## INTRODUCTION

In 2019, AMA Queensland surveyed Resident Medical Officers (including those at Intern, Junior Medical Officer, Senior Medical Officer and Specialist Medical Officer career levels) to evaluate the state of Junior Medical Officer employment in Queensland, and subsequently compare hospitals across the state. A total of 852 Doctors in Training across 19 hospital and health services responded to the survey, representing approximately 38% of Queensland Health’s 2,313 eligible Resident Medical Officers (RMOs). This is the fourth consecutive year the survey has been conducted. The questions were similar to the 2018, 2017 and 2016 surveys, so that results could be compared across the four years.

This year’s survey achieved a 45% participation increase from 2018.

## KEY FINDINGS

### Access to Leave

In 2019, only 64% of the total sample were satisfied that their leave preferences had been taken into consideration, which is unchanged since 2018, down from 79% in 2017.

#### Professional/career development leave

In 2018, only 59% of respondents had applied for professional development leave, which was lower than 27% of those who applied in 2019. 36% and 16% respectively. Further, 53% of respondents were satisfied that their career development preferences had been accommodated and 51% were satisfied with opportunities to be involved in research and auditing (in 2018, 36% and 55% respectively).

#### Pay and overtime

Among the full sample, a total of 20% of respondents reported not being fully paid for overtime worked, down from 24% in 2018 and 17% in 2019. Further, 21% of Doctor in Training respondents reported that they had been advised not to claim overtime payment by an Administrative Officer or Senior Medical Officer and 27% believed that they had been advised not to claim overtime payment by an Administrative Officer or Senior Medical Officer and 27% believed that they had been advised not to claim overtime payment by a Medical Administrator. 55% felt that when reported the incident was adequately dealt with. If you are experiencing any of the issues outlined above, contact the AMA Queensland Workplace Relations Team on (07) 3872 2222 or.

#### Bullying, harassment and discrimination

Among the respondents, 15% had personally experienced bullying, harassment, or discrimination. 38% felt there was nothing they could do about it and 34% reported the incident, and only 28% felt that when reported the incident was adequately dealt with.

### Performance

Gra^de: C+ C C+ C C- C E+ C C+ C C C+ C C- C C C C+ C

### Key Findings

**Key Findings**

<table>
<thead>
<tr>
<th>Access to annual leave</th>
<th>Only partial preference for leave taken into consideration</th>
<th>CR</th>
<th>E</th>
<th>D</th>
<th>C</th>
<th>B+</th>
<th>B</th>
<th>B-</th>
<th>C+</th>
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<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arizona</td>
<td></td>
<td>39%</td>
<td>62%</td>
<td>71%</td>
<td>76%</td>
<td>54%</td>
<td>68%</td>
<td>58%</td>
<td>64%</td>
<td>59%</td>
<td>58%</td>
<td>74%</td>
<td>77%</td>
<td>55%</td>
<td>58%</td>
</tr>
<tr>
<td>CR</td>
<td></td>
<td>B-</td>
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<td>C</td>
</tr>
<tr>
<td>Career progression and development</td>
<td>Above the PI</td>
<td>39%</td>
<td>49%</td>
<td>61%</td>
<td>64%</td>
<td>46%</td>
<td>58%</td>
<td>55%</td>
<td>58%</td>
<td>61%</td>
<td>58%</td>
<td>74%</td>
<td>77%</td>
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<tr>
<td>CR</td>
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</tr>
</tbody>
</table>
| Clinical rotation preferences taken into consideration | 32%| 32%| 31%| 36%| 61%| 38%| 44%| 66%| 38%| 46%| 67%| 53%| 44%| 38%| 46%| 53%| 44%| 38%| 46%| 53%| 44%| 38%| 46%| 53%| 44%
| CR                     |                                                          | B- | C | C+ | C | C- | B | B | C | C | C | C | C | C | C | C | C | C+ | C | C | C |
| GRADE: C+ C C+ C C- C E+ C C+ C C C+ C C- C C C C+ C |

### Hours of work and overtime

- **Working >90 hours per fortnight:**
  - In 2019, 38% of respondents had applied for professional development leave, which was lower than 27% of those who applied in 2019. 36% and 16% respectively. Further, 53% of respondents were satisfied that their career development preferences had been accommodated and 51% were satisfied with opportunities to be involved in research and auditing (in 2018, 36% and 55% respectively).

- **Pay and overtime:**
  - Among the full sample, a total of 20% of respondents reported not being fully paid for overtime worked, down from 24% in 2018 and 17% in 2019. Further, 21% of Doctor in Training respondents reported that they had been advised not to claim overtime payment by an Administrative Officer or Senior Medical Officer and 27% believed that they had been advised not to claim overtime payment by a Medical Administrator. 55% felt that when reported the incident was adequately dealt with. If you are experiencing any of the issues outlined above, contact the AMA Queensland Workplace Relations Team on (07) 3872 2222 or.

- **Access to annual leave:**
  - In 2019, only 64% of the total sample were satisfied that their leave preferences had been taken into consideration, which is unchanged since 2018, down from 79% in 2017.

### Wellbeing and workplace culture

- **Wellbeing and workplace culture:**
  - 60% of respondents were satisfied that their leave preferences had been taken into consideration, which is unchanged since 2018, down from 79% in 2017.

### Pay and overtime

- **Pay and overtime:**
  - Among the full sample, a total of 20% of respondents reported not being fully paid for overtime worked, down from 24% in 2018 and 17% in 2019. Further, 21% of Doctor in Training respondents reported that they had been advised not to claim overtime payment by an Administrative Officer or Senior Medical Officer and 27% believed that they had been advised not to claim overtime payment by a Medical Administrator. 55% felt that when reported the incident was adequately dealt with. If you are experiencing any of the issues outlined above, contact the AMA Queensland Workplace Relations Team on (07) 3872 2222 or.

### Bullying, harassment and discrimination

- **Bullying, harassment and discrimination:**
  - Among the respondents, 15% had personally experienced bullying, harassment, or discrimination. 38% felt there was nothing they could do about it and 34% reported the incident, and only 28% felt that when reported the incident was adequately dealt with.
TOP 6 PRIORITIES IN QUEENSLAND

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

1. Clinical rotation preferences
   - 55% were quite to extremely satisfied

2. Annual leave process
   - 9% not satisfied
   - 10% highly satisfied
   - 17% moderately satisfied
   - 25% quite satisfied
   - 29% extremely satisfied

3. Being appropriately paid for unrostered overtime
   - 7% DID NOT GET PAID for claimed overtime
   - 13% GOT PAID SOME of the claimed overtime
   - 80% GOT PAID ALL the overtime they claimed

4. Personal safety at work
   - 22% felt their safety had been compromised at work

5. Residency education programs
   - 18% extremely satisfied
   - 33% quite satisfied
   - 26% moderately satisfied
   - 14% slightly satisfied
   - 9% not satisfied

6. Working fatigued
   - 46% concerned that fatigue caused by long hours may cause clinical error
   - 13% did not have adequate breaks between shifts

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- No membership fee for one year

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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 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, ASMOFQ and the AMA Queensland Council of Doctors in Training do not make any commitment 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, ASMOFQ, its employees, directors, 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, ASMOFQ 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 2019 were compared with the same question in 2018, with improvement (1%+) or change or worsening (1% 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 all the entire QLD RMO population, achieving a response rate of 38%. 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 Doctors in Training in Queensland.

The grading scheme has been updated since the 2018 survey: in 2018 the grades were assigned ‘relative’ to best and worst performing hospitals (the average score was firstly range normalised such that the best hospital was given an A+ and the worst an E-), while in 2019 the average grades were not recalculated such that grades were attributed to the absolute scores.

All analyses and reporting of results, including the derivation of the grade, were undertaken by an Epidemiologist (PhD) with considerable experience in research design and statistical analysis and a strong track-record in healthresearch.

FURTHER INFORMATION

If you would like to discuss any aspect of the 2018 AMA Queensland CDT Resident Hospital Health Check survey in greater detail, please email workplacerelations@ama.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 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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