

# EMPLOYEE WELL-BEING SATISFACTION SURVEY

**Instructions:** Please take a few minutes to complete this survey. Your responses will remain confidential and will help us improve the workplace environment.

**FOR QUESTIONS 1 - 7, PLEASE USE THE FOLLOWING SCALE:**

1 = Strongly Disagree

2 = Disagree

3 = Neutral

4 = Agree

5 = Strongly Agree

**1. I feel valued as an employee.**

1    2    3    4    5

**2. I have a good work-life balance.**

1    2    3    4    5

**3. I feel supported by my manager.**

1    2    3    4    5

**4. I feel supported by my colleagues.**

1    2    3    4    5

**5. I have access to the resources I need to do my job effectively.**

1    2    3    4    5

**6. I feel comfortable discussing my concerns or needs with management.**

1    2    3    4    5

**7. I am satisfied with my opportunities for professional growth.**

1    2    3    4    5

**8. I am well aware of the well-being tools, resources and programming my organization makes available to me.**

1    2    3    4    5

**9. Do you feel that your workload is manageable?**

Yes    No

**10. In the past 30 days, how often have you experienced workplace stress beyond normal, manageable stress?**

- 0 – 2 days
- 3 – 5 days
- 6 – 10 days
- 11 – 15 days
- More than 15 days

**11. Do you feel that your physical well-being is supported at work?**

- Yes
- No

**12. Do you feel that your mental well-being is supported at work?**

- Yes
- No

**13. Do you feel that your financial well-being is supported at work?**

- Yes
- No

**14. Do you believe your organization's culture of well-being is getting better or getting worse?**

- Getting Better
- Getting Worse

**15. Please identify improvements that could be made to enhance your well-being at work.**

Thank you for your participation! Your feedback is invaluable in helping us create a better workplace.