Date Created: 11/7/2014 4:14:06 PM **Active Participants:** 140 of 140
Average Score: 0.00% **Questions:** 68

Results by Question

1. The official name of that sculpture is: (Multiple Choice)

	Responses	
	Percent	**Count**
The Bean	61.7%	58
Cloud Gate	13.83%	13
The Electric Kidney Bean	3.19%	3
Drop of Mercury	21.28%	20
Totals	**100%**	**94**
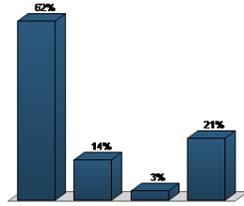
2. Do you pay hotel costs for your applicants? (Multiple Choice)

	Responses	
	Percent	**Count**
Yes	39.06%	25
Yes, and we also include some travel expenses	3.12%	2
No, but we pay for some travel expenses	1.56%	1
No	56.25%	36
Totals	**100%**	**64**
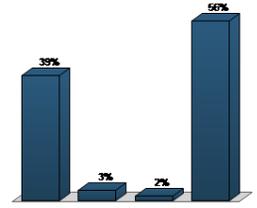
3. Do you pay hotel costs for your applicants? (Multiple Choice)

	Responses	
	Percent	**Count**
Yes	48.28%	14
Yes, and we also include some travel expenses	3.45%	1
No, but we pay for some travel expenses	3.45%	1
No	44.83%	13
Totals	**100%**	**29**
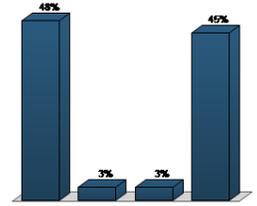
4. Are you mindful of diversity when selecting applicants to interview? (Multiple Choice)

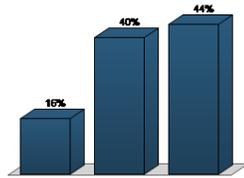|	Responses	
	Percent	**Count**
Yes, I try to ensure a proportionate representation of gender/race/etc…	33.33%	42
No, I don't pay attention to the photo or gender/race, etc…	50%	63
I am aware of the applicant's photo and wonder if I don't have some hidden bias	16.67%	21
Totals	**100%**	**126**
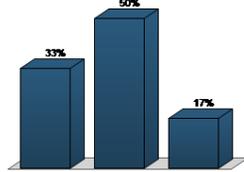
5. Do you treat applications from Osteopathic students (vs. Allopathic students) differently? (Multiple Choice)

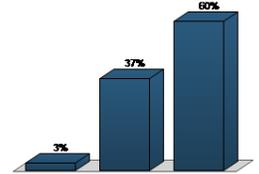|	Responses	
	Percent	**Count**
No	26.92%	35
Yes, we are mindful of the number (%) of DO students who get offered interviews.	47.69%	62
Yes, we rarely interview DO students.	25.38%	33
Totals	**100%**	**130**
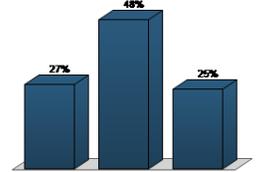
6. Will you interview an Osteopathic applicant who has only taken the COMLEX (and has not taken the USMLE?) (Multiple Choice)

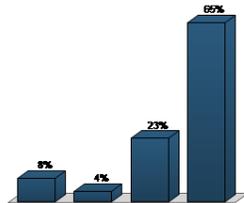|	Responses	
	Percent	Count
Yes, most of the time COMLEX is adequate	16.15%	21
No, most of the time we like to see USMLE scores as well	40%	52
Almost never (USMLE is pretty much mandatory)	43.85%	57
Totals	100%	130

7. Do you treat applications from international students differently? (Multiple Choice)

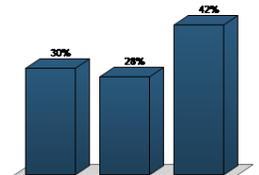|	Responses	
	Percent	Count
No	3.08%	4
Yes, we are mindful of the number (%) of international students who get offered interviews.	36.92%	48
Yes, we rarely interview international students.	60%	78
Totals	100%	130

8. Do you use Skype (or other form of technology) to interview medical student applicants? (Multiple Choice)

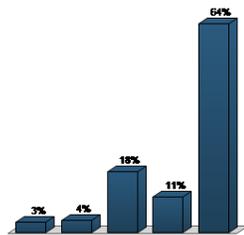|	Responses	
	Percent	Count
Yes, and it has been a positive experience.	8.4%	11
Yes, but it has not been a very positive experience	3.82%	5
No, but I am considering doing so in the future	22.9%	30
No way.	64.89%	85
Totals	100%	131

9. Do you "guarantee" spots to your top candidates during the regular match process? (Multiple Choice)

	Responses	
	Percent	Count
Yes, verbally	3.08%	4
Yes, in writing/e-mail	3.85%	5
We imply it verbally	18.46%	24
We imply it in writing/ e-mail	10.77%	14
No	63.85%	83
Totals	100%	130

10. Do you serve alcohol during any portion of your applicant interview process? (Multiple Choice)

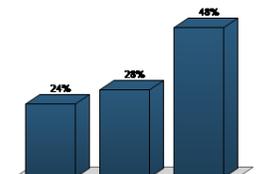|	Responses	
	Percent	Count
No, we do not serve alcohol.	30%	39
Yes, with care to limit individual intake (coupons, 2 drink limits)	27.69%	36
Yes, we serve alcohol.	42.31%	55
Totals	100%	130

11. Do you serve alcohol during any portion of your applicant interview process? (Multiple Choice)

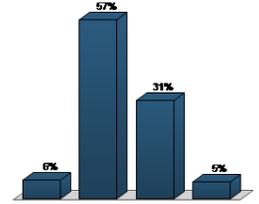|	Responses	
	Percent	Count
No, we do not serve alcohol.	23.68%	27
Yes, with care to limit individual intake (coupons, 2 drink limits)	28.07%	32
Yes, we serve alcohol.	48.25%	55
Totals	100%	114

12. How far down on your rank list do you usually go? (Multiple Choice)

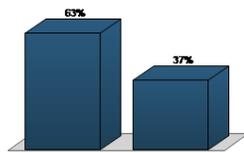|	Responses	
	Percent	**Count**
We usually stay in the top third.	12.1%	15
We usually go to the middle third.	50%	62
We go all the way to the bottom, but we usually fill.	33.06%	41
We often do not fill.	4.84%	6
Totals	**100%**	**124**
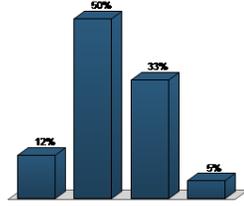
13. Which statement best describes your sentiments towards your match results: (Multiple Choice)

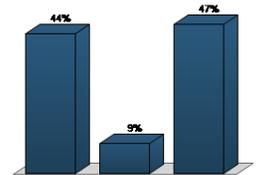|	Responses	
	Percent	**Count**
I am consistently immediately thrilled with our match results.	6.11%	8
Some years I am immediately thrilled, other years I wonder what happened?...too inconsistent to comment.	57.25%	75
I am rarely immediately thrilled with the match results but seem to embrace the less competitive matched applicants over time.	31.3%	41
I am often immediately disappointed with the match results and those sentiments really don't change over time.	5.34%	7
Totals	**100%**	**131**

14. If a program has both an advanced (3yr) AND a categorical (4yr) program, do you rank the applicants the same (Multiple Choice)

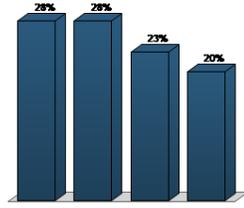|	Responses	
	Percent	**Count**
Yes, the rank lists look the same (even if some of the applicants only apply to one or the other)	62.79%	54
No, the rank lists look different because of some strategizing on our part or other reasons	37.21%	32
Totals	**100%**	**86**

15. When it comes to scheduling resident vacation time: (Multiple Choice)

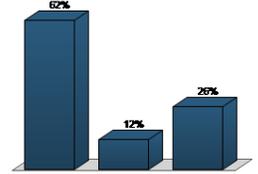|	Responses	
	Percent	**Count**
Residents choose the dates they want (no major block out weeks) and it is first come first served	43.75%	56
Program chooses dates allowed for vacations and residents have to fit into that time frame.	9.38%	12
An even combination of the above.	46.88%	60
Totals	**100%**	**128**

16. When it comes to allowing days off for residents to attend fellowship/job interviews… (Multiple Choice)

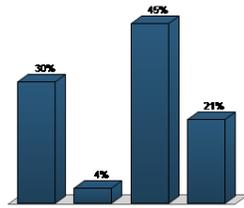|	Responses	
	Percent	**Count**
Residents must use their vacation time to interview	28.23%	35
We give 1-3 "free days" for interviews and we disguise it so our GME does not look at it as LOA	28.23%	35
We give 1-3 "free days" for interviews and our GME is OK with that	23.39%	29
We give >3 "free days" for interviews	20.16%	25
Totals	**100%**	**124**

17. ABA allows max of 60 days off during residency, which is 20 days per year (CA level). How do you manage resident sick days? (Multiple Choice)

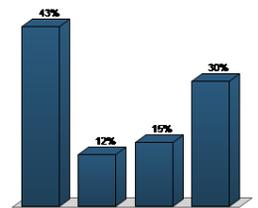|	Responses	
	Percent	**Count**
It comes out of their vacation time and I am glad to have the ABA policy to prevent abuse of "sick days".	61.61%	69
It comes out of their vacation time but I wish it were a bit more loose for the resident "wellness" piece.	12.5%	14
Our departmental or GME policy has figured a "work-around" for the ABA requirement.	25.89%	29
Totals	**100%**	**112**

18. Do you require incoming residents to arrive before July 1st and, if so, do you pay them? (Multiple Choice)

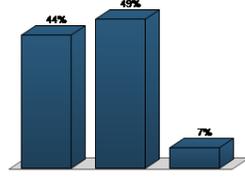|	Responses	
	Percent	**Count**
No, we do not expect them before July 1st.	30.23%	39
Yes, we require them to arrive before July 1st, and they are paid by our department.	3.88%	5
Yes, required, and our GME/hospital pays them.	44.96%	58
Yes, required, but they are unpaid.	20.93%	27
Totals	**100%**	**129**

19. Are residents able to "moonlight"? (Moonlight $ compensation for working late) (Multiple Choice)

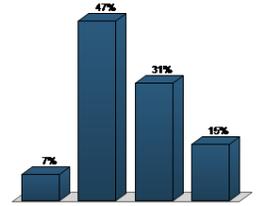|	Responses	
	Percent	**Count**
Yes, mostly doing typical anesthesia resident duties for our own department	42.75%	56
Yes, mostly within our own hospital but outside of the departmental duties	12.21%	16
Yes, mostly outside of our hospital	15.27%	20
No	29.77%	39
Totals	**100%**	**131**

20. Are residents able to go on medical mission trips? (Multiple Choice)

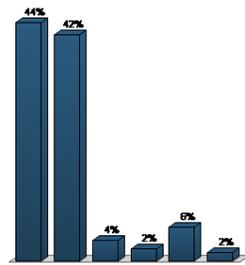|	Responses	
	Percent	**Count**
Yes, and we do not count that time against their vacation (call it research, etc…)	43.97%	51
Yes, but it is on their own vacation time	49.14%	57
No, we do not encourage participation with medical mission trips	6.9%	8
Totals	**100%**	**116**

21. Do you provide iPads for your residents? (Multiple Choice)

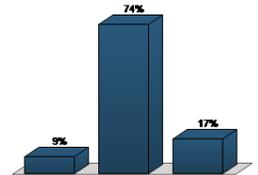|	Responses	
	Percent	**Count**
Yes, using an educational grant or endowment	6.98%	9
Yes, using departmental funds	47.29%	61
No, they need to purchase those on their own using professional discretionary funds	31.01%	40
No, they can purchase on their own NOT using discretionary funds	14.73%	19
Totals	**100%**	**129**

22. The following resident levels receive Professional Discretionary Funds (for meetings, study resources, etc…) (Multiple Choice)

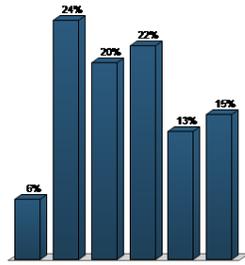|	Responses	
	Percent	**Count**
CBY, CA1, CA2, CA3	44.19%	57
CA1, CA2, CA3	41.86%	54
CA2, CA3	3.88%	5
CA3	2.33%	3
We do not provide discretionary funds for any level unless they are presenting at a meeting	6.2%	8
We do not provide any discretionary funds at all.	1.55%	2
Totals	**100%**	**129**

23. If residents are presenting at a meeting, departmental reimbursement: (Multiple Choice)

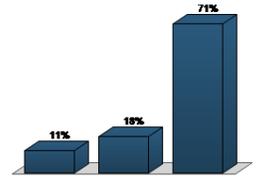|	Responses	
	Percent	**Count**
Includes all travel, housing and meal costs, no limit	8.59%	11
Includes travel, housing and meals with set limits	74.22%	95
Depends on which meeting and how robust the resident involvement is (case by case)	17.19%	22
Totals	**100%**	**128**

24. For those who provide discretionary funds, the BASELINE cumulative amount provided throughout an individual's residency is: (Multiple Choice)

	Responses	
	Percent	**Count**
Less than $1,000	6.09%	7
$1,000-1,999	24.35%	28
$2,000-2,999	20%	23
$3,000-3,999	21.74%	25
$4,000-4,999	13.04%	15
>$5,000	14.78%	17
Totals	**100%**	**115**

25. Regarding CME discretionary money and time for residents: (Multiple Choice)

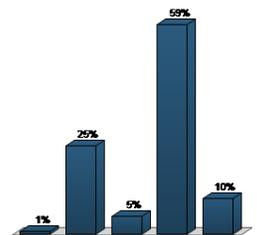|	Responses	
	Percent	**Count**
Residents may use it toward anything they choose.	10.92%	13
Residents may use it toward most anything they choose (including Hawaii or Ski meetings)	17.65%	21
Residents may only use it toward PD-approved purchases or pre-approved meetings/courses	71.43%	85
Totals	**100%**	**119**

26. How much money do you spend per graduating resident on a graduation "gift"? (Multiple Choice)

	Responses	
	Percent	**Count**
>$1000 per resident	0.8%	1
$500-999	5.6%	7
$200-499	13.6%	17
Less than $199	41.6%	52
No "gift" but we host a graduation party	37.6%	47
No "gift", no party, just a diploma	0.8%	1
Totals	**100%**	**125**
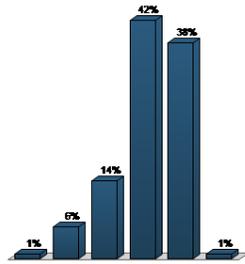
27. Our educational budget for our residents is composed mainly of: (Multiple Choice)

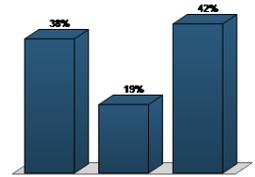|	Responses	
	Percent	**Count**
Philanthropic or alumni giving	0.83%	1
GME contributions	25%	30
Medical School contributions	5%	6
Departmental contribution not consisting of direct faculty contributions	59.17%	71
Departmental contribution consisting mainly of faculty contributions	10%	12
Totals	**100%**	**120**

28. Our departmentally-funded educational budget for residents is what percentage of the total operating budget (budget not including salaries) (Multiple Choice)

	Responses	
	Percent	Count
We do not fund any educational budget	3.39%	4
<5%	17.8%	21
6-20%	5.93%	7
21-30%	0.85%	1
31-50%	0.85%	1
>50%	0%	0
I have no idea	71.19%	84
Totals	100%	118
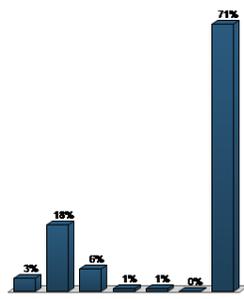
29. As far as resources for research go: (Multiple Choice)

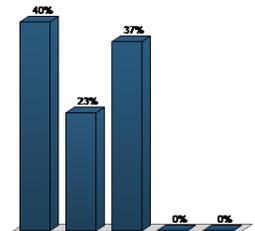|	Responses	
	Percent	Count
We have many resources (research nurse for our dept, stats service, assistance with grant writing, scholarship mentors, etc…)	38.14%	45
No research nurse, but other services are easily available	19.49%	23
No research nurse and not much of anything else either	42.37%	50
Totals	100%	118

30. As far as using technology for "lecture" material (non-grand rounds): (Multiple Choice)

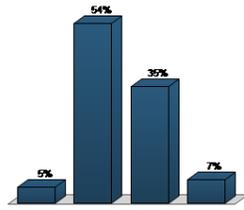|	Responses	
	Percent	Count
We pretty much do in-person lectures	70.77%	92
We mainly use "home-grown" videotaped lectures	4.62%	6
We mainly use national "products" (i.e. Khan Academy or Coursera)	0%	0
We do a mixture of all of the above	24.62%	32
Totals	100%	130
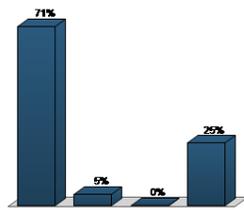
31. Your in-person didactic lecture series for resident education occurs: (Multiple Choice)

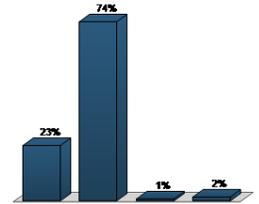|	Responses	
	Percent	Count
Before the typical work day	40.46%	53
After the typical work day	22.9%	30
During the typical work day	36.64%	48
On weekends	0%	0
We do not have many in-person lectures any longer	0%	0
Totals	100%	131

32. When it comes to "flipped classroom"(residents prepare/learn at home, attend in-person discussion or small group session) (Multiple Choice)

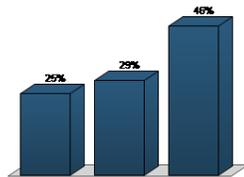|	Responses	
	Percent	**Count**
Most of our faculty use the flipped classroom for didactics	4.72%	6
Only a few of the faculty use the flipped classroom	53.54%	68
No one uses the flipped classroom	34.65%	44
Flipped what??	7.09%	9
Totals	**100%**	**127**

33. How do you manage call and staffing during the summer months when 1/3 of residents are too inexperienced to contribute to the "worker pool"? (Multiple Choice)

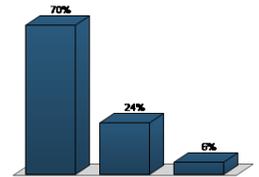|	Responses	
	Percent	**Count**
We have CRNAs cover more (limiting CRNA vacations, increase their call)	23.08%	27
We have attendings/senior residents cover more (limiting vacations, broader or more frequent call coverage)	74.36%	87
We hire locums or "super fellows"	0.85%	1
We limit clinical coverage sites	1.71%	2
Totals	**100%**	**117**

34. Do you think that patient care suffers in July and August? (Multiple Choice)

	Responses	
	Percent	**Count**
Yes-I can think of specific examples	25%	31
Maybe-but I can't give too many specific examples	29.03%	36
No	45.97%	57
Totals	**100%**	**124**

35. How are you monitoring Duty Hours? (Multiple Choice)

	Responses	
	Percent	**Count**
Hospital/GME-endorsed tool	92.74%	115
Departmentally created tool	3.23%	4
No formal tool, just informal monitoring of call schedules and self-reporting	4.03%	5
Totals	**100%**	**124**

36. If your residents still do 24 hour call, do you have difficulty with compliance? (Multiple Choice)

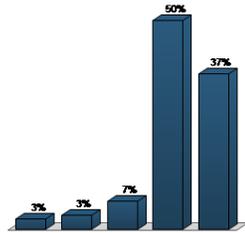|	Responses	
	Percent	**Count**
No, because we are very intentional about that (adjusting for arrival time on call, etc…)	70.19%	73
Yes, but we (PDs and residents) look the other way (30 minute overlap is not a big deal)	24.04%	25
Yes, but we are bothered by brief overlaps	5.77%	6
Totals	**100%**	**104**
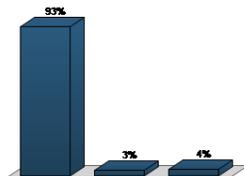
37. Which Duty Hours Requirement do you have difficulties with compliance? (Multiple Choice)

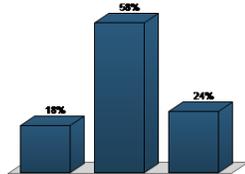|	Responses	
	Percent	**Count**
80 hours/week	2.54%	3
1 day off per week (as averaged over 4 weeks)	3.39%	4
Max 24 hours continuous duty	6.78%	8
Should have 10, must have 8 hours off btwn shifts	50%	59
No consistent difficulties with any	37.29%	44
Totals	**100%**	**118**

38. When it comes to scheduled academic time/study time for your residents, they get: (Multiple Choice)

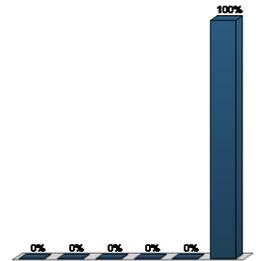|	Responses	
	Percent	**Count**
At least a day a week	3.28%	4
A couple days a month	4.1%	5
About 1 day a month	5.74%	7
A handful of days a year	4.92%	6
A few random days a year (as clinical schedule permits)	22.95%	28
Essentially none	59.02%	72
Totals	**100%**	**122**
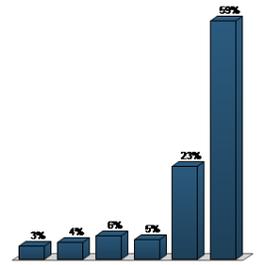
39. As far as Milestone reporting goes: (Multiple Choice)

	Responses	
	Percent	**Count**
We are using the actual Milestone table as the assessment tool	18.25%	23
We have rewritten our evaluation tools to include individual Milestones and those results will be reported on the Milestone table	57.94%	73
We have done nothing different, and will report the Milestones based on current tools and CCC opinion.	23.81%	30
Totals	**100%**	**126**

40. Does your institution provide a paid position for a GME-led "CLER leader" or "Quality and Safety leader"? (Multiple Choice)

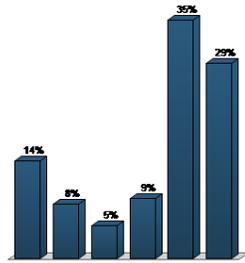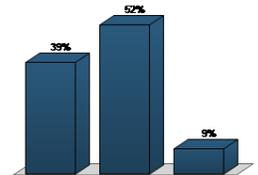|	Responses	
	Percent	**Count**
Yes, full time position	0%	0
Yes, >50% time	0%	0
Yes, 20-49% time	0%	0
Yes, <20% time	0%	0
No	0%	0
I don't know	100%	1
Totals	**100%**	**1**

41. Does your institution provide a paid position for a GME-led "CLER leader" or "Quality and Safety leader"? (Multiple Choice)

	Responses	
	Percent	**Count**
Yes, full time position	14.4%	18
Yes, >50% time	8%	10
Yes, 20-49% time	4.8%	6
Yes, <20% time	8.8%	11
No	35.2%	44
I don't know	28.8%	36
Totals	**100%**	**125**

42. If a resident fails the ABA BASIC exam the first time: (Multiple Choice)

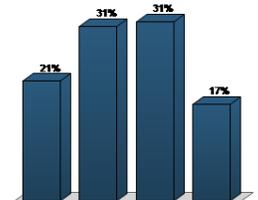|	Responses	
	Percent	**Count**
We will let the resident retake the exam one more time in January, but that's it. (Only 1 failure allowed.)	39.02%	48
We will let the resident retake it up to two more times, understanding that their residency may be extended, but that's it. (Only 2 failures allowed.)	52.03%	64
They will probably be allowed to retake it more than two more times, (3 failures allowed) and every case is different.	8.94%	11
Totals	**100%**	**123**

43. Do you ever give "Unsatisfactory" for the ABA six month report solely based on substandard academic performance/medical knowledge (Multiple Choice)

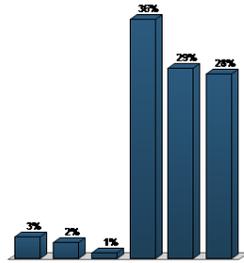|	Responses	
	Percent	**Count**
Yes, as it relates to USMLE Step 3 policy (not having passed USMLE before a designated time)	5.6%	7
Yes, as it relates to ITE (below a departmentally pre-set cut off)	6.4%	8
Yes, as it relates to AKT (below a departmentally pre-set cut off)	0%	0
Yes, as it relates to the ABA BASIC exam results	18.4%	23
Yes, as it relates to a combination of the above exams	35.2%	44
No	34.4%	43
Totals	**100%**	**125**
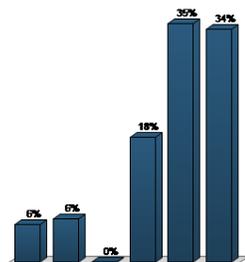
44. Does the payment for the ABA BASIC exam come out of your departmental budget (vs. the resident professional discretionary funds) (Multiple Choice)

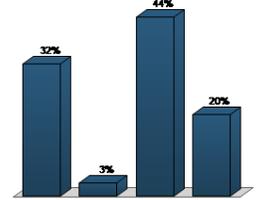|	Responses	
	Percent	**Count**
No, it comes out of the residents' own pocket	20.97%	26
No, but the residents can use their professional discretionary funds (indirectly out of our budget)	30.65%	38
Yes, we automatically cover it for all residents	31.45%	39
Yes, as part of a reward system for which some residents qualify	16.94%	21
Totals	**100%**	**124**

45. Do you do random drug screens (NOT "for cause" and NOT pre-arranged pre-employment screening) (Multiple Choice)

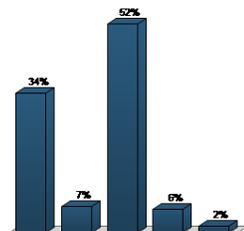|	Responses	
	Percent	**Count**
Yes, it has been successful to uncover a resident with a problem in our program	3.31%	4
Yes, but it has not uncovered any residents with problems yet	2.48%	3
Yes, although ineffective at "catching" someone, it may be a deterrent	0.83%	1
No because our legal department won't let us	36.36%	44
No, because it is ineffective at uncovering residents with problems	28.93%	35
No because of logistics and cost	28.1%	34
Totals	**100%**	**121**

46. If there is documented resident drug abuse and diversion of narcotics, our program (Multiple Choice)

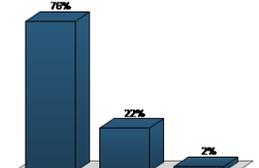|	Responses	
	Percent	**Count**
Would grant a second chance, allowing monitored re-entry into our own anesthesiology program	32.5%	39
Would grant a second chance, allowing monitored re-entry into another anesthesiology program	3.33%	4
Does not support re-entry into anesthesiology	44.17%	53
Makes a decision depending on the resident level: CA1/2-NO re-entry, but CA3 more likely to allow re-entry or case by case basis	20%	24
Totals	**100%**	**120**

47. If a resident is having "family problems" that affect their work, our program: (Multiple Choice)

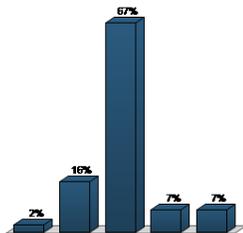|	Responses	
	Percent	**Count**
Uses a hospital-based service (Pastoral care, Employee Assistance program, etc…)	34.43%	42
Uses a departmental program to assist (attending or peer mentorship, etc…)	6.56%	8
Uses a combination of the above	51.64%	63
Has nothing in place to help the resident, but I wish we did	5.74%	7
Has nothing in place and the residents should not bring their "home life" to work.	1.64%	2
Totals	**100%**	**122**

48. When it comes to resident work ethic and dedication, compared to the past: (Multiple Choice)

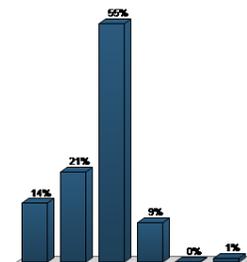|	Responses	
	Percent	**Count**
I think residents have a weaker work ethic and less dedication	75.83%	91
I do not see much of a difference in the overall attitude of residents now vs. then	21.67%	26
I think residents have an overall stronger work ethic and greater dedication	2.5%	3
Totals	**100%**	**120**

49. How frequently are you releasing a resident from the program? (Multiple Choice)

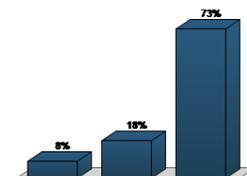|	Responses	
	Percent	**Count**
Annually 1-2 released	2.42%	3
Every other year 1-2 released	16.13%	20
1-2 released in 5+ yrs	66.94%	83
Never, because of our excellent residents	7.26%	9
None yet, (I am too new to the job)	7.26%	9
Totals	**100%**	**124**

50. Aside from diversion and abuse issues, which competency category contains the most common reason for releasing a resident from the program? (Multiple Choice)

	Responses	
	Percent	**Count**
Medical Knowledge	13.64%	15
Patient care	20.91%	23
Professionalism	55.45%	61
Communication and Interpersonal skills	9.09%	10
Practice-Based Learning and Improvement	0%	0
Systems- Based Practice	0.91%	1
Totals	**100%**	**110**

**51. As a Program Director, in general, do you use a stick (punishment) or a carrot (reward)? (Multiple Choice)**

	Responses	
	Percent	**Count**
Mostly sticks	8.4%	10
Mostly carrots	18.49%	22
An even combination of the two	73.11%	87
Totals	**100%**	**119**

52. As far as "protected time" to direct the program, (Multiple Choice)

	Responses	
	Percent	**Count**
I am in compliance with the ACGME recommendations for the most part	83.13%	69
I am NOT in compliance with the ACGME recommendations and I wish I was	16.87%	14
I am NOT in compliance with the ACGME recs but I get the job done just fine and am not looking for another ACGME"mandate"	0%	0
Totals	**100%**	**83**
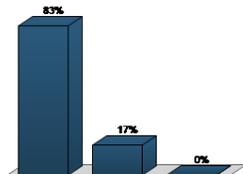
53. As far as "protected time" to direct the program, (Multiple Choice)

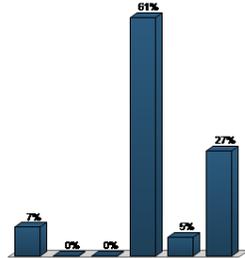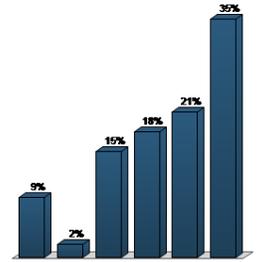|	Responses	
	Percent	**Count**
I am in compliance with the ACGME recommendations for the most part	74.04%	77
I am NOT in compliance with the ACGME recommendations and I wish I was	22.12%	23
I am NOT in compliance with the ACGME recs but I get the job done just fine and am not looking for another ACGME"mandate"	3.85%	4
Totals	**100%**	**104**
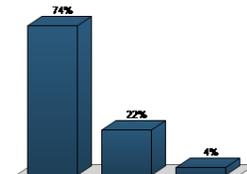
54. If you are NOT in compliance with the AGGME recommendation, it is primarily because: (Multiple Choice)

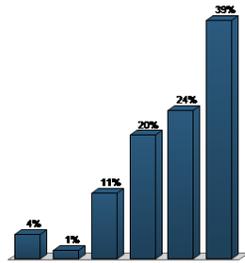|	Responses	
	Percent	**Count**
Unsupportive Chair	7.32%	3
Unsupportive GME	0%	0
Combination of 1 and 2	0%	0
No one is unsupportive, it is simply that our clinical duties do not allow for this non-clinical time	60.98%	25
I don't need that much time to direct the program so I don't push it	4.88%	2
The old FAQ "recommendations" were not viewed as "requirements" so it did not get enforced	26.83%	11
Totals	**100%**	**41**

55. How much would your salary decrease if you relinquished your PD position? (Multiple Choice)

	Responses	
	Percent	**Count**
>100K	8.65%	9
70-99K	1.92%	2
50-69K	15.38%	16
20-49K	18.27%	19
1-19K	21.15%	22
I am paid in time so I would lose my academic days	34.62%	36
Totals	**100%**	**104**

56. How much would your salary decrease if you relinquished your PD position? (Multiple Choice)

	Responses	
	Percent	**Count**
>100K	4.05%	3
70-99K	1.35%	1
50-69K	10.81%	8
20-49K	20.27%	15
1-19K	24.32%	18
I am paid in time so I would lose my academic days	39.19%	29
Totals	**100%**	**74**

57. Who primarily pays you (in time or money) to be PD? (Multiple Choice)

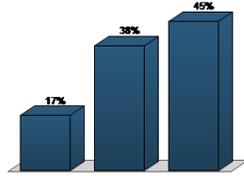|	Responses	
	Percent	**Count**
My department	52.25%	58
Our GME	13.51%	15
Our hospital	3.6%	4
Our medical school	1.8%	2
Even combinations of the above	17.12%	19
Nobody pays me anything	11.71%	13
Totals	**100%**	**111**
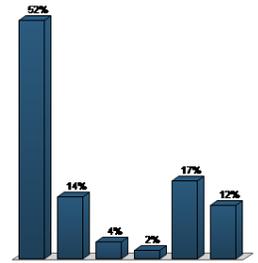
58. How much academic time (non-clinical time) do your average full time faculty get (who are NOT PDs, division heads, or other leadership roles) (Multiple Choice)

	Responses	
	Percent	**Count**
7-8 days a month	0.85%	1
5-6 days a month	0.85%	1
3-4 days a month	20.34%	24
1-2 days a month	20.34%	24
Less than 1/month	25.42%	30
none	32.2%	38
Totals	**100%**	**118**
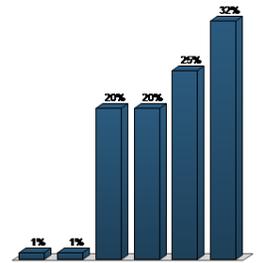
59. I think the Program Directors "Meet and Greet" at the ASA is: (Multiple Choice)

	Responses	
	Percent	Count
Time well spent and worthwhile to me and my program	16.67%	18
Not a waste of time but not very worthwhile either	37.96%	41
A waste of time and not very worthwhile to me or my program	45.37%	49
Totals	100%	108

(bar chart: 17%, 38%, 45%)

60. I would support efforts to make the ASA "Meet and Greet": (Multiple Choice)

	Responses	
	Percent	Count
More of an organized agenda to better use the PD's time: applicant interview opportunities, applicant discussion with other PDs, etc…	52.33%	45
…Change nothing	47.67%	41
Totals	100%	86

(bar chart: 52%, 48%)

62. When it comes to outside hospital verifications for former residents: (Multiple Choice)

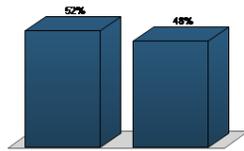|	Responses	
	Percent	Count
I just use the "final note to file" GME has required and employers can call me with any further questions (very little in writing)	18.87%	20
I find some of the questions uncomfortable (would you hire this person, would you let them care for your family) and do not answer those, but fill out the rest	14.15%	15
I fill out all of the questions asked, yet I am still uncomfortable with some of them	34.91%	37
I fill out all questions and have no problem doing so	32.08%	34
Totals	100%	106

(bar chart: 19%, 14%, 35%, 32%)

61. When it comes to the Standardized Letter of Recommendation (SLOR) for medical students (not fellowships): (Multiple Choice)

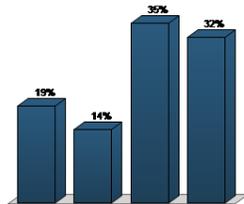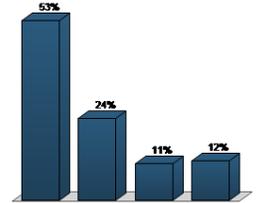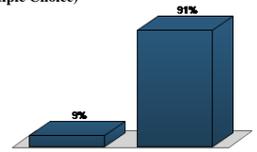|	Responses	
	Percent	Count
I have already started using it and like it	24.24%	24
I have already started using it and dislike it	10.1%	10
I plan to start using it for next year	18.18%	18
I do not plan to use it	47.47%	47
Totals	100%	99

(bar chart: 24%, 10%, 18%, 47%)

63. Would you like to see a concurrent Program Coordinator Meeting with the SAAA? (Multiple Choice)

	Responses	
	Percent	Count
Yes, definitely	53.33%	64
Maybe	24.17%	29
Not really necessary	10.83%	13
Absolutely NOT	11.67%	14
Totals	100%	120

(bar chart: 53%, 24%, 11%, 12%)

64. Will the NAS/Milestones improve healthcare in America? (Multiple Choice)

	Responses	
	Percent	Count
Yes	8.65%	9
No	91.35%	95
Totals	100%	104

(bar chart: 9%, 91%)

65. Will the Milestones improve the quality of graduates from your program? (Multiple Choice)

	Responses	
	Percent	Count
Yes	12.26%	13
No	87.74%	93
Totals	100%	106

(bar chart: 12%, 88%)
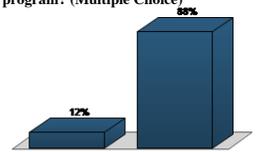
66. Will the Milestones improve your ability to evaluate and remediate residents? (Multiple Choice)

	Responses	
	Percent	**Count**
Yes	51.64%	63
No	48.36%	59
Totals	**100%**	**122**

67. Will you still be the program director in 5 years? (Multiple Choice)

	Responses	
	Percent	**Count**
Probably	22.22%	22
Maybe	22.22%	22
Probably not	35.35%	35
Not if I have any say in it	20.2%	20
Totals	**100%**	**99**

68. What is most likely to push you off the deep end? (Multiple Choice)

	Responses	
	Percent	**Count**
Dealing with the Chair	6.86%	7
Dealing with Residents	17.65%	18
Dealing with Faculty	35.29%	36
Dealing with the ACGME	40.2%	41
Totals	**100%**	**102**