

Scottish Trainee Survey – June 2019

Analysis of free text comments (FTCs)

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Executive Summary

The Scottish Trainee Survey (STS) invites trainees to submit free text comments allowing us to identify and follow-up any patient safety and undermining concerns. These comments are routinely, also, made available as part of the pre-visit data packs that are available to panel members on Quality Management-Quality Improvement (QM-QI) visits undertaken by each Specialty Quality Management group (sQMG).

Within the STS questionnaire, the trainees are asked 2 qualitative free text questions, namely:

- If there are any aspects of your training in your current post that have been particularly good and noteworthy that you would wish to bring to the attention of the Deanery, please do so in the box below.
- If there are any aspects of your training in your current post that have been particularly poor and that have had a negative impact on your education and attainment, please record these below.

This report focusses on the June 2019 data which is sent out to all foundation, specialty, GPST and core trainees.

Main findings

Overall, comments about support (supportive environment, availability of senior colleagues), positive relationships with staff (teamworking, workplace interactions) and learning opportunities were more likely to be positive than negative. Indeed, the subtheme that received the most positive comments relating to it was supportive environment 245 positive comments. Trainees in 3 out of the 8 STBs providing the most positive comments relating to this theme. Trainees in the other 5 STBs provided the most positive comments relating to learning opportunities.

Overall, regarding the negative comments, comments regarding working conditions (rota design/management, staffing levels, ward rounds/handover, workload, hours worked, patient safety and out of hours) were all more likely to be negative than positive. There was a good deal of criticism relating to rotas with 91 trainees commenting negatively), staffing levels and – related to

this - heavy workloads and having to work more than their allocated hours/missing breaks. In some cases, trainees reported concerns about patient safety, especially out of hours. However interestingly, the theme that received the most negative comments was one which also received a large number of positive comments, namely learning opportunities (n=107).

With regards to the negative comments, within the 8 STBs the themes trainees provided the most negative comments for were split between 3 different themes- rota design/management (2 STBs), learning opportunities (3 STBs) and balance between training and service provision (2STBs). There were no negative comments from the trainees in the Foundation STB.

Table 1 provides a summary of the themes the trainees in each specialty training board provided the most positive and most negative comments for.

Table 1: The themes the trainees in each post specialty training board provided the most positive and most negative comments for

	Number of		nent	Negative Comment	
Post Specialty Training Board	trainees in STB providing	Theme	No. trainees	Theme	No. trainees
Anaesthesia, Intensive Care and Emergency Medicine	78	Supportive environment	43 (55.1)	Rota design/manageme nt	18 (23.1)
Diagnostics	15	Supportive environment	5 (33.3)	Learning opportunities	3 (20)
Foundation	1	Learning opportunitie s	1 (100)		
General Practice	53	Supportive environment	21 (39.6)	Balance between training and service provision	9 (17)
Medical Specialties	199	Learning opportunitie s	62 (31.1)	Rota design/manageme nt	40 (20.1)

Mental Health Specialties	48	Learning opportunitie s	10 (20.8)	Balance between training and service provision	6 (12.5)
Obstetrics & Gynaecology and Paediatrics	90	Learning opportunitie s	18 (20)	Learning opportunities	18 (20)
Surgery	132	Learning opportunitie s	36 (27.3)	Learning opportunities	32 (24.2)

¹Number of trainees commenting/number of trainees in STB who provided at least one free text

comment.

Introduction

The Survey

The Scottish trainee survey (STS) is sent out 4 times in a year:

- In November to Foundation and Core trainees in 4-month posts
- In February to GPST trainees and Core trainees on 6-month posts
- In March to Foundation and Core trainees
- In June to all medical trainees.

The questionnaire consists of a mixture of quantitative (categorical and rating scales) and 2 qualitative free text questions. Whilst all free text comments are reviewed by associate postgraduate deans (quality) (APGDs) in order to identify specific comments that can be acted upon to improve particular trainee placements, this analysis looks at the free text comments more broadly in order to see what they can tell us about overall good and bad experiences. What can be learned and what are the recurring messages? These comments are routinely, also, made available as part of the pre-visit data packs that are available to panel members on Quality Management – Quality Improvement (QM-QI) visits undertaken by each specialty Quality Management Group (sQMG). The 2 qualitative free text questions are:

- If there are any aspects of your training in your current post that have been particularly good and noteworthy that you would wish to bring to the attention of the Deanery, please do so in the box below.
- If there are any aspects of your training in your current post that have been particularly poor and that have had a negative impact on your education and attainment, please record these below.

This report focusses on the June 2019 data.

Points to note about the survey

Trainees are advised at the beginning of the questionnaire that any specific patient safety or specific instances of undermining should be reported through local health board or hospital reporting systems. So, in theory, there should be no free text responses relating to *specific*

incidents in these areas.

From November 2017 STS, the space available for comments has been reduced from unlimited to 250 characters.

Overall Results

Response Rate

The STS questionnaire was sent to all 5283 medical trainees who completed a placement in June 2019. 4010 completed questionnaires were received with an overall response rate of 75.9%, of whom 616 (15.4%) added material to at least one free-text comments box. This equates to 11.7% of all trainees (n616/n5283).

Demographics of Respondents

A table depicting the demographic details of the trainees who both responded to the questionnaire and provided comments in at least one of the free text boxes are provided below (Table 1). For the purposes of this report, the level specialty refers to Specialty trainees who are in ST4 and above and trainees in run-through specialties who are level ST1 and above. Table 2 provides the number of trainees in each STB, the number of trainees who provided at least one free text comment.

The tables 1, 2, and 3 below give an overview of the number of trainees who added a free text comment and the number who left a positive and/or negative comment for the June 2019 STS by trainee stage of training, programme STB and post STB.

	No. of trainees in training level	No. of respondents to STS	No. who left a free text comment	No. who left a positive comment	No. who left a negative comment
Foundation	1617	1287	210	132	167
Higher	2089	1532	203	152	137
Core	628	470	93	69	63
GP	947	720	110	68	86
Total	5281	4009	616	421	453

Table 1: March 2019 - Stage of training & positive/negative comments

	No. of	No. of	No. who left a	No. who	No. who
	trainees in	respondent	free text	left a	left a
	STB	s to STS	comment	positive	negative
Anaesthetics, Intensive	574	423	55	41	36
care, Emergency medicine					
Diagnostics	232	185	16	11	9
Foundation	1617	1287	210	132	167
General Practice,	978	745	117	71	92
Occupational Health, Public					
Health					
Medicine	683	494	89	68	62
Mental Health	242	185	24	16	14
Obstetrics, gynaecology &	395	270	42	34	32
Paediatrics					
Surgery	560	420	63	48	41
Total	5281	4009	616	421	453

Table 2: June 2019 – Programme Specialty Training Board & positive/negative comments

Table 3: June 2019 – Post Specialty Training Board & positive/negative comments

	No. of	No. of	No. who left a	No. who	No. who
	trainees in	respondent	free text	left a	left a
	Post STB	s to STS	comment	positive	negative
Anaesthetics, Intensive	731	550	78	56	49
care, Emergency medicine					
Diagnostics	228	182	15	11	8
Foundation	7	7	1	1	0
General Practice,	595	443	53	36	32
Occupational Health, Public					
Health					
Medicine	1575	1190	199	138	152
Mental Health	392	306	48	28	35
Obstetrics, gynaecology &	657	496	90	64	72
Paediatrics					
Surgery	1096	835	132	87	105
Total	5281	4009	616	421	453

Thematic analysis of Free Text Comments

The number of participants writing about a particular theme are not seen as 'representative' of the views of the sample as a whole as they reflect what trainees chose to write. Nevertheless, simple counts are used to illustrate the proportion of comments that addressed particular themes, and when an issue was raised frequently, weight was attributed to this as reflecting an important element of experience.

The comments were classified under the four main themes and 22 subthemes. The themes are across all trainees in all regions/specialties/Specialty Training Boards (STBs) /levels, and therefore some may be less applicable to certain groups of trainees than others. Table 4 provides a list of the four themes and corresponding subthemes.

The majority of the subthemes were additionally coded as 'positive', 'neutral/mixed' or 'negative', however for two of the subthemes different additional codes were used. The themes were also mapped onto the GMC requirements for medical education and training (see table 4, below). Trainees often touched on several themes in their comments (for example, they might mention teaching, workload and staffing levels), so each free text comment might be coded to several themes.

Four broad themes (Working conditions, learning environment & culture, trainee support, and experience & development), plus 21 sub-themes were developed to code the free text responses.

Theme	Subtheme	Topics covered	GMC requirements
Working	Rota design/management	Rostered hours, Cover for	R1.7, R1.12
conditions		leave/absences,	
		Flexibility, Amount of on call	
		or out of hours	
	Staffing levels	Amount of	R1.7
	Ward rounds/handover	Attendance at, quality of	R1.14
		ward rounds and handovers.	
	Workload	Is the workload too light, too	R1.7, R1.12e
		heavy?	
	Hours worked	Working longer than	R1.7, R1.12e
		rostered hours/time for	
	Patient safety	· ·	R1.2, R1.2, R1.3, R1.4
		.	R1 5 R2 2
	Out of hours	Trainees experience of	R3.6, R5.9h
		working out of hours –	
		weekends/nights etc	
Learning	Staff attitude	Friendliness/helpfulness of	R3.3
environment		staff/bullying etc.	
and culture	Workplace interactions	Interactions within the	R1.17
		workplace – between	
		doctors, nurses, support	
		staff etc.	
	Teamworking	Did the trainee feel included	R1.19
		in the day to day work of the	
		wards/practice?	
		How the ward/practice	
		functioned as a team.	
Trainee	Supportive environment	Support from ward/ practice	R1.4, R1.8, R1.22
support		staff/colleagues	

Table 4: List of themes and subthemes mapped to the GMC requirements

	Induction	Whether they had an	R1.6, R1.13, R5.9
		induction, quality of	
		induction	
	Access to study leave	Whether (and how easy it is	R3.8, R3.12
		for) the trainees get the	
		study leave they are entitled	
		to	
	Teaching	Quality/quantity of	R1.16
	Protected teaching	Is the formal teaching bleep	R1.16, R1.18
		free?	
		Is the trainee able to attend	
		all necessary teaching?	
	Supervision	Quality/availability of	R1.8, R1.9, R2.11,
		supervision (educational	R2.14, R2.15
		and/or clinical)	
	Feedback	Amount of/Quality of	R3.13
		feedback received	
	Availability of senior	How easy is it to speak	R1.13c
	colleagues	to/contact a senior?	
Experience	Learning opportunities	Availability of opportunities	R1.4, R1.12c, R1.15,
and		to learn/develop clinical	R3.1, R3.8.
development		skills	
	Balance between training		R1.15
	and service provision		
	Sufficiently challenging	Too challenging/challenging	R1.9, R1.10, R1.11
	tasks	enough/not challenging	

The subtheme that received the most comments relating to it was supportive environment which received 280 comments (245 positive and 35 negative comments). This theme received the most positive comments. Overall, comments about support (supportive environment, availability of senior colleagues), positive relationships with staff (teamworking, workplace interactions) and learning opportunities were more likely to be positive than negative.

Overall, regarding the negative comments, comments regarding working conditions (rota design/management, staffing levels, ward rounds/handover, workload, hours worked, patient safety and out of hours) were all more likely to be negative than positive. There was a good deal of criticism relating to rotas with 91 trainees commenting negatively), staffing levels and – related to this - heavy workloads and having to work more than their allocated hours/missing breaks. In some cases, trainees reported concerns about patient safety, especially out of hours. However interestingly, the theme that received the most negative comments was one which also received a large number of positive comments, namely learning opportunities (n=107).

Table 5, below, indicates how many trainees made a positive or negative comment for each subtheme.

Table 5: Positive & Negative comments by theme

Theme	Subtheme	No. positive comments	No. mixed neutral comments	No. negative comments
Working	Rota	11	1	91
conditions	design/management	11	1	51
	Staffing levels	2	1	76
	Ward rounds/handover	7	1	25
	Workload	Too Much	Unpredictable	Too Little
		63	4 No.	3
		No. positive		No. of negative
		comments	mixed/neutral	comments
	Hours worked	1	0	18
	Patient Safety	3	0	38
	Out of hours	11	1	47
Learning	Staff attitude	2	0	4
environment	Workplace interactions	56	0	22
and culture	Teamworking	50	0	15
Trainee	Supportive environment	245	0	35
support	Induction	1	8	26
	Access to study leave	2	0	4
	Teaching	112	8	62
	Protected teaching	7	1	11
	Supervision	34	1	25
	Feedback	11	1	9
	Availability of senior	77	1	20
	colleagues	11	1	20
Experience	Learning opportunities	162	4	107
and	Balance between training	40	2	74
development	and service provision	40	2	74
	Sufficiently challenging	Тоо	Challenging	Not challenging
	tasks	challenging	enough	enough
		5	27	19

Section 1: Results by Post Specialty Training Board

For the purposes of this section of report, the Specialty Training Board for the post the trainee is placed in will be reported in the tables.

Trainees in the 5 out of the 8 STBs provided the most positive comments relating to learning opportunities. Trainees in the other 3 STBs provided the most positive comments relating to the subtheme supportive environment.

With regards to the negative comments, within the 8 STBs the themes trainees provided the most negative comments for were split between 3 different subthemes- rota design/management (2 STBs), learning opportunities (3 STBs) and balance between training and service provision (2STBs). There were no negative comments from the trainee sin the Foundation STB.

Table 6, below, provides a summary of the themes the trainees in each specialty training boards provided the most positive and most negative comments for. Appendix 1 presents the free text comment data for each post Specialty Training Board. Table 6: Theme trainees provided most positive comments for and most negative comments foracross each STB

	Number of trainees in	Positive comme	nt	Negative Comment	
STB providing at least one Specialty Training Board Comment	Theme	No. of trainees commenting (% ¹)	Theme	No. of trainees commenting (% ¹)	
Anaesthesia, Intensive Care and Emergency Medicine	78	Supportive environment	43	Rota design/ management	18
Diagnostics	15	Supportive environment	5	Learning opportunities	3
Foundation	1	Learning opportunities	1		
General Practice	53	Supportive environment	21	Balance between training and service provision	9
Medical Specialties	199	Learning opportunities	62	Rota design/ management	40
Mental Health Specialties	48	Learning opportunities	10	Balance between training and service provision	6
Obstetrics & Gynaecology and Paediatrics	90	Learning opportunities	18	Learning opportunities	18
Surgery	132	Learning opportunities	36	Learning opportunities	32

¹Number of trainees commenting/number of trainees in STB who provided at least one free text comment

Results by Theme and Subtheme

Working Conditions

The theme, working conditions contains 5 subthemes:

- Rota design/management
- Staffing Levels
- Ward rounds/handover
- Workload
- Hours worked.

Nine of the subthemes were coded either positive, mixed/neutral or negative, one of the themes was coded differently, namely workload:

- Too much
- Right amount
- Too little
- Unpredictable.

Overall the theme "working conditions" received 404 comments. Of these 365 were negative, 35 were positive and 4 were mixed/neutral.

With regards to the subtheme workload, which was coded differently, the codes 'Too much', 'Too little' and 'unpredictable' were included in the count of negative codes.

Of the 5 subthemes, the subtheme rota design/management received the most negative comments with 91 trainees stating that the rota was either poorly designed or inflexible. This subtheme however also contained the most positive comments with 11 trainees commenting that they were happy with the rota.

Rota Design/Management

There were several comments relating to the trainees rota while they were on placement (n=103). This was mainly around how the rota coordinator organised the rota and whether there was cover for leave/absences and also the shifts they were rostered to do.

For example, several trainees commented that the rota they were assigned kept changing at short notice or the trainee was assigned a large number of out-of-hours or weekend shifts. The STB that had the largest percentage of trainees providing negative comments (receiving the rota late, poor allocation of annual leave/shifts etc) was anaesthesia (n=18, 23.1%), however the medical specialties had the largest number of trainees commenting (n=40, 20%). The programme STBs that had the largest percentage of trainees providing positive comments was diagnostics however this was due to the small number of trainees in the STB who provided a free text comment, and in fact only 1 trainee (6.7%) provided a positive comment, the largest number of trainees commenting were from the obstetrics/gynaecology and paediatrics STB, with 5 trainees (5.5%) stating that the management of the rota (shift allocation, annual leave allocation) was good.

Examples of comments provided by the trainees are given below:

Very thoughtful and considerate rota master. Rota sent out well in advanced all requested accommodated. (Positive comment, Core trainee, Anaesthetic post STB).

A very poorly designed rota means continuity of care is at times limited; it is not unusual or infrequent for place of work to be changed that morning. (Negative comment, Higher Trainee, Medicine post STB). Table 7, below, provides the number of respondents who provided a comment relating to Rota design/management across the different STBs.

	Number of	Response Categories			
Specialty Training Board	trainees in post STB providing at least one free text comment	Positive (%¹)	Mixed/ neutral (%²)	Negative (% ³)	
Anaesthesia, Intensive Care and Emergency Medicine	78	2 (2.6)	0	18 (23.1)	
Diagnostics	15	1 (6.7)	0	1 (6.7)	
Foundation General Practice, Occupational Health and Public Health	1 53	0	0	0 4 (7.5)	
Medical Specialties Mental Health Specialties	199 48	2 (1) 0	1 (0.5) 0	40 (20.1) 3 (6.25)	
Obstetrics & Gynaecology and Paediatrics	90	5 (5.5)	0	10 (11.1)	
Surgery	132	1 (0.7)	0	15 (11.4)	

Table 7: Number and percentage of trainees providing comments relating to the theme Rota design/management across the different post STBs.

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided mixed/neutral comments/number of trainees in STB who provided at least one free text comment

3 Number of trainees who provided negative comments/number of trainees in STB who provided at least one free text comment.

Staffing Levels

Whether there was enough staff on shift (medical or nursing) was also an issue identified by a number of the trainees (n=79). In a lot of the comments, the staffing levels impacted on the trainees' workload, as when they were short staffed on the ward their workload increased to cover for this. Overall there were comments relating to staffing levels. The majority (n=76, 96.2%) were negative comments, relating to understaffing on the wards etc. Only 2 (2.5%) were positive, where the trainee stated that the ward was well staffed. An example of a positive and a negative comment are provided below:

Very well staffed compared to other [locations] I've worked in (Positive comment, Higher trainee, Anaesthetics Post STB).

Inadequate cover arranged for annual/compassionate leave and sickness in a job that is already understaffed (Negative comment, Foundation trainee, Surgery Post STB).

Table 8, below, provides a breakdown of the number of comments relating to this theme across the different STBs.

Table 8: Number and percentage of trainees providing comments relating to the Staffing Levelsacross the different STBs.

	Number of	Response Ca	tegories	
	trainees in post			
Specialty Training Board	STB providing at	Positive	Mixed/Neutr	Negative
Specially fraining board	least one free	(% ¹)	al (%²)	(% ³)
	text comment			
Anaesthesia, Intensive				
Care and Emergency	78	1	0	8
Medicine				
Diagnostics	15	0	0	0
Foundation	1	0	0	0
General Practice,				
Occupational Health and	53	0	0	2
Public Health				
Medical Specialties	199	0	1	36
Mental Health Specialties	48	0	0	4
Obstetrics & Gynaecology	90	0	0	7
and Paediatrics	30	v	v	
Surgery	132	1	0	19

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided mixed or neutral comments/number of trainees in STB who provided at least one free text comment

3 Number of trainees who provided negative comments/number of trainees in STB who provided at least one free text comment.

Ward Rounds/Handover

The trainees experience of the ward rounds and handover were the focus of 32 comments. The comments mainly centred around whether there was a handover or ward round and how useful/well run the ward round or handover was. The majority of the comments (n=25, 78.1%) were negative, with only 7 (21.9%) being positive. Trainees in the medical specialties provided the largest percentage of negative comments. See table 9 for a breakdown of the number of comments relating to this theme across the specialty training boards. The STB that had the largest percentage of trainees providing a negative comment was medical specialties (n=12, 6%). An example of a positive and a negative comment relating to this theme is provided below:

Handover at QEUH DME dept is well run, well attended and safe. Often attended by senior colleagues (Positive comment, GP trainee, Medicine Specialty Post STB).

There is no fixed handover process for juniors. Junior handover happens in the same room as the registrars, who dominate. They show little interest in what the juniors have to handover. Additionally, there is no fixed place for OOH junior handover (Negative comment, Foundation trainee, Surgery Post STB). Table 9: Number and percentage of trainees providing comments relating to the theme WardRound/Handover across the different STBs.

	Number of	Response Categories		
Specialty Training Board	trainees in post STB providing at least one free text comment	Positive (%1)	Mixed/ Neutral (%²)	Negative (%³)
Anaesthesia, Intensive				
Care and Emergency	78	0	0	2 (2.5)
Medicine				
Diagnostics	15	0	0	0
Foundation	1	0	0	0
General Practice, Occupational Health and Public Health	53	0	0	0
Medical Specialties	199	6 (3)	1 (0.5)	12 (6)
Mental Health Specialties	48	0	0	2 (4.2)
Obstetrics & Gynaecology and Paediatrics	90	1 (1.1)	0	3 (3.3)
Surgery	132	0	0	6 (4.5)

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided mixed or neutral comments/number of trainees in STB who provided at least one free text comment

3 Number of trainees who provided negative comments/number of trainees in STB who provided at least one free text comment.

Workload

The theme workload related to the volume of work/tasks the trainee felt that they had to do and whether they felt that this was too much or conversely not enough. Overall there were 66 comments relating to workload, 59 (89.4%) of which were comments stating that their workload was too much/too high. The number of comments relating to workload across the different specialty training boards is given in table 10.

Trainees in the Surgery STB provided the largest proportion of comments stating that the volume of work required of them was too much (n=22, 16.7%). An example of this is provided below:

Overwhelming workload whilst on general surgery. Manage to make sure the truly unwell are seen to and no more, otherwise keeping head above water. (Comment regarding workload being too much, Foundation trainee, Surgery Post STB).

	Number of	Response Categories		
	trainees in	Тоо	Unpredictabl	Too little
Specialty Training Board	post STB	Much	e (%²)	(% ³)
Anaesthesia, Intensive	70	c (7 7)	0	0
Care and Emergency	78	6 (7.7)	0	0
Diagnostics	15	1 (6.7)	0	0
Foundation	1	0	0	0
General Practice,				
Occupational Health and	53	3 (5.7)	1 (1.9)	0
Public Health				
Medical Specialties	199	22 (11.5)	0	2 (1)
Mental Health Specialties	48	4 (8.3)	1 (2.1)	0
Obstetrics & Gynaecology	90	1 (1.1)	1 (1.1)	1 (1.1)
and Paediatrics				
Surgery	132	22 (16.7)	1 (0.8)	0

Table 10: Number and percentage of trainees providing comments relating to the theme Workload across the different STBs

1 Number of trainees who provided comments stating that the workload was too much/number of

trainees in STB who provided at least one free text comment

2 Number of trainees who provided comments stating that the workload was
unpredictable/number of trainees in STB who provided at least one free text comment
3 Number of trainees who provided comments stating that the workload was too little/number of
trainees in STB who provided at least one free text comment.

Hours worked

The theme hours worked related to whether the trainee was able to take their allocated breaks, leave work at the time they should, or if they worked over their specified hours. Table 11, below provides the number of respondents who provided a comment relating to hours worked across the different STBs. Of the 19 trainees who provided comments relating to this theme most of the trainees provided negative comments (n=18, 94.7%). Only 1 trainee provided a positive comment (5.3%). For this theme, trainees in the surgery post STB provided the largest proportion of negative comments with 5.3% of the trainees stating that they, for example, had to work over their specified hours, had to work through breaks or come in early. Examples of negative comments are provided below:

I am over worked in the post. I finish late most days and this is "fine" according to rota monitoring (Negative comment, Core trainee, Medical Specialty post STB).

Out of hours/on-call shifts can be very demanding. Unable to have a bleep free break as you are the only doctor on overnight. (Negative comment, Foundation trainee, Mental Health Post STB). Table 11: Number and percentage of trainees providing comments relating to the theme Hours Worked across the different STBs

	Number of	Response	Categories
Specialty Training Board	trainees in post STB providing at least one free text comment	Positive (% ¹)	Negative (%²)
Anaesthesia, Intensive Care and Emergency Medicine	78	1 (1.3)	4 (5.1)
Diagnostics	15	0	0
Foundation	1	0	0
General Practice, Occupational Health and Public Health	53	0	0
Medical Specialties	199	0	6 (3)
Mental Health Specialties	48	0	1 (2.1)
Obstetrics & Gynaecology and Paediatrics	90	0	0
Surgery	132	0	7 (5.3)

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided negative comments/number of trainees in STB who provided at least one free text comment.

Patient Safety

For this theme 41 trainees provided comments. Of these, the majority (n=38, 92.7%] were negative. The negative comments regarding patient safety were often linked to staffing levels, hours worked or workload.

For example, due to lack of trainees, the workload being too high:

The work load and demand is so heavy for one person that patient care is severely impacted. It is unsupported and very unsafe. (Negative comment, Core trainee, Surgery post STB).

Or the volume of work when on call:

When raising concerns about safety due to volume of patients OOH I was ignored. (Negative comment, Specialty trainee, Medical Specialty post STB).

There were a few (n= 3, 7.3%) positive comments, for example:

Dr [name] is an asset to the programme at the [location]. She and her colleagues work tirelessly to ensure patient safety, great trainee experience and good quality teaching. (Positive comment, Foundation trainee, Obstetrics & Gynaecology and Paediatrics post STB).

Table 12, below, provides a breakdown of the number of comments provided by trainees across the different programme and post STBs relating to this subtheme.

Table 12: Number and percentage of trainees providing comments relating to the theme Patient Safety across the different STBs

	Number of	Response Categories	
	trainees in post		
Specialty Training Board	STB providing at	Positive	Negative
Specially maning bound	least one free text	(% ¹)	(% ²)
	comment		
Anaesthesia, Intensive			
Care and Emergency	78	0	2 (2.6)
Medicine			
Diagnostics	15	1 (6.7)	0
Foundation	1	0	0
General Practice,			
Occupational Health and	53	0	2 (3.8)
Public Health			
Medical Specialties	199	0	23 (11.6)
Mental Health Specialties	48	0	1 (2.1)
Obstetrics & Gynaecology	90	2(2.2)	2 (2.2)
and Paediatrics		~~~~	~ \~.~)
Surgery	132	0	8 (6.1)

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided negative comments/number of trainees in STB who provided

at least one free text comment.

Out of Hours

Like patient safety there is considerable cross over between the themes of staffing levels, workload and out of hours work since it was often out of hours when fewer staff were available and higher workloads were experienced. Comments about working out of hours included: having a large out of hours commitment on the rota, a lack of senior support, intense rota, moving from days to out of hours, covering a different specialty out of hours and feeling out of their depth, as well as general feelings of being over-stretched. For example:

>80% out of hours working on junior rota with little to no consideration of effect this has on ability to attend teaching opportunities. Often working 7 day runs of OOH shifts. Almost impossible to swap shifts for AL/SL due to inflexible rota. (Negative comment, Foundation trainee, Anaesthesia, Intensive Care and Emergency Medicine Post STB).

Table 13, below, provides a breakdown of the number of comments provided by trainees across the different programme and post STBs relating to this subtheme.

Table 13: Number and percentage of trainees providing comments relating to the theme Out of hours across the different STBs

	Number of	Response Categories		
	trainees in post	Positive	Mixed/	Negative
	STB providing at	(% ¹)	neutral	(% ³)
	least one free text		(% ²)	
Specialty Training Board	comment			
Anaesthesia, Intensive	78	1 (1.3)	0	8 (10,3)
Care and Emergency				
Medicine				
Diagnostics	15	0	0	1 (6.7)
Foundation	1	0	0	0
General Practice,	53	3 (5.7)	0	3 (5.7)
Occupational Health and				
Public Health				
Medical Specialties	199	5 (2.51)	0	18 (9)
Mental Health Specialties	48	1 (2.1)	0	4 (8.3)
Obstetrics & Gynaecology	90	0	1 (1.1)	6 (6.7)
and Paediatrics				
Surgery	132	1 (0.8)	0	7 (5.3)

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided mixed or neutral comments/number of trainees in STB who provided at least one free text comment

3 Number of trainees who provided negative comments/number of trainees in STB who provided at least one free text comment.

Learning Environment and Culture

The theme Learning environment and Culture contains three sub themes:

- Staff attitude
- Workplace interactions
- Team working.

Overall this theme received 149 comments, of these 108 were positive and 41 were negative.

Of the three subthemes, the subtheme Workplace interactions received the most positive comments relating to it (n=56). This subtheme also received the most negative comments (n=22).

Staff Attitude

The attitude of the staff towards the trainee, or in general was the focus of 102 comments made by the trainees, just over half (52, 51%) of these comments were positive with the trainee commenting regarding the friendliness of the staff etc. For example:

The nurse, pharmacists and AHPs are all wonderful and helpful (Positive comment, Core trainee, Medicine post STB).

However, 49 (48%) comments were negative, and related to, for example the trainee feeling undermined or bullied by staff. For example:

Culture of undermining of junior medical staff in providing patient care and in meeting learning needs by some of the nurse practitioners. (Negative Comment, Foundation trainee, Surgery Post STB).

See Table 14, below, provides a breakdown of the comments relating to staff attitude across the different training levels.

Table 14: Number and percentage of trainees providing comments relating to the theme Staff attitude across the different STBs

	Number of	Response Categories		
	trainees in post	Positive	Mixed/	Negative
	STB providing at	(% ¹)	neutral	(% ³)
	least one free text		(% ²)	
Specialty Training Board	comment			
Anaesthesia, Intensive	78	11 (14.1)	0	5 (6.4)
Care and Emergency				
Medicine				
Diagnostics	15	1 (6.7)	0	2 (13.3)
Foundation	1	0	0	0
General Practice,	53	1 (1.9)	0	1 (1.9)
Occupational Health and				
Public Health				
Medical Specialties	199	17 (8.5)	0	17 (8.5)
Mental Health Specialties	48	1 (2.1)	0	3 (6.2)
Obstetrics & Gynaecology	90	13 (14.4)	1 (1.1)	7 (7.8)
and Paediatrics				
Surgery	132	8 (6.1)	0	14 (10.6)

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided mixed or neutral comments/number of trainees in STB who provided at least one free text comment

3 Number of trainees who provided negative comments/number of trainees in STB who provided at least one free text comment.

Workplace Interactions

Interactions within the workplace was the focus of 78 comments. Most of these comments were positive (n=56, 71.8%), where the trainee spoke about friendly colleagues and good communication within the team, for example:

The renal medicine ward works hard to create a team spirit and this makes it a wonderful place to work, with good morale, efficiency, good patient care, good interdisciplinary relationships and lots of opportunity for learning. (Positive comment, Foundation trainee, Medical specialties post STB).

22 comments (28.2%) were negative. With trainees commenting about poor communication with colleagues. For example:

Often gen [sic] surgeons will not ask your name and not introduce themselves. Certain gen surg [sic] consultants make you feel like you're not appreciated and are just another person who will run around doing jobs for them. A please and thanks would be appreciated. (Negative comment, Foundation trainee, Surgery).

See table 15 for a breakdown of the number of comments relating to this subtheme across the different STBs.

Table 15: Number and percentage of trainees providing comments relating to the theme Workplace Interactions across the different STBs.

	Number of	Response Categories		
	trainees in post			
	STB providing at	Positive	Negative	
	least one free	(% ¹)	(% ²)	
Specialty Training Board	text comment			
Anaesthesia, Intensive				
Care and Emergency	78	8 (10.3)	1 (1.3)	
Medicine				
Diagnostics	15	2 (13.3)	1 (6.7)	
Foundation	1	0	0	
General Practice,				
Occupational Health and	53	3 (5.7)	1 (1.9)	
Public Health				
Medical Specialties	199	20 (10)	7 (3.5)	
Mental Health Specialties	48	2 (4.2)	4 (8.3)	
Obstetrics & Gynaecology	90	12 (13.3)	2 (2.2)	
and Paediatrics		12 (10:0)	~ \~.~/	
Surgery	132	9 (6.8)	6 (4.5)	

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided negative comments/number of trainees in STB who provided

at least one free text comment.

Teamworking

Whether there was a culture of teamworking, was the focus of 44 comments. Nearly two thirds of these comments were positive (29, 65.9%), with 15 comments (34.1%) being negative. The positive comments centred around the trainees being made to feel part of the team, for example:

Everyone in DGRI has been extremely friendly and made me feel a part of the team very quickly which I really appreciate and has made this post thoroughly enjoyable (Positive comment, Core trainee, Medical Specialties post STB).

Negative comments, on the other hand were focussed around the trainee not feeling like they were part of a team, either being excluded from the team or their not being a culture of team working, for example:

With regards to [ward location] - Don't feel part of the team or valued by seniors in GI. (Negative comment, Core trainee, Medical Specialties post STB) I did not feel part of a wider team in this role, there is no relationship between nursing and medical staff (Negative comment, Foundation trainee, Surgery post STB).

See table 16 for a breakdown of the number of comments relating to this subtheme across the different STBs.
Table 16: Number and percentage of trainees providing comments relating to the theme Teamworking across the different STBs

	Number of	Response Ca	tegories
	trainees in post		
	STB providing at	Positive	Negative
	least one free	(% ¹)	(% ²)
Specialty Training Board	text comment		
Anaesthesia, Intensive			
Care and Emergency	78	6 (7.7)	2 (2.6)
Medicine			
Diagnostics	15	3 (20)	0
Foundation	1	0	0
General Practice,			
Occupational Health and	53	5 (9.4)	0
Public Health			
Medical Specialties	199	21 (10.5)	8 (4)
Mental Health Specialties	48	3	1
Obstetrics & Gynaecology	90	8	1
and Paediatrics			-
Surgery	132	4 (3)	3 (2.3)

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided negative comments/number of trainees in STB who provided

at least one free text comment.

Trainee Support

How supported the trainee felt while on placement was the focus of several comments. There were three main subthemes – Supportive environment, colleague support and senior support. Within the theme senior support there were 9 subthemes – which were:

- Supportive environment
- Induction
- Access to study leave
- Teaching
- Protected teaching
- Supervision
- Feedback
- Availability of senior colleagues.

Overall the theme trainee support received 701 comments. Of these 489 (69.8%) were positive and 192 (27.4%) were negative (20 were mixed/neutral). The subtheme that had the most comments relating to it was supportive environment with 280 comments (245 positive comments, 35 negative comments). This theme also had the largest number of positive comments. The subtheme with the largest number of negative comments was teaching – with 62 negative comments.

Supportive Environment

Whether or not the trainee perceived their placement environment to be supportive was the focus of a number of comments (n=280). The majority of the comments were positive, with trainees commenting that they found the environment they were working in to be supportive (n= 245, 87.5%). For example:

The infectious disease department is an excellent supportive environment to work in. Senior colleagues are very supportive and provide learning opportunities to junior team members (Positive Comment GP trainee, Medical Specialty STB).

Only 35 (12.5%) respondents commented that the environment was not supportive. For example:

There is an issue with certain seniors not being supportive and not helping out. Little learning due to overwhelming ward jobs (Negative comment, Foundation trainee, Surgery Specialty STB).

Table 17 shows the number of comments relating to this subtheme across the different STBs. Examples of positive and negative comments provided by the trainees are provided below. Table 17: Number and percentage of trainees providing comments relating to the theme Supportive environment across the different STBs

	Number of	Response Categories		
	trainees in post	Positive	Mixed/	Negative
	STB providing at	(% ¹)	neutral	(% ³)
	least one free text		(%²)	
Specialty Training Board	comment			
Anaesthesia, Intensive	78	43 (55.1)	0	4 (5.1)
Care and Emergency				
Medicine				
Diagnostics	15	5	0	0
Foundation	1	0	0	0
General Practice,	53	21 (39.6)	0	2 (3.8)
Occupational Health and				
Public Health				
Medical Specialties	199	87 (43.7)	0	14 (7)
Mental Health Specialties	48	19 (39.6)	0	6 (12.5)
Obstetrics & Gynaecology	90	27 (30)	0	3 (3.33)
and Paediatrics				
Surgery	132	43 (32.6)	0	6 (4.5)

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided mixed or neutral comments/number of trainees in STB who

provided at least one free text comment

Induction

A small number (n=32) of the trainees' comments were relating to their experience of an induction. The majority of these comments (n=26, 81.2%) were negative stating that they did not receive an induction, or that the induction was not very good/useful. Examples of positive and negative comments are given below:

The Induction was superb. Only induction I've had in the 2 years that gave me all the information I needed. (Positive comment, Foundation trainee, Medical Specialties Post STB).

There was no departmental induction at the start of this block and it took a long time to be assigned an educational supervisor which I felt had a negative impact on the start of the post. (Negative comment, Core trainee, Surgery Post STB).

Table 18 below provides a breakdown of the number of comments relating to Induction across the different STBs.

Table 18: Number and percentage of trainees providing comments relating to the theme Induction across the different STBs

	Number of	Response	Categories	
	trainees in post	Positive	Mixed/	Negative
	STB providing at	(% ¹)	neutral	(% ³)
	least one free text		(%²)	
Specialty Training Board	comment			
Anaesthesia, Intensive	78	0	0	1 (1.3)
Care and Emergency				
Medicine				
Diagnostics	15	0	0	0
Foundation	1	0	0	0
General Practice,	53	0	0	3 (5.7)
Occupational Health and				
Public Health				
Medical Specialties	199	1 (0.5)	3 (1.5)	10 (5)
Mental Health Specialties	48	0	1 (2.1)	0
Obstetrics & Gynaecology	90	0	2 (2.2)	10 (11.1)
and Paediatrics				
Surgery	132	0	2 (1.5)	2 (1.5)

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided mixed or neutral comments/number of trainees in STB who provided at least one free text comment

Access to study leave

Four trainees commented negatively regarding being able to access study leave, stating that they were either unable to get study leave, or that it was difficult for them to access study leave. An example of a comment provided by a trainee is given below.

Table 19, below, provides a breakdown of the number of comments relating to access to study leave across the different STBs.

	Number of	Response C	ategories
	trainees in post		
	STB providing at	Positive	Negative
	least one free	(%1)	(%²)
Specialty Training Board	text comment		
Anaesthesia, Intensive			
Care and Emergency	78	0	0
Medicine			
Diagnostics	15	0	0
Foundation	1	0	0
General Practice,			
Occupational Health and	53	1 (1.9)	2 (3.8)
Public Health			
Medical Specialties	199	0	2 (2.2)
Mental Health Specialties	48	0	0
Obstetrics & Gynaecology	90	1 (1.1)	0
and Paediatrics	50	± (±•±)	0
Surgery	132	0	0

Table 19: Number and percentage of trainees providing comments relating to the theme Access to study leave across the different

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

Teaching

The amount and quality of teaching (both formal and informal) was the focus of 182 trainee comments, with 112 (61.5%) positive, 8 (4.4%) mixed/neutral and 62 (34%) negative comments. Examples of positive and negative comments are provided below:

Excellent on the job teaching whereby consultants go see patients with you after you have clerked and give good constructive criticism. (Positive comment, Core trainee, Acute Internal Medicine).

Outside of a few teaching ward rounds (which I do very much enjoy but impact on management of workload/taking breaks), there is barely any teaching/prioritisation of FY2 learning (Negative comment, Foundation trainee, Neurosurgery).

Table 20, below, provides a breakdown of the number of comments relating to Induction across the different STBs.

Table 20: Number and percentage of trainees providing comments relating to the theme Teaching across the different Post STBs

	Number of	Response C	ategories	
Specialty Training Board	trainees in post STB providing at least one free oard text comment	Positive (%1)	Mixed/ Neutral (%²)	Negative (%³)
Anaesthesia, Intensive Care and Emergency Medicine	78	13 (16.7)	1 (1.3)	5 (6.4)
Diagnostics	15	0	0	2 (13.3)
Foundation	1	0	0	0
General Practice, Occupational Health and Public Health	53	9 (17)	2 (3.8)	6 (11.3)
Medical Specialties	199	29 (14.6)	1 (0.5)	19 (9.5)
Mental Health Specialties	48	4 (8.3)	0	3 (6.2)
Obstetrics & Gynaecology and Paediatrics	90	28 (31.1)	3 (3.3)	14 (15.6)
Surgery	132	29 (22)	1 (0.76)	13 (9.8)

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided mixed or neutral comments/number of trainees in STB who provided at least one free text comment

Protected teaching

Whether the teaching sessions offered were protected, was also highlighted by a number of the trainees (n=19), with 57.9% (n=11) stating that they were unable to attend the protected teaching, there was no protected time for teaching and/or teaching was not bleep free:

Heavy workload affects learning opportunity and bleep-free teaching is not always possible. FY1s are always occupied with ward works and lack of opportunity for clinical skills development and learning. (Negative comment, Foundation trainee, Surgery Specialty STB).

However, 7 trainees did provide positive comments relating to this theme, for example:

I always manged to have a protective time (without the bleep) for the weekly national teaching (positive comment, Higher trainee, Diagnostics Specialty STB).

Table 21, below, provides a breakdown of the number of comments relating to protected teaching across the different STBs.

Table 21: Number and percentage of trainees providing comments relating to the theme Protected teaching across the different STBs

	Number of	Response C	ategories	
Specialty Training Board	trainees in post STB providing at least one free rd text comment	Positive (%¹)	Mixed/ Neutral (%²)	Negative (%³)
Anaesthesia, Intensive Care and Emergency Medicine	78	1 (1.3)	0	0
Diagnostics	15	1 (6.7)	0	0
Foundation	1	0	0	0
General Practice, Occupational Health and Public Health	53	1 (1.9)	0	0
Medical Specialties	199	1 (0.5)	1 (0.5)	4 (2)
Mental Health Specialties	48	0	0	0
Obstetrics & Gynaecology and Paediatrics	90	2 (2.2)	0	2 (2.2)
Surgery	132	1 (0.8)	0	5 (0.8)

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided mixed or neutral comments/number of trainees in STB who provided at least one free text comment

Supervision

The level and quality of supervision received by the trainees was the focus of 60 comments. Of these, 34 (56.7%) were positive comments – where the trainee stated that they had, for example, good quality supervision or a good amount of supervision, for example:

Throughout this post I meet up with my clinical supervisor weekly. We speak about my performance which is incredible support and in comparison to any other job I've had is very useful for my development (Positive comment, GP trainee, Mental health specialty STB).

However, there was also 25 (41.7%) negative comments where the trainee stated that they had either little or no supervision or the supervision was, in their opinion, of poor quality. For example:

Most of our clinical time is organised so that we get little to no clinical supervision. (Negative comment, Higher trainee, Medical Specialties STB).

Table 22, below, provides the number of trainees who provided comments relating to this subtheme across the different specialty training boards.

Table 22: Number and percentage of trainees providing comments relating to the theme Supervision across the different post STBs

	Number oftrainees in postSTB providing atleast one freeSoardtext comment	Response C	ategories	
Specialty Training Board		Positive (%1)	Mixed/ Neutral (%²)	Negative (%³)
Anaesthesia, Intensive	78			
Care and Emergency		1	0	1
Medicine				
Diagnostics	15	0	0	0
Foundation	1	0	0	0
General Practice,	53			
Occupational Health and Public Health		4	0	1
Medical Specialties	199	11	1	9
Mental Health Specialties	48	5	0	8
Obstetrics & Gynaecology and Paediatrics	90	5	0	5
Surgery	132	8	0	1

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided mixed or neutral comments/number of trainees in STB who provided at least one free text comment

Feedback

The amount and quality of feedback received by the trainees was the focus of 21 trainee comments. Of these, 11 (52.4%) were positive comments – where the trainee stated that they had, for example, constructive feedback. For example:

Excellent post overall. Senior staff very supportive and available when needed. Feel valued and that my training is important to the consultants, excellent opportunities for feedback and learning via post take ward round/HDU and handover. (Positive comment, Higher trainee, Medical specialty STB).

However, 9 (42.9%) trainees also provided negative comments where the trainee stated that they had either little or no feedback or the feedback was, in their opinion, of poor quality and/or not constructive. For example:

My clinical supervisor did not see me clinically as they were not based on the ward. For the feedback they did not appear to have spoken to other consultant colleagues to find out about my clinical work. (Negative comment, GP trainee, Obstetrics & Gynaecology and Paediatrics Specialty STB).

Consultant feedback seemed to be used as a way to make nasty comments about trainees behind their backs. Also was anonymous so there no way to follow up to ask the person for further explanation of what had caused the negative comments or ways to improve. (Negative comment, Core trainee, Anaesthetic specialty STB).

Table 23, below, provide the number of trainees who provided comments relating to this subtheme across the different specialty training boards.

Table 23: Number and percentage of trainees providing comments relating to the theme Feedback across the different STBs

	Number of	Response C	ategories	
Specialty Training Board	trainees in post STB providing at least one free training Board text comment	Positive (%1)	Mixed/ Neutral (%²)	Negative (%³)
Anaesthesia, Intensive	78			
Care and Emergency		2	0	2
Medicine				
Diagnostics	15	0	0	0
Foundation	1	0	0	0
General Practice,	53			
Occupational Health and Public Health		2	0	0
Medical Specialties	199	4	0	3
Mental Health Specialties	48	2	0	0
Obstetrics & Gynaecology and Paediatrics	90	0	1	4
Surgery	132	1	0	0

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided mixed or neutral comments/number of trainees in STB who provided at least one free text comment

Availability of senior colleagues

Whether the trainee could get in contact with a senior (how easy it was to access senior support etc) was the focus of 98 trainee comments. Of these, 77 (78.6%) were positive comments, with the trainee stating that it was, for example, easy to access senior support or that consultants were approachable. For example:

Excellent post overall. Senior staff very supportive and available when needed. Feel valued and that my training is important to the consultants, excellent opportunities for feedback and learning via post take ward round/HDU and handover. (Positive comment, Higher trainee, Medical Specialty STB).

Only 20 (20.4%) of the comments were negative, where, for example the trainee was unable to contact a senior when needed. For example:

I frequently feel like I'm not really a part of the team, and have at times found it very difficult to get any senior support on the wards, which can leave me feeling nervous about my actions. (Negative comment, Foundation trainee, Obstetrics & Gynaecology and Paediatrics Specialty STB).

Table 24, below, provide the number of trainees who provided comments relating to this subtheme across the different programme and post STBs.

Table 24: Number and percentage of trainees providing comments relating to the theme Availability of senior colleagues across the different STBs

	Number of	Response	Categories	
	trainees in post			
	STB providing at	Positive	Mixed/ Neutral	Negative
	least one free	(% ¹)	(% ²)	(% ³)
Specialty Training Board	text comment			
Anaesthesia, Intensive				
Care and Emergency	78	6	0	2
Medicine				
Diagnostics	15	0	0	0
Foundation	1	0	0	0
General Practice,				
Occupational Health and	53	3	0	0
Public Health				
Medical Specialties	199	34	0	7
Mental Health Specialties	48	6	0	2
Obstetrics & Gynaecology	90	15	1	1
and Paediatrics	50	10	*	±
Surgery	132	13	0	8

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided mixed or neutral comments/number of trainees in STB who provided at least one free text comment

3 Number of trainees who provided negative comments/number of trainees in STB who provided at least one free text comment.

Experience and Development

There were 8 subthemes under this theme:

- Learning opportunities
- Balance between training and service provision
- Sufficiently challenging tasks.

All except for the subtheme 'sufficiently challenging tasks was additionally coded as positive, negative or mixed/neutral. The subtheme 'sufficiently challenging tasks' was coded as:

- Too challenging
- Challenging enough
- Not challenging enough.

Overall there were 440 comments relating to this theme – with 229 (52%) being positive and 205 (%) being negative (the final 6 comments being mixed/neutral). With regards to the subtheme sufficiently challenging tasks, which was coded differently, the codes 'Too challenging' and 'Not challenging enough' were included in the count of negative codes and 'challenging enough' was included in the count of positive.

Learning Opportunities

Whether or not the trainee had the opportunity to develop clinical/professional skills while on placement was highlighted by a number of trainees. 273 trainees commented regarding whether or not they had learning opportunities while on placement – of these 162 (59.3%) comments were positive– stating that they had enough opportunities to develop skills. An example of a positive quote is provided below:

Very approachable and supportive senior staff and colleagues in general. Plenty of learning opportunities that allow me to develop the specialty and generic skills required to adapt to the role of a clinical oncologist (Positive comment, Higher trainee, Medical Specialties STB).

However, 107 (39.2%) commented that they had little or no opportunity to develop relevant skills. For example:

Less and less variety in anaesthetic work-load after initial few months, many cases were very similar, without lots of opportunity to develop skills. Awful lot of time was spent "on-call", without assigned lists. Had <30 intubations in almost 5 months. (Negative comment, Core trainee, Anaesthetics specialty STB).

Some trainees had no time to go to clinics due to the ward being short staff or the workload being too great:

The rotation is very understaffed by junior doctors. This reduced the ability to attend departmental teaching opportunities. It also reduces the opportunity for practical skill development. (Negative comment, Foundation trainee, Surgery specialty STB).

Table 25, below, provide the number of trainees who provided comments relating to this subtheme across the different specialty training boards.

Table 25: Number and percentage of trainees providing comments relating to the theme Learning opportunities across the different STBs

	Number of	Response C	ategories	
	trainees in post			
	STB providing at	Positive	Mixed/	Negative
	least one free	(% ¹)	Neutral (% ²)	(% ³)
Specialty Training Board	text comment			
Anaesthesia, Intensive				
Care and Emergency	78	9 (11.5)	1 (1.3)	9 (11.5)
Medicine				
Diagnostics	15	4 (26.7)	0	3 (20)
Foundation	1	1 (100)	0	0
General Practice,				
Occupational Health and	53	12 (22.6)	0	2 (3.8)
Public Health				
Medical Specialties	199	62 (31.2)	0	38 (19.1)
Mental Health Specialties	48	10 (20.8)	0	5 (10.4)
Obstetrics & Gynaecology	90	18 (20)	2 (2.2)	18 (20)
and Paediatrics	50	10 (20)	۲ (۲۰۲)	10 (20)
Surgery	132	36 (27.3)	1 (0.76)	32 (24.2)

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided mixed or neutral comments/number of trainees in STB who provided at least one free text comment

Balance between training and service provision

Of the 116 comments regarding this theme, 63.8% (n=74) were negative, stating that their role was that of service provision rather than a training role. For example:

In this GP post there is no teaching at all. It feels we are purely here for service provision. There is no time set aside to discuss cases or any tutorials. We have been discouraged from attending formal FY2 teaching following ARCP. (Negative comment, Foundation trainee, General Practice, Occupational Health and Public Health Specialty STB).

Does not feel like this post should be a training post. Most of what I do is admin and paperwork. Even though I am meant to be on general psychiatry I am actually on rehabilitation psychiatry. Very limited exposure to acute presentations and [comment cut off] (Negative comment, Foundation trainee, Mental Health Specialty STB).

34.5% (n=40) of the comments were positive, stating that there was a good balance between training and service provision. For example:

Feel valued and that my training is important to the consultants, excellent opportunities for feedback and learning via post take ward round/HDU and handover. (Positive comment, Higher trainee, Medical specialties STB).

Excellent post with a good balance of receiving and critical care. It feels like training is of equal priority to service provision which is rare (Positive comment, Higher trainee, Medical specialties STB).

Table 26, below, provides a breakdown of the number of comments provided by trainees across the different programme and post STBs relating to this subtheme.

	Number of	Response C	ategories	
	trainees in post			
	STB providing at	Positive	Mixed/	Negative
	least one free	(% ¹)	Neutral (% ²)	(% ³)
Specialty Training Board	text comment			
Anaesthesia, Intensive				
Care and Emergency	78	12 (15.4)	0	9
Medicine				
Diagnostics	15	4 (26.7)	0	1 (6.7)
Foundation	1	0	0	0
General Practice,				
Occupational Health and	53	1 (1.9)	0	9 (17)
Public Health				
Medical Specialties	199	7 (3.5)	1 (0.5)	27 (13.6)
Mental Health Specialties	48	3 (6.25)	0	6 (12.5)
Obstetrics & Gynaecology	90	5 (5.5)	1 (1.1)	11 (12.2)
and Paediatrics	50	5 (5.5)	± (±.±)	±± (±∠,∠)
Surgery	132	8 (6.1)	0	11 (8.3)

Table 26: Number and percentage of trainees providing comments relating to the theme Balance between training and service provision across the different STBs

1 Number of trainees who provided positive comments/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided mixed or neutral comments/number of trainees in STB who provided at least one free text comment

Sufficiently Challenging tasks

Whether the tasks the trainee was engaged in was too challenging or conversely, not challenging enough was the focus of 51 trainees' comments. Of these, 52.9% (n=27) stated that the work was challenging enough, i.e. the work was sufficiently challenging to allow them to develop as a doctor. For example:

I requested the opportunity to have solo lists with some more challenging cases. I have been very well supported in this both on day shift and out of hours. I feel I have hugely developed as an anaesthetist and gained a huge amount of confidence. (Higher trainee, Anaesthetics specialty STB).

However, 18 (35.3%) felt that the work was not challenging them sufficiently for example, one trainee stated:

FY1 level duties (bloods, cannulas, discharge letters) required to be undertaken on many shifts which is not beneficial to my training at this point. (GP trainee, Obstetrics & Gynaecology and Paediatrics Specialty STB).

Also, 5 (9.8%) stated that the work was too challenging, where they felt the tasks they were engaged in or the level of responsibility they were given was too high for their training level. For example:

I feel is a huge and inappropriate responsibility for an FY2 to cover CAMHS out of hours, both from a psychiatric and medical perspective. I have not felt prepared for this and it makes me uncomfortable. (Foundation trainee, Mental health specialty STB).

Table 27, below, provides a breakdown of the number of comments provided by trainees across the different programme and post STBs relating to this subtheme.

Table 27: Number and percentage of trainees providing comments relating to the theme Sufficientlychallenging tasks across the different STBs

	Number of	Response Ca	tegories	
Specialty Training Board	trainees in post STB providing at least one	Too challenging (% ¹)	Challenging Enough (%²)	Not Challenging Enough (%³)
Anaesthesia, Intensive Care and Emergency Medicine	78	1 (1.3)	3 (3.8)	0
Diagnostics Foundation	15 1	0 0	1 (6.7) 0	0
General Practice, Occupational Health and Public Health	53	0	4 (7.5)	1 (1.9)
Medical Specialties Mental Health Specialties	199 48	1 (0.5) 1 (2.1)	8 (4) 1 (2.1)	10 (5) 1 (2.1)
Obstetrics & Gynaecology and Paediatrics	90	1 (1.1)	4 (4.4)	3 (3.33)
Surgery	132	1 (0.8))	6 (4.5)	4 (3)

1 Number of trainees who provided comments stating that the tasks were too challenging/number of trainees in STB who provided at least one free text comment

2 Number of trainees who provided comments stating that the tasks were challenging enough/number of trainees in STB who provided at least one free text comment

3 Number of trainees who provided comments stating that the tasks were not challenging

enough/number of trainees in STB who provided at least one free text comment.

Section 2: Programme STB's - Foundation and General Practice/Occupational Health/Public Health

Trainees in both the Foundation Programme STB and the General Practice/Occupational Health/Public Health Programme STBs are also being reported on as, owing to the nature of the training, trainees in these programmes are often in different posts – both hospital and general practice. Therefore, their post STB is often different from their programme STB.

Foundation Programme STB

There were 299 comments (either positive or negative) from 210 trainees in the Foundation Programme STB. The theme that received the most positive comments was supportive environment, which received 78 comments relating to it. There was also a large number of positive comments regarding the support a trainee received (teaching, n=41 and availability of senior colleagues, n=26).

The theme that received the most negative comments relating to it was staffing levels with 40 comments relating to it. The subthemes design and management of the rota (n=39), patient safety (N=23), teaching (n=28), workload (n=38) and learning opportunities (n=32) also received a large number of negative comments. See tables 28-31, below, for a breakdown of the number of comments provided by trainees across the Foundation programme STBs relating to the 4 themes and corresponding subthemes.

Subtheme	No. positive comments	No. mixed/neutral comments	No. negative comments
Rota design/management	3	0	39
Staffing levels	1	1	40
Ward rounds/handover	3 0		15
	Too Much	Unpredictable	Too Little
Workload	35	2	1
	No. positive comments	No. mixed/neutral comments	No. negative comments
Hours worked	1	0	8
Patient Safety	1	0	23

Table 28: Theme: Working Conditions

Out of hours	4	1	13

Table 29: Theme: Learning environment and Culture

Subtheme	No. positive	No. mixed/neutral	No. negative
Staff attitude	13	0	22
Workplace interactions	20	0	7
Teamworking	15	0	8

Table 30: Theme: Trainee Support

Subtheme	No. positive No. mixed/neutra		al No. negative	
	comments	comments	comments	
Supportive environment	79	0	3	
Induction	1	4	10	
Access to study leave	1	0	1	
Teaching	41	4	28	
Protected teaching	4	0	8	
Supervision	12	0	5	
Feedback	4	0	3	
Availability of senior			10	
colleagues	26	1	10	

Table 31: Theme: Experience/development

Subtheme	No. positive	No. mixed/neutral	No. negative
	comments	comments	comments
Learning opportunities	52	2	36
Balance between training and service provision	6	0	20
	Too challenging	Challenging enough	Not challenging enough
Sufficiently challenging tasks	4	9	3

General Practice, Occupational Health and Public Health STB

There were 163 comments (either positive or negative) from 117 trainees in the General Practice/Occupational Health/Public Health Programme STB. The theme that received the most positive comments was supportive environment with 38 comments relating to it. There was also a number of positive comments relating to other aspects of trainee support including teaching (n=14) and availability of senior colleagues (n=16), the theme learning opportunities also received a number of comments (N=18).

The theme that received the most negative comments was balance between training and service provision with 18 comments. Other themes that received a number of negative comments related to working conditions – rota design/management (n=13) and staffing levels (n=13) - and learning opportunities (N=13).

See tables 32-35, below, for a breakdown of the number of comments provided by trainees across the Foundation programme STBs relating to the 4 themes and corresponding subthemes.

Subtheme	No. positive comments	No. mixed/neutral comments	No. negative comments
Rota design/management	1	1	13
Staffing levels	0	0	13
Ward rounds/handover	1	1	1
	Too Much	Unpredictable	Too Little
Workload	6	2	1
	No. positive comments	No. mixed/neutral comments	No. negative comments
Hours worked	0	0	5
Patient Safety	0	0	7
Out of hours	2	0	11

Table 32: Theme: Working Conditions

Table 33: Theme: Learning environment and Culture

Subtheme	No. positive comments	No. mixed/neutral comments	No. negative comments
Staff attitude	7	1	7
Workplace interactions	7	0	2
Teamworking	13	0	2

Table 34: Theme: Trainee Support

Subtheme	No. positive comments	No. mixed/neutral comments	No. negative comments
Supportive environment	38	0	8
Induction	0	2	7
Access to study leave	1	0	2
Teaching	14	1	10
Protected teaching	0	0	0
Supervision	5	0	6
Feedback	2	0	3
Availability of senior colleagues	16	0	3

Table 35: Theme: Experience/development

	No. positive	No.	No. negative
Subtheme	comments	mixed/neutral	comments
		comments	
Learning opportunities	18	1	13
Balance between			
training and service	1	0	18
provision			
	Too challenging	Challenging	Not challenging
	100 chattenging	enough	enough
Sufficiently challenging	1	3	3
tasks		د 	5

Conclusions

Limitations

This analysis is based on a relatively small number of trainees – only 15.4% of STS respondents (616/4010) left a free text comment.

The themes were developed, and the comments coded by one researcher only (JF). Whilst this has the advantage of one person being fully immersed in the data, it means that there was no additional input into devising the themes and sub-themes.

Non-response bias may have been present; those who provided comments may have been different to those who responded to the questionnaire but did not provide comments and those who did not respond. Conversely, a topic that has been raised by one doctor may also have been important to other doctors but for whatever reason these doctors did not mention the topic. Furthermore, the number of participants writing about a particular theme cannot be seen as 'representative' of the views of the sample as a whole as they reflect what trainees chose to write.

The space for free text was limited to 250 characters. This meant that in several cases the comments ended mid-sentence, hampering meaning. It also meant that trainees could not raise as many issues or report their comments as fully as they might have liked (several trainees specifically mentioned the lack of space).

Conclusion

By analysing the free text comments, a more in depth understanding of the trainees' experience of their placement can be achieved. The free text questions enable the trainee to focus on the areas that are of most importance to them, which can therefore inform the quality management of the trainees' placements. This current analysis has shown that many trainees are enjoying high quality training in a supported and stimulating environment. Many trainees report that they are gaining good experience in a friendly and helpful team and several mentioned the names of specific consultants whom they felt were inspiring or particularly supportive. Nonetheless, a mixed picture emerges, with some trainees disappointed with teaching and on the job experience

(commenting that they feel they are being used for service provision rather than being trained or having a lack of learning opportunities), unhappy with staffing levels and rotas, experiencing high workloads and, in some cases, a concern for patient safety.

Appendix 1: Analysis of Free text comments by Post STB

Theme	Subtheme	No. positive comments	No. mixed/neutral comments	No. negative comments
Working conditions	Rota design/management	2	0	18
	Staffing levels	1	0	8
	Ward rounds/handover	0 Too Much	0 Unpredictable	2 Too Little
	Workload	6 No. positive	0 No. mixed/neutral	0 No. negative
		comments	comments	comments
	Hours worked Patient Safety	1 0	0	4
	Out of hours	1	0	8
Learning environment and	Staff attitude Workplace interactions	11 8	0 0	5
Trainee support	Teamworking Supportive environment	6 43	0 0	2 4
	Induction Access to study leave	0 0	0	0
	Teaching Protected teaching	13 1	1 0	5 0
	Supervision Feedback	1 2	0	1 2
	Availability of senior colleagues	6	0	2
Experience/	Learning opportunities	19	1	9
development	Balance between training and service provision	12	0	9
		Too challenging	Challenging enough	Not challenging enough
	Sufficiently challenging tasks	1	3	0

Anaesthesia, Intensive Care and Emergency Medicine

Diagnostics

Theme	Subtheme	No. positive comments	No. mixed/neutral comments	No. negative comments
Working conditions	Rota design/management	1	0	1
	Staffing levels Ward rounds/handover	0	0 0	0
	Workload	Too Much1No. positivecomments	Unpredictable 0 No. mixed/neutral comments	Too Little 0 No. negative comments
	Hours worked Patient Safety Out of hours	0 1 0	0 0 0	0 0 1
Learning environment and	Staff attitude Workplace interactions Teamworking	1 2 3	0 0 0 0	2 1 0
Trainee support	Supportive environment Induction Access to study leave Teaching	5 0 0 0	0 0 0 0 0	0 0 0 2
	Protected teaching Supervision Feedback	1 0 0	0 0 0	0 0 0
	Availability of senior colleagues	0	0	0
Experience/ development	Learning opportunities Balance between training and service provision	4	0 0	3
	Sufficiently challenging	Too challenging	Challenging enough	Not challenging enough
	tasks	0	1	0

Foundation

Theme	Subtheme	No. positive comments	No. mixed/neutral comments	No. negative comments
Working conditions	Rota design/management	0	0	0
	Staffing levels Ward rounds/handover	0 0	0 0	0
	Workload	Too Much0No. positivecomments	Unpredictable 0 No. mixed/neutral comments	Too Little 0 No. negative comments
	Hours worked Patient Safety Out of hours	0 0 0	0 0 0	0 0 0
Learning environment and	Staff attitude Workplace interactions Teamworking	0 0 0	0 0 0 0	0 0 0 0
Trainee support	Supportive environment Induction Access to study leave Teaching Protected teaching	0 0 0 0 0	0 0 0 0 0 0	0 0 0 0 0 0
	Supervision Feedback Availability of senior colleagues	0 0 0 0	0 0 0	0 0 0
Experience/ development	Learning opportunities Balance between training and service provision	1 0	0	0
		Too challenging	Challenging enough	Not challenging enough
	Sufficiently challenging tasks	0	0	0

Theme	Subtheme	No. positive comments	No. mixed/neutral comments	No. negative comments
Working conditions	Rota design/management	0	0	4
	Staffing levels Ward rounds/handover	0 0 Too Much	0 0 Unpredictable	2 0 Too Little
	Workload	3 No. positive comments	1 No. mixed/neutral comments	0 No. negative comments
	Hours worked Patient Safety Out of hours	0 0 3	0 0 0	0 2 3
Learning environment and	Staff attitude Workplace interactions Teamworking	1 3 5	0 0 0 0	1 1 0
Trainee support	Supportive environment Induction Access to study leave Teaching Protected teaching	21 0 1 9 1	0 0 0 2 0	2 3 2 6 0
	Supervision Feedback Availability of senior	4 2 3	0 0 0	0 0 0
Experience/ development	colleagues Learning opportunities Balance between training	12	0	2
development	and service provision	1	0	9 Not
		Too challenging	Challenging enough	challenging enough
	Sufficiently challenging tasks	0	4	1

General Practice, Occupational Health and Public Health

Medical Specialties

Theme	Subtheme	No. positive comments	No. mixed/neutral comments	No. negative comments
Working conditions	Rota design/management	2	1	40
	Staffing levels Ward rounds/handover	0 6	1 1	36 12
	Workload	Too Much22No. positivecomments	Unpredictable 0 No. mixed/neutral comments	Too Little 1 No. negative comments
	Hours worked Patient Safety Out of hours	0 0 5	0 0 0	6 23 18
Learning environment	Staff attitude Workplace interactions Teamworking	17 20 21	0 0 0	17 27 8
Trainee support	Supportive environment Induction Access to study leave Teaching Protected teaching Supervision Feedback Availability of senior colleagues	87 1 0 29 1 11 4 34	0 3 0 1 1 1 0 0	14 10 2 19 4 9 3 7
Experience/ development	Learning opportunities Balance between training and service provision	62 7 Too	0 1 Challenging	38 27 Not challenging
	Sufficiently challenging tasks	challenging	enough 8	enough 10

Mental Health Specialties

Theme	Subtheme	No. positive comments	No. mixed/neutral comments	No. negative comments
Working conditions	Rota design/management	0	0	3
	Staffing levels Ward rounds/handover	0 0 Too Much	0 0 Unpredictable	4 2 Too Little
	Workload	4 No. positive comments	I No. mixed/neutral comments	0 No. negative comments
	Hours worked Patient Safety Out of hours	0 0 1	0 0 0	1 1 4
Learning environment	Staff attitude Workplace interactions teamworking	1 2 3	0 0 0	3 4 1
Trainee support	Supportive environment Induction Access to study leave Teaching Protected teaching Supervision Feedback Availability of senior colleagues	19 0 0 4 0 5 2 6	0 1 0 0 0 0 0 0 0 0 0	6 0 0 3 0 8 0 2
Experience/ development	Learning opportunities Balance between training and service provision	10 3	0	5 6
	Sufficiently challenging	Too challenging	Challenging enough	Not challenging enough
	tasks		1 	

Obstetrics & Gynaecology and Paediatrics

Theme	Subtheme	No. positive comments	No. mixed/neutral comments	No. negative comments
Working conditions	Rota design/management	5	0	10
	Staffing levels Ward rounds/handover	0 1 Too Much	0 0 Unpredictable	7 3 Too Little
	Workload	1 No. positive comments	1 No. mixed/neutral comments	1 No. negative comments
	Hours worked Patient Safety Out of hours	0 2 0	0 0 1	0 2 6
Learning environment	Staff attitude Workplace interactions teamworking	13 12 8	1 0 0	7 2 1
Trainee support	Supportive environment Induction Access to study leave Teaching Protected teaching Supervision Feedback Availability of senior colleagues	27 0 1 28 2 5 0 15	0 2 0 3 0 0 1 1 1	3 10 0 14 2 5 4 1
Experience/ development	Learning opportunities Balance between training and service provision	18 5 Too challenging	2 1 Challenging enough	18 11 Not challenging enough
	Sufficiently challenging tasks	1	4	3

Surgery

Theme	Subtheme	No. positive comments	No. mixed/neutral comments	No. negative comments
Working conditions	Rota design/management	1	0	15
	Staffing levels Ward rounds/handover	1 0 Too Much	0 0	19 6 T ee Little
	Workload	Too Much 22 No. positive comments	Unpredictable 1 No. mixed/neutral comments	Too Little 0 No. negative comments
	Hours worked Patient Safety Out of hours	0 0 1	0 0 0	7 8 7
Learning environment and	Staff attitude Workplace interactions teamworking	8 9 4	0 0 0	14 6 3
Trainee support	Supportive environment Induction Access to study leave Teaching Protected teaching Supervision Feedback Availability of senior colleagues	4 43 0 0 29 1 8 1 13	0 2 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	3 6 2 0 13 5 1 0 8
Experience/ development	Learning opportunities Balance between training and service provision	36 8	1 0	32 11
	Sufficiently challenging tasks	Too challenging	Challenging enough 6	Not challenging enough 4