

Welcome to the NICHD Staff Engagement Questionnaire

Thank you for your continued dedication to advancing the mission and vision of the NICHD during this extraordinary time. We are continuing to plan and adjust to the needs of all NICHD staff. As part of our planning, we are gathering information about your current work location, your challenges in returning to the workspace, and other concerns you related to COVID-19.

This survey has 16 questions and should take about 6 to 8 minutes to complete. Your responses will be private to the extent permitted by law and anonymous. Data from this survey will be reported for NICHD as a whole; your individual responses will not be accessible to anyone.

If you have questions about this survey, please contact nichdmaps@mail.nih.gov.

Public reporting burden for this collection of information is estimated to average 6-8 minutes, 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: NIH Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0648). Do not return the completed form to this address.

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1. Which NICHD Division or Office are you in?

- ☐ NICHD Intramural: Division of Intramural Research (DIR) and Division of Intramural Population Health Research (DIPHR)
- ☐ NICHD Extramural: [Division of Extramural Research \(DER\)](#)
- ☐ NICHD Office of the Director (OD)—Office of Administrative Management (OAM)
- ☐ NICHD Office of the Director (OD): All other OD offices and staff –Office of Communications; Office of Global Health; Office of Health Equity; Office of Legislation and Public Policy; Office of Science Policy, Reporting, and Program Analysis; and immediate Office of the Director staff
- ☐ National Center for Medical Rehabilitation Research (NCMRR)

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1a. What best describes your role in Intramural?

- ☐ Administrative Staff
- ☐ Clinical Staff
- ☐ DIPHR Staff
- ☐ Laboratory Staff

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2. What is your job classification?

- ☐ Federal Employee
- ☐ Contractor
- ☐ Fellow
- ☐ Volunteer
- ☐ Other

3. What is your primary on-site location (If your primary work location is not listed, please select the last option, "Building location not listed")

- ☐ Building 6
- ☐ Building 9
- ☐ Building 10/Warren Grant Magnuson Clinical Center/Mark O Hatfield Clinical Research Center
- ☐ Building 13
- ☐ Building 29
- ☐ Building 31/Claude Denson Pepper Building
- ☐ Building 35/John Edward Porter Neuroscience Research Center
- ☐ Building 45/William H. Natcher Building
- ☐ Building 49/Silvio O. Conte Building
- ☐ 6710B Rockledge Drive, Bethesda, MD (Off campus)
- ☐ Building location is not listed

4. Since NIH started maximum telework in March, have you officially reported to work at your onsite physical workspace (e.g., NIH main campus, 6710B Rockledge)?

☐ Yes

☐ No

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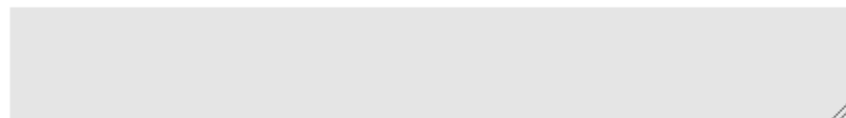
4a. How often do you report to your onsite physical workplace?

- ☐ Full-Time
- ☐ Regular part-time
- ☐ As Needed

4b. How satisfied have you been with your physical workplace during your return?

- ☐ Extremely satisfied
- ☐ Somewhat satisfied
- ☐ Neither satisfied nor dissatisfied
- ☐ Somewhat dissatisfied
- ☐ Extremely dissatisfied

4c. How could NICHHD improve support for employees who are in the physical workspace?



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5. Since NIH started maximum telework in March, have you worked remotely (i.e., participated in telework)

☐ Yes

☐ No

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5a. How satisfied have you been with working remotely?

- ☐ Extremely satisfied
- ☐ Somewhat satisfied
- ☐ Neither satisfied nor dissatisfied
- ☐ Somewhat dissatisfied
- ☐ Extremely dissatisfied

5b. How could NICHD improve support for employees who work remotely?

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6. Which best describes your primary NICHD onsite workspace?

- ☐ I have an office that I do not share with anyone
- ☐ I have a cubicle that I do not share with anyone
- ☐ I work in an open area and share my workspace with at least one other person or I share an office or cubicle with at least one other person
- ☐ I work in a laboratory/bench setting
- ☐ I work in a clinical setting

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7. How comfortable are you about working or returning to work at your onsite physical workspace?

- ☐ Extremely comfortable
- ☐ Somewhat comfortable
- ☐ Neither comfortable nor uncomfortable
- ☐ Somewhat uncomfortable
- ☐ Extremely uncomfortable

8. To provide a safe return to the onsite physical workplace, NIH is providing extensive resources, guidance, behavioral guides, and oversight. (See NIH Safety Guidance for Return to the Physical Workplace, <https://orsweb.od.nih.gov/Documents/Return-to-Work-Guidance.pdf>). What other guidance and/or resources could NICHD provide that would make you feel more comfortable working or returning to work at your onsite physical workspace?

9. Have you participated, or would you be willing to participate in testing for COVID-19, even if you are not having symptoms (asymptomatic surveillance testing)?

- ☐ I have participated in asymptomatic testing
- ☐ I would be willing to participate in asymptomatic testing
- ☐ I would not be willing to participate in asymptomatic testing

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10. Do you regularly use mass transit/public transportation to get to your onsite physical workspace?

☐ Yes

☐ No

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10a. If you are not able use mass transit/public transportation, will you be able to return to your onsite physical workspace?

- ☐ Yes
- ☐ No
- ☐ Unsure

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11. Do you have dependent or elder care responsibilities (e.g., are you taking care of a minor child or an elderly, sick, or disabled relative)?

☐ Yes

☐ No

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11a. Would your dependent or elder care responsibilities prevent you from returning to your onsite physical workspace?

- ☐ Yes, I will be able to return to my physical workspace; I have alternate plans to cover my responsibilities
- ☐ No, I think my dependent or elder care responsibilities will prevent me from returning to my physical workspace
- ☐ I do not know.

11b. What resources could NICHD provide that would help you either return to the physical workspace or telework more effectively?

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Please indicate your level of agreement with statements 12, and 13 below.

12. COVID-19 has created work-related challenges that hinder my ability to accomplish my work (e.g., increase in workload, physical work set-up, etc.)

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

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12a. What specific work-related challenges has COVID-19 created that hinder your ability to accomplish your work?



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13. COVID-19 has created challenges unrelated to work that hinder my ability to accomplish my work (e.g., noise-distractions, dependent care responsibilities)

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

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13a. What specific challenges unrelated to work has COVID-19 created that hinder your ability to accomplish your work?



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14. How satisfied are you with the following resources in providing you with timely information about returning to work?

	Extremely satisfied	Somewhat satisfied	Neither satisfied nor dissatisfied	Somewhat dissatisfied	Extremely dissatisfied	Never participated/Never read
NIH Virtual town Halls	☐	☐	☐	☐	☐	☐
NIH Guidance for Staff on Coronavirus (NIH Intranet)	☐	☐	☐	☐	☐	☐
NICHD COVID-19 Information (on NICHD Insider)	☐	☐	☐	☐	☐	☐
NIH Director Coronavirus Updates	☐	☐	☐	☐	☐	☐
NICHD Director's Office COVID-19 Updates	☐	☐	☐	☐	☐	☐

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Please indicate your level of agreement with statements 15, below.

15. Since the beginning of the pandemic, NICHD Leadership has effectively communicated the criteria and plans related to returning to work onsite:

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

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15a. What topics should be covered and/or approaches should be taken to improve communication from NICHD Leadership in the future?



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16. What changes caused directly or indirectly by COVID-19 would you want NICHD to continue when the pandemic ends?

A large, empty rectangular text input field with a light gray border, intended for the respondent's answer to question 16.

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Thank you for completing the NICHD Staff Engagement Questionnaire

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