DEED Employee Engagement Survey – 2021 version   
  
The first set of questions relates to the general environment at DEED.

A reminder that the mission of DEED is to empower the growth of the Minnesota economy, for everyone.

**Please indicate if you agree or disagree with the following statements below:**

| General Environment | **Strongly Disagree** | **Disagree** | **Agree** | **Strongly Agree** | **Not applicable / Don't know** |
| --- | --- | --- | --- | --- | --- |
| I look forward to coming to work each day. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I understand how my role contributes to the mission of the **division** I work in at DEED. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I am continually learning in my current role. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I feel I receive the right amount of communication about what is happening at DEED. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I understand how my role contributes to the **overall mission** of DEED. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I feel included at DEED. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I am treated with respect by my DEED co-workers. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I can report misconduct at DEED without fear of retaliation. | ( ) | ( ) | ( ) | ( ) | ( ) |
| Collaborative work relationships are encouraged across DEED. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I feel there is a general atmosphere of fairness at DEED. | ( ) | ( ) | ( ) | ( ) | ( ) |
| At DEED, staff are recognized for good job performance. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I’m excited about DEED’s future. | ( ) | ( ) | ( ) | ( ) | ( ) |
| My skills are valued at DEED. | ( ) | ( ) | ( ) | ( ) | ( ) |

**Please provide any comments you have about the general environment at DEED.**

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# The COVID-19 global pandemic has fundamentally altered a lot about our day-to-day lives, including how and where we work. This section of the survey asks a series of questions to help us better understand how teleworking is going for you during this time.

**Are you currently in a telework status during this time?**  
( ) Yes, I telework all of the time (e.g. 5 days a week)  
( ) Yes, I telework some of the time (e.g. 1-4 days a week)   
( ) No, I don’t telework at all [SKIP TO “If the State allowed...”]

( ) Don’t know / unsure [SKIP TO “If the State allowed...”]   
   
**On a scale of 1 to 10, how would you say that telework is going for you right now?**"*1" means ‘not well at all’, while “10” means ‘extremely well’.*

( ) 1 ( ) 2 ( ) 3 ( ) 4 ( ) 5 ( ) 6 ( ) 7 ( ) 8 ( ) 9 ( ) 10

**Please indicate your agreement or disagreement with the following statement:**

***“I can successfully fulfill my role in a telework capacity as long as needed.”***

( ) Strongly disagree   
( ) Disagree   
( ) Agree   
( ) Strongly agree   
( ) Don’t know / unsure

**Which of the following are currently obstacles to you successfully teleworking?** [CHOOSE ALL THAT APPLY] {will randomize options}

( ) Problems with internet (e.g. slow or unreliable)

( ) Software problems (e.g. unable to connect reliably to video or hear audio)

( ) Hardware problems (e.g. computer itself is too old, slow, memory is full)

( ) Current role doesn’t allow me to do key functions easily in remote status (e.g. client / site visits)

( ) Issues with home environment (e.g. too noisy, distracting)

( ) Desk setup is uncomfortable / unproductive

( ) Prefer the office environment to get work done

( ) Other obstacle not listed above, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
( ) I don’t have any obstacles in teleworking

( ) Don’t know / unsure

**Please provide any comments you have about Teleworking.**   
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# This next section of questions has to do with your work unit. This refers to your team including your co-workers that you work with on a normal, day-to-day basis.

**Please indicate if you agree or disagree with the following statements below:**

| My Work Unit | **Strongly Disagree** | **Disagree** | **Agree** | **Strongly Agree** | **Not Applicable / Don't know** |
| --- | --- | --- | --- | --- | --- |
| My work unit meets the needs of the customers we’re asked to serve. | ( ) | ( ) | ( ) | ( ) | ( ) |
| My work unit is an environment where I can be innovative (*e.g. make changes, try new business processes etc.*). | ( ) | ( ) | ( ) | ( ) | ( ) |
| I am treated with respect by my co-workers in my work unit. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I am treated with respect by colleagues outside of my work unit who I interact with (*e.g. can include partners, vendors etc.*). | ( ) | ( ) | ( ) | ( ) | ( ) |
| My team works together in a way that gets things done. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I’m excited by the future of the work within my work unit. | ( ) | ( ) | ( ) | ( ) | ( ) |

**Please provide any comments you have about your work unit at DEED.**

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# This next section is about DEED’s leadership and management, specifically your supervisor/manager.

Your supervisor/manager is the immediate person that you report to; this person provides your job direction and performance review and organizes workflow and ensures that all employees under their supervision understand their tasks.

**Please indicate if you agree or disagree with the following statements below:**

| Your Sup/Mgr | **Strongly Disagree** | **Disagree** | **Agree** | **Strongly Agree** | **Not Applicable / Don't know** |
| --- | --- | --- | --- | --- | --- |
| I can openly discuss any concerns I have about DEED with my supervisor/manager. | ( ) | ( ) | ( ) | ( ) | ( ) |
| If I have an idea for how something that can be done better, I can discuss it with my supervisor/manager. | ( ) | ( ) | ( ) | ( ) | ( ) |
| My supervisor/manager has the skills required to effectively manage my work unit. | ( ) | ( ) | ( ) | ( ) | ( ) |
| My supervisor/manager removes obstacles so that I can be more effective at my work (*e.g. solves problems, eliminates distractions that impede getting work done*). | ( ) | ( ) | ( ) | ( ) | ( ) |
| My supervisor/manager is focused on meeting our work unit objectives/deliverables. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I am encouraged by my supervisor/manager to work collaboratively across DEED. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I receive clear feedback from my supervisor/manager about my work. | ( ) | ( ) | ( ) | ( ) | ( ) |

**Please provide any comments you have about your supervisor/manager at DEED.**

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This next set of questions is about DEED’s senior leadership and management. Here Senior Leadership refers to the Commissioner, Deputy Commissioners, Assistant Commissioners, and the DEED Leadership Team.  
  
To help you answer these questions, your Senior Leader is: **[invite('custom 8')].**  
  
For a full list of DEED’s Leadership Team, please visit: [**https://mn.gov/deed/about/who-we-are/leadership.jsp**](https://mn.gov/deed/about/who-we-are/leadership.jsp)

**Please indicate if you agree or disagree with the following statements below:**

| DEED Senior Leadership | **Strongly Disagree** | **Disagree** | **Agree** | **Strongly Agree** | **Not Applicable / Don't know** |
| --- | --- | --- | --- | --- | --- |
| Senior Leadership encourage collaborative work relationships. | ( ) | ( ) | ( ) | ( ) | ( ) |
| Senior Leadership promotes open communication. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I think Senior Leadership treats DEED employees with respect. | ( ) | ( ) | ( ) | ( ) | ( ) |
| My Senior Leader makes decisions in a timely manner. | ( ) | ( ) | ( ) | ( ) | ( ) |
| Senior Leadership support a vision for DEED that inspires me. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I have confidence that our Senior Leadership team can effectively lead. | ( ) | ( ) | ( ) | ( ) | ( ) |

**Please provide any comments you have about DEED Senior Leadership.**

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# The next set of questions focuses on your work and responsibilities at DEED.

**Please indicate if you agree or disagree with the following statements below:**

| Your Work | **Strongly Disagree** | **Disagree** | **Agree** | **Strongly Agree** | **Not Applicable / Don't know** |
| --- | --- | --- | --- | --- | --- |
| My work gives me a feeling of personal accomplishment. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I am informed about decisions that affect my work. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I can provide input into decisions that affect my work. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I understand what is expected of me in my work. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I understand the steps that are needed to get my work done (*e.g. tasks, processes, procedures*). | ( ) | ( ) | ( ) | ( ) | ( ) |
| I have the tools I need to be effective in my work role here at DEED (*e.g. tools - equipment, software, systems etc.*). | ( ) | ( ) | ( ) | ( ) | ( ) |
| In a typical week, my work load is manageable. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I have access to training opportunities to support my work role. | ( ) | ( ) | ( ) | ( ) | ( ) |

**Please provide any comments you have about your work at DEED.**

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# Diversity, Equity and Inclusion

Over the last two years, DEED has offered more opportunities to learn about and discuss matters related to diversity, equity, and inclusion. We would like to better understand how staff are experiencing these efforts.

**Please indicate if you agree or disagree with the following statements below:**

|  | **Strongly Disagree** | **Disagree** | **Agree** | **Strongly Agree** | **Not Applicable / Don't know** |
| --- | --- | --- | --- | --- | --- |
| DEED works to reduce bias. | ( ) | ( ) | ( ) | ( ) | ( ) |
| My understanding of diverse life experiences has grown because of conversations taking place at DEED. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I believe DEED is making progress to build a more inclusive agency. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I am encouraged to take steps that reduce racial disparities in my work. | ( ) | ( ) | ( ) | ( ) | ( ) |
| I am encouraged to participate in training opportunities that expand my understanding of diversity, equity, and inclusion. | ( ) | ( ) | ( ) | ( ) | ( ) |

**Please indicate how comfortable you are talking with colleagues at DEED about the following DEI topics:**

|  | Not at all comfortable | Somewhat uncomfortable | Somewhat comfortable | Very comfortable | Not applicable / Don’t know |
| --- | --- | --- | --- | --- | --- |
| Race | ( ) | ( ) | ( ) | ( ) | ( ) |
| Cultural differences | ( ) | ( ) | ( ) | ( ) | ( ) |
| Sexual orientation | ( ) | ( ) | ( ) | ( ) | ( ) |
| Gender identity | ( ) | ( ) | ( ) | ( ) | ( ) |
| Disabilities | ( ) | ( ) | ( ) | ( ) | ( ) |

**Please provide any comments you have about diversity, equity, and inclusion at DEED.**

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**How likely would you be to recommend DEED as a place to work to a friend or colleague?**"0" means "not at all likely to recommend" while "10" means "definitely likely to recommend."

( ) 0 ( ) 1 ( ) 2 ( ) 3 ( ) 4 ( ) 5 ( ) 6 ( ) 7 ( ) 8 ( ) 9 ( ) 10

**Overall, as compared to 2020, how would you describe your experience of working at DEED?**

( ) The experience of working at DEED has improved [SKIP TO IMPROVE Q]  
( ) The experience of working at DEED as stayed the same [SKIP TO STAY SAME Q]  
( ) The experience of working at DEED has gotten worse [GO TO WORSE Q]  
( ) Don’t know / unsure

**[IF ‘IMPROVED’] Please share with us why you feel your experience of working at DEED has improved.**

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**[IF ‘STAY THE SAME’] Please share with us why you feel your experience of working at DEED has stayed the same.**

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**[IF ‘GOTTEN WORSE SELECTED’] Please share with us why you feel your experience of working at DEED has gotten worse.**

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**What do you like BEST about coming to work at DEED?**

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**What could be IMPROVED about your experience working at DEED?**

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# Final Pages of DEED Engagement Survey

**Important note – the data collected from the following demographic questions is voluntary and will only be summarized at the DEED-agency level to ensure respondents aren’t identified by their responses. The information provided will be used to determine the rate of response among protected groups at DEED and to better understand the differences in responses based on this information.**

**How long have you worked at DEED?**

( ) Less than a year

( ) 1 to 5 years

( ) 6 to 10 years

( ) 11 to 15 years

( ) 16 to 20 years

( ) 21 years or more

( ) I do not wish to answer

**What do you identify as your gender?**   
***Gender is a social construct that includes both gender identity and gender expression.  Gender is distinct from sex.  Sex is the assignment at birth or classification of people as generally male or female based on biological differences.  Gender is how you choose to identify.***   
( ) Female

( ) Male

( ) I would describe myself/my gender as: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

( ) I do not wish to answer

**What do you identify as your race or ethnicity?**   
***Race and ethnicity are also social constructs that considers a human population distinct based on their common history, nationality or geographic distribution.  The categories below are based on current federal definitions.  We recognize that these categories are not perfect, which is why we provided a fill in option if you choose to identify with a racial and ethnic category that you feel is not represented in the list below.***   
( ) Black or African American (A person having origins in any of the black racial groups of Africa.)

( ) Hispanic or Latino (A person of Mexican, Puerto Rican, Cuban, Central or South American or Spanish Culture or origin, regardless of race.)

( ) Asian or Asian Pacific Islander (A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands.)

( ) American Indian, Alaskan Native, or Indigenous (A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.)

( ) White (A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.)

( ) Multi-racial or multi-ethnic

( ) Other, please describe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

( ) I do not wish to answer

**What do you identify as your disability status?**   
***Disability is defined as a physical or mental impairment that substantially limits a major life activity or major bodily function, such as walking, seeing, hearing, breathing, concentrating, etc.***   
( ) I have a disability

( ) I do not have a disability

( ) I do not wish to answer

**Do you identify as being a veteran?**( ) I am a veteran

( ) I am not a veteran

( ) I do not wish to answer

**Do you identify as being a part of the LGBTQIA+ community?**  
( ) Yes

( ) No

( ) I do not wish to answer