

**"It is a myth that public health service is a top priority for the government."**

**"A service managed by non-clinical administrators is a clinical disaster."**

**"...start looking after our staff before we have more tragic physician suicide."**

**"Moving to a state-wide EMR would help patient care and safety a thousand-fold."**

**"We have never seen morale so low."**

**"Serious culture reform is required STAT."**

# AT BREAKING POINT



Public Hospital Senior Doctors'  
**Morale+Engagement** Survey

**THE RESULTS ARE IN!**

**M**uch has changed since the Australian Medical Association (WA) last conducted its biennial senior public hospital doctor morale and engagement survey in October 2019. Events such as the introduction of voluntary assisted dying in Western Australia, the COVID-19 pandemic, a record-breaking budget surplus and a landslide victory for WA Labor have seismically impacted our State over the past two years.

Our public hospital system has also experienced significant upheaval and undeniable pressure that will have a lasting impact on staff and patients alike, and will forever be seen as an avoidable failure to protect workforce wellbeing and patient outcomes.

In just the past few months, WA has recorded the lowest available public hospital beds per capita rate in Australia, broken its unenviable ambulance ramping record a shameful six times, and more recently, placed a system-wide pause on elective surgery due to WA Health's inability to cope with business as usual – all this in a COVID-free environment.

Holding up the health system is a battered, weary workforce, with both anecdotal and validated reports of burnout, plummeting morale and poor culture in the public sector.

The recently released third iteration of Minister Roger Cook's 'Your Voice in Health' staff engagement survey highlights the dangerous faults within our public hospital system, where healthcare workers maintain confidence in their colleagues yet do not think it's safe to speak up and challenge the status quo.

The AMA (WA)'s 2021 Morale+Engagement Survey (M+E Survey) provides yet another red flag, painting a similarly concerning picture of the state of clinician morale, engagement and the pervasive fear of raising concerns that exist in WA's public hospital system.

More than 600 senior doctors working in the public sector responded to our questions about culture, morale and engagement, with the feedback providing significant insight into a system cracked open by crises.

A number of system-wide takeaways have emerged from the M+E survey.

## JOB SECURITY

The benefits that would be reaped by the clinical workforce, health system and patients in the event of permanent employment stand out clearly in the M+E Survey results.

**58%** of survey respondents think permanent employment for senior doctors in WA's public health system would improve patient care.

**60%** believe it would improve financial efficiency of the health system.

**81%** believe it would allow doctors to raise concerns without fear of retribution.

**81%** believe permanent employment would encourage doctors to come and work in WA.

**82%** think permanent employment would improve doctor morale.

When reviewing the reported results of questions that relate to fear of victimisation and the ability to question senior executive decisions at a hospital level, a lack of permanent employment in our public hospitals correlates with such a fear.

St John of God Midland Hospital (SJG Midland) has:

- ✓ the highest proportion of senior doctors who are permanent employees
- ✓ the lowest proportion of senior doctors who fear victimisation as a result of raising concerns about senior executive decisions, and
- ✓ by far the lowest proportion of senior doctors who think raising clinical concerns will impact their future employment.

WA Country Health Service (WACHS), on the other hand, has:

- ✗ a negligible proportion of senior doctors who are permanent employees
- ✗ the highest proportion of senior doctors who believe raising clinical concerns will impact their future employment, and
- ✗ the highest proportion of senior doctors who fear victimisation as a result of raising concerns about senior executive decisions.

Given WA's public health system is facing chronic staffing issues and is plagued by deleterious workforce morale and concerns regarding patient care, permanency appears to be an easy, obvious, cost-neutral solution to some of our system's issues. The refusal by WA Health and the State Government to act on this is a dereliction of their responsibility to address the health system crisis, ultimately jeopardising the health and wellbeing of staff and patients.

## ABUSE OF FIXED-TERM EMPLOYMENT

M+E Survey results indicate that health service providers (HSPs) abuse negotiated terms and conditions in the *WA Health System – Medical Practitioners – AMA (WA) Industrial Agreement 2016*.

For example, a significant proportion of senior doctors stated that they were employed on contracts of less than five years, but more than six months, because that was what they were offered. The AMA (WA) maintains that this is a clear breach of Clause 20 of the Agreement, which provides the right to a five-year contract. It is yet another example of health system managers looking the other way when obligations become an inconvenience, at the expense of morale, wellbeing and patient care.

## THE STANDOUTS AND THE SHOCKERS

At a hospital level, of those hospitals reported, there are some clear stand-out performers in WA's public health system.

It will be unsurprising to many that privately-operated public hospitals, SJG Midland and Joondalup Health Campus (JHC), perform comparatively better than other public hospitals in the majority of the questions.

Royal Perth Hospital (RPH) has also outperformed many of the other WA Health public hospitals and in some instances, the privately operated public hospitals too.

However, among the positives, there are some results that indicate site-specific concerns.

The 2021 M+E Survey shows a worrying lack of engagement and morale at King Edward Memorial Hospital (KEMH) and Rockingham General Hospital (RGH). A large majority of senior doctors at both these hospitals highlighted the fact that decisions made by senior executive were not reasoned and influenced by clinical engagement, and that hospital support for the clinical workforce was 'poor' or 'very poor'. Furthermore, RGH was the only reported hospital where more than 50 per cent of senior doctors feared victimisation as a result of raising concerns about senior executive decisions.

No doctor should fear victimisation but a majority of senior doctors holding such a concern requires immediate board, if not, ministerial intervention.

## MORALE – NO BOOST, JUST BUST

At the epicentre of job satisfaction, morale describes the overall outlook and confidence that employees feel at work. JHC and RPH have overwhelming majorities in this space, with respondents from these hospitals rating senior doctor morale as either 'fair', 'good' or 'excellent'.

At the reported HSP level, concerningly a majority of senior doctors at four of the five HSPs rate morale as being either 'poor' or 'very poor'. WACHS has the poorest ratings when it comes to senior doctor morale.

**At an HSP level, concerningly a majority of senior doctors at four of the five reported HSPs rate morale as being either 'poor' or 'very poor'. WACHS has the poorest ratings when it comes to senior doctor morale.**

Unsurprisingly, given recent tragic events, and the bureaucracy's initial response to these events, the senior doctor morale rating at the Child and Adolescent Health Service (CAHS) has declined significantly since the 2019 AMA (WA) M+E Survey.

While the East Metropolitan Health Service (EMHS) may lead the WA Health HSPs, with only 40 per cent of senior doctors reporting morale as 'poor' or 'very poor', these results are still nothing to celebrate and represent a dangerous indictment on how WA Health is managing employee wellbeing in our public hospitals.

### Then & Now: Percentage of respondents who rated Morale as either 'Poor' or 'Very Poor' at their hospital:

HSP	AMA (WA) 2019 survey	AMA (WA) 2021 survey
WACHS	55%	61% ↑
CAHS	24%	60% ↑
SMHS	43%	52% ↑
NMHS	60%	58% ↓
EMHS	31%	40% ↑

Of greatest concern to the AMA (WA) are the morale ratings at RGH and KEMH, two hospitals where morale and clinical engagement are clearly issues.

**87%** of senior doctors at RGH rate morale as either 'poor' or 'very poor'.

**82%** of senior doctors at KEMH rate morale as either 'poor' or 'very poor'.

These figures eclipse the horrendously poor morale ratings identified by the AMA (WA) at Bunbury Regional Hospital (BRH) in April 2021 (senior doctors and DiTs), which sparked the recent WorkSafe investigation at the site. They also exceed those reported at CAHS in the 2017 M+E Survey, which followed the damning review of the morale and engagement of clinical staff at Princess Margaret Hospital. That review called for an immediate change in leadership style, a rigorous action plan to address

issues, and a strategy for devolution of accountability and decision-making to head of department (HoD) level, including development and training opportunities as required, among others.

While these were all recommendations that related to PMH at that point in time, and therefore are not necessarily what is required at RGH or KEMH, it is clear that there are significant issues that need to be addressed as a matter of priority, given the risk to wellbeing and safety of both staff and patients at these hospitals.

## JHC, RPH AND SJG MIDLAND TOP CULTURE CHARTS

Culture represents the shared attitudes, values and beliefs manifested in organisational behaviour. In terms of how hospital 'culture' has been reported by senior doctors, JHC, RPH and SJG Midland top the list. At the other end, RGH, KEMH and Armadale Kelmscott Memorial Hospital (AKMH) all have a majority of senior doctors describing culture as either 'poor' or 'very poor'.

**84%** of senior doctors at RGH reported culture as 'poor' or 'very poor' – a figure that stands in stark contrast to the other hospitals reported.

At a WA Health HSP level, a majority of senior doctors at South Metropolitan Health Service (SMHS) and WACHS report culture as being 'poor' or 'very poor' at their hospital. While 46 per cent and 47 per cent of senior doctors at NMHS and CAHS respectively, identify culture as 'very poor' and 'poor', 72 per cent of EMHS doctors reported culture to be 'fair', 'good' or 'excellent' at their hospital.

**“ RGH was the only reported hospital where more than 50 per cent of senior doctors feared victimisation as a result of raising concerns about senior executive decisions.**

**Then & Now: Percentage of respondents who rated Culture as either 'Poor' or 'Very Poor' at their hospital:**

HSP	AMA (WA) 2019 survey	AMA (WA) 2021 survey
WACHS	57%	56% ↓
SMHS	49%	53% ↑
CAHS	21%	47% ↑
NMHS	51%	46% ↓
EMHS	25%	28% ↑

## ON NOTICE

Over the following pages you will find the results of a number of key questions from the 2021 M+E Survey, both at an aggregated level and for hospitals where more than 25 responses were received.

Completing our coverage is a spread of comments, which are just some of the hundreds received as part of the survey. These observations offer a window into the magnitude and intensity of concern within the senior public hospital doctor cohort.

While there are some positives in the 2021 M+E Survey results that should be applauded, hospital-level areas of concern and consistent poorly-performing HSPs highlight areas where a change in approach, commitment to redress and immediate action are required.

It's clear that a lot of work is needed to re-engage and support many parts of WA's senior doctor workforce, ensuring they are able to work in an environment that is safe and maximises patient outcomes.

The AMA (WA) has provided each of the HSPs and key stakeholders with a copy of their aggregated results (excluding demographic data), ensuring anonymity for all respondents.

While the HSP Boards play a significant role in this process, the Minister for Health, the Minister for Mental Health and System Manager (the Director General of Health) all bear ultimate responsibility. The fault lines run deep, yet reach to the very top. ■

Tables are ranked in order of poorest performing HSP to best, by weighted average of all responses exc. N/A or Unsure.

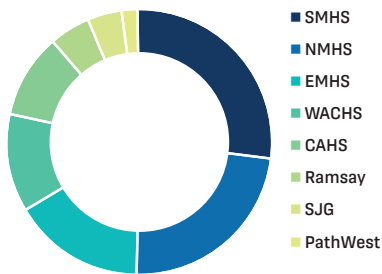
## THANK YOU

The AMA (WA) thanks all the senior doctors, who spent time providing valuable feedback as part of the 2021 M+E Survey.

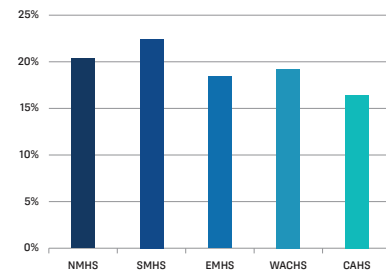


# Public Hospital Senior Doctors' Morale+Engagement Survey

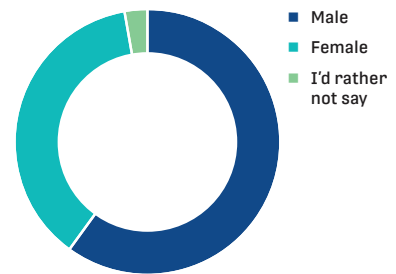
HSP's Proportion of M+E Responses



WA Health HSP Response Rate (% of head count)



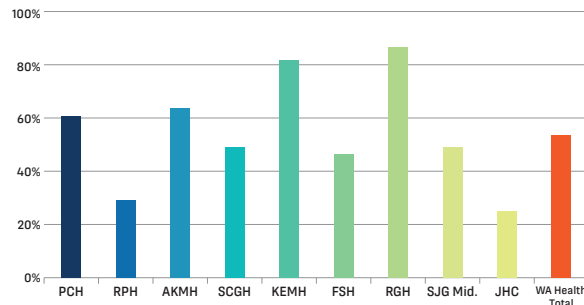
Demographics - Gender Breakdown



## How would you rate senior doctor 'morale' at your hospital?

HSP	Very Poor & Poor	Fair	Good & Excellent
WACHS	61.3%	28.8%	10.0%
CAHS	60.3%	25.0%	14.7%
SMHS	52.5%	37.7%	9.8%
NMHS	57.6%	29.8%	12.6%
EMHS	40.0%	33.6%	26.4%
<b>WA Health Total</b>	<b>54.0%</b>	<b>32.2%</b>	<b>13.9%</b>

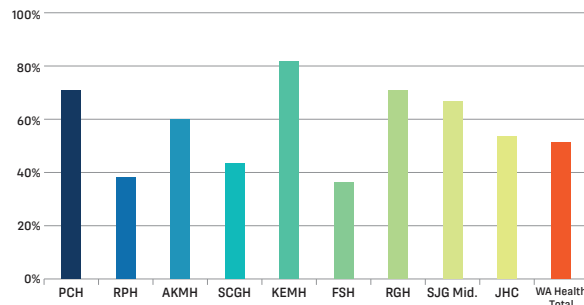
% OF NEGATIVE RESPONSES



## Over the past 12 months, how has the morale at your chosen work location changed?

HSP	Improved	Unchanged	Deteriorated	Unsure
CAHS	1.5%	23.5%	70.6%	4.4%
WACHS	5.0%	28.8%	58.8%	7.5%
NMHS	5.3%	39.1%	54.3%	1.3%
EMHS	8.2%	44.5%	45.5%	1.8%
SMHS	9.8%	48.1%	41.0%	1.1%
<b>WA Health Total</b>	<b>6.6%</b>	<b>39.8%</b>	<b>51.2%</b>	<b>2.5%</b>

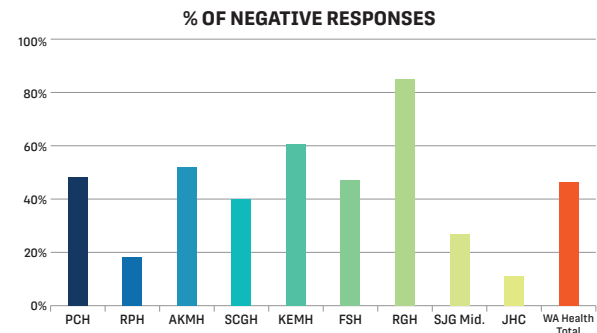
% OF NEGATIVE RESPONSES



- **PCH** – Perth Children's Hospital
- **KEMH** – King Edward Memorial Hospital
- **JHC** – Joondalup Health Campus
- **RPH** – Royal Perth Hospital
- **FSH** – Fiona Stanely Hospital
- **WA Health Total** – HSPs aggregated (including PathWest and excluding JHC and SJG Midland).
- **AKMH** – Armadale Kelmscott Memorial Hospital
- **RGH** – Rockingham General Hospital
- **SCGH** – Sir Charles Gairdner Hospital
- **SJG Mid.** – SJG Midland

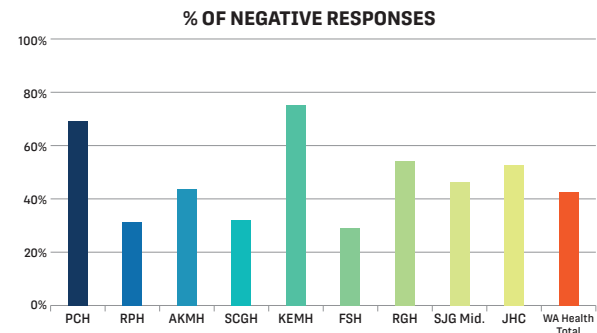
## How would you rate culture at your hospital?

HSP	Very Poor & Poor	Fair	Good & Excellent
SMHS	53.0%	33.9%	13.1%
WACHS	56.3%	26.3%	17.5%
NMHS	45.7%	35.8%	18.5%
CAHS	47.1%	32.4%	20.6%
EMHS	28.2%	32.7%	39.1%
<b>WA Health Total</b>	<b>46.5%</b>	<b>32.7%</b>	<b>20.8%</b>



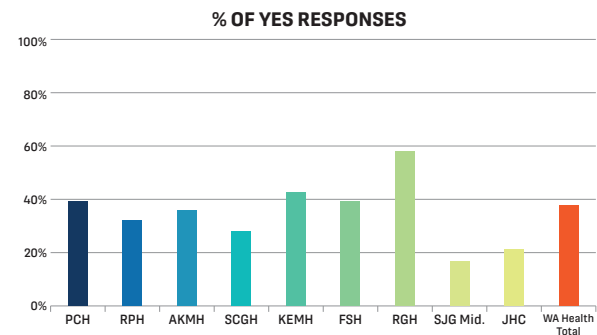
## Over the past 12 months, how has the culture at your chosen work location changed?

HSP	Improved	Unchanged	Deteriorated	Unsure
CAHS	2.9%	23.5%	69.1%	4.4%
WACHS	7.5%	35.0%	51.3%	6.3%
NMHS	11.3%	41.1%	45.0%	2.6%
EMHS	10.9%	48.2%	37.3%	3.6%
SMHS	13.1%	53.0%	31.7%	2.2%
<b>WA Health Total</b>	<b>10.4%</b>	<b>43.1%</b>	<b>43.1%</b>	<b>3.5%</b>



## Do you fear victimisation as a result of raising concerns about decisions taken by Senior Executive?

HSP	Yes	Neutral	No	N/A
SMHS	39.9%	31.1%	25.7%	3.3%
WACHS	40.0%	31.3%	26.3%	2.5%
CAHS	39.7%	16.2%	38.2%	5.9%
NMHS	35.1%	25.2%	38.4%	1.3%
EMHS	33.6%	21.8%	41.8%	2.7%
<b>WA Health Total</b>	<b>37.6%</b>	<b>25.9%</b>	<b>33.5%</b>	<b>3.0%</b>



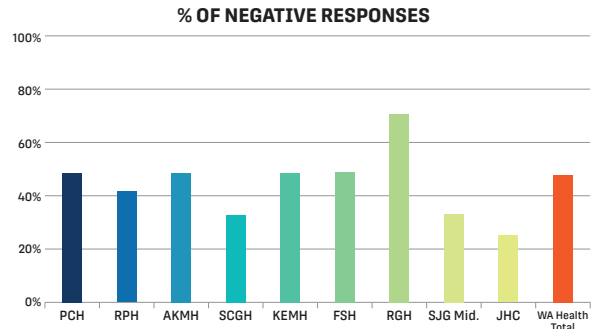
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Public Hospital Senior Doctors' **Morale+Engagement** Survey

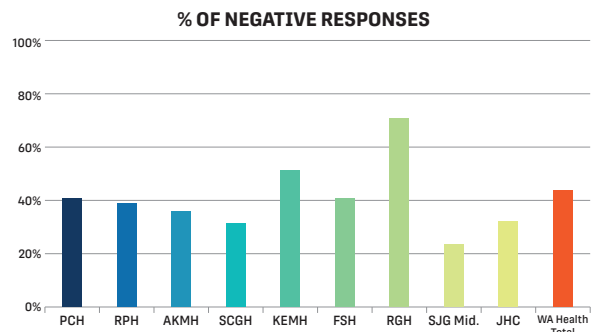
**Questioning Senior Executive decisions will not impact my future employment**

HSP	Strongly Disagree & Disagree	Neutral	Strongly Agree & Agree
WACHS	52.5%	31.3%	16.3%
SMHS	53.0%	28.4%	18.6%
CAHS	50.0%	22.1%	27.9%
EMHS	44.5%	26.4%	29.1%
NMHS	39.1%	31.8%	29.1%
<b>WA Health Total</b>	<b>47.9%</b>	<b>28.2%</b>	<b>23.9%</b>



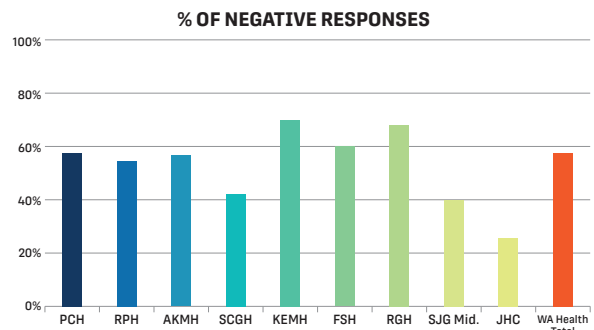
**Raising clinical concerns will not impact my future employment**

HSP	Strongly Disagree & Disagree	Neutral	Strongly Agree & Agree
WACHS	56.3%	16.3%	27.5%
SMHS	46.4%	23.0%	30.6%
CAHS	42.6%	16.2%	41.2%
EMHS	40.0%	16.4%	43.6%
NMHS	39.1%	14.6%	46.4%
<b>WA Health Total</b>	<b>44.1%</b>	<b>18.6%</b>	<b>37.3%</b>



**Decisions made by the Senior Executive are reasoned and influenced by clinical engagement**

HSP	Strongly Disagree & Disagree	Neutral	Strongly Agree & Agree
SMHS	61.7%	26.2%	12.0%
WACHS	63.8%	16.3%	20.0%
CAHS	57.4%	22.1%	20.6%
EMHS	57.3%	20.9%	21.8%
NMHS	50.3%	28.5%	21.2%
<b>WA Health Total</b>	<b>57.6%</b>	<b>24.1%</b>	<b>18.3%</b>

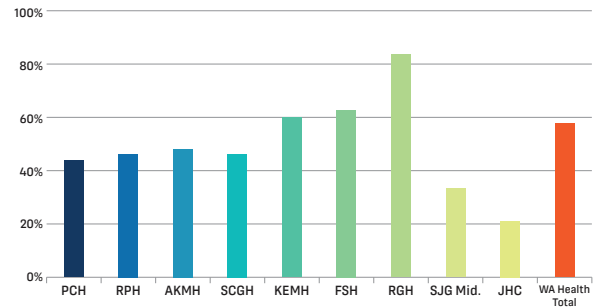


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- **FSH** – Fiona Stanley Hospital
- **RGH** – Rockingham General Hospital
- **SJG Mid.** – SJG Midland
- **JHC** – Joondalup Health Campus
- **WA Health Total** – HSPs aggregated (including PathWest and excluding JHC and SJG Midland).

### My employer effectively consults with clinical staff

HSP	Strongly Disagree & Disagree	Neutral	Strongly Agree & Agree
SMHS	67.8%	23.0%	9.3%
WACHS	67.5%	17.5%	15.0%
NMHS	52.3%	28.5%	19.2%
EMHS	50.0%	25.5%	24.5%
CAHS	44.1%	38.2%	17.6%
<b>WA Health Total</b>	<b>57.8%</b>	<b>25.7%</b>	<b>16.5%</b>

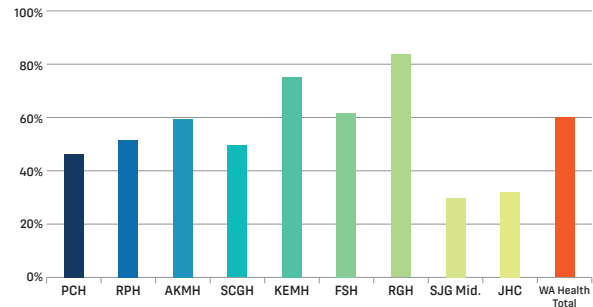
% OF NEGATIVE RESPONSES



### My employer effectively empowers clinical staff

HSP	Strongly Disagree & Disagree	Neutral	Strongly Agree & Agree
WACHS	67.5%	22.5%	10.0%
SMHS	66.1%	24.0%	9.8%
NMHS	58.3%	30.5%	11.3%
EMHS	56.4%	25.5%	18.2%
CAHS	47.1%	39.7%	13.2%
<b>WA Health Total</b>	<b>60.1%</b>	<b>27.6%</b>	<b>12.4%</b>

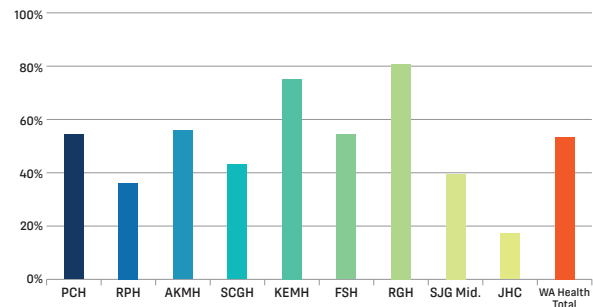
% OF NEGATIVE RESPONSES



### How would you rate your hospital's support for the clinical workforce?

HSP	Very Poor & Poor	Fair	Good & Excellent
WACHS	55.0%	36.3%	8.8%
SMHS	57.9%	30.1%	12.0%
CAHS	54.4%	30.9%	14.7%
NMHS	53.0%	33.1%	13.9%
EMHS	44.5%	30.0%	25.5%
<b>WA Health Total</b>	<b>53.6%</b>	<b>31.7%</b>	<b>14.7%</b>

% OF NEGATIVE RESPONSES



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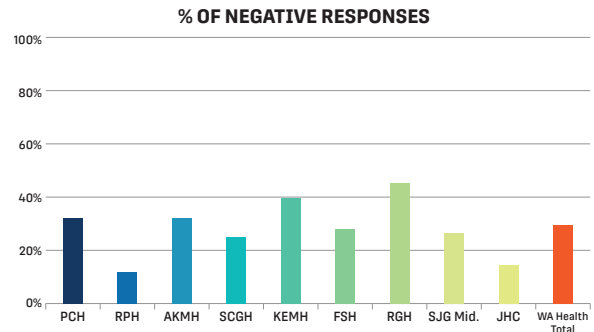




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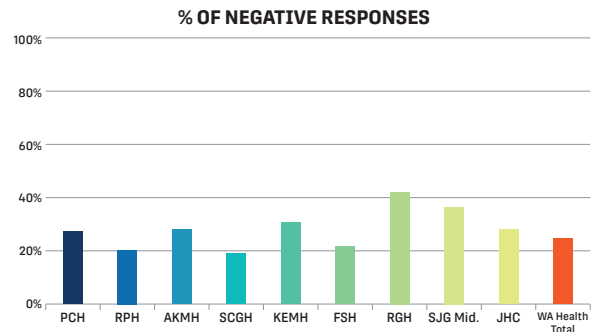
**As an employee, I would recommend my hospital to other doctors**

HSP	Strongly Disagree & Disagree	Neutral	Strongly Agree & Agree
WACHS	35.0%	35.0%	30.0%
SMHS	30.6%	38.8%	30.6%
CAHS	32.4%	32.4%	35.3%
NMHS	29.8%	28.5%	41.7%
EMHS	19.1%	30.9%	50.0%
<b>WA Health Total</b>	<b>29.0%</b>	<b>33.7%</b>	<b>37.3%</b>



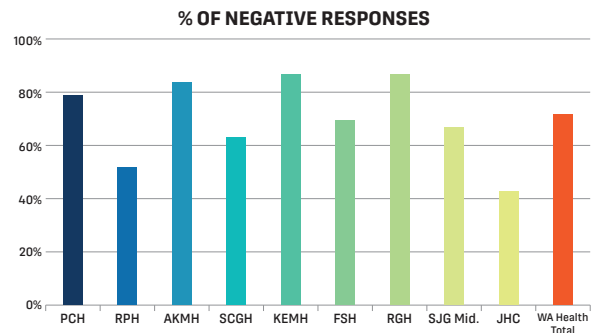
**At my hospital, staff feel able to provide excellent care**

HSP	Strongly Disagree & Disagree	Neutral	Strongly Agree & Agree
WACHS	30.0%	36.3%	33.8%
SMHS	24.6%	36.1%	39.3%
CAHS	27.9%	30.9%	41.2%
EMHS	24.5%	33.6%	41.8%
NMHS	21.9%	36.4%	41.7%
<b>WA Health Total</b>	<b>24.6%</b>	<b>35.5%</b>	<b>39.9%</b>



**Do you think current workplace culture and morale has an impact on employee wellbeing?**

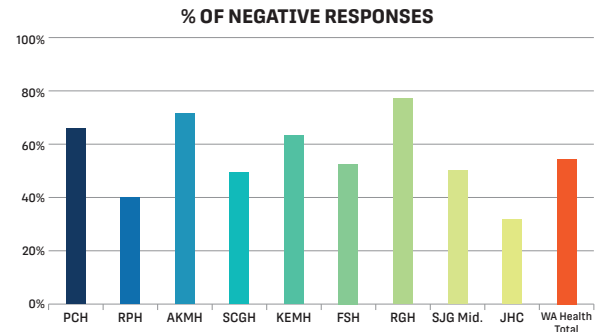
HSP	Very Positive & Positive Impact	No impact	Very & Somewhat Negative Impact
CAHS	11.8%	10.3%	77.9%
WACHS	15.0%	2.5%	82.5%
SMHS	14.8%	12.6%	72.7%
NMHS	23.8%	7.3%	68.9%
EMHS	28.2%	10.9%	60.9%
<b>WA Health Total</b>	<b>19.0%</b>	<b>9.2%</b>	<b>71.8%</b>



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- **KEMH** – King Edward Memorial Hospital
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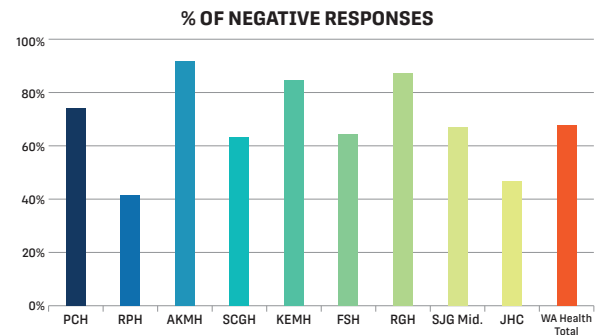
## Do you think current workplace culture and morale has an impact on clinical outcomes?

HSP	Very Positive & Positive Impact	No impact	Very & Somewhat Negative Impact
CAHS	20.6%	13.2%	66.2%
WACHS	21.3%	22.5%	56.3%
SMHS	18.6%	26.8%	54.6%
NMHS	27.2%	20.5%	52.3%
EMHS	32.7%	17.3%	50.0%
<b>WA Health Total</b>	<b>23.6%</b>	<b>21.5%</b>	<b>55.0%</b>



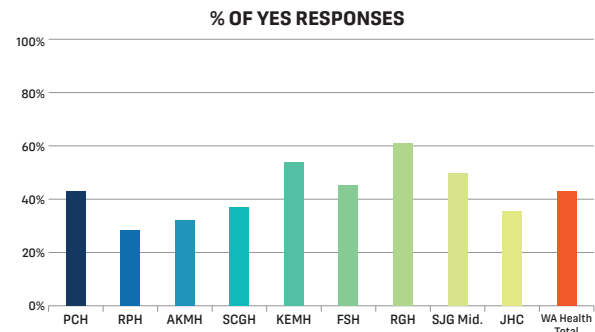
## Do you think current workplace culture and morale has an impact on clinical staff turnover?

HSP	Very Positive & Positive Impact	No impact	Very & Somewhat Negative Impact
WACHS	16.3%	5.0%	78.8%
CAHS	8.8%	17.6%	73.5%
SMHS	13.7%	19.1%	67.2%
NMHS	21.2%	10.6%	68.2%
EMHS	24.5%	20.0%	55.5%
<b>WA Health Total</b>	<b>17.2%</b>	<b>15.2%</b>	<b>67.7%</b>



## Have you considered resigning or relocating from this hospital due to adverse work conditions?

HSP	Yes	Neutral	No	N/A
WACHS	45.0%	17.5%	35.0%	2.5%
SMHS	45.9%	16.9%	36.6%	0.5%
NMHS	45.0%	13.2%	40.4%	1.3%
CAHS	44.1%	8.8%	42.6%	4.4%
EMHS	33.6%	18.2%	48.2%	0.0%
<b>WA Health Total</b>	<b>43.2%</b>	<b>15.2%</b>	<b>40.1%</b>	<b>1.5%</b>



Tables are ranked in order of poorest performing HSP to best, by weighted average of all responses excluding N/A or Unsure. Reported hospitals & HSPs only include those with 25 or more responses. Results for PathWest have not been published as they did not reach the reporting threshold. Percentages are rounded to one decimal place.

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# WACHS FAILING TO SUPPORT SENIOR DOCTORS

Senior doctors who completed the M+E Survey provided 80 reports on hospitals or regional services run by the WA Country Health Service (WACHS), which we estimate to represent approximately 19 per cent of the total WACHS senior doctor FTE.\*

Compared to the other reported health service providers (HSPs) in WA Health, WACHS consistently had the highest negative ratings for many of the 2021 Morale +Engagement Survey questions and significantly, the poorest ratings for senior doctor morale.

The difficulty in effectively responding to these results for WACHS or ensuring they represent the clearest and most comprehensive picture on the ground, is both the

huge diversity of work locations, distances between them and the varying number of responses from each.

The AMA (WA) has previously highlighted sinking morale at Bunbury Regional Hospital (BRH), and unfortunately the results show little improvement in some of the key problem areas.

Results from other WACHS site are also cause for concern and warrant remedial action, with a majority of practitioners believing raising clinical concerns will impact their future employment and declines in both hospital culture and senior doctor morale over the past 12 months. ■

In the



Public Hospital Senior Doctors' **Morale+Engagement** Survey

**89%**

of BRH senior doctors reported morale as being either 'poor' or 'very poor', compared to 88% of senior doctors who completed the BRH Survey in March 2021. (80% of all respondents, including DiTs rated morale as 'poor' or 'very poor' in the BRH Survey).

**84%**

of BRH senior doctors rated culture as 'poor' or 'very poor', compared to 86% in March's BRH Survey - a slight improvement. (75% of all respondents, including DiTs rated culture as 'poor' or 'very poor' in the BRH Survey).

\*based on data provided to the AMA (WA) by System-Wide Industrial Relations Service.



Public Hospital Senior Doctors'  
**Morale+Engagement** Survey

**"The five-year fixed-term contracts are insulting... Why would anyone want to be full time when the hospital could abruptly end your employment? The five-year contracts encourage disengagement and fractional employment."**

**"The wider corporate culture is divisive, erosive and disruptive to the future success of unified dedicated public sector workers."**

"What keeps me at my current workplace is the team within each department I work in... My interactions at a departmental level are almost entirely positive..."

"The hospital is completely overwhelmed and staff are failing to engage and care – it is an impending disaster and is a result of government and health department functioning and failure. It should be front page news every day and is not – so it is also a failure of the fourth estate."

**"I was made to understand a long time ago to keep your head down."**

"There appears to be a continued fixation, erroneous faith & magical thinking with respect to the power of the Sustainable Health Review findings. We need more resources, including beds & staff now!"

**"...We have had unprecedented levels of departmental sickness, not only due to COVID-related precautions, but also due to sheer stress and burnout..."**

**"The public health system has lost all its appeal to work in."**

"Our direct line managers (DMS and RMD) are supportive and approachable. The disconnect is elsewhere in hospital management, where it feels impossible to bring about change."

**"...If a decision doesn't have an immediate financial impact then it doesn't get made, and if there is an immediate financial impact (regardless of long-term outcome) then the answer is no..."**