

# Survey Results: Faculty Engagement

Dalhousie University Faculty of Medicine

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## **PURPOSE OF THIS REPORT**

The purpose of this report is to record results of the 2013 Faculty Engagement Survey. The survey was designed to provide a baseline measure of faculty engagement as well as to inform future actions aimed at advancing faculty involvement in the Dalhousie University School of Medicine.

## **SUMMARY OF RESULTS**

### **Generalizability**

To determine whether or not the participant sample represents the entire population of the DFoM faculty, analysis comparing sample data with organizational records was conducted on available variables (i.e., sex, department). Results of these analysis indicated that there are no statistically significant differences between the sample and the population of interest.

NOTE: The 2013 survey included a minimal number of demographic questions in an attempt to reassure participants that their responses were anonymous. This decision limited the number of variables that can be used to assess generalizability. Thus, it is possible that the sample differs from the population in some other variable (e.g. location, age) of interest and importance.

### **Demographics**

Survey participants were most likely to be male (58%), have 11 to 15 years of appointment at Dalhousie Medical School (18.2%), hold a primary appointment of Family Medicine (19.2%) and identify their role as Clinician (64.2%). Most participants reported that patient care accounts for the largest proportion of their time (66%) followed by research (21%) and teaching (18%).

### **Gender Differences**

Results indicate that males and females significantly differ on their perceptions of the following survey items:

- I enjoy discussing Dalhousie Medical School with others.
- I sometimes miss meetings to avoid tension or conflict.
- I feel my division/department head would be unhappy if I disagreed with him/her.
- My colleagues may react poorly if I provided constructive feedback.
- My leader makes decisions that are fair to all involved.
- My leader makes sure resources are used wisely.
- I have access to all of the resources and support I need to succeed as a researcher.
- Overall, the work environment is respectful at the school.
- The Medical School leaders recognize clinician scientist's advances in research.
- Teaching at Dalhousie Medical School is more than a job to me, it is a passion.

**Years Appointment Held at Dalhousie Medical School**

Results indicate some interesting patterns related to the number of years that participants held appointment at the Dalhousie Medical School. Specifically, many positive aspects of faculty engagement start high, decline at 8 to 10 years, and bounce back up at 21 to 25 years. These results are consistent with other research and may be explained by attrition, career advancement, competency development, or a combination of two or more of these factors.

**Role**

The role to which faculty members most strongly identify relates to participants' perceptions of their work environment. Specifically, it appears that administrators hold a more positive view of their experience and the organization. This may be because administrators' advanced status includes more opportunities for development and greater access to resources as compared to other organizational members.

**Primary Appointment**

Results based on primary appointment are variable. Many departments appear to have strengths and challenges unique to the particular area. Further investigation involving Division and Department Heads may address specific opportunities to advance physician engagement.

**Workplace Conflict**

Thirty-one participants reported experiencing higher levels of conflict compared to their colleagues (i.e. participants who scored 1.5 standard deviations higher than the sample mean). While participants experiencing high levels of workplace conflict do not differ from the sample based on demographic variables (i.e., sex, tenure, primary appointment, role), this group does report lower levels of trust, fairness and respect in the workplace.

**Work Overload**

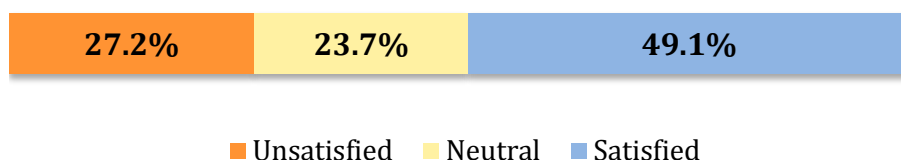
On average, participants reported that their workloads were manageable ( $M = 2.98$ ,  $SD = 0.78$ ) with significant differences based on primary appointment. Five variables (i.e. autonomy, workplace conflict, leadership, recognition, and strategy penetration) account for 43% of the variation in work overload. The results converge with prior literature indicating that having control over one's job is linked to more manageable workloads.

## DETAILED RESULTS

### Section 1: Engagement

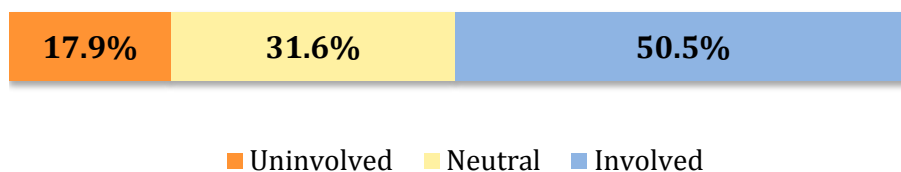
#### 1.1 Satisfaction

In this survey, satisfaction was measured by two survey items probing satisfaction with one's work and satisfaction with the institution. Satisfaction is the most commonly measured facet of work experience and is a reliable predictor of individuals' health and intention to remain affiliated with an organization.



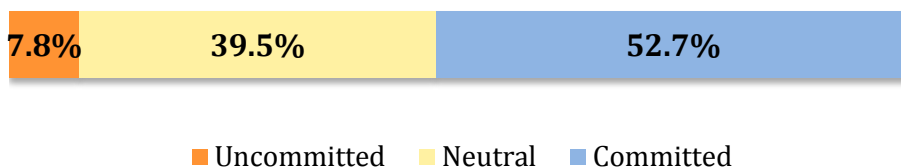
#### 1.2 Involvement in Dalhousie Medical School

Involvement in Dalhousie Medical School activities was measured by four survey items probing self-reported attendance at important meetings and events and actions undertaken to keep informed of events and changes at the school. Many organizations seek to involve talented people in dialogue and events as a means of advancing strategic performance.



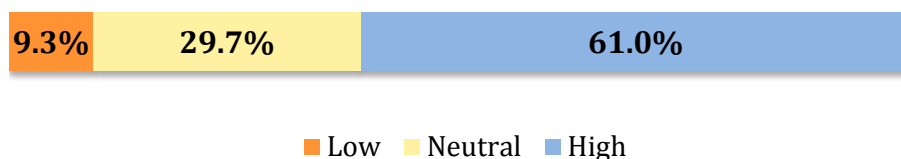
#### 1.3 Affective and Cognitive Commitment

Affective and cognitive commitment was measured with three survey items probing emotional connection and three survey items probing participants' intellectual connection to their work. Affective and cognitive commitment is a set of attitudes that motivate one's involvement in work.



#### 1.4 Psychological Well-being

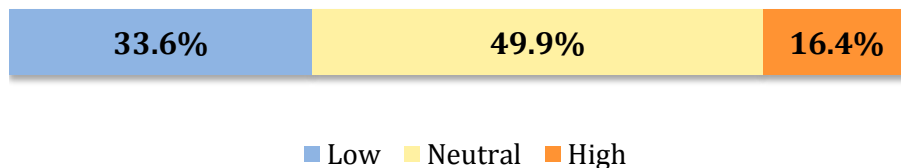
Psychological well-being was measured by three survey items probing participants positive affective state at work. Research indicates that psychological well-being is associated with individuals' mental and physical health.



## Section 2: Barriers to Engagement

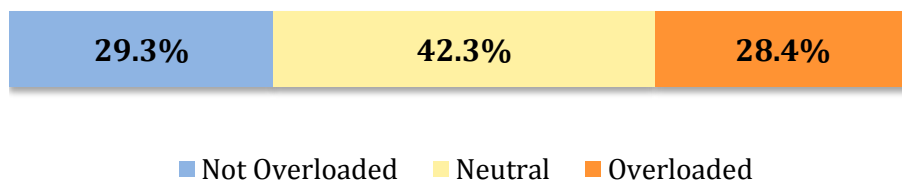
### 2.1 Workplace Conflict

Workplace conflict was measured by three survey items probing perceived relational strife and tension among peers and related to one's leader. Research indicates that workplace conflict is becoming more frequent in many industries (including healthcare) and is stressful and threatens the quality of working relationships.



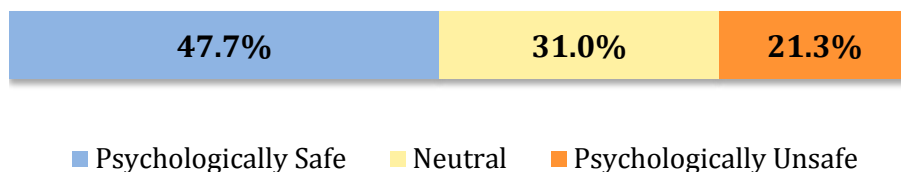
### 2.2 Work Overload

Work overload was measured by three survey items probing participants' perceived workload and difficulty keeping up with demands. Work overload is implicated as one of the top three stressors in the workplace at this time.



### 2.3 Psychologically Unsafe

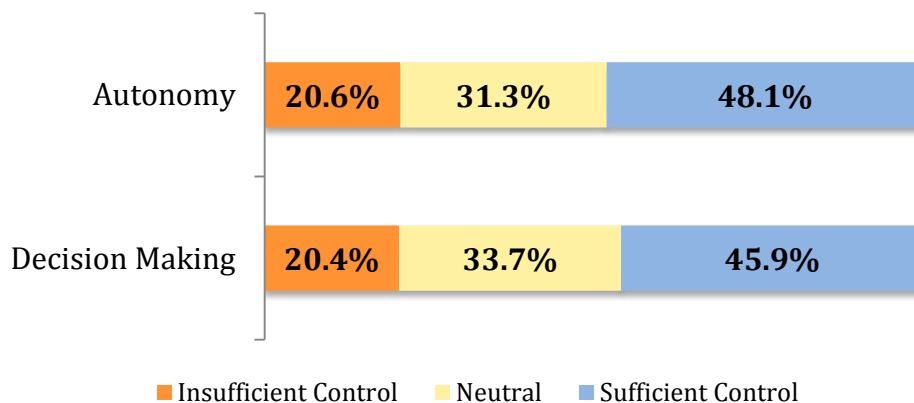
The degree to which participants perceive their workplace as unsafe to speak freely in expressing their ideas and opinions was measured with three survey items. In healthcare, the perception that the environment is unsafe is associated with patient care errors and a reduction in learning.



### Section 3: Enablers of Engagement

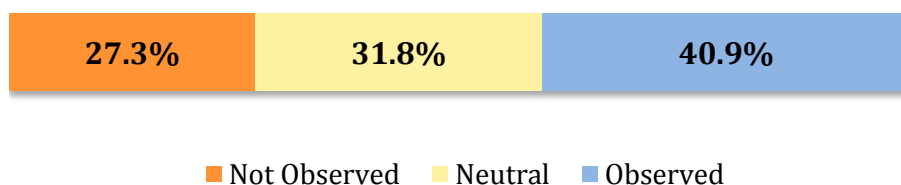
#### 3.1 Autonomy and Decision Making

Control over one’s work and one’s involvement in decision making both buffer the relationship between job stressors (such as conflict and work overload) and perceived stress, ultimately reducing the detrimental effects of stressors on mental and physical health. Theoretically, control allows one to act on their environment to change aspects of their work that are undesirable. To measure autonomy, four survey items prompted participants to consider how familiar they are with the boundaries of their work. Decision making was measured by three items assessing participants’ involvement in the decision making processes.



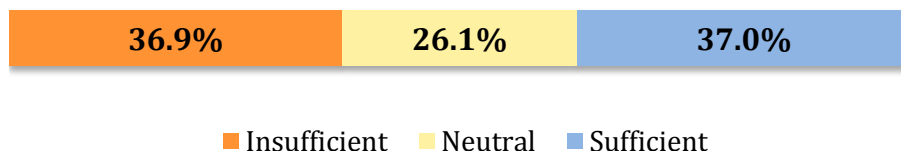
#### 3.2 Transformational Leadership

Transformational leadership was measured by six items probing participants’ observations of their leader (e.g. department head). Research indicates that transformational leadership is a powerful practice associated with achieving strategic goals in many industries. Though empirical evidence for its efficacy in an academic standing is lacking, experts suggest that transformational leadership, especially leadership behaviours that demonstrate authentic interest and concern for others, are effective.



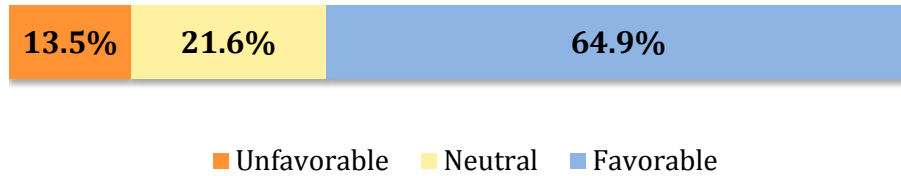
#### 3.3 Job Resources

The level of resources needed to support faculty roles of teaching and research was measured by two survey items that prompted participants to indicate which resources were lacking. Participants reported that the job resource most lacking was administrative for teaching and research.



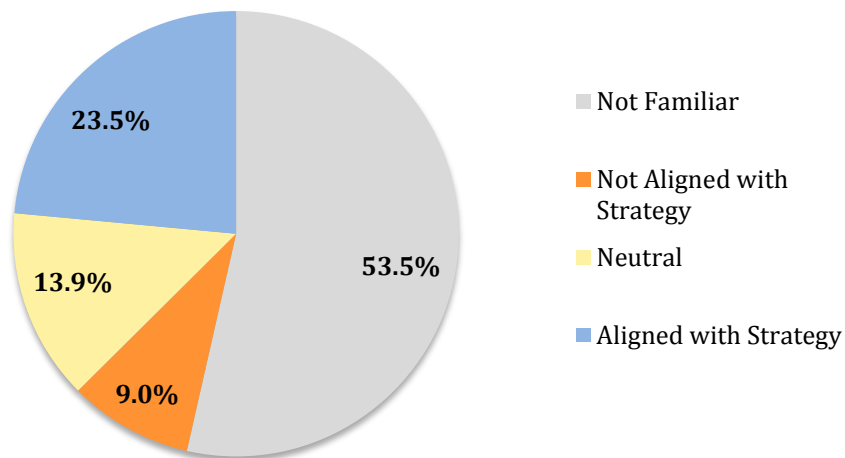
### 3.4 Organizational Trust

Organizational trust is one’s assessment of administration as sufficiently competent to reliably lead the organization. Trust was measured by two survey items.



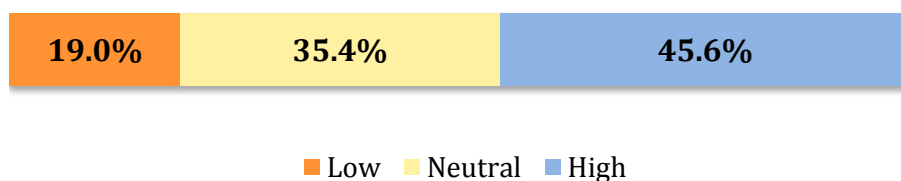
### 3.5 Strategy Penetration

Participants responded to two survey items that assessed the level at which faculty members are familiar and aligned with Dalhousie Medical School’s strategic direction.



### 3.6 Recognition

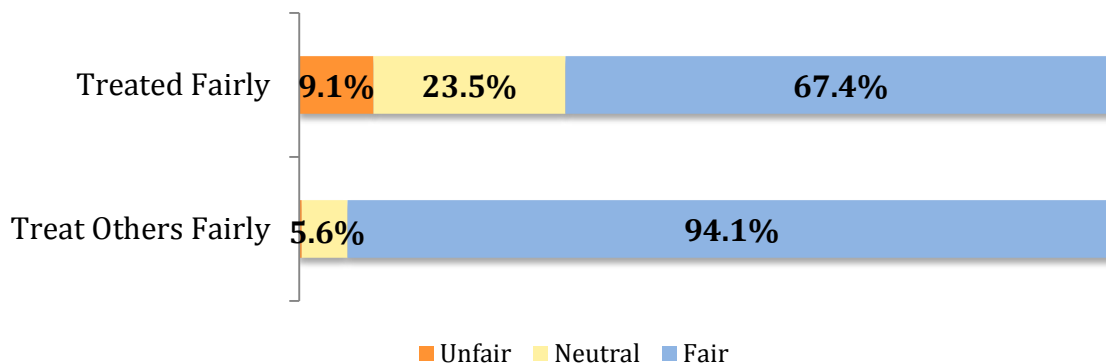
Four survey items measured participants’ perceptions of recognition received from Dalhousie Medical School. Extant research suggests that recognition is an indication of healthy working relationships linked to motivation and health.



## Section 4: Relationships

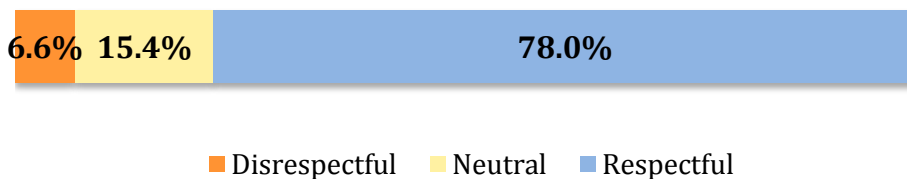
### 4.1 Fairness

Participants responded to two survey items measuring fairness. The first item probed participants' perception of being treated fairly by the school, while the second item prompted participants to assess how fairly they themselves treat others. The average scores for these two items differ significantly, therefore, item results are displayed.



### 4.2 Respect

Participants responded to a single survey item probing the overall level of respect in the work environment.



### 4.3 Professional Relationships

The survey measured professional relationships with two items probing collegiality among peers and positivity toward administrative staff.

