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U.S. DEPARTMENT OF HEALTH

U.S. PUBLIC HEALTH SERVICE CENTERS FOR DISEASE

NATIONAL INSTITUTE SAFETY AND HEALTH



AND HUMAN SERVICES

CONTROL AND PREVENTION

FOR OCCUPATIONAL



## Health Hazard Evaluation Survey Initial Site Visit

The National Institute for Occupational Safety and Health (NIOSH) conducts surveys of people at each work place who are involved in NIOSH evaluations. We use the information from these surveys to improve our procedures and reports and to learn about the effects of NIOSH evaluations in reducing and preventing work-related illness and injury. Please help us by filling out this survey form.

Even though this NIOSH evaluation is not completed, we would like to learn your experiences and thoughts about it thus far. We will send you follow-up surveys two more times in the future: after the health hazard evaluation is completed, and again approximately one year after its completion.

Your responses will be kept in a secure manner according to applicable laws. Our reports will include only summary information and will not identify you in any way.

Please mail completed surveys to NIOSH in the postage paid envelope. If you have any questions or concerns, please call Barbara Jenkins at 513-458-7132.

## Thank you!

Public reporting burden of this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS E-11, Atlanta, Georgia 30333; ATTN: PRA (0920-0260).

## STATEMENT OF AUTHORITY:

Sections 20(a)(3–6) of the Occupational Safety and Health Act (29 USC 669(a)(6–9), and Section 501(a)(11) of the Federal Mine Safety and Health Act (30 USC 951(a)(11). The identity of the participant will be protected under provisions of the Privacy Act (5 USC). The voluntary cooperation of the participant is required.

## **NIOSH Health Hazard Evaluation Survey: Site Visit** This survey asks your thoughts about the NIOSH health hazard evaluation thus far. Please fill in circles completely like this: O no hazard O yes, a mild hazard 1. Do you think there is a health O yes, a moderate hazard hazard at the work place **now**? O yes, a severe hazard O don't know 2. Did NIOSH kept you well 0 yes informed of the plans for the O no, I wanted to know more health hazard evaluation? O no. but I didn't need to know 3. Did NIOSH visit the workplace 0 yes in a reasonably short time after O no the health hazard evaluation O don't know request was made? O yes 4. In the opening conference discussions, were you fully able O no to express the issues as you O I did not attend see them? O there was no opening conference 5. At the end of the site visit, did O yes the NIOSH investigators give a O no satisfactory summary of what O don't know they did? 6. At the end of the site visit, did 0 yes the NIOSH investigators give a O no satisfactory description of O don't know future plans for the health hazard evaluation? 7. Do you think the NIOSH 0 yes investigation is *objective* thus O no far? O don't know 8. Do you think the NIOSH 0 yes investigation is **thorough** thus O no

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O don't know

far?

	NIOSH Health Hazard	Evaluation Survey: Site Visit
9.	Do you think recommendations NIOSH investigators have made thus far are <b>appropriate</b> ?	O yes O no O don't know O no recommendations were made
10.	Do you think recommendations NIOSH investigators have made thus far are <i>practical</i> ?	O yes O no O don't know O no recommendations were made
11.	What is your overall impression of the NIOSH health hazard evaluation thus far?	O excellent O good O fair O poor
12.	Please <b>print</b> here any comments evaluation thus far.	you have about the NIOSH health hazard
13.	Did <b>you</b> request the health hazard evaluation?	O yes O no
14.	Which <b>one</b> of the following <b>best</b> describes your position at the time of the NIOSH site visit?	O no longer associated with the work place O management O health and safety staff O union representative O supervisory employee O nonsupervisory employee O government health/safety agent O consultant O other - please describe:
15.	We will send you two more surve	ys about the NIOSH health hazard evaluation,

	NIOSH Health Hazard Evaluation Survey: Site Visit
	one after you receive the health hazard evaluation final report and another one a year later. So that we may contact you again, please make any corrections to the label below.
16.	Check this box if you would like to <i>receive and respond to future surveys</i> electronically. If we have not included your email address, please write it here:
	Thank you for taking the time to fill out this survey. We appreciate your cooperation. Please send this form in the enclosed envelope to: Barbara Jenkins, NIOSH R-9, 4676 Columbia Parkway, Cincinnati, OH 45226.