Why we need your help to understand issues with on-call working

A 2020 survey between BAUS and Bournemouth University (BU) looked at factors inducing stress in urologists. An important findings was that BAUS members were unhappy with on-call work, the reasons for which were unclear. It would be helpful to understand how on-call is facilitated at work, what urologists think about this activity, and how it impacts on them. This could help provide evidence to support surgeons working out of hours, wherever they are in their careers.

We are researchers from the Department of Psychology at BU, working alongside BAUS members Mr Stephen Payne and Prof. Kevin Turner. This research is being conducted to establish a baseline of methods of on-call service delivery, factors that impact on individual perceptions about, and their expectations and attitudes towards out-of-hours working. We would be grateful if you could take part, whether on-call work is part of your expected role OR NOT.

Further detail about the study can be found in the Patient Information Sheet (PIS) <u>via this link</u>. Please take some time to carefully read this information, and discuss it with others if you wish.

Why have I been invited?

You are a medical practitioner within the speciality of urology in the UK or Ireland.

Do I have to take part?

It is up to you to decide whether or not to take part. You can stop participating in the survey at any time and without giving a reason. If you withdraw from the study, we will not collect any further information from, or about, you. Due to the anonymous nature of the survey, once you have completed the survey and submitted your responses, it is not possible to retrieve any individual data. As such, we will keep information which we have already collected from you, and analyse this only if it has on-going relevance to the study.

What would taking part involve?

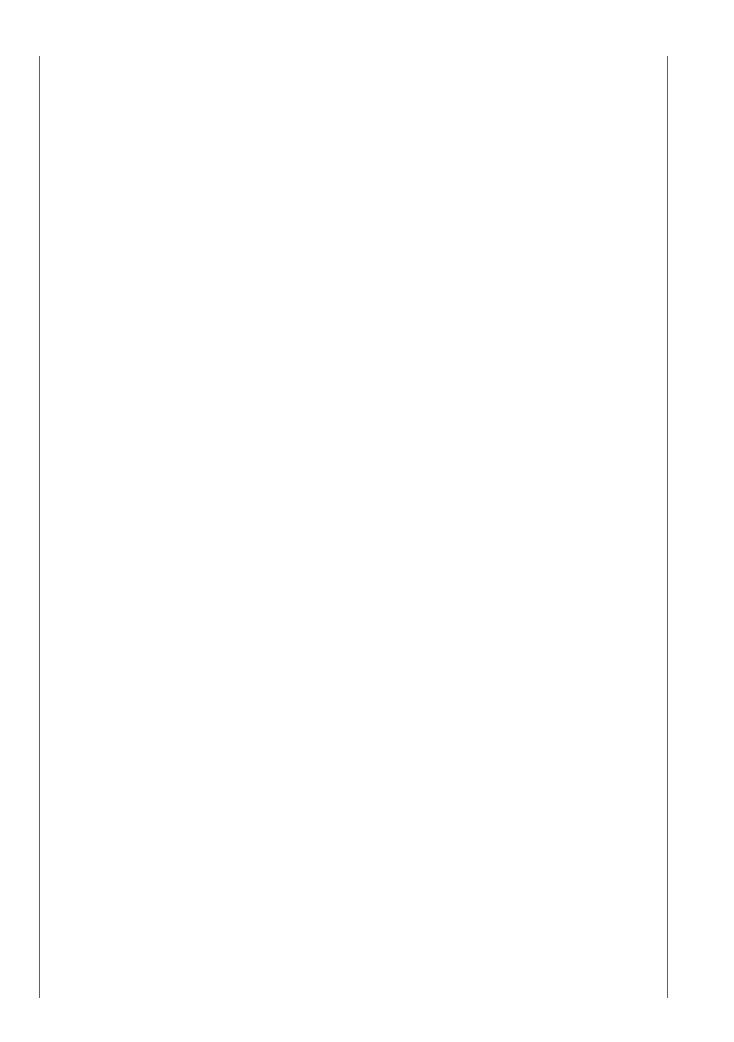
Completion of this online SurveyMonkey questionnaire will take <10 minutes to complete. Whilst there are no immediate benefits to you participating in this survey, it is hoped that this work will benefit workforce planning and the delivery of on-call activity which recognise the wellbeing and needs of practitioner's health. We do not foresee any direct risks, or disadvantages, to you as an individual by taking part.

What information will be sought from me and why is this relevant for achieving the research project's objectives?

Personal and occupational data will be collected anonymously and utilised to identify personal preferences regarding on-call activity. This data is being collected to determine factors influencing how on-call activity is provided in differing types of hospital setting and the influences these have on individual's satisfaction with the arrangements.

Publication

Research results will be published in appropriate scientific journals, and will be shared electronically with all BAUS members at the completion of the analysis.



Consent

Use of my information

Participation in this study is on the basis of consent: you do not have to complete the survey, and you can change your mind at any point before submitting the survey responses. We will use your data on the basis that it is necessary for the conduct of research, which is an activity in the public interest. We put safeguards in place to ensure that your responses are kept secure and only used as necessary for this research study and associated activities such as a research audit. Once you have submitted your survey response it will not be possible for us to remove it from the study analysis because you will not be identifiable.

The anonymous information collected may be used to support other research projects in the future and access to it in this form will not be restricted. It will not be possible for you to be identified from this data. Anonymised data will be added to BU's Online Research Data Repository (a central location where data is stored) and which will be publicly available.

In case of complaint

Any concerns about the study should be directed to <u>Dr Kevin Thomas</u>. If your concerns have not been answered by Professor Thomas, you should contact <u>Professor Tiantian Zhang</u> at Bournemouth University by email .

Any questions about, or difficulties with the survey, please contact Mr Steve Payne.

<u>This research is totally anonymous</u>. By clicking `Yes' you agree that you have all of the information you require to continuing with the survey, consent to participating and to BU collecting and analysing your responses.

* 1. Do you consent to continuing with this survey?

Yes, I have read and understood the Participant Information Sheet and consent to take part in this questionnaire. I give permission for members of the Research Team to have access to my anonymised responses. I understand that my anonymised responses may be reproduced in reports, academic publications and presentations but I will not be identified or identifiable.

No, I do not consent to take part in this questionnaire

What gender do you ide	entify with? (Select one)
Male	○ Non-binary
○ Female	O Prefer not to answer
What is your ethnic her	itage? (English/Welsh/Scottish/Northern Irish = British
(Select one)	nuge. (English, weish, seottish, torthern mish – british
	t one)
4. How old are you? (Selec	
4. How old are you? (Selec	45-49
	O 45-49
<25 25-30	45-4950-54

Your hospital's demographics

6. What type of hospital do you work in? (Select one)

- O Specialist Hospital (Oncology/Orthopaedics/Spinal Injury)
- Teaching Hospital
 A second secon

Orthopaedics

O District General Hospital

7. How many doctors work in your department? (number)

FYs	
CTs	
LEDs	
AHPs	
LAT, ST3-7, Fellows	
SASs	
Consultants	

8. Does your hospital have an Emergency Department (ED)? (UAN = Urology Area Network)(Select one)

○ We're a trauma centre	O No, h	out the UAN does
○ Yes, but not a trauma centre	🔵 No, a	nd we're not part of a UAN
9. Which other specialties	work in your hospital? (s	elect all that apply)
General Surgery	Nephrology	Paediatrics
Gynaecology	Plastic surgery	General Medicine
Obstetrics	Neurosurgery	Medicine for the elderly

* 10. What is your employment grade? (Select one)

Foundation doctor (FY)
Core trainee (CT)
C Locally employed doctor (LED)
Specialist registrar (LAT, ST or post CCT Fellow)
◯ SAS urologist
○ Consultant urologist

Paediatric surgery

Neurology

11. What is your Foundation year? (Select one)

○ FY1 ○ FY2

Other (please specify)

* 12. Are you full time? (Select one)

Y Part time	Part time					
	What percentage of full time is your current contract?					
0					100	
0						

FY on-call

* 14. Do you do any on-call work? (Select one)

Y ease of advice 5. On a scale of 0 - 10, how easy to do you find it to escalate an issue to a more sperienced colleague for advice? (Slide the button)		
0 Very easy	It's OK	10 Very difficult
)		

16. What is your Core training year? (Select one)

○ CT1 ○ CT2

Other (please specify)

* 17. Are you full time? (Select one)

What percentage of full time is you	ır current contrac	t?	
)		100	

Core on call

* 19. Do you do any on-call work? (Select one)

e ease of advice			
		it to escalate an issue to	a more
	or advice? (Slide the bu		
Very easy	It's OK	10 Very difficult	

. How are you employed? ((Select one)		
As a core trainee As a re	gistrar		
Other (please specify)			
		<u>I</u>	
22. Are you full time? (Sele	ect one)		
Yes No			

Vhat percentage o	f full time is yo	ur current co	ontract?		
				100	

LED on call

* 24. Do you do any on-call work? (Select one)

○ Yes ○ No On a scale of 0 - 10, how easy to do you find it to escalate an issue to a more	D ease of advice				
On a scale of 0 - 10, how easy to do you find it to escalate an issue to a more erienced colleague for advice? (Slide the button) Very easy It's OK 10 Very difficult 27. What on-call rota do you participate in? (Select one) Core Trainee rota Mid-grade rota	25. Are you resident on-call at night? (Select one)				
Private asy It's OK 10 Very difficult 10 Very difficult 27. What on-call rota do you participate in? (Select one) Core Trainee rota Mid-grade rota	◯ Yes ◯ No				
Private asy It's OK 10 Very difficult 10 Very difficult 27. What on-call rota do you participate in? (Select one) Core Trainee rota Mid-grade rota					
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 Core Trainee rota Mid-grade rota 					
 Core Trainee rota Mid-grade rota 	* 27 What on-call rota	do vou participate in?	(Select one)		
		uo you pur troiputo ini			
Consultant rota	Mid-grade rota				
	O Consultant rota				
	<u> </u>				

What is your training sta	tus? (Select one)
LAT	○ ST6
ST3	○ ST7
ST4	O Post CCT Fellow
ST5	
Other (please specify)	
Are you full time? (Sele	ct one)
Yes 🔵 No	

trainee Part time What percentage o	f full time is you	r current cont	ract?		
)				100	

ST trainee on-call

* 31. Do you do any on-call work? (Select one)

ST trainee on call/cover

32. Are you routinely resident on-call at night? (Select one)

◯ Yes ◯ No

33. In your main hospital site who else is on call with you out of hours? (Select all that apply)

AHP	Another ST or LAT
FY1 or 2	SAS
Core trainee	Consultant
LED	

* 34. Do you have to cover more than one hospital sites and be available to go to them when on-call out of hours? (Select one)

ST multi-site

35. How many sites could you have to travel between? (number of sites)

36. Are you expected to cover inpatients at other sites at weekends? (Select one)

- \bigcirc Yes, with a ward round on each day
- \bigcirc Yes, on one day of the weekend
- \bigcirc Yes, but without a ward round
- 🔿 No

ST trainee ease of advi	се		
87. On a scale of 0 - 10,	On a scale of 0 - 10, how easy to do you find it to escalate an issue to a more rienced colleague for advice? (Slide the button)		
0 Very easy	It's OK	10 Very difficult	
<u> </u>			

SAS Urologists	
38. How many years have you been in post	? (Select one)
\bigcirc <5 years	20-25 years
○ 6-10 years	○ >25 years
11-15 years	\bigcirc I have retired and returned
○ 16-20 years	
* 39. Are you full time? (Select one)	

What percentage	of full time i	is your cui	rrent cont	ract?		
)					100	

SAS on-call

* 41. Do you do any on-call work? (Select one)

SAS Resident

42. Are you routinely resident on-call at night? (Select one)

🔵 Yes 🛛 🔵 No

 \ast 43. Do you have to cover more than one hospital sites and be available to go to them when on-call out of hours? (Select one)

🔵 Yes 🛛 🔵 No

SAS multi-site

44. How many sites could you have to travel between? (number of sites)

45. Are you expected to cover inpatients at other sites at weekends? (Select one)

- \bigcirc Yes, with a ward round on each day
- \bigcirc Yes, on one day of the weekend
- \bigcirc Yes, but without a ward round
- 🔿 No

erienced colleague for advice? (Slide the button) 0 Very easy It's OK 10 Very difficul	SAS Consultant o you find it to escalate an issue to a more ide the button) OK 10 Very difficult	6. In your main hosp	ital site who else is on ca	all with you out of hours? (Select
FY1 or 2 SAS Core trainee LED On a scale of 0 - 10, how easy to do you find it to escalate an issue erienced colleague for advice? (Slide the button) Very easy It's OK 10 Very difficult 48. What on-call rota do you participate in? (Select one) Core Trainee rota Mid-grade rota	SAS Consultant O you find it to escalate an issue to a more ade the button) OK 10 Very difficult			
Core trainee Consultant LED On a scale of 0 - 10, how easy to do you find it to escalate an issue erienced colleague for advice? (Slide the button) O Very easy It's OK 10 Very difficult 48. What on-call rota do you participate in? (Select one) Core Trainee rota Mid-grade rota	Consultant o you find it to escalate an issue to a more ide the button) OK 10 Very difficult			1
 LED On a scale of 0 - 10, how easy to do you find it to escalate an issue erienced colleague for advice? (Slide the button) 0 Very easy It's OK 10 Very difficult 48. What on-call rota do you participate in? (Select one) Core Trainee rota Mid-grade rota 	o you find it to escalate an issue to a more ide the button) DK 10 Very difficult	FY1 or 2		SAS
On a scale of 0 - 10, how easy to do you find it to escalate an issue erienced colleague for advice? (Slide the button) 0 Very easy It's OK 10 Very difficul 48. What on-call rota do you participate in? (Select one) Core Trainee rota Mid-grade rota	ade the button) DK 10 Very difficult	Core trainee] Consultant
erienced colleague for advice? (Slide the button) 0 Very easy It's OK 48. What on-call rota do you participate in? (Select one) Core Trainee rota Mid-grade rota	ade the button) DK 10 Very difficult	LED		
Very easy It's OK 10 Very difficult 48. What on-call rota do you participate in? (Select one) Core Trainee rota Mid-grade rota	DK 10 Very difficult			
Core Trainee rota Mid-grade rota	cipate in? (Select one)			
Core Trainee rota Mid-grade rota	cipate in? (Select one))		
Mid-grade rota	cipate in? (Select one)			
Mid-grade rota		48. What on-call rota	a do you participate in? (Select one)
		Core Trainee rota		
Consultant rota		Mid-grade rota		
		🔵 Consultant rota		

Consultant Urologists	
49. How many years have you	been in post? (Select one)
◯ <5 years	○ 20-25 years
○ 6-10 years	○ >25 years
11-15 years	◯ I have retired and returned
○ 16-20 years	
 * 50. Are you full time? (Select Yes No * 51. Do you do any on-call wo 	
Yes No	

Consultant on-call

52. Do General surgeons cover the urological emergencies out of hours?

Yes No

* 53. Do you have to cover more than one hospital sites and be available to go to them when on-call out of hours? (Select one)

🔵 Yes 🛛 🔵 No

Consultant multi-site

54. How many sites could you have to travel between? (number of sites)

55. Are you expected to cover inpatients at other sites at weekends? (Select one)

- \bigcirc Yes, with a ward round on each day
- \bigcirc Yes, on one day of the weekend
- \bigcirc Yes, but without a ward round
- 🔿 No

ndvice even if they are not o		Urology ST General surgical ST SAS Another consultant
FY1 or 2 Core trainee LED On a scale of 0 - 10, how ea advice even if they are not o		General surgical ST
Core trainee LED Dn a scale of 0 - 10, how ea advice even if they are not o	[[sy to do you find	SAS
Dn a scale of 0 - 10, how ea	ev to do you find	
On a scale of 0 - 10, how ea advice even if they are not o	sy to do you find	Another consultant
ndvice even if they are not o	ev to do vou find	
		it to escalate an issue to a collea
Very easy	It's OK	10 Very difficult
5 5		

PAs for consultants with on-call activity in their contracts

58. The PAs/week in your job plan? (one decimal point)

Total PAs PAs for on-call activity SPAs

PAs for consultants with no on-call commitments

59. The PAs/week in your job plan? (one decimal point)

Total PAs

SPAs

No on-call activity

* 60. I don't do any-call activity because: (Select only one - R&R = retire and return)

 \bigcirc I am not contracted to

I am temporarily exempted

- It was a condition of my R&R
- I do additional activity instead

 \bigcirc I have medical exemption

n-call activity FY and core traine	es
. How many people are on your o	n-call rota?
62. Which other specialties do yo	ou cross cover when on-call? (select all that apply
Cardiothoracic surgery	Neurosurgery Orthopaedics
General Surgery	Paediatric surgery
Gynaecology	Plastic surgery
Other (please specify)	i lustic surgery
53. Do vou routinelv get vour zer	o hours off after an on-call night? (select one)
All the time	\bigcirc <50% of the time
\bigcirc >50% of the time	
\bigcirc	

4. Number of people on the registr	ar rota
65. Is your rota shared with anoth	ner Trust? (Select one)
Yes No	
66. How often are you called betw	veen midnight and 8am when you are on call?
(select one)	
Every night	Every 4-5 nights on call
Every 2-3 nights on call	○ Very occasionally
67. How often do you have to retu	ırn to the hospital between midnight and 8am wh
you are on call (select one)	
C Every night	Every 4-5 nights on call
Every 2-3 nights on call	○ Very occasionally
60 De vou routinely get vour zor	o hours off after an on-call night? (select one)
All the time	\bigcirc <50% of the time
\bigcirc >50% of the time	

Number of people on the rota (number)
0. Is your rota shared with another Tru	st? (Select one)
71. What sort of weekday on-call rota of	do you run? (Select one)
Whole week on-call	On-call weekdays, off nights and weekends
On-call weekdays and nights, off weekends	On-call specified weekdays
Other (please specify)	

Which day of the v	veek do you start your wee	k on call? (select one)			
Monday	Thursday	🔵 Sunday			
Tuesday	◯ Friday				
Wednesday	Saturday	Saturday			
hich time on that d	lay does your week start? ((number 1-24)			

. Which day of the v	week do you start your wee	k on call? (select one)		
Monday	Thursday	◯ Sunday		
Tuesday	◯ Friday			
Wednesday	Saturday			
Vhich time on that o	lay does your week start? (number 1-24)		

onsultants on call 3		
76. Which day of the v	veek do you start your week	kend? (select one)
O Monday	O Thursday	🔘 Sunday
Tuesday	◯ Friday	
○ Wednesday	Saturday	
7. Which time on that d	lay does you start your wee	kend? (number 1-24)
our		

lltants on call 4 Which is the speci	fied day of the week you do	on-call? (select one)
) Monday) Thursday	Sunday
Tuesday	◯ Friday	
Wednesday	Saturday	

Consultants call out and rest periods	
-	
* 79. How often are you called betw (select one)	een midnight and 8am when you are on call?
Every night	Every 4-5 nights on call
Every 2-3 nights on call	Very occasionally
 Every 4-5 nights on call 	
* 80. How often do you have to retu	rn to the hospital between midnight and 8am
when you are on call (select one)	
C Every night	C Every 4-5 nights on call
O Every 2-3 nights on call	○ Very occasionally
O Every 4-5 nights on call	
* 81. Do you get time off if you are : (Select one)	required to be in the hospital after midnight?
Yes, 1/2 the next working day	A flexible day in lieu
<u> </u>	
Yes, the next working day	() No
* 82. Do you routinely get your zero) hours off after an on-call night? (select one)
All the time	Rarely
\bigcirc >50% of the time	Never
\bigcirc <50% of the time	_
	on average, how much elective work do you have
to do? (Select one)	
None	
 ✓ < ¼ PA 	🔵 a PA

	al have the f	following diagnostics available out of hou
Select all that apply)		Interventional radiology (Embolization)
24-hour MR		Ward-based USS
24-hour USS		
Interventional radiology (Nephros	stomy)	Flexi cysto on ward or clinic room
		to northerestown incorted? (Slide the
On a scale of 0 - 10, now eas ton)	sy is it to ge	t a nephrostomy inserted? (Slide the
) (Very easy)	It's OK	10 (Very difficult)
)		
6. On-site, what theatre ava i	ilability is tl	here out of hours? (Select one)
◯ General emergency theatre	-	24-hour urological theatre
atre? (Slide the button)		
) (Very easy)	It's OK	10 (Very difficult)
0 (Very easy)	It's OK	10 (Very difficult)
)		
8. On-site, does your hospit a		10 (Very difficult)
8. On-site, does your hospit a		
8. On-site, does your hospita ours? (Select one)		
8. On-site, does your hospita ours? (Select one) General theatre staff only		
8. On-site, does your hospita ours? (Select one) General theatre staff only 24-hour urological theatre staff On-call urological theatre staff	al have the f	following theatre staff available out of
 8. On-site, does your hospitations? (Select one) General theatre staff only 24-hour urological theatre staff On-call urological theatre staff 9. Which of these conditions 	al have the f	following theatre staff available out of
 8. On-site, does your hospitations? (Select one) General theatre staff only 24-hour urological theatre staff On-call urological theatre staff 9. Which of these conditions 	al have the f	following theatre staff available out of
8. On-site, does your hospita ours? (Select one) General theatre staff only 24-hour urological theatre staff On-call urological theatre staff 9. Which of these conditions ours? (Select all that apply)	al have the f	following theatre staff available out of re to attend, in person, to deal with out of
 8. On-site, does your hospitations? (Select one) General theatre staff only 24-hour urological theatre staff On-call urological theatre staff 9. Which of these conditions tours? (Select all that apply) Simple urethral catheter 	al have the f	Following theatre staff available out of
 8. On-site, does your hospitations? (Select one) General theatre staff only 24-hour urological theatre staff On-call urological theatre staff 9. Which of these conditions ours? (Select all that apply) Simple urethral catheter Difficult urethral catheter Supra-pubic catheter insertion 	al have the f	Following theatre staff available out of The to attend, in person, to deal with out of The fixation of testicular torsion The insertion of a double J stent
 8. On-site, does your hospitation ours? (Select one) General theatre staff only 24-hour urological theatre staff On-call urological theatre staff 9. Which of these conditions ours? (Select all that apply) Simple urethral catheter Difficult urethral catheter Supra-pubic catheter insertion 	al have the f	Following theatre staff available out of ve to attend, in person, to deal with out of Fixation of testicular torsion Insertion of a double J stent None of these, normally
General theatre staff only General theatre staff only 24-hour urological theatre staff On-call urological theatre staff 9. Which of these conditions fours? (Select all that apply) Simple urethral catheter Difficult urethral catheter Supra-pubic catheter insertion 0. Where are your urgent ca	al have the f	Following theatre staff available out of ve to attend, in person, to deal with out of Fixation of testicular torsion Insertion of a double J stent None of these, normally

\ast 91. Do you have do a daytime ward round on the urological patients when you are on call at weekends? (Select one)

 \bigcirc Yes both days

 \bigcirc Saturday but not Sunday unless called

 \bigcirc No, I come in only if called

Weekend ward rounds - see both days

92. Which patients do you see each day on the weekend?

- \bigcirc I see all urology patients
- \bigcirc I see all emergencies, and sick patients routinely
- \bigcirc I see emergencies, and sick patients if requested
- \bigcirc I see emergency admissions only
- \bigcirc I do a telephone ward round and see those needing review

Weekends ward rounds Saturday

93. Which patients do you see on a Saturday?

- \bigcirc I see all urology patients
- \bigcirc I see all emergencies, and sick patients routinely
- \bigcirc I see emergencies, and sick patients if requested
- \bigcirc I see emergency admissions only
- \bigcirc I do a telephone ward round and see those needing review

Weekend ward rounds - accompanying staff						
94. On a scale of 0 weekends? If you ((Slide the button)	do a ward i	-				
0 hours		5		1	0 hours	
95. Who accomp (Select all that a Junior colleague Senior colleague Nurse No one	a pply) es (AHP, FY, L	ED, CT, ST, SA		len you hav	e to do one	out of hours?
96. How frequently each of these envi		-	• • •		urs ward r	ound in
	Never	Rarely	Occasionally	Regularly	Always	Not applicable
On the urology ward	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
On the Surgical Admission Unit	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
On outlying wards	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Out of hours facilities 2

97. How much confidence do you have in those around you whilst you are on-call? (Select one for each question)

	No confidence	Little confidence	Appropriately supportive	Very confident	Absolute confidence	I'd rather not say
FY doctors	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
CTs	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
AHPs	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
STs	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
SAS Urologists	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Consultants	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Accident and emergency	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Other surgeons	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Radiological colleagues	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
On-call managers	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

98. On a scale of 0 - 10, overall, how much stress do you experience due to the support you have available to you when you are on-call out of hours? (Slide the button)

0 (No stress)	Appropriate stress	10 (Extreme stress)	
0			

99. How much stress does managing the following conditions generate for you, or would generate if you were called to see someone with the condition, when you were on-call? (Select one for each question)

	Extreme stress	Significant stress	Appropriate stress	Minimal Stress	No stress at all	I've not come across this
Acute scrotum	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Testicular torsion	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Priapism	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Penile fracture	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Fournier's gangrene	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Urosepsis	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Obstructive renal failure	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Clot retention	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Urethral disruption	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Ruptured bladder	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Renal trauma	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Ureteric injury	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Polytrauma	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Post-operative bleeding	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

100. On a scale of 0 - 10, overall, how much stress do you experience when you are managing urological conditions out of hours? (Slide the button)

0 (No stress)

Appropriate stress

10 (Extreme stress)

101. How much stress does managing the following conditions generate for you, or would generate if you were called to see someone with the condition, when you were on-call? (Select one for each question)

	Extreme stress	Significant stress	Appropriate stress	Minimal Stress	No stress at all	Outside my experience
Emergency orchiopexy	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Winter shunt	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Repair of penile fracture	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Debriding Fournier's gangrene	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Grafting genital skin loss	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Evacuation of retained clots	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Reimplant for ureteric injury	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Boari flap for ureteric injury	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Repair of bladder rupture	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Emergency nephrectomy	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Packing of a bleeding organ	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Doing an urgent laparotomy	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
02. On a scale of (perating out of h				lo you expe	rience whe	n you are
0 (No stress)		Appropriate	stress	10 (Extrem	e stress)	
03. Being on-call 0, how is your exj e? (Slide the but	perience o			-		
		As expec	ted	10 (Muc	h worse)	

104. Please rate, in order, which of these generates the most anxiety about patient safety for you when you are on call? (Move options into the most important at the top and least important to the bottom using the up and down arrows)

Lack of experience/knowledge
Lack of diagnostic support
Lack of colleague support
Lack of managerial support

105. We normally expect, or are expected to, be able to function appropriate to our experience out of hours. On a scale of 0 - 10, how often do you have to provide support for a colleague at the same grade when on call? (Slide the button)

0 (Never)	Occasionally	10 (Regularly)	
0			

106. In your opinion, how disruptive is on-call working when considering these aspects of your life (Select one for each question)

	It is not an issue for me	Minor disruption	Occasional disruption	Regular disruption	It is a major issue for me
My work/life balance	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Managing childcare/other caring	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Managing life	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
My relationship	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

107. Overall, on a scale of 0 - 10, how much disruption to your life does being oncall cause? (Slide the button)

0 (No disruption) Occasionally disruption 10 (Major disruption)

108. In your opinion, how problematic is on-call to your wellbeing? How does it affect the following (Select one for each question)

	It is not an issue for me	Minor disruption	Occasional disruption	Regular disruption	It is a major issue for me
Your sleep quality	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Your stamina	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Your efficiency at work	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Your mental health	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

. Overall, on a scale ide the button)	of 0 - 10, how problema	tic is being on-call to your wellbei
0 (Not an issue)	Occasionally problematic	10 (A major issue)
b. Overall, on a scale button)	of 0 - 10, what is your gi	obal view about being on call? (Sl
0 (I hate it!)	Its part of the job	10 (I really enjoy it!)

Your perception of your current stress levels

111. Now we have a significant amount of information about your working practice we would also like to ask about your feelings and thoughts in the last month. In each case, please indicate how often you felt or thought a certain way. (Select one for each question)

	Never	Almost never	Sometimes	Fairly often	Very often
How often have you been upset because of something that happened unexpectedly?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
How often have you felt that you were unable to control the important things in your life?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
How often have you felt nervous and "stressed"?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
How often have you felt confident about your ability to handle your personal problems?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
How often have you felt that things were going your way?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Copy of page: Your perception of your current stress levels

112. Again, in the last month, please indicate how often you felt or thought a certain way. (Select one for each question)

	Never	Almost never	Sometimes	Fairly often	Very often
How often have you found that you could not cope with all the things that you had to do?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
How often have you been able to control irritations in your life?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
How often have you felt that you were on top of things?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
How often have you been angered because of things that were outside of your control?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
How often have you felt difficulties were piling up so high that you could not overcome them?	\bigcirc	\bigcirc	\bigcirc	0	0

Thank you for at least considering this survey. We are sorry you didn't take part.

Thank you for taking part in this survey

The purpose of this study was to determine those factors in on-call activity which affected individual's stresses consequent upon out-of-hours working, and to help understand those paradigms of care that minimised and maximised that stress. The results of this study will help determine how out of hours working could be modified to make it less stressful and to identify, organizational and training needs that would equip urologists better for this component of their contracted work. As on-call activity is a very contentious issue for many urologists, it is hoped this work will help support change to encourage greater retention of urologists within the NHS.

If any aspect of this survey has affected you adversely then you can contact the survey lead, <u>Steve Payne</u>, or there are a number of organisations that can offer guidance and support:

NHS Practitioner Health Royal College of Surgeons of England Royal College of Surgeons of Edinburgh