



THE UNIVERSITY OF
MELBOURNE



SPECIALIST DIGITAL HEALTH WORKFORCE CENSUS SUMMARY REPORT

20
23

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ACKNOWLEDGEMENTS

The 2023 Specialist Digital Health Workforce Census was conducted by RMIT University and The University of Melbourne.

We thank all the individuals who promoted and completed the 2023 Census.

This research is supported by the Digital Health Cooperative Research Centre Limited (DHCRC) and the Department of Health and Aged Care, Telstra Health, Australasian Institute of Digital Health, Australian Library and Information Association, and the Health Information Management Association of Australia. DHCRC is funded under the Commonwealth Government Cooperative Research Centres Program.

We acknowledge the Aboriginal and Torres Strait Islander people as the traditional custodians of the country throughout Australia, and their continuing connection to land, culture and community, including the places where we live and work. We acknowledge the importance of the Aboriginal and Torres Strait Islander peoples in Australia's health and care sector.

How to cite this report:

Butler-Henderson, K., Gray, K., & Arabi, S. (2023). Specialist digital health workforce census: Summary report 2023. RMIT University. DOI: 10.25439/rmt.24438715. <https://www.rmit.edu.au/partner/hubs/digital-health-hub>



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INTRODUCTION

This report summarises Australian findings from the Specialist Digital Health Workforce Census conducted from 1 July to 13 August, 2023. In 2023, the Census targeted any individual anywhere in the world who self-identified as part of this workforce. 1,103 people responded. The 870 responses from those who reside in Australia are summarised in this report.

The Census is a snapshot that counts and profiles the current workforce, identifies workforce education and career patterns, indicates workforce structures and highlights workforce shortfalls. The Census includes anyone whose main role is to work with health data, health information or health knowledge, with a responsibility to perform functions such as: analysing, designing, developing, implementing, maintaining, managing, operating, evaluating, or governing data, technology, systems, and services.

The findings continue to advance our understanding of an ill-defined section of the workforce. These human resources, the backbone for critical communication pathways and evidence-informed decision-making, can be characterised as **HIDDIN: Health Informatics, Digital Data, Information, and Knowledge workers**. The health system is increasingly reliant on this workforce to realise benefits from large health IT investments and to create value from increasing volumes of electronic health data.

The Census is an ongoing research program designed to collect global workforce data at regular intervals. The Census instrument and processes have been developed through rigorous and consultative methods. Detailed data analyses by principal investigators are available in peer-reviewed sources, and raw data are available for others to analyse.

For further information about the Census:

Butler-Henderson, K., Gray, K., Greenfield, D., Low, S., Gilbert, C., Ritchie, A., Trujillo, M., Bennett, V., Brophy, J., Schaper, L. (2017). Development of a national census of the health information workforce: Expert panel recommendations. *Studies in Health Technology and Informatics*, vol. 239, pp. 8-13. DOI:10.3233/978-1-61499-783-2-8 (<http://ebooks.iospress.nl/publication/46964>).

LinkedIn
<https://www.linkedin.com/company/australian-health-information-workforce-census/>

Website
<https://www.rmit.edu.au/partner/hubs/digital-health-hub>

Email
digital.health.hub@rmit.edu.au

KEY FINDINGS

DEMOGRAPHICS

The specialist digital health workforce is an older, largely female workforce. Yet, these demographics change when examined by occupational specialty area.

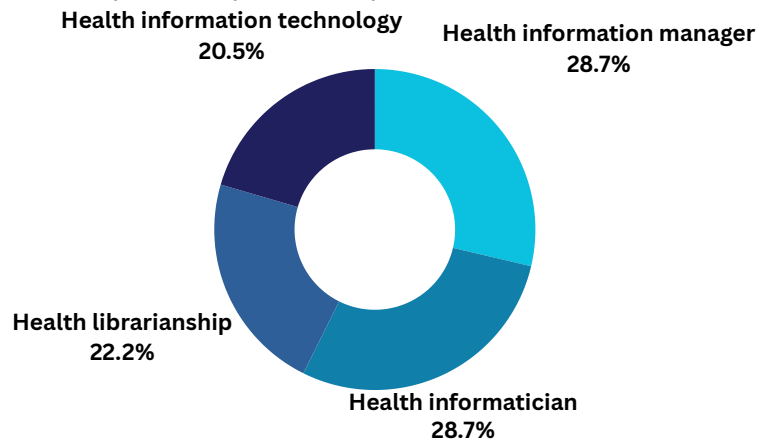
Occupational area	Avg. age	% Male
Health informatics	50	41%
Health information management	50	18%
Health information technology	49	46%
Health librarianship	53	8%

CHARACTERISTICS OF THE WORKFORCE



OCCUPATIONAL CATEGORY

The top 4 occupational specialties are:



3 hours

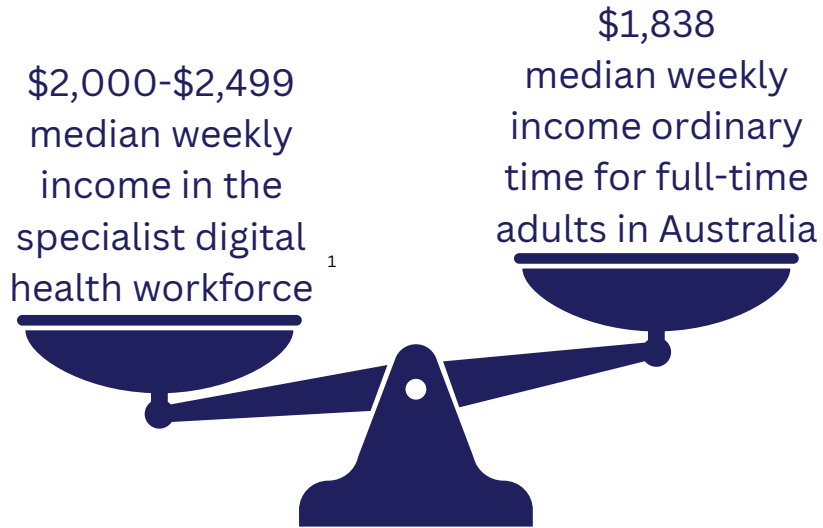
is the number of additional average hours worked per week without pay

27.2%

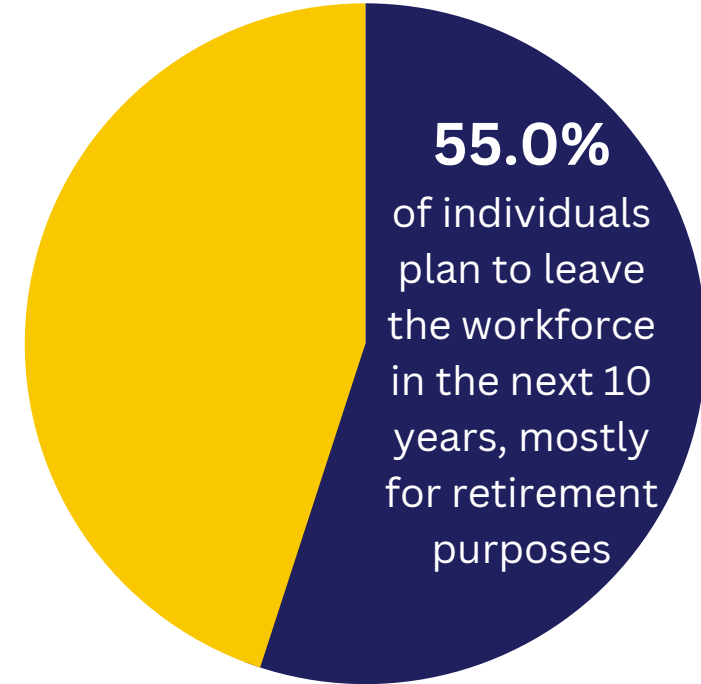
of individuals reported they have a certification, with nearly half being a Certified Health Informatician Australasia (CHIA)

KEY FINDINGS

WEEKLY REMUNERATION



PLANS TO REMAIN IN THE WORKFORCE

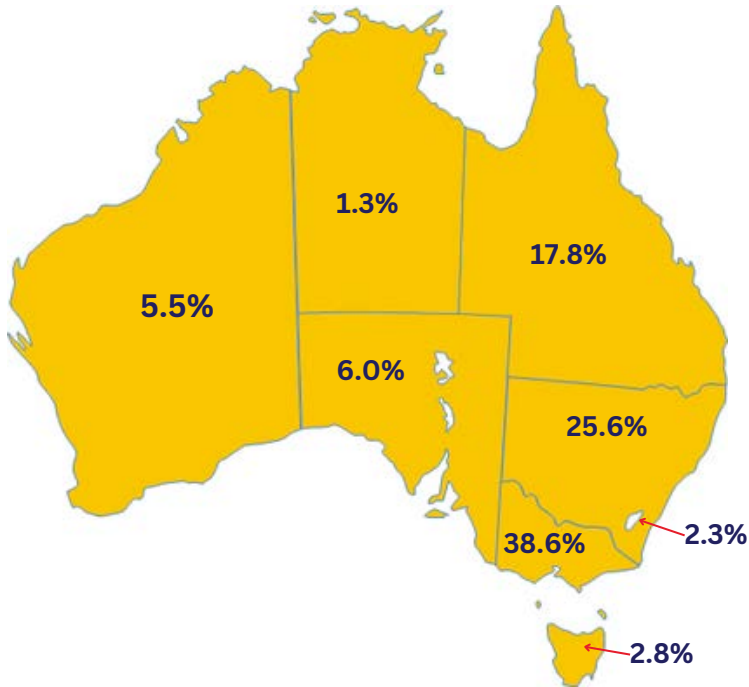


The workforce is largely young in digital health experience but has more general health workforce experience

1. Australian Bureau of Statistics. Average weekly earnings, Australia [Internet]. [place unknown]: ABS; 2023. [cited 2023 Oct 17]. Available from: <https://www.abs.gov.au/statistics/labour/earnings-and-working-conditions/average-weekly-earnings-australia/may-2023>

WORKFORCE DEMOGRAPHICS

RESIDENTIAL STATE



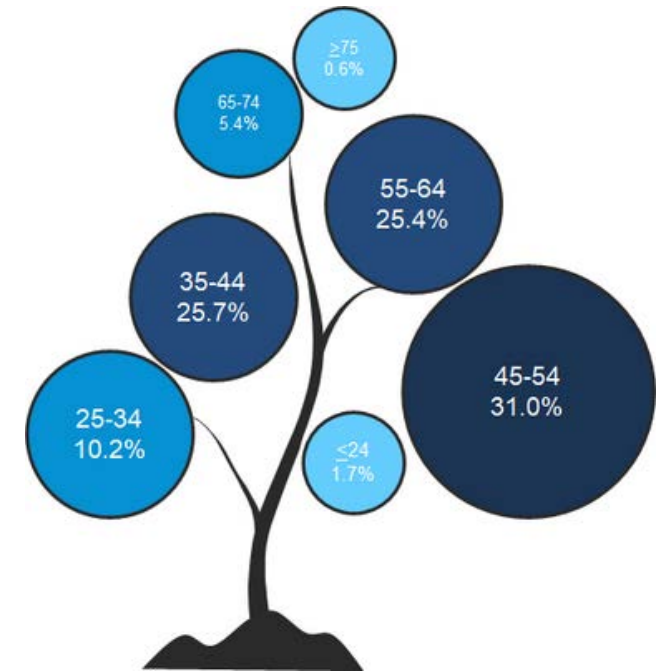
3.3%

of individuals identify as Aboriginal or Torres Strait Islander

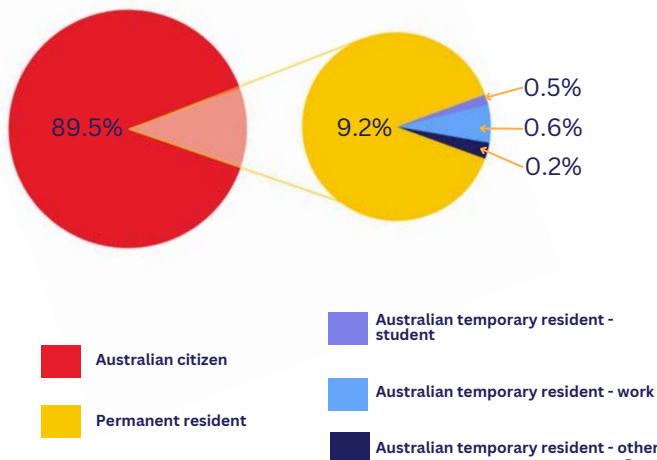
3.7%

of individuals identified as having a disability or health condition that limits their participation in activities

AGE GROUP



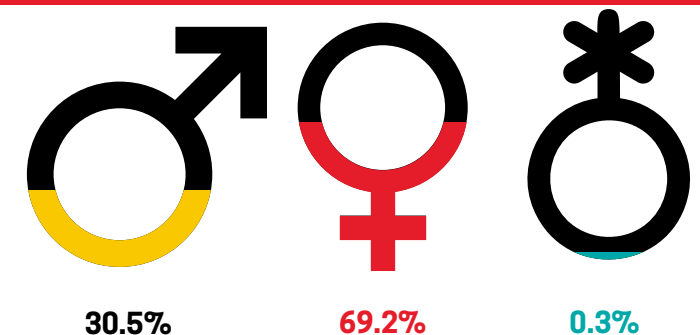
CITIZENSHIP STATUS



70.2%

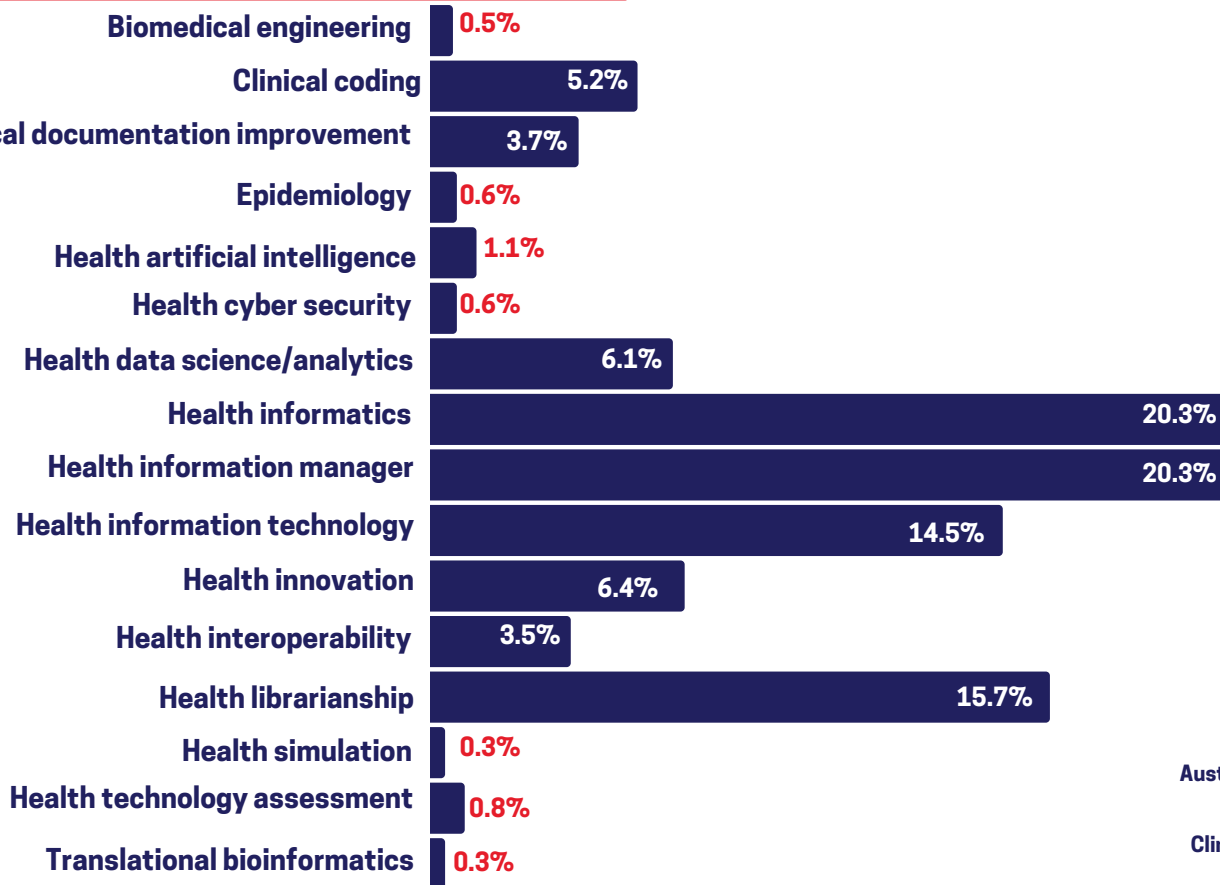
of individuals were born in Australia

GENDER IDENTITY



PROFESSIONAL AFFILIATIONS

OCCUPATIONAL SPECIALTY



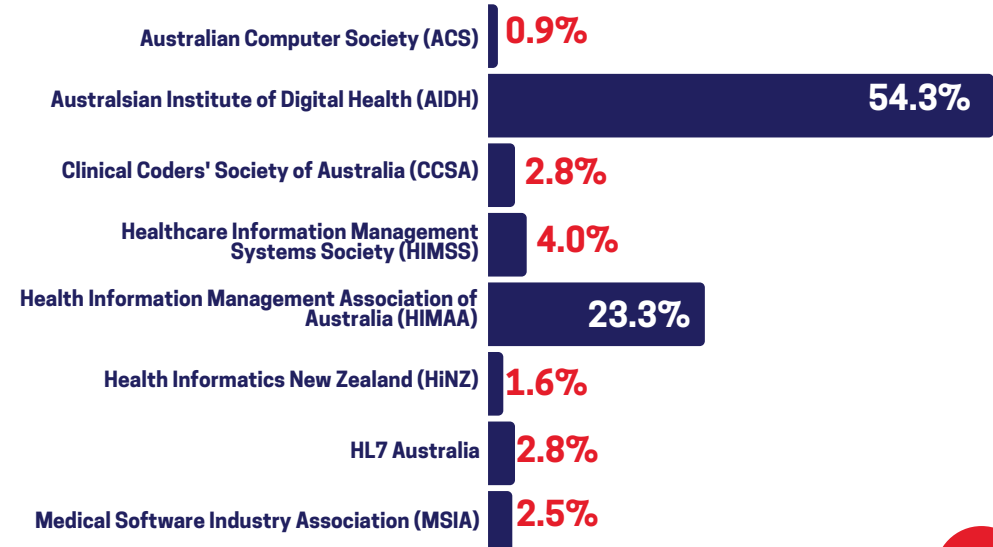
26.8%

of individuals are currently a registered health practitioner

45.9%

of individuals do not belong to any professional or industry association

MEMBER OF PEAK BODY



WORK SETTING AND REMUNERATION

68.1%

individuals work in only one digital health role

7.3%

individuals work in both a digital health role and another health role

3.7%

individuals are not currently working in health

On average, they work more hours than they are paid to work

Average weekly hours paid work

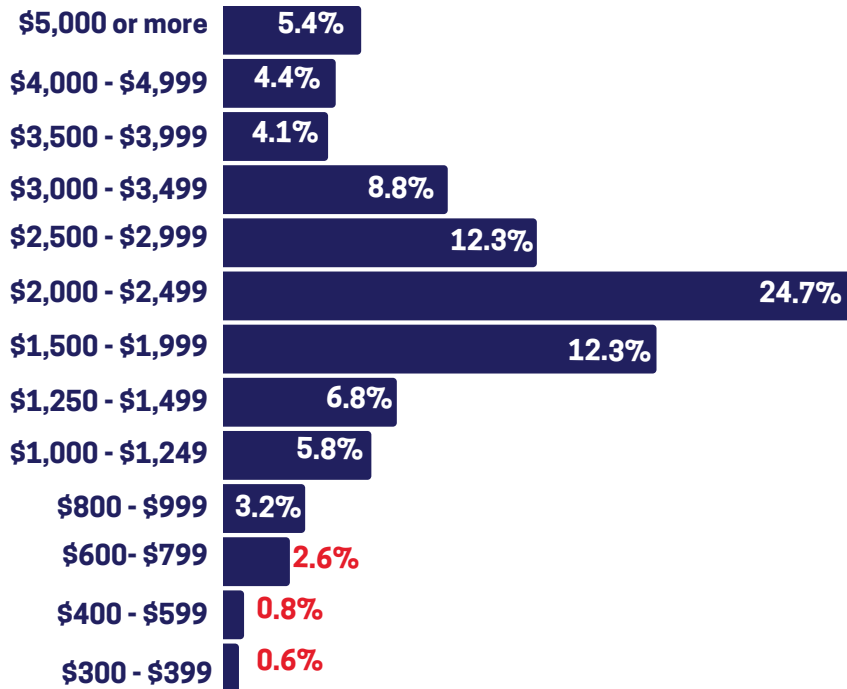
33.2



36.5

Average weekly hours actually work

WEEKLY REMUNERATION*



*before tax

18.2%
of individuals are actively seeking work in digital health

WORK SETTING AND REMUNERATION

3.7%
of individuals work in
multiple states



Public
68.9%



Private
18.8%

76.2%

of roles are
permanent

ORGANISATION TYPE

54.6%
classified their role
as Professional

39.9%
classified their role
as Manager



**Public/Private
Partnership**
2.9%



Not for Profit
9.4%

2.4%

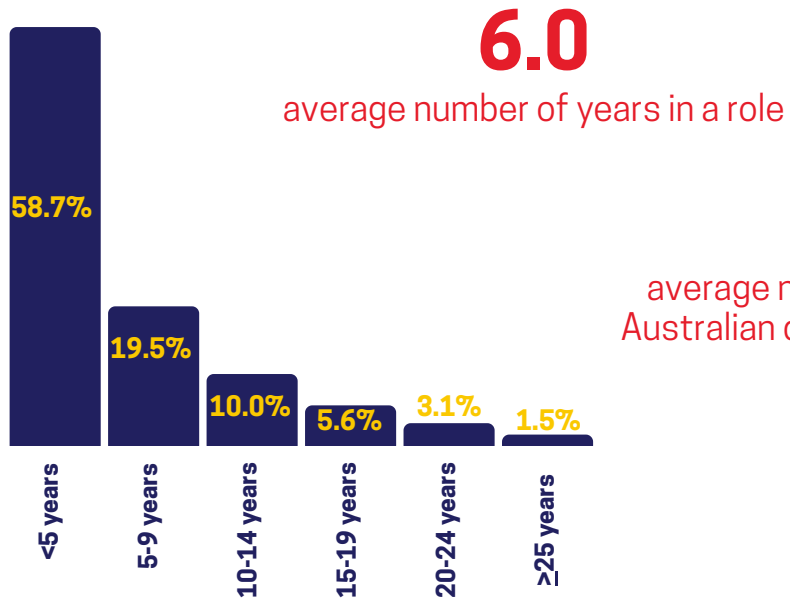
of individuals are
self-employed

21.4%

of individuals are
working in a role
that is a contract or
casual

WORK EXPERIENCE AND OUTLOOK

YEARS IN CURRENT PAID ROLE



6.0

average number of years in a role

12.6

average number of years in the Australian digital health workforce

25.1%

of individuals undertake volunteer work in the digital health field

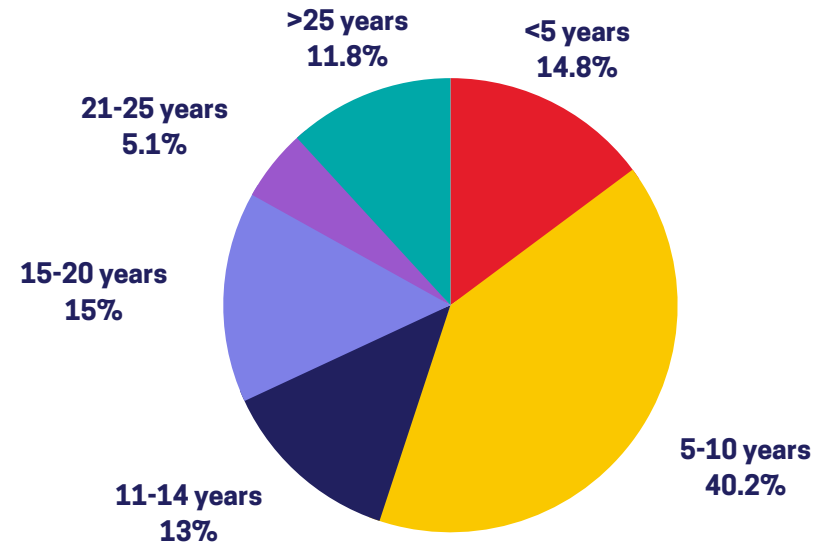
46.0%

of individuals plan to stop volunteering in the next 5 years

71.9%

The number one reason for leaving the workforce was retirement

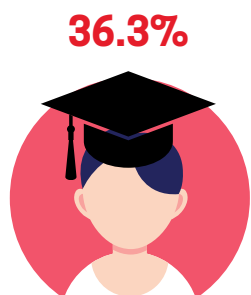
TIME PLANNED TO REMAIN IN PAID WORKFORCE



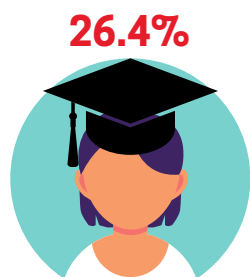
QUALIFICATIONS & CREDENTIALS

58.9%

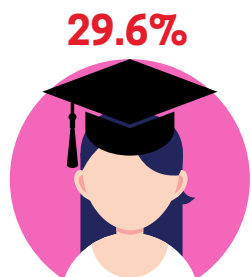
of individuals do not hold a tertiary qualification in digital health



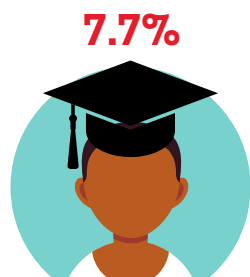
Bachelor Degree



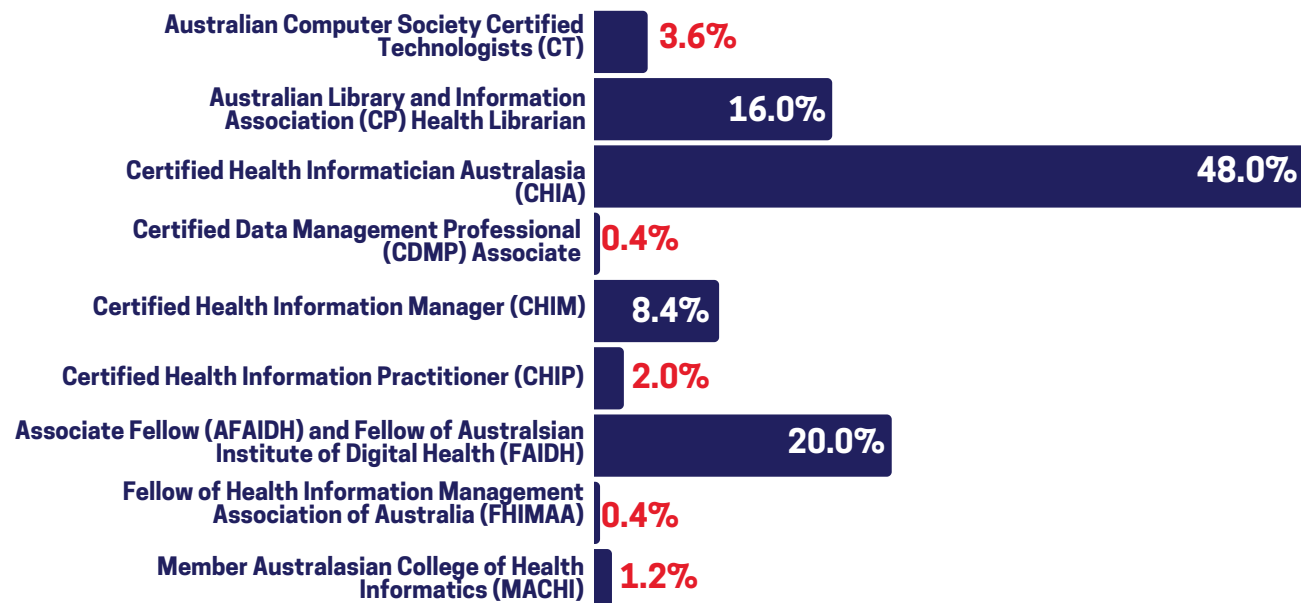
Grad. Certificate or Grad. Diploma



Masters



Doctorate



PROFESSIONAL CERTIFICATION

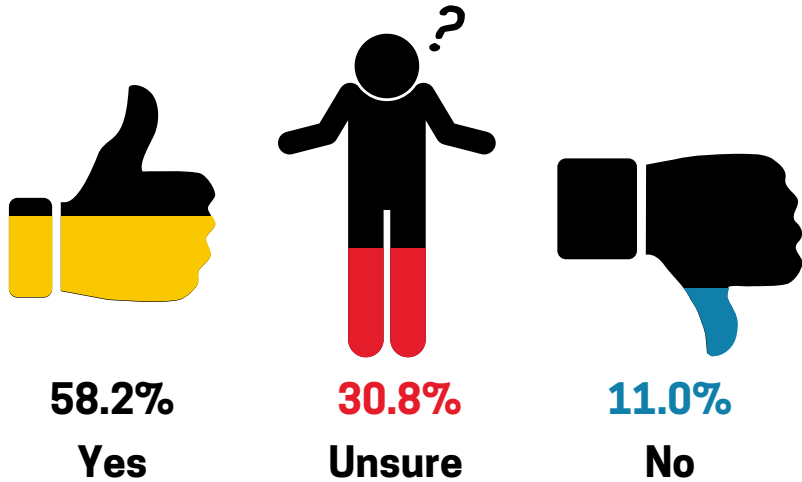
72.8%

of individuals do not hold a digital health credential

HIGHEST TERTIARY QUALIFICATION RELATED TO DIGITAL HEALTH

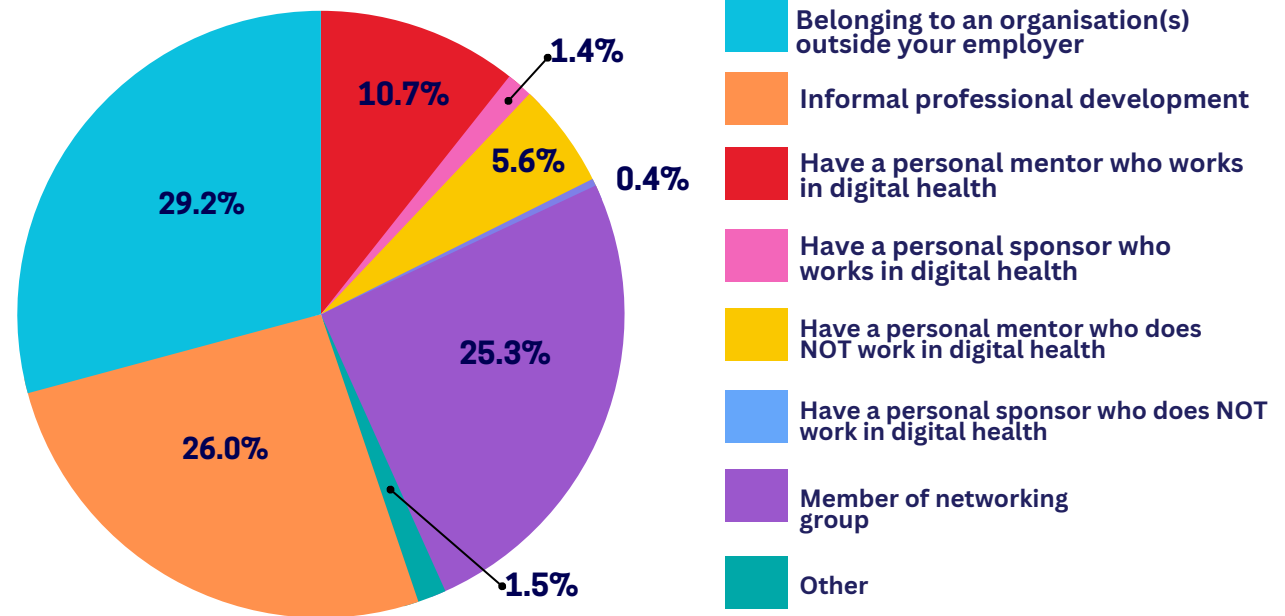
PROFESSIONAL AND CAREER DEVELOPMENT

INTENTION TO UNDERTAKE PROFESSIONAL DEVELOPMENT IN THE NEXT 3 YEARS



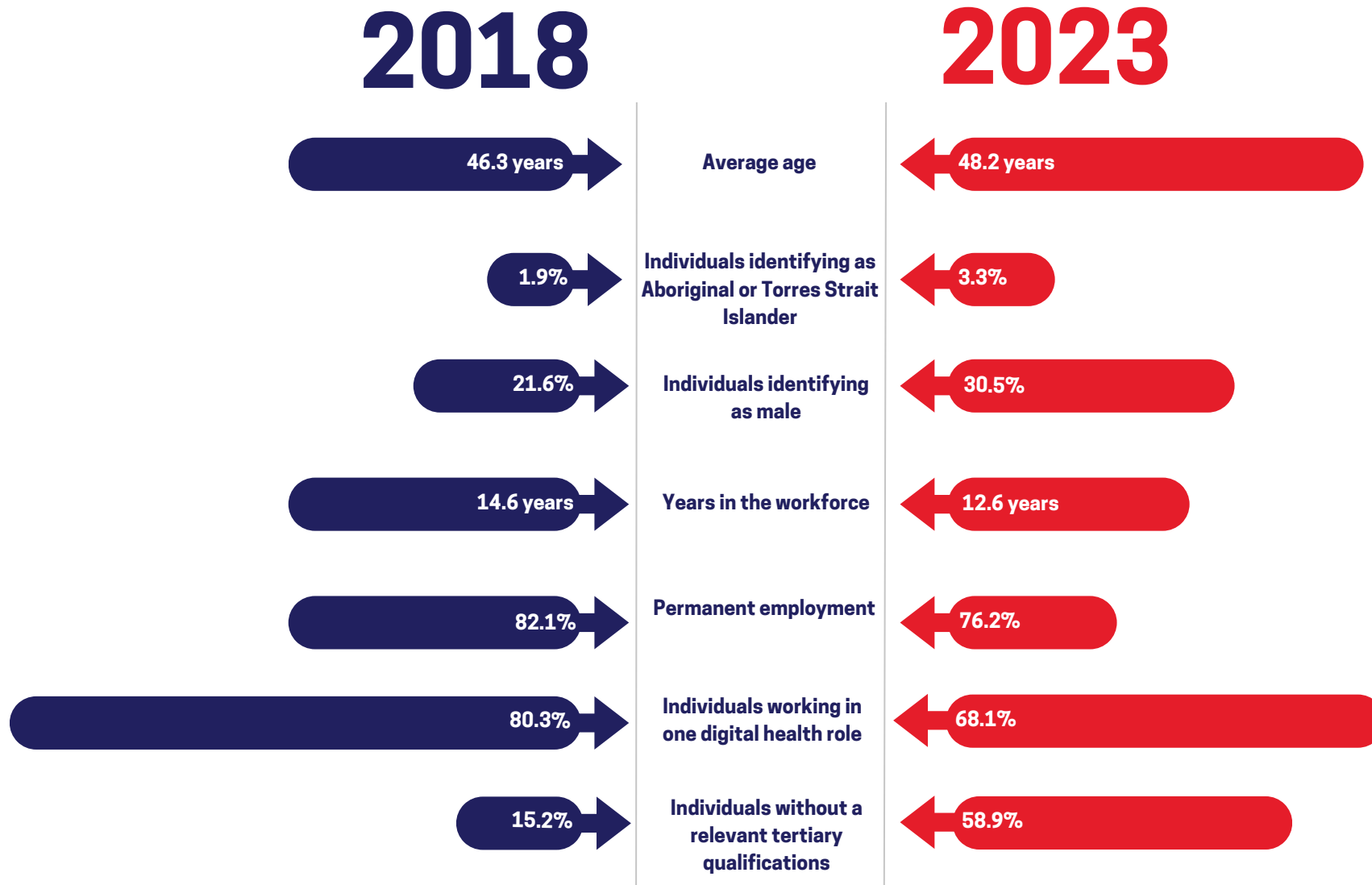
76.1%
of individuals have independently sought out or created opportunities for career development and growth

CAREER DEVELOPMENT & GROWTH



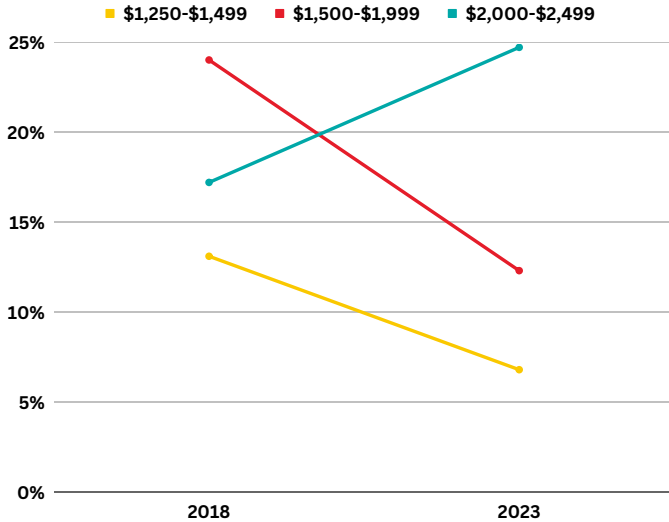
WORKFORCE CHANGES SINCE 2018

It is acknowledged the observed changes may be due to the reach of the census and those who have self-identified. Over time it is envisioned with greater participation in the census, we will gain a more representative view of the workforce.



WORKFORCE CHANGES SINCE 2018

WEEKLY REMUNERATION

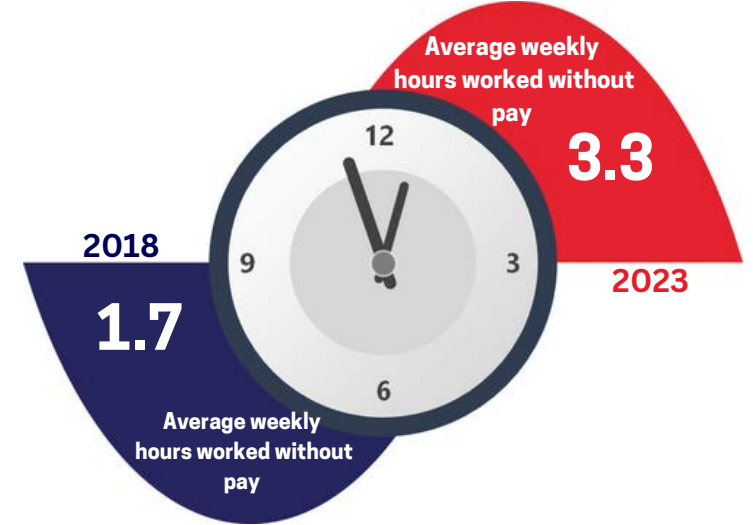


84.8%
2018

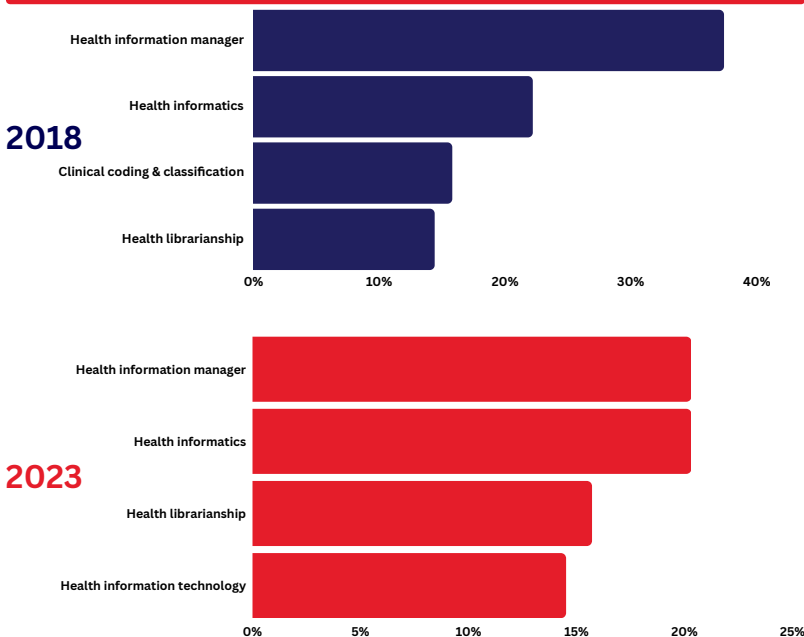
Identify role as professional or manager

94.5%
2023

HOURS ACTUALLY WORKED



TOP OCCUPATIONAL SPECIALTIES



12.3%
2018

Currently a registered health practitioner

26.8%
2023

CERTIFICATION

