TAC Membership Survey - 2019

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Trauma Association of Canada
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2019 TAC Membership Survey

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1. OVERVIEW

A web-based TAC Membership survey was sent out in October 2019 to the emails of all registered TAC members (n=261), along with several subsequent reminders. To our knowledge, there had not been a recent survey of our members. The survey contained questions on member satisfaction/engagement; preferences for TAC activities; and preferences for the TAC Annual Scientific Meeting and Conference, as well as write-in boxes to provide more details or suggestions for improvement.

We received responses from 101 individuals (**39%** of our membership). ***Thank-you!*** For surveys (*particularly of busy people*) this is a particularly good response rate that will provide meaningful information on what TAC should focus on, so we can better meet your needs!

2. WHO RESPONDED? WHO MAKES UP TAC MEMBERSHIP?

The survey was done "anonymously" to encourage members to be open with their concerns, but did include several questions to assess whether those that responded represented the full spectrum of our diverse multidisciplinary membership, and if possible, to try better tailor to the needs of our diverse membership. These questions were at the end of the long survey which might account for some of the results. For example, we found in response to –

"What best describes your current role?"

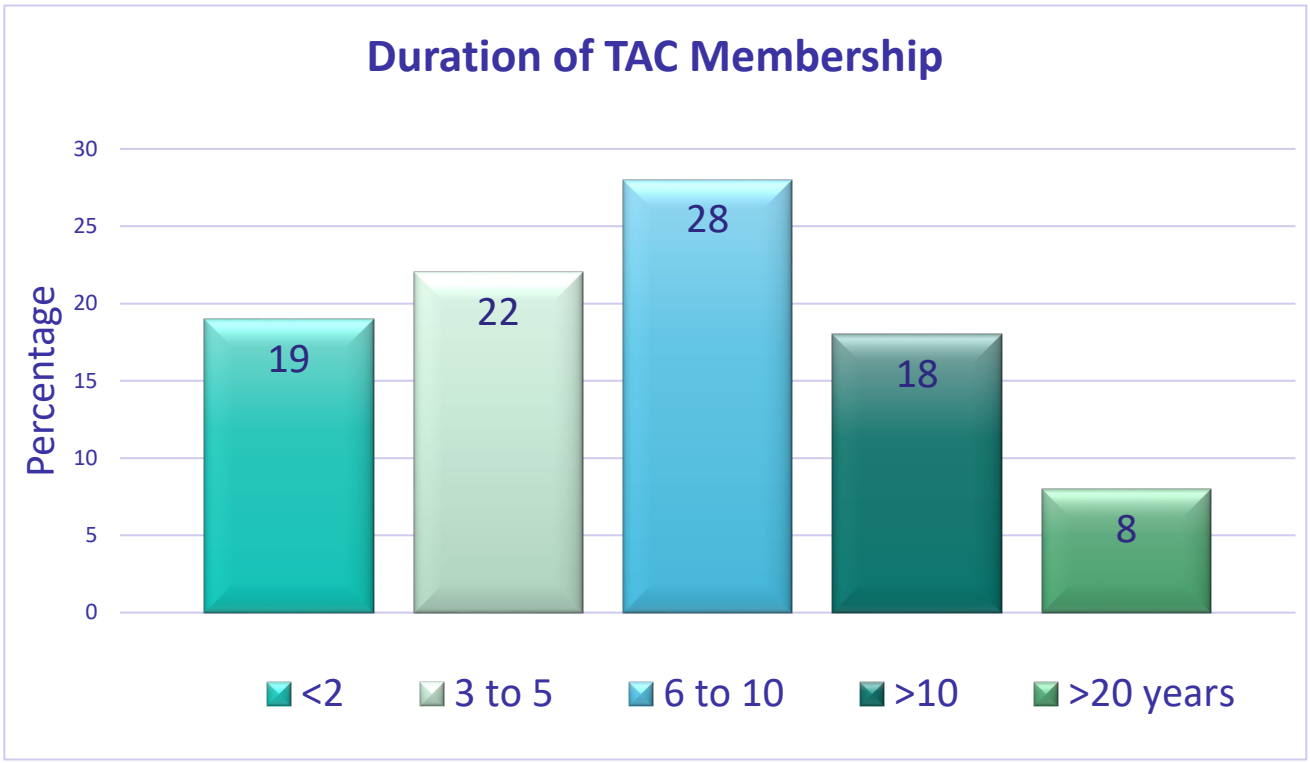
(check all that may apply)

- **5%** identified as **Rural**, and only **27%** as **Urban (68%?)**
- **36%** were affiliated with a **University**, and only **50%** with a **Trauma Centre**
- **9%** identified as **"Frontline Provider"** and only **12%** as **Content Experts**

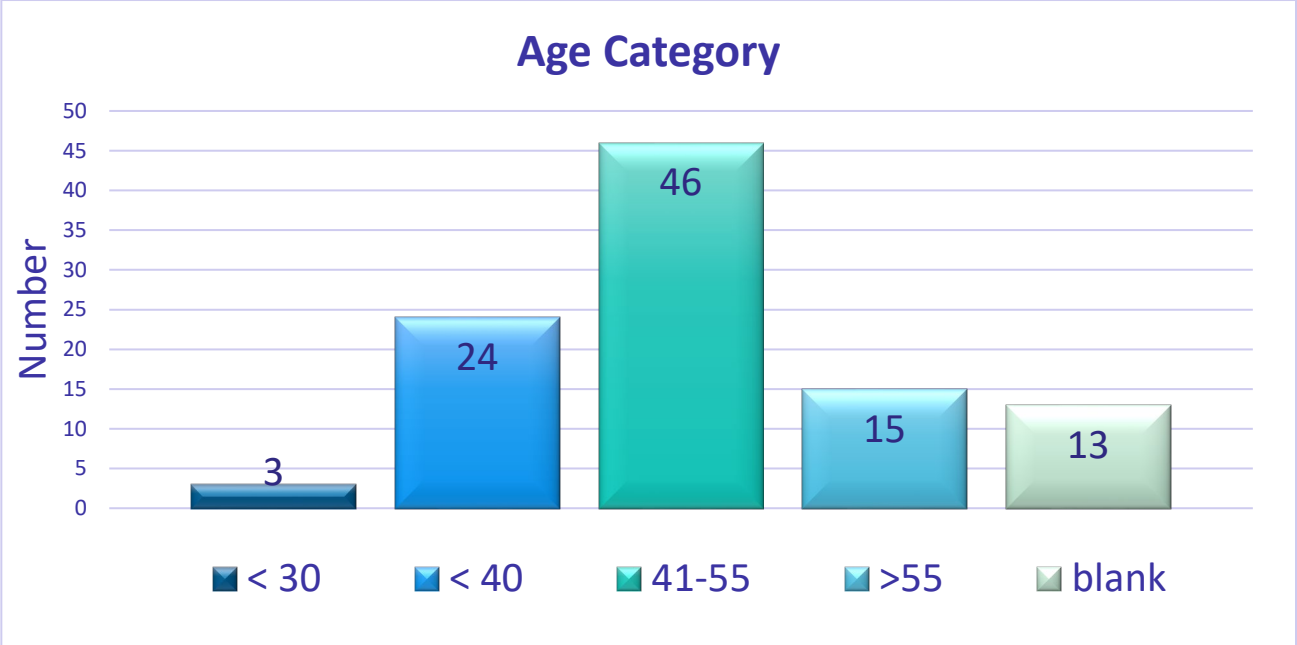
- **None** were Physician Assistants, **1%** Students, **2%** Residents - Paramedics - Clinical Nurse Specialists - Nurse Practitioners, **3%** Fellows, **7%** Data-Information Analysts, **13%** Registered Nurses, **44%** Physicians
- **None** did Rehabilitation, **1%** Government/Regulatory Bodies or Industry, **4%** Public Health, **7%** Military, **9%** Prehospital, **13%** Emergency Department, and **21%** Critical Care
- **10%** do Advocacy, **12%** Injury Prevention, **19%** Research, and **24%** Administration

The above did confirm that the respondents covered most of the breadth of our multidisciplinary association.

Of note, those that responded also covered the spectrum from new members to experienced, as illustrated below:



In response to “what age category do you belong to?” (as shown below) we got more answers than expected, with only 13 blanks:



3. WHAT DID THE SURVEY REVEAL?

The results are grouped by the 3 major themes of the survey: **TAC Identity** (reasons for joining/perceived importance of different TAC functions or roles); **TAC Membership Satisfaction and Engagement** (with suggestions for improvement); and **TAC Annual Meeting Preferences.**

3a) TAC IDENTITY (Reasons for joining, importance of TAC roles)

“The following are reasons why members may choose to belong to TAC. Please indicate the factors that are important to you in deciding if you will maintain your membership annually? Check all that apply.

1 = not important at all, 5=extremely important

As illustrated in the Table below, of the 10 potential reasons listed for being a TAC member, 7 were given a median score of 4 ("very important"), with the remaining 3 having a median score of 3, 2, and 1 ("not important at all").

REASONS FOR BEING A TAC MEMBER	
"Very Important" **4**	• Access to resources, benchmarking data, and best practices • Affiliation with a recognized interdisciplinary professional specialty trauma association • Attendance at the Annual Scientific Meeting and Conference • Education and professional development opportunities • Networking/connecting with peers and colleagues across the country • Opportunity to submit and present a research abstract at the annual meeting • To keep abreast of what is happening in the trauma care community
"Important" 3	• To give back to the trauma community
"Somewhat important" **2**	• Looks good on my CV/resume
"Not important at all" **1**	• My employer pays for my membership

"For each Role, please indicate (1-5) how important you feel it is: 1- not important at all, 5=extremely important

As illustrated in the Table below, almost all respondents identified all 9 roles as important – with the Median Score being 5 ("extremely important") for 3 of the roles, and the Median Score being 4 ("very important") for the remainder.

"Extremely Important"	• Keep members abreast of the leading edge of trauma care • Keep members up to date on trends, issues, changes, and challenges in trauma care • Provide national leadership in the area of trauma standard development
"Very Important"	• Advocacy role to reduce incidence of injury (advocating to gov't, Accreditation Canada, other stakeholders) • Engage in partnership and collaboration with other organizations to enhance the value it offers its members • Foster opportunities for members to engage with TAC no matter where you live in Canada or globally • Leverage technology to enhance the membership experience • Provide education and professional development • Provide opportunities for members to connect with one another and share info, knowledge, and resources

3b) MEMBERSHIP SATISFACTION & ENGAGEMENT (with suggestions for improvement)

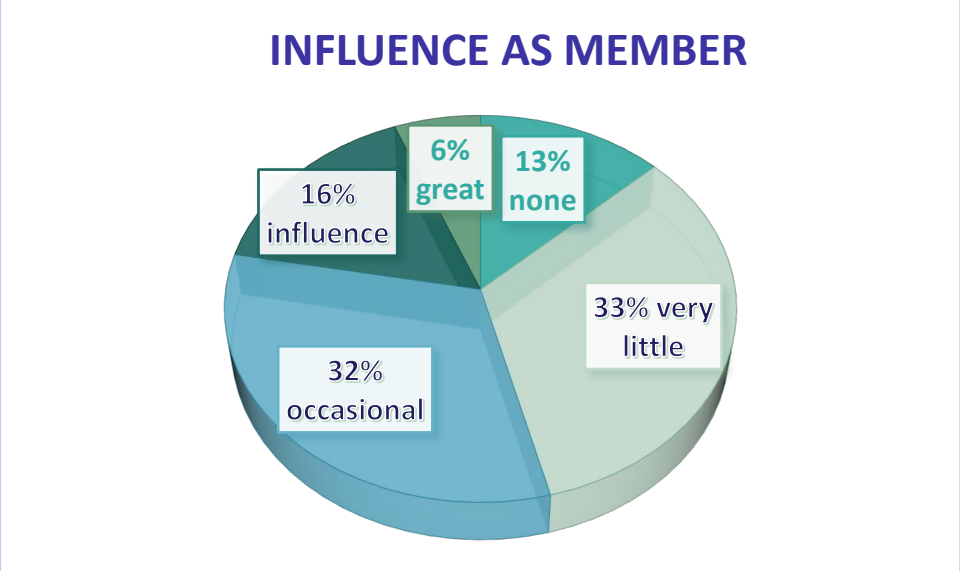
Overall, **90%** of respondents **are satisfied** with their TAC Membership, **with 45%** of respondents being **very or extremely satisfied**.

When asked:

How much influence do you feel you have as a member on TAC's directions and priorities?"

1= no influence 2= very little influence 3= occasional influence 4= I am able to influence 5= a great deal of influence

As illustrated below, **22%** of respondents feel they are able to **influence or have a great deal of influence** on TAC's directions and policies; with **32%** feeling they have **occasional** influence, **33%** feeling they have **very little influence**, and **13%** feeling they have **no influence**.



When asked:

How effective do you feel TAC communicates with you as a Member?"

1=not effective at all 2=minimally effective 3= effective 4= very effective 5= the best!

61% of respondents thought communication was **effective or better**, with **36%** considering the level of communications **minimally effective**.

When asked:

"How can TAC communicate with you better?"

… we got the following responses clustered by theme:

Satisfied with current:

Communication so far is effective; All good!; You do well;
There isn't a great deal to communicate presently, and what there is comes out well.

Wanting increased frequency of emails and newsletters:

***Quarterly** updates (maybe newsletter) to highlight the work of TAC?; Quarterly email could help; Quarterly newsletter with information on new, ongoing, or published research projects; a quarterly newsletter?*

***Regular** emails, newsletter, etc. Maybe there is one, but I have never received it.*
Electronic newsletters, updates via email; More frequent emails; More emails/updates; Would be nice to hear updates on what organization is doing beyond the annual meeting periodically

***After every board** meeting and annual meeting to keep us updated and call for participation in subgroups. We have no idea what is going on*

Monthly *newsletter highlighting recent advances in trauma care in Canada, recent changes or challenges in trauma care and educational opportunities; Through monthly/quarterly newsletters, social media presence.*

Re. Mode of Communication:

Many like email – "*Email is best. Website notices second choice"; "Email is fine"; "By email"*

Many like newsletters – "*Communication by newsletter is fine"*

Several asked for more Social Media presence including Twitter, and keeping Website updated/sending emails when new info is added to website; and for communication to be *"more interactive with social media create better relationships longitudinally and not just at the conference." "Digest of events, something educational (see POEMs by CMA)".*

And, regarding the Website:

"Improve the website"; "Improve the website. It still seems clunky and takes forever to load. Need a public page for committees and their work. TAC could do a LOT more with the website."

"More information on the TAC website about trauma activities, conferences at other parts of the world"

"I think updating the website would enhance the overall depth and satisfaction rate for members and nonmembers"

COMMENT:

The above clearly indicates TAC must improve communication – both quality and quantity. While some members may have issues with Firewalls blocking some content, the Survey reveals the need for more frequent and informative communications and interactions.

"What is the most important thing that TAC could do to improve your level of satisfaction with the Association?"

The responses to the above included the following:

- *Keep up the good work; continue current activities*
- *Be relevant, represent everyone, be interested in our opinions (board needs to listen and not just tell); Better communication with members; more information sent out from TAC throughout the year; Email quarterly to just let us know what is going on with the Association; Monthly communication; More regular engagement; More communication – monthly?*
- *Create online forum for members to communicate with the BOD*
- *More interprofessional options/topics; integration of all members within the main conference regardless of their specialty; more smaller interactive sessions.*
- *Regular offerings of online education/updates; Have additional education sessions throughout the year via WebEx; More information on website about trauma care and trauma care systems. Standards for trauma care systems, tracking, etc. Up to date Information and educational material available; Frequent communications with trauma related topics/reviews/evidence - with a clinical focus; Increase its leadership in terms of guidelines production and educational activities; Increase formal education opportunities*
- *Develop a learning portfolio / educational standards (IE ATLS q3-4 years, BEST course, TRIK course, etc. - recommending them for our colleagues) - and a portion of the website dedicated to accessing relevant resources / courses (essentially a one-stop shop for finding these courses in Canada)*
- *Offering more for membership, grand round quarterly? better way to connect between each other, stronger advocacy toward governing body, taking a role in national data registry and quality improvement*
- *Update the website constantly with research topics and papers, list of members and contacts, discussion groups, education opportunities, management, or systems insights, etc... the website should be a resource and a connection throughout the year.*
- *Provide national leadership to drive trauma care and trauma prevention; More leadership nationally to direct standards of trauma care; More recommendations and position statements; Become the standard for management of trauma patients through education and research*
- *More active role in advocacy & prevention; Advocacy for trauma system standards and quality of care across the country; Take on and resolve bigger national issues; have a greater voice and presence in Canadian society at large; more social media presence and more advocacy;*

- *Increase advocacy for, and recognition of our Canadian trauma centres so that they can maintain funding and status that allows exemplary care. In the Canadian system, there is a tendency for trauma patients to simply trickle through the system unless very strong advocacy for them and for the programs themselves is maintained. TAC could be a bigger help in that regard.*
- *Reclaim and lead the Accreditation of Trauma Systems; Get accreditation sorted out*
- *Leverage the expertise of our members in the subgroups to move forward as an organization. Untapped resource!*
- *Make it possible to attend the conference remotely*

"What, if any new services or programs would you like TAC to offer that you believe would be beneficial to you?"

Below are some of the suggestions of Survey respondents (each listed is from a different member):

Services/Programs:

- *Accreditation*
- *A National Trauma Registry*
- *A National CPG group*
- *Military Collaboration*
- *Research network recognized by funding agencies, quality improvement initiative such as collaboratives.*
- *Rural Trauma Programs*
- *TAC visiting professor program across Canada*

Educational Opportunities:

- *Fellowships perhaps? Observerships or shadow weeks with leaders*
- *Mentorship program to partner new trauma staff with experienced trauma staff in the same area of work (ex. new injury prevention lead with experienced injury prevention lead)*
- *Between annual meeting webinars or learning opportunities*
- *More education and webinars*
- *Trauma education that is led by nurses, Endorsing and providing disaster courses*

- *Information available for new Trauma Coordinators/ Trauma Program managers about running trauma programs. Simulation activities/ information*
- *Update emails with new or emerging trends and guidelines in Trauma care.*
- *Opportunities to participate on Committees*

Other:

- *Change the date of the meeting - no one wants to travel in Canada in March*
- *Quarterly summaries of research; Monthly newsletter or communication.*
- *A monthly update from TAC with trauma updates from across Canada. What are other sites doing in relation to trauma care, and outcomes. Updates on great things other trauma centres are doing. Things like Trauma Distinction for Alberta.*
- *Discussions with policy makers; better advocacy efforts*

3c) ANNUAL MEETING PREFERENCES

This section of the Survey examined what TAC members think about various aspects of our Annual Scientific Meeting and Conference. The results will be shared with members of the Annual Meeting Planning Committee to assist them in meeting our members expectations. As our Association grows and changes, further surveys will be required to ensure that TAC continues to meet changing expectations and needs.

Thinking about the Annual Scientific Meeting and Conference – please rate how important each of the following is to you:

1- not important at all, 2-somewhat, 3-important, 4-very, 5-one of the most important things

Of the 6 items listed, "***The opportunity to network with others***" had a median score of 5 – i.e., was considered one of the most important things.

"***The lectures/seminars on new developments or important topics***", "***The opportunity to hear about research being done across the country***", and "***The opportunity to present my work (e.g. research, quality, education)***" all had a median score of 4 – i.e., members thought was very important.

"**The opportunity to take courses that are offered pre or post conference**" and "**To acquire CME, CHL or CEU credits for learning**" both had a median score of 3 – i.e., members thought was important.

While the majority of members rated as important the above 6 items, it is notable that "**acquiring CME, CHL, or CEU**" was not important at all for 22% of respondents, and the "**opportunity to take courses pre/post conference"** was not important to 8% of respondents.

"At the Annual Scientific Meeting and Conference I would like to see: 1- none, 2-less, 3-same, 4-bit more, 5-a lot more"

None of the 8 types of presentations had a median of <3. As illustrated in the Table below, the survey revealed that 3 types of presentations had median scores = 3 (attendees wanting the same), and 5 types of presentations had median scores of 4 (attendees wanting a bit more).

"The Same"	"Bit More"
• Research Orals • Research Funding Competitions • Trauma Survivor Stories/Cases	• Debates • Invited Speaker Talks • Panel Presentations • Rapid Fire Sessions • Simulation Demo or Competitions

The majority of respondents ***wanted to see more*** of Rapid-Fire Sessions (69%), Invited Speaker Talks (67%), Panel Presentations and Debates (64%), and Simulation Demonstrations or Competitions (52%).

The types of presentations which had the highest % of respondents ***requesting less***, were Trauma Survivor/Cases (27%), and Research Funding Competitions (22%).

In response to,

"Thinking of the Annual Scientific Meeting and Conference, is there anything else you would like to see? Additional types of presentations? Topics?"

Most respondents had no comments, but some offered up the following suggestions:

- *More trauma nursing related presenters*
- *More Injury Prevention*
- *Clinical teaching, e.g. updates in sedation in trauma, etc…*
- *More cutting edge/rigorous science/education for physicians*
- *More about new technology, products, techniques, etc. need for the recovery of the trauma patient after the initial workup in ER*
- *More Emergency Medicine*
- *More interprofessional speakers and topics; More allied health care presenters...EMS etc.*
- *Big picture topics – e.g., how to build a sim program or organize mass casualties or optimize pain protocols – so we can learn from others across the country without reinventing the wheel*
- *More interactive sessions – e.g. "Ask the Doctor"/"WebMD" type interactive session for non-clinical members to ask questions to physicians (questions could be sent in in advance, or not)*
- *Interactive sessions discussing the direction of trauma care in Canada and the unique challenges of Canadian trauma care (political, social, geographical, volume).*
- *Difficult case panel*
- *Videos of scenarios*
- *Data has been a main topic for many years at the annual conference, however there is a stark absence of TRISC from the data streams. It would be beneficial to invite the registry experts to the table to discuss issues and potentials with trauma data from those who understand it best*
- *Better streaming for analysts*

- *More international presentations and networking; Invited speakers from outside North America.*
- *Networking*
- *Networking around specific interest groups (not necessarily official TAC interest groups) over lunch or breakfast e.g. injury prevention by region or specific theme*

- *Have TAC committees present formally (15 mins) on their key activities and issues in a standalone session, so membership is aware of what's happening, opportunities to participate*
- *Discussion groups of national initiatives: research, accreditation*
- *More time for small groups to meet (e.g. Pediatrics) and others to get together, e.g. to hash out a research project or idea between to hospitals geographically spaced.*
- *Advocacy for better trauma care in Canada*

- *More nursing research*
- *More interdisciplinary research presentations*
- *Multicenter research; Presentations of works in progress of a multi-centre nature - essentially, a sales pitch for participation as an enrolling site in an upcoming trial. One way to facilitate this may be to invite EAST Multi-Centre Trials leaders to attend TAC as part of their sales pitch alongside the Canadian Acute Care Surgery (CANUCS) trials group.*
- *Discussions on research priorities*

- *Ability to remotely attend the conference*
- *Opportunities to meet via videoconference (or something similar) for the pre-conference meeting like TRISC or ITNC.*

"Regarding topics at the Annual Scientific Meeting and Conference, what areas do you think we should focus on?

I would like to see: 1- none, 2-less, 3-same, 4-bit more, 5-a lot more

Despite TAC's diverse multidisciplinary membership, **none of the 16 topics** listed had a median score <3. The Table below lists those topics with a median score of 3 (the same), and those with a median score of 4 (bit more).

"The Same"	"Bit More"
• Committee meetings • Data analysis • Military • Patient stories/cases • Pediatrics • Rehabilitation • Research	• Clinical management • Education • Injury Prevention • Outcomes • Prehospital • Quality Improvement • Surgical topics • Trauma standards • Trauma systems

Based on the respondents, those topics that had the highest % **wanting more**, were: Trauma Standards (82%), Trauma Systems (79%), Quality Improvement (76%), Clinical Management & Outcomes (74%), and Education (72%).

The topics that had the highest % of respondents **wanting less**, were: Military (32%), Patient stories/cases (30%), Committee Meetings (28%), and Rehabilitation (23%).

"How could the Annual Scientific Meeting and Conference be improved?"

Although most made no suggestions, some put forth the following ideas (grouped by theme):

- *It would be nice if the physicians participated in the "nursing" session*
- *More interprofessional topics; more multidisciplinary based talks including nursing and allied health or co-presentations; Multi-disciplinary panel discussions (with members from each subspecialty within TAC) addressing key questions; Include a broader range of topics related to trauma and bring in more nursing, rehab, PT/OT presenters*
- *open discussions debates about issues that matter to trauma centre*
- *More actual trauma education*
- *More EMS emphasis but it is generally excellent*
- *More highlights on innovation/pushing care forward; More presentations of high-profile studies*
- *Have invited speaker(s) from other regions of the world*

- *3 days? To fit in more collaborative time as well as education, etc.*
- *More networking opportunities; "themed" lunch and breakfast sessions (where included) so that members can "naturally" congregate to network*
- *More opportunities for working groups to be able to meet to make progress. The TRISC group does have a fantastic pre-conference day, however there are more opportunities to leverage on this group's expertise. There is a need for national standards in data collection.*
- *More multi-disciplinary collaborative working groups would be welcome, with clear deliverables from those groups. For example, deciding on a national benchmarking tool, quality improvement initiatives and a national trauma registry.*

- *Avoid Halifax in March... weather and access not the greatest...*
- *Rotate the meeting to all provinces, rather than just the "major cities."*
- *Time the meeting with other conferences (CAGS, CAEP or other) to boost attendance*
- *More affordable and topics that matter to the people delivering care across the system; lower cost; less expensive.*
- *Stream the conference for those that are unable to attend in person*

ANNUAL MEETING SOCIAL ACTIVITIES

In response to "**How satisfied are you with the current organized social activities held at the Annual Meeting and Conference?**", all 94 respondents were satisfied – with 39% being very to completely satisfied.

Suggestions for social activities that you would like to participate in at the Annual Meeting and Conference?

While many had no suggestions, others put forth several interesting and diverse options for the local planning committees to consider:

- *A way to mix groups up so that they meet others outside of their "home group"*
- *One event only inclusive to all*

- *Have more than one big social event, as I would like to be able to meet more people from across Canada*
- *I think it is best to keep it simple because attendees what time to connect with their colleagues and network in their own way*
- *It is always nice to see or do something local to the area*
- *Social activities that are free - people can buy their own food and drinks, but it is helpful to have an organized location for people to gather at, without having to organize that ourselves*
- *Group socials off the conference site*
- *Informal, in a pub, craft beer*
- *With soft music so we would be able to chat with our colleagues from TAC*
- *Groups outings to do an activity*
- *Historical/walking tours*
- *5 or 10km run in the am*
- *Physical social events - team building exercises*
- *Team networking activities (e.g. jeopardy, amazing race type activities)*
- *Themed breakfast / lunch (every session themed networking available)*
- *Put the meeting back at the ski hills!!*

4. CONCLUDING SURVEY COMMENTS

Finally, we did get a handful of responses to the following question -

"Any there any general comments you would like to add that we have not covered?

TAC is a great organization! You do a lot with little or no financial support. Keep going!

All good!

I am happy and proud to be a member of this organization! As a member of a subgroup executive for many years, I know and appreciate all the work that goes into making TAC great!

I enjoy attending the conference

This was a great thing to do - an incredibly important exercise that demonstrates a new commitment to engaging members - well done! If this same methodology is applied to important decisions of the organization - and is coupled with clarity of the organizations' mandate, I see a very bright future for TAC! Without both, however, I think membership will likely remain stable for those committed to (only) a scientific conference

We need to improve/increase the TAC presence in Canada. The vast majority of Canadians would not know that TAC exits. Needs to be brought to the forefront within government and show what we are doing for injured Canadians across the country.

5. SUMMARY

The 2019 TAC Membership Survey revealed that although most TAC members are satisfied, many feel they have no influence on TAC's direction, and many would like to see more frequent/fulsome communications and interactions between Annual Meetings, as well as increased Education, Mentorship, Networking, and Research opportunities. Members would also like more use of Virtual Platforms and Social Media, the Website to be improved, and for TAC to increase its National profile, particularly as it relates to Advocacy, Standards, and Trauma Education.

With regards to the TAC Annual Meeting, the most important reason that most attend is to network with colleagues from different sites. Most respondents were happy with most aspects of the meeting and liked most topics being covered. However, there were requests for both more specific sessions for various subgroups, as well as more interdisciplinary sessions. A desire to increase the strength of the meeting/presentations was also expressed, along with the need to ensure members are kept abreast of key clinical developments. It was also suggested that we increase opportunities for interactions/ networking and sharing of best practices/tips at the meeting.

The 2019 Survey Results are being shared widely with all Members, Committees, and the Board, so that TAC can continue to improve and better serve its Members. Thanks again for your participation and commitment to TAC! Together we can achieve more!