

AMGA Employee Satisfaction and Engagement Survey Protocol

The AMGA Employee Satisfaction and Engagement Survey enables employees to anonymously rate their satisfaction with supervision, pay, workload, physician interactions, growth opportunities, and other key issues within their medical group. In addition, the survey measures how engaged the employees are – the degree of their motivation and commitment to the organization.

Creation of the survey began with a thorough review of the research and professional literatures on measures of job satisfaction, with a goal of identifying commonly assessed job satisfaction dimensions. The resulting list of possible concepts to be included in the survey was presented to an advisory committee comprised of representatives of roughly a dozen AMGA members. Over the course of a series of meetings, AMGA and the advisory committee worked to elaborate on, refine, and define these job satisfaction facets. Once the final set of target dimensions was created, items reflecting them were written and assembled into a survey. A two week web-based pilot study of the draft survey of roughly 100 items was conducted, with six medical groups (and more than 5000 employees) participating. The data resulting from this pilot study was then used in a series of psychometric analyses to identify the structure and properties of the survey. The final version of the core survey includes approximately 60 items, with a few other items used to measure important demographics and other areas of interest. The survey takes roughly 10 to 15 minutes to complete.

While individual employees are surveyed, the medical group's final report only includes analyses at the overall group, job category, supervisor and site levels. In addition, supervisors, sites or job categories with fewer than three respondents will not receive their own report, to help preserve employee confidentiality.¹ Although an employee ID number is used in the survey process, this is done only so that the survey can be matched with the employee's profile information (see "Submit Employee Profile Data to AMGA", below). AMGA assures all participants that each person's survey responses will be kept confidential: AMGA will not release individual responses back to the medical group.

Survey Objectives:

1. Assess employee satisfaction with the medical group.
2. Assess employee engagement with the medical group.
3. Benchmark each group's results against the national AMGA database.
4. Identify system problems that may adversely affect the organization's ability to recruit and retain high quality employees.
5. Help guide quality improvement efforts by targeting particular areas of need at a group, site, or supervisor level.

Reporting Cycles

The following table outlines the scheduled report cycles for 2019:

¹ Surveys not included in site, supervisor or job category analyses (because of too few respondents at that particular level) will be included in any other level of analysis for which there are sufficient respondents (e.g., at the overall clinic level).

Survey Process	Spring 2019	Fall 2019
Register to participate, send in employee/site/supervisor rosters (contact Mark Miller for more information)	March 15	Aug 26
Send Pre-Notification letter to employees	April 8	Sept 16
Survey opens to employees	April 15	Sept 23
Last day for employees to complete surveys	April 29	Oct 7
AMGA will send report	May 29	Nov 5

Getting Started

Before data collection begins, you will need to complete a few preliminary steps:

1. Decide which employees you plan to survey

The survey is only for non-provider employees. Physicians, physician assistants, psychologists, physical therapists, nurse practitioners and other care providers should be surveyed using AMGA's Provider Satisfaction Survey. Your group should include RN's, LPN's, medical assistants and other medical office clinical staff in the employee survey, under the job category "medical office clinical."

If you are unsure if a particular position should be in the provider survey or the employee survey, the dividing line between the two is as follows: If the position has the employee determining the regimen of care then they should be in the provider survey. If the position does not involve the determination of the regimen of care then they should be included in the employee survey.

It is not necessary to survey all employees at once. You may wish to survey just a subset of employees.

- Survey all employees, or a sample of them? You can elect to survey only a subset of your employees. For example, survey a subset of job categories; a particular clinic site or set of sites; a sample of organizational departments; or other groupings depending on your survey goals.

2. Select employee ID codes

The surveys will be coded with the employee's ID number, so we can match the survey with the employee's profile information (see #3 below).

- Each employee must have a unique ID number. No duplicate ID codes are allowed.
- The employee profiles database is set up so that only one ID code is allowed for a given employee.
- The ID code must be numeric (no letters) and no more than six digits long.
- If possible, use ID codes that are already used in your group, rather than develop new ones.
- The employee ID codes should remain the same from survey period to survey period.

3. Submit employee profile data to AMGA

AMGA needs background information on each employee, primarily to match surveys with the proper job category norms and benchmarks and to align each employee with the appropriate medical group site and supervisor. Information required includes the name of each employee; a confidential ID code for each employee (as indicated above); and an email address for each employee. You will also need to at least provide information on your medical group's sites/locations and supervisors/managers. There are two options for providing this latter information for your employees:

Option 1 – The preferred approach is to list on a single spreadsheet (in addition to the employee's name, ID code, and email address) the employee's supervisor, work site, management level, and job category (using the coding scheme below). For example, if you chose this approach and you had a computer analyst named John Doe, then on the spreadsheet you would list the required information about John (his name, his ID number, and his email address), as well as his supervisor's name, his work site, management level and his job category of "Information Technology". You would repeat this process for all other employees.

Option 2 – If it is not possible or impractical to provide the information in Option 1 on a per employee basis, another method is to provide on separate spreadsheets lists of all of your employees, supervisors, and sites. If you choose this option, then in building the web survey AMGA will use the supervisor and site lists you provide to create a set of items in which the employee completing the survey will be asked to identify their supervisor, work site, management level and job category.

Depending on your medical group's employee database system, the tradeoff may or may not be more labor-intensive. However, using Option 1, you can be assured that in the survey analyses each person will be assigned to the proper supervisor, site, management level and job category groupings, which may not necessarily occur if you rely on your employees to identify each of these.

- **IMPORTANT:** If your medical group is participating in the Employee Satisfaction and Engagement Survey for the first time, please contact Mark Miller at (703) 838-0033 x363 or mmiller@amga.org prior to preparing your employee profiles information. He will send you the standard Excel profiles template for recording the profiles information. If your group has previously participated in the survey, you will need to send in an updated set of profiles. To do this, we will send you your choice of either a blank Excel profiles template (which you can then use to create a completely new set of profiles), OR the old profiles that you created for your last survey (which you can then go through and modify as needed by adding new employees, deleting departed employees, and making any other necessary revisions). We will happily work with you using whichever approach is easiest for you but starting with your old profiles will help ensure continuity over time.
- Please try to validate the employee email addresses before you include them in the profiles. These email addresses will be used by AMGA to send all of the scheduled notices to the employees (with the exception of the pre-notification memo, which each participating group will be responsible for disseminating). The notices include links to the survey website and so are the means by which your employees can access and complete the survey. If the email addresses are incorrect, then your employees will not receive these messages in a timely manner and will experience delays in being able to complete the survey. Even if your group has previously participated in the survey and a set of email addresses has been successfully used in the past, do not assume they will work again in the next survey...some of the addresses may have changed.

□ Submit the final profiles spreadsheet to AMGA via email (mmiller@amga.org).

□ A sample of each sheet in the profiles workbook is listed below:

Employees Profile Sheet – include one row for each employee who will be surveyed. The first three data elements are REQUIRED for all employees.

Employee's Name (first and last).	Employee ID Number	Employee Email Address
<p>Only include non-provider employees. You may include employees such as LPN's, RN's, medical assistants, or others that you would consider medical "back office" employees that do not determine the regimen of care. Do NOT include employees such as physician assistants, psychologists or physical therapists that would more appropriately be included in AMGA's provider satisfaction survey. We can accept First Name Last Name or Last Name, First Name.</p>	<p>Each employee must have a unique ID number. No duplicate ID codes are allowed.</p> <p>AMGA's employee profiles database is set up so that only one ID code is allowed for a given employee.</p> <p>The ID code must be six digits or less (no letters).</p> <p>If possible, use ID codes that are already used at your clinic, rather than develop new ones.</p>	<p>The employee's email address. Each employee must have a unique email address: No duplicate email addresses are allowed.</p> <p>The email address may either be a business-related or a personal email address, though business email addresses are preferable.</p>

The following data elements are only to be provided on the Employees Profile Sheet if you choose Option 1 above (complete listing for each employee of their work site, supervisor, and job category).

Manager/Supervisor's Name (first and last)	Site Name	Management Level	Job Category
<p>List for each employee the name of his/her supervisor. It does not matter if the supervisor is a "manager" or "executive"...whoever is responsible for directly supervising the employee's work assignments and scheduling and reviews the success of the employee's work should be listed as the supervisor.</p> <p>Be sure to keep all names consistent. So John Q Smith is consistently listed as John Q Smith, not John Q Smith for one employee entry, John Smith for another entry, and then J Q Smith for a third entry.</p> <p>If you have two supervisors with the same name, indicate the department that they supervise or the location at which they supervise in parentheses next to their</p>	<p>List the names of the sites/locations for each employee. Be sure to keep all names for a site consistent. Example: Main St is consistently listed Main St, not 123 Main St for one employee entry and then Main Street in another employee entry. We prefer that you keep the names relatively brief, but use whatever is necessary to make the names meaningful to those who will be receiving your final reports.</p> <p>Remember to include all sites, including those sites that may not be locations where healthcare is provided. For example, an administrative site that only handles billing and accounting functions should also be listed.</p> <p>If an employee works at multiple locations, then either list their "primary" work site (the one at which they spend most of their time) or list the employee as</p>	<p>Enter one of the four options based on the employee's level within the organization.</p> <p>The four job level options are:</p> <p>Executive/Senior Management (a corporate officer or the head of a major department that reports to the CEO)</p> <p>Middle Managers (the head of a division/group within a major department, and has supervisors beneath her/him)</p> <p>Supervisors (a manager that oversees only non-management staff)</p> <p>Non-managers</p>	<p>List the AMGA job category that best describes the employee's responsibilities within their department. Use the category that best fits the employee's specific duties or functions. For example, an admin assistant in the IT department would be listed as "administrative support/clerical". The job categories are:</p> <p>Administrative Support/Clerical Call Center Staff Clinical Office Management Coding/Compliance/Billing Dietary/Food Services Engineering/Facilities/Housekeeping/Materials Executive/Senior Management Finance/Accounting Human Resources Information Technology Laboratory/Technologists Legal Marketing/Communications Medical Office Admitting, Reception and Registration Medical Office Clinical (e.g., LPN's, RN's, medical</p>

names.	“works at multiple sites.”		assistants) Research/Scientists “Other”
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Groups that elect to NOT list each employee’s supervisor, site, and job category on the employee profiles spreadsheet (those deciding to use Option 2 above) MUST provide separate lists of all of the medical group’s supervisors and sites on the corresponding spreadsheets.

Supervisor Names Profile Sheet – include each supervisor on a separate row

Manager/Supervisor's Name (first and last).
<p>List the names of all the supervisors/managers within your organization. Include all personnel that have supervisor/managerial responsibilities for the individuals listed on the employee spreadsheet. It does not matter if the supervisor is not a “manager” or “executive”. If the person has direct responsibility over one or more employees regarding work assignments/schedules and evaluating work success, then they should be included in the list.</p> <p>If a supervisor has supervisory responsibilities at multiple locations and in your final report you wish to see separate results for this supervisor for each location, please list on SEPARATE LINES the different supervisor name and site name combinations (e.g., John Doe - Main Building; John Doe - 123 1st Street; John Doe - Hospital). In constructing the supervisor survey item on the web survey, we will list each of these supervisor-site combinations so that the affected employees will be able to choose the most applicable option.</p> <p>If you have two supervisors with the same name, indicate the department that they supervise or the location at which they supervise in parentheses next to their names. We will then list each supervisor name and department (or location) combination in the supervisor survey item. Keep in mind that the goal is to make it easy for the employees to identify the correct supervisor.</p>

Site Names Profile Sheet – include each location on a separate row

Site Name
<p>List the names of all the sites/locations within your organization. Please use labels that will be meaningful to your employees, as what you list will be what is put into the site name survey item. The site name would preferably be relatively brief, but it can be as long as you need it to be to ensure that it is universally understood by your employees and those reviewing the final reports that you will receive.</p> <p>Remember to include all sites, including those sites that may not be locations where healthcare is provided. For example, an administrative site that only handles billing and accounting functions should also be listed. Also, for employees who are part of “float pools” or who otherwise work at multiple sites, AMGA will always include a “Float pool and/or works at multiple locations” option in the site pull-down menu.</p>

4. Optional – submit custom question wording

For an additional fee, your group can include up to five custom questions of your own creation. The fee is \$150 per question. For instance, if you currently use an in-house employee satisfaction survey and would like to carry over questions from that survey to this one, you can choose five of your in-house items and add them to AMGA’s survey.

- There is a limit of five extra questions.
- Custom questions should have Likert scale responses (such as Very Dissatisfied to Very Satisfied or Strongly Disagree to Strongly Agree), or simple categorical responses (e.g., Yes/No), but open-ended questions are acceptable.

- Please send an email or a Word document with the exact phrasing of the custom questions when you send in your profiles workbook.

5. Complete Survey Registration Form

Have the group's human resources director, medical director, quality director, or another person who can answer the questions complete the Survey Registration Form at the end of this protocol and either email it to Mark Miller (mmiller@amga.org) or fax it to him at (703) 548-1890. This form officially registers you for the survey. It also collects basic information about your group that AMGA will need as part of the overall survey process. This step can actually be completed at any time. In fact, the earlier you submit the registration form, the sooner AMGA can begin preparing for your survey. But, the form should be sent to AMGA no later than the registration deadline.

6. Prepare your cover letters

One week before the survey begins each employee will be sent a "pre-notification memo" advising them of the upcoming survey, describing why the medical group is participating, assuring them of complete confidentiality, and urging the employee to complete the survey. Then during the two week survey period there will be a series of up to three communications sent to the employee: an initial memo announcing the survey is available and then as many as two reminder notices that will be sent to non-respondents. The first reminder notice goes out one week after the survey opens and the second notice goes out with three business days left in the survey period.

Examples of each of these notices are included in this protocol. A sample pre-notification memo is provided on page 9. **The pre-notification memo is distributed by the medical group, rather than AMGA.** Samples of the notices that AMGA will send to the employees via email once the survey opens are provided on pages 10 and 11. Feel free to customize each of these notices to fit your organization. The pre-notification memo should be personalized with the employee's name. Your group will also need to include in each of the notices the name, phone number and/or email address for an individual who will serve as the internal contact point for the survey (preferably a manager or executive with your medical group – the CEO, HR director, medical director, or someone else of comparable rank). The notices sent via email by AMGA will be addressed so that they appear to be coming from whichever individual(s) your group designates or, if you prefer, they can be addressed with the name of AMGA's survey administrator. Personalizing the letters and sending them out under the "signature" of the CEO or some other executive helps reiterate the importance of the survey and demonstrates that it is something your organization takes seriously.

The email notices that AMGA sends out will include person-specific links that will take the employee directly to the survey website. The messages should not be forwarded to other employees, as this can lead to completed surveys being misidentified and cause later errors in survey analyses.

Rather than use or modify AMGA's suggested email content, you can of course come up with something completely your own if that is your preference. If you opt to write your own notices, remember that they should briefly describe the survey, explain why you are participating, and remind the employees that AMGA will keep their responses completely confidential. Whether you use AMGA's suggested language or design your own content, please email the final notices to mmiller@amga.org by the registration deadline for the survey period.

7. Contact your Information Technology department

We recommend that you contact your Information Technology department and explain the survey process to them. In particular, you will want to describe the series of timed email messages that will be going out to your employees. There have been instances in which AMGA has worked with medical groups with such powerful spam filters in place that AMGA’s emails ended up getting blocked. You should explore with your IT department whether this is a possibility for your medical group. Our current practice is to ask each IT department to “whitelist” the outbound mail servers and IP addresses from which the notices will be sent (thereby indicating to your email system that any emails coming from that address are acceptable and should be allowed through). Before the survey begins, we also send test emails to at least two individuals that your group designates, to see if the messages get through. If not, this is a sign that further work is necessary. The point is, even with strong spam filter systems, we can come up with workarounds by coordinating with your IT department. But we want to deal with any potential issues proactively, prior to the beginning of surveying.

Survey Administration Process

Week	Step	Spring	Fall
	Registration deadline	March 15	Aug 26
Week One	Pre-notification letter/email	April 8	Sept 16
Week Two	Initial survey invitation sent	April 15	Sept 23
Week Three	First reminder notice sent	April 22	Sept 30
	Final reminder notice sent	April 25	Oct 3
	Last day of surveying	April 29	Oct 7
Week Six	AMGA sends report	May 29	Nov 5

Week One – Send each employee a pre-notification letter or email, letting them know to expect a survey.

- Sample pre-notification letter is included on page 9.
- Describe the survey, indicate why your group is participating, state that individual responses will remain confidential, and urge them to participate.

Week Two – Survey begins.

- Each employee is sent a survey invitation. They will be sent via email and will include a person-specific link to the survey website. See page 10 for an example of a survey cover letter.
- Survey invitations will preferably be addressed as if they were coming from one or more senior executives with your group, but can also be addressed as if they were coming from AMGA. The latter approach may be required if testing prior to the opening of the survey suggests that addressing the notices as if they are coming from someone inside your organization causes your spam filters to treat the emails as if they are phishing efforts or some other kind of spam.

Week Three – Send out first and second reminder notices.

- One week after the survey begins, the first reminder notice will be sent by AMGA. The notice will go via email to all employees who have yet to complete a survey. Page 10 has an example of this notice.
- The final reminder notice is to go out three business days prior to the end of the survey. As before, AMGA will send out this reminder to all non-respondents. An example of this letter is provided on page 11.
- Once an employee submits a completed survey, a notice will appear on the individual's computer screen thanking them for completing the survey. See page 11 for a sample thank you notice.
- We encourage you to obtain a minimum 40% response rate but a rate of 60% or higher will give you a more reliable representation of your group.

The Final Report

The final report that each participating medical group will receive will include analyses at the overall clinic, site, supervisor and job category levels. Analyses will focus on the 10 dimensions (employee engagement, supervision, growth opportunities, leaves, health benefits, pay, physician interactions, rewarding work, and workload) that underpin the bulk of the survey. At the overall clinic level of analysis, average dimension scores and percentile rankings for the group will be presented. The average dimension scores will be graphically displayed for both the current and (if applicable) most recent previous survey for the group. In addition, the current and previous dimension scores will be broken down by several major demographic categories (e.g., employee gender, age, management level, years employed). In all of these displays, dimension norms and best practice (95th percentile) benchmarks are also presented, as calculated from the entire survey database. Raw response percentages for each survey item will also be shown, along with the AMGA norm for the item. Finally, the overall clinic analysis will include calculations of response rates.

Analyses at the site, supervisor and job category levels will be similar to those presented at the overall clinic level.² Average scores for each of the 10 dimensions are displayed, for both the current and most recent previous survey, along with the AMGA norms and best practice benchmarks. Raw response percentages and norms are also provided for each individual survey item. In the case of the job category analyses, where the survey database has at least 30 surveys for a job category, the norms and benchmarks that are listed are calculated using employees from the same job category. So, for example, the results for information technology would be shown with norms and benchmarks derived solely from the surveys of participants from the same job category.

The report also includes a “Targeting Improvement Map”, which is basically a visual summary of the results for the 10 survey dimensions as determined at the overall clinic level. The map is intended to give a quick visual overview of the dimensions on which the medical group is doing well, as well as give a clear indication of which dimensions are urgently in need of quality improvement efforts.

Please note: Each participating medical group is invoiced for the costs of the survey after the final report is mailed. The AMGA base fee member rate is half the non-member rate. To qualify, an organization must be a member in good standing with AMGA at the time the report is distributed.

If you have any questions, please contact Mark Miller at (703) 838-0033 ext. 363 or

² As was mentioned previously, in an effort to protect the confidentiality of survey respondents analyses are only provided for those sites, supervisors, and job categories with at least 3 respondents.

SAMPLE PRE-NOTIFICATION LETTER OR EMAIL

(Date)

Name

Address

City, State Zip

Dear (Name),

(Medical Group) is participating in an Employee Satisfaction and Engagement Survey conducted by AMGA. Next (day and date), you will receive a survey invitation that will direct you to the online survey. The online survey will ask you a series of questions about your satisfaction with your supervision, compensation, work load, and other issues important to your work life.

Your responses will remain confidential. (Medical Group) will NOT receive your individual responses. AMGA will only report the aggregate results back to us. This survey is being distributed by the AMGA, and your responses will not be used for any other purposes.

Your feedback will help us improve employee satisfaction and engagement at (Medical Group). If you have any questions, please feel free to contact (name – email/phone). Thank you in advance for your cooperation.

Sincerely,

(Name)

(Title)

COPY TO ACCOMPANY THE EMPLOYEE SATISFACTION AND ENGAGEMENT SURVEY LINKS EMAILED TO EMPLOYEES

- Please edit the Email *Subject* and *Body* as you prefer. This is only suggested language. Return your edited version to Mark Miller (mmiller@amga.org).

SURVEY EMAIL	Email From:	Email Subject:	Email Body:
<p>Initial Survey Emailing</p>	<p>Please indicate who you would like the emails to appear to be coming from.</p> <p>AMGA sends the notices out, but we “sign” them so they look like they are coming from your CEO, HR director, or some other person with whom your employees will be familiar.</p>	<p>Re: Link to AMGA Employee Satisfaction and Engagement Survey</p>	<p>Dear (Employee Name),</p> <p>(Medical Group) is participating in an Employee Satisfaction and Engagement Survey conducted by AMGA. The survey is designed to allow you to freely and confidentially rate your satisfaction with various aspects of your work life – compensation, supervision, work load, and others. By taking the time to complete this important survey, you will help to improve employee satisfaction and engagement at (Medical Group).</p> <p>Click on the link below to access the survey. Please note, (Medical Group) will only receive a summary report and will not have access to individual responses. This survey is being distributed by the AMGA, and the data collected will not be used for any other purpose.</p> <p>LINK to go HERE</p> <p><i>*Please do not forward this link to another employee as it is intended for your use only.</i></p> <p>If you have any questions, please feel free to contact (name – email/phone). Thank you in advance for taking the time to complete this important survey.</p> <p>Sincerely,</p> <p>(Name) (Title)</p>
<p>First Reminder (Goes out one week after survey opens)</p>	<p>Please indicate who you would like the emails to appear to be coming from.</p>	<p>Re: One week left to complete your Employee Satisfaction and Engagement Survey.</p>	<p>Dear (Employee Name),</p> <p>There is still time for you to participate in the Employee Satisfaction and Engagement Survey and rate your satisfaction with areas such as compensation, supervision, work load, and other important issues related to your work life. Your feedback is critical to the success of the study and will help (Medical Group) improve employee satisfaction and engagement.</p> <p>Click on the link below to access the survey. Please note, (Medical Group) will only receive a summary report and will not have access to individual responses. This survey is being distributed by AMGA, and the data collected will not be used for any other purpose.</p> <p>The last day to submit a completed survey is (date survey closes).</p> <p>LINK to go HERE</p> <p><i>*Please do not forward this link to another employee as it is intended for your use only.</i></p>

			<p>If you have any questions, please feel free to contact (name – email/phone). Thank you in advance for taking the time to complete this important survey.</p> <p>Sincerely,</p> <p>(Name) (Title)</p>
<p>Second Reminder (Goes out on the Thursday before the survey closes)</p>	<p>Please indicate who you would like the emails to appear to be coming from</p>	<p>Re: Employee Satisfaction and Engagement Survey Deadline is (date).</p>	<p>Dear (Employee Name),</p> <p>The last day to participate in the Employee Satisfaction and Engagement Survey is (date survey closes). This is your opportunity to rate your satisfaction with your supervision, compensation, work load, and other important issues related to your work life. Your feedback is critical to the success of the study and will help (Medical Group) improve employee satisfaction and engagement.</p> <p>Please note, (Medical Group) will only receive a summary report and will not have access to individual responses. This survey is being distributed by AMGA, and the data collected will not be used for any other purpose.</p> <p>LINK to go HERE</p> <p><u>*Please do not forward this link to another employee as it is intended for your use only.</u></p> <p>If you have any questions, please feel free to contact (name – email/phone). Thank you in advance for taking the time to complete this important survey.</p> <p>Sincerely,</p> <p>(Name) (Title)</p>
<p>Thank you notice</p>			<p>Thank you for completing the Employee Satisfaction and Engagement Survey. These results will be important in helping us to improve employee satisfaction and engagement, and creating a more healthful and productive environment for everyone at (Medical Group).</p> <p>Sincerely,</p> <p>(Name) (Title)</p>

AMGA Survey Registration Form

This form is to be used for registering your medical group or clinic for AMGA's Provider Satisfaction Survey or Employee Satisfaction and Engagement Survey. Please complete the form and email it to the attention of Mark Miller (mmiller@amga.org), or fax it to him at (703) 548-1890. Thank you for participating in our surveys!

Medical Group/Clinic: _____

Mailing address of group/clinic: _____

Name of person completing form: _____

Title of person completing form: _____

Phone number: _____ Email: _____

Today's date: _____

Check the survey(s) for which your group/clinic is registering:

____ Provider Satisfaction Survey (Select one: ____ Paper based survey ____ AMGA's web-based survey)
____ Employee Satisfaction and Engagement Survey (web-based only)

Indicate the survey period(s) for which your group/clinic is registering (e.g., "Winter 2019 Provider Satisfaction Survey"): _____

1. Which of the following best describes the type of practice that characterizes your group/clinic: ____ Multispecialty ____ Single specialty ____ Primary care
 ____ Integrated Health System ____ IPA
2. Ownership of group/clinic: ____ Physicians
____ Hospital
____ All others (insurance/MCO, university/med school, etc.)
3. Number of FTE providers at group/clinic: _____ Physicians
_____ All others (e.g., psychologists, dieticians)
4. Total number of FTE employees at group/clinic (including administration, employees, support staff, and others): _____