**Component Member Survey Questions**

Tips before you get started

* Before copying and pasting these questions into a survey provider (survey monkey, jotform, etc.) or paper format, do a Find and Replace for <COMPONENT> and replace it with the name of your specific component.
* Limit the amount of open ended questions. Quantifiable results are easiest to analyze.
* Limit your survey to questions that provide results that will be used to take action or drive goals and objectives. (versus just being interesting)
* Keep the survey as brief as possible.
* Provide incentive if possible.
* Include an end date to your survey (recommended for 2-3 weeks). You can extend the deadline if needed.
* Member satisfaction surveys should be conducted at least every three years. Project or event specific surveys may need conducted in addition to a satisfaction survey.

**Potential Questions for Member Satisfaction**

1. What is your gender?

*Male*

*Female*

1. What is your age?

*Under 25*

*25 - 29*

*30 - 34*

*35 - 39*

*40 - 44*

*45 - 49*

*50 - 54*

*55 - 59*

*60 - 64*

*65 or older*

1. Are you Hispanic or Latino (i.e., a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin)?

*Yes*

*No*

*Prefer not to identify*

1. If no to question above, please identify your race(s) by checking one or more of the boxes below.

*White (not Hispanic or Latino) — a person having origins in any of the original peoples of Europe, the Middle East or North Africa)*

*Black or African American (not Hispanic or Latino) — a person having origins in any of the black racial groups of Africa*

*Native Hawaiian or other Pacific (not Hispanic or Latino) — a person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands*

*Asian (not Hispanic or Latino) — a person having origins in any of the peoples of the Far East, Southeast Asia or the Indian Subcontinent*

*American Indian or Alaskan (not Hispanic or Latino) — a person having origins in any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment*

*Two or more races (not Hispanic or Latino) — persons who identify with more than one of the races*

*Prefer not to identify*

1. Highest level of education attained?

*Doctoral degree, dietetics-related*

*Doctoral degree, other area*

*Masters degree dietetics-related*

*Masters degree other area*

*Bachelors degree*

*Associates degree*

*Other*

1. How many years have you been working in OEM?

*<insert date range options>*

1. Medical credentials currently held? Select all that apply.

*MD*

*MPH*

*State license or certification*

*I am currently a medical student*

*Completed a 2-year or 4-year degree from an accredited / approved medical program*

*Other*

*None of these*

1. Which one option most closely matches the primary setting of your position? Select all that apply.

*Private practice-Individual Practice/Business*

*Clinic based practice*

*Hospital*

*Corporation*

*Government agency or department*

*Military*

*Community or public health program*

*Non-profit or not-for-profit agency/organization/trade association*

*College, university, or teaching-hospital faculty*

*Other*

1. Which one option most closely matches the practice area where you spend most of your time in your position? Select all that apply.

*Academics/Research*

*Addiction Medicine*

*Aerospace Medicine*

*Allergy*

*Cardiovascular Diseases*

*Chemical Pathology*

*Clinical Neurophysiology*

*Corporate Medicine*

*Diabetes*

*Disability Evaluation*

*Disability Prevention/Management*

*Emergency Medicine*

*Environmental Health*

*Epidemiology*

*Family Medicine*

*Gastroenterology*

*General Practice*

*General Preventative Medicine*

*General Surgery*

*Geriatric Medicine*

*Hematology and Oncology*

*Immunology*

*Infection Disease*

*Internal Medicine*

*Legal Medicine*

*Medical Genetics*

*Medical Management*

*Medical Toxicology*

*Neurology*

*Nutrition*

*Occupational Dermatology*

*Occupational Medicine*

*Orthopedic Injuries*

*Osteopathic Manipulative Medicine*

*Pain Medicine*

*Physical Medicine and Rehabilitation*

*Public Health*

*Pulmonary Disease*

*Rheumatology*

*Sleep Medicine*

*Spinal Cord Injury Medicine*

*Sports Medicine*

*Urgent Care Medicine*

*Other*

1. How long have you been a member of ACOEM?

*First Year*

*1 – 5 years*

*5 – 10 years*

*>10 years*

1. How long have you been a member of <COMPONENT>?

*First Year*

*1 – 5 years*

*5 – 10 years*

*>10 years*

*The following three questions could be built into a matrix grid rating scale question.*

1. Rate the awareness of the services offered by <COMPONENT>

Used in last 3 years Aware of, haven’t used Not Aware of

<list the component’s member events, programs, products, and services>

1. Rate the importance of the services offered by <COMPONENT>

Extremely Important Not at all important

<list the component’s member events, programs, products, and services>

1. Rate your satisfaction of the services offered by <COMPONENT>

Very Satisfied Very Dissatisfied

<list the component’s member events, programs, products, and services>

1. What were your primary reasons for initially joining <ACOEM/COMPONENT>?

*Because <ACOEM/COMPONENT> advocates for the OEM profession with health care providers, government, the workplace, and community*

*To connect with colleagues*

*For professional and career development*

*To access <ACOEM/COMPONENT> education / information materials*

*To obtain member discounts for <COMPONENT> programs, publications, and activities*

*To receive the <ACOEM/COMPONENT> newsletter*

*To support the work of <ACOEM/COMPONENT>*

*To help in marketing my practice*

*For assistance in locating a job*

*To develop or enhance leadership skills*

*Encouraged by another (employer, professor, colleague)*

*Required by employer or school*

*To use <ACOEM/COMPONENT> materials and/or networking resources for class assignments*

*To be able to apply for <ACOEM/Section/COMPONENT> scholarship*

*Other:*

*Have not renewed my <ACOEM/COMPONENT> membership*

1. What are your primary reasons for continuing your membership with <ACOEM/COMPONENT>?

*Because <ACOEM/COMPONENT> advocates for the OEM profession with health care providers, government, the workplace, and community*

*To connect with colleagues*

*For professional and career development*

*To access <ACOEM/COMPONENT> education / information materials*

*To obtain member discounts for <COMPONENT> programs, publications, and activities*

*To receive the <ACOEM/COMPONENT> newsletter*

*To support the work of <ACOEM/COMPONENT>*

*To help in marketing my practice*

*For assistance in locating a job*

*To develop or enhance leadership skills*

*Encouraged by another (employer, professor, colleague)*

*Required by employer or school*

*To use <ACOEM/COMPONENT> materials and/or networking resources for class assignments*

*To be able to apply for <ACOEM/Section/COMPONENT> scholarship*

*Other:*

*Have not renewed my <ACOEM/COMPONENT> membership*

1. How often do you visit the <COMPONENT> website?

*Daily*

*Weekly*

*Monthly*

*Annually*

1. Why do you visit the <COMPONENT> website?

*<list reasons>*

1. How often do you prefer to receive email communications from <Component?

*Daily*

*Weekly*

*Monthly*

*No preference, prefer emails on an as needed basis*

1. What makes your <COMPONENT> membership valuable to you?
2. Do you attend <Component> events?

*<list multiple choice options>*

1. What webinar topics would you recommend for future <COMPONENT> webinars?

*<list multiple choice options>*

1. What new benefits would you like to see <COMPONENT> offer?
2. What are the primary ways <COMPONENT> membership has assisted you in advancing your career (if any)?

*Provided me with professional development*

*Provided me with essential professional resources and information*

*Provided me with opportunities to connect with peers*

*Advocated for my profession*

*Exposed new job opportunities*

*Provided me the opportunity to become a leader within the profession*

*Other:*

*None*

1. What additional benefits or services could <COMPONENT> offer to make your more successful in our career?
2. What type of professional development opportunities are you interested in?

*<list multiple choice options>*

1. How does the price of membership compare with the value you receive from <Component>?

*<list multiple choice options>*

1. If you are a member of other medical or professional groups, what are some of the most important benefits/offerings that group provides you that <COMPONENT> does not?
2. Listed below are some programs, products and services that could be offered in the future as benefits of <Component> membership. How desirable would you find each?

<insert potential programs with a rating scale>

1. To what extent would you like to increase opportunities to get to know other <Component> members?

*Not at all*

*A little bit*

*Somewhat*

*Very Much*

*Extremely*

1. What would be your one preferred method for getting to know the other <Component> members?

*In-person networking events*

*Virtual networking events*

*<Component> website*

*Member directory*

*Newsletter*

*Social events*

1. At this time, how likely are you to renew your <ACOEM/COMPONENT> membership?

*<insert a rating scale>*

1. How likely would you be to recommend <ACOEM/Component> membership to a colleague?

*<insert a rating scale>*

1. How likely would you be to recommend <ACOEM/Component> membership to a medical student/resident?

*<insert a rating scale>*

1. What is your level of agreement / disagreement with each of these statements about <Component>?

*Responsive to the needs and interests of its members*

*I understand how to contact* <Component> *leaders* *regarding issues or concerns*

*I feel comfortable navigating the* <Component> *web site*

<Component> *is an up-to-date organization*

<Component> *is keeping pace with current technologies*

<Component> *offers enough programs, products and services related to my practice or interest area*

<Component> *membership is a good value for the price*

1. In the last 2 years, in what ways (if any) have you volunteered for the <ACOEM or Component>? Select all that apply.

*Served on the Board of Directors or Executive Committee*

*Served on a council, committee, or task force*

*Served as a Section leader*

*Spoke or presented a paper at the annual meeting, regional meeting, or other educational event*

*Wrote or reviewed a newsletter article*

*Reviewed a professional tool or resource for publication*

*Participated in a listserv, blog, or community of interest*

*Participated in an expert panel or report*

*Other:*

*None*

1. Would you be interested in volunteering with <COMPONENT> in any of the following areas?

*<list multiple choice options>*

 <include a question to collect the name and email of the individual>

1. Any final comments?

**Potential Questions for Exit Survey/Non-Renewals**

**Sample Drop (or Exit) Survey**

Dear Colleague:

We received notification from the ACOEM that you haven’t renewed your membership for the *(insert membership year)* membership year. Was there an error in the processing of your renewal? Have you inadvertently overlooked the renewal notices?

Since your <COMPONENT> is dependent upon your ACOEM membership, we hope that your non-renewal was just an oversight.

If you have decided not to continue your membership in *<ACOEM and COMPONENT>* please take a moment to complete this survey. YOUR RESPONSE IS VERY IMPORTANT to us. We will use the information to understand your needs, and review the programs and services we provide to our members.

Please reply by *(insert how they should reply—e.g. by faxing the survey to (fax number), using an enclosed postage-paid envelope or, emailing the survey)* as soon as possible. We look forward to hearing from you regarding this very important matter.

The Executive Committee of the *<COMPONENT>* thanks you in advance for your response.

Sincerely,

*Your Name*, *Title of (COMPONENT)*

*If you have submitted your dues in the past 20 days, please disregard this notice.*

1. How long were you a member of <Component>?
2. What offerings were not of benefit to you? Select all that apply.

*<list multiple choice options>*

1. What benefits were of most value to you? Select all that apply.

*<list multiple choice options>*

1. What were your reasons for ending your membership with <Component>? Select all that apply.

*<list multiple choice options or leave open ended>*

*Working in a different practice area*

*No longer in the field of OEM*

*Not working and at home with family*

*Retired*

*My employer no longer pays for my dues*

*Value of membership not sufficient for the price*

*Currently unemployed*

*Not enough time to use membership*

*Joined another organization(s) instead (specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Not enough emphasis on the following specialty area: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Component Member Survey Tips/Resources**

• Consider providing an incentive for members to complete the survey. Here are some ideas:

* free membership *(Note: if waiving membership dues, must be for component dues only or the component must cover the cost of the ACOEM dues. Sections and JOEM print edition cannot be offered for free)*
* free registration (component event, product or service)
* gift card
* Component branded swag (shirts, mugs, etc.)

Incentive question template to use:

1. Provide your name to be submitted into a drawing for a *<insert prize name>. Note: if deploying an anonymous survey, collecting the name for an incentive prize would invalidate this and must be disclosed to the respondent.*

• Consider using online surveys (i.e. Surveymonkey, Zoomerang, jotform, etc.)

• A 10-20% response rate is ideal for utilizing data

• Limit the time it would take to complete the survey to no more than 15 minutes.

• Allow no more than 2 weeks for members to complete the survey

• Send 1-2 reminders for member to respond

• Test the survey before finalizing it to ensure you will be receiving the desired feedback and the form works as intended.

• Be cognizant of the amount of surveys you ask members to conduct.

• Announce results of surveys when new projects or initiatives are based on your survey data. Members are always happy to hear their input was considered