



MEDICAL TRAINING SURVEY

2025 Report
The Royal Australasian
College of Surgeons

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2025 MEDICAL TRAINING SURVEY

Medical Training Survey data is being used in academic research, shaping trainee decisions and – most importantly - being used to improve training. This is exactly what we hoped for.

Since 2019, trainees have been using their voice, in their survey. Through the MTS, they are highlighting what is going well in medical training in Australia and safely calling out where action is needed.

Many of the most recent generation of medical trainees adding their voice to this important data-set had not started medical school when the MTS was established. Seven years on, many of the trainees who lobbied hard to create the MTS are specialists and leaders in the profession. Over time, the MTS has been absorbed into the everyday fabric of medical training.

This year, more than 18,000 trainees made time to do the MTS to tell us what's working and what's not. In 2025 more IMGs than ever before shared their perspectives.

Once again, the MTS results tell us what's going well in training and what needs to improve. MTS results year on year are remarkably consistent. There are areas of increasing strength and significant issues that stubbornly persist.

There are improvements in clinical supervision, orientation, teaching, education and training on patient safety is again high, with 83% of trainees agreeing they would recommend their training position and workplace as a place to train.

But the fault lines in the culture of medicine run deep. Unacceptably, the rate of bullying, discrimination, harassment (including sexual harassment) and racism sits stubbornly at an average of 30%, and nearly twice that (56%) for Aboriginal and Torres Strait Islander trainees. Appallingly, 38% of Aboriginal and Torres Strait Islander trainees reported experiencing and/or witnessing racism.

Work across the profession and the health sector to improve cultural safety and address racism remains urgent and essential.

Once again, there is nuance in these data, revealing the complexity of the workplace environment and variations between different groups of trainees. Interns and specialist non-GP trainees report having witnessed and/or experienced unacceptable behaviours nearly 20% more often than IMGs and GP trainees.

The source of the unacceptable behaviour experienced and/or witnessed is also changing, with a 10% drop longitudinally in senior medical staff as the source (56% in 2020 to 46% in 2025) and a nearly 10% rise in patients and/or patient families/ carers (38% in 2020 to 46% in 2025) as the source of the behaviour. Clearly, the deficits in the culture of medicine reported by trainees are firmly anchored to wider community attitudes and behaviours.

Once again, important themes are revealed when the longitudinal data set is explored through tailored searches in the online dashboard.

With strict confidentiality rules in place to protect trainees, the MTS online searchable database can reveal meaningful insights. Use it to compare trainees' feedback by specialty and jurisdiction. Take a deep dive into the culture and quality of training, and make comparisons across sites or specialties. The 2025 MTS results will be accessible in searchable form in early 2026 on the MedicalTrainingSurvey.gov.au website.

Each year, we refine some MTS questions to generate meaningful data that stakeholders can use more effectively to drive change. New insights in 2025 include:

- one in 10 of all trainees and one in six Aboriginal and Torres Strait Islander trainees indicated they are considering a career outside of medicine within the next 12 months
- there is a slight decrease in the number of trainees reporting a heavy or very heavy workload
- differentiation in questions for different cohorts of specialist trainee make it possible for colleges to pin point what is working and address what is not.

The MTS is a survey by trainees, for trainees. The stories they share through MTS feedback are compelling and important. With that, comes a wider shared responsibility across the health sector and the profession to maintain high standards of medical training and develop effective strategies to address what needs to change.



Dr Susan O'Dwyer
Chair, Medical Board of Australia

Background

INTRODUCTION

The Medical Training Survey (MTS) is a national, profession-wide survey of doctors in training in Australia. It is a confidential way to get national, comparative data to strengthen medical training in Australia. The MTS is conducted annually with doctors in training, with 2025 representing the seventh wave of data collection.

The objectives of the survey are to:

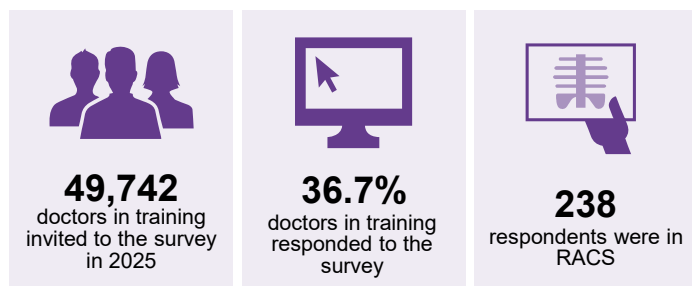
- promote better understanding of the quality of medical training in Australia
- identify how best to improve medical training in Australia, and

- identify and help deal with potential issues in medical training that could impact on patient safety, including environment and culture, unacceptable behaviours and poor supervision.

The Australian Health Practitioner Regulation Agency (Ahpra), on behalf of the Medical Board of Australia (the Board), commissioned EY Sweeney to undertake data collection and report on the results for the MTS.

METHOD

Data collection for the MTS involved receiving responses to an online survey from $n = 18,276$ doctors in training, with $n = 17,622$ responses eligible for analysis (i.e. currently training in Australia) between 4 August and 9 October 2025.



Different versions of the survey were used to reflect the particular training environment of doctors who are at different stages in their training. Doctors in training answered questions about their experiences in their workplace. This could be the doctor in training's current setting, workplace, placement or rotation, or might be a previous setting, if they have only been practising or training in their current setting for less than two weeks.

For this report, results for The Royal Australasian College of Surgeons (RACS) are presented at an overall level. To explore results within RACS further, please visit medicaltrainingsurvey.gov.au/results.

INTERPRETING THIS REPORT

This report provides key results based on $n = 238$ doctors in training at the RACS compared against national results ($n = 17,622$) of all eligible doctors in training (i.e. currently training in Australia).

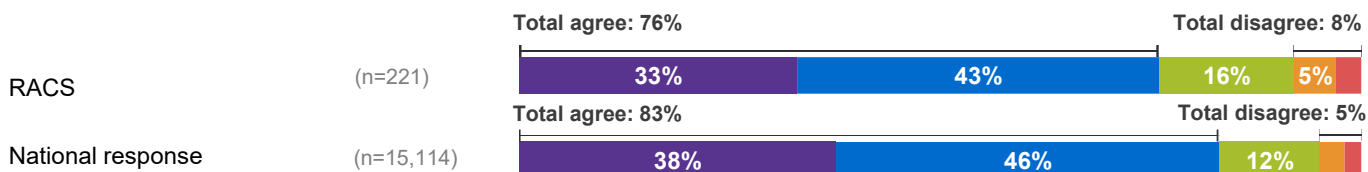
Bases exclude 'not applicable' responses or where the respondent skipped the question. Data in this report are unweighted. Labels on stacked charts are hidden for results 3% or less. Results with base sizes of less than $n = 10$ are suppressed.

Data percentages displayed throughout the report are rounded to the nearest whole number. As such, if there is an expectation for a given chart or table that all percentages stated should add to 100% or nets should equal to the sum of their parts, this may not happen due to rounding.

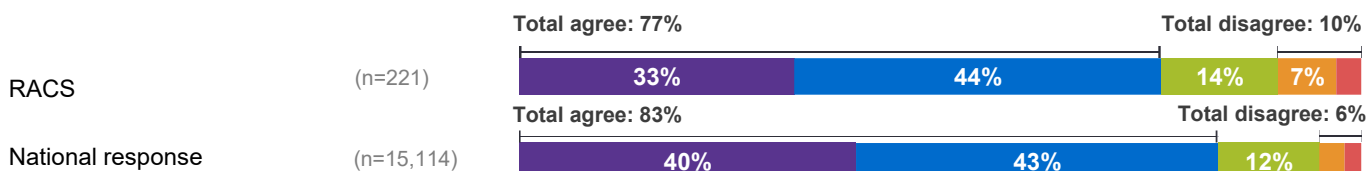
Executive summary

OVERALL SATISFACTION

I would recommend my current training position to other doctors



I would recommend my current workplace as a place to train



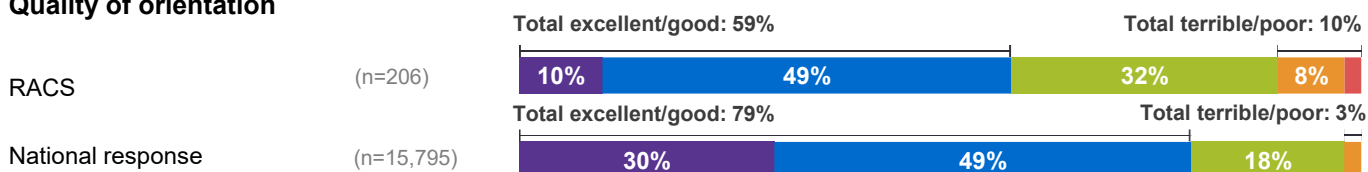
Key: ■ Strongly agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

Base: Total sample

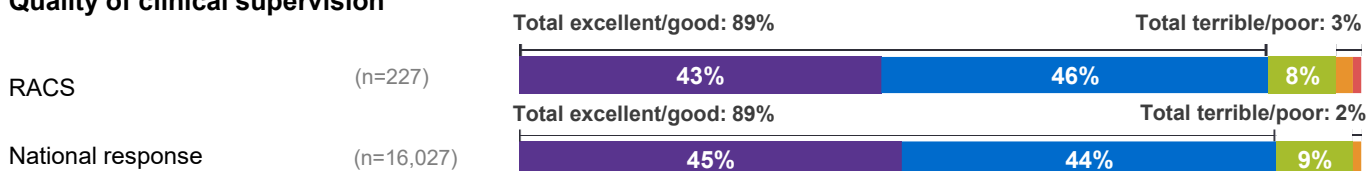
Q50. Thinking about your setting, to what extent do you agree or disagree with the following statements?

HIGHLIGHTS

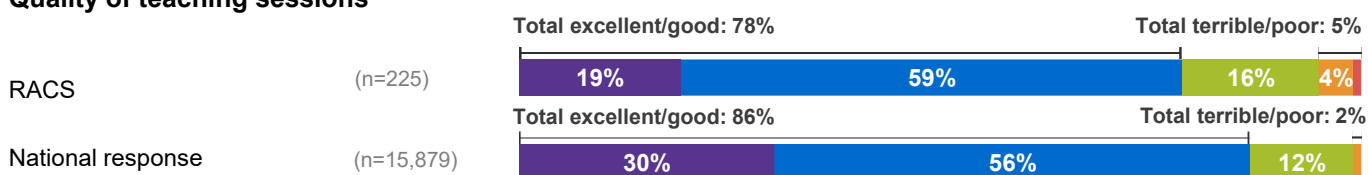
Quality of orientation



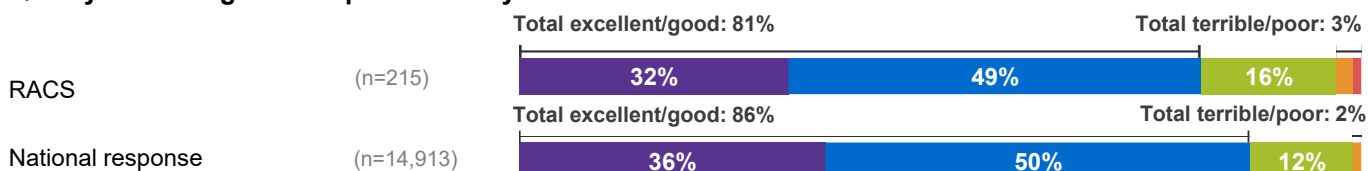
Quality of clinical supervision



Quality of teaching sessions



Quality of training to raise patient safety concerns



Key: ■ Strongly agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

Base: Orientation received | Q27B. How would you rate the quality of your orientation?

Base: Have a supervisor | Q31. For your setting, how would you rate the quality of your clinical supervision / peer review?

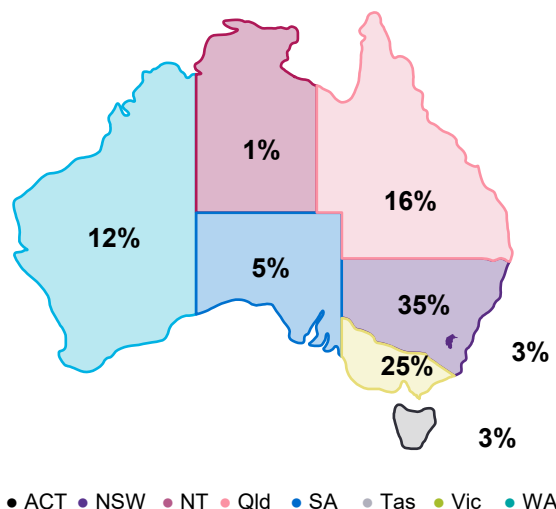
Base: Total sample | Q39. Overall, how would you rate the quality of the teaching sessions?

Base: Received training on how to raise concerns about patient safety | Q48. In your setting, how would you rate the quality of your training on how to raise concerns about patient safety?

Profile of RACS trainees

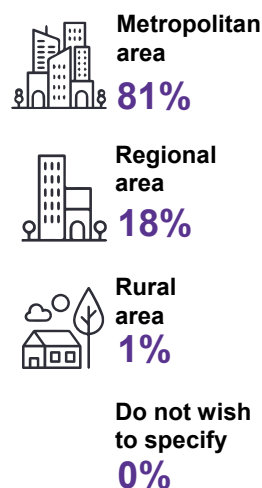
SETTING

State/Territory



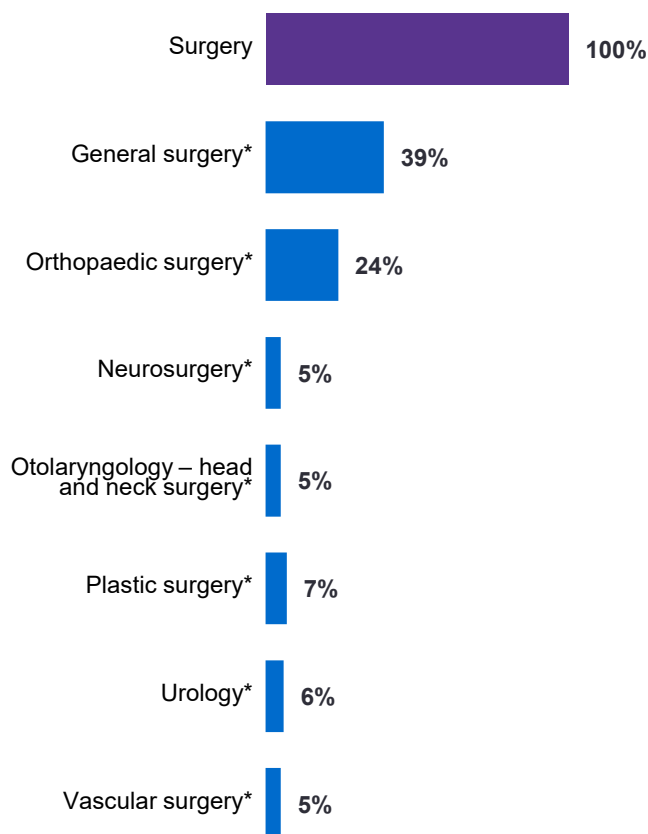
Base: Total sample (2025 RACS: n = 238)
Q4. In which state or territory is your current term/rotation/placement based?

Region



Base: Total sample (2025 RACS: n = 238)
Q6. Is your current setting in a...?

Current rotation / term / position



Base: Total sample (2025 RACS: n = 238), fields with 10 or more responses shown. Note: fields marked with an * are subspecialties.

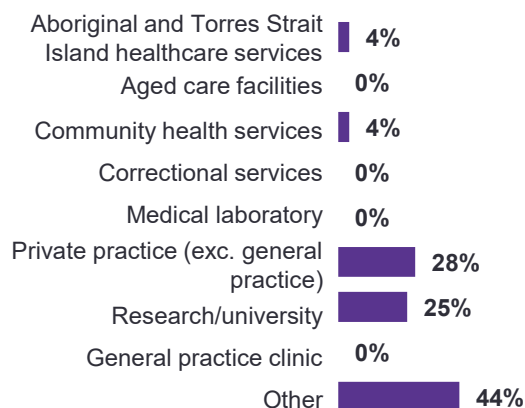
Q9a. Which area are you currently practising in? | Q9b. If applicable, which subspecialty area are you practising in?

Facility



Base: Total sample (2025 RACS: n = 238)
Q5A. Is your current position/term/rotation/placement predominantly in a hospital?

Additional settings worked in



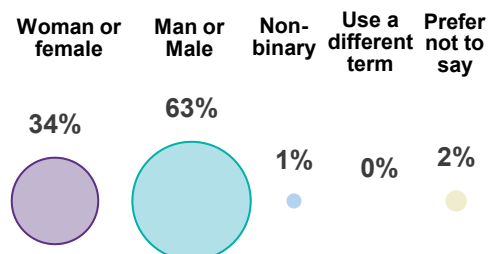
Base: Total sample excluding Not applicable (2025 RACS: n = 57)

Q5c. Select any additional settings you work in / Which settings do you work in?

Profile of RACS doctors in training

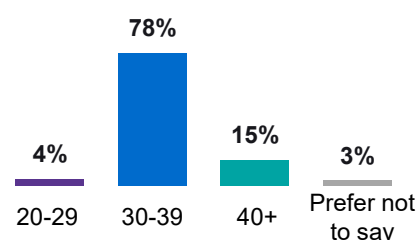
DEMOGRAPHICS

Do you identify as...



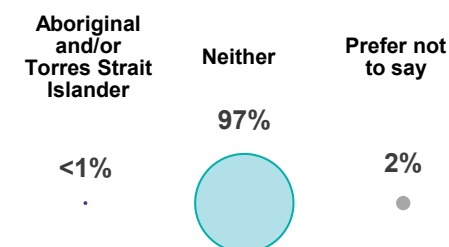
Base: Total sample (2025 RACS: n = 216)
Q55. Do you identify as...?
Note: For this question, answers that are less than 1% and have one or more responses have been shown as <1%

Age in years



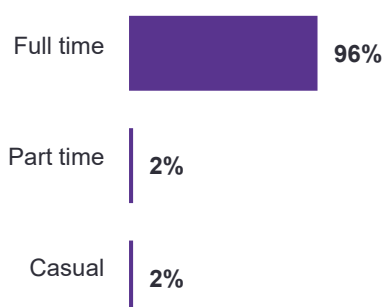
Base: Total sample (2025 RACS: n = 214)
Q56. What is your age?

Cultural background



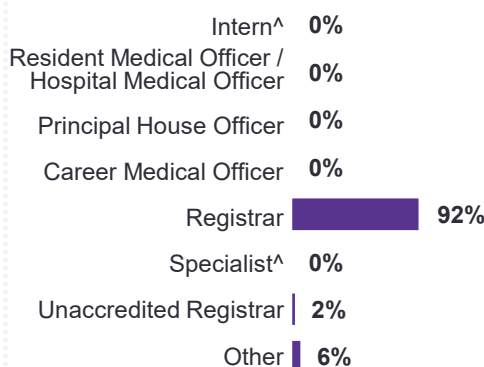
Base: Total sample (2025 RACS: n = 220)
Q57. Do you identify as an Australian Aboriginal and/or Torres Strait Islander person?

Employment



Base: Total sample (2025 RACS: n = 238)
Q2. Are you employed:

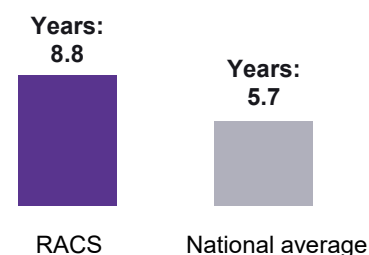
Role



Base: Total sample (2025 RACS: n = 238)
Q7. What is your current role in the setting?

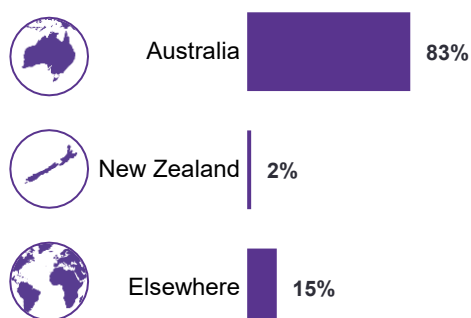
Postgraduate year

Postgraduate year average is



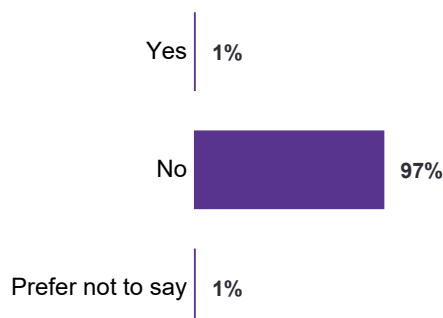
Base: Total sample (National: 2025 n = 17,622; RACS: 2025 n = 238)
Q1. What is your postgraduate year?

Primary degree



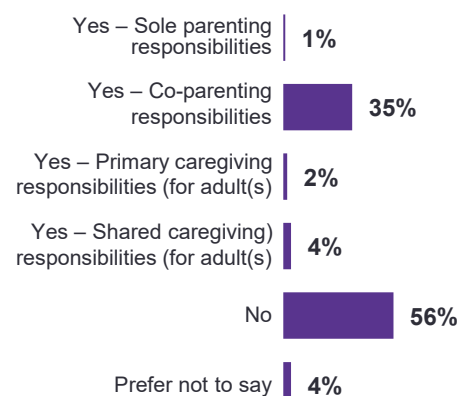
Base: Total sample (2025 RACS: n = 220)
Q58a. Did you complete your primary medical degree in Australia or New Zealand?

Do you identify as a person with a disability...



Base: Total sample (2025 RACS: n = 220)
Q60. Do you identify as a person with a disability?

Caring responsibilities



Base: Total sample (2025 RACS: n = 220)
Q61. During your usual work week, do you spend time providing unpaid care, help, or assistance for family members or others?

Profile of RACS doctors in training

SPECIALIST TRAINEES

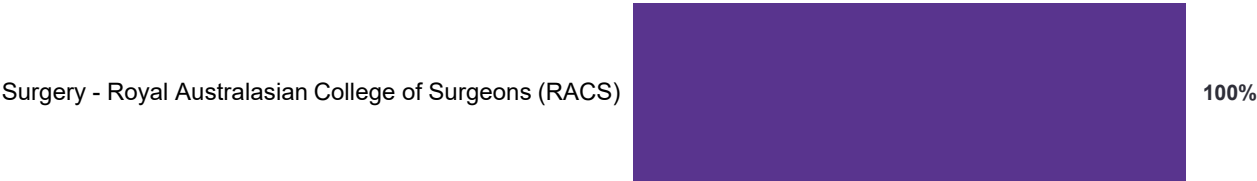
On average, specialist trainees in RACS have been in their training program for



Base: Specialist trainees (National: 2025 n = 7,093; RACS: 2025 n = 237)
Q15. How many years have you been in the College training program?

Training curriculum

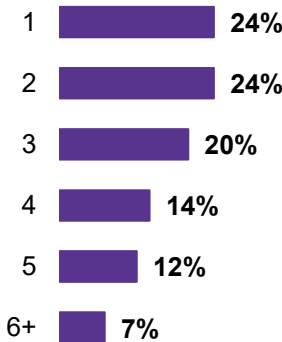
SPECIALIST TRAINING PROGRAM



Base: Specialist trainees (RACS: 2025 n = 238), fields with 10 or more responses shown.
Q14. Which specialist training program(s) are you doing?

The Royal Australasian College of Surgeons (RACS)

Year in surgical training

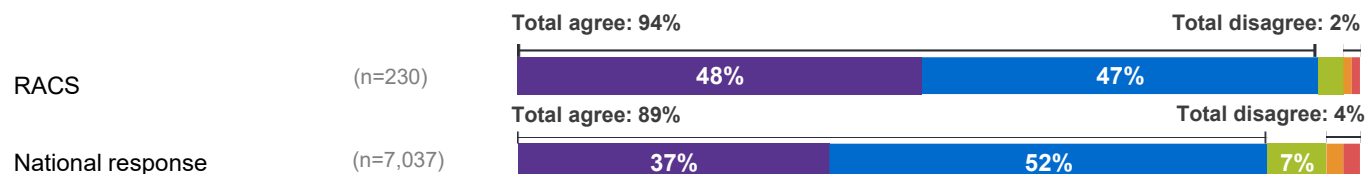


Base: RACS trainees who selected Surgery as a specialty (RACS: 2025 n = 237)
Q14g. You indicated that you have trained in the following specialist training program(s) at RACS. What year are you in surgical training?

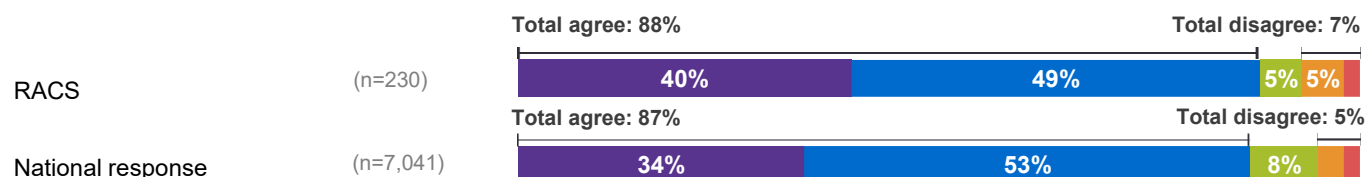
Training curriculum

TRAINING PROGRAM PROVIDED BY COLLEGE

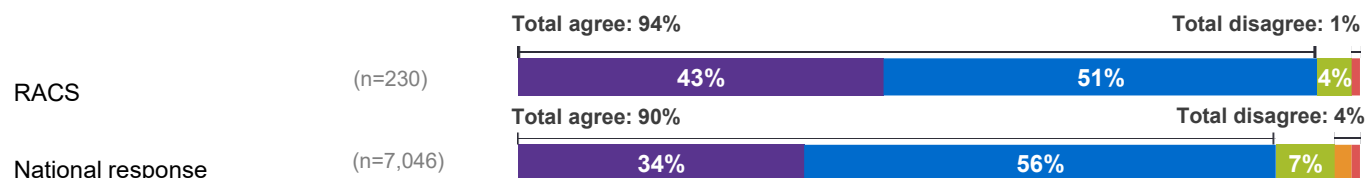
The College training program is relevant to my development



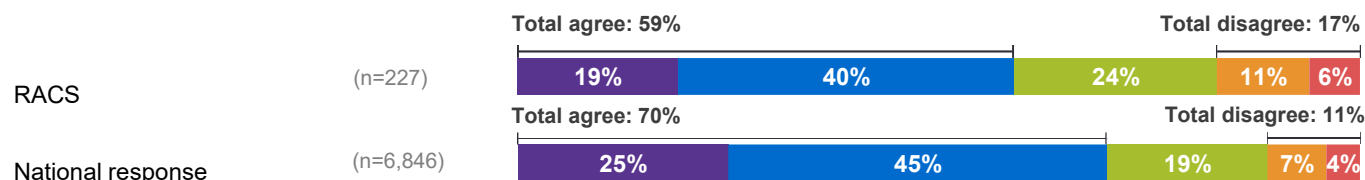
There are opportunities to meet the requirements of the training program in my current setting



I understand what I need to do to meet my training program requirements



The College supports flexible training arrangements



Key: ■ Strongly agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

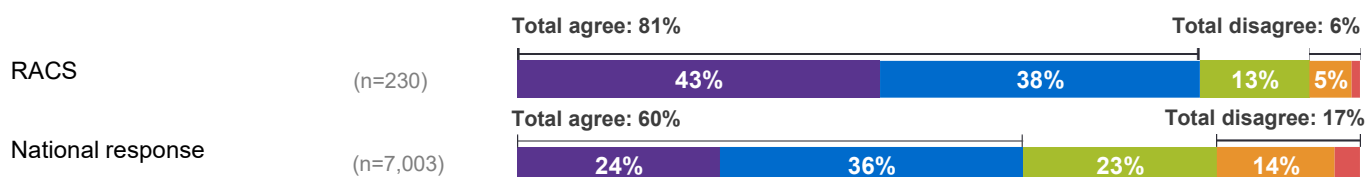
Base: Specialist trainees

Q21. Thinking about your [COLLEGE] training program, to what extent do you agree or disagree with each of the following statements?

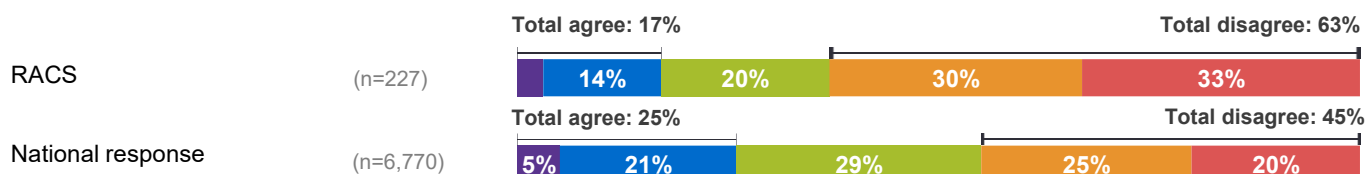
Training curriculum

Financial impact of training program

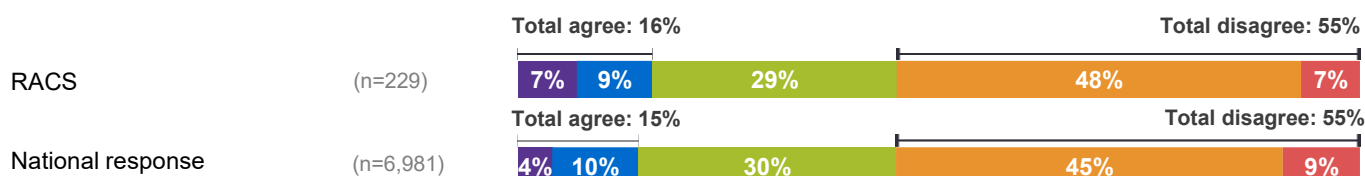
The financial cost of my College training program has led to stress



My College provides clear and accessible information about how my fees are spent



The cost of my College training program has been a barrier to my progression in the training program



Key:
 ■ Strongly agree
 ■ Agree
 ■ Neither agree nor disagree
 ■ Disagree
 ■ Strongly disagree

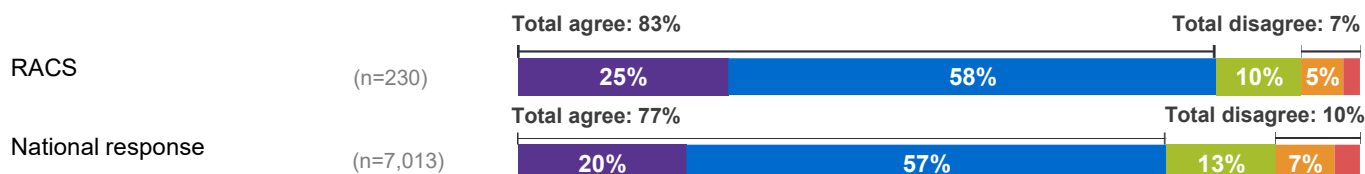
Base: Specialist trainees

Q21a. Thinking about your [COLLEGE] training program, to what extent do you agree or disagree with each of the following statements?

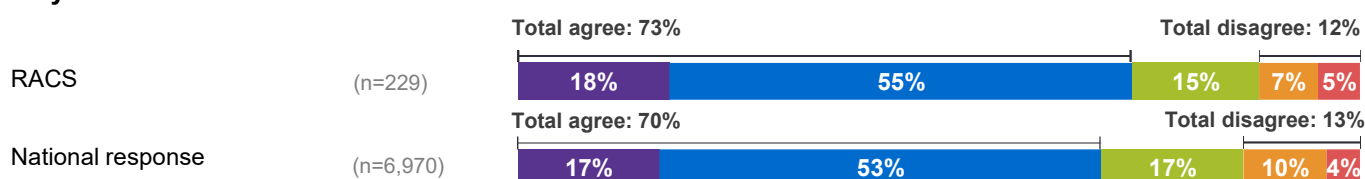
Training curriculum

COMMUNICATION WITH COLLEGE

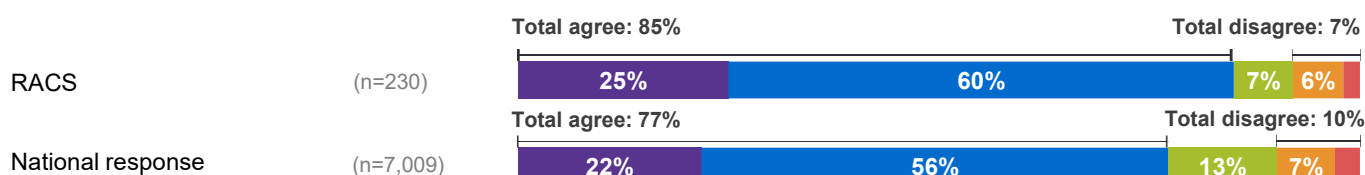
My College clearly communicates the requirements of my training program



My College clearly communicates with me about changes to my training program and how they affect me



I know who to contact at the College about my training program



Key: ■ Strongly agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

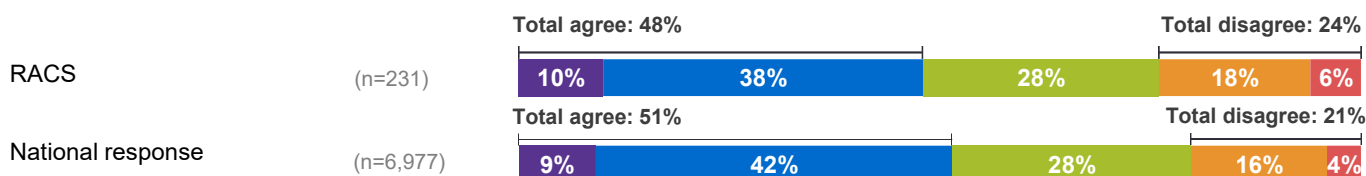
Base: Specialist trainees

Q22. Thinking about how [COLLEGE] communicates with you about your training program, to what extent do you agree or disagree with the following statements?

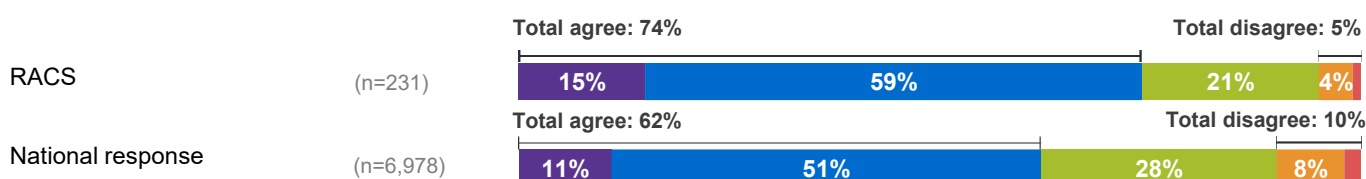
Training curriculum

ENGAGEMENT WITH COLLEGE

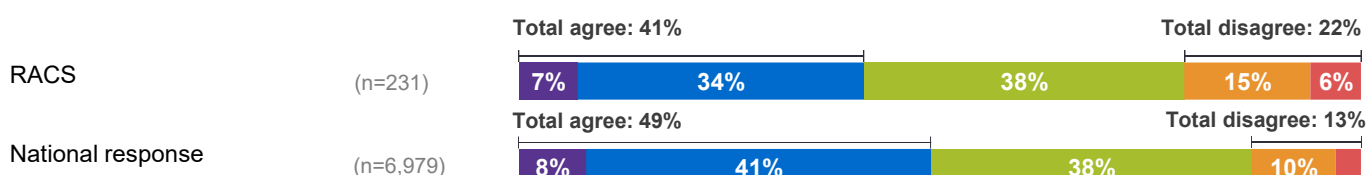
The College seeks my views on the training program



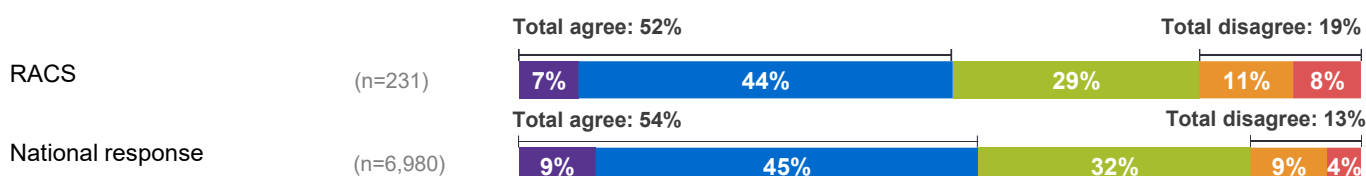
I am represented by doctors in training on the College's training and/or education committees



The College provides me with access to psychological and/or mental health support services



There are safe mechanisms for raising training/wellbeing concerns with the College



Key: ■ Strongly agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

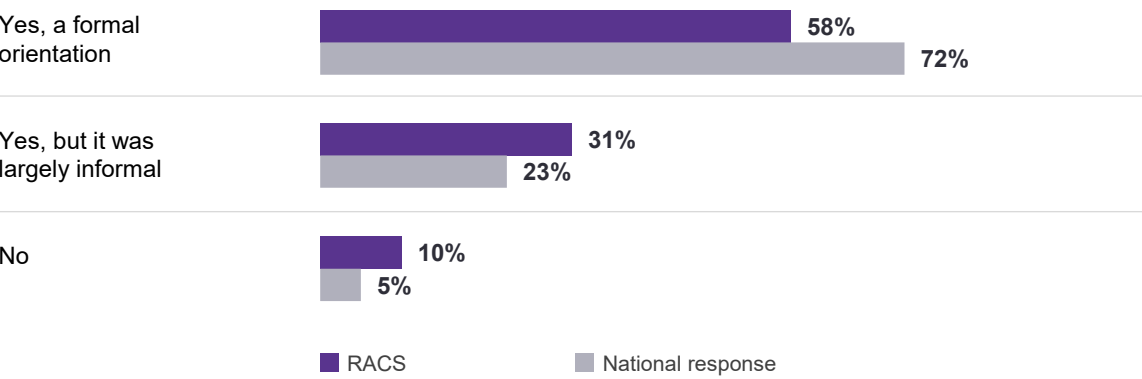
Base: Specialist trainees

Q25. Thinking about how [COLLEGE] engages with you, to what extent do you agree or disagree with the following statements?

Orientation

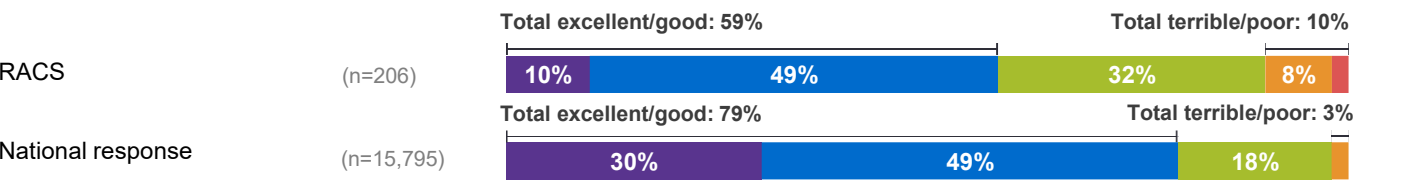
DID YOU RECEIVE AN ORIENTATION TO YOUR SETTING?

Doctors in training were asked questions about their experiences in their workplace. This could be the doctor in training’s current setting, workplace, placement or rotation, or might be a previous setting if they had only been practising or training in their current setting for less than two weeks.



Base: Total sample (National: 2025 n = 16,597; RACS: 2025 n = 230)
 Q27a. Did you receive an orientation to your setting?

HOW WOULD YOU RATE THE QUALITY OF YOUR ORIENTATION?



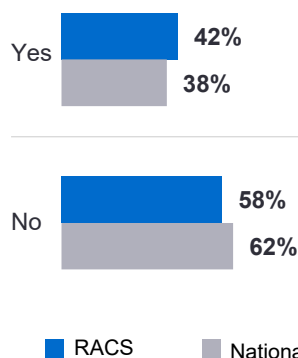
Key:
 Excellent
 Good
 Average
 Poor
 Terrible

Base: Received an orientation
 Q27b. How would you rate the quality of your orientation?

Assessment

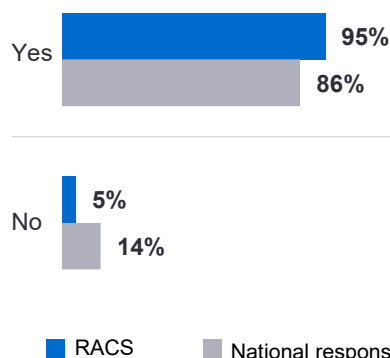
COLLEGE EXAMS

RACS trainees who have sat an exam(s) in the last 12 months...



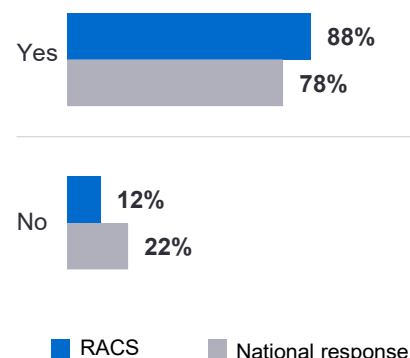
Base: Specialist trainees (National: 2025 n = 7,035; RACS: 2025 n = 231)
Q23a. In the last 12 months, have you sat one or more exams from...?

Of those who sat an exam(s) receive their results...



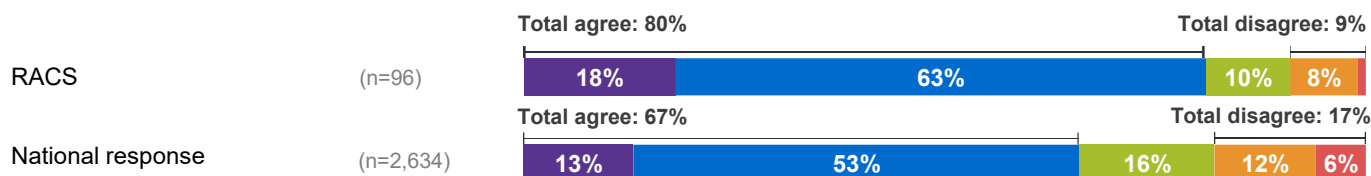
Base: Sat an exam (National: 2025 n = 2,662; RACS: 2025 n = 97)
Q23b. Have you received the results of your most recent exam from...?

Of those who received results, passed their exam(s)...

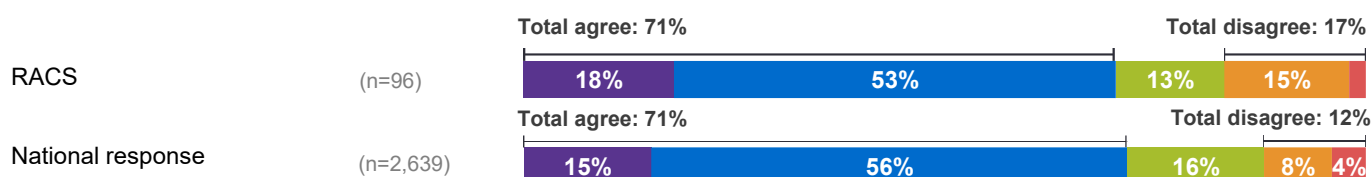


Base: Received results (National: 2025 n = 2,125; RACS: 2025 n = 89)
Q23c. Did you pass the exam for...?

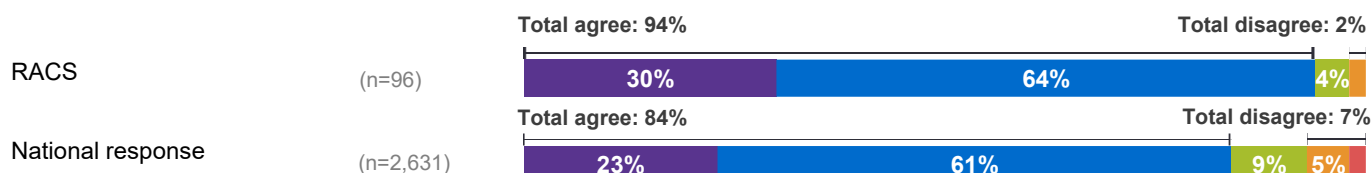
The exam(s) reflected the College training curriculum



The information the College provided about the exam(s) was accurate and appropriate



The exam(s) ran smoothly on the day



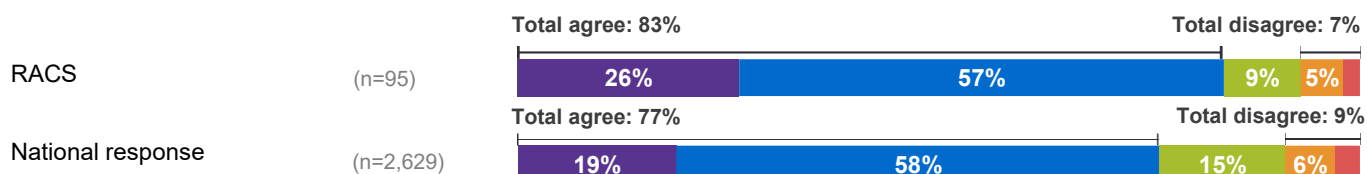
Key: Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree

Base: Specialist trainees who sat an exam
Q24. Thinking about all your [COLLEGE] exam(s) not just the most recent, to what extent do you agree or disagree with the following statements?

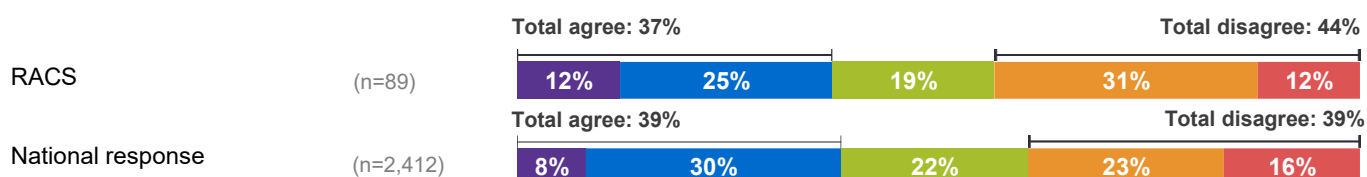
Assessment

COLLEGE EXAMS (continued)

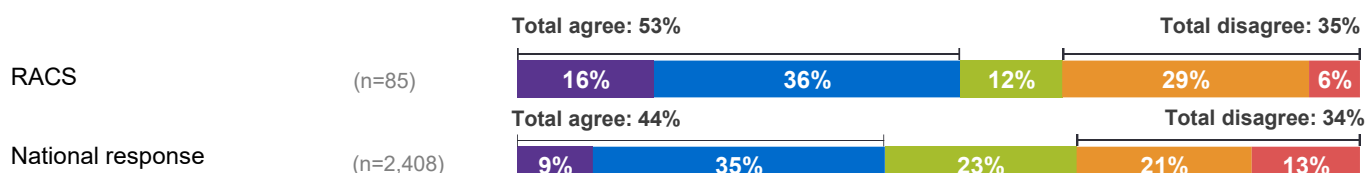
The exam(s) were conducted fairly



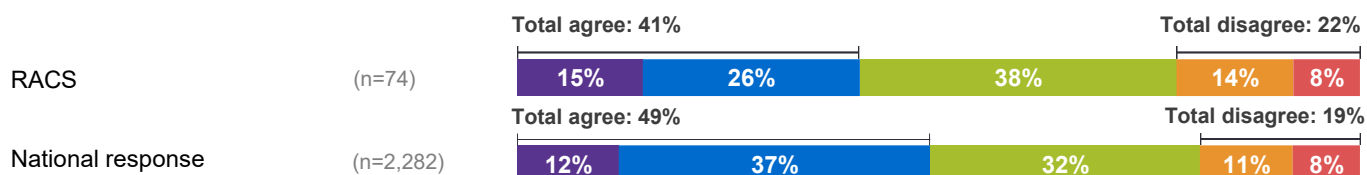
I received useful feedback about my performance in the exam(s)



The feedback is timely



I received support from my College when needed



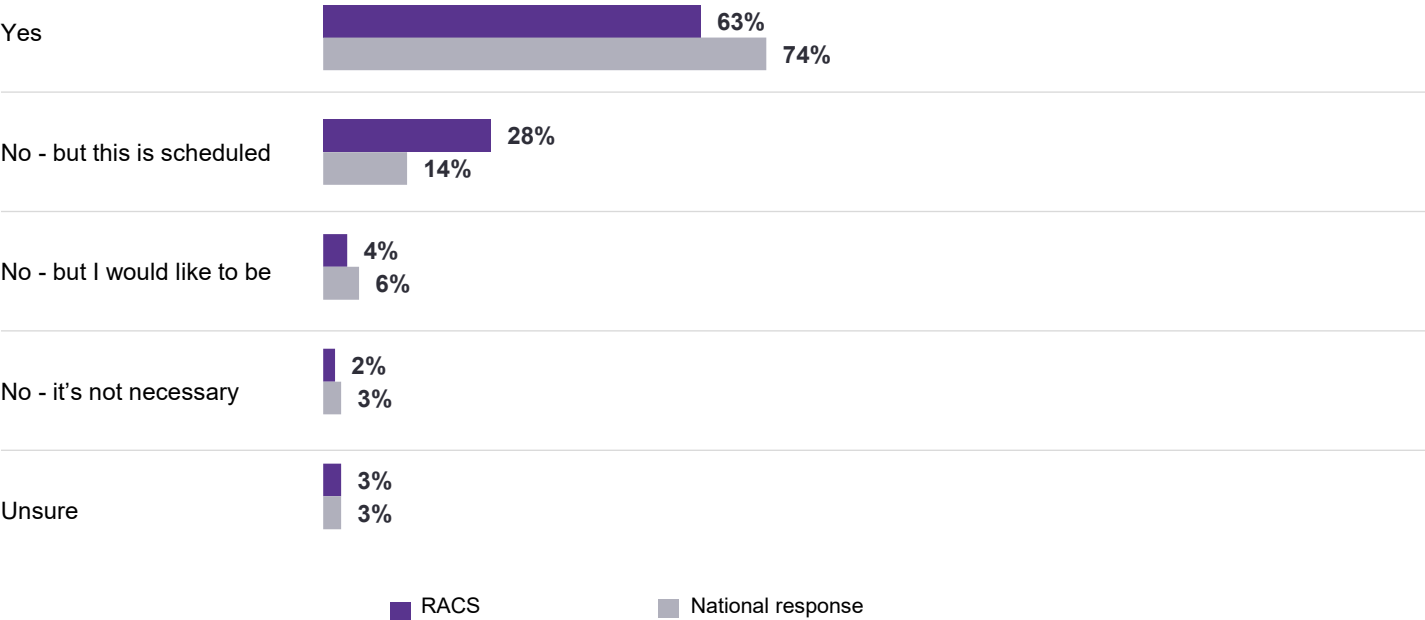
Key: ■ Strongly agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

Base: Specialist trainees who sat an exam

Q24. Thinking about all your [COLLEGE] exam(s) not just the most recent, to what extent do you agree or disagree with the following statements?

Assessment

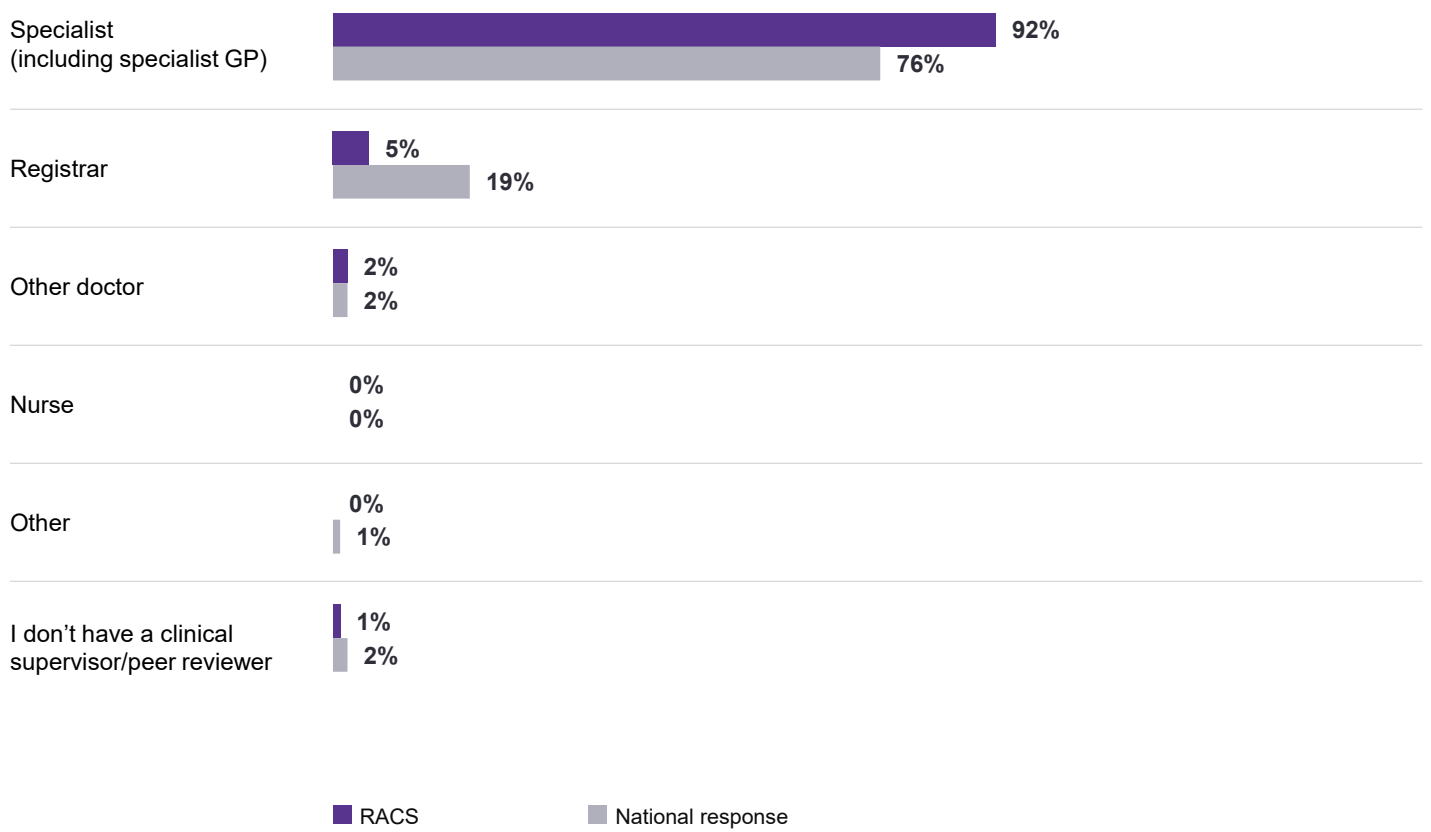
HAS YOUR PERFORMANCE BEEN ASSESSED IN YOUR SETTING?



Base: Prevocational and unaccredited trainees, specialist trainees and IMGs (National: 2025 n = 15,294 RACS: 2025 n = 229)
Q32. Has your performance been assessed in your setting?

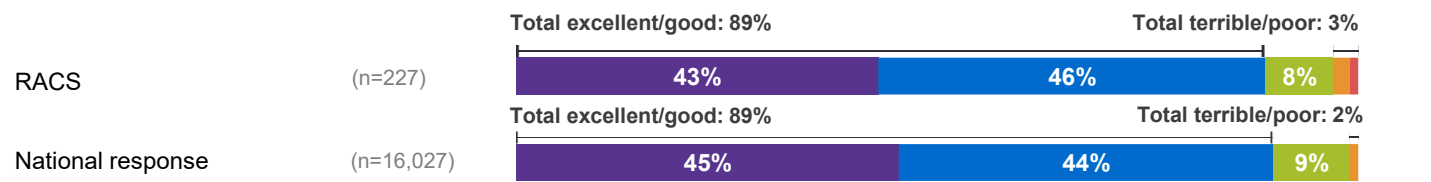
Clinical supervision

WHO MAINLY PROVIDES YOUR CLINICAL SUPERVISION?



Base: Total sample (National: 2025 n = 16,561; RACS: 2025 n = 230)
Q28. In your setting, who mainly provides your clinical supervision?

HOW WOULD YOU RATE THE QUALITY OF YOUR SUPERVISION?



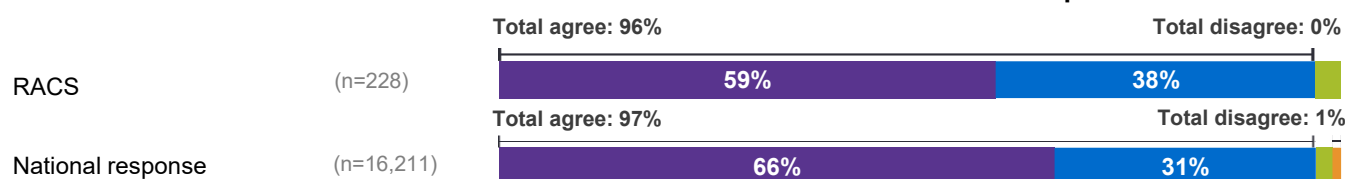
Key: ■ Excellent ■ Good ■ Average ■ Poor ■ Terrible

Base: Received supervision
Q31. For your setting, how would you rate the quality of your clinical supervision?

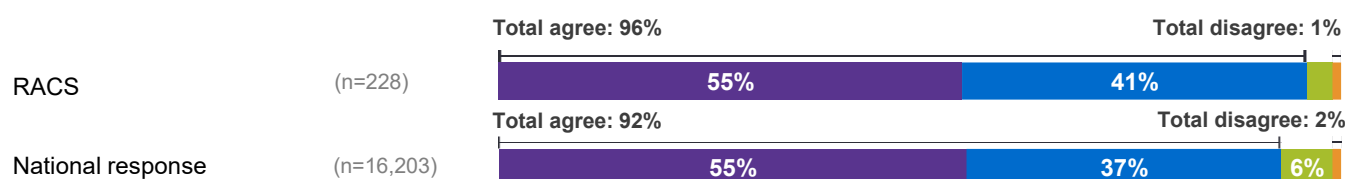
Clinical supervision

IF CLINICAL SUPERVISOR(S) ARE NOT AVAILABLE...

I am able to contact other senior medical staff IN HOURS if I am concerned about a patient



I am able to contact other senior medical staff AFTER HOURS if I am concerned about a patient



Key:
■ Strongly agree
 ■ Agree
 ■ Neither agree nor disagree
 ■ Disagree
 ■ Strongly disagree

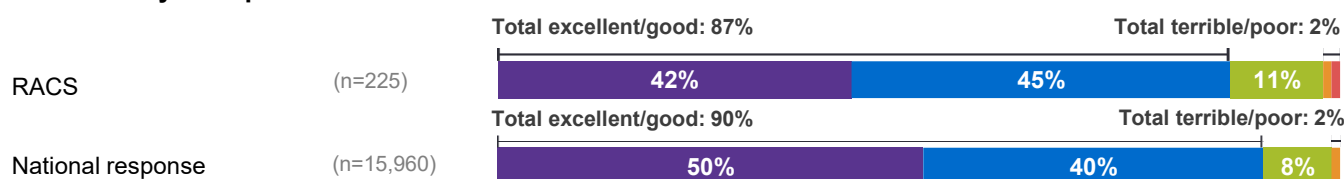
Base: Total sample

Q29. To what extent do you agree or disagree with the following statements?

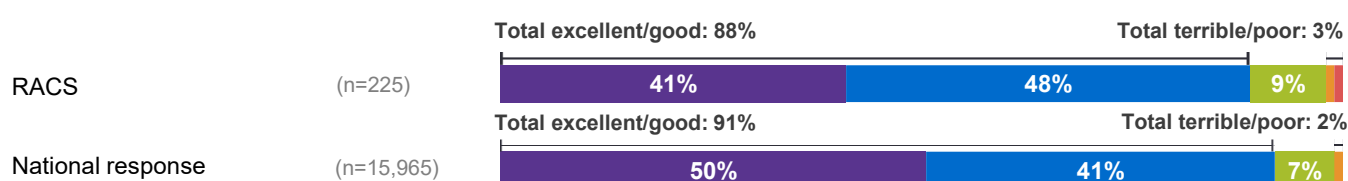
Clinical supervision

HOW WOULD YOU RATE THE QUALITY OF YOUR OVERALL CLINICAL SUPERVISION FOR:

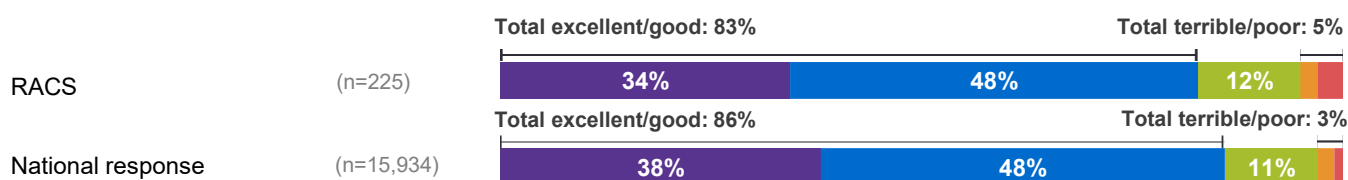
Accessibility of supervisor



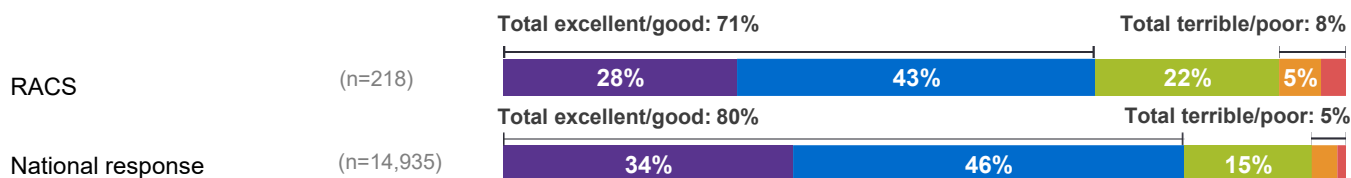
Helpfulness of supervisor



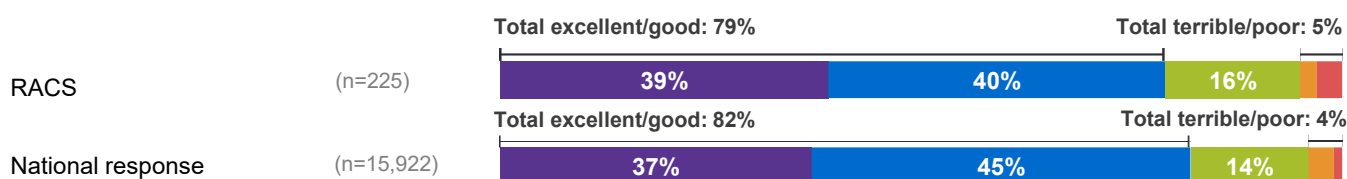
Ensuring your work is appropriate to your level of training



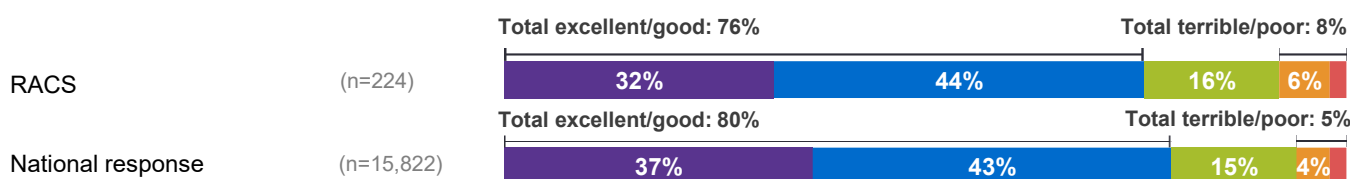
Completing workplace based assessments



Including opportunities to develop your skills



Supporting you to meet your training plan/pathway requirements



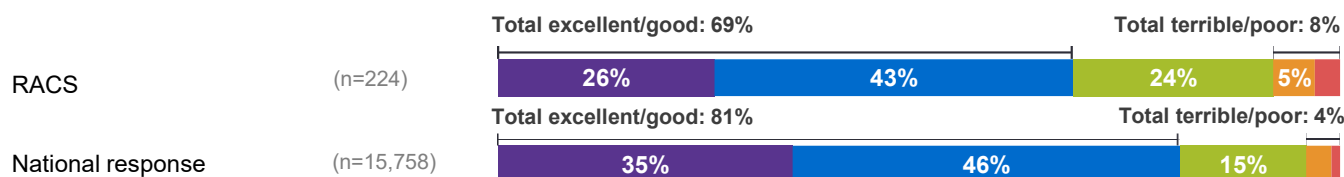
Base: Have a supervisor

Q30. In your setting, how would you rate the quality of your overall clinical supervision for...?

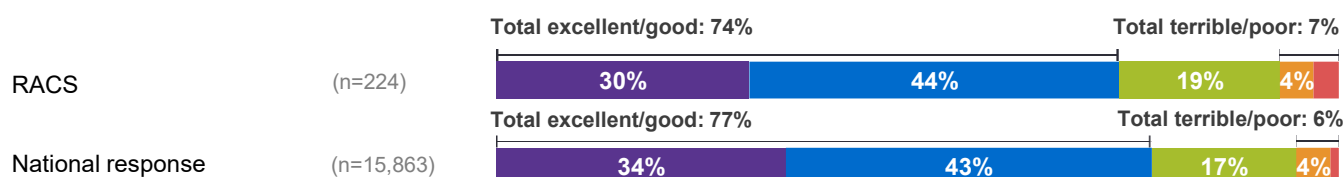
Clinical supervision

HOW WOULD YOU RATE THE QUALITY OF YOUR OVERALL CLINICAL SUPERVISION FOR:

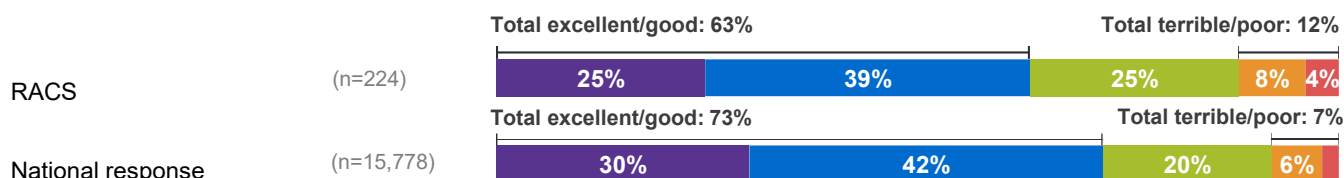
Usefulness of feedback



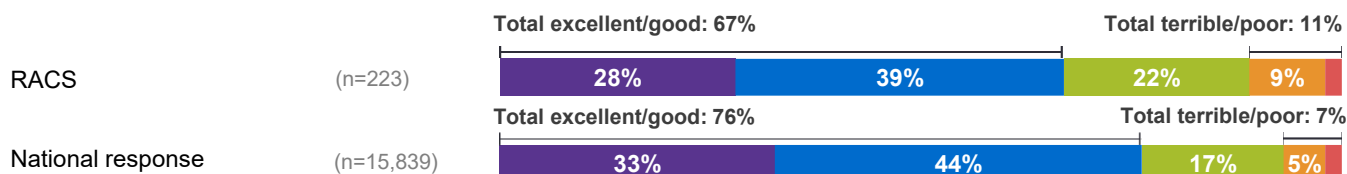
Regular, INFORMAL feedback



Regular, FORMAL feedback



Discussions about my goals and learning objectives

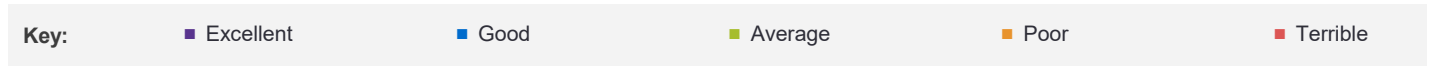
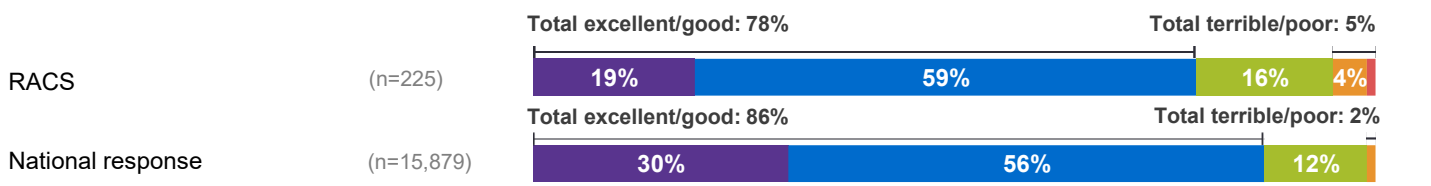


Base: Have a supervisor

Q30. In your setting, how would you rate the quality of your overall clinical supervision for...?

Access to teaching

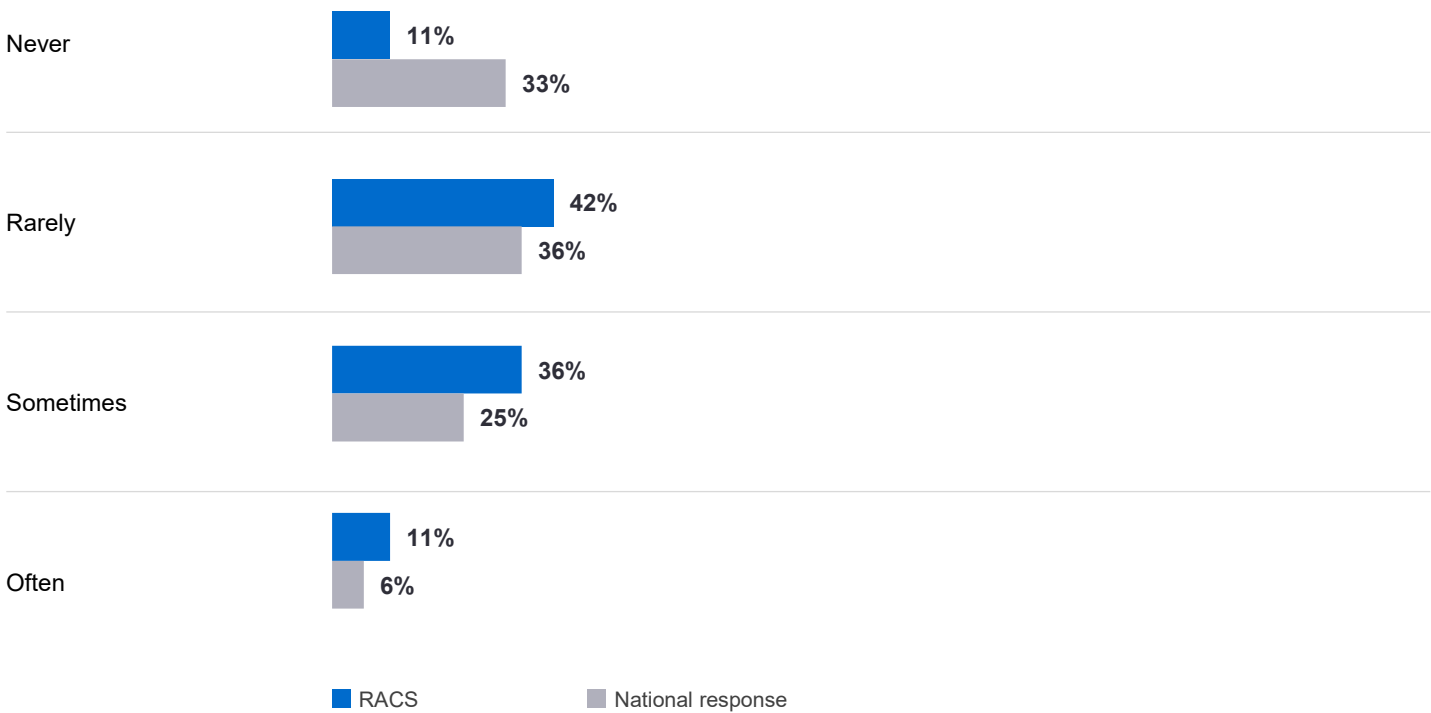
OVERALL, HOW WOULD YOU RATE THE QUALITY OF THE TEACHING SESSIONS?



Base: Total sample
Q39. Overall, how would you rate the quality of the teaching sessions?

TRAINING AND OTHER JOB RESPONSIBILITIES

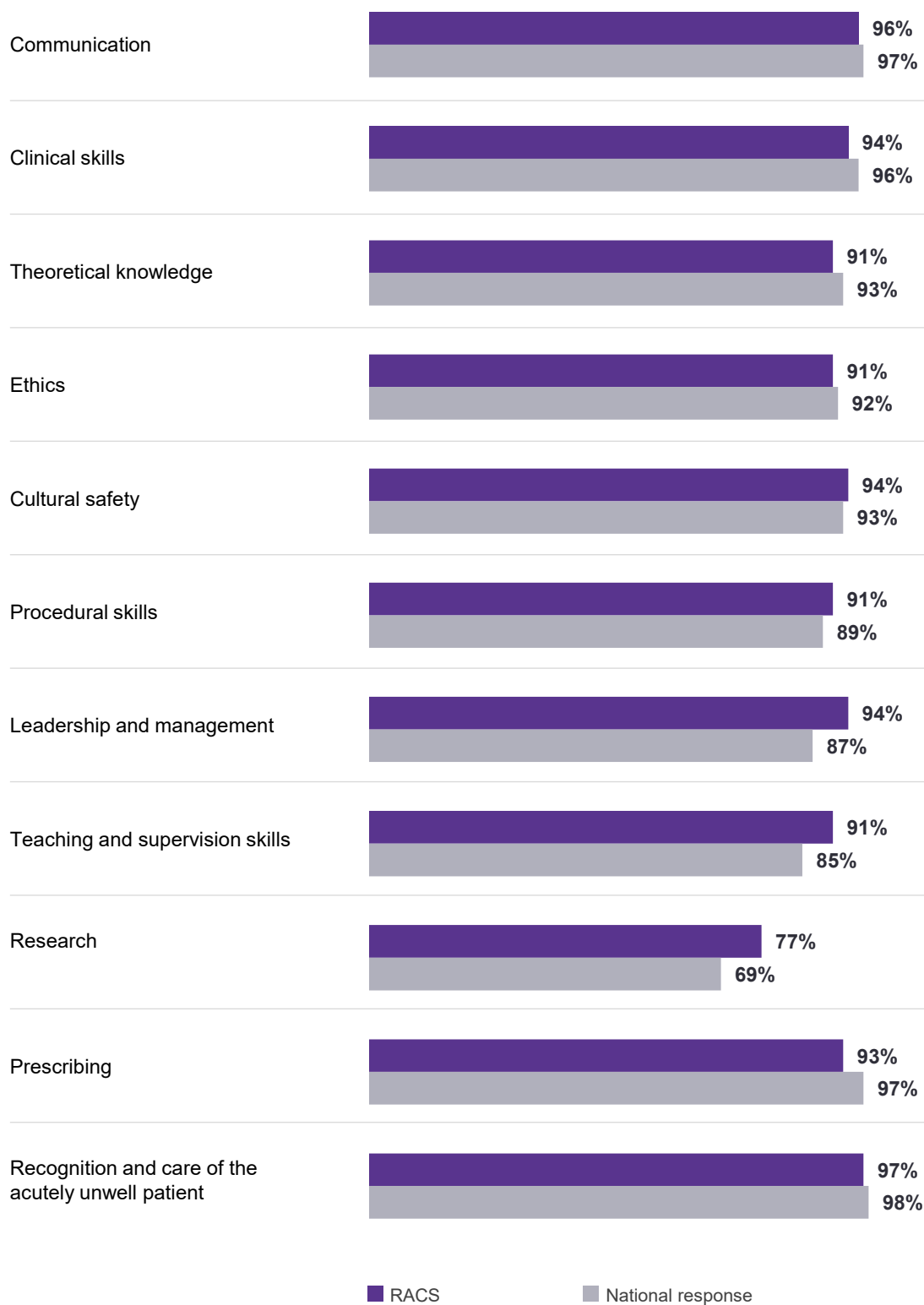
How regularly job responsibilities are preventing doctors in training from meeting training requirements



Base: Total sample (National: 2025 n = 16,049; RACS: 2025 n = 228)
Q36. Which of the following statements best describes the interaction between your training requirements and the responsibilities of your job? My job responsibilities...

Access to teaching

DO YOU HAVE SUFFICIENT OPPORTUNITIES TO DEVELOP YOUR KNOWLEDGE AND SKILLS IN: (% yes)



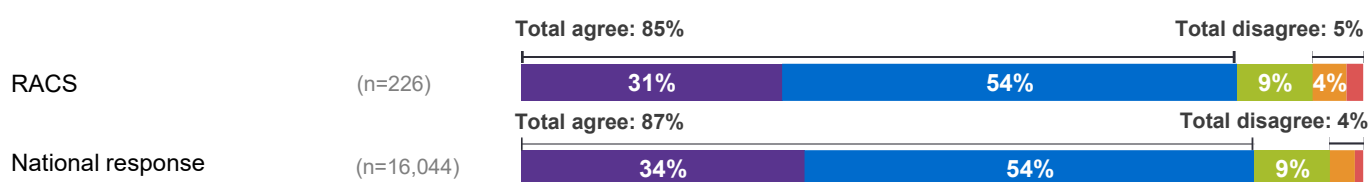
Base: Total sample (National: 2025 max n = 16,080 RACS: 2025 max n = 227)

Q35. Thinking about the development of your knowledge and skills, in your setting, do you have sufficient opportunities to develop your...?

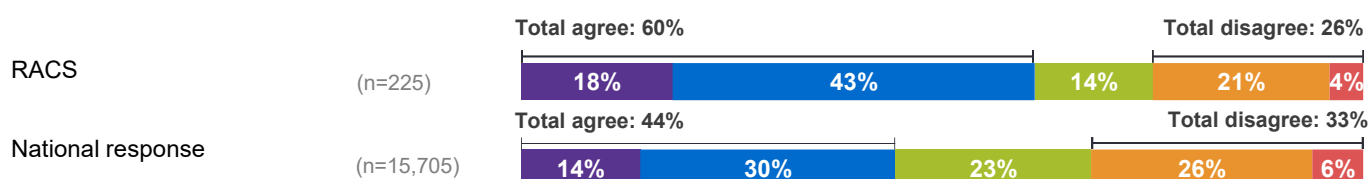
Access to teaching

DEVELOPMENT OF CLINICAL AND PRACTICAL SKILLS

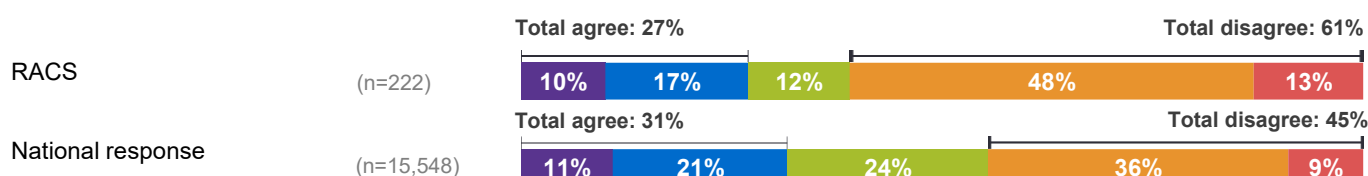
I can access the training opportunities available to me



I have to compete with other doctors for access to opportunities



I have to compete with other health professionals for access to opportunities



Key:
 ■ Strongly agree
 ■ Agree
 ■ Neither agree nor disagree
 ■ Disagree
 ■ Strongly disagree

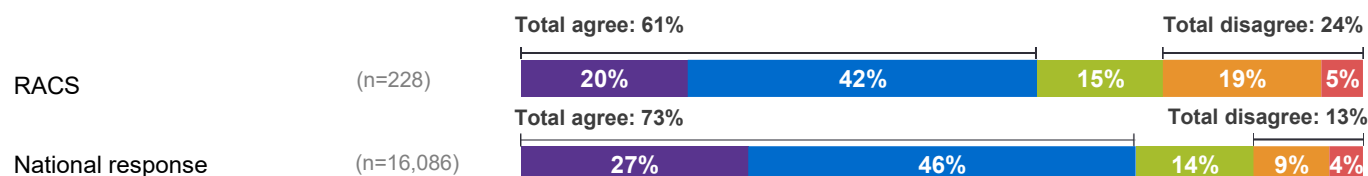
Base: Total sample

Q33. Thinking about the development of your skills, to what extent do you agree or disagree with the following statements?

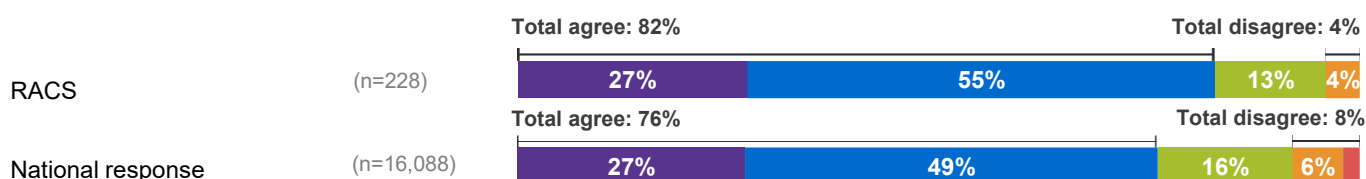
Access to teaching

ACCESS TO TEACHING AND RESEARCH

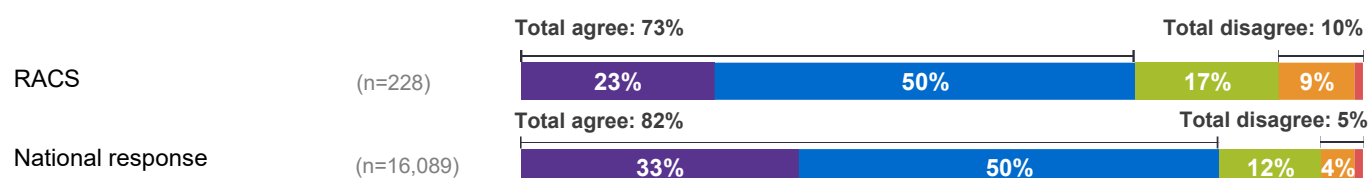
I have access to protected study time/leave



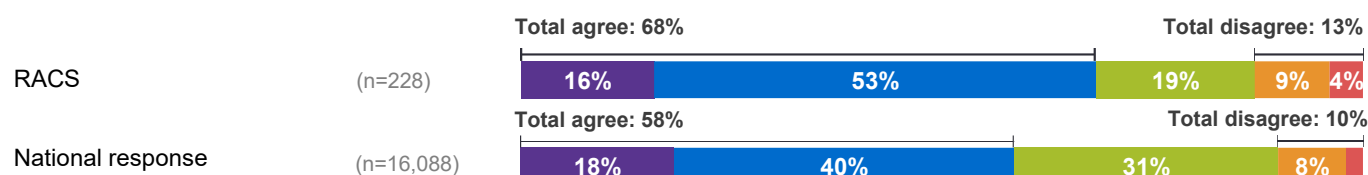
I am able to attend conferences, courses and/or external education events



My employer supports me to attend formal and informal teaching sessions



I am able participate in research activities



Key: ■ Strongly agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

Base: Total sample

^aNote: These questions were only asked of Specialist GP trainees, as such, data is filtered to Specialist GP trainees

Q34. Thinking about access to teaching and research in your setting, to what extent do you agree or disagree with the following statements?

Access to teaching

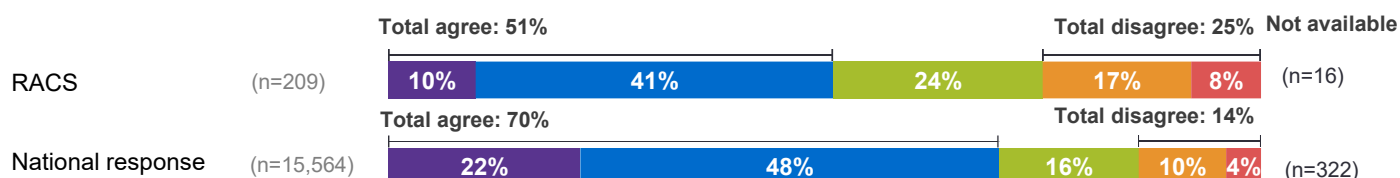
THE FOLLOWING EDUCATIONAL ACTIVITIES HAVE BEEN USEFUL IN YOUR DEVELOPMENT AS A DOCTOR

training with RACS were asked their level of agreement on whether an educational activity had been useful in their development as a doctor. Of the educational activities available, teaching in the course of patient care (bedside teaching) (88%), access to mentoring (81%) and formal education program (80%) were rated the most useful.

Formal education program[^]



Online modules (formal and/or informal)



Teaching in the course of patient care (bedside teaching)



Team or unit based activities



Key: ■ Strongly agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

Base: Total sample excluding not available (shown separately)

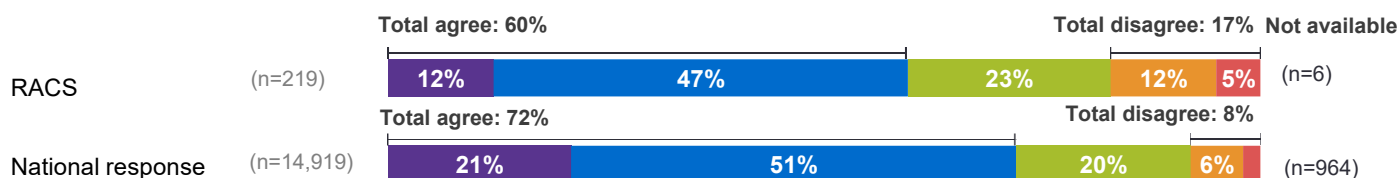
[^]Note: This question was not shown to Interns.

Q38. To what extent do you agree or disagree that the following educational activities have been useful in your development as a doctor?

Access to teaching

THE FOLLOWING EDUCATIONAL ACTIVITIES HAVE BEEN USEFUL IN YOUR DEVELOPMENT AS A DOCTOR (continued)

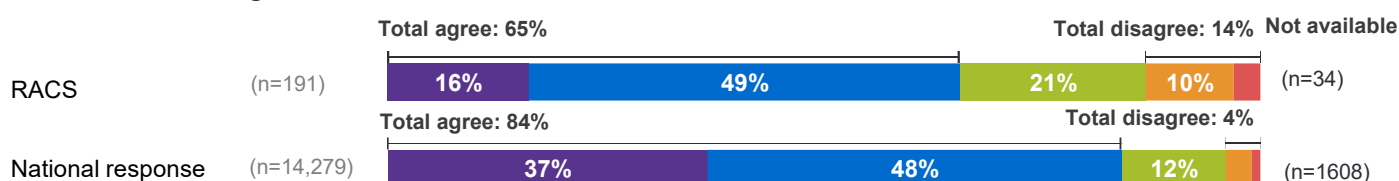
Medical/surgical and/or hospital-wide meetings



Multidisciplinary meetings



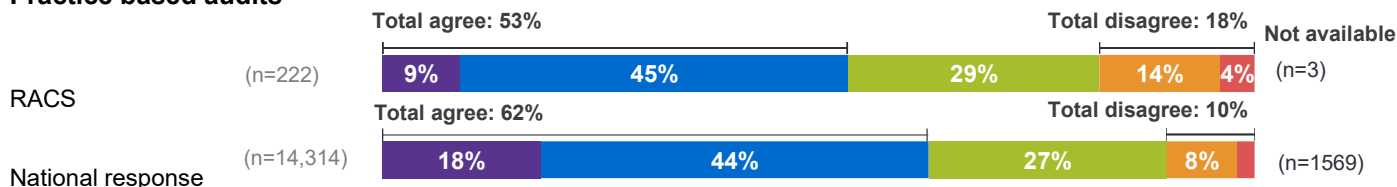
Simulation teaching



Access to mentoring



Practice based audits



Key: ■ Strongly agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

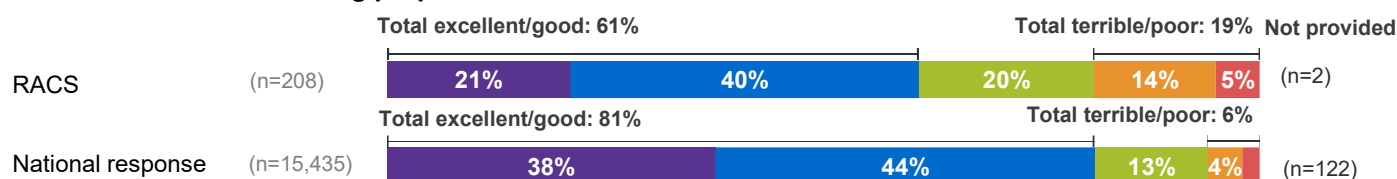
Base: Total sample excluding not available (shown separately)

Q38. To what extent do you agree or disagree that the following educational activities have been useful in your development as a doctor?

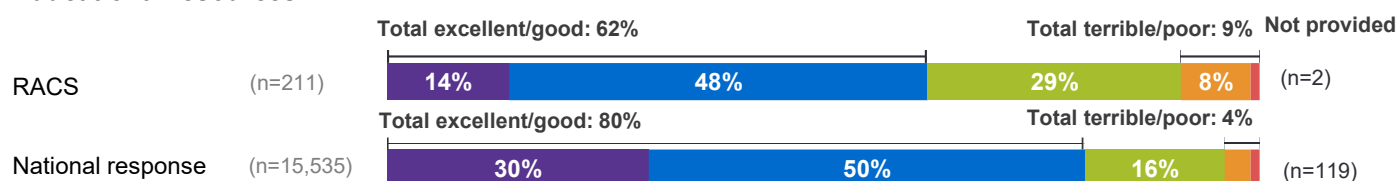
Facilities

HOW WOULD YOU RATE THE QUALITY OF THE FOLLOWING IN YOUR SETTING?

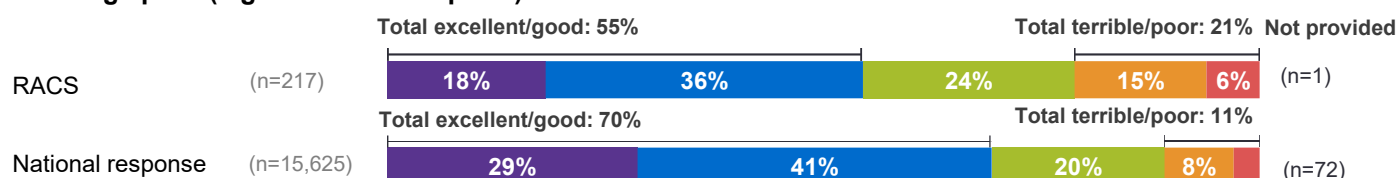
Reliable internet for training purposes



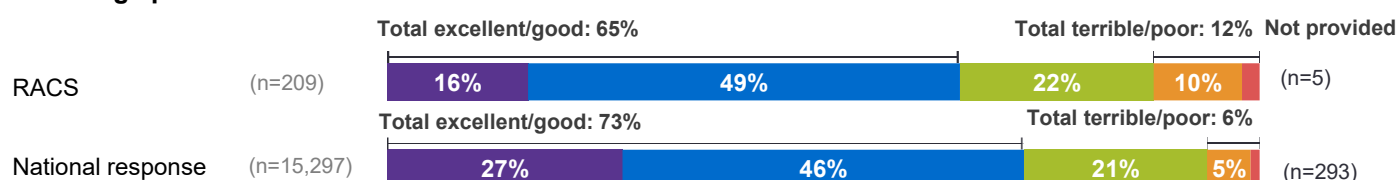
Educational resources



Working space (e.g. desk and computer)



Teaching spaces



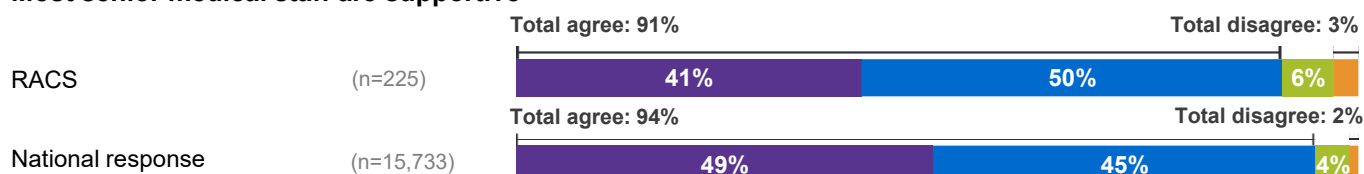
Key: ■ Excellent ■ Good ■ Average ■ Poor ■ Terrible

Base: Total sample excluding not provided (shown separately)
 Q40. How would you rate the quality of the following in your setting?

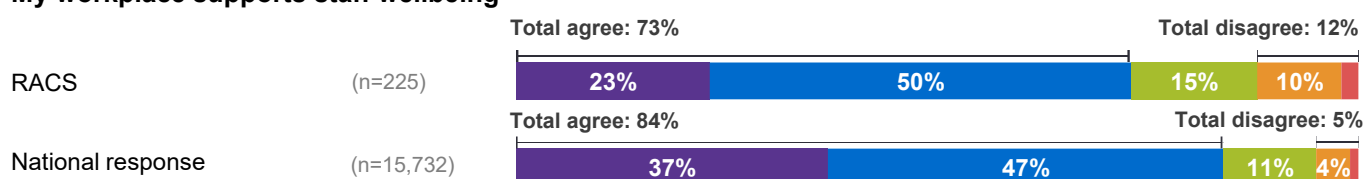
Workplace environment and culture

CULTURE WITHIN THE TRAINEE'S SETTING

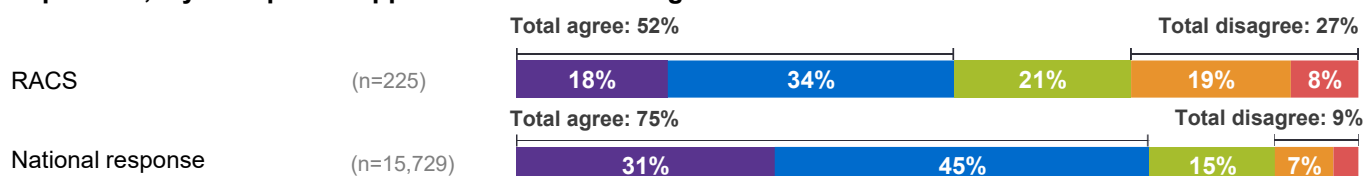
Most senior medical staff are supportive



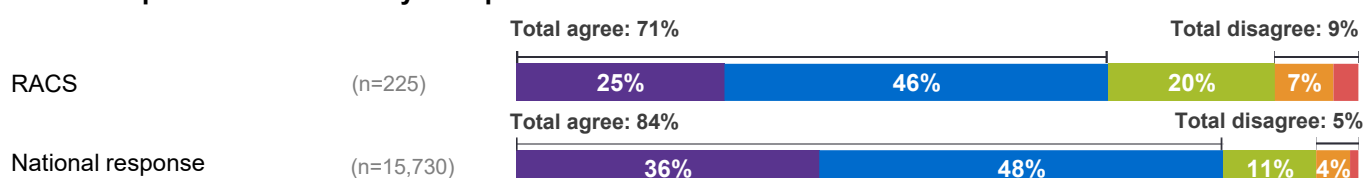
My workplace supports staff wellbeing



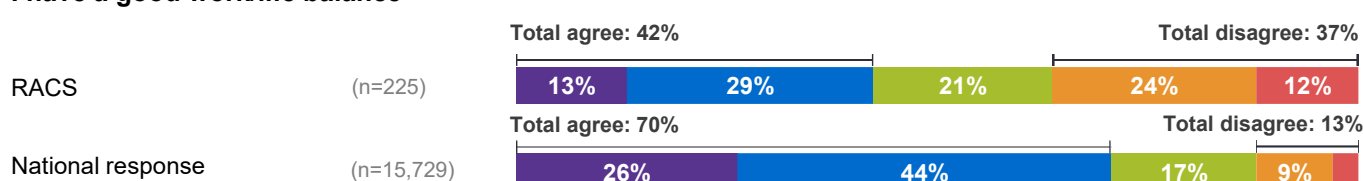
In practice, my workplace supports me to achieve a good work/life balance



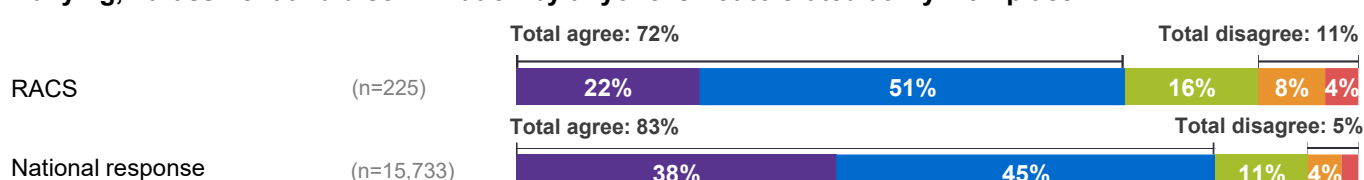
There is a positive culture at my workplace



I have a good work/life balance



Bullying, harassment and discrimination by anyone is not tolerated at my workplace



Key: ■ Strongly agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

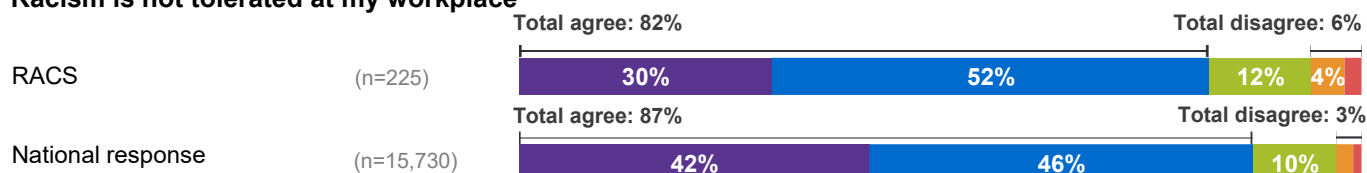
Base: Total sample

Q41. Thinking about the workplace environment and culture in your setting, to what extent do you agree or disagree with the following statements?

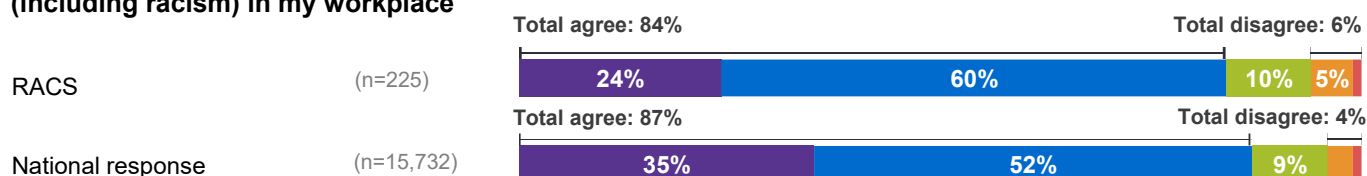
Workplace environment and culture

CULTURE WITHIN THE TRAINEE'S SETTING (continued)

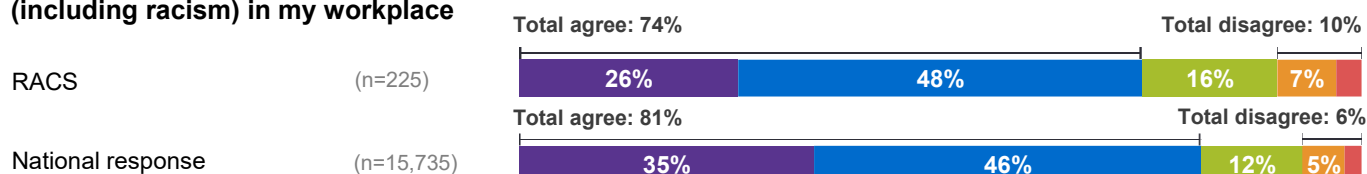
Racism is not tolerated at my workplace



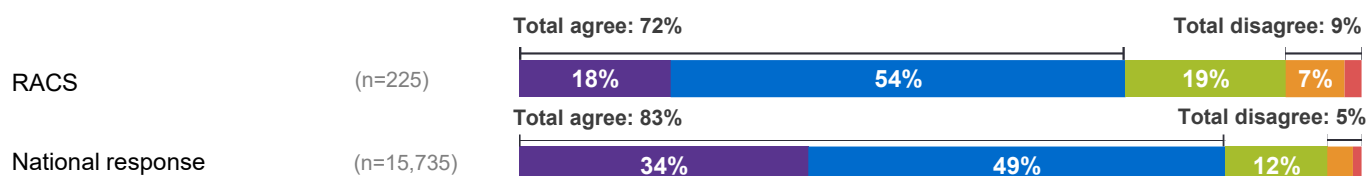
I know how to raise concerns/issues about bullying, harassment and discrimination (including racism) in my workplace



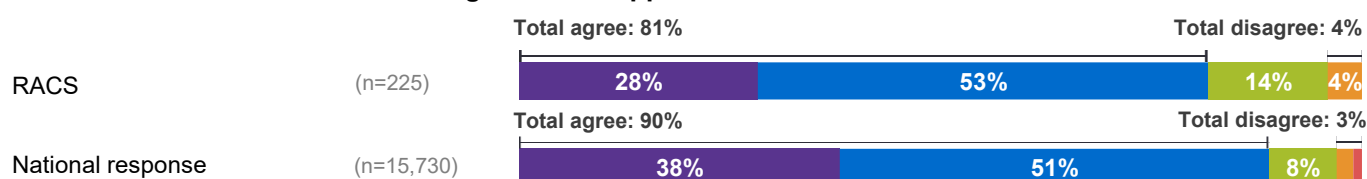
I am confident that I would raise concerns/issues about bullying, harassment and discrimination (including racism) in my workplace



I could access support from my workplace if I experienced stress or a traumatic event



Most senior allied health and nursing staff are supportive



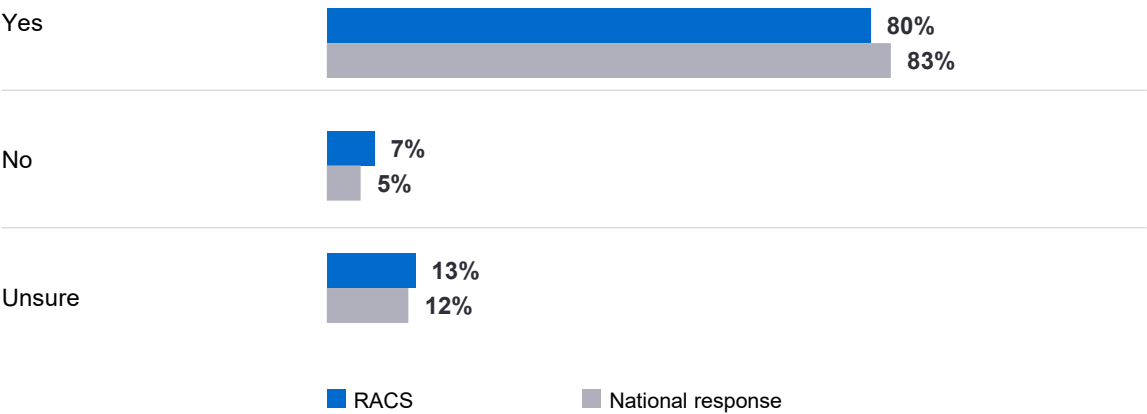
Key: ■ Strongly agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

Base: Total sample

Q41. Thinking about the workplace environment and culture in your setting, to what extent do you agree or disagree with the following statements?

Workplace environment and culture

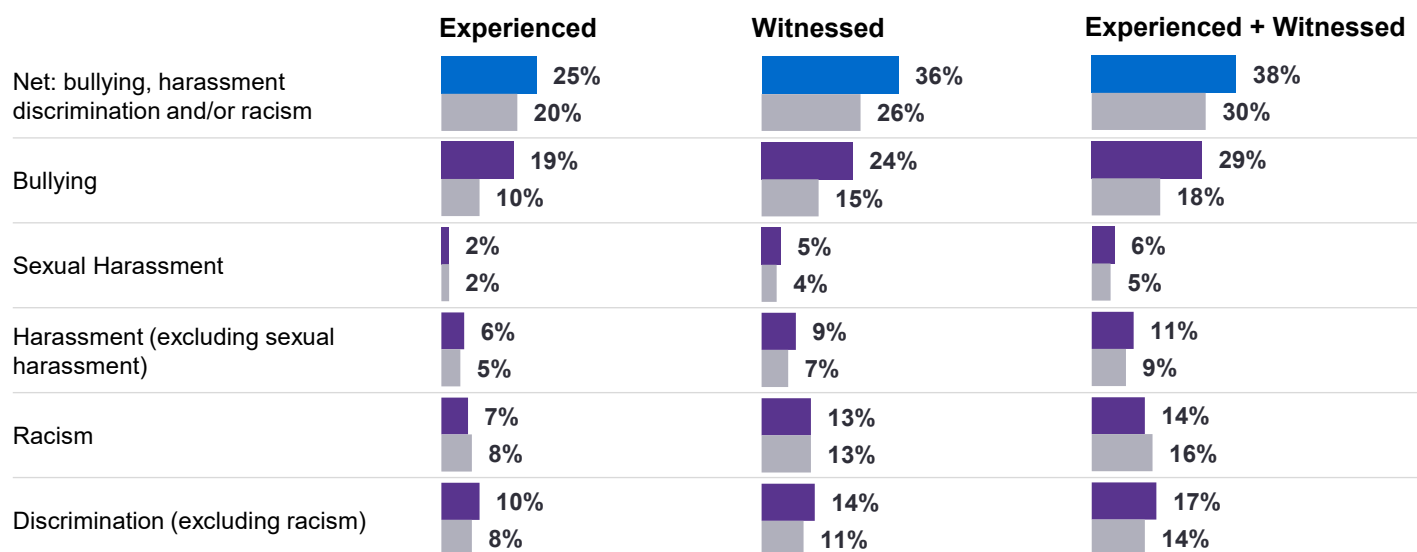
IF YOU NEEDED SUPPORT, DO YOU KNOW HOW TO ACCESS SUPPORT FOR YOUR HEALTH
(INCLUDING FOR STRESS AND OTHER PSYCHOLOGICAL DISTRESS)?



Base: Total sample (National: 2025 n = 15,511; RACS: 2025 n = 224)
Q43. If you needed support, do you know how to access support for your health (including for stress and other psychological distress)?

Workplace environment and culture

IN THE PAST 12 MONTHS, HAVE YOU... (% yes)

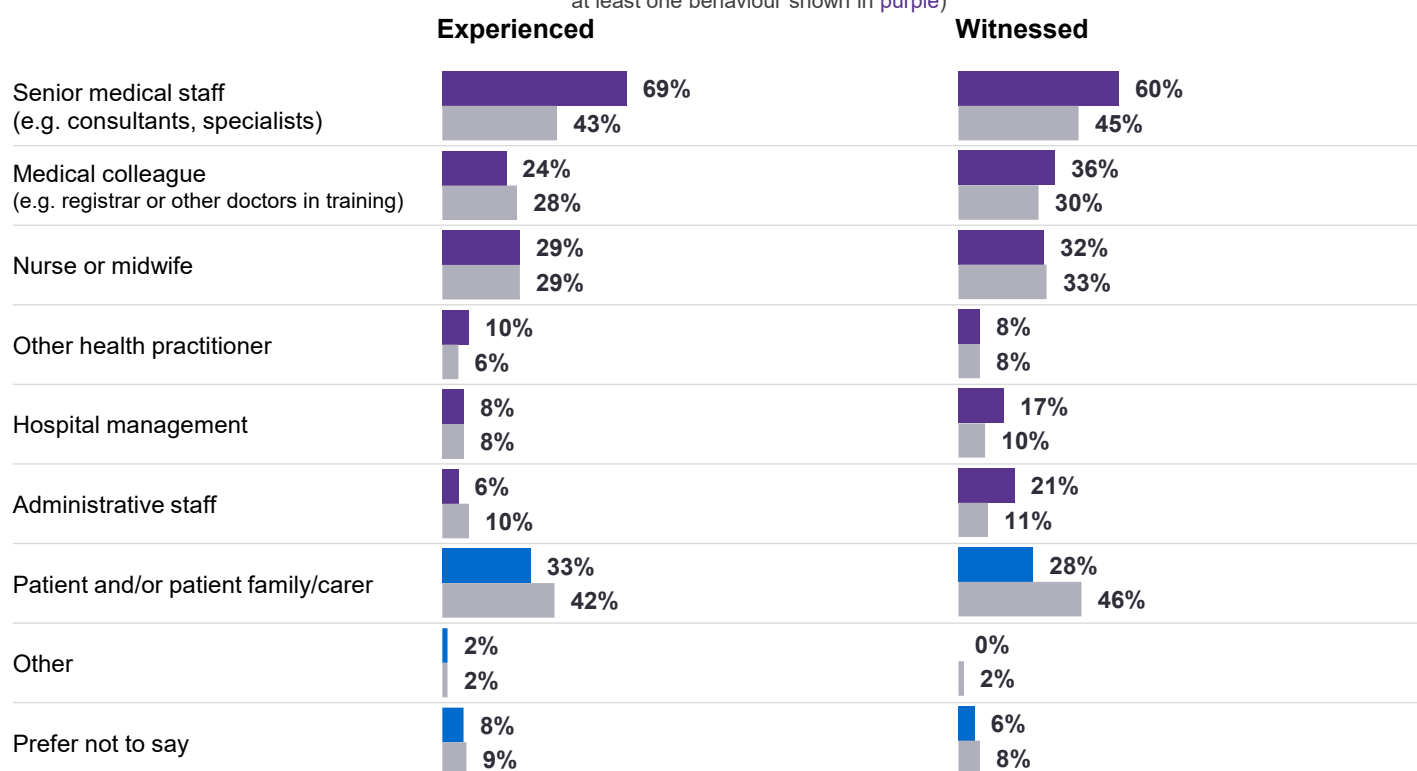


■ RACS
 ■ National response

(Blue figure shows the proportion of respondents who experienced/witnessed at least one behaviour shown in purple)



WHO WAS RESPONSIBLE...



■ RACS
 ■ National response

(Where only blue option selected, next question skipped)

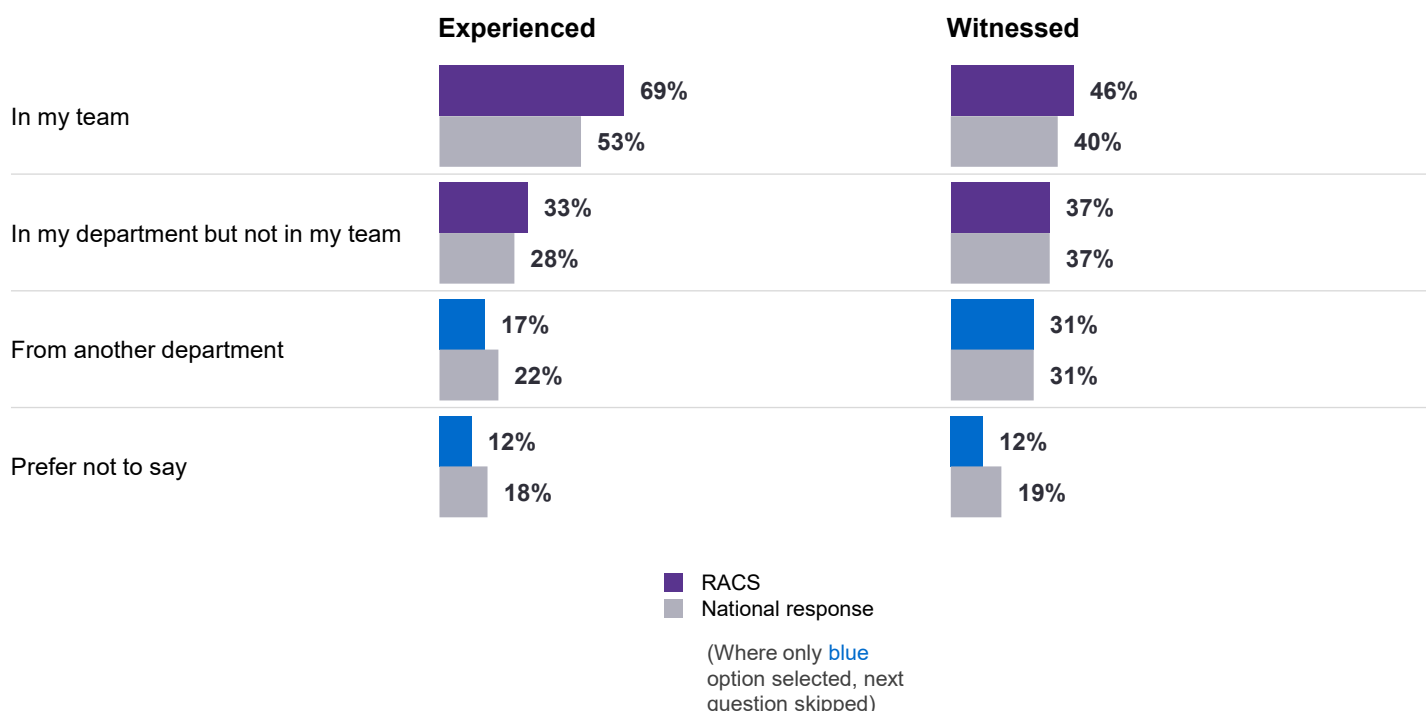
Base: Total sample - Experienced (National: 2025 n = 13,796; RACS: 2025 n = 196) - Witnessed (National: 2025 n = 14,256; RACS: 2025 n = 211)
 Q42a. Thinking about your workplace, have you experienced and/or witnessed any of the following in the past 12 months?

Base: Experienced/witnessed bullying, harassment sexual harassment, discrimination and/or racism - Experienced (National: 2025 n = 2,681; RACS: 2025 n = 49) - Witnessed (National: 2025 n = 3,546; RACS: 2025 n = 72)

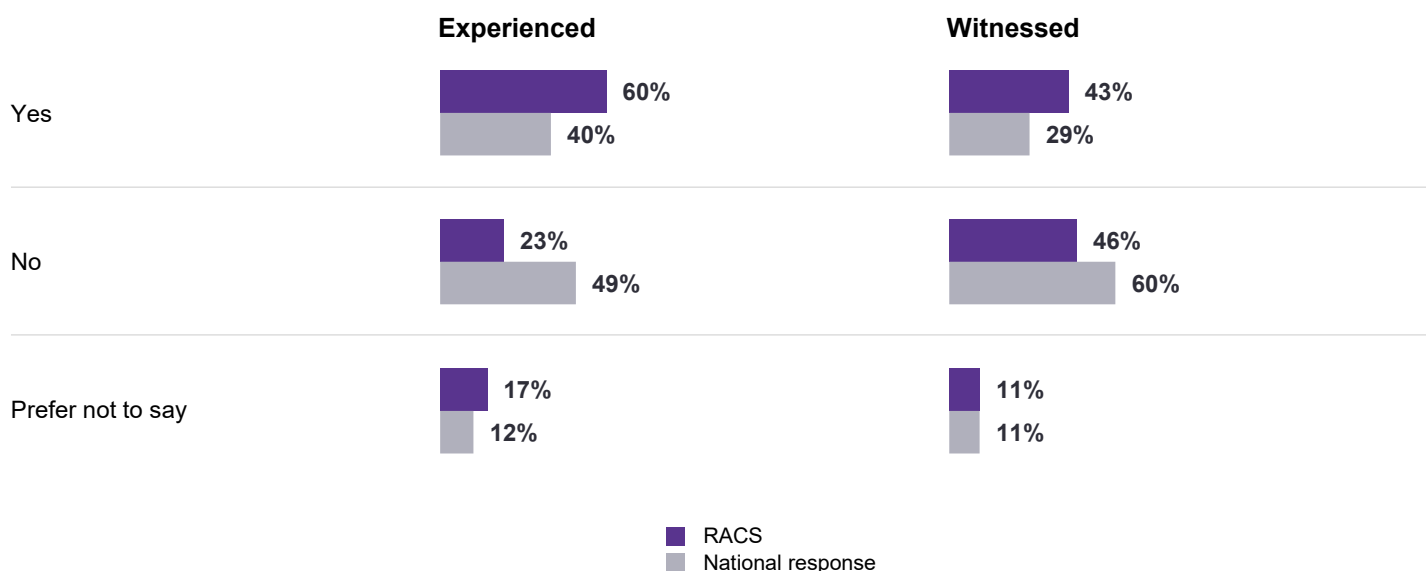
Q42b. Who was responsible for the bullying, harassment, discrimination and/or racism that you experienced/witnessed...

Workplace environment and culture

THE STAFF MEMBER OR COLLEAGUE RESPONSIBLE WAS...



THE STAFF MEMBER OR COLLEAGUE FROM MY TEAM OR DEPARTMENT WAS MY SUPERVISOR...



Base: Experienced bullying, harassment, discrimination and/or racism from someone who was not a patient (National: 2025 n = 1,958 RACS: 2025 n = 42) - Witnessed (National: 2025 n = 2,574; RACS: 2025 n = 65)

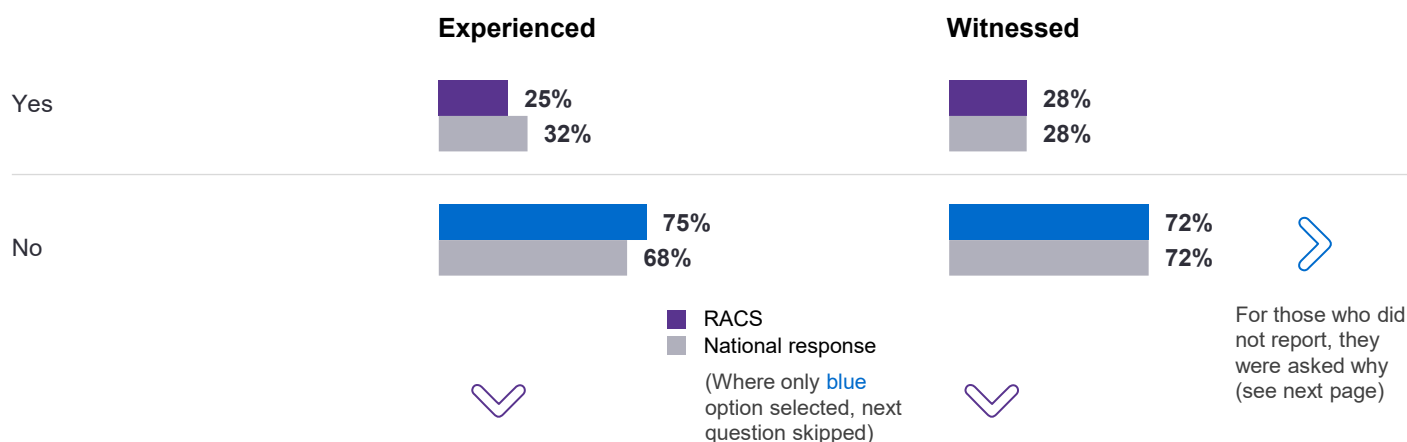
Q42c. The person(s) responsible was...

Base: Experienced bullying, harassment discrimination and/or racism from someone in their team or department (rebased to who was not a patient) (National: 2025 n = 1,383; RACS: 2025 n = 35) - Witnessed (National: 2025 n = 1,656; RACS: 2025 n = 46)

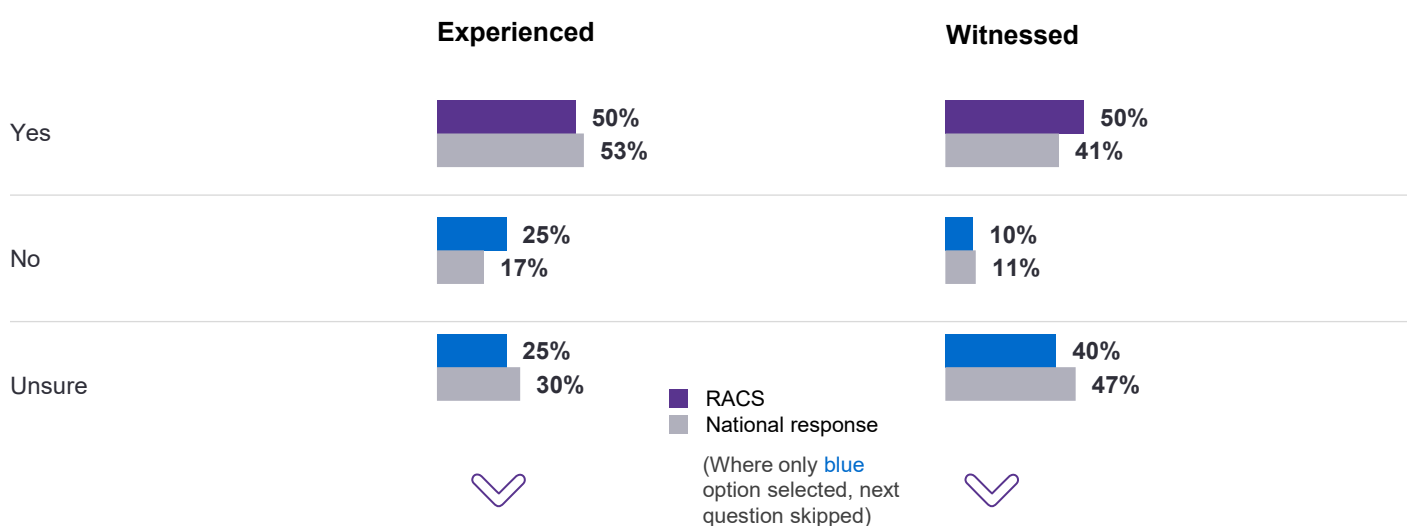
Q42d. Was the person(s) one of your supervisors?...

Workplace environment and culture

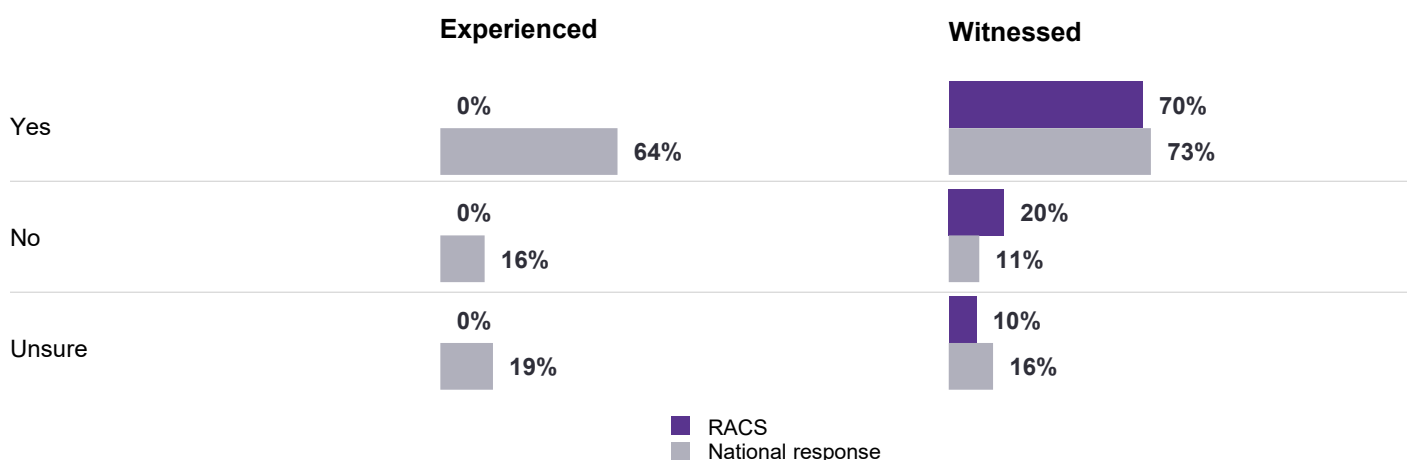
HAVE YOU REPORTED IT...



HAS THE REPORT BEEN FOLLOWED UP...



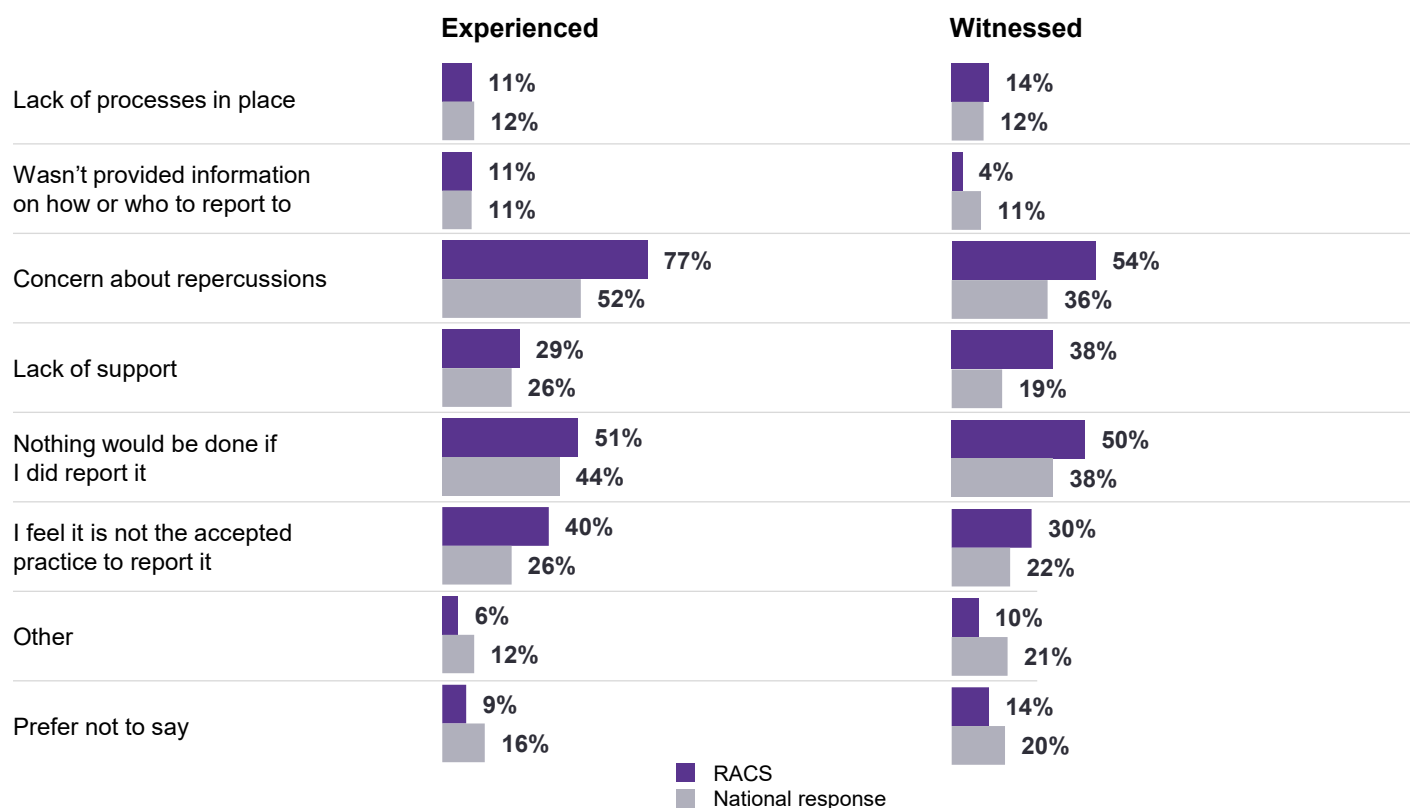
ARE YOU SATISFIED WITH HOW THIS REPORT WAS FOLLOWED UP...



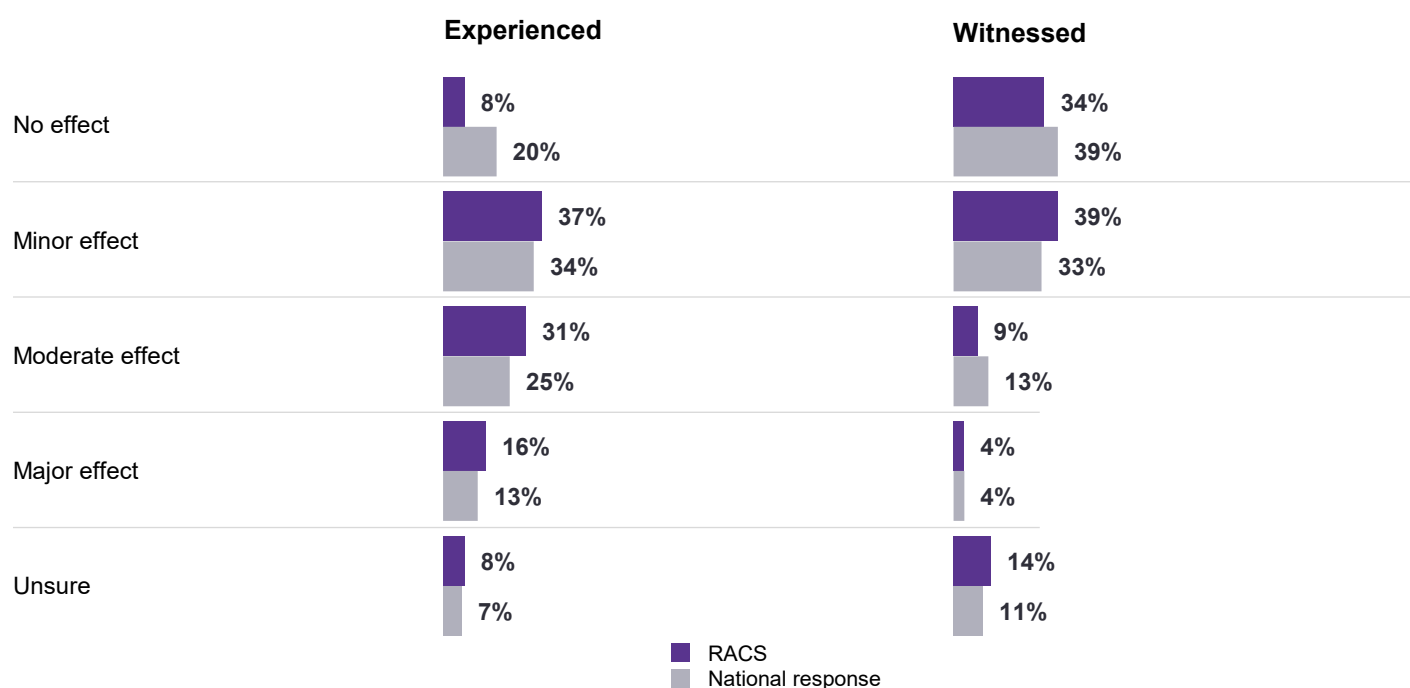
Base: Experienced bullying, harassment discrimination and/or racism (National: 2025 n = 2,670; RACS: 2025 n = 48) - Witnessed (National: 2025 n = 3,524; RACS: 2025 n = 72) | Q42e. Have you reported it?
 Base: Reported bullying, harassment, discrimination and/or racism (National: 2025 n = 859; RACS: 2025 n = 12) - Witnessed (National: 2025 n = 977; RACS: 2025 n = 20) | Q42f. Has the report been followed up?
 Base: Reported bullying, harassment, discrimination and/or racism who reported the incident and followed it up (National: 2025 n = 447; RACS: 2025 n = <10) - Witnessed (National: 2025 n = 401; RACS: 2025 n = 10) | Q42g. Are you satisfied with how the report was followed up?

Workplace environment and culture

WHAT PREVENTED YOU FROM REPORTING...



HAS THIS INCIDENT ADVERSELY AFFECTED YOUR MEDICAL TRAINING...



Base: Experienced bullying, harassment discrimination and/or racism and did not report it. (National: 2025 n = 1,787; RACS: 2025 n = 35) - Witnessed (National: 2025 n = 2,481; RACS: 2025 n = 50)

Q42i. What prevented you from reporting?

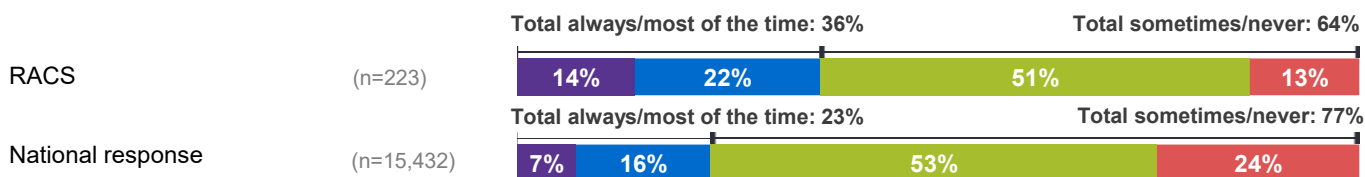
Base: Experienced bullying, harassment discrimination and/or racism (National: 2025 n = 2,674; RACS: 2025 n = 49) - Witnessed (National: 2025 n = 3,522; RACS: 2025 n = 74)

Q42h. How has the incident adversely affected your medical training?

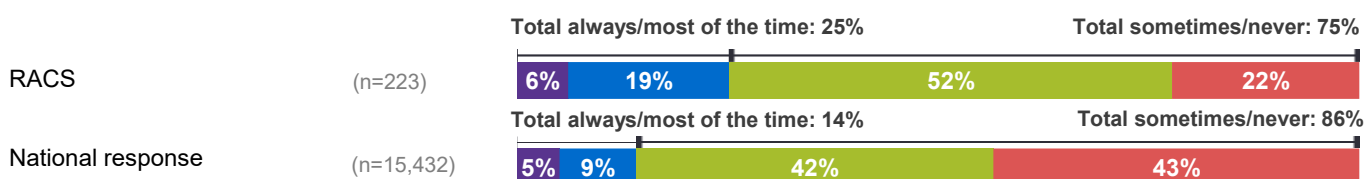
Workplace environment and culture

HOW OFTEN DO THE FOLLOWING ADVERSELY AFFECT YOUR WELLBEING IN YOUR SETTING?

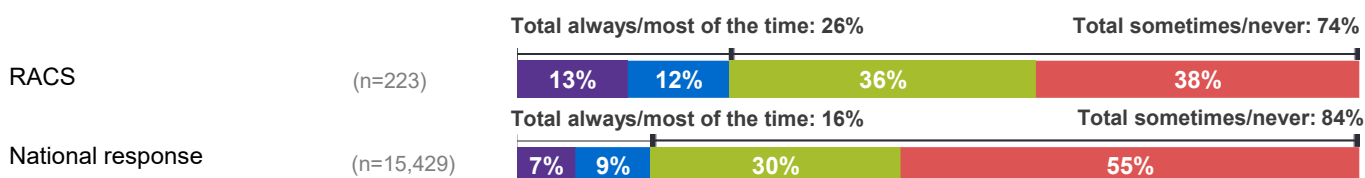
The amount of work I am expected to do



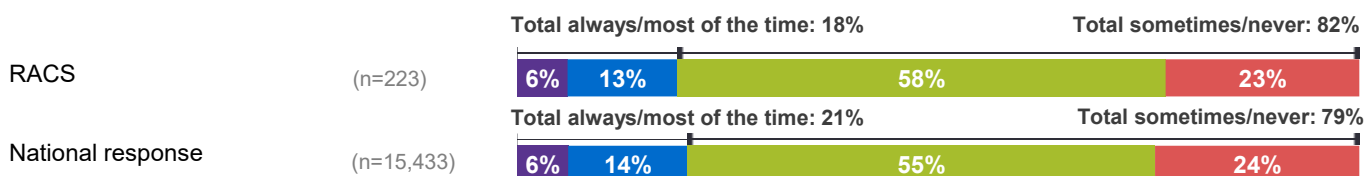
Having to work paid overtime



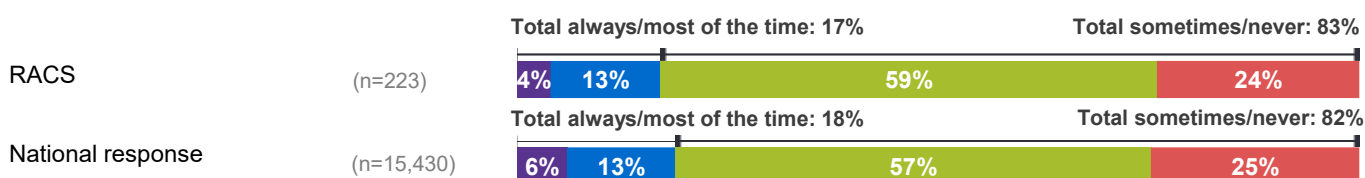
Having to work unpaid overtime



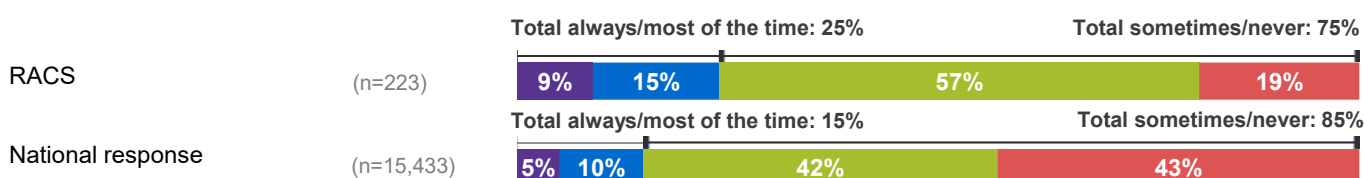
Dealing with patient expectations



Dealing with patients' families



Expectations of supervisors



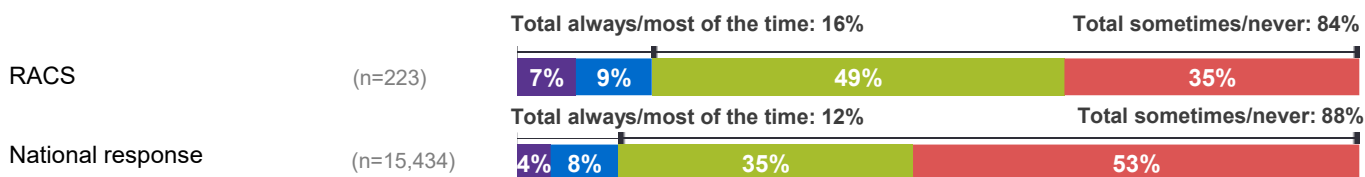
Key: Always Most of the time Sometimes Never

Base: Total sample
 Q44. How often do the following adversely affect your wellbeing in your setting?

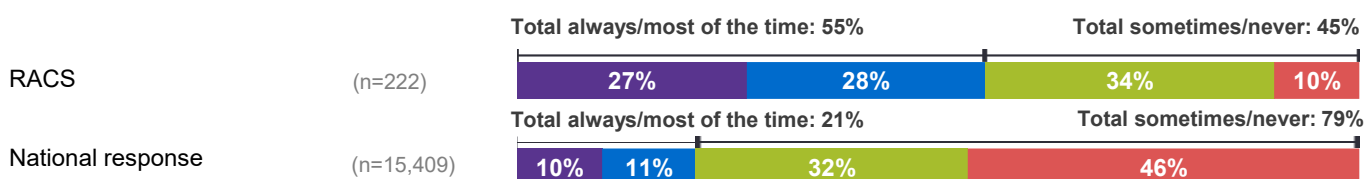
Workplace environment and culture

HOW OFTEN DO THE FOLLOWING ADVERSELY AFFECT YOUR WELLBEING IN YOUR SETTING? (continued)

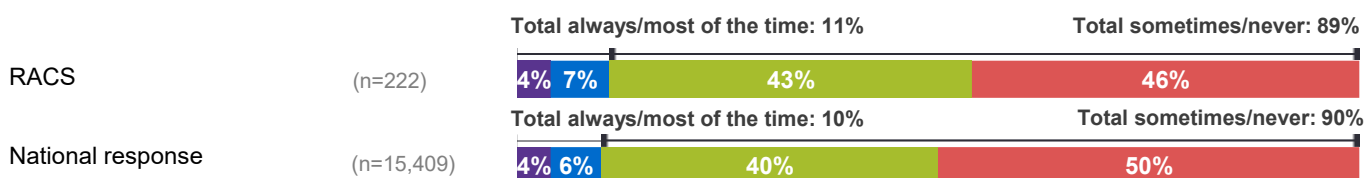
Supervisor feedback



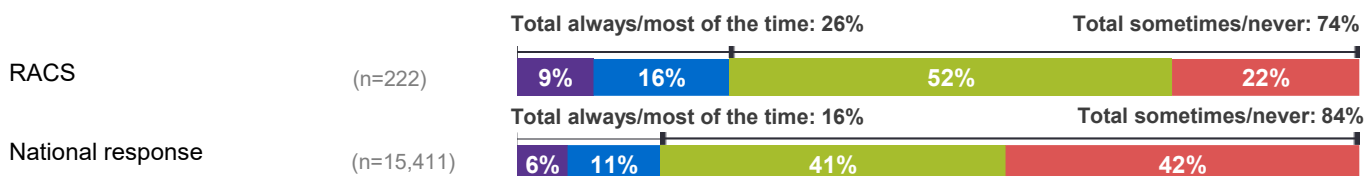
Having to relocate for work



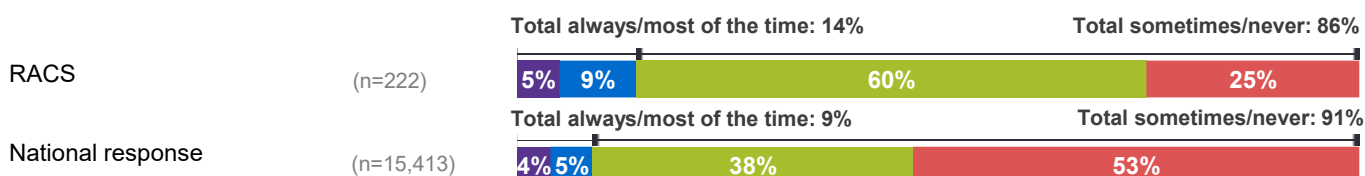
Being expected to do work that I don't feel confident doing



Lack of appreciation



Workplace conflict

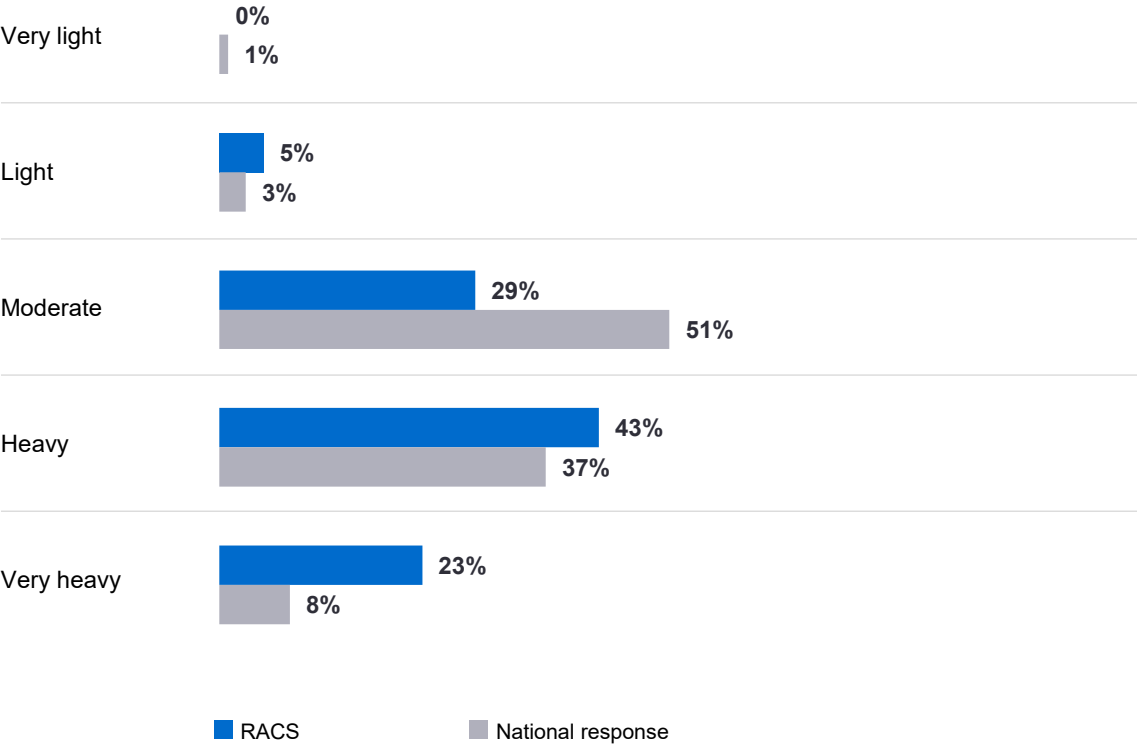


Key: Always Most of the time Sometimes Never

Base: Total sample
 Q44. How often do the following adversely affect your wellbeing in your setting?

Workplace environment and culture

HOW WOULD YOU RATE YOUR WORKLOAD IN YOUR SETTING?



Base: Total sample (National: 2025 n = 15,402; RACS: 2025 n = 222)
Q45. How would you rate your workload in your setting?

Workplace environment and culture

ON AVERAGE IN THE PAST MONTH, HOW MANY HOURS PER WEEK HAVE YOU WORKED?

On average, RACS trainees worked 61.5 hours a week, compared to 44.0 hours a week for the national average.

For RACS trainees, 95% were working 40 hours a week or more, compared to the national response of 58%.

On average, RACS doctors in training worked...

On average, doctors in training nationally worked...

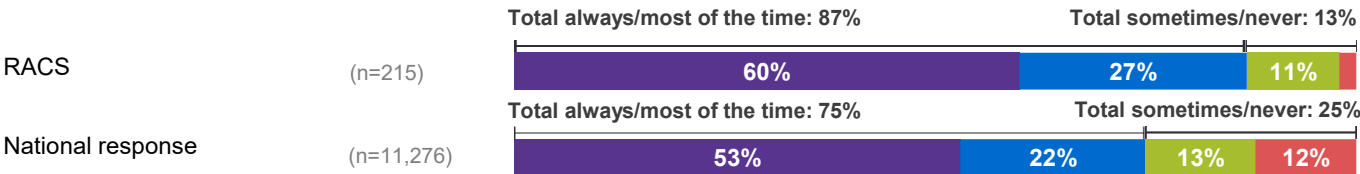


Base: Total sample (National: 2025 n = 15,383; RACS: 2025 n = 222). Sample includes respondents who are employed full-time, part-time and casually.

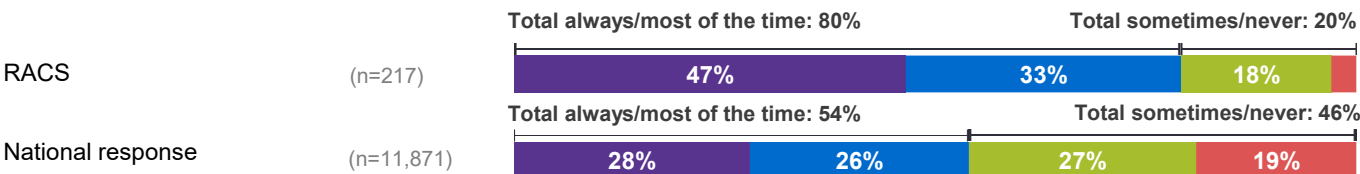
Q46. On average in the past month, how many hours per week have you worked?

FOR ANY UNROSTERED OVERTIME YOU HAVE COMPLETED IN THE PAST, HOW OFTEN DID:

You get paid for the unrostered overtime



You claim for the unrostered overtime



Key:
 ■ Always
 ■ Most of the time
 ■ Sometimes
 ■ Never

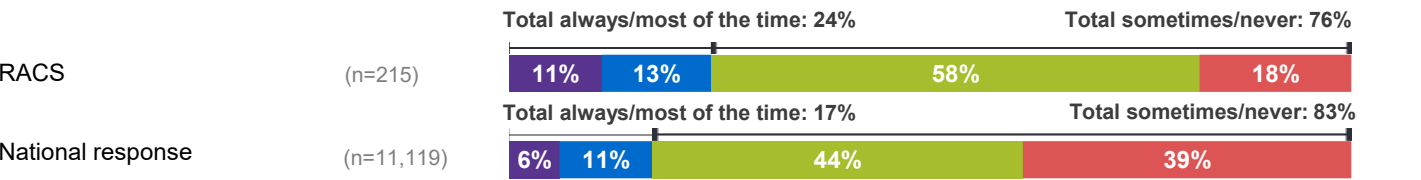
Base: Total sample

Q47. For any unrostered overtime you have completed in the past, how often did...?

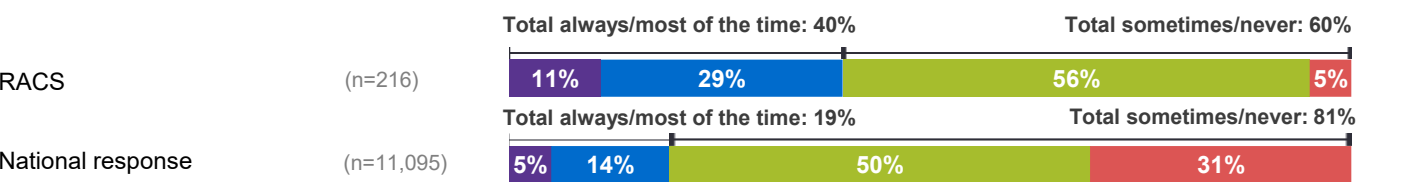
Workplace environment and culture

FOR ANY UNROSTERED OVERTIME YOU HAVE COMPLETED IN THE PAST, HOW OFTEN DID (continued):

Working unrostered overtime have a negative impact on your training



Working unrostered overtime provide you with more training opportunities

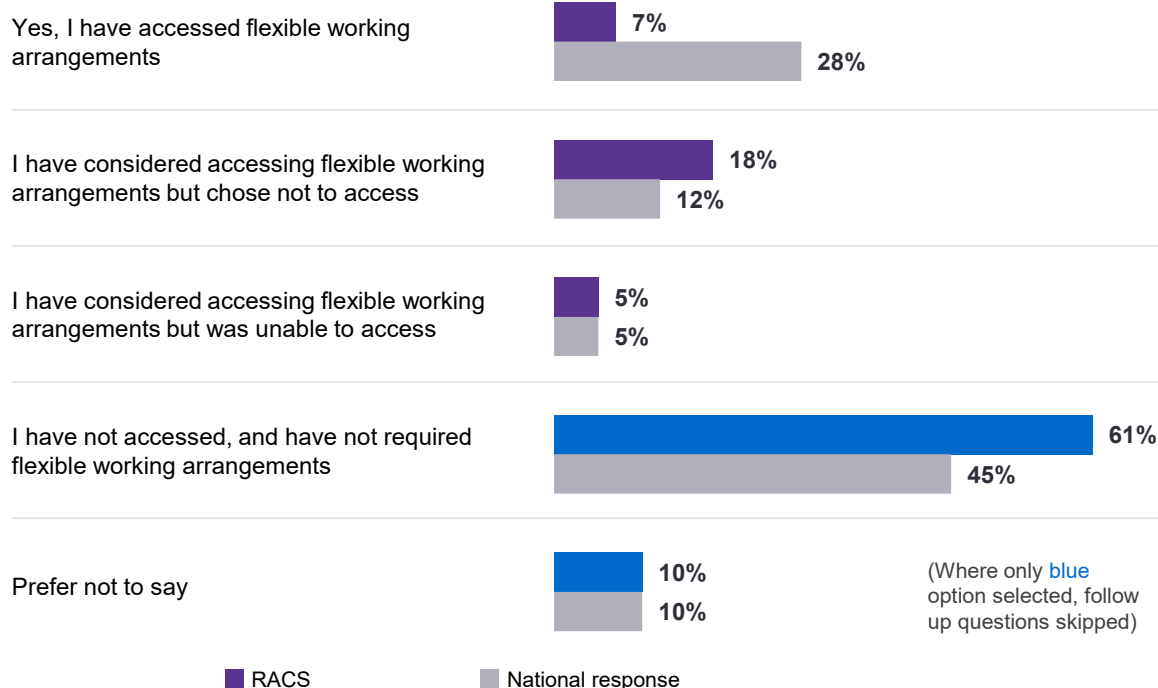


Key:
 Always
 Most of the time
 Sometimes
 Never

Base: Total sample
 Q47. For any unrostered overtime you have completed in the past, how often did...?

Workplace environment and culture

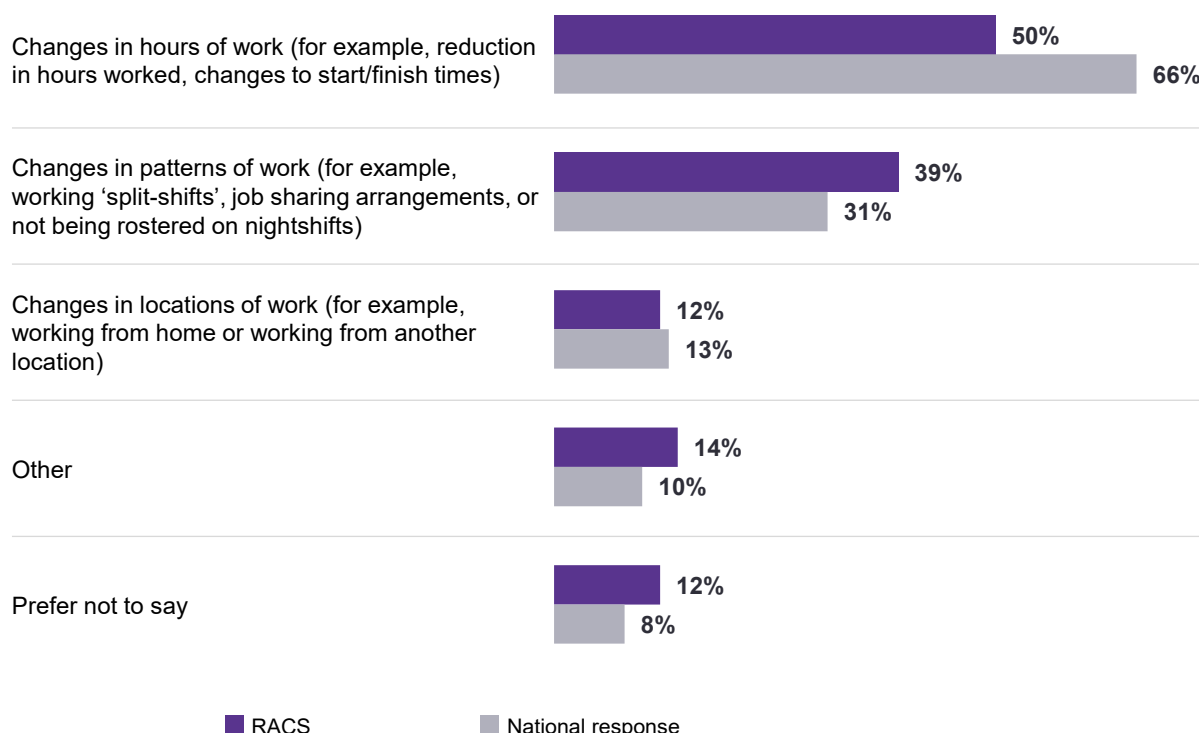
HAVE YOU ACCESSED, OR CONSIDERED ACCESSING, FLEXIBLE WORKING ARRANGEMENTS IN YOUR SETTING?



Base: Total sample (National: 2025 n = 15,263; RACS: 2025 n = 221)

Q63a. Have you accessed, or considered accessing, flexible working arrangements in your setting?

WHAT SORT OF FLEXIBLE WORKING ARRANGEMENTS DID YOU ACCESS/WOULD YOU HAVE LIKED TO ACCESS:

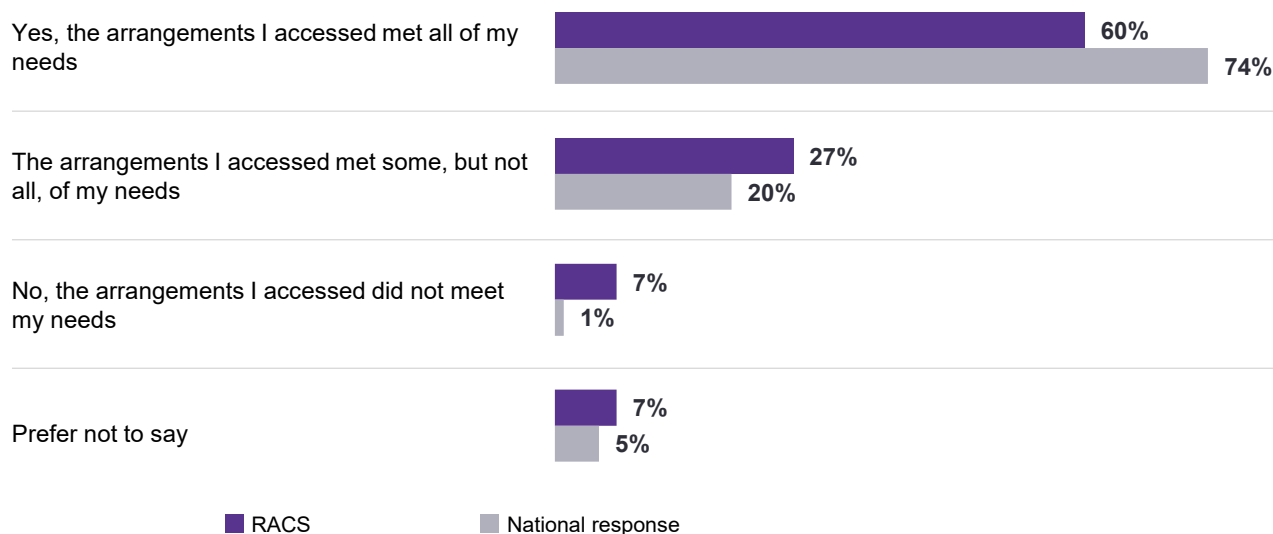


Base: Accessed, or would like to have access to flexible working arrangements (National: 2025 n = 6,915; RACS: 2025 n = 66)

Q64. What sort of flexible working arrangements did you access / What sort of flexible working arrangements would you have liked to access?

Workplace environment and culture

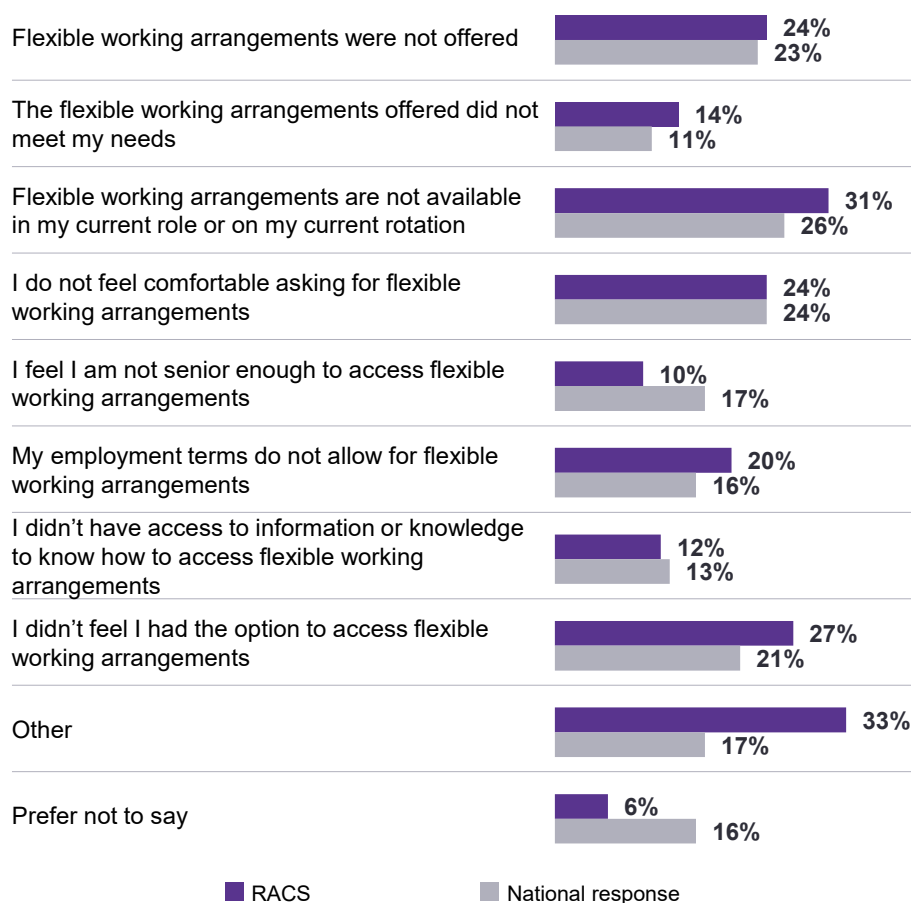
DID THE FLEXIBLE WORKING ARRANGEMENTS YOU ACCESSED IN YOUR SETTING MEET YOUR NEEDS



Base: Accessed flexible working arrangements (National: 2025 n = 4,315; RACS: 2025 n = 15)

Q63b. Did the flexible working arrangements you accessed in your setting meet your needs?

WHY HAVE YOU CHOSEN NOT TO ACCESS, OR BEEN UNABLE TO ACCESS, FLEXIBLE WORKING ARRANGEMENTS IN YOUR SETTING?

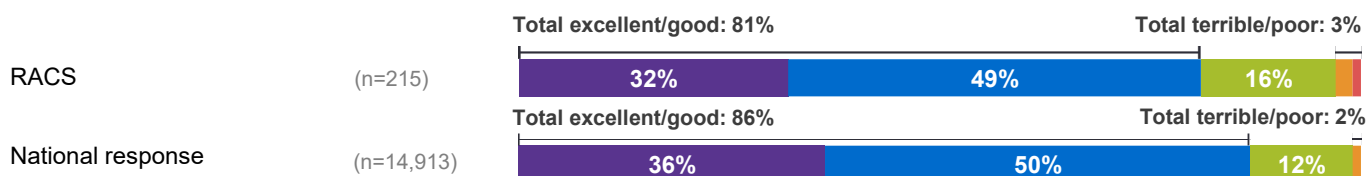


Base: Would like to have access to flexible working arrangements (National: 2025 n = 2,592; RACS: 2025 n = 51)

Q63c. Why have you chosen not to access, or been unable to access, flexible working arrangements in your setting?

Patient safety

HOW WOULD YOU RATE THE QUALITY OF YOUR TRAINING ON HOW TO RAISE CONCERNS ABOUT PATIENT SAFETY?



Key: ■ Excellent ■ Good ■ Average ■ Poor ■ Terrible

Base: Received training on how to raise concerns about patient safety

Q48. In your setting, how would you rate the quality of your training on how to raise concerns about patient safety?

I did not receive training on how to raise concerns about patient safety

RACS 3%

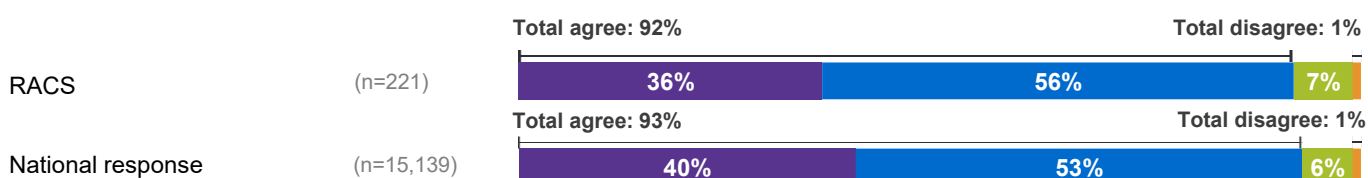
National response 2%

Base: Total Sample

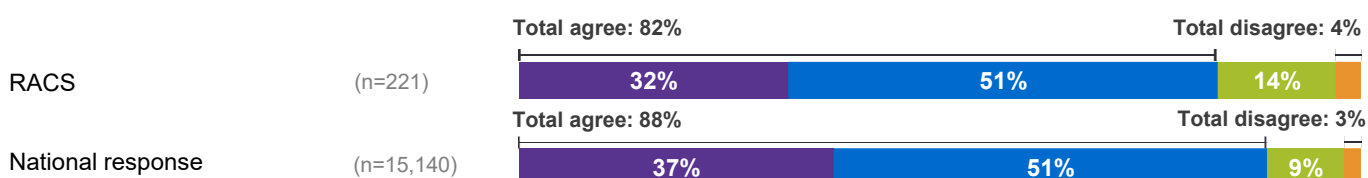
Q48. In your setting, how would you rate the quality of your training on how to raise concerns about patient safety?

PATIENT CARE AND SAFETY IN THE WORKPLACE

I know how to report concerns about patient care and safety



There is a culture of proactively dealing with concerns about patient care and safety



Key: ■ Strongly agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

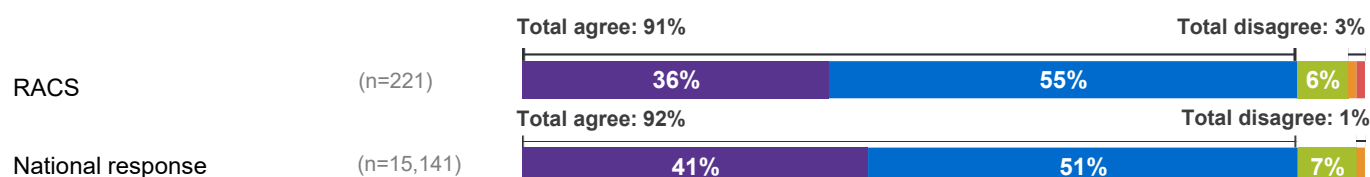
Base: Total sample

Q49. Thinking about patient care and safety in your setting, to what extent do you agree or disagree with the following statements?

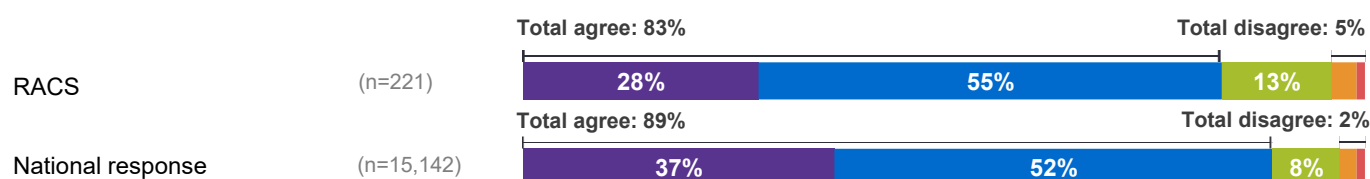
Patient safety

PATIENT CARE AND SAFETY IN THE WORKPLACE (cont.)

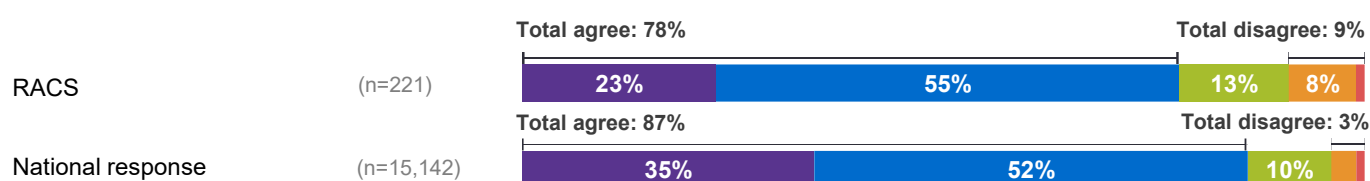
I am confident to raise concerns about patient care and safety



There are processes in place at my workplace to support the safe handover of patients between shifts / practitioners



I have received training on how to provide culturally safe care



Key: ■ Strongly agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

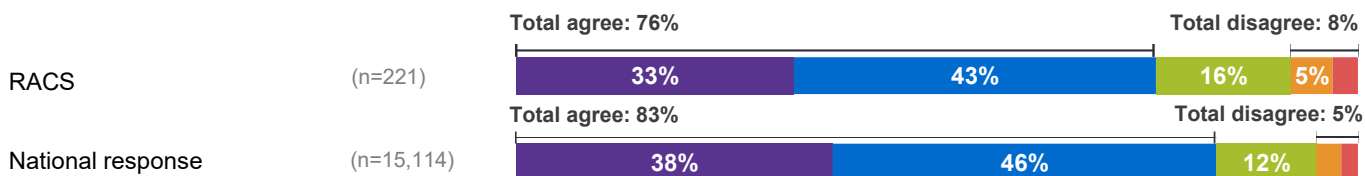
Base: Total sample

Q49. Thinking about patient care and safety in your setting, to what extent do you agree or disagree with the following statements?

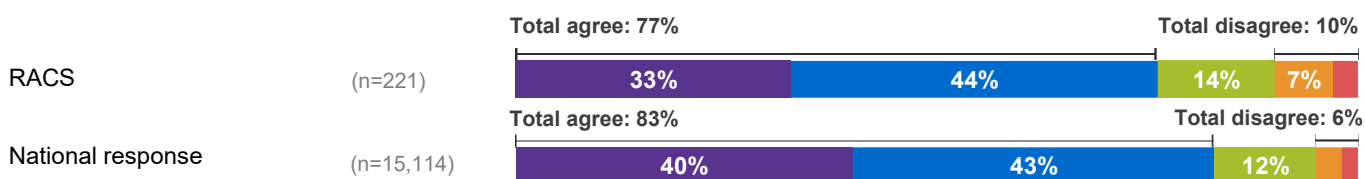
Overall satisfaction

RECOMMEND TRAINING

I would recommend my current training position to other doctors



I would recommend my current workplace as a place to train



Key:
■ Strongly agree
 ■ Agree
 ■ Neither agree nor disagree
 ■ Disagree
 ■ Strongly disagree

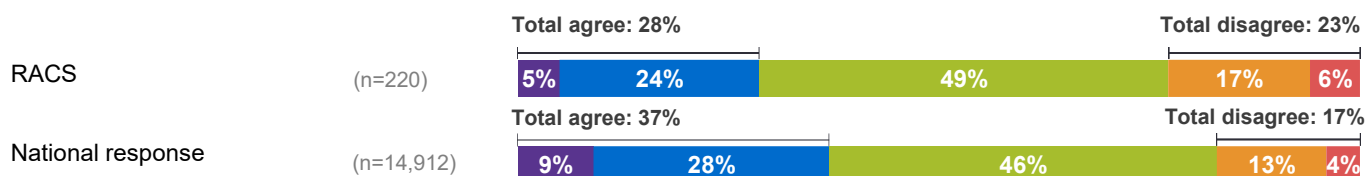
Base: Total sample

Q50. Thinking about your setting, to what extent do you agree or disagree with the following statements?

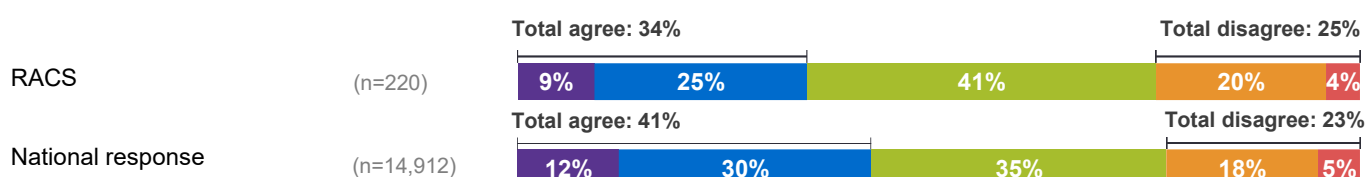
Future career intentions

CAREER INTERESTS

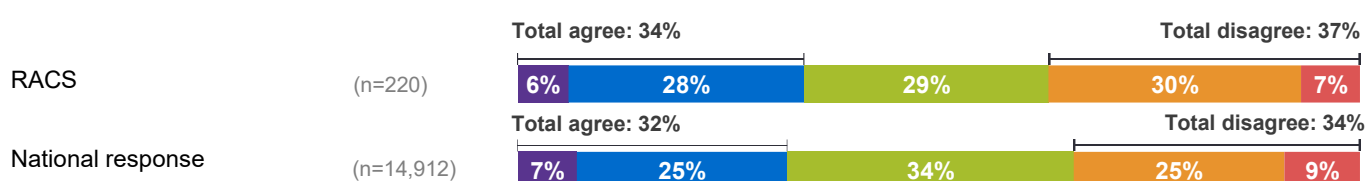
I intend to work in Aboriginal and Torres Strait Islander health/healthcare



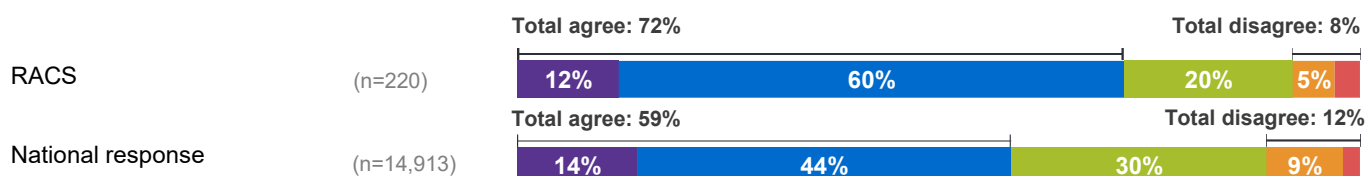
I intend to work in rural practice



I intend to work in medical research



I intend to work in medical teaching



I am considering a future outside of medicine in the next 12 months



Key: ■ Strongly agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

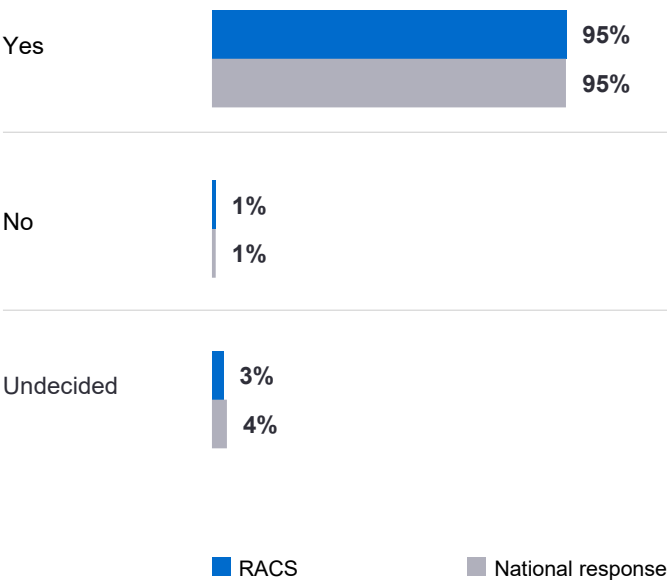
Base: Total sample

Q54. Thinking about your future career, to what extent do you agree or disagree with the following statements?

Future career intentions

CONTINUATION OF SPECIALTY TRAINING PROGRAM

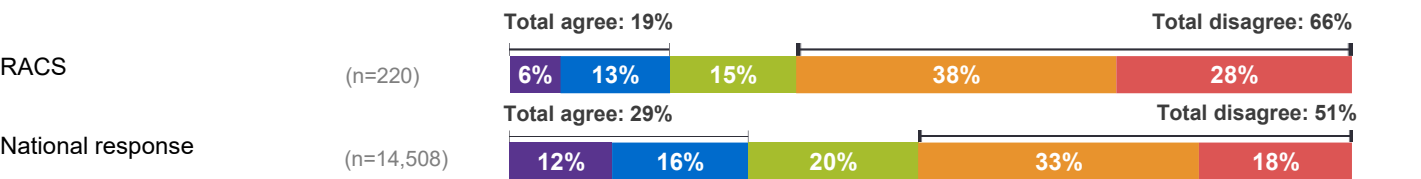
Overall, 95% of training with RACS intended to continue with their specialty.



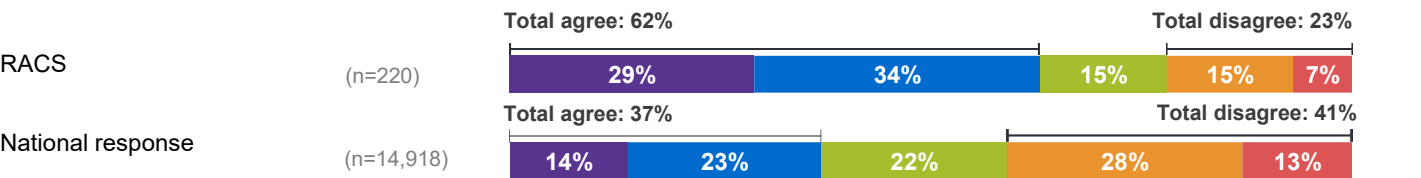
Base: Specialist trainees (National: 2025 n = 6,465; RACS: 2025 n = 221)
 Q51a. Do you intend to continue in your specialty training program?

TRAINING PROGRAM COMPLETION AND FUTURE EMPLOYMENT

I am concerned I will not successfully complete my training program to attain Fellowship / meet my pathway requirements / securing a place in my preferred College training program



I am concerned about whether I will be able to secure employment on completion of training

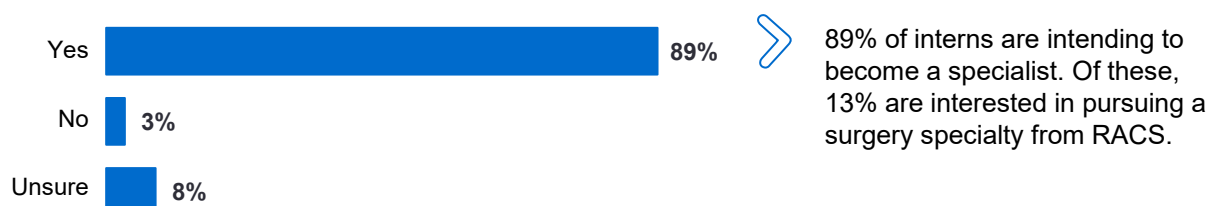


Key:
 Strongly agree
 Agree
 Neither agree nor disagree
 Disagree
 Strongly disagree

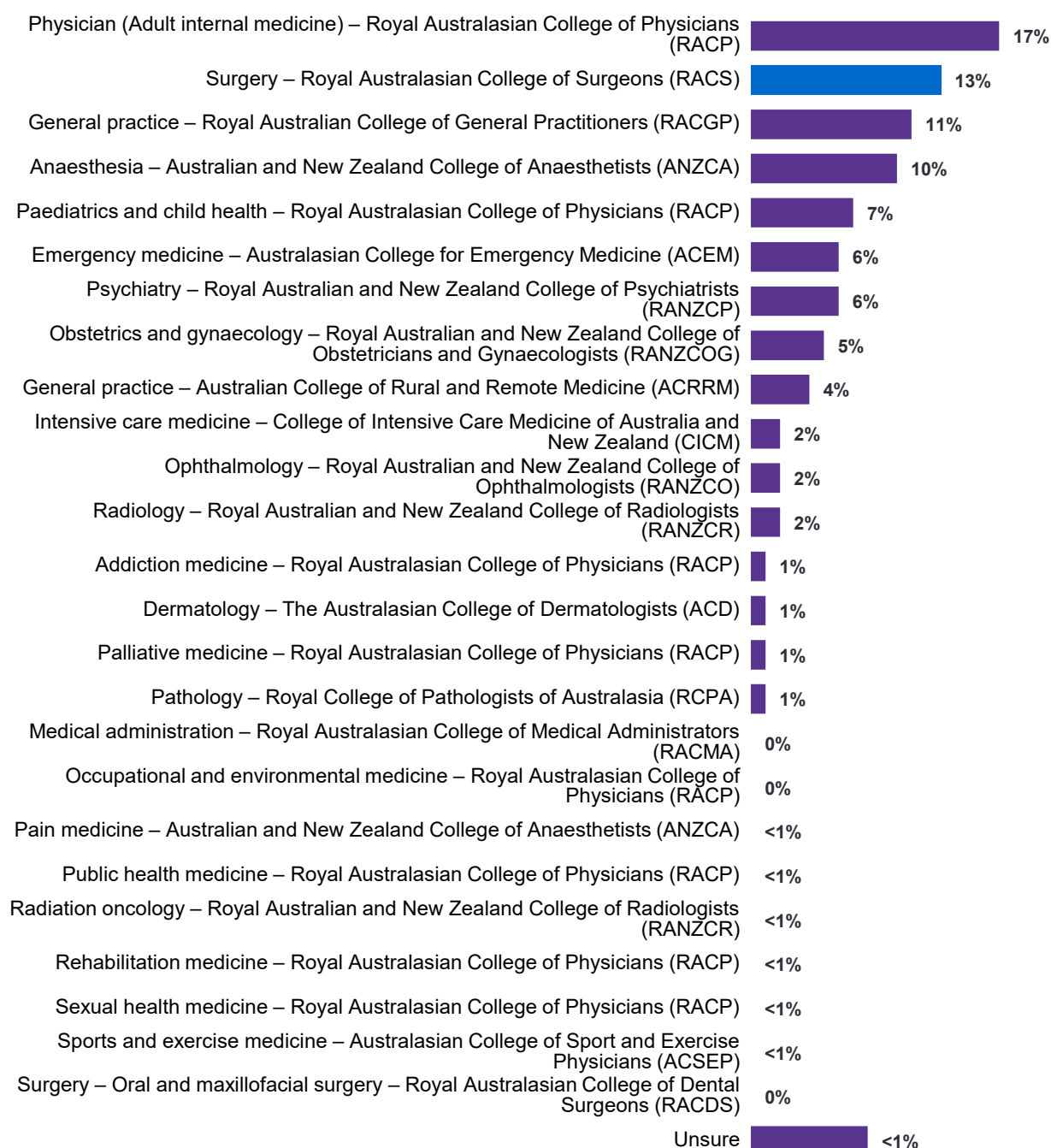
Base: Total sample
 Q54. Thinking about your future career, to what extent do you agree or disagree with the following statements?

Future career intentions

INTERNS - INTERESTED IN A SPECIALTY



SPECIALIST TRAINING PROGRAM INTERNS ARE INTERESTED IN



Base: Interns (2025 n = 912)

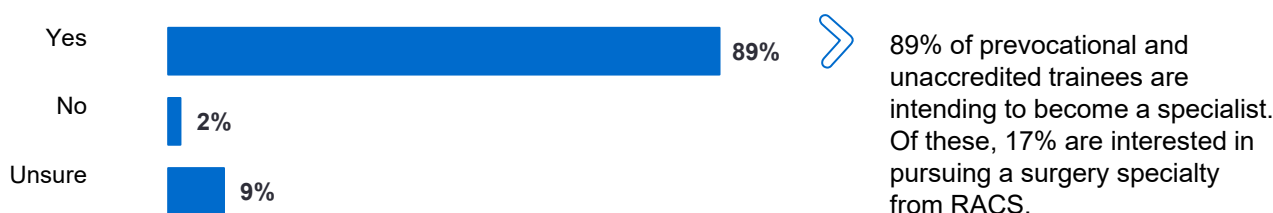
Q52. Do you intend to become a specialist?

Base: Interns interested in a specialty (2025 n = 814)

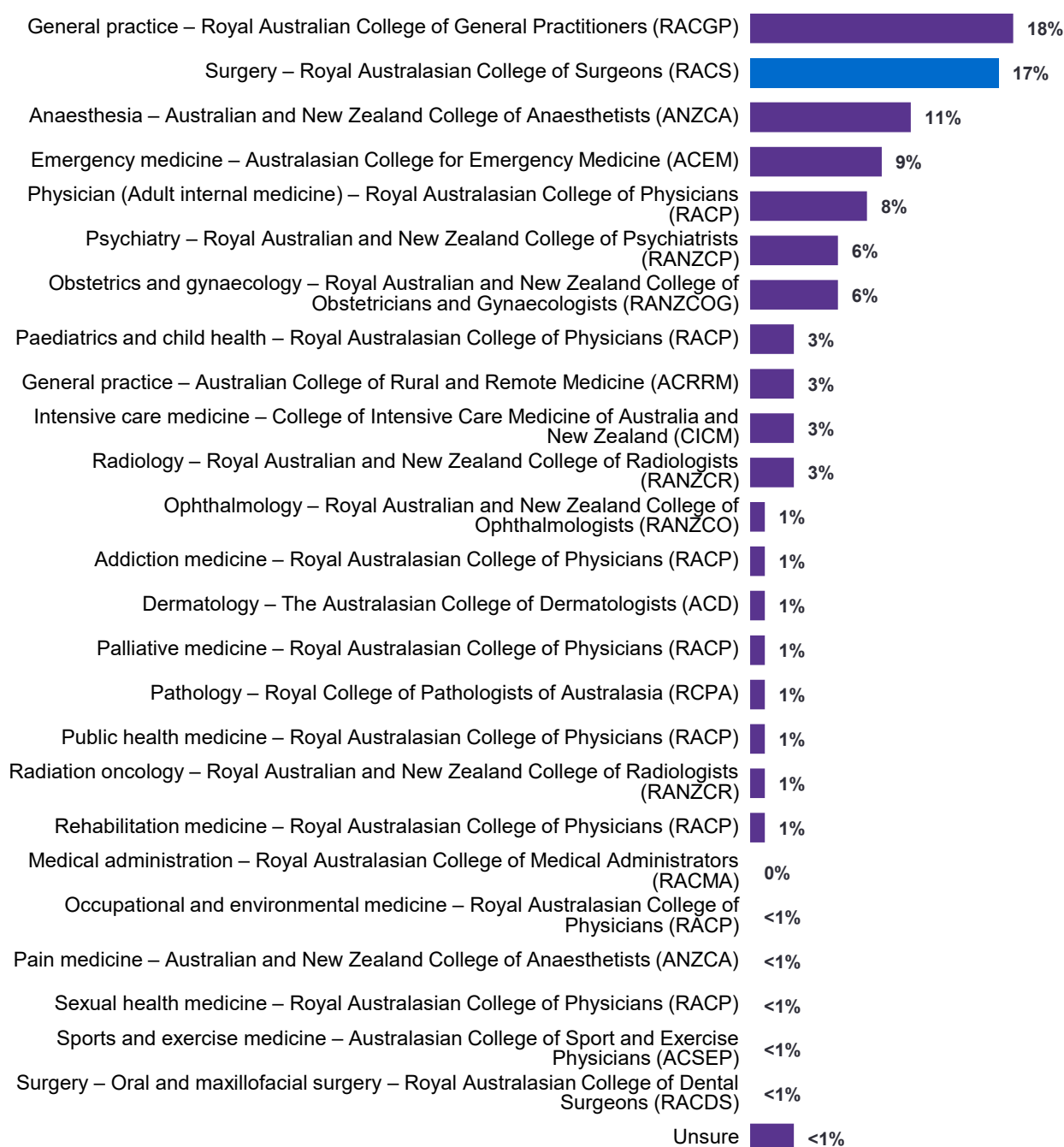
Q53. Which specialty are you most interested in pursuing?

Future career intentions

PREVOCATIONAL AND UNACCREDITED TRAINEES - INTERESTED IN A SPECIALTY



SPECIALIST TRAINING PROGRAM INTERNS ARE INTERESTED IN



Base: Prevocational and unaccredited trainees (2025 n = 2,981)

Q52. Do you intend to become a specialist?

Base: Prevocational and unaccredited trainees interested in a specialty (2025 n = 2,660)

Q53. Which specialty are you most interested in pursuing?

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the results further by using the interactive
data dashboard**