Faculty *Forward*

2011 Institutional Data Report University of North Carolina at Chapel Hill School of Medicine

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PREFACE

Faculty Forward is a collaborative partnership between the Association of American Medical Colleges (AAMC) and U.S. medical schools around the country focusing on measuring and enhancing medical school faculty engagement. This evidence-based initiative is designed to build capacity for academic medical centers to understand and develop the organizational cultures and talent management practices more likely to attract and retain excellent faculty.

The Faculty Forward Engagement Survey
A central offering of the Faculty Forward initiative is the *Faculty Forward Engagement Survey,* the largest national workplace data collection designed to address the issues unique to faculty engagement in academic medicine. This independent, research-based survey—developed and reviewed by experts in survey design, academic medicine, talent management, and organizational development—grew from a series of in-depth focus groups with medical school clinical and basic science faculty members in 2006. After a test-pilot in 2007, the Faculty Forward program launched with an expanded administration in 2009—marking the largest-ever collection of workplace engagement and satisfaction benchmarking data for academic medicine institutions in the U.S.

The *Faculty Forward Engagement Survey* assesses levels of U.S. medical school faculty engagement— defined as the emotional and cognitive attitudes that faculty members have toward their workplace experiences (i.e., what is often referred to as "job satisfaction" within the literature) and faculty members' affective commitment to their institutions, including their resulting behavioral outcomes such as contribution and effort. Please refer to the Executive Summary section of this report to see the survey dimensions and content used to measure faculty engagement.

Report Contents

The following report contains the results from University of North Carolina at Chapel Hill School of Medicine's participation in the 2011-2012 Faculty Forward cohort and its administration of the *Faculty Forward Engagement Survey*. Contents of this institutional report include the following:

- ❖ **An Executive Summary** that contains:
    - o A brief methodology section with information on the survey dimensions, survey administration, and population and participant characteristics
    - o Instructions for interpreting the executive summary and its data displays
    - o Displays of your institution's results—including tables and graphs of global satisfaction items highlighting faculty group differences and easy-to-interpret survey dimension summary scores
    - o Benchmarking comparisons between your institution, your selected peer group, and all schools participating in this 2011-2012 Faculty Forward cohort.

- ❖ **Appendices** that contain:
    - o A more detailed methodology section that includes data analysis techniques applied and detailed survey population information
    - o A copy of the 2011-2012 items of the *Faculty Forward Engagement Survey*

❖ **A Comprehensive Data Report** that contains:
- o Frequency distributions, means, and other statistical reporting of all survey items
- o Data breakouts across faculty demographic groups
- o Data breakouts across departments
- o Benchmarking comparisons between your institution, your selected peer group, and all schools participating in this 2011-2012 Faculty Forward cohort.

Some portions of this comprehensive report will be available in print format, while others will only be provided in electronic form.

Contact

If you have any questions about your report, please contact your Faculty Forward team designee or one of the following:

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Executive Summary

EXECUTIVE SUMMARY

The Executive Summary provides an overview of the Faculty Forward Engagement Survey dimensions, the survey administration, population and participant characteristics, and your institution's results. This section of the report also compares a summary of your results to the four peer institutions you chose for comparison and to all medical schools in the 2011-2012 Faculty Forward cohort.

Survey Dimensions

The survey consisted of items that measure faculty engagement and that assess workplace factors that may impact faculty engagement (e.g., satisfaction with faculty-related institutional policies and practices). The following table displays the survey dimensions and descriptions of the items that compose these dimensions:

Table 1: 2011 Survey Dimensions

Dimension Name	Dimension Description
Nature of Work	Number of hours worked; time spent on mission areas; control over schedule; autonomy
Focus on Medical School Mission	Value the medical school places on various mission areas; whether the workplace culture cultivates excellence, collegiality, and other ideals
Medical School Governance	Opportunities for faculty participation in governance; communication from the dean's office; medical school's explanation of finances to faculty
Focus on Department Mission	Value the department places on various mission areas
Department Governance	Opportunities for faculty participation in decision-making; communication from the department chair; department's explanation of finances to faculty
Collegiality and Collaboration	Opportunities to collaborate with other faculty; personal "fit" (i.e. sense of belonging); interactions with colleagues; intellectual vitality within the department and medical school; appreciation by colleagues
Relationship with Supervisor	Supervisor's support of individual goals; good communication; perceptions of equity
Mentoring and Feedback	Quality of mentoring and feedback on career performance
Opportunities for Career and Professional Growth	Opportunities for professional development; pace of advancement; application of promotion criteria; whether promotion criteria are clear and reasonable within various mission areas; equal opportunities regardless of sex, race, and sexual orientation
Compensation and Benefits	Evaluation of overall compensation; health and retirement benefits
Faculty Recruitment and Retention	Success in hiring and retaining high quality faculty
Clinical Practice	Ability to provide high quality care; how well the clinical practice functions overall
Global Satisfaction	Overall satisfaction with department and medical school as places to work, including two open-ended questions to solicit suggestions for improvement
Part-time Faculty Views	New experimental section based on focus group research to assess decisions for part-time status and support from institution
Demographic Information	Demographic information regarding sex, race, age etc.
Appointment Information	Time of appointment; type of appointment; administrative roles

Interpreting the Presentation of Data

Frequencies
Most survey items used a five-point response scale. For this Executive Summary, we grouped the top two response options (e.g., strongly agree or agree) and bottom two response options (e.g., strongly disagree or disagree) and presented those combined percentages for ease of interpretation. See the "Comprehensive Data Report" section for the full frequency distribution of response options for each survey item across demographic groups and departments.

Means
In addition to frequencies, this report displays the means of numerical and five-point response scale items. To correct for potential non-response biases, <u>overall means are statistically weighted</u> by gender, race/ethnicity, and department type/degree (see the Extended Methodology section for more information on weighting). Means across demographic groups and departments, however, are not weighted. The 2009 weighted means are also presented in this Executive Summary for the institutions that participated in the 2009 survey administration. See the "Comprehensive Data Report" section for all survey item means across demographic groups and departments.

Summary Scores
Faculty Forward created summary scores representing conceptually-related items with compatible scales (e.g., all agreement response scales) within the survey dimensions. To be concise, we often present just the top two response options (e.g., percent strongly agree or agree), though summary scores can be calculated across all response options and as means. The summary scores are calculated from the following items within the survey dimensions as shown in Table 2.

Table 2: 2011 Summary Scores Shown by Survey Dimension and Item Number

Dimension Name	Summary Scores
Nature of Work	• My Job (Q11a-d)*
Focus on Medical School Mission	• Focus on Medical School Mission (Q12a-e) • Workplace Culture (Q13a-d)
Department Governance	• Department Governance (Q15a-e and Q16a-c)
Medical School Governance	• Medical School Governance (Q17a-e and Q18a-c)
Relationship with Supervisor	• Relationship with Supervisor (Q19a-d)
Opportunities for Career and Professional Growth	• Growth Opportunities (Q26a-c and Q27 [all parts]) • Promotion Equality (Q28a-d)
Collegiality and Collaboration	• Collegiality and Collaboration (Q29a-f and Q30a-c)
Compensation and Benefits	• Compensation and Benefits (Q31a-e)
Faculty Recruitment and Retention	• Faculty Recruitment and Retention (Q32a-d and Q33a-d)
Clinical Practice	• Clinical Practice (Q36a-g)

* Note: A summary score may not have the same name as the survey dimension because it represents a small subset of items from that dimension due to response-scale incompatibilities, or because we have broken up the dimension into different summary scores representing items that are more strongly related conceptually within that dimension.

Survey Administration

ICF Macro, Faculty Forward's independent survey firm partner, administered the *Faculty Forward Engagement Survey* from October to November of 2011 via the web to all full-time and part-time medical school faculty members at institutions participating in the 2011-2012 cohort.

Sixteen medical schools participated in the 2011-2012 Faculty Forward cohort and are as follows:
- Jefferson Medical College of Thomas Jefferson University
- Loyola University Stritch School of Medicine
- Medical College of Georgia School of Medicine*
- Medical College of Wisconsin
- Stanford University School of Medicine*
- University of Medicine and Dentistry of New Jersey-New Jersey Medical School
- University of California, Irvine, School of Medicine
- University of California, Los Angeles David Geffen School of Medicine
- University of Florida College of Medicine
- University of Mississippi School of Medicine
- University of Missouri-Columbia School of Medicine
- University of New Mexico School of Medicine
- University of North Carolina at Chapel Hill School of Medicine
- University of Oklahoma College of Medicine
- University of Rochester School of Medicine and Dentistry
- University of Virginia School of Medicine*

* Please note that these institutions will <u>not</u> be included in your data report for benchmarking purposes as they will administer the survey at a later date.

Benchmarking Comparisons

This report contains your institution's results in comparison to all 2011-2012 Faculty Forward cohort institutions—a grouping that contains your own institution, so that you can see the overall results for the entire cohort—and to the four institutions you selected as your peer group.

Your Peer Group
As noted, your results will be compared to the four institutions you selected as your peer group. The four medical schools that your institution selected were as follows:
- Medical College of Wisconsin
- University of California, Los Angeles David Geffen School of Medicine
- University of Florida College of Medicine
- University of Rochester School of Medicine and Dentistry

Quintile Benchmarking Comparisons
In addition to displaying the frequencies and means of all items for the entire cohort and your peer group for benchmarking purposes, we also present quintile comparisons to show your institution's percentile placement within these comparison groups. For frequencies, percentiles are calculated from the top two response options of satisfaction- and agreement-scale items. Numerals represent the following quintile placement of your institution within the comparison groups:

1: 0-20%	**2:** 21-40%	**3:** 41-60%	**4:** 61-80%	**5:** 81-100%

Department Reporting

To allow for benchmarking comparisons by department across institutions, Faculty Forward created a standardized list of 31 aggregated departments, as shown in Table 3. Faculty Forward also allowed institutions to submit a list of disaggregated departments, representing the names used for department identification within their institution. Benchmarking comparisons using this coding scheme for the disaggregated departments were not possible since all institutions used different schemes. Detailed results by aggregated and disaggregated departments are included in the "Comprehensive Data Report" section of your report.

Table 3: Aggregated Departments by Basic Science and Clinical

Basic Science Departments	Clinical Departments
Anatomy	Anesthesiology
Biochemistry	Cardiology
Genetics	Dermatology
Microbiology	Emergency Medicine
Molecular & Cellular Biology	Family Medicine
Neurosciences	Internal Medicine (General)
Pharmacology	Medicine (Subspecialty)
Physiology	Neurology
Other Basic Science Departments	Neurosurgery
	OB/GYN
	Ophthalmology
	Orthopedic Surgery
	Otolaryngology
	Pathology
	Pediatrics (General)
	Pediatrics (Subspecialty)
	Psychiatry
	Radiation Oncology
	Radiology
	Surgery (General)
	Surgery (Subspecialty)
	Other Clinical Departments

Survey Population and Response Rates

The survey population was determined by a database of medical school faculty that institutions provided to Faculty Forward. Survey respondents were defined as those faculty members who answered at least one question after item 7 (i.e., after the demographic items). Thus, participants must have completed a minimum of one core survey item to be included in our analysis of results. The number of survey respondents displayed for a given item refers to the number of survey-eligible and valid respondents who answered a given item.

Table 4 displays the survey response rates by respondent characteristics for your institution, your institution's peer group, and all Faculty Forward Institutions. Table 5 displays the number of faculty eligible to participate in the survey (i.e., the population) and the total number of respondents.

Table 4: Population Data and Response Rates by Respondent Characteristics

	Numbers at Your Institution		Response Rates		
	Population	Survey Respondents	Your Institution	Your Peer Group	All Faculty Forward Institutions
All Faculty	**1570**	**777**	**49.5%**	**60.5%**	**61.7%**
Appointment Status					
Full-Time	1431	732	51.2%	63.0%	64.9%
Part-Time	138	45	32.6%	40.2%	39.0%
Department Type					
Basic Science	266	114	42.9%	66.1%	67.7%
Clinical	1304	663	50.8%	59.8%	60.8%
Rank					
Senior (i.e., Full or Associate)	N/A	434	N/A	N/A	N/A
Junior (i.e., Assistant)	N/A	334	N/A	N/A	N/A
Gender					
Male	879	431	49.0%	59.4%	61.2%
Female	691	346	50.1%	62.3%	62.5%
Race/Ethnicity					
Majority (i.e., White or Asian)	1468	725	49.4%	61.0%	61.9%
Minority (i.e., all other)	102	52	51.0%	55.3%	59.1%
Administrative Title					
Administrative Title	N/A	303	N/A	N/A	N/A
Non-Administrative Title	N/A	448	N/A	N/A	N/A

Note: Faculty Forward did not collect faculty population data on rank and administrative titles, so response rates could not be calculated for these groups.

Table 5: Population Data and Response Rates by Comparison Groups

	Your Institution	Your Peer Group	All Faculty Forward Institutions
Number of Faculty Eligible for Survey	**1,570**	7,609	15,570
Number of Respondents	**777**	4,604	9,600
Response Rate	**49.5%**	60.5%	61.7%

RESULTS OVERVIEW

Summary Scores Across All Faculty

Faculty Forward created summary scores representing conceptually-related items with compatible scales (e.g., all agreement response scales) within the survey dimensions. Page 2 of this Executive Summary contains a table that displays the survey dimensions and item numbers from which these summary scores were calculated.

The summary scores in Figure 1 represent the overall top two response options (e.g., strongly agree or agree) across all faculty members at your institution.

Figure 1: Summary Scores (Top Two%) Across All Faculty at Your Institution

Dimension	Score
My Job	85
Focus on Medical School Mission	66
Workplace Culture	74
Department Governance	63
Medical School Governance	41
Relationship with Supervisor	74
Growth Opportunities	57
Promotion Equality	70
Collegiality and Collaboration	76
Compensation and Benefits	60
Faculty Recruitment and Retention	70
Clinical Practice	55
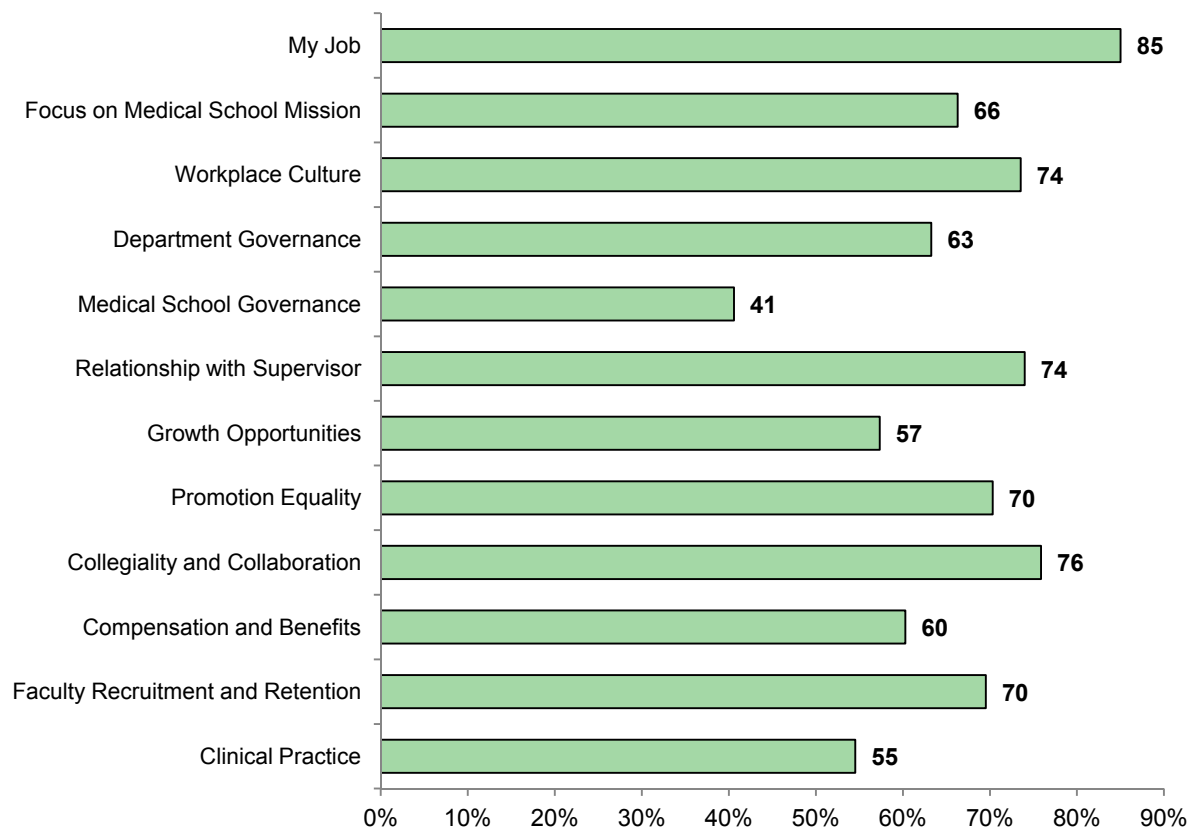
Summary Scores by Respondent Characteristics

Table 6 displays summary scores for the overall top two response options (e.g., strongly agree or agree) by appointment status (full-time or part-time), department type (basic science or clinical), rank (senior [i.e., full or associate] or junior [i.e., assistant]), gender, race/ethnicity (majority [i.e., White or Asian] or minority [i.e., all other]), and administrative title (holds administrative title or does not hold administrative title).

Table 6: Summary Scores (Top Two %) by Demographic Groups

Summary Score	Appointment Status		Department Type		Rank		Gender		Race/Ethnicity		Administrative Title	
	Full-Time	Part-Time	Basic Science	Clinical	Senior	Junior	Male	Female	Majority	Minority	Admin. Title	Non-Admin. Title
My Job	85	87	83	85	85	85	85	85	85	82	87	84
Focus on Medical School Mission	65	76	59	67	63	72	66	66	66	74	65	67
Workplace Culture	73	79	74	73	71	77	74	73	74	66	72	75
Department Governance	63	62	69	62	61	67	64	62	63	63	64	63
Medical School Governance	40	46	38	41	37	47	44	36	40	51	39	41
Relationship with Supervisor	73	84	67	75	70	80	73	76	74	69	73	74
Growth Opportunities	57	58	61	57	60	54	59	55	58	54	60	56
Promotion Equality	70	74	69	71	69	72	77	61	72	44	70	71
Collegiality and Collaboration	75	84	67	77	75	77	77	75	76	74	77	75
Compensation and Benefits	60	64	39	64	61	60	62	58	60	58	63	58
Faculty Recruitment and Retention	69	81	68	70	66	74	71	68	70	61	69	70
Clinical Practice	54	62	37	55	54	56	57	51	55	48	58	52

Top 10 and Bottom 10 Survey Items

The following lists display the "top 10" survey items at your institution (i.e., the items with the highest percentage of faculty choosing the top two response options on scales of agreement or satisfaction and the "bottom 10" survey items at your institution (i.e., the items with the lowest percentage of faculty choosing the top two response options on scales of agreement or satisfaction).

Top 10 Survey Items at Your Institution:

	Top two %	Top survey items
1.	95%	Q11d: I am usually willing to give more than what is expected of me in my job
2.	89%	Q30b: The faculty in my department usually get along well together
3.	87%	Q33a: Recruiting female faculty members
4.	86%	PT3c: My supervisor is supportive of my part-time arrangement
5.	84%	Q11b: My day-to-day activities give me a sense of accomplishment
6.	83%	Q11a: I am satisfied with my autonomy at work
7.	83%	PT4a: Current part-time arrangement
8.	83%	Q29b: The quality of professional interaction I have with departmental colleagues
9.	82%	Q29a: The quality of personal interaction I have with departmental colleagues
10.	82%	Q41a: If I had it to do all over, I would again choose to work at this medical school

Bottom 10 Survey Items at Your Institution:

	Top two %	Bottom survey items
1.	27%	Q17b: Senior leadership does a good job explaining medical school finances to the faculty
2.	36%	Q18b: There are sufficient opportunities for faculty participation in the governance of this medical school
3.	38%	Q17a: There is sufficient communication from the dean`s office to the faculty about the medical school
4.	38%	PT4g: My protected time for certain activities (e.g., research, administration)
5.	38%	Q36b: Communication to physicians about this location`s financial status
6.	38%	Q18a: The pace of decision making in the dean`s office is reasonable
7.	40%	Q31b: My incentive-based compensation, such as bonuses
8.	42%	Q27g: Administration/Institutional: To be promoted in rank, what I must do in this mission area is clear to me
9.	43%	PT4d: Opportunities for advancement
10.	44%	Q36d: Communication between physicians and senior administrators

GLOBAL SATISFACTION

This section of the Executive Summary displays data on the three global satisfaction items: satisfaction with your medical school, satisfaction with your department, and whether you would again choose to work at your medical school. In addition, we provide data on the survey item asking faculty members whether they have any plans to leave their institution in the near future.

Satisfaction with Your Medical School

Faculty members responded to the question, "All things considered, how satisfied or dissatisfied are you with your <u>medical school</u> as a place to work?" Figure 2 displays global satisfaction ratings with University of North Carolina at Chapel Hill School of Medicine as a place to work. In Figure 3, your institution's satisfaction ratings are compared to those of your peers and all Faculty Forward 2011-2012 cohort institutions.

Figure 2: Satisfaction with University of North Carolina at Chapel Hill School of Medicine

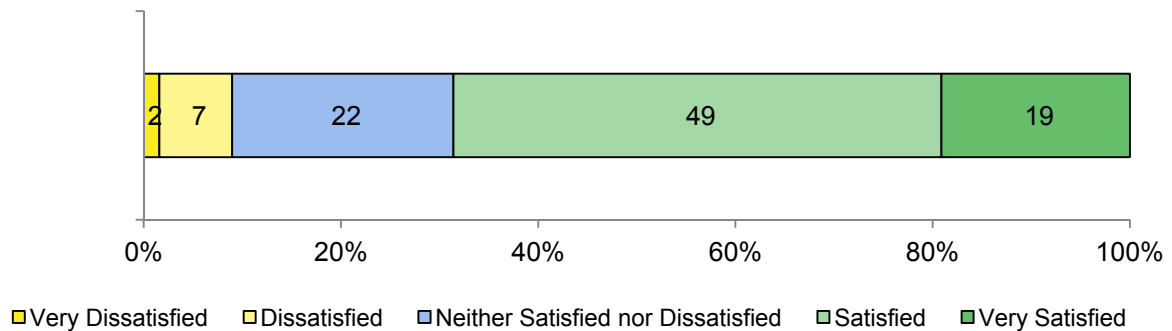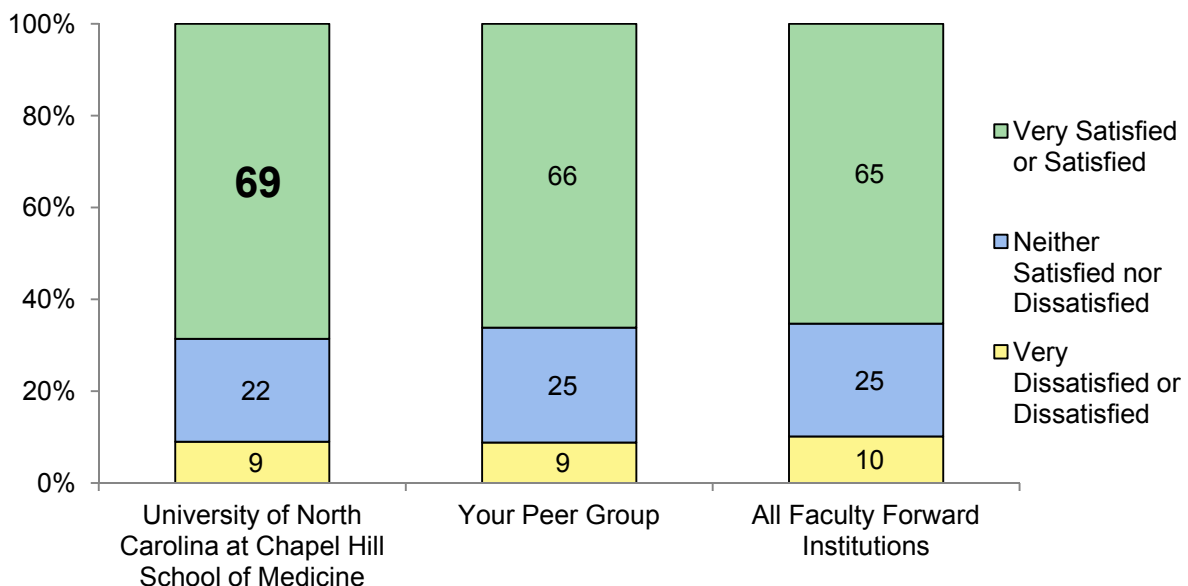Legend: □ Very Dissatisfied □ Dissatisfied □ Neither Satisfied nor Dissatisfied □ Satisfied ■ Very Satisfied

Figure 3: Satisfaction with Medical School Comparison to Your Peer Group and the Cohort

Mean	3.76	3.71	3.69

Satisfaction with Your Medical School by Respondent Characteristics

Table 7 displays the ratings for global satisfaction with your medical school segmented by appointment status (full-time or part-time), department type (basic science or clinical), rank (senior [i.e., full or associate] or junior [i.e., assistant]), gender, race/ethnicity (majority [i.e., White or Asian] or minority [i.e., all other]), and administrative title (holds administrative title or does not hold administrative title).
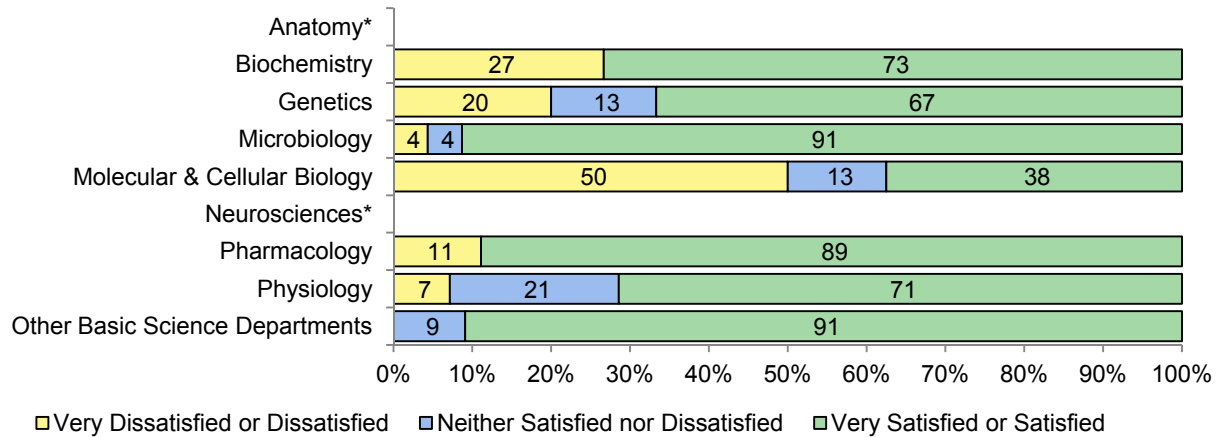
Table 7: Differences in Global Satisfaction with Medical School by Respondent Characteristics

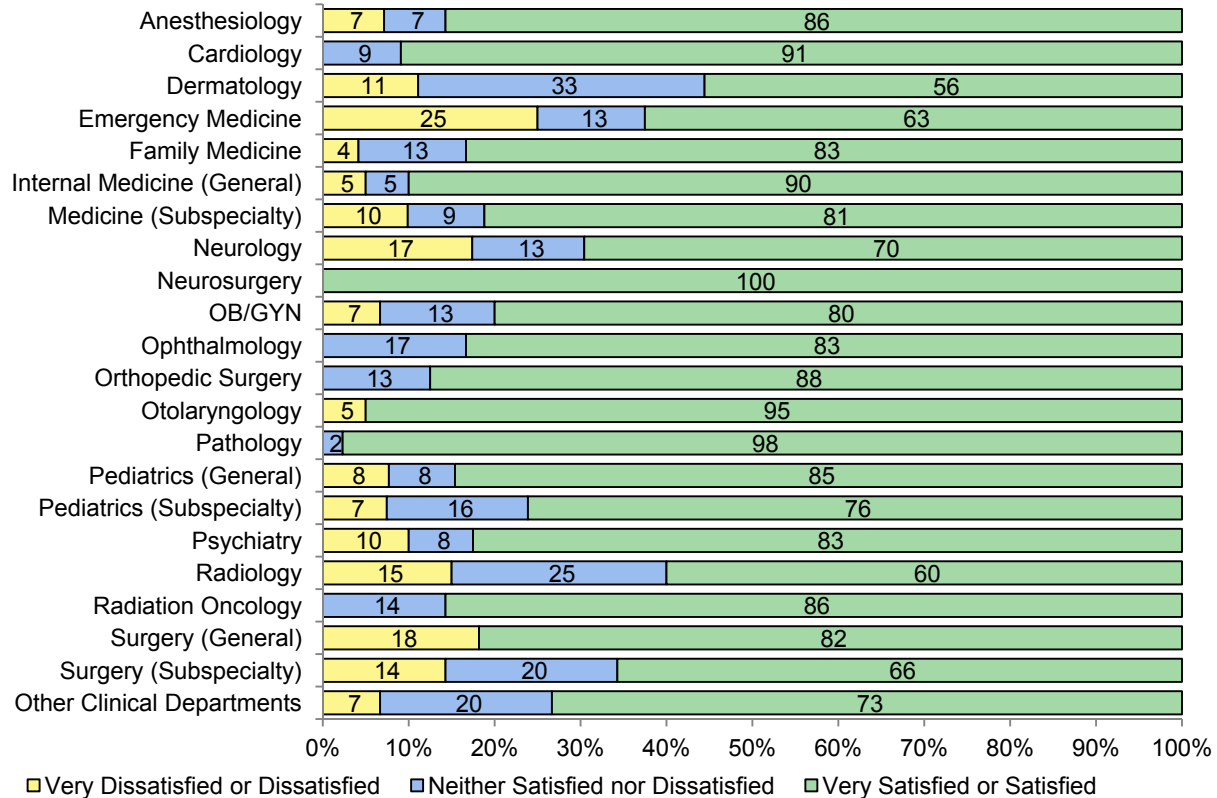| Respondent Characteristic	Number of Respondents	Very Satisfied or Satisfied	Neither Satisfied nor Dissatisfied	Very Dissatisfied or Dissatisfied	Mean
All Faculty	**691**	**69%**	**22%**	**9%**	**3.76**
Appointment Status					
Full-time	653	68%	23%	9%	3.76
Part-time	38	82%	13%	5%	3.95
Department Type					
Basic Science	103	67%	16%	17%	3.63
Clinical	588	69%	24%	7%	3.80
Rank					
Senior	396	67%	22%	11%	3.73
Junior	287	72%	23%	5%	3.85
Gender					
Male	400	70%	21%	9%	3.79
Female	291	67%	25%	9%	3.74
Race/Ethnicity					
Majority	647	67%	23%	10%	3.75
Minority	44	86%	14%	0%	4.11
Administrative Title					
Administrative Title	275	68%	25%	7%	3.81
Non-Administrative Title	395	69%	22%	10%	3.75

Global Satisfaction with Your Department

Figures 4 and 5 display responses to the item, "All things considered, how satisfied or dissatisfied are you with your <u>department</u> as a place to work?" These data are broken out by the aggregated departments.

Figure 4: Differences in Global Satisfaction within Basic Science Departments

Anatomy*
Biochemistry: 27 | 73
Genetics: 20 | 13 | 67
Microbiology: 4 | 4 | 91
Molecular & Cellular Biology: 50 | 13 | 38
Neurosciences*
Pharmacology: 11 | 89
Physiology: 7 | 21 | 71
Other Basic Science Departments: 9 | 91

☐ Very Dissatisfied or Dissatisfied ☐ Neither Satisfied nor Dissatisfied ☐ Very Satisfied or Satisfied

*Note: IRB requires suppression of data cells with n<5 faculty respondents.

Figure 5: Differences in Global Satisfaction within Clinical Departments

Anesthesiology: 7 | 7 | 86
Cardiology: 9 | 91
Dermatology: 11 | 33 | 56
Emergency Medicine: 25 | 13 | 63
Family Medicine: 4 | 13 | 83
Internal Medicine (General): 5 | 5 | 90
Medicine (Subspecialty): 10 | 9 | 81
Neurology: 17 | 13 | 70
Neurosurgery: 100
OB/GYN: 7 | 13 | 80
Ophthalmology: 17 | 83
Orthopedic Surgery: 13 | 88
Otolaryngology: 5 | 95
Pathology: 2 | 98
Pediatrics (General): 8 | 8 | 85
Pediatrics (Subspecialty): 7 | 16 | 76
Psychiatry: 10 | 8 | 83
Radiology: 15 | 25 | 60
Radiation Oncology: 14 | 86
Surgery (General): 18 | 82
Surgery (Subspecialty): 14 | 20 | 66
Other Clinical Departments: 7 | 20 | 73

☐ Very Dissatisfied or Dissatisfied ☐ Neither Satisfied nor Dissatisfied ☐ Very Satisfied or Satisfied

Would Again Choose to Work at Medical School

Figure 6 displays responses to the item, "If I had it to do all over, I would again choose to work at this medical school." These results are segmented by appointment status (full-time or part-time), department type (basic science or clinical), rank (senior [i.e., full or associate] or junior [i.e., assistant]), gender, race/ethnicity (majority [i.e., White or Asian] or minority [i.e., all other]), and administrative title (holds administrative title or does not hold administrative title).

Figure 6: Differences in Choice to Work at Medical School by Respondent Characteristics

Characteristic	Strongly Disagree or Disagree	Neither Agree nor Disagree	Strongly Agree or Agree
All Faculty	8	10	82
Full-Time	8	10	82
Part-Time	5	5	89
Basic Science	6	14	80
Clinical	8	9	83
Senior	9	12	80
Junior	7	7	86
Male	8	10	82
Female	7	11	82
Majority	7	10	82
Minority	14	7	79
Administrative Title	8	11	81
Non-Administrative Title	8	9	83

Legend: □ Strongly Disagree or Disagree ■ Neither Agree nor Disagree ■ Strongly Agree or Agree

Turnover Intentions

Survey respondents indicated whether they intended to retire (Q38), leave the medical school (Q39), or leave academic medicine within the next two years (Q40). Table 8 displays the results for your institution, your peer group, and all Faculty Forward Institutions with faculty responding "I don't know" removed from analysis.

Table 8: Turnover Intentions

|	Your Institution	Your Peer Group	All Faculty Forward Institutions
Retire			
Yes (Will Retire)	20 (3.1%)	2.7%	3.0%
No (Will Not Retire)	630 (96.9%)	97.3%	97.0%
Leave this Medical School			
Yes (Leave this Medical School)	66 (11.8%)	12.6%	12.5%
No (Stay at this Medical School)	495 (88.2%)	87.4%	87.5%
Leave Academic Medicine			
Yes (Leave Academic Medicine)	11 (10.7%)	9.2%	9.8%
No (Stay in Academic Medicine)	92 (89.3%)	90.8%	90.2%

Figure 7 displays the percentage of faculty who intend to leave the medical school, excluding those who plan on retiring or leaving academic medicine. Figure 8 displays the percentage of faculty who intend on leaving academic medicine, excluding those who plan to retire or only leave the medical school. These results are segmented by appointment status (full-time or part-time), department type (basic science or clinical), rank (senior [i.e., full or associate] or junior [i.e., assistant]), gender, race/ethnicity (majority [i.e., White or Asian] or minority [i.e., all other]), and administrative title (holds administrative title or does not hold administrative title).

Figure 7: Intentions to Leave the <u>Medical School</u> by Respondent Characteristics
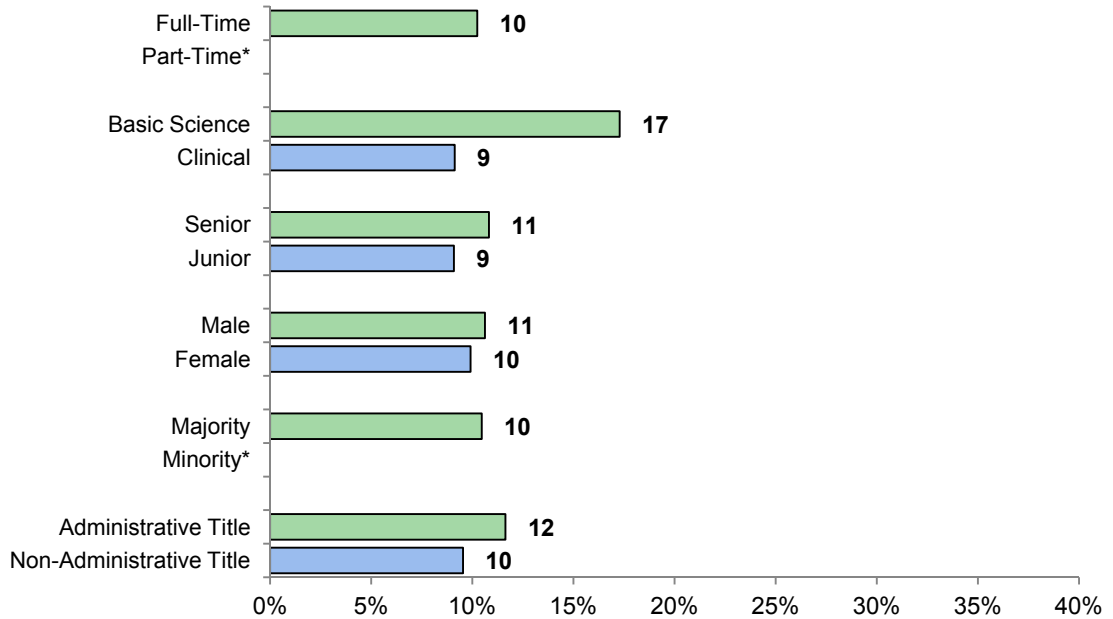
*Note: IRB requires suppression of data cells with n<5 faculty respondents.

Figure 8: Intentions to Leave <u>Academic Medicine</u> by Respondent Characteristics
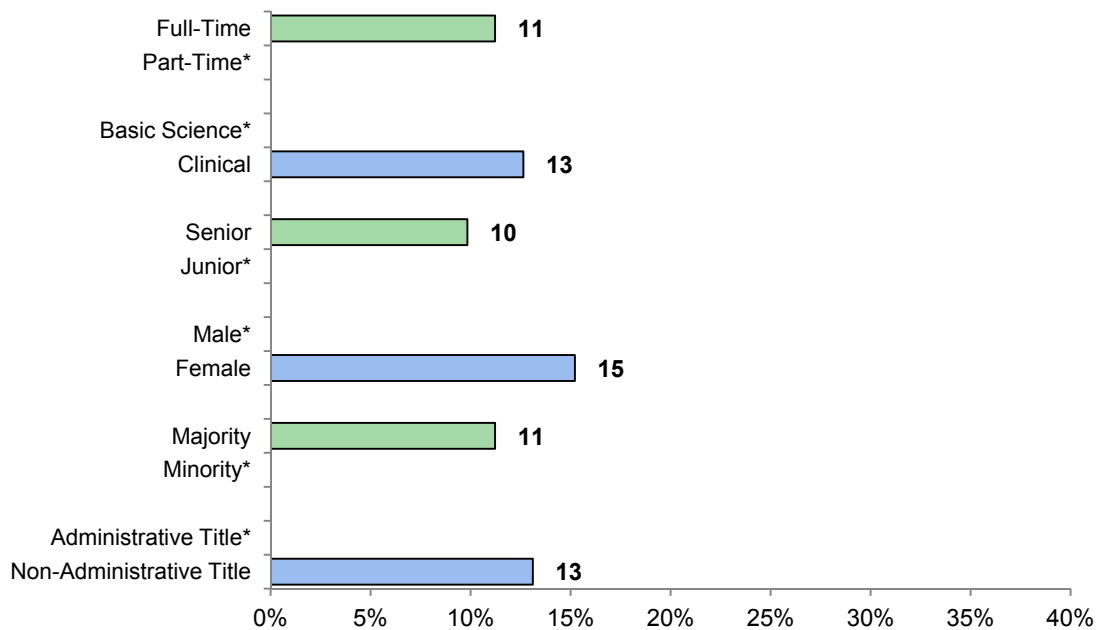
*Note: IRB requires suppression of data cells with n<5 faculty respondents.

NATURE OF WORK

Respondents estimated the total number of hours spent on all work activities in an average calendar week and the percentage of time spent on each mission area. Mission areas included:

- **Teaching/Education:** teaching, grading, course preparation, developing new curricula, advising or supervising students or residents, working with student or resident groups
- **Research/Scholarship:** research, reviewing or preparing articles or books, attending or preparing for professional meetings or conferences, reviewing or writing proposals, seeking outside funding
- **Patient Care/Client Services:** medical service, counseling patients or families, administrative tasks associated with clinical service
- **Administration/Institutional Service:** university, medical school, health system, faculty practice or department administrative duties, meetings, committee work

Figure 9 displays the percentage of time that full-time faculty members in basic science departments (including only basic scientists who are not actively engaged in patient care) and clinical departments spend in each mission area. Please note the number of hours per mission area was calculated based on the percentage applied to the average total hours.

Figure 9: Average Work Week for Full-time Faculty Members in Basic Science Departments vs. Clinical Departments
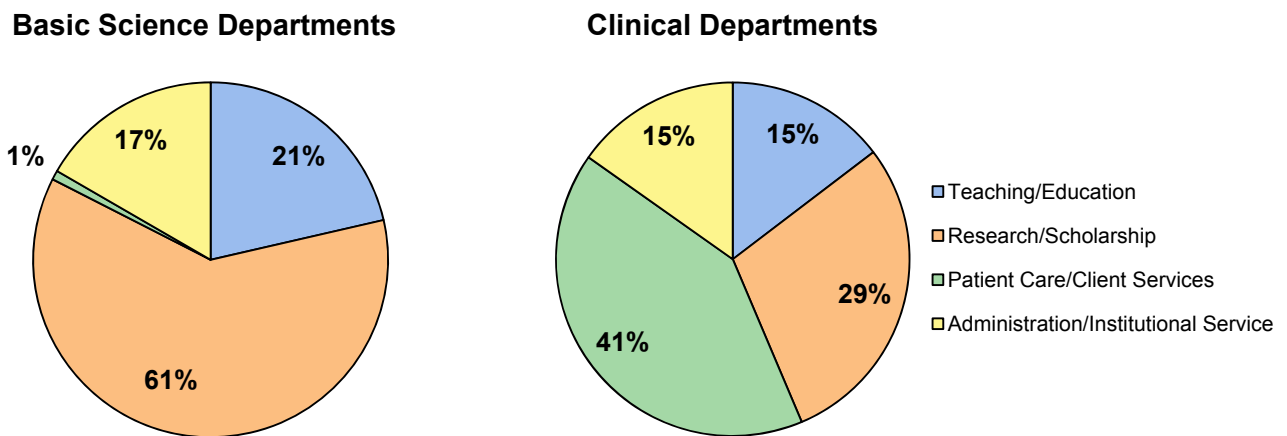
Mission Area	Mean Hours
Teaching/Education	12.6
Research/Scholarship	36.0
Patient Care/Client Services	0.5
Administration/Institutional Service	9.8
Total Hours	**58.9**

Mission Area	Mean Hours
Teaching/Education	9.1
Research/Scholarship	18.0
Patient Care/Client Services	25.6
Administration/Institutional Service	9.5
Total Hours	**62.2**

Time Spent on Mission Areas

Respondents rated whether they spent too little or too much time on each mission area. The results are displayed in Table 9.

Table 9: Time Spent on Mission Areas

Item	N	Far Too Much or Too Much	About Right	Far Too Little or Too Little
Basic Science Departments				
Teaching/Education	106	11%	71%	18%
Research/Scholarship	107	11%	59%	30%
Patient Care/Client Services	16	13%	69%	19%
Administration/Institutional Service	87	26%	71%	2%
Clinical Departments				
Teaching/Education	629	3%	70%	27%
Research/Scholarship	622	2%	48%	50%
Patient Care/Client Services	563	31%	64%	5%
Administration/Institutional Service	593	20%	70%	10%

Q10: Please rate the percentage of time/effort you currently devote to each of the following activities.

My Job

Respondents indicated their agreement or disagreement with statements related to their autonomy at work, their sense of accomplishment, the clarity of their role, and their interest in doing more than expected in their position (Table 10).

Table 10: My Job

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean	2009 Mean
I am satisfied with my autonomy at work	762	83%	7%	10%	4.13	
My day-to-day activities give me a sense of accomplishment	761	84%	9%	7%	4.12	
My role here is clear to me	757	78%	12%	11%	3.99	
I am usually willing to give more than what is expected of me in my job	757	95%	4%	1%	4.55	
MY JOB SUMMARY SCORE		**85%**	**8%**	**7%**	**4.20**	

Q11: Please indicate your level of agreement or disagreement with the following statements.
* Note: This item was rated on a satisfaction scale rather than an agreement scale in 2009.

FOCUS ON MEDICAL SCHOOL MISSION

Respondents indicated their agreement or disagreement with items related to University of North Carolina at Chapel Hill School of Medicine's mission (Table 11).

Table 11: Focus on Medical School's Mission

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean
My medical school's mission is clear	725	70%	17%	14%	3.69
Overall, my medical school is accomplishing its mission	684	67%	23%	10%	3.70
The stated values of the medical school match the actual values of the institution	677	62%	24%	14%	3.60
It is clear how my day-to-day activities support the medical school's mission	705	69%	18%	13%	3.71
Overall, my school fosters teaching excellence	707	63%	22%	15%	3.61
MEDICAL SCHOOL MISSION SUMMARY SCORE		**66%**	**21%**	**13%**	**3.66**

Q12: Please indicate your level of agreement or disagreement with the following statements.
Note: These items were not included in the 2009 survey.

Value of Mission Areas

Faculty rated the amount of value they perceived their medical school (Table 12) and their department (Table 13) place on the four mission areas. For a description of each mission area, please refer to page 15.

Table 12: Medical School Value of Mission Areas

Item	N	Far Too Much or Too Much	About Right	Far Too Little or Too Little
Teaching/Education	695	2%	68%	30%
Research/Scholarship	700	15%	71%	14%
Patient Care/Client Services	603	9%	72%	19%
Administration/Institutional Service	648	16%	72%	11%

Q14: Please rate the value that you believe your medical school places on each of the following mission areas.

Table 13: Departmental Value of Mission Areas

Item	N	Far Too Much or Too Much	About Right	Far Too Little or Too Little
Teaching/Education	722	3%	73%	24%
Research/Scholarship	720	10%	68%	22%
Patient Care/Client Services	607	13%	74%	13%
Administration/Institutional Service	677	11%	76%	14%

Q14: Please rate the value that you believe your department places on each of the following mission areas.

Workplace Culture

Respondents indicated their agreement or disagreement with whether University of North Carolina at Chapel Hill School of Medicine cultivates collegiality, diversity, innovation, and excellence in performance (Table 14).

Table 14: Workplace Culture

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean	2009 Mean
Collegiality	746	82%	10%	8%	4.10	
Diversity	737	72%	19%	9%	3.83	
Innovation	743	68%	20%	11%	3.76	
Excellence in performance	740	72%	18%	10%	3.85	
WORKPLACE CULTURE SUMMARY SCORE		**74%**	**17%**	**10%**	**3.89**	

Q13: I feel that the workplace culture at this medical school cultivates...
[†] Note: This item stated "Excellence" rather than "Excellence in performance" in 2009.

DEPARTMENT GOVERNANCE

Respondents indicated their agreement or disagreement with items related to the governance of their department (Table 15).

Table 15: Department Governance

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean	2009 Mean
There is sufficient communication from the department chair's office to the faculty about the department	717	62%	14%	24%	3.54	
My department does a good job explaining departmental finances to the faculty	715	54%	16%	30%	3.38	
The department chair's priorities for the department are clear	694	64%	16%	21%	3.60	
The chair's priorities for the department are reasonable	655	68%	22%	11%	3.76	
In general, the department chair's priorities are aligned with the dean's priorities	510	68%	24%	8%	3.77	
The pace of decision making in the department is reasonable	667	61%	18%	21%	3.49	
There are sufficient opportunities for faculty participation in the governance of this department	673	55%	20%	25%	3.38	
The department chair sets a good example to reflect our medical school's values	669	76%	15%	9%	3.94	
DEPARTMENT GOVERNANCE SUMMARY SCORE		**63%**	**18%**	**19%**	**3.60**	

Question 15-16: Please indicate your level of agreement or disagreement with the following statements.
[*] Note: This item was rated on a satisfaction scale rather than an agreement scale in 2009.
[†] Note: This item assessed pace of decision making by the department chair in 2009.

MEDICAL SCHOOL GOVERNANCE

Respondents indicated their agreement or disagreement with items related to the governance of University of North Carolina at Chapel Hill School of Medicine (Table 16).

Table 16: Medical School Governance

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean	2009 Mean
There is sufficient communication from the dean's office to the faculty about the medical school	706	38%	27%	35%	2.96	
Senior leadership does a good job explaining medical school finances to the faculty	704	27%	25%	48%	2.66	
The dean's priorities for the medical school are clear	623	46%	26%	29%	3.16	
The dean's priorities for the medical school are reasonable	577	47%	36%	17%	3.29	
In general, the dean's priorities are aligned with the medical school's mission	554	51%	36%	13%	3.42	
The pace of decision making in the dean's office is reasonable	496	38%	43%	19%	3.17	
There are sufficient opportunities for faculty participation in the governance of this medical school	575	36%	34%	30%	3.00	
Faculty can express their opinions about the medical school without fear of retribution	566	46%	33%	22%	3.24	
MEDICAL SCHOOL GOVERNANCE SUMMARY SCORE		**41%**	**32%**	**28%**	**3.09**	

Question 17-18: Please indicate your level of agreement or disagreement with the following statements.
* Note: This item was rated on a satisfaction scale rather than an agreement scale in 2009.
† Note: This item stated "this medical school" rather than "senior leadership" in 2009.

RELATIONSHIP WITH SUPERVISOR

Table 17 displays respondents' level of agreement or disagreement with statements about their supervisor.

Table 17: Supervisor

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean
I feel appreciated by my supervisor	714	76%	13%	12%	3.90
My supervisor sets a good example to reflect this medical school's values	713	76%	17%	7%	3.97
My supervisor actively encourages my career development	712	68%	18%	14%	3.76
My supervisor listens to what I have to say	707	76%	14%	10%	3.95
RELATIONSHIP WITH SUPERVISOR SUMMARY SCORE		**74%**	**15%**	**11%**	**3.89**

Question 19: Please indicate your level of agreement or disagreement with each of the following statements about the supervisor who completes your performance review.
Note: These items were not included in the 2009 survey.

MENTORING AND FEEDBACK

Faculty were asked to rate their agreement or disagreement with the importance and quality of the mentoring and feedback at University of North Carolina at Chapel Hill School of Medicine (Table 18).

Table 18: Mentoring and Feedback

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean	2009 Mean
Having a formal mentor at my institution is important to me.	687	61%	26%	13%	3.71	
I am satisfied with the quality of mentoring that I receive.	223	82%	13%	5%	4.08	
Receiving regular feedback about my job performance is important to me.	714	82%	14%	4%	4.07	
The feedback I receive from my unit head is generally useful.	483	76%	18%	6%	3.87	
I am satisfied with how frequently I receive feedback from my unit head.	482	80%	15%	5%	3.95	

Questions 21-22, 24-25: Please indicate your level of agreement or disagreement with the following statements.
* Note: This item was rated on a satisfaction scale rather than an agreement scale in 2009.

OPPORTUNITIES FOR CAREER AND PROFESSIONAL GROWTH

Growth Opportunities

Table 19 displays respondents' satisfaction with the opportunities and pace of professional advancement at University of North Carolina at Chapel Hill School of Medicine and their agreement or disagreement with the clarity and reasonableness of promotion expectations within each mission area. Please refer to page 15 for a definition of each mission area.

Table 19: Growth Opportunities at University of North Carolina at Chapel Hill School of Medicine

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean	2009 Mean
Further professional advancement at this medical school is important to me	696	81%	14%	5%	4.16	
I am satisfied with the pace of my professional advancement at this medical school	695	59%	19%	22%	3.42	
I am satisfied with my opportunities for professional development at this medical school	702	56%	22%	23%	3.39	
Teaching/Education						
To be promoted in rank, what I must do in this mission area is clear to me	632	55%	19%	26%	3.33	
To be promoted in rank, what I must do in this mission area is reasonable to me	600	58%	33%	9%	3.56	

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean	2009 Mean
Research/Scholarship						
To be promoted in rank, what I must do in this mission area is <u>clear</u> to me	620	64%	15%	21%	3.51	
To be promoted in rank, what I must do in this mission area is <u>reasonable</u> to me	595	59%	30%	11%	3.56	
Patient Care/Client Services						
To be promoted in rank, what I must do in this mission area is <u>clear</u> to me	479	52%	22%	26%	3.30	
To be promoted in rank, what I must do in this mission area is <u>reasonable</u> to me	456	53%	35%	12%	3.49	
Administration/Institutional Service						
To be promoted in rank, what I must do in this mission area is <u>clear</u> to me	585	42%	27%	31%	3.09	
To be promoted in rank, what I must do in this mission area is <u>reasonable</u> to me	554	45%	41%	14%	3.34	
GROWTH OPPORTUNITY SUMMARY SCORE		**57%**	**25%**	**18%**	**3.48**	

Question 26: Please indicate your level of agreement or disagreement with the following statements.

Question 27: Please indicate your level of agreement or disagreement with the following statements about several mission areas.

* <u>Note</u>: This item was rated on a satisfaction scale rather than an agreement scale in 2009.

Promotion Equality

Respondents rated whether University of North Carolina at Chapel Hill School of Medicine offers equal promotion opportunities to all faculty members regardless of gender, race and ethnicity, or sexual orientation (Table 20).

Table 20: Promotion Equality

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean	2009 Mean
At my medical school the criteria for promotion are consistently applied to faculty across comparable positions	488	47%	24%	30%	3.18	
My medical school offers equal opportunities to all faculty members <u>regardless of gender</u>	605	74%	12%	14%	3.84	
My medical school offers equal opportunities to all faculty members <u>regardless of race/ethnicity</u>	589	78%	13%	9%	3.95	
My medical school offers equal opportunities to all faculty members <u>regardless of sexual orientation</u>	525	79%	18%	3%	4.04	
PROMOTION EQUALITY SUMMARY SCORE		**70%**	**16%**	**13%**	**3.77**	

Question 28: Please indicate your level of agreement or disagreement with each of the following statements.

COLLEGIALITY AND COLLABORATION

Respondents indicated their agreement or disagreement with statements related to collegiality and collaboration at the medical school and within their department, including their satisfaction with the quality of their interactions with departmental colleagues, their sense of belonging, and the intellectual vitality at the medical school and within their department (Table 21).

Table 21: Collegiality and Collaboration

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean	2009 Mean
I am satisfied with the quality of <u>personal</u> interaction I have with departmental colleagues	700	82%	11%	6%	4.05	
I am satisfied with the quality of <u>professional</u> interaction I have with departmental colleagues	699	83%	9%	8%	4.03	
I am satisfied with how well I "fit" (i.e., my sense of belonging) in my department	698	72%	15%	13%	3.81	
I am satisfied with how well I "fit" (i.e., my sense of belonging) in my medical school	696	58%	26%	16%	3.50	
I am satisfied with the intellectual vitality in my department	700	75%	13%	12%	3.88	
I am satisfied with the intellectual vitality in my medical school	696	72%	20%	7%	3.84	
My departmental colleagues are respectful of my efforts to balance work and home responsibilities	699	75%	18%	7%	3.90	
The faculty in my department usually get along well together	696	89%	7%	4%	4.14	
I feel appreciated by my departmental colleagues	696	77%	14%	8%	3.93	
COLLEGIALITY & COLLABORATION SUMMARY SCORE		**76%**	**15%**	**9%**	**3.90**	

Question 29: Please indicate your level of agreement or disagreement with the following aspects of your workplace culture.
Question 30: Please indicate your level of agreement or disagreement with the following statements.
* <u>Note</u>: This item was rated on a satisfaction scale rather than an agreement scale in 2009.

COMPENSATION AND BENEFITS

Respondents rated their satisfaction or dissatisfaction with their compensation and benefits (Table 22).

Table 22: Compensation and Benefits

Item	N	Very Satisfied or Satisfied	Neither Satisfied nor Dissatisfied	Very Dissatisfied or Dissatisfied	Mean	2009 Mean
My overall compensation	701	45%	15%	40%	3.02	
My incentive-based compensation, such as bonuses	623	40%	25%	35%	2.97	
Health benefits	696	73%	8%	19%	3.78	
Retirement benefits	697	75%	14%	11%	3.83	
My overall benefits package	700	66%	16%	18%	3.62	
COMPENSATION AND BENEFITS SUMMARY SCORE		**60%**	**16%**	**24%**	**3.46**	

Question 31: Please indicate your level of satisfaction or dissatisfaction with each of the following aspects of compensation.

FACULTY RECRUITMENT AND RETENTION

Table 23 displays respondents' agreement or disagreement with whether University of North Carolina at Chapel Hill School of Medicine and their department are successful in recruiting and retaining high quality faculty members and whether their department is successful in recruiting and retaining female and racial/ethnic minority faculty members.

Table 23: Recruitment and Retention

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean	2009 Mean
My medical school is successful in hiring high quality faculty members	610	76%	17%	8%	3.88	
My department is successful in hiring high quality faculty members	687	75%	14%	10%	3.88	
My medical school is successful in retaining high quality faculty members	583	52%	26%	22%	3.37	
My department is successful in retaining high quality faculty members	656	61%	20%	19%	3.56	
My department is successful in recruiting female faculty members	644	87%	8%	5%	4.07	
My department is successful in recruiting racial/ethnic minority faculty members	619	63%	20%	16%	3.57	
My department is successful in retaining female faculty members	625	76%	15%	9%	3.89	
My department is successful in retaining racial/ethnic minority faculty members	581	63%	28%	9%	3.67	
FACULTY RECRUITMENT AND RETENTION SUMMARY SCORE		**70%**	**18%**	**12%**	**3.74**	

Question 32: Please indicate your level of agreement or disagreement with the following statements.
Question 33: Please indicate your level of agreement or disagreement with the following statements.

CLINICAL PRACTICE

Respondents who are actively engaged in the clinical care of patients were asked about their satisfaction with various aspects of the location where they spend most of their time in clinical practice. Institutions were allowed to specify up to five specific names of clinical practice locations from which faculty could choose to respond. Table 24 displays the results for all locations of an institution combined.

Table 24: Clinical Practice (all locations combined)

Item	N	Very Satisfied or Satisfied	Neither Satisfied nor Dissatisfied	Very Dissatisfied or Dissatisfied	Mean	2009 Mean
Opportunities for physician input in management or administrative decisions	462	48%	21%	31%	3.17	
Communication to physicians about this location's financial status	452	38%	27%	35%	3.01	
The teamwork between physicians and other clinical staff	472	71%	15%	15%	3.76	
Communication between physicians and senior administrators	460	44%	24%	32%	3.15	
Location's responsiveness in meeting your requests as a physician	457	48%	24%	28%	3.24	
My ability to provide a high quality of patient care in this location	481	69%	16%	15%	3.74	
How well this clinical location functions overall as it relates to patient care	482	63%	17%	20%	3.57	
CLINICAL PRACTICE SUMMARY SCORE		**55%**	**20%**	**25%**	**3.39**	

Question 36: Please indicate your level of satisfaction or dissatisfaction with each of the following statements based on your clinical practice location.

Table 25 presents the top two response options (i.e., very satisfied or satisfied) for the following locations:

- Location 1: UNC Hospitals Inpatient/Emergency Department
- Location 2: UNC Hospital-based clinic (on campus)
- Location 3: P & A Clinic (on campus)
- Location 4: UNC Hospitals-based Clinic (off campus)
- Location 5: P & A Clinic (off campus)

Please note that if your institution has more than 5 clinical practice locations, data on the additional locations are located in the Comprehensive Data Report section.

Table 25: Clinical Practice by Location

Item	Location 1	Location 2	Location 3	Location 4	Location 5
Opportunities for physician input in management or administrative decisions	50%	36%	62%	38%	65%
Communication to physicians about this location's financial status	33%	29%	47%	42%	71%
The teamwork between physicians and other clinical staff	74%	61%	74%	75%	77%
Communication between physicians and senior administrators	45%	31%	57%	45%	67%
Location's responsiveness in meeting your requests as a physician	48%	36%	45%	58%	88%
My ability to provide a high quality of patient care in this location	73%	57%	70%	78%	83%
How well this clinical location functions overall as it relates to patient care	65%	52%	60%	69%	86%
CLINICAL PRACTICE SUMMARY SCORE	**55%**	**44%**	**59%**	**58%**	**77%**

PART-TIME FACULTY VIEWS

In addition to their responses to all of the other questions in the survey, part-time faculty respondents indicated their agreement or disagreement with items related to expectations and support provided to them as part-time status faculty members (Table 26).

Table 26: Expectations

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean
My institution has clear expectations for part-time faculty	37	51%	30%	19%	3.33
My institution provides necessary resources for part-time faculty	37	51%	32%	16%	3.38
My supervisor is supportive of my part-time arrangement	36	86%	14%	0%	4.27

Question PT3: Please indicate your level of agreement or disagreement with the following statements.
<u>Note</u>: These items were not included in the 2009 survey.

Table 27 displays respondents' satisfaction or dissatisfaction with various components of their part-time position.

Table 27: Activities

Item	N	Very Satisfied or Satisfied	Neither Satisfied nor Dissatisfied	Very Dissatisfied or Dissatisfied	Mean
Current part-time arrangement	35	83%	11%	6%	4.01
Ability to meet department or division needs	36	78%	8%	14%	3.87
Ability to fulfill job responsibilities (i.e., being able to accomplish what you need to do)	36	69%	6%	25%	3.73
Opportunities for advancement	37	43%	38%	19%	3.27
Ability to manage workload	37	62%	11%	27%	3.41
Access to professional development opportunities	37	57%	22%	22%	3.37
My protected time for certain activities (e.g., research, administration)	37	38%	24%	38%	2.94
Ability to return to or obtain a full-time position, if desired	37	54%	32%	14%	3.45

Question PT4: Please indicate your level of satisfaction or dissatisfaction with each of the following activities given your part-time status.
<u>Note</u>: These items were not included in the 2009 survey.

QUINTILE BENCHMARKING COMPARISONS

Table 28 reflects the top two response options (e.g., percent strongly agree or agree) for survey agreement- and satisfaction-scale items across all respondents. These percentages are then compared to those of your peer group and the cohort. We also present quintile benchmarking comparisons (displayed as *Quint*) to show your institution's percentile placement within these comparison groups. Numerals represent the following percentile placement of your institution within the comparison groups:

1: 0-20%   **2:** 21-40%   **3:** 41-60%   **4:** 61-80%   **5:** 81-100%

Table 28: Item Comparison to Peer Group and All Faculty Forward Institutions

	You	Peers		Cohort	
	Top two	Top two	Quint	Top two	Quint
MY JOB SUMMARY SCORE	**85%**	**83%**	**5**	**83%**	**4**
11a. I am satisfied with my autonomy at work	83%	80%	5	79%	4
11b. My day-to-day activities give me a sense of accomplishment	84%	81%	5	81%	5
11c. My role here is clear to me	78%	77%	3	77%	3
11d. I am usually willing to give more than what is expected of me in my job	95%	95%	4	95%	4
FOCUS ON MEDICAL SCHOOL MISSION SUMMARY SCORE	**66%**	**65%**	**3**	**67%**	**3**
12a. My medical school's mission is clear	70%	69%	3	71%	3
12b. Overall, my medical school is accomplishing its mission	67%	66%	3	67%	3
12c. The stated values of the medical school match the actual values of the institution	62%	61%	3	62%	3
12d. It is clear how my day-to-day activities support the medical school's mission	69%	66%	4	68%	3
12e. Overall, my school fosters teaching excellence	63%	64%	3	65%	2
WORKPLACE CULTURE SUMMARY SCORE	**74%**	**68%**	**5**	**67%**	**4**
13a. I feel that the workplace culture at this medical school cultivates collegiality	82%	70%	5	71%	5
13b. I feel that the workplace culture at this medical school cultivates diversity	72%	69%	5	70%	3
13c. I feel that the workplace culture at this medical school cultivates innovation	68%	64%	4	61%	4
13d. I feel that the workplace culture at this medical school cultivates excellence in performance	72%	69%	4	66%	4
DEPARTMENT GOVERNANCE SUMMARY SCORE	**63%**	**61%**	**4**	**63%**	**3**
15a. There is sufficient communication from the department chair's office to the faculty about the department	62%	63%	3	65%	3
15b. My department does a good job explaining departmental finances to the faculty	54%	51%	3	52%	3
15c. The department chair's priorities for the department are clear	64%	64%	3	65%	3
15d. The chair's priorities for the department are reasonable	68%	65%	4	67%	3
15e. In general, the department chair's priorities are aligned with the dean's priorities	68%	64%	4	66%	3
16a. The pace of decision making in the department is reasonable	61%	57%	5	58%	4
16b. There are sufficient opportunities for faculty participation in the governance of this department	55%	54%	3	56%	3
16c. The department chair sets a good example to reflect our medical school's values	76%	72%	5	74%	3

	You	Peers		Cohort	
	Top two	Top two	Quint	Top two	Quint
MEDICAL SCHOOL GOVERNANCE SUMMARY SCORE	**41%**	**44%**	**3**	**44%**	**3**
17a. There is sufficient communication from the dean's office to the faculty about the medical school	38%	42%	3	42%	2
17b. Senior leadership does a good job explaining medical school finances to the faculty	27%	28%	3	28%	3
17c. The dean's priorities for the medical school are clear	46%	48%	2	50%	3
17d. The dean's priorities for the medical school are reasonable	47%	52%	1	53%	2
17e. In general, the dean's priorities are aligned with the medical school's mission	51%	58%	1	59%	1
18a. The pace of decision making in the dean's office is reasonable	38%	40%	3	40%	3
18b. There are sufficient opportunities for faculty participation in the governance of this medical school	36%	43%	2	42%	2
18c. Faculty can express their opinions about the medical school without fear of retribution	46%	47%	3	47%	3
RELATIONSHIP WITH SUPERVISOR SUMMARY SCORE	**74%**	**68%**	**5**	**70%**	**4**
19a. I feel appreciated by my supervisor	76%	70%	5	71%	4
19b. My supervisor sets a good example to reflect this medical school's values	76%	69%	5	71%	5
19c. My supervisor actively encourages my career development	68%	63%	5	65%	3
19d. My supervisor listens to what I have to say	76%	71%	5	73%	4
21. Having a formal mentor at my institution is important to me	61%	63%	1	60%	3
22. I am satisfied with the quality of mentoring that I receive	82%	76%	5	77%	4
24. Receiving regular feedback about my job performance is important to me	82%	80%	3	80%	3
25a. The feedback I receive from my unit head is generally useful	76%	79%	1	78%	2
25b. I am satisfied with how frequently I receive feedback from my unit head	80%	78%	4	79%	3
GROWTH OPPORTUNITIES SUMMARY SCORE	**57%**	**60%**	**3**	**61%**	**2**
26a. Further professional development at this medical school is important to me	81%	83%	3	82%	3
26b. I am satisfied with the pace of my professional advancement at this medical school	59%	56%	4	57%	4
26c. I am satisfied with my opportunities for professional development at this medical school	56%	54%	4	54%	3
27a_a. **Teaching/Education**: To be promoted in rank, what I must do in this mission area is clear to me	55%	62%	2	62%	1
27a_b. **Teaching/Education**: To be promoted in rank, what I must do in this mission area is reasonable to me	58%	64%	3	64%	2
27b_a. **Research/Scholarship**: To be promoted in rank, what I must do in this mission area is clear to me	64%	67%	3	66%	3
27b_b. **Research/Scholarship**: To be promoted in rank, what I must do in this mission area is reasonable to me	59%	58%	3	59%	3
27c_a. **Patient Care/Client Services**: To be promoted in rank, what I must do in this mission area is clear to me	52%	59%	1	60%	2
27c_b. **Patient Care/Client Services**: To be promoted in rank, what I must do in this mission area is reasonable to me	53%	58%	3	59%	2
27d_a. **Administration/Institutional Service**: To be promoted in rank, what I must do in this mission area is clear to me	42%	49%	1	50%	1
27d_b. **Administration/Institutional Service**: To be promoted in rank, what I must do in this mission area is reasonable to me	45%	50%	3	51%	1

	You	Peers		Cohort	
	Top two	Top two	Quint	Top two	Quint
PROMOTION EQUALITY SUMMARY SCORE	**70%**	**72%**	**3**	**72%**	**3**
28a. At my medical school the criteria for promotion are consistently applied to faculty across comparable positions	47%	47%	3	48%	3
28b. My medical school offers equal opportunities to all faculty members regardless of gender	74%	77%	1	78%	2
28c. My medical school offers equal opportunities to all faculty members regardless of race/ethnicity	78%	80%	1	80%	3
28d. My medical school offers equal opportunities to all faculty members regardless of sexual orientation	79%	81%	1	81%	2
COLLEGIALITY AND COLLABORATION SUMMARY SCORE	**76%**	**71%**	**5**	**72%**	**5**
29a. I am satisfied with the quality of personal interaction I have with departmental colleagues	82%	78%	5	79%	5
29b. I am satisfied with the quality of professional interaction I have with departmental colleagues	83%	80%	5	79%	5
29c. I am satisfied with how well I "fit" (i.e., my sense of belonging) in my department	72%	70%	5	72%	3
29d. I am satisfied with how well I "fit" (i.e., my sense of belonging) in my medical school	58%	57%	3	59%	3
29e. I am satisfied with the intellectual vitality in my department	75%	71%	5	69%	5
29f. I am satisfied with the intellectual vitality in my medical school	72%	66%	5	64%	5
30a. My departmental colleagues are respectful of my efforts to balance work and home responsibilities	75%	70%	5	71%	4
30b. The faculty in my department usually get along well together	89%	78%	5	80%	5
30c. I feel appreciated by my departmental colleagues	77%	71%	5	73%	5
COMPENSATION AND BENEFITS SUMMARY SCORE	**60%**	**64%**	**1**	**62%**	**3**
31a. My overall compensation	45%	56%	1	53%	1
31b. My incentive-based compensation, such as bonuses	40%	42%	1	42%	3
31c. Health benefits	73%	77%	2	73%	3
31d. Retirement benefits	75%	72%	4	72%	4
31e. My overall benefits package	66%	70%	1	69%	2
FACULTY RECRUITMENT AND RETENTION SUMMARY SCORE	**70%**	**64%**	**5**	**63%**	**5**
32a. My medical school is successful in hiring high quality faculty members	76%	68%	5	64%	4
32b. My department is successful in hiring high quality faculty members	75%	66%	5	65%	4
32c. My medical school is successful in retaining high quality faculty members	52%	49%	3	45%	4
32d. My department is successful in retaining high quality faculty members	61%	55%	5	54%	4
33a. My department is successful in recruiting female faculty members	87%	79%	5	80%	5
33b. My department is successful in recruiting racial/ethnic minority faculty members	63%	59%	4	62%	3
33c. My department is successful in retaining female faculty members	76%	73%	4	73%	4
33d. My department is successful in retaining racial/ethnic minority faculty members	63%	59%	5	61%	3
CLINICAL PRACTICE SUMMARY SCORE	**55%**	**57%**	**2**	**55%**	**3**
36a. Opportunities for physician input in management or administrative decisions	48%	47%	3	47%	3
36b. Communication to physicians about this location's financial status	38%	40%	2	39%	3
36c. The teamwork between physicians and other clinical staff	71%	73%	3	71%	3
36d. Communication between physicians and senior administrators	44%	46%	2	45%	3
36e. Location's responsiveness in meeting your requests as a physician	48%	48%	3	48%	3
36f. My ability to provide a high quality of patient care in this location	69%	73%	2	70%	3
36g. How well this clinical location functions overall as it relates to patient care	63%	68%	2	64%	3

	You	Peers		Cohort	
	Top two	Top two	Quint	Top two	Quint
PT3a. My institution has clear expectations for part-time faculty	51%	48%	3	47%	3
PT3b. My institution provides necessary resources for part-time faculty	51%	54%	3	52%	3
PT3c. My supervisor is supportive of my part-time arrangement	86%	85%	3	82%	4
PT4a. Current part-time arrangement	83%	78%	5	78%	4
PT4b. Ability to meet department or division needs	78%	74%	4	73%	4
PT4c. Ability to fulfill job responsibilities (i.e., being able to accomplish what you need to do)	69%	68%	3	68%	4
PT4d. Opportunities for advancement	43%	43%	3	47%	2
PT4e. Ability to manage workload	62%	61%	4	63%	3
PT4f. Access to professional development opportunities	57%	61%	2	61%	3
PT4g. My protected time for certain activities (e.g., research, administration)	38%	45%	1	46%	2
PT4h. Ability to return to or obtain a full-time position, if desired	54%	64%	1	60%	3
37a. All things considered, how satisfied or dissatisfied are you with your department as a place to work?	79%	74%	5	74%	5
37b. All things considered, how satisfied or dissatisfied are you with your medical school as a place to work?	69%	66%	5	65%	4
41. If I had it to do all over, I would again choose to work at this medical school	82%	75%	5	75%	5

Extended Methodology

Extended Methodology

Survey Design

The *Faculty Forward Engagement Survey* was developed and reviewed by experts in survey design and medical faculty affairs from the AAMC and its member institutions. The survey was tested in focus groups and a rigorous pilot study, which included a survey administration to the census of faculty at 10 medical schools, and after which we made further refinements to the instrument. After the pilot in 2007, the Faculty Forward program launched with an expanded administration in 2009—marking the largest-ever collection of workplace engagement and satisfaction benchmarking data for academic medicine institutions in the U.S. To maintain comparability for the schools that participated in the 2009 Faculty Forward cohort, many of the items were the same or similar to the items on the previous survey.

The web-based survey was designed for full-time and part-time faculty to assess their perceptions of satisfaction with their work-life. It consisted of 46 standard items for all schools, plus up to 15 custom questions specific to each school. Topical issues addressed by the survey included the nature of faculty members' work, institutional culture, feedback and mentoring, compensation and benefits, institutional governance and leadership, and clinical practice.

Survey Reliability

We tested the survey's internal reliability or consistency, which is a measure of how closely related a set of items are as a group in measuring a dimension or characteristic. We used Cronbach's alpha to measure the internal consistency of the summary scores within the various survey dimensions. Table 1 illustrates the alpha coefficients for each of the summary scores within the *Faculty Forward Engagement Survey*.

Table 1: Summary Score's Cronbach's Alpha

Summary Score Name	Cronbach's Alpha
My Job (Q11a-d)	α = .883
Focus on Medical School Mission (Q12a-e)	α = .887
Workplace Culture (Q13a-d)	α = .897
Department Governance (Q15a-e and Q16a-c)	α = .925
Medical School Governance (Q17a-e and Q18a-c)	α = .944
Relationship with Supervisor (Q19a-d)	α = .935
Growth Opportunities (Q26a-c and Q27[all parts])	α = .886
Promotion Equality (Q28a-d)	α = .859
Collegiality and Collaboration (Q29a-f and Q30a-c)	α = .923
Compensation and Benefits (Q31a-e)	α = .438
Faculty Recruitment and Retention (Q32a-d and Q33a-d)	α = .922
Clinical Practice (Q36a-g)	α = .872

Survey Administration and Reporting

ICF Macro, an independent consulting firm, was selected by the AAMC's Faculty Forward program to conduct the survey administration and prepare the data reports for each institution. To complete these tasks, each school provided a database with names and e-mail addresses of eligible full-time and part-time faculty members to include in the survey. Nearly 15,000 faculty were included in the combined survey database.

Each participating institution was responsible for initiating a variety of pre-survey communications to its faculty members notifying them of the survey and encouraging their participation. Faculty Forward

schools utilized a number of different communication techniques prior to the administration to build momentum for participation. Approximately one week prior to the survey launch, ICF sent a pre-notification e-mail about the survey from an administrator within their institution. Next, ICF sent each faculty an invitation to participate which contained a unique and confidential web survey link. Over the course of the survey administration, ICF sent up to five reminder e-mails to faculty members who had not yet responded. Each communication from ICF was sent from the email address, facultyforwardsurvey@icfi.com. Additionally, some individual institutions elected to send additional internal reminders to boost response rates.

One school volunteered to pilot the survey to ensure all systems were functioning properly before the general roll-out. ICF emailed the pre-notifications, followed by the initial invitations for the pilot school on October 4, 2011. Following the general pre-notification, ICF sent initial invitations to all faculty in the remaining schools on October 18, 2011. The survey was originally scheduled to conclude on November 22, 2011, but given the option of extending the fielding to increase response rate, all but one school elected to extend fielding through December 6, 2011. The overall response rate for all schools was 62%. Response rates for individual schools ranged between 48% and 84%.

AAMC and ICF designed universal templates in Microsoft Word and Excel for the Institutional Data Reports. ICF generated these reports by populating the templates with links to data tables produced using an automated process built using software designed for statistical analysis (SAS).

Data Conditioning and Population Data

Data Conditioning
Once the survey fielding was complete, ICF and AAMC followed a thorough data conditioning process to determine a respondent's eligibility in the inclusion of the final database and to ensure that the data contained in the final database was accurate. First, we identified all valid, survey-eligible respondents. Responses to the survey were included in the reports if the respondent answered at least one question past Q7 (i.e., at least one core survey item past the demographics) and had a valid appointment status (i.e., full-time or part-time).

We then compared respondents' survey data to information provided by institutions within their faculty databases on demographic variables, such as gender, race, and department. In cases of discrepancies, we erred on the side of accepting respondent-provided data, but carefully reviewed individual records to ensure data accuracy. If respondents did not provide demographic information, we used institution-provided information for reporting. Additionally, we removed any personally-identifying information provided by the respondent within open-ended items by substituting text with less descriptive information (e.g., changing a department name to "[my department]") or by redacting the text entirely (with "[...]") depending on the content.

Finally, a weighting scale was developed for each institution to adjust for the under- or over-representation in the dataset of subgroups defined by gender, race/ethnicity (i.e., majority and minority), and a combination of department type and degree information (i.e., faculty in basic science departments; faculty in clinical departments with MDs, MD/PhDs, or DOs; and faculty in clinical departments with PhDs or other degrees). Applying these weights to the data allowed the relative proportions of subgroups in each institution's dataset to reflect more accurately the proportions in that institution's actual faculty population.

Table 2: Statistical Weighting Values for Your Institution

Demographic Variable			Applied Weight
Gender	Race/Ethnicity	Department Type/Degree	Weight Value
Male	Majority	Basic Science	1.26
		Clinical MD	0.91
		Clinical PhD/Other	1.11
	Minority	Basic Science	1.98
		Clinical MD	1.11
		Clinical PhD/Other	0.87
Female	Majority	Basic Science	0.98
		Clinical MD	0.86
		Clinical PhD/Other	1.20
	Minority	Basic Science	0.87
		Clinical MD	0.87
		Clinical PhD/Other	0.92

Faculty Respondent Characteristics

The survey population was determined by a database of medical school faculty that institutions provided to Faculty Forward. Survey respondents were defined using the protocols described in the "Data Conditioning" section of this Extended Methodology. Table 3 displays the demographic characteristics of the final survey response sample. Please refer to Table 4 of the Executive Summary to see response rate information across the demographics on which we collected population data.

Table 3: Faculty Respondent Characteristics

	Your Institution		Your Peer Group		All Faculty Forward Institutions	
	Number of Survey Respondents	Percent Within Sample	Number of Survey Respondents	Percent within Sample	Number of Survey Respondents	Percent within Sample
All Faculty	**777**	**100.0%**	**4604**	**100.0%**	**9600**	**100.0%**
Appointment Status						
Full-Time	732	94.2%	4306	93.5%	8926	93.0%
Part-Time	45	5.8%	298	6.5%	674	7.0%
Department Type						
Basic Science	114	14.7%	553	12.0%	1251	13.0%
Clinical	663	85.3%	4051	88.0%	8349	87.0%
Rank						
Senior (i.e., Full or Associate)	434	56.5%	2466	56.1%	5152	55.2%
Junior (i.e., Assistant)	334	43.5%	1928	43.9%	4176	44.8%
Gender						
Male	431	55.5%	2872	62.4%	5960	62.1%
Female	346	44.5%	1732	37.6%	3640	37.9%
Race/Ethnicity						
Majority (i.e., White or Asian)	725	93.3%	4266	92.7%	8849	92.2%
Minority (i.e., all other)	52	6.7%	338	7.3%	750	7.8%
Administrative Title						
Administrative Title	303	40.3%	1841	41.2%	3945	42.4%
Non-Administrative Title	448	59.7%	2626	58.8%	5362	57.6%
Department Type/Degree						
Basic Science	114	14.7%	553	12.0%	1251	13.0%
Clinical MD	466	60.0%	3122	67.8%	6509	67.8%
Clinical PhD/Other	197	25.4%	929	20.2%	1840	19.2%

	Your Institution		Your Peer Group		All Faculty Forward Institutions	
	Number of Survey Respondents	Percent Within Sample	Number of Survey Respondents	Percent within Sample	Number of Survey Respondents	Percent within Sample
First Appointment						
≤ 5 years ago	285	36.9%	1790	39.2%	3762	39.6%
6-15 years ago	274	35.5%	1569	34.4%	3197	33.6%
> 15 years ago	213	27.6%	1206	26.4%	2551	26.8%
Tenure Status						
On tenure track/Tenured	349	47.4%	1596	43.8%	3602	44.8%
Not on tenure track	387	52.6%	2044	56.2%	4447	55.2%
Formal Mentoring Status						
Mentoring	227	32.8%	1396	34.1%	2598	30.4%
No Mentoring	465	67.2%	2696	65.9%	5949	69.6%
Active in Clinical Care						
Active Clinical	497	71.1%	2961	69.9%	6266	70.4%
Not Active	202	28.9%	1277	30.1%	2639	29.6%
Age						
Under 28	n<5	n<5	6	0.2%	11	0.1%
28-45	266	41.4%	1704	43.9%	3370	41.9%
46-65	340	53.0%	1963	50.5%	4179	51.9%
Over 65	35	5.5%	211	5.4%	490	6.1%

Summary Score Calculations

Faculty Forward created summary scores representing conceptually-related items with compatible scales (e.g., all agreement response scales) within the survey dimensions. Table 2 of the Executive Summary displays the items that compose these different summary scores.

As an example within your report, Table 10 of the Executive Summary with fabricated data below shows the "My Job" summary score for your institution across consolidated response scales and as means.

Table 10: My Job

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean	2009 Mean
I am satisfied with my autonomy at work	467	68%	17%	15%	3.88	3.80*
My day-to-day activities give me a sense of accomplishment	457	69%	17%	14%	3.91	
My role here is clear to me	464	67%	18%	14%	3.83	
I am usually willing to give more than what is expected of me in my job	470	56%	19%	25%	3.51	
MY JOB SUMMARY SCORE		**65%**	**18%**	**17%**	**3.78**	

Q11: Please indicate your level of agreement or disagreement with the following statements.
* Note: This item was rated on a satisfaction scale rather than an agreement scale in 2009.

A frequency summary score is calculated by summing the total number of respondents for a response category (e.g., the top two response options) for each item in the given dimension and dividing by the total number of respondents for each item, excluding response options like "I don't know" and "Not applicable" and missing values. Using these fabricated data, the percentage of faculty with "Strongly agree" or "Agree" responses across the four items is calculated thusly:

Total number of faculty choosing "Strongly agree" or "Agree" (not shown in Table) →

Total number of faculty respondents →

$$\frac{318 + 315 + 311 + 263}{467 + 457 + 464 + 470} = 65\%$$

Summary score means are calculated by dividing the sum of the item means adjusted for sample size by the number of total responses. Using the fabricated data from Table 10 above, the mean of the summary score is calculated in this manner:

Total sum of item means adjusted for sample size →

Total number of faculty respondents →

$$\frac{(467*3.88)+(457*3.91)+(464*3.83)+(470*3.51)}{467 + 457 + 464 + 470}$$

Quintile Calculations

Prior to survey fielding, your institution selected four other medical schools from the 2011-2012 Faculty Forward cohort to be used as a peer group for benchmarking. In addition to displaying the frequencies and means of all items for your peer group and the entire cohort for benchmarking purposes, we also present quintile comparisons to show your institution's percentile placement within these comparison groups. Numerals represent the following quintile placement of your institution within the comparison groups:

| **1:** 0-20% | **2:** 21-40% | **3:** 41-60% | **4:** 61-80% | **5:** 81-100% |

For agreement- and satisfaction-scale items, your quintile placement is calculated from the group's median of the top two response options (e.g., the median percent agreement within peers or the cohort). The following table shows an example of how quintiles would be calculated for peer comparisons using fabricated data—such that the top two response options are calculated into percentiles and then condensed into quintiles.

School	Top Two	Difference from Median	Percentile	Quintile
Peer A	70.0	-10.0	0	1
Peer B	75.0	-5.0	25	2
Peer C	80.0	0.0	50	3
Your School	85.0	+5.0	75	4
Peer D	90.0	+10.0	100	5

As an example within your report, the following selection from Table 28 of the Executive Summary with fabricated data shows the top two response options for your institution, your peer group, and the entire cohort. The "Quint" columns display your institution's quintile placement within your peer group and the cohort. Note that the percent of faculty choosing the "Top Two" response options (a) does <u>not</u> include your institution within *peers* and (b) does include your institution within the entire *cohort*.

Table 28: Item Comparison to Peer Group and All Faculty Forward Institutions

	You	Peers		Cohort	
	Top two	Top two	Quint	Top two	Quint
11c. My role here is clear to me	71%	63%	5	71%	3

As another example, the following selection from the Comprehensive Data Report with fabricated data displays the top two response options—broken out by "Strongly agree" and "Agree"—within the "Frequency Distribution" section and your institution's quintile placement within your peer group and the cohort in the "Benchmark" section. The "Median" column displays the median percent agreement within your peers and the cohort from which the quintiles were calculated.

Q11c. My role here is clear to me

	Benchmark		Frequency Distribution											
	Top two		Strongly agree		Agree		Neither agree nor disagree		Disagree		Strongly disagree		I don't know	
	Quint	Median	n	%	n	%	n	%	n	%	n	%	n	%
You			125	25.0	230	46.0	65	13.0	60	12.0	10	2.0	10	2.0
Peers	5	65.5	550	22.0	1025	41.0	425	17.0	350	14.0	100	4.0	50	2.0
Cohort	3	71.5	2700	27.0	4400	44.0	1100	11.0	1300	13.0	200	2.0	300	3.0

Your "Top Two" percent is 25.0 + 46.0 = 71.0

Median within comparison groups from which quintiles were calculated

Your quintile placement:
Quintile 5 = Among the highest scores within your peer group
Quintile 3 = At or near the median of the entire cohort

Faculty Forward
Engagement Survey Items

[Landing Page]

Welcome to the 2011 AAMC Faculty Forward Engagement Survey!

On behalf of your institution, the Association of American Medical Colleges' (AAMC) Faculty Forward program invites your participation in the Faculty Forward Engagement Survey. By using data collected through this survey to enhance programs and policies at your institution, Faculty Forward participating schools expand their understanding of what makes medical schools and teaching hospitals great places to work.

Your individual responses to survey questions will be kept confidential by the AAMC and its survey contractor, ICF Macro. Results will be reported to your institution only in aggregate form, except for your open-ended comments, which will be sanitized to remove identifying text prior to release to your institution.

Your participation is voluntary. You also may skip any particular question or discontinue the survey at any time. The AAMC will maintain your privacy in all published and written data resulting from the study. Neither the AAMC nor ICF Macro will use your name or email address for any other purposes.

If you experience any technical issues accessing this survey or wish to withdraw from this study, please contact the ICF Macro dedicated Help Desk at 1-877-364-0822 Monday-Friday, 9:00am – 8:00pm EST or email facultyforwardhelp@icfi.com. If you have any questions about the Faculty Forward Engagement Survey research efforts, please contact Faculty Forward at facultyforward@aamc.org. If you have any questions or concerns about the confidentiality of this survey or your rights as a participant, please contact the AAMC Human Subjects Research Protection program at hsrppadministrator@aamc.org.

-------------//PAGE BREAK//

Instructions:
Please read the following instructions before beginning this survey.

MOVING FORWARD:
Click on the NEXT button located at the bottom of the page to save your responses and continue to the next page.

MOVING BACK:
Use the PREVIOUS button located at the bottom of the page to view your responses on a previous page. You may change your answers to previously entered responses.

Do not use the BACK button of your browser to return to the previous page. Using your browser's BACK button may cause you to exit survey. Should this occur, you will need to wait 10 minutes to re-access the survey using the link provided in your email invitation.

SAVING AND CONTINUING LATER:
You may exit the survey at any time by clicking SAVE AND CONTINUE LATER at the bottom of the page. You may re-enter the survey where you left off by using the URL provided in your invitation. If you close your browser without clicking SAVE AND CONTINUE LATER, the survey will automatically halt and you will need to wait 10 minutes to re-access the survey. **If you accidentally exit the survey, your previous responses will be saved on all but the page you exited upon.**

DEFINING KEY WORDS:
A number of key words within the survey are defined to enhance your understanding of the questions presented. By placing your cursor over words in bold, bright blue text, you may view the definitions of these terms.

Your Current Appointment

//ASK ALL//

Q1.   **What is your current appointment status?**

- $\bigcirc_1$ Full-time faculty
- $\bigcirc_2$ Part-time faculty
- $\bigcirc_3$ Volunteer faculty
- $\bigcirc_4$ Emeritus faculty
- $\bigcirc_5$ Other (Please specify [Q1_oth]_____) **// DO NOT FORCE SPECIFY RESPONSE//**
- *88   NO ANSWER //HIDDEN//

//ASK ALL//

Q2.   **What is your current academic position?**

- $\bigcirc_1$ Professor (including titles such as Research Professor, Clinical Professor, etc.)
- $\bigcirc_2$ Associate Professor (including titles such as Research Associate Professor, Clinical Associate Professor, etc.)
- $\bigcirc_3$ Assistant Professor (including titles such as Research Assistant Professor, Clinical Assistant Professor, etc.)
- $\bigcirc_4$ Instructor or Lecturer
- $\bigcirc_5$ Other (Please specify [Q2_oth]_____)
- *88   NO ANSWER //HIDDEN//

//ASK ALL//

Q3.   **In which department do you currently have your <u>primary</u> appointment?**

- $\bigcirc_1$ Basic science department in the medical school
- $\bigcirc_2$ Clinical department in the medical school
- $\bigcirc_3$ Other (Please specify [Q3_oth] _____)
- $\bigcirc_9$ I do not wish to identify
- $\bigcirc_{98}$ Not Applicable

- *88   NO ANSWER //HIDDEN//

Q3_unc.   **Please indicate the department in which you have your <u>primary</u> appointment.**

- O_1 Allied Health Sciences
- O_2 Anesthesiology
- O_3 Biochemistry & Biophysics
- O_4 Biomedical Engineering
- O_5 Cell & Developmental Biology
- O_6 Cell & Molecular Physiology
- O_7 Dermatology: Mohs Surgery
- O_8 Dermatology: Non-Mohs Surgery
- O_9 Emergency Medicine
- O_{10} Family Medicine
- O_{11} Genetics
- O_{12} Medicine: Allergy/Immunology
- O_{13} Medicine: Cardiology
- O_{14} Medicine: Critical/Intensive Care
- O_{15} Medicine: Endocrinology
- O_{16} Medicine: Gastroenterology/Hepatology
- O_{17} Medicine: General Internal Medicine
- O_{18} Medicine: Geriatrics
- O_{19} Medicine: Hematology/Oncology
- O_{20} Medicine: Infectious Diseases
- O_{21} Medicine: Nephrology
- O_{22} Medicine: Other
- O_{23} Medicine: Pulmonary
- O_{24} Medicine: Rheumatology
- O_{25} Microbiology & Immunology
- O_{26} Neurology
- O_{27} Neurosurgery
- O_{28} OB/GYN: General
- O_{29} OB/GYN: Gynecologic Oncology
- O_{30} OB/GYN: Maternal & Fetal
- O_{31} OB/GYN: Other
- O_{32} OB/GYN: Reproductive Endocrinology
- O_{33} Ophthalmology
- O_{34} Orthopaedics
- O_{35} Otolaryngology
- O_{36} Pathology & Laboratory Medicine: Anatomic Pathology
- O_{37} Pathology & Laboratory Medicine: Clinical Pathology
- O_{38} Pathology & Laboratory Medicine: Other
- O_{39} Pediatrics: Allergy/Immunology
- O_{40} Pediatrics: Critical/Intensive Care
- O_{41} Pediatrics: Endocrinology
- O_{42} Pediatrics: Gastroenterology/Hepatology
- O_{43} Pediatrics: General Pediatrics
- O_{44} Pediatrics: Genetics-Peds
- O_{45} Pediatrics: Hematology/Oncology
- O_{46} Pediatrics: Infectious Diseases
- O_{47} Pediatrics: Neonatology
- O_{48} Pediatrics: Nephrology
- O_{49} Pediatrics: Other
- O_{50} Pediatrics: Pediatric Cardiology
- O_{51} Pediatrics: Pulmonary
- O_{52} Pediatrics: Rheumatology
- O_{53} Pharmacology
- O_{54} Physical Medicine & Rehabilitation
- O_{55} Psychiatry

○56　　Psychiatry: Adult
○57　　Psychiatry: Child/Adolescent
○58　　Psychiatry: TEACCH
○59　　Radiation Oncology
○60　　Radiology: Interventional
○61　　Radiology: Non-Interventional
○62　　Radiology: Nuclear Medicine
○63　　Radiology: Other
○64　　Social Medicine
○65　　Surgery: General Surgery
○66　　Surgery: Other Surgery
○67　　Surgery: Pediatric Surgery
○68　　Surgery: Plastic Surgery
○69　　Surgery: Thoracic & Cardiovascular Surgery
○70　　Surgery: Transplant Surgery
○71　　Surgery: Trauma/Critical Care
○72　　Surgery: Urology
○73　　Surgery: Vascular Surgery

Q4. **What is your highest earned academic degree? Please check only one response.**
M.D. includes foreign equivalents

- ○₁ M.D.
- ○₂ Ph.D. or other health doctorate
- ○₃ M.D. and Ph.D.
- ○₄ M.D. and other degree (M.D./M.P.H.)
- ○₅ D.O.
- ○₆ Other (Please specify **[Q4_oth]**_____)
  *88 NO ANSWER //HIDDEN//

//ASK ALL//
Q5. **In what academic year did you receive your first faculty appointment at this medical school?**

- ○₁ Within this academic year
- ○₂ 1-5 years ago
- ○₃ 6-10 years ago
- ○₄ 11-15
- ○₅ 16-20 years ago
- ○₆ More than 20 years ago
- ○₇ Other (Please specify **[Q5_oth]**_____)
  *88 NO ANSWER //HIDDEN//

//ASK ALL//
Q6. **What is your current tenure status at this medical school?**
- ○₁ On tenure track, but not tenured
- ○₂ Tenured
- ○₃ Not on tenure track, although medical school has a tenure system
- ○₄ No tenure at this medical school
- ○₉ I'm not sure
  *88 NO ANSWER //HIDDEN//

//ASK ALL//
Q7. **Do you currently hold any of the following administrative titles? Please check all that apply.**

- ○₁ School of Medicine Dean, Associate Dean, Assistant Dean, Vice Dean
- ○₂ Division Chief
- ○₃ Department Chair
- ○₄ Center Director
- ○₅ Other administrative title (Please specify **[Q7_oth]**_____)
- ○₉ I do not hold an administrative position **//EXCLUSIVE CHOICE//**
  *88 NO ANSWER //HIDDEN//

The Nature of Your Work

//ASK ALL//
//RANGE 0-168//
//VALIDATE VALUES >90 WITH: "You entered xx hours. If this is correct, click next to continue, otherwise please correct your response."//

Q8.   **In an average calendar week, how many total hours do you spend on all work activities? Please enter a whole numbered response.**

_____ Total work hours per week //REQUIRE WHOLE NUMBER DURING VALIDATION//
Q8_codes= 888   NO ANSWER //HIDDEN//

//ASK ALL//

Q9.   **Please indicate the approximate percentage of <u>time/effort</u> you currently spend on each activity. Your responses must add up to 100 percent. Please enter whole number responses.**

Q9_A.	*Teaching/Education (include teaching, grading course preparation, developing new curricula, advising or supervising students or residents, working with student or resident groups)*	___
Q9_B.	*Research/Scholarship (include research, reviewing or preparing articles or books, attending or preparing for professional meetings or conferences, reviewing or writing proposals, seeking outside funding)*	___
Q9_C.	*Patient Care/Client Services (include medical service, counseling patients or families, administrative tasks associated with clinical service)*	___
Q9_D.	*Administration/Institutional Service (include university, medical school, health system, faculty practice or department administrative duties, meetings, committee work)*	___
CUMULATIVE TOTAL PERCENTAGE OF TIME		//SHOW RUNNING TOTAL, VALIDATE TO ENSURE 100%//

Q9_A_CODES through Q9_D_CODES: 88=NO ANSWER //HIDDEN//

//ASK ALL//
//88=NO ANSWER (HIDDEN)//

Q10.   **Please rate the percentage of <u>time/effort</u> you currently devote to each of the following activities.**

		Far Too Little	Too Little	About Right	Too Much	Far Too Much	N/A
Q10_A.	*Teaching/Education (include teaching, grading course preparation, developing new curricula, advising or supervising students or residents, working with student or resident groups)*	O₁	O₂	O₃	O₄	O₅	O₉₈
Q10_B.	*Research/Scholarship (include research, reviewing or preparing articles or books, attending or preparing for professional meetings or conferences, reviewing or writing proposals, seeking outside funding)*	O₁	O₂	O₃	O₄	O₅	O₉₈
Q10_C.	*Patient Care/Client Services (include medical service, counseling patients or families, administrative tasks associated with clinical service)*	O₁	O₂	O₃	O₄	O₅	O₉₈
Q10_D.	*Administration/Institutional Service (include university, medical school, health system, faculty practice or department administrative duties, meetings, committee work)*	O₁	O₂	O₃	O₄	O₅	O₉₈

//ASK ALL//
//88=NO ANSWER (HIDDEN)//

Q11.   **Please indicate your level of agreement or disagreement with the following statements.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	I don't know
Q11_A_.	I am satisfied with my autonomy at work	O_1	O_2	O_3	O_4	O_5	O_9
Q11_B_.	My day-to-day activities give me a sense of accomplishment	O_1	O_2	O_3	O_4	O_5	O_9
Q11_C_.	My role here is clear to me	O_1	O_2	O_3	O_4	O_5	O_9
Q11_D_.	I am usually willing to give more than what is expected of me in my job	O_1	O_2	O_3	O_4	O_5	O_9

Focus on Medical School Mission

//ASK ALL//
//88=NO ANSWER (HIDDEN)//

Q12.   **Please indicate your level of agreement or disagreement with the following statements.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	I don't know
Q12_A.	My medical school's mission is clear	O_1	O_2	O_3	O_4	O_5	O_9
Q12_B.	Overall, my medical school is accomplishing its mission	O_1	O_2	O_3	O_4	O_5	O_9
Q12_C.	The stated values of the medical school match the actual values of the institution	O_1	O_2	O_3	O_4	O_5	O_9
Q12_D.	It is clear how my day-to-day activities support the medical school's mission	O_1	O_2	O_3	O_4	O_5	O_9
Q12_E.	Overall, my school fosters teaching excellence	O_1	O_2	O_3	O_4	O_5	O_9

**ROLL-OVER DEFINITION FOR Q12E: Teaching Excellence- process by which students are motivated to learn in ways that affect positive influence in their lives; the teacher contributes positively to the learning environment through exceptional energy, a keen interest in students, and skilled abilities as a subject matter expert, a pedagogical expert, an expert communicator, a student-centered mentor, and a systematic assessor.

//ASK ALL//
//88=NO ANSWER (HIDDEN)//

Q13. **I feel that the workplace culture at this medical school cultivates…**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	I don't know
Q13_A.	Collegiality	O_1	O_2	O_3	O_4	O_5	O_9
Q13_B.	Diversity	O_1	O_2	O_3	O_4	O_5	O_9
Q13_C.	Innovation	O_1	O_2	O_3	O_4	O_5	O_9
Q13_D.	Excellence in performance	O_1	O_2	O_3	O_4	O_5	O_9

**ROLL-OVER DEFINITIONS:
Collegiality- the relationship between colleagues that is characterized by equal respect, shared value, and cooperation.
Diversity – value that embodies inclusiveness, mutual respect and multiple perspectives, specifically with regard to human differences such as socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, and age.
Innovation- the creation and implementation of new processes, products, services and methods of delivery, which result in significant improvements in outcomes, efficiency, effectiveness or quality.
Excellence in performance- process of operation comprised of sustained improvements or efficiencies that contributes to the overall improved success of the organization illustrated in measurable or experiential outcomes.

//ASK ALL//
//88=NO ANSWER (HIDDEN)//

Q14. **Please rate the amount of value that you believe your <u>medical school</u> and <u>department</u> place on each of the following mission areas.**

Teaching/education (include teaching, grading, course preparation, developing new curricula, advising or supervising students or residents, working with student or resident groups)

		Far Too Little	Too Little	About Right	Too Much	Far Too Much	N/A
Q14 _A_. **Teaching/Education** *(include teaching, grading, course preparation, developing new curricula, advising or supervising students or residents, working with student or resident groups)*	Medical School	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_{98}$
Q14 _B_. **Teaching/Education** *(include teaching, grading, course preparation, developing new curricula, advising or supervising students or residents, working with student or resident groups)*	Department	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_{98}$
Q14 _C_. **Research/Scholarship** *(include research, reviewing or preparing articles or books, attending or preparing for professional meetings or conferences, reviewing or writing proposals, seeking outside funding)*	Medical School	$\bigcirc 1$	$\bigcirc 2$	$\bigcirc 3$	$\bigcirc 4$	$\bigcirc 5$	$\bigcirc 98$
Q14 _D_. **Research/Scholarship** *(include research, reviewing or preparing articles or books, attending or preparing for professional meetings or conferences, reviewing or writing proposals, seeking outside funding)*	Department	$\bigcirc 1$	$\bigcirc 2$	$\bigcirc 3$	$\bigcirc 4$	$\bigcirc 5$	$\bigcirc 98$
Q14 _E_. **Patient Care/Client Services** *(include medical service, counseling patients or families, administrative tasks associated with clinical service)*	Medical School	$\bigcirc 1$	$\bigcirc 2$	$\bigcirc 3$	$\bigcirc 4$	$\bigcirc 5$	$\bigcirc 98$
Q14 _F_. **Patient Care/Client Services** *(include medical service, counseling patients or families, administrative tasks associated with clinical service)*	Department	$\bigcirc 1$	$\bigcirc 2$	$\bigcirc 3$	$\bigcirc 4$	$\bigcirc 5$	$\bigcirc 98$
Q14 _G_. **Administration/Institutional Service** *(include university, medical school, health system, faculty practice or department administrative duties, meetings, committee work)*	Medical School	$\bigcirc 1$	$\bigcirc 2$	$\bigcirc 3$	$\bigcirc 4$	$\bigcirc 5$	$\bigcirc 98$
Q14 _H_. **Administration/Institutional Service** *(include university, medical school, health system, faculty practice or department administrative duties, meetings, committee work)*	Department	$\bigcirc 1$	$\bigcirc 2$	$\bigcirc 3$	$\bigcirc 4$	$\bigcirc 5$	$\bigcirc 98$

Departmental Governance

Q15. **Please indicate your level of agreement or disagreement with the following statements.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	I don't know
Q15_A_.	There is sufficient communication from the department chair's office to the faculty about the department	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	
Q15_B_.	My department does a good job explaining departmental finances to the faculty	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	
Q15_C_.	The department chair's priorities for the department are clear	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_9$
Q15_D_.	The chair's priorities for the department are reasonable	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_9$
Q15_E_.	In general, the department chair's priorities are aligned with the dean's priorities	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_9$

Q16. **Please indicate your level of agreement or disagreement with the following statements.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	I don't know
Q16_A_.	The pace of decision making in the department is reasonable	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_9$
Q16_B_.	There are sufficient opportunities for faculty participation in the governance of this department	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_9$
Q16_C_.	The department chair sets a good example to reflect our medical school's values	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_9$

Medical School Governance

Q17. **Please indicate your level of agreement or disagreement with the following statements.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	I don't know
Q17_A_.	There is sufficient communication from the dean's office to the faculty about the medical school	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	
Q17_B_.	Senior leadership does a good job explaining medical school finances to the faculty	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	
Q17_C_.	The dean's priorities for the medical school are clear	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_9$
Q17_D_.	The dean's priorities for the medical school are reasonable	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_9$
Q17_E_.	In general, the dean's priorities are aligned with the medical school's mission	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_9$

Q18. **Please indicate your level of agreement or disagreement with the following statements.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	I don't know
Q18_A_.	The pace of decision making in the dean's office is reasonable	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_9$
Q18_B_.	There are sufficient opportunities for faculty participation in the governance of this medical school	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_9$
Q18_C_.	Faculty can express their opinions about the medical school without fear of retribution	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_9$

Relationship with Supervisor

Q19. **Please indicate your level of agreement or disagreement with the following statements about the supervisor who completes your performance review.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Q19_A_.	I feel appreciated by my supervisor	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$
Q19_B_.	My supervisor sets a good example to reflect this medical school's values	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$
Q19_C_.	My supervisor actively encourages my career development	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$
Q19_D_.	My supervisor listens to what I have to say	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$

Mentoring and Feedback

//ASK ALL//

Q20. **Do you receive formal mentoring (that is to say, do you have a formal agreement with a colleague to provide ongoing career guidance and advice)?**

○₁ Yes
○₀ No
○₉ I don't know [SKIP TO Q23]
   *88   NO ANSWER //HIDDEN//

//ASK ONLY IF Q20 IS 1 OR 0//

Q21. **Please indicate your level of agreement or disagreement with the following statement.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Q21_A_.	Having a formal mentor at my institution is important to me	○₁	○₂	○₃	○₄	○₅

   *88   NO ANSWER //HIDDEN//

//ASK ONLY IF Q20 IS 1//

Q22. **Please indicate your level of agreement or disagreement with the following statement.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Q22_A_	I am satisfied with the quality of mentoring that I receive	○₁	○₂	○₃	○₄	○₅

   *88   NO ANSWER //HIDDEN//

In this section "unit head" refers to your department chair or division chief, whichever is more applicable to your situation.

//ASK ALL//

Q23. **Do you receive feedback about your performance from your unit head on a regular basis?**

○₁ Yes
○₀ No
   *88   NO ANSWER //HIDDEN//

Q24. **Please indicate your level of agreement or disagreement with the following statement.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Q24_A_.	Receiving regular feedback about my job performance is important to me	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$

Q25. **Please indicate your level of agreement or disagreement with the following statements.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Q25_A_.	The feedback I receive from my unit head is generally useful	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$
Q25_B_.	I am satisfied with how frequently I receive feedback from my unit head	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$

Opportunities for Career and Professional Growth
Q26. **Please indicate your level of agreement or disagreement with the following statements.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	N/A
Q26_A.	Further professional advancement at this medical school is important to me	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_{98}$
Q26_B.	I am satisfied with the pace of my professional advancement at this medical school	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_{98}$
Q26_C.	I am satisfied with my opportunities for professional development at this medical school	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_{98}$

//ASK ALL//
//88=NO ANSWER (HIDDEN)//

Q27. **Please indicate your level of agreement or disagreement with the following statements about several mission areas.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	N/A
Q27 _A_. ***Teaching/Education*** *(include teaching, grading, course preparation, developing new curricula, advising or supervising students or residents, working with student or resident groups)*	To be promoted in rank, what I must do in this mission area is <u>clear</u> to me	○₁	○₂	○₃	○₄	○₅	○₉₈
Q27 _B_. ***Teaching/Education*** *(include teaching, grading, course preparation, developing new curricula, advising or supervising students or residents, working with student or resident groups)*	To be promoted in rank, what I must do in this mission area is <u>reasonable</u> to me	○₁	○₂	○₃	○₄	○₅	○₉₈
Q27 _C_. ***Research/Scholarship*** *(include research, reviewing or preparing articles or books, attending or preparing for professional meetings or conferences, reviewing or writing proposals, seeking outside funding)*	To be promoted in rank, what I must do in this mission area is <u>clear</u> to me	○₁	○₂	○₃	○₄	○₅	○₉₈
Q27 _D_. ***Research/Scholarship*** *(include research, reviewing or preparing articles or books, attending or preparing for professional meetings or conferences, reviewing or writing proposals, seeking outside funding)*	To be promoted in rank, what I must do in this mission area is <u>reasonable</u> to me	○₁	○₂	○₃	○₄	○₅	○₉₈
Q27 _E_. ***Patient Care/Client Services*** *(include medical service, counseling patients or families, administrative tasks associated with clinical service)*	To be promoted in rank, what I must do in this mission area is <u>clear</u> to me	○₁	○₂	○₃	○₄	○₅	○₉₈
Q27 _F_. ***Patient Care/Client Services*** *(include medical service, counseling patients or families, administrative tasks associated with clinical service)*	To be promoted in rank, what I must do in this mission area is <u>reasonable</u> to me	○₁	○₂	○₃	○₄	○₅	○₉₈
Q27 _G_. ***Administration/Institutional Service*** *(include university, medical school, health system, faculty practice or department administrative duties, meetings, committee work)*	To be promoted in rank, what I must do in this mission area is <u>clear</u> to me	○₁	○₂	○₃	○₄	○₅	○₉₈
Q27 _H_. ***Administration/Institutional Service*** *(include university, medical school, health system, faculty practice or department administrative duties, meetings, committee work)*	To be promoted in rank, what I must do in this mission area is <u>reasonable</u> to me	○₁	○₂	○₃	○₄	○₅	○₉₈

Q28. **Please indicate your level of agreement or disagreement with the following statements.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	I don't know
Q28_A_.	At my medical school the criteria for promotion are consistently applied to faculty across comparable positions	○1	○2	○3	○4	○5	○9
Q28_B_.	My medical school offers equal opportunities to all faculty members regardless of gender	○1	○2	○3	○4	○5	○9
Q28_C_.	My medical school offers equal opportunities to all faculty members regardless of race/ethnicity	○1	○2	○3	○4	○5	○9
Q28_D_.	My medical school offers equal opportunities to all faculty members regardless of sexual orientation	○1	○2	○3	○4	○5	○9

ROLL-OVER DEFINITION: Comparable positions- positions similar in institutional rank and allotment of FTE status.

Collegiality and Collaboration

Q29. **Please indicate your level of agreement or disagreement with the following aspects of your workplace culture.**

I am satisfied with:

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Q29_A_.	The quality of personal interaction I have with departmental colleagues	○1	○2	○3	○4	○5
Q29_B_.	The quality of professional interaction I have with departmental colleagues	○1	○2	○3	○4	○5
Q29_C_.	How well I "fit" (i.e., my sense of belonging) in my department	○1	○2	○3	○4	○5
Q29_D_.	How well I "fit" (i.e., my sense of belonging) in my medical school	○1	○2	○3	○4	○5
Q29_E_.	The intellectual vitality in my department	○1	○2	○3	○4	○5
Q29_F_.	The intellectual vitality in my medical school	○1	○2	○3	○4	○5

ROLL-OVER DEFINITION: Intellectual vitality- sense of passion and energy in the pursuit of intellectual inquiry and learning.

Q30. **Please indicate your level of agreement or disagreement with the following statements.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Q30_A_.	My departmental colleagues are respectful of my efforts to balance work and home responsibilities	O_1	O_2	O_3	O_4	O_5
Q30_B_.	The faculty in my department usually get along well together	O_1	O_2	O_3	O_4	O_5
Q30_C_.	I feel appreciated by my departmental colleagues	O_1	O_2	O_3	O_4	O_5

Compensation and Benefits

Q31. **Please indicate your level of <u>satisfaction or dissatisfaction</u> with each of the following aspects of compensation.**

		Very Dissatisfied	Dissatisfied	Neither Satisfied nor Dissatisfied	Satisfied	Very Satisfied	Not Offered by My Institution
Q31_A_.	My overall compensation	O_1	O_2	O_3	O_4	O_5	
Q31_B_.	My incentive-based compensation, such as bonuses	O_1	O_2	O_3	O_4	O_5	O_{99}
Q31_C_.	Health benefits	O_1	O_2	O_3	O_4	O_5	
Q31_D_.	Retirement benefits	O_1	O_2	O_3	O_4	O_5	
Q31_E_.	My overall benefits package	O_1	O_2	O_3	O_4	O_5	

Faculty Recruitment and Retention

//ASK ALL//
//88=NO ANSWER (HIDDEN)//

Q32.   **Please indicate your level of agreement or disagreement with the following statements.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	I don't know
Q32_A_.	My medical school is successful in hiring high quality faculty members	O_1	O_2	O_3	O_4	O_5	O_9
Q32_B_.	My department is successful in hiring high quality faculty members	O_1	O_2	O_3	O_4	O_5	O_9
Q32_C_.	My medical school is successful in retaining high quality faculty members	O_1	O_2	O_3	O_4	O_5	O_9
Q32_D_.	My department is successful in retaining high quality faculty members	O_1	O_2	O_3	O_4	O_5	O_9

//ASK ALL//
//88=NO ANSWER (HIDDEN)//

Q33. **Please indicate your level of agreement or disagreement with the following statements.**

My department is successful in…

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	I don't know
Q33_A_.	Recruiting female faculty members	O_1	O_2	O_3	O_4	O_5	O_9
Q33_B_.	Recruiting racial/ethnic minority faculty members	O_1	O_2	O_3	O_4	O_5	O_9
Q33_C_.	Retaining female faculty members	O_1	O_2	O_3	O_4	O_5	O_9
Q33_D_.	Retaining racial/ethnic minority faculty members	O_1	O_2	O_3	O_4	O_5	O_9

Clinical Practice

//ASK ALL//

Q34.   **Are you actively engaged in the clinical care of patients?**

O_1 Yes
O_0 No [SKIP TO Q38]
    *88   NO ANSWER //HIDDEN//

//ASK ONLY IF Q34 IS 1//

Q35.   **Please identify the location where you spend the most time in your clinical practice. If you divide your time equally among locations, please choose the one location about which you would most like to comment. If your location is not listed, please choose "other."**

//IF INSTITUTION=8 (UNC)//
- ○27   UNC Hospitals Inpatient/Emergency Department
- ○28   UNC Hospital-based clinic (on campus)
- ○29   P&A Clinic (on campus)
- ○30   UNC Hospitals-based clinic (off campus)
- ○31   P&A Clinic (off campus)

- ○68 Other (Please specify [Q35_oth]_____) //programmer, do not force specify response//
    *88   NO ANSWER //HIDDEN//

//ASK IF Q34=1//
//88=NO ANSWER (HIDDEN)//
Q36.   // IF [Q35=1-5 OR (Q35=6 BUT NOT Q35=6 AND Q35_OTH=MISSING)] THEN DISPLAY//
   Please indicate your level of satisfaction or dissatisfaction with the following statements based on the [If q35=1-5, insert response from Q35. If q35=6, insert q35_oth.] **clinical practice location.**

   // IF ([Q35=6 AND Q35_OTH=MISSING] OR Q35=88) THEN DISPLAY//
   Please indicate your level of satisfaction or dissatisfaction with the following statements based on your clinical practice location.

		Very Dissatisfied	Dissatisfied	Neither Satisfied nor Dissatisfied	Satisfied	Very Satisfied	N/A
Q36_A_.	Opportunities for physician input in management or administrative decisions	○1	○2	○3	○4	○5	○98
Q36_B_.	Communication to physicians about this location's financial status	○1	○2	○3	○4	○5	○98
Q36_C_.	The teamwork between physicians and other clinical staff	○1	○2	○3	○4	○5	○98
Q36_D_.	Communication between physicians and senior administrators	○1	○2	○3	○4	○5	○98
Q36_E_.	Location's responsiveness in meeting my requests as a physician	○1	○2	○3	○4	○5	○98
Q36_F_.	My ability to provide a high quality of patient care in this location	○1	○2	○3	○4	○5	○98
Q36_G_.	How well this clinical location functions overall as it relates to patient care	○1	○2	○3	○4	○5	○98

//ASK PT1-PT5 ONLY IF Q1 IS 2 (PART-TIME FACULTY)//

For Part-Time Faculty Only

The following section contains questions for part-time faculty only. These questions are designed to specifically assess the unique experiences of part-time faculty within academic medicine.

//ASK ONLY IF Q1 IS 2 (PART-TIME FACULTY)//

PT1.   **What is your current FTE equivalent (as defined in your contract)?**

[PULL-DOWN BOX WITH .1 to .9]
   *88   NO ANSWER //HIDDEN//

//ASK ONLY IF Q1 IS 2 (PART-TIME FACULTY)//

PT2.   **What are your reasons for working part time? (Check all that apply.)**

☐₁ Dependent children/childcare
☐₂ Family care (i.e., care for elderly or sick relative)
☐₃ Other practice site or other professional position
☐₄ Lifestyle choice/greater work-life balance
☐₅ Retirement/phased retirement
☐₆ Health reasons
☐₇ Workload management
☐₈ Other (Please specify [PT2_oth] _____)
   *88   NO ANSWER //HIDDEN//

PT3. **Please indicate your level of <u>agreement or disagreement</u> with the following statements.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
PT3_A_.	My institution has clear expectations for part-time faculty	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$
PT3_B_.	My institution provides necessary resources for part-time faculty	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$
PT3_C_.	My supervisor is supportive of my part-time arrangement	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$

_codes: 88=NO ANSWER //HIDDEN//

PT4. **Please indicate your level of <u>satisfaction or dissatisfaction</u> with the following activities, given your part-time status.**

		Very Dissatisfied	Dissatisfied	Neither Satisfied nor Dissatisfied	Satisfied	Very Satisfied
PT4_A_.	Current part-time arrangement	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$
PT4_B_.	Ability to meet department or division needs	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$
PT4_C_.	Ability to fulfill job responsibilities (i.e., being able to accomplish what you need to do)	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$
PT4_D_.	Opportunities for advancement	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$
PT4_E_.	Ability to manage workload	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$
PT4_F_.	Access to professional development opportunities	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$
PT4_G_.	My protected time for certain activities (e.g., research, administration)	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$
PT4_H_.	Ability to return to or obtain a full-time position, if desired	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$

**ROLL-OVER DEFINITION: Current part-time arrangement- overall satisfaction with your current part-time arrangement.
_codes: 88=NO ANSWER //HIDDEN//

Global Satisfaction

Q37. **Finally, we ask you to make some overall assessments about your department and your medical school as a place to work.**

		Very Dissatisfied	Dissatisfied	Neither Satisfied nor Dissatisfied	Satisfied	Very Satisfied
Q37_A_.	All things considered, how satisfied or dissatisfied are you with your **<u>department</u>** as a place to work?	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$
Q37_B_.	All things considered, how satisfied or dissatisfied are you with your **<u>medical school</u>** as a place to work?	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$

//ASK ALL//
Q38.   **Do you plan to retire in the next 1-2 years?**

- ○₁ Yes [SKIP TO Q41]
- ○₀ No
- ○₉ I don't know
    - ***88   NO ANSWER //HIDDEN//**

//ASK ONLY IF Q38 IS 0, 9 OR 88//
Q39.   **Do you plan to leave this medical school in the next 1-2 years?**

- ○₁ Yes, I am seriously considering leaving this medical school in the next 1-2 years
- ○₂ No, I plan on staying for at least that long [SKIP TO Q41]
- ○₉ I don't know
    - ***88   NO ANSWER //HIDDEN//**

//ASK ONLY IF Q39=1, 9 OR 88//
Q40.   **Do you plan to leave academic medicine in the next 1-2 years?**

- ○₁ Yes
- ○₂ No
- ○₉ Not sure
    - ***88   NO ANSWER //HIDDEN//**

//ASK ALL//
//88=NO ANSWER (HIDDEN)//
Q41.   **Please indicate your level of agreement or disagreement with the following statement.**

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	I'm Not Sure
Q41_A_.	If I had it to do all over, I would again choose to work at this medical school	○₁	○₂	○₃	○₄	○₅	○₉

Demographic Information

//ASK ALL//

Q42. **What is your sex?**

○₀ Male
○₁ Female
○₉ I do not wish to identify
   *88   NO ANSWER //HIDDEN//

//ASK ALL//

Q43. **How do you self-identify? Please select all that apply:**

☐ Q431 Hispanic, Latino, or of Spanish origin
☐ Q432 American Indian or Alaska Native
☐ Q433 Asian
☐ Q434 Black or African American
☐ Q435 Native Hawaiian or other Pacific Islander
☐ Q436 White
☐ Q437 Other (Please specify [Q43_oth] _____)
○ Q438 I do not wish to identify //VALIDATEIF 9 AND ANOTHER CODE SELECTED //
   *Q439   NO ANSWER //HIDDEN//

//ASK ALL//

Q44. **What is your age group?**

○₁ Under 28 years old
○₂ 28-45 years old
○₃ 46-65 years old
○₄ Over 65 years old
○₉ I do not wish to identify
   *88   NO ANSWER //HIDDEN//

Suggestions for Improvement

//ASK ALL//

Q45. **Please use the space below to tell us the number one thing that you feel your <u>medical school</u> could do to improve the workplace.**

[OPEN END] //2,000 CHARACTERS//
   *88   NO ANSWER //HIDDEN//

//ASK ALL//

Q46. **Please use the space below to tell us the number one thing that you feel your <u>department</u> could do to improve the workplace.**

[OPEN END] //2,000 CHARACTERS//
   *88   NO ANSWER //HIDDEN//

Questions Provided by Your Institution

University of North Carolina at Chapel Hill School of Medicine

C_unc1. Please indicate your level of agreement or disagreement with the following statements about UNC SOM:

		Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	I don't know
C_unc1_A_.	The organizational structure within the dean's office is clear.	1	2	3	4	5	9
C_unc1_B_.	The decision making processes within the dean's office are clear.	1	2	3	4	5	9
C_unc1_C_.	Diversity is recognized within the medical school as a critical component of institutional excellence.	1	2	3	4	5	9
C_unc1_D_.	The medical school is actively promoting the development of a positive workplace.	1	2	3	4	5	9
C_unc1_E_.	The medical school is actively promoting the development of a positive learning environment.	1	2	3	4	5	9

C_unc2. Please indicate your level of agreement or disagreement with the following statements about research at UNC SOM:

		Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	I don't know
C_unc2_A_.	The School of Medicine is well-positioned to lead nationally in academic medical research.	1	2	3	4	5	9
C_unc2_B_.	SOM faculty have access to cutting-edge technology.	1	2	3	4	5	9
C_unc2_C_.	SOM faculty have access to cutting-edge research facilities.	1	2	3	4	5	9
C_unc2_D_.	The School of Medicine research support offices do a good job of facilitating research at UNC.	1	2	3	4	5	9

-------------//PAGE BREAK//

C_unc3. How often do you form research collaborations with faculty outside your own department?
- 1 Not at all
- 2 Seldom
- 3 Occasionally
- 4 Frequently
- 9 Not applicable(e.g., to my faculty track)

C_unc4. To what extent do you or have you interacted with the TraCS Institute (NIH's Clinical and Translational Sciences Award at UNC)?
- $\bigcirc_1$ Not at all
- $\bigcirc_2$ Seldom
- $\bigcirc_3$ Occasionally
- $\bigcirc_4$ Frequently
- $\bigcirc_9$ Not applicable

C_unc5. Please indicate your level of agreement or disagreement with the following statements about clinical care at UNC SOM:

		Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	N/A
C_unc5_A_.	The Health Care System and School of Medicine are well-aligned in terms of mission.	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_{98}$
C_unc5_B_.	The Health Care System and School of Medicine are well-aligned in terms of strategy.	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_{98}$
C_unc5_C_.	The quality of clinical care that UNC delivers is consistently high.	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_{98}$
C_unc5_D_.	It is easy to take care of patients at UNC.	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_{98}$
C_unc5_E_.	The Health Care System supports my pursuit of faculty responsibilities outside my clinical practice (e.g. teaching, research)	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_{98}$
C_unc5_F_.	The School of Medicine supports my pursuit of clinical responsibilities outside of teaching and research.	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_{98}$

C_unc6. Please indicate your level of agreement or disagreement with the following statements regarding undergraduate medical education at UNC SOM:

		Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	I don't know
C_unc6_A_.	The School of Medicine is effective in preparing students to be leaders of 21st century medicine	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_9$
C_unc6_B_.	The School of Medicine is effective in promoting and encouraging students to serve the medical needs of the state of North Carolina	$\bigcirc_1$	$\bigcirc_2$	$\bigcirc_3$	$\bigcirc_4$	$\bigcirc_5$	$\bigcirc_9$

C_unc7. If you are considering leaving UNC in the next 1-2 years, please explain why. *(open-ended)*

[Review Page]

By clicking "Next", you are submitting your responses for the 2011 Faculty Forward Engagement Survey.
You will not be able to change your responses or re-enter the survey after clicking "Next" on this
page.

[Thank You Page]
Thank You
Thank you for participating in the 2011 Faculty Forward Engagement Survey.

As noted in the initial survey announcement, to ensure confidentiality, only aggregated results will be shared.
Your institution will receive a report with the aggregate results from this survey during 2012 as part of the
AAMC's Faculty Forward program.

If you have questions regarding the Faculty Forward program, please visit http://www.aamc.org/facultyforward.

//IF INSTITUTION=7,8//
AAMC Readiness for Reform Initiative
The Association of American Medical Colleges created the Readiness for Reform (R4R) initiative to support
members as they implement key elements of health reform, including care delivery redesign, quality reporting
and improvement, and payment initiatives.

Your medical school has asked that you participate in the following survey to assess awareness of key changes in
reimbursement and care delivery that may impact your work in the next five years as a faculty member and
medical professional.

To continue to share your opinions about the impact of health reform at your institution, please visit this link:
https://surveys.aamc.org/se.ashx?s=7C7E87CB16D43B4C

//Text to appear for suspended surveys://
Your responses have been saved. When you are ready to continue the survey, please return to the URL provided
in your invitation. You will then be re-directed to the point where you left off.