

Health Canada - COVID-19 Employee Check-in Survey Results

GENERAL INFORMATION

# of Respondents:	5,737
Response Rate:	64%

1. Please rate the extent to which you are concerned about the following in the context of the COVID-19 pandemic.							Excludes "Not Applicable"
	Not at all concerned	A little concerned	Moderately concerned	Very concerned	Extremely concerned	Not applicable	% Very or Extremely concerned
Balancing work and childcare	14%	8%	10%	11%	17%	40%	47%
Contracting COVID-19	5%	20%	31%	22%	21%	1%	43%
Someone close to me contracting COVID-19	3%	12%	25%	29%	30%	2%	60%
Health of a medically vulnerable loved one	4%	10%	19%	26%	34%	7%	64%
Child(ren)'s health and well-being	6%	7%	13%	18%	24%	32%	62%
Spouse/partner's health and well-being	4%	10%	21%	21%	25%	18%	57%
Limited childcare options (daycare, school, camps)	13%	6%	9%	10%	15%	46%	48%
Family stress due to confinement	13%	21%	26%	20%	15%	5%	36%
Limited opportunities for exercise	26%	21%	26%	15%	9%	2%	25%
Maintaining social ties	13%	24%	34%	19%	10%	0%	29%
Finances	33%	28%	22%	9%	6%	1%	16%
Delayed training/career courses	35%	29%	20%	8%	4%	3%	13%
Ergonomic suitability of work setup at home	18%	21%	26%	19%	14%	1%	34%
My job security	29%	24%	21%	12%	13%	1%	25%
My spouse/partner's job security	23%	16%	16%	11%	12%	22%	30%
Effects on leave (e.g., approval of Leave with Income Averaging; approval of summer leave; approval of leave amendments)	44%	24%	15%	6%	5%	6%	11%
Isolation from family and friends	9%	24%	33%	20%	13%	0%	34%

2. What is your current work arrangement?	#	%
I continue to work from the office/ laboratory	163	3%
I work remotely	5,114	89%
I work both from the office/ laboratory and remotely	367	6%
Other (Please specify)	93	2%
Total	5,737	100%

	Significantly improved	Moderately improved	No change	Moderately worsened	Significantly worsened	% Significantly or moderately worsened
3. How has your ability to deliver work changed because of the COVID-19 pandemic?	9%	16%	40%	28%	6%	34%

	Significantly reduced	Moderately reduced	Unaffected	Moderately increased	Significantly increased	% Significantly or moderately increased
4.How has your workload been affected by the COVID-19 pandemic?	3%	13%	38%	29%	17%	47%

5. Please rate the extent to which the following factors have affected your ability to deliver your work during the COVID-19 pandemic.							Excludes "Not Applicable"
	Not at all	To a small extent	To a moderate extent	To a large extent	To a great extent	Not applicable	% To a great or large extent
Psychological reasons (e.g., stress, anxiety, mental health)	22%	34%	24%	11%	8%	1%	19%
Caring for dependent children	16%	10%	10%	8%	13%	43%	37%
Homeschooling dependent children	18%	8%	9%	7%	11%	47%	35%
Caring for other family members	27%	22%	15%	6%	4%	25%	14%
Technology (e.g., access to IT tools, network)	23%	37%	24%	10%	6%	1%	16%
Access to appropriate workspace and office equipment	26%	32%	22%	11%	8%	1%	19%
Increased workload	34%	24%	20%	10%	8%	5%	19%
Guidance or direction on work activities (e.g., competing or shifting responsibilities, lack of clear priorities)	35%	28%	19%	9%	7%	2%	16%

MENTAL HEALTH

	Significantly better	Moderately better	No change	Moderately worse	Significantly worse	Answer Count	% Significantly or moderately worse
6. Compared to before the COVID-19 pandemic began (March 2020), how would you rate your mental health now?	7%	14%	29%	42%	8%	5,737	49%

	Always/ almost always	Often	Sometimes	Rarely	Never/ almost never	Answer Count	% Always/almost always or Often
7. To what extent do you agree with the following statement: My mental health is negatively affecting my ability to carry out day-to-day responsibilities at work.	3%	7%	32%	32%	27%	5,737	10%

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WELL-BEING

8. Please indicate your overall level of agreement with the following statements on your well-being during the COVID-19 pandemic.							Excludes "Not Applicable"
	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Not applicable	% Strongly agree / agree
My work-life balance has improved.	12%	21%	22%	24%	21%	1%	45%
The pressure to deliver work has affected my well-being.	11%	26%	31%	22%	8%	2%	31%
My supervisor has created an environment where I feel free to discuss matters that affect my well-being.	3%	6%	14%	38%	37%	1%	76%
I receive conflicting messages from my direct supervisor about prioritizing self-care while also meeting work deliverables.	24%	32%	20%	13%	7%	4%	21%
I feel as though I can raise my concerns or challenges with my manager/ management team.	4%	8%	12%	43%	32%	1%	76%
I am satisfied with the measures being taken by my organization to address my mental health and wellbeing.	4%	10%	27%	38%	20%	2%	58%
If I need help with my well-being, I am aware of the resources available to me (e.g., Employee Assistance Program).	1%	2%	7%	52%	38%	1%	90%
I am concerned about an increase in my alcohol and/or substance use (e.g. cannabis, narcotics).	41%	20%	12%	6%	1%	19%	9%

COMMUNICATIONS

9. Please indicate your overall level of agreement with the following statements on communications during the COVID-19 pandemic.							Excludes "Not Applicable"
	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Not applicable	% Strongly agree / agree
I know where to find up-to-date departmental information related to COVID-19.	1%	6%	11%	56%	26%	0%	83%
I find that there is too much information to keep track of and I feel overwhelmed.	5%	22%	30%	31%	12%	0%	43%
Essential information flows effectively from senior management to staff.	4%	13%	23%	47%	13%	0%	60%
My immediate supervisor keeps me informed about the issues affecting my work.	2%	7%	13%	50%	26%	1%	77%
Senior department managers have been making effective and timely decisions.	4%	11%	34%	38%	13%	1%	51%

IT TOOLS AND NETWORK

10. Please indicate your overall level of agreement with the following statements on IT tools and network during the COVID-19 pandemic.							Excludes "Not Applicable"
	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Not applicable	% Strongly agree / agree
I have access to the IT tools I need to work remotely (e.g., computer, monitor, mouse and keyboard).	2%	10%	6%	50%	32%	1%	82%
I can effectively use the collaborative tools that are at my disposal (e.g., MS Teams Zoom, Slack).	1%	7%	8%	53%	31%	1%	84%
I have been able to access IT support (e.g., Helpdesk) to resolve my technology issues.	1%	3%	8%	48%	31%	10%	87%
I have had reliable access to the network when needed.	3%	10%	10%	51%	25%	0%	77%
My access to the network and key applications (e.g., Outlook and critical applications) is better now than it was two months ago.	1%	4%	13%	38%	42%	2%	81%

HOME WORKSPACE AND OFFICE EQUIPMENT

11. Please indicate your overall level of agreement with the following statements on home workspace and office equipment.							Excludes "Not Applicable"
	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Not applicable	% Strongly agree / agree
I currently have an adequate home workspace that meets my needs.	8%	21%	12%	38%	19%	1%	58%
I can safely transport ergonomic equipment that I have permission to remove from the office.	6%	14%	14%	27%	14%	24%	55%
I can safely install my ergonomic equipment.	5%	12%	17%	25%	13%	27%	52%

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INVOLVEMENT AND INFLUENCE

12. Please indicate your overall level of agreement with the following statements regarding involvement and influence.							Excludes "Not Applicable"
	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Not applicable	% Strongly agree / agree
I have had regular check-ins with my supervisor.	2%	6%	7%	48%	36%	0%	84%
My supervisor has provided me with flexible working arrangements.	1%	3%	10%	42%	38%	6%	85%
My supervisor has clearly laid out my work priorities and deliverables.	2%	8%	17%	45%	26%	1%	72%
I understand how my team is contributing to the Department's COVID-19 pandemic response.	2%	6%	14%	41%	32%	5%	77%
I could contribute more to the organization's efforts if I were assigned different work.	9%	23%	34%	19%	9%	7%	30%
My work is meaningful.	2%	4%	13%	49%	33%	0%	82%
I feel connected to my colleagues.	5%	16%	20%	43%	16%	0%	59%
I would like to be more engaged in helping shape the future of the workplace.	1%	6%	35%	38%	16%	3%	55%

POLICIES AND PROCESSES RELATED TO COVID-19

13. Please indicate your overall level of agreement with the following statements on policies and processes.							Excludes "Not Applicable"
	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Not applicable	% Strongly agree / agree
I know what internal services are still operational (e.g., Pay Centre).	2%	18%	19%	48%	12%	0%	60%
I know the process for reporting a COVID-19 infection or exposure.	4%	23%	15%	45%	13%	0%	57%
I clearly understand under what circumstance code 699 should be used.	5%	12%	11%	51%	20%	2%	72%
I know when and how to appropriately access my office building/laboratory.	2%	8%	9%	55%	23%	3%	81%

LOOKING TO THE FUTURE

14. My preference for my post pandemic work schedule is:	#	%
Return to the workplace full time	362	6%
Work remotely full time	2,133	37%
Have a flexible schedule	3,091	54%
Not applicable - I am required to work in the office/laboratory	151	3%
Total	5,737	100%

14. a) How often would you be interested in working remotely after re-entry to the workplace?	#	%
1-2 days a week	1,112	36%
3-4 days a week	1,668	54%
Ad hoc/on occasion	311	10%
Total	3,091	100%

15. When considering the prospect of returning to the workplace, please rate the extent to which the following factors cause you concern, anxiety or fear.							Excludes "Not Applicable"
	Not at all concerned	A little concerned	Moderately concerned	Very concerned	Extremely concerned	Not applicable	% Very or extremely concerned
Returning before a vaccine is available	9%	14%	19%	21%	37%	1%	58%
Commuting via public transit	4%	4%	7%	15%	43%	27%	79%
Safe use of public areas (kitchens, washrooms, cafeteria, elevators, etc.)	4%	11%	18%	25%	40%	1%	66%
Social distancing in the cubicle environment	7%	12%	18%	23%	38%	3%	62%
Concerns over lack of hand sanitizer or sterilizing wipes in the workplace	14%	17%	22%	19%	26%	1%	46%
Concerns over workload imbalances of those working onsite vs. those continuing to work from home	34%	18%	21%	12%	12%	3%	25%
The care for dependent children or family members while you are at work	11%	9%	9%	10%	23%	39%	53%
Fear of contracting COVID-19 while at work	5%	17%	20%	20%	37%	1%	58%
Fear of contracting COVID-19 while at work and retransmitting to high-risk family member	5%	10%	13%	18%	48%	6%	70%

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MANAGERS

16. I am a/an:	#	%
Manager (e.g., supervisor, manager, EX)	1,229	21%
Employee	4,508	79%

17. Please indicate your overall level of agreement with the following statements on your point of view as a manager during the COVID-19 pandemic.							Excludes "Not Applicable"
	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Not applicable	% Strongly agree / agree
I know how to support my employees and where to find the tools to address their well-being.	0%	4%	9%	62%	23%	1%	86%
I regularly share updates related to COVID-19 with my team.	0%	5%	11%	52%	29%	2%	83%
I can set priorities with confidence for my team.	1%	7%	10%	55%	26%	1%	82%
I know the current options available for staffing positions.	2%	11%	16%	47%	20%	5%	71%
My team's ability to work has been affected during this period.	7%	18%	12%	38%	24%	1%	63%
My team has used remote collaboration tools.	0%	1%	2%	40%	55%	1%	96%
							Excludes "Not Applicable"
	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Not applicable	% Strongly agree / agree
18. Please indicate your overall level of agreement with the following statement: I have the right tools and resources necessary to support my team during COVID-19.	2%	7%	17%	56%	17%	1%	74%