NIOSH Health Hazard Evaluation Survey: Final Report This survey asks your thoughts about the health hazard evaluation NIOSH recently completed concerning your workplace. Please fill in circles completely like this: O Yes 1. Have any **changes** been made at the workplace based O No on the NIOSH recommendations? O I don't know O Yes 2. Do you think NIOSH helped make things better at O No the workplace? O No changes were needed 3. If "Yes" to Question 2, please describe the positive changes. 4. After the site visit(s), did NIOSH keep you well O Yes **informed** about the health hazard evaluation progress? O No O Yes 5. Did NIOSH issue the final report in a **reasonable** O No amount of time? O I don't know 6. Did the employer **post the final report** so employees O Yes O No could see it? O I don't know

NIOSH Health Hazard Evaluation Survey: Final Report			
7.	Did you read the final report?	O Yes O No	
8.	Do you think the final report is helpful ?	O Yes, definitely O Yes, probably O Probably not O Definitely not O I don't know	
9.	Did the NIOSH response change your thinking about the workplace concerns?	O Yes O No	
10.	Please explain your answer		
11.	Which best describes what you think NIOSH found?	 O NIOSH found a health hazard O NIOSH did not find a health hazard O NIOSH did not decide whether there was a health hazard O The NIOSH findings were not clear to me O I don't know 	
12.	Overall, do you agree with the NIOSH findings?	O Yes O No O I'm not sure	
13.	Overall, do you think the NIOSH recommendations address the workplace concerns well?	O Yes O No O I don't know	
14.	Overall , do you think the NIOSH recommendations are practical ?	O Yes O No O I don't know	

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15.	What do you think about the health hazard evaluation?	O It was Excellent O It was Good O It was Fair O It was Poor	
16.	If you were concerned about a possible workplace health hazard in the future, would you request a NIOSH health hazard evaluation?	O Yes O No	
17.	7. Please tell us more of your thoughts about the health hazard evaluation.		
18.	Will you be part of decision making related to the NIOSH recommendations?	O Yes; I have final authority O Yes; I provide input O No	
19.	Are you still associated with the workplace that NIOSH evaluated?	O Yes O No	
Please make any corrections to this label.			
	4/29/2014		
	Administrative area		

FOLLOWBACK SURVEY FORM 2B

375

Form Approved OMB No.: 0920-0260 Expiration Date:



Followback Survey

Final Report

The National Institute for Occupational Safety and Health (NIOSH) surveys people involved with its health hazard evaluations. We want to learn your thoughts about the evaluation and the report.

Your responses will be kept securely according to federal laws. Our reports include only summary information and will not identify you. About one year from now, we will send you the last survey, which asks about our recommendations.

Thank you for completing this survey



Please mail the completed survey to NIOSH in the enclosed postage paid envelope. Call Barbara Jenkins at 513-458-7132 if you have any questions about the survey.

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).