

# MEDIA RELEASE

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## Doctors' agreement just the start of boosting Queensland's medical workforce

As negotiations to settle the next wage deal for public hospital doctors reach crunch time, AMA Queensland has urged the state government to follow through with more initiatives to boost Queensland's medical workforce.

AMA Queensland's union partner, the Australian Salaried Medical Officers Federation Queensland (ASMOFQ), is working tirelessly to deliver the next *Medical Officers' Certified Agreement* (MOCA7).

A successful outcome will see working conditions improve for public hospital doctors and help attract those needed to reach the government's workforce targets.

But AMA Queensland President Dr Nick Yim said work should not end there.

"Last week we released AMA Queensland's Workforce Working Group Action Plan, a blueprint to help the government chart a course to achieving its stated outcomes of 46,000 more health workers by 2032," he said.

"Getting more doctors into the system, and into the hospitals and health services where they're needed most, is critical to improving outcomes for Queensland patients."

Dr Yim said key components of the Action Plan that the government should adopt immediately included needs-based workforce planning to tie training and recruitment targets for doctors to regional disease prevalence profiles.

AMA Queensland Councillor and Workforce Working Group Chair Dr Rob Nayer said patients were waiting too long or having to travel too far in outer areas to see the specialists they need for a range of common conditions.

"Women with breast cancer, men with prostate issues, kids with ear problems and many with cataracts deserve treatment where they live," Dr Nayer said.

"We need to tailor unit staffing to a given region's needs, which may require incentives for in-need specialties and networked FIFO models in the short to medium term.

"But we must increase our home-grown medical workforce in the longer term and not place the burden on locums and international medical graduates to fill those gaps."

Dr Nayer said reforming ways of working would also have tangible benefits.

"Allowing strength-based employment streams such as clinical or teaching will free up doctors to focus on responsibilities they perform well," he said.

"We also need our doctors working to their full scope of practice, not getting caught up in tasks better performed by support staff – for example, employing more pharmacists to complete full medication histories on admission and not later saves time and would improve outcomes.

“Technology has a part to play here too. With appropriate oversight and consent, the use of AI scribes can dramatically reduce administration work for doctors.”

## Background

AMA Queensland’s Workforce Working Group convened from January to June 2025 to develop policy proposals that would help train, attract and retain health workers.

Members of the roundtable included specialists in general practice, emergency medicine, psychiatry, urology, orthopaedic surgery, obstetrics and gynaecology, general surgery and representation for doctors in training.

Members of the group had extensive experience in medical training at the university and college level, industrial relations, private practice ownership (general practice and private hospitals) and medical leadership, including clinical directors.

The Queensland government has pledged to deliver 46,000 additional health workers by 2032. Health Minister Tim Nicholls has indicated the government’s needs-based plan to attract and retain doctors and other medical professionals will be released before the end of 2025.

The full Workforce Working Group Action Plan is available [here](#).