

Medical Training Survey

2024 Report
The Royal Australasian College of
Surgeons

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Welcome

2024 MEDICAL TRAINING SURVEY

Medical Training Survey data is getting richer each year.

Since 2019, trainees have been using their voice, in their survey. Through the MTS, they are highlighting what is going well in medical training in Australia and safely calling out where action is needed.

There is much to learn from rich MTS data and the 2024 headline results are interesting and important. There are also gems beneath the surface, clearly visible through tailored searches in the online data dashboard. 2024 results will be accessible in searchable form in early 2025 on the MedicalTrainingSurvey.gov.au website.

With strict confidentiality rules in place to protect trainees, the MTS online searchable database can reveal meaningful insights. Use it to compare trainees' feedback by specialty and jurisdiction. Take a deep dive into the culture of training, and make comparisons across sites.

There is a lot of stability and good news in the 2024 MTS results. The national quality of trainee supervision, orientation, teaching, education and training on patient safety is again high.

Worryingly, 29% of Aboriginal and Torres Strait Islander trainees and about 19% of all trainees are considering a career outside of medicine.

Unacceptably, again, one third of trainees (33%) reported having experienced or witnessed bullying, discrimination, harassment, sexual harassment or racism, spiking to 54% of Aboriginal and Torres Strait Islander trainees and 44% of interns. Around 70% of trainees reported that this impacted negatively on their training.

Aboriginal and Torres Strait Islander trainees report experiencing or witnessing racism at more than double the rate of other trainees: 38% compared to 17% of other trainees. There is no place for this in any civil community.

Within these data, there is nuance. The source of reported unprofessional behaviour varies between groups of trainees. For GP trainees (49%) and interns (54%), patients and their families were the most common source of unprofessional behaviour, anchoring deficits in the culture of medicine firmly in the context of wider community attitudes and behaviours. With robust evidence generated by trainees in the MTS, comes knowledge and the ability to develop effective strategies for change.

We are pleased that in 2024, 203 Aboriginal and Torres

Strait Islander trainees took part in the MTS. This is nearly a third of all registered Aboriginal and Torres Strait Islander medical practitioners and, it seems, a very healthy proportion of all Aboriginal and Torres Strait Islander trainees. We thank the Australian Indigenous Doctors Association (AIDA) for their work with trainees to build trust and confidence in the MTS. With a strong evidence base, action can flow.

Again in 2024, new MTS questions generated new insights:

- 81% of interns reported that their medical school prepared them well for medical training
- More than 1,000 trainees (5%) told us they had experienced/witnessed sexual harassment
- 62% of trainees agreed/strongly agreed that the financial cost of their College training program had led to stress
- 16% of trainees agreed/strongly agreed that the cost of their College training program had been a barrier to their progressing in the training program.

On flexible training, 68% of trainees agreed/strongly agreed that their College supported flexible training arrangements (up 3%), with workplace unavailability the main reason for not accessing it.

It's striking to think that many current trainees weren't yet in medical school when a previous cohort of trainees — most now specialists - campaigned successfully for the Board to establish the MTS. Not all current trainees know the MTS was created for trainees, with trainees.

With six consecutive years' MTS results now at our fingertips, and data generated by more than 50% of trainees each year, we have the opportunity to examine the data closely. In this detail lies the evidence that can inform constructive change.



Dr Anne Tonkin AO Chair, Medical Board of Australia

Background

INTRODUCTION

The Medical Training Survey (MTS) is a national, profession-wide survey of doctors in training in Australia. It is a confidential way to get national, comparative data to strengthen medical training in Australia. The MTS is conducted annually with doctors in training, with 2024 representing the sixth wave of data collection.

The objectives of the survey are to:

- promote better understanding of the quality of medical training in Australia
- identify how best to improve medical training in Australia, and

 identify and help deal with potential issues in medical training that could impact on patient safety, including environment and culture, unacceptable behaviours and poor supervision.

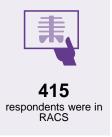
The Australian Health Practitioner Regulation Agency (Ahpra), on behalf of the Medical Board of Australia (the Board), commissioned EY Sweeney to undertake data collection and report on the results for the MTS.

METHOD

Data collection for the MTS involved receiving responses to an online survey from n=24,812 doctors in training, with n=23,859 responses eligible for analysis (i.e. currently training in Australia) between 4 August and 9 October 2024.







Different versions of the survey were used to reflect the particular training environment of doctors who are at different stages in their training. Doctors in training answered questions about their experiences in their workplace. This could be the doctor in training's current setting, workplace, placement or rotation, or might be a previous setting, if they have only been practising or training in their current setting for less than two weeks.

For this report, results for The Royal Australasian College of Surgeons (RACS) are presented at an overall level. To explore results within RACS further, please visit medicaltrainingsurvey.gov.au/results.

INTERPRETING THIS REPORT

This report provides key results based on n = 415 doctors in training at the RACS compared against national results (n = 23,859) of all eligible doctors in training (i.e. currently training in Australia).

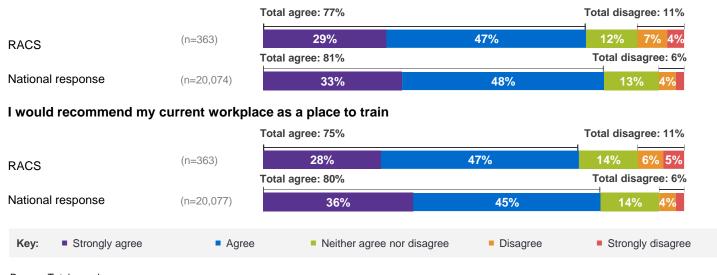
Bases exclude 'not applicable' responses or where the respondent skipped the question. Data in this report are unweighted. Labels on stacked charts are hidden for results 3% or less. Results with base sizes of less than n=10 are suppressed.

Data percentages displayed throughout the report are rounded to the nearest whole number. As such, if there is an expectation for a given chart or table that all percentages stated should add to 100% or nets should equal to the sum of their parts, this may not happen due to rounding.

Executive summary

OVERALL SATISFACTION

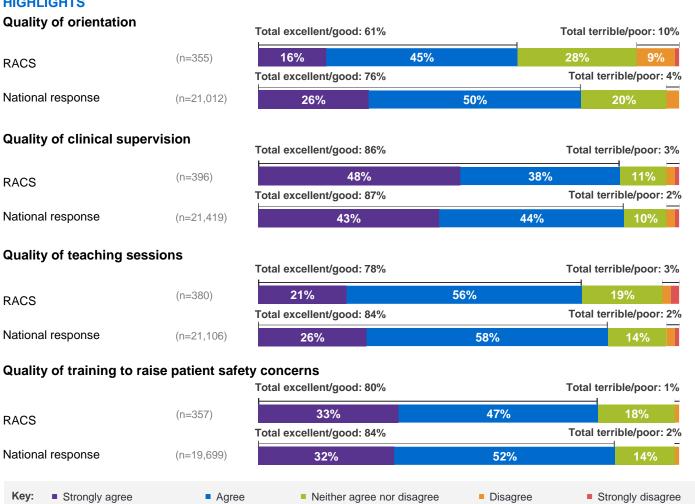
I would recommend my current training position to other doctors



Base: Total sample

Q50. Thinking about your setting, to what extent do you agree or disagree with the following statements?

HIGHLIGHTS



Base: Orientation received | Q27B. How would you rate the quality of your orientation?

Have a supervisor | Q31. For your setting, how would you rate the quality of your clinical supervision / peer review? Base:

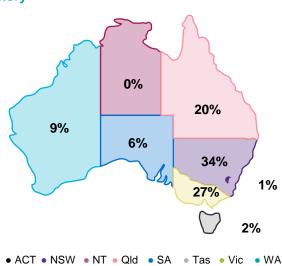
Total sample | Q39. Overall, how would you rate the quality of the teaching sessions? Base:

Base: Received training on how to raise concerns about patient safety | Q48. In your setting, how would you rate the quality of your training on how to raise

Profile of RACS trainees

SETTING





Base: Total sample (RACS: n = 415)

Q4. In which state or territory is your current term/rotation/placement based?

Region



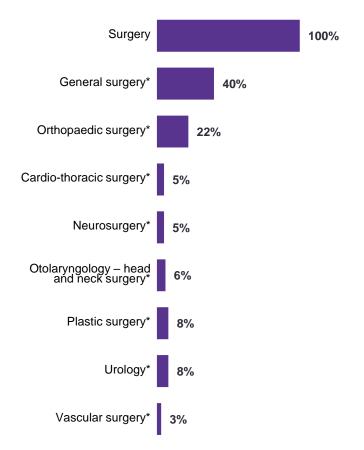




Do not wish to specify 1%

Base: Total sample (RACS: n = 415) Q6. Is your current setting in a...?

Current rotation / term / position



Base: Total sample (RACS: n = 415), fields with 10 or more responses shown.

Note: fields marked with an * are subspecialties.

Q9a. Which area are you currently practising in? | Q9b. If applicable, which subspecialty area are you practising in?

Facility

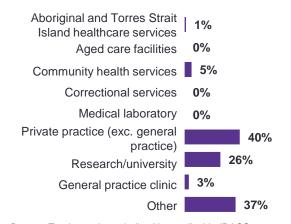


Base: Total sample (RACS: n = 415)

Q5A. Is your current position/term/rotation/placement

predominantly in a hospital?

Additional settings worked in



Base: Total sample excluding Not applicable (RACS: n

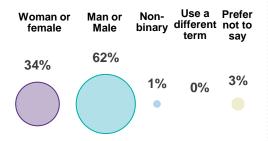
= 73)

Q5c. Select any additional settings you work in / Which settings do you work in?

Profile of RACS doctors in training

DEMOGRAPHICS

Do you identify as...



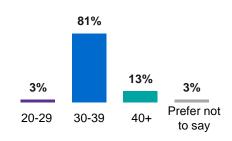
Total sample (RACS: n = 358) Base:

Q55. Do you identify as ...?

Note: For this question, answers that are less than 1% and have one or more responses

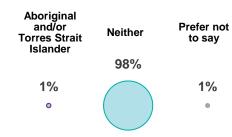
have been shown as <1%

Age in years



Total sample (RACS: n = 350) Base: Q56. What is your age?

Cultural background

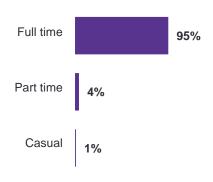


Total sample (RACS: n = 360) Base: Q57. Do you identify as an Australian

Aboriginal and/or Torres Strait Islander

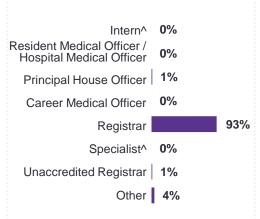
person?

Employment



Base: Total sample (RACS: n = 415) Are you employed: Q2.

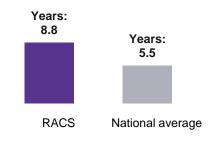
Role



Base: Total sample (RACS: n = 415 What is your role in the setting? Q7.

Postgraduate year

Postgraduate year average is

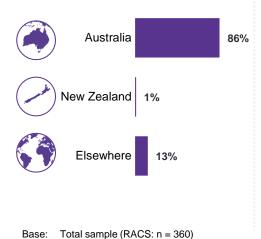


Base: Total sample (National: 2024 n = 23.835:

RACS: 2024 n = 415)

Q1. What is your postgraduate year?

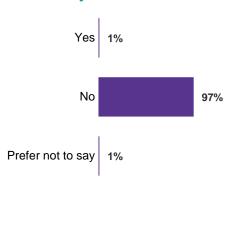
Primary degree



Q58a.

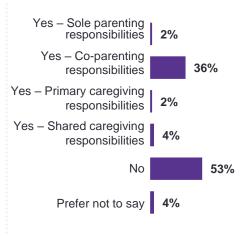
Did you complete your primary medical degree in Australia or New Zealand?

Do you identify as a person with a disability...



Total sample (RACS: n = 359) Base: Q60. Do you identify as a person with a disability?

Caring responsibilities



Base: Total sample (RACS: n = 360) Q61.

During your usual work week, do you spend time providing unpaid care, help, or assistance for family members or others?

Profile of RACS trainees

SPECIALIST TRAINEES

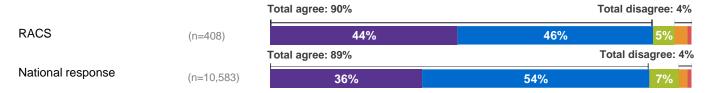
On average, specialist trainees with RACS have been in their training program for



Base: Specialist trainees (National: 2024 n = 10,724; RACS: 2024 n = 414) Q15. How many years have you been in the College training program?

TRAINING PROGRAM PROVIDED BY COLLEGE

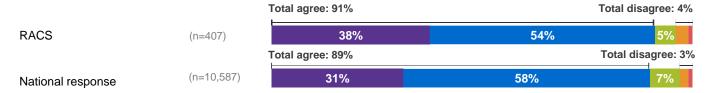
The College training program is relevant to my development



There are opportunities to meet the requirements of the training program in my current setting



I understand what I need to do to meet my training program requirements



The College supports flexible training arrangements



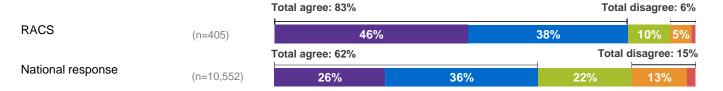


Base: Specialist trainees

Q21. Thinking about your [COLLEGE] training program, to what extent do you agree or disagree with each of the following statements?

Financial impact of training program

The financial cost of my College training program has led to stress



My College provides clear and accessible information about how my fees are spent



The cost of my College training program has been a barrier to my progression in the training program



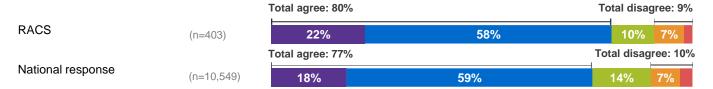


Base: Specialist trainees

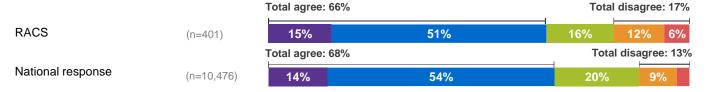
Q21a. Thinking about your [COLLEGE] training program, to what extent do you agree or disagree with each of the following statements?

COMMUNICATION WITH COLLEGE

My College clearly communicates the requirements of my training program

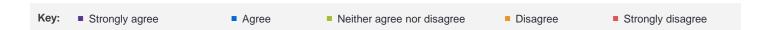


My College clearly communicates with me about changes to my training program and how they affect me



I know who to contact at the College about my training program



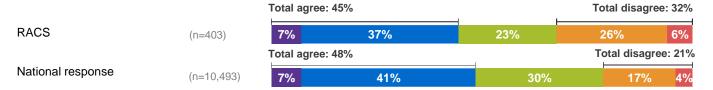


Base: Specialist trainees

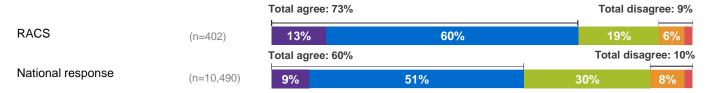
Q22. Thinking about how [COLLEGE] communicates with you about your training program, to what extent do you agree or disagree with the following statements?

ENGAGEMENT WITH COLLEGE

The College seeks my views on the training program



I am represented by doctors in training on the College's training and/or education committees

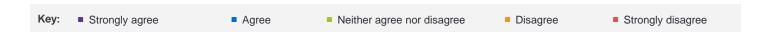


The College provides me with access to psychological and/or mental health support services



There are safe mechanisms for raising training/wellbeing concerns with the College





Base: Specialist trainees

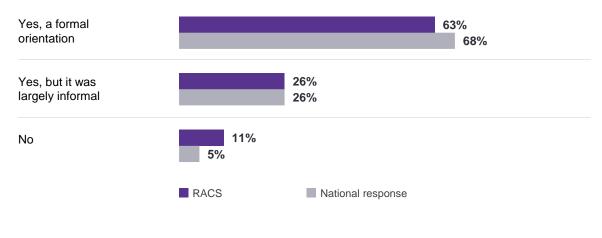
Q25. Thinking about how [COLLEGE] engages with you, to what extent do you agree or disagree with the following statements?

Profile | Training curriculum | Orientation | Assessment | Clinical supervision | Access to teaching | Facilities | Workplace environment and culture | Patient safety | Overall satisfaction | Future career intentions

Orientation

DID YOU RECEIVE AN ORIENTATION TO YOUR SETTING?

Doctors in training were asked questions about their experiences in their workplace. This could be the doctor in training's current setting, workplace, placement or rotation, or might be a previous setting, if they had only been practising or training in their current setting for less than two weeks.

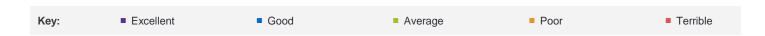


Base: Total sample (National: 2024 n = 22,189; RACS: 2024 n = 399)

Q27a. Did you receive an orientation to your setting?

HOW WOULD YOU RATE THE QUALITY OF YOUR ORIENTATION?



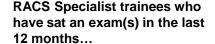


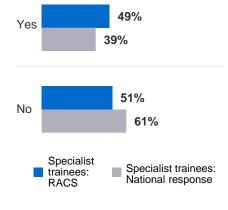
Base: Received an orientation

Q27b. How would you rate the quality of your orientation?

Assessment

COLLEGE EXAMS

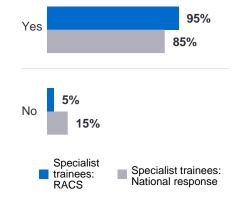




Specialist trainees (National: 2024 n = 10,583; RACS: 2024 n = 406)

Q23a. In the last 12 months, have you sat one or more exams from ...?

Of those who sat an exam(s) receive their results...



Sat an exam (National: 2024 n = 4,101; RACS: 2024 n = 197)

Q23b. Have you received the results of your most recent exam from ...?

Of those who received results, passed their exam(s)...

Yes



87%

Received results (National: 2024 n =

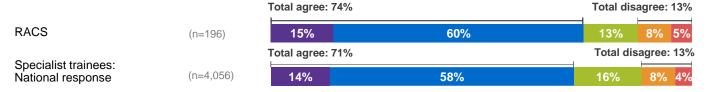
3,219; RACS: 2024 n = 178) Q23c. Did you pass the exam for...?

RACS

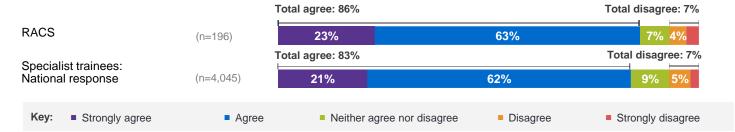
The exam(s) reflected the college training curriculum



The information the college provided about the exam(s) was accurate and appropriate



The exam(s) ran smoothly on the day



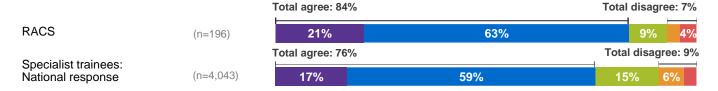
Base: Specialist trainees who sat an exam

Thinking about all your [COLLEGE] exam(s) not just the most recent, to what extent do you agree or disagree with the following statements? Ω24.

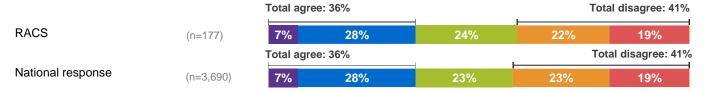
Assessment

COLLEGE EXAMS (continued)

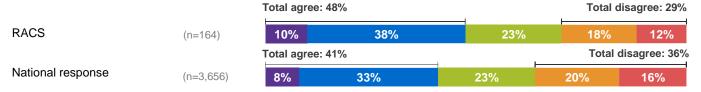
The exam(s) were conducted fairly



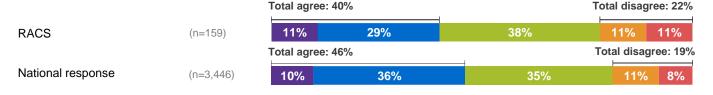
I received useful feedback about my performance in the exam(s)



The feedback is timely



I received support from my College when needed





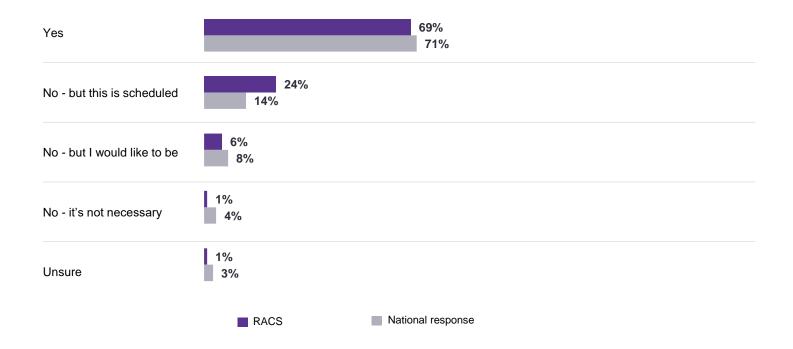
Base: Specialist trainees who sat an exam

Q24. Thinking about all your [COLLEGE] exam(s) not just the most recent, to what extent do you agree or disagree with the following statements?

Profile | Training curriculum | Orientation | Assessment | Clinical supervision | Access to teaching | Facilities | Workplace environment and culture | Patient safety | Overall satisfaction | Future career intentions

Assessment

HAS YOUR PERFORMANCE BEEN ASSESSED IN YOUR SETTING?



Prevocational and unaccredited trainees, specialist trainees and IMGs (National: 2024 n = 20,413; RACS: 2024 n = 395)

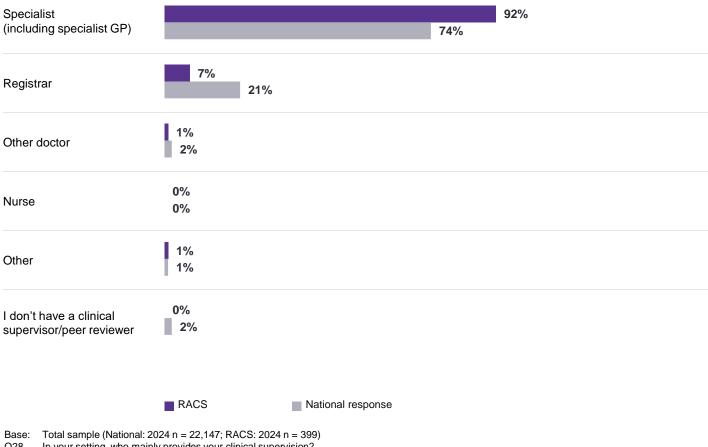
Q32. Has your performance been assessed in your setting?

Base:

Profile | Training curriculum | Orientation | Assessment | Clinical supervision | Access to teaching | Facilities Workplace environment and culture | Patient safety | Overall satisfaction | Future career intentions

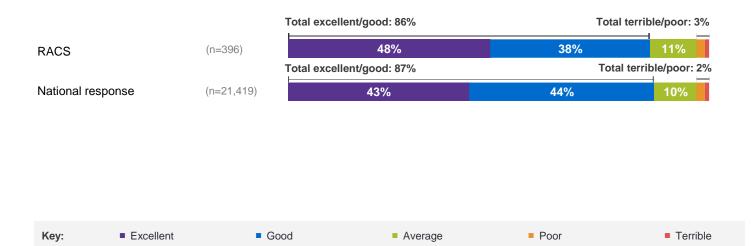
Clinical supervision

WHO MAINLY PROVIDES YOUR CLINICAL SUPERVISION?



Q28. In your setting, who mainly provides your clinical supervision?

HOW WOULD YOU RATE THE QUALITY OF YOUR SUPERVISION?



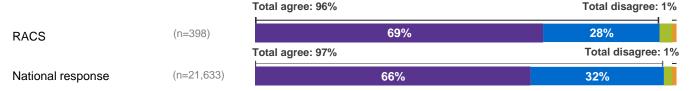
Base: Received supervision

For your setting, how would you rate the quality of your clinical supervision? Q31.

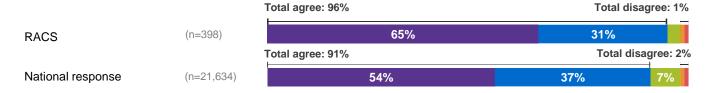
Clinical supervision

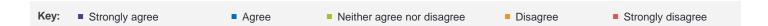
IF CLINICAL SUPERVISOR(S) ARE NOT AVAILABLE...

I am able to contact other senior medical staff IN HOURS if I am concerned about a patient



I am able to contact other senior medical staff AFTER HOURS if I am concerned about a patient





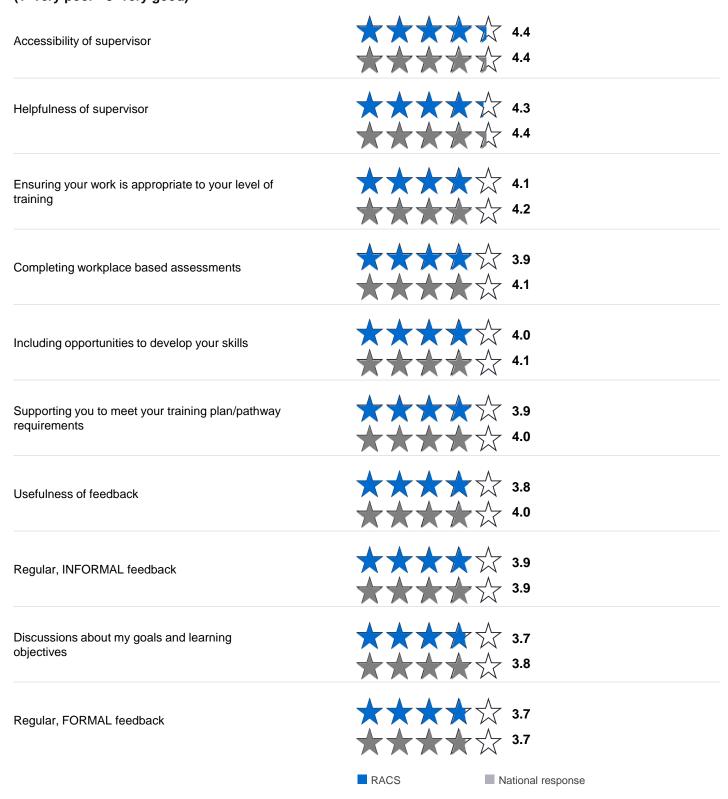
Base: Total sample

Q29. To what extent do you agree or disagree with the following statements?

Clinical supervision

HOW WOULD YOU RATE THE QUALITY OF YOUR OVERALL CLINICAL SUPERVISION FOR:

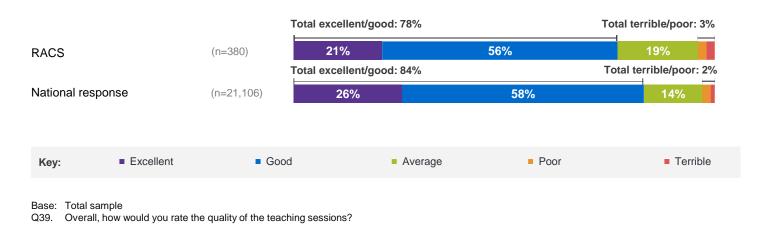
Average out of 5 (1=very poor - 5=very good)



Base: Have a supervisor (National: 2024 max n = 21,062; RACS: 2024 max n = 387)

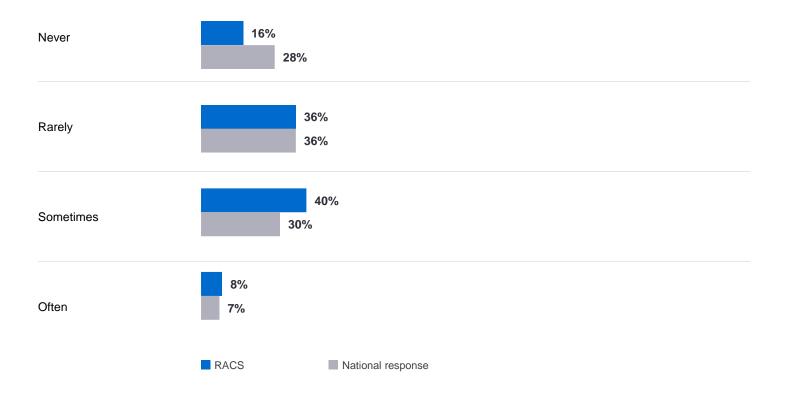
Q30. In your setting, how would you rate the quality of your overall clinical supervision for...?

OVERALL, HOW WOULD YOU RATE THE QUALITY OF THE TEACHING SESSIONS?



TRAINING AND OTHER JOB RESPONSIBILITIES

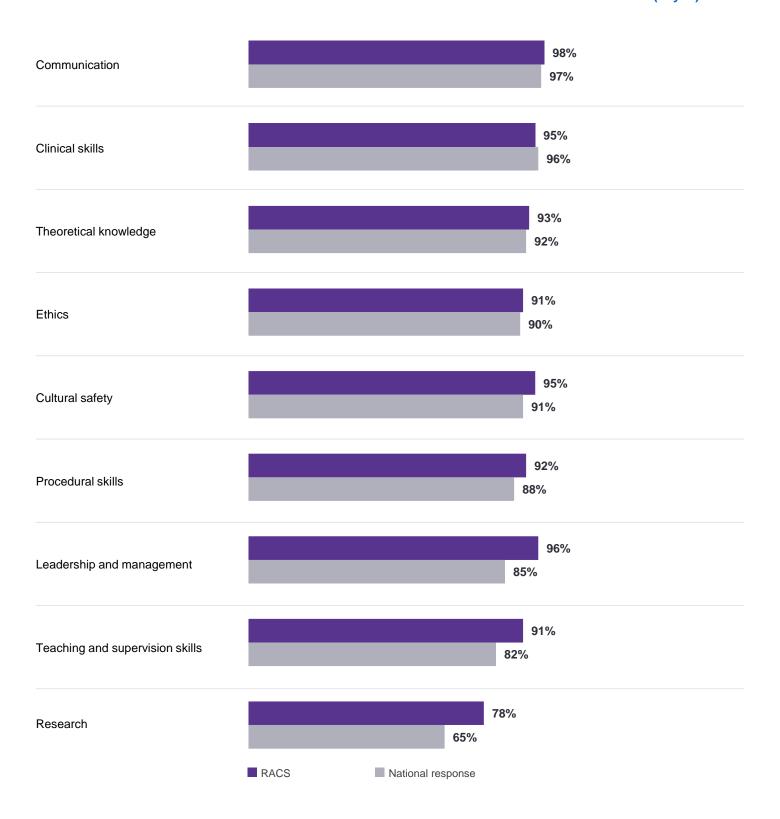
How regularly job responsibilities are preventing doctors in training from meeting training requirements



Base: Total sample (National: 2024 n = 21,394; RACS: 2024 n = 387)

Q36. Which of the following statements best describes the interaction between your training requirements and the responsibilities of your job? My job responsibilities...

DO YOU HAVE SUFFICIENT OPPORTUNITIES TO DEVELOP YOUR KNOWLEDGE AND SKILLS IN: (% yes)

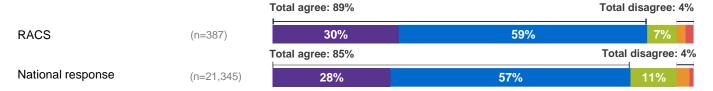


Base: Total sample (National: 2024 max n = 21,411 RACS: 2024 max n = 388)

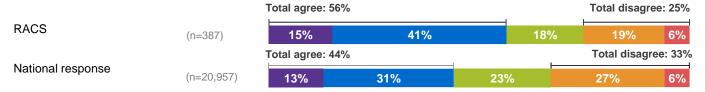
Q35. Thinking about the development of your knowledge and skills, in your setting, do you have sufficient opportunities to develop your...?

DEVELOPMENT OF CLINICAL AND PRACTICAL SKILLS

I can access the training opportunities available to me

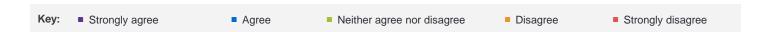


I have to compete with other doctors for access to opportunities



I have to compete with other health professionals for access to opportunities



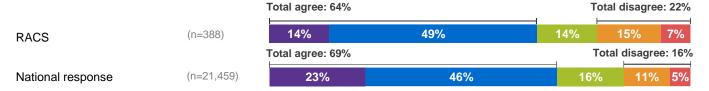


Base: Total sample

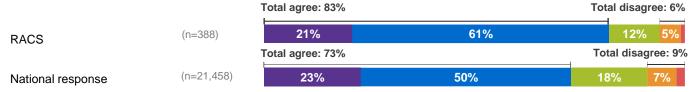
Q33. Thinking about the development of your skills, to what extent do you agree or disagree with the following statements?

ACCESS TO TEACHING AND RESEARCH

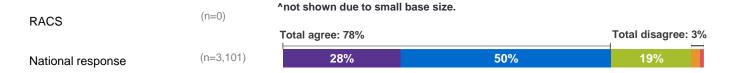
I have access to protected study time/leave



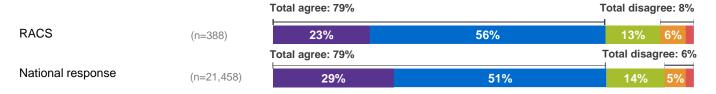
I am able to attend conferences, courses and/or external education events



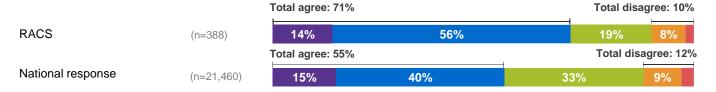
My GP supervisor supports me to attend formal and informal teaching sessions^

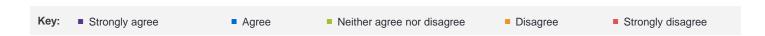


My employer supports me to attend formal and informal teaching sessions



I am able participate in research activities





Base: Total sample

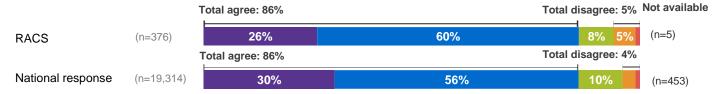
Note: These questions were only asked of Specialist GP trainees, as such, data is filtered to Specialist GP trainees

Q34. Thinking about access to teaching and research in your setting, to what extent do you agree or disagree with the following statements?

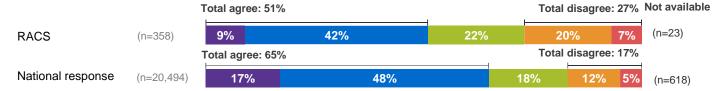
THE FOLLOWING EDUCATIONAL ACTIVITIES HAVE BEEN USEFUL IN YOUR DEVELOPMENT AS A DOCTOR

training with RACS were asked their level of agreement on whether an educational activity had been useful in their development as a doctor. Of the educational activities available, were rated the most useful.

Formal education program[^]



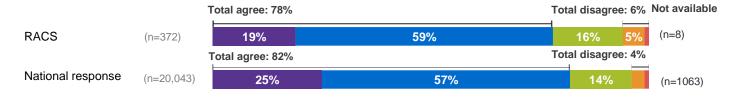
Online modules (formal and/or informal)

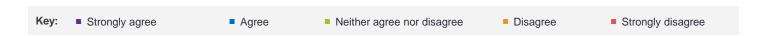


Teaching in the course of patient care (bedside teaching)



Team or unit based activities





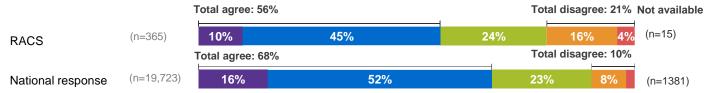
Base: Total sample excluding not available (shown separately)

Note: This question was not shown to Interns.

Q38. To what extent do you agree or disagree that the following educational activities have been useful in your development as a doctor?

THE FOLLOWING EDUCATIONAL ACTIVITIES HAVE BEEN USEFUL IN YOUR DEVELOPMENT AS A DOCTOR (continued)

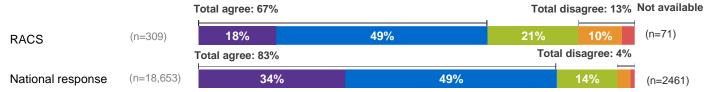
Medical/surgical and/or hospital-wide meetings



Multidisciplinary meetings



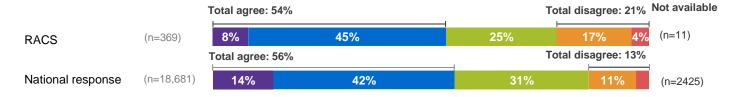
Simulation teaching

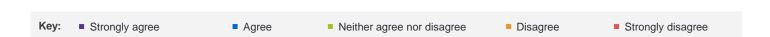


Access to mentoring



Practice based audits





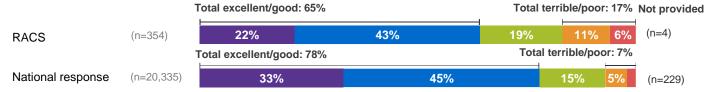
Base: Total sample excluding not available (shown separately)

Q38. To what extent do you agree or disagree that the following educational activities have been useful in your development as a doctor?

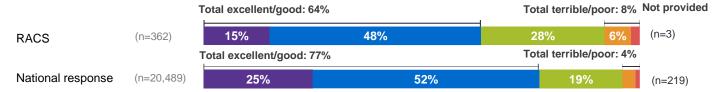
Facilities

HOW WOULD YOU RATE THE QUALITY OF THE FOLLOWING IN YOUR SETTING?

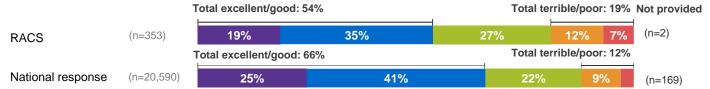
Reliable internet for training purposes



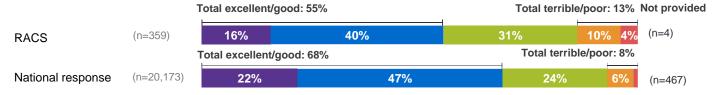
Educational resources



Working space, such as a desk and computer



Teaching spaces



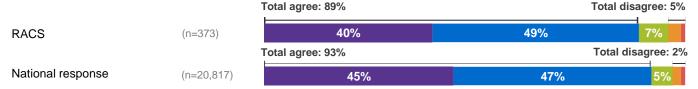


Base: Total sample excluding not provided (shown separately)

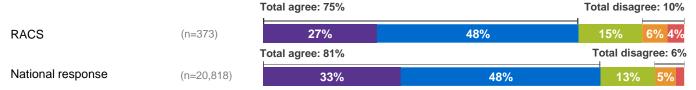
Q40. How would you rate the quality of the following in your setting?

CULTURE WITHIN THE TRAINEE'S SETTING

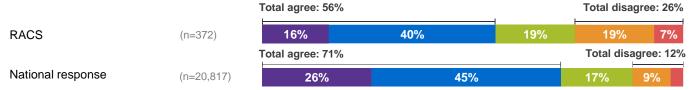




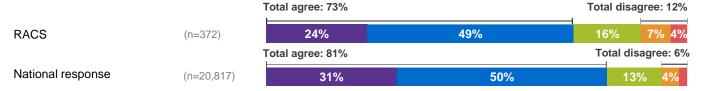
My workplace supports staff wellbeing



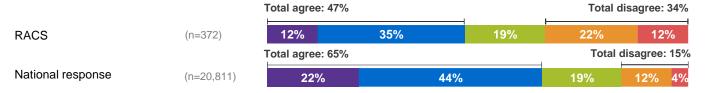
In practice, my workplace supports me to achieve a good work/life balance



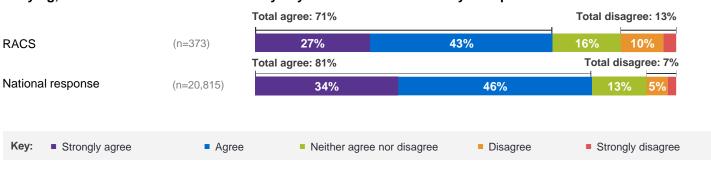
There is a positive culture at my workplace



I have a good work/life balance



Bullying, harassment and discrimination by anyone is not tolerated at my workplace

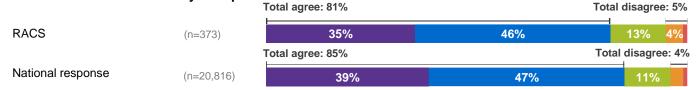


Base: Total sample

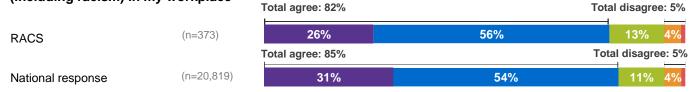
Q41. Thinking about the workplace environment and culture in your setting, to what extent do you agree or disagree with the following statements?

CULTURE WITHIN THE TRAINEE'S SETTING (continued)

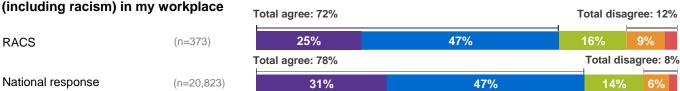




I know how to raise concerns/issues about bullying, harassment and discrimination (including racism) in my workplace



I am confident that I would raise concerns/issues about bullying, harassment and discrimination



I could access support from my workplace if I experienced stress or a traumatic event



Most senior allied health and nursing staff are supportive





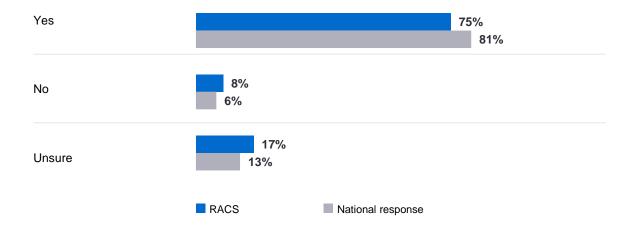
Base: Total sample

Q41. Thinking about the workplace environment and culture in your setting, to what extent do you agree or disagree with the following statements?

Profile | Training curriculum | Orientation | Assessment | Clinical supervision | Access to teaching | Facilities | Workplace environment and culture | Patient safety | Overall satisfaction | Future career intentions

Workplace environment and culture

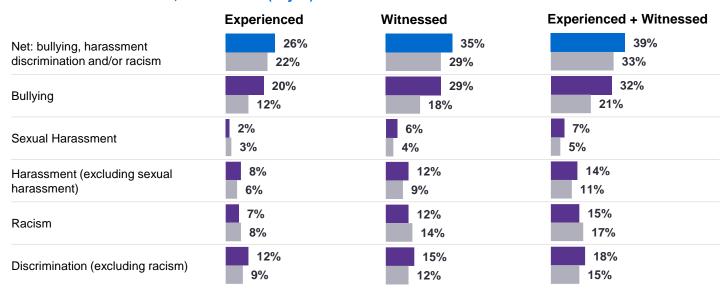
IF YOU NEEDED SUPPORT, DO YOU KNOW HOW TO ACCESS SUPPORT FOR YOUR HEALTH (INCLUDING FOR STRESS AND OTHER PSYCHOLOGICAL DISTRESS)?



Base: Total sample (National: 2024 n = 20,527; RACS: 2024 n = 369)

Q43. If you needed support, do you know how to access support for your health (including for stress and other psychological distress)?

IN THE PAST 12 MONTHS, HAVE YOU... (% yes)



\vee

RACS National response

(Blue figure shows Net

total of purple options)



WHO WAS RESPONSIBLE...

Experienced Witnessed 72% 71% Senior medical staff (e.g. consultants, specialists) 43% 46% 22% 31% Medical colleague (e.g. registrar or other doctors in training) 27% 31% 24% 30% Nurse or midwife 35% 30% 7% 11% Other health practitioner 6% 9% 13% 11% Hospital management 9% 8% 18% 14% Administrative staff 10% 9% 29% 31% Patient and/or patient family/carer 41% 44% 0% 2% Other 2% 2% 8% 12% Prefer not to say 9% RACS National response

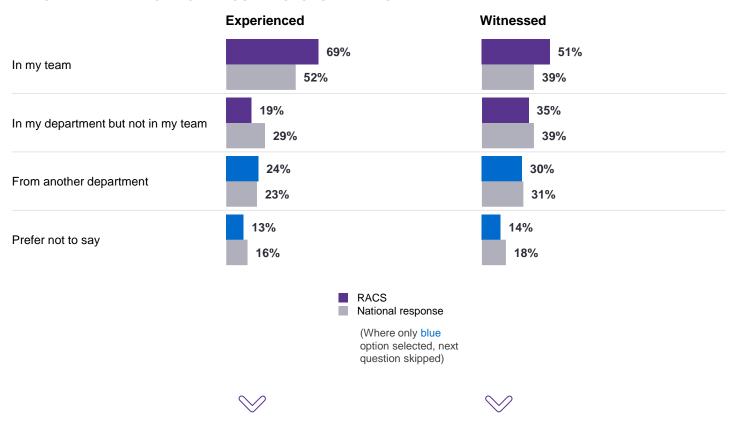
(Where only blue option selected, next question skipped)

Base: Total sample - Experienced (National: 2024 n = 18,217; RACS: 2024 n = 327) - Witnessed (National: 2024 n = 18,998; RACS: 2024 n = 345) Q42a. Thinking about your workplace, have you experienced and/or witnessed any of the following in the past 12 months?

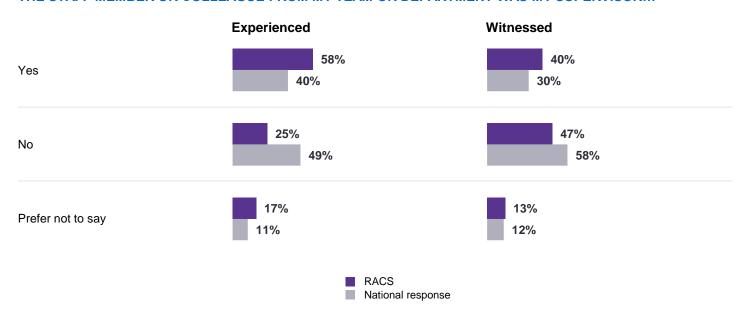
Base: Experienced/witnessed bullying, harassment sexual harassment, discrimination and/or racism - Experienced (National: 2024 n = 3,907; RACS: 2024 n = 83) - Witnessed (National: 2024 n = 5,385; RACS: 2024 n = 116)

Q42b. Who was responsible for the bullying, harassment, discrimination and/or racism that you experienced/witnessed...

THE STAFF MEMBER OR COLLEAGUE RESPONSIBLE WAS...



THE STAFF MEMBER OR COLLEAGUE FROM MY TEAM OR DEPARTMENT WAS MY SUPERVISOR...



Base: Experienced bullying, harassment, discrimination and/or racism from someone who was not a patient (National: 2024 n = 2,865 RACS: 2024 n = 68) -

Witnessed (National: 2024 n = 4,021; RACS: 2024 n = 104)

Q42c. The person(s) responsible was...

Base: Experienced bullying, harassment discrimination and/or racism from someone in their team or department (rebased to who was not a patient)

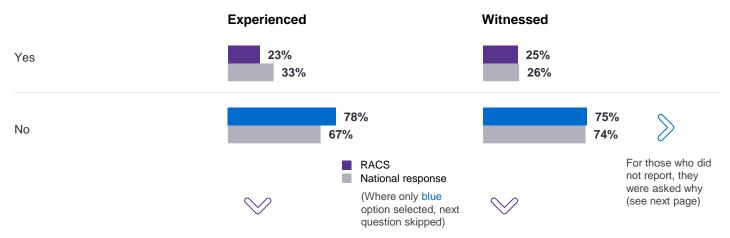
(National: 2024 n = 2,040; RACS: 2024 n = 53) - Witnessed (National: 2024 n = 2,631; RACS: 2024 n = 77)

Q42d. Was the person(s) one of your supervisors?...

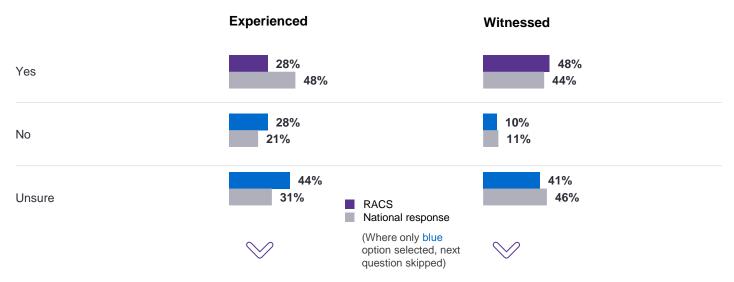
Profile | Training curriculum | Orientation | Assessment | Clinical supervision | Access to teaching | Facilities | Workplace environment and culture | Patient safety | Overall satisfaction | Future career intentions

Workplace environment and culture

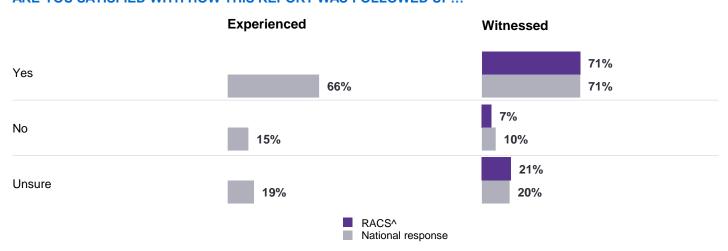
HAVE YOU REPORTED IT...



HAS THE REPORT BEEN FOLLOWED UP...



ARE YOU SATISFIED WITH HOW THIS REPORT WAS FOLLOWED UP...



^ not shown due to insufficient sample size.

Base: Experienced bullying, harassment discrimination and/or racism (National: 2024 n = 3,835; RACS: 2024 n = 80) - Witnessed (National: 2024 n = 5,248;

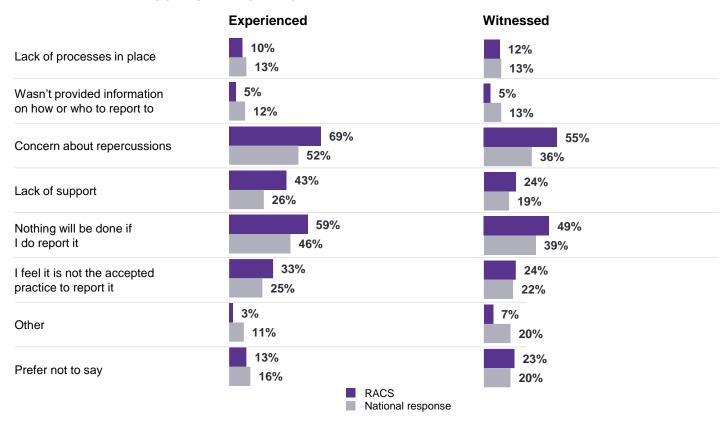
RACS: 2024 n = 114) | Q42e. Have you reported it?

Base: Reported bullying, harassment, discrimination and/or racism (National: 2024 n = 1,249; RACS: 2024 n = 18) - Witnessed (National: 2024 n = 1,379; RACS: 2024 n = 29) | Q42f. Has the report been followed up?

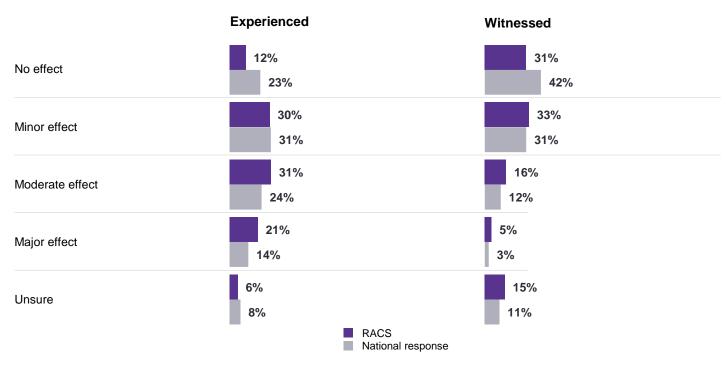
se: Reported bullying, harassment, discrimination and/or racism who reported the incident and followed it up (National: 2024n = 591; RACS: 2024 n =

<10) - Witnessed (National: 2024 n = 593; RACS: 2024 n = 14) | Q42g. Are you satisfied with how the report was followed up?

WHAT PREVENTED YOU FROM REPORTING...



HAS THIS INCIDENT ADVERSELY AFFECTED YOUR MEDICAL TRAINING...



Base: Experienced bullying, harassment discrimination and/or racism and did not report it. (National: 2024 n = 2,561; RACS: 2024 n = 61) - Witnessed

(National: 2024 n = 3,830; RACS: 2024 n = 83)

Q42i. What prevented you from reporting?

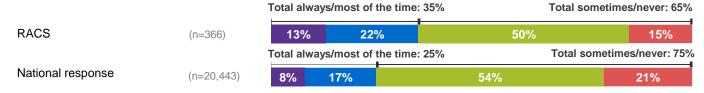
Base: Experienced bullying, harassment discrimination and/or racism (National: 2024 n = 3,921; RACS: 2024 n = 84) - Witnessed (National: 2024 n = 5,376;

RACS: 2024 n = 119)

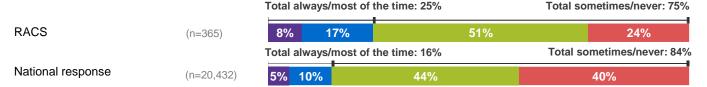
Q42h. How has the incident adversely affected your medical training?

HOW OFTEN DO THE FOLLOWING ADVERSELY AFFECT YOUR WELLBEING IN YOUR SETTING?

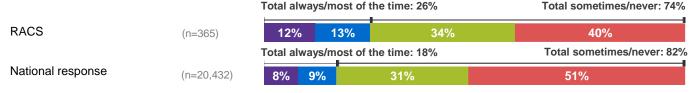
The amount of work I am expected to do



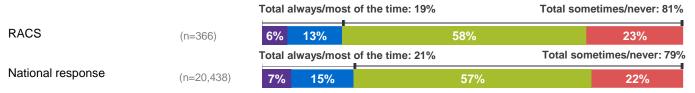
Having to work paid overtime



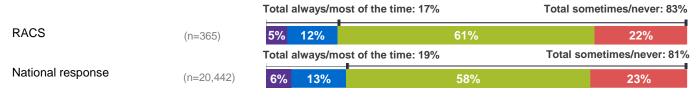
Having to work unpaid overtime



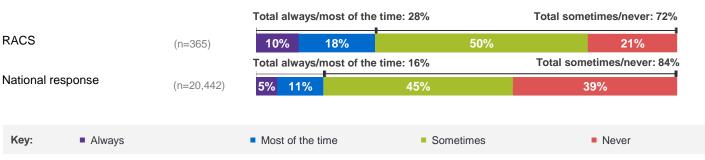
Dealing with patient expectations



Dealing with patients' families



Expectations of supervisors

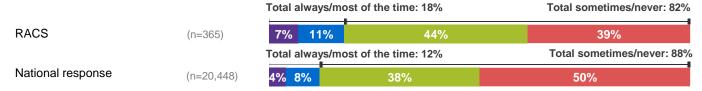


Base: Total sample

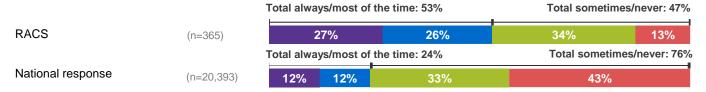
Q44. How often do the following adversely affect your wellbeing in your setting?

HOW OFTEN DO THE FOLLOWING ADVERSELY AFFECT YOUR WELLBEING IN YOUR SETTING? (continued)

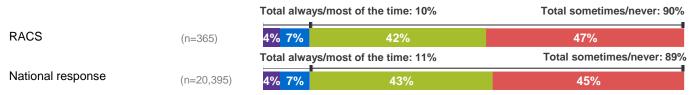




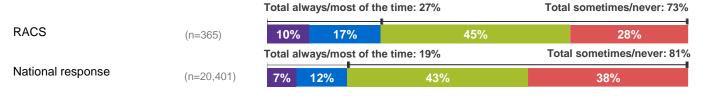
Having to relocate for work



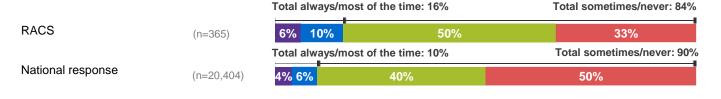
Being expected to do work that I don't feel confident doing



Lack of appreciation



Workplace conflict





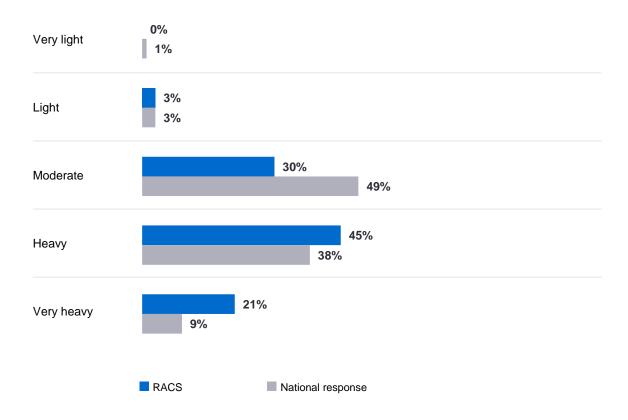
Base: Total sample

Q44. How often do the following adversely affect your wellbeing in your setting?

Profile | Training curriculum | Orientation | Assessment | Clinical supervision | Access to teaching | Facilities | Workplace environment and culture | Patient safety | Overall satisfaction | Future career intentions

Workplace environment and culture

HOW WOULD YOU RATE YOUR WORKLOAD IN YOUR SETTING?



Base: Total sample (National: 2024 n = 20,339; RACS: 2024 n = 365)

Q45. How would you rate your workload in your setting?

ON AVERAGE IN THE PAST MONTH, HOW MANY HOURS PER WEEK HAVE YOU WORKED?

On average, RACS trainees worked 60.5 hours a week, compared to 44.8 hours a week for the national average.

For RACS trainees, 95% were working 40 hours a week or more, compared to the national response of 62%.

On average, RACS doctors in training worked...

On average, doctors in training nationally worked...

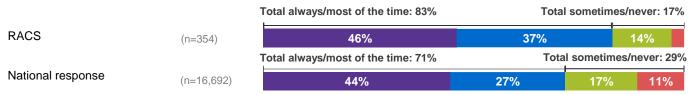


Base: Total sample (National: 2024 n = 20,358; RACS: 2024 n = 365). Sample includes respondents who are employed full-time, part-time and casually.

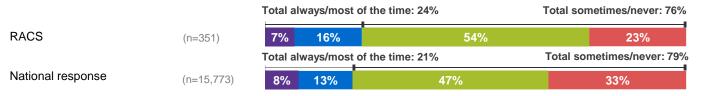
Q46. On average in the past month, how many hours per week have you worked?

FOR ANY UNROSTERED OVERTIME YOU HAVE COMPLETED IN THE PAST, HOW OFTEN DID:

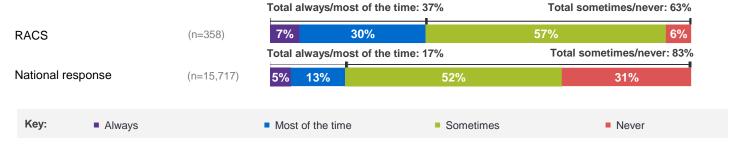
You get paid for the unrostered overtime



Working unrostered overtime have a negative impact on your training



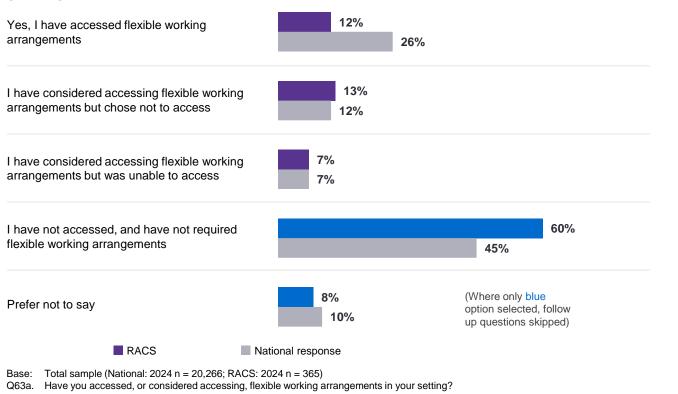
Working unrostered overtime provide you with more training opportunities



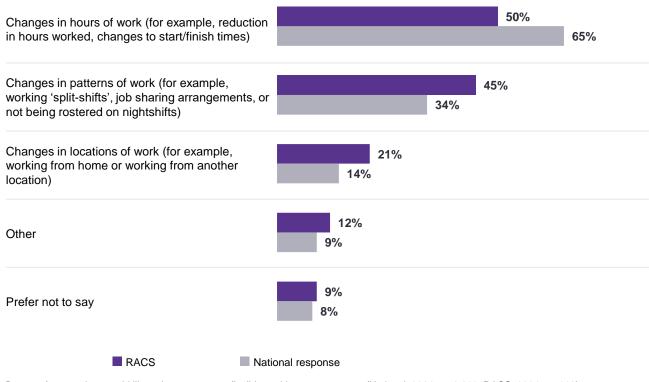
Base: Total sample

Q47. For any unrostered overtime you have completed in the past, how often did...?

HAVE YOU ACCESSED, OR CONSIDERED ACCESSING, FLEXIBLE WORKING ARRANGEMENTS IN YOUR SETTING?



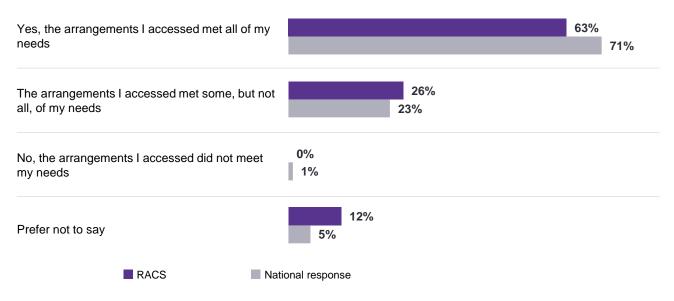
WHAT SORT OF FLEXIBLE WORKING ARRANGEMENTS DID YOU ACCESS/WOULD YOU HAVE LIKED TO ACCESS:



Base: Accessed, or would like to have access to flexible working arrangements (National: 2024 n = 8,989; RACS: 2024 n = 116)

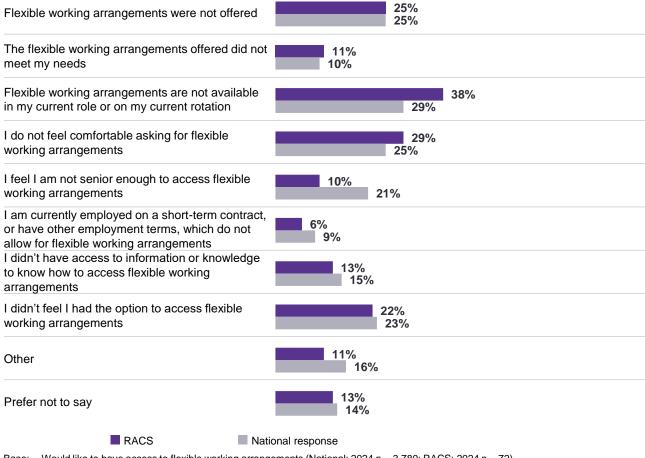
Q64. What sort of flexible working arrangements did you access / What sort of flexible working arrangements would you have liked to access?

DID THE FLEXIBLE WORKING ARRANGEMENTS YOU ACCESSED IN YOUR SETTING MEET YOUR NEEDS



Base: Accessed flexible working arrangements (National: 2024 n = 5,196; RACS: 2024 n = 43) Q63b. Did the flexible working arrangements you accessed in your setting meet your needs?

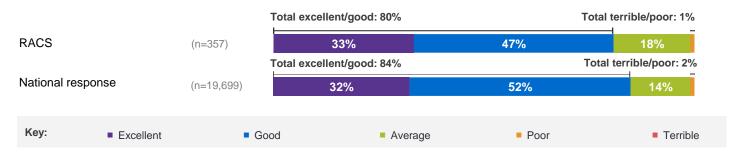
WHY HAVE YOU CHOSEN NOT TO ACCESS, OR BEEN UNABLE TO ACCESS, FLEXIBLE WORKING ARRANGEMENTS IN YOUR SETTING?



Base: Would like to have access to flexible working arrangements (National: 2024 n = 3,780; RACS: 2024 n = 72) 263c. Why have you chosen not to access, or been unable to access, flexible working arrangements in your setting?

Patient safety

HOW WOULD YOU RATE THE QUALITY OF YOUR TRAINING ON HOW TO RAISE CONCERNS ABOUT PATIENT SAFETY?



Base: Received training on how to raise concerns about patient safety

Q48. In your setting, how would you rate the quality of your training on how to raise concerns about patient safety?

I did not receive training on how to raise concerns about patient safety

RACS 2%

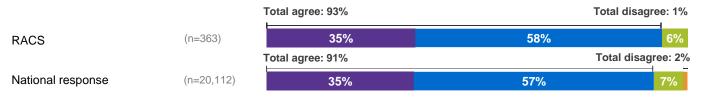
National response 3%

Base: Total Sample

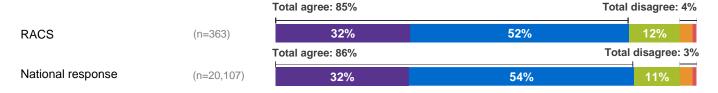
Q48. In your setting, how would you rate the quality of your training on how to raise concerns about patient safety?

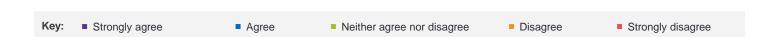
PATIENT CARE AND SAFETY IN THE WORKPLACE

I know how to report concerns about patient care and safety



There is a culture of proactively dealing with concerns about patient care and safety





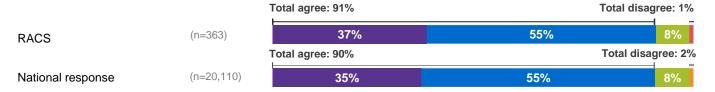
Base: Total sample

Q49. Thinking about patient care and safety in your setting, to what extent do you agree or disagree with the following statements?

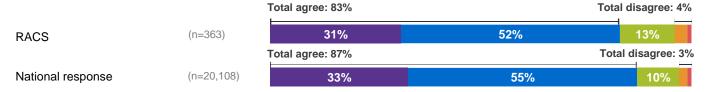
Patient safety

PATIENT CARE AND SAFETY IN THE WORKPLACE (cont.)

I am confident to raise concerns about patient care and safety

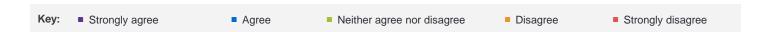


There are processes in place at my workplace to support the safe handover of patients between shifts / practitioners



I have received training on how to provide culturally safe care





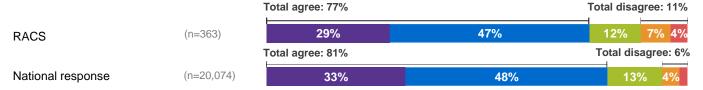
Base: Total sample

Q49. Thinking about patient care and safety in your setting, to what extent do you agree or disagree with the following statements?

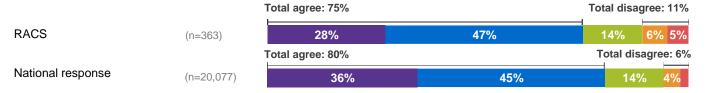
Overall satisfaction

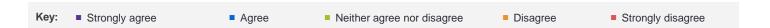
RECOMMEND TRAINING

I would recommend my current training position to other doctors



I would recommend my current workplace as a place to train





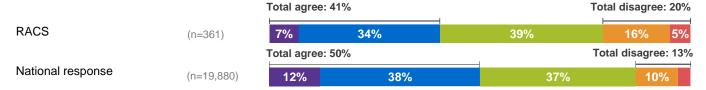
Base: Total sample

Q50. Thinking about your setting, to what extent do you agree or disagree with the following statements?

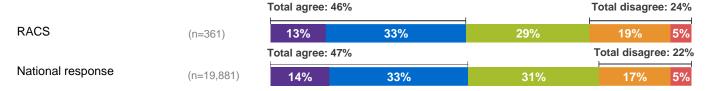
Future career intentions

CAREER INTERESTS

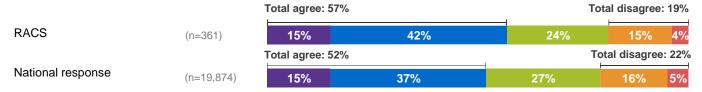
I have an interest in Aboriginal and Torres Strait Islander health/healthcare



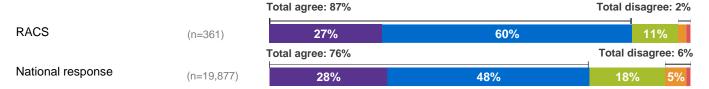
I am interested in rural practice



I am interested in getting involved in medical research



I am interested in getting involved in medical teaching



I am considering a future outside of medicine





Base: Total sample

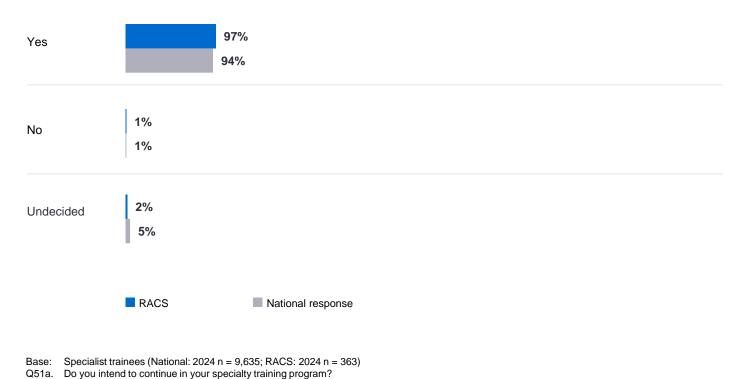
Q54. Thinking about your future career, to what extent do you agree or disagree with the following statements?

Profile | Training curriculum | Orientation | Assessment | Clinical supervision | Access to teaching | Facilities | Workplace environment and culture | Patient safety | Overall satisfaction | Future career intentions

Future career intentions

CONTINUATION OF SPECIALTY TRAINING PROGRAM

Overall, 97% of training with RACS intended to continue with their specialty.

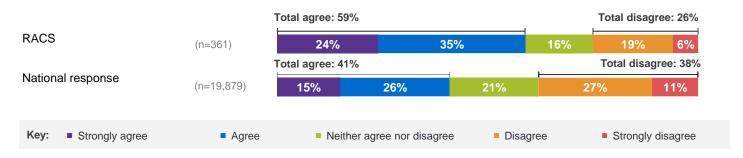


TRAINING PROGRAM COMPLETION AND FUTURE EMPLOYMENT

I am concerned I will not successfully complete my training program to attain Fellowship / meet my pathway requirements / securing a place in my preferred College training program



I am concerned about whether I will be able to secure employment on completion of training



Base: Total sample

Q54. Thinking about your future career, to what extent do you agree or disagree with the following statements?

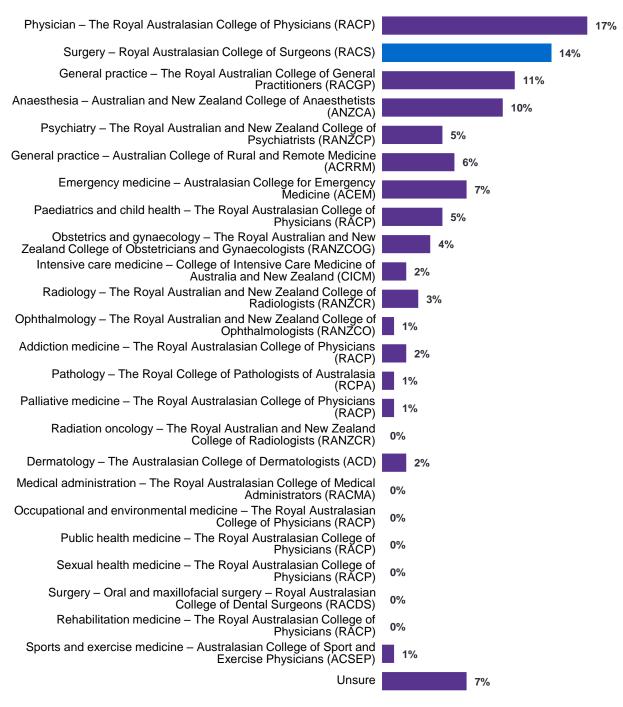
Future career intentions

INTERNS - INTERESTED IN A SPECIALTY



85% of interns are intending to become a specialist. Of these, 14% are interested in pursuing a surgery specialty from RACS.

SPECIALIST TRAINING PROGRAM INTERNS ARE INTERESTED IN



Base: Interns (2024 n = 1,252)

Q52. Do you intend to become a specialist?

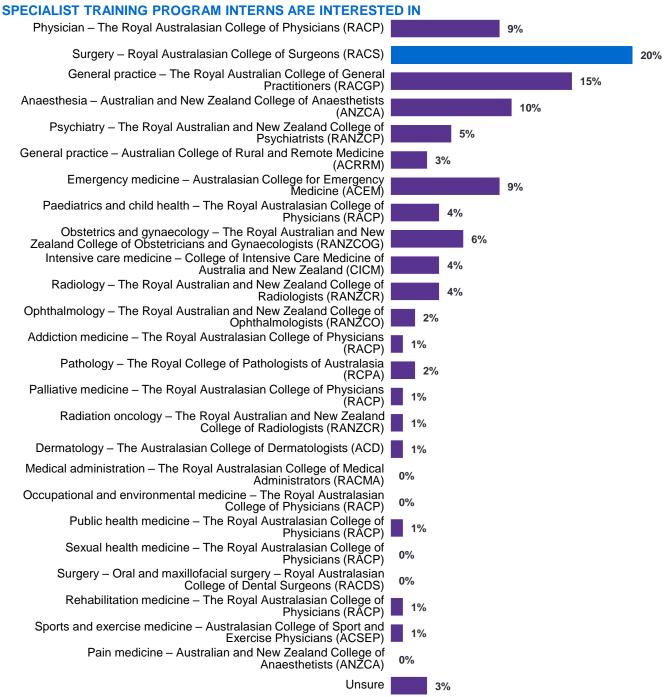
Base: Interns interested in a specialty (2024 n = 1,059) Q53. Which specialty are you most interested in pursuing?

Future career intentions

PREVOCATIONAL AND UNACCREDITED TRAINEES - INTERESTED IN A SPECIALTY



89% of prevocational and unaccredited trainees are intending to become a specialist. Of these, 20% are interested in pursuing a surgery specialty from RACS.



Base: Prevocational and unaccredited trainees (2024 n = 4,841)

Q52. Do you intend to become a specialist?

Base: Prevocational and unaccredited trainees interested in a specialty (2024 n = 4,313)

Q53. Which specialty are you most interested in pursuing?

Visit MedicalTrainingSurvey.gov.au to explore the results further by using the interactive data dashboard