

### INTRODUCTION

In 2020, AMA Oueensland surveyed Resident Medical Officers (Intern, Junior House Officer, Senior House Officer, Continued Residency) to evaluate the state of Junior Medical Officer employment in Queensland, and subsequently compare hospitals across Queensland. A total of 730 junior doctors across 20 hospitals or HHS responded to the survey, representing approximately 31% of Queensland's approximate 2,343 Resident Medical Officers (RMOs). This was the fifth consecutive year the survey has been run, and was designed to be similar to previous surveys, so that results could be compared with those from 2019 to 2016.

This year, we introduced questions about COVID-19 and the pandemic's impact on RMOs' career progression and overall wellbeing.

#### MAJOR BREAKDOWN AMONG FULL SAMPLE

62% of the total sample were satisfied that their leave preferences were taken into consideration, which is lower than previous years.

#### Professional/career development

Only 28% had applied for professional development leave, which represents a 10% reduction in trainees applying for PDL compared with 2019, with leave denied to 23% of applicants. Further, 51% and 33% were satisfied that their clinical rotation preferences had been accommodated and with opportunities to be involved in research and auditing (in 2019 55% and 32% respectively).

#### Pay and overtime

Among the full sample, a total of 25% of respondents reported not being fully paid for claimed overtime, which was up from 20% in 2019 (after having previously declined from 24% 2018 and 31% in 2017. A further 27% reported that they had been advised not to claim overtime payment by an administrative officer or SMO and 27% believed doing so would lead to a negative assessment (down from 23% and stable ate 27% respectively in 2019).

#### Wellbeing and workplace culture

Importantly, 27% of respondents reported that they had felt unsafe at work (22% in 2019), and 48% reported that they had been concerned about making a clinical error due to fatigue related to long work hours (unchanged in 2018). Around half of respondents were satisfied with the hospital facilities (47%) and the quality of the teaching and training (47%) on offer (both down from 57% and 51% respectively in 2019).

#### Bullying, discrimination and harassment

This was the first year that bullying, discrimination and sexual harassment were asked as separate questions. Overall, 28% and 35% experienced and witnessed bullying respectively, 18% and 23% experienced and witnessed discrimination respectively, and 6% and 10% experienced and witnessed sexual harassment respectively. Among those reporting to have experienced or witnessed bullying, discrimination or sexual harassment, only 29% reported the incident (up from 23% in 2019), and only 65% felt that when reported the incident was adequately dealt with (also up from 55% in 2019).

69% of respondents were satisfied with their hospitals' communication regarding COVID-19 and 64% with their departments' updates. 36% said the education programs offered by their hospitals during COVID-19 were satisfactory. 37% of respondents reported that their career progression had been affected by COVID-19 and 47% claimed their wellbeing had suffered during the pandemic.

My wellbeing has suffered during COVID-19

COVID-19 GRADE:

25%

В

66%

C

46%

C+

38%

C

44%

С

38%

C+

44%

B-

70%

D-

50%

C

49%

C+

74%

C+

49%

C+

	Bundaberg	Cairns	Gold Coast	lpswich	Logan	Mackay Base	Mater Hospital	Metro North	Prince Charles	Princess Alexandra	Queensland Children's		Redcliffe	Redland	Robina	Rockhampton	Sunshine Coast HHS	Sunshine Coast Uni.	Toowoomba	Townsville	2019
	Hospital	Hospital	Hospital	Hospital	Hospital	Hospital	South Brisbane		Hospital	Hospital	Hospital	RBWH	Hospital	Hospital	Hospital	Hospital	(other)	Hospital	Hospital		COMPARISON
Access to annual leave					,																
Satisfied preferences for leave were taken into consideration	77%	50%	56%	83%	70%	73%	79%	50%	49%	67%	29%	52%	63%	33%	62%	78%	79%	79%	72%	58%	•
GRADE:	В	С	С	B+	В	В	B+	С	С	B-	D+	С	C+	C-	C+	B+	B÷	B+	B-	С	
Career progression and development																					
Applied for PDL	19%	29%	33%	22%	35%	27%	33%	50%	22%	10%	67%	36%	16%	39%	23%	11%	14%	38%	15%	25%	•
PDL approval rate	100%	80%	81%	100%	69%	100%	71%	83%	70%	40%	57%	92%	78%	71%	100%	100%	100%	46%	75%	71%	•
Clinical rotation preferences taken into consideration	62%	44%	42%	44%	51%	73%	70%	50%	31%	60%	33%	44%	61%	39%	69%	59%	57%	48%	53%	50%	•
Satisfied with research and audit opportunities	38%	26%	37%	0%	14%	33%	40%	8%	27%	44%	14%	43%	49%	28%	38%	22%	36%	34%	17%	42%	•
GRADE:	C+	С	С	C-	C-	C+	С	С	D+	C-	D+	С	С	C-	C+	С	С	C-	C-	С	
Hours of work and overtime																					
Working >90 hours per fortnight	8%	3%	29%	6%	6%	0%	3%	0%	20%	21%	5%	18%	4%	0%	0%	4%	0%	7%	2%	4%	•
Payment of un-rostered overtime	70%	72%	60%	100%	77%	47%	87%	46%	50%	77%	71%	82%	93%	89%	69%	64%	83%	71%	88%	92%	•
Advised not to claim overtime	25%	32%	39%	17%	43%	20%	13%	36%	48%	29%	60%	21%	9%	6%	15%	42%	23%	32%	10%	12%	•
Concerned it may negatively effect their assessment	42%	26%	41%	6%	26%	27%	23%	18%	34%	19%	45%	30%	20%	11%	15%	27%	31%	14%	16%	29%	•
GRADE:	В	B+	B-	A	B+	В	A-	В	C+	B+	B-	B+	А	Α	A-	В	A-	B+	Α	A-	
Wellbeing and workplace culture																	,				
Hospital facilities are very good or excellent	26%	55%	65%	17%	29%	57%	41%	9%	45%	48%	5%	66%	34%	41%	69%	60%	85%	66%	22%	58%	•
Teaching and training quality is very good or excellent	48%	61%	50%	33%	41%	43%	74%	46%	33%	44%	32%	66%	54%	18%	62%	16%	69%	45%	57%	50%	•
Concerned about making a clinical error due to fatigue caused by hours worked	39%	23%	56%	39%	59%	43%	23%	64%	62%	54%	53%	51%	40%	53%	46%	48%	54%	52%	43%	46%	•
Those who felt their safety had been compromised at work	17%	36%	26%	17%	47%	21%	8%	54%	29%	37%	21%	31%	22%	47%	15%	24%	23%	34%	16%	29%	•
Adequate break in between shifts (10 hours or more)	87%	87%	74%	94%	88%	93%	95%	64%	86%	83%	84%	93%	93%	94%	85%	100%	85%	83%	92%	88%	•
GRADE:	C÷	В	C+	C÷	С	B-	B+	C-	С	С	С	В	B-	С	B-	C+	В	C+	C÷	B-	
Bullying, discrimination and sexual harrassment																					
Personally experienced bullying	23%	26%	30%	23%	24%	43%	18%	70%	38%	36%	21%	24%	21%	6%	23%	33%	25%	38%	20%	42%	
Witnessed a colleague being bullied	41%	32%	41%	47%	24%	43%	18%	50%	41%	39%	32%	40%	21%	12%	38%	38%	33%	31%	31%	62%	
Personally experienced discrimination	9%	26%	26%	18%	15%	14%	13%	10%	26%	30%	16%	13%	6%	6%	15%	21%	25%	17%	14%	25%	
Witnessed a colleague being discriminated against	32%	16%	25%	12%	12%	36%	3%	20%	26%	34%	26%	30%	17%	6%	15%	29%	17%	28%	26%	25%	
Personally experienced sexual harassment	0%	13%	9%	0%	9%	0%	3%	20%	3%	14%	0%	11%	0%	6%	15%	4%	0%	0%	2%	4%	
Witnessed a colleague being sexually harassed	4%	6%	13%	0%	6%	21%	8%	10%	10%	20%	5%	9%	6%	6%	8%	8%	17%	7%	14%	12%	
For any of above, the perpetrators were SMO/consultants	38%	43%	49%	20%	33%	50%	57%	89%	54%	36%	75%	53%	17%	50%	22%	47%	57%	35%	62%	53%	•
For any of above,the perpetrators were registrars or PHOs	50%	43%	56%	60%	12%	60%	23%	56%	46%	48%	50%	18%	38%	0%	75%	53%	25%	53%	31%	71%	•
Did you feel there was anything you could do about it	50%	63%	47%	30%	50%	78%	57%	22%	22%	27%	54%	38%	65%	50%	38%	86%	0%	56%	42%	39%	•
Incidence report rate	17%	53%	39%	44%	33%	56%	46%	38%	12%	12%	43%	20%	19%	0%	29%	57%	50%	29%	14%	27%	•
Reported incidents were appropriately addressed	100%	67%	70%	33%	80%	60%	67%	50%	67%	67%	100%	78%	50%		100%	83%	50%	25%	33%	25%	•
Concerned that there might be negative consequences for reporting	92%	63%	81%	73%	68%	71%	52%	100%	96%	88%	100%	75%	69%	100%	100%	56%	88%	64%	73%	88%	•
GRADE:	B-	B-	C+	B-	В	C+	В	С	С	С	В	B-	В	В	C+	B-	C÷	C+	C÷	С	
OVERALL GRADE:	B-	B-	C+	B-	C+	B-	В	С	С	C+	С	B-	B-	C+	B-	B-	В	B-	B-	C÷	
COVID-19 questions																					
My hospital communication regarding COVID-19 was satisfactory	75%	70%	79%	62%	56%	69%	69%	30%	67%	74%	63%	70%	66%	56%	75%	68%	75%	62%	71%	64%	
My departments communication regarding COVID-19 was satisfactory	75%	60%	61%	44%	66%	54%	69%	50%	64%	72%	53%	68%	68%	50%	67%	61%	58%	69%	71%	50%	
The education programs offered during COVID-19 were satisfactory	65%	37%	32%	19%	28%	38%	61%	10%	25%	44%	37%	36%	42%	38%	42%	30%	17%	31%	40%	27%	
My career progression has been affected by COVID-19	10%	38%	34%	25%	22%	23%	42%	90%	34%	47%	21%	48%	44%	25%	50%	26%	42%	29%	41%	33%	

62%

C

25%

C+

35%

C+

42%

C+

67%

C

36%

C+

42%

C+



59%

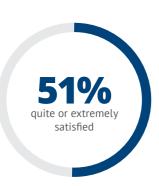


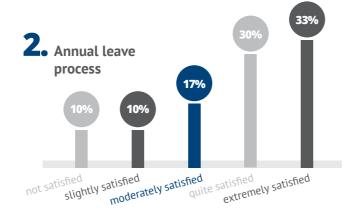
# TOP 6 PRIORITIES IN QUEENSLAND

The following are the 6 highest ranked domains in order of priority from 1 being the highest ranked.

• Clinical rotation preferences

> Clinical rotation preferences was rated the most important (47% ranked it as most important). Overall, 51% were quite or extremely satisfied with clinical rotation, which is slightly down from 55% in 2019





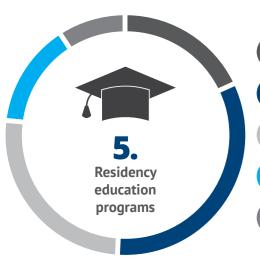
3. Being appropriately paid for unrostered overtime













16%

extremely satisfied



34%

quite satisfied



26%



moderately satisfied



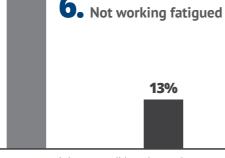
16% slightly satisfied



8% not at all satisfied with teaching and training opportunities



had been concerned that fatique caused by long hours may cause clinical error



did not have adequate breaks between shifts

#### STATISTICAL DISCLAIMER:

The AMA Queensland Resident Hospital Health Check survey was completed on a voluntary basis by Queensland doctors in training (including those at Intern, Junior House Officer, Senior House Officer, and continued Residency levels).

The purpose of this document is to evaluate the state of Junior Medical Officer employment in Queensland, and subsequently compare hospitals across the state. The findings of the survey assist graduating medical students as well as current interns and residents with their decision making process when deciding on which hospitals to apply for in the upcoming intern and RMO campaigns.

This information is provided in good faith and should only be used as a guide, it is intended to be general in nature and is made available on the understanding that the AMA Queensland and the AMA Queensland Council of Doctors in Training do not make any comment or assertion that the information provided by participants is correct, or reflects the experiences of doctors who did not participate in the survey.

Before relying on the information contained in the survey results provided, users should carefully evaluate its accuracy, currency, completeness and relevance for their purposes, personal objectives and career goals, and should make their own enquiries, including consulting with the relevant Hospital and staff at the relevant Hospital.

Whilst every effort has been made to ensure the accuracy of the collation of the information in this survey, AMA Queensland, its employees, agents, contractors, elected officers and the AMA Queensland Council of Doctors in Training cannot be held responsible for the information provided by participants in the survey and cannot be responsible for any loss or damage arising from any person or organisation as a result of the publication of this survey of information. AMA Queensland and the AMA Queensland Council of Doctors in Training do not take any responsibility for the outcomes published in the survey.

Grades were derived by firstly estimating the adjusted rate of the observed number of affirmative responses using a risk adjusted model for gender, training level and country of graduation (logistic regression run in the full sample), separately for each question and hospital/HHS. Adjusted rates were averaged across each domain (with rates of negative outcome subtracted from 1 so that all rates reflected positive outcomes). Grades ranged from E- to A+, and were assigned by giving the middle score (i.e., C) to average scores falling between 0.4375-0.5625, with grades increasing or decreasing with each 0.0625 increase or decrease in the score. The overall grade was the average of each domain specific grade. Lastly, the overall raw percentage of responses for each question in 2020 were compared with the same question in 2019, with improvement, no change or worsening indicated by green, yellow and red traffic lights respectively.

Comparison of results among hospitals/HHS must be made with caution, as the survey did not involve a probabilistic sampling frame, but instead was open to the entire Queensland RMO population, achieving a response rate of 31%. Further, as RMOs were not randomly allocated to hospitals differences in attitudes and expectations of respondents cannot be adequately controlled. This introduces biases into the results which cannot be accounted for. Thus, all differences among hospital/HHS should be interpreted as specific only to the survey respondents and must not be interpreted as representative of the experiences of all junior doctors in Queensland.

Before relying on the information contained in the survey results provided, users should carefully evaluate its accuracy, currency, completeness and relevance for their purposes, personal objectives and career goals, and should make their own enquiries, including consulting with the relevant hospital and staff at the relevant hospital. All analyses and reporting of results were undertaken by an independent statistician with a background in medical research.

#### **FURTHER INFORMATION**

If you would like to discuss any aspect of the 2020 AMA Queensland Resident Hospital Health Check survey in greater detail, please email workplacerelations@amag.com.au and a member of the Team will get back to you.

The AMA Queensland Industrial Relations Team also provides confidential, assured advice to Doctor in Training members on employment terms and conditions, and any aspect of your employment that is causing you concern. You can contact the Team on (07) 3872 2222 or email workplacerelations@amaq.com.au to discuss.

Not a member of AMA Queensland? You can join at ama.com.au/join-ama to receive support and guidance on employment matters in addition to a range of professional development programs, services and benefits to support your journey in medicine.

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