

2016

INTRODUCTION

Workplace training environments for junior doctors were assessed by the South Australian Medical Education and Training (SA MET) Unit during 2016. Trainee medical officers ('trainees') across all stages of postgraduate training were invited to rate and comment on their clinical learning environments via anonymous online survey. This report presents aggregate data from the 107 trainees who responded.

Background

The SA MET Unit monitors and improves postgraduate medical training quality in South Australia (SA) on behalf of SA Health. Standards of clinical training are determined to a large extent by the settings in which junior doctors work and learn. The Quality Assurance of Training Settings (QATS) project aims to collect information about learning environments in SA Health workplaces, to shape ongoing improvements to training of South Australia's junior medical workforce.

QATS functions primarily as a 'screening' tool; by offering a confidential platform for trainees to communicate about their workplace learning environment, knowledge can be gained about training experiences that individuals may otherwise be reluctant to share.¹ Areas of concern can be further investigated where indicated.

Process

The online survey (www.surveymonkey.com) was open for six months during 2016 and this was promoted through the Local Health Networks (LHNs), Health Advisory Council committees and training groups. Trainees were asked to reflect on their last clinical placement.

Workplace learning environments were assessed using the Postgraduate Hospital Environment Measure (PHEEM)², an extensively used tool^{3,4} with good psychometric properties.^{5,6} Forty statements (see Box 1, appended) are rated on a five-point scale (0=strongly disagree, 4=strongly agree). Four negatively-worded items are reversed for scoring. Descriptions of individual PHEEM items include all available responses. Basic demographic information was sought as part of the survey, and trainees could add comments in text format.

Findings are shown as frequency (n) and percent. Due to rounding, percent values may not add to exactly 100.

¹ Ivory, K. Listen, hear, act: challenging medicine's culture of bad behaviour. *Med J Aust* 2014; 202.

² Roff et al. Development and validation of an instrument to measure postgraduate clinical learning and teaching educational environment. *Medical Teacher* 2005; 27.

³ Gough et al. PHEEM 'Downunder'. *Medical Teacher*, 2010; 32.

⁴ Wall et al. Is PHEEM a multi-dimensional instrument? *Medical Teacher* 2009; 31.

⁵ Clapham et al. Educational environment in intensive care medicine. *Medical Teacher* 2007; 29.

⁶ Riquelme et al. Psychometric analyses and internal consistency of the PHEEM. *Medical Teacher* 2009; 31.

Reporting

The present document gives an overview of results from all participating trainees.

RESULTS

PARTICIPATION

Survey was open for 6 months and 107 trainees responded.

Table 1 Survey distribution and response: Total and by data collection stream.

RESPONSE	TOTAL	Data collection streams				
		CALHN	SALHN	NALHN	WCHN	CHSALHN
Number of responses	107	24	46	21	12	4

CALHN: Central Adelaide Local Health Network; SALHN: Southern Adelaide LHN; NALHN: Northern Adelaide LHN; WCHN: Women's and Children's Health Network; Country Health SA Local Health Network.

Most of the respondents were based at the larger hospitals within their employing LHN. The majority of CALHN participants were based at RAH (13/24, 12.1%), while over two thirds of the SALHN trainees (34/46, 31.8%) worked at the Flinders Medical Centre (FMC). Most NALHN trainees worked at Lyell McEwin Hospital (16/21, 15%), all County Health SA Local Health Network worked at Mount Gambier Hospital (4/4 3.7%) and Women's and Children's Health Network trainees worked at the Women's and Children's Hospital (12/12 11.2%).

TRAINEE CHARACTERISTICS

There were slightly more female respondents than male (Table 2) and the largest group of respondents was the 20-29 years.

Table 2 gender and age group, all respondents.

GENDER	%	n	AGE GROUP	%	n
Male	46.7%	50	40-49 years	8.4%	9
Female	53.3%	57	30-39 years	35.5%	38
			20 – 29 years	56.1%	60
TOTAL	100%	107	TOTAL	100%	107

While trainees from all levels participated, resident medical officers comprised the largest group of respondents (Table 3).

Table 3 Levels of medical training, all respondents.

TRAINING STAGE	%	n
Registrar in accredited specialty training program	31.5%	34
Resident medical officer	41.7%	45
Intern	25.0%	27
Service Registrar (in non-accredited position)	.9%	1
TOTAL	100%	107

Topic areas from Postgraduate Hospital Educational Environment Measure

PHEEM items attracting positive ratings (agree or strongly agree) from large proportions of the sample indicate areas of relatively high performance in terms of the educational environment (Table 4).

Table 4 PHEEM items with which 80% or more of respondents agreed or strongly agreed.

PHEEM ITEMS	missing	agree/strongly agree %	uncertain %	disagree/strongly disagree %	N*
<i>In order of % agree or strongly agree</i>					
I feel physically safe within the hospital environment	7%	86%	5%	2%	107
I have an employment contract with information on my work hours	3%	88%	6%	3%	107
I do not have to perform inappropriate tasks **	4%	81%	7%	8%	107
There is not racism in this rotation **	4%	88%	5%	4%	107
There is not sex discrimination in this rotation**	4%	83%	8%	6%	107
I feel part of a team working here	8%	81%	6%	5%	107
My clinical teachers are enthusiastic	4%	81%	9%	5%	107
I have good clinical supervision at all times	4%	80%	8%	8%	107
My clinical teachers have good communication skills	4%	87%	4%	5%	107

*N = number of responses to item, % uses N as denominator.

** These items were presented as reverse within the survey (e.g. There is racism in this rotation)

Items with the greatest proportions of negative ratings (disagree or strongly disagree) could be viewed as reflecting areas of relatively poor performance (Table 5).

Table 5 PHEEM items with which 20% or more of respondents disagreed or strongly disagreed.

PHEEM ITEMS	missing	agree/strongly agree %	uncertain %	disagree/strongly disagree %	N
<i>In order of % disagree or strongly disagree</i>					
There are adequate catering facilities when I am on call	8%	29%	23%	40%	107
I am paged not inappropriately **	4%	50%	17%	29%	107
I have protected educational time in this rotation	5%	49%	11%	35%	107
I get regular feedback from seniors		69%	11%	20%	107
My hours conform to my Job and Person Specification	4%	64%	9%	23%	107
I had an informative orientation program	4%	64%	13%	20%	107

There were a number of areas about which at least one in five participants described feeling unsure (Table 6).

Table 6 PHEEM items about which 20% or more of respondents were uncertain.

PHEEM ITEMS	missing	agree/strongly agree %	uncertain %	disagree/strongly disagree %	N*
<i>In order of % uncertain (excludes items shown in previous tables)</i>					
Good counselling avail. for trainees w difficulties in this rotation	9%	36%	38%	16%	107
I have suitable access to careers advice	4%	51%	28%	17%	107
There is accurate unit specific written information available	4%	64%	24%	8%	107
Clinical teachers give good feedback on strengths and weaknesses	8%	57%	21%	14%	107
This hospital has good quality accommodation for trainees	5%	26%	48%	22%	107

*N = number of responses to item, % uses N as denominator.

DISCUSSION

The area of free text was utilised by 15 trainees. Within this section there was a detailed report of bullying and harassment which was addressed immediately with the Chief Medical Officer and the hospital.

Other key comments which can offer some useful insights include comments:

Managing work life balance:

I have struggled with maintaining work life balance with the at times unreasonable demands of the combined work and more particularly study here in this hospital (named)....

Difficulties posed by very high clinical workloads when trying to attend education:

A decision to forgo teaching and engaging on the job learning opportunities in order to keep up with workload must occur.

Unfortunately the hours (in ICU) e.g. nights/long shifts make it difficult to get to scheduled teaching from my training program.

Minimal teaching during relieving terms.

Bullying and Harassment:

Inappropriate and aggressive emails from administration staff

The 'culture' of the team is heavily dependent on the team in place at the time, not the hospital. If the senior staff have an interest in teaching and create the appropriate culture then the rotation tends to be much better for the junior staff.

Enjoyed rotation overall however note bullying by fellow during rounds.

This was the worse experience ever. Blame culture, bullying, subversiveness, toxic. Nothing changes apart from the head of unit becomes more smart about protecting himself (N.B. this issue was taken up with the hospital)

However there were also very positive statements about the rotations:

Good intern teaching weekly in the department

Great rotation, all the staff were friendly and there was good supports.

Mount Gambier Hospital is a fantastic site for learning as an intern doctor....the degree of responsibility seems to be much greater.....My consultants are very approachable and always willing to field questions when contactable (usually they are) as well as very interested in teaching. The education staff are very approachable too.

The respondent who raised issues of work life balance also complimented the Division of Medical sub specialities:

They are aware (of issues re work life balance) and are in the process of making steps to rectify this which is much appreciated.

Overall reported incidences of racism and sexism were low, and few participants perceived threats to their physical safety in the workplace. While this survey was only half the size of the 2015 survey there are similarities in some of the measures. In 2016 and in the 2015 survey the respondents reported similar levels of disagreement regarding the adequacy of catering facilities when on call and the level of inappropriate paging of the respondents. Trainees having

access to quality after-hours catering facilities would seem sensible, but the data suggest widespread inadequacy in this regard. The respondents in 2016 reported that 35% disagreed or strongly disagreed that they had protected educational time in the rotation which is an increase from 21%. This has been reported previously but continues to be an issue. Until the education and training is valued and staffing levels are sufficient for all trainees to take time to attend education sessions, this cannot change.

Nearly 39% of respondents did not know whether there were good counselling opportunities available for trainees who were having difficulties. While this level is similar to the previous year, there needs to be promotion of the counselling available within the LHNs and Employer Assistance Program to ensure that all trainees know of the services that are available, especially considering the prevalence and harm associated with poor psychological functioning among medical trainees.

Plans

QATS survey will be distributed in December 2017 and the survey will remain open until end of the year. Distribution will rely on SA MET committees and contacts and also clinical heads of unit and supervisors to further distribute the survey.

Box 1 Complete PHEEM item set showing subscales to which items contribute & responses - all participants.

PHEEM ITEMS <i>In order of % agree or strongly agree.</i>	missing		agree/strongly agree		uncertain		disagree/strongly disagree	
	%	n	%	n	%	n	%	n
**There is not racism in this rotation ^S	4%	4	88%	94	5%	5	4%	4
I have an employment contract w information on my work hours ^R	4%	4	88%	94	6%	6	3%	3
My clinical teachers have good communication skills ^T	4%	4	88%	94	4%	4	5%	5
I feel physically safe within the hospital environment ^S	8%	8	86%	92	4%	5	2%	2
**There is not sex discrimination in this rotation ^S	4%	4	83%	89	8%	8	6%	6
**I do not have to perform inappropriate tasks ^R	4%	4	81%	87	7%	7	8%	9
I feel part of a team working here ^R	8%	9	81%	87	6%	6	5%	5
My clinical teachers are enthusiastic ^T	4%	4	81%	86	10%	11	6%	6
I have good clinical supervision at all times ^T	4%	4	80%	86	8%	9	8%	8
I have good collaboration w other doctors in my training program ^S	4%	4	79%	85	9%	10	8%	8
I have the appropriate level of responsibility in this rotation ^R	4%	4	79%	85	9%	10	8%	8
My clinical teachers have good teaching skills ^T	8%	9	77%	82	9%	10	6%	6
My clinical teachers encourage me to be an independent learner ^T	8%	9	77%	85	11%	12	8%	9
My clinical teachers promote an atmosphere of mutual respect ^R	8%	9	76%	81	8%	9	7%	8
My clinical supervisors set clear expectations ^T	4%	4	76%	81	13%	14	8%	8
I have opportunities to gain approp skills in practical procedures ^R	8%	9	74%	79	8%	9	9%	10
My clinical teachers are accessible ^T	8%	9	73%	78	8%	9	10%	11
I have opportunities to gain approp skills in practical procedures ^R	8%	9	74%	79	8%	9	9%	10
I am able to participate actively in educational events ^T	4%	4	74%	79	10%	11	12%	13
My clinical teachers are well organised ^T	8%	8	72%	77	13%	14	8%	8
The training this rotation makes me feel ready for the next stage ^R	8%	9	70%	75	16%	17	6%	6
I have enough clinical learning opportunities for my needs ^T	8%	9	69%	72	16%	17	8%	9
There are clear clinical protocols in this rotation ^R	4%	4	69%	74	16%	17	11%	29
There is access to educational program relevant to my needs ^T	8%	8	69%	74	12%	13	11%	12
I have the opportunity to provide continuity of care ^R	4%	4	69%	73	10%	11	18%	19
I get a lot of enjoyment out of my present job ^S	8%	9	68%	73	12%	13	11%	12
Senior staff utilise learning opportunities effectively ^T	8%	9	67%	72	16%	17	8%	9
My hours conform to my Job & Person Specification ^R	4%	4	64%	68	9%	10	23%	25
I had an informative orientation program ^R	4%	4	64%	68	13%	14	20%	21
My workload in this job is fine ^R	8%	9	63%	67	18%	19	11%	12
There is accurate unit specific written information available ^R	4%	4	63%	168	24%	26	8%	9
There is a no-blame culture in this rotation ^S	8%	8	63%	67	17%	18	13%	14
I get regular feedback from seniors ^T	8%	8	61%	65	12%	13	20%	21
Clinical teachers give good feedback on strengths, weaknesses ^T	8%	9	57%	61	21%	22	14%	15
I have suitable access to careers advice ^S	4%	4	51%	55	28%	30	17%	18
I have protected educational time in this rotation ^T	5%	5	50%	53	11%	12	35%	37
**I am not paged inappropriately ^R	4%	4	51%	54	17%	18	29%	31
Good counselling avail. for trainees w difficulties in this rotation ^S	9%	10	36%	39	38%	41	16%	17
There are adequate catering facilities when I am on call ^S	8%	8	29%	31	23%	25	40%	43
This hospital has good quality accommodation for trainees ^S	5%	5	26%	28	48%	51	22%	23

** These items were presented as reverse within the survey (e.g. There is racism in this rotation)