

[Insert organisation name]



WHERE YOU WORK

Please select where you work in the [insert organisation name] from the categories listed below (select one group only).

In selecting where you work in the [insert organisation name], please think of the current position in which you spend most of your time.

WHERE YOU HAVE WORKED

Your organisation is the Government department or public service office you work for in your current job (e.g. Department of Transport and Main Roads for staff employed in RoadTek, Public Trust Office for staff working for the Public Trust Office).

Q1 How long have you been employed in your current organisation? [Including under different organisation name or administrative arrangements]

- ☐₁ Less than a year
- ☐₂ 1 year to less than 2 years
- ☐₃ 2 years to less than 4 years
- ☐₄ 4 years to less than 6 years
- ☐₅ 6 years to less than 10 years
- ☐₆ 10 years or more
- ☐₇ Don't know

Q2 How many organisations in the Queensland Public Sector, including your current one, have you worked for?

[Changes in organisation name or administrative arrangements are not counted as separate organisations.]

Q3 How many years of your working life have you been employed in: [Please estimate]

	None	Less than 1 year	1 to less than 2 years	2 to less than 4 years	4 to less than 6 years	6 to less than 10 years	10 years or more
a. The Queensland Public Sector		<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
b. Other Government sectors (local, other states, federal, overseas)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
c. Other non-Government sectors (e.g. not for profit, academia, voluntary organisations)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇
d. The private sector (including as an employer or self employed)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₇

YOUR BACKGROUND

Please complete the following background information details. This information allows us to determine the extent to which the people who complete the survey reflect the total workforce. It also allows us to explore variations in employee perceptions among different demographic and employee groups. This information will not be used in any way that would allow anyone to identify you or to attribute any survey question answers to you.

Q4 What is your gender?

- ☐₁ Female
- ☐₂ Male

Q5 What is your age?

- ☐₁ 19 years or under
- ☐₂ 20 – 24 years
- ☐₃ 25 – 29 years
- ☐₄ 30 – 34 years
- ☐₅ 35 – 39 years
- ☐₆ 40 – 44 years
- ☐₇ 45 – 49 years
- ☐₈ 50 – 54 years
- ☐₉ 55 – 59 years
- ☐₁₀ 60 – 64 years
- ☐₁₁ 65 and over

Q6 Do you identify yourself as?

- ☐₁ Aboriginal
- ☐₂ Torres Strait Islander
- ☐₃ Aboriginal and Torres Strait Islander
- ☐₄ None of the above

Q7 Do you have an ongoing disability*?

- ☐₁ Yes
- ☐₂ No

** For the purpose of this survey, a person with a disability is a person with a long-term health condition that leads to one or more limitations, restrictions or impairments that lasted or is likely to last for 6 months or more. Long-term health conditions can be in these areas: Physical, Sensory (hearing, speech or vision) which cannot be corrected by appropriate aids such as hearing aids or glasses, Intellectual or Learning, and Psychiatric.*

YOUR BACKGROUND continued**Q8 In which country were you born?**

- ☐ ₁ Australia
- ☐ ₂ Overseas in a country where English is a primary language
- ☐ ₃ Overseas in a country where English is not a primary language

Q9 What is your first language?

- ☐ ₁ English
- ☐ ₂ Another language other than English

Q10 Are you a care giver for a child under the age of 15 or another person in need of care?

- ☐ ₁ Yes, I am the primary* care giver for at least one person
- ☐ ₂ Yes, I share the primary* care giver role
- ☐ ₃ Yes, but I am not a primary* care giver
- ☐ ₄ No

* A primary care giver is a person who has the main responsibility for providing care for a person.

Q11 What is the highest level of formal qualification you have completed?

- ☐ ₁ Less than year 12 or equivalent
- ☐ ₂ Year 12 or equivalent (Senior certificate/QCE/HSC/Leaving certificate)
- ☐ ₃ Certificate level including trade
- ☐ ₄ Diploma/ Advanced Diploma/ Associate degree
- ☐ ₅ Bachelors degree (including with Honours)
- ☐ ₆ Graduate Certificate or Diploma
- ☐ ₇ Masters degree
- ☐ ₈ PhD or Higher Doctorate
- ☐ ₉ Other

YOUR EMPLOYMENT

Q12 What is your employment status? [Your employment status relates to your substantive position in the Queensland Public Sector.]

- ☐₁ Permanent
- ☐₂ Temporary
- ☐₃ Contractor engaged and paid through a third party (e.g. recruitment agency)
- ☐₄ Casual
- ☐₅ CEO/SES/S122 or similar contract

The following questions are about your **current position** in the Queensland Public Sector. Your current position is the position you are currently performing in (not necessarily your substantive position). If you have more than one current position with the Queensland Public Sector, please respond in relation to your **main current position**. Your main current position is the position where you spend most of your working time in.

Q13 How long have you been in your current position?

- ☐₁ Less than a year
- ☐₂ 1 year to less than 2 years
- ☐₃ 2 years to less than 4 years
- ☐₄ 4 years to less than 6 years
- ☐₅ 6 years or more

Q14 On what basis are you employed in your current position?

- ☐₁ Full-time basis
- ☐₂ Part-time basis

Q15 In your current position, are you the manager of one or more employees?

- ☐₁ Yes
- ☐₂ No (*Go to Q17*)

Q16 In your current position, do you manage other managers?

- ☐₁ Yes
- ☐₂ No

YOUR EMPLOYMENT continued

Q17 In your current position, which one of the following best describes the type of work you do?

[The type of work that occupies the largest amount of your work time. If you manage employees, please indicate the main type of work that best describes the work of the employees you manage.]

- ☐ ₁ Service delivery involving direct contact with the public (e.g. teaching, nursing, customer/counter service, prison officer, police officer)
- ☐ ₂ Other service delivery work (not involving face-to-face contact with the public but critical to the delivery of services (e.g. maintenance, technical support, catering, cleaning, road works)
- ☐ ₃ Research
- ☐ ₄ Policy
- ☐ ₅ Program design and/or management
- ☐ ₆ Exercising regulatory authority (e.g. setting of and compliance with statutory standards, professional registration, legal enforcement)
- ☐ ₇ Human Resources
- ☐ ₈ Finances/accounting
- ☐ ₉ Information and communications technology (ICT)
- ☐ ₁₀ Procurement
- ☐ ₁₁ Other corporate (including property and facility management, legal, communications/media, information management, including mail services, records management; ministerial and parliamentary processes, audit services and corporate planning)
- ☐ ₁₂ Administrative support/clerical (e.g. executive/personal assistant, receptionist)
- ☐ ₁₃ Other, please specify _____
- ☐ ₁₄ Don't know

Q18 What is the postcode of your workplace? [If you work in more than one location, select the primary or 'base' location.]

YOUR EMPLOYMENT continued

Q19 Do you currently use any of the following flexible work options? [Select all that apply]

For definitions on the terms below click [here](#)

- ☐ ₁ Part time work
- ☐ ₂ Part-year work/annualised hours
- ☐ ₃ Job sharing
- ☐ ₄ Compressed work hours
- ☐ ₅ Flexible work hours/shifts
- ☐ ₆ Term-time working
- ☐ ₇ Casual/on call
- ☐ ₈ Telecommuting
- ☐ ₉ Hot desks
- ☐ ₁₀ Purchased leave/extended leave/deferred salary schemes
- ☐ ₁₁ Leave at half pay
- ☐ ₁₂ Other, please specify _____
- ☐ ₁₃ None of the above

Q19a Have you made a request for a flexible work arrangement over the past 12 months?

- ☐ ₁ Yes, I requested flexibility (**Go to Q20**)
- ☐ ₂ No, I have not made a request but **I am content** with my current arrangements (**Go to Q20**)
- ☐ ₃ No, I have not made a request but **I am not content** with my current arrangements (**Go to Q19b**)

Q19b Why haven't you made a request to change your work arrangements? [Select all that apply]

- ☐ ₁ I didn't feel I had the right to
- ☐ ₂ I felt it would limit my career
- ☐ ₃ I felt it would limit my access to training and development
- ☐ ₄ I feel flexibility is not possible in my current job
- ☐ ₅ Flexible working is frowned upon/not supported by my workplace culture
- ☐ ₆ I was concerned that it may negatively impact my team
- ☐ ₇ I didn't feel confident presenting my case or negotiating arrangements with my manager
- ☐ ₈ I feel the technology I currently have access to does not support flexible working
- ☐ ₉ I don't feel confident in my manager's ability to manage staff working flexibly

YOUR EMPLOYMENT continued**Q20** In your current position, what is your annual salary before tax?[Convert to full-time equivalent if part-time or on a purchased leave arrangement.]

- | | |
|-----------------------------|---------------------|
| <input type="checkbox"/> 1 | \$29,999 or less |
| <input type="checkbox"/> 2 | \$30,000 - 39,999 |
| <input type="checkbox"/> 3 | \$40,000 - 49,999 |
| <input type="checkbox"/> 4 | \$50,000 - 59,999 |
| <input type="checkbox"/> 5 | \$60,000 - 69,999 |
| <input type="checkbox"/> 6 | \$70,000 - 79,999 |
| <input type="checkbox"/> 7 | \$80,000 - 89,999 |
| <input type="checkbox"/> 8 | \$90,000 - 99,999 |
| <input type="checkbox"/> 9 | \$100,000 - 109,999 |
| <input type="checkbox"/> 10 | \$110,000 - 119,999 |
| <input type="checkbox"/> 11 | \$120,000 - 149,999 |
| <input type="checkbox"/> 12 | \$150,000 or above |

YOUR ROLE**Q21** Please indicate the extent to which you agree or disagree with each statement below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a. I understand what is expected of me to do well in my job	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. I understand how my work contributes to my organisation's objectives	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

YOUR WORK

Q22 Please indicate the extent to which you agree or disagree with each statement about your work below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a. I have a choice in deciding how I do my work	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. I have the tools I need to do my job effectively	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. I get the information I need to do my job well	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. I have the authority necessary to do my job effectively	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. My job gives me opportunities to utilise my skills	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f. I enjoy the work in my current job	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
g. My job gives me a feeling of personal accomplishment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

Q23 Please indicate the extent to which you agree or disagree with each statement about your work below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a. I am overloaded with work	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. I feel burned out by my work	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. I feel my job is secure	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. There is too much 'red tape' in my work (e.g. Regulatory or administrative processes)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. My work has a negative impact on my health	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

YOUR WORKGROUP

Your workgroup is the group or team where you spend most of your time. If you are a manager, please think about the people you manage.

Your customers are the persons you provide advice or service to, whether internal or external to the Queensland Public Sector (e.g. clients, customers, stakeholders, members of the community).

Your organisation is the Government department or public service office you work for in your current job (e.g. Department of Transport and Main Roads for staff employed in RoadTek, Public Trust Office for staff working for the Public Trust Office).

Q24 Please indicate the extent to which you agree or disagree with each statement below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree	NA
a. People in my workgroup treat each other with respect	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	
b. I receive help and support from other people in my workgroup	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	
c. People in my workgroup are honest, open and transparent in their dealings	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	
d. People in my workgroup use their time and resources efficiently	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	
e. People in my workgroup treat customers with respect	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	
f. People in my workgroup are committed to delivering excellent service to customers	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	
g. People in my workgroup do their jobs effectively	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	
h. People in my workgroup are committed to workplace safety	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	
i. People in my workgroup work effectively with other workgroups in my organisation to deliver services to our customers	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₉₉ *

* Select the NA option if your workgroup has not worked with other workgroups in your organisation.

YOUR WORKPLACE

Your workplace is the place where you work, such as a police station or office location as well as the places you visit as part of your work.

Q25 Please indicate the extent to which you agree or disagree with each statement below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a. My workplace has an inclusive culture where diversity is valued and respected	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. My workplace culture supports people to achieve a good work/life balance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. There is adequate focus on workplace safety at my workplace	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. Approval processes at my workplace are excessive	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. Disruptions and/or noise at my workplace make it hard to get things done	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f. Performance is assessed and rewarded fairly in my workplace	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
g. I am confident that poor performance will be appropriately addressed in my workplace	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
h. People are treated fairly and consistently in my workplace	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
i. People take responsibility for their decisions and actions in my workplace	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

Q26 Please indicate the extent to which you agree or disagree with the following statement about workplace change in the past 12 months.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a. My workplace has undergone significant change in the past 12 months	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

IMPROVING WORK PRACTICES

Q27 Please indicate the extent to which you agree or disagree with each statement below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a. I get the opportunity to develop new and better ways of doing my job	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. I am encouraged to make suggestions about improving work processes and/or services	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. Management is willing to act on suggestions to improve how things are done	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. My workgroup uses research and expertise to identify better practice	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. My workgroup always tries to improve its performance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f. My organisation is open to new ideas	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

YOUR PERFORMANCE ASSESSMENT AND DEVELOPMENT

Q28 Please further indicate the extent to which you agree or disagree with each statement below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree	NA*
a. I receive useful feedback on my performance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	
b. My performance is assessed against clear criteria	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	
c. In my organisation, there are opportunities for me to develop my skills and knowledge	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	
d. I am encouraged to pursue developmental opportunities in other workplaces	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	
e. I am able to access relevant learning and development opportunities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	
f. Learning and development activities I have completed in the past 12 months have helped to improve my performance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99*
g. I am satisfied with the opportunities available for career development	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	
h. I have had productive conversations with my manager on my performance in the past 12 months	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	
i. I develop new knowledge and skills through undertaking tasks at work	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	

* Select the NA option if you have not completed any learning or development activities in the past 12 months.

YOUR MANAGER

Your manager is the person you usually report to.

Q29 Please indicate the extent to which you agree or disagree with each statement below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a. My manager treats employees with dignity and respect	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. My manager listens to what I have to say	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. My manager keeps me informed about what's going on	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. My manager understands my work	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. My manager creates a shared sense of purpose	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f. My manager demonstrates honesty and integrity	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
g. My manager draws the best out of me	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

If Q20<11 Go to Q30

YOUR MANAGER continued

Q29_2 To what extent do you agree or disagree with the following statements about your manager

For more detail on the below attributes click [here](#)

My manager	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a. Leads strategically with vision	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. Navigates complex, ambiguous and political environments	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. Leads change with agility	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. Operates across boundaries	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. Engages with ideas, innovation and risk	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f. Manages organisational performance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
g. Manages internal and external relationships	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
h. Builds organisational capability	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
i. Inspires individual and team commitment in the pursuit of results	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
j. Models professional and ethical behaviour	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
k. Displays courage in the provision of advice and decision-making	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
l. Applies sound corporate governance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
m. Commits to personal development	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

YOUR SENIOR MANAGER

Your senior manager is the person your manager usually reports to.

Q30 Please indicate the extent to which you agree or disagree with the statement below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a. My senior manager demonstrates honesty and integrity	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

YOUR ORGANISATION

Your organisation is the Government department or public service office you work for in your current job (e.g. Department of Transport and Main Roads for staff employed in RoadTek, Public Trust Office for staff working for the Public Trust Office).

Q31 Please indicate the extent to which you agree or disagree with each statement below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a. In my organisation, the leadership is of high quality	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. My organisation is committed to developing its employees	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. Management model the behaviours expected of all employees	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. In my organisation, the leadership operates with a high level of integrity	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. Recruitment and promotion decisions in this organisation are fair	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f. My organisation is well managed	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

Q32 Please indicate the extent to which you agree or disagree with each statement below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a. Age is not a barrier to success in my organisation	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. Gender is not a barrier to success in my organisation	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. Disability is not a barrier to success in my organisation	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. Cultural background is not a barrier to success in my organisation	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. Sexual orientation is not a barrier to success in my organisation	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f. If I raised a complaint, I feel confident that it would be taken seriously	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

YOUR ORGANISATION continued

Q33 Please indicate the extent to which you agree or disagree with each statement below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a. I would recommend my organisation as a great place to work	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. I am proud to tell others I work for my organisation	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. I feel strong personal attachment to my organisation	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. My organisation motivates me to help it achieve its objectives	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. My organisation inspires me to do the best in my job	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

YOUR SATISFACTION

Q34 How satisfied are you with the following:

	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
a. The degree to which your work is interesting/challenging	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. Your ability to work on your own initiative	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. Your physical working environment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. The location of your work	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. Your work-life balance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f. Your ability to 'make a difference' to the community	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

Q35 All things considered, how satisfied are you with your current job?

	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

DOMESTIC AND FAMILY VIOLENCE

Q36 Are you aware of any policies, in your workplace, designed to support employees affected by domestic and family violence in the workplace or the community?

- ☐₁ Yes
- ☐₂ No
- ☐₃ Don't know

If Q15 = '1 Yes' Go to Q36a. If Q15 = '2 No' Go to Q36b

Q36a Please indicate the extent to which you agree or disagree with each statement below:

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. I am confident that I could sensitively communicate with employees affected by domestic and family violence	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b. If I was approached directly by an employee affected by domestic and family violence, I am confident in my ability to provide appropriate levels of support	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c. If I was made aware (e.g. by other colleagues) that domestic and family violence was affecting an employee, I am confident that I could respond appropriately	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

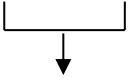
Go to Q37

Q36b Please indicate the extent to which you agree or disagree with each statement below:

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. I am confident that I could sensitively communicate with colleagues affected by domestic and family violence	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b. I am confident that I could effectively refer a colleague affected by domestic and family violence to appropriate support	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

YOUR FUTURE

Q37 Please indicate the extent to which you agree or disagree with the statement below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
I intend to leave my <u>organisation</u> within the next 12 months	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
					 Go to Q38 & Q39

Q38 Please indicate which of the following factors influence your intention to leave your organisation
[Select all that apply]

- ☐ 1 Pay and conditions
- ☐ 2 Career or job opportunities
- ☐ 3 The location of your workplace or the time spent commuting
- ☐ 4 The workplace culture
- ☐ 5 Your relationship with your manager
- ☐ 6 Your relationship with your colleagues
- ☐ 7 Fit between work and your interests
- ☐ 8 Work hours
- ☐ 9 Stress/Health
- ☐ 10 Professional/personal development
- ☐ 11 Job security
- ☐ 12 Contract expiring
- ☐ 13 Balancing work and life commitments
- ☐ 14 Family/carer responsibilities
- ☐ 15 Travel plans
- ☐ 16 Retirement
- ☐ 17 Other (please specify) _____

Q39 Please indicate the extent to which you agree or disagree with the statement below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
I intend to leave the <u>Queensland Public Sector</u> within the next 12 months	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

BULLYING AND SEXUAL HARASSMENT AT YOUR WORKPLACE

Q40 During the last 12 months have you witnessed bullying*/sexual harassment** in your workplace?

- ☐ ₁ Yes
- ☐ ₂ No
- ☐ ₃ Don't know

* Workplace bullying is repeated and unreasonable behaviour directed towards a worker or group of workers that creates a risk to health and safety.

**Sexual harassment is an unwelcome sexual advance, unwelcome request for sexual favours or other unwelcome conduct of a sexual nature which makes a person feel offended, humiliated or intimidated, and where that reaction is reasonable in the circumstances. Sexual harassment does not need to be deliberate or repeated to be illegal.

Q41 During the last 12 months, have you been subjected to any of the following in your workplace?

- ☐ ₁ Bullying
- ☐ ₂ Sexual harassment
- ☐ ₃ No (**Go to Q46**)
- ☐ ₄ Don't know (**Go to Q46**)

If 'Bullying' selected at Q41 **Go to Q42**. If 'Sexual harassment' selected at Q41 **Go to Q44**

Q42 Thinking about when you experienced bullying. Who were you bullied by? [Select all that apply]

- ☐ ₁ A senior manager
- ☐ ₂ Your immediate manager/supervisor
- ☐ ₃ A fellow worker
- ☐ ₄ A group of fellow workers
- ☐ ₅ A worker that reports to you
- ☐ ₆ A client/customer
- ☐ ₇ A member of the public
- ☐ _{7_2} A consultant/service provider
- ☐ _{7_3} A representative of another agency
- ☐ ₈ Other
- ☐ ₉ Prefer not to specify

BULLYING AND SEXUAL HARASSMENT AT YOUR WORKPLACE continued**Q43 a) What type of bullying did you experience? [Select all that apply]**

- ☐ 1 Physical behaviour (e.g. assault or aggressive body language)
- ☐ 2 Verbal abuse (e.g. offensive language, derogatory remarks, shouting or screaming)
- ☐ 3 'Initiations' or pranks
- ☐ 4 Interference with your personal property or work equipment
- ☐ 5 Inappropriate and unfair application of work policies or rules (e.g. performance management, access to leave, access to learning and development)
- ☐ 6 Cyber bullying (e.g. by email)
- ☐ 7 Other

b) Did you report the bullying?

- ☐ 1 Yes (**Go to Q44** if 'Sexual harassment' selected at Q41. Otherwise, **Go to Q46**)
- ☐ 2 No

c) Why did you not report the bullying? [Select all that apply]

- ☐ 1 I did not want to upset relationships in the workplace
- ☐ 2 I did not have enough evidence
- ☐ 3 It could affect my career
- ☐ 4 I did not think any action would be taken
- ☐ 5 The matter was resolved informally
- ☐ 6 I did not think the bullying was serious enough
- ☐ 7 Managers accepted the behaviour
- ☐ 8 I did not think it was worth the hassle of going through the report process
- ☐ 9 I did not know how to report it
- ☐ 10 Other

*If 'Sexual harassment' selected at Q41 **Go to Q44**. Otherwise, **Go to Q46***

BULLYING AND SEXUAL HARASSMENT AT YOUR WORKPLACE continued

Q44 Thinking about when you experienced sexual harassment. Who were you sexually harassed by?
[Select all that apply]

- ☐ 1 A senior manager
- ☐ 2 Your immediate manager/supervisor
- ☐ 3 A fellow worker
- ☐ 4 A group of fellow workers
- ☐ 5 A worker that reports to you
- ☐ 6 A client/customer
- ☐ 7 A member of the public
- ☐ 7.2 A consultant/service provider
- ☐ 7.3 A representative of another agency
- ☐ 8 Other
- ☐ 9 Prefer not to specify

BULLYING AND SEXUAL HARASSMENT AT YOUR WORKPLACE continued**Q45 a) What type of sexual harassment did you experience? [Select all that apply]**

- ☐ ₁ Physical behaviour (e.g. assault or aggressive body language)
- ☐ ₂ Verbal abuse (e.g. offensive language, derogatory remarks, shouting or screaming)
- ☐ ₃ 'Initiations' or pranks
- ☐ ₄ Interference with your personal property or work equipment
- ☐ ₅ Inappropriate and unfair application of work policies or rules (e.g. performance management, access to leave, access to learning and development)
- ☐ ₆ Cyber harassment (e.g. sexual harassment by email)
- ☐ ₇ Other

b) Did you report the sexual harassment?

- ☐ ₁ Yes (**Go to Q46**)
- ☐ ₂ No

c) Why did you not report the sexual harassment? [Select all that apply]

- ☐ ₁ I did not want to upset relationships in the workplace
- ☐ ₂ I did not have enough evidence
- ☐ ₃ It could affect my career
- ☐ ₄ I did not think any action would be taken
- ☐ ₅ The matter was resolved informally
- ☐ ₆ I did not think the sexual harassment was serious enough
- ☐ ₇ Managers accepted the behaviour
- ☐ ₈ I did not think it was worth the hassle of going through the report process
- ☐ ₉ I did not know how to report it
- ☐ ₁₀ Other

Go to Q46

WORKING FOR QUEENSLAND SURVEY AND YOUR WORKPLACE

Q46 a) Have you noticed any action your organisation has taken as a result of last year's Working for Queensland Survey?

☐

1 Yes

☐

2 No (*Go to Q47*)

☐

3 No, but I have not worked long in my organisation (*Go to Q47*)

b) How satisfied are you with your organisation's action in response to last year's Working for Queensland Survey?

	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

YOUR VIEW

Q47 If you could make one realistic, practical and implementable change in your organisation, what would it be?

- ☐ 1 More clarity on the agency's strategic direction, planning and objectives
- ☐ 2 An improvement in/better quality senior leadership (i.e. DG and executive team)
- ☐ 3 An improvement in/better quality senior/middle management
- ☐ 4 An improvement/better quality in line manager
- ☐ 5 An improvement in availability/communication of information
- ☐ 6 A reduction in red tape and bureaucracy
- ☐ 7 Greater access to training
- ☐ 8 Greater career development opportunities
- ☐ 9 More effective rewards and recognition
- ☐ 10 More frequent and more effective performance management discussions
- ☐ 11 More effective recruitment and selection
- ☐ 12 Better management of staffing levels (i.e. under or over)
- ☐ 13 Greater access to resources (i.e. tools and equipment)
- ☐ 14 Better quality or more appropriate work environment and facilities
- ☐ 15 Better management of work load/stress
- ☐ 16 Reduction in bullying and sexual harassment
- ☐ 17 Relationship with customer/client service
- ☐ 18 Improved teamwork and team relationships
- ☐ 19 Improved work/life balance/flexible work arrangements
- ☐ 20 Other, please specify (limit of 150 characters) _____

ORGANISATION SPECIFIC QUESTIONS

The following questions are specific to your organisation.

Q48 Please indicate the extent to which you agree or disagree with the statements below.

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
g.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
h.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
i.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
j.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

Thank you for completing the survey!