Junior Doctors' Experiences on Surgical Cover Shifts: A Qualitative Interview Study

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Introduction

- Junior Doctors are vital for after-hours surgical patient care, providing timely, efficient, and safe services when primary teams are not rostered.
- These shifts are demanding, often involving administrative tasks, minimal surgical theatre time, and potentially contributing to professional dissatisfaction and burnout.
- This study aims to explore the experiences of JDs on Surgical Cover Shifts to understand the barriers and enablers impacting their professional satisfaction and training progression during these rotations.

Methods

Study Design: A prospective qualitative study using semi-structured interviews.

Participants:

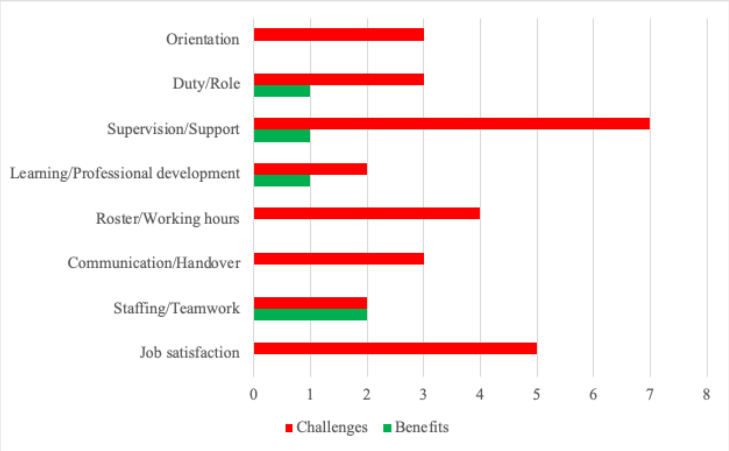
- 12 Junior Doctors (Post-Graduate Year 4 or below) who had completed at least four weeks of surgical cover rotations within the 12 weeks prior to the interview. (5 male, 7 female)

Data Collection:

- Conducted between August and November 2021.Semi-structured interviews, either face-to-face or via videoconference, recorded and transcribed verbatim.
- Interviews focused on general experiences, barriers, enablers, and suggestions for improvement.

Data Analysis: Descriptive qualitative approach based on naturalistic inquiry.

Figure 1: Distribution of benefits and challenges across themes arising relating to the surgical cover shift



"It was my first rotation in this hospital, and I was starting on night shifts. I didn't know the system, how it works..."

– Participant 2

"I was lucky because it was my first ever shift in Australia. They paired me up with another doctor for my first two shifts, which were evening shifts. That was good for me because he was able to teach me about how to use the computer system, how the paging system works."

– Participant 6

"Nurse-in-charge, executives, they want us to prioritise discharging of the patients during our shifts. There is a lot of pressure from that point of view, and it was compromising our standard of care"

– Participant 11

"Support wise, I wasn't told formally who I'm supposed to report to, and who's my first contact of person that if I have any trouble in my shift. Was it my reg or any of the other teams? All of this were missing!"

– Participant 2

"I can't imagine what it's like for people that have families and partners when you say, over the next eight weeks, and on weekends, I cannot see you at all, because I am working from 7am to 9pm."

– Participant 7

"The hours are very unsociable. For example, all my friends finish work at 5pm, and I start at 4pm, so I can't meet up with them at any chance. When I work all weekends, I will certainly miss all the opportunities to see my friends."

– Participant 6

Results

Key Themes: Eight overarching themes were identified from the analysis, with multiple barriers (2-7 per theme) and some enablers (1-2 per theme).

Main Barriers:

- Lack of formal orientation.
- Poor communication and handover.
- Lack of supervision and support.
- Limited learning opportunities and professional development (e.g., restricted theatre time, insufficient recognition).
- Poor job satisfaction and work-life balance.
- Feeling isolated in challenging situations with minimal opportunity for debrief.

Enablers: Occasional independent learning during free time.

Impact: The findings indicate numerous barriers with few enablers, raising concerns about job dissatisfaction deterring JDs from pursuing surgical careers.

Conclusion

This study highlights significant barriers faced by junior doctors in surgical cover rotations, including inadequate orientation, supervision, support, limited learning opportunities, and poor work-life balance. These factors contribute to job dissatisfaction and may impact career progression in surgery.