

### Sample Employee Opinion Surveys

The following worksite survey is being conducted to determine whether employees would appreciate and benefit from a smoke-free policy in the workplace.

#### Worksite Survey

1. Do you believe that (Agency Name Here) should be 100% smoke free in all facilities?
  - Yes
  - No
  - Maybe/Unsure
2. If (Agency Name Here) were to adopt a 100% smoke free policy, would your opinion of the organization:
  - Increase
  - Decrease
  - Stay the same
3. What is your opinion of a smoking policy for the workplace?
  - Company grounds should be entirely smoke-free
  - The building should be entirely smoke-free
  - Smoking should be allowed in rooms with separate ventilation, dedicated only to smoking. Please specify the location\_\_\_\_\_
4. What barriers do you see that (Agency Name Here) would face if we adopted a 100% smoke free policy?  
(Check all that apply)
  - Employees would not follow policy
  - Clients/visitors would not follow policy
  - Employees would seek jobs elsewhere
  - Clients would seek services elsewhere
  - Policy would be too hard to enforce
  - Other, please specify: \_\_\_\_\_
5. Please indicate the extent to which you are bothered by secondhand smoke at work.
  - Frequently bothered
  - Occasionally bothered
  - Seldom bothered
  - Never bothered
6. If you are bothered by secondhand smoke at work, in what way are you bothered? (check all that apply)
  - Eye, nose and throat irritation
  - Concern for your long-term health
  - Interference with work performances
  - Headaches
  - Pregnancy related concerns
  - Other, please specify\_\_\_\_\_
7. Please indicate your current smoking status:
  - Currently smoke cigarettes
  - Currently smoke pipe/ cigar
  - Used to smoke
  - Never smoked

#### For current smokers only:

8. Do you smoke at work?
  - Yes
  - No
9. Do you want to quit?
  - I want to quit
  - I do not want to quit
  - Maybe / Unsure

10. Would you attend a company-sponsored program to help you stop smoking?
- Yes
  - No
  - Maybe
11. If smoking were banned in the workplace, how would this affect the amount you currently smoke?
- It would not affect it
  - I would smoke less
  - I would smoke more at home
  - I would try to quit.
12. What do you think would help you quit using tobacco?
- |                                 |   |
|---------------------------------|---|
| Smoking cessation class         | Quitting with a friend/spouse/co-worker |
| Information on how to quit      | Incentive program                       |
| Medication aids to help me quit | Internet program                        |
| A Quitline                      | Nothing. I will quit on my own.         |
13. Are you aware of 1-800-QUIT-NOW, the North Carolina Tobacco Use Quitline?
- |     |    |
|-----|----|
| Yes | No |
|-----|----|

**Thank you for your cooperation!**

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**Sample Worksite Follow-Up Survey**

1. Please indicate your current smoking status:
- Currently smoke cigarettes
  - Currently smoke pipe/ cigar
  - Former smoker (stopped **before** the smoking policy was adopted)
  - Former smoker (stopped **after** the smoking policy was adopted)
  - Never smoked
2. What is your opinion of the smoking policy at your workplace?
- Not strict enough
  - Reasonable
  - Too strict
3. What is your opinion of secondhand smoke? Check one:
- Definitely harmful
  - Probably harmful
  - Not harmful
  - Not sure
- For those who smoked at the time the smoking policy was implemented:
4. Have you enrolled in a smoking cessation program?
- Yes, I have enrolled.
  - No, I have not enrolled.
5. How has the smoking policy affected your smoking? Check all that apply:
- I smoke less overall.
  - I smoke less at work.
  - I smoke more overall.
  - I smoke more at work.
  - I smoke more at home.
  - It has not affected me.
  - I quit smoking.

- I am trying to quit.
- I smoke less at home.
- I only smoke outdoors.

6. Did you use 1-800-QUIT-NOW?

- Yes
- No

**Thank you for your cooperation!**

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**Sample Customer Survey**

Here is a set of easy questions about secondhand smoke you can ask customers and visitors as they leave your business. You can then tally these results to determine whether your customers would support a smoke-free policy.

<b>Assessing Secondhand Smoke: Sample Customer Survey</b>						
	<i>Question</i>	<i>Very True</i>	<i>Some-what True</i>	<i>Not Very True</i>	<i>False</i>	<i>Don't Know</i>
<i>Knowledge of secondhand smoke</i>	Exposure to secondhand smoke is dangerous for adults.					
	Exposure to secondhand smoke is dangerous for children.					
	Secondhand smoke causes lung cancer.					
	Secondhand smoke causes heart disease.					
	Secondhand smoke causes asthma and bronchitis.					
	Secondhand smoke triggers asthma and bronchitis					
<i>Preference</i>	A smoke-free environment is the only way to protect yourself from secondhand smoke.					
	It is ok to be exposed to some secondhand smoke.					
<i>Affect on Patronage</i>	I would be more likely to eat/shop at a smoke-free restaurant/store.					
	I would tell my friends if a restaurant/store was smoke-free.					