

**This is a copy of all Intern questions.**

## Medical Training Survey

We are conducting a survey for the Medical Board of Australia (MBA) and the 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 <https://eysweeney.com.au/privacy-policy>.

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This survey is being administered by EY Sweeney on behalf of the Medical Board of Australia (MBA) and Australian Health Practitioner Regulation Agency (Ahpra).

## 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 re-identify 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 (<https://eysweeney.com.au/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](mailto: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.

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, Australian Data and Insights Association (ADIA) 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 anticipates 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](mailto:medicaltrainingsurvey@au.ey.com).

## Point of contact

The Ahpra point of contact for this project is [MTS@ahpra.gov.au](mailto: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 prefer, you may contact the membership body for market and social research, The Research Society, on 02 9566 3100 or you can [visit](https://researchsociety.com.au/) <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](mailto:medicaltrainingsurvey@au.ey.com) or contact 1800 983 160. This email address can be found at the bottom of each page of the survey.

## 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.

<p>Q1. What is your postgraduate year? <b>Please select one response only.</b></p>	<table style="width: 100%; border-collapse: collapse;"> <tbody> <tr><td style="border-bottom: 1px solid black;">PGY1</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 01</td></tr> <tr><td style="border-bottom: 1px solid black;">PGY2</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 02</td></tr> <tr><td style="border-bottom: 1px solid black;">PGY3</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 03</td></tr> <tr><td style="border-bottom: 1px solid black;">PGY4</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 04</td></tr> <tr><td style="border-bottom: 1px solid black;">PGY5</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 05</td></tr> <tr><td style="border-bottom: 1px solid black;">PGY6</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 06</td></tr> <tr><td style="border-bottom: 1px solid black;">PGY7</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 07</td></tr> <tr><td style="border-bottom: 1px solid black;">PGY8</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 08</td></tr> <tr><td style="border-bottom: 1px solid black;">PGY9</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 09</td></tr> <tr><td style="border-bottom: 1px solid black;">PGY≥10</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 10</td></tr> </tbody> </table>	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
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PGY8	<input type="radio"/> 08																				
PGY9	<input type="radio"/> 09																				
PGY≥10	<input type="radio"/> 10																				
<p>Q2. Are you employed: <b>Please select one response only.</b></p>	<table style="width: 100%; border-collapse: collapse;"> <tbody> <tr><td style="border-bottom: 1px solid black;">Full time</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 1</td></tr> <tr><td style="border-bottom: 1px solid black;">Part time</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 2</td></tr> <tr><td style="border-bottom: 1px solid black;">Casually</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 3</td></tr> <tr><td style="border-bottom: 1px solid black;">On leave for most of your current rotation</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> <b>TERMINATE 1</b></td></tr> <tr><td style="border-bottom: 1px solid black;"></td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 99</td></tr> </tbody> </table>	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	<input type="radio"/> <b>TERMINATE 1</b>		<input type="radio"/> 99										
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	<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](mailto:medicaltrainingsurvey@au.ey.com)

Should you need to contact the MBA and Ahpra please email [MTS@ahpra.gov.au](mailto:MTS@ahpra.gov.au).

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.

<p>Q3. In which state or territory is your current term/rotation/placement based?</p> <p><i>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.</i></p> <p><b>Please select one response only.</b></p>	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	<b>TERMINATE 2</b> <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](mailto:medicaltrainingsurvey@au.ey.com)

Should you need to contact the MBA and Ahpra please email [MTS@ahpra.gov.au](mailto:MTS@ahpra.gov.au).

<p>Q4a. Is your current term/rotation/placement in a hospital?</p> <p><i>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.</i></p>	Yes	<input type="radio"/> 1
	No	<input type="radio"/> 2

<p><b>ASK IF Q4a=1</b></p> <p>Q4b. Which hospital do you work at? If you work at more than one hospital, select where you spend most time.</p> <p><i>If you have only been practising or training in your current hospital for less than two weeks, please consider your previous hospital.</i></p> <p><b>Please type and select the hospital your hospital from the drop-down list that appears.</b></p>	<b>PIPE RESPONSES BY FROM STATE LIST Q3</b>	<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

**ASK IF Q4a=2 OR Q4b=97 OR Q4b=98 ELSE  
PIPE FROM DATABASE**

Q5. Is your current setting in a...?

**Please select one response only.**

**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.

Metropolitan area (e.g. capital city – Sydney, Melbourne, Brisbane, Adelaide, Perth, Darwin, Hobart, Canberra)  1

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)  2

Rural area (e.g. more than 15km from the closest town with a population of at least 15,000)  3

Do not wish to specify  99

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Q6a. 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                              | <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 |

<p><b>ASK IF Q6a = 4   6   8   11   14   15   19   23</b></p> <p>Q6b. If applicable, which subspecialty area are you practising in?</p> <p><b>Please select one response only.</b></p>	<p><b>Emergency Medicine [04]</b></p> <p>Paediatric emergency medicine <input type="radio"/> 12</p> <p>Not applicable <input type="radio"/> 98</p> <p>Prefer not to say <input type="radio"/> 99</p>
	<p><b>Intensive care medicine [06]</b></p> <p>Paediatric intensive care <input type="radio"/> 01</p> <p>Not applicable <input type="radio"/> 98</p> <p>Prefer not to say <input type="radio"/> 99</p>
	<p><b>Obstetrics and gynaecology [08]</b></p> <p>Gynaecological oncology <input type="radio"/> 60</p> <p>Maternal–fetal medicine <input type="radio"/> 61</p> <p>Obstetrics and gynaecological ultrasound <input type="radio"/> 62</p> <p>Reproductive endocrinology and infertility <input type="radio"/> 63</p> <p>Urogynaecology <input type="radio"/> 64</p> <p>Not applicable <input type="radio"/> 98</p> <p>Prefer not to say <input type="radio"/> 99</p>
	<p><b>Paediatrics and child health [11]</b></p> <p>General paediatrics <input type="radio"/> 06</p> <p>Paediatric clinical genetics <input type="radio"/> 07</p> <p>Community child health <input type="radio"/> 08</p> <p>Neonatal and perinatal medicine <input type="radio"/> 09</p> <p>Paediatric cardiology <input type="radio"/> 10</p> <p>Paediatric clinical pharmacology <input type="radio"/> 11</p> <p>Paediatric emergency medicine <input type="radio"/> 12</p> <p>Paediatric endocrinology <input type="radio"/> 13</p> <p>Paediatric gastroenterology and hepatology <input type="radio"/> 14</p> <p>Paediatric haematology <input type="radio"/> 15</p> <p>Paediatric immunology and allergy <input type="radio"/> 16</p> <p>Paediatric infectious diseases <input type="radio"/> 17</p> <p>Paediatric intensive care medicine <input type="radio"/> 18</p> <p>Paediatric medical oncology <input type="radio"/> 19</p> <p>Paediatric nephrology <input type="radio"/> 20</p> <p>Paediatric neurology <input type="radio"/> 21</p> <p>Paediatric nuclear medicine <input type="radio"/> 22</p> <p>Paediatric palliative medicine <input type="radio"/> 23</p> <p>Paediatric rehabilitation medicine <input type="radio"/> 24</p> <p>Paediatric respiratory and sleep medicine <input type="radio"/> 25</p> <p>Paediatric rheumatology <input type="radio"/> 26</p> <p>Not applicable <input type="radio"/> 98</p> <p>Prefer not to say <input type="radio"/> 99</p>



	<b>Pathology</b>	<b>[14]</b>
	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
	<b>Physician Adult medicine</b>	<b>[15]</b>
	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	

	<b>Radiology</b>	<b>[19]</b>
	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
	<b>Surgery</b>	<b>[23]</b>
	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

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## TRAINING CURRICULUM

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

<p>Q7. Organisations that employ interns are required to provide them with a formal education program (such as grand rounds and weekly teaching sessions etc) in addition to work-based teaching and learning. Do you know about your intern education program?</p>	Yes	<b>Go to Q8</b>	<input type="radio"/> 1
	No	<b>Go to Q9</b>	<input type="radio"/> 2

### ASK IF Q7=1

Q8. Thinking about your **intern education program**, to what extent do you agree or disagree with the following statements?

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1. My intern education program is helping me to continue to develop as a doctor	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
2. There are opportunities for me to meet the requirements of my intern education 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
3. I understand what I need to do to meet my intern education program requirements	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
4. My intern education program is preparing me for future medical practice	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
5. My intern 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

## ASSESSMENT

<p>Q9a. Did you receive an assessment for your previous rotation?</p>	Yes	<b>Go to Q9b</b>	<input type="radio"/> 1
	No	<b>Go to Q10</b>	<input type="radio"/> 2

**ASK IF Q9a=1**

Q9b. To what extent do you agree or disagree with the following statements? The assessment from my previous rotation...

**Please select one response per row.**

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1. Was relevant to my training	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
2. Included an opportunity to discuss feedback with my supervisor	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
3. Provided me with useful feedback about my progress as an intern	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
4. Was conducted fairly	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

**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.**

<p>Q10a. Did you receive an orientation to your setting? <b>HOVERTEXT FOR 'SETTING'</b> 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>	Yes, a formal orientation <input type="radio"/> 1
	Yes, but it was largely informal <input type="radio"/> 2
	No <input type="radio"/> 3 <b>Go to Q11</b>

<p><b>ASK IF Q10a=1 OR 2</b></p> <p>Q10b. How would you rate the quality of your orientation?  <b>Please select one response only.</b></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

## CLINICAL SUPERVISION

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

<p>Q11. In your setting, who mainly provides your day-to-day clinical supervision?</p> <p><b>Please select one response only.</b> <b>HOVERTEXT FOR 'SETTING'</b> 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>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black;">Specialist (including specialist GP)</td> <td style="text-align: right;"><input type="radio"/> 1</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Registrar</td> <td style="text-align: right;"><input type="radio"/> 2</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Other doctor</td> <td style="text-align: right;"><input type="radio"/> 3</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Nurse</td> <td style="text-align: right;"><input type="radio"/> 4</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Other</td> <td style="text-align: right;"><input type="radio"/> 5</td> </tr> <tr> <td style="border-bottom: 1px solid black;">I don't have a clinical supervisor</td> <td style="text-align: right;"><input type="radio"/> 6</td> </tr> </table> <p style="text-align: right;"><b>Go to Q15</b></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	<input type="radio"/> 6
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	<input type="radio"/> 6												

### ASK IF Q11=1 TO 5

Q12. 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 <b>IN HOURS</b> 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 <b>AFTER HOURS</b> 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 Q11=1 TO 5**

Q13. 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	Not applicable
1. Helpfulness	<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	<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 intern education 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
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. Allowing for an appropriate level of responsibility	<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. Ensuring that you only perform work that you are ready for or have the experience to address	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99

<p><b>ASK IF Q11=1 TO 5</b></p> <p>Q14. For your setting, how would you rate the quality of your clinical supervision?</p> <p><b>Please select one response only.</b> <b>HOVERTEXT FOR 'SETTING'</b> 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>Excellent <input type="radio"/> 5</p> <p>Good <input type="radio"/> 4</p> <p>Average <input type="radio"/> 3</p> <p>Poor <input type="radio"/> 2</p> <p>Terrible <input type="radio"/> 1</p>
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### ACCESS TO TEACHING

<p>Q15. Thinking about the development of your knowledge and skills, in your setting do you have sufficient opportunities to develop your...</p> <p><b>Please select one response per row.</b> <b>HOVERTEXT FOR 'SETTING'</b> 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>				
		<b>Yes</b>	<b>No</b>	<b>Not applicable</b>
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.	Ethics	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
5.	Leadership and management	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
6.	Communication	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
7.	Cultural safety	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3
8.	Research	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3

<p>Q16. Thinking about your access to opportunities to <b>develop your skills</b>, to what extent do you agree or disagree with the following statements?</p> <p>In my setting...</p> <p><b>Please select one response per row.</b> <b>HOVERTEXT FOR 'SETTING'</b> 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>							
		<b>Strongly Agree</b>	<b>Agree</b>	<b>Neither Agree nor Disagree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>Not applicable</b>
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 <b>other doctors</b> 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 <b>other health professionals</b> 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

Q17. 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	<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.	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
4.	I am able participate in research activities	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

Q18. Which of the following statements best describe the interaction between your training requirements and the responsibilities of your job?

My job responsibilities...

**Please select one response only.**

**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



Q19. 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.

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Not available
1. 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
2. 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
3. <u>Team or unit based activities</u> <b>HOVERTEXT</b> 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
4. Medical/surgical and/or hospital-wide meetings such as grand round and/or practice based 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
5. 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
6. 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
7. 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

Q20. Overall, how would you rate the quality of the teaching sessions?  <b>Please select one response only.</b>	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

Q21. 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	<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, such as a 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

Q22. 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	<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
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. Bullying, harassment and discrimination (including racism) 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. I <b>know how</b> 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
8. I <b>am confident</b> 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
9. 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

Q23a. Thinking about your workplace, have you experienced and/or witnessed any of the following in the past 12 months?

**Please select all that apply.**

	1) Experienced	2) Witnessed
<b>1. Bullying</b> <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
<b>2. Harassment</b> <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
<b>3. Discrimination</b> <i>Discrimination includes adverse actions or being treated less favourably because of a person's characteristics, like their race, religion, gender or sexual orientation.</i>	<input type="checkbox"/> 3	<input type="checkbox"/> 3
<b>98. None of these</b>	<input type="radio"/> 98	<input type="radio"/> 98

**SHOW BELOW Q23a:** If you need to access support for your health, contact your GP or visit [www.dr4drs.com.au](http://www.dr4drs.com.au) for information on services in your area.

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](http://www.humanrights.gov.au/employers/good-practice-good-business-factsheets/workplace-discrimination-harassment-and-bullying)

**SHOW IF Q23a.1=1|2|3 OR Q23a.2=1|2|3**

Q23b. 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)	<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/administrative staff	<input type="checkbox"/> 5	<input type="checkbox"/> 5
6. Patient and/or patient family/carer	<input type="checkbox"/> 6	<input type="checkbox"/> 6
7. Other	<input type="checkbox"/> 7	<input type="checkbox"/> 7
99. Prefer not to say	<input type="radio"/> 99	<input type="radio"/> 99

**SHOW IF Q23b.1=1|2|3|4|5|7 OR Q23b.2=1|2|3|4|5|7**

Q23c. The person(s) responsible was...  
**Please select all that apply.**

	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 Q23c.1=1|2 OR Q23c.2=1|2**

Q23d. Was the person(s) one of your supervisors?  
**Please select one response**

	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 Q23a.1=1|2|3 OR Q23a.2=1|2|3**

Q23e. Have you reported it?  
**Please select one response**

	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 Q23e.1=1 OR Q23e.2=1**

Q23f. Has the report been followed-up?  
**Please select one response**

	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 Q23f.1=1 OR Q23f.2=1**

Q23g. Are you satisfied with how the report was followed-up?

**Please select one response**

	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 Q23a.1=1|2|3 OR Q23a.2=1|2|3**

Q23h. How has the incident adversely affected your medical training?

**Please select one response**

	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

**WORKPLACE ENVIRONMENT AND CULTURE**

Q24. If you needed support, do you know how to access support for your health (including for stress and other psychological distress)?

**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](http://www.drs4drs.com.au) for information on services in your area.*

- Yes  1
- No  2
- Unsure  3

Q25. 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	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
02. Having to work <b>paid</b> overtime	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
03. Having to work <b>unpaid</b> overtime	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
04. Dealing with patient expectations	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
05. Dealing with patients' families	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
06. Expectations of supervisors	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
07. Supervisor feedback	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
08. Having to relocate for work	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
09. 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
10. Limited access to senior clinicians	<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

<p>Q26. How would you rate your workload in your setting?</p> <p><b>Please select one response only.</b></p> <p><b>HOVERTEXT FOR 'SETTING'</b> 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>	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

<p>Q27. On average in the past month, how many hours per week have you worked?</p> <p><b>HOVERTEXT FOR 'PER WEEK'</b> This includes rostered, unrostered, claimed and unclaimed overtime and recall – this does not include undisturbed on-call</p> <p><b>Please select one response only.</b></p>	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

<p>Q28. For any unrostered overtime you have completed in the past, how often did...?</p> <p><b>Please select one response per row.</b></p>						
		<b>Always</b>	<b>Most of the time</b>	<b>Sometimes</b>	<b>Never</b>	<b>Not Applicable</b>
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

### PATIENT SAFETY

<p>Q29. In your setting, how would you rate the quality of your training on how to raise concerns about patient safety?</p> <p><b>Please select one response only.</b></p> <p><b>HOVERTEXT FOR 'SETTING'</b> 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>	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



Q30. 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	<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

**OVERALL SATISFACTION**

Q31. 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 <b>current training position</b> 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 <b>current workplace</b> 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.**

Q32. Do you intend to become a specialist?	Yes	<b>Go to Q33</b>	<input type="radio"/> 1
	No	<b>Go to Q34</b>	<input type="radio"/> 2
	Unsure	<b>Go to Q34</b>	<input type="radio"/> 3

**ASK IF Q32=1**

Q33. Which specialty are you most interested in pursuing?

**Please select one response only.**

- Addiction medicine – The Royal Australasian College of Physicians (**RACP**)  01
- Anaesthesia – Australian and New Zealand College of Anaesthetists (**ANZCA**)  02
- Dermatology – 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**)  05
- General practice – The Royal Australian College of General Practitioners (**RACGP**)  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 – 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 ( <b>RACDS</b> )	<input type="radio"/> 27
Unsure	<input type="radio"/> 97

Q34. 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	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
2. I am interested in rural practice	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
3. I am interested in getting involved in medical research	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
4. I am interested in getting involved in medical teaching	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
5. <b>SHOW IF Q32=1</b> I am concerned about being able to secure a place in my preferred College training program	<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
7. I am considering a future outside of medicine	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

## COVID-19

Q35. We would like to know if and how, COVID-19 has impacted your medical training in 2021.

COVID-19 has impacted my...

	Positively	Negatively	Mixture of positive and negative	Unaffected	Unsure	Not applicable
1. Training 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
2. Routine 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
3. Ways of learning	<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. Access to learning resources	<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. Exam(s) preparation	<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. Research 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
7. Progression (e.g. delayed entry, completion 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
8. Workload	<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. Medical training overall	<input type="radio"/> 5	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 99

## 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>Q36. Do you identify as...? <b>Please select one response only.</b></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>	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="border-bottom: 1px solid black;">Man or male</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 1</td></tr> <tr><td style="border-bottom: 1px solid black;">Woman or female</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 2</td></tr> <tr><td style="border-bottom: 1px solid black;">Non-binary</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 3</td></tr> <tr><td style="border-bottom: 1px solid black;">Prefer not to say</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 99</td></tr> </table>	Man or male	<input type="radio"/> 1	Woman or female	<input type="radio"/> 2	Non-binary	<input type="radio"/> 3	Prefer not to say	<input type="radio"/> 99						
Man or male	<input type="radio"/> 1														
Woman or female	<input type="radio"/> 2														
Non-binary	<input type="radio"/> 3														
Prefer not to say	<input type="radio"/> 99														
<p>Q37. What is your age? <b>Please select one response only.</b></p>	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="border-bottom: 1px solid black;">20 to 24</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 1</td></tr> <tr><td style="border-bottom: 1px solid black;">25 to 29</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 2</td></tr> <tr><td style="border-bottom: 1px solid black;">30 to 34</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 3</td></tr> <tr><td style="border-bottom: 1px solid black;">35 to 39</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 4</td></tr> <tr><td style="border-bottom: 1px solid black;">40 to 45</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 5</td></tr> <tr><td style="border-bottom: 1px solid black;">45+</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 6</td></tr> <tr><td style="border-bottom: 1px solid black;">Prefer not to say</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 99</td></tr> </table>	20 to 24	<input type="radio"/> 1	25 to 29	<input type="radio"/> 2	30 to 34	<input type="radio"/> 3	35 to 39	<input type="radio"/> 4	40 to 45	<input type="radio"/> 5	45+	<input type="radio"/> 6	Prefer not to say	<input type="radio"/> 99
20 to 24	<input type="radio"/> 1														
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30 to 34	<input type="radio"/> 3														
35 to 39	<input type="radio"/> 4														
40 to 45	<input type="radio"/> 5														
45+	<input type="radio"/> 6														
Prefer not to say	<input type="radio"/> 99														
<p>Q38. Do you identify as an Australian Aboriginal and/or Torres Strait Islander person? <b>Please select one response only.</b></p>	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="border-bottom: 1px solid black;">Yes – Aboriginal</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 1</td></tr> <tr><td style="border-bottom: 1px solid black;">Yes – Torres Strait Islander</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 2</td></tr> <tr><td style="border-bottom: 1px solid black;">Yes – Both Aboriginal and Torres Strait Islander</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 3</td></tr> <tr><td style="border-bottom: 1px solid black;">No</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 4</td></tr> <tr><td style="border-bottom: 1px solid black;">Prefer not to say</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 99</td></tr> </table>	Yes – Aboriginal	<input type="radio"/> 1	Yes – Torres Strait Islander	<input type="radio"/> 2	Yes – Both Aboriginal and Torres Strait Islander	<input type="radio"/> 3	No	<input type="radio"/> 4	Prefer not to say	<input type="radio"/> 99				
Yes – Aboriginal	<input type="radio"/> 1														
Yes – Torres Strait Islander	<input type="radio"/> 2														
Yes – Both Aboriginal and Torres Strait Islander	<input type="radio"/> 3														
No	<input type="radio"/> 4														
Prefer not to say	<input type="radio"/> 99														
<p>Q39a. Did you complete your primary medical degree in Australia or New Zealand? <b>Please select one response only.</b></p>	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="border-bottom: 1px solid black;">Yes - Australia</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 1</td></tr> <tr><td style="border-bottom: 1px solid black;">Yes - New Zealand</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 2</td></tr> <tr><td style="border-bottom: 1px solid black;">No - Elsewhere</td><td style="text-align: right; border-bottom: 1px solid black;"><input type="radio"/> 3</td></tr> </table>	Yes - Australia	<input type="radio"/> 1	Yes - New Zealand	<input type="radio"/> 2	No - Elsewhere	<input type="radio"/> 3								
Yes - Australia	<input type="radio"/> 1														
Yes - New Zealand	<input type="radio"/> 2														
No - Elsewhere	<input type="radio"/> 3														
<p><b>ASK IF Q39a=3</b></p> <p>Q39b. In which country did you complete your primary medical degree? <b>Please type in and select.</b></p>	<div style="border: 1px solid black; height: 30px; width: 100%; margin-bottom: 5px;"></div> <p><b>PROGRAMMER NOTE: ADD AUTOCOMPLETE DROP DOWN</b></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, we comply with the requirements of the Privacy Act.

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