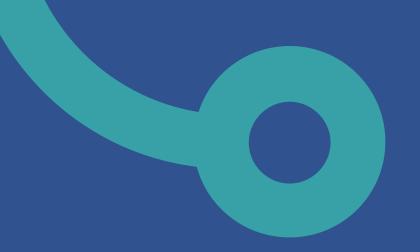
WORKING CONDITIONS OF JUNIOR DOCTORS IN VICTORIA

An assessment by ASMOF Victoria







A Executive summary

The key findings of this report are:

 The results of a recent survey by the Australian Salaried Medical Officers' Federation (Victoria Branch) (ASMOF Victoria) of hundreds of doctors reveal that:

87%

of Victorian junior doctors have worked unpaid overtime in the last 12 months;

93%

of Victorian junior doctors have experienced burnout in the last 12 months;

94%

of Victorian junior doctors fear making a clinical error due to burnout and fatigue; and

98%

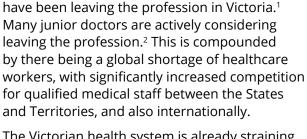
of junior doctors consider that burnout and fatigue are a major reason for junior doctors leaving the profession in Victoria.



- Victorian junior doctors have for years reported the underpayment of their overtime, suggesting an entrenched practice of wage theft within the Victorian public health system. Junior doctors have also for years reported the significant barriers they face in being able to effectively claim their overtime.
- The Federal Court has found in favour of Victorian junior doctors on these issues in a class action against Peninsula Health.
- The results of the recent survey by ASMOF Victoria indicates that the practice of wage theft is continuing in the Victorian public health system.
- Junior doctors have reported significant risks to their health, including, tragically, suicide, arising from their working conditions.
- Junior doctors have also reported an increased risk to patient safety arising from their workloads. Alarmingly, in 2019, 56 per cent of Victorian junior doctors surveyed reported that they had made a clinical error due to fatigue. In 2024, 94 per cent of surveyed junior doctors in Victoria reported that they fear making a clinical error because of long hours and fatigue.
- An unacceptably high number of junior doctors are considering leaving the profession, with 98 per cent of surveyed junior doctors in Victoria believing that this is because of burnout.
- A comparison of the national data available of the working conditions of junior doctors across the nation clearly establishes that Victorian junior doctors practice under the worst working conditions in comparison to their fellow junior doctors in all other States and Territories.

B Introduction

This report has been issued by ASMOF Victoria in response to the ongoing crises regarding the working conditions of junior doctors in the Victorian public health system.



It has been reported that healthcare workers

The Victorian health system is already straining to operate under significant staff shortages, putting the health and safety of Victorian's at risk. Victoria cannot afford to lose junior doctors from the system.

Within the above context, this report aims to shine a light on the key workplace issues impacting junior doctors in Victoria. It does so by reviewing the results of historical surveys of thousands of junior doctors, going back to 2018, to provide historical context to the problems facing junior doctors (Part C). Then, the report considers the results of a recent survey conducted by ASMOF Victorian of over four hundred doctors, on the key workplace issues facing junior doctors in the current environment (Part D). Lastly, the report considers the recent findings of the Federal Court of Australia in a landmark class action issued by junior doctors against Peninsula Health regarding the underpayment of overtime, to assess whether what has been reported by junior doctors in these surveys is consistent with the findings of the Federal Court in that case (Part E).



 $^{^1\,\}text{See, for example: https://www.theage.com.au/national/victoria/cash-alone-won-t-fix-hospital-staffing-woes-20230414-p5d0fa.html}$

²See, for example, the various reports of the Australian Medical Board as referred to below, and also https://www.abc.net.au/news/health/2023-02-08/trainee-doctors-consider-leaving-medicine-bullying-workloads/101941226

Historical context: An entrenched culture of wage theft and exploitation



As outlined below, previous surveys reveal that underpayment of junior doctors in the Victorian public health system is commonplace and an entrenched practice, which has put both patient care and doctor wellbeing at risk.

The surveys also highlight that Victorian junior doctors fear being subjected to negative career repercussions if they claim their overtime or otherwise speak out about the practices of their employer.

The prevalence of unpaid overtime

The survey results reveal beyond doubt that junior doctors work high amounts of unpaid overtime in the Victorian public health system.

In 2018, it was reported that 63 per cent of Victorian junior doctors surveyed by AMA Victoria worked 5 or more hours of unrostered overtime per week, and that 53 per cent of junior doctors were not paid for any of their unrostered overtime.³

These figures have remained stubbornly high over many years.

In 2019, the average amount of unrostered overtime worked by Victorian junior doctors survey by AMA Victoria was reported to be 9 hours per week, with 80 per cent or more of junior doctors not receiving payment for 50 per cent or more of their unrostered overtime.⁴

A national survey conducted in 2019 by the Australian Medical Board (the Medical Board) of approximately 10,000 junior doctors found that 27 per cent of junior doctors nationally reported that they were never paid for their unrostered overtime, with 26 per cent reporting that they were paid for their unrostered overtime only sometimes.⁵ Notably, Victorian junior doctors fared the worst among all States and Territories, returning results markedly worse than the national averages. Thirty eight per cent of Victorian junior doctors reported never being paid for their unrostered overtime and 28 per cent reported that they were paid only sometimes for their unrostered overtime.⁶

In 2020, the average amount of unrostered overtime worked by interns nationwide was 11 hours per week, with 16 per cent reporting they had to work unpaid overtime always, 18 per cent most of the time, and 39 per cent sometimes.⁷

In 2021, 80 per cent or more of Victorian junior doctors surveyed by AMA Victoria at a significant number of large Victorian public health services (including Western Health, Alfred Health, Austin Health and Melbourne Health) reported that they were not paid for 50 per cent or more of their unrostered overtime hours.⁸

³ AMA Victoria, 2018 Hospital Health Check Survey (Report, 2018), p 1 ('AMA HHC Report 2018').

⁴AMA Victoria, Hospital Health Check 2019 Report (Report, 2019), p 23 ('AMA HHC Report 2019').

⁵Medical Board of Australia and AHPRA, Medical Training Survey 2019 (Report, 2019), p 55 ('MTS Report 2019').

⁶MTS Report 2019 p 127.

Medical Board of Australia and AHPRA, Medical Training Survey 2020: Report for interns (Report, 2020), p 29 - 32 (MTS Intern Report 2020).

⁸AMA Victoria, Hospital Health Check 2021 (Updated) (Report, 2021), p 4 ('AMA HHC Report 2021 Updated').

In 2022, the Medical Board's national survey of just under 19,000 junior doctors found that 16 per cent of junior doctors nationally reported never being paid for their unrostered overtime and 23 per cent reported being paid for their unrostered overtime only sometimes.⁹

Victorian junior doctors continued to report the highest rates of unpaid overtime nationally, with 22 per cent reporting never being paid for their unrostered overtime and 30 per cent reporting that they were paid only sometimes for their unrostered overtime.¹⁰

The most recent national survey by the Medical Board found in 2023 that of approximately 19,000 junior doctors surveyed, 13 per cent reported never being paid for their overtime, and 19 per cent reported being paid for their overtime only sometimes.¹¹

Victorian results remained above the national averages, with 18 per cent of junior doctors reporting never being paid for their overtime and 26 per cent reporting being paid only sometimes for their overtime.¹²

Impacts on the wellbeing of junior doctors and patient safety

Excessive workloads and unpaid overtime have had significant impacts on the wellbeing of Victorian junior doctors. They have suffered from high levels of burnout, poor mental health and dwindling motivation to remain in the medical profession.

In 2018, 65 per cent of Victorian junior doctors surveyed by AMA Victoria reported that their hospital's support for their mental health and well-being was very poor to average.¹³

In 2019, on average between 30 per cent and 39 per cent of Victorian junior doctors surveyed by AMA Victoria reported that: a) they were provided with very poor or poor support for

their mental health and wellbeing, b) that they had raised serious concerns about workload that were brushed off or ignored by their health service, and c) that they had sometimes, often or very often considered resigning from their hospital due to workload and poor conditions.¹⁴

Further, 56 per cent of Victorian junior doctors surveyed by the AMA Victoria reported that they had made a clinical error in 2019 due to fatigue, and 60 per cent reported that they had made a clinical error due to workload or under staffing.¹⁵

The Medical Board's national survey in 2019 of the nearly 10,000 junior doctors found that the two leading impacts on their wellbeing were the amount of work they were expected to do and having to work unpaid overtime.¹⁶

In 2020, little to no improvements had been made in the reported levels of support for the mental health and wellbeing for Victorian junior doctors surveyed by the AMA Victoria. The number of junior doctors who reported being brushed off or ignored by their Victorian health service when raising serious concerns about workload remained unchanged.

Fatigue and workload continued to negatively impact patient safety, with 47 per cent of junior doctors surveyed by the AMA Victoria reporting that they had made a clinical error due to fatigue, and 50 per cent reporting that they had made a clinical error due to workload or under staffing.¹⁹

Of the Victorian junior doctors surveyed by AMA Victoria in 2020, 51 per cent reported having considered resigning in the previous 6 months due to excessive workloads and poor working conditions.²⁰

In 2021, up to 69 per cent of Victorian junior doctors surveyed by AMA Victoria reported that their working hours 'often' or 'very often' prevented them from engaging in activities important for their physical and mental health.²¹

⁹ Medical Board of Australia and AHPRA, *Medical Training Survey* 2022 (Report, 2022), p 47 ('MTS Report 2022').

¹⁰ MTS Report 2022 p 113.

¹¹ Medical Board of Australia and AHPRA, Medical Training Survey 2023 (Report, 2023), p 47 ('MTS Report 2023').

¹² Medical Board of Australia and AHPRA, 2023 Medical Training Survey Vic report (Report, 2023), p 58 ('MTS 2023 Report Victoria').

¹³AMA HHC Report 2018 p 2.

¹⁴ AMA HHC Report 2019 p 15.

¹⁵ Ibid p 7.

¹⁶ MTS Report 2019 p 53.

¹⁷AMA HHC Report 2021 Updated p 5.

¹⁸ Ibid.

¹⁹ Ibid

²⁰ Ibid p 8.

²¹ Ibid.

At some hospitals, up to 79 per cent of junior doctors reported 'often' or 'very often' feeling overwhelmed by their workload.²²

In 2022, the Medical Board's national survey of approximately 19,000 junior doctors found that the amount of work they were expected to do and having to work unpaid overtime remained leading impacts on their wellbeing.²³ 64 per cent of Victorian junior doctors reported that having to work unpaid overtime had adverse effects on their wellbeing.²⁴

The 2023 Medical Board national survey of junior doctors demonstrated that these issues are persistently impacting junior doctors, with 57 per cent of Victorian junior doctors reporting that having to work unpaid overtime had adverse impacts on their wellbeing, which was above the national average of 52 per cent.²⁵ In addition, 60 per cent of Victorian junior doctors indicated that a lack of appreciation was additionally having negative impacts on their wellbeing.²⁶

Barriers to claiming

In Victoria, junior doctors face significant barriers to being able to claim for payment of their overtime.

Some of the most commonly reported reasons for why Victorian junior doctors were not able to claim payment for their overtime paid for their overtime hours were a 'highly obstructive or difficult claiming process', 'workplace cultural expectations', being 'advised not to claim' those hours by superiors, peers or hospital administration, or being advised that unrostered overtime would only be paid for stipulated reasons.²⁷

59 per cent of junior doctors in 2019 and 54 per cent in 2020 avoided making complaints due to fears of negative consequences, particularly fears that complaints would have detrimental effects on their future career progression.²⁸

Victorian junior doctors have reported being disciplined or counselled by their supervisors when they have attempted to claim their overtime. Others have reported that they have been told directly by their supervisors that they cannot claim overtime or that they should be prepared to perform particular duties outside of their rostered hours without payment.

These are matters which go to the culture of Victoria's public health services. As the Medical Board has repeatedly reported, there are significant concerns regarding the culture within hospitals, with widespread bullying, harassment, and discrimination being suffered by junior doctors.²⁹

As Dr Anne Tonkin, Chair of the Medical Board of Australia, stated publicly in 2020: 'For the future of our profession, we must all listen to what the thousands of trainees have told us. Collectively, we must prioritise the work needed to build a culture of respect, including by making it safe for them to speak up.' 30

In 2022, for the first time, the Medical Board introduced into its national survey a new question about the reason for junior doctors not reporting their concerns regarding cultural issues within the workplace. The findings were emphatic, leading Dr Tonkin to state that 'We no longer have to speculate that trainees are concerned about the consequences of reporting, we know this is true.' ³¹

In 2023, Dr Tomkin noted that 'Disappointingly, the culture of medical training needs ongoing attention....The urgent need for ongoing commitment to building a culture of respect in medicine and medical training remains.' ³²



²² AMA Victoria, *Hospital Health Check 2021* (Report, 2021), p 6 ('AMA HHC Report 2021').

²³ Medical Board of Australia and AHPRA, Medical Training Survey 2022 (Report, 2022), p 108-109 (MTS Report 2022').

²⁴MTS Report 2022 p 108.

²⁵ MTS Report 2023 Victoria p 55.

²⁶ Ibid p 56.

²⁷ AMA HHC Report 2021 Updated p 4.

²⁸ Junior doctors say they're expected to work overtime for free. Now they're suing hospitals - ABC News

²⁹ See, for example, MTS Report 2022 p 2.

 $^{^{\}rm 30}\,MTS$ Intern Report 2020 p 3.

³¹ MTS Report 2022 p 2.

³² MTS Report 2023 p 2.

D Results of 2024 Survey

ASMOF Victoria recently surveyed 416 Victorian doctors, 348 of whom have worked as a junior doctor in the previous twelve months.

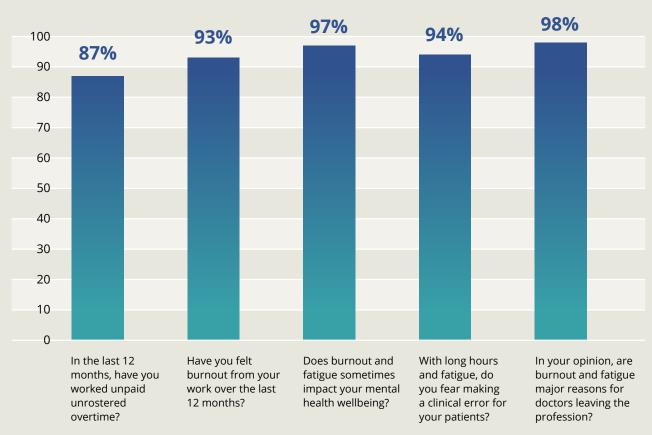
Summary of results

The results of the survey are alarming, and largely confirm that the issues outlined above are continuing.

Unpaid overtime, burnout and fatigue remain widespread problems which are faced by junior doctors practising in the Victorian public health system.

The results are as follows:

Stop wage theft doctor in training survey



Personal stories of Victorian junior doctors

As part of the survey, junior doctors were invited to share their stories in relation to the issues they face within the workplace, and the impact those issues are having on them personally. Hundreds of such stories were shared directly by junior doctors. Below is a summary of the key themes found within those stories. These stories have been provided on an anonymous basis.

Blaming Doctors in Training for Overtime

Victorian junior doctors have told stories of being criticised by their superiors for attempting to claim payment for their overtime:

"I feel exhausted. I have stayed up all night performing additional work, and then have to care for my kids the following day. And then when I try to claim for my overtime, it is suggested that I am inefficient and have problems managing my workload."

"In one particular rotation I regularly worked over 60 hours per week. When I discussed payment for all of my additional work with my supervisor, I was told that I should not claim because I would be viewed as inefficient. The suggestion was that it was my fault for doing overtime, not the high workload."

Obstructive claims processes

Victorian junior doctors have told stories of encountering obstructive overtime claims processes implemented by Victorian health services:

"When I tried to claim, I had my timesheets crossed out and replaced with my contracted hours. I felt devalued. I have left Victoria in part because of the way junior doctors are treated in that State."

"The payroll department in my hospital tells junior doctors that their claims are not legitimate. They treat overtime claims very suspiciously, as if we have done something wrong by claiming or are lying about the work we do."

"Nothing has changed. The health system in Victoria doesn't care about how much overtime we do, as long as they don't have to pay for it. We clock in using the hospital's clock-in system, but when we arrive early to do overtime the system records on our time sheets that we started working from our rostered start time, and the same goes for when we finish - if we clock out later than our roster our timesheets are automatically filled out as if we finished at our rostered time. But, if we are late, then our pay is deducted."

"There is a poor culture when it comes to claiming overtime. There are barriers. Requiring interns to seek the signature of senior consultants who they have never met or who are difficult to find. Having arbitrary deadlines for the submission of claims when it can be difficult to find the person who needs to sign the form. And being judged for claiming."

Burnout and mental health

Victorian junior doctors have told us stories of burnout and poor mental wellbeing leading to suicide and resignations:

"Tragically, I know multiple doctors who have committed suicide who were suffering from burnout and work-related stress at the time."

"Junior doctors at my workplace are quitting because of the pressures they are under in their jobs. Burnout and persistent stress is common. Unpaid overtime is a factor in this"

"I suffered burnout which led to me quitting medicine. I couldn't keep going. Although I have returned, I am now only prepared to work part-time because the stress of full-time medicine as a junior doctor is not worth it."

"I have heard of many junior doctors who are having to take extend breaks from practicing medicine. Burnout and fatigue are a real issue."

"I worked a lot of unpaid overtime and was bullied to the point of being suicidal."

"I resigned from my job as a junior doctor because of the toxic workplace which involved bullying and large amounts of unpaid overtime."

"Long hours leads to fatigue, which causes safety issues for patients and doctors. Junior doctors should not be allowed to treat patients when they are so fatigued – it is not safe. Mistakes are made. People get injured."

E

Findings of the Federal Court

In March 2021 ASMOF Victoria commenced a class action in the Federal Court against Peninsula Health alleging systemic underpayment of junior doctors at that health service in respect of their unrostered overtime.

That case was heard by the Federal Court over 4 weeks in mid-2022. This is significant, because the four week trial was contested, meaning this was the first time the complaints of junior doctors regarding their unpaid overtime were tested, forensically, in Court.

In August 2023 the Federal Court handed down its judgment, finding emphatically in favour of junior doctors.

A number of the factual findings of the Federal Court in that case confirm what has been reported for years by junior doctors in Victoria as to the prevalence of unpaid overtime, and the obstructive manner in which overtime claims are managed by health services.

For example, the Federal Court found that:

- The evidence demonstrated that 'unrostered overtime was regularly and extensively worked by' junior doctors and that 'senior management at Peninsula Health knew that it was likely that junior doctors were working high levels of unrostered overtime but were not claiming for these hours.' 33
- It was understood that Peninsula Health wanted particular overtime to be performed but was 'generally reluctant to pay for it.' 34
- That the Clinical Director of the Department of Medicine and other senior doctors gave the impression to junior doctors that those who claimed overtime were not "efficient". 35
- Junior doctors 'at all levels, including interns, experienced the difficulty of the overtime claims processes in the Department of Medicine' and that senior management were made aware of concerns regarding the claims processes but decided to do nothing about those concerns.³⁶
- Junior doctors were reprimanded by senior management for recording their unrostered overtime on their timesheets, which created an environment hostile to junior doctors being able to claim for their overtime, and were directly instructed not to claim for their overtime.³⁷

ASMOF Victoria

5 April 2024

³³ ASMOF v Peninsula Health [2023] FCA 939, p 52[194]-[195] ('Peninsula Health Judgement').

³⁴ Peninsula Health Judgement p 55[203].

³⁵ Peninsula Health Judgement p 51[189].

³⁶ Peninsula Health Judgement p 52[193] and 53[199].

³⁷ Peninsula Health Judgement p 103[386] - 104[390].



