Thinking about the intervention and how it will affect you, please select the extent to which you agree or disagree with the following statements (from 1 for “strongly disagree” to 5 for “strongly agree”).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A change is needed to improve performance in our facility. | 1 | 2 | 3 | 4 | 5 |
| Our facility needs to change the way we do some things. | 1 | 2 | 3 | 4 | 5 |
| I believe that this change will improve the performance of our facility. | 1 | 2 | 3 | 4 | 5 |
| This change is correct for our situation. | 1 | 2 | 3 | 4 | 5 |
| I believe that this change is appropriate for our facility. | 1 | 2 | 3 | 4 | 5 |
| This change matches the priorities of our facility. | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| I am confident that I have the skills and knowledge to perform successfully after this change is made. | 1 | 2 | 3 | 4 | 5 |
| When our facility implements this change, I feel I can handle my work effectively. | 1 | 2 | 3 | 4 | 5 |
| With training, I am confident that I will be able to perform my tasks well. | 1 | 2 | 3 | 4 | 5 |
| This change will help me perform my job better. | 1 | 2 | 3 | 4 | 5 |
| This change will be beneficial for the community we serve. | 1 | 2 | 3 | 4 | 5 |
| This change makes my job easier. | 1 | 2 | 3 | 4 | 5 |
| I am excited by this change. | 1 | 2 | 3 | 4 | 5 |
| I feel glad that this organizational change is going to be implemented. | 1 | 2 | 3 | 4 | 5 |
| I have a good feeling about this change. | 1 | 2 | 3 | 4 | 5 |
| I feel stressed by this change. | 1 | 2 | 3 | 4 | 5 |
| I generally consider change to be a negative thing. | 1 | 2 | 3 | 4 | 5 |
| I feel more comfortable when things stay the same. | 1 | 2 | 3 | 4 | 5 |
| I would rather not change the way I do things at work. | 1 | 2 | 3 | 4 | 5 |

Now, thinking about your team, the group of individuals with whom you work most closely on a day-to-day basis, please select the extent to which you agree or disagree with the following statements (from 1 for “strongly disagree” to 5 for “strongly agree”).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Achieving this change as a team is well within our reach. | 1 | 2 | 3 | 4 | 5 |
| This team can support its members as they adjust to change. | 1 | 2 | 3 | 4 | 5 |
| This team can handle the challenges that might arise in implementing this change. | 1 | 2 | 3 | 4 | 5 |
| This team can coordinate tasks so that implementation goes smoothly. | 1 | 2 | 3 | 4 | 5 |
| This team believes this change will be beneficial for our facility. | 1 | 2 | 3 | 4 | 5 |
| This team wants to implement this change. | 1 | 2 | 3 | 4 | 5 |
| This team values this change. | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| If you make a mistake on this team, it is often held against you. (For example, you are punished harshly, or others remind you of your mistake often.) | 1 | 2 | 3 | 4 | 5 |
| Members of this team are able to bring up problems and tough issues. | 1 | 2 | 3 | 4 | 5 |
| It is safe to take a risk on this team. (For example, if you see someone making a mistake, you can speak up and point it out without being punished.) | 1 | 2 | 3 | 4 | 5 |
| It is difficult to ask other members of this team for help. | 1 | 2 | 3 | 4 | 5 |
| This team looks for opportunities to develop new skills and knowledge. | 1 | 2 | 3 | 4 | 5 |
| This team likes challenging and difficult assignments that teach new things. | 1 | 2 | 3 | 4 | 5 |
| This team is willing to take risks on new ideas in order to find out what works. | 1 | 2 | 3 | 4 | 5 |
| This team sees learning and developing skills as very important. | 1 | 2 | 3 | 4 | 5 |

Thinking about your facility in general, please select the extent to which you agree or disagree with the following statements (from 1 for “strongly disagree” to 5 for “strongly agree”).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| In this facility, people are open to alternative ways of getting work done. | 1 | 2 | 3 | 4 | 5 |
| In this facility, people value new ideas. | 1 | 2 | 3 | 4 | 5 |
| This facility frequently seeks new information that leads us to make important changes. | 1 | 2 | 3 | 4 | 5 |
| Our senior leaders have encouraged all of us to embrace this change. | 1 | 2 | 3 | 4 | 5 |
| Information provided to us about the change is clear. | 1 | 2 | 3 | 4 | 5 |
| We are sufficiently informed of the progress of change. | 1 | 2 | 3 | 4 | 5 |
| Our leaders are able to address concerns and provide clarity about the change process. | 1 | 2 | 3 | 4 | 5 |
| Facility members were sufficiently consulted during the design of this change. | 1 | 2 | 3 | 4 | 5 |
| Leaders themselves have bought into the change and promote it by behaving in a manner consistent with the change. | 1 | 2 | 3 | 4 | 5 |
| Our leaders are actively involved with the changes. | 1 | 2 | 3 | 4 | 5 |
| Our facility’s leaders have put all their support behind this change effort. | 1 | 2 | 3 | 4 | 5 |
| The majority of my respected peers are dedicated to making this change work. | 1 | 2 | 3 | 4 | 5 |
| Our leaders have a long-term vision beyond this change to strengthen our facility. | 1 | 2 | 3 | 4 | 5 |
| Our leaders and staff are committed to ensure the success of this change moving forward. | 1 | 2 | 3 | 4 | 5 |
| This change aligns well with the priorities of national, regional, and district medical officers. | 1 | 2 | 3 | 4 | 5 |
| National, regional, and district medical officers would support this change and commit to its success. | 1 | 2 | 3 | 4 | 5 |
| This change clashes with national, regional, and district policies. | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| This facility has enough funds to make this change work. | 1 | 2 | 3 | 4 | 5 |
| We have the right staff in this facility to make this change work. | 1 | 2 | 3 | 4 | 5 |
| This facility can manage the data and information necessary to make this change work. | 1 | 2 | 3 | 4 | 5 |
| This facility has the infrastructure to implement this change. | 1 | 2 | 3 | 4 | 5 |
| This facility has the right equipment and supplies to implement this change. | 1 | 2 | 3 | 4 | 5 |

**Sample Demographic Info**

What is your age? \_\_\_\_\_\_\_\_

With which gender do you self-identify?

* Male [ ]
* Female [ ]
* Non-binary/other [ ]
* Prefer not to answer [ ]

What is your title/role at the facility? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you worked in this facility? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you been working in your current role? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_