

# PULSE TAKE SKILL SHORTAGE SURVEY: RESEARCH METHODOLOGY

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## Purpose

The Australian Private Hospitals Association (APHA) will undertake a 'pulse take' skill shortage survey annually to assess skills shortages in the private sector. The methodology is applied consistently across occupations and locations to provide information about private hospital employers' ability to recruit the skilled workers they need.

It does not identify skill gaps in an employer's existing workforce.

The skill shortage research meets a need for information about skill needs on a national and state/territory basis in the private hospitals sector. Results of the survey will underpin APHA workforce policy and advocacy to government on behalf of the private hospitals sector.

Results will be de-identified and made publically available if publishable.

The APHA pulse take survey has been designed to be broadly comparable to the Australian Government Department of Employment, Skills, Small and Family Business' (DESSFB) Survey of Employers who have Recently Advertised (SERA).

The APHA pulse take survey will be collecting two kinds of information about employers' experiences recruiting skilled workers.

- The first is qualitative information from discussions with the APHA Workforce Taskforce to identify key labour market 'pain points' for the private hospital sector.
- The second is quantifiable data about employers' recruitment experiences, including the proportion of vacancies filled and the number of applicants, qualified applicants and suitable applicants. This provides the basis for comparisons over time and analysis across states/territories and occupations.

The APHA pulse take survey will be undertaken for selected occupations defined in the Australian and New Zealand Standard Classification of Occupations (ANZSCO), which is also used by the SERA and the Australian Bureau of Statistics (ABS) for reporting of occupational statistics. The survey will be generally conducted at the six digit level of ANZSCO.

While occupational coverage might vary based on APHA Workforce Taskforce feedback, it was decided in June 2019 to limit the survey to a core 10-15 occupations.

## **APHA pulse take survey**

The APHA pulse take survey is an Excel-based survey of APHA members who have recently advertised vacancies in selected skilled occupations to determine their experiences recruiting.

The APHA pulse take survey will be conducted annually by the APHA Secretariat to:

- gather information from private hospital employers who have recently advertised vacancies for skilled workers and who are therefore in a good position to comment on current recruitment
- provide a consistent methodology across states and territories and occupations, which can be analysed over time to determine trends in skilled labour markets.

### **Main elements of the APHA pulse take survey**

Occupations are assessed annually. The APHA will contact all members via email and APHA bulletins, and members who have recently advertised a vacancy (or vacancies) for the occupations being assessed are encouraged to self-select to participate in the survey.

- For occupations where the number of advertised vacancies identified in the research period is inadequate to make a sound assessment of the labour market, APHA may follow up directly with private hospital employers to discuss their recruitment experiences and expectations.
- The survey is distributed as an Excel spreadsheet to all APHA members.
- Core information will be collected through the survey tool (attachment 1) about the skill and qualification requirements of the position, the number of jobs available, whether vacancies were filled, the number of applicants, and suitable applicants and whether visa pathways were used.

To reduce the influence of seasonal factors as far as possible, the APHA will conduct the survey at the same time each year. The APHA pulse take survey will cover the months March–May.

In some circumstances, if evidence-based information is urgently needed at another time of the year regarding a specific occupation (whether included in the original survey or not) the APHA Workforce Taskforce may decide a sub-survey needs to be conducted outside the set timeframe for the survey.

## **Methodology**

This methodology is modified from the SERA methodology to suit the specific needs of the APHA pulse take survey.

### **Sample size and distribution of sample**

All APHA members will be contacted and invited to participate in the APHA pulse take survey.

Participation of the survey is voluntary. The APHA will seek to encourage as many members as possible to participate to ensure an appropriate sample of private hospitals from different areas of Australia participate.

### **Survey collection period and submission deadline**

The survey collection period is the timeframe that determines which advertised positions will be captured. In 2020, this collection period will be the months of March, April and May.

The submission deadline will be the date the APHA requests the return of the completed survey. The submission deadline will need to accommodate the 'vacancy filled' survey question, and will therefore be at least four weeks (plus processing time) after the close of the collection period.

### **Follow up with non-responders**

The APHA will contact all members prior to the collection period, once during the collection period, and once just before the deadline for submission. At the submission deadline, the APHA will assess the responses received and determine whether the sample size is reasonably spread out between:

- Hospital groups and independent hospitals
- Day and overnight hospitals
- States and territories
- Metropolitan and non-metropolitan.

If one or more of the above needs a higher response rate, the APHA may contact members directly to seek further survey responses.

## **Definitions**

### **What advertisements should be included?**

Advertisements must be for a specific position offered for paid work from the list of occupations provided by the APHA. Advertisements for self-employment, partnerships or agency staff are excluded.

Vacancies advertised by recruitment agencies are included in the APHA pulse take survey if they are for an actual vacancy with a particular private hospital rather than a general 'canvassing' advertisement.

If a private hospital is experiencing specific pain points in clinical vacancies not specified in the list of occupations, they are encouraged to identify these through manually entering the occupation in the survey tool.

### **Definition of applicants and suitable applicants**

The *number of applicants* is the number of people who applied for the position.

A *suitable applicant* is one who has the skills, experience and qualifications needed to undertake the advertised position. This may take into consideration 'soft' or non-technical skills. In general, the number of applicants considered to be suitable is based on the private hospital's assessment of suitability. For the purpose of the APHA pulse take survey, a private hospital may interpret 'suitable' to be the same as 'short listed'.

### **When is a vacancy filled?**

A vacancy is considered to be filled on the basis that someone was employed in the position four weeks after the vacancy was advertised/applications closed. For this reason, the survey submission deadline will be more than four weeks after the close of the survey 'collection period'.

The period after which a vacancy is assessed is to some extent arbitrary, although it is reasonable to expect private hospitals would have, in most cases, completed the recruitment process in four weeks.

Setting a defined time for vacancy filling gives the advantage of a simple and consistent benchmark of measuring whether a vacancy is filled so data are consistent across occupations and between states and territories, and over time.

## **Trouble shooting**

### **Multiple vacancies**

Employers sometimes advertise multiple vacancies without having a definite number of positions in mind. In such cases, the private hospital should enter their best estimate of the number of vacancies available.

### **Incomplete recruitment exercises**

In some cases, a private hospital may not have completed a recruitment exercise within four weeks for administrative reasons; for example, they have not finalised formal interviews or have called several promising applicants for a second round of interviews. In this case, the APHA may make arrangements to re-contact the private hospital when the result of the interview process is known. If this is not practicable, the APHA can record the vacancy as filled if the employer is highly confident of filling the vacancy from that recruitment round. If the employer is unsure of the result, the vacancy is excluded from the survey.

## **Collection and presentation of results**

### **Survey results**

APHA pulse take survey results are not intended as a measure of the degree of shortage and are not statistically precise. Reflecting this, figures are quoted in broad terms, but may be compared with previous results where available.

While the availability of quantitative data varies from occupation to occupation, relevant and available information including that outlined under 'demand and supply analysis' below, is considered with the comments of private hospitals, industry contacts, educational institutions and labour market intermediaries together with the survey results, to provide commentary.

A low proportion of vacancies filled may not necessarily be indicative of a skill shortage. The reasons for vacancies remaining unfilled are often complex and may not relate to a lack of qualified applicants. Factors include employers' requirements being highly specialised, pay or conditions being below market rates, particular working arrangements and expectations of employers or job seekers being unrealistic, and lack of transport to the job. Additionally, the working arrangements sought by workers may not match those offered by employers; for example, workers seeking full-time work but employers offering part-time hours, employers offering salary and wage employment but workers wanting contract work.

### **Demand and supply analysis**

The APHA will take account of a range of data (outlined below), in conjunction with the results of the APHA pulse take survey. Demand data and analysis includes key determinants of demand (that is, the variables affecting the level of demand for these skills), including

- published government data in relevant occupations
- industry activity statistics and projections
- changes in employment (and registration) levels
- vacancy trends
- anecdotal information on demand from private hospitals and industry contacts.

## Outcomes and conclusions

Where the APHA receives enough survey responses, the ratings will be assigned for the whole of the state or territory (and for Australia) unless there is evidence suggesting the rating varies between metropolitan and non-metropolitan locations.

APHA will ensure none of the published data is identifiable, therefore a state must return data for at least three hospitals, and these hospitals must be either independent or from different hospital groups. Where the data will identify specific hospitals, this will not be published, but will be included in Australian overall data if published.

The following definitions are used:

**Shortage:** Skill shortages exist when employers are unable to fill or have considerable difficulty filling vacancies for an occupation, or significant specialised skill needs within that occupation, at current levels of remuneration and conditions of employment, and in reasonably accessible locations.

**Recruitment difficulty:** Recruitment difficulties occur when some employers have difficulty filling vacancies for an occupation. There may be an adequate supply of skilled workers but some employers are unable to attract and recruit sufficient, suitable workers for reasons which include: specific experience or specialist skill requirements of the vacancy; differences in hours of work required by the employer and those sought by applicants; or particular location or transport issues.

**No shortage:** Research has not identified any significant difficulty filling vacancies.

## **ATTACHMENT 1**

# **SURVEY QUESTIONS**

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The APHA pulse take survey consists of core questions included to capture consistent information across occupations and locations and whilst not directly comparable to the SERA, the questions have been kept the same to provide a framework.

Questions marked with an asterisk were the minimum core questions from the SERA.

### **Hospital demographic data (to complete once per survey)**

- In which jurisdiction is your hospital located?
- Postcode where your hospital is located
- What type of hospital is your hospital?
- How many beds does your hospital have?
- Is your hospital co-located with a public hospital?

### **Occupational shortage data**

- How many vacancies for this occupation were you hoping to fill from this advertisement?\*
- How many of these vacancies have you filled?\*
- How many applicants did you attract?\*
- How many applicants were suitable?\*
- Did you fill the vacancy within four weeks from the most recent advertisement?\*
- If the vacancy was not filled within four weeks of the most recent advertisement, what was the reason for the delay?\*

### **Skilled visa data**

- For the survey period, did you use a visa pathway to fill any positions? If yes, which occupation? (drop down)

### **Other data**

- For the survey period, were there any other occupations causing a particular 'pain point' for hiring in your hospital?