

# CDC National Healthy Worksite Program (NHWP) All Employee Survey

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#### Introduction

This survey asks about your perceptions of your work environment, working conditions, and the attitudes of your supervisor and coworkers that support a healthy worksite culture. Our task is to provide the Centers for Disease Control and Prevention (CDC) with an evaluation that will further CDC's understanding of worksite cultural factors that influence employee health behaviors and health outcomes.

#### Informed Consent

Before you get started, we'd like need to give you some more information to help you decide whether or not you would like to participate.

- This project is funded by the Centers for Disease Control and Prevention. Many parts of the project are being managed by Viridian Health Management (Viridian). Viridian is a private health and wellness company based in Phoenix, AZ. Viridian provides flexible, customized solutions to building comprehensive healthy worksite programs. They are helping CDC implement the National Healthy Worksite (NHW) program.
- You were asked to participate because your worksite is participating in the National Healthy Worksite (NHW) program as a benefit to employees. All employees at your worksite will be asked to complete this questionnaire at the beginning and at the end of the NHW program.
- Your participation in this survey is voluntary. In the course of this survey, you may refuse to answer specific questions. You may also choose to end the discussion at any time.
- The survey is designed to take about 30 minutes.
- There are no right or wrong answers or ideas—we want to hear about YOUR experiences and opinions.
- All of the comments you provide will be maintained in a secure manner. We will not disclose your
  responses or anything about you unless we are compelled by law. Your responses will be combined with
  other information we receive and reported in the aggregate as feedback from the group. In our project
  reports, your name will not be linked to the comments you provide in this discussion.
- CDC is authorized to collect information for this project under the Public Health Services Act.
- There are no personal risks or personal benefits to you for participating in this discussion.
- We are interested in your comments so that we can improve the NHW program for future participants. Please feel free to contact [INSERT WORKSITE NHWP PROGRAM MANAGER]. [HIS/HER] number is [INSERT TEL #]. You can also call Viridian Health Management toll-free at 1-877-486-0140.

### Instructions

To make sure that health-related information and programs are tailored to affect your health problems and concerns, we are asking each employee to fill out this survey. **DO NOT** write your name on this survey.

When you have completed this survey, please seal it in the envelope provided and place it in one of the collection boxes located throughout your worksite by [INSERT DATE] or give it [INSERT WORKSITE NHWP PROGRAM MANAGER]. If you have any questions, Please feel free to contact [INSERT WORKSITE NHWP PROGRAM MANAGER]. [HIS/HER] number is [INSERT TEL #].

Thank you very much for your participation.

	Employer Name:	Survey Date:							
To what extent do you agree with the following statements?									
Q#	Question	Response							
1	In this facility, management considers workplace health and safety to be important.	Strongly disagree	Disagree	Agree	Strongly agree				
2	My supervisor understands and supports my family and other personal responsibilities.	Strongly disagree	Disagree	Agree	Strongly agree				
3	On my job, I have very little freedom to decide how I do my work.	Strongly disagree	Disagree	Agree	Strongly agree				
4	My job allows me to make a lot of decisions on my own	Strongly disagree	Disagree	Agree	Strongly agree				
5	I have enough time to get the job done	Strongly disagree	Disagree	Agree	Strongly agree				
6	My job requires working very hard	Strongly disagree	Disagree	Agree	Strongly agree				
7	The people I work with take a personal interest in me	Strongly disagree	Disagree	Agree	Strongly agree				
8	The people I work with can be relied on when I need help	Strongly disagree	Disagree	Agree	Strongly agree				
9	My supervisor is concerned about the welfare of those under him or her	Strongly disagree	Disagree	Agree	Strongly agree				
10	My supervisor is helpful in getting the job done	Strongly disagree	Disagree	Agree	Strongly agree				
11	My job requires me to be creative	Strongly disagree	Disagree	Agree	Strongly agree				

Q#	Question	Response							
12	My job requires a high level of skill	Strongly disagree	Disagree	Agree	Strongly agree				
13	My job requires me to do repeated lifting, pushing, pulling or bending	Strongly disagree	Disagree	Agree	Strongly agree				
14	My job regularly requires me to perform repetitive or forceful hand movements	Strongly disagree	Disagree	Agree	Strongly agree				
To wh	nat extent do you agree with the following	statements?							
Q#	Question	Response							
15	All employee concerns are heard before job decisions are made.	Strongly disagree	Disagree	Neutral	Agree	Strongly agree			
16	Job decisions are applied consistently to all affected employees.	Strongly disagree	Disagree	Neutral	Agree	Strongly agree			
17	You would be taken seriously if you complained about disrespectful treatment.	Strongly disagree	Disagree	Neutral	Agree	Strongly agree			
18	Respectful treatment is the norm in your unit/work group.	Strongly disagree	Disagree	Neutral	Agree	Strongly agree			
19	My job duties often interfere with my ability to comply with safety regulations.	Strongly disagree	Disagree	Neutral	Agree	Strongly agree			
Please	e answer the following questions.								
Q#	Question	Response							
20	How often do things going on at work make you feel tense and irritable at home?	Never	Occasionally	Sometimes	Often	Most of the time			
21	How often do things going on at home make you feel tense and irritable on the job?	Never	Occasionally	Sometimes	Often	Most of the time			

Please	rate the following in a scale of 1-10.											
Q#	Question	Res	Response									
22	Overall, how safe do you think your workplace is (1 -extremely unsafe to 10- extremely safe)		1	2	3	4	5	6	7	8	9	10
23	Overall, how supportive is your company of your personal health, from (1 - extremely unsupportive to 10 - extremely supportive)?	1		2	3	4	5	6	7	8	9	10
	e following questions, please think about at its best has a value of 10 points.	your	work	on YO	UR CL	JRRENT	T MAII	N JOB. A	ssume	e that y	our w	ork
24	How many points would you give your CURRENT ABILITY TO WORK? (0 means that you cannot work at all; 10 means your work ability is currently at its lifetime best)?	0	1	2	3	4	5	6	7	8	9	10
25	Thinking about the <i>physical demands</i> of your job, how do you rate your current ability to meet those demands (0 means that you cannot work at all; 10 means your work ability is currently at its lifetime best)?	0	1	2	3	4	5	6	7	8	9	10
26	Thinking about the <u>mental demands</u> of your job, how do you rate your current ability to meet those demands (0 means that you cannot work at all; 10 means your work ability is currently at its lifetime best)?	0	1	2	3	4	5	6	7	8	9	10
27	Thinking about the <u>interpersonal</u> <u>demands</u> of your job, how do you rate your current ability to meet those demands (0 means that you cannot work at all; 10 means your work ability is currently at its lifetime best)?	0	1	2	3	4	5	6	7	8	9	10
	erate how you feel about each of the follo Please check 1 box for each item below).	wing	state	ments	: "My	emplo	yer ha	as provid	ded m	e with t	the op	portunity
Q#	Question	Response										
28		Strongly disagree			е	Disagree Neutr		Neutral	al Agree		Strongly agree	
	a. Be physically active											_
	b. Eat a healthy diet											
	c. Live tobacco free											
	d. Manage my stress											
	e. Work safely											

To wha	at extent do you agree with the following	statements?							
Q#	Question	Response							
29	Many of my coworkers engage in unhealthy behaviors	Strongly disagree	Disagree	Neutral	Agree	Strongly agree			
30	If my health gets worse, my coworkers would support my recovery	Strongly disagree	Disagree	Neutral	Agree	Strongly agree			
31	My coworkers would support my use of sick days for illness or mental health	Strongly disagree	Disagree	Neutral	Agree	Strongly agree			
32	My supervisor encourages healthy behaviors	Strongly disagree	Disagree	Neutral	Agree	Strongly agree			
33	My organization encourages me to make suggestions about employee safety, health and well-being	Strongly disagree	Disagree	Neutral	Agree	Strongly agree			
34	Overall I would recommend working with this organization to my family and friends.	Strongly disagree	Disagree	Neutral	Agree	Strongly agree			
35	I often think about quitting my job.	Strongly disagree	Disagree	Neutral	Agree	Strongly agree			
36	I will probably look for a new job during the next year.	Strongly disagree	Disagree	Neutral	Agree	Strongly agree			
Please	answer the following questions.	<u> </u>							
Q#	Questions	Response							
37	All in all, how satisfied would you say you are with your job?	Very Satisfied Satisfied Dissatisfied Very Diss				satisfied			
38	How much time do you spend traveling to and from work each day (roundtrip)?	< 15 minutes	15-30 minutes	30 - 60 minutes	60 - 90 minutes	> 90 minutes			
39	What is the highest grade or year of sch	mpleted (Che	ck One):						
	Never attended school or only attended kindergarten								
	Grades 1 through 8 (elementary)								
	Grades 9 through 11 (some high school)								
	Grade 12 or GED (high school graduate)								
	College 1 year to 3 years (some college or technical school)								
	College 4 years or more (College graduate)								
4.0	College 4 years or more (College gradua	te)							
40	College 4 years or more (College gradual What is your current marital status (Che	•							
40		•							
40	What is your current marital status (Che	•							
40	What is your current marital status (Che	•							
40	What is your current marital status (Che Married Divorced	•							
40	What is your current marital status (Che Married Divorced Widowed	•							

Please	e answer the following questio	ns.						
41	What is your level of supervisory responsibility (Check One)?							
	No supervisory responsibility							
	Team leader							
	First line supervisor							
	Manager							
	Executive							
42a	Are you Hispanic or Latino?							
	Yes							
	No							
	Don't Know / Not Sure							
42b	Which one of these groups would you say best represents your race?							
	White							
	Black or African American							
	Asian							
	Native Hawaiian or Other Pacific Islander							
	American Indian or Alaska Native							
	Other (Specify):							
43	Date of Birth	mm/dd/yyyy						
44	Gender	Male	Female					

## Thank You!