



Faculty **Forward**

2016 Summary Report University of North Carolina 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 pilot test 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 behavioral outcomes such as contribution and effort. Please refer to the Executive Summary section of this report to review the survey dimensions.

Report Contents

The following report contains the results from UNC School of Medicine's participation in the Faculty Forward initiative 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
- 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 Faculty Forward cohort.

Appendices that contain:

- A more detailed methodology section that includes data analysis techniques applied and detailed survey population information
- o A copy of the Faculty Forward Engagement Survey items





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
- Data breakouts across departments
- o Benchmarking comparisons between your institution, your selected peer group, and all schools participating in the Faculty Forward cohort.

Contact

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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 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: Survey Dimensions

Dimension Name	Dimension Description
	Dimension Description
Nature of Work	Number of hours worked; time spent on mission areas; control
	over schedule; autonomy
Focus on Medical School	Value the medical school places on various mission areas;
Mission	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;
2 Spariment Continues	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.
Collegianty and Collaboration	sense of belonging); interactions with colleagues; intellectual
	vitality within the department and medical school; appreciation by
Dalatia walain with Own amila an	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	Opportunities for professional development; pace of advancement;
Professional Growth	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	Success in hiring and retaining high quality faculty
Retention	
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	Assess decisions for part-time status and support from institution
Demographic Information	Demographic information regarding sex, race, age etc.
Appointment Information	
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. Unweighted means are also provided across demographic groups and departments. 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: Summary Scores Shown by Survey Dimension and Item Number

Dimension Name	Summary Scores
Nature of Work	 My Job (Q11a-d)*
Focus on Medical School	Focus on Medical School Mission (Q12a-e)
Mission	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	 Growth Opportunities (Q26a-c and Q27 [all parts])
Professional Growth	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	 Faculty Recruitment and Retention (Q32a-d and Q33a-d)
Retention	
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

The AAMC administered the *Faculty Forward Engagement Survey* from October 2013 to August 2016 via the web to all full-time and part-time medical school faculty members at the following participating institutions:

- 1. Baylor College of Medicine
- 2. Boston University School of Medicine
- 3. George Washington University School of Medicine & Health Sciences
- 4. Louisiana State University School of Medicine in New Orleans
- 5. Loyola University Stritch School of Medicine
- 6. Medical College of Wisconsin
- 7. Michigan State University College of Human Medicine
- 8. New York University Langone Medical Center
- 9. Ponce Health Sciences University School of Medicine
- 10. Rush University Medical College
- 11. Sidney Kimmel Medical College at Thomas Jefferson University
- 12. Stanford University School of Medicine
- 13. State University of New York Downstate Medical Center College of Medicine
- 14. State University of New York Upstate Medical University
- 15. Texas Tech University Health Sciences Center School of Medicine
- 16. University of Arizona College of Medicine
- 17. University of California, Davis School of Medicine
- 18. University of California, Los Angeles David Geffen School of Medicine
- 19. University of Cincinnati College of Medicine
- 20. University of Florida College of Medicine
- 21. University of Louisville School of Medicine
- 22. University of Mississippi Medical Center School of Medicine
- 23. University of Missouri School of Medicine
- 24. University of Nevada School of Medicine
- 25. University of New Mexico School of Medicine
- 26. University of North Carolina School of Medicine
- 27. University of South Carolina School of Medicine Greenville
- 28. University of South Florida College of Medicine
- 29. University of Texas Medical Branch
- 30. University of Texas Health Science Center San Antonio
- 31. University of Utah School of Medicine
- 32. University of Virginia School of Medicine
- 33. Wake Forest School of Medicine





Benchmarking Comparisons

This report contains your institution's results in comparison to all 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:

- Baylor College of Medicine
- Boston University School of Medicine
- Stanford University School of Medicine
- University of California, Los Angeles David Geffen School of Medicine

Department Reporting

To allow for benchmarking comparisons by department across institutions, Faculty Forward created a standardized list of 33 aggregated departments, as shown in Table 3. Detailed results by aggregated included in the "Comprehensive Data Report" section of your report.

Table 3: Aggregated Departments by Basic Science and Clinical

able 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)				
	Physical Medicine and Rehabilitation				
	Psychiatry				
	Radiation Oncology				
	Radiology				
	Surgery (General)				
	Surgery (Subspecialty)				
	Urology				
	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

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		s at Your tution	Response Rates		
All Faculty	Survey		Your Institution 64.6%	Your Peer Group 55.8%	All Faculty Forward Institutions 61.6%
Appointment Status	1770	1140	04.070	33.070	01.070
Full-Time Part-Time	1610 163	1073 72	66.6% 44.2%	58.6% 39.1%	64.6% 47.1%
Department Type					
Basic Science Clinical	264 1509	166 979	62.9% 64.9%	76.7% 54.1%	70.9% 58.9%
Rank			0.1.070		
Senior (i.e., Full or Associate) Junior (i.e., Assistant)	N/A N/A	652 388	N/A N/A	N/A N/A	N/A N/A
Gender					
Male Female	898 875	574 571	63.9% 65.3%	55.8% 55.7%	62.4% 62.1%
Race/Ethnicity					
Majority (i.e., White or Asian) Minority (i.e., all other)	1615 158	1049 96	65.0% 60.8%	72.3% 68.7%	68.0% 67.6%
Administrative Title					
Administrative Title Non-Administrative Title	N/A N/A	442 668	N/A N/A	N/A 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. Additionally, race data was not available for all faculty in the sample.

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	1773	9783	35067
Number of Respondents	1145	5458	21591
Response Rate	64.6%	55.8%	61.6%





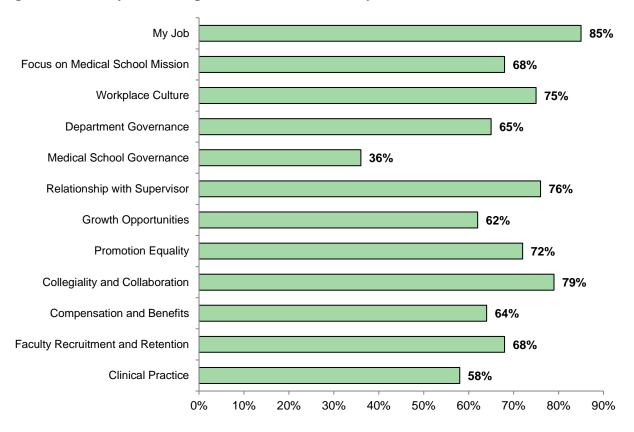
RESULTS OVERVIEW

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







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

		ntment itus		rtment ype	Ra	ınk	Ge	ender	Race/E	thnicity		strative tle
Summary Score	Full- Time	Part- Time	Basic Science	Clinical	Senior	Junior	Male	Female	Majority	Minority	Admin. Title	Non- Admin. Title
My Job	85	83	87	85	85	54	86	84	85	81	86	84
Focus on Medical School Mission	67	72	66	68	65	70	67	68	67	73	69	66
Workplace Culture	76	68	79	75	74	76	78	72	75	74	76	75
Department Governance	64	68	73	63	64	66	68	61	65	61	64	65
Medical School Governance	36	35	38	35	32	40	37	34	35	42	34	37
Relationship with Supervisor	76	76	77	76	74	79	76	76	76	72	79	74
Growth Opportunities	62	58	65	61	65	59	64	59	62	59	64	60
Promotion Equality	72	73	75	71	73	72	80	63	74	52	70	73
Collegiality and Collaboration	79	77	77	79	79	78	81	77	79	75	82	77
Compensation and Benefits	64	62	45	67	64	64	66	62	63	72	67	61
Faculty Recruitment and Retention	68	66	70	68	67	69	70	66	68	65	67	69
Clinical Practice	58	52	58	58	55	60	58	59	57	62	58	57





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.	94.8%	Q11d I am usually willing to give more than what is expected of me in my job
2.	87.5%	Q30b The faculty in my department usually get along well together
3.	84.8%	Q29b I am satisfied with the quality of professional interaction I have with departmental colleagues
4.	84.3%	Q13a I feel that the workplace culture at this medical school cultivates collegiality
5.	83.9 %	Q33a My department is successful in recruiting female faculty members
6.	83.4%	Q29a I am satisfied with the quality of personal interaction I have with departmental colleagues
7.	83.1%	Q11a I am satisfied with my autonomy at my work
8.	83.0%	Q11b My day-to-day activities give me a sense of accomplishment
9.	82.7%	Q22 I am satisfied with the quality of mentoring that I receive
10.	82.6%	Q41 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.	15.7%	Q17b Senior leadership does a good job explaining medical school finances to the
		faculty
2.	29.9%	Q17a There is sufficient communication from the dean's office to the faculty about
		the medical school
3.	31.8%	Q18a The pace of decision making in the dean's office is reasonable
4.	34.6%	Q36b Communication to physicians about this location's financial status
5.	36.7%	Q17c The dean's priorities for the medical school are clear
6.	40.1%	Q18b There are sufficient opportunities for faculty participation in the governance of
		this medical schooly
7.	40.6%	Q31b My incentive-based compensation, such as bonuses
8.	42.4%	Q17d The dean's priorities for the medical school are reasonable
9.	44.4%	Q18c Faculty can express their opinions about the medical school without fear of
		retribution
10.	46.1%	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 UNC 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 cohort institutions.

Figure 2: Satisfaction with UNC School of Medicine

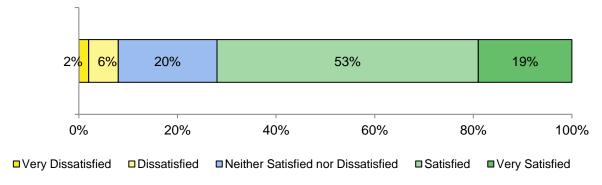
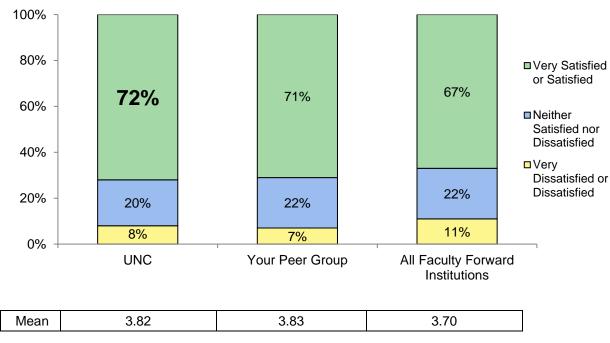


Figure 3: Satisfaction with Medical School Comparison to Your Peer Group and the Cohort







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	1034	72%	20%	8%	3.82
Appointment Status					
Full-time	969	72%	20%	8%	3.82
Part-time	65	69%	22%	9%	3.83
Department Type					
Basic Science	149	78%	15%	7%	3.84
Clinical	885	71%	21%	8%	3.81
Rank					
Senior	599	68%	21%	11%	3.75
Junior	351	77%	18%	5%	3.89
Gender					
Male	531	72%	19%	9%	3.82
Female	503	72%	21%	7%	3.82
Race/Ethnicity					
Majority	944	72%	20%	8%	3.81
Minority	90	76%	15%	9%	3.86
Administrative Title					
Administrative Title	409	73%	19%	9%	3.82
Non-Administrative Title	595	70%	22%	8%	3.79





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

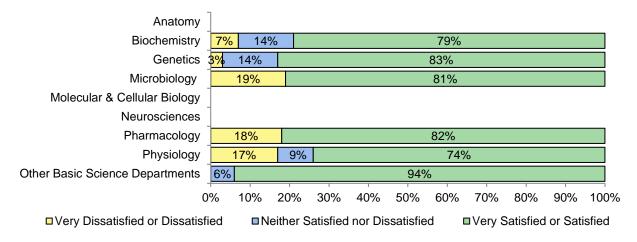
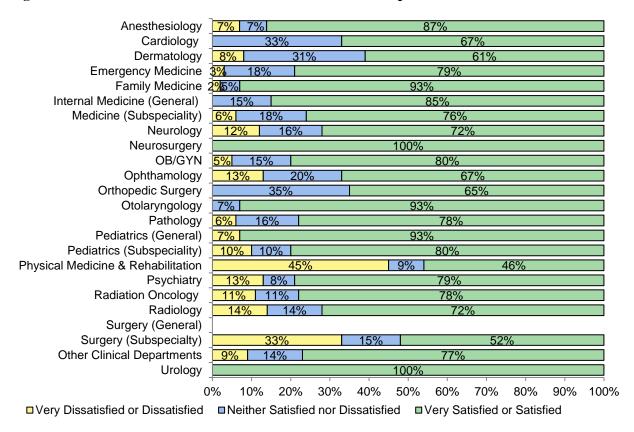


Figure 5: Differences in Global Satisfaction within Clinical Departments



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

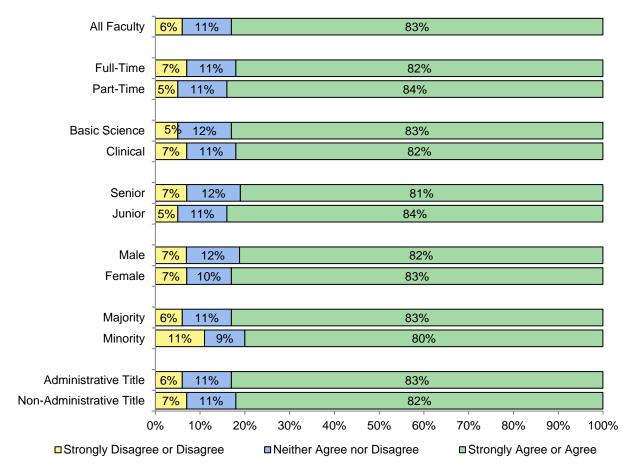




Would Again Choose to Work at Medical School

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







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)	29 (3.0%)	2.8%	3.6%
No (Will Not Retire)	937 (97.0%)	97.2%	96.4%
Leave this Medical School			
Yes (Leave this Medical School)	97 (11.7%)	11.7%	12.2%
No (Stay at this Medical School)	731 (88.3%)	88.3%	87.8%
Leave Academic Medicine			
Yes (Leave Academic Medicine)	17 (10.6%)	8.0%	8.3%
No (Stay in Academic Medicine)	143 (89.4%)	92.0%	91.7%





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 Medical School by Respondent Characteristics

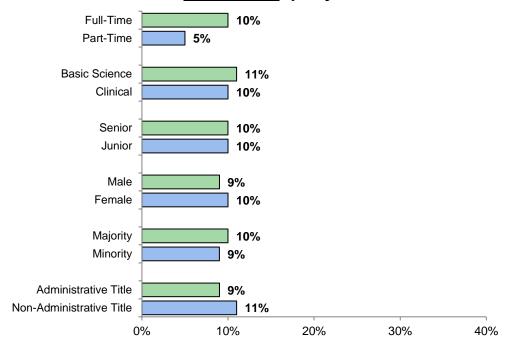
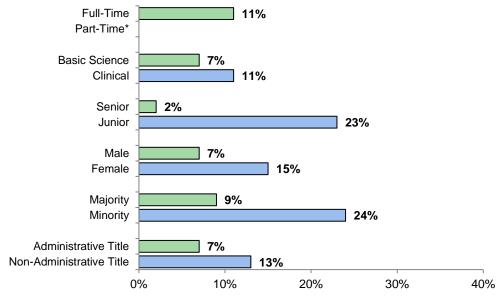


Figure 8: Intentions to Leave Academic Medicine by Respondent Characteristics



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





NATURE OF WORK

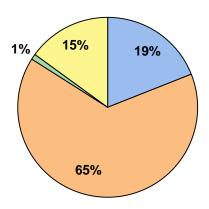
Respondents estimated the total number of hours spent on all work activities in an average calendar week and the percentage of time spent on each mission area. Mission areas included:

- **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

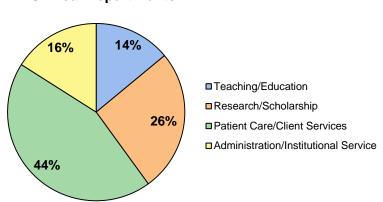
Figure 9 displays the percentage of time that full-time faculty members in basic science departments (<u>including only basic scientists who are not actively engaged in patient care</u>) and clinical departments spend in each mission area. Please note the number of hours per mission area was calculated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

Basic Science Departments



Clinical Departments



Mission Area	Mean Hours
Teaching/Education	10.4
Research/Scholarship	35.9
Patient Care/Client Services	0.2
Administration/Institutional Service	8.4
Total Hours	54.9

	Mean
Mission Area	Hours
Teaching/Education	7.7
Research/Scholarship	14.0
Patient Care/Client Services	24.2
Administration/Institutional Service	8.6
Total Hours	54.5





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

		Far Too Much or	About	Far Too Little or
Item	N	Too Much	Right	Too Little
Basic Science Departments				
Teaching/Education	151	5%	85%	10%
Research/Scholarship	155	4%	71%	25%
Patient Care/Client Services	25	8%	88%	4%
Administration/Institutional Service	131	30%	65%	5%
Clinical Departments				
Teaching/Education	894	4%	66%	30%
Research/Scholarship	891	3%	47%	50%
Patient Care/Client Services	802	33%	62%	5%
Administration/Institutional Service	864	20%	67%	13%

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	2011 Mean
I am satisfied with my autonomy at work	1133	83%	8%	9%	4.13	4.12
My day-to-day activities give me a sense of accomplishment	1130	83%	10%	7%	4.11	4.12
My role here is clear to me	1122	78%	13%	9%	4.01	3.99
I am usually willing to give more than what is expected of me in my job	1124	95%	4%	1%	4.56	4.55
MY JOB SUMMARY SCORE		85%	9%	6%	4.20	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 UNC 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	2011 Mean
My medical school's mission is clear	1072	71%	18%	11%	3.77	3.70
Overall, my medical school is accomplishing its mission	997	71%	23%	6%	3.80	3.70
The stated values of the medical school match the actual values of the institution	1005	63%	23%	14%	3.60	3.61
It is clear how my day-to-day activities support the medical school's mission	1054	67%	22%	11%	3.73	3.72
Overall, my school fosters teaching excellence	1052	68%	20%	12%	3.72	3.61
MEDICAL SCHOOL MISSION SUMMARY SCORE		68%	21%	11%	3.72	3.67

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	966	2%	76%	22%
Research/Scholarship	982	9%	73%	18%
Patient Care/Client Services	820	11%	75%	14%
Administration/Institutional Service	939	18%	70%	12%

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	1055	3%	76%	21%
Research/Scholarship	1064	9%	68%	23%
Patient Care/Client Services	879	16%	73%	11%
Administration/Institutional Service	1025	15%	73%	12%

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





Workplace Culture

Respondents indicated their agreement or disagreement with whether UNC School of Medicine's culture 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	2011 Mean
Collegiality	1110	84%	10%	6%	4.16	4.12
Diversity	1100	70%	18%	12%	3.79	3.83
Innovation	1096	71%	16%	13%	3.80	3.75
Excellence in performance	1097	75%	16%	9%	3.90	3.84
WORKPLACE CULTURE SUMMARY SCORE		75%	15%	10%	3.91	3.89

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

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	2011 Mean
There is sufficient communication from the department chair's office to the faculty about the department	1053	68%	14%	18%	3.74	3.53
My department does a good job explaining departmental finances to the faculty	1036	51%	18%	31%	3.27	3.37
The department chair's priorities for the department are <u>clear</u>	1040	66%	17%	17%	3.73	3.59
The chair's priorities for the department are reasonable	986	70%	22%	8%	3.87	3.76
In general, the department chair's priorities are aligned with the dean's priorities	685	67%	28%	5%	3.81	3.77
The pace of decision making in the department is reasonable	993	58%	23%	19%	3.47	3.49
There are sufficient opportunities for faculty participation in the governance of this department	982	59%	21%	20%	3.49	3.39
The department chair sets a good example to reflect our medical school's values	976	79%	14%	7%	4.04	3.94
DEPARTMENT GOVERNANCE SUMMARY SCORE		65%	19%	16%	3.67	3.60

Question 15-16: Please indicate your level of agreement or disagreement with the following statements.

[†] Note: This item stated "Excellence" rather than "Excellence in performance" in 2009.

^{*} 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 UNC 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	2011 Mean
There is sufficient communication from the dean's office to the faculty about the medical school	917	30%	31%	39%	2.87	2.97
Senior leadership does a good job explaining medical school finances to the faculty	909	16%	28%	56%	2.46	2.66
The dean's priorities for the medical school are clear	875	37%	33%	30%	3.04	3.16
The dean's priorities for the medical school are reasonable	774	42%	44%	14%	3.30	3.30
In general, the dean's priorities are aligned with the medical school's mission	737	48%	41%	11%	3.41	3.42
The pace of decision making in the dean's office is reasonable	655	32%	49%	19%	3.11	3.17
There are sufficient opportunities for faculty participation in the governance of this medical school	815	40%	36%	24%	3.13	3.00
Faculty can express their opinions about the medical school without fear of retribution	774	44%	34%	22%	3.23	3.24
MEDICAL SCHOOL GOVERNANCE SUMMARY SCORE		36%	36%	28%	3.05	3.10

Question 17-18: Please indicate your level of agreement or disagreement with the following statements.

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	2011 Mean
I feel appreciated by my supervisor	1065	75%	13%	12%	3.94	3.90
My supervisor sets a good example to reflect this medical school's values	1059	79%	13%	8%	4.05	3.97
My supervisor actively encourages my career development	1060	72%	15%	13%	3.90	3.76
My supervisor listens to what I have to say	1053	77%	12%	11%	4.01	3.96
RELATIONSHIP WITH SUPERVISOR SUMMARY SCORE		76%	13%	11%	3.97	3.90

Question 19: Please indicate your level of agreement or disagreement with each of the following statements about the <u>supervisor</u> who completes your performance review.

Note: These items were not included in the 2009 survey.

^{*} 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.





MENTORING AND FEEDBACK

Faculty were asked to rate their agreement or disagreement with the importance and quality of the mentoring and feedback at UNC 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	2011 Mean
Having a formal mentor at my institution is important to me.	1038	62%	24%	14%	3.74	3.72
I am satisfied with the quality of mentoring that I receive.	347	83%	13%	4%	4.12	4.09
Receiving regular feedback about my job performance is important to me.	1067	81%	15%	4%	4.08	4.07
The feedback I receive from my unit head is generally useful.	780	77%	16%	7%	3.88	3.86
I am satisfied with how frequently I receive feedback from my unit head.	783	80%	16%	4%	3.96	3.94

Questions 21-22, 24-25: Please indicate your level of agreement or disagreement with the following statements.

OPPORTUNITIES FOR CAREER AND PROFESSIONAL GROWTH

Growth Opportunities

Table 19 displays respondents' satisfaction with the opportunities and pace of professional advancement at UNC 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 UNC School of Medicine

Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean	2011 Mean
Further professional advancement at this medical school is important to me	1044	82%	12%	6%	4.13	4.16
I am satisfied with the pace of my professional advancement at this medical school	1033	61%	20%	19%	3.49	3.43
I am satisfied with my opportunities for professional development at this medical school	1045	58%	21%	21%	3.44	3.39
Teaching/Education						
To be promoted in rank, what I must do in this mission area is <u>clear</u> to me	909	62%	17%	21%	3.49	3.32
To be promoted in rank, what I must do in this mission area is <u>reasonable</u> to me	870	63%	29%	8%	3.66	3.55

^{*} Note: This item was rated on a satisfaction scale rather than an agreement scale in 2009.





Item	N	Strongly Agree or Agree	Neither Agree nor Disagree	Strongly Disagree or Disagree	Mean	2011 Mean
Research/Scholarship		_	_			
To be promoted in rank, what I must do in this mission area is <u>clear</u> to me	894	66%	17%	17%	3.62	3.51
To be promoted in rank, what I must do in this mission area is reasonable to me	859	63%	26%	11%	3.65	3.55
Patient Care/Client Services						
To be promoted in rank, what I must do in this mission area is <u>clear</u> to me	701	61%	18%	21%	3.49	3.29
To be promoted in rank, what I must do in this mission area is reasonable to me	662	61%	29%	10%	3.62	3.48
Administration/Institutional Service						
To be promoted in rank, what I must do in this mission area is clear to me	854	48%	27%	25%	3.27	3.09
To be promoted in rank, what I must do in this mission area is reasonable to me	805	51%	39%	10%	3.48	3.33
GROWTH OPPORTUNITY SUMMARY SCORE		62%	23%	15%	3.58	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.

Promotion Equality

Respondents rated whether UNC 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	2011 Mean
At my medical school the criteria for promotion are consistently applied to faculty across comparable positions	723	53%	21%	26%	3.32	3.18
My medical school offers equal opportunities to all faculty members regardless of gender	890	72%	11%	17%	3.74	3.83
My medical school offers equal opportunities to all faculty members regardless of race/ethnicity	860	78%	13%	9%	3.91	3.95
My medical school offers equal opportunities to all faculty members regardless of sexual orientation	789	81%	15%	4%	4.02	4.03
PROMOTION EQUALITY SUMMARY SCORE		72%	14%	14%	3.76	3.77

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

^{*} Note: This item was rated on a satisfaction scale rather than an agreement scale in 2009.





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	2011 Mean
I am satisfied with the quality of personal interaction I have with departmental colleagues	1046	83%	11%	6%	4.10	4.06
I am satisfied with the quality of professional interaction I have with departmental colleagues	1045	85%	10%	5%	4.14	4.04
I am satisfied with how well I "fit" (i.e., my sense of belonging) in my department	1048	75%	13%	12%	3.90	3.83
I am satisfied with how well I "fit" (i.e., my sense of belonging) in my medical school	1043	62%	24%	14%	3.64	3.53
I am satisfied with the intellectual vitality in my department	1040	82%	12%	6%	4.08	3.89
I am satisfied with the intellectual vitality in my medical school	1038	78%	17%	5%	3.97	3.84
My departmental colleagues are respectful of my efforts to balance work and home responsibilities	1050	78%	15%	7%	3.98	3.90
The faculty in my department usually get along well together	1051	88%	9%	3%	4.17	4.15
I feel appreciated by my departmental colleagues	1049	78%	15%	7%	4.00	3.94
COLLEGIALITY & COLLABORATION SUMMARY SCORE		79%	14%	7%	4.00	3.91

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.

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	2011 Mean
My overall compensation	1049	49%	15%	36%	3.15	3.04
My incentive-based compensation, such as bonuses	956	41%	25%	34%	3.07	3.00
Health benefits	1041	78%	10%	12%	4.07	3.88
Retirement benefits	1038	78%	14%	8%	3.99	3.89
My overall benefits package	1038	73%	15%	12%	3.86	3.69
COMPENSATION AND BENEFITS SUMMARY SCORE		64%	16%	20%	3.64	3.51

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

^{*} Note: This item was rated on a satisfaction scale rather than an agreement scale in 2009.





FACULTY RECRUITMENT AND RETENTION

Table 23 displays respondents' agreement or disagreement with whether UNC 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	2011 Mean
My medical school is successful in hiring high quality faculty members	900	79%	15%	6%	3.94	3.97
My <u>department</u> is successful in hiring high quality faculty members	1022	78%	13%	9%	3.94	3.88
My medical school is successful in retaining high quality faculty members	864	52%	29%	19%	3.42	3.37
My <u>department</u> is successful in retaining high quality faculty members	995	61%	21%	18%	3.57	3.55
My department is successful in recruiting female faculty members	977	84%	10%	6%	4.08	4.08
My department is successful in recruiting <u>racial/ethnic minority</u> faculty members	942	58%	21%	21%	3.51	3.59
My department is successful in retaining female faculty members	944	72%	17%	11%	3.82	3.89
My department is successful in retaining racial/ethnic minority faculty members	898	59%	27%	14%	3.58	3.68
FACULTY RECRUITMENT AND RETENTION SUMMARY SCORE		68%	19%	13%	3.74	3.75

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 clinical practice locations from which faculty could choose to respond.

Table 24: Clinical Practice (all locations combined)

Item	N	Very Satisfied or Satisfied	Neither Satisfied nor Dissatisfied	Very Dissatisfied or Dissatisfied	Mean	2011 Mean
Opportunities for physician input in management or administrative decisions	676	49%	23%	28%	3.26	3.16
Communication to physicians about this location's financial status	664	34%	32%	34%	3.02	3.00
The teamwork between physicians and other clinical staff	701	77%	14%	9%	3.90	3.75
Communication between physicians and senior administrators	675	46%	26%	28%	3.22	3.13
Location's responsiveness in meeting your requests as a physician	657	48%	29%	23%	3.30	3.23
My ability to provide a high quality of patient care in this location	711	77%	14%	9%	3.91	3.74
How well this clinical location functions overall as it relates to patient care	707	70%	18%	12%	3.76	3.56
CLINICAL PRACTICE SUMMARY SCOR	E	58%	22%	20%	3.49	3.37

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

- 1. UNC Medical Center
- 2. Chatham Hospital (n<5)

- 3. Nash Healthcare (n<5)
- 4. Rex Healthcare
- 5. Other

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	47%	N/A	N/A	37%	57%
Communication to physicians about this location's financial status	33%	N/A	N/A	37%	45%
The teamwork between physicians and other clinical staff	76%	N/A	N/A	71%	83%
Communication between physicians and senior administrators	44%	N/A	N/A	37%	58%
Location's responsiveness in meeting your requests as a physician	46%	N/A	N/A	57%	61%
My ability to provide a high quality of patient care in this location	76%	N/A	N/A	100%	85%
How well this clinical location functions overall as it relates to patient care	68%	N/A	N/A	71%	80%
CLINICAL PRACTICE SUMMARY SCORE	56%	N/A	N/A	58%	68%





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	2011 Mean
My institution has clear expectations for part-time faculty	60	43%	23%	34%	3.08	3.35
My institution provides necessary resources for part-time faculty	59	37%	32%	31%	3.03	3.38
My supervisor is supportive of my part- time arrangement	60	82%	15%	3%	4.07	4.28
Part-time faculty are able to serve in leadership positions at my institution	59	56%	27%	17%	3.47	N/A
My institution promotes the cultural acceptance of part-time work	58	43%	26%	31%	3.21	N/A

Question PT3: Please indicate your level of agreement or disagreement with the following statements.

Note: These items were not included in the 2009 survey. Items PT3d/e were not included in the 2011survey.

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	2011 Mean
Current part-time arrangement	60	67%	10%	23%	3.63	4.00
Ability to meet department or division needs	58	71%	17%	12%	3.81	3.83
Ability to fulfill job responsibilities (i.e., being able to accomplish what you need to do)	60	68%	15%	17%	3.67	3.69
Opportunities for advancement	59	41%	35%	24%	3.19	3.27
Ability to manage workload	60	62%	13%	25%	3.53	3.38
Access to professional development opportunities	59	63%	20%	17%	3.59	3.35
My protected time for certain activities (e.g., research, administration)	60	50%	22%	28%	3.28	2.92
Ability to return to or obtain a full-time position, if desired	57	47%	37%	16%	3.40	3.46

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





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.

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

	You	Peer	Cohort
	Top	Тор	Top
	two	two	two
MY JOB SUMMARY SCORE	85%	84%	83%
11a. I am satisfied with my autonomy at work	83%	80%	79%
11b. My day-to-day activities give me a sense of accomplishment	83%	82%	81%
11c. My role here is clear to me	78%	77%	77%
11d. I am usually willing to give more than what is expected of me in my job	95%	95%	95%
FOCUS ON MEDICAL SCHOOL MISSION SUMMARY SCORE	68%	71%	67%
12a. My medical school's mission is clear	71%	75%	70%
12b. Overall, my medical school is accomplishing its mission	71%	74%	67%
12c. The stated values of the medical school match the actual values of the institution	63%	68%	63%
12d. It is clear how my day-to-day activities support the medical school's mission	67%	70%	68%
12e. Overall, my school fosters teaching excellence	68%	69%	65%
WORKPLACE CULTURE SUMMARY SCORE	75%	75%	69%
13a. I feel that the workplace culture at this medical school cultivates collegiality	84%	74%	73%
13b. I feel that the workplace culture at this medical school cultivates diversity	70%	75%	72%
13c. I feel that the workplace culture at this medical school cultivates innovation	71%	75%	63%
13d. I feel that the workplace culture at this medical school cultivates excellence in performance	75%	76%	68%
DEPARTMENT GOVERNANCE SUMMARY SCORE	65%	62%	64%
15a. There is sufficient communication from the department chair's office to the faculty about the department	68%	66%	68%
15b. My department does a good job explaining departmental finances to the faculty	51%	50%	53%
15c. The department chair's priorities for the department are <u>clear</u>	66%	65%	67%
15d. The chair's priorities for the department are <u>reasonable</u>	70%	66%	68%
15e. In general, the department chair's priorities are aligned with the dean's priorities	67%	65%	68%
16a. The pace of decision making in the department is reasonable	58%	57%	60%
16b. There are sufficient opportunities for faculty participation in the governance of this department	59%	56%	58%
16c. The department chair sets a good example to reflect our medical school's values	79%	75%	76%





	You	Peer	Coho
	Top two	Top two	Top two
MEDICAL SCHOOL GOVERNANCE SUMMARY SCORE	36%	49%	46%
17a. There is sufficient communication from the dean's office to the faculty about the medical school	30%	48%	46%
17b. Senior leadership does a good job explaining medical school finances to the faculty	16%	30%	28%
17c. The dean's priorities for the medical school are <u>clear</u>	37%	53%	51%
17d. The dean's priorities for the medical school are <u>reasonable</u>	42%	55%	53%
17e. In general, the dean's priorities are aligned with the medical school's mission	48%	62%	60%
18a. The pace of decision making in the dean's office is reasonable	32%	47%	43%
18b. There are sufficient opportunities for faculty participation in the governance of this medical school	40%	50%	46%
18c. Faculty can express their opinions about the medical school without fear of retribution	44%	49%	47%
ELATIONSHIP WITH SUPERVISOR SUMMARY SCORE	76%	72%	73%
19a. I feel appreciated by my supervisor	75%	73%	74%
19b. My supervisor sets a good example to reflect this medical school's values	79%	74%	74%
19c. My supervisor actively encourages my career development	72%	67%	68%
19d. My supervisor listens to what I have to say	77%	75%	75%
21. Having a formal mentor at my institution is important to me	62%	68%	62%
22. I am satisfied with the quality of mentoring that I receive	83%	82%	79%
24. Receiving regular feedback about my job performance is important to me	81%	81%	81%
25a. The feedback I receive from my unit head is generally useful	77%	78%	77%
25b. I am satisfied with how frequently I receive feedback from my unit head	80%	78%	79%
ROWTH OPPORTUNITIES SUMMARY SCORE	62%	61%	61%
26a. Further professional advancement at this medical school is important to me	82%	84%	82%
26b. I am satisfied with the pace of my professional advancement at this medical school	61%	57%	58%
26c. I am satisfied with my opportunities for professional development at this medical school	58%	57%	56%
27a_a. Teaching/Education : To be promoted in rank, what I must do in this mission area is <u>clear</u> to me	62%	63%	63%
27a_b. Teaching/Education : To be promoted in rank, what I must do in this mission area is <u>reasonable</u> to me	63%	62%	62%
27b_a. Research/Scholarship : To be promoted in rank, what I must do in this mission area is <u>clear</u> to me	66%	68%	67%
27b_b. Research/Scholarship : To be promoted in rank, what I must do in this mission area is <u>reasonable</u> to me	63%	59%	58%
27c_a. Patient Care/Client Services : To be promoted in rank, what I must do in this mission area is <u>clear</u> to me	61%	59%	60%





27c_b. Patient Care/Client Services : To be promoted in rank, what I must do in this mission area is <u>reasonable</u> to me	61%	58%	60%
27d_a. Administration/Institutional Service : To be promoted in rank, what I must do in this mission area is <u>clear</u> to me	48%	49%	52%
27d_b. Administration/Institutional Service: To be promoted in rank,	51%	50%	52%
what I must do in this mission area is reasonable to me			

	You	Peer	Cohor
	Тор	Тор	Тор
	two	two	two
PROMOTION EQUALITY SUMMARY SCORE	72%	74%	74%
28a. At my medical school the criteria for promotion are consistently applied to faculty across comparable positions	53%	52%	53%
28b. My medical school offers equal opportunities to all faculty members regardless of gender	72%	77%	78%
28c. My medical school offers equal opportunities to all faculty members regardless of race/ethnicity	78%	80%	80%
28d. My medical school offers equal opportunities to all faculty members regardless of sexual orientation	81%	84%	83%
COLLEGIALITY AND COLLABORATION SUMMARY SCORE	79%	76%	75%
29a. I am satisfied with the quality of <u>personal</u> interaction I have with departmental colleagues	83%	80%	82%
29b. I am satisfied with the quality of <u>professional</u> interaction I have with departmental colleagues	85%	81%	82%
29c. I am satisfied with how well I "fit" (i.e., my sense of belonging) in my department	75%	74%	75%
29d. I am satisfied with how well I "fit" (i.e., my sense of belonging) in my medical school	62%	63%	63%
29e. I am satisfied with the intellectual vitality in my department	82%	78%	74%
29f. I am satisfied with the intellectual vitality in my medical school	78%	76%	67%
30a. My departmental colleagues are respectful of my efforts to balance work and home responsibilities	78%	73%	74%
30b. The faculty in my department usually get along well together	88%	81%	83%
30c. I feel appreciated by my departmental colleagues	78%	74%	76%
COMPENSATION AND BENEFITS SUMMARY SCORE	64%	65%	63%
31a. My overall compensation	49%	55%	55%
31b. My incentive-based compensation, such as bonuses	41%	41%	41%
31c. Health benefits	78%	78%	75%
31d. Retirement benefits	78%	74%	74%
31e. My overall benefits package	73%	71%	70%
FACULTY RECRUITMENT AND RETENTION SUMMARY SCORE	68%	70%	65%
32a. My medical school is successful in hiring high quality faculty members	79%	78%	66%
32b. My <u>department</u> is successful in hiring high quality faculty members	78%	73%	69%





members	52%	61%	48%
32d. My <u>department</u> is successful in retaining high quality faculty members	61%	60%	56%
33a. My department is successful in recruiting female faculty members	84%	81%	80%
33b. My department is successful in recruiting racial/ethnic minority faculty members	58%	66%	64%
33c. My department is successful in retaining female faculty members	72%	73%	72%
33d. My department is successful in retaining <u>racial/ethnic minority</u> faculty members	57%	66%	63%
LINICAL PRACTICE SUMMARY SCORE	58%	57%	56%
	49%	50%	49%
36a. Opportunities for physician input in management or administrative decisions			
36b. Communication to physicians about this location's financial status	34%	40%	39%
36c. The teamwork between physicians and other clinical staff	77%	73%	72%
36d. Communication between physicians and senior administrators	46%	48%	46%
36e. Location's responsiveness in meeting your requests as a physician	48%	49%	48%
36f. My ability to provide a high quality of patient care in this location	78%	72%	70%
36g. How well this clinical location functions overall as it relates to patient care	70%	66%	65%
PT3a. My institution has clear expectations for part-time faculty	43%	49%	50%
PT3b. My institution provides necessary resources for part-time faculty	37%	51%	52%
PT3c. My supervisor is supportive of my part-time arrangement	82%	81%	83%
PT3d. Part-time faculty are able to serve in leadership positions at my	56%	56%	58%
institution		500/	- 407
PT3e. My institution promotes the cultural acceptance of part-time	43%	59%	54%
	67%	74%	
PT3e. My institution promotes the cultural acceptance of part-time work			75%
PT3e. My institution promotes the cultural acceptance of part-time work PT4a. Current part-time arrangement PT4b. Ability to meet department or division needs PT4c. Ability to fulfill job responsibilities (i.e., being able to accomplish	67%	74%	75% 73%
PT3e. My institution promotes the cultural acceptance of part-time work PT4a. Current part-time arrangement PT4b. Ability to meet department or division needs	67% 71%	74%	75% 73% 71%
PT3e. My institution promotes the cultural acceptance of part-time work PT4a. Current part-time arrangement PT4b. Ability to meet department or division needs PT4c. Ability to fulfill job responsibilities (i.e., being able to accomplish what you need to do)	67% 71% 68%	74% 74% 72%	75% 73% 71% 47%
PT3e. My institution promotes the cultural acceptance of part-time work PT4a. Current part-time arrangement PT4b. Ability to meet department or division needs PT4c. Ability to fulfill job responsibilities (i.e., being able to accomplish what you need to do) PT4d. Opportunities for advancement	67% 71% 68% 41%	74% 74% 72% 47%	75% 73% 71% 47%
PT3e. My institution promotes the cultural acceptance of part-time work PT4a. Current part-time arrangement PT4b. Ability to meet department or division needs PT4c. Ability to fulfill job responsibilities (i.e., being able to accomplish what you need to do) PT4d. Opportunities for advancement PT4e. Ability to manage workload PT4f. Access to professional development opportunities PT4g. My protected time for certain activities (e.g., research,	67% 71% 68% 41% 62%	74% 74% 72% 47%	75% 73% 71% 47% 67% 60%
PT3e. My institution promotes the cultural acceptance of part-time work PT4a. Current part-time arrangement PT4b. Ability to meet department or division needs PT4c. Ability to fulfill job responsibilities (i.e., being able to accomplish what you need to do) PT4d. Opportunities for advancement PT4e. Ability to manage workload PT4f. Access to professional development opportunities	67% 71% 68% 41% 62% 63%	74% 74% 72% 47% 66%	54% 75% 73% 71% 47% 67% 60% 48%





37b. All things considered, how satisfied or dissatisfied are you with your medical school as a place to work?	72%	71%	67%
41. If I had it to do all over, I would again choose to work at this	83%	79%	76%
medical school			



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 = .760
Focus on Medical School Mission (Q12a-e)	α = .903
Workplace Culture (Q13a-d)	α = .826
Department Governance (Q15a-e and Q16a-c)	α = .936
Medical School Governance (Q17a-e and Q18a-c)	α = .933
Relationship with Supervisor (Q19a-d)	α = .939
Growth Opportunities (Q26a-c and Q27[all parts])	α = .910
Promotion Equality (Q28a-d)	α = .864
Collegiality and Collaboration (Q29a-f and Q30a-c)	α = .910
Compensation and Benefits (Q31a-e)	α = .817
Faculty Recruitment and Retention (Q32a-d and Q33a-d)	α = .869
Clinical Practice (Q36a-g)	α = .913

^{*} Calculations updated from original report issue on March 30th 2012.





Survey Administration and Reporting

The AAMC conducts 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. Over 30,000 faculty are 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, the AAMC sent a prenotification e-mail about the survey from an administrator within their institution. Next, AAMC sent each faculty an invitation to participate which contained a unique and confidential web survey link. Over the course of the survey administration, AAMC sent up to five reminder e-mails to faculty members who had not yet responded. Each communication from the AAMC was sent from the email address, facultyforwardsurvey@aamc.org. Additionally, some individual institutions elected to send additional internal reminders to boost response rates.

GWU administered this survey from October 22nd until November 22nd, 2013. MSU administered this survey from November 5th until December 13th, 2013. The University of Arizona survey was administered from February 25th until April 9th, 2014. Stanford University School of Medicine administered this survey from March 13th until May 2nd, 2014. University of South Florida Morsani College of Medicine surveyed between April 15th and May 23rd, 2014. Texas Tech Health Sciences Center surveyed from May 13th through June 11th, 2014. SUNY Upstate surveyed from May 13th until June 24th, 2014. Boston University administered the survey from June 24th until August 21st, 2014. USC Greenville surveyed from September 23rd until November 10th, 2014. UMMC administered the survey from October 1st until November 14th, 2014. Rush University administered the survey from October 15th, 2014 until December 8th, 2014. The University of Louisville and UC Davis administered the survey from November 11th through December 24th, 2014. Sidney Kimmel Medical College surveyed from December 1st through January 15th, 2015. MCW, UNM, and University of Missouri-Columbia surveyed between February 2nd and March 10th, 2015. SUNY Downstate surveyed between March 10th and May 1st, 2015. Wake Forest surveyed between June 2nd and 29th, 2015. Ponce surveyed between August 17th and September 21st, 2015. University of Cincinnati surveyed between September 1st and October 10th 2015. Louisiana State University – New Orleans surveyed between October 13th and November 15th, 2015. The University of Virginia surveyed between October 13th and November 22nd, 2015. The University of Florida surveyed between January 21st and March 7th, 2016. UCLA surveyed between February 17th and April 15th, 2016. The University of Nevada surveyed between March 1st and April 21st, 2016. Loyola University Stritch School of Medicine surveyed between March 29th and May 11th, 2016. NYU surveyed between April 27th and June 12th, 2016. Baylor surveyed between May 4th and June 26th, 2016. University of Utah surveyed between May 24th and July 25th, 2016. UTHSCSA surveyed between June 7th and July 24th, 2016. UNC surveyed between June 13th and July 31st, 2016. UTMB surveyed between June 14th and August 1st, 2016. The overall response rate for all schools was 63%. Response rates for individual schools ranged between 45% and 82%.

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





Data Conditioning and Population Data

Data Conditioning

Once the survey fielding was complete, the 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.

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 Instit	tution	Your Peer	Group	All Faculty I Instituti	
	Number of Survey Respondents	Percent Within Sample	Number of Survey Respondents	Percent within Sample	Number of Survey Respondents	Percent within Sample
All Faculty				•	·	
Appointment Status						
Full-Time	1073	93.7%	4899	89.8%	19691	91.6%
Part-Time	72	6.3%	557	10.2%	1803	8.4%
Department Type						
Basic Science Clinical	166 979	14.5% 85.5%	563 4895	10.3% 89.7%	3028 18503	14.1% 85.9%
Rank						
Senior (i.e., Full or Associate)	652	62.7%	2575	53.6%	11030	55.1%
Junior (i.e., Assistant)	388	37.3%	2227	46.4%	8985	44.9%
Gender						
Male	574	50.1%	2993	54.8%	12770	59.3%
Female	571	49.9%	2465	45.2%	8762	40.7%
Race/Ethnicity						
Majority (i.e., White or Asian)	1049	91.6%	4149	89.2%	18035	90.2%
Minority (i.e., all other)	96	8.4%	503	10.8%	1968	9.8%
Administrative Title	440	00.00/	4007	07.40/	0000	40.40/
Administrative Title Non-Administrative Title	442 668	39.8% 60.2%	1967 3329	37.1%	8830 12164	42.1% 57.9%
	000	00.270	აა∠ყ	62.9%	12104	31.970
Department Type/Degree Basic Science	166	14.5%	563	10.3%	2867	14.2%
Clinical MD	673	58.8%	3846	70.5%	13938	69.2%
Clinical NID Clinical PhD/Other	306	26.7%	1047	70.5% 19.2%	3336	16.6%





	Your Instit	ution	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 6-15 years ago > 15 years ago	452 376 309	39.7% 33.1% 27.2%	2333 1774 1324	42.9% 32.7% 24.4%	8825 6997 5611	41.2% 32.6% 26.2%	
Tenure Status							
On tenure track/Tenured Not on tenure track	439 698	38.6% 61.4%	1517 3083	33.0% 67.0%	6862 13061	34.4% 65.6%	
Formal Mentoring Status							
Mentoring No Mentoring	359 691	34.2% 65.8%	1788 3020	37.2% 62.8%	6351 13347	32.2% 67.8%	
Active in Clinical Care							
Active Clinical Not Active	725 328	68.9% 31.1%	3604 1267	74.0% 26.0%	14417 5550	72.2% 27.8%	
Age							
Under 28 28-45	2 423	0.2% 44.2%	6 2099	0.1% 48.3%	16 7915	0.1% 44.5%	
46-65 Over 65	461 71	48.2% 7.4%	1908 336	43.9% 7.7%	8406 1451	47.2% 8.2%	

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

ltem	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:

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:

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

	You	Peer	Cohort
	Top	Top	
	two	two	Top two
11c. My role here is clear to me	71%	63%	71%

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.

Q11c. My role here is clear to me

		Frequency Distribution										
	Strongly agree		Ag	ree	Neither agree nor disagree		Disagree		Strongly Disagree disagree		I don't know	
	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	550	22.0	1025	41.0	425	17.0	350	14.0	100	4.0	50	2.0
Cohort	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



Faculty Forward Engagement Survey Items



Welcome to the 2016 AAMC Faculty Forward Engagement Survey.

On behalf of UNC School of Medicine, the Association of American Medical Colleges' (AAMC) invites you to participate in the confidential, Faculty Forward Engagement Survey. Data collected through this survey will be used to enhance programs and policies at UNC and help other Faculty Forward participating schools expand their understanding of what makes health professions colleges and universities great places to work.

Your participation in this survey is voluntary. You 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 survey. The AAMC will not use your name or email address for any other purposes.

Your individual responses to survey questions will be kept confidential. Confidential data are data that may not be released outside of the AAMC with individual or institutional identification, except with permission from the participant. Individuals may grant AAMC permission to release confidential data that describe themselves. An authorized representative of an AAMC member institution may grant AAMC permission to release confidential data that describe his or her institution in aggregate.

The AAMC will generate aggregate reports that contain institution-wide and departmental information to help your institution identify, prioritize, and implement improvements in the workplace that will increase faculty engagement. Information will not be reported in instances where respondent groups contain less than five individuals. Data from open-ended questions will be provided to your institution in de-identified, redacted form. De-identified record level data will be retained by the AAMC for research and programmatic purposes, and only de-identified aggregate analyses will be shared in publications and research presentations with the academic community. The AAMC may release de-identified responses to individuals who agree to protect the data and who agree to AAMC confidentiality policies. The AAMC will store data on secure servers and will destroy all identified data within 2 years of survey administration.

If you experience any technical issues accessing this survey or wish to withdraw from this survey, please contact the Survey Help Desk at 202-828-0521 Monday-Friday, 9:00am – 5:00pm EST or email facultyforwardsurvey@aamc.org. 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.

By participating, you will be contributing valuable information to your institution. The AAMC has taken numerous steps to protect participants in the Faculty Forward Engagement Survey. IRB requirements require that you are informed that if the information collected were to become public with individual identification it could prove personally uncomfortable.

This research has been reviewed according to AAMC policies and procedures. By continuing, you acknowledge that you have read and understood this data disclosure and agree to participate in this survey.

We encourage you to share your views about your academic medical center.

Click the Next button below to continue.



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:

Click on the BACK 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.

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 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 the underlined words, you may view the definitions of these terms.



Your Current Appointment

Q1	•	What is your current appointment status?
	O_1	Full-time faculty
	O_2	Part-time faculty
	O ₃	Volunteer faculty
	O_4	Emeritus faculty
	O_4	Other (please specify)
		//ASK ALL//
Q2		What is your current academic position?
	O_1	Professor (including titles such as Research Professor, Clinical Professor, etc.)
	O ₂	Associate Professor (including titles such as Research Associate Professor, Clinical Associate Professor, etc.)
	O_3	Assistant Professor (including titles such as Research Assistant Professor, Clinical Assistant Professor, etc.)
	O_4	Instructor or Lecturer
	O_5	Other (Please specify [Q2_oth])
		//ASK ALL//
Q3		In which department do you currently have your <u>primary</u> appointment?
	O_1	Basic science department in the medical school
	O_2	Clinical department in the medical school
	O_4	Academic Center
	O_3	Other (Please specify [Q3_oth])
	O 9	I do not wish to identify
	O ₉₈	Not Applicable
		*88 NO ANSWER //HIDDEN//



Q3_A . Please indicate the department in which you have your primary appointment.

- AHEC
- Allied Health Sciences (AHS)
- Anesthesiology
- Biochemistry and Biophysics
- Biomedical Engineering
- Cell Biology and Physiology
- Child Medical Evaluation Program
- Dermatology
- Emergency Medicine
- Family Medicine
- Genetics
- Medicine: Cardiology
- Medicine: Endocrinology & Metabolism
- Medicine: Gastroenterology and Hepatology
- Medicine: General Medicine and Clinical Epidemiology
- Medicine: Geriatrics
- Medicine: Hematology and Oncology
- Medicine: Hospitalist
- Medicine: Infectious Diseases
- Medicine: Nephrology and Hypertension
- Medicine: Pulmonary Diseases and Critical Care Medicine
- Medicine: Rheumatology, Allergy, and Immunology
- Medicine: Other
- Microbiology and Immunology
- Neurology
- Neurosurgery
- Nutrition
- Obstetrics and Gynecology
- Ophthalmology
- Orthopaedics
- Otolaryngology/Head & Neck Surgery
- Pathology and Laboratory Medicine
- Pediatrics: Allergy, Immunology, and Rheumatology
- Pediatrics: Cardiology
- Pediatrics: Emergency Medicine
- Pediatrics: Endocrinology and Diabetes
- Pediatrics: Gastroenterology and Hepatology
- Pediatrics: General Pediatrics and Adolescent Medicine
- Pediatrics: Genetics and Metabolism
- Pediatrics: Hematology and Oncology
- Pediatrics: Infectious Diseases
- Pediatrics: Neonatal/Perinatal Medicine
- Pediatrics: Pulmonology
- Pediatrics: Other
- Pharmacology
- Physical Medicine and Rehabilitation
- Psychiatry



Q4.

Q5.

 \mathbf{O}_7 Other (Please specify [Q5_oth]_

//ASK ALL//

NO ANSWER //HIDDEN//

The	e Alliance for Advancing the ademic Medicine Workplace		2016 AAMC Faculty Forward Survey				
		Radiation Oncology Radiology Social Medicine Surgery: Abdominal Transplant Surgery Surgery: Burn Center Surgery: Cardiothoracic Surgery Surgery: Gastrointestinal Surgery Surgery: General and Acute Care Surgery Surgery: Pediatrics Surgery Surgery: Plastic and Reconstructive Surgery Surgery: Surgical Oncology Surgery: Vascular Surgery Urology Other: (Please specify):	ook only one response				
		our highest earned academic degree? Please ch	еск only one response.				
O_1	M.D. includes	s foreign equivalents					
		w health destaurts					
	Ph.D. or other health doctorate						
O ₃	M.D. and Ph.D	D.					
O ₄	M.D. and othe	er degree (M.D./M.P.H.)					
O ₅	D.O.						
O ₆	Other (Please	e specify [Q4_oth])				
	*88 NO A	ANSWER //HIDDEN//					
	//ASK ALL//						
	In what aca	ademic year did you receive your first faculty a	appointment at UNC School of Medicine?				
O_1	Within this ac		••				
O_2	1-5 years ago	·)					
	6-10 years ago						
	11-15	•					
) 5	16-20 years ag	go					
O_6	More than 20) years ago					



Q6.	What is your current tenure status at UNC School of Medicine?
O_1	On tenure track, but not tenured
O_2	Tenured
O ₃	Not on tenure track, although medical school has a tenure system
O_4	No tenure at this medical school
O_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.
O_1	School of Medicine Dean, Associate Dean, Assistant Dean, Vice Dean
O_2	Division Chief
O_3	Department Chair
O_4	Center Director
O_5	Other administrative title (Please specify [Q7_oth])
O_9	I do not hold an administrative position //EXCLUSIVE CHOICE//
	*88 NO ANSWER //HIDDEN//
(Filter	those who chose Department chair at Department Governance and Skip to Medical School Governance)



The Nature of Your Work

	//ASK ALL//	
	//RANGE 0-168//	
	//VALIDATE VALUI	ES >90 WITH: "You entered xx hours. If this is correct, click next to continue, otherwise please correct your response."//
Q8.	_	calendar week, how many total hours do you spend on all work activities? Please ente bered response.
	Total w	ork 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.

		1
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)	_
CUMULA	TIVE 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 time/effort 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)	O_1	O_2	O ₃	O ₄	O ₅	O ₉₈
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)	O ₁	O ₂	O ₃	O ₄	O ₅	O ₉₈
Q10_C.	Patient Care/Client Services (include healthcare service, counseling patients or families, administrative tasks associated with clinical service)	O_1	O ₂	O ₃	Q ₄	O ₅	O ₉₈
Q10_D.	Administration/Institutional Service (include university, medical school, health system, faculty practice or department administrative duties, meetings, committee work)	O ₁	O ₂	O ₃	O ₄	O ₅	O ₉₈

//ASK ALL//

//88=NO ANSWER (HIDDEN)//

Q11. Please indicate the extent to which you <u>agree or disagree</u> with the following statements.

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	l 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	\mathbf{O}_2	O ₃	O ₄	O ₅	O ₉



Focus on Medical School Mission

//ASK ALL//

//88=NO ANSWER (HIDDEN)//

Q12. Please indicate the extent to which you agree or disagree with the following statements.

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	l 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 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	l 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	O ₁	O ₂	O ₃	O ₄	O ₅	O 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	O ₁	O ₂	O ₃	O ₄	O ₅	O 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	O1	O2	O 3	Q 4	O 5	Q 98
Q14 _D Research/Scholarship (include research, reviewing or preparing articles or books, attending or preparing for professional meetings or	Department	O 1	O 2	O 3	Q 4	O 5	O 98



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conferences, reviewing or writing proposals, seeking outside funding)							
Q14_E Patient Care/Client Services (include clinical service, counseling patients or families, administrative tasks associated with clinical service)	Medical School	O1	O2	O3	Q 4	O5	O 98
Q14 _F Patient Care/Client Services (include clinical service, counseling patients or families, administrative tasks associated with clinical service)	Department	O1	O2	O 3	Q 4	O5	9 98
Q14_G Administration/Institutional Service (include university, medical school, health system, faculty practice or department administrative duties, meetings, committee work)	Medical School	Q1	Q 2	O3	Q 4	Q5	9 98
Q14_H Administration/Institutional Service (include university, medical school, health system, faculty practice or department administrative duties, meetings, committee work)	Department	O1	O 2	О3	O 4	O5	9 98



Departmental Governance

//ASK ALL//

//88=NO ANSWER (HIDDEN)//

Q15. Please indicate the extent to which you agree or disagree with the following statements.

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	l don't know
Q15_A	There is sufficient communication from the department chair's office to the faculty about the department	O_1	O_2	O ₃	\mathbf{O}_4	O ₅	
Q15_B	My department does a good job explaining departmental finances to the faculty	O_1	O ₂	O ₃	O ₄	O ₅	
Q15_C	The department chair's priorities for the department are <u>clear</u>	O_1	O ₂	O ₃	O ₄	O ₅	O ₉
Q15_D	The chair's priorities for the department are reasonable	O_1	O ₂	O ₃	O ₄	O ₅	O ₉
Q15_E	In general, the department chair's priorities are aligned with the dean's priorities	O_1	O_2	O ₃	O ₄	O ₅	O ₉

//ASK ALL//

//88=NO ANSWER (HIDDEN)//

Q16. Please indicate the extent to which you agree or disagree with the following statements.

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	l don't know
Q16_A	The pace of decision making in the department is reasonable	O_1	O ₂	O ₃	O ₄	O ₅	O ₉
Q16_B	There are sufficient opportunities for faculty participation in the governance of this department	O_1	O_2	O ₃	O_4	O ₅	O ₉
Q16_C	The department chair sets a good example to reflect our medical school's values	O_1	O_2	O ₃	O ₄	O ₅	O ₉



Medical School Governance

//ASK ALL//

//88=NO ANSWER (HIDDEN)//

Q17. Please indicate the extent to which you agree or disagree with the following statements.

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	l don't know
Q17_A	There is sufficient communication from the dean's office to the faculty about the medical school	O_1	O_2	O ₃	O_4	O ₅	
Q17_B	Senior leadership does a good job explaining medical school finances to the faculty	O_1	O ₂	O ₃	O ₄	O ₅	
Q17_C	The dean's priorities for the medical school are clear	O_1	O ₂	O ₃	O ₄	O ₅	O ₉
Q17_D	The dean's priorities for the medical school are reasonable	O_1	O ₂	O ₃	O ₄	O ₅	O ₉
Q17_E	In general, the dean's priorities are aligned with the medical school mission	O_1	O_2	O ₃	O_4	O ₅	O ₉

//ASK ALL//

//88=NO ANSWER (HIDDEN)//

Q18. Please indicate the extent to which you agree or disagree with the following statements.

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	l don't know
Q18_A	The pace of decision making in the dean's office is reasonable	O_1	O ₂	O ₃	O_4	O ₅	O ₉
Q18_B	There are sufficient opportunities for faculty participation in the governance of this medical school	O_1	O_2	O ₃	O ₄	O ₅	O ₉
Q18_C	Faculty can express their opinions about the school without fear of retribution	O ₁	O ₂	O ₃	O ₄	O ₅	O 9



Relationship with Supervisor

//ASK ALL//

//88=NO ANSWER (HIDDEN)//

Q19. Please indicate the extent to which you <u>agree or disagree</u> with the following statements about the <u>supervisor who completes your performance review.</u>

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Q19_A	I feel appreciated by my supervisor	O_1	O ₂	O ₃	O ₄	O ₅
Q19_B	My supervisor sets a good example to reflect this medical school's values	O_1	O ₂	O ₃	O ₄	O ₅
Q19_C	My supervisor actively encourages my career development	O_1	O ₂	O ₃	O ₄	O ₅
Q19_D	My supervisor listens to what I have to say	O_1	O_2	O ₃	O ₄	O 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)?
 - O_1 Yes
 - \mathbf{O}_0 No
 - O_9 I don't know [SKIP TO Q23]
 - *88 NO ANSWER //HIDDEN//



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

Q21. Please indicate the extent to which you agree or disagree 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	O_1	O ₂	O ₃	O ₄	O ₅

^{*88} NO ANSWER //HIDDEN//

//ASK ONLY IF Q20 IS 1//

Q22. Please indicate the extent to which you agree or disagree 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	O_1	O_2	O_3	O_4	O 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?

 O_1 Yes

 \mathbf{O}_0 No

*88 NO ANSWER //HIDDEN//

Q24. Please indicate the extent to which you agree or disagree with the following statement.

				Neither		
				Agree		
		Strongly		nor		Strongly
		Disagree	Disagree	Disagree	Agree	Agree
Q24_A	Receiving regular feedback about my job performance is	O_1	O_2	O_3	O_4	O ₅
	important to me					

^{* 88=}NO ANSWER //HIDDEN//



//ASK IF Q23=1//

//88=NO ANSWER (HIDDEN)//

Q25. Please indicate the extent to which you agree or disagree 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	O_1	O ₂	O ₃	O ₄	O ₅
Q25_B	I am satisfied with how frequently I receive feedback from my unit head	O_1	O_2	O ₃	O ₄	O ₅

Opportunities for Career and Professional Growth

//ASK ALL//

//88=NO ANSWER (HIDDEN)//

Q26. Please indicate the extent to which you agree or disagree 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	O_1	O_2	O ₃	O ₄	O ₅	O ₉₈
Q26_B.	I am satisfied with the pace of my professional advancement at this medical school	O_1	O_2	O ₃	O ₄	O ₅	O ₉₈
Q26_C.	I am satisfied with my opportunities for professional development at this medical school	O ₁	O ₂	O ₃	O ₄	O ₅	O ₉₈

//ASK ALL//



//88=NO ANSWER (HIDDEN)//

Q27. Please indicate the extent to which you <u>agree or disagree</u> 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 clear to me	O ₁	O ₂	O ₃	O ₄	O ₅	O 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 reasonable to me	O ₁	O ₂	O ₃	O ₄	O ₅	O 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 clear to me	O ₁	O ₂	O ₃	O ₄	O ₅	O 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 reasonable to me	O ₁	O ₂	O ₃	O ₄	O ₅	98
Q27 _E Patient Care/Client Services (include clinical 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 clear to me	\mathbf{O}_1	O_2	O ₃	O ₄	Q ₅	O ₉₈
Q27 _F Patient Care/Client Services (include clinical 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 reasonable to me	O ₁	O ₂	O ₃	Q ₄	O ₅	O 98



Q27 _G Administration/Institutional Service (include university, medical school, health system, faculty practice or department administrative duties, meetings, committee	To be promoted in rank, what I must do in this mission area is	O_1	O_2	O ₃	O ₄	O_5	O ₉₈
work)	clear to me						
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 reasonable to me	O ₁	O ₂	O ₃	O ₄	O ₅	O ₉₈

//ASK ALL//

//88=NO ANSWER (HIDDEN)//

Q28. Please indicate the extent to which you agree or disagree with the following statements.

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	l don't know
Q28_A	At my medical school the criteria for promotion are consistently applied to faculty across comparable positions	O_1	O_2	O ₃	\mathcal{O}_4	O ₅	O 9
Q28_B	My medical school offers equal opportunities to all faculty members <u>regardless of gender</u>	O_1	O ₂	O ₃	O ₄	O ₅	O 9
Q28_C	My medical school offers equal opportunities to all faculty members <u>regardless of race/ethnicity</u>	O_1	O_2	O ₃	O_4	O ₅	O ₉
Q28_D	My medical school offers equal opportunities to all faculty members <u>regardless of sexual</u> <u>orientation</u>	O_1	O_2	O_3	O_4	O ₅	O ₉

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



Collegiality and Collaboration

//ASK ALL//

//88=NO ANSWER (HIDDEN)//

Q29. Please indicate the extent to which you <u>agree or disagree</u> 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 <u>personal</u> interaction I have with departmental colleagues	O_1	O_2	O ₃	O ₄	O ₅
Q29_B	The quality of <u>professional</u> interaction I have with departmental colleagues	O_1	O ₂	O ₃	O ₄	O ₅
Q29_C	How well I "fit" (i.e., my sense of belonging) in my department	O_1	O ₂	O ₃	O ₄	O ₅
Q29_D	How well I "fit" (i.e., my sense of belonging) in my medical school	O_1	O ₂	O_3	O ₄	O ₅
Q29_E	The intellectual vitality in my department	O ₁	O ₂	O ₃	O ₄	O ₅
Q29_F	The intellectual vitality in my medical school	O ₁	O ₂	O ₃	O ₄	O ₅

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

//ASK ALL//

//88=NO ANSWER (HIDDEN)//

Q30. Please indicate the extent to which you agree or disagree 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

//ASK ALL//

//88=NO ANSWER (HIDDEN)//

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	\mathcal{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 the extent to which you agree or disagree with the following statements.

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	l 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 <u>department</u> 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 <u>department</u> is successful in retaining high quality faculty members	O_1	O ₂	Q ₃	O ₄	O ₅	O ₉

//ASK ALL//

//88=NO ANSWER (HIDDEN)//

Q33. Please indicate the extent to which you agree or disagree with the following statements.

My department is successful in...

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	l don't know
Q33_A	Recruiting <u>female</u> faculty members	O_1	O ₂	O ₃	O_4	O ₅	O ₉
Q33_B	Recruiting <u>racial/ethnic minority</u> faculty members	O_1	O ₂	O ₃	O ₄	O ₅	O 9
Q33_C	Retaining <u>female</u> faculty members	O_1	O ₂	O ₃	O_4	O ₅	O ₉
Q33_D	Retaining <u>racial/ethnic minority</u> 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
 - O₀ 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."
 - UNC Medical Center
 - Chatham Hospital
 - Nash Health Care
 - Rex Health Care

•	Other (please specify):	

*88 NO ANSWER //HIDDEN//

Q36. Please indicate your level of <u>satisfaction or dissatisfaction</u> with the following statements regarding the location where you spend the most time in your clinical practice.

		Very Dissatisfied	Dissatisfied	Neither Satisfied nor Dissatisfied	Satisfied	Very Satisfied	N/A
Q36_A	Opportunities for physician input in management or administrative decisions	O ₁	O ₂	O ₃	O ₄	O ₅	O ₉₈
Q36_B	Communication to physicians about this location's financial status	\mathbf{O}_1	\mathbf{O}_2	O ₃	Q ₄	O ₅	O ₉₈
Q36_C	The teamwork between physicians and other clinical staff	\mathbf{O}_1	O_2	O ₃	O_4	O ₅	O ₉₈
Q36_D	Communication between physicians and senior administrators	\mathbf{O}_1	O_2	O ₃	\mathcal{O}_4	O ₅	O ₉₈
Q36_E	Location's responsiveness in meeting my requests as a physician	O_1	O_2	O ₃	O ₄	O ₅	O ₉₈
Q36_F	My ability to provide a high quality of patient care in this location	O_1	O_2	O ₃	O_4	O ₅	O ₉₈



Custom.	My ability to provide safe patient care in this location	\mathbf{O}_1	O_2	O ₃	\mathbf{O}_4	O_5	O ₉₈
Q36_G	How well this clinical location functions overall as it relates to patient care	O ₁	O ₂	O ₃	O ₄	O ₅	O ₉₈

Custom. Please indicate the extent to which you agree or disagree with the following statements regarding the location where you spend the most time in your clinical practice.

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Custom	The environment for staff supports the report of medical errors and concern	O_1	O ₂	O ₃	O ₄	O ₅
Custom	There are initiatives to improve the quality of patient care relative to safety issues	O_1	O ₂	O ₃	O ₄	O ₅
Custom	I am likely to recommend the hospital/practice to friends and relatives	O_1	O ₂	O ₃	\mathcal{O}_4	O ₅

Custom. Please indicate the extent to which you agree or disagree with the following statements.

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Custom	I have a sense of fulfillment in my work	O_1	O_2	O ₃	O_4	O ₅
Custom	I am committed to investing my thoughts and ideas into my hospital/clinic	O_1	O ₂	O ₃	O ₄	O ₅
Custom	I enjoy my work	O_1	O ₂	O ₃	O_4	O ₅
Custom	I feel a sense of ownership	O_1	O ₂	O ₃	O_4	O ₅
Custom	My work is rewarding	O_1	O ₂	O ₃	O ₄	O ₅



//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
- \square_2 Family care (i.e., care for elderly or sick relative)
- \square_3 Other practice site or other professional position
- □₄ Lifestyle choice/greater work-life balance
- □₅ Retirement/phased retirement
- ☐₆ Health reasons
- \square_7 Workload management
- □₈ Other (Please specify [PT2_oth] _____)

*88 NO ANSWER //HIDDEN//



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

PT3. Please indicate the extent to which you <u>agree or disagree</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	O ₁	O ₂	O ₃	O ₄	O ₅
PT3_B	My institution provides necessary resources for part-time faculty	O ₁	O ₂	O ₃	Q ₄	O ₅
PT3_C	My supervisor is supportive of my part-time arrangement	O_1	O ₂	O ₃	O_4	O ₅
PT3_D	Part-time faculty are able to serve in leadership positions at my institution	O_1	O ₂	O ₃	O ₄	O ₅
PT3_E	My institution promotes the cultural acceptance of part- time work	O ₁	O ₂	O ₃	O ₄	O ₅

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	O_1	O_2	O ₃	\mathcal{O}_4	O ₅
PT4_B	Ability to meet department or division needs	O_1	O ₂	O ₃	O ₄	O ₅
PT4_C	Ability to fulfill job responsibilities (i.e., being able to accomplish what you need to do)	\mathbf{O}_1	O_2	O ₃	O ₄	O ₅
PT4_D	Opportunities for advancement	O_1	O ₂	O ₃	O ₄	O ₅
PT4_E	Ability to manage workload	O_1	O ₂	O ₃	O ₄	O ₅
PT4_F	Access to professional development opportunities	O_1	O_2	O ₃	O ₄	O ₅
PT4_G	My protected time for certain activities (e.g., research, administration)	O_1	O ₂	O ₃	O ₄	O ₅
PT4_H	Ability to return to or obtain a full-time position, if desired	O_1	O_2	O ₃	O ₄	O ₅

^{**}ROLL-OVER DEFINITION: Current part-time arrangement- overall satisfaction with your current part-time arrangement.



PT5. Has your part-time status hindered the achievement of your professional goals in ways other thar
lengthened timeline?

O_1	Yes: Please describe how:	

 \mathbf{O}_0 No

Global Satisfaction

//ASK ALL//

//88=NO ANSWER (HIDDEN)//

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?	O_1	O_2	O_3	O ₄	O ₅
Q37_B	All things considered, how satisfied or dissatisfied are you with your medical school as a place to work?	O_1	\mathbf{O}_2	O ₃	O_4	O ₅

//ASK ALL//

Q38. Do you plan to retire in the next 1-2 years?

- O₁ Yes [SKIP TO Q41]
- \mathbf{O}_0 No
- O₉ 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?

- ${\bf O}_1$ Yes, I am seriously considering leaving this medical school in the next 1-2 years
- ${
 m O_2}$ No, I plan on staying for at least that long [SKIP TO Q41]
- O₉ I don't know

*88 NO ANSWER //HIDDEN//



Q40.

//ASK ONLY IF Q39=1, 9 OR 88//

Do you plan to leave academic medicine in the next 1-2 years?

(
	O ₂ No							
(O ₉ Not	sure						
	*88	NO ANSWER //HIDDEN//						
/	/ASK ALL	.//						
Q41.	Ple	ase indicate the extent to which you agree	or disagree	e with the	following	stateme	nt.	
			Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	I'm Not Sure
	Q41_ <i>A</i>	A If I had it to do all over, I would again choose to work at this medical school	O ₁	O ₂	O ₃	O ₄	O ₅	O 9
Prov	الديم عاداد		_					
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//ASK ALL//

Q43.	How do you self-identify? Please select all that apply:	
\square_4	Hispanic, Latino, or of Spanish origin	
\square_0	American Indian or Alaska Native	
\square_1	Asian	
□3	Black or African American	
 5	Native Hawaiian or other Pacific Islander	
\square_2	White	
□8	Other (Please specify [Q43_oth]	_)
O_9	I do not wish to identify //VALIDATEIF 9 AND ANOTHER CODE SELECTED //	
	*88 NO ANSWER //HIDDEN//	
//AS	K ALL//	
Q44.	What is your age group?	
O_1	Under 28 years old	
O_2	28-45 years old	
O_3	46-65 years old	
O_4	Over 65 years old	
O_9	I do not wish to identify	
	*88 NO ANSWER //HIDDEN//	



Suggestions 1	for Im	provement
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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//

Q47. Why do you work in academic medicine?

[OPEN END] //2,000 CHARACTERS//

*88 NO ANSWER //HIDDEN//

CUSTOM QUESTIONS FROM UNC:

Custom. Given the opportunity, I would seek and use a mentor to help me with: (Check all that apply)

U	Career	pianning	and	guidanc	e
_					

- Learning the ropes in the medical school
- Getting started doing research
- Establishing non-research scholarship
- □ Professional networking
- □ Other
- □ N/A

Custom. What can the institution do to enhance your professional developmental needs?



Custom. Are you currently...

- single, never married
- single (separated, divorced or widowed)
- partnered or married with someone who works full time in academia
- partnered or married with someone who works part time in academia
- partnered or married with someone who works full time outside academia
- partnered or married with someone who works part time outside academia
- partnered or married with someone who does not work outside the home

Custom. Do you have any of the following responsibilities? (Select all that apply)

	, , ,		•	,,
	$\hfill\Box$ children who live with you for at least half the year			
	elders for whom you are providing ongoing care for	more than 3	hours per week	
	a disabled or ill spouse, partner, or child			
	$f \Box$ a disabled or ill family member who is not a parent,	spouse/parti	ner, or child	

Custom. What suggestions do you have for helping this institution become a more family-friendly place to work?

Custom. Overall, based on your definition of burnout, how would you rate your level of burnout?

- I enjoy my work. I have no symptoms of burnout
- Occasionally I am under stress, and I don't always have as much energy as I once did, but I don't feel burned out
- I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion
- The symptoms of burnout that I'm experiencing won't go away. I think about frustration at work a lot
- I feel completely burned out and often wonder if I can go on. I am at the point where I may need some changes or may need to seek some sort of help

Custom. What can the institution do to improve the quality of life for its faculty			

[Thank You Page]

Thank You

Thank you for participating in the 2016 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 2016 as part of the AAMC's Faculty Forward program.



(Save Page)

//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.