

Annual Survey

1. Current Job Title:

- | | |
|--|---|
| <input type="radio"/> Medical Secretary | <input type="radio"/> Administrative Assistant |
| <input type="radio"/> Executive Secretary | <input type="radio"/> Program Manager |
| <input type="radio"/> Administrative Coordinator | <input type="radio"/> Academic Program Manager |
| <input type="radio"/> Administrative Program Coordinator | <input type="radio"/> Associate Director of Education |
| <input type="radio"/> Education Coordinator | <input type="radio"/> Program(s) Manager |
| <input type="radio"/> Project Coordinator | <input type="radio"/> Administrative Manager |
| <input type="radio"/> Academic Coordinator | <input type="radio"/> Administration Manager |
| <input type="radio"/> Project Facilitator | |
| <input type="radio"/> Other (please specify) | |

2. Job grade level

- | | |
|--|--------------------------------|
| <input type="radio"/> A | <input type="radio"/> D Exempt |
| <input type="radio"/> B | <input type="radio"/> E |
| <input type="radio"/> C | <input type="radio"/> F |
| <input type="radio"/> D non-exempt | <input type="radio"/> G |
| <input type="radio"/> Other (please specify) | |

3. Education: Select the highest educational level completed

- | | |
|--|--|
| <input type="radio"/> High School | <input type="radio"/> Bachelor's Degree |
| <input type="radio"/> High School plus some college coursework | <input type="radio"/> Some Graduate Work |
| <input type="radio"/> Other Training/Certification Program | <input type="radio"/> Graduate Degree |
| <input type="radio"/> Associate Degree | |

Wellness

4. How often do you feel overwhelmed from your work?

- | | |
|---|--|
| <input type="radio"/> Everyday | <input type="radio"/> Once a month |
| <input type="radio"/> A few times a week | <input type="radio"/> A few times a year |
| <input type="radio"/> Once a week | <input type="radio"/> Never |
| <input type="radio"/> A few times a month | |

5. Do you have your own office?

- Yes
- No
- Other (please specify)

6. Are you aware of what the University of Utah offers currently for wellness or burnout activities specifically for staff?

- Yes
- No
- Other (please specify)

7. What do you enjoy most about your job?

8. What is your biggest struggle at work?

9. Do you receive support/help at busier, more stressful times (i.e. interview season, onboarding season)?

Yes

No

Please comment on your experience

10. I have access to the things I need to do my job well.

Strongly agree

Disagree

Agree

Strongly disagree

Neither agree nor disagree

11. How important is feedback to you?

Very important

Not so important

Somewhat important

Not at all important

Neutral

12. Do you get timely and useful feedback about your work?

Most of the time

Sometimes

Rarely

Never

13. Who would you like to receive feedback from (PD, other PC's, GME Office)?

14. What type of life long learning activities do you actively participate?

Attending national meetings (ACGME, Special Conference, Etc.)

Participating in education research

Participate in webinars

Presenting at national meetings

Reading Journals

None

Presenting at local GME meetings

Other (please specify)



Program Coordinator/Manager Advocacy Committee and GME Questions

15. Which tools provided by the Program Coordinator/Manager Advocacy Committee have been most helpful to you (check all that apply).

- | | |
|---|--|
| <input type="checkbox"/> Group conversations | <input type="checkbox"/> Newsletter |
| <input type="checkbox"/> Program Coordinator presentation: Emotional Intelligence | <input type="checkbox"/> Site visit tips with Natalie Moore |
| <input type="checkbox"/> Program Coordinator presentation: True Color Personality Test with Pamela Carpenter and Dr. Herman | <input type="checkbox"/> Tips to use ERAS and interview process: Oakley Preston and Stacie Huber |
| <input type="checkbox"/> Shadowing/Observership forms | <input type="checkbox"/> Balancing life during interview season with Carol Wall |
| <input type="checkbox"/> Other (please specify) | |

16. Have there been other improvements in your job (and job satisfaction) based on the work of the Program Coordinator/Manager Advocacy Committee and recommendations sent to the Program Directors and Administrators?

- No
- Yes, please explain:

17. Are there areas or projects you would like to see the Program Coordinator/Manager Advocacy Committee focus on to improve your job satisfaction? (Please provide as much detail as possible)

18. Which of the following possible trainings would you be interested in receiving in future monthly coordinator meetings?

- | | |
|--|---|
| <input type="checkbox"/> Assertiveness Training | <input type="checkbox"/> Time management and productivity |
| <input type="checkbox"/> Giving and receiving feedback | <input type="checkbox"/> Working with difficult people |
| <input type="checkbox"/> Presentation skills | <input type="checkbox"/> Navigating communication styles |
| <input type="checkbox"/> Stress management from EAP | |
| <input type="checkbox"/> Other (please specify) | |

19. How can the Program Coordinator/Manager Advocacy Committee Support you in your current role?

20. How can the GME office support you in your current role?

21. Do you have any suggestions or requests for the Program Coordinator/Manager Advocacy Committee to assist you or other PCs?

22. Would you like to speak with a Program Coordinator/Manager Advocacy Committee member?

No

Yes. If yes, please email Adriana.Garcia@hsc.utah.edu or Carol.Wall@hsc.utah.edu

Who's Who.

23. Which programs do you have direct oversight of?

- Residency
- Fellowship
- Both (Residency & Fellowship)

Resident Coordinator/ Manager

24. How many residency programs do you have direct oversight of?

25. How many residents do you oversee?

Please review the FTE Grid

26. Does your FTE follow the Program Coordinator/Manager Advocacy Committee (PCMAC) FTE (above grid) recommendation?

- Yes No
- Other (please specify)

27. How many hours (on average) do you work per week?

- 40 47-50
- 40-43 50+
- 44-46
- Other (please specify)

28. Are you allowed to work from home/telecommute?

- Yes No
- Other (please specify)

29. On average, how many hours do you work from home/telecommute per week?

30. What type of work do you do outside your normal working hours? Please check all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Answering emails | <input type="checkbox"/> ACGME NAS |
| <input type="checkbox"/> Answering text messages | <input type="checkbox"/> Interview Season |
| <input type="checkbox"/> Making phone calls | <input type="checkbox"/> ADS |
| <input type="checkbox"/> Finishing paperwork | |
| <input type="checkbox"/> Other (please specify) | |

31. Are you provided with office assistants (work study students) or other regular staff members who assist as needed?

- Yes No
- Other (please specify)

32. How many program coordinators work for your program?

33. Number of Program Coordinators in your position in last five years (turnover)?

34. Percentage of time allotted by your program for Program Coordinator duties:

- | | |
|------------------------------|------------------------------|
| <input type="radio"/> 5-10% | <input type="radio"/> 40-50% |
| <input type="radio"/> 10-20% | <input type="radio"/> 50-75% |
| <input type="radio"/> 20-30% | <input type="radio"/> 75-95% |
| <input type="radio"/> 30-40% | <input type="radio"/> 100% |

Fellowship Coordinator/Manager

35. How many fellowship programs do you have direct oversight of? (Please indicate Accredited or Non-Accredited)

36. How many fellows do you oversee?

Please review the FTE Grid

37. Is your FTE following the Program Coordinator/Manager Advocacy Committee (PCMAC) FTE (above) recommendation?

- Yes No
- Other (please specify)

38. How many hours (on average) do you work per week?

- 40 47-50
- 40-43 50+
- 44-46
- Other (please specify)

39. Are you allowed to work from home/telecommute?

- Yes No
- Other (please specify)

40. What type of work do you do outside your normal working hours? Please check all that apply.

Answering emails

ACGME NAS

Answering text messages

Interview Season

Making phone calls

ADS

Finishing paperwork

Other (please specify)

41. On average, how many hours do you work from home/telecommute per week?

42. Are you provided with office assistants (work study students) or other regular staff members who assist as needed?

Yes

No

Other (please specify)

43. How many program coordinators work for your program?

44. Number of Program Coordinators in your position in last five years (turnover)?

45. Percentage of time allotted by your program for Program Coordinator duties:

5-10%

40-50%

10-20%

50-75%

20-30%

75-95%

30-40%

100%

Program Coordinator/Manager for Residency and Fellowship

46. How many programs do you have direct oversight of?

Residency

Fellowship

Please review the FTE Grid

47. Is your FTE following the Program Coordinator/Manager Advocacy Committee (PCMAC) FTE (above) recommendation?

Yes

No

Other (please specify)

48. How many hours (on average) do you work per week?

49. Are you allowed to work from home/telecommute?

Yes

No

Other (please specify)

50. What type of work do you do outside your normal working hours? Please check all that apply.

Answering emails

ACGME NAS

Answering text messages

Interview Season

Making phone calls

ADS

Finishing paperwork

Other (please specify)

51. On average, how many hours do you work from home/telecommute per week?

52. Are you provided with office assistants (work study students) or other regular staff?

53. How many program coordinators work for your program?

54. Number of Program Coordinators in your position in last five years (turnover)?

55. Percentage of time allotted by your program for Program Coordinator duties:

5-10%

40-50%

10-20%

50-75%

20-30%

75-95%

30-40%

100%

Program Director Questions

56. Do you have regularly scheduled meetings with your Program Director?

- Yes No
- Other (please specify)

57. How often do you meet with your Program Director?

- Three or more times per week Almost never
- One to two times per week As needed
- Once a month
- Other (please specify)

58. Is it difficult to meet with your PD due to their tight schedule or other responsibilities?

- Yes No
- Other (please specify)

59. Is your PD supportive of your needs, responds to your requests in a timely manner in order for you to complete your assigned tasks?

- Yes No
- Other (please specify)

60. When updating the ACGME annual ADS update:

- The program director gives me all the information to put into Webds and I submit with minimal to no oversight.
- The program director expects me to complete WebAds in its entirety and submit with minimal to no oversight.
- The program director and I complete the task in tandem; program director does a final review of all sections before submitting.
- The program director and I divide tasks up for completion; program director does a final review of all sections before submitting.
- The program director expect me to complete WebAds in its entirety; program director does a final review of all sections before submitting.

61. My program director often seeks my opinion when decisions need to be made.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

62. Are you as the coordinator/manager taking on Program Director responsibilities?

- No
- Yes, please explain:

63. Is your PD your immediate supervisor?

- Yes
- No
- Other (please specify)

Program Coordinator/Manager Questions

64. Do you have responsibilities outside the program? Please check all that apply

- | | |
|---|---|
| <input type="checkbox"/> Medical student clerkships/courses | <input type="checkbox"/> Administration Director/ Assistant Manager |
| <input type="checkbox"/> Observerships: Medical Student Shadowing, Undergrad shadowing, Other shadowing, Global/International shadowing | <input type="checkbox"/> Department Research |
| <input type="checkbox"/> Project management (please provide examples) | <input type="checkbox"/> Department Grants |
| <input type="checkbox"/> Patient Scheduling | <input type="checkbox"/> Department Faculty Appointments |
| <input type="checkbox"/> Faculty assistance: Academic/Administration, Research, Clinical | <input type="checkbox"/> Department Staff HR- hiring / on boarding |
| <input type="checkbox"/> Clinical Administrative Work (Patient contact) | <input type="checkbox"/> Kronos Coordinator |
| <input type="checkbox"/> Finance responsibilities: P card reallocation, Manage reports, Other (please provide examples) | <input type="checkbox"/> Website management (Pulse or dept. or program) |
| <input type="checkbox"/> Supervise staff: Medical secretaries, Office assistants, Other (please specify) | |
| <input type="checkbox"/> Other (please specify) | |

65. Please indicate the level of financial support your program provides for you to attend national meetings:

- | | |
|---|--|
| <input type="radio"/> Three or more meetings per year | <input type="radio"/> partial support to one meeting |
| <input type="radio"/> Two meetings per year | <input type="radio"/> None |
| <input type="radio"/> One meeting per year | |
| <input type="radio"/> Other (please specify) | |

66. Annual Salary

- under \$25K
- \$25K-\$29K
- \$30K-\$34K
- \$35K-\$39K
- \$40K-\$44K
- \$45K-\$49K
- \$50K-\$54K
- \$55K-\$59K
- \$60K-\$64K
- \$65K-\$69K
- \$70K and above

67. Hourly or Salaried Employee?

- Hourly
- Salaried

68. How satisfied are you with your pay?

- Highly satisfied
- Satisfied
- Not Satisfied

U of U HR Quartile (Please review)

69. Where are you currently on the quartile scale?

(Copy/Paste to a different window)

<https://www.hr.utah.edu/comp/salaryDetermination.php>

- 1st quartile
- 2nd quartile
- 3rd quartile
- 4th quartile

Comments

70. By reviewing the quartile scale where would you be satisfied with salary?

- 1st quartile
- 2nd quartile
- 3rd quartile
- 4th quartile

Comments

71. Did you receive an annual department increase (cost of living) for 2018?

- Yes Don't know
- No
- Other (please specify)

72. During interview season, do you feel your opinion is valued (rank list, final decision)?

- Yes
- Somewhat
- No

Comments

73. When a medical student seeks advice regarding the competitiveness of the program, I feel comfortable speaking to the student about the program.

- Yes
- No

Comments

74. Length of time in your current position

- Less than 1 year 6 to 10 years
- 1 to 2.5 years 11 years or more
- 2.5 to 5 years

New Program Coordinator/Manager

75. Did you receive training from the previous Program Coordinator when you were hired?

Yes

No

76. Did you receive any training for your position other than that provided by the GME office (Ronnie Koon)?

Yes

No

Other (please specify)

77. Were you assigned a mentor as part of your GME training?

Yes

No, here's my email. Please assign me a mentor.

Email address

78. As a new coordinator, in the past year have you considered resigning from your position (prepared resume, applied to other positions) due to increased workload or work-related stressors?

No

Yes

If yes, would you care to elaborate why? (All information shared is completely anonymous)

79. If you plan to leave your current position, what are your immediate plans?

Seeking a new position within GME

N/A

Seeking a new position outside of GME

Not Leaving

Retiring

Other (please specify)

80. Do you plan to continue in your current position for the immediate future (2 years)?

Yes

No

Other (please specify)

Senior Coordinator

81. As an experienced coordinator (2.5 + years) would you like to be a Mentor?

No

Yes. Please email Candice in the GME office at
Candice.Ingersoll@hsc.utah.edu

82. As a senior coordinator, in the past year have you considered resigning from your position (prepared resume, applied to other positions) due to increased workload or work-related stressors?

Yes

No

If yes, would you care to elaborate why? (All information shared is completely anonymous)

83. Do you plan to continue in your current position for the immediate future (2 years)?

Yes

No

Comments

84. If you plan to leave your current position, what are your immediate plans?

Seeking a new position within GME

Not Leaving

Seeking a new position outside of GME

N/A

Retiring

Other (please specify)

85. Have you received a job reclassification

- No, I have not received a reclassification
- In progress
- Yes, I have received a reclassification. Please enter the year you received the reclassification.

(SR) Coordinator

86. If you are not working on a reclassification because of obstacles. What are some obstacles for you?

- N/A
- Not the time to ask
- Don't know how to ask
- Other (please specify)
- I have not approached upper management
- I hope they will value my work and approach me for reclassification
- I'm satisfied with my current title

SR Reclassification

87. Before you asked for your reclassification. Did you use the Program Coordinator/Manager Advocacy Committee (PCMAC)

Job Titles or materials to help ask for the reclassification?

Yes No

Other (please specify any other materials that might be helpful)

88. What was your previous title

89. What is your new title:

90. How satisfied are you with your new title?

Highly satisfied

Satisfied

Not satisfied

91. If you received a job reclassification, did you receive one of the following?

Salary increase for new title

Yearly department increase (cost of living)

Other (please specify)

92. How satisfied are you with your salary increase?

Highly satisfied

Satisfied

Not satisfied

93. With the salary increase for reclassification, did this come with more job responsibilities?

- Yes No
- Other (please specify)

94. With the reclassification, did this reduce your job responsibilities?

- Yes No
- Other (please specify)

95. With the reclassification, has your department hired additional administrative help for your residency or fellowship program?

- No
- Yes, please explain:

96. What was your previous salary before reclassification?

- | | |
|-----------------------------------|-----------------------------------|
| <input type="radio"/> Under \$25K | <input type="radio"/> \$50K-\$54K |
| <input type="radio"/> \$25K-\$29K | <input type="radio"/> \$55K-\$59K |
| <input type="radio"/> \$30K-\$34K | <input type="radio"/> \$60K-\$64K |
| <input type="radio"/> \$35K-\$39K | <input type="radio"/> \$65K-\$69K |
| <input type="radio"/> \$40K-\$44K | <input type="radio"/> Above \$70K |
| <input type="radio"/> \$45K-\$49K | |

97. What is your new salary?

- | | |
|------------------------------------|-----------------------------------|
| <input type="radio"/> Under \$25K | <input type="radio"/> \$50K-\$54K |
| <input type="radio"/> \$25K-\$29K | <input type="radio"/> \$55K-\$59K |
| <input type="radio"/> \$30K- \$34K | <input type="radio"/> \$60K-\$64K |
| <input type="radio"/> \$35K-\$39K | <input type="radio"/> \$65K-\$69K |
| <input type="radio"/> \$40K-\$44K | <input type="radio"/> Above \$70K |
| <input type="radio"/> \$45K-\$49K | |

98. Are you planning on taking advanced Medhub training?

- Yes
- No
- Other (please specify)

99. Do you participate in your CCC and PEC Committees? If so, are you planning on using the CCC and PEC functionalities in medhub?

- No, I don't participate
- No I will not use Medhub functionalities
- Yes
- Yes, with medhub training from GME

Comments

100. Will you be using the program dashboard in medhub?

- Yes
- Yes, with Medhub training from GME
- No

Comments

Almost Done

101. Do you know about the Training Administrators of Graduate Medical Education (TAGME)?

Yes

No

102. Are you interested in pursuing a Training Administrators of Graduate Medical Education (TAGME) Certification?

Yes

Maybe/ Unknown

No

Other (please specify)

103. Does your program provide financial support to take the TAGME certification?

Yes

No

Other (please specify)

104. Would you be interested in TAGME being a topic at one of the upcoming monthly coordinator meetings?

Yes

No

Comments

105. Are you planning to attend the ACGME conference in 2019?

Yes

Maybe

No

Comments

106. Do you attend the GME monthly Program Coordinator Meetings?

Regularly

Never

Sometimes

If sometimes or never, what is keeping you from attending? Is there a better day and time?

107. Additional Comments