# Fiscal Year 2022 Exit Survey

# **Respondent Basics**

| 1. Why a | re you separating from this organization? (REQUIRED)            |
|----------|---|
|          | Non-permanent, seasonal, or internship                          |
|          | Voluntary separation  |
|          | Lack of funding or end of project or contracted work, or layoff |
|          | Terminated or involuntary separation $ ightarrow$ Disqualified  |
|          | Retiring → Go to retirement questions after page is complete    |

## **Main Reasons for Leaving**

| 2. | What     | are the top three reasons for leaving the organization? (select up to three)                      |
|----|----------|---|
|    |          | Changing careers  |
|    |          | Commute   |
|    |          | Continue education  |
|    |          | Co-worker(s)  |
|    |          | Dissatisfaction with type of work   |
|    |          | Emotionally burned out  |
|    |          | Family or personal reasons  |
|    |          | Health  |
|    |          | High workload   |
|    |          | Lack of consistent scheduling   |
|    |          | Lack of promotional opportunities   |
|    |          | Non-permanent position  |
|    |          | Organizational leadership or upper management (other than supervisor)                             |
|    |          | Pay   |
|    |          | Promotional opportunity   |
|    |          | Relocating  |
|    |          | Safety  |
|    |          | Skill or career development (non-monetary)  |
|    |          | Supervisor  |
|    |          | Telework options  |
|    |          | Work/life balance   |
|    |          | Other (If other, please specify below)  |
| 3. | If leavi | ng the organization was due to family or personal reasons, was it a result of needing to care for |
|    | anoth    | er individual?  |
|    |          | Yes   |
|    |          | No  |
|    |          | Not applicable  |

### **Outgoing Engagement Assessment**

- 4. What was your level of satisfaction with each of the following? Fair treatment of employees Health insurance benefits Innovation within your organization Opportunities to give input and new ideas
  - Organizational leadership
  - Pay
  - Pension plan/retirement benefits
  - Promotional opportunities
  - Recognition for your contributions
  - Safety in the workplace
  - Supervisor
  - Support for diversity
  - Telework opportunities
  - Training/ development opportunities
  - Vacation/ sick leave
  - Workload expectations
  - Work/life balance
    - i. All are on a 1-5 scale. 1 low to 5 high, matrix-style
      - 1 Very dissatisfied
      - 2 Dissatisfied
      - 3 Neither unsatisfied or satisfied
      - 4 Satisfied
      - 5 Very satisfied

| 5. | Did you participate in any organization or statewide committees, councils, or workgroups in the past |
|----|--|
|    | two years? If so, which ones?  |

| two years? If so, which ones? |  |  |
|-------------------------------|--|--|
| ☐ Open comment                |  |  |

# Post-Employment

| 6.  | i. After leaving this organizatio                  | n, where are you going?   |
|-----|--|---|
|     | <ul><li>Another state govern</li></ul>             | ment (outside WA)   |
|     | <ul><li>Another Washington</li></ul>               | state department, agency, board, or institution                             |
|     | <ul><li>Education field/school</li></ul>           | ol district   |
|     | <ul><li>Federal government</li></ul>               |   |
|     | ☐ Going back to school                             |   |
|     | <ul><li>Hospital/medical field</li></ul>           | i   |
|     | <ul><li>Local government (cit</li></ul>            | ry, county, port, transit, PUD, regional planning)                          |
|     | ☐ Non-profit/volunteer                             | work  |
|     | <ul><li>Not leaving for anoth</li></ul>            | er employer (travel, family, health, relocation, etc.)                      |
|     | <ul><li>Private industry</li></ul>                 |   |
|     | ☐ Self-employment                                  |   |
|     | <ul><li>Tribal government</li></ul>                |   |
|     | <ul><li>Unsure/still searching</li></ul>           | g for new employment  |
|     | <ul><li>Prefer not to say</li></ul>                |   |
|     | <ul> <li>Other (please specify)</li> </ul>         |   |
| 7.  | If a future opportunity becan would be interested? | ne available at the organization you are leaving, how likely is it that you |
|     | ☐ 1 - Very Unlikely                                |   |
|     | □ 2 - Unlikely                                     |   |
|     | □ 3 - Unsure                                       |   |
|     | □ 4 - Likely                                       |   |
|     | ☐ 5 - Very Likely                                  |   |
| 8.  | . How likely would you recomi                      | mend the organization you are leaving as a great place to work?             |
|     | 」 1 - Very Unlikely                                | , , ,   |
|     |  |   |
|     | □ 3 - Unsure                                       |   |
|     | □ 4 - Likely                                       |   |
|     | □ 5 - Very Likely                                  |   |
| 9.  | . What could the organization                      | have done to keep you?  |
|     | ☐ Open comment                                     |   |
| 10  | O is there anything else you wo                    | ould like to say about your time with this organization?                    |
| 10. | <ul><li>Open comment</li></ul>                     | and the to say about your time with this organization;                      |
|     | •  |   |

| Retire | ment Questions (From PAGE 1 – only if respondent selects "retiring" to question 1)              |
|--------|---|
| 1.     | How long have you worked for the state of Washington?   |
|        | □ 5 years or less   |
|        | ☐ 6 to 15 years   |
|        | ☐ 16 to 25 years  |
|        | □ 26 to 35 years  |
|        | ☐ 36 to 45 years  |
|        | ☐ 46 or more years  |
|        | □ Prefer not to say   |
| 2.     | What was the most enjoyable part of your state career?  |
|        | ☐ Open comment  |
| 3.     | What is something you would like to see improved for others?                                    |
|        | ☐ Open comment  |
| 4.     | Is there any advice you would like to give to an employee just starting their state career?     |
|        | ☐ Open comment  |
| 5.     | Do you intend to work after you leave state service?  |
|        | □ Yes   |
|        | □ No  |
|        | □ Unsure  |
| 6.     | How likely would you be to recommend the organization you are leaving as a great place to work? |
|        | □ 1 - Very unlikely   |
|        | □ 2 - Unlikely  |
|        | □ 3 - Unsure  |
|        | □ 4 - Likely  |
|        | □ 5 - Very likely   |
| 7.     | Can the organization contact you with questions after you retire?                               |
|        | □ Yes   |
|        | □ No  |
| 8.     | If so, what is your contact information? (optional)   |
|        | □ Name  |
|        | □ Email   |
|        | □ Phone   |
|        |   |

Thank you for your service to the residents of Washington. We are grateful for your contributions!

(Retirees move to PAGE 5: Demographic Questions)

# **Demographic Questions**

| 11. | Which  | organization are you leaving?   |
|-----|--------|---|
|     |        | (Full list of known participating organizations)  |
| 12. | "Other | is the job class you are leaving? Note: Jobs are listed alphabetically. If your job class is not listed, select " at the bottom of the list. All jobs that are exempt from civil service code are listed as "Exempt." agton Management Services jobs are listed as "WMS". |
|     |        | (Full drop list provided)   |
|     |        | Prefer not to say   |
|     |        | Unsure  |
|     |        | Other   |
| 13. | How lo | ong have you worked for your organization?  |
|     |        | Less than 1 year  |
|     |        | 1 to 2 years  |
|     |        | 3 to 5 years  |
|     |        | 6 to 10 years   |
|     |        | 11 to 15 years  |
|     |        | 16 or more years  |
|     |        | Prefer not to say   |
| 14. | Are yo | u leaving a supervisory position?   |
|     |        | Yes   |
|     |        | No  |
|     |        | Prefer not to say   |
| 15. | In whi | ch county did you work a majority of the time?  |
|     |        | All counties listed   |
|     |        | Field work 100%   |
|     |        | Out of state  |
|     |        | Prefer not to say   |
| 16. | In the | last month, how many days on average did you telework, per week?  |
|     |        | Less than 1 day/ad hoc  |
|     |        | 1 day   |
|     |        | 2 days  |
|     |        | 3 days  |
|     |        | 4 days  |
|     |        | 100% telework   |
|     |        | N/A – Doesn't apply to my position  |
|     |        | Prefer not to say   |

|                      | s your age?  |
|----------------------|--|
|                      | Under 18   |
|                      | 18-24  |
|                      | 25-34  |
|                      | 35-44  |
|                      | 45-54  |
|                      | 55-64  |
|                      | 65+  |
|                      | Prefer not to say  |
| 18. What i           | s your gender?   |
| П                    | Female   |
| П                    | Male   |
|                      | Non-binary/X   |
|                      | Prefer not to say  |
| _                    |  |
| 19. Are yo           | u a U.S. Veteran?  |
|                      | Yes  |
|                      | No   |
|                      | Prefer not to say  |
| 20. Do voi           | ı identify as having a disability?   |
|                      | Yes  |
|                      |  |
|                      |  |
|                      | No   |
|                      |  |
|                      | No   |
| 21. Do you           | No<br>Prefer not to say  |
| 21. Do you           | No Prefer not to say identify as LGBTQ+?   |
| 21. Do you           | No Prefer not to say  identify as LGBTQ+? Yes  |
| 21. Do you           | No Prefer not to say  i identify as LGBTQ+? Yes No Prefer not to say   |
| 21. Do you           | No Prefer not to say  i identify as LGBTQ+? Yes No Prefer not to say  race and/or ethnicity do you consider yourself? (Select all that apply)  |
| 21. Do you           | No Prefer not to say  i identify as LGBTQ+? Yes No Prefer not to say   |
| 21. Do you           | No Prefer not to say  i identify as LGBTQ+? Yes No Prefer not to say  race and/or ethnicity do you consider yourself? (Select all that apply) American Indian or Alaska Native   |
| 21. Do you           | No Prefer not to say  i identify as LGBTQ+? Yes No Prefer not to say  ace and/or ethnicity do you consider yourself? (Select all that apply) American Indian or Alaska Native Asian  |
| 21. Do you  22. What | No Prefer not to say  i identify as LGBTQ+? Yes No Prefer not to say  acce and/or ethnicity do you consider yourself? (Select all that apply) American Indian or Alaska Native Asian Black or African American   |
| 21. Do you  22. What | No Prefer not to say  i identify as LGBTQ+? Yes No Prefer not to say  race and/or ethnicity do you consider yourself? (Select all that apply) American Indian or Alaska Native Asian Black or African American Hispanic or Latino  |
| 21. Do you  22. What | No Prefer not to say  i identify as LGBTQ+? Yes No Prefer not to say  acce and/or ethnicity do you consider yourself? (Select all that apply) American Indian or Alaska Native Asian Black or African American Hispanic or Latino Middle Eastern or North African                        |
| 21. Do you  22. What | No Prefer not to say  i identify as LGBTQ+? Yes No Prefer not to say  acce and/or ethnicity do you consider yourself? (Select all that apply) American Indian or Alaska Native Asian Black or African American Hispanic or Latino Middle Eastern or North African Pacific Islander White |
| 21. Do you  22. What | No Prefer not to say  i identify as LGBTQ+? Yes No Prefer not to say  race and/or ethnicity do you consider yourself? (Select all that apply) American Indian or Alaska Native Asian Black or African American Hispanic or Latino Middle Eastern or North African Pacific Islander       |

END OF SURVEY or move to org-specific questions beginning on pg. 8 depending on answer to selected organization (see #11)