Return to Work Survey

The Governor’s stay at home order is set to expire May 15, and at this point in time, it remains unclear what will happen going forward. Whether the stay at home order is ended, extended, or if there will be a staged approach to getting back to the office, we need to prepare ourselves for that situation. So, in anticipation of this next phase, we’d like to gather information from all of you to help us prepare for what this might look like for the League.

The reality is that we are all dealing with a change of circumstances due to the COVID-19 crisis, and some of these issues may spill over into our return to work. In order for us to properly consider those challenges, we need your help. We’ve developed this survey to provide everyone an opportunity to share your thoughts on how returning to work might impact you, logistically, mentally, and physically.

Thinking about returning to work and your own personal circumstances related to COVID-19, such as childcare needs, health issues (yours or a close family member), anxiety about being around others, etc., please answer the questions below. Your responses will be anonymous so please don’t hesitate to share your honest and thoughtful feedback.

1. **What personal concerns do you have about physically returning to work in our office?**
   For example, do you have COVID-related anxiety about being around others, or do you have concerns over an existing health issue (yours or a close family member), etc. Please note that you do not need to share the details of any existing health issues.
   a. **What could ease/eliminate those concerns?**

2. **What personal challenges might you encounter by physically returning to work in our office as a result of COVID?**
   For example, does your child need day care but the facility/provider is closed, or is childcare available but you don’t feel comfortable sending them right now? What other types of challenges might you encounter? Please describe below, and note that you do not need to share details about specific health issues.
   a. **What could be done to ease/eliminate those challenges?**

3. **Is there any other information or concerns that you would like to raise?**
   a. **What suggestions, if any, do you have to address those concerns?**