



AMA

2021

AMA SPECIALIST TRAINEE EXPERIENCE HEALTH CHECK

INTRODUCTION

The results of the 2021 **AMA Specialist Trainee Experience Health Check (STHC) report** come from the Medical Training Survey (2021) conducted by the Medical Board of Australia, a national, profession-wide survey of all doctors in training in Australia, which was completed on a voluntary basis.



The purpose of this document is threefold:

- Provide a comparison of the training experience between different specialty training programs and identify areas of excellent experience as well as areas for improvement.
- Compare training experience outcomes within the same specialty training program between 2019 (pre-COVID) and 2021, to investigate if any areas have improved or worsened over time.
- Identify how COVID-19 is perceived to have negatively affected the training experience across different specialty training programs.

The report shows that the highest-grade trainees gave their overall training program experience was a C or “a pass”.

No training program received an “A grade” rating from trainees.

The results of the 2021 AMA STHC highlight important areas where the trainee reported experience has changed or has shown no improvement between 2019 and 2021, as well as areas where Specialist Medical Colleges and Health Services can focus on and collaborate to build on the quality of vocational training.

The AMA will use the 2021 STHC results to inform its advocacy on improvements to training programs and support structures.

The AMA encourages Specialist Medical Colleges and Health Services to:

- Reflect on how trainees perceive the quality of their training experience
- Review compliance with the Australian Medical Council (AMC) standards for specialty education and training
- Internally review education and training policies, with a particular focus on the areas for improvement.

KEY FINDINGS

2019 v 2021

TOP 3 AREAS OF IMPROVEMENT



The exams always reflected the College training curriculum **up by 12% from 55% to 67%.**



The College provides me with access to mental health support services **up by 11% from 39% to 50%.**



I never/sometimes get paid for the unrostered overtime **reduced by 11% from 61% to 50%.**

TOP 3 AREAS WHERE THERE IS STILL WORK TO DO



I received useful feedback about my performance in the exams a **2% improvement but still only at 34%.**



The feedback was timely. **No change, still at 40%.**



I have to compete with other doctors for access to opportunities **increased by 4% from 40% to 44%**

Doctors in training continue to experience bullying, discrimination, and harassment at unacceptable levels

- Aboriginal and Torres Strait Islander doctors in training report higher levels of bullying, discrimination, and harassment, including racism, compared to non-Indigenous colleagues (52% vs 35%).
- Female specialist trainees report higher levels of bullying, discrimination and harassment compared to male specialist trainees (23% v 16%).
- Rates of experiencing and witnessing bullying, discrimination, or harassment, reporting it and it being followed up have not improved since 2019 (Figure 1).
- In 2021, 38% of specialist trainees who had experienced bullying, discrimination, or harassment report that it has had a major/moderate effect on training (Figure 2).

Figure 1.

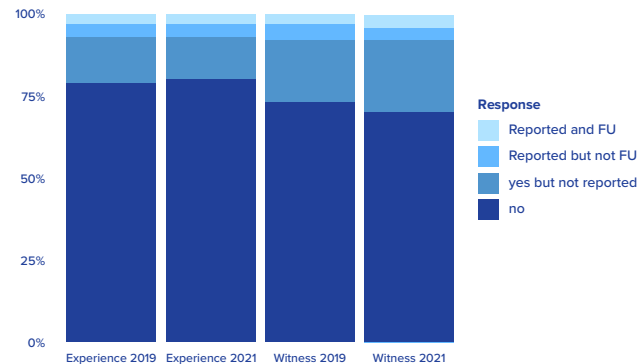
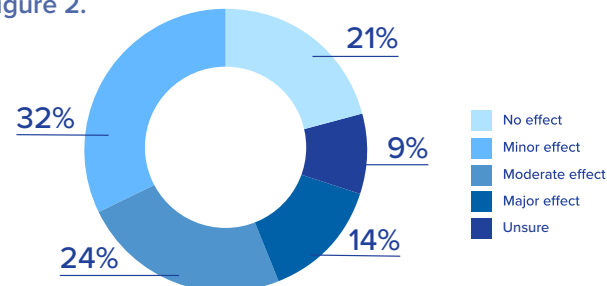


Figure 2.



Impact of COVID-19 on training

Nearly half of all specialist trainees who responded said COVID-19 had impacted negatively on their training, disrupting training and exam preparation and progression through training.



Table 1. 2021 Specialist Trainee Experience comparison

QUESTION	Overall	ANZCA	ACEM	RACGP	CICM	RANZCOG	RCPA	RACP	RANZCP	RANZCR	ACRRM	RACS
COMMUNICATION & ENGAGEMENT												
My College clearly communicates changes to my training program	70%											
I know who to contact at the College about my training program	75%											
The College seeks my views on the training program	50%											
I am represented by doctors in training on the College training/education committees	64%											
The College provides me with access to mental health support services	50%											
Experience rating		C+	C+	C	C+	B	C-	D+	C+	C	C	B-
EXAMINATION & ASSESSMENT												
The exams always reflected the College training curriculum	67%											
The College always provided accurate and appropriate information about exams	71%											
I received useful feedback about my performance in the exams	34%											
The feedback was timely	40%											
I received support from my College when needed	44%											
Experience rating		D+	D+	D	D+	C+	D+	D+	D	D	C+	C-
SUPERVISION & TEACHING												
I have access to protected study time/leave	69%											
My job responsibilities do not prevent from meeting training requirements	63%											
Experience rating		B	B-	B-	C+	C	B-	C-	B-	B	C	C
WORKPLACE ENVIRONMENT & CULTURE												
I have a good work/life balance	64%											
I am confident that I could raise concerns about bullying/harassment/discrimination	75%											
Working unpaid overtime impacts my wellbeing sometimes/never	80%											
You never/sometimes get paid for the unrostered overtime*	50%											
There are safe mechanisms for raising training/wellbeing concerns with the College	52%											
I have to compete with other doctors for access to opportunities*	44%											
Experience rating		C+	C	C+	C	C-	C-	C-	C	C	C+	C
OVERALL RATING												
I am concerned about whether I will be able to secure employment on completion of training / the pathway	46%											

The responses came from 11,974 specialist trainees who completed the Medical Training Survey (2021)

The experience ratings range from A+ (excellent) to F- (unsatisfactory) and were assigned using the method outlined elsewhere

*these questions were reversed such that a lower % is better

- College response was $\geq 10\%$ more favourable than the sample average
- Neither more or less likely to answer affirmatively than the average
- College response was $\geq 10\%$ less favourable than the sample average

- GLOSSARY OF ACRONYMS**
- ANZCA** Australian and New Zealand College of Anaesthetists
 - ACEM** Australasian College for Emergency Medicine
 - RACGP** Royal Australian College of General Practitioners
 - ACRRM** Australian College of Rural and Remote Medicine
 - CICM** College of Intensive Care Medicine
 - RANZCOG** Royal Australian and New Zealand College of Obstetricians and Gynaecologists
 - RCPA** Royal College of Pathologists of Australasia
 - RACP** Royal Australasian College of Physicians
 - RANZCP** Royal Australian and New Zealand College of Psychiatrists
 - RANZCR** Royal Australian and New Zealand College of Radiologists
 - RACS** Royal Australasian College of Surgeons

Table 2. 2019 v 2021 Specialist Trainee Experience comparison

QUESTIONS	2019	2021	CHANGE	ANZCA	ACEM	RACGP	CICM	RANZCOG	RCPA	RACP	RANZCP	RANZCR	ACRRM	RACS
COMMUNICATION & ENGAGEMENT														
My College clearly communicates changes to my training program	66%	70%	4%											
I know who to contact at the College about my training program	71%	75%	4%											
The College seeks my views on the training program	43%	50%	7%											
I am represented by doctors in training on the College training/education committees	60%	64%	4%											
The College provides me with access to mental health support services	39%	50%	11%											
EXAMINATION & ASSESSMENT														
The exams always reflected the College training curriculum	55%	67%	12%					—						
The College always provided accurate and appropriate information about exams	63%	71%	8%					—						
I received useful feedback about my performance in the exams	32%	34%	2%					—						
The feedback was timely	40%	40%	0%					—						
I received support from my College when needed	41%	44%	3%					—						
SUPERVISION & TEACHING														
I have access to protected study time/leave	67%	69%	2%											
My job responsibilities do not prevent from meeting training requirements	60%	63%	3%											
WORKPLACE ENVIRONMENT & CULTURE														
I have a good work/life balance	57%	64%	7%											
I am confident that I could raise concerns about bullying/harassment/discrimination	71%	75%	4%											
Working unpaid overtime impacts my wellbeing sometimes/never	76%	80%	4%											
You never/sometimes get paid for the unrostered overtime*	61%	50%	-11%											
I have to compete with other doctors for access to opportunities*	40%	44%	4%											

The table compares the proportion of respondents answering affirmatively between the 2019 and 2021 Medical Training Survey

RANZCOG with a “—” indicate questions in which the sample size in 2019 was not adequate

***these questions were reversed such that a lower % is better**

- College response was >=10% **improved** over time
- Neither more or less likely to answer affirmatively than the average
- College response was >=10% **worse** over time

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Table 3. 2021 Impact of COVID-19 for each training program

SPECIALTY	CHANGE	ANZCA	ACEM	RACGP	CICM	RANZCOG	RCPA	RACP	RANZCP	RANZCR	ACRRM	RACS
Training opportunities	46%											
Routine teaching	53%											
Ways of learning	40%											
Access to learning resources	29%											
Exam(s) preparation	56%											
Research opportunities	39%											
Progression (e.g. delayed entry, completion of training)	38%											
Workload	43%											
Medical training overall	44%											

The responses came from 11,974 specialist trainees who completed the Medical Training Survey (2021)

The overall % show if COVID-19 had negatively impacted the training aspect

- College response was **>=10% more** favourable than the sample average
- Neither more or less likely to answer affirmatively than the average
- College response was **>=10% less** favourable than the sample average

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DISCLAIMER

This publication has been produced as a service to AMA members. Although every care has been taken to ensure its accuracy, it can in no way be regarded as a substitute for professional legal or financial advice, and no responsibility is accepted for any errors or omissions. The AMA does not warrant the accuracy or currency of any information in this publication. The Australian Medical Association Limited disclaims liability for all loss, damage, or injury, financial or otherwise, suffered by any persons acting upon or relying on this publication or the information contained in it, whether resulting from its negligence or from the negligence of employees, agents, or advisers, or from any cause whatsoever.

Comparison of results among specialities must be made with caution, as the survey did not involve a probabilistic sampling frame, but instead was open to all doctors in training in Australia, achieving a response rate of 55.1% (in 2021). Further, as doctors were not randomly allocated to specialist colleges, differences in attitudes and expectations could not be controlled for. Other important covariables (i.e., age, training level, domestic/international medical training) were also not controlled for. These issues introduce biases into the results which cannot be accounted for. Thus, all differences among trainee experiences should be interpreted as specific only to survey respondents and must not be interpreted as representative of the experiences of all doctors in training in Australia. All analyses were undertaken by an independent statistician.

METHODS

Table 1: The green and red panels in the table indicate that the responses of the participants of the relevant college rated the question $\geq 10\%$ more favourable and less favourable, respectively, compared with the gender-adjusted sample average. This was determined by dividing the observed number of affirmative responses within each specialty by the number of expected affirmative responses given the gender breakdown within each specialty. The experience ratings were based on the average gender-adjusted responses within each domain. The letter ratings correspond to decrements of 5% between 100% and 0%, such that A+ represents a score falling between 95%-100%. A represents 90%-95% while the lowest rating, F-, would represent a score of 15% or less.

Table 2: The green and red panels indicate that the responses of the participants of the relevant college rated the question $\geq 10\%$ more favourable and less favourable, respectively, in 2021 compared with the same college in 2019.

Table 3: The green and red panels indicate that the responses of the participants of the relevant college rated the question $\geq 10\%$ more favourable and less favourable, respectively, compared with the gender-adjusted sample average.

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