

This is a copy of the International Medical Graduate questions.

Medical Training Survey – Landing Page

Thank you for taking time to complete the Medical Training Survey (**MTS**), which is being conducted for the Medical Board of Australia (**MBA**) and the Australian Health Practitioner Regulation Agency (**Ahpra**).

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.

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 derived from MTS data may be generated, while assuring participant confidentiality. Stakeholders may apply MTS data to improve medical training in Australia.

The MTS is being administered by EY Sweeney and will take approximately 15 minutes to complete.

Click here for more information about participation.

Please press **NEXT** to continue.

For access to the EY Sweeney Privacy Policy, click <u>here</u>. For any technical problems with this survey please send an email by selecting on the link that appears at the bottom of each page.

Medical Training Survey



Medical Training Survey – Main Survey Introduction

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Click here for more information about participation.

How to complete the survey

Use your mouse to "Click" the relevant circles or boxes to mark your selection with a black dot or a tick. Some questions require you to type in your answers.

You may close the survey down and re-enter at the point you left off. To do so, use the link in the email invitation (interns and international medical graduates) or in your confirmation of registration email (all other doctors in training).

Once you have completed all questions on a page you will need to click the "Next" Button to proceed to the next screen.

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

Please press **NEXT** to continue.

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DEMOGRAPHICS

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

		PGY1	O 01
Q1.	What is your postgraduate year? Please select one response only.	PGY2	O 02
{Q1}		PGY3	O 03
		PGY4	0 04
		PGY5	O 05
		PGY6	O 06
		PGY7	0 07
		PGY8	O 08
		PGY9	O 09
		PGY≥10	O 10

Q2. {Q61}	Are you employed: Please select one response only.	Full time Part time Casually	0 1 0 2 0 3
		On leave for most of your current rotation	TERMINATE 1 O 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 <u>MTS@ahpra.gov.au</u>.

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	ACT	O 01
	term/rotation/placement based?	NSW	O 02
		<u>NT</u>	O 03
	If you have only been practising or training in your current state or territory for less	QLD	0 04
	than two weeks, please select the state or	SA	O 05
	territory for your previous setting. Please select one response only.	Tas.	O 06
{Q2}	riease select one response only.	Vic.	0 07
		<u>WA</u>	O 08
		Outside Australia TERMINATE 2	O 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 position in a hospital?	Yes No	0 1 0 2
	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.		
{Q8a}			
ASKI	F Q5a=1 {Q8a=1}	PIPE RESPONSES BY FROM STATE LIST Q4{Q2}	O 01
Q5b.	Which hospital do you work at?		0 02
			0 02
	If you work at more than one hospital,		O 03
	select where you spend most time.		0 03
	select where you spend most time.		
			O 04
	select where you spend most time. If you have only been practising or training	Other	O 04 O 05
	select where you spend most time. If you have only been practising or training in your current hospital for less than two weeks, please consider your previous	Other Do not wish to specify	0 04 0 05 0 06



	Q5a=1 (Q8a)	Aboriginal and Torres Strait Islander health service	□ 01
Q5c.	Select any additional settings you work in.	Aged care facility	□ 02
This gu	lestion refers to your additional <u>clinical</u>	Community health service	□ 03
	s/workplace, not your role/rotation/position.	Correctional services	□ 04
	- Q5a=2 (Q8a)	General practice clinic	□ 05
Q5c.	Which settings do you work in?	Other	□ 97
		Not applicable	O 98
{Q5c}	Please select all that apply 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.		
ASK IF	Q5a=2 OR Q5b=97 OR Q5b=98 ELSE PIPE FROM DATABASE (Q8a=2 Q8b=97 98)	Metropolitan area (e.g. capital city – Sydney, Melbourne Brisbane, Adelaide, Perth, Darwin, Hobart, Canberra)	<u>e,</u> <u>O 1</u>
Q6.	Is your current setting in a?	Regional area (e.g. within or less than 15km from a tow population of at least 15,000 that is not a capital city)	n with a 0_2
	Please select one response only. HOVERTEXT FOR 'SETTING'	Rural area (e.g. more than 15km from the closest town population of at least 15,000)	with a O_3
	Setting is the current or most recent	Do not wish to specify	O 99
{Q62}	workplace, placement or rotation where at least 2 weeks have been completed as part of your training.		
Q7.	What is your role in the setting?	Intern	0 1
		Resident Medical Officer / Hospital Medical Officer	0 2
	Please select one response only.	Principal House Officer	04
	HOVERTEXT FOR 'SETTING'	Career Medical Officer	06
	Setting is the current or most recent workplace, placement or rotation where at	Registrar	07
	least 2 weeks have been completed as part	Specialist	08
{Q4}	of your training.	Unaccredited Registrar	09
(Other	O 97
ASK IF	Q7=6 {Q4=6}	Yes	01
Q8.	Do you intend to undertake further	No	02
Q0.	Do you intend to undertake further postgraduate training in medicine?		_
{Q5}			

TERMINATE 3:

Thank you for your interest in completing the Medical Training Survey. This survey has been designed for doctors in training, as a Career Medical Officer with no intention to undertake further postgraduate training in medicine the remaining questions in this survey are unlikely to be appropriate for you. We thank you for your time in completing the survey up to this point.



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.

		Addiction medicine	O 01
Q9a.	Which area are you currently practising in?	Anaesthesia	O 02
	Please select one response only.	Dermatology	O 03
{Q7}		Emergency medicine	0 04
	If you have only been practising or training in your current area for less than two	General practice	O 05
	weeks, please select the area for your	Intensive care medicine	O 06
	previous setting.	Medical administration	O 07
		Obstetrics and gynaecology	O 08
	Occupational and environmental medicine	O 09	
		Ophthalmology	<u> </u>
		Paediatrics and child health (inc. specialties)	0 11
		Pain medicine	O 12
		Palliative medicine	O 13
		Pathology	0 14
		Physician Adult medicine (inc. specialties)	O 15
		Psychiatry	O 16
		Public health medicine	0 17
		Radiation oncology	O 18
		Radiology	O 19
		Rehabilitation medicine	O 20
		Sexual health medicine	O 21
		Sport and exercise medicine	O 22
		Surgery	O 23
		Other	O 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?

Please select one response only.

{Q7b}

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



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



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



TRAINING CURRICULUM

0.40		1 or less	O 01
Q10.	How many years have you held registration in Australia?	2	0 02
		3	O 03
	Please select one response only.	4	0 04
{Q9}		5	O 05
		<u>6</u>	O 06
		7	O 07
		8	O 08
		9	O 09
		10 or more	0 10
Q11a.	Which pathway are you in?	Specialist and competent authority pathway Go to Q11b (Q10b)	O 01
		Specialist pathway Go to Q11b {Q10b}	O 02
{Q10a}	Please select one response only.	Standard pathway (AMC exam)	O 03
		Standard pathway (Workplace based assessment)	O 04
		Competent authority pathway	O 05
		Short term training pathway	0 06

Other

Unsure



0 97

O 99



ASK IF	E Q11a=1 OR 2 {Q10a=1 2}	Australasian College for Emergency Medicine (ACEM) 01
Q11b.	Which college(s) did your specialist	The Australasian College of Dermatologists (ACD) 02
	pathway assessment?	Australasian College of Sport and Exercise Physicians (ACSEP)
	Please select all that apply, up to a maximum of two.	Australian and New Zealand College of Anaesthetists (ANZCA)
{Q10b}		Australian College of Rural and Remote Medicine (ACRRM)
		College of Intensive Care Medicine of Australia and New Zealand (CICM)
		Royal Australasian College of Dental Surgeons (RACDS) 07
		The Royal Australasian College of Medical Administrators (RACMA)
		The Royal Australasian College of Physicians (RACP) 09
		Royal Australasian College of Surgeons (RACS)
		The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG)
		The Royal Australian and New Zealand College of Ophthalmologists (RANZCO)12
		The Royal Australian and New Zealand College of Psychiatrists (RANZCP)
		The Royal Australian and New Zealand College of Radiologists (RANZCR)
		The Royal Australian College of General Practitioners (RACGP)
		The Royal College of Pathologists of Australasia (RCPA) 16
		Prefer not to say 97
		Unsure O 99
Q12.		Yes Go to Q13 (Q12) O 1
	Do you have a professional <u>development or</u> <u>training plan</u> ?	No Go to Q14 {Q13} O 2
	HOVERTEXT FOR 'PROFESSIONAL DEVELOPMENT/TRAINING PLAN'	
	Developed by you and your supervisor/peer	
{Q11}	reviewer for your employer/college/MBA	

ASK IF Q12=1 {Q11=1}

Q13. Thinking about your **professional development or training plan**, to what extent do you agree or disagree with the following statements?

Please select one response per row.

{Q12}

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	My plan is helping me to continue to develop as a doctor	O 5	04	03	O 2	O 1



2.	There are opportunities for me to meet the requirements of my plan in my current setting	05	O 4	03	02	O 1
3.	I understand what I need to do to meet my plan requirements	O 5	O 4	03	O 2	O 1
4.	My plan is preparing me to be a doctor/specialist in the Australian healthcare system	05	O 4	03	02	O 1
5.	My plan is preparing me for future medical practice	O 5	O 4	03	O 2	O 1
6.	My plan is advancing my knowledge	05	04	03	02	01



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.

Q27a.	Did you receive an orientation to your setting? HOVERTEXT FOR 'SETTING' Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.	Yes, a formal orientation Yes, but it was largely informal No Go to Q28 (Q30)	0 1 0 2 0 3
ASK I	F Q27a=1 OR 2 {Q29a=1 2}	Excellent	05
027h	How would you rate the quality of your	Good	04
Q210.	orientation?	Average	03
		Poor	02
{Q29b}	Please select one response only.	Terrible	01

CLINICAL SUPERVISION

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

Q28. In your setting, who mainly provides your day-to-day clinical supervision/peer review?	Specialist (including specialist GP)	01
day-to-day clinical supervision/peer review:	Registrar	02
Please select one response only.	Other doctor	03
HOVERTEXT FOR 'SETTING' Setting is the current or most recent	Nurse	04
workplace, placement or rotation where at	Other	05
least 2 weeks have been completed as part of your training.	I don't have a clinical supervisor/peer reviewer	
	Go to Q32 {Q34}	07

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)/peer reviewer(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.
{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	05	O 4	03	02	O 1
2.	I am able to contact other senior medical staff AFTER HOURS if I am concerned about a patient	05	O 4	03	02	O 1



ASK IF Q28=1 TO 5 (Q30=1:5)

Q30. 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/peer review 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

{Q32a}

		1	2	3	4	5	Not applicable
1.	Helpfulness	05	04	03	02	01	O 99
2.	Accessibility	05	04	03	O 2	01	O 99
3.	Regular, INFORMAL feedback	05	04	03	02	01	O 99
4.	Regular, FORMAL feedback	05	04	03	02	01	O 99
5.	Usefulness of feedback	05	04	03	02	01	O 99
6.	Discussions about my goals and learning objectives	05	O 4	03	O 2	O 1	O 99
7.	Supporting you to meet your training plan/pathway requirements	05	O 4	03	O 2	O 1	O 99
8.	Including opportunities to develop your skills	05	O 4	03	O 2	O 1	O 99
9.	Ensuring your work is appropriate to your level of training	05	O 4	03	O 2	01	O 99
11.	Completing workplace based assessments	05	04	03	O 2	O 1	O 99



ASK II Q31.	 F Q28=1 TO 5 (030=115) For your setting, how would you rate the quality of your clinical supervision/peer review? 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. 	Excellent Good Average Poor Terrible	0 5 0 4 0 3 0 2 0 1
Q32. {Q34}	Has your performance been assessed 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.	Yes <u>No – but this is scheduled</u> <u>No – but I would like to be</u> <u>No – it's not necessary</u> <u>Unsure</u>	0 1 0 2 0 3 0 4 0 5



ACCESS TO TEACHING

Q35.	opportunities to develop your Please select one response per row. HOVERTEXT FOR 'SETTING' Setting is the current or most recent workplace, placement or rotation where at least 2 weeks have been completed as part of your training.						
				Yes	No	Not	applicable
1.	Theoretical knowledge			O 1	02		03
2.	Clinical skills			O 1	02		03
3.	Procedural skills			01	02		03
9.	Teaching and supervision skills			01	02		03
4.	Ethics			01	02		03
5.	Leadership and management			01	02		03
6.	Communication			01	02		03
7.	Cultural safety			01	O 2		03
8.	Research			01	02		03
Q33. (Q35)	 Thinking about your access to opportunities to with the following statements? In my setting Please select one response per row. HOVERTEXT FOR 'SETTING' Setting is the current or most recent workplace completed as part of your training. 				·	-	-
		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Not applicable
3.	I can access the training opportunities available to me	05	04	03	O 2	0 1	O 99
4.	I have to compete with other doctors for access to opportunities	05	04	03	02	01	O 99



Q34. 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.

{Q36}

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	I have access to protected study time/leave	05	04	03	02	01
2.				-		
3.	I am able to attend conferences, courses and/or external education events	O 5	O 4	03	O 2	O 1
5.	My employer supports me to attend formal and informal teaching sessions	O 5	O 4	03	O 2	O 1
6.	I am able to participate in research activities	O 5	O 4	03	O 2	O 1

Q36.	Which of the following statements best describe the interaction between your training requirements and the responsibilities of your job?	Never prevent me from meeting my training requirements O 1 Rarely prevent me from meeting my training requirements O 2 Sometimes prevent me from meeting my training requirements 0 3
{Q37}	My job responsibilities… Please select one response only.	Often prevent me from meeting my training requirements O 4



Q38. 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.

{Q14}

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Not available
1.	Formal education program	05	04	03	02	01	O 99
2.	Online modules (formal and/or informal)	05	O 4	03	O 2	O 1	0 99
3.	Teaching in the course of patient care (bedside teaching)	05	O 4	03	O 2	01	O 99
4.	Team or unit based activities HOVERTEXT Such as mortality and morbidity audits (M&Ms), other quality assurance activities, case presentations and seminars, journal club, radiology and pathology meetings	O 5	04	03	02	O 1	O 99
5.	Medical/surgical and/or hospital-wide meetings such as grand round and/or practice based meetings	O 5	04	03	02	01	O 99
6.	Multidisciplinary meetings	05	04	03	02	01	O 99
7.	Simulation teaching	05	04	03	02	01	O 99
8.	Access to mentoring	05	04	Ο3	O 2	01	0 99

000		Excellent	05
Q39.	Overall, how would you rate the quality of the teaching sessions?	Good	04
		Average	03
	Please select one response only.	Poor	02
{Q38}		Terrible	01



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.

Please select one response per row.

		Excellent	Good	Average	Poor	Terrible	Not provided	Not applicable
1.	Reliable internet for training purposes	05	04	Ο3	02	O 1	O 98	O 99
2.	Educational resources	05	04	03	02	01	O 98	O 99
3.	Working space, such as a desk and computer	05	04	03	O 2	O 1	O 98	O 99
4.	Teaching spaces	05	04	03	02	01	O 98	O 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.

Please select one response per row.

{Q40}

{Q40}						
		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	Most senior medical staff are supportive	05	04	03	02	01
2.	My workplace supports staff wellbeing	05	04	03	02	01
3.	In practice, my workplace supports me to achieve a good work/life balance	05	O 4	Ο 3	O 2	O 1
9.	There is a positive culture at my workplace	05	04	03	02	01
4.	I have a good work/life balance	05	04	03	O 2	01
5.	Bullying, harassment and discrimination by anyone is not tolerated at my workplace	05	04	03	O 2	O 1
10.	Racism is not tolerated at my workplace	05	04	03	O 2	01
6.	I know how to raise concerns/issues about bullying, harassment and discrimination (including racism) in my workplace	05	O 4	03	02	01
7.	I am confident that I would raise concerns/issues about bullying, harassment and discrimination (including racism) in my workplace	05	04	03	0 2	01
8.	I could access support from my workplace if I experienced stress or a traumatic event	O 5	04	O 3	O 2	01



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

		1) Experienced	2) Witnessed
1.	Bullying The Fair Work Amendment Act 2013 defines workplace bullying as repeated unreasonable behaviour by an individual towards a worker which creates a risk to health and safety.*	□ 1	□ 1
2.	Harassment Harassment is behaviour which victimises, humiliates, insults, intimidates or threatens an individual or group due to the person's characteristics, like their race, religion, gender or sexual orientation.	□ 2	□ 2
3.	Discrimination Discrimination includes adverse actions or being treated less favourably because of a person's characteristics, like their religion, gender or sexual orientation.	□ 3	□ 3
4.	Racism 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.**	□ 5	□ 5
98.	None of these	04	04

SHOW BELOW Q43: If you need to access support for your health, contact your GP or visit <u>www.drs4drs.com.au</u> for information on services in your area.

SHOW IF Q42a.1=1|2|3|5 OR Q42a.2=1|2|3|5 (Q41B_2)

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

Please select all that apply.

	1) Experienced	2) Witnessed		
1. Senior medical staff (e.g. consultants, specialists)	□ 1	□ 1		
 Medical colleague (e.g. registrar or other doctors in training) 	□ 2	□ 2		
3. Nurse or midwife	□ 3	□ 3		
4. Other health practitioner	□ 4	□ 4		
5. Hospital management/administrative staff	□ 5	□ 5		



6.	Patient and/or patient family/carer	□ 6	□ 6
7.	Other	□ 7	□ 7
99.	. Prefer not to say	O 99	O 99
SHOW	└IF Q42b.1=1 2 34 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	□ 1	□ 1
2.	In my department but not in my team	□ 2	□ 2
•	From another department	□ 3	□ 3
3.			
99.	Prefer not to say	O 99	O 99
99. SHOW		O 99	O 99
99. SHOW	IF Q42c.1=1 2 or Q42c.2=1 2 (Q41C_2) Was the person(s) one of your supervisors?	O 99	O 99 2) Witnessed
99. SHOW	IF Q42c.1=1 2 or Q42c.2=1 2 (Q41C_2) Was the person(s) one of your supervisors?		
99. SHOW Q42d.	Prefer not to say IF Q42c.1=1 2 or Q42c.2=1 2 (Q41C_2) Was the person(s) one of your supervisors? Please select one response (Q41D_2) Yes	1) Experienced	2) Witnessed
99. SHOW Q42d. 1. 2.	Prefer not to say IF Q42c.1=1 2 or Q42c.2=1 2 (Q41C_2) Was the person(s) one of your supervisors? Please select one response (Q41D_2) Yes	1) Experienced O 1	2) Witnessed O 1
99. SHOW Q42d. 1. 2. 3.	Prefer not to say IF Q42c.1=1 2 or Q42c.2=1 2 (Q41C_2) Was the person(s) one of your supervisors? Please select one response (Q41D_2) Yes No	1) Experienced O 1 O 2	2) Witnessed O 1 O 2
99. SHOW Q42d. 1. 2. 3. SHOW	Prefer not to say IF Q42c.1=1 2 or Q42c.2=1 2 (Q41C_2) Was the person(s) one of your supervisors? Please select one response (Q41D_2) Yes No Prefer not to say	1) Experienced O 1 O 2	2) Witnessed O 1 O 2
99. SHOW Q42d. 1. 2. 3. SHOW	Prefer not to say IF Q42c.1=1 2 or Q42c.2=1 2 (Q41C_2) Was the person(s) one of your supervisors? Please select one response (Q41D_2) Yes No Prefer not to say IF Q42a.1=1 2 3 5 OR Q42a.2=1 2 3 5 (Q41A_2) Have you reported it?	1) Experienced O 1 O 2	2) Witnessed O 1 O 2
99. SHOW Q42d. 1. 2. 3. SHOW Q42e.	Prefer not to say IF Q42c.1=1 2 or Q42c.2=1 2 (Q41C_2) Was the person(s) one of your supervisors? Please select one response (Q41D_2) Yes No Prefer not to say IF Q42a.1=1 2 3 5 OR Q42a.2=1 2 3 5 (Q41A_2) Have you reported it?	1) Experienced 0 1 0 2 0 99	2) Witnessed O 1 O 2 O 99



SHOW IF Q42e.1=2 OR Q42e.2=2 (Q41E_2)

Q42i. What prevented you from reporting? Please select all that apply. (NEW)

	1) Experienced	2) Witnessed		
1. Lack of processes in place	□ 1	□ 1		
 Wasn't provided information on how or who to report to 	□ 2	□ 2		
3. Concern about repercussions	□ 3	□ 3		
4. Lack of support	□ 4	□ 4		
5. Nothing will be done if I do report it	□ 5	□ 5		
6. I feel it is not the accepted practice to report it	□ 6	□ 6		
7. Other	□ 7	□ 7		
99.Prefer not to say	O 99	O 99		

SHOW IF Q42e.1=1 OR Q42e.2=1 (Q41E_2)

Q42f. Has the report been followed-up?

Please select one response {Q41F_2}

	1) Experienced	2) Witnessed
1. Yes	O 1	O 1
2. No	02	O 2
3. Unsure	03	03

SHOW IF Q42xf.1=1| OR Q42xf.2=1| (NEW)

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

Please select one response (NEW)					
	1) Experienced	2) Witnessed			
1. Yes	0 1	O 1			
2. No	02	O 2			
3. Unsure	03	O 3			



SHOW	SHOW IF Q42a.1=1 2 3 5 OR Q42a.2=1 2 3 5							
Q42xh	Q42xh. How has the incident adversely affected your medical training? Please select one response (NEW)							
			1) Experienced	2) Witnessed				
1.	No effect		0 1	O 1				
2.	Minor effect	nor effect		O 2				
3.	Moderate effect		03	03				
4.	Major effect		04	O 4				
5.	Unsure		05	05				
Q43. {Q42}	If you needed support, do you know how to access support for your health (including for stress and other psychological distress)?	Yes <u>No</u> Unsure		0 1 0 2 0 3				

SHOW BELOW Q43: If you need to access support for your health, contact your GP or visit <u>www.drs4drs.com.au</u> 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.

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

{Q43}

		Always	Most of the time	Sometimes	Never
01.	The amount of work I am expected to do	O 4	03	O 2	O 1
02.	Having to work paid overtime	O 4	03	O 2	O 1
03.	Having to work unpaid overtime	O 4	03	O 2	O 1
04.	Dealing with patient expectations	O 4	03	02	O 1
05.	Dealing with patients' families	O 4	03	02	O 1
06.	Expectations of supervisors/peer reviewer	O 4	03	02	O 1
07.	Supervisors/peer reviewer feedback	O 4	03	02	O 1
08.	Having to relocate for work	O 4	03	02	O 1
09.	Being expected to do work that I don't feel confident doing	04	03	02	01
10.	Limited access to senior clinicians	O 4	03	O 2	O 1
11.	Lack of appreciation	O 4	03	O 2	O 1
12.	Workplace conflict	O 4	O 3	O 2	O 1
		Very light			O 1
Q45.	How would you rate your workload in your setting?	Light			0 2
	Setting:	Moderate			03
	Please select one response only.	Heavy			04
	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.	Very heavy			05
{Q44}					



0.40		20 hours or less	01
Q46.	On average in the past month, how many hours per week have you worked?	<u>21 – 30 hours</u>	02
	, , , , , , , , , , , , , , , , , , , ,	<u>31 – 40 hours</u>	03
	HOVERTEXT FOR 'PER WEEK' This includes rostered, unrostered, claimed	<u>41 – 50 hours</u>	04
	and unclaimed overtime and recall – this	<u>51 – 60 hours</u>	05
	does not include undisturbed on-call	<u>61 – 70 hours</u>	06
{Q45}	Please select one response only.	<u>71 – 80 hours</u>	07
		<u>81 – 90 hours</u>	08
		More than 90 hours	09
		4	

Q47. For any unrostered overtime you have completed in the past, how often did...?

Please select one response per row.

{Q46}						
		Always	Most of the time	Sometimes	Never	Not Applicable
1.	You get paid for the unrostered overtime	O 4	O 3	02	O 1	O 99
2.	Working unrostered overtime have a negative impact on your training	O 4	O 3	O 2	O 1	O 99
3.	Working unrostered overtime provide you with more training opportunities	O 4	03	O 2	O 1	O 99

Q63a.	Have you accessed, or considered accessing, flexible working arrangements in your setting?	Yes, I have accessed flexible working arrangements O 1 I have considered accessing flexible working arrangements but chose not to access O 2
	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.	I have considered accessing flexible working arrangements but was unable to access O 3 I have not accessed, and have not required flexible working arrangements O 4 Prefer not to say O 99
	Please select one response only.	



ASK IF Q63a=1, 2 OR 3		Changes in hours of work (for example, reduction in hours worked, changes to start/finish times)
Q64.	SHOW IF Q63a=1 What sort of flexible arrangements did you access?	Changes in patterns of work (for example, working 'split-shifts', job sharing arrangements, or not being rostered on nightshifts)
	SHOW IF Q63a=2 OR 3 What sort of flexible arrangements would you have liked to access?	Changes in location of work (for example, working from home or working from another location) 3 Other 4
	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.	Prefer not to say O 99
	Please select all that apply.	
ASK II	F Q63a=1	Yes, the arrangements I accessed met all of my needs O 1
Q63b.	Did the flexible working arrangements you accessed in your setting meet your needs?	The arrangements I accessed met some, but not all, of my needs O 2 No, the arrangements I accessed did not meet my needs O 3
	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	Prefer not to say O 99



ASK IF Q63a=2 OR 3	Flexible working arrangements were not offered
Q63c. Why have you chosen not to access, or been unable to access, flexible working arrangements in your setting?	The flexible working arrangements offered did not meet my needs 2 Flexible working arrangements are not available in my current role or on my current rotation 3
 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. 	I do not feel comfortable asking for flexible working arrangements in my current setting 4 I feel I am not senior enough to access flexible working arrangements 5 I am currently employed on a short-term contract, or have other employment terms, which do not allow for flexible working arrangements 6 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 Excellent O 5 Q48. In your setting, how would you rate the 04 Good quality of your training on how to raise concerns about patient safety? Average Ο3 Please select one response only. Poor O 2 Terrible 01 **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. Q49. 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. Neither Strongly Strongly Disagree Agree Agree nor Agree Disagree Disagree 1. I know how to report concerns about O 5 04 Ο3 O 2 01 patient care and safety 2. There is a culture of proactively dealing O 5 04 O 3 02 01 with concerns about patient care and safety 3. I am confident to raise concerns about O 5 04 O 3 O 2 01 patient care and safety 4. There are processes in place at my O 5 04 Ο3 02 01 workplace to support the safe handover of patients between shifts / practitioners 5. I have received training on how to provide Ο5 04 Ο3 02 01 culturally safe care



OVERALL SATISFACTION

Q50. 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.

{Q52}

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

FUTURE CAREER INTENTIONS

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

054	b. De constitute des constitutes en el constitutes de	Yes – general registration	Go to Q54 {Q56}	01
Q51	b. Do you intend to continue on a pathway to general or specialist registration?	Yes – specialist registration	Go to Q54 {Q56}	02
	Please select one response only.	No	Go to Q62a {Q62a}	03
{Q53I		Unsure	Go to Q54 {Q56}	04



SKIP IF Q51b=3 {Q53b=3}

Q54. Thinking about your future career, to what extent do you agree or disagree with the following statements? **Please select one response per row.**

{Q56}	þ;					
		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1.	I have an interest in Aboriginal and Torres Strait Islander health/healthcare	O 5	04	03	O 2	0 1
2.	I am interested in rural practice	05	04	03	02	01
3.	I am interested in getting involved in medical research	05	04	Ο 3	O 2	O 1
4.	I am interested in getting involved in medical teaching	O 5	04	03	O 2	01
5.	I am concerned I will not successfully meet my pathway requirements	O 5	04	03	O 2	01
6.	I am concerned about whether I will be able to secure employment on completing of the pathway	05	O 4	03	02	O 1
7.	I am considering a future outside of medicine	O 5	04	03	02	01



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.

Q55.	Do you identify as? Please select one response only.		
Q00.		Man or male	01
		Woman or female	02
		Non-binary	03
	be different to sex recorded at birth and may be different to what is indicated on	Prefer not to say	<u> </u>
	legal documents		
{Q57}			
Q56.	What is your age?	<u>20 to 24</u>	01
{Q58}	Please select one response only.	25 to 29	02
(acc)		30 to 34	03
		35 to 39	04
		40 to 45	05
		45+	06
		Prefer not to say	O 99
Q57.	Do you identify as an Australian Aboriginal	Yes – Aboriginal	01
	and/or Torres Strait Islander person? Please select one response only.	Yes – Torres Strait Islander	02
		Yes – Both Aboriginal and Torres Strait Islander	03
		No	04
		Prefer not to say	O 99
		Yes	01
Q60.	Do you identify as a person with a disability?	No	0 2
	uisability ?	Prefer not to say	0 99
	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.	<u></u>	
(0.5%)	Please select one response only.		
{Q59}			



During your usual work week, do you spend time providing unpaid care, help, or assistance for family members or others? Please select all that apply.	Yes – Sole parenting responsibilities Yes – Co-parenting responsibilities Yes – Primary caregiving responsibilities (for adult(s)) Yes – Shared caregiving responsibilities (for adult(s)) No Prefer not to say	□ 1 □ 2 □ 3 □ 4 ○ 5 ○ 99
	spend time providing unpaid care, help, or assistance for family members or others?	During your usual work week, do you spend time providing unpaid care, help, or assistance for family members or others? Yes – Co-parenting responsibilities Please select all that apply. Yes – Shared caregiving responsibilities (for adult(s)) Yes – Shared caregiving responsibilities (for adult(s)) No

Q59b.	In which country did you complete your primary medical degree?
	Please type in and select.

PROGRAMMER NOTE: ADD AUTOCOMPLETE DROP DOWN

THAT IS THE END OF THE SURVEY - THANK YOU

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

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

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