

# Survey Preview

To take the survey please visit this link: <https://tinyurl.com/IOA2023survey>

**Please note:** this document contains all questions in the survey instrument. Some questions are asked only as follow-up to responses to previous questions.

## Survey of Organizational Ombuds Compensation, Reporting, and Structure

### *Researcher's Contact Information*

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You are being asked to take part in a research study. The information below will help you decide if you want to be in the study. Please consult Dr. Hedeem if there is anything that is not clear or if you need more information.

### *Description of Project*

This study seeks to gather and present contemporary information on organizational ombuds' compensation, reporting lines, and work structure.

### *Explanation of Procedures*

If you agree to participate in this study, you'll complete an online survey of twenty questions. Items may be skipped or left blank. All data will be recorded without identifying information (such as name, organization, specific location or IP address). Your participation is voluntary; you can refuse to take part or stop at any time without penalty.

### *Risks or Discomforts*

There are no known risks or discomforts from participation.

### *Benefits*

The benefits of participation include the satisfaction of contributing to important research on the organizational ombuds field. Participants who read the resultant report will gain valuable reference information about contemporary practices in ombuds compensation, reporting, and work structure.

### *Confidentiality*

All data for this study will be collected without any identification of participants and will be maintained in password-protected software.

*Research at Kennesaw State University that involves human participants is carried out under the oversight of an Institutional Review Board. Questions or problems regarding these activities should be addressed to the Institutional Review Board, Kennesaw State University,*

**Consent?** Do you agree to participate in this survey?

- Yes, I agree and give my consent to participate in this research project.
- No, I do not agree to participate, and will be excluded from the remainder of the questions.

End of Block: Screen 1

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Start of Block: Screen 2

**Q0** For how many organizations do you provide ombuds services?

- 1
  - 2
  - 3 or more
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Page Break

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**Text**

**Very important!:** you've indicated that you provide ombuds services for more than one organization. Please complete a separate survey for each unique ombuds position you hold. (Instructions are provided at close of survey.)

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**Q1** Which of these best describes the ombuds services you provide for this organization?

- Ongoing ombuds services, available for all or most of the calendar year
  - Ombuds services for an event (e.g., a conference) or a fixed term shorter than six months
  - Other, please describe \_\_\_\_\_
- 

**Q2** In which sector does this organization best fit? (please check only one)

- Academic (Higher Education, college/university)
  - Education (i.e., K-12 schools or administration; schools for children or youth)
  - Corporate
  - Government
  - Health care
  - Nonprofit
  - International/multinational civil service
  - International/multinational organization (non civil service)
  - Ombuds/dispute resolution services provider (outsourced, contracted consulting firm)
  - Other, please describe \_\_\_\_\_
-

**Q3** Where are the constituents you serve for this organization located? *(please check all that apply)*

- Africa
  - Asia
  - Australia/New Zealand
  - Europe
  - Central America
  - North America
  - South America
- 

**Q3.1** Within Europe, which region/s? *(check all that apply)*

- Northern Europe
  - Southern Europe
  - Eastern Europe
  - Southeastern Europe
-

**Q3.2** Within North America, which country/ies or region/s? *(check all that apply)*

- United States: Northwest US
  - United States: North Central US
  - United States: Northeast US
  - United States: Southwest US
  - United States: South Central US
  - United States: Southeast US
  - Canada: Western Canada
  - Canada: Central Canada
  - Canada: Atlantic Canada
  - Canada: Northern Canada
  - Mexico
-

**Q4** Which best describes your ombuds role with this organization?

- Employed full-time as ombuds
- Employed part-time as ombuds
- Employed full- or part-time in another role, serving as ombuds as collateral duty
- Contracted/outsourced (whether directly or through a coordinating firm)
- Other, please describe \_\_\_\_\_

**Q5** What is the present staffing of this organization's ombuds office? (*expressed in full-time equivalents ("FTE") of 40 hours/weekly; thus a 20-hour employee represents .5 FTE*)

	Staffing	
	Number of people	Total FTE
Ombuds practitioners		
Administrative staff		
Students or interns		

**Q6** Has the ombuds office staffing level changed in the past year?

- Yes, the office staffing has increased
  - Yes, the office staffing has decreased
  - No, it has not changed
- 

**Q6.1** What actions or factors led to the staffing increase? *(check all that apply)*

- Ombuds office requested additional support based on caseload
  - Ombuds office requested additional support due to long hours
  - Ombuds office requested additional support to handle intake
  - Ombuds office requested additional staffing to increase diversity
  - Organizational leader/s recognized ombuds office contributions in an important case
  - Organizational leader/s recognized value of ombuds office generally
  - Constituents or affinity group/s pressured the organization to expand ombuds office
  - An organizational challenge or crisis highlighted the value of expanding ombuds office
  - Other \_\_\_\_\_
-

**Q6.2** What actions or factors led to the staffing decrease? *(check all that apply)*

- Organizational budget cuts
- Decision by the office/officer to which the ombuds office reports
- Decision of organization leader (other than that to which ombuds reports)
- Opposition from compliance officer/s
- Perceived poor ombuds service (which led to loss of trust or loss of confidence)
- Other \_\_\_\_\_

End of Block: Screen 2

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Start of Block: Screen 3

**Q7.1** How long have you served as an ombuds for this organization (rounding to nearest full year)?

- 0-3 years
  - 4-6 years
  - 7-10 years
  - 11 or more years
-



**Q7.2** How many years total have you worked as an ombuds anywhere, including at the present and any prior organizations (rounding to the nearest full year)?

- 0-3 years
  - 4-6 years
  - 7-10 years
  - 11 or more years
- 

**Q8.1** To whom does the ombuds office report in this organization? *(please check all that apply)*

- Board (incl. Board chair or committee)
  - CEO-level (e.g., President, Sec. General)
  - COO-level (e.g., Provost, Executive Vice President)
  - Other very senior leadership position or body
  - Diversity/Equity/Inclusion/Belonging office or officer
  - Compliance office or officer (ethics, general counsel, human resources; other than DEI)
  - The head of my local sector/subsidiary/region
  - Other, please describe \_\_\_\_\_
-

**Q8.2** Has the ombuds office reporting line changed in recent years? If so, to whom did you previously report? *(please check all that apply)*

- The reporting line has not changed
  - Board (incl. Board chair or committee)
  - CEO-level (e.g., President, Sec. General)
  - COO-level (e.g., Provost, Executive Vice President)
  - Other very senior leadership position or body
  - Diversity/Equity/Inclusion/Belonging office or officer
  - Compliance office or officer (ethics, general counsel, human resources; other than DEI)
  - The head of my local sector/subsidiary/region
  - Other, please describe \_\_\_\_\_
- 

**Q9** How many cases and systemic reviews did your ombuds office handle in 2022?

*(A **case** occurs when a visitor or group presents a new problem or issue to an ombuds that results in a discussion to develop, discuss, and/or offer options. A **systemic review** occurs when an ombuds takes action to understand more fully an issue or problem observed by the ombuds as frequent, widespread, severe, or impacting multiple constituents or parts of the organization)*

- Number of cases handled in 2022 \_\_\_\_\_
  - Number of systemic reviews in 2022 \_\_\_\_\_
-

**Q10** How many constituents have access your ombuds services?

*(Constituents are distinct from visitors: visitors are those served directly by the ombuds office, while constituents are those who are eligible to be served.)*

\_\_\_\_\_

**Q11.1** How many hours per week are you **expected** to serve as ombuds in person or remotely (by phone or videoconference or otherwise)? *Please enter only numbers, including 0 if you don't serve in the specified manner.*

Weekly hours in person \_\_\_\_\_

Weekly hours remotely \_\_\_\_\_

**Q11.2** How many hours per week would you **prefer** to serve as ombuds in person or remotely (by phone or videoconference or otherwise)? *Please enter only numbers, including 0 if you would prefer not to serve in the specified manner.*

Weekly hours in person \_\_\_\_\_

Weekly hours remotely \_\_\_\_\_

**Q12** How many hours per event (e.g., conference) or fixed-term appointment are you expected to serve as ombuds in person or remotely (by phone or videoconference or otherwise)? *Please enter only numbers, including 0 if you don't serve in the specified manner.*

Hours in person \_\_\_\_\_

Hours remotely \_\_\_\_\_

End of Block: Screen 3

Start of Block: Screen 4

**Q13** On what basis are you compensated, if at all?

- Salary
  - Hourly
  - Fixed amount (e.g., stipend, honorarium, contracted total)
  - Uncompensated for ombuds services
  - Other, please describe \_\_\_\_\_
- 

**Q14** How has your compensation level been determined by the organization? (*check all that apply*)

- Benchmarked to another position in the organization
  - Defined specifically for ombuds role
  - Related to previous role/s I've held in the organization
  - Other, please describe \_\_\_\_\_
- 

**Q15** In which currency do you receive your compensation from this organization?

Continent/region

Currency

▼ Africa ... North America ~ Other

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**Q16** What is your yearly gross monetary compensation (salary, fixed amount, or total wages)?

*Please provide in the currency indicated in prior question; do not include any currency symbols, commas, or periods--just digits (\$40,000 would be 40000; €25.000 would be 25000).*

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**Q17** What is your compensation for each event or fixed-term service?

*Please provide in the currency indicated in prior question; do not include any currency symbols, commas, or decimal points--only numerals (\$2,000 would be 2000; €1.000 would be 1000).*

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**Q18** If your compensation at this organization changed in the past year, which of these contributed to the change? *(If compensation hasn't changed, please leave blank; if it has changed, check all that apply)*

I received a raise

I got a promotion

I received a bonus (other than an organization-wide bonus)

I received an increase alongside other employees (e.g., cost-of-living adjustment, organization-wide raises or bonuses, employer-initiated equity adjustment)

I received a decrease (for any reason)

**Q19** Which of the following insurance benefits are offered to the ombuds from this organization? *Please indicate whether benefits are covered fully or subsidized (covered in part) by the*

organization. If neither, please leave blank.

	Covered in full	Subsidized
Health insurance	<input type="radio"/>	<input type="radio"/>
Dental insurance	<input type="radio"/>	<input type="radio"/>
Vision insurance	<input type="radio"/>	<input type="radio"/>
Professional liability	<input type="radio"/>	<input type="radio"/>

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**Q20** If you receive a retirement contribution (including a "match" to your own contributions), what percentage is this in relation to your annualized compensation? *Please provide this only as a number, without a % sign or leave blank.*

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End of Block: Screen 4

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