

	Least	Average	Most	Important	
<b>Teaching, Faculty and Supervision</b>					
Academic reputation of institution/faculty	1	2	3	4	5
Size of the teaching/research faculty	1	2	3	4	5
Accessibility of faculty to residents	1	2	3	4	5
Clinical reputation of the faculty	1	2	3	4	5
Quality of teaching conferences/seminars	1	2	3	4	5
Protected time for classes/seminars, Grand Rounds	1	2	3	4	5
Training in evidence-based medicine and critical analysis skills	1	2	3	4	5
Quality of clinical teaching and supervision	1	2	3	4	5
Personal qualities of Program Director (e.g., warmth, respectful attitude)	1	2	3	4	5
Professional abilities of Program Director (e.g. teaching, administrative, leadership abilities)	1	2	3	4	5
Academic stature of Program Director	1	2	3	4	5
Opportunities for mentorship	1	2	3	4	5
Responsiveness of the program to feedback from residents	1	2	3	4	5
Opportunities for residents to influence curriculum	1	2	3	4	5
Educational philosophy of the program	1	2	3	4	5
Departmental support for education	1	2	3	4	5
Other:	1	2	3	4	5
<b>Institutional Support</b>					
Compensation (e.g., salary, benefits, leave, etc...)	1	2	3	4	5
Learning resources (e.g., libraries, computers, etc...)	1	2	3	4	5
Moonlighting opportunities	1	2	3	4	5
Availability of personal psychotherapy	1	2	3	4	5
Quality of physical facilities	1	2	3	4	5
Other:	1	2	3	4	5
<b>Educational experiences</b>					
Diversity of patient populations	1	2	3	4	5
Opportunities for continuity of care	1	2	3	4	5
Diversity of training settings	1	2	3	4	5
Exposure to managed care settings	1	2	3	4	5
Amount of call	1	2	3	4	5
Education prioritized over service	1	2	3	4	5
Opportunities for research	1	2	3	4	5
Opportunities for teaching	1	2	3	4	5
Opportunity to individualize training (e.g., electives, part-time training)	1	2	3	4	5

Training in biologic psychiatry and neuroscience	1	2	3	4	5
Training in psychotherapy	1	2	3	4	5
Balance of training between biologic and psychotherapeutic perspectives in psychiatry	1	2	3	4	5
Early exposure to psychotherapy patients	1	2	3	4	5
Opportunity to follow psychotherapy patients long-term	1	2	3	4	5
Opportunities for specialized training experiences (e.g., ECT, forensics, specialty clinics, group psychotherapy, analytic training, CBT, family therapy, brief dynamic therapies, pain management, eating disorders, etc...)	1	2	3	4	5
Exposure to fellows in specialty programs in psychiatry	1	2	3	4	5
Quality of medical training (e.g., medicine, neurology, pediatrics)	1	2	3	4	5
Size of training program (e.g., "critical mass" of residents)	1	2	3	4	5
Quality of other residents in the program	1	2	3	4	5
Other:	1	2	3	4	5
<b>Atmosphere in the Program</b>					
Morale in the department (e.g., among faculty)	1	2	3	4	5
Morale in the resident group	1	2	3	4	5
Level of support from peers	1	2	3	4	5
Other:	1	2	3	4	5
<b>Postgraduate Outcomes</b>					
Performance of graduates on Board exams	1	2	3	4	5
Job satisfaction of program graduates	1	2	3	4	5
Number of graduates in leadership positions, research or academia	1	2	3	4	5
Other:	1	2	3	4	5
<b>Geographic Factors</b>					
"Livability" of the local area	1	2	3	4	5
Job opportunities locally after graduation	1	2	3	4	5
Job opportunities for your significant other, if applicable	1	2	3	4	5
Availability of fellowship programs locally (e.g., geriatrics, child, addictions, forensics, psychopharmacology,etc...)	1	2	3	4	5
Other:	1	2	3	4	5

(modified from a survey on quality in residency training by the American Association of Directors of Psychiatric Residency Training, Task Force on Quality in Residency Training, 12/98)