

**LONDON DEPARTMENT OF
POSTGRADUATE MEDICAL & DENTAL
EDUCATION**

**NORTH LONDON TRAINEES'
POINT OF VIEW SURVEY**

2004/2005

Welcome to the Point of View Survey Questionnaire. The questions will take about 8-10 minutes to complete. The results will be aggregated so that no individual's responses can be identified. We guarantee anonymity and confidentiality.

If you have any questions or comments about this questionnaire or about the survey in general please contact Maryanne Aitken, Project Manager, London Deanery, 20 Guilford Street, London WC1N 1DZ, email: maitken@londondeanery.ac.uk, telephone: 020 7692 3318

1. Gender - Are you:

(1) Male (2) Female

2. Where did you qualify?

(1) London
(2) Other UK
(3) European Economic Area
(4) Other

3. Have you ever had any training outside the UK?

(1) Yes → Where did this MOSTLY take place?
(2) No

(1) Indian subcontinent	<input type="checkbox"/>
(2) Africa	<input type="checkbox"/>
(3) Australia/New Zealand	<input type="checkbox"/>
(4) North American	<input type="checkbox"/>
(5) Middle East	<input type="checkbox"/>
(6) Europe	<input type="checkbox"/>
(7) Other	<input type="checkbox"/>

For how long?

(1) 6 months	<input type="checkbox"/>
(2) 1 year	<input type="checkbox"/>
(3) 18 months	<input type="checkbox"/>
(4) 2 years	<input type="checkbox"/>
(5) More than 2 years	<input type="checkbox"/>

4. Are you a locum?

(1) Yes → Have you been in post over 2 weeks? (1) Yes
(2) No (2) No

5. What grade is your current post? (please tick one box only)

(1) PRHO
(2) SHO
(3) SpR (includes reg, SR)
(4) Lecturer/research fellow → Are you in the SpR grade?
(5) Other

(1) Yes	<input type="checkbox"/>
(2) No	<input type="checkbox"/>

6. Since 1st August 2004 my work/life balance: (please tick one box only)

(1) Has improved (2) Has got worse
(3) Has not changed (4) Not at work before 1st August 2004

7. Since 1st August 2004 my training: (please tick one box only)

- (1) Has improved (2) Has got worse
(3) Has not changed (4) Not at work before 1st August 2004

8. How long have you been in your current post? (please tick one box only)

- (1) Less than a month (4) 7-9 months
(2) 1-3 months (5) 10-12 months
(3) 4-6 months (6) More than a year

9. Did you graduate from medical school before 1st January 2000?

- (1) Yes → Which year? 19____
(2) No → Which year? 20____

CONTINUED ON NEXT PAGE.

10. What is your *intended* career specialty? (please choose ONE only)

(1) Psychiatry	<input type="checkbox"/>	→	<table border="1"> <tbody> <tr><td>(1) General psychiatry</td><td></td></tr> <tr><td>(2) Child & adolescent</td><td></td></tr> <tr><td>(3) Old age psychiatry</td><td></td></tr> <tr><td>(4) Forensic psychiatry</td><td></td></tr> <tr><td>(5) Psychotherapy</td><td></td></tr> <tr><td>(6) Learning difficulties</td><td></td></tr> <tr><td>(7) Other</td><td></td></tr> </tbody> </table>	(1) General psychiatry		(2) Child & adolescent		(3) Old age psychiatry		(4) Forensic psychiatry		(5) Psychotherapy		(6) Learning difficulties		(7) Other																	
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12. Is this a full-time post?

(1) Yes

(2) No

13. Have you ever had a post in A&E? (please tick one box only)

(1) Yes →

(2) No

(1) Less than 6 months	<input type="checkbox"/>
(2) 6 months	<input type="checkbox"/>
(3) 1 year	<input type="checkbox"/>
(4) More than 1 year	<input type="checkbox"/>

14. Did you receive an induction to this hospital when you started?

(1) Yes →

(2) No

(3) Don't know/remember

How would you rate its usefulness? (please tick one box only)

(1) Very poor	<input type="checkbox"/>
(2) Poor	<input type="checkbox"/>
(3) Fair	<input type="checkbox"/>
(4) Good	<input type="checkbox"/>
(5) Excellent	<input type="checkbox"/>

15. Did you also receive an induction to your department (e.g. routines, key staff & protocols)

(1) Yes →

(2) No

(3) Don't know/remember

How would you rate its usefulness? (please tick one box only)

(1) Very poor	<input type="checkbox"/>
(2) Poor	<input type="checkbox"/>
(3) Fair	<input type="checkbox"/>
(4) Good	<input type="checkbox"/>
(5) Excellent	<input type="checkbox"/>

16. Did you sit down with your consultant to discuss your educational objectives at the beginning of this post? (please tick one box only)

(1) Yes (3) Don't know/remember

(2) No

17. Have you got a learning/training agreement? (please tick one box only)

(1) Yes (3) Don't know

(2) No

18. Have you got a Personal Development Plan? (please tick one box only)

(1) Yes	<input type="checkbox"/>	→	Have you discussed it with your consultant supervisor ?
(2) No	<input type="checkbox"/>		
(3) Don't know/remember	<input type="checkbox"/>		

(1) Yes	<input type="checkbox"/>
(2) No	<input type="checkbox"/>
(3) Don't know / remember	<input type="checkbox"/>

19. Have you used a logbook in this post? (please tick one box only)

(1) Yes	<input type="checkbox"/>	→	Have you discussed it with your consultant supervisor ?
(2) No	<input type="checkbox"/>		
(3) Don't know/remember	<input type="checkbox"/>		

(1) Yes	<input type="checkbox"/>
(2) No	<input type="checkbox"/>
(3) Don't know / remember	<input type="checkbox"/>

20. Have you used a training portfolio in this post? (please tick one box only)

(1) Yes	<input type="checkbox"/>	→	Have you discussed it with your consultant supervisor ?
(2) No	<input type="checkbox"/>		
(3) Don't know/remember	<input type="checkbox"/>		

(1) Yes	<input type="checkbox"/>
(2) No	<input type="checkbox"/>
(3) Don't know / remember	<input type="checkbox"/>

21. Have you had a discussion in this post, with a senior colleague, about your career plans?

(1) Yes and it was useful	<input type="checkbox"/>	(2) Yes but it was not useful	<input type="checkbox"/>
(3) No but it wasn't necessary	<input type="checkbox"/>	(4) No but it will happen	<input type="checkbox"/>
(5) No but I would like to	<input type="checkbox"/>		

22. How would you rate the consultant supervision in this post? (please tick one box only)

(1) Very poor	<input type="checkbox"/>	→	What is the <u>MAIN</u> problem with consultant supervision? (please tick one box only)
(2) Poor	<input type="checkbox"/>	→	
(3) Fair	<input type="checkbox"/>		
(4) Good	<input type="checkbox"/>		
(5) Excellent	<input type="checkbox"/>		

(1) Lack of contact	<input type="checkbox"/>
(2) Lack of teaching	<input type="checkbox"/>
(3) Lack of feedback	<input type="checkbox"/>
(4) Shouts or harasses	<input type="checkbox"/>
(5) Poor role model clinically	<input type="checkbox"/>
(6) Other	<input type="checkbox"/>

23. Have you sat down with your consultant to discuss your progress? (please tick one box only)

- | | | | |
|--------------------------------|--------------------------|-------------------------------|--------------------------|
| (1) Yes and it was useful | <input type="checkbox"/> | (2) Yes but it was not useful | <input type="checkbox"/> |
| (3) No but it wasn't necessary | <input type="checkbox"/> | (4) No but it will happen | <input type="checkbox"/> |
| (5) No but I would like to | <input type="checkbox"/> | | |

24. Did you have an assessment at the end of your previous post? (please tick one box only)

- | | | | |
|---------|--------------------------|---------------------------|--------------------------|
| (1) Yes | <input type="checkbox"/> | (3) Don't know/remember | <input type="checkbox"/> |
| (2) No | <input type="checkbox"/> | (4) This is my first post | <input type="checkbox"/> |

If yes, did you understand the evidence on which the assessment was based? (please tick one box only)

- | | | | |
|---------|--------------------------|-------------------------|--------------------------|
| (1) Yes | <input type="checkbox"/> | (3) Don't know/remember | <input type="checkbox"/> |
| (2) No | <input type="checkbox"/> | | |

Did the assessment seem fair to you? (please tick one box only)

- | | | | |
|---------|--------------------------|-------------------------|--------------------------|
| (1) Yes | <input type="checkbox"/> | (3) Don't know/remember | <input type="checkbox"/> |
| (2) No | <input type="checkbox"/> | | |

25. How would you rate the support you get from nurses (midwives) in this post? (please tick one box only)

- | | | | |
|---------------|--------------------------|---------------|--------------------------|
| (1) Very poor | <input type="checkbox"/> | (4) Good | <input type="checkbox"/> |
| (2) Poor | <input type="checkbox"/> | (5) Excellent | <input type="checkbox"/> |
| (3) Adequate | <input type="checkbox"/> | | |

26. When working at night, are you part of a night team involving several specialties? (please tick one box only)

- | | | | |
|-------------|--------------------------|--------------------------|--------------------------|
| (1) Yes | <input type="checkbox"/> | (4) Don't know | <input type="checkbox"/> |
| (2) No | <input type="checkbox"/> | (5) Do not work at night | <input type="checkbox"/> |
| (3) Sort of | <input type="checkbox"/> | | |

27. Have you ever discussed the GMC's "Good Medical Practice" in a teaching session?

- (1) Yes (3) Don't know/remember
 (2) No

28. How often do you feel forced to cope with problems beyond your competence? (please tick one box only)

- (1) All the time → Is this because your seniors are: (please tick one box only)
 (2) Daily →
 (3) Weekly
 (4) Monthly
 (5) Never
- | | |
|--------------------------|--------------------------|
| (1) Too busy | <input type="checkbox"/> |
| (2) Off-site | <input type="checkbox"/> |
| (3) Locums or vacancies | <input type="checkbox"/> |
| (4) Unwilling to help | <input type="checkbox"/> |
| (5) Inadequately skilled | <input type="checkbox"/> |
| (6) Other | <input type="checkbox"/> |

29. In this post, have you been subjected to persistent behaviour by others which has eroded your professional confidence or self esteem? (please tick one box only)

- (1) Yes → If yes, which of the following is the MAIN source of undermining, bullying or harassing? (please tick one box only)
 (2) No
 (3) Don't know
- | | |
|---------------------------|--------------------------|
| (1) Managers | <input type="checkbox"/> |
| (2) Consultants | <input type="checkbox"/> |
| (3) Other trainees | <input type="checkbox"/> |
| (4) Nurses or midwives | <input type="checkbox"/> |
| (5) Patients or relatives | <input type="checkbox"/> |
| (6) Other | <input type="checkbox"/> |

Have you complained to anyone about this behaviour? (please tick one box only)

- (1) Yes If no what is the main reason why you have not complained (please tick one only)
 (2) No →
 (3) Don't know
- | | |
|------------------------------|--------------------------|
| (1) Not sufficiently serious | <input type="checkbox"/> |
| (2) Afraid of consequences | <input type="checkbox"/> |
| (3) Not sure how to complain | <input type="checkbox"/> |
| (4) Problem will go away | <input type="checkbox"/> |
| (5) Dealt with it myself | <input type="checkbox"/> |
| (6) Other | <input type="checkbox"/> |

30. In this post, have you ever felt compelled to obtain consent from a patient for a procedure with which you were unfamiliar? (please tick one box only)

- (1) Yes frequently (2) Yes occasionally
 (3) Never

31. How many hours of formal (organised and timetabled) educational activities do you attend on average each week? (please tick one box only)

- (0) None → Why don't you attend? (please tick one box only)
- (1) One hour →
- (2) Two hours
- (3) Three hours
- (4) Four hours
- (5) Five hours
- (6) Six hours
- (7) Seven hours or more
- | | |
|--------------------|--------------------------|
| (1) Too busy to go | <input type="checkbox"/> |
| (2) None provided | <input type="checkbox"/> |
| (3) Not good value | <input type="checkbox"/> |
| (4) Work part-time | <input type="checkbox"/> |
| (5) Shift work | <input type="checkbox"/> |
| (6) Other | <input type="checkbox"/> |

32. Since medical school, have you received formal training in any of the following generic skills? (please tick one box only for each topic)

- | | Yes | No | Don't Know/ remember |
|--------------------------|--------------------------|--------------------------|--------------------------|
| (1) Time Management | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (2) Negotiating Skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (3) Team working | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (4) Appraisal skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (5) Presentation Skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (6) IT Skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (7) Managing Meetings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (8) Communication Skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

33. How would you rate the 'hands on' experience you are acquiring in this post? (please tick one box only)

- (1) Very poor
- (2) Poor
- (3) Fair
- (4) Good
- (5) Excellent

Why is this?
(please tick one box only)

(1) Unit too specialized	<input type="checkbox"/>
(2) Unit not specialised enough	<input type="checkbox"/>
(3) Unit over-staffed	<input type="checkbox"/>
(4) Unit understaffed	<input type="checkbox"/>
(5) Too many other duties	<input type="checkbox"/>
(6) Other	<input type="checkbox"/>

34. How would you rate the intensity of work in this post during 9am-5pm weekday hours? (please tick one box only)

- (1) Too light
- (2) Light
- (3) Satisfactory

- (4) Heavy
- (5) Excessive

35. How would you rate the intensity of work in this post at night? (please tick one box only)

- (1) Too light
- (2) Light
- (3) Satisfactory

- (4) Heavy
- (5) Excessive
- (6) Not applicable/do not work at night

36. How would you describe this post to a friend who was thinking of applying ? (please tick one box only)

- (1) Very poor
- (2) Poor
- (3) Fair

- (4) Good
- (5) Excellent

CONTINUED ON NEXT PAGE

37. Which ONE of the following are you most likely to do in the next 12 months? (please choose one option only)

(1) Continue training full-time	<input type="checkbox"/>																				
(2) Continue training part-time	<input type="checkbox"/>	Why train part-time? (please tick one box only)	<table border="1"> <tr><td>(1) Family</td><td></td></tr> <tr><td>(2) Ill health</td><td></td></tr> <tr><td>(3) Outside interests</td><td></td></tr> <tr><td>(4) Research</td><td></td></tr> <tr><td>(5) Hours too long</td><td></td></tr> <tr><td>(6) Work too stressful</td><td></td></tr> <tr><td>(7) Pay too low</td><td></td></tr> <tr><td>(8) Not good at it</td><td></td></tr> <tr><td>(9) Other</td><td></td></tr> </table>	(1) Family		(2) Ill health		(3) Outside interests		(4) Research		(5) Hours too long		(6) Work too stressful		(7) Pay too low		(8) Not good at it		(9) Other	
(1) Family																					
(2) Ill health																					
(3) Outside interests																					
(4) Research																					
(5) Hours too long																					
(6) Work too stressful																					
(7) Pay too low																					
(8) Not good at it																					
(9) Other																					
(3) Leave medicine permanently	<input type="checkbox"/>	Why leave medicine? (please tick one box only)	<table border="1"> <tr><td>(1) Family</td><td></td></tr> <tr><td>(2) Ill health</td><td></td></tr> <tr><td>(3) Outside interests</td><td></td></tr> <tr><td>(4) Research</td><td></td></tr> <tr><td>(5) Hours too long</td><td></td></tr> <tr><td>(6) Work too stressful</td><td></td></tr> <tr><td>(7) Pay too low</td><td></td></tr> <tr><td>(8) Not good at it</td><td></td></tr> <tr><td>(9) Other</td><td></td></tr> </table>	(1) Family		(2) Ill health		(3) Outside interests		(4) Research		(5) Hours too long		(6) Work too stressful		(7) Pay too low		(8) Not good at it		(9) Other	
(1) Family																					
(2) Ill health																					
(3) Outside interests																					
(4) Research																					
(5) Hours too long																					
(6) Work too stressful																					
(7) Pay too low																					
(8) Not good at it																					
(9) Other																					
(4) Leave medicine temporarily	<input type="checkbox"/>	Why leave medicine temporarily (please tick one box only)	<table border="1"> <tr><td>(1) Family</td><td></td></tr> <tr><td>(2) Ill health</td><td></td></tr> <tr><td>(3) Outside interests</td><td></td></tr> <tr><td>(4) Research</td><td></td></tr> <tr><td>(5) Hours too long</td><td></td></tr> <tr><td>(6) Work too stressful</td><td></td></tr> <tr><td>(7) Pay too low</td><td></td></tr> <tr><td>(8) Not good at it</td><td></td></tr> <tr><td>(9) Other</td><td></td></tr> </table>	(1) Family		(2) Ill health		(3) Outside interests		(4) Research		(5) Hours too long		(6) Work too stressful		(7) Pay too low		(8) Not good at it		(9) Other	
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(5) Hours too long																					
(6) Work too stressful																					
(7) Pay too low																					
(8) Not good at it																					
(9) Other																					
(5) A consultant post	<input type="checkbox"/>																				
(6) Research	<input type="checkbox"/>																				
(7) Go abroad to work	<input type="checkbox"/>																				
(8) Other	<input type="checkbox"/>																				

38. For those who are expecting to take up a consultant post during the next 12 months: Do you feel ready to take up a consultant post? (please tick one box only)

(1) Yes	<input type="checkbox"/>															
(2) No	<input type="checkbox"/>	If no, in which ONE of the following areas do you feel least well prepared?														
(3) Don't know	<input type="checkbox"/>															
		<table border="1"> <tr><td>(1) Clinical</td><td></td></tr> <tr><td>(2) Leadership</td><td></td></tr> <tr><td>(3) Building a team</td><td></td></tr> <tr><td>(4) Planning & managing the service</td><td></td></tr> <tr><td>(5) Dealing with managers</td><td></td></tr> <tr><td>(6) Dealing with colleagues</td><td></td></tr> <tr><td>(7) Training Juniors</td><td></td></tr> </table>	(1) Clinical		(2) Leadership		(3) Building a team		(4) Planning & managing the service		(5) Dealing with managers		(6) Dealing with colleagues		(7) Training Juniors	
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(2) Leadership																
(3) Building a team																
(4) Planning & managing the service																
(5) Dealing with managers																
(6) Dealing with colleagues																
(7) Training Juniors																

39. When you complete your training, where would you prefer to work? (please tick one box only)

(1) In London	<input type="checkbox"/>	(4) In another country	<input type="checkbox"/>
(2) In South East England	<input type="checkbox"/>	(5) Don't know/care	<input type="checkbox"/>
(3) In another part of the UK	<input type="checkbox"/>		

Thank you. There follows a question about your ethnicity which has been added for research purposes. Your response will be kept totally confidential and will not form part of the Trust reports. If you do not wish to complete this, you may stop now.

40. I would describe my ethnic group as: (please tick as appropriate)

WHITE

British	<input type="checkbox"/>
Irish	<input type="checkbox"/>
Any other White	<input type="checkbox"/>

MIXED

White & Black Caribbean	<input type="checkbox"/>
White & Black African	<input type="checkbox"/>
White & Asian	<input type="checkbox"/>
Any other mixed	<input type="checkbox"/>

ASIAN OR ASIAN BRITISH

Indian	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>
Any other Asian	<input type="checkbox"/>

BLACK OR BLACK BRITISH

Caribbean	<input type="checkbox"/>
African	<input type="checkbox"/>
Any other Black	<input type="checkbox"/>

OTHER ETHNIC GROUPS

Chinese	<input type="checkbox"/>
Any other ethnic group	<input type="checkbox"/>