

# A survey of healthcare workers' experiences during a pandemic

## Consent

- \* 1. This survey is designed to learn about **your experiences as a healthcare worker during a pandemic**. It is based on a number of scientifically-recognized questions that measure different aspects of job-related psychosocial conditions, along with symptoms related to intense stressful conditions and mood disorders.

The survey was put together by the Occupational Health Clinics for Ontario Workers (OHCOW), with help from researchers at the Institute of Work & Health and Duke University in North Carolina. We also had input from a number of health and safety union staff representatives, who told us about the concerns and questions raised by their members.

OHCOW is a non-government, not-for-profit organization with seven clinics across Ontario. Our goal is to protect and improve the health of working people by providing clinical and prevention services, including research.

We take part in, and share, research with policy-makers, workers and workplaces, clinicians, health and safety professionals, and the general public. OHCOW operates with support from the Ontario Ministry of Labour, Training and Skills Development (MOL). Our separate Board of Directors is accountable to the MOL for funding. For more information about OHCOW, our website ([www.ohcow.on.ca](http://www.ohcow.on.ca)).

### **Voluntary Participation**

You do not have to participate in the survey. Any information you give today will be kept strictly confidential. It will not be given to others, including the MOL, the Workplace Safety & Insurance Board of Ontario or anyone in your workplace. We will never identify you in any way in any presentations or publications that result from this project.

### **What are the risks?**

There are no known significant risks if you participate in this survey. If you feel uncomfortable answering a question, skip it. We will keep everyone's information strictly confidential.

### **What are the benefits?**

You may not receive any direct benefit from participating. However, information gathered from this survey will help us to better understand and address issues facing healthcare workers in a pandemic. We will share our findings publicly.

### **What about confidentiality and privacy?**

All the information collected in this survey is confidential. Only the researchers directly involved in this project will see all the answers. The team will not keep any information that could identify you or others. All the data we collect will be stored on a secure server.

Your participation in this survey implies that you have consented to the use of your answers -- grouped with those from other people -- in reports or publications. We will present all reports or publications using the responses in a way that ensures no-one's identity is revealed.

We intend to use the data collected for research and to share with research organizations. The data, analysis and related information may be used in presentations, websites, and union, trade, and academic publications.

### **Questions?**

If you have questions, please contact John Oudyk at [joudyk@ohcow.on.ca](mailto:joudyk@ohcow.on.ca)

### **I accept these conditions and consent to continue this survey:**

Yes

No

## 2. Filling out this survey more than once (things change!)

Needless to say, things are changing rapidly. We recognize that this survey is only designed to capture your current situation today, and that it might change drastically tomorrow. For this reason, we will keep the survey open in case you want to tell us about your experiences again at a later date.

For our analysis to make sense of multiple responses from one person, it would be very helpful to link your answers today with future responses. To maintain confidentiality, we need an identifier that you can easily remember and is meaningless to anyone else.

We are not tracking the computer, phone, or tablet you use for the survey. The only way we can link your responses is if you come up with a unique way to identify yourself.

We suggest using your **house number** (not the street name; and without the apartment number, if you have one) and the **last two digits of your phone number**. For example, if I live at 848 Main St. and my phone number is 905-549-2552, my ID code would be 848-52.

This will be an identifier that only you know (and can easily remember). It will also allow us to link your previous answers with those from a repeat survey you might do later on.

If you think you might want to complete the survey again sometime, or if you have already done so - please put your **ID code** here:

## A survey of healthcare workers' experiences during a pandemic

### Questions about how you are feeling

The following questions are about your own health and well-being. Please do not try to distinguish between symptoms that are caused by work and symptoms that are due to other causes. The task is to describe how you feel in general.

**These questions are about your health and well-being during the past 7 days:**

3. How often have you felt worn out?

- all the time
- a large part of the time
- part of the time
- a small part of the time
- not at all

4. How often have you been emotionally exhausted?

- all the time
- a large part of the time
- part of the time
- a small part of the time
- not at all

5. How often have you been stressed?

- all the time
- a large part of the time
- part of the time
- a small part of the time
- not at all

6. How often have you been irritable?

- all the time
- a large part of the time
- part of the time
- a small part of the time
- not at all

7. How often have you slept badly and restlessly?

- all the time
- a large part of the time
- part of the time
- a small part of the time
- not at all

8. How often have you woken up several times and found it difficult to get back to sleep?

- all the time
- a large part of the time
- part of the time
- a small part of the time
- not at all

## A survey of healthcare workers' experiences during a pandemic

### Questions about responses to stressful experiences

How much have you been bothered during the **PAST SEVEN (7) DAYS** by each of the following problems that occurred or became worse after extremely stressful events/experiences?

9. Feeling detached or distant from yourself, your body, your physical surroundings, or your memories?

- not at all
- a little bit
- moderately
- quite a bit
- extremely

10. Being "super alert," on guard, or constantly on the lookout for danger?

- not at all
- a little bit
- moderately
- quite a bit
- extremely

11. Being extremely irritable or angry to the point where you yelled at other people, got into fights, or destroyed things?

- not at all
- a little bit
- moderately
- quite a bit
- extremely



## A survey of healthcare workers' experiences during a pandemic

### Questions about your moods

The following questions ask about thoughts, feelings, and behaviours, often tied to concerns about family, health, finances, school, and work over the **last 7 days**.

12. Feeling nervous, anxious, or on edge

- not at all
- several days
- more than half the days
- nearly every day

13. Not being able to stop or control worrying

- not at all
- several days
- more than half the days
- nearly every day

14. Little interest or pleasure in doing things

- not at all
- several days
- more than half the days
- nearly every day

15. Feeling down, depressed, or hopeless

- not at all
- several days
- more than half the days
- nearly every day

# A survey of healthcare workers' experiences during a pandemic

## Exposures to COVID

16. **How many patients** infected with COVID-19 (suspected/presumed and/or confirmed) in your organization?

- none
- only one
- 2-5
- 6-10
- 11-20
- 20-50
- more than 50
- don't know

17. How much **contact** do you have **with COVID-19 patients**?

- direct contact with patient(s)
- within 6 feet of a patient
- in the patients' rooms (more than 6 feet away)
- work on the same floor/ward/dept.
- visit such a floor/ward/dept as part of my work
- share work spaces (entrances, cafeteria, washrooms, locker-rooms,etc.) with other workers who work with/near COVID-19 patients
- none that I am aware of

18. **How many workers** have been infected with COVID-19 (suspected/presumed and/or confirmed) in your workplace?

- none
- only one
- 2-5
- 6-10
- 11-20
- 20-50
- more than 50
- don't know

Other (please specify)

19. Have you experienced any of the following (check all that apply):

- told you had contact with a COVID-19 patient at work
- told you had contact with a COVID-19 patient outside of work
- told to work despite exposure
- experienced symptoms similar to COVID-19
- told to work despite symptoms
- told to self-isolate
- tested for COVID-19
- tested positive for COVID-19
- submitted forms for workers' compensation for contracting COVID-19 at work

Other (please specify)

20. **How concerned** are you about **bringing the virus home** to those with whom you live and/or friends?

- extremely concerned
- very concerned
- concerned
- some concern
- little concern
- no concern

21. On a scale from 1 to 10 how would you rate your **current level of fear** about this whole pandemic situation:

- 1 little to no fear at all
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 as much fear as I have ever felt!

## A survey of healthcare workers' experiences during a pandemic

### Questions about the availability and adequacy of infection control measures in your workplace

The following questions look at what **preventative measures, procedures, or supports** are currently **available** to you, and **how effective** they are:

#### 22. Personal protective equipment (PPE)

|  | appropriate<br>type AND<br>adequate<br>supply | appropriate<br>type AND<br>inadequate<br>supply | inappropriate<br>type AND<br>adequate<br>supply | inappropriate<br>type AND<br>inadequate<br>supply | needed<br>BUT not<br>available<br>at all | not sure/<br>don't know<br>what is<br>appropriate | not<br>applicable     |
|--|---|---|---|---|--|---|-----------------------|
| gloves   | <input type="radio"/>                         | <input type="radio"/>                           | <input type="radio"/>                           | <input type="radio"/>                             | <input type="radio"/>                    | <input type="radio"/>                             | <input type="radio"/> |
| eye protection/<br>goggles                         | <input type="radio"/>                         | <input type="radio"/>                           | <input type="radio"/>                           | <input type="radio"/>                             | <input type="radio"/>                    | <input type="radio"/>                             | <input type="radio"/> |
| face shield  | <input type="radio"/>                         | <input type="radio"/>                           | <input type="radio"/>                           | <input type="radio"/>                             | <input type="radio"/>                    | <input type="radio"/>                             | <input type="radio"/> |
| gown   | <input type="radio"/>                         | <input type="radio"/>                           | <input type="radio"/>                           | <input type="radio"/>                             | <input type="radio"/>                    | <input type="radio"/>                             | <input type="radio"/> |
| hand sanitizer                                     | <input type="radio"/>                         | <input type="radio"/>                           | <input type="radio"/>                           | <input type="radio"/>                             | <input type="radio"/>                    | <input type="radio"/>                             | <input type="radio"/> |
| surgical/procedure<br>masks                        | <input type="radio"/>                         | <input type="radio"/>                           | <input type="radio"/>                           | <input type="radio"/>                             | <input type="radio"/>                    | <input type="radio"/>                             | <input type="radio"/> |
| N95 masks  | <input type="radio"/>                         | <input type="radio"/>                           | <input type="radio"/>                           | <input type="radio"/>                             | <input type="radio"/>                    | <input type="radio"/>                             | <input type="radio"/> |
| PAPR's (powered<br>air particulate<br>respirators) | <input type="radio"/>                         | <input type="radio"/>                           | <input type="radio"/>                           | <input type="radio"/>                             | <input type="radio"/>                    | <input type="radio"/>                             | <input type="radio"/> |

Other (please specify)

23. Do you feel sufficiently **trained** to **don and doff your PPE** without contaminating yourself?

- I have not received such training
- I have been trained but do not feel confident
- I have been trained and feel somewhat confident
- I have been trained and feel confident
- I have been trained and feel very confident

24. How long has it been since you were **fit-tested** for an N95 respirator?

- within the last month
- within the last 6 months
- within the last year
- 1-2 years ago
- 2-5 years ago
- 5+ years ago
- never been fit-tested

25. Has your employer imposed any of the following **restrictions on the supply of PPE** (check all that apply)?

- prohibition - refused to supply a certain type of PPE
- restricted access - needing permission to use specified PPE
- extended use of PPE - beyond the normal use
- re-use your own PPE
- re-use PPE previously worn by others

Please specify the type of PPE that your answers apply to:

26. How confident are you in your ability to adequately **assess your own personal risk**, and **assess your personal protective equipment requirements**?

- very confident
- confident
- somewhat confident
- little confidence
- no confidence at all



27. If denied appropriate PPE which statement best characterize how you feel about **exercising your right to refuse unsafe work?**

- that option is legally not available to me
- definitely not
- not likely
- perhaps, in an extreme situation
- probably, if I considered the risk significant
- definitely, I would not hesitate

**28. Preventive measures/ procedures**

|  | appropriate and adequately implemented | <b>appropriate but</b> inadequately implemented | <b>inappropriate</b>  | <b>lacking</b>        | <b>not sure/ don't know</b> what is appropriate | not applicable        |
|--|--|---|-----------------------|-----------------------|---|-----------------------|
| screening incoming patients  | <input type="radio"/>                  | <input type="radio"/>                           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                           | <input type="radio"/> |
| symptomatic patients wearing masks   | <input type="radio"/>                  | <input type="radio"/>                           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                           | <input type="radio"/> |
| cohorting patients (keeping patients with respiratory symptoms isolated from other patients/staff) | <input type="radio"/>                  | <input type="radio"/>                           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                           | <input type="radio"/> |
| restrict access and control flow of COVID patients through the facility                            | <input type="radio"/>                  | <input type="radio"/>                           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                           | <input type="radio"/> |
| ventilation system   | <input type="radio"/>                  | <input type="radio"/>                           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                           | <input type="radio"/> |
| Airborne Infection Isolation Rooms (AIIR)  | <input type="radio"/>                  | <input type="radio"/>                           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                           | <input type="radio"/> |

|   | appropriate and adequately implemented | appropriate but inadequately implemented | inappropriate         | lacking               | not sure/ don't know what is appropriate | not applicable        |
|---|--|--|-----------------------|-----------------------|--|-----------------------|
| personal hygiene facilities/locker room | <input type="radio"/>                  | <input type="radio"/>                    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                    | <input type="radio"/> |
| house cleaning/disinfection practices   | <input type="radio"/>                  | <input type="radio"/>                    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                    | <input type="radio"/> |
| laundry cleaning practices              | <input type="radio"/>                  | <input type="radio"/>                    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                    | <input type="radio"/> |
| waste disposal practices                | <input type="radio"/>                  | <input type="radio"/>                    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>                    | <input type="radio"/> |

Other (please specify)

29. How would you rate the **adequacy of your training** in regards to working safely with COVID-19?

- excellent
- very good
- good
- neutral
- not so good
- poor
- none at all
- not applicable

## A survey of healthcare workers' experiences during a pandemic

Questions about your workplace or job and working conditions

30. How many **hours** did you work **last week**?

31. How many **hours** do you anticipate working **this week**?

32. Which **union** are you a member of?

33. Do you hold **any position(s)** with this union? If so, please specify:

34. To what extent would you agree that **the union** is doing its best to protect its members?

- strongly agree
- agree
- neutral
- disagree
- strongly disagree

35. To what extent would you agree that **the employer** is doing its best to protect you and others on the job?

- strongly agree
- agree
- neutral
- disagree
- strongly disagree

36. To what extent would you agree that **the government authorities** are doing their best to support workers?

- strongly agree
- agree
- neutral
- disagree
- strongly disagree

37. To what extent would you agree your **health & safety committee** or **representatives** are doing their best to ensure workers are protected?

- strongly agree
- agree
- neutral
- disagree
- strongly disagree
- not sure/ don't know
- there is no health & safety committee or representative

38. Are you a **supervisor/manager**?

Yes

No

39. What type of **healthcare facility** do you work in?

hospital

out patient clinic

long-term care facility

clinical labs

hospice

Other (please specify)

40. Which **department(s)** are you currently working in:

41. What is **your current job**?

42. **How long** have you worked for your current employer?

months:

years:

43. Briefly describe **the type of tasks** involved in doing your current job:

44. Are you currently working at your **usual job** or have you been **redeployed**?

- working at usual job
- same job but in a different area/dept
- same job but for a different workplace
- different job but some area/dept
- different job in a different area/dept
- different job in a different workplace

Other (please describe):

45. **How many employees** work in the organization you work for?

- less than 20
- 20-49
- 50-99
- 100-250
- 250-1000
- 1000-5000
- more than 5000

# A survey of healthcare workers' experiences during a pandemic

## Resilience

How well do these **descriptions fit you** as a person?

46. I can rely on my own abilities in **difficult situations**.

- fits perfectly
- fits well
- fits somewhat
- fits only slightly
- does not fit at all

47. I am able to **solve most problems** on my own.

- fits perfectly
- fits well
- fits somewhat
- fits only slightly
- does not fit at all

48. I can usually solve even **challenging and complex tasks** well.

- fits perfectly
- fits well
- fits somewhat
- fits only slightly
- does not fit at all

49. To what extent would you agree with this statement: "Under these current circumstances I feel like **my contribution at work is more important than ever.**"

- strongly agree
- agree
- neutral
- disagree
- strongly disagree



## A survey of healthcare workers' experiences during a pandemic

### Questions about your **current** psychosocial work environment

The following questions are about your psychosocial work environment. Please choose the answer that fits best to each of the questions.

50. How would you rate the **psychological health & safety climate** in your workplace?

- healthy/supportive
- good
- fair
- neutral
- not so good
- poor
- toxic

51. To what extent would you agree that the culture of this organization **tolerates behavior that harms the mental health** of those who work here?

- strongly agree (this organization **tolerates** such behaviours)
- agree
- neutral
- disagree
- strongly disagree (this organization **does not tolerate** such behaviours)

52. Do you have to work very fast?

- always
- often
- sometimes
- seldom
- never/hardly ever

53. Do you work at a high pace throughout the day?

- to a very large extent
- to a large extent
- somewhat
- to a small extent
- to a very small extent

54. At your place of work, are you informed well in advance concerning, for example, important decisions, changes, or plans for the future?

- to a very large extent
- to a large extent
- somewhat
- to a small extent
- to a very small extent

55. Do you receive all the information you need in order to do your work well?

- to a very large extent
- to a large extent
- somewhat
- to a small extent
- to a very small extent

56. Are contradictory demands placed on you at work?

- to a very large extent
- to a large extent
- somewhat
- to a small extent
- to a very small extent

57. Do you sometimes have to do things which ought to have been done in a different way?

- to a very large extent
- to a large extent
- somewhat
- to a small extent
- to a very small extent

58. How often would your immediate superior be willing to listen to your problems at work, if needed?

- always
- often
- sometimes
- seldom
- never/hardly ever

59. How often would you get help and support from your immediate superior, if needed?

- always
- often
- sometimes
- seldom
- never/hardly ever

60. How often could you get help and support from your colleagues, if needed?

- always
- often
- sometimes
- seldom
- never/hardly ever

61. Is there a good atmosphere between you and your colleagues?

- always
- often
- sometimes
- seldom
- never/hardly ever

62. How often do you get help and support from your family/friends outside of the workplace, when you need it?

- always
- often
- sometimes
- seldom
- never/ hardly ever

# A survey of healthcare workers' experiences during a pandemic

## A few demographic questions

63. How old are you?

- Under 18
- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65+

64. Which of the following reflect your **personal identity**? (check all that apply):

- Female
- Male
- Transgender
- Non-binary
- Lesbian
- Gay
- Queer
- 2 Spirit
- Aboriginal
- Visible minority/racialized
- Disabled

Other (please specify)

65. This week, how long was your typical commute to or from work (single journey)?

- less than 20 minutes
- 20 to 39 minutes
- 40 minutes to 1 hour
- 1 to 1.5 hours
- 1.5 to 2 hours
- more than 2 hours

66. How did you get to work this week (check all that apply)?

- my own vehicle
- car pool with others
- bus/street car
- subway
- walk (more than a couple of blocks)
- bicycle

Other (please specify)

67. Is your workplace **located** in an area best described as:

- urban
- suburban
- rural

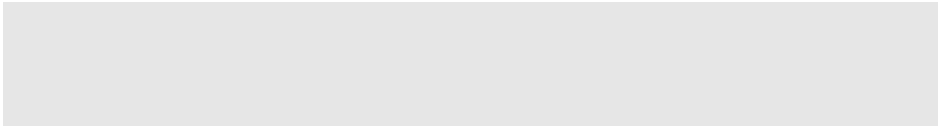
68. Which **province** do you work in?



## A survey of healthcare workers' experiences during a pandemic

Final comments:

69. Any further **comments** and/or **suggestions/ideas** that might help you do your job more effectively:



## A survey of healthcare workers' experiences during a pandemic

### Resources

Answering questions about conditions in your workplace may stir up **uncomfortable thoughts and feelings**. **If you would like to talk to someone** about them, these phone numbers are for services that can direct you to appropriate help:

**Crisis Services Canada**, enables callers anywhere in Canada to access crisis support by phone, in French or English: toll-free **1-833-456-4566** (available 24/7)

**Ontario COVID-19 Mental Health Network** <https://covid19therapists.com>

Ontario Crisis Line – All Ages 1-866-531-2600

Ontario College and University Students 1-866-925-5454

Ontario York and Simcoe Support Services Network 1-855-310-COPE (2673)

Ontario – Kenora, Dryden, Fort Frances, Rainy River and everywhere in between 1-866-888-8988

Alberta Crisis Line – All Ages 403-266-4357

British Columbia Crisis Line – All Ages 1-800-SUICIDE

British Columbia Mental Health Support 310-6789

BC211 – Referral Hotline 24/7 Dial 211

Manitoba Crisis Line – All Ages 1-877-435-7170

New Brunswick Crisis Line – All Ages 1-800-667-5005

Newfoundland and Labrador Line All Ages 1-888-737-4668

NWT All Ages 24/7 1-800-661-0844

Nova Scotia Crisis Line – All Ages 1-888-429-8167

Nunavut Line – All Ages 7 pm-11 pm (EST) 1-800-265-3333

Prince Edward Island Crisis Line – All Ages 1-800-218-2885

Quebec National Crisis Line – All Ages 1-866-277-3553

Saskatchewan Crisis Line – All Ages 1-306-525-5333

Yukon Crisis Line – All Ages 7 pm-12 am (PST) 1-844-533-3030

KidsHelpPhone Ages 20 Years and Under in Canada 1-800-668-6868

First Nations and Inuit Hope for Wellness 24/7 Help Line 1-855-242-3310

Canadian Indian Residential Schools Crisis Line 1-866-925-4419

Trans LifeLine – All Ages 1-877-330-6366