







Engaged medical school faculty are critical to the success of our nation's medical schools. Research demonstrates that faculty perceptions of department governance are associated with satisfaction with one's department—an essential component of faculty engagement. Research also describes the importance of an employee's understanding of their supervisor's goals in directly impacting their performance and individual contributions to the organization. An employee's behaviors and attitudes are shaped by the trust and integrity displayed by leaders in communicating important messages, enacting the organization's values, and involving employees in decision-making. (See reverse for references)

Medical school and department administrators and leaders who seek to maximize faculty satisfaction and engagement can benefit from an understanding of faculty perceptions of specific components of department governance by specialty.

In this analysis, we use data from the AAMC Faculty Forward Survey to examine 1) how specific components of department governance differ by department type, and 2) faculty perceptions of department governance in nine basic science and 24 clinical specialties.

Data were collected from 19 medical schools between 2011 and 2013. The distribution of faculty respondents across departments approximated the overall distribution of faculty in U.S. medical schools. The survey response rate was 63%. We explored the survey domain of department governance in this analysis. We aggregated departments into 33 higherlevel department classifications for comparative purposes. Summary scores reflect the sum of the total number of responses for each category on a condensed response scale (i.e., Agree/Strongly Agree, Neither Agree nor Disagree, Disagree) for each item. Each category total was the divided by the total number of responses for each item.

	Percent (No.)		Significance		
Department Governance Questions	Agree or Strongly Agree Clinical Faculty Basic Science Faculty		χ ² P value		
The department chair sets a good example to reflect our medical school's values	73.3% (6360)	Faculty 78.8% (1117)	22.33	<.001	
The chair's priorities for the department are reasonable	66.6% (5766)	74.5% (1062)	35.91	<.001	
There is sufficient communication from the department chair's office to the faculty about the department	65.4% (6069)	72.2% (1103)	27.14	<.001	
In general, the department chair's priorities are aligned with the dean's priorities	66.0% (4548)	67.8% (745)	4.32	0.115	
The department chair's priorities for the department are clear	65.0% (5821)	71.4% (1051)	23.47	<.001	
The pace of decision making in the department is reasonable	56.7% (4967)	70.5% (1013)	97.51	<.001	
There are sufficient opportunities for faculty participation in the governance of this department	55.1% (4835)	64.4% (934)	43.83	<.001	
My department does a good job explaining departmental finances to the faculty	52.6% (4865)	58.8% (888)	26.26	<.001	

Perceptions of Department Governance by U.S. Medical School Faculty Valerie M. Dandar, M.A. and Sarah A. Bunton, Ph.D., AAMC

Introduction and Methodology



Discussion: How Can We Improve the Department Workplace?

As satisfaction with department governance is a driver of overall satisfaction with one's departmental differences may suggest specific strategies that department chairs could use to improve the workplace for their faculty members, and, in turn, influence positive change within the medical school. From these results, we suggest that:

3. Leadership training may be beneficial for both department chairs and division chiefs, particularly in general medicine.

In sum, these results offer a more nuanced understanding of perceptions of specific components of departmental governance and differences by individual departments, which can inform decisions as efforts are made to improve faculty satisfaction and engagement in the medical school workplace.

1. Clinical department leaders should strive to improve financial transparency and encourage greater faculty participation in department governance. 2. Training department chairs and division chiefs in effective communication, management, governance, and leadership skills may be an effective strategy for engaging faculty members.

Department Name (number of respondents)	Department Governance Summary Score		Satisfaction with Department as a Place to Work	
<u>Clinical Department Name</u>	Percent Agree or Strongly Agree	Department Ranking ^a	Percent Satisfied or Very Satisfied	Department Ranking
Physical Medicine and Rehabilitation $(n = 90)$	74%	1	79%	4
Otolaryngology (n = 200)	74%	2	81%	2
Family Medicine (n = 480)	73%	3	81%	3
Neurosurgery (n = 152)	73%	4	82%	1
Dermatology (n=88)	68%	5	76%	8
Orthopedic Surgery (n = 250)	68%	6	75%	12
Emergency Medicine (n = 325)	67%	7	72%	17
Ophthalmology (n = 218)	66%	8	78%	5
Radiology (n = 640)	65%	9	75%	14
Anesthesiology (n = 597)	65%	10	77%	6
Pathology (n = 539)	65%	11	76%	9
Pediatrics (Subspecialty; n = 1167)	63%	12	75%	11
Radiation Oncology (n = 189)	62%	13	76%	7
Psychiatry (n = 609)	62%	14	76%	10
OB/GYN (n = 395)	61%	15	72%	19
Neurology (n = 393)	60%	16	67%	22
Surgery (General; n = 233)	60%	17	67%	23
Other Clinical Departments (n = 202)	59%	18	73%	16
Urology (n = 145)	58%	19	73%	15
Medicine (Subspecialty; n = 1318)	58%	20	69%	21
Surgery (Subspecialty; n = 368)	57%	21	66%	24
Pediatrics (General; n = 329)	56%	22	72%	18
Cardiology (n = 282)	56%	23	75%	13
Internal Medicine (General; n = 632)	55%	24	71%	20
Basic Science Department Name				
Neurosciences (n = 126)	77%	1	83%	2
Microbiology (n = 273)	75%	2	77%	5
Physiology (n = 245)	73%	3	80%	3
Pharmacology (n = 230)	70%	4	74%	6
Biochemistry (n = 255)	68%	5	74%	7
Other Basic Science Departments (n = 264)	68%	6	78%	4
Genetics (n = 46)	62%	7	83%	1
Molecular & Cellular Biology (n = 123)	60%	8	70%	8
Anatomy (n = 44)	57%	9	58%	9