

# AAP Completion of Term Questionnaire

The Academy encourages you to complete the following questionnaire, and add any comments or perspectives that you think will enhance the participation of future members of AAP groups. A group is a committee, editorial board, planning group, section, task force, work group or other organized AAP entity.

The goals of this questionnaire are threefold. First, it is designed to garner your insights in order to improve the way an AAP group provides orientation to new members. Second, the Academy wants to solicit your opinion about the way your group manages its directives and addresses the Academy's mission. Third, we need your ideas as to how other Academy Fellows can be encouraged to volunteer on an AAP group.

This is not a confidential questionnaire, as responses will be shared in order to address your concerns and suggestions. This questionnaire is designed to be "freestanding." However, it was also intended to serve as a springboard for a conversation about your experiences with the Chairperson of your group, or, if you are a Chairperson, with the appropriate AAP Department or Division Director.

Thank you very much for your participation on an Academy group, and for taking the time to share your experiences and ideas. Your input is very important and greatly appreciated!

Name:

Date:

AAP Group (eg, Committee, Section, Task Force, Editorial Board, Planning Group, etc.) from which you are retiring:

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## 1. Were you a:

Chairperson

Member

Liaison, *please identify organization:*

2. How many years have you served on this AAP group?

## 3. Reason for leaving the above AAP group:

Served maximum allowable time

Other, *please explain*:

## I. YOUR EXPERIENCES AS AN AAP VOLUNTEER

4. How did you become a member of this AAP group? (*Check only one*).

- Recruited by a member of the group's executive committee
- Recruited by AAP leader
- Recruited by my chapter
- Actively sought/campaigned for membership

Other, *please specify*:

5. What factor(s) motivated you to accept appointment to this group?

- Interested in furthering AAP's mission
- Group's activities will benefit me in my "day job"
- Opportunity to network
- Opportunity to share expertise
- Want to move up to a position of leadership in the AAP

Other, *please identify*:

6. Did your experience meet your expectations?

- Yes  No

If not, why not?

**7. Was the time allotted for each meeting of your group:**

- Insufficient
- Adequate
- Excessive

**8. How frequently did your group meet?**

- Once a year
- Twice a year

Other, *please specify*:

**9. Was the frequency of your group's meetings:**

- Insufficient
- Adequate
- Excessive

**10. Overall, were you satisfied with the meeting logistics (food, hotel, etc.)?**

- Yes  No

Comments or suggestions:

**11. During your tenure on the group, did you find it efficient to conduct business between face-to-face meetings via the following methods:**

E-mail:  Yes  No  No Opinion

Listserv(R):  Yes  No  No Opinion

Conference call:  Yes  No  No Opinion

Other, *please specify*:

**12. In general, was the time allotted for conference calls:**

- Insufficient
- Adequate
- Excessive
- Not applicable

**13. Overall, was the amount of work asked of you:**

- Insufficient
- Adequate
- Excessive

**14. Did the type of assignments you received during your tenure meet your expectations:**

- Yes  No

If no, why not?

**15. Was the overall staff support for the AAP Group: (Check all those that apply)**

Sufficient --  Yes  No

Comment:

Knowledgeable/helpful --  Yes  No

Comment:

Respectful of your other professional and personal commitments --  Yes  No

Comment:

**16. Overall, how would you describe your interactions with the primary staff for the AAP group on which you served:**

- Very Negative
- Negative
- Positive
- Very Positive

Comments:

**17. Do you think staff and member interaction for your group could be improved?**

- Yes  No

If "yes", in what ways:

**18. When you first became a member of the group, was your institution/employer supportive of your participation?**

- Yes  No  No comment from institution/employer

If not, why not?

**19. What do you think some of the key factors were to the group's successes?**

- Organization
- Compatibility of group
- Expertise
- Commitment of members

Other, *please specify*:

**20. What areas for improvement can you suggest?**

- More background information provided (eg, in agenda book)
- More focused/constructive discussions
- Better understanding of the expectations of the members (eg, assignments)
- More follow-up between meetings (eg, status reports, reminders)
- More staff participation
- Less staff participation

Additional committee member expertise needed, *please specify*:

Any other suggestions:

**21. What other projects or issues do you feel are important for the group to address?**

**22. What would you say was your greatest contribution to the group?**

**23. Please rate your overall impression of your experience on this AAP group:**

- Very Negative
- Negative
- Positive
- Very Positive

**24. Would you be interested in other opportunities to participate in the Academy?**

Yes  No

If yes, how?

AAP national committee member - list preferences:

- AAP section executive committee member
- Chapter officer
- District officer
- CATCH facilitator
- Editorial Board member
- AAP liaison to other organization
- Faculty member for AAP CME events

Other, *please specify*:

**25. Did you inform your AAP chapter about the activities of your group?**

- Frequently
- Occasionally
- Rarely
- Never

**26. If "yes," did you encounter any difficulties in keeping your Chapter informed about the activities of your group:**

Yes  No

Comments or suggestions:

**27. In your opinion, was your AAP Chapter interested in this feedback?**

Yes  No

Comments or suggestions:

## II. IMPROVEMENTS FOR FUTURE VOLUNTEERS' EXPERIENCES WITH THE AAP

**28. Which meeting format do you prefer?** *(select your top three options)*

- One and a half days/twice a year (old format)
- Two and a half days/once a year (new format)
- One or more conference calls plus meeting one and a half days/twice a year
- One or more conference calls plus meeting two and a half days/once a year
- Meet over Saturday and Sunday
- Meet during the week
- No preference

Other:

**29. What do you think about holding your meeting in conjunction with another meeting (eg, AAP National Conference and Exhibition, Pediatric Academic Societies Annual Meeting, other)?**

- Prefer
- Doesn't matter one way or the other
- Depends on the meeting
- Prefer not to meet in conjunction with another meeting

Comments or suggestions:

**30. What suggestions do you have on making the volunteer experience more beneficial for the member?**

**31. How can the Academy make participation in volunteer work more rewarding?**

### III. DEMOGRAPHIC PROFILE

**32. Gender:**

Female  Male

**33. What is your age?**

- Under 30
- 31-40
- 41-50
- 51-60
- 61-70
- Over 70

**34. With what racial/ethnic or cultural group do you identify yourself? (Check only ONE).**

- White, non-Hispanic/Latino
- Asian or Pacific Islander
- Black/African-American
- Hispanic/Latino
- Native American or Alaskan Native

Other, *please specify.*

**35. During the majority of the time spent on this group, were you a:**

- Resident/fellow
- Primary care pediatrician
- Academic pediatrician
- Research scientist
- Pediatric medical subspecialist, surgical specialist, or other specialist physician,

*please identify:*

- Physician Assistant
- Nurse or Nurse Practitioner
- Complementary/Alternative Medicine Practitioner

Other, *please identify:*

**36. During your tenure on this AAP group, what was your primary (more than 50% of your time) practice/employment situation:**

- Full-time  Part-time

Both, *please explain:*

**37. During the majority of the time spent on this group, what was your primary (more than 50% of your time) professional setting:**

- solo practice
- multispecialty group
- academic medical center
- community hospital

Other, *please specify:*

**38. During your tenure on this AAP group, what was your primary (more than 50% of your time) professional activity:**

- Patient care: office-based practice

- Patient care: hospital-based practice (includes: residents and fellows and full-time members of hospital staffs)
- Administration
- Academic pediatrics
- Research
- Not employed/retired

Other employment (eg, medical society, association, voluntary organization, insurance industry, pharmaceutical company, foreign countries, etc.). *Please describe:*

Submit