VCU Health System
Graduate Medical Education Policy

SURVEY USE IN THE RESIDENT POPULATION

Policy Statement and Purpose

The use of survey instruments to evaluate medical/professional training is a time-honored way to assess the efficacy of various educational strategies and interventions; the medical resident population routinely completes in-house surveys as well as external surveys from various professional organizations and accrediting bodies. The medical resident population, however, should not be considered a captive audience whose presence in the institution implies consent to participate in any and all training evaluation initiatives. Surveys do fall under the category of research according to the Office for Human Research Protections (OHRP) although they may be exempt from IRB review under 45 CFR 46.101(b)(2) exemption from 45 CFR part 46 requirements.

Even in cases where surveys do not require IRB approval, however, the possibility of undue influence exists, potentially placing learners in a “vulnerable” category as research participants. Residents may not feel comfortable declining to participate in a survey activity initiated by a person considered to be in a position of authority.

"The problem with [learner] participation in research conducted at the university is the possibility that their agreement to participate will not be freely given. [Learners] may volunteer to participate out of a belief that doing so will place them in good favor with faculty (e.g., that participating will result in receiving better grades, recommendations, employment, or the like), or that failure to participate will negatively affect their relationship with the investigator or faculty generally (i.e., by seeming "uncooperative," not part of the scientific community)."
Retrieved 5/23/2014 from http://www.hhs.gov/ohrp/archive/irb/irb_chapter6ii.htm#g11

In addition to ensuring research participant protection for medical trainees, this policy is intended to limit survey overload in the medical trainee population. The Graduate Medical Education office has created this policy to clarify the appropriate use of surveys among the residents in the VCU Health System. This policy is not designed to limit an individual residency from obtaining legitimate opinions and information from their own residents about curricular changes (proposed or approved).

All surveys conducted within an individual residency should be reviewed and approved by the Program Director. Surveys initiatives that would propose to get information from more than one residency and/or fellowship program must receive the approval of the GME Executive Committee as well as the approval of each of the Program Directors whose residents are
proposed to be surveyed. This approval should be obtained *prior to implementation* with VCUHS medical residents and fellows.

The following surveys are commonly employed among hospital residents and do not require additional approval for administration.

The VA Medical Center’s “The Learner’s Perceptions Survey” ([http://www.va.gov/oaa/surveys/](http://www.va.gov/oaa/surveys/))

VCUHS Annual Employee Survey

GME Leaving Survey (annually for departing residents)

ACGME Annual Resident Survey

Individual program specific surveys which have the approval of the Residency Program Director including:

- Residency/Fellowship Surveys designed to support information gathering for the Annual Program Evaluation Meeting

- Resident or Faculty designed Quality Improvement Projects conducted solely within a single residency or fellowship

Individual Program Specialty Board-derived Surveys

VCUHS Safety Culture Survey

Specific course/training module/class surveys

**Who Should Read This Policy**

Residency Program Directors

Fellowship Program Directors

Residency and Fellowship Program Coordinators

VCU and VCUHS faculty interacting with medical residents/fellows

Program Evaluators

Education Evaluators
Related Resources

U.S. Department of Health & Human Services, Office for Human Research Protections (OHRP):
http://www.hhs.gov/ohrp/index.html
Virginia Commonwealth University Office of Research:
http://www.research.vcu.edu/policies/index.htm
What Constitutes Human Research:

Contacts

The Office of Graduate Medical Education officially interprets this policy and shall revise or eliminate any or all parts as necessary to meet the changing needs of the Virginia Commonwealth University Health System. Please direct policy questions to the Office of the Associate Dean for Graduate Medical Education.

Definitions

Position of Authority: References and includes, but is not limited to, situations in which a faculty member, fellow or resident is responsible for teaching, evaluating, supervising, or advising a learner as part of a graduate or undergraduate medical education program or is in a position to influence any of these activities or processes.

Faculty: Faculty appointments (full-time and permanent part-time) include: Instructional (teaching and research) Faculty; Administrative and/or Professional Faculty; Collateral and Adjunct Faculty; Special faculty appointments, such as Visiting, Eminent Scholar, Emeriti and Affiliate Faculty; or any ancillary personnel involved in education, evaluation, supervising or advising of learners in a graduate or undergraduate medical education program

Coercion: the act of using force or intimidation to obtain compliance; the direct or perceived threat of harm for non-compliance.

Undue Influence: real or perceived outside pressures that negate the will of an individual.

Human Subject: a living individual about whom an investigator conducting research obtains data through intervention interaction.

Learner: Any person engaged in graduate (residency or fellowship) or undergraduate
(medical or dental school) medical education at VCU.

**Implied Consent:** consent inferred from signs (such as a student’s enrollment in a learning activity), actions, facts or by inaction or silence.

**Routine Surveys:** commonly accepted surveys historically administered to the VCUHS resident/fellow population on a regular basis (e.g. annual or upon program entrance/exit).

Approved by Graduate Medical Education Committee, June 10, 2014