Section A

SURVEY OF OPERATIONAL EXCELLENCE

For all the statement below, please **circle / tick** the scale that reflects to your thoughts on your company **managing change management** now.

1 - *Strongly Disagree*
2 - *Disagree*
3 - *Neutral*
4 - *Agree*
5 - *Strongly agree*

	MANAGING CHANGE MANAGEMENT	Strongly Disagree	Disagreed	Neutral	Agreed	Strong Agree
Leadership Styles ***(are practiced by top management in your company)***						
1	Our top management makes us feel good to be around them	1	2	3	4	5
2	Our top management conveys in simple words what we could and should do	1	2	3	4	5
3	Our top management enables us to think about old problems in new ways	1	2	3	4	5
4	Our top management stimulates us to develop ourselves	1	2	3	4	5
5	Our top management has complete faith and trust in us	1	2	3	4	5
6	Our top management provides appealing insight about what we can do	1	2	3	4	5
7	Our top management provides us with new ways of looking at problems	1	2	3	4	5
8	Our top management informs us on our performance	1	2	3	4	5
9	Our top management makes us proud to be associated with them	1	2	3	4	5
10	Our top management helps to make our work meaningful	1	2	3	4	5
11	Our top management encourages us to brainstorm for ideas	1	2	3	4	5
12	Our top management gives us personal attention to make us feel we are needed	1	2	3	4	5

Human Resource Practices ***(HR tools used to manage human capital pool)***		
13	We have extensive employee selection process for a job in our company (e.g. use of tests, interviews, etc.)	1 2 3 4 5
14	We spend a great deal of money to insure that we hire the right person for the job	1 2 3 4 5
15	Multiple applicants are screened before a position is filled to ensure the best person is selected for the job	1 2 3 4 5
16	We have an extensive training process for members in our company	1 2 3 4 5
17	There are different kinds of training programmes available for members of our company	1 2 3 4 5
18	There is a standard training hours to be fulfilled yearly for the members of our company	1 2 3 4 5
19	Our company evaluates our performance annually	1 2 3 4 5
20	Our company's evaluation is based on job-related criteria	1 2 3 4 5
21	We can know our performance appraisal results by formal feedback system	1 2 3 4 5
22	Our company consistently reviews and updates its compensation systems to meet the needs of employees	1 2 3 4 5
23	Our company's compensation structure is equitable	1 2 3 4 5
24	Employees are given positive recognition when they produce high quality of work	1 2 3 4 5
Organizational Culture ***(basic assumptions and beliefs shared by employees)***		
25	In our company everyone believes that anyone can create a positive impact	1 2 3 4 5
26	Employees to achieve superior results by making decisions at the level with information sharing	1 2 3 4 5
27	In our company business planning is ongoing by involving everyone in the process to a certain degree	1 2 3 4 5
28	Our company's organizational structure is based on team work	1 2 3 4 5
29	Our company encourages cooperation across the board through teamwork	1 2 3 4 5

30	In our company all work as it they are part of the team	1	2	3	4	5
31	Our company recognizes employees' capability as an important competitive advantage	1	2	3	4	5
32	Our company will continue to capitalize on the skills of the employees	1	2	3	4	5
33	The "bench strength" (capability of people) is constantly improving	1	2	3	4	5

Section B

OPERATIONAL EXCELLENC SURVEY

For all the statement below, please **circle / tick** the scale that **best** reflect how **your company** has been doing so far relative to the **major competitors** in **your industry**.

1 - *Worst in industry*
2 - *Bad*
3 - *Average*
4 - *Good*
5 - *Best in industry*

	OPERATIONAL EXCELLENCE	Worst in industry	Bad	Average	Good	Best in industry
	Operational Performance ***(quality, delivery, cost, flexibility, social and environmental)***					
1	Product quality and reliability	1	2	3	4	5
2	Manufacturing conformance of quality	1	2	3	4	5
3	Customer service and support	1	2	3	4	5
4	Delivery reliability	1	2	3	4	5
5	Delivery speed	1	2	3	4	5
6	Manufacturing lead time	1	2	3	4	5
7	Procurement lead time	1	2	3	4	5
8	Labor productivity	1	2	3	4	5
9	Inventory turnover	1	2	3	4	5
10	Capacity utilization	1	2	3	4	5
11	Overhead cost	1	2	3	4	5

12	Product customization ability	1 2 3 4 5
13	Volume flexibility	1 2 3 4 5
14	Product mix flexibility	1 2 3 4 5
15	Time to market	1 2 3 4 5
16	Employee satisfaction	1 2 3 4 5
17	Social performance of suppliers	1 2 3 4 5
18	Community relationship	1 2 3 4 5
19	Philanthropic investment / donations	1 2 3 4 5
20	Key material use per unit	1 2 3 4 5
21	Energy use per unit	1 2 3 4 5
22	Water use per unit	1 2 3 4 5
23	Emission, effluent and waste per unit	1 2 3 4 5

Section C

The following questions are about your company information. Please choose the answer that can best represent your company.

No	Particular	Please tick, bold or highlight the indicator.
1	What is your company sub-sector?	[ ] Electronic components [ ] Industrial electronics [ ] Consumer electronics [ ] Electrical products [ ] Plastic supporting [ ] Metal supporting [ ] Other (Please specify)_____
2	Total number of employees in your company	[ ] 50 or fewer [ ] 51 - 150 [ ] 151 – 500 [ ] 501 – 1000 [ ] More than 1000
3	Number of years of operation	[ ] Less than 5 years [ ] Between 6 to 10 years [ ] Between 11 to 15 years

		[ ] More than 15 years
4	Annual sales turnover (2011)	[ ] Less than RM10 million [ ] Between RM10 million to RM25 million [ ] Between RM26 million to RM50 million [ ] More than RM50 million
5	Type of Ownership	[ ] Fully Local (100%) [ ] Fully Foreign (100%) [ ] Majority Local (51 to 99%) [ ] Majority Foreign (51 to 99%) [ ] Equal Local-Foreign (50-50%)

Section D

The following questions are about your demographic information. Please choose the answer that can best represent yourself.

No	Particular	Please tick, bold or highlight the indicator.
1	Gender	[ ] Male [ ] Female
2	Ethnic group	[ ] Malay [ ] Chinese [ ] Indian [ ] Others
3	Age	[ ] Between 18 to 35 years [ ] Between 36 to 45 years [ ] Above 46 years
4	Educational Level (Tick the highest level)	[ ] Secondary / High school [ ] Certificate / Diploma / Advance Diploma [ ] First Degree [ ] Postgraduate Degrees [ ] Professional
5	No. of years working in this company	[ ] Less than 5 years [ ] Between 6 to 10 years [ ] Between 11 to 15 years [ ] More than 16 years

6	Your position / title in this company	Please specify _____
7	Your company name (Optional)	Please specify _____

If you would like a summary of the results, please let me know by providing your email address or attach your business card right here.

End of questionnaire.
Thanks for your cooperation and support!