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**Followback Survey – After the Health Hazard Evaluation Final Report**

NIOSH wants to know what you think about the recently completed health hazard evaluation at [workplace name]. Your feedback will help us create a better experience for you and others. We will keep your information secure according to federal laws. We will report only summary information and will not identify you.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Please fill in circles completely like this: | | | | | | | |
| 1. **What do you think** about the NIOSH health hazard evaluation? | | | | * + Excellent   + Good   + Fair   + Poor | | | |
| 1. What, if anything, would have made it better? | | | | | | | |
| 1. Have any **changes** been made at the workplace based on the NIOSH recommendations? | | | | * + Yes   + No   + I don’t know | | | |
| 1. Do you think NIOSH helped **make things better** at the workplace? | | | | * + Yes   + No   + No changes were needed | | | |
| 1. **If “Yes” to Question 4**, please describe the **positive changes**. | | | | | | | |
| 1. Which best describes **what you think NIOSH found**? | | | | * + NIOSH found a health hazard   + NIOSH did not find a health hazard   + NIOSH did not decide whether there was a health hazard   + NIOSH findings were not clear to me   + I don’t know | | | |
| 1. Did the employer **post the final report** so employees could see it? | | | | * + Yes   + No   + I don’t know | | | |
| For Questions 8-19, please rate your agreement with the following statements. | | | | | | | |
|  | **Strongly Agree** | | **Mostly Agree** | | **Neither Agree/ Disagree** | **Mostly Disagree** | **Strongly Disagree** |
| 1. The report was **helpful.** | ¡ | | ¡ | | ¡ | ¡ | ¡ |
| 1. I **easily found the information** I needed in the report. | ¡ | | ¡ | | ¡ | ¡ | ¡ |
| 1. The Main Report contained **all** the information I needed. | ¡ | | ¡ | | ¡ | ¡ | ¡ |
| 1. The Supporting Technical Information sections were **useful** to me. | ¡ | | ¡ | | ¡ | ¡ | ¡ |
| 1. I **trust** the information in the report. | ¡ | | ¡ | | ¡ | ¡ | ¡ |
| 1. I **understood the key findings** in the Main Report. | ¡ | | ¡ | | ¡ | ¡ | ¡ |
| 1. I **understood** the report’s **recommendations**. | ¡ | | ¡ | | ¡ | ¡ | ¡ |
| 1. I **agree** with the report’s key findings. | ¡ | | ¡ | | ¡ | ¡ | ¡ |
| 1. After reading the report, I was **convinced** that my workplace should follow the recommendations. | ¡ | | ¡ | | ¡ | ¡ | ¡ |
| 1. I found the **graphs helpful** in understanding the findings. (Skip this question if your report did not contain graphs). | ¡ | | ¡ | | ¡ | ¡ | ¡ |
| 1. **The look of the report** made it easy to read. | ¡ | | ¡ | | ¡ | ¡ | ¡ |
| 1. Did NIOSH issue the final report in a **reasonable amount of time**? | ¡ | | ¡ | | ¡ | ¡ | ¡ |
| 1. If you specifically liked something about the evaluation or have ideas about what NIOSH could do differently, let us know here. | | | | | | | |
| 1. Did the NIOSH response **change your thinking** about the workplace concerns? | | * + Yes   + No | | | | | |
| 1. **Overall**, do you think the NIOSH recommendations **address the workplace concerns well?** | | * + Yes   + No   + I don’t know | | | | | |
| 1. **Overall**, do you think the NIOSH recommendations are **practical**? | | * + Yes   + No   + I don’t know | | | | | |
| 1. Are you **still associated with the workplace** that NIOSH evaluated? | | * + Yes   + No | | | | | |

Public reporting burden of this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing 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 Information Collection Review Office, 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30333; ATTN: PRA (0920-0260).

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**Thank you for completing this survey!**

*Call the Followback Coordinator at 513-841-4382 if you have questions or comments.   
We may contact you again after the Health Hazard Evaluation final report.*

