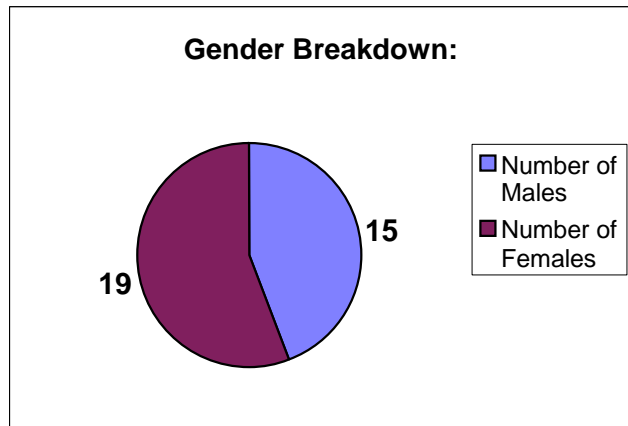


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A. General Information

Number of F1s:	40
Number of surveys returned:	34

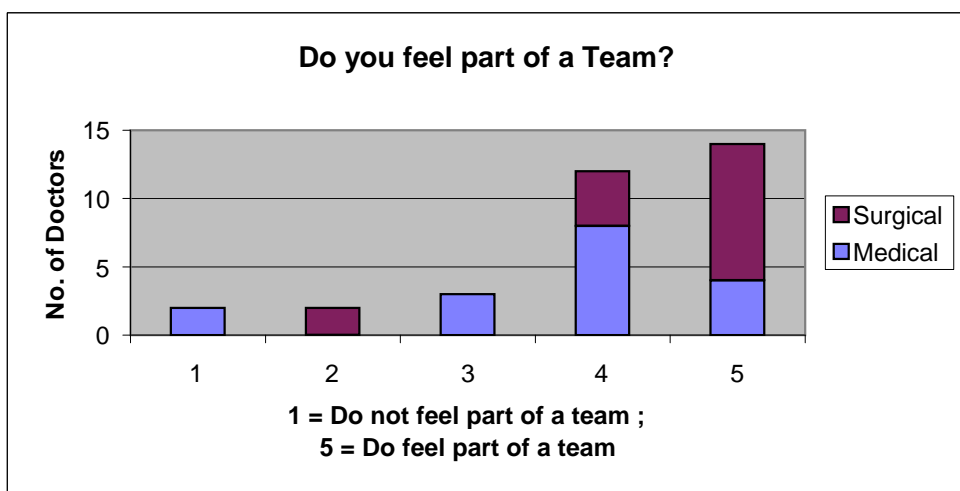


Graduated from Queens University **31**
Graduated Other **3**

Do you feel that your experience at medical school has adequately prepared you for your F1 year? Yes No DNA

B. Current Post

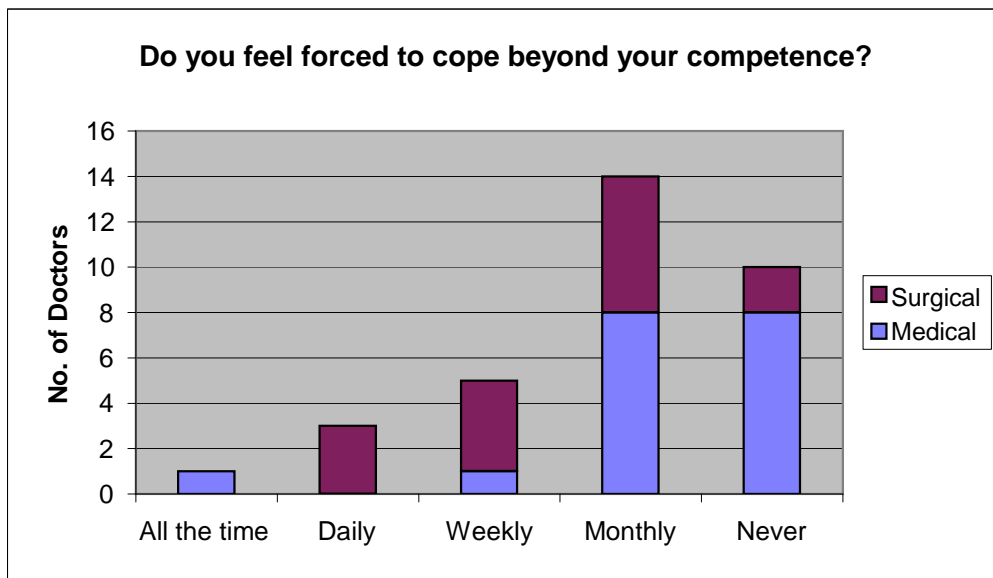
Type of F1 post at present Medical Surgical



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Do you receive career counselling in your current post?

MEDICAL			
No, but would like it	11	No, but will happen	0
No, not necessary	2	Yes, not useful	2
Yes, useful	3		
SURGICAL			
No, but would like it	11	No, but will happen	1
No, not necessary	2	Yes, not useful	2
Yes, useful	0		



Hands on Experience?

	V Poor	Poor	Fair	Good	Excellent	DNA
Medical	0	3	10	5	0	0
Surgical	1	3	4	7	1	0

Intensity of work by day?

	Too light	Light	Satisfactory	Heavy	Excessive	DNA
Medical	0	0	15	2	1	0
Surgical	0	0	2	9	5	0

Intensity of work by night?

	Too light	Light	Satisfactory	Heavy	Excessive	DNA
Medical	0	2	7	5	4	0
Surgical	0	0	2	10	4	0

Intensity of work by weekend?

	Too light	Light	Satisfactory	Heavy	Excessive	DNA
Medical	0	0	2	13	3	0
Surgical	0	0	1	8	7	0

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C. Roles & Responsibilities

Are you routinely required to give:

		<u>Yes:</u>	<u>No:</u>	<u>DNA:</u>
First dose IV antibiotics	Medical	6	12	0
	Surgical	9	7	0
Second dose IV antibiotics	Medical	0	18	0
	Surgical	1	15	0
Third dose IV antibiotics	Medical	0	18	0
	Surgical	1	15	0
Are there any IV antibiotics which you must administer all doses?	Medical	5	13	0
	Surgical	5	11	0
Does your hospital have Clinical Support Nurses / Healthcare Assistants or equivalent	Medical	11	7	0
	Surgical	7	9	0
Does your unit have Clinical Support Nurses / Healthcare Assistants or equivalent	Medical	12	6	0
	Surgical	6	10	0
Do you have a phlebotomy service during the week?	Medical	8	10	0
	Surgical	2	14	0
Do you have a phlebotomy service at the weekend?	Medical	2	16	0
	Surgical	1	15	0
Is there a bleep policy in your hospital?	Medical	18	0	0
	Surgical	9	7	0
If yes, is this policy being implemented?	Medical	4	14	0
	Surgical	1	15	0

Who co-ordinates bleeps during the night? **Answers range from "Nobody" to "Any nurse", "Anyone" and "The Phantom"**

Who bleeps you during the night?	<u>Medical</u>		<u>Surgical</u>	
	Medical	Surgical	Medical	Surgical
Night Sister	1	1	17	14
Staff Nurse	0	0	0	0
Anyone				
Other				

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D. Educational Supervision

	<u>Yes:</u>	<u>No:</u>
In this rotation, have you completed your assessment booklet with your Educational Supervisor	Medical 18	0
	Surgical 14	2

Did you complete your booklet on all other rotations?	Medical 18	0
	Surgical 15	1

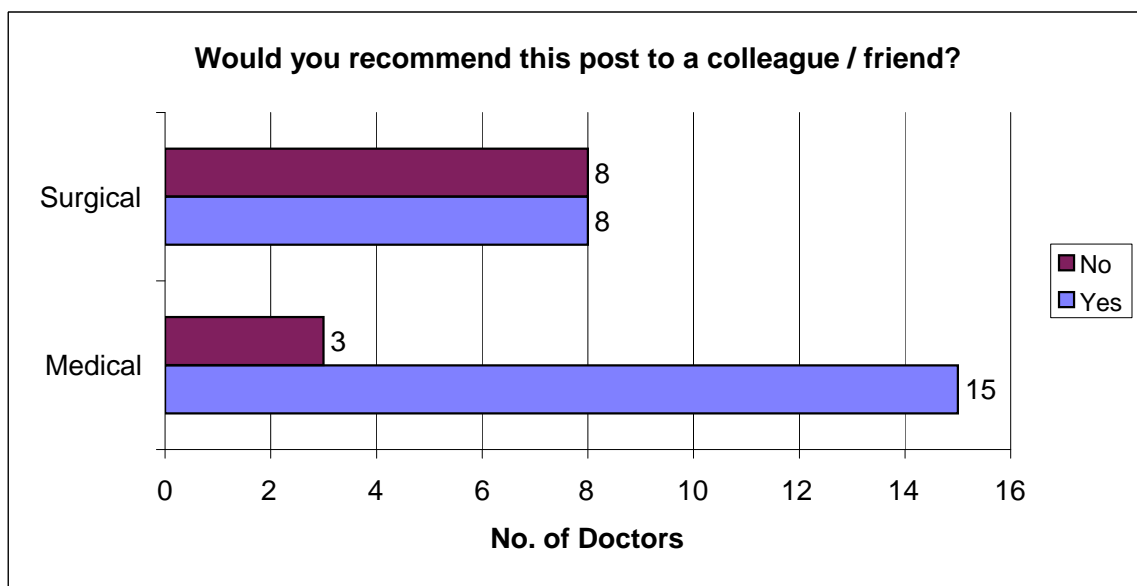
Do you have access to a formal training programme	Medical 13	5
	Surgical 5	11

	Useless	2	3	4	Very useful	DNA
Medical	0	1	7	3	3	-1
Surgical	0	1	2	2	2	-2

	Yes	No
Are you able to attend this 70% of the time?	Medical 10	8
	Surgical 3	13

	Never	Medical	Surgical	Occasionally	Medical	Surgical
How often do you have the opportunity to attend ward rounds?	Often	1	0	Always	4	0
		9	1		4	14

	Poor	Average	Good
Would you describe the educational aspects of your F1 appointment as:	Medical 4	9	5
	Surgical 2	13	0



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E. Induction

Have you attended a hospital induction course? Yes No DNA

If yes, how satisfied were you with it?

	Very dissatisfied	2	3	4	Very Satisfied	DNA
Answer:	0	0	17	11	3	0

Did you receive an induction into your current unit / ward? Yes No

Have you received adequate guidance on:

Basic Cardiopulmonary Resuscitation Yes No

Advanced Cardiopulmonary Resuscitation Yes No

Breaking Bad News Yes No

Pain Control Yes No

Did you receive a hospital handbook / list of protocols Yes No

If yes, how useful has this been?

	Useless	2	3	4	Very useful	DNA
Answer:	2	2	10	9	2	-5

F. Conditions of Work

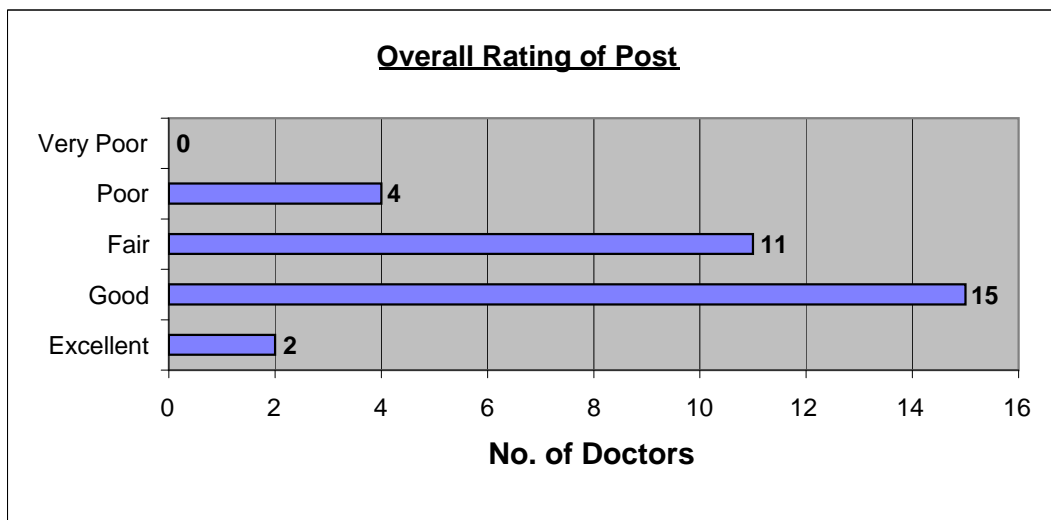
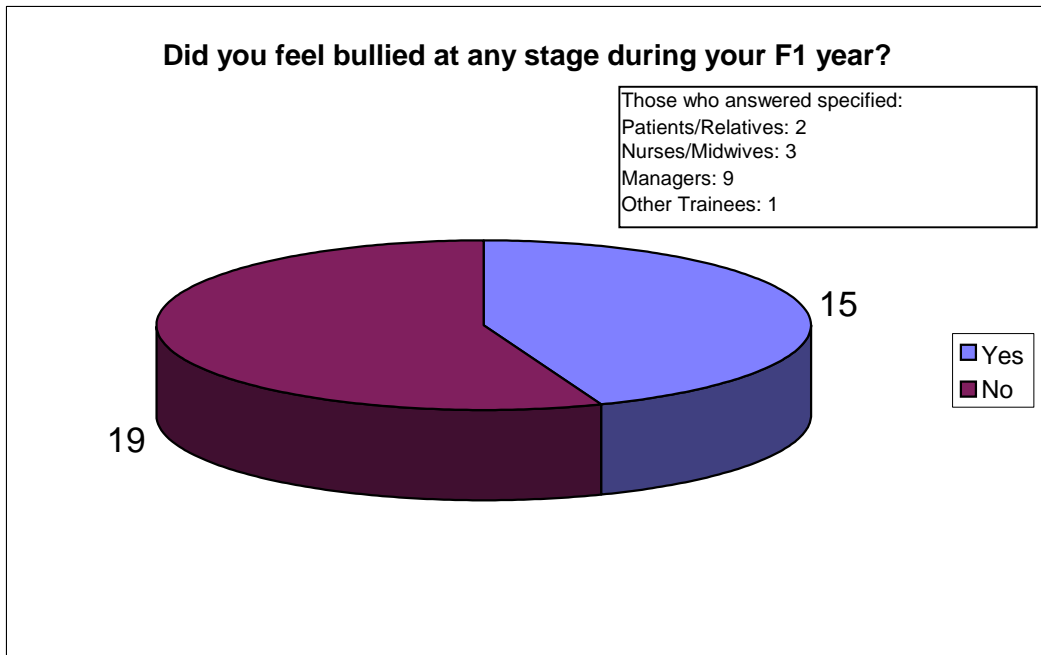
When out duty out-of-hours, are there provisions for hot food? Yes

Did you receive a course of Hepatitis B immunisations as a student? Yes No

Is the protection of possessions against theft adequate at your Hospital Yes No

Is the protection of staff against violence adequate at your hospital? Yes No

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Educational Experience Improvements

Have more protected teaching about clinical matters.

More protected teaching time

Identify time with educational supervisor for discussion of cases and progression

Would be great if there's formal teaching for junior doctors on ward.

More organised teaching

Greater number of presentations

More teaching, felt like I had a role in fractures + vascular but not in other attachments

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Workload is completely excessive. Never have time to do the job properly. We need more JHOs.

More formal education and protected teaching time

More teaching. Only had one session.

More formal teaching or complete teaching in ward round

Needs to be more JHOs on Days - 6C needs another JHO provided. Workload excessive to the point of being unsafe at times. No time available for education.

Have JHOs specifically allocated to the consultant teams.

More teaching at ward level. There are no ward meetings/teaching sessions/ teaching ward rounds

Protected teaching time in all attachments

Working Experience Improvements

More teaching more recognised role

More staff. Or reduced role of JHO. I never get my breaks or leave on time.

Higher degree of organisation of the wards

Inductions for all posts.

Defined tasks so no conferral between who should do what. I.e consultant says bloods should be done by nurses but nurses say PRHO does them. So we're expected to I/V patients, chase up ins & results referring patients no time for bloods but still expected to do all the bloods. Defined tasks will clear up confusion of these.

Another JHO would half workload + unseen patients would be better looked after.

More appropriate facilities for staff working out of hours ie tea/coffee facilities

Effective bleep policy's assistance at night from e.g. night sister with bloods.venflons/ECGs

COMMENTS:

Should be more structured role as a PRHO.

F1 enjoyable and rewarding experience. Post in upper GI surgery though was stressful intimidating and thankless - worked many more hours than was paid for.

I have enjoyed working on this ward to a degree + the nursing staff are more helpful than on other wards. However, the workload on one JHO is a joke - this leads to an incredibly stressful working day and the bare minimum being done for patients. This feels unsafe at times.

Need more protected teaching time for assessments and teaching.

I received experience within different fields of medicine and surgery which is good. I was disappointed that most of the time the work of PRHO involves taking bloods, delivering request forms 'chasing results', delivering x-rays. In 2F we got the opportunity to clerk in emergency admissions and in fractures we reviewed patients which I found very useful.

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I feel that a lot of JHO duties are rather tedious and you don't need to be a qualified doctor to carry out a lot of the tasks e.g delivering investigation forms. In my present post the work is intense and the SHOs and registrars could share a lot of the duties with the PRHOs e.g. referrals to senior colleagues and consultants.