**SUPPLEMENTAL OPM FEDERAL EMPLOYEE VIEWPOINT SURVEY**

[Welcome letter]

**General Survey Instructions**

**To navigate through the survey, use the buttons located at the bottom of each survey page:**

* **Back takes you to the previous page in the survey. Do NOT use your browser's "Back" button at the top of the screen**
* **Next takes you to the next page in the survey.**

**On the last page of the survey, click the Finish button to submit your responses. Once you submit your responses, you will not be able to access your survey again for any reason.**

**Privacy Act Statement**

Pursuant to 5 U.S.C. § 552a(e)(3), this Privacy Act Statement informs you of why OPM is requesting the information from you.

**Authority:**

OPM is authorized to collect the information requested pursuant to 5 U.S.C. § 4702 – Research Programs.

**Purpose:**

OPM is requesting this information to improve methods in Federal personnel management, workforce effectiveness, and/or agency effectiveness. OPM will use this information to evaluate employee perceptions about the workplace and identify strategies to help improve the work environment.

**Routine Uses:**

In any public release of survey results, no data will be disclosed that could be used to match your responses with your identity. The information requested may be shared externally as a “routine use” as specified in the system of records notice associated with this collection of information, OPM GOVT-6, Personnel Research and Test Validation Records, [OPM GOVT-6](https://www.opm.gov/information-management/privacy-policy/sorn/opm-sorn-govt-6-personnel-research-and-test-validation-records.pdf).

**Consequences of Failure to Provide Information:**

Providing this information is completely voluntary and there is no penalty if you choose not to respond. However, maximum participation is encouraged so that the data will be complete and representative.

**Public Burden Statement**

We think providing this information takes an average of 15 minutes per respondent to complete, including the time for reviewing instructions, getting the needed data, and reviewing the completed survey. Send comments regarding our estimate or any other aspect of this survey, including suggestions for reducing completion time, to the Office of Personnel Management (OPM), Reports and Forms Officer, Paperwork Reduction Project (3206-0252), Washington, D.C. 20415. The OMB number 3206-0252 is currently valid. OPM may not collect this information, and you are not required to respond, unless this number is displayed.

**OPM Supplemental FEVS Definitions**

|  |  |
| --- | --- |
| **Key Terms** | **Definitions** |
| **Senior Leaders** | The heads of departments/agencies and their immediate leadership team responsible for directing the policies and priorities of the department/agency. May hold either a political or career appointment and typically a member of the Senior Executive Service or equivalent. |
| **Managers** | Those in management positions who typically supervise one or more supervisors. |
| **Supervisors** | First-line supervisors typically responsible for employees' performance appraisals and leave approval.  |
| **Non-supervisor** | Anyone who does not have supervisory responsibilities. |
| **Telework** | Telework means working at a location other than your normal work site during your regular work hours (excludes travel). |
| **Alternative Work Schedule** | This refers to a Compressed Work Schedule (a fixed work schedule under which a full-time employee completes an 80-hour biweekly work requirement in less than 10 work days) or Flexible Work Schedule (a work schedule that allows an employee to determine his or her own schedule within the limits set by the agency). |
| **Work Unit** | This is your immediate work unit headed by your immediate supervisor. |
| **Organization** | This is your agency, office, or division. Please respond to these questions based on the level in your organization that is appropriate for the content of the question. Depending on how your organization is structured, this could either be one or more levels above your own. |

 **My Work Experience**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |
| 1. I am given a real opportunity to improve my skills in my organization. |  |  |  |  |  |
| 2. I have enough information to do my job well. |  |  |  |  |  |
| 3. I feel encouraged to come up with new and better ways of doing things. |  |  |  |  |  |
| 4. My work gives me a feeling of personal accomplishment. |  |  |  |  |  |
| 5. I like the kind of work I do. |  |  |  |  |  |
| 6. I know what is expected of me on the job. |  |  |  |  |  |
| 7. When needed I am willing to put in the extra effort to get a job done. |  |  |  |  |  |
| 8. I am constantly looking for ways to do my job better. |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree | Do Not Know |
| 9. I have sufficient resources (for example, people, materials, budget) to get my job done. |  |  |  |  |  |  |
| 10. My workload is reasonable. |  |  |  |  |  |  |
| 11. My talents are used well in the workplace. |  |  |  |  |  |  |
| 12. I know how my work relates to the agency's goals. |  |  |  |  |  |  |
| 13. The work I do is important. |  |  |  |  |  |  |
| 14. Physical conditions (for example, noise level, temperature, lighting, cleanliness in the workplace) allow employees to perform their jobs well. |  |  |  |  |  |  |
| 15. My performance appraisal is a fair reflection of my performance. |  |  |  |  |  |  |
| 16. I am held accountable for achieving results. |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree | Do Not Know |
| 17. I can disclose a suspected violation of any law, rule or regulation without fear of reprisal. |  |  |  |  |  |  |
| 18. My training needs are assessed. |  |  |  |  |  |  |

19. In my most recent performance appraisal, I understood what I had to do to be rated at different performance levels (for example, Fully Successful, Outstanding).

  Strongly Agree

  Agree

  Neither Agree nor Disagree

  Disagree

  Strongly Disagree

  No Basis to Judge

**My Work Unit**

20. The people I work with cooperate to get the job done.

  Strongly Agree

  Agree

  Neither Agree nor Disagree

  Disagree

  Strongly Disagree

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree | Do Not Know |
| 21. My work unit is able to recruit people with the right skills. |  |  |  |  |  |  |
| 22. Promotions in my work unit are based on merit. |  |  |  |  |  |  |
| 23. In my work unit, steps are taken to deal with a poor performer who cannot or will not improve. |  |  |  |  |  |  |
| 24. In my work unit, differences in performance are recognized in a meaningful way. |  |  |  |  |  |  |
|  | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree | Do Not Know |
| 25. Awards in my work unit depend on how well employees perform their jobs. |  |  |  |  |  |  |
| 26. Employees in my work unit share job knowledge with each other. |  |  |  |  |  |  |
| 27. The skill level in my work unit has improved in the past year. |  |  |  |  |  |  |

28. How would you rate the overall quality of work done by your work unit?

  Very Good

  Good

  Fair

  Poor

  Very Poor

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree | Do Not Know |
| 29. My work unit has the job-relevant knowledge and skills necessary to accomplish organizational goals. |  |  |  |  |  |  |

**My Agency**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree | Do Not Know |
| 30. Employees have a feeling of personal empowerment with respect to work processes. |  |  |  |  |  |  |
| 31. Employees are recognized for providing high quality products and services. |  |  |  |  |  |  |
| 32. Creativity and innovation are rewarded. |  |  |  |  |  |  |
| 33. Pay raises depend on how well employees perform their jobs. |  |  |  |  |  |  |
| 34. Policies and programs promote diversity in the workplace (for example, recruiting minorities and women, training in awareness of diversity issues, mentoring). |  |  |  |  |  |  |
|  | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree | Do Not Know |
| 35. Employees are protected from health and safety hazards on the job. |  |  |  |  |  |  |
| 36. My organization has prepared employees for potential security threats. |  |  |  |  |  |  |
| 37. Arbitrary action, personal favoritism and coercion for partisan political purposes are not tolerated. |  |  |  |  |  |  |
| 38. Prohibited Personnel Practices (for example, illegally discriminating for or against any employee/applicant, obstructing a person's right to compete for employment, knowingly violating veterans' preference requirements) are not tolerated. |  |  |  |  |  |  |
| 39. My agency is successful at accomplishing its mission. |  |  |  |  |  |  |

40. I recommend my organization as a good place to work.

  Strongly Agree

  Agree

  Neither Agree nor Disagree

  Disagree

  Strongly Disagree

41. I believe the results of this survey will be used to make my agency a better place to work.

  Strongly Agree

  Agree

  Neither Agree nor Disagree

  Disagree

  Strongly Disagree

  Do Not Know

**My Supervisor**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree | Do Not Know |
| 42. My supervisor supports my need to balance work and other life issues. |  |  |  |  |  |  |
| 43. My supervisor provides me with opportunities to demonstrate my leadership skills. |  |  |  |  |  |  |
| 44. Discussions with my supervisor about my performance are worthwhile. |  |  |  |  |  |  |
| 45. My supervisor is committed to a workforce representative of all segments of society. |  |  |  |  |  |  |
| 46. My supervisor provides me with constructive suggestions to improve my job performance. |  |  |  |  |  |  |
| 47. Supervisors in my work unit support employee development. |  |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |
| 48. My supervisor listens to what I have to say. |  |  |  |  |  |
| 49. My supervisor treats me with respect. |  |  |  |  |  |
| 50. In the last six months, my supervisor has talked with me about my performance. |  |  |  |  |  |
| 51. I have trust and confidence in my supervisor. |  |  |  |  |  |

52. Overall, how good a job do you feel is being done by your immediate supervisor?

  Very Good

  Good

  Fair

  Poor

  Very Poor

**Leadership**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree | Do Not Know |
| 53. In my organization, senior leaders generate high levels of motivation and commitment in the workforce. |  |  |  |  |  |  |
| 54. My organization's senior leaders maintain high standards of honesty and integrity. |  |  |  |  |  |  |
| 55. Supervisors work well with employees of different backgrounds. |  |  |  |  |  |  |
| 56. Managers communicate the goals and priorities of the organization. |  |  |  |  |  |  |
| 57. Managers review and evaluate the organization's progress toward meeting its goals and objectives. |  |  |  |  |  |  |
| 58. Managers promote communication among different work units (for example, about projects, goals, needed resources). |  |  |  |  |  |  |
| 59. Managers support collaboration across work units to accomplish work objectives. |  |  |  |  |  |  |

60. Overall, how good a job do you feel is being done by the manager directly above your immediate supervisor?

  Very Good

  Good

  Fair

  Poor

  Very Poor

  Do Not Know

61. I have a high level of respect for my organization's senior leaders.

  Strongly Agree

  Agree

  Neither Agree nor Disagree

  Disagree

  Strongly Disagree

  Do Not Know

62. Senior leaders demonstrate support for Work/Life programs.

  Strongly Agree

  Agree

  Neither Agree nor Disagree

  Disagree

  Strongly Disagree

  Do Not Know

**My Satisfaction**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very Satisfied | Satisfied | Neither Satisfied nor Dissatisfied | Dissatisfied | Very Dissatisfied |
| 63. How satisfied are you with your involvement in decisions that affect your work? |  |  |  |  |  |
| 64. How satisfied are you with the information you receive from management on what's going on in your organization? |  |  |  |  |  |
| 65. How satisfied are you with the recognition you receive for doing a good job? |  |  |  |  |  |
| 66. How satisfied are you with the policies and practices of your senior leaders? |  |  |  |  |  |
| 67. How satisfied are you with your opportunity to get a better job in your organization? |  |  |  |  |  |
| 68. How satisfied are you with the training you receive for your present job? |  |  |  |  |  |
| 69. Considering everything, how satisfied are you with your job? |  |  |  |  |  |
| 70. Considering everything, how satisfied are you with your pay? |  |  |  |  |  |
| 71. Considering everything, how satisfied are you with your organization? |  |  |  |  |  |

**Performance**

72. Currently, in my work unit poor performers usually:

  Remain in the work group and improve their performance over time

  Remain in the work group and continue to underperform

  Leave the work group - removed or transferred

  Leave the work group - quit

  There are no poor performers in my work group

  Do not know

**Work/Life**

73. Please select the response below that BEST describes your current teleworking situation.

  I telework very infrequently, on an unscheduled or short-term basis

  I telework, but only about 1 or 2 days per month

  I telework 1 or 2 days per week

  I telework 3 or 4 days per week

  I telework every work day

  I do not telework because I have to be physically present on the job (e.g., Law Enforcement Officers, Park Rangers, Security Personnel).

  I do not telework because I have technical issues (e.g., connectivity, inadequate equipment) that prevent me from teleworking.

 I do not telework because I did not receive approval to do so, even though I have the kind of job where I can telework.

  I do not telework because I choose not to telework.

74. How satisfied are you with the Telework program in your agency?

 Very satisfied

 Satisfied

 Neither Satisfied nor Dissatisfied

 Dissatisfied

 Very Dissatisfied

 I choose not to participate in this program

 This program is not available to me

 I am unaware of this program

75. Which of the following Work-Life programs have you participated in or used at your agency within the last 12 months? (Mark all that apply):

 Alternative Work Schedules (for example, compressed work schedule, flexible work schedule)

 Health and Wellness Programs (for example, onsite exercise, flu vaccination, medical screening, CPR training, Health and wellness fair)

 Employee Assistance Program – EAP (for example, short-term counseling, referral services, legal services, information services)

 Child Care Programs (for example, child care center, parenting classes and support groups, back-up care, subsidy, flexible spending account)

 Elder Care Programs (for example, elder/adult care, support groups, resources)

None listed above

**How satisfied are you with the following Work/Life programs in your agency?**

75. Alternative Work Schedules (for example, compressed work schedule, flexible work schedule)

 Very satisfied

 Satisfied

 Neither Satisfied nor Dissatisfied

 Dissatisfied

 Very Dissatisfied

 I choose not to participate in this program

 This program is not available to me

 I am unaware of this program

76. Health and Wellness Programs (for example, onsite exercise, flu vaccination, medical screening, CPR training, health and wellness fair)

 Very satisfied

 Satisfied

 Neither Satisfied nor Dissatisfied

 Dissatisfied

 Very Dissatisfied

 I choose not to participate in this program

 This program is not available to me

 I am unaware of this program

77. Employee Assistance Program - EAP (for example, short-term counseling, referral services, legal services, information services)

 Very satisfied

 Satisfied

 Neither Satisfied nor Dissatisfied

 Dissatisfied

 Very Dissatisfied

 I choose not to participate in this program

 This program is not available to me

 I am unaware of this program

78. Child Care Programs (for example, child care center, parenting classes and support groups, back-up care, subsidy, flexible spending account)

 Very satisfied

 Satisfied

 Neither Satisfied nor Dissatisfied

 Dissatisfied

 Very Dissatisfied

 I choose not to participate in this program

 This program is not available to me

 I am unaware of this program

79. Elder Care Programs (for example, elder/adult care, support groups, resources)

 Very satisfied

 Satisfied

 Neither Satisfied nor Dissatisfied

 Dissatisfied

 Very Dissatisfied

 I choose not to participate in this program

 This program is not available to me

 I am unaware of this program

**My Employment Demographics**

80. Where do you work?

  Headquarters

  Field

81. What is your supervisory status?

  Senior Leader:  You are the head of a department/agency or a member of the immediate leadership team responsible for directing the policies and priorities of the department/agency.  May hold either a political or career appointment, and typically is a member of the Senior Executive Service or equivalent.

 Manager:  You are in a management position and supervise one or more supervisors.

 Supervisor:  You are a first-line supervisor who is responsible for employees' performance appraisals and leave approval.

  Team Leader: You are not an official supervisor; you provide employees with day-to-day guidance in work projects, but do not have supervisory responsibilities or conduct performance appraisals.

 Non-Supervisor:  You do not supervise other employees.

 82. What is your pay category/grade?

  Federal Wage System (for example, WB, WD, WG, WL, WM, WS, WY)

  GS 1-6

  GS 7-12

  GS 13-15

  Senior Executive Service

  Senior Level (SL) or Scientific or Professional (ST)

  Other

83. What is your US military service status?

  No Prior Military Service

  Currently in National Guard or Reserves

  Retired

  Separated or Discharged

84. How long have you been with the Federal Government (excluding military service)?

  Less than 1 year

  1 to 3 years

  4 to 5 years

  6 to 10 years

  11 to 14 years

  15 to 20 years

  More than 20 years

85. How long have you been with your current agency (for example, Department of Justice, Environmental Protection Agency)?

  Less than 1 year

  1 to 3 years

  4 to 5 years

  6 to 10 years

  11 to 14 years

  15 to 20 years

  More than 20 years

86. Are you considering leaving your organization within the next year, and if so, why?

  No

  Yes, to retire

  Yes, to take another job within the Federal Government

  Yes, to take another job outside the Federal Government

  Yes, other

87. I am planning to retire:

  Within one year

  Between one and three years

  Between three and five years

  Five or more years

**My Employment Demographics**

88. Are you of Hispanic, Latino, or Spanish origin?

  Yes

  No

89. Please select the racial category or categories with which you most closely identify (mark as many as apply).

  American Indian or Alaska Native

  Asian

  Black or African American

  Native Hawaiian or Other Pacific Islander

  White

90. What is your age group?

  25 and under

  26-29 years old

  30-39 years old

  40-49 years old

  50-59 years old

  60 years or older

91. What is the highest degree or level of education you have completed?

  Less than High School

  High School Diploma/GED or equivalent

  Trade or Technical Certificate

  Some College (no degree)

  Associate's Degree (e.g., AA, AS)

  Bachelor's Degree (e.g., BA, BS)

  Master's Degree (e.g., MA, MS, MBA)

  Doctoral/Professional Degree (e.g., Ph.D., MD, JD)

92. Are you an individual with a disability?

  Yes

  No

93. Are you:

  Male

  Female

94.  Are you transgender?

  No

  Yes

95.  Which one of the following do you consider yourself to be?

  Straight, that is not gay or lesbian

  Gay or Lesbian

  Bisexual

  Something else