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76-HOUR SHIFT HIGHLIGHTS NEED FOR SAFER WORKING HOURS FOR PUBLIC HOSPITAL DOCTORS IN AUSTRALIA AMA Safe Hours Audit 2016

The latest AMA audit of working conditions for doctors in Australian public hospitals shows that one in two doctors (53 per cent) are working unsafe shifts that place them at a higher risk of fatigue, with one doctor reporting an unbroken 76-hour shift.

Shifts of 72 hours, 59 hours, 58 hours, and 53 hours were also reported.

Over a one-week period in November 2016, 716 salaried doctors and doctors in training (DiTs), including 675 hospital-based doctors, kept an online diary of their hours of work, on-call hours, non-work hours, and sleep time.

AMA President, Dr Michael Gannon, said today that the 2016 Audit – the fourth conducted by the AMA since 2001 – is an improvement on 2001 when 78 per cent of those surveyed reported working high risk hours, but it is worrying that there has been no improvement since the 2011 Audit, which also showed 53 per cent of doctors at significant risk of fatigue.

"The Audit warns that the demands on many doctors continue to be extreme," Dr Gannon said.

"It is disappointing that work and rostering practices in some hospitals are still contributing to doctor fatigue and stress, which ultimately affect patient safety and quality of care and the health of the doctor.

"It's no surprise that doctors at higher risk of fatigue reported working longer hours, longer shifts, more days on call, fewer days off, and skipping meal breaks.

"We are dismayed that one doctor reported working a 76-hour shift in 2016, almost double the longest shift reported in 2011.

"It is also a great concern the maximum total hours worked during the 2016 survey week was 118 hours, the same as 2006 – no improvement in a decade."

The most stressed disciplines were Intensive Care Physicians and Surgeons with 75 and 73 per cent respectively reporting they were working hours that placed them at significant or high risk of fatigue.

Research shows that fatigue endangers patient safety and can have a real impact on the health and wellbeing of doctors.

The 2016 AMA Audit confirms that the demands on public hospital doctors are still too great.

Dr Gannon said that State and Territory Governments and hospital administrators need to intensify efforts to ensure better rostering and safer work practices for hospital doctors.

"Reducing fatigue-related risks does not necessarily mean doctors have to work fewer hours, just better structured and safer ones," Dr Gannon said.

"It could be a case of smarter rostering practices, improved staffing levels, and better access to appropriate rest and leave provisions so that doctors get a chance to recover from extended unbroken periods of work.

"Administrators must also acknowledge that fatigue has a significant effect on doctors in training, who have to manage the competing demands of work, study, and exams.

"The Audit found that six out of ten Registrars are working rosters that place them at significant or higher risk of fatigue, compared to the average of five out of ten hospital-based doctors.

"Public hospitals need to strike a better balance for doctors in training.

"They must provide a quality training environment that recognises that safe working hours and conditions for teaching and training will ultimately ensure high quality patient care."

The AMA's National Code of Practice - Hours of Work, Shiftwork and Rostering for Hospital Doctors (the Code) was revised in 2016. It provides practical guidance on how to manage fatigue, and eliminate or minimise the risks associated with shiftwork and extended working hours. This should be adopted as the minimum standard by all States and Territories.

The **2016 AMA Safe Hours Audit Report** is at <u>https://ama.com.au/article/2016-ama-safe-hours-audit</u>

The AMA's National Code of Practice - Hours of Work, Shiftwork and Rostering for Hospital Doctors is at <u>https://ama.com.au/article/national-code-practice-hours-work-shiftwork-and-rostering-hospital-doctors</u>

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