



### University of Toronto Resident Exit Survey 2010 - 2011

October 2011



### Methodology

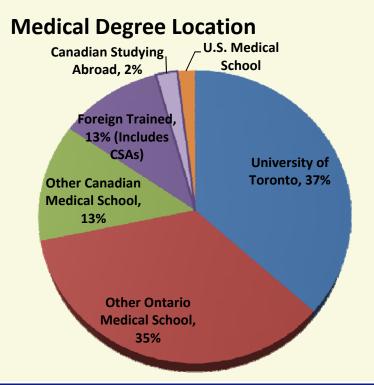
- On-line survey fielded from April 2011 to June 2011
- Exiting residents identified as those in final year of residency registered for a minimum of 2 years (CMGs, IMGs and Visas).
- Initial request plus 3 follow-up notices by email with incentive for completion.
- Focus on:
  - Quality of Education and readiness for practice
  - Resident Well-Being
  - Harassment/Intimidation
  - Job Concerns/Future Plans

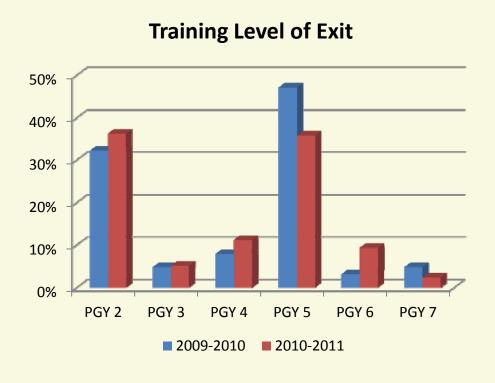
Response Rates						
	2006-07	2007-08	2008-09	2009-10	2010-11	
# of Respondents	110	205	224	227	215	
Total Sample	341	339	380	366	408	
Response Rate	32%	60%	59%	62%	53%	
Margin of Error with 95% Confidence Interval	8%	4%	4%	4%	5%	



### **Demographics: General**

- Average age: 32.7
- 94% are Canadian citizens, 4% permanent residents, and 2% Visa
- 60% are married or living with a partner
- 12% IMGs (excluding Visa)
- 2% had studied primarily in Canada before medical school (Canadians Studying Abroad)





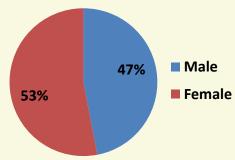


### **Demographics: Diversity**

- About half of exiting residents were born in Ontario, and about half ethnically identify as white
- A strong majority (79%) hail from urban environments

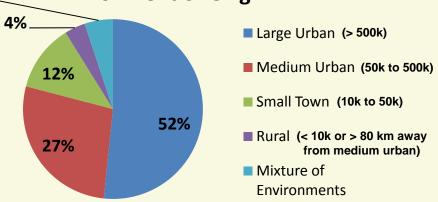
Birthplace	%
Ontario	53%
British Columbia	5%
Manitoba	3%
Alberta	3%
Hong Kong	3%
Quebec	2%
Iran	2%
China	2%
India	2%
Other	25%





Ethnicity*	2009-10	2010-11	
White	47%	44%	
South Asian	17%	20%	
Chinese	14%	17%	*Categories taken
Arab	6%	6%	from Statistics
Korean	2%	3%	Canada Ethnic
West Asian	1%	2%	Diversity Survey
Southeast Asian	2%	2%	(EDS)
Other	11%	7%	



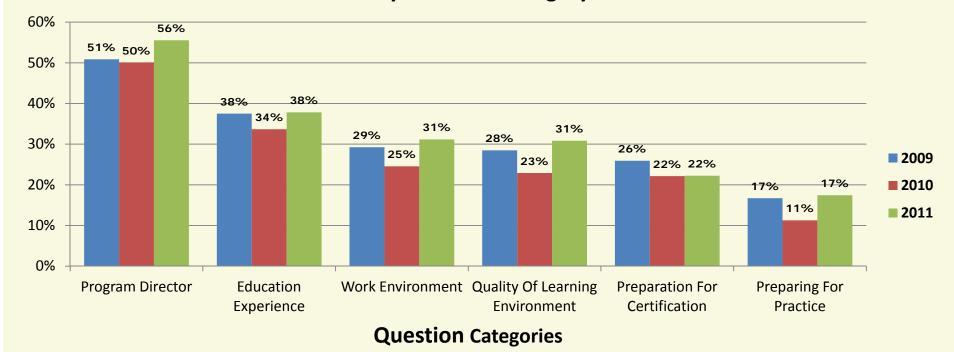




# **Quality of Education: Satisfaction Rating Summary**

- Residents provide ratings of their education experience over several questions that cover key themes: Program Director, Work Environment, Preparation for Practice etc.
- Ratings for this year rose slightly across the board, after a dip in 2009-10. The exception was preparation for certification, which remained the same.

### Average % that Rated their Residency Experience 'Excellent' (5 out of 5) by Question Category





## Overall Ratings of Education: Family Medicine vs. Specialty, CMG vs. NON-IMG, Male vs. Female

- Highest scores for Overall Educational Experience and Program Director
- Specialty residents rate Program Director, work environment, learning environment, and preparation for practice lower than FM residents.
- Family Medicine residents rate preparation for certification higher than last year
- Preparation for practice continues to be a troublesome area when compared to other ratings
- Females rate learning environment higher than males no major differences between IMGs and CMGs

#### Rated 4 or 5 on 5-point scale

2009-10 2010-11					NON-			
Summary Question	Overall	Overall	Family	Specialty	CMG	CMG	Males	Females
Overall Educational Experience	87%	87%	89%	86%	88%	83%	86%	88%
Program Director Overall Performance	80%	81%	90%	76%	81%	79%	80%	82%
Overall Learning Environment	77%	76%	88%	70%	77%	69%	71%	81%
Overall Work Environment	73%	76%	84%	71%	77%	69%	73%	78%
Overall Preparation For Certification	66%	64%	66%	63%	66%	55%	65%	63%
Overall Preparation For Practice	40%	45%	58%	37%	44%	52%	44%	46%



### Family vs. Specialty Ratings of Education: **Significant Differences in Scores**

Family Medicine residents gave higher ratings for concrete measures of schedules and facilities, and the support they received

Specialty residents tended to rate adequacy of procedures and certification concerns more Rated 4 or 5 on 5-point scale

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Category	Question	Overall (215)	Family (n=77)	Specialty (n=138)
Category				
EDUCATION EXPERIENCE	Amount of service work	74%	86% ▲	67%
	Availability of procedures	61%	51%	67% ▲
	Adequacy of call facilities	61%	70% ▲	56%
WORK ENVIRONMENT	Amount of "'scut" service work	64%	75% ▲	57%
WORK ENVIRONMENT	Quality of dedicated room/lounge for residents	56%	70% ▲	48%
	Your call schedule	73%	84% ▲	66%
	Face to face time with teachers/supervisors/senior residents	82%	88% ▲	78%
	Interactions with mentors	73%	90% ▲	62%
LEARNING ENVIRONMENT	Personal support for stress/difficulties	61%	78% ▲	51%
	Supportive environment	77%	93% ▲	67%
	Your ability to balance residency and life commitments	67%	78% ▲	61%
	Assistance in finding employment	34%	50% ▲	25%
	Communication Skills	68%	79% ▲	62%
	Information on Continuing Medical Education	50%	64% ▲	42%
PREPARING FOR PRACTICE	Maintain your wellness throughout your career	52%	66% ▲	43%
	Practice management seminar	49%	66% ▲	39%
	Resource utilization	56%	66% ▲	50%
	Support for preparation for obtaining IP license	33%	56% ▲	19%
PREPARING FOR	Practice written exam	58%	46%	65% ▲
CERTIFICATION	Study groups	49%	34%	59% ▲
DDOCDAM DIDECTOR	Advocate for residents	81%	90% ▲	76%
PROGRAM DIRECTOR	Counselling/Guidance	74%	83% ▲	69%

Indicates a significant statistical difference according to a chi-square test of independence



## Family vs. Specialty Ratings of Education: Significant Differences in LOW Scores

- Specialty residents gave more frequent low scores on all dimensions except availability of procedures and practice exams
- Specialty residents focused their low ratings in the preparation for practice category, in which 38% rated assistance in finding employment and support for preparation for obtaining an independent practice license with a 1 or 2

#### Rated 1 or 2 on 5-point scale

0-1	O	Overall	Family	Specialty
Category	Question	(215)	(n=77)	(n=138)
PROGRAM DIRECTOR	Advocate for residents	8%	1%	12%▲
FROGRAW DIRECTOR	Counselling/Guidance	7%	1%	11%▲
EDUCATION EXPERIENCE	Availability of procedures	11%	18%▲	7%
PREPARING FOR CERTIFICATION	Practice oral/clinical exam	5%	9% ▲	2%
	Assistance in finding employment	30%	16%	38%▲
	Career guidance	21%	9%	28% ▲
PREPARING FOR PRACTICE	Information on Continuing Medical Education	16%	9%	20%▲
	Maintain your wellness throughout your career	13%	5%	17%▲
	Practice management seminar	17%	5%	23%▲
	Support for preparation for obtaining IP license	28%	12%	38%▲
LEARNING ENVIRONMENT	Interactions with mentors	6%	0%	9%▲



### How could your residency program and your residency experience be improved?

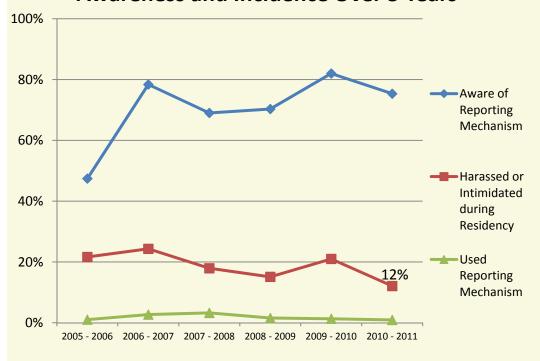
- Formal evaluations with a discussion of goals and objectives at the beginning of rotations
- Help with career planning
- More career mentoring/Planning
- Programs becoming too large and geographically diverse consider an academy system as per UGME
- More exposure to community settings
- Increase opportunities for practical exams/OSCEs
- Increase exposure to practice issues
- More formal teaching
- Increase opportunities for involvement of seniors in assessment of juniors



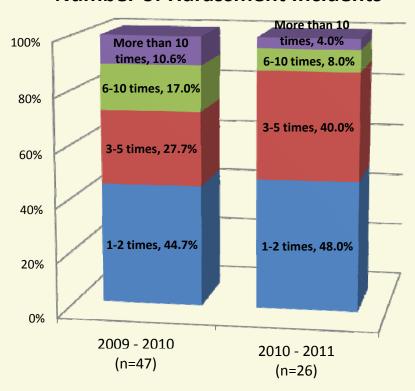
### **Intimidation & Harassment**

- Over 6 years, awareness and use of U of T's official reporting mechanism has grown, while incidence of harassment as reported in the survey has fallen
- 12% of those who were harassed reported that there were more than 5 incidents, which is down from 28% last year. That reduction shows in the 3 or more times category, which grew from 27% to 40%

### Intimidation and Harassment Awareness and Incidence Over 5 Years



#### **Number of Harassment Incidents**

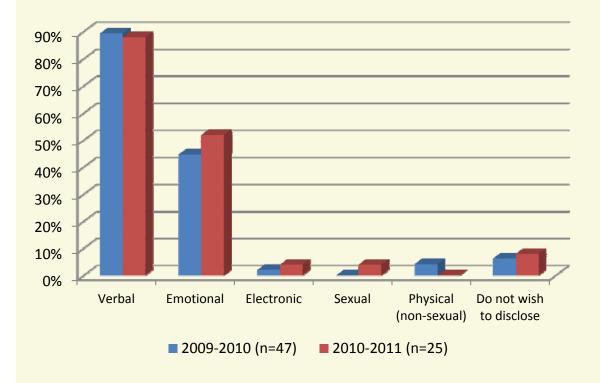




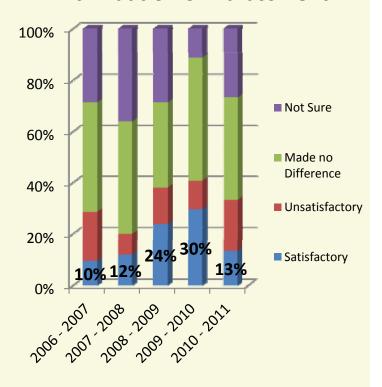
# **Intimidation and Harassment: Types and Outcomes**

- Most frequently verbal or emotional
- Despite a decrease in intimidated and harassed residents, respondents reported smaller percentages of satisfactory outcomes and larger percentages of unsatisfactory outcomes.

### Form of Intimidation or Harassment 2009-2010 and 2010-2011



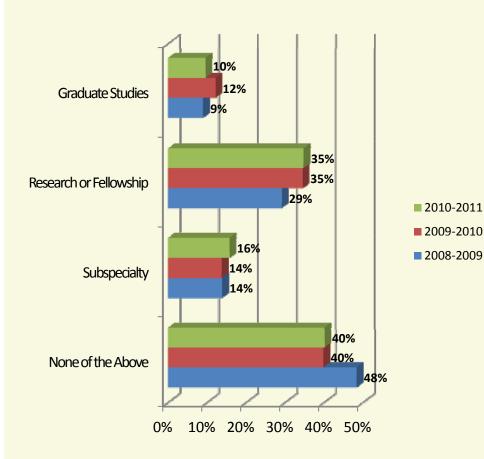
### Outcome of Reporting Intimidation or Harassment



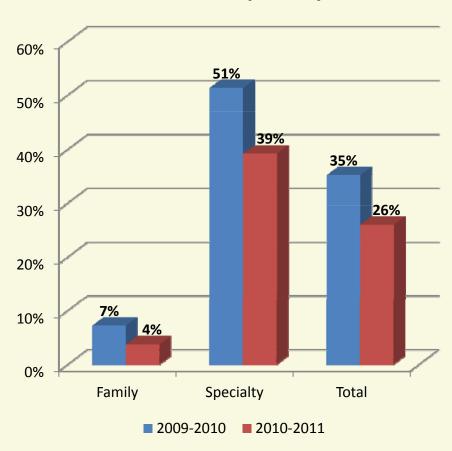


### **Future Plans**





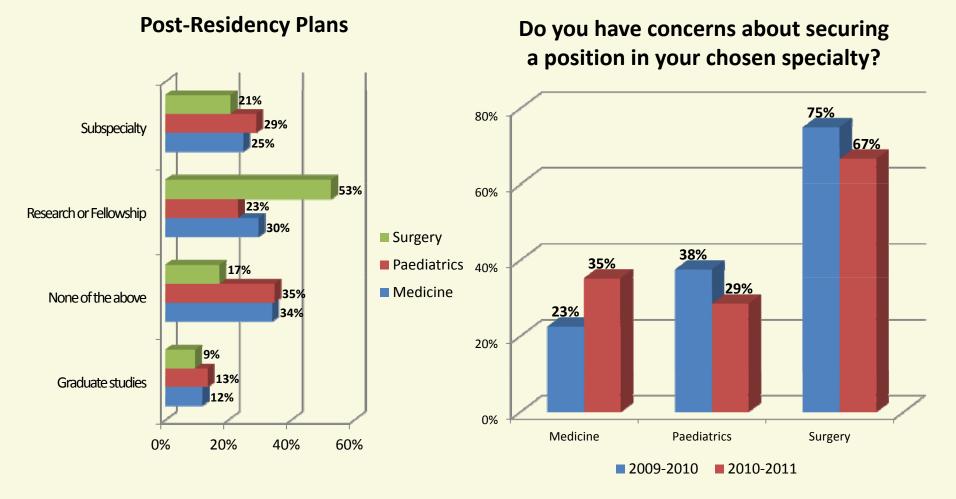
### Concerns about securing a position in chosen specialty



More than half are aware of HFO Marketing and Recruitment agency (53%) and 58% plan on using their services



### **Future Plans – Selected Departments**



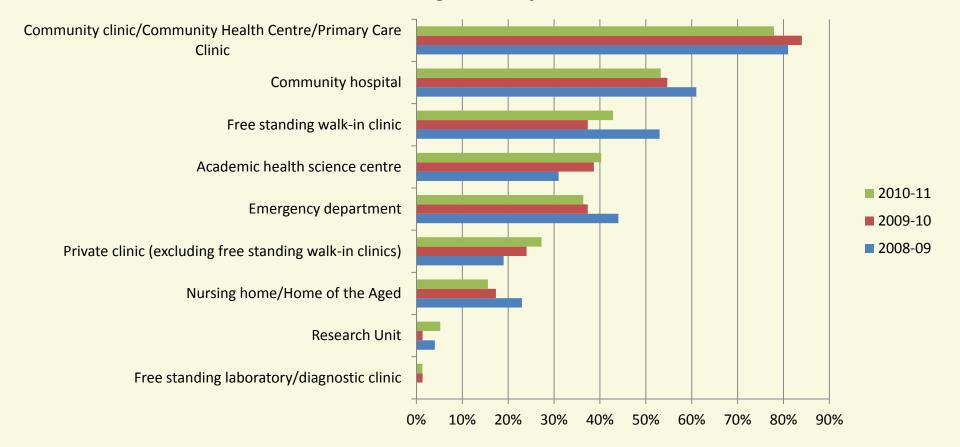
Medicine residents show increasing concern over securing a position, whereas fewer residents in pediatrics and surgery have similar concerns



# Future Work Settings – Family Medicine Responses Over 3 Years

- Future practice settings for Family Medicine residents have stabilized
- Community care clinics (Family Health Teams) and community hospitals continue to top this list year-over-year

#### **Intended Work Settings - Family Medicine Residents**

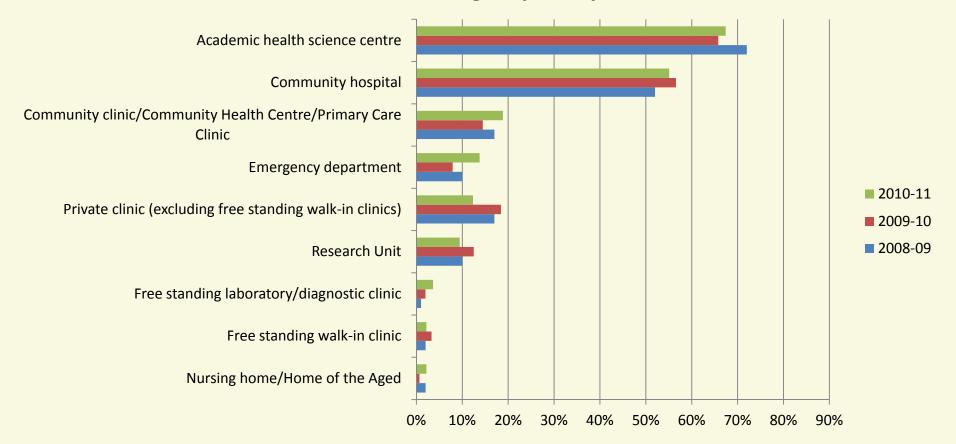




## Future Work Settings – Specialty Responses Over 3 Years

Majority of exiting specialty residents (68%) intend to remain in AHSC although 55% also plan to practice in a community hospital.

#### **Intended Work Settings - Specialty Residents**





# If you were Program Director, what changes, if any, would you implement?

- Common Point "More individual help with career guidance and a network of available job opportunities."
- "Additional support for certification preparation and practice management logistics"
- "Establish clear guides as to role of resident and role of the fellow. There was a lot of emphasis and teaching fellows and getting them jobs but minimal teaching of residents was observed and no help getting jobs."
- "None, my program director is excellent in all respects."
- "Our program director requires, and deserves, full time administrative support. "
- "Formalize method of feedback related to the program among different teaching sites - i.e. if residents are upset/concerned about something at their hospital, a pre-existing method of bringing forward suggestions/concerns would welcome more feedback and prevent residents from feeling that they are "out of line" by speaking up at their particular site."



### Questions?