs is provided in Appendix B.

### ***Staff involvement in delivery***

Hospitals estimated that 952 staff were actively involved in delivering allied health education and training in 2004 — an average of 29 staff per hospital, and 9 members of staff per program. Over the course of the year, staff contributed 110 hours of work to delivering the average allied health program. In total, staff members at Australian private hospitals spent 9350 hours of work delivering these programs.<sup>15</sup>

Larger hospitals represented over 80 per cent of total staff hours contributed to allied health programs, with the average program involving 140 hours of staff time. Hospitals with 11 to 100 beds represented 6 per cent of total staff hours, with 24 hours contributed to the average program. Two programs offered at the smallest hospitals amounted to 480 hours of staff time — 5 per cent of total staff hours.

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<sup>15</sup> Information on the number of staff involved was provided for 77 of the 110 allied health programs; estimates of hours of work contributed were provided for 62 programs.

## Chapter 4

# Benefits, costs and barriers

*This chapter details private hospitals' perceptions of the benefits and costs of providing education and training programs, the barriers to greater provision.*

### 4.1 Benefits

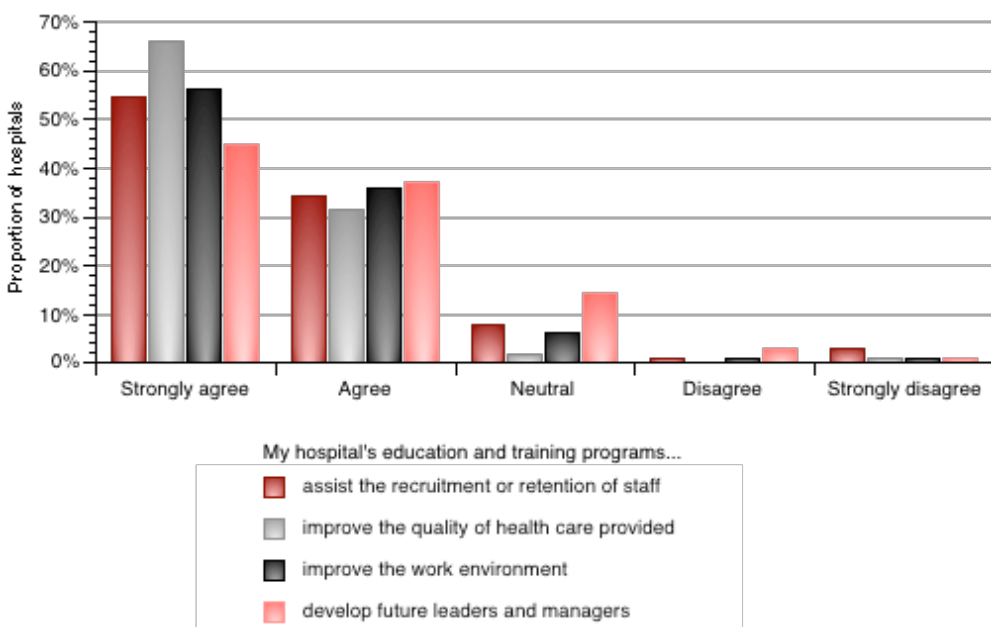
#### **Benefits to private hospitals and their patients**

Participating hospitals considered the education and training programs of the private hospital sector to have very positive outcomes. Figure 4.1 shows that:

- 97 per cent agreed programs improve the quality of health care provided;
- 88 per cent agreed that programs assist hospitals to recruit or retain staff;
- 92 per cent agreed that programs improve the work environment at hospitals; and
- 82 per cent agreed that programs develop future managers and leaders.

Figure 4.1

#### **HOSPITALS' VIEWS OF THE OUTCOMES OF EDUCATION AND TRAINING PROGRAMS**



Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

No more than 4 per cent of hospitals disagreed with any of the above statements.

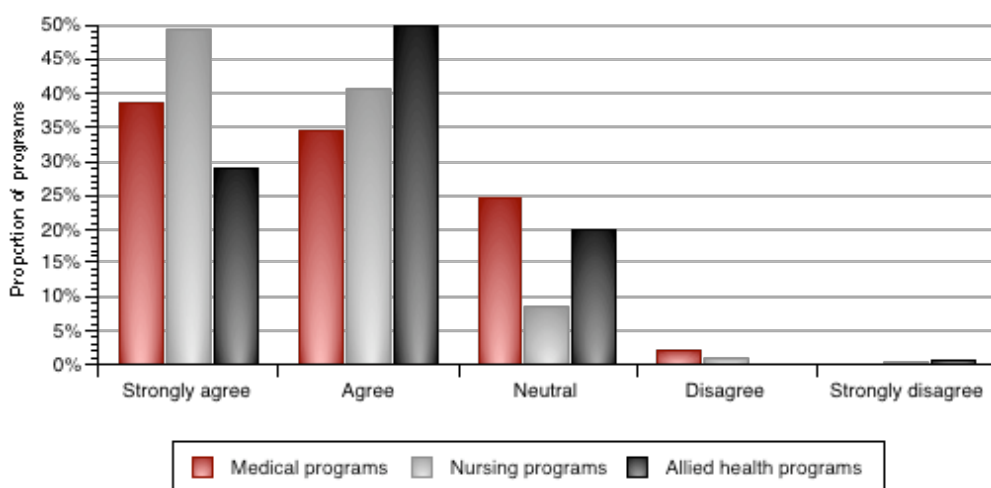
This positive response was consistently strong across hospitals of all sizes, from hospitals that offered education and training programs and from those that did not.

Participating hospitals were also asked whether each individual program of education and training assisted the hospital to recruit and retain staff. The response was similarly strong, with the following proportions of programs considered to have a positive impact on attracting staff (figure 4.2):

- 73 per cent of medical programs;
- 90 per cent of nursing programs; and
- 79 per cent of allied health programs.

Figure 4.2

**DO INDIVIDUAL PROGRAMS ASSIST HOSPITALS TO RECRUIT AND RETAIN STAFF?**



Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

***Contributions to the Australian health workforce***

Hospitals were invited to discuss how they believe the education and training activities of private hospitals contribute to the workforce of the Australian health system. Respondents identified a wide range of benefits, ranging from the knowledge gained by staff to the outcomes for patients. Among those most commonly discussed were:

- maintaining staff’s knowledge of legislative requirements and accreditation standards;
- updating staff’s knowledge of evidence-based clinical guidelines and best practice;
- developing specialist skills;
- developing management skills;
- promoting a culture of ongoing professional development;

- improving the quality of care provided to clients, including through promoting better communication with clients; and
- creating opportunities for networking, which help build better linkages between the public and private health systems.

Box 4.1 provides a selection of verbatim comments provided by hospitals.

Box 4.1

**SELECTED COMMENTS: HOW THE EDUCATION AND TRAINING PROGRAMS OF PRIVATE HOSPITALS CONTRIBUTE TO THE AUSTRALIAN HEALTH WORKFORCE**

'By providing education for the staff we can ensure that the workforce is practicing under "best practice" guidelines. If you have a hospital that provides high technology services you need to make sure that all the staff involved in the use of this technology is aware of the uses and benefits of this technology. A stable workforce is enhanced by the provision of education and this encourages the staff to stay at the hospital.'

- medium-sized Sydney hospital

'All training and education programs add to the vale of the profession as a whole. The more skilled the nursing workforce, the less likely are adverse outcomes. Staff who are confident of their knowledge and skill will readily support more novice practitioners and intervene when necessary. [These benefits are yielded by both the private and public sectors because] nursing is a mobile workforce, and skills are readily transportable.'

- medium-sized ACT hospital

'Meeting organisational needs through the professional development of staff enables the business to continue to grow. This in turn allows greater security for staff and further investment into the business.'

- regional Queensland day surgery

'Accredited postgraduate training experience for medical practitioners provided by private hospitals contributes to the achievement of specialty qualifications by those participating. The private hospital system has the potential to contribute significantly to the training of medical practitioners for specialty qualifications as it has significant caseload in a wide range of specialities. This potential is probably currently not being fully realised as the Colleges have, to date, focussed on accredited training posts in the public hospital system. With the current limitations on elective surgery, medical and rehabilitation capacity being experienced by many public hospitals, there is an opportunity ... for the private hospital sector to contribute to a greater extent to this training. For this to be achieved formal funding for such programs is required.'

- large Sydney hospital

'Private facilities provide alternatives for supervised education and experience, ... educat[ing] staff in current practices and in changes occurring within the various specialty fields that we operate. Private facilities often have very highly qualified and skilled practitioners that are interested in contributing to the education of undergraduates and to the continuing education of graduates. They provide a venue for gaining clinical experience that may vary from the public sector.'

- medium-sized Queensland hospital

'There is a considerable wealth of knowledge in the private sector workforce. All staff within our organisation attend our extensive mandatory training program. Attendance at in-service sessions is voluntary and we have an excellent response to these sessions. Mental Health workers strive to improve the quality of the service they provide and utilise education as one means of improvement. Staff use the information from these sessions to improve their practice and network with other agencies and staff. It also provides an opportunity for staff to keep abreast of the changes within current treatment practices, medications and outcomes. Providing our services to the 6th year medical and nursing students provides an opportunity for them to be a part of the private sector and to experience how it works, this also provides us with the opportunities to review our practices. Feedback we have received indicates this is a valuable and rewarding experience for the students.'

- Large Adelaide hospital

Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

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## 4.2 Costs

Hospitals estimated that providing education and training for medical and health professionals cost them a total of \$20.2 million in 2004. This equates to an average cost of about \$24 200 per program, and about \$174 400 per hospital.

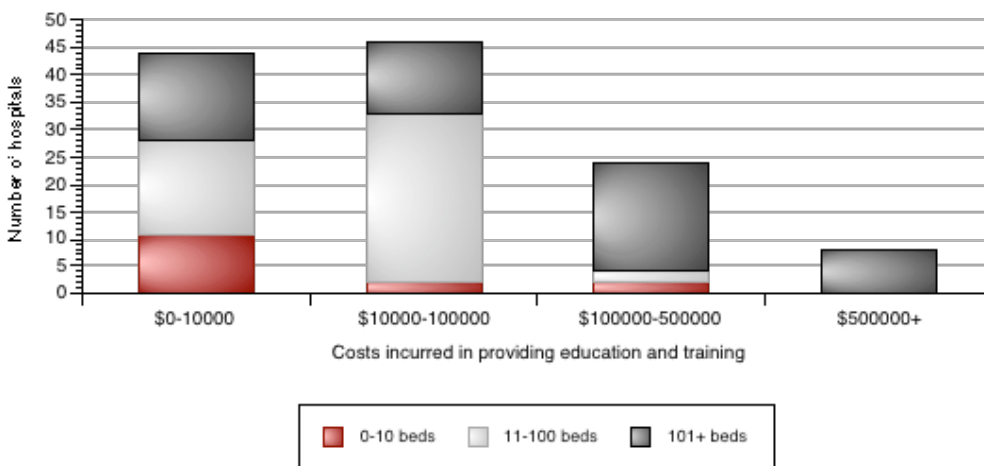
The education and training costs incurred by hospitals tend to increase with hospital size. Figure 4.3 shows that the majority of:

- smaller hospitals spent \$10 000 or less on education and training;
- hospitals with 11 to 100 beds incurred costs of between \$10 000 and \$100 000; and
- larger hospitals spent more than \$100 000.

Four larger hospitals spent \$1 million or more in providing their education and training programs.

Figure 4.3

### COSTS INCURRED BY HOSPITALS IN PROVIDING EDUCATION AND TRAINING, BY HOSPITAL SIZE



Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

### Net cost

The figures above refer to the gross costs of providing education and training. Some hospitals received fees for providing programs, which need to be subtracted from gross costs to obtain an accurate measure of the financial impact of education and training provision. Twenty-seven hospitals with education and training programs indicated that they received some fees for providing those programs. These hospitals received a total of \$1.3 million in fees in 2004. Four larger hospitals in New South Wales and Victoria accounted for more than \$1 million of these fees.

Table 4.1 shows that more than three-quarters of fees were paid to hospitals in New South Wales. Hospitals that are Approved Training Facilities affiliated with a university received about two-thirds of fees.

Table 4.1

**FEE RECEIPTS BY STATE, 2004**

State	\$	% of total
New South Wales	1 013 000	77%
Victoria	185 100	14%
Queensland	31 000	2%
South Australia	11 500	1%
Western Australia	61 000	5%
Tasmania	-	-
ACT	8 000	1%
Northern Territory	-	-
<b>Total</b>	<b>1 309 600</b>	<b>100%</b>

Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

In total the net cost of providing education and training to the private hospital sector was approximately \$18.9 million.

### 4.3 Barriers to provision

Hospitals were asked what factors, if any, had contributed to them not providing any education and training programs in 2004. The responses varied according to the size of the organisation, with the exceptions of cost and lack of access to funding from external sources (e.g. government, private health insurers), which were cited by hospitals of all sizes.

Table 4.1 summarises hospitals' responses.

Table 4.2

**BARRIERS TO HOSPITALS PROVIDING EDUCATION AND TRAINING PROGRAMS**

Hospital size	Barriers cited (in order of frequency)
0-10 beds	<ol style="list-style-type: none"> <li>1. Size. Many smaller hospitals and day surgeries indicated that they lacked the capacity or facilities to provide education and training.</li> <li>2. Cost constraints. Often cited in combination with size.</li> <li>3. Casual staff: Some indicated they did not provide education and training because most of all of their staff were casual.</li> </ol>
11-100 beds	<ol style="list-style-type: none"> <li>1. Cost. Most medium-sized hospitals indicated that the costs involved with training, in combination with private hospitals' lack of access to external funding for education and training (e.g. government, private health insurers), was the main reason for not providing programs.</li> <li>2. Size. Again, often cited in combination with cost.</li> <li>3. Obtained externally. Several hospitals indicated that, while they did not provide education and training programs themselves, their staff did access training provided elsewhere.</li> </ol>
101+ beds	<ol style="list-style-type: none"> <li>1. Availability of staff. Many larger hospitals indicated that they had limited capacity or insufficient flexibility in rostering to release staff to participate in education and training.</li> <li>2. Cost and lack of access to external funding.</li> </ol>

Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

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## *Appendix A*

### Participating hospitals

Box A.1 provides a list of the hospitals and day surgeries that agreed to identify themselves when responding to the survey.

Box A.1

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#### **RESPONDENTS TO SURVEY**

Avenue Private Hospital  
Beleura Private Hospital  
Belmont Private Hospital  
Berkeley Care Private Hospital  
Brindabella Endoscopy Centre  
Burnside War Memorial Hospital  
Cabrini Health  
Cairns Private  
Calvary Health Care  
Calvary Health Care Tasmania  
Canberra Eye Hospital  
Chesterville Day Hospital  
City West Day Surgery  
Collaborative Health Education Research Centre, St Vincent's Hospital, Lismore  
Cooloola Community Private Hospital  
Diagnostic Endoscopy Centre  
Eppie Arcampbell, CDD  
Epworth Hospital  
Figtree Private Hospital  
Freemasons Hospital  
Friendly Society Private Hospital  
Glenelg Day Surgery  
Glengarry Hospital  
Healthscope — 27 hospitals (not individually identified)  
Hill Day Surgery  
Hills Private Hospital  
Hollywood Private Hospital  
Hopetoun Rehabilitation Hospital  
Hunter Valley Private Hospital  
In Vitro Private Hospital  
Jean Calvin Hospital  
John James Memorial Hospital  
Knox Hospital  
Lambton Ro Day Surgery  
Lingard Private Hospital  
Linley Clinic

Box A.1 (continued)

**RESPONDENTS TO SURVEY**

Maryvale Private Hospital  
Mater Misericordiae Hospital Townsville Limited  
Mater Private  
Mitcham Private Hospital  
Monash Surgical Private Hospital  
Mount Hospital  
North Shore Private Hospital  
Peninsula Private Hospital  
Pittsworth Hospital  
Pittwater Day Surgery  
Poplars Private Hospital  
Ramsay Health Care SA (Psychiatry)  
Sach Day Surgery  
South Burnett Community Private Hospital  
St Andrews Hospital  
St John of God Health Care, Ballarat  
St John of God Health Care, National Office  
St John of God Health Care, Subiaco  
St John of God Health Care, Warrnambool  
St Stephen's Private Hospital, Maryborough  
St Vincent's Private Hospital Darlinghurst NSW  
Strathfield Private Hospital  
Sunshine Coast Private Hospital  
Sydney Adventist Hospital  
Sydney Eye Day Surgery  
Tamara Private Hospital  
Toowong Private Hospital  
Tri Rhosen Day Hospital  
Wagga Endoscopy Centre  
Warners Bay Private Hospital  
Wesley Hospital  
Westmead Private Hospital

Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.

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## Appendix B

# Postgraduate programs provided by participating hospitals

Table B.1 provides a list of the postgraduate programs provided by participating hospitals.

Table B.1

### POSTGRADUATE PROGRAMS OFFERED BY PARTICIPATING HOSPITALS

Type	Program name
Medical	International Postgraduate Training Fellowship in Hand Surgery Postgraduate Specialist Training for Dermatology
Nursing	Master of Nursing Health Postgraduate Certificate in Nursing Science (Cardiac) Postgraduate Certificate in Nursing Science (Intensive Care) Postgraduate Certificate in Nursing Science (Perioperative Nursing) Postgraduate Certificate in Orthopaedics Postgraduate Diploma in Advanced Clinical Nursing Postgraduate Diploma in Critical Care Postgraduate Diploma in Mental Health Postgraduate Diploma in Midwifery Postgraduate Diploma in Nursing Postgraduate Diploma in Nursing Health Postgraduate Diploma in Operating Theatre Postgraduate Diploma in Perioperative Care
Allied health	Clinical Master of Psychology Master of Manipulative Therapy Postgraduate Diploma in Dietetics

Source: The Allen Consulting Group and The Ryder Self Group 2004, responses to Review of Education and Training of Health and Medical Professionals in Private Hospitals and Day Surgeries.