Default Question Block

2015 PA Program Faculty and Directors Survey

Important Information about the PAEA PA Program Faculty and Directors Survey

Please Read Carefully

The PAEA PA Program Faculty and Directors Survey is administered by the Physician Assistant Education Association (PAEA) to all physician assistant (PA) program faculty and directors. The survey seeks information from PA faculty to provide benchmarking information, and to help identify quality of life factors that impact recruitment and retention. The survey will take approximately 20 minutes to complete.

PAEA is the national organization that represents PA programs and advocates on behalf of educational programs, their faculty, and students. Questions on the survey cover topics such as:

- Demographic information
- Academic and employment background
- Factors related to your choice to apply to or remain at your current PA program
- Clinical practice
- Health and well-being

Participation Is Voluntary

Participation in this survey is voluntary. You have the right not to answer any question or set of questions. You may withdraw at any time by simply closing the survey. To help ensure that participation is voluntary, PAEA will not inform PA program directors which faculty or directors have started or completed the survey. If you believe you are being coerced into participation, please contact PAEA research staff (research@PAEAonline.org).

Confidentiality Statement

The data collected in this survey are classified as confidential. However, in order to accurately track response rate, we are asking each person to provide their email address, along with their program's name and state. This information will only be used for identifying duplicate responses, calculating response rates, contacting participants about questions regarding their responses, and to inform winners of the incentive drawings. Once this survey closes and duplicate responses are resolved, the emails will be completely removed from the database to ensure confidentiality. PAEA will only inform your program director of the current number of persons who have taken the survey and the response rate at the time that the reminders are sent. Your responses will <u>not</u> be released to your supervisor under any circumstances. PAEA does not use survey data for marketing purposes.

Confidential data may not be released with individual identification. Your agreement to participate in the survey is not considered to be permission to release your identified responses. The responses you provide on this survey are retained by PAEA in a secure database to which only a small number of designated PAEA research staff trained in human subjects protections and confidentiality procedures have access. Physician assistant programs receive data in reports that aggregate responses at the national levels. On occasion, for the purpose of conducting further studies, researchers may request a de-identified file of individual responses. PAEA reduces the probability of connecting responses to specific individuals by not providing information where the small number of respondents in a specific category would allow individuals to be reasonably identified. Researchers requesting deidentified files will be required to agree to terms that outline how the data may be used and for how long. This data collection activity has been reviewed according to PAEA policies and procedures and its Institutional Review Board and is considered to be minimal risk. PAEA has taken extensive measures to ensure the security of the data and the confidentiality of the responses. We believe that there are no anticipated risks or discomforts associated with taking this survey. Although our goal is to achieve 100% completion of all surveys, if you do not want to answer a question, please feel free to skip it.

Qualtrics Survey Software

If you have any questions about your rights as a participant or experience technical difficulties while completing the survey, contact PAEA research staff (research@PAEAonline.org; 703-667-4332.

By checking the button below and beginning the survey, you acknowledge that you have read the preceding information and freely consent to participate in this research.

I have read and understood this disclosure and agree to participate in the survey I have read and understood this disclosure and choose not to participate in the survey

About You

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Please enter your email address.

Note: This information will only be used for identifying duplicate responses, calculating response rates, contacting participants about questions regarding their responses, and to inform winners of the incentive drawings. Once this survey closes and duplicate responses are resolved, the emails will be completely removed from the database to ensure confidentiality.

Please select the state of your program's main location from the drop down menu.

Please select the name of your program from the drop down menu.

Please type in the five digit zip code for the business address of the PA program.

Do you work at one of your program's satellite campuses?

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No

Not applicable

Please enter the name and location of your satellite campus.

Please indicate your age.

Please indicate your gender.

Male

Female

Do not wish to report

Are you of Hispanic, Latino, or Spanish origin?

Yes

No

Do not wish to report

Please indicate your race.

American Indian or Alaskan Native

Asian

Black or African American

Multi-racial, please specify

Native Hawaiian or Other Pacific Islander

White/Caucasian

Other, please specify

Do not wish to answer

Your Professional Background

Please indicate your category.

Faculty

Professional staff

Are you a physician assistant (PA)?

Yes

No

Are you currently certified by the National Commission on Certification of Physician Assistants (NCCPA)?

Yes

No

Please select the year in which you were first certified by the NCCPA.



What degree or credential were you awarded at the time of graduation from <u>PA</u> <u>school</u>?

Certificate

Associate's degree

Bachelor's degree

Master's degree

More than one credential/degree was awarded, please specify

Other degree, please specify

What is the highest degree or credential you currently hold?

	Other, please specify
Doctorate (e.g., DHS, DO, EdD, JD, MD, PhD)	
Master's degree	
Bachelor's degree	
Associate's degree	
Certificate	

What type of doctoral degree(s) do you hold? Please check all that apply.

DHS	
DO	
EdD	
JD	
MD	
PhD	
	Other, please specify

What is your current academic rank?

Professor

Associate	professor
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Assistant professor

Lecturer/instructor

Other, please specify

In what year was your current academic rank awarded?

Please select the tenure track you have from the drop down menus below.

Tenure track	▲	
Type of track		

What is the length, in months, of your contract year?

9 months

10 months

12 months

Other, please specify

Please select the year in which you were hired at your current program.

+

Were you hired in the 2014-2015 academic year?

Yes

No

Please indicate your immediate past employment.

PA education

Other educational program (non-PA), please specify

Previously worked part-time at current institution/program

Clinical practice (including precepting)

Clinical practice (no precepting)

Unemployed

Other, please specify

When seeking a faculty position, to how many PA programs did you apply (including your current program)?

Please rate the importance of the following factors that influenced your choice to work for your current PA program.

			Neither important			
	Very important	Important	nor	Unimportant	Very unimportant	Not applicable
"Calling" to education	0	0	0	0	0	0
Clinical work arrangements	0	0	0	0	0	0
Fringe benefits (e.g., retirement plan, leave, tuition reimbursement, vacation)	0	0	0	0	0	0
Income	0	0	0	0	0	0
Location of program	0	0	0	0	0	0
Reputation of institution/program	0	0	0	0	0	0
Reputation of program personnel	0	0	0	0	0	0
Research opportunities	0	0	0	0	0	0
Tenure availability	0	0	0	0	0	0
Tuition waivers for dependents	0	0	0	0	0	0
Work-life balance	0	0	0	0	0	0
Other, please specify	0	0	0	0	0	0

Including your current program, how many PA programs have you worked for (at .5 FTE or higher)?

Your Position

Please select the title below that best describes your <u>primary</u> position with the PA program.

Note: If the actual position is different than the given choice, <u>please select the closet</u> <u>match</u>. You will be asked if you have a secondary position within the program.

Academic Coordinator Admissions Director/Coordinator Associate/Assistant Director **Clinical Coodinator** Clinical Faculty Data Analyst Dean or Associate/Assistant Dean **Didactic Faculty Director of Clinical Education Director of Didactic Education** Division Chief/Head/Department Chair Education Coordinator **Evaluation Specialist** Faculty with combined didactic and clinical responsibilities Medical Director **Program Director Research Coordinator Research Director** Researcher (academic faculty responsible for independent research activities 20-80% FTE) Technology/Information Specialist (IT)

How many years have you been in this position?

Note: If you have been in this position for less than a year, please enter the years as a decimal rounded to the nearest tenth. For example, if you have been in your position for 6 months, please enter 0.5.

Do you hold another position/title within the PA program?

Yes

No

Please select your secondary position within the PA program.

Note: If the actual position is different than the given choices, <u>please select the closet</u> <u>match</u>. If there is no match, select "other" and then specify.

Academic Coordinator
Admissions Director/Coordinator
Associate/Assistant Director
Clinical Coodinator
Clinical Faculty
Data Analyst
Dean or Associate/Assistant Director
Didactic Faculty
Director of Clinical Education
Director of Didactic Education
Division Chief/Head/Department Chair
Education Coordinator
Evaluation Specialist
Faculty with combined didactic and clinical responsibilities
Research Coordinator
Research Director
Researcher (academic faculty responsible for independent research activities 20-80% FTE)
Technology/Information Specialist (IT)
Other, please specify

What is your full time equivalent (FTE) in the PA program?

Note:

- Please enter a number between 0.5 and 1.0.
- Full time equivalent of 1.0 means you are considered full time, which is a typical work week of 40 hours or more.
- If you are provided release time for research or clinical practice and that is considered part of your regular responsibilities, do not subtract the release time from your FTE calculation.

Please indicate your annual salary paid from the employing institution for the 2014-2015 academic year.

Note:

- Please do **not** include salary from clinical work.
- For all monetary values entered, DO NOT include other characters, such as dollar signs (\$), commas (,), or periods (.). For example, for the value \$50,000, enter 50000.

Amount (\$)

Base salary for PA program duties (excluding fringe benefits)	
Other salary (e.g., administrative stipend)	
Teaching and other contributions at the same institution, but not at the PA program	

Please estimate your average work hours at the PA program <u>per week</u> for the 2014-2015 academic year.

Please estimate the average percent of time <u>per week</u> devoted to the following activities for the 2014-2015 academic year.

Note: Total must add to 100%. If you do not wish to answer, please enter "100" in "Other."

Administrative	0	%
Clinical	0	%
Research/Scholarship	0	%
Service	0	%
Teaching	0	%
Other, please specify	0	%
Total	0	%

Medical Director

Please enter your full time equivalent (FTE) for the following responsibilities.

Note:

- Please enter a number between ".05" and "1.0" FTE.
- For example, if you spend 60% of your time as a Medical Director and 40% as didactic faculty at the PA program, you would enter ".6" for Medical Director and ".4" for other duties and responsibilities within the PA program.
- Responses do not have to add to 1.0 FTE.

Medical Director	0
Other duties and responsibilities within the PA program	0
Other duties and responsibilities outside of the PA program, but at the same institution	0
Total	0

Please estimate the number of hours per week that you devote to the PA program activities.



Consider your duties as a Medical Director. Please select ALL of the activities in which you are involved.

- Administration
- Admissions
- Clinical teaching
- Committee work
- Curriculum development
- Didactic teaching
- Direct patient care
- Faculty development
- PA-related research
- Other research
- Other responsibilities, please specify

Please indicate proportions of your total income last year by:

Note: If you do not wish to answer, please enter "100" in "Other."

PA program

Institution but not PA program (e.g., Department of Family Medicine)

Clinical income	0	%
Other, please specify	0	%
Total	0	%

What is the total amount of your salary for your medical director duties only?

Note: For all monetary values entered, DO NOT include other characters, such as dollar signs (\$), commas (,), or periods (.). For example, for the value \$50,000, enter 50000.

Clinical Work

Do you work clinically?

Yes, on my own time Yes, I receive release time from my program Yes, I receive release time and I work additional hours on my own time No

What is the average number of clinical hours you work per week?

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	Hours
Hours on release from program	
Hours on my own	

What clinical specialty are you practicing primarily?

Dermatology Emergency medicine Family/general medicine General internal medicine

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General pediatrics	
General surgery	
Hospitalist	
Internal Medicine: Cardiology	
Internal Medicine: Other subspecialities	
Obstetrics/gynecology/women's health	
Occupational medicine	
Pediatric subspecialities	
Surgery: Orthopedics	
Surgery: Cardiovascular/thoracic	
Surgery: Neurological	
Surgery: Other subspecialities	
Urgent care	
Other, please specify	

Does your clinical work generate income?

Yes

No

Which of the following best describes your arrangement of payment with your program?

All income retained by myself

Part of income retained by myself

All income retained by program

My program has a form of practice plan formula

Other, please specify

How much income did your clinical work generate last calendar year (2014)?

Note:

- If you do not know the dollar amount for a given category, please leave it blank.
- If you received no income for that category, please enter zero (0).
- For all monetary values entered, DO NOT include other characters, such as dollar signs (\$), commas (,), or periods (.). For example, for the value \$50,000, enter 50000.

	Amount (\$)
Personal income	
Income generated for program/institution	

Job Satisfaction

Please rate how satisfied you are with the following:

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very dissatisfied	Not applicable
Clinical work arrangement	0	0	Ο	0	0	0
Current academic rank	0	0	0	0	0	0
Didactic or clinical teaching environment	0	0	0	0	0	0
Faculty development opportunities <u>outside</u> institution (e.g., conferences)	0	0	0	Ο	0	Ο
Faculty development opportunities <u>within</u> institution (e.g., continuing education)	0	0	0	Ο	0	Ο
Institutional/administrative leadership	0	0	0	0	0	0
Job responsibilities	0	0	Ο	0	0	0
Opportunities for community service	0	0	0	0	0	0
PA program curriculum	0	0	Ο	0	0	0
Program management/leadership	0	0	0	0	0	0
Promotion potential	0	0	0	0	0	0

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	Very satisfied	Satisfied	Neutral	Dissatisfied	Very dissatisfied	Not applicable
Quality of students	0	0	Ο	0	0	0
Research opportunities	0	0	Ο	0	0	0
Salary	0	0	Ο	0	0	0
Schedule flexibility	0	0	Ο	0	0	0
Staff support	0	0	Ο	0	0	0
Student faculty ratio	0	0	Ο	0	0	0
Teaching workload	0	0	Ο	0	0	0
Tenure requirements	0	0	0	0	0	0
Other benefits (e.g., healthcare, retirement	0	0	Ο	0	Ο	Ο

plan)

Please indicate the extent to which each of the following has been a <u>source of</u> <u>stress</u> for you during the past two years.

	Not at all stressful	Somewhat stressful	Very stressful	Not applicable
Child care	0	0	Ο	0
Colleagues	0	0	0	0
Committee work	0	0	0	0
Faculty meetings	0	0	0	0
Increased work responsibilities	Ο	0	0	0
Institutional budget cuts	0	0	0	0
Institutional procedures and "red tape"	0	0	Ο	0
Job security	0	0	0	0
Lack of personal time	0	0	0	0
Managing household responsibilities	0	0	0	0
My physical health	0	0	0	0
Personal finances	0	0	0	0
Research or publishing demands	0	0	0	0

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	Not at all stressful	Somewhat stressful	Very stressful	Not applicable
Review/promotion process	0	0	0	0
Self-imposed high expectations	0	0	0	0
Students	0	0	0	0
Subtle discrimination	0	0	0	0
Teaching load	0	0	0	0
Working with under- prepared students	0	0	0	0
During the past <u>two ye</u>	<u>ars,</u> have you:			
			Yes	No
Considered leaving acader	nia for another job		0	0
Considered leaving current another institution	institution for		0	0
Engaged in public service/ consulting without pay	professional		0	0
Received at least one firm	job offer elsewhere		0	0

Sought an early promotion

Sought early retirement

During the past <u>two years</u>, have you taken advantage of any of the following professional development opportunities at this institution?

0 0 00

	Yes	No	Not eligible	Not applicable
Incentives to develop new courses	0	0	0	0
Incentives to integrate new technology into your classroom	0	0	0	0
Internal grants for research	0	0	0	0
Paid workshops outside the institution focused on teaching	0	0	0	0
Paid sabbatical leave	0	0	0	0
Training for administrative leadership	0	0	0	0
Travel funds paid by the institution	0	0	0	0

Have you had any publications (first author or otherwise) over the span of your <u>PA</u> academic career?

Yes

No

How many of the following works have you had published (first author or otherwise) over the span of your <u>PA</u> academic career?

Abstracts	0
Articles in academic or professional journals (peer reviewed)	0
Articles in academic or professional journals/periodicals (non-peer reviewed)	0
Books, materials, or monographs	0
Chapters in edited volumes	0
Posters	0
Other (e.g., patents, computer software products)	0
Total	0

In the past year (2014), how many of your professional writings have been published or accepted for publication?

Accepted for publication	0
Published	0
Total	0

In the past year (2014), how many peer reviewed, scientific presentations (e.g., abstract) have you given?

The PA Profession

Are you currently a member of any of the following PA professional associations, groups, or societies? Please select all that apply.

American Academy of Physician Assistants (AAPA)

Physician assistant state organizations

Specialty/constituency organizations

Other, please specify

Are you currently actively involved in the leadership (board, committees, etc.) of any of the following PA professional groups/societies? Please select all that apply.

Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) commissioner ARC-PA site visitor American Academy of Physician Assistants (AAPA) National Commission on Certification of Physician Assistants (NCCPA) Physician Assistant Education Association (PAEA) Physician assistant specialty organization Physician assistant state chapter State regulatory agency/licensure agency Veterans caucus

Please estimate the number of volunteer hours per month spent on:

	Hours
Professional association/organization	
Community service	
Other	

Are you also directly involved in the education of other health professionals (e.g., teaching)?

Yes

No

Please specify the other health professionals. Please select all that apply.

Medicine (MD or DO) MPH (or other Medical Master's program)

Nursing, advanced practice

Nursing, general

Occupational therapy

Physical therapy

Pharmacy

Other, please specify

Please describe what services and products that PAEA could provide to assist you with your work.

What has been your greatest challenge(s) as a faculty member or director over the past year?

Please rate the following products/services that are currently offered by PAEA in terms of usefulness to you as a faculty member or director.

CASPA	Very useful	Useful O	Not useful	Not at all useful O	Not aware
Clinical resources (Preceptor Handbook, Clinical Manual)	0	0	Ο	0	0
Education Forum	0	0	0	0	0
End of Rotation Examinations (EORs)	0	0	0	0	0
Government relations/advocacy	0	0	0	0	0
Journal of Physician Assistant Education	0	0	0	0	0
Networker blog	0	0	0	0	0
New Program Directors Retreat	0	0	0	0	0
PA Focus website	0	0	0	0	0
PA Program Directory	0	0	0	0	0
PACKRAT	0	0	0	0	0
PAEA issue briefs	0	0	0	0	0
PAEA Pando Workshops (e.g., Basic Skills)	0	0	Ο	0	0
PAEA professional services/consultation	0	0	0	0	0
PAEA survey reports (e.g., Program Survey Report on Physician Assistant Education)	0	0	Ο	0	0
PAEA website	0	0	0	0	0
Other, please specify	0	0	0	0	0

Please rate the following products/services that could be potentially offered by PAEA in terms of usefulness to you as a faculty member or director.

Comprehensive exam	Very useful O	Useful O	Neutral O	Not useful	Not at all useful O	N/A O
Core competencies for primary care	0	0	0	0	0	0
Curriculum mapping	Ο	0	Ο	0	0	0
Diversity training	0	0	0	0	0	0
Mentoring	0	0	0	0	0	0
OSCE handbook	0	0	0	0	0	0
OSCE workshop	0	0	0	0	0	0
Pre-PA examination	0	0	0	0	0	0
Recorded video presentations for clinically related topics	0	0	0	0	0	0
Resource library	0	0	0	0	0	0
Webinars on best practices in education	0	0	0	0	0	0
Other, please specify	0	0	0	0	0	0

What other areas or topics would you like see offered as Pando Workshops?

Please rate your satisfaction with PAEA.

Very satisfied

Satisfied

Neutral

Dissatisfied

Very dissatisfied

Please share ideas for additional faculty or director survey questions below.

PAEA is interested in why you chose not to participate in this survey. If you are willing, please provide a brief explanation as to why you opted out of participation.

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