SAMPLE AFSCME
BARGAINING SURVEY

I. BACKGROUND INFORMATION

1. What is your job title?
   
   Job Title _______________________________

2. What pay grade are you in? ______________

3. What department do you work for? ________

4. Do you work full-time, part-time or on an intermittent basis?
   
   _____ Full-time   _____ Intermittent
   _____ Part-time

5. How long have you been a state employee?
   
   _____ Less than 5 years   _____ 16-20 years
   _____ 5-10 years   _____ More than 20 years
   _____ 11-15 years

II. WAGES AND SALARIES

1. What do you feel would be a fair annual pay increase at this time?
   
   Percent: _____ 0-3%   _____ 3-5%
   _____ 5-8%   _____ 9-11%   _____ Other

2. Would you prefer that the increase be a percentage of your salary or a flat dollar amount across-the-board?
   
   _____ Percentage   _____ Flat Dollar
   _____ Unsure

3. Do you feel that the longevity increases paid to employees at the top of their pay scales are adequate?
   (Employees currently get 2 1/2% after 5 years and 1/2% a year thereafter up to 10% of their base.)
   
   _____ Yes   _____ No

4. a. Do you work the 1st, 2nd or 3rd shift?
   
   _____ 1st   _____ 2nd   _____ 3rd

   b. If you work the 2nd or 3rd shift, how important is it that you receive a shift differential?
   
   _____ Very Important   _____ Important
   _____ Not Important

5. a. Do you currently work Saturdays or Sundays as part of your regular work week (not as overtime)?
   
   _____ Yes   _____ No

   b. If so, how important is it that the state pay you extra for Saturday and or Sunday work?
   
   _____ Very Important   _____ Important
   _____ Not Important

6. a. Are you required to wear a uniform or use tools or equipment on your job?
   
   _____ Wear Uniform   _____ Use tools or equipment
   _____ Neither

   b. If so, does the state supply the uniform or tools or equipment or pay you an allowance to buy them?
   
   _____ Supplies them   _____ Pays allowance
   _____ Neither

   c. Do you prefer that the state buy them or would you prefer an allowance?
   
   _____ Yes   _____ No   _____ Unsure

7. Do you feel your job is classified properly?
   
   _____ Yes   _____ No   _____ Unsure

III. BENEFIT PLANS
1. a. What health insurance plan are you currently enrolled in?
   ______________________________________
   ______________________________________
   ______________________________________
   ______________________________________

   b. How would you rate the quality of the plan?
   _____ Excellent _____ Good
   _____ Fair _____ Poor

   c. How would you improve the plan?
   _____ Decrease Deductibles
   _____ Broaden Coverage (add pediatric preventive care, foot care, etc.)
   _____ Reduce maximum out-of-pocket expense on major medical
   _____ Add more participating providers
   _____ Other (Specify) ___________________
   _____ Unsure _____ Decrease Premiums

2. a. Which dental plan do you belong to?
   ______________________________________

   b. How would you rate the plan?
   _____ Excellent _____ Good
   _____ Fair _____ Poor

   c. How would you improve the plan?
   _____ Increase payment for restorative services (fillings, root canals, etc.)
   _____ Increase annual limit
   _____ Improve orthodontic coverage
   _____ Other (Specify) ___________________
   _____ Unsure _____ Decrease Deductibles

3. How would you improve your vision care plan?
   _____ Eliminate required out-of-pocket payments
   _____ Increase limits on payments for exams, glasses, and contact lenses
   _____ Unsure

4. How important is it to add the following employer-paid benefit plans?
   Long Term Disability: _____ Very Important
                        _____ Important
                        _____ Not Important
   Audiology: _____ Very Important
              _____ Important
              _____ Not Important

5. How important would negotiated child care services be to you?
   _____ Very Important _____ Important
   _____ Not Important

IV. TRANSFERS/PROMOTIONS CAREER DEVELOPMENT

1. How important should the following factors be in promotions?
   Exam Score: _____ Very Important
                _____ Important
                _____ Not Important
   Job Performance: _____ Very Important
                      _____ Important
                      _____ Not Important
   Seniority Within:
   Classification Series: _____ Very Important
                          _____ Important
                          _____ Not Important
   Same Facility: _____ Very Important
                   _____ Important
____ Not Important

 Same Department:  ____ Very Important
                ____ Important
                ____ Not Important

 Statewide:  ____ Very Important
             ____ Important
             ____ Not Important

2. Should current employees have preference over people off the street for job openings?
   ____ Yes   ____ No   ____ Unsure

3. What would be the fairest method to select employees who want to transfer from one work location to another or from one shift to another?
   ____ By seniority within the job classification
   ____ By seniority as a state employee
   ____ Based on performance
   ____ Based on who bid earliest (first come/first serve)

4. a. Do you find your job to be “rewarding?”
    ____ Yes   ____ No   ____ Somewhat

   b. How important is it to improve employees’ promotional opportunities?
      ____ Very Important   ____ Important
      ____ Not Important

5. a. Are you currently covered by a tuition reimbursement program?
      ____ Yes   ____ No   ____ Somewhat

   b. If “no”, how important would such a program be to you?
      ____ Very Important   ____ Important

   c. If “yes”, have you ever used the program?
      ____ Yes   ____ No

V. JOB SECURITY/STAFFING/WORKLOADS

1. Do you believe that the workload in your department is distributed fairly among employees?
   ____ Yes   ____ No   ____ Unsure

2. How important is it to reduce your workload?
   ____ Very Important   ____ Important
   ____ Not Important

3. How important is it to protect against contracting-out state employee work to private firms?
   ____ Very Important   ____ Important
   ____ Not Important

4. Should performance evaluations be considered in case of layoff or job abolishment, or should only seniority be considered?
   ____ Performance evaluations should be considered
   ____ Performance evaluations should not be considered

VI. DISCIPLINE AND GRIEVANCES

1. Is a policy of “progressive discipline” followed in your workplace? (Progressive discipline means that employees are given oral counseling followed by a verbal reprimand before more severe disciplinary action is taken.)
   ____ Yes   ____ No   ____ Unsure

2. a. How would you rate your current grievance procedure?
    ____ Excellent   ____ Good
    ____ Fair       ____ Poor

   b. Is a union representative permitted to participate in all steps of your grievance procedure?
    ____ Yes   ____ No   ____ Unsure
c. What improvements could be made in the procedure?
   _____ None
   _____ Speed it up
   _____ More meaningful meetings
   _____ Other (Specify) ___________________
   ______________________________________
   ______________________________________

VII. HOLIDAY VACATION LEAVE

1. Which holidays should be added?
   _____ Good Friday           _____ Christmas Eve
   _____ New Years Eve       _____ Birthday
   _____ Day after Thanksgiving
   _____ Other (Specify) _______________________
   __________________________________________
   __________________________________________

2. How important is it to negotiate additional vacation days?
   _____ Very Important _____ Important
   _____ Not Important

3. How important is it to negotiate additional personal or “stress/burnout” days?
   _____ Very Important _____ Important
   _____ Not Important

4. a. How important is it to earn additional sick days?
   _____ Very Important _____ Important
   _____ Not Important

VIII. WORK SCHEDULES

1. a. How are employees presently selected to work overtime in your department?
   _____ By seniority  _____ By favoritism
   b. How would you like to see overtime distributed?
      _____ Let the supervisor choose
      _____ Select from volunteers by seniority
      _____ Rotate among employees who volunteer in seniority order

2. Do you get two breaks each day?
   _____ Yes  _____ No

3. How long do you get for lunch?
   _____ One-half hour  _____ Forty-five minutes
   _____ One hour  _____ Other (Specify)

4. Are there designated areas where you can take breaks or lunch?
   _____ Yes  _____ No

5. a. Do you currently have the option of working on a flexitime schedule?
   _____ Yes  _____ No  _____ Unsure
   b. How important is it to you to have flexitime?
      _____ Very Important  _____ Important
      _____ Not Important

IX. HEALTH AND SAFETY

1. What health and safety problems, if any, exist in your work place?
   _____ None  _____ Infectious diseases
   _____ Toxic Chemicals  _____ Violent assaults
   _____ Asbestos  _____ Unsafe equipment
   _____ Stress  _____ Poorly maintained
2. How important would stronger health and safety protections be to you?
   ____ Very Important   ____ Important
   ____ Not Important

3. a. Do you think you should be paid a hazardous duty pay differential for the duties that you perform?
   _____ Yes    _____ No

   b. In other states, AFSCME has negotiated that employees who suffer work-related injuries or illnesses receive full pay while they are unable to work, without charge to their sick leave. How important would this benefit be to you?
   ____ Very Important   ____ Important
   ____ Not Important

X. OTHER ISSUES

Are there other issues you would like raised in negotiations with the state?
___________________________________________
___________________________________________
___________________________________________

XI. RANK THE ISSUES

In order of importance to you, which areas should be stressed in the upcoming negotiations with the state (with “1” being the most important, “2” next important, etc.)?

_____ Wages & Salaries
_____ Insurance
_____ Transfers, Promotions, Career Development
_____ Job Security: Staffing Workloads

_____ Discipline & Grievances
_____ Holidays/Vacations Leave
_____ Work Schedules
_____ Health and Safety Development

_____ Other (Specify) ________________________

If you are interested in being involved in the bargaining process by serving on a committee, please check the box below and supply your name, telephone number and address. If you do not want to serve on a committee, there is no need to identify yourself.

(   ) I would like to serve on a committee involved in bargaining.

Name ________________________________
Telephone Number (   ) ____________________
Address ________________________________

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