



HEALTHY WORKSITE • HEALTHY WORKFORCE • HEALTHY COMMUNITY



CDC NHWP Health and Safety Climate Survey (INPUTS™) User Manual

Table of Contents

History of INPUTS™ Survey Development	3
Acknowledgements.....	4
Introduction.....	5
Guidelines for INPUTS™ Survey Quality and Ethics	7
Description of INPUTS™ Survey Domains	10
Administering the INPUTS™ Survey	12
Scoring the INPUTS™ Survey.....	14
Interpreting and Utilizing INPUTS™ Survey Results.....	15
Appendix 1 INPUTS™ Survey Sources, General References	17
Appendix 2 INPUTS™ Survey Questions	19
Appendix 3 INPUTS™ Survey Scoring Instructions	23
Appendix 4 Example INPUTS™ Summary Report	25
Appendix 5 Sample INPUTS™ Communications Materials	27
Appendix 6 Resources for Action.....	29

This work was supported by Contract #: 200-2011-42034 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention, the Department of Health and Human Services, or the U.S. government.

History of INPUTS™ Survey Development

The INPUTS™ survey was developed by researchers at the Center for the Promotion of Health in the New England Workplace (CPH-NEW), with contributions from Viridian Health Management, and the Centers for Disease Control and Prevention (CDC). CPH-NEW is a CDC Center for Excellence that comprises researchers from the University of Connecticut and the University of Massachusetts, Lowell.

The primary sources for INPUTS™ questions were survey instruments developed by CPH-NEW for use in industrial intervention research studies to measure workplace characteristics associated with employee health outcomes and injury rates. The survey instruments were constructed primarily using items and scales from existing publicly accessible and validated instruments. CPH-NEW researchers created a condensed instrument using a combination of approaches that a) reduced all composite constructs to a minimum number of individual questions and b) selected items that were most strongly correlated with measures from a concurrently administered physical examination. The final product was a field-tested, compact survey that would serve the needs of both practitioners and researchers while providing validated indicators of biometric measures.

In collaboration with Viridian Health Management and CDC, CPH-NEW researchers further reduced and refined the questions to produce a streamlined instrument that would assess a comprehensive set of organizational characteristics related to health and safety climate. A complete list of sources for all survey items is provided in Appendix 1. Detailed documentation for the adaptations made in the survey development process can be obtained by requesting an INPUTS™ technical report from nhwp@uchu.edu. One key refinement is especially noteworthy: the Job Content Questionnaire (JCQ), a central component of the industrial research survey, was reduced from 21 to 8 items by special arrangement with the instrument's author, Dr. Robert Karasek at University of Massachusetts Lowell. The JCQ is an internationally validated battery of items assessing the psychosocial characteristics of the work environment such as job demands, job control, and social support on the job.

The final INPUTS™ instrument contains 23 items (which comprise 13 domains or topic areas), plus seven demographic questions. Pre-testing found that university students can complete the survey in 5–10 minutes. The survey development team assumes that a wider range of completion times will be encountered by employer organizations.

This project was funded by the Centers for Disease Control and Prevention (CDC) under contract No. 200-2011-42034. The INPUTS™ survey was developed as part of the CDC National Healthy Worksite Program. This program involved the development of comprehensive workplace health programs in more than 100 employers in eight communities across the United States. As part of the program, participating employers used the INPUTS™ survey to assess their worksite culture and climate to gain insight into employee attitudes related to the physical and psychosocial work environment that would drive the development of a workplace program that promotes employee health and safety. The INPUTS™ survey was submitted as part of the CDC National Healthy Worksite Program's data collection request to the Office of Management and Budget (OMB) and approved in May 2013 under OMB control No. 0920-0965.

Acknowledgements

Development of the CDC National Healthy Worksite Program INPUTS™ Survey was made possible through efforts of many individuals.

The source survey for INPUTS™ was developed by the CPH-NEW Research Team with funding from the National Institute for Occupational Safety and Health as part of the Research to Practice Toolkit Study (Grant No. 1 U19 OH008857). Study investigator Nicholas Warren, Sc.D. and Dr. Alicia Dugan, a former doctoral candidate in Industrial and Organizational Psychology at the University of Connecticut, developed the condensed survey for practitioners. The source survey was field tested and further refined with input from the CPH-NEW Research Team as listed (in alphabetical order) below. The field tested survey was then further refined for use in the CDC National Healthy Worksite Program by the NHWP Data and Analytics team, comprised of members from Viridian Health Management, Center for Disease Control and Prevention, CPH-NEW, and Research Triangle Institute.

University of Connecticut Health Center, Farmington

Martin Cherniack, MD, MPH, Professor, Occupational Medicine
Jeffrey Dusssetschleger, DMD., Project Manager, Occupational Medicine
Timothy Morse, PhD, CPE, Professor, Occupational Medicine
Nicholas Warren, ScD, CPE, Associate Professor, Occupational Medicine

University of Connecticut, Storrs

Janet Barnes-Farrell, PhD, Professor, Industrial and Organizational Psychology
Robert Henning, PhD, CPE, Professor, Industrial and Organizational Psychology

University of Massachusetts, Lowell

Suzanne Nobrega, MS, Project Director, Work Environment
Laura Punnett, ScD, Professor, Work Environment

Liberty Mutual Research Center

Michelle Robertson, PhD, Senior Scientist

Viridian Health Management

Brenda Schmidt, MS, MBA, President
Sherri Eshkibok, Chief Operations Officer
Lisa Henning, Co-Director, National Healthy Worksite Program
Sharon Covert, MS, Co-Director, National Healthy Worksite Program
Andy Spaulding, MS, Director, Center for Community and Worksite Health

Centers for Disease Control and Prevention

Jason E. Lang, MPH, MS, Team Lead, Worksite Health Programs, Division of Population Health, National Center for Chronic Disease Prevention and Health Promotion
Dyann Mattson-Koffman, DrPH, MPH CHES, Health Scientist, Division for Heart Disease and Stroke Prevention, National Center for Chronic Disease Prevention and Health Promotion

Research Triangle Institute

Laurie Cluff, PhD, Organizational Psychologist, Research Triangle Institute (RTI)

Introduction

What is The CDC NHWP Health and Safety Climate Survey INPUTS™?

The INPUTS™ survey is designed to provide an overall assessment of workforce attitudes related to the physical and psychosocial work environment, including factors that support or detract from a healthy worksite culture. INPUTS™ is not a health survey and should not be used to assess individual health or attitudes. Its purpose is to assess an organization, company or workplace unit as a whole. For this reason, the survey should be completed by as many employees in the organization as possible to ensure an accurate picture of the organization. Results should be summarized and presented as an aggregate report, which can then be used by managers and employees involved in planning worksite health and safety and health promotion programs.

The INPUTS™ survey is designed to be used in conjunction with other assessment tools provided by the CDC National Healthy Worksite Program, including the *Employee Health Assessment (CAPTURE™)* and the *CDC Worksite Health ScoreCard*. Results from these assessments can be used to guide worksite health, safety, and wellness program planning.

Why use the INPUTS™ Survey?

The workplace can present both opportunities for and barriers to promoting employee health and safety. Understanding how employees view their work environment is central to addressing behavioral and work-related factors that can impede health and safety. Recent health promotion research has demonstrated associations between several poor work environment characteristics (such as job stress, perceived harassment and violence, lack of control or input into the job, low supervisor and/or co-worker support, incivility, job insecurity and compromised safety climate) and problem health behaviors (smoking, low physical activity, poor nutrition, overweight, sleep problems, etc.), higher risk of injuries, and higher rates of chronic disease and disability.⁸⁻¹⁵ Conversely, a positive physical and social work environment is a strong predictor of high function and greater longevity.^{16, 17} Even the most well-designed and well-resourced worksite wellness program, if it ignores organizational factors and is directed only at the individual, will fall short of its goals.

Who can use the INPUTS™ Survey?

Employers, human resource managers, health benefit managers, health education staff, occupational nurses, medical directors, wellness directors, environmental health & safety directors, and others responsible for worksite health and safety in an organization can use the survey to identify organizational strengths and weaknesses, establish benchmarks, and track improvements over time. Ideally, survey results will be used by a team of employees from all levels in the organization working together to plan, implement, and evaluate comprehensive worksite health and safety programs.

This manual explains the background and uses of the INPUTS™ survey. It is meant to make the survey content and methods more generally understandable. However, a useful survey requires an adequate sample of the entire workforce; with a low response rate, there is a risk of interpretation errors and subsequent development of poor workplace policy. To insure the highest participation, administration must protect the anonymity of the responders. For these reasons, survey administrators must be trained, and engagement of a third party to administer the survey is strongly recommended. The section entitled, **Guidelines for INPUTS™ Survey Quality and Ethics**, explains some of these issues in greater detail.

What can the INPUTS™ Survey tell you?

The INPUTS™ survey will provide a view of the organization's health and safety climate as seen by the overall workforce. Results aggregated for the company or department will describe the perceived level of organizational, supervisor and co-worker support for workplace safety and health, as well as employees' satisfaction with their work. A detailed description of all items is provided on page 10. Survey measures (domains) are associated with the health of individuals as well as employees' ability and willingness to participate in workplace health and safety programs. By reviewing the results together, managers and workers can identify priority areas and plan interventions to make the organization safer, healthier, and more productive. The term 'together' is not an accidental choice of words. In many cases, employees and managers experience the organization of work and the work environment differently. When those differences are very large, the health climate is most at risk; hence the importance of establishing a shared set of perceptions as basic to identifying problems and generating solutions.

Guidelines for INPUTS™ Survey Quality and Ethics

The INPUTS™ is a powerful and useful survey instrument. A well-administered survey can identify an organization's greatest strengths and areas that need attention. A poorly administered survey can result in a range of problems brought about by low participation, invalid results computations or improper interpretation of results. For instance, some survey questions are meant to be looked at as a group. Looking only at one question may lead to an incorrect interpretation and implementation of ineffective or counterproductive policies. There are also important ethical considerations regarding protections of confidentiality, civil rights, and rights of the medically disabled. These concerns require careful planning on the part of survey administrators to protect the rights and safety of all participants. This is one reason that neutral third parties are often selected to conduct surveys or that surveys are administered electronically without identifying features. The following goals and guidelines for quality and ethical assurances should be considered by users of the INPUTS™ Health and Safety Climate Survey.

Goal #1: Protect employee confidentiality

1. Establish procedures to protect the confidentiality and privacy of employees. This is very important for avoiding the perception or fear of harassment, discrimination or retribution directed towards those employees who may express unfavorable responses.
2. Collect surveys anonymously, making sure that participants cannot be identified when they turn in their completed survey.
 - Instruct employees NOT to put their names on the survey form.
 - Do not allow supervisors to collect survey forms from subordinates.
 - Appoint a survey administrator (preferably someone external to the organization) to distribute and collect the surveys.
 - Provide envelopes for returning paper surveys to shield responses. If allowing “drop offs” (e.g., for off-shift employees), provide a locked container or other secure holding arrangement so that survey responses cannot be seen by other employees.
 - Establish privacy procedures to prevent web-based survey responses from being traced back to the participants. This involves changing the settings of the software to NOT collect e-mail and IP addresses of participants.
 - Consider omitting demographic questions, particularly if the organization is small or medium sized. This can help assure privacy of individuals when results are analyzed.
3. Protect privacy during data management.
 - Limit access to the survey data to a trusted data analyst, preferably someone external to the organization.
 - Be sure that data are captured and stored as de-identified. De-identified data (without e-mail or computer or work unit identifiers) can be downloaded into an excel spreadsheet.
 - Establish procedures to prevent unauthorized access to the data.

4. Protect privacy during reporting of results.
 - Individual employee responses can easily be identified when reporting results for small groups, even if unintended; this is especially true in small and medium sized organizations. For this reason, AVOID reporting results by work unit, location, or any demographic category (e.g., age groups, gender, race, etc.) unless there is a minimum of **25 employees** in each category.

Goal #2: Assure accuracy, reliability, and representativeness of survey results

1. Survey administration and collection of data should be separated from its practical use. We recommend the use of a reputable survey management firm or an academic institution to administer and collect the surveys, analyze the results, and provide data summaries. Having a **qualified** third-party administer the survey may help to improve response rates by assuring confidentiality and employing effective follow-up procedures. Resources for finding and hiring a qualified third party administrator are provided in Appendix 6 (see section on Organizational Supports in Resources for Action). This can help make the survey more representative of the full workforce. Professional survey administration can also help with technical aspects of data management and proper handling of issues related to low sample sizes. These issues are important for program planning purposes.
2. Aim for a maximum response rate. A response rate above 70% is ideal to assure that results are representative of the full workforce. This may be difficult to achieve. In a large organization, a response rate above 50% may be a reasonable target. When rates are 30% or below, results likely are not representative, and should be considered with caution.
3. Participation should be encouraged and may take several successive recruitment efforts. Encourage participation by offering small incentives, providing a luncheon, and sending well-spaced reminders. However, employees should not be coerced or discriminated against for non-participation. Employees who participate against their will are not very likely to provide honest answers (or they will fill out random answers). They may also have grounds for legal action. Surveys should be conducted in a climate of respect for personal privacy.
4. Multiple or edited versions of surveys should be avoided to insure accurate compiling of results. This is especially important if the survey will be offered both electronically and in a paper version. Surveys should be administered in a limited time window so that conditions are the same for early and late respondents. One month is usually an acceptable period. Less time than that may not allow maximum capture of respondents. More than that risks loss of momentum and generally does not produce many more respondents.
5. The survey should be offered under the same conditions to all employees. For instance, try to make sure that all employees are given work time to complete the survey, incentives are applied universally, and that all employees receive the same communications about the purpose of the survey.

6. Make arrangements to accommodate the needs of hard to reach employees (those working weekends, off shifts, remote locations, etc.).
7. Paper surveys should be scanned using scanning software to automatically capture results into a spreadsheet. Scanning minimizes the chance of errors that can arise from manual data entry. Scanning software can usually be provided by third-party administration.
8. If you are unable to use a third-party administrator, be sure to use the scoring formulas provided in Appendix 3.

Goal #3: Use survey results appropriately for program planning

1. Use caution when drawing conclusions about the survey results, especially if participation was moderate or low.
2. Use survey results together with other data sources when planning interventions. Avoid basing interventions solely on a single data source.
3. Do not be swayed by single questions that pose issues of immediate interest, such as supervisor support in a workplace where there has been a history of past conflict. Some differences between responses to individual questions are expected and may not be particularly significant. In other cases, responses may need to be evaluated in light of other questions in the survey.

Description of INPUTS™ Survey Domains

Measure	Item #	What is Measured (Source*)	Importance/Use
Health & Safety Climate	1	Global assessment of management support for workplace health & safety (1)	Management support for safe working conditions is essential for safety and health on the job. Identifies prime focus for health and safety improvement.
Job Content	2-9	An overall assessment of the psychosocial work environment, including work demands, decision-making freedom, use of skills, social support from supervisors and coworkers, and job stress. (3)	May point to specific areas where psychosocial job characteristics can be modified to enhance health and well-being.
Physical Job Demands	10-11	Ergonomic risk factors in the workplace related to materials handling and hand motion. (4)	Helpful in identifying the focus of ergonomic interventions.
Work-family Conflict	12-13	Level of difficulty in balancing the demands of work with family obligations. (5)	Indicates specific sources of strain in the lives of workers. Can assist in planning organizational efforts to modify work and scheduling to provide assistance to employees with demanding personal lives.
Workplace Safety	14	Overall assessment of workplace safety level. (6)	Low ratings can flag the need for improved health and safety initiatives. Management/non-management discrepancy can identify cultural and communication problems for intervention.
Organization Health Support	15	Overall assessment of organization support for personal health. (6)	Low ratings can flag the need for improved organizational initiatives to support healthy behaviors. Management/non-management discrepancy can identify cultural and communication problems for intervention.
Health Opportunities	16	Employee assessment of opportunities provided by the employer to maintain or improve health. (6)	Flags areas of health support in which the organization is doing well or poorly. The latter identify specific actions that the organization can take.
Health Climate-Workgroup	17-18	The extent to which coworkers are aware of, communicate about, and are supportive of healthy lifestyle practices. (7)	Identifies workgroup climate as a target area in developing health promotion initiatives, through improving peer support for good health behaviors.
Health Climate-Supervisor	19	The extent to which immediate supervisors are aware of, communicate about, and are supportive of healthy lifestyle practices. (7)	Social support for health behaviors helps employees adopt and maintain healthier lifestyles. Identifies supervisor attitudes as a target area in developing health promotion initiatives.

Health Climate-Organization	20	Extent of management encouragement for employees to make health and safety suggestions. (7)	Management support for health behaviors helps employees adopt and maintain healthier lifestyles. Identifies organizational climate as a target area in health promotion initiatives.
Job Satisfaction	21-22	Assesses employees' satisfaction with their jobs and their organization. (2,4)	Affects employees' emotional well-being and work commitment. Can suggest the need to modify work characteristics and/or a need for organizational improvements
Commute Time	23	Length of employee's commute; a potential contributor to work stress and ill health. (6)	Identifies a possible source of job stress, modifiable by schedule flexibility, telecommuting opportunities, and other organizational initiatives.

*See Appendix 1 for INPUTS™ survey source references.

Administering the INPUTS™ Survey

Lay the groundwork.

- Senior leadership support for worksite health and safety is critical to your program's success. Demonstrate senior management support for the survey by asking a senior manager to appoint someone (or a group of people) from a wellness or safety team to oversee the administration and report-back of the INPUTS™ survey. This team should be in place whether or not the company employs an outside administrator.
- Consider hiring a reputable survey management firm or academic institution to distribute and collect the surveys and analyze the results. Having a neutral third-party administer the survey may help to alleviate privacy concerns of employees, which can help improve response rates. Survey experts can properly analyze and present the results, and can alert the organization to limitations of the results when participation is low. Web resources for hiring a survey vendor are provided in Appendix 6 (see Organizational Supports section of Resources for Action).
- Review and understand the INPUTS™ survey questions to understand what they measure and why they are important. Use the Description of INPUTS™ Survey Items on pages 10 and 11 for this purpose.
- Explain that the survey will take approximately 15 minutes to complete. Participation rates will be better if work time is given to complete the survey. Try to obtain approvals for this work time activity.
- Decide how the survey materials will be prepared, distributed, collected, analyzed and reported. Obtain approvals for individuals to fulfill all of these roles as needed.

Plan the logistics for distributing and collecting surveys.

- Work with the survey team to set the date, time, and location for employees to complete the survey. Organizations with multiple work site locations will need to plan how to reach employees in each of those sites. Make surveys available on multiple days to capture as many employees as possible.
- Decide where surveys will be completed--in a specific room, personal work stations, etc. For employees without desk space, provide space and supplies or give them permission to complete the survey off-site if they prefer. The space provided should be quiet, comfortable and private, to create a safe atmosphere free from distraction.
- If possible, offer an incentive to participate. Incentives can dramatically increase your survey response. There are many ways to provide incentives--cash, raffles, discounts, time off—be creative! Group incentives may avoid perception of individual identification.

- Consider administering the survey electronically, using one of the many web-based survey services available on the Internet. Take precautions to assure that the Web survey product used does not gather e-mail or IP addresses, which would inadvertently identify participants. If using paper and pencil, see if creating scannable forms is possible, as this will make data entry easier.
- Determine who will be eligible to take the survey. It is recommended that all full and part time permanent employees are eligible who have been with the company at least six months, unless the focus will be limited to a particular department or area for intervention.
- Make arrangements for survey administration in another language(s) and/or to employees with low literacy, if necessary. This may require translation and verbal administration. Self-addressed, postage-paid envelopes and clear instructions can help remove barriers to participation for hard-to-reach employees.
- Make arrangements for survey collection from off-shift, weekend and remote employees. This may require providing mail back envelopes and stamps.
- Establish a procedure to protect the confidentiality and privacy of the employees' responses (see **Guidelines for INPUTS™ Survey Quality and Ethics** on page 7 for details). This is very important for protecting privacy and for encouraging employees to report their responses honestly. Communicate to participants *what* procedures are in place to protect the privacy of responses, whether paper or electronic survey methods are used. For example, no names used, third party collecting, web surveys programmed not to collect email or IP addresses, etc. These messages will help protect participants who do feel secure in providing unfavorable responses.

Develop survey communications.

- Promote the survey to recruit participants. Develop appropriate materials and use a variety of communication channels. E-mail, posters, announcements, LCD screens, and newsletters are all effective in creating awareness about the survey. Privacy procedures should be included in the recruitment publicity to build trust and to inform participants who will have access to their survey responses. See Appendix 5 for sample communications materials.
- Plan recruitment strategies to reach employees in remote locations or those who do not use computers for their work. Consider using posters, paycheck stuffers, letters and personal contact for employees who do not routinely use electronic communication.
- Announce the survey at least two weeks in advance to increase awareness and participation rates. Build a sense of anticipation with creative publicity. Play up the incentive if you will offer one and clearly say how the results will be used.

Scoring the INPUTS™ Survey

General recommendations for analyzing INPUTS™ survey results

- Trusted personnel (e.g., a safety or health/wellness committee) or, ideally, an external administrator, should use the scoring instructions and formulas provided in Appendix 3 to compute the survey results and to produce a summary report. A sample report is provided in Appendix 4.
- If using a Web-based survey instrument, de-identified data can easily be downloaded from the site into an electronic spreadsheet. If using paper and pencil, either scan the documents into scanning software or manually enter the information into a spreadsheet. Scanning is the most reliable way to capture the results, as it minimizes the chance of errors during data entry while also protecting confidentiality of the data. If entering results manually, set up systems for quality control (to detect errors in data entry, generally having multiple individuals enter the same data) and assuring that the surveys are not identified with names.

Use the **Guidelines for INPUTS™ Survey Quality and Ethics** on pages 7-9 when analyzing data for trends and findings. AVOID reporting results by work unit, location, or any demographic category (e.g., age groups, gender, race, etc.) unless there is a minimum of 25 employees at each category. It is very important to avoid breaching the confidentiality of the participants.

Tips for Communicating Results

- Communicate survey results as widely as possible throughout the organization. Be sure to report results as a group, and never report information in a way that could be linked with individuals.
- Decide on best ways to report back to your workforce considering the size, industry, setting and culture. Different stakeholders will prefer different ways of looking at the information. Executives may prefer a very brief summary of findings along with graphs and charts of selected topic areas. Program planners may appreciate a lengthier PowerPoint presentation. Bulletin board, flyers, newsletters, or LCD screens may be effective for communicating with the broader workforce. Departmental, all-employee, or town hall meetings can be especially effective, because they allow an exchange of questions and answers.

Presentation tips—in meetings, aim for allocating 50% of the presentation time to showing the results. Try to leave at least half of the time open for group reflection to discuss what the results mean. For program planners, consider scheduling two meetings to allow enough time to discuss all the results and how they can be prioritized for action planning.

- View all feedback meetings as opportunities to solicit ideas from employees about relative importance of identified problems, potential interventions, and potential facilitators of and obstacles to these interventions.

Interpreting and Utilizing INPUTS™ Survey Results

- Select a team to assist with reviewing the survey results and recommending priorities for action. Use caution when drawing conclusions about the survey results, especially if the participation was moderate or low. See **Guidelines for INPUTS™ Survey Quality and Ethics** on pages 7-9 for guidance on minimum response rates for sample representativeness.
- Compare your scores to those of employers participating in the National Healthy Worksite Program (NHWP). NHWP averages for all survey items will be available in 2014 at (<http://www.cdc.gov/NationalHealthyWorksite/>).
- Compare your aggregated INPUTS™ scores to the aggregated scores of your organization's health data (e.g. CAPTURE™ health assessment survey, and biometric screenings).
- Review your INPUTS™ scores and use them as a planning tool, together with other sources of information (e.g., CAPTURE™ health assessments, biometric screening, medical and pharmacy claims, injury reports, needs and interest survey, etc.) on employee health and wellbeing. Your scores are intended to assist you in prioritizing strategies as you set short- and long-term goals for promoting better employee health and productivity.
- Select and prioritize which health and safety climate issues from the INPUTS™ survey you will address and begin exploring, and which strategies your worksite will implement.
 - Prioritize potential intervention strategies using several criteria, such as:
 - ✓ Greatest benefit to the most people in your worksite;
 - ✓ Highest potential to gain and maintain senior leadership support;
 - ✓ Best fit with your current resources (staffing, funds, current vendors, etc.);
 - ✓ Employee needs and interests;
 - ✓ Other criteria specific to your organizational situation.
 - Identify which of your priority strategies are feasible for short-term implementation and which strategies need more preparation for possible long-term implementation.
 - Prioritize future strategies to implement that are relevant, feasible, and consistent with your organization/employee needs and health issues, and health promotion budget. Share the projected schedule of these activities with all employees, soliciting feedback.

- Consult the Centers for Disease Control and Prevention websites for guidance on intervention strategies to improve employee health and organizational policies and environmental supports for worksite health and safety. See Appendix 6 for relevant Resources for Action.

[National Healthy Worksite Program](#)

[CDC Healthy Worksite Initiative](#)

[NIOSH Total Worker Health Initiative](#)

- Complete the survey again in a year to assess progress. You also may evaluate how your INPUTS™ scores correlate with improvements in aggregated health risk scores (CAPTURE™ health assessment, biometric screening) among employees who participated in worksite health interventions. INPUTS™ scores can also be compared to organization level surveys such as the CDC Worksite Health Scorecard.
- Inform and educate employees and management about how your organization plans to use the INPUTS™ scores to guide program development. At all steps of the process, solicit ideas and feedback from all levels of your organization concerning ways to improve survey participation, develop and prioritize interventions, implement interventions, and evaluate outcomes.

Appendix: 1

INPUTS™ Survey Sources

1. Developed by investigators of the Center for Promotion of Health in the New England Workplace (CPH-NEW) at the University of Connecticut.
2. Adapted from Organizational Assessment Survey (OAS). Office of Performance Monitoring (OPM). http://www.opm.gov/employ/html/org_asse.asp.
Gowing, M.K. & Lancaster, A.R.(1996) Federal government surveys: Recent practices and future directions. In A. Kraut (Ed.), *Organizational surveys: tools for assessment and change* (pp. 360-380). San Francisco: Jossey-Bass.
3. Adapted with permission from Karasek, R. A., Pieper, C. F., & Schwartz, J.E. (1985). *Job Content Questionnaire and User's Guide Revision 11*. Developed at Columbia University. Information from Dr. Karasek, Dept. of Work Environment, UMass/Lowell, Lowell, MA.
4. Adapted from General Social Survey (GSS), Quality of Work Life Module (QWL, developed by NIOSH). Davis J, Smith T, Marsden P. 2003. *General Social Survey, 1972–2002: Cumulative Codebook*. Chicago: NORC.
5. Adapted from Kessler, R.C. National Comorbidity Survey: Baseline (NCS-1). ICPSR06093-V5. Ann Arbor, MI: ICPSR [distributor], 2008-07-01.
6. Developed for National Healthy Worksite Program.
7. Developed at University of Connecticut by Zandra Zweber, doctoral candidate in Industrial and Organizational Psychology.

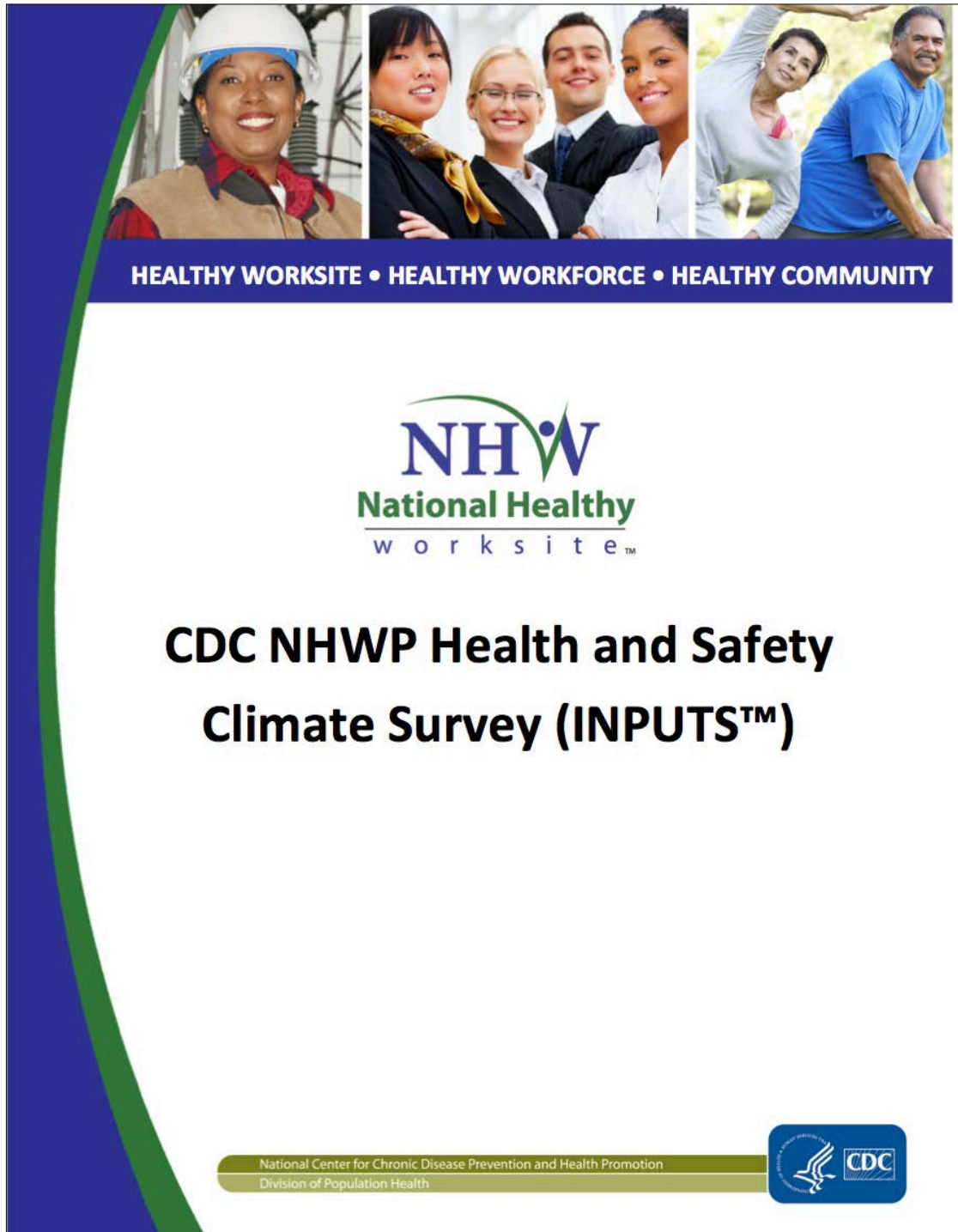
General References (cited in Introduction)

8. Punnett L, Cherniack MG, Henning RA, Morse T, Faghri P, CPH-NEW Research Team. A conceptual framework for integrating workplace health promotion and occupational ergonomics programs. *Public Health Reports*. 2009; 124(Supplement 1):16-25.
9. Levy BS, Wegman DH, Baron SL, Sokas R, eds. *Occupational and Environmental Health: Recognizing and Preventing Disease and Injury, 6th ed*. Lippincott Williams and Wilkins; 2011.
10. Belkic KL, Landsbergis PA, Schnall PL, Baker D. Is job strain a major source of cardiovascular disease risk? *Scand J Work Environ Health*. 2004; 30 (2):85-128.
11. LaMontagne A, Keegel T, Vallance D, Ostry A, Wolfe R. Job strain—Attributable depression in a sample of working Australians: Assessing the contribution to health inequalities. *BMC Public Health* 2008;8 (181):1-9.
12. Albertsen K, Borg V, Oldenburg B. A systematic review of the impact of work environment on smoking cessation, relapse and amount smoked. *Prev Med*. 2006; 43:291-305.
13. Kouvonen A, Kivimaki M. Job strain and adverse health behaviors: The Finnish Public Sector Study. *J Occ Env Med*. 2007; 49(1):68-74.
14. Lallukka T, Chandola T, Roos E, et al. Work-family conflicts and health behaviors among British, Finnish, and Japanese employees. *Inter J Behav Med*. 2009; 17(2):134-142.
15. Lallukka T, Lahelma E, Rahkonen O, et al. Associations of job strain and working overtime with adverse health behaviors and obesity: Evidence from the Whitehall II Study, Helsinki Health Study, and the Japanese Civil Servants Study. *Soc Sci Med*. 2008; 66(8):1681-1698.


16. Tuomi, K., Ilmarinen, J., Klockars, M., Nygård, C-H., Seitsamo, J., Huuhtanen, P., Martikainen, R. and Aalto, L. 1997. Finnish research project of aging workers in 1981-92. *Scandinavian Journal of Work, Environment and Health*, 23(Suppl. 1): 7–11.
17. Tuomi K, Ilmarinen J, Martikainen R, Aalto L, Klockars M (1997) Aging, work, life-style and work ability among Finnish municipal workers in 1981-1992. *Scand J Work Environ Health* 23(Suppl 1):58-65.

Appendix: 2 INPUTS™ Survey Questions

A fully formatted version of the INPUTS™ survey is available at:
<http://www.cdc.gov/nationalhealthyworksite/join/assessments.html>




HEALTHY WORKSITE • HEALTHY WORKFORCE • HEALTHY COMMUNITY



**CDC NHWP Health and Safety
Climate Survey (INPUTS™)**

National Center for Chronic Disease Prevention and Health Promotion
Division of Population Health



To what extent do you agree with the following statements?					
		Strongly disagree	Disagree	Agree	Strongly agree
1	In this facility, management considers workplace health and safety to be important.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	My job allows me to make a lot of decisions on my own.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	My job requires working very hard.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	The people I work with take a personal interest in me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	The people I work with can be relied on when I need help.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	My supervisor is concerned about the welfare of those under him or her.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	My supervisor is helpful in getting the job done.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	My job requires me to be creative.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	My job requires a high level of skill.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	My job requires me to do repeated lifting, pushing, pulling or bending.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	My job regularly requires me to perform repetitive or forceful hand movements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please answer the following questions.

12	How often do things going on at work make you feel tense and irritable at home ?	<input type="checkbox"/> Never <input type="checkbox"/> Occasionally <input type="checkbox"/> Sometimes <input type="checkbox"/> Often <input type="checkbox"/> Most of the time
13	How often do things going on at home make you feel tense and irritable on the job ?	<input type="checkbox"/> Never <input type="checkbox"/> Occasionally <input type="checkbox"/> Sometimes <input type="checkbox"/> Often <input type="checkbox"/> Most of the time

Please rate Question #14 on a scale of 1-10.

		1 extremely unsafe	2	3	4	5	6	7	8	9	10 extremely safe
14	Overall, how safe do you think your workplace is?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please rate Question #15 on a scale of 1-10.

		1 extremely unsupportive	2	3	4	5	6	7	8	9	10 extremely supportive
15	Overall, how supportive is your company of your personal health?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please rate how you feel about each of the following statements: "My employer has provided me with the opportunity to": (Please check 1 box for each item below).

		Strongly disagree	Disagree	Neutral	Agree	Strongly agree
16	a. Be physically active	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Eat a healthy diet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Live tobacco free	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Manage my stress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Work safely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

To what extent do you agree with the following statements?

		Strongly disagree	Disagree	Neutral	Agree	Strongly agree
17	If my health gets worse, my coworkers would support my recovery.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18	My coworkers would support my use of sick days for illness or mental health.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19	My supervisor encourages healthy behaviors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20	My organization encourages me to make suggestions about employee safety, health and well-being.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21	Overall I would recommend working with this organization to my family and friends.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please answer the following questions.

22	All in all, how satisfied would you say you are with your job?	<input type="checkbox"/> Very satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Dissatisfied <input type="checkbox"/> Very dissatisfied
23	How much time do you spend traveling to and from work each day (roundtrip)?	<input type="checkbox"/> < 15 minutes <input type="checkbox"/> 15-30 minutes <input type="checkbox"/> 30-60 minutes <input type="checkbox"/> 60-90 minutes <input type="checkbox"/> > 90 minutes

Appendix 3

INPUTS™ Survey Scoring Instructions

Question	INPUTS™ Survey Question or Scale % answering 'agree' or 'strongly agree' (except where noted)	Score Formula
1	Management Health & Safety Support <i>In this facility, management considers workplace health and safety to be important.</i>	$\frac{\text{Total number of 'Agree' and 'Strongly Agree' responses}}{\text{Sum of total responses to this question}}$
2	High Decision Authority <i>My job allows me to make a lot of decisions on my own.</i>	$\frac{\text{Total number of 'Agree' and 'Strongly Agree' responses}}{\text{Sum of total responses to this question}}$
3	Low Psychological Demands <i>My job requires working very hard. ('Strongly Disagree' and Disagree')</i>	$\frac{\text{Total number of 'Strongly Disagree' and 'Disagree' responses}}{\text{Sum of total responses to this question}}$
4+5	Coworker Support <i>The people I work with take a personal interest in me.</i> <i>The people I work with can be relied on when I need help.</i>	$\frac{\text{Total number of 'Agree' and 'Strongly Agree' responses to, questions 4 and 5}}{\text{Sum of total responses to questions 4 and 5}}$
6+7	Supervisor Support <i>My supervisor is concerned about the welfare of those under him or her.</i> <i>My supervisor is helpful in getting the job done.</i>	$\frac{\text{Total number of 'Agree' and 'Strongly Agree' responses to, questions 6 and 7}}{\text{Sum of total responses to questions 6 and 7}}$
8+9	High Skill Discretion <i>My job requires me to be creative.</i> <i>My job requires a high level of skill.</i>	$\frac{\text{Total number of 'Agree' and 'Strongly Agree' responses to, questions 8 and 9}}{\text{Sum of total responses to questions 8 and 9}}$
10	Low Ergonomic Risk: Materials Handling <i>My job requires me to do repeated lifting, pushing, pulling or bending. ('Strongly Disagree' and Disagree')</i>	$\frac{\text{Total number of 'Strongly Disagree' and 'Disagree' responses}}{\text{Sum of total responses to this question}}$
11	Low Ergonomic Risk: Hand Motion <i>My job regularly requires me to perform repetitive or forceful hand movements. ('Strongly Disagree' and Disagree')</i>	$\frac{\text{Total number of 'Strongly Disagree' and 'Disagree' responses}}{\text{Sum of total responses to this question}}$
12	Low Work-Family Conflict <i>How often do things going on at work make you feel tense and irritable at home? ? ('Never' and 'Occasionally')</i>	$\frac{\text{Total number of 'Never' and 'Occasionally' responses}}{\text{Sum of total responses to this question}}$
13	Low Family-Work Conflict <i>How often do things going on at home make you feel tense and irritable on the job? ('Never' and 'Occasionally')</i>	$\frac{\text{Total number of 'Never' and 'Occasionally' responses}}{\text{Sum of total responses to this question}}$
14	Workplace Safety (mean score on scale from 1-10) <i>Overall, how safe do you think your workplace is (1-10, extremely unsafe to extremely safe)?</i>	Calculate mean: $\frac{\text{Sum all answers}}{\text{Total number of responses to this question}}$
15	Health Support (mean score on scale from 1-10) <i>Overall, how supportive is your company of your personal health, from 1 (extremely unsupportive) to 10 (extremely supportive)?</i>	Calculate mean: $\frac{\text{Sum all answers}}{\text{Total number of responses to this question}}$

16	"My employer has provided me with the opportunity to" a. Be physically active	$\frac{\text{Total number of 'Agree' and 'Strongly Agree' responses}}{\text{Sum of total responses to this question}}$
	b. Eat a healthy diet	$\frac{\text{Total number of 'Agree' and 'Strongly Agree' responses}}{\text{Sum of total responses to this question}}$
	c. Live tobacco free	$\frac{\text{Total number of 'Agree' and 'Strongly Agree' responses}}{\text{Sum of total responses to this question}}$
	d. Manage my stress	$\frac{\text{Total number of 'Agree' and 'Strongly Agree' responses}}{\text{Sum of total responses to this question}}$
	e. Work safely	$\frac{\text{Total number of 'Agree' and 'Strongly Agree' responses}}{\text{Sum of total responses to this question}}$
17+18	Coworker Health Climate <i>If my health gets worse, my coworkers would support my recovery. My coworkers would support my use of sick days for illness or mental health.</i>	$\frac{\text{Total number of 'Agree' and 'Strongly Agree' responses to, questions 4 and 5}}{\text{Sum of total responses to questions 17 and 18}}$
19	Supervisor Health Climate <i>My supervisor encourages healthy behaviors.</i>	$\frac{\text{Total number of 'Agree' and 'Strongly Agree' responses}}{\text{Sum of total responses to this question}}$
20	Organizational Health Climate <i>My organization encourages me to make suggestions about employee safety, health and well-being.</i>	$\frac{\text{Total number of 'Agree' and 'Strongly Agree' responses}}{\text{Sum of total responses to this question}}$
21	Recommend Working at this Organization <i>Overall I would recommend working with this organization to my family and friends.</i>	$\frac{\text{Total number of 'Agree' and 'Strongly Agree' responses}}{\text{Sum of total responses to this question}}$
22	Overall Satisfaction (% answering 'satisfied' or 'very satisfied') <i>All in all, how satisfied would you say you are with your job?</i>	$\frac{\text{Total number of 'Satisfied' and 'Very Satisfied' responses}}{\text{Sum of total responses to this question}}$
23	Commute Time (% answering < 1 hour round trip) <i>How much time do you spend traveling to and from work each day (roundtrip)?</i>	$\frac{\text{Total number of '<15 minutes', '15-30 minutes' and '30-60 minutes' responses}}{\text{Sum of total responses to this question}}$

In all items or scales, the higher total percentage the healthier the work environment.

Note: There are differences in the response options:

- Some items are assessed on a 4-point scale of agreement, with no neutral choice (questions 1-11). Others are assessed on a 5-point agreement scale, with a neutral option in the middle (questions 16-21). In both cases, the formula calculates the percentage of answers that are 'agree' or 'strongly agree.'
- Questions 12 and 13, work/family conflict, are assessed on a 5 point time scale, from 'never' to 'most of the time.' As with agreement, the formula calculates the percentage of answers that are 1 or 2 ('never' or 'occasionally').
- Questions 14-15 are assessed on a scale of 1-10. Formulas calculate a mean.
- Question 22, overall satisfaction, is assessed on a 4-point scale, with 1 and 2 being 'very satisfied' and 'satisfied.' The formula calculates the percentage of these answers.
- Commute time (question 23) is assessed in five categories. The formula calculates the percentage of employees whose commute time is less than 1 hour.

Appendix 4

Example INPUTS™ Summary Report

CDC NHWP Health and Safety Climate Survey (INPUTS™) % answering ‘agree’ or ‘strongly agree’ (unless otherwise noted); higher numbers are better	Your Organization
Management Health & Safety Support <i>In this facility, management considers workplace health and safety to be important.</i>	29%
High Decision Authority <i>My job allows me to make a lot of decisions on my own.</i>	41%
Low Psychological Demands <i>My job requires working very hard. (% answering “Strongly Disagree” and “Disagree”).</i>	60%
Coworker Support <i>The people I work with take a personal interest in me. The people I work with can be relied on when I need help.</i>	47%
Supervisor Support <i>My supervisor is concerned about the welfare of those under him or her. My supervisor is helpful in getting the job done.</i>	57%
High Skill Discretion <i>My job requires me to be creative. My job requires a high level of skill.</i>	37%
Low Ergonomic Risk: Materials Handling <i>My job requires me to do repeated lifting, pushing, pulling or bending. (% answering “Strongly Disagree” and “Disagree”)</i>	44%
Low Ergonomic Risk: Hand Motion <i>My job regularly requires me to perform repetitive or forceful hand movements. (% answering “Strongly Disagree” and “Disagree”)</i>	48%
Low Work-Family Conflict <i>How often do things going on at work make you feel tense and irritable at home? (% answering “Never” and “Occasionally”).</i>	65%
Low Family-Work Conflict <i>How often do things going on at home make you feel tense and irritable at home (% answering “Never” and “Occasionally”).</i>	48%
Workplace Safety (mean score on scale from 1-10) <i>Overall, how safe do you think your workplace is (1-10, extremely safe to extremely unsafe)?</i>	5.3

Health Support (<i>mean score on scale from 1-10</i>) <i>Overall, how supportive is your company of your personal health, from 1 (extremely unsupportive) to 10 (extremely supportive)?</i>	5.4
<i>“My employer has provided me with the opportunity to”</i>	
<i>a. Be physically active</i>	46%
<i>b. Eat a healthy diet</i>	44%
<i>c. Live tobacco free</i>	43%
<i>d. Manage my stress</i>	47%
<i>e. Work safely</i>	38%
Coworker Health Climate <i>If my health gets worse, my coworkers would support my recovery. My coworkers would support my use of sick days for illness or mental health.</i>	35%
Supervisor Health Climate <i>My supervisor encourages healthy behaviors.</i>	37%
Organizational Health Climate <i>My organization encourages me to make suggestions about employee safety, health and well-being.</i>	37%
Recommend Working at the Organization <i>Overall I would recommend working with this organization to my family and friends.</i>	41%
Overall Satisfaction (% answering ‘satisfied’ or ‘very satisfied’) <i>All in all, how satisfied would you say you are with your job?</i>	49%
Commute Time (% answering <1 hour round trip) <i>How much time do you spend traveling to and from work each day (round trip)?</i>	22%

Notes:

1. For domains composed of more than one item, scores are the **mean** of % answering ‘agree’ and ‘strongly agree’ for all components
2. Note that most items are assessed in 5 categories, ‘strongly disagree’ to ‘strongly agree’. The middle category, ‘neither agree nor disagree’ is NOT included in score calculations.

Appendix 5: Sample INPUTS™ Communications Materials



PLEASE TAKE A SURVEY

Tell us your views on Health and Safety

Your participation is important!

PURPOSE:
ABC Industries is part of the CDC National Healthy Worksite Program (NHWP). Our goal is to make our workplace and our workforce healthier and safer. But we need to know your ideas about where to begin.

The INPUTS™ Health and Safety Climate Survey will help us gather information about how we as employees currently view health, safety, and wellness in our organization. The results will be used by ABC Industries to select priority areas for improvement. We need as many employee views as possible so **PLEASE PARTICIPATE!**

HOW TO PARTICIPATE:

- 1.** Pick up a paper survey, and complete it during work time. It should take 15 minutes to complete.
- 2.** Turn in your survey to Mary Smith, survey coordinator, during survey drop-in times. Contact Mary at extension 1234 if you need to drop off at another time.

WHO

All
employees

WHERE

Conference
Room 1

WHEN

October 1-3
10am-2pm

The survey will take 15 minutes to complete. All surveys will be kept private and secure. Results will be reported only for groups, not individuals. A survey coordinator will be present to answer questions and to collect surveys.

Sample INPUTS™ Communications Materials



PLEASE TAKE A HEALTH AND SAFETY SURVEY

YOUR PARTICIPATION IS IMPORTANT!

WHERE

Conference Room 1

WHEN

October 1st, 2nd, and 3rd, 2014

10am to 2pm

PURPOSE:

ABC Industries is part of the CDC National Healthy Worksite Program (NHWP). Our goal is to make our workplace and our workforce healthier and safer. But we need to know your ideas about where to begin.

The INPUTS™ Health and Safety Climate Survey will help us gather information about how we as employees currently view health, safety, and wellness in our organization. The results will be used by ABC Industries to select priority areas for improvement. We need as many employee views as possible so **PLEASE PARTICIPATE!**

HOW TO PARTICIPATE:

1. Pick up a paper survey, and complete it during work time. It should take 15 minutes to complete.
2. Turn in your survey to Mary Smith, survey coordinator, during survey drop-in times. Contact Mary at extension 1234 if you need to drop off at another time.

The survey will take 15 minutes to complete. All surveys will be kept private and secure. Results will be reported only for groups, not individuals. A survey coordinator will be present to answer questions and to collect surveys.

Appendix 6: Resources for Action

The *INPUTS™ survey* is designed to be used in conjunction with other assessment tools provided by the CDC National Healthy Worksite Program, including the *Employee Health Assessment* (CAPTURE™) and the *CDC Worksite Health ScoreCard*. Results from assessments used can be used to guide worksite health, safety, and wellness program planning. Many program planning guidance documents are available from the [National Healthy Worksite Program](#) as well as from the CDC [Workplace Health Promotion](#) Toolkit and the CDC's [Successful Business Strategies to Prevent Heart Disease and Stroke](#) Toolkit.

Resources are offered below to assist with program planning and evaluation on a range of topics and issues identified through the use of the INPUTS™ survey and the other assessment surveys offered through the National Healthy Worksite Program.

ORGANIZATIONAL SUPPORTS

[The NCCDPHP Workplace Health Promotion Toolkit Planning/Workplace Governance Module](#)

This site describes a number of organizational strategies that provide the infrastructure to ensure program objectives are achieved, employee health risks are appropriately managed, and the company's resources are used responsibly. It includes information on leadership support, wellness council or committees, health improvement action plans, dedicated resources, communications, and data.

[CDC Healthier Worksite Initiative - Health Risk Appraisals \(HRA\)](#)

This site provides practical guidance for the use of Health Risk Appraisals (HRA). The site describes what an HRA is; reasons why employers might use HRAs; and important employer considerations when implementing and using an HRA such as ethics, incentives, and method of follow-up with employees.

[NCI Making Health Communications Programs Work](#)

A planning guide developed by the National Cancer Institute with participation from the CDC on all aspects of effective communication of health information.

[Agency for Healthcare Research and Quality: Surveys on Patient Safety Culture](#)

A planning guide developed to assist hospitals with coordinating a patient safety culture survey. Provides specific guidance for contracting with a vendor to administer a survey questionnaire.

[BRFSS Operational and Users Guide](#)

An online user guide for implementing the Behavioral Risk Factor Surveillance Survey. See pages 59-67 for useful tips on issuing a request for proposals for survey vendors.

TOBACCO CONTROL

[CDC's Tobacco Web site](#)

This site provides a variety of information on tobacco including data and statistics, effective policies, programs and campaigns, recommended strategies and other resources for consumers and the health professional. Included is a link to a PDF entitled [Coverage for Tobacco Use Cessation Treatments](#) that discusses the importance of health insurance coverage for tobacco cessation services. Within this document there is a section that specifically focuses the Public Health Services (PHS) Guideline for Effective Cessation Treatments.

[A Purchaser's Guide to Clinical Preventive Services](#)

Tobacco Use Treatment Chapter – This section of *A Purchaser's Guide to Clinical Preventive Services* describes the importance of developing, implementing and evaluating a comprehensive tobacco dependence treatment benefit. Tobacco-use treatment has been ranked as one of the top 3 preventive services in terms of impact, cost effectiveness and effectiveness. SPD language and coding for benefit implementation is included.

[Tobacco Cessation Benefit Coverage and Consumer Engagement Strategies: A California Perspective](#)

This report summarizes current employer coverage of smoking cessation benefits. To what degree do large California employers currently offer such benefits? Of those that offer them, what treatments do they cover? In addition, the report summarizes knowledge about the use of such services among employees and the barriers which may prevent them from tapping this important resource. Finally, it highlights best practices for employer coverage of tobacco cessation support programs and services, including promising employer incentive programs to promote their use.

[Investing in Health: Proven Health Promotion Practices for Workplaces](#)

Included in this guide are steps any employer can take to improve employee health by: reducing tobacco use and exposure; promoting breast, cervical, and colon cancer screening and early detection; and encouraging physical activity and healthy eating.

NUTRITION

[CDC's Nutrition Web site](#)

This site provides a variety of information on nutrition including data and statistics, programs and campaigns, recommended strategies and other resources for the health professional.

[The Dietary Guidelines from Americans, 2010](#)

The Dietary Guidelines, published every 5 years by the U.S Department of Health and Human Services and the U.S. Department of Agriculture, provides advice on good dietary habits to promote health and prevent disease.

[CDC Healthier Worksite Initiative – Nutritious Eating Toolkits](#)

This site, designed specifically for worksites to encourage nutritious eating, contains checklists, guides, budgets, and other tools to aid in program planning, design, and management.

[CDC Healthier Worksite Initiative – Establish a Garden Market](#)

This toolkit provides information on how to establish a garden market in a federal agency or other organization, and is based on a demonstration project at the Centers for Disease Control and Prevention (CDC).

[Choosing Foods and Beverages for Healthy Meetings, Conferences and Events](#)

This resource provides guidelines for selecting healthful foods and beverages for breaks or meals at workplace meetings, conferences, and events.

[Improving the Food Environment through Nutrition Standards: A Guide for Government Procurement](#)

This resource provides practical guidance to states and localities for use when developing, adopting, implementing, and evaluating a food procurement policy.

PHYSICAL ACTIVITY

[Physical Activity Guidelines for Americans](#)

This site provides information on the 2008 Physical Activity Guidelines for Americans. The guidelines address physical activity for Americans of all ages including special populations.

[National Physical Activity Plan](#)

This site provides information on the National Physical Activity Plan, a comprehensive set of policies, programs, and initiatives that aim to increase physical activity in all segments of the American population. There is a section of the plan focused on business and industry.

[Physical Activity Workplace Toolkits](#)

This site provides links to toolkits that address reducing barriers and increasing access to places for physical activity in the work place.

[Worksite Policies](#)

This site contains specific policies that impact health promotion at federal workplaces. Workplaces that are not federal agencies can use this information to generate ideas about how policies impact health promotion in their organization.

[CDC's Physical Activity Web site](#)

This site provides a variety of information on physical activity including physical activity guidelines and recommendations, data and statistics, recommended strategies and other resources.

[Physical Activity Tools for Health Professionals](#)

This site provides resources and tools for professionals to use including planning, promoting, and evaluating physical activity programs. The promotion section includes links to brochures that CDC has developed for the general public and links to other organizations that provide resources for physical activity promotion.

[Active Environments](#)

This site provides links on public health, community design and related sites that complement active environment efforts.

[Exercise is Medicine](#)

This site addresses physical activity counseling for health care providers.

WEIGHT MANAGEMENT

[CDC's Overweight and Obesity Web site](#)

This site provides a variety of information on overweight and obesity including obesity trends, economic consequences, state-based programs, recommended strategies and other resources for the health professional.

[CDC's Healthy Weight Web site](#)

This site provides a variety of information on achieving and maintaining a healthy weight including important information on weight assessments, balancing calories, health effects of overweight and obesity and other resources.

[CDC's LEAN Works!](#)

This Web-based resource offers interactive tools and evidence-based resources to design effective worksite obesity prevention and control programs.

STRESS MANAGEMENT

[NIOSH Stress...At Work](#)

This publication highlights knowledge about the causes of stress at work and outlines steps that can be taken to prevent job stress.

[Reducing Stress in the Workplace: An Evidence Review](#)

The 2012 report provides a plain language review of the scientific evidence for strategies to reduce the health impacts of workplace stress. Specific examples of best practice strategies for workplace stress reduction are provided along with a frame work for designing systems level workplace interventions.

[Stress in America: Our Health at Risk](#)

The report summarizes the results of the American Psychological Association's 2011 national Stress in America™ survey. The Stress in America™ survey measures attitudes and perceptions of stress among the general public and identifies leading sources of stress, common behaviors used to manage stress and the impact of stress on our lives.

[University of Massachusetts Lowell's Stress@Work Web site](#)

This site provides an overview of causes, impacts, and intervention strategies for work-related stress and is written for human resources and workplace health practitioners, and employees.

[Exposure to Stress: Occupational Hazards in Hospitals](#)

The brochure can be used to identify the sources of occupational stress, and recommend work practices to reduce occupational stress.

DEPRESSION

[Workplaces That Thrive: A Resource for Creating Mental Health-Friendly Work Environments](#)

The Substance Abuse and Mental Health Services Administration (SAMHSA) has developed this resource to help human resources professionals understand the benefits and design of a mental health-friendly workplace.

[Depression calculator](#)

This resource allows businesses to calculate the impact of depression in the workplace and the benefits of treatment.

[Treatment Works: Get Help for Depression and Anxiety](#)

This CDC site offers guidance on the signs of depression and where to find help.

[CDC Total Worker Health](#)

This resource provides a strategy integrating occupational safety and health protection with health promotion to prevent worker injury and illness and to advance health and well-being.

HIGH BLOOD PRESSURE AND HIGH CHOLESTEROL

[CDC's High Blood Pressure Web site](#)

[CDC's High Cholesterol Web site](#)

These two sites provide a variety of information on high blood pressure and cholesterol including trends and statistics, economic consequences, state-based programs, related CDC websites, and recommended strategies and other resources for patients and professionals.

[A Purchaser's Guide to Clinical Preventive Services](#)

Developed in collaboration with the National Business Group on Health and the CDC, the *Purchaser's Guide* translates clinical guidelines and medical evidence, providing large employers with the information they need to select, define, and implement preventive health benefits such as hypertension and lipid screening, counseling, and treatment.

[National Heart, Blood, Lung Institute](#)

This site includes publications, fact sheets, Web sites and interactive Web applications such as Your Guide to Lowering High Blood Pressure and Your Guide to Lowering Cholesterol with Therapeutic Lifestyle Changes.

[American Heart Association – High Cholesterol](#)

This site will provide information about cholesterol including why cholesterol matters; understanding your risk for cholesterol; symptoms, diagnosis, and monitoring of cholesterol; prevention and treatment of cholesterol; and cholesterol tools and resources.

[American Heart Association – High Blood Pressure](#)

This site will provide information about high blood pressure (HBP); why HBP matters; your risk for HBP; symptoms, diagnosis and monitoring of HBP; and prevention and treatment of HBP.

[Stanford Patient Education Research Center](#)

The Chronic Disease Self-Management Program is a workshop given two and a half hours, once a week, for six weeks, in community or worksite settings such as senior centers, churches, libraries and hospitals. People with different chronic health problems, such as high blood pressure or cholesterol, can attend together. Workshops are facilitated by two trained leaders, one or both of whom are non-health professionals with a chronic diseases themselves. Each participant in the workshop receives a copy of the companion book, *Living a Healthy Life with Chronic Conditions, 3rd Edition*, and an audio relaxation tape, *Time for Healing*. Employers can access this program through the Stanford School of Medicine for their employees.

DIABETES

[Diabetes At Work](#)

A free, easy-to-use Web site that enables companies to assess their need for diabetes education at the work site. Users can download more than 30 lesson plans and fact sheets resources that can be used to inform employees about how to best manage their diabetes while at work and how to reduce their risk of further complications. This site was developed by the National Diabetes Education Program's (a joint CDC/NIH program) Business Health Strategy Workgroup for top-level managers, occupational health providers, benefits and human resource managers, and employees.

[The National Diabetes Education Program \(NDEP\)](#)

NDEP is a partnership of the National Institutes of Health, the Centers for Disease Control and Prevention, and more than 200 public and private organizations. NDEP translates the latest science and spreads the word that diabetes is serious, common, and costly, yet controllable and, for type 2, preventable. The resources do not have a copyright so may be co-branded.

SIGNS AND SYMPTOMS OF HEART ATTACK AND STROKE

[National Heart, Lung, and Blood Institute Heart Attack Signs](#)

The National Heart, Lung, and Blood Institute has free downloadable posters, brochures, and other support materials available for the *Act In Time To Heart Attack Signs* campaign.

[Massachusetts Department of Public Health “Stroke Heroes Act FAST”](#)

The Massachusetts Department of Public Health Heart Disease and Stroke Prevention has free downloadable videos, posters, brochures and other materials available from their *Stroke Heroes Act FAST* campaign in English, Spanish, Portuguese and Khmer. The *Stroke Heroes Act FAST* message was created using the evidence-based Cincinnati Pre-Hospital Stroke Scale.

[Stroke Information Toolkits and Posters](#)

The National Institute of Neurological Disorders and Stroke has a *Know Stroke Community Education Kit* and support materials available in English and Spanish.

EMERGENCY RESPONSE TO HEART ATTACK AND STROKE

[ACOEM Automated External Defibrillation \(AED\) in the Occupational Setting](#)

The American College of Occupational and Environmental Medicine has a position statement entitled “Automated External Defibrillation in the Occupational Setting” that summarizes pertinent legislation and provides guidelines for AED use in the workplace.

[OSHA Best Practices Guide: Fundamentals of a Workplace First-Aid Program](#)

The Occupational Safety and Health Administration’s “Best Practices Guide: Fundamentals of a Workplace First-Aid Program” has information and resources for AEDs, CPR and workplace first aid.

[American Red Cross Workplace CPR, First Aid and AED Information](#)

The American Red Cross has many resources related to AEDs and CPR training.

OCCUPATIONAL SAFETY AND HEALTH

OSHA (Occupational Safety and Health Administration): This site provides the good sources of information for job safety and health. It includes prevention and training programs for injury and illness, injury and illness statistics by industry that can be used for benchmarking, and a Program Evaluation Profile tool to help evaluate your organization’s health and safety program.

[Occupational Safety and Health Administration](#)
[Injury and Illness Prevention Programs](#)
[Cooperative Programs](#)
[Program Evaluation Profile](#)
[Workplace Injury, Illness and Fatality Statistics](#)

NIOSH (National Institute for Occupational Safety and Health): This site provides information from the CDC for job safety and health. It includes safety and prevention programs, total worker health, a list of workplace safety and health topics, and training and a workplace development section.

[National Institute for Occupational Safety and Health Web site](#)
[Total Worker Health](#)
[Workplace Safety and Health](#)

EPA (Environmental Protection Agency): This site provides information on environmental health and safety with specific sections dedicated to job-related concerns such as indoor air quality and pesticides.

[U.S. EPA Web site](#)
[Learn the Issues Health and Safety](#)

The **Canadian Centre for Occupational Health and Safety**: This site provides free resources for organizations dealing with health and safety issues. It includes a free resource list with education and training information, topics for healthy workplaces, occupational health and safety programs and management systems, and products and services for organizations.

[Canadian Centre for Occupational Health and Safety Web site](#)

[Free Resources](#)

[Healthy Workplaces](#)

[Programs and Management Systems](#)

The **Center for the Promotion of Health in the New England Workplace (CPH-NEW)**: This is the website for the NIOSH-funded UMass-UConn Total Worker Health center (the academic partner on the CDC National Healthy Worksite Program).

[CPH-NEW Web site](#)

ERGONOMICS AND MUSCULOSKELETAL DISORDERS

CDC Workplace Health Promotion - Work-Related Musculoskeletal Disorders (WMSDs) Prevention

This site provides information and resources on preventing work-related musculoskeletal disorders.

NIOSH (National Institute for Occupational Safety and Health) Workplace Safety & Health Topics - Ergonomics and Musculoskeletal Disorders

This site provides information on ergonomics and musculoskeletal disorders in the workplace. It includes a list of ergonomics programs and interventions, evaluation of risk factors for lifting tasks, back injuries, keyboard and display terminal analysis, and the effects of vibration.

OSHA (Occupational Safety and Health Administration) Ergonomics - Outreach and Assistance

This site provides materials on ergonomic outreach and assistance. It includes ergonomic eTools, cooperative programs, training and education, and industry-developed guidelines.

Ergonomic Technology Center (ErgoCenter) at the University of Connecticut Health Center

This site provides information about the services and resources provided by the Ergonomic Technology Center. It includes the ideal work station, office ergonomics, and online resources to help bridge the gap between the development of ergonomic knowledge and the practical needs of industry and workers.

IWH (Institute for Work and Health) - MSD Tool Kit

This site provides toolkits for reducing musculoskeletal disorders in the workplace.

WORK-LIFE BALANCE

[Work, Family and Health Network](#)

This site is written for employers, researchers and working people. It provides information for employers, evidence on effective worksite interventions for workers and families, as well as family resources. The program is funded by NIH and the CDC.

[Families and Work Institute](#)

This site provides research findings on employer Work-Life practices and benefits, the changing workforce, family and community. It includes reports available for download, research and publications, and a newsroom section featuring a blog and press releases.

SAFETY CLIMATE

[Nonprofit Risk Management Center Resources](#)

[Organizational Safety Culture Checklist](#)

[Workplace Safety Toolkit](#)

The first site provides information on workplace safety climates and cultures. It includes a checklist of what leadership and supervisors can do to strengthen safety culture and climate. The second link includes links to a variety of tools for improving workplace safety.

[IWH \(Institute for Work and Health\) - In Focus: Safety Climate](#)

This site provides links to several issue briefs and best practice summaries on specific safety and health related topics and safety climate interventions.

[Oregon Health and Science University - Innovations in Safety Climate](#)

This site provides materials on innovations in safety climate. It includes FREE webinars on transforming safety climate, intervention paths for climate and employee safety in health care.