

**Report of the 2002 Member Survey  
Society of Directors of Research in Medical Education  
(SDRME)  
North American Units**

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**Response to Survey**

The SDRME Executive Committee conducted a membership survey covering the period from January 1, 2001-December 31, 2002. The survey was posted on the Internet. Of the units in North America to whom the survey was made available, 37 (74%) responded.

**Purpose of Survey**

The purpose of this report is to present the results of the seventh bi-annual survey of SDRME members.

**Composition of Survey**

The survey was composed of seven sections:

- Organizational Structure
- Unit Activities
- Unit Funding Structure
- Unit Director and Personnel
- Scholarship
- Unit Professional Service Activities at National Level
- Educational Programs

The results will be presented separately for each section.

**Technical Notes:**

Percentages were calculated based on the number of units responding to a particular item, unless otherwise noted. Total percentages may not equal 100% due to rounding error or to the possibility of multiple answers within an item.

Currency: Monetary figures reported in Canadian dollars were converted to United States dollars for ease of comparison. The conversion rate used was: 1.00 Canada dollars = 0.65 United States dollars. (Per currency conversion posted at <http://www.xe.com/ucc/convert.cgi> Live mid-market rates as of 2003.01.21 14:53:11 GMT)

Salaries and full-time-equivalent (FTE): Salaries were calculated based on the projected salary for someone at 100% FTE. For example, if a staff member earned \$25,000 a year for working 50% time, we used \$50,000 (the FTE salary) as his/her salary.

**I. Organizational Structure of the Unit**

The first question asked for the name of the unit. The categories and the percentage of units in each of five categories are shown in Table 1.

**Table 1. Unit Name**

<u>Name</u>	<u>N</u>	<u>Percentage</u>
Center	2	6
Department	2	6
Division	5	14
Office	23	66
Other or Not Specified	3	9

By far, the most common unit title was Office (66%), followed by Division (14%). Center and Department are the titles for 6% of the respondents, respectively.

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The next item requested the title of the lead person in each unit. The most frequent titles listed and the percentage of respondents reporting each are shown in Table 2.

**Table 2. Title of Lead Person**

<u>Title</u>	<u>N</u>	<u>Percentage</u>
Director (at a Sub-Program level)	18	51
Associate or Vice Dean	9	26
Assistant Dean	4	11
Other	4	11

Director (51%) was the most common title. Thirteen respondents (37%) had the title of Assistant Dean or higher.

The next question asked for the titles of administrative subordinates in the unit. Twenty-eight respondents (76%) had at least one administrative subordinate within the office, 22 (59%) units had two, and 17 (46%) had three or more subordinates, for a total of 67 administrative subordinates across units.

The most frequently listed titles of administrative subordinates Coordinator (19, 68% of 28 units with administrative subordinates) and (Sub-Program) Director (9, 32%). The following titles were listed fewer than 9 times: Manager/Business Manager, Assistant Professor, Associate Professor, Professor, Assistant Director, Associate Director, Director + Professor, and Other Combinations.

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The last question in this section asked for the administrative title(s) of the individual to whom the lead person reports. Table 3 shows the results.

**Table 3. Administrative Title of Person to Whom Lead Person Reports**

<u>Title</u>	<u>N</u>	<u>Percentage</u>
Dean	8	23
Senior (or Executive) Associate Dean	8	23
Associate Dean	8	23
Vice Dean	3	9
Director (Executive, other)	1	3
Vice President (or equivalent)	4	11
Multiple titles (e.g., Sr. Assoc. Dean + Chair, or Assoc. Vice President + Assoc. Dean)	3	9

Unit heads most often reported to one of the Deans. Heads of 8 (23%) units report directly to the Dean, 8 (23%) to a Senior or Executive Associate Dean, 8 (23%) to an Associate Dean, and 3 (9%) to a Vice Dean.

In summary, 66% of the units are called Offices, 51% of the units have lead persons with the title of Director, and 78% of the unit directors report to a senior administrative officer with a title of Associate Dean or above.

## II. Educational Activities

This section listed 92 educational activities broken down into seven groups: research areas, service areas, evaluation areas, workshop audiences, consultation areas, teaching audiences, and teaching areas. Units were asked to indicate all activities in which they participate on a regular basis and to designate the activities they considered to be key roles they filled at their institutions. Table 4 shows the number and percentage of all respondents (N=37) who reported involvement in each activity.

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**Table 4. Activities in Which Unit is Involved**

#	<u>Activity</u>	<u>Participated</u>		<u>Key role</u>	
		<u>N</u>	<u>(%)</u>	<u>N</u>	<u>(%)</u>
<b>Research Areas</b>					
1	None	0	0	--	--
2	Student selection	16	44	5	14
3	Instructional design	26	70	11	10
4	Curriculum	35	95	18	49
5	Institutional research	19	51	8	22
6	Medical informatics	11	30	3	8
7	Patient simulations	19	51	5	14
8	Faculty careers	14	38	3	8
9	Chronic diseases	3	8	1	3
10	Disease prevention	2	5	0	0
11	Patient education	4	11	0	0
12	Clinical decision making	7	19	2	5
13	Student assessment approaches	31	84	23	62
14	Computer-based education applications	25	68	11	30
15	Assessment of competencies	32	87	21	57
16	Health economics	4	11	1	3
17	Standardized patients	24	65	10	27
18	Continuing education	12	33	1	3
19	Other	6	16	4	11

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#	<u>Activity</u>	<u>Participated</u>		<u>Key role</u>	
		<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>
	<b>Service Areas</b>				
20	None	1	3	0	0
21	Computer classroom/lab administration	11	30	4	11
22	Data analysis/statistics/data base	30	81	18	49
23	Computer support	10	28	5	14
24	Committees/task forces	35	95	25	68
25	Test scoring	26	70	14	38
26	Test administration	19	51	7	19
27	Performance based assessment	28	76	13	35
28	Media production	6	17	1	3
29	Printing/copying/duplication	8	21	2	5
30	Medical illustrations	1	3	0	0
31	Photography	0	0	0	0
32	Graphics production	5	14	0	0
33	Minority student recruitment	6	16	3	8
34	Curriculum planning/administration	33	90	22	60
35	Academic development and support	27	73	14	38
36	Administration of OSCEs	22	60	11	30
37	Standardized patient program administration	19	52	11	30
38	Other	6	17	5	14

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<u>#</u>	<u>Activity</u>	<u>Participated</u>		<u>Key role</u>	
<b>Evaluation Areas</b>		<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>
39	None	0	0	--	--
40	Faculty	28	76	17	46
41	Students	29	78	18	49
42	Program	34	92	21	57
43	Curriculum	34	92	25	68
44	Other	1	3	0	0
<b>Workshop Audiences</b>		<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>
45	None	1	3	0	0
46	On-campus faculty	35	95	21	57
47	Community faculty/preceptors	27	73	9	24
48	Students	17	46	10	27
49	Administration	16	44	1	3
50	Off-campus audiences	18	49	4	11
51	Other	3	8	1	3
<b>Consultation Areas</b>		<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>
52	None	0	0	--	--
53	Research design	30	82	15	41
54	Curriculum design	32	87	22	60
55	Data analysis/statistics	28	76	17	46
56	Instructional design/strategies	31	84	17	46
57	Testing & measurement	32	86	16	43
58	Computer-based education	23	62	9	24
59	Evaluation	36	98	25	68
60	Peer reviews (manuscripts, papers, grants, etc.)	25	68	3	8

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<u>#</u>	<u>Activity</u>	<u>Participated</u>		<u>Key role</u>	
<b>Consultation Areas (continued)</b>		<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>
61	Academic planning	19	51	6	16
62	Grant development and administration	24	65	11	30
63	Institutional retreats	16	44	5	14
64	Other	3	8	1	3
<b>Teaching Audience</b>		<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>
65	None	1	3	0	0
66	Undergraduate college students	7	19	0	0
67	Medical students	28	76	11	30
68	Medical residents	24	65	4	11
69	Medical fellows	20	54	3	8
70	Graduate students	12	33	4	11
71	Non-medical health professions students	9	24	0	0
72	Clinical faculty	31	84	14	38
73	Preceptors	23	63	8	22
74	Other	9	25	4	11
<b>Teaching Areas</b>		<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>
75	None	6	16	3	8
76	Medical humanities	13	35	2	5
77	Statistics	11	29	2	5
78	Computer applications	29	79	18	49
79	Educational methods	5	14	1	3
80	Basic sciences	13	35	6	16
81	Clinical education	6	16	0	0
82	Clinical decision making	2	5	0	0



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<b>Teaching Areas (continued)</b>		<b><u>N</u></b>	<b><u>%</u></b>	<b><u>N</u></b>	<b><u>%</u></b>
83	Health economics/policy	22	59	6	16
84	Research skills	1	3	0	0
85	Disease prevention	5	14	1	3
86	Patient education	6	16	2	5
87	Enrichment programs	19	51	12	32
88	Academic skills	34	92	21	57
89	Faculty development	7	19	1	3
90	International medical education	20	54	8	22
91	Test taking/preparation	3	8	1	3
92	Other	1	3	0	0

The top 10 most frequently checked items were:

- Evaluation consultation (98%)
- Workshops for on-campus faculty (95%)
- Service on committees and task forces (95%)
- Curriculum research (95%)
- Program evaluations (92%)
- Teaching academic skills (92%)
- Curriculum evaluations (92%)
- Curriculum planning/administration (90%)
- Research on assessment of competencies (87%)
- Curriculum design consultation (87%)

The activities considered key roles by over two-thirds of the respondents were:

- Curriculum evaluation (68%)
- Evaluation consultations (68%)
- Service on committees and task forces (68%)

These key roles, plus eight other key activities listed by at least 50% of the units, are shown in Table 5.

**Table 5. Activity Summary Table:  
Most Frequently Selected “Key” Unit Activities**  
(sorted by percentage who said it was a key activity)

<u>Activity</u>	<u>Participated (%)</u>	<u>Key role (%)</u>
<b>Most frequently chosen “key” activities:</b>		
Curriculum evaluation	92	68
Evaluation consultations	98	68
Service on committees and task forces	95	68
<b>7 additional key activities, listed by at least 50% of respondents:</b>		
Research on student assessment approaches	84	62
Curriculum planning/administration services	90	60
Consultations on curriculum design	87	60
Workshops for on-campus faculty	95	57
Program evaluation	92	57
Teaching academic skills	92	57
Research on assessment of competencies	87	57

In sum, the most frequent activities reported by units involve **curriculum activities** (design, planning/administration, and evaluation), **evaluation activities** (curriculum and program evaluation and consultation on other evaluations), **committee service**, **research** (student assessment and assessment of competencies), and **teaching** (academic skills and workshops for faculty).

### III. Funding for Fiscal Year 2000-01

The first part of this section asked about funding mechanisms for the units. Of the 32 units that provided budget information, 26 (81%) begin their fiscal year in July. September (2 units, 6%) is the next most common month. At the time of the survey, the most recent fiscal year had begun in 2001 for 25 (78%) units, in 2000 for 4 units (13%), and in another year for 3 (9%) units. The unit lead person controlled the budget in 16 (50%) units. The budget was controlled by the person to whom the lead reports for 14 units (44%).

The second part of the section asked for the total budget for fiscal 2000-2001 and sources of unit support. Table 6 shows the total budget and the percentages of unit support that came from four different sources. (Budgets reported in Canadian dollars were converted to US dollars before being analyzed. See technical notes on page 2 for details.)

**Table 6. Sources of Support**

	<b>N</b>	<b>Min</b>	<b>25%</b>	<b>50%</b>	<b>75%</b>	<b>Max</b>	<b>Mean</b>	<b>SD</b>
<b>Total Budget *</b>	32	0	226	<b>508</b>	1,148	3,020	<b>789</b>	751
<b>Sources (%):</b>								
<i>'Hard' University funds</i>	32	26	61	<b>82</b>	98	100	<b>77</b>	21
<i>Grants &amp; Contracts</i>	25	0	3	<b>10</b>	22	55	<b>15</b>	16
<i>Grants &amp; Contracts awarded to other depts.</i>	23	0	2	<b>5</b>	10	32	<b>9</b>	10
<i>Recharge/Charge back</i>	20	0	0	<b>1</b>	11	40	<b>7</b>	11

\* U.S. dollars x 1000.

The median percentage of support from 'hard' university funds was 82%.

Three fourths of the units are actively engaged in securing external support for their activities. While the level of unit activities supported by external funds varies greatly, the median amount accounted for was 16% of unit finances. This compares to 25% in 1998 and 15% in 2000. The median operating budget of units from all sources of funding is approximately \$508,000 (US).

#### IV. Personnel

The personnel section begins with a profile of the unit director and then profiles unit faculty and professional and scientific staff. Table 7 shows the distribution of directors' characteristics including highest degree, administrative title, faculty title, and tenure status.

**Table 7. Directors' Characteristics**

<b><u>Highest Degree</u></b>	<b><u>N</u></b>	<b><u>Percentage</u></b>
Ph.D.	24	69
Ed.D.	6	17
M.D.	3	9
M.A./M.S.	2	6
<b><u>Administrative Title</u></b>	<b><u>N</u></b>	<b><u>Percentage</u></b>
Director	19	54
Vice Dean	2	6
Associate Dean	10	29
Assistant Dean	5	11
<b><u>Faculty Title</u></b>	<b><u>N</u></b>	<b><u>Percentage</u></b>
Professor	14	40
Associate Professor	11	31
Assistant Professor	6	17
Instructor	1	3
Does not apply	3	9
<b><u>Tenure</u></b>	<b><u>N</u></b>	<b><u>Percentage</u></b>
Yes	16	46
No	19	54

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Sixty-nine percent of the directors had a Ph.D., and 17% had an Ed.D. The most frequent administrative title was Director (54%), and the most frequent faculty title was Professor (40%). Forty-six percent of the directors had tenure.

Table 8 shows the distribution of directors' longevity in medical education, in their institution, and as director of their unit, and the distribution of directors' ages.

**Table 8. Directors' Experience and Age**

<b><u>Number of Years:</u></b>	<b><u>N</u></b>	<b><u>Min</u></b>	<b><u>25%</u></b>	<b><u>50%</u></b>	<b><u>75%</u></b>	<b><u>Max</u></b>	<b><u>Mean</u></b>	<b><u>SD</u></b>
In Medical Education	35	6	14	<b>23</b>	26	32	<b>21</b>	8
In Institution	35	2	6	<b>12</b>	22	30	<b>14</b>	9
As Director	35	1	5	<b>6</b>	11	29	<b>9</b>	6
Age	35	31	48	<b>53</b>	57	68	<b>52</b>	8

The typical director has spent approximately 23 years in medical education, 12 of which were in his/her present institution. He/she has been director for about 6 to 9 years and is about 53 years old.

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The next part of the personnel section asked about the professional and support staff in the unit. The median size of a unit was 4 core professional and 4 support staff members, as shown in Table 9.

**Table 9. Number of Unit Professional and Support Staff**

<b><u>Staff</u></b>	<b><u>N (units)</u></b>	<b><u>Min</u></b>	<b><u>25%</u></b>	<b><u>50%</u></b>	<b><u>75%</u></b>	<b><u>Max</u></b>	<b><u>Mean</u></b>	<b><u>SD</u></b>
Core Professional Staff	34	0	2	4	6	17	5	5
Support Staff	34	0	1	4	7	27	5	6

Additional information was provided for 184 faculty/staff. Data on their highest degree, academic rank (if any), and tenure status are provided in Table 10.

**Table 10. Characteristics of Professional Staff**

<b><u>Highest Degree (N=171)</u></b>	<b><u>N</u></b>	<b><u>Percentage</u></b>
PhD or EdD	89	52
MD or MD/MEd	8	5
M.A./M.S. (or equivalent)	35	21
Bachelor's (or less)	39	23
<b><u>Faculty Title (N=81)</u></b>		
Professor	19	23
Associate Professor	21	26
Assistant Professor	28	35
Instructor/Other	13	16
<b><u>Tenure (N=178)</u></b>		
Yes	33	19
No	145	81

\*Percentage based on the N provided for each category.

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Fifty-two percent of the faculty/professional staff had a Ph.D. or Ed.D. The most frequent faculty title was Assistant Professor (35%). Nineteen percent had tenure.

Table 11 shows the distribution of faculty and professional staff members' years of medical education experience, annual salary (presented as 100% FTE), percent full-time equivalent (FTE), and age.

**Table 11. Experience, Salary, and Ages of Professional Staff**

#	Years:	<u>N</u>	<u>Min</u>	<u>25%</u>	<u>50%</u>	<u>75%</u>	<u>Max</u>	<u>Mean</u>	<u>SD</u>
	In Medical Education	183	0	3	<b>8</b>	18	44	<b>11</b>	10
	Salary* (100% FTE)	168	15	39	<b>54</b>	74	200	<b>58</b>	27
	% FTE	171	10	100	<b>100</b>	100	100	<b>93</b>	20
	Age	162	24	37	<b>48</b>	55	81	<b>47</b>	11

\*In U.S. dollars x 1000; rounded

Note: Salaries are reported in 100% FTE, regardless of the percent time worked

The typical faculty or professional staff member has spent approximately 8 years in medical education, earns a salary of about \$54,000 (US), and works 100% FTE. He/she is about 48 years old.

The remainder of this section examines staff members' salary by various characteristics. Please note the following:

- Salaries are always presented as 100% FTE, regardless of actual % FTE worked, to make them comparable.
- Salaries reported in Canadian dollars were converted to US dollars before being analyzed. (See technical notes on page 2 for details.)
- Salary data were provided for 91% of the professional staff, so N's in the salary tables are smaller than those in the tables above.

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Table 12 shows the distribution of salaries for the 77 (46% of those for whom we have salary data) staff members with an academic rank/title.

**Table 12. Unit Professional Staff: Salary\* by Faculty/Professional and Scientific Rank**

<u>Position</u>	<u>N</u>	<u>Min</u>	<u>25%</u>	<u>50%</u>	<u>75%</u>	<u>Max</u>	<u>Mean</u>	<u>SD</u>
Professor	17	44	78	<b>86</b>	108	200	<b>93</b>	34
Assoc Prof	21	59	67	<b>75</b>	90	113	<b>79</b>	16
Asst Prof	27	35	54	<b>64</b>	74	82	<b>63</b>	12
Other	12	15	55	<b>75</b>	89	135	<b>73</b>	29

\*In U.S. dollars x 1000; rounded

Note: Salaries are reported in 100% FTE, regardless of the percent time worked

Note: This table only includes those with an academic title.

As one would anticipate, salaries were higher for faculty with higher academic rank. There was an \$11,000 (US) differential between the salaries of assistant and associate professors and between the salaries of associate professors and full professors.

Table 13 shows the distribution of salaries for unit staff by tenure status.

**Table 13. Unit Professional Staff: Salary\* by Tenure Status**

<u>Tenure</u>	<u>N</u>	<u>Min</u>	<u>25%</u>	<u>50%</u>	<u>75%</u>	<u>Max</u>	<u>Mean</u>	<u>SD</u>
<b>Yes</b>	32	15	62	<b>78</b>	96	200	<b>81</b>	33
<b>No</b>	130	15	38	<b>51</b>	67	135	<b>54</b>	22

\*In U.S. dollars x 1000; rounded

Note: Salaries are reported in 100% FTE, regardless of the percent time worked

The median salary of tenured unit faculty and staff was \$27,000 (US) higher than that of non-tenured unit staff.



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Table 14 shows the distribution of salaries for unit faculty and staff divided according to their highest academic degree earned.

**Table 14. Unit Professional Staff: Salary\* by Highest Degree**

<u>Degree</u>	<u>N</u>	<u>Min</u>	<u>25%</u>	<u>50%</u>	<u>75%</u>	<u>Max</u>	<u>Mean</u>	<u>SD</u>
PhD or EdD similar	86	15	55	<b>70</b>	82	200	<b>71</b>	25
MD or MD/PhD	6	74	78	<b>101</b>	131	135	<b>103</b>	26
MA, MS, MSW, MBA	27	15	39	<b>48</b>	53	65	<b>46</b>	11
BA, BS, RN	30	19	34	<b>38</b>	48	65	<b>41</b>	11

\*In U.S. dollars x 1000; rounded

Note: Salaries are reported in 100% FTE, regardless of the percent time worked

In general, salary increased with the level of the degree. In terms of median salaries, individuals with a master's degree earned \$10,000 more than those with a bachelor's degree. Faculty/staff with a Ph.D./Ed.D. earned about \$22,000 more than those with a master's degree. Those with an M.D. or MD/PhD earned about \$31,000 more than those with a Ph.D./Ed.D.

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Table 15 shows the distribution of staff salaries by years of experience in medical education.

**Table 15. Unit Professional Staff Salary\*  
by Years of Medical Education Experience**

<b><u>Years in Medical Education</u></b>	<b><u>N</u></b>	<b><u>Min</u></b>	<b><u>25%</u></b>	<b><u>50%</u></b>	<b><u>75%</u></b>	<b><u>Max</u></b>	<b><u>Mean</u></b>	<b><u>SD</u></b>
<b>0-5</b>	72	15	33	<b>41</b>	55	90	<b>45</b>	16
<b>6-10</b>	30	36	46	<b>62</b>	73	105	<b>60</b>	16
<b>11-15</b>	17	27	43	<b>54</b>	78	200	<b>69</b>	43
<b>16-20</b>	18	19	35	<b>62</b>	84	112	<b>62</b>	27
<b>&gt;20</b>	30	15	65	<b>82</b>	99	141	<b>82</b>	27

\*In U.S. dollars x 1000; rounded; Salaries are reported in 100% FTE, regardless of percent time worked

If the anomalous individual earning \$200,000 per year is removed, the mean salary for those with 11-15 years of experience is \$61,000, intermediate between the means for the categories above and below. These data suggest that compared to those with less than 6 years experience, salaries rose by approximately \$15,000 for those with 6-20 years experience, averaging between \$60-62,000 in that experience range. Salaries then rose abruptly by \$20,000 for those with 20 years or more experience. Thus longevity in medical education had little effect on salaries except for those with 5 or fewer years experience and those with more than 20 years experience. That 15 year span between 6-20 years is a long time without a raise.

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Table 16 (a-d) gives a breakdown by years of medical education similar to Table 15 (above), but after breaking out staff by the highest degree they had earned. [Note that the number of groups into which “years in medical education” is divided varies somewhat across degree groupings. This was done to present the data in the clearest manner for each degree group (i.e., due to missing data, small n’s, etc.)]

**Table 16. Unit Professional Staff Salary\*  
by Highest Degree and Years of Medical Education Experience**

**16a. Only Personnel with PhD's or EdD's (or equivalent)**

<b>Years in Medical Education</b>	<b><u>N</u></b>	<b><u>Min</u></b>	<b><u>25%</u></b>	<b><u>50%</u></b>	<b><u>75%</u></b>	<b><u>Max</u></b>	<b><u>Mean</u></b>	<b><u>SD</u></b>
<b>0-5</b>	28	25	44	<b>54</b>	60	90	<b>54</b>	15
<b>6-10</b>	18	44	62	<b>65</b>	75	105	<b>68</b>	13
<b>11-15</b>	7	64	68	<b>78</b>	85	200	<b>92</b>	48
<b>16-20</b>	11	55	67	<b>77</b>	94	112	<b>80</b>	18
<b>&gt;20</b>	22	15	73	<b>84</b>	99	141	<b>85</b>	24

\*In U.S. dollars x 1000; rounded

Note: Salaries are reported in 100% FTE, regardless of the percent time worked

Compared to those with 0 to 5 years of experience in medical education, the median salaries among staff with from 6-10 years experience was \$11,000 higher. The median salary of those with over twenty years' experience was about \$7,000 higher than those in the next lower category of experience.

**16b. Only Personnel with MDs or MD/PhDs (or equivalent)**

<b>Years in Medical Education</b>	<b><u>N</u></b>	<b><u>Min</u></b>	<b><u>25%</u></b>	<b><u>50%</u></b>	<b><u>75%</u></b>	<b><u>Max</u></b>	<b><u>Mean</u></b>	<b><u>SD</u></b>
<b>&lt;=15</b>	3	74	74	<b>89</b>	135	135	<b>99</b>	32
<b>&gt;15</b>	3	79	79	<b>113</b>	130	130	<b>107</b>	26

\*In U.S. dollars x 1000; rounded

Note: Salaries are reported in 100% FTE, regardless of the percent time worked

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Personnel with MD degrees made about \$24,000 more per year if they had more than 15 years of experience in medical education than if they had 15 years experience or less.

**16c. Only Personnel with Master's Degrees (or equivalent)**

<b>Years in Medical Education</b>	<b><u>N</u></b>	<b><u>Min</u></b>	<b><u>25%</u></b>	<b><u>50%</u></b>	<b><u>75%</u></b>	<b><u>Max</u></b>	<b><u>Mean</u></b>	<b><u>SD</u></b>
<b>0-5</b>	14	15	36	<b>42</b>	54	65	<b>45</b>	14
<b>6-10</b>	7	39	40	<b>46</b>	52	54	<b>46</b>	6
<b>&gt;10</b>	6	31	43	<b>51</b>	56	60	<b>49</b>	10

\*In U.S. dollars x 1000; rounded

Note: Salaries are reported in 100% FTE, regardless of the percent time worked

Among those with master's degrees, salary was about \$4,000 to \$5,000 higher with each five years of additional medical education experience.

**16d. Only Personnel with Bachelor's Degree (or equivalent, or less)**

<b>Years in Medical Education</b>	<b><u>N</u></b>	<b><u>Min</u></b>	<b><u>25%</u></b>	<b><u>50%</u></b>	<b><u>75%</u></b>	<b><u>Max</u></b>	<b><u>Mean</u></b>	<b><u>SD</u></b>
<b>0-5</b>	17	20	33	<b>38</b>	43	63	<b>39</b>	10
<b>6-10</b>	4	36	37	<b>39</b>	59	65	<b>45</b>	14
<b>&gt;10</b>	8	19	29	<b>43</b>	53	65	<b>42</b>	15

\*In U.S. dollars x 1000; rounded; Salaries are reported in 100% FTE, regardless of percent time worked

Those with bachelor's degrees had little change in median salary until they had worked for more than 10 years, at which time their median salary increased \$4,000. The mean salaries showed a different pattern, but are probably more unstable than the medians due to the small sample sizes. In general, staff with bachelor's degrees (or less education) made about \$4,000 to \$8,000 less than those with master's degrees who had similar levels of experience.

**[Information still to be completed for sections V and VI]**

## **VII. Degree Granting Programs**

The final section asked for a description of the degree granting programs offered by units, as well as courses that contribute toward degrees, certificates, etc. Eleven units offered programs leading to a certificate (N=8), master's degree (N=9), MD/PhD (N=1), or other degree (N=1), often in conjunction with another department or school. Four programs offered courses that could be applied toward a certificate (N=2) or degree (Masters N=2, MD/PhD N=4, Other N=1).

## **Conclusions**

These data provide many insights into the infra-structure of the offices of Medical Education in North America. The documentation of productivity indices such as extra mural funding secured and number of publications have proven to be useful information for the Society as it promotes the cause of its members. The information on the activities in which our units engage will be useful information in communicating with institutions who are considering establishing a unit. The salary data have been important for helping establish reasonable salary levels for newly created units and helping members argue for salaries in line with what unit personnel deserve.