

# **The Training of Future Family Physicians 2007 Survey**

**WWAMI Rural Health Research Center**

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# The Training of Future Family Physicians 2007 Survey

## Program Location and Description

1. Name of program:

2. Name and title of person filling out survey:

Phone number:

3. Are there other residency programs at your hospital? ☐ Yes ☐ No

## Training in Community Health Centers or Other FQHCs

4. In some family medicine residency programs, residents are trained in Federally Qualified Health Centers (FQHCs include community health centers, migrant health centers, homeless health centers, public housing health centers, FQHC look-alikes, etc.). Do any of your residents train in a Federally Qualified Health Center?

☐ Yes ☐ No ☐ Don't know

*If you answered **no** or **don't know**, skip to question #9.*

5. If you answered **yes** to question #4, please complete the table below to show how many residents train in FQHCs and how much time they spend there:

	FQHC Training Site		# of Residents at Each Location Sometime During Last 12 Months	Average # of Months Spent at Each Location by Typical Resident During Last 12 Months	What Year Did Your Program Begin Training at this Site?
	Name of FQHC Training Site	ZIP Code of Training Site			
<i>Example</i>	<i>Clinica de Salud</i>	<i>97031</i>	<i>4 residents</i>	<i>5 months each</i>	<i>1995</i>
<b>Continuity Clinic</b> Continuity clinic in FQHC practice during residency	(1)				
	(2)				
	(3)				
<b>Block Rotation</b> 1- or 2-month block rotation(s) <i>(if more than 5 sites, list at bottom of page)</i>	(1)				
	(2)				
	(3)				
	(4)				
	(5)				
<b>Other</b> <i>(please specify)</i>					

6. What year did you begin your first affiliation with any FQHC? \_\_\_\_\_ year

7. Overall, how satisfied are you with the training experiences in FQHCs?

☐ Very satisfied   ☐ Satisfied   ☐ Neutral   ☐ Dissatisfied   ☐ Very dissatisfied

8. Which of the following structures best describes your current relationship with FQHC(s)? *(Please describe the three FQHCs that you have the strongest relationship with.)*

Insert FQHC name →	(1)	(2)	(3)
Main residency continuity clinic is located in an FQHC	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Residency program has a satellite clinic located in an FQHC	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
No formal affiliation with FQHC, but some training occurs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other <i>(please explain)</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. What barriers have you experienced in training or attempting to train family physicians in FQHCs? *(List the top three, in order of importance.)*

- (1) \_\_\_\_\_  
(2) \_\_\_\_\_  
(3) \_\_\_\_\_

10. In your opinion, what are the advantages of training family physicians in FQHCs? *(List the top three, in order of importance.)*

- (1) \_\_\_\_\_  
(2) \_\_\_\_\_  
(3) \_\_\_\_\_

### Program Mission

11. How important a part of your mission is training future family physicians for **urban underserved** populations?

☐ Very important   ☐ Somewhat important   ☐ Not important

12. How important a part of your mission is training future **rural** family physicians?

☐ Very important   ☐ Somewhat important   ☐ Not important

13. How has the Medicare volunteer precepting rule affected your ability to train residents?

☐ Don't know   ☐ Not at all   ☐ Minimal impact   ☐ Significant impact

Comment: \_\_\_\_\_  
\_\_\_\_\_

*Please turn the page to continue ⇒*

## Training in Rural Areas

14. Family practice residencies use several mechanisms to introduce residents to rural practice; please fill out the following grid summarizing the rural training opportunities offered within your program during the last 12 months.

Rural Experience (town population < 50,000)	Location of Experience During Last 12 Months		# of Residents at Each Location Sometime During Last 12 Months	Average # of Months Spent at Each Location by Typical Resident During Last 12 Months
	Town	ZIP Code		
<i>Example experience</i>	<i>Toppenish, WA</i>	<i>98948</i>	<i>4 residents</i>	<i>5 months</i>
<b>Full Time</b> Rural training track based full time in rural practice during R2 and R3 years	(1)			
	(2)			
	(3)			
<b>Block Rotation</b> 1- or 2-month rural block rotation(s) (if more than 5 sites, list at bottom of page)	(1)			
	(2)			
	(3)			
	(4)			
	(5)			
<b>Clinic Session</b> 1 or 2 continuity clinic sessions per week in rural area	(1)			
	(2)			
	(3)			
<b>Other Rural Education Strategies/Experiences</b> (please specify)	(1)			
	(2)			
	(3)			

*Thanks for your help!*

*Please return this completed questionnaire in the postage-paid envelope to Holly Andrilla, University of Washington, Department of Family Medicine, Box 354982, Seattle, WA 98195-4982.*