

This is a copy of all Specialist GP Trainee questions.

Medical Training Survey

We are conducting a survey for the Medical Board of Australia (MBA) and Australian Health Practitioner Regulation Agency (Ahpra).

Survey description

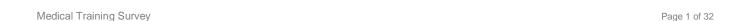
The purpose of the Medical Training Survey (MTS) is to collect data from doctors in training to:

- better understand the quality of medical training in Australia,
- identify how best to improve medical training in Australia, and
- recognise and deal with potential issues in medical training that could impact on patient safety, including environment and culture, unacceptable behaviours and poor supervision.

The results will be used as a quality improvement tool, to strengthen medical training in Australia. The results of the MTS will be published in the interests of transparency. Specialty and jurisdiction specific reports from MTS data will be generated as far as possible, while assuring participant confidentiality. Stakeholders will apply survey results to improve medical training.

This survey is being administered by EY Sweeney on behalf of the MBA and Ahpra.

For access to the EY Sweeney Privacy Policy, visit http://eysweeney.com.au/contact-us/privacy-policy.





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Your part in the Medical Training Survey

- Participation in the Medical Training Survey (MTS) is entirely voluntary.
- The online survey takes around 15 minutes to complete and the questions you will be asked are around your experience of medical training in Australia.
- You may withdraw from participating in the survey at any time without providing a reason.

We acknowledge that participation in the survey and reflection on your medical training might cause discomfort or even distress. For this reason, if you do not wish to answer a question, you may skip it and go to the next question.

Privacy information

In completing the MTS, we ask that participants don't provide responses with personal information or information that may reasonably identify an individual. Only members of the EY Sweeney team will have access to individual survey responses and will take steps to de-identify any data that might contain personal information or information that could reasonably reidentify an individual. EY Sweeney will only provide AHPRA with de-identified reports with aggregated survey data.

Any personal data collected will be treated confidentially, and anonymity preserved in reports of survey results.

All data collected will only be used for the purpose of this project.

Information you provide in the survey will be stored and handled securely. EY Sweeney use a third party provider to store data in the cloud hosted in Australia. The third party provider is subject to binding obligations to handle any stored data in accordance with the *Privacy Act 1988* (Cth) and the National Law.

Participants who go to "close" or "save and close" a partially completed survey (or go to "close" before starting), will have the option to request EY Sweeney email them a link to their survey. By providing your email address, you are giving consent for it to be used by EY Sweeney, for the purposes of sending an email with your unique survey link. Your email address will only be used for this purpose.

For access to the EY Sweeney Privacy Policy, click here (http://eysweeney.com.au/contact-us/privacy-policy) and MBA/Ahpra Privacy Policy, click here (https://www.ahpra.gov.au/About-AHPRA/Privacy.aspx). For any technical problems with this survey, please send an email by selecting the link that appears at the bottom of each page. Non-technical queries about the survey itself can be directed to Ahpra via email at MTS@ahpra.gov.au.

Data management

To maintain confidentiality and anonymity of survey responses, the survey is being administered by EY Sweeney an independent and accredited (ISO20252 Market and Social Research Standard) market research agency who is independent of the MBA and Ahpra.

Data will be reported to the MBA and Ahpra in a de-identified and aggregated format, removing any information which might identify you.

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All survey data is securely stored in Australia in accordance with The Research Society Code of Professional Behaviour, ISO 20252 – Market and Social Research Standard, AMSRO Privacy (Market and Social Research) Code 2014, Australian Privacy Principles of the Privacy Act 1988 – Privacy Amendment (Private Sector) Act 2000 and ISO 27001-2013 (Certificate for Information Security Management accreditation)

Use and sharing of survey data

Ahpra anticipate using information from the survey to:

- provide organisations with survey result reports, including benchmarking, so they can identify focus areas, develop action plans and improve medical training;
- inform sector-wide strategies and campaigns in response to medical training issues, such as workplace environment and culture, patient safety and poor supervision;
- publicly report on medical training issues; and
- provide stakeholders and the public with data about the quality of medical training.

All reporting will be conducted in a way that protects the identity of individual participants. For example:

- Reports for organisations, or groups within organisations, are only provided when there are 10 or more survey responses and in a de-identified manner.
- Data is provided to stakeholders and the public in accordance with the Acts mentioned above. EY Sweeney will only
 conduct an analysis or release data to the MBA, Ahpra and key stakeholders when the identity of individuals is
 protected.
- EY Sweeney does not provide individual survey responses to managers or employers.

Complaints

Should you have any concerns about your rights as a survey participant, or you have a complaint about the manner in which the survey is being conducted, you can contact EY Sweeney as the external provider via phone (1800 983 160) or email medicaltrainingsurvey@au.ey.com.

Point of contact

The Ahpra point of contact for this project is MTS@ahpra.gov.au.

Should you have any complaints or concerns about the manner in which this project is conducted, please do not hesitate to contact the researchers listed above. If you may prefer to contact the membership body for market and social research, The Research Society, on 02 9566 3100 or you can visit https://researchsociety.com.au/.

If you have any questions regarding the content of the survey, or experience any technical problems with the survey, please send an e-mail to medicaltrainingsurvey@au.ey.com or contact 1800 983 160. This email address can be found at the bottom of each page of the survey.

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DEMOGRAPHICS

The questions in this survey focus on your recent experiences as a doctor in training. As this survey is being completed by all doctors in training, please answer the questions in respect to your current situation and stage in your training journey.

Q1.	What is your postgraduate year?	PGY1	0 01
	Please select one response only.	PGY2	0 02
		PGY3	0 03
		PGY4	0 04
		PGY5	O 05
		PGY6	O 06
		PGY7	0 07
		PGY8	0 08
		PGY9	O 09
		PGY≥10	O 10
Q2.	Are you employed:	Full time	0 1
	Please select one response only.	Part time	0 2
		Casually	0 3
		On leave for most of your current rotation	TERMINATE 1 ○ 99

TERMINATE 1:

Thank you for your interest in completing the Medical Training Survey. At this stage we are only after responses from doctors in training that are not on leave for extended periods – we look forward to receiving your feedback on medical training in future years.

If you would like to contact us regarding this please email medicaltrainingsurvey@au.ey.com

Should you need to contact the MBA and Ahpra please email MTS@ahpra.gov.au.

Q3.	Are you in a college training program?	Yes	[CONTINUE] 0 1
		No	[GO TO Prevocational and Unaccredited Trainee survey] O 2

Throughout the survey, we have used the term "setting" to describe the last place or area where you have practised or trained for at least two weeks. This would normally be your current setting, workplace, placement or rotation, or might be your previous setting, if you have only been practising or training in your current setting for less than two weeks.

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Q4.	In which state or territory is your current term/rotation/placement based?	ACT	0 01
	territrotation placement bacca.	NSW	0 02
	If you have only been practising or training	NT	0 03
	in your current state or territory for less than two weeks, please select the state or	QLD	0 04
	territory for your previous setting.	SA	0 05
	Please select one response only.	Tas.	0 06
		Vic.	0 07
		WA	0 08
		Outside Australia TERMINATE 2	0 09

TERMINATE 2:

Thank you for your interest in completing the Medical Training Survey. At this stage we are only after responses from doctors who are in Australia for their current placement – we look forward to receiving your feedback on medical training in future years.

If you would like to contact us regarding this please email medicaltrainingsurvey@au.ey.com

Should you need to contact the MBA and AHPRA please email MTS@ahpra.gov.au.

Q5a.	Is your current term/rotation/placement in a hospital? If you have only been practising or training in your current term/rotation/position or placement for less than two weeks, please consider your previous setting.	Yes No	O 1 O 2
ASK II	F Q5a=1	PIPE RESPONSES BY FROM STATE LIST Q4	0 01
Q5b.	Which hospital do you work at?		0 02
	If you work at more than one hospital,		0 03
	select where you spend most time.		0 04
	If you have only been practising or training		0 05
	in your current hospital for less than two		0 06
	weeks, please consider your previous hospital.	Other	0 97
	Please type in and select.	Do not wish to specify	O 98

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ASK IF Q5a=2 OR Q5b=97 OR Q5b=98 ELSE Metropolitan area (e.g. capital city – Sydney, Melbourne, **PIPE FROM DATABASE** Brisbane, Adelaide, Perth, Darwin, Hobart, Canberra) Regional area (e.g. within or less than 15km from a town with a Q6. Is your current setting in a ...? population of at least 15,000 that is not a capital city) 0 2 Rural area (e.g. more than 15km from the closest town with a Please select one response only. population of at least 15,000) 0 3 **HOVERTEXT FOR 'SETTING'** O 99 Setting is the current or most recent Do not wish to specify workplace, placement or rotation where at least 2 weeks have been completed as part of your training. Q7. What is your role in the setting? 0_1 Resident Medical Officer / Hospital Medical Officer Principal House Officer 0 2 Please select one response only. Career Medical Officer 0 3 **HOVERTEXT FOR 'SETTING'** 0 4 Registrar Setting is the current or most recent Unaccredited Registrar 0 5 workplace, placement or rotation where at least 2 weeks have been completed as part Other O 97 of your training.





Q8a. Which area are you currently practising in?

If you have only been practising or training in your current state or territory for less than two weeks, please select the state or territory for your previous setting.

Please select one response only.

Addiction medicine	0 01
Anaesthesia	0 02
Dermatology	0 03
Emergency medicine	0 04
General practice	0 05
Intensive care medicine	0 06
Medical administration	0 07
Obstetrics and gynaecology	0 08
Occupational and environmental medicine	0 09
Ophthalmology	0 10
Paediatrics and child health (inc. specialties)	0 11
Pain medicine	0 12
Palliative medicine	0 13
Pathology	0 14
Physician Adult medicine (inc. specialties)	0 15
Psychiatry	0 16
Public health medicine	0 17
Radiation oncology	0 18
Radiology	0 19
Rehabilitation medicine	0 20
Sexual health medicine	0 21
Sport and exercise medicine	0 22
Surgery	0 23
Other	0 97

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ASK IF Q8a = 4 | 6 | 8 | 11 | 14 | 15 | 19 | 23

Q8b. If applicable, which subspecialty area are you practising in?

Please select one response only.

Emergency Medicine	[04]
Paediatric emergency medicine	0 12
Not applicable	0 98
Prefer not to say	O 99
Intensive care medicine	[06]
Paediatric intensive care	0 01
Not applicable	0 98
Prefer not to say	O 99
Obstetrics and gynaecology	[80]
Gynaecological oncology	O 60
Maternal-fetal medicine	0 61
Obstetrics and gynaecological ultrasound	0 62
Reproductive endocrinology and infertility	0 63
Urogynaecology	0 64
Not applicable	0 98
Prefer not to say	O 99
Paediatrics and child health	[11]
General paediatrics	0 06
Paediatric clinical genetics	0 07
Community child health	0 08
Neonatal and perinatal medicine	O 09
Paediatric cardiology	0 10
Paediatric clinical pharmacology	0 11
Paediatric emergency medicine	0 12
Paediatric endocrinology	0 13
Paediatric gastroenterology and hepatology	0 14
Paediatric haematology	O 15
Paediatric immunology and allergy	0 16
Paediatric infectious diseases	0 17
Paediatric intensive care medicine	0 18
Paediatric medical oncology	O 19
Paediatric nephrology	0 20
Paediatric neurology	0 21
Paediatric nuclear medicine	0 22
Paediatric palliative medicine	0 23
Paediatric rehabilitation medicine	0 24
Paediatric respiratory and sleep medicine	O 25
Paediatric rheumatology	O 26
Not applicable	0 98
Prefer not to say	O 99

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Pathology	[14]
General pathology	0 27
Anatomical pathology (including cytopathology)	0 28
Chemical pathology	O 29
Haematology	0 30
Immunology	0 31
Microbiology	0 32
Forensic pathology	0 33
Not applicable	0 98
Prefer not to say	O 99
Physician Adult medicine	[15]
General medicine	0 34
Cardiology	0 35
Clinical genetics	0 36
Clinical pharmacology	0 37
Endocrinology	0 38
Gastroenterology and hepatology	0 39
Geriatric medicine	0 40
Haematology	0 41
Immunology and allergy	0 42
Infectious diseases	0 43
Medical oncology	0 44
Nephrology	0 45
Neurology	0 46
Nuclear medicine	0 47
Respiratory and sleep medicine	0 48
Rheumatology	0 49
Not applicable	0 98
Prefer not to say	O 99

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Radiology	[19]
Diagnostic radiology	0 02
Diagnostic ultrasound	0 03
Nuclear medicine	0 04
Not applicable	0 98
Prefer not to say	O 99
Surgery	[23]
General surgery	0 50
Orthopaedic surgery	0 51
Cardio-thoracic surgery	0 52
Neurosurgery	0 53
Otolaryngology – head and neck surgery	0 54
Oral and maxillofacial surgery	0 55
Paediatric surgery	0 56
Plastic surgery	0 57
Urology	0 58
Vascular surgery	O 59
Not applicable	0 98
Prefer not to say	O 99



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TRAINING CURRICULUM

In this next section, we would like to know about the training program/s you have undertaken.

Q9. Which specialist training program(s) are you doing?

Please select all that apply, up to a maximum of two.

PROGRAMMER NOTE:
CREATE HIDDEN VARIABLE
[COLLEGE] FOR PIPING, ROTATE TEXT
AFTER THE EM DASH, REMOVE ANY
"THE" PREFIXES

If not selecting ACRRM or RACGP go to:

Specialist Trainee (non-GP) survey

Addiction medicine – The Royal Australasian College of Physicians (RACP)	□ 01
Anaesthesia – Australian and New Zealand College of	
Anaesthetists (ANZCA)	□ 02
<u>Dermatology – The Australasian College of Dermatologist</u> (ACD)	t <u>s</u> □ 03
Emergency medicine – Australasian College for Emergen Medicine (ACEM)	<u>cy</u> □ 04
woodonio (rtortitin)	□ 05
General practice – The Royal Australian College of General Practitioners (RACGP) [Continue]	<u>ral</u> □ 06
Intensive care medicine – College of Intensive Care Medic Australia and New Zealand (CICM)	cine of □ 09
Medical administration – The Royal Australasian College Medical Administrators (RACMA)	<u>of</u> □ 10
Obstetrics and gynaecology – The Royal Australian and N Zealand College of Obstetricians and Gynaecologists (RANZCOG)	<u>lew</u> □ 11
Occupational and environmental medicine – The Royal Australasian College of Physicians (RACP)	<u> 12</u>
Ophthalmology – The Royal Australian and New Zealand College of Ophthalmologists (RANZCO)	□ <u>13</u>
Paediatrics and child health – The Royal Australasian Col Physicians (RACP)	lege of □ 14
Pain medicine – Australian and New Zealand College of Anaesthetists (ANZCA)	<u>□ 15</u>
Palliative medicine – The Royal Australasian College of Physicians (RACP)	□ 1 <u>6</u>
Pathology – The Royal College of Pathologists of Australa (RCPA)	<u>asia</u> □ 17
Physician – The Royal Australasian College of Physicians (RACP)	<u>3</u> 18
Psychiatry – The Royal Australian and New Zealand Colle Psychiatrists (RANZCP)	ege of
Public health medicine – The Royal Australasian College Physicians (RACP)	<u>of</u> □ 20
Radiation oncology – The Royal Australian and New Zeal College of Radiologists (RANZCR)	<u>and</u> □ 21
Radiology – The Royal Australian and New Zealand Colle Radiologists (RANZCR)	ge of 22
Rehabilitation medicine – The Royal Australasian College Physicians (RACP)	of □ 23
Sexual health medicine – The Royal Australasian College Physicians (RACP)	of □ 24
Sports and exercise medicine – Australasian College of S and Exercise Physicians (ACSEP)	port 25
Surgery – Royal Australasian College of Surgeons (RACS	

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			•	
		Surgery – Oral and maxillofacial surgery – Royal College of Dental Surgeons (RACDS)	Austra	ılasian □ 27
ASK F	OR EACH COLLEGE IN Q9	1 or less		0 01
040	Harris and the control of the	2		0 02
Q10.	How many years have you been in the [INSERT COLLEGE SELECTED] training	3		O 03
	program?	4		0 04
	Please select one response only.	5		0 05
		6		0 06
		7		0 07
		8		0 08
		9		0 09
		More than 10		0 10
		Don't know		0 11
Q11a.	Are you training for a career in general	A fully funded participant (AGPT or RVTS)		0 1
	practice as:	A partial funded participant (RACGP or ACRRM)		
	Please select one response only.	support)		0 2
		A self-funded participant		0 3
ASK II	ASK IF Q11a=1 Australian General Practice Training (AGF			0 1
Q11b.	Which training program are you in? Please select one response only.	The Remote Vocational Training Scheme (RVTS	5)	0 2
ASK II	F Q11a=2 OR 3	Pameta Vacational Training Schoma		0 1
		Remote Vocational Training Scheme The ACRRM Independent Pathway		0 2
Q11c.	Who provides your GP training? Please select one response only.	The RACGP Practice Experience Program		0 3
	riease select one response only.	Unsure		0 96
		Not applicable		0 97
Q12.	If applicable, which Regional Training Organisation provides your GP training?	GP Synergy	RTO	0 01
	Organisation provides your Cr. training.	Eastern Victoria GP Training	RTO	0 02
	Please select one response only.	Murray City Country Coast GP Training	RTO	0 03
		GP Training Tasmania	RTO	0 04
		GPeX	RTO	0 05
			RTO	0 06
		·	RTO	0 07
		Ĭ	RTO	0 08
			RTO	0 09
		Unsure		O 96
		Not applicable		0 97

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The following questions relate to the main organisation that provides your GP training.

ASK IF Q12=1 TO 9

Q13. Thinking about your **[RESPONSE FROM Q12]** training program, to what extent do you agree or disagree with each of the following statements?

Please select one response per row.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	The [RESPONSE FROM Q12] education program meets the College/s requirements	0 5	0 4	0 3	O 2	0 1
2.	The [RESPONSE FROM Q12] education program is preparing me as a specialist	0 5	0 4	0 3	O 2	0 1
3.	The [RESPONSE FROM Q12] education program is advancing my knowledge	0 5	0 4	0 3	O 2	0 1

ASK IF Q12=1 TO 9

Q14. Thinking about how **[RESPONSE FROM Q12] communicates** with you about your training program, to what extent do you agree or disagree with the following statements?

Please select one response per row.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	[RESPONSE FROM Q12] clearly communicates the requirements of my training program	0 5	0 4	0 3	O 2	O 1
2.	[RESPONSE FROM Q12] clearly communicates with me about changes to my training program and how they affect me	0 5	0 4	0 3	O 2	0 1
3.	I know who to contact at [RESPONSE FROM Q12] about my education program	O 5	0 4	O 3	O 2	0 1

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ASK IF Q12=1 TO 9

Q15. Thinking about how **[RESPONSE FROM Q12] engages with you**, to what extent do you agree or disagree with the following statements?

Please select one response per row.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	[RESPONSE FROM Q12] seeks my views on the structure and content of the education program	O 5	0 4	0 3	O 2	O 1
2.	I am represented (by doctors in training e.g. registrar liaison officer) on [RESPONSE FROM Q12]'s training and/or education committees	O 5	0 4	0 3	O 2	0 1
3.	I am able to discuss the [RESPONSE FROM Q12] education program with other doctors	O 5	0 4	0 3	0 2	0 1
4.	[RESPONSE FROM Q12] provides me with access to psychological and/or mental health support services	0 5	0 4	0 3	0 2	0 1

PROGRAMMER NOTE: LOOP THIS SECTION FOR ALL SELECTIONS AT Q9 EXCEPT IF 'OTHER'. ENSURE COLLEGES HAVE EQUAL ODDS OF BEING FIRST OR SECOND SELECTION

The following questions relate to [INSERT COLLEGE FROM Q9].

Q16. Thinking about your **[INSERT COLLEGE FROM Q9]** training program, to what extent do you agree or disagree with each of the following statements?

Please select one response per row.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Unsure
1.	The College training program is relevant to my development	O 5	0 4	0 3	O 2	0 1	O 99
2.	There are opportunities to meet the requirements of the training program in my current setting	0 5	0 4	0 3	0 2	0 1	O 99
3.	I understand what I need to do to meet my training program requirements	0 5	0 4	0 3	0 2	0 1	O 99

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Q17. Thinking about how [INSERT COLLEGE FROM Q9] communicates with you about your training program, to what extent do you agree or disagree with the following statements?

Please select one response per row.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Does not apply
1.	My College clearly communicates the requirements of my training program	O 5	0 4	0 3	O 2	0 1	O 99
2.	My College clearly communicates with me about changes to my training program and how they affect me	0 5	0 4	0 3	0 2	0 1	O 99
3.	I know who to contact at the College about my training program	0 5	0 4	0 3	0 2	0 1	O 99

Q18a. In the last 12 months, have you sat one or more exams from...? Please select one response per row. Yes No 0 2 0 1 1. PIPE [College]

ASK IF Q18aX=1

Q18b. Have you received the results of your most recent exam from...?

Please select one response per row.

	Yes	No
1. PIPE [College]	0 1	0 2

ASK IF Q18bX=1

Q18c. Did you pass the exam for...?

Please select one response per row.

	Yes	No	Prefer not to say
1. PIPE [College]	0 1	0 2	O 99

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ASK IF Q18a=1

Q19. Thinking about all your **[INSERT COLLEGE FROM Q9] exam(s)** not just the most recent, to what extent do you agree or disagree with the following statements?

Please select one response per row.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Not applicable
1.	The exam(s) always reflected the College training curriculum	0 5	0 4	0 3	0 2	0 1	O 99
2.	The information the College provided about the exam(s) was always accurate and appropriate	0 5	0 4	0 3	0 2	0 1	O 99
3.	The exam(s) always ran smoothly on the day	0 5	0 4	0 3	O 2	0 1	O 99
4.	The exam(s) were always conducted fairly	0 5	0 4	0 3	O 2	0 1	O 99
5.	I received useful feedback about my performance in the exam(s)	0 5	0 4	0 3	O 2	0 1	O 99
6.	The feedback is timely	0 5	0 4	0 3	0 2	0 1	O 99
7.	I received support from my College when needed	0 5	0 4	0 3	O 2	0 1	O 99

Q20. Thinking about how **[INSERT COLLEGE FROM Q9] engages with you**, to what extent do you agree or disagree with the following statements?

Please select one response per row.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	The College seeks my views on the training program	O 5	0 4	0 3	0 2	0 1
2.	I am represented by doctors in training on the College's training and/or education committees	0 5	0 4	0 3	O 2	0 1
3.	I am able to discuss the College training program with other doctors	O 5	0 4	0 3	0 2	0 1
4.	The College provides me with access to psychological and/or mental health support services	0 5	0 4	0 3	O 2	0 1

PROGRAMMER NOTE: SHOW SECOND COLLEGE (IF APPLICABLE) AND END OF LOOP

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ORIENTATION

In this next section, we would like to know more about your experiences in your workplace.

This would normally be your current setting, workplace, placement or rotation, or might be your previous setting, if you have only been practising or training in your current setting for less than two weeks.

If you have more than one current setting, please consider the setting where you spend the most time.

Q21a.	Did you receive an orientation to your setting? HOVERTEXT FOR 'SETTING' Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.	Yes, a formal orientation Yes, but it was largely informal No	Go to Q22	O 1 O 2 O 3			
Q21b.	orientation?	Excellent Good Average Poor		5432			
	Please select one response only.	Terrible		0 1			
	CLINICAL SUPERVISION						

In this next section, we would like to know more about the supervision you receive in your setting.

Q22. In your setting, who mainly provides your day-to-day clinical supervision?		Specialist (including specialist GP)	0 1
	day to day omnoar supervision.	Registrar	0 2
	Please select one response only.	Other doctor	0 3
	HOVERTEXT FOR 'SETTING'	Nurse	0 4
	Setting is the current or most recent workplace, placement or rotation where at	Other	0 5
	least 2 weeks have been completed as part of your training.	I don't have a clinical supervisor Go to Q26	0 6

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ASK IF Q22=1 TO 5

Q23. To what extent do you agree or disagree with the following statements?

In my setting, if my clinical supervisor(s) is not available...

Please select one response per row.

HOVERTEXT FOR 'SETTING'

Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	I am able to contact other senior medical staff IN HOURS if I am concerned about a patient	0 5	O 4	0 3	O 2	O 1
2.	I am able to contact other senior medical staff AFTER HOURS if I am concerned about a patient	0 5	0 4	0 3	0 2	0 1





ASK IF Q22=1 TO 5

Q24. We'd now like you to give a rating for the following statements, with 5 stars indicating 'very good' and 1 star indicating 'very poor'.

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

Please select one response per row.

HOVERTEXT FOR 'SETTING'

Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.

PROGRAMMER NOTE: STAR RATINGS

		1	2	3	4	5
1.	Helpfulness	0 5	0 4	0 3	0 2	0 1
2.	Accessibility	0 5	0 4	0 3	0 2	0 1
3.	Regular, INFORMAL feedback	0 5	0 4	0 3	O 2	0 1
4.	Regular, FORMAL feedback	0 5	0 4	0 3	0 2	0 1
5.	Usefulness of feedback	0 5	0 4	0 3	O 2	0 1
6.	Discussions about my goals and learning objectives	O 5	0 4	0 3	0 2	0 1
7.	Meeting your training plan/pathway requirements	O 5	0 4	O 3	O 2	0 1
8.	Including opportunities to develop your skills	O 5	0 4	O 3	O 2	0 1
9.	Allowing for an appropriate level of responsibility	0 5	0 4	0 3	O 2	0 1
10.	Ensuring that you only perform work that you are ready for or have the experience to address	0 5	0 4	0 3	0 2	0 1

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ASK IF Q22=1 TO 5		Excellent	0 5
Q25.	For your setting, how would you rate the	Good	0 4
	quality of your clinical supervision?	Average	0 3
	Plance calest one recognice only	Poor	0 2
	Please select one response only. HOVERTEXT FOR 'SETTING'	<u>Terrible</u>	0 1
	Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.		
Q26.	Has your performance been assessed in	Yes	0 1
	your setting?	No – but this is scheduled	0 2
	HOVERTEXT FOR 'SETTING'	No – but I would like to be	0 3
	Setting is the current or most recent workplace, placement or rotation where at	No – it's not necessary	0 4
	least 2 weeks have been completed as part	Unsure	0 5
	of your training.		

ACCESS TO TEACHING

Q27. Thinking about the **development of your skills**, to what extent do you agree or disagree with the following statements?

In my setting...

Please select one response per row.

HOVERTEXT FOR 'SETTING'

Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Not applicable
1.	There is a range of opportunities to develop my clinical skills	0 5	0 4	0 3	0 2	0 1	O 99
2.	There is a range of opportunities to develop my procedural skills	0 5	0 4	0 3	0 2	0 1	O 99
3.	There is a range of opportunities to develop my non-clinical skills	0 5	0 4	0 3	0 2	0 1	O 99
4.	I can access the opportunities available to me	0 5	0 4	0 3	0 2	0 1	O 99
5.	I have to compete with other doctors for access to opportunities	0 5	0 4	0 3	0 2	0 1	O 99
6.	I have to compete with other health professionals for access to opportunities	0 5	0 4	0 3	0 2	0 1	O 99

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Q28. Thinking about **access to teaching and research** in your setting, to what extent do you agree or disagree with the following statements?

Please select one response per row.

HOVERTEXT FOR 'SETTING'

Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	I have access to protected study time/leave	O 5	0 4	0 3	0 2	0 1
2.	ASK IF Q12=1 TO 9 I am able to attend [RESPONSE FROM Q17] education events	O 5	O 4	0 3	O 2	0 1
3.	I am able to attend conferences, courses and/or external education events	O 5	0 4	0 3	O 2	0 1
4.	My GP supervisor supports me to attend formal and informal teaching sessions	O 5	0 4	0 3	0 2	0 1
5.	My employer supports me to attend formal and informal teaching sessions	O 5	0 4	0 3	O 2	0 1
6.	I am able participate in research activities	O 5	0 4	0 3	0 2	0 1

Q29. In your setting, do you have sufficient opportunities to develop your...

Please select one response per row.

HOVERTEXT FOR 'SETTING'

Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.

		Yes	No	Not applicable
1.	Theoretical knowledge	0 1	0 2	0 3
2.	Clinical skills	0 1	0 2	0 3
3.	Procedural skills	0 1	0 2	0 3
4.	Ethics	0 1	0 2	0 3
5.	Leadership and management	0 1	0 2	0 3
6.	Communication	0 1	0 2	0 3
7.	Cultural safety	0 1	0 2	0 3
8.	Research	0 1	0 2	0 3

describe th training red responsibil	Which of the following statements best describe the interaction between your training requirements and the responsibilities of your job? Please select one response only.	My job responsibilities never prevent me from meeting my training requirements O 1 My job responsibilities rarely prevent me from meeting my training requirements O 2
		My job responsibilities sometimes prevent me from meeting my training requirements O 3 My job responsibilities often prevent me from meeting my training requirements O 4

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Q31. Which of the following educational opportunities are available to you in your current setting?

HOVERTEXT FOR 'SETTING'

Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.

Please select one response per row.

		Yes	No	Unsure
1.	Formal education program	0 1	0 2	0 3
2.	Online modules (formal and/or informal)	0 1	0 2	0 3
3.	Teaching in the course of patient care (bedside teaching)	0 1	0 2	0 3
4.	Team or unit based activities HOVERTEXT Such as mortality and morbidity audits (M&Ms), other quality assurance activities, case presentations and seminars, journal club, radiology and pathology meetings	0 1	O 2	O 3
5.	Medical/surgical and/or hospital-wide meetings such as grand round and/or practice based meetings	0 1	O 2	0 3
6.	Multidisciplinary meetings	0 1	0 2	0 3
7.	Simulation teaching	0 1	0 2	0 3

Q32. To what extent do you agree or disagree that the following educational activities have been useful in your development as a doctor?

Please select one response per row.

PROGRAMMER NOTE: SHOW Q31 RESPONSES Q31CX=1, SKIP IF NO Q31CX=1

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	Formal education program	0 5	0 4	0 3	0 2	0 1
2.	Online modules (formal and/or informal)	0 5	0 4	0 3	0 2	0 1
3.	Teaching in the course of patient care (bedside teaching)	0 5	0 4	0 3	O 2	0 1
4.	Team or unit based activities HOVERTEXT Such as mortality and morbidity audits (M&Ms), other quality assurance activities, case presentations and seminars, journal club, radiology and pathology meetings	O 5	O 4	0 3	0 2	0 1
5.	Medical/surgical and/or hospital-wide meetings such as grand round and/or practice based meetings	0 5	0 4	0 3	0 2	0 1
6.	Multidisciplinary meetings	0 5	0 4	0 3	0 2	0 1
7.	Simulation teaching	0 5	0 4	0 3	0 2	0 1

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Q33.	Overall, how would you rate the quality of the teaching sessions?	Excellent	0 5
	the teaching seconomic.	Good	0 4
	Please select one response only.	Average	0 3
		Poor	02
		Terrible	<u>0 1</u>

WORKPLACE ENVIRONMENT AND CULTURE

Q34. How would you rate the quality of the following in your setting?

HOVERTEXT FOR 'SETTING'

Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.

Please select one response per row.

		Excellent	Good	Average	Poor	Terrible	Not provided	Not applicable
1.	Reliable internet for training purposes	0 5	0 4	0 3	0 2	0 1	O 98	O 99
2.	Educational resources	0 5	0 4	0 3	0 2	0 1	O 98	O 99
3.	Working space, such as a desk and computer	0 5	0 4	0 3	0 2	0 1	O 98	O 99
4.	Teaching spaces	0 5	0 4	0 3	0 2	0 1	O 98	O 99

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Q35. Thinking about the **workplace environment and culture in your setting**, to what extent do you agree or disagree with the following statements?

HOVERTEXT FOR 'SETTING'

Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.

Please select one response per row.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	Most senior medical staff are supportive	0 5	0 4	0 3	O 2	0 1
2.	My workplace supports staff wellbeing	0 5	0 4	0 3	0 2	0 1
3.	In practice, my workplace supports me to achieve a good work/life balance	0 5	0 4	0 3	O 2	0 1
4.	I have a good work/life balance	0 5	0 4	0 3	0 2	0 1
5.	Bullying, harassment and discrimination (including racism) by anyone is not tolerated at my workplace	0 5	0 4	0 3	0 2	0 1
6.	I know how to raise concerns/issues about bullying, harassment and discrimination (including racism) in my workplace	0 5	0 4	0 3	0 2	0 1
7.	I am confident that I could raise concerns/issues about bullying, harassment and discrimination (including racism) in my workplace	0 5	0 4	0 3	0 2	0 1
8.	I could access support from my workplace if I experienced stress or a traumatic event	0 5	0 4	0 3	O 2	0 1

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Q36a. Thinking about your workplace, have you experienced and/or witnessed any of the following in the past 12 months?

Please select all that apply per column.

PROGRAMMER NOTE: REFERENCE TO BE LOCATED AT BOTTOM OF QUESTION

Australian Human Rights Commission (AHRC) (2014) *Workplace discrimination, harassment and bullying,* www.humanrights.gov.au/employers/good-practice-good-business-factsheets/workplace-discrimination-harassment-and-bullying

		1) Experienced	2) Witnessed
1.	Bullying The Fair Work Amendment Act 2013 defines workplace bullying as repeated unreasonable behaviour by an individual towards a worker which creates a risk to health and safety.*	□ 1	□ 1
2.	Harassment Harassment is behaviour which victimises, humiliates, insults, intimidates or threatens an individual or group due to the person's characteristics, like their race, religion, gender or sexual orientation.	□ 2	□ 2
3.	Discrimination Discrimination includes adverse actions or being treated less favourably because of a person's characteristics, like their race, religion, gender or sexual orientation.	□ 3	□ 3
98.	None of the above	O 98	O 98

SHOW IF Q36xa.1=1|2|3 OR Q36xa.2=1|2|3

Q36b. Who was responsible for the bullying, harassment and/or discrimination (including racism) that you experienced/witnessed...

Please select all that apply.

	1) Experienced	2) Witnessed
1. Senior medical staff (e.g. consultants, specialists)	□ 1	□ 1
Medical colleague (e.g. registrar or other doctors in training)	□ 2	□ 2
3. Nurse or midwife	□ 3	□ 3
4. Other health practitioner	□ 4	□ 4
5. Hospital management/administrative staff	□ 5	□ 5
6. Patient and/or patient family/carer	□ 6	□ 6
7. Other	□ 7	□ 7
99. Prefer not to say	O 99	O 99

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0 3

SHOW IF Q36xb.1=1|2|3|4|5|7 OR Q36xb.2=1|2|3|4|5|7 Q36c. The person(s) responsible was... Please select all that apply. 1) Experienced 2) Witnessed □ 1 □ 1 1. In my team □ 2 □ 2 2. In my department but not in my team □ 3 □ 3 3. From another department 0 99 99. Prefer not to say 0 99 SHOW IF Q36xc.1=1|2|3 or Q36xc.2=1|2|3 Q36d. Was the person(s) one of your supervisors? Please select one response 1) Experienced 2) Witnessed 0 1 0 1 1. Yes 0 2 0 2 2. No O 99 O 99 3. Prefer not to say SHOW IF Q36xa.1=1|2|3 OR Q36xa.2=1|2|3 Q36e. Have you reported it? Please select one response 1) Experienced 2) Witnessed 0 1 0 1 1. Yes 0 2 0 2 2. No SHOW IF Q36xe.1=1 OR Q36xe.2=1 Q36f. Has the report been followed-up? Please select one response 1) Experienced 2) Witnessed 0 1 0 1 1. Yes 0 2 0 2 2. No

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3. Unsure

0 3



WORKPLACE ENVIRONMENT AND CULTURE

Q37. If you needed support, do you know how to access support for your health (including for stress and other psychological distress)?

Yes	0 1
No	0 2
Unsure	0 3

PROGRAMMER NOTE: SHOW AT BOTTOM OF QUESTION

If you need to access support for your health, contact your GP or visit www.drs4drs.com.au for information on services in your area.

Q38. How often do the following adversely affect your wellbeing in your setting?

HOVERTEXT FOR 'SETTING'

Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.

Please select one response per row. PROGRAMMER NOTE: SPLIT ACROSS TWO SCREENS

		Always	Most of the time	Sometimes	Never
01.	The amount of work I am expected to do	0 4	0 3	0 2	0 1
	·	0 4	0 3	0 2	0 1
02.	Having to work paid overtime		•		
03.	Having to work unpaid overtime	0 4	0 3	0 2	0 1
04.	Dealing with patient expectations	0 4	0 3	0 2	0 1
05.	Dealing with patients' families	0 4	0 3	0 2	0 1
06.	Expectations of supervisors	0 4	0 3	0 2	0 1
07.	Supervisor feedback	0 4	0 3	0 2	0 1
08.	Having to relocate for work	0 4	0 3	0 2	0 1
09.	Being expected to do work that I don't feel confident doing	0 4	O 3	O 2	0 1
10.	Limited access to senior clinicians	0 4	0 3	0 2	0 1
11.	Lack of appreciation	0 4	0 3	0 2	0 1
12.	Workplace conflict	0 4	0 3	0 2	0 1

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Q39.	How would you rate your workload in y setting?	our	Very lig	ght			0 1	
			Light				0 2	
	Please select one response only.		Moderate				0 3	
	HOVERTEXT FOR 'SETTING' Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.	Heavy				0 4		
			Very h	eavy		0 5		
Q40.	On average in the past month, how ma	ימי						
Q40.	hours per week have you worked? HOVERTEXT FOR 'PER WEEK' This includes rostered, unrostered, claimed and unclaimed overtime and recall – this does not include undisturbed on-call Please select one response only.	arry		irs or less		0 1		
				0 hours		0 2		
		imed	31 – 40	0 hours		0 3		
			41 – 50	0 hours		0 4		
			<u>51 – 60</u>	0 hours		0 5		
			<u>61 – 70</u>	0 hours		0 6		
			<u>71 – 80</u>	0 hours		0 7		
			<u>81 – 90</u>	0 hours		0 8		
			More t	han 90 hours			0 9	
Q41.	For any unrostered overtime you have Please select one response per row.		ompleted in the past, how often did?					
		AI	ways	Most of the time	Sometimes	Never	Not Applicable	
1.	You get paid for the unrostered overtime	C	O 4	0 3	0 2	0 1	O 99	
2.	Working unrostered overtime have a negative impact on your training	(O 4	0 3	0 2	0 1	O 99	
3.	Working unrostered overtime provide		O 4	0 3	0 2	0 1	O 99	

PATIENT SAFETY Q42. In your setting, how would you rate the 0 5 Excellent quality of your training on how to raise 0 4 Good concerns about patient safety? Please select one response only. 0 3 <u>Average</u> 0 2 Poor **HOVERTEXT FOR 'SETTING'** Terrible 0 1 Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.

you with more training opportunities

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Q43. Thinking about **patient care and safety** in your setting, to what extent do you agree or disagree with the following statements?

Please select one response per row.

HOVERTEXT FOR 'SETTING'

Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	I know how to report concerns about patient care and safety	O 5	0 4	0 3	0 2	0 1
2.	There is a culture of proactively dealing with concerns about patient care and safety	O 5	0 4	0 3	0 2	0 1
3.	I am confident to raise concerns about patient care and safety	O 5	0 4	O 3	0 2	0 1
4.	There are processes in place at my workplace to support the safe handover of patients between shifts / practitioners	O 5	0 4	0 3	0 2	0 1

OVERALL SATISFACTION

Q44. Thinking about your setting, to what extent do you agree or disagree with the following statements? Please select one response per row.

HOVERTEXT FOR 'SETTING'

Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	I would recommend my current training position to other doctors	O 5	0 4	O 3	O 2	0 1
2.	I would recommend my current workplace as a place to train	0 5	0 4	0 3	O 2	0 1

FUTURE CAREER INTENTIONS

In this next section, we would like to know about your future training and career intentions.

Q45.	Do you intend to continue in your specialty training program?	Yes No	O 1 O 2
		Undecided	0 3

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Q46. Thinking about your future career, to what extent do you agree or disagree with the following statements? Please select one response per row.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	I have an interest in Aboriginal and Torres Strait Islander health/healthcare	0 5	0 4	0 3	0 2	0 1
2.	I am interested in rural practice	0 5	0 4	0 3	0 2	0 1
3.	I am interested in getting involved in medical research	0 5	0 4	0 3	0 2	0 1
4.	I am interested in getting involved in medical teaching	0 5	0 4	0 3	0 2	0 1
5.	I am concerned I will not successfully complete my training program to attain Fellowship	0 5	0 4	0 3	0 2	0 1
6.	I am concerned about whether I will be able to secure employment on completion of training	O 5	0 4	0 3	0 2	0 1





COVID-19

2020 has been an unprecedented year due to COVID-19. We would like to know if and how, COVID-19 may have impacted your medical education and training....

Q47.	How has COVID-19 impacted your training and education?	Delayed entry onto my preferred training program because the College entry exams were deferred	
	Please select all that apply	Delayed entry onto my preferred training program because selection processes have been disrupted	<u>02</u>
		Delayed the completion of my training program because the College exams were deferred	03
		Disrupted my preparation time for examinations/assessments because of unconfirmed exam/assessment date(s)	
		Delayed the completion of my training program because COV 19 impacted my training requirements	
		Disrupted routine teaching □ (06
		Provided more training opportunities	07
		Reduced the number of training opportunities	<u>80</u>
		Increased research opportunities (which are required for progressing my training)	<u>09</u>
		Decreased research opportunities (which are required for progressing my training)	<u>10</u>
		Provided innovative ways to learn (e.g. virtual educational sessions)	<u>11</u>
		Created uncertainty for the remainder of my training year□	12
		Caused financial stress that has impacted my training (e.g. unable to pay for exams/courses)	<u>13</u>
		Made me re-consider my preferred specialty □	14
		Other	97
		It hasn't	<u>98</u>
		<u>Unsure</u> O 9	99
Q48.	Upon reflection, overall the impacts of		
Q40.	COVID-19 on my training have been	Positive O	
	Please select one response only.	Negative O	
		A mixture of positive and negative O	
		I don't know yet O	
		None of the above O 9	<u> 98</u>

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ABOUT YOU

Finally, we would like to ask some questions about you. These questions are used in analysis to group responses given by doctors in training with a similar profile.

Q49.	Do you identify as? Please select one response only.	Male	0 1
	riease select one response only.	Female	0 2
		Intersex/Indeterminate	0 3
		Prefer not to say	O 99
Q50.	What is your age?	20 to 24	0 1
	Please select one response only.	25 to 29	0 2
		30 to 34	0 3
		35 to 39	0 4
		40 to 45	O <u>5</u>
		45+	0 6
		Prefer not to say	O 99
Q51.	Do you identify as an Australian Aboriginal and/or Torres Strait Islander person?	Yes – Aboriginal	0 1
	Please select one response only.	Yes - Torres Strait Islander	0 2
		Yes – Both Aboriginal and Torres Strait Islander	0 3
		<u>No</u>	0 4
		Prefer not to say	O 99
Q52a.	Did you complete your primary medical degree in Australia or New Zealand?	Yes - Australia	0 1
	Please select one response only.	Yes - New Zealand	0 2
		No - Elsewhere	0 3
ASK II	F Q52a=3		
Q52b.	In which country did you complete your		
	primary medical degree? Please type in and select.	PROGRAMMER NOTE: ADD AUTOCOMPLETE D	KUP DOWN

THAT IS THE END OF THE SURVEY - THANK YOU

The survey has been conducted on behalf of the Medical Board of Australia and Ahpra

As a market and social research company, we comply with the requirements of the Privacy Act.

Should you need to contact Ahpra please call them on 1300 419 495.

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