

This is a copy of the Specialist GP Trainee questions.

[TO BE DISPLAYED ON SURVEY LANDING PAGE]

Medical Training Survey

Thank you for participating in the Medical Training Survey (MTS), which is being conducted for the Medical Board of Australia (MBA) and the Australian Health Practitioner Regulation Agency (Ahpra).

The MTS is being administered by an independent research agency, EY Sweeney, and will take approximately 15 minutes to complete.

The purpose of the 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.

Your part in the MTS

- Participation in the MTS is voluntary. You may withdraw from participating in the MTS at any time without providing a reason.

[Click here for more information about participation.](#)

[Click here for more information about the Medical Training Survey.](#)

For access to the EY Sweeney Privacy Policy, click here (<https://eysweeney.com.au/privacy-policy>). For any technical problems with this survey please send an e-mail by selecting the link that appears at the bottom of each page.

Please press **NEXT** to continue.

[PDF – INFORMATION ON PARTICIPATION] Medical Training Survey

How to complete the survey

Participants can use their mouse to "Click" the relevant circles or boxes to mark their selection with a black dot or a tick.

[REGISTERED MEDICAL PRACTITIONERS] Participants may close the survey down and re-enter at the departure point. To do so, use the link in the confirmation of registration email.

[INTERNS/ INTERNATIONAL MEDICAL GRADUATES ONLY] Participants may close the survey down and re-enter at the point of departure. To do so, use the link in the email invitation.

Once the participant has completed the questions on a page you click the "Next" button to proceed to the next screen.

In order for answers to be sent, the participant must click the "Submit" button at the end of the survey.

For any technical problems with the survey, participants can send an email to the email address that appears at the bottom of each page.

Survey description

The purpose of the 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.

Your part in the MTS

- Participation in the MTS is voluntary. You may withdraw from participating in the MTS at any time without providing a reason.
- The extent to which the Medical Board of Australia (**MBA**) jurisdictions, Specialist Medical Colleges, Postgraduate Medical Education Councils, employers, policy and advocacy bodies (e.g. Australian Medical Association) and other key stakeholders can strengthen medical training in Australia depends on well considered feedback. The MBA welcomes this feedback, as there are always opportunities to improve medical training in Australia.
- When completing the MTS, we ask that you do not provide responses with personal information or information that may reasonably identify you or any other individual.
- The MBA and Ahpra acknowledge that participation in the MTS and reflections on medical training might cause discomfort or even distress. For this reason, you may skip questions at any time and proceed to the next question.

Privacy information

Any information collected in the MTS will be treated confidentially and anonymously, and in accordance with the *Privacy Act 1988 (Cth)* and the Health Practitioner Regulation National Law (**the National Law**). MTS data collected will only be used for the purposes described above.

To maintain confidentiality and anonymity of MTS responses, the MTS is being administered by EY Sweeney, an independent and accredited market research agency. EY Sweeney is independent of Ahpra and the MBA.

EY Sweeney will aggregate the MTS data and disclose it to Ahpra and the MBA in a de-identified report, taking steps to remove any personal information or information that could reasonably re-identify an individual.

MTS data will be collated into jurisdiction specific and/or medical specialty specific reports, however participant anonymity will be maintained in such reports. Only de-identified and aggregated data will be published.

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

Ahpra's Privacy Policy explains how participants may access and seek correction of personal information held by Ahpra and the MBA; complain to Ahpra about a breach of their privacy; and how a complaint will be dealt with. For access to Ahpra's Privacy Policy, click here (<https://www.ahpra.gov.au/privacy>).

For access to EY Sweeney's Privacy Policy, click here (<http://eysweeney.com.au/contact-us/privacy-policy>).

Use and sharing of MTS data

The MBA and Ahpra may use the MTS data to:

- provide organisations with the de-identified MTS 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. Stakeholders may apply the aggregated MTS data to improve medical training in Australia.

All reporting will endeavour to protect the identity of individual participants. For example:

- EY Sweeney will take steps to de-identify any MTS data that may identify a participant or another individual;
- Reports will only be provided where 10 or more responses have been received;
- EY Sweeney will not provide individual MTS responses to third parties outside of the MBA and Ahpra.

Data Management

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

All MTS data is securely stored in Australia in accordance with The Research Society Code of Professional Behaviour, ISO 20252 – Market and Social Research Standard, Australian Data and Insights Association (**ADIA**) Privacy (Market and Social Research) Code 2014, Australian Privacy Principles of the *Privacy Act 1988 (Cth)* and ISO 27001-2013 (Certificate for Information Security Management accreditation).

EY Sweeney stores data in secure cloud based servers, located in Australia.

Contact

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

For any technical problems with this survey, a participant should contact EY Sweeney via phone on 1800 983 160 or via e-mail at medicaltrainingsurvey@au.ey.com (this email appears as a hyperlink at the bottom of each page of the survey).

Non-technical queries, such as questions regarding the content of the MTS, queries about participant rights or complaints about the way the MTS is being conducted, should be directed to Ahpra via email at MTS@ahpra.gov.au.

If a participant prefers to direct a complaint to another body, the participant may contact the membership body for market and social research, The Research Society, on 1300 364 832 or the participant can visit <https://researchsociety.com.au/>

READER NOTE: Respondents do not see codes (numbers) in the questions nor the headings in black boxes. Text in square brackets, or prefaced by PROGRAMMER NOTE are instructions to program.

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? {Q1}	PGY1	<input type="radio"/> 01
	PGY2	<input type="radio"/> 02
	PGY3	<input type="radio"/> 03
	PGY4	<input type="radio"/> 04
	PGY5	<input type="radio"/> 05
	PGY6	<input type="radio"/> 06
	PGY7	<input type="radio"/> 07
	PGY8	<input type="radio"/> 08
	PGY9	<input type="radio"/> 09
	PGY≥10	<input type="radio"/> 10

Q2. Are you employed: {Q61}	Full time	<input type="radio"/> 1
	Part time	<input type="radio"/> 2
	Casually	<input type="radio"/> 3
	On leave for most of your current rotation	TERMINATE 1
		<input type="radio"/> 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 who 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? {Q3}	Yes	[ASSIGN SNT]	<input type="radio"/> 1
	No	[ASSIGN PVT]	<input type="radio"/> 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.

Q4. In which state or territory is your current term/rotation/placement primarily based? Please select one response only. {Q2}	ACT	<input type="radio"/> 01
	NSW	<input type="radio"/> 02
	NT	<input type="radio"/> 03
	QLD	<input type="radio"/> 04
	SA	<input type="radio"/> 05
	Tas.	<input type="radio"/> 06
	Vic.	<input type="radio"/> 07
	WA	<input type="radio"/> 08
	Outside Australia	TERMINATE 2 <input type="radio"/> 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 predominantly in a hospital? {Q8a}	Yes	<input type="radio"/> 1
	No	<input type="radio"/> 2

ASK IF Q5a=1 {Q8a=1} Q5b. Which hospital do you work at? If you work at more than one hospital, select where you spend most time. Please type in and select. {Q8b}	PIPE RESPONSES BY FROM STATE LIST Q4{Q2} <input type="radio"/> 01 <input type="radio"/> 02 <input type="radio"/> 03 <input type="radio"/> 04 <input type="radio"/> 05 <input type="radio"/> 06 Other <input type="radio"/> 97 Do not wish to specify <input type="radio"/> 98
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<p>ASK IF Q5a=1 {Q8a}</p> <p>Q5c. Select any additional settings you work in.</p> <p>This question refers to your additional <u>clinical settings/workplace</u>, not your role/rotation/position.</p> <p>ASK IF Q5a=2 {Q8a}</p> <p>Q5c. Which settings do you work in?</p> <p>Please select all that apply</p> <p>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.</p> <p>{Q5c}</p>	<p>Aboriginal and Torres Strait Islander health service <input type="checkbox"/> 01</p> <p>Aged care facility <input type="checkbox"/> 02</p> <p>Community health service <input type="checkbox"/> 03</p> <p>Correctional services <input type="checkbox"/> 04</p> <p>General practice clinic <input type="checkbox"/> 05</p> <p>Medical laboratory <input type="checkbox"/> 06</p> <p>Private practice (exc general practice) <input type="checkbox"/> 07</p> <p>Research/university <input type="checkbox"/> 08</p> <p>Other <input type="checkbox"/> 97</p> <p>Not applicable <input type="radio"/> 98</p>
<p>ASK IF Q5a=2 OR Q5b=97 OR Q5b=98 ELSE PIPE FROM DATABASE {Q8a=2 Q8b=97 98}</p> <p>Q6. Is your current setting in a...?</p> <p>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.</p> <p>{Q62}</p>	<p>Metropolitan area (e.g. capital city – Sydney, Melbourne, Brisbane, Adelaide, Perth, Darwin, Hobart, Canberra) <input type="radio"/> 1</p> <p>Regional area (e.g. within or less than 15km from a town with a population of at least 15,000 that is not a capital city) <input type="radio"/> 2</p> <p>Rural area (e.g. more than 15km from the closest town with a population of at least 15,000) <input type="radio"/> 3</p> <p>Do not wish to specify <input type="radio"/> 99</p>
<p>Q7. What is your current role in the setting?</p> <p>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.</p> <p>{Q4}</p>	<p>Resident Medical Officer / Hospital Medical Officer <input type="radio"/> 2</p> <p>Principal House Officer <input type="radio"/> 4</p> <p>Career Medical Officer <input type="radio"/> 6</p> <p>Registrar <input type="radio"/> 7</p> <p>Unaccredited Registrar <input type="radio"/> 9</p> <p>Other <input type="radio"/> 97</p>

Q9a. Which area are you currently practising in?

Please select one response only.

{Q7}

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

ASK IF Q9a = 4 | 6 | 8 | 11 | 14 | 15 | 19 | 23

{Q7=4|6|8|11|14|15|19|23}

Q9b. If applicable, which subspecialty area are you practising in?

{Q7b}

Emergency Medicine [04]

- Paediatric emergency medicine ☐ 12
- Not applicable ☐ 98
- Prefer not to say ☐ 99

Intensive care medicine [06]

- Paediatric intensive care ☐ 01
- Not applicable ☐ 98
- Prefer not to say ☐ 99

Obstetrics and gynaecology [08]

- Gynaecological oncology ☐ 60
- Maternal–fetal medicine ☐ 61
- Obstetrics and gynaecological ultrasound ☐ 62
- Reproductive endocrinology and infertility ☐ 63
- Urogynaecology ☐ 64
- Not applicable ☐ 98
- Prefer not to say ☐ 99

Paediatrics and child health [11]

- General paediatrics ☐ 06
- Paediatric clinical genetics ☐ 07
- Community child health ☐ 08
- Neonatal and perinatal medicine ☐ 09
- Paediatric cardiology ☐ 10
- Paediatric clinical pharmacology ☐ 11
- Paediatric emergency medicine ☐ 12
- Paediatric endocrinology ☐ 13
- Paediatric gastroenterology and hepatology ☐ 14
- Paediatric haematology ☐ 15
- Paediatric immunology and allergy ☐ 16
- Paediatric infectious diseases ☐ 17
- Paediatric intensive care medicine ☐ 18
- Paediatric medical oncology ☐ 19
- Paediatric nephrology ☐ 20
- Paediatric neurology ☐ 21
- Paediatric nuclear medicine ☐ 22
- Paediatric palliative medicine ☐ 23
- Paediatric rehabilitation medicine ☐ 24
- Paediatric respiratory and sleep medicine ☐ 25
- Paediatric rheumatology ☐ 26
- Not applicable ☐ 98
- Prefer not to say ☐ 99

Pathology	[14]
General pathology	<input type="radio"/> 27
Anatomical pathology (including cytopathology)	<input type="radio"/> 28
Chemical pathology	<input type="radio"/> 29
Haematology	<input type="radio"/> 30
Immunology	<input type="radio"/> 31
Microbiology	<input type="radio"/> 32
Forensic pathology	<input type="radio"/> 33
Not applicable	<input type="radio"/> 98
Prefer not to say	<input type="radio"/> 99

Physician Adult medicine	[15]
General medicine	<input type="radio"/> 34
Cardiology	<input type="radio"/> 35
Clinical genetics	<input type="radio"/> 36
Clinical pharmacology	<input type="radio"/> 37
Endocrinology	<input type="radio"/> 38
Gastroenterology and hepatology	<input type="radio"/> 39
Geriatric medicine	<input type="radio"/> 40
Haematology	<input type="radio"/> 41
Immunology and allergy	<input type="radio"/> 42
Infectious diseases	<input type="radio"/> 43
Medical oncology	<input type="radio"/> 44
Nephrology	<input type="radio"/> 45
Neurology	<input type="radio"/> 46
Nuclear medicine	<input type="radio"/> 47
Respiratory and sleep medicine	<input type="radio"/> 48
Rheumatology	<input type="radio"/> 49
Not applicable	<input type="radio"/> 98
Prefer not to say	<input type="radio"/> 99

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

TRAINING CURRICULUM

Q14. 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

{Q15}

- Addiction medicine – The Royal Australasian College of Physicians (**RACP**) ☐ 01
- Anaesthesia – Australian and New Zealand College of Anaesthetists (**ANZCA**) ☐ 02
- Dermatology – The Australasian College of Dermatologists (**ACD**) ☐ 03
- Emergency medicine – Australasian College for Emergency Medicine (**ACEM**) ☐ 04
- General practice – Australian College of Rural and Remote Medicine (**ACRRM**) **ASSIGN SGPT** ☐ 05
- General practice – The Royal Australian College of General Practitioners (**RACGP**) **ASSIGN SGPT** ☐ 06
- Intensive care medicine – College of Intensive Care Medicine of Australia and New Zealand (**CICM**) ☐ 09
- Medical administration – The Royal Australasian College of Medical Administrators (**RACMA**) ☐ 10
- Obstetrics and gynaecology – The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (**RANZCOG**) ☐ 11
- Occupational and environmental medicine – The Royal Australasian College of Physicians (**RACP**) ☐ 12
- Ophthalmology – The Royal Australian and New Zealand College of Ophthalmologists (**RANZCO**) ☐ 13
- Paediatrics and child health – The Royal Australasian College of Physicians (**RACP**) ☐ 14
- Pain medicine – Australian and New Zealand College of Anaesthetists (**ANZCA**) ☐ 15
- Palliative medicine – The Royal Australasian College of Physicians (**RACP**) ☐ 16
- Pathology – The Royal College of Pathologists of Australasia (**RCPA**) ☐ 17
- Physician – The Royal Australasian College of Physicians (**RACP**) ☐ 18
- Psychiatry – The Royal Australian and New Zealand College of Psychiatrists (**RANZCP**) ☐ 19
- Public health medicine – The Royal Australasian College of Physicians (**RACP**) ☐ 20
- Radiation oncology – The Royal Australian and New Zealand College of Radiologists (**RANZCR**) ☐ 21
- Radiology – The Royal Australian and New Zealand College of Radiologists (**RANZCR**) ☐ 22
- Rehabilitation medicine – The Royal Australasian College of Physicians (**RACP**) ☐ 23
- Sexual health medicine – The Royal Australasian College of Physicians (**RACP**) ☐ 24
- Sports and exercise medicine – Australasian College of Sport and Exercise Physicians (**ACSEP**) ☐ 25
- Surgery – Royal Australasian College of Surgeons (**RACS**) ☐ 26
- Surgery – Oral and maxillofacial surgery – Royal Australasian College of Dental Surgeons (**RACDS**) ☐ 27

<p>ASK IF ACRRM TRAINING PROGRAMS ARE SELECTED AT Q14 [CODES 5]. ONLY SHOW CODE 5 AT Q14L IF THEY WERE SELECTED AT Q14.</p> <p>Q14l. You indicated that you have trained in the following specialist training program(s) at ACRRM.</p> <p>[INSERT TRAINING PROGRAMS SELECTED]</p> <p>What training stage are you in? (select all that apply)</p>	<p>Core Generalist Training (CGT) <input type="radio"/> 01</p> <p>Advanced Specialised Training (AST) <input type="radio"/> 02</p>

<p>ASK IF RACGP TRAINING PROGRAMS ARE SELECTED AT Q14 [CODES 6]. ONLY SHOW CODE 6 AT Q14M IF THEY WERE SELECTED AT Q14.</p> <p>Q14m. You indicated that you have trained in the following specialist training program(s) at RACGP.</p> <p>[INSERT TRAINING PROGRAMS SELECTED]</p> <p>Are you in your first term (first 6 months) of training?</p> <p>Please select one response only.</p>	<p>Yes <input type="radio"/> 01</p> <p>No <input type="radio"/> 02</p>

<p>ASK FOR EACH COLLEGE IN Q14 {Q15X=1}</p> <p>Q15. How many years have you been in the [INSERT COLLEGE SELECTED] training program?</p> <p>{Q17}</p>	<p>1 or less <input type="radio"/> 01</p> <p>2 <input type="radio"/> 02</p> <p>3 <input type="radio"/> 03</p> <p>4 <input type="radio"/> 04</p> <p>5 <input type="radio"/> 05</p> <p>6 <input type="radio"/> 06</p> <p>7 <input type="radio"/> 07</p> <p>8 <input type="radio"/> 08</p> <p>9 <input type="radio"/> 09</p> <p>More than 10 <input type="radio"/> 10</p> <p>Don't know <input type="radio"/> 11</p>

Q16b. Which training program are you in? {Q16b}	Australian General Practice Training (AGPT)	<input type="radio"/> 1
	The Remote Vocational Training Scheme (RVTS)	<input type="radio"/> 2
	ACRRM Independent Pathway (IP)	<input type="radio"/> 4
	ACRRM Rural Generalist Training Scheme	<input type="radio"/> 5
	RACGP Fellowship Support Program	<input type="radio"/> 6
	Unsure	<input type="radio"/> 96
	Not applicable	<input type="radio"/> 97

ASK IF Q16b=2 {Q16b=2}

Q18b. Thinking about the RVTS training program, to what extent do you agree or disagree with each of the following statements?

{Q19b}

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1. The RVTS education program meets the College/s requirements	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
2. The RVTS education program is preparing me as a specialist	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
3. The RVTS education program is advancing my knowledge	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

ASK IF Q16b=2 {Q16b=2}

Q19b. Thinking about how the **RVTS communicates** with you about your training program, to what extent do you agree or disagree with the following statements?

{Q21}

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1. The RVTS clearly communicates the requirements of my training program	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
2. The RVTS clearly communicates with me about changes to my training program and how they affect me	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
3. I know who to contact at RVTS about my education program	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

ASK IF Q16b=2 {Q1bb=2}

Q20b. Thinking about how the **RVTS engages with you**, to what extent do you agree or disagree with the following statements?

{Q28}

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1. The RVTS seeks my views on the structure and content of the education program	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
2. I am represented (by doctors in training e.g. registrar liaison officer) on RVTS training and/or education committees	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
3. I am able to discuss the RVTS education program with other doctors	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
4. The RVTS provides me with access to psychological and/or mental health support services	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

PROGRAMMER NOTE: LOOP THIS SECTION FOR ALL SELECTIONS AT Q14 {Q15} EXCEPT IF 'OTHER'. ENSURE COLLEGES HAVE EQUAL ODDS OF BEING FIRST OR SECOND SELECTION

The following questions relate to **[INSERT COLLEGE FROM Q14]**. {Q18b}

Q21. Thinking about your **[INSERT COLLEGE FROM Q14]** {Q18b} training program, to what extent do you agree or disagree with each of the following statements?

{Q19a}

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Unsure
1. The College training program is relevant to my development	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
2. There are opportunities to meet the requirements of the training program in my current setting	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
3. I understand what I need to do to meet my training program requirements	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
4. The College supports flexible training arrangements	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99

Q21a. Thinking about your **[INSERT COLLEGE FROM Q14]** {Q15} training program, to what extent do you agree or disagree with each of the following statements?

{Q21a}

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Unsure
1. The financial cost of my College training program has led to stress	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
2. My College provides clear and accessible information about how my fees are spent	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
3. The cost of my College training program has been a barrier to my progression in the training program	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99

Q22. Thinking about how the **[INSERT COLLEGE FROM Q14]** {Q15} communicates with you about your training program, to what extent do you agree or disagree with the following statements?

{Q20a}

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Does not apply
1. My College clearly communicates the requirements of my training program	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
2. My College clearly communicates with me about changes to my training program and how they affect me	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
3. I know who to contact at the College about my training program	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99

Q23a. In the last 12 months, have you sat one or more exams from...?

{Q24a}

	Yes	No
1. PIPE [College]	<input type="radio"/> 1	<input type="radio"/> 2

ASK IF Q23aX=1 {Q24ax=1}

Q23b. Have you received the results of your most recent exam from...?

{Q24c}

	Yes	No
1. PIPE [College]	<input type="radio"/> 1	<input type="radio"/> 2

ASK IF Q23bX=1 {Q24cx=1}

Q23c. Did you pass the exam for...?

{Q25a}

	Yes	No	Prefer not to say
1. PIPE [College]	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 99

ASK IF Q23a=1 {Q23a}

Q24. Thinking about all your **[INSERT COLLEGE FROM Q14]** {Q15} **exam(s)** not just the most recent, to what extent do you agree or disagree with the following statements?

{Q26a}

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

Q25. Thinking about how the **[INSERT COLLEGE FROM Q14]** {Q15} engages with you, to what extent do you agree or disagree with the following statements?

{Q27a}

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1. The College seeks my views on the training program	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
2. I am represented by doctors in training on the College's training and/or education committees	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
4. The College provides me with access to psychological and/or mental health support services	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
5. There are safe mechanisms for raising training/wellbeing concerns with the College	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

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

ORIENTATION

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

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

Q27a. Did you receive an orientation to your setting?	Yes, a formal orientation <input type="radio"/> 1
HOVERTEXT FOR 'SETTING'	Yes, but it was largely informal <input type="radio"/> 2
Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.	No Go to Q28 <small>{Q30}</small> <input type="radio"/> 3

{Q29a}

ASK IF Q27a=1 OR 2 {Q29a=1|2}

Q27b. How would you rate the quality of your orientation?	Excellent <input type="radio"/> 5
	Good <input type="radio"/> 4
	Average <input type="radio"/> 3
	Poor <input type="radio"/> 2
	Terrible <input type="radio"/> 1

{Q29b}

CLINICAL SUPERVISION

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

<p>Q28. In your setting, who mainly provides your day-to-day clinical supervision?</p> <p>Please select one response only.</p> <p>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.</p> <p>{Q30}</p>	Specialist (including specialist GP)	<input type="radio"/> 1
	Registrar	<input type="radio"/> 2
	Other doctor	<input type="radio"/> 3
	Nurse	<input type="radio"/> 4
	Other	<input type="radio"/> 5
	I don't have a clinical supervisor	Go to Q32 {Q34} <input type="radio"/> 6

ASK IF Q28=1 TO 5 {Q30=1:5}

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

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

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.

{Q31}

	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	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
2. I am able to contact other senior medical staff AFTER HOURS if I am concerned about a patient	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

ASK IF Q28=1 TO 5 {Q30=1:5}

Q30. We'd now like you to give a rating for the following statements

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

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{Q32a}

	Excellent	Good	Average	Poor	Terrible	Not applicable
1. Helpfulness of supervisor	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
2. Accessibility of supervisor	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
3. Regular, INFORMAL feedback	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
4. Regular, FORMAL feedback	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
5. Usefulness of feedback	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
6. Discussions about my goals and learning objectives	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
7. Supporting you to meet your training plan/pathway requirements	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
8. Including opportunities to develop your skills	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
9. Ensuring your work is appropriate to your level of training	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
10. Completing workplace-based assessments	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99

ASK IF Q28=1 TO 5 {Q30=1:5}

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

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.

{Q33}

Excellent	<input type="radio"/> 5
Good	<input type="radio"/> 4
Average	<input type="radio"/> 3
Poor	<input type="radio"/> 2
Terrible	<input type="radio"/> 1

<p>Q32. Has your performance been assessed in your setting?</p> <p>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.</p> <p>{Q34}</p>	Yes	<input type="radio"/> 1
	No – but this is scheduled	<input type="radio"/> 2
	No – but I would like to be	<input type="radio"/> 3
	No – it's not necessary	<input type="radio"/> 4
	Unsure	<input type="radio"/> 5

ACCESS TO TEACHING

<p>Q35. Thinking about the development of your knowledge and skills, in your setting do you have sufficient opportunities to develop your...</p> <p>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.</p> <p>{Q22}</p>			
	Yes	No	Not applicable
1. Theoretical knowledge	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
2. Clinical skills	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
3. Procedural skills	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
4. Teaching and supervision skills	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
5. Ethics	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
6. Leadership and management	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
7. Communication	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
8. Cultural safety	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
9. Research	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
10. Prescribing	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
11. Recognition and care of the acutely unwell patient	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3

Q33. Thinking about your access to opportunities to **develop your skills**, to what extent do you agree or disagree with the following statements?
In my 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.

{Q35}

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Not applicable
1.	I can access the training opportunities available to me	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
2.	I have to compete with other doctors for access to opportunities	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
3.	I have to compete with other health professionals for access to opportunities	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99

Q34. Thinking about **access to teaching and research** 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.

{Q36}

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	I have access to protected study time/leave	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
2.	I am able to attend conferences, courses and/or external education events	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
3.	SHOW IF SGPT My GP supervisor supports me to attend formal and informal teaching sessions	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
4.	My employer supports me to attend formal and informal teaching sessions	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
5.	I am able to participate in research activities	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

Q36. Which of the following statements best describe the interaction between your training requirements and the responsibilities of your job?

My job responsibilities...

Never prevent me from meeting my training requirements ☐ 1
Rarely prevent me from meeting my training requirements ☐ 2
Sometimes prevent me from meeting my training requirements ☐ 3
Often prevent me from meeting my training requirements ☐ 4

{Q37}

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

{Q14}

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Not available
1. Formal education program	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
2. Online modules (formal and/or informal)	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
3. Teaching in the course of patient care (bedside teaching)	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
4. <u>Team or unit based activities</u> HOVERTEXT Such as mortality and morbidity audits (M&Ms), other quality assurance activities, case presentations and seminars, journal club, radiology and pathology meetings	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
9. Practice-based audits	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
5. Medical/surgical and/or hospital-wide meetings such as grand round and/or practice based meetings, Primary Health Network meetings	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
6. Multidisciplinary meetings	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
7. Simulation teaching	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
8. Access to mentoring	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99

Q39. Overall, how would you rate the quality of the teaching sessions?

{Q38}

Excellent	<input type="radio"/> 5
Good	<input type="radio"/> 4
Average	<input type="radio"/> 3
Poor	<input type="radio"/> 2
Terrible	<input type="radio"/> 1

WORKPLACE ENVIRONMENT AND CULTURE

Q40. 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.

{Q39}

	Excellent	Good	Average	Poor	Terrible	Not provided	Not applicable
1. Reliable internet for training purposes	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 98	<input type="radio"/> 99
2. Educational resources	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 98	<input type="radio"/> 99
3. Working space (e.g. desk and computer)	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 98	<input type="radio"/> 99
4. Teaching spaces	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 98	<input type="radio"/> 99

Q41. 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.

{Q40}

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1. Most senior medical staff are supportive	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
2. My workplace supports staff wellbeing	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
12. Most senior allied health and nursing staff are supportive	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
3. In practice, my workplace supports me to achieve a good work/life balance	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
4. There is a positive culture at my workplace	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
5. I have a good work/life balance	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
6. <u>Bullying, harassment and discrimination</u> by anyone is not tolerated at my workplace	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
7. <u>Racism</u> is not tolerated at my workplace	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
8. I know how to raise concerns/issues about bullying, harassment and discrimination (including racism) in my workplace	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
9. I am confident that I would raise concerns/issues about bullying, harassment and discrimination (including racism) in my workplace	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
10. I could access support from my workplace if I experienced stress or a traumatic event	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

Q42a. 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
 ** *Racial Discrimination Act* <https://humanrights.gov.au/quick-guide/12083>

{Q41A_2}

	1) Experienced	2) Witnessed
1. Bullying <i>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.*</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 1
6. Sexual harassment <i>Sexual harassment is unwelcome conduct of a sexual nature which makes a person feel offended, humiliated and/or intimidated, where the possibility of that reaction could be reasonably anticipated in the circumstances.</i>	<input type="checkbox"/> 6	<input type="checkbox"/> 6
2. Harassment (excluding sexual harassment) <i>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.</i>	<input type="checkbox"/> 2	<input type="checkbox"/> 2
4. Racism <i>Racial discrimination is when a person is treated less favourably, or not given the same opportunities, as others in a similar situation, because of their race, the country where they were born, their ethnic origin or their skin colour.**</i>	<input type="checkbox"/> 5	<input type="checkbox"/> 5
3. Discrimination (excluding racism) <i>Discrimination includes adverse actions or being treated less favourably because of a person's characteristics, like their religion, gender, age or sexual orientation.</i>	<input type="checkbox"/> 3	<input type="checkbox"/> 3
98. None of these	<input type="radio"/> 98	<input type="radio"/> 98

SHOW FOR ANY OF THE CODES AT Q42A.

If you or someone you know would like support in relation to anything you may be experiencing at work, please reach out to the Employee Assistance Program (EAP) offered by your training provider or the drs4drs service provided within your state for confidential mental health support. You also may wish to contact the police if you have witnessed or experienced a criminal offence while at work.

SHOW BELOW Q43: 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.

SHOW IF Q42a.1=1|2|3|5 OR Q42a.2=1|2|3|5|6 {Q41B_2}

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

Please select all that apply.

{NEW}

	1) Experienced	2) Witnessed
1. Senior medical staff (e.g. consultants, specialists)	<input type="checkbox"/> 1	<input type="checkbox"/> 1
2. Medical colleague (e.g. registrar or other doctors in training)	<input type="checkbox"/> 2	<input type="checkbox"/> 2
3. Nurse or midwife	<input type="checkbox"/> 3	<input type="checkbox"/> 3
4. Other health practitioner	<input type="checkbox"/> 4	<input type="checkbox"/> 4
5. Hospital management	<input type="checkbox"/> 5	<input type="checkbox"/> 5
6. Administrative staff	<input type="checkbox"/> 8	<input type="checkbox"/> 8
7. Patient and/or patient family/carer	<input type="checkbox"/> 6	<input type="checkbox"/> 6
8. Other	<input type="checkbox"/> 7	<input type="checkbox"/> 7
99. Prefer not to say	<input type="radio"/> 99	<input type="radio"/> 99

SHOW IF Q42b.1=1|2|3|4|5|7 OR Q42b.2=1|2|3|4|5|7 {Q41B_2}

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

Please select all that apply.

{Q41C_2}

	1) Experienced	2) Witnessed
1. In my team	<input type="checkbox"/> 1	<input type="checkbox"/> 1
2. In my department but not in my team	<input type="checkbox"/> 2	<input type="checkbox"/> 2
3. From another department	<input type="checkbox"/> 3	<input type="checkbox"/> 3
99. Prefer not to say	<input type="radio"/> 99	<input type="radio"/> 99

SHOW IF Q42c.1=1|2| or Q42c.2=1|2| {Q41C_2}

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

{Q41D_2}

	1) Experienced	2) Witnessed
1. Yes	<input type="radio"/> 1	<input type="radio"/> 1
2. No	<input type="radio"/> 2	<input type="radio"/> 2
3. Prefer not to say	<input type="radio"/> 99	<input type="radio"/> 99

SHOW IF Q42a.1=1|2|3|5 OR Q42a.2=1|2|3|5 {Q41A_2}

Q42e. Have you reported it?

{Q41E_2}

	1) Experienced	2) Witnessed
1. Yes	<input type="radio"/> 1	<input type="radio"/> 1
2. No	<input type="radio"/> 2	<input type="radio"/> 2

SHOW IF Q42e.1=2 OR Q42e.2=2 {Q41X1}

Q42i. What prevented you from reporting?

Please select all that apply. {NEW}

	1) Experienced	2) Witnessed
1. Lack of processes in place	<input type="checkbox"/> 1	<input type="checkbox"/> 1
2. Wasn't provided information on how or who to report to	<input type="checkbox"/> 2	<input type="checkbox"/> 2
3. Concern about repercussions	<input type="checkbox"/> 3	<input type="checkbox"/> 3
4. Lack of support	<input type="checkbox"/> 4	<input type="checkbox"/> 4
5. Nothing would be done if I did report it	<input type="checkbox"/> 5	<input type="checkbox"/> 5
6. I felt it was not the accepted practice to report it	<input type="checkbox"/> 6	<input type="checkbox"/> 6
7. Other	<input type="checkbox"/> 7	<input type="checkbox"/> 7
98. Prefer not to say	<input type="radio"/> 99	<input type="radio"/> 99

SHOW IF Q42e.1=1 OR Q42e.2=1 {Q41E_2}

Q42f. Has the report been followed-up?

{Q41F_2}

	1) Experienced	2) Witnessed
1. Yes	<input type="radio"/> 1	<input type="radio"/> 1
2. No	<input type="radio"/> 2	<input type="radio"/> 2
3. Unsure	<input type="radio"/> 3	<input type="radio"/> 3

SHOW IF Q42xf.1=1| OR Q42xf.2=1| {NEW}

Q42xg. Are you satisfied with how the report was followed-up?

{NEW}

	1) Experienced	2) Witnessed
1. Yes	<input type="radio"/> 1	<input type="radio"/> 1
2. No	<input type="radio"/> 2	<input type="radio"/> 2
3. Unsure	<input type="radio"/> 3	<input type="radio"/> 3

SHOW IF Q42a.1=1|2|3|5 OR Q42a.2=1|2|3|5

Q42xh. How has the incident adversely affected your medical training?

{NEW}

	1) Experienced	2) Witnessed
1. No effect	<input type="radio"/> 1	<input type="radio"/> 1
2. Minor effect	<input type="radio"/> 2	<input type="radio"/> 2
3. Moderate effect	<input type="radio"/> 3	<input type="radio"/> 3
4. Major effect	<input type="radio"/> 4	<input type="radio"/> 4
5. Unsure	<input type="radio"/> 5	<input type="radio"/> 5

Q43. If you needed support, do you know how to access support for your health (including for stress and other psychological distress)?

{Q42}

Yes ☐ 1
No ☐ 2
Unsure ☐ 3

SHOW BELOW Q43: *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.*

Q44. 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.

PROGRAMMER NOTE: SPLIT ACROSS TWO SCREENS

{Q43}

	Always	Most of the time	Sometimes	Never
1. The amount of work I am expected to do	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
2. Having to work paid overtime	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
3. Having to work unpaid overtime	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
4. Dealing with patient expectations	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
5. Dealing with patients' families	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
6. Expectations of supervisors	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
7. Supervisor feedback	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
8. Having to relocate for work	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
9. Being expected to do work that I don't feel confident doing	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
11. Lack of appreciation	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
12. Workplace conflict	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

Q45. How would you rate your workload 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.

{Q44}

Very light	<input type="radio"/> 1
Light	<input type="radio"/> 2
Moderate	<input type="radio"/> 3
Heavy	<input type="radio"/> 4
Very heavy	<input type="radio"/> 5

Q46. On average in the past month, how many 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

{Q45}

20 hours or less	<input type="radio"/> 1
21 – 30 hours	<input type="radio"/> 2
31 – 40 hours	<input type="radio"/> 3
41 – 50 hours	<input type="radio"/> 4
51 – 60 hours	<input type="radio"/> 5
61 – 70 hours	<input type="radio"/> 6
71 – 80 hours	<input type="radio"/> 7
81 – 90 hours	<input type="radio"/> 8
More than 90 hours	<input type="radio"/> 9

Q47. For any unrostered overtime you have completed in your current rotation, how often did...?

{Q46}

	Always	Most of the time	Sometimes	Never	Not Applicable
4. You claim for the unrostered overtime	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
1. You get paid for the unrostered overtime	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
2. Working unrostered overtime have a negative impact on your training	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99
3. Working unrostered overtime provide you with more training opportunities	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99

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

Flexible working arrangements could include changes in hours of work, in patterns of work, in locations of work, or other changes to standard working arrangements agreed to by yourself and your employer.

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, I have accessed flexible working arrangements ☐ 1

I have considered accessing flexible working arrangements but chose not to access ☐ 2

I have considered accessing flexible working arrangements but was unable to access ☐ 3

I have not accessed, and have not required flexible working arrangements ☐ 4

Prefer not to say ☐ 99

ASK IF Q63a=1, 2 OR 3

Q64. **SHOW IF Q63a=1**

What sort of flexible arrangements did you access?

SHOW IF Q63a=2 OR 3

What sort of flexible arrangements would you have liked to access?

HOVERTEXT FOR 'FLEXIBLE WORKING ARRANGEMENTS'

Flexible working arrangements could include changes in hours of work, in patterns of work, in locations of work, or other changes to standard working arrangements agreed to by yourself and your employer.

Please select all that apply.

Changes in hours of work (e.g., reduction in hours worked, changes to start/finish times) ☐ 1

Changes in patterns of work (e.g., working 'split-shifts', job sharing arrangements, or not being rostered on nightshifts) ☐ 2

Changes in location of work (e.g., working from home or working from another location) ☐ 3

Other ☐ 4

Prefer not to say ☐ 99

ASK IF Q63a=1

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

HOVERTEXT FOR 'FLEXIBLE WORKING ARRANGEMENTS'

Flexible working arrangements could include changes in hours of work, in patterns of work, in locations of work, or other changes to standard working arrangements agreed to by yourself and your employer.

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, the arrangements I accessed met all of my needs ☐ 1

The arrangements I accessed met some, but not all, of my needs ☐ 2

No, the arrangements I accessed did not meet my needs ☐ 3

Prefer not to say ☐ 99

ASK IF Q63a=2 OR 3

Q63c. Why have you not accessed, flexible working arrangements in your setting?

HOVERTEXT FOR 'FLEXIBLE WORKING ARRANGEMENTS'

Flexible working arrangements could include changes in hours of work, in patterns of work, in locations of work, or other changes to standard working arrangements agreed to by yourself and your employer.

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 all that apply.

Flexible working arrangements were not offered ☐ 1

The flexible working arrangements offered did not meet my needs ☐ 2

Flexible working arrangements aren't available in my current role or rotation ☐ 3

I didn't feel comfortable asking for flexible working arrangements in my current setting ☐ 4

I felt I wasn't senior enough to access flexible working arrangements ☐ 5

My employment terms do not allow for flexible working arrangements ☐ 10

I didn't have access to information or knowledge to know how to access flexible working arrangements ☐ 7

I didn't feel I had the option to access flexible working arrangements ☐ 8

Other ☐ 9

Prefer not to say ☐ 99

PATIENT SAFETY

<p>Q48. In your setting, how would you rate the quality of your training on how to raise concerns about patient safety?</p> <p>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.</p> <p>{Q49}</p>	Excellent	<input type="radio"/> 5
	Good	<input type="radio"/> 4
	Average	<input type="radio"/> 3
	Poor	<input type="radio"/> 2
	Terrible	<input type="radio"/> 1
	I did not receive training	<input type="radio"/> 6

<p>Q49. Thinking about patient care and safety in your setting, to what extent do you agree or disagree with the following statements?</p> <p>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.</p> <p>{Q50}</p>					
	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1. I know how to report concerns about patient care and safety	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
2. There is a culture of proactively dealing with concerns about patient care and safety	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
3. I am confident to raise concerns about patient care and safety	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
4. There are processes in place at my workplace to support the safe handover of patients between shifts / practitioners	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
5. I have received training on how to provide culturally safe care	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

OVERALL SATISFACTION

<p>Q50. Thinking about your setting, to what extent do you agree or disagree with the following statements?</p> <p>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.</p> <p>{Q52}</p>					
	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1. I would recommend my current training position to other doctors	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
2. I would recommend my current workplace as a place to train	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

FUTURE CAREER INTENTIONS

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

Q51a. Do you intend to continue in your specialty training program? {Q53a}	Yes	<input type="radio"/> 1
	No	<input type="radio"/> 2
	Undecided	<input type="radio"/> 3

Q54. Thinking about your future career, to what extent do you agree or disagree with the following statements? {Q56}					
	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
8. I intend to work in Aboriginal and Torres Strait Islander health/healthcare	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
9. I intend to work in rural practice	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
10. I intend to work in medical research	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
11. I intend to work in medical teaching	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
5. I am concerned I won't successfully complete my training program to attain Fellowship	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
6. I am concerned about whether I will be able to secure employment on completion of training	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
12. I am considering a future outside of medicine in the next 12 months	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

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.

<p>Q55. Do you identify as...?</p> <p><i>Gender refers to current gender, which may be different to sex recorded at birth and may be different to what is indicated on legal documents</i></p> <p>{Q57}</p>	<p>Man or male <input type="radio"/> 1</p> <p>Woman or female <input type="radio"/> 2</p> <p>Non-binary <input type="radio"/> 3</p> <p>I use a different term <input type="radio"/> 4</p> <p>Prefer not to say <input type="radio"/> 99</p>
<p>Q56. What is your age?</p> <p>{Q58}</p>	<p>20 to 24 <input type="radio"/> 1</p> <p>25 to 29 <input type="radio"/> 2</p> <p>30 to 34 <input type="radio"/> 3</p> <p>35 to 39 <input type="radio"/> 4</p> <p>40 to 45 <input type="radio"/> 5</p> <p>45+ <input type="radio"/> 6</p> <p>Prefer not to say <input type="radio"/> 99</p>
<p>Q57. Do you identify as an Australian Aboriginal and/or Torres Strait Islander person?</p> <p>{Q59}</p>	<p>Yes – Aboriginal <input type="radio"/> 1</p> <p>Yes – Torres Strait Islander <input type="radio"/> 2</p> <p>Yes – Both Aboriginal and Torres Strait Islander <input type="radio"/> 3</p> <p>No <input type="radio"/> 4</p> <p>Prefer not to say <input type="radio"/> 99</p>
<p>Q60. Do you identify as a person with a disability?</p> <p><i>Please note, the definition of disability includes sensory, intellectual, neuro-diverse, physical and mental illness – where the disability is permanent or is likely to be permanent.</i></p> <p>{Q65}</p>	<p>Yes <input type="radio"/> 1</p> <p>No <input type="radio"/> 2</p> <p>Prefer not to say <input type="radio"/> 99</p>

<p>Q61. During your usual work week, do you spend time providing unpaid care, help, or assistance for family members or others?</p> <p>Please select all that apply.</p> <p>{Q66}</p>	<p>Yes – Sole parenting responsibilities <input type="checkbox"/> 1</p> <p>Yes – Co-parenting responsibilities <input type="checkbox"/> 2</p> <p>Yes – Primary caregiving responsibilities (for adult(s)) <input type="checkbox"/> 3</p> <p>Yes – Shared caregiving responsibilities (for adult(s)) <input type="checkbox"/> 4</p> <p>No <input type="radio"/> 5</p> <p>Prefer not to say <input type="radio"/> 99</p>
<p>Q58a. Did you complete your primary medical degree in Australia or New Zealand?</p> <p>{Q6a}</p>	<p>Yes - Australia <input type="radio"/> 1</p> <p>Yes - New Zealand <input type="radio"/> 2</p> <p>No - Elsewhere <input type="radio"/> 3</p>
<p>ASK IF Q58a=3 {Q6a=3}</p> <p>Q59b. In which country did you complete your primary medical degree?</p> <p>Please type in and select.</p> <p>{Q6b}</p>	<div data-bbox="758 750 1468 828" style="border: 1px solid black; height: 35px; margin-bottom: 5px;"></div> <p>PROGRAMMER NOTE: ADD AUTOCOMPLETE DROP DOWN</p>

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, EY Sweeney will comply with the requirements of the Privacy Act.

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