# Key Points for ACGME Faculty Survey

You will receive an email with the link to your survey. It will come from donotreply@acgme.org. If you have any issues, please contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**IMPORTANT: This is a high stakes survey on which investigatory site visits and accreditation decisions are based.**

* In all the Likert scale questions, only the top 2 answers are considered “compliant.” If you answer the 3rd answer or below, this **might flag an area of concern**.
* The yes/no questions are not included in the program means and their purpose is to obtain statistics about the program.

# Categories on the Survey:

### Faculty Supervision and Teaching

* Sufficient time to supervise residents/fellows
* Residents/fellows seek supervisory guidance
* Interest of faculty members and program director in education
* Evaluation after rotations and educational assignments
* Faculty member performance evaluated
* Faculty member satisfied with personal performance feedback

### Educational Content

* Worked on scholarly activity project with residents/fellows
* Residents/fellows see patients across a variety of settings
* Residents/fellows receive education to manage fatigue
* Effectiveness of graduating residents/fellows
* Milestone achievement of graduating residents/fellows

### Resources

* Program provides a way for residents/fellows to transition care when fatigued
	+ NOTE: We have a “jeopardy” back-up system that can be activated if someone is too fatigued/ill to provide safe patient care
* Residents’/fellows’ workload exceeds capacity to do the work
* Satisfied with faculty development to supervise and educate residents/fellows
* Satisfied with process to deal with residents’/fellows’ problems and concerns
* Prevent excessive reliance on residents/fellows to fulfill non-physician obligations

### Patient Safety

* Information is lost during shift changes or patient transfers
* Tell patients of respective roles of faculty members and residents/fellows
* Culture reinforces responsibility for patient safety
* Residents/fellows participate in quality improvement or patient safety activities
	+ NOTE: All our residents participated in “Error Prevention Training” in fall 2017. There are other activities that residents participate in a daily basis (i.e. medical reconciliation, QI/PS discussions during teaching rounds, Patient Safety Alert (PSA) reporting)

### Teamwork

* Residents/fellows communicate effectively when transferring clinical care
* Residents/fellows effectively work in interprofessional teams
* Program effective in teaching teamwork skills

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### *Well-Being*

* After the survey, there is a well-being survey to collect baseline data for well-being across the nation. This is **NOT** part of the data that will be used for accreditation decisions. However, you will not be able to submit your survey until this part is complete.