

2017 sonographer employment & salary survey

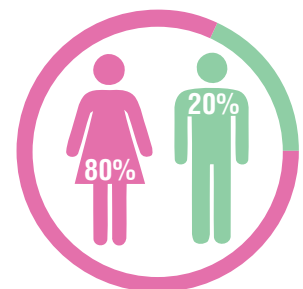
Overview of results

Thank you to everyone who participated in the fifth ASA Salary Survey. The objective of the survey is to be a regular monitor of the employment situation of sonographers across Australia and New Zealand.

The results of the ASA Salary Survey provide valuable information on sonographers' employment conditions, entitlements and remuneration, benchmarked against previous results from 2010, 2011, 2012 and 2014. Most recently held between 7 and 30 November 2017, this is the only survey of its kind across Australia and New Zealand.

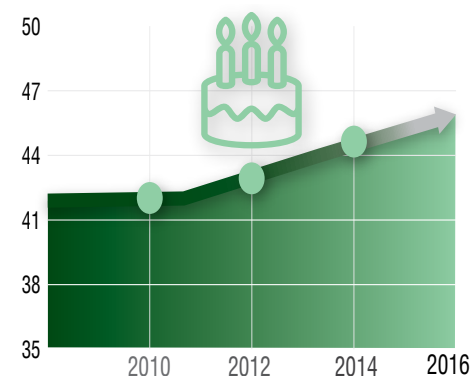
The ASA, in partnership with Di Marzio Research, is in the process of analysing these results and will produce an industry report for members later in the year. In the interim, following are some highlights and preliminary results from the 2017 ASA Salary Survey. Keep an eye on the weekly member newsletter *cross section* for the release of the industry report and other important profession information.

Demographics



Gender

80% female – almost no change since first survey

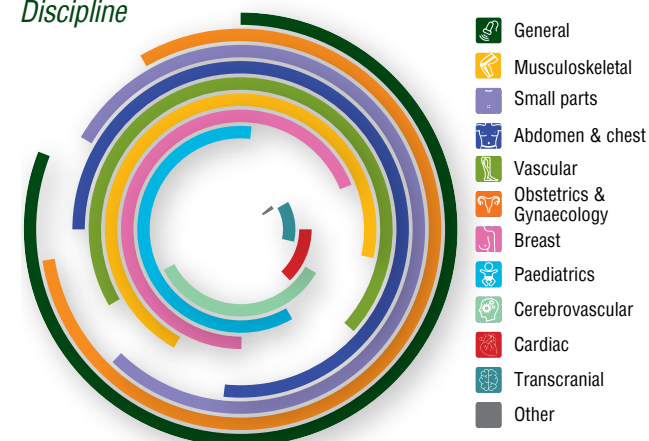


Age

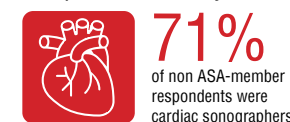
30% of respondents are over 50 years of age; average age is 42, showing no change since 2010

Compiled by James Brooks-Dowsett,
ASA Policy and Advocacy

Discipline



Last year saw the greatest response to the ASA Salary Survey yet. A total of 793 sonographers completed the survey, representing a response rate of 14% of the membership base. It was also the first year that non-members were invited to complete the survey. Of total responses, 6.4% came from

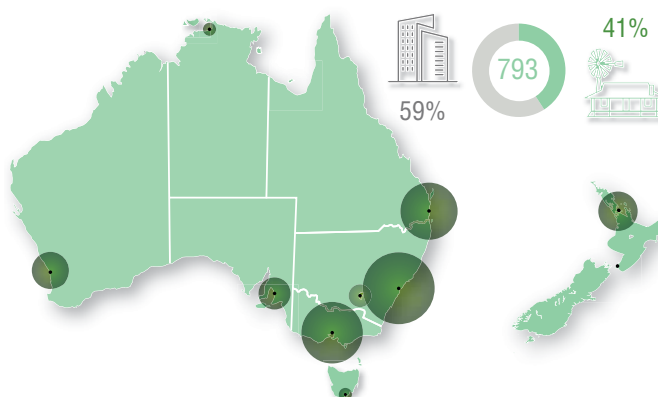


71%
of non ASA-member respondents were cardiac sonographers

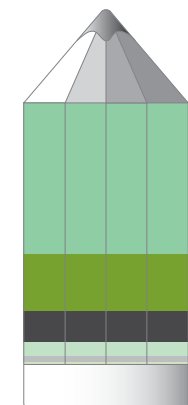
non-members, with a large majority (71%) of non-member respondents being cardiac sonographers.

Of total respondents, 59% are based in metropolitan areas, 29% reside regionally and 11% in rural/remote towns. This distribution of sonographers does not differ markedly to previous years.

Of those that completed the survey, 2% identified as Māori, with no one identifying as Aboriginal or Torres Strait Islander.

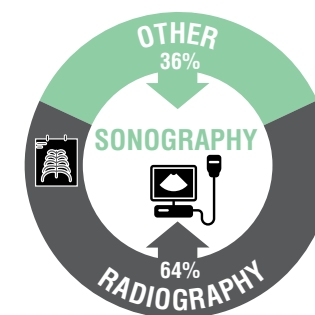


Qualifications



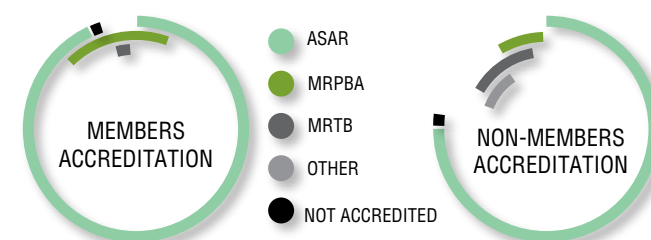
- 67% Postgraduate diploma in ultrasound
- 25% Other recognised sonography qualification (e.g. DMU)
- 13% Masters or PhD
- 6% Postgraduate certificate in ultrasound
- 3% No formal qualification
- 1% Preferred not to say

Once qualified, sonographers tend to remain in the profession for the long term. The average length of tenure is currently 13 years, with most expecting to continue work in the profession for six years or more.



Approximately two-thirds of respondents were previously qualified as radiographers (64%). This figure has gradually decreased across the Salary Survey series, from a high of 77% when the ASA Salary Survey was first introduced in 2010.

Nearly all members who responded (93%) are accredited with the Australian Sonographer Accreditation Registry (ASAR). This incidence was lower among non-members at 75%.



Some members maintain membership with other professional bodies, with the most popular (20%) being the Australasian Society for Medical Ultrasound (ASUM) and 'the Union' (12%). Interestingly, Union membership has gradually declined from a high of 23% in 2010.

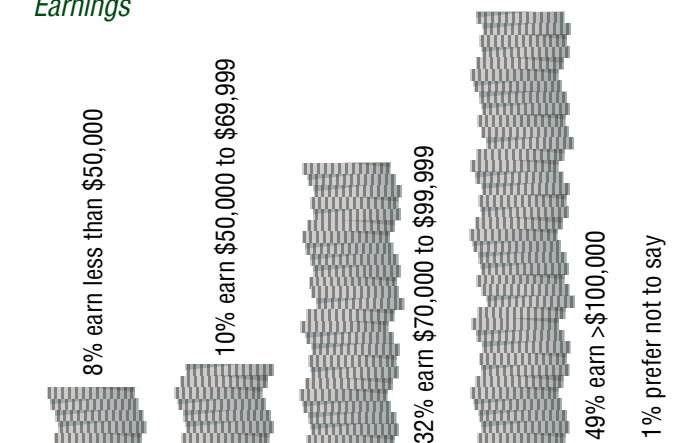
Among non-members, 31% report maintaining membership with ASUM, 22% hold membership with the Cardiac Society of Australia and New Zealand (CSANZ) and 22% are members of 'the Union'.

Overview of results

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Employment and remuneration

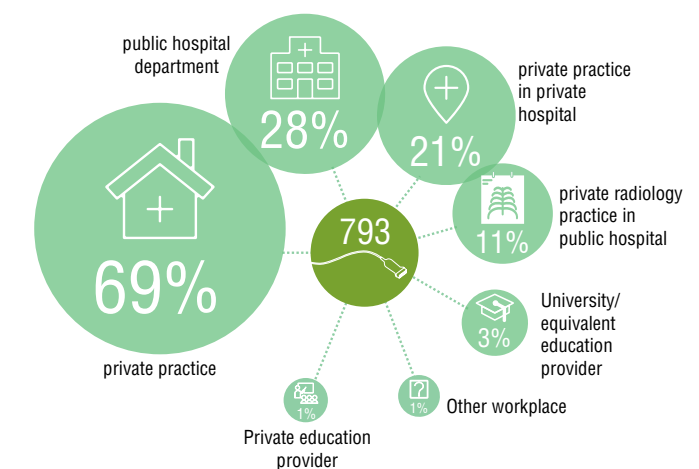
Earnings



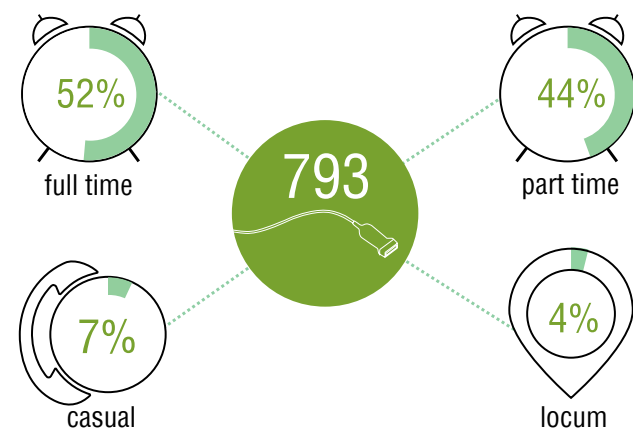
The average sonographer annual gross income in 2017 was \$98,197, with 49% earning over \$100,000 per annum. Respondents who reported being paid an hourly wage covered 87%, with 65% noting they do not have regular salary reviews.

A total of 85% of respondents described themselves as clinical sonographers. Most have their work reported by a radiologist (81%), with small proportions having their work reported by a cardiologist (12%) or obstetrician/gynaecologist (8%).

What sector

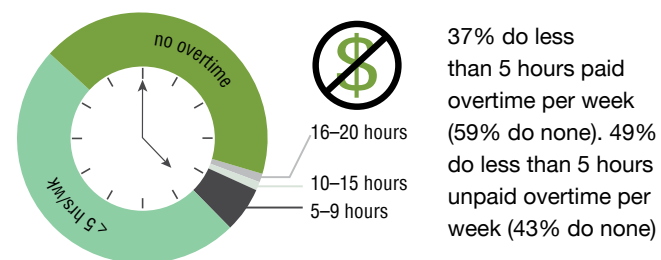


The majority of respondents primarily work in private practice (69%), with just over a quarter based in a public hospital. Other primary work locations include private practice at a private hospital (21%) and private radiology practice at a public hospital (11%).



Just over half (52%) work full time and the remainder are in part-time, casual or locum roles. There is a small proportion (5%) with a full-time role who also conduct extra casual/locum work.

ASA members in part-time/casual/locum roles work an average of 25 hours per week, which has gradually increased each year (from 20.5 hours in 2010).



Respondents who work overtime in a typical week represented 71%, three-quarters of whom said they receive some type of benefit for their efforts.

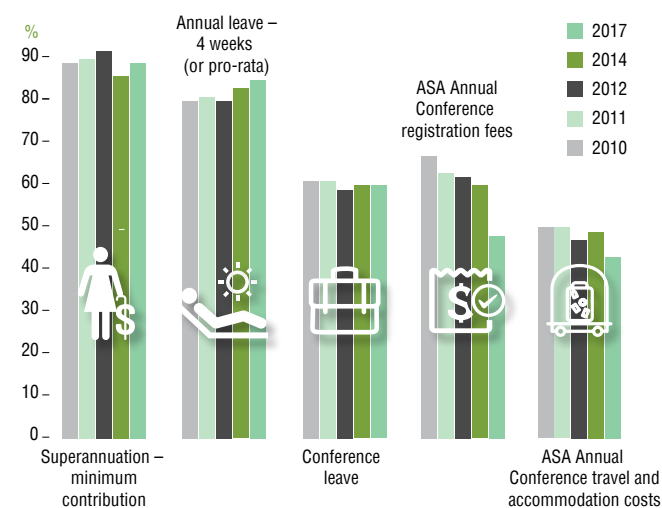
Through the survey, sonographers reported providing an average of 58 sonographic examinations per week in 2017. This figure has remained fairly consistent across the ASA Salary Survey series.

2017 has seen some change in time allocated to specific work tasks. Provision of sonographic services, including related administration duties, remains the most common task category performed per week (80%). This reflects the gradual increase seen for this task category since the first ASA Salary Survey (up from 70% in 2010–2012 and 74% in 2014).

There is a notable corresponding decrease in time allocated for supervision and training, reported at 10% in 2017, compared with 17% in 2014.

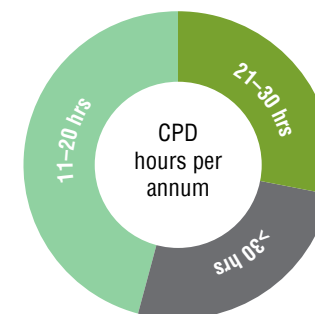
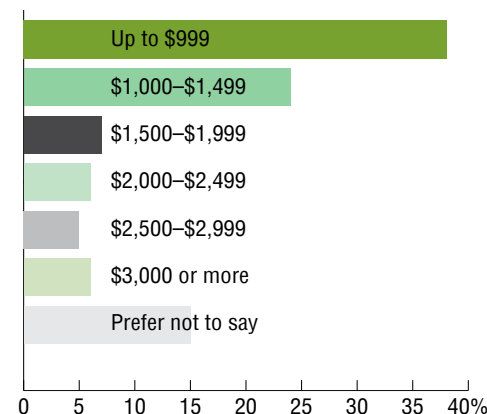
Employee benefits and CPD

Top five employee benefits paid for by employer



Despite some variation since 2014, superannuation and four weeks' annual leave remain the most common employee benefit (and generally paid in full). Although still part of the top five, 2017 saw continuation in the gradual decline that has been occurring since 2010 in the proportion of members whose employers pay for professional development activities, including costs to attend the ASA National Conference.

35% of respondents have a CPD allowance



The reported amount of annual CPD was:
29% do 11–20 hours;
27% do 21–30 hours;
47% do more than 30 hours per annum

Respondents completed an average of 25.8 hours of CPD in 2017. This reflects a notable drop against previous years, which reported on average 27.5 to 30 hours completed per annum.

Consistent with previous years, the greatest barriers to sonographers completing annual CPD continue to be: cost (55%); family commitments (49%); and distance (42%).

Almost half of respondents feel that stress levels (44%) and employee morale (47%) have gotten worse in the last twelve months.

Advocacy

And, finally, respondents indicated interest in advocacy priorities as follows:



Sonographer regulation

56%



Sonographer advanced practice

54%



Professional standards and guidelines

52%



Research and further education for sonographers

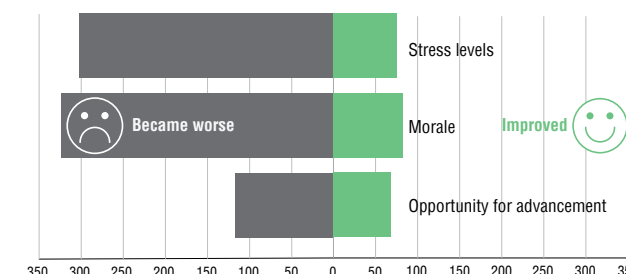
47%



Enhancement of clinical training

45%

Workplace satisfaction



At first glance, respondents' satisfaction with aspects of their employment is fairly consistent with prior findings. In 2017, however, members reported higher levels of satisfaction for autonomy (75% in 2017 versus 61% in 2014), work scheduling (66% compared with 57% in 2014), and career path opportunities (39% compared with 27% in 2014).

Almost half of respondents feel that stress levels (44%) and employee morale (47%) have become worse in the last twelve months, with almost a quarter (24%) reporting working longer hours than last year.