Staff Engagement and Work Life Survey Items
Version 2: Nonexempt Staff

Instructions:
The following questions relate to your engagement with your work and your work experiences at Harvey Mudd College. Use the response scale below each question to indicate the response that most closely approximates your answer.

Your responses to this survey are confidential. The Office of Institutional Research and Effectiveness (OIRE) will analyze the results and will only report on results in ways that ensure the identity of individual staff and departments cannot be discerned.

Your participation in this survey is voluntary which means in addition to choosing whether to participate or not, you may choose not to answer any question you like and still complete the rest of the survey.

If you have questions about this survey, please contact AVP for Institutional Research and Effectiveness Laura Palucki Blake.

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SECTION ONE: JOB SATISFACTION

1. I am proud to work at HMC.
   (Strongly Agree; Agree; Neither Agree nor Disagree; Disagree; Strongly Disagree)

2. The work I do is valuable to HMC.
   (Strongly Agree; Agree; Neither Agree nor Disagree; Disagree; Strongly Disagree)

3. Overall, the type of work I do is rewarding to me.
   (Strongly Agree; Agree; Neither Agree nor Disagree; Disagree; Strongly Disagree)

4. My supervisor values my work.
   (Strongly Agree; Agree; Neither Agree nor Disagree; Disagree; Strongly Disagree)

5. My department has the staff needed to function well.
   (Strongly Agree; Agree; Neither Agree nor Disagree; Disagree; Strongly Disagree)

6. I have the resources I need to be effective in my job.
   (Strongly Agree; Agree; Neither Agree nor Disagree; Disagree; Strongly Disagree)

7. I derive satisfaction from my work at HMC.
   (Strongly Agree; Agree; Neither Agree nor Disagree; Disagree; Strongly Disagree)

8. Overall, I feel supported in my department.
   (Strongly Agree; Agree; Neither Agree nor Disagree; Disagree; Strongly Disagree)

9. Overall, I feel supported at HMC.
   (Strongly Agree; Agree; Neither Agree nor Disagree; Disagree; Strongly Disagree)
SECTION TWO: WORK LIFE

10. Has there been a change in your workload in the past 12 months?
   (yes; no; I don’t know)

IF NO, PROCEED TO Q11

IF YES

10a Has your workload:
   (Increased; Decreased)

   IF INCREASED, participant sees the following:
   10b. Please indicate if any of the following have contributed to the increase in your workload (check all that apply):

   Additional job duties
   Change of duties
   Volume of work
   Intensity (speed-up) of work
   Lack of resources (e.g. time, funds, people)
   New technology (e.g., Workday, Kronos, Google, Sharepoint)
   Staff reductions
   Training other employees
   Other (please specify) ________

   IF DECREASED participant sees the following:
   10b Please indicate if any of the following have contributed to the decrease in your workload (check all that apply):

   Fewer job duties
   Restructuring of duties
   Volume of work
   Intensity (slow-down) of work
   Increase in resources (e.g., time, funds, people)
   New technology (e.g., Workday, Kronos, Google, Sharepoint)
   Additional staff
   Additional training
   Other (please specify) ________

11. In the past 12 months have you worked more than 40 hours a week?
   (yes; no; I don’t know)

   IF YES, participant sees the following
   11a. How often do you work more than 40 hours a week?
   (Very Often; Often; Sometimes; Rarely; Never)

   IF YES to 11, participant sees the following
   11b I welcome the opportunity to work more than 40 hours a week.
   (Strongly Agree; Agree; Neither Agree nor Disagree; Disagree; Strongly Disagree)

12. I feel empowered to express concerns in my department.
   (Very Often; Often; Sometimes; Rarely; Never)
13. I feel empowered to make suggestions to improve my department.  
   (Very Often; Often; Sometimes; Rarely; Never)

14. I have a healthy balance between my personal life and my professional life.  
   (Very Often; Often; Sometimes; Rarely; Never)

15. When I take a day off, I can disconnect from my work responsibilities.  
   (Very Often; Often; Sometimes; Rarely; Never)

16. The demands of my work-related activities interfere with my personal life.  
   (Very Often; Often; Sometimes; Rarely; Never)

17. The demands of my personal life interfere with my work-related activities.  
   (Very Often; Often; Sometimes; Rarely; Never)

18. I have adequate time for self-care (e.g., sleep, medical appointments, exercise, healthy diet).  
   (Very Often; Often; Sometimes; Rarely; Never)

19. I have an opportunity to have a say in decisions that impact me.  
   (Very Often; Often; Sometimes; Rarely; Never)

20. My work environment is inclusive and welcoming.  
   (Very Often; Often; Sometimes; Rarely; Never)

21. The day-to-day work demands in my department leave me with time to focus on long-term projects/bigger picture issues in my department.  
   (Very Often; Often; Sometimes; Rarely; Never)

22. I receive actionable feedback from my supervisor on the relationship between my contributions and the bigger picture in the department.  
   (Strongly Agree; Agree; Neither Agree nor Disagree; Disagree; Strongly Disagree)

23. I have input into my goals and the goals of my department.  
   (Strongly Agree; Agree; Neither Agree nor Disagree; Disagree; Strongly Disagree)

24. Members of my department communicate openly.  
   (Strongly Agree; Agree; Neither Agree nor Disagree; Disagree; Strongly Disagree)
SECTION THREE: DEMOGRAPHICS
The following questions ask for a bit of information about you. As a reminder all your responses to this survey are confidential and will not be shared in any way that identifies you. We use this information to provide additional context for the results.

1. Your Division:
   a. Academic Affairs/Dean of Faculty
   b. Admission and Financial Aid
   c. Advancement
   d. Business Administration and Finance
   e. Computing and Information Services
   f. Student Affairs/Dean of Students
   g. Other (please specify) ___________________________________________

2. Your Department (fill in) ____________________________________________

3. Your Gender
   a. Man
   b. Woman
   c. A gender identity not listed (please specify) _______________________
   d. I prefer not to respond

4. Your race/ethnicity (check all that apply)
   a. American Indian or Alaska Native
   b. Asian
   c. Black or African American
   d. Hispanic or Latinx
   e. Middle Eastern or North African
   f. Native Hawaiian or other Pacific Islander
   g. White
   h. A race or ethnicity not listed (please specify) _______________________
   i. I prefer not to respond

5. How many years have you worked in your current position at HMC?
   (drop down: less than 1; 1; 2; 3; 4; 5….30 or more)

//end