Appendix - questionnaire

Part 1:

**Basic demographic data**

1. Gender
2. Age
3. Marital status
4. Number of children and/or relatives looked after at home

**Professional data**

1. Position held
2. Time spent in anesthesia training (years)
3. Time spent in independent practice (years)
4. Estimated weekly anaesthetic workload (hours)
5. Type of employment
6. How often do you see patients have negative outcomes at

 work such as death or permanent disability?

* + Never
	+ Rarely – about 10% of the time
	+ Occasionally– about 30% of the time
	+ Sometimes– about 50% of the time
	+ Frequently– about 70% of the time
	+ Usually– about 90% of the time
	+ Every time
1. How many times in the last month have you seen negative outcomes?
	* More than usual
	* Less than usual
	* Same as usual
2. How often do you feel that you don’t have the equipment to carry out your work to an appropriate standard?
	* Never
	* Rarely – about 10% of the time
	* Occasionally– about 30% of the time
	* Sometimes– about 50% of the time
	* Frequently– about 70% of the time
	* Usually– about 90% of the time
	* Every time
3. How often do you feel that you don’t have the equipment to carry out your work to an appropriate standard?
	* Never
	* Rarely – about 10% of the time
	* Occasionally– about 30% of the time
	* Sometimes– about 50% of the time
	* Frequently– about 70% of the time
	* Usually– about 90% of the time
	* Every time
4. How often do you feel you don’t have the right team around you to carry out your work to an appropriate standard?
	* Never
	* Rarely – about 10% of the time
	* Occasionally– about 30% of the time
	* Sometimes– about 50% of the time
	* Frequently– about 70% of the time
	* Usually– about 90% of the time
	* Every time
5. How often are you supervised by a senior colleague?
	* Never
	* Rarely – about 10% of the time
	* Occasionally– about 30% of the time
	* Sometimes– about 50% of the time
	* Frequently– about 70% of the time
	* Usually– about 90% of the time
	* Every time
6. How often do you feel like you do cases you are not comfortable with without support?
	* Never
	* Rarely – about 10% of the time
	* Occasionally– about 30% of the time
	* Sometimes– about 50% of the time
	* Frequently– about 70% of the time
	* Usually– about 90% of the time
	* Every time
7. Do you feel you receive your pay on time? [Yes/No]
8. Do you feel your pay is at par with the service rendered? [Yes/No]
9. Number of days spent on vacation in the previous year?

Part 2: **the Maslach Burnout Inventory Human Services Survey**

**For each question, indicate the score that corresponds to your response**

**SECTION A=EMOTIONAL EXHAUSTION, SECTION B=PERSONAL ACCOMPLISHMENT, SECTION C=DEPERSONALIZATION**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Questions**  | **Never**  | **A few times per year**  | **Once** **a** **month**  | **A few times per month**  | **Once** **a** **week**  | **A few times per week**  | **Every day**  |
| **SECTION A**  | **0**  | **1**  | **2**  | **3**  | **4**  | **5**  | **6**  |
| I feel emotionally drained by my work.  |  |  |  |  |  |  |  |
| I feel used up at the end of the workday |  |  |  |  |  |  |  |
| I feel fatigued when I get up in the morningand have to face another day on the job |  |  |  |  |  |  |  |
| Working with people all day is really a strain for me |  |  |  |  |  |  |  |
| I feel burned out from my work |  |  |  |  |  |  |  |
| I feel frustrated by my work.   |  |  |  |  |  |  |  |
| I feel I work too hard at my job.   |  |  |  |  |  |  |  |
| Working with people directly puts too much stress on me |  |  |  |  |  |  |  |
| I feel like I’m at the end of my rope.  |  |  |  |  |  |  |  |
| Total score – SECTION A   |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Questions**  | **Never**  | **A few times per year**  | **Once** **a** **month**  | **A few times per month**  | **Once** **a** **week**  | **A few times per week**  | **Every day**  |
| **SECTION B**  | **0**  | **1**  | **2**  | **3**  | **4**  | **5**  | **6**  |
| I can easily understand how my recipients feel about things |   |   |   |   |   |   |   |
| I deal very effectively with the problems of my recipients |   |   |   |   |   |   |   |
| I feel I’m positively influencing otherpeople’s lives through my work |   |   |   |   |   |   |   |
| I feel very energetic |   |   |   |   |   |   |   |
| I can easily create a relaxed atmospherewith my recipients |   |   |   |   |   |   |   |
| I feel exhilarated after working closelywith my recipients |   |   |   |   |   |   |   |
| I have accomplished many worthwhile things in this job |   |   |   |   |   |   |   |
| In my work, I deal with emotional problems very calmly |  |  |  |  |  |  |  |
| Total score – SECTION B   |   |   |   |   |   |   |   |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Questions**  | **Never**  | **A few times per year**  | **Once** **a** **month**  | **A few times per month**  | **Once** **a** **week**  | **A few times per week**  | **Every day**  |
| **SECTION C**  | **0**  | **1**  | **2**  | **3**  | **4**  | **5**  | **6**  |
| I feel I treat some recipients as if they were impersonal ‘objects |   |   |   |   |   |   |   |
|  I’ve become more callous toward people since I took this job  |   |   |   |   |   |   |   |
| **I** worry that this job is hardening meEmotionally |   |   |   |   |   |   |   |
| **I** don’t really care what happens to some recipients |   |   |   |   |   |   |   |
| **I** feel recipients blame me for some of their problems |   |   |   |   |   |   |   |
| Total score – SECTION C   |   |   |   |   |   |   |   |