

WORKING FROM HOME SURVEY

Ask these pulse survey questions to learn about what did/didn't work well as your employees transition from working from home to back in office.

1. I felt supported by my manager when working from home.

(Strongly Disagree, Disagree, Somewhat Disagree, Somewhat Agree, Agree, Strongly Agree)

2. I felt connected to my team when working from home.

(Strongly Disagree, Disagree, Somewhat Disagree, Somewhat Agree, Agree, Strongly Agree)

3. I felt informed about the organization's goals and priorities when working from home.

(Strongly Disagree, Disagree, Somewhat Disagree, Somewhat Agree, Agree, Strongly Agree)

4. What's one process or practice that you would like to see continued when we return to the workplace?

(Open-ended)

5. What's one process or practice that you would like to see revised or stopped when we return to the workplace?

(Open-ended)

6. Under normal circumstances (i.e. not during the COVID-19 pandemic), how often would you prefer to work from home?

[Multiple choice: Never, Occasionally (1-2 times per month), Regularly (1-2 times per week), Always (full-time remote worker)]

FLEXIBLE WORKPLACE SURVEY

Ask these pulse survey questions if you're able to offer flexibility to employees when they may return to the workplace during the COVID-19 pandemic.

1. I trust our leaders to take appropriate safety measures before allowing employees to return to our workplace.
(Strongly Disagree, Disagree, Somewhat Disagree, Somewhat Agree, Agree, Strongly Agree)
2. I feel well-informed about the safety measures being taken to allow our employees to return to the workplace.
(Strongly Disagree, Disagree, Somewhat Disagree, Somewhat Agree, Agree, Strongly Agree)
3. I feel empowered to decide when I will return to the workplace.
(Strongly Disagree, Disagree, Somewhat Disagree, Somewhat Agree, Agree, Strongly Agree)
4. My manager supports my decision on whether to return to the workplace or continue working from home.
(Strongly Disagree, Disagree, Somewhat Disagree, Somewhat Agree, Agree, Strongly Agree)
5. My organization encourages employees to stay home if I am sick or a family member is sick.
(Strongly Disagree, Disagree, Somewhat Disagree, Somewhat Agree, Agree, Strongly Agree)
6. Which of the following factors influence your decision to resume working onsite when our workplace reopens?
[Multiple choice: Child Care, Risk of Exposure to COVID-19, Safe Transportation/Commute, Other (Triggers Comment)]
7. Aside from what has been communicated, do you have additional suggestions to allow us to continue social distancing when we re-open the workplace?
(Open-ended)
8. What's one process or practice that you would like to see continued when we return to the workplace?
(Open-ended)
9. What's one process or practice that you would like to see revised or stopped when we return to the workplace?
(Open-ended)

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WORKPLACE REOPENING SURVEY

Ask these pulse survey questions if you're not able to offer flexibility to employees when they return to the workplace during the COVID-19 pandemic.

1. I trust our leaders to take appropriate safety measures before allowing employees to return to our workplace.

(Strongly Disagree, Disagree, Somewhat Disagree, Somewhat Agree, Agree, Strongly Agree)

2. I feel well-informed about the safety measures being taken to allow our employees to return to the workplace.

(Strongly Disagree, Disagree, Somewhat Disagree, Somewhat Agree, Agree, Strongly Agree)

3. I have the materials and resources needed to perform my job safely in the workplace.

(Strongly Disagree, Disagree, Somewhat Disagree, Somewhat Agree, Agree, Strongly Agree)

4. My organization encourages employees to stay home if I am sick or a family member is sick.

(Strongly Disagree, Disagree, Somewhat Disagree, Somewhat Agree, Agree, Strongly Agree)

5. Aside from what has been communicated, do you have additional suggestions to allow us to continue social distancing when we re-open the workplace?

(Open-ended)