

# NEWSLETTER

APRIL 2026

## Message from the CEO



The first quarter of 2026 has reinforced what many Boards and executive teams already suspect—there is no “return to normal” on the horizon, only a new level of sustained complexity. In this edition, we explore why workforce instability is no longer a cyclical disruption but a structural feature of the healthcare landscape, and what that means for leadership resilience, governance, and long-term organisational performance.

Our lead article examines the growing reality that workforce fragility, rising service demand, and heightened accountability expectations are converging to create a more volatile operating environment. As highlighted, leadership stability is no longer a by-product of good management—it is a strategic asset in its own right.

We also take a closer look at a critical and often underestimated transition point: when high-performing clinicians step into executive roles. Clinical excellence remains essential, but as we outline, it does not automatically translate into enterprise leadership capability. Boards are increasingly challenged to assess not just credibility, but strategic thinking, adaptability, and the ability to lead through ambiguity.

Further into the newsletter, we unpack the link between workforce instability and executive turnover—an issue that is too often viewed in isolation. The data tells a different story. Sustained workforce pressures are driving cognitive overload, shortening executive tenure, and reshaping succession planning into a continuous governance priority rather than an occasional exercise.

Finally, we explore the evolving role of psychometric assessment in senior leadership selection. While not without its critics, the move toward evidence-based evaluation reflects a broader shift: organisations want deeper insight into how leaders think and perform under pressure—not just what they have done in the past. *continued on page 2...*

# Predictus Search: Early Year Market & Leadership Outlook

From the Desk 

## 2026: Workforce Stability: A Structural Challenge, Not a Passing Cycle

The first quarter of 2026 confirms what many Boards already sense: the environment has not eased. It has matured into sustained complexity. Across Australian healthcare, three powerful forces are shaping every major executive decision—fragile workforces across clinical and specialist cohorts, unrelenting service demand in both elective and urgent care, and intensifying governance and accountability expectations. These pressures are not new; what distinguishes this year is their persistence.

Leadership resilience has become a strategic asset. Stability at the executive level is no longer optional—it is the foundation of organisational performance. In a sector where operating conditions shift faster than leadership structures can adapt, sustained leadership capability has emerged as a primary determinant of system success.

Recent workforce reports and regulatory indicators confirm that volatility remains entrenched within the health system. “Intent-to-leave” signals across practitioner groups continue to trend upward, revealing a level of fragility that is no longer cyclical but structural. Workforce instability is not merely a human resources concern; it is a leadership risk multiplier. Executives now lead within an operational reality where workforce continuity can no longer be assumed, altering planning horizons, decision velocity, and the urgency of succession strategies.



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At Predictus Search, these are not abstract trends—they are the conversations we are having every day with Boards, CEOs, and senior executives across Australia. Our role is to help organisations navigate this complexity by identifying leaders who can deliver stability, clarity, and performance in uncertain conditions.

If these challenges resonate with your organisation—or your own career trajectory—I encourage you to reach out. Whether you are building leadership capability or considering your next move, we would welcome a confidential discussion.

**Stephen Hockey**  
Director, Predictus Search

Industry Insights 

## Workforce Stability: A Structural Challenge, Not a Passing Cycle

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The strain this creates on senior leadership is visible. As workforce uncertainty deepens and service pressures remain elevated, executive load expands accordingly. Organisations are seeing shorter tenures among senior leaders, rising burnout signals, and a growing reliance on acting arrangements—sometimes extending well beyond their initial intent. CEO succession planning has therefore shifted from a contingency exercise to an active governance requirement. Boards cannot afford to treat it as optional or episodic; it is a continuous discipline essential to organisational resilience.

Adding to this complexity, governance expectations are escalating across all dimensions. Boards are under increasing scrutiny to demonstrate oversight in financial sustainability, workforce stability, safety and quality performance, and the implementation of strategic reforms. As a result, the bandwidth of executive teams is being stretched across more accountability domains than at any other time in recent years.

What emerges from this convergence is a critical truth: workforce volatility and governance intensity are not transient challenges. They have become defining features of the healthcare environment. In this context, leadership stability—measured not by tenure alone but by continuity of capability, culture, and direction—has never been more pivotal.

## When Strong Clinicians Move into Executive Roles

**One emerging pattern in 2026 is the widening gap between clinical excellence and executive capability.**

Clinical leaders bring credibility and domain expertise.

Executive leadership requires:

- Strategic alignment across competing priorities
- Financial stewardship
- Political navigation
- Change management over multi-year cycles

Boards that rely solely on clinical strength when appointing executives are exposing themselves to performance risk.

**Key Board Questions:**

- Have we tested strategic capability, not just clinical credibility?
- Does the candidate demonstrate system-level thinking?
- Can they lead through ambiguity and sustained pressure?


Executive transition must be supported deliberately. High-performing clinicians require structured onboarding and governance clarity when stepping into enterprise-wide roles.

**Data Watch**

Elective surgery volumes and waiting list metrics continue to reflect system demand pressure. Even where waiting times stabilise, volumes remain high. That means sustained operational load at executive level.

The operating temperature of the system remains elevated.



Key Industry Trends 

# Workforce Instability and Executive Turnover

*Executive turnover in Australian healthcare is often viewed as an isolated event—an outcome attributed to individual performance, contract cycles, or organisational change. Yet recent workforce data suggests a deeper systemic driver. Workforce instability has become a measurable and persistent condition, directly shaping leadership continuity and performance across the sector.*

The evidence is clear: attrition rates in key health professions remain above 24%, workforce shortages span most disciplines, and rural and regional distribution gaps continue to widen. These are not one-off challenges confined to particular services or geographies; they reflect structural patterns embedded in the national healthcare workforce.

Executives inevitably absorb the pressure created by these shortages. Persistent staffing gaps force leadership focus away from strategy and onto immediate operational recovery efforts. The need to continually reallocate staff, patch service rosters, and manage short-term crises erodes time for strategic reform and governance engagement. Over time, sustained exposure to these conditions diminishes decision quality, contributes to cognitive overload, and accelerates fatigue among senior leaders.

In such environments, executive decision-making becomes reactive by necessity. Leaders face an unrelenting cycle of triage—redistributing teams, prioritising care delivery, and managing risk under uncertainty. The cumulative cognitive load of this constant adaptation not only affects performance but also increases the likelihood of executive burnout and eventual turnover.

The organisational consequences are equally significant. Workforce instability undermines team cohesion, organisational culture, and service continuity. These factors, in turn, reduce executive effectiveness and amplify leadership vulnerability. When workforce volatility becomes the norm, stable leadership becomes the exception.

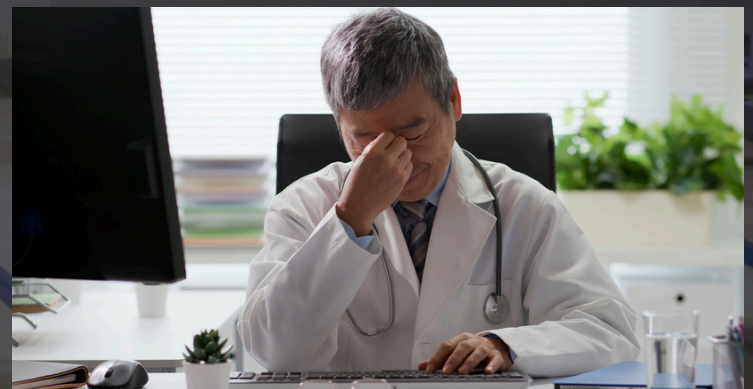
Australia's healthcare system continues to expand in scope and demand, yet workforce supply has not kept pace. This imbalance creates operating conditions where executives are required to lead without stable baseline resources. The result is a form of structural volatility that blurs the line between workforce management and leadership sustainability.

For Boards, this connection between workforce instability and executive turnover cannot be overlooked. Monitoring vacancy duration in critical roles, attrition trends, geographic workforce distribution, and indicators of executive workload should now sit alongside traditional safety and financial metrics. These measures serve as early warning signs of leadership risk.

Addressing the issue requires strategic reprioritisation. Workforce performance must be elevated to a Board-level agenda, with leadership structures designed to distribute responsibility rather than concentrate it in single-point roles. Aligning workforce strategy with executive performance frameworks helps ensure that organisational stability and leadership continuity reinforce each other rather than compete.

In essence, executive turnover is frequently the end state of sustained workforce instability. The conditions shaping clinician retention also determine leadership endurance. As 2026 unfolds, healthcare organisations that invest in workforce resilience will be the ones most likely to sustain leadership continuity and strategic momentum.

*For confidential discussion or board advisory support on workforce and leadership alignment, contact Stephen Hockey at Predictus Search.*



# The Measure of Leadership – Psychometric Testing for Senior Executives in Australia’s Medical Industry

*In modern healthcare leadership, experience and credentials no longer stand alone. Hospitals, medical research bodies, and health networks across Australia are increasingly turning to psychometric testing when hiring or promoting senior executives. As healthcare becomes more complex—balancing patient outcomes, workforce wellbeing, and financial stewardship—boards want more than a CV. They want insight into how leaders think, behave, and influence others under pressure.*

*But this shift toward data-driven selection brings divided opinions, especially among seasoned professionals. Let’s unpack the pros, cons, and human realities behind psychometric testing at the top of the medical ladder.*

## The Evidence Behind the Trend

Psychometric assessments provide a structured, evidence-based way to evaluate attributes like cognitive ability, emotional intelligence, resilience, and leadership style. In clinical terms—they aim to objectify the “intangibles.”

Research continues to support their validity. A 2022 meta-analysis found that cognitive ability tests account for up to 33% of job performance variance, making them one of the strongest predictors of long-term success, particularly in complex roles requiring strategic thinking and adaptability.

For healthcare organisations—where governance failures or poor leadership can directly affect care quality—the objective data these tests provide can feel indispensable.

Further, executive search specialists argue that standardised testing enhances both fairness and inclusivity, reducing unconscious bias and helping boards create a level playing field for internal and external candidates.

## Why Healthcare Organisations Use Them

Leaders in medicine are expected to be **strategic, empathetic, and ethically grounded**—qualities not easily measured by interviews alone. Psychometric testing adds a scientific lens to leadership hiring by exploring:

- **Decision-making and reasoning speed** under uncertainty.
- **Interpersonal empathy and emotional intelligence**, crucial for managing clinicians and staff.
- **Resilience and adaptability** within rapidly changing regulatory or crisis environments.
- **Person–culture fit**—alignment with an organisation’s values around safety, quality, and innovation.

A case study by [people-solutions.com.au](https://people-solutions.com.au) described a national health body using verbal, numerical, and emotional intelligence testing to differentiate between otherwise equally experienced candidates. The board reported more confident decision-making and better insight into leadership potential beyond the résumé.

## The Upside: Science Over Instinct

Australian evidence from Altius Group highlights that **structured assessments outperform instinct** in predicting performance and long-term wellbeing outcomes. In healthcare, where hiring by “gut feel” still occurs, this shift towards measurable data reflects the very evidence-based ethos medicine teaches.

It can also elevate candidate experience. When well-designed and clearly explained, these tests can help executives reflect on their leadership style, receiving feedback akin to professional coaching. For some, it’s a rare opportunity for **self-insight and career development** beyond clinical metrics or board KPIs.

## The Downside: Skepticism and Fatigue Among Veterans

Psychometric testing isn’t always embraced by senior medical leaders. Many seasoned executives regard the process as mechanical or unnecessary, questioning the relevance of aptitude or situational tests when decades of leadership experience already demonstrate sound judgment. Others find the approach impersonal or worry that overreliance on test results may erode professional trust.

Despite their analytical strengths, these tools are not infallible. Cultural bias, misinterpretation, and using results as rigid “pass or fail” measures can all distort decision-making. For this reason, many health organisations still rely on proven internal candidates, reputation, and structured interviews—especially when resources are limited or cultural fit carries greater weight.

## Why Some Organizations Opt Out

Many hospitals and health services still treat psychometric testing as the exception rather than the norm. Internal promotions often rely on established performance histories, while testing can add cost and delay. Some boards and candidates prefer traditional interviews and reputation-based selection, and in many cases, leadership success depends on context and team dynamics that standard assessments struggle to capture.

## The Measure of Leadership – Psychometric Testing for Senior Executives in Australia's Medical Industry

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Like any diagnostic tool, psychometric testing provides useful data points—but not the whole picture. It's most effective when paired with:

- Behavioural or scenario-based interviews.
- Values mapping against organisational culture.
- Peer and subordinate feedback.
- Onboarding support or executive coaching tied to test results.

Psychometric testing offers valuable insight but only tells part of the story. When combined with interviews, cultural fit assessments, and coaching, it becomes a tool for leadership development as well as selection. Its real value lies in how thoughtfully it's applied and interpreted—balancing data with the discernment and empathy that define effective healthcare leadership.

## Why us?

We like to partner with organisations and people that support our values of Integrity, Excellence, Innovation and Respect.

We specialise in Healthcare, Life Sciences, Technology and Professional Services, all areas that have a significant impact on the world and the people within it.

We are passionate about how technology can be used for the benefit of mankind and use state of the art technology in every aspect of what we do. Our screening and selection processes ensure we present the very best and most appropriate candidates available at that time and we partner with every client through every stage in the recruitment process leading to successful and satisfying outcomes.

Our methodology has been fine tuned over 30 years of recruitment experience and aims to encompass all aspects of the attraction, screening, selection, long listing, short listing and client interview processes.

At every stage of the process both clients and candidates are aware of what is going on and at what stage the process has reached. Whatever the outcome we aim to ensure that all participants have a stress-free and efficient experience, encouraging both parties to want to use our services again.



## Featured Job Vacancies

Looking to advance your career in the healthcare and pathology sector? Predictus Search is here to connect you with exciting job opportunities in Australia. Explore the following positions and learn how to apply.

### National Facilities Development Manager – Melbourne

National role with a strong strategic and organisational focus with experience of building Laboratories or similar environments. Exposure to Pharmaceutical Manufacturing or food processing plants would also be considered.

### Anatomical Veterinary Pathologist – Adelaide

An experienced Veterinary Pathologist is required to work with a broad variety of clients across South Australia. A Melbourne based Pathologist would also be considered.

### Anatomical Pathologist - Various Locations

Overseeing operational laboratory activities, coordinating training, maintaining quality standards, and driving process improvement.

### Dermatopathologist - Queensland or/and New South Wales

Diagnosing and managing dermatological conditions through skin biopsy specimen analysis. We will also consider Part-Time Pathologists or Hybrid workers provided you spend at least 50% of your time in the Labs.



**Ready to take your career or organization to the next level? Whether you're searching for top talent or seeking new opportunities, we're here to help!**

Reach out now to [steve@predictussearch.com](mailto:steve@predictussearch.com) or call us at +61 (0)2 8067 852 to receive a customized proposal for your search or to join our network (and get tapped on the shoulder should something suitable for you cross our desks!)

