**Management Survey**

1. **At work, do you have the opportunity to do what you do best on a daily basis?**
   * Yes, every day.
   * Almost always.
   * Some of the time.
   * Hardly ever.
   * No. I really think I am in the wrong position.

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **As a manager, do you believe that your team members have the opportunity to do what they do best on a daily basis?**
   * Yes, every day.
   * Almost always.
   * Some of the time.
   * Hardly ever.
   * No. I think we need to re-evaluate my team.

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Do you and your team have the necessary tools and resources needed to do the job right?**
   * Yes. We feel we are well supported and have what we need to do a good job.
   * Mostly. We have most of what we need to do a good job.
   * No. We need improvements for my team to move forward.
   * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Do you feel confident in what is expected of you and your team’s performance?**
   * Yes, I know what is expected of me and my team.
   * I know what is expected most of the time.
   * I frequently have trouble understanding what is expected of me and my team.
   * I do not understand what is expected.
   * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. **As a manager, do you feel your input is heard?**
   * By your manager? Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * By your physicians? Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * By your staff? Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. **In what area of your job would you like to have more support?**

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **How would you rate your team’s current performance?** 
   * My team could be considered the model for the practice.
   * On most days, we do really well, but we do have our drama/performance issues.
   * My team is struggling in performance and/or attitude, and I need help.
   * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **As a manager, I need more support in the following area of my job: (Please select all that apply)**
   * Job knowledge: I need support understanding the duties and responsibilities of my team.
   * Quantity: I need support helping my team meet the volume of work required.
   * Accuracy: I need support helping my team produce better quality of work.
   * Teamwork: I need support motivating my group to work together as a team.
   * Leadership: I need support organizing and directing people in a group environment.
   * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. **As a manager, I need to learn more about the following area of management:**
   * Setting goals for my team and getting them involved.
   * Delegating tasks so that the work is shared within the team.
   * Providing positive feedback and performance plans for the team.
   * Training, education, and development of my team members.
   * Developing a recognition and reward system for my team.
   * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. **Do you feel that a management position is the ideal role for you in the practice?**
   * Yes. On most days, I love managing my team.
   * Not sure: I think I could improve with more training and development.
   * No. To be perfectly honest, I really don’t like managing others.
   * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. **When working with other members of the management team, do you feel that your input is recognized and valued?**
   * Yes. I feel like my input is valued and my ideas are often implemented.
   * Sometimes. I make recommendations, but I have very little control over whether or not my ideas are implemented.
   * No. I don’t feel like my input is recognized, and I sometimes wonder why I make recommendations.
   * Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. **Do you feel that the practice’s mission and vision are clearly defined and that your team members believe that their jobs are important?**

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **In the last six (6) months, has someone talked to you about your professional development?**
   * Yes. I have had someone from the senior management team or a physician talk with me about my personal development.
   * No. I have not had a conversation about my development with senior management team or a physician.
     + If no, when was the last time you had a conversation about your development? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Do you want to provide any other feedback regarding your team?**

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Do you want to provide any other feedback or comments regarding your role as a manager?**

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_