



### Employee Survey

- 1. How did you hear about the Employee Assistance Program (EAP)? \_\_\_\_\_
- 2. Was this the first time you contacted the EAP? \_\_\_\_\_
- 3. What was the primary reason for contacting the EAP? \_\_\_\_\_
- 4. How effective was the EAP case manager in listening to and addressing your problem or concern?

Very Effective 5            4            3            2            1 Ineffective

- 5. How satisfied were you with the EAP case manager’s response time to your request for assistance?

Very Satisfied 5            4            3            2            1 Unsatisfied

- 6. Since using the EAP, how much has your quality of life improved?

\_\_\_ 0%            \_\_\_ 25%            \_\_\_ 50%            \_\_\_ 75%            \_\_\_ 100%

- 7. Did your manager require you to contact the EAP?            YES            NO

- 8. Since using the EAP, how much has your job performance improved?

\_\_\_ 0%            \_\_\_ 25%            \_\_\_ 50%            \_\_\_ 75%            \_\_\_ 100%

- 9. What other services can we provide to continue meeting your needs?

\_\_\_\_\_

\_\_\_\_\_

- 10. Who is your managed care/insurance company? (i.e.: Aetna, Oxford, etc.) \_\_\_\_\_

- 11. How satisfied are you with their response to your problem or concern?

Very Helpful 5            4            3            2            1 Not Helpful            Not Applicable

Additional Comments:

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\_\_\_\_\_

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*Survey results are confidential.*