

Annex1: Faculty needs survey questionnaire

I have read the Participant Information Sheet and consent to the data I enter being used as described in the information sheet

1. What is your gender? M/F/other/prefer not to say
2. What is your age? (list)
3. What is your professional qualification? e.g. Nurse-Midwife; midwife; nurse but not midwife etc. (list)
4. What is your higher academic qualification (if achieved)?
5. At which midwifery education institution do you work?
6. How long have you worked as a midwifery faculty member/teacher? (List)
7. Does your current role involve any of the following activities/responsibilities? Check all the boxes that apply
 - Face-to-Face teaching (in-person, not online)
 - Online or blended (mix of online and face-to-face) teaching
 - Clinical teaching – Simulation in skills lab
 - Clinical teaching – in clinical environment
 - Curriculum design/Program and module development
 - Program and Curriculum or Program implementation
 - Research activities
 - Writing manuscript for publication
 - Institutional leadership
 - Educational quality improvement activities
8. Please rank the activities/responsibilities in order of proportion of your time (with 1 being the most amount of your time), use the N/A if you are not involved in certain activities.

- Face-to-Face teaching
- Online or blended teaching
- Clinical teaching – Simulation
- Clinical teaching – In clinical environment
- Curriculum design/Program and module development
- Curriculum or Program and module implementation
- Research activities
- Writing manuscript for publication
- Institutional leadership
- Educational quality improvement activities

Capacity strengthening (Likert)

9. I need to strengthen my capacity in face-to-face teaching
10. I would need to strengthen my capacity in blended/online teaching
11. I would need to strengthen my capacity in clinical teaching using simulation
12. I would need to strengthen my capacity in clinical teaching in the clinical environment
13. I would need to strengthen my capacity in curriculum design/program and module development
14. I would need to strengthen my capacity in the conduct of research
15. I would need to strengthen my capacity in writing manuscripts for publication
16. I would need to strengthen my capacity in management and leadership
17. In addition to roles mentioned above, are there other areas of professional development you need to strengthen your role as a midwifery faculty? (free text)
18. Please list your top three areas/topics you need to strengthen, to assist you in your faculty role (1-3)
19. Have you had access to any formal Faculty Development programs/modules in the past five (5) years (Yes/No)
20. If you have had access to formal Faculty Development in the last five (5) years - who provided the program/module?

Check all that apply. (List)

- My education institution (School/University) provides formal development program/module
- Programs or modules provided by external/international universities and/or by UNFPA- please provide detail in comment section
- Not Applicable - no access to formal faculty development programs or module in last five (5) years
- Other (please specify)

21. Based on your needs: What would be your preferred delivery mode of a program or module of faculty development (1 is your most preferred option and 4 the least preferred)

- Online only
- Blended - mostly online with limited face-to-face
- Blended - mostly face-to-face with limited online
- Face-to-Face only

Please explain why the top option you chose for Q21 is your most preferred (Open text)

22. Based on your needs: what would be the preferred number of days for a program of faculty development?

23. What would be your preferred format/schedule for a XX- day (face-to-face or online) or equivalent program of faculty development (1 is your most preferred option and 4 your least preferred)

- Single point-in-time 10-day intensive program (over 2 weeks)
- One day each week for 10 weeks
- Half day every two weeks over a period of 6 months
- One day each month for 10 months

24. Please tell me why the top option you chose for Q23 is your most preferred

25. Do you currently work in midwifery clinical practice? (Yes/No)

26. When did you last spend time working in the clinical area as a midwife or nurse-midwife/certified midwife? (List)

27. If you are currently unable or not supported to work in the clinical area, please indicate if you would be interested in being contacted for follow-up research on the 'enablers and barriers to maintenance of clinical skills/practice for Faculty' - Participant Information Sheet (Yes/No)

28. Please provide any further comment that may help us determine your needs for developing and strengthening the work you do as midwifery faculty (Free Text)

