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Preparing for a Post-COVID Era: Workplace Policies and Practices Final Report

**AAMC Group on Business Affairs: Data and Benchmarking Committee,
AAMC Group on Institutional Planning: Facilities Planning
& Space Management Subcommittee,
AAMC Medical School Operations**

Fall 2022

Association of
American Medical Colleges

Preparing for a Post-COVID Era Workplace Policies and Practices Final Report

AAMC Group on Business Affairs: Data and Benchmarking Committee,
AAMC Group on Institutional Planning: Facilities Planning & Space
Management Subcommittee, and AAMC Medical School Operations

This document was created by the AAMC Medical School Operations unit and is intended to provide members of the GBA and GIP with an understanding of shifting workplace policies and administrative issues as they prepare offices for a post-COVID workplace. The content of this report does not reflect the official position or policy of the AAMC unless clearly specified. This document should not be cited as an official AAMC publication.

The AAMC (Association of American Medical Colleges) is a nonprofit association dedicated to improving the health of people everywhere through medical education, health care, medical research, and community collaborations. Its members comprise all 156 accredited U.S. medical schools; 14 accredited Canadian medical schools; approximately 400 teaching hospitals and health systems, including Department of Veterans Affairs medical centers; and nearly 80 academic societies. Through these institutions and organizations, the AAMC leads and serves America's medical schools and teaching hospitals and the millions of individuals across academic medicine, including more than 191,000 full-time faculty members, 95,000 medical students, 149,000 resident physicians, and 60,000 graduate students and postdoctoral researchers in the biomedical sciences. Following a 2022 merger, the Alliance of Academic Health Centers and the Alliance of Academic Health Centers International broadened the AAMC's U.S. membership and expanded its reach to international academic health centers.

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GBA/GIP Remote-Work Survey

Executive Summary

At two and a half years into the COVID-19 pandemic, medical school leaders are continuing to rethink how and where their faculty and staff can best work and collaborate to fulfill the educational, research, and clinical missions of academic medicine. Accomplishing work across each of these services requires a unique set of staff and facilities to support operations. With such organizational complexity, making decisions about a post-pandemic workforce structure can be daunting, as there is no one way to address what a “new normal” for medical school operations ought to be. To help in the process, the AAMC partnered with the AAMC Group on Business Affairs (GBA) Data and Benchmarking Committee, with input from the AAMC Group on Institutional Planning (GIP) Facilities Planning & Space Management Subcommittee to develop a survey aimed at eliciting data to inform member medical schools as they consider their post-pandemic workforce policies and practices.

In August 2022, the AAMC released the “Workplace Policies and Practices Survey.” It collected data on remote and hybrid work policies and practices, the workplace environment and support to employees, employee productivity measures, and space considerations. The purpose of the survey was to provide data surrounding workplace policies and administrative issues to support member institutions as they continue to prepare their offices for a post-COVID workplace.

Based on survey results from 88 medical schools, the majority of schools responding have an institution-wide remote-work policy for all staff, but not for all faculty, and appear to be shifting, at least for non-clinical and non-student facing staff, toward a more hybrid workforce. For Fall of 2022, schools indicated on average 50% of all staff would work in a hybrid capacity while 41% would be on-site. With the possibility of non-clinical and non-student facing staff working in a hybrid capacity, 42% and 46% of schools have or intend to reduce staff office space, respectively, and many appear to be considering hoteling, touchdown, or other flexible space arrangements.

This AAMC final report presents results of the “Preparing for a Post-COVID Era: Workplace Policies and Practices Survey”. As the goal of the survey was to ascertain policies and practices in-place during the survey period and expectations about the Fall of 2022, this report is meant to provide member medical schools with evidence for next steps in the process of determining a future state.

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Introduction

Prior to the COVID-19 pandemic, remote work was the exception, with roughly 6% of the American workforce participating in this work arrangement.^{1,2} To reduce viral transmission during the pandemic, many U.S. employers, including healthcare organizations and U.S. medical schools, pivoted to remote work environments.³ At two and a half years into the pandemic, many industries are still grappling with how to recover their workforce and what type of structure works best in the short-term and for the future. As U.S. medical schools continue to explore how and where their employees work and collaborate, providing data and resources from peer organizations can support these difficult organizational decisions.

In August 2022, the Association of American Medical Colleges (AAMC) released the “Preparing for a Post-COVID Era: Workplace Policies and Practices Survey” to AAMC members within the Group on Business Affairs (GBA) and the Group on Institutional Planning (GIP). It collected data on remote and hybrid work policies and practices, the workplace environment and support to employees, employee productivity measures, and space considerations. This analysis of survey results is timely as medical schools are seeking additional information to help inform policies and practices as they continue to prepare their offices, staff, and faculty for a post-COVID workplace.

Methods

The AAMC partnered with the AAMC Group on Business Affairs (GBA) Data and Benchmarking Committee, with input from the Group on Institutional Planning (GIP) Facilities Planning & Space Management Subcommittee to develop a survey that elicited information about remote work. There were 27 total survey questions distributed across five sections focusing on medical school policies, the workplace environment, support to employees, productivity measures and work schedules, and space and space-related policies. All questions were framed around the following three types of work arrangements:

- Remote only was defined as individuals who are working in a 100% remote capacity as well as those who may come on-site less than once per week. This group was fully remote unless asked by supervisors on an ad-hoc basis.
- On-site only was defined as individuals who are consistently working on-site 4-5 days per week.
- Hybrid work was defined as individuals who are working on-site routinely 1-3 days per week.

The survey was distributed to members of the GBA and GIP during the month of August 2022. Analysis of survey questions were conducted by the AAMC Medical School Operations unit.¹

Results

All 155 U.S. LCME-accredited medical schools received an invitation to complete the survey and 57% (n=88/155) of schools completed all survey questions. Of the 88 medical schools that completed the

¹ On November 29, 2022, survey results were presented during a moderated call hosted by the GBA Data and Benchmarking and Emerging Issues Committees. Please refer to the Appendix for presentation slides.

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survey, 61% (n=54) were public schools, 82% (n=72) were not community-based per the AAMC Organizational Characteristics Database definition, and 88% (n=77) were financially integrated with their parent university.

Medical School Policies

The first section of the survey asked about medical school policies, with 69% of respondents (n=61) confirming that they have an institution-wide remote work policy for all staff, 24% (n=21) responding that while no institution-wide work policy exists, policies are set at the department level, and 7% (n=6) responding that there are no institution-wide remote work policies for all staff. For the 31% (n=27) where no institution-wide policy exists, 59% (n=16) confirmed that yes, specific groups of staff are eligible for remote work agreements and 41% (n=11) identified that either there are no specific groups eligible for remote work agreements (n=8) or they left this question blank (n=3). Of those that confirmed specific groups are eligible for remote work agreements, participants described that eligible groups include general and research administration, HR, IT, finance, and other non-clinical and non-student facing staff roles.

For the 69% (n=61/88) of respondents with a remote work policy for all staff, 57% (n=35) confirmed that staff are allowed to work in other states, with 80% of this group (n=28/35) allowing staff to work in two or more states. Specifically, of the 35 respondents that confirmed staff are allowed to work in other states, 88% (n=31) indicated compensation is based on their home institution's employment market, with 6% (n=2) stating it depends, and 3% (n=1) stating it is adjusted to the market rate based on where people live.

Regarding faculty, 73% (n=64/88) of respondents identified that they do not have an established remote work policy for all faculty, with slightly more than a quarter at 26% (n=23/88) confirming that yes, they have an established remote work policy for all faculty. For those with a faculty policy, 78% (n=18/23) confirmed that the policy is the same as it is for staff, and 18% identifying that their policy has different stipulations for faculty. For example, one respondent commented that the policy for faculty applies primarily to non-clinical faculty only. Another commented that faculty are not allowed to work in a 100% remote capacity, whereas departments are allowed to identify specific staff positions that can be 100% remote. Finally, another respondent commented that while staff must have a formal, approved remote work agreement in place regardless of their remote work location, faculty have a remote work agreement only if working outside the state.

Finally, 40% (n=35/88) of respondents identified that their policies are not influenced by unions or bargaining agreements, with 31% (n=27/88) of respondents confirming that yes, policies are influenced by unions or bargaining agreements, and an additional 27% (n=24/88) stating that they do not have a union.

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Workplace Environment

The next section of the survey asked respondents about the workplace environment, focusing on the capacity in which all staff would be working in Fall of 2022. Respondents indicated that 50% of all staff on average would be working in a hybrid capacity, with 40% on average working on-site only, and only 10% on average working in a remote-only capacity (Figure 1).

To understand if different staff functions had been assigned particular work arrangements, respondents were asked to select what type of work arrangement (e.g., remote-only, on-site only, hybrid or don't know) would be offered for each of 23 distinct staff functions in the Fall of 2022, in a “choose all that apply” format. (See Tables 1 and 2 for a complete breakdown).

Most respondents selected multiple work arrangements per staff function, hence most percentages in Table 1 total more than 100%. Overall, the hybrid work arrangement appeared the preferred model, with 75% (n=18/24) of staff functions garnering at least 50% of selections, and 10 of these staff functions garnering 80% or more of selections, including administrative staff (97%), finance (93%), grants and contracts (88%), and general administration (87%). The six staff functions that garnered less than 50% of respondent selections for the hybrid work arrangement included laboratory research (49%), health and safety (43%), logistics (33%), patient care (for health care professionals/technicians) (21%), vivarium (16%), and other (19%). As for the on-site only work arrangement, three staff functions garnered greater than 60% of selections including laboratory research (65%), facilities and space (63%), and patient care (for health care professionals/technicians) (60%).

To distill responses to this question, a sub-group was created with 13 institutions that both have an institution-wide remote work policy for all staff and that made only one selection per work arrangement for this question. Similar trends were identified with the hybrid work arrangement model appearing to be the preferred model for most staff functions. A total of 63% (n=15/24) of staff functions garnered at least 50% of selections, with nine staff functions garnering 80% or more of selections for hybrid work (see Table 2 for a complete breakdown). As for the on-site only work arrangement, facilities and space, patient care (for health care professionals/technicians) and the vivarium staff function each garnered 54% of selections.

The final two questions of this section, using a “select all that apply” format, asked about the circumstances under which hybrid and remote-only staff would need to be on-site. For the hybrid work arrangement, 89% of respondents indicated expectations are variable depending on meetings and other on-site needs, with 59% of respondents indicating that hybrid staff are scheduled to be staggered with other team members to easily share workspace. An additional 44% of respondents indicated that hybrid staff would be on-site when all other team members are on-site to promote collaborations. For remote-only staff, 57% of respondents indicated that expectations are variable depending on meetings and other on-site needs, 23% indicated there are no expectations for this group to be on-site, with 20% selecting when all other team members are on-site to promote collaborations, and 14% selected that they do not have remote-only staff.

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Support to Employees

This section asked respondents to indicate for each type of work arrangement, whether their school financially supported (in part or in full) 17 distinct resources and services, including “other” and “none” as response options. There were 83 total respondents for this “select all that apply” question, with two categories garnering a majority of selections. Overall, 83% of respondents selected computers and monitor were financially supported (in part or in full) for on-site staff, 75% for hybrid staff, and 65% for remote-only staff (see Table 3 for a complete breakdown). Additionally, 70% of respondents selected that computer cameras were financially supported for on-site staff, 69% for hybrid staff, and 62% for remote-only staff. The last category to garner a majority of selections, 70% of respondents selected office furniture (e.g., desks, chairs) was financially supported for on-site staff. For the on-site arrangement, 36% of respondents indicated complementary coffee or beverages was financially supported, 29% indicated gym access was financially supported, and 19% indicated internet service fees were financially supported. Approximately 5% of respondents selected “other” for each work arrangement and clarified that backup childcare services, gym access, legal services, temporary stipends for on-site employees, phones and headsets were financially supported.

Productivity Measures and Work Schedules

Of the 88 survey respondents, 56% (n=49) confirmed that yes, before the COVID-19 pandemic they had set identified performance metrics for staff, 36% (n=32) indicated that before COVID they did not have set identified performance metrics for staff, and 7% (n=6) indicated that while they did not have set identified performance metrics for staff before COVID, they were in the process of developing them. There was one survey respondent that left this question blank. When analyzing these results only across respondents with an institution-wide remote work policy, results were similar with 53% indicating they had set metrics prior to the pandemic.

Regarding current performance metrics, 39% (n=34/88) confirmed that yes, they currently have the same performance metrics for staff as they did previously, with 15% (n=13) confirming that yes, while metrics are the same, they are developing new metrics. Of the 12% (n=11) of respondents that indicated that they have made changes to performance metrics for staff *since* COVID, most indicated that while they have developed new performance metrics, they are consistent whether staff are remote, hybrid or on-site. Again, results were similar when analyzing across only those respondents with an institution-wide remote work policy.

Regarding schedules for staff who are remote, 44% (n=39/88) of respondents indicated that staff are required to work a set schedule during regular business hours (M-F), 23% (n=20) indicated staff are required to work a set schedule, but have flexibility between 6am and 9pm (M-F), 16% (n=14) indicated that they do not require staff to have a set schedule, but that they must work a “work week”, and 14% (n=12) selected “other”, with most indicated that this was a departmental or managerial decision.

Regarding schedules for staff who are on-site, 59% (n=52/88) indicated that staff are required to work a set schedule during regular business hours (M-F), 25% (n=22) indicated staff are required to work a set schedule, but have flexibility between 6am and 9pm (M-F), 6% (n=5) indicated that they do not require

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staff to have a set schedule, but that they must constitute a “work week”, and 9% (n=8) selected “other”, again with most indicating it was a departmental decision and therefore varied.

Space and Policies

The final section of the survey asked about space and space-related policies. Of the 88 respondents, 56% (n=49) confirmed that yes, there have been changes to space as a result of the COVID-19 pandemic, and 43% (n=38) indicated no changes to space due to COVID, with one school not responding.

Of the 49 respondents who confirmed changes to space as a result of the pandemic, they were then asked whether they have changed or expect to change square footage as a result of the shift to a more hybrid workforce. Overall, 41% selected staff offices “have already reduced” and 45% selected that they “plan to reduce” staff offices. While only 10% of respondents selected that staff offices would be “[kept] the same”, 73% of respondents indicated education space would be “kept the same”, with an additional 63% of respondents indicating wet lab research space would be “kept the same”. Of the locations where an “increase” was expected, 31% of respondents selected both wet lab research space and dry lab/computational research space (see Table 5 for a full breakdown).

Regarding potential changes to leased space, 73% (n=64/88) of respondents confirmed that they were leasing space pre-pandemic, and of this group, 75% (n=48/64) indicated that no, they are not considering breaking their lease, with 23% (n=15) confirming that yes, they are considering breaking their lease agreements.

Additionally, 69% (n=61/88) of respondents indicated that no, they were not sub-leasing space pre-pandemic, with 23% (n=20) confirming that yes, they were sub-leasing space pre-pandemic. When asked if respondents are currently sub-leasing space, the same 23% (n=20/88) of respondents confirmed that yes, they are currently subleasing space. Of those who were not sub-leasing space pre-pandemic, 53% (n=47) responded they are not currently sub-leasing space, 7% (n=6) indicated that while they are not currently sub-leasing space, they are considering it, and 10% (n=9) indicated they do not have space to sub-lease. An additional 7% (n=6) left this question blank.

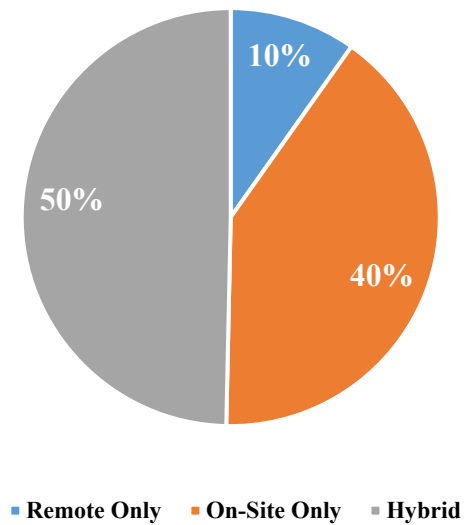
The final two questions asked respondents if they are offering hoteling space and what their thoughts were on reassigning space. Overall, 55% (n=48/88) indicated they currently offer hoteling space, 23% (n=20) have plans to provide it, and while 9% (n=8) do not currently offer hoteling space, they do have flexible spaces available at a first-come, first-serve basis. There were 11% (n=10) of respondents that do not currently offer hoteling space nor plan to do so in the near future. When asked about their future considerations for reassigning space, respondents indicated they are considering offering more hoteling, touch down, collaborative, and shared office spaces. Additional comments indicated that institutions were analyzing, assessing, evaluating, or otherwise using the pandemic as an opportunity to reconsider how space was being used and how to optimize existing space.

Conclusion

The majority of respondents to this survey signaled a hybrid workforce is the preferred structure for most non-clinical and non-student facing staff. This decision has significant implications for the future operations of U.S. medical schools. As such, institutions should evaluate which staff functions can and should return to campus offices, how to best support employees based on institutional or departmental work arrangements, whether performance metrics should be revised with a changing workforce setting, and the space needed to support both workforce productivity and financial stewardship.

Tables & Figures

Figure 1. Average Percentage of all staff (regardless of employer, but who support faculty and core work of the school) per Work Arrangement (n=88)



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Table 1. Staff Function and Type of Work Arrangements that will be Offered in Fall of 2022, All Respondents (n=86)*

Staff Function	Remote-Only	On-Site Only	Hybrid	Don't Know
Administrative Staff	23%	31%	97%	1%
Revenue Cycle/Professional Billing	27%	16%	58%	20%
Clinical Research	16%	37%	71%	12%
Compliance/Legal/Audit	21%	21%	79%	14%
Facilities/Space	6%	63%	52%	7%
Finance	28%	22%	93%	1%
General Administration	19%	34%	87%	2%
Department Administrators	10%	37%	81%	3%
Grants and Contracts (e.g., research administration, pre-post award)	31%	24%	88%	5%
HR	21%	22%	85%	7%
Institutional Advancement (e.g., PR, communications, marketing)	22%	22%	83%	9%
IT	35%	33%	83%	7%
Laboratory Research	8%	65%	49%	12%
Library	9%	37%	53%	26%
Medical Education	10%	41%	73%	5%
Medical Office Administration	7%	41%	51%	16%
Patient Care (for health care professionals/technicians)	3%	60%	21%	20%
Student Affairs	12%	38%	80%	2%
Teaching Support (e.g., graduate student coordinators, residency coordinators)	9%	35%	73%	9%
Vivarium	2%	43%	16%	35%
Logistics	6%	28%	33%	40%
Health and Safety	6%	36%	43%	30%
Academic Affairs	13%	30%	81%	6%
Other	5%	6%	19%	20%

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Table 2. Staff Function and Type of Work Arrangements that will be Offered in Fall of 2022, Respondents with an Institution-Wide Remote Work Policy for All Staff and that Selected One Work Arrangement Type per Staff Function (n=13)

Staff Function	Remote-Only	On-Site Only	Hybrid	Don't Know
Administrative Staff	0%	8%	92%	0%
Revenue Cycle/Professional Billing	15%	8%	62%	15%
Clinical Research	0%	8%	77%	15%
Compliance/Legal/Audit	8%	8%	69%	15%
Facilities/Space	0%	54%	38%	8%
Finance	8%	0%	92%	0%
General Administration	0%	15%	85%	0%
Department Administrators	0%	31%	69%	0%
Grants and Contracts (e.g., research administration, pre-post award)	8%	0%	85%	8%
HR	0%	8%	85%	8%
Institutional Advancement (e.g., PR, communications, marketing)	0%	0%	85%	15%
IT	8%	0%	85%	8%
Laboratory Research	0%	38%	38%	23%
Library	0%	31%	31%	38%
Medical Education	0%	23%	77%	0%
Medical Office Administration	0%	31%	46%	23%
Patient Care (for health care professionals/technicians)	0%	54%	15%	31%
Student Affairs	0%	15%	85%	0%
Teaching Support (e.g., graduate student coordinators, residency coordinators)	0%	15%	69%	15%
Vivarium	0%	54%	8%	38%
Logistics	0%	15%	31%	54%
Health and Safety	0%	23%	31%	46%
Academic Affairs	0%	8%	85%	8%
Other	0%	0%	46%	54%

Table 3. Financial Support to Employees per Work Arrangement Type (n=83)

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Support to Employees	Remote-Only	On-Site	Hybrid	Don't Know
Telephone/mobile stipend	29%	46%	33%	7%
Office furniture (e.g., desk, chairs)	18%	70%	29%	2%
Computer(s) and monitor(s)	65%	83%	75%	1%
Compliance/Legal/Audit	25%	35%	31%	26%
Computer camera	62%	70%	69%	1%
Mobile hot spot	8%	12%	8%	10%
Internet service fees	5%	19%	4%	6%
Stipend for use of alternate space	1%	0%	0%	8%
Paid on-site parking for times they must be on-site	8%	8%	8%	6%
Additional compensation	0%	1%	0%	7%
Transportation subsidy	8%	13%	8%	7%
Childcare subsidy	4%	6%	6%	7%
Gym access	13%	29%	21%	5%
Complimentary snacks/food	0%	13%	6%	5%
Complimentary coffee/beverages	0%	36%	11%	4%
Other	5%	4%	5%	1%
None	5%	1%	2%	0%

*Note: %s were calculated out of 83 schools (94%; 83/88) that provided at least one answer to this choose all that apply question

Table 4. Location of Space Change (n=49)*

Location of sqft change	Have already reduced	Plan to reduce	Keep Same	Increase	Left Blank
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Conference rooms	12%	12%	57%	10%	8%
Faculty offices	12%	16%	51%	14%	6%
Staff offices	41%	45%	10%	0%	4%
Wet lab research space	0%	2%	63%	31%	4%
Dry lab/computational research space	2%	4%	55%	31%	8%
Education	2%	2%	73%	18%	4%
Unassigned	6%	31%	22%	16%	24%
Other	4%	2%	2%	8%	84%

*Note: %s were calculated out of 49 schools that answered “Yes” to Q19; “location of change” rows add up to 100%

References

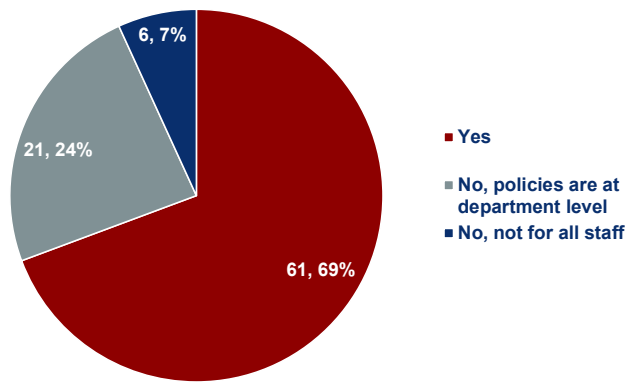
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2. United States Census Bureau. (2022, September 15). The Number of People Primarily Working From Home Tripled Between 2019 and 2021 [Press Release]. <https://www.census.gov/newsroom/press-releases/2022/people-working-from-home.html>
3. Minkus, L., Groepler, N., & Drobnič, S. (2022). The significance of occupations, family responsibilities, and gender for working from home: Lessons from COVID-19. *PloS one*, 17(6), e0266393. <https://doi.org/10.1371/journal.pone.0266393>

Appendix

Presentation Slides from the November 29, 2022, GBA moderated call

Medical School Policies for Staff

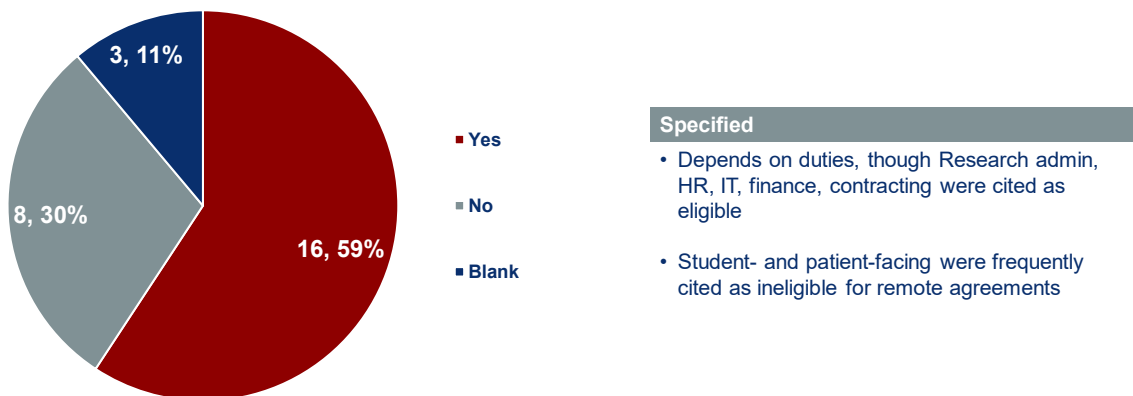
Do you have an institution-wide remote work policy for all staff (n=88)?



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If no institution-wide policy exists, are there specific groups that are eligible for remote work agreements (n=27)?



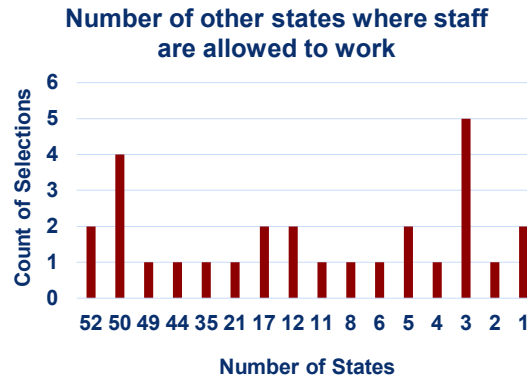
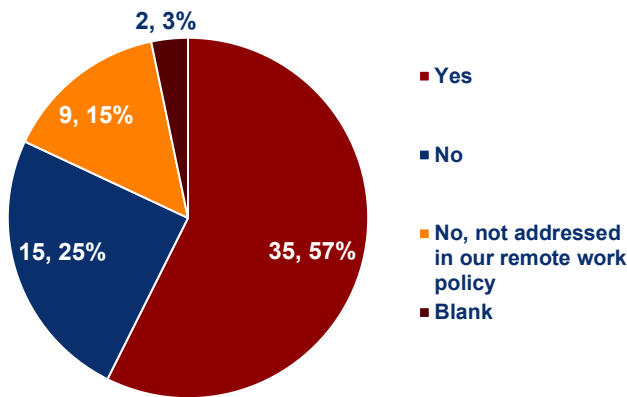
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For schools with a remote work policy, are staff allowed to work in other states (n=61)*?

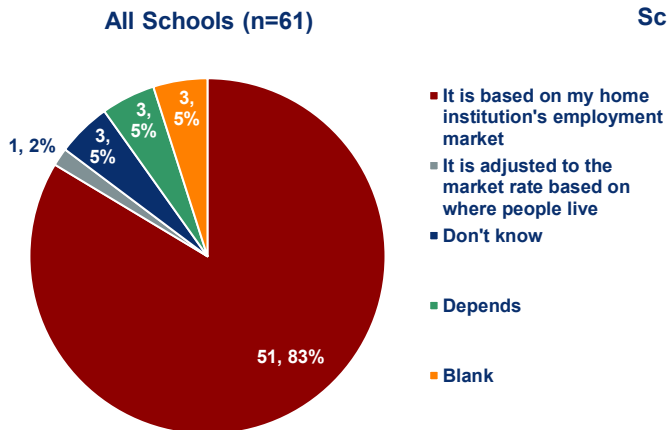


*Answers based on the 61 that selected "Yes" to Q1

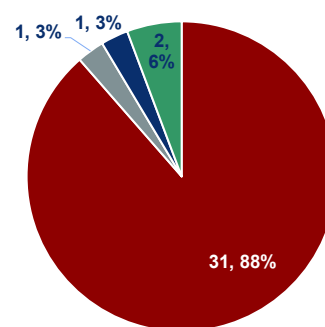
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Is compensation based on your home institution's employment market or is it adjusted to the market rate based on where people live (n=61)*?



Schools that allow staff to work in other states (n=35)



*Answers based on the 61 that selected "Yes" to Q1

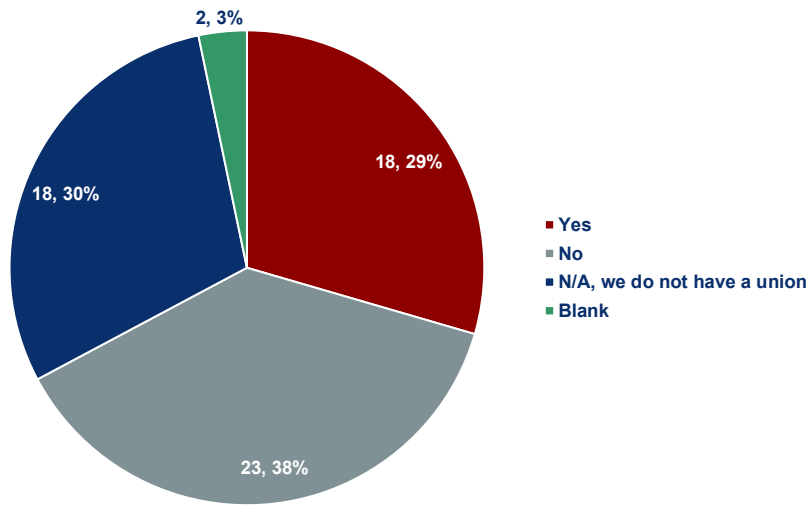
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Are any of your policies influenced by union or bargaining agreements (n=88)?



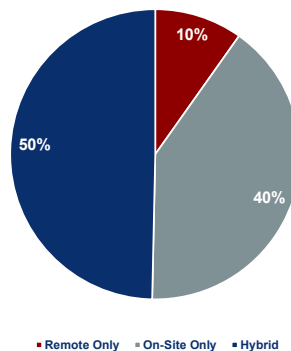
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Workplace Environment

Approximately what percentage of all staff (regardless of employer, but who support faculty and core work of the school) will work in a remote-only, on-site only or hybrid capacity in the Fall of 2022 (n=88)?

Average Percent per Work Arrangement (n=88)



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For each of the following staff functions, please indicate what type of work arrangement you will be offering in the Fall of 2022? (n=13)*

Staff Function	Remote-Only	On-Site Only	Hybrid	Don't Know
Administrative Staff	0%	8%	92%	0%
Revenue Cycle/Professional Billing	15%	8%	62%	15%
Clinical Research	0%	8%	77%	15%
Compliance/Legal/Audit	8%	8%	69%	15%
Facilities/Space	0%	54%	38%	8%
Finance	8%	0%	92%	0%
General Administration	0%	15%	85%	0%
Department Administrators	0%	31%	69%	0%
Grants and Contracts (e.g., research administration, pre-post award)	8%	0%	85%	8%
HR	0%	8%	85%	8%
Institutional Advancement (e.g., PR, communications, marketing)	0%	0%	85%	15%
IT	8%	0%	85%	8%
Laboratory Research	0%	38%	38%	23%
Library	0%	31%	31%	38%
Medical Education	0%	23%	77%	0%
Medical Office Administration	0%	31%	46%	23%
Patient Care (for health care professionals/technicians)	0%	54%	15%	31%
Student Affairs	0%	15%	85%	0%
Teaching Support (e.g., graduate student coordinators, residency coordinators)	0%	15%	69%	15%
Vivarium	0%	54%	8%	38%
Logistics	0%	15%	31%	54%
Health and Safety	0%	23%	31%	46%
Academic Affairs	0%	8%	85%	8%
Other	0%	0%	46%	54%

For this question, schools that have an institution-wide remote work policy for all staff AND made only one selection per category were retained

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Support to Employees

For each type of work arrangement, does your school financially support (in part or in full) any of the following resources and services?

Support to Employees	Remote-Only	On-Site	Hybrid	Don't Know
Telephone/mobile stipend	29%	46%	33%	7%
Office furniture (e.g., desk, chairs)	18%	70%	29%	2%
Computer(s) and monitor(s)	65%	83%	75%	1%
Compliance/Legal/Audit	25%	35%	31%	26%
Computer camera	62%	70%	69%	1%
Mobile hot spot	8%	12%	8%	10%
Internet service fees	5%	19%	4%	6%
Stipend for use of alternate space	1%	0%	0%	8%
Paid on-site parking for times they must be on-site	8%	8%	8%	6%
Additional compensation	0%	1%	0%	7%
Transportation subsidy	8%	13%	8%	7%
Childcare subsidy	4%	6%	6%	7%
Gym access	13%	29%	21%	5%
Complimentary snacks/food	0%	13%	6%	5%
Complimentary coffee/beverages	0%	36%	11%	4%
Other	5%	4%	5%	1%
None	5%	1%	2%	0%

Note: %s were calculated out of 83 schools (94%; 83/88) that provided at least one answer

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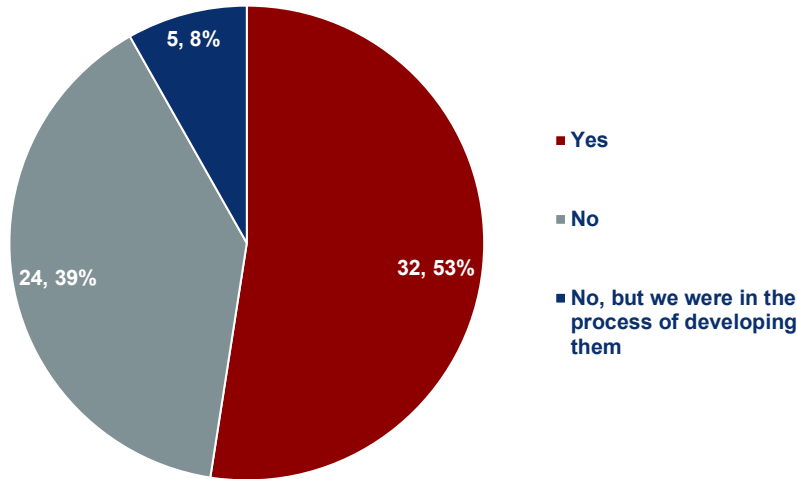


Preparing for a Post-COVID Era Workplace Policies and Practices Final Report

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Productivity Measures and Work Schedules

Before COVID, did you have set identified performance metrics for staff (n=61)*?

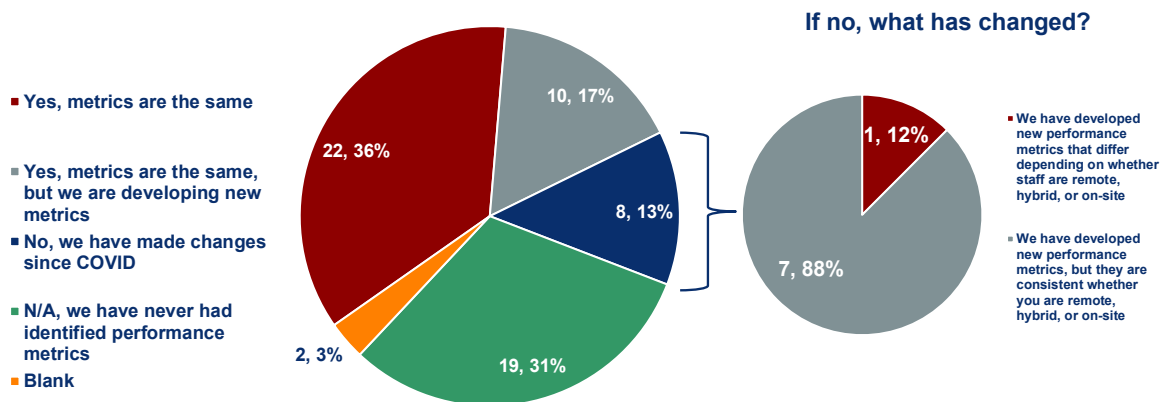


Note: %s were calculated out of 61 schools that answered "yes" to Q1 and have an institution-wide remote-work policy for all staff.

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Do you currently have the same performance metrics for staff (n=61)*?



Note: %s were calculated out of 61 schools that answered "yes" to Q1 and have an institution-wide remote-work policy for all staff.

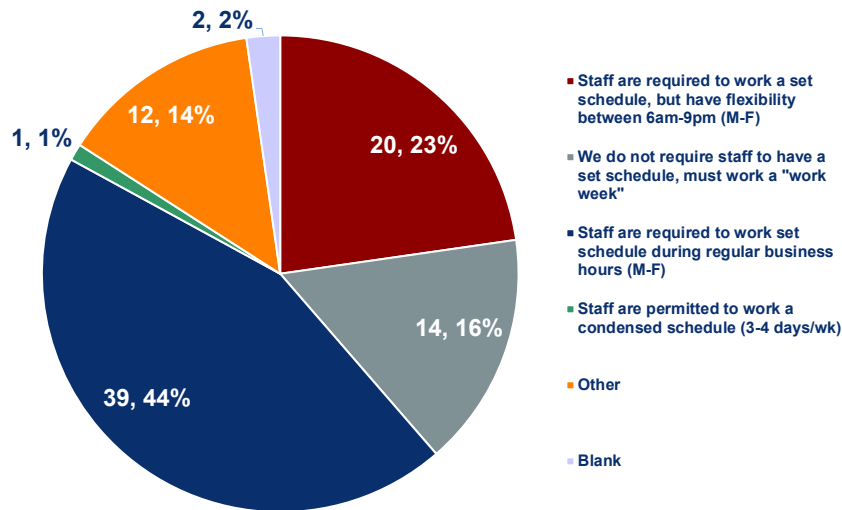
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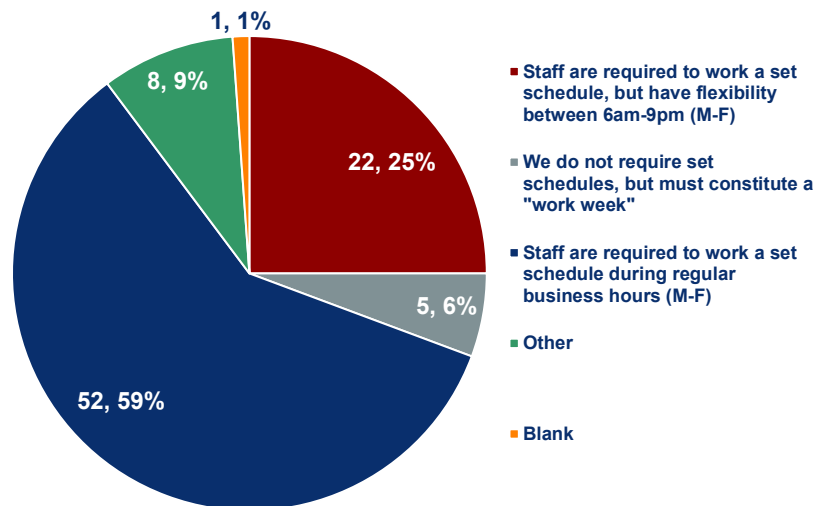
For staff who are remote or hybrid, please select the options below (n=88)



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For staff who are on-site, please select the options below that applies to the majority of your staff (n=88)



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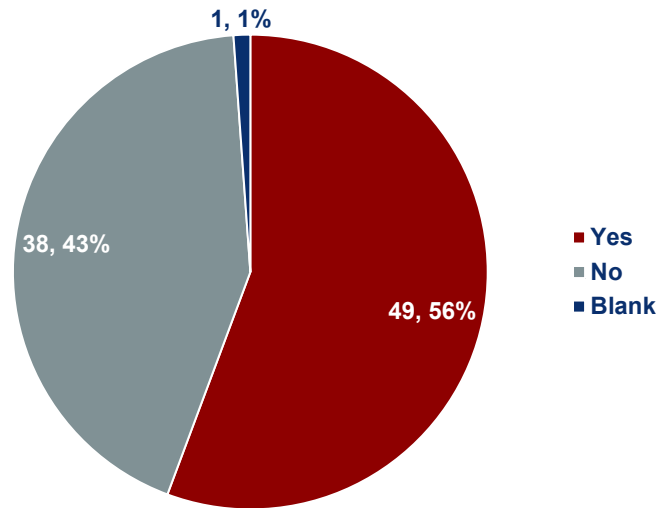


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Space & Policies

Have there been any changes to space as a result of the pandemic (n=88)?



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Have you or do you expect to change your square footage as a result of the shift to a more hybrid workforce (n=49)?

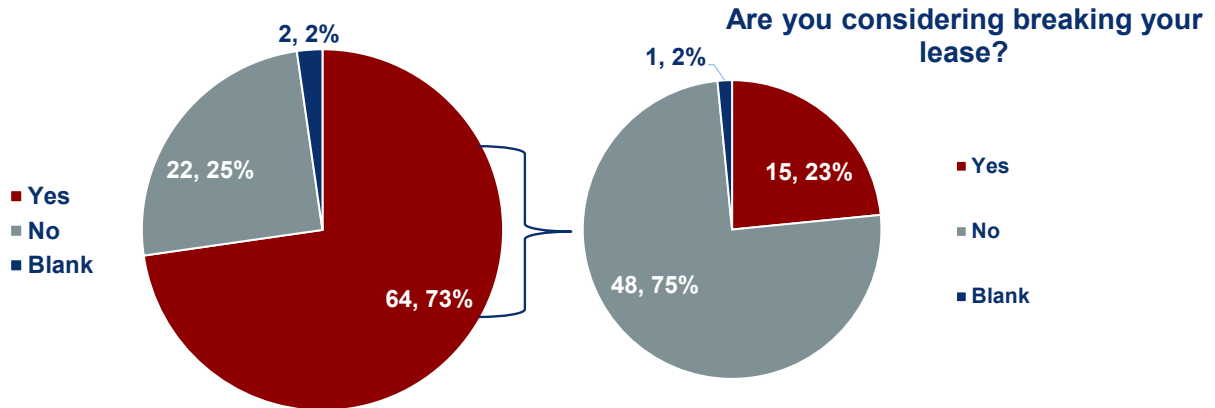
Location of sqft change	Have already reduced	Plan to reduce	Keep Same	Increase	Left Blank
Conference rooms	12%	12%	57%	10%	8%
Faculty offices	12%	16%	51%	14%	6%
Staff offices	41%	45%	10%	0%	4%
Wet lab research space	0%	2%	63%	31%	4%
Dry lab/computational research space	2%	4%	55%	31%	8%
Education	2%	2%	73%	18%	4%
Unassigned	6%	31%	22%	16%	24%
Other	4%	2%	2%	8%	84%

Note: %s were calculated out of 49 schools that answered “Yes” to Q19; “location of change” rows add up to 100%

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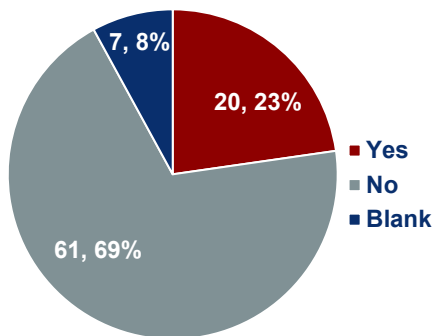
Were you leasing space pre-pandemic (n=88)?



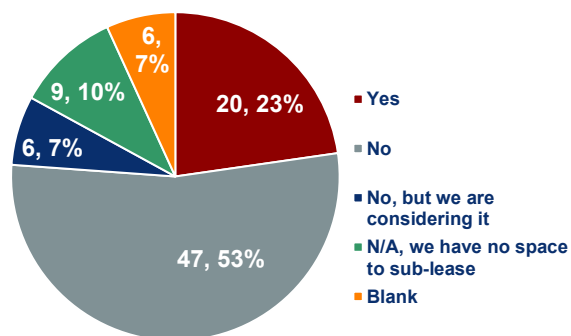
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Were you sub-leasing space pre-pandemic (n=88)?



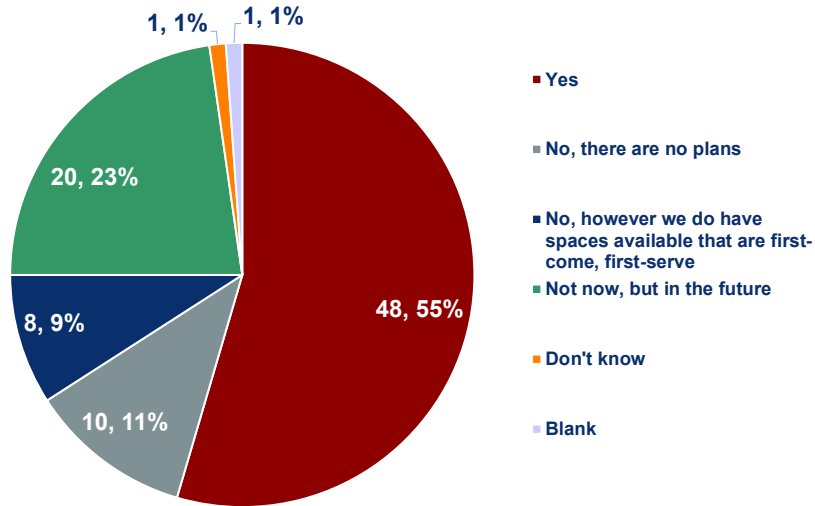
Are you currently sub-leasing space (n=88)?



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Do you currently offer hoteling space (n=88)?



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