



EJD 2021-067

EJD Statement on Impact of COVID-19 on European Junior Doctors

Prior to the COVID-19 pandemic, European Junior Doctors have been facing numerous challenges regarding post-graduate training, working conditions, burnout and mental health¹. However, the ongoing COVID-19 pandemic has exacerbated existing issues and severely affected Junior Doctors throughout Europe in a negative capacity. While the experiences of Junior Doctors during the COVID-19 pandemic have varied per country, there have been overarching consequences that have affected all.

Education

The educational opportunities in specialty programs have been heavily affected by COVID-19 and many junior doctors are experiencing prolonged postgraduate training. In particular, in-person classes and lectures have been moved to online learning environments which have often been afflicted by technical problems as well as have given rise to concerns about the educational quality of such platforms. The cessation of elective procedures and surgeries brought about by the increasing volume of COVID-19 patients requiring hospitalization has forcibly disrupted the training of Junior Doctors². The decline in outpatient visits brought about by the cessation of elective procedures has limited the learning opportunities available to Junior Doctors, especially given that Junior Doctors are typically given more opportunities to practice their skills on routine procedures³. Redeployment of trainees to ICU / COVID-19 wards has been observed⁴, and may thus significantly alter educational plans for selected specialties. Reductions in clinical exposure present a particular problem as many Junior Doctors are struggling to meet caseload requirements and obtain adequate experience prior to the completion of training⁵. In the case of surgical experience, this effect has been amplified through the reduction of non-essential surgical volume and the prioritization of more experienced physicians participating in surgical activity⁶. In addition, the disruption and postponement of assessments and final exams will likely lead to training being prolonged.

¹ Lasalvia, A., Amaddeo, F., Porru, S., et al. (2021). Levels of burn-out among healthcare workers during the COVID-19 pandemic and their associated factors: A cross-sectional study in a tertiary hospital of a highly burdened area of north-east Italy. *BMJ Open*, *11*(1), 1–12

² Cubitt, L. J., Im, Y. R., Scott, C. J., Jeynes, L. C., & Molyneux, P. D. (2021). Beyond PPE: A mixed qualitative-quantitative study capturing the wider issues affecting doctors' well-being during the COVID-19 pandemic. *BMJ Open*, *11*(3), 1–8.

³ Dedeilia, A., Sotiropoulos, M., Hanrahan, J., et al. (2020). Medical and Surgical Education Challenges and innovations in the COVID-19 era: A systematic review. *In Vivo* *34*:1603-1611

⁴ Sneyd, J., Mathoulin, S., O'Sullivan, E., et al. (2020) Impact of the COVID-19 pandemic on anaesthesia trainees and their training. *British Journal of Anaesthesia* *125*(5): 450-455

⁵ Blum, P., Putzer, D., Liebensteiner, M. C., & Dammerer, D. (2021). Impact of the Covid-19 pandemic on orthopaedic and trauma surgery - A systematic review of the current literature. *In Vivo*, *35*(3), 1337–1343.

⁶ Silva, N., Laiginhas, R., Meireles, A., & Barbosa Breda, J. (2020). Impact of the COVID-19 Pandemic on Ophthalmology Residency Training in Portugal. *Acta medica portuguesa*, *33*(10), 640–648.

Working Conditions

Junior Doctors have been at the forefront of the crisis as first-line service providers. Prolonged working hours, sleep deprivation, and exceedingly high job demands have become increasingly common place amongst Junior Doctors. Despite EJD's calls to secure access to sufficient appropriate personal protective equipment (PPE)⁷, reports have suggested that trainees have been among the first to be excluded from being provided PPE during times of shortage⁸. Surveys of residents in specialties such as Obstetrics have revealed that there have sometimes been issues with PPE, with deficiencies in availability of PPE resulting in the reduction of PPE quality standards⁹. With regards to working time, experiences have varied. Some studies have indicated that Junior doctors in specialties such as neurosurgery have reported a decrease in hours worked¹⁰, whereas studies surveying Cardiothoracic trainees revealed that more than half of trainees have experienced shifts in working hours with an increase in working anti-social hours¹¹. Throughout the COVID-19 pandemic, healthcare workers experienced short- and long-term consequences to their lives and relationships¹². Healthcare workers with young children and families have suffered negative impacts on their mental health as a result of balancing the increased workloads due to COVID-19 with their family obligations¹³. Although existing scientific literature has focused on the mental health impact of COVID-19 on nurses and doctors, Junior Doctors as frontline medical staff, have not been immune to these consequences. In combination with a lack of safe and available PPE and exposure to COVID-19 positive patients, many Junior Doctors have had to self-isolate themselves from their family members and friends to protect them from infection with SARS-CoV-2. This has put significant strain on these relationships and an excessive burden on Junior Doctors mental health.

Recommendations

Considering the impacts of the COVID-19 pandemic, EJD calls for the following:

- All Junior Doctors should be able to compensate for, and not be penalized for missed training opportunities resulting from the disruption brought by the COVID-19 pandemic.
- Stakeholders involved in the setting of medical education specialty training requirements should acknowledge the new knowledge and skills acquired by Junior Doctors during the pandemic and take measures to address the concentration of knowledge and skills in the area of COVID-19 care.

⁷ [EJD Statement on the COVID-19 pandemic](#). 22nd March 2020.

⁸ Pawlak, K., Kral, J., Khan, R., et al. (2020) Impact of COVID-19 on endoscopy trainees: an international survey. *Gastrointestinal Endoscopy* 92(4):925-935

⁹ Boekhorst, F., Khattak, H., Topcu, E. G., Horal, A., & Gonçalves Henriques, M. (2021). The influence of the COVID-19 outbreak on European trainees in obstetrics and gynaecology: A survey of the impact on training and trainee. *European journal of obstetrics, gynecology, and reproductive biology*, 261, 52–58

¹⁰ Zoia, C., Raffa, G., Somma, T., et al. (2020). COVID-19 and neurosurgical training and education: an Italian perspective. *Neurosurgery training* 162:1789-1794

¹¹ Caruana, E., Patel, A., Kendall, S., et al. (2020). Impact of Coronavirus 2019 on training and well-being in sub-speciality surgery: a national survey of cardiothoracic trainees in the UK. *The Journal of Thoracic and Cardiovascular Surgery* 160 (4): 981-987

¹² Bennett P, Noble S, Johnston S, et al. COVID-19 confessions: a qualitative exploration of healthcare workers experiences of working with COVID-19. *BMJ Open* 2020;10:e043949.

¹³ Vanhaecht, K., Seys, D., Bruyneel, L., et al. (2021). COVID-19 is having a destructive impact on health-care workers' mental well-being. *International journal for quality in health care : journal of the International Society for Quality in Health Care*, 33(1)

- Regarding the duration of the pandemic period, more prolonged than initially thought, in interest of family life, we would like to underline the importance of Europe-wide implementation and proper adherence to the European Working Time Directive and an adequate work-private life balance.
- Safety of all healthcare workers should be ensured in a health crisis situation. This is received through material resources such as the adequate and timely supply of high quality personal protective equipment (PPE). Moreover, clinical leadership should also recognize how to safely manage doctors to ensure required skills and necessary rest and mental support in challenging times
- To prevent burnout and enhance the resilience of Junior Doctors, healthcare managers need to take a proactive approach in providing supportive resources such as adequate facilities to rest and recover between shifts. Healthcare managers must also provide opportunities to Junior Doctors to access counselling services.
- It is clear that a high level of safety, protection and education for healthcare workers is essential in preparing for future health crises.