

TEACHING FACULTY QUESTIONNAIRE

Instructions: The training program that you participate in is undergoing an Internal Review. We need input from the teaching faculty as part of this process. This questionnaire is based on current ACGME Requirements. Please complete and return to the training program's Residency Coordinator.

YES	NO	Residency Program _____
<input type="checkbox"/>	<input type="checkbox"/>	1. Are the teaching faculty adequately supported for their teaching endeavors? Comments:
<input type="checkbox"/>	<input type="checkbox"/>	2. Are the teaching faculty able to devote sufficient time to the educational program to fulfill their supervisory and teaching responsibilities? Comments:
<input type="checkbox"/>	<input type="checkbox"/>	3. Does your program ensure that teaching staff appropriately supervise residents? Comments:
<input type="checkbox"/>	<input type="checkbox"/>	4. Are there any department/section sponsored faculty development programs? Comments:
<input type="checkbox"/>	<input type="checkbox"/>	5. Is teaching a high priority for your department/section? Comments:
<input type="checkbox"/>	<input type="checkbox"/>	6. Is sufficient equipment available to support the educational requirements of the program? Comments:
<input type="checkbox"/>	<input type="checkbox"/>	7. Are clinical (patient numbers and staff) and academic support services (such as library) adequate? Comments:
<input type="checkbox"/>	<input type="checkbox"/>	8. Are there sufficient medical and/or surgical procedures (as applicable) for residents to have an adequate clinical experience? Comments:
<input type="checkbox"/>	<input type="checkbox"/>	9. Are your residents encouraged to participate in investigative work or scholarly activity with the faculty? Comments:
<input type="checkbox"/>	<input type="checkbox"/>	10. Does the program director maintain oversight and liaison with the teaching faculty regarding the residency program? Comments:
<input type="checkbox"/>	<input type="checkbox"/>	11. Are you aware of the ACGME competencies and how your residency program provides a competency-based curriculum? Comments:
<input type="checkbox"/>	<input type="checkbox"/>	12. Have you received copies of the goals and objectives for the residency program? Comments:
<input type="checkbox"/>	<input type="checkbox"/>	13. Are you aware of the program's policy for evaluation and promotion of residents? Comments:
<input type="checkbox"/>	<input type="checkbox"/>	14. Are you aware of the department/section's duty hours and moonlighting policies? Comments:
<input type="checkbox"/>	<input type="checkbox"/>	15. Have you, as faculty, been educated to recognize the signs of fatigue and sleep deprivation? Comments: