

FRAME RCS Survey 2015

Q1. Your Student University ID

Q2. What is your gender? Male Female

Q3. Date of Birth (dd/mm/yyyy) / /

Q4. Medical School: *(Please select one response only)*

- | | |
|---|---|
| Australian National University | University of Newcastle |
| Bond University | University of New England |
| Deakin University | University of New South Wales |
| Flinders University (Flinders University Rural Clinical School) | University of Notre Dame (Freemantle) |
| Flinders University (NT Rural Clinical School) | University of Notre Dame (Sydney) |
| Griffith University | University of Queensland |
| James Cook University | University of Sydney |
| Monash University (undergraduate) | University of Tasmania |
| Monash University (Graduate) | University of Western Australia (Undergraduate) |
| University of Adelaide | University of Western Australia (Graduate) |
| University of Melbourne (Undergraduate) | University of Western Sydney |
| University of Melbourne (Graduate) | University of Wollongong |

Q5. Please indicate your placement type in medical school *(please select one response only)*

- Commonwealth Supported (HECS) Place
- Medical Rural Bonded Scholarships (MRBS)
- Bonded Medical Place (BMP)
- Commonwealth Bonded Place
- State Bonded Place
- International Fee-paying Place
- Australian Fee-paying Place

Q6. Please indicate any scholarships you hold

- | | |
|------------------------------------|---|
| Commonwealth Department of Defence | Australian Rotary Rural Clinical School scholarship |
| RAMUS | Indigenous student scholarship |
| John Flynn | Other |

Q7. Do you consider yourself to come from a rural background? No Yes

Q8a. Please indicate the type of location, within Australia; you have lived in the longest:

- Capital city
- Major urban centre (>100,000)
- Regional city/large town (25,000-100,000)
- Smaller town (10,000-24,999)
- Small rural community (<10,000)
- Remote centre/area

Q8b. What is the postcode of this location:

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Q9a. Did you attend a secondary/high school in Australia outside of a capital city or major urban centre?

(e.g. Gosford-Wyong, Newcastle, Wollongong, Queanbeyan, Blue Mountains, Geelong, Gold Coast-Tweed Heads, and Townsville-Thuringowa)

No Yes

Q9b. If yes, please indicate the number of years you attended this secondary/high school:

(Please round to nearest full year)

Q9c. What is the postcode of this location:

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Q10. In terms of ranking, my preference to attend a RCS was:

My last choice Low on my list My mid-choice High on my list My first choice

In the following section we are interested in your plans for future medical practice

Q11. In which geographical location within Australia would you most like to practise on completing your training? Please rank 1 (most preferred) to 5 (least preferred):

Capital or Major City	
Inner regional city or large town in Australia (25,000 - 100,000)	
Smaller town in Australia - outer regional (10,000 - 24,999)	
Small rural or remote community in Australia (<10,000)	
Very remote centre/area	

Q12. Recalling your career preferences upon entry to your RCS, please rank 1 (most preferred)

General Practice (FRACGP) or Rural Medicine (FACRRM)	
Generalist Specialist:	
Sub-specialist/ other.	

Q13. Rank your *current career preference* now upon exit from your RCS (using the same method as in Question 12 above):

General Practice or Rural Medicine	
Generalist Specialist:	
Sub-specialist/ other.	

Q14a. My RCS experience has increased my interest in pursuing a career in:

	Strongly disagree	Somewhat disagree	Neutral	Somewhat agree	Strongly agree
general practice					
a medical career in regional or rural Australia (RA2-3)					
a medical career in remote and very remote Australia (RA4-5)					

Q14b. I intend to the following years of training based in a non-metropolitan area (RA2-5)

	Strongly disagree	Somewhat disagree	Neutral or I don't know	Somewhat agree	Strongly agree
Internship					
Accredited PGY2 in specialty of preference					
Accredited PGY3 in specialty of preference					
Accredited PGY4 in specialty of preference					
Accredited PGY5 in specialty of preference					

In the following section we are interested in feedback on your experience at a Rural Clinical School / or your rural rotations

Q15a. Did you participate in a longitudinal integrated clerkship experience where your learning was in multiple disciplines in the same week (rather than in "single specialty" blocks such a paediatrics OR general practice)?

No Yes

Q15b. What was the longest time in weeks you were based in the same primary care clinical attachment that promoted continuity of community and supervision?

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Q16. I would recommend the RCS experience to other medical students

Strongly disagree Somewhat disagree Neutral Somewhat agree Strongly agree

Q17. Please rate your agreement with the following statements

	Strongly disagree	Somewhat Disagree	Neutral	Somewhat agree	Strongly agree
a. I felt well supported academically by my RCS					
b. I felt well supported financially by my RCS					
c. I felt academically isolated during my rural					
d. My RCS informed me of health and counselling services that I could access for support if needed					
e. Overall I felt well supported by my RCS					
f. Overall, my RCS placement impacted positively on my wellbeing					
g. I felt socially isolated during my RCS placement					
h. I have a rural-based clinicians as a mentor					
i. I have a metropolitan-based clinician as a mentor					

Q18. Please rate your agreement with the following statements regarding your clinical supervisors

	Strongly disagree	Somewhat Disagree	Neutral	Somewhat agree	Strongly agree
a. Gave adequate help and advice					
b. Were approachable					
c. Were enthusiastic					
d. Assisted me in identifying my learning needs					
e. Treated me with respect					
f. Facilitated a learning environment					
g. Gave me sufficient autonomy in clinical setting					
h. Gave constructive feedback					
i. Were excellent role models					
j. Provided me with access to people with a wide range of health problems					
k. Provided me with appropriate clinical responsibilities					
l. Provided opportunities to follow patients through the course of their illness					
m. Facilitated the development of my decision-making about patient management					
n. Provided appropriate supervision of my clinical decisions					
o. Overall my clinical school provided an excellent clinical education					

Q19a. During my rural placement I was provided with learning experiences that promoted cultural understanding/ that promoted an understanding of cultural issues in rural medicine:
 Never Rarely Sometimes Often Frequently

Q19b. I think that the medical curriculum at my RCS promotes an understanding of, and commitment to improving, the health status of Aboriginal and Torres Strait Islander people:
 Strongly disagree Somewhat disagree Neutral Somewhat agree Strongly agree

In this section we are interested in your opinions on these specific areas of interest

Q20. Please respond to the following statements concerning rural practice

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
a. Rural practice is too hard					
b. I have necessary skills to practise in a rural setting					
c. I get a sinking (anxious) feeling when I think of working in rural setting					
d. I have a strong positive feeling when I think of working in a rural setting					
e. People tell me I should work in a rural setting.					
f. I see people like me taking up rural clinical practise					

Q21. Please indicate your level of agreement to the following questions

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
a. I am confident taking a purposeful history					
b. I am confident completing a focused physical examination					
c. I am confident writing a meaningful file entry					
d. I am confident completing venous cannulation					
e. I can accurately summarise the patient's presentation					
f. I can behave like a doctor					
g. I can apply ethical principles to the situations I face					
h. I am confident to interpret an ECG					

Q22. Please indicate your level of agreement to the following questions

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
a. I adhere to policies and procedures that ensure client safety and quality.					
b. I effectively communicate my own professional perspective on client safety and quality					
c. I can identify major factors that impact on the safety and quality of service/care for clients.					
d. I can explore the point of view of other professions in the provision of services/care					
e. I critically reflect on service/care outcomes, policies and procedures					
f. I contribute to the evaluation of client safety and quality outcomes in university and fieldwork settings.					
g. I can describe my roles and responsibilities clearly to patients, and other professionals					
h. I am confident in my knowledge of the role of other professions.					
i. I participate in the exchange of professional knowledge and collaborative decision making to plan and implement service/care plans.					
j. I reflect on the benefits of sharing professional knowledge to own professional development and to client safety and quality.					
k. I am confident to initiate the exchange of professional knowledge and shared decision making to improve service/care delivery.					
l. I understand how to work in partnership with the client and other team members to plan and implement service/care plans.					
m. I communicate with other team members in a manner that promotes positive interactions.					
n. I reflect on my contribution to teamwork experiences.					
o. I can describe common situations where conflict may arise in inter professional teams.					
p. I participate actively in the resolution of conflicts that arise with support.					

Q23. Please respond to the following questions regarding your rural placement:

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
a. During my placement I received formal tuition regarding career options for rural medical practice					
b. During my placement I received informal information regarding career options for rural medical practice					
c. During my placement I had the opportunity to work with junior doctors undertaking training for rural practice					

Q24a. Were you a member of your University's student rural health club during the preclinical years of the course?

 No **Yes**

If Yes please indicate your agreement to the following questions

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
a. My rural health club activities helped me to have positive and realistic expectations of a rural placement					
b. My rural health club activities increased my intention of practicing in a rural area compared to my intention when entering medical school					

Q25. The statements below refer to beliefs that people might have concerning doctors, patients, and medical care. Please indicate how much you agree or disagree with each statement.

	Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree
a. The doctor is the one who should decide what gets talked about during a visit.						
b. Although health care is less personal these days, this is a small price to pay for medical advances.						
c. The most important part of the standard medical visit is the physical exam.						
d. It is often best for patients if they do not have a full explanation of their medical condition.						
e. Patients should rely on their doctors' knowledge and not try to find out about their conditions on their own.						
f. When doctors ask a lot of questions about a patient's background, they are prying too much into personal matters.						
g. If doctors are truly good at diagnosis and treatment, the way they relate to patients is not that important.						
h. Many patients continue asking questions even though they are not learning anything new.						
i. Patients should be treated as if they were partners with the doctor, equal in power and status.						
j. Patients generally want reassurance rather than information about their health.						
k. If a doctor's primary tools are being open and warm, the doctor will not have a lot of success.						
l. When patients disagree with their doctor, this is a sign that the doctor does not have the patient's respect and trust.						
m. A treatment plan cannot succeed if it is in conflict with a patient's lifestyle or values.						
n. Most patients want to get in and out of the doctor's office as quickly as possible.						
o. The patient must always be aware that the doctor is in charge						
p. It is not that important to know a patient's culture and background in order to treat the person's illness.						
q. Humour is a major ingredient in the doctor's treatment of the patient.						
r. When patients look up medical information on their own, this usually confuses more than it helps						

Q26 Below is a list of eight tasks or goals that physicians often have in treating their patients.

Q26a. The value placed on each might vary from patient to patient, and you may find it difficult to rank some higher or lower than others. However, please read over the list imagining yourself as the physician during a **typical acute care visit**.

Place a 1 before the individual item you feel is the most important, a 2 beside the next most important, and so on until you complete all 8. Although you may feel two items are of equal importance, please do **NOT** use ties.

	to conduct a thorough physical exam
	to make a human connection with the patient as a person
	to identify the patient's goals for the visit
	to collect data from the patient as efficiently as possible
	to understand the patient's perspective about the problem
	to develop a solid treatment plan
	to determine whether further tests are necessary
	to understand how the patient's life circumstances relate to the problem

Q26b. The value placed on each might vary from patient to patient, and you may find it difficult to rank some higher or lower than others. However, please read over the list imagining yourself as the physician during a **typical primary care visit**.

Place a 1 before the individual item you feel is the most important, a 2 beside the next most important, and so on until you complete all 8. Although you may feel two items are of equal importance, please do **NOT** use ties.

	to conduct a thorough physical exam
	to make a human connection with the patient as a person
	to identify the patient's goals for the visit
	to collect data from the patient as efficiently as possible
	to understand the patient's perspective about the problem
	to develop a solid treatment plan
	to determine whether further tests are necessary
	to understand how the patient's life circumstances relate to the problem