



Form Approved
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CDC Work@Health™ Wave 2 Trainee Reaction Survey

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Respondents/Sources	Method	Content	Timing	Respondents	Time per Respondent
Wave 2 trainees participating in the Work@Health™ Hands-on Training Model	Wave 2 Trainee Reaction Survey (conducted in paper form by PHMC)	<ul style="list-style-type: none"> • Satisfaction with training • Whether training met needs • Confidence in starting/expanding health program at their worksite 	At the conclusion of Train-the-Trainer graduates Hands-On session with trainees	150	0.25 hrs

This is a planned paper and pencil survey of Wave 2 employers who participated in the Hands-on training model of the Work@Health™ program. Work@Health™ is a program that trains employers in the design, implementation, and evaluation of worksite health and wellness programs. This survey will be administered immediately after the training has been completed in Winter-Spring 2014 to evaluate the effectiveness of those trained to train others through the Train-the-Trainer model.

Introduction

Thank you for your participation in today's training for the CDC Work@Health™ program. This survey asks about your thoughts and opinions of the training. Your responses will help us make the Work@Health™ program most useful for employers.

Informed Consent

Before you get started, we'd like 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 (CDC). Many parts of this project are being managed by the ASHLIN Management Group (ASHLIN). ASHLIN is a private sector consulting firm with a focus in the area of health and human services based in Greenbelt, MD. They are helping CDC implement the Work@Health™ program. The Public Health Management Corporation (PHMC), a non-profit, public health institute located in Philadelphia, PA and part of the ASHLIN Team designed this survey.
- You are being asked to complete the survey because you participated in the Work@Health™ training.
- Your participation is voluntary, and you may skip any questions you do not want to answer. You may also choose to end the survey at any time.
- The survey is designed to take about 15 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 aggregate as feedback from all respondents. In our project reports, your name and your employer's name will not be linked to the information or comments you provide.
- There are no risks or benefits to you personally for participating in this survey.
- CDC is authorized to collect information for this project under the Public Health Services Act.
- If you have any questions, you can contact Kristin Minot. Her phone number is 215-985-2519 and her email is Kristin@phmc.org.

Thinking about the Work@Health™ training you just completed, please indicate to what extent you agree or disagree with each of the following statements.

	Strongly Disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree
Learning Environment					
1. The training materials were easy to understand.	1	2	3	4	5
2. The training materials increased my knowledge of worksite health and wellness.	1	2	3	4	5
3. The pace of the activities was too slow.	1	2	3	4	5
4. The pace of the activities was too fast.	1	2	3	4	5
5. The length of the training was too short.	1	2	3	4	5
6. The length of the training was too long.	1	2	3	4	5
Delivery					
7. I had enough time to complete the training activities.	1	2	3	4	5
8. I was given enough opportunity to get answers to my questions.	1	2	3	4	5
9. I did not have enough opportunity during the training to practice the skills that I was asked to learn.	1	2	3	4	5
10. I did not have enough time to interact with my peers who were participating in the training.	1	2	3	4	5
11. The facilitator demonstrated a good understanding of the material.	1	2	3	4	5
12. The facilitator effectively delivered the training activities.	1	2	3	4	5
13. The facilitator effectively delivered the feedback assessments.	1	2	3	4	5
14. The facilitator effectively delivered the training material.	1	2	3	4	5
15. The facilitator did a good job of generating participant interaction.	1	2	3	4	5
16. I was challenged by the training activities.	1	2	3	4	5

17. I was challenged by the training feedback assessments.	1	2	3	4	5
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The next set of questions are about the training activities. Please indicate how useful you found each of the following training activities:

How useful were:	Not at all Useful 1	Of little use 2	Moderately useful 3	Useful 4	Extremely Useful 5
18. The lectures	1	2	3	4	5
19. The PowerPoint presentations	1	2	3	4	5
20. The cooperative learning activities	1	2	3	4	5
21. The real world scenarios	1	2	3	4	5
22. The problem-solving activities	1	2	3	4	5
23. The face-to-face discussions	1	2	3	4	5

The next group of questions is about your perceptions of the individual training modules.

	Strongly Disagree 1	Disagree 2	Neither disagree nor agree 3	Agree 4	Strongly agree 5
24A. The learning objectives for the <i>Making the Business Case</i> module were clear.	1	2	3	4	5
24B. The learning objectives for the <i>Assessing Your Company's Current Support of Employee Health and Wellness</i> module were clear.	1	2	3	4	5
24C. The learning objectives for the <i>Planning and Designing a Comprehensive and Effective Program</i> module were clear.	1	2	3	4	5
24D. The learning objectives for the <i>Building and Sustaining a Total Leadership Approach</i> module were clear.	1	2	3	4	5
24E. The learning objectives for the <i>Implementing Key Policy, Benefit, and Environmental Supports</i> module were clear.	1	2	3	4	5
24F. The learning objectives for the <i>Designing an Effective Communications Campaign</i> module were clear.	1	2	3	4	5
24G. The learning objectives for the <i>Implementing and Sustaining Your Program</i> module were	1	2	3	4	5

clear.					
24H. The learning objectives for the <i>Evaluating Your Program</i> module were clear.	1	2	3	4	5
	Strongly Disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree
25A. The level of detail in the <i>Making the Business Case</i> module was appropriate.	1	2	3	4	5
25B. The level of detail in the <i>Assessing Your Company's Current Support of Employee Health and Wellness</i> module was appropriate.	1	2	3	4	5
25C. The level of detail in the <i>Planning and Designing a Comprehensive and Effective Program</i> module was appropriate.	1	2	3	4	5
25D. The level of detail in the <i>Building and Sustaining a Total Leadership Approach</i> module was appropriate.	1	2	3	4	5
25E. The level of detail in the <i>Implementing Key Policy, Benefit, and Environmental Supports</i> module was appropriate.	1	2	3	4	5
25F. The level of detail in the <i>Designing an Effective Communications Campaign</i> module was appropriate.	1	2	3	4	5
25G. The level of detail in the <i>Implementing and Sustaining Your Program</i> module was appropriate.	1	2	3	4	5
25H. The level of detail in the <i>Evaluating Your Program</i> module was appropriate.	1	2	3	4	5
	Not at all informative	Not very informative	Somewhat informative	Very Informative	
26A. How <u>informative</u> was the <i>Making the Business Case</i> module.	1	2	3	4	
26B. How <u>informative</u> was the <i>Assessing Your Company's Current Support of Employee Health and Wellness</i> module.	1	2	3	4	
26C. How <u>informative</u> was the <i>Planning and Designing a Comprehensive and Effective Program</i> module.	1	2	3	4	
26D. How <u>informative</u> was the <i>Building and Sustaining a Total Leadership Approach</i> module.	1	2	3	4	

26E. How <u>informative</u> was the <i>Implementing Key Policy, Benefit, and Environmental Supports</i> module.	1	2	3	4
26F. How <u>informative</u> was the <i>Designing an Effective Communications Campaign</i> module.	1	2	3	4
26G. How <u>informative</u> was the <i>Implementing and Sustaining Your Program</i> module.	1	2	3	4
26H. How <u>informative</u> was the <i>Evaluating Your Program</i> module.	1	2	3	4
	Not at all useful	Not very useful	Somewhat useful	Very useful
27A. How <u>useful</u> was the <i>Making the Business Case</i> module.	1	2	3	4
27B. How <u>useful</u> was the <i>Assessing Your Company's Current Support of Employee Health and Wellness</i> module.	1	2	3	4
27C. How <u>useful</u> was the <i>Planning and Designing a Comprehensive and Effective Program</i> module.	1	2	3	4
27D. How <u>useful</u> was the <i>Building and Sustaining a Total Leadership Approach</i> module.	1	2	3	4
27E. How <u>useful</u> was the <i>Implementing Key Policy, Benefit, and Environmental Supports</i> module.	1	2	3	4
27F. How <u>useful</u> was the <i>Designing an Effective Communications Campaign</i> module.	1	2	3	4
27G. How <u>useful</u> was the <i>Implementing and Sustaining Your Program</i> module.	1	2	3	4
27H. How <u>useful</u> was the <i>Evaluating Your Program</i> module.	1	2	3	4

The next group of questions is about your overall impressions of the training. For each question, please indicate the degree to which you agree or disagree with the following statements.

	Strongly Disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree
28. The overall course learning objectives were clear.	1	2	3	4	5
29. I understand how to apply what I learned in this training at my job.	1	2	3	4	5
30. I will be able to use what I learned in this	1	2	3	4	5

training at my job.					
31. I would recommend this training to others in my position.	1	2	3	4	5
32. The training topics met my needs.	1	2	3	4	5
33. The training met my expectations.	1	2	3	4	5
34. The Work@Health™ training was effective.	1	2	3	4	5

The next set of questions is about your ability to start or expand a worksite health program at your place of employment.

35. How **confident** are you in your ability to start or expand a worksite health program at your employer? (Circle one rating)

- 1) Not at all confident
- 2) A little confident
- 3) Confident
- 4) Very Confident
- 5) Extremely Confident

If you circled 1 or 2, please answer the following question. Check all that apply.

36. My confidence is not high because:

- a. I do not have the necessary knowledge and skills.
- b. I do not have a clear picture of what is expected of me.
- c. I have other priorities.
- d. I do not have the necessary resources to do it.
- e. I do not have the support from my employer to do it.
- f. Other (please explain).

Finally we would like to know your thoughts and suggestions for how the Work@Health™ program can be improved.

<p>37. What changes, if any, would you recommend to the Work@Health™ training? For example, would you recommend changes to the objectives, activities, assessments, materials or format of the training?</p>	
<p>38. Topics that were covered in the Work@Health™ training included making the case for a healthy worksite, leadership and motivation, data collection methods and tools, health promotion and safety, and program evaluation. What additional topics do you think should be covered in a worksite health and wellness training?</p>	
<p>39. How did you learn about the Work@Health™ program?</p>	<ul style="list-style-type: none"> <input type="radio"/> Through a business association (e.g., Small Business Association) <input type="radio"/> Website <input type="radio"/> Letter in the mail <input type="radio"/> Newspaper <input type="radio"/> Radio <input type="radio"/> Word of mouth <input type="radio"/> Colleague <input type="radio"/> CDC <input type="radio"/> ASHLIN Management Group <input type="radio"/> Other (please describe):
<p>40. What would encourage or motivate other employers/others in your position to attend a Work@Health™ training?</p>	
<p>41. What is the best way to reach other businesses like yours and tell them about the Work@Health™ program?</p>	
<p>42. What was the most important lesson or skill that you learned from the Work@Health™ training?</p>	
<p>43. What did you like the least about the Work@Health™ training?</p>	
<p>44. What did you like the most about the Work@Health™ training?</p>	

Employee Characteristics

45. What is your business title/role?

- CEO/President/Owner
- VP
- Director, HR
- Director, Benefits
- Wellness Manager
- Environmental Health and Safety Representative
- Union/Labor Representative
- Other (specify): _____

46. Number of employees at your site or business unit (full and part time)

47. What industry best describes your worksite?

- Agriculture, Forestry, Fishing and Hunting
- Mining, Quarrying, and Oil and Gas Extraction
- Utilities
- Construction
- Manufacturing
- Wholesale Trade
- Retail Trade
- Transportation and Warehousing
- Information
- Finance and Insurance
- Real Estate and Rental and Leasing
- Professional, Scientific, and Technical Services
- Management of Companies and Enterprises
- Administrative and Support and Waste Management and Remediation Services
- Educational Services
- Health Care and Social Assistance
- Arts, Entertainment, and Recreation
- Accommodation and Food Services
- Public Administration
- Other Services (specify) _____