## Family Medicine Longitudinal Survey Time 2 (Exit) 2021

#### **\*\*PROGRAM SPECIFIC CONSENT AND INTRODUCTION\*\***

Insert your own program-specific preamble here. For example, your REB may require you to state consent, confidentiality information here. If done on a separate page, please delete this section.

### **Creating a Unique Identifier**

In this section we collect information to create a unique identifier so you can maintain confidentiality. The unique identifier allows us to track your responses over time (e.g., Entry, Exit, once in practice) without recording your name. Your unique identifier will be created at your home institution (residency program). The CFPC will have no way to connect data to specific individuals. Your confidentiality will be assured.

\*1a. Enter the year you STARTED your residency program (Enter 4 -digit year; for example, 2012)

\*1b. Please enter the LAST 3 LETTERS of your full legal first name as it appears on your passport/ birth certificate or other legal document. Please use your LEGAL name (not your nick name). For example, if your name is William, but people call you "Bill," you would still use "William" and therefore enter "IAM. If your first name is only 2 letters, please enter "X" as the last letter. Example, if your first name is Du you would enter "DUX." (Your unique identifier will be created from a coded version of these three letters.)

\*2. Please enter the day on which you were born. Example, if you were born on January 13, you would enter 13; if you were born January 7, you would enter 07.



3. In what year were you born? (Enter 4 -digit birth year; for example, 1985)

\*4. What is the name of your clinical teaching site? (The clinical teaching site is the site to which you are matched or assigned by your FM Residency Program). Please choose <u>ONE</u> from the site names listed below: \*\*NOTE: PROGRAMS TO ADD COMPLETE LIST OF NAMES OF LOCAL CLINICAL TEACHING SITE OPTIONS OFFERED TO RESIDENTS\*\*

- O Site XXX (Listings of local Clinical Teaching Sites to be added by Program Administrator)
- O Site YYY
- O Site ZZZ etc...

### **Demographics**

#### 5. What is your marital status?

- Single
- O Married
- O Common-law
- O Divorced/ Separated
- O Widowed
- O Prefer not to answer

#### 6. Do you have children?

- Yes/Expecting
- O No
- O Prefer not to answer

#### 7. What is your gender?

- O Female
- O Male
- O Non-binary
- O Prefer not to answer

## **8.** Select the ONE statement which best describes the environment in which you grew up PRIOR to university.

- O Exclusively/ predominantly inner city
- O Exclusively/ predominantly urban/suburban
- O Exclusively/ predominantly small town
- O Exclusively/ predominantly rural
- O Exclusively/ predominantly remote/isolated
- O Mixture of environments

#### \*9. What year were you awarded your M.D. degree? (Enter 4-digit year; for example, 2010)

#### \*10. At which university were you awarded your M.D. degree?

- O University of British Columbia
- O University of Calgary
- O University of Alberta
- O University of Saskatchewan
- O University of Manitoba
- O University of Western Ontario
- O McMaster University
- O University of Toronto
- O Northern Ontario School of Medicine (NOSM)
- O University of Ottawa
- O Queen's University

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- O Université de Sherbrooke
- O Université de Montréal
- O McGill University
- O Université Laval
- O Dalhousie University
- O Memorial University
- O Outside Canada

### **About Your Residency**

#### **Important Terms**

\*For the purposes of the survey, comprehensive care describes the type of care family physicians provide (either on their own or with a team) to a defined population of patients across the life-cycle in multiple clinical settings (e.g., Office-based, hospital, in- home...) addressing a spectrum of clinical issues (from prevention to acute to chronic disease and palliative care).

Continuity of care/continuing care describes the ongoing relationship between the individual family physician and individuals in a defined group/panel/roster of patients, longitudinally over time.

Family Physicians with special interests: family doctors with traditional comprehensive continuing care family practices who act as the personal physicians for their patients and whose practices include one or more areas of special interest as integrated parts of the broad scope of services they provide; and

Family Physicians with focused practices: family doctors with a commitment to one or more specific clinical areas as major part-time or full-time components of their practices.

	-		-			
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Don't Know
My residency program was situated primarily within family medicine settings.	0	0	0	0	0	0

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

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Don't Know
In my residency program, I was exposed to a variety of different family medicine settings	0	0	0	0	0	0
My residency experiences were relevant to family medicine practice, even when in settings outside of family medicine.	0	0	0	0	0	0
My preceptors in other medical specialties valued family medicine.	0	0	0	0	0	0
My residency program exposed me to strong family medicine role models.	0	0	0	0	0	0
In my residency program, I have had an opportunity to develop relationships with a group of patients who I followed over the long term.	0	0	0	0	0	0
I feel/felt responsibility for a group of patients.	0	0	0	0	0	0
In my residency program, I had an identified person (or few persons) guiding my development as a family physician by overseeing my learning and progress.	0	0	0	0	0	0
In my residency program, I was provided experiences that exposed me to patients who had complex and/or ambiguous health issues.	0	0	0	0	0	0
In my residency program, I understood what the program expected of me, in order to graduate.	0	0	0	0	0	0
In my residency program, there were many informal opportunities given to me for feedback on my performance.	0	0	0	0	0	0

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Don't Know
In my residency program, I contributed to tailoring my learning when learning needs were identified.	0	0	0	0	0	0
Throughout my program I was actively aware of my progress.	0	0	0	0	0	0

## **12.** To what extent do you agree or disagree with the following statements?

## My residency training prepared me to...

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Care for the full range of health problems that may be encountered in family medicine.	0	0	0	0	0
Care for patients at all life stages.	0	0	0	0	0
Care for patients in a range of clinical settings (e.g., office, hospital, home, etc.)	0	0	0	0	0
Care for a range of populations (e.g., vulnerable, under-served, urban, rural, etc.).	0	0	0	0	0
Provide care across the spectrum of clinical responsibilities, from prevention to palliation.	0	0	0	0	0
Provide continuous care to the same group of patients over the long term.	0	0	0	0	0
Use electronic medical and health records.	0	0	0	0	0
Work as part of a team with other types of health professionals.	0	0	0	0	0
Evaluate and improve the quality of your patient care.	0	0	0	0	0
Teach medical students, residents and other health profession learners.	0	0	0	0	0

## **Perceptions about Family Medicine**

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	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Don't Know
I am proud to become a family physician.	0	0	0	0	0	0
Patients recognize the value of family medicine.	0	0	0	0	0	0
Patients believe that family physicians provide value above and beyond referring to other types of specialists.	0	0	0	0	0	0
I have found that other medical specialists have little respect for the expertise of family physicians.	0	0	0	0	0	0

#### **13.** To what extent do you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Don't Know
Family physicians make a valuable contribution that is different from other specialists.	0	0	0	0	0	0
I would prefer to be in another medical specialty.	0	0	0	0	0	0
Government perceives family medicine as essential to the health care system.	0	0	0	0	0	0

## **Problem Solving and Learning**

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	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I sometimes feel overwhelmed when dealing with patients who present with complex or ambiguous health issues.	0	0	0	0	0
I can identify my own learning needs.	0	0	0	0	0
In spite of my best intentions, I rarely find the time to do the learning I need to stay up-to-date.	0	0	0	0	0
I know how to evaluate the accuracy and relevance of information before using it to inform my patients' care.	0	0	0	0	0
I can problem solve effectively when faced with complex or ambiguous patient presentations.	0	0	0	0	0

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

### **Practice Exposure and Intentions**

#### **Important Terms**

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Family Physicians with focused practices: family doctors with a commitment to one or more specific clinical areas as major part-time or full-time components of their practices.

# **15.** After completing your residency, how likely are you to practice in the following organizational models?

	Very Unlikely	Somewhat Unlikely	Neutral	Somewhat Likely	Highly Likely	Don't Know
Solo practice	0	0	0	0	0	0
Group physician practice	0	0	0	0	0	0
Interprofessional team- based practice	0	0	0	0	0	0
Practice that includes teaching health profession learners	0	0	0	0	0	0

## **16.** After completing your residency, how likely are you to practice in the following family medicine practice types?

	Very Unlikely	Somewhat Unlikely	Neutral	Somewhat Likely	Highly Likely	Don't Know
Comprehensive care delivered in one clinical setting. (e.g., office –based)	0	0	0	0	0	0
Comprehensive care provided across multiple clinical settings (in-hospital, long-term care, office).	0	0	0	0	0	0
Comprehensive care that includes a special interest (such as sports medicine, emergency medicine, palliative care, etc.)	0	0	0	0	0	0
I plan to focus only on specific clinical areas (such as sports medicine, maternity care, emergency medicine, palliative care, hospital medicine etc.)	0	0	0	0	0	0
OTHER (please specify)	1	1	1	1	1	I

## **17.** In your first three years of practice, do you intend to commit to providing comprehensive care to the same group of patients?

Very Unlikely	Somewhat Unlikely	Neutral	Somewhat Likely	Highly Likely
0	0	0	0	0

#### 18. If very unlikely or somewhat unlikely, what is your primary reason? (check one only)

0	I may eventually practice that way, but not at the start
0	I'm not interested in that type of practice
0	I plan to focus my practice in a specific area
0	I intend to do locum practice(s)
0	I'd like to, but there are obstacles preventing me

#### **19.** To what extent do you agree or disagree with the following statement:

I am confident in my current ability to provide comprehensive care to the same group of patients over time.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
0	0	0	0	0

## **20.** How much exposure have you had to the following domains, practice settings, and specific populations in your medical education to date?

\*Note: This is not an exhaustive list of everything you may do in your practice but rather a selected set of domains of interest to the CFPC.

	No	Minimal	Adequate	More than	Too much
	Exposure	Exposure	exposure	adequate exposure	exposure
Care across the life cycle	0	0	0	0	0
Intrapartum care	0	0	0	0	0
Mental health care	0	0	0	0	0

	No Exposure	Minimal Exposure	Adequate exposure	More than adequate exposure	Too much exposure
Chronic disease management	0	0	0	0	0
Palliative Care/End of life	0	0	0	0	0
Office-based clinical procedures	0	0	0	0	0
In-hospital clinical procedures (e.g. chest tube insertion, adult lumbar puncture, nasogastric tube insertion)	0	0	0	0	0
Practice setting – Emergency departments	0	0	0	0	0
Practice setting – In-hospital	0	0	0	0	0
Practice setting – Care in the home	0	0	0	0	0
Practice setting – Long-term care facilities	0	0	0	0	0
Marginalized, disadvantaged and vulnerable populations	0	0	0	0	0
Rural populations	0	0	0	0	0
Elderly populations	0	0	0	0	0
Indigenous populations	0	0	0	0	0

## **21.** In your future practice as a family physician, how likely are you to provide care in each of the following domains, practice settings, and specific populations in the first 3 years?

	Very Unlikely	Somewhat Unlikely	Neutral	Somewhat Likely	Highly Likely
Care across the life cycle	0	0	0	0	0
Intrapartum care	0	0	0	0	0
Mental health care	0	0	0	0	0
Chronic disease management	0	0	0	0	0

	Very Unlikely	Somewhat Unlikely	Neutral	Somewhat Likely	Highly Likely
Palliative Care/End of life	0	0	0	0	0
Office-based clinical procedures	0	0	0	0	0
In-hospital clinical procedures (e.g. chest tube insertion, adult lumbar puncture, nasogastric tube insertion)	0	0	0	0	0
Practice setting – Emergency departments	0	0	0	0	0
Practice setting – In-hospital	0	0	0	0	0
Practice setting – Care in the home	0	0	0	0	0
Practice setting – Long-term care facilities	0	0	0	0	0
Marginalized, disadvantaged and vulnerable populations	0	0	0	0	0
Rural populations	0	0	0	0	0
Elderly populations	0	0	0	0	0
Indigenous populations	0	0	0	0	0

## **22.** To what extent do you agree or disagree with the following statement:

"I am confident to begin the practice of comprehensive family medicine in any community in Canada."

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
0	0	0	0	0

**23.** Please provide us with any comments you have on the survey. We welcome your feedback! Thank you.

On behalf of the CFPC, we wish to thank you for completing this survey. Your data will help us to evaluate the outcomes of family medicine residency education in Canada.