

2000 QUESTION NUMBER, IN ORIGINAL ORDER	Question Text	Response Categories	DISPOSITION	2011 QUESTION NUMBER	Notes
S1	Have I reached (NAME OF BUSINESS)?	YES (PRIMARY NAME MATCH) 1 (Q4) YES (SECONDARY NAME MATCH) 2 (Q4) BUSINESS CHANGED NAME 3 NO, ANOTHER BUSINESS 4 RESIDENCE ONLY (NOT A BUSINESS) 5 (Q8) REFUSED 7 (CODE 2) DON'T KNOW 8 (CODE 10)	KEPT BUT CHANGED	V1	Contact Verification (5149v)
S2	What is the name of your business?	Free text RESIDENCE ONLY (NOT A BUSINESS)..... 5 (Q8) REFUSED ..... 7 DON'T KNOW ..... 8	DROPPED		
S3	Is this business the same as (NAME OF BUSINESS ON RIS)?	YES 1 NO 2 (Q5) REFUSED 7 DON'T KNOW 8	KEPT	V2	Contact Verification (5149v)
S4	Are you located at (ADDRESS ON RIS)? [IF YES AND P.O. BOX, OBTAIN STREET ADDRESS AND NOTE ON RIS. VERIFY SPELLING OF ADDRESS.]	YES..... ..... 1 (Q14a) NO ..... ..... 2 (Q12) REFUSED..... ..... 7 (CODE 10) DON'T KNOW..... 8 (CODE 10)	KEPT BUT CHANGED	V4	Contact Verification (5149v)

S5	Are you located at (ADDRESS ON RIS)? [IF YES AND P.O. BOX, OBTAIN STREET ADDRESS AND NOTE ON RIS.]	YES..... 1 ..... 1 NO ..... 2 (Q7) REFUSED..... ..... 7 (Q7) DON'T KNOW..... 8 (Q7)	DROPPED		
S6	Do you know what happened to (NAME OF BUSINESS ON RIS)?	YES, IT CLOSED/OUT OF BUSINESS ..... 1 (CODE S1 & THANK) YES, IT MOVED ..... 2 (Q10) YES, SOMETHING ELSE..... 4 (Q10) NO/DON'T KNOW ..... 3 (CODE 10) REFUSED..... ..... 7 (CODE 10)	DROPPED		
S7	Do you know anything about (NAME OF BUSINESS ON RIS) at (ADDRESS ON RIS)?	YES, IT CLOSED/OUT OF BUSINESS ..... 1 (CODE S1 & THANK) YES, IT MOVED ..... 2 (Q10) YES, SOMETHING ELSE..... 4 (Q10) NO/DON'T KNOW ..... 3 (CODE 10) REFUSED..... ..... 7 (CODE 10)	DROPPED		

S8	Are you located at (ADDRESS ON RIS)?	YES..... ..... 1 NO ..... ..... 2 (CODE 10) REFUSED..... ..... 7 (CODE 10) DON'T KNOW..... 8 (CODE 10)	DROPPED		
S9	Do you know what happened to (NAME OF BUSINESS ON RIS)?	YES, IT CLOSED/OUT OF BUSINESS ..... 1 (CODE S1 & THANK) YES, IT MOVED ..... 2 (Q10) YES, SOMETHING ELSE..... 4 (Q10) NO/DON'T KNOW ..... 3 (CODE 10) REFUSED..... ..... 7 (CODE 10)	DROPPED		
S10	Do you know the phone number or address of (NAME OF BUSINESS ON RIS)?	YES..... ..... 1 NO/DON'T KNOW ..... 2 (CODE 10) REFUSED..... ..... 7 (CODE 10)	DROPPED		
S11	What is the phone number or address of (NAME OF BUSINESS ON RIS)? [VERIFY PHONE NUMBER AND SPELLING OF ADDRESS.]	free text	KEPT BUT CHANGED	V6	Contact Verification (5149v)

S12	Does (NAME OF BUSINESS ON RIS) have an office at (ADDRESS OF BUSINESS ON RIS)?	YES..... 1 ..... 1 NO (RECORD NEW ADDRESS ON RIS) ..... 2 (Q14) REFUSED..... ..... 7 (CODE 2) DON'T KNOW..... 8 (CODE 10)	DROPPED		
S13	Can you give me the telephone number (IF MOVED: ASK "and address") for that location? [VERIFY PHONE NUMBER AND SPELLING OF ADDRESS.]	YES..... 1 ..... 1 (_____) <hr/> NO ..... 2 (CODE 10) REFUSED..... ..... 7 (CODE 10) DON'T KNOW..... 8 (CODE 10)	DROPPED		
S14a	Are you a government organization at the federal, state, or local level?	YES..... 1 (CODE S2 & THANK) ..... 1 (CODE S2 & THANK) NO ..... 2 REFUSED..... ..... 7 DON'T KNOW..... 8	KEPT BUT CHANGED	V3	Contact Verification (5149v)

S14b	Are you a public school, public university or post office?	YES..... ..... 1 (CODE S2 & THANK) NO ..... ..... 2 REFUSED..... ..... 7 (CODE 10) DON'T KNOW..... 8 (CODE 10)	KEPT BUT CHANGED	V3	Contact Verification (5149v)
S15a	We would like to send some information regarding this study to your company. Could I please have the name, address, telephone number and fax number of your human resources director or the person responsible for your company's benefit plans for (LOCATION ON RIS). [VERIFY SPELLING OF NAME, ADDRESS, PHONE NUMBER AND FAX NUMBER.]	free text	KEPT BUT CHANGED	V7	Contact Verification (5149v)
S15b	And if I could just verify the spelling of the business name. Is it (READ SPELLING AS IT APPEARS ON RIS)?	free text	DROPPED		
S16	To verify that I have spoken to someone at this company, may I please get your name?	free text	KEPT	V8	Contact Verification (5149v)
S17	INTERVIEWER: IS THIS PERSON LOCATED AT THE SAME ADDRESS ON RIS?	YES 1 NO 2	DROPPED		
Q1	How many employees are currently on the payroll at {LOCATION ADDRESS}?	Free Text	KEPT BUT CHANGED	Q1	Revised question wording
Q2	How many of your employees at this location are female?	Free Text NUMBER 1 PERCENT 2	KEPT	Q7	
Q3	How many of your employees at this location are unionized?	Free Text NUMBER 1 PERCENT 2	KEPT	Q6	

Q4	How many of your employees at this location worked at least 1,250 hours for your organization in the past 12 months?	Free Text NUMBER 1 PERCENT 2	KEPT BUT CHANGED	Q9	Revised question wording
Q5	Are there people who work for your organization at other locations? (IF NO, PROBE: "So you have no other locations?")	YES 1 NO 2	DROPPED		
Q5a	Does your organization have other work sites within 75 miles of this location?	YES 1 NO 2 (Q6INTRO)	DROPPED		
Q5b	<u>INCLUDING THIS LOCATION</u> , how many people are employed, in total, at sites within 75 miles? Would you say...	Fewer than 25, 1 25 to 49, 2 50 to 99, 3 100 to 249 4 250 to 499, or 5 500 or more? 6	KEPT BUT CHANGED	Q3	Revised question wording; free text instead of response categories
Q6 INTRO	For employees at this location, please tell me whether your organization's policies designate up to 12 weeks of leave for the following reasons.		KEPT BUT CHANGED	Q16	Revised question wording
Q6A1	Is up to 12 weeks of leave available for parents, including fathers as well as mothers, to care for a newborn?	YES 1 NO 2 (Q6B1) DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q16A	Combined into NEW Q16 series.
Q6A2	Are health benefits continued during leave (for parents, including fathers as well as mothers, to care for a newborn)?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3 DON'T OFFER HEALTH BENEFITS 4	KEPT BUT CHANGED	Q16X_7	Revised question wording (to ask about all types of leaves) and asked depending on answers to Q16.
Q6A3	Are employees guaranteed the same or equivalent job upon return (for parents, including fathers as well as mothers, to care for a newborn)?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q16X_8	Revised question wording (to ask about all types of leaves) and asked depending on answers to Q16.
Q6B1	Is up to 12 weeks of leave available for mothers and fathers for adoption or foster care placement?	YES 1 NO 2 (Q6C1) DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q16B	Combined into NEW Q16 series.
Q6B2	Are health benefits continued during leave (for mothers and fathers for adoption or foster care placement)?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3 DON'T OFFER HEALTH BENEFITS 4	KEPT BUT CHANGED	Q16X_7	Revised question wording (to ask about all types of leaves) and asked depending on answers to Q16.
Q6B3	Are employees guaranteed the same or equivalent job upon return (for mothers and fathers for adoption or foster care placement)?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q16_8	Revised question wording (to ask about all types of leaves) and asked depending on answers to Q16.

Q6C1	Is up to 12 weeks of leave available for an employee's own serious health condition other than maternity-related reasons? (IF NECESSARY: "This includes workman's compensation.")	YES 1 NO 2 (Q6D1) DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q16C	Combined into NEW Q16 series.
Q6C2	Are health benefits continued during leave (for an employee's own serious health condition other than maternity-related reasons)?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3 DON'T OFFER HEALTH BENEFITS 4	KEPT BUT CHANGED	Q16X_7	Revised question wording (to ask about all types of leaves) and asked depending on answers to Q16.
Q6C3	Are employees guaranteed the same or equivalent job upon return (for an employee's own serious health condition other than maternity-related reasons)?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q16X_8	Revised question wording (to ask about all types of leaves) and asked depending on answers to Q16.
Q6D1	Is up to 12 weeks of leave available for mothers for maternity-related reasons?	YES 1 NO 2 (Q6E1) DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q16D	Combined into NEW Q16 series.
Q6D2	Are health benefits continued during leave (for mothers for maternity-related reasons)?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3 DON'T OFFER HEALTH BENEFITS 4	KEPT BUT CHANGED	Q16X_7	Revised question wording (to ask about all types of leaves) and asked depending on answers to Q16.
Q6D3	Are employees guaranteed the same or equivalent job upon return (for mothers for maternity-related reasons)?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q16X_8	Revised question wording (to ask about all types of leaves) and asked depending on answers to Q16.
Q6E1	Is up to 12 weeks of leave available for the care of a child, spouse, or parent with a serious health condition?	YES 1 NO 2 (Q7) DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q16E	Combined into NEW Q16 series.
Q6E2	Are health benefits continued during leave (for the care of a child, spouse, or parent with a serious health condition)?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3 DON'T OFFER HEALTH BENEFITS 4	KEPT BUT CHANGED	Q16X_7	Revised question wording (to ask about all types of leaves) and asked depending on answers to Q16.
Q6E3	Are employees guaranteed the same or equivalent job upon return (for the care of a child, spouse, or parent with a serious health condition)?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q16X_8	Revised question wording (to ask about all types of leaves) and asked depending on answers to Q16.
Q7	We just asked you about your leave policies when an employee or the employee's family member has a serious health condition. How did you define a serious health condition when you told us about your leave policies?	Free Text	DROPPED		
Q8	At this location, does your organization provide...		DROPPED		

Q8A	Job-guaranteed leave for more than 12 weeks a year?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	DROPPED		
Q8B	Job-guaranteed leave to employees who have worked for your organization less than 12 months?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	DROPPED		
Q8C	Job-guaranteed leave to employees who have worked for you less than 1,250 hours in the previous year?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	DROPPED		
Q9	Are employees at this location provided any...		KEPT BUT CHANGED	Q11	Revised question wording and additional response categories. D. Paid maternity leave E. Paid paternity leave G. "Flex Time"
Q9A	A. Paid sick leave?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q11A	Revised response categories
Q9B	B. Paid disability leave?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q11B	Revised response categories
Q9C	C. Paid vacation?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q11C	Revised response categories
Q9D	D. Any other paid time off, excluding holidays?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q11H	Revised response categories
Q10 INTRO	We just asked if you provided certain kinds of paid leave. Now, we would like to know if you provide any leave to employees at this location at full pay or partial pay for particular circumstances. (IF Q9C =1 DISPLAY: "Please do not include any vacation leave that employees may receive.")		DROPPED		
A10A	Are parents, including fathers as well as mothers provided leave at full pay to care for a newborn?	YES 1 (Q10B) NO 2 DEPENDS ON CIRCUMSTANCES 3	COMBINED	Q16X_5	Old A10A and A10AA combined into NEW Q16X_5 and response categories changed.
A10AA	Is there any leave at partial pay for parents, including fathers as well as mothers, to care for a newborn?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	COMBINED	Q16X_5	Old A10A and A10AA combined into NEW Q16X_5 and response categories changed.



A10B	Are mothers and fathers provided leave at full pay for adoption or foster care placement	YES 1 (Q10C) NO 2 DEPENDS ON CIRCUMSTANCES 3	COMBINED	Q16X_5	Old A10B and A10BB combined into NEW Q16X_5 and response categories changed.
A10BB	Is there any leave at partial pay for mothers and fathers for adoption or foster care placement?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	COMBINED	Q16X_5	Old A10B and A10BB combined into NEW Q16X_5 and response categories changed.
A10C	Are employees provided leave at full pay for their own serious health condition other than maternity-related reasons?	YES 1 (Q10D) NO 2 DEPENDS ON CIRCUMSTANCES 3	COMBINED	Q16X_5	Old A10C and A10CC combined into NEW Q16X_5 and response categories changed.
A10CC	Is there any leave at partial pay for employee's own serious health condition other than maternity-related reasons?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	COMBINED	Q16X_5	Old A10C and A10CC combined into NEW Q16X_5 and response categories changed.
A10D	Are mothers provided leave at full pay for maternity-related reasons?	YES (Q10E) NO 2 DEPENDS ON CIRCUMSTANCES 3	COMBINED	Q16X_5	Old A10D and A10DD combined into NEW Q16X_5 and response categories changed.
A10DD	Is there any leave at partial pay for mothers for maternity-related reasons?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	COMBINED	Q16X_5	Old A10D and A10DD combined into NEW Q16X_5 and response categories changed.
A10E	Are employees provided leave at full pay to care for a child, spouse, or parent with a serious health condition?	YES 1 (Q11) NO 2 DEPENDS ON CIRCUMSTANCES 3	COMBINED	Q16X_5	Old A10E and A10EE combined into NEW Q16X_5 and response categories changed.
A10EE	Is there any leave at partial pay for care of a child, spouse, or parent for a serious health condition?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	COMBINED	Q16X_5	Old A10E and A10EE combined into NEW Q16X_5 and response categories changed.
Q11	When employees at this location take leave, does your organization:		DROPPED		
Q11A	A. Continue its contributions to a pension or retirement plan?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3 DOES NOT APPLY 4	DROPPED		
Q11B	B. Continue its contributions to life or disability insurance?	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3 DOES NOT APPLY 4	DROPPED		
Q12	Are employees at this location offered the following benefits?		DROPPED		
Q12A	A. Child care assistance, such as day care, or dependent care spending accounts	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	DROPPED		

Q12B	B. Elder care assistance	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	DROPPED		
Q12C	C. Flexible work schedules	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	DROPPED		
Q12D	D. Employee assistance program	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	DROPPED		
Q12E	E. Adoption assistance	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	DROPPED		
Q12F	F. Workplace provisions for lactation	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3	DROPPED		
Q13A	Does this location allow employees to take leave for attending school meetings or activities?	YES 1 NO 2 (Q13B) DEPENDS ON CIRCUMSTANCES 3	KEPT BUT CHANGED	Q14A	Revised question wording.
Q13A1	Is this leave separate from the employee's sick leave, vacation or personal days?	YES 1 NO 2 DOES NOT APPLY 3	DROPPED		
Q13B	Does this location allow employees to take leave for getting routine medical appointments for self and family?	YES 1 NO 2 (BOX BEFORE Q14) DEPENDS ON CIRCUMSTANCES 3	KEPT	Q14C	Revised question wording.
Q13B1	Is this leave separate from the employee's sick leave, vacation or personal days?	YES 1 NO 2 DOES NOT APPLY 3	DROPPED		
Q14	Are your family and medical leave policies determined at the...	Corporate level, 1 By each location, 2 Or both? 3 SOME OTHER WAY (SPECIFY) _____ 91	DROPPED		
Q15	Is this location in a state, county, or city that has its own family and medical leave law? (IF NECESSARY: This includes adding provisions to the Federal Family and Medical Leave Act.)	YES 1 NO 2 (Q16)	DROPPED		
Q15A	Does it apply to your organization at this location?	YES 1 NO 2	DROPPED		

Q16	In 1993, the Federal Family and Medical Leave Act was passed. It gives employees in certain organizations the right to take up to 12 weeks of unpaid, job-guaranteed leave a year for various family and medical reasons. Does the Federal Family and Medical Leave Act apply to this location, does it not apply, or are you not sure if it applies?	APPLIES 1 DOES NOT APPLY 2 (Q18) NOT SURE/DON'T KNOW 3 (Q18)	KEPT BUT CHANGED	Q17	Revised question wording.
Q16A	Has this location been covered by FMLA since the law took effect in 1994?	YES 1 (Q17) NO 2 NOT IN BUSINESS IN 1994 3	DROPPED		
Q16B	In what year did this location become covered by FMLA?	Free Text	DROPPED		
Q17	How many employees at this location have taken leave since January 1, 1999, which you classified as being under the Federal Family and Medical Leave Act?	Free Text - NUMBER	KEPT BUT CHANGED	Q19	Revised question wording and reference period based on responses to QTIME, Q2 and Q2.2
Q17A	How many of these employees took their leave on an intermittent basis? By intermittent, we mean taking leave a few hours or days at a time, on multiple occasions, but for the same reason.	Free Text - NUMBER OF EMPLOYEES	KEPT	Q21	
Q17B	{Of these {NUMBER IN Q17} employees,} how many took FMLA leave since January 1, 2000?	Free Text - NUMBER OF EMPLOYEES	DROPPED		
Q17C	How many of these employees took their leave on an intermittent basis, that is, taking leave a few hours or days at a time, on multiple occasions, but for the same reason?	Free Text - NUMBER OF EMPLOYEES	DROPPED		Intermittent leave for individualized reference period covered in new Q21.
Q17D	Since January 1, 1999, have any employees at this location been denied leave because they used their entire 12 week allotment covered by FMLA?	YES 1 NO 2 (Q17F)	KEPT BUT CHANGED	Q28	Revised question wording; reference period based on response to QTIME, Revised response categories
Q17E	How many employees were denied leave for this reason?	Free Text - NUMBER OF EMPLOYEES	DROPPED		
Q17F	Since January 1, 1999, have any eligible employees been denied leave because the Family and Medical Leave Act did not cover the reason?	YES 1 NO 2 (Q19)	KEPT BUT CHANGED	Q30	Revised question wording; reference period based on response to QTIME Revised response categories
Q17G	What reasons for leave were denied?	Free Text	DROPPED		
Q18	Since January 1, 2000, how many employees at this location have taken leave for family reasons or serious medical reasons lasting more than 3 days?	Free Text - NUMBER OF EMPLOYEES	KEPT BUT CHANGED	Q58	Reference period based on response to QTIME; revised question wording

Q18A	How many took leave in 1999? (IF NECESSARY: Leave for family reasons or serious medical reasons lasting more than 3 days.)	Free Text - NUMBER OF EMPLOYEES	DROPPED		
Q19	How does your organization cover work when employees take leave for a week or longer? Do you...		KEPT BUT CHANGED	Q61X and Q61aX	Revised question wording to cover leave over different durations
Q19A	A. Assign work temporarily to other employees?	YES 1 NO 2	KEPT	Q61XA	
Q19B	B. Hire an outside temporary replacement?	YES 1 NO 2	KEPT BUT CHANGED	Q61XB	Revised question wording
Q19C	C. Hire a permanent replacement?	YES 1 NO 2	KEPT	Q61XD	
Q19D	D. Put the work on hold until the employee returns from leave?	YES 1 NO 2	KEPT	Q61XE	
Q19E	E. Have the employee perform some work while on leave?	YES 1 NO 2	KEPT	Q61XF	
Q19F	F. Cover work some other way? (SPECIFY)___	YES 1 NO 2	KEPT	Q61XG	
Q19G	You just said that you {DISPLAY YES (Q19_ = 1) ANSWERS FROM Q19} when an employee takes leave for a week or longer. Which of these methods do you use most often at this location?	ITEMS 1-6	KEPT BUT CHANGED	Q61bX	Revised question wording
Q20	Does your organization maintain records of employee use of FMLA leave?	YES 1 NO 2 (Q21)	DROPPED		
Q20A	In some companies, employees take leave for family and medical reasons and it is not counted as FMLA leave. How often do you believe this happens in your company? Would you say...	All of the time, 1 Most of the time, 2 Some of the time, 3 Rarely, or 4 Never? 5	DROPPED		
Q21	Are employees at this location who are eligible for FMLA leave...		KEPT	Q44	

Q21A	A. Provided with written guidance on how the Act is coordinated with existing leave and benefits policies?	YES 1 NO 2 DEPENDS 3	KEPT	Q44A	
Q21B	B. Provided with written notice of how much of the leave taken was counted as FMLA leave?	YES 1 NO 2 DEPENDS 3	KEPT	Q44B	
Q21C	C. Required to provide medical documentation for covered leave due to a serious health condition?	YES 1 NO 2 DEPENDS 3	DROPPED		
Q21D	D. Required to use their paid leave before taking unpaid leave?	YES 1 NO 2 DEPENDS 3	KEPT	Q44C	
Q21E	E. Ever offered alternative work arrangements instead of leave?	YES 1 NO 2 DEPENDS 3	KEPT	Q44D	
Q22	Does this location offer the same family and medical leave benefits to employees who are not eligible for FMLA leave?	YES 1 NO 2	KEPT BUT CHANGED	Q46	Revised question wording; same FMLA benefits as employees who ARE eligible Additional response category (All employees are eligible)
Q23	Has your organization reduced benefits at this location to offset any increased costs associated with the Family and Medical Leave Act?	YES 1 NO 2 (Q24)	DROPPED		
Q23A	A. Paid vacation and personal leave	YES 1 NO 2	DROPPED		
Q23B	B. Paid sick leave	YES 1 NO 2	DROPPED		
Q23C	C. Health plan contributions	YES 1 NO 2	DROPPED		
Q23D	D. Pension/retirement plan contributions	YES 1 NO 2	DROPPED		
Q23E	E. Life insurance	YES 1 NO 2	DROPPED		
Q23F	F. Disability insurance	YES 1 NO 2	DROPPED		
Q23G	G. Other (SPECIFY)_____	YES 1 NO 2	DROPPED		

Q24	What effect has complying with the Federal Family and Medical Leave Act had on this location's {ITEM FROM LIST}? Would you say a positive effect, negative effect, or no noticeable effect?		KEPT BUT CHANGED	Q56	Revised question wording; revised response categories.
Q24A	A. Business productivity	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q24B	B. Business profitability	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	COMBINED	Q56	Combined with old Q24; Revised response categories
Q24C	C. Business growth	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q24D	D. Employee productivity	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	COMBINED	Q56	Combined with old Q24; Revised response categories
Q24E	E. Employee absences	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	COMBINED	Q56	Combined with old Q24; Revised response categories
Q24F	F. Employee turnover	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	COMBINED	Q56	Combined with old Q24; Revised response categories
Q24H	H. Employee career advancement	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	COMBINED	Q56	Combined with old Q24; Revised response categories
Q24I	I. Employee morale	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	COMBINED	Q56	Combined with old Q24; Revised response categories
Q25	You told us that this location has been covered by FMLA since {YEAR FROM Q16B or '1994'}. During that time, has complying with the Federal Family and Medical Leave Act increased, decreased, or not changed {ITEM FROM LIST}?		KEPT BUT CHANGED	Q49	Revised question wording, no reference period
Q25A	A. Administrative costs	INCREASED 1 DECREASED 2 NOT CHANGED 3 NO OTHER COSTS 4	KEPT BUT CHANGED	Q49A	Revised response categories

Q25B	B. Cost of continuing benefits such as health plans during leave	INCREASED 1 DECREASED 2 NOT CHANGED 3 NO OTHER COSTS 4	KEPT BUT CHANGED	Q49B	Revised response categories
Q25C	C. Hiring/training costs	INCREASED 1 DECREASED 2 NOT CHANGED 3 NO OTHER COSTS 4	KEPT BUT CHANGED	Q49C	Revised response categories
Q25D	D. Other costs (SPECIFY) _____	INCREASED 1 DECREASED 2 NOT CHANGED 3 NO OTHER COSTS 4	KEPT BUT CHANGED	Q49D	Revised response categories
Q26	Since January 1, 1999, to what extent has complying with the Federal Family and Medical Leave Act increased this location's {READ ITEM FROM LIST}? Would you say there has been no increase, a small increase, a moderate increase or a large increase?		DROPPED		Merged into old Q25 questions (NEW Q53 series) and not related to specific reference period
Q26A	A. Administrative costs	NO INCREASE 1 SMALL INCREASE 2 MODERATE INCREASE 3 LARGE INCREASE 4 NO OTHER COSTS 5	DROPPED		Merged into old Q25 questions (NEW Q53 series) and not related to specific reference period
Q26B	B. Cost of continuing benefits such as health plans during leave	NO INCREASE 1 SMALL INCREASE 2 MODERATE INCREASE 3 LARGE INCREASE 4 NO OTHER COSTS 5	DROPPED		Merged into old Q25 questions (NEW Q53 series) and not related to specific reference period
Q26C	C. Hiring/training costs	NO INCREASE 1 SMALL INCREASE 2 MODERATE INCREASE 3 LARGE INCREASE 4 NO OTHER COSTS 5	DROPPED		Merged into old Q25 questions (NEW Q53 series) and not related to specific reference period
Q26D	D. Other costs (SPECIFY) _____	NO INCREASE 1 SMALL INCREASE 2 MODERATE INCREASE 3 LARGE INCREASE 4 NO OTHER COSTS 5	DROPPED		Merged into old Q25 questions (NEW Q53 series) and not related to specific reference period

Q27	Has complying with the Federal Family Medical Leave Act resulted in any cost savings at this location, for example, in reducing employee turnover?	YES 1 NO 2 (Q28)	KEPT	Q53	Revised question wording
Q27A	What are these savings?	Free Text	DROPPED		
Q28	How easy or difficult are each of the following activities for your organization? {ITEM FROM LIST}. Would you say very easy, somewhat easy, somewhat difficult, or very difficult?		KEPT	Q50	
Q28A	A. Maintaining additional record keeping necessary for the Family and Medical Leave Act	VERY EASY 1 SOMEWHAT EASY 2 SOMEWHAT DIFFICULT 3 VERY DIFFICULT 4 NA 5	DROPPED		
Q28B	B. Determining whether the Act applies to your organization	VERY EASY 1 SOMEWHAT EASY 2 SOMEWHAT DIFFICULT 3 VERY DIFFICULT 4 NA 5	DROPPED		
Q28C	C. Determining whether certain employees are eligible for leave under the Act	VERY EASY 1 SOMEWHAT EASY 2 SOMEWHAT DIFFICULT 3 VERY DIFFICULT 4 NA 5	DROPPED		
Q28D	D. Coordinating state and federal leave policies	VERY EASY 1 SOMEWHAT EASY 2 SOMEWHAT DIFFICULT 3 VERY DIFFICULT 4 NA 5	KEPT	Q50A	
Q28E	E. Coordinating the Act with other federal laws	VERY EASY 1 SOMEWHAT EASY 2 SOMEWHAT DIFFICULT 3 VERY DIFFICULT 4 NA 5	KEPT	Q50B	
Q28F	F. Coordinating the Act with other leave policies	VERY EASY 1 SOMEWHAT EASY 2 SOMEWHAT DIFFICULT 3 VERY DIFFICULT 4 NA 5	KEPT	Q50C	



Q28G	G. Coordinating the Act with employee attendance policies	VERY EASY 1 SOMEWHAT EASY 2 SOMEWHAT DIFFICULT 3 VERY DIFFICULT 4 NA 5	KEPT	Q50D	
Q28H	H. Administering FMLA's notification, designation, and certification requirements	VERY EASY 1 SOMEWHAT EASY 2 SOMEWHAT DIFFICULT 3 VERY DIFFICULT 4 NA 5	KEPT	Q50F	
Q28I	I. Determining if a health condition is a serious health condition under FMLA	VERY EASY 1 SOMEWHAT EASY 2 SOMEWHAT DIFFICULT 3 VERY DIFFICULT 4 NA 5	KEPT	Q50G	
Q29	FMLA allows employees to take intermittent leave. Has leave taken on an intermittent basis had an impact on this location's productivity?	YES 1 NO 2 (Q30)	KEPT BUT CHANGED	Q54	Revised question wording
Q29A	Has this impact on productivity been positive or negative?	POSITIVE 1 NEGATIVE 2	KEPT BUT CHANGED	Q54a	Response category added (some positive some negative)
Q29B	Would you say this impact on productivity has been small, moderate or large?	SMALL 1 MODERATE 2 LARGE 3	KEPT	Q54b	
Q30	Has leave taken on an intermittent basis had an impact on this location's profitability?	YES 1 NO 2 (Q31)	KEPT BUT CHANGED	Q55	Revised question wording
Q30A	Has this impact on profitability been positive or negative?	POSITIVE 1 NEGATIVE 2	KEPT BUT CHANGED	Q55a	Response category added (some positive some negative)
Q30B	Would you say this impact on profitability has been small, moderate or large?	SMALL 1 MODERATE 2 LARGE 3	KEPT	Q55b	
Q31	From which of the following do you get information on the Family and Medical Leave Act?		KEPT	Q55	
Q31A	A. The U.S. Department of Labor	YES 1 NO 2	KEPT	Q55	
Q31B	B. The media	YES 1 NO 2	KEPT	Q55	
Q31C	C. A trade or business group	YES 1 NO 2	KEPT	Q55	

Q31D	D. An attorney or consultant	YES 1 NO 2	KEPT	Q55	
Q31E	E. A union	YES 1 NO 2	KEPT	Q55	
Q31F	F. Your employees	YES 1 NO 2	KEPT	Q55	
Q31G	G. The Internet	YES 1 NO 2	DROPPED		
Q31H	H. Some other source (SPECIFY)_____	YES 1 NO 2	KEPT	Q55	
Q31I	I. Existing company policies or procedures	YES 1 NO 2	KEPT	Q55	
Q32	Which of the following methods, if any, do you use to inform employees of their rights under FMLA?		KEPT	Q48	
Q32A	A. Employee handbook	YES 1 NO 2	KEPT	Q48	
Q32B	B. Notice on bulletin board	YES 1 NO 2	KEPT	Q48	
Q32C	C. Memos	YES 1 NO 2	KEPT	Q48	
Q32D	D. Computer network, Intranet or Email	YES 1 NO 2	KEPT	Q48	
Q32E	E. Oral notification	YES 1 NO 2	KEPT	Q48	
Q32F	F. Some other method (SPECIFY)_____	YES 1 NO 2	KEPT	Q48	
Q32G	Do you inform your employees of their rights under the FMLA?	YES 1 NO 2	COMBINED	Q48	Combined into NEW Q56
Q33	The Family and Medical Leave Act contains several provisions designed to assist in managing employee's use of FMLA leave. I'm going to read to you a list of these provisions and I'd like you to tell me how useful these provisions are in managing your employee's use of FMLA leave. Let's begin. Would you say {ITEM FROM LIST} is very useful, somewhat useful, or not at all useful in managing your employees use of FMLA leave?		KEPT BUT CHANGED	Q51	Revised question wording

Q33A	A. The exception for highly paid key employees	VERY USEFUL 1 SOMEWHAT USEFUL 2 NOT AT ALL USEFUL 3 NA	KEPT	Q51A	Revised response categories
Q33B	B. Written medical certifications	VERY USEFUL 1 SOMEWHAT USEFUL 2 NOT AT ALL USEFUL 3 NA	KEPT	Q51B	Revised item wording; revised response categories
Q33C	C. Second and third medical opinions	VERY USEFUL 1 SOMEWHAT USEFUL 2 NOT AT ALL USEFUL 3 NA	KEPT	Q51C	Revised response categories
Q33D	D. Advance notice of foreseeable leave	VERY USEFUL 1 SOMEWHAT USEFUL 2 NOT AT ALL USEFUL 3 NA	KEPT	Q51D	Revised response categories
Q33E	E. Transfer to alternative position	VERY USEFUL 1 SOMEWHAT USEFUL 2 NOT AT ALL USEFUL 3 NA	KEPT	Q51E	Revised response categories
Q33F	F. Any other provision? (Specify)_____	VERY USEFUL 1 SOMEWHAT USEFUL 2 NOT AT ALL USEFUL 3 NA 4	DROPPED		
Q34	Overall, how easy or difficult has it been for your organization to comply with the requirements of the Family and Medical Leave Act? Would you say it was:	Very easy, 1 Somewhat easy, 2 Somewhat difficult, or 3 Very difficult? 4	KEPT	Q52	Revised question wording; revised response categories
Q35	Did any employees at this location take leave under the Family and Medical Leave Act since January 1st of 1999 and then choose NOT to return to work for you?	YES 1 NO 2 (Q36)	KEPT BUT CHANGED	Q23	Reference period based on response to QTIME
Q35A	How many employees chose not to return?	Free Text - NUMBER OF EMPLOYEES	KEPT	Q24	
Q35B	Did you attempt to recover from these employees any health insurance benefits to which your organization was entitled?	YES 1 NO 2 (Q36)	DROPPED		
Q35C	Did you successfully recover these payments?	YES 1 NO 2 (Q36)	DROPPED		

Q35D	How easy or difficult was it to recover the benefit payment? Would you say...	Very easy, 1 Somewhat easy, 2 Somewhat difficult, or 3 Very difficult? 4	DROPPED		
Q36	Has the Family and Medical Leave Act had any effects at this location NOT already covered in this survey?	YES 1 NO 2 (Q41) IF YES, SPECIFY _____ (Q41)	DROPPED		
Q37	What effect has your family and medical leave policies had on this location's {ITEM FROM LIST}? Would you say a positive effect, a negative effect, or no noticeable effect?		DROPPED		
Q37A	A. Business productivity	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q37B	B. Business profitability	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q37C	C. Business growth	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q37D	D. Employee productivity	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q37E	E. Employee absences	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q37F	F. Employee turnover	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q37H	H. Employee career advancement	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q37I	I. Employee morale	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		

Q38	<p>Earlier I told you about the Federal Family and Medical Leave Act of 1993. It gives employees in certain organizations the right to take up to 12 weeks of unpaid, job-guaranteed leave a year for various family and medical reasons.</p> <p>Imagine for a moment this law applied to your organization. What effect would complying with the law have on this location's {ITEM FROM LIST}? Would you say a positive effect, a negative effect, or no noticeable effect?</p>		DROPPED		
Q38A	A. Business productivity	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q38B	B. Business profitability	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q38C	C. Business growth	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q38D	D. Employee productivity	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q38E	E. Employee absences	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q38F	F. Employee turnover	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q38H	H. Employee career advancement	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		
Q38I	I. Employee morale	POSITIVE EFFECT 1 NEGATIVE EFFECT 2 NO NOTICEABLE EFFECT 3	DROPPED		

Q39	To what extent would complying with the Federal Family and Medical Leave Act increase this location's {ITEM FROM LIST}? Would you say no increase, small increase, moderate increase, or a large increase?		DROPPED		
Q39A	A. Administrative costs	NO INCREASE 1 SMALL INCREASE 2 MODERATE INCREASE 3 LARGE INCREASE 4	DROPPED		
Q39B	B. Hiring/training costs	NO INCREASE 1 SMALL INCREASE 2 MODERATE INCREASE 3 LARGE INCREASE 4	DROPPED		
Q39D	D. Litigation costs	NO INCREASE 1 SMALL INCREASE 2 MODERATE INCREASE 3 LARGE INCREASE 4	DROPPED		
Q39C	C. Other costs (SPECIFY) _____	NO INCREASE 1 SMALL INCREASE 2 MODERATE INCREASE 3 LARGE INCREASE 4 NO COST 5	DROPPED		
Q40	Would complying with the Federal Family and Medical Leave Act result in any cost savings at this location, for example, in reducing employee turnover?	YES 1 NO 2	DROPPED		
Q41	How many other people in your organization did you consult to obtain the information we have asked for in this survey?	NONE 0 ONE 1 TWO 2 THREE 3 FOUR OR MORE 4	DROPPED		
Q42	Did you or anyone else check in your organization's records to provide us information requested in this survey?	YES 1 NO 2	DROPPED		
Q43	In what year did you begin working in your current position with this organization?	Free Text	DROPPED		
Q44	What is your current job title?	Free Text	DROPPED		
Q45	Do you have any other comments or concerns related to family and medical leave issues?	Free Text	DROPPED		

	<p>The survey contains several questions that require information over a 12-month period. You may provide this information for any 12-month period between January 2010 and now that is most convenient to you. Please select the 12-month reporting period for this survey.</p>	<p>January 2010 to December 2010 1  February 2010 to January 2011 2  March 2010 to February 2011 3  April 2010 to March 2011 4  May 2010 to April 2011 5</p>	NEW	QTIME	
	<p>You have indicated that, including yourself, there are ZERO (0) employees currently on your payroll. Is that correct?</p>	<p>YES 1  NO 2  REFUSED 9</p>	NEW	Q1.1	
	<p>Can you please provide a range of employees currently on your payroll?</p>	<p>1-10 1  11-24 2  25-49 3  50-99 4  100-250 5  251-999 6  1,000+ 7  REF 9</p>	NEW	Q1.2	
	<p>Most of our questions request information about your work site at its address, for example [LOCATION ADDRESS]. Many companies have branches or offices located outside of the main or headquarter city. Our study has been designed to scientifically select work [BOLD-&gt;] sites [&lt;-BOLD], as opposed to entire companies. In order to get the most accurate data possible, we will need you to report on your work site's address, for example the [LOCATION ADDRESS] location, for most of our questions. Since we will be referring to this location several times throughout the survey, can you please tell me how we should refer to it throughout the survey? For example, do you call it the [FILL SAMPLE CITY] office, or branch? Or something else?</p>	<p>[FILL SAMPLE CITY] office 1  [FILL SAMPLE CITY] branch 2  Something else, please specify 3  REF 9</p>	NEW	INTRO2	

	<p>And how many employees report to or receive work from [WORK SITE FILL]?</p> <p>[Please think only about this location, not the entire firm or organization. This includes all individuals who receive work assignments from or are based out of this site, including those who may work from home or telecommute.]</p> <p>[Please enter zero (0) if the answer is "none".]</p>	Free text - Number	NEW	Q2	
	<p>You have indicated that, including yourself, there are ZERO (0) employees who report to or receive work from [WORK SITE FILL]. Is that correct?</p>	<p>YES 1</p> <p>NO 2</p> <p>REFUSED 9</p>	NEW	Q2.1	
	<p>Can you please provide a range of employees who report to or receive work from this location?</p>	<p>1-10 1</p> <p>11-24 2</p> <p>25-49 3</p> <p>50-99 4</p> <p>100-250 5</p> <p>251-999 6</p> <p>1,000+ 7</p> <p>REF 9</p>	NEW	Q2.2	
	<p>Can you please provide a range of employees who report to or receive work at sites within 75 miles of this location?</p>	<p>1-10 1</p> <p>11-24 2</p> <p>25-49 3</p> <p>50-99 4</p> <p>100-250 5</p> <p>251-999 6</p> <p>1,000+ 7</p> <p>REF 9</p>	NEW	Q3.1	
	<p>Just to confirm, we have your organization's main activity described as [INSERT INDUSTRY DESCRIPTION FROM SAMPLE]; is that correct?</p>	<p>YES 1</p> <p>NO 2</p> <p>REFUSED 9</p>	NEW	Q4	
	<p>How would you describe your company's main activity? [RECORD VERBATIM]</p>	Free text	NEW	Q5	
	<p>Across all sites in your organization, are any employees unionized?</p>	<p>YES 1</p> <p>NO 2</p> <p>REFUSED 9</p>	NEW	Q6a	
	<p>How many of your employees at [WORK SITE FILL] have been working at your organization for at least one year?</p>	<p>NUMBER 1</p> <p>PERCENT 2</p> <p>REFUSED 9</p>	NEW	Q8	



	In what time increments do employees in your organization record their work time? Please select all that apply.	MINUTES 1 HOURS 2 NOT REQUIRED TO REPORT/RECORD WORK TIME 3 REFUSED 9	NEW	Q10	
	How many employees are provided... D. Paid maternity leave	ALL 1 MOST 2 SOME 3 NONE 4 DK 8 REFUSED 9	NEW	Q11D	
	How many employees are provided... E. Paid paternity leave	ALL 1 MOST 2 SOME 3 NONE 4 DK 8 REFUSED 9	NEW	Q11E	
	How many employees are provided... F. Paid time off [Instead of designating employee paid time off as vacation, sick leave and such, many employers lump it all together and simply call it "paid time off" or PTO for short. PTO provides a "pool" of hours that an employee can draw from to take time off from work, without having to specify a reason.]	ALL 1 MOST 2 SOME 3 NONE 4 DK 8 REFUSED 9	NEW	Q11F	
	How many employees are provided... G."Flex Time"	ALL 1 MOST 2 SOME 3 NONE 4 DK 8 REFUSED 9	NEW	Q11G	
	How many employees at [WORK SITE FILL] are allowed to take leave for the following reasons? B. For elder care reasons	ALL 1 MOST 2 SOME 3 NONE 4 REFUSED 9	NEW	Q14B	

	How many employees at [WORK SITE FILL] are allowed to take leave for the following reasons? D. For non-routine medical appointments, such as to see a specialist	ALL 1 MOST 2 SOME 3 NONE 4 REFUSED 9	NEW	Q14D	
	Does your company policy use a point or demerit system that tracks an employee's unscheduled absences?	YES FOR ALL EMPLOYEES 1 YES FOR SOME EMPLOYEES 2 NO 3 DEPENDS ON CIRCUMSTANCES 4 REFUSED 9	NEW	Q15	
	For employees at this location, does this site's policies allow for family or medical leave for the following reasons?... F. For care of a parent or spouse who is elderly	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3 DK 8 REFUSED 9	NEW	Q16F	
	For employees at this location, does this site's policies allow for family or medical leave for the following reasons?...G. For the care of a military service member with a serious injury or illness	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3 DK 8 REFUSED 9	NEW	Q16G	
	For employees at this location, does this site's policies allow for family or medical leave for the following reasons?... H. For reasons related to the deployment of a military service member	YES 1 NO 2 DEPENDS ON CIRCUMSTANCES 3 DK 8 REFUSED 9	NEW	Q16H	
	Does this site's policies for these types of leave cover guardians and caregivers of a child regardless of their legal or biological relationship to that child?	YES 1 NO 2 DK 8 REFUSED 9	NEW	Q16X_1	
	How much notification is needed for foreseeable absences?	HOURS 1 DAYS 2 WEEKS 3 DK 8 REFUSED 9	NEW	Q16X_2	
	Does this site have a WRITTEN policy for taking family and medical leave?	YES 1 NO 2 REFUSED 9	NEW	Q16X_3	

	What is the MINIMUM time increment employees are permitted to take for these types of leave?	DAYS 1 HOURS 2 MINUTES 3 DK 8 REFUSED 9	NEW	Q16X_4	
	How much TOTAL time does this site allow the employee to take leave in a year FOR THE CARE OF A MILITARY SERVICE MEMBER with a serious injury or illness? Please respond in hours OR days OR weeks OR months.	HOURS 1 DAYS 2 WEEKS 3 MONTHS 4 Do not allow this type of leave 5 DK 8 REFUSED 9	NEW	Q16X_6a	
	How much TOTAL time does this site allow the employee to take leave in a year FOR ANY OF THE OTHER TYPES OF LEAVES? Please respond in hours OR days OR weeks OR months.	HOURS 1 DAYS 2 WEEKS 3 MONTHS 4 REFUSED 9	NEW	Q16X_6b	
	Does your company process requests for FMLA internally, or do you utilize a third party for this?	INTERNALLY 1 OUTSOURCE TO A THIRD PARTY 2 OTHER 3 REFUSED 9	NEW	Q18	
	At the beginning, you told us that [WORK SITE FILL] has a total of [INSERT # OF EMPLOYEES FROM Q2 OR RANGE FROM Q2.2] employees. [From [FILL 12-MONTH PERIOD HERE]], how many of those employees took leave that you classified as being under FMLA?	Free text - number	NEW	Q19	
	We just asked you about the total number of EMPLOYEES that have taken leave [from [INSERT 12-MONTH REFERENCE PERIOD]]. Can you please provide the total number of separate LEAVES taken in this same time period? A leave is time taken off for a single reason; this time could be taken all at once or intermittently over time.	Free text - number	NEW	Q20	

	How would you evaluate the ease or difficulty of administering intermittent leaves?	VERY EASY 1 SOMEWHAT EASY 2 NEITHER EASY OR DIFFICULT 3 SOMEWHAT DIFFICULT 4 VERY DIFFICULT 5 REFUSED 9	NEW	Q21a	
	Of the FMLA granted leave(s) taken during the last 12 months, what percent would you estimate were taken on an intermittent basis?	NONE 1 1-5% 2 6-10% 3 11-5% 4 16-20% 5 21-50% 6 MORE THAN 50% 7 DK 8 REFUSED 9	NEW	Q21b	
	What is your policy on intermittent leave for shift workers; do you permit the employee to rejoin mid-shift or do you require the employee to take the entire shift as leave?	REJOIN MID-SHIFT 1 REQUIRE ENTIRE SHIFT AS LEAVE 2 DEPENDS ON SUPERVISOR 3 THIS ESTABLISHMENT DOES NOT HAVE SHIFT WORKERS 4 REFUSED 9	NEW	Q22	
	About how many leaves taken under FMLA are given with notice from the employee that is consistent with your company's policies?	ALL 1 MOST 2 ABOUT HALF 3 SOME 4 NONE 5 REFUSED 9	NEW	Q25	
	How many medical certifications did you accept as complete and sufficient from [12-MONTH REFERENCE PERIOD] at this location?	Free text - number	NEW	Q26	
	How many medical certifications for FMLA leave were returned to the employee to provide additional information from [12-MONTH REFERENCE PERIOD] at this location?	Free text - number	NEW	Q26a	

	How many FMLA leave applications have been denied [from [INSERT 12-MONTH REFERENCE PERIOD]] for ANY reason? [HYPERLINK "FMLA"]	All 1 Most 2 Some 3 None 4 DK 8 REF 9	NEW	Q27	
	How many eligible employees were denied leave for this reason?	Free text - number or percent	DROPPED		
	[From [INSERT 12-MONTH REFERENCE PERIOD]] have any eligible employees been denied Family and Medical Leave because they did not meet your establishment's notice requirements?	All 1 Most 2 Some 3 None 4 DK 8 REF 9	NEW	Q32	
	How many employees were denied leave for this reason?	Free text - number or percent	DROPPED		
	How often do you require medical certification for employees that request FMLA leave?	ALWAYS 1 MOST OF THE TIME 2 HALF THE TIME 3 SOMETIMES 4 NEVER 5 REFUSED 9	NEW	Q34	
	Does your establishment contact employees' health care providers as part of the certification process?	YES 1 NO 2 DEPENDS 3	NEW	Q35	
	Who makes contact with employees' health care providers on behalf of your establishment?	A THIRD PARTY VERIFICATION COMPANY 1 HR PERSONNEL 2 MANAGER 3 EMPLOYEES' DIRECT SUPERVISOR 4 SOMEONE ELSE, PLEASE SPECIFY 5 REFUSED 9	NEW	Q36	

	The FMLA generally permits employers to request re-certification of long term serious health conditions. How often do you require re-certification?	LESS FREQUENTLY THAN EVERY 6 MONTHS 1 EVERY SIX MONTHS 2 MORE FREQUENTLY THAN EVERY 6 MONTHS 3 NEVER 5 REFUSED 9	NEW	Q37	
	Under certain circumstances, the FMLA permits employers to request "fitness for duty" certification before an employee who has been on FMLA leave because of his or her own serious health condition can return to work. How often do you require a fitness for duty certification?	ALWAYS 1 MOST OF THE TIME 2 HALF THE TIME 3 SOMETIMES 4 NEVER 5 REFUSED 9	NEW	Q38	
	Who pays for each of the following types of certification visits? Please select all that apply		NEW	Q39	
	Initial medical certification	ESTABLISHMENT/EMPLOYER 1 EMPLOYEE 2 EMPLOYEE'S INSURANCE 3 OTHER SOURCE 4 REFUSED 5	NEW	Q39A	
	Re-certification	ESTABLISHMENT/EMPLOYER 1 EMPLOYEE 2 EMPLOYEE'S INSURANCE 3 OTHER SOURCE 4 REFUSED 5	NEW	Q39B	
	Second or third certifications	ESTABLISHMENT/EMPLOYER 1 EMPLOYEE 2 EMPLOYEE'S INSURANCE 3 OTHER SOURCE 4 REFUSED 5	NEW	Q39C	
	Fitness for duty certification	ESTABLISHMENT/EMPLOYER 1 EMPLOYEE 2 EMPLOYEE'S INSURANCE 3 OTHER SOURCE 4 REFUSED 5	NEW	Q39D	

	Insufficient certification correction	ESTABLISHMENT/EMPLOYER 1 EMPLOYEE 2 EMPLOYEE'S INSURANCE 3 OTHER SOURCE 4 REFUSED 5	NEW	Q39E	
	You told me that approximately [INSERT # FROM Q20] leaves were taken over the 12-month reporting period. How many of these leaves do you suspect were misused - that is, taken for reasons that are not covered by the FMLA?	Free text - number	NEW	Q40	
	You told me that 1 leave was taken over the 12-month reporting period. Do you suspect this leave was misused?	YES 1 NO 2 REFUSED 9	NEW	Q46a	

	<p>Why did you suspect this misuse? [SELECT ALL THAT APPLY]</p>	<p>Predictable leave pattern (around weekends, holidays, days off, etc.) 1</p> <p>Used leave to cover tardiness 2</p> <p>Used common excuses/doubting the reason for leave (migraines, back pain, etc.) 3</p> <p>Doubting the validity of a certification (heard information to the contrary, seen employee elsewhere performing allegedly restricted activity, etc.) 4</p> <p>Frequent leave with short or no advance notice provided or intermittent leave in general 5</p> <p>Past experience with employee (previous attendance problems, suspected of lying, past misuse, etc.) 6</p> <p>Some other reason not listed, please specify: _____ 7</p> <p>DK 8 REFUSED 9</p>	NEW	Q41	
	<p>Have you ever confirmed an employee's misuse of FMLA at this location?</p>	<p>YES 1 NO 2 DK 8 REFUSED 9</p>	NEW	Q42	
	<p>What disciplinary action was taken for the most recent case of FMLA misuse?</p>		NEW	Q43	
	<p>A. The absence counted against the employee on your point system</p>	<p>YES 1 NO 2 DK 8 REFUSED 9</p>	NEW	Q43A	



	B. The employee was given a verbal warning/disciplinary notice	YES 1 NO 2 DK 8 REFUSED 9	NEW	Q43B	
	C. The employee was given a written warning/disciplinary notice	YES 1 NO 2 DK 8 REFUSED 9	NEW	Q43C	
	D. The employee suspended	YES 1 NO 2 DK 8 REFUSED 9	NEW	Q43D	
	E. The employee terminated	YES 1 NO 2 DK 8 REFUSED 9	NEW	Q43E	
	F. Other, please specify _____	YES 1 NO 2 DK 8 REFUSED 9	NEW	Q43F	
	From which of the following sources do you get information on FMLA?	The U.S Department of Labor 1 The media 2 A trade or business group 3 An attorney or consultant 4 A union 5 Your employees 6 Existing company policies or procedures 7 Some other source 8 Do not use any source 9 DK 98 REF 99	NEW	Q47	

	In your entire organization, what types of employees do you consider to be ineligible for FMLA leave?	Senior managers/professional staff 1 Staff who have not worked a sufficient number of hours at the company 2 Hourly staff 3 All employees are eligible for FMLA leave 4 DK 8 REF 9	NEW	Q45	
	How easy or difficult are each of the following activities for your organization? E. Coordinating the Act with your Collective Bargaining Agreement	VERY EASY 1 SOMEWHAT EASY 2 SOMEWHAT DIFFICULT 3 VERY DIFFICULT 4 NA 5	NEW	Q50E	
	Which of the following methods, if any, do you use to inform employees of their rights under FMLA? ...Employee orientation and/or other meetings with employees	YES 1 NO 2	NEW	Q48	
	How helpful have the following provisions been in administering the FMLA at [WORK SITE FILL]? F. Medical re-certification	VERY HELPFUL 1 SOMEWHAT HELPFUL 2 NEITHER HELPFUL NOR UNHELPFUL 3 SOMEWHAT UNHELPFUL 4 VERY UNHELPFUL 5 NA 6 REFUSED 9	NEW	Q51F	
	How helpful have the following provisions been in administering the FMLA at [WORK SITE FILL]? G. The fitness for duty certification for employees	VERY HELPFUL 1 SOMEWHAT HELPFUL 2 NEITHER HELPFUL NOR UNHELPFUL 3 SOMEWHAT UNHELPFUL 4 VERY UNHELPFUL 5 NA 6 REFUSED 9	NEW	Q51G	

	How helpful have the following provisions been in administering the FMLA at [WORK SITE FILL]? H. Certification of leave for a reason related to the deployment of a military service member	VERY HELPFUL 1 SOMEWHAT HELPFUL 2 NEITHER HELPFUL NOR UNHELPFUL 3 SOMEWHAT UNHELPFUL 4 VERY UNHELPFUL 5 NA 6 REFUSED 9	NEW	Q51H	
	How helpful have the following provisions been in administering the FMLA at [WORK SITE FILL]? I. Certification of a serious injury or illness of a military service member	VERY HELPFUL 1 SOMEWHAT HELPFUL 2 NEITHER HELPFUL NOR UNHELPFUL 3 SOMEWHAT UNHELPFUL 4 VERY UNHELPFUL 5 NA 6 REFUSED 9	NEW	Q51I	
	How many of these employees took leave to care for a military service member with a serious injury or illness because they were the service member's spouse, son, daughter, parent or next of kin?	Free text - number	NEW	Q59	
	How many of these employees took leave for reasons related to the deployment of a spouse, son, daughter, or parent who is a military service member?	Free text - number	NEW	Q60	
	To cover work when employees take leave for a WEEK or longer, for a scheduled DAY or less, or for an unscheduled DAY or less, do you ever...C. Call an employee into work who is on vacation	YES 1 NO 2 DK 8 REFUSED 9	NEW	Q61XC	
	Do you [A-G] when employees take... B. Scheduled leave for a day or less	YES 1 NO 2 DK 8 REF 9	NEW	Q61aXB	Similar to Q19 in 2000 survey, but asks for different time period - scheduled leave for a day or less
	Do you [A-G] when employees take... C. Unscheduled leave for a day or less	YES 1 NO 2 DK 8 REF 9	NEW	Q61aXC	Similar to Q19 in 2000 survey, but asks for different time period - unscheduled leave for a day or less

	Do you [A-G] when employees take... D. Some other leave circumstance (SPECIFY)	YES 1 NO 2 DK 8 REF 9	NEW	Q61aXD	Similar to Q19 in 2000 survey, but asks for different time period - unscheduled leave for a day or less
	How easy or difficult is it for your company to deal with the following types of leaves?		NEW	Q67	
	Planned long term leave for a family or medical reason	VERY EASY 1 SOMEWHAT EASY 2 NEITHER EASY OR DIFFICULT 3 SOMEWHAT DIFFICULT 4 VERY DIFFICULT 5 REFUSED 9	NEW	Q67A	
	Planned short term leave	VERY EASY 1 SOMEWHAT EASY 2 NEITHER EASY OR DIFFICULT 3 SOMEWHAT DIFFICULT 4 VERY DIFFICULT 5 REFUSED 9	NEW	Q67B	
	Planned episodic or intermittent leave	VERY EASY 1 SOMEWHAT EASY 2 NEITHER EASY OR DIFFICULT 3 SOMEWHAT DIFFICULT 4 VERY DIFFICULT 5 REFUSED 9	NEW	Q67C	
	Unplanned episodic or intermittent leave	VERY EASY 1 SOMEWHAT EASY 2 NEITHER EASY OR DIFFICULT 3 SOMEWHAT DIFFICULT 4 VERY DIFFICULT 5 REFUSED 9	NEW	Q67D	
	Unscheduled leave of any duration	VERY EASY 1 SOMEWHAT EASY 2 NEITHER EASY OR DIFFICULT 3 SOMEWHAT DIFFICULT 4 VERY DIFFICULT 5 REFUSED 9	NEW	Q67E	

	Do you have specific computer software or a person in human resources that tracks use of family and medical leave?	COMPUTER SOFTWARE 1 DESIGNATED PERSON IN HUMAN RESOURCES 2 BOTH COMPUTER SOFTWARE AND DESIGNATED HR PERSON 3 OTHER METHOD OF TRACKING FMLA LEAVE 4 DO NOT TRACK FAMILY AND MEDICAL LEAVE 5 REFUSED	NEW	Q68	
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