

Employee Needs and Interest Survey

1. Please indicate how likely you would be to participate in each the following if they were offered as worksite wellness opportunities?

	Very Likely	Somewhat Likely	Not Likely
Onsite exercise or yoga class			
Team or individual challenge			
Weight management program			
Stress management program			
Health screenings (Cholesterol, blood pressure, etc.)			
Flu shots			
CPR/AED Class			
Onsite chair massage therapy			
Healthy potluck lunches			
Walking club or event			
Monthly wellness seminar			

2. Read through the following list of wellness topics and indicate which ones you are interested in learning more about. Please check all that apply.

- Financial Management
- Time management and organizational skills
- Parenting tips
- Eldercare issues
- Nutrition and cooking demonstrations
- Tips for increasing physically activity
- Addressing stress and life balance
- Ergonomics - preventing wrist, back and neck pain
- Smoking cessation
- Sleep and your health
- Recognizing symptoms of alcohol abuse
- Understanding your cholesterol and blood pressure numbers
- Other, please specify: _____

Employee Needs and Interest Survey

3. How would you like to receive information on health and wellness topics? You may choose more than one.

- Presentation – in person
- Webinar
- Bulletin board
- Literature - brochures or flyer
- E-mail
- Other, please specify: _____

4. When would you prefer to participate in onsite wellness activities? Please check only one.

- Before work
- During lunch break
- After work

5. If you could receive incentives for participating in wellness activities, which of the following would motivate you to participate? Please check all that apply.

- Award certificate and recognition
- Pedometer
- T-shirt or water bottle
- Gift certificate
- Gas card
- Paid time off
- Other, please specify: _____

6. Please give your opinion for each of the statements below.

	Agree	Neutral	Disagree	I don't know
Management listens to employee concerns and ideas.	1	2	3	4
Management is committed to supporting employee health and wellness	1	2	3	4
My supervisor is committed to supporting employee health and wellness.	1	2	3	4
My co-workers support me in making healthy lifestyle choices.	1	2	3	4
I am encouraged to take work breaks as allowed in my job description.	1	2	3	4
There are safe options for being physically active at my workplace (i.e. walking or onsite exercise equipment)	1	2	3	4
When food is served at a meeting, healthier options such as fruit or vegetables are generally offered.	1	2	3	4

Employee Needs and Interest Survey

7. In a regular week, how many days do you take part in physical activity that increases your heart rate (i.e. brisk walking, water exercise, dancing, running, bike riding, or an exercise class)?

- 0 days
- 1-2 days
- 3-4 days
- 5 or more days

8. On days that you take part in physical activity, how much total time do you spend in this activity?

- 15 minutes or less
- 16 – 30 minutes
- 31 – 60 minutes
- More than one hour

1. In a regular day, how many servings of fruit do you eat? Examples of a serving might be: 1 medium sized piece of whole fruit, ½ cup chopped, cooked, canned or frozen fruit, or ¼ cup dried fruit.

- a. 0
- b. 1
- c. 2
- d. 3
- e. 4
- f. 5 or more

2. In a regular day, how many servings of vegetables do you eat? Examples of a serving might be: 1 cup of salad greens or raw leafy vegetables or ½ cup of other raw/cooked vegetables or 6 oz. 100% vegetable juice.

- a. 0
- b. 1
- c. 2
- d. 3
- e. 4
- f. 5 or more

9. Your comments and suggestions are welcome
