



Postgraduate Medical Education UNIVERSITY OF TORONTO



University of Toronto Resident Exit Survey 2011- 2012

May 2012

Methodology

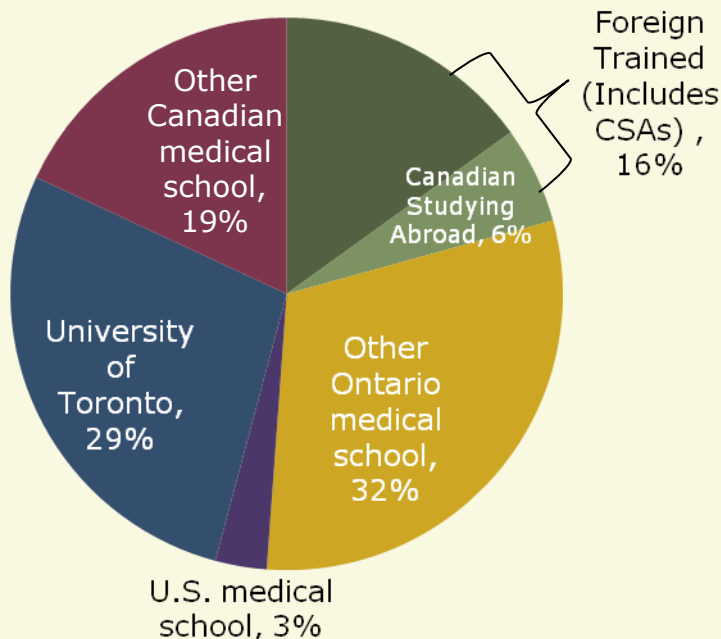
- On-line survey fielded from March 20 to April 9, 2012
- Exiting residents identified as those in final year of residency registered for a minimum of 2 years (CMGs, IMGs and Visas).
- Initial request plus 4 follow-up notices by email with incentive for completion.
- Focus on:
 - Quality of Education and readiness for practice
 - Resident Well-Being
 - Harassment/Intimidation
 - Job Concerns/Future Plans
 - **Call Schedules (new)**
 - **Use of Technology (new)**

Response Rates							
	05-06	06-07	07-08	08-09	09-10	10-11	11-12
# of Respondents	93	110	205	224	227	215	282
Total Sample	332	341	339	380	366	408	482
Response Rate	28%	32%	60%	59%	62%	53%	59%
Margin of Error with 95% Confidence Interval	9%	8%	4%	4%	4%	5%	4%

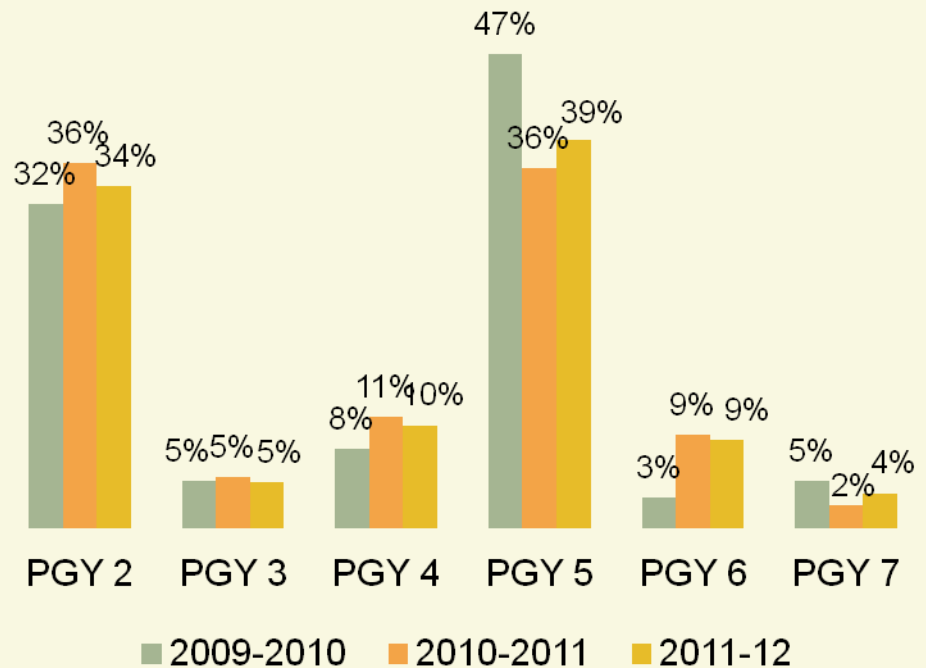
Demographics: General

- Average age: 32.3
- 97% are Canadian citizens, 1% permanent residents, and 2% Visa
- 64% are married or living with a partner
- 14% IMGs (excluding Visa)
- 6% had studied primarily in Canada before completing medical school abroad (Canadians Studying Abroad)

Medical Degree Location

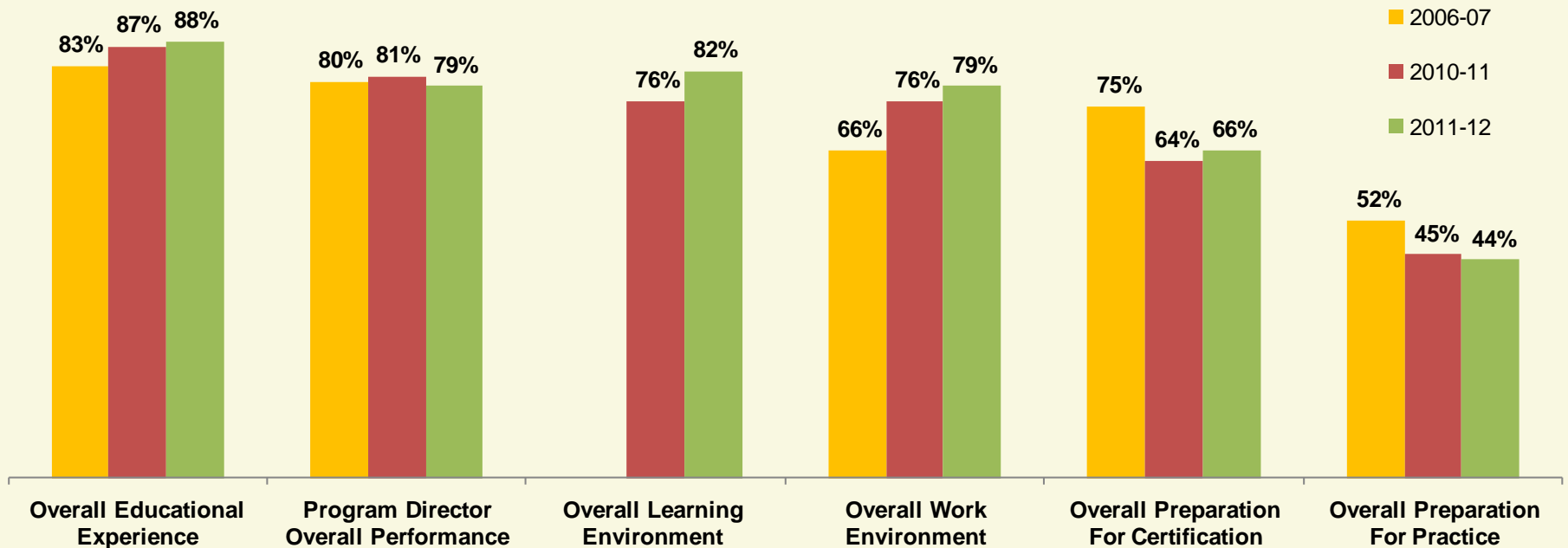


Training Level of Exit



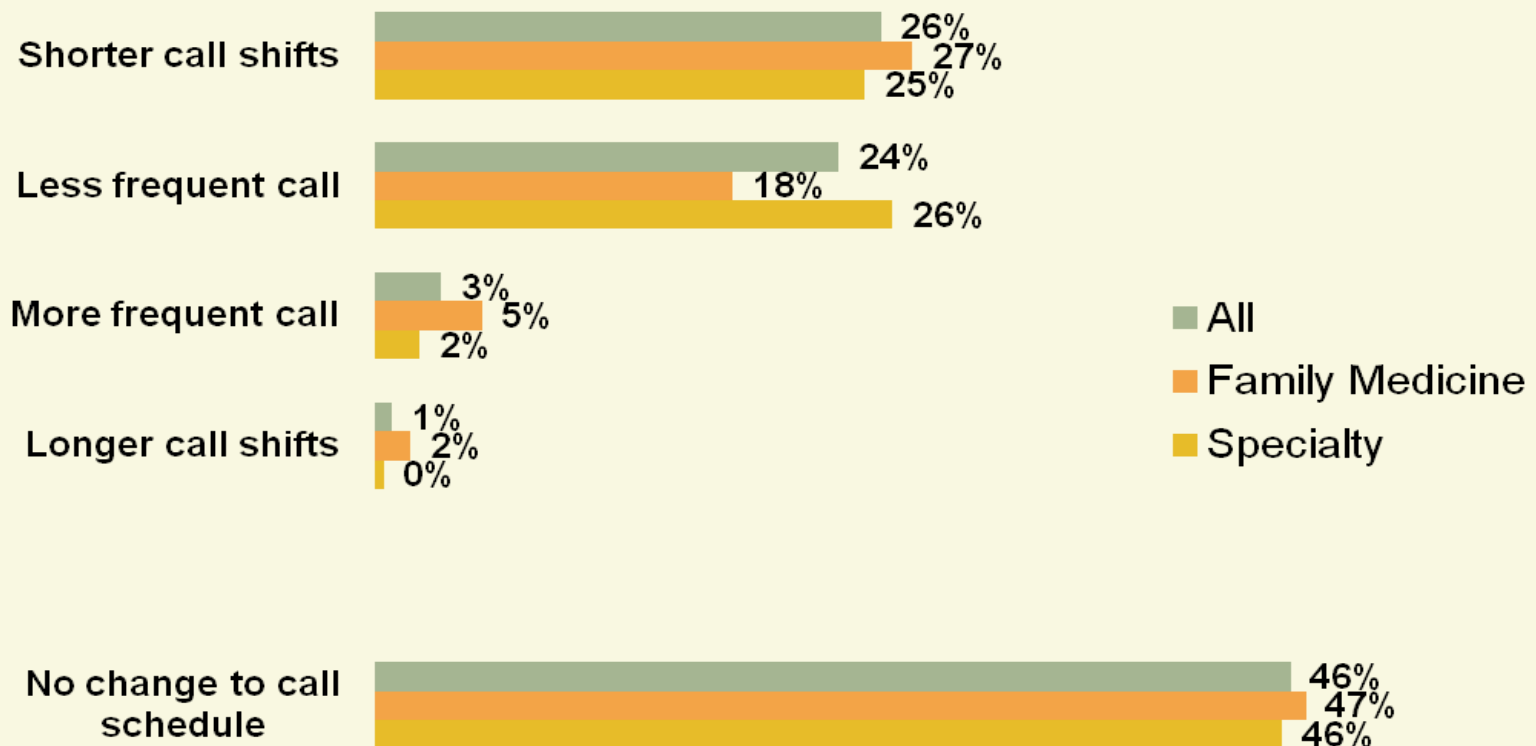
Quality of Education Ratings

Those that Rated their Residency Experience Positively
(4 and 5 out of 5) by Overall Question



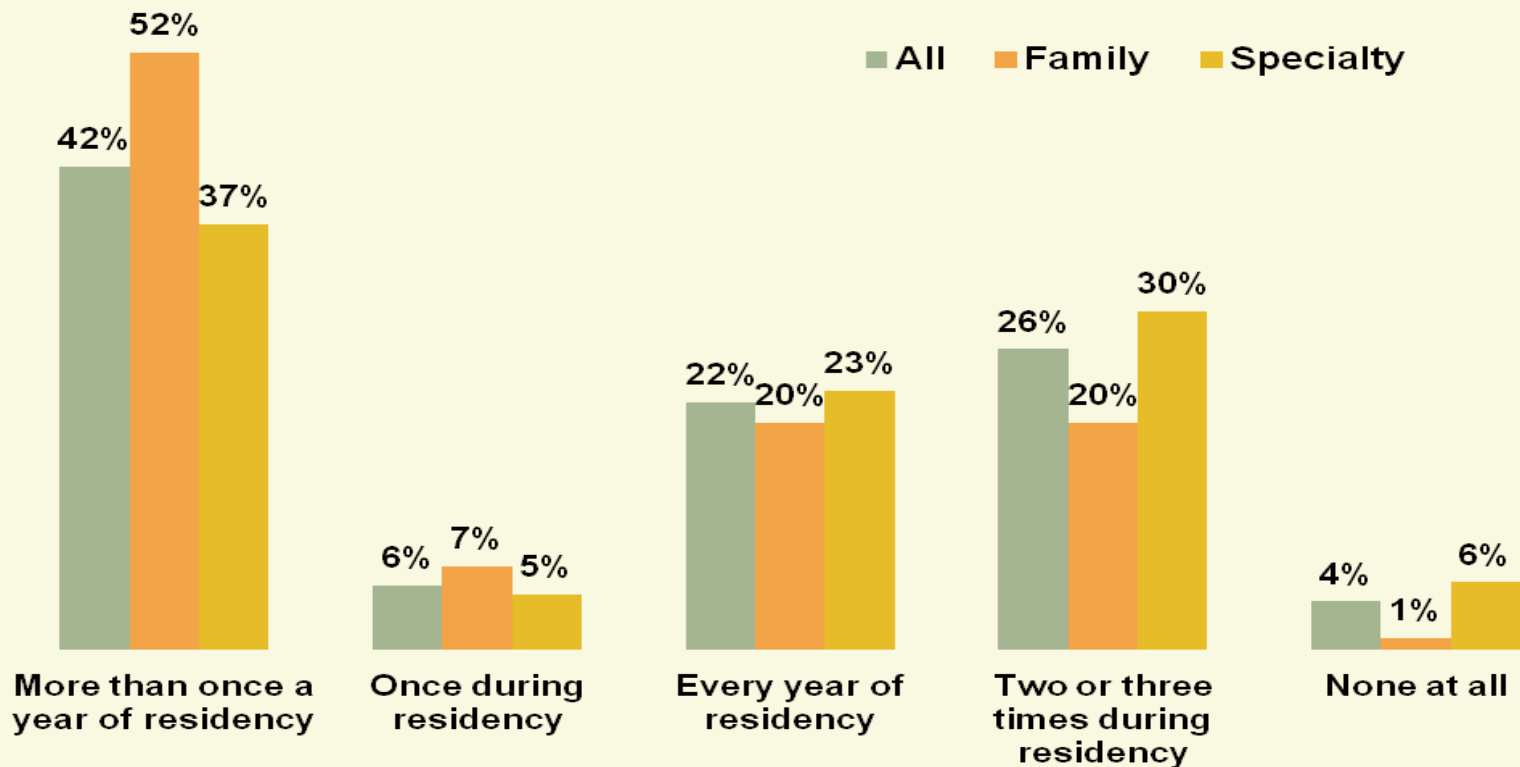
Call Schedules

- When asked to think about their work/life balance and their role as a student and worker during their residency, almost half of respondents say they would not have wanted any changes to their call schedules in terms of length of shifts and frequency of calls.
- There were no significant differences between Family Medicine and Specialty residents or males and females.

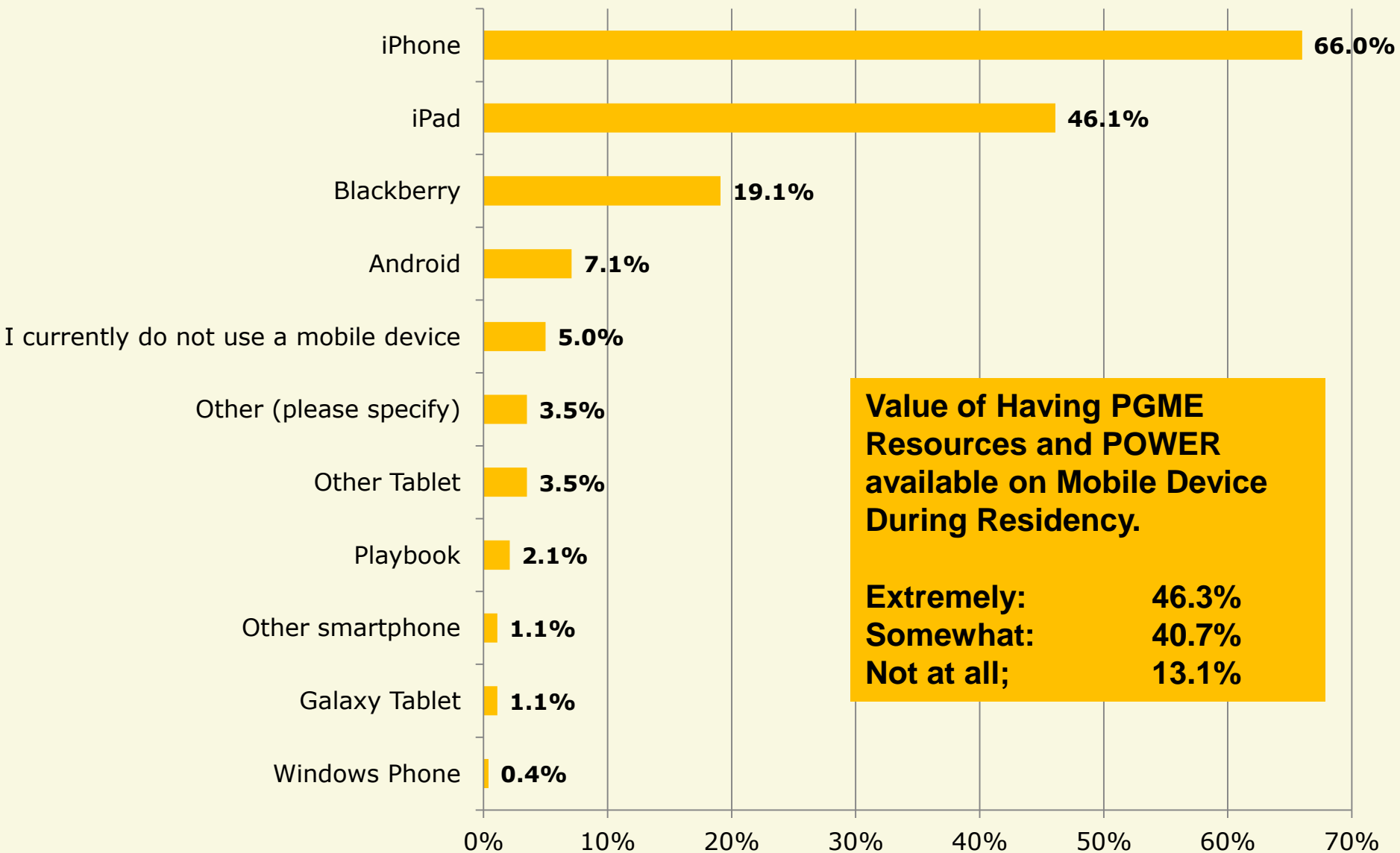


Interprofessional Education

- Interprofessional Education: "Occasions when 2 or more professions learn with, from and about each other to improve collaboration and quality of care".
- 42% of respondents say they were exposed to interprofessional education (IPE) more than once a year during their residency. Family Medicine residents (52%) were significantly more likely to be exposed frequently than Specialty residents (37%).



Mobile Devices Currently used



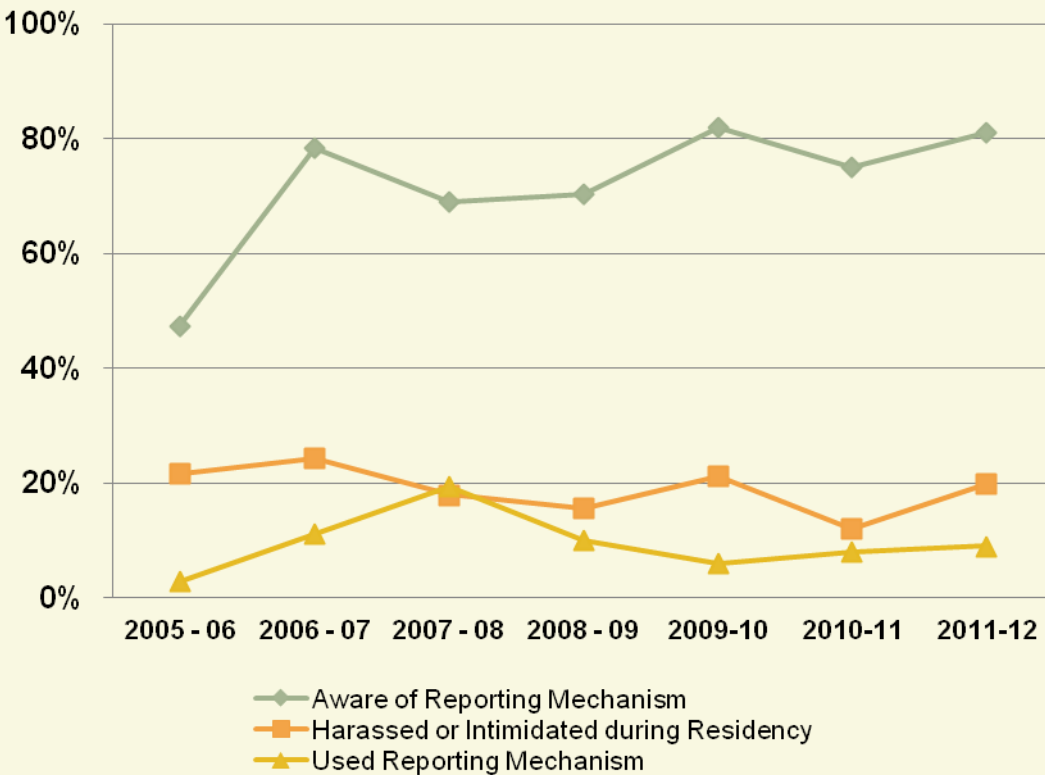
Value of Having PGME Resources and POWER available on Mobile Device During Residency.

Extremely:	46.3%
Somewhat:	40.7%
Not at all;	13.1%

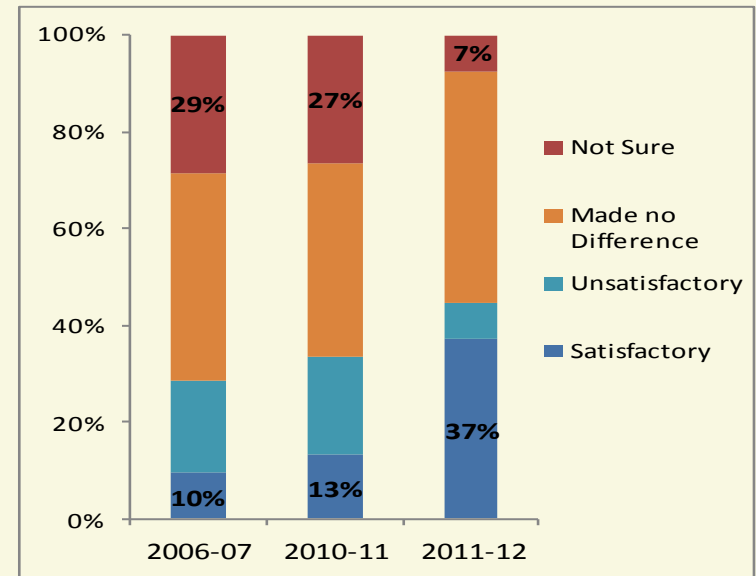
Intimidation and Harassment

- Over 7 years, awareness and use of U of T's official reporting mechanism has grown
- A larger proportion of respondents say they had satisfactory outcomes from reporting the intimidation or harassment and a small proportion "dissatisfied" or "not sure" about outcome of reporting.

Intimidation and Harassment - Awareness and Incidence Over 7 Years



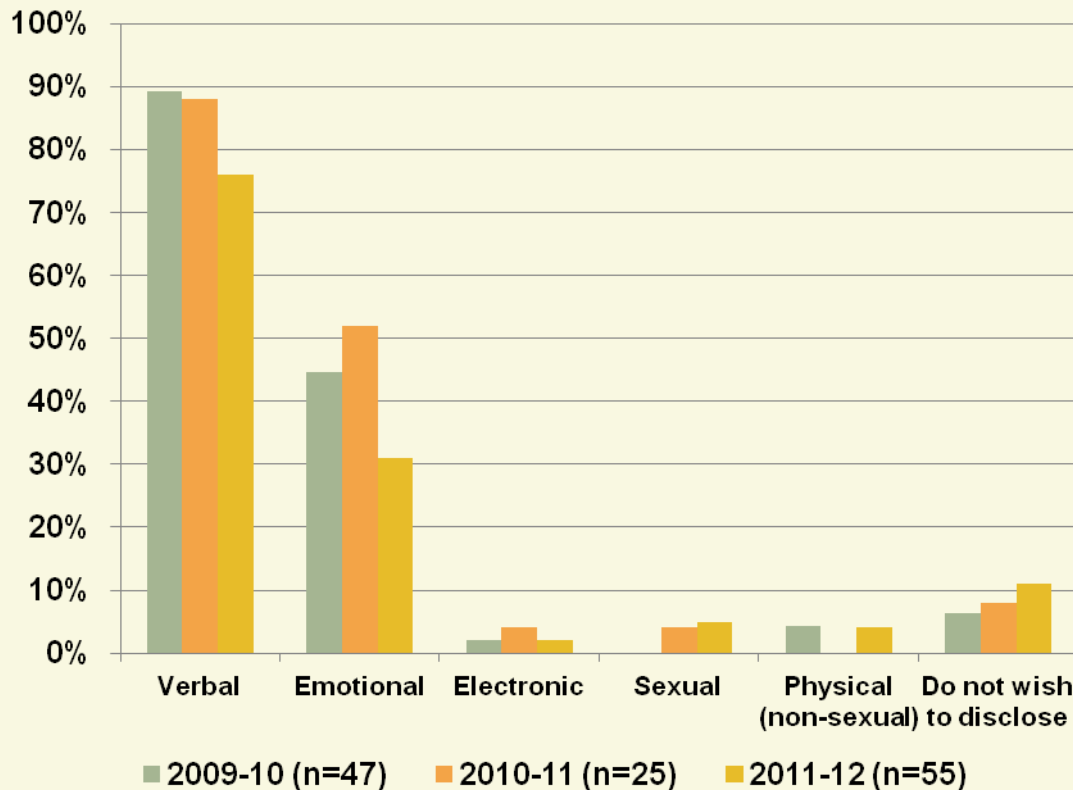
Outcome of Reporting Intimidation or Harassment



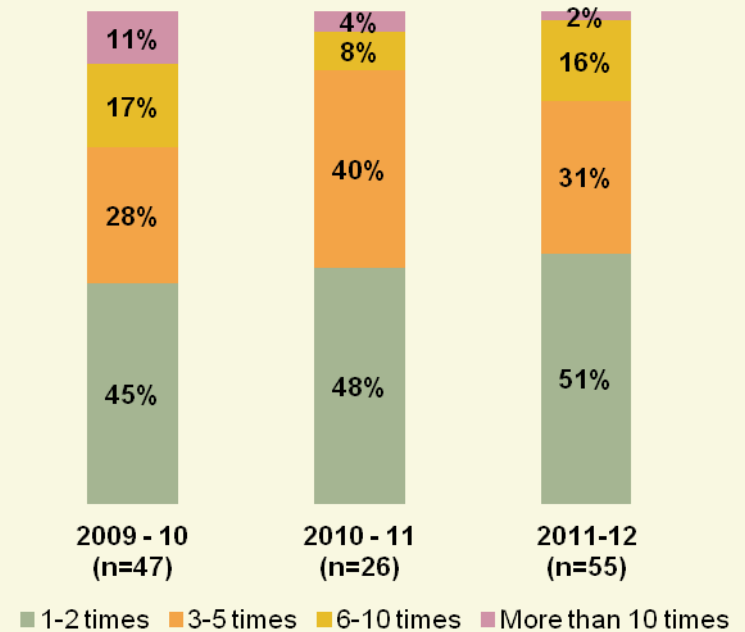
Intimidation and Harassment: Types and Outcomes

- Verbal and emotional harassment continue to be the most frequent forms of harassment
- The number of harassment incidents per trainee reported by individuals has been in on the decline.

Form of Intimidation or Harassment



Number of Harassment Incidents



Demographics: Those who say were harassed

- There is no significant difference between those who say were harassed and those who didn't in:
 - age (33% vs. 32%)
 - gender (Female=55% vs. Female=59%)
- However, those who say were harassed are significantly less likely to be a:
 - Canadian citizen (93% vs. 98%)
- And significantly more likely to:
 - have completed their medical degree outside of the U.S. and Canada (29% vs. 13%)
 - be IMGs (excluding Visa) (25% vs. 12%)

Ratings of Education: Significant Differences in Scores for those who say were harassed vs. those who did not

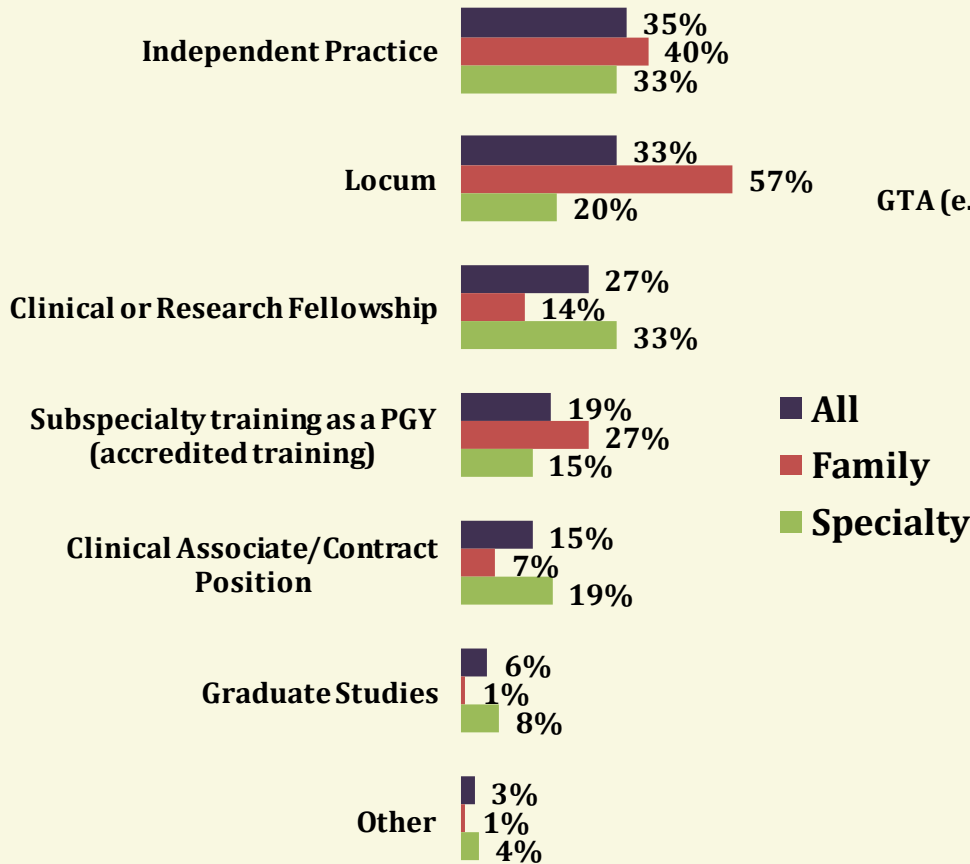
- Those who say were harassed rated various elements of their education significantly lower than those who did not.
- Those who say were harassed rated 'Availability of procedures' significantly higher than those who did not.

Rated 4 or 5 on 5-point scale

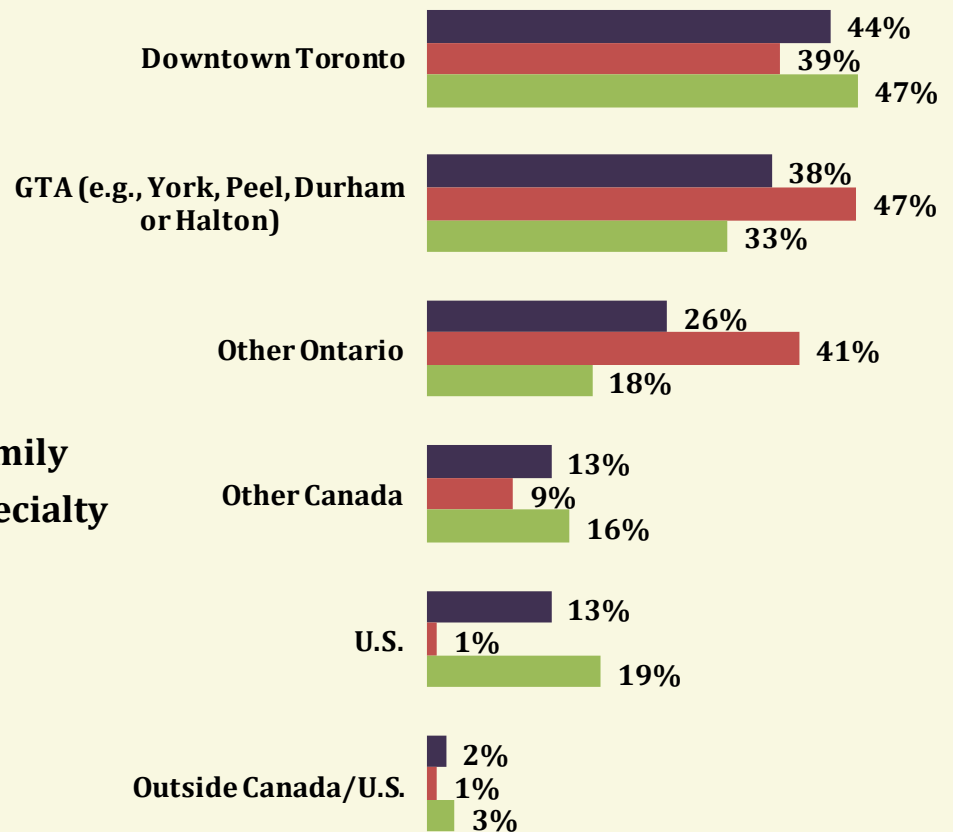
Category	Question	Yes (n=56)	No (n=226)
EDUCATION EXPERIENCE	Amount of protected educational time	61%	76%
	Amount of service work	54%	79%
	Availability of procedures	75%	55%
	Quality of teaching	77%	89%
WORK ENVIRONMENT	Educational clinical workload	70%	85%
	Amount of "scut" service work	38%	64%
PREPARING FOR PRACTICE	Assistance in finding employment	21%	37%
	Communication Skills	61%	72%
	Information on Continuing Medical Education	30%	53%
	Practice management seminar	32%	48%
	Managing challenges to your wellbeing throughout your career	30%	47%
PREPARING FOR CERTIFICATION	OVERALL PREPARATION FOR CERTIFICATION	54%	69%
PROGRAM DIRECTOR	Advocate for program	71%	84%
	Effectiveness of program leadership	68%	81%

Future Plans – Post-Residency (Excluding Visa Trainees)

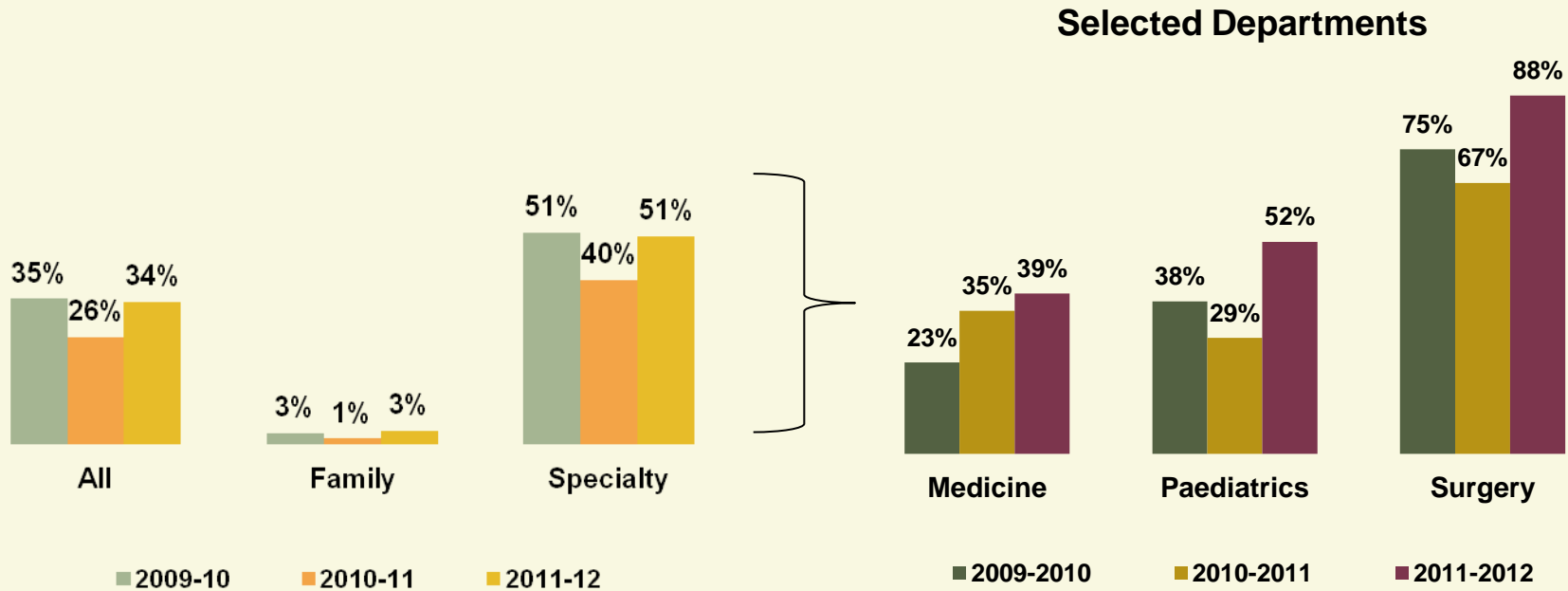
Post-Residency Plans



Post-Residency Location



Future Plans – Concerns about securing a position in chosen specialty



- Overall concern about securing a position in their chosen specialty is up to 2009-10 level (34%). Half of exiting specialty residents say they are concerned.
- The majority of surgery residents expressed concern (88%).

Questions?