

UBC Family Practice Residency Program Data Request and Resident Access Guidelines

Background:

The UBC Department of Family Practice Residency Program (DFP) regularly oversees access to residents for collection of data and obtains resident and graduate data for scholarship and program evaluation purposes.

Principles:

- 1) The DFP may provide collected data to faculty, residents, or other stakeholders. This data was collected with the intended purpose of program evaluation; however, they may be used for projects conceptualized and reported as research with specific ethics approval.
- 2) The DFP may provide to faculty, residents, or other stakeholders access to residents for scholarship purposes. Data collection method may vary, including but not limited to online surveys and interviews. Residents have the full right to deny participation for any reason.
- 3) Unless otherwise authorized, we will provide analyzed data/reports that address specific questions before providing raw data. This may be subject to a fee.
- 4) Residents within the program are welcome and encouraged to participate in program evaluation projects.
- 5) Preference will be given to resident requests. All others will be addressed as time permits.
- 6) Site specific data will not be provided.

Process:

- 1) A project proposal and data request/resident access form should be submitted to the Data concierge Committee at least 4 weeks in advance of need by emailing fmprpostgrad.research@familymed.ubc.ca.
- 2) Data request/Resident access forms will be reviewed by the Data concierge Committee, with a determination 'to approve, to not approve, or subject to further review required' submitted to the Program Director. The release of data is subject to final approval by the Program Director. Some requests may also require ethics approval through the Research Ethics Board.
- **3)** Ideally, program evaluation projects should be aligned with the program Logic Model and Performance Measurement Framework. Requests outside of program priorities may be deemed lower priority as resources are limited. Approval is also dependent on administrative resources available at time of request.
- 4) Upon completion, a copy of the written project report must be submitted to the Program Evaluation Committee.



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Handling of Data:

- Any recipient of data must ensure security and confidentiality of data at all times. This means storing data on an encrypted device, ensuring data are only accessed by the person to whom the DFP releases it and their statistician as required, only used for the intended purposes, and then permanently destroyed when project is complete. Compliance with UBC policies #85 and #104, as well as Research Ethics Board (REB) policies if used for research, is essential.
- In order to protect confidentiality, particularly with small sample sizes, data released will be anonymized and reported in aggregate.
- Residents/faculty may share their findings internally (e.g., Scholarship Day); however, other distribution of findings must be approved by the DFP. If specific ethics approval has been obtained, findings may be presented in academic venues, e.g., peer review publications and conference presentations.

For Approval at PGEC – January 2019





DATA **REQUEST/RESIDENT ACCESS FORM**

Introduction:

Please refer to the Data Sharing Guidelines before completing this form.

Please include the following in your data request submission:

- 1. Complete Data request/ Resident access form and project proposal.
- 2. Data request only: If applicable, include a blank survey with requested questions highlighted (e.g. Exit Survey). For a blank version of the survey, please email: fmprpostgrad.research@familymed.ubc.ca
- 3. Resident access request only: if applicable, include a blank survey/data collection instrument (e.g. interview questions).

Send completed form and highlighted survey(s) to: fmprpostgrad.research@familymed.ubc.ca

Applicant Information:
First Name Last Name
Position/Title
Name of Organization
Contact Email Telephone Number
Are you a: DFP Resident DFP Faculty/Staff Other UBC External to UBC
Name of Principal Investigator (if different from above):
Names of Co-applicants/Investigators:
Name of Supervisor (resident/student requests):
Type of request:
Data request: Resident access:
Ethics Approval:
Yes: No: In progress:
Project Description: (title, description, goals, planned presentations, etc.)
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What is the program evaluation or research question you are trying to answer?

How do the requested data apply to your question?

What are potential risks or harms that may arise (e.g. confidentiality)?

How will potential risks or harms be mitigated?

To your knowledge, have the requested data been used previously for the same purpose?

What new contribution to overall knowledge will this make?

Resident Access only: Please outline data collection method and how the data will be analyzed.

Identify all funding agencies for your pro	ject:	
Do you plan to publish your results or pr If yes, provide details:		



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Data Request: Please indicate the survey/document and the year(s) you are seeking data from, along with a blank copy of the survey with the specific questions highlighted.

Resident Access: Please indicate the survey/data collection instrument (if there is any), along with a blank copy of the survey with the specific questions highlighted.

(Note: all data released will be anonymized and reported in aggregate)

Data format preferred (excel, word, etc.): _____

Describe how the data will be kept secure.

Internal Use Only Data concierge Committee					
	Approved:	Rejected:	Deferred:		
State rationale:					
Program Evaluation Committee					
	Approved:	Rejected:	Deferred:		



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