# **Department Climate Survey Comparison Data: 2011 vs 2015**

Comparison (last column) based on the percentage of faculty reporting Very Often or Always Scale: Rarely/Never; Sometimes; Usually or Often; Very Often or Always

Statement	Rarely % (N*)	Sometimes % (N*)	Usually % (N*)	Always % (N*)	p+				
Organizational Values: The extent to which the Department fosters and supports initiative, creative problem-solving and collaboration									
I am encouraged to be creative in solving p	roblems.								
2011	5.1 (4)	20.3 (16)	35.4 (28)	39.2 (31)					
2015	3.3 (2)	14.8 (9)	36.1 (22)	45.9 (28)					
I find it easy to share new and original idea	S.								
2011	8.2 (7)	24.7 (21)	35.3 (30)	31.8 (27)					
2015	3.3 (2)	14.8 (9)	41.0 (25)	41.0 (25)					
I am encouraged to take initiative.									
2011	4.8 (4)	17.9 (15)	35.7 (30)	41.7 (35)					
2015	3.3 (2)	10.0 (6)	35.0 (21)	51.7 (31)					
I trust my colleagues in the Department.		• • • • • • • • • • • • • • • • • • • •	•						
2011	3.5 (3)	17.6 (15)	28.2 (24)	50.6 (43)					
2015	1.7 (1)	6.9 (4)	31.0 (18)	60.3 (35)					
I respect my colleagues in the Department.									
2011	1.2 (1)	7.1 (6)	25.9 (22)	65.9 (56)	***				
2015	0 (0)	1.7 (1)	13.6 (8)	84.7 (50)	***				
Departmental roles and responsibilities for									
2011	3.8 (3)			T					
2015		23.1 (18)	61.5 (48)	11.5 (9)	**				
Continuous improvement among all faculty	0 (0)	26.8 (15)	61.5 (48) 48.2 (27)	11.5 (9) 25.0 (14)	**				
	members is er	26.8 (15) ncouraged.	48.2 (27)	25.0 (14)	**				
2011	members is er 2.6 (2)	26.8 (15) ncouraged. 14.3 (11)	48.2 (27) 45.5 (35)	25.0 (14) 37.7 (29)	**				
2015	2.6 (2) 3.6 (2)	26.8 (15) ncouraged. 14.3 (11) 10.7 (6)	48.2 (27)	25.0 (14)					
2015 The Department encourages leadership am	2.6 (2) 3.6 (2) ong faculty me	26.8 (15) ncouraged. 14.3 (11) 10.7 (6) embers.	48.2 (27) 45.5 (35) 30.4 (17)	25.0 (14) 37.7 (29) 55.4 (31)					
The Department encourages leadership am 2011	2.6 (2) 3.6 (2) ong faculty me 2.5 (2)	26.8 (15) ncouraged. 14.3 (11) 10.7 (6) embers. 21.5 (17)	48.2 (27) 45.5 (35) 30.4 (17) 38.0 (30)	25.0 (14) 37.7 (29) 55.4 (31) 38.0 (30)					
The Department encourages leadership am 2011 2015	2.6 (2) 3.6 (2) ong faculty me 2.5 (2) 3.7 (2)	26.8 (15) ncouraged. 14.3 (11) 10.7 (6) embers.	48.2 (27) 45.5 (35) 30.4 (17)	25.0 (14) 37.7 (29) 55.4 (31)					
The Department encourages leadership am 2011 2015 My input is requested regarding decisions	2.6 (2) 3.6 (2) ong faculty me 2.5 (2) 3.7 (2) that affect me.	26.8 (15) ncouraged. 14.3 (11) 10.7 (6) embers. 21.5 (17) 14.8 (8)	48.2 (27) 45.5 (35) 30.4 (17) 38.0 (30) 33.3 (18)	25.0 (14) 37.7 (29) 55.4 (31) 38.0 (30) 48.1 (26)					
2015 The Department encourages leadership am 2011 2015 My input is requested regarding decisions 2011	2.6 (2) 3.6 (2) ong faculty me 2.5 (2) 3.7 (2) that affect me. 8.6 (7)	26.8 (15) ncouraged. 14.3 (11) 10.7 (6) embers. 21.5 (17) 14.8 (8) 28.4 (23)	48.2 (27) 45.5 (35) 30.4 (17) 38.0 (30) 33.3 (18) 35.8 (29)	25.0 (14) 37.7 (29) 55.4 (31) 38.0 (30) 48.1 (26) 27.2 (22)					
2015 The Department encourages leadership am 2011 2015 My input is requested regarding decisions 2011 2011 2015	2.6 (2) 3.6 (2) ong faculty me 2.5 (2) 3.7 (2) that affect me. 8.6 (7) 1.8 (1)	26.8 (15) ncouraged. 14.3 (11) 10.7 (6) mbers. 21.5 (17) 14.8 (8) 28.4 (23) 27.3 (15)	48.2 (27) 45.5 (35) 30.4 (17) 38.0 (30) 33.3 (18) 35.8 (29) 43.6 (24)	25.0 (14) 37.7 (29) 55.4 (31) 38.0 (30) 48.1 (26)					
The Department encourages leadership am  2011  2015  My input is requested regarding decisions  2011  2015  It is clear how decisions will be carried out	2.6 (2) 3.6 (2) ong faculty me 2.5 (2) 3.7 (2) that affect me. 8.6 (7) 1.8 (1) for the Departr	26.8 (15) ncouraged. 14.3 (11) 10.7 (6) mbers. 21.5 (17) 14.8 (8)  28.4 (23) 27.3 (15) ment's strategic	48.2 (27)  45.5 (35) 30.4 (17)  38.0 (30) 33.3 (18)  35.8 (29) 43.6 (24)  goals.	25.0 (14) 37.7 (29) 55.4 (31) 38.0 (30) 48.1 (26) 27.2 (22) 27.3 (15)					
The Department encourages leadership am  2011 2015  My input is requested regarding decisions 2011 2015  It is clear how decisions will be carried out 2011	2.6 (2) 3.6 (2) ong faculty me 2.5 (2) 3.7 (2) that affect me. 8.6 (7) 1.8 (1) for the Departr 9.2 (7)	26.8 (15) ncouraged. 14.3 (11) 10.7 (6) mbers. 21.5 (17) 14.8 (8)  28.4 (23) 27.3 (15) ment's strategic 39.5 (30)	48.2 (27)  45.5 (35) 30.4 (17)  38.0 (30) 33.3 (18)  35.8 (29) 43.6 (24) goals. 44.7 (34)	25.0 (14) 37.7 (29) 55.4 (31) 38.0 (30) 48.1 (26) 27.2 (22) 27.3 (15) 6.6 (5)					
The Department encourages leadership am  2011 2015  My input is requested regarding decisions 2011 2015  It is clear how decisions will be carried out 2011 2015	2.6 (2) 3.6 (2) 3.6 (2) ong faculty me 2.5 (2) 3.7 (2) that affect me. 8.6 (7) 1.8 (1) for the Department of the Departm	26.8 (15) ncouraged. 14.3 (11) 10.7 (6) mbers. 21.5 (17) 14.8 (8)  28.4 (23) 27.3 (15) ment's strategic 39.5 (30) 34.5 (19)	48.2 (27)  45.5 (35) 30.4 (17)  38.0 (30) 33.3 (18)  35.8 (29) 43.6 (24)  goals.  44.7 (34) 50.9 (28)	25.0 (14) 37.7 (29) 55.4 (31) 38.0 (30) 48.1 (26) 27.2 (22) 27.3 (15) 6.6 (5) 12.7 (7)					
The Department encourages leadership am  2011 2015  My input is requested regarding decisions 2011 2015  It is clear how decisions will be carried out 2011 2015  Faculty members demonstrate individual amounts	2.6 (2) 3.6 (2) ong faculty me 2.5 (2) 3.7 (2) that affect me. 8.6 (7) 1.8 (1) for the Departr 9.2 (7) 1.8 (1) nd collective ov	26.8 (15) ncouraged. 14.3 (11) 10.7 (6) mbers. 21.5 (17) 14.8 (8)  28.4 (23) 27.3 (15) ment's strategic 39.5 (30) 34.5 (19) wnership of the	48.2 (27)  45.5 (35) 30.4 (17)  38.0 (30) 33.3 (18)  35.8 (29) 43.6 (24)  goals.  44.7 (34) 50.9 (28)  Department's s	25.0 (14)  37.7 (29) 55.4 (31)  38.0 (30) 48.1 (26)  27.2 (22) 27.3 (15)  6.6 (5) 12.7 (7) success.	**				
The Department encourages leadership am  2011 2015  My input is requested regarding decisions 2011 2015  It is clear how decisions will be carried out 2011 2015  Faculty members demonstrate individual am 2011	2.6 (2) 3.6 (2) 3.6 (2) 3.7 (2) 3.7 (2) 4 that affect me. 8.6 (7) 1.8 (1) 5 for the Departr 9.2 (7) 1.8 (1) 6.7 (5)	26.8 (15) ncouraged. 14.3 (11) 10.7 (6) mbers. 21.5 (17) 14.8 (8)  28.4 (23) 27.3 (15) ment's strategic 39.5 (30) 34.5 (19) wnership of the 28.0 (21)	48.2 (27)  45.5 (35) 30.4 (17)  38.0 (30) 33.3 (18)  35.8 (29) 43.6 (24)  goals.  44.7 (34) 50.9 (28)  Department's s 53.3 (40)	25.0 (14)  37.7 (29) 55.4 (31)  38.0 (30) 48.1 (26)  27.2 (22) 27.3 (15)  6.6 (5) 12.7 (7) success. 12.0 (9)					
The Department encourages leadership am  2011 2015  My input is requested regarding decisions 2011 2015  It is clear how decisions will be carried out 2011 2015  Faculty members demonstrate individual a 2011 2015	2.6 (2) 3.6 (2) 3.6 (2) 3.7 (2) 3.7 (2) 3.7 (2) 4 that affect me. 8.6 (7) 1.8 (1) 6 or the Departr 9.2 (7) 1.8 (1) 6 or the Collective or 6.7 (5) 1.8 (1)	26.8 (15) ncouraged. 14.3 (11) 10.7 (6) mbers. 21.5 (17) 14.8 (8)  28.4 (23) 27.3 (15) ment's strategic 39.5 (30) 34.5 (19) wnership of the 28.0 (21) 21.8 (12)	48.2 (27)  45.5 (35) 30.4 (17)  38.0 (30) 33.3 (18)  35.8 (29) 43.6 (24)  goals.  44.7 (34) 50.9 (28)  Department's \$ 53.3 (40) 45.5 (25)	25.0 (14)  37.7 (29) 55.4 (31)  38.0 (30) 48.1 (26)  27.2 (22) 27.3 (15)  6.6 (5) 12.7 (7)  SUCCESS. 12.0 (9) 30.9 (17)	**				
The Department encourages leadership am  2011 2015  My input is requested regarding decisions 2011 2015  It is clear how decisions will be carried out 2011 2015  Faculty members demonstrate individual am 2011 2015  I feel that the Department spends an appro	2.6 (2) 3.6 (2) ong faculty me 2.5 (2) 3.7 (2) that affect me. 8.6 (7) 1.8 (1) for the Departr 9.2 (7) 1.8 (1) nd collective ov 6.7 (5) 1.8 (1) priate amount of	26.8 (15) ncouraged.  14.3 (11) 10.7 (6) mbers. 21.5 (17) 14.8 (8)  28.4 (23) 27.3 (15) ment's strategic 39.5 (30) 34.5 (19) wnership of the 28.0 (21) 21.8 (12) of time on proce	48.2 (27)  45.5 (35) 30.4 (17)  38.0 (30) 33.3 (18)  35.8 (29) 43.6 (24) goals.  44.7 (34) 50.9 (28)  Department's s 53.3 (40) 45.5 (25) ssing decision	25.0 (14)  37.7 (29) 55.4 (31)  38.0 (30) 48.1 (26)  27.2 (22) 27.3 (15)  6.6 (5) 12.7 (7) success. 12.0 (9) 30.9 (17) s.	***				
The Department encourages leadership am  2011 2015  My input is requested regarding decisions 2011 2015  It is clear how decisions will be carried out 2011 2015  Faculty members demonstrate individual a 2011 2015	2.6 (2) 3.6 (2) 3.6 (2) 3.7 (2) 3.7 (2) 3.7 (2) 4 that affect me. 8.6 (7) 1.8 (1) 6 or the Departr 9.2 (7) 1.8 (1) 6 or the Collective or 6.7 (5) 1.8 (1)	26.8 (15) ncouraged. 14.3 (11) 10.7 (6) mbers. 21.5 (17) 14.8 (8)  28.4 (23) 27.3 (15) ment's strategic 39.5 (30) 34.5 (19) wnership of the 28.0 (21) 21.8 (12)	48.2 (27)  45.5 (35) 30.4 (17)  38.0 (30) 33.3 (18)  35.8 (29) 43.6 (24)  goals.  44.7 (34) 50.9 (28)  Department's \$ 53.3 (40) 45.5 (25)	25.0 (14)  37.7 (29) 55.4 (31)  38.0 (30) 48.1 (26)  27.2 (22) 27.3 (15)  6.6 (5) 12.7 (7)  SUCCESS. 12.0 (9) 30.9 (17)	**				

Statement	Rarely % (N*)	Sometimes % (N*)	Usually % (N*)	Always % (N*)	p+
I am empowered to make decisions.					
2011	9.0 (7)	34.6 (27)	35.9 (28)	20.5 (16)	
2015	3.5 (2)	26.3 (15)	42.1 (24)	28.1 (16)	
The Department Chair is an effective leader					
2011					N/A
2015	0 (0)	1.9 (1)	31.5 (17)	66.7 (36)	IN/A
There is clarity in the Department's reporting	g relationship	s, areas of respo	onsibility and a	ccountability.	
2011					N1/A
2015	3.8 (2)	13.5 (7)	38.5 (20)	44.2 (23)	N/A
Those in leadership positions (Vice Chairs, encouraged to be innovative.	` '	. ,	` ′		
2011					
2015	2.4 (1)	11.9 (5)	23.8 (10)	61.9 (26)	N/A
Rate your understand					·_
2011					
2015	2.4 (1)	17.1 (7)	61.0 (25)	19.5 (8)	N/A
	. ,	, ,	3113 (=3)	1010 (0)	
It is clear to me how financial decisions are		opartinont.			
It is clear to me how financial decisions are					
It is clear to me how financial decisions are  2011  2015  For those on the UMass	25.0 (12)	25.0 (12)	31.3 (15)	18.8 (9)	N/A
2011 2015  For those on the UMass  Rate your understanding of the Department 2011	25.0 (12) s payroll, rate y	our understand	ing of the follow	wing:	N/A N/A
2011 2015  For those on the UMass  Rate your understanding of the Department 2011 2015	25.0 (12) s payroll, rate y s's approach to	compensation.	25.0 (10)		
2011 2015  For those on the UMass  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department	25.0 (12) s payroll, rate y s's approach to	compensation.	25.0 (10)	wing:	
2011 2015  For those on the UMass  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2011	25.0 (12) s payroll, rate y s's approach to 15.0 (6) s's approach to	compensation.  20.0 (8)  ward financial in	25.0 (10)	wing: 40.0 (16)	
2011 2015  For those on the UMass  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department	25.0 (12) s payroll, rate y s's approach to	compensation.	25.0 (10)	wing:	N/A
For those on the UMass  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Effectiveness	25.0 (12) s payroll, rate y s's approach to 15.0 (6) s's approach to 29.7 (11) of communica	compensation.  20.0 (8)  ward financial in  32.4 (12)  tions modes and	25.0 (10) nvestments. 21.6 (8) d channels	wing: 40.0 (16)	N/A
For those on the UMass Rate your understanding of the Department 2011 2015 Rate your understanding of the Department 2011 2015 Effectiveness I feel well informed about activities and dev	25.0 (12) s payroll, rate y s's approach to 15.0 (6) s's approach to 29.7 (11) of communicatelopments with	compensation.  20.0 (8)  ward financial in 32.4 (12)  tions modes and thin the Department	25.0 (10) nvestments. 21.6 (8) d channels	wing: 40.0 (16) 16.2 (6)	N/A
For those on the UMass Rate your understanding of the Department 2011 2015 Rate your understanding of the Department 2011 2015 Rate your understanding of the Department 2011 2015 Effectiveness I feel well informed about activities and dev 2011	25.0 (12) s payroll, rate y s's approach to 15.0 (6) s's approach to 29.7 (11) of communicate elopments wit 6.3 (5)	compensation.  20.0 (8)  ward financial in 32.4 (12)  tions modes and thin the Departm 24.1 (19)	25.0 (10) nvestments.  21.6 (8) d channels ent. 44.3 (35)	40.0 (16) 16.2 (6)	N/A
For those on the UMass Rate your understanding of the Department 2011 2015 Rate your understanding of the Department 2011 2015 Rate your understanding of the Department 2011 2015  Effectiveness I feel well informed about activities and dev 2011 2015	25.0 (12) s payroll, rate y s's approach to 15.0 (6) s's approach to 29.7 (11) of communicatelopments wit 6.3 (5) 1.9 (1)	compensation.  20.0 (8)  ward financial in  32.4 (12)  tions modes and  hin the Departm  24.1 (19)  20.4 (11)	25.0 (10) nvestments.  21.6 (8) d channels ent.  44.3 (35) 40.7 (22)	wing: 40.0 (16) 16.2 (6)	N/A N/A
For those on the UMass  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Effectiveness  I feel well informed about activities and dev 2011 2015  I feel well informed about activities and dev	25.0 (12) s payroll, rate y s's approach to  15.0 (6) s's approach to  29.7 (11) of communica elopments wit 6.3 (5) 1.9 (1) elopments wit	compensation.  20.0 (8)  ward financial in  32.4 (12)  tions modes and  24.1 (19)  20.4 (11)  hin my own site	25.0 (10) nvestments.  21.6 (8) d channels ent. 44.3 (35) 40.7 (22)	40.0 (16) 16.2 (6) 25.3 (20) 37.0 (20)	N/A N/A
For those on the UMass  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Effectiveness  I feel well informed about activities and dev 2011 2015  I feel well informed about activities and dev 2011	25.0 (12) s payroll, rate y s's approach to 15.0 (6) s's approach to 29.7 (11) of communica elopments wit 6.3 (5) 1.9 (1) elopments wit 1.3 (1)	compensation.  20.0 (8)  ward financial in  32.4 (12)  tions modes and  24.1 (19)  20.4 (11)  hin my own site  13.0 (10)	25.0 (10) nvestments.  21.6 (8)  d channels  ent.  44.3 (35) 40.7 (22) 41.6 (32)	wing:  40.0 (16)  16.2 (6)  25.3 (20) 37.0 (20)  44.2 (34)	N/A N/A
For those on the UMass  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Effectiveness  I feel well informed about activities and dev 2011 2015  I feel well informed about activities and dev 2011 2015	25.0 (12) s payroll, rate y s's approach to  15.0 (6) s's approach to  29.7 (11) of communicate elopments wit 6.3 (5) 1.9 (1) elopments wit 1.3 (1) 0 (0)	compensation.  20.0 (8)  ward financial in  32.4 (12)  tions modes and  24.1 (19)  20.4 (11)  hin my own site  13.0 (10)  9.3 (5)	25.0 (10) nvestments.  21.6 (8) d channels ent.  44.3 (35) 40.7 (22) . 41.6 (32) 29.6 (16)	40.0 (16) 16.2 (6) 25.3 (20) 37.0 (20)	N/A N/A
For those on the UMass  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Effectiveness  I feel well informed about activities and dev 2011 2015  I feel well informed about activities and dev 2011 2015  I feel the Department adequately highlights	25.0 (12) s payroll, rate y s's approach to  15.0 (6) s's approach to  29.7 (11) of communicate elopments wit 6.3 (5) 1.9 (1) elopments wit 1.3 (1) 0 (0)	compensation.  20.0 (8)  ward financial in  32.4 (12)  tions modes and  24.1 (19)  20.4 (11)  hin my own site  13.0 (10)  9.3 (5)	25.0 (10) nvestments.  21.6 (8) d channels ent.  44.3 (35) 40.7 (22) . 41.6 (32) 29.6 (16)	wing:  40.0 (16)  16.2 (6)  25.3 (20) 37.0 (20)  44.2 (34)	N/A N/A
For those on the UMass  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Effectiveness  I feel well informed about activities and dev 2011 2015  I feel well informed about activities and dev 2011 2015  I feel the Department adequately highlights 2011	25.0 (12)  s payroll, rate y  s's approach to  15.0 (6)  s's approach to  29.7 (11)  of communicate  elopments wit  6.3 (5)  1.9 (1)  elopments wit  1.3 (1)  0 (0)  the achievements	compensation.  20.0 (8)  ward financial in  32.4 (12)  tions modes and  24.1 (19)  20.4 (11)  hin my own site  13.0 (10)  9.3 (5)  ents of the facult	25.0 (10)  25.0 (10)  nvestments.  21.6 (8)  d channels  ent.  44.3 (35) 40.7 (22)  41.6 (32) 29.6 (16)  ty.	40.0 (16)  16.2 (6)  25.3 (20) 37.0 (20)  44.2 (34) 61.1 (33)	N/A N/A
For those on the UMass  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Effectiveness  I feel well informed about activities and dev 2011 2015  I feel well informed about activities and dev 2011 2015  I feel the Department adequately highlights 2011 2015	25.0 (12) s payroll, rate y s's approach to  15.0 (6) s's approach to  29.7 (11) of communicate elopments wit 6.3 (5) 1.9 (1) elopments wit 1.3 (1) 0 (0) the achievement	compensation.  20.0 (8)  ward financial in  32.4 (12)  tions modes and  24.1 (19)  20.4 (11)  hin my own site  13.0 (10)  9.3 (5)  ents of the facult  5.6 (3)	25.0 (10) nvestments.  21.6 (8)  d channels  ent.  44.3 (35) 40.7 (22)  41.6 (32) 29.6 (16)  ty.	25.3 (20) 37.0 (20) 44.2 (34) 61.1 (33)	N/A N/A *
For those on the UMass Rate your understanding of the Department 2011 2015 Rate your understanding of the Department 2011 2015 Rate your understanding of the Department 2011 2015  Effectiveness I feel well informed about activities and dev 2011 2015 I feel well informed about activities and dev 2011 2015 I feel the Department adequately highlights 2011 2015 Strategic Framework: Awarer	25.0 (12) s payroll, rate y s's approach to  15.0 (6) s's approach to  29.7 (11) of communicate elopments wit 6.3 (5) 1.9 (1) elopments wit 1.3 (1) 0 (0) the achievement  0 (0)  ness and partic	compensation.  20.0 (8)  ward financial in  32.4 (12)  tions modes and  24.1 (19)  20.4 (11)  hin my own site  13.0 (10)  9.3 (5)  ents of the facult  5.6 (3)	25.0 (10) nvestments.  21.6 (8)  d channels  ent.  44.3 (35) 40.7 (22)  41.6 (32) 29.6 (16)  ty.  18.5 (10)  epartment's str	25.3 (20) 37.0 (20) 44.2 (34) 61.1 (33)	N/A N/A *
For those on the UMass  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Rate your understanding of the Department 2011 2015  Effectiveness  I feel well informed about activities and dev 2011 2015  I feel well informed about activities and dev 2011 2015  I feel the Department adequately highlights 2011 2015	25.0 (12) s payroll, rate y s's approach to  15.0 (6) s's approach to  29.7 (11) of communicate elopments wit 6.3 (5) 1.9 (1) elopments wit 1.3 (1) 0 (0) the achievement  0 (0)  ness and partic	compensation.  20.0 (8)  ward financial in  32.4 (12)  tions modes and  24.1 (19)  20.4 (11)  hin my own site  13.0 (10)  9.3 (5)  ents of the facult  5.6 (3)	25.0 (10) nvestments.  21.6 (8)  d channels  ent.  44.3 (35) 40.7 (22)  41.6 (32) 29.6 (16)  ty.  18.5 (10)  epartment's str	25.3 (20) 37.0 (20) 44.2 (34) 61.1 (33)	N/A N/A *

Statement	Rarely % (N*)	Sometimes % (N*)	Usually % (N*)	Always % (N*)	p+
My work contributes to the strategic goals					
2011	4.1 (3)	12.2 (9)	27.0 (20)	56.8 (42)	
2015	0 (0)	5.7 (3)	28.3 (15)	66.0 (35)	
My reviews and feedback are conducted w					
2011	11.6 (8)	17.4 (12)	42.0 (29)	29.0 (20)	***
2015	2.0 (1)	10.2 (5)	30.6 (15)	57.1 (28)	
I feel that the Department's planning proce					
2011	7.4 (4)	20.4 (11)	64.8 (35)	7.4 (4)	***
2015	2.6 (1)	17.9 (7)	48.7 (19)	30.8 (12)	
Effectiveness, accuracy			l recognition s	ystems	
I understand what is expected of me by my			24.7 (20)	E2 0 (20)	
2011	5.3 (4)	8.0 (6)	34.7 (26)	52.0 (39)	**
Lom hold accountable for my work	0 (0)	11.3 (6)	20.8 (11)	67.9 (36)	
I am held accountable for my work.	2.6.(2)	E 2 (4)	20 0 (22)	62 2 (40)	
	2.6 (2)	5.3 (4)	28.9 (22)	63.2 (48)	
2015	0 (0)	5.7 (3)	24.5 (13)	69.8 (37)	
I am offered and encouraged to pursue mu 2011			30.4 (24)	41.8 (33)	
	3.8 (3)	24.1 (19)	, ,		***
My work is actisfying	0 (0)	14.8 (8)	20.4 (11)	64.8 (35)	
My work is satisfying.	4.0 (4)	440 (40)	24.0 (20)	40.4 (40)	
2011	1.2 (1)	14.8 (12)	34.6 (28)	49.4 (40)	
2015	1.9 (1)	7.5 (4)	37.7 (20)	52.8 (28)	
I receive accurate feedback during my ann	1	T			
2011	6.7 (5)	14.7 (11)	36.0 (27)	42.7 (32)	**
2015	0 (0)	13.7 (7)	23.5 (12)	62.7 (32)	
I receive timely feedback on my performan		T			
2011	14.5 (11)	15.8 (12)	38.2 (29)	31.6 (24)	**
2015	3.8 (2)	28.8 (15)	19.2 (10)	48.1 (25)	
I feel my work is appropriately recognized.					
2011	7.7 (6)	21.8 (17)	41.0 (32)	29.5 (23)	
2015	5.8 (3)	19.2 (10)	36.5 (19)	38.5 (20)	
	sources to sup	pport the faculty			
I am satisfied with my current work space.	T			<u> </u>	
2011	77(4)	45.4.(0)	40.0 (40)	F7 7 (00)	N/A
The Department has recoursed to support	7.7 (4)	15.4 (8)	19.2 (10)	57.7 (30)	
The Department has resources to support	competitive sai	aries.		Γ	
2011	F 7 (0)	04.0 (10)	45.7 (10)	440(=)	N/A
Z015	5.7 (2)	34.3 (12)	45.7 (16)	14.3 (5)	
The Department has resources to recogniz	e excellence in	ciinical services	5.	T.	
2011			4	00.1411	N/A
2015	2.9 (1)	23.5 (8)	41.2 (14)	32.4 (11)	
The Department has resources to recogniz	e excellence in	teaching.		I	
2011			<u> </u>	<b>5</b> - 4 - 4	N/A
2015	2.5 (1)	20.0 (8)	47.5 (19)	30.0 (12)	•

Statement	Rarely % (N*)	Sometimes % (N*)	Usually % (N*)	Always % (N*)	p+	
The Department has resources to recognize	e excellence in	research.				
2011					NI/A	
2015	3.3 (1)	26.7 (8)	40.0 (12)	30.0 (9)	N/A	
The Department has resources to recognize	e excellence in	innovation.				
2011					NI/A	
2015	10.3 (3)	27.6 (8)	37.9 (11)	24.1 (7)	N/A	
The Department has resources to recognize	e excellence in	service or admi	nistration.			
2011					NI/A	
2015	3.0 (1)	27.3 (9)	45.5 (15)	24.2 (8)	N/A	

<sup>\*</sup>N's may not always total to the full number of respondents due to sporadic missing data and/or relevant skip patterns where not all respondents were eligible to answer certain questions

Statement	Very Difficult % (N)	Difficult Difficult		Not at all Difficult % (N)	p <sup>+</sup>				
Given your professional interests and goal the Department?	Given your professional interests and goals, how difficult is it for you to find colleagues with similar interests in the Department?								
2011	4.9 (4)	8.6 (7)	40.7 (33)	45.7 (37)					
2015	5.6 (3)	1.9 (1)	37.0 (20)	55.6 (30)					

Scale: Yes; No; Not Sure (where applicable)

Statement	Yes % (N*)	No % (N*)	Not Sure % (N*)	p <sup>+</sup>
Does the Department provide resources to	support your p	rofessional gro	wth?	
2011	70.0 (56)	7.5 (6)	22.5 (18)	**
2015	85.2 (46)	7.4 (4)	7.4 (4)	
I understand the criteria used for an acade	mic promotion.	ı		
2011	65.4 (53)	7.4 (6)	27.2 (22)	***
2015	84.9 (45)	5.7 (3)	9.4 (5)	1
As a faculty member in the Department of I mentor?	Family Medicin	e and Communi	ty Health, do ye	ou have a
2011	32.1 (26)	67.9 (55)		***
2015	59.3 (32)	40.7 (22)		1

<sup>\*</sup>N's may not always total to the full number of respondents due to sporadic missing data

<sup>\*\*</sup>N/A's reflect that a similar question was not asked in 2011; thus, no statistical comparison could be made

<sup>&</sup>lt;sup>+</sup>p values are represented by \* (p<.10), \*\* (p<.05), and \*\*\* (p<.01)

<sup>&</sup>lt;sup>+</sup>p values are represented by \* (p<.10), \*\* (p<.05), and \*\*\* (p<.01)

#### Percentage of faculty reporting "Very Often or Always," among faculty with a mentor

Scale: Rarely/Never; Sometimes; Usually or Often; Very often or Always

Statement	Rarely or Never % (N*)	Sometimes % (N*)	Usually or Often % (N*)	Very Often or Always % (N*)	p <sup>+</sup>		
My mentor is helpful in providing direction	n and guidance	on profession	al issues.				
2011	7.7 (2)	11.5 (3)	42.3 (11)	38.5 (10)	***		
2015	0 (0)	3.2 (1)	16.1 (5)	80.6 (25)			
My mentor challenges me to extend my p	rofessional skil	ls (e.g., researd	h, teaching, w	riting).			
2011	8.0 (2)	20.0 (5)	32.0 (8)	40.0 (10)	***		
2015	0 (0)	3.2 (1)	16.1 (5)	80.6 (25)			
My mentor provides constructive and useful critiques of my work.							
2011	7.7 (2)	19.2 (5)	30.8 (8)	42.3 (11)	**		
2015	0 (0)	3.2 (1)	29.0 (9)	67.7 (21)			

<sup>\*</sup>N's may not always total to the full number of respondents due to sporadic missing data and/or relevant skip patterns where not all respondents were eligible to answer certain questions

# Percentage of faculty reporting "9 or 10" in Effectiveness of Communication

Scale: 0 (lowest effectiveness) – 10 (highest effectiveness)

Communication Resource	2011	2015	p <sup>+</sup>
Department Listserve	16.5	33.3	**
Monday Morning Memo	25.0	48.1	***
Thursday Morning Memo	27.5	41.2	**
Department Web Page	7.9	1.9	
Department-wide or Program meetings (e.g., residency meetings)	11.0	12.2	
Department-wide meetings (e.g., UMMG Business meetings, annual dinner)		9.6	N/A
Department retreats	20.3	20.8	
Site specific faculty meetings (e.g., Health Center, Benedict, etc.)	20.5	25.0	

<sup>\*\*</sup>N/A's reflect that a similar question was not asked in 2011; thus, no statistical comparison could be made <sup>†</sup>p values are represented by \* (p<.10), \*\* (p<.05), and \*\*\* (p<.01)

# Overall assessment of the Department of Family Medicine and Community Health's climate and culture (% of faculty reporting)

**Scale:** 0 (worst possible climate) – 10 (best possible climate)

Year	0-6	7-8	9-10	Mean Score
2011	40.5	41.8	17.7	7.75
2015	24.1	63.0	13.0	8.15

Analysis compared those with scores 9-10 vs scores 0-8 between 2011 and 2015; p = NS Analysis also compared mean scores between those responding in 2011 vs 2015; p = NS

<sup>\*</sup>p values are represented by \* (p<.10), \*\* (p<.05), and \*\*\* (p<.01)

#### **Comments about Organizational Values**

- I find the leadership to be very supportive of collaboration.
- I work in a great community.
- It is one thing to verbally encourage new ideas or creative problem solving, but another to provide support (time, personnel) to actually make it possible. That is where I sometimes feel we are falling short.
- Seems to be harder than necessary to change things when the standard way doesn't work
- I think creativity is encouraged up to a point. I think the senior leadership has taken a position to support the hospital first and the department second which leaves individuals on their own at times. Folks try to be creative in their offices but then this comes up against hospital cuts and ideas about the future as well as their principles and the individual is left to have their ideas fail. We need to put patients and learners first especially when this clashes with the hospital we need to take a stand for what we value even if it differ from the hospital.
- To the extent I sometimes distrust colleagues, it seems to stem from my perception that his or her competitive drive to advance as an individual will limit their willingness to deal fairly or openly with me. Academic recognition is culturally and historically based solely on individual accomplishment, scholarship and intellectual performance. More academic reward for successes involving collegial collaboration might lessen the distrust born of self-interest in getting ahead.
- As a faculty person at FHCW, I feel somewhat peripheral to the department, but relations with individuals in the dept are
  cordial. I have good friends within the dept and my relationships with them are what color my opinions are of the dept
  as a whole. I admire and trust their values, as I think they do mine.
- The way in which initiative and creativity are squelched has to do with working within a large hospital system which is not my nature creative or bottom-up. The department itself seems to support creativity and innovation but is limited in its tangible support thereof (time, money) by the institution.

#### Comments about Decision-making Roles and Responsibilities

- I believe that transparency has increased considerably.
- Seems to be some variability in the vision, commitment across faculty/ leaders and not very effective ways to re-steer
- There is a certain amount of "stuckness" in the areas of focus of the Department. There could be more leadership effort around encouraging faculty in innovation at the residency sites.
- I think the department has had strong leadership over the years. I think it has pushed in the past for great things. I am sorry to say that the current leadership seems to mainly older white men. It seems time for some youth, some diversity and more women. I fear also that the leadership have held too many roles within the hospital and school system and are more committed to those goals and principles than the department and its membership. We need to stand by our values even when they clash with the hospital or the school. We need a voice. Again the department has done great things but to move forward we need new creativity, diversity and commitment to us and not always to the financial bottom line.
- Not sure how to find out annual plans for getting to strategic goals
- I think leadership is encouraged to be innovative but not sure they are really empowered. It sometimes feels like they are accountable but not responsible for things.
- With respect to appropriate time for making decisions, sometimes we take TOO long to make decisions
- There is often the preception that we spend too much time on process, which slows down the opportunity to be innovative. Compared to other school's Dept of FM, we seem sluggish.
- I am peripheral to the internal workings of the dept. I think leadership from people "in the periphery" is admired but not fostered. There is still no format for people employed by the health center (FHCW for instance) to have their time paid for if they do things "for" the dept. Teaching, for instance, at UMass, during the daytime always comes out of personal time or admin time. Health center understandably not willing to front for our teaching on time that should be "productive" in terms of seeing pts. Health center faculty could become, and in the past have become leaders on both sides, sometimes bridging (like Tracy Kedian), but she finally had to become part-time at both places. So the invention of a strategy to "cover" the activities of one or two health center faculty per year for time they regularly devote to a School based activity would seem like a good invention. Otherwise hard for health center faculty to develop into leadership and feel ownership and so on.
- Again, innovation is encouraged but tangible support for this is limited by the governance structure of the clinics. As
  these values trickle down. I notice that some of the vice chairs and other leaders are more skilled at empowering others
  and others are less so.

#### **Comments about Resources**

• It has been a challenging time with reductions in the school budget for support of teaching and research. This has a direct impact on the department's overarching strategic plan and impact.

- I understand that the department is fair in salary. They have a formula and it is presented to faculty. As for other financial considerations this is less clear. There seems to be a credit card that can be used at certain times and not at others. Side deals get made for trips, presentations, etc. It would be better to have clarity.
- This seems to change day to day. I think this is just because of the complexity of things, but it feels like a roller coaster sometimes.
- Seem to be there for some things and not others. I have benefitted from funds that I think others have not. And I am not sure others know they can ask for them.
- Appreciate the communication at dept business meetings.

#### **Comments about Communication**

- Meetings are hard to get to when off hours but are good when I can get there.
- Dr. Lasser promotes communication and connecting people.
- I think that communication is nearly always good.
- I think there should be more communication and coordination and recognition of dept faculty in CWM
- In general info is dispensed well with the Monday Memo and retreats. The Thursday memo is more about inspiration than info. The listserve used to have more exchange of ideas but over the last 5 years that has disappeared it seems because members of the dept are too worried about being reprimanded for speaking their minds.
- not sure I ever go to web site for latest info it would help to have minutes/reports from various meetings be available somehow (with a message to go look for them) for when we can't get to the meetings due to competing duties/vacations, etc i feel fairly out of the loop actually
- An active, updated, internal web site would be very helpful
- Retreats goals often feel like their mission is morale boosting, but since we do not make decisions with follow through, they often produce no observable change. Attending is not awaited; it is often tolerated by our faculty.
- Information exchange not best communicated in meetings, which tend toward announcements of things known, except for special awards. I hear more by word of mouth.

#### **Comments about Strategic Framework**

- I think I contribute to the departments stated goals. I think I go beyond that though as I think the spirit of what the department has stood for is what I stand for. I think the department has lost a step in being a voice for the people and the patients and the learners and bit more like the AMA standing for the hospital and the school. I would feel better if the department found their voice again to stand up for values they seem to cherish. This would mean challenging some of those they have become close to which would be hard this is the problem with getting to so many places of leadership but having to go native to hold those positions.
- I just don't know enough about current goals to respond to these questions. Not sure my reviews/feedback have been clearly tied to strategic goals.
- Apart from the query about diversity on my departmental eval, I don't feel that my activities are viewed through the lens
  of the dept'l framework. Fortunately my life mission, my career, and my work have all supported the departmental
  mission, so that this is not really an issue.
- Financial approval from the hospital (ie for new positions, additional services, resources, etc) or from outside payer/contracts (PCPR, etc) is very slow or difficult, and not a transparent process. This is very frustrating to those "on the ground" in the clinics who are waiting to make needed/desired changes. I also worry that the department's hiring process for new faculty can be so lengthy (not sure if this is the department or the hospital side that takes a long time) that we can lose interested candidates.

## Comments about Feedback and Recognition

- I work for multiple constituencies and I'm not sure if my supervisor takes the time to check in with others about my performance.
- I think feedback is rare but annual reviews are done. I do think the department wants the best from each individual.
- Scheduling faculty feedback in a timely way has been an ongoing challenge i do not get regular feedback about my teaching unless I ask for it specifically, and it has not been included in my annual reviews. this should be fixed
- Recognition in our department is spotty. There is clearly more awareness of academic and scholarly accomplishments than for clinical programs. Faculty who work on the periphery seem to get less recognition in general
- I feel like there is always encouragement to do more, but little guidance about how to do this.
- Annual review for people at the health centers can vary in its utility. Mine is characterized by camaraderie. Sometimes it
  focuses on my career. But not always. These are my friends, so formality is forsaken. At my point in my work I hope I

am giving something back to the people evaluating me.

#### Comments about Department providing resources to support professional growth.

- I get access to leadership, mentorship, have had supported time to expand my skills and pursue goals.
- The Department is rich with resources, such as mentoring programs and teacher development opportunities.
- Both yes and no I would like some more support in terms of time allowed for professional growth.
- The department does try to provide resources. However as the pressure to achieve clinically increases, it is hard to find time and energy for academic pursuits. I know these pressures come from the hospital and not just the department, but it is still a challenge.
- Mentoring program is incredible.
- Professional development fund and return on grant overhead is very useful
- My interests are not in line with most of the efforts of the Department so I have had some specific mentoring from one Vice Chair and otherwise mentoring and support have been more along the lines of academic promotion, which is also quite helpful.
- Mostly -- I can find advice when I ask for it. I've never been offered a formal mentor for myself.
- Mentoring program, TOT, support for regional and national presentations and practice allowance all help support professional growth. There is also ample availability of advice for achieving promotion. and
- My discipline and interest area is rare within the Department resources, retreats and meetings are not relevant to my
  professional progression; but I do value and enjoy the relationships I have established with several colleagues in the
  Department.
- I feel that there is a lot of encouragement and opportunities, but little clarity on how to find the time to participate. It seems everything is in addition to our base work and professional growth and academic progress is "extra" and not a part of the work we have time allotted for.
- Has supported my international work financially, and willing to support me if I do more. Enthusiastic about my plans for the future, with offers tendered about various options.

## **Comments about Faculty Support**

- I know there is an education award with \$ attached but I don't know about "resources" for recognizing the others. they are recognized with awards etc in various venues but is that the resource to which you are referring?
- It would be nice if UMass as an institution recognized more of the achievements within the department. I feel the department does a good job of recognizing within the dept.
- Practice transformation leadership skills at the sites could be more actively supported across the Department.
- I haven't received or asked for fiscal resources from the department so I can't rightly answer these questions.
- The research team is OVERWHELMED. Judy needs more help at her level and not someone who she has to repeat her work. It is hard for the department to do meaningful research with only Judy. I think salaries are fair. I think we are not reaching our clinical goals because we have to go along with crazy meaningful use that the hospital supports. We should take stand as a department and say we are not going to pursue measures that have not been proven; we are going to ask for financial support to help our patients achieve personal goals that aim for wellness.
- I'm only aware of the awards given at annual dinner or graduation, not sure about others, and i am not aware that these include any financial component (they didn't when I received awards over the years, so if that is changed, that is interesting to know)
- Our clinical work is excellent; sometimes our greater clinical system (UMMHC) remains well behind our peers in the
  region. UMMHC provides "good enough" often, but even that, not always. i have found I am referring more patients
  away from the system to get appropriate care, and have considered the same for my personal/family's health.
- What the departmental resources actually ARE is a complete mystery. I only know what DOES get rewarded -sometimes with money, more often with awards (without money). Special funds for Phil Bolduc and Sara Shields were
  examples of excellence in clinical service and creativity in our system. But you have to REALLY stand out to get these.
- I don't really understand the question about "resources to recognize excellence in..." There are awards which may be sufficient for excellence in teaching, as I don't think that other rewards are expected. Bonuses for clinical productivity serve as a reward, but I see how hard it is for young faculty to earn that bonus (unless its a shared group bonus) and that is unfortunate. I don't know of any system in place for recognizing excellence in research, innovation, or administration/service.

#### **Comments about Mentoring**

• I have not been a part of finding a formal mentor but I have found my own within the department. I have also been discouraged by senior leadership and their role modeling. I think they sometimes role model that being too busy is a good thing. I also think that senior leadership needs to be leaders and not get petty about small things that happen in the department. A leader can move on. A leader can sit down with folks and look them in the eye and say there is more going on here - what is it. How will this part of our department get through this - rather than look for blame.

#### What are the major factors contributing to your Culture/Climate assessment rating (0-10)?

- Enjoy the people I work with, and feel supported with no significant micro management
- Dr. Lasser is very supportive and has put in place senior leadership who are encouraging and who promote growth and professional development.
- It feels as though expectations and what is valued of faculty/clinicians within the department is often in conflict leading to lack of clarity and makes overall job satisfaction difficult to attain.
- All of what I've said previously. Health climate, exceptional leadership.
- Things are improving with the addition of scribes and help with outreach which help to take the pressure off of providers and allow them to work at a more appropriate level
- It seems somewhat uneven as to investment in various aspects of the department and there seem to be both person hours/personal investment issues and other financial constraints to focus on innovation and professional growth
- The Department is comprised of a generally reasonable group of professionals who care about striving for excellence and at the same time, are friendly, decent human beings. This is a climate that encourages retention of faculty. There are opportunities for development to be had for those who pursue them.
- Seems that from time to time, some of our faculty colleagues function as the classic academic cowboys and cowgirls, going their own way and not integrating with the department--either that or I just don't know how their work contributes to the department. This means there can be missed opportunity for linkages as well as activity in directions that don't appear to advance the department's work. I understand the desire not to have divisions, but the lack of such means we're all quite autonomous, losing opportunity for synergy.
- There is tons of innovation and our residency is doing great. We are doing better and better at training the residents. I
  greatly admire many of my colleagues and feel privileged to work with them. There is just a lot of burnout among faculty
  who feel like they are expected to do too many things on their own time.
- Innovation and professional growth are strongly encouraged, but resources to support these innovations are not often available.
- Need more youth and female leadership. Need more creativity in promoting part time folks and women even if the
  school says no we need to change the school and show them that we can be the first to find new ways to promote
  women and not stay in the dark ages. Takes bold leadership. Our culture is not expansive enough for this currently.
- There is a fair amount of independence there is not enough support given for the "academic/scholarly" work that we are all expected to do--it still surprises me when in the course of one meeting we can have a discussion about how we need to do this kind of scholarly work, and then also a discussion about how there is no funding or offset to cover all the workshop/lecture teaching we're expected to do around the edges of clinical duties.
- This would be a 10 if it was not so hard to get anything done in this institution. The hoops one has to go through to move a process or program forward are frustrating and detract from one's overall joy of engaging in this work
- General supportive nature of the faculty
- Very supportive and accessible senior leadership with a desire to constantly raise the standards of the department in all areas
- I feel like there is a lot of inconsistencies in the message from the leadership of the department and this translates into inconsistencies and a sense of uncertainty at the site level -There is a communicated support of innovation but then significant restrictions when trying to role out changes -Things feel more stable than 2 years ago, but I think a lot of that is because I have gotten used to hearing conflicting messages -I recognize how challenging the balance is between being transparent and communicating and capturing some of the inherent variation and change that happens with leadership decisions but it is confusing to hear something at one point and then see the opposite happen down the road
- · Welcoming, interprofessional, committed to underserved
- Mentoring program has been useful to me to formalize my mentoring skills, and I know it has been important for various mentees I have talked to. The financial awards (chair's awards) have leant an atmosphere of potential growth and promise to a few people. It would be great if some of (health center) people's time could be sponsored each year for teaching on the campus; right now, hard to get a way to do that work and be paid for it. (See earlier questions/answers about challenges of teaching for health center faculty)

Very mixed, strong positives and strong detractors. Positives: terrific interesting colleagues, clear mission, diversity of
the department, efforts at connecting the diverse department (ie through retreats), support for different models of patient
care or practice. Detractors: dual system of governance (hospital vs department), slow decision-making, lack of ability
to just make decisions about factors that affect the day-to-day quality of our work, poor idea-sharing between sites
(though slightly improved over past ~2 years)

#### What is the most satisfying aspect of being a member of the Department of Family Medicine and Community Health?

- Knowing that I'm part of a department that cares about the underserved and working with my co workers
- I am strongly aligned with our mission. I feel personally supported. Respectful environment.
- The supportive environment and the many opportunities for growth.
- The diversity of the group of physicians that make up the department.
- Being a family physician is a great vocation and privilege. Being a member of this department adds excitement, challenge, and fellowship as we shape the development of a new generation of FPs.
- · My mentor is extremely helpful. I feel that the department gives me some freedom to achieve my goals
- Ability to collaborate and network with other faculty
- The mission aligns with my professional mission and I'm supported to be innovative.
- Being able to take care of my patients.
- Great colleagues
- Teaching medical and nursing students
- Opportunity to see a variety of patients.
- Flexibility and support in pursuing multiple goals over a range of disciplines
- Inspiring co-workers and ability to combine patient care with community work.
- · Colleagues who are dedicated, smart and what to improve things for patients and students
- Opportunities to collaborate among faculty dedicated to community health and care of vulnerable populations. Freedom to pursue areas of academic interest.
- Incredible colleagues. Meaningful work.
- I feel completely at home with the Department's mission and my fellow faculty members.
- Supportive colleagues
- The climate and culture. Dr. Lasser's leadership.
- The colleagues with whom I work and the department's desire to improve various population's health—especially vulnerable, marginalized groups.
- Working with amazing people like Lucy Candib, Rick Sacra, etc. Teaching the residents. Keeping current with my
  medical skills by teaching.
- Working with a majority of committed, bright individuals in providing quality patient centered medical care.
- Several aspects: The opportunity to continue to teach in the medical school. The opportunity to collaborate with others across clinical sites.
- All the great things that individuals do in so many ways to help others in education, practice, public health etc. I love the
  values of my colleagues.
- My colleagues the chance to teach and to serve the underserved communities
- Good team to work with, good support for growth 2. good environment with variety of professionals
- The opportunity to work with learners and care for patients in a setting that offers many opportunities for collaboration and support form colleagues.
- Being part of a group of professionals working to improve the health of the local population
- The faculty are great. Very mission driven.
- Collegiality
- Team work
- Fantastic colleagues at my own site and in the department.
- The fact that family medicine is the specialty that more often than not can be recognized for "doing the right thing" when it comes to caring for our population of patients
- Collegial relationships I have established with a few senior leaders in FMCH and the support they have provided to me
  in making critical connections to others in the school when my responsibilities require collaborations across
  Departments.
- Great colleagues and ability to remain engaged with teaching residents -It allows me to have variety in my work and this is important to me
- Our mission is congruent with my personal mission for providing health care to those at risk.
- Colleagues, educational programs, communication

- I like working with my colleagues and the opportunities I have to pursue my professional interests
- The support for my professional development.
- Working with interesting colleagues in a department who supports the mission of serving the underserved

### What is the most frustrating aspect of being a member of the Department of Family Medicine and Community Health?

- The way staffing is handled by the hospital and unions.
- Transparency in decision making about filling positions. I know this has made some progress. We are also considering succession planning now and I think we could be more transparent about that. Vice Chair education less supportive of my growth and his agenda usually seems to be more about the department than me (I know he needs to attend to the department's needs) but he is not someone I go to when I want to problem solve or am looking for advocacy even though education is my primary area of academic involvement. I do not feel he is transparent and decisions sometimes ultimately are not in line with what he communicates.
- Not enough time to reflect, do research and publish.
- Conflicting messages around patient care and expectations, targets and goals.
- It is a big department and it takes time to get things done. I can deal with that. The greatest frustration is being asked to do more and more educationally without compensation for the effort.
- I feel that the salaries and compensation should be higher.
- Lack of clarity between FHCW and FMCH
- The cut backs from a medical school which supposedly has a primary care mission. It seems to have shifted to basic science research.
- Feeling stretched thin, trying to keep up on paperwork/billing/documenting which does not leave as much room for patient care tasks.
- Getting adequate recognition
- Not being an MD, I don't feel that my career goals completely align with the direction of most of my peers.
- Support staff are overworked.
- Limited capacity to respond to challenging clinical issues (e.g. pain management)
- As a non salaried faculty member not having time to participate in department activities.
- As a newer faculty member I don't feel that I know enough about the dept and the resources (financial, non-financial)
  potentially available to me. Could there be a new faculty orientation specifically for our dept?
- Lack of effect ways to gel and make progress on good ideas
- When one has an area of interest that is outside the mainstream there are fewer opportunities for formal recognition.
- Too many competing demands and expectations beyond the core job duties. Too many after work hour meetings and
  gatherings that are expected even if optional. Spend way too much time at home on the EHR doing patient care for
  collaboration and notes, etc.
- There is nothing that is really frustrating me at the moment aside from a lack of sufficient sleep, which is of course partly my own doing. The department has been a wonderful inspiring force in my professional life since coming here in 2011.
- Expectations to teach but minimal support as RVU generation comes first
- The geographic spread of members of the Department
- Rather not say in a survey; I've let my Vice-Chair know what my frustrations are. As I gather, department leadership has no interest in (energy for?) addressing what has frustrated me for years.
- Neglecting my own family because the demands of my job spill over too much into my off time.
- The limitations of a budget to provide adequate support for clinical work. There are more demands all the time for continued productivity while adding tasks such as outreach, monitoring outcome measures, increasing documentation....it goes on and on. I don't feel it's the department as much as the general medical climate and institutional demands. But it all leads to significant frustration!
- Several aspects: The constant back-biting among both staff and faculty (it goes against the institution's efforts at civility). The lack of motivation among our administrative staff; fairly non-productive and no desire to change.
- Our leadership is not able to promote the same values the individuals in the department espouse. They are beholden to the hospital and the school. Need to break free and be rebels again.
- The dissonance between scholarly obligation and lack of compensation for teaching time not great communication regularly to those of us not in the central site
- Slow progress with innovation
- The complexity of our organization as noted above.
- There is not as much follow up and accountability associated with various initiatives as I would like. Also, communications can be frustrating, although often this isn't the department as much as the larger organization.

- The clinical service/operations is struggling to make change and do it quickly. Everything takes 4 times as long as it should to get done.
- Mismatch between rhetoric about practice transformation and reality
- Multiple "owners" of my clinical site department, hospital, medical group makes getting things done very difficult it
  impairs decision making, confuses the process for resolving issues or obtaining new equipment, and actually reduces
  resources because the varied parties assume the support will come from another party.
- Lack of respect and recognition by the school and medical center and even the world at large for the special character
  and role of family medicine as demonstrated by our constant scramble for resources be they for clinical care teaching or
  whatever
- Geography.
- Conflicting messages from leadership. Consistent message to do more with less
- We sometimes seem stuck in the 90's.
- Overcoming barriers to smooth working across sites, recognition and support to foster undergrad teaching at med school site for health center fac. Seems like only "some people" get to straddle by special arrangements (Olga, Tracy, person doing MCH)
- Amount of work expected of my given the percent time I am allowed
- The health care system. UMassMemorial health care system leadership does not seem to believe primary care is primary. Not surprising for a tertiary care center but disappointing at the state primary care missioned medical school. The health of our population will not improve until health is primary. Reducing ED boarders is a great objective but what patients really want more than moving through the ED quickly is not needing to be at the ED. We need to improve the support to primary care physicians so that patients have the comprehensive longitudinal continuity that reduces morbidity and cost while improving satisfaction for both patients and providers. The department leadership tries to be a voice for this but more needs to be demanded from the system.