OMB Control Number: 1225-0093 OMB Expiration Date: 02/29/2024

OSHA

Screening Survey for Participants in the Focus Group on the Experience of Special Government Employees (SGEs) in the Voluntary Protection Programs

The following questions will be uploaded onto DOL's Survey Monkey account. There are currently 1,084 SGEs across the country. We will be sending out a screener survey to identify individuals who are attending the VPPPA Safety+ Conference. From the list of respondents, OSHA will identify a representative group of SGEs for the focus group sessions.

Burden Statement

A Federal agency may not conduct or sponsor an information collection subject to the requirements of the Paperwork Reduction Act unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 1225-0093 (expires 02/29/2024). Without this approval, we could not conduct this survey. Public reporting for this survey is estimated to be approximately 15 minutes per response. All responses to this survey are voluntary. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to Madeline Martinez at Martinez.Madeline.M@dol.gov.

The screening survey will begin with the following, abbreviated burden statement:

- Control No. 1225-0093 (expires 02/29/2024)
- Estimated burden time: 15 minutes
- All responses to this survey are voluntary.
- Send comments about this survey to Madeline Martinez at <u>Martinez.Madeline.M@dol.gov</u>

Form Approved OMB Number: 1225-0093

Exp. Date: 2/29/2024

Screening Survey Questions

1.	Name:		
2.	Email:		
3.	Please select type of employee (select all that apply)		
		Supervisor/Manager	
		Safety Professional	
		Health Professional	
		Other:	
4.	[Branch	ning based on selection of Safety Professional and/or Health Professional in Q3] How	
	many years have you been in safety/health (please enter a number between 0-50):		
5.	Please select type of specialization (select all that apply)		
		PSM- Level 1	
		Construction	
		Mobile Work Force VPP site	
		Ergonomics	
		CIH	
		Maritime	
		Other:	
6.	Please select type of employer:		
		Department of Defense	
		Federal Employee	
		Department of Energy	
		Private sector	
7.	Please select all the VPP activities that you're responsible at your worksite:		
		preparing the annual self-evaluation report for your worksite	
		mock audits	
		preparing for the VPP on-site evaluation at your worksite	
		communicating with OSHA staff	
		communicate with other SGEs at different worksites or companies about SGE or VPP	
		activities.	
		others:	

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8.	What qualifying activities outside of your VPP worksite have you participated on in the past 3			
	years (please select all that apply):			
		On-site audits		
		Mentoring VPP sites		
		Reviewing VPP applications		
		Instructing SGE courses		
		Review Annual Self-Evaluations		
		Other:		
9.	How m	any SGE activities have you participated on in the past 3 years (please enter a number		
	between 0 and 20):			
10.	D. Are you attending the VPPPA Safety+ Conference in Orlando, Florida in September?			
		Yes, I am attending the VPPPA Safety+ Conference in Orlando, Florida		
		No, I am NOT attending the VPPPA Safety+ Conference in Orlando, Florida		
11.	. [Branching based on selection of YES in Q10] Are you interested in participating in an in-person			
		cus Group Interview to describe your experience as an SGE? Saying yes now is not a		
		tment on your part. You are free to change your mind on participation.		
		Yes		
		No		
12.	. [Branching based on selection of NO in Q10] Are you interested in participating in a virtual SGE			
	Focus Group Interview to describe your experience as an SGE? Saying yes now is not a			
		tment on your part. You are free to change your mind on participation.		
		Yes		
		No		
		and the state of		

information collection, including suggestions for reducing this burden to Madeline Martinez at

Thank you for your time!