Perceptions of out-of-hours support for new doctors on the medical rota

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Background

Medical ward cover on-call shifts provide opportunities for junior doctors to gain experience managing unwell patients. The nature of out-of-hours work dictates that there are fewer doctors 'on the ground', often meaning they work alone. Research recognises that medical errors are more likely to occur when junior doctors do not access support from senior colleagues. Furthermore, access to senior support is an important component of effective clinical supervision and development of the key skills required to be a junior doctor. This project aimed to evaluate foundation year-1 (FY1) doctors' experience of accessing out-of-hours support and ascertain any preconceived barriers to asking for help.

Method

A survey was distributed in January 2022 to 41 FY1 doctors working on the medical rota. This was completed anonymously via Microsoft Forms, distributed to doctors through mobile messaging services. Multiple choice answers, short free text responses and a 10-point Likert scale were used. The results were analysed using a Microsoft Excel spreadsheet.

Results

In total, 21 responses were received. Most respondents 'sometimes' knew who the medical registrar was, for both weekday and weekend shifts, with 9.5% and 14.2% respectively reporting they 'never' knew. During weekdays, 66.6% of FY1s reported contacting the registrar 1–2 times per shift, and 19% admitted never contacting the registrar. Conversely, more FY1s reported 'always' knowing who the senior house officer (SHO) was during weekdays (33.3%) and 52.3% contacted the SHO 3–4 times per shift. These findings were echoed during weekends.

Likert scale answers rating how comfortable the respondents felt contacting their seniors out of hours revealed a greater level of comfort contacting the SHO than the registrar. The most common reason for lack of comfort contacting the registrar was 'they are too busy and I don't want to disturb them'.

Thematic analysis of free text responses revealed 42.8% of respondents felt a regular meeting or mobile messaging group

would help them feel more supported during ward cover shifts. Over 90% felt that these shifts were a good learning opportunity. Increasing staffing levels (19%) and working alongside or improving communication with senior colleagues (23.8%) were the most common suggestions to enhance learning.

Discussion

The finding that FY1s were more likely to seek advice from SHOs than the registrar is consistent with FY1s being encouraged to escalate queries appropriately up the ladder of senior colleagues, and therefore is not entirely unexpected. However, the results did highlight that frequently FY1s are not aware of which colleagues are available to support them, which could feed into feelings of isolation. The low level of comfort reported at contacting the registrar reinforces hierarchical models of the on-call system. Moving forward, implementing regular meetings and improving communication could help foster a team mentality and increase support for new doctors.

References

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